



Washington Health Benefit Exchange

Joint Select Committee on Health Care Oversight

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Today's Agenda

- Open Enrollment and Post Open Enrollment
- 2015 Budget
- Invoicing and Payment Related Issues



Key Metrics

- Since Oct. 1, 2014, nearly 1.2 million people enrolled in health coverage through Washington Healthplanfinder with 660K new enrollees.
 - ✓ QHP new enrollments (paid once): over 164,000
 - ✓ New MAGI Medicaid: 326,447
 - ✓ Medicaid previously eligible but not enrolled: 171,451
 - ✓ Medicaid renewals: 516,539
- New MAGI Medicaid enrollment exceeded January target, for 2018.
- Call Center volume exceeded all forecasts
 - ✓ Increased staff from 140 to over 500
 - ✓ Increased calls handled from 1,500 day to about 8,000 day



Enrollment Highlights

- **Washington Healthplanfinder attracted a wide variety of consumers:**
 - ✓ About 24% of QHP enrollments are not receiving any tax credits (over 400% FPL)
 - ✓ “Young Invincibles” (ages 18-34) accounted for 25% of enrollments, 29% in March. This number grows to more than 35% when including Medicaid
- **People recognize the brand, used consumer assistance**
 - ✓ 57% of state residents surveyed in April knew of Washington Healthplanfinder
 - ✓ 43% of new enrollments assisted by In-Person Assisters or agents/brokers
- **The Exchange has leveraged federal dollars to benefit residents and the state**
 - ✓ As of June, more than \$200 million in federal tax credits have gone to residents to reduce their premium costs
 - ✓ Residents have also received over \$30 million in federal cost-share reductions to reduce the cost of hospital and provider visits
- **The Exchange is already having a big impact**
 - ✓ Recent OIC report shows that the individual health insurance market has expanded by more than 30%, uninsured population reduced by more than 370,000.
 - ✓ Harborview Medical Center recently reported that uninsured patient dropped from 12% last year to two percent this spring. (Kaiser Health News, June 2014)



What worked well

- ✓ Early start, structural set up, bipartisan support from elected officials, Board
- ✓ Managing scope, governance in a transparent manner
- ✓ Key stakeholder engagement
- ✓ Strong independent QA and IV&V
- ✓ Good vendor partnerships
- ✓ Strong marketing and outreach, engaged community partners
- ✓ Collaboration and coordination among key state agencies



Key Learnings

- ✓ There has been a seismic shift to the healthcare landscape in our state
- ✓ New process generated new customer needs
- ✓ Testing the system: limited time, real world environment
- ✓ Understanding & projecting volume (call center, renewals, etc.)
- ✓ Remain nimble and execute changes as necessary



Moving Forward

- Understanding what will be our normal operating conditions, and scope of work
- Continuing to address short and long-term needs, including:
 - ✓ Special enrollments and ongoing outreach
 - ✓ Immediate site fixes
 - ✓ Optimizing the customer experience
 - ✓ Future enhancements, e.g., Medicaid shopping
 - ✓ Washington Healthplanfinder Business (SHOP)
 - ✓ 2015 Open Enrollment (Nov. 15-Feb.15), and new plan options



2014-2015 Projected Enrollment

- New enrollment projections being completed to inform budget discussions
- Projections take into account:
 - First open enrollment results
 - Federal change to second open enrollment window
- New baseline assumption for start of second open enrollment (Nov. 2014): 148,000
- New baseline assumption for close of second open enrollment (March 2015): 233,000



Budgeting for 2015

- Operation costs through 2014 are fully funded by Federal Grants
- The following funding sources are available to the Exchange during 2015:
 - ✓ Qualified Health and Dental Plans Insurance Carrier premium taxes (2%) collected from insurance products sold in the Exchange during 2015
 - ✓ QHP/QDP Issuer (carrier) assessments
 - ✓ Medicaid cost allocation formula for 2015 being developed with HCA
- Board discussing 2015 budget to inform development of a supplemental and biennial budget request to legislature



2015 Exchange Budget And Assumptions Baseline

Function Area	Baseline (Millions)	Key Financial Drivers	Key Assumptions
IT	\$19	Operations, maintenance; Licensing fees	IT contractors; changes, maintenance
Operations	\$21	Call center; printing & postage	250 CSR staffing level
Communications	\$4	Navigator program; advertising & marketing	Elimination of tv, radio, print ads
Finance and Admin	\$4	External audits	Credit card fees
Policy, SHOP, Legal, Exec.	\$5	Actuarial; Consumer rating system; Agent/Broker support; Presiding officers	Detailed estimates and analysis; maintain minimal service level; Appeal review and decision

- Baseline budget to start board conversation; details publically available
- Stakeholder meetings with advocacy organizations, agents & brokers, associations, businesses, carriers and tribal organizations
- Continuing meetings with legislative staff, governor’s office and state agencies



Operational Requirements

REQUIRED

Call Center
Plan Certification
Pediatric dental
Translation/Interpreter Services
Consumer Survey
State Audit
Data Reporting to Federal Government
Reconciliation of enrollment information with carriers (834 files, ongoing, etc.)
Streamlined application (QHP and Medicaid) & eligibility determination

Navigator Program
Pediatric dental
Printing for required notices
SHOP
Consumer Rating System
Appeals

NOT REQUIRED

Outreach and Marketing
Specialized broker support
Post-eligibility referrals to WaConn (classic Medicaid, etc.)
Consumer decision/shopping tools (plan display features, etc.)
Provider directory
Adult dental
Premium aggregation and invoicing



2015 Baseline Budget - Other Considerations

- Possible federal supplemental grant request
- No-cost extension for specific, grant related activities
- Medicaid cost allocation formula for 2015 being developed with HCA



Invoice and Payment Related Issues

- Exchange's top priority
 - Additional Deloitte resources engaged
- Issues create a waterfall effect
 - Consumers: Invoices, Payments
 - Carriers: EDI files
 - Agents and brokers: Commissions
 - Providers: Coverage status
 - Customer Support and IPAs: Volume
- Major releases to address key areas of focus:
 - Changes to system design
 - Manual corrections to individual applications
- Validation revealed limited success



Immediate Invoice and Payment Action Plan

- ✓ Collection of all carrier related issues
 - Ongoing meetings to capture any and all inconsistencies
- ✓ Deploy emergency system and data releases
 - Identify, measure and correct
- ✓ Account-by-Account Audit
 - Review all Healthplanfinder accounts for discrepancies
- ✓ Establish path for technical proficiency
 - Assess business rationale to inform long-term solution



Resources

www.wahealthplanfinder.org

www.wahbexchange.org

1-855-WAFINDER (1-855-923-4633)

TTY/TTD for Deaf : 1-855-627-9604

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