

Washington Health Benefit Exchange

SENATE HEALTH COMMITTEE NOVEMBER 14, 2016

PAM MACEWAN, CEO
MICHAEL MARCHAND, DIRECTOR OF COMMUNICATIONS & OUTREACH

Post-Election Activities

- Consumer Messaging
 - Open-enrollment continues through January 31, 2017
- Carriers & stakeholder engagement
- Visioning on the evolution and stabilization of our market, including affordability and operational delivery.
- Monitoring national activity



Exchange Priorities 2016-2017

- Optimizing Customer Experience
- Growth and Enrollment
- Sustainability





Open-Enrollment Period Nov. 1, 2016 – Jan. 31, 2017

- Successful Launch
 - Monitoring Healthplanfinder activity
 - Monitoring Call Center activity
 - Monitoring consumer feedback and trends
 - Hosting weekly check-ins with Navigators and Brokers
 - Soliciting feedback from Committees and Workgroups
- Successful Processing of QHP Renewals
- Tracking to Enrollment Targets
- Fall Enrollment Report (enrollment demographics as of Sept.)



What's New?

- Family Dental Plans
 - 3 insurers will sell 12 Qualified Dental Plans (QDPs)



- New Shopping Features
 - Shopping Cart (saves plan selections)





- Shopping Tips (alerts on comparing plans and reducing costs)
- Quality Rating System
 - Based on federal standards of quality
 - Health plans will be assigned a rating 1 star (lowest)
 to 5 stars (highest)





New Enrollment Storefront Pilot

- Exchange has contracted with 2 organizations to manage full service, in-person enrollment assistance sites during OE
- High visibility, high consumer traffic locations
- Broker Navigator partnership
- Consumer education

Washington Healthplanfinder Enrollment Center

Better Health Together

2001 N. Division St.



Applied Team Insurance

7720 NE Vancouver Mall Dr. #110

Vancouver

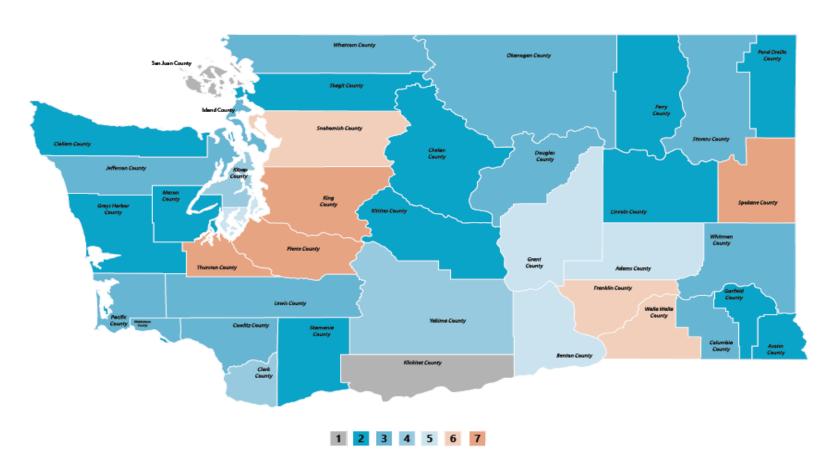
Spokane



2017 QHP Issuers by County

9 insurers will sell 98 Qualified Health Plans (QHPs)

2017





2017 Qualified Health Plan Themes

- 12 plans cover primary care visits before deductible has been met
- 53% of plans limit care to in-network providers only (except in emergencies), compared to 34% in 2016





2017 Qualified Health Plan Pricing

- Average premium changes 2016 to 2017 in the Exchange:
 - Gold plans: 13%% increase
 - Silver plans: 4% increase
 - Bronze plans: 6% increase

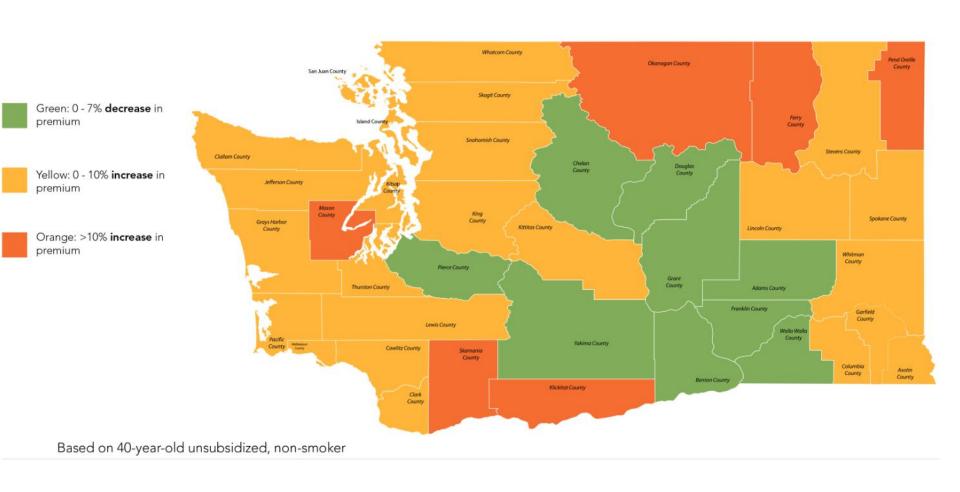
- Average deductible changes 2016 to 2017 in the Exchange:
 - Gold plans: 7% increase
 - Silver plans: 8% increase
 - Bronze plans: 5% increase



Premium Increases Vary by County

Change in Second Lowest Cost Silver Premium (SLCSP) Rate '16 to '17

Average SLCSP Premium Increase is 8%



Subsidized Low-Income QHP Enrollees Shielded from Premium Increases

County	Year	Premium	150% FPL (~18k/yr)		250% FPL (~30k/yr)	
				Cost to		Cost to
			Tax Credit	Consumer	Tax Credit	Consumer
Ferry (33% SLCSP	2016	\$272	\$209	\$63	\$64	\$208
increase)	2017	\$404	\$342	\$62	\$197	\$207
Spokane (7%	2016	\$209	\$146	\$63	\$1	\$208
SLCSP increase)	2017	\$224	\$162	\$62	\$17	\$207
King (6% SLCSP	2016	\$223	\$160	\$63	\$15	\$208
increase)	2017	\$238	\$176	\$62	\$31	\$207
Clark (5% SLCSP	2016	\$292	\$229	\$63	\$84	\$208
increase)	2017	\$308	\$246	\$62	\$101	\$207
Pierce (-7%	2016	\$258	\$195	\$63	\$50	\$258
SLCSP decrease)	2017	\$241	\$179	\$62	\$34	\$207



Based on 40-year-old, non-smoker

Average QHP Deductible Changes from 2016-2017

	2016 Average	2017 Average	Change in
Metal Level	Deductible	Deductible	Deductible
Bronze	\$5,693	\$5,977	\$284
Silver*	\$3,343	\$3,620	\$277
Gold	\$1,148	\$1,223	\$75



^{*}Cost-Share Reductions (CSRs) available for those under 250% FPL

Looking Ahead

Challenges

- Affordability
- Changing Products & Provider Networks
- Market Stability
- Rural Access
- Changing Regulatory Environment

Opportunities

- Decision Support Tools
- Expanding Risk Pool

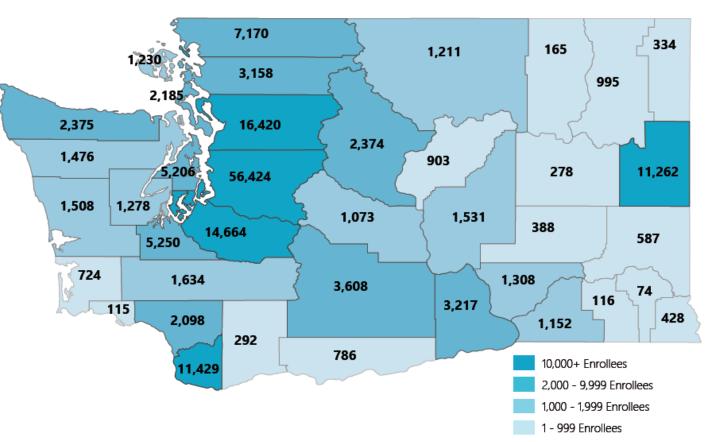




Appendix

FALL ENROLLMENT REPORT

QHP by County



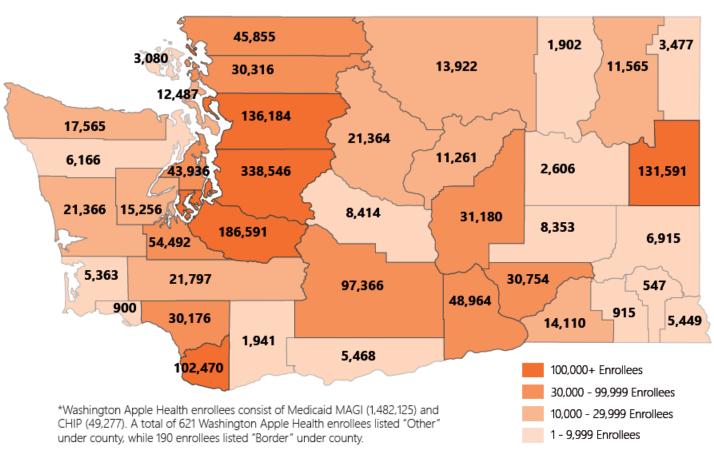
<u>Top 10</u>

KING	56,42
SNOHOMISH	16,420
PIERCE	14,66
CLARK	11,429
SPOKANE	11,26
WHATCOM	7,170
THURSTON	5,250
KITSAP	5,20
YAKIMA	3,60
BENTON	3.21



FALL ENROLLMENT REPORT

Washington Apple Health by County



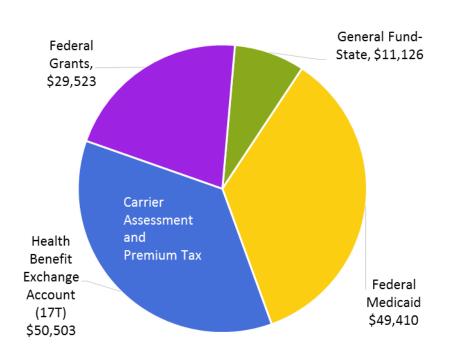
<u>Top 10</u>

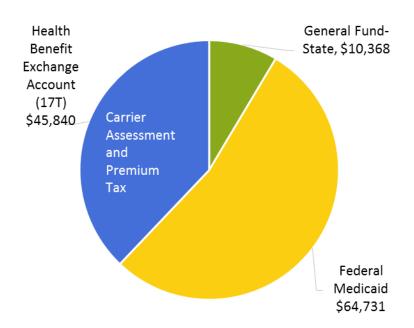
KING	338,546
PIERCE	186,591
SNOHOMISH	136,184
SPOKANE	131,591
CLARK	102,470
YAKIMA	97,366
THURSTON	54,492
BENTON	48,964
WHATCOM	45,855
KITSAP	43,936



CURRENT VERSUS PROPOSED BUDGET – BY FUND SOURCE (IN THOUSANDS)

2015-17 Total Funding \$140.6 million Proposed 2017-19 Total Funding \$120.9 million



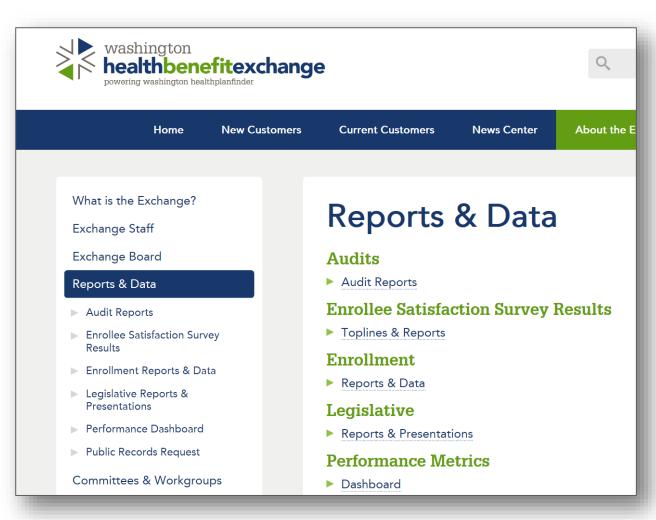




Legislative Reports

www.wahbexchange.org/about-the-exchange/reports-data/

- Reports submitted to legislators include:
 - Annual Strategic Plan
 - Annual Detailed Financial Report
 - Annual Updates to 5
 Year Spending Plan
 - Quarterly Spending Metrics Report
 - Monthly Financial Reports





Five Year Strategic Plan

Core Outcomes

- Define and Deliver Operational Excellence
- Increase Number of Insured and Access to Affordable Coverage
- Advance Consumer Choice and Decision-Making
- Promote Equity Across System







Key OE4 Dates

Nov. 1	Open Enrollment begins!
Dec. 15	Soft enrollment deadline for coverage effective Jan. 1, 2017.
Dec. 23	Final enrollment deadline for coverage effective Jan. 1, 2017. Customers ineligible for auto renewal or those interested in changing their 2017 coverage must select and finalize coverage.
Jan. 1	Coverage begins for customers eligible for auto renewal and customers who selected and finalized coverage by Dec. 23.
Jan. 23	Enrollment deadline for coverage effective Feb. 1, 2017.
Jan. 31	Open Enrollment ends! Enrollment deadline for coverage effective Mar. 1, 2017.



QHP Renewal Process

www.wahbexchange.org/renew

- Eligible customers auto-renewed into the same plan (if available) or a similar plan
- After auto-renewal, customers can shop and change plans during open enrollment (starting Nov. 1)
- Auto renewals effective for Jan. 1 coverage





New Family Dental Plans

www.wahbexchange.org/dental

- Current: Children (18 or younger) must enroll in a pediatric dental plan if they enroll in QHP coverage.
- New in 2017: All household members may enroll in a dental plan if they enroll in QHP coverage.
 - Dental plans can cover just adults, adults and children, or children only
 - Consumers decide which household members they would like to cover when they shop

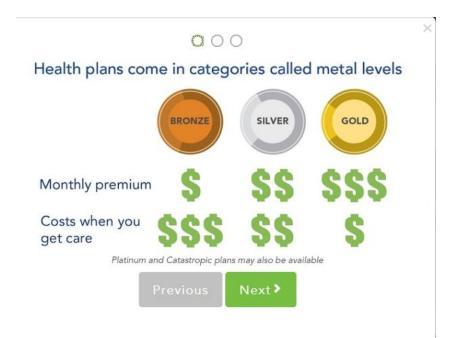


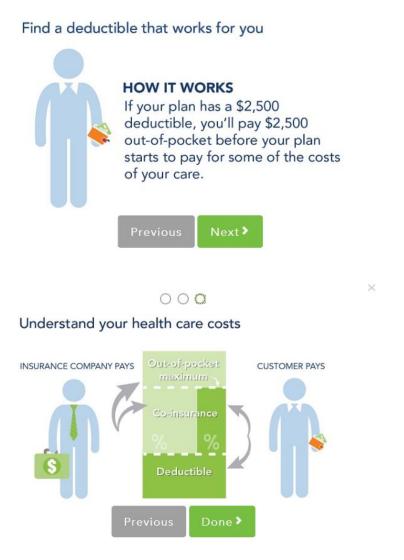




New Shopping Tips

 Customers shopping online now receive alerts with educational tips on comparing plans and reducing costs.







Health Literacy: Explaining Costs

Health Care Costs through the Year



out-of-pocket maximum

Metal Level Guide

Plans in Washington Healthplanfinder are separated into four categories, called metal levels. Find out what metal level may be right for you.

Answer a few questions about yourself	BRONZE	SILVER	GOLD PLATINUM
How often do you go to the doctor?	Annual physical	1-3 times/year	4+ times/year
How many prescription drugs do you need/use?	None	1-3 drugs	4+ drugs
How many times do you go to the ER in a year?	Once or less	Maybe a few times	Often
Are you planning to have surgery or have a baby?	No	Maybe	Yes
If you get sick, you'd be willing to pay a	\$3,750 - \$6,500 deductible*	\$1,250 - \$5,000 deductible*	\$250 - \$2,000 deductible*
How much are you willing to pay for your monthly premium?	\$	SS	SSS-SSSS
Do you qualify for lower out-of-pocket costs, called Cost Sharing Reductions?	No	Yes? You must choose a Silver plan to get these cost savings!	No

This is an educational tool only and is not intended as a plan recommendation. Health insurance plans differ. *Based on 2015 plan pricing.



Health Literacy: Explaining Costs

Shopping Tip #1:

Health plans come in categories, called metal levels



Shopping Tip #2:

Find a deductible that works for you



How it works:

If your plan has a \$2,500 deductible, you'll pay \$2,500 out of your own pocket before your health plan starts to pay some of your health care costs.

Insurance costs throughout the year

At the beginning of the year, **you pay** for most of your health care until you reach your deductible.



deductible



co-insurance



out-of-pocket max



Health insurance protects you from high costs.



\$10,000

ER visit

Key Terms

Co-pay

A fixed amount you pay for a covered health care service.

Deductible

The amount you will spend on your health care before your health plan starts to pay some of your health care costs.

Co-insurance

Your share of the cost of a covered health care service, after you have paid your health plan's deductible.



ER visit: \$10,000

Patient pays:
ER co-pay (\$250)
+ deductible (\$2,000)
+ 20% co-insurance of
remainder of bill (\$1,550)
\$250+\$2,000 + \$1,550

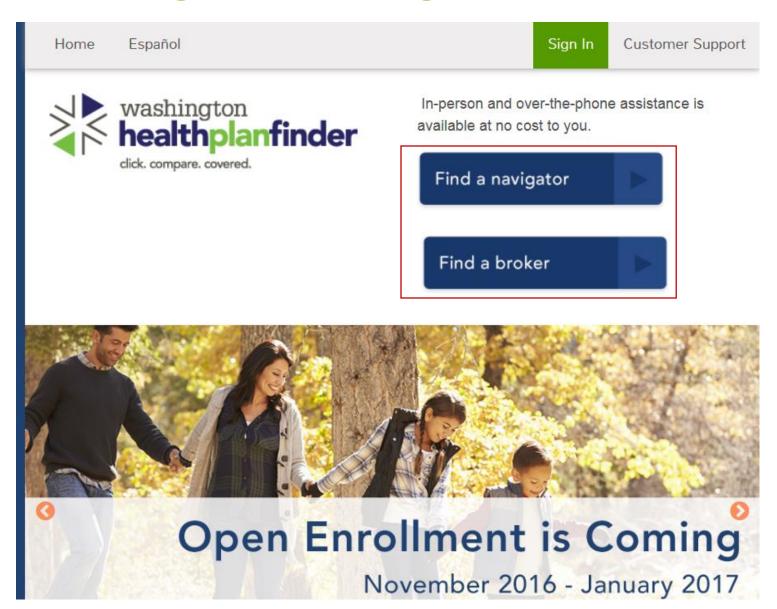
BILL

Patient Total: \$3,800





Finding a local Navigator or Broker





Navigator Lead Organizations

www.wahbexchange.org/partners/navigators/

Service Area by County





Consumer Assistance: Customer Support Center

- 1-855-WAFINDER (1-855-923-4633)
- Located in Spokane Valley, WA
- Hours of Operations: 8am-8pm M-F (except state holidays)
- Assist with
 - Applying for or renewing health care coverage
 - Health Insurance Premium Tax Credit (HIPTC) questions
 - Qualified Health and Dental Plans(QHP/QDP) questions
 - Healthplanfinder Business questions



Additional Resources

www.wahealthplanfinder.org

- Customer Support @ top right of home page
- 1-855-WAFINDER (1-855-923-4633)
- TTY/TTD for Deaf: 1-855-627-9604

www.wahbexchange.org

Partner Toolkit @ footer



WAHealthplanfinder



@waplanfinder



waplanfinder

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Partner Toolkit

Click on the icons below for valuable resources to use when helping customers enroll through *Washington Healthplanfinder*.













