

Washington Health Benefit Exchange

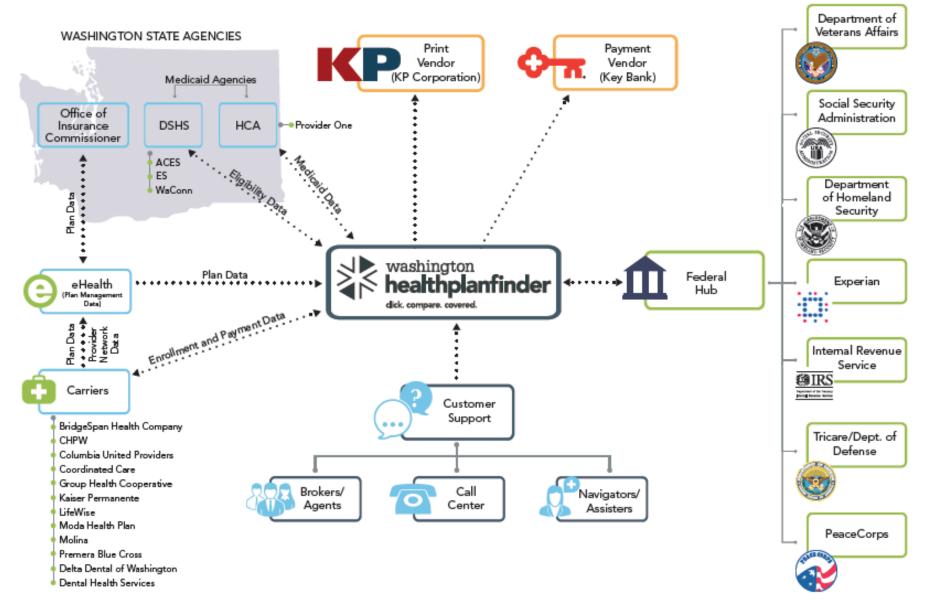
Health Care & Wellness Work Session: Exchange Overview January 14, 2014 Richard Onizuka, PhD, CEO

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.

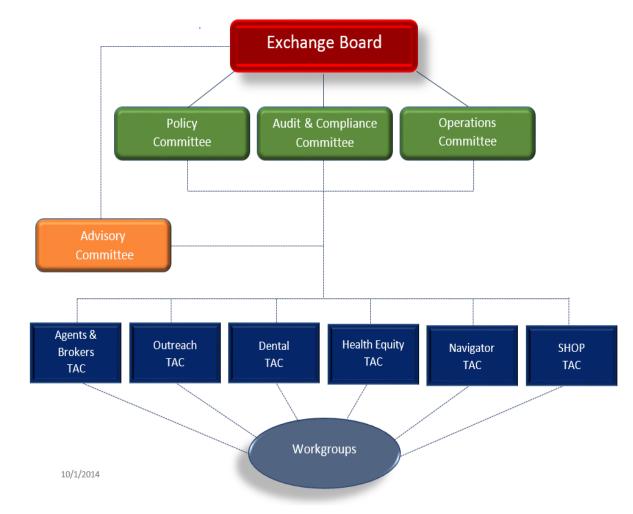






Exchange Governance

- 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





Exchange Funding

Operation costs through 2014 are fully funded by Federal Grants

The Exchange must become self-sustaining in 2015

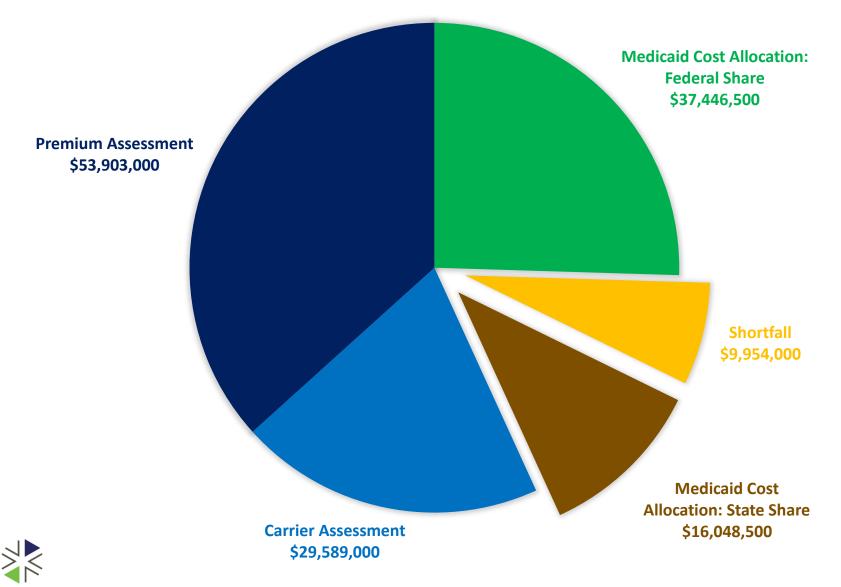
Exchange funding is appropriated by the legislature

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)



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

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



2015 Open Enrollment (Nov. 15- Feb. 15)

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







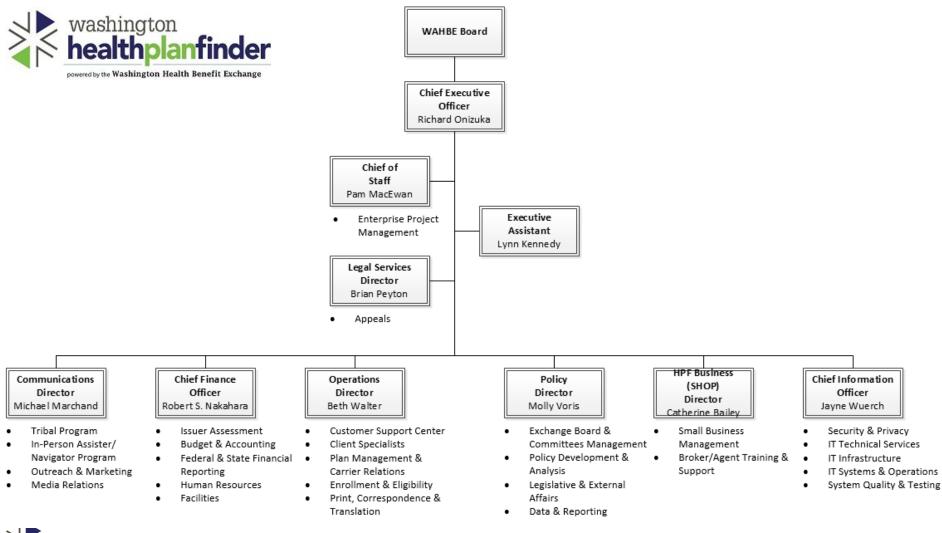
Appendix

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



Exchange Organizational Chart

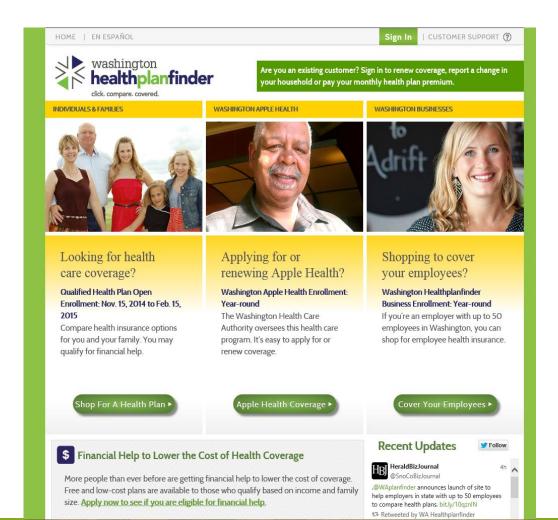




Real People, Real Stories

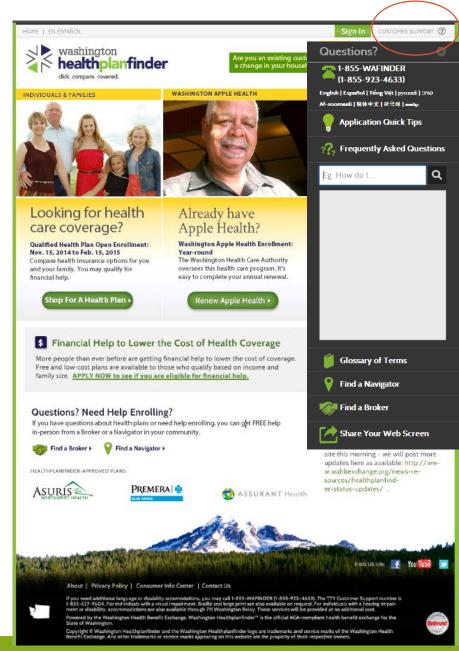
The new *Healthplanfinder* homepage features personal, customer stories of those who were positively impacted by health care reform, including:

- 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."





Customer Support





Applying for Coverage in *Healthplanfinder*



- Browse anonymously
- Apply
- Provide income information
- Review eligibility results
- Select a health plan
- Submit payment



Review Eligibility Results

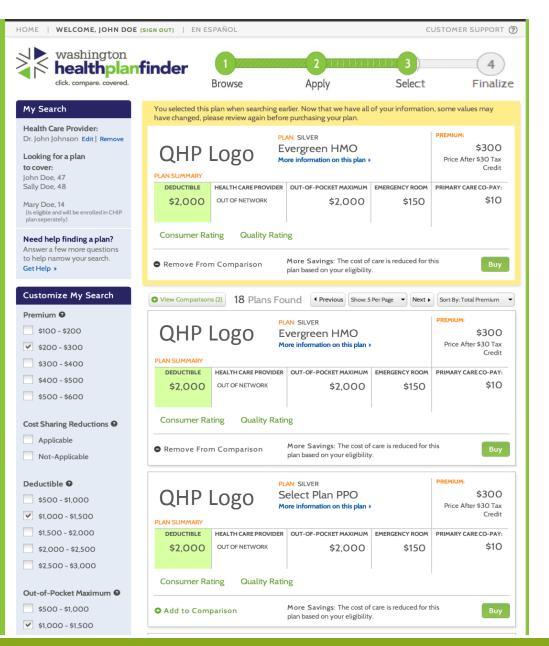




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Select a Health Plan





Exchange Federal Grant Funding Summary

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

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: http://wahbexchange.org/about-us/what-exchange/grants-federal-guidance/



Washington Health Benefit Exchange

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



Key Consumer Feedback/Complaint Avenues

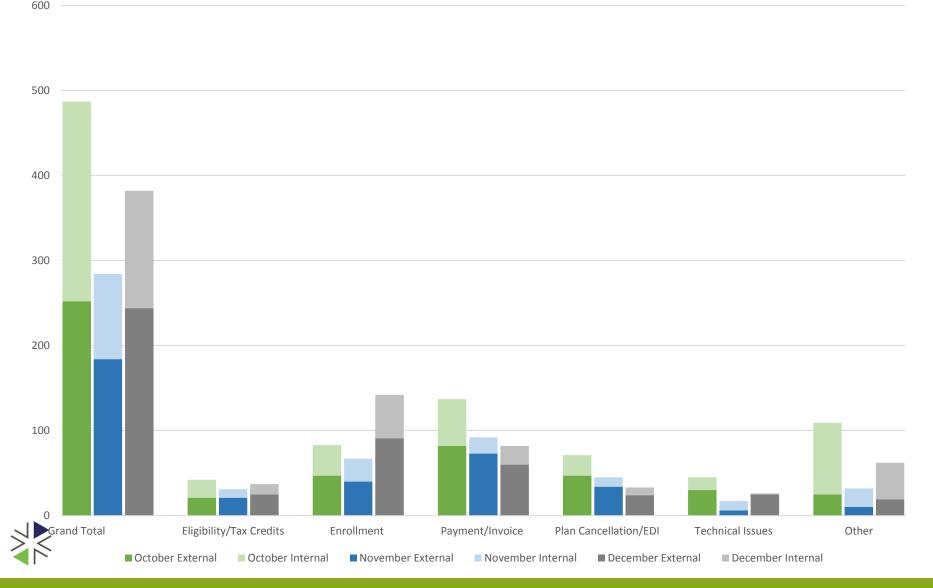
Feedback Source	Related Actions			
Call Center CSRs (500+)	 10,000 calls per day during open-enrollment Referrals to HCA, DSHS, OIC as needed Ticket created for any issue that cannot be resolved triaged to staff 			
Consumer Support Network Brokers (2300), IPAs (1900), Tribal Assisters (100), Community Partners (300)	 Communicate issues to staff liaisons IPA lead organizations can create tickets directly 			
External Partners Legislators, Governor's office, AG, OIC, and HCA	 Submit referrals through established channels, tracked, status updates provided 			
Online Form Direct access point online	 Available through website; connects with existing tracking and escalation process 			
Social Media Facebook, Twitter, etc.	 Monitored with escalation provided for medically necessary cases 			

High Priority Cases – Client Specialist Team

- All high-priority cases are escalated to our Client Specialist team. These include:
 - High-medical emergencies;
 - Pregnant women and children;
 - Emotionally sensitive and/or complicated cases; atypical cases
- How cases are submitted and tracked
 - Cases are tracked through a secure, centralized, case management system designed to follow, triage and process consumer issues
- How cases are worked
 - Specialists work 1:1 with consumer until issue is resolved; direct contact information provided to consumer
 - 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
 - oe.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





Appendix

Cross Agency Desk Aid

Departm	ent of Social and Health Servi	ces	Health Benefit Exchange		Health Care Authority		
Community Services Division Customer Service Contact Center	Home & Community Services Long Term Care (LTC)	Long-Term Care Specialty Unit	Washington Healthplanfinder Customer Support Center	Lead Organizations In-Person Assisters/ Navigators	Medical Assistance Customer Service Center (MACSC)	Medical Eligibility Determination Services (MEDS)	
1-877-501-2233 1-877-980-9220 (Answer Phone) www.washingtonconnection.org 1-888-338-7410 (FAX)	No call center at HCS. Contact your local office by checking at: http://adsaweb.dshs.wa.gov/hcs/maps .htm www.washingtonconnection.org	1-855-873-0642 www.washingtonconnection.org 1-855-645-8305 (FAX)	1-855-923-4633 www.wahealthpianfinder.org customersupport@wahloexchange.org 1-855-889-2266 (FAX)	Lead Organization Contact Information available at: http://wahikexchange.org/info- you/person-assisters/	1-800-562-3022 https://fortress.wa.gov/hca/p1cont actus/	1-855-823-9357 https://fortress.wa.gov/hca/magic ontactus/ContactUs.asex	
 Apply for, report changes or renew Food, Cash, and Child Care programs (SNAP, EBT, ABD/ HEN Referral, TANF, Refugee Assistance WorkFirst) Apply for Classic Medicaid programs, S8I, 65+, and disabled Request an appeal of Classic Medicaid, Food, Cash and Child Care programs Answer Phone: Automated system where clients can check their DSHS benefits For additional application assistance refer to the Public Access Directory for community partners: <u>https://www.washingtonconnection.org/</u> home/publicaccessdirectory.go Constituent Relations 1-800-865-7801 	 Long-term care nursing facility services In home care Assisted living or adult family home Medicaid personal care Request an appeal for LTC programs WASHCAP (Food for households whose only income is SSI/SSA) Residential Care Services 	 Medicaid programs for clients with developmental disabilities Hospice Healthcare for Workers with Disabilities (HWD) program (S08) Children's institutional (K01) Residential mental health eligibility questions 	 Apply for or renew health care coverage (families, children, pregnant women and single adults) Health Insurance Premium Tax Credit (HIPTC) questions Qualified Health Plans (QHP) questions Small Business Health Options (SHOP) questions- 1-855-256-9598 Locate an HBE In-person Assister / Navigator or Broker <u>http://wahlexchange.org/files/7314/0432/</u> 3784/HBE_CertAssist_061414InPrsn_ Asstr_Agencies.pdf Request an appeal for derial of HIPTC/QHP, Special Errollment: <u>www.wahlexchange.org/appeals</u> or call for information: 1-855-859-2512 	 For system functionality visit <u>Healthplanfinder Status</u> Center: http://wahloexchange.org/news- resources/healthplanfinder- status-updates/ If an IPA needs to submit a Zendesk ticket Questions about becoming a certified assister To request outreach materials and presentations HPF password reset or lockout: 1-855-256-9598 	 ProviderOne Client Services Card Provider billing and claims questions Apple Health Managed Care enrollment, and questions ProviderOne benefit coverage questions 	 Apple Health Modified Adjusted Gross Income (MAGI) Medicaid eligibility questions (families, children, pregnant women and single adults) Post-Eligibility Case Review questions or report changes Apple Health for Kids premium payment questions (CHIP) Request an appeal for Apple Health Programs 	

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.) 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 0:00 am to 0:00 pm) and again that phone number is (xxx-xxx.).

Hours of operation: 8:00 am - 5:00 pm, Monday - Friday (except state holidays). Please have your Client ID or Social Security Number available.	Hours of operation: 8:00 am – 5:00 pm, Monday – Friday (except state holidays). Please have your Client ID or Social Security Number available.	Hours of operation: 1 pm, Monday – Friday holidays). Please have your Cli Social Security Num	(except state ent ID or	Hours of operation: 7:30 am – 8:00 pm, Monday – Friday (except state holidays). Please have your HPF application ID or Social Security Number available.	Hours of operation ar 8:00 am – 5:00 pm, M (except holidays). For application issue the HPF application II	nday – Friday , please have	Hours of operation: 7:30 am – 5:00 pm, Monday - Friday (except state holidays). Please have your Application ID, Client ID, Provider One Client ID or Social Security Number available.	Hours of operation: 7:30 am – 7:00 pm Monday - Friday (except state holidays). Please have your Application ID, Client ID or Social Security Number available.	
JP Morgan/Chase 1-888-328-9271 (24hrs) <u>www.ucard.chase.com</u> • 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 • DSHS Overpayments • Premium Payments • Estate Recovery			Tribal Resources DSHS- Office of Indian Policy – (360) 902-7706 HBE- Tribal Liaison – Sheryl Lowe, 360-688-7749 or <u>sheryl.lowe@wahbexchange.org</u> HCA- Tribal Affairs Administrator – Jessie Dean 360-725-1649 or Jessie.dean@hca.wa.gov			

Last Updated 11/12/2014



Created by cross-agency referral committee; available online at:

http://www.hca.wa.gov/hcr/me/Documents/customer_support_center_referrals.pdf

Referral Communications Committee

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 <u>www.complaints.wahbexchange.org</u>, 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 selfservice resources are provided to the customer when applicable

