

## Calendar No. 765

106TH CONGRESS  
2D SESSION**S. 1929****[Report No. 106-389]**

To amend the Native Hawaiian Health Care Improvement Act to revise  
and extend such Act.

---

 IN THE SENATE OF THE UNITED STATES

NOVEMBER 16, 1999

Mr. INOUE (for himself and Mr. AKAKA) introduced the following bill; which  
was read twice and referred to the Committee on Indian Affairs

AUGUST 25, 2000

Reported under authority of the order of the Senate of July 26, 2000, by Mr.  
CAMPBELL, with an amendment

[Strike out all after the enacting clause and insert the part printed in italic]

---

**A BILL**

To amend the Native Hawaiian Health Care Improvement  
Act to revise and extend such Act.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Native Hawaiian  
5 Health Care Improvement Act Reauthorization of 1999”.

1 **SEC. 2. AMENDMENT TO THE NATIVE HAWAIIAN HEALTH**  
 2 **CARE IMPROVEMENT ACT.**

3 The Native Hawaiian Health Care Improvement Act  
 4 (42 U.S.C. 11701 et seq.) is amended to read as follows:

5 **“SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

6 **“(a) SHORT TITLE.**—This Act may be cited as the  
 7 ‘Native Hawaiian Health Care Improvement Act’.

8 **“(b) TABLE OF CONTENTS.**—The table of contents  
 9 of this Act is as follows:

- “Sec. 1. Short title; table of contents.
- “Sec. 2. Findings.
- “Sec. 3. Definitions.
- “Sec. 4. Declaration of policy.
- “Sec. 5. Comprehensive health care master plan for Native Hawaiians.
- “Sec. 6. Functions of Papa Ola Lokahi.
- “Sec. 7. Native Hawaiian Health Care Systems.
- “Sec. 8. Administrative grant for Papa Ola Lokahi.
- “Sec. 9. Administration of grants and contracts.
- “Sec. 10. Assignment of personnel.
- “Sec. 11. Native Hawaiian health scholarships and fellowships.
- “Sec. 12. Report.
- “Sec. 13. Demonstration projects of national significance.
- “Sec. 14. National Bipartisan Commission on Native Hawaiian Health  
 Care Entitlement.
- “Sec. 15. Rule of construction.
- “Sec. 16. Compliance with Budget Act.
- “Sec. 17. Severability.

10 **“SEC. 2. FINDINGS.**

11 **“(a) GENERAL FINDINGS.**—Congress makes the fol-  
 12 lowing findings:

13 **“(1)** Native Hawaiians begin their story with  
 14 the Kumulipo which details the creation and inter-  
 15 relationship of all things, including their evolvment  
 16 as healthy and well people.

1           “(2) Native Hawaiians are a distinct and  
2 unique indigenous people with a historical continuity  
3 to the original inhabitants of the Hawaiian archi-  
4 pelago and have a distinct society organized almost  
5 2,000 years ago.

6           “(3) Native Hawaiians have never directly relin-  
7 quished to the United States their claims to their in-  
8 herent sovereignty as a people or over their national  
9 lands, either through their monarchy or through a  
10 plebiscite or referendum.

11           “(4) The health and well-being of Native Ha-  
12 waiians are intrinsically tied to their deep feelings  
13 and attachment to their lands and seas.

14           “(5) The long-range economic and social  
15 changes in Hawaii over the 19th and early 20th cen-  
16 turies have been devastating to the health and well-  
17 being of Native Hawaiians.

18           “(6) The Native Hawaiian people are deter-  
19 mined to preserve, develop and transmit to future  
20 generations their ancestral territory, and their cul-  
21 tural identity in accordance with their own spiritual  
22 and traditional beliefs, customs, practices, language,  
23 and social institutions. In referring to themselves,  
24 Native Hawaiians use the term “Kanakā Maoli”, a

1 term frequently used in the 19th century to describe  
2 the native people of Hawaii.

3 “(7) The constitution and statutes of the State  
4 of Hawaii—

5 “(A) acknowledge the distinct land rights  
6 of Native Hawaiian people as beneficiaries of  
7 the public lands trust; and

8 “(B) reaffirm and protect the unique right  
9 of the Native Hawaiian people to practice and  
10 perpetuate their cultural and religious customs,  
11 beliefs, practices, and language.

12 “(8) At the time of the arrival of the first non-  
13 indigenous people in Hawaii in 1778, the Native Ha-  
14 waiian people lived in a highly organized, self-suffi-  
15 cient, subsistence social system based on communal  
16 land tenure with a sophisticated language, culture,  
17 and religion.

18 “(9) A unified monarchical government of the  
19 Hawaiian Islands was established in 1810 under Ka-  
20 mehameha I, the first King of Hawaii.

21 “(10) Throughout the 19th century and until  
22 1893, the United States—

23 “(A) recognized the independence of the  
24 Hawaiian Nation;

1           “(B) extended full and complete diplomatic  
2           recognition to the Hawaiian Government; and

3           “(C) entered into treaties and conventions  
4           with the Hawaiian monarchs to govern com-  
5           merce and navigation in 1826, 1842, 1849,  
6           1875 and 1887.

7           “(11) In 1893, John L. Stevens, the United  
8           States Minister assigned to the sovereign and inde-  
9           pendent Kingdom of Hawaii, conspired with a small  
10          group of non-Hawaiian residents of the Kingdom,  
11          including citizens of the United States, to overthrow  
12          the indigenous and lawful government of Hawaii.

13          “(12) In pursuance of that conspiracy, the  
14          United States Minister and the naval representative  
15          of the United States caused armed naval forces of  
16          the United States to invade the sovereign Hawaiian  
17          Nation in support of the overthrow of the indigenous  
18          and lawful Government of Hawaii and the United  
19          States Minister thereupon extended diplomatic rec-  
20          ognition of a provisional government formed by the  
21          conspirators without the consent of the native people  
22          of Hawaii or the lawful Government of Hawaii in  
23          violation of treaties between the 2 nations and of  
24          international law.

1           “(13) In a message to Congress on December  
2           18, 1893, then President Grover Cleveland reported  
3           fully and accurately on these illegal actions, and ac-  
4           knowledged that by these acts, described by the  
5           President as acts of war, the government of a peace-  
6           ful and friendly people was overthrown, and the  
7           President concluded that a “substantial wrong has  
8           thus been done which a due regard for our national  
9           character as well as the rights of the injured people  
10          required that we should endeavor to repair”.

11          “(14) Queen Lili‘uokalani, the lawful monarch  
12          of Hawaii, and the Hawaiian Patriotic League, rep-  
13          resenting the aboriginal citizens of Hawaii, promptly  
14          petitioned the United States for redress of these  
15          wrongs and for restoration of the indigenous govern-  
16          ment of the Hawaiian nation, but this petition was  
17          not acted upon.

18          “(15) Further, the United States has acknowl-  
19          edged the significance of these events and has apolo-  
20          gized to Native Hawaiians on behalf of the people of  
21          the United States for the overthrow of the Kingdom  
22          of Hawaii with the participation of agents and citi-  
23          zens of the United States, and the resulting depriva-  
24          tion of the rights of Native Hawaiians to self-deter-

1       mination in legislation in 1993 (Public Law 103-  
2       150; 107 Stat. 1510).

3               “(16) In 1898, the United States annexed Ha-  
4       wahi through the Newlands Resolution without the  
5       consent of or compensation to the indigenous people  
6       of Hawaii or their sovereign government who were  
7       thereby denied the mechanism for expression of their  
8       inherent sovereignty through self-government and  
9       self-determination, their lands and ocean resources.

10              “(17) Through the Newlands Resolution and  
11       the 1900 Organic Act, the Congress received  
12       1,750,000 acres of lands formerly owned by the  
13       Crown and Government of the Hawaiian Kingdom  
14       and exempted the lands from then existing public  
15       land laws of the United States by mandating that  
16       the revenue and proceeds from these lands be “used  
17       solely for the benefit of the inhabitants of the Ha-  
18       waiian Islands for education and other public pur-  
19       poses”, thereby establishing a special trust relation-  
20       ship between the United States and the inhabitants  
21       of Hawaii.

22              “(18) In 1921, Congress enacted the Hawaiian  
23       Homes Commission Act, 1920, which designated  
24       200,000 acres of the ceded public lands for exclusive  
25       homesteading by Native Hawaiians, thereby affirm-

1       ing the trust relationship between the United States  
2       and the Native Hawaiians, as expressed by then Sec-  
3       retary of the Interior Franklin K. Lane who was  
4       cited in the Committee Report of the Committee on  
5       Territories of the House of Representatives as stat-  
6       ing, “One thing that impressed me . . . was the fact  
7       that the natives of the islands . . . for whom in a  
8       sense we are trustees, are falling off rapidly in num-  
9       bers and many of them are in poverty.”.

10       “(19) In 1938, Congress again acknowledged  
11       the unique status of the Native Hawaiian people by  
12       including in the Act of June 20, 1938 (52 Stat. 781  
13       et seq.), a provision to lease lands within the exten-  
14       sion to Native Hawaiians and to permit fishing in  
15       the area “only by native Hawaiian residents of said  
16       area or of adjacent villages and by visitors under  
17       their guidance”.

18       “(20) Under the Act entitled “An Act to pro-  
19       vide for the admission of the State of Hawaii into  
20       the Union”, approved March 18, 1959 (73 Stat. 4),  
21       the United States transferred responsibility for the  
22       administration of the Hawaiian Home Lands to the  
23       State of Hawaii but reaffirmed the trust relationship  
24       which existed between the United States and the  
25       Native Hawaiian people by retaining the exclusive



1 power to enforce the trust, including the power to  
2 approve land exchanges, and legislative amendments  
3 affecting the rights of beneficiaries under such Act.

4 “(21) Under the Act entitled “An Act to pro-  
5 vide for the admission of the State of Hawaii into  
6 the Union”, approved March 18, 1959 (73 Stat. 4),  
7 the United States transferred responsibility for ad-  
8 ministration over portions of the ceded public lands  
9 trust not retained by the United States to the State  
10 of Hawaii but reaffirmed the trust relationship  
11 which existed between the United States and the  
12 Native Hawaiian people by retaining the legal re-  
13 sponsibility of the State for the betterment of the  
14 conditions of Native Hawaiians under section 5(f) of  
15 such Act.

16 “(22) The authority of the Congress under the  
17 Constitution to legislate in matters affecting the ab-  
18 original or indigenous peoples of the United States  
19 includes the authority to legislate in matters affect-  
20 ing the native peoples of Alaska and Hawaii.

21 “(23) Further, the United States has recog-  
22 nized the authority of the Native Hawaiian people to  
23 continue to work towards an appropriate form of  
24 sovereignty as defined by the Native Hawaiian peo-  
25 ple themselves in provisions set forth in legislation

1 returning the Hawaiian Island of Kaho‘olawe to cus-  
2 todial management by the State of Hawaii in 1994.

3 “(24) In furtherance of the trust responsibility  
4 for the betterment of the conditions of Native Ha-  
5 waiians, the United States has established a pro-  
6 gram for the provision of comprehensive health pro-  
7 motion and disease prevention services to maintain  
8 and improve the health status of the Hawaiian peo-  
9 ple. This program is conducted by the Native Ha-  
10 waiian Health Care Systems, the Native Hawaiian  
11 Health Scholarship Program and Papa Ola Lokahi.  
12 Health initiatives from these and other health insti-  
13 tutions and agencies using Federal assistance have  
14 begun to lower the century-old morbidity and mor-  
15 tality rates of Native Hawaiian people by providing  
16 comprehensive disease prevention, health promotion  
17 activities and increasing the number of Native Ha-  
18 waiians in the health and allied health professions.  
19 This has been accomplished through the Native Ha-  
20 waiian Health Care Act of 1988 (Public Law 100-  
21 579) and its reauthorization in section 9168 of Pub-  
22 lic Law 102-396 (106 Stat. 1948).

23 “(25) This historical and unique legal relation-  
24 ship has been consistently recognized and affirmed  
25 by Congress through the enactment of Federal laws

1 which extend to the Native Hawaiian people the  
2 same rights and privileges accorded to American In-  
3 dian, Alaska Native, Eskimo, and Aleut commu-  
4 nities, including the Native American Programs Act  
5 of 1974 (42 U.S.C. 2991 et seq.), the American In-  
6 dian Religious Freedom Act (42 U.S.C. 1996), the  
7 National Museum of the American Indian Act (20  
8 U.S.C. 80q et seq.), and the Native American  
9 Graves Protection and Repatriation Act (25 U.S.C.  
10 3001 et seq.).

11 “(26) The United States has also recognized  
12 and reaffirmed the trust relationship to the Native  
13 Hawaiian people through legislation which author-  
14 izes the provision of services to Native Hawaiians,  
15 specifically, the Older Americans Act of 1965 (42  
16 U.S.C. 3001 et seq.), the Developmental Disabilities  
17 Assistance and Bill of Rights Act Amendments of  
18 1987, the Veterans’ Benefits and Services Act of  
19 1988, the Rehabilitation Act of 1973 (29 U.S.C. 701  
20 et seq.), the Native Hawaiian Health Care Act of  
21 1988 (Public Law 100-579), the Health Professions  
22 Reauthorization Act of 1988, the Nursing Shortage  
23 Reduction and Education Extension Act of 1988,  
24 the Handicapped Programs Technical Amendments  
25 Act of 1988, the Indian Health Care Amendments

1 of 1988, and the Disadvantaged Minority Health  
2 Improvement Act of 1990.

3 “(27) The United States has also affirmed the  
4 historical and unique legal relationship to the Ha-  
5 waiian people by authorizing the provision of serv-  
6 ices to Native Hawaiians to address problems of al-  
7 ecohol and drug abuse under the Anti-Drug Abuse  
8 Act of 1986 (Public Law 99-570).

9 “(28) Further, the United States has recog-  
10 nized that Native Hawaiians, as aboriginal, indige-  
11 nous, native peoples of Hawaii, are a unique popu-  
12 lation group in Hawaii and in the continental United  
13 States and has so declared in Office of Management  
14 and Budget Circular 15 in 1997 and Presidential  
15 Executive Order No. 13125, dated June 7, 1999.

16 “(29) Despite the United States having ex-  
17 pressed its commitment to a policy of reconciliation  
18 with the Native Hawaiian people for past grievances  
19 in Public Law 103-150 (107 Stat. 1510) the unmet  
20 health needs of the Native Hawaiian people remain  
21 severe and their health status continues to be far  
22 below that of the general population of the United  
23 States.

24 “(b) UNMET NEEDS AND HEALTH DISPARITIES.—  
25 Congress finds that the unmet needs and serious health

1 disparities that adversely affect the Native Hawaiian peo-  
 2 ple include the following:

3           “(1) CHRONIC DISEASE AND ILLNESS.—

4                   “(A) CANCER.—

5                           “(i) IN GENERAL.—With respect to all  
 6 cancer—

7                                   “(I) Native Hawaiians have the  
 8 highest cancer mortality rates in the  
 9 State of Hawaii (231.0 out of every  
 10 100,000 residents), 45 percent higher  
 11 than that for the total State popu-  
 12 lation (159.7 out of every 100,000  
 13 residents);

14                                   “(II) Native Hawaiian males  
 15 have the highest cancer mortality  
 16 rates in the State of Hawaii for can-  
 17 cers of the lung, liver and pancreas  
 18 and for all cancers combined;

19                                   “(III) Native Hawaiian females  
 20 ranked highest in the State of Hawaii  
 21 for cancers of the lung, liver, pan-  
 22 creas, breast, cervix uteri, corpus  
 23 uteri, stomach, and rectum, and for  
 24 all cancers combined;

1           “(IV) Native Hawaiian males  
2           have the highest years of productive  
3           life lost from cancer in the State of  
4           Hawaii with 8.7 years compared to  
5           6.4 years for other males; and

6           “(V) Native Hawaiian females  
7           have 8.2 years of productive life lost  
8           from cancer in the State of Hawaii as  
9           compared to 6.4 years for other fe-  
10          males in the State of Hawaii;

11          “(ii) BREAST CANCER.—With respect  
12          to breast cancer—

13               “(I) Native Hawaiians have the  
14               highest mortality rates in the State of  
15               Hawaii from breast cancer (37.96 out  
16               of every 100,000 residents), which is  
17               25 percent higher than that for Cau-  
18               casian Americans (30.25 out of every  
19               100,000 residents) and 106 percent  
20               higher than that for Chinese Ameri-  
21               cans (18.39 out of every 100,000 resi-  
22               dents); and

23               “(II) nationally, Native Hawai-  
24               ians have the third highest mortality  
25               rates due to breast cancer (25.0 out

1 of every 100,000 residents) following  
2 African Americans (31.4 out of every  
3 100,000 residents) and Caucasian  
4 Americans (27.0 out of every 100,000  
5 residents).

6 “(iii) CANCER OF THE CERVIX.—Na-  
7 tive Hawaiians have the highest mortality  
8 rates from cancer of the cervix in the State  
9 of Hawaii (3.82 out of every 100,000 resi-  
10 dents) followed by Filipino Americans  
11 (3.33 out of every 100,000 residents) and  
12 Caucasian Americans (2.61 out of every  
13 100,000 residents).

14 “(iv) LUNG CANCER.—Native Hawai-  
15 ians have the highest mortality rates from  
16 lung cancer in the State of Hawaii (90.70  
17 out of every 100,000 residents), which is  
18 61 percent higher than Caucasian Ameri-  
19 cans, who rank second and 161 percent  
20 higher than Japanese Americans, who rank  
21 third.

22 “(v) PROSTATE CANCER.—Native Ha-  
23 waiian males have the second highest mor-  
24 tality rates due to prostate cancer in the  
25 State of Hawaii (25.86 out of every

1 100,000 residents) with Caucasian Ameri-  
2 cians having the highest mortality rate  
3 from prostate cancer (30.55 out of every  
4 100,000 residents).

5 “(B) DIABETES.—With respect to diabe-  
6 tes, for the years 1989 through 1991—

7 “(i) Native Hawaiians had the highest  
8 mortality rate due to diabetes mellitis  
9 (34.7 out of every 100,000 residents) in  
10 the State of Hawaii which is 130 percent  
11 higher than the statewide rate for all other  
12 races (15.1 out of every 100,000 resi-  
13 dents);

14 “(ii) full-blood Hawaiians had a mor-  
15 tality rate of 93.3 out of every 100,000  
16 residents, which is 518 percent higher than  
17 the rate for the statewide population of all  
18 other races; and

19 “(iii) Native Hawaiians who are less  
20 than full-blood had a mortality rate of 27.1  
21 out of every 100,000 residents, which is 79  
22 percent higher than the rate for the state-  
23 wide population of all other races.

24 “(C) ASTHMA.—With respect to asthma—



1           “(i) in 1990, Native Hawaiians com-  
 2           prised 44 percent of all asthma cases in  
 3           the State of Hawaii for those 18 years of  
 4           age and younger, and 35 percent of all  
 5           asthma cases reported; and

6           “(ii) in 1992, the Native Hawaiian  
 7           rate for asthma was 81.7 out of every  
 8           1000 residents, which was 73 percent high-  
 9           er than the rate for the total statewide  
 10          population of 47.3 out of every 1000 resi-  
 11          dents.

12          “(D) CIRCULATORY DISEASES.—

13          “(i) HEART DISEASE.—With respect  
 14          to heart disease—

15                 “(I) the death rate for Native  
 16                 Hawaiians from heart disease (333.4  
 17                 out of every 100,000 residents) is 66  
 18                 percent higher than for the entire  
 19                 State of Hawaii (201.1 out of every  
 20                 100,000 residents); and

21                 “(II) Native Hawaiian males  
 22                 have the greatest years of productive  
 23                 life lost in the State of Hawaii where  
 24                 Native Hawaiian males lose an aver-  
 25                 age of 15.5 years and Native Hawai-

1           ian females lose an average of 8.2  
2           years due to heart disease, as com-  
3           pared to 7.5 years for all males in the  
4           State of Hawaii and 6.4 years for all  
5           females.

6           “(ii) HYPERTENSION.—The death  
7           rate for Native Hawaiians from hyper-  
8           tension (3.5 out of every 100,000 resi-  
9           dents) is 84 percent higher than that for  
10          the entire State (1.9 out of every 100,000  
11          residents).

12          “(iii) STROKE.—The death rate for  
13          Native Hawaiians from stroke (58.3 out of  
14          every 100,000 residents) is 13 percent  
15          higher than that for the entire State (51.8  
16          out of every 100,000 residents).

17          “(2) INFECTIOUS DISEASE AND ILLNESS.—The  
18          incidence of AIDS for Native Hawaiians is at least  
19          twice as high per 100,000 residents (10.5 percent)  
20          than that for any other non-Caucasian group in the  
21          State of Hawaii.

22          “(3) ACCIDENTS.—With respect to accidents—  
23                  “(A) the death rate for Native Hawaiians  
24                  from accidents (38.8 out of every 100,000 resi-  
25                  dents) is 45 percent higher than that for the

1 entire State (26.8 out of every 100,000 resi-  
2 dents);

3 “(B) Native Hawaiian males lose an aver-  
4 age of 14 years of productive life lost from acci-  
5 dents as compared to 9.8 years for all other  
6 males in Hawaii; and

7 “(C) Native Hawaiian females lose an av-  
8 erage of 4 years of productive life lost from ac-  
9 cidents but this rate is the highest rate among  
10 all females in the State of Hawaii.

11 “(4) DENTAL HEALTH.—With respect to dental  
12 health—

13 “(A) Native Hawaiian children exhibit  
14 among the highest rates of dental caries in the  
15 nation, and the highest in the State of Hawaii  
16 as compared to the 5 other major ethnic groups  
17 in the State;

18 “(B) the average number of decayed or  
19 filled primary teeth for Native Hawaiian chil-  
20 dren ages 5 through 9 years was 4.3 as com-  
21 pared with 3.7 for the entire State of Hawaii  
22 and 1.9 for the United States; and

23 “(C) the proportion of Native Hawaiian  
24 children ages 5 through 12 years with unmet  
25 treatment needs (defined as having active den-

1           tal earies requiring treatment) is 40 percent as  
2           compared with 33 percent for all other races in  
3           the State of Hawaii.

4           “(5) LIFE EXPECTANCY.—With respect to life  
5           expectancy—

6                   “(A) Native Hawaiians have the lowest life  
7           expectancy of all population groups in the State  
8           of Hawaii;

9                   “(B) between 1910 and 1980, the life ex-  
10          pectancy of Native Hawaiians from birth has  
11          ranged from 5 to 10 years less than that of the  
12          overall State population average; and

13                   “(C) the most recent tables for 1990 show  
14          Native Hawaiian life expectancy at birth (74.27  
15          years) to be about 5 years less than that of the  
16          total State population (78.85 years).

17          “(6) MATERNAL AND CHILD HEALTH.—

18                   “(A) PRENATAL CARE.—With respect to  
19          prenatal care—

20                   “(i) as of 1996, Native Hawaiian  
21          women have the highest prevalence (21  
22          percent) of having had no prenatal care  
23          during their first trimester of pregnancy  
24          when compared to the 5 largest ethnic  
25          groups in the State of Hawaii;

1           “(ii) of the mothers in the State of  
2           Hawaii who received no prenatal care  
3           throughout their pregnancy in 1996, 44  
4           percent were Native Hawaiian;

5           “(iii) over 65 percent of the referrals  
6           to Healthy Start in fiscal years 1996 and  
7           1997 were Native Hawaiian newborns; and

8           “(iv) in every region of the State of  
9           Hawaii, many Native Hawaiian newborns  
10          begin life in a potentially hazardous cir-  
11          cumstance, far higher than any other ra-  
12          cial group.

13          “(B) BIRTHS.—With respect to births—

14          “(i) in 1996, 45 percent of the live  
15          births to Native Hawaiian mothers were  
16          infants born to single mothers which sta-  
17          tistics indicate put infants at higher risk of  
18          low birth weight and infant mortality;

19          “(ii) in 1996, of the births to Native  
20          Hawaiian single mothers, 8 percent were  
21          low birth weight (under 2500 grams); and

22          “(iii) of all low birth weight babies  
23          born to single mothers in the State of Ha-  
24          waii, 44 percent were Native Hawaiian.

1           “(C) TEEN PREGNANCIES.—With respect  
2 to births—

3           “(i) in 1993 and 1994, Native Hawai-  
4 ians had the highest percentage of teen  
5 (individuals who were less than 18 years of  
6 age) births (8.1 percent) compared to the  
7 rate for all other races in the State of Ha-  
8 waii (3.6 percent);

9           “(ii) in 1996, nearly 53 percent of all  
10 mothers in Hawaii under 18 years of age  
11 were Native Hawaiian;

12           “(iii) lower rates of abortion (a third  
13 lower than for the statewide population)  
14 among Hawaiian women may account in  
15 part, for the higher percentage of live  
16 births;

17           “(iv) in 1995, of the births to mothers  
18 age 14 years and younger in Hawaii, 66  
19 percent were Native Hawaiian; and

20           “(v) in 1996, of the births in this  
21 same group, 48 percent were Native Ha-  
22 waiian.

23           “(D) FETAL MORTALITY.—In 1996, Na-  
24 tive Hawaiian fetal mortality rates comprised  
25 15 percent of all fetal deaths for the State of

1 Hawaii. However, for fetal deaths occurring in  
 2 mothers under the age of 18 years, 32 percent  
 3 were Native Hawaiian, and for mothers 18  
 4 through 24 years of age, 28 percent were Na-  
 5 tive Hawaiians.

6 ~~“(7) MENTAL HEALTH.—~~

7 ~~“(A) ALCOHOL AND DRUG ABUSE.—With~~  
 8 ~~respect to alcohol and drug abuse—~~

9 ~~“(i) Native Hawaiians represent 38~~  
 10 ~~percent of the total admissions to Depart-~~  
 11 ~~ment of Health, Alcohol, Drugs and Other~~  
 12 ~~Drugs, funded substance abuse treatment~~  
 13 ~~programs;~~

14 ~~“(ii) in 1997, the prevalence of smok-~~  
 15 ~~ing by Native Hawaiians was 28.5 percent,~~  
 16 ~~a rate that is 53 percent higher than that~~  
 17 ~~for all other races in the State of Hawaii~~  
 18 ~~which is 18.6 percent;~~

19 ~~“(iii) Native Hawaiians have the high-~~  
 20 ~~est prevalence rates of acute drinking (31~~  
 21 ~~percent), a rate that is 79 percent higher~~  
 22 ~~than that for all other races in the State~~  
 23 ~~of Hawaii;~~

24 ~~“(iv) the chronic drinking rate among~~  
 25 ~~Native Hawaiians is 54 percent higher~~

1 than that for all other races in the State  
2 of Hawaii;

3 “(v) in 1991, 40 percent of the Native  
4 Hawaiian adults surveyed reported having  
5 used marijuana compared with 30 percent  
6 for all other races in the State of Hawaii;  
7 and

8 “(vi) nine percent of the Native Ha-  
9 waiian adults surveyed reported that they  
10 are current users (within the past year) of  
11 marijuana, compared with 6 percent for all  
12 other races in the State of Hawaii.

13 “(B) CRIME.—With respect to crime—

14 “(i) in 1996, of the 5,944 arrests that  
15 were made for property crimes in the State  
16 of Hawaii, arrests of Native Hawaiians  
17 comprised 20 percent of that total;

18 “(ii) Native Hawaiian juveniles com-  
19 prised a third of all juvenile arrests in  
20 1996;

21 “(iii) In 1996, Native Hawaiians rep-  
22 resented 21 percent of the 8,000 adults ar-  
23 rested for violent crimes in the State of  
24 Hawaii, and 38 percent of the 4,066 juve-  
25 nile arrests;



1           “(iv) Native Hawaiians are over-rep-  
2           resented in the prison population in Ha-  
3           wain;

4           “(v) in 1995 and 1996 Native Hawai-  
5           ians comprised 36.5 percent of the sen-  
6           tenced felon prison population in Hawaii,  
7           as compared to 20.5 percent for Caucasian  
8           Americans, 3.7 percent for Japanese  
9           Americans, and 6 percent for Chinese  
10          Americans;

11          “(vi) in 1995 and 1996 Native Ha-  
12          waiians made up 45.4 percent of the tech-  
13          nical violator population, and at the Ha-  
14          waii Youth Correctional Facility, Native  
15          Hawaiians constituted 51.6 percent of all  
16          detainees in fiscal year 1997; and

17          “(vii) based on anecdotal information  
18          from inmates at the Halawa Correction  
19          Facilities, Native Hawaiians are estimated  
20          to comprise between 60 and 70 percent of  
21          all inmates.

22          “(8) HEALTH PROFESSIONS EDUCATION AND  
23          TRAINING.—With respect to health professions edu-  
24          cation and training—

1           “(A) Native Hawaiians age 25 years and  
2           older have a comparable rate of high school  
3           completion, however, the rates of baccalaureate  
4           degree achievement amongst Native Hawaiians  
5           are less than the norm in the State of Hawaii  
6           (6.9 percent and 15.76 percent respectively);

7           “(B) Native Hawaiian physicians make up  
8           4 percent of the total physician workforce in the  
9           State of Hawaii; and

10          “(C) in fiscal year 1997, Native Hawaiians  
11          comprised 8 percent of those individuals who  
12          earned Bachelor’s Degrees, 14 percent of those  
13          individuals who earned professional diplomas, 6  
14          percent of those individuals who earned Mas-  
15          ter’s Degrees, and less than 1 percent of indi-  
16          viduals who earned doctoral degrees at the Uni-  
17          versity of Hawaii.

18 **“SEC. 3. DEFINITIONS.**

19          “In this Act:

20               “(1) DISEASE PREVENTION.—The term ‘disease  
21          prevention’ includes—

22                       “(A) immunizations;

23                       “(B) control of high blood pressure;

24                       “(C) control of sexually transmittable dis-  
25          eases;

1                   “(D) prevention and control of diabetes;

2                   “(E) control of toxic agents;

3                   “(F) occupational safety and health;

4                   “(G) accident prevention;

5                   “(H) fluoridation of water;

6                   “(I) control of infectious agents; and

7                   “(J) provision of mental health care.

8                   “(2) HEALTH PROMOTION.—The term ‘health  
9                   promotion’ includes—

10                   “(A) pregnancy and infant care, including  
11                   prevention of fetal alcohol syndrome;

12                   “(B) cessation of tobacco smoking;

13                   “(C) reduction in the misuse of alcohol and  
14                   drugs;

15                   “(D) improvement of nutrition;

16                   “(E) improvement in physical fitness;

17                   “(F) family planning;

18                   “(G) control of stress;

19                   “(H) reduction of major behavioral risk  
20                   factors and promotion of healthy lifestyle prac-  
21                   tices; and

22                   “(I) integration of cultural approaches to  
23                   health and well-being, including traditional  
24                   practices relating to the land (‘aina), water  
25                   (wai), and ocean (kai).

1           “(3) NATIVE HAWAIIAN.—The term ‘Native  
 2 Hawaiian’ means any individual who is Kanaka  
 3 Maoli (a descendant of the aboriginal people who,  
 4 prior to 1778, occupied and exercised sovereignty in  
 5 the area that now constitutes the State of Hawaii)  
 6 as evidenced by—

7                   “(A) genealogical records;

8                   “(B) Kupuna (elders) or Kama‘aina (long-  
 9 term community residents) verification; or

10                  “(C) birth records of the State of Hawaii.

11           “(4) NATIVE HAWAIIAN HEALTH CARE SYS-  
 12 TEM.—The term ‘Native Hawaiian health care sys-  
 13 tem’ means an entity—

14                   “(A) which is organized under the laws of  
 15 the State of Hawaii;

16                   “(B) which provides or arranges for health  
 17 care services through practitioners licensed by  
 18 the State of Hawaii, where licensure require-  
 19 ments are applicable;

20                   “(C) which is a public or nonprofit private  
 21 entity;

22                   “(D) in which Native Hawaiian health  
 23 practitioners significantly participate in the  
 24 planning, management, monitoring, and evalua-  
 25 tion of health care services;

1           “(E) which may be composed of as many  
2           as 8 Native Hawaiian health care systems as  
3           necessary to meet the health care needs of each  
4           island’s Native Hawaiians; and

5           “(F) which is—

6                   “(i) recognized by Papa Ola Lokahi  
7                   for the purpose of planning, conducting, or  
8                   administering programs, or portions of  
9                   programs, authorized by this chapter for  
10                  the benefit of Native Hawaiians; and

11                   “(ii) certified by Papa Ola Lokahi as  
12                   having the qualifications and the capacity  
13                   to provide the services and meet the re-  
14                   quirements under the contract the Native  
15                   Hawaiian health care system enters into  
16                   with the Secretary or the grant the Native  
17                   Hawaiian health care system receives from  
18                   the Secretary pursuant to this Act.

19           “(5) NATIVE HAWAIIAN ORGANIZATION.—The  
20           term ‘Native Hawaiian organization’ means any  
21           organization—

22                   “(A) which serves the interests of Native  
23                   Hawaiians; and

24                   “(B) which is—

1           “(i) recognized by Papa Ola Lokahi  
2           for the purpose of planning, conducting, or  
3           administering programs (or portions of  
4           programs) authorized under this Act for  
5           the benefit of Native Hawaiians; and

6           “(ii) a public or nonprofit private enti-  
7           ty.

8           “(6) PAPA OLA LOKAHI.—

9           “(A) IN GENERAL.—The term ‘Papa Ola  
10          Lokahi’ means an organization that is com-  
11          posed of public agencies and private organiza-  
12          tions focusing on improving the health status of  
13          Native Hawaiians. Board members of such or-  
14          ganization may include representation from—

15               “(i) E Ola Mau;

16               “(ii) the Office of Hawaiian Affairs of  
17               the State of Hawaii;

18               “(iii) Ala Like Inc.;

19               “(iv) the University of Hawaii;

20               “(v) the Hawaii State Department of  
21               Health;

22               “(vi) the Kamehameha Schools  
23               Bishop Estate, or other Native Hawaiian  
24               organization responsible for the adminis-

1           tration of the Native Hawaiian Health  
2           Scholarship Program;

3           “~~(vii)~~ the Hawaii State Primary Care  
4           Association, or other organizations respon-  
5           sible for the placement of scholars from  
6           the Native Hawaiian Health Scholarship  
7           Program;

8           “~~(viii)~~ Ahahui O Na Kauka, the Na-  
9           tive Hawaiian Physicians Association;

10          “~~(ix)~~ Ho‘ola Lahui Hawaii, or a  
11          health care system serving Kaua‘i or  
12          Ni‘ihau, and which may be composed of as  
13          many health care centers as are necessary  
14          to meet the health care needs of the Native  
15          Hawaiians of those islands;

16          “~~(x)~~ Ke Ola Mamo, or a health care  
17          system serving the island of O‘ahu and  
18          which may be composed of as many health  
19          care centers as are necessary to meet the  
20          health care needs of the Native Hawaiians  
21          of that island;

22          “~~(xi)~~ Na Pu‘uwai or a health care sys-  
23          tem serving Moloka‘i or Lana‘i, and which  
24          may be composed of as many health care  
25          centers as are necessary to meet the health

1 care needs of the Native Hawaiians of  
2 those islands;

3 “(xii) Hui No Ke Ola Pono, or a  
4 health care system serving the island of  
5 Maui, and which may be composed of as  
6 many health care centers as are necessary  
7 to meet the health care needs of the Native  
8 Hawaiians of that island;

9 “(xiii) Hui Malama Ola Ha ‘Oiwī, or  
10 a health care system serving the island of  
11 Hawaii, and which may be composed of as  
12 many health care centers as are necessary  
13 to meet the health care needs of the Native  
14 Hawaiians of that island;

15 “(xiv) other Native Hawaiian health  
16 care systems as certified and recognized by  
17 Papa Ola Lokahi in accordance with this  
18 Act; and

19 “(xv) such other member organiza-  
20 tions as the Board of Papa Ola Lokahi  
21 may admit from time to time, based upon  
22 satisfactory demonstration of a record of  
23 contribution to the health and well-being of  
24 Native Hawaiians.



1           “(B) LIMITATION.—Such term does not in-  
2 elude any organization described in subpara-  
3 graph (A) if the Secretary determines that such  
4 organization has not developed a mission state-  
5 ment with clearly defined goals and objectives  
6 for the contributions the organization will make  
7 to the Native Hawaiian health care systems,  
8 and an action plan for carrying out those goals  
9 and objectives.

10           “(7) PRIMARY HEALTH SERVICES.—The term  
11 ‘primary health services’ means—

12           “(A) services of physicians, physicians’ as-  
13 sistants, nurse practitioners, and other health  
14 professionals;

15           “(B) diagnostic laboratory and radiologic  
16 services;

17           “(C) preventive health services including  
18 perinatal services, well child services, family  
19 planning services, nutrition services, home  
20 health services, and, generally, all those services  
21 associated with enhanced health and wellness.

22           “(D) emergency medical services;

23           “(E) transportation services as required  
24 for adequate patient care;

25           “(F) preventive dental services; and

1           “(G) pharmaceutical and nutraceutical  
2           services.

3           “(8) SECRETARY.—The term ‘Secretary’ means  
4           the Secretary of Health and Human Services.

5           “(9) TRADITIONAL NATIVE HAWAIIAN HEAL-  
6           ER.—The term ‘traditional Native Hawaiian healer’  
7           means a practitioner—

8           “(A) who—

9                   “(i) is of Native Hawaiian ancestry;  
10                  and

11                   “(ii) has the knowledge, skills, and ex-  
12                  perience in direct personal health care of  
13                  individuals; and

14           “(B) whose knowledge, skills, and experi-  
15           ence are based on demonstrated learning of Na-  
16           tive Hawaiian healing practices acquired by—

17                   “(i) direct practical association with  
18                  Native Hawaiian elders; and

19                   “(ii) oral traditions transmitted from  
20                  generation to generation.

21   **“SEC. 4. DECLARATION OF POLICY.**

22           “(a) CONGRESS.—Congress hereby declares that it is  
23           the policy of the United States in fulfillment of its special  
24           responsibilities and legal obligations to the indigenous peo-  
25           ple of Hawaii resulting from the unique and historical re-

1 lationship between the United States and the indigenous  
2 people of Hawaii—

3 “(1) to raise the health status of Native Hawai-  
4 ians to the highest possible health level; and

5 “(2) to provide existing Native Hawaiian health  
6 care programs with all resources necessary to effec-  
7 tuate this policy.

8 “(b) INTENT OF CONGRESS.—

9 “(1) IN GENERAL.—It is the intent of the Con-  
10 gress that—

11 “(A) health care programs having a dem-  
12 onstrated effect of substantially reducing or  
13 eliminating the over-representation of Native  
14 Hawaiians among those suffering from chronic  
15 and acute disease and illness and addressing  
16 the health needs of Native Hawaiians shall be  
17 established and implemented; and

18 “(B) the Nation meet the Healthy People  
19 2010 and Kanaka Maoli health objectives de-  
20 scribed in paragraph (2) by the year 2010.

21 “(2) HEALTHY PEOPLE AND KANAKA MAOLI  
22 HEALTH OBJECTIVES.—The Healthy People 2010  
23 and Kanaka Maoli health objectives described in this  
24 paragraph are the following:

25 “(A) CHRONIC DISEASE AND ILLNESS.—

1                   “(i)   CARDIOVASCULAR   DISEASE.—

2                   With respect to cardiovascular disease—

3                   “(I) to increase to 75 percent the  
4                   proportion of females who are aware  
5                   that cardiovascular disease (heart dis-  
6                   ease and stroke) is the leading cause  
7                   of death for all females.

8                   “(II) to increase to at least 95  
9                   percent the proportion of adults who  
10                  have had their blood pressure meas-  
11                  ured within the preceding 2 years and  
12                  can state whether their blood pressure  
13                  was normal or high; and

14                  “(III) to increase to at least 75  
15                  percent the proportion of adults who  
16                  have had their blood cholesterol  
17                  checked within the preceding 5 years.

18                  “(ii)   DIABETES.—With respect to  
19                  diabetes—

20                  “(I) to increase to 80 percent the  
21                  proportion of persons with diabetes  
22                  whose condition has been diagnosed;

23                  “(II) to increase to at least 20  
24                  percent the proportion of patients  
25                  with diabetes who annually obtain

1 lipid assessment (total cholesterol,  
2 LDL cholesterol, HDL cholesterol,  
3 triglyceride); and

4 “(III) to increase to 52 percent  
5 the proportion of persons with diabe-  
6 tes who have received formal diabetes  
7 education.

8 “(iii) CANCER.—With respect to  
9 cancer—

10 “(I) to increase to at least 95  
11 percent the proportion of women age  
12 18 and older who have ever received a  
13 Pap test and to at least 85 percent  
14 those who have received a Pap test  
15 within the preceding 3 years; and

16 “(II) to increase to at least 40  
17 percent the proportion of women age  
18 40 and older who have received a  
19 breast examination and a mammo-  
20 gram within the preceding 2 years.

21 “(iv) DENTAL HEALTH.—With respect  
22 to dental health—

23 “(I) to reduce untreated cavities  
24 in the primary and permanent teeth  
25 (mixed dentition) so that the propor-

1           tion of children with decayed teeth not  
 2           filled is not more than 12 percent  
 3           among children ages 2 through 4, 22  
 4           percent among children ages 6  
 5           through 8, and 15 percent among  
 6           adolescents ages 8 through 15;

7           “(II) to increase to at least 70  
 8           percent the proportion of children  
 9           ages 8 through 14 who have received  
 10          protective sealants in permanent  
 11          molar teeth; and

12          “(III) to increase to at least 70  
 13          percent the proportion of adults age  
 14          18 and older using the oral health  
 15          care system each year.

16          “(v) MENTAL HEALTH.—With respect  
 17          to mental health—

18               “(I) to incorporate or support  
 19               land(‘aina)-based, water(wai)-based,  
 20               or the ocean(kai)-based programs  
 21               within the context of mental health  
 22               activities; and

23               “(II) to reduce the anger and  
 24               frustration levels within ‘ohana’ focus-  
 25               ing on building positive relationships

1 and striving for balance in living  
2 (lokaʻahi) and achieving a sense of con-  
3 tentment (pono).

4 “(vi) ASTHMA.—With respect to  
5 asthma—

6 “(I) to increase to at least 40  
7 percent the proportion of people with  
8 asthma who receive formal patient  
9 education, including information  
10 about community and self-help re-  
11 sources, as an integral part of the  
12 management of their condition;

13 “(II) to increase to at least 75  
14 percent the proportion of patients who  
15 receive counseling from health care  
16 providers on how to recognize early  
17 signs of worsening asthma and how to  
18 respond appropriately; and

19 “(III) to increase to at least 75  
20 percent the proportion of primary care  
21 providers who are trained to provide  
22 culturally competent care to ethnic  
23 minorities (Native Hawaiians) seeking  
24 health care for chronic obstructive  
25 pulmonary disease.

1           “(B) INFECTIOUS DISEASE AND ILL-  
2           NESS.—

3           “(i) IMMUNIZATIONS.—With respect  
4           to immunizations—

5                   “(I) to reduce indigenous cases of  
6                   vaccine-preventable disease;

7                   “(II) to achieve immunization  
8                   coverage of at least 90 percent among  
9                   children between 19 and 35 months of  
10                  age; and

11                  “(III) to increase to 90 percent  
12                  the rate of immunization coverage  
13                  among adults 65 years of age or  
14                  older, and 60 percent for high-risk  
15                  adults between 18 and 64 years of  
16                  age.

17                  “(ii) SEXUALLY TRANSMITTED DIS-  
18                  EASES; HIV; AIDS.—To increase the num-  
19                  ber of HIV-infected adolescents and adults  
20                  in care who receive treatment consistent  
21                  with current public health treatment guide-  
22                  lines.

23           “(C) WELLNESS.—

24                  “(i) EXERCISE.—With respect to  
25                  exercise—



1           “(I) to increase to 85 percent the  
2           proportion of people ages 18 and older  
3           who engage in any leisure time phys-  
4           ical activity; and

5           “(II) to increase to at least 30  
6           percent the proportion of people ages  
7           18 and older who engage regularly,  
8           preferably daily, in sustained physical  
9           activity for at least 30 minutes per  
10          day.

11          “(ii) NUTRITION.—With respect to  
12          nutrition—

13                 “(I) to increase to at least 60  
14                 percent the prevalence of healthy  
15                 weight (defined as body mass index  
16                 equal to or greater than 19.0 and less  
17                 than 25.0) among all people age 20  
18                 and older;

19                 “(II) to increase to at least 75  
20                 percent the proportion of people age 2  
21                 and older who meet the dietary guide-  
22                 lines’ minimum average daily goal of  
23                 at least 5 servings of vegetables and  
24                 fruits; and

1                   “(III) to increase the use of tra-  
2                   ditional Native Hawaiian foods in all  
3                   peoples’ diets and dietary preferences.

4                   “(iii) LIFESTYLE.—With respect to  
5                   lifestyle—

6                   “(I) to reduce cigarette smoking  
7                   among pregnant women to a preva-  
8                   lence of not more than 2 percent;

9                   “(II) to reduce the prevalence of  
10                  respiratory disease, cardiovascular dis-  
11                  ease, and cancer resulting from expo-  
12                  sure to tobacco smoke;

13                  “(III) to increase to at least 70  
14                  percent the proportion of all preg-  
15                  nancies among women between the  
16                  ages of 15 and 44 that are planned  
17                  (intended); and

18                  “(IV) to reduce deaths caused by  
19                  unintentional injuries to not more  
20                  than 25.9 per 100,000.

21                  “(iv) CULTURE.—With respect to  
22                  culture—

23                  “(I) to develop and implement  
24                  cultural values within the context of  
25                  the corporate cultures of the Native

1 Hawaiian health care systems, the  
2 Native Hawaiian Health Scholarship  
3 Program, and Papa Ola Lokahi; and

4 “(H) to facilitate the provision of  
5 Native Hawaiian healing practices by  
6 Native Hawaiian healers for those eli-  
7 ents desiring such assistance.

8 “(D) ACCESS.—With respect to access—

9 “(i) to increase the proportion of pa-  
10 tients who have coverage for clinical pre-  
11 ventive services as part of their health in-  
12 surance; and

13 “(ii) to reduce to not more than 7  
14 percent the proportion of individuals and  
15 families who report that they did not ob-  
16 tain all the health care that they needed.

17 “(E) HEALTH PROFESSIONS TRAINING  
18 AND EDUCATION.—With respect to health pro-  
19 fessions training and education—

20 “(i) to increase the proportion of all  
21 degrees in the health professions and allied  
22 and associated health professions fields  
23 awarded to members of underrepresented  
24 racial and ethnic minority groups; and

1                   “(ii) to support training activities and  
 2                   programs in traditional Native Hawaiian  
 3                   healing practices by Native Hawaiian heal-  
 4                   ers.

5                   “(e) REPORT.—The Secretary shall submit to the  
 6                   President, for inclusion in each report required to be  
 7                   transmitted to Congress under section 11, a report on the  
 8                   progress made in each toward meeting each of the objec-  
 9                   tives described in subsection (b)(2).

10                   **“SEC. 5. COMPREHENSIVE HEALTH CARE MASTER PLAN**  
 11                   **FOR NATIVE HAWAIIANS.**

12                   “(a) DEVELOPMENT.—

13                   “(1) IN GENERAL.—The Secretary may make a  
 14                   grant to, or enter into a contract with, Papa Ola  
 15                   Lokahi for the purpose of coordinating, imple-  
 16                   menting and updating a Native Hawaiian com-  
 17                   prehensive health care master plan designed to pro-  
 18                   mote comprehensive health promotion and disease  
 19                   prevention services and to maintain and improve the  
 20                   health status of Native Hawaiians, and to support  
 21                   community-based initiatives that are reflective of ho-  
 22                   listic approaches to health.

23                   “(2) COLLABORATION.—The Papa Ola Lokahi  
 24                   shall collaborate with the Office of Hawaiian Affairs  
 25                   in carrying out this section.

1       “(b) AUTHORIZATION OF APPROPRIATIONS.—There  
2 are authorized to be appropriated such sums as may be  
3 necessary to carry out subsection (a).

4       **“SEC. 6. FUNCTIONS OF PAPA OLA LOKAHI.**

5       “(a) RESPONSIBILITY.—Papa Ola Lokahi shall be re-  
6 sponsible for the—

7           “(1) coordination, implementation, and updat-  
8 ing, as appropriate, of the comprehensive health care  
9 master plan developed pursuant to section 5;

10          “(2) training for the persons described in sub-  
11 paragraphs (B) and (C) of section 7(e)(1);

12          “(3) identification of and research into the dis-  
13 eases that are most prevalent among Native Hawai-  
14 ians, including behavioral, biomedical, epidemiolog-  
15 ical, and health services; and

16          “(4) the development of an action plan out-  
17 lining the contributions that each member organiza-  
18 tion of Papa Ola Lokahi will make in carrying out  
19 the policy of this Act.

20       “(b) SPECIAL PROJECT FUNDS.—Papa Ola Lokahi  
21 may receive special project funds that may be appro-  
22 priated for the purpose of research on the health status  
23 of Native Hawaiians or for the purpose of addressing the  
24 health care needs of Native Hawaiians.

25       “(c) CLEARINGHOUSE.—

1           “(1) IN GENERAL.—Papa Ola Lokahi shall  
2           serve as a clearinghouse for—

3                   “(A) the collection and maintenance of  
4           data associated with the health status of Native  
5           Hawaiians;

6                   “(B) the identification and research into  
7           diseases affecting Native Hawaiians;

8                   “(C) the availability of Native Hawaiian  
9           project funds, research projects and publica-  
10          tions;

11                   “(D) the collaboration of research in the  
12          area of Native Hawaiian health; and

13                   “(E) the timely dissemination of informa-  
14          tion pertinent to the Native Hawaiian health  
15          care systems.

16           “(2) CONSULTATION.—The Secretary shall con-  
17          sult periodically with Papa Ola Lokahi for the pur-  
18          poses of maintaining the clearinghouse under para-  
19          graph (1) and providing information about programs  
20          in the Department that specifically address Native  
21          Hawaiian issues and concerns.

22           “(d) FISCAL ALLOCATION AND COORDINATION OF  
23          PROGRAMS AND SERVICES.—

24                   “(1) RECOMMENDATIONS.—Papa Ola Lokahi  
25          shall provide annual recommendations to the Sec-

1       retary with respect to the allocation of all amounts  
2       appropriated under this Act.

3           “(2) COORDINATION.—Papa Ola Lokahi shall,  
4       to the maximum extent possible, coordinate and as-  
5       sist the health care programs and services provided  
6       to Native Hawaiians.

7           “(3) REPRESENTATION ON COMMISSION.—The  
8       Secretary, in consultation with Papa Ola Lokahi,  
9       shall make recommendations for Native Hawaiian  
10      representation on the President’s Advisory Commis-  
11      sion on Asian Americans and Pacific Islanders.

12          “(e) TECHNICAL SUPPORT.—Papa Ola Lokahi shall  
13      act as a statewide infrastructure to provide technical sup-  
14      port and coordination of training and technical assistance  
15      to the Native Hawaiian health care systems.

16          “(f) RELATIONSHIPS WITH OTHER AGENCIES.—

17           “(1) AUTHORITY.—Papa Ola Lokahi may enter  
18      into agreements or memoranda of understanding  
19      with relevant agencies or organizations that are ca-  
20      pable of providing resources or services to the Native  
21      Hawaiian health care systems.

22           “(2) MEDICARE, MEDICAID, SCHIP.—Papa Ola  
23      Lokahi shall develop or make every reasonable effort  
24      to—

1           “(A) develop a contractual or other ar-  
 2           rangement, through memoranda of under-  
 3           standing or agreement, with the Health Care  
 4           Financing Administration or the agency of the  
 5           State which administers or supervises the ad-  
 6           ministration of a State plan or waiver approved  
 7           under title XVIII, XIX or title XXI of the So-  
 8           cial Security Act for payment of all or a part  
 9           of the health care services to persons who are  
 10          eligible for medical assistance under such a  
 11          State plan or waiver; and

12           “(B) assist in the collection of appropriate  
 13          reimbursement for health care services to per-  
 14          sons who are entitled to insurance under title  
 15          XVIII of the Social Security Act.

16 **“SEC. 7. NATIVE HAWAIIAN HEALTH CARE SYSTEMS.**

17          “(a) **COMPREHENSIVE HEALTH PROMOTION, DIS-**  
 18 **EASE PREVENTION, AND PRIMARY HEALTH SERVICES.—**

19           “(1) **GRANTS AND CONTRACTS.—**The Secretary,  
 20          in consultation with Papa Ola Lokahi, may make  
 21          grants to, or enter into contracts with, any qualified  
 22          entity for the purpose of providing comprehensive  
 23          health promotion and disease prevention services, as  
 24          well as primary health services, to Native Hawaiians



1 who desire and are committed to bettering their own  
2 health.

3 “(2) PREFERENCE.—In making grants and en-  
4 tering into contracts under this subsection, the Sec-  
5 retary shall give preference to Native Hawaiian  
6 health care systems and Native Hawaiian organiza-  
7 tions and, to the extent feasible, health promotion  
8 and disease prevention services shall be performed  
9 through Native Hawaiian health care systems.

10 “(3) QUALIFIED ENTITY.—An entity is a quali-  
11 fied entity for purposes of paragraph (1) if the enti-  
12 ty is a Native Hawaiian health care system.

13 “(4) LIMITATION ON NUMBER OF ENTITIES.—  
14 The Secretary may make a grant to, or enter into  
15 a contract with, not more than 8 Native Hawaiian  
16 health care systems under this subsection during  
17 any fiscal year.

18 “(b) PLANNING GRANT OR CONTRACT.—In addition  
19 to grants and contracts under subsection (a), the Sec-  
20 retary may make a grant to, or enter into a contract with,  
21 Papa Ola Lokahi for the purpose of planning Native Ha-  
22 waiian health care systems to serve the health needs of  
23 Native Hawaiian communities on each of the islands of  
24 O‘ahu, Moloka‘i, Maui, Hawai‘i, Lana‘i, Kaua‘i, and  
25 Ni‘ihau in the State of Hawaii.

1       “(e) SERVICES TO BE PROVIDED.—

2               “(1) IN GENERAL.—Each recipient of funds  
3 under subsection (a) shall ensure that the following  
4 services either are provided or arranged for:

5               “(A) Outreach services to inform Native  
6 Hawaiians of the availability of health services.

7               “(B) Education in health promotion and  
8 disease prevention of the Native Hawaiian pop-  
9 ulation by, wherever possible, Native Hawaiian  
10 health care practitioners, community outreach  
11 workers, counselors, and cultural educators.

12              “(C) Services of physicians, physicians’ as-  
13 sistants, nurse practitioners or other health and  
14 allied-health professionals.

15              “(D) Immunizations.

16              “(E) Prevention and control of diabetes,  
17 high blood pressure, and otitis media.

18              “(F) Pregnancy and infant care.

19              “(G) Improvement of nutrition.

20              “(H) Identification, treatment, control,  
21 and reduction of the incidence of preventable  
22 illnesses and conditions endemic to Native Ha-  
23 waiians.

1           “(I) Collection of data related to the pre-  
2           vention of diseases and illnesses among Native  
3           Hawaiians.

4           “(J) Services within the meaning of the  
5           terms ‘health promotion’, ‘disease prevention’,  
6           and ‘primary health services’, as such terms are  
7           defined in section 3, which are not specifically  
8           referred to in subsection (a).

9           “(K) Support of culturally appropriate ac-  
10          tivities enhancing health and wellness including  
11          land-based, water-based, ocean-based, and spir-  
12          itually-based projects and programs.

13          “(2) TRADITIONAL HEALERS.—The health care  
14          services referred to in paragraph (1) which are pro-  
15          vided under grants or contracts under subsection (a)  
16          may be provided by traditional Native Hawaiian  
17          healers.

18          “(d) FEDERAL TORT CLAIMS ACT.—Individuals that  
19          provide medical, dental, or other services referred to in  
20          subsection (a)(1) for Native Hawaiian health care sys-  
21          tems, including providers of traditional Native Hawaiian  
22          healing services, shall be treated as if such individuals  
23          were members of the Public Health Service and shall be  
24          covered under the provisions of section 224 of the Public  
25          Health Service Act.

1       “(e) ~~SITE FOR OTHER FEDERAL PAYMENTS.~~—A Na-  
 2 tive Hawaiian health care system that receives funds  
 3 under subsection (a) shall provide a designated area and  
 4 appropriate staff to serve as a Federal loan repayment fa-  
 5 cility. Such facility shall be designed to enable health and  
 6 allied-health professionals to remit payments with respect  
 7 to loans provided to such professionals under any Federal  
 8 loan program.

9       “(f) ~~RESTRICTION ON USE OF GRANT AND CON-~~  
 10 ~~TRACT FUNDS.~~—The Secretary may not make a grant to,  
 11 or enter into a contract with, an entity under subsection  
 12 (a) unless the entity agrees that amounts received under  
 13 such grant or contract will not, directly or through con-  
 14 tract, be expended—

15               “(1) for any services other than the services de-  
 16 scribed in subsection (c)(1);

17               “(2) to provide inpatient services;

18               “(3) to make cash payments to intended recipi-  
 19 ents of health services; or

20               “(4) to purchase or improve real property  
 21 (other than minor remodeling of existing improve-  
 22 ments to real property) or to purchase major med-  
 23 ical equipment.

24       “(g) ~~LIMITATION ON CHARGES FOR SERVICES.~~—The  
 25 Secretary may not make a grant to, or enter into a con-

1 tract with, an entity under subsection (a) unless the entity  
2 agrees that, whether health services are provided directly  
3 or through contract—

4 “(1) health services under the grant or contract  
5 will be provided without regard to ability to pay for  
6 the health services; and

7 “(2) the entity will impose a charge for the de-  
8 livery of health services, and such charge—

9 “(A) will be made according to a schedule  
10 of charges that is made available to the public;  
11 and

12 “(B) will be adjusted to reflect the income  
13 of the individual involved.

14 “(h) AUTHORIZATION OF APPROPRIATIONS.—

15 “(1) GENERAL GRANTS.—There is authorized  
16 to be appropriated such sums as may be necessary  
17 for each of fiscal years 2000 through 2010 to carry  
18 out subsection (a).

19 “(2) PLANNING GRANTS.—There is authorized  
20 to be appropriated such sums as may be necessary  
21 for each of fiscal years 2000 through 2010 to carry  
22 out subsection (b).

1 **“SEC. 8. ADMINISTRATIVE GRANT FOR PAPA OLA LOKAHI.**

2 “(a) IN GENERAL.—In addition to any other grant  
3 or contract under this Act, the Secretary may make grants  
4 to, or enter into contracts with, Papa Ola Lokahi for—

5 “(1) coordination, implementation, and updat-  
6 ing (as appropriate) of the comprehensive health  
7 care master plan developed pursuant to section 5;

8 “(2) training for the persons described in sub-  
9 paragraphs (B) and (C) of section 7(c)(1);

10 “(3) identification of and research into the dis-  
11 eases that are most prevalent among Native Hawai-  
12 ians, including behavioral, biomedical, epidemiolog-  
13 ical, and health services;

14 “(4) the development of an action plan out-  
15 lining the contributions that each member organiza-  
16 tion of Papa Ola Lokahi will make in carrying out  
17 the policy of this Act;

18 “(5) a clearinghouse function for—

19 “(A) the collection and maintenance of  
20 data associated with the health status of Native  
21 Hawaiians;

22 “(B) the identification and research into  
23 diseases affecting Native Hawaiians; and

24 “(C) the availability of Native Hawaiian  
25 project funds, research projects and publica-  
26 tions;

1           “(6) the coordination of the health care pro-  
2           grams and services provided to Native Hawaiians;  
3           and

4           “(7) the administration of special project funds.

5           “(b) AUTHORIZATION OF APPROPRIATIONS.—There  
6 is authorized to be appropriated such sums as may be nec-  
7 essary for each of fiscal years 2000 through 2010 to carry  
8 out subsection (a).

9           **“SEC. 9. ADMINISTRATION OF GRANTS AND CONTRACTS.**

10          “(a) TERMS AND CONDITIONS.—The Secretary shall  
11 include in any grant made or contract entered into under  
12 this Act such terms and conditions as the Secretary con-  
13 siders necessary or appropriate to ensure that the objec-  
14 tives of such grant or contract are achieved.

15          “(b) PERIODIC REVIEW.—The Secretary shall peri-  
16 odically evaluate the performance of, and compliance with,  
17 grants and contracts under this Act.

18          “(c) ADMINISTRATIVE REQUIREMENTS.—The Sec-  
19 retary may not make a grant or enter into a contract  
20 under this Act with an entity unless the entity—

21               “(1) agrees to establish such procedures for fis-  
22 cal control and fund accounting as may be necessary  
23 to ensure proper disbursement and accounting with  
24 respect to the grant or contract;

1           “(2) agrees to ensure the confidentiality of  
2 records maintained on individuals receiving health  
3 services under the grant or contract;

4           “(3) with respect to providing health services to  
5 any population of Native Hawaiians, a substantial  
6 portion of which has a limited ability to speak the  
7 English language—

8           “(A) has developed and has the ability to  
9 carry out a reasonable plan to provide health  
10 services under the grant or contract through in-  
11 dividuals who are able to communicate with the  
12 population involved in the language and cultural  
13 context that is most appropriate; and

14           “(B) has designated at least 1 individual,  
15 fluent in both English and the appropriate lan-  
16 guage, to assist in carrying out the plan;

17           “(4) with respect to health services that are  
18 covered in the plan of the State of Hawaii approved  
19 under title XIX of the Social Security Act—

20           “(A) if the entity will provide under the  
21 grant or contract any such health services  
22 directly—

23           “(i) the entity has entered into a par-  
24 ticipation agreement under such plans; and



1           “(ii) the entity is qualified to receive  
2           payments under such plan; and

3           “(B) if the entity will provide under the  
4           grant or contract any such health services  
5           through a contract with an organization—

6           “(i) the organization has entered into  
7           a participation agreement under such plan;  
8           and

9           “(ii) the organization is qualified to  
10          receive payments under such plan; and

11          “(5) agrees to submit to the Secretary and to  
12          Papa Ola Lokahi an annual report that describes  
13          the use and costs of health services provided under  
14          the grant or contract (including the average cost of  
15          health services per user) and that provides such  
16          other information as the Secretary determines to be  
17          appropriate.

18          “(d) CONTRACT EVALUATION.—

19                 “(1) DETERMINATION OF NONCOMPLIANCE.—

20          If, as a result of evaluations conducted by the Sec-  
21          retary, the Secretary determines that an entity has  
22          not complied with or satisfactorily performed a con-  
23          tract entered into under section 7, the Secretary  
24          shall, prior to renewing such contract, attempt to re-  
25          solve the areas of noncompliance or unsatisfactory

1 performance and modify such contract to prevent fu-  
2 ture occurrences of such noncompliance or unsatis-  
3 factory performance.

4 “(2) NONRENEWAL.—If the Secretary deter-  
5 mines that the noncompliance or unsatisfactory per-  
6 formance described in paragraph (1) with respect to  
7 an entity cannot be resolved and prevented in the fu-  
8 ture, the Secretary shall not renew the contract with  
9 such entity and may enter into a contract under sec-  
10 tion 7 with another entity referred to in subsection  
11 (a)(3) of such section that provides services to the  
12 same population of Native Hawaiians which is  
13 served by the entity whose contract is not renewed  
14 by reason of this paragraph.

15 “(3) CONSIDERATION OF RESULTS.—In deter-  
16 mining whether to renew a contract entered into  
17 with an entity under this Act, the Secretary shall  
18 consider the results of the evaluations conducted  
19 under this section.

20 “(4) APPLICATION OF FEDERAL LAWS.—All  
21 contracts entered into by the Secretary under this  
22 Act shall be in accordance with all Federal con-  
23 tracting laws and regulations, except that, in the  
24 discretion of the Secretary, such contracts may be  
25 negotiated without advertising and may be exempted

1 from the provisions of the Act of August 24, 1935  
2 (40 U.S.C. 270a et seq.).

3 “(5) PAYMENTS.—Payments made under any  
4 contract entered into under this Act may be made  
5 in advance, by means of reimbursement, or in in-  
6 stallments and shall be made on such conditions as  
7 the Secretary deems necessary to carry out the pur-  
8 poses of this Act.

9 “(e) LIMITATION ON USE OF FUNDS FOR ADMINIS-  
10 TRATIVE EXPENSES.—Except with respect to grants and  
11 contracts under section 8, the Secretary may not make  
12 a grant to, or enter into a contract with, an entity under  
13 this Act unless the entity agrees that the entity will not  
14 expend more than 15 percent of the amounts received pur-  
15 suant to this Act for the purpose of administering the  
16 grant or contract.

17 “(f) REPORT.—

18 “(1) IN GENERAL.—For each fiscal year during  
19 which an entity receives or expends funds pursuant  
20 to a grant or contract under this Act, such entity  
21 shall submit to the Secretary and to Papa Ola  
22 Lokahi an annual report—

23 “(A) on the activities conducted by the en-  
24 tity under the grant or contract;

1           “(B) on the amounts and purposes for  
2           which Federal funds were expended; and

3           “(C) containing such other information as  
4           the Secretary may request.

5           “(2) AUDITS.—The reports and records of any  
6           entity concerning any grant or contract under this  
7           Act shall be subject to audit by the Secretary, the  
8           Inspector General of the Department of Health and  
9           Human Services, and the Comptroller General of the  
10          United States.

11          “(g) ANNUAL PRIVATE AUDIT.—The Secretary shall  
12          allow as a cost of any grant made or contract entered into  
13          under this Act the cost of an annual private audit con-  
14          ducted by a certified public accountant.

15          **“SEC. 10. ASSIGNMENT OF PERSONNEL.**

16          “(a) IN GENERAL.—The Secretary may enter into an  
17          agreement with any entity under which the Secretary may  
18          assign personnel of the Department of Health and Human  
19          Services with expertise identified by such entity to such  
20          entity on detail for the purposes of providing comprehen-  
21          sive health promotion and disease prevention services to  
22          Native Hawaiians.

23          “(b) APPLICABLE FEDERAL PERSONNEL PROVI-  
24          SIONS.—Any assignment of personnel made by the Sec-  
25          retary under any agreement entered into under subsection

1 (a) shall be treated as an assignment of Federal personnel  
 2 to a local government that is made in accordance with sub-  
 3 chapter VI of chapter 33 of title 5, United States Code.

4 **“SEC. 11. NATIVE HAWAIIAN HEALTH SCHOLARSHIPS AND**  
 5 **FELLOWSHIPS.**

6 “(a) ELIGIBILITY.—Subject to the availability of  
 7 amounts appropriated under subsection (c), the Secretary  
 8 shall provide funds through a direct grant or a cooperative  
 9 agreement to Kamehameha Schools Bishop Estate or an-  
 10 other Native Hawaiian organization or health care organi-  
 11 zation with experience in the administration of educational  
 12 scholarships or placement services for the purpose of pro-  
 13 viding scholarship assistance to students who—

14 “(1) meet the requirements of section 338A of  
 15 the Public Health Service Act, except for assistance  
 16 as provided for under subsection (b)(2); and

17 “(2) are Native Hawaiians.

18 “(b) TERMS AND CONDITIONS.—

19 “(1) IN GENERAL.—The scholarship assistance  
 20 under subsection (a) shall be provided under the  
 21 same terms and subject to the same conditions, reg-  
 22 ulations, and rules as apply to scholarship assistance  
 23 provided under section 338A of the Public Health  
 24 Service Act (except as provided for in paragraph  
 25 (2)), except that—

1           “(A) the provision of scholarships in each  
2 type of health care profession training shall cor-  
3 respond to the need for each type of health care  
4 professional to serve the Native Hawaiian  
5 health care systems identified by Papa Ola  
6 Lokahi;

7           “(B) to the maximum extent practicable,  
8 the Secretary shall select scholarship recipients  
9 from a list of eligible applicants submitted by  
10 the Kamehameha Schools Bishop Estate or the  
11 Native Hawaiian organization administering the  
12 program;

13           “(C) the obligated service requirement for  
14 each scholarship recipient (except for those re-  
15 ceiving assistance under paragraph (2)) shall be  
16 fulfilled through service, in order of priority,  
17 in—

18                   “(i) any one of the Native Hawaiian  
19 health care systems; or

20                   “(ii) health professions shortage  
21 areas, medically underserved areas, or geo-  
22 graphic areas or facilities similarly des-  
23 ignated by the United States Public Health  
24 Service in the State of Hawaii;

1           “(D) the provision of counseling, retention  
2           and other support services shall not be limited  
3           to scholarship recipients, but shall also include  
4           recipients of other scholarship and financial aid  
5           programs enrolled in appropriate health profes-  
6           sions training programs.

7           “(E) financial assistance may be provided  
8           to scholarship recipients in those health profes-  
9           sions designated in such section 338A while  
10          they are fulfilling their service requirement in  
11          any one of the Native Hawaiian health care sys-  
12          tems or community health centers.

13          “(2) FELLOWSHIPS.—Financial assistance  
14          through fellowships may be provided to Native Ha-  
15          waiian applicants accepted and participating in a  
16          certificated program provided by a traditional Native  
17          Hawaiian healer in traditional Native Hawaiian  
18          healing practices including lomi-lomi, la‘au lapa‘au,  
19          and ho‘oponopono. Such assistance may include a  
20          stipend or reimbursement for costs associated with  
21          participation in the program.

22          “(3) RIGHTS AND BENEFITS.—Scholarship re-  
23          cipients in health professions designated in section  
24          338A of the Public Health Service Act while ful-  
25          filling their service requirements shall have all the

1 same rights and benefits of members of the National  
2 Health Service Corps during their period of service.

3 ~~“(4) NO INCLUSION OF ASSISTANCE IN GROSS~~  
4 ~~INCOME.—Financial assistance provided to scholar-~~  
5 ~~ship recipients for tuition, books and other school-re-~~  
6 ~~lated expenditures under this section shall not be in-~~  
7 ~~cluded in gross income for purposes of the Internal~~  
8 ~~Revenue Code of 1986.~~

9 ~~“(e) AUTHORIZATION OF APPROPRIATIONS.—There~~  
10 ~~is authorized to be appropriated such sums as may be nec-~~  
11 ~~essary for each of fiscal years 2000 through 2010 for the~~  
12 ~~purpose of funding the scholarship assistance program~~  
13 ~~under subsection (a).~~

14 ~~**“SEC. 12. REPORT.**~~

15 ~~“The President shall, at the time the budget is sub-~~  
16 ~~mitted under section 1105 of title 31, United States Code,~~  
17 ~~for each fiscal year transmit to Congress a report on the~~  
18 ~~progress made in meeting the objectives of this Act, in-~~  
19 ~~cluding a review of programs established or assisted pur-~~  
20 ~~suant to this Act and an assessment and recommendations~~  
21 ~~of additional programs or additional assistance necessary~~  
22 ~~to, at a minimum, provide health services to Native Ha-~~  
23 ~~waiians, and ensure a health status for Native Hawaiians,~~  
24 ~~which are at a parity with the health services available~~  
25 ~~to, and the health status of, the general population.~~



1 **“SEC. 13. DEMONSTRATION PROJECTS OF NATIONAL SIG-**  
2 **NIFICANCE.**

3 “(a) **AUTHORITY AND AREAS OF INTEREST.**—The  
4 Secretary, in consultation with Papa Ola Lokahi, may allo-  
5 cate amounts appropriated under this Act, or any other  
6 Act, to carry out Native Hawaiian demonstration projects  
7 of national significance. The areas of interest of such  
8 projects may include—

9 “(1) the education of health professionals, and  
10 other individuals in institutions of higher learning,  
11 in health and allied health programs in complemen-  
12 tary healing practices, including Native Hawaiian  
13 healing practices;

14 “(2) the integration of Western medicine with  
15 complementary healing practices including tradi-  
16 tional Native Hawaiian healing practices;

17 “(3) the use of tele-wellness and telecommuni-  
18 cations in chronic disease management and health  
19 promotion and disease prevention;

20 “(4) the development of appropriate models of  
21 health care for Native Hawaiians and other indige-  
22 nous people including the provision of culturally  
23 competent health services, related activities focusing  
24 on wellness concepts, the development of appropriate  
25 kupuna care programs, and the development of fi-

1 nancial mechanisms and collaborative relationships  
2 leading to universal access to health care;

3 “(5) the development of a centralized database  
4 and information system relating to the health care  
5 status, health care needs, and wellness of Native  
6 Hawaiians; and

7 “(6) the establishment of a Native Hawaiian  
8 Center of Excellence for Nursing at the University  
9 of Hawaii at Hilo, a Native Hawaiian Center of Ex-  
10 cellence for Mental Health at the University of Ha-  
11 waii at Manoa, a Native Hawaiian Center of Exce-  
12 llence for Maternal Health and Nutrition at the  
13 Waimanalo Health Center, and a Native Hawaiian  
14 Center of Excellence for Research, Training, and In-  
15 tegrated Medicine at Molokai General Hospital.

16 “(b) NONREDUCTION IN OTHER FUNDING.—The al-  
17 location of funds for demonstration projects under sub-  
18 section (a) shall not result in a reduction in funds required  
19 by the Native Hawaiian health care systems, the Native  
20 Hawaiian Health Scholarship Program, or Papa Ola  
21 Lokahi to carry out their respective responsibilities under  
22 this Act.

1 **“SEC. 14. NATIONAL BIPARTISAN COMMISSION ON NATIVE**  
2 **HAWAIIAN HEALTH CARE ENTITLEMENT.**

3 “(a) **ESTABLISHMENT.**—There is hereby established  
4 a National Bipartisan Native Hawaiian Health Care Enti-  
5 tlement Commission (referred to in this Act as the ‘Com-  
6 mission’).

7 “(b) **MEMBERSHIP.**—The Commission shall be com-  
8 posed of 21 members to be appointed as follows:

9 “(1) **CONGRESSIONAL MEMBERS.**—

10 “(A) **APPOINTMENT.**—Eight members of  
11 the Commission shall be members of Congress,  
12 of which—

13 “(i) two members shall be from the  
14 House of Representatives and shall be ap-  
15 pointed by the Majority Leader;

16 “(ii) two members shall be from the  
17 House of Representatives and shall be ap-  
18 pointed by the Minority Leader;

19 “(iii) two members shall be from the  
20 Senate and shall be appointed by the Ma-  
21 jority Leader; and

22 “(iv) two members shall be from the  
23 Senate and shall be appointed by the Mi-  
24 nority Leader.

25 “(B) **RELEVANT COMMITTEE MEMBER-**  
26 **SHIP.**—The members of the Commission ap-

1 pointed under subparagraph (A) shall each be  
 2 members of the committees of Congress that  
 3 consider legislation affecting the provision of  
 4 health care to Native Hawaiians and other Na-  
 5 tive American.

6 “(C) CHAIRPERSON.—The members of the  
 7 Commission appointed under subparagraph (A)  
 8 shall elect the chairperson and vice-chairperson  
 9 of the Commission.

10 “(2) HAWAIIAN HEALTH MEMBERS.—Eleven  
 11 members of the Commission shall be appointed by  
 12 Hawaiian health entities, of which—

13 “(A) five members shall be appointed by  
 14 the Native Hawaiian Health Care Systems;

15 “(B) one member shall be appointed by the  
 16 Hawaii State Primary Care Association;

17 “(C) one member shall be appointed by  
 18 Papa Ola Lokahi;

19 “(D) one member shall be appointed by the  
 20 State Council of Hawaiian Homestead Associa-  
 21 tions;

22 “(E) one member shall be appointed by the  
 23 Office of Hawaiian Affairs; and

24 “(F) two members shall be appointed by  
 25 the Association of Hawaiian Civic Clubs and

1           shall represent Native Hawaiian populations on  
2           the United States continent.

3           “(3) SECRETARIAL MEMBERS.—Two members  
4           of the Commission shall be appointed by the Sec-  
5           retary and shall possess knowledge of the health  
6           concerns and wellness issues facing Native Hawai-  
7           ians.

8           “(e) TERMS.—

9           “(1) IN GENERAL.—The members of the Com-  
10          mission shall serve for the life of the Commission.

11          “(2) INITIAL APPOINTMENT OF MEMBERS.—  
12          The members of the Commission shall be appointed  
13          under subsection (b)(1) not later than 90 days after  
14          the date of enactment of this Act, and the remaining  
15          members of the Commission shall be appointed not  
16          later than 60 days after the date on which the mem-  
17          bers are appointed under such subsection (b)(1).

18          “(3) VACANCIES.—A vacancy in the member-  
19          ship of the Commission shall be filled in the manner  
20          in which the original appointment was made.

21          “(d) DUTIES OF THE COMMISSION.—The Commis-  
22          sion shall carry out the following duties and functions:

23                 “(1) Review and analyze the recommendations  
24                 of the report of the study committee established  
25                 under paragraph (3).

1           “(2) Make recommendations to Congress for  
2 the provision of health services to Native Hawaiian  
3 individuals as an entitlement, giving due regard to  
4 the effects of a program on existing health care de-  
5 livery systems for Native Hawaiians and the effect  
6 of such programs on self-determination and their  
7 reconciliation.

8           “(3) Establish a study committee to be com-  
9 posed of at least 10 members from the Commission,  
10 including 4 members of the members appointed  
11 under subsection (b)(1), 5 of the members appointed  
12 under subsection (b)(2), and 1 of the members ap-  
13 pointed by the Secretary under subsection (b)(3);  
14 which shall—

15           “(A) to the extent necessary to carry out  
16 its duties, collect and compile data necessary to  
17 understand the extent of Native Hawaiian  
18 needs with regards to the provision of health  
19 services, including holding hearings and solie-  
20 iting the views of Native Hawaiians and Native  
21 Hawaiian organizations, and which may include  
22 authorizing and funding feasibility studies of  
23 various models for all Native Hawaiian bene-  
24 ficiaries and their families, including those that  
25 live on the United States continent;

1           “(B) make recommendations to the Com-  
2 mission for legislation that will provide for the  
3 culturally-competent and appropriate provision  
4 of health services for Native Hawaiians as an  
5 entitlement, which shall, at a minimum, address  
6 issues of eligibility and benefits to be provided,  
7 including recommendations regarding from  
8 whom such health services are to be provided  
9 and the cost and mechanisms for funding of the  
10 health services to be provided;

11           “(C) determine the effect of the enactment  
12 of such recommendations on the existing system  
13 of delivery of health services for Native Hawai-  
14 ians;

15           “(D) determine the effect of a health serv-  
16 ice entitlement program for Native Hawaiian  
17 individuals on their self-determination and the  
18 reconciliation of their relationship with the  
19 United States;

20           “(E) not later than 12 months after the  
21 date of the appointment of all members of the  
22 Commission, make a written report of its find-  
23 ings and recommendations to the Commission,  
24 which report shall include a statement of the  
25 minority and majority position of the committee

1 and which shall be disseminated, at a minimum,  
2 to Native Hawaiian organizations and agencies  
3 and health organizations referred to in sub-  
4 section (b)(2) for comment to the Commission;  
5 and

6 “(F) report regularly to the full Commis-  
7 sion regarding the findings and recommenda-  
8 tions developed by the committee in the course  
9 of carrying out its duties under this section.

10 “(4) Not later than 18 months after the date  
11 of the appointment of all members of the Commis-  
12 sion, submit a written report to Congress containing  
13 a recommendation of policies and legislation to im-  
14 plement a policy that would establish a health care  
15 system for Native Hawaiians, grounded in their cul-  
16 ture, and based on the delivery of health services as  
17 an entitlement, together with a determination of the  
18 implications of such an entitlement system on exist-  
19 ing health care delivery systems for Native Hawai-  
20 ians and their self-determination and the reconcili-  
21 ation of their relationship with the United States.

22 “(e) ADMINISTRATIVE PROVISIONS.—

23 “(1) COMPENSATION AND EXPENSES.—

24 “(A) CONGRESSIONAL MEMBERS.—Each  
25 member of the Commission appointed under



1 subsection (b)(1) shall not receive any addi-  
2 tional compensation, allowances, or benefits by  
3 reason of their service on the Commission. Such  
4 members shall receive travel expenses and per  
5 diem in lieu of subsistence in accordance with  
6 sections 5702 and 5703 of title 5, United  
7 States Code.

8 “(B) OTHER MEMBERS.—The members of  
9 the Commission appointed under paragraphs  
10 (2) and (3) of subsection (b) shall, while serv-  
11 ing on the business of the Commission (includ-  
12 ing travel time), receive compensation at the  
13 per diem equivalent of the rate provided for in-  
14 dividuals under level IV of the Executive Sched-  
15 ule under section 5315 of title 5, United States  
16 Code, and while serving away from their home  
17 or regular place of business, be allowed travel  
18 expenses, as authorized by the chairperson of  
19 the Commission.

20 “(C) OTHER PERSONNEL.—For purposes  
21 of compensation (other than compensation of  
22 the members of the Commission) and employ-  
23 ment benefits, rights, and privileges, all per-  
24 sonnel of the Commission shall be treated as if  
25 they were employees of the Senate.

1           ~~“(2) MEETINGS AND QUORUM.—~~

2                   ~~“(A) MEETINGS.—The Commission shall~~  
3           ~~meet at the call of the chairperson.~~

4                   ~~“(B) QUORUM.—A quorum of the Commis-~~  
5           ~~sion shall consist of not less than 12 members,~~  
6           ~~of which—~~

7                           ~~“(i) not less than 4 of such members~~  
8                   ~~shall be appointees under subsection~~  
9                   ~~(b)(1);~~

10                           ~~“(ii) not less than 7 of such members~~  
11                   ~~shall be appointees under subsection~~  
12                   ~~(b)(2); and~~

13                           ~~“(iii) not less than 1 of such members~~  
14                   ~~shall be an appointee under subsection~~  
15                   ~~(b)(3).~~

16           ~~“(3) DIRECTOR AND STAFF.—~~

17                   ~~“(A) EXECUTIVE DIRECTOR.—The mem-~~  
18           ~~bers of the Commission shall appoint an execu-~~  
19           ~~tive director of the Commission. The executive~~  
20           ~~director shall be paid the rate of basic pay~~  
21           ~~equal to that under level V of the Executive~~  
22           ~~Schedule under section 5316 of title 5, United~~  
23           ~~States Code.~~

24                   ~~“(B) STAFF.—With the approval of the~~  
25           ~~Commission, the executive director may appoint~~

1 such personnel as the executive director deems  
2 appropriate.

3 ~~“(C) APPLICABILITY OF CIVIL SERVICE~~  
4 ~~LAWS.—~~The staff of the Commission shall be  
5 appointed without regard to the provisions of  
6 title 5, United States Code, governing appoint-  
7 ments in the competitive service, and shall be  
8 paid without regard to the provisions of chapter  
9 51 and subchapter III of chapter 53 of such  
10 title (relating to classification and General  
11 Schedule pay rates).

12 ~~“(D) EXPERTS AND CONSULTANTS.—~~With  
13 the approval of the Commission, the executive  
14 director may procure temporary and intermit-  
15 tent services under section 3109(b) of title 5,  
16 United States Code.

17 ~~“(E) FACILITIES.—~~The Administrator of  
18 the General Services Administration shall locate  
19 suitable office space for the operations of the  
20 Commission in the State of Hawaii. The facili-  
21 ties shall serve as the headquarters of the Com-  
22 mission and shall include all necessary equip-  
23 ment and incidentals required for the proper  
24 functioning of the Commission.

25 ~~“(f) POWERS.—~~

1           “(1) HEARINGS AND OTHER ACTIVITIES.—For  
2 purposes of carrying out its duties, the Commission  
3 may hold such hearings and undertake such other  
4 activities as the Commission determines to be nec-  
5 essary to carry out its duties, except that at least 8  
6 hearings shall be held on each of the Hawaiian Is-  
7 lands and 3 hearings in the continental United  
8 States in areas where large numbers of Native Ha-  
9 waiians are present. Such hearings shall be held to  
10 solicit the views of Native Hawaiians regarding the  
11 delivery of health care services to such individuals.  
12 To constitute a hearing under this paragraph, at  
13 least 4 members of the Commission, including at  
14 least 1 member of Congress, must be present. Hear-  
15 ings held by the study committee established under  
16 subsection (d)(3) may be counted towards the num-  
17 ber of hearings required under this paragraph.

18           “(2) STUDIES BY THE GENERAL ACCOUNTING  
19 OFFICE.—Upon the request of the Commission, the  
20 Comptroller General shall conduct such studies or  
21 investigations as the Commission determines to be  
22 necessary to carry out its duties.

23           “(3) COST ESTIMATES.—

24           “(A) IN GENERAL.—The Director of the  
25 Congressional Budget Office or the Chief Actu-

1           ary of the Health Care Financing Administra-  
2           tion, or both, shall provide to the Commission,  
3           upon the request of the Commission, such cost  
4           estimates as the Commission determines to be  
5           necessary to carry out its duties.

6           “(B) REIMBURSEMENTS.—The Commis-  
7           sion shall reimburse the Director of the Con-  
8           gressional Budget Office for expenses relating  
9           to the employment in the office of the Director  
10          of such additional staff as may be necessary for  
11          the Director to comply with requests by the  
12          Commission under subparagraph (A).

13          “(4) DETAIL OF FEDERAL EMPLOYEES.—Upon  
14          the request of the Commission, the head of any Fed-  
15          eral agency is authorized to detail, without reim-  
16          bursement, any of the personnel of such agency to  
17          the Commission to assist the Commission in ear-  
18          rying out its duties. Any such detail shall not inter-  
19          rupt or otherwise affect the civil service status or  
20          privileges of the Federal employees.

21          “(5) TECHNICAL ASSISTANCE.—Upon the re-  
22          quest of the Commission, the head of any Federal  
23          agency shall provide such technical assistance to the  
24          Commission as the Commission determines to be  
25          necessary to carry out its duties.

1           “(6) USE OF MAILS.—The Commission may use  
2 the United States mails in the same manner and  
3 under the same conditions as Federal agencies and  
4 shall, for purposes of the frank, be considered a  
5 commission of Congress as described in section 3215  
6 of title 39, United States Code.

7           “(7) OBTAINING INFORMATION.—The Commis-  
8 sion may secure directly from any Federal agency  
9 information necessary to enable the Commission to  
10 carry out its duties, if the information may be dis-  
11 closed under section 552 of title 5, United States  
12 Code. Upon request of the chairperson of the Com-  
13 mission, the head of such agency shall furnish such  
14 information to the Commission.

15           “(8) SUPPORT SERVICES.—Upon the request of  
16 the Commission, the Administrator of General Serv-  
17 ices shall provide to the Commission on a reimburs-  
18 able basis such administrative support services as  
19 the Commission may request.

20           “(9) PRINTING.—For purposes of costs relating  
21 to printing and binding, including the cost of per-  
22 sonnel detailed from the Government Printing Of-  
23 fice, the Commission shall be deemed to be a com-  
24 mittee of Congress.

1       “(g) AUTHORIZATION OF APPROPRIATIONS.—There  
2 is authorized to be appropriated \$1,500,000 to carry out  
3 this section. The amount appropriated under this sub-  
4 section shall not result in a reduction in any other appro-  
5 priation for health care or health services for Native Ha-  
6 waiians.

7       **“SEC. 15. RULE OF CONSTRUCTION.**

8       “Nothing in this Act shall be construed to restrict  
9 the authority of the State of Hawaii to license health prac-  
10 titioners.

11       **“SEC. 16. COMPLIANCE WITH BUDGET ACT.**

12       “Any new spending authority (described in subpara-  
13 graph (A) of (B) of section 401(c)(2) of the Congressional  
14 Budget Act of 1974 (2 U.S.C. 651(c)(2) (A) or (B)))  
15 which is provided under this Act shall be effective for any  
16 fiscal year only to such extent or in such amounts as are  
17 provided for in appropriation Acts.

18       **“SEC. 17. SEVERABILITY.**

19       “If any provision of this Act, or the application of  
20 any such provision to any person or circumstances is held  
21 to be invalid, the remainder of this Act, and the applica-  
22 tion of such provision or amendment to persons or cir-  
23 cumstances other than those to which it is held invalid,  
24 shall not be affected thereby.”

1 **SECTION 1. SHORT TITLE.**

2 *This Act may be cited as the “Native Hawaiian Health*  
3 *Care Improvement Act Reauthorization of 2000”.*

4 **SEC. 2. AMENDMENT TO THE NATIVE HAWAIIAN HEALTH**  
5 **CARE IMPROVEMENT ACT.**

6 *The Native Hawaiian Health Care Improvement Act*  
7 *(42 U.S.C. 11701 et seq.) is amended to read as follows:*

8 **“SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

9 *“(a) SHORT TITLE.—This Act may be cited as the ‘Na-*  
10 *tive Hawaiian Health Care Improvement Act’.*

11 *“(b) TABLE OF CONTENTS.—The table of contents of*  
12 *this Act is as follows:*

*“Sec. 1. Short title; table of contents.*

*“Sec. 2. Findings.*

*“Sec. 3. Definitions.*

*“Sec. 4. Declaration of national Native Hawaiian health policy.*

*“Sec. 5. Comprehensive health care master plan for Native Hawaiians.*

*“Sec. 6. Functions of Papa Ola Lokahi and Office of Hawaiian Affairs.*

*“Sec. 7. Native Hawaiian health care.*

*“Sec. 8. Administrative grant for Papa Ola Lokahi.*

*“Sec. 9. Administration of grants and contracts.*

*“Sec. 10. Assignment of personnel.*

*“Sec. 11. Native Hawaiian health scholarships and fellowships.*

*“Sec. 12. Report.*

*“Sec. 13. Use of Federal Government facilities and sources of supply.*

*“Sec. 14. Demonstration projects of national significance.*

*“Sec. 15. National Bipartisan Commission on Native Hawaiian Health*  
*Care Entitlement.*

*“Sec. 16. Rule of construction.*

*“Sec. 17. Compliance with Budget Act.*

*“Sec. 18. Severability.*

13 **“SEC. 2. FINDINGS.**

14 *“(a) GENERAL FINDINGS.—Congress makes the fol-*  
15 *lowing findings:*



1           “(1) *Native Hawaiians begin their story with*  
2           *the Kumulipo which details the creation and inter-re-*  
3           *lationship of all things, including their evolvment as*  
4           *healthy and well people.*

5           “(2) *Native Hawaiians are a distinct and*  
6           *unique indigenous peoples with a historical con-*  
7           *tinuity to the original inhabitants of the Hawaiian*  
8           *archipelago within Ke Moananui, the Pacific Ocean,*  
9           *and have a distinct society organized almost 2,000*  
10          *years ago.*

11          “(3) *The health and well-being of Native Hawai-*  
12          *ians are intrinsically tied to their deep feelings and*  
13          *attachment to their lands and seas.*

14          “(4) *The long-range economic and social changes*  
15          *in Hawaii over the 19th and early 20th centuries*  
16          *have been devastating to the health and well-being of*  
17          *Native Hawaiians.*

18          “(5) *Native Hawaiians have never directly relin-*  
19          *quished to the United States their claims to their in-*  
20          *herent sovereignty as a people or over their national*  
21          *territory, either through their monarchy or through a*  
22          *plebiscite or referendum.*

23          “(6) *The Native Hawaiian people are deter-*  
24          *mined to preserve, develop and transmit to future*  
25          *generations their ancestral territory, and their cul-*

1 *tural identity in accordance with their own spiritual*  
2 *and traditional beliefs, customs, practices, language,*  
3 *and social institutions. In referring to themselves, Na-*  
4 *tive Hawaiians use the term ‘Kanaka Maoli’, a term*  
5 *frequently used in the 19th century to describe the na-*  
6 *tive people of Hawaii.*

7 “(7) *The constitution and statutes of the State of*  
8 *Hawaii—*

9 “(A) *acknowledge the distinct land rights of*  
10 *Native Hawaiian people as beneficiaries of the*  
11 *public lands trust; and*

12 “(B) *reaffirm and protect the unique right*  
13 *of the Native Hawaiian people to practice and*  
14 *perpetuate their cultural and religious customs,*  
15 *beliefs, practices, and language.*

16 “(8) *At the time of the arrival of the first non-*  
17 *indigenous peoples in Hawaii in 1778, the Native*  
18 *Hawaiian people lived in a highly organized, self-suf-*  
19 *ficient, subsistence social system based on communal*  
20 *land tenure with a sophisticated language, culture,*  
21 *and religion.*

22 “(9) *A unified monarchical government of the*  
23 *Hawaiian Islands was established in 1810 under Ka-*  
24 *mehameha I, the first King of Hawaii.*

1           “(10) Throughout the 19th century and until  
2           1893, the United States—

3                   “(A) recognized the independence of the Ha-  
4                   waiian Nation;

5                   “(B) extended full and complete diplomatic  
6                   recognition to the Hawaiian Government; and

7                   “(C) entered into treaties and conventions  
8                   with the Hawaiian monarchs to govern com-  
9                   merce and navigation in 1826, 1842, 1849, 1875  
10                  and 1887.

11           “(11) In 1893, John L. Stevens, the United  
12           States Minister assigned to the sovereign and inde-  
13           pendent Kingdom of Hawaii, conspired with a small  
14           group of non-Hawaiian residents of the Kingdom, in-  
15           cluding citizens of the United States, to overthrow the  
16           indigenous and lawful government of Hawaii.

17           “(12) In pursuance of that conspiracy, the  
18           United States Minister and the naval representative  
19           of the United States caused armed naval forces of the  
20           United States to invade the sovereign Hawaiian Na-  
21           tion in support of the overthrow of the indigenous and  
22           lawful Government of Hawaii and the United States  
23           Minister thereupon extended diplomatic recognition of  
24           a provisional government formed by the conspirators  
25           without the consent of the native people of Hawaii or

1       *the lawful Government of Hawaii in violation of trea-*  
2       *ties between the 2 nations and of international law.*

3               “(13) *In a message to Congress on December 18,*  
4       *1893, then President Grover Cleveland reported fully*  
5       *and accurately on these illegal actions, and acknowl-*  
6       *edged that by these acts, described by the President as*  
7       *acts of war, the government of a peaceful and friendly*  
8       *people was overthrown, and the President concluded*  
9       *that a ‘substantial wrong has thus been done which*  
10       *a due regard for our national character as well as the*  
11       *rights of the injured people required that we should*  
12       *endeavor to repair’.*

13               “(14) *Queen Lili‘uokalani, the lawful monarch of*  
14       *Hawaii, and the Hawaiian Patriotic League, rep-*  
15       *resenting the aboriginal citizens of Hawaii, promptly*  
16       *petitioned the United States for redress of these*  
17       *wrongs and for restoration of the indigenous govern-*  
18       *ment of the Hawaiian nation, but this petition was*  
19       *not acted upon.*

20               “(15) *The United States has acknowledged the*  
21       *significance of these events and has apologized to Na-*  
22       *tive Hawaiians on behalf of the people of the United*  
23       *States for the overthrow of the Kingdom of Hawaii*  
24       *with the participation of agents and citizens of the*  
25       *United States, and the resulting deprivation of the*

1 *rights of Native Hawaiians to self-determination in*  
2 *legislation enacted into law in 1993 (Public Law*  
3 *103–150; 107 Stat. 1510).*

4 “(16) *In 1898, the United States annexed Ha-*  
5 *waii through the Newlands Resolution without the*  
6 *consent of or compensation to the indigenous peoples*  
7 *of Hawaii or their sovereign government who were*  
8 *thereby denied the mechanism for expression of their*  
9 *inherent sovereignty through self-government and self-*  
10 *determination, their lands and ocean resources.*

11 “(17) *Through the Newlands Resolution and the*  
12 *1900 Organic Act, the Congress received 1,750,000*  
13 *acres of lands formerly owned by the Crown and Gov-*  
14 *ernment of the Hawaiian Kingdom and exempted the*  
15 *lands from then existing public land laws of the*  
16 *United States by mandating that the revenue and*  
17 *proceeds from these lands be ‘used solely for the ben-*  
18 *efit of the inhabitants of the Hawaiian Islands for*  
19 *education and other public purposes’, thereby estab-*  
20 *lishing a special trust relationship between the United*  
21 *States and the inhabitants of Hawaii.*

22 “(18) *In 1921, Congress enacted the Hawaiian*  
23 *Homes Commission Act, 1920, which designated*  
24 *200,000 acres of the ceded public lands for exclusive*  
25 *homesteading by Native Hawaiians, thereby affirm-*

1        *ing the trust relationship between the United States*  
2        *and the Native Hawaiians, as expressed by then Sec-*  
3        *retary of the Interior Franklin K. Lane who was*  
4        *cited in the Committee Report of the Committee on*  
5        *Territories of the House of Representatives as stating,*  
6        *‘One thing that impressed me . . . was the fact that*  
7        *the natives of the islands . . . for whom in a sense*  
8        *we are trustees, are falling off rapidly in numbers*  
9        *and many of them are in poverty.’*

10        *“(19) In 1938, Congress again acknowledged the*  
11        *unique status of the Native Hawaiian people by in-*  
12        *cluding in the Act of June 20, 1938 (52 Stat. 781 et*  
13        *seq.), a provision to lease lands within the extension*  
14        *to Native Hawaiians and to permit fishing in the*  
15        *area ‘only by native Hawaiian residents of said area*  
16        *or of adjacent villages and by visitors under their*  
17        *guidance’.*

18        *“(20) Under the Act entitled ‘An Act to provide*  
19        *for the admission of the State of Hawaii into the*  
20        *Union’, approved March 18, 1959 (73 Stat. 4), the*  
21        *United States transferred responsibility for the ad-*  
22        *ministration of the Hawaiian Home Lands to the*  
23        *State of Hawaii but reaffirmed the trust relationship*  
24        *which existed between the United States and the Na-*  
25        *tive Hawaiian people by retaining the exclusive*

1        *power to enforce the trust, including the power to ap-*  
2        *prove land exchanges, and legislative amendments af-*  
3        *fecting the rights of beneficiaries under such Act.*

4            *“(21) Under the Act entitled ‘An Act to provide*  
5        *for the admission of the State of Hawaii into the*  
6        *Union’, approved March 18, 1959 (73 Stat. 4), the*  
7        *United States transferred responsibility for adminis-*  
8        *tration over portions of the ceded public lands trust*  
9        *not retained by the United States to the State of Ha-*  
10       *waii but reaffirmed the trust relationship which ex-*  
11       *isted between the United States and the Native Ha-*  
12       *waiian people by retaining the legal responsibility of*  
13       *the State for the betterment of the conditions of Native*  
14       *Hawaiians under section 5(f) of such Act.*

15           *“(22) In 1978, the people of Hawaii amended*  
16       *their Constitution to establish the Office of Hawaiian*  
17       *Affairs and assigned to that body the authority to ac-*  
18       *cept and hold real and personal property transferred*  
19       *from any source in trust for the Native Hawaiian*  
20       *people, to receive payments from the State of Hawaii*  
21       *due to the Native Hawaiian people in satisfaction of*  
22       *the pro rata share of the proceeds of the Public Land*  
23       *Trust created under section 5 of the Admission Act of*  
24       *1959 (Public Law 83–3), to act as the lead State*  
25       *agency for matters affecting the Native Hawaiian*

1        *people, and to formulate policy on affairs relating to*  
2        *the Native Hawaiian people.*

3                *“(23) The authority of the Congress under the*  
4        *Constitution to legislate in matters affecting the ab-*  
5        *original or indigenous peoples of the United States*  
6        *includes the authority to legislate in matters affecting*  
7        *the native peoples of Alaska and Hawaii.*

8                *“(24) The United States has recognized the au-*  
9        *thority of the Native Hawaiian people to continue to*  
10        *work towards an appropriate form of sovereignty as*  
11        *defined by the Native Hawaiian people themselves in*  
12        *provisions set forth in legislation returning the Ha-*  
13        *waiian Island of Kaho‘olawe to custodial manage-*  
14        *ment by the State of Hawaii in 1994.*

15                *“(25) In furtherance of the trust responsibility*  
16        *for the betterment of the conditions of Native Hawai-*  
17        *ians, the United States has established a program for*  
18        *the provision of comprehensive health promotion and*  
19        *disease prevention services to maintain and improve*  
20        *the health status of the Hawaiian people. This pro-*  
21        *gram is conducted by the Native Hawaiian Health*  
22        *Care Systems, the Native Hawaiian Health Scholar-*  
23        *ship Program and Papa Ola Lokahi. Health initia-*  
24        *tives from these and other health institutions and*  
25        *agencies using Federal assistance have been respon-*



1        *sible for reducing the century-old morbidity and mor-*  
2        *tality rates of Native Hawaiian people by providing*  
3        *comprehensive disease prevention, health promotion*  
4        *activities and increasing the number of Native Ha-*  
5        *waiians in the health and allied health professions.*  
6        *This has been accomplished through the Native Ha-*  
7        *waiian Health Care Act of 1988 (Public Law 100-*  
8        *579) and its reauthorization in section 9168 of Public*  
9        *Law 102-396 (106 Stat. 1948).*

10            *“(26) This historical and unique legal relation-*  
11        *ship has been consistently recognized and affirmed by*  
12        *Congress through the enactment of Federal laws which*  
13        *extend to the Native Hawaiian people the same rights*  
14        *and privileges accorded to American Indian, Alaska*  
15        *Native, Eskimo, and Aleut communities, including*  
16        *the Native American Programs Act of 1974 (42*  
17        *U.S.C. 2991 et seq.), the American Indian Religious*  
18        *Freedom Act (42 U.S.C. 1996), the National Museum*  
19        *of the American Indian Act (20 U.S.C. 80q et seq.),*  
20        *and the Native American Graves Protection and Re-*  
21        *patriation Act (25 U.S.C. 3001 et seq.).*

22            *“(27) The United States has also recognized and*  
23        *reaffirmed the trust relationship to the Native Hawai-*  
24        *ian people through legislation which authorizes the*  
25        *provision of services to Native Hawaiians, specifi-*

1        *cally, the Older Americans Act of 1965 (42 U.S.C.*  
2        *3001 et seq.), the Developmental Disabilities Assist-*  
3        *ance and Bill of Rights Act Amendments of 1987, the*  
4        *Veterans' Benefits and Services Act of 1988, the Reha-*  
5        *ilitation Act of 1973 (29 U.S.C. 701 et seq.), the Na-*  
6        *tive Hawaiian Health Care Act of 1988 (Public Law*  
7        *100-579), the Health Professions Reauthorization Act*  
8        *of 1988, the Nursing Shortage Reduction and Edu-*  
9        *cation Extension Act of 1988, the Handicapped Pro-*  
10       *grams Technical Amendments Act of 1988, the Indian*  
11       *Health Care Amendments of 1988, and the Disadvan-*  
12       *taged Minority Health Improvement Act of 1990.*

13                *“(28) The United States has also affirmed the*  
14        *historical and unique legal relationship to the Hawai-*  
15        *ian people by authorizing the provision of services to*  
16        *Native Hawaiians to address problems of alcohol and*  
17        *drug abuse under the Anti-Drug Abuse Act of 1986*  
18        *(Public Law 99-570).*

19                *“(29) Further, the United States has recognized*  
20        *that Native Hawaiians, as aboriginal, indigenous,*  
21        *native peoples of Hawaii, are a unique population*  
22        *group in Hawaii and in the continental United*  
23        *States and has so declared in Office of Management*  
24        *and Budget Circular 15 in 1997 and Presidential Ex-*  
25        *ecutive Order No. 13125, dated June 7, 1999.*

1           “(30) *Despite the United States having expressed*  
 2           *its commitment to a policy of reconciliation with the*  
 3           *Native Hawaiian people for past grievances in Public*  
 4           *Law 103–150 (107 Stat. 1510) the unmet health*  
 5           *needs of the Native Hawaiian people remain severe*  
 6           *and their health status continues to be far below that*  
 7           *of the general population of the United States.*

8           “(b) *UNMET NEEDS AND HEALTH DISPARITIES.—*  
 9           *Congress finds that the unmet needs and serious health dis-*  
 10           *parities that adversely affect the Native Hawaiian people*  
 11           *include the following:*

12                   “(1) *CHRONIC DISEASE AND ILLNESS.—*

13                           “(A) *CANCER.—*

14                                   “(i) *IN GENERAL.—With respect to all*  
 15                                   *cancer—*

16   “(I) *Native Hawaiians have the*  
 17   *highest cancer mortality rates in the*  
 18   *State of Hawaii (231.0 out of every*  
 19   *100,000 residents), 45 percent higher*  
 20   *than that for the total State population*  
 21   *(159.7 out of every 100,000 residents);*

22   “(II) *Native Hawaiian males*  
 23   *have the highest cancer mortality rates*  
 24   *in the State of Hawaii for cancers of*

1            *the lung, liver and pancreas and for*  
2            *all cancers combined;*

3            “(III) *Native Hawaiian females*  
4            *ranked highest in the State of Hawaii*  
5            *for cancers of the lung, liver, pancreas,*  
6            *breast, cervix uteri, corpus uteri, stom-*  
7            *ach, and rectum, and for all cancers*  
8            *combined;*

9            “(IV) *Native Hawaiian males*  
10           *have the highest years of productive life*  
11           *lost from cancer in the State of Ha-*  
12           *waii with 8.7 years compared to 6.4*  
13           *years for all males; and*

14           “(V) *Native Hawaiian females*  
15           *have 8.2 years of productive life lost*  
16           *from cancer in the State of Hawaii as*  
17           *compared to 6.4 years for all females*  
18           *in the State of Hawaii;*

19           “(ii) *BREAST CANCER.—With respect*  
20           *to breast cancer—*

21           “(I) *Native Hawaiians have the*  
22           *highest mortality rates in the State of*  
23           *Hawaii from breast cancer (37.96 out*  
24           *of every 100,000 residents), which is 25*  
25           *percent higher than that for Caucasian*

1           *Americans (30.25 out of every 100,000*  
2           *residents) and 106 percent higher than*  
3           *that for Chinese Americans (18.39 out*  
4           *of every 100,000 residents); and*

5                   “(II) *nationally, Native Hawai-*  
6           *ians have the third highest mortality*  
7           *rates due to breast cancer (25.0 out of*  
8           *every 100,000 residents) following Afri-*  
9           *can Americans (31.4 out of every*  
10          *100,000 residents) and Caucasian*  
11          *Americans (27.0 out of every 100,000*  
12          *residents).*

13                   “(iii) *CANCER OF THE CERVIX.—Na-*  
14          *tive Hawaiians have the highest mortality*  
15          *rates from cancer of the cervix in the State*  
16          *of Hawaii (3.82 out of every 100,000 resi-*  
17          *dents) followed by Filipino Americans (3.33*  
18          *out of every 100,000 residents) and Cauca-*  
19          *sian Americans (2.61 out of every 100,000*  
20          *residents).*

21                   “(iv) *LUNG CANCER.—Native Hawai-*  
22          *ians have the highest mortality rates from*  
23          *lung cancer in the State of Hawaii (90.70*  
24          *out of every 100,000 residents), which is 61*  
25          *percent higher than Caucasian Americans,*

1           *who rank second and 161 percent higher*  
2           *than Japanese Americans, who rank third.*

3           “(v) *PROSTATE CANCER.*—*Native Ha-*  
4           *waiian males have the second highest mor-*  
5           *tality rates due to prostate cancer in the*  
6           *State of Hawaii (25.86 out of every 100,000*  
7           *residents) with Caucasian Americans hav-*  
8           *ing the highest mortality rate from prostate*  
9           *cancer (30.55 out of every 100,000 resi-*  
10           *dents).*

11           “(B) *DIABETES.*—*With respect to diabetes,*  
12           *for the years 1989 through 1991—*

13           “(i) *Native Hawaiians had the highest*  
14           *mortality rate due to diabetes mellitis (34.7*  
15           *out of every 100,000 residents) in the State*  
16           *of Hawaii which is 130 percent higher than*  
17           *the statewide rate for all other races (15.1*  
18           *out of every 100,000 residents);*

19           “(ii) *full-blood Hawaiians had a mor-*  
20           *tality rate of 93.3 out of every 100,000 resi-*  
21           *dents, which is 518 percent higher than the*  
22           *rate for the statewide population of all other*  
23           *races; and*

24           “(iii) *Native Hawaiians who are less*  
25           *than full-blood had a mortality rate of 27.1*

1           *out of every 100,000 residents, which is 79*  
2           *percent higher than the rate for the state-*  
3           *wide population of all other races.*

4           “(C) *ASTHMA.*—*With respect to asthma—*

5                 “(i) *in 1990, Native Hawaiians com-*  
6                 *prised 44 percent of all asthma cases in the*  
7                 *State of Hawaii for those 18 years of age*  
8                 *and younger, and 35 percent of all asthma*  
9                 *cases reported; and*

10                “(ii) *in 1992, the Native Hawaiian*  
11                *rate for asthma was 81.7 out of every 1000*  
12                *residents, which was 73 percent higher than*  
13                *the rate for the total statewide population of*  
14                *47.3 out of every 1000 residents.*

15           “(D) *CIRCULATORY DISEASES.*—

16                 “(i) *HEART DISEASE.*—*With respect to*  
17                 *heart disease—*

18                         “(I) *the death rate for Native Ha-*  
19                         *waiians from heart disease (333.4 out*  
20                         *of every 100,000 residents) is 66 per-*  
21                         *cent higher than for the entire State of*  
22                         *Hawaii (201.1 out of every 100,000*  
23                         *residents); and*

24                         “(II) *Native Hawaiian males*  
25                         *have the greatest years of productive*

1                   *life lost in the State of Hawaii where*  
2                   *Native Hawaiian males lose an aver-*  
3                   *age of 15.5 years and Native Hawai-*  
4                   *ian females lose an average of 8.2*  
5                   *years due to heart disease, as compared*  
6                   *to 7.5 years for all males in the State*  
7                   *of Hawaii and 6.4 years for all fe-*  
8                   *males.*

9                   “(ii) *HYPERTENSION.*—*The death rate*  
10                  *for Native Hawaiians from hypertension*  
11                  *(3.5 out of every 100,000 residents) is 84*  
12                  *percent higher than that for the entire State*  
13                  *(1.9 out of every 100,000 residents).*

14                  “(iii) *STROKE.*—*The death rate for*  
15                  *Native Hawaiians from stroke (58.3 out of*  
16                  *every 100,000 residents) is 13 percent high-*  
17                  *er than that for the entire State (51.8 out*  
18                  *of every 100,000 residents).*

19                  “(2) *INFECTIOUS DISEASE AND ILLNESS.*—*The*  
20                  *incidence of AIDS for Native Hawaiians is at least*  
21                  *twice as high per 100,000 residents (10.5 percent)*  
22                  *than that for any other non-Caucasian group in the*  
23                  *State of Hawaii.*

24                  “(3) *INJURIES.*—*With respect to injuries—*



1           “(A) the death rate for Native Hawaiians  
2 from injuries (38.8 out of every 100,000 resi-  
3 dents) is 45 percent higher than that for the en-  
4 tire State (26.8 out of every 100,000 residents);

5           “(B) Native Hawaiian males lose an aver-  
6 age of 14 years of productive life lost from inju-  
7 ries as compared to 9.8 years for all other males  
8 in Hawaii; and

9           “(C) Native Hawaiian females lose an av-  
10 erage of 4 years of productive life lost from inju-  
11 ries but this rate is the highest rate among all  
12 females in the State of Hawaii.

13           “(4) DENTAL HEALTH.—With respect to dental  
14 health—

15           “(A) Native Hawaiian children exhibit  
16 among the highest rates of dental caries in the  
17 nation, and the highest in the State of Hawaii  
18 as compared to the 5 other major ethnic groups  
19 in the State;

20           “(B) the average number of decayed or filled  
21 primary teeth for Native Hawaiian children ages  
22 5 through 9 years was 4.3 as compared with 3.7  
23 for the entire State of Hawaii and 1.9 for the  
24 United States; and

1           “(C) the proportion of Native Hawaiian  
2 children ages 5 through 12 years with unmet  
3 treatment needs (defined as having active dental  
4 caries requiring treatment) is 40 percent as com-  
5 pared with 33 percent for all other races in the  
6 State of Hawaii.

7           “(5) LIFE EXPECTANCY.—With respect to life  
8 expectancy—

9           “(A) Native Hawaiians have the lowest life  
10 expectancy of all population groups in the State  
11 of Hawaii;

12           “(B) between 1910 and 1980, the life expect-  
13 ancy of Native Hawaiians from birth has ranged  
14 from 5 to 10 years less than that of the overall  
15 State population average; and

16           “(C) the most recent tables for 1990 show  
17 Native Hawaiian life expectancy at birth (74.27  
18 years) to be about 5 years less than that of the  
19 total State population (78.85 years).

20           “(6) MATERNAL AND CHILD HEALTH.—

21           “(A) PRENATAL CARE.—With respect to  
22 prenatal care—

23           “(i) as of 1996, Native Hawaiian  
24 women have the highest prevalence (21 per-  
25 cent) of having had no prenatal care during

1            *their first trimester of pregnancy when com-*  
2            *pared to the 5 largest ethnic groups in the*  
3            *State of Hawaii;*

4            *“(ii) of the mothers in the State of Ha-*  
5            *waii who received no prenatal care through-*  
6            *out their pregnancy in 1996, 44 percent*  
7            *were Native Hawaiian;*

8            *“(iii) over 65 percent of the referrals to*  
9            *Healthy Start in fiscal years 1996 and*  
10           *1997 were Native Hawaiian newborns; and*

11           *“(iv) in every region of the State of*  
12           *Hawaii, many Native Hawaiian newborns*  
13           *begin life in a potentially hazardous cir-*  
14           *cumstance, far higher than any other racial*  
15           *group.*

16           *“(B) BIRTHS.—With respect to births—*

17           *“(i) in 1996, 45 percent of the live*  
18           *births to Native Hawaiian mothers were in-*  
19           *fant born to single mothers which statistics*  
20           *indicate put infants at higher risk of low*  
21           *birth weight and infant mortality;*

22           *“(ii) in 1996, of the births to Native*  
23           *Hawaiian single mothers, 8 percent were*  
24           *low birth weight (under 2500 grams); and*

1           “(iii) of all low birth weight babies  
2           born to single mothers in the State of Ha-  
3           wahi, 44 percent were Native Hawaiian.

4           “(C) *TEEN PREGNANCIES.*—With respect to  
5           births—

6           “(i) in 1993 and 1994, Native Hawai-  
7           ians had the highest percentage of teen (in-  
8           dividuals who were less than 18 years of  
9           age) births (8.1 percent) compared to the  
10          rate for all other races in the State of Ha-  
11          wahi (3.6 percent);

12          “(ii) in 1996, nearly 53 percent of all  
13          mothers in Hawaii under 18 years of age  
14          were Native Hawaiian;

15          “(iii) lower rates of abortion (a third  
16          lower than for the statewide population)  
17          among Hawaiian women may account in  
18          part, for the higher percentage of live births;

19          “(iv) in 1995, of the births to mothers  
20          age 14 years and younger in Hawaii, 66  
21          percent were Native Hawaiian; and

22          “(v) in 1996, of the births in this same  
23          group, 48 percent were Native Hawaiian.

24          “(D) *FETAL MORTALITY.*—In 1996, Native  
25          Hawaiian fetal mortality rates comprised 15

1           *percent of all fetal deaths for the State of Ha-*  
2           *waii. However, for fetal deaths occurring in*  
3           *mothers under the age of 18 years, 32 percent*  
4           *were Native Hawaiian, and for mothers 18*  
5           *through 24 years of age, 28 percent were Native*  
6           *Hawaiians.*

7           “(7) *MENTAL HEALTH.—*

8                   “(A) *ALCOHOL AND DRUG ABUSE.—With*  
9           *respect to alcohol and drug abuse—*

10                           “(i) *Native Hawaiians represent 38*  
11                           *percent of the total admissions to Depart-*  
12                           *ment of Health, Alcohol, Drugs and Other*  
13                           *Drugs, funded substance abuse treatment*  
14                           *programs;*

15                           “(ii) *in 1997, the prevalence of ciga-*  
16                           *rette smoking by Native Hawaiians was*  
17                           *28.5 percent, a rate that is 53 percent high-*  
18                           *er than that for all other races in the State*  
19                           *of Hawaii which is 18.6 percent;*

20                           “(iii) *Native Hawaiians have the high-*  
21                           *est prevalence rates of acute alcohol drink-*  
22                           *ing (31 percent), a rate that is 79 percent*  
23                           *higher than that for all other races in the*  
24                           *State of Hawaii;*

1           “(iv) *the chronic alcohol drinking rate*  
2           *among Native Hawaiians is 54 percent*  
3           *higher than that for all other races in the*  
4           *State of Hawaii;*

5           “(v) *in 1991, 40 percent of the Native*  
6           *Hawaiian adults surveyed reported having*  
7           *used marijuana compared with 30 percent*  
8           *for all other races in the State of Hawaii;*  
9           *and*

10           “(vi) *nine percent of the Native Ha-*  
11           *waiian adults surveyed reported that they*  
12           *are current users (within the past year) of*  
13           *marijuana, compared with 6 percent for all*  
14           *other races in the State of Hawaii.*

15           “(B) *CRIME.—With respect to crime—*

16           “(i) *in 1996, of the 5,944 arrests that*  
17           *were made for property crimes in the State*  
18           *of Hawaii, arrests of Native Hawaiians*  
19           *comprised 20 percent of that total;*

20           “(ii) *Native Hawaiian juveniles com-*  
21           *prised a third of all juvenile arrests in*  
22           *1996;*

23           “(iii) *In 1996, Native Hawaiians rep-*  
24           *resented 21 percent of the 8,000 adults ar-*  
25           *rested for violent crimes in the State of Ha-*

1           *waii, and 38 percent of the 4,066 juvenile*  
 2           *arrests;*

3           “(iv) *Native Hawaiians are over-rep-*  
 4           *resented in the prison population in Ha-*  
 5           *waii;*

6           “(v) *in 1995 and 1996 Native Hawai-*  
 7           *ians comprised 36.5 percent of the sentenced*  
 8           *felon prison population in Hawaii, as com-*  
 9           *pared to 20.5 percent for Caucasian Ameri-*  
 10          *cans, 3.7 percent for Japanese Americans,*  
 11          *and 6 percent for Chinese Americans;*

12          “(vi) *in 1995 and 1996 Native Hawai-*  
 13          *ians made up 45.4 percent of the technical*  
 14          *violator population, and at the Hawaii*  
 15          *Youth Correctional Facility, Native Hawai-*  
 16          *ians constituted 51.6 percent of all detainees*  
 17          *in fiscal year 1997; and*

18          “(vii) *based on anecdotal information*  
 19          *from inmates at the Halawa Correction Fa-*  
 20          *ilities, Native Hawaiians are estimated to*  
 21          *comprise between 60 and 70 percent of all*  
 22          *inmates.*

23          “(8) *HEALTH PROFESSIONS EDUCATION AND*  
 24          *TRAINING.—With respect to health professions edu-*  
 25          *cation and training—*

1           “(A) *Native Hawaiians age 25 years and*  
 2           *older have a comparable rate of high school com-*  
 3           *pletion, however, the rates of baccalaureate de-*  
 4           *gree achievement amongst Native Hawaiians are*  
 5           *less than the norm in the State of Hawaii (6.9*  
 6           *percent and 15.76 percent respectively);*

7           “(B) *Native Hawaiian physicians make up*  
 8           *4 percent of the total physician workforce in the*  
 9           *State of Hawaii; and*

10           “(C) *in fiscal year 1997, Native Hawaiians*  
 11           *comprised 8 percent of those individuals who*  
 12           *earned Bachelor’s Degrees, 14 percent of those in-*  
 13           *dividuals who earned professional diplomas, 6*  
 14           *percent of those individuals who earned Master’s*  
 15           *Degrees, and less than 1 percent of individuals*  
 16           *who earned doctoral degrees at the University of*  
 17           *Hawaii.*

18 **“SEC. 3. DEFINITIONS.**

19           *“In this Act:*

20           “(1) *DEPARTMENT.—The term ‘department’*  
 21           *means the Department of Health and Human Serv-*  
 22           *ices.*

23           “(2) *DISEASE PREVENTION.—The term ‘disease*  
 24           *prevention’ includes—*

25           “(A) *immunizations;*



1                   “(B) control of high blood pressure;

2                   “(C) control of sexually transmittable dis-  
3                   eases;

4                   “(D) prevention and control of chronic dis-  
5                   eases;

6                   “(E) control of toxic agents;

7                   “(F) occupational safety and health;

8                   “(G) injury prevention;

9                   “(H) fluoridation of water;

10                  “(I) control of infectious agents; and

11                  “(J) provision of mental health care.

12                  “(3) HEALTH PROMOTION.—The term ‘health  
13                  promotion’ includes—

14                         “(A) pregnancy and infant care, including  
15                         prevention of fetal alcohol syndrome;

16                         “(B) cessation of tobacco smoking;

17                         “(C) reduction in the misuse of alcohol and  
18                         harmful illicit drugs;

19                         “(D) improvement of nutrition;

20                         “(E) improvement in physical fitness;

21                         “(F) family planning;

22                         “(G) control of stress;

23                         “(H) reduction of major behavioral risk fac-  
24                         tors and promotion of healthy lifestyle practices;

25                         and

1           “(I) *integration of cultural approaches to*  
 2           *health and well-being, including traditional*  
 3           *practices relating to the atmosphere (lewa lani),*  
 4           *land (‘aina), water (wai), and ocean (kai).*

5           “(4) *NATIVE HAWAIIAN.—The term ‘Native Ha-*  
 6           *waiian’ means any individual who is Kanaka Maoli*  
 7           *(a descendant of the aboriginal people who, prior to*  
 8           *1778, occupied and exercised sovereignty in the area*  
 9           *that now constitutes the State of Hawaii) as evi-*  
 10          *denced by—*

11                   “(A) *genealogical records,*

12                   “(B) *kama‘aina witness verification from*  
 13           *Native Hawaiian Kupuna (elders); or*

14                   “(C) *birth records of the State of Hawaii or*  
 15           *any State or territory of the United States.*

16           “(5) *NATIVE HAWAIIAN HEALTH CARE SYSTEM.—*  
 17           *The term ‘Native Hawaiian health care system’*  
 18           *means an entity—*

19                   “(A) *which is organized under the laws of*  
 20           *the State of Hawaii;*

21                   “(B) *which provides or arranges for health*  
 22           *care services through practitioners licensed by*  
 23           *the State of Hawaii, where licensure require-*  
 24           *ments are applicable;*

1           “(C) which is a public or nonprofit private  
2           entity;

3           “(D) in which Native Hawaiian health  
4           practitioners significantly participate in the  
5           planning, management, monitoring, and evalua-  
6           tion of health care services;

7           “(E) which may be composed of as many as  
8           8 Native Hawaiian health care systems as nec-  
9           essary to meet the health care needs of each is-  
10          land’s Native Hawaiians; and

11          “(F) which is—

12               “(i) recognized by Papa Ola Lokahi for  
13               the purpose of planning, conducting, or ad-  
14               ministering programs, or portions of pro-  
15               grams, authorized by this chapter for the  
16               benefit of Native Hawaiians; and

17               “(ii) certified by Papa Ola Lokahi as  
18               having the qualifications and the capacity  
19               to provide the services and meet the require-  
20               ments under the contract the Native Hawai-  
21               ian health care system enters into with the  
22               Secretary or the grant the Native Hawaiian  
23               health care system receives from the Sec-  
24               retary pursuant to this Act.

1           “(6) *NATIVE HAWAIIAN HEALTH CENTER.*—*The*  
2           *term ‘Native Hawaiian Health Center’ means any or-*  
3           *ganization that is a primary care provider and*  
4           *that—*

5                   “(A) *has a governing board that is com-*  
6                   *posed of individuals, at least 50 percent of whom*  
7                   *are Native Hawaiians;*

8                   “(B) *has demonstrated cultural competency*  
9                   *in a predominantly Native Hawaiian commu-*  
10                   *nity;*

11                   “(C) *serves a patient population that—*

12                           “(i) *is made up of individuals at least*  
13                           *50 percent of whom are Native Hawaiian;*  
14                           *or*

15                           “(ii) *has not less than 2,500 Native*  
16                           *Hawaiians as annual users of services; and*

17                   “(D) *is recognized by Papa Ola Lokahi has*  
18                   *having met all the criteria of this paragraph.*

19           “(7) *NATIVE HAWAIIAN HEALTH TASK FORCE.*—  
20           *The term ‘Native Hawaiian Health Task Force’*  
21           *means a task force established by the State Council of*  
22           *Hawaiian Homestead Associations to implement*  
23           *health and wellness strategies in Native Hawaiian*  
24           *communities.*

1           “(8) *NATIVE HAWAIIAN ORGANIZATION.*—*The*  
2           *term ‘Native Hawaiian organization’ means any*  
3           *organization—*

4                   “(A) *which serves the interests of Native*  
5                   *Hawaiians; and*

6                   “(B) *which is—*

7                           “(i) *recognized by Papa Ola Lokahi for*  
8                           *the purpose of planning, conducting, or ad-*  
9                           *ministering programs (or portions of pro-*  
10                           *grams) authorized under this Act for the*  
11                           *benefit of Native Hawaiians; and*

12                           “(ii) *a public or nonprofit private en-*  
13                           *tity.*

14           “(9) *OFFICE OF HAWAIIAN AFFAIRS.*—*The terms*  
15           *‘Office of Hawaiian Affairs’ and ‘OHA’ mean the*  
16           *governmental entity established under Article XII,*  
17           *sections 5 and 6 of the Hawaii State Constitution*  
18           *and charged with the responsibility to formulate pol-*  
19           *icy relating to the affairs of Native Hawaiians.*

20           “(10) *PAPA OLA LOKAHI.*—

21                   “(A) *IN GENERAL.*—*The term ‘Papa Ola*  
22                   *Lokahi’ means an organization that is composed*  
23                   *of public agencies and private organizations fo-*  
24                   *cus on improving the health status of Native*

1           *Hawaiians. Board members of such organization*  
2           *may include representation from—*

3                     “(i) *E Ola Mau*;

4                     “(ii) *the Office of Hawaiian Affairs of*  
5                     *the State of Hawaii*;

6                     “(iii) *Alu Like, Inc.*;

7                     “(iv) *the University of Hawaii*;

8                     “(v) *the Hawaii State Department of*  
9                     *Health*;

10                    “(vi) *the Kamehameha Schools, or*  
11                    *other Native Hawaiian organization re-*  
12                    *sponsible for the administration of the Na-*  
13                    *tive Hawaiian Health Scholarship Pro-*  
14                    *gram*;

15                    “(vii) *the Hawaii State Primary Care*  
16                    *Association, or Native Hawaiian Health*  
17                    *Centers whose patient populations are pre-*  
18                    *dominantly Native Hawaiian*;

19                    “(viii) *Ahahui O Na Kauka, the Na-*  
20                    *tive Hawaiian Physicians Association*;

21                    “(ix) *Ho‘ola Lahui Hawaii, or a*  
22                    *health care system serving the islands of*  
23                    *Kaua‘i or Ni‘ihau, and which may be com-*  
24                    *posed of as many health care centers as are*

1           *necessary to meet the health care needs of*  
2           *the Native Hawaiians of those islands;*

3           “(x) *Ke Ola Mamo, or a health care*  
4           *system serving the island of O‘ahu and*  
5           *which may be composed of as many health*  
6           *care centers as are necessary to meet the*  
7           *health care needs of the Native Hawaiians*  
8           *of that island;*

9           “(xi) *Na Pu‘uwai or a health care sys-*  
10          *tem serving the islands of Moloka‘i or*  
11          *Lana‘i, and which may be composed of as*  
12          *many health care centers as are necessary to*  
13          *meet the health care needs of the Native Ha-*  
14          *waiians of those islands;*

15          “(xii) *Hui No Ke Ola Pono, or a*  
16          *health care system serving the island of*  
17          *Maui, and which may be composed of as*  
18          *many health care centers as are necessary to*  
19          *meet the health care needs of the Native Ha-*  
20          *waiians of that island;*

21          “(xiii) *Hui Malama Ola Na ‘Oiwi, or*  
22          *a health care system serving the island of*  
23          *Hawaii, and which may be composed of as*  
24          *many health care centers as are necessary to*

1           *meet the health care needs of the Native Ha-*  
2           *waiians of that island;*

3           *“(xiv) other Native Hawaiian health*  
4           *care systems as certified and recognized by*  
5           *Papa Ola Lokahi in accordance with this*  
6           *Act; and*

7           *“(xv) such other member organizations*  
8           *as the Board of Papa Ola Lokahi will*  
9           *admit from time to time, based upon satis-*  
10          *factory demonstration of a record of con-*  
11          *tribution to the health and well-being of Na-*  
12          *tive Hawaiians.*

13          *“(B) LIMITATION.—Such term does not in-*  
14          *clude any organization described in subpara-*  
15          *graph (A) if the Secretary determines that such*  
16          *organization has not developed a mission state-*  
17          *ment with clearly defined goals and objectives for*  
18          *the contributions the organization will make to*  
19          *the Native Hawaiian health care systems, the*  
20          *national policy as set forth in section 4, and an*  
21          *action plan for carrying out those goals and ob-*  
22          *jectives.*

23          *“(11) PRIMARY HEALTH SERVICES.—The term*  
24          *‘primary health services’ means—*



1           “(A) services of physicians, physicians’ as-  
2           sistants, nurse practitioners, and other health  
3           professionals;

4           “(B) diagnostic laboratory and radiologic  
5           services;

6           “(C) preventive health services including  
7           perinatal services, well child services, family  
8           planning services, nutrition services, home health  
9           services, and, generally, all those services associ-  
10          ated with enhanced health and wellness.

11          “(D) emergency medical services;

12          “(E) transportation services as required for  
13          adequate patient care;

14          “(F) preventive dental services;

15          “(G) pharmaceutical and medicament serv-  
16          ices;

17          “(H) primary care services that may lead  
18          to specialty or tertiary care; and

19          “(I) complimentary healing practices, in-  
20          cluding those performed by traditional Native  
21          Hawaiian healers.

22          “(12) SECRETARY.—The term ‘Secretary’ means  
23          the Secretary of Health and Human Services.

1           “(13) *TRADITIONAL NATIVE HAWAIIAN HEAL-*  
 2           *ER.—The term ‘traditional Native Hawaiian healer’*  
 3           *means a practitioner—*

4                   “(A) *who—*

5                           “(i) *is of Native Hawaiian ancestry;*  
 6                   *and*

7                           “(ii) *has the knowledge, skills, and ex-*  
 8                   *perience in direct personal health care of*  
 9                   *individuals; and*

10                   “(B) *whose knowledge, skills, and experience*  
 11           *are based on demonstrated learning of Native*  
 12           *Hawaiian healing practices acquired by—*

13                           “(i) *direct practical association with*  
 14                   *Native Hawaiian elders; and*

15                           “(ii) *oral traditions transmitted from*  
 16                   *generation to generation.*

17   **“SEC. 4. DECLARATION OF NATIONAL NATIVE HAWAIIAN**  
 18                   **HEALTH POLICY.**

19           “(a) *CONGRESS.—Congress hereby declares that it is*  
 20   *the policy of the United States in fulfillment of its special*  
 21   *responsibilities and legal obligations to the indigenous peo-*  
 22   *ples of Hawaii resulting from the unique and historical re-*  
 23   *lationship between the United States and the indigenous*  
 24   *peoples of Hawaii—*

1           “(1) to raise the health status of Native Hawai-  
2           ians to the highest possible health level; and

3           “(2) to provide existing Native Hawaiian health  
4           care programs with all resources necessary to effec-  
5           tuate this policy.

6           “(b) *INTENT OF CONGRESS.*—It is the intent of the  
7 Congress that—

8           “(1) health care programs having a dem-  
9           onstrated effect of substantially reducing or elimi-  
10          nating the over-representation of Native Hawaiians  
11          among those suffering from chronic and acute disease  
12          and illness and addressing the health needs, including  
13          perinatal, early child development, and family-based  
14          health education, of Native Hawaiians shall be estab-  
15          lished and implemented; and

16          “(2) the Nation raise the health status of Native  
17          Hawaiians by the year 2010 to at least the levels set  
18          forth in the goals contained within *Healthy People*  
19          2010 or successor standards and to incorporate with-  
20          in health programs, activities defined and identified  
21          by *Kanaka Maoli* which may include—

22                  “(A) incorporating and supporting the inte-  
23                  gration of cultural approaches to health and  
24                  well-being, including programs using traditional

1 *practices relating to the atmosphere (lewa lani),*  
2 *land (ʻaina), water (wai), or ocean (kai);*

3 *“(B) increasing the number of health and*  
4 *allied-health care providers who are trained to*  
5 *provide culturally competent care to Native Ha-*  
6 *waiians;*

7 *“(C) increasing the use of traditional Na-*  
8 *tive Hawaiian foods in peoples’ diets and die-*  
9 *tary preferences including those of students and*  
10 *the use of these traditional foods in school feeding*  
11 *programs;*

12 *“(D) identifying and instituting Native*  
13 *Hawaiian cultural values and practices within*  
14 *the ‘corporate cultures’ of organizations and*  
15 *agencies providing health services to Native Ha-*  
16 *waiians;*

17 *“(E) facilitating the provision of Native*  
18 *Hawaiian healing practices by Native Hawaiian*  
19 *healers for those clients desiring such assistance;*  
20 *and*

21 *“(F) supporting training and education ac-*  
22 *tivities and programs in traditional Native Ha-*  
23 *waiian healing practices by Native Hawaiian*  
24 *healers.*

1       “(c) *REPORT.*—*The Secretary shall submit to the*  
 2 *President, for inclusion in each report required to be trans-*  
 3 *mitted to Congress under section 12, a report on the*  
 4 *progress made towards meeting the National policy as set*  
 5 *forth in this section.*

6       “**SEC. 5. COMPREHENSIVE HEALTH CARE MASTER PLAN**  
 7                                   **FOR NATIVE HAWAIIANS.**

8       “(a) *DEVELOPMENT.*—

9               “(1) *IN GENERAL.*—*The Secretary may make a*  
 10 *grant to, or enter into a contract with, Papa Ola*  
 11 *Lokahi for the purpose of coordinating, implementing*  
 12 *and updating a Native Hawaiian comprehensive*  
 13 *health care master plan designed to promote com-*  
 14 *prehensive health promotion and disease prevention*  
 15 *services and to maintain and improve the health sta-*  
 16 *tus of Native Hawaiians, and to support community-*  
 17 *based initiatives that are reflective of holistic ap-*  
 18 *proaches to health.*

19               “(2) *CONSULTATION.*—

20               “(A) *IN GENERAL.*—*Papa Ola Lokahi and*  
 21 *the Office of Hawaiian Affairs shall consult with*  
 22 *the Native Hawaiian health care systems, Native*  
 23 *Hawaiian health centers, and the Native Hawai-*  
 24 *ian community in carrying out this section.*

1           “(B) *MEMORANDA OF UNDERSTANDING.—*  
2           *Papa Ola Lokahi and the Office of Hawaiian*  
3           *Affairs may enter into memoranda of under-*  
4           *standing or agreement for the purposes of acquir-*  
5           *ing joint funding and for other issues as may be*  
6           *necessary to accomplish the objectives of this sec-*  
7           *tion.*

8           “(3) *HEALTH CARE FINANCING STUDY RE-*  
9           *PORT.—Not later than 18 months after the date of en-*  
10          *actment of this Act, Papa Ola Lokahi in cooperation*  
11          *with the Office of Hawaiian Affairs and other appro-*  
12          *priate agencies of the State of Hawaii, including the*  
13          *Department of Health and the Department of Human*  
14          *Services and the Native Hawaiian health care sys-*  
15          *tems and Native Hawaiian health centers, shall sub-*  
16          *mit to Congress a report detailing the impact of cur-*  
17          *rent Federal and State health care financing mecha-*  
18          *nisms and policies on the health and well-being of*  
19          *Native Hawaiians. Such report shall include—*

20                 “(A) *information concerning the impact of*  
21                 *cultural competency, risk assessment data, eligi-*  
22                 *bility requirements and exemptions, and reim-*  
23                 *bursement policies and capitation rates currently*  
24                 *in effect for service providers;*

1           “(B) *any other such information as may be*  
 2           *important to improving the health status of Na-*  
 3           *tive Hawaiians as such information relates to*  
 4           *health care financing including barriers to*  
 5           *health care; and*

6           “(C) *the recommendations for submission to*  
 7           *the Secretary for review and consultation with*  
 8           *Native Hawaiians.*

9           “(b) *AUTHORIZATION OF APPROPRIATIONS.—There*  
 10          *are authorized to be appropriated such sums as may be nec-*  
 11          *essary to carry out subsection (a).*

12          “**SEC. 6. FUNCTIONS OF PAPA OLA LOKAHI AND OFFICE OF**  
 13                 **HAWAIIAN AFFAIRS.**

14          “(a) *RESPONSIBILITY.—Papa Ola Lokahi shall be re-*  
 15          *sponsible for the—*

16                 “(1) *coordination, implementation, and updat-*  
 17                 *ing, as appropriate, of the comprehensive health care*  
 18                 *master plan developed pursuant to section 5;*

19                 “(2) *training for the persons described in sub-*  
 20                 *paragraphs (B) and (C) of section 7(c)(1);*

21                 “(3) *identification of and research into the dis-*  
 22                 *eases that are most prevalent among Native Hawai-*  
 23                 *ians, including behavioral, biomedical, epidemiolog-*  
 24                 *ical, and health services;*

1           “(4) *development and maintenance of an institu-*  
2           *tional review board for all research projects involving*  
3           *all aspects of Native Hawaiian health, including be-*  
4           *havioral, biomedical, epidemiological, and health*  
5           *services studies; and*

6           “(5) *the maintenance of an action plan outlining*  
7           *the contributions that each member organization of*  
8           *Papa Ola Lokahi will make in carrying out the pol-*  
9           *icy of this Act.*

10          “(b) *SPECIAL PROJECT FUNDS.—Papa Ola Lokahi*  
11          *may receive special project funds that may be appropriated*  
12          *for the purpose of research on the health status of Native*  
13          *Hawaiians or for the purpose of addressing the health care*  
14          *needs of Native Hawaiians.*

15          “(c) *CLEARINGHOUSE.—*

16                 “(1) *IN GENERAL.—Papa Ola Lokahi shall serve*  
17                 *as a clearinghouse for—*

18                         “(A) *the collection and maintenance of data*  
19                         *associated with the health status of Native Ha-*  
20                         *waiians;*

21                         “(B) *the identification and research into*  
22                         *diseases affecting Native Hawaiians;*

23                         “(C) *the availability of Native Hawaiian*  
24                         *project funds, research projects and publications;*



1           “(D) the collaboration of research in the  
2           area of Native Hawaiian health; and

3           “(E) the timely dissemination of informa-  
4           tion pertinent to the Native Hawaiian health  
5           care systems.

6           “(2) CONSULTATION.—The Secretary shall pro-  
7           vide Papa Ola Lokahi and the Office of Hawaiian Af-  
8           fairs, at least once annually, an accounting of funds  
9           and services provided to States and to nonprofit  
10          groups and organizations from the Department for  
11          the purposes set forth in section 4. Such accounting  
12          shall include—

13               “(A) the amount of funds expended explic-  
14               itly for and benefiting Native Hawaiians;

15               “(B) the number of Native Hawaiians im-  
16               pacted by these funds;

17               “(C) the identification of collaborations  
18               made with Native Hawaiian groups and organi-  
19               zations in the expenditure of these funds; and

20               “(D) the amount of funds used for Federal  
21               administrative purposes and for the provision of  
22               direct services to Native Hawaiians.

23          “(d) FISCAL ALLOCATION AND COORDINATION OF PRO-  
24          GRAMS AND SERVICES.—

1           “(1) *RECOMMENDATIONS.*—*Papa Ola Lokahi*  
2           *shall provide annual recommendations to the Sec-*  
3           *retary with respect to the allocation of all amounts*  
4           *appropriated under this Act.*

5           “(2) *COORDINATION.*—*Papa Ola Lokahi shall, to*  
6           *the maximum extent possible, coordinate and assist*  
7           *the health care programs and services provided to Na-*  
8           *tive Hawaiians.*

9           “(3) *REPRESENTATION ON COMMISSION.*—*The*  
10          *Secretary, in consultation with Papa Ola Lokahi,*  
11          *shall make recommendations for Native Hawaiian*  
12          *representation on the President’s Advisory Commis-*  
13          *sion on Asian Americans and Pacific Islanders.*

14          “(e) *TECHNICAL SUPPORT.*—*Papa Ola Lokahi may*  
15          *act as a statewide infrastructure to provide technical sup-*  
16          *port and coordination of training and technical assistance*  
17          *to the Native Hawaiian health care systems and to Native*  
18          *Hawaiian health centers.*

19          “(f) *RELATIONSHIPS WITH OTHER AGENCIES.*—

20                 “(1) *AUTHORITY.*—*Papa Ola Lokahi may enter*  
21                 *into agreements or memoranda of understanding with*  
22                 *relevant institutions, agencies or organizations that*  
23                 *are capable of providing health-related resources or*  
24                 *services to Native Hawaiians and the Native Hawai-*  
25                 *ian health care systems or of providing resources or*

1 *services for the implementation of the National policy*  
2 *as set forth in section 4.*

3 “(2) *HEALTH CARE FINANCING.*—

4 “(A) *FEDERAL CONSULTATION.*—*Federal*  
5 *agencies providing health care financing and*  
6 *carrying out health care programs, including the*  
7 *Health Care Financing Administration, shall*  
8 *consult with Native Hawaiians and organiza-*  
9 *tions providing health care services to Native*  
10 *Hawaiians prior to the adoption of any policy*  
11 *or regulation that may impact on the provision*  
12 *of services or health insurance coverage. Such*  
13 *consultation shall include the identification of*  
14 *the impact of any proposed policy, rule, or regu-*  
15 *lation.*

16 “(B) *STATE CONSULTATION.*—*The State of*  
17 *Hawaii shall engage in meaningful consultation*  
18 *with Native Hawaiians and organizations pro-*  
19 *viding health care services to Native Hawaiians*  
20 *in the State of Hawaii prior to making any*  
21 *changes or initiating new programs.*

22 “(C) *CONSULTATION ON FEDERAL HEALTH*  
23 *INSURANCE PROGRAMS.*

24 “(i) *IN GENERAL.*—*The Office of Ha-*  
25 *waiian Affairs, in collaboration with Papa*

1            *Ola Lokahi, may develop consultative, con-*  
2            *tractual or other arrangements, including*  
3            *memoranda of understanding or agreement,*  
4            *with—*

5                    *“(I) the Health Care Financing*  
6                    *Administration;*

7                    *“(II) the agency of the State of*  
8                    *Hawaii that administers or supervises*  
9                    *the administration of the State plan or*  
10                   *waiver approved under title XVIII,*  
11                   *XIX, or XXI of the Social Security Act*  
12                   *for the payment of all or a part of the*  
13                   *health care services provided to Native*  
14                   *Hawaiians who are eligible for medical*  
15                   *assistance under the State plan or*  
16                   *waiver; or*

17                   *“(III) any other Federal agency*  
18                   *or agencies providing full or partial*  
19                   *health insurance to Native Hawaiians.*

20                   *“(ii) CONTENTS OF ARRANGEMENTS.—*  
21                   *Arrangements under clause (i) may*  
22                   *address—*

23                   *“(I) appropriate reimbursement*  
24                   *for health care services including capi-*  
25                   *tation rates and fee-for-service rates for*

1 *Native Hawaiians who are entitled to*  
2 *or eligible for insurance;*

3 *“(II) the scope of services; or*

4 *“(III) other matters that would*  
5 *enable Native Hawaiians to maximize*  
6 *health insurance benefits provided by*  
7 *Federal and State health insurance*  
8 *programs.*

9 *“(3) TRADITIONAL HEALERS.—The provision of*  
10 *health services under any program operated by the*  
11 *Department or another Federal agency including the*  
12 *Department of Veterans Affairs, may include the serv-*  
13 *ices of ‘traditional Native Hawaiian healers’ as de-*  
14 *finied in this Act or ‘traditional healers’ providing*  
15 *‘traditional health care practices’ as defined in sec-*  
16 *tion 4(r) of Public Law 94–437. Such services shall*  
17 *be exempt from national accreditation reviews, in-*  
18 *cluding reviews conducted by the Joint Accreditation*  
19 *Commission on Health Organizations and the Reha-*  
20 *ilitation Accreditation Commission.*

21 **“SEC. 7. NATIVE HAWAIIAN HEALTH CARE.**

22 *“(a) COMPREHENSIVE HEALTH PROMOTION, DISEASE*  
23 *PREVENTION, AND PRIMARY HEALTH SERVICES.—*

24 *“(1) GRANTS AND CONTRACTS.—The Secretary,*  
25 *in consultation with Papa Ola Lokahi, may make*

1 grants to, or enter into contracts with, any qualified  
2 entity for the purpose of providing comprehensive  
3 health promotion and disease prevention services, as  
4 well as primary health services, to Native Hawaiians  
5 who desire and are committed to bettering their own  
6 health.

7 “(2) *PREFERENCE.*—In making grants and en-  
8 tering into contracts under this subsection, the Sec-  
9 retary shall give preference to Native Hawaiian  
10 health care systems and Native Hawaiian organiza-  
11 tions and, to the extent feasible, health promotion and  
12 disease prevention services shall be performed through  
13 Native Hawaiian health care systems.

14 “(3) *QUALIFIED ENTITY.*—An entity is a quali-  
15 fied entity for purposes of paragraph (1) if the entity  
16 is a Native Hawaiian health care system or a Native  
17 Hawaiian Center.

18 “(4) *LIMITATION ON NUMBER OF ENTITIES.*—The  
19 Secretary may make a grant to, or enter into a con-  
20 tract with, not more than 8 Native Hawaiian health  
21 care systems under this subsection during any fiscal  
22 year.

23 “(b) *PLANNING GRANT OR CONTRACT.*—In addition to  
24 grants and contracts under subsection (a), the Secretary  
25 may make a grant to, or enter into a contract with, Papa

1 *Ola Lokahi for the purpose of planning Native Hawaiian*  
2 *health care systems to serve the health needs of Native Ha-*  
3 *waiian communities on each of the islands of O‘ahu,*  
4 *Moloka‘i, Maui, Hawai‘i, Lana‘i, Kaua‘i, and Ni‘ihau in*  
5 *the State of Hawaii.*

6 “(c) *SERVICES TO BE PROVIDED.*—

7 “(1) *IN GENERAL.*—*Each recipient of funds*  
8 *under subsection (a) shall ensure that the following*  
9 *services either are provided or arranged for:*

10 “(A) *Outreach services to inform Native*  
11 *Hawaiians of the availability of health services.*

12 “(B) *Education in health promotion and*  
13 *disease prevention of the Native Hawaiian popu-*  
14 *lation by, wherever possible, Native Hawaiian*  
15 *health care practitioners, community outreach*  
16 *workers, counselors, and cultural educators.*

17 “(C) *Services of physicians, physicians’ as-*  
18 *sistants, nurse practitioners or other health and*  
19 *allied-health professionals.*

20 “(D) *Immunizations.*

21 “(E) *Prevention and control of diabetes,*  
22 *high blood pressure, and otitis media.*

23 “(F) *Pregnancy and infant care.*

24 “(G) *Improvement of nutrition.*

1           “(H) Identification, treatment, control, and  
2 reduction of the incidence of preventable illnesses  
3 and conditions endemic to Native Hawaiians.

4           “(I) Collection of data related to the preven-  
5 tion of diseases and illnesses among Native Ha-  
6 waiians.

7           “(J) Services within the meaning of the  
8 terms ‘health promotion’, ‘disease prevention’,  
9 and ‘primary health services’, as such terms are  
10 defined in section 3, which are not specifically  
11 referred to in subsection (a).

12           “(K) Support of culturally appropriate ac-  
13 tivities enhancing health and wellness including  
14 land-based, water-based, ocean-based, and spir-  
15 itually-based projects and programs.

16           “(2) TRADITIONAL HEALERS.—The health care  
17 services referred to in paragraph (1) which are pro-  
18 vided under grants or contracts under subsection (a)  
19 may be provided by traditional Native Hawaiian  
20 healers.

21           “(d) FEDERAL TORT CLAIMS ACT.—Individuals who  
22 provide medical, dental, or other services referred to in sub-  
23 section (a)(1) for Native Hawaiian health care systems, in-  
24 cluding providers of traditional Native Hawaiian healing  
25 services, shall be treated as if such individuals were mem-



1 *bers of the Public Health Service and shall be covered under*  
2 *the provisions of section 224 of the Public Health Service*  
3 *Act.*

4       “(e) *SITE FOR OTHER FEDERAL PAYMENTS.—A Na-*  
5 *tive Hawaiian health care system that receives funds under*  
6 *subsection (a) shall provide a designated area and appro-*  
7 *priate staff to serve as a Federal loan repayment facility.*  
8 *Such facility shall be designed to enable health and allied-*  
9 *health professionals to remit payments with respect to loans*  
10 *provided to such professionals under any Federal loan pro-*  
11 *gram.*

12       “(f) *RESTRICTION ON USE OF GRANT AND CONTRACT*  
13 *FUNDS.—The Secretary may not make a grant to, or enter*  
14 *into a contract with, an entity under subsection (a) unless*  
15 *the entity agrees that amounts received under such grant*  
16 *or contract will not, directly or through contract, be*  
17 *expended—*

18               “(1) *for any services other than the services de-*  
19 *scribed in subsection (c)(1); or*

20               “(2) *to purchase or improve real property (other*  
21 *than minor remodeling of existing improvements to*  
22 *real property) or to purchase major medical equip-*  
23 *ment.*

24       “(g) *LIMITATION ON CHARGES FOR SERVICES.—The*  
25 *Secretary may not make a grant to, or enter into a contract*

1 *with, an entity under subsection (a) unless the entity agrees*  
2 *that, whether health services are provided directly or*  
3 *through contract—*

4           “(1) *health services under the grant or contract*  
5 *will be provided without regard to ability to pay for*  
6 *the health services; and*

7           “(2) *the entity will impose a charge for the deliv-*  
8 *ery of health services, and such charge—*

9                   “(A) *will be made according to a schedule*  
10 *of charges that is made available to the public;*  
11 *and*

12                   “(B) *will be adjusted to reflect the income*  
13 *of the individual involved.*

14           “(h) *AUTHORIZATION OF APPROPRIATIONS.—*

15                   “(1) *GENERAL GRANTS.—There is authorized to*  
16 *be appropriated such sums as may be necessary for*  
17 *each of fiscal years 2001 through 2011 to carry out*  
18 *subsection (a).*

19                   “(2) *PLANNING GRANTS.—There is authorized to*  
20 *be appropriated such sums as may be necessary for*  
21 *each of fiscal years 2001 through 2011 to carry out*  
22 *subsection (b).*

1 **“SEC. 8. ADMINISTRATIVE GRANT FOR PAPA OLA LOKAHI.**

2       “(a) *IN GENERAL.*—*In addition to any other grant or*  
3 *contract under this Act, the Secretary may make grants to,*  
4 *or enter into contracts with, Papa Ola Lokahi for—*

5               “(1) *coordination, implementation, and updat-*  
6 *ing (as appropriate) of the comprehensive health care*  
7 *master plan developed pursuant to section 5;*

8               “(2) *training for the persons described section*  
9 *7(c)(1);*

10              “(3) *identification of and research into the dis-*  
11 *eases that are most prevalent among Native Hawai-*  
12 *ians, including behavioral, biomedical, epidemiologic,*  
13 *and health services;*

14              “(4) *the maintenance of an action plan outlining*  
15 *the contributions that each member organization of*  
16 *Papa Ola Lokahi will make in carrying out the pol-*  
17 *icy of this Act;*

18              “(5) *a clearinghouse function for—*

19                      “(A) *the collection and maintenance of data*  
20 *associated with the health status of Native Ha-*  
21 *waiians;*

22                      “(B) *the identification and research into*  
23 *diseases affecting Native Hawaiians; and*

24                      “(C) *the availability of Native Hawaiian*  
25 *project funds, research projects and publications;*

1           “(6) *the establishment and maintenance of an*  
2           *institutional review board for all health-related re-*  
3           *search involving Native Hawaiians;*

4           “(7) *the coordination of the health care programs*  
5           *and services provided to Native Hawaiians; and*

6           “(8) *the administration of special project funds.*

7           “(b) *AUTHORIZATION OF APPROPRIATIONS.—There is*  
8           *authorized to be appropriated such sums as may be nec-*  
9           *essary for each of fiscal years 2001 through 2011 to carry*  
10          *out subsection (a).*

11          “**SEC. 9. ADMINISTRATION OF GRANTS AND CONTRACTS.**

12          “(a) *TERMS AND CONDITIONS.—The Secretary shall*  
13          *include in any grant made or contract entered into under*  
14          *this Act such terms and conditions as the Secretary con-*  
15          *siders necessary or appropriate to ensure that the objectives*  
16          *of such grant or contract are achieved.*

17          “(b) *PERIODIC REVIEW.—The Secretary shall periodi-*  
18          *cally evaluate the performance of, and compliance with,*  
19          *grants and contracts under this Act.*

20          “(c) *ADMINISTRATIVE REQUIREMENTS.—The Sec-*  
21          *retary may not make a grant or enter into a contract under*  
22          *this Act with an entity unless the entity—*

23                  “(1) *agrees to establish such procedures for fiscal*  
24                  *control and fund accounting as may be necessary to*

1       *ensure proper disbursement and accounting with re-*  
2       *spect to the grant or contract;*

3             “(2) agrees to ensure the confidentiality of  
4       *records maintained on individuals receiving health*  
5       *services under the grant or contract;*

6             “(3) with respect to providing health services to  
7       *any population of Native Hawaiians, a substantial*  
8       *portion of which has a limited ability to speak the*  
9       *English language—*

10            “(A) has developed and has the ability to  
11       *carry out a reasonable plan to provide health*  
12       *services under the grant or contract through in-*  
13       *dividuals who are able to communicate with the*  
14       *population involved in the language and cultural*  
15       *context that is most appropriate; and*

16            “(B) has designated at least 1 individual,  
17       *fluent in both English and the appropriate lan-*  
18       *guage, to assist in carrying out the plan;*

19            “(4) with respect to health services that are cov-  
20       *ered under programs under titles XVIII, XIX, or XXI*  
21       *of the Social Security Act, including any State plan,*  
22       *or under any other Federal health insurance plan—*

23            “(A) if the entity will provide under the  
24       *grant or contract any such health services*  
25       *directly—*

1           “(i) the entity has entered into a par-  
2           ticipation agreement under such plans; and

3           “(ii) the entity is qualified to receive  
4           payments under such plan; and

5           “(B) if the entity will provide under the  
6           grant or contract any such health services  
7           through a contract with an organization—

8           “(i) the organization has entered into  
9           a participation agreement under such plan;  
10          and

11          “(ii) the organization is qualified to  
12          receive payments under such plan; and

13          “(5) agrees to submit to the Secretary and to  
14          Papa Ola Lokahi an annual report that describes the  
15          use and costs of health services provided under the  
16          grant or contract (including the average cost of health  
17          services per user) and that provides such other infor-  
18          mation as the Secretary determines to be appropriate.

19          “(d) *CONTRACT EVALUATION.*—

20                 “(1) *DETERMINATION OF NONCOMPLIANCE.*—If,  
21                 as a result of evaluations conducted by the Secretary,  
22                 the Secretary determines that an entity has not com-  
23                 plied with or satisfactorily performed a contract en-  
24                 tered into under section 7, the Secretary shall, prior  
25                 to renewing such contract, attempt to resolve the

1 *areas of noncompliance or unsatisfactory performance*  
2 *and modify such contract to prevent future occur-*  
3 *rences of such noncompliance or unsatisfactory per-*  
4 *formance.*

5 “(2) *NONRENEWAL.*—*If the Secretary determines*  
6 *that the noncompliance or unsatisfactory performance*  
7 *described in paragraph (1) with respect to an entity*  
8 *cannot be resolved and prevented in the future, the*  
9 *Secretary shall not renew the contract with such enti-*  
10 *ty and may enter into a contract under section 7*  
11 *with another entity referred to in subsection (a)(3) of*  
12 *such section that provides services to the same popu-*  
13 *lation of Native Hawaiians which is served by the en-*  
14 *tity whose contract is not renewed by reason of this*  
15 *paragraph.*

16 “(3) *CONSIDERATION OF RESULTS.*—*In deter-*  
17 *mining whether to renew a contract entered into with*  
18 *an entity under this Act, the Secretary shall consider*  
19 *the results of the evaluations conducted under this sec-*  
20 *tion.*

21 “(4) *APPLICATION OF FEDERAL LAWS.*—*All con-*  
22 *tracts entered into by the Secretary under this Act*  
23 *shall be in accordance with all Federal contracting*  
24 *laws and regulations, except that, in the discretion of*  
25 *the Secretary, such contracts may be negotiated with-*

1        *out advertising and may be exempted from the provi-*  
2        *sions of the Act of August 24, 1935 (40 U.S.C. 270a*  
3        *et seq.).*

4            “(5) *PAYMENTS.*—*Payments made under any*  
5        *contract entered into under this Act may be made in*  
6        *advance, by means of reimbursement, or in install-*  
7        *ments and shall be made on such conditions as the*  
8        *Secretary deems necessary to carry out the purposes*  
9        *of this Act.*

10        “(e) *REPORT.*—

11            “(1) *IN GENERAL.*—*For each fiscal year during*  
12        *which an entity receives or expends funds pursuant to*  
13        *a grant or contract under this Act, such entity shall*  
14        *submit to the Secretary and to Papa Ola Lokahi an*  
15        *annual report—*

16            “(A) *on the activities conducted by the enti-*  
17        *ty under the grant or contract;*

18            “(B) *on the amounts and purposes for*  
19        *which Federal funds were expended; and*

20            “(C) *containing such other information as*  
21        *the Secretary may request.*

22            “(2) *AUDITS.*—*The reports and records of any*  
23        *entity concerning any grant or contract under this*  
24        *Act shall be subject to audit by the Secretary, the In-*  
25        *pector General of the Department of Health and*



1        *Human Services, and the Comptroller General of the*  
 2        *United States.*

3        “(f) *ANNUAL PRIVATE AUDIT.*—*The Secretary shall*  
 4        *allow as a cost of any grant made or contract entered into*  
 5        *under this Act the cost of an annual private audit con-*  
 6        *ducted by a certified public accountant.*

7        **“SEC. 10. ASSIGNMENT OF PERSONNEL.**

8        “(a) *IN GENERAL.*—*The Secretary may enter into an*  
 9        *agreement with any entity under which the Secretary may*  
 10        *assign personnel of the Department of Health and Human*  
 11        *Services with expertise identified by such entity to such en-*  
 12        *tity on detail for the purposes of providing comprehensive*  
 13        *health promotion and disease prevention services to Native*  
 14        *Hawaiians.*

15        “(b) *APPLICABLE FEDERAL PERSONNEL PROVI-*  
 16        *SIONS.*—*Any assignment of personnel made by the Sec-*  
 17        *retary under any agreement entered into under subsection*  
 18        *(a) shall be treated as an assignment of Federal personnel*  
 19        *to a local government that is made in accordance with sub-*  
 20        *chapter VI of chapter 33 of title 5, United States Code.*

21        **“SEC. 11. NATIVE HAWAIIAN HEALTH SCHOLARSHIPS AND**  
 22        ***FELLOWSHIPS.***

23        “(a) *ELIGIBILITY.*—*Subject to the availability of*  
 24        *amounts appropriated under subsection (c), the Secretary*  
 25        *shall provide funds through a direct grant or a cooperative*

1 *agreement to Kamehameha Schools or another Native Ha-*  
 2 *waiian organization or health care organization with expe-*  
 3 *rience in the administration of educational scholarships or*  
 4 *placement services for the purpose of providing scholarship*  
 5 *assistance to students who—*

6           “(1) *meet the requirements of section 338A of the*  
 7 *Public Health Service Act, except for assistance as*  
 8 *provided for under subsection (b)(2); and*

9           “(2) *are Native Hawaiians.*

10          “(b) *PRIORITY.—A priority for scholarships under*  
 11 *subsection (a) may be provided to employees of the Native*  
 12 *Hawaiian Health Care Systems and the Native Hawaiian*  
 13 *Health Centers.*

14          “(c) *TERMS AND CONDITIONS.—*

15               “(1) *IN GENERAL.—The scholarship assistance*  
 16 *under subsection (a) shall be provided under the same*  
 17 *terms and subject to the same conditions, regulations,*  
 18 *and rules as apply to scholarship assistance provided*  
 19 *under section 338A of the Public Health Service Act*  
 20 *(except as provided for in paragraph (2)), except*  
 21 *that—*

22                       “(A) *the provision of scholarships in each*  
 23 *type of health care profession training shall cor-*  
 24 *respond to the need for each type of health care*

1           *professional to serve the Native Hawaiian com-*  
2           *munity as identified by Papa Ola Lokahi;*

3           “(B) *to the maximum extent practicable,*  
4           *the Secretary shall select scholarship recipients*  
5           *from a list of eligible applicants submitted by the*  
6           *Kamehameha Schools or the Native Hawaiian*  
7           *organization administering the program;*

8           “(C) *the obligated service requirement for*  
9           *each scholarship recipient (except for those re-*  
10           *ceiving assistance under paragraph (2)) shall be*  
11           *fulfilled through service, in order of priority,*  
12           *in—*

13           “(i) *any one of the Native Hawaiian*  
14           *health care systems or Native Hawaiian*  
15           *health centers;*

16           “(ii) *health professions shortage areas,*  
17           *medically underserved areas, or geographic*  
18           *areas or facilities similarly designated by*  
19           *the United States Public Health Service in*  
20           *the State of Hawaii; or*

21           “(iii) *a geographical area, facility, or*  
22           *organization that serves a significant Na-*  
23           *tive Hawaiian population;*

1           “(D) the scholarship’s placement service  
2 shall assign Native Hawaiian scholarship recipi-  
3 ents to appropriate sites for service.

4           “(E) the provision of counseling, retention  
5 and other support services shall not be limited to  
6 scholarship recipients, but shall also include re-  
7 cipients of other scholarship and financial aid  
8 programs enrolled in appropriate health profes-  
9 sions training programs.

10           “(F) financial assistance may be provided  
11 to scholarship recipients in those health profes-  
12 sions designated in such section 338A of the Pub-  
13 lic Health Service Act while they are fulfilling  
14 their service requirement in any one of the Na-  
15 tive Hawaiian health care systems or community  
16 health centers.

17           “(2) FELLOWSHIPS.—Financial assistance  
18 through fellowships may be provided to Native Ha-  
19 waiian community health representatives, outreach  
20 workers, and health program administrators in pro-  
21 fessional training programs, and to Native Hawai-  
22 ians in certificated programs provided by traditional  
23 Native Hawaiian healers in any of the traditional  
24 Native Hawaiian healing practices including lomi-  
25 lomi, la‘au lapa‘au, and ho‘oponopono. Such assist-

1        *ance may include a stipend or reimbursement for*  
2        *costs associated with participation in the program.*

3            “(3) *RIGHTS AND BENEFITS.*—*Scholarship re-*  
4        *ipients in health professions designated in section*  
5        *338A of the Public Health Service Act while fulfilling*  
6        *their service requirements shall have all the same*  
7        *rights and benefits of members of the National Health*  
8        *Service Corps during their period of service.*

9            “(4) *NO INCLUSION OF ASSISTANCE IN GROSS IN-*  
10        *COME.*—*Financial assistance provided under section*  
11        *11 shall be deemed ‘Qualified Scholarships’ for pur-*  
12        *poses of the section amended by section 123(a) of Pub-*  
13        *lic Law 99–514, as amended.*

14            “(d) *AUTHORIZATION OF APPROPRIATIONS.*—*There is*  
15        *authorized to be appropriated such sums as may be nec-*  
16        *essary for each of fiscal years 2001 through 2011 for the*  
17        *purpose of funding the scholarship assistance program*  
18        *under subsection (a) and fellowship assistance under sub-*  
19        *section (c)(2).*

20        **“SEC. 12. REPORT.**

21            “*The President shall, at the time the budget is sub-*  
22        *mitted under section 1105 of title 31, United States Code,*  
23        *for each fiscal year transmit to Congress a report on the*  
24        *progress made in meeting the objectives of this Act, includ-*  
25        *ing a review of programs established or assisted pursuant*

1 *to this Act and an assessment and recommendations of ad-*  
2 *ditional programs or additional assistance necessary to, at*  
3 *a minimum, provide health services to Native Hawaiians,*  
4 *and ensure a health status for Native Hawaiians, which*  
5 *are at a parity with the health services available to, and*  
6 *the health status of, the general population.*

7 **“SEC. 13. USE OF FEDERAL GOVERNMENT FACILITIES AND**  
8 **SOURCES OF SUPPLY.**

9       “(a) *IN GENERAL.*—*The Secretary shall permit orga-*  
10 *nizations that receive contracts or grants under this Act,*  
11 *in carrying out such contracts or grants, to use existing*  
12 *facilities and all equipment therein or under the jurisdic-*  
13 *tion of the Secretary under such terms and conditions as*  
14 *may be agreed upon for the use and maintenance of such*  
15 *facilities or equipment.*

16       “(b) *DONATION OF PROPERTY.*—*The Secretary may*  
17 *donate to organizations that receive contracts or grants*  
18 *under this Act any personal or real property determined*  
19 *to be in excess of the needs of the Department or the General*  
20 *Services Administration for purposes of carrying out such*  
21 *contracts or grants.*

22       “(c) *ACQUISITION OF SURPLUS PROPERTY.*—*The Sec-*  
23 *retary may acquire excess or surplus Federal Government*  
24 *personal or real property for donation to organizations that*  
25 *receive contracts or grants under this Act if the Secretary*

1 *determines that the property is appropriate for the use by*  
2 *the organization for the purpose for which a contract or*  
3 *grant is authorized under this Act.*

4 **“SEC. 14. DEMONSTRATION PROJECTS OF NATIONAL SIG-**  
5 **NIFICANCE.**

6 *“(a) AUTHORITY AND AREAS OF INTEREST.—The Sec-*  
7 *retary, in consultation with Papa Ola Lokahi, may allocate*  
8 *amounts appropriated under this Act, or any other Act, to*  
9 *carry out Native Hawaiian demonstration projects of na-*  
10 *tional significance. The areas of interest of such projects*  
11 *may include—*

12 *“(1) the development of a centralized database*  
13 *and information system relating to the health care*  
14 *status, health care needs, and wellness of Native Ha-*  
15 *waiians;*

16 *“(2) the education of health professionals, and*  
17 *other individuals in institutions of higher learning,*  
18 *in health and allied health programs in healing prac-*  
19 *tices, including Native Hawaiian healing practices;*

20 *“(3) the integration of Western medicine with*  
21 *complementary healing practices including tradi-*  
22 *tional Native Hawaiian healing practices;*

23 *“(4) the use of tele-wellness and telecommuni-*  
24 *cations in chronic disease management and health*  
25 *promotion and disease prevention;*

1           “(5) the development of appropriate models of  
2 health care for Native Hawaiians and other indige-  
3 nous peoples including the provision of culturally  
4 competent health services, related activities focusing  
5 on wellness concepts, the development of appropriate  
6 kupuna care programs, and the development of finan-  
7 cial mechanisms and collaborative relationships lead-  
8 ing to universal access to health care; and

9           “(6) the establishment of a Native Hawaiian  
10 Center of Excellence for Nursing at the University of  
11 Hawaii at Hilo, a Native Hawaiian Center of Excel-  
12 lence for Mental Health at the University of Hawaii  
13 at Manoa, a Native Hawaiian Center of Excellence  
14 for Maternal Health and Nutrition at the Waimanalo  
15 Health Center, and a Native Hawaiian Center of Ex-  
16 cellence for Research, Training, Integrated Medicine  
17 at Molokai General Hospital and a Native Hawaiian  
18 Center of Excellence for Complimentary Health and  
19 Health Education and Training at the Waianae  
20 Coast Comprehensive Health Center.

21           “(b) NONREDUCTION IN OTHER FUNDING.—The allo-  
22 cation of funds for demonstration projects under subsection  
23 (a) shall not result in a reduction in funds required by the  
24 Native Hawaiian health care systems, the Native Hawaiian  
25 Health Centers, the Native Hawaiian Health Scholarship



1 *Program, or Papa Ola Lokahi to carry out their respective*  
2 *responsibilities under this Act.*

3 **“SEC. 15. NATIONAL BIPARTISAN COMMISSION ON NATIVE**  
4 **HAWAIIAN HEALTH CARE ENTITLEMENT.**

5 *“(a) ESTABLISHMENT.—There is hereby established a*  
6 *National Bipartisan Native Hawaiian Health Care Enti-*  
7 *tlement Commission (referred to in this Act as the ‘Commis-*  
8 *sion’).*

9 *“(b) MEMBERSHIP.—The Commission shall be com-*  
10 *posed of 21 members to be appointed as follows:*

11 *“(1) CONGRESSIONAL MEMBERS.—*

12 *“(A) APPOINTMENT.—Eight members of the*  
13 *Commission shall be members of Congress, of*  
14 *which—*

15 *“(i) two members shall be from the*  
16 *House of Representatives and shall be ap-*  
17 *pointed by the Majority Leader;*

18 *“(ii) two members shall be from the*  
19 *House of Representatives and shall be ap-*  
20 *pointed by the Minority Leader;*

21 *“(iii) two members shall be from the*  
22 *Senate and shall be appointed by the Major-*  
23 *ity Leader; and*

1                   “(iv) two members shall be from the  
2                   Senate and shall be appointed by the Mi-  
3                   nority Leader.

4                   “(B) *RELEVANT COMMITTEE MEMBER-*  
5                   *SHIP.*—The members of the Commission ap-  
6                   pointed under subparagraph (A) shall each be  
7                   members of the committees of Congress that con-  
8                   sider legislation affecting the provision of health  
9                   care to Native Hawaiians and other Native  
10                  Americans.

11                  “(C) *CHAIRPERSON.*—The members of the  
12                  Commission appointed under subparagraph (A)  
13                  shall elect the chairperson and vice-chairperson  
14                  of the Commission.

15                  “(2) *HAWAIIAN HEALTH MEMBERS.*—Eleven  
16                  members of the Commission shall be appointed by  
17                  Hawaiian health entities, of which—

18                         “(A) five members shall be appointed by the  
19                         Native Hawaiian Health Care Systems;

20                         “(B) one member shall be appointed by the  
21                         Hawaii State Primary Care Association;

22                         “(C) one member shall be appointed by  
23                         Papa Ola Lokahi;

24                         “(D) one member shall be appointed by the  
25                         Native Hawaiian Health Task Force;

1           “(E) one member shall be appointed by the  
2           Office of Hawaiian Affairs; and

3           “(F) two members shall be appointed by the  
4           Association of Hawaiian Civic Clubs and shall  
5           represent Native Hawaiian populations residing  
6           in the continental United States.

7           “(3) SECRETARIAL MEMBERS.—Two members of  
8           the Commission shall be appointed by the Secretary  
9           and shall possess knowledge of Native Hawaiian  
10          health concerns and wellness.

11          “(c) TERMS.—

12           “(1) IN GENERAL.—The members of the Commis-  
13          sion shall serve for the life of the Commission.

14           “(2) INITIAL APPOINTMENT OF MEMBERS.—The  
15          members of the Commission shall be appointed under  
16          subsection (b)(1) not later than 90 days after the date  
17          of enactment of this Act, and the remaining members  
18          of the Commission shall be appointed not later than  
19          60 days after the date on which the members are ap-  
20          pointed under such subsection (b)(1).

21           “(3) VACANCIES.—A vacancy in the membership  
22          of the Commission shall be filled in the manner in  
23          which the original appointment was made.

24          “(d) DUTIES OF THE COMMISSION.—The Commission  
25          shall carry out the following duties and functions:

1           “(1) Review and analyze the recommendations of  
2           the report of the study committee established under  
3           paragraph (3).

4           “(2) Make recommendations to Congress for the  
5           provision of health services to Native Hawaiian indi-  
6           viduals as an entitlement, giving due regard to the ef-  
7           fects of a program on existing health care delivery  
8           systems for Native Hawaiians and the effect of such  
9           programs on self-determination and the reconciliation  
10          of their relationship with the United States.

11          “(3) Establish a study committee to be composed  
12          of at least 10 members from the Commission, includ-  
13          ing 4 members of the members appointed under sub-  
14          section (b)(1), 5 of the members appointed under sub-  
15          section (b)(2), and 1 of the members appointed by the  
16          Secretary under subsection (b)(3), which shall—

17                 “(A) to the extent necessary to carry out its  
18                 duties, collect, compile, qualify, and analyze  
19                 data necessary to understand the extent of Native  
20                 Hawaiian needs with regard to the provision of  
21                 health services, including holding hearings and  
22                 soliciting the views of Native Hawaiians and  
23                 Native Hawaiian organizations, and which may  
24                 include authorizing and funding feasibility stud-  
25                 ies of various models for all Native Hawaiian

1           *beneficiaries and their families, including those*  
2           *that live in the continental United States;*

3           “(B) *make recommendations to the Commis-*  
4           *sion for legislation that will provide for the cul-*  
5           *turally-competent and appropriate provision of*  
6           *health services for Native Hawaiians as an enti-*  
7           *tlement, which shall, at a minimum, address*  
8           *issues of eligibility and benefits to be provided,*  
9           *including recommendations regarding from*  
10          *whom such health services are to be provided and*  
11          *the cost and mechanisms for funding of the*  
12          *health services to be provided;*

13          “(C) *determine the effect of the enactment of*  
14          *such recommendations on the existing system of*  
15          *delivery of health services for Native Hawaiians;*

16          “(D) *determine the effect of a health service*  
17          *entitlement program for Native Hawaiian indi-*  
18          *viduals on their self-determination and the rec-*  
19          *onciliation of their relationship with the United*  
20          *States;*

21          “(E) *not later than 12 months after the date*  
22          *of the appointment of all members of the Com-*  
23          *mission, make a written report of its findings*  
24          *and recommendations to the Commission, which*  
25          *report shall include a statement of the minority*

1           *and majority position of the committee and*  
2           *which shall be disseminated, at a minimum, to*  
3           *Native Hawaiian organizations and agencies*  
4           *and health organizations referred to in sub-*  
5           *section (b)(2) for comment to the Commission;*  
6           *and*

7                   *“(F) report regularly to the full Commission*  
8                   *regarding the findings and recommendations de-*  
9                   *veloped by the committee in the course of car-*  
10                   *rying out its duties under this section.*

11                   *“(4) Not later than 18 months after the date of*  
12                   *the appointment of all members of the Commission,*  
13                   *submit a written report to Congress containing a rec-*  
14                   *ommendation of policies and legislation to implement*  
15                   *a policy that would establish a health care system for*  
16                   *Native Hawaiians, grounded in their culture, and*  
17                   *based on the delivery of health services as an entitle-*  
18                   *ment, together with a determination of the implica-*  
19                   *tions of such an entitlement system on existing health*  
20                   *care delivery systems for Native Hawaiians and their*  
21                   *self-determination and the reconciliation of their rela-*  
22                   *tionship with the United States.*

23                   *“(e) ADMINISTRATIVE PROVISIONS.—*

24                   *“(1) COMPENSATION AND EXPENSES.—*

1           “(A) CONGRESSIONAL MEMBERS.—Each  
2           member of the Commission appointed under sub-  
3           section (b)(1) shall not receive any additional  
4           compensation, allowances, or benefits by reason  
5           of their service on the Commission. Such mem-  
6           bers shall receive travel expenses and per diem in  
7           lieu of subsistence in accordance with sections  
8           5702 and 5703 of title 5, United States Code.

9           “(B) OTHER MEMBERS.—The members of  
10          the Commission appointed under paragraphs (2)  
11          and (3) of subsection (b) shall, while serving on  
12          the business of the Commission (including travel  
13          time), receive compensation at the per diem  
14          equivalent of the rate provided for individuals  
15          under level IV of the Executive Schedule under  
16          section 5315 of title 5, United States Code, and  
17          while serving away from their home or regular  
18          place of business, be allowed travel expenses, as  
19          authorized by the chairperson of the Commission.

20          “(C) OTHER PERSONNEL.—For purposes of  
21          compensation (other than compensation of the  
22          members of the Commission) and employment  
23          benefits, rights, and privileges, all personnel of  
24          the Commission shall be treated as if they were  
25          employees of the Senate.

1           “(2) *MEETINGS AND QUORUM.*—

2                   “(A) *MEETINGS.*—*The Commission shall*  
3                   *meet at the call of the chairperson.*

4                   “(B) *QUORUM.*—*A quorum of the Commis-*  
5                   *sion shall consist of not less than 12 members, of*  
6                   *which—*

7                           “(i) *not less than 4 of such members*  
8                           *shall be appointees under subsection (b)(1);*

9                           “(ii) *not less than 7 of such members*  
10                           *shall be appointees under subsection (b)(2);*

11                           *and*

12                           “(iii) *not less than 1 of such members*  
13                           *shall be an appointee under subsection*  
14                           *(b)(3).*

15           “(3) *DIRECTOR AND STAFF.*—

16                   “(A) *EXECUTIVE DIRECTOR.*—*The members*  
17                   *of the Commission shall appoint an executive di-*  
18                   *rector of the Commission. The executive director*  
19                   *shall be paid the rate of basic pay equal to that*  
20                   *under level V of the Executive Schedule under*  
21                   *section 5316 of title 5, United States Code.*

22                   “(B) *STAFF.*—*With the approval of the*  
23                   *Commission, the executive director may appoint*  
24                   *such personnel as the executive director deems*  
25                   *appropriate.*



1           “(C) *APPLICABILITY OF CIVIL SERVICE*  
2 *LAWS.—The staff of the Commission shall be ap-*  
3 *pointed without regard to the provisions of title*  
4 *5, United States Code, governing appointments*  
5 *in the competitive service, and shall be paid*  
6 *without regard to the provisions of chapter 51*  
7 *and subchapter III of chapter 53 of such title*  
8 *(relating to classification and General Schedule*  
9 *pay rates).*

10           “(D) *EXPERTS AND CONSULTANTS.—With*  
11 *the approval of the Commission, the executive di-*  
12 *rector may procure temporary and intermittent*  
13 *services under section 3109(b) of title 5, United*  
14 *States Code.*

15           “(E) *FACILITIES.—The Administrator of*  
16 *the General Services Administration shall locate*  
17 *suitable office space for the operations of the*  
18 *Commission in Washington, D.C. and in the*  
19 *State of Hawaii. The Washington, D.C. facilities*  
20 *shall serve as the headquarters of the Commission*  
21 *while the Hawaii office shall serve a liaison*  
22 *function. Both such offices shall include all nec-*  
23 *essary equipment and incidentals required for*  
24 *the proper functioning of the Commission.*

25           “(f) *POWERS.—*

1           “(1) *HEARINGS AND OTHER ACTIVITIES.*—For  
2           purposes of carrying out its duties, the Commission  
3           may hold such hearings and undertake such other ac-  
4           tivities as the Commission determines to be necessary  
5           to carry out its duties, except that at least 8 hearings  
6           shall be held on each of the Hawaiian Islands and 3  
7           hearings in the continental United States in areas  
8           where a significant population of Native Hawaiians  
9           reside. Such hearings shall be held to solicit the views  
10          of Native Hawaiians regarding the delivery of health  
11          care services to such individuals. To constitute a  
12          hearing under this paragraph, at least 4 members of  
13          the Commission, including at least 1 member of Con-  
14          gress, must be present. Hearings held by the study  
15          committee established under subsection (d)(3) may be  
16          counted towards the number of hearings required  
17          under this paragraph.

18           “(2) *STUDIES BY THE GENERAL ACCOUNTING OF-*  
19          *FICE.*—Upon the request of the Commission, the  
20          Comptroller General shall conduct such studies or in-  
21          vestigations as the Commission determines to be nec-  
22          essary to carry out its duties.

23           “(3) *COST ESTIMATES.*—

24           “(A) *IN GENERAL.*—The Director of the  
25          Congressional Budget Office or the Chief Actuary

1           *of the Health Care Financing Administration, or*  
2           *both, shall provide to the Commission, upon the*  
3           *request of the Commission, such cost estimates as*  
4           *the Commission determines to be necessary to*  
5           *carry out its duties.*

6           “(B) *REIMBURSEMENTS.*—*The Commission*  
7           *shall reimburse the Director of the Congressional*  
8           *Budget Office for expenses relating to the em-*  
9           *ployment in the office of the Director of such ad-*  
10           *ditional staff as may be necessary for the Direc-*  
11           *tor to comply with requests by the Commission*  
12           *under subparagraph (A).*

13           “(4) *DETAIL OF FEDERAL EMPLOYEES.*—*Upon*  
14           *the request of the Commission, the head of any Fed-*  
15           *eral agency is authorized to detail, without reim-*  
16           *bursement, any of the personnel of such agency to the*  
17           *Commission to assist the Commission in carrying out*  
18           *its duties. Any such detail shall not interrupt or oth-*  
19           *erwise affect the civil service status or privileges of the*  
20           *Federal employees.*

21           “(5) *TECHNICAL ASSISTANCE.*—*Upon the request*  
22           *of the Commission, the head of any Federal agency*  
23           *shall provide such technical assistance to the Commis-*  
24           *sion as the Commission determines to be necessary to*  
25           *carry out its duties.*

1           “(6) *USE OF MAILS.*—*The Commission may use*  
2           *the United States mails in the same manner and*  
3           *under the same conditions as Federal agencies and*  
4           *shall, for purposes of the frank, be considered a com-*  
5           *mission of Congress as described in section 3215 of*  
6           *title 39, United States Code.*

7           “(7) *OBTAINING INFORMATION.*—*The Commis-*  
8           *sion may secure directly from any Federal agency in-*  
9           *formation necessary to enable the Commission to*  
10           *carry out its duties, if the information may be dis-*  
11           *closed under section 552 of title 5, United States*  
12           *Code. Upon request of the chairperson of the Commis-*  
13           *sion, the head of such agency shall furnish such infor-*  
14           *mation to the Commission.*

15           “(8) *SUPPORT SERVICES.*—*Upon the request of*  
16           *the Commission, the Administrator of General Serv-*  
17           *ices shall provide to the Commission on a reimburs-*  
18           *able basis such administrative support services as the*  
19           *Commission may request.*

20           “(9) *PRINTING.*—*For purposes of costs relating*  
21           *to printing and binding, including the cost of per-*  
22           *sonnel detailed from the Government Printing Office,*  
23           *the Commission shall be deemed to be a committee of*  
24           *Congress.*

1       “(g) *AUTHORIZATION OF APPROPRIATIONS.*—*There is*  
2 *authorized to be appropriated such sums as may be nec-*  
3 *essary to carry out this section. The amount appropriated*  
4 *under this subsection shall not result in a reduction in any*  
5 *other appropriation for health care or health services for*  
6 *Native Hawaiians.*

7       “**SEC. 16. RULE OF CONSTRUCTION.**

8       “*Nothing in this Act shall be construed to restrict the*  
9 *authority of the State of Hawaii to license health practi-*  
10 *tioners.*

11       “**SEC. 17. COMPLIANCE WITH BUDGET ACT.**

12       “*Any new spending authority (described in subpara-*  
13 *graph (A) of (B) of section 401(c)(2) of the Congressional*  
14 *Budget Act of 1974 (2 U.S.C. 651(c)(2) (A) or (B))) which*  
15 *is provided under this Act shall be effective for any fiscal*  
16 *year only to such extent or in such amounts as are provided*  
17 *for in appropriation Acts.*

18       “**SEC. 18. SEVERABILITY.**

19       “*If any provision of this Act, or the application of any*  
20 *such provision to any person or circumstances is held to*  
21 *be invalid, the remainder of this Act, and the application*  
22 *of such provision or amendment to persons or circumstances*  
23 *other than those to which it is held invalid, shall not be*  
24 *affected thereby.*”

Calendar No. 765

106TH CONGRESS  
2D SESSION

**S. 1929**

[Report No. 106-389]

---

---

**A BILL**

To amend the Native Hawaiian Health Care  
Improvement Act to revise and extend such Act.

---

---

AUGUST 25, 2000

Reported with an amendment