

ObamaCare and Native American Health Care

Q. Do patients have to do anything related to the Affordable Care Act after October 1?

A: October 1 is when enrollment begins for the state and federal Health Insurance Marketplaces and for some states that choose to expand Medicaid. However, the earliest Marketplace coverage begins is January 1, 2014, and open enrollment lasts until the end of March 2014. In addition, members of federally-recognized tribes can enroll monthly even after March.

Q. Do all Indian Health Service patients have to enroll in the state or federal Health Insurance Marketplaces and buy insurance?

A: No. If individuals are already covered by private insurance that meets the definition of minimal essential coverage through their job or family or through Medicare, Medicaid, the Children's Health Insurance Program (CHIP), or other types of health coverage, they don't have to enroll in the Marketplace since they have met the shared responsibility requirement to maintain insurance coverage.

IHS-eligible patients who do not have health coverage can keep using IHS and apply for an IHS Eligible exemption or apply for the Tribal Membership exemption for members of federally-recognized tribes in order to avoid the shared responsibility payment for not maintaining minimum essential coverage. Or they may now be eligible for Medicaid. Documentation for individuals who receive an IHS Eligible exemption is needed prior to filing their 2014 taxes. Patients who are eligible for the Tribal Membership exemption can file an exemption with their taxes or obtain this exemption beforehand through the Health Insurance Marketplace.

Q. What is the Health Insurance Marketplace application process for American Indians and Alaska Natives?

A: The Marketplace offers a streamlined application process to help American Indian and Alaska Native patients understand what benefits are available and which protections may apply. Certain protections apply to enrolled members of federally-recognized tribes only. In order to determine if you qualify for the protections, you may be asked to provide additional documentation for tribal membership and household income.

By filling out one simple, user-friendly application, you will learn if you qualify for financial assistance through either:

1. Advanced Premium Tax Credits to purchase coverage in the Marketplace,
2. Reductions in cost-sharing that will reduce or eliminate out-of-pocket costs when you receive services using the coverage you purchased through the Health Insurance Marketplace, or
3. Enrollment in CHIP or Medicaid, if your state expands eligibility.

American Indian and Alaska Native consumers have the option to complete either the paper or online application. There are specific requirements for the paper and online application

processes, which may vary according to the state you live in. To complete the online application, please visit: www.healthcare.gov .

Q. What are the Special Enrollment Periods for American Indians and Alaska Natives?

A: Members of federally-recognized tribes are allowed to purchase and enroll in Marketplace health insurance coverage monthly rather than just during the yearly open enrollment period. If you aren't a member of a federally recognized tribe and don't qualify for any other special enrollment period, you must enroll during the yearly open enrollment period.

Q. What are the cost sharing exemptions for American Indians and Alaska Natives?

A: If you enroll in a qualified health plan offered through the Marketplace, you may qualify for savings on cost sharing (e.g., copays, coinsurance, deductibles, and other similar charges). If you are a member of a federally recognized tribe and your household income is at or below 300% of the federal poverty level, you will have no cost sharing for services covered by the health plan you choose in the Marketplace. Regardless of your household income and your enrollment in the Marketplace, there is no cost sharing if you continue to receive services from your Indian health care provider or through a Contract Health Service authorized referral.

There are also cost-sharing exemptions under the Medicaid program for enrolled individuals who receive services directly from the IHS, an Indian Tribe, tribal organization, or urban Indian organization or through a Contract Health Services authorized referral.

NOTE: Even if you are not a member of a federally-recognized tribe and your household income is below 250% of the federal poverty level, you may be eligible for reduced cost-sharing if you enroll in a Silver Plan through the Health Insurance Marketplace.

Source: www.IHS.gov/ACA/FAQ