



Working with American Indians and Alaska Natives: Information and Tips for Agents and Brokers

The Health Insurance Marketplace provides American Indians and Alaska Natives (AI/AN) consumers increased opportunities for affordable health coverage. This coverage can be through a qualified health plan (QHP) bought in the Marketplace, or through Medicaid or the Children's Health Insurance Program (CHIP). For purposes of the Marketplace and this document, members of federally recognized Indian tribes and Alaska Native Claims Settlement Act (ANCSA) Corporation shareholders (regional or village) are referred to as AI/AN consumers.

Indian Health Care Programs

Many AI/AN consumers currently receive health care from Indian health care providers, which include health programs operated by the Indian Health Service (IHS), tribes and tribal organizations, and urban Indian organizations. These health programs, officially called Tribal Health Services and Urban Indian Health Programs, are sometimes called ITUs (IHS/Tribal/Urban), but are referred to in this document as Indian health care providers. Based on the Federal Government's relationship with Indian tribes, Indian health care providers provide health care at no cost to AI/AN consumers.

If AI/AN consumers enroll in QHPs through the Marketplace, they can continue to receive services from their local Indian health care provider. Indian health care providers can bill QHPs for services provided to their patients and the reimbursements collected benefit the entire tribal community by allowing them to provide more services to others.

Marketplace Protections

The Marketplace provides certain protections for AI/AN consumers:

- Special enrollment periods (SEPs):
 - AI/AN consumers can enroll in the Marketplace or change plans one time per month throughout the year, not just during the yearly Open Enrollment period.
 - Non-AI/AN consumers on the same application as AI/AN consumers can take advantage of this SEP, but only for the monthly SEP. Cost sharing protections do not apply.
- AI/AN consumers with household income between 100% and 300% of the federal poverty level (FPL):
 - Can enroll in a zero cost sharing plan, which means no copays, deductibles, or coinsurance when receiving care from Indian health care providers or through a QHP.
 - Do not need a referral from an Indian health care provider when receiving essential health benefits (EHBs) through a Marketplace plan to avoid paying co-payments, deductibles, or co-insurance.
 - Must have their income verified to keep zero cost sharing.
- AI/AN consumers with household income below 100%, or with income above 300% of the FPL:
 - Can enroll in a limited cost sharing plan, which means no copays, deductibles, or

coinsurance when receiving care from Indian health care providers.

- Will need a referral from an Indian health care provider when receiving EHBs through a Marketplace plan to avoid paying co-payments, deductibles, or co-insurance.
- Do not need to have their income verified in order to receive limited cost sharing.
- If an AI/AN consumer applies along with other household members who do not have AI/AN status, then the AI/AN consumers must enroll in a separate insurance policy from the non-AI/AN household members in order for the AI/AN consumers to receive cost sharing benefits on the basis of tribal membership.
- AI/AN consumers can enroll in a zero cost sharing or limited cost sharing plan at any metal level.
 - This does not apply to catastrophic plans, as they are not a metal level. AI/AN consumers cannot use cost sharing reductions (CSR) if they enroll in a catastrophic plan.
- AI/AN consumers who enroll in a limited or zero cost sharing plan are not exempt from monthly premiums. However, they may qualify for advance payments of the premium tax credit (APTC), depending on income.

Tribal Documentation to Support Marketplace Applications

The SEP and CSR protections for AI/AN consumers under the Marketplace only apply to members of a federally recognized tribe or ANCSA shareholders. So the Marketplace can determine eligibility for these protections, when applying to the Marketplace, AI/AN applicants may be asked to provide documentation that they are a member of a federally recognized tribe or an ANCSA shareholder, such as:

- A document issued by a federally recognized tribe indicating tribal membership, such as a tribal enrollment card that includes a tribal seal and/or an official signature.
- A document issued by an Alaska Native village/tribe, or an ANCSA corporation (regional

or village) acknowledging descent, affiliation, or shareholder status.

- A certificate of degree of Indian blood (CDIB) issued by the Bureau of Indian Affairs, if the CDIB includes tribal enrollment information.

This documentation may be uploaded to the applicant's online application or mailed in after submitting the application.

- When uploading tribal documents, use one of the following file types to ensure successful upload: .pdf, .jpeg, .jpg, .gif, .xml, .png, .tiff, .bmp.
- When preparing documents for upload, agents and brokers should write the consumer's full legal name and application ID on each page so that the Marketplace can easily match the submitted documents to the correct record.
- When mailing in copies of tribal documentation, agents and brokers should write the consumer's full legal name and application ID on each page so that the Marketplace can easily match the submitted documents to the correct record. They should also include a copy of the Bar Code page, as provided within the Marketplace Eligibility Notice received after submitting their online application. This will help to ensure that the tribal documentation is linked with the correct application.
- Individuals will have 90 days after they receive an eligibility determination to submit their documentation. If documentation is not submitted within this timeframe, they will be notified that they will need to choose another plan until tribal documentation is provided.

Other Individuals Eligible for Indian Health Care Programs

Indian health care providers also provide services to other individuals, such as persons of Indian descent who are not members of their tribe, spouses of tribal members (if the tribe has passed a resolution allowing them to receive services), children adopted by tribal members, and non-Indian women who are pregnant with the child of

an eligible Indian. Except as noted above, these individuals do not qualify for the Marketplace protections outlined above but can qualify for the Medicaid and CHIP protections.

Medicaid and CHIP Protections

Members of federally recognized Indian tribes, ANCSA shareholders, and individuals who are otherwise eligible for services from an Indian health care provider have the following Medicaid and CHIP protections:

- Do not have to pay Medicaid premiums or enrollment fees if they are eligible to receive or have received care from an Indian health care provider or through Purchased/Referred Care (P/RC).
- Do not have to pay any Medicaid cost sharing, such as deductibles, coinsurance or copayments, if they are currently receiving or have received care from an Indian health care provider or through P/RC.
 - Indian health care providers may be able to provide a letter to ITU beneficiaries to verify eligibility for these protections.
- Children cannot be charged any premium, enrollment fee, copayment, coinsurance or deductible.
- Certain types of Indian income and resources are not counted when determining Medicaid or CHIP eligibility. Examples include:
 - Per capita payments from a tribe that come from natural resources, usage rights, leases, or royalties.
 - Payments from natural resources, farming, ranching, fishing, leases, or profits from Indian trust land (including reservations and former reservations).
 - Money from selling things that have tribal cultural significance, such as Indian jewelry or beadwork.
- Certain types of Indian trust income and resources are exempt from Medicaid estate

recovery rules. (Medicaid estate recovery rules only apply to those age 55 and older who receive long-term care services, such as nursing home care.)

Note: *Per capita income from Indian gaming is not excluded and should be reported.*

Tribal Documentation to Support Medicaid Applications

When applying for Medicaid and CHIP, applicants may need to provide documentation of U.S. citizenship. The following tribal documents can be used to show proof of U.S. citizenship:

- A document issued by a federally recognized tribe indicating tribal membership, such as a tribal enrollment card.
- A document issued by an Alaska Native village/tribe or an ANCSA corporation (regional or village) acknowledging descent, affiliation, or shareholder status.
- A certificate of degree of Indian blood issued by the Bureau of Indian Affairs.
- A tribal census document.
- Any document indicating affiliation with the tribe.

Medicaid and CHIP agencies may accept an individual's self-attestation regarding Indian status. If the Medicaid or CHIP agency requires documentation, this same list of tribal documents could be used to verify Indian status or eligibility for services from an Indian health provider.

Where to Find Additional Resources

Additional consumer resources are available through CMS Coverage to Care:

<https://www.cms.gov/files/document/better-care-tribal-interactive-v3.pdf>

Marketplace Protections and Benefits for AI/AN Consumers

- Details on special Marketplace protections and benefits for AI/AN consumers are available at:
<https://www.healthcare.gov/american-indians-alaska-natives/>.

- IHS information on the Affordable Care Act is available at: <https://www.ihs.gov/aca/>
- A resource on understanding cost sharing protections for AI/AN consumers in Medicaid, CHIP, and the Marketplace: https://www.cms.gov/Outreach-and-Education/American-Indian-Alaska-Native/AIAN/Outreach-and-Education/pdf/understanding-cost-sharing_909438-N.pdf
- Information on assisting AI/AN consumers: <https://www.cms.gov/marketplace/technical-assistance-resources/assisting-american-indian-alaska-native-consumers.pdf>

Tribal Information

- Additional tribal outreach and education resources are available at CMS Division of Tribal Affairs: <https://www.cms.gov/training-education/partner-outreach-resources/american-indian-alaska-native>
- A list of Federally Recognized Tribes: <https://www.federalregister.gov/documents/2024/12/11/2024-29005/indian-entities-recognized-by-and-eligible-to-receive-services-from-the-united-states-bureau-of>
- Tribal Directory: <https://www.bia.gov/service/tribal-leaders-directory>

Medicaid/CHIP

- Information on State Medicaid programs: www.Medicaid.gov
- Information about specific State Medicaid programs: <https://www.medicaid.gov/state-overviews>
- Information about CHIP: www.insurekidsnow.gov

