

Policy Level

Agency:

107 Health Care Authority on Behalf of the Health Benefit Exchange

Decision Package Code/Title:

PL-WA-HBE Medicaid Redeterminations and Continuous Coverage

Agency RecSum:

The Washington Health Benefit Exchange (Exchange) requests additional funding to support increased costs resulting from Medicaid redeterminations and anticipated increased year round utilization of the customer support center. Further, enrollment assisters and community partners are requesting additional support tools to improve continuous coverage for Washingtonians transitioning between health insurance programs.

Fiscal detail:

Operating Expenditures	FY 2024	FY 2025	FY 2026	FY 2027
001-1 GF-State	\$1,354,000	\$141,000	\$162,000	\$180,000
17T-1 HBEA	\$69,000	\$1,006,000	\$746,000	\$775,000
001-C GF-Federal	\$1,216,000	\$347,000	\$389,000	\$424,000
Total Expenditures	\$2,639,000	\$1,494,000	\$1,297,000	\$1,379,000
Biennial Totals	\$4,133,000		\$2,676,000	
Staffing	FY 2024	FY 2025	FY 2026	FY 2027
FTEs	0.0	1.0	1.0	1.0
Average Annual	0.5		1	
Object of Expenditure	FY 2024	FY 2025	FY 2026	FY 2027
Obj. C	\$2,639,000	\$1,494,000	\$1,297,000	\$1,379,000
Revenue	FY 2024	FY 2025	FY 2026	FY 2027
001-C GF-Federal	\$1,216,000	\$347,000	\$389,000	\$424,000
Total Revenue	\$1,216,000	\$347,000	\$389,000	\$424,000
Biennial Totals	\$1,563,000		\$813,000	

Package Description

What is the problem, opportunity or priority you are addressing with the request?

The 2023-2025 biennial budget included additional funding for the Exchange, in collaboration with HCA, to help promote continuous coverage for Washingtonians losing Washington Apple Health coverage during the Medicaid unwind that started April 1, 2023.

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- Due to the COVID-19 public health emergency (PHE) and associated federal regulations, many individuals received continuous Apple Health (Medicaid) coverage since March 2020 regardless of changes to their income, assets, household size and other eligibility criteria.
- This extension ended March 31, 2023 due to the Consolidated Appropriation Act, 2023.
- Normal operations resumed April 1, 2023.

Approximately 2 million Apple Health customers are renewed through *Washington Healthplanfinder* each year. The Exchange supports these customers by:

- Generating customer notices (request for information, termination/renewal, etc.) and processing renewals through *Washington Healthplanfinder* (HPF)
- Assisting customers who need to take action by providing outreach and enrollment support through the Customer Support Center and the Exchange's statewide assister network (includes Navigators, Brokers, and Tribal Assisters).

Historically, about 550,000 Washingtonians “churn off” Apple Health coverage each year due to changes that impact their eligibility (e.g., changes in household income or household composition). Individuals losing Apple Health must take action through *Washington Healthplanfinder* to remain covered. Non-action can result in losing coverage and becoming uninsured. In recognition of this ongoing risk, and to help mitigate it for the increased number of Apple Health enrollees facing it during the unwind, the Legislature allocated resources for the Exchange to provide enhanced outreach and enrollment assistance.

Since April 1, 2023, when regular annual eligibility checks resumed, the number of Apple Health enrollees ‘churning off’ coverage has increased significantly. From April 1, 2023, through July 2023, over 363,000 individuals have already lost coverage.

Enhanced outreach and enrollment assistance are already demonstrating success in helping Washingtonians maintain coverage.

- Customer Support Center activity is significantly higher. Overall volume is up 28%, driven by Medicaid related volume which has increased by 61%.
- More customers are visiting *Washington Healthplanfinder* to see what health coverage programs they are eligible for. In July, for example, web traffic was up over 50% compared to the same time last year.
- Among those who have had their coverage end, over 78,000 individuals have already regained coverage through *Washington Healthplanfinder* (59,000 in Apple Health, 19,000 in a qualified health plan). Over 90% did not experience any gap in coverage.
- The percentage of QHP eligible customers selecting a QHP following their Apple Health coverage end has increased significantly compared to historical averages. Overall, the conversion rate from QHP eligible to QHP selected has increased 65%.

What is your proposal?

The Exchange is requesting funding to maintain Customer Support Center capacity to support people at risk of losing coverage, to maintain the efforts that have shown the most results and promise to date in Washington and other leading states, and to further reduce administrative barriers

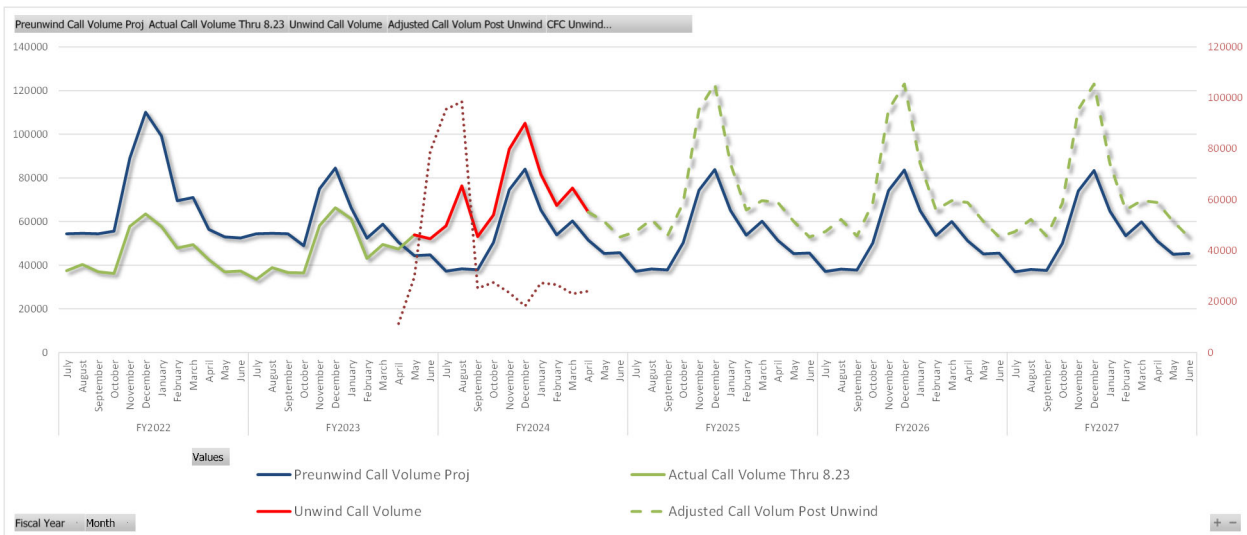
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for residents leaving Medicaid. Continuing this enhanced coordination, notification, and outreach would permanently support the over half a million Washingtonians who lose Apple Health each year, help avoid coverage loss and help enroll customers into plans that maximize available subsidies and cost sharing.

Maintaining Customer Support Center staffing levels to meet Increased Medicaid Demand

- As noted above, in response to increased outreach activity and an increased volume of renewals, Medicaid related call volume at the Customer Support Center has increased by 61%. Increased Customer Support Center staffing to date has kept average speed to answer times under 5 minutes, but this level of support cannot be maintained without additional resources. During the pandemic, when program eligibility was extended so many fewer customers ‘churned off’ Apple Health, the Customer Support Center saw a decline in Apple Health call volume. During the unwind, the call volumes have not only returned but have notably increased. Sustained increased call volumes, combined with an increased price per call due to vendor cost increases, necessitate additional funding to maintain current levels of support during the biennium.



Maintaining Resources for Monitoring and Reporting on Churn Data, to inform Tailored and Efficient Outreach

- The Exchange is requesting continued funding to support a data analyst to monitor churn data and generate reports to provide actionable information to outreach and enrollment partners (including assisters, carriers, state agency partners). Reports currently being generated on a weekly, monthly, and ad hoc basis are being used to help implementation partners maximize the efficiency and efficacy of their outreach efforts, by directing resources where they are needed most (including areas with a high volume of churning customers and/or those experiencing disparate outcomes). Examples of current reporting includes weekly outreach reports for assistors (navigators and brokers) partnered with customers losing Apple Health coverage; monthly topline reporting shared with agency partners;

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monthly churn carrier reporting; and monthly heat maps for enrollment partners that highlight by ZIP code where those who still need to take action are located.

- Continued funding is being requested to further analyze customer behavior during their transition from Apple Health to Exchange coverage, so the Exchange can more effectively keep people covered. This analysis would allow for further understanding of the provider network overlap between Medicaid and Exchange plans, so customers in active treatment with a preferred provider could further understand their coverage options. This analysis would also enable further understanding of plan selection/switching patterns, to inform what types of plans/plan structures are of most interest to the churn population. Initial data indicates, for example, that while nearly 60% of churning customers had an opportunity to stay with their Medicaid carrier, three out of every four chose to switch carriers when transitioning to commercial coverage. This type of information about Apple Health customer priorities when selecting a commercial health plan (cost, coverage level/metal tier, provider) would help ensure future efforts to further streamline the process best support Apple Health customer priorities.
- The Exchange is requesting continued unwind funding to more accurately survey, capture, and monitor information about those losing Apple Health, notably how many may have already regained coverage through an employer or other non-HPF source. Not knowing how many churning Apple Health customers are obtaining employer sponsored coverage inhibits the Exchange (and carrier and community-based partners) from most effectively target outreach resources. Other leading state-based-marketplaces report successfully utilizing customer survey forms/capabilities to support their unwind efforts. This request would support a modest step in that direction. during the unwind report that it has been helpful in targeting Exchange and partner resources toward those most at risk of becoming uninsured.

Increased Direct-to-Consumer & Small Business Outreach

For people losing Medicaid, using enhanced communication and outreach could result in thousands of additional WA residents maintaining health care coverage and access through existing programs. Particularly now, when Exchange plans are available for very low-cost premiums for most households up to 250% FPL due to Cascade Care Savings.

- **Texting:** The Exchange would like to add texting capabilities to highlight the availability of affordable qualified health plan coverage to people losing Apple Health. Nearly 50% of HPF customers are now accessing *Washington Healthplanfinder* through a mobile device. This includes younger customers, lower-income customers, and other customers who are least likely to own or use a computer. Texting allows for immediate, tailored communication to specific customer audiences, and has been successfully used by Health Care Authority and other leading state-based marketplaces during the unwind to reach Medicaid customers. Texting is being used as a cost-effective, and time-sensitive way to request updated contact information, reach customers with upcoming deadlines and would be an additional channel

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to help mitigate the risk of significantly more low-and middle income Washingtonians becoming uninsured.

- **Local, community-based outreach:** With the funding provided last session, additional resources were distributed to Lead Navigator organizations and Enrollment Centers across the state to bolster neighborhood/community specific outreach. The requested funding would allow for continued support of these efforts. Resources provided to date have supported: enrollment events; targeted advertising (such as bus advertisements directing riders to local enrollment assisters) and grassroots outreach campaigns (such as door knocking/hangers).
- **Small Business Outreach:** Individuals churning off of Apple Health often obtain employment at places that cannot afford provide employer sponsored insurance coverage. The health insurance coverage options available to employers, particularly the self-employed and small business owners, are also complicated, change often because of federal activity, and have tax implications. Small businesses have also shared that they have limited time and resources available to help employees understand their health insurance options. In response to these voiced concerns, and to further help promote continuous coverage for individuals churning off of Medicaid, the Exchange would like to work with a vendor to build and maintain a Small Business Decision Support Tool (modeled off of tools being provided in other states) that allows small business owners and employees to compare the costs of available coverage options.

How is your proposal impacting equity in the state?

Which target populations or communities benefit from this proposal?

Focusing on ensuring continuity of health coverage by helping people move from Medicaid to Marketplace has helped many lower income individuals keep coverage, particularly younger people of color.

Maximizing continuity of coverage for the Apple Health churn population will help address coverage disparities in Washington.

- Washington's uninsured rates are disproportionately higher in rural communities and in communities of color, particularly Hispanic and Native American/Alaska Native.
- A large majority of those losing Apple Health coverage have incomes below 250% FPL. Most of these customers can now access a Cascade Care plan for under \$10 month due to Cascade Care Savings.
- Historically, Black/African American and Hispanic Washingtonians, including the limited English proficiency population, are less likely to enroll in qualified health plan coverage after leaving Apple Health.

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Disproportionate Impact Considerations

There are no anticipated negative impacts to those from historically or currently marginalized identity groups. This request supports all Washington residents, including underrepresented and historically marginalized populations who apply for health plan coverage through Healthplanfinder including all those transitioning from Apple Health.

Small businesses are a large part of Washington's economy. Many small businesses are minority, women, and veteran owned businesses. Increasing resources and outreach to support this diverse audience in understanding their health insurance options will increase awareness and access for them to obtain quality affordable health coverage.

This proposal will help address persistent disparities in health insurance coverage, which contribute to poorer access to care and worse health outcomes for members of racial and ethnic minority groups. Partnering closely with the business community will help ensure that all small business owners and workers have access to the information and resources they need to seek and maintain insurance coverage.

Community outreach and engagement

To continue to reduce WA uninsured rate, this package focuses on low income clients churning off of Apple Health and includes services targeted specifically to low income and underrepresented populations in the QHP market. This package build on resources that were distributed to Lead Navigator organizations and Enrollment Centers across the state to bolster neighborhood/community specific outreach, and would allow for continued support of these efforts. Resources provided to date have supported: enrollment events; targeted advertising and grassroots outreach campaigns .

What are you purchasing and how does it solve the problem?

The enhanced efforts being made to date have already resulted in tens of thousands of Washingtonians staying covered, rather than losing their coverage, after their Apple Health coverage ends. Priority areas include: (1) securing Customer Support Center funding so the increased volume of Medicaid related calls can continue to be handled in a timely manner, (2) continued data gathering, monitoring and analysis so carriers, outreach partners, and the Exchange can tailor communications to people most at risk of losing coverage in an effective and timely manner (3) enhancing our ability to reach HPF customers through a text messaging and enhanced community specific engagement and outreach.

What alternatives did you explore and why was this option chosen?

The Medicaid Unwind provided an opportunity for the Exchange to test enhanced activity to ensure coverage continuity.

Assumptions and Calculations

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Expansion or alteration of a current program or service

This decision package seeks funding to cover the anticipated resulting from the Medicaid Unwind, maintain effective strategies that have helped people who remain eligible for WAH stay covered, helped people above income eligibility to purchase an affordable Qualified Health Plan, and further explore activities showing promise both in Washington and across the county.

Detailed assumptions and calculations

The Exchange requests \$4,133,000 in the 2023-25 biennium (\$1,354,000 GF-State in FY2024 and \$141,000 GF-State in FY2025), and \$2,676,000 in the 2025-27 biennium (\$162,000 GF-State in FY2026 and \$180,000 GF-State in FY2027) to maintain the efforts that have shown the most results and promise to date, both within Washington and across the county. Costs identified for fiscal year 2027 also represent ongoing annual costs to continue the activities identified in this request.

- No increase in Carrier Assessment is anticipated to fund this effort.

Operating Expenditures	FY 2024	FY 2025	FY 2026	FY 2027
Salaries	\$0	\$111,000	\$111,000	\$111,000
Benefits	\$0	\$37,000	\$37,000	\$37,000
Contracts	\$2,639,000	\$1,319,000	\$1,125,000	\$1,207,000
Goods and Services	\$0	\$26,000	\$23,000	\$23,000
Travel	\$0	\$1,000	\$1,000	\$1,000
Total Expenditures	\$2,639,000	\$1,494,000	\$1,297,000	\$1,379,000

Maintaining Customer Support Center staffing levels to meet Increased Medicaid Demand

- Medicaid Redeterminations
 - Increased Call Center Costs directly associated with Medicaid Redetermination for FY2024 are projected to \$2,537,254. During the unwind timeframe, Medicaid calls are up around 61% compared to before the unwind process began in spring 2023. These costs represent a wide range of call types, with the majority being regarding Washington Apple Health Eligibility, which are eligible for a 75% federal financial participation (FFP). Washington Apple Health calls that are more general in nature like asking question about their notices or changing addresses are eligible for a 50% FFP, and calls that occur after the individual has lost their coverage is not eligible for any federal funds, as they are then no longer a Medicaid enrollee.

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Med Red Call Impact	\$ 2,537,254
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Allocation Methodology	% of Allocation	Cost
BOTH WAH & QHP – Enrollment/Renewal/Update	19.5%	\$ 494,764.43
BOTH WAH & QHP – General Questions/Education	10.3%	\$ 261,337.11
QHP - HIPTC	18.9%	\$ 479,540.91
WAH/Medicaid – Enrollment/Renewal/Update	46.5%	\$ 1,179,822.88
WAH/Medicaid – General Question/Education	4.8%	\$ 121,788.17
Total Cost	100.0%	2,537,254

Call Type	FFP %	QHP	Medicaid Federal Share	Medicaid State Share	CHIP Federal Share	CHIP State Share
BOTH WAH & QHP – Enrollment/Renewal/Update	75%	50.2%	36.3%	12.1%	0.9%	0.4%
BOTH WAH & QHP – General Questions/Education	50%	50.2%	24.2%	24.2%	0.9%	0.4%
QHP - HIPTC	0%	100.0%	0.0%	0.0%	0.0%	0.0%
WAH/Medicaid – Enrollment/Renewal/Update	75%	0.0%	72.9%	24.3%	1.9%	0.9%
WAH/Medicaid – General Question/Education	50%	0.0%	48.6%	48.6%	1.9%	0.9%

Call Type	FFP %	QHP	Medicaid Federal Share	Medicaid State Share	CHIP Federal Share	CHIP State Share
BOTH WAH & QHP – Enrollment/Renewal/Update	75%	\$ 248,390	\$ 179,643	\$ 59,881	\$ 4,692	\$ 2,158
BOTH WAH & QHP – General Questions/Education	50%	\$ 131,201	\$ 63,259	\$ 63,259	\$ 2,479	\$ 1,140
QHP - HIPTC	0%	\$ 479,541	\$ -	\$ -	\$ -	\$ -
WAH/Medicaid – Enrollment/Renewal/Update	75%	\$ -	\$ 860,263	\$ 286,755	\$ 22,471	\$ 10,334
WAH/Medicaid – General Question/Education	50%	\$ -	\$ 59,201	\$ 59,201	\$ 2,320	\$ 1,067
		\$ 859,132	\$ 1,162,366	\$ 469,096	\$ 31,961	\$ 14,699

Call Type	State Funds	Federal Funds	Total Funds
BOTH WAH & QHP – Enrollment/Renewal/Update	\$ 310,429	\$ 184,335	\$ 494,764
BOTH WAH & QHP – General Questions/Education	\$ 195,600	\$ 65,738	\$ 261,337
QHP - HIPTC	\$ 479,541	\$ -	\$ 479,541
WAH/Medicaid – Enrollment/Renewal/Update	\$ 297,089	\$ 882,734	\$ 1,179,823
WAH/Medicaid – General Question/Education	\$ 60,268	\$ 61,520	\$ 121,788
Cost by Fund	\$ 1,342,926	\$ 1,194,327	\$ 2,537,254

Call Type	FY2024
General Fund State	1,343,000
General Fund Federal	1,194,000
Total Funds	2,537,000

- Medicaid call volumes
 - As the call centers begins to resume pre-pandemic call volumes, additional funds are requested to support the increased costs of answering those calls. During the Pandemic, the call center contract was extended, and to maintain affordability, a lower call volume forecast was included to counter balance the increased cost per call due to economic factors.
 - If Medicaid call volume returns to pre-pandemic levels, the cost difference to answer those calls due the increased price per call is expected to be an extra \$689,339 in the 2023-25 Biennium, and an additional ongoing cost beginning in the 2025-27 biennium of \$1,549,930.

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Call Volumes Returning to Pre-Pandemic	FY2024	FY2025	FY2026	FY2027
Call Center Call Costs (prior contract)	301,834	3,300,324	3,414,509	3,515,744
Call Center Call Costs (Contract Extension)	250,216	2,662,603	2,680,987	2,699,337
	51,618	637,721	733,522	816,408

Allocation Methodology	% of Allocation	FY2024	FY2025	FY2026	FY2027
BOTH WAH & QHP – Enrollment/Renewal/Update	19.0%	\$ 9,787.71	\$ 120,923.67	\$ 139,089.19	\$ 154,805.90
BOTH WAH & QHP – General Questions/Education	19.8%	\$ 10,222.48	\$ 126,295.12	\$ 145,267.57	\$ 161,682.42
QHP - HIPTC	15.3%	\$ 7,893.43	\$ 97,520.53	\$ 112,170.36	\$ 124,845.31
WAH/Medicaid – Enrollment/Renewal/Update	32.5%	\$ 16,775.84	\$ 207,259.68	\$ 238,394.87	\$ 265,332.85
WAH/Medicaid – General Question/Education	13.4%	\$ 6,938.47	\$ 85,722.30	\$ 98,599.77	\$ 109,741.28
Total Cost	100.0%	51,618	637,721	733,522	816,408

Call Type	FFP %	QHP	Medicaid Federal Share	Medicaid State Share	CHIP Federal Share	CHIP State Share
BOTH WAH & QHP – Enrollment/Renewal/Update	75%	50.2%	36.3%	12.1%	0.9%	0.4%
BOTH WAH & QHP – General Questions/Education	50%	50.2%	24.2%	24.2%	0.9%	0.4%
QHP - HIPTC	0%	100.0%	0.0%	0.0%	0.0%	0.0%
WAH/Medicaid – Enrollment/Renewal/Update	75%	0.0%	72.9%	24.3%	1.9%	0.9%
WAH/Medicaid – General Question/Education	50%	0.0%	48.6%	48.6%	1.9%	0.9%

Call Type (FY2024)	FFP %	QHP	Medicaid Federal Share	Medicaid State Share	CHIP Federal Share	CHIP State Share
BOTH WAH & QHP – Enrollment/Renewal/Update	75%	\$ 4,914	\$ 3,554	\$ 1,185	\$ 93	\$ 43
BOTH WAH & QHP – General Questions/Education	50%	\$ 5,132	\$ 2,474	\$ 2,474	\$ 97	\$ 45
QHP - HIPTC	0%	\$ 7,893	\$ -	\$ -	\$ -	\$ -
WAH/Medicaid – Enrollment/Renewal/Update	75%	\$ -	\$ 12,232	\$ 4,077	\$ 320	\$ 147
WAH/Medicaid – General Question/Education	50%	\$ -	\$ 3,373	\$ 3,373	\$ 132	\$ 61
		\$ 17,939	\$ 21,633	\$ 11,109	\$ 641	\$ 295

Call Type (FY2025)	FFP %	QHP	Medicaid Federal Share	Medicaid State Share	CHIP Federal Share	CHIP State Share
BOTH WAH & QHP – Enrollment/Renewal/Update	75%	\$ 60,708	\$ 43,906	\$ 14,635	\$ 1,147	\$ 527
BOTH WAH & QHP – General Questions/Education	50%	\$ 63,405	\$ 30,571	\$ 30,571	\$ 1,198	\$ 551
QHP - HIPTC	0%	\$ 97,521	\$ -	\$ -	\$ -	\$ -
WAH/Medicaid – Enrollment/Renewal/Update	75%	\$ -	\$ 151,123	\$ 50,374	\$ 3,947	\$ 1,815
WAH/Medicaid – General Question/Education	50%	\$ -	\$ 41,669	\$ 41,669	\$ 1,633	\$ 751
		\$ 221,634	\$ 267,269	\$ 137,250	\$ 7,925	\$ 3,644

Call Type (FY2026)	FFP %	QHP	Medicaid Federal Share	Medicaid State Share	CHIP Federal Share	CHIP State Share
BOTH WAH & QHP – Enrollment/Renewal/Update	75%	\$ 69,828	\$ 50,502	\$ 16,834	\$ 1,319	\$ 607
BOTH WAH & QHP – General Questions/Education	50%	\$ 72,930	\$ 35,163	\$ 35,163	\$ 1,378	\$ 634
QHP - HIPTC	0%	\$ 112,170	\$ -	\$ -	\$ -	\$ -
WAH/Medicaid – Enrollment/Renewal/Update	75%	\$ -	\$ 173,825	\$ 57,942	\$ 4,540	\$ 2,088
WAH/Medicaid – General Question/Education	50%	\$ -	\$ 47,929	\$ 47,929	\$ 1,878	\$ 864
		\$ 254,928	\$ 307,419	\$ 157,868	\$ 9,115	\$ 4,192

Call Type (FY2027)	FFP %	QHP	Medicaid Federal Share	Medicaid State Share	CHIP Federal Share	CHIP State Share
BOTH WAH & QHP – Enrollment/Renewal/Update	75%	\$ 77,718	\$ 56,208	\$ 18,736	\$ 1,468	\$ 675
BOTH WAH & QHP – General Questions/Education	50%	\$ 81,171	\$ 39,137	\$ 39,137	\$ 1,533	\$ 705
QHP - HIPTC	0%	\$ 124,845	\$ -	\$ -	\$ -	\$ -
WAH/Medicaid – Enrollment/Renewal/Update	75%	\$ -	\$ 193,466	\$ 64,489	\$ 5,054	\$ 2,324
WAH/Medicaid – General Question/Education	50%	\$ -	\$ 53,345	\$ 53,345	\$ 2,090	\$ 961
		\$ 283,734	\$ 342,156	\$ 175,707	\$ 10,145	\$ 4,666

Call Type	FY2024	FY2025	FY2026	FY2027
General Fund State Health Benefit	\$ 11,000.00	\$ 141,000.00	\$ 162,000.00	\$ 180,000.00
Exchange Account	\$ 18,000.00	\$ 222,000.00	\$ 255,000.00	\$ 284,000.00
General Fund Federal	\$ 22,000.00	\$ 275,000.00	\$ 317,000.00	\$ 352,000.00
Total Funds	\$ 51,000.00	\$ 638,000.00	\$ 734,000.00	\$ 816,000.00

Maintaining Resources for Monitoring and Reporting on Unwind Data, to inform Tailored and Efficient Outreach

- Continuing the staff resource responsible for monitoring churn data and generating actionable reports.
- Policy consulting services to further analyze market movement between Medicaid and Exchange for people churning off of Apple Health.
- Increased survey capability to help enrollment partners more effectively target available outreach resources.

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Operating Expenditures	FY 2024	FY 2025	FY 2026	FY 2027
Salaries	\$0	\$111,000	\$111,000	\$111,000
Benefits	\$0	\$37,000	\$37,000	\$37,000
Contracts	\$2,639,000	\$1,319,000	\$1,125,000	\$1,207,000
Goods and Services	\$0	\$26,000	\$23,000	\$23,000
Travel	\$0	\$1,000	\$1,000	\$1,000
Total Expenditures	\$2,639,000	\$1,494,000	\$1,297,000	\$1,379,000

Increased Direct-to-Consumer & Small Business Outreach

- Text Messaging
 - Utilizing Adobe Experience Manger, start up costs are estimated to be \$600 with monthly service fees of \$1,000. Current costs estimates indicate the price per message sent is \$0.007.

Text Messaging	FY2024	FY2025	FY2026	FY2027
Adobe Experiend Setup	\$ 600	\$ -	\$ -	\$ -
Annual Costs for Service	\$ -	\$ 2,000	\$ 12,000	\$ 12,000
Cost per Message	\$ 0.007	\$ 0.007	\$ 0.007	\$ 0.007
Campaigns per year	-	12	12	12
QHP Enrollment	-	230,000	230,000	230,000
Total Cost	\$ 600	\$ 21,320	\$ 31,320	\$ 31,320
Rounded	\$ 1,000	\$ 21,000	\$ 31,000	\$ 31,000

- \$250,000 in ongoing funding beginning FY 2025 is requested to support local, community-based outreach activities that proved successful during the initial Medicaid unwind, including: locally tailored outreach (in-person, and digital); community engagement; and enrollment event support.
- Small Business Support Tool
 - \$50,000 per year in ongoing funding beginning in FY2025 for a contracted Small Business Decision Support Tool to provide a needed resource to small business owners. These costs will support the customization, implementation, data load, testing, maintenance, and hosting fees necessary provide small businesses with this tool.

Workforce assumptions

- one data analyst to monitor churn data and generate reports to provide actionable information to outreach and enrollment partners (including assisters, carriers, state agency partners).

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Strategic and Performance Outcomes

Strategic framework

This request supports both the Governor’s Results Washington’s Core values of People Matter and Ideas Matter.

This request also supports Goal 4 (Healthy and safe communities) of the Governor’s Results Washington initiative as it strives to “foster the health of Washingtonians from a healthy start to safe and supported future.”

Performance outcomes

Performance outcomes include increased continuity of coverage for customers churning off Washington Apple Health.

Other supporting materials

None

Other Collateral Connections

Intergovernmental

None

Legal or administrative mandates

None

Changes from current law

None

State workforce impacts

None

State facilities impacts

None

Puget Sound recovery

None

Other supporting materials

None

Information technology (IT)

Information Technology

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Does this DP include funding for any IT-related costs, including hardware, software (including cloud-based services), contracts or IT staff?

No

Yes

Please download the [IT-addendum](#) and follow the directions on the bottom of the addendum to meet requirements for OCIO review. After completing the IT addendum, please upload the document to continue.