Supporting Federal Legislation Requiring Removal of Debts or Collection Activity on Indian Patients’ Credit Reports for Bills Not Paid by the Indian Health Service

WHEREAS, the National Indian Health Board (NIHB), established in 1972, serves all federally recognized American Indian/Alaska Native (AI/AN) Tribal governments by advocating for the improvement of health care delivery to AI/ANs, as well as upholding the federal government’s trust responsibility to AI/AN Tribal governments; and

WHEREAS, the Indian Health Service (IHS) has a trust responsibility to provide health care to Indian people through direct care at IHS or tribally operated health facilities and through the Purchased/Referred Care (PRC) program, which provides specialty or other care at health facilities other than those operated by the IHS or Tribal nations; and

WHEREAS, Section 222 of the Indian Health Care Improvement Act (IHCIA), as amended, states that “[a] patient who receives PRC services that are authorized by the Service shall not be liable for the payment of any charges or costs associated with the provision of such services,” though IHS has not implemented this provision to provide a transparent process for patients to obtain reimbursement for PRC bills that they paid; and

WHEREAS, for some Tribal nations and federally managed Service Units for which the IHS provides direct services, IHS’s administration of the PRC program has resulted in PRC bills either going unpaid or being paid late, which, in many cases, results in IHS beneficiaries being referred by private health providers to collection agencies or in Indian beneficiaries paying PRC bills out-of-pocket to avoid adverse impact on their credit; and

WHEREAS, through no fault of their own, such collection activity negatively impacts Indian patients’ credit scores, which results in higher interest rates for mortgages and consumer loans and, in some cases, the inability to obtain credit or financing altogether; and

WHEREAS, in 2018, Congress enacted into law, the Protecting Veterans Credit Act of 2017, which amended the Fair Credit Reporting Act to, among other things, establish a process that requires credit reporting agencies to remove information on veterans’ credit reports that relates to debts or collections activity for medical bills that should have been paid by the Department of Veterans Affairs; and
WHEREAS, unlike the process established for users of the Department of Veterans Affairs’ health system in the Protecting Veterans Credit Act of 2017, no comparable process exists for users of the IHS system to require credit reporting agencies to remove debts or collections activity on their credit reports for bills that the IHS should have, but did not, pay.

THEREFORE BE IT RESOLVED, that NIHB supports legislation similar to the Protecting Veterans Credit Act of 2017 that would provide a mechanism to require credit reporting agencies to remove information on the credit reports of IHS beneficiaries that relates to debts or collections activity for bills that should have been paid by the IHS; and

THEREFORE BE IT FURTHER RESOLVED, that NIHB urges the IHS to implement Section 222 of the IHCIA to establish an accessible, transparent process for IHS beneficiaries to obtain reimbursement for PRC bills that IHS should have, but did not, pay in a timely manner.

BE IT FINALLY RESOLVED, that this resolution shall be the policy of the National Indian Health Board until it is withdrawn or modified by subsequent resolution.

CERTIFICATION

The foregoing resolution was adopted by the Board, with quorum present, on the 22nd day of June, 2023.

ATTEST:

Chairperson, William Smith

Vice Chairperson, Nickolaus Lewis