

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**INTRADEPARTMENTAL COUNCIL**  
**ON**  
**NATIVE AMERICAN AFFAIRS**  
**REVISED CHARTER**

**March 7, 2005**

# **Department of Health and Human Services**

## **Intradepartmental Council on Native American Affairs**

### **CHARTER**

#### **I. NAME**

The name of the Council shall be the Secretary's Intradepartmental Council on Native American Affairs (ICNAA).

#### **II. PURPOSE**

A. The ICNAA is organized for the following purposes:

1. To develop and promote a Department of Health and Human Services (HHS) policy to provide greater access and quality services for American Indians, Alaska Natives and Native Americans (AI/AN/NAs) throughout the Department and where possible, the Federal government.
2. To promote implementation of HHS policy and HHS agency plans on consultation with AI/AN/NAs and Tribal Governments in accordance with statutes and executive orders.
3. To identify and develop legislative, administrative, and regulatory proposals that promote an effective, meaningful AI/AN/NA policy to improve health and human services for AI/AN/NAs.
4. To identify and develop a comprehensive Departmental strategy proposal that promotes self-sufficiency and self-determination for all AI/AN/NA people.
5. To promote the Tribal/Federal government-to-government relationship on a Department-wide basis in accordance with Presidential Executive Order.

#### **III. FUNCTIONS**

A. The functions of the ICNAA shall include, but not be limited to, the following:

1. Promote the highest quality health, social and economic well-being of AI/AN/NA people by enhancing the consultation processes with AI/AN/NAs, tribal leaders and local communities that provide substantial input in the design of Federal policies affecting AI/AN/NAs.

2. Promote a Departmental strategy to provide a comprehensive service delivery system for AI/AN/NAs, which identifies and targets priority needs in the AI/AN/NA Community and focuses on interagency coordination with other Departments and non-Federal organizations to meet these needs.
3. Monitor and evaluate Departmental activities and established Secretarial initiatives.
4. Provide recommendations for developing short, intermediate and long-range solutions to improve AI/AN/NA policy and programs that target AI/AN/NAs.
5. Coordinate the preparation of the annual report to Congress on the social and economic conditions of AI/AN/NAs by collecting, organizing, analyzing, interpreting and evaluating information and data.
6. Distribute information, data and statistics that accurately describe the needs of AI/AN/NAs and the Departmental resources being expended to meet these needs.
7. Assist the Office of Intergovernmental Affairs (IGA) with the preparation of an annual report describing HHS Tribal Consultation activities.

B. Consultation with Tribal Governments

Executive Order 13175 (November 2000) reiterates the government-to-government relationship and the requirement that each Department develop a mechanism to consult with Tribal Governments.

Consistent with recommendations of the HHS Working Group on Consultations with AI/AN/NAs, it is the policy of the Department to consult with AI/AN/NA people to the greatest practicable extent and to the extent permitted by law before taking actions that affect these governments and people.

HHS defines consultation as:

“Consultation is an enhanced form of communication which emphasizes trust, respect and shared responsibility. It is an open and free exchange of information and opinion among parties which leads to mutual understanding and comprehension. Consultation is integral to a deliberative process which results in effective collaboration and informed decision making.”

HHS has completed consultation plans developed by each of its Divisions, including a consultation plan for the Office of the Secretary, that include a defined process for early inclusion of Tribal Governments and other AI/AN/NA people in the decision-making process, and identifies specific mechanisms that will be used for consultation purposes.

The IGA has lead responsibility for HHS consultation, including consultations with Tribal Governments and AI/AN/NA communities, and serves as the HHS central point of contact for AI/AN/NA governments and their representative organizations. The ICNAA will advise and assist the IGA with Department-wide implementation of the HHS Tribal Consultation policy.

#### IV. **AUTHORITY**

This Charter was initially established for the Intradepartmental Council on Indian Affairs by HHS. The Charter was amended to reflect responsibilities of the Intradepartmental Council on Native American Affairs, authorized by the Native American Programs Act Amendments of 1992 (Public Law 102-375, Title VIII, Subtitle C). The Intradepartmental Council on Native American Affairs, which is responsible for achieving the purposes set forth in this Charter, is established in the Immediate Office of the Secretary, with ICNAA oversight provided by the Secretary's Office and ICNAA executive direction provided by the Office of Intergovernmental Affairs.

The Native American Programs Act of 1974, as amended, identifies the Commissioner, Administration for Native Americans, as the ICNAA Chairperson and further specifies that the ANA Commissioner shall advise the Secretary on all HHS matters affecting AI/AN/NAs. The Act also identifies the Director, Indian Health Service, as the ICNAA Vice Chairperson. Under the authority of the Indian Health Care Improvement Act, as amended (Section 201(a), Public Law 94-437), the IHS Director is responsible for meeting the health needs of Indians in an efficient and equitable manner.

#### V. **ORGANIZATION**

##### A. **Intradepartmental Council on Native American Affairs**

The ICNAA Chairperson shall coordinate with the Vice Chairperson on all matters pertaining to the operation and function of the ICNAA. The Secretary shall be represented on the ICNAA by his Designee. The Secretary's Designee shall provide direct oversight of the ICNAA through the Office of Intergovernmental Affairs. Executive direction shall be provided to the ICNAA by the IGA.

The principal unit of this body shall be the ICNAA itself, and the actions of this body shall be the actions of the Secretary's Intradepartmental Council on Native American Affairs. The authority exercised by the ICNAA to implement its various actions is the authority of the ICNAA and not the individual authority of its respective members. This authority shall always rest within the ICNAA, but may be delegated to Committees, Workgroups, Officers, or representatives, as determined by the ICNAA.

The Executive Director is responsible to the ICNAA Chairperson, and Vice Chairperson. The Executive Director serves as the principal management officer for all ICNAA functions and is the principal ICNAA liaison between and among the ICNAA's membership, the IGA, other member agencies, and other Federal agencies.

The IGA, which is charged with the lead responsibility for coordinating HHS' consultation activities, will coordinate with the ICNAA on HHS efforts to improve and enhance the tribal consultation process, and serve as the principal liaison between the Department and AI/AN/NAs. The Chairperson will report activities of the ICNAA and provide recommendations through the IGA.

B. Executive Committee

The Executive Committee of the ICNAA shall have the authority to act on behalf of the ICNAA in implementing its policies and procedures and shall be responsible to oversee the functions of the ICNAA, and to recommend special actions and subjects for consideration by the full ICNAA.

The Executive Committee shall also be responsible for assisting HHS legislative efforts on behalf of Tribal Governments and AI/AN/NA communities; recommending special actions; expediting intra and inter-departmental agreements designed to consolidate resources addressing the needs of AI/AN/NAs; and evaluating new services and programs resulting from the ICNAA's initiatives.

On behalf of the ICNAA, the Executive Committee shall maintain a continuous dialogue with the representatives of AI/AN/NA communities, other HHS offices, and other Federal agencies. This shall include participation in the HHS annual tribal budget consultation meeting, and in other forums and venues as may be identified by the ICNAA, at the direction of the Secretary, ICNAA Chairperson, Vice Chairperson and IGA.

The membership of the Executive Committee shall be:

- Commissioner, Administration for Native Americans;
- Director, Indian Health Service;
- Assistant Secretary, Administration for Children and Families;
- Assistant Secretary, Administration on Aging;
- Assistant Secretary, Budget, Technology and Finance
- Assistant Secretary for Health; and
- Director, Office of Intergovernmental Affairs.

C. Other Committees

The ICNAA is authorized to designate and empower committees and other bodies, as it may deem necessary. Generally, such committees shall be established to explore specific issues and to perform such other actions as identified by the ICNAA.

HHS agencies that have established Workgroups, Subcommittees, Commissions, or other entities to address AI/AN/NA issues, that include interagency membership of two or more HHS agencies, shall obtain approval from the Executive Committee and report to the ICNAA on the purpose, goals, objectives, progress and outcomes, and identify how these entities support and promote the Secretary's activities and initiatives, etc.

D. Presiding Officer

The presiding officer of the ICNAA shall be the Chairperson, who is charged with the overall direction of the ICNAA. The Chairperson shall preside over all ICNAA activities, including meetings of the ICNAA and the Executive Committee. The Chairperson shall coordinate direction of the ICNAA with the Vice Chairperson. In the absence of a Chairperson or a Secretarial-appointed Designee, the Vice Chairperson shall preside over all ICNAA activities.

The ICNAA Chairperson, through the Executive Director, will be responsible for the flow of information between and among participating ICNAA members, the Department, and other interested parties. As part of this function, the Chairperson will provide periodic reports to the Secretary's Designee and the IGA for use within and outside HHS.

On behalf of the ICNAA, the Chairperson, Vice Chairperson or their designee shall represent the ICNAA at all meetings relevant to the purposes of the ICNAA. The Chairperson shall make recommendations to the Secretary for all other appointments, officers, representatives and staff, as shall be considered necessary and appropriate to accomplish the functions of the ICNAA.

E. Membership

The ICNAA membership shall be appointed by the Secretary of HHS. As authorized by Public Law 102-375, the membership of the ICNAA shall be the heads of principal operating divisions within the Department, as determined by the Secretary, and such persons in the Office of the Secretary as the Secretary may designate. Specific positions, including those designated by the Secretary, are identified in an attachment to the Charter.

VI. COUNCIL ADMINISTRATION

A. Management and Administrative Staff

The ICNAA's Executive Director is responsible for the management and administration of ICNAA activities; the administration of funds provided for ICNAA activity; and in consultation with the Executive Committee, preparation of agendas for meetings, and maintaining the records of all ICNAA business, including the preparation and dissemination of minutes from ICNAA meetings.

ICNAA staff shall be provided to the ICNAA through the Office of the Secretary, as recommended by the ICNAA Chairperson. ICNAA staff shall be directly responsible to the Executive Director. Staff support for the ICNAA may come through personnel details of HHS staff. Staff identified as potential details to the ICNAA should be highly qualified with knowledge and/or experience in AI/AN/NA issues. Detailed employees to the ICNAA will be selected by the Secretary's Office, with input from the ICNAA Chairperson, Vice Chairperson, and Executive Director, and in consultation with the Executive Committee.

Each ICNAA member shall identify at least one staff person to serve as a liaison to the Council. The Council Liaison must be knowledgeable about their respective agency or division's programs and budgets, and have ready access to senior program leadership and be empowered to speak on behalf of their respective HHS agency or division.

The Council Liaisons will be assigned to work with the Executive Director on special projects, when necessary. The IGA, acting through the Senior Advisor for Tribal Affairs, will work directly with the Council Liaisons on the coordination, implementation and ongoing execution of various Departmental initiatives and polices affecting AI/AN/NAs, including, but not limited to, Executive Order 13175 "Consultation and Coordination with Indian Tribal Governments."

Space, equipment, supplies, materials, administrative support, and funds for ICNAA activities will be managed and coordinated by the Executive Director.

B. Meetings

The ICNAA shall meet at such places it considers appropriate, on no less than a bi-annual basis. The Executive Director shall make every effort to provide ICNAA members a thirty-day advance notice of ICNAA meetings.

The Executive Committee, and other established committees or work groups, shall meet with such frequency and at such places as it considers appropriate. The Executive Director shall make every effort to provide Executive Committee members a ten-day advance notice of Executive Committee meetings.

C. Quorum

A majority of voting members of the ICNAA shall constitute a quorum for the transaction of official business.

A quorum for the Executive Committee shall be three (3).

VII. **REPORTS**

The ICNAA is responsible for: 1) preparing an annual report to Congress on the social and economic conditions of Native Americans; 2) preparing quarterly reports/recommendations on the coordination of HHS activities affecting AI/AN/NA for presentation by the Commissioner of ANA to the Secretary; 3) assisting the IGA and the Assistant Secretary for Budget, Technology and Finance with the preparation and dissemination of an annual report on tribal views and recommendations on the HHS budget; and 4) assisting the IGA with the preparation of an annual report describing HHS Tribal Consultation activities.

The ICNAA shall prepare Department-mandated reports and other such reports, publications, documents and information for distribution to other Federal agencies, Tribal Governments and the AI/AN/NA community as it shall consider appropriate.

VIII. **SPECIAL PROJECTS**

The ICNAA may make recommendations to the Secretary regarding special studies, research and development activities or demonstrations to improve the delivery of HHS services and benefits to AI/AN/NA people, consistent with the purposes of the ICNAA.