

INDIAN HEALTH PROVISIONS ENACTED INTO LAW IN 2009

"ARRA" refers to the American Recovery and Reinvestment Act of 2009, Public Law 111-5 (Feb. 17, 2009)

"CHIPRA" refers to the Children's Health Insurance Program Reauthorization Act of 2009, Public Law 111-3 (Feb. 4, 2009)

| Law | Provision Description | Impact on Indian health |
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| ARRA §5006(a) | Exemption from Medicaid cost sharing (including co-pays) for Indian patients served by IHS, tribal and urban Indian organization (I/T/U) providers, including referrals under Contract Health Services (CHS) program | <ul style="list-style-type: none"> • Assures I/T/Us receive full payment from State Medicaid programs for direct services to Indian beneficiaries enrolled in Medicaid. • Will avoid having to use scarce CHS funds to pay co-pay on referrals to outside providers. |
| ARRA §5006(b) | Exemption of certain Indian-owned property from being considered as "resources" for purposes of eligibility of individual Indian for Medicaid and CHIP | Enables more Indian people to meet eligibility requirements for Medicaid. Increased Medicaid enrollment enables I/T/Us who serve these patients to collect reimbursements for services. |
| ARRA §5006(c) | Codification in law of current policy which protects certain Indian property from Medicaid estate recovery | <ul style="list-style-type: none"> • Assures continuation of policy which protects certain Indian property from being attached by State Medicaid program upon the death of its Indian owner who had been enrolled in Medicaid. • Will encourage more Indians who are eligible for Medicaid to enroll in the program without fear of forfeiting such property upon his/her death. |
| ARRA §5006(d) | Protections for individual Indians and Indian health care providers in states which operate Medicaid through managed care organizations | <ul style="list-style-type: none"> • Permits Indian enrolled in Medicaid to select his/her I/T/U as primary care provider where a State operates Medicaid through managed care organizations • Requires states to assure their Medicaid managed care organizations admit I/T/U providers to their provider networks and to pay the I/T/Us for providing covered services whether or not they participate in provider networks. • Will end the practice of some Medicaid managed care organizations of denying payment to I/T/Us for services to Medicaid enrollees, and enable those I/T/Us to collect for covered services. |
| ARRA §5006(e)(1) | Continuation and expansion of Tribal Technical Advisory Group chartered by the Centers for Medicare and Medicaid Services | <ul style="list-style-type: none"> • Assures that CMS will continue to receive policy advice from TTAG on Indian Medicare, Medicaid and CHIP issues • Expands TTAG to include representatives from IHS and urban Indian programs |
| ARRA §5006(e)(2) | Requires States to consult with I/T/Us within the State on proposed changes to Medicaid and CHIP programs | Achieves long-sought goal for States to consult with I/T/Us on Medicaid and CHIP changes that would have a direct effect on Indian health programs. |

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| CHIPRA §211 | Makes tribal enrollment document the equivalent of a U.S. passport for the purpose of proving U.S. citizenship for Medicaid eligibility | Overcomes a barrier to Medicaid enrollment created by 2003 law which identified documents that would be accepted to prove U.S. citizenship, and thereby facilitate enrollment of eligible tribal members in Medicaid. |
| CHIPRA §202(a) | To improve access of Indians to Medicaid and CHIP, requires CMS to encourage States to provide for enrollment services on and near Indian reservations | Will make it easier for eligible Indians who live on/near reservations to enroll in Medicaid and CHIP |
| CHIPRA §202(b) | Makes the 10% cap on State CHIP outreach expenses inapplicable to expenditures for outreach to Indian children | Will make it more economically feasible for States to perform outreach and enrollment services to Indian children who are eligible for Medicaid or CHIP, and thereby increase enrollment of Indian children in these programs. |