

Medicaid and CHIP cost-sharing protections

Members of federally recognized Indian tribes and individuals who are otherwise eligible for services from an Indian health care provider have the following Medicaid and CHIP protections from cost sharing.

- You do not have to pay Medicaid premiums or enrollment fees if they are eligible to receive care from an Indian health care provider or through referral to a non-Indian provider (such as Purchased/Referred Care (PRC)).
- You do not have to pay any cost sharing, like deductibles, coinsurance, or copayments, for any Medicaid service from any Medicaid provider if they have ever received a service or referral from an Indian health care provider.
- Children who are American Indian or Alaska Native cannot be charged any premium, enrollment fee, copayment, coinsurance, or deductible in CHIP.

Learn more about when cost sharing applies to you

Visit <https://www.healthcare.gov/american-indians-alaska-natives/coverage/>



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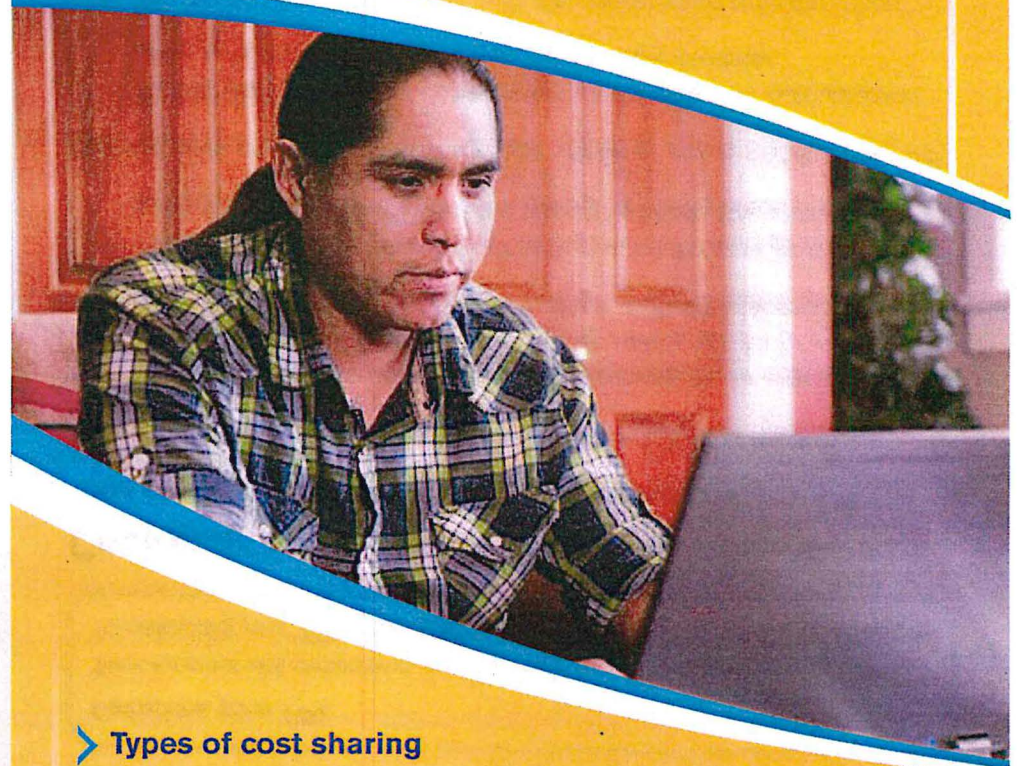
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CMS ICN No. 909438-N • August 2017

Understanding Cost Sharing Protections for American Indian and Alaska Natives in Medicaid, CHIP, and the Marketplace



- Types of cost sharing
- When cost sharing applies to you
- Eligibility for cost-sharing reductions in the Marketplace
- Medicaid and CHIP cost-sharing protections



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What is cost sharing?

Cost sharing is what you pay for medical services covered by your health insurance. Types of cost sharing include:

Deductible: The amount you must spend for health care services that your plan covers before your health insurance begins to pay

Your deductible may not apply to all services. For instance, most plans do not require you to pay off your deductible before having insurance cover routine doctor visits or preventive care.

For example, if your deductible is \$1,000, your plan won't pay anything until you've met your \$1,000 deductible for covered health care.

Copayment: A fixed amount that you pay for a covered health care service

For example, you may need to pay \$20 to visit your doctor or for a prescription.

Coinsurance: Your share of the costs of a covered health care service, calculated as a percentage

For example, you may pay 30% for lab tests or 80% for a prescribed medication that is not listed on your insurance plan's approved medication list.

Premium: The amount that must be paid for your health insurance or plan – you or your employer usually pay the premium monthly, quarterly, or yearly

Members of federally recognized tribes who qualify for cost-sharing reductions are not exempt from premiums. However, you may qualify for the advance payment of premium tax credits (APTC), depending on your income. Some tribes participate in a tribal sponsorship program where they pay premiums on behalf of their tribal members. Please contact your tribe for more information.

Cost sharing and the federal poverty level

For American Indians and Alaska Natives who buy health insurance in the Marketplace, the federal government has protections in place to reduce cost sharing. The federal poverty level (FPL) is a measure of income to determine your eligibility for certain programs and benefits.

Calculate your FPL

Your income will determine if you qualify for cost-sharing reductions. To calculate your FPL, visit <https://aspe.hhs.gov/poverty-guidelines>

Cost-sharing reductions based on your FPL

There are two types of cost-sharing reductions based on your FPL.

Zero cost sharing for income between 100%–300% of the FPL

- You **do not** have to pay copayments, deductibles, or coinsurance when getting care from an Indian health care provider or when getting essential health benefits through a Marketplace plan.
- You **do not** need a referral from an Indian health care provider when getting essential health benefits through a Marketplace plan.

Limited cost sharing for income below 100% or above 300% of the FPL

- You **do not** have to pay copayments, deductibles, or coinsurance when getting care from an Indian health care provider.
- You **do need** a referral from an Indian health care provider when getting essential health benefits through a Marketplace plan to avoid paying copayments, deductibles, or coinsurance.

