

National Indian Health Board



Story Banking Campaign



Story Banking

- NIHB is launching a story banking campaign to record the positive stories of impact on Indian health
 - Medicaid
 - Medicare
 - Health Insurance Marketplace
 - Private Insurance
 - Purchased and Referred Care
 - Children's Health Insurance Program or any other health coverage resources
- The stories can be short and do not have to include the actual name of the participant or other sensitive details
- Personal information will not be shared



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Importance of Story Banking:

Highlighting the importance of all health insurance coverages for AI/ANs, such as Medicaid, Medicare, and the Children's Health Insurance Program (CHIP) is vital to the role that NIHB plays in advocating for the health and wellness of AI/ANs.

- Advocacy Work
- Story Telling
- Recording History
- Celebrating specific areas



Lucy is a 19 year old female enrolled in the [Sisseton Wahpeton Oyate Tribe](#). She is pregnant with her first child. Lucy went to her doctor's appointment at the local Indian health facility and found out she was in the early stages of labor. Given the local facility did not have a labor and delivery unit, she was advised to go to a hospital outside the Indian health system. Lucy applied for Medicaid and due to her pregnancy and meeting financial eligibility requirements, her application was approved. Her hospital charges for the delivery totaled about [\\$17,000](#). This service was covered by [Medicaid](#) and the hospital charges were paid. Additionally, because the patient was a tribal member, she had no out-of-pocket costs.

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A 23 year old single male, member of the Shoshone Tribe, and a college student was covered under his parent's private insurance plan. He was admitted to the hospital while away at school in another state. His private insurance did not cover all of the costs of his care and he was left to pay the remaining balance. He brought these medical bills to his Purchased Referred Care (PRC) office. His PRC program requested he apply for Medicaid in the state where he was attending school, which was a Medicaid expansion state. After qualifying for Medicaid, he received 3 months of retroactive Medicaid coverage and Medicaid paid the remaining balance he owed for the care he received.

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Charles is a **Native Veteran** who lives in Arizona and is eligible for **VA health care**. Charles's Tribal Veterans Office was able to help him enroll in the closest VA Medical Health Care System, making him eligible to be admitted to a **residential VHA Domiciliary center**. The goal of the Domiciliary is to provide a residential level of care to address goals of rehabilitation, recovery, health maintenance, improve quality of life and community integration. With the help of the VA services he received there he was able to better control his substance abuse addiction and now lives a clean, sober life. Charles can now be seen biking in the early mornings, on the road to wellness, thanks to his care through the VA.

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Help Us Tell Stories!

Let NIHB staff work with you to tell your stories. They can be short, avoid actual names, and submitted in multiple forms.

- In person
- Call or Email us!

