



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Notice of Purchased/Referred Care Delivery Area Redesignation for the

Shoshone-Bannock Tribes of the Fort Hall Indian Reservation in Idaho

AGENCY: Indian Health Service, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: Notice is hereby given that the Indian Health Service (IHS) has decided to expand the geographic boundaries of the Purchased/Referred Care Delivery Area (PRCDA) for the Shoshone-Bannock Tribes of the Fort Hall Indian Reservation in Idaho (Shoshone-Bannock Tribes or Tribe) to include the Idaho counties of Ada, Bear Lake, Blaine, Bonneville, Butte, Canyon, Cassia, Custer, Elmore, Franklin, Fremont, Gem, Gooding, Jefferson, Jerome, Madison, Minidoka, Oneida, Payette, Teton, Twin Falls, and Washington. The final PRCDA for the Shoshone-Bannock Tribes now includes the Idaho counties of Ada, Bannock, Bear Lake, Bingham, Blaine, Bonneville, Butte, Canyon, Caribou, Cassia, Custer, Elmore, Franklin, Fremont, Gem, Gooding, Jefferson, Jerome, Lemhi, Madison, Minidoka, Oneida, Payette, Power, Teton, Twin Falls, and Washington. The sole purpose of this expansion is to authorize additional Shoshone-Bannock Tribal members and beneficiaries to receive Purchased/Referred Care (PRC) services.

DATES: This expansion is effective as of the date of publication of this notice.

ADDRESSES: This notice can be found at <https://www.federalregister.gov>. Written requests for information should be delivered to: CDR Tracy Sanchez, Acting Director, Office of Resource Access and Partnerships, Indian Health Service, 5600 Fishers Lane, Mail Stop 10E85C, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: CDR Tracy Sanchez, Acting

Director, Office of Resource Access and Partnerships by email at

Tracy.Sanchez@ihs.gov, or by phone at (301) 443-3216 (this is not a toll-free number).

SUPPLEMENTARY INFORMATION: The IHS provides services under regulations

in effect as of September 15, 1987, and republished at 42 CFR part 136, subparts A – C.

Subpart C defines a Contract Health Service Delivery Area (CHSDA), now referred to as

a PRCDA, as the geographic area within which PRC will be made available by the IHS to

members of an identified Indian community who reside in the PRCDA. Residence within

a PRCDA by a person who is within the scope of the Indian health program, as set forth

in 42 CFR 136.12, creates no legal entitlement to PRC but only potential eligibility for

services. Services needed, but not available at an IHS/Tribal facility, are provided under

the PRC program depending on the availability of funds, the relative medical priority of

the services to be provided, and the actual availability and accessibility of alternate

resources in accordance with the regulations.

The regulations at 42 CFR part 136, subpart C provide that, unless otherwise designated,

a PRCDA shall consist of a county which includes all or part of a reservation and any

county or counties which have a common boundary with the reservation. 42 CFR

136.22(a)(6). The regulations also provide that after Consultation with the Tribal

governing body or bodies on those reservations included within the PRCDA, the

Secretary may, from time to time, redesignate areas within the United States for inclusion

in or exclusion from a PRCDA. 42 CFR 136.22(b). The regulations require that certain

criteria must be considered before any redesignation is made. The criteria are as follows:

- (1) The number of Indians residing in the area proposed to be so included or excluded;

- (2) Whether the Tribal governing body has determined that Indians residing in the area near the reservation are socially and economically affiliated with the Tribe;
- (3) The geographic proximity to the reservation of the area whose inclusion or exclusion is being considered; and
- (4) The level of funding which would be available for the provision of PRC.

Additionally, the regulations require that any redesignation of a PRCDA be made in accordance with the procedures of the Administrative Procedure Act (5 U.S.C. 553). 42 CFR 136.22(c). In compliance with this requirement, the IHS published a notice of proposed redesignation and requested public comments on December 16, 2024, (89 FR 101608). The IHS did not receive any comments in response to the notice of proposed redesignation.

In support of this expansion, the IHS makes the following findings:

1. By expanding the PRCDA to include Ada, Bear Lake, Blaine, Bonneville, Butte, Canyon, Cassia, Custer, Elmore, Franklin, Fremont, Gem, Gooding, Jefferson, Jerome, Madison, Minidoka, Oneida, Payette, Teton, Twin Falls, and Washington counties in the State of Idaho, the Shoshone-Bannock Tribe's PRC-eligible population will increase by an estimated 323 Tribal members.
2. The IHS finds that the Tribal members within the proposed, expanded PRCDA are socially and economically affiliated with the Shoshone-Bannock Tribes, based on a statement from the Shoshone-Bannock Tribes that Tribal members who reside in Idaho and receive direct care services from Tribal and Federal health programs located on the Tribes' reservation retain social and economic ties to the Tribes.

3. The expanded PRCDA counties form a contiguous area with the existing PRCDA, and members of the Shoshone-Bannock Tribes reside in each of the counties proposed for inclusion in the expanded PRCDA. Additionally, as noted above, Tribal members who reside in these counties seek direct care services from programs located on the Tribes' reservation. For these reasons, the IHS has determined the additional counties proposed for inclusion herein to be geographically proximate, meaning "on or near," to the Tribes' reservation.
4. The governing body of the Shoshone-Bannock Tribes has indicated that the PRC program can continue providing the same level of care to the PRC-eligible population if the PRCDA is expanded as proposed, without requiring additional funding or reduction of the current medical priority level.

An updated listing of the PRCDAs for all federally recognized Tribes may be accessed via a link on the IHS PRCDA Expansion website (<https://www.ihs.gov/prc/prcda-expansion>).

Public Comments: The IHS did not receive any comments in response to the notice of proposed expansion.

P. Benjamin Smith,

Acting Director,

Indian Health Service.

[FR Doc. 2025-11747 Filed: 6/25/2025 8:45 am; Publication Date: 6/26/2025]