

National Indian Health Board NATIONAL TRIBAL COVID-19 RESPONSE

910 Pennsylvania Avenue, SE | Washington, D.C. 20003 | 202-507-4070 | www.nihb.org

3/24/2020

COVID-19 Testing in Indian Country

COVID-19 (Novel Coronavirus) is a new disease, and testing procedures are evolving quickly. Visit the Centers for Disease Control and Prevention (CDC) website for the most up to date information on testing eligibility and procedures at www.CDC.gov/coronavirus.

Who should be tested?

If you have symptoms of COVID-19, it is up to your healthcare provider or Tribal Health Department to decide if you should be tested. Most people with COVID-19 will get better at home, and there is no medicine that currently cures COVID-19. However, testing can be helpful for public health workers to see who may be at risk of COVID-19. The test shows if you have COVID-19 right now- not if you have had it in the past.

CDC recommends testing in these circumstances:

- You are in the hospital and have symptoms related to COVID-19 (cough, difficulty breathing, fever)
- You have a chronic condition that may put you at higher risk, such as diabetes, heart disease, HIV/AIDS, lung disease, etc. AND you have symptoms of COVID-19.
- You had contact with someone who had COVID-19, or who travelled to an affected area in the last 14 days AND you have symptoms of COVID-19

If you are seeking medical care or testing, please contact the clinic or testing site beforehand and tell them you think you have COVID-19. This will allow them to protect themselves and other patients from getting sick.



Where can I get tested?

Call your Indian Health Service (IHS), Tribal, or Urban (I/T/U) clinic to find out where testing is happening in your community. In some communities, separate testing sites have been set up. In others, your I/T/U clinic may offer the test.

What should I expect during the test?

During testing, your healthcare provider will swab your nose. They may also swab your throat. If you have a cough, they may also ask you to cough into a cup to collect a sample.

Your provider may also choose to test you for other illnesses such as the flu or strep throat.

After your test is taken, it will be sent away to a lab. Your healthcare provider may send this to a state or private lab that can check the sample. Testing time varies by location, but tests may take as little as one day, or as long as one week. Newer tests are being developed that may allow for faster results. Ask your provider for a timeline.



Image Source:
CDC.gov

What should I do if the COVID-19 test is positive?

Your healthcare provider is the best source of information.

Visit www.CDC.gov/coronavirus for full guidance on what to do if you are sick.

Keep others from getting sick:

Most people with COVID-19 will get better at home. It is important you keep others from getting sick.

- Stay at home except to get medical care. Tell your provider you have COVID-19 before any appointments.
- Avoid being around other people in public or in your home.
- Wear a facemask if you will be around other people, including during medical appointments.
- If you live with other people, try to stay away. If you can, stay in a separate room and use a separate bathroom. In particular, avoid contact with elders or people at high risk due to chronic disease.
- Cover your nose and mouth when you cough or sneeze.
- Wash your hands frequently with warm water and soap. If not available, use 60% or higher alcohol-based hand sanitizer.
- Clean surfaces in your home frequently- at least once per day.

Seek medical care if your symptoms get worse:

Seek medical help immediately if you have:

- Difficulty breathing
- Pain or pressure in your chest
- Confusion or trouble staying awake
- Bluish lips or face

Tell your healthcare provider or the 911 operator that you have COVID-19 before help arrives or before you arrive at a clinic or hospital. This will help protect others from getting sick.

Being isolated with COVID-19 can be difficult for many people, and it is normal to feel worried, sad, lonely, or confused. It is important to stay in contact with your loved ones through phone or email, and to do activities you enjoy or find relaxing. If you are struggling with managing your feelings, talk to your healthcare provider to get support from a professional. You can also call the **Disaster Distress Helpline** for support at **1-800-985-5990**.

Your healthcare provider is the best source of information. Keep them updated on your symptoms, and call them with any questions.

When can I stop self-isolation?


Once you feel better, you may want to stop isolating. The decision to stop should be made in partnership with your healthcare provider or Tribal health department.

In general, you can stop isolating when:

- You have no fever for at least 72 hours (3 days) without using medicine AND you have no other symptoms AND it has been at least 7 full days since you first got sick.
OR
- You have no fever without using medicine AND you have no other symptoms AND you have two negative COVID-19 tests, 24 hours apart.

What should I do if the test is negative?

A negative test results does not rule out that you may get sick at a later time. Monitor your symptoms, and talk to your healthcare provider about next steps. Follow your Tribe's guidance about social distancing. Continue to wash your hands frequently, avoid contact with others if COVID-19 is spreading in your community, and stay home if you feel sick.



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03/25/2020

Vulnerable American Indian and Alaska Native Populations

According to the Centers for Disease Control and Prevention (CDC), individuals with certain underlying health concerns are at higher risk of contracting and/or developing a severe illness from the Coronavirus (COVID-19). Based on available information to date, the following individuals are at a higher risk of severe illness from COVID-19:

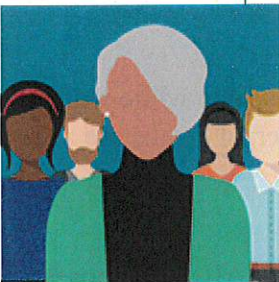


Image Source: CDC.gov

- People aged 65 years or older
- People who live in a nursing home or long-term care facility
- Other high-risk conditions could include:
 - People with chronic lung disease with complications
 - People who have heart disease with complications
 - People who are immunocompromised including cancer treatment
 - People of any age with severe obesity (body mass index [BMI] ≥ 40) or certain underlying medical conditions, particularly if not well controlled, such as those with diabetes, renal failure, or liver disease might also be at risk.
- People who are pregnant should be monitored since they are known to be at risk with severe viral illness, however, to date data on COVID-19 has not shown increased risk.

Many conditions can cause a person to be immunocompromised, including cancer treatment, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications. American Indian and Alaska Natives (AI/AN) have higher prevalence of the following underlying conditions, therefore it is important to encourage those at higher risk to protect themselves (<https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html>).

Chronic lung disease or moderate to severe asthma:

- 10% of AI/ANs 18 and over have been diagnosed with asthma, and 11.5% of children under the 18 years. ⁱ

Heart disease:

- According to the U.S. Department of Health and Human Services Office of Minority Health, in 2018, AI/AN were 50% more likely to be diagnosed with coronary heart disease than their white counterparts and were 10% more likely than white counterparts to have high blood pressure. ⁱⁱ

Cancer treatment:

- The rate of getting lung (12%) and colorectal cancer (36%) was higher in AI/AN than non-Hispanic white men. The rate of getting cervical (69%), lung (6%), colorectal (37%), kidney (85%), liver (three times higher), and stomach cancers (two times higher) was higher among AI/AN women compared to non-Hispanic white women. The rate of getting breast cancer was higher in AI/AN women compared to non-Hispanic white women in Alaska (26%) and the Southern Plains (30%). The rate of getting colorectal cancer in AI/AN women was higher than non-Hispanic white women in four out of six regions: Northern Plains (51%), Alaska (three times higher), Southern Plains (66%), and Pacific Coast (37%).ⁱⁱⁱ

Diabetes:

- AI/AN adults are approximately 2 times more likely to have type 2 diabetes than the rest of the U.S. population. The hospitalization rates for stroke are 1.5 times higher among adults with diabetes.^{iv}

Severely obese (BMI >40):

- In 2018, 48.1% of AI/AN 18 years and older had a BMI of 30 or greater.^v

Renal failure:

- AI/ANs are 2 times more likely to have incidence of kidney failure due to diabetes compared with the overall U.S. population.^{vi}

Liver disease:

- In 2018, 2.5% of AI/AN 18 years of age and over were diagnosed with a chronic liver disease. Native people are also 3.5 times more likely to die from chronic liver disease or cirrhosis compared to their white counterparts.^{vii}

Pregnant women:

- AI/AN women have a pregnancy-related mortality rate of 2 times that of non-Hispanic white women or 30.4 deaths per 100,000 live births compared to 13.0 deaths. 12.8% of these maternal deaths are a result of hypertensive disorders.^{viii}

HIV

- In 2017, 3,034 AI/AN people were living with HIV (1,475 of those are living with AIDS diagnoses). 33 of the 39 people that passed away had an AIDS diagnosis. In 2018 there were 189 new HIV infection diagnoses among AI/AN, and 64 new AIDS diagnoses.^{ix}
- In 2018, AI/AN were 2 times more likely to receive a diagnosis of HIV/AIDS than their white counterparts. Specifically, in 2016, AI/AN women were 3 times more likely to be diagnosed with AIDS than the white female population.^x

Studies have shown that American Indians and Alaska Natives are also at increased risk of lower respiratory tract infections, and in certain regions of the country are twice as likely as the general population to become infected and hospitalized with pneumonia, bronchitis, and influenza.

ⁱ <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=30>

ⁱⁱ <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=34>

ⁱⁱⁱ <https://www.cdc.gov/cancer/dcpc/research/articles/cancer-AIAN-US.htm>

^{iv} cdc.gov/diabetes/pdfs/data/statistics/national-diabetes-statistics-report.pdf

^v <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=40>

^{vi} <https://www.usrds.org/>

^{vii} <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=32>

^{viii} <https://www.cdc.gov/reproductivehealth/maternal-mortality/pregnancy-mortality-surveillance-system.htm>

^{ix} <http://www.cdc.gov/hiv/library/reports/hiv-surveillance.htm>

^x <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=36>



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Caring for Elders

What is COVID-19?

COVID-19 is respiratory illness caused by the novel coronavirus that was discovered in late 2019.

Symptoms of COVID-19 may include fever, cough, and shortness of breath and may appear 2-14 days after you've first been exposed to the virus.

What can you do to stay healthy?

- **Families can take steps to protect the health and safety of Elders**
 - Consider limiting visitation except for caregivers or healers.
 - Avoid communing at social Tribal events or gatherings, supermarkets, or casinos.
 - Have a back-up plan. Consider seeking out other partners in the community to help with housing accommodations or optional caregiving, in case of illness of yourself or your loved one.
- **Stay connected to family and friends – from a distance!** Call or video chat with loved ones and friends instead of gathering.
- **Take breaks from watching, reading, or listening the news.** Hearing about the pandemic repeatedly can be upsetting.
- **Eat balanced meals, exercise at home, get enough sleep, and maintain your spiritual health.** Engage in activities that help you care for yourself (mentally and physically) while limiting risk of exposure. Consider home workout videos, or attending a religious service virtually.
- **Be mindful of feelings of stress, worry, and anxiety.** If you or someone you care about are feeling overwhelmed with emotions like sadness, depression, or anxiety, or feel like you want to harm yourself or others call:
 - 911
 - Substance Abuse and Mental Health Services Administration's (SAMHSA's) Disaster Distress Helpline: 1-800-985-5990 or text TalkWithUs to 66746. (TTY 1-800-846-8517)

Why are Elders at higher risk?

- **Tribal communities and Urban American Indians and Alaska Natives are particularly vulnerable to COVID-19** because of unique characteristics of health that impact Tribal members.
- **Older people are more likely to have serious COVID-19 illness.** This may be because immune systems change with age, making it harder to fight off diseases and infection. Older adults also are more likely to have underlying health conditions that make it harder to cope with and recover from illness
- **Eight out of ten deaths in the US have been reported in adults 65 years and older.**

If you are an Elder and are experiencing COVID-19 symptoms, contact your healthcare provider!

What to do if you're a caregiver or family member

- **Know what medications your loved one is taking** and see if you can help them have extra on hand.
- **Monitor food and other medical supplies** (hearing aid batteries, oxygen, incontinence, dialysis, wound care) needed and create a back-up plan.
- **Stock up on non-perishable food items** to have on hand in your home to minimize trips to stores.
- **Ask question and stay informed.** If you care for a loved one living in a care facility, monitor the situation, ask about the health of the other residents frequently and know the protocol if there is an outbreak.

You can find additional resources here: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html>

Where to get more information

The Centers for Disease Control and Prevention (<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>) and the Administration for Community Living (<https://acl.gov/COVID-19>) have helpful resources for planning, responding, and caring for Elders during the COVID-19 pandemic.

References

1. Administration for Community Living. Coronavirus Disease 2019 [Available from: <https://acl.gov/COVID-19>.
2. Centers for Disease Control and Prevention. Electronic Communication ed.
3. Centers for Disease Control and Prevention. COVID-19: Older Adults [Available from: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications/older-adults.html>.
4. Centers for Disease Control and Prevention. COVID-19: Symptoms [Available from: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>.

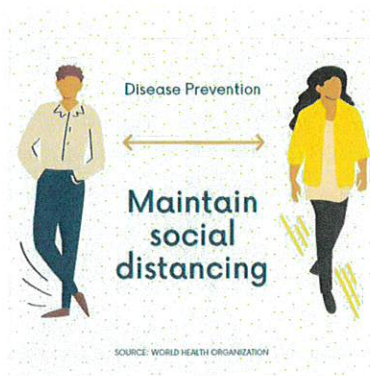


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Social Distancing, Isolation, and Quarantine: What's the Difference?



What is social distancing?

Social distancing is a way to keep people from interacting closely to prevent spread of an infectious disease. Everyone should practice social distancing, whether or not they have been exposed. Schools and gathering places such as movie theaters may close, as well as sports events and religious services.

Social distancing includes:

- Avoiding handshakes and crowds,
- Staying 6 feet away from people,
- Staying home if you feel sick.

What is Quarantine?

Quarantines can be placed on groups of people in communities to separate and restricts the movement of people who have been exposed to a contagious disease who may become sick. It lasts long enough to ensure the person has not contracted an infectious disease.



What is isolation?

Isolation occurs after a diagnosis of COVID-19. This helps prevent the spread of the disease by separating people who are sick from those who are not. It lasts as long as the disease is contagious.



Ways to cope

Reaching out to family and/or friends is one of the best ways to reduce anxiety, depression, loneliness, and boredom during social distancing, quarantine, and isolation.

- Use the telephone, email, text messaging, and social media to connect with friends, family, and others.
- Talk “face to face” with friends and loved ones using Skype or FaceTime.
- If approved by health authorities and your health care providers, arrange for your friends and loved ones to bring you newspapers, movies, and books. These items can be left on your doorstep.

More tips on social distancing, isolation and quarantine are available [here](#).

1. Substance Abuse and Mental Health Services Administration. Tips For Social Distancing, Quarantine, And Isolation During An Infectious Disease Outbreak. [Available <https://www.samhsa.gov/sites/default/files/tips-social-distancing-quarantine-isolation-031620.pdf>]

You can afford insurance.

Several benefits make insurance more affordable for members of federally recognized tribes and Alaska Native Claims Settlement Act (ANCSA) Corporation shareholders.

Use this brochure to find out about different kinds of insurance and benefits, and which your family qualifies for.

Additional resources can be found on the back of the brochure, including where to find charts of the federal poverty level for families of different sizes. Your household income compared to the federal poverty level is used to determine eligibility.

Learn more

- **CHIP:** www.insurekidsnow.gov
- **Medicaid:** www.medicaid.gov
- **Medicare:** www.medicare.gov
- **Federal Poverty Level:** <http://go.cms.gov/fpl>
- **Modified Adjusted Gross Income:** <http://go.cms.gov/magifactsheet>
- **Additional resources:** Go.CMS.gov/AIAN

CHIP, Medicaid, Medicare, and the Health Insurance Marketplace at a Glance

For American Indians and Alaska Natives

- > Insurance options
- > Eligibility requirements
- > Benefits

Income that is not counted toward eligibility:

ANCSA distributions

TRUST/RESERVATION
property distributions
hunting fishing

NATURAL RESOURCES INCOME

sale of cultural/
subsistence property

Bureau of Indian Affairs

OR TRIBAL STUDENT FINANCIAL AID

Income under IRS
general welfare doctrine

Signing up for health insurance is easy and affordable:

- Visit your Indian health program,
- Go online to healthcare.gov/tribal, or
- Call 1-800-318-2596

For more information:

Visit go.cms.gov/AIAN



HealthCare.gov



@CMSGov

#CMSNativeHealth

(Source: American Indian and Alaska Native Trust Income and Modified Adjusted Gross Income fact sheet)



HealthCare.gov

CMS ICN No. 909323-N • June 2016

Program/ Benefit

Who's Eligible?

Benefits

Children's Health Insurance Program (CHIP)	<ul style="list-style-type: none"> Children up to 18 (19 or 20 in some states) in families that earn too much for Medicaid Families that make 200% of the federal poverty level or higher, depending on the state Parents and pregnant women in some states 	<ul style="list-style-type: none"> Free "well child" doctor and dental visits American Indians and Alaska Natives don't have to pay out-of-pocket costs like copayments, coinsurance, and deductibles
Medicaid	<ul style="list-style-type: none"> Children, pregnant women, parents, and people with disabilities Income levels vary, but in states with Medicaid expansion, families with incomes at or below 133% of the federal poverty level Indian trust income is not counted in determining eligibility 	<p>American Indians and Alaska Natives don't pay premiums, copayments, coinsurance, or deductibles</p> <p>All states: hospital visits, doctor visits, home health services, laboratory and x-ray services, family planning, pregnancy/childbirth services, nursing home care, and child mental health/behavioral screening</p> <p>Some states: prescription drugs, dental care, physical/occupational therapy, eye care, and more</p>
Medicare	<ul style="list-style-type: none"> People 65 or older People who are permanently disabled and have received disability benefits for at least 2 years People with permanent kidney failure People with Lou Gehrig's Disease 	<p>Part A: Hospital care only – there is no charge if you or your spouse paid Medicare taxes for at least 10 years</p> <p>Part B: Medical Insurance for doctor's visits, medical equipment, and other treatment ordered by your doctor (you must pay a monthly premium)</p> <p>Part C (Medicare Advantage): Offers additional benefits for a monthly premium through private insurers; you must have Part A and Part B (Part C is generally not available to those with permanent kidney failure)</p> <p>Part D: Prescription drug coverage available through private insurers (you must have Part A and Part C and pay a monthly premium)</p>
Health Insurance Marketplace: Advanced Premium Tax Credits	Households with incomes 100–400% of the federal poverty level that buy insurance through the Health Insurance Marketplace	Credits to help pay your monthly insurance premium
Health Insurance Marketplace: Zero Cost Sharing	American Indians and Alaska Natives making 100–300% of the federal poverty level who buy insurance through the Health Insurance Marketplace	<p>You don't pay out-of-pocket costs, like copayments or deductibles, for:</p> <ul style="list-style-type: none"> Care from an Indian health care provider Essential health benefits from any provider covered by your insurance
Health Insurance Marketplace: Limited Cost Sharing	<p>American Indians and Alaska Natives who buy insurance through the Health Insurance Marketplace, and make:</p> <ul style="list-style-type: none"> less than 100% of the federal poverty level, or more than 300% of the federal poverty level 	<p>You don't pay out-of-pocket costs, like copayments or deductibles, for:</p> <ul style="list-style-type: none"> Care from an Indian health care provider Essential health benefits from any provider covered by your insurance, if you have a referral from an Indian health care provider

March 20, 2020

Alert Number
I-032020-PSA

Questions regarding this PSA
should be directed to your local
FBI Field Office.

Local Field Office Locations:
www.fbi.gov/contact-us/field

FBI SEES RISE IN FRAUD SCHEMES RELATED TO THE CORONAVIRUS (COVID-19) PANDEMIC

Scammers are leveraging the COVID-19 pandemic to steal your money, your personal information, or both. Don't let them. Protect yourself and do your research before clicking on links purporting to provide information on the virus; donating to a charity online or through social media; contributing to a crowdfunding campaign; purchasing products online; or giving up your personal information in order to receive money or other benefits. The FBI advises you to be on the lookout for the following:

Fake CDC Emails. Watch out for emails claiming to be from the Centers for Disease Control and Prevention (CDC) or other organizations claiming to offer information on the virus. Do not click links or open attachments you do not recognize. Fraudsters can use links in emails to deliver malware to your computer to steal personal information or to lock your computer and demand payment. Be wary of websites and apps claiming to track COVID-19 cases worldwide. Criminals are using malicious websites to infect and lock devices until payment is received.

Phishing Emails. Look out for phishing emails asking you to verify your personal information in order to receive an economic stimulus check from the government. While talk of economic stimulus checks has been in the news cycle, government agencies are *not* sending unsolicited emails seeking your private information in order to send you money. Phishing emails may also claim to be related to:

- Charitable contributions
- General financial relief
- Airline carrier refunds
- Fake cures and vaccines
- Fake testing kits

Counterfeit Treatments or Equipment. Be cautious of anyone selling products that claim to prevent, treat, diagnose, or cure COVID-19. Be alert to counterfeit products such as sanitizing products and Personal Protective Equipment (PPE), including N95 respirator masks, goggles, full face shields, protective gowns, and gloves. More information on unapproved or counterfeit PPE can be found at www.cdc.gov/niosh. You can also find information on the U.S. Food and Drug Administration website, www.fda.gov, and the Environmental Protection Agency website, www.epa.gov. Report counterfeit products at www.ic3.gov and to the National Intellectual Property Rights Coordination Center at iprcenter.gov.

If you are looking for accurate and up-to-date information on COVID-19, the CDC has posted extensive guidance and information that is updated frequently. The best sources for authoritative information on COVID-19 are www.cdc.gov and www.coronavirus.gov. You may also consult your primary care physician for guidance.

The FBI is reminding you to always use good cyber hygiene and security measures. By remembering the following tips, you can protect yourself and help stop criminal activity:

- Do not open attachments or click links within emails from senders you don't recognize.
- Do not provide your username, password, date of birth, social security number, financial data, or other personal information in response to an email or robocall.
- Always verify the web address of legitimate websites and manually type them into your browser.
- Check for misspellings or wrong domains within a link (for example, an address that should end in a ".gov" ends in ".com" instead).

If you believe you are the victim of an Internet scam or cyber crime, or if you want to report suspicious activity, please visit the FBI's Internet Crime Complaint Center at www.ic3.gov.

