ANHB looks into federal health laws

by the Alaska Native Health Board for the Tundru Times

New developments in health care policy at both the state and national level have been the focus of attention in recent months by the Alaska Native Health Board, a non-profit corporation recognized as a statewide voice on Alaska Native health issues.

Following a meeting of the 12-member ANHB in Sitka in May, activity has been directed toward several legislative issues. These include the status of regulations being drafted to implement amendments to P.L. 93-638, the Indian Self-Determination and Education Assistance Act, the need for increased funding for the Community Health Aide Program and for patient travel.

ANHB learned of an analysis by the Senate Select Committee on Indian Affairs on federal spending trends for Native American programs versus similar programs for non-Natives.

Based on the findings, Sens, John McCain, R-Ariz, and Daniel Inouye, D-Hawan, have suggested a \$1 billion increase over the president's proposed Fiscal Year 1991 budget for Indian programs be required to make funding for these programs more equitable.

ANHB is asking tribal groups in Alaska to voice their support for this proposal.

Tribal attorney Lloyd Miller of Sonosky, Chambers, Sachse and Miller reported at ANHB's May board meeting that the process for drafting regulations that would implement P.L. 100-472, the amendments to P.L. 93-638, is behind schedule.

The amendments will make it easier



for tribes to contract for health and social service programs and will give them greater flexibility.

An item of particular interest raised at the May meeting is a controversial federalism bill. Senate Bill 2512, which would remove entirely the monitoring bureaucracy which now controls delivery of health care and other services to Native Americans.

According to Miller, the bill would carry out a recommendation by Senate Special Investigations Committee that, "Congress looked at having a new relationship between the American Indian tribes and the United States... and that service delivery systems be turned over to Indian tribes for them to administer themselves."

While the bill has a lot of strengths, there are also problems, including the fact that the bill in its present form proposes that funds be distributed on a per capita basis.

ANHB Chairman John Jemewouk reports that a trip to Washington, D.C., in May to advocate for increased funding for the CHAP was very productive. Jemewouk spoke

with legislators, Office of Management and Budget staff and Indian Health Service personnel.

Following these meetings, Congressman Don Young, R-Alaska, recommended that the full \$9.24 million still needed for CHAP be added to the House version for the IHS FY 91 appropriation.

The issue of patient travel also was addressed during the meetings with federal legislators, OMB and IHS staff.

Members of Congress who were approached about the problem of underfunding expressed a high level of interest and have requested more information. An interim report was furnished to Congress in May.

A committee of the Association of Regional Health Directors is currently working to collect more data and will be publishing a final report in the fall to document the need for increased funding for patient travel in Alaska.

Other recent activities of ANHB include the following:

An invitation to members of the

House Committee on Interior and Insular Affairs to visit Alaska and conduct hearings in Bristol Bay and the Calista regions on mental health issues.

•Plans to provide input to Congress and the White House Office of Drug Abuse, urging that alcohol be included in the federal government's "war on drugs."

 Preparation of position statements to the Legislature regarding use of the Mental Health Lands Trust monies.

*Development of a presentation on ANHB's relationship with the IHS and regions to be presented at the 1990 National Tribal/IHS Consultation meeting in August.

•Input to the state on a proposal to seek funds to determine the number of individuals with dual mental health/drinking problems. ANHB has recommended that the study include more rural Alaskan communities.

 A presentation on patient travel by Tanana Chiefs Conference Health Director Paul Sherry at the National Congress of American Indians.

 Input to Congress on the need to include services and education for children with Fetal Alcohol Syndrome and Fetal Alcohol Effects in the omnibus drug bill House Resolution 4354 currently up for reauthorization.

 Investigation into the changes needed to allow clinics and hospitals to collect 100 percent of third party payments. (climinating the IHS "tap.")

 Support for the Division of Public Health's American Stop Smoking Intervention Study for Cancer Prevention (ASSIST) program.