

2025 WSHIP Policy Agenda

Approved by WSHIP Board 5-14-25

2025 POLICY AGENDA

No program changes are recommended currently. The Board is actively discussing next steps for the Pool given the current market landscape. WSHIP enrollment continues to decrease, with few new enrollees in our Medicare plan. More plan options and expanded eligibility for Medicare Advantage (MA plans) are creating new coverage options for some enrollees, but the Board does not have the authority to end WSHIP coverage when new options emerge. The Board is committed to working with policymakers on an approach to address these needs and plan for the future of the high risk pool.

BACKGROUND AND CURRENT STATUS OF WSHIP

- The Washington State Health Insurance Pool (WSHIP) was created by the legislature in 1987 to provide
 health insurance to persons denied coverage, such as those with pre-existing conditions and Medicare
 enrollees without access to supplemental coverage (e.g., enrollees under age 65). WSHIP is a non-profit
 entity not a licensed health carrier, public agency, or state-funded program.
- Changes in the market continue to close the gaps that WSHIP was created to serve:
 - o Federal law now prohibits carriers from denying individual coverage due to pre-existing conditions.
 - While most carriers in our state do not sell Medicare supplements to persons under age 65, federal law since 2021 requires Medicare Advantage (MA) plans to accept those with End Stage Renal Disease (ESRD) who are eligible for Medicare regardless of age.
- In 2025, individual health plans and Medicare Advantage (MA) plans are available in all counties, however, not all counties meet the criteria in WSHIP's statute for reasonable choice of MA plans. "Reasonable Choice" is 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.
- Approximately 540 persons remain in WSHIP. This is a decrease of 85% since 2013. By statute, coverage cannot be terminated by WSHIP by reason of access to other coverage (except Medicaid).
- WSHIP's Medicare supplemental plan is open to new enrollment, though few applications have been received in recent years. WSHIP non-Medicare plans have been closed to new enrollment since 2014.

KEY FACTS & FIGURES

Total Enrollees: 540 (140 non-Medicare, 400 Medicare)

Revenue Sources: Premiums + Assessments to Member Plans (carriers)

Premiums: 110–150% of the average market rate for comparable coverage; premiums cover

approximately 30% of program costs and assessments cover remaining costs

Assessments: Total assessment projected for 2025: \$9 million (est. \$0.20 per member per month)

Governance: 11 person Board of Directors; 4 elected by Member Plans; 6 appointed by the

Governor; the Insurance Commissioner or designee is an ex-officio non-voting director

NON-MEDICARE PLANS (Individual coverage)

140 enrollees

75% are persons with HIV/AIDS sponsored by the WA State Department of Health (DOH)

Closed to new enrollment since 2014

95% of enrollees have left these plans since 2014

Premiums: 110% of average market rate for

comparable coverage

MEDICARE PLANS (Supplemental coverage)

400 enrollees

52% are under age 65

Open to new enrollment

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

Premiums: 110–150% of average market rate for

comparable coverage