



# Washington Health Benefit Exchange

Joint Select Committee on Health Care Oversight

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# Today's Agenda

- Open Enrollment and Post Open Enrollment
- 2015 Budget
- Invoicing and Payment Related Issues



# Key Metrics

- Since Oct. 1, 2014, nearly 1.2 million people enrolled in health coverage through Washington Healthplanfinder with 660K new enrollees.
  - ✓ QHP new enrollments (paid once): over 164,000
  - ✓ New MAGI Medicaid: 326,447
  - ✓ Medicaid previously eligible but not enrolled: 171,451
  - ✓ Medicaid renewals: 516,539
- New MAGI Medicaid enrollment exceeded January target, for 2018.
- Call Center volume exceeded all forecasts
  - ✓ Increased staff from 140 to over 500
  - ✓ Increased calls handled from 1,500 day to about 8,000 day



# Enrollment Highlights

- **Washington Healthplanfinder attracted a wide variety of consumers:**
  - ✓ About 24% of QHP enrollments are not receiving any tax credits (over 400% FPL)
  - ✓ “Young Invincibles” (ages 18-34) accounted for 25% of enrollments, 29% in March. This number grows to more than 35% when including Medicaid
- **People recognize the brand, used consumer assistance**
  - ✓ 57% of state residents surveyed in April knew of Washington Healthplanfinder
  - ✓ 43% of new enrollments assisted by In-Person Assisters or agents/brokers
- **The Exchange has leveraged federal dollars to benefit residents and the state**
  - ✓ As of June, more than \$200 million in federal tax credits have gone to residents to reduce their premium costs
  - ✓ Residents have also received over \$30 million in federal cost-share reductions to reduce the cost of hospital and provider visits
- **The Exchange is already having a big impact**
  - ✓ Recent OIC report shows that the individual health insurance market has expanded by more than 30%, uninsured population reduced by more than 370,000.
  - ✓ Harborview Medical Center recently reported that uninsured patient dropped from 12% last year to two percent this spring. (Kaiser Health News, June 2014)



# What worked well

- ✓ Early start, structural set up, bipartisan support from elected officials, Board
- ✓ Managing scope, governance in a transparent manner
- ✓ Key stakeholder engagement
- ✓ Strong independent QA and IV&V
- ✓ Good vendor partnerships
- ✓ Strong marketing and outreach, engaged community partners
- ✓ Collaboration and coordination among key state agencies



# Key Learnings

- ✓ There has been a seismic shift to the healthcare landscape in our state
- ✓ New process generated new customer needs
- ✓ Testing the system: limited time, real world environment
- ✓ Understanding & projecting volume (call center, renewals, etc.)
- ✓ Remain nimble and execute changes as necessary



# Moving Forward

- Understanding what will be our normal operating conditions, and scope of work
- Continuing to address short and long-term needs, including:
  - ✓ Special enrollments and ongoing outreach
  - ✓ Immediate site fixes
  - ✓ Optimizing the customer experience
  - ✓ Future enhancements, e.g., Medicaid shopping
  - ✓ Washington Healthplanfinder Business (SHOP)
  - ✓ 2015 Open Enrollment (Nov. 15-Feb.15), and new plan options



# 2014-2015 Projected Enrollment

- New enrollment projections being completed to inform budget discussions
- Projections take into account:
  - First open enrollment results
  - Federal change to second open enrollment window
- New baseline assumption for start of second open enrollment (Nov. 2014): 148,000
- New baseline assumption for close of second open enrollment (March 2015): 233,000





# Budgeting for 2015

- Operation costs through 2014 are fully funded by Federal Grants
- The following funding sources are available to the Exchange during 2015:
  - ✓ Qualified Health and Dental Plans Insurance Carrier premium taxes (2%) collected from insurance products sold in the Exchange during 2015
  - ✓ QHP/QDP Issuer (carrier) assessments
  - ✓ Medicaid cost allocation formula for 2015 being developed with HCA
- Board discussing 2015 budget to inform development of a supplemental and biennial budget request to legislature



# 2015 Exchange Budget And Assumptions Baseline

Function Area	Baseline (Millions)	Key Financial Drivers	Key Assumptions
<b>IT</b>	\$19	Operations, maintenance; Licensing fees	IT contractors; changes, maintenance
<b>Operations</b>	\$21	Call center; printing & postage	250 CSR staffing level
<b>Communications</b>	\$4	Navigator program; advertising & marketing	Elimination of tv, radio, print ads
<b>Finance and Admin</b>	\$4	External audits	Credit card fees
<b>Policy, SHOP, Legal, Exec.</b>	\$5	Actuarial; Consumer rating system; Agent/Broker support; Presiding officers	Detailed estimates and analysis; maintain minimal service level; Appeal review and decision

- Baseline budget to start board conversation; details publically available
- Stakeholder meetings with advocacy organizations, agents & brokers, associations, businesses, carriers and tribal organizations
- Continuing meetings with legislative staff, governor’s office and state agencies



# Operational Requirements

## REQUIRED

Call Center  
Plan Certification  
Pediatric dental  
Translation/Interpreter Services  
Consumer Survey  
State Audit  
Data Reporting to Federal Government  
Reconciliation of enrollment information with carriers (834 files, ongoing, etc.)  
Streamlined application (QHP and Medicaid) & eligibility determination

Navigator Program  
Pediatric dental  
Printing for required notices  
SHOP  
Consumer Rating System  
Appeals

## NOT REQUIRED

Outreach and Marketing  
Specialized broker support  
Post-eligibility referrals to WaConn (classic Medicaid, etc.)  
Consumer decision/shopping tools (plan display features, etc.)  
Provider directory  
Adult dental  
Premium aggregation and invoicing



# 2015 Baseline Budget - Other Considerations

- Possible federal supplemental grant request
- No-cost extension for specific, grant related activities
- Medicaid cost allocation formula for 2015 being developed with HCA



# Invoice and Payment Related Issues

- Exchange's top priority
  - Additional Deloitte resources engaged
- Issues create a waterfall effect
  - Consumers: Invoices, Payments
  - Carriers: EDI files
  - Agents and brokers: Commissions
  - Providers: Coverage status
  - Customer Support and IPAs: Volume
- Major releases to address key areas of focus:
  - Changes to system design
  - Manual corrections to individual applications
- Validation revealed limited success



# Immediate Invoice and Payment Action Plan

- ✓ Collection of all carrier related issues
  - Ongoing meetings to capture any and all inconsistencies
- ✓ Deploy emergency system and data releases
  - Identify, measure and correct
- ✓ Account-by-Account Audit
  - Review all Healthplanfinder accounts for discrepancies
- ✓ Establish path for technical proficiency
  - Assess business rationale to inform long-term solution



# Resources

[www.wahealthplanfinder.org](http://www.wahealthplanfinder.org)

[www.wahbexchange.org](http://www.wahbexchange.org)

1-855-WAFINDER (1-855-923-4633)

TTY/TTD for Deaf : 1-855-627-9604

[info@wahbexchange.org](mailto:info@wahbexchange.org)



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