

1 DEPARTMENT OF HEALTH AND HUMAN
2 SERVICES

3 INDIAN HEALTH SERVICE

4 INDIAN HEALTH SERVICES

5 For expenses necessary to carry out the Act of Au-
6 gust 5, 1954 (68 Stat. 674), the Indian Self-Determina-
7 tion and Education Assistance Act, the Indian Health
8 Care Improvement Act, and titles II and III of the Public
9 Health Service Act with respect to the Indian Health Serv-
10 ice, \$3,867,260,000, together with payments received dur-
11 ing the fiscal year pursuant to sections 231(b) and 233
12 of the Public Health Service Act (42 U.S.C. 238(b),
13 238b), for services furnished by the Indian Health Service:
14 *Provided*, That funds made available to tribes and tribal
15 organizations through contracts, grant agreements, or any
16 other agreements or compacts authorized by the Indian
17 Self-Determination and Education Assistance Act of 1975
18 (25 U.S.C. 450), shall be deemed to be obligated at the
19 time of the grant or contract award and thereafter shall
20 remain available to the tribe or tribal organization without
21 fiscal year limitation: *Provided further*, That \$2,000,000
22 shall be available for grants or contracts with public or
23 private institutions to provide alcohol or drug treatment
24 services to Indians, including alcohol detoxification serv-
25 ices: *Provided further*, That \$928,830,000 for Purchased/

1 Referred Care, including \$53,000,000 for the Indian Cat-
2 astrophic Health Emergency Fund, shall remain available
3 until expended: *Provided further*, That of the funds pro-
4 vided, up to \$36,000,000 shall remain available until ex-
5 pended for implementation of the loan repayment program
6 under section 108 of the Indian Health Care Improvement
7 Act: *Provided further* That of the funds provided,
8 \$11,000,000 shall remain available until expended to sup-
9 plement funds available for operational costs at tribal clin-
10 ics operated under an Indian Self-Determination and Edu-
11 cation Assistance Act compact or contract where health
12 care is delivered in space acquired through a full service
13 lease, which is not eligible for maintenance and improve-
14 ment and equipment funds from the Indian Health Serv-
15 ice, and \$29,000,000 shall be for costs related to or result-
16 ing from accreditation emergencies, of which up to
17 \$4,000,000 may be used to supplement amounts otherwise
18 available for Purchased/Referred Care: *Provided further*,
19 That the amounts collected by the Federal Government
20 as authorized by sections 104 and 108 of the Indian
21 Health Care Improvement Act (25 U.S.C. 1613a and
22 1616a) during the preceding fiscal year for breach of con-
23 tracts shall be deposited to the Fund authorized by section
24 108A of that Act (25 U.S.C. 1616a-1) and shall remain
25 available until expended and, notwithstanding section

1 108A(c) of that Act (25 U.S.C. 1616a–1(c)), funds shall
2 be available to make new awards under the loan repay-
3 ment and scholarship programs under sections 104 and
4 108 of that Act (25 U.S.C. 1613a and 1616a): *Provided*
5 *further*, That the amounts made available within this ac-
6 count for the Substance Abuse and Suicide Prevention
7 Program, for the Domestic Violence Prevention Program,
8 for the Zero Suicide Initiative, for aftercare pilot pro-
9 grams at Youth Regional Treatment Centers, to improve
10 collections from public and private insurance at Indian
11 Health Service and tribally operated facilities, and for ac-
12 creditation emergencies shall be allocated at the discretion
13 of the Director of the Indian Health Service and shall re-
14 main available until expended: *Provided further*, That
15 funds provided in this Act may be used for annual con-
16 tracts and grants for which the performance period falls
17 within 2 fiscal years, provided the total obligation is re-
18 corded in the year the funds are appropriated: *Provided*
19 *further*, That the amounts collected by the Secretary of
20 Health and Human Services under the authority of title
21 IV of the Indian Health Care Improvement Act shall re-
22 main available until expended for the purpose of achieving
23 compliance with the applicable conditions and require-
24 ments of titles XVIII and XIX of the Social Security Act,
25 except for those related to the planning, design, or con-

1 construction of new facilities: *Provided further*, That funding
2 contained herein for scholarship programs under the In-
3 dian Health Care Improvement Act shall remain available
4 until expended: *Provided further*, That amounts received
5 by tribes and tribal organizations under title IV of the In-
6 dian Health Care Improvement Act shall be reported and
7 accounted for and available to the receiving tribes and
8 tribal organizations until expended: *Provided further*, That
9 the Bureau of Indian Affairs may collect from the Indian
10 Health Service, and from tribes and tribal organizations
11 operating health facilities pursuant to Public Law 93–638,
12 such individually identifiable health information relating
13 to disabled children as may be necessary for the purpose
14 of carrying out its functions under the Individuals with
15 Disabilities Education Act (20 U.S.C. 1400, et seq.): *Pro-*
16 *vided further*, That of the funds provided, \$130,000,000
17 is for the Indian Health Care Improvement Fund and may
18 be used, as needed, to carry out activities typically funded
19 under the Indian Health Facilities account.

20 CONTRACT SUPPORT COSTS

21 For payments to tribes and tribal organizations for
22 contract support costs associated with Indian Self-Deter-
23 mination and Education Assistance Act agreements with
24 the Indian Health Service for fiscal year 2018, such sums
25 as may be necessary: *Provided*, That notwithstanding any

1 other provision of law, no amounts made available under
2 this heading shall be available for transfer to another
3 budget account.

4 INDIAN HEALTH FACILITIES

5 For construction, repair, maintenance, improvement,
6 and equipment of health and related auxiliary facilities,
7 including quarters for personnel; preparation of plans,
8 specifications, and drawings; acquisition of sites, purchase
9 and erection of modular buildings, and purchases of trail-
10 ers; and for provision of domestic and community sanita-
11 tion facilities for Indians, as authorized by section 7 of
12 the Act of August 5, 1954 (42 U.S.C. 2004a), the Indian
13 Self-Determination Act, and the Indian Health Care Im-
14 provement Act, and for expenses necessary to carry out
15 such Acts and titles II and III of the Public Health Serv-
16 ice Act with respect to environmental health and facilities
17 support activities of the Indian Health Service,
18 \$551,643,000, to remain available until expended: *Pro-*
19 *vided*, That notwithstanding any other provision of law,
20 funds appropriated for the planning, design, construction,
21 renovation or expansion of health facilities for the benefit
22 of an Indian tribe or tribes may be used to purchase land
23 on which such facilities will be located: *Provided further*,
24 That not to exceed \$500,000 may be used by the Indian
25 Health Service to purchase TRANSAM equipment from

1 the Department of Defense for distribution to the Indian
2 Health Service and tribal facilities: *Provided further*, That
3 none of the funds appropriated to the Indian Health Serv-
4 ice may be used for sanitation facilities construction for
5 new homes funded with grants by the housing programs
6 of the United States Department of Housing and Urban
7 Development: *Provided further*, That not to exceed
8 \$2,700,000 from this account and the “Indian Health
9 Services” account may be used by the Indian Health Serv-
10 ice to obtain ambulances for the Indian Health Service
11 and tribal facilities in conjunction with an existing inter-
12 agency agreement between the Indian Health Service and
13 the General Services Administration: *Provided further*,
14 That not to exceed \$500,000 may be placed in a Demoli-
15 tion Fund, to remain available until expended, and be used
16 by the Indian Health Service for the demolition of Federal
17 buildings.

18 ADMINISTRATIVE PROVISIONS—INDIAN HEALTH SERVICE

19 Appropriations provided in this Act to the Indian
20 Health Service shall be available for services as authorized
21 by 5 U.S.C. 3109 at rates not to exceed the per diem rate
22 equivalent to the maximum rate payable for senior-level
23 positions under 5 U.S.C. 5376; hire of passenger motor
24 vehicles and aircraft; purchase of medical equipment; pur-
25 chase of reprints; purchase, renovation and erection of

1 modular buildings and renovation of existing facilities;
2 payments for telephone service in private residences in the
3 field, when authorized under regulations approved by the
4 Secretary of Health and Human Services; uniforms or al-
5 lowances therefor as authorized by 5 U.S.C. 5901–5902;
6 and for expenses of attendance at meetings that relate to
7 the functions or activities of the Indian Health Service:
8 *Provided*, That in accordance with the provisions of the
9 Indian Health Care Improvement Act, non-Indian patients
10 may be extended health care at all tribally administered
11 or Indian Health Service facilities, subject to charges, and
12 the proceeds along with funds recovered under the Federal
13 Medical Care Recovery Act (42 U.S.C. 2651–2653) shall
14 be credited to the account of the facility providing the
15 service and shall be available without fiscal year limitation:
16 *Provided further*, That notwithstanding any other law or
17 regulation, funds transferred from the Department of
18 Housing and Urban Development to the Indian Health
19 Service shall be administered under Public Law 86–121,
20 the Indian Sanitation Facilities Act and Public Law 93–
21 638: *Provided further*, That funds appropriated to the In-
22 dian Health Service in this Act, except those used for ad-
23 ministrative and program direction purposes, shall not be
24 subject to limitations directed at curtailing Federal travel
25 and transportation: *Provided further*, That none of the

1 funds made available to the Indian Health Service in this
2 Act shall be used for any assessments or charges by the
3 Department of Health and Human Services unless identi-
4 fied in the budget justification and provided in this Act,
5 or approved by the House and Senate Committees on Ap-
6 propriations through the reprogramming process: *Pro-*
7 *vided further*, That notwithstanding any other provision
8 of law, funds previously or herein made available to a tribe
9 or tribal organization through a contract, grant, or agree-
10 ment authorized by title I or title V of the Indian Self-
11 Determination and Education Assistance Act of 1975 (25
12 U.S.C. 5321 et seq. (title I), 5381 et seq. (title V)), may
13 be deobligated and reobligated to a self-determination con-
14 tract under title I, or a self-governance agreement under
15 title V of such Act and thereafter shall remain available
16 to the tribe or tribal organization without fiscal year limi-
17 tation: *Provided further*, That none of the funds made
18 available to the Indian Health Service in this Act shall
19 be used to implement the final rule published in the Fed-
20 eral Register on September 16, 1987, by the Department
21 of Health and Human Services, relating to the eligibility
22 for the health care services of the Indian Health Service
23 until the Indian Health Service has submitted a budget
24 request reflecting the increased costs associated with the
25 proposed final rule, and such request has been included

1 in an appropriations Act and enacted into law: *Provided*
2 *further*, That with respect to functions transferred by the
3 Indian Health Service to tribes or tribal organizations, the
4 Indian Health Service is authorized to provide goods and
5 services to those entities on a reimbursable basis, includ-
6 ing payments in advance with subsequent adjustment, and
7 the reimbursements received therefrom, along with the
8 funds received from those entities pursuant to the Indian
9 Self-Determination Act, may be credited to the same or
10 subsequent appropriation account from which the funds
11 were originally derived, with such amounts to remain
12 available until expended: *Provided further*, That reim-
13 bursements for training, technical assistance, or services
14 provided by the Indian Health Service will contain total
15 costs, including direct, administrative, and overhead costs
16 associated with the provision of goods, services, or tech-
17 nical assistance: *Provided further*, That the appropriation
18 structure for the Indian Health Service may not be altered
19 without advance notification to the House and Senate
20 Committees on Appropriations.

21 NATIONAL INSTITUTES OF HEALTH

22 NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH

23 SCIENCES

24 For necessary expenses for the National Institute of
25 Environmental Health Sciences in carrying out activities