

# Congress of the United States

Washington, DC 20515

July 29, 2025

The Honorable Robert F. Kennedy Jr.  
Secretary  
U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Washington, DC 20201

The Honorable Benjamin Smith  
Acting Director  
Indian Health Service  
5600 Fishers Lane  
Rockville, MD 20857

Dear Secretary Kennedy and Acting Director Smith:

We write today concerned about recent reports that medical services at the Gallup Indian Medical Center (GIMC) have been suspended or reduced, including critical ultrasound services, due to a new Presidential Appointee Approver and Departmental Efficiency Review (PAA-DER) policy in place as of June 30, 2025.

PAA-DER is reportedly effective throughout the Indian Health Service (IHS), requiring that all IHS contracts and requisitions undergo additional layers of approval. The resulting bottleneck is delaying contract renewals for essential personnel, equipment, and services while also delaying the ability of health care workers to immediately diagnose urgent conditions and putting patients at risk. At GIMC, for example, a patient presenting after hours had to be unnecessarily admitted overnight due to the facility's inability to access diagnostic imaging. Similar delays have affected general surgery, labor and delivery care, and infectious disease testing. GIMC has faced staffing challenges for years, and these new bureaucratic hurdles imposed by PAA-DER are making it harder and more expensive for GIMC to deliver timely, effective care. Unfortunately, these challenges at GIMC are not in isolation, but rather exemplify a disturbing pattern of care disruptions due to administrative delays across the IHS. In short, policies such as PAA-DER are resulting in the exact opposite of efficiency: wasted resources, staffing shortages, and preventable delays in care.

You have made clear commitments to Tribal Nations and Tribal citizens that you would protect their health care interests and uphold the trust and treaty obligations in your tenure as HHS Secretary. But policies such as PAA-DER do not align with those commitments; Tribal leaders and health experts have said that PAA-DER in particular has created a system that undermines the federal government's responsibility and forces Tribes to bear the burden of failed processes they did not create. The ongoing service disruptions are not just bureaucratic missteps, but they are threats to lives and to Tribal sovereignty.

In light of these impediments to service delivery at GIMC, we request that you answer the following questions:

1. When did GIMC begin scaling back ultrasound services, general surgery, labor and delivery care, and other medical services? Please be specific.
2. Prior to GIMC's recent reductions in service, how many open positions did GIMC have in affected departments? Please include a breakdown by department, if possible.
3. After GIMC's recent reductions in service, how many open positions did GIMC have in affected departments? Please include a breakdown by department, if possible.
4. Please identify any efforts IHS is taking to address longstanding staffing shortages in affected departments.
5. Following the recent reductions in services, has IHS taken any steps to address the scaling back of ultrasound services at GIMC? If not, why not?
6. Is IHS taking any steps to address the scaling back of general surgery, labor and delivery care, and reduction in medical-surgical beds at GIMC? If not, why not?
7. How does IHS plan to address longstanding and new recruitment and retention challenges at GIMC? Please include any specific actions taken to address staffing challenges impacting ultrasound, surgical, and labor and delivery services.

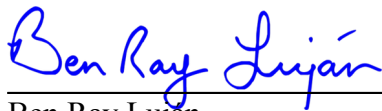
8. Are you aware of any other challenges faced by GIMC resulting in impacts to services? If so, please describe.

In addition, we urge HHS to immediately reverse the decisions that have limited or cut services at GIMC and other IHS facilities. Specifically, we request that you:

1. Ensure all pending contracts and requisitions currently held up by PAA-DER, particularly those impacting direct patient care, at GIMC are expedited.
2. Exempt IHS from the PAA-DER process, recognizing the unique statutory and trust responsibilities the federal government holds to Tribes.

The current situation is unacceptable. Tribal communities deserve the same standard of care and operational efficiency afforded to all Americans. HHS and IHS must act swiftly to reverse these harmful decisions, restore critical services, and fulfill the obligations that the United States has pledged to uphold.

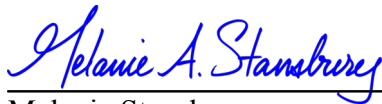
Sincerely,



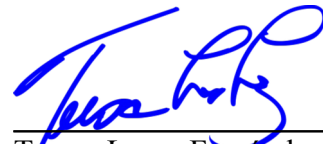
Ben Ray Lujan  
United States Senator



Martin Heinrich  
United States Senator



Melanie Stansbury  
Member of Congress



Teresa Leger Fernandez  
Member of Congress