NCUIH Submits Comments to HRSA to Improve Access to Pediatric Health Care in Urban Native Communities

Category: Policy Blog

written by Adrianne Elliott | December 2, 2022

On August 31, 2022, the National Council of Urban Indian Health (NCUIH) submitted comments to the Health Resources and Services Administration (HRSA) on the Pediatric Mental Health Care Access (PMCHA) Program. In a July 27 <u>Dear Tribal Leader Letter</u>, HRSA explicitly sought feedback from Urban Indian Organizations (UIOs) about how to increase access to and improve pediatric behavioral health care through telehealth and the PMCHA program's development and implementation. NCUIH's comments address the essential role of access to pediatric mental health care for American Indian/Alaska Native (AI/AN) communities across the country, including AI/AN communities in urban areas.

Background

According to the <u>Indian Health Service (IHS)</u>, Native youth living off-reservation share similar health problems to their AI/AN peers nationwide, which are exacerbated by lack of access to family and traditional cultural environments. Notably, the AI/AN youth suicide rate is <u>2.5 times</u> that of the national average.

UIOs are actively engaged in overcoming, addressing, and preventing mental and behavioral health issues in urban AI/AN youth. Virtually every UIO offers mental and behavioral health services, which became critically important during the height of the pandemic for families to continue accessing needed health care services to keep their doors open in the wake of reduced in-person visits. Since then, UIOs have continued to <u>provide telehealth services</u> to their patients, especially for mental and behavioral health programs.

Recommendations

NCUIH provided the following recommendations to HRSA regarding pediatric mental health care and telehealth services:

• Facilitate UIO Participation in the PMHCA Program

NCUIH urged HRSA to facilitate UIO participation in the PMHCA program. Although UIOs are a critical source of health care for urban AI/AN communities, they are often left underfunded and under resourced because federal grant programs unintentionally exclude UIOs. Accordingly, NCUIH suggested that whenever HRSA is asked to provide technical assistance on the PMHCA program to Congress, it advises Congress of this exclusion and a legislative fix to expand eligibility to UIOs. Any expansion of eligibility should be accompanied by a similar expansion in funding for the PMHCA program to ensure that there is no decrease in funding available for Tribes or Tribal organizations.

Continue to Engage with UIOs and Develop an Urban Confer Policy
NCUIH recommended that HRSA continues to foster its relationship with UIOs through consistent and timely communication to UIOs. We further encouraged HRSA to cultivate

meaningful partnerships between other federal agencies and stakeholders to notify UIOs when they are eligible for certain programs. Finally, NCUIH urged HRSA to develop an Urban Confer Policy, which would ensure HRSA's services are more responsive to the needs and desires of urban AI/AN communities.

We will continue to monitor ongoing implementation of HRSA's pediatric behavioral and mental health care programs that serve Indian Country.