



Padilla Urban Indian Health Amendment

Cosponsors: Moran, Rounds, Lankford, Schatz, Feinstein, Smith

What the amendment would do:

- Strike from existing law the requirement that Urban Indian Organizations (UIOs) may only use the IHS funding they already receive for renovation, construction, or expansion of facilities to meet or maintain specific accreditation standards (that are now obsolete).
- *It would just give UIOs more flexibility to use their existing funds for infrastructure upgrades, not give them more funding or take money from anyone else.*

What the problem is:

- The Indian Health System is made up of the Indian Health Service (IHS), Tribal health programs, and urban Indian organizations (UIOs). UIOs provide culturally competent care for the over 70 percent of American Indians and Alaska Natives who live in urban centers.
- Current federal law permits the IHS to make funds available to UIOs to make minor renovations to facilities or construction or expansion of facilities, **but only to assist UIOs in meeting or maintaining accreditation standards of The Joint Commission (TJC). However, only 1 out of the country's 41 UIOs currently maintain TJC accreditation** (the others are accredited by states, CMS, and other health accreditation organizations).
- 86 percent of UIOs report needing to make facilities and infrastructure upgrades, while 74 percent of UIOs report unmet need for new construction to better serve patients.
- According to recent congressional testimony from IHS, “expanding the current authority to be consistent with the authority for other government contractors, rather than limiting it under Section 1659 to only TJC accreditation, **would allow UIOs to make renovations, construction, or expansion of facilities necessary to improve the safety and quality of care provided to Urban Indian patients.**”
- *This is particularly relevant during the pandemic, since UIOs have been blocked from procuring new HVAC systems and other infrastructure upgrades to address COVID-19.*

Background:

- The amendment is identical to the bipartisan “Urban Indian Health Providers Facilities Improvement Act” (S. 1797/H.R. 3496). Cosponsors include Sens. Lankford, Feinstein, Moran, Smith, Warren, and Markey. The House companion is cosponsored by Reps. Gallego (D-AZ), Bacon (R-NE), O’Halleran (D-AZ), Fitzpatrick (R-PA), Bass (D-CA), DelBene (D-WA), Kilmer (D-WA), Cole (R-OK), Davids (D-KS), Stanton (D-AZ), DeGette (D-CO), Smith (D-WA), Young (R-AK), Stansbury (D-NM), and McCollum (D-MN).
- The Senate Indian Affairs Committee held a [hearing](#) on the bill on July 21, 2021.