

The mission of the Michigan Department of Insurance and Financial Services is to ensure access to safe and secure insurance and financial services fundamental for the opportunity, security and success of Michigan residents, while fostering economic growth and sustainability in both industries.

In addition, the Department provides consumer protection, outreach, and financial literacy and education services to Michigan citizens.

For more information please contact DIFS at 877-999-6442 or visit michigan.gov/DIFS.

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Department of Insurance and Financial Services

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HEALTH INSURANCE

FOR AMERICAN INDIANS & ALASKA NATIVES



DIFS  **DEPARTMENT OF
INSURANCE AND
FINANCIAL SERVICES**

WHAT DOES AN AFFORDABLE CARE ACT (ACA) PLAN COVER?

No one plans to get sick or hurt but most people need to get treated for an illness or injury or need preventative care at some point. Health insurance helps pay the costs of these services.

All ACA health plans cover Essential Health Benefits, including:

- Doctor visits
- Emergency room visits
- Hospital stays
- Pre and post natal and newborn care
- Mental health and substance use treatment
- Rehabilitative services
- Laboratory tests
- Preventive care
- Child health care
- Preventive care

Your insurance policy's Summary of Benefits will show what types of care, treatments, and services are covered, including how much the insurance company will pay for different treatments in different situations.

The Health Insurance Marketplace provides health plan shopping and enrollment services through websites, call centers, and in person help, and tribal members may qualify for additional benefits and protections.

BENEFITS OF BUYING HEALTH INSURANCE IN THE MARKETPLACE

- If you buy a Marketplace plan and your income is between 100% and 300% of the federal poverty level, you can enroll in a "zero cost sharing" plan. This means you won't have to pay any out-of-pocket costs --like deductibles, co-payments, and coinsurance -- when you get care. You will be responsible for paying the premium for the coverage.
- If you get services from an Indian Health Care Provider, you won't have any out-of-pocket costs like co-payments, coinsurance, or deductibles, regardless of your income.
- You can enroll in a Marketplace Health Insurance Plan any time, not just during the yearly Open Enrollment Period. You can change plans as often as once a month.
- You can view available plans and associated premiums through the [healthcare.gov](https://www.healthcare.gov) website without providing personal information. You may also contact your tribal leadership to discuss other options which may be available to you.
- If you meet the eligibility requirements, premiums may be reduced through the premium tax credits or subsidies.

WHAT ARE THE COSTS OF GETTING HEALTH INSURANCE?

For insurance you'll pay:

- A premium each month.
- Cost-sharing as stated in your plan unless you select a zero cost-sharing plan.

The maximum out-of-pocket amount is the most you will pay in a year. After you pay that much, your insurer pays for everything else.

WHY BUY INSURANCE WHEN I CAN GO TO INDIAN HEALTH SERVICE (IHS)?

Buying a health insurance policy gives you:

- The ability to get care in areas where there is no IHS.
- Access to services IHS does not provide.
- A wider choice of doctors.

