



NACS NEWS

*A Tradition
of Caring*

May/June 2015
Volume 19, Issue 3

Native American Community Services of Erie & Niagara Counties, Inc.

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What Is “The Affordable Care Act (ACA)”

submitted by: Carmen Brown, Economic Self-Sufficiency Specialist

The *Affordable Care Act* (ACA), or “Obamacare”, is a relatively new law aimed at reforming the American health care system. Its focus is on providing more Americans with access to low cost health insurance, improving the quality of health care and health insurance, watching over the health insurance industry, and lowering health care spending in the US. There is a lot involved in passing and putting into effect the ACA, a unique portion of which involves Native Americans. Throughout this article, we will cover the special affect the ACA has on the people of Turtle Island.

There has been a lot of talk about the Marketplace, or the exchange as it is sometimes called, especially relating to getting your taxes filed this year. The Shared Responsibility Payment is what some people who did not have health care coverage in 2014 will have to pay, though we will come back to that later on.

The Marketplace is a resource where individuals, families, and small businesses can go to learn about their health coverage options, a resource where

they can compare health insurance plan costs, benefits, and other important features. The Federal government has a Marketplace at:

www.healthcare.gov.

New York State chose to do their own website so visit:

www.nystateofhealth.ny.gov.

With putting the ACA into use, came the expansion of Medicaid and *Children’s Health Insurance Program (CHIP)*. If you are not receiving health insurance from your employer, visit these websites to apply for either private insurance, or to apply for Medicaid and/or CHIP. However, the option of applying for health coverage over the phone, or by paper application is also available.

The deadline to have health coverage ended February 15th of this year, marking the close of open enrollment for many Americans. However, the Indigenous people of America were exempt from this deadline, and can enroll in private health coverage any time of the year they choose, though limited to changing plans once a month. Medicaid has open enrollment, for anyone needing to apply, throughout the

year.

Native Americans who are a member of a federally recognized Tribe, Alaskan Natives, or people otherwise eligible for services from an Indian health care provider through IHS are not required to have health insurance, and are exempt from having to pay the Shared Responsibility Payment when filing their taxes. You are able to use this exemption for the whole year, and qualify for an exemption for any month you had any of these statuses for at least 1 day or for the full year if you had the status all year. You can claim this exemption for yourself or anyone else on your federal tax return who qualifies.

A noteworthy portion of people included by this exemption I’d like to specifically talk about for a moment, are people eligible for services from IHS. This includes, but is not limited to, non-status or non-enrolled Indigenous people who are able to receive, or are receiving services from IHS.

Depending on where you go to file your taxes this year, you should have an exemption form

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filled out to make sure all your bases are covered. When filing at places like the free tax preparation sites run by *volunteer income tax assistance* (VITA) preparers, the systems they use already come pre-loaded with the correct exemption forms. You would just have to bring proof of Tribal affiliation for yourself, and people you are claiming. Visit: <https://www.healthcare.gov/exemption-tool/#/results/details/tribal> to attain the forms necessary for filing, and answers to other tax specific questions.

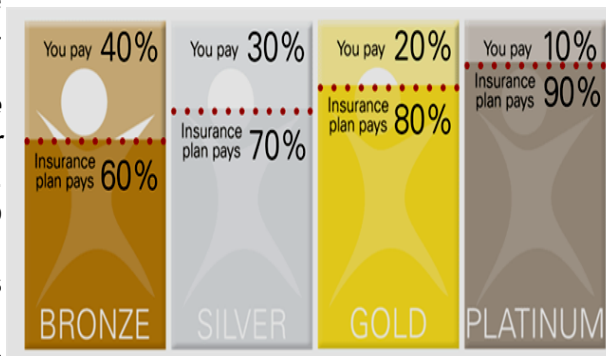
All that said, if you had health insurance coverage for the entire year, you do not have to go through the process of applying your exemption, unless you would like to. Those who enroll in health insurance through the Marketplace, be it private or Medicaid, can continue to receive health care from *Indian Health Service (IHS), tribes or tribal organizations, or urban Indian organizations (ITUs)*. Enrolling in the Marketplace adds to the pool of services available to you, and adds to the pool of resources available to the community. Indian health care providers can bill Marketplace health plans, referred to as *Qualified Health Plans (QHP)*, or Medicaid for services provided to their patients and the reimbursements collected benefit the entire tribal community.

All QHP through the Marketplace offer a comprehensive package of items and services, known as *essential health benefits (EHB)*:

- ▶ Outpatient care you get without being admitted to a hospital (ambulatory patient services)
- ▶ Visits to the emergency room
- ▶ Hospitalization
- ▶ Maternity and newborn care

- ▶ Mental health, behavioral health, and substance abuse treatment
- ▶ Prescription drugs
- ▶ Rehabilitative and habilitative services and devices (such as physical, occupational, or speech therapies that help improve skills for daily living)
- ▶ Laboratory services
- ▶ Preventive and wellness services and chronic disease management (such as screenings, check-ups, and monitoring and coordinating treatment)
- ▶ Pediatric services (including oral and vision care)

Qualified Health Plans come in four different “metal” levels: Bronze, Silver, Gold, and Platinum. Each plan will pay a different amount towards the total costs of your care.



A special protection that Native Americans can apply for is zero cost sharing or limited cost sharing when enrolling in a Qualified Health Plan. If your income is at or below 300% of the federal poverty level (see table provided), you could qualify for zero cost sharing. If you are above 300% of the federal poverty level, you could qualify for reduced cost sharing.

That would mean that you pay no out of pocket costs like copays, deductibles, and co-insurance. Due to this, Bronze and Silver level plans might be most beneficial to Natives be-










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cause they have the highest out of pocket expenses, expenses that Natives can be exempt from paying.

However, this exemption from paying out of pocket costs does not apply for premiums, or the

fees paid for coverage of medical benefits over a given timeframe. When applying for private health insurance through the Marketplace, you are responsible for paying the premiums. Based on your income, you might be able to

apply for *Advanced Premium Tax Credits (APTC)* that can help pay part or all of your premium costs. Some Nations have elected to pay the premiums on behalf of their members, contact your Nation to see if that is something they will do.

Why Does Household Income Matter?					
People In Family (2014)	100% FPL (In household)	138% FPL (Medicaid Expansion)	200% FPL (CHIP)	300% FPL (Zero Cost Sharing)	400% FPL (APTC)
1 	\$11,670	\$16,105	\$23,340	\$35,010	\$46,680
2 	\$15,730	\$21,707	\$31,460	\$47,190	\$62,920
3 	\$19,790	\$27,310	\$39,580	\$59,370	\$79,160
4 	\$23,850	\$32,913	\$47,700	\$71,550	\$95,400
5 	\$27,910	\$38,515	\$55,820	\$83,730	\$111,640
6 	\$31,970	\$44,119	\$63,940	\$95,910	\$127,880
7 	\$36,030	\$49,721	\$72,060	\$108,090	\$144,120
8 	\$40,090	\$55,324	\$80,180	\$120,270	\$160,360
Additional Persons 	\$4,060	\$5,603	\$9,020	\$12,180	\$18,040

This new legislation is a lot to take in, though we have not even touched on Medicare or CHIP yet! There are more articles to come in the future covering these largely confusing topics. However, if in the meantime you have any questions, please feel free to contact us here at NACS!

A great deal of the information gathered in this article comes from:
<http://obamacarefacts.com/>,
<http://www.cms.gov/index.html>,
 and <http://www.ihs.gov/aca/>.

Six Feathers Native Wellness Group—"Landing On Our Feet"

submitted by Pete Hill, Community & Cultural Services Director

A culturally-based, recovery-oriented group to assist community members along their paths to wellness, sobriety and living a healthy life as proud Ongwehonweh people & for everyone.

**Every Wednesday starting at 6:00 pm to 7:30 pm,
 at Native American Community Services
 1005 Grant St., Buffalo, NY, 14207
 For more information, please call:
 Monica, (716) 207-8528 or Pete, (716) 874-2797, ext. 342**

This group is open to ALL, regardless of race, color, creed or anything!

Please note: This support group is NOT an AA or NA group, counseling, or substance abuse treatment. This support group is to help community members seeking to live positive, healthy lifestyles regarding our choices.

Supported by caring individuals, foundations, & businesses.
 Nyah-weh! Thank you!

Area Youth Attends the White House

submitted by Star Wheeler, Health & Wellness Prevention Specialist

Rory C. Wheeler of the Seneca Nation, attended the *White House Convening on Creating Opportunity for Native Youth* on April 8, 2015. He was one of a few Native youth from across the country selected to attend this event. First Lady Michelle Obama delivered remarks at a White House convening on Creating Opportunity for Native Youth in the Eisenhower Executive Office Building. This event brought together philanthropic organizations, tribal leaders, Native youth, and Administration officials to build on the President's launch of Generation Indigenous, a Native youth initiative (which Rory is a founding member) that takes a comprehensive, culturally appropriate approach to help improve the lives of Native youth. Below is the speech given by the First Lady-

THE WHITE HOUSE
Office of the First Lady
For Immediate Release
April 8, 2015

Remarks of First Lady Michelle Obama, Generation-Indigenous Convening, As Prepared for Delivery, Washington, DC

Good morning everyone, and welcome to the White House. We are so thrilled to have you here today for our Generation Indigenous convening. I want to start by thanking Walter Isaacson and Senator Dorgan for their outstanding leadership and for the terrific work that they're doing at the Aspen Institute.

And as for T.C – there really are no words to express how proud I am of this young man and how impressed I am by his courage, determination and



maturity. Barack and I were blown away by T.C. and by the other young people we met when we visited T.C.'s tribe, the Standing Rock Sioux Nation, last June. And I want to start off today by telling you a little bit about that visit.

It began when we arrived in North Dakota, and as we left the airport where we'd landed, we looked around, and all we could see was flat, empty land. There were almost no signs of typical community life, no police stations, no community or business centers, no malls, no doctor's offices, no churches, just flat, empty land. Eventually, we pulled up to a little community with a cluster of houses, a few buildings, and a tiny school – and that was the town of Cannon Ball, North Dakota,

which is part of the Standing Rock Sioux Nation. And at that school, a small group of young people gathered in a classroom, anxiously but quietly waiting to meet with the President and the First Lady. These teens were the best and brightest – hand-selected for this meeting – and after we all introduced ourselves, they shared their stories.

One young woman was in foster care because of substance abuse in her household. She talked about how hard it was to be separated from her five siblings. One young man had spent his high school years homeless, crashing on the sofa of his friends, even for a period living in the local community center. Another young man had gotten himself into college, but when he got there, he had trouble choosing the right classes; he realized that he'd never been taught how to properly write an essay; and when family problems arose back home, he struggled to balance all the stress and eventually had to drop out. And just about every kid in that room had lost at least one friend or family member to drug or alcohol-related problems, or to preventable illnesses like heart disease, or to suicide. In fact, two of the girls went back and forth for several minutes trying to remember how many students in their freshman class had committed suicide – the number was either four or five...this is out of a class of 70.

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Just sit with that for a minute: four or five kids out of a class of 70 taking their own lives. So these are the challenges these kids are facing. This is the landscape of their lives.

But somehow – and this is what truly blew us away – somehow, in the face of all this hardship and all these tragedies, these kids haven't given up. They are still fighting to find a way forward, for themselves and for their community.

After losing her classmates to suicide, one young woman started volunteering at a youth program to help other kids who were struggling. One young man told us that when his family was struggling, he fended for himself for years, sleeping on friends' couches until he was old enough to become a firefighter. And that young man who had to leave college? Well, when he got back home, he discovered that his family problems were worse than he had thought. He found that his stepmother was on drugs and his four younger brothers were wandering the streets alone in the middle of the night. So at the age of 19, he stepped in and took over – and now, he's back in college while raising four children all by himself.

And then there's T.C. He was the last young person to speak that day, and after telling us his story – how he was raised by a single father, how he's lost so many people he loves, how his family struggles to get by – he then said to my husband "I

know you face a lot as President of the United States, and I want to sing an encouragement song for all of us to keep going." After everything these young people had endured, T.C. wanted to sing a song for us.

So if you have any doubt about the urgency or the value of investing in this community, I want you to just think about



First Lady, Michelle Obama, delivers her speech, April 8, 2015.

T.C. and all those other young people I met in Standing Rock. I want you to think about both the magnitude of their struggles and the deep reservoirs of strength and resilience that they draw on every day to face those struggles. And most of all, I want you to remember that supporting these young people isn't just a nice thing to do, and it isn't just a smart investment in their future, it is a solemn obligation that we as a nation have incurred.

You see, we need to be very clear about where the challenges in this community first started. Folks in Indian Coun-

try didn't just wake up one day with addiction problems. Poverty and violence didn't just randomly happen to this community. These issues are the result of a long history of systematic discrimination and abuse. Let me offer just a few examples from our past, starting with how, back in 1830, we passed a law removing Native Americans from their homes and forcibly re-locating them to barren lands out west. The Trail of Tears was part of this process. Then we began separating children from their families and sending them to boarding schools designed to strip them of all traces of their culture, language and history. And then our government started issuing what were known as "Civilization Regulations" – regulations that outlawed Indian religions, ceremonies and practices – so we literally made their culture illegal. And these are just a few examples. I could continue on like this for hours.

So given this history, we shouldn't be surprised at the challenges that kids in Indian Country are facing today. And we should never forget that we played a role in this. Make no mistake about it – we own this. And we can't just invest a million here and a million there, or come up with some five year or ten-year plan and think we're going to make a real impact. This is truly about nation-building, and it will require fresh thinking and a massive infusion of resources over generations. That's right, not just years, but generations.

But remember, we are talking

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about a small group of young people, so while the investment needs to be deep, this challenge is not overwhelming, especially given everything we have to work with. I mean, given what these folks have endured, the fact that their culture has survived at all is nothing short of a miracle.

And like many of you, I have witnessed the power of that culture. I saw it at the Pow Wow that my husband and I attended during our visit to Standing Rock. And with each stomping foot – with each song, each dance – I could feel the heart-beat that is still pounding away in Indian Country. And I could feel it in the energy and ambition of those young people who are so hungry for any chance to learn, any chance to broaden their horizons.

Even the smallest opportunity can make such a huge difference for these kids. I saw that firsthand when Barack and I invited the kids we met in Stand-

ing Rock to come visit us at the White House.



Rory with Jodi Gillette, Standing Rock Sioux, Special Assistant to the President for Native American Affairs

They arrived one morning last November, and we showed them around, and took them out for pizza and burgers, and spent some time talking and laughing and hanging out. Altogether, their visit to the White House was just one day long, but as we hugged each of those kids goodbye, one young woman said to Barack, “This visit saved my life.” And given the odds these kids

face, I don’t think she was exaggerating. So if we take a chance on these young people, I guarantee you that we will save lives. I guarantee it.

So we all need to work together to invest deeply – and for the long-term – in these young people, both those who are living in their tribal communities like T.C. and those living in urban areas across this country. These kids have so much promise – and we need to ensure that they have every tool, every opportunity they need to fulfill that promise.

So I want to thank you for your commitment to their futures and for everything you have already done for their communities. I want to thank you for coming here today to learn more about Generation Indigenous and how you can help. And I look forward to seeing the extraordinary impact that you all will have in the years ahead.

Thank you so much, and God bless.



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EmPower is administered by the New York State Energy Research and Development Authority (NYSEDA).

For more information, including eligibility guidelines and to apply for Empower, please contact us at (716) 783-2342 or send your questions to:

empower@newbuffaloimpact.com

SHARING SOME WONDERFUL NEWS from the SOLE
Department in Health and Wellness
Congratulations to some of our Senior PEEPs

Fatima Nor, one of our original PEEPs is graduating from Hutchinson Central-Technical High School this June and has been accepted into the University at Buffalo. Fatima will be studying Biomedical Sciences.

CONGRATULATIONS FATIMA!



Sydney Jones, will be graduating from Buffalo Academy of Sciences Charter School. Sydney will be entering into Pre-Med and Business Administration this fall at either Buffalo State College or at the University at Buffalo.

CONGRATULATIONS SYDNEY!

"No matter where you are, no matter what you do, never stop believing in the genius within you"

Author -unknown-

Congratulations Fatima and Sydney! I am very proud of you both!
-Julia-

AmeriCorps ABLE Providing Services in the EXCELL After School Program

submitted by Amy Huff, EXCELL Program Coordinator

The Service Collaborative of WNY (TSC) provides opportunities for all individuals to serve, challenging citizens to turn their ideals into action and their passion into positive change. Through transformational service and civic responsibility, The Service Collaborative of WNY is designing a sustainable future for our nation's communities.

AmeriCorps Builds Lives through Education (ABLE), a program of The Service Collaborative of WNY, mobilizes men and women in national service to revive and strengthen educational environments, expanding opportunities for today's youth and transforming America's future – one stu-

dent, one classroom, and one community at a time. ABLE members tutor students and develop educational programming to strengthen educational environments in Buffalo. While in service, ABLE members develop into leaders, positioning themselves for a lifetime of transformational service and civic responsibility.

Michael Perozzi is the AmeriCorps member working with Native American Community Services. He has been working with the EXCELL after school program since October of 2014. His current assignment includes working with 3rd and 4th grade students at the Native

American Magnet School. Michael concentrates his efforts on improving student achievement through tutoring and enrichment projects. Michael has several talents that support growth and learning among young people. He is a student at Buffalo State and has earned his bachelor's degree in Art Education and is currently pursuing a master's degree in Special Education. Michael's term of service allows him to spend an entire academic year with a group of students to maximize the member's impact. He is an asset to the students, staff, program and NACS.

Nya:weh for your service, Michael.

RIA Reaching Others: The Facts on Teen Drinking



Today, Eddy stole a beer from his father's refrigerator and drank it in his room. Sophie went to her friend's house for a sleepover, waited with her friend until everyone was asleep, and raided the liquor cabinet. Tommy's older brother bought him and his friend a six-pack of "hard lemonade," and they drank it in his garage. What do Eddy, Sophie and Tommy have in common with 4,747 other youth? They each had their first full alcoholic drink today. Every day in the United States, nearly 5,000 youth under the age of 16 have their first full drink of alcohol.

Underage drinking—when an individual below the age of 21 consumes alcohol—continues to be a problem in the U.S. and could have lasting repercussions. Studies show that teens who start drinking before the age of 15 are five times more likely to develop alcohol problems in their lifetime than those individuals who start drinking at the age of 21 or older.

Why do teens drink?

There are many reasons—here are some of the most common:

- ▶ **Misperception** – Young people generally believe that more people their age are drinking alcohol than is actually happening. They also believe that those who drink are drinking more heavily than they actually are. As seen in the sidebar, one-half of all 15-year-old teens have consumed alcohol; that also means that one-half of all 15-year-olds *have not* consumed alcohol.
- ▶ **Escape** – Some drink to escape their problems, including problems with peers, problems with parents or problems with school.
- ▶ **Risk-taking** – Some drink because they like to take risks. Many teens drink because they like to feel the rush that comes from doing something they are not supposed to be doing.
- ▶ **Curiosity** – Some drink out of curiosity. They want to know what it feels like to drink, so they drink to gain firsthand knowledge.
- ▶ **Feeling grown-up** – Some think drinking will help them feel grown-up. After all, many adults, including the teen's parents, drink, so they are just copying the behavior of those grown-ups.
- ▶ **Peer pressure** – Some drink because they see their friends drinking and feel they have to in order to "fit in." Or they think "all the cool kids drink."



Recent statistics

The University of Michigan conducts a yearly survey, "[Monitoring the Future](#)," that measures drug, alcohol and tobacco use among students in 8th, 10th and 12th grade.

The numbers from 2014 show a few encouraging signs:

- ▶ In 2014, 41 percent of all teens reported drinking in the past year, down from 43 percent in 2013.
- ▶ Nine percent of 8th graders, 24 percent of 10th graders, and 37 percent of 12th graders reported drinking alcohol over the previous month.
- ▶ This is a significant drop from 2009, when 15 percent of 8th graders, 30 percent of 10th graders, and 44 percent of 12th graders reported drinking over the previous month.
- ▶ In fact, teen alcohol use in 2014 is at its lowest point since the study began in 1975.
- ▶ Use peaked in 1997, when 61 percent of teens reported drinking in the past 12 months.

However, other studies offer troubling statistics that show education and intervention is still needed:

- ▶ The average age that boys have their first drink of alcohol is 11; for girls, the average age is 13.
- ▶ 37 percent of youth have had a drink by the 8th grade, and 72 percent have consumed alcohol by their high school graduation.
- ▶ At the age of 15 (generally equivalent to 9th/10th grade), 50 percent of teens have consumed at least one drink.

What are the consequences?

Teen drinking poses a wide variety of risks, including:

- ▶ **Impaired judgment** — Teens who drink make poor decisions, such as drinking and driving, using violence, and sexual activity.
- ▶ **Increased risk of assault** — Youth who drink are more likely to be victims or perpetrators of physical or sexual assault.
- ▶ **Impact on brain development** — The human brain continues to develop up to about the age of 25. Underage drinking can hurt the developing brain, creating problems in how it works.
- ▶ **Injury** — In 2008, more than 190,000 youth went to hospital emergency rooms for alcohol-related injuries—an average of 520 ER visits per day.
- ▶ **Death** — Between 4,000 and 5,000 underage drinkers die each year from alcohol-related car crashes, homicides, suicides, alcohol poisoning and accidents (e.g., falls, drownings, etc.).

Clues that a teen may be drinking

- ▶ Sharp drop in grades
- ▶ Sudden increase in behavioral problems
- ▶ Increased secretiveness
- ▶ New group of friends
- ▶ Less interest in appearance or family activities
- ▶ Memory and/or concentration problems

What can parents do?

- ▶ **Talk with teens** — Begin having conversations about alcohol use with children when they are young. Be consistent regarding what you communicate. Research shows that children whose parents are actively involved in their lives are less likely to drink alcohol.
- ▶ **Be a good role model** — If parents drink alcohol responsibly, they are showing their children that alcohol use need not be dangerous. Responsible alcohol use includes not driving following drinking, not drinking in excess, and not drinking to escape or otherwise deal with stress.
- ▶ **Social Norm Education** — Recognize that drinking is less common than most teens believe. If a group of 15-year-olds were asked how many high school sophomores drank alcohol, they would probably guess that 80 to 90 percent of their classmates drink, but the actual number is 50 percent. Educate in home and in schools that not everyone drinks.

Sources/Helpful Resources

[National Institutes of Health Underage Drinking Fact Sheet](#)

[Center for Disease Control Fact Sheet](#)

[Talking to Kids About Alcohol](#)

[Why Your Child Might Start Drinking](#)

[Get Help for Your Teen](#)



The dangers of binge drinking

Teens drink less frequently than adults, but when they do drink, they are more likely to drink heavily. The average amount of alcohol consumed by a teen per drinking occasion is five drinks, which falls under the category of binge drinking—defined as consuming five or more drinks in a single occasion.

Most recent estimates show that 5 percent of 8th graders, 14 percent of 10th graders, and 22 percent of 12th graders participated in binge drinking over the previous two weeks. In fact, about 90 percent of the alcohol consumed by youth under the age of 21 in the United States is in the form of binge drinking.

Although the rates of binge drinking are generally at their lowest levels in many years for 8th and 10th graders, it is still all too common. About one in five high school seniors report binge drinking at least once in the prior two weeks.

Even more troubling is the trend of “extreme binge drinking.” Some 12th-graders report having 10 or more, or even 15 or more, drinks in a row on at least one occasion in the prior two weeks. Drinking at such high levels can lead to serious consequences, including blackouts, alcohol poisoning, liver disease, neurological disorders and even death.



| Research Institute on Addictions

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Spring 2015

Native American Community Services
of Erie & Niagara Counties, Inc.
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