Health Reform for Native Americans

The Patient Protection and Affordable Care Act includes the Indian Health Care Improvement Reauthorization and Extension Act, which permanently reauthorizes the Indian Health Care Improvement Act, and strengthens and improves health care for 1.9 million Native Americans across the country. The Act also reauthorizes Native Hawaiian health care programs through 2019.

Addresses the United States’ Treaty and Trust Obligations to Native Americans

The Federal Government has a treaty and trust responsibility to provide health care services to Native Americans. The Indian Health Care Improvement Act, which provides the key authorization for these services, has not been updated in over 17 years.

Native Americans suffer from health disparities when compared to the general U.S. population. For example, Native Americans die from diseases at much higher rates - tuberculosis (600 percent), alcoholism (510 percent) and suicide (72 percent) - and the Native American infant mortality rate is 12 per 1,000 persons compared to 7 per 1,000 persons for the general population. In addition, Native Americans experience the highest rate of youth suicide and type II diabetes of any group in the U.S. The Indian health system experiences high vacancy rates in health care providers: 26 percent for nurses, 24 percent for dentists, and 21 percent for physicians.

Improves Access to Health Care in Indian Country

✔ Recruitment and Retention of Health Care Providers
  o Increases the ability of Native American communities to recruit and retain health care professionals by updating the scholarship program.
  o Makes necessary updates to the Indian Health Service scholarship program.
  o Exempts health care professionals employed by a tribally operated health program from state licensing requirements within the boundaries of the Reservation, so long as the professional is licensed in the United States.

✔ Health Care Facilities
  o Authorizes the transfer of funds, equipment, or other supplies from sources such as federal or state agencies for use in construction or operation of Indian health facilities.
  o Establishes demonstration projects that provide incentives to use modern facility construction methods, such as modular component construction and mobile health stations, to save money and improve access to health care services.

✔ Modernizes the Indian Health System
  o Includes demonstration programs to promote new, innovative models of health care which are tribally-driven and will improve access to health care for Native Americans.
Expands Health Services Offered in the Indian Health System

✓ Cancer Screening
  o Authorizes the Indian Health Service to provide cancer screenings beyond mammographies, as limited under current law.

✓ Long-Term Care
  o Authorizes Indian health programs to provide long term services and supports, including home health care, assisted living, and community-based care.

✓ Behavioral Health and Suicide Prevention
  o Establishes mental and behavioral health programs beyond alcohol and substance abuse, such as fetal alcohol spectrum disorders, child sexual abuse prevention, and domestic violence prevention programs. Expands the American Indians into Psychology program.
  o Authorizes comprehensive youth suicide prevention efforts, by streamlining the Substance Abuse and Mental Health Services Administration (SAMHSA) grants for Indian youth suicide prevention; authorizing tribal use of pre-doctoral psychology and psychiatry interns; creating an Indian youth telemental health demonstration project for Native American communities to use to enhance mental health services and prevent youth suicides; and creating a demonstration project for youth suicide prevention curriculum programs in schools serving Indian youth.

Other Advancements to the Health Care Services Provided to Native Americans

✓ Expands program authority for Urban Indian Health Programs by establishing behavioral health or mental health training, drug abuse prevention programs, and communicable disease prevention programs for urban Indian organizations.

✓ Updates for tribal epidemiology centers, granting the centers more access to data in order to properly track the health status of Native Americans;

✓ Expansions to the chronic and infectious disease initiatives, by expanding the programs from only tuberculosis to all communicable and infectious diseases;

✓ Enhances the coordination between the Indian Health Service and Department of Veterans Affairs so as to improve the health care provided to Native American Veterans;

✓ Allows certain Indian tribes and urban Indian organizations to purchase coverage for their employees from the Federal Employees Health Benefits Program, and also authorizes Indian tribes to use Indian Health Service dollars to purchase health benefits coverage for beneficiaries; and

✓ Includes many other important expansions to improve the Indian health care system.