

Cascade Care FAQ

1. What is Cascade Care?

Washington Health Benefit Exchange (HBE), in partnership with Health Care Authority (HCA) and Office of the Insurance Commissioner (OIC), are working together to implement [Senate Bill 5526 \(Cascade Care\)](#). Cascade Care will create new, affordable health insurance coverage options for [Washington Healthplanfinder](#) customers. Options will include standard plans and public option plans.

The goal of Cascade Care is to increase the availability of quality, affordable health coverage in the **individual market**, and ensure residents in every Washington county have a choice of qualified health plans.

Enrollment in Cascade Care will begin November 1, 2020, with a coverage effective date of January 1, 2021.

2. Which agency is responsible for what?

- HBE is the lead agency for Cascade Care, and responsible for the standard benefit design. HBE's Board of Directors [approved these designs](#) in December 2019. Washington Healthplanfinder (through HBE) will offer Cascade Care coverage.
- HCA is responsible for procuring the public option plans. These plans are required to have a standard benefit design and meet additional quality and value standards and requirements.
- OIC is responsible for approving the plans and providing regulatory oversight.

3. Starting in 2021, will Washington Healthplanfinder only offer standard plans or Cascade Care? Will Cascade Care replace other plans?

No. Cascade Care will be a new type of coverage offered **in addition** to the non-standard plans already offered through Washington Healthplanfinder.

4. What's the difference between coverage offered through Washington Healthplanfinder and HCA?

Washington Healthplanfinder offers individual market coverage, which is different from [Apple Health \(Medicaid\)](#) or employer-sponsored coverage. Our [Public Employees Benefits Board \(PEBB\)](#) and [School Employees Benefits Board \(SEBB\)](#) programs are examples of employer-sponsored coverage.

5. How many people are currently enrolled with Washington Healthplanfinder?

As of January 2020, Washington Healthplanfinder has about **200,000** people enrolled in individual coverage across the state. HCA purchases health care for more than **2.5 million** Washington residents through Apple Health, PEBB, and SEBB.

6. How many people are expected to enroll in Cascade Care?

We won't know until after Washington Healthplanfinder's 2020 open enrollment period ends. Given the amount of people enrolled in Washington Healthplanfinder coverage already, we anticipate a smaller portion to enroll in Cascade Care.

7. Will Cascade Care plans be qualified health plans?

Yes. Cascade Care plans will meet existing federal and state laws for qualified health plans. Offerings will be available as additional plans through Healthplanfinder, and will not affect Medicaid and Medicare programs.

8. Where is HCA at in the procurement process?

Through January 17, 2020, we are holding a public comment period on the quality, value, and affordability standards for the public option plans. Procurement for the public option plans will occur in February 2020, and HCA will select the successful carriers.

9. Under Cascade Care, what must the successful carriers offer?

Within the approved standard benefits design, carriers must offer at least one gold and one silver standard plan. They must also offer one standard bronze plan, if they offer a non-standard bronze plan. Other key outcomes include:

- Lower deductibles.
- Ensure access to more services before the deductible.
- Copays to provide transparency and predictability of costs for consumers.
- Bronze plans that include high-value services before the deductible, at a potentially lower premium or price point.

In addition, there are quality and value participation requirements specific to the Cascade Care public option plans. The recommendations proposed by the Robert Bree Collaborative are:

- HCA selects five recommendations/topics for carriers to implement.
- Each carrier selects three recommendations/topics to implement.
- Carriers reports on progress.

The recommendations proposed by the Health Technology Assessment program are:

- Carriers are required to provide a baseline report of their coverage criteria to Health Technology Clinical Committee (HTCC) decisions in their procurement response.
- For initial year, carriers are expected to be aligned with at least 50 percent of decisions and submit a plan for aligning to HTCC decisions.
- Additional requirements are to align to state agency value-based purchasing with a focus on maintaining and improving health.

10. What is the reimbursement cap for providers?

To align with the Cascade Care legislation, the reimbursement caps and floors for carrier payments to providers are as follows:

- Cap set at aggregate of 160 percent of Medicare. Because the rate cap is aggregate, certain providers may receive a higher or lower reimbursement for services under Cascade Care.
- Floors set such that primary care physicians may not be paid less than 135 percent of Medicare, and rural critical access hospitals or sole community hospitals not less than 101 percent of Medicare (allowable costs).
- Rate reimbursement methodology is being developed with actuarial support from Milliman and key involvement from stakeholders.

11. Where can I go for more information?

- To learn more, visit the [HBE website](#) and [HCA website](#).
- You can also [subscribe to receive Cascade Care updates](#) from Washington Healthplanfinder.
- If you have questions about HCA's public option procurement process, please contact HCA at HCACascadeCare@hca.wa.gov.