

**S. 460, Urban Indian Health Confer Act**

As ordered reported by the Senate Committee on Indian Affairs on March 29, 2023

By Fiscal Year, Millions of Dollars	2023	2023-2028	2023-2033
Direct Spending (Outlays)	0	0	0
Revenues	0	0	0
Increase or Decrease (-) in the Deficit	0	0	0
Spending Subject to Appropriation (Outlays)	*	*	not estimated
Increases <i>net direct spending</i> in any of the four consecutive 10-year periods beginning in 2034?	No	Statutory pay-as-you-go procedures apply?	No
Increases <i>on-budget deficits</i> in any of the four consecutive 10-year periods beginning in 2034?	No	<b>Mandate Effects</b>	
		Contains intergovernmental mandate?	No
		Contains private-sector mandate?	No
* = between -\$500,000 and \$500,000.			

S. 460 would require the Department of Health and Human Services (HHS) to confer with urban Indian organizations regarding matters pertaining to the Indian Health Care Improvement Act and other provisions of law relating to Indian health care. According to the Indian Health Service (IHS), there are 41 urban Indian organizations that provide primary care services to urban Indian populations and others in 22 states nationwide. The urban Indian organizations are not part of the IHS service delivery network but receive grant funding from IHS. Current law only requires IHS to confer with urban Indian organizations and the bill would require other agencies within HHS to confer with them as well. CBO estimates that enacting S. 460 would not affect direct spending or revenues and would have an insignificant effect on spending subject to appropriation for HHS staff to confer periodically with urban Indian organizations.

The CBO staff contact for this estimate is Robert Stewart. The estimate was reviewed by Chad Chirico, Deputy Director of Budget Analysis.



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