

THE 23RD PRINCETON CONFERENCE

HEALTH INSURANCE EXCHANGES: VALUES & CONCERNS

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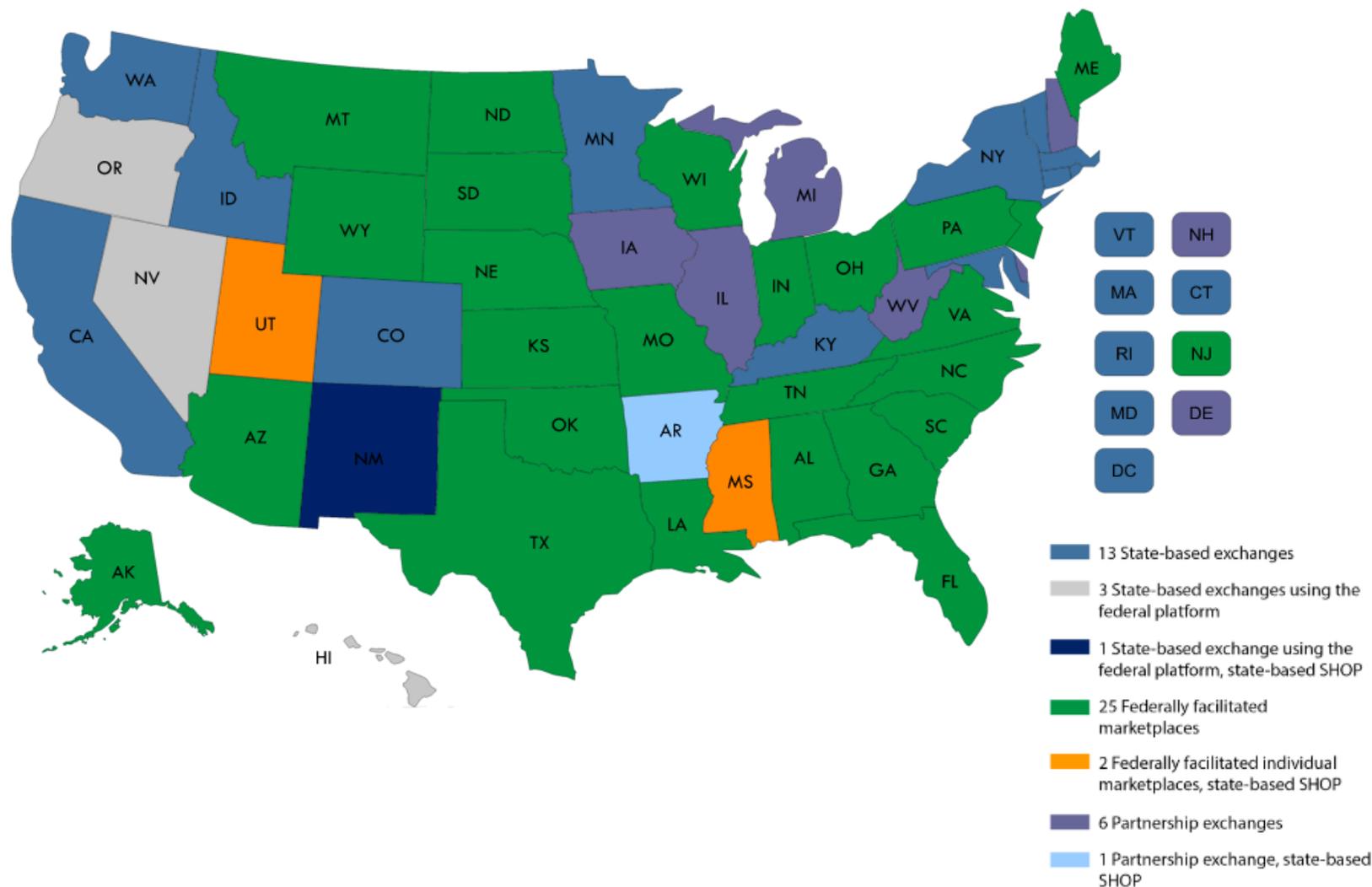
State Health Exchange Leadership Network

The **State Health Exchange Leadership Network** is a project run by the National Academy for State Health Policy, which provides a platform for health insurance marketplaces state staff and leaders to participate in peer-to-peer dialogue, discuss emerging issues, and share best practices.

Our priorities include:

- To provide federal stakeholders and policymakers with information regarding the implications of federal policy on health insurance exchanges.
- To support tactical peer-to-peer interaction on areas of common interest or need.
- To assist states in preparation for future policy and other issues

Where States Stand on Exchanges



State Based Exchange Governance Models

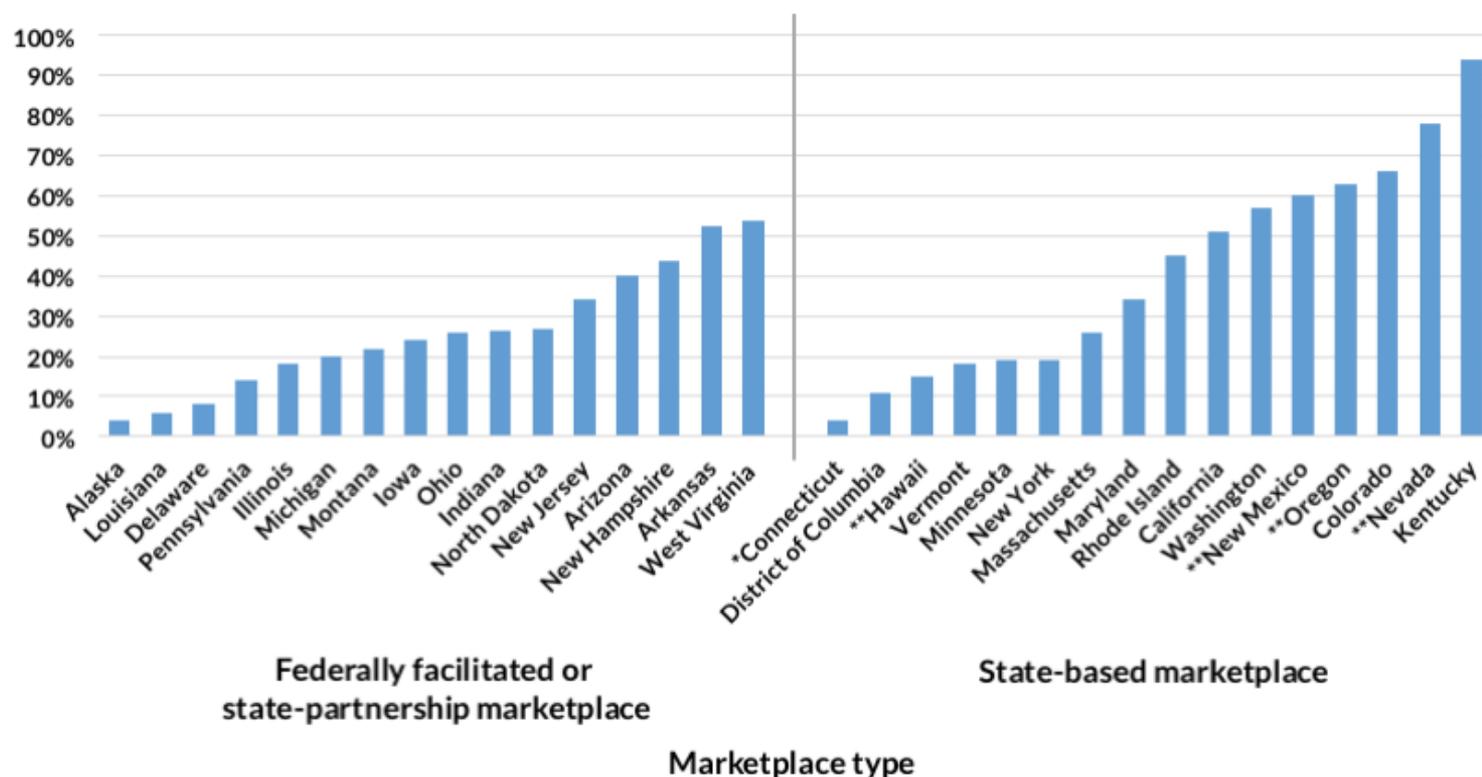
State	Exchange	Governance Structure
CA	Covered California	Independent public entity
CO	Connect for Health Colorado	Public non-profit
CT	Access Health CT	Quasi-governmental entity
DC	DC Health Link	Independent quasi-government agency
ID	Your Health Idaho	Quasi-governmental entity
KY	kynect	Office within the Cabinet for Health and Family Services
MD	Maryland Health Connection	Quasi-governmental entity
MA	Massachusetts Health Connector	Quasi-governmental entity
MN	MNsure	Independent public entity
NV	Nevada Health Link	State agency
NM	beWellNM	Public non-profit corporation
NY	NY State of Health	Within the NY State Department of Health
OR	Oregon Healthcare.gov	Within the Oregon Department of Consumer & Business Services
RI	Health Source RI	Within the Executive branch
VT	Vermont Health Connect	Within the Department of Vermont Health Access
WA	Washington Health Benefit Exchange	Quasi-governmental entity

Overview of SBM Plan Assessments and State Funding for SBMs

State	2016 Plan Assessment Rates/Amounts	State Provided Funding
CA	\$13.95 PMPM assessment on plans offered through the marketplace	
CO	CO is assessing a \$1.80 PMPM fee on all plans offered inside and outside of the marketplace, in addition to a 3.5% assessment on marketplace plans	
CT	1.65% assessment on plans inside and outside of the marketplace	Board of Directors has authorized an initiative to develop and then sell business processing outsourcing and consulting on point solutions to other public and private marketplaces.
DC	1% assessment on plans inside and outside of the marketplace	
ID	1.99% assessment on plans offered through the marketplace	
KY	1% assessment on plans inside and outside of the marketplace – KY applied a pre-existing assessment on insurers in the state to marketplace operations	
MD	2% assessment on plans inside and outside of the marketplace – MD applied a pre-existing assessment on insurers in the state to marketplace operations	
MA	2.5% assessment on plans offered through the marketplace	The MA marketplace has indicated that there is a long-term plan to continue using state funds to support its operations and supplement its carrier assessment.
MN	3.5% assessment on plans offered through the marketplace	
NM	Assessment based on insurer market share and marketplace operation expenses for plans offered on and off the marketplace	
NV	3% assessment on plans offered through the marketplace	
NY	State appropriations – proposed \$58.7 million from Special Revenue Funds (FY 2017 Executive Budget)	
OR	\$9.66 PMPM assessment on plans offered through the marketplace	
RI	3.5% assessment on all health insurance premiums sold through the marketplace	
VT	State appropriations	
WA	2% plus \$4.19 PMPM assessment on plans offered through the marketplace	The FY 2016 budget had \$11 million in state funds allocated to the marketplace.

Change in Medicaid and CHIP Enrollment in Expansion States Using State-Based Marketplaces vs. Federal Marketplaces

Percent change in enrollment (July–Sept. 2013 – Nov. 2015)

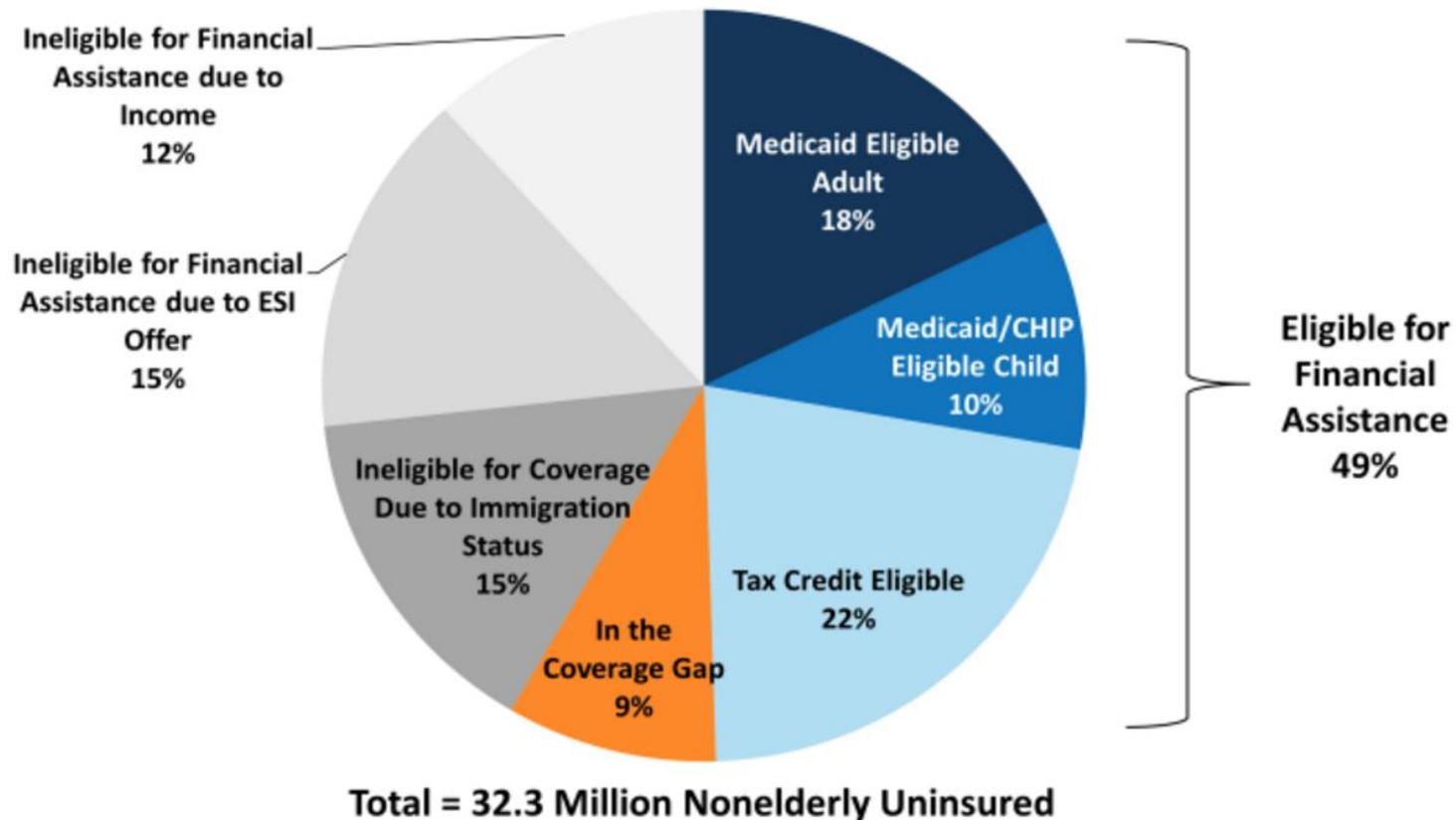


Enrollment after OE3

Exchange Plan Selections			
<i>Nov. 2015-Feb. 2016</i>			
Exchange Type	Plan Selections	New Customers	Renewals
SBM	3,055,892	861,389 (28%)	2,194,503 (72%)
FFM	9,625,982	4,042,912 (42%)	5,583,070 (58%)
SBM-FP	304,683	146,248 (48%)	158,436 (52%)

Source: ASPE, Health Insurance Marketplace 2015 Open Enrollment Period: March Enrollment Report

Eligibility for ACA Coverage Among Nonelderly Uninsured as of 2015



NOTES: Numbers may not sum to subtotals or 100% due to rounding. Tax Credit Eligible share includes adults in MN and NY who are eligible for coverage through the Basic Health Plan.

SOURCE: Kaiser Family Foundation analysis based on 2015 Medicaid eligibility levels updated to reflect state Medicaid expansion decisions as of January 2016 and 2015 Current Population Survey data.

Value of the Marketplaces

- Working across state agencies
 - Medicaid – One Stop Shopping
 - Insurance Departments
- Focused, population-based outreach and marketing
 - Revenue Services
 - Immigration
 - Engagement of assisters/brokers
- Fostering innovation and technology
 - Decision support tools
 - Ties to delivery reform/ value-based designed

Concerns

- Affordability
 - Family Glitch
 - CSR Threat?
 - Sec. 125 Changes?
 - Risk Mitigation

- Outreach
 - IRS Data Sharing?

- Sustainability

Reasons for Optimism

- No Widespread Carrier Retreat
 - Manage Risk
- Pool of Potential Enrollees
- Transitional Plans End
- Premium Subsidies Offset Premium Increases / Market Corrections
- Full Effect of Individual Mandate Not Yet Felt