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Chad "Cornassel" Smith
Principal Chief

Joe Grayson, Jr.
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June 23, 2006

Betty Gould, Regulations Officer
Indian Health Service
Division of Regulatory Affairs, Records Access, and Policy Liaison
801 Thompson Avenue, Suite 450
Rockville, Maryland 20852

Re: Proposed Rule on Section 506 of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) regarding the Limitation on Charges for Services Furnished by Medicare Participating Inpatient Hospitals to Indians

On behalf of the Cherokee Nation, please accept the following comments regarding the proposed rule limiting charges for services by Medicare participating inpatient hospitals furnished to American Indians and Alaska Natives. The Cherokee Nation supports the proposed rule and requests that the rule is finalized in an expeditious manner.

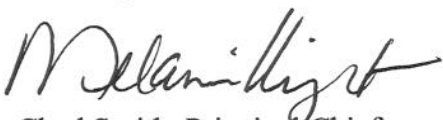
Tribal governments throughout the United States have advocated for this rule for several years and were extremely pleased and encouraged by the language contained within the MMA upon its approval on December 8, 2003. The provision not only benefits the Indian Health system by better utilizing funding for contract health services, which is woefully under funded, but also all taxpayers as the provision improves the efficiency of the federal government in establishing a more consistent payment structure for federally funded health services. The Cherokee Nation agrees with the assertion of the Indian Health Service that this rule will not have a significant impact on the operations of participating inpatient hospitals and instead brings to a close a windfall that has been taking place for several years.

While the proposed rule is a positive step in improving the Indian Health system, the delay in the implementation of the rule has been a source of concern and frustration, especially given the expedited implementation of other, much more substantial provisions of the MMA. The primary example is the implementation of Medicare Part D providing prescription drug coverage.

The Cherokee Nation asks that the Administration, Centers for Medicare and Medicaid Services, and the Indian Health Service put forth every effort to see that this rule is finalized in an expeditious manner to prevent any further delay. Additionally, once the rule is final, similar efforts must be made to ensure that the rule is fully enforced. Should

you require additional information, please feel free to contact J.T. Petherick, Health Legislative Officer, at (918) 822-2419. Thank you for your consideration in this matter.

Sincerely,


ja Chad Smith, Principal Chief
Cherokee Nation

cc: National Indian Health Board