Washington Health Benefit Exchange

SENATE HEALTH COMMITTEE
NOVEMBER 14, 2016

PAM MACEWAN, CEO
MICHAEL MARCHAND, DIRECTOR OF COMMUNICATIONS & OUTREACH
Post-Election Activities

- Consumer Messaging
  - Open-enrollment continues through January 31, 2017
- Carriers & stakeholder engagement
- Visioning on the evolution and stabilization of our market, including affordability and operational delivery.
- Monitoring national activity
Exchange Priorities 2016-2017

- Optimizing Customer Experience
- Growth and Enrollment
- Sustainability
Open-Enrollment Period
Nov. 1, 2016 – Jan. 31, 2017

- Successful Launch
  - Monitoring Healthplanfinder activity
  - Monitoring Call Center activity
  - Monitoring consumer feedback and trends
  - Hosting weekly check-ins with Navigators and Brokers
  - Soliciting feedback from Committees and Workgroups

- Successful Processing of QHP Renewals

- Tracking to Enrollment Targets

- Fall Enrollment Report (enrollment demographics as of Sept.)
What’s New?

- Family Dental Plans
  - 3 insurers will sell 12 Qualified Dental Plans (QDPs)

- New Shopping Features
  - Shopping Cart (saves plan selections)
  - Shopping Tips (alerts on comparing plans and reducing costs)

- Quality Rating System
  - Based on federal standards of quality
  - Health plans will be assigned a rating – 1 star (lowest) to 5 stars (highest)
New Enrollment Storefront Pilot

- Exchange has contracted with 2 organizations to manage full service, in-person enrollment assistance sites during OE
- High visibility, high consumer traffic locations
- Broker – Navigator partnership
- Consumer education

Better Health Together
2001 N. Division St.
Spokane

Washington Healthplanfinder Enrollment Center

Applied Team Insurance
7720 NE Vancouver Mall Dr. #110
Vancouver
2017 QHP Issuers by County

9 insurers will sell 98 Qualified Health Plans (QHPs)
2017 Qualified Health Plan Themes

- 12 plans cover primary care visits before deductible has been met
- 53% of plans limit care to in-network providers only (except in emergencies), compared to 34% in 2016
2017 Qualified Health Plan Pricing

- Average premium changes 2016 to 2017 in the Exchange:
  - Gold plans: 13% increase
  - Silver plans: 4% increase
  - Bronze plans: 6% increase

- Average deductible changes 2016 to 2017 in the Exchange:
  - Gold plans: 7% increase
  - Silver plans: 8% increase
  - Bronze plans: 5% increase

Premium change based on 40-year-old, non-smoker
Premium Increases Vary by County

Change in Second Lowest Cost Silver Premium (SLCSP) Rate ‘16 to ‘17
Average SLCSP Premium Increase is 8%

Green: 0 - 7% decrease in premium

Yellow: 0 - 10% increase in premium

Orange: >10% increase in premium

Based on 40-year-old unsubsidized, non-smoker
Subsidized Low-Income QHP Enrollees Shielded from Premium Increases

<table>
<thead>
<tr>
<th>County</th>
<th>Year</th>
<th>Premium</th>
<th>150% FPL (~18k/yr)</th>
<th>250% FPL (~30k/yr)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Cost to Consumer</td>
<td>Cost to Consumer</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Tax Credit</td>
<td>Tax Credit</td>
</tr>
<tr>
<td>Ferry (33% SLCSP increase)</td>
<td>2016</td>
<td>$272</td>
<td>$209</td>
<td>$63</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$64</td>
<td>$208</td>
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<tr>
<td></td>
<td>2017</td>
<td>$404</td>
<td>$342</td>
<td>$62</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>$197</td>
<td>$207</td>
</tr>
<tr>
<td>Spokane (7% SLCSP increase)</td>
<td>2016</td>
<td>$209</td>
<td>$146</td>
<td>$63</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$1</td>
<td>$208</td>
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<tr>
<td></td>
<td>2017</td>
<td>$224</td>
<td>$162</td>
<td>$62</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>$17</td>
<td>$207</td>
</tr>
<tr>
<td>King (6% SLCSP increase)</td>
<td>2016</td>
<td>$223</td>
<td>$160</td>
<td>$63</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$15</td>
<td>$208</td>
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<tr>
<td></td>
<td>2017</td>
<td>$238</td>
<td>$176</td>
<td>$62</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$31</td>
<td>$207</td>
</tr>
<tr>
<td>Clark (5% SLCSP increase)</td>
<td>2016</td>
<td>$292</td>
<td>$229</td>
<td>$63</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$84</td>
<td>$208</td>
</tr>
<tr>
<td></td>
<td>2017</td>
<td>$308</td>
<td>$246</td>
<td>$62</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$101</td>
<td>$207</td>
</tr>
<tr>
<td>Pierce (-7% SLCSP decrease)</td>
<td>2016</td>
<td>$258</td>
<td>$195</td>
<td>$63</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$50</td>
<td>$258</td>
</tr>
<tr>
<td></td>
<td>2017</td>
<td>$241</td>
<td>$179</td>
<td>$62</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$34</td>
<td>$207</td>
</tr>
</tbody>
</table>

Based on 40-year-old, non-smoker
**Average QHP Deductible Changes from 2016-2017**

<table>
<thead>
<tr>
<th>Metal Level</th>
<th>2016 Average Deductible</th>
<th>2017 Average Deductible</th>
<th>Change in Deductible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bronze</td>
<td>$5,693</td>
<td>$5,977</td>
<td>$284</td>
</tr>
<tr>
<td>Silver*</td>
<td>$3,343</td>
<td>$3,620</td>
<td>$277</td>
</tr>
<tr>
<td>Gold</td>
<td>$1,148</td>
<td>$1,223</td>
<td>$75</td>
</tr>
</tbody>
</table>

*Cost-Share Reductions (CSRs) available for those under 250% FPL*
Looking Ahead

Challenges

▪ Affordability
▪ Changing Products & Provider Networks
▪ Market Stability
▪ Rural Access
▪ Changing Regulatory Environment

Opportunities

▪ Decision Support Tools
▪ Expanding Risk Pool
▪ Targeted Outreach
Appendix
FALL ENROLLMENT REPORT

QHP by County

Top 10

KING...............................56,424
SNOHOMISH.......................16,420
PIERCE..............................14,664
CLARK...............................11,429
SPOKANE............................11,262
WHATCOM...........................7,170
THURSTON...........................5,250
KITSAP..............................5,206
YAKIMA..............................3,608
BENTON..............................3,217

Legend:
- 10,000+ Enrollees
- 2,000 – 9,999 Enrollees
- 1,000 – 1,999 Enrollees
- 1,000 – 1,999 Enrollees
- 1 – 999 Enrollees
Washington Apple Health by County

Top 10

KING................................. 338,546
PIERCE.............................. 186,591
SNOHOMISH....................... 136,184
SPokane............................ 131,591
CLARK............................... 102,470
YAKIMA............................. 97,366
THURSTON.......................... 54,492
BENTON............................. 48,964
WHATCOM......................... 45,855
KITSAP............................. 43,936

*Washington Apple Health enrollees consist of Medicaid MAGI (1,482,125) and CHIP (49,277). A total of 621 Washington Apple Health enrollees listed “Other” under county, while 190 enrollees listed “Border” under county.
CURRENT VERSUS PROPOSED BUDGET – BY FUND SOURCE (IN THOUSANDS)

2015-17 Total Funding
$140.6 million

- Federal Grants, $29,523
- General Fund-State, $11,126
- Health Benefit Exchange Account (17T), $50,503
- Carrier Assessment and Premium Tax
- Federal Medicaid, $49,410

Proposed 2017-19 Total Funding
$120.9 million

- Health Benefit Exchange Account (17T), $45,840
- General Fund-State, $10,368
- Carrier Assessment and Premium Tax
- Federal Medicaid, $64,731
- Federal Grants, $29,523
Legislative Reports

www.wahbexchange.org/about-the-exchange/reports-data/

- Reports submitted to legislators include:
  - Annual Strategic Plan
  - Annual Detailed Financial Report
  - Annual Updates to 5 Year Spending Plan
  - Quarterly Spending Metrics Report
  - Monthly Financial Reports
Five Year Strategic Plan

Core Outcomes

- Define and Deliver Operational Excellence
- Increase Number of Insured and Access to Affordable Coverage
- Advance Consumer Choice and Decision-Making
- Promote Equity Across System
# Key OE4 Dates

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nov. 1</td>
<td><strong>Open Enrollment begins!</strong></td>
</tr>
<tr>
<td>Dec. 15</td>
<td><em>ACA 133%=138% due to across the board income disregards</em></td>
</tr>
<tr>
<td>Dec. 15</td>
<td><em>Soft enrollment deadline for coverage effective Jan. 1, 2017.</em></td>
</tr>
<tr>
<td>Dec. 23</td>
<td>Final enrollment deadline for coverage effective Jan. 1, 2017. Customers ineligible for auto renewal or those interested in changing their 2017 coverage must select and finalize coverage.</td>
</tr>
<tr>
<td>Jan. 1</td>
<td>Coverage begins for customers eligible for auto renewal and customers who selected and finalized coverage by Dec. 23.</td>
</tr>
<tr>
<td>Jan. 31</td>
<td><strong>Open Enrollment ends!</strong> Enrollment deadline for coverage effective Mar. 1, 2017.</td>
</tr>
</tbody>
</table>
QHP Renewal Process
www.wahbexchange.org/renew

▪ Eligible customers auto-renewed into the same plan (if available) or a similar plan

▪ After auto-renewal, customers can shop and change plans during open enrollment (starting Nov. 1)

▪ Auto renewals effective for Jan. 1 coverage
New Family Dental Plans

www.wahbexchange.org/dental

- Current: Children (18 or younger) must enroll in a pediatric dental plan if they enroll in QHP coverage.

- New in 2017: All household members may enroll in a dental plan if they enroll in QHP coverage.
  - Dental plans can cover just adults, adults and children, or children only
  - Consumers decide which household members they would like to cover when they shop
New Shopping Tips

- Customers shopping online now receive alerts with educational tips on comparing plans and reducing costs.
Health Literacy: Explaining Costs

Health Care Costs through the Year

- **Premium**: Your premium is the amount you pay each month for your health plan.
- **Deductible**: At the start of the year, you pay for most of your health care until you’ve reached your deductible.
- **Co-insurance**: Once you’ve met your deductible amount, you will share the cost of care with your insurance company. This is called “co-insurance”.
- **Out-of-pocket maximum**: Once you’ve hit your out-of-pocket maximum, your health plan pays all of your covered services for the rest of the year.

Metal Level Guide

Plans in Washington Healthplanfinder are separated into four categories, called metal levels. Find out what metal level may be right for you.

<table>
<thead>
<tr>
<th>Answer a few questions about yourself</th>
<th>Bronze</th>
<th>Silver</th>
<th>Gold</th>
<th>Platinum</th>
</tr>
</thead>
<tbody>
<tr>
<td>How often do you go to the doctor?</td>
<td>Annual physical</td>
<td>1-3 times/year</td>
<td>4+ times/year</td>
<td></td>
</tr>
<tr>
<td>How many prescription drugs do you need/use?</td>
<td>None</td>
<td>1-3 drugs</td>
<td>4+ drugs</td>
<td></td>
</tr>
<tr>
<td>How many times do you go to the ER in a year?</td>
<td>Once or less</td>
<td>Maybe a few times</td>
<td>Often</td>
<td></td>
</tr>
<tr>
<td>Are you planning to have surgery or have a baby?</td>
<td>No</td>
<td>Maybe</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>If you get sick, you’d be willing to pay a</td>
<td>$3,750 - $6,500 deductible*</td>
<td>$1,250 - $5,000 deductible*</td>
<td>$250 - $2,000 deductible*</td>
<td></td>
</tr>
<tr>
<td>How much are you willing to pay for your monthly premium?</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Do you qualify for lower out-of-pocket costs, called Cost Sharing Reductions?</td>
<td>No</td>
<td>Yes? You must choose a Silver plan to get those cost savings!</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

This is an educational tool only and is not intended as a plan recommendation. Health insurance plans differ. *Based on 2015 plan pricing.
Health Literacy: Explaining Costs

Shopping Tip #1:
Health plans come in categories, called metal levels

- **BRONZE**
  - Monthly premium: $$
  - Costs when you get care: $$$

- **SILVER**
  - Monthly premium: $$$
  - Costs when you get care: $$

- **GOLD**
  - Monthly premium: $$$$
  - Costs when you get care: $ $

Shopping Tip #2:
Find a deductible that works for you

How it works:
If your plan has a $2,500 deductible, you’ll pay $2,500 out of your own pocket before your health plan starts to pay some of your health care costs.

How Insurance Works

Health insurance protects you from high costs.

**EXAMPLE HEALTH PLAN**
- $250 ER co-pay
- $2,000 deductible
- 20% co-insurance

**BILL**
- ER visit: $10,000
  - Patient pays: 
    - ER co-pay ($250)
    - Deductible ($2,000)
    - 20% co-insurance of
      - Remedy of bill ($1,500)
      - $250 + $2,000 + $1,500
      - Patient Total: $3,800

Key Terms

**Co-pay**
A fixed amount you pay for a covered health care service.

**Deductible**
The amount you will spend on your health care before your health plan starts to pay some of your health care costs.

**Co-insurance**
Your share of the cost of a covered health care service, after you have paid your health plan’s deductible.

Without health insurance: $10,000!
Finding a local Navigator or Broker

In-person and over-the-phone assistance is available at no cost to you.

- Find a navigator
- Find a broker

Open Enrollment is Coming
November 2016 - January 2017
Navigator Lead Organizations

www.wahbexchange.org/partners/navigators/
Consumer Assistance: Customer Support Center

- 1-855-WAFINDER (1-855-923-4633)
- Located in Spokane Valley, WA
- Hours of Operations: 8am-8pm M-F (except state holidays)
- Assist with
  - Applying for or renewing health care coverage
  - Health Insurance Premium Tax Credit (HIPTC) questions
  - Qualified Health and Dental Plans (QHP/QDP) questions
  - Healthplanfinder Business questions
Additional Resources

www.wahealthplanfinder.org

- Customer Support @ top right of home page
- 1-855-WAFINDER (1-855-923-4633)
- TTY/TTD for Deaf : 1-855-627-9604

www.wahbexchange.org

- Partner Toolkit @ footer

Partner Toolkit

Click on the icons below for valuable resources to use when helping customers enroll through Washington Healthplanfinder.

FACT SHEETS
PRINT MATERIALS
SOCIAL MEDIA

EVENT PLANNING
VIDEO RESOURCES
IMAGES & LOGOS