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The webinar is recording now....
Welcome to our Policy Webinar

Thank you for joining us!

Today’s webinar will be led by…

Carla Lott,
Director of Congressional Relations

and

Julia Dryer,
Director of Federal Relations
National Council of Urban Indian Health 2020 Legislative Update

Past Accomplishments and Future Goals

January 22, 2020
Carla Lott
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National Council of Urban Indian Health

The only national non-profit organization devoted to the support and development of quality, accessible, and culturally-competent healthcare services for American Indians and Alaska Natives living in urban settings.

Created in 1998 by Urban Indian Leaders to advance health care of American Indians/Alaska Natives.

Advocates for Indian Health Care with Congress and Federal Government.

Provides technical support to UIOs for implementing quality accessible health care services.

Provides technical assistance support to the 41 Title V Urban Indian Organizations across the nation.
Our Mission

NCUIH is a national membership non-profit organization devoted to the support and development of quality, accessible, and culturally-competent healthcare services for American Indians and Alaska Natives living in urban settings.
“Urban Indian”

• An American Indian or Alaska Native who lives in an urban or suburban area

• Urban Indians may variously be permanent residents including long term residents, forced residents, or medium and short term visitors (higher education)

• Approximately 78% AIAN live in metropolitan/urban or suburban areas

• Specific issues include: Migration, Identity, Inter-tribal/Pan-Indian perspectives.
Urban Indian Health Programs

Created in 1976 after the Relocation Era by Tribes advocating for treaty health rights off reservation. UIOs are apart of the three-prong health system- IHS/Tribal/Urban

• Some key legislation includes:
• Indian Health Care Improvement Act
• Affordable Care Act
• Social Security Act
“Kill the Indian Save the Man”
Estimated 90 million acres (2/3rds the size of US) lost
Congress declared the policy of the Nation “in fulfillment of its special responsibilities and legal obligations to the American Indian people to assure the highest possible health status for Indians and urban Indians and to provide all resources necessary to affect that policy.”
How AI/ANs Receive Healthcare: I/T/U

Indian Health Service (Federal Agency)

Tribal (Sovereign Nations)
- Provide direct care via IHS clinics and hospitals
- Contract with IHS for IHS to provide some services*

Urban (Non-Profits)
- Compacts with IHS to receive IHS funds to provide direct care
  - UIHPs receive < 1% of the IHS Budget (one line item)
- Provide funds for T/U to provide direct care (compact)
Primary Care
- General medical care
- Diabetes care and prevention
- Health and wellness check-ups
- Vision and hearing screenings
- Immunizations
- Chronic disease care
- Women's health
- Urgent care

Behavioral Health Services
- Mental health counseling
- Psychiatry
- Substance abuse counseling
- Education and prevention services
- Anger management
- Domestic violence counseling

Traditional Healing and Medicine
- Sweat lodge ceremonies
- Men's, women's, and elder's talking circles
- Traditional medicine from traditional healers
- Prayer ceremonies
- Relationship gatherings

Social and Community Services
- Prevention and education services
- Youth camps and programs
- Elder services
- Domestic violence services
- Job placement
- Diet and nutrition services and classes
- Arts and crafts
- Pot luck/soup kitchens

SERVICES PROVIDED BY UIOs
NCUIH Legislative Priorities

- Preserve the Indian Health Care Improvement Care Act (IHICA)
- Fully fund IHS
- Increase the Urban Indian Health Care Line Item
- Preserve the Medicaid Benefit for American Indians and Alaska Native
- Improve Services to Native Veterans
- Extend the 100% Federal Medical Assistance Percentage (FMAP) to Urban Indian Organizations (UIOs)
- Extend the Federal Tort Claims Act (FTCA) Coverage to Urban Indian Organizations (UIOs)
- Expand Behavioral Health resources of Urban Indian Organizations (UIOs)
- Definition of Indian
NCUIH Legislative Accomplishments in the 116th Congress (1st Session)

Urban Indian Parity Act of 2019 (S.1180, H.R. 2316): “To extend the full Federal medical assistance percentage to urban Indian organizations.”

Health Care Access for Urban Native Veterans Act (H.R. 4153, S. 2365): “To amend the Indian Health Care Improvement Act to authorize urban Indian organizations to enter into arrangements for the sharing of medical services and facilities”

NCAI resolution
#REN-19-034 Title: Calling on Congress to Enact Legislation Ensuring the Provision of Health Care to American Indian and Alaskan Native Veterans Living in Urban Centers
NCUIH Legislative Accomplishments in the 116th Congress (1st Session)

Urban Indian Health Line Item Increase
FY20 Minibus Appropriations Bill that includes the highest-ever increase for urban Indian health

NCUIH Testimony

In Person: House Interior Appropriations Subcommittee, House Indigenous Peoples of the United States Subcommittee, House Committee on Veterans’ Affairs, Subcommittee on Health

For The Record: Senate Appropriations Subcommittee on Interior, Environment, and Related Agencies, Senate Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies
116th Congress, 1st Session
Important Legislation

• Urban Indian Health Parity Act: S. 1180, H.R. 2316
  • 100% FMAP
• Health Care Access for Urban Native Veterans Act: H.R. 4153
  • IHS – VA reimbursement agreement
• Indian Programs Advance Appropriations Act: S. 229, H.R. 1128
  • Related: H.R. 1135 – IHS Advance Appropriations Act
• Community Health Investment, Modernization, and Excellence Act of 2019: H.R. 2328
  • Reauthorize SDPI, CHC, National Health Service Corps.
• Native American Suicide Prevention Act: S. 467, H.R. 1191
  • Proposes to require states and state-designated entities receiving a suicide prevention grant to collaborate with I/T/U during development and implementation
• Department of Veterans Affairs Tribal Advisory Committee Act: S. 524
  • To establish the Department of Veterans Affairs Advisory Committee on Tribal and Indian Affairs
• Medicare for All Act: S. 1129, H.R. 1384
  • To establish a Medicare-for-all national health insurance program
116th Congress

Appropriations

SPDI

Hill Day Activity

Partnerships

Presentations
NCUIH Legislative Priorities in the 116th Congress (2\textsuperscript{nd} Session)

- FTCA
- FMAP
- IHS-VA MOU
- Urban Indian Health Line item increase
- Appropriations
- SPDI
# Members Not Seeking Reelection

<table>
<thead>
<tr>
<th>Senator</th>
<th>State</th>
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<tbody>
<tr>
<td>Pat Roberts</td>
<td>Kansas</td>
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<tr>
<td>Tom Udall</td>
<td>New Mexico</td>
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<tr>
<td>Lamar Alexander</td>
<td>Tennessee</td>
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<tr>
<td>Mike Enzi</td>
<td>Wyoming</td>
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| Representative         | State       | District |
|------------------------|-------------|
| Martha Roby            | Alabama     | 2        |
| Susan Davis            | California  | 53       |
| Duncan Hunter          | California  | 50       |
| Francis Rooney         | Florida     | 19       |
| Ted Yoho               | Florida     | 3        |
| Rob Woodall            | Georgia     | 7        |
| Tom Graves             | Georgia     | 14       |
| John Shimkus           | Illinois    | 15       |
| Susan Brooks           | Indiana     | 5        |
| Peter Visclosky        | Indiana     | 1        |
| Dave Loebsack          | Iowa        | 2        |
| Paul Mitchell          | Michigan    | 10       |
| Jose Serrano           | New York    | 15       |
| Nita Lowey             | New York    | 17       |
| Peter King             | New York    | 2        |
| George Holding         | North Carolina | 2       |
| Mark Walker            | North Carolina | 6       |
| Mark Meadows           | North Carolina | 11      |
| Greg Walden            | Oregon      | 2        |
| Phil Roe               | Tennessee   | 1        |
| Pete Olson             | Texas       | 22       |
| Mike Conaway           | Texas       | 11       |
| Will Hurd              | Texas       | 23       |
| Kenny Marchant         | Texas       | 24       |
| Bill Flores            | Texas       | 17       |
| Mac Thornberry         | Texas       | 13       |
| Rob Bishop             | Utah        | 1        |
| Denny Heck             | Washington  | 10       |
| Jim Sensenbrenner      | Wisconsin   | 5        |

Has signed onto 1+ NCUIH Bills

From a state with an Urban Indian Health Program

Senator/ Rep. for a NCUIH Urban Indian Health Program
Julia Dreyer, JD

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What to Watch in 2020: Federal Relations

- Medicaid
  - Expansion
  - Block Grants
- Medicaid Waivers

Landscape of Approved vs. Pending Section 1115 Medicaid Demonstration Waivers, January 16, 2020

NOTES: Some states have multiple approved and/or multiple pending waivers, and many waivers are comprehensive and may fall into a few different areas. Therefore, the total number of pending or approved waivers across states cannot be calculated by summing counts of waivers in each category. Pending waiver applications are not included here until they are officially accepted by CM and posted on Medicaid.gov. For more detailed information on each Section 1115 waiver, download the detailed approved and pending waiver tables posted on the tracker page.

*MLTSS* = Managed long-term services and supports.
What to Watch in 2020: Federal Relations

• Executive Order on Protecting and Improving Medicare for Our Nation’s Seniors
  • Calls for several changes to Medicare program, including proposed regulations
  • Purpose: to protect and improve Medicare by building on aspects of the program that work well
What to Watch in 2020: Federal Relations

• Indian Health Service
  • Behavioral health funding
  • Urban line item increase
  • Budget Formulation
• HHS Tribal Budget Consultation
What to Watch in 2020: Federal Relations

- President’s Budget
- Appointments
- Additional Priorities
  - Drug Pricing
  - 340B Program
Thanks for joining today!

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