Union Calendar No.

116TH CONGRESS 2D SESSION H.R. 7948

[Report No. 116-]

To amend the Public Health Service Act with respect to the collection and availability of health data with respect to Indian Tribes, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

August 7, 2020

Mr. GIANFORTE (for himself, Mr. Luján, Mrs. Rodgers of Washington, Mr. Mullin, Mr. O'Halleran, and Mr. Ruiz) introduced the following bill; which was referred to the Committee on Energy and Commerce

SEPTEMBER --, 2020

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on August 7, 2020]

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A BILL

To amend the Public Health Service Act with respect to the collection and availability of health data with respect to Indian Tribes, and for other purposes.

1	Be it enacted by the Senate and House of Representa-
2	tives of the United States of America in Congress assembled,
3	SECTION 1. SHORT TITLE.
4	This Act may be cited as the "Tribal Health Data Im-
5	provement Act of 2020".
6	SEC. 2. COLLECTION AND AVAILABILITY OF HEALTH DATA
7	WITH RESPECT TO INDIAN TRIBES.
8	(a) Data Collection.—Section 3101(a)(1) of the
9	Public Health Service Act (42 U.S.C. 300kk(a)(1)) is
10	amended—
11	(1) by striking ", by not later than 2 years after
12	the date of enactment of this title,"; and
13	(2) in subparagraph (B), by inserting "Tribal,"
14	after "State,".
15	(b) Data Reporting and Dissemination.—Section
16	3101(c) of the Public Health Service Act (42 U.S.C.
17	300kk(c)) is amended—
18	(1) by amending subparagraph (F) of paragraph
19	(1) to read as follows:
20	"(F) the Indian Health Service, Indian
21	Tribes, Tribal organizations, and epidemiology
22	centers authorized under the Indian Health Care
23	Improvement Act;"; and

1	(2) in paragraph (3), by inserting "Indian
2	Tribes, Tribal organizations, and epidemiology cen-
3	ters," after "Federal agencies,".
4	(c) Protection and Sharing of Data.—Section
5	3101(e) of the Public Health Service Act (42 U.S.C.
6	300kk(e)) is amended by adding at the end the following
7	new paragraphs:
8	"(3) Data sharing strategy.—With respect to
9	data access for Tribal epidemiology centers and
10	Tribes, the Secretary shall create a data sharing
11	strategy that takes into consideration recommenda-
12	tions by the Secretary's Tribal Advisory Committee
13	for—
14	"(A) ensuring that Tribal epidemiology cen-
15	ters and Indian Tribes have access to the data
16	sources necessary to accomplish their public
17	health responsibilities; and
18	"(B) protecting the privacy and security of
19	such data.
20	"(4) Tribal public health authority.—
21	"(A) AVAILABILITY.—Beginning not later
22	than 180 days after the date of the enactment of
23	the Tribal Health Data Improvement Act of
24	2020, the Secretary shall make available to the
25	entities listed in subparagraph (B) all data that

1	is collected pursuant to this title with respect to
2	health care and public health surveillance pro-
3	grams and activities, including such programs
4	and activities that are federally supported or
5	conducted, so long as—
6	"(i) such entities request the data pur-
7	suant to statute; and
8	"(ii) the data is requested for use—
9	"(I) consistent with Federal law
10	and obligations; and
11	"(II) to satisfy a particular pur-
12	pose or carry out a specific function
13	consistent with the purpose for which
14	the data was collected.
15	"(B) Entities.—The entities listed in this
16	subparagraph are—
17	"(i) the Indian Health Service;
18	"(ii) Indian Tribes and Tribal organi-
19	zations; and
20	"(iii) epidemiology centers.".
21	(d) Technical Updates.—Section 3101 of the Public
22	Health Service Act (42 U.S.C. 300kk) is amended—
23	(1) by striking subsections (g) and (h); and
24	(2) by redesignating subsection (i) as subsection
25	(h).

1	(e) Definitions.—After executing the amendments
2	made by subsection (d), section 3101 of the Public Health
3	Service Act (42 U.S.C. 300kk) is amended by inserting after
4	subsection (f) the following new subsection:
5	"(g) Definitions.—In this section:
6	"(1) The term 'epidemiology center' means an
7	epidemiology center established under section 214 of
8	the Indian Health Care Improvement Act, including
9	such Tribal epidemiology centers serving Indian
10	Tribes regionally and any Tribal epidemiology center
11	serving Urban Indian organizations nationally.
12	"(2) The term 'Indian Tribe' has the meaning
13	given to the term 'Indian tribe' in section 4 of the In-
14	dian Self-Determination and Education Assistance
15	Act.
16	"(3) The term 'Tribal organization' has the
17	meaning given to the term 'tribal organization' in
18	section 4 of the of the Indian Self-Determination and
19	Education Assistance Act.
20	"(4) The term 'Urban Indian organization' has
21	the meaning given to that term in section 4 of the In-
22	dian Health Care Improvement Act.".
23	(f) Technical Correction.—Section 3101(b) of the
24	Public Health Service Act (42 U.S.C. 300kk(b)) is amended
25	by striking "Data Analysis.—" and all that follows

1	through "For each federally" and inserting "Data Anal-
2	YSIS.—For each federally".
3	SEC. 3. IMPROVING HEALTH STATISTICS REPORTING WITH
4	RESPECT TO INDIAN TRIBES.
5	(a) Technical Aid to States and Localities.—
6	Section 306(d) of the Public Health Service Act (42 U.S.C.
7	242k(d)) is amended by inserting ", Indian Tribes, Tribal
8	organizations, and epidemiology centers" after "jurisdic-
9	tions".
10	(b) Cooperative Health Statistics System.—
11	Section 306(e)(3) of the Public Health Service Act (42
12	U.S.C. 242k(e)(3)) is amended by inserting ", Indian
13	Tribes, Tribal organizations, and epidemiology centers"
14	after "health agencies".
15	(c) Federal-State-Tribal Cooperation.—Section
16	306(f) of the Public Health Service Act (42 U.S.C. 242k(f))
17	is amended—
18	(1) by inserting "the Indian Health Service," be-
19	fore "the Departments of Commerce";
20	(2) by inserting a comma after "the Depart-
21	ments of Commerce and Labor";
22	(3) by inserting ", Indian Tribes, Tribal organi-
23	zations, and epidemiology centers" after "State and
24	local health departments and agencies"; and

1	(4) by striking "he shall" and inserting "the Sec-
2	retary shall".
3	(d) Registration Area Records.—Section
4	306(h)(1) of the Public Health Service Act (42 U.S.C.
5	242k(h)(1)) is amended—
6	(1) by striking "in his discretion" and inserting
7	"in the discretion of the Secretary"; and
8	(2) by striking "Hispanics, Asian Americans,
9	and Pacific Islanders" and inserting "American In-
10	dians and Alaska Natives, Hispanics, Asian Ameri-
11	cans, and Native Hawaiian and other Pacific Island-
12	ers".
13	(e) National Committee on Vital and Health
14	Statistics.—Section 306(k) of the Public Health Service
15	Act (42 U.S.C. 242k(k)) is amended—
16	(1) in paragraph (3), by striking ", not later
17	than 60 days after the date of the enactment of the
18	Health Insurance Portability and Accountability Act
19	of 1996," each place it appears; and
20	(2) in paragraph (7), by striking "Not later than
21	1 year after the date of the enactment of the Health
22	Insurance Portability and Accountability Act of 1996,
23	and annually thereafter, the Committee shall" and in-
24	serting "The Committee shall, on an biennial basis,".

1	(f) Grants for Assembly and Analysis of Data
2	ON ETHNIC AND RACIAL POPULATIONS.—Section
3	306(m)(4) of the Public Health Service Act (42 U.S.C.
4	242k(m)(4)) is amended—
5	(1) in subparagraph (A)—
6	(A) by striking "Subject to subparagraph
7	(B), the" and inserting "The"; and
8	(B) by striking "and major Hispanic sub-
9	population groups and American Indians" and
10	inserting ", major Hispanic subgroups, and
11	American Indians and Alaska Natives"; and
12	(2) by amending subparagraph (B) to read as
13	follows:
14	"(B) In carrying out subparagraph (A), with respect
15	to American Indians and Alaska Natives, the Secretary
16	shall—
17	"(i) consult with Indian Tribes, Tribal organiza-
18	tions, the Tribal Technical Advisory Group of the
19	Centers for Medicare & Medicaid Services maintained
20	under section 5006(e) of the American Recovery and
21	Reinvestment Act of 2009, and the Tribal Advisory
22	Committee established by the Centers for Disease Con-
23	trol and Prevention, in coordination with epidemi-
24	ology centers, to develop guidelines for State and local
25	health agencies to improve the quality and accuracy

1	of data with respect to the birth and death records of
2	American Indians and Alaska Natives;
3	"(ii) confer with Urban Indian organizations to
4	develop guidelines for State and local health agencies
5	to improve the quality and accuracy of data with re-
6	spect to the birth and death records of American Indi-
7	ans and Alaska Natives;
8	"(iii) enter into cooperative agreements with In-
9	dian Tribes, Tribal organizations, Urban Indian or-
10	ganizations, and epidemiology centers to address
11	misclassification and undersampling of American In-
12	dians and Alaska Natives with respect to—
13	"(I) birth and death records; and
14	"(II) health care and public health surveil-
15	lance systems, including, but not limited to, data
16	with respect to chronic and infectious diseases,
17	unintentional injuries, environmental health,
18	child and adolescent health, maternal health and
19	mortality, foodborne and waterborne illness, re-
20	productive health, and any other notifiable dis-
21	ease or condition;
22	"(iv) encourage States to enter into data sharing
23	agreements with Indian Tribes, Tribal organizations,
24	and epidemiology centers to improve the quality and
25	accuracy of public health data; and

1	"(v) not later than 180 days after the date of en-
2	actment of the Tribal Health Data Improvement Act
3	of 2020, and biennially thereafter, issue a report on
4	the following:
5	"(I) Which States have data sharing agree-
6	ments with Indian Tribes, Tribal organizations,
7	Urban Indian organizations, and Tribal epide-
8	miology centers to improve the quality and accu-
9	racy of health data.
10	"(II) What the Centers for Disease Control
11	and Prevention is doing to encourage States to
12	enter into data sharing agreements with Indian
13	Tribes, Tribal organizations, Urban Indian or-
14	ganizations, and Tribal epidemiology centers to
15	improve the quality and accuracy of health data.
16	"(III) Best practices and guidance for
17	States, Indian Tribes, Tribal organizations,
18	Urban Indian organizations, and Tribal epide-
19	miology centers that wish to enter into data
20	sharing agreements.
21	"(IV) Best practices and guidance for local,
22	State, Tribal, and Federal uniform standards for
23	the collection of data on race and ethnicity.".
24	(g) Definitions.—Section 306 of the Public Health
25	Service Act (42 U.S.C. 242k) is amended—

1	(1) by redesignating subsection (n) as subsection
2	(o); and
3	(2) by inserting after subsection (m) the fol-
4	lowing:
5	"(n) In this section:
6	"(1) The term 'epidemiology center' means an
7	epidemiology center established under section 214 of
8	the Indian Health Care Improvement Act, including
9	such Tribal epidemiology centers serving Indian
10	Tribes regionally and any Tribal epidemiology center
11	serving Urban Indian organizations nationally.
12	"(2) The term 'Indian Tribe' has the meaning
13	given to the term 'Indian tribe' in section 4 of the In-
14	dian Self-Determination and Education Assistance
15	Act.
16	"(3) The term 'Tribal organization' has the
17	meaning given to the term 'tribal organization' in
18	section 4 of the Indian Self-Determination and Edu-
19	$cation\ Assistance\ Act.$
20	"(4) The term 'Urban Indian organization' has
21	the meaning given to that term in section 4 of the In-
22	dian Health Care Improvement Act.".
23	(h) Authorization of Appropriations.—Section
24	306(o) of the Public Health Service Act, as redesignated by
25	subsection (q), is amended to read as follows:

1	"(o)(1)	To	carry	out	this	section,	there	is	authorized	l
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- 2 to be appropriated \$185,000,000 for each of the fiscal years
- 3 2021 through 2025.
- 4 "(2) Of the amount authorized to be appropriated to
- 5 carry out this section for a fiscal year, the Secretary shall
- 6 not use more than 10 percent for the combined costs of—
- 7 "(A) administration of this section; and
- 8 "(B) carrying out subsection (m)(2).".