

# [House Appropriations Approves Bill with Nearly \\$30 Million Increase for Urban Indian Health](#)

Category: Policy Blog  
written by NCUIH | May 30, 2019

## House Appropriations Full Committee Markup of Interior Bill Held on Wednesday, May 22, 2019

***NCUIH supports the bill in its present form.***

Last week the House Appropriations full Committee passed their [FY2020 Interior, Environment, and Related Agencies Appropriations bill](#) - This bill includes \$81 million for Urban Indian Health Programs, which is \$29 million above FY 2019 enacted levels, and \$32 million above the President's budget request. This increase would assist urban Indian health programs in their continued efforts to provide high-quality, culturally-competent care.

The committee also released its report on the FY2020 spending package. The [221-page report](#) provides details on the bill the Subcommittee had previously passed earlier this month.

**Please let your Member of Congress know that you support the bill's inclusion of the \$81 million line item for Urban Indian Health.**

"NCUIH applauds the leadership of Chair Betty McCollum and her longstanding commitment to fulfilling the trust and treaty responsibilities of the US government with American Indians and Alaska Natives by investing in the Indian Health Service and urban Indian health programs. After years of stagnation and chronic underfunding to urban Indian health and the Indian Health Service (IHS) budget, NCUIH is hopeful that Chair McCollum's bill requesting \$6.3 billion for IHS, which is higher than the proposed budget by the President of \$5.9 billion, and \$81 million for urban Indian health will continue to move forward for consideration by the full House," said NCUIH Executive Director Francys Crevier.

Please read full Press Release [here](#).

Please find below a brief overview of some of the key programs included affecting AI/AN communities.

Topic/Program	Amount Proposed
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Excerpt - Key Text to Be Aware of or Watch
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		<p>\$1,429,000 for current services</p> <p>\$26,887,000 for direct patient care services/program adjustments</p> <p>*Includes the proposed transfer of \$1,369,000 from former NIAAAs from Alcohol and Substance Abuse line item to this line item</p>
Urban Indian Health	\$81,000,000	<p>* "The Committee recognizes nonprofit organizations such as the Siouxland Human Investment Partnership that help American Indians in urban areas outside of the Urban Indian Health Program, and encourages the Service to offer technical assistance to such organizations whenever possible and within Service authority."</p>
Advance Appropriations	N/A	<p>The Committee directs IHS to examine its existing processes and determine what changes are needed to develop and manage an advance appropriation and report to the Committee within 180 days of enactment of this Act on the processes needed and whether additional Congressional authority is required in order to develop the processes.</p>
Domestic Violence Prevention Program	\$12,967,000	<p>The recommendation includes \$12,967,000, as requested, for Domestic Violence Prevention, \$4,000,000 above the enacted level.</p>
IHS-VA MOU	N/A	<p>"The Committee is aware of the recent Government Accountability Office (GAO) report on the Memorandum of Understanding (MOU) between the VA and IHS. The Committee urges IHS to ensure performance measures related to the MOU are consistent with the key attributes of successful performance measures, including having measurable targets, as recommended by GAO."</p>
Alcohol and Substance Use	\$ 280,051,000	<p>*Does not reference implementation for UIOs.</p> <p>\$34,485,000 above the enacted level and \$34,017,000 above the budget request.</p>
Unfunded IHCIA Provisions	N/A	<p>"The Committee requests that the Service provide, no later than 90 days after enactment, a detailed plan with specific dollars identified to fully fund and implement the IHCIA."</p>
Hepatitis C & HIV/AIDS Initiative	\$25,000,000	<p>"for the Administration's new Ending the HIV Epidemic: A Plan for America and Eliminating Hepatitis C in Indian Country initiative."</p> <p>*"The Committee encourages IHS to confer with Urban Indian Organizations (UIOs) to determine how UIOs may participate in this Initiative."</p>

Maternal and Child Health	N/A	<p>“The Committee encourages IHS to establish a pilot program to determine the most effective ways to: (1) educate IHS health care providers on how to evaluate risk factors that could interfere with successfully meeting breastfeeding goals; (2) provide necessary support to AI/AN mothers to prevent or address delayed initiation of milk production during the critical period immediately following birth; and (3) provide support to AI/ AN mothers to help them understand the benefits of long-term breastfeeding and improve clinically recommended rates, particularly when they return to work. The Committee also directs IHS, where possible and within scope of agency authority, to encourage breastfeeding support recommendations within the workplace which encourage job retention.”</p> <p>To improve the current IT infrastructure system.</p> <p>“The bill includes language prohibiting IHS from obligating or expending funds to select or implement a new IT infrastructure system unless IHS notifies the Committee at least 90 days before such funds are obligated or expended.” (also outlines requirements to include in the notification and requires IHS to look at the VA system to, among other things, determine if it is feasible for IHS and tribal facilities).</p>
Electronic Health Records	\$25,000,000	