# Short Summary of the Indian Health Care Improvement Act and the Patient Protection and Affordable Care Act

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New	IHCIA Short Title	Description of Provision
155	Eligible Indian Veteran Services	Establishes procedures to facilitate the provision of health services to eligible Indian veterans by the IHS and Department of Veterans Affairs.



New	IHCIA Short Title	Description of Provision
156	Nondiscrimination under Federal Health Care Programs in Qualification for Reimbursement for Services	Provides that IHS, tribal and urban Indian organization programs shall be eligible for participation in any Federal health care program to the same extent as any other providers, if the Indian program meets the generally applicable State or other requirements for participation.



New	IHCIA Short Title	Description of Provision
157	Access to Federal Insurance	Allows an Indian tribe or tribal organization carrying out a program under the Indian Self-Determination and Education Assistance Act and an urban Indian organization carrying out a program under Title V of IHCIA to purchase coverage for its employees from the Federal Employees Health Benefits Program.



New	IHCIA Short Title	Description of Provision
134	Licensing	New provision exempts a licensed health care professional who is employed by a tribally operated health program from state licensing requirements if the professional is licensed in any state, as is the case with IHS health care professionals.



H.R. 3590 Section	Short Title	Description of Provision
Health	Exchanges	
1311(c) (6)(D)	Affordable Choices of Health Benefit Plans: Enrollment Periods	Authorizes the Secretary of Health and Human Services (HHS) to require the Exchange to provide for special monthly enrollment periods for Indians -thus giving Indians more time to enroll in insurance plans offered through the Exchange.



H.R. 3590 Section	Short Title	Description of Provision
Cost Sha	aring Reduction	
1402(d) (1)	Reduced Cost- Sharing for Individuals Enrolling in Qualified Health Plans: Special Rules for Indians – Indians Under 300% of Poverty	Any individual Indian enrolled in any qualified health plan through the exchange whose household income is less than 300% of the federal poverty line (FPL) shall be treated as an eligible insured. No costsharing for Indians under 300% of the federal poverty level for any insurance plan or package offered through the Exchange.



H.R. 3590 Section	Short Title	Description of Provision
Cost Sha	ring Reduction	
1402(d) (2)	<ul><li>Items or services furnished through Indian Health Providers</li></ul>	If an Indian beneficiary enrolled in an Exchange health insurance plan is furnished an item or a service directly by IHS, an Indian Tribe, Tribal Organization, or Urban Indian Organization or through referral under contract health services, no cost-sharing under the plan shall be imposed under the plan for such item or service provider, and the issuer of the plan may not reduce the payment to any such entity for service or items. (Only for Indians at or below 300% of FPL.)

H.R. 3590 Section	Short Title	Description of Provision
Health Ex	changes	
1411(b) (5)(A)	Procedures for Determining Eligibility for Exchange Participation, Premium Tax Credits and Reduced Cost- Sharing, and Individual Responsibility Exemptions	The penalty tax for failure to comply with the individual mandate cannot be assessed against an Indian member of federally recognized Indian tribe.



H.R. 3590 Section	Short Title	Description of Provision
Individu	ual Responsibility	
1501 (b)	Requirement to Maintain Minimum Essential Coverage	No penalty for failure to maintain minimum coverage can be assessed against a member of an Indian tribe.



H.R. 3590 Section		Description of Provision
Protection for American Indians and Alaska Natives		
2001	No Cost Charing	Drobibiting goot oboring for Indiana

2901 No-Cost Sharing for Indians With Income At or Below 300% of

FPL
Enrolled in
Coverage
Through a
State Exchange

Prohibiting cost sharing for Indians enrolled in any qualified health plan in the individual market through an exchange.



H.R. 3590 Section	Short Title	Description of Provision
Materna	al and Child Healt	h Services
2951	Maternal, Infant, and Childhood Home Visiting Programs	Requires the Secretary to create an I/T/U specific program for early childhood home visitation program with grant and set asides of 3% of funding for I/T/Us, tribal entities preferred.



H.R. 3590 Section	Short Title	Description of Provision
Healtho	are Workforce	
5304	Alternative Dental Health Care Providers Demonstration Project	Awards grants to 15 eligible entities to establish program to establish training program to train and employ alternative dental health care providers. Eligible entities include IHS facility or health facility operated by a Tribe, Tribal organization, or urban Indian organization.



H.R. 3590 Section	Short Title	Description of Provision	
Medicare, Medicaid, and CHIP Program Integrity			
6402	Enhanced Medicare and Medicaid Program Integrity Provisions	Requires that the Integrated Data Repository of the CMS shall include, at minimum, claims and payments data from certain programs including IHS and the Contract Health Services Program. Also requires the Secretary to enter into agreements with certain individuals of agencies, including IHS Director, to share and match data in the record system of the respective agencies with data in the HHS system for the purposes of identifying potential fraud, waste, and abuse.	

H.R. 3590 Section	Short Title	Description of Provision	
Revenue Provisions			
9021	Exclusion of Health Benefits Provided by Indian Tribal Governments	If an individual Tribe buys health insurance to its members or sets up an HMO those benefits cannot be deemed income by the IHS for tax purposes or for eligibility into any SSA program.	

