

CHRISTINE O. GREGOIRE
Governor



STATE OF WASHINGTON
OFFICE OF THE GOVERNOR

P.O. Box 40002 • Olympia, Washington 98504-0002 • (360) 753-6780 • www.governor.wa.gov

August 17, 2010

Richard Onizuka
Director of Health Policy
Washington State Health Care Authority
P.O. Box 42710
Olympia, WA 98504

Dear Richard:

I am writing to support the Health Care Authority's application to the U.S. Department of Health and Human Services for a state planning and establishment grant to explore the development of an exchange in Washington State.

It is critical that we conduct the planning activities outlined in the application to properly determine if an exchange can be established by our state. The grant funds requested in this application will assist the state toward completing these activities.

Sincerely,

A handwritten signature in blue ink that reads "Christine O. Gregoire".

Christine O. Gregoire
Governor



Project Abstract

The Washington State Health Care Authority (HCA) is applying for \$1 million in project funding from the State Planning and Establishment Grants for the Affordable Care Act's Exchanges. The goal of the Washington State Health Exchange Project is to develop an Implementation Plan for a state-governed and administered health insurance exchange to be operational on January 1, 2014. The HCA will use the federal dollars to create a project team of HCA staff and consultants to develop an implementation plan by September 30, 2011.

The project team will start by developing a Planning Report which outlines the the high-level requirements and business functions of a Washington State health exchange. The project team will also complete a separate Information Technology Infrastructure Review and Assessment due to the priority placed on systems architecture to support an exchange. The technology report will be closely coordinated with the high-level requirements and business functions in the Planning Report.

The Planning Report will provide an analysis of several critical considerations for the implementation of a state-based exchange including, 1) governance, 2) business functions and linkages with Medicaid and the proposed federal basic health option, 3) merging the individual and small group markets, and 4) identifying concepts with the potential to contain costs through an exchange. Stakeholder relationships are established during these planning activities and formal advisors will provide input, guidance, and support throughout the project. The Planning Report will likely provide guidance for the drafting of state legislation to authorize further development of a state-based exchange.

In 2011, the project team will shift focus to developing an Implementation Plan that explores options and recommendations that satisfy the high-level requirements and business functions in the Planning Report. Further assessment of the state's technology architecture will continue in this phase, and a separate Information Technology Work Plan will be developed to supplement the Implementation Plan. Legislation that specifies the intent and legal direction of a state-based exchange will likely follow the completion of the Implementation Plan.

Project Narrative

Introduction

The Washington State Health Care Authority (HCA) will use the planning grant funds to develop a Planning Report, Technology Infrastructure Review and Assessment, a high-level Information Technology Work Plan, and an Implementation Plan.

In the Planning Report, the HCA will identify and describe the high-level requirements and fundamental business functions of a state-based exchange, including an eligibility-interface with the state's Medicaid program and the proposed federal basic health option, and linkages to other private and public organizations. The Technology Infrastructure Review and Assessment will outline the technology requirements of a state-based exchange compared to our current technology architecture. The assessment will also inform the development of an Information Technology Work Plan. All of the preceding reports will inform the development of an Implementation Plan with options and recommendations for a Washington State health exchange.

Phase 1: Pre-grant activities

To prepare for the exchange planning activities, the HCA will recruit staff and establish consultant contracts. The HCA will recruit a Project Manager, Administrative/Analyst Support, a Policy Analyst, and an Information Technology Manager. The HCA will also establish consulting contracts to provide expertise in the areas of health insurance and exchanges, actuarial analysis, health care policy, information technology architecture, and eligibility and enrollment systems.

A central stakeholder relationship with the Joint Legislative Select Committee on Health Reform Implementation's (JSC) Advisory Group on the Exchange and Insurance

Reforms will be established for the Planning Report. The Advisory Group is a cross-section of stakeholders from the health insurance market and was formed to advise the JSC. HCA staff will inform stakeholders that a state-governed and administered exchange will be used as a “straw” option to perform research for the Planning Report.

Phase 2: Preliminary Planning Report

The purpose of the Preliminary Planning Report is to identify and describe the high-level requirements and business functions of an exchange. This will provide an operational scope for a Washington State health exchange.

Through the development of the Planning Report, the HCA intends to form a common understanding among policy-makers and stakeholders of the high-level requirements and business functions of an exchange, and the numerous integrated linkages with the Medicaid program, the proposed federal basic health option, and other private and public organizations. The HCA anticipates that a common knowledge base could benefit the transition into developing options and analyzing recommendations later in the Implementation Plan. Two specific options will be analyzed in the Planning Report:

- Merging the individual and small group markets and the selection of a proposed federal basic health option. This analysis will likely be needed to inform early discussions on the framework of Washington State’s private and public health insurance markets.
- Selecting an information technology platform. The Preliminary Planning Report will include a high-level assessment of the state’s technology architecture and the general technology needs of an exchange. Provided by the Information

Technology Manager, this technology supplement to the Preliminary Planning Report is needed to inform policy-makers of the state's current computing capabilities and the significance of selecting a high-level technology platform from which to develop the technical capabilities to support an exchange.

Milliman and Amy Lischko will be the primary consultants developing the Preliminary Planning Report. The JSC Advisory Group on the Exchange and Insurance Reforms will provide advice and comments before the report is submitted to the Administrator of the Health Care Authority.

M A Cook Corporation will develop the Technology Infrastructure Review and Assessment, which is outlined in the technical infrastructure section below. The content of the Preliminary and Final Planning Reports is generally described in the following categories as requested in the grant application.

Background Research: Milliman will assess the impact, on a Washington State exchange, of merging and not merging the individual and small group markets, and selecting or not selecting the proposed federal basic health option. At a minimum, the assessment will quantify the potential impact upon cost and enrollment in the exchange, the proposed federal basic health option, an expanded and reformed Medicaid/CHIP program, and the private insurance markets which will include association health plans whose members could enroll in the exchange, the proposed basic health option, or Medicaid/CHIP.

The exchange and the reformed market for health insurance have generated a need for additional decision-support capacity:

- Supporting consumers' choice of health plan within an exchange and the capacity to calculate, compare, and display cost and quality metrics across health plans.
- Estimating and monitoring the administrative cost of sustaining an efficiently administered exchange.
- Analysis of health care cost containment initiatives such as certifying, selecting, or subsidizing health plans based upon an ability to reward quality and cost-effectiveness through market-based incentives.

Milliman will summarize the data sources created by state agencies and private organizations as well as recent Washington State health care research performed by:

- Project Access sites or the Puget Sound Health Alliance.
- State Medicaid, Washington State's current Basic Health Plan, the Health Insurance Partnership, public employee health plans.
- Office of Insurance Commissioner.
- Office of Financial Management.

Milliman's summary will inform the decision-support needs of the Preliminary Technology Infrastructure Review and Assessment produced by M A Cook Corporation.

Stakeholder Involvement: The development of the Preliminary Planning Report will be critical for creating public awareness for the potential of new health insurance markets (primarily for individuals and small employers), introducing new forms of eligibility, choice of qualified health plans, and coverage requirements for individuals and employers. The HCA will need to begin an open dialogue on key policy issues, such as a governance structure for a state-administered exchange.

The JSC Advisory Group on the Exchange and Insurance Reforms has generously agreed to serve as the focal point for public advice and comments in the development of the preliminary and final Planning Reports. The Advisory Group members represent all areas of the health insurance market: consumers, employers, insurers, producers, and health care providers. HCA staff and consultants have also budgeted for open presentations with stakeholders as well as meetings with key organizations and individuals.

Program Integration: This section will summarize the operations of a state exchange. Milliman, Amy Lischko, and the HCA staff will identify and describe the high-level business functions and the numerous coordinated activities that will link customers to the processes and services that form the basis of a working exchange. At a minimum, the following business functions will be summarized in the report:

- Determining eligibility and enrollment within the exchange. Linkages will be reviewed between Medicaid/CHIP, the proposed federal basic health option (possibly using the state's current Basic Health Plan or Medicaid program as proxies), community support organizations, insurers, producers, anticipated roles for navigators, the Department of Treasury, the Department of Health and Human Services, and other applicable state or federal agencies.
- Offering a choice of health plans and the interplay between the exchange, navigators, insurers, employers, and employees or individual enrollees.
- How to involve comparative information on health plans in coverage decisions and cost containment initiatives.
- Providing subsidies through premium tax credits or cost-sharing reductions.

- A coordinated review of reinsurance, risk corridors, and risk adjustment methods.
- Collecting and disbursing premium revenue and coordinating these payments with the coverage responsibilities of employers and the payment of vouchers.
- Implementing the individual mandate in coordination with the Department of Treasury, the role of Department of Health and Human Services, the choices available to employers, employees, and individual applicants and enrollees.
- The certification of plans and the coordination with the regulatory processes currently performed by the Office of Insurance Commissioner.
- The potential role of a proposed federal basic health option and the linkage between eligibility and subsidies offered through Medicaid and the exchange.
- Offering consumer operated and oriented plans (CO-OPs) or multi-state plans.

Resources and Capabilities: With grant funding, the HCA will begin building internal knowledge and capacity by funding a project manager and three new staff positions. At this time, the HCA plans to contribute an additional part-time policy analyst. The HCA can also draw upon expertise within the Basic Health Plan, the state Medicaid program, public employee health plans, and the Health Insurance Partnership,

The Health Insurance Partnership (HIP) is an exchange that subsidizes coverage for low-wage small employers. It is a three-share (employer, employee, and federal grant dollars contribute to the premium) program that provides sliding-scale premium subsidies to low-income individuals of an eligible small group. The HCA's recent experience developing and implementing the HIP could be instrumental in developing this project plan if federal regulations clarify that the exchange can subsidize low-income individuals enrolled in small group plans. (The Affordable Care Act does not provide direction on

the provision of premium or cost-share reduction subsidies to low-income individuals of a small group. The Act also does not specifically preclude providing subsidies to low-income individuals enrolled in a small group qualified health plan.)

Governance: The Planning Report will introduce a state exchange as a “straw” option. A broad series of governance structures relevant to a state exchange will be openly discussed with the JSC Advisory Group and other stakeholders.

The HCA will continue to plan for a state-governed and administered exchange unless all feasible options for a state exchange are exhausted. In that event, the HCA will use the expertise developed through the planning and implementation grants to move toward federal options, and assess the governance and administrative structures needed to support a federal exchange.

Finance: Identify and describe the primary high-level finance, accounting, budgeting, and audit needs of operating an exchange. This high-level description will include the cash flow and reporting between the exchange and insurers that is necessary to secure and retain coverage for individuals, employers, Medicaid/CHIP, and the proposed federal basic health option. A preliminary review will include the fundamental administrative cash flows, reporting responsibilities, and the processes contemplated to support risk management. Expertise built within our state’s current Basic Health Plan and HIP can offer insights into this review. Any role of the exchange in quoting, tracking, or reconciling premium tax credits or cost-sharing reduction subsidies, including any reporting to the Department of Treasury or Health and Human Services, will need to be explored and summarized.

The review will need to document the high-level process of the assessment, collection, and distribution of employer vouchers. The HCA will also investigate and review any involvement between the exchange and offering small business tax credits. Financial reporting to support the individual mandate and coverage requirements for employers will also be documented. Requirements for financial reports that support state budgeting or performance measurements for intergovernmental or public reporting will need to be described. Finally, our initial summary will need to recognize the necessity of preparing financial information for Washington State and Department of Health and Human Services audits.

Technical Infrastructure (Preliminary Technology Infrastructure Review and

Assessment): A solid technology platform will be critical to the successful implementation of an exchange. An assessment of current information technology architecture is a top priority and will be an essential component in our state's ability to develop, implement, and administer an exchange. The technology infrastructure review will assess the information technology needs of a state-based exchange and technology integration opportunities among public agencies and private-sector organizations. The information technology assessment will be informed by the decision-support capacity (described in the background section), business functions and linkages, and finance and accounting, and include:

- The review and documentation of technology architecture, systems functionality and capacity, to include an overall assessment of the availability and compatibility of existing systems, and where possible, the use of existing state systems among

other components of an overall approach to planning for the information technology architecture for an exchange.

- Evaluate existing applications architecture and the necessary links to back-end processing systems.
 - Document mandatory technical and functional capabilities; examining networks, databases, and applications.
 - Review of existing data architecture to determine compatibility with the needs of an exchange.
 - Assess exchange requirements related to eligibility systems and electronic interface with a web portal. Examine elements of data matching and linkages to other major programs that offer coverage.
 - Information technology/website infrastructure assessment, including gap analysis of existing state tools that can be leveraged for an exchange.

The review will describe high-level options for an information technology platform with the compatibility and capacity to support an exchange's significant eligibility and payment functions and accommodate multiple linkages to private and public organizations.

Regulatory or Policy Actions: The HCA's preliminary Planning Report will help to outline authorizing legislation necessary to provide direction on governance and development of a state exchange. The HCA will assist legislative staff to prepare authorizing legislation.

Business Operations: HCA staff and consultants will identify methods to promote cost containment through an exchange. The following concepts will be among the ideas explored and considered for further development in the Implementation Plan:

- Certifying and selecting health plans based upon an ability to reward quality and cost-effectiveness through market-based incentives.
- Producing and presenting standardized comparative information on the cost and quality of qualified health plans.
- Subsidizing small group and individual health plans to promote quality and cost-effectiveness.

Preliminary Planning Report Reviewed: Review of the report by the JSC Advisory Group and the public will begin by November 15, 2010.

Phase 3: Final Planning Report

Legislation/Comments and Revisions: The HCA and consultants anticipate numerous stakeholder discussions, reflecting the intense interest in an initial report on an exchange, as planning resumes on the final report. HCA staff will help legislative staff prepare legislation that provides the authority to design and develop a state-governed and administered exchange.

HCA staff and consultants will revise the Preliminary Planning Report based upon stakeholder comments, the proposed authorizing legislation, and any clarifications provided by federal regulations. The final product will be a consistent set of high-level requirements and business functions for a Washington State exchange.

Final Planning Report: The final Planning Report will be delivered to the HCA Administrator for approval by January 1, 2011. The Report will be submitted to the

Governor, Insurance Commissioner, and JSC, and released to the JSC Advisory Group and the public.

Phase 4: Implementation Plan

Introduce Legislation and Consider a Different Advisory Relationship: Authorizing legislation for a state exchange will likely be introduced in the 2011 legislative session as we begin work on the Implementation Plan.

The HCA will consider if the development of the Implementation Plan necessitates a new group of central advisors for stakeholder input and support. The HCA anticipates more involvement from this new group of advisors in designing and developing options and recommendations for the governance and administration of an exchange. The membership of this new group will need to reflect the perspectives and expertise anticipated by a hands-on role.

Developing an Implementation Plan: The purpose of the Implementation Plan is to develop options and recommendations that best fit the high-level business requirements and functions described in the Planning Report.

The HCA will begin by developing a common perspective among advisors regarding the scope of options for a Washington State exchange. The Implementation Plan will reflect the risk, cost, and benefits of the administrative operation envisioned for the exchange and use gap analysis to clarify the estimated and available administrative capacity developed within these categories:

Background Research: Options for new or upgraded analytic capacity or data sources that meet the needs described in the Planning Report will be described and justified by

Milliman and M A Cook Corporation. Those consultants will likely compare “make or buy” options for information technology systems and consider the possibility of joining a consortium with common analytic needs.

Stakeholder Involvement: The hands-on advisors will now become the focal point of our stakeholdering efforts in the development of the Implementation Plan. An open presentation of options and recommendations designed to attract a broad set of stakeholders will be conducted. The budget also supports meetings with key organizations and individuals.

Program Integration: Options and recommendations will be developed to address integration requirements for business functions described in the Planning Report: the proposed federal basic health option (if selected), eligibility and enrollment, premium collection and disbursement, linkages between private and public organizations, plan certification, determining processes for applying the individual mandate, providing subsidies, and how to offer a choice of health plans.

Resources and Capabilities: To develop meaningful options and credible recommendations, the HCA’s project staff and consultants will need to draw extensively upon the expertise within the agency to explore how to leverage existing business functions within Medicaid, the current state Basic Health Plan, the HIP, and our risk adjustment system for public employee health plans. Greater involvement from our private sector partners throughout the insurance industry is also anticipated. These relationships were formed through establishing and jointly administering managed care

coverage in Medicaid, the state's current Basic Health Plan, public employee health plans, and the HIP.

Finance: Options for satisfying the financial and accounting requirements expressed in the Planning Report will be developed and analyzed. Gap analysis will likely be employed to clarify the extent of our current financial systems' capacity to satisfy an exchange's financial and accounting needs and guide "make or buy" recommendations.

Technical Infrastructure (Final Technology Infrastructure Review and

Assessment): A detailed road-map for developing and managing the information technology infrastructure of an exchange will be developed in this report. The Information Technology Manager will use the findings and results in this report to develop detailed functional requirements that inform the development of a high-level Information Technology Work Plan for the design, implementation, and operation of an exchange.

The information technology infrastructure for the exchange will need to support consumer needs as well as comply with federal and state direction. The infrastructure under development will be compared with components of the Medicaid and State Health Plan Technology Architecture and Infrastructure to promote efficient implementation and ensure compatibility with state information technology and security standards.

The provision of seamless enrollment procedures is a key component of any health coverage system and presents specific challenges to eligibility systems. The assessment of capabilities and capacity of Washington's Automated Client Eligibility System (ACES) is an essential component of the Technology Infrastructure Review and Assessment. An IBM Global Technology Services consultant, specializing in the ACES

system and supporting technology, will provide a detailed assessment of the eligibility decisions and flow of applicants and enrollees within, 1) an exchange, 2) the proposed federal basic health option (if selected), and 3) Medicaid/CHIP programs. The assessment will also explore opportunities for the eligibility system to interact with a consumer portal. Technical questions, such as where eligibility processing will take place (on the exchange platform or on a back-end system), will be documented along with other capabilities explored in this assessment.

A core set of functional requirements will need to be developed and assessed. To establish a detailed work plan, it is expected that priorities for the development of the technology infrastructure will need to be set among the core functional requirements. This will ensure that the pace of developing the information technology architecture can appropriately support an exchange and the linkages to other public programs. Along with eligibility, these core requirements will be assessed:

- Education of consumers through information about responsibilities and consumer options. Technical recommendations will explore ease of use for consumers.
- Decision support and benefit modeling tools that provide consumers with the capability to compare plans and estimate annual health care expenses and receive suggested coverage options that best address their needs.
- Functionality to purchase a plan on-line and/or online payment capability including options for full-function premium billing, automatic premium deductions or ePayment service.
- Online enrollment and re-enrollment including self service member account management.

- Health Information Technology initiatives that could enhance care delivery or lower administrative costs.

The assessment will conclude with a review of existing capacity and development of success criteria for volume and sustainability.

Regulatory or Policy Actions: The Implementation Plan will provide an outline for additional legal direction needed in the 2012 legislative session.

Business Operations: With assistance from HCA staff and consultants, the designated group of advisors will guide the HCA's selection and assessment of health policy issues presented in the Planning Report.

Implementation Grants: Respond to anticipated grants released in the spring of 2011, based upon work performed to date.

Final Implementation Plan: The Plan will help the state transition from designing exchange options to developing and implementing an exchange. The final Implementation Plan will be delivered to the HCA Administrator for approval by September 30, 2011. The Implementation Plan will be submitted to the Governor, Insurance Commissioner, and JSC, and released to the JSC Advisory Group and the public.

Phase 5: Implementation Activities

Phase 5 lists anticipated implementation activities through January 1, 2014.

Washington State Health Exchange Project Work Plan and Timeline

Date	Activity or Deliverable	Lead
Phase 1: Pre-grant Activities Sep 1 – 30, 2010		
Sep 1 – Sep 30, 2010	Washington State Health Care Authority (HCA) recruits staff and establishes contracts with consultants.	Michael Arnis, Policy Analyst
Sep 1 – Sep 30, 2010	The HCA anticipates establishing a central stakeholder relationship with the Joint Legislative Select Committee (JSC) Advisory Group on the Exchange and Insurance Reforms for the development of a Planning Report.	Richard Onizuka, Project Sponsor
Sep 1 – Sep 30, 2010	HCA staff introduces stakeholders to proposed planning grant activities.	Michael Arnis, Policy Analyst
Sep 30, 2010	Planning grant awards by this date.	Richard Onizuka, Project Sponsor
Phase 2: Preliminary Planning Report and Preliminary Technology Infrastructure Review and Assessment Oct 1, 2010 – Jan 1, 2011		
Oct 1 – Nov 15, 2010	Develop a Preliminary Planning Report with the purpose of identifying and describing high-level requirements and business functions of a state-based exchange.	HCA Staff – Project Manager Consultant – Milliman Consultant – M A Cook Corporation.
Oct 1, 2010 – Jan 1, 2011	Develop a Preliminary Technology Infrastructure Review and Assessment. The purpose of the report is to review the information technology needs of a state-based exchange and assess the opportunities of integrating systems development within the capability and capacity of the state’s technology architecture.	HCA Staff – Information Technology Manager Consultant – M A Cook Corporation.
Nov 15, 2010	Preliminary Planning Report prepared for review. Review begins by the JSC Advisory Group on the Exchange and Insurance Reforms and the public.	HCA Staff – Project Manager Consultant – Milliman

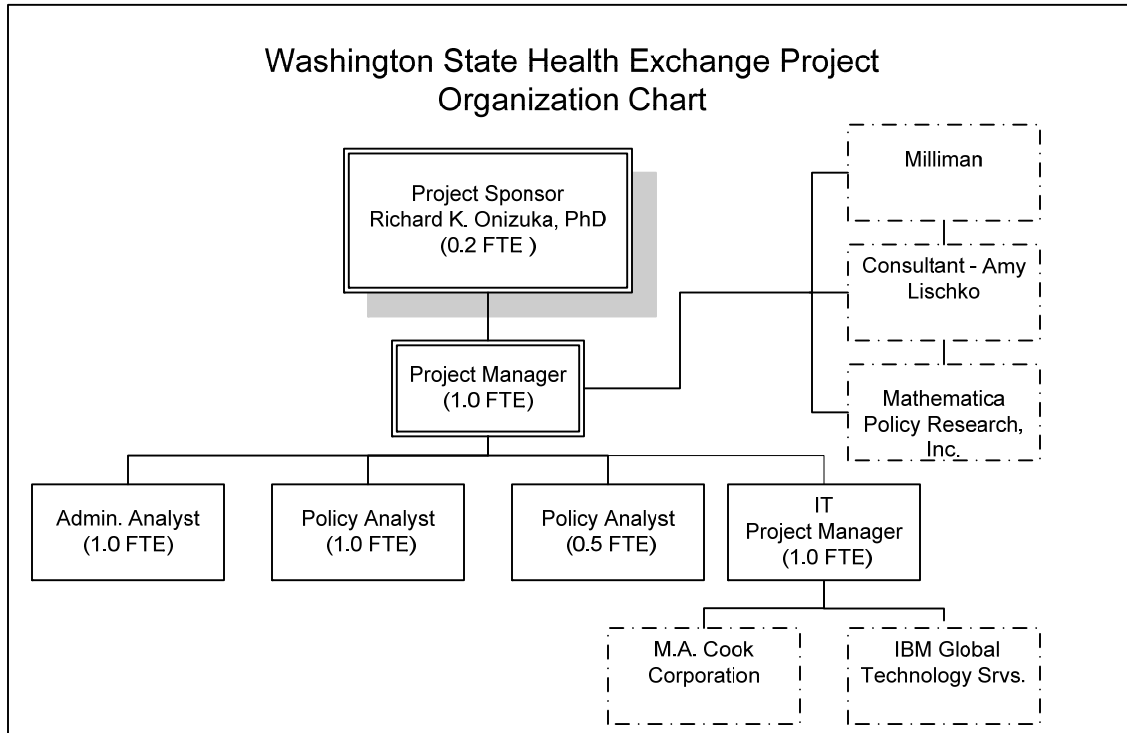
Date	Activity or Deliverable	Lead
Phase 3: Final Planning Report and Preliminary Technology Infrastructure Review and Assessment Nov 16, 2010 – Jan 1, 2011		
Nov 16 – Dec 15, 2010	Assist Legislative Staff to prepare proposed authorizing legislation for a state-based exchange.	Project Manager
Nov 16 – Dec 15, 2010	Respond to comments on the draft Preliminary Planning Report. Health Care Authority staff and consultants present findings to stakeholders and organizations.	HCA Staff – Project Manager Consultant – Milliman
Dec 16 – Dec 31, 2010	Revise the Preliminary Planning Report.	HCA Staff – Project Manager Consultant – Milliman
Jan 1, 2011	Final Planning Report completed. Delivered to the Administrator of the HCA for approval by January 1, 2011, the Final Planning Report will be submitted to the Governor, Insurance Commissioner, and JSC, and released to the JSC Advisory Group, and the public.	HCA Staff – Project Manager Consultant – Milliman
Jan 1, 2011	Preliminary Technology Infrastructure Review and Assessment completed. Delivered to the Information Technology Manager and reviewed by Information Technology executives to establish initial technology priorities and select an information technology platform with the capability and capacity to support an exchange.	HCA Staff – Information Technology Manager Consultant – M A Cook Corporation.
Phase 4: Develop Implementation Plan		
Jan – Apr, 2011	Washington State (“long”) legislative session. (Biennial Budget for FY11-13 established.)	N/A
Jan, 2011	Introduce legislation that establishes the necessary authority to design and develop a state exchange.	HCA Staff – Project Manager
Jan, 2011	Consider if the development of the Implementation Plan necessitates a new group of central advisors.	Project Sponsor

Date	Activity or Deliverable	Lead
Jan 1 – Jun 30, 2011	<p>Develop the Final Technology Infrastructure Review and Assessment</p> <p>This assessment will describe a core set of information technology requirements and prioritize detailed options for enhancing our information technology architecture in support of an exchange.</p>	HCA Staff – Information Technology Manager Consultant – M A Cook Corporation.
Jul 1, 2011	<p>Final Technology Infrastructure Review and Assessment completed.</p> <p>The assessment will provide the Information Technology Project Manager with the findings and results necessary to develop an Information Technology Work Plan to guide the development of technology systems in support of implementing an exchange.</p>	HCA Staff – Information Technology Manager Consultant – M A Cook Corporation.
Jan 1 – Sep 30, 2011	<p>Develop Implementation Plan.</p> <p>The purpose of the Implementation Plan is to develop options and recommendations that best fit the high-level business requirements and functions described in the Planning Report.</p>	HCA Staff – Project Manager Consultant – Milliman
Spring 2011	Respond to potential implementation grants based on the Advisory Committee’s work plan and development of the implementation guide, to date.	Project Manager
Sep 30, 2011	<p>Implementation Plan Completed.</p> <p>Delivered to the Administrator of the HCA for approval by September 30, 2011, the Implementation Plan will be submitted to the Governor, Insurance Commissioner, and JSC, and released to the JSC Advisory Group, and the public.</p>	HCA Staff – Project Manager Consultant – Milliman
Phase 5: Implementation Activities		
Oct 1, 2011	Anticipated start date of Implementation Grants.	Project Manager
Oct 1 - Dec 15, 2011	<p>Assist Legislative Staff to prepare proposed implementation legislation for a state-based exchange.</p> <p>Directs implementation of exchange based upon federal laws and regulations, the recommendations of the Implementation Plan, and stakeholder advice and guidance.</p>	Project Manager
Jan – Mar, 2012	Washington State (“short”) legislative session. (Supplemental FY11-13 budget established.)	N/A

Date	Activity or Deliverable	Lead
Jan, 2012	Introduce proposed implementation legislation for a state-based exchange. Last scheduled opportunity to make legislative changes before the Secretary of Health and Human Services can approve a state-governed and administered exchange by January 1, 2013.	Project Sponsor
Jan 1 – Dec 31, 2012	Washington State develops a state-based exchange.	Project Manager
Jan 1, 2013	Scheduled date of approval for state-based exchanges by the Secretary of Health and Human Services.	Project Manager
Jan – Apr, 2013	Washington State (“long”) legislative session. (Biennial Budget for FY13-15 established.)	N/A
Jan 1 – Dec 31, 2013	Washington State prepares to implement a state-based exchange.	Project Manager
Spring, 2013	Governing Board likely established in this time period.	Project Sponsor
Sep 1 – Oct 31, 2013	Possible “go live” time period: accept applications, promote exchange, and provide customer service.	Project Manager
Jan 1, 2014	Coverage begins through a state-based exchange.	Project Sponsor

Washington State Health Exchange Project Organization Chart and Key Personnel

Includes additional information on roles and responsibilities based upon HHS review and communication of September 14, 2010



Washington State Health Exchange Project – Key Personnel

Title/Name	Position Description
Project Sponsor, Richard K. Onizuka, PhD	As the executive level sponsor, Dr. Onizuka is accountable for successfully completing the project. He provides strategic direction and goal setting. He ensures grant activities remain aligned with project goals and the project is adequately resourced. He ensures problems are effectively escalated and resolved. He receives direct recommendations, updates, and reports from the project manager.
Project Manager	The Project Manager is responsible for the day-to-day activities of the project. Responsibilities include: managing the scope and goals of the project, timely and effective completion of tasks, managing resources, risk mitigation, adjusting project timelines and milestones as appropriate. The Project Manager will prioritize, resolve, and escalate issues; reviews project status, assignments, and resource needs. The Project Manager is the primary liaison to the Project Sponsor and provides updates and reports to the Sponsor. The

Project Manager guides the work products of all staff.

Administrative Analyst

The Administrative/Analyst serves as confidential assistant to the Project Manager and other team members. The Administrative/Analyst also provides limited analysis or assists the analysis of the Project Manager or the Policy Analyst for specific tasks.

Policy Analyst

Policy Analysts work independently and in teams. They use their problem-solving and planning skills to analyze issues or problems, develop options, make recommendations, and complete work that supports project activities. They will communicate, prepare and provide presentations and reports, and coordinate with other analysts, consultants, and managers to provide staff work that assists in decision-making.

IT Project Manager

The Information Technology Manager will use his or her knowledge and experience of information technology architecture to direct the work of M A Cook Corporation in producing the Preliminary and Final Technology Infrastructure Review and Assessment. The Information Technology Manager will direct the work of IBM Global Technology Services in the review of the technology that supports current and future eligibility determinations for health insurance coverage. The Information Technology Manager will be responsible for completing the high-level Information Technology Work Plan that provides a road map for systems development for implementation of an exchange and the linkages to private organizations and public agencies.

Washington State Health Exchange Project – Key Personnel

Consultant

Consulting Description

Milliman

Milliman will serve as the lead consultant for developing the Planning Report and the Implementation Plan. Milliman brings project coordination, actuarial analysis, benefit design, rating and risk management, health policy, and in-depth knowledge of Washington State's private and public health insurance markets to the project. Milliman currently provides actuarial analysis to the Washington State Health Care Authority and Washington State Medicaid programs.

Tim Barclay, FSA, MAAA, and Principal and Consulting Actuary will lead Milliman's consulting services to provide assistance in these key areas:

- Preliminary analysis of merging the individual and small group markets and preliminary analysis in consideration of a federal basic health option.
- Identifying and describing high-level requirements and business functions of an exchange for the Planning Reports, reflecting Mr. Barclay's extensive knowledge of the Washington State health insurance markets.
- In support of the Health Care Authority, extensive stakeholder discussions with key members of the Washington State health insurance system on the important policy and operational issues of an exchange. His identification and summary of key issues will be used in facilitating many of the requirements and business functions pertinent to designing an exchange for Washington State's health insurance market.
- Extensive assistance in developing options for the Implementation Plan that address the high-level requirements and business functions represented in the Planning Reports, and reflect options suitable for an exchange designed for Washington State.

Amy Lischko

Ms. Lischko is a recognized national expert in health insurance exchanges. She will provide extensive knowledge of health insurance markets and exchanges and/or risk pool arrangements in other states, benefits and rating, and health policy analysis to the project. She consulted with Washington State in the development of the Health Insurance Partnership.

Ms. Lischko's health care policy skills will primarily provide assistance in the following areas:

- Extensive assistance in identifying and describing high-level requirements and business functions for the Planning Reports that reflect the federal directions of a health insurance exchange.
- As feasible, Ms. Lischko will assist the Health Care Authority to facilitate key policy and operational discussions in stakeholder meetings with key members of the Washington State health insurance system. Although travel might limit her face-to-face stakeholdering opportunities, Ms. Lischko's identification and summary of key issues will consistently be used in facilitating discussions of high-level requirements and business functions.
- Ms. Lischko will assist the Health Care Authority in developing key, selected options for the Implementation Plan. The options developed with Ms. Lischko's assistance will reflect her knowledge of exchange operations, likely focusing upon developing a functional, sustainable market for offering insurance within an exchange.

**Mathematica
Policy Research,
Inc.**

Mathematica Policy Research, Inc. is known nationally for expertise in health policy cost containment and physician payment systems. Mathematica Policy Research, Inc. will also bring extensive knowledge of private and public health insurance markets in Washington and other states to the project.

Ms. Deborah Chollet, Senior Fellow for Mathematica Policy Research, Inc., will provide consulting services to the Health Care Authority under the grant. Ms. Chollet's extensive knowledge of health care policy will be used to provide assistance in these areas:

- For the Planning Report, Ms. Chollet will take the lead on identifying and briefly describing cost containment initiatives that could potentially be implemented through, or in support of, an exchange.
- For the Implementation Plan, Ms. Chollet will further develop these cost containment initiatives into options for likely detailed analysis should grants be awarded in the future.
- Also, for the Implementation Plan, Ms. Chollet will assist in developing options, likely in areas of rating and risk management such as reinsurance, risk corridors, and risk adjustment.

**M A Cook
Corporation**

M A Cook Corporation brings extensive knowledge of information technology enterprise architecture throughout Washington State government, specializing in the Washington State Medicaid Program. M A Cook Corporation will develop the Preliminary and Final Technology

Infrastructure Review and Assessment.

M A Cook's information technology review and assessment will be instrumental in determining whether Washington State's technology infrastructure can provide a computing platform to support an exchange. With a computing platform identified, additional analysis by M A Cook will be needed to recommend numerous information technology options with the purpose of providing technological support of a state-based exchange.

IBM Global Technology Services

IBM Global Technology Services brings extensive knowledge of eligibility systems used for offering health insurance coverage through Medicaid programs. IBM Global Technology Services will provide an assessment of systems that determine eligibility for publicly-offered health insurance coverage and provide recommendations for eligibility determination for publicly-offered health insurance coverage under an exchange, expanded and reformed Medicaid programs, the proposed federal basic health option, or other national health reform criteria.

The information technology that supports and manages eligibility for an exchange and for Medicaid programs has been identified by state technology executives as an important function that must be successfully supported by the technology infrastructure. IBM Global Technology Services will analyze the needs of the new federal eligibility requirements and assist the state to assess the capacity and capability of our current technology architecture to support the new business functions surrounding eligibility.