



Policymaking to Support the Health of Native American People

November 30, 2021

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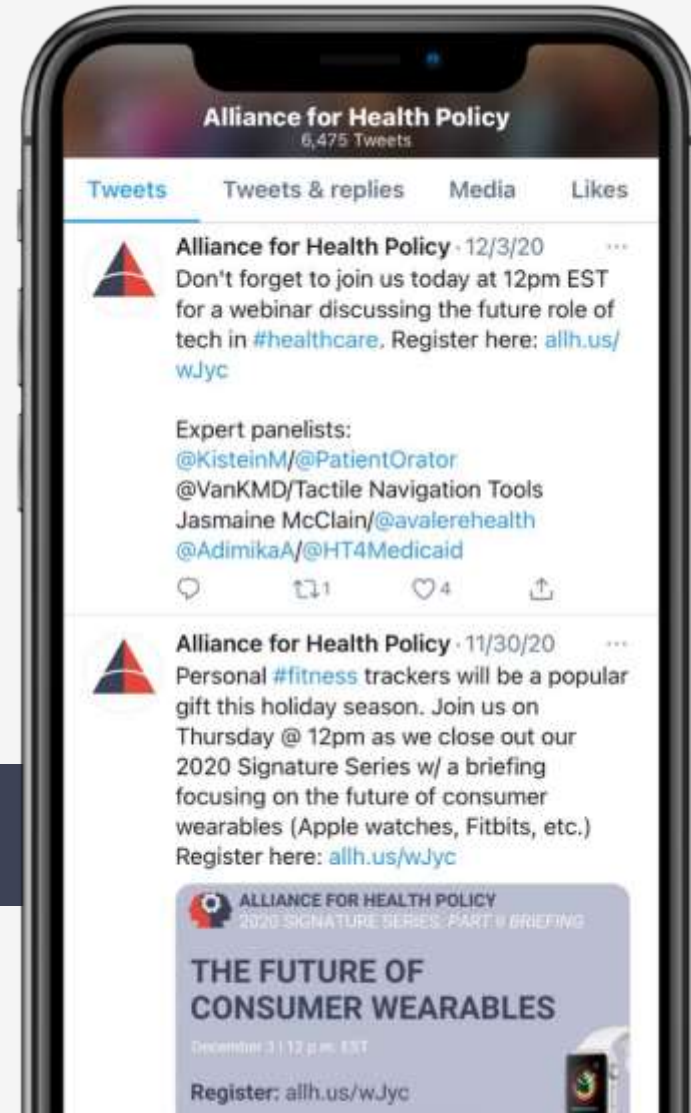


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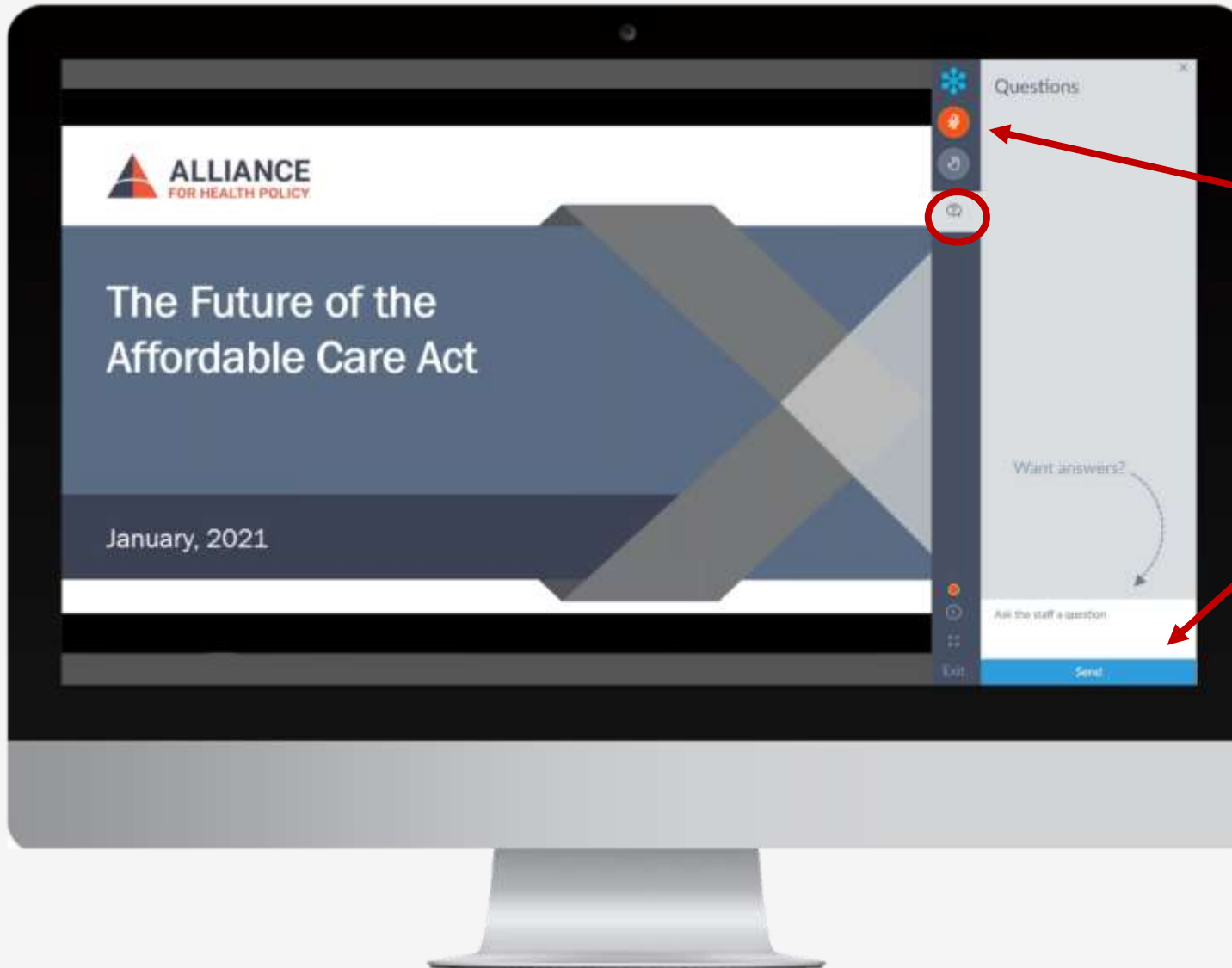


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Panelists



**Christopher Chavis, J.D., MPA,
(Lumbee Tribe of North Carolina)**

Policy Center Director
National Indian Health Board

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**John Molina, M.D., J.D.
(Pascua Yaqui and Yavapai-Apache)**

Compliance Officer
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**Nicole Redvers, N.D., MPH
(Deninu K'ue First Nation)**

Assistant Professor
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Moderator





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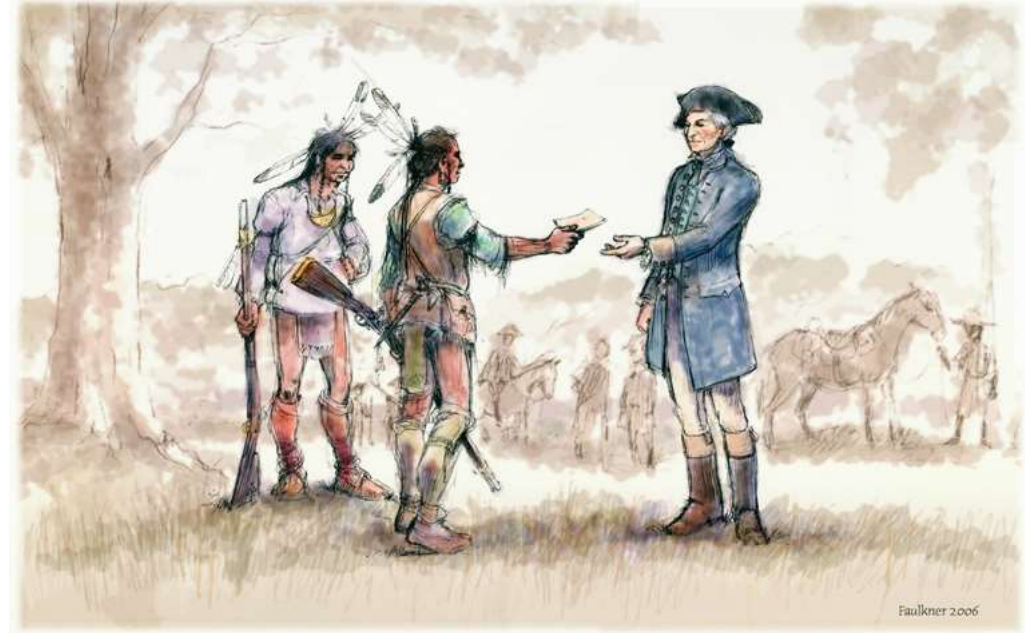
Indian Health 101: Fulfilling a Promise

November 30, 2021

Christopher D. Chavis, JD, MPA
Policy Center Director

Tribal Nations – The Oldest Governments in North America

- When the first colonists arrived, they encountered a continent that was already settled by existing sovereign nations.
- This was recognized in Article I, Section 8, Clause 3 of the U.S. Constitution, which states that the United States Congress shall have power *"To regulate Commerce with foreign Nations, and among the several States, and with the Indian Tribes."*



Treaty Obligations

- The provisions of services such as health care was included in treaties that Tribes signed with the United States as a condition for giving up their lands.
- This formed a very basic relationship: In exchange for land and resources, the federal government agreed to provide for the needs of Tribes.



Snyder Act (1921)

- In 1921, Congress passed the Snyder Act, which provided:
- “The Bureau of Indian Affairs, under the supervision of the Secretary of the Interior, shall direct, supervise, and expend such moneys as Congress may from time to time appropriate, for the benefit, care, and assistance of the Indians throughout the United States.”



Transfer Act (1954)

- In 1954, Congress placed the responsibility for providing health care to AI/AN people under the Public Health Service.
- Transferred responsibility for Indian health out of the Department of the Interior and into what would later become the Department of Health and Human Services



Indian Self-Determination and Education Assistance Act (1975)

- Allowed Tribes to assume control over their health care systems
- Over half of IHS's budget is controlled by Tribes under this Act.

Indian Health Care Improvement Act (1976)

- **Permanently reauthorized** in the Affordable Care Act.
- Strengthened the position and regulatory structure of the Indian health system.
 - Established Urban Indian Health Programs
- Permitted reimbursement of IHS/Tribal facilities by Medicare/Medicaid.
 - Established the 100% Federal Medical Assistance Percentage (FMAP) for services billed to Medicaid through an IHS/Tribal facility.

- “[I]t is the policy of this Nation, in fulfillment of its special trust responsibilities and legal obligations to Indians --[] to ensure the highest possible health status for Indians and urban Indians and to provide all resources necessary to effect that policy[.]” – 25 U.S.C 1602

Questions?

Contact Me!

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National Indian
Health Board





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John Molina, M.D., J.D.
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Learn More

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Thank you for attending.