March 26, 2020

Pete T. Gaynor
Administrator
Federal Emergency Management Agency
500 C Street SW
Washington, DC 20472

Denise Bambi Kraus
National Tribal Affairs Advisor,
Intergovernmental Affairs Division
Federal Emergency Management Agency
500 C Street SW
Washington, DC 20472

Dear Administrator Gaynor and National Tribal Advisor Kraus,

I am writing to inquire about the Federal Emergency Management Agency (FEMA) planned response to the Novel Coronavirus (COVID-19) and the impacts this world pandemic will have on Indian Country.

Earlier this week, I hosted a call with the Indian Health Services (IHS) and Members of the House Committee on Natural Resources to inquire about their agency’s response to COVID-19. Among the many concerns occurring on the ground is the anticipated increase of critical COVID-19 cases in Indian Country and the preparedness of staff on the ground to adequately respond to tribal members. When we asked IHS about this, they deferred to your agency and its projected emergency planning especially as it relates to medical response units. To assist the Committee’s oversight of this issue, please provide the following documents and information as soon as possible, but no later than April 10th:

1) What is your agency doing to ensure tribal areas remain a top priority in FEMA’s plan to address COVID-19 in Indian Country?

2) What are FEMA’s plans for addressing COVID-19 in Indian Country given high rates of underlying risk conditions and notably constrained health resources?
   a. Do FEMA plans include trainings and supplemental health providers to ensure tribes have an adequate number of trained staff to respond?

3) Will FEMA assist with improving access to testing, return of lab results and tracking in Indian Country?

4) In the event of constrained access, will FEMA work to establish the coordination of safe transportation of a presumptive or positive COVID-19 patient from an IHS facility or urban Indian health organization to another healthcare facility equipped to treat a COVID-19 patient?
5) If a hospital is too overwhelmed to accept incoming positive COVID-19 cases from tribal facilities, what is FEMA’s plan to provide additional medical response facilities or triage units?
   a. Will this include intensive care units, staff and adequate ventilators?
   b. Will FEMA’s determination for placement of field hospitals include the proximity for tribal communities?
   c. Does FEMA have plans to supplement hospitals operating near tribal reservations to account for an increased need by tribal populations?

6) How will you address self-quarantine issues, including isolation rooms, and needed step down or recovery care facilities in Indian Country?

7) Is FEMA willing to revise, or waive funding match provisions for tribes in need of immediate emergency federal funding to address COVID-19 cases?

A timely response to the questions above would be appreciated, and considering the changing nature of this pandemic, I welcome a conference call with Members of my Committee as soon as feasible in response to this inquiry. Please contact Naomi Miguel with the Subcommittee for Indigenous Peoples of the United States at Naomi.Miguel@mail.house.gov or (202) 225-6065 with any questions about this request.

Thank you for your attention to this matter.

Sincerely,

Raúl M. Grijalva
Chairman
Committee on Natural Resources