Themes of 2020 Exchange
Health Plan Filings

- Many carriers submitted rate decreases
- More plan options for consumers
- Lower priced plans available in most counties for 2020
Number of Exchange Carriers in Each County
King County Landscape

6 carriers offering 2020 QHP coverage

- New carriers: BridgeSpan and LifeWise
- Returning carriers: Kaiser Foundation Health Plan of Washington, Coordinated Care, Molina, Premera Blue Cross

34 qualified health plans

- 2 catastrophic plans
- 11 bronze plans
- 14 silver plans
- 7 gold plans
Overview of King County 2020 Rates

- Rate changes in King County range from a decrease of more than 10% for Molina to an increase of 1% for Coordinated Care

- If consumer selects lowest priced plan in each metal tier, they will see the following rate changes:

<table>
<thead>
<tr>
<th>Metal Level</th>
<th>Rate Decrease/Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gold</td>
<td>-5%</td>
</tr>
<tr>
<td>Silver</td>
<td>1%</td>
</tr>
<tr>
<td>Bronze</td>
<td>-9%</td>
</tr>
</tbody>
</table>
King County: 2020 v 2019 Silver Rates

The offerings above are for a carrier's lowest-cost silver plan for a 40-year-old in King County.
King County: 2020 v 2019 Bronze Rates

The offerings above are for a carrier’s lowest-cost bronze plan for a 40-year-old in King County.
King County QHP Enrollment

**AGE BREAKDOWN**
- TOTAL: 69,425
- 65+: Total 1,351 (2%)
- 55-64: Total 18,393 (26%)
- 45-54: Total 13,992 (20%)
- 35-44: Total 11,665 (17%)
- 26-34: Total 11,989 (17%)
- 18-25: Total 5,480 (8%)
- <18: Total 6,555 (9%)

**SUBSIDIZED/NON-SUBSIDIZED**
- TOTAL: 69,425
- Non-Subsidized: Total 33,107 (48%)
- Subsidized: Total 36,318 (52%)

**ENROLLMENT BY FPL**
- <100%: 3,495 (5%)
- 100%-138%: 1,722 (2%)
- 139%-150%: 3,790 (5%)
- 151%-200%: 11,256 (16%)
- 201%-250%: 7,431 (11%)
- 251%-300%: 5,310 (8%)
- 301%-400%: 7,431 (11%)
- 401%-500%: 3,364 (5%)
- 501%-600%: 1,752 (2%)
- >600%: 446 (5%)
- Did not report: 20,038 (29%)
Example of Plan Shopping

Family in Seattle that does not report income
  • Maria: 63 years old
  • Bob: 64 years old
  • Alejandra: 25 years old

• They bought a gold plan for 2019 priced at $2,779/month

• If they stay in this same gold plan for 2020 the cost will drop to $2,245/month

They will save $534/month or $6,402/year compared to this year
Example of Plan Shopping

- Family in Kent with an annual income of $28,000
  - James: 53 years old
  - Vincent: 49 years old

- They bought a silver plan for 2019
  - Total premium: $1,524
  - Tax credit: $991
  - **Premium after tax credits:** $533

- If they stay in this same silver plan for 2020, their cost will drop
  - Total premium: $1,483
  - Tax credit: $978
  - **Premium after tax credits:** $505

They will save **$28/month** or **$336/year** compared to this year.
Example of Plan Shopping

- Family in Shoreline with an annual income of $55,000
  - Pat: 49 years old
  - Jamaal: 46 years old
  - Sam: 21 years old

- They bought a gold plan for 2019
  - Total premium: $1,561
  - Tax credit: $884
  - **Premium after tax credits:** $717

- If they stay in this same gold plan for 2020, their cost will drop
  - Total premium: $1,500
  - Tax credit: $835
  - **Premium after tax credits:** $665

They will save **$52/month** or **$624/year** compared to this year.
Dental

- 4 issuers offering dental in King County for 2020
  - 3 Pediatric-only plans
  - 3 Family dental plans
- Statewide family dental coverage
- LifeWise has introduced a new family dental plan
Family Dental Rates

<table>
<thead>
<tr>
<th>Provider</th>
<th>2019 Rate</th>
<th>2020 Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delta Dental</td>
<td>$38</td>
<td>$37</td>
</tr>
<tr>
<td>Dentegra</td>
<td>$26</td>
<td>$22</td>
</tr>
<tr>
<td>LifeWise (new for 2020)</td>
<td>$36</td>
<td></td>
</tr>
</tbody>
</table>
Auto Renewals

- Exchange will re-enroll consumers into their same plan if possible
  - ~167,000 enrollees, or more than 85 percent of enrollees, will be auto-renewed into the same plan for PY 2020

- Approximately 16,000 enrollees in King County will lose their current plan but be able to keep their same carrier
  - Premera is discontinuing their PersonalCare plans
  - Exchange will re-enroll these consumers into Premera’s Preferred plans
  - Metal level will remain the same
Plan Preview

- Around October 21, a “plan preview” period will start for customers visiting Washington Healthplanfinder
- They will be able to browse 2020 plans prior to the start of open enrollment
- An updated homepage mid-October will highlight “preview” option
Plan Preview

Enter your details to browse plans

SELECT THE PLAN YEAR:

2019  2020

YOUR SEARCH

YOUR DETAILS
Coverage Year: 2018
Male, 30
Zip: 58507
Income: Please provide more information to see estimated eligibility for low cost of free insurance.

PLAN OPTIONS

LifeWise Balanced Care 4 (2019)
EST. PREMIUM $0.00/month

LifeWise Balanced Care 4 (2019)
EST. PREMIUM $0.00/month

DEDUCTIBLE
$1,850 (Individual)
$3,700 (Family)

OUT-OF-POCKET MAX
$1,850 (Individual)

QUALITY RATING
SILVER

OUT-OF-POCKET ESTIMATE

THIS PLAN COVERS

Add

MORE INFORMATION ON THIS PLAN

Add

Compare
Plan Available 11/1/2019
Remind Me

Get Help Finding a Plan
Smart Planfinder
Change My Information
Learn about Smart Planfinder

Enter your email address to get notified when these plans are available.

Submit
System Hours

- Washington Healthplanfinder now has the ability to stay online when eligibility service is down.
Shopping Tips
## Trends: Exemptions from Deductible

### OUT-OF-POCKET COSTS

**(Adult = 19 and older)**

<table>
<thead>
<tr>
<th>SERVICES COVERED BEFORE DEDUCTIBLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>First 3 primary care visits, preventive care services, preferred generic drugs, abortions, nutritional therapy, hospice, and pediatric eye exam and glasses</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ANNUAL DEDUCTIBLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>$5,500 Individual / $11,000 Family</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ANNUAL PRESCRIPTION DRUG DEDUCTIBLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Included in annual deductible</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ANNUAL OUT-OF-POCKET MAXIMUM</th>
</tr>
</thead>
<tbody>
<tr>
<td>$7,150 Individual / $14,300 Family</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PREVENTIVE SERVICES WITH $0 CO-PAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>See a list of covered preventive services at <a href="https://www.healthcare.gov/coverage/preventive-care-benefits/">https://www.healthcare.gov/coverage/preventive-care-benefits/</a></td>
</tr>
</tbody>
</table>
## Trends: Exemptions from Deductible

<table>
<thead>
<tr>
<th>IN NETWORK</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ANNUAL PRESCRIPTION DRUG DEDUCTIBLE</strong></td>
</tr>
<tr>
<td>Included in annual deductible</td>
</tr>
<tr>
<td><strong>ANNUAL OUT-OF-POCKET MAXIMUM</strong></td>
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<td>$7,050 Individual / $14,100 Family</td>
</tr>
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<td>See a list of covered preventive services at <a href="https://www.healthcare.gov/coverage/preventive-care-benefits/">https://www.healthcare.gov/coverage/preventive-care-benefits/</a></td>
</tr>
<tr>
<td><strong>PRIMARY CARE PROVIDER REQUIRED</strong></td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td><strong>PRIMARY CARE VISIT TO TREAT AN ILLNESS OR INJURY</strong></td>
</tr>
<tr>
<td>$30 Copay</td>
</tr>
<tr>
<td><strong>SPECIALIST REFERRALS REQUIRED</strong></td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td><strong>SPECIALIST VISIT</strong></td>
</tr>
<tr>
<td>$60 Copay</td>
</tr>
<tr>
<td><strong>URGENT CARE VISIT</strong></td>
</tr>
<tr>
<td>$100 Copay</td>
</tr>
</tbody>
</table>
# Trends: Co-Pay Accumulator Policies

<table>
<thead>
<tr>
<th>Services You May Need</th>
<th>Participating Provider (You will pay the least)</th>
<th>Non-Participating Provider (You will pay the most)</th>
<th>Limitations, Exceptions, &amp; Other Important Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary care visit to treat an injury or illness</td>
<td>$25 <strong>copay/office visit deductible does not apply</strong></td>
<td>Not covered</td>
<td>None</td>
</tr>
<tr>
<td>Specialist visit</td>
<td>$75 <strong>copay/visit deductible does not apply</strong></td>
<td>Not Covered</td>
<td><strong>Preauthorization</strong> may be required, or services not covered.</td>
</tr>
<tr>
<td>Preventive care/screening/immunization</td>
<td>No charge</td>
<td>Not Covered</td>
<td>You may have to pay for services that aren’t <strong>preventive</strong>. Ask your <strong>provider</strong> if the services you need are preventive. Then check what your <strong>plan</strong> will pay for.</td>
</tr>
<tr>
<td>Diagnostic test (x-ray, blood work)</td>
<td>$40 <strong>copay/test for blood work deductible does not apply 40% coinsurance test for x-rays</strong></td>
<td>Not Covered</td>
<td>None</td>
</tr>
<tr>
<td>Imaging (CT/PET scans, MRIs)</td>
<td>40% <strong>coinsurance</strong></td>
<td>Not Covered</td>
<td><strong>Preauthorization</strong> is required or Imaging services are not covered.</td>
</tr>
<tr>
<td>Tier 1 – Preferred Generic Drugs</td>
<td>$15 <strong>copay/prescription deductible does not apply</strong></td>
<td>Not Covered</td>
<td><strong>Preauthorization</strong> may be required, or services not covered. Mail-order Prescription Drugs are available for up to a 90-day supply and is offered at two times the 30-day retail prescription <strong>Cost Sharing</strong>. Depending on Tier level this will be either a <strong>Copayment</strong> or a <strong>Coinsurance</strong>. For brand name drugs with a generic equivalent, coupons or any other form of third-party <strong>prescription drug</strong> cost sharing assistance will not apply toward any <strong>deductibles</strong> or annual <strong>out-of-pocket limits</strong>.</td>
</tr>
<tr>
<td>Tier 2 – Preferred Brand Drugs</td>
<td>$60 <strong>copay/prescription deductible does not apply</strong></td>
<td>Not Covered</td>
<td></td>
</tr>
<tr>
<td>Tier 3 – Non-Preferred Brand and Generic Drugs</td>
<td>40% <strong>coinsurance</strong></td>
<td>Not Covered</td>
<td></td>
</tr>
</tbody>
</table>
Smart Planfinder Tips and Tricks

Smart Planfinder will help you choose a plan that best fits your needs. Answer a few questions to find Smart Choice plans that may be a smart fit based on your provider, prescription needs, and estimated costs. Learn more.

Add up to 5 providers or facilities to see if they are covered.

- Search Providers
- Search Facilities
- For example, Sally Johnson
- near zip: 98002

Facility
- Uw Medicine Northwest Physicians
  501 N 34th St
  Seattle, WA 98103

On average, how often do you expect each member of your household to visit a doctor this year? This could include checkups, lab tests, urgent care, therapy, etc.

- 0-1 visits per year
- 2-3 visits per year
- 4-6 visits per year
- 7 or more visits per year

Add up to 5 prescriptions to see if they are covered.