



Draft 2025 Standard Plan Designs

Proposed plan designs for 2025 Cascade and Cascade Select plans

*Instructions for submitting public comment
(October 26-November 27, 2023)*

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 four 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; added two \$1 primary care and mental health visits to bronze and silver plans in 2024
- Have been meeting with stakeholders on the design of 2025 standard plans for several months.

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. Incorporate additional value-based benefit design in 2025 plan design.
 - Limiting coverage for low-clinical value/harmful services and more effective options for high-clinical value services.
3. Preserve premium affordability.

Why Value-based Insurance Design?

Clinically driven plan designs, like *V-BID X*,
reduce spending on **low-value care**



...creating headroom to reallocate spending
to **high-value services** without increasing
premiums or deductibles

Cascade Care Plan Design Background

Value-based Insurance Design Features in 2024 Cascade Care Plans

- Pre-deductible services in all plans
 - Primary care, behavioral health, urgent care, generic drugs, home health, hospice
- Maximize use of co-pays vs. coinsurance
- Continuing to prioritize keeping silver plan deductible as low as possible
 - Choice to focus on balancing in other areas of plan design
 - 2024 Cascade Care silver plans have deductibles an average of \$1,200 lower than non-Cascade plans*
- New in PY 2024: Upfront visits in silver and bronze plans
 - Two \$1 primary care and two \$1 behavioral health visits

*Compared to non-standard plans with integrated deductibles

2025 Standard Plan Design

Goals for investigating options for 2025 plan designs:

- Balance richness added to plan when incentivizing high clinical value care by disincentivizing low clinical value care
- Promote equity when considering what to increase access to and what low clinical value care to reduce

Watchpoints:

- 2024 designs at top of actuarial value (AV) range for their metal level
- Preserve premium affordability

2025 Standard Plan Design Options

Considerations for reducing coverage for low-clinical value care

- Exchange explored three options from most targeted to widest in scope:
 - No coverage for four services considered as low value/do not cover in VBID-X
 - e.g., spinal fusions
 - Leverage state initiatives to pilot bundled cost-sharing model in standard plan
 - e.g., WHA Low Back Pain Implementation Collaborative
 - Increase cost sharing on entire service categories
 - e.g., advanced imaging
- **Approach for 2025:** Do not target specific low-clinical value services, but focus on increasing cost shares for service categories that commonly contain low-clinical value services
 - Increasing cost-share for an entire category is “bluntest” of above tools, but also viewed as most transparent and with least opportunity for unintended consequences

2025 Standard Plan Design Options

Considerations for incentivizing high-value care

Exchange explored two approaches:

- Increase access to core prevention and health management services for all customers
 - E.g., additional \$1 mental health visits or adding high value generics tier
- Lower cost shares on condition-specific treatments
 - E.g., diabetic foot exams and glucometers

Approach for 2025 is to include a broad high-value generics tier with the following drug categories/classes:

- anti-addiction, blood glucose regulators, antidepressant/anxiolytics/antipsychotics/bipolar agents, antihypertensive agents, antiretrovirals, anticoagulants, statins, anti-resorptive therapy, rheumatoid arthritis, inhaled corticosteroids, thyroid
- Promotes equity because selected drug classes treat chronic conditions that communities of color disproportionately face

2025 Plan Design Decision Points – Federal AV Calculator Impacts

- Draft 2025 AV calculator in design; anticipate that we cannot increase out-of-pocket maximum for first time
 - Result: deductibles or copays must increase to offset annual AV increases in 2025
- High value generics tier is feasible in silver and gold
 - Tradeoffs for silver plans: choosing between a high-value generics tier and higher deductibles
 - About 35% of Silver enrollees utilize a high-value generic (national data).
 - More than 60% of Silver enrollees utilize a service subject to the deductible (national data).
- Not possible to add high-value generics tier to Bronze and stay within AV range

Seeking Comment - Draft 2025 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 A: Keeps plan design at each metal level as similar as possible to 2024 plans, with adjustments only as necessary to keep the plan within the actuarial value (AV) range for the metal level.

Option B: At Silver and Gold metal level, incorporates high-value generic tier (\$10 silver, \$5 gold)

For both options, necessary to subject preferred brand drugs to deductible in silver

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 balancing richness with higher cost shares and promoting equity?
- Please provide any feedback you have on potential premium impacts of the proposed options.
- All other feedback is welcome, including feasibility of administering plan design changes.

Draft Standard Silver Designs

2024, 2025 AV: This is the current 2024 plan design adjusted for expected AV calculator impacts for 2025.

Option A: This option for 2025 increases the 2024 deductible by \$100 and places Preferred Brand Drugs after the deductible so that the estimated 2025 AV is within federal statutory limits.

Option B: This option for 2025 includes a new high-value generics tier with a \$10 pre-deductible copay. It increases the deductible by \$600 more than Option A to offset the generics tier and places Preferred Brand Drugs after the deductible so that the estimated 2025 AV is within federal statutory limits.

| Benefits | Silver | | |
|---|---------------|----------|----------|
| | 2024, 2025 AV | Option A | Option B |
| Deductible and Out-of-Pocket Maximum | | | |
| Medical/Pharmacy Integrated Deductible | Yes | Yes | Yes |
| Medical (or Integrated, if Applicable)/Pharmacy Deductibles (\$) | \$2,500 | \$2,600 | \$3,200 |
| Medical/Pharmacy Integrated MOOP | Yes | Yes | Yes |
| Medical/Pharmacy Integrated MOOP (\$) | \$9,200 | \$9,200 | \$9,200 |
| Office Visits | | | |
| Preventive Care/Screening/Immunization | \$0 | \$0 | \$0 |
| Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays) | \$30*** | \$30*** | \$30*** |
| Specialist Visit | \$65 | \$65 | \$65 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services-Office | \$30*** | \$30*** | \$30*** |
| Emergency/Urgent Care Services | | | |
| Emergency Care Services | \$800 | \$800 | \$800 |
| Urgent Care | \$65 | \$65 | \$65 |
| Ambulance | \$375 | \$375 | \$375 |
| Outpatient Services | | | |
| Outpatient Facility Fee (e.g., Ambulatory Surgery Center) | \$600 | \$600 | \$600 |
| Outpatient Surgery Physician/Surgical Services | \$200 | \$200 | \$200 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services - Other | \$30 | \$30 | \$30 |
| Outpatient Diagnostic Tests | | | |
| 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% |
| Inpatient Services | | | |
| All Inpatient Hospital Services (inc. MH/SUD, Maternity) | \$800* | \$800* | \$800* |
| Skilled Nursing Facility | \$800** | \$800** | \$800** |
| Pharmacy | | | |
| High-Value Generics | | | \$10 |
| 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 |
| AV | 72.95% | 71.94% | 71.93% |

Red font indicates change from 2024; Shaded Items not Subject to Deductible

*Per day copay, maximum five per stay

** Per day copay

*** Eligible for two visits at \$1 copay, after which stated cost-sharing applies.

Speech/Occupational/Physical Therapy, DME, home health, hospice, and other omitted for space; no changes from 2024 design

Draft Standard Bronze Design

2024, 2025 AV: This is the current 2024 plan design adjusted for expected AV calculator impacts for 2025.

Option A: This option for 2025 increases the deductible from \$6000 to \$7500 and increases copays for primary care/mental health office visits so that the estimated 2025 AV is within federal statutory limits.

No Option B because Option A is at top of AV range for bronze.

| Benefits | Bronze | |
|---|---------------|----------|
| | 2024, 2025 AV | Option A |
| Deductible and Out-of-Pocket Maximum | | |
| Medical/Pharmacy Integrated Deductible | Yes | Yes |
| Medical (or Integrated, if Applicable)/Pharmacy Deductibles (\$) | \$6,000 | \$7,500 |
| Medical/Pharmacy Integrated MOOP | Yes | Yes |
| Medical/Pharmacy Integrated MOOP (\$) | \$9,200 | \$9,200 |
| Office Visits | | |
| Preventive Care/Screening/Immunization | \$0 | \$0 |
| Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays) | \$50*** | \$65*** |
| Specialist Visit | \$100 | \$100 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services-Office | \$50*** | \$65*** |
| Emergency/Urgent Care Services | | |
| Emergency Care Services | 40% | 40% |
| Urgent Care | \$100 | \$100 |
| Ambulance | 40% | 40% |
| Outpatient Services | | |
| Outpatient Facility Fee (e.g., Ambulatory Surgery Center) | 40% | 40% |
| Outpatient Surgery Physician/Surgical Services | 40% | 40% |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services - Other | 40% | 40% |
| Outpatient Diagnostic Tests | | |
| Laboratory Outpatient and Professional Services | 40% | 40% |
| X-rays and Diagnostic Imaging | 40% | 40% |
| Advanced Imaging (CT/PET Scans, MRIs) | 40% | 40% |
| Inpatient Services | | |
| All Inpatient Hospital Services (inc. MH/SUD, Maternity) | 40% | 40% |
| Skilled Nursing Facility | 40% | 40% |
| Pharmacy | | |
| High-Value Generics | | |
| Generics | \$32 | \$32 |
| Preferred Brand Drugs | 40% | 40% |
| Non-Preferred Brand Drugs | 40% | 40% |
| Specialty Drugs (i.e. high-cost) | 40% | 40% |
| AV | 65.52% | 64.88% |

Red font indicates change from 2024; Shaded Items not Subject to Deductible
 *** Eligible for two visits at \$1 copay, after which stated cost-sharing applies.
 Speech/Occupational/Physical Therapy, DME, home health, hospice, and other omitted for space; no changes from 2024 design

Draft Standard Gold Designs

2024, 2025 AV: This is the current 2024 plan design adjusted for expected AV calculator impacts for 2025.

Option A: This option for 2025 increases the MOOP from \$6100 to \$7000 so that the estimated 2025 AV is within federal statutory limits.

Option B: This option for 2025 adds a new high-value generics tier with a \$5 pre-deductible copay. It increases the MOOP increases by \$300 more than Option A to off-set the high value generics tier.

| Benefits | Gold | | |
|---|---------------|----------|----------|
| | 2024, 2025 AV | Option A | Option B |
| Deductible and Out-of-Pocket Maximum | | | |
| Medical/Pharmacy Integrated Deductible | Yes | Yes | Yes |
| Medical (or Integrated, if Applicable)/Pharmacy Deductibles (\$) | \$600 | \$600 | \$600 |
| Medical/Pharmacy Integrated MOOP | Yes | Yes | Yes |
| Medical/Pharmacy Integrated MOOP (\$) | \$6,100 | \$7,000 | \$7,300 |
| Office Visits | | | |
| Preventive Care/Screening/Immunization | \$0 | \$0 | \$0 |
| Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays) | \$15 | \$15 | \$15 |
| Specialist Visit | \$40 | \$40 | \$40 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services-Office | \$15 | \$15 | \$15 |
| Emergency/Urgent Care Services | | | |
| Emergency Care Services | \$450 | \$450 | \$450 |
| Urgent Care | \$35 | \$35 | \$35 |
| Ambulance | \$375 | \$375 | \$375 |
| Outpatient Services | | | |
| Outpatient Facility Fee (e.g., Ambulatory Surgery Center) | \$350 | \$350 | \$350 |
| Outpatient Surgery Physician/Surgical Services | \$75 | \$75 | \$75 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services - Other | \$15 | \$15 | \$15 |
| Outpatient Diagnostic Tests | | | |
| 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 |
| Inpatient Services | | | |
| All Inpatient Hospital Services (inc. MH/SUD, Maternity) | \$525* | \$525* | \$525* |
| Skilled Nursing Facility | \$350** | \$350** | \$350** |
| Pharmacy | | | |
| High-Value Generics | | | \$5 |
| 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 |
| AV | 82.73% | 81.87% | 81.82% |

Red font indicates change from 2024; Shaded Items not Subject to Deductible

*Per day copay, maximum five per stay

** Per day copay

Speech/Occupational/Physical Therapy, DME, home health, hospice, and other omitted for space; no changes from 2024 design

Silver CSR 94 Plan Designs

- 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.

2024, 2025 AV: This is the current 2024 plan design adjusted for expected AV calculator impacts for 2025.

Option A: This option for 2025 increases the MOOP by \$200 so that the estimated 2025 AV is within federal statutory limits.

Option B: This option for 2025 includes a new high-value generics tier with a \$0 copay. It increases the MOOP by \$100 more than Option A to offset the high-value generics tier.

| Benefits | Silver CSR 94% AV | | |
|---|-------------------|----------|----------|
| | 2024, 2025 AV | Option A | Option B |
| Deductible and Out-of-Pocket Maximum | | | |
| Medical/Pharmacy Integrated Deductible | Yes | Yes | Yes |
| Medical (or Integrated, if Applicable)/Pharmacy Deductibles (\$) | \$0 | \$0 | \$0 |
| Medical/Pharmacy Integrated MOOP | Yes | Yes | Yes |
| Medical/Pharmacy Integrated MOOP (\$) | \$1,200 | \$1,400 | \$1,500 |
| Office Visits | | | |
| Preventive Care/Screening/Immunization | \$0 | \$0 | \$0 |
| Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays) | \$5*** | \$5*** | \$5*** |
| Specialist Visit | \$15 | \$15 | \$15 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services-Office | \$5*** | \$5*** | \$5*** |
| Emergency/Urgent Care Services | | | |
| Emergency Care Services | \$150 | \$150 | \$150 |
| Urgent Care | \$15 | \$15 | \$15 |
| Ambulance | \$75 | \$75 | \$75 |
| Outpatient Services | | | |
| Outpatient Facility Fee (e.g., Ambulatory Surgery Center) | \$100 | \$100 | \$100 |
| Outpatient Surgery Physician/Surgical Services | \$25 | \$25 | \$25 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services - Other | \$5 | \$5 | \$5 |
| Outpatient Diagnostic Tests | | | |
| Laboratory Outpatient and Professional Services | \$5 | \$5 | \$5 |
| X-rays and Diagnostic Imaging | \$15 | \$15 | \$15 |
| Advanced Imaging (CT/PET Scans, MRIs) | 15% | 15% | 15% |
| Inpatient Services | | | |
| All Inpatient Hospital Services (inc. MH/SUD, Maternity) | \$100* | \$100* | \$100* |
| Skilled Nursing Facility | \$100** | \$100** | \$100** |
| Pharmacy | | | |
| High-Value Generics | | | \$0 |
| Generics | \$5 | \$5 | \$5 |
| Preferred Brand Drugs | \$12 | \$12 | \$12 |
| Non-Preferred Brand Drugs | \$35 | \$35 | \$35 |
| Specialty Drugs (i.e. high-cost) | \$35 | \$35 | \$35 |
| AV | 95.11% | 94.81% | 94.83% |

Red font indicates change from 2024; Shaded Items not Subject to Deductible
 *Per day copay, maximum five per stay
 ** Per day copay
 *** Eligible for two visits at \$1 copay, after which stated cost-sharing applies.
 Speech/Occupational/Physical Therapy, DME, home health, hospice, and other omitted for space; no changes from 2024 design

Silver CSR 87 Plan Designs

The Silver 87 variant is for individuals 151%-200% FPL.

2024, 2025 AV: This is the current 2024 plan design adjusted for expected AV calculator impacts for 2025.

Option A: This option for 2025 increases the MOOP by \$200 so that the estimated 2025 AV is within federal statutory limits.

Option B: This option for 2025 includes a new high-value generics tier with a \$5 pre-deductible copay. It increases the MOOP by \$100 more than Option A to offset the high-value generics tier.

| Benefits | Silver CSR 87% AV | | |
|---|-------------------|----------|----------|
| | 2024, 2025 AV | Option A | Option B |
| Deductible and Out-of-Pocket Maximum | | | |
| Medical/Pharmacy Integrated Deductible | Yes | Yes | Yes |
| Medical (or Integrated, if Applicable)/Pharmacy Deductibles (\$) | \$750 | \$750 | \$750 |
| Medical/Pharmacy Integrated MOOP | Yes | Yes | Yes |
| Medical/Pharmacy Integrated MOOP (\$) | \$2,500 | \$2,700 | \$2,800 |
| Office Visits | | | |
| Preventive Care/Screening/Immunization | \$0 | \$0 | \$0 |
| Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays) | \$10*** | \$10*** | \$10*** |
| Specialist Visit | \$30 | \$30 | \$30 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services-Office | \$10*** | \$10*** | \$10*** |
| Emergency/Urgent Care Services | | | |
| Emergency Care Services | \$425 | \$425 | \$425 |
| Urgent Care | \$30 | \$30 | \$30 |
| Ambulance | \$175 | \$175 | \$175 |
| Outpatient Services | | | |
| Outpatient Facility Fee (e.g., Ambulatory Surgery Center) | \$325 | \$325 | \$325 |
| Outpatient Surgery Physician/Surgical Services | \$120 | \$120 | \$120 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services - Other | \$10 | \$10 | \$10 |
| Outpatient Diagnostic Tests | | | |
| Laboratory Outpatient and Professional Services | \$20 | \$20 | \$20 |
| X-rays and Diagnostic Imaging | \$40 | \$40 | \$40 |
| Advanced Imaging (CT/PET Scans, MRIs) | 20% | 20% | 20% |
| Inpatient Services | | | |
| All Inpatient Hospital Services (inc. MH/SUD, Maternity) | \$425* | \$425* | \$425* |
| Skilled Nursing Facility | \$425** | \$425** | \$425** |
| Pharmacy | | | |
| High-Value Generics | | | \$5 |
| Generics | \$12 | \$12 | \$12 |
| Preferred Brand Drugs | \$35 | \$35 | \$35 |
| Non-Preferred Brand Drugs | \$160 | \$160 | \$160 |
| Specialty Drugs (i.e. high-cost) | \$160 | \$160 | \$160 |
| AV | 88.27% | 87.81% | 87.78% |

Red font indicates change from 2024; Shaded Items not Subject to Deductible
 *Per day copay, maximum five per stay
 ** Per day copay
 *** Eligible for two visits at \$1 copay, after which stated cost-sharing applies.
 Speech/Occupational/Physical Therapy, DME, home health, hospice, and other omitted for space; no changes from 2024 design

Silver CSR 73 Plan Designs

The Silver 73 variant is for individuals 201%-250% FPL.

2024, 2025 AV: This is the current 2024 plan design adjusted for expected AV calculator impacts for 2025.

Option A: This option for 2025 increases the 2024 deductible by \$100, decreases the MOOP by \$100, places Preferred Brand Drugs after the deductible, and increases copay on generics by \$1 so that the estimated 2025 AV is within federal statutory limits.

Option B: This option for 2025 includes a new high-value generics tier with a \$10 pre-deductible copay. It increases the deductible by \$600 more than Option A to offset the high-value generics tier.

| Benefits | Silver CSR 73% AV | | |
|---|-------------------|----------|----------|
| | 2024, 2025 AV | Option A | Option B |
| Deductible and Out-of-Pocket Maximum | | | |
| Medical/Pharmacy Integrated Deductible | Yes | Yes | Yes |
| Medical (or Integrated, if Applicable)/Pharmacy Deductibles (\$) | \$2,500 | \$2,600 | \$3,200 |
| Medical/Pharmacy Integrated MOOP | Yes | Yes | Yes |
| Medical/Pharmacy Integrated MOOP (\$) | \$7,550 | \$7,450 | \$7,450 |
| Office Visits | | | |
| Preventive Care/Screening/Immunization | \$0 | \$0 | \$0 |
| Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays) | \$30*** | \$30*** | \$30*** |
| Specialist Visit | \$65 | \$65 | \$65 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services-Office | \$30*** | \$30*** | \$30*** |
| Emergency/Urgent Care Services | | | |
| Emergency Care Services | \$800 | \$800 | \$800 |
| Urgent Care | \$65 | \$65 | \$65 |
| Ambulance | \$325 | \$375 | \$375 |
| Outpatient Services | | | |
| Outpatient Facility Fee (e.g., Ambulatory Surgery Center) | \$600 | \$600 | \$600 |
| Outpatient Surgery Physician/Surgical Services | \$200 | \$200 | \$200 |
| Mental/Behavioral Health and Substance Use Disorder Outpatient Services - Other | \$30 | \$30 | \$30 |
| Outpatient Diagnostic Tests | | | |
| 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% |
| Inpatient Services | | | |
| All Inpatient Hospital Services (inc. MH/SUD, Maternity) | \$800* | \$800* | \$800* |
| Skilled Nursing Facility | \$800** | \$800** | \$800** |
| Pharmacy | | | |
| High-Value Generics | | | \$10 |
| Generics | \$24 | \$25 | \$25 |
| Preferred Brand Drugs | \$75 | \$75 | \$75 |
| Non-Preferred Brand Drugs | \$250 | \$250 | \$250 |
| Specialty Drugs (i.e. high-cost) | \$250 | \$250 | \$250 |
| AV | 74.89% | 73.95% | 73.99% |

Red font indicates change from 2024; Shaded Items not Subject to Deductible
 *Per day copay, maximum five per stay
 ** Per day copay
 *** Eligible for two visits at \$1 copay, after which stated cost-sharing applies.
 Speech/Occupational/Physical Therapy, DME, home health, hospice, and other omitted for space; no changes from 2024 design

Public Comment Period: October 26 – November 27, 2023

To provide public comment on the draft 2025 standard plans, either:

(1) Submit written public comment by 5:00pm PST on November 27, 2023:

- 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 2:00 p.m. PST, Nov. 14, 2023.
 - This virtual meeting will provide an opportunity for the public to provide comments regarding the proposed 2025 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



WWW.WAHEALTHPLANFINDER.ORG | WWW.WAHBEXCHANGE.ORG