

**AMENDMENT IN THE NATURE OF A SUBSTITUTE
TO H.R. 7948
OFFERED BY M. _____**

Strike all after the enacting clause and insert the following:

1 SECTION 1. SHORT TITLE.

2 This Act may be cited as the “Tribal Health Data
3 Improvement Act of 2020”.

**4 SEC. 2. COLLECTION AND AVAILABILITY OF HEALTH DATA
5 WITH RESPECT TO INDIAN TRIBES.**

6 (a) DATA COLLECTION.—Section 3101(a)(1) of the
7 Public Health Service Act (42 U.S.C. 300kk(a)(1)) is
8 amended—

9 (1) by striking “, by not later than 2 years
10 after the date of enactment of this title,”; and

11 (2) in subparagraph (B), by inserting “Tribal,”
12 after “State,”.

13 (b) DATA REPORTING AND DISSEMINATION.—Sec-
14 tion 3101(c) of the Public Health Service Act (42 U.S.C.
15 300kk(c)) is amended—

16 (1) by amending subparagraph (F) of para-
17 graph (1) to read as follows:

1 “(F) the Indian Health Service, Indian
2 Tribes, Tribal organizations, and epidemiology
3 centers authorized under the Indian Health
4 Care Improvement Act;” and

5 (2) in paragraph (3), by inserting “Indian
6 Tribes, Tribal organizations, and epidemiology cen-
7 ters,” after “Federal agencies,”.

8 (c) PROTECTION AND SHARING OF DATA.—Section
9 3101(e) of the Public Health Service Act (42 U.S.C.
10 300kk(e)) is amended by adding at the end the following
11 new paragraph:

12 “(3) DATA SHARING STRATEGY.—With respect
13 to data access for Tribal epidemiology centers and
14 Tribes, the Secretary shall create a data sharing
15 strategy that takes into consideration recommenda-
16 tions by the Secretary’s Tribal Advisory Committee
17 for—

18 “(A) ensuring that Tribal epidemiology
19 centers and Indian Tribes have access to the
20 data sources necessary to accomplish their pub-
21 lic health responsibilities; and

22 “(B) protecting the privacy and security of
23 such data.

24 “(4) TRIBAL PUBLIC HEALTH AUTHORITY.—

1 “(A) AVAILABILITY.—Beginning not later
2 than 180 days after the date of the enactment
3 of the Tribal Health Data Improvement Act of
4 2020, the Secretary shall make available to the
5 entities listed in subparagraph (B) all data that
6 is collected pursuant to this title with respect to
7 health care and public health surveillance pro-
8 grams and activities, including such programs
9 and activities that are federally supported or
10 conducted, so long as—

11 “(i) such entities request the data
12 pursuant to statute; and

13 “(ii) the data is requested for use—

14 “(I) consistent with Federal law
15 and obligations; and

16 “(II) to satisfy a particular pur-
17 pose or carry out a specific function
18 consistent with the purpose for which
19 the data was collected.

20 “(B) ENTITIES.—The entities listed in this
21 subparagraph are—

22 “(i) the Indian Health Service;

23 “(ii) Indian Tribes and Tribal organi-
24 zations; and

25 “(iii) epidemiology centers.”.

1 (d) TECHNICAL UPDATES.—Section 3101 of the
2 Public Health Service Act (42 U.S.C. 300kk) is amend-
3 ed—

4 (1) by striking subsections (g) and (h); and

5 (2) by redesignating subsection (i) as subsection
6 (h).

7 (e) DEFINITIONS.—After executing the amendments
8 made by subsection (d), section 3101 of the Public Health
9 Service Act (42 U.S.C. 300kk) is amended by inserting
10 after subsection (f) the following new subsection:

11 “(g) DEFINITIONS.—In this section:

12 “(1) The term ‘epidemiology center’ means an
13 epidemiology center established under section 214 of
14 the Indian Health Care Improvement Act, including
15 such Tribal epidemiology centers serving Indian
16 Tribes regionally and any Tribal epidemiology center
17 serving Urban Indian organizations nationally.

18 “(2) The term ‘Indian Tribe’ has the meaning
19 given to the term ‘Indian tribe’ in section 4 of the
20 Indian Self-Determination and Education Assistance
21 Act.

22 “(3) The term ‘Tribal organization’ has the
23 meaning given to the term ‘tribal organization’ in
24 section 4 of the of the Indian Self-Determination
25 and Education Assistance Act.

1 “(4) The term ‘Urban Indian organization’ has
2 the meaning given to that term in section 4 of the
3 Indian Health Care Improvement Act.”.

4 (f) TECHNICAL CORRECTION.—Section 3101(b) of
5 the Public Health Service Act (42 U.S.C. 300kk(b)) is
6 amended by striking “DATA ANALYSIS.—” and all that
7 follows through “For each federally” and inserting “DATA
8 ANALYSIS.—For each federally”.

9 **SEC. 3. IMPROVING HEALTH STATISTICS REPORTING WITH**
10 **RESPECT TO INDIAN TRIBES.**

11 (a) TECHNICAL AID TO STATES AND LOCALITIES.—
12 Section 306(d) of the Public Health Service Act (42
13 U.S.C. 242k(d)) is amended by inserting “, Indian Tribes,
14 Tribal organizations, and epidemiology centers” after “ju-
15 risdictions”.

16 (b) COOPERATIVE HEALTH STATISTICS SYSTEM.—
17 Section 306(e)(3) of the Public Health Service Act (42
18 U.S.C. 242k(e)(3)) is amended by inserting “, Indian
19 Tribes, Tribal organizations, and epidemiology centers”
20 after “health agencies”.

21 (c) FEDERAL-STATE-TRIBAL COOPERATION.—Sec-
22 tion 306(f) of the Public Health Service Act (42 U.S.C.
23 242k(f)) is amended—

24 (1) by inserting “the Indian Health Service,”
25 before “the Departments of Commerce”;

1 (2) by inserting a comma after “the Depart-
2 ments of Commerce and Labor”;

3 (3) by inserting “, Indian Tribes, Tribal organi-
4 zations, and epidemiology centers” after “State and
5 local health departments and agencies”; and

6 (4) by striking “he shall” and inserting “the
7 Secretary shall”.

8 (d) REGISTRATION AREA RECORDS.—Section
9 306(h)(1) of the Public Health Service Act (42 U.S.C.
10 242k(h)(1)) is amended—

11 (1) by striking “in his discretion” and inserting
12 “in the discretion of the Secretary”; and

13 (2) by striking “Hispanics, Asian Americans,
14 and Pacific Islanders” and inserting “American In-
15 dians and Alaska Natives, Hispanics, Asian Ameri-
16 cans, and Native Hawaiian and other Pacific Island-
17 ers”.

18 (e) NATIONAL COMMITTEE ON VITAL AND HEALTH
19 STATISTICS.—Section 306(k) of the Public Health Service
20 Act (42 U.S.C. 242k(k)) is amended—

21 (1) in paragraph (3), by striking “, not later
22 than 60 days after the date of the enactment of the
23 Health Insurance Portability and Accountability Act
24 of 1996,” each place it appears; and

1 (2) in paragraph (7), by striking “Not later
2 than 1 year after the date of the enactment of the
3 Health Insurance Portability and Accountability Act
4 of 1996, and annually thereafter, the Committee
5 shall” and inserting “The Committee shall, on an bi-
6 ennial basis,”.

7 (f) GRANTS FOR ASSEMBLY AND ANALYSIS OF DATA
8 ON ETHNIC AND RACIAL POPULATIONS.—Section
9 306(m)(4) of the Public Health Service Act (42 U.S.C.
10 242k(m)(4)) is amended—

11 (1) in subparagraph (A)—

12 (A) by striking “Subject to subparagraph
13 (B), the” and inserting “The”; and

14 (B) by striking “and major Hispanic sub-
15 population groups and American Indians” and
16 inserting “, major Hispanic subgroups, and
17 American Indians and Alaska Natives”; and

18 (2) by amending subparagraph (B) to read as
19 follows:

20 “(B) In carrying out subparagraph (A), with respect
21 to American Indians and Alaska Natives, the Secretary
22 shall—

23 “(i) consult with Indian Tribes, Tribal organi-
24 zations, the Tribal Technical Advisory Group of the
25 Centers for Medicare & Medicaid Services main-

1 tained under section 5006(e) of the American Recov-
2 ery and Reinvestment Act of 2009, and the Tribal
3 Advisory Committee established by the Centers for
4 Disease Control and Prevention, in coordination with
5 epidemiology centers, to develop guidelines for State
6 and local health agencies to improve the quality and
7 accuracy of data with respect to the birth and death
8 records of American Indians and Alaska Natives;

9 “(ii) confer with Urban Indian organizations to
10 develop guidelines for State and local health agencies
11 to improve the quality and accuracy of data with re-
12 spect to the birth and death records of American In-
13 dians and Alaska Natives;

14 “(iii) enter into cooperative agreements with In-
15 dian Tribes, Tribal organizations, Urban Indian or-
16 ganizations, and epidemiology centers to address
17 misclassification and undersampling of American In-
18 dians and Alaska Natives with respect to—

19 “(I) birth and death records; and

20 “(II) health care and public health surveil-
21 lance systems, including, but not limited to,
22 data with respect to chronic and infectious dis-
23 eases, unintentional injuries, environmental
24 health, child and adolescent health, maternal
25 health and mortality, foodborne and waterborne

1 illness, reproductive health, and any other
2 notifiable disease or condition;

3 “(iv) encourage States to enter into data shar-
4 ing agreements with Indian Tribes, Tribal organiza-
5 tions, and epidemiology centers to improve the qual-
6 ity and accuracy of public health data; and

7 “(v) not later than 180 days after the date of
8 enactment of the Tribal Health Data Improvement
9 Act of 2020, and biennially thereafter, issue a report
10 on the following:

11 “(I) Which States have data sharing agree-
12 ments with Indian Tribes, Tribal organizations,
13 Urban Indian organizations, and Tribal epide-
14 miology centers to improve the quality and ac-
15 curacy of health data.

16 “(II) What the Centers for Disease Control
17 and Prevention is doing to encourage States to
18 enter into data sharing agreements with Indian
19 Tribes, Tribal organizations, Urban Indian or-
20 ganizations, and Tribal epidemiology centers to
21 improve the quality and accuracy of health
22 data.

23 “(III) Best practices and guidance for
24 States, Indian Tribes, Tribal organizations,
25 Urban Indian organizations, and Tribal epide-

1 miology centers that wish to enter into data
2 sharing agreements.

3 “(IV) Best practices and guidance for
4 local, State, Tribal, and Federal uniform stand-
5 ards for the collection of data on race and eth-
6 nicity.”.

7 (g) DEFINITIONS.—Section 306 of the Public Health
8 Service Act (42 U.S.C. 242k) is amended—

9 (1) by redesignating subsection (n) as sub-
10 section (o); and

11 (2) by inserting after subsection (m) the fol-
12 lowing:

13 “(n) In this section:

14 “(1) The term ‘epidemiology center’ means an
15 epidemiology center established under section 214 of
16 the Indian Health Care Improvement Act, including
17 such Tribal epidemiology centers serving Indian
18 Tribes regionally and any Tribal epidemiology center
19 serving Urban Indian organizations nationally.

20 “(2) The term ‘Indian Tribe’ has the meaning
21 given to the term ‘Indian tribe’ in section 4 of the
22 Indian Self-Determination and Education Assistance
23 Act.

24 “(3) The term ‘Tribal organization’ has the
25 meaning given to the term ‘tribal organization’ in

1 section 4 of the Indian Self-Determination and Edu-
2 cation Assistance Act.

3 “(4) The term ‘Urban Indian organization’ has
4 the meaning given to that term in section 4 of the
5 Indian Health Care Improvement Act.”.

6 (h) AUTHORIZATION OF APPROPRIATIONS.—Section
7 306(o) of the Public Health Service Act, as redesignated
8 by subsection (g), is amended to read as follows:

9 “(o)(1) To carry out this section, there is authorized
10 to be appropriated \$185,000,000 for each of the fiscal
11 years 2021 through 2025.

12 “(2) Of the amount authorized to be appropriated to
13 carry out this section for a fiscal year, the Secretary shall
14 not use more than 10 percent for the combined costs of—

15 “(A) administration of this section; and

16 “(B) carrying out subsection (m)(2).”.

