

2027 Cascade Care Savings Policy Public Comment and Exchange Responses

Introduction

The Washington Health Benefit Exchange (Exchange) published the Draft 2027 Cascade Care Savings (CCS) Policy on February 9, 2026 and held a [public comment period from February 9 through March 6](#). The CCS policy is updated annually, through an extensive stakeholder engagement process that began in the Fall of 2025 for development of the 2027 CCS Policy. The Final 2027 Cascade Care Savings Policy has been published on April 1, 2026.

The Exchange received five formal public comment letters, representing feedback from eleven consumer advocate organizations and three qualified health plan (QHP) insurance carriers. Below we included a summary of key themes of public comment and the Exchange’s responses, followed by the public comments submitted in their entirety.

Summary of Feedback and Exchange Response

Key Themes of Stakeholder Feedback	Exchange Response
<p><i>I. Proposals Related to Bronze Coverage</i></p> <p><i>Policy proposal: Extend CCS eligibility for enrollment in Bronze Cascade Care plans to customers not receiving federal subsidies.</i></p> <ul style="list-style-type: none"> The Exchange received mixed support for expanding CCS eligibility to non-federally subsidized customers who enroll in Bronze Cascade Care plans. One commenter stated that this policy might support healthier enrollment and contribute positively to the risk pool, and was interested in seeing data supporting the positive impact on overall risk that this policy could have. Four commenters expressed concern over the high –cost-sharing and deductibles in Bronze plans, stating that Bronze enrollment can result in delayed or foregone care due to unaffordable out-of-pocket costs and increased customer confusion. Commenters stated that Bronze enrollment raises equity concerns and is more likely to lead customers to experience financial instability, health disparities, and barriers to care. One commenter recommended that, if this policy was pursued, the Exchange should implement guardrails such as extending CCS to customers in Bronze plans only if they are enroll in a Cascade 	<p><i>I. Proposals Related to Bronze Coverage</i></p> <p><i>Exchange Responses to Policy and Equity Feedback</i></p> <p>In an environment where federal changes are stripping access to federal subsidies from 25,000+ Exchange customers, the Exchange focused on effective interventions to keep people from becoming uninsured. One strategy to keep Washingtonians covered is to support enrollment for our most vulnerable, low income customers in Bronze plans.</p> <p>The Exchange agrees that extending CCS eligibility to enrollment in Cascade Bronze plans for the limited population of non-federally subsidized customers is likely to result in keeping more people covered, a healthier enrollment and a positive impact to the risk pool. The extension of CCS to this limited population in Bronze plans will allow some of the expected ~15,000 Exchange customers who will lose access to federal subsidies to stay covered. Exchange actuaries project that extending CCS eligibility to this population to enroll in a Cascade Care Bronze plan would result in the number of non-federally subsidized customers with CCS to double. From ~5,600 customers if the policy is not in place to upwards of ~12,500 in 2027 (which is about 5% of the total Exchange population)¹. Data indicates that the Exchange population under 250% FPL and ineligible for federal subsidies tends to be</p>

¹ Actuarial modeling uses pre-2026 Open Enrollment data and estimated PY 2027 per member per month CCS amounts.

Care (standard) Bronze plan, building warnings into consumer choice architecture regarding out-of-pocket exposure in Bronze plans, and prioritizing enrollment into higher-value plans in the cross-mapping methodology for 2027.

- Two commenters questioned the authority of the Exchange to extend CCS to non-federally subsidized customers enrolling in Bronze Cascade Care plans.

Policy proposal: Reserve CCS eligibility for customers who enroll in plans offered by carriers that offer a Cascade Care Bronze plan in all counties within their service area

- Two commenters expressed uncertainty about this policy proposal, stating that it might be too soon to pursue such a proposal, it might not be needed if other levers are effective at ensuring state-wide access to all metal levels for 2027, and it could have unintended consequences, such as higher premiums across metal levels.
- Two commenters raised concerns that the proposed policy reduces carriers' flexibility in offering plans across metal levels and cautioned that the policy could have unintended consequences on competition and access.
- Two commenters expressed that the Exchange was exceeding its authority by conditioning premium assistance eligibility for customers on issuer choices regarding the offering of Bronze plans.

General Bronze plan feedback

- Two commenters raised concern over pricing distortions affecting Bronze plans in the context of the current CSR load approach utilized in Washington. They stated that various factors may be compelling carriers to price Bronze plans below actuarially sustainable levels and these plans are underpriced relative to underlying costs. Therefore, policies that incentivize enrollment into Bronze plans threaten market stability.
- One commenter expressed that a requirement to offer bronze would be a barrier to entry for new carriers because network development, pricing stability, and administrative readiness varies by county, and could deter innovative and

younger than federally subsidized customers and have a slight positive impact on the overall risk pool.

The Exchange agrees with commenters' concerns about high cost-sharing in Bronze plans and the value of coverage when premiums are lower but coverage for many services is only available after meeting a high deductible and at a high cost-share. We must balance this concern with the fact that these customers are facing the harmful impact of federal policy changes resulting in loss of all federal tax credits, coupled with state subsidy budget that does not keep pace with costs. The harmful customer impacts cited by commenters such as delayed and foregone care, financial instability, health disparities, and barriers to care are all more likely for customers who are uninsured than for customers who have access to ACA compliant, comprehensive Exchange coverage.

In 2027, Bronze Cascade Care plans offer meaningful pre-deductible coverage including four primary care and mental health visits for \$1 before the regular, pre-deductible co-pay applies and access to urgent care, specialist visits, and generic drugs at a co-pay before the deductible.

While Bronze plans do have limitations, coverage in a Cascade Care Bronze plan is better than being uninsured for many customers, providing them meaningful first-dollar coverage for common, high-value services as well as protection against catastrophic out-of-pocket costs in the case of a medical emergency or event such as a cancer diagnosis.

The Exchange appreciates commenters' suggestion to implement guardrails to help protect customers for some of the most concerning potential impacts of enrollment in Bronze plans, and commits to pursuing each of the suggested guardrails for PY 2027 coverage.

The Exchange appreciates commenter concerns that the policy to reserve CCS eligibility for customers who enroll in plans offered by carriers that offer a Cascade Care Bronze plan across their service area will limit carrier flexibility regarding business strategy for metal level offerings, if they decide to offer plans that their enrollees would be eligible for CCS. The Exchange's goal is to ensure coverage options across the metal level spectrum in all counties in our marketplace. This is especially important in the context of our most vulnerable customers,

value-focused carriers from participating in the Exchange.

- One commenter expressed concern that requiring Bronze Cascade Care plans in all counties within a carrier's service area could materially increase actuarial and operational exposure, increasing market volatility.

including those who are losing access to federal tax credits and Medicaid and may need a Bronze option in order to remain insured. It is also an equity priority for the Exchange to ensure that there are Bronze plans available in all counties for our American Indian/Alaska Native customers who receive enhanced cost sharing reduction. We appreciate the state's public fund investment and are committed to targeting the state subsidy to be a bridge to coverage for vulnerable customers at risk of going uninsured.

Exchange Responses to Authority Feedback

The Exchange appreciates the opportunity to clarify its authority to set eligibility criteria.

There are several enumerated CCS eligibility criteria and "any other eligibility criteria established by the exchange". RCW 43.71.110(4)

In considering eligibility criteria for PY 2027, we worked together with the CCS workgroup and Board to address destabilizing federal policies and shrinking state investment. This includes criteria that work together to preserve coverage options for our most vulnerable customers and maximize limited state resources. We winnowed proposed criteria and have targeted the eligibility criteria relating to Bronze plans to meet these objectives as explained in the policy and equity response.

In particular, the Exchange built upon previous CCS eligibility for Bronze Plans to certain limited groups under this statutory provision in the past (e.g., American Indians and Alaska Natives have been eligible for CCS if enrolled in Bronze or non-Cascade Care plans) and has also limited CCS eligibility for certain groups under this provision (e.g., individuals with an offer of other affordable minimum essential coverage are not eligible for CCS). It is also under this authority to develop any other eligibility criteria that the Exchange limits eligibility for CCS to customers that enroll in a plan of a carrier that offers Cascade Care Bronze plans across its Exchange service area.

The Exchange is the steward of the state's investment in premium assistance and was granted the authority by the Legislature to establish "any other eligibility criteria". Each year the Exchange analyzes the state subsidy amount, carrier service area shifts, premium increases, federal regulatory changes, and other market factors that make it increasingly difficult

for customers to stay covered, and we tailor the CCS policy to direct our limited state investment most effectively to support our customers who need it the most to stay covered.

Exchange Responses to Market Stability and Actuarial Feedback

The Exchange acknowledges commenter concern regarding the financial sustainability of the Bronze product offerings and based on that concern, carriers could opt over time to pull back from service areas, narrow provider networks, or exit markets altogether.

The Exchange appreciates the opportunity to clarify that the CCS policy does not impose a requirement on carriers to offer Bronze plans. Carriers will need to consider whether their business strategy includes attracting individuals who are eligible and intend to use their CCS subsidy. The policy does not limit carriers' ability to offer plans according to their determinations of financial and actuarial sustainability. Actuarial soundness of plans is evaluated by the OIC and this policy does not intend to interfere with that assessment.

The Exchange appreciates that ongoing carrier solvency is critical to a stable market. We note that in Washington, ten of twelve carriers offer Bronze plans in all counties where they offer Silver or Gold. And, as the market has begun to shift, carriers have expressed concern that without market assurance that all carriers offer Bronze and thus the Bronze market risk is spread among all carriers, they may be forced to withdraw their offering. In addition, in other state marketplaces where many WA carriers participate, all three metal levels are required. While we understand that the decision to offer Bronze plans includes a different value calculation for each carrier depending on several factors including claims experience, risk of a carrier's Exchange population and the carrier's pricing strategy, the Exchange encourages carriers to view their profitability at the individual market level, as envisioned and supported by the ACA, rather than at a specific plan, metal level or geographic area.

The Exchange is committed to fostering a stable, healthy individual market where customers have choices of carriers and coverage levels that meet their needs in every county. This means supporting an environment where carriers can operate with an expectation of market fairness

	<p>and healthy competition and policy incentives support a level playing field and healthy competition across carriers' full Exchange lines of business.</p> <p>The Exchange also considers this part of the policy within the context that CCS increases market stability and carrier enrollment by increasing the amount of financial assistance that is available to customers and paid to carriers on their behalf.</p>
<p><i>II. Maximizing Federal Subsidies to Optimize State Subsidy Investment</i></p> <p><i>Policy proposal: Reserve CCS eligibility for customers who enroll in plans of carriers whose lowest-cost Silver plan is a Cascade Care plan</i></p> <ul style="list-style-type: none"> • The Exchange received support for this policy proposal from most commenters. • Two commenters supported the policy as a smart approach that would maximize the availability of federal advance premium tax credits (APTC) in the marketplace. • One commenter expressed support for this policy focusing on standardized silver participation because it aligns with program objectives while preserving carrier flexibility and market stability. • One commenter expressed that explicit statutory authority is needed for the Exchange to condition premium assistance eligibility on issuer level requirements. 	<p><i>II. Maximizing Federal Subsidies to Optimize State Subsidy Investment</i></p> <p>We agree with commenters that this policy maximizes federal subsidy support and, in doing so, lowers the remaining premiums so that the state's finite investment in CCS stretches further and can benefit more customers.</p> <p>The Exchange appreciates the opportunity to clarify that this criteria limits an otherwise eligible CCS customer to certain plans, it does not create a carrier requirement. Carriers choosing to offer silver plans that are lower cost than their Cascade Care Silver will continue to be certified on the Exchange.</p> <p>The Exchange appreciates the opportunity to clarify its authority to adopt this CCS eligibility criteria. In addition to the enumerated (more specific) criteria, the Legislature provided the Exchange with broad authority to adopt "<i>any other eligibility criteria</i>" in RCW 43.71.110(4)(a)(vii). This authority allows the Exchange to tailor new criteria to meet CCS goals and customer needs.</p>
<p><i>III. Allocating State Subsidy with More Precision Based on Income and Federal Subsidy Status</i></p> <p><i>Policy proposal: Create three fixed maximum per member per month (PMPM) subsidy amounts – one PMPM amount for federally subsidized customers up to 200% FPL, one PMPM amount for federally subsidized customers above 200% FPL, and one PMPM amount for non-federally subsidized customers</i></p> <ul style="list-style-type: none"> • Two commenters were supportive of this policy, which they characterized as a less regressive approach than the current CCS structure of two fixed maximum PMPM amounts. They are interested in the Exchange pursuing an even more 	<p><i>III. Allocating State Subsidy with More Precision Based on Income and Federal Subsidy Status</i></p> <p>The Exchange appreciates the strong support for further defining maximum monthly subsidy amounts based on income and federal subsidy status.</p> <p>We agree with commenters that this subsidy structure allows the Exchange to target greater premium subsidy support to customers who are most at risk of dropping coverage: those with lowest-income and non-federally subsidized customers.</p>

granular approach, recommending as close to a sliding scale by FPL model (similar to APTC eligibility calculation) as possible.

- One commenter was supportive of the differentiated subsidy structure, stating that it enhances affordability for the lowest income consumers and those without federal subsidies.

Public comments received by submitter

Northwest Health Law Advocates

Dear Washington HBE colleagues:

Please find attached the joint feedback from 11 organizations regarding the PY 2027 Draft Cascade Care Savings (CCS) policy with the goal of improving equity and access for all Washingtonians.

In the letter, we go into detail regarding the following:

1. We support Silver Plan Pricing to make CCS available for plans of carriers whose lowest-premium Silver plan is a standard plan. This is a smart policy that would maximize the availability of federal advance premium tax credits in the marketplace.
2. We have concerns about making CCS applicable to Bronze Cascade Care Plans.
3. We are uncertain about the proposal to require Bronze plans to be available in a carrier's entire service area.
4. We are supportive of a less regressive CCS approach – ideally as granularly as possible. However, we prefer to split at 100% or 138% FPL for Washingtonians denied access to federal subsidies.

We encourage HBE to use an equity framework to determine how to best allocate limited funds. Based on the information available to date and the many unknowns such as what the Legislature will decide for CCS funding, we request the opportunity to update this correspondence when we all know more.

Please be in touch if you have questions,

Lee Che

6 March 2026

Washington Health Benefit Exchange
via cascadecare@wahbexchange.org

RE: 11 Organization Feedback on *draft* 2025 Cascade Care Savings Methodology

Dear Washington HBE colleagues:

The undersigned 11 organizations write to share the following recommendations regarding the PY 2027 Draft Cascade Care Savings (CCS) policy with the goal of improving equity and access for all Washingtonians. **We urge you to implement strategies that advance the Health Benefit Exchange (HBE) goal that “all Washingtonians have full and equal access to opportunities, power and resources to achieve their full potential.”**

1. **We support Silver Plan Pricing** to make CCS available for plans of carriers whose lowest-premium Silver plan is a standard plan. This is a smart policy that would maximize the availability of federal advance premium tax credits in the marketplace.
2. **We have concerns about making CCS applicable to Bronze Cascade Care Plans.** Without explicit guardrails, we fear that people may expect more meaningful access than Bronze plans provide. While we understand the intention, this is a departure from the Health Benefit Exchange’s historical wariness of bronze plans, given high consumer cost-sharing that can include 40% cost-shares. We are concerned that without guardrails & education, opening bronze may cause further confusion and affordability challenges, particularly for customers ineligible for federal premium tax credits, who may be more likely to have language barriers or face additional insurance literacy barriers if newly arrived. It is difficult to gauge the need for this proposal without final information about Cascade Care Savings funding levels. At minimum, we would request that HBE accompany any shift with the following implementation guardrails:
 - a) CCS should only be available for standard plans, as proposed;
 - b) Bronze plans should only be available through a shopping choice architecture that includes clear labels and warnings that identify high out-of-pocket cost-sharing;
 - c) The Exchange should default plan-map to a more comprehensive plan choice, such as vital gold, and make it clear that both silver is not the right choice for this group due to silver-loading and bronze includes 40% cost-sharing.
3. **We are uncertain about the proposal to require Bronze plans to be available in a carrier’s entire service area.** Given that the legislative session is ongoing and there are ongoing discussions with OIC about plan shortage areas, it seems premature to move to this requirement with incomplete information. We question if this shift will achieve the intended goals or if unintended consequences may create harms, such as higher prices overall across the rating region.
4. **We are supportive of a less regressive CCS approach – ideally as granularly as possible. However, we prefer to split at 100% or 138% FPL for Washingtonians denied access to federal subsidies.** As advocates have urged for years, we are deeply concerned that the fixed dollar structure of premium assistance is does not provide equitable

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access to coverage for groups ineligible for federal tax credits. HBE's CCS fixed maximum approach means that there is no corresponding increase with rising premiums, unlike federal subsidies which vary on a sliding scale based on income. The limitations of this approach grew more apparent this January when H.R. 1 stripped access to federal subsidies from over 10,000 low-income Washingtonians whose income is below 100% FPL. These individuals saw their premiums jump from an average of \$27 to \$437. This is prohibitive for an individual making \$16,000 annually with housing, food, and transportation costs. By contrast, those with income between 100% to 200% FPL faced an average net premium of \$80 while those 201-250% FPL had an average \$93 net premium; these Washingtonians largely qualify for federal tax credits. Those with incomes 301-400% FPL had an average net premium of \$238. That is far from equitable.

If it is not possible to provide a split among Washingtonians denied access to federal subsidies, we would appreciate the opportunity to understand what barriers exist. We would ask HBE to share their modeling before offering a final opinion.

We encourage HBE to use an equity framework to determine how to best allocate limited funds. Based on the information available to date and the many unknowns such as what the Legislature will decide for CCS funding, we request the opportunity to update this correspondence when we all know more.

Thank you for considering our recommendations. We appreciate your collaboration as we work together to ensure equitable and affordable access to high-quality and high value plans in Washington State.

Sincerely,

American Civil Liberties Union of Washington

Asian Counseling and Referral Service

Community Health Plan of Washington / Community Health Network of Washington

HealthierHere

Joyce L. Sobel Family Resource Center

King County Promotores Network (KCPN)

Northwest Health Law Advocates (NoHLA)

Northwest Immigrant Rights Project

Pacific Islander Health Board of Washington

Washington Healthcare Access Alliance

Washington State Budget and Policy Center

Coordinated Care

Thank you for the opportunity to comment on the Draft 2027 Cascade Care Savings Policy. As Washington's only statewide Exchange carrier and a Cascade Select participant in 23 counties, Coordinated Care is committed to advancing access, affordability, and equity for consumers across the state. However, several provisions in the draft policy raise concerns regarding statutory authority under RCW 43.71.110, as well as significant risks to consumers, equity, and market stability.

RCW 43.71.110 authorizes the Exchange to establish procedural requirements and individual eligibility criteria for state premium assistance, subject to legislative appropriations and enrollment in Silver or Gold standard plans, or alternate eligibility criteria expressly established in the Operating Budget. The statute does not authorize conditioning individual eligibility on issuer participation decisions, pricing strategies, or geographic footprint.

Sections 4(2)(e) and 4(2)(f) exceed this authority by conditioning premium assistance eligibility on issuer-level requirements, including statewide Bronze availability and Silver pricing structure. These provisions effectively deny otherwise eligible individuals access to state assistance based on carrier business decisions rather than individual eligibility criteria. RCW 43.71.110 does not authorize the Exchange to use individual subsidy eligibility to influence issuer pricing behavior or to condition eligibility on a carrier's service area.

In addition, Section 4(2)(c) expands eligibility to Bronze Cascade Care plans for non-federally subsidized individuals without citing explicit authorization in the Operating Budget, as required under RCW 43.71.110(4). Absent such authorization, this expansion appears inconsistent with the statute's limits on eligible plan types.

Section 9 further establishes a recurring Special Enrollment Period that functionally steers consumers toward specific metal levels. While such an approach may be permissible under federal regulation, it is not expressly authorized under RCW 43.71.110 and raises heightened concerns when combined with existing pricing distortions driven by CSR loading.

Beyond these legal concerns, the draft policy's incentive structure—particularly its emphasis on Bronze enrollment—poses substantial risks to consumers and equity. The current Cascade Care Savings design, combined with CSR loading under the Office of the Insurance Commissioner's emergency regulation, creates an artificially large premium differential between Silver and Bronze plans. To meet requirements that premiums be reasonable and not excessive, carriers are compelled to disproportionately load costs onto Silver plans while pricing Bronze plans below actuarially sustainable levels.

This distortion risks steering cost-sensitive individuals, particularly those without federal subsidies, into Bronze plans that appear affordable based on premium alone but expose enrollees to significantly higher deductibles and cost sharing. For lower-income individuals, people with chronic conditions, and those with higher anticipated health care needs, Bronze enrollment can result in delayed or foregone care due to unaffordable out-of-pocket costs—directly undermining Cascade Care's goals of affordability and access.

These effects raise serious equity concerns. Consumers most likely to be incentivized into Bronze plans are also more likely to experience financial instability, health disparities, and barriers to care. Policies that prioritize lower premiums without adequate consideration of total cost of care risk shifting financial risk onto populations least able to absorb it.

Finally, because Bronze plans are effectively underpriced relative to underlying costs, sustained incentives to increase enrollment in these loss-leading products threaten market stability. Over time, carriers may respond by reducing plan availability, narrowing provider networks, pulling back

geographically, or exiting markets altogether—outcomes that would reduce consumer choice, disrupt continuity of coverage, and disproportionately harm rural and medically vulnerable communities.

For these reasons, we respectfully recommend that the Exchange revise the Draft Policy to:

- Align eligibility criteria strictly with the authority granted under RCW 43.71.110;
- Remove issuer-level participation and pricing conditions from individual eligibility determinations;
- Clearly cite Operating Budget authorization for any expansion beyond Silver and Gold standard plans; and
- Reevaluate SEP and Bronze incentives to ensure they do not exacerbate inequities or destabilize the individual market.

Thank you for your consideration.

Susanne Towill
Sr. Director, Operations

Molina

Thank you for the opportunity to review the draft PY27 Cascade Care Savings policies. We appreciate the thoughtful work WAHBE continues to put into improving affordability and strengthening choice for Washington consumers, and we value the collaborative relationship we've built.

After reviewing the proposed updates, we wanted to share Molina Healthcare of Washington's perspective. Our feedback focuses on how the policies may affect consumer affordability, carrier flexibility, and overall market stability. We are supportive of several elements, and we also want to highlight where additional clarity would help us more fully assess the impacts.

Regarding the proposed CCS eligibility changes, we have concerns about requiring carriers to offer Bronze in all counties within its service area in order to participate. Flexibility in plan and metal-level offerings is important, especially during a period of regulatory uncertainty, and we want to avoid scenarios where carriers may feel compelled to withdraw plans or make service area reductions, reducing consumer options and choice for Silver and Gold CCS-eligible plans.

We see potential value in allowing CCS to be used toward Bronze plans for consumers who are not APTC-eligible, as it may support healthier enrollment and contribute positively to the risk pool. To fully evaluate this change, we would welcome additional information on the population newly eligible in each rating region and any expected metal-mix effects.

On premium assistance amounts, we support the differentiated subsidy structure, which enhances affordability for the lowest-income consumers and those without federal subsidies. We also encourage earlier finalization of CCS amounts for PY27, prior to rate filing deadlines, as timely information is essential for modeling, pricing, and accurately projecting enrollment.

We hope this feedback is helpful as WAHBE continues refining the policy. We appreciate the opportunity to offer input and would be happy to discuss any item further or provide additional analysis as needed. Thank you again for your ongoing partnership.

Thank you,
Melissa

Washington State Health Benefit Exchange
810 Jefferson St. SE
Olympia, WA 98507

March 6, 2026

Dear Washington Health Benefit Exchange,

On behalf of Wellpoint Washington, we appreciate the Exchange's continued efforts to strengthen affordability and promote access through Cascade Care Savings Program. We share the Exchange's commitment to improving coverage options for Washington consumers and maintaining a stable, competitive marketplace. We are writing to provide feedback on the Washington Health Benefit Exchange's Cascade Care Savings PY 2027 proposal.

Specifically, we have concerns regarding the proposed eligibility requirement that conditions access to Cascade Care savings on a carrier offering Cascade Care Bronze plans in all counties within its service area. While we understand the policy objective of broadening access to standardized offerings, we believe this specific requirement may have unintended consequences that undermine affordability, competition, and geographic access.

1. Increased Financial and Operational Risk

Requiring Bronze Cascade Care plans in all counties within a carrier's service area materially increases actuarial and operational exposure, particularly in rural or low-enrollment markets. Bronze plans often carry greater volatility due to high deductibles and utilization uncertainty. Expanding mandatory participation across all counties may require carriers to assume disproportionate risk in markets that are operationally challenging or financially unstable.

These risks may ultimately be reflected in higher premiums across metal levels, including Silver and Gold plans that serve as benchmarks for affordability.

The current Cascade Care Savings (CCS) structure, when layered with CSR loading requirements under the Office of the Insurance Commissioner's emergency regulation, creates a distorted premium relationship between Silver and Bronze plans. This interaction artificially widens the premium differential between metal tiers. To satisfy statutory standards requiring premiums to be reasonable and not excessive, carriers are effectively required to concentrate cost load onto Silver plans while pricing Bronze plans at levels that may not be actuarially sustainable over time.

2. Risk of Unintended Consumer Impact

This pricing distortion risks steering cost-sensitive individuals, particularly those ineligible for federal subsidies, to Bronze plans that appear attractive based solely on premium. However, these plans carry substantially higher deductibles and cost-sharing obligations. For lower-income individuals, those managing chronic conditions, or members with anticipated health care needs, enrollment in Bronze coverage can lead to significant out-of-pocket exposure, increasing the likelihood of delayed or foregone care due to affordability barriers.

[wellpoint.com](https://www.wellpoint.com)

If carriers respond by narrowing service areas or increasing premiums to offset expanded risk, consumers—particularly those in rural communities—may experience fewer choices or higher costs. These outcomes would be inconsistent with the Exchange’s goals of improving access and affordability statewide.

3. Barriers to Market Entry and Potential Reduction in Carrier Participation and Competition

For newer or smaller carriers, the requirement to offer Bronze Cascade Care plans in every county within their service area raises the barrier to entry. Network development, pricing stability, and administrative readiness may vary by county. A uniform Bronze mandate may inadvertently deter innovative or value-focused carriers from participating in the Exchange.

The Bronze mandate may discourage carriers from participating in Cascade Care altogether. This could reduce plan choice and competition for consumers, particularly in already fragile markets.

Lastly, within RCW 43.71.110, the statute specifies that individuals are eligible for premium assistance and cost-sharing reductions if the individual:

(4)(iii) is enrolled in a silver or gold standard plan offered in the enrollee’s county of residence.

Because of the “and” prior to section (4)(vii), our interpretation is that the RCW would need to be updated either through additional legislation or through budget language, allowing CCS to be used by individuals purchasing bronze plans.

We respectfully recommend reconsideration of the Bronze participation requirement as a condition of Cascade Care savings eligibility. We believe a more targeted approach focused on standardized Silver participation, tobacco rating compliance, and consumer affordability metrics would better align with the program’s core objectives while preserving carrier flexibility and market stability.

We value our partnership with the Exchange and welcome the opportunity to further discuss these concerns and explore policy approaches that advance shared goals without introducing unintended market disruption.

Thank you for your consideration.

Wellpoint Washington

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