Tribal Medical Supplies Stockpile Access Act

The federal government manages the Strategic National Stockpile (SNS), a federal repository of drugs and medical supplies that can be tapped if a public health emergency could exhaust local supplies. Access to the SNS by the Indian Health Service (IHS)—which is responsible for providing federal health services to American Indians and Alaska Natives (AI/AN)—and by tribal health authorities or urban Indian organizations is very limited, and is not provided for in statute. The Tribal Medical Supplies Stockpile Access Act would modify the law to ensure that these entities serving AI/AN would have direct access to the SNS. This is especially important due to the spread of coronavirus disease 2019 (COVID-19), which medical personnel have been treating while using facemasks, respirators, and other equipment included in the SNS. The Department of Health and Human Services (HHS) recently indicated that IHS is likely to face shortages of this equipment because it cannot access the SNS.

The Assistant Secretary for Preparedness and Response (ASPR) within HHS administers the SNS. Currently, in an emergency, state governors and the local public health authorities of large municipalities can ask ASPR for supplies and pharmaceuticals from the SNS. ASPR provides the supplies directly to the requesting entity. Federal law makes no provision or requirement for ASPR to deploy SNS supplies or medications to IHS facilities, tribal health organizations, or urban Indian organizations. This bill ensures that when the stockpile is tapped for an emergency or to protect public health and safety, drugs, vaccines, medical devices, and other supplies are also provided to affected IHS facilities, tribal health authorities, tribal organizations, inter-tribal consortia, and urban Indian health organizations. This bill also ensures that when HHS deploys medications, products, or devices to combat pandemics or epidemics, that the entities serving AI/AN would receive them as well.

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