

Protecting Medicaid Coverage for American Indian and Alaska Native Patients

Implementation Guide for Urban Indian Organizations | September 2026

WHO IS PROTECTED?

Federal Medicaid law excludes Indians, Urban Indians, California Indians, and individuals otherwise determined eligible for IHS from the new Medicaid work requirement and the six-month renewal requirement. This guide refers to those exclusions collectively as the **AI/AN protections**. The implementation challenge is making sure states correctly identify people who qualify for these protections.

WHAT YOUR UIO SHOULD HAVE IN PLACE

1 Confirm how your state identifies people who qualify for the AI/AN protections

- ➔ Ask what data the Medicaid agency uses to identify people who qualify for the AI/AN protections and request that the state send your UIO a list of individuals at risk of loss of coverage to check against your UIO's patient list.
- ➔ Confirm the process recognizes the full protected population - not only enrolled members of federally recognized Tribes.
- ➔ Ask whether the state uses existing information before requesting anything from the patient.

2 Know what happens when the AI/AN protections are not recognized

- ➔ Identify the form, portal, phone number, or other process a patient must use when the state fails to recognize the AI/AN protections.
- ➔ Know what information or documentation the state accepts and any response deadlines.
- ➔ Keep the current state instructions and contact information in one shared location.

3 Create an internal notice-response process

- ➔ Designate one Medicaid AI/AN protections point person.
- ➔ Give front-desk, enrollment, billing, and clinical staff simple routing instructions for patients who receive a notice.
- ➔ Have appropriate staff review any request for the UIO to provide patient information to the state.
- ➔ Be familiar with and review guidance on the AI/AN protections, the statutory definitions, and IHS eligibility to assist with checking whether patients may qualify for the AI/AN protections. It is important to remember that patients may not be aware of their eligibility for AI/AN protections.

4 Document and escalate problems

- ➔ Know the state Medicaid escalation or appeal route before a patient is at risk of losing coverage.
- ➔ Track incorrect notices, requests to meet work requirements, and problems documenting eligibility for the AI/AN protections.
- ➔ Report recurring or systemic implementation problems to NCUIH.

WHEN A PATIENT BRINGS IN A WORK-REQUIREMENT OR RENEWAL NOTICE

1. Do not assume the notice applies.
2. Route the patient to the UIO's designated Medicaid AI/AN protections lead.
3. Check the state process and confirm whether the patient's protection was recognized.
4. Use the state correction or verification process; escalate promptly if coverage is at risk.

EXPERIENCING AN IMPLEMENTATION PROBLEM?

If a patient who qualifies for these protections is incorrectly subjected to a work requirement, an inappropriate six-month renewal cycle, or risks losing Medicaid coverage, contact NCUIH at policy@ncuih.org

Your UIO's Medicaid Response Desk Reference

CONTACTS AND PROCEDURES | Complete before staff distribution

Use this page to record the contacts and state-specific procedures staff need when a patient receives a work requirement or renewal notice. Update it whenever state procedures or UIO contacts change.

UIO RESPONSE CONTACTS

Medicaid / AI/AN Protections Lead	
Phone / Extension	
Email	
Backup contact + Phone / Email	

STATE MEDICAID CONTACTS

State Medicaid Agency / Program	
Primary State Contact	
Phone / Email	
Appeal or Escalation Contact	
Submission Portal / Phone / Location	

LOCAL RESPONSE PROCEDURES

Work Requirement Correction Process	
Six-Month Renewal Correction Process	
Mixed-Household Renewal Process <i>Some households may include members who remain on a 12-month renewal cycle and others who are subject to six-month renewals.</i>	
Documentation the State Accepts	
Internal Location for Current State Instructions	

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LAST REVIEWED: _____ REVIEWED BY: _____