



2016 Covered California Tribal Consultation

August 24, 2016

Sacramento, CA

ATTENDEES

California Tribal Leaders and Representatives
Covered California Senior Leadership Team and Staff
California Tribal Health Clinics and Representatives
California Rural Indian Health Board (CRIHB)
California Consortium of Urban Indian Health (CCUIH)
Office of the Regional Health Director for Health and Human Services (HHS) Region 9
California Health and Human Services (CHHS)

The 2016 Covered California Tribal Consultation Meeting was called to order by Rosario Arreola Pro at 8:35 a.m.

WELCOME AND INTRODUCTIONS

Rosario Arreola Pro, Health Systems Development Director for the California Rural Indian Health Board (CRIHB) introduced Daniel Fonseca, Director of Cultural Resources for the Shingle Springs Band of Miwok Indians to lead the opening prayer. She then welcomed California Tribal Leaders and the Covered California Senior Leadership Team to the 2016 Covered California Tribal Consultation.

COVERED CALIFORNIA EXECUTIVE UPDATE

Rosario Arreola Pro introduced Peter Lee, Executive Director of Covered California. Mr. Lee opened by thanking the partners and tribal advisory workgroups as well as apologizing for not having a tribal consultation in the year 2015. Mr. Lee went on to provide general statistics of the effect that Covered California is having on the number of uninsured in the state, noting that the number of uninsured in the state has been cut in half since the Affordable Care Act (ACA) has been implemented. Mr. Lee went over the unique benefits available for American Indians emphasizing that American Indians are not subject to open enrollment periods and can enroll in an Exchange plan at any time of year. Mr. Lee then went over the qualified health plans (QHP) available on the Exchange, pointing out that all the plans offer the same benefits for American Indians specifically. An update was provided on American Indian enrollment numbers by health plan and by region. Mr. Lee provided information regarding rate increases for the year 2017, reasons for the rate increases as well as an overview of what those increases mean for consumers. Mr. Lee then reported that the mixed tribal family glitch had been fixed, that there was now a formal system in place to resolve issues for individual American Indian consumers and provided



information on how to request meetings to discuss issues with him moving forward. Mr. Lee closed out by once again thanking everyone in attendance and opening the floor for questions.

QUESTIONS AND COMMENTS

During the questions segment of the Executive Update, some tribal leaders and representatives expressed concern with the language regarding the definition of who was eligible for the unique benefits for American Indians. There was also some concern over rate increases, systems in place to verify whether or not someone actually qualified as an American Indian, the absence of a tribal consultation in the year 2015, and funding to bring together the tribal representatives together to discuss their issues with Covered California.

CalHEERS MEMBER LEVEL BENEFITS PRESENTATION

Rosario Arreola Pro introduced Jenny Chau, a State Business Analyst for CalHEERS. Ms. Chau began with some background on the mixed tribal family glitch that was causing mixed American Indian and non-American Indian families to have to submit different applications for enrollment. Ms. Chau provided an example of a mixed family and how to enroll said family members with the new grouping system that allows the entire family to enroll in one application. Ms. Chau provided a detailed walkthrough of the application and explained the member level benefits available to each family member depending on how they were grouped and explained how APTC would be split amongst the family. Ms. Chau then opened up the floor for questions and comments.

QUESTIONS AND COMMENTS

There were questions and concerns expressed about the differences between enrollment periods and other benefits available for federally recognized American Indians and non-federally recognized American Indians. A representative from Health and Human Services (HHS) explained that the difference in available benefits is federally regulated and would have to be changed at a federal level. Mark LeBeau, PhD, MS, Chief Executive Officer of California Rural Indian Health Board (CRIHB) then brought attention to two pieces of federal legislation, Senate Bill 2114 (SB 2114) and House Resolution 5475 (HR 5475) that redefine what American Indian tribes are federally recognized.

SECTION 1332 WAIVER PRESENTATION

Rosario Arreola Pro introduced Donna Laverdiere of Health Management Associates. Ms. Laverdiere began by presenting some background and key points of the Section 1332 Waiver, emphasizing that it would not change existing subsidies or benefits available through Covered California. Ms. Laverdiere went on to explain the proposed waiver program and how it would allow undocumented immigrants to



purchase unsubsidized health plans through Covered California and provide access to new California Qualified Health Plans. Ms. Laverdiere explained how the proposed waiver meets requirements of the program and provided a timeline for when implementation of the waiver would take place pointing out that it is currently in the public comment period and providing information on how to submit comments. Donna Laverdiere then introduced Vishaal Pegany with the Policy: Research and Evaluation Division of Covered California.

Mr. Pegany explained some of the criteria required for approval of a proposed Section 1332 Waiver, pointing out that the intent of the waiver is to provide flexibility to individual states to implement the Affordable Care Act (ACA) while continuing to retain certain consumer protections. Mr. Pegany went on to outline the steps in the waiver process from proposal to implementation. After outlining the steps to implementation, Mr. Pegany presented what could and could not be waived as well as the criteria that a state waiver application must satisfy in order to be granted. Mr. Pegany closed out by reviewing federal guidance outlining how Health and Human Services (HHS) and the Internal Revenue Service (IRS) would interpret the rules for approving an application for a Section 1332 Waiver. Mr. Pegany then opened the floor for questions and comments.

QUESTIONS AND COMMENTS

A question was posed regarding the inclusion of an addendum to the Section 1332 Waiver that would allow non-federally recognized American Indian tribes to be able to receive the same benefits as the federally recognized under the Affordable Care Act (ACA). Mark LeBeau commented on the tribal leaders and representatives not being reimbursed for travel costs to the Tribal Consultation and urged more interaction with American Indians on Covered California's part. A question was also posed to the attendees requesting ideas for future Section 1332 Waivers.

CALIFORNIA RURAL INDIAN HEALTH BOARD (CRIHB) TRIBAL SPONSORSHIP PRESENTATION

Rosario Arreola Pro introduced Al Hernandez-Santana, JD, MCP, Director of Policy for the California State Rural Health Association. Mr. Hernandez-Santana began by defining Tribal Premium Sponsorship and some of the options with how the sponsorship may be utilized to assist with paying premiums as well as stressing the importance of enrolling active users of Indian Health Services (IHS) in a Covered California plan or Medi-Cal. Mr. Hernandez-Santana then went on to give some background on the expansion of Medi-Cal in California and how it applies to the American Indian population. Following was a brief overview of the process of being screened for Medi-Cal after which Mr. Hernandez-Santana listed some certified enrollment entities that specialize in American Indian health insurance. Mr. Hernandez-Santana



gave a brief overview of Advanced Premium Tax Credits, how they work, who qualifies for them, and what sorts of income apply when determining eligibility for said assistance.

Mr. Hernandez-Santana moved into talking about tribal health programs and how to work with these programs with an emphasis on participation and how higher membership numbers increase the efficiency of said programs. Some of the barriers to enrollment in Covered California were covered as well as solutions to overcoming said barriers. Mr. Hernandez-Santana then went on to discuss some strategies for the tribal health programs including strategies for hiring and training administrative staff and providing fiscal scenarios as an example of what the costs would be. These examples went on to show that the costs for the tribal health programs were an investment that provided a benefit to American Indian communities. After outlining some basic financial analysis for the tribal health programs, Mr. Hernandez-Santana provided some basic financial advice for individuals in entering the health insurance marketplace as well as the challenges one may face. Mr. Hernandez-Santana closed with providing some resources for those who had questions or were experiencing difficulty with their coverage through Covered California and Medi-Cal and opened up the floor for questions and comments.

QUESTIONS AND COMMENTS

A question was raised over the process for communicating issues with Covered California to which Mr. Hernandez-Santana responded by providing some examples of things that CRIHB is doing to communicate these problems, and where to go to keep updated on responses to those issues. Mark LeBeau urged that Covered California should respond to issues already brought up in the past, Kelly Green, Director of External Affairs with Covered California, responded by outlining some of the things Covered California has been doing to respond to tribal issues. Mark LeBeau also brought up how Tribal Sponsorship has been working in other states, reporting on the successes that they have experienced, as well as urging conversations with Covered California regarding sponsorship.

TRIBAL ADVISORY WORKGROUP DISCUSSION

Rosario Arreola Pro introduced Kelly Green, Director of External Affairs at Covered California. Ms. Green opened with an apology for not having a Tribal Consultation in 2015 and voiced Covered California's commitment to working closer with tribal groups in the future. Ms. Green then provided a general overview of the tribal advisory workgroup process and gave an update on how members may be added to the advisory group. Ms. Green then provided the list of members for the 2014 Tribal Advisory Workgroup and emphasized the need to update the list of members after which she opened the floor for discussion and comments.



QUESTIONS AND COMMENTS

Multiple comments stressed the importance of the Tribal Advisory Workgroup convening more often. Robert Spector from Blue Shield suggested that members of the individual Qualified Health Plans (QHPs) be included in workgroup meetings. A question was posed asking what the original, “mixed family glitch,” was to which Ms. Green clarified. Another question was asked regarding how the State would financially support the Tribal Advisory Workgroup in the future to which Ms. Green responded that Covered California would look into how to move forward. There were several more comments emphasizing the importance of increased interaction between Covered California as well as the suggestion that Certified Enrollment Counselors be invited to future Tribal Advisory Workgroups.

EXTERNAL AFFAIRS UPDATE AND CASE RESOLUTION PROCESS

Rosario Arreola Pro introduced Waynee Lucero from the External Affairs Division of Covered California. Ms. Lucero presented a brief overview of the External Affairs Case Resolution Process for resolving issues with Covered California. Ms. Lucero also provided a list of resources to stay informed with Covered California.

FINAL PUBLIC COMMENTS

A comment was presented that requested a seat on the Covered California Board be reserved for a representative from the American Indian/Alaskan Native community to ensure attention be brought to the issues within the community.

The California Rural Indian Health Board (CRIHB) urged the design of a Tribal Sponsorship Program that offers a minimum of certain elements and conditions based on the input of all tribes in California. CRIHB also urged more outreach and education to the AI/AN community to encourage participation in Covered California.

Restoration of funding for the Tribal Community Mobile Organization Program was requested, pointing out that there were still many unresolved issues for members of the AI/AN community that would benefit from such. Also requested was the reimbursement of travel fees associated with those in attendance at the 2016 Covered California Tribal Consultation.

Mr. Lee re-stated the apology from his Covered California Executive Update as well as committed to following up with the AI/AN community in attendance along with the tribes who were not able to be represented at this meeting.



A comment was made urging Covered California to not discriminate between federally and non-federally recognized American Indians in benefits available.

Mark LeBeau acknowledged and Mr. Lee's apology and emphasized the importance of re-establishing the Tribal Advisory Workgroup to resolve AI/AN issues with Covered California. Mr. LeBeau then thanked everyone in attendance and introduced Carol Larson to provide a closing prayer.