

Quick Reference Guide for October Workgroup Meeting #1

The following provides high level summaries of key components of the modeling and associated fiscal impacts. They are intended to serve as a quick reference guide to accompany the prerecorded materials provided October 1, 2020. Future projections may vary from those presented here.

Table 1 – Projected 2022 Population Distribution

Population	2022 Projected Number of Individuals	2022 Projected Status Quo Population Distribution	Population Included Under Universal Health Care
Private Health Insurance	3,682,439	46.6%	75.5%
Medicaid	1,703,992	21.6%	
CHIP	61,707	0.8%	
Uninsured	370,933	4.7%	
Undocumented Immigrants	124,428	1.6%	
Cascade Care	18,468	0.2%	
Medicare	1,721,504	21.8%	Excluded
Federal Employees/VA/TRICARE	213,435	2.7%	Excluded
Total	7,896,906	100.0%	

Table 2 reflects the redistribution of expenditures by major payer source, for relevant health care expenditures (e.g. excludes Veterans Affairs, TRICARE, School Based Health etc.). For context between health care expenditures presented below and the State of Washington budget. The State Fiscal Year 2019-2021 biennium (2-year figure) was \$118 billion based on information reported in July 2019 by the State of Washington Office of Financial Management.

Table 2 – Financial Expenditures (in millions)

Population	2022 Projected Status Quo Expenditures	2022 Projected Expenditures Excluded	2022 Projected Expenditures Included in Model "A"*
Private Health Insurance **	\$30,615.4	\$921.6	\$29,693.8
Medicaid	17,844.4	-	17,844.4
CHIP	101.3	-	101.3
Uninsured	291.0	-	291.0
Undocumented Immigrants	97.6	-	97.6
Out of Pocket	6,519.5	-	6,519.5
Out of Pocket Medicare	2,433.4	2,433.4	-
General Assistance	152.1	-	152.1
Indian Health Services	101.5	-	101.5
Medicare	16,330.6	16,330.6	-
Subtotal	\$74,486.8	\$19,685.6	\$54,801.2
Cost savings attributed to Model "A" (Midpoint Estimate)	-	-	(1,418.3)
Total	\$74,486.8	\$19,685.6	\$53,382.9

* Universal Health Care Model "A" excludes Medicare and Federal employees included in Private Health Insurance.

** \$921.6 million represents Federal employees included in private insurance figures.

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Model A: Universal Coverage – State Administered

Covered Populations	Benefits	Cost Sharing	Provider Reimbursement	Population Specific Impacts	Administration
<ul style="list-style-type: none"> Medicaid CHIP Private Health Insurance (<i>employer, state employee, exchange</i>) Undocumented Immigrants Uninsured 	<ul style="list-style-type: none"> Essential health benefits Dental Vision Long Term Care (incremental new system costs pending) 	<ul style="list-style-type: none"> No cost sharing Private Insurance utilization changes due to removal of cost sharing 	<ul style="list-style-type: none"> Reduced pricing variation Administrative efficiency Purchasing power 	<ul style="list-style-type: none"> Medicaid population access change Uninsured utilization changes Undocumented immigrant utilization changes 	<ul style="list-style-type: none"> State administered program Exempt from premium tax Reductions in system-wide administrative costs

Financial Highlights:

- Status Quo Expenditure for Covered Populations: \$55.0 B to \$58.0 B
- Preliminary Model Cost Estimate: \$52.0 B to \$58.0 B
- Difference: Projected \$3.0 B decrease in aggregate expenditure and no change in aggregate spending
- Estimated Enrollment: 5.96 M

Model B: Universal Coverage – Delegated Administration

Covered Populations	Benefits	Cost Sharing	Provider Reimbursement	Population Specific Impacts	Administration
<ul style="list-style-type: none"> Medicaid CHIP Private Health Insurance (<i>employer, state employee, exchange</i>) Undocumented Immigrants Uninsured 	<ul style="list-style-type: none"> Essential health benefits Dental Vision Long Term Care (incremental new system costs pending) 	<ul style="list-style-type: none"> No cost sharing Private Insurance utilization changes due to removal of cost sharing 	<ul style="list-style-type: none"> Reduced pricing variation Administrative efficiency Purchasing power 	<ul style="list-style-type: none"> Medicaid population access change Uninsured utilization changes Undocumented immigrant utilization changes 	<ul style="list-style-type: none"> State provided insurance, administered by managed care plans Not exempt from premium tax Reductions in system-wide administrative costs

Financial Highlights:

- Status Quo Expenditure for Covered Populations: \$55.0 B to \$58.0 B
- Preliminary Model Cost Estimate: \$54.5 B to \$60.6 B
- Difference: Projected between a \$0.5 B decrease and an increase of \$2.6 B in aggregate expenditure
- Estimated Enrollment: 5.96 M

Model C: Close the Gap

Model Component	Key Assumption
Covered Populations	<ul style="list-style-type: none"> Undocumented Immigrants
Benefits	<ul style="list-style-type: none"> Essential Health Benefits
Cost Sharing	<ul style="list-style-type: none"> Standard allowable cost sharing
Provider Reimbursement	<ul style="list-style-type: none"> Consistent with Cascade Care parameters
Population Specific Impacts	<ul style="list-style-type: none"> Utilization assumptions reflect this population having similar utilization patterns to the commercially insured population
Administration	<ul style="list-style-type: none"> Standard exchange plan administrative costs

Status Quo Expenditure for Covered Populations: Expenditure information unavailable.

Preliminary Model Cost Estimate: \$400 M - \$600 M

Difference: N/A

Estimated Enrollment: 124,428