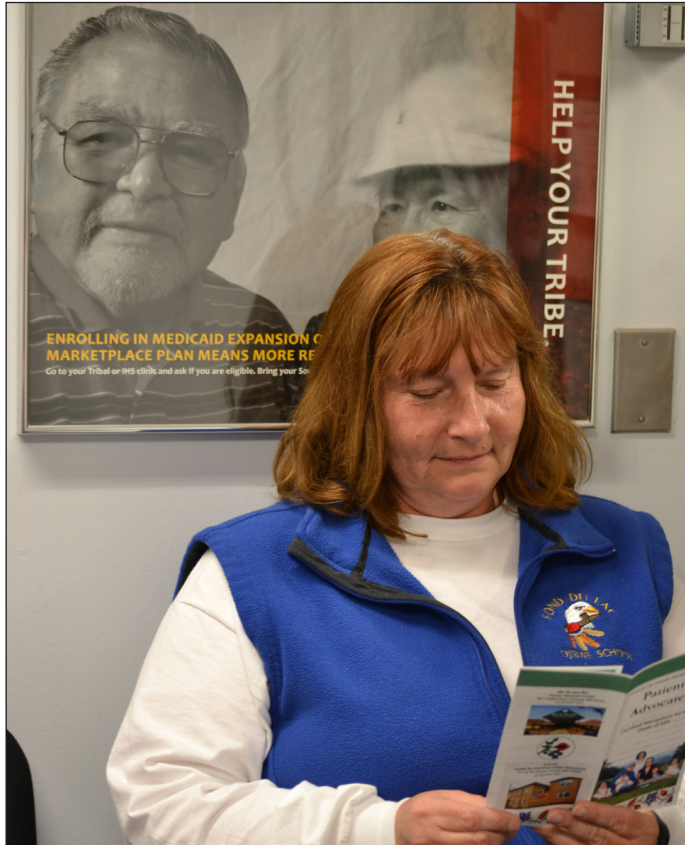




Health Care Reform in Indian Country

Self-Governance Tribes Striving Towards Excellence in Health Care



Lorraine Houle uses her personal experience to encourage others to apply for insurance.

Story by Mim Dixon
Photographs by Teresa Angell

CLOQUET, MN —

When the Fond du Lac Band of Lake Superior Chippewa (FDL) began planning for the Patient Protection and Affordable Care Act (ACA), they already had an effective campaign in place to let Tribal citizens know that enrolling in health insurance benefits everyone in the Tribe.

In 2013, the FDL Band of Lake Superior Chippewa Tribal Council approved a Tribal Sponsorship program called FDL Total Coverage mostly for people under 300 percent of the federal poverty level who enrolled in MNsure, the marketplace set up by Minnesota under ACA. They

expected about 80 people to enroll and set aside \$134,000 to pay the balance of their premiums after federal tax credits.

A funny thing happened. In the first year, only 10 people signed up for MNsure plans and their combined premiums cost the Tribe only \$9,767.

The unexpected low enrollment was not due to lack of effort. Seven trained FDL staff assisted 800 people with enrollment during 2014.

“At the end of the first year, we evaluated our experience,” reports Jennifer DuPuis, Associate Director of Fond du Lac Human Services. The main reason that enrollment in the MNsure was lower than expected is that most Tribal citizens who did not have insurance provided by their

Fond du Lac Band uses
Tribal Sponsorship to

Reach Goal of
Health Insurance for All

employer qualified for Minnesota programs that covered people below 200 percent of the federal poverty level with no premiums or co-pays. Minnesota is the only state to have Medicaid, Medicaid Expansion and a Basic Health Plan (called MinnesotaCare).

With approximately 500 new enrollees in Medicaid and careful attention to billing, FDL's income from Medicaid increased by \$1.62 million in 2014, an increase of 11 percent over the previous year.

When the open enrollment

period began in October 2014 for the 2015 coverage year, Human Services Division staff continued their aggressive approach to Tribal Sponsorship. They recognized their accomplishments during the first enrollment period and realized that less than 10 percent of their 7,309 user population remained uninsured. Second year open enrollment focused on re-enrolling people and reducing the list of uninsured. The FDL Total Coverage program included the policy of sponsoring people above the 300% FPL on a case-by-case

basis and a thorough assessment was done for each patient who exceeded 300% FPL. Five individuals above 300% of FPL were enrolled for the 2015 coverage year because of the income and savings that would be realized by the Band.

Paul Klassen is one of the new enrollees in 2015. At 56 years old, the retired carpenter is not yet eligible for Medicare. He works several part-time jobs and his wife is also employed, so their combined income is too high for tax credits from ACA.



Jennifer DuPuis, Associate Director of Fond du Lac Human Services, reports that more than 90 percent of clinic users have insurance.

Reaching Goal

continued

However, Mr. Klassen's rheumatoid arthritis treatments and other health care needs were costing FDL nearly \$70,000 per year in Purchased and Referred Care dollars.

Without any premium tax credits, FDL Total Coverage pays \$369 per month for a bronze plan for Mr. Klassen. As an enrolled Tribal member, he has no deductibles or co-pays. By expanding their Tribal Sponsorship program to cover him, FDL pays \$4,428 per year for insurance and receives an estimated \$67,792 in revenues and savings. For every dollar they spend on insurance for Mr. Klassen, they expect a return of \$15.30 on their investment.

John Zacher is another Tribal citizen who enrolled in MNsure under the expanded Tribal Sponsorship program. Federal tax credits pay about half of the cost of his premiums, and FDL Total Coverage pays \$238 per month. The insurance is expected to save the Tribe about \$8,000 the first year, as his prescription drugs currently cost \$10,854 per year and the annual insurance cost to the Tribe is \$2,856.

"We have a very progressive clinic here – it is a role model for the rest of the nation," Mr. Zacher says with pride.

In the first quarter of 2015, FDL Total Coverage was paying a portion or all of the premiums for 15 people enrolled in insurance

through MNsure at an estimated annual cost of \$36,000.

Ms. Dupuis believes that it is important to have a consistent message. She says at FDL that message is: (1) "We are here to help you," and (2) "An increase in insurance helps everyone."

Shala Topping can attest that "we are here to help you" is more than just a slogan. FDL's Patient Advocate Peggy Broughton helped Ms. Topping enroll in a bronze plan through MNsure. With FDL Total Coverage paying the balance of premiums after tax credits, there was no cost to Ms. Topping. As an enrolled Tribal member, she has no deductibles or co-pays.

"I'm not sure how insurance works still," says Ms. Topping. "I just talk to Peggy when there is a problem and she makes it better."



Shala Topping calls her experience with MNsure "awesome."

Ms. Topping said she received one bill while she had insurance. She brought it to Ms. Broughton who changed the address on the account so that the Tribal clinic would receive any future bills.

"It was awesome! It's one thing I don't have to worry about or pay attention to," Ms. Topping raves about her experience. "I love Peggy! I have referred a couple of people to her. She handles everything."

Now that more than 90 percent of FDL clinic users have insurance, it is Tribal members who are referring their family and friends to



Health insurance is now paying for John Zacher's prescription drugs.

the enrollment assisters. They are repeating the message, "Insurance helps other people in the Tribe."

One shining example is Lorraine Houle, who is raising her 17-year-old grandson, John. While Ms. Houle receives health insurance from her employer, she had decided it was too expensive to cover her grandson as a dependent under her insurance. She relied on the Tribe to provide his health care.

After reading a brochure about FDL Total Coverage in the waiting room of the Tribal clinic, she made an appointment with Ms. Broughton. She not only brought John to the appointment, but also her son Steve who has four daughters ranging in age from 4 to 15 years old. It turned out that everyone qualified for Medicaid coverage. There was no cost to them or FDL for the added coverage.

"It was so simple," Ms. Houle recalls.

She used her personal experience to encourage others to apply for insurance. For the past 25 years, Ms. Houle has been the Coordinator of the Family and Child Education (FACE) Program at FDL in Cloquet, MN. She invited Human Services staff to a FACE Family Circle to explain why FDL wants people to have insurance coverage and how the Affordable Care Act can help them. As a

result, seven more families signed up for appointments with Patient Advocates and received coverage.

"Even though Native Americans are exempt from the tax penalty, we are under-covered for insurance," Ms. Houle explains. "Having insurance helps other people in the Tribe." ■



Patient Advocate Peggy Broughton "handles everything."

This article is part of the Success Stories project sponsored by Tribal Self-Governance Advisory Committee (TSGAC). Article may be reprinted in Tribal newspapers and other places. More information on Tribal Sponsorship and the Affordable Care Act is available at www.tribalselfgov.org



Paul Klassen has a MNsure plan with premiums paid by FDL Total Coverage.