**REPLACED: 09/14/21** 

**CHAPTER 39: AMERICAN INDIAN 638 CLINICS** 

SECTION 39.2: BENEFICIARY REQUIREMENTS PAGE(S) 1

## **BENEFICIARY REQUIREMENTS**

A beneficiary qualifies as a member of the target population if he/she meets the following criteria:

- 1. Medicaid eligible; and
- 2. A person who is a member of an Indian tribe who is:
  - a. A member of a tribe, band, or other organized group of Indians, including those tribes, bands, or groups terminated since 1940 and those recognized now or in the future by the State in which they reside, or who is a descendant, in the first or second degree, of any such member, irrespective of whether he or she lives on or near a reservation;
  - b. An Eskimo or Aleut or other Alaska Native;
  - c. The Secretary of the Interior considers him/her to be an Indian for any purpose;
  - d. The Secretary promulgated regulations which determined him/her to be an Indian;
  - e. The natural or adopted child, step-child, foster-child, legal ward, or orphan of an eligible Indian, who has not attained 19 years of age; or
  - f. The spouse of an eligible Indian or who is of Indian descent if all of such spouses are made eligible, as a class, by an appropriate resolution of the governing body of the Indian tribe of the eligible Indian.

Indian tribe refers to any Indian tribe, band, nation, or other organized group or community, including any Alaska Native village or group or regional or village corporation as defined in or established pursuant to the Alaska Native Claims Settlement Act (85 Stat. 688) [43 U.S.C. 1601 et seq.], which is recognized as eligible for the special programs and services provided by the United States to Indians because of their status as Indians.