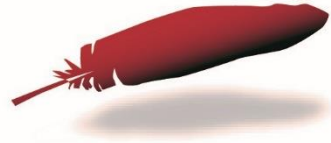


# National Indian Health Board



## **NIHB UPDATE**

### **TRIBAL LEGISLATIVE HEALTH PRIORITIES FOR COVID-19 SUPPLEMENTAL**

*MARCH 17, 2020*

Stacy A. Bohlen, Chief Executive Officer, NIHB  
Shervin Aazami, Director of Congressional Relations, NIHB

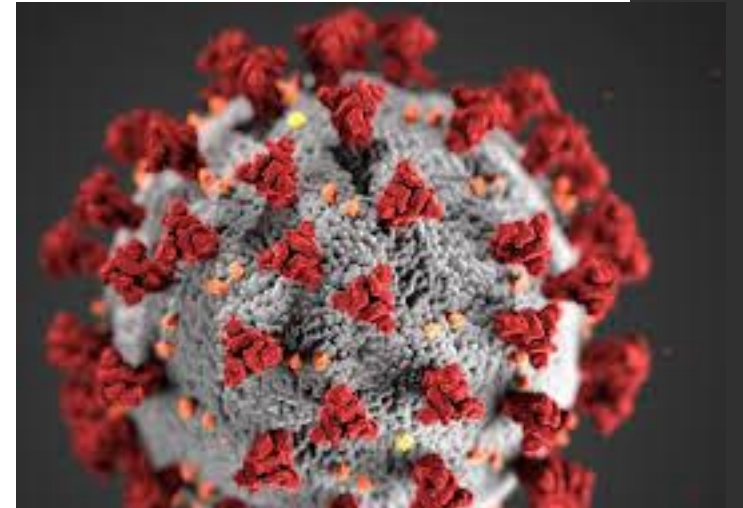
# Who Are NIHB

Established by the Tribes to advocate as the united voice of federally recognized American Indian and Alaska Native Tribes, NIHB seeks to reinforce Tribal sovereignty, strengthen Tribal health systems, secure resources, and build capacity to achieve the highest level of health and well-being for our People.



# PHASE 1 OF COVID-19 FUNDING: MARCH 5 - MARCH 7, 2020

- **H.R. 6074 – First Supplemental funding package for COVID-19 signed into law Friday, March 6**
  - \$8.3 billion package for medical and pharmaceutical research, relief for small businesses, and public health funding for states, Tribes, and urban Indian organizations
- **Includes \$40 million baseline set-aside for Tribes, Tribal organizations, and urban Indian organizations through Centers for Disease Control and Prevention (CDC)**
  - Authorizes reimbursements for Tribes, Tribal organizations, and urban Indian organizations that have expended funds for COVID-19 from January 20, 2020 up until legislation was signed into law (Friday March 6)
- Current mechanism of funding for Indian Country is via grants.
  - **NIHB is working to change that to ensure maximum flexibility for the Tribes**



# PHASE 1 OF COVID-19 FUNDING: MARCH 5 – MARCH 7, 2020

## • **NIHB March 7, 2020 letter to HHS Secretary Azar**

- On Thursday March 5, NIHB held All-Tribes call with over 200+ Tribal leaders to receive guidance on distribution of \$40 million set-aside funds

Five Tribal recommendations:

1. **Interagency transfer of \$40 million from CDC to IHS**
2. **Triple set aside to \$120 million for Tribes, Tribal organizations and urban Indian organizations**
3. **Minimize Commission Corps deployments from IHS/Tribes and deem all IHS Commission Corps officers as mission critical**
4. **Provide for reimbursements outside of simply clinical or preventive care**
5. **Clarify the process for how reimbursements authorized in statute will be delivered to Indian Country**





## PHASE 2 OF COVID-19 FUNDING: MARCH 11 - MARCH 16, 2020

- **H.R. 6201 – Second COVID-19 Supplemental Package**
  - Includes billions in funding for free COVID-19 testing, nutrition and food assistance services, paid family leave, unemployment insurance, Indian Health Service, Medicaid, Veterans Health Administration

### **Health Provisions for Tribes:**

- **\$64 million into Indian Health Service (IHS) Services Account for direct service Tribes and self-governance Tribes**
  - Money can be used across any line item in Services Account
- **Zero cost-sharing for COVID-19 tests for American Indians and Alaska Natives**
  - Requires the Secretary of HHS to cover the cost of COVID-19 tests for American Indians and Alaska Natives



# PHASE 3 OF COVID-19 FUNDING: MARCH 16 - FUTURE

## • **Movement on Third COVID-19 Supplemental Package**

- NIHB, NCAI, NAFOA, and others submitted letter to House/Senate appropriators on Sunday March 15, 2020
  - NIHB outlined Tribal health priorities not addressed in first or second COVID-19 packages

### Priorities/Recommendations:

#### **1. Provide \$200 million in funding for IHS Facilities Account**

- Maximum flexibility for Tribes to increase hospital capacity, build auxiliary units, provide housing for providers, etc.

#### **2. Provide \$1.1 billion in funding for IHS Services Account**

- Maximum flexibility to Tribes to use money for Hospitals & Health Clinics, Community Health Representatives, Health Education, Public Health Nursing, etc.

#### **3. Provide \$964 million for Purchased/Referred Care**

- Ensure Tribes have funding available to purchase care outside the Indian health system

#### **4. Authorize Medicaid Reimbursements for Qualified Indian Health Providers**

- Initiate the process of “de-linking” Tribes from states for Medicaid services/reimbursement

#### **5. Fix the “four walls” 3<sup>rd</sup> party reimbursement issue**

- Maximize reimbursements to Tribes for services provided outside the “four walls” of a hospital/clinic



# PHASE 3 OF COVID-19 FUNDING: MARCH 16 - FUTURE

NIHB also advocating for:

- **Authorizing direct access to Strategic National Stockpile for IHS, Tribes, Tribal organizations, and urban Indian organizations**
  - For medical supplies, pharmaceuticals, and other emergency resources
    - Senator Udall (D-NM) and Senator Warren (D-MA) introduced
- **Authorizing direct Tribal access to Public Health Emergency Preparedness (PHEP) funds**
  - Pushing to establish a baseline requirement of funding for all Tribes and Tribal consortiums
    - Senator Udall (D-NM) and Rep. Haaland (D-NM) introduced

