

§ 1602. Declaration of national Indian health policy

Congress declares that it is the policy of this Nation, in fulfillment of its special trust responsibilities and legal obligations to Indians—

(1) to ensure the highest possible health status for Indians and urban Indians and to provide all resources necessary to effect that policy;

(2) to raise the health status of Indians and urban Indians to at least the levels set forth in the goals contained within the Healthy People 2010 initiative or successor objectives;

(3) to ensure maximum Indian participation in the direction of health care services so as to render the persons administering such services and the services themselves more responsive to the needs and desires of Indian communities;

(4) to increase the proportion of all degrees in the health professions and allied and associated health professions awarded to Indians so that the proportion of Indian health professionals in each Service area is raised to at least the level of that of the general population;

(5) to require that all actions under this chapter shall be carried out with active and meaningful consultation with Indian tribes and tribal organizations, and conference with urban Indian organizations, to implement this chapter and the national policy of Indian self-determination;

(6) to ensure that the United States and Indian tribes work in a government-to-government relationship to ensure quality health care for all tribal members; and

(7) to provide funding for programs and facilities operated by Indian tribes and tribal organizations in amounts that are not less than the amounts provided to programs and facilities operated directly by the Service.

(Pub. L. 94-437, §3, Sept. 30, 1976, 90 Stat. 1401; Pub. L. 102-573, §3(b), Oct. 29, 1992, 106 Stat. 4526; Pub. L. 111-148, title X, §10221(a), Mar. 23, 2010, 124 Stat. 935.)

Editorial Notes

REFERENCES IN TEXT

This chapter, referred to in par. (5), was in the original “this Act”, meaning Pub. L. 94-437, Sept. 30, 1976, 90 Stat. 1400, known as the Indian Health Care Improvement Act, which is classified principally to this chapter. For complete classification of this Act to the Code, see Short Title note set out under section 1601 of this title and Tables.

CODIFICATION

Amendment by Pub. L. 111-148 is based on section 103 of title I of S. 1790, One Hundred Eleventh Congress, as reported by the Committee on Indian Affairs of the Senate in Dec. 2009, which was enacted into law by section 10221(a) of Pub. L. 111-148.

AMENDMENTS

2010—Pub. L. 111-148 amended section generally. Prior to amendment, section related to declaration of health objectives.

1992—Pub. L. 102-573 amended section generally. Prior to amendment, section read as follows: “The Congress hereby declares that it is the policy of this Nation, in

fulfillment of its special responsibilities and legal obligation to the American Indian people, to meet the national goal of providing the highest possible health status to Indians and to provide existing Indian health services with all resources necessary to effect that policy.”

§ 1603. Definitions

In this chapter:

(1) Area office

The term “Area office” means an administrative entity including a program office, within the Indian Health Service through which services and funds are provided to the service units within a defined geographic area.

(2) Behavioral health

(A) In general

The term “behavioral health” means the blending of substance (alcohol, drugs, inhalants, and tobacco) abuse and mental health disorders prevention and treatment for the purpose of providing comprehensive services.

(B) Inclusions

The term “behavioral health” includes the joint development of substance abuse and mental health treatment planning and coordinated case management using a multidisciplinary approach.

(3) California Indian

The term “California Indian” means any Indian who is eligible for health services provided by the Service pursuant to section 1679 of this title.

(4) Community college

The term “community college” means—

- (A) a tribal college or university; or
- (B) a junior or community college.

(5) Contract health service

The term “contract health service” means any health service that is—

(A) delivered based on a referral by, or at the expense of, an Indian health program; and

(B) provided by a public or private medical provider or hospital that is not a provider or hospital of the Indian health program.

(6) Department

The term “Department”, unless otherwise designated, means the Department of Health and Human Services.

(7) Disease prevention

(A) In general

The term “disease prevention” means any activity for—

(i) the reduction, limitation, and prevention of—

- (I) disease; and
- (II) complications of disease; and

(ii) the reduction of consequences of disease.

(B) Inclusions

The term “disease prevention” includes an activity for—