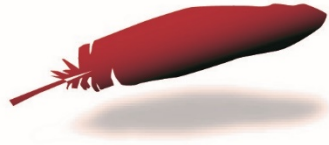


National Indian
Health Board



NIHB UPDATE TO THE IHS DIRECT SERVICE TRIBAL ADVISORY COMMITTEE

MAY 30, 2019

Bah-He-Toya-Mah (Sooner) Davenport
Policy Coordinator-Direct Service Tribes Specialist, Congressional Relations

Indian Health Service Appropriations FY 2020



- House Appropriations Committee passed a \$37.3 billion Interior-EPA spending package
- **IHS funded at \$6.3 billion.** Increases to the IHS budget by \$537 million overall. Other increases include:
 - **Hospitals and Clinics:** \$2.42 billion overall
 - **Mental Health:** \$125.3 million
 - **Alcohol and Substance Abuse:** \$280 million
 - **Health Care Facilities Construction:** \$304.2 million
 - **Indian Health Professions:** \$90.6 million
 - **Urban Indian Health:** \$81 million

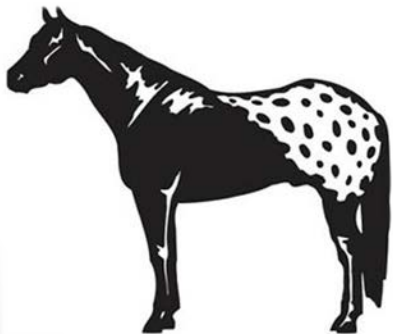


Indian Health Service Appropriations FY 2020

- A major victory in the bill was the rejection of proposed cuts to the Community Health Representatives (CHR) and Health Education line items that were outlined in the FY 2020 President's Budget proposal.
- House bill instead gives a slight **\$25,000 boost to CHR funding**, to a total of \$62.9 million.
- The bill also includes a **\$101,000 increase to Health Education**, to a total of \$20.6 million.
- The legislation includes \$53 million to help address 105(l) leases, \$17 million above the 2019 enacted level.



Indian Health Service Appropriations FY 2020



- Bill also includes important new spending items that Indian Country has long advocated for, and were introduced in the FY 2020 President's Budget. These include:
 - \$25 million for HIV/AIDS and Hepatitis C prevention and treatment
 - \$20 million for a national community health aide program (CHAP)
 - \$25 million for modernization of electronic health records



Labor HHS appropriations



- **Draft** appropriations bill released April 19th and markup was held on May 8th
- **The Senate is accepting testimony through June 3rd**
- Total funding for HHS: \$189.8 billion for FY 2020:
 - Good Health and Wellness in Indian Country was also flat funded at \$21 million. President's CDC budget – Zeroed out Good Health and Wellness in Indian Country.
 - Funds the \$50 million Tribal set aside in opioid response grants authorized in 2018.
 - Maintains the \$15 million set aside for placement of National Health Service Corps within IHS/Tribal/Urban Indian Health facilities.
 - Includes \$14 million for the Zero Suicide program, an increase of \$5 million over last year.
 - Adds \$116 million, for the Ryan White HIV/AIDS program, for a total of \$2.4 billion.



Other HHS Agencies' Appropriations - FY 2020



- NIHB submitted testimony for the record to House Labor H on April 9
- CDC Recommendations:
 - GHWIC funding at \$32 million
 - Preventive Health and Health Services Block Grant tribal set aside of 5%
 - Tribal funding for HIV, Viral Hepatitis and STIs
- SAMHSA Recommendations:
 - Tribal set aside funding for the Substance Abuse Block Grant
 - Tribal behavioral health grants funded at \$40 million
 - 10% set aside for Tribes in opioid funding



IHS Advance Appropriations

- Three bills introduced for Advance Appropriations
- Legislation Introduced
 - S.229 / H.R. 1128 – Indian Programs Advance Appropriations Act
 - Sponsors: Sen. Udall (D-NM)/ Rep. McCollum (D-MN)
 - IHS Services and CSC as well as BIA
 - H.R. 1135 – IHS Advance Appropriations Act
 - Sponsor: Rep. Don Young (R-AK)
 - All of IHS, not BIA
 - Senate bill coming soon



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IHS Advance Appropriations

Activities:

- Letter to Appropriations Committee on Hearing
- Meeting with Chairman of the Budget Committee and Reps. Kennedy and Kildee
- Meeting with Senate Budget Committee Democratic Staff
- Sign on Letter to House Budget Committee

Actions needed!

- Legislation Co-sponsorship!
- Support with “at risk” members
- IMPACT STORIES!!



View NIHB's Website for resources at:

https://www.nihb.org/legislative/advance_appropriations.php

IHS Advance Appropriations

- What is Advance Appropriations?
 - Funding that becomes available one year or more after the year of the appropriations act in which it is contained.
 - The appropriations law is passed, but funds cannot be used until the FY year in which they are allocated for arrives



IHS Advance Appropriations

- What advance appropriations IS NOT:
 - “forward funding” allows funds to become available beginning late in the budget year and is carried into at least one following fiscal year. Forward funding is counted against the same budget year. i.e.- it has a cost score!
 - “Mandatory appropriations” is funding that is automatic when Congress passes an authorization law, such as Medicare, Medicaid, or SDPI



IHS Advance Appropriations

- How to we get Advance Appropriations?
 - Budget Resolution – exemptions list
 - House Rules – Budget Committee Chairman must comply
 - Enacting law – S.229/ H.R. 1128/ H.R. 1135
 - In the first year, there must be a double appropriation – one for FY 2020 and on for FY 2021



Special Diabetes Program for Indians

- SDPI expires on September 30, 2019
- Senate HELP Committee leaders introduced a 5 year renewal for SDPI at the current \$150 million/ year
- Rep. O'Halleran (D-AZ) to introduced **HR 2680** which would reauthorize both the SDP and SDPI for five years and increase each program's funding from \$150 million to \$200 million a year.
- **376 members of the House signed the SDPI letter of support.** NIHB is currently working on getting members of the Energy and Commerce committee to cosponsor the O'Halleran SDPI bill.
- Partnership with at American Diabetes Association, Juvenile Diabetes Research Foundation and the Endocrine Society has been helpful in achieving much needed increases



VA Tribal Advisory Committee Act

- February 21 – Senators on Tester (D-Mont.), Dan Sullivan (R-Alaska), Tom Udall (D-N.M.), and Lisa Murkowski (R-Alaska) introduced legislation to create a VA TAC (S. 524)
- 15 member committee – one from each IHS area + 3 at large members
- 1/2 of members are veterans
- Subcommittees allowed, Technical advisors on subcommittees (like TTAG)
- Committee will have a yearly report to Congress on activities



GAO Report on IHS/VA MOU

Recommendations:

1. VA should establish measurable targets for performance measures
2. VA should establish written policy or guidance on how referrals from IHS and THP facilities to VA facilities for specialty care can be managed
3. IHS should establish measurable targets for performance measures

Agencies concurred with these recommendations



GAO Report on IHS/VA MOU

- On April 22, GAO released a report on the IHS / VA MOU
- Overall, the IHS and Tribal facilities contacted by GAO saw reimbursement agreements as beneficial (some had concerns noted in the report);
- The number of reimbursement agreements with VA has increased, showing an increase of Tribal facilities entering reimbursement agreements, claims reimbursed, and veterans served;
- IHS facilities accounted for a larger percentage of veterans receiving services reimbursed by VA compared to Tribal facilities.



Updates from the Center for Indian Health Policy and Research

- CMS Leadership Change: Calder Lynch to to serve as Acting CMCS Director after May 3st;
- NIHB MMPC Meeting on **June 5th at 2pm Eastern:**
 - Increased flexibility to states to modify Medicaid programs by distributing through block grants
 - CHAP Draft Policy-**Comments Due on Friday, June 7**
 - Continued advocacy for the administration to distinguish between Community Health Representatives (CHRs) and the Community Health Aide Program (CHAP)



SAVE THE DATE: National Tribal Health Conference

The National Tribal Health Conference will be **September 16-20, 2019** at Pechanga Resort and Casino



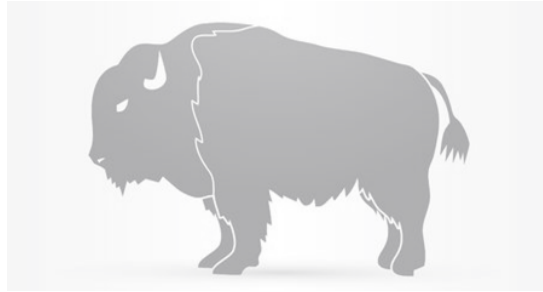
SAVE THE DATE: Tribal Diabetes Policy Meeting

The National Indian Health Board and the National Congress of American Indians will co-sponsor a face-to-face Tribal Caucus on **July 10, 2019**, in Washington, D.C.

- The meeting will discuss the interest in moving the Special Diabetes Program for Indians to 638—what would that look like for DSTs?



Many Thanks!



For more information please contact:

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