



COMMENTS ON BEHAVIORAL HEALTH DULL: ABSTRACT

- Request for a 21.7% set-aside
 - NCUIH calculated this number utilizing the current amount of behavioral health funds that go to Urban Indian Organizations – and averaging it among the UIHPs (Title V UIOs) currently receiving those funds – we then multiplied that number by the at the time 38 UIHPs (Title V UIOs)
 - This number gave us the percentage amount needed to enable all UIHPs an opportunity to receive current average levels of UIO behavioral health funding, as if available solely to Title V UIOs
 - Note that there are now 41 UIHPs
 - We understand that the current level is at 10% but respectfully request a higher amount to enable more UIHPs to provide critical behavioral health services – as the number of UIHPs continues to grow, the percentage set-aside should account for that growth
 - The set-aside should be a percentage rather than a firm number – to account for budget increases and inflation
- Only Title V UIOs should be eligible for this *IHS behavioral health* funding
 - As with the urban Indian line item, these IHS funds should only go to UIHPs – UIOs providing health services pursuant to a contract under Title V of IHCA
 - Title V UIOs embody the third prong of the I/T/U system because they are IHS-certified and maintain the high standards that IHS has set
 - For example, UIHPs follow IHS practices, procedures, and quality control measures in the IHS Manual
 - UIHPs are also subject to IHS audit
 - ****(NEW POINT)**** Of the 5 non-Title V / non UIHP organizations currently receiving grants, 4 are in areas also served by UIHPs – should be afforded the opportunity to receive IHS BH grants
- This funding is critical to UIHPs
 - UIHPs face chronic underfunding – with only around 1% of IHS’s total budget going towards the Urban Indian line item
 - This is despite the fact that over 70% of AI/ANs now reside in urban areas
 - UIHPs are thus faced with the harsh reality of obtaining supplemental sources of funding to provide more services to more patients
 - UIHPs depend on these behavioral health grants – as they are frequently the only money received for that purpose – to provide behavioral health services
 - Without access to these grants, some UIHPs would have to scale back or entirely discontinue the behavioral health services they currently provide
- The grant structure enables UIHPs to receive technical assistance

