

Amendments to S. 1790 - Indian Health Care Improvement Act

	Amendment	Introduced By	Purpose	Vote Results
1	892	Dorgan	<p>Manager's Amendment</p> <ul style="list-style-type: none"> • Inserts Dental Health Aide Therapist exclusion under the CHAP provision • Inserts Sec. 201 Indian Health Care Improvement Fund (same as H.R. 3962) • Inserts Sec. 202 Catastrophic Health Emergency Fund (same as H.R. 3962) • Inserts Sec. 204 Diabetes Prevention Treatment and Control (same as H.R. 3962) • Inserts Sec. 217 American Indians into Psychology Programs (same as H.R. 3962) • Inserts Sec. 106 Continuing Education Allowances (same as HR 3962) • Inserts Sec. 222 Liability for Payment (same as Sec. 224 in HR 3962) • Replaces Sec. 131 (Sec. 226) Contract Health Service Administration and Disbursement Formula: The negotiated rulemaking is removed and replaced with a requirement of review of the CHS report and tribal consultation on CHS. • Inserts Sec. 301(e) – Priority of Certain Projects Projected; however, note, this is the same language as in the Udall – Cantwell amendment • Replaces Sec. 142 of the bill (Sec. 307) – Indian Health Care Delivery Demonstration Projects – the new provision expands innovative health services delivery demo project and removes the peer review panels. • Inserts Navajo Nation Medicaid Agency Feasibility Study (same as Se. 413 in HR 3962) • Inserts Sec. 512 Treatment of Certain Demonstration Project. • Adds additional duty for Director of IHS. • Replaces Sec. 173 (Sec. 604) Nevada Area Office. Requires the submission of a plan to establish an area office in Nevada. The revised provision defines “operation funds” and requires that the withhold the operation funds not adversely affect the delivery of 	Passed

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			<p>health care services.</p> <ul style="list-style-type: none"> • Deletes “systems of care” definition and changes references of “Systems of Care” to “, if feasible and appropriate, incorporate systems of care.” • Under the Child Sexual Abuse and Prevention Treatment Programs – replaced the perpetrators of child abuse with reference to “who are family with other members of the household or family” and removed any provisions regarding perpetrators. • Inserts Sec. 827 Prescriptions Drug Monitoring program • Inserts Sec. 828 Tribal health program option for cost sharing. (In S. 1200 as Sec. 816) • Inserts Sec. 829 Disease and Injury Prevention Report • Inserts Sec. 830 Other GAO Reports: Studies on Coordination of Services (in S.1200 as Sec. 820); Payments for Contract Health Services (in HR. 3962 and S. 1200) • Inserts Sec. 831 Traditional health Care practices – states that the Federal government is not liable for any provision of traditional health care practices. • Removes the Sec. 201 – Solicitation of proposals for safe harbors under the social security act for facilities of Indian health programs and urban Indian organizations. Sec. 202 Annual report regarding Indians served by health benefits programs under Social Security Act, Sec. 203 Including costs of service in providing prescriptions drugs toward out of pocket cost threshold under Part D and Sec. 205 Expansion of payments under Medicare, Medicaid and CHIP for All Covered services furnished by Indian health programs. 	
2	771	Murkowski	<ul style="list-style-type: none"> • Authorize funds to be used for sanitation facilities (see Sec. 309 in H.R. 3962) 	Passed
3	826	Murkowski	<ul style="list-style-type: none"> • Directs states to collaborate with tribes to carry out youth suicide prevention and treatment measure 	Passed
4	852	Murkowski	<ul style="list-style-type: none"> • Strikes definition of Indian country 	Passed

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5	853	Murkowski	<ul style="list-style-type: none"> • Strikes "serving residents of Indian country" 	Passed
6	823	Murkowski	<ul style="list-style-type: none"> • Strikes "are Indian" from page 167 	Passed
7	816	Cantwell/Udall	<ul style="list-style-type: none"> • "Grandfathers" IHS facility priority list based on the list contained in FY 2008 IHS Budget request. • Directs Secretary to consult with tribes and confer with Indian organizations in development of area distribution fund to develop innovative ways to met facility needs 	Passed
8	824	Franken	<ul style="list-style-type: none"> • Establishes within the IHS a director of HIV/AIDS prevention and treatment 	Passed
9	833	Tester	<ul style="list-style-type: none"> • Authorizes the Secretary to donate facilities to urban organizations • Authorizes the Secretary to make grants to urban Indian organizations for health information technology • Amends Section 509 to also allow construction or expansion of facilities, in addition to renovation of facilities • Same as Sec. 504 in H.R. 3962 	Passed