American Indian & Alaska Native
Fact Sheet

If you are an American Indian or Alaska Native, you may receive new health coverage benefits, special discounts, and protections.

Certain benefits are available to you if you are a member of a federally recognized tribe or Alaska Native Claims Settlement Act (ANCSA) Corporation shareholders. Others are available to people of Native American descent or who are otherwise eligible for services from the Indian Health Service, a tribal program, or an Urban Indian Health Program (I/T/U).

If I am eligible, what are the benefits I could receive?

- You may enroll into health coverage at any time during the year, not just during open enrollment.
- You may change plans up to once a month.
- You may have no deductible, no copayment, and no co-insurance

As an American Indian or Alaska Native, you are eligible for a Special Enrollment Period every month.

Special Enrollment Periods are timeframes during which qualifying individuals may enroll in health insurance outside of regular Open Enrollment. If you fall into one of the above categories, you qualify for a Special Enrollment Period once a month. This means that you may make changes to your insurance coverage each month for any reason.

If you enroll in coverage or have a change in plan before the 15th of the month, then your change will take effect the first day of the next month. If you change your plan after the 15th of the month, then your new plan will start the first day of the month following the next.
IMPORTANT NOTE ABOUT CHANGING PLANS:
When you change plans during a special monthly period, you could wind up with a gap in your coverage if you enroll after the 15th day of the month. For example, if you change plans after May 15 your current coverage will end on May 31, but your new coverage won’t take effect until July 1. Check with your current plan and the plan you want to enroll in to learn how to avoid a coverage gap. You may find that enrolling before the 15th of the month is the best way to avoid a gap.

How will the special discounts help me save?

If you buy a Marketplace plan and your income is between 100% and 300% of the Federal Poverty Level (FPL), you can enroll in a “zero cost sharing” plan. This means that you won’t have to pay any out-of-pocket costs. Out-of-pocket costs include deductibles, copayments, and coinsurance when you get care.

The chart below reflects the Federal Poverty Levels based on 2018 data.

<table>
<thead>
<tr>
<th>Persons in Household</th>
<th>48 Contiguous States and D.C. Poverty Guidelines (Annual)</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>133% 135% 150% 200% 250% 300% 400%</td>
</tr>
<tr>
<td>1</td>
<td>$12,140 $16,146 $16,753 $16,210 $24,280 $30,350 $36,420 $46,560</td>
</tr>
<tr>
<td>2</td>
<td>$16,460 $21,892 $22,715 $24,690 $32,920 $41,150 $49,360 $65,840</td>
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<tr>
<td>3</td>
<td>$20,780 $27,837 $28,678 $31,170 $41,580 $51,950 $62,340 $83,120</td>
</tr>
<tr>
<td>4</td>
<td>$25,100 $33,383 $34,638 $37,650 $50,200 $62,750 $75,300 $100,400</td>
</tr>
<tr>
<td>5</td>
<td>$29,420 $39,120 $40,600 $44,130 $58,840 $73,550 $88,260 $117,680</td>
</tr>
<tr>
<td>6</td>
<td>$33,740 $44,874 $46,610 $50,610 $67,480 $84,850 $101,220 $134,960</td>
</tr>
<tr>
<td>7</td>
<td>$38,060 $50,620 $52,523 $57,090 $76,120 $95,150 $114,180 $152,240</td>
</tr>
<tr>
<td>8</td>
<td>$42,380 $56,365 $58,484 $63,570 $84,760 $105,950 $127,140 $169,520</td>
</tr>
</tbody>
</table>

Add $4,320 for each person over 8

What if someone in my family is not a tribal member?

Because your household must enroll together, this will automatically make the nontribal member of your family eligible for the Special Enrollment Periods. The head of the household does not have to be a member of a federally recognized tribe for the other family members on the same enrollment to have access to the Special Enrollment Periods. However, family members who are NOT part of the tribe need to be enrolled in a different health insurance plan.
Example:
Joe and his two children apply to the Marketplace on the same application. Joe and his son are members of the Yuchi Tribe. His wife, Jennifer, is not a Native American. Because they all apply on the same application, they are all eligible for a Special Enrollment Period. However, because Jennifer is non-Indian, she will need to enroll in another plan, but will still be able to use the Special Enrollment Period.

Will I need my tribal documents when applying for coverage?

Yes, you will need to provide documentation.
- For Native Americans, it will be a document issued by a federally recognized tribe indicating tribal membership.
- For Alaska Natives, it will be a document issued by an Alaska Native village/tribe, or an ANCSA Corporation (regional or village) document indicating shareholder status.

Indian Health Services and Marketplace Insurance

If you enroll in a private health insurance plan through the Health Insurance Marketplace you can still receive services from the Indian Health Service, tribal health programs, or urban Indian health programs. You can also receive services from any providers on the Marketplace plan.

What income do I have to include on my application?

On the Marketplace application, you will need to provide income information that you would report on your federal income tax return. You would not report American Indian or Alaska Native income that the IRS exempts from tax. The Marketplace application will ask you to report income from various sources and will determine your eligibility for insurance plans, Medicaid and the Kentucky Children’s Health Insurance Program (KCHIP).