

Understanding the New Washington Health Program

Washington Health Program (WHP) is a new health insurance plan offered by the Washington Health Care Authority starting July 2010. Unlike the Basic Health program, WHP is **not subsidized** by the state. You get care through the Community Health Plan of Washington, a **managed care organization**. You must be a Washington resident (citizen/immigrant status not required). You may not receive Basic Health or DSHS medical coverage while on WHP, and you may not be eligible for Medicare.

Why Was WHP Created?

Washington Health Program was designed to be an affordable individual insurance plan with lower premiums than many other plans. It offers basic coverage but has some limitations described below. Make sure you understand what WHP has to offer before enrolling.

KEY FEATURES:

Covered services similar to Basic Health: WHP offers a basic benefit package including office visits, preventive care, immunizations, hospital and emergency, drugs, labs, imaging, and more. Mental health and rehabilitation are limited, and dental and vision are excluded. For a complete list of benefits and exclusions, [click here](#).

Relatively low premiums: WHP was designed to be more affordable. For example, a 44-year-old non-smoker on the \$75,000 cap plan would pay a monthly premium of \$162.15 in King County or \$137.25 in Yakima County. To find out your premium, [click here](#).

Annual coverage cap: If your annual costs are more than **\$75,000 or \$100,000** (your choice of plan), you pay all additional costs.¹

Other costs: You pay **30% of the cost of most services** (50% for out-of-network services, non-formulary drugs) but you pay nothing for preventive services, clinic visits, urgent care and generic drugs. There is a **\$500 deductible**, and an **out-of-pocket maximum of \$3,000 for individuals, \$9,000 for families**. Beyond this amount, WHP will pay all costs until you reach the annual cap.

Cost-sharing example:

Your surgery costs \$20,000. Your cost would be the \$500 deductible plus 30% of the remaining cost of surgery (\$5,850). However, that exceeds the out-of-pocket maximum of \$3,500 so you will only be billed for that amount.

Pre-existing conditions: If you have a pre-existing condition, you must wait 9 months before WHP will cover that condition. If you recently had health insurance, your waiting period may be reduced or waived. The waiting period does not apply to certain services such as prescription drugs and diabetes treatment. For more information, [click here](#).

Maternity deductible: If a woman has not been covered by the program for at least 6 months before giving birth, there is a \$5,000 deductible plus co-insurance for the delivery.

¹ This cap limits WHP coverage if you receive very costly care. For example, the average cost of a heart valve procedure is over \$111,000. For information about the costs of medical procedures in Washington, [click here](#).

You can enroll in WHP and still retain your position on Basic Health's waiting list.

HOW DO I APPLY?

- Complete a WHP application.
- Provide proof of Washington residency (such as a rent receipt or electric bill; [more](#)).
- Fill out a Standard Health Questionnaire (SHQ) for each person. Some people are exempt. [Click here](#) and follow the SHQ link (upper left side of page) to learn more. If you have costly health conditions, you may not be allowed to enroll in WHP but will be referred to WSHIP (see below).
- Because the program is unsubsidized, no financial information is required.

IS THERE ANY REASON I SHOULDN'T ENROLL IN WHP?

Compare costs, benefits and providers. Carefully compare WHP to coverage offered by your employer or private health insurance companies. How do the benefits and costs compare? Which health care providers can you use? What can you afford? If you are under 26 years old, look into coverage through your parents' insurance.

Public programs such as Medicaid or Basic Health may offer you better coverage at a lower cost because these programs are state-subsidized. Basic Health is currently closed to new enrollment and has a long waiting list. You can find more information about Medicaid and other DSHS programs [here](#).

Children can receive comprehensive coverage for free or a substantially lower cost than WHP through Washington's Apple Health for Kids. Most children are eligible if their family's gross income is below 300% of the federal poverty level (\$5,513 per month for a family of 4). More information is available [here](#) or call 1-877-543-7669.

Consider whether you qualify for the **Pre-existing Condition Insurance Plan (PCIP-WA)**, a new subsidized insurance program created by national health reform to cover people with certain pre-existing conditions who have been uninsured for at least 6 months, and are citizens or legal immigrants. Coverage is comprehensive but premiums may be three to five times as high as WHP. Applications will be accepted starting August 1 for September coverage. For more information on PCIP-WA, [click here](#). *Be aware that once you enroll in WHP you are no longer uninsured and will probably be ineligible for PCIP-WA.*

If you have costly health conditions, you will be referred to WSHIP, **Washington's high-risk pool** instead of WHP. [WSHIP](#) allows people who have been rejected for health insurance to buy comprehensive medical coverage. WSHIP premiums are generally three to five times as high as WHP, but WSHIP offers more benefits and more protection, with a \$2 million lifetime cap on benefits.

For more information about Washington Health Program, [click here](#). For free, unbiased, confidential information about health care coverage options, call the Statewide Health Insurance Benefits Advisors (SHIBA) HelpLine at 1-800-562-6900 or visit the [SHIBA website](#).