

# United States Senate

WASHINGTON, DC 20510

March 7, 2018

The Honorable Thad Cochran  
Chairman  
Committee on Appropriations  
United States Senate  
Washington, DC 20510

The Honorable Patrick Leahy  
Ranking Member  
Committee on Appropriations  
United States Senate  
Washington, DC 20510

Dear Chairman Cochran and Ranking Member Leahy:

As you work to finalize funding for fiscal year (FY) 2018, we urge you to provide robust direct funding to tribal communities to address the disparate impacts of the opioid crisis in Indian Country. Congress must undertake significant investments in programs that aid in the prevention, treatment, and recovery from opioid misuse in Native communities and strengthen the federal government's commitment to fulfilling its trust and treaty responsibilities.

The country is well aware of the impacts of the opioid epidemic on both rural and urban communities alike, but many are unaware of the disproportionate impact of the opioid epidemic on American Indians and Alaska Natives (AIANs). According to the Center for Disease Control (CDC), in 2015, AIANs had the highest overdose death rates compared to all other races, and the largest percentage change increase in the number of deaths over time.<sup>1</sup> A roundtable called by the Senate Committee on Indian Affairs last November revealed that many of the factors exacerbating the opioid epidemic in Indian country are rooted in longstanding health challenges (e.g., scarce resources, geographic isolation, and historical trauma) and failed Congressional attempts to include Native communities in prevention and treatment efforts.<sup>2</sup>

The recent agreement to raise overall spending caps included a bipartisan commitment to invest an additional \$6 billion to combat the opioid epidemic over the next two years. This new investment provides an opportunity to mitigate the unique challenges faced by tribes in effectively responding to addiction, and call on the Appropriations Committee and our colleagues in the Senate to include solutions that are effective in Indian Country.

Those in Indian Country face historically low access to quality health care, including behavioral health services, which could aid in the prevention, treatment, and recovery of opioid abuse. For example, the chronically underfunded Indian Health Service experiences vacancy rates near 20 percent for physicians, nurses, and other key clinical providers. As a result, facilities in many tribal communities are forced to reduce access to critical medical services, threatening

---

<sup>1</sup> Mack, K., Jones, C., & Ballesteros, M. (2017). *Illicit Drug Use, Illicit Drug Use Disorders, and Drug Overdose Deaths in Metropolitan and Nonmetropolitan Areas — United States*. Centers for Disease Control and Prevention. Retrieved from <https://www.cdc.gov/mmwr/volumes/66/ss/ss6619a1.htm>.

<sup>2</sup> *Roundtable on Confronting the Crisis: The Opioid Epidemic in Indian Country* before the S. Comm. on Indian Affairs, 115th Cong. (Nov. 9, 2017).

accreditation by the Centers for Medicare and Medicaid Services.<sup>3</sup> In addition, tribal communities in rural areas often do not have access to substance use disorder treatment and prevention programs, and there are few resources to address long-term recovery. We must ensure that those who want and need treatment have access, and that means investing in programs that work to stop the cycle of addiction.

The impact of the opioid crisis extends beyond the addicted individual. Many tribes have dedicated their own resources to improve access to treatment and recovery services for their members, but they continue to struggle to find further resources to address the secondary impacts of addiction in their communities – especially, the impacts on children and families of individuals fighting addiction. As more children are removed from their homes due to their parents' addiction issues, foster care systems and kinship care networks are strained.<sup>4</sup> Mental and behavioral health services for these children are critical to help them process the trauma and related challenges. Funding to address the crisis must take a holistic approach and support these families and communities to put them on a path to healing and improve outcomes.

We encourage the final FY 2018 appropriations legislation to provide flexibility for tribes to use the addiction prevention and treatment resources provided for in the recent budget agreement. Tribes require flexibility to develop culturally-based programs that suit the unique behavioral health and addiction-response needs of their communities – particularly as many tribal communities face additional crises such as methamphetamine use and suicide. As we have seen through the success of the Special Diabetes Program for Indians, tribes are able to effectively address their unique challenges when given the flexibility to design their own programs.

Allocating funding directly to tribes to address opioid and other substance use challenges is a step forward in fulfilling the federal government's trust and treaty responsibilities. We appreciate the Committee's attention to this matter, and we look forward to working with you to make this critical investment in Indian Country. Thank you for your consideration of this important request.

Sincerely,



Heidi Heitkamp  
United States Senator



Tom Udall  
United States Senator

---

<sup>3</sup> U.S. Dept. of Health and Human Services, Office of Inspector General. (2016). *Indian Health Service Hospitals: Longstanding Challenges Warrant Focused Attention to Support Quality Care*. (Report No. OEI-06-14-00011).

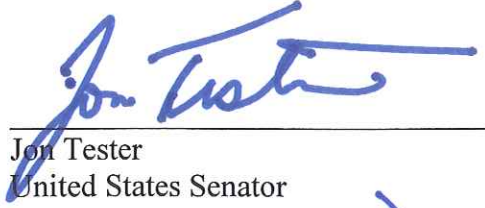
<sup>4</sup> *Roundtable on Confronting the Crisis: The Opioid Epidemic in Indian Country* before the S. Comm. on Indian Affairs, 115th Cong. (Nov. 9, 2017), Tr. at 33-34 (2017) (statement of Jeri Jasken); *id.*, at 31-32 (statement of Vickie Bradley).



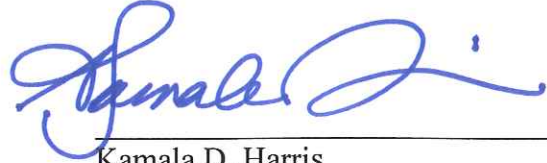
Martin Heinrich  
United States Senator



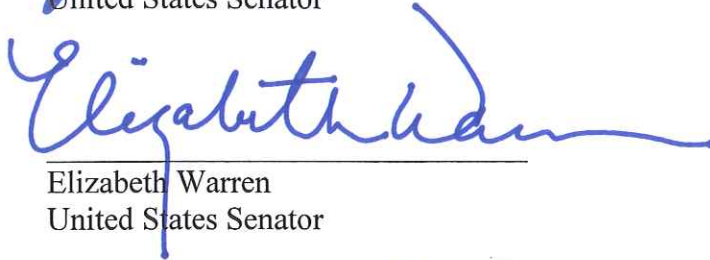
Catherine Cortez Masto  
United States Senator



Jon Tester  
United States Senator



Kamala D. Harris  
United States Senator



Elizabeth Warren  
United States Senator



Tina Smith  
United States Senator



Maria Cantwell  
United States Senator



Tammy Baldwin  
United States Senator