Outline

- Overview and building of Exchange
- First year metrics
- Second year activities (2\textsuperscript{nd} Open Enrollment)
- Proposed budget and staffing
Exchange Overview

- One of 19 State-based Marketplaces (as of Jan 2014)
- Created as a “public private partnership separate and distinct from the state” in legislation in 2011
- Governed by open public meetings and public disclosure laws
- Responsible for managing the online health insurance marketplace, Washington Healthplanfinder
- Through Healthplanfinder, WA residents can obtain Medicaid or commercial health coverage, compare plan options, and qualify for federal subsidies to help pay for coverage. All renewals go through Healthplanfinder
- Washington Healthplanfinder launched on October 1, 2013
- Over 1.8M -- 1 in 4 – Washington residents have signed up for health insurance through Healthplanfinder.
The Exchange as a Business

Above the Surface
- The Washington Healthplanfinder
- Marketing, Advertising & Outreach
- Customer Support (Navigators, Brokers, Call Center)

Below the Surface
- Develop and Host Infrastructure
- Design, Develop, and support software application
- Build, Host and support infrastructure
- Maintain Connectivity with Federal and State Systems
- Protect Consumer Data
- Eligibility Determination and Tax Credits
- Review and Certify Qualified Health Plans
- Customer Support Management and Training
- Program Integrity
- Appeals Program
- Quality Rating System
Exchange Basics

▪ Entry point for Medicaid, Qualified Health Plans
▪ QHP: Individuals >138% of FPL and small groups (1-50)
▪ Tax credits available for individuals 138%-400% of FPL
▪ Cost sharing reductions available for <250% FPL
▪ Metallic tiers for different coverage levels
▪ Apples-to-apples comparisons for consumers, one-stop shop
▪ 10 essential health benefits
▪ Robust customer support network
  ▪ Spokane-based call center
  ▪ State-wide Navigator and Broker enrollment assistance programs
First Year Metrics
Enrollment by Age as of October, 2014

- <18: 4%
- 18-34: 23%
- 35-44: 17%
- 45-54: 22%
- 55-64: 34%
Enrollment by Metallic as of October, 2014

- Gold: 9%
- Silver: 54%
- Bronze: 37%
Enrollment by Carrier, October, 2014

- Premera, Premera MSP, Lifewise: 61%
- Group Health: 15%
- Coordinated Care: 17%
- Molina: 1%
- CHPW: 2%
- Bridgespan: 2%
- Kaiser NW: 2%

Total Enrollment: 100%
Enrollment by FPL as of October, 2014

- < 138% FPL: 4%
- 138% - 200% FPL: 38%
- 200% - 300% FPL: 29%
- 300% - 400% FPL: 14%
- > 400% FPL: 15%
2015 (2\textsuperscript{nd} Year)
2015 Exchange Plan Offerings

Increased carrier participation

• First statewide plan for small business marketplace
• 10 carriers offered on Exchange - 2 new to the individual Exchange

More plan choices

• Health literacy efforts to help consumers make informed decisions

Affordable plan options

• Record low 1.9 percent rate change

First year of QHP renewal process
2015 Submission Overview
Individual Market

10 Issuers | 82 Individual QHPs | 23 renewed / 59 new

Platinum
- 1 Issuer
- 5 Plans
- 0 Renewals
- 5 New

Gold
- 10 Issuers
- 18 Plans
- 6 Renewals
- 12 New

Silver
- 10 Issuers
- 29 Plans
- 8 Renewals
- 21 New

Bronze
- 10 Issuers
- 27 Plans
- 8 Renewals
- 19 New

Catastrophic
- 3 Issuers
- 3 Plans
- 1 Renewal
- 2 New
Individual QHP Market – Issuers per County

2014: 8 issuers, 46 plans
2015: 10 issuers, 90 plans (8 MSP)
New: More choice

Individual Market
2014: 1 Issuer, 5 plans
2015: 2 Issuers, 23 plans
New: Statewide market

Healthplanfinder Business/SHOP
2014: 5 Issuers, 5 Plans
2015: 5 issuers, 6 plans
New: High-level plans (85% AV)
# Current Status and Path Forward

**Early Indicators for 2015 Enrollment (November 15, 2014 – February 15, 2015)**

- 107,000 Qualified Health Plans (as of December 31, 2014)
- 471,602 new Medicaid adults

## Improving Performance
- Eligibility & Enrollment
- Quality Control
- Alignment with key agency partners (HCA, DSHS, OIC)

## Improving Technical Operations
- Architecture and Code review
- Change of onsite Deloitte management
- New data processing tool for EDI
- Enhanced software quality reviews

## Improving Consumer Experience
- Removal of premium aggregation
- New issues escalation/resolution process
- 1095A and tax filing preparation
Value to Residents, Value to State

• Real time eligibility (including renewal) determination

• Competitive marketplace
  • Cost of acquisition in individual market

• One door for public and private health insurance
  • Federal exchange does not facilitate Medicaid enrollment; charges 3.5% admin fee

• Statewide outreach, marketing, health literacy campaigns
  • WA specific messaging/partnerships (e.g., Seahawks)
  • Reaching ‘young invincibles’ & low-middle income families

• Federal subsidies obtained through Exchange
  o Over $300 million to help pay for premiums
  o Over $50 million to reduce consumer costs of hospital and provider visits

• Enrollment success; 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)
Percent Uninsured by County - 2013

Uninsured percentages
- <12.6%
- 12.6%-14.0%
- 14.1%-17.0%
- 17.0%

Healthcare Research Group, Office of Financial Management
Budget and Staffing
The Exchange is run by an 11-member, bi-partisan Board (Chair, 8 voting, 2 ex-officio)

Voting 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 fully funded by federal grants
- 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 carrier premium taxes (2%) collected from products sold in the Exchange during 2015
  - QHP/QDP carrier assessments ($4.19/$0.33 PMPM)
  - Reimbursement from HCA for providing Medicaid services (cost allocation formula)
## 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>
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<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>
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<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>
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<tr>
<td>2012/2013</td>
<td>Level 2</td>
<td>To design, develop, implement and support initial operations of Washington Healthplanfinder.</td>
<td>$157M</td>
<td>$18M*</td>
<td>May 2012 – Dec. 2015*</td>
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<tr>
<td>2013</td>
<td>Level 1B</td>
<td>To further design, develop and implement Washington Healthplanfinder.</td>
<td>$96M</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>$27M^</td>
<td>N/A</td>
<td>Jan. 2015 – Dec. 2015*</td>
</tr>
</tbody>
</table>

* Updated no-cost extension amount of $18M
~ Updated no-cost extension amount of $18M and approved Supplemental grant amount of $9M
^ Pending updated grant amount

Total amounts do not include additional funds provided through Medicaid cost-allocation.

Exchange Budget Request - Overview

Current Biennium (Jan 1 - June 30, $20M Budget)

State Biennial Budget (July 1, 2015 - June 30, 2017)

SFY 2015

SFY 2016

SFY 2017

Biennial Budget $147M
Proposed Revenue Sources: SFY 2016-2017 (assumes $147M)

- **Medicaid Cost Allocation: Federal Share**
  - $37,446,500

- **Medicaid Cost Allocation: State Share**
  - $16,048,500

- **Carrier Assessment**
  - $29,589,000

- **Shortfall**
  - $9,954,000

- **Premium Assessment**
  - $53,903,000
## Staff Distribution

<table>
<thead>
<tr>
<th>Full Time Staff</th>
<th>Count</th>
<th>Median Salary</th>
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<tbody>
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<tr>
<td>Program</td>
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<tr>
<td>Management</td>
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<td><strong>Total</strong></td>
<td><strong>145</strong></td>
<td><strong>$66,108</strong></td>
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</table>
# Exchange Budget Request

## Department Overview

<table>
<thead>
<tr>
<th>Function Area</th>
<th>HBE Baseline (Millions)</th>
<th>Key Assumptions</th>
</tr>
</thead>
</table>
| IT                             | $58                     | • O&M costs, License fees  
• System security  
• System enhancements |
| Operations                     | $49                     | • Call center  
• Printing and translation  
• Client specialist team  
• Reconciliation with carriers |
| Communications                 | $17                     | • Marketing  
• Outreach  
• Navigator support |
| Finance and Admin              | $14                     | • Mandated audits |
| Policy, SHOP, Legal, Exec.     | $9                      | • Appeals  
• Fed./State requirements (rating system, survey, etc.) |
| Total                          | $147                    | • Total allocated distribution is 64% HBE and 36% HCA |
SFY 2016-2017 HBE Budget Overview ($000’s)

<table>
<thead>
<tr>
<th>Deliverable Types</th>
<th>Breakout</th>
<th>Contractor</th>
<th>SFY 2016-2017</th>
</tr>
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<tbody>
<tr>
<td>System Enhancements</td>
<td></td>
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<td>$45,968</td>
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<tr>
<td>- Healthplanfinder</td>
<td>$36,995</td>
<td>Deloitte</td>
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<tr>
<td>- Eligibility Services</td>
<td>2,718</td>
<td>DSHS/ESA</td>
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<tr>
<td>- Other O&amp;M License Fees</td>
<td>6,255</td>
<td>Various</td>
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<tr>
<td>Call Center and Other Operational Services</td>
<td></td>
<td></td>
<td>$41,255</td>
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<tr>
<td>- Customer Service Center</td>
<td>$30,624</td>
<td>Faneuil</td>
<td></td>
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<tr>
<td>- Print Services</td>
<td>8,442</td>
<td>KP Corp</td>
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<tr>
<td>- Other Operational &amp; Consulting Services</td>
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<tr>
<td>Marketing, Outreach and IPAs</td>
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<tr>
<td>SHOP Services</td>
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<td>Financial, Policy, Exec and Legal Consulting</td>
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<tr>
<td>- Auditing/Accounting Services/Other</td>
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<tr>
<td>- Executive and Policy Services</td>
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<tr>
<td>Other Costs</td>
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<tr>
<td>- Salaries and Benefits (145 FTE)</td>
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<td><strong>Total Request</strong></td>
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<td>$146,941</td>
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## SFY 2016-2017 IT Budget Detail ($000’s)

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<th>Deliverable Types</th>
<th>Breakout</th>
<th>Contractor</th>
<th>SFY 2016-2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>IT Operations and Enhancements</strong></td>
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<td>$45,968</td>
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<tr>
<td>- Operations and Maintenance</td>
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<td>- HPF Support License Fee</td>
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<td>- HPF Releases/Enhancements</td>
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<td>Deloitte</td>
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<tr>
<td>- Eligibility License Fee</td>
<td>2,718</td>
<td>DSHS/ESA</td>
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<tr>
<td>- Waiting Room Page</td>
<td>201</td>
<td>Akamai Tech</td>
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<tr>
<td>- Plan Management/Provider Directory</td>
<td>3,437</td>
<td>eHealth</td>
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<tr>
<td>License Fee</td>
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<tr>
<td>- HPF Platform License Fee</td>
<td>2,300</td>
<td>Oracle</td>
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<tr>
<td>- Professional Services/Support License Fee</td>
<td>317</td>
<td>Microsoft</td>
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<td><strong>Other Costs</strong></td>
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<tr>
<td><strong>Total</strong></td>
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<td>$58,139</td>
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# SFY 2016-2017 Operations Budget Detail ($000’s)

<table>
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<tr>
<th>Deliverable Types</th>
<th>Breakout</th>
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<tbody>
<tr>
<td>Call Center and Other Operational Services</td>
<td></td>
<td></td>
<td>$41,255</td>
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<tr>
<td>- Customer Service Center</td>
<td>$30,624</td>
<td>Faneuil</td>
<td></td>
</tr>
<tr>
<td>- Print Services</td>
<td>8,442</td>
<td>KP Corp</td>
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<tr>
<td>- Document Management System</td>
<td>1,612</td>
<td>HCA</td>
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<td>- Translation</td>
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<td>LinguaLinx, Inc</td>
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## SFY 2016-2017 Communications Budget Detail ($000’s)

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<th>Deliverable Types</th>
<th>Breakout</th>
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<th>SFY 2016-2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Marketing and Outreach</strong></td>
<td></td>
<td>GMMB</td>
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<tr>
<td>- Media Buy - Exchange Marketing</td>
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<tr>
<td><strong>Contracts</strong></td>
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<td>Various</td>
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<tr>
<td>- IPA/Navigators</td>
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<tr>
<td><strong>Other Costs</strong></td>
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<td>- Equipment, Travel, etc.</td>
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SFY 2016-2017 Finance & Admin Budget Detail ($000’s)

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<th>Deliverable Types</th>
<th>Breakout</th>
<th>Contractor</th>
<th>SFY 2016-2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial and Audit Services</td>
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<td>$3,014</td>
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<tr>
<td>- External Audit - A-133</td>
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<td>Moss Adams</td>
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<tr>
<td>- Carrier Assessment Invoicing</td>
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<td>BMI</td>
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<tr>
<td>- Legislative Mandated Performance Audit</td>
<td>1,537</td>
<td>State Auditor's Office</td>
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<tr>
<td>- Financial System O&amp;M</td>
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<tr>
<td>- Other</td>
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SFY 2016-2017 Policy Budget Detail ($000’s)

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<th>Deliverable Types</th>
<th>Breakout</th>
<th>Contractor</th>
<th>SFY 2016-2017</th>
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</thead>
<tbody>
<tr>
<td>Consulting</td>
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<td>$330</td>
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<tr>
<td>- Actuarial</td>
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<td>Milliman</td>
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<td>- Consumer Rating System</td>
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<td>- Quality Rating System</td>
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<td>- Consumer Survey</td>
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<tr>
<td>- Equipment, Travel, etc.</td>
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SFY 2016-2017 SHOP Budget Detail ($000’s)

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<tr>
<th>Deliverable Types</th>
<th>Breakout</th>
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<th>SFY 2016-2017</th>
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</thead>
<tbody>
<tr>
<td>Consulting</td>
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<td>$459</td>
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<tr>
<td>- Agent/Broker CSR</td>
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<td>Ciber</td>
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<tr>
<td>- Agent/Broker CSR</td>
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</tr>
<tr>
<td>- Equipment, Travel, etc.</td>
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</tr>
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</table>

**Total**                      |          |             | **$2,876**    |
## SFY 2016-2017 Legal Budget Detail ($000’s)

<table>
<thead>
<tr>
<th>Deliverable Types</th>
<th>Breakout</th>
<th>Contractor</th>
<th>SFY 2016-2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Services</td>
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</tr>
<tr>
<td>- Presiding Officers (4)</td>
<td>$211</td>
<td>Various</td>
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<td>- Attorney General's Office</td>
<td>105</td>
<td>AGO</td>
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<tr>
<td>- Outside Legal Counsel</td>
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<td>TBD</td>
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<td>Other Costs</td>
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<tr>
<td>- Salaries and Benefits (7 FTE)</td>
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<td>- Rent, Utilities, etc.</td>
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<tr>
<td>- Equipment, Travel, etc.</td>
<td>118</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>$2,051</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## SFY 2016-2017 Executive Office Budget Detail ($000’s)

<table>
<thead>
<tr>
<th>Deliverable Types</th>
<th>Breakout</th>
<th>Contractor</th>
<th>SFY 2016-2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consulting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Executive Consulting</td>
<td>$139</td>
<td>TBD</td>
<td>$139</td>
</tr>
<tr>
<td>Other Costs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Salaries and Benefits (4 FTE)</td>
<td>$1,465</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Rent, Utilities, etc.</td>
<td>63</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Equipment, Travel, etc.</td>
<td>67</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td>$1,734</td>
</tr>
</tbody>
</table>
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
Exchange Operational Requirements

**Required**

- Streamlined application & eligibility determination
- Call center
- Navigator program
- Plan certification
- Pediatric dental
- Consumer survey
- Consumer rating system
- State Audit
- Appeals Program
- SHOP/WA HPF Business
- Printing for required notices
- Translation/Interpreter services
- Data reporting to federal government
- Reconciliation of enrollment information with carriers

**Not Required**

- Outreach and marketing
- Specialized broker support
- Post-eligibility referrals to WaConn (classic Medicaid, etc.)
- Consumer decision/shopping tools (plan display features, etc.)
- Provider directory
- Adult dental
- Premium aggregation and invoicing
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

Search for a Navigator or Broker

Navigator Search

Healthplanfinder has a network of support across Washington State. Please use the search fields below to find a Navigator who, at no additional cost, can help you find, compare and select a health plan.

<table>
<thead>
<tr>
<th>ORGANIZATION NAME</th>
<th>LAST NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eg: ABC Navigator</td>
<td>Eg: Smith</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ZIP</th>
<th>SERVICE LANGUAGE(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eg: 12345</td>
<td>- Select an Option -</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HELP REQUEST TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Select an Option -</td>
</tr>
</tbody>
</table>

Notice:
You must create a Washington Healthplanfinder account and provide your contact information in the “About You” screen in order for the Navigator that you select to be able to contact you. Alternatively, you can contact the Navigator using their contact information provided on screen.
Applying for Coverage in *Healthplanfinder*

1. **Browse**
   - Browse anonymously

2. **Apply**
   - Apply

3. **Select**
   - Provide income information
   - Review eligibility results
   - Select a health plan

4. **Finalize**
   - Submit payment
Review Eligibility Results

[Image of a webpage showing eligibility results for a health plan]

- **Anthony Jones**
  - Eligible for a Qualified Health Plan.
  - Coverage Dates: 02/01/2015 to 02/28/2015.
  - Renewal Date: N/A

- **Emma Jones**
  - Eligible for a Qualified Health Plan.
  - Coverage Dates: 02/01/2015 to 02/28/2015.
  - Renewal Date: N/A

- **Alex Jones**
  - Eligible for a Qualified Health Plan.
  - Coverage Dates: 03/01/2015 to 03/31/2015.
  - Renewal Date: N/A

**Health Insurance Premium Tax Credits**

This tax unit has been approved for a $300 tax credit, which can be used to help lower the cost of insurance.

<table>
<thead>
<tr>
<th>Tax Unit 1</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>

**Coverage Period:** 01/01/2015 - 01/28/2015

**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.
## Compare Plans

### Compare and Select a Plan

All plans include preventive care services at no-cost (including periodic health exams, OB-GYN exam, well baby visit, immunizations, etc.). Costs listed below are in Network unless otherwise noted.

### Coverage Summary: Having a Baby and Managing Type 2 Diabetes

<table>
<thead>
<tr>
<th>Plan Type</th>
<th>Ambetter Essential Care</th>
<th>Core Flex Silver</th>
<th>QHP BridgeSpan Exchange Gold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualifier</td>
<td>QHP Logo</td>
<td>QHP Logo</td>
<td>QHP Logo</td>
</tr>
</tbody>
</table>

### Quick Glance

<table>
<thead>
<tr>
<th>Plan Type</th>
<th>Ambetter Essential Care</th>
<th>Core Flex Silver</th>
<th>QHP BridgeSpan Exchange Gold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly Premium</td>
<td>$174.21</td>
<td>$258.66</td>
<td>$315.90</td>
</tr>
<tr>
<td>Your Estimated Cost</td>
<td>$174.21</td>
<td>$258.66</td>
<td>$315.90</td>
</tr>
<tr>
<td>Plan Type</td>
<td>Health Maintenance Organization (HMO)</td>
<td>Health Maintenance Organization (HMO)</td>
<td>Preferred Provider Organization (PPO)</td>
</tr>
<tr>
<td>Plan Metal Level</td>
<td>BRONZE</td>
<td>SILVER</td>
<td>GOLD</td>
</tr>
</tbody>
</table>

### Out of Pocket Costs

<table>
<thead>
<tr>
<th>Plan Type</th>
<th>Ambetter Essential Care</th>
<th>Core Flex Silver</th>
<th>QHP BridgeSpan Exchange Gold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Deductible</td>
<td>$6,500 Individual / $13,000 Family</td>
<td>$1,250 Individual / $2,500 Family</td>
<td>$0.00 Individual / $2,000 Family</td>
</tr>
<tr>
<td>Annual Max Deductible</td>
<td>$6,500 Individual / $13,000 Family</td>
<td>$1,250 Individual / $2,500 Family</td>
<td>$0.00 Individual / $2,000 Family</td>
</tr>
</tbody>
</table>

### Additional Information

- **Office Visit for Primary Care:** No Charge after deductible
- **Office Visit for Specialist:** No Charge after deductible
- **Prescription Drug Deductible:** Included in Annual Deductible
- **Emergency Room:** No Charge after deductible
- **Out Patient Lab/X-ray:** No Charge after deductible
- **Out Patient Surgery:** No Charge after deductible
- **Hospitalization:** No Charge after deductible
- **Health Savings Account Eligible:** No

**See More Details**
Select a Health Plan

You selected this plan when searching earlier. Now that we have all of your information, some values may have changed, please review again before purchasing your plan.

**QHP Logo**

**Plan: Silver**

**Evergreen HMO**

More Information on this plan →

**Premium:**

$300

Price After $30 Tax Credit

**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.

**QHP Logo**

**Plan: Silver**

**Select Plan PPO**

More Information on this plan →

**Premium:**

$300

Price After $30 Tax Credit

**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.

**QHP Logo**

**Plan: Silver**

**Select Plan HMO**

More Information on this plan →

**Premium:**

$300

Price After $30 Tax Credit

**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.
Health Literacy Vision

All Washington residents know how and where to access health insurance. All Washington residents understand their health insurance options, their rights, their cost, their responsibilities and their coverage. All Washington residents know the value of health insurance in staying healthy across the lifespan.