National Indian Health Board



September 15, 2023

The Honorable Roselyn Tso Director Indian Health Service U.S. Department of Health and Human Services 5600 Fishers Lane Rockville, MD 20857

Submitted via regulations.gov

Re: Catastrophic Health Emergency Fund

Dear Director Tso:

On behalf of the National Indian Health Board (NIHB), I write to provide a response to the Indian Health Service (IHS) proposed rule, "Catastrophic Health Emergency Fund" (CHEF) (88 FR 45867 (July 18, 2023)). We at NIHB appreciate the agency's dedication to meeting the extraordinary medical costs associated with the treatment of victims of disasters or catastrophic illnesses who are within the responsibility of IHS.

The NIHB supports several of the key provisions proposed in this rule. First, we appreciate and support the reduction in the threshold from \$25,000 to \$19,000, with an annual adjustment matching the Consumer Price Index (CPI) update. We also support the implementation of an appeal process for CHEF cases that are denied reimbursement, and the option for CHEF claims to be submitted electronically.

Finally, we appreciate and support the decision by the agency to ensure that it no longer considers Tribal Self-Insurance as an alternate resource for the purposes of the CHEF program. Even so, , we think the proposed rule should include explicit language stating this, so there is no ambiguity. We suggest that the definition of "Alternate Resources" be revised, such as follows:

Alternate Resources—health care resources, such as health care providers and institutions and health care programs, for the payment of health services, including but not limited to programs under titles XVIII or XIX of the Social Security Act (*i.e.*, Medicare, Medicaid), state or local health care programs, and private insurance. Alternate Resources do not include health care resources of the Indian Health Service, or those of an Indian Tribe or Tribal Organization, nor those provided through a tribal self-insured plan or other tribal program.

We hope to see these provisions finalized in the promulgation of any final rule.

We appreciate your consideration of the above comments in support of this proposed rule. I am thankful for the partnership between NIHB and IHS, and for the work that this agency embarks on



NIHB Letter to IHS Director Tso Re: Catastrophic Health Emergency Fund September 15, 2023 Page 2 of 2

to ensure that Tribal citizens are taken care of and can reach the highest level of health available to them. The National Indian Health Board looks forward to continued engagement with the agency on this issue.

Yours in health,

Stacy A. Bohlen, Sault Ste. Marie Chippewa

Chief Executive Officer

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National Indian Health Board