

funds appropriated heretofore and hereafter for tribes recognized after January 1, 1995, may be used to provide medical services directly or through contract medical care”.

### § 1621a. Catastrophic Health Emergency Fund

#### (a) Establishment

There is established an Indian Catastrophic Health Emergency Fund (hereafter in this section referred to as the “CHEF”) consisting of—

- (1) the amounts deposited under subsection (f); and
- (2) the amounts appropriated to CHEF under this section.

#### (b) Administration

CHEF shall be administered by the Secretary, acting through the headquarters of the Service, solely for the purpose of meeting the extraordinary medical costs associated with the treatment of victims of disasters or catastrophic illnesses who are within the responsibility of the Service.

#### (c) Conditions on use of Fund

No part of CHEF or its administration shall be subject to contract or grant under any law, including the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450 et seq.), nor shall CHEF funds be allocated, apportioned, or delegated on an Area Office, Service Unit, or other similar basis.

#### (d) Regulations

The Secretary shall promulgate regulations consistent with the provisions of this section to—

- (1) establish a definition of disasters and catastrophic illnesses for which the cost of the treatment provided under contract would qualify for payment from CHEF;
- (2) provide that a Service Unit shall not be eligible for reimbursement for the cost of treatment from CHEF until its cost of treating any victim of such catastrophic illness or disaster has reached a certain threshold cost which the Secretary shall establish at—
  - (A) the 2000 level of \$19,000; and
  - (B) for any subsequent year, not less than the threshold cost of the previous year increased by the percentage increase in the medical care expenditure category of the consumer price index for all urban consumers (United States city average) for the 12-month period ending with December of the previous year;
- (3) establish a procedure for the reimbursement of the portion of the costs that exceeds such threshold cost incurred by—
  - (A) Service Units; or
  - (B) whenever otherwise authorized by the Service, non-Service facilities or providers;
- (4) establish a procedure for payment from CHEF in cases in which the exigencies of the medical circumstances warrant treatment prior to the authorization of such treatment by the Service; and
- (5) establish a procedure that will ensure that no payment shall be made from CHEF to any provider of treatment to the extent that such provider is eligible to receive payment

for the treatment from any other Federal, State, local, or private source of reimbursement for which the patient is eligible.

#### (e) No offset or limitation

Amounts appropriated to CHEF under this section shall not be used to offset or limit appropriations made to the Service under the authority of section 13 of this title, or any other law.

#### (f) Deposit of reimbursement funds

There shall be deposited into CHEF all reimbursements to which the Service is entitled from any Federal, State, local, or private source (including third party insurance) by reason of treatment rendered to any victim of a disaster or catastrophic illness the cost of which was paid from CHEF.

(Pub. L. 94-437, title II, §202, as added Pub. L. 100-713, title II, §202, Nov. 23, 1988, 102 Stat. 4803; amended Pub. L. 102-573, title II, §§202(a), 217(b)(2), Oct. 29, 1992, 106 Stat. 4546, 4559; Pub. L. 111-148, title X, §10221(a), Mar. 23, 2010, 124 Stat. 935.)

#### REFERENCES IN TEXT

The Indian Self-Determination and Education Assistance Act, referred to in subsec. (c), is Pub. L. 93-638, Jan. 4, 1975, 88 Stat. 2203, which is classified principally to subchapter II (§450 et seq.) of chapter 14 of this title. For complete classification of this Act to the Code, see Short Title note set out under section 450 of this title and Tables.

#### CODIFICATION

Amendment by Pub. L. 111-148 is based on section 122 of title I of S. 1790, One Hundred Eleventh Congress, as reported by the Committee on Indian Affairs of the Senate in Dec. 2009, which was enacted into law by section 10221(a) of Pub. L. 111-148.

#### AMENDMENTS

2010—Pub. L. 111-148 amended section generally. Prior to amendment, section related to establishment of Indian Catastrophic Health Emergency Fund with provisions for its administration, promulgation of regulations, procedures for payment, effect of appropriated funds on other appropriations, and deposit of reimbursements.

1992—Subsec. (a)(1)(B), Pub. L. 102-573, §202(a)(1), substituted “to the Fund under this section” for “under subsection (e) of this section”.

Subsec. (b)(2), Pub. L. 102-573, §202(a)(2), substituted “shall establish at—” and subpars. (A) and (B) for “shall establish at not less than \$10,000 or not more than \$20,000;”.

Subsec. (c), Pub. L. 102-573, §202(a)(3), substituted “Amounts appropriated to the Fund under this section” for “Funds appropriated under subsection (e) of this section”.

Subsec. (e), Pub. L. 102-573, §217(b)(2), struck out subsec. (e) which authorized appropriations for fiscal years 1989 to 1992.

#### EFFECTIVE DATE OF 1992 AMENDMENT

Pub. L. 102-573, title II, §202(b), Oct. 29, 1992, 106 Stat. 4546, provided that: “The amendment made by subsection (a)(2) [amending this section] shall take effect January 1, 1993.”

### § 1621b. Health promotion and disease prevention services

#### (a) Authorization

The Secretary, acting through the Service, shall provide health promotion and disease pre-