

INTRODUCTION

Collecting Stories with Tribal Enrollment Assistors

- Over the past few years, the National Indian Health Board (NIHB) worked with Tribal Enrollment Assistors to collect stories describing the real-life scenarios of obtaining health insurance coverage and how this affected Tribal communities and Tribal citizens.

An Inside Look into Tribal Experiences

- These stories are meant to provide an inside look into Tribal citizens' experiences with health insurance coverage to discover how it has impacted not just the individuals themselves but also their communities.

HIPAA Compliance

- To protect identities and to comply with the Health Insurance Portability and Accountability Act (HIPAA), personal names have been omitted, but Tribal affiliation, age, family size, and health insurance coverage have been kept.

TOPICS COVERED

When You Do Not Qualify for Medicaid, There Are Other Health Insurance Choices

When You Have Difficulties Paying for Medicare Coverage

When You're Struggling to Pay Your Employer-Sponsored Health Insurance Premiums

When your Tribal Clinic Is Not Enough, Health Insurance Marketplace Coverage Can Provide Access to a Specialist

When You Have a Health Emergency but You Don't Have Health Insurance

When You're Over-Income for Medicaid Coverage

CENTERS FOR MEDICARE AND MEDICAID SERVICES STORIES

When You're Struggling to Pay Your Employer-Sponsored Health Insurance Premiums

A storyboard series from the National Indian Health Board
For more information, visit nihb.org/tribalhealthreform/

Family of 4 | Mescalero Apache | Oklahoma City Area | Medicaid, employer-sponsored health insurance

"She spoke with a Patient Benefits Coordinator, who assisted the mother and discovered that her state Medicaid program could assist with paying for her employer-sponsored health insurance premiums for the rest of the family."

For some, like a woman from the Mescalero Apache Tribe, the cost of employer-sponsored healthcare premiums can be expensive, especially with three children. This was extremely difficult because one son is disabled and did qualify for Medicaid, but the other two children and the mother did not qualify. The mother could not afford any private insurance coverage for her and the other two children. She spoke with a Patient Benefits Coordinator, who assisted the mother and discovered that her state Medicaid program could assist with paying for her employer-sponsored health insurance premiums for the rest of the family. In turn, she applied for insurance coverage through her employer and was approved for coverage for the entire family under both the Medicaid and employer-sponsored health insurance plan. The benefits of health insurance coverage helped the family access quality healthcare services for the entire family and supported the Urban clinic.

When You Have a Health Emergency but You Don't Have Health Insurance

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31-year-old male | Mescalero Apache Tribe | Albuquerque Area | Medicaid

The Tribal Enrollment Assistor at his local Tribal clinic reached out and assisted him in gathering the missing information. Helping him submit the supporting documents, in turn, his Medicaid application was approved. With that, his medical services were covered, and as a result, he was able to get quality care and continue receiving quality health care services.

Sometimes, like for a 31-year-old Mescalero Apache Tribe citizen, an emergency goes up, and immediate medical services are needed. In this instance, because of appendicitis, he needed to be transferred from his local clinic to a better-equipped hospital unit for care. He did not have health insurance to cover services outside of his local clinic, and did not know what to do while at the hospital. He completed a Medicaid application, but it was incomplete, and coverage for his surgery was at risk. The Tribal Enrollment Assistor at his local Tribal clinic reached out and assisted him in gathering the missing information. Helping him submit the supporting documents, in turn, his Medicaid application was approved. With that, his medical services were covered, and as a result, he was able to get quality care and continue receiving quality health care services. In addition, his Tribal clinic would submit Purchase/Referred Care Dollars for other American Indian and Alaska Natives in the health need.

When your Tribal Clinic Is Not Enough, Health Insurance Marketplace Coverage Can Provide Access to a Specialist

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Couple | Cherokee Nation | Oklahoma Area | Marketplace

Without the help of the Chickasaw Nation Medical Center and the ACA, this couple would not have been able to get the care needed.

For some people, like this couple from the Cherokee Nation, Tribal healthcare coverage is often not enough. Recently, the husband was required to have both knees and both shoulders replaced. As citizens of the Cherokee Nation, they had healthcare benefits, but those benefits were insufficient to cover all the surgery expenses. The family did not know what they needed to do, so they set down with the Chickasaw Nation Medical Center benefits coordinator to figure out what kind of options were available. They found out they were eligible to participate in the Affordable Care Act (ACA). With help from the Chickasaw Nation Medical Center, the couple applied for health insurance coverage, supported through the Health Insurance Marketplace application process, and the family was able to get health insurance options available. They selected the perfect plan that covered the surgical procedures were covered. Furthermore, the family received help with referrals and ensured they were in place to guarantee all claims were paid. Without the help of the Chickasaw Nation Medical Center and the ACA, this couple would not have been able to get the care needed. By the family getting help with insurance coverage, the Tribal clinic was able to continue to generate valuable Purchase/Referred Care Dollars for Tribal citizens experiencing dire health needs without other resources.

When You're Over-Income for Medicaid Coverage

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Male | Oneida | Navajo Area | Marketplace

After getting assistance from the Patient Benefits Coordinator, he purchased a qualified Health Insurance Marketplace plan with a low premium with no out-of-pocket costs.

For some, like this maintenance worker from the Oneida Tribe of the Navajo Nation, qualifying for Medicaid was difficult, especially when a person earns more than the qualifying income amount. The maintenance worker was injured while riding his horse and needed immediate treatment for his arm. At his community clinic, he was referred to a specialty center to treat his arm injury, but because the worker only worked part-time, he did not qualify for employer-sponsored health insurance. The concern was if he did not get the treatment for his arm soon, the injury to the arm would hinder his ability to return to work. In turn, this caused him to lose income and perhaps even put his arm at risk for amputation.

With much relief after getting assistance from the Patient Benefits Coordinator with enrolling in the Health Insurance Marketplace and purchasing a low-cost sharing plan and an Affordable Premium Tax Credit, he purchased a qualified Health Insurance Marketplace plan with a low premium with no out-of-pocket costs after enrolling through the Marketplace. He expanded his coverage, got his arm treated, and helped his Tribal clinic promote its valuable Purchase/Referred Care Dollars for Tribal citizens experiencing dire health needs without other resources.

When You Have Difficulties Paying for Medicare Coverage

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Male | Oneida | Navajo Area | Medicare, QMB program

He was referred to the Patient Benefits Coordinator, who assisted him with enrolling into Medicaid, and found that he would qualify for Qualified Medicare Benefits (QMB).

For some people like this silversmith from the Oneida Tribe of the Navajo Nation, paying for Medicare Part B premiums, copay, and deductibles can be challenging. He was living on a limited income, and after a trip to the IRS to set up an eye doctor, he found out he disproportionately needed certain surgery. When he went to get treatment, he was referred out of IRS to a specialty clinic that did not have health insurance because he could not afford it. He was referred to the Patient Benefits Coordinator, who assisted him with enrolling into Medicaid, and found that he would qualify for Qualified Medicare Benefits (QMB). He was excited to find out that through QMB, he would receive extra assistance and not have to pay any out-of-pocket costs. As a result of the coverage under the limited income and resource benefits program, his Tribal clinic was able to provide funding for Tribal citizens in dire health need who have limited resources. In turn, he was able to get his cataract surgery, and he was able to continue teaching silversmithing to his grandchildren.

QMB is a state program that pays for Medicare premiums, co-insurance, and deductibles.

When You Do Not Qualify for Medicaid, There Are Other Health Insurance Choices

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Family of 5 | Confederated Tribes of Coos, Clatsop and Nehalem Tribes | Pacific Area | CHIP, Marketplace, employer-sponsored health insurance

She reached out and applied to the health insurance marketplace. She was then able to obtain coverage through the health insurance marketplace, which directly helped the entire family to continue to receive quality health services.

For those like a 32-year-old Native Mother in the Portland area, searching for Medicaid can be a challenge. She was part of the qualifying income bracket due to an increase in her husband's income, and she and her family had outside of their Purchase/Referred Care Dollars from "PDCD". Because of this, she and her husband did not qualify for Medicaid because they were over income, so she had to only barely get private health insurance coverage. Luckily, her three children were eligible for coverage through the Children's Health Insurance Program (CHIP), and her husband's employer provided health insurance. However, enrolling through her husband's employer plan was expensive for the family, so instead, she reached out and applied to the health insurance marketplace. She was then able to obtain coverage through the health insurance marketplace, which directly helped the entire family to continue to receive quality health services and help her obtain Purchase/Referred Care Dollars for other American Indian and Alaska Natives in the health need.

*CHIP refers to the program for children with Purchase/Referred Care will be made available by the IRS in a number of identified states currently also in the CHIP Marketplace. Care family members, however, in certain health insurance, health insurance are provided by the National Indian Health Board (NIHB) care party or member under a separate arrangement other than their own plan and the same platform, health insurance.

**The key difference between private and public health insurance is the enrollment form. Private health insurance does not have income restrictions for a potential member, whereas some public health insurance does not have income restrictions.

FUTURE DIRECTIONS AND CONCLUSIONS

A Crucial Resource

- These stories share how Medicaid, Children's Health Insurance Program, Medicare, and Health Insurance Marketplace are crucial resources for eligible American Indians and Alaska Natives who either have no insurance or are dealing with inadequate care through the Indian Health Service's rationed system.

Elders and the Role of Storytelling

- Elders use stories as a teaching tool to demonstrate life lessons, teach traditions, or share important messages with their community and how these stories will be showcased.

Trust and Communication

- As Tribal communities have been known to be particular in the stories they share, and that trust is something they value to the utmost, Tribal Enrollment Assistors take pride in the trust and communication they can share with Tribal citizens.

Hope and Healing in Communities

- It is the wish of the Tribal Enrollment Assistors and NIHB that these stories showcase hope and healing within Tribal communities and not be used as a marketing tool but as a teaching tool.

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