

By many measures, Washington State is successfully implementing health care reform. As of September 2015, approximately 1.5 million Washington State residents enrolled in either Qualified Health Plan (QHP) or Apple Health (Medicaid) coverage through Healthplanfinder. The number of uninsured individuals has dropped substantially. The state's navigator organizations—which are charged with identifying and enrolling hard-toreach, at-risk and vulnerable populations—have been critically important to achieving these successful enrollment numbers, working in conjunction with the Health Benefit Exchange (HBE), the Health Care Authority (HCA) and other state agencies. HBE reported that during the second open enrollment period through September 2015, navigators assisted over 15,000 people with QHP applications and over 278,000 with Apple Health (Medicaid) applications.

In addition, HBE and HCA have improved their operations since the beginning of health reform implementation, and some problems have been addressed, including those identified in Northwest Health Law Advocates' (NoHLA) 2014 survey.

Despite these significant successes and improvements, navigators responding to NoHLA's September 2015 survey identified important challenges for Washington residents attempting to apply and enroll through Healthplanfinder during the period since the first survey.

With the basic framework in place and nearly two years of experience, it is imperative to make additional improvements to ensure that the system for enrollment and coverage best serves applicants and enrollees. In our 2015 survey, we asked participants familiar with that system to describe the problems they are seeing. The 64 survey participants include in-person assisters (IPAs) and navigators throughout the state, who guided significant numbers of consumers through the Washington Healthplanfinder website application and enrollment process. Their combined responses paint a representative picture of the Washington State experience in the past year.

The affordability of QHPs offered in Washington is still the most widespread problem reported. Respondents overwhelmingly identified affordability of premiums and

cost-sharing as an issue in obtaining and maintaining coverage of a QHP. 89% of respondents indicated that they encountered consumers who had problems paying for health coverage and care compared to 83% in 2014. Respondents found technological and website problems persisted throughout the enrollment process, with many problems affecting immigrants in particular. Many respondents again reported that consumers did not always understand health coverage terminology, correspondence, or covered benefits. Respondents also noted differences in the barriers and the scale of problems for those eligible for Qualified Health Plan coverage as compared to those qualified for Apple Health coverage. Issues also surfaced regarding eligibility redeterminations and renewals, especially when a family experienced changes affecting eligibility.

Though Washington's Healthplanfinder is largely successful, the concerns identified in this survey should be the focus of continued advocacy and attention. Resolution of problem areas will strengthen the system for enrollment and coverage, further reduce the number of uninsured, and accomplish the broader intent of the ACA to improve the overall health of all who are enrolled.

Our observations and recommendations in brief are:

- **Coverage still remains unaffordable for some.** We again recommend that HBE gather data to more precisely identify the cost barriers and populations affected. Based on this information, policymakers should create affordable coverage options so that all people have access to coverage. Because this remains a consistent issue throughout two open enrollment periods we recommend that affordability be considered a priority issue by HBE.
- Website and technical issues remain critical barriers to enrollment and retention of coverage for many, and particularly for immigrants. HBE has improved its website by removing premium aggregation and addressing many technical glitches. However, issues remain. We recommend that HBE seek permanent solutions so that it can provide timely, efficient, and uninterrupted access to coverage.
- Information and knowledge gaps remain. Consumers continue to face issues when using Healthplanfinder. Many lack knowledge regarding technology and health literacy, and have general questions about the website. In the coming year, policymakers should prioritize:
  - Continuing to simplify application and enrollment, and coordinating between state agencies and HBE, to ensure a seamless and accessible system.
  - Revising the Healthplanfinder application by clarifying the way questions are asked and using context-specific help, and improving written correspondence to individuals.

- Retaining a robust consumer assistance program, as it provides vital assistance to consumers who have limited English proficiency or specialized needs, lack Internet access, or have difficulty using computers.
- Eligibility and renewal issues create barriers for obtaining and retaining coverage. We recommend that HCA and HBE develop clear and accessible information about change reporting, the impact of changes on eligibility, and Special Enrollment Periods.

