



**Washington Health Benefit Exchange
Policy Committee Meeting Minutes
February 9, 2016 11:30am – 1:30pm**

Policy Committee Members Present:

Phil Dyer, Chair

Don Conant, Member

Ben Danielson, Member

Sarah Kwiatkowski, Senior Health Policy Advisor, Office of the Insurance Commissioner (OIC),
ex-officio

Mary Wood, Eligibility and Service Delivery Section Manager, Health Care Authority (HCA), *ex-officio*

Policy Committee Members Absent:

Diane Zahn, Member

Washington Health Benefit Exchange:

Pam MacEwan, CEO

Beth Walter, Operations Director

Carole Holland, CFO

Molly Voris, Policy Director

Michael Marchand, Communications and
Outreach Director

Jenna Mannigan, Sr. Program Coordinator

Welcome and Introductions

Phil Dyer called the meeting to order and conducted introductions.

Approval of October Meeting Minutes

The Policy Committee approved the November 10, 2016 Meeting Minutes.

Guidance for Participation Discussion – Molly Voris, Policy Director

Molly Voris provided the Committee with an outline of the [requirements for the 2017 Exchange plans](#). She reviewed the plan certification timeline, mentioning that the Exchange Board will be certifying 2017 plans at the end of August or early September. Molly Voris reported that the Guidance for Participation lays out the carrier requirements in the Exchange and is updated on an annual basis to ensure carriers are meeting the requirements. She highlighted the 2017 program being added in 2017, the Quality Rating System and Quality Improvement Strategy, per the ACA.

She reported that updates will include changes in synch with the removal of premium aggregation, exploring options to discourage carriers exiting the Exchange after being

certified, and add additional clarifications on existing requirements (accreditation, sponsorship, and provider directory).

SHOP Discussion – Beth Walter, Operations Director; Molly Voris, Policy Director and Carole Holland, CFO

Molly Voris, Beth Walter and Carole Holland provided the Committee with an overview of the analysis that the Exchange conducted on the future state of [SHOP](#). Molly Voris covered the current SHOP landscape, including carrier participation, enrollment and national comparisons. Molly Voris reported that SHOP programs in most states average over 3,000 lives with three carriers participating. She highlighted the results from the SHOP employer experience focus groups. Beth Walter walked the Committee through the five options and reported on the factors that were included in the analysis for each option.

Carole Holland summarized the cost associated with each option. She reported that cost assumptions do not include indirect costs or other unknown costs. She provided a breakeven enrollment number for each option with a cost estimate.

Molly Voris shared the feedback from the Exchanges Advisory Committee, noting that they felt a short-term and longer term approach seems reasonable. Finally, Molly Voris proposed the staff recommendation to the Board will be to maintain the current SHOP program as is and reevaluate SHOP's performance in 2017. She shared this option minimizes risk and allows SHOP additional time for enrollment growth.

Customer Trends – Nelly Kinsella, Communications Manager

Nelly Kinsella presented the open enrollment (OE) [Customer Trends](#) to the Committee. She highlighted the top requests for OE included, QHP renewal, OE deadlines, and tax season questions. Nelly Kinsella reported on the Exchange corporate site trends, sharing that dental and 1095-A forms are the top two most searched items. Finally, she reviewed the various communications designed to address the recent trends.

Public Comment

There were no public comments.

Next Meeting and Adjourn

Phil Dyer adjourned the meeting at 11:15am.