**HEROES ACT Summary of Indian Provisions**

House Dems' COVID-19 relief package, the HEROES Act-H.R. 6800, includes the following:

Tribal Fiscal Relief – $20 billion in funding to assist Tribal governments with the fiscal impacts from the public health emergency caused by the coronavirus. $500 billion for states, $375 billion for local governments and $20 billion for territories.

Community Development Financial Institutions (CDFI) – $1 billion for economic support and recovery in distressed communities by providing financial and technical assistance to CDFIs.

Assistance to Homeowners--$75 billion to states, territories, and tribes to address the ongoing needs of homeowners struggling to afford their housing due directly or indirectly to the impacts of the pandemic by providing direct assistance with mortgage payments, property taxes, property insurance, utilities, and other housing related costs.

$50 million for grants through the State and Tribal Wildlife grant program.

Bureau of Indian Affairs – $900 million to meet Tribal government needs necessary to prevent, prepare for, and respond to coronavirus, including:

* $780 million to continue Tribal government operations and programs and to clean Tribal facilities.
* $100 million to address overcrowded housing which is prohibiting social isolation.

Indian Health Service – $2.1 billion to address health care needs related to coronavirus for Native Americans, including:

* $1 billion to account for lost third party revenues as a result of reduced medical care.
* $64 million to assist Urban Indian Organizations.
* $10 million to assist with sanitation, hydration and hygiene needs in Indian Country necessary to prevent, prepare for, and respond to coronavirus.
* $500 million to provide health care, including telehealth services to Native Americans, and to purchase medical supplies and personal protective equipment.
* $140 million to expand broadband infrastructure and information technology for telehealth and electronic health records system purposes.
* $20 million to provide health care, housing and isolation units for domestic violence victims and homeless Native Americans.
* No less than $366 million to provide isolation or quarantine space.

Within SAMHSA, not less $150 million for tribes, tribal organizations, urban Indian health organizations, or health service providers to tribes across a variety of programs.

Within CMS, extends 100% FMAP to urban Indian programs from July 1, 2020 to June 30, 2021 and allows services with a referral from an Indian health provider outside of the four walls of a clinic from July 1, 2020 to June 30, 2021.

Division C – Health Provisions

Section 30106. Temporary extension of 100 percent FMAP to Indian health providers. Clarifies that services received through urban Indian providers are matched at 100 percent FMAP through June 30, 2021.

Section 30575. Tribal funding to research health inequities, including COVID-19. Requires the Indian Health Service (IHS), in coordination with CDC and NIH, to conduct research and field studies to improve understanding of tribal health inequities.

Section 30641. Improving State, local, and Tribal public health security. Extends eligibility for the CDC’s Public Health Emergency Preparedness (PHEP) program to Tribes.

Section 30642. Provision of items to Indian programs and facilities. Guarantees IHS and other Tribal health organizations direct access to the Strategic National Stockpile, just like all 50 other states.

Section 30643. Ensure parity for urban Native veterans. Allows the Urban Indian Health Organizations (UIHO) to bill VA for care provided to qualified urban native veterans.

Section 30644. Ensure coverage for Native veterans. Clarifies VA coverage for Native Veterans who qualify for both VA benefits and HIS services.