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HHS Announces \$500 Million Distribution to Tribal Hospitals, Clinics, and Urban Health Centers

Today, the Department of Health and Human Services (HHS) announced \$500 million in payments from the Provider Relief Fund to the Indian Health Service (IHS) and tribal hospitals, clinics, and urban health centers to support the tribal response to COVID-19.

The pandemic has disproportionately impacted IHS providers and programs. Many such providers have experienced significantly increased need for personal protective equipment (PPE) as well as increased labor costs due to employees that have been exposed to COVID-19. At least 233 facilities across the Indian health system serve as the only health care provider for both IHS and non-IHS beneficiaries, making them critical to stopping the spread of COVID-19 and reopening America. This funding provides vital support to these healthcare facilities, which in some cases may be the only healthcare facility within a day's traveling distance for those served. Combined with previous funding, this distribution brings the total amount of new resources to the Indian health system to \$2.4 billion dollars.

"President Trump has prioritized the health and well-being of American Indians and Alaska Natives throughout his presidency and the COVID-19 crisis," said HHS Secretary Alex Azar. "The Trump Administration is making a targeted allocation from the funds Congress provided to send \$500 million to Indian healthcare facilities. Combined with other funding, supplies, and flexibility around telehealth, we are working with tribal governments to do everything we can to support heroic Indian healthcare workers and protect Indian Country from COVID-19."

"The Indian Health Service, along with our tribal and urban Indian organization partners, are delivering crucial services under extraordinary circumstances," said IHS Director Rear Adm. Michael D. Weahkee. "The resources provided by the Provider Relief Fund will make a real difference in our ability to fulfill the IHS mission of raising the physical, mental, social and spiritual health of American Indians and Alaska Natives during this pandemic."

Distribution Methodology

- IHS and tribal hospitals will receive a \$2.81 million base payment plus three percent of their total operating expenses
- IHS and tribal clinics and programs will receive a \$187,000 base payments plus five percent of the estimated service population multiplied by the average cost per user
- IHS urban programs will receive a \$181,000 base payment plus six percent of the estimated service population multiplied by the average cost per user

HHS has allocated approximately 4% of available funding for Urban Indian Health Programs, consistent with the percent of patients served by Urban Indian Organizations (UIOs) in relation to the total IHS active user population, as well as prior allocations of IHS COVID-19 funding. The remaining funding will be divided equally between hospitals and clinics.

How did HHS determine operating costs for IHS clinics and UIOs?

HHS identified the service population for most service units, and estimated an operating cost of \$3,943 per person per year based on actual IHS spending per user from a 2019 IHS Expenditures Per Capita and Other Federal Health Care Expenditures Per Capita report.

President Trump is providing support to healthcare providers fighting the COVID-19 pandemic through the bipartisan CARES Act and the Paycheck Protection Program and Health Care Enhancement Act that provide \$175 billion in relief funds to hospitals and other healthcare providers on the front lines of the coronavirus response. The allocation of these funds is part of the Trump Administration's whole-of-America approach to addressing the economic impact of COVID-19 on providers and doing so as quickly and transparently as possible.

Visit https://www.ihs.gov/coronavirus/ for the latest information on the COVID-19 response from IHS

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