Exchange Overview

- The Washington Health Benefit Exchange ("the Exchange") is a public-private partnership. The Exchange is subject to open public meetings and public disclosure guidelines.

- The Exchange is responsible for managing the online health insurance marketplace, Washington Healthplanfinder (available in English and Spanish)

- Through Healthplanfinder, WA residents can obtain Medicaid or commercial health coverage, compare plan options, and see if they qualify for federal subsidies to help pay for coverage. All renewals also go through Healthplanfinder.

- Washington Healthplanfinder launched on October 1, 2014.

- About 1.8M -- 1 in 4 -- Washington residents have signed up for health insurance through Healthplanfinder.

- The Exchange supports a robust customer support network, including a Spokane based call center, and state-wide Navigator and Broker enrollment assistance programs.
The Exchange is run by an 11-member, bi-partisan Board
Board members are nominated by each legislative caucus
Board members are appointed by the Governor to two-year terms
Operation costs through 2014 are fully funded by Federal Grants

The Exchange must become self-sustaining in 2015

Exchange funding is appropriated by the legislature

Three currently available ongoing Exchange funding sources

- Qualified Health and Pediatric Dental Plans Insurance Carrier premium taxes (2%) collected from insurance products sold in the Exchange during 2015
- QHP/QDP Issuer (carrier) assessments ($4.19/$0.33)
- Reimbursement from HCA for providing Medicaid services (cost allocation formula)
Proposed Revenue Sources: SFY 2016-2017 (assumes $147M)

- **Premium Assessment**: $53,903,000
- **Carrier Assessment**: $29,589,000
- **Medicaid Cost Allocation: Federal Share**: $37,446,500
- **Medicaid Cost Allocation: State Share**: $16,048,500
- **Shortfall**: $9,954,000
First Year Highlights

• Exchange Enrollment (Oct 1.-Mar. 31, 2014)
  o QHP: projected 133,000; actual: 164,062
  o Medicaid: projected new 136,222; actual: 285,275

• Federal Subsidies obtained through Exchange
  o $300 million to help pay for premiums
  o $50 million to reduce the cost of hospital and provider visits

• Decreased Uninsured Rate
  o 4th largest drop in rate of uninsurance nationwide (Gallup)
  o 30% drop in charity care in WA; nearly $154 million (Seattle Times)

• Retention
  o On average, 4-5K qualified health plan consumers disenroll each month, 2-3K consumers enroll each month
  o 1/3 terminated for non-payment; 1/3 voluntarily leave; 1/3 no longer eligible (most transition to Medicaid)
Overall System Performance

Early Indicators for 2015 Enrollment
• 107,000 Qualified Health Plans
• 471,602 new Medicaid adults

Challenges & Path Forward
• Invoice and Payment Issues
  • Removal of premium aggregation; modular solution/3rd party vendor
• System Glitches
  • Code review; change in Deloitte on-site management
• Consumer Experience
  • Special Enrollment for anyone who experienced technical difficulty
  • Consumer workgroup; more Client Specialists; new complaint process
General Resources

www.wahealthplanfinder.org
www.wahbexchange.org
1-855-WAFINDER (1-855-923-4633)
TTY/TTD for Deaf : 1-855-627-9604
info@wahbexchange.org

WAHealthplanfinder
@waplanfinder
waplanfinder
Appendix
**Exchange Board**

**Ron Sims**—Chair, Retired *Deputy Secretary for the U.S. Department of Housing and Urban Development*

**Hiroshi Nakano**—CEO South Sound Neurosurgery

**Bill Baldwin**—Partner, The Partners Group

**Don Conant**—General Manager, Valley Nut & Bolt, Assistant Professor

**Bill Hinkle**—Executive Director, Rental Housing Association and Former Legislator

**Mark Stensager**—Retired Health System Administrator

**Ben Danielson**—Medical Director, Odessa Brown

**Phil Dyer**—Senior VP, Kibble & Prentice, and Former Legislator

**Teresa Mosqueda**—Legislative & Policy Director, Washington Labor Council

* **Commissioner Mike Kreidler**—Insurance Commissioner

* **Dorothy Teeter**—HCA Director

* non voting, ex officio
Real People, Real Stories

The new *Healthplanfinder* homepage features personal, customer stories of those who were positively impacted by health care reform, including:

- **Becky and Todd from St. John** – “With financial help, our family’s monthly premiums fell from $2,400 to $306. Now, we can help our children pay for college.”

- **Reverend Don from Seattle** – “Uninsured and diagnosed with brain tumors, I was concerned about getting the right care. Now I don’t have to worry. I found a free health plan.”

- **Tiffany, the owner of the Adrift Hotel in Long Beach** – “We’ve always wanted to offer health benefits to our employees. The small business tax credits made it possible.”
Applying for Coverage in *Healthplanfinder*

1. **Browse**
   - Browse anonymously
2. **Apply**
   - Apply
3. **Select**
   - Provide income information
   - Review eligibility results
4. **Finalize**
   - Select a health plan
   - Submit payment
Review Eligibility Results

Eligibility Status
You applied for free or low cost health insurance coverage. Thank you for providing your household information. You’ll find eligibility status details per household member by clicking each name below. A summary of any tax credit your household is eligible for is available at the bottom of this screen. Clicking next will give you a summary your household’s next steps to secure coverage.

Anthony Jones
- Approved
- Program: Qualified Health Plan
- Start Date: 01/01/2015
- End Date: 02/28/2015
- Coverage Dates: 01/01/2015 to 02/28/2015
- Program: Qualified Health Plan
- Renewal Date: N/A

Emma Jones
- Approved
- Program: Qualified Health Plan
- Start Date: 01/01/2015
- End Date: 02/28/2015
- Coverage Dates: 01/01/2015 to 02/28/2015
- Program: Qualified Health Plan
- Renewal Date: N/A

Ava Jones
- Approved
- Program: Qualified Health Plan
- Start Date: 01/01/2015
- End Date: 02/28/2015
- Coverage Dates: 01/01/2015 to 02/28/2015
- Program: Qualified Health Plan
- Renewal Date: N/A

Tax Credits
Anthony is included in the tax unit that has been approved for tax credits. See more information at the bottom of this screen.

Next Steps for Anthony
You are eligible to buy a Qualified Health plan now. The premium amount shown includes tax credits. Please return to Washington Healthplanfinder after 1/23/2015 to purchase a plan again and receive a $300 tax credit for your tax filing household.

Health Insurance Premium Tax Credits
This tax unit has been approved for $300 in tax credits, which can be used to help lower the cost of insurance.

<table>
<thead>
<tr>
<th>Coverage Period</th>
<th>Monthly Credit Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/01/2015 - 02/28/2015</td>
<td>$300</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tax Unit</th>
<th>Monthly Credit Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthony</td>
<td>$300</td>
</tr>
<tr>
<td>Ava</td>
<td>Not Eligible</td>
</tr>
<tr>
<td>Emma</td>
<td>Not Eligible</td>
</tr>
</tbody>
</table>

How Is This Calculated?
The amount is based on information you provided in your application such as household income and number of dependents. To see the full explanation click the button below. 

Tax Credit Information
Select a Health Plan

My Search
Health Care Provider:
Dr. John Johnson [Edit] [Remove]
Looking for a plan to cover:
John Doe, 47
Sally Doe, 48
Mary Doe, 14
(you eligible and will be enrolled in CHIP plan separately)

Need help finding a plan?
Answer a few more questions to help narrow your search.
Get Help

Customize My Search
Premium
- $100 - $200
- $200 - $300
- $300 - $400
- $400 - $500
- $500 - $600

Cost Sharing Reductions
- Applicable
- Not-Applicable

Deductible
- $500 - $1,000
- $1,000 - $1,500
- $1,500 - $2,000
- $2,000 - $2,500
- $2,500 - $3,000

Out-of-Pocket Maximum
- $500 - $1,000
- $1,000 - $1,500

QHP Logo
Evergreen HMO

PLAN SUMMARY
DEDUCTIBLE $2,000
HEALTH CARE PROVIDER OUT OF NETWORK
OUT-OF-POCKET MAXIMUM $2,000
EMERGENCY ROOM $150
PRIMARY CARE CO-PAY $10

Consumer Rating
Quality Rating

More Savings: The cost of care is reduced for this plan based on your eligibility.

Buy

QHP Logo
Select Plan PPO

PLAN SUMMARY
DEDUCTIBLE $2,000
HEALTH CARE PROVIDER OUT OF NETWORK
OUT-OF-POCKET MAXIMUM $2,000
EMERGENCY ROOM $150
PRIMARY CARE CO-PAY $10

Consumer Rating
Quality Rating

More Savings: The cost of care is reduced for this plan based on your eligibility.

Add to Comparison
Buy

PREMIUM
$300 Price After $30 Tax Credit

View Comparisons 18 Plans Found
Previous Show 5 Per Page Next Sort By Total Premium

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# Exchange Federal Grant Funding Summary

<table>
<thead>
<tr>
<th>Year Awarded</th>
<th>Grant</th>
<th>Funding Description</th>
<th>Amount</th>
<th>Amount Remaining#</th>
<th>Project Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>State Planning Grant</td>
<td>To develop an Implementation Plan for a state-governed and administered health insurance exchange.</td>
<td>$1M</td>
<td>$0</td>
<td>Closed</td>
</tr>
<tr>
<td>2011</td>
<td>Level 1A</td>
<td>To build a comprehensive operational plan, develop policy options, and begin design of an IT system to facilitate critical exchange functions.</td>
<td>$23M</td>
<td>$0</td>
<td>Closed</td>
</tr>
<tr>
<td>2012/2013</td>
<td>Level 2</td>
<td>To design, develop, implement and support initial operations of Washington Healthplanfinder.</td>
<td>$179M^[1] [7M from HCA] [15M to DSHS]</td>
<td>$18M</td>
<td>May 2012 – Dec. 2015</td>
</tr>
<tr>
<td>2013</td>
<td>Level 1B</td>
<td>To further design, develop and implement Washington Healthplanfinder.</td>
<td>$96M [5M from HCA] [7M to DSHS]</td>
<td>$27M</td>
<td>Jan. 2014 – Dec. 2015</td>
</tr>
<tr>
<td>2014</td>
<td>Level 1C</td>
<td>To achieve stability in Healthplanfinder, add functionality that supports and improves upon customer service, and help to establish a sustainable exchange.</td>
<td>$35M^[~] [8M from HCA]</td>
<td>N/A</td>
<td>Jan. 2015 – Dec. 2015</td>
</tr>
</tbody>
</table>

# Amounts include accruals as of 12/31/2014
^15M provided to DSHS from CMS for ACES remediation
~ This amount is estimated based on the CCIIO awarded amount of $27M

Additional information for WAHBE’s Federal Grant Funding is available at the corporate website:
Health Care & Wellness Work Session: Complaint Process
January 14, 2014
Joan Altman, JD, MPH, Legislative and External Affairs Manager
Consumer Feedback/Complaint Overview

The Exchange established the current feedback/complaint framework for purposes of:

- Providing state residents with a way to capture, submit and escalate specific issues related to their experience
- Escalating medically necessary/high priority cases that require immediate attention/resolution
- Capturing trends and feedback that will improve the consumer experience and feedback processes
- Ensuring that all information provided is handled in accordance with federal privacy and security guidelines as required by the ACA
<table>
<thead>
<tr>
<th>Feedback Source</th>
<th>Related Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Call Center</strong></td>
<td>• 10,000 calls per day during open-enrollment&lt;br&gt;• Referrals to HCA, DSHS, OIC as needed&lt;br&gt;• Ticket created for any issue that cannot be resolved; triaged to staff</td>
</tr>
<tr>
<td>CSRs (500+)</td>
<td></td>
</tr>
<tr>
<td><strong>Consumer Support Network</strong></td>
<td>• Communicate issues to staff liaisons&lt;br&gt;• IPA lead organizations can create tickets directly</td>
</tr>
<tr>
<td>Brokers (2300), IPAs (1900), Tribal Assisters (100), Community Partners (300)</td>
<td></td>
</tr>
<tr>
<td><strong>External Partners</strong></td>
<td>• Submit referrals through established channels, tracked, status updates provided</td>
</tr>
<tr>
<td>Legislators, Governor’s office, AG, OIC, and HCA</td>
<td></td>
</tr>
<tr>
<td><strong>Online Form</strong></td>
<td>• Available through website; connects with existing tracking and escalation process</td>
</tr>
<tr>
<td>Direct access point online</td>
<td></td>
</tr>
<tr>
<td><strong>Social Media</strong></td>
<td>• Monitored with escalation provided for medically necessary cases</td>
</tr>
<tr>
<td>Facebook, Twitter, etc.</td>
<td></td>
</tr>
</tbody>
</table>
High Priority Cases – Client Specialist Team

• All high-priority cases are escalated to our Client Specialist team. These include:
  o High-medical emergencies;
  o Pregnant women and children;
  o Emotionally sensitive and/or complicated cases; atypical cases

• How cases are submitted and tracked
  o Cases are tracked through a secure, centralized, case management system designed to follow, triage and process consumer issues

• How cases are worked
  o Specialists work 1:1 with consumer until issue is resolved; direct contact information provided to consumer
  o Specialists work across the organization and with outside partners to resolve issues
Sample Report: Referrals Tracking System
High priority Cases (Oct. 1- Dec. 31)
Reporting of Feedback/Complaint Data

Internal Reporting to inform:
• System performance and prioritize technical needs
• Monitor consumer trends
• Proactive outreach efforts for consumers
• Development of outreach materials
  o e.g. partner notifications, FAQs, etc.

External reporting to inform:
• Consumer challenges
• Decision making

Data sharing with carriers and state partner’s to inform:
• Customer service efforts
• Areas for system improvement
  o e.g., Eligibility Service, Provider One, etc.
Moving Forward

• Continue to build out and refine tracking categories and reporting based on experience

• Integrate feedback process into Healthplanfinder

• Explore additional consumer feedback channels
### Cross Agency Desk Aid

<table>
<thead>
<tr>
<th>Department of Social and Health Services</th>
<th>Health Benefit Exchange</th>
<th>Health Care Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Services Division</td>
<td>Long-Term Care Specialty Unit</td>
<td>Lead Organizations In-Person Assista/ Navigators</td>
</tr>
<tr>
<td>Customer Service Contact Center</td>
<td>Washington Healthplanfinder Customer Support Center</td>
<td>Lead Organization Contact Information available at:</td>
</tr>
<tr>
<td><a href="http://www.washingtonconnection.org">www.washingtonconnection.org</a></td>
<td><a href="http://www.washingtonconnection.org">www.washingtonconnection.org</a></td>
<td>Healthcare Exchange (HCE) Customer Service Center (HCSC) 1-800-582-3022</td>
</tr>
<tr>
<td>1-888-338-7410 (FAX)</td>
<td>1-855-923-4833</td>
<td><a href="https://fortress.wa.gov/hca/hcicare">https://fortress.wa.gov/hca/hcicare</a></td>
</tr>
<tr>
<td>Home &amp; Community Services Long Term Care (LTC)</td>
<td>Medical Assistance Customer Service Center (MACSC)</td>
<td>Medical Eligibility Determination Services (MEDS)</td>
</tr>
<tr>
<td>No call center at HCS. Contact your local office by checking at:</td>
<td>1-800-823-9357</td>
<td>1-800-823-9357</td>
</tr>
<tr>
<td><a href="http://www.washingtonconnection.org">www.washingtonconnection.org</a></td>
<td><a href="mailto:customercare@wahbexchange.org">customercare@wahbexchange.org</a></td>
<td></td>
</tr>
<tr>
<td>1-855-645-8305 (FAX)</td>
<td>1-855-889-2266 (FAX)</td>
<td></td>
</tr>
<tr>
<td>• Apply for, report changes or renew Food, Cash, and Child Care programs (SNAP, EBT, ABD/ HEN Referral, TANF, Refugee Assistance WorkFirst)</td>
<td>• Medical Assistance Customer Service Center</td>
<td>• Apple Health Modified Adjusted Gross Income (MAGI) Medicaid eligibility questions (families, children, pregnant women and single adults)</td>
</tr>
<tr>
<td>• Apply for Classic Medicaid programs, SSI, 65+, and disabled</td>
<td>• Apply for or renew health care coverage (families, children, pregnant women and single adults)</td>
<td>• Post-Eligibility Case Review questions or report changes</td>
</tr>
<tr>
<td>• Request an appeal of Classic Medicaid, Food, Cash and Child Care programs</td>
<td>• Health Insurance Premium Tax Credit (HPTC) questions</td>
<td>• Apple Health for Kids premium payment questions (CHIP)</td>
</tr>
<tr>
<td>• Answer Phone: Automated system where clients can check their DSHS benefits</td>
<td>• Qualified Health Plans (QHP) questions</td>
<td>• Request an appeal for Apple Health Programs</td>
</tr>
<tr>
<td>• For additional application assistance refer to the Public Access Directory for community partners:</td>
<td>• Small Business Health Options (SHOP) questions 1-855-256-9598</td>
<td></td>
</tr>
<tr>
<td><a href="https://www">https://www</a> washingtonconnection.org/home/publicaccessdirectory.aspx</td>
<td>• Locate an HBE In-person Assista/ Navigators or Broker</td>
<td></td>
</tr>
<tr>
<td>• Constituent Relations 1-800-865-7801</td>
<td><a href="http://www.wahbexchange.org/files/7114/042f3784HBE_CertAssist_0614_InPrep_Assists_Agencies.pdf">http://www.wahbexchange.org/files/7114/042f3784HBE_CertAssist_0614_InPrep_Assists_Agencies.pdf</a></td>
<td></td>
</tr>
<tr>
<td>• Medicaid programs for clients with developmental disabilities</td>
<td>• Request an appeal for denial of HPTC/QHP, Special Enrollment:</td>
<td></td>
</tr>
<tr>
<td>• In home care</td>
<td><a href="http://www.wahbexchange.org/appeals">http://www.wahbexchange.org/appeals</a> or call for information: 1-855-889-2512</td>
<td></td>
</tr>
<tr>
<td>• Medicaid personal care</td>
<td>• Questions about becoming a certified assistant</td>
<td></td>
</tr>
<tr>
<td>• Request an appeal for LTC programs</td>
<td>• To request outreach materials and presentations</td>
<td></td>
</tr>
<tr>
<td>• WASHCAP (Food for households whose only income is SSI/SSA)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Residential Care Services</td>
<td>• HFP password reset or lockout: 1-855-256-9598</td>
<td></td>
</tr>
<tr>
<td>• Residential mental health eligibility questions</td>
<td>• For system functionality visit Healthplanfinder Status Center:</td>
<td></td>
</tr>
</tbody>
</table>

**Suggested Script for General Lead-in:** This is an issue that (agency) can help you with. You can do this online at (agency website). The phone number is (xxx-xxx-xxxx) and the information you will need to have available is (insert agency specific information). If you prefer to call them, the hours of operation are (from 8:00 am to 8:00 pm) and again that phone number is (xxx-xxx-xxxx).

**JP Morgan/Chase**
1-888-329-9271 (24hrs)
www.ucard.chase.com

- EBT Card Replacement and Balance information
- Change PIN number
- Client will need their EBT card number and Social Security Number

**Office of Financial Recovery**
1-800-562-6114

- DSHE Overpayments
- Premium Payments
- Estate Recovery

**Tribal Resources**
- DSHE- Office of Indian Policy – (360) 902-7706
- HBE- Tribal Liaison – Sheryl Lowe, 360-688-7749 or sheryl.lowe@wahbexchange.org
- HCA- Tribal Affairs Administrator – Jessie Dean 360-725-1649 or jessie.dean@hca.wa.gov

Last Updated 11/12/2014

Referral Communications Committee

Created by cross-agency referral committee; available online at: http://www.hca.wa.gov/hcr/me/Documents/customer_support_center_referrals.pdf
Levels of Healthplanfinder Customer Assistance

• Customer Support Center (CSC) Representatives—IPAs---Navigators---Community Assisters—Tribal Assisters—Brokers--HCA Community partners – Sponsorship Representatives

• CSC Supervisors---Broker Support Team---Lead Organizations

• CSC Management----Broker Management IPA Management – Operations Specialists

• Client Specialist Team
Referral Sources

The Client Specialist team receives high priority referrals from:

- Congressional Delegation
- Governor
- Legislators
- Attorney General
- State Agency Partners
  - OIC
  - HCA
- Exchange Board
- Customer Support Center
- Consumer Assisters (IPAs/Navigators; Lead Orgs, Brokers)
- Carriers
- Appeals Team
- Consumers
Exchange Online Complaint Form

▪ Consumer visits [www.complaints.wahbexchange.org](http://www.complaints.wahbexchange.org), fills out and submits the file a complaint web-form

▪ Consumer will receive a confirmation after submitting their complaint

▪ Consumer complaints are monitored and triaged by a communications program specialist
  ▪ High priority requests that require immediate attention and turnaround are forwarded to the Client Specialist team
  ▪ Complaints receive remediation response from communications
  ▪ Information from customer support FAQs or other self-service resources are provided to the customer when applicable