## **LEGISLATIVE UPDATE**

## **Indian Health Care Improvement Act 2017**

March 21, 2017

On March 6, 2017, Congressman Cole (R-OK) introduced H.R. 1369, to ensure that the Indian Health Care Improvement Act (IHCIA) is protected, in case it may be repealed. H.R. 1369 has been referred to the House Natural Resources, House Energy and Commerce, House Ways and Means, and House Budget Committees, and can be tracked on GovTrack.

Although it is not expected that IHCIA will be repealed, it is crucial to support this legislation to provide some safeguard to maintain the IHS, Tribal, and urban Indian health program (I/T/U) system of care. To voice your support for H.R. 1369, look up the contact information for your legislators and find your representatives.

In the beginning of this bill, it appears that 10 provisions are repealed from IHCIA, but almost all of these provisions are later replaced in the bill. Review the table below to see which IHCIA provisions were repealed and replaced within the IHCIA of 2017.

Code	Provision	Eliminated or replaced in IHCIA 2017
25 U.S.C 1621o	Indian youth grant program.	Replaced in Section 131
25 U.S.C 1616p	Health professional chronic shortage demonstration programs.	Replaced in Section 112
25 U.S.C 1638a	Tribal management of federally owned quarters.	Replaced in Section 144
25 U.S.C 1647	Eligible Indian veteran services.	Replaced in Section 407
25 U.S.C 1660b	Treatment of certain demonstration projects	Replaced in Section 512
25 U.S.C 1660d	Conferring with urban Indian organizations.	Replaced in Section 163
25 U.S.C 1663	Office of Direct Service Tribes.	Replaced in Section 172
25 U.S.C 1675	Confidentiality of medical quality assurance records; qualified immunity for participants	Replaced in Section 191
25 U.S.C 1621h(m)	Intermediate adolescent mental health services.	Deleted from current law prior to the introduction of H.R. 1369.
25 U.S.C 1621j	California contract health services demonstration program.	Deleted from current law prior to the introduction of H.R. 1369.



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