

Key Affordable Care Act and Final Provisions Specific to Tribes

- **Section 1402(d)(1)**: Any individual Indian enrolled in a qualified health plan through the Exchange whose household income is less than 300% of the federal poverty level shall be treated as an eligible insured. All cost-sharing is eliminated for Indians under 300% of the federal poverty level enrolled in any individual market insurance plan offered through the Exchange.
- **Section 1402(d)(2)**: If an Indian beneficiary enrolled in a qualified health plan is furnished an item or a service directly by IHS, an Indian Tribe, Tribal Organization, Urban Indian Organization, or through referral under contract health services, no cost-sharing under the plan shall be imposed for the item or service, and the issuer of the plan may not reduce the payment to any such entity for services or items.

Key Affordable Care Act Provisions Specific to Tribes

- **Section 1311(c)(6)(d)**: The Exchange must provide for special monthly enrollment periods for Indians.
- **45 CFR 5000A(e)(3)**: Exempts members of Indian Tribes from the shared responsibility payment, or penalty, for failure to comply with the requirement to maintain minimum essential coverage.