

The Affordable Care Act Helps American Indians and Alaska Natives

For too long, too many hard working Americans paid the price for policies that handed free rein to insurance companies and put barriers between patients and their doctors. The Affordable Care Act gives hard-working families the security they deserve. The new health care law forces insurance companies to play by the rules, prohibiting them from dropping your coverage if you get sick, billing you into bankruptcy because of an annual or lifetime limit, or, soon, discriminating against anyone with a pre-existing condition. And it includes substantial new benefits for American Indians and Alaska Natives across the country.

Historically, American Indians and Alaska Natives have faced significant barriers to accessing affordable health insurance and these barriers have contributed to significant health disparities:

- American Indians/Alaska Natives were almost twice as likely as whites to die from diabetes in 2006.
- American Indian/Alaska Native adults are more likely to be obese than white adults and they are more likely to have high blood pressure, as compared to white adults.
- The Indian health system experiences high vacancy rates in health care providers: 26% for nurses, 24% for dentists, and 21% for physicians.

Under the new health care law, Americans will have the security of knowing that they don't have to worry about losing coverage if they're laid off or change jobs. And insurance companies now have to cover your preventive care like mammograms and other cancer screenings. The new law also makes a significant investment in State and community-based efforts that promote public health, prevent disease and protect against public health emergencies.

Health reform is already making a difference by:

Creating New Coverage Options for American Indians and Alaska Natives with Pre-existing Conditions

Under the new law, insurance companies are already banned from denying coverage to children because of a pre-existing condition. In 2014, they are banned from discriminating against anyone with a pre-existing condition such as cancer and having been pregnant. The new Pre-Existing Condition Insurance Plan in every State offers an option to people who have been locked out of the insurance market because of a pre-existing condition like cancer or heart disease. Already, 50,000 Americans who were uninsured due to a pre-existing condition have accessed affordable coverage through the Pre-Existing Condition Insurance Plan.

Covering Preventive Services with No Deductible or Co-pay

Under the new health care law, all Americans joining a new health care plan must be able to receive recommended preventive services, such as mammograms or vaccinations for your child, with no out-of-pocket costs such as co-pays or deductibles. Already, 300,000 American Indians and Alaska Natives now have coverage for preventive services without additional cost sharing.

Decreasing Costs and Increasing Coverage for American Indians and Alaska Natives

Affordable Insurance Exchanges are one-stop marketplaces where consumers can choose a private health insurance plan that fits their health needs. Starting in 2014, they will offer to the

public the same kinds of insurance choices members of Congress will have. The new law also provides middle class tax credits to families to help pay for private health insurance. And it expands the Medicaid program to families of four with incomes of up to \$29,000. The new Exchanges, tax credits and Medicaid expansion will result in as many as 600,000 American Indians and Alaska Natives becoming eligible to get coverage.

Removing Limits on Health Benefits

The law bans insurance companies from imposing lifetime dollar limits on health benefits – freeing cancer patients and individuals suffering from other chronic diseases from having to worry about going without treatment because of their lifetime limits. Already, approximately 500,000 American Indians and Alaska Natives are free from worrying about lifetime limits on coverage thanks to the new health care law. The new law also restricts the use of annual limits and bans them completely in 2014.

Scrutinizing Unreasonable Premium Increases

In every State and for the first time ever, insurance companies are required to publicly justify their actions if they want to raise rates by 10 percent or more. And an increasing number of States have more power to block unreasonable premium increases from taking effect.

Providing New Coverage for Young Adults

Insurance companies are now required to allow parents to keep their children up to age 26 on their insurance plans. This means that over 2.5 million young adults have gained coverage because of the new health care law, including 29,000 American Indians and Alaska Natives.

Protecting Patients' Choice of Doctor

Under the new health care law, American Indians and Alaska Natives joining new insurance plans have the freedom to choose from any primary care provider and OB-GYN in their health plan's network, without a referral.

Permanently Reauthorizing the Indian Health Care Improvement Act

The new law permanently reauthorized the Indian Health Care Improvement Act, which authorizes Congress to fund health care services for American Indians and Alaska Natives through the Indian Health Service. The law also expands and authorizes new programs in the Indian Health Service to improve the health of all American Indians and Alaska Natives.

Decreasing Costs for Seniors with Medicare

Under the new law, seniors can receive recommended preventive services such as flu shots, diabetes screenings, as well as a new Annual Wellness Visit, free of charge. So far, more than 32.5 million seniors have already received one or more free preventive services, including the new Annual Wellness Visit. That includes more than 104,000 American Indians and Alaska Natives with Medicare. The new law also provides relief for people in the Medicare prescription drug coverage gap or donut hole – the ones with the highest prescription drug costs. As a first step, in 2010, nearly four million people in the donut hole received a \$250 check to help with their costs. In 2011, 3.6 million people with Medicare received a 50 percent discount worth a total of \$2.1 billion, or an average of \$604 per person, on their brand name prescription drugs

when they hit the donut hole. Seniors will see additional savings on covered brand-name and generic drugs while in the coverage gap until the gap is closed in 2020.

Providing Tax Credits for Small Businesses

Tax credits for small businesses included in the Affordable Care Act will benefit an estimated two million workers who get their insurance from an estimated 360,000 small employers who will receive the credit in 2011. In 2014, small business owners will get more relief with tax credits and affordable insurance choices in the new Affordable Insurance Exchanges in every State. For the first time, they will have a marketplace where they can see and compare their health plan options in one place, and insurers will have to actively compete for their business.

Increasing Access to Community Health Centers

The new law increases the funding available to the more than 1,100 community health centers in all fifty states to enable them to double the number of patients they served from 19 million to nearly 40 million by 2015. Health centers have received funding to create new health center sites in medically underserved areas, to enable health centers to increase the number of patients served, to expand preventive and primary health care services, and to support major construction and renovation projects.

Reducing the Health Care Workforce Shortage for American Indian and Alaska Native's Communities

The new health care law includes new resources that will boost the number of doctors, nurses and health care providers in communities where they are needed most, as well as diversified the workforce, so racial and ethnic minorities are better represented.

Reducing Health Disparities

The new health care law invests in increase data collection and research about health disparities, as well as initiatives to increase the racial and ethnic diversity of health care professionals and strengthen cultural competency training among health care providers. It also elevates the National Center on Minority Health and Health Disparities at the National Institutes of Health from a Center to a full Institute, reflecting an enhanced focus on minority health. In fact, in 2011, HHS released our first-ever, department-wide Action Plan to Reduce Health Disparities, and has begun the process of upgrading data collection standards to better understand and ultimately eliminate health disparities.