



WSHIP
ADMINISTRATOR'S REPORT
December 2015

An Executive Summary of Administrator's Monthly Operations Report and Pool Activities

YEAR-TO-DATE (YTD) ENROLLMENT SUMMARY

Total Enrollment as of 12/31/15: 1,556 (decreased 1% from prior month)
Non-Medicare: 505 / 32% (decreased 1% from prior month)
Medicare: 1,051 / 68% (decreased .2% from prior month)

Number/percentage sponsored by Third Party as of 12/31/15: 874 / 56%
Percentage of sponsored enrollees from EHIP: 264 / 30%
Percentage of sponsored enrollees from other: 610 / 70%

Enrollment YTD: 222 **Terminations YTD:** 459

Plan Selection:

Non-Medicare: PPO – 29%, Standard – 3%, HSA – 1%
Medicare: Basic – 52%, Basic Plus – 15%

Age & Gender: Average age: 58 Gender: Female– 40%, Male– 60%

MONTHLY ENROLLMENT ACTIVITY *(Non-Medicare enrollment is closed)*

Number of applications received: 27 (Medicare)
Number of applications approved: 16 (Medicare)

Eligibility Category:

Rejected for medical reasons: 16
Offered reduced Medicare supplement: 15
Medicare supplement not offered in county: 0
Medicare supplement not available because under age 65: 1

Access to Medicare Advantage Plans:

Do not have reasonable choice: 2
Provider not included in available plans: 0
ESRD Diagnosis – unable to obtain a Medicare Advantage Plan: 14

Percent of applications submitted by Agents: 11%
Percent of applications submitted by Third Party: 70%

Terminations in the reporting month: 59
Medicare Terminations: 25
Non-Medicare Terminations: 34

MONTHLY CLAIMS EXPENSE

Medical Claims Paid: \$2,908,320
Pharmacy Claims Paid: \$1,658,357
Estimated Claims Incurred But Not Paid: \$5,286,000

OTHER MONTHLY ACTIVITY

Claims Activity:

Number of claims received: 7,063

Claims inventory: *Received but not adjudicated* – 574 / *Pended* - 26

Customer Service Telephone Calls and Website Visitors:

Average calls per day: 50

Average website visitors per day: 22

Monthly Care Management Activity:

Utilization Management Reviews

Inpatient: 15

Outpatient: 0

Case Management

Number of open cases: 39

Number of closed cases: 15

New cases: 1

Appeals:

Number of appeals received related to eligibility: 5

First Level (Administrator) 5; Second Level (Grievance Committee) 0

Number of appeals received related to other: 2

First Level (Administrator) 2; Second Level (Grievance Committee) 0

Number of appeals adjudicated in favor of applicant/enrollee: 5

Number of appeals adjudicated and denied: 2

Number of retro-termination requests: 0

Number of reinstatement requests: 5

OIC Complaints:

Number of complaints received: 0

Administrator's Levels of Service:

Administrator met all levels of service.

Administrator did not meet the following levels of service:



WASHINGTON STATE HEALTH
INSURANCE POOL

Monthly Operations Report

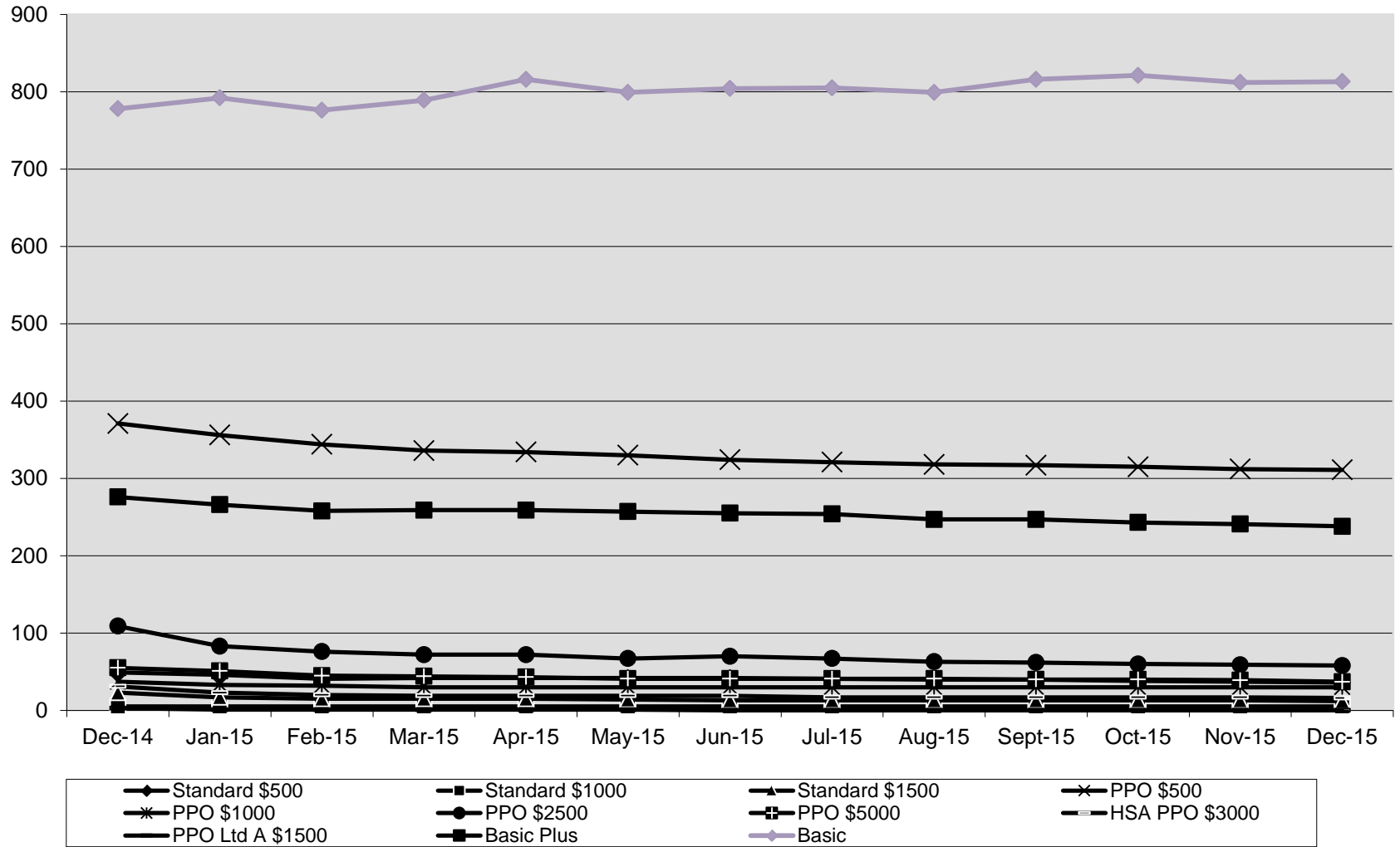
December 2015

Washington State Health Insurance Pool (WSHIP)
 Enrollment Activity
 December 2015

| December Applications | |
|--------------------------------|----|
| Medicare Applications Received | 27 |
| Medicare Applications Pended | 18 |
| Medicare Applications Approved | 16 |

| December Statistics | Reasons | |
|--|-----------|--------|
| | Pending | Denied |
| No Signature | 0% | 0% |
| No Proof of Residency | 11% | 0% |
| No Rejection Letter | 5% | 0% |
| No C of C | 5% | 0% |
| No Summary of Benefits | 0% | 0% |
| No Voided Check | 0% | 0% |
| No Bank Authorization (for EFT's only) | 0% | 0% |
| No Payment Included | 68% | 0% |
| Withdrawn | 0% | 33% |
| Other | 11% | 67% |
| Total | 100% | 100% |
| Clean App Turn Time | 3.38 days | |
| ID Card Issuance Turn Time | 2 days | |
| Closed for Lack of information (total) | 0% | |
| Percentage of clean apps received | 40% | |

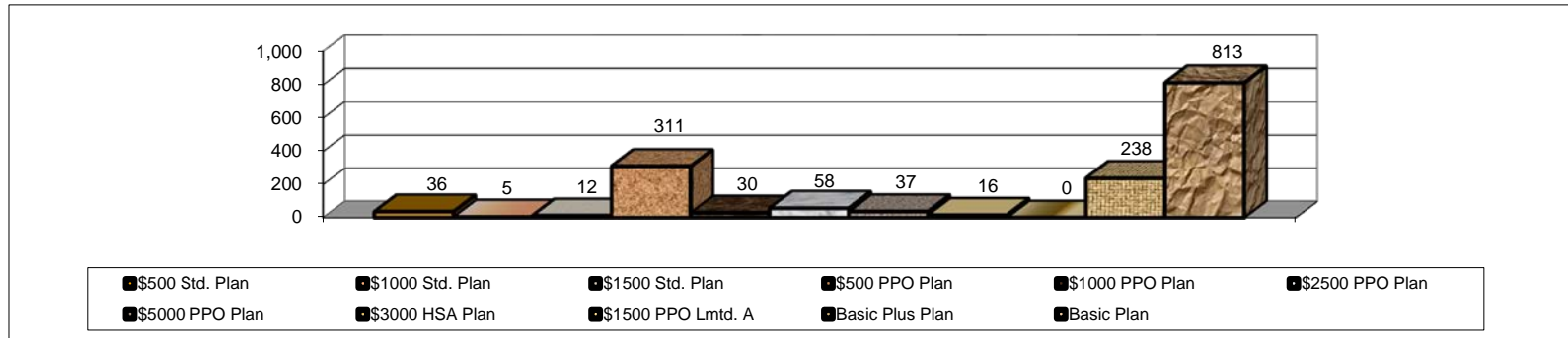
Washington State Health Insurance Pool (WSHIP) 13 Month Enrollment Count



Washington State Health Insurance Pool (WSHIP)
Plan & Age Distribution Summary
December 2015

| Standard Plan | | | | PPO Plan | | | | | HSA Qual PPO Plan | | Limited PPO A | Basic Plus Plan | | Basic Plan |
|--|-------|---------|---------|--|-------|---------|---------|---------|-------------------|---------|---------------|-----------------|--|------------|
| Age | \$500 | \$1,000 | \$1,500 | Age | \$500 | \$1,000 | \$2,500 | \$5,000 | Age | \$3,000 | \$1,500 | Age | | |
| 0-18 | 4 | 0 | 0 | 0-18 | 17 | 2 | 0 | 1 | 0-18 | 0 | 0 | 0-18 | 0 | 0 |
| 19-29 | 7 | 0 | 2 | 19-29 | 14 | 5 | 2 | 0 | 19-29 | 0 | 0 | 19-29 | 0 | 8 |
| 30-34 | 3 | 0 | 0 | 30-34 | 39 | 7 | 2 | 0 | 30-34 | 0 | 0 | 30-34 | 1 | 18 |
| 35-39 | 4 | 1 | 0 | 35-39 | 56 | 2 | 3 | 1 | 35-39 | 1 | 0 | 35-39 | 0 | 29 |
| 40-44 | 4 | 0 | 0 | 40-44 | 62 | 3 | 5 | 5 | 40-44 | 2 | 0 | 40-44 | 3 | 53 |
| 45-49 | 4 | 3 | 2 | 45-49 | 56 | 3 | 9 | 2 | 45-49 | 2 | 0 | 45-49 | 10 | 68 |
| 50-54 | 7 | 0 | 3 | 50-54 | 32 | 3 | 5 | 6 | 50-54 | 0 | 0 | 50-54 | 18 | 101 |
| 55-59 | 0 | 0 | 1 | 55-59 | 20 | 1 | 15 | 9 | 55-59 | 7 | 0 | 55-59 | 37 | 148 |
| 60-64 | 1 | 1 | 3 | 60-64 | 12 | 4 | 16 | 13 | 60-64 | 4 | 0 | 60-64 | 56 | 161 |
| 65-69 | 0 | 0 | 1 | 65-69 | 3 | 0 | 0 | 0 | 65-69 | 0 | 0 | 65-69 | 36 | 115 |
| 70-74 | 2 | 0 | 0 | 70-74 | 0 | 0 | 0 | 0 | 70-74 | 0 | 0 | 70-74 | 37 | 56 |
| 75-79 | 0 | 0 | 0 | 75-79 | 0 | 0 | 1 | 0 | 75-79 | 0 | 0 | 75-79 | 23 | 29 |
| 80-84 | 0 | 0 | 0 | 80-84 | 0 | 0 | 0 | 0 | 80-84 | 0 | 0 | 80-84 | 14 | 19 |
| 85+ | 0 | 0 | 0 | 85+ | 0 | 0 | 0 | 0 | 85+ | 0 | 0 | 85+ | 3 | 8 |
| Total | 36 | 5 | 12 | Total | 311 | 30 | 58 | 37 | Total | 16 | 0 | Total | 238 | 813 |
| Total STD Plan Enrollment = 53 | | | | Total PPO Plan Enrollment = 452 | | | | | | | | | Total Medicare Enrollment = 1,051 | |
| Total Non-Medicare Enrollment = 505 | | | | | | | | | | | | | | |

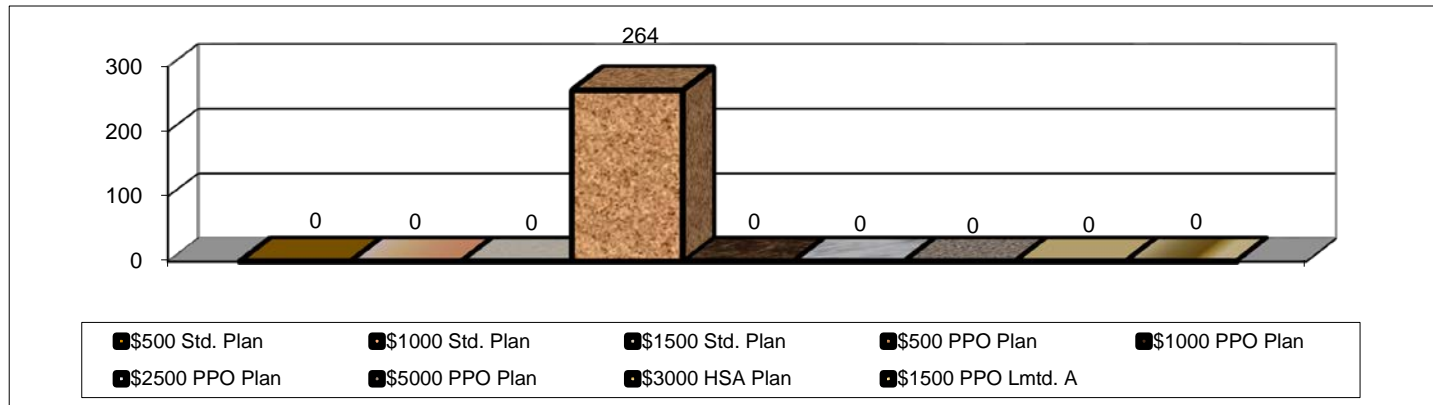
TOTAL ENROLLMENT: 1,556



Washington State Health Insurance Pool (WSHIP)
 EHIP Plan & Age Distribution Summary
 December 2015

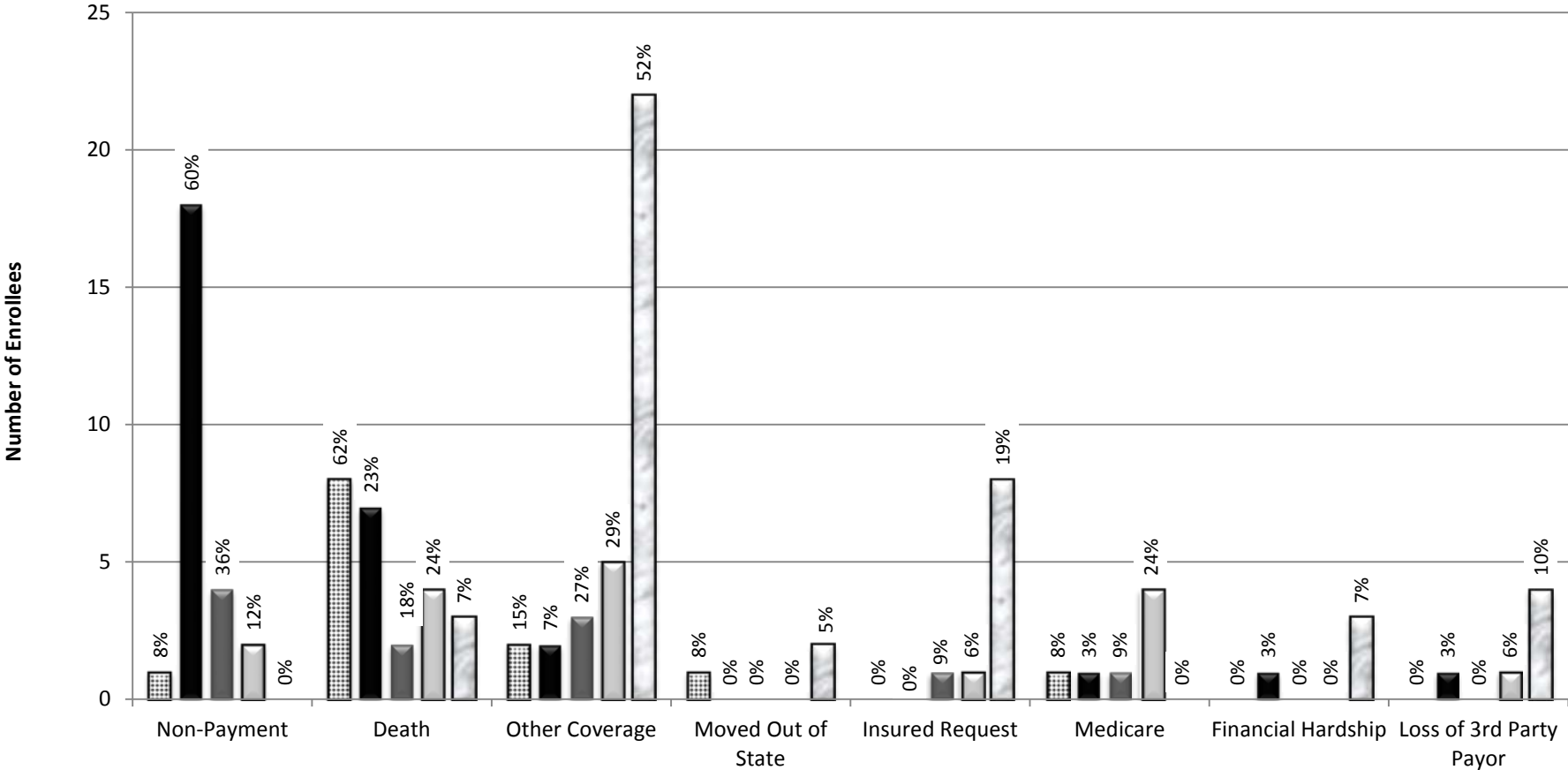
| Standard Plan | | | | PPO Plan | | | | | HSA Qual PPO Plan | Limited PPO A | |
|--|----------|----------|----------|--|------------|----------|----------|----------|----------------------|------------------|----------|
| Age | \$500 | \$1,000 | \$1,500 | Age | \$500 | \$1,000 | \$2,500 | \$5,000 | Age | \$3,000 | \$1,500 |
| 0-18 | 0 | 0 | 0 | 0-18 | 0 | 0 | 0 | 0 | 0-18 | 0 | 0 |
| 19-29 | 0 | 0 | 0 | 19-29 | 8 | 0 | 0 | 0 | 19-29 | 0 | 0 |
| 30-34 | 0 | 0 | 0 | 30-34 | 35 | 0 | 0 | 0 | 30-34 | 0 | 0 |
| 35-39 | 0 | 0 | 0 | 35-39 | 54 | 0 | 0 | 0 | 35-39 | 0 | 0 |
| 40-44 | 0 | 0 | 0 | 40-44 | 58 | 0 | 0 | 0 | 40-44 | 0 | 0 |
| 45-49 | 0 | 0 | 0 | 45-49 | 53 | 0 | 0 | 0 | 45-49 | 0 | 0 |
| 50-54 | 0 | 0 | 0 | 50-54 | 29 | 0 | 0 | 0 | 50-54 | 0 | 0 |
| 55-59 | 0 | 0 | 0 | 55-59 | 18 | 0 | 0 | 0 | 55-59 | 0 | 0 |
| 60-64 | 0 | 0 | 0 | 60-64 | 6 | 0 | 0 | 0 | 60-64 | 0 | 0 |
| 65-69 | 0 | 0 | 0 | 65-69 | 3 | 0 | 0 | 0 | 65-69 | 0 | 0 |
| 70-74 | 0 | 0 | 0 | 70-74 | 0 | 0 | 0 | 0 | 70-74 | 0 | 0 |
| 75-79 | 0 | 0 | 0 | 75-79 | 0 | 0 | 0 | 0 | 75-79 | 0 | 0 |
| 80-84 | 0 | 0 | 0 | 80-84 | 0 | 0 | 0 | 0 | 80-84 | 0 | 0 |
| 85+ | 0 | 0 | 0 | 85+ | 0 | 0 | 0 | 0 | 85+ | 0 | 0 |
| Total | 0 | 0 | 0 | Total | 264 | 0 | 0 | 0 | Total | 0 | 0 |
| Total STD Plan Enrollment = 0 | | | | Total PPO Plan Enrollment = 264 | | | | | | | |
| Total Non-Medicare Enrollment = 264 | | | | | | | | | | | |

TOTAL ENROLLMENT: 264



Terminations by Reason August 2015 - December 2015

NOTE: This chart depicts the reasons why coverage was terminated for enrollees. Non-payment does not reflect the actual reason for termination. At the time of termination for non-payment, the administrator queried the member for the actual reason. "Insured Request" indicates those who did not state a reason for terminating.

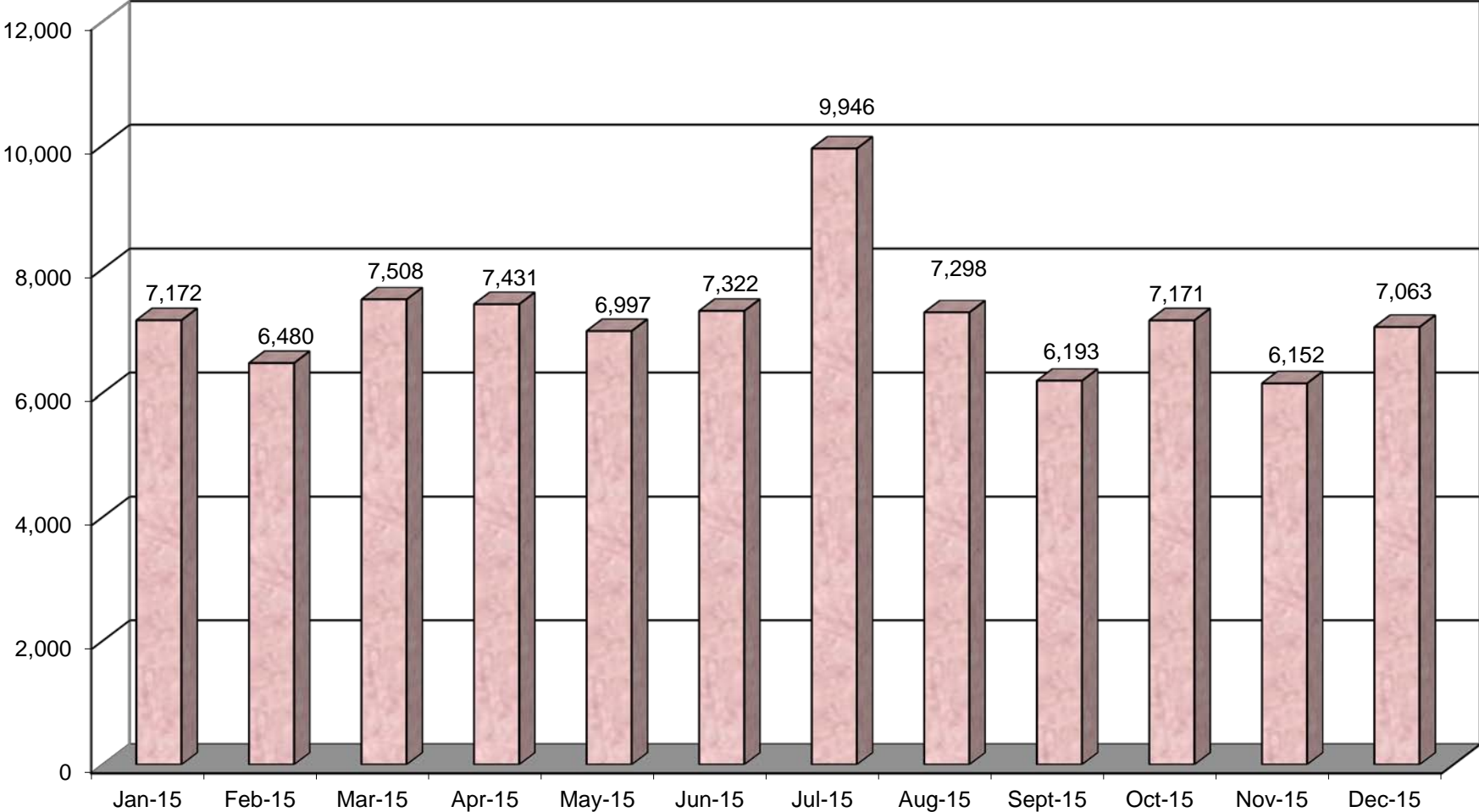


Yearly totals may not total 100% due to rounding.

August
 September
 October
 November
 December

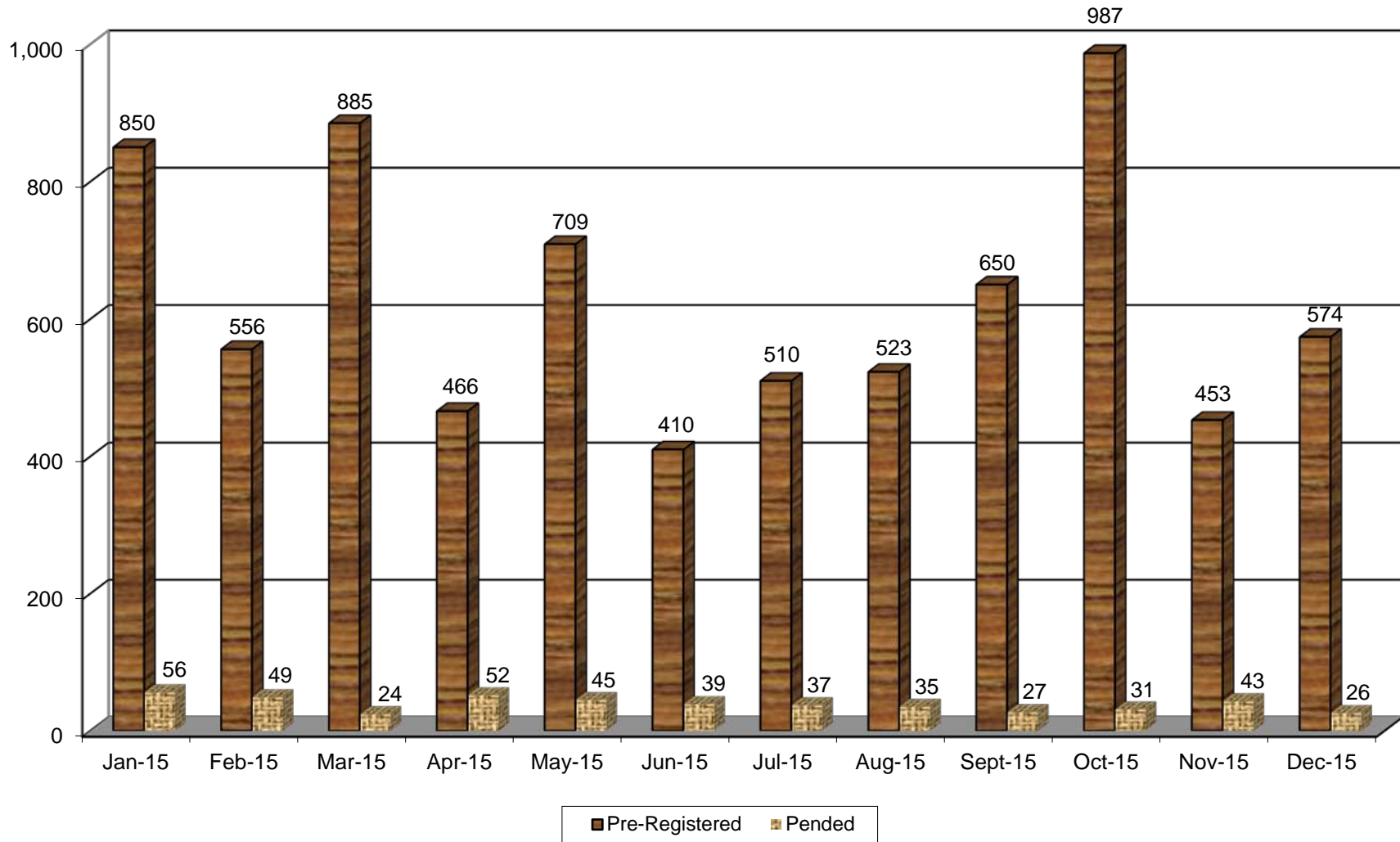
Washington State Health Insurance Pool (WSHIP)
Claims Received
January 2015 - December 2015

Average Claims Received = 7,279



Washington State Health Insurance Pool (WSHIP) Claims Inventory January 2015 - December 2015

Average Pre-Registered Claims = 631
Average Pended Claims = 39



Washington State Health Insurance Pool (WSHIP)
High Dollar Paid Claims Report
January 2015 - December 2015

| Month / Year | Case | Provider | Total Billed | Total Paid | Date of Service | Date Received | Date Paid | Primary Diagnosis |
|----------------|------|-------------------------------|--------------|--------------|---------------------|---------------|-----------|---|
| January 2015 | 1 | Swedish Cherry Hill | \$323,703.98 | \$192,470.65 | 8/13/14-8/26/14 | 12/31/14 | 1/20/15 | 738.10 Unspecified acquired deformity of head |
| February 2015 | 1 | Providence Centralia Hospital | \$270,338.55 | \$116,105.02 | 1/6/15 | 2/19/15 | 2/24/15 | 283.2 Hemoglobinuria due to hemolysis from external causes |
| March 2015 | 1 | Harborview Medical Center | \$165,434.90 | \$147,890.69 | 10/14/13-10/29/13 | 2/13/15 | 3/4/15 | 852.26 Subdural hemorrhage following injury with loss of consciousness |
| | 2 | Swedish Medical Center | \$271,643.50 | \$125,752.98 | 2/3/15-2/5/15 | 2/18/15 | 3/11/15 | 996.42 Dislocation of prosthetic joint |
| | 3 | Seattle Children's Hospital | \$137,658.60 | \$119,762.97 | 12/30/14-12/31/14 | 2/13/15 | 3/5/15 | 596.54 Neurogenic bladder NOS |
| | 4 | UW Medical Center | \$194,092.00 | \$116,382.32 | 12/19/14-1/4/15 | 1/15/15 | 3/13/15 | 996.67 Reaction due to other internal orthopedic device |
| April 2015 | None | | | | | | | |
| May 2015 | None | | | | | | | |
| June 2015 | 1 | Seattle Children's Hospital | \$274,210.50 | \$195,063.14 | 5/11/15-5/19/15 | 6/29/15 | 6/30/15 | 737.30 Idiopathic scoliosis |
| | 2 | UW Medical Center | \$269,745.26 | \$123,580.38 | 5/1/15-5/21/15 | 6/1/15 | 6/10/15 | 427.41 Ventricular fibrillation |
| | 3 | Providence Centralia Hospital | \$275,323.78 | \$120,092.19 | 6/3/15 | 6/16/15 | 6/19/15 | 283.2 Hemoglobinuria due to hemolysis from external causes |
| July 2015 | 1 | UW Medical Center | \$194,068.64 | \$145,551.48 | 3/10/15-3/16/15 | 6/30/15 | 7/2/15 | 403.91 Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage V or end stage renal disease |
| August 2015 | 1 | UW Medical Center | \$343,523.18 | \$269,404.70 | 7/1/2015-7/13/2015 | 7/30/15 | 8/20/15 | 250.41 Diabetes with renal manifestations, type 1 (juvenile), not stated as uncontrolled |
| | 2 | UW Medical Center | \$177,734.38 | \$105,560.23 | 6/12/2015-7/3/2015 | 7/16/15 | 8/5/15 | 428.23 Acute on chronic systolic heart failure |
| September 2015 | 1 | UW Medical Center | \$187,604.62 | \$116,496.66 | 7/11/2015-7/28/2015 | 8/12/15 | 9/3/15 | 996.68 Infection and inflammatory reaction to peritoneal dialysis catheter |
| October 2015 | 1 | Swedish Cherry Hill | \$371,282.49 | \$248,683.74 | 08/04/15 - 08/12/15 | 9/24/15 | 10/14/15 | 733.13 Fractured vertebrae |
| November 2015 | 1 | Providence Centralia Hospital | \$230,383.07 | \$100,779.87 | 10/06/15 - 10/27/15 | 11/12/15 | 11/24/15 | D59.5 - Paroxysmal nocturnal hemoglobinuria |
| December 2015 | 1 | Harborview Medical Center | \$919,934.47 | \$473,024.13 | 10/01/15 - 12/02/15 | 12/11/15 | 12/24/15 | A41.02 Sepsis due to Methicillin resistant Staph |
| | 2 | Providence Centralia Hospital | \$230,210.61 | \$100,651.81 | 11/10/15 - 12/01/15 | 12/14/15 | 12/23/15 | D59.5 - Paroxysmal nocturnal hemoglobinuria |

12 Month Average
Amount Billed:

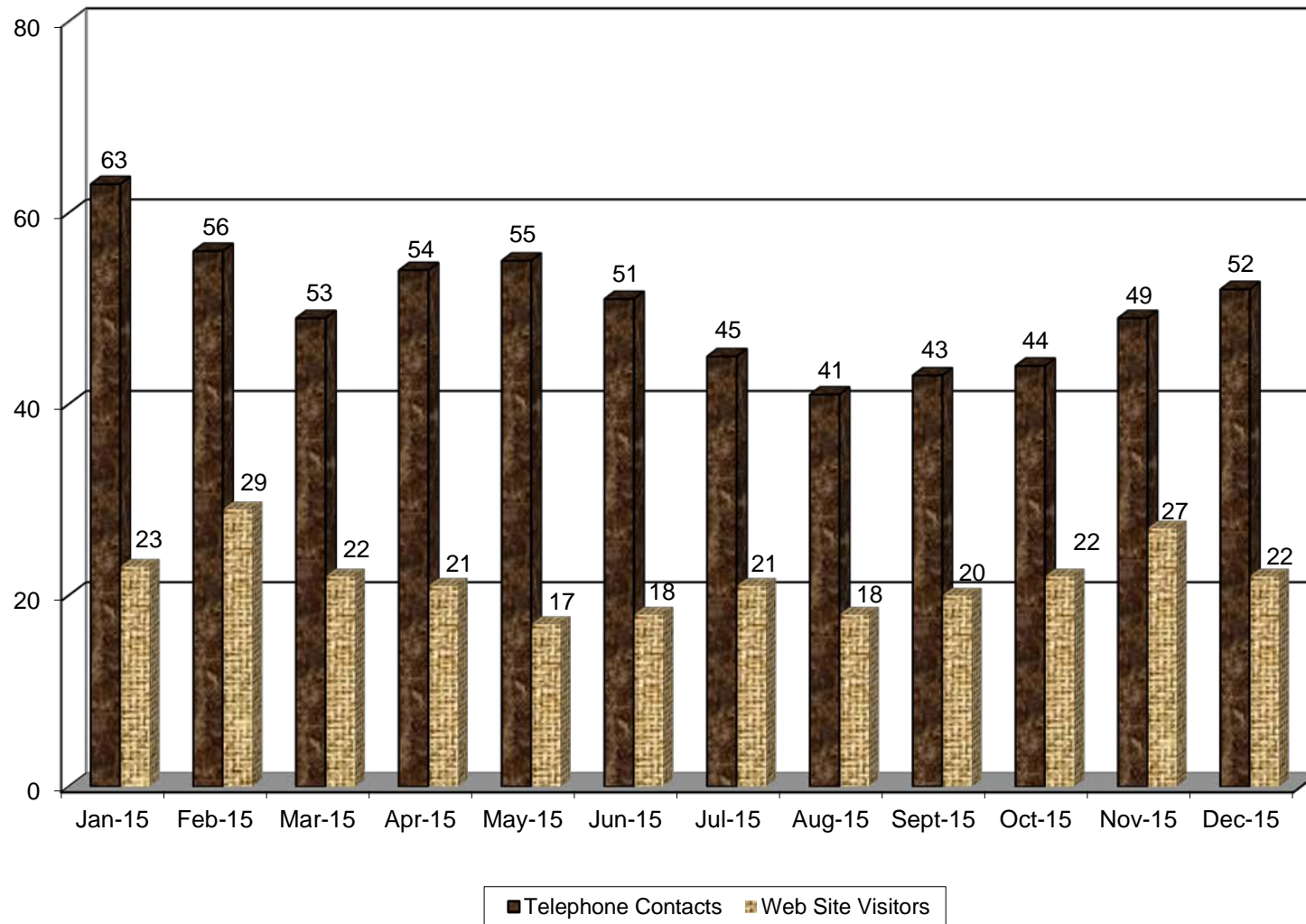
\$403,074.38

12 Month
Average

Amount Paid: \$234,771.08

Washington State Health Insurance Pool (WSHIP) Average Calls & Web Site Visitors Per Day January 2015 - December 2015

Average Telephone Calls Per Day = 50
Average Web Site Visitors Per Day = 22



Washington State Health Insurance Pool (WSHIP)
Customer Service Call Types
January 2015 - December 2015

| ENROLLEES | Inquiry Type | Jan-15 | Feb-15 | Mar-15 | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sept-15 | Oct-15 | Nov-15 | Dec-15 | Monthly Average |
|---------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|---------|--------|--------|--------|-----------------|
| Appeals | Explanation of Appeals Process / Status of Appeal | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 |
| Benefit Information | Plan Inquiry | 27 | 21 | 14 | 26 | 21 | 19 | 10 | 9 | 7 | 12 | 27 | 31 | 19 |
| Benefit Information | Health Care Reform | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Billing | Finance Issues / Premium Due / Rates / Billing Status | 16 | 5 | 3 | 10 | 2 | 8 | 17 | 5 | 3 | 2 | 6 | 13 | 8 |
| Claims | Claim Status | 53 | 49 | 61 | 55 | 47 | 54 | 59 | 51 | 44 | 46 | 45 | 47 | 51 |
| Claims | EOB Questions | 10 | 7 | 8 | 12 | 6 | 8 | 2 | 2 | 4 | 1 | 6 | 4 | 6 |
| Claims | Response to letter | 8 | 7 | 4 | 43 | 43 | 8 | 0 | 6 | 1 | 3 | 3 | 10 | 11 |
| Claims | Other | 51 | 47 | 29 | 66 | 50 | 27 | 28 | 20 | 26 | 11 | 1 | 47 | 34 |
| Enrollment | Application Status | 1 | 0 | 0 | 2 | 2 | 2 | 1 | 0 | 1 | 5 | 29 | 3 | 4 |
| Enrollment | Member Eligibility / ID Card | 74 | 54 | 39 | 35 | 21 | 24 | 25 | 22 | 25 | 20 | 36 | 62 | 36 |
| RX Inquiry | Benefit Question / Filing Claims | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| TOTAL | | 241 | 190 | 159 | 250 | 192 | 150 | 142 | 115 | 111 | 100 | 154 | 217 | 168 |

| PROVIDERS | Inquiry Type | Jan-15 | Feb-15 | Mar-15 | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sept-15 | Oct-15 | Nov-15 | Dec-15 | Monthly Average |
|---------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|---------|--------|--------|--------|-----------------|
| Appeals | Explanation of Appeals Process / Status of Appeal | 0 | 3 | 1 | 0 | 0 | 1 | 0 | 0 | 1 | 1 | 1 | 2 | 1 |
| Benefit Information | Plan Inquiry | 202 | 165 | 199 | 164 | 159 | 159 | 173 | 151 | 127 | 156 | 150 | 157 | 164 |
| Benefit Information | Healthcare Reform | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Billing | Finance Issues / Premium Due / Rates / Billing Status | 5 | 2 | 4 | 3 | 3 | 2 | 3 | 3 | 4 | 0 | 1 | 4 | 3 |
| Claims | Claim Status | 102 | 102 | 84 | 104 | 134 | 105 | 85 | 78 | 86 | 110 | 66 | 84 | 95 |
| Claims | EOB Questions | 3 | 0 | 2 | 1 | 1 | 7 | 1 | 2 | 1 | 1 | 1 | 3 | 2 |
| Claims | Response to letter | 4 | 3 | 0 | 4 | 0 | 1 | 1 | 1 | 0 | 1 | 1 | 1 | 1 |
| Claims | Other | 56 | 47 | 77 | 66 | 49 | 62 | 20 | 17 | 18 | 10 | 41 | 63 | 44 |
| Enrollment | Application Status | 2 | 1 | 2 | 1 | 1 | 1 | 4 | 2 | 5 | 2 | 1 | 1 | 2 |
| Enrollment | Member Eligibility / ID Card | 312 | 322 | 302 | 339 | 284 | 365 | 306 | 255 | 249 | 254 | 213 | 256 | 288 |
| RX Inquiry | Benefit Question / Filing Claims | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| TOTAL | | 686 | 645 | 671 | 682 | 631 | 703 | 593 | 509 | 492 | 535 | 475 | 571 | 599 |

Washington State Health Insurance Pool (WSHIP)
Customer Service Call Types
January 2015 - December 2015

| AGENTS | Inquiry Type | Jan-15 | Feb-15 | Mar-15 | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sept15 | Oct-15 | Nov-15 | Dec-15 | Monthly Average |
|---------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----------------|
| Appeals | Explanation of Appeals Process / Status of Appeal | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Benefit Information | Plan Inquiry | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| Benefit Information | Healthcare Reform | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Billing | Finance Issues / Premium Due / Rates / Billing Status | 2 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 2 | 2 | 0 | 1 | 1 |
| Claims | Claim Status | 1 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Claims | EOB Questions | 0 | 2 | 0 | 0 | 1 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 |
| Claims | Response to letter | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Claims | Other | 1 | 4 | 0 | 3 | 2 | 1 | 1 | 1 | 0 | 4 | 4 | 3 | 2 |
| Enrollment | Application Status | 6 | 2 | 1 | 0 | 3 | 2 | 2 | 2 | 0 | 3 | 1 | 3 | 2 |
| Enrollment | Member Eligibility / ID Card | 8 | 8 | 7 | 3 | 5 | 8 | 5 | 3 | 6 | 5 | 3 | 11 | 6 |
| RX Inquiry | Benefit Question / Filing Claims | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| TOTAL | | 18 | 17 | 8 | 8 | 11 | 14 | 10 | 8 | 8 | 14 | 8 | 18 | 12 |

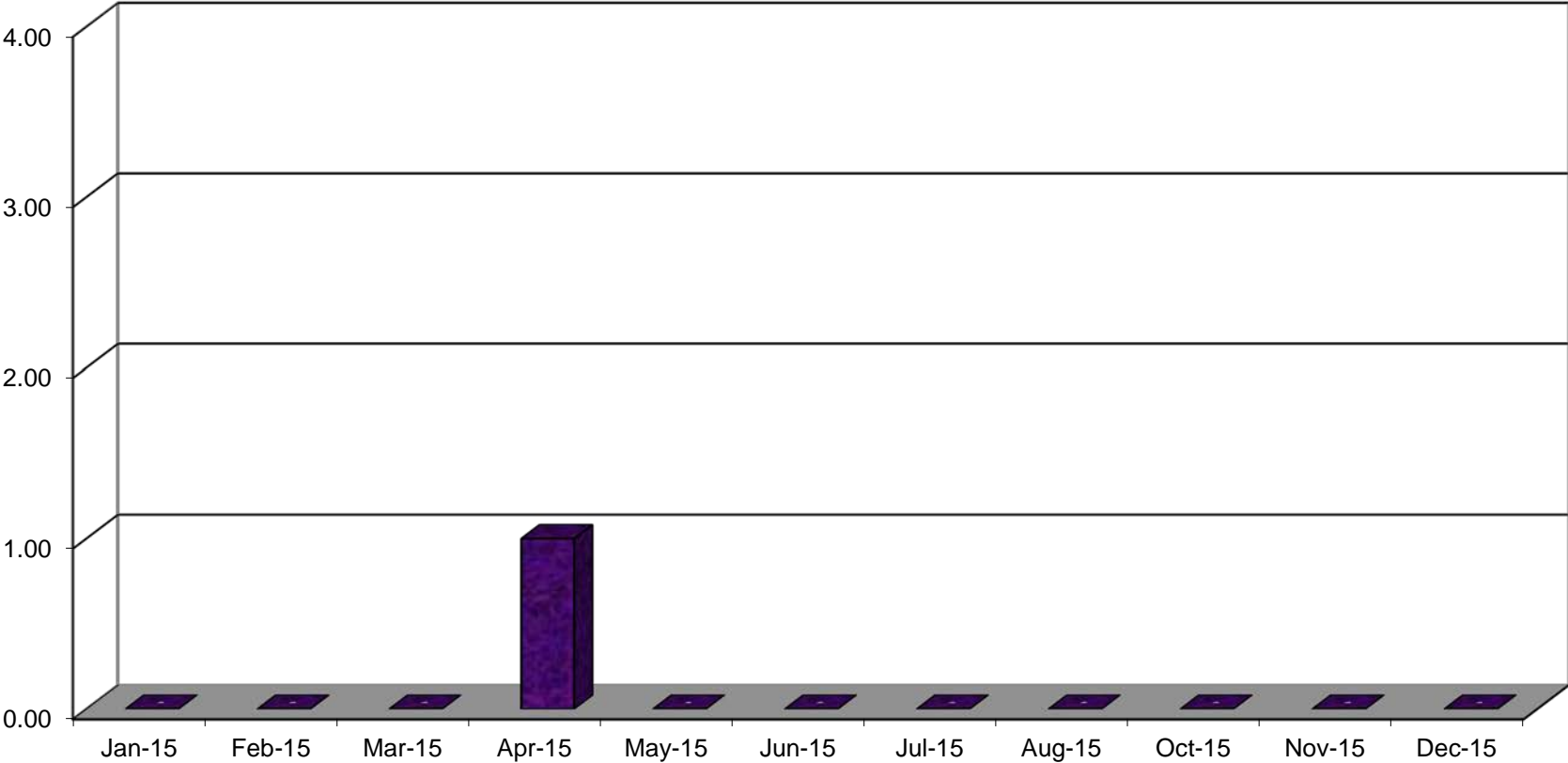
| CARRIERS | Inquiry Type | Jan-15 | Feb-15 | Mar-15 | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sept15 | Oct-15 | Nov-15 | Dec-15 | Monthly Average |
|---------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----------------|
| Appeals | Explanation of Appeals Process / Status of Appeal | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Benefit Information | Plan Inquiry | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Benefit Information | Healthcare Reform | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Billing | Finance Issues / Premium Due / Rates / Billing Status | 0 | 0 | 0 | 2 | 1 | 0 | 0 | 0 | 1 | 0 | 2 | 0 | 1 |
| Claims | Claim Status | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Claims | EOB Questions | 0 | 4 | 1 | 2 | 4 | 3 | 1 | 2 | 1 | 1 | 0 | 0 | 2 |
| Claims | Response to letter | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Claims | Other | 1 | 3 | 4 | 0 | 2 | 2 | 3 | 1 | 2 | 4 | 2 | 4 | 2 |
| Enrollment | Application Status | 0 | 0 | 1 | 1 | 1 | 0 | 2 | 0 | 1 | 0 | 2 | 0 | 1 |
| Enrollment | Member Eligibility / ID Card | 2 | 4 | 5 | 2 | 3 | 1 | 1 | 2 | 1 | 0 | 0 | 6 | 2 |
| RX Inquiry | Benefit Question / Filing Claims | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| TOTAL | | 3 | 12 | 11 | 7 | 11 | 6 | 7 | 5 | 6 | 5 | 6 | 10 | 7 |

Washington State Health Insurance Pool (WSHIP)
Customer Service Call Types
January 2015 - December 2015

| TOTAL | Inquiry Type | Jan-15 | Feb-15 | Mar-15 | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sept-15 | Oct-15 | Nov-15 | Dec-15 | Monthly Average |
|---------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|---------|--------|--------|--------|-----------------|
| Appeals | Explanation of Appeals Process / Status of Appeal | 0 | 4 | 2 | 0 | 0 | 1 | 0 | 0 | 1 | 1 | 2 | 2 | 1 |
| Benefit Information | Plan Inquiry | 229 | 186 | 213 | 190 | 180 | 178 | 184 | 160 | 134 | 168 | 177 | 188 | 182 |
| Benefit Information | Healthcare Reform | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Billing | Finance Issues / Premium Due / Rates / Billing Status | 23 | 7 | 7 | 15 | 6 | 11 | 21 | 9 | 10 | 4 | 9 | 18 | 12 |
| Claims | Claim Status | 156 | 152 | 145 | 160 | 181 | 160 | 144 | 129 | 130 | 156 | 111 | 131 | 146 |
| Claims | EOB Questions | 13 | 13 | 11 | 15 | 12 | 19 | 4 | 7 | 6 | 3 | 7 | 7 | 10 |
| Claims | Response to letter | 12 | 10 | 4 | 48 | 43 | 9 | 1 | 7 | 1 | 4 | 4 | 11 | 13 |
| Claims | Other | 109 | 101 | 110 | 135 | 103 | 92 | 52 | 39 | 46 | 29 | 48 | 117 | 82 |
| Enrollment | Application Status | 9 | 3 | 4 | 4 | 7 | 5 | 9 | 4 | 7 | 10 | 33 | 7 | 9 |
| Enrollment | Member Eligibility / ID Card | 396 | 388 | 353 | 379 | 313 | 398 | 337 | 282 | 281 | 279 | 252 | 335 | 333 |
| RX Inquiry | Benefit Question / Filing Claims | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| TOTAL | | 948 | 864 | 849 | 947 | 845 | 873 | 752 | 637 | 617 | 654 | 643 | 816 | 787 |

Note - Healthcare Reform was added as an Inquiry Type in March '10

Washington State Health Insurance Pool (WSHIP)
OIC Inquiries Received
January 2015 - December 2015



Washington State Health Insurance Pool (WSHIP)
Levels of Service
January 2015 - December 2015

| | Contractual Levels of Service | Jan-15 | Feb-15 | Mar-15 | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 |
|-------------------------------------|----------------------------------|--------|--------|--------|--------|--------|--------|--------|-------|--------|--------|--------|--------|
| Enrollment Standards | | | | | | | | | | | | | |
| 1. 14 day Clean Application Process | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| 2. 30 day ID Card Issuance | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| 3. Accuracy | 99% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 99% | 100% | 100% | 100% | 100% |
| Billing Standards | | | | | | | | | | | | | |
| 4. 14 day Paid-to Status Update | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| 5. Accuracy | 99% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| Claims Standards | | | | | | | | | | | | | |
| 6. 100% Notification | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| 7. 30 day Clean Claim Process | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| 8. Clerical Accuracy | 98% | 99.9% | 100% | 100% | 100% | 100% | 99.9% | 99.9% | 99.9% | 100% | 99.9% | 99.9% | 99.9% |
| 9. Financial Accuracy | 99% | 100% | 100% | 100% | 100% | 100% | 99.3% | 100% | 100% | 100% | 99.7% | 99.9% | 99.9% |
| 10. Overall Processing Accuracy | 97% | 100% | 100% | 99.5% | 99.8% | 100% | 98.6% | 99.7% | 100% | 100% | 98.6% | 99.7% | 99.3% |
| Customer Service Standards | | | | | | | | | | | | | |
| 11. 60 Sec. Speed of Answer | 60 sec | 25 | 27 | 25 | 20 | 21 | 25 | 33 | 50 | 44 | 41 | 34 | 42 |
| 12. 5% Abandonment Rate | 5% | 1.2% | 0.4% | 1.2% | 0.6% | 1.3% | 1.0% | 0.8% | 3.5% | 3.0% | 2.8% | 1.7% | 1.8% |
| 13. Accuracy | 95% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| 14. 48 hour Web Mail Response | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| 15. Premium Refunds | 99% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| 16. Updates posted w/in 48 hours | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 0% | 100% |

Measurement of Standards

Standard 1 - If the date received compared to the date approved for all clean applications approved during the reporting month is less than 14-days.

Standard 2 - If the date received compared to the date mailed for all applications approved during the reporting month is less than 30-days from receipt of eligible application to issuance of identification card.

Standard 3 - 99% or greater accuracy rate for enrollment coding of premium, plan and age rate categories for all approved applications during the reporting month.

Standard 4 - 100% scoring of (25) member audit of 14-calendar days or less from premium receipt to update of eligibility file paid-to-status.

Standard 5 - 99% scoring of (25) member audit of accuracy for posting of correct payment, implementation of rate changes and premium account reconciliations during the reporting month.

Standard 6 -100% notification for all claims not paid within 10-business days during the reporting month.

Standard 7 - 100% of clean claims processed within 30-calendar days during the reporting month.

Standard 8 - 98% or greater accuracy rate for clerical coding of claims based on a 5% claim audit during reporting month.

Standard 9 - 99% or greater accuracy for benefit and payment of claims based on a 5% claim audit during reporting month.

Standard 10 - 97% or greater overall claims processing accuracy for benefit and payment of claims based on a 5% claim audit during reporting month.

Standard 11 - 60 second or less average speed of answer for all telephone inquiries received during the reporting month.

Standard 12 - 5% or less call abandonment rate.

Standard 13 - 95% or greater accuracy based on a 2% enrollee audit for accuracy of customer service response to inquiry during the reporting month.

Standard 14 - 100% response rate for 48-hour turn-around of online CSR email during the reporting month.

Standard 15 - 99% or greater of premium refunds issued (or checks returned) within 15 days of all ineligible and denied applications based on a 2% enrollee audit during reporting month.

Standard 16 - 100% responsible for posting web site updates within 48 hours of receipt.