



The 21st Navajo Nation Council

Contact: Alastair L. Bitsoi, Public Information Officer

Phone: (928) 871-7228

Cell: (928) 255-2943

Fax: (928) 871-7255

navajocouncil_pio@yahoo.com

www.navajonationcouncil.org

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FOR IMMEDIATE RELEASE

IGR Committee supports position of Congress, Administration to reauthorize Indian Health Care Improvement Act

WINDOW ROCK, Ariz. – The Intergovernmental Relations Committee of the 21st Navajo Nation Council passed legislation today supporting the position of the U.S. Congress and the Obama Administration in reauthorizing the Indian Health Care Improvement Act of 2009.

Legislation No. 0052-10, sponsored by Council Delegate Thomas Walker Jr. (Birdsprings/Leupp/Tolani Lake), was passed by the IGR committee with a 9-0 vote.

The legislation details urgency for Congress and the Administration to reauthorize the Indian Health Care Improvement Act of 2009 in the final national health reform package. The legislation also details the Navajo Nation's Health and Social Services Committee as the designated body that represents the Navajo position before Congress and the Administration.

“Reauthorization happens every 10 years. As we all know, the Obama Administration has been appealing to the public on national health care reform and the reform is pending before Congress, Walker said. “Our congressional representatives have recommended the Indian Health Care Improvement Act of 2009 be permanent law. This legislation is conveying our need for urgency.”

There are two versions of the health care reform bills. One bill is from the House of Representatives and the other from the Senate. Both bills include reauthorizing the Indian Health Care Improvement Act of 2009, as well as other health care improvements, which will affect the delivery of Indian Health Care to Indian Country.

Some of what is included in the Senate version is reauthorizing all Indian Health Care programs, authorizing programs for long-term care, address and improve youth suicide prevention, authorize a program to help recruit and retain health care professionals, and to require the IHS budget to maintain medical inflation rates and population growth to combat underfunding.

The House of Representative version includes some of the following: reauthorizing the Indian Health Care Improvement Act, expanding coverage to Indians who are part of State Children's Health Insurance program; amend the Indian Self-Determination and Education Assistance Act to direct the Secretary of Health and Human Services to establish the Native American Health and Wellness Foundation and authorizes urban Indian organizations for health information technology and other related infrastructure.

Roselyn Begay, program evaluation manager with the Navajo Division of Health, explained both bills will positively impact Navajo and the rest of Indian country if approved.

Begay said there are Navajo specific provisions in the two bills: a uranium study and Medicaid feasibility study on Navajo.

“The uranium study as you know will highlight the adverse impacts of uranium on Navajo,” Begay said. “The Medicaid feasibility study will allow the Navajo Nation to conduct and explore the idea of a 51st Medicaid state. The Navajo Nation has made positive strides with respect to Medicaid.”

Begay further expressed the importance of this major legislation and said, “This is strongly advocated by the Nation. We worked closely with the Health and Social Services Committee on this project and coordinated proper fashion with the oversight committee. We feel very positive and fortunate to have delegates who are interested in health care for the Navajo people.”

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