

# New York Health Benefit Exchange

## Blueprint Summary for Section 2.0 Consumer and Stakeholder Engagement and Support Updated February 15, 2013

<b>Item Number</b>	<b>Topic</b>
2.2	Tribal Consultation Plan

### **Background**

New York has eight federally recognized tribes within its borders. There is also an organization in New York City, American Indian Community House (AICH), which offers services to American Indians and Alaska Natives (AI/AN) from all areas of the country.

### **Federally Recognized Tribes in New York**

<b>Tribal Nation</b>	<b>County</b>	<b>Region</b>
Cayuga Nation	Seneca	Central NY/Finger Lakes
Oneida Nation	Oneida	Central NY
Onondaga Nation	Onondaga	Central NY
Saint Regis Mohawk Tribe	Franklin	Northern NY
Seneca Nation	Cattaraugus	Western NY
Shinnecock Nation	Suffolk	Long Island
Tonawanda Seneca Nation	Genesee	Western NY
Tuscarora Nation	Niagara	Western NY

For more than a year Exchange staff has been in individual and large group discussions with health directors and other representatives from several of the tribal nations and AICH. These meetings have focused on rights (increased cost-sharing protections, exemption from mandate penalties, special enrollment periods) afforded AI/ANs under the Affordable Care Act (ACA) and the systems implications for the Exchange as it seeks to make sure that these benefits are easily attainable by tribal members. Meetings have also focused on the Nations' interest and concerns regarding the establishment of a Navigator program that meets the needs of tribal members and that essential community providers for qualified health plan networks include tribal health organizations. Conversations on systems issues regarding how the Exchange will verify membership in a federally recognized tribe have also begun.

### **Meetings with Tribal Health Directors**

<b>Date</b>	<b>Meeting Location</b>	<b>Topics Discussed</b>
August 18, 2011	Niagara Falls, NY	Basics of Federal Health Care Reform, Overview of Coverage in New York Today, Federal Reforms Implemented, Health Insurance Exchange Planning in New York
June 15, 2012	Conference call	Affordable Care Act Provisions Specific to American Indians/Alaska Natives, New York Health Benefit Exchange Planning and Implementation, Update on Exchange Policy Studies, Exchange Blueprint

		Process
August 3, 2012	Conference call	Update on New York Health Benefit Exchange Planning, Discussion of Exchange IT Systems, Update on Exchange Policy Studies

Please see Exhibits 2.2 A – D for meeting materials and agendas.

In addition to meetings specifically focused on areas relating to AI/AN enrollment in the Exchange, representatives from tribal nations and AICH have been invited and have attended stakeholder meetings convened around consultant reports on policy decisions that the Exchange must make.

Governor Cuomo’s Executive Order directed the Exchange to convene Regional Advisory Committees. Five committees in the following regions: Western NY; Central NY/Finger Lakes; Capitol District/Mid-Hudson/Northern NY; New York City Metro; and Long Island were created to provide advice and recommendations on the establishment and operation of the Exchange. Representatives from the nations and AICH have been named to serve as committee members in all five regions to ensure that these discussions include the perspectives of tribal members.

**Tribal Consultation**

On September 14, 2012, the Executive Director of the Exchange invited tribal representatives to attend an in-person tribal consultation meeting on October 30, 2012 in Syracuse, New York. A copy of the tribal consultation invitation letter is attached as Exhibit 2.2 E. Due to hurricane Sandy, this meeting was subsequently rescheduled to December 12, 2012. The purpose of the meeting was to ensure that tribal leaders understand the benefits offered by the Exchange, the rights afforded AI/ANs under the ACA, to further our discussions around verification of tribal membership, Navigator program participation and essential community providers, and to map out New York’s tribal consultation process. The goal of the meeting was that participants leave with the basic principles of a proposed tribal consultation process.

Working drafts of the Exchange Tribal Consultation Policy were distributed prior to and again at the meeting. After the meeting we had a four week comment period. Although comments were received mid-January after the comment period ended, we felt it was important to revise the policy as needed. Comments were incorporated into a second draft of the policy and redistributed to the Nations and AICH. Toward the end of January a second round of comments were received. We reviewed those comments and incorporated them as appropriate. On February 5, 2013, the attached Tribal Consultation Policy was finalized. The policy is effective as of February 15, 2013.

We appreciate and share HHS’s goal of establishing a clear Tribal Consultation Policy and are committed to working closely with tribal leaders to ensure that the Exchange meets the needs of their members. Now that the policy is adopted, we will meet with the nations and AICH on specific Exchange functions with designated tribal representatives and schedule future consultation meetings.