Unfunded New Programs and Services Authorized in The Indian Health Care Improvement Act

Please rank your top <u>five</u> priorities for Unfunded New Programs and Services Authorized in the Indian Health Care Improvement Act by writing the number in the box to the left of the priority of your choosing, where 1=first choice, 2=second choice, 3=third choice, 4=fourth choice, and 5=last choice.

Sec. 111. Community Health Aid Program (CHAP). New CHAP program, similar to that in Alaska, for other states, excluding dental unless state authorized.		
Sec. 112. Health professional chronic shortage demonstration program. New demonstration programs to address workforce shortages.		
Sec. 123. Diabetes Prevention, Treatment and Control. Scope of SDPI services is expanded to include dialysis.		
Sec. 124. Other authority for provision of services. New long term care and assisted living services.		
Sec. 127. Behavioral Health Training and Community Education Programs. New 500 position comprehensive behavioral health workforce.		
Sec. 132. American Indians Into Psychology Program. New grants to colleges and universities to promote psychology careers.		
Sec. 133. Prevention, Control, and elimination of Communicable and Infectious Diseases. New grants and demonstration projects for disease prevention.		
Sec. 136. Office of Indian Men's and Indian Women's Health. Establish and staff an office of men's health in IHS		
Sec. 143. Indian Health Care Delivery Demonstration Projects. New demonstration projects to test alternative health care models.		
Sec. 146. Indian Country Modular Component Facilities Demonstration Program. Construct new and modular types of facilities to demonstrate effectiveness and value.		
Sec. 147. Mobile Health Stations Demonstration Program. Purchase mobile stations to demonstrate effectiveness and value.		
Sec. 153. Grants to and Contracts with the Service, tribes, etc. to Facilitate Outreach, Enrollment, and Coverage of Indian under SSA and other Benefits Programs. New grants and contracts to facilitate enrollment.		
Sec. 161. Facilities Renovation. Renovation, construction, expansion of urban Indian health facilities.		
Sec. 164. Expand Program Authority for Sec. Urban Indian Organizations. New grants to urban organizations for additional health activities.		
Sec. 165. Community Health Representatives (CHRs). Establish a CHR like program for urban organizations.		
Sec. 166. Use of Federal Government Facilities and Sources of Supply; Health Information Technology. Permits urban organizations to use HHS buildings and equipment and provide new grants to expand I.T. adoption.		
Sec. 173. Nevada Area Office. Establish and staff a new Nevada IHS Area Office.		
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Sec. 709. Inpatient and Community Mental Health Facilities Design, Construction, and Staffing. Construct and staff one inpatient mental health care facility per IHS Area.		
Sec. 710. Training and Community Education	New programs to education officials and community members.	
Sec. 711. Behavioral Health Program. New grants to establish community-based behavioral health services.		
Sec. 712. Fetal Alcohol Spectrum Disorders Programs. Comprehensive FAS training for providers.		
Sec. 713. Child Sexual Abuse and Prevention Treatment Programs. Establish regional demonstration projects and new treatment programs in every service area.		
Sec. 715. Behavioral Health Research. New grants for Indian behavioral health research.		
Sec. 726. Indian Youth Life Skills Development Demonstration Program. New Substance Abuse and Mental Health Services Administration grants.		
Tribal Government (Print):		
Tribal Chairperson/Designee Name (Print):		
Tribal Chairperson/Designee Signature:	Date:	

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