Healthcare and Public Health Provisions
National Indian Health Board

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PHASE 1 – CDC Funding for Tribes in 1st Package

- $40 million for Tribes & Tribal organizations under 1st COVID supplement
  - Agency doubled the funding to $80 million
- NIHB Submitted Letter to HHS Secretary March 7, 2020
  - Demanding interagency transfer of Tribal funding from CDC to IHS

- CDC spoke with Secretary’s Tribal Advisory Committee on March 19
  - This was first and only time CDC solicited Tribal feedback on funds under 1st COVID supplement
    - CDC did not hold a national All-Tribes call
    - Did not seek input from CDC Tribal Advisory Committee
PHASE 1 – CDC Funding for Tribes in 1\textsuperscript{st} Package

- $30 million to 9 regional Tribal organizations and Tribes with populations over 40,000
- $40 million in non-competitive grants to Title 1 and Title 5 Tribes
- $2 million to NIHB for national communications
- $8 million to NCUIH to distribute to all 41 urban Indian organizations
PHASE 2 – Funding to Indian Health Service

- $64 million to Indian Health Service (IHS) under 2nd COVID package
- IHS secured additional $70 million from HHS Public Health Emergency Fund
  - Total for IHS in 2nd package: $134 million
- Funding is for high range of COVID activities – testing, equipment, PPE, treatment, etc.

- IHS held national All-Tribes call Monday, March 23
  - Tribes requested maximum flexibility around use of funds
  - Request for funding to come through annual funding agreements (AFAs)
  - IHS anticipated releasing funds by Friday, March 27
PHASE 3 – 3rd COVID Supplement

• March 20, 2020: National Native organizations submitted letter to Congress outlining Indian Country’s priorities

Priorities:
• $2.444 billion for Indian health system
• Pass Tribal Medicaid Legislative Priorities (four walls fix, etc.)
• Eliminate cost-sharing under Medicare
• Permanent reauthorization of Special Diabetes Program for Indians
• Mandatory funding for Contract Support Costs, 105(l) leases, and Purchased/Referred Care
### PHASE 3 – 3rd COVID Package

#### House Package
- $1.032 billion for IHS
- Tribal set asides under CDC, HRSA, SAMHSA
- Four walls reimbursement fix
- Tribal access to Public Health Emergency Preparedness
- IHS and Tribal access to Strategic National Stockpile
- Extension of SDPI until November 30, 2020
- House submitted reimbursement for Qualified Indian Health Providers as top priority to Senate

#### Senate Package
- $1.032 billion for HIS
- Tribal set asides under CDC, HRSA, SAMHSA
- Extension of SDPI until November 30, 2020
Phase 3 - $2 Trillion COVID Supplement

- Coronavirus Aid, Relief, and Economic Security Act or “CARES Act”
  - Passed U.S. Senate March 25, 2020
  - House set to vote March 27, 2020

Final Provisions:
- $1.032 billion for Indian Health Service
- Minimum $125 million in Tribal set-aside under CDC
- Minimum $15 million set-aside under SAMHSA
- Minimum $15 million set-aside under HRSA
- Extension of SDPI until November 30, 2020
PHASE 3 - $2 Trillion COVID Supplement

• NIHB analyzing impact of CARES Act on Tribal health systems outside of specific Tribal provisions
  ➢ Telehealth provisions under Medicare
  ➢ $100 billion for hospitals “Marshall Plan”
  ➢ Volunteer liability protections
  ➢ Payment provisions under Medicare
  ➢ Safe harbor provisions
  ➢ Patient substance use data confidentiality provisions
Next Steps – PHASE 4

- NIHB is working with the Administration to ensure Tribal consultation directs how funds are distributed under all packages.

- House & Senate have indicated that a 4th package is likely
  - Timeline at least few weeks away

- Tribal priorities that were not included in 3rd Package are in play for 4th Package
  - These include Tribal Medicaid/Medicare priorities, SDPI, etc.
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