

Washington Health Benefit Exchange

House Health Care & Wellness Committee January 18, 2013

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Today's Agenda

- Overview of ACA and Exchange
- Current Exchange Budget and Projections
- Key Challenges and Upcoming Milestones



Impact Of The Affordable Care Act

Changes to private insurance, e.g.,

- Young adults on parent's policies to age 26
- Prohibit lifetime monetary caps
- Minimum spending on medical care (medical loss ratio)
- Closes the prescription "doughnut hole"
- Expands coverage
 - Expands Medicaid to 138%* of FPL
 - Exchanges



Exchange Basics

- State based exchange, established as "public private partnership separate and distinct from the state"
- Individuals >138% of FPL (tax credits and subsidies < 400% FPL), and small groups (2-50)
- "Qualified health plan" (QHP) offerings
- Metallic tiers of actuarial value
- Apples-to-apples comparisons for consumers, one-stop shop
- 10 essential health benefits
- Navigators, agents/brokers, customer support



Building The Exchange

2012

- Board begins governing authority
- ESSHB 2319 passed
 - Deloitte Consulting, LLP, signs on as system integrator

2011

- HCA receives one-year \$22.9 million grant to design and develop Exchange
- SSB 5445 passed creating Exchange as "public private partnership"
- Governor names Exchange Board members

- Exchange names first CEO and moves into new building
 - Washington becomes second Level 2 establishment grant recipient, \$128 million
 - Exchange moves onto own payroll and accounting systems
 - Sustainability plan submitted to Legislature
 - WA HBE receives conditional approval from HHS/CCIIO to operate the state exchange

2013

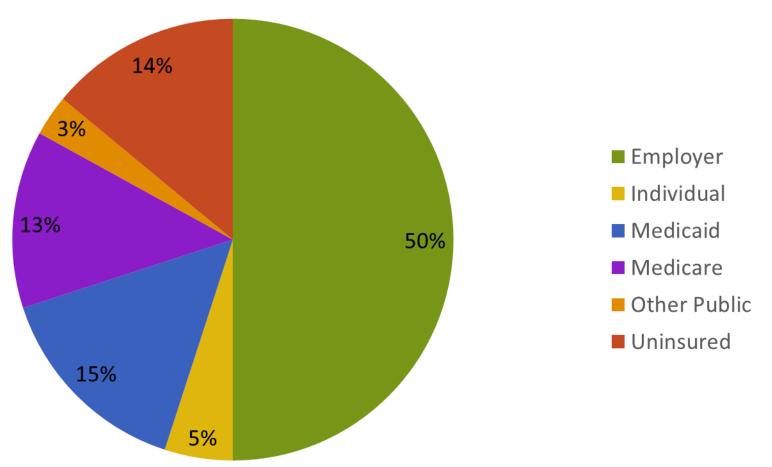
- Exchange must be certified by HHS
 - Additional legislative action taken as needed
 - Open Enrollment begins (October 1)

2014

- Coverage purchased in the Exchange begins
 - Open enrollment ends March 31.
 - Year 2 open enrollment in Oct.

Insurance Coverage Today*

Health Insurance Coverage in Washington State (2010-2011, pop. 6.7 million)





* Based on an analysis of the Census Bureau's March 2010 and 2011 Current Population Surveys. Health coverage estimates are from the American Community Survey (ACS)

Exchange Functions & Services

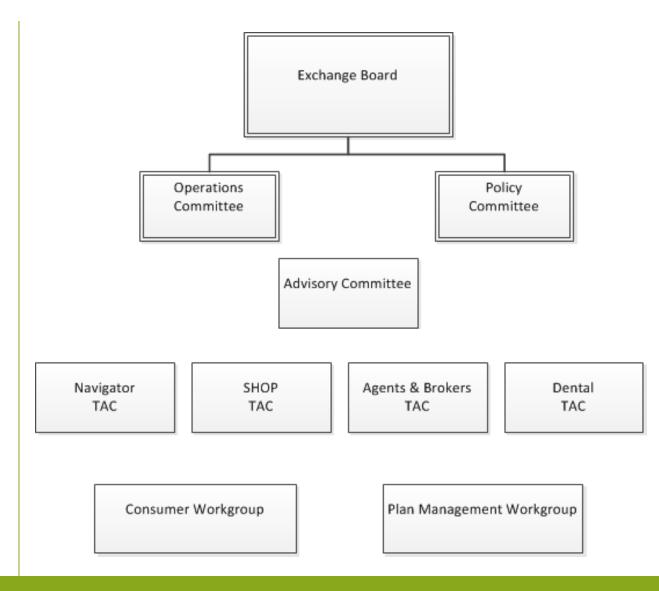




Exchange Governance Structure

Who is represented?

- Employee benefits specialists
- Health care finance specialists and economists
- Health consumer advocates
- Small business representatives
- Administrators from public and private health care
- Consumer advocates
- Health insurance carriers
- Health insurance brokers
- Health care providers
- Tribal representatives
- Technical experts
- Consumers
- Consumer advocates
- Health insurance carriers





Exchange Board Members

Eleven member, bi-partisan board assumed authority on March 15, 2012

Margaret Stanley – Chair, Retired Executive Director, Puget Sound Health Alliance

Steve Appel – Farmer, Past President of the Washington Farm Bureau

William Baldwin – Partner, The Partners Group

Donald Conant – General Manager, Valley Nut & Bolt, Assistant Professor

Doug Conrad – Professor, University of Washington

Melanie Curtice – Partner, Stoel Rives

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

*MaryAnne Lindeblad – HCA Director



Important Board Policy Decisions

Completed

Branding



- Criteria for qualified health plans (QHPs)
- Premium aggregation
- Consumer Rating System
- Pediatric Dental Benefits
- Sustainability report provided to Legislature
- Navigator program

Upcoming

Role of agents/brokers



Combined L1 & L2 Budgets and Projections (\$000's)

		2011 2012		012	2013		2014		
	2011-2014								
	Total	Budget	Actual at	_	Projected	Budget	Forecast	Budge	
	Budget	2011	Dec-11	2012	Dec-12	2013	2013	2014	2014
GROSS REVENUES									
Grant Revenue: Level 1	24,187	1,036	1,036	13,705	14,139	9,446	9,012		
Grant Revenue: Level 2	149,822			40,269	13,178	61,536	63,229	48,01	7 73,416
TOTAL GROSS REVENUES	174,009	1,036	1,036	53,975	27,317	70,982	72,241	48,01	7 73,416
OPERATING EXPENSES Salaries & Benefits	30,080	127	127	5,008	1,215	13,400	12,223	11,54	
Marketing & Advertising	9,379			1,407		4,220	5,260	3,751	
Consulting & Professional Service	23,409			7,928	230	8,724	10,017	6,757	
IT Infrastructure & Communications	1,543	_		802		449	549	293	994
General & Administrative	2,315	8	8	645	226	710	1,399	951	900
Facilities Related	3,566			1,035	461	1,837	3,063	694	700
Appeals Related	450							450	1,150
Systems Related	103,268	900	900	37,150	25,186	41,641	39,730	23,57	
TOTAL OPERATING EXPENSE	174,009	1,036	1,036	53,975	27,317	70,982	72,241	48,01	7 73,416
FUNDING SOURCE									
Medicaid Allocation	23,214			10,138	595	11,164	11,310	1,912	11,310
Federal Grant	150,795	1,036	1,036	43,836	26,722	, 59,818	60,931	46,10	-
TOTAL FUNDING SOURCE	174,009	1,036	1,036	53,975	27,317	70,982	72,241	48,01	
			-		-				
	DOLLARS SPENT	-	1,036		28,353		100,594		174,009
			1%		16%		58%		100%
	DOLLARS REMA	INING	172,973		145,656		73,416		
			99%		84%		42%		0%

Self-Sustainability Funding Options

To fund operation of the Exchange the Legislature would take the following action:

Insurance Premium Assessment

• Enact a premium tax assessment totaling half a percent (0.5%) effective Jan. 1, 2014 and, effective Jan. 1, 2015 and thereafter, totaling one percent (1.0%) of all premiums and prepayments for health care services received.

Repurpose of Existing Assessments (Hybrid)

• Effective Jan. 1, 2014, Authorize and apportion to the Exchange the premium tax collected on all premiums and prepayments for health care services attributable to the Exchange-generated premiums received. Any funding shortfalls shall be augmented by assessing a service charge payable by the Qualified Health Plans in the Exchange.

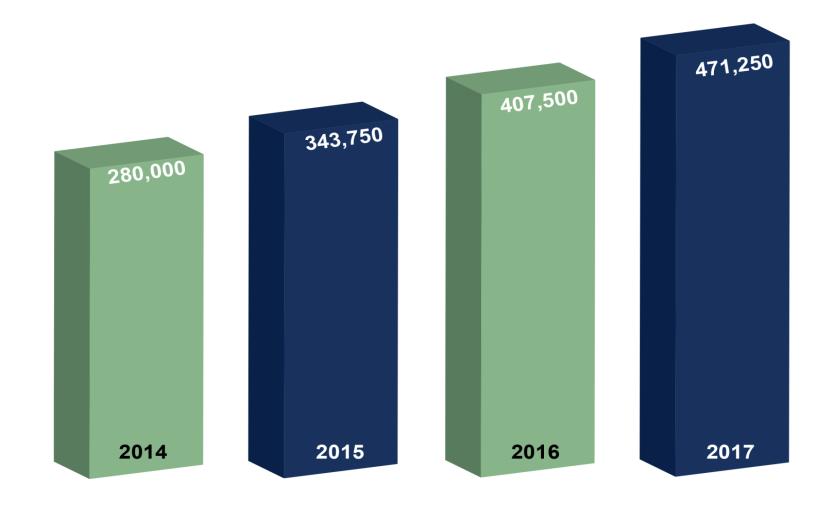
QHP Issuer-based Revenue Model

• Effective Jan. 1, 2014, assess a service charge payable solely by the Qualified Health Plans in the Exchange.



Membership Growth: "New" Members

PROJECTED EXCHANGE MEMBER ENROLLMENT (2014 – 2017 YEAR END)





Exchange Revenue Generation – 2015 (Based On 2015 Enrollment Forecast = 343,750)

New Revenue from Exchange Health Plan Premiums
 \$1.3 billion

New State Premium Tax Revenue (2%)

✓ \$26 million

Advanced Premium Tax Credit for Individuals

✓\$520 million - \$650 million

Reduction in Estimated \$1 Billion in Uncompensated Care

✓ Hidden cost: \$1,017 per insured family, \$368 individual



Budgeting for Self-Sustainability

	Self-Sustainability Based					
		<u>2015</u>		<u>2016</u>		<u>2017</u>
Key Performance Metrics (KPI)						
Members (Y/E)		343,750		407,500		471,250
Member Months		3,730,000		4,483,000		5,184,000
Aggegate Premiums to QHP's		\$1.3B		\$1.6B		\$1.8B
Projected Cash Disbursements						
Salary & Benefits	\$	9,109,000	\$	9,382,000	\$	9,663,000
Marketing & Advertising		5,589,000		4,645,000		3,985,000
Consulting & Professional		4,764,000		3,447,000		2,532,000
IT Infrastructure & Communication		223,000		311,000		311,000
General & Administration		860,000		886,000		912,000
Facilities Related		668,000		672,000		676,000
Appeals Program		2,144,000		2,209,000		2,275,000
HBE Systems Related						
Customer Service / Call Center		12,732,000		14,972,000		16,951,000
Eligibility Related		1,110,000		1,300,000		1,451,000
System Integrator-Related WHBE Variable Costs		7,500,000		8,831,000		10,005,000
Shared System Build / Operation Costs		9,566,000		9,817,000		9,568,000
WHBE Systems Related-Total		30,908,000		34,920,000		37,975,000
WHBE Total Before Adjustments		54,265,000		56,472,000		58,329,000
Medicaid Offset		(3,187,000)		(2,884,000)		(2,671,000)
WHBE Total Expenditures	\$	51,078,000	\$	53,588,000	\$	55,658,000



Budgeting For Self-Sustainability

- Projected 2015 and beyond operating costs: \$50M
 Salaries and benefits 18%; customer service 25%; IT 15%
- Represents approximately 4% of premium
- PMPM of \$13.69 compares favorably with other exchanges
- Operating projections compare favorably with peer state exchanges



Peer State Budget Estimates (As Of 12/28/2012)

	MA (2012)	WA (2015 Est.)	MD (2015 Est.)	OR (2015 Est.)
State Population	6.6 M	6.8 M	5.8 M	3.8 M
Est. Exchange Expenses	\$34.87 M	\$51.08 M	\$34.92 M	\$68.5 M
РМРМ	\$13.48	\$13.69	\$16.75	\$17.58
Estimated Member Months	2.6 M	3.7 M	2.1 M	3.9M
Estimated Membership	240,000	343,750	177,080	324,900

Source Information:

MA: Commonwealth Health Insurance Connector Authority, July 12, 2012. www.mahealthconnector.org

WA: Sustainability Report <u>http://www.hca.wa.gov/hbe/documents/HBE_Sustainability_Report_120112.pdf;</u>, Report to the Washington State Legislature: Financing of the WHBE. December 1, 2012. <u>http://www.hca.wa.gov/hbe/documents/HBE_OC_121108_Presentation_Draft_Report_Leg.pdf</u>

MD: Maryland Health Benefit Exchange, Joint Committee on Exchange Financing, November 2, 2012. www.dhmh.maryland.gov/exchange

OR: Internal Communication with Cover Oregon on 12/.17/12



Key Challenges

Tight timeline – Oct. 1, 2013

- Federal dependencies and guidance
- IT flight path, trade off of managing scope and resources with fixed schedule

Delivery environment

Critical inter-agency interdependencies

Managing expectations

• Options deferred to 2.0 or 3.0

Complex authorizing environment



What to Look For

- New sets of federal guidance
- Conditional certification as a state based exchange
- Legislative debate on sustainability plan
- Late winter/early spring:
 - RFPs, applications for Navigators, in-person assisters, and QHPs
 - Marketing, outreach to ramp up
 - System testing to begin, first with other systems (integration testing), then user testing
- Enrollment numbers



More on the Exchange

http://www.hca.wa.gov/hbe

Includes information about:

- Exchange Board
- Legislation and grants
- Policy discussion
- TAC and stakeholder involvement
- IT systems development
- HHS guidance
- Listserv registration



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