

The Board of the Washington State Health Insurance Pool (WSHIP) annually develops a Policy Agenda to inform and educate others about the status of the Pool and issues that are important to address in the year ahead.

2024 POLICY AGENDA

No changes to the WSHIP program are recommended for 2024. The Board is closely monitoring the decrease in the Pool’s enrollment and upcoming changes in the health insurance landscape. This includes the Section 1332 waiver, Apple Health expansion, and growing Medicare Advantage (MA) market. The Board is also seeking to better understand why some enrollees are staying in the Pool given other coverage options.

BACKGROUND AND CURRENT STATUS OF THE POOL*

WSHIP is the state’s high risk pool. It plays an important role in fostering market stabilization and averting disproportional impacts to communities caring for high risk residents. **WSHIP has two separate programs:**

- Non-Medicare:** This program provides individual coverage to about 150 medically high-cost residents who were enrolled in WSHIP prior to 2014. No new enrollment has been accepted since 2014 when health carriers could no longer deny coverage for pre-existing conditions. WSHIP is also the safety net for the individual market in the event coverage is not offered in all counties. All counties offer individual plans in 2024.
- Medicare:** This program provides supplemental coverage to about 560 Medicare enrollees. Individuals under age 65 with a disability or End Stage Renal Disease (ESRD) are eligible for Medicare but most carriers do not sell supplements to persons under age 65. Medicare Advantage (MA) plans now accept individuals with ESRD. In 2024, all counties offer at least one MA plan and 15 counties have “**Reasonable Choice**” defined by law as having, among other things, a choice of HMO or PPO MA Plans offered by at least 3 different carriers with provider networks in the county for at least 5 years.

Non-Medicare Plans

157 enrollees

70% are persons with HIV/AIDS sponsored by WA State’s DOH Early Intervention Program

Closed to new enrollment since 2014

95% of enrollees have left these plans since 2014

Average claims costs: \$6,000 per member per month

Medicare Plans

561 enrollees

60% are under age 65; 58% have kidney disease

70% of existing enrollees live in counties that now have Reasonable Choice of MA plans, but they choose to remain on their WSHIP plan

Open to new enrollment

If unable to buy a Medigap for medical reasons and without Reasonable Choice of MA plans

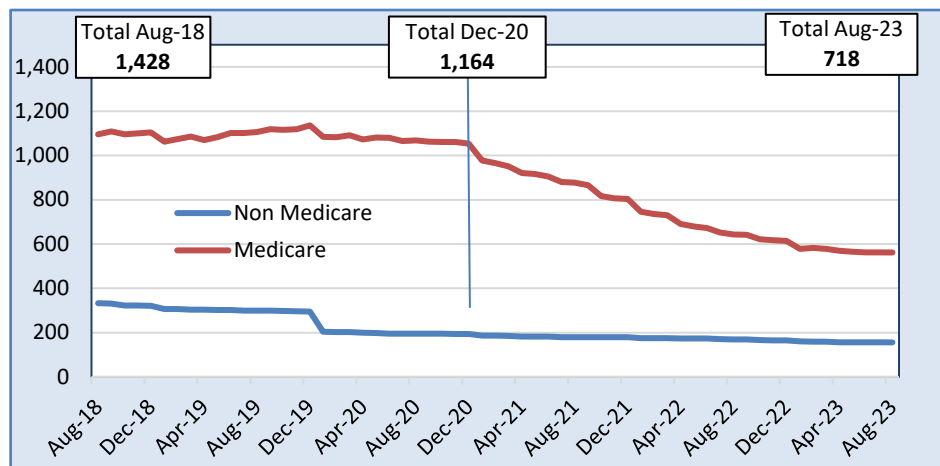
Average claims costs: \$800 per member per month

WSHIP is funded solely through premiums and assessments to Member Plans (carriers). It is not a public agency or state-funded program. Premiums are a percentage above the average market rate for comparable individual coverage. As a high risk pool, WSHIP coverage is not eligible for federal premium subsidies. Premiums cover approximately 30% of claims costs. 2024 assessments are projected to be \$11 million (est. \$0.29 per member per month).

WSHIP ENROLLMENT IN THE PAST FIVE YEARS

The Pool is approximately half the size it was 5 years ago.

This decrease in enrollment is projected to continue.



* As of August 2023