UNITED STATES OFFICE OF PERSONNEL MANAGEMENT
Washington, DC 20415

The Director

OCT 5 2010

Dear Tribal Leader,

We are writing to initiate a **consultation on Section 157, Access to Federal Insurance**, in the recently reauthorized Indian Health Care Improvement Act (IHCIA) that was passed as a part of the Affordable Care Act. This provision authorizes Tribes operating programs under the Indian Self Determination and Educational Assistance Act (ISDEAA) or urban Indian organizations operating a program under Title V of the IHCIA to purchase coverage under the Federal Employees Health Benefits (FEHB) program and Federal Employees Group Life Insurance (FEGLI) for their employees.

The FEHB program covers about 8 million Federal civilian employees, retirees, former employees, family members, and former spouses. It is a voluntary program and paid for through employee and employer contributions. The FEGLI program covers about 4 million Federal employees and retirees, as well as many of their family members. FEGLI provides group term life insurance and does not build up any cash value or paid-up value. It is also a voluntary program and paid for through employee and employer contributions. More information about the FEHB and FEGLI programs is available at www.opm.gov/insure/health.

The Office of Personnel Management (OPM), which administers these programs, is working with the Department of Health and Human Services (DHHS) and the Indian Health Service (IHS) to implement this Affordable Care Act provision. We know that implementation of this provision is a top tribal priority. OPM and HHS/IHS want to consult with Tribes in order to help shape our preliminary plan in a way that best meets the needs of participating Tribes and Tribal organizations. This will allow us to maximize the impact of this new provision, which will serve to improve access to health care for tribes and tribal organizations throughout the country.

While the passage of the IHCIA creates this new authority, a mechanism needs to be developed to administer this option. Tribes and urban Indian organizations will purchase coverage directly from OPM through a Fiscal Intermediary and will pay the employer portion of premiums which includes an administrative fee to cover operating expenses. Tribes and urban Indian organizations will also be expected to assist with employee premium collection (payroll deductions) and conduct human resource functions at the local level. As we plan for implementation, additional input from Tribes is particularly helpful.

Please provide your input within 30 days on the attached questions to assist us in the planning process for successful implementation of this provision.

We are committed to meaningful consultation with Tribes and Tribal organizations in order to implement this provision as soon as possible, and we look forward to a strong partnership with Tribes and Tribal organizations throughout the implementation process.

Thank you.

Sincerely,

/John Berry/

John Berry
Director
Office of Personnel Management

/Yvette Roubideaux/

Yvette Roubideaux, M.D., M.P.H.
Director
Indian Health Service

Form approved:
OMB No. 3206-0251
Expires: 4/30/2011

Public Burden Statement

The public reporting burden for this information collection is estimated to be 20 minutes. This burden estimate includes time for reviewing instructions, researching existing data sources, gathering and maintaining the needed data, and completing and submitting the information. Send comments regarding the accuracy of this burden estimate and any suggestions for reducing the burden to: U.S. Office of Personnel Management, Planning and Policy Analysis, Attn: OMB Number (3206-0251), 1900 E Street NW, Washington, DC 20415-7900. You are not required to respond to this collection of information unless a valid OMB control number is displayed.

FEHB/ FEGLI Implementation Questionnaire for Tribes and Tribal Organizations

CURRENT COVERAGE:

1. The average FEHB premium for the 2010 plan year is about $498 per month for self only, and about $1120 per month for family coverage. This combines the employer and employee shares, and does not include the administrative fees described in the attached letter. How does this amount compare to the total monthly premiums for the insurance coverage currently received by your Tribal employees?
   - ☐ Our premiums are about the same
   - ☐ Our premium is HIGHER than the FEHB average
   - ☐ Our premium is LOWER than the FEHB average
   - ☐ We don't offer health insurance coverage for employees

2. We are trying to have a better understanding of health insurance across Indian country. The contract year for FEHB and FEGLI coverage is based on the calendar year. If you offer health insurance coverage for employees, please share the contract year for insurance coverage currently received by your Tribal employees?
   - ☐ Calendar Year (e.g. starts January 1)
   - ☐ Other (e.g. starts June 1 to May 31)

3. Does your Tribe or Tribal organization use an agent or broker to gain access to the health insurance coverage currently received by your Tribal employees?
   - ☐ No
   - ☐ Yes

4. Does your Tribe or Tribal organization have an existing process used for employee payroll deductions and insurance premium collection?
   - ☐ Yes
   - ☐ No

ELIGIBILITY:

1. The scope of eligibility under this new provision extends coverage to employees of a Tribe or Tribal organization carrying out a program under the ISDEAA, or an urban Indian organization carrying out a program under Title V of the IHCIA. Eligibility

for this program could be interpreted at least two ways: 1) only employees of ISDEAA or Title V of the IHCIA programs are eligible; or 2) all Tribal employees. We would like your input on this issue.

ENROLLMENT:

1. To help us create a system to be used to enroll your Tribal employees, we need to determine the level of interest in accessing FEHB and/or FEGLI coverage for eligible employees. Do you believe your Tribe or Tribal organization would plan to take advantage of this program when it becomes available in 2011?
   - ☐ Yes (please provide additional information regarding the estimated number of enrollees from your tribe in both FEHB and FEGLI):
     Number of total anticipated FEHB enrollees: _____
     Number of total anticipated FEHB enrollees if only 638 employees eligible: _____
     Number of total anticipated FEGLI enrollees: _____
     Number of total anticipated FEGLI enrollees if only 638 employees eligible: _____
   - ☐ No
   - ☐ No, not in 2011, but we would possibly enroll in a future year. What is the future target date for your participation? _____

2. If you do not want to participate at all, please tell us why.

Any other comments or input on implementation of this provision are welcome.

Please submit your input within 30 days. We are asking you to submit your input as soon as possible, so we can keep the implementation process moving forward. The questions can be returned to us by fax at (202) 606-0633, by email to ian.hunter@opm.gov or by mail at the following address:

Office of Personnel Management
P.O. Box 791
Washington, DC 20044

Please provide us with your own contact information:

Name _____
Tribe or tribal organization _____
Phone number _____
FAX _____
E-mail _____

We look forward to a successful partnership. Thank you.