# Washington Health Benefit Exchange Legislative Report: Annual Strategic Plan Update

Submitted September 30, 2020



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## A BRIEF BACKGROUND ON THE EXCHANGE

Washington Health Benefit Exchange (Exchange) was established by the legislature in 2011 as a public-private partnership that operates the *Washington Healthplanfinder*, the online eligibility and enrollment portal now used by one in four Washington residents to obtain health and dental coverage. *Washington Healthplanfinder* allows customers to find, compare and enroll in health insurance coverage and gain access to federal tax credits, reduced cost sharing, and eligibility and enrollment into Washington Apple Health (Medicaid program).

The mission of the Exchange is as follows:



The Washington Health Benefit Exchange seeks to redefine people's experience with health care by radically improving how Washingtonians secure health insurance through innovative and practical solutions and an easy-to-use customer experience. These are reflected in our values of integrity, respect, equity, and transparency as it relates to those we work with and those we serve.

In carrying out the mission, the Exchange works closely with the governor's office, <u>Health Care Authority (HCA)</u>, <u>Office of the Insurance Commissioner (OIC)</u> and the <u>Department of Social and Health Services (DSHS)</u> to identify and achieve our goals.

The Exchange is also committed to identifying and reaching out to groups at risk for obstacles to access coverage, which includes supporting those who need assistance in overcoming barriers to seek, find, and use their health insurance coverage. Specifically, the Exchange embraced the following equity statement in 2018:



Equity is a fundamental pillar to the society we seek to build. The process of advancing toward equity will be disruptive and demands vigilance, dismantling deeply entrenched systems of privilege and oppression. We must focus our efforts on people and places where needs are greatest, especially communities of color, and go beyond remedying a particular inequity to address all determinants of health.

Our goal is that all Washingtonians have full and equal access to opportunities, power and resources to achieve their full potential.

## **EXCHANGE GOVERNANCE**

The Exchange is governed by an 11-member bipartisan board comprised of a chair and eight voting members appointed by the Governor. Board members are nominated by the Republican and Democratic caucuses in both the Washington State House of Representatives and Senate, and are appointed by the Governor. The Director of the Health Care Authority and the Insurance Commissioner are ex-officio, non-voting board members. Numerous committees and workgroups – including an Advisory Committee, Health Equity Technical Advisory Committee, Tribal Advisory Workgroup, and Consumer Workgroup – also advise the Board in key program areas.<sup>1</sup>

#### Current Exchange Board members are:

- Chair: Ron Sims, retired Deputy Secretary for the U.S. Department of Housing and Urban Development and former King County Executive
- April Betts Gibson, Regional Executive Director, Proliance Surgeons
- Don Conant, General Manager at Valley Nut and Bolt and Assistant Professor in the School of Business at St. Martin's University
- Melissa Cunningham, Corporate Counsel, Physicians Insurance
- Diana Avalos-Leos, Manager of Community Health Workers and Programs, SW Washington Accountable Community of Health
- Maureen McLaughlin, Independent Hospital and Health Care Professional
- Hiroshi Nakano, Director of Value Based Care at Valley Medical Center
- John Schapman, Deputy Director, North Central Accountable Community of Health
- Mark Stensager, Retired Health System Administrator
- Ex-Officio: Mike Kreidler, Washington State Insurance Commissioner
- Ex-Officio: Susan Birch, Director, Washington State Health Care Authority

The Exchange budget is appropriated by the legislature. The Exchange is also required by the legislature to be self-sustaining, defined in statute as "capable of operating with revenue attributable to the operations of the exchange." Current revenue sources include: the existing two percent premium tax on health insurance premiums for qualified health plans sold through Washington Healthplanfinder; reimbursement for activities performed on behalf of Washington Apple Health (the state's Medicaid program); and a carrier assessment on products sold in the marketplace. The Exchange's current budget is approximately \$60 million a year.<sup>2</sup>



The Exchange Board at the state capitol January 2020.

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<sup>1</sup> More information about the eight current Exchange Committees and Workgroups is available at: https://www.wahbexchange.org/about-the-exchange/committees-and-workgroups/.

<sup>2</sup> Additional information about how the Exchange is funding and allocating resources to pursue desired goals and outcomes is available at: <a href="https://www.wahbexchange.org/about-the-exchange/what-is-the-exchange/budget-finance/">https://www.wahbexchange.org/about-the-exchange/what-is-the-exchange/budget-finance/</a>.

## **EXCHANGE TODAY**

The Exchange marketplace fulfills a critical need for Washington residents by providing a safety net for those who: lose employer based coverage, work for a small business that is unable to provide health insurance, are self-employed, participate in the gig economy, work seasonally, or who do not yet qualify for Medicare. In 27 counties, 30% or more of the residents under 65 use *Washington Healthplanfinder* to get covered.

Overall, Washington Healthplanfinder serves about one in four Washingtonians with 1.5 million enrolled in Washington Apple Health (WAH) and an additional 200,000 in private health insurance.

Over 80 percent of the total individual health insurance market in Washington state purchases their coverage through *Washington Healthplanfinder*.

Since our launch in October 2013, the Exchange has connected thousands of customers to federal subsidies that help them purchase and use their private coverage. In 2019 alone, over \$617 million in federal premium tax credits were obtained through *Washington Healthplanfinder*.

The Exchange continues to improve and streamline the enrollment experience for all *Washington Healthplanfinder* customers and develops tools that help customers compare and select health and dental coverage.

The Exchange's efforts have had a profound impact on the state's uninsured rate, which dropped from 14 percent in 2013 to 5.5 percent as of 2017. The Exchange has a network of over 2,500 assisters across the state who provide outreach, education, and in-person enrollment assistance to Washington Healthplanfinder customers. These assisters include Navigators, brokers, tribal assisters, and organizations who represent and support a multitude of diverse populations and communities throughout Washington State. The Exchange also operates a state-of-the-art Spokane valley-based call center that answered over 180,000 customer calls during open-enrollment, while offering language assistance in over 175 languages and online chat support.

In the face of the COVID-19 pandemic, the Exchange provides a critical service for the significant and growing unmet need for health coverage. More than one million workers in Washington have filed unemployment insurance claims. Among the newly unemployed, the uninsured rate has increased from 10.5% before the pandemic to 44% as of August 2020. Washington's Exchange was the first in the country to open a Special Enrollment Period (SEP) to help the uninsured in response to the COVID-19 pandemic and saw 22,000 customers sign up for coverage in two months. The Exchange also used its authority as a state-based marketplace to conduct specific outreach to and extend the typical 60-day enrollment window for those losing coverage during the plan year.

This unprecedented health emergency has exacerbated the need for improved programs and systems to help people find, secure, enroll and pay for health insurance. These are issues that will require long-term solutions to meet the needs of those most impacted in the newly uninsured arena, including Black, Indigenous and People of Color, those at a variety of income levels, and members or our state's small business community who want to help their employees obtain health insurance coverage.

<sup>4</sup> Office of Financial Management, "Estimated Impact of COVID-19 on Washington State's Health Coverage - Sept. 9, 2020" available at: <a href="https://www.ofm.wa.gov/washington-data-research/health-care">https://www.ofm.wa.gov/washington-data-research/health-care</a>.

<sup>3</sup> Counties where 30% or more of those <65 obtain coverage through *Washington Healthplanfinder*: Adams (49%); Asotin (36%); Benton (30%); Chelan (36%); Clallam (36%); Columbia (32%); Cowlitz (36%); Douglas (34%); Ferry (39%); Franklin (37%); Garfield (32%); Grant (39%); Grays Harbor (38%); Jefferson (38%); Kilckitat (36%); Lewis (37%); Lincoln (36%); Mason (33%); Okanogan (46%); Pacific (41%); Pend Orielle (40%); San Juan (30%); Skagit (31%); Spokane (33%); Stevens (37%); Wahkiakum (39%); Yakima (44%).

## YEAR-IN-REVIEW

Over the course of the last year, the Exchange continued to set and reach several important goals and milestones. This is best represented by, but is not limited to, a number of enrollment, implementation and equity achievements that reflect the Exchange's ability to adapt to the needs of the customer and a shifting health coverage environment while maintaining fiscal sustainability. The 2019-20 highlights include:

#### Connecting Customers with Coverage

- Conducting our seventh successful open enrollment with over 191,000 enrollees obtaining coverage
  - 52,860 enrollees received help through Smart Planfinder, a decision support tool that is part of the online application process
  - Enrollment assistance provided by over 1,500 registered brokers and 1,000 navigators, tribal assisters, and certified application counselors
  - Customer support center answered over 180,000 customer service calls during open enrollment
  - Year-round engagement with individuals needing health insurance coverage including those moving between the Washington Apple Health (Medicaid) program and the individual market; losing employer coverage; seeking tax information or documentation; and individuals experiencing events that trigger a special enrollment period
  - More than 43,000 documents uploaded and 18,000 applications completed through the WAPlanfinder mobile app





Navigators at an enrollment fair answering customer questions.

- Executing an effective COVID-19 response
  - o Coordinating closely with Exchange carriers, and state agency partners to develop, implement and communicate protections for *Washington Healthplanfinder* customers
  - o Opened the first uninsured SEP in the country and executed a successful outreach campaign that reached newer, younger, and more racially diverse customers
  - o Partnering with business community to engage individuals and families losing their employer sponsored coverage and extended 60-day enrollment window for those losing coverage.
  - o Partnering with the state's Employment Security Department (ESD) to reach the newly unemployed, including work on the frontline with their Rapid Response team

#### Bringing Cascade Care to Market

- Conceptualizing and designing new standard benefit plan designs, enabling people to get better value and access to care through lower deductibles and more benefits starting with the first dollar paid for coverage, including doctor's visits, prescription drugs, and mental health services.
- Launching the first public option offerings in the nation, introducing new products designed to stem the rising tide of premium costs and deductibles, and laying the foundation for a more competitive marketplace.
- Leading and cross collaborating with the Health Care Authority and Office of the Insurance Commissioner to create new plan designs, support the procurement process for public option plans, and secure carrier participation and approval of products.
- Overseeing an inclusive and comprehensive stakeholdering process that brought together individuals and organizations from around the health care arena.

## Amplifying Diversity, Equity and Inclusion (DEI)

- Expanding work of the Exchange's Health Equity technical advisory committee to monitor outreach and enrollment efforts through equity measures and benchmarks and advise the Exchange in an effort to build out core internal DEI components.
- Developing an organization-wide DEI action plan, driven by the Exchange DEI Director, that includes comprehensive training on bias and other core competencies for all Exchange leadership and staff.
- Leaning into social determinants of health to further address upstream obstacles to health equity and barriers to access to health coverage identified by on-the-ground assisters and partners.
- Mapping procurement efforts to reflect DEI in contractor and vendor work with the Exchange, including coordination with the state's Office of Minority and Women's Business Enterprises to bring underrepresented businesses into the procurement participation process.

## FIVE-YEAR STRATEGIC PLAN

The Exchange's strategic plan is continually evolving, as the organization strives to increase its potential and meet the needs of each of our customers. The current goals and strategies are to:

#### Improve health coverage, affordability, care and outcomes

- o Improve Cascade Care both standard plans and public option to deliver affordability, plan options and value for our consumers
- o Develop strategies to assist vulnerable populations to reduce the likelihood of experiencing a coverage gap
- o Engage in statewide initiatives to address the underlying cost of care as an affordability and value strategy for consumers

### Advance diversity, equity and inclusion (DEI) to narrow health disparities, especially in communities of color

- o Develop and engage in a model for Exchange leadership in addressing the social determinants of health, ensuring public health is a key design element
- o Drive Exchange decisions using DEI principles and an in-depth understanding of our marginalized consumers to improve health care access by asking marginalized communities what they need
- o Increase the diversity of the Exchange Board, managers and leadership to reflect the people we serve and increase the cultural humility of our Board, leadership, and staff

#### Leverage the success of HPF technology platform to strategically expand offered services

- o Develop strategies to retain and grow customer use of the Exchange, including options for future Exchange-offered products and services
- o Focus on innovative customer-based solutions, including feasibility of serving customers who are transitioning to Medicare
- o Partner with state agencies to reuse our technology to improve customers' experience with health care

## Expand innovative approaches to drive health system excellence

- o Introduce and foster innovative initiatives to dramatically improve customer experience and engagement
- o Leverage and build upon the Exchange's consumer networks to empower communities to influence health decisions and partner in whole person care
- o Increase our health literacy efforts to enable people to better understand how to enroll in, use, and pay for their health insurance
- o Use data to deepen understanding of customer experience and cost, select measures, and drive informed decisions

## Improve health coverage, affordability, care and outcomes

The Exchange is facing a growing need to provide the individual market health insurance customers in our state with health insurance products and coverage that best fits their financial and personal needs. To do this, it is necessary to confront the realities of the current system and look for methods that blend modifying what exists today with new ways to make health coverage affordable, valuable and accessible to the residents of Washington.

#### Building on Cascade Care -- to improve affordability, plan options, and value for our consumers

The intent of Cascade Care is to:

- **Continue to address** costs through lower premiums, lower deductibles, and providing access to services before having to pay the deductible
- **Encourage choice** with new products of better value and like benefits across all participating carriers
- Grow enrollment by attracting new enrollees and retaining current customers
- Ensure continued market stability thorough increased carrier participation, competitive product offerings, and a larger and more diverse risk pool

The Exchange has taken the lead in developing higher-value plans through standard benefit design. To do so required striking a delicate balance between offering plans that create a meaningful difference compared to currently offered plan options, while not substantially increasing premiums. The standard plan design served as the foundation for of the state-procured public option plan, a process led by the Health Care Authority.

| 3 Different Types of Health Plans in the Exchange in 2021  | Non -<br>Standard<br>Plans | Standard<br>Plans | Public<br>Option<br>Plans |
|--|----------------------------|-------------------|---------------------------|
| Eligible for federal tax subsidies; must meet federal actuarial value requirements for metal levels; must meet Office of Insurance Commissioner requirements, Qualified Health Plan criteria, and include Essential Health Benefits. | <b>√</b>                   | <b>√</b>          | $\checkmark$              |
| Allows consumers to easily compare plans based on premium, network, quality, and customer service  |                            | <b>✓</b>          | <b>✓</b>                  |
| Uses plan design with deductibles, co-pays, and co-insurance amounts for each metal level and some services guaranteed to be available before the deductible   |                            | <b>✓</b>          | <b>V</b>                  |
| Carriers required to offer to participate in the Exchange  |                            | <b>✓</b>          |                           |
| Provider reimbursement caps at 160% of Medicare, and subject to a floor on reimbursement for primary care services & rural hospitals   |                            |                   | <b>V</b>                  |
| Required to incorporate Bree Collaborative & Health Technology Assessment program recommendations  |                            |                   | $\checkmark$              |
| Requires carriers to offer a bronze plan   |                            |                   | <b>V</b>                  |

For more information on Cascade Care, visit <a href="https://www.wahbexchange.org/wp-content/uploads/2020/03/Cascade-Care\_Draft-7.pdf">https://www.wahbexchange.org/wp-content/uploads/2020/03/Cascade-Care\_Draft-7.pdf</a>

In its first year, Cascade Care will enable people in every county to have at least two insurance carriers to choose from. The new program has also strengthened the market through increased carrier involvement (13 carriers overall) with all carriers offering a Cascade Care product (five carriers offering public option plans covering 19 counties). Additionally, Cascade Care has helped stem the recent tide of premium increases and higher deductibles. Overall, Exchange premiums are down 3.2% for 2021, and deductibles in Cascade Care plans are about \$1000 lower than deductibles in non-Cascade Care plans.

Moving forward, the Exchange will be working with partner state agencies to complete a legislatively mandated study on funding direct-to-consumer subsidies to help people better afford their health insurance in the individual market. This study, part of the Cascade Care legislation, would serve as the basis for action in the State Legislature to provide individuals with additional financial relief in paying for health care.

Cascade Care is just one step toward addressing the rising cost of health coverage. We will continue to learn from the customer experience in the Exchange market, and apply that knowledge to ongoing efforts to improve affordability and improve health outcomes, including the Exchange sponsorship program. It will be important that we take time and review how things worked and apply key learning to implement changes to strengthen access to healthcare coverage into the future. It is our hope to continue ongoing conversations with the legislature and other key stakeholders to identify additional ways to improve affordability, value and service for all populations across Washington.

# Develop strategies to assist vulnerable populations transitioning from one coverage type to another - such as from employer-based coverage and Washington Apple Health - to reduce the likelihood of experiencing a coverage gap

The new COVID-19 environment has ushered in new populations that need insurance. This includes people who have lost employment and the coverage that came with it, individuals unable to cover the cost of COBRA, and those who are still employed but their business can no longer offer health insurance. These situations are impacting tens of thousands of lives across our state. There is also the continual population leaving the Washington Apple Health (WAH) program due to increases to their income that makes them no longer eligible. All of these individual and families are eligible for Exchange coverage, potentially with substantial federal premium assistance, but many forego enrollment because the cost of coverage is beyond their means. This issue is made worse by confusion around program eligibility and costs or steps required to transition into individual market insurance.

The Exchange will analyze the barriers that prevent people coming off employer sponsored insurance and WAH from enrolling into an individual market qualified health plan (QHP). This will help identify solutions for continuous coverage for individuals who lose WAH eligibility, including whether there is an opportunity to automatically enroll consumers into subsidized QHP coverage.

The Exchange will also explore the potential to provide those disenrolled from WAH with additional subsidies to ease the transition to QHP coverage. This would lower the barrier to enrollment and make coverage more affordable for lower income individuals.

# Engage in statewide initiatives to address the underlying cost of care as an affordability and value strategy for consumers, including access to high quality care and emerging ideas for universal coverage

The Exchange continues its work as an active participant in the Washington Health Alliance, Health Care Authority's Health Innovation Leadership Network, Bree Collaborative, and other initiatives to address the underlying cost of care. The Exchange was also selected by the legislature to play an active role in two initiatives to help decision makers more fully understand the options the state has in bringing affordable health care to all residents. The first is the Health Care Cost Transparency Board, which will review health care expenditures in Washington and establish health care cost growth benchmarks. The second is the Universal Health Care Work Group.. It is important that the organization contribute to the conversation occurring with public and private sector leaders in

Washington so that consideration can be given to how the Exchange can play a meaningful role in identifying solutions to the affordability challenges that face our customers.

The Exchange has also taken steps to ready its own data warehouse that will enable us to further expand our capability and use of the All Payer Claims Database (APCD) as well as evolving analytics related to the state's uninsured. This approach will allow for the examination of health outcomes of Exchange customers and capture data and trends that spotlight best practices and the value of services. These efforts will bring the power of consolidated purchasing enjoyed by other public and employer-based programs to benefit individual consumers purchasing on the Exchange.

Cascade Care has also helped usher in a new era of partner engagement centered in on how we can bring the most value to Exchange consumers based on existing programs that help address costs. This work will be informed not only by the performance of Cascade Care plans but also through exploratory conversations related to sponsorship programs, outcomes of high-quality purchasing programs, improving the value of products available to consumers, and ensuring consumers have the information they need to make informed decisions.

## Advance diversity, equity and inclusion to narrow health disparities, especially in communities of color

Since adopting the Exchange Equity Statement, the organization has taken steps to further advance work in the areas of diversity, equity and inclusion (DEI). The Exchange has begun to integrate the most current thinking, coaching and training to its internal practices and externally with community and policy engagement.



Assisters at an enrollment fair getting ready to help customers.

## Develop and engage in a model for Exchange leadership in addressing the social determinants of health (SDOH), ensuring public health is a key design element

The Exchange will continue to explore how the health of customers can be improved, and how persistent disparities can be further reduced, by addressing SDOH. SDOH includes factors like socioeconomic status, education, income security, neighborhood and physical environment, employment, and social support networks; as well as access to health care. This will require evaluating and further assessing how WAHBE's statutory authority, organizational strengths, internal resources, existing partnerships, and strategic initiatives could be further leveraged, and identifying where the Exchange is uniquely positioned to contribute.

This effort will be informed by continued, intentional engagement with impacted communities, existing Commissions and Councils, and our statewide Navigator, Tribal Assister, and other assister networks who are invaluable in helping us learn from and better service local communities. This effort will also include an assessment of current statewide and local efforts, and will utilize available Exchange data, including existing Exchange equity benchmarks, information on the uninsured, workgroup and committee feedback, and ongoing survey, consumer testing, and focus group data.

Work in this area has also been accelerated by the pandemic, offering the Exchange insight through new information that may be used to identify and further understand the current factors that may serve as barriers for people to enroll and seek health coverage. We fully expect that COVID-related health coverage data and our SEP data will provide additional insight for the Exchange that will augment the existing work on social determinants of health both on an operational and technical level.

## Drive Exchange decisions using DEI principles and an in-depth understanding of our marginalized consumers to improve health care access by asking marginalized communities what they need

The Exchange has started to apply a DEI lens to decision-making in order to appropriately consider the impacts on populations that face barriers in seeking and accessing health care. This includes work on establishment of a DEI action plan as well as building organizational capacity at the Exchange through the hiring of a DEI director. The Exchange has also embraced the need to better understand marginalized communities, especially communities of color, and the barriers they face.

This work includes seeking out direct consumer feedback from marginalized populations and hearing about their experience in receiving health care, and specifically, accessing health insurance through *Washington Healthplanfinder*. Our communities know what they need and the Exchange can learn from receiving this quantitative and qualitative data. This will enable the Exchange to gauge improvement to access and seeking care, as well as capture critical factors that impact health outcomes.

## Increase the diversity of the Exchange Board, managers, and leadership to reflect the people we serve, and increase the cultural humility of our Board, leadership, and staff

This year, the Exchange made a concerted effort to unite diversity efforts designed to bring our leadership, staff and board members into better alignment with those that we serve. This includes bringing on a DEI director to lead internal and external efforts in this area who has built a robust training and educational component of DEI into the Exchange culture. The expectation is that this work will extend beyond staff to those that provide assistance to our customers, allowing us to offer a better experience and meet each customer where they are.

All training will be extended to the board and staff to facilitate a conversation around the impact of DEI related factors on customers' everyday lives beyond only those that influence their health insurance decisions.

The current pandemic has exacerbated the issues of equity and inclusion in our communities. Ongoing, it will be important for the Exchange to listen and understand what each of us - as an individual board member or staff person - and our customers may be experiencing. We have much to learn to better understand our customers so that we may evolve to better meet their needs.

## Leverage the success of *Washington Healthplanfinder* technology platform to strategically expand offered services

Washington Healthplanfinder continues to modernize its stable, flexible, and consumer-friendly technology platform to meet the future demands of health care. Given the ongoing development and introduction of new infrastructure and modernization of existing systems, the Exchange is well positioned to expand our platform's use and meet the ongoing requests to assist with enrollment for specialized populations.

## Develop strategies to retain and grow customer use of the Exchange, including options for future Exchange-offered products and services

The Exchange has engaged with other state agencies to chart an expanded role for *Washington Healthplanfinder* and other Exchange-based assets. The constantly improving customer-facing eligibility, shopping, and enrollment experiences are of benefit to both new and existing Exchange customers. This includes meeting the needs of specialized populations including individuals eligible for coverage under the Compact of Free Association (COFA) Islander program as well as other specialized groups as defined by law or employment sector.

Currently, the Exchange technology platform can provide a comprehensive health insurance experience for customers as individuals and families move between programs, so that their application, demographics, and previous enrollments can follow them. This provides a more seamless experience for those individuals or families that may face changes in program eligibility.

## Focus on innovative customer-based solutions, including feasibility of serving customers who are transitioning to Medicare

Our modern customer-centric IT platform positions the Exchange for growth in reaching and engaging customers. The Exchange has been reviewing and strategically using data to drive innovative designs and platform expansions to bring services and products to customers the way they would like to have them delivered. This work has taken the form of moving toward a more modular based system framework, while conducting ongoing usability testing with customers as well as tracking where in the process customers find ease or difficulty navigating system.

The Exchange recognizes that the consumer continues to rely on and expect an easy-to-navigate experience similar to that of other ecommerce experiences. With the current customer-centric approach, the Exchange will continue to improve and engage with the latest digital technology to appeal to greater audiences and be responsive to the ongoing need to evolve the customer experience.

#### Partner with state agencies to reuse technology to improve customers' experience with health care

The Exchange is one of five participating entities in the Washington Health and Human Services Governance (HHS) group that formed in 2019 to respond to federal and state interest in increasing state reuse and coordination of IT projects and services. The Exchange's technology platform is one of the most modern HHS assets and was recently recognized by Code for America as best in class for health enrollment. The Exchange is engaged with our partner state agencies and is ready to assist in state initiatives using our technology platform, as desired.

The Exchange can offer access to our platform that may assist the state in some of its technology upgrades while providing a more real-time, customer-friendly experience for consumers. The Exchange also strives to partner with other state entities to deliver high quality, streamlined services to residents of Washington. The Exchange has experience in balancing tight timelines and ambitious program goals with the reality of building IT system functionality.

#### Expand innovative approaches to drive health system excellence

The Exchange embraces innovation and continuous improvement to offer customers a modern, user-friendly experience. Additionally, the organization aspires to drive health system excellence by offering customers more information and assistance for making the best health decisions for themselves and their families.

## Introduce and foster innovative initiatives to dramatically improve customer experience and engagement

The Exchange continues to iterate in both technological and operational design to create the best experience for all of its customers. It is critical that this experience is in line with experiences that they already have in everyday life. We continue to drive for using customer insight to help streamline processes, enhance functionality and the ease-of-use of *Washington Healthplanfinder*, as well as person-to-person assistance.

The Exchange has introduced improvements to system code that enable screen readers to seamlessly provide information for those with visual disabilities. It has also modified how these code changes are captured in the system code pattern library to ensure that future code will account for any visual or hearing-related consumer challenges. Understanding what challenges consumers face going through the application and increasing in-page assistance, descriptive language and application sequencing improve the overall experience for everybody using *Washington Healthplanfinder*.

Given the impact of the pandemic on the ability to conduct outreach in person, the Exchange is leveraging digital technologies to better assist our customers in this new environment. This includes moving our call center and assisters into remote work conditions and modifying customer engagement to support scheduling and conducting virtual enrollment appointment for consumers. We have also expanded our off hours capabilities, to better serve online customers throughout the day and evening, whenever they can find time to seek coverage.

## Leverage and build upon the Exchange's consumer networks to empower communities to influence health decisions and partner in whole person care

Over the past six years, the Exchange has worked with organizations to build trusted sources of information and assistance in signing people up for health insurance. Many of these organizations have served their communities for decades, connecting local residents to various services. They have developed close relationships with their clients and are well positioned to empower communities to make informed health decisions.

The impact of the pandemic has put intense pressure on these organizations and the communities that they serve. Many have growing concerns for how they will conduct their work in the future and how they can get to the people that need the most help. Our community partners will be playing a new and potentially broader role in the future and may be on point to provide additional resources and information that would help community members make the best health decisions for themselves in an effort to bring improved health outcomes for the community.

The Exchange will continue to listen and collaborate with our valued community partners to understand the changing challenges they face finding and accessing health care coverage and help them to be able to overcome those barriers. This will provide the Exchange with the information needed to support the communities in improving health outcomes with trusted partners. This work will also include working with our lead organizations to better identify new, up-and-coming partners who have valuable perspectives on health issues and will help us better understand their communities.

## Increase our health literacy efforts to enable people to better understand how to enroll in, use, and pay for their health insurance



A navigator providing a customer with educational materials.

The Exchange is well-known for our user-friendly shopping tools that help consumers find the best health plan for them. This is best exemplified by continued improvements to our consumer decision support tool (CDST) that during open enrollment assisted over 50,000 consumers with their 2020 plan selection. The CDST has provided additional value to many of those separated from their employer-based coverage during the pandemic. Ongoing consumer education is essential and expanding consumer facing technology to help with this understanding of health insurance is more important than ever.

The Exchange's health insurance literacy tools have been highly valued by customers and enrollment assisters. We can expand this help by providing more information and tools to help them make the most informed choices around health care usage, which doctors and hospitals provide the best value, and which plan best fits their budget. There are existing tools from external organizations that pull the data and information, and the Exchange can leverage these to enhance the shopping experience for consumers in the future.

## Use data to deepen understanding of customer experience and costs, select measures, and drive informed decisions

The Exchange is committed to using available information about the customer experience to drive health system excellence. This includes listening and learning from customers and community-based partners, utilizing customer focus group and survey data, equity benchmark data, Navigator and Broker survey data, enrollment and utilization data, Customer Support Center data, available carrier data, and qualitative feedback from Exchange workgroup and committee members to continuously improve our system.

The Exchange will continue to strengthen our analytic in-house capabilities, and our data sharing agreements with both state agency partners (to further understand customer transitions between different coverage types) and carrier partners (to improve the quality and efficacy of the eligibility and enrollment process). The Exchange will leverage this analysis to drive program improvements that improve health outcomes for new and existing customers.

## THE TEN-YEAR VISION

Looking out beyond five years, the Exchange sees ongoing opportunity to push customer-centric innovation into the health care environment that will benefit Washingtonians and the state as a whole. Elements of this 10-year vision include:

#### **Remove Barriers Facing Critical Populations**

The Exchange will remove barriers that impede those in Washington who are seeking health coverage. This work includes leveraging technology to drive down the complexity of the decision-making process, as well as bringing additional services and outreach specific to populations that have faced barriers to care.

#### Feature Meaningful Products to the Customers We Serve

The Exchange will continue to pursue a customer-centric approach designed to bring innovative products and services to our customers, allowing them to find and choose health insurance coverage that better meets their needs and budget. This includes collaborating with partners to address cost of care and value of health plans offered, as well as building out current technologies to support other health insurance-like products.

#### Design the Customer Experience to Meet People Where They Are

Market evolutions will require a new set of customer interactions that could include technologies, such as artificial intelligence, that better support and expedite information and resolve customer issues through a variety of communications channels. These channels include cell phones, other mobile devices, smart speakers, and personal assistants. The Exchange will also bring more tools to Navigators, brokers, and other customer assistance channels, enabling them to have solutions in hand to help their clients and address their clients' needs. And with this will come a need for more robust privacy and security infrastructure to meet the needs of the growing online data environment.

#### Foster Modernization in Health Care

The Exchange will continue to play a role in the state's policy development to promote innovative and affordable and high-value health solutions for the residents of Washington. We will also move to a customized one that is built upon a customer's personal profile, allowing the consumer to have ongoing access and involvement with their Exchange-based health coverage in one online portal.

## **CONCLUSION**

The Exchange is on an unceasing pursuit of excellence that defines the achievements of today and sets the stage for successes in the future. It is our intention to continue the valued working relationship we have with the legislature, and all of our partners, to continue delivering results that help the state and those that call Washington their home.

