

IHS TRIBAL SELF-GOVERNANCE ADVISORY COMMITTEE

c/o Self-Governance Communication and Education
P.O. Box 1734, McAlester, OK 74501

Telephone (918) 302-0252 ~ Facsimile (918) 423-7639 ~ Website: www.tribalselfgov.org

Via email: Denise.Turk@ihs.gov
Geoffrey.Roth@ihs.gov
Original Sent Via USPS

April 20, 2015

Mr. Robert McSwain, Acting Director
Attn: Geoff Roth, Special Assistant to the Director
Indian Health Service
Suite 440, The Reyes Building
801 Thompson Avenue
Rockville, MD 20852-1627

RE: Transmittal of Semi-Annual Report for "Self-Governance National Indian Health Outreach and Education"

Dear Mr. McSwain:

On behalf of the Tribal Self-Governance Advisory Committee (TSGAC), I am pleased to submit this Semi-Annual 6 Month Report on the project, "Self-Governance National Indian Health Outreach and Education". As you know, the Jamestown S'Klallam Tribe (JST) was funded to provide technical, research and analytical support to Self-Governance Tribes in coordination and communication with the TSGAC regarding implementation of the Affordable Care Act (ACA) for the time period from October 1, 2014 through September 30, 2015. This semi-annual report is a required deliverable and covers the six-month period from October 1, 2014, through March 31, 2015.

We greatly appreciate your on-going support for this project and the excellent cooperation that we have had from your staff, including Mr. Geoffrey Roth, Special Assistant to the Director, and Mr. Ben Smith, Director of the Office of Tribal Self-Governance (OTSG). We hope that you find this report and the noted deliverables of great benefit to both the agency as well as to the Self-Governance Tribes.

We look forward to our continued collaboration on these activities. Should you need additional information or have questions regarding the report, please contact me at (860) 862-6192; or via email: lmalerba@moheganmail.com. Thank you.

Sincerely,



Chief Lynn Malerba, Mohegan Tribe
Chairwoman, TSGAC

cc: P. Benjamin Smith, Director, OTSG, IHS
Carl Harper, Director, ORAP, IHS
TSGAC and Technical Workgroup

Enclosure: (1) Self-Governance National Indian Health Outreach and Education: Semi Annual Report (October 1, 2014–March 31, 2015) dated April 2015



Health Care Reform in Indian Country

Self-Governance Communication & Education

Self-Governance Tribes Striving Towards Excellence in Health Care

Self-Governance Health Reform National Outreach and Education

Semi-Annual Report

April 2015

Introduction

The Jamestown S’Klallam Tribe (JST) and U.S. Department of Health and Human Services (HHS) amended their multi-year funding agreement in September 2014 to transfer \$300,000 to JST for the performance period October 1, 2014 - September 30, 2015, for “Self-Governance National Indian Health Outreach and Education.” This semi-annual report is a required deliverable and covers the six-month period from October 1, 2014, through March 31, 2015.

The funding amendment requires the Tribal Self-Governance Advisory Committee (TSGAC) to manage and provide outreach, education, technical research and analytical support nationally to Self-Governance Tribes on the Patient Protection and Affordable Care Act/Indian Health Care Improvement Act (ACA/IHCIA). The overall objective is to improve Indian health care by conducting training and technical assistance across Self-Governance Tribal communities to ensure that the Indian health care system and all American Indians/Alaska Natives (AI/ANs) are prepared to take advantage of the new health insurance coverage options which will improve the quality and access to health care services, and increase resources for AI/AN health care.

TSGAC submitted a Work Plan for 2014-2015 to the IHS Office of Tribal Self-Governance (OTSG) on October 24, 2014 outlining the proposed activities and process for meeting the identified deliverables. The 2014-2015 Work Plan builds on JST’s successful program of training and technical assistance during 2013-2014, as documented in the final report for that year. The Work Plan is organized into the following sections:

1. Policy Analysis
2. Technical Assistance
3. Training
4. Positive Impact Stories

Final Approval for the 2014-2015 Work Plan was received from OTSG on November 14, 2014. This progress report is organized to correspond to the four sections listed above.

Policy Analysis

Policy Papers and Comments on Proposed Regulations. Technical advisors continue to work with national Indian organizations to analyze proposed regulations related to ACA/IHCIA implementation and draft responses on behalf of TSGAC. Recent issues include:

- Development of TSGAC Comments on CMS-9944-P; Notice of Benefits and Payment Parameters for 2016
- Development of TSGAC Comments on Draft 2016 Letter to Issuers in the Federally-Facilitated Marketplace
- Updated ACA/IHCIA White Paper with objectives and strategies
- Memo and analysis of Tribal Premium Sponsorship (included in the January 2015 TSGAC meeting packages.)
- Drafted analysis of CMS-9938-P, Summary of Benefits and Coverage and Uniform Glossary, and offered recommendations applying to the Indian-specific cost-sharing protections (included in comments submitted by TTAG February 28, 2015).
- TSGAC Comments submitted on the IHS proposed rule of Medicare-Like Rates February 4, 2015.

Preliminary Study of Network Adequacy: The 2015 Issuer Letter released by the Center for Consumer Information and Insurance Oversight (CCIO) contains requirements on issuers offering Qualified Health Plans (QHPs) through a Federally-Facilitated Marketplace (FFM). Preliminary research and analysis has been conducted in a select number of states/regions and QHPs in those states/regions to determine:

- How many of the QHPs have Indian Health Care Providers (IHCPs) in their preferred provider networks;
- Whether contract offers were made by QHPs to some or all of the IHCPs; and,
- What factors were considered by IHCPs in determining whether to enter into a contract with a QHP.

Data have been collected from specific zip codes in OK, WI, OR, AZ, ME and NV.

A joint TSGAC/Tribal Technical Advisory Group (TTAG) letter was sent to the Centers for Medicare and Medicaid Services (CMS) Administrator on 12/19/14 requesting information on whether QHPs offered contracts to IHS, Tribal and Urban (I/T/U) programs. Associated Talking Points for Tribal leadership was also prepared. The response received from the CMS Administrator on 2/9/15 will be incorporated into the TSGAC final study on Network Adequacy. CMS has stated that each issuer/QHP represented to CMS that it offered contracts to the I/T/Us in its service area, and the offers are understood to have met the CMS requirements. This CMS expectation is being compared to the experiences of the I/T/Us in the QHP service areas that we are studying. IHS has been requested to provide data on contracting offers made to IHS facilities; however, that information has not been received (as of 4/7/15).

It is expected that information from this preliminary study will help to inform discussions of this topic at a meeting with the Director of CCIIO scheduled for May 7, 2015.

Measuring Enrollment through the Marketplaces. To further the ability to measure outcomes of TSGAC and other Tribal organization activities, TSGAC prepared a set of data metrics to track progress with AI/AN enrollment through Marketplaces into QHPs and Medicaid. Data elements were circulated with MMPC and TTAG for review prior to submitting request to CMS.

Initially, CMS agreed to provide the requested data by January 16, 2015. While two measures of enrollment were provided during the TTAG Data Symposium held on February 18, 2015 (the number of people enrolled in zero cost sharing plans and limited cost sharing plans through the Federally-Facilitated Marketplace); other information that was requested has not yet been provided. This issue is the #1 priority for the newly formed TTAG CCIIO/Tribal Workgroup initial meeting to be held with the Director of CCIIO on May 7, 2015.

Technical Assistance

SGCE Website (Health Care Reform) Updated: The Question and Answer section on the SGCE website was updated and re-organized on November 14, 2014, to include the following areas:

- A. Marketplace Enrollment
- B. Premium Tax Credits and Cost-Sharing Reductions
- C. Tax Penalty Exemptions
- D. Employer-Sponsored Coverage
- E. Veterans
- F. Other

The website allows for users to submit questions at any time. The Question and Answer section is continually and regularly updated as needed based on input and requests that are submitted through the website as well as those questions raised during Webinars. In December 2014, the health care reform portion of the SGCE website was further updated and simplified in a more user-friendly format so that information can be found easily.

The entire SGCE website, including the health care reform sub-section, is currently undergoing a comprehensive update and revision. A revised mock-up has been shared and information will be more streamlined once the new website is launched in May 2015.

Technical Assistance Provided through SGCE Website. Tribes are continuing to use the SGCE website to pose questions regarding ACA. As of April 1, 2015, all questions submitted through the Website have received a response which has been posted so that all Tribes can have access to the information.

Correspondence. TSGAC has submitted comments on a number of key ACA/IHCIA issues, including the following:

- Letter to IHS Acting Director RE: Comments on IHS Proposed Rule entitled “Payment for Physician and Other Health Care Professional Services Purchased by Indian Health Programs and Medical Charges Associated with Non-Hospital-Based Care,” 79 Fed. Reg. 72160 (December 5, 2014), submitted February 4, 2015.
- Letter to VA regarding Comments Submitted In Response to Notice of Tribal Consultation: Section 102(c) of the Veterans Access, Choice and Accountability Act of 2014, submitted January 14, 2015.
- Comments on Draft 2016 Letter to Issuers in the Federally-Facilitated Marketplace, submitted January 12, 2015.
- Comments on CMS-9944-P; Notice of Benefits and Payment Parameters for 2016, submitted December 22, 2014.
- Letter to CMS Administrator RE: Request for Information on Contract Offers made by Issuers of Qualified Health Plans, submitted December 19, 2014.
- Letter to IHS Director RE: Tribal Consultation on Medicare-like Rates (MLR) Regulations and/or Guidance, submitted November 10, 2014.
- Letter to HHS and Treasury Secretaries RE: Appreciation for Recent Announcement on Exemption from Tax Penalty for American Indians/Alaska Natives, submitted October 16, 2014.

Communication around key moments or events through the grant period to increase education efforts. Broadcast notices and e-mails have been sent to all Self-Governance Tribes by SGCE on the following dates with the subjects listed:

4/8/15

- IHS Reimbursement Rates for CY2015
- Premium Sponsorship Options for Tribes
- ACA Break-Out Sessions for Annual Conference

2/13/15

- Tribal Sponsorship through a Marketplace
- Essential Community Providers (ECP) List

1/23/15

- Federal Poverty Level Guidelines for 2015 (“2015 FPL”)

1/15/15

- Notice on Updated ACA/IHCIA Outreach and Education Information (Webinars, Trainings and Supporting Documents)

12/18/14

- Urban Institute Report on Projection on Reducing Racial Disparities for Uninsured American Indians/Alaska Natives
- Effect on Congressional Districts if the Supreme Court invalidates insurance subsidies to federally-run Exchanges in King vs. Burwell

12/9/14

- Claiming the Exemption to the Tax Penalty for Not Having Insurance
- Advanced Payment of Premium Tax Credits for Health Insurance
- Tribal Hospitals can do Presumptive Eligibility for Medicaid
- Ways to File Appeals and Complaints with a QHP and a Marketplace

11/24/14

- Expanded Flexibility for Tribal Employers under FEHB Program

11/21/14

- Affordable Care Act (ACA) Day of Action: National Day of Tribal Enrollment

11/19/14

- Notice of November 30, 2014 Deadline for Application to Waive Penalties for not Achieving Meaningful Use
- Notice of Updated Q&A's on Website
- In response to the US Supreme Court decision to consider *King v. Burwell*, a survey of states was prepared to identify which states have, to date, taken some action to indicate a potential to convert to a state-based marketplace if needed to retain premium tax credits for the state's residents. (Memo circulated with TSGAC & MMPC).

Development of Tools and Resources. In preparation for training and broadcasts of information, a number of PowerPoint presentations and other products were developed. These include:

- Tribal Sponsorship of Beneficiaries for Health Insurance Coverage through a Marketplace (PowerPoint)
- Updated and Simplified: Indian-specific Exemptions from ACA Tax Penalty for Not Maintaining Minimum Essential Coverage (PowerPoint)
- Q&A, CMS/CCIO, "Cost-Sharing Reductions for Contract Health Services", May 9, 2014
- "(Sample) Referral – Indian-specific Cost-sharing Protections", March 19, 2015
- Explanation of "(Sample) Referral – Indian-specific Cost-sharing Protections", March 19, 2015
- TSGAC Handout: Federal Poverty Levels Applicable in 2015, January 23, 2015
- TSGAC Brief: Tribal Sponsorship of Marketplace Enrollees, January 12, 2015
- TSGAC Tribal Sponsorship of Beneficiaries for Health Insurance Coverage through a Marketplace, March 18, 2015

Innovative Ideas. The JST Amendment calls for sharing information, innovative ideas, challenges and solutions, and to provide progress reports. One innovative idea that is being explored is the potential for collaboration between Direct Service Tribes (DST) and TSGAC to create pilot projects for DST to have an agreement with IHS on premium sponsorship. Four Tribes have expressed an interest in becoming pilot project sites.

Training

Evaluation of ACA/IHCIA Training Materials on Self-Governance Communication and Education (SGCE) Website. A thorough evaluation of the existing Webinar and Training materials, including PowerPoint presentations and documents, was conducted. A series of updates and recommendations were provided in a summary matrix that was submitted to OTSG on December 11, 2014, and approved on December 30, 2014. All of the recommendations were completed and posted on the SGCE website by January 14, 2015. No changes have been made to original recorded Webinar videos due to cost and time constraints. However, any significant updates in content have been noted on the SGCE Website.

Identifying Training Needs of Self-Governance Tribes. The TSGAC conducted an on-line survey in October 2014 to learn about Tribal preferences for ACA training and technical assistance. Consultants met with TSGAC at the quarterly meeting held October 8, 2014, to get input about their needs, including both an opportunity for discussion and a survey.

Webinars. The primary means of delivering training has been Webinars. Four Webinars were conducted in this 6-month period and have been held from noon to 1:30 pm Eastern time. Participation in the Webinars has ranged from 105 to 240 people. The 1-1/2 hour Webinars were conducted live, recorded and later posted on the Self-Governance Communication and Education (SGCE) website along with the PowerPoint presentations and related resource materials to allow for wider accessibility and use by IHS, Tribal and Urban (I/T/Us) health care users and programs. Time was allocated throughout the Webinar(s) for participants to raise questions. All questions not answered were recorded, summarized and responses were drafted and posted on the SGCE website. All attendees received a personalized Certificate for their participation in the Webinar(s).

Following the Webinars, all participants were sent an on-line evaluation. The input received was overwhelming positive and constructive. (*A summary of the evaluations is provided as Appendix A below*). The dates and topics of Webinars provided in the first six months are:

- “Updated and Simplified!!! Securing an Exemption from the Affordable Care Act’s Tax Penalty for Not Maintaining Minimum Essential Coverage,” presented by Doneg McDonough, October 22, 2014.
- “Update on IHS/VA Agreements and Opportunities for Tribes,” presented by Myra Munson, January 21, 2015.
- “Current Topics with Affordable Care Act Implementation,” presented by Doneg McDonough, February 12, 2015.
- “Premium Sponsorship Options for Tribes,” presented by Doneg McDonough, March 18, 2015.

Self-Governance Annual Conference Workshops. Four break-out sessions on topics related to ACA/IHCIA have been planned for the 2015 Annual Tribal Self-Governance Consultation Conference to be held in Reno, NV, April 27-30, 2015:

- Tribal Sponsorship Premium Program: Challenges and Remedies
- ACA Tax-Related Issues: Exemption from ACA’s Tax Penalty, Reconciliation of Premium Tax Credits, Etc.: Problems Faced and Lessons Learned
- Affordable Care Act Tribal Success Stories
- The Politics of ACA Implementation

Positive Impact Stories

Progress. Four Tribes and Tribal Organizations from four different states have agreed to partner with TSGAC for the Success Stories project: Citizen Potawatomi Nation (OK), Coeur d'Alene Tribe (ID), Fond du Lac Band of Lake Superior Chippewa (MN), and Southcentral Foundation (AK). Preparations to recruit participants included a summary of the project, a list of photos needed, contracts with photographers at each site, consent forms for consumers and providers, lists of sample interview questions, and standard forms for receipts for honoraria. Interviews with four or five consumers, as well as administrators, have been conducted at the first two sites and photographs have been taken. The other two site visits are scheduled for May and June 2015.

Products. Composite stories have been prepared as handouts for the Citizen Potawatomi Nation (CPN) and the Coeur d'Alene Tribe (CDA). Three of the participating groups will present information about their Tribal Sponsorship programs at the ACA Success Stories breakout session at the 2015 Annual Tribal Self-Governance Consultation Conference in Reno, NV, April 30, 2015.

Distribution. Two handouts (one each featuring CPN and CDA) have been prepared for inclusion in the registration packets for the Annual Self-Governance Consultation Conference in Reno, April 27-30, 2015. After the Conference, the handouts will be distributed electronically by SGCE to all Self-Governance Tribes. A page is being constructed on the SGCE website where the press releases can be downloaded in Word format so that they can be used by Tribes in their newspapers and other applications. Additional distribution options are under consideration. Individual and composite stories and photos are being created for a magazine layout which will be completed by the end of the project period; however, there is no funding in the current 2014-2015 JST Amendment for printing and distribution of the magazine.

Other Activities

In addition to the policy analysis, training and technical assistance activities enumerated in this final report, there were many efforts to coordinate with the IHS, HHS, and other national NIHOE groups. Technical staff have participated in meetings and monthly teleconferences with other National Tribal organizations and partners, including National Congress of American Indians, National Indian Health Board and the National Council of Urban Indian Health to assist in coordinating efforts and reduce any duplication of AI/AI training materials.

Attachment: Appendix A: Evaluation of Self-Governance Health Reform Training and Technical Assistance Plan (2014-2015), April 2015.

For more information on this report, please contact Cyndi Ferguson at cyndif@senseinc.com

Attachment A Summary from Webinar Evaluation Survey Reports

As part of the 2014-2015 Work Plan, four ACA Webinars have been conducted in the first six month period (October 2014-March 2015). The dates and topics of Webinars provided include:

- “Updated and Simplified!!! Securing an Exemption from the Affordable Care Act’s Tax Penalty for Not Maintaining Minimum Essential Coverage,” presented by Doneg McDonough, October 22, 2014.
- “Update on IHS/VA Agreements and Opportunities for Tribes,” presented by Myra Munson, January 21, 2015.
- “Current Topics with Affordable Care Act Implementation,” presented by Doneg McDonough, February 12, 2015.
- “Premium Sponsorship Options for Tribes,” presented by Doneg McDonough, March 18, 2015.

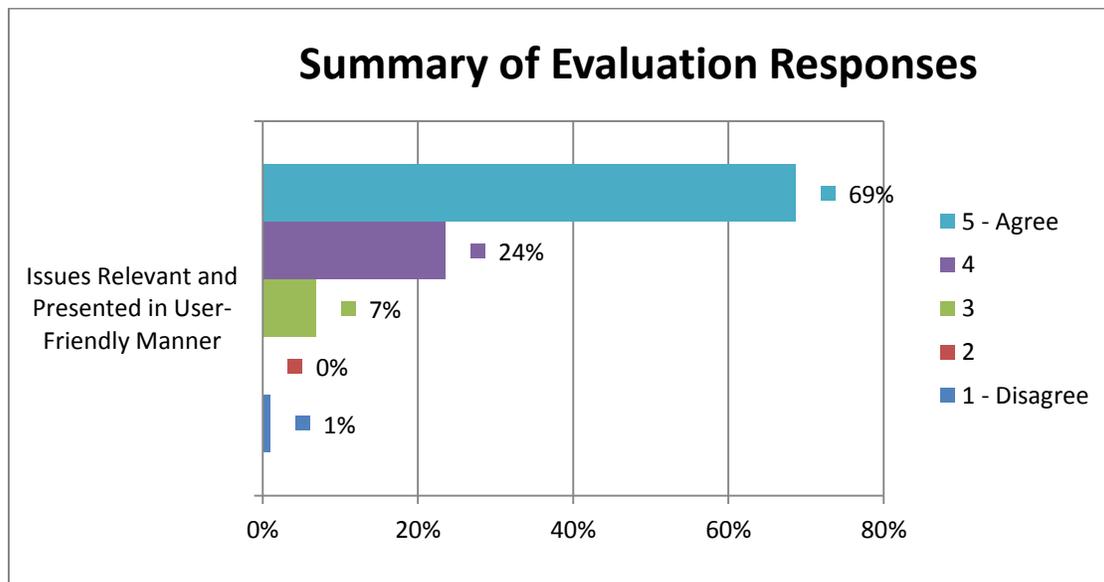
Approximately 210 registrants completed and participated in the 10/22/14 Webinar; 128 registrants in the 1/21/15 Webinar; 105 registrants in the 2/12/15 Webinar; and, 240 registrants in the 3/18/15 Webinar. Following completion of the Webinar(s), participants were asked to complete a brief evaluation survey.

Evaluation Categories

Participants were asked to rank the following items on a scale of 1 to 5; with 1 being the lowest (disagree) and 5 being the highest (agree):

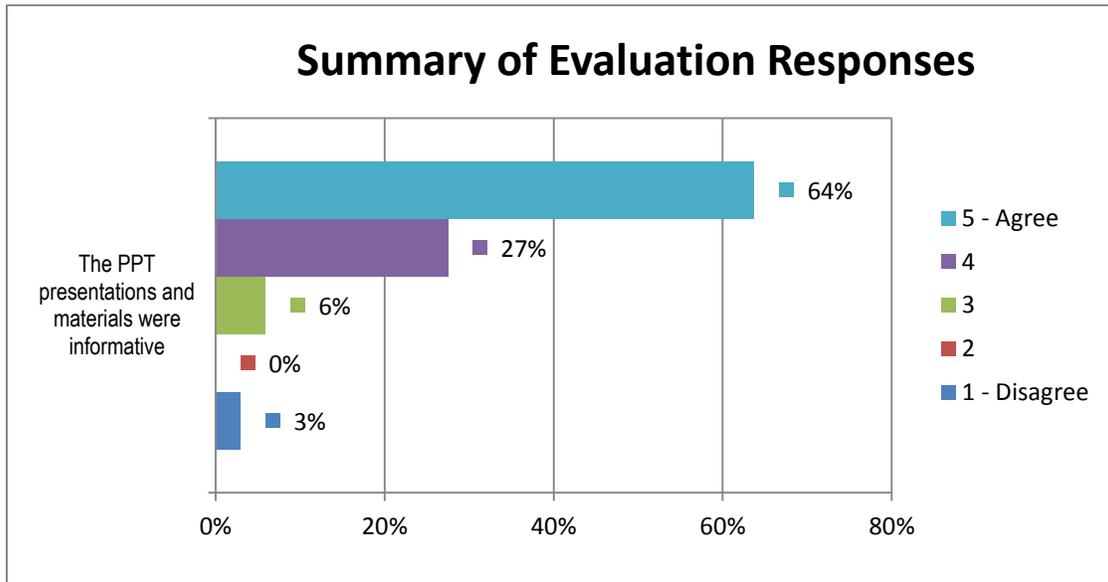
- Issues were relevant and presented in a user-friendly manner
- PowerPoint presentation and materials were informative and helpful
- Presenter(s) were responsive to questions
- Length of Webinar provided sufficient time to cover the issues

Chart 1 – Content Delivery (All Webinars Combined)



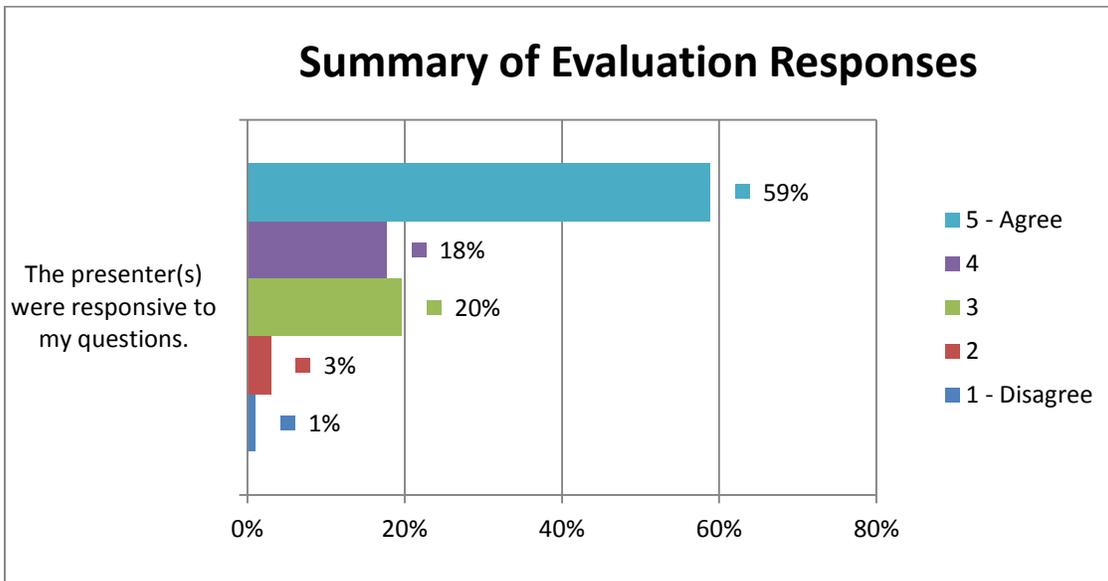
- Participants were very complimentary of the information and issues presented.
- Overall, 93% of participants ranked this category as either 4 or 5.

Chart 2 – Resource Materials (All Webinars Combined)



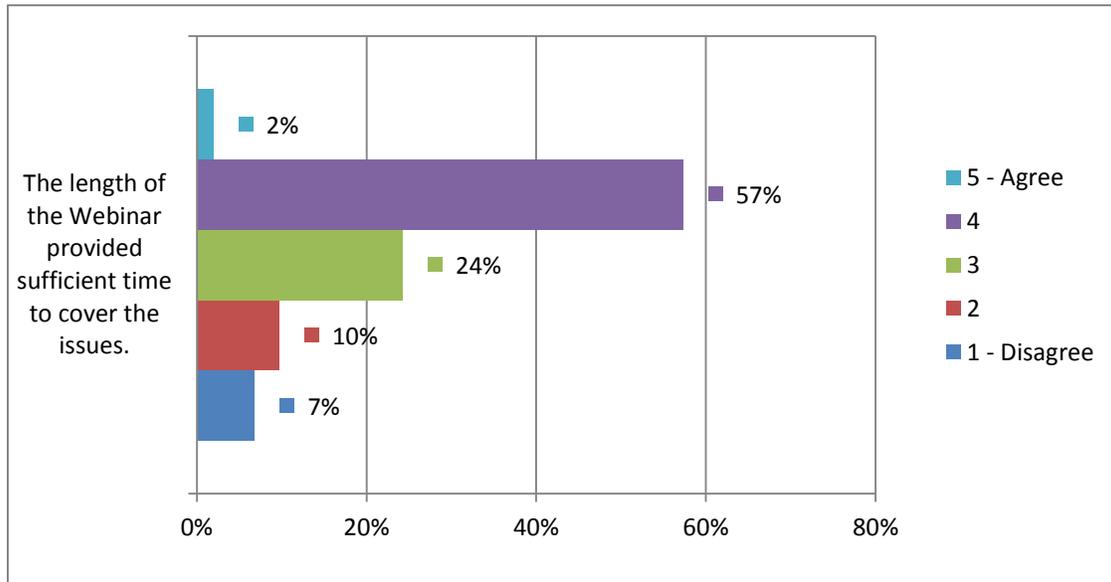
- Copies of the PPT presentations were shared 1 day in advance for all the Webinars.
- Overall, 91% of participants ranked this category as either 4 or 5.

Chart 3 – Responsive to Questions (All Webinars Combined)



- Opportunities were provided at various points throughout the Webinar(s) for participants to raise questions. However, time was not sufficient to answer all questions during the Webinar(s). For those questions that were not answered, a written summary was provided and posted on the Self-Governance Communication and Education (SGCE) website following the Webinar(s).
- Overall, 77% of participants ranked this category as either 4 or 5.

Chart 4 – Length of Webinar(s)-



- It appears that additional time may be needed for the Webinars.
- Overall, only 59% percent of participants ranked this category as either 4 or 5.

The following summarizes additional comments received for each respective Webinar:

10/22/14 Webinar - “Updated and Simplified!!! Securing an Exemption from the Affordable Care Act’s Tax Penalty for Not Maintaining Minimum Essential Coverage”

Please list other topics you would like to have covered in future trainings:

- Cost Sharing Protections for AI/AN
- Native American Premiums waived for Child Health Plus
- Primary care and behavioral health integration

Please share any additional comments:

- Good job!
- I am glad that I participated; it was very informative.
- Thanks for all the hard work.
- I tried to take notes, but presenter spoke too fast.

1/21/15 Webinar- “Update on IHS/VA Agreements and Opportunities for Tribes”

Please list other topics you would like to have covered in future trainings:

- ACA/IHCIA Regulation and Policy Involvement
- Status of Expansion of Medicare-Like-Rates
- Care Coordination between VA / IHS and Tribal Health Programs - overview of specialty services and programs available to eligible Veterans and access to these programs
- More on VA
- MORE WITH IHS FACILITIES

Please share any additional comments:

- Will there be monies to improve IHS facilities for the veterans to utilize the Indian Health Services-- in the clinics with the doctors, nurses, mental health, pharmacies, and dental services provided?
- For some of the Tribal Veteran Cemetery plots, Veteran Buildings and Memorials--- need assistance with these facilities being established
- Can Mobile units to visit the reservations that provide treatment and services to come out more often?
- Presenter did a very good job of covering topics related to subject of today's Webinar and gave many good insights. Thank you for a job well done.
- This Webinar was very timely, clear and informative.
- Excellent information & presentation!
- Recommend that presentations which involve both VA and IHS agencies that those agencies are a part of the presenter panel - even if it is only to assist with Q&A and shows interagency collaborations. Otherwise, very helpful overview and history of the program.
- Webinar was very informative. How can I obtain information on today webinar?

2/12/15 Webinar - “Current Topics with Affordable Care Act Implementation”

Please list other topics you would like to have covered in future trainings:

- More details on the provider contracts and how challenges are being overcome. While we have tried to be proactive to get our Tribal clinic contracted with private insurers, I am not sure how successful we have been with the QHPs. We have had challenges getting our providers credentialed on some plans because they are not licensed in state, which is supposed to be ok for IHS/Tribal clinics, but somehow doesn't work well yet in practice.

- Indian - specific cost sharing protections.....need more detailed information.
- I would like to see more in-depth information about hardship exemptions. In the facility I work in we have a lot of descendants and they are opting not to pursue marketplace insurance or they fall in the gap and are unable to get insured but still need to become exempt from the shared responsibility payments.
- Now that we have had a year of the ACA and some T/TO/U organizations are paying for insurance for their members, can we discuss numbers? What were the barriers? What was the savings to the organizations or were there any savings? Did they require the member to use their health facility if insurance premiums were paid by the organization? Was there a formula used to present to the board to show savings/loss?
- Very good topics.
- I wish there was a simple straight forward brochure that we could personalize to our own Tribe to hand out to people. We had materials dispensed in the beginning, but we have learned so much more since two years ago. We need an updated brochure of ACA for Natives with marketplace specified, explains the tax credit process, finer and main points only.
- More Tribal sponsorship programs, such as Medicare Part D. If any I/T/U facilities are implementing this as a program? What are the savings?

Please share any additional comments:

- At one point there were technical difficulties that caused the main person to be offline for about 5 minutes, but then it was resolved and the discussion continued.
- This was a very good Webinar. I have covered quite a bit of this ground from the point of view of the Tribe's employer health plan, and I appreciated the perspective from the clinic. Really good job, and I'm sure I'll be going back to the slides. And listening to more webinars if you continue to have them. Thanks!
- I like that the presenters are very knowledgeable and informative about the topics. They don't leave us in the dark. Thanks for all the information. It allows us to assist our patients properly.
- The Webinar was very informative to my job duties as a Patient Benefit Coordinator. Thank you for clarifying some questions I had about the Exemption process.

3/18/15 Webinar - "Premium Sponsorship Options for Tribes Premium Sponsorship Options for Tribes"

Please list other topics you would like to have covered in future trainings:

- More information on the Cost Sharing Protection and Limited Cost Sharing Protection.
- Anything on ACA, Tribes as a whole, employers and governments, that offer self-insured health plans, Tribal employer mandate.
- The Tribal Education Outreach Consortium had a spread sheet that could be used to calculate savings for sponsorship. http://www.nativeexchange.org/directors_sponsorship.php

- Tribal Sponsorship for MCD Part B & D premiums. More info on this topic, Tribal Premium Sponsorship, for both tribal members and tribal employers. Also any info and/or templates that become available on exactly how to enact the Sponsorships.

Please share any additional comments:

- I believe that the Marketplace should have a Native American Liaison, who we could contact regarding questions gearing toward the Native American population, because when I call the Marketplace regarding certain issues that I come across. They seem to read a script of the same stuff I have read and it something that we cannot seem to find in the policy or guidelines. It's like we just come to a dead end road with no answers.
- Great presenter
- The webinar was great, but not long enough to cover all topics.
- Presenter did a great job on this topic. I realize we did not have enough time to cover everything and answer all the questions, but I don't recommend a longer Webinar. I think it would be better to break the topic into several Webinars.
- The information provided is relevant and useful. Would like more information to be able to present to Administration and decision makers.
- I would like more information on how a Tribe/THO would sponsor MCR premiums; being SSA deducts these premiums from benefits.
- Thank you for the presentation!