



# Washington Health Benefit Exchange

Agents & Brokers Open Enrollment Activities Discussion

Exchange Board Meeting  
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Kris Lattimore, HBE Producer Program Manager  
Jeffery Johnson, JBJ Insurance Group, TAC Member  
David Peterson, Insurance Resource Group, TAC Member

# Role of Agents & Brokers TAC Members

- **Nina Florenz**  
Kirkland Insurance Associates, Inc.
- **David Preston**  
Insurance Resource Group
- **Harald Schot**  
LifePlan Financial Inc.
- **Jim Streitenberger**  
Premera Blue Cross
- **Ex-Officio: Jeff Baughman**  
Office of the Insurance Commissioner
- **Terry Hokinson**  
Coordinated Care
- **Jeffrey B. Johnson**  
JBJ Insurance Group
- **Rachel Lauser**  
Applied Team Insurance



# Broker Distribution Channel

- OE normally starts with approximately 2,000 certified brokers
- Annually 500-700 do not re-certify / drop out
- By end of OE5:
  - 1,225 brokers in WA
  - 347 in other states
  - 1,572 total
- Currently 1,690 brokers total in 24 states
- OE 5 brokers partnered with 25% of QHP households
- Focus groups have shown consumers value broker assistance



# Brokers Provide Unique Services

- Advanced knowledge of insurance products, networks, Rx, and benefits that have a direct impact upon their choice of product, their wellbeing and financial situation
- The ability to establish long term relationships
- Healthcare advocacy
- Very low cost distribution channel
- Brokers are generally available nights and weekends. Many will schedule telephone appointments anytime that is convenient for the individual year around



# Brokers Provide Unique Services

- Brokers are part of the team of multiple resources available to individuals, HBE Customer Service, Navigators, Brokers and Store Fronts
- Brokers are licensed and can help individuals make informed decisions. Customer service and Navigators can't make plan recommendations since they are not licensed
- Consumers look to brokers for validation of plan selection, physician networks and RX formularies



# Challenges

- More brokers each year are having to make a decision if they can afford to serve the individual market
- Complex plan designs, provider networks / RX formularies
- Shorter OE, overlapping OE with Medicare and Small Group
- Inability to identify exchange clients that need assistance with renewals, Conditional Eligibility Verification failure, Medicare
- Consolidation of Agencies – fewer brokers servicing more clients



# Challenges

- Agency Call Centers in other states tend to be staffed with seasonal help
- Fewer brokers are available for face-to-face servicing
- Many clients never partner with a broker after receiving services
- Broker compensation - with lower / elimination of commissions more brokers are charging fees
- Fewer Brokers are staying engaged with the Exchange



# Considerations for the Board

- Brokers want to serve the individual market but they will need help
- ID core group of brokers and make them more efficient, right sizing
- The ability to better service WAH clients
- More carrier interface features in HPF – “pay now”
- It's important to keep local brokers engaged in the individual market





# Considerations for the Board

- Grant administrative staff access to HPF
- Exporting data from broker dashboards to better serve clients
- Broker compensation
  - one time payment for Apple Health
  - QHP comp.
- Focus on time savers to service more consumers during shorter OE
- Improving the consumer and broker experience
  - e.g. extra customer service for broker team; identify core group of brokers and focus resources on them





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