



# 2024 Legislative Session Update

Advisory Committee Meeting

February 22, 2024

Joan Altman, Director of Government Affairs & Strategic Partnerships (she/her)

Laura Kate Zaichkin, Senior Policy Advisor (she/her)

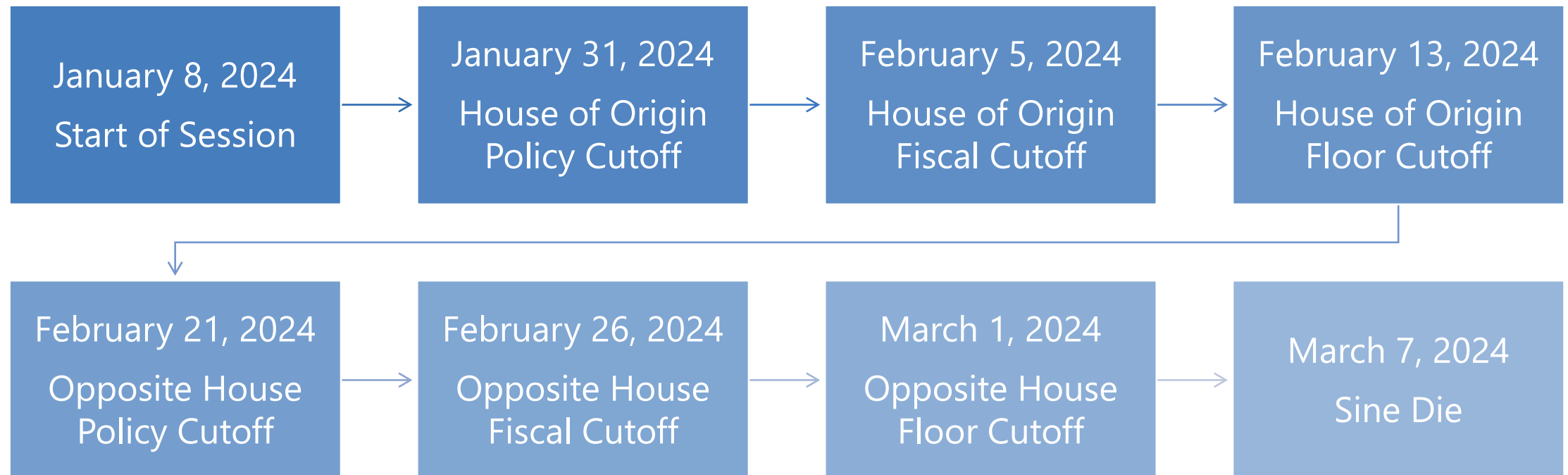


# Today's Topics

- Overview of 2024 Session & Exchange Priorities
- HB 2361 – Bill to advance standardization in Exchange market
- Additional bill & budget updates

# 2024 Session Snapshot

- Short session; supplemental budget year
- Standard plan bill (HB 2361)
- Monitoring proactive and reactive budget/proviso requests



# 2024 Supplemental State Legislative Session



## Make Equity Gains

Immigrant Health Coverage, Cascade Care Savings

- Sustain Cascade Care Savings state subsidy level through 2025
- Support HCA in implementing the upcoming Apple Health Expansion, a program that will be primarily accessed through *Washington Healthplanfinder*.



## Support Continuous Coverage

Responsive call center, date-driven outreach

- Funding to account for higher than anticipated call volume related to Medicaid redeterminations
- Funding to continue best practices to transition people from Medicaid (Apple Health) to Qualified Health Plans



## Maintain *Washington Healthplanfinder*

Stable, high performing and secure

- Funding for security and disaster recovery
- Funding to address backlog system changes to improve customer experience
- Funding to maintain operational costs for eligibility verification (ACES), software costs



## Simplify Plan Choice

Support HB 2361/ SB 6258

- Support legislation to fully standardize the Exchange market
- Improve customer experience by increasing affordability and allowing consumers to make more informed decisions.



## Drive Affordability

Support bills to increase oversight and accountability

- Support effective approaches to lower health care costs and improve price transparency
- The Exchange is supporting and monitoring bills that seek to address underlying health costs
  - HB 2066/SB 5848
  - HB 1508/SB 5519
  - HB 1263/SB 5241
  - HB 2285/SB 5986

# Advancing Standardization of the Exchange Market

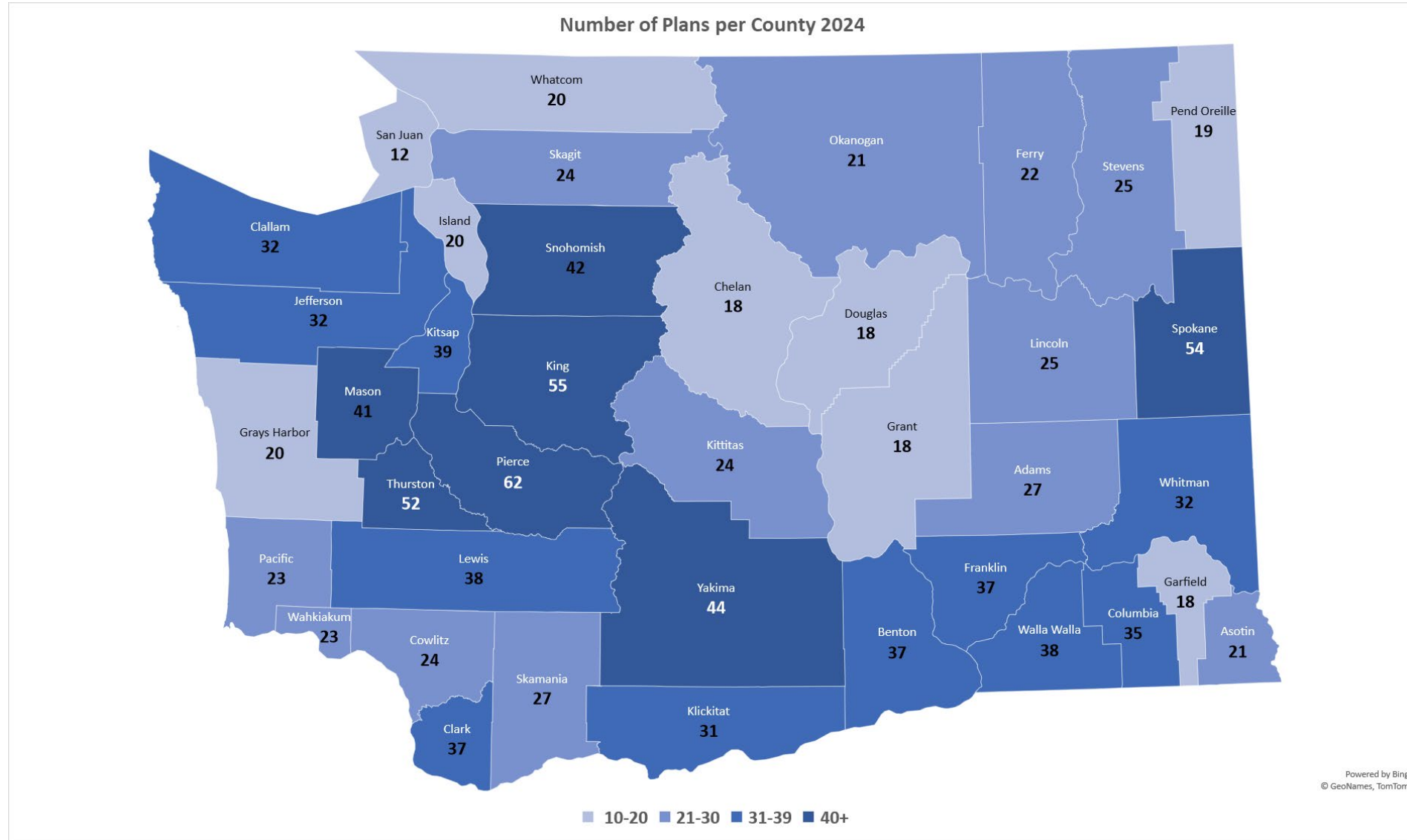
HB 2361



# Bill Introduced to Standardize the Exchange Market (HB 2361)

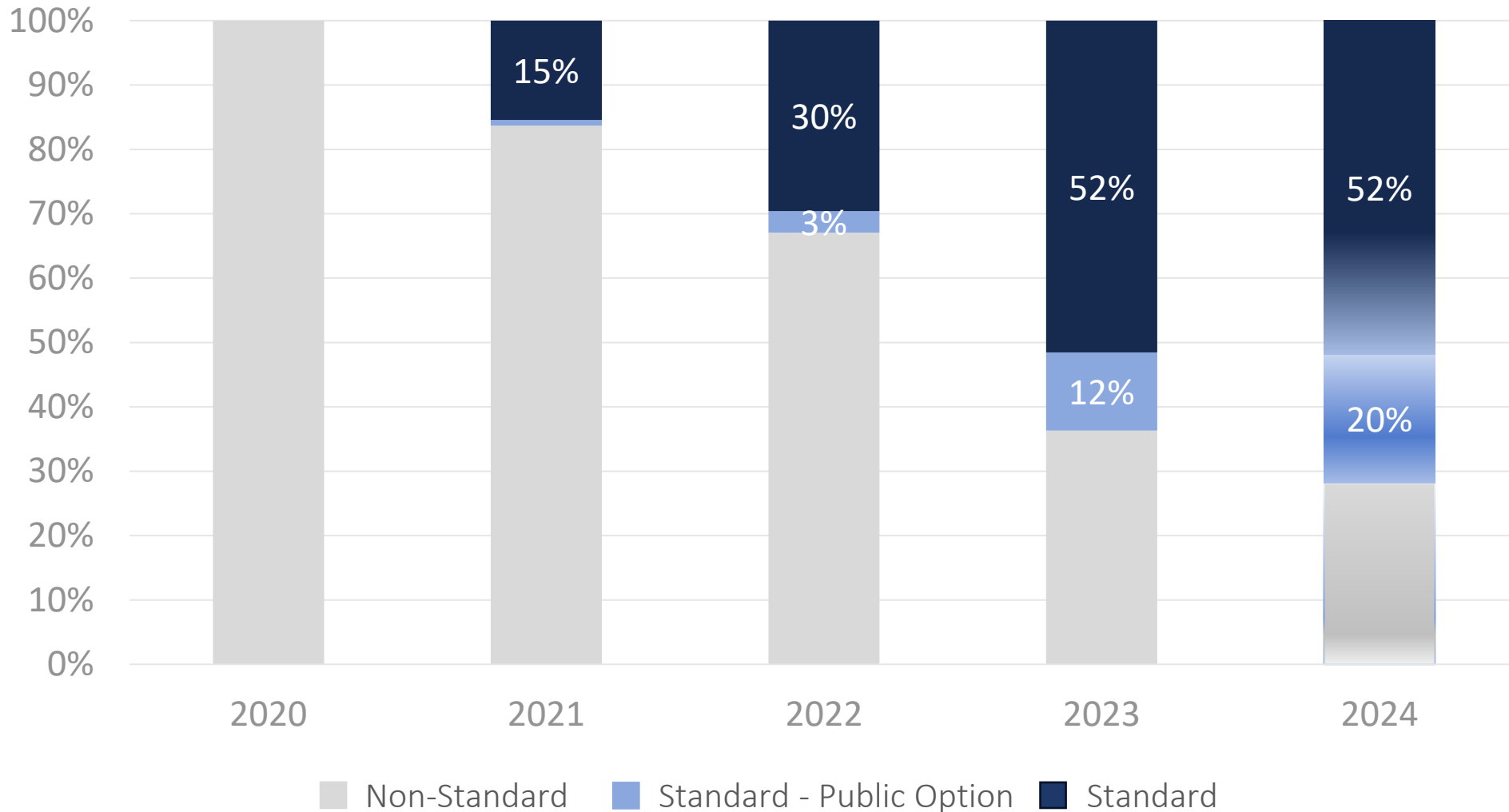
- Fact sheet [available here](#).
  - Legislative bill information [available here](#).
- Original bill designed to implement recommendations from 2023 [report to the Legislature](#):
  - Only standard plans at the Silver metal level in 2026.
  - Only standard plans on the Exchange starting 2027.
  - Exchange design additional standard plans ('low' Gold; catastrophic, HDHP) starting in 2027.
- In 2024, there are 82 different plans offered by a dozen different insurance carriers.
  - At least 3 levels of coverage (Bronze, Silver, Gold) in all counties
  - All counties have at least 12 plans to choose from
    - Up to high of 62 in Pierce
    - 14 counties have 35 or more plan choices to choose from

# Choice Overload By County



# Exchange Market Movement to Standard Plans

More than 70% of Exchange customers are in standard plans



# Customer Choice Error

Sophia, a 40-year-old Spokane resident who makes \$24,786 annually (170% FPL), shopped for an affordable plan that also supports care to manage their mental health.



## SOPHIA'S CURRENT PLAN

## COMPARABLE STANDARD PLAN

### Plan information

**Carrier A**  
non-standard  
Bronze plan with \$0  
medical deductible



**Carrier A**  
standard Silver plan

Annual net premium

\$12

\$308

Deductible

\$0 Med/\$3,800 Rx

\$750

Primary care &  
mental health office visit

\$45 copay

Two visits with \$1 copay  
\$10 copay thereafter  
*(not subject to deductible)*

Urgent care

\$60 copay

\$30 copay  
*(not subject to deductible)*

Generic drugs

\$35 copay  
*(subject to deductible)*

\$12 copay  
*(not subject to deductible)*

# Amendments to HB 2361

- Status quo: two non-standard at Bronze; one at Silver; two at Gold (2-1-2)
- Original bill: phased in fully standardized market by 2027
- Amended on House floor & passed 58-39
  - Only standard plans at the Silver metal level in 2026.
  - Starting in 2026, one non-standard plan at Bronze level and at Gold level (1-0-1).
  - Exchange submits study by Dec. 1, 2028 on full market standardization.

# Maintaining Choice

- Expected impacts:\*
  - Total Exchange plan volume reduced from 82 to 64.
  - All counties would continue to have a choice of at least 10 plans.
    - The largest reduction in counties with the most plans.
    - The smallest counties with the fewest plans see smallest reductions.
- Majority of Exchange customers compare fewer than five plans when shopping.
- Meaningful choice that mitigates choice error relies on simpler market and assister support.

County	Number of Exchange Carriers (2024)	Number of Exchange Plans (2024)	Number of Exchange Plans Under ESHB 2361 (House Passed Std Plan Bill)
Pierce	10	62	49
King	9	55	44
Spokane	8	54	42
Thurston	8	52	42
Yakima	8	44	36
Snohomish	7	42	34
Mason	7	41	32
Kitsap	7	39	31
Lewis	6	38	30
Walla Walla	6	38	31
Benton	6	37	29
Clark	6	37	29
Franklin	6	37	29
Columbia	6	35	28
Clallam	5	32	26
Jefferson	5	32	26
Whitman	5	32	24
Klickitat	5	31	25
Adams	4	27	21
Skamania	4	27	21
Lincoln	4	25	18
Stevens	4	25	19
Cowlitz	4	24	18
Kittitas	4	24	18
Skagit	4	24	20
Pacific	3	23	18
Wahkiakum	3	23	18
Ferry	4	22	16
Asotin	3	21	16
Okanogan	3	21	16
Grays Harbor	3	20	15
Island	3	20	16
Whatcom	3	20	16
Pend Oreille	3	19	13
Chelan	3	18	13
Douglas	3	18	13
Garfield	2	18	13
Grant	3	18	13
San Juan	2	12	10

\* Based on 2024 offerings

# Next Steps

## HB 2361 – Standardize Exchange Market

- Senate Health & Long Term Care hearing
- Must pass Senate by March 1, 2024 (Opposite House Floor Cutoff)

## Exchange Budget Requests

- Legislative budgets

## Additional Bills of Interest

# Additional Bills of Interest

Drive Affordability: Address Underlying Health Costs

Proposal	Goal	2024 Status
<a href="#"><u>HB 1508</u></a>	Improve consumer affordability through the Health Care Cost Transparency Board	Passed House (94-3)
<a href="#"><u>SB 5241</u></a>	Prevent anticompetitive mergers and consolidations that can reduce access	Passed Senate (28-21)
<a href="#"><u>HB 2066</u></a>	Address affordability through fair health care provider contracting	Dead
<a href="#"><u>SB 5986</u></a>	End balance billing and establish a default out-of-network rate for ground ambulance services	Passed Senate (48-0-1)

# Appendix

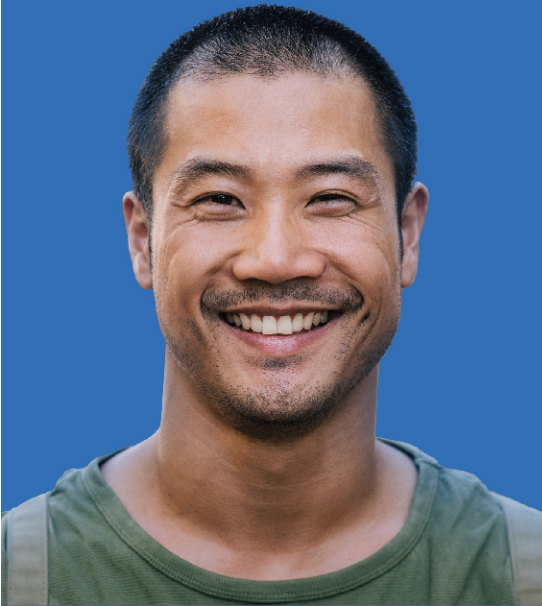
Additional resources: Advancing standardization of the Exchange market






# Customer Affordability in Standard Plans

James, a 30-year-old Clark County resident who makes \$32,805 annually (225% FPL), needs a plan to cover basic health care this year. A standard plan that **maximizes state and federal subsidies** and **offers low copays before the deductible** is their most affordable option.



	JAMES' CURRENT PLAN	COMPARABLE STANDARD PLAN
<b>Plan information</b>	<b>Carrier B</b> non-standard Silver plan with \$0 medical deductible	 <b>Carrier B</b> standard Silver plan
Annual net premium	\$984	\$516
Deductible	\$0 Medical/\$900 Drug	\$2,500
Primary care & mental health office visit	\$30 copay	Two visits with \$1 copay \$30 copay thereafter <i>(not subject to deductible)</i>
Urgent care	\$30 copay	\$65 copay <i>(not subject to deductible)</i>
Generic drugs	\$28 copay	\$25 copay <i>(not subject to deductible)</i>
<b>James' annual health care utilization</b>		
• Two primary care visits	\$60	\$2
• One urgent care visit	\$30	\$65
• One prescription from urgent care visit	\$28	\$25
<b>James' total annual cost of coverage &amp; care</b>	<b>\$1,102</b>	<b>\$608</b>

# Analysis: Maintaining Choice

Expected impacts (based on  
2024 current offerings)

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# Analysis: Maintaining Choice (cont.)

## ESHB 2361 (House Passed)

- Expected impacts (based on 2024 current offerings):
  - Total Exchange plan volume would reduce from 82 to 64.
  - Counties will see a reduction of between 2 to 12 non-standard plans, with most counties seeing a reduction of 5 non-standard plans.
  - All counties would continue to have a choice of at least 10 plans, at three different coverage levels (Bronze, Silver, and Gold).
  - The largest reduction will be in the counties with the most plans (e.g., Pierce goes from 62 to 49 and King from 55 to 44).
  - The smallest counties with the least number of plans will see the smallest reductions (e.g., San Juan goes from 12 to 10 and Garfield goes from 18 to 13).
- In a scenario where all non-standard plans are eliminated and additional standard plans are also designed (as envisioned by the original bill), a similar number of total plans would be expected (as reflected in the far-right column of the chart; based on 2024 offerings).



[WWW.WAHEALTHPLANFINDER.ORG](http://WWW.WAHEALTHPLANFINDER.ORG) | [WWW.WAHBEXCHANGE.ORG](http://WWW.WAHBEXCHANGE.ORG)