



Draft 2024 Standard Plan Designs

Proposed plan designs for 2024 Cascade and Cascade Select plans

*Instructions for submitting public comment
(October 20-November 21, 2022)*



Standard Plan Design Background

Standard Plan Guiding Principles

- Lower deductibles and access to services before the deductible.
- Prioritize copays where possible to provide predictability for consumers when seeking services.
- Limit premium impacts.
- Maximize tax credits with silver plan design.

WAHBE Standard Plan program

- Have designed three years of standard plans thus far.
 - Essential, high value services at co-pay before deductible in all metal levels (primary care, mental/behavioral health, urgent care, generic Rx)
 - Minimal changes to plan design from 2021-2023
- Have been meeting with stakeholders on the design of 2024 standard plans for several months.
- Opportunity to look at standard plan design with longer-term goals in mind.

Standard Plan Design Direction

1. Move toward value-based insurance design to advance affordability, value, quality and equity.
 - Ensure Exchange customers have access to the highest quality plans that advance affordable, high-value, equitable care delivery.
 - Build upon nationally recognized models, while using data to inform initial and highest-impact areas of focus for Washington Exchange.
2. Set the path for value-based benefit design in 2024 plan design.
 - Considerations for 2024 standard plans: Applying access models such as virtual care and more effective options for pre-deductible services.
3. Preserve premium affordability.

2024 Standard Plan Design

Goals for investigating options for 2024 plan designs:

- Reduce barriers to accessing high-value services.
- Encourage the right care, at the right time, in the right setting.
- Mitigate premium impacts.

Considerations for 2024 standard plans included **virtual care** and improved coverage of **pre-deductible services**.

- Current standard plans do not explicitly address virtual care
 - Customers in standard plans experience varying access to virtual care depending on their carrier and providers
 - Expectation has generally been that customers would pay the same cost-share for a service, whether received virtually or in person
- Current standard plans do not offer any non-preventive services *at no cost* prior to the deductible
 - All metal level include primary care, mental/behavioral health office visits, urgent care, and generic drugs at a co-pay, before deductible
 - Copays for primary care/mental health visits range from \$15 (gold plan) to \$50 (bronze plan); generics range from \$10 (gold) to \$32 (bronze)

2024 Standard Plan Design Options

Considerations for virtual care

- Exchange explored two options:
 - (1) Ensuring that a core set of high-value services are available in a virtual setting at the same cost-share as in-person in standard plans, regardless of carrier
 - E.g., all standard plans customers have access to virtual care for primary care or mental/behavioral health visits
 - (2) Providing reduced cost-sharing for virtual visits for high-value, telehealth-appropriate visits
- Stakeholder feedback suggests that implementing requirements on the delivery of virtual care in the standard plan designs is not feasible at this time.
 - As provision of virtual care is primarily provider-driven, little can be done in plan design at this time to ensure that customers all have access to virtual services in a uniform way
 - Network implications of lower cost-sharing for virtual visits; medical appropriateness of virtual care varies/difficult to incentivize best setting for care using tiered cost-sharing plan design structure

Approach for 2024: No changes to standard plan design. Continue to pursue information gathering from state sources (e.g., APCDs), carriers, and other stakeholders to develop potential standards for future plan years.

2024 Standard Plan Design Options

Considerations for expanding pre-deductible services

- Exchange considered options that include:
 - Different models for pre-deductible services, e.g.:
 - “Pick 4” model – 4 total visits from a group of categories (e.g., primary care, behavioral health, urgent care, specialist) at low co-pay, then deductible applies
 - Three upfront no-cost office visits for primary care and behavioral health, followed by co-pay
 - Lowering generic prescription drug copays.
- Focused actuarial value (AV) trade-off in plan designs on out-of-pocket maximums.
- Stakeholder feedback encourages more discussion about who we’re designing these plans for. Ongoing considerations include:
 - Value of reducing barriers to accessing high-value primary care and mental/behavioral health services at different metal levels.
 - Understanding and balancing AV limitations/premium impacts.
 - Incorporation of offsets that consider low-value services.

Approach for 2024: Provide options for 2024 standard plans that improve access to high-value services while maintaining stability of copays and overall AV levels/premiums.

Seeking Comment - Draft 2024 Standard Plan Charts

The Exchange is seeking public comment on two options at each metal level outlined in the plan charts on the following pages:

Option 1: Keeps plan design at each metal level as similar as possible to 2023 plans, with adjustments only as necessary to keep the plan within the actuarial value (AV) range for the metal level.

Option 2: At each metal level, incorporates 3 upfront, \$0 co-pay primary care and mental/behavioral health office visits. Subsequent primary care and mental/behavioral health office visits are subject to a co-pay.

Feedback requested:

- Which option do you prefer for each metal level, and why?
- Do you think that one set of options better accomplishes Exchange goals of reducing barriers to accessing high-value services and encouraging the right care, at the right time, in the right setting?
- Please provide any feedback you have on potential premium impacts of the proposed options.
- All other feedback is welcome.

Bronze Plan Options

- 2023 Plan Design/2024 Option 1 is the 2023 plan design displaying the 2023 certified actuarial value (AV) and the estimated 2024 AV.
- 2024 Option 2 is the 2023 plan design with changes to add three \$0 cost-share primary care visits and three \$0 cost-share behavioral health visits with the estimated 2024 AV. To offset the AV increase for \$0 cost-share visits, the MOOP has been increased.

Shaded Items not subject to deductible.

* 2023 Federal AV (certified)

** Per day copay

*** Eligible for \$0 upfront visits

**** Per day copay, maximum five per stay

Red font indicates difference from corresponding 2023 design.

Benefits	Bronze	
	2023 Plan Design / 2024 Option 1	2024 Option 2
Medical/Pharmacy Integrated Deductible	Yes	Yes
Medical/Pharmacy or Integrated Deductible (\$)	\$6,000	\$6,000
Medical/Pharmacy Integrated MOOP	Yes	Yes
Medical/Pharmacy Integrated MOOP (\$)	\$8,550	\$9,400
Preventive Care/Screening/Immunization	\$0	\$0
No. of No-Cost Upfront Visits	0	3
Primary Care Visit	\$50	\$50***
Specialist Visit	\$100	\$100
M/B Health and SUD Outpatient Services – Office	\$50	\$50***
Emergency Care Services	40%	40%
Urgent Care	\$100	\$100
Ambulance	40%	40%
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	40%	40%
Outpatient Surgery Physician/Surgical Services	40%	40%
M/B Health and SUD Outpatient Services – Other	40%	40%
Laboratory Outpatient and Professional Services	40%	40%
X-rays and Diagnostic Imaging	40%	40%
Advanced Imaging (CT/PET Scans, MRIs)	40%	40%
All Inpatient Hospital Services (inc. MH/SUD, Maternity)	40%	40%
Skilled Nursing Facility	40%	40%
Generics	\$32	\$32
Preferred Brand Drugs	40%	40%
Non-Preferred Brand Drugs	40%	40%
Specialty Drugs (i.e., high-cost)	40%	40%
Speech Therapy	40%	40%
Occupational and Physical Therapy	40%	40%
Durable Medical Equipment	40%	40%
Home Health	\$50**	\$50**
Hospice	\$50**	\$50**
All Other Benefits	40%	40%
Estimated 2024 AV	64.21%*/64.66%	64.62%

Silver Plan Options

- 2023 Plan Design is the 2023 plan design displaying the 2023 certified AV and the estimated 2024 AV. This plan design is anticipated to be out of the federal silver plan AV range in 2024 and is included for illustrative purposes.
- 2024 Option 1 is the 2023 plan design with the out-of-pocket-maximum (MOOP) adjusted up so that the estimated 2024 AV is within federal statutory limits.
- 2024 Option 2 is the 2023 plan design with changes to add three \$0 cost-share primary care visits and three \$0 cost-share behavioral health visits with the estimated 2024 AV. To offset the AV increase for \$0 cost-share visits, the MOOP has been increased.

Shaded Items not subject to deductible.

* 2023 Federal AV (certified)

** Per day copay

*** Eligible for \$0 upfront visits

**** Per day copay, maximum five per stay

Red font indicates difference from corresponding 2023 design

Benefits	Silver		
	2023 Plan Design	2024 Option 1	2024 Option 2
Medical/Pharmacy Integrated Deductible	Yes	Yes	Yes
Medical/Pharmacy or Integrated Deductible (\$)	\$2,500	\$2,500	\$2,500
Medical/Pharmacy Integrated MOOP	Yes	Yes	Yes
Medical/Pharmacy Integrated MOOP (\$)	\$8,500	\$8,600	\$9,400
Preventive Care/Screening/Immunization	\$0	\$0	\$0
No. of No-Cost Upfront Visits	0	0	3
Primary Care Visit	\$30	\$30	\$30***
Specialist Visit	\$65	\$65	\$65
M/B Health and SUD Outpatient Services – Office	\$30	\$30	\$30***
Emergency Care Services	\$800	\$800	\$800
Urgent Care	\$65	\$65	\$65
Ambulance	\$375	\$375	\$375
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	\$600	\$600	\$600
Outpatient Surgery Physician/Surgical Services	\$200	\$200	\$200
M/B Health and SUD Outpatient Services – Other	\$30	\$30	\$30
Laboratory Outpatient and Professional Services	\$40	\$40	\$40
X-rays and Diagnostic Imaging	\$65	\$65	\$65
Advanced Imaging (CT/PET Scans, MRIs)	30%	30%	30%
All Inpatient Hospital Services (inc. MH/SUD, Maternity)	\$800****	\$800****	\$800****
Skilled Nursing Facility	\$800 **	\$800 **	\$800 **
Generics	\$25	\$25	\$25
Preferred Brand Drugs	\$75	\$75	\$75
Non-Preferred Brand Drugs	\$250	\$250	\$250
Specialty Drugs (i.e., high-cost)	\$250	\$250	\$250
Speech Therapy	\$40	\$40	\$40
Occupational and Physical Therapy	\$40	\$40	\$40
Durable Medical Equipment	30%	30%	30%
Home Health	\$30**	\$30**	\$30**
Hospice	\$30**	\$30**	\$30**
All Other Benefits	30%	30%	30%
Estimated 2024 AV	71.53%*/72.04%	71.94%	71.80%

Gold Plan Options

- 2023 Plan Design is the 2023 plan design displaying the 2023 certified AV and the estimated 2024 AV. This plan design is anticipated to be out of the federal gold plan AV range in 2024 and is included for illustrative purposes.
- 2024 Option 1 is the 2023 plan design with MOOP adjusted up so that the estimated 2024 AV is within federal statutory limits.
- 2024 Option 2 is the 2023 plan design with changes to add three \$0 cost-share primary care visits and three \$0 cost-share behavioral health visits with the estimated 2024 AV. To offset the AV increase for \$0 cost-share visits, the MOOP has been increased.

Shaded Items not subject to deductible.

* 2023 Federal AV (certified)

** Per day copay

*** Eligible for \$0 upfront visits

**** Per day copay, maximum five per stay

Red font indicates difference from corresponding 2023 design.

Benefits	Gold		
	2023 Plan Design	2024 Option 1	2024 Option 2
Medical/Pharmacy Integrated Deductible	No	No	No
Medical/Pharmacy or Integrated Deductible (\$)	\$600 / \$0	\$600 / \$0	\$600 / \$0
Medical/Pharmacy Integrated MOOP	Yes	Yes	Yes
Medical/Pharmacy Integrated MOOP (\$)	\$5,900	\$6,100	\$6,600
Preventive Care/Screening/Immunization	\$0	\$0	\$0
No. of No-Cost Upfront Visits	0	0	3
Primary Care Visit	\$15	\$15	\$15***
Specialist Visit	\$40	\$40	\$40
M/B Health and SUD Outpatient Services – Office	\$15	\$15	\$15***
Emergency Care Services	\$450	\$450	\$450
Urgent Care	\$35	\$35	\$35
Ambulance	\$375	\$375	\$375
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	\$350	\$350	\$350
Outpatient Surgery Physician/Surgical Services	\$75	\$75	\$75
M/B Health and SUD Outpatient Services – Other	\$15	\$15	\$15
Laboratory Outpatient and Professional Services	\$20	\$20	\$20
X-rays and Diagnostic Imaging	\$30	\$30	\$30
Advanced Imaging (CT/PET Scans, MRIs)	\$300	\$300	\$300
All Inpatient Hospital Services (inc. MH/SUD, Maternity)	\$525 ****	\$525 ****	\$525 ****
Skilled Nursing Facility	\$350 **	\$350 **	\$350 **
Generics	\$10	\$10	\$10
Preferred Brand Drugs	\$60	\$60	\$60
Non-Preferred Brand Drugs	\$100	\$100	\$100
Specialty Drugs (i.e., high-cost)	\$100	\$100	\$100
Speech Therapy	\$25	\$25	\$25
Occupational and Physical Therapy	\$25	\$25	\$25
Durable Medical Equipment	20%	20%	20%
Home Health	\$15**	\$15**	\$15**
Hospice	\$15**	\$15**	\$15**
All Other Benefits	20%	20%	20%
Estimated 2024 AV	81.88%*/82.19%	81.97%	81.80%

Cost Sharing Reduction (CSR) Silver 94% and 87% Variant Plan Options

- These are options for the silver CSR variants for lower-income individuals who are eligible for assistance paying for deductibles, copayments, and other out-of-pocket costs.
- The Silver 94 variant is for individuals up to 150% FPL.
- The Silver 87 variant is for individuals from 150%-200% FPL.
- 2023 Plan Design/2024 Option 1 is the 2023 plan design displaying the 2023 certified AV and the estimated 2024 AV.
- 2024 Option 2 is the 2023 plan design with changes to add three \$0 cost-share primary care visits and three \$0 cost-share behavioral health visits changes with the estimated 2024 AV. To offset the AV increase for \$0 cost-share visits, the MOOP has been increased in Silver 87.

Shaded Items not subject to deductible.

* 2023 Federal AV (certified)

** Per day copay

*** Eligible for \$0 upfront visits

**** Per day copay, maximum five per stay

Red font indicates difference from corresponding 2023 design.

Silver 94	
2023 Plan Design / 2024 Option 1	2024 Option 2
Yes	Yes
\$0	\$0
Yes	Yes
\$1,200	\$1,200
\$0	\$0
0	3
\$5	\$5***
\$15	\$15
\$5	\$5***
\$150	\$150
\$15	\$15
\$75	\$75
\$100	\$100
\$25	\$25
\$5	\$5
\$5	\$5
\$15	\$15
15%	15%
\$100****	\$100****
\$100 **	\$100 **
\$5	\$5
\$12	\$12
\$35	\$35
\$35	\$35
\$5	\$5
\$5	\$5
15%	15%
\$5**	\$5**
\$5**	\$5**
15%	15%
94.48%*/ 94.77%	94.86%

Silver 87	
2023 Plan Design / 2024 Option 1	2024 Option 2
No	No
\$750 / \$0	\$750 / \$0
Yes	Yes
\$2,400	\$2,500
\$0	\$0
0	3
\$10	\$10***
\$30	\$30
\$10	\$10***
\$425	\$425
\$30	\$30
\$175	\$175
\$325	\$325
\$120	\$120
\$10	\$10
\$20	\$20
\$40	\$40
20%	20%
\$425****	\$425****
\$425 **	\$425 **
\$12	\$12
\$35	\$35
\$160	\$160
\$160	\$160
\$20	\$20
\$20	\$20
20%	20%
\$10**	\$10**
\$10**	\$10**
20%	20%
87.79%*/ 87.86%	87.76%

CSR Silver 73% Variant Plan Options

- The Silver 73 variant is for individuals from 200% - 250% FPL.
- 2023 Plan Design is the 2023 plan design displaying the 2023 certified AV and the estimated 2024 AV. This plan design is anticipated to be out of the federal AV range and is included for illustrative purposes.
- 2024 Option 1 is the 2023 plan design with MOOP adjusted up so that the estimated 2024 AV is within federal statutory limits.
- 2024 Option 2 is the 2023 plan design with changes to add three \$0 cost-share primary care visits and three \$0 cost-share behavioral health visits with the estimated 2024 AV. To offset the AV increase for \$0 cost-share visits, the MOOP has been increased.

Shaded Items not subject to deductible.

* 2023 Federal AV (certified)

** Per day copay

*** Eligible for \$0 upfront visits

**** Per day copay, maximum five per stay

Red font indicates difference from corresponding 2023 design.

Silver 73		
2023 Plan Design	2024 Option 1	2024 Option 2
Yes	Yes	Yes
\$2,500	\$2,500	\$2,500
Yes	Yes	Yes
\$7,250	\$7,400	\$7,950
\$0	\$0	\$0
0	0	3
\$30	\$30	\$30***
\$65	\$65	\$65
\$30	\$30	\$30***
\$800	\$800	\$800
\$65	\$65	\$65
\$325	\$325	\$325
\$600	\$600	\$600
\$200	\$200	\$200
\$30	\$30	\$30
\$40	\$40	\$40
\$65	\$65	\$65
30%	30%	30%
\$800****	\$800****	\$800****
\$800 **	\$800 **	\$800 **
\$20	\$20	\$20
\$75	\$75	\$75
\$250	\$250	\$250
\$250	\$250	\$250
\$40	\$40	\$40
\$40	\$40	\$40
30%	30%	30%
\$30**	\$30**	\$30**
\$30**	\$30**	\$30**
30%	30%	30%
73.55%*/74.17%	73.96%	73.94%

Public Comment Period: October 20 – November 21, 2022

To provide public comment on the draft 2024 standard plans, either:

(1) Submit written public comment by 5:00pm PST on November 21, 2022:

- Send an email to: cascadecare@wahbexchange.org
- Please include “Public Comment” in the subject line of your email.

(2) Attend the virtual public meeting and provide comment in the meeting:

- Attend the virtual public meeting scheduled for 1:30 p.m. PST, Nov. 8, 2022.
 - This virtual meeting will provide an opportunity for the public to provide comments regarding the proposed 2024 Standard Plan Design options.
 - This meeting will be conducted via Teams.
 - [Meeting Link](#)

To request additional information about this meeting, or to request accessibility services, please email: cascadecare@wahbexchange.org



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