

110TH CONGRESS
1ST SESSION

S. 2145

To amend the Indian Health Care Improvement Act to ensure that Indian veterans are not liable for certain health care payments.

IN THE SENATE OF THE UNITED STATES

OCTOBER 4, 2007

Mr. SMITH (for himself, Mr. JOHNSON, and Mr. DORGAN) introduced the following bill; which was read twice and referred to the Committee on the Judiciary

A BILL

To amend the Indian Health Care Improvement Act to ensure that Indian veterans are not liable for certain health care payments.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “American Indian Vet-
5 eran Health Care Improvement Act”.

6 **SEC. 2. HEALTH AND HUMAN SERVICES-VETERANS AF-**
7 **FAIRS COLLABORATIONS.**

8 (a) FINDINGS; PURPOSE.—

9 (1) FINDINGS.—Congress finds that—

1 (A) collaborations between the Secretary of
2 Health and Human Services and the Secretary
3 of Veterans Affairs regarding the treatment of
4 Indian veterans at facilities of the Indian
5 Health Service should be encouraged to the
6 maximum extent practicable; and

7 (B) increased enrollment for services of the
8 Department of Veterans Affairs by veterans
9 who are members of federally recognized Indian
10 tribes should be encouraged to the maximum
11 extent practicable.

12 (2) PURPOSE.—The purpose of the amendment
13 made by subsection (b) is to reaffirm the goals stat-
14 ed in the document entitled “Memorandum of Un-
15 derstanding Between the VA/Veterans Health Ad-
16 ministration And HHS/Indian Health Service” and
17 dated February 25, 2003 (relating to cooperation
18 and resource sharing between the Veterans Health
19 Administration and Indian Health Service).

20 (b) AMENDMENT.—Title IV of the Indian Health
21 Care Improvement Act (25 U.S.C. 1641 et seq.) is amend-
22 ed—

23 (1) by redesignating section 407 as section 408;
24 and

25 (2) by inserting after section 406 the following:

1 **“SEC. 407. ELIGIBLE INDIAN VETERAN SERVICES.**

2 “(a) DEFINITIONS.—In this section:

3 “(1) ELIGIBLE INDIAN VETERAN.—The term
4 ‘eligible Indian veteran’ means an Indian or Alaska
5 Native veteran who receives any medical service that
6 is—

7 “(A) authorized under the laws adminis-
8 tered by the Secretary of Veterans Affairs; and

9 “(B) administered at a facility of the Serv-
10 ice (including a facility operated by an Indian
11 tribe or tribal organization through a contract
12 or compact with the Service under the Indian
13 Self-Determination and Education Assistance
14 Act (25 U.S.C. 450 et seq.)) pursuant to a local
15 memorandum of understanding.

16 “(2) LOCAL MEMORANDUM OF UNDER-
17 STANDING.—The term ‘local memorandum of under-
18 standing’ means a memorandum of understanding
19 between the Secretary (or a designee, including the
20 director of any Area Office of the Service) and the
21 Secretary of Veterans Affairs (or a designee) to im-
22 plement the document entitled ‘Memorandum of Un-
23 derstanding Between the VA/Veterans Health Ad-
24 ministration And HHS/Indian Health Service’ and
25 dated February 25, 2003 (relating to cooperation

1 and resource sharing between the Veterans Health
2 Administration and Indian Health Service).

3 “(b) ELIGIBLE INDIAN VETERANS’ EXPENSES.—

4 “(1) IN GENERAL.—Notwithstanding any other
5 provision of law, the Secretary shall provide for vet-
6 eran-related expenses incurred by eligible Indian vet-
7 erans as described in subsection (a)(1)(B).

8 “(2) METHOD OF PAYMENT.—The Secretary
9 shall establish such guidelines as the Secretary de-
10 termines to be appropriate regarding the method of
11 payments to the Secretary of Veterans Affairs under
12 paragraph (1).

13 “(c) TRIBAL APPROVAL OF MEMORANDA.—In negoti-
14 ating a local memorandum of understanding with the Sec-
15 retary of Veterans Affairs regarding the provision of serv-
16 ices to eligible Indian veterans, the Secretary shall consult
17 with each Indian tribe that would be affected by the local
18 memorandum of understanding.

19 “(d) FUNDING.—

20 “(1) TREATMENT.—Expenses incurred by the
21 Secretary in carrying out subsection (b)(1) shall not
22 be considered to be Contract Health Service ex-
23 penses.

24 “(2) USE OF FUNDS.—Of funds made available
25 to the Secretary in appropriations Acts for the Serv-

1 ice (excluding funds made available for facilities, the
2 Contract Health Service, or contract support costs),
3 the Secretary shall use such sums as are necessary
4 to carry out this section.”.

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