



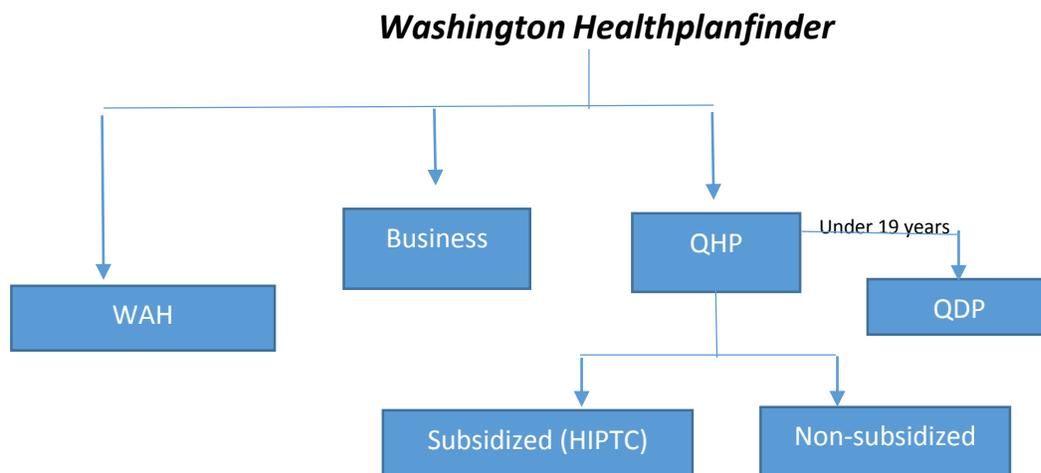
Washington Health Benefit Exchange at a Glance

Background

Washington Health Benefit Exchange (WAHBE) is a state based Exchange established in accordance with Affordable Care Act of 2010 (ACA). It offers the online service, *Washington Healthplanfinder* (HPF), for Washingtonians to choose a health plan that meet their health needs and budget. HPF supports three different programs: Washington Apple Health (WAH) for adults and children under certain Federal Poverty Levels (FPL), Washington Healthplanfinder Business for employers who employ under 50 full time employees, and Qualified Health Plans (QHP) for individual market. It also offers Qualified Dental Plans (QDP) for QHP enrollees under 19 years of age.

The HPF platform works in conjunction with other state, and federal agencies to determine eligibility of a person for QHP, QDP or WAH. HPF also provides important information and enables consumers to compare a variety of health plans offerings so that eligible Washingtonians can make a sound plan choice.

The ACA’s affordability provisions include two types of financial assistance to QHP enrollees. The financial assistance depends on the modified adjusted gross income of the household. The two types of financial assistance are 1) Premium subsidies in the form of health insurance premium (HIPTC) and 2) Cost-Sharing Reductions (CSR) that lower maximum-out-of-pocket costs. Qualified enrollees can either choose to take the HIPTC in advance (which lowers their monthly premium payment) or can claim it while filing the taxes.



Operational Details

Washington Healthplanfinder opened its doors for ‘one stop shopping’ for all the three programs, stated above, on Oct. 1, 2013. The first Open enrollment (OE1) ran through Mar. 31, 2014 and allowed customers to enroll in any qualified health plan coverage beginning on Jan. 1, 2014, or later. OE1 was then extended through Jun. 30, 2014, to provide extra time for customers who experienced technical difficulties in completing their application. The schedule for open enrollment is set by the Federal Government and, to date, has changed each year of operation. Table 1 shows various open enrollment periods for QHP costumers.

Table 1: Open Enrollment Periods for Qualified Health Plans

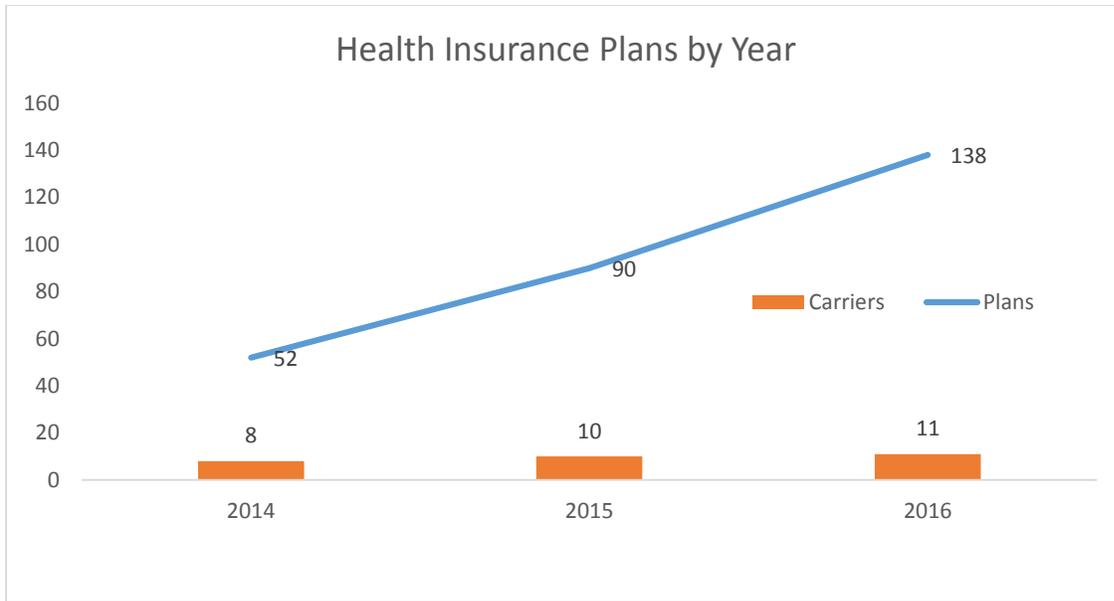
Open Enrollment	Enrollment Year	Open Enrollment	Extended Till
OE1	2014	Oct. 1, 2013 – Mar. 31, 2014	Jun. 30, 2014
OE2	2015	Nov. 15, 2014 – Feb. 15, 2015	Apr. 17, 2015
OE3	2016	Nov. 1, 2015 – Jan 31, 2016	
OE4	2017	Nov. 1, 2016 – Jan 31, 2017	

There are special circumstances that trigger an open enrollment period for an individual or family outside of the open enrollment. These exceptions include change in income; marriage status, death, birth or adoption; involuntary loss of health coverage; move of residence. Also WAH, Native Americans, Alaskan Americans and Business customers can enroll any time of the year.

Health Plans

For the coverage year 2014, WAHBE offered fifty two health insurance plans and eight carriers. In 2015, number of qualified health plans increase by 73%, in 2016, this total was 165% of the first year. Over the past two years, number of health carriers increased by 38%. Two new issuers, Columbia United providers and Moda Health Plan joined the Exchange in 2015 but didn’t participate in 2016. 3 new carriers joined the Exchange in 2016: Health Alliance Northwest, Regence Blue Shield, and UnitedHealthcare of Washington. Not all carriers offer plans in all areas of the state. LifeWise and UnitedHealthcare are the only two carriers that offer plans in all 39 counties in Washington. The addition of carriers and plans displays the success of the WAHBE.

Graph 1: QHP Health Insurance Plans by Year



Four different metal levels (tiers) are offered by QHP Health Insurance Marketplace. Table 2 shows the four tiers by actuarial value – the percentage of the total expected medical costs paid by the plan. The higher the share of covered medical expenses paid by the plan, the lower the consumer’s out-of-pocket cost. However, this scenario also translates into a higher premium. HPF also offers catastrophic plans for certain individuals under 30. This type of plan offers the least amount of health coverage. HIPTC or CSR is not available to the consumers of the catastrophic plans.

Table 2: Different Metal Level Plans and their actuarial value percentage

Metal Levels (Tiers)	Percentage of covered medical expenses paid by the plan	Percentage of covered medical expenses paid by the Consumer
Bronze Plan	60%	40%
Silver Plan	70%	30%
Gold Plan	80%	20%
Platinum Plan	90%	10%

Consumers who opt for the silver plan and whose incomes fall below 250 percent of the federal poverty level also receive cost-sharing subsidies (CSR). These subsidies are in addition to any HIPTC for which the customer may be eligible. Cost-sharing is automatically applied based on income and helps with the cost of deductibles, copayments, coinsurance and total out-of-pocket spending limits.

Premium Aggregation

From Oct. 1, 2013 to Sep. 23, 2015, QHP and QDP consumers had the option to pay their premiums through HPF, who would aggregate those payments and send to the carriers. During the 2014 coverage

year customers were required to make their first payment to HPF. In 2015, first payment to the Exchange became optional. Beginning Sep. 24, 2015, consumers had to direct all their payments to their insurance company. HPF no longer accept QHP and QDP payments.

Enrollment

In the two years Since WAHBE opened its doors (Oct. 1, 2013 to Oct. 31, 2015) - 2,147,000 consumers (1,231,000 families) have obtained health coverage through HPF. This number represents 31% of the Washington population (6,984,900) at the time. Each of these enrollments was related to one of the three programs offered through WAHBE with dental as a subset of QHP enrollments. Table 3 shows number of individuals enrolled by program by year. Please note that an individual could be enrolled in multiple programs in multiple years therefore the sum of the enrollee count by programs would be more than the unduplicated count mentioned above. Business enrollees increased by 15 fold in 2015 as compared to 2014.

Table 3: Number of people enrolled through HPF in various programs by year.

Enrollment Year	WAH Enrollees	QHP Enrollees	QDP Enrollees	Business Enrollees
2014	1,592,000	182,000	7,780	51
2015	1,741,000	199,000	8,562	769

Conclusion

The *Washington Healthplanfinder* portal is an easy way for Washingtonians to find what healthcare programs and subsidy they qualify for, and to enroll in a plan that works best for them. As per the Office of the Insurance Commissioner, before ACA implementation (2013), the uninsured rate in Washington hovered around 14% of the total population¹. In 2014, the population in Washington without health coverage dropped to 9.2%. Early data from Gallup show that only 6.4% of Washington’s adult population would be uninsured as of mid-July 2015. Gallup has ranked Washington as No. 4 in the nation for the largest drop in the rate of uninsured.

¹<http://www.ofm.wa.gov/healthcare/healthcoverage/default.asp>