

1 Service shall be considered to be a Federal employee for  
2 purposes of chapter 171 of title 28, United States Code.

3 Funds appropriated to the Forest Service shall be  
4 available to pay, from a single account, the base salary  
5 and expenses of employees who carry out functions funded  
6 by other accounts for Enterprise Program, Geospatial  
7 Technology and Applications Center, remnant Natural Re-  
8 source Manager, and National Technology and Develop-  
9 ment Program.

10 DEPARTMENT OF HEALTH AND HUMAN  
11 SERVICES

12 INDIAN HEALTH SERVICE

13 INDIAN HEALTH SERVICES

14 For expenses necessary to carry out the Act of Au-  
15 gust 5, 1954 (68 Stat. 674), the Indian Self-Determina-  
16 tion and Education Assistance Act, the Indian Health  
17 Care Improvement Act, and titles II and III of the Public  
18 Health Service Act with respect to the Indian Health Serv-  
19 ice, \$4,660,658,000, to remain available until September  
20 30, 2023, except as otherwise provided herein, together  
21 with payments received during the fiscal year pursuant to  
22 sections 231(b) and 233 of the Public Health Service Act  
23 (42 U.S.C. 238(b) and 238b), for services furnished by the  
24 Indian Health Service: *Provided*, That funds made avail-  
25 able to tribes and tribal organizations through contracts,

1 grant agreements, or any other agreements or compacts  
2 authorized by the Indian Self-Determination and Edu-  
3 cation Assistance Act of 1975 (25 U.S.C. 450), shall be  
4 deemed to be obligated at the time of the grant or contract  
5 award and thereafter shall remain available to the tribe  
6 or tribal organization without fiscal year limitation: *Pro-*  
7 *vided further*, That \$2,500,000 shall be available for  
8 grants or contracts with public or private institutions to  
9 provide alcohol or drug treatment services to Indians, in-  
10 cluding alcohol detoxification services: *Provided further*,  
11 That \$984,887,000 for Purchased/Referred Care, includ-  
12 ing \$53,000,000 for the Indian Catastrophic Health  
13 Emergency Fund, shall remain available until expended:  
14 *Provided further*, That of the funds provided, up to  
15 \$46,000,000 shall remain available until expended for im-  
16 plementation of the loan repayment program under section  
17 108 of the Indian Health Care Improvement Act: *Provided*  
18 *further*, That of the funds provided, \$58,000,000 shall be  
19 for costs related to or resulting from accreditation emer-  
20 gencies, including supplementing activities funded under  
21 the heading “Indian Health Facilities,” of which up to  
22 \$4,000,000 may be used to supplement amounts otherwise  
23 available for Purchased/Referred Care: *Provided further*,  
24 That the amounts collected by the Federal Government  
25 as authorized by sections 104 and 108 of the Indian

1 Health Care Improvement Act (25 U.S.C. 1613a and  
2 1616a) during the preceding fiscal year for breach of con-  
3 tracts shall be deposited in the Fund authorized by section  
4 108A of that Act (25 U.S.C. 1616a–1) and shall remain  
5 available until expended and, notwithstanding section  
6 108A(c) of that Act (25 U.S.C. 1616a–1(c)), funds shall  
7 be available to make new awards under the loan repay-  
8 ment and scholarship programs under sections 104 and  
9 108 of that Act (25 U.S.C. 1613a and 1616a): *Provided*  
10 *further*, That the amounts made available within this ac-  
11 count for the Substance Abuse and Suicide Prevention  
12 Program, for Opioid Prevention, Treatment and Recovery  
13 Services, for the Domestic Violence Prevention Program,  
14 for the Zero Suicide Initiative, for the housing subsidy au-  
15 thority for civilian employees, for Aftercare Pilot Pro-  
16 grams at Youth Regional Treatment Centers, for trans-  
17 formation and modernization costs of the Indian Health  
18 Service Electronic Health Record system, for national  
19 quality and oversight activities, to improve collections from  
20 public and private insurance at Indian Health Service and  
21 tribally operated facilities, for an initiative to treat or re-  
22 duce the transmission of HIV and HCV, for a maternal  
23 health initiative, for the Telebehaviorial Health Center of  
24 Excellence, for Alzheimer’s grants, for Village Built Clin-  
25 ics, for a produce prescription pilot, and for accreditation

1 emergencies shall be allocated at the discretion of the Di-  
2 rector of the Indian Health Service and shall remain avail-  
3 able until expended: *Provided further*, That funds provided  
4 in this Act may be used for annual contracts and grants  
5 that fall within 2 fiscal years, provided the total obligation  
6 is recorded in the year the funds are appropriated: *Pro-*  
7 *vided further*, That the amounts collected by the Secretary  
8 of Health and Human Services under the authority of title  
9 IV of the Indian Health Care Improvement Act (25 U.S.C.  
10 1613) shall remain available until expended for the pur-  
11 pose of achieving compliance with the applicable condi-  
12 tions and requirements of titles XVIII and XIX of the So-  
13 cial Security Act, except for those related to the planning,  
14 design, or construction of new facilities: *Provided further*,  
15 That funding contained herein for scholarship programs  
16 under the Indian Health Care Improvement Act (25  
17 U.S.C. 1613) shall remain available until expended: *Pro-*  
18 *vided further*, That amounts received by tribes and tribal  
19 organizations under title IV of the Indian Health Care Im-  
20 provement Act shall be reported and accounted for and  
21 available to the receiving tribes and tribal organizations  
22 until expended: *Provided further*, That the Bureau of In-  
23 dian Affairs may collect from the Indian Health Service,  
24 and from tribes and tribal organizations operating health  
25 facilities pursuant to Public Law 93–638, such individ-

1 ually identifiable health information relating to disabled  
2 children as may be necessary for the purpose of carrying  
3 out its functions under the Individuals with Disabilities  
4 Education Act (20 U.S.C. 1400 et seq.): *Provided further,*  
5 That of the funds provided, \$74,138,000 is for the Indian  
6 Health Care Improvement Fund and may be used, as  
7 needed, to carry out activities typically funded under the  
8 Indian Health Facilities account: *Provided further,* That  
9 none of the funds appropriated by this Act, or any other  
10 Act, to the Indian Health Service for the Electronic  
11 Health Record system shall be available for obligation or  
12 expenditure for the selection or implementation of a new  
13 Information Technology infrastructure system, unless the  
14 Committees on Appropriations of the House of Represent-  
15 atives and the Senate are consulted 90 days in advance  
16 of such obligation.

17 CONTRACT SUPPORT COSTS

18 For payments to tribes and tribal organizations for  
19 contract support costs associated with Indian Self-Deter-  
20 mination and Education Assistance Act agreements with  
21 the Indian Health Service for fiscal year 2022, such sums  
22 as may be necessary: *Provided,* That notwithstanding any  
23 other provision of law, no amounts made available under  
24 this heading shall be available for transfer to another  
25 budget account: *Provided further,* That amounts obligated

1 but not expended by a tribe or tribal organization for con-  
2 tract support costs for such agreements for the current  
3 fiscal year shall be applied to contract support costs due  
4 for such agreements for subsequent fiscal years.

5 PAYMENTS FOR TRIBAL LEASES

6 For payments to tribes and tribal organizations for  
7 leases pursuant to section 105(l) of the Indian Self-Deter-  
8 mination and Education Assistance Act (25 U.S.C.  
9 5324(l)) for fiscal year 2022, such sums as may be nec-  
10 essary, which shall be available for obligation through Sep-  
11 tember 30, 2023: *Provided*, That notwithstanding any  
12 other provision of law, no amounts made available under  
13 this heading shall be available for transfer to another  
14 budget account.

15 INDIAN HEALTH FACILITIES

16 For construction, repair, maintenance, demolition,  
17 improvement, and equipment of health and related auxil-  
18 iary facilities, including quarters for personnel; prepara-  
19 tion of plans, specifications, and drawings; acquisition of  
20 sites, purchase and erection of modular buildings, and  
21 purchases of trailers; and for provision of domestic and  
22 community sanitation facilities for Indians, as authorized  
23 by section 7 of the Act of August 5, 1954 (42 U.S.C.  
24 2004a), the Indian Self-Determination Act, and the In-  
25 dian Health Care Improvement Act, and for expenses nec-

1 essary to carry out such Acts and titles II and III of the  
2 Public Health Service Act with respect to environmental  
3 health and facilities support activities of the Indian Health  
4 Service, \$940,328,000, to remain available until expended:  
5 *Provided*, That notwithstanding any other provision of  
6 law, funds appropriated for the planning, design, construc-  
7 tion, renovation, or expansion of health facilities for the  
8 benefit of an Indian tribe or tribes may be used to pur-  
9 chase land on which such facilities will be located: *Pro-*  
10 *vided further*, That not to exceed \$500,000 may be used  
11 by the Indian Health Service to purchase TRANSAM  
12 equipment from the Department of Defense for distribu-  
13 tion to the Indian Health Service and tribal facilities: *Pro-*  
14 *vided further*, That of the amount appropriated under this  
15 heading for fiscal year 2022 for Sanitation Facilities Con-  
16 struction, \$40,171,000 shall be for projects specified for  
17 Sanitation Facilities Construction (CDS) in the table ti-  
18 tled “Interior and Environment Incorporation of Commu-  
19 nity Project Funding Items/Congressionally Directed  
20 Spending Items” included for this division in the explana-  
21 tory statement described in section 4 (in the matter pre-  
22 ceding division A of this consolidated Act): *Provided fur-*  
23 *ther*, That none of the funds appropriated to the Indian  
24 Health Service may be used for sanitation facilities con-  
25 struction for new homes funded with grants by the hous-

1 ing programs of the United States Department of Housing  
2 and Urban Development.

3 ADMINISTRATIVE PROVISIONS—INDIAN HEALTH SERVICE

4 Appropriations provided in this Act to the Indian  
5 Health Service shall be available for services as authorized  
6 by 5 U.S.C. 3109 at rates not to exceed the per diem rate  
7 equivalent to the maximum rate payable for senior-level  
8 positions under 5 U.S.C. 5376; hire of passenger motor  
9 vehicles and aircraft; purchase of medical equipment; pur-  
10 chase of reprints; purchase, renovation, and erection of  
11 modular buildings and renovation of existing facilities;  
12 payments for telephone service in private residences in the  
13 field, when authorized under regulations approved by the  
14 Secretary of Health and Human Services; uniforms, or al-  
15 lowances therefor as authorized by 5 U.S.C. 5901–5902;  
16 and for expenses of attendance at meetings that relate to  
17 the functions or activities of the Indian Health Service:  
18 *Provided*, That in accordance with the provisions of the  
19 Indian Health Care Improvement Act, non-Indian patients  
20 may be extended health care at all tribally administered  
21 or Indian Health Service facilities, subject to charges, and  
22 the proceeds along with funds recovered under the Federal  
23 Medical Care Recovery Act (42 U.S.C. 2651–2653) shall  
24 be credited to the account of the facility providing the  
25 service and shall be available without fiscal year limitation:



1 *Provided further*, That notwithstanding any other law or  
2 regulation, funds transferred from the Department of  
3 Housing and Urban Development to the Indian Health  
4 Service shall be administered under Public Law 86–121,  
5 the Indian Sanitation Facilities Act and Public Law 93–  
6 638: *Provided further*, That funds appropriated to the In-  
7 dian Health Service in this Act, except those used for ad-  
8 ministrative and program direction purposes, shall not be  
9 subject to limitations directed at curtailing Federal travel  
10 and transportation: *Provided further*, That none of the  
11 funds made available to the Indian Health Service in this  
12 Act shall be used for any assessments or charges by the  
13 Department of Health and Human Services unless identi-  
14 fied in the budget justification and provided in this Act,  
15 or approved by the House and Senate Committees on Ap-  
16 propriations through the reprogramming process: *Pro-*  
17 *vided further*, That notwithstanding any other provision  
18 of law, funds previously or herein made available to a tribe  
19 or tribal organization through a contract, grant, or agree-  
20 ment authorized by title I or title V of the Indian Self-  
21 Determination and Education Assistance Act of 1975 (25  
22 U.S.C. 450 et seq.), may be deobligated and reobligated  
23 to a self-determination contract under title I, or a self-  
24 governance agreement under title V of such Act and there-  
25 after shall remain available to the tribe or tribal organiza-

1 tion without fiscal year limitation: *Provided further*, That  
2 none of the funds made available to the Indian Health  
3 Service in this Act shall be used to implement the final  
4 rule published in the Federal Register on September 16,  
5 1987, by the Department of Health and Human Services,  
6 relating to the eligibility for the health care services of  
7 the Indian Health Service until the Indian Health Service  
8 has submitted a budget request reflecting the increased  
9 costs associated with the proposed final rule, and such re-  
10 quest has been included in an appropriations Act and en-  
11 acted into law: *Provided further*, That with respect to func-  
12 tions transferred by the Indian Health Service to tribes  
13 or tribal organizations, the Indian Health Service is au-  
14 thorized to provide goods and services to those entities on  
15 a reimbursable basis, including payments in advance with  
16 subsequent adjustment, and the reimbursements received  
17 therefrom, along with the funds received from those enti-  
18 ties pursuant to the Indian Self-Determination Act, may  
19 be credited to the same or subsequent appropriation ac-  
20 count from which the funds were originally derived, with  
21 such amounts to remain available until expended: *Provided*  
22 *further*, That reimbursements for training, technical as-  
23 sistance, or services provided by the Indian Health Service  
24 will contain total costs, including direct, administrative,  
25 and overhead costs associated with the provision of goods,

1 services, or technical assistance: *Provided further*, That  
2 the Indian Health Service may provide to civilian medical  
3 personnel serving in hospitals operated by the Indian  
4 Health Service housing allowances equivalent to those that  
5 would be provided to members of the Commissioned Corps  
6 of the United States Public Health Service serving in simi-  
7 lar positions at such hospitals: *Provided further*, That the  
8 appropriation structure for the Indian Health Service may  
9 not be altered without advance notification to the House  
10 and Senate Committees on Appropriations.

11 NATIONAL INSTITUTES OF HEALTH

12 NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH

13 SCIENCES

14 For necessary expenses for the National Institute of  
15 Environmental Health Sciences in carrying out activities  
16 set forth in section 311(a) of the Comprehensive Environ-  
17 mental Response, Compensation, and Liability Act of  
18 1980 (42 U.S.C. 9660(a)) and section 126(g) of the  
19 Superfund Amendments and Reauthorization Act of 1986,  
20 \$82,540,000.