House Appropriations Committee Advances Labor Health and Human Services Spending Bill, Increases Funding for Key Indian Country Programs

Category: Policy Blog
written by Jeremy Grabiner | September 15, 2025

On September 10, 2025, the House Appropriations Full Committee passed the Fiscal Year (FY) 2026 appropriations bill for Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS). The bill includes $108 billion for the Department of Health and Human Services (HHS), which is $7 billion below FY 2025 levels and $14 billion above the President's request. The committee notably provides $100 million for the Make America Health Again initiative, which includes a 10% set-aside for Tribes, Tribal organizations, urban Indian health organizations, and health service providers to Tribes serving rural communities.

The committee also provided increased funding for key Indian country provisions including the Improving Native American Cancer Outcomes program, Good Health and Wellness in Indian Country program, Tribal Behavioral Health Grants (Native Connections), and the Minority HIV/AIDS Fund – Tribal Set Aside.

Background

NCUIH worked closely with Appropriators to advocate for increased funding for Indian Country. In written testimony, NCUIH advocated for $10 million for the Improving Native American Cancer Outcomes program, $30 million for the Good Health and Wellness in Indian Country program, and to protect funding for HIV/AIDS treatment and prevention.

Next Steps

House Leadership will now work with Senate Leadership to develop the final LHHS appropriations spending bill. As a final appropriations bill is produced, NCUIH will continue to advocate to protect funding for Indian Country and maintain maximum funding levels.

- House Labor-HHS Appropriations bill
- Bill Report

Bill Highlights

Line Item	FY 2025 Enacted	FY 2026 President's Budget Request	FY 2026 Committee Passed
Health Resources and Services Administration	$8.3 billion	Fold into Administration for a Healthy America (AHA)	$7.4 billion

Substance Abuse and Mental Health Services Administration	$7.4 billion	Fold into AHA	$7.1 billion
National Institute of Health	$48.6 billion	$27.5 billion	$47.8 billion
Centers for Disease Control	$9.2 billion	Fold into AHA	$7.5 billion
Good Health and Wellness in Indian Country	$24 million	———––	$30 million
Improving Native American Cancer Outcomes	$6 million	———––	$14 million
Ryan White HIV/AIDS Program	$2.57 billion	$2.50 billion	$2.04 billion
Ending the HIV Epidemic	$165 million	$165 million	$165 million
Minority HIV/AIDS Fund	$60 million	Eliminated	$20 million
Minority HIV/AIDS Fund – Tribal Set Aside	$5 million	———–	No less than $6 million
Tribal Behavioral Health Grants (Native Connections)	$23.67 million	Eliminated. Created a new behavioral health program under AHA	$30 million

Additional Key Provisions:

Office of the Secretary

Make America Healthy Again Initiative: $100,000,000 (10% set-aside for Tribes, Tribal organizations, urban Indian health organizations, and health service providers to Tribes serving rural communities).

Bill Report pg. 203: The Committee includes $100,000,000 for the Secretary's Make America Healthy Again (MAHA) initiative. This funding will allow the Secretary to invest in prevention innovation programs for rural communities as proposed in the fiscal year 2026 budget request. Within the funding provided for this suite of innovation programs, **the Committee includes a 10 percent set-aside for Tribes, Tribal organizations, urban Indian health organizations, and health service providers to Tribes serving rural communities.** This funding is also available for the Secretary to invest in telehealth resources for chronic care and nutrition services, as proposed in the fiscal year 2026 budget request. Within such funding, the Committee encourages the Secretary to support opportunities for advancing telemedicine tools and remote monitoring technologies at universities. This research should support studies on the efficacy of virtual care for managing chronic illnesses, development of AI-assisted telehealth platforms, and training programs for healthcare providers on integrating remote solutions into standard practice.

Health Resources and Services Administration

Federal Office of Rural Health Policy: $515 million

Bill report pg. 50: The Committee provides $ 515,407,000for Rural Health programs.

- This represents an increase of $150 million above the FY 2025 enacted level.

Native Hawaiian Health Care Program: $27 million

Bill report pg. 32: The Committee continues $27,000,000 for the Native Hawaiian Health Care Program. Of the total amount appropriated for the Native Hawaiian Health Care Program, not less than $10,000,000 shall be provided to Papa Ola Lokahi for administrative purposes authorized under 42 U.S.C. 11706, including expanded research and surveillance related to the health status of Native Hawaiians and strengthening the capacity of the Native Hawaiian Health Care Systems.

National Health Service Corps: $130 million (15% Tribal set-aside)

Bill Report pg. 39: The Committee includes $130,000,000, for the National Health Service Corps (NHSC) to support competitive awards to health care providers dedicated to working in underserved communities in urban, rural, and Tribal areas.

- Tribal Set-Aside.—The Committee includes a set-aside of 15 percent within the total funding provided for NHSC to support awards to participating individuals that provide health services in Indian Health Service facilities, Tribally-operated health programs, and Urban Indian Health programs.

Centers for Disease Control and Prevention

Good Health and Wellness in Indian Country: $30 million (bill report pg. 68).

Office of the Secretary – General Departmental Management

Minority HIV/AIDS Fund: $20 million

Bill report pg. 211: The Committee includes $20,000,000 for the Secretary's Minority HIV/AIDS Fund (MHAF). Tribal Set-Aside.—The Committee notes that according to the CDC, HIV-positive status among Native Americans is increasing and nearly one-in-five HIV-positive Native Americans is unaware of their status. In addition, only three-in-five receive care and less than half are virally suppressed. To increase access to HIV/AIDS testing, prevention, and treatment, the Committee reserves no less than $6,000,000 as a Tribal set-aside within the MHAF.

Substance Abuse and Mental Health Services Administration

Eating Disorders: $5 million

Bill report pg. 146: The Committee provides $5,000,000 to improve the availability of health care providers to respond to the needs of individuals with eating disorders including the work of the National Center of Excellence for Eating Disorders to increase engagement with primary care providers, including pediatricians, to provide specialized advice and consultation related to the screening and treatment of eating disorders. The Committee encourages SAMHSA to conduct a public service announcement with the purpose of raising awareness about identifying, preventing, and treating eating disorders.

Substance Abuse Prevention Services: $205 million

Bill report pg: 152: The recommendation represents a $32 million reduction from the FY25 enacted level.

Tribal Behavioral Grants (Native Connections): $28 million

Bill report pg. 145: The Committee provides $30,000,000, which is a $7,250,000 increase above the fiscal year 2025 enacted program level, to prevent and reduce suicidal behavior and substance use, reduce the impact of trauma, and promote mental health among AI/AN youth, through age 24.

Zero Suicide: $23.8million

American Indian and Alaska Native Set Aside: $4.4 million

Mental Health Services Block Grant: $1.02 billion

Bill report pg. 141: The Committee provides $1,017,571,000 for the MHBG, which is $10,000,000 above the fiscal year 2025 enacted program level. Of the funds provided, $21,039,000 shall be derived from evaluation set-aside funds available under section 241 of the PHS Act. The MHBG provides funds to States to support mental illness prevention, treatment, and rehabilitation services. Funds are allocated according to a statutory formula among the States that have submitted approved annual plans. The Committee continues the 10 percent set-aside within the MHBG for evidence-based programs that address the needs of individuals with early serious mental illness, including psychotic disorders among at-risk youth and young adults, and the 5 percent set-aside for crisis-based services. The Committee notes that, consistent with State plans, communities may choose to direct additional funding to crisis stabilization programs.

988 Suicide & Crisis Lifeline: $520 million

Bill report pg. 139: — The Committee provides $519,618,000 for the 988 Suicide & Crisis Lifeline, which is the same as the fiscal year 2025 enacted program level, to support the national suicide hotline to continue to support State and local suicide prevention call centers as well as a national network of backup call centers and the national coordination of such centers.

Substance Use Prevention, Treatment, and Recovery Services Block Grant: $2 billion

Bill report pg. 148: The Committee includes $2,013,079,000 for the SUPTRS Block Grant, which is a $5,000,000 increase above the fiscal year 2025 enacted program level.

State Opioid Response Grants: $1.6 billion

Bill report pg. 147: The Committee includes $1,575,000,000 for State Opioid Response (SOR) grants, which is the same as the fiscal year 2025 enacted program level. The Committee supports efforts from SAMHSA through SOR grants to expand access to substance use disorder treatments in rural and underserved communities, including through funding and technical assistance. Within the amount provided, the Committee includes a set-aside for Indian Tribes and Tribal organizations of not less than 5 percent.

National Institute on Minority Health and Health Disparities

Improving Native American Cancer Outcomes: $14 million

Bill report pg. 118: The Committee continues to be concerned that Native Americans experience overall cancer incidence and mortality rates that are strikingly higher than non-Native populations. The Committee includes $14,000,000, which is an increase of $8,000,000 above the fiscal year 2024 enacted level, to continue the Initiative for Improving Native American Cancer Outcomes to support efforts including research, education, outreach, and clinical access related to cancer in Native

American populations. The Committee further directs NIMHD to work with NCI to continue support for the current grantees

Native Hawaiian/Pacific Islander Health Research Office: $6 million

Bill report pg. 119: —The Committee provides $6,000,000, which is an increase of $2,000,000 above the fiscal year 2024 enacted level, for the Native Hawaiian/ Pacific Islander Health Research Office (NHPIHRO) with a focus on both addressing Native Hawaiian and Pacific Islander (NHPI) health disparities, as well as supporting the pathway and research of NHPI investigators. The Committee encourages NHPIHRO to develop partnerships with academic institutions with a proven track record of working closely with NHPI communities and NHPI-serving organizations located in States with significant NHPI populations to support the development of future researchers from these same communities.

Important Behavioral and Mental Health Provisions

Medication-Assisted Treatment for Prescription Drug and Opioid Addiction Tribal Set Aside: $20 million

Peer-Support Specialists: $15 million

Bill report pg. 42: The Committee supports community based experiential training for students preparing to become peer support specialists and other types of behavioral health-related paraprofessionals. The Committee includes a $1,000,000 increase for this activity.

Infant and Early Childhood Mental Health Program: $15 million

Bill report pg. 143: The Committee provides $15,000,000 for the Infant and Early Childhood Mental Health program, which is the same as the fiscal year 2025 enacted program level, to support human service agencies and nonprofit organizations that provide age-appropriate mental health promotion and early intervention or treatment for children with significant risk of developing mental illness including through direct services, assessments, and trainings for clinicians and education providers.

Administration for Community Living

Native American Caregiver Support Program: $14 million

Bill report pg. 181: The Committee provides $14,000,000 for the Native American Caregivers Support program, which is a $2,000,000 increase above the fiscal year 2025 enacted program level. This program provides formula grants to Tribes for the support of American Indian, Alaskan Native, and Native Hawaiian families caring for older relatives with chronic illness or disabilities