Welcome and Opening Remarks:

Secretary Kathleen Sebelius, U.S. Department of Health and Human Services

- We understand the real need for Tribal consultation with health exchanges. These are conversations that will continue to ensure open lines of communication; next Tribal consultations will be HHS regional consultations.

- Opening of marketplace is only one step—we need to get people enrolled in order to fully implement ACA. This is ours and yours responsibility to perform outreach/education about the importance of enrolling/participating on the exchanges.

Federally-Facilitated and State Partnership Marketplace Overview and Update

Gary Cohen, Deputy Administrator and Director, Centers for Consumer Information and Insurance Oversight (CCIIO)

Update:

- We have finalized most of the rules—essential health benefits (EHB), market reforms, and payment notices, including the three R’s (reinsurance, risk adjustment, risk corridors).

- We are focusing now on operations: building the infrastructure to certify qualified health plans (QHPs).

- The data service hub is nearly complete and the testing is underway to verify consumer verification.

- Consumer assistance operations is 80% complete; testing will begin soon.
State Landscape for Health Insurance Marketplaces:

- 24 states and D.C. have been conditionally approved for state/partnership exchanges
- For states with FFEs, they will continue their regulatory roles
- After 2015, states can continue to apply for state/partnership exchanges

Timeline for 2013:

- February-majority of rules have been finalized
- March 28 through April-health plans will begin to submit QHP submissions
  - HHS and states will review applications to ensure they meet EHB and actuary benchmarks
- Spring-single streamline application will be finalized and utilized by FFE
  - States can use this model or develop an alternate approved by HHS Secretary
- June-call center launched
- July-consumer training assistance will begin
  - in person, navigator, application counselor, interest/brokers—they all help someone get access to health coverage
- August-web portal will be loaded/tested
- October-open enrollment begins
- January 1, 2014-health coverage begins

*Overall, we are making great progress to meet the January 1, 2014 deadline!

3 topics of Discussion: Eligibility, Tribal Sponsorship, and QHP Indian Addendum

1. Eligibility
   - Single streamline application is being streamlined by CMS; will include Medicaid eligibility
   - Electronic data by the Bureau of Indian Affairs (BIA) & Indian Health Service (IHS)-does not contain info necessarily to verify AI/AN; therefore we cannot approve national data source to determine AI/AN for verification
- As a result, a paper document process will be used—will still allow AI/AN to upload documents onto exchanges
- HHS will continue to explore options for electronic verification for AI/AN in the future

2. Tribal Sponsorship
   - FFE will **not establish** the process to facilitate Tribal sponsorship for Oct. 1, 2013; there is not enough time to establish an aggregated payment system on FFE
   - Tribes can still work with issuers to pay premiums
   - States establishing their own state exchanges can still have Tribal sponsorship on their state exchanges
   - FFE will look to ways for Tribal sponsorship in the future

3. QHP Tribal Addendum
   - Being finalized; we want to highlight key federal provisions for AI/AN and to form relationships with issuers and providers

**Outreach and Enrollment**

*Kelly Dinicolo, Senior Technical Advisor, Office of Communications, CMS*

- Developing outreach/education material with Native images and ensuring they are culturally appropriate
- Reaching out to national Tribal organizations and Tribes for input
- Partnership collaboration

**Tribal Leader Discussion**

Q: Will there be a fix to the definition of Indian?

A: Yes. As Secretary Sebelius stated in her official statement at the HHS Budget Consultation, there will be a legislative fix to the definition of Indian. We support the Medicaid/IHS definition. We will provide technical assistance to Congress to make this change.

**Closing Remarks**

*Office of Intergovernmental and External Affairs*

Thank you for your continuous work. We look forward to having further consultations.