

# NIHB Legislative Update

National Tribal Advisory Committee on Behavioral Health (NTAC)  
Albuquerque, New Mexico  
October 25-26, 2018

# Opioid Crisis Legislation: Overview

- Congress focused efforts in 2018 on comprehensive efforts to address the opioid epidemic.
- Largely was a bipartisan effort and legislation passed the House of Representatives in June (H.R. 6) and the Senate (with amendment) in September.
- Conference Report (final bill) passed both chambers by October, President signed the “SUPPORT for Patients and Communities Act” into law



# Opioid Crisis: NIHB Testimony Cont.

- **Senate Finance Committee (February)**—How Medicare and Medicaid could reimburse costs Tribes incur when treating opioids addiction.
- **Senate Health, Education, Labor, and Pensions (HELP) Committee (February)**—The role of technology and data in preventing and treating addiction.
- **Senate Committee on Indian Affairs (March)** (in person)—Importance of utilizing traditional healing methods for opioid treatment and the need to get direct funding to Tribes.
- **House Energy and Commerce Committee (March)** (in person)— The need for Tribes to be included in national opioids strategies and improving Health Information Technology (IT) within the Indian health system.



# NIHB Opioid Testimony, cont.

- **House Energy and Commerce Committee (April)**— Improving Medicare and Medicaid’s ability to provide care for AI/ANs suffering from opioids addiction.
- **Senate HELP Committee (April)**—Improvements to the Opioid Crisis Response Act (S. 2680, or OCRA).
- NIHB also advocated in testimony to the **House Labor-HHS (April)** and **House Interior (May) Appropriations committees** to include supplemental funding for opioids programs in Indian Country.



# Final Opioid Legislation

- Senate passed the final conference agreement on October 3, 2018 which sent it to the President's desk. The final bill provides improvements to treatment and recovery efforts; prevention; and substance abuse enforcement.
- Tribal specific funding provisions include:
  - 5% Tribal Set-Aside for the State Targeted Response (STR) to opioid grants
  - Up to a 3% Tribal set aside under the Plans of Safe Care program to address maternal and child health issues resulting from the opioid crisis
- The legislation Designates Tribes as eligible entities for federal funding for:
  - Comprehensive opioid recovery centers
  - Providing care to individuals after an opioid overdose
  - Youth prevention and recovery programs
  - Efforts to improve overdose surveillance
  - Technical assistance to Tribes to address surveillance needs and develop and implement prevention and treatment programs
- Language ensuring Tribal sovereignty over Tribal child trauma data



# Labor HHS Appropriations FY 2019

- State Opioid Response Grants – \$50 million Tribal Set-aside (Same as last year)
- Tribal Behavioral Health Grants --\$40 million (+\$10M)
- Medication Assisted Treatment – \$10 million Tribal set aside (+\$5M)
- Good Health and Wellness in Indian Country (CDC) – \$21 million (+\$5M)
- Other programs:
  - the Garrett Lee Smith Suicide Prevention Tribal Set Aside – \$2.9 million (equal to FY18)
  - Tribal set-aside for the Zero Suicide Prevention Initiative – \$2.2 million (+\$200,000)
  - Increases for alcohol/substance use in FY2019 at IHS (included in Interior Approps)



# S. 2545 / H.R. 3704 – Native Behavioral Health Access Improvement Act

- Sen. Tina Smith (D-MN) / Rep. Frank Pallone (D-NJ)
- Developed by NIHB's Youth Policy Fellows in 2017 and passed as a resolution by NIHB's Board in May 2017
- Modeled off of Special Diabetes Program for Indians
  - Proposed \$150 million in mandatory funding per year
- Direct, formula funding (to be determined by Tribes) for Tribal behavioral health programs
- Data collection component, TBD by Tribal input
- Worked to get included in OCRA



# H.R. 3473 / S. 3460: Native American Suicide Prevention Act

- Sen. Elizabeth Warren (D-MA) / Rep. Raul Grijalva (D-AZ)
- Requires a state or state-designated entity receiving support from the Substance Abuse and Mental Health Services Administration (SAMHSA) for development and implementation of a statewide youth suicide early intervention and prevention strategy to agree to collaborate with each of the state's federally recognized Indian Tribes, Tribal organizations, and urban Indian organizations regarding the strategy.

# CARE Act – S. 2700

- Comprehensive Addiction Resources Emergency Act of 2018 (S. 2700)
  - Sen. Elizabeth Warren and Rep. Elijah Cummings
  - Based off Ryan White HIV/AIDS Bill in 1990s
  - Direct funding to Tribes
  - \$400 million per year for 10 years
- NIHB worked on Tribal inclusion during the drafting of the legislative language.

