



# CROW TRIBE EXECUTIVE BRANCH

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ASTATEMENT OF FRANK WHITE CLAY CHAIRMAN CROW TRIBE OF INDIANS BEFORE THE  
UNITED STATES HOUSE COMMITTEE ON NATURAL RESOURCES SUBCOMMITTEE ON  
INDIAN AND INSULAR AFFAIRS

HEARING ON

"H.R. 7516 Purchased and Referred Care Improvement Act of 2024"

April 30, 2024

Good afternoon, Chair Hageman, Ranking Member Legar Fernandez, and members of the Subcommittee. My name is Frank White Clay, and I am the Chairman of the Crow Tribe of Indians. Thank you for the opportunity to discuss H.R. 7516 – the Purchased and Referred Care Improvement Act of 2024 and how delays with the Purchased and Referred Care Program negatively affect my people.

### **Background on Crow Tribe of Indian**

I want to begin by telling the committee who the Crow Tribe of Indians are. The Crow Nation is a federally recognized tribe located in southeastern Montana. My people are proud of our heritage and culture. Most of our 14,000 enrolled members live on the Crow Reservation, approximately 2.2 million acres, or roughly the size of Rhode Island and Delaware combined. We are blessed with land that provides a mixture of rivers, mountains, and grasslands, which allow for traditional activities and are a basis for modern economic activities such as agriculture and energy development. Many of our people speak the Apsáalooke language (Crow Language) and remain active in tribal events including our annual Crow Fair, where generations of families come together to celebrate and preserve our culture.

The Crow People are also proud Americans. This is best highlighted by our long history of service in the military. From the late 1800s to today, our people have served through both World Wars, The Korean War, the Vietnam War, and the wars in Iraq and Afghanistan. This service is deeply woven into our cultural identity and reflects our longstanding courage, loyalty, and leadership values.

As Chairman of the Crow Tribe of Indians, it is my responsibility to protect our culture and way of life while ensuring my people have access to modern services. The topic of today's hearing touches upon two of the most critical services my people - and all communities depend on – quality healthcare and access to means to better themselves.

### **Purchased/Referred Care Program**

The Crow Tribe, like many other Native American tribes, participates in the Indian Health Service (IHS) Purchased/Referred Care (PRC) Program. This program is essential for providing healthcare services that are beyond the scope of what our tribal health facilities can offer. Here are some specific ways in which the Crow Tribe engages with the IHS PRC program:

1. **Local Healthcare Services:** The Crow Tribe has access to healthcare services through the Crow/Northern Cheyenne Hospital and other smaller health centers on and near the Crow Reservation. These facilities provide primary care services but may not always have the capability to offer specialized medical care needed by some patients.
2. **Referral to External Providers:** When specialized care is needed that cannot be provided within the tribal health facilities, the IHS PRC program steps in to fund healthcare services provided by external, non-IHS healthcare providers. This is crucial for accessing high-cost medical procedures and specialized treatments that are not available locally.
3. **Management and Coordination:** The program requires careful coordination and management to ensure that services are authorized and funded. The Crow Health Department likely has a specific department or staff dedicated to managing PRC referrals to ensure that eligible tribal members receive the healthcare they need while also adhering to the program's guidelines and funding constraints.
4. **Community Health Improvement:** By participating in the PRC program, the Crow Tribe can address more complex health issues that are prevalent in their community, such as diabetes, heart disease, and other chronic conditions that require ongoing specialist care not available within the tribal health system.

Like many tribes, the Crow face challenges regarding the adequacy and efficiency of PRC funding. Delays in reimbursement through the PRC program have caused severe hardship for many of my people. The economic reality is that most of my people cannot absorb the cost of paying for health services out of pocket, especially when it is unknown when they will be reimbursed by PRC. When these costs are attached to their names as debt and their credit suffers due to late payment by PRC, a one-time problem snowballs into a cascade of issues that limit educational and job opportunities my people need to better themselves and the Crow Tribe. To highlight how prevalent this problem is I'll give you two examples from our tribe of individuals in different stages of life.

In one instance, a young lady who had dealt with medical issues was denied access to funding which would have allowed her to pursue a college education. This was caused directly by a negative impact on her credit due to delays in reimbursement for approved medical services. I think we can all agree, no one should have to begin their adult life being saddled with debt liability that prevents them from furthering their education due to inefficiencies in a program intended to help.

In a second example a tribal elder and military veteran used PRC to receive hearing aids, which were preapproved. The following year when he returned to the provider to have those hearing aids serviced and calibrated, he was required to pay out of pocket due to the fact that PRC had not yet reimbursed the provider for the original purchase. This created a huge financial burden for someone who is living solely from social security benefits.

### **Benefits of H.R. 716 Purchased Care Improvement Act**

H.R. 7516 the Purchased and Referred Care Improvement Act of 2024, would alleviate many of the issues currently associated with the PRC program by ensuring it functions as intended.

By ensuring a member of my tribe will be reimbursed within 30 days of submitting documentation, paying out of pocket for medical expenses becomes possible for more Crow.

By ensuring that IHS - and not a tribal member- is liable for authorized PRC health services, guarantees Native Americans are not unfairly saddled with debt, debt collections, lower credit scores and all the negative consequences associated with them.

Should these clarifications become law and implemented correctly, more Crow will have access to quality healthcare by not having to decide between going to the doctor or facing an uncertain reimbursement process. This will also ensure my people aren't denied access to capital they use for education, vehicle and home loans, or business loans – all of which better their lives and the Crow Tribe as a whole.

**Conclusion**

As Chairman of the Crow Tribe of Indians, I am committed to working with Indian Health Services and Congress to resolve problems associated with providing tribal members with access to healthcare.

I thank Representative Johnson and the sponsors of this legislation for addressing this problem by introducing the Purchased and Referred Care Improvement Act of 2024. I also thank the committee for holding this hearing and giving me the opportunity to represent my people regarding this matter.