

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**STATEMENT**

**OF**

**ROBERT McSWAIN**

**ACTING DIRECTOR**

**INDIAN HEALTH SERVICE**

**BEFORE THE**

**HOUSE NATURAL RESOURCES SUBCOMMITTEE ON INDIAN, INSULAR**

**AND ALASKA NATIVE AFFAIRS**

**HEARING ON**

**H.R. 521 - TO PROVIDE FOR THE CONVEYANCE OF CERTAIN PROPERTY**

**TO THE YUKON-KUSKOKWIM HEALTH CORPORATION LOCATED IN**

**BETHEL, ALASKA**

**April 14, 2015**

## **STATEMENT OF THE INDIAN HEALTH SERVICE**

Chairman Young and Members of the Committee:

Good morning. I am Robert McSwain, Acting Director of the Indian Health Service (IHS). I am pleased to have the opportunity to testify on H.R. 521, a bill to provide for the conveyance of certain property to the Yukon Kuskokwim Health Corporation (YKHC) located in Bethel, Alaska.

The Indian Health Service (IHS) plays a unique role in the Department of Health and Human Services (HHS) because it is a health care system that was established to meet the federal trust responsibility to provide health care to American Indians and Alaska Natives (AI/ANs). The mission of the IHS, in partnership with American Indian and Alaska Native people, is to raise the physical, mental, social, and spiritual health of AI/ANs to the highest level. The IHS provides comprehensive health service delivery to approximately 2.2 million AI/ANs through 28 hospitals, 62 health centers, 25 health stations, and three school health centers. Tribes also provide healthcare access through an additional 18 hospitals, 282 health centers, 150 Alaska Village Clinics, 80 health stations, and 4 school health centers. In support of the IHS mission, the IHS and Tribes provide access to functional, well maintained, and accredited health care facilities and staff housing.

H.R. 521 would provide for the conveyance of certain property located in Bethel, Alaska from the Federal Government to the YKHC in Bethel, Alaska. YKHC assumed responsibility for the provision of the IHS-funded health care services in 1992 under the authority of the Indian Self-Determination and Education Assistance Act (ISDEAA). The Federal property described in H.R. 521 is used in connection with health and related programs in Bethel, Alaska by the YKHC. On September 18, 2014, the YKHC requested transfer of approximately 23 acres of Federal property in Bethel, Alaska. On December 20, 2014, the IHS informed YKHC of its intent to fulfill YKHC's request by transferring the property via quitclaim deed. The IHS, in collaboration with the YKHC, is currently preparing documentation necessary to transfer the property via quitclaim deed. H.R. 521 would provide for conveyance of the Bethel property from the United States to YKHC by use of a warranty deed. The documentation currently being prepared related to environmental conditions of the property would also support transfer via warranty deed.

IHS supports the transfer as furthering the Government-to-Government relationship that exists with American Indian and Alaska Native tribal governments. It is important to emphasize that, as a normal practice, IHS does not transfer properties via the warranty deed mechanism.

IHS believes there are technical issues with some of the bill's language pertaining to environmental liability and the revisionary clause and would like the opportunity to

work with the committee to provide technical assistance on these matters

We believe that reasons to use a warranty deed mechanism in future cases are limited. IHS anticipates no conflicts related to work currently underway to transfer the property via quitclaim if it is eventually determined that the property will be transferred via warranty deed. Traditionally, Alaska Tribes and Tribal Health Organizations (T/THO) have preferred to leave the title of their facilities previously operated by the IHS with the Federal Government, and the majority of the health care facilities used by the Tribes in the other 35 states are located on tribally owned lands. This warranty deed transfer would be the fifth of its kind in Alaska. IHS recently issued four warranty deeds authorized by Congress to transfer parcels of land to the Maniilaq Association and Alaska Native Tribal Health Consortium previously transferred through a quitclaim deed. On other numerous occasions properties were transferred to T/THOs through quitclaim deeds.

We think retrocession is unlikely. We can count only four retrocessions since the enactment of ISDEAA in 1975. Three were only small program components which have been re-assumed by the Tribes. None of these retrocessions was in the Alaska Area.

We look forward to working with you, Mr. Chairman, on measures to improve the health of the Alaska Native population. Mr. Chairman, this concludes my testimony. I appreciate the opportunity to appear before you to discuss H.R. 521. I will be happy to answer any questions the committee may have. Thank you.