National Self-Governance Outreach and Education on the Patient Protection and Affordable Care Act, collectively known as the Affordable Care Act (ACA) and the Indian Health Care Improvement Act (IHCIA)

Project Work Plan
FY2024

February 2024
Introduction:
Indian Health Service (IHS) has provided annual funding to the Jamestown S’Klallam Tribe (JST) through a formal Amendment to their Funding Agreement to provide outreach, education, technical, research and analytical support nationally to Self-Governance Tribes on P.L. 111-148 as amended by P.L. 111-152, collectively known as the Patient Protection and Affordable Care Act (ACA) and the Indian Health Care Improvement Act (IHCIA).

The overall objective of this Project is to improve Indian health care by conducting ACA/IHCIA training and technical assistance across Self-Governance Tribal communities to help advance opportunities that will improve the quality of and access to health care services and increase resources.

The JST Amendment outlines a detailed Scope of Work, including specific deliverables that relate to Outreach and Education, Policy Analysis, Information Sharing and Technical Assistance, and Training. The Amendment requires JST to perform the following major activities:

1. Focus on the needs of Self-Governance Tribes by providing policy review and analysis of health care issues, training Tribal leaders on the health insurance and other federal health care coverage options available under the ACA/IHCIA and sharing outreach and education best practices among Self-Governance Tribes.

2. Develop a technical assistance plan and provide technical assistance to Tribal leaders, Tribal employers and Self-Governance Tribes on ACA/IHCIA implementation across the Indian health care system.

3. Work with Partners and Self-Governance Tribes to achieve economies of scale and reduce duplication of AI/AN training and outreach and education materials.

4. Work with Partners and Self-Governance Tribes to enhance collaboration with other Federal agency programs, local, state, Tribal and national partners.

Post Public Health Emergency:
As we continue to move past the COVID Public Health Emergency (PHE) environment, Project staff will continue education and outreach actions needed for Self-Governance Tribes related to post-PHE issues, such as Medicaid Unwinding, Telehealth and other potential flexibilities in federal health care programs.

Work Plan Structure:
To reflect the major categories identified in the JST Amendment, this FY2024 Work Plan is organized into the following sections:

A. Outreach and Education
B. Policy Analysis
C. Technical Assistance and Information Sharing
D. Training/Webinars
Each section includes the activities that will be conducted under the Project to fulfill the identified deliverables and objectives.

A. Outreach and Education

To meet these deliverables, the Project Team will perform the following activities:

Coordinate and develop a multiple strategy education and outreach training approach that reaches the widest audience possible in a timely fashion, appropriately tailored to the needs of Self-Governance communities. TSGAC will work with Project Team members and other subject matter experts to design and conduct Webinars/Trainings and develop educational materials and briefings which reflect the needs of Self-Governance Tribes. The TSGAC will also target Tribes who are new to Self-Governance in helping them understand how best to utilize the ACA/IHCIA to maximize reimbursement and access to care.

Share Information on the Self-Governance Communication and Education Website. JST will work closely with the Self-Governance Communication and Education office (SGCE) to maintain and enhance the Health Care Reform specific section of their website. The main categories on the ACA/IHCIA section of the website include:

A. Updates and Briefings on Current ACA/IHCIA Issues, including the Tool Kit for Tribal Sponsorship
B. Trainings & Webinars (All recorded Webinars and Related Materials)
C. Medicaid Unwinding Guide and Resources
D. ACA Success Stories
E. FAQs
F. “Ask Us” section that allows people to submit questions which are answered by a technical expert. Based on questions received to date, the Q&A sections will continue to be organized and posted for others to access.

TSGAC technical representatives will also advance Outreach and Education efforts by:

- Providing measurable outcomes and performance improvement activities for ACA/IHCIA outreach and education actions.
- Sharing information, innovative ideas, challenges and solutions, and providing progress reports.
- Maintaining an open question and answer forum regarding the ACA on the Self-Governance Communication and Education (SGCE) website.
- Advising TSGAC and drafting correspondence on key ACA/IHCIA issues.
- Sending Broadcast notices and emails and posting them on the SGCE website.
- Working with TSGAC Tribal Leadership/Staff, IHS and Tribal Partners.
- Developing PowerPoint presentations, graphics, issue briefs and regular/timely broadcast notices on hot topics to Self-Governance Tribes to be used as resource materials.
• Utilizing the SGCE website to ensure that training and educational materials are widely distributed and easily accessible for Tribal leadership and frontline enrollment personnel.

B. Policy Analysis

To meet these deliverables, the Project Team will perform the following activities:

Policy analysis. In coordination with the TSGAC, technical consultants will review and coordinate ACA/IHCIA policy recommendations and strategies by Self-Governance Tribes. Given the increase of telehealth as a delivery method as well as changes in reimbursement and billing processes during the pandemic and the resulting CMS waivers and regulations, the TSGAC will closely track and monitor these developments and provide information to Self-Governance Tribes as they emerge. This will include information regarding the unwinding as it applies to Medicaid enrollment (post PHE) and maintenance of PHE flexibilities in ACA/IHCIA federal health care programs.

The TSGAC will also continue on-going collaboration with national Indian organizations to analyze proposed regulations and emerging issues related to the ACA/IHCIA implementation. TSGAC will attend the National Indian Health Board (NIHB) Medicare and Medicaid Policy Committee and the CMS Tribal Technical Advisory Group (TTAG) meetings and teleconferences to ensure coordination with other Tribal and Federal stakeholders. Project staff will also continue to attend a series of small workgroups that have been formed by CMS/TTAG (in 2023) to address administrative and regulatory issues. TSGAC will develop and maintain a list of priority issues based on these on-going meetings and discussions.

All of the above activities will assist in: (1) advancing Self-Governance priorities; (2) directly involving Self-Governance Tribes in the development of policy and regulations; and, (3) coordinating strategies with other Tribal and Federal partners.

Performance metrics. The JST amendments requires the TSGAC to “monitor and review ACA enrollment metrics” and “collect and disseminate data that tracks American Indian/Alaska Native enrollments through the Marketplaces into Qualified Health Plans and Medicaid, and analysis of barriers and opportunities.”

To further the ability to measure outcomes of TSGAC and other Tribal organization activities, technical advisors will continue to work with the leadership of the Tribal TTAG to secure data on Marketplace enrollment from the Centers for Medicare and Medicaid Services, Center for Consumer Information and Insurance Oversight (CMS/CCIIO). A general analysis and review will be conducted by TSGAC, and a comparison will be developed to previous data sets that have been compiled and developed under this Project. As was done in prior Project periods, Project staff will work to share that information broadly with partner organizations and Tribal leadership.
C. Technical Assistance and Information Sharing

To meet these deliverables, the Project Team will perform the following activities:

In each of the previous Project years, the TSGAC conducted an online survey of Self-Governance Tribes to learn about Tribal preferences for ACA/IHCIA training and technical assistance. Additionally, online evaluations that followed each of the webinars conducted have been used to identify additional topics for training.

**FY2024 Project Survey:** In the first quarter of this current Project Year, Self-Governance Tribes were again surveyed to see how their needs and preferences have changed. 45 Tribal participants representing 18 separate states responded to the survey. In the survey, the TSGAC presented potential topics of interest and asked respondents to rank them with 1 being highest priority.

The following 3 issues received the highest rankings overall:

1. Tribal Sponsorship of health coverage for AI/ANs
2. Overall review on the ACA/IHCIA provisions (ACA/IHCIA 101 Primer)
3. Telehealth

In addition, the TSGAC requested Tribal input on other preferences/priorities on Topics. Main topics identified by Tribes included the following:

- General Information on Medicaid Expansion
- Mental Health and Covid Billing Updates in 2024
- Tribal Best Practices in Billing and Reimbursement
- Overview of State Medicaid Waivers and Policies
- Tribal Public Health Authorities

This input will be used in identifying key topics for potential webinars/trainings, technical assistance, and the development of specific TSGAC issue briefs. The TSGAC will also coordinate with other Tribal partners (where appropriate) in the development of comments in response to any proposed regulations related to these top issues.

Based on other general recommendations received, there was an overwhelming request for regional onsite trainings. As a result, Project staff intend to conduct at least one in-person training, in addition to presentations at national and regional Tribal conferences.

**Access to Available ACA/IHCIA Resources:** The TSGAC has developed a significant compilation of resources and materials, including recorded webinars, briefing papers, and data analysis. Results from the most recent survey indicate that highlighting and sending regular reminders of the information available on the Website would help increase knowledge and access to the posted webinars, trainings and TSGAC issue briefs.
Finally, several Tribal respondents in the survey noted appreciation for the timely and informative broadcast notices on key issues and the expertise of staff that has been developed throughout the years of the Project and recommended continue to maintain and update the Project’s products and services.

Other Technical Assistance and Information Sharing activities to be addressed this Project year include the following:

- Explore ways to best coordinate with our IHS and Tribal Partners and Area Health Boards on national and regional training as well as continue to share links within the SGCE website to assist in outreach efforts.
- Provide technical assistance to the NIHB MMPC and CMS TTAG on Medicaid/Medicare Administrative and Regulatory Priorities.

TSGAC Tri-Annual Meetings. Technical consultants will continue to participate (either in person or virtual) in TSGAC tri-annual meetings. These meetings provide an opportunity to assure that the TSGAC and Self-Governance Tribes are informed about current ACA/IHCIA issues and have an opportunity for interactive dialogue. These meetings also provide an additional opportunity for further training on key topics.

Technical Assistance from TSGAC Health Care Advisors. The Q&A section on the SGCE Website provides a direct avenue for Tribes to request information on specific issues and submit specific questions that they have. The response is provided directly to the Tribe/Tribal Organizations as well as posted on the SGCE Website, when appropriate.

Other. Finally, the Amendment requests that JST serve as a “resource broker and identify subject matter experts to conduct training and technical assistance for implementation of the ACA enrollments”. To meet this goal, TSGAC will assist Self-Governance Tribes to identify subject matter experts where possible on related topics in the TSGAC webinars. In addition to maintaining professional relationships with policy experts in the private sector, TSGAC will also maintain relationships with key people who work inside agencies such as CMS, IRS, and IHS, and call upon them as needed to answer questions that arise.

D. Webinars & Trainings

To meet the deliverables, the Project Team will perform the following activities:

Webinars. Using Webinars proved to be an effective way to reach a myriad of people across the country on a timely basis. Project staff have utilized a very user-friendly platform to deliver the Webinars with a professional Team of panelists, facilitator, and technical IT support to provide for a streamlined process for participants. Participation has remained consistently high, numerous questions and comments are discussed, and feedback has been positive, as demonstrated by the evaluation results included in the past project year final reports.
For FY2024, TSGAC will continue to build on this experience and maintain the current approach for webinars, including advance notice, evaluations, certificates of completion, and posting recordings and materials on the SGCE website. Technical consultants will foster distribution of the webinars by sharing links to the recorded Webinars with partner organizations. Approximately 3-4 Webinars will be held during this Project Year. Based on the survey of Self-Governance Tribes that was conducted, TSGAC Project staff will identify potential high priority topics.

**In-person Trainings.** As noted above and based on input from Tribes in the recent survey, Project staff intend to conduct at least one in-person training, in addition to presentations at national and regional Tribal conferences.

**2024 Annual Tribal Self Governance Conference.** Appropriate topics and/or training sessions will be provided through workshops at the upcoming 2024 Annual Tribal Self-Governance Conference (scheduled in April 2024 in Chandler, AZ) either using the topics identified in this Training Plan or other topics that may be more relevant to Self-Governance Tribes at the time.

**Other training opportunities.** The TSGAC and technical consultants are likely to participate in workshops at NIHB meetings; and will coordinate with other national and regional organizations to look for further training opportunities and areas of partnership and collaboration. Finally, Project staff may also participate in other training activities (e.g. CMS or IHS Regional trainings).

**Project Team:** TSGAC and JST Tribal leadership will coordinate with the Project Team and technical consultants as needed on the performance of these deliverables.

**Project Tracking and Evaluation:**

**Evaluation of Webinars and Training Sessions.** An Evaluation Form will be used to obtain immediate feedback from all Webinar and Training participants. The purpose of the evaluation will be to: (1) assess the value of the Training; (2) determine if the Training learning objectives have been achieved; and, (3) gather input which can be used to improve the content of the training materials for use in future sessions.

**Additional Evaluation.** A tracking list of all deliverables in the SOW will be maintained for the Deliverables in this Work Plan and updated quarterly to assure that all the objectives are accomplished. A six-month report and a final report will be submitted to the IHS.