

pennie[®]





Pennie Board of Directors Meeting

August 2024

Agenda

- **Preliminary Matters**
 - May 16, 2024 Board Meeting Minutes
- **Executive Director's Report**
 - Enhanced Premium Tax Credits
 - State Health Insurance Exchange Affordability Program
 - Organizational Updates
- **Featured Plan Display Proposal**
- **Appendix**
 - State Subsidy System Functionality Preview
 - Q1 & Q2 2024 Financial Report
 - Unwinding Data Report as of July 1, 2024





Preliminary Matters

Preliminary Matters

- **Call to Order**
- **Roll Call**
- **Approval of Previous Meeting's Minutes**
- **Opportunity for Public Comment**



Executive Director's Report

Discussion Topics

- **Federal Updates: Enhanced Premium Tax Credits**
- **State Updates: State Health Insurance Exchange Affordability Program**
- **Organizational Updates:**
 - Medicaid Unwinding Report
 - Open Enrollment 2025 Readiness
 - Calendar Year 2024 Budget Review
 - Future Budget Contingencies



Federal Update:

Enhanced Premium Tax Credits

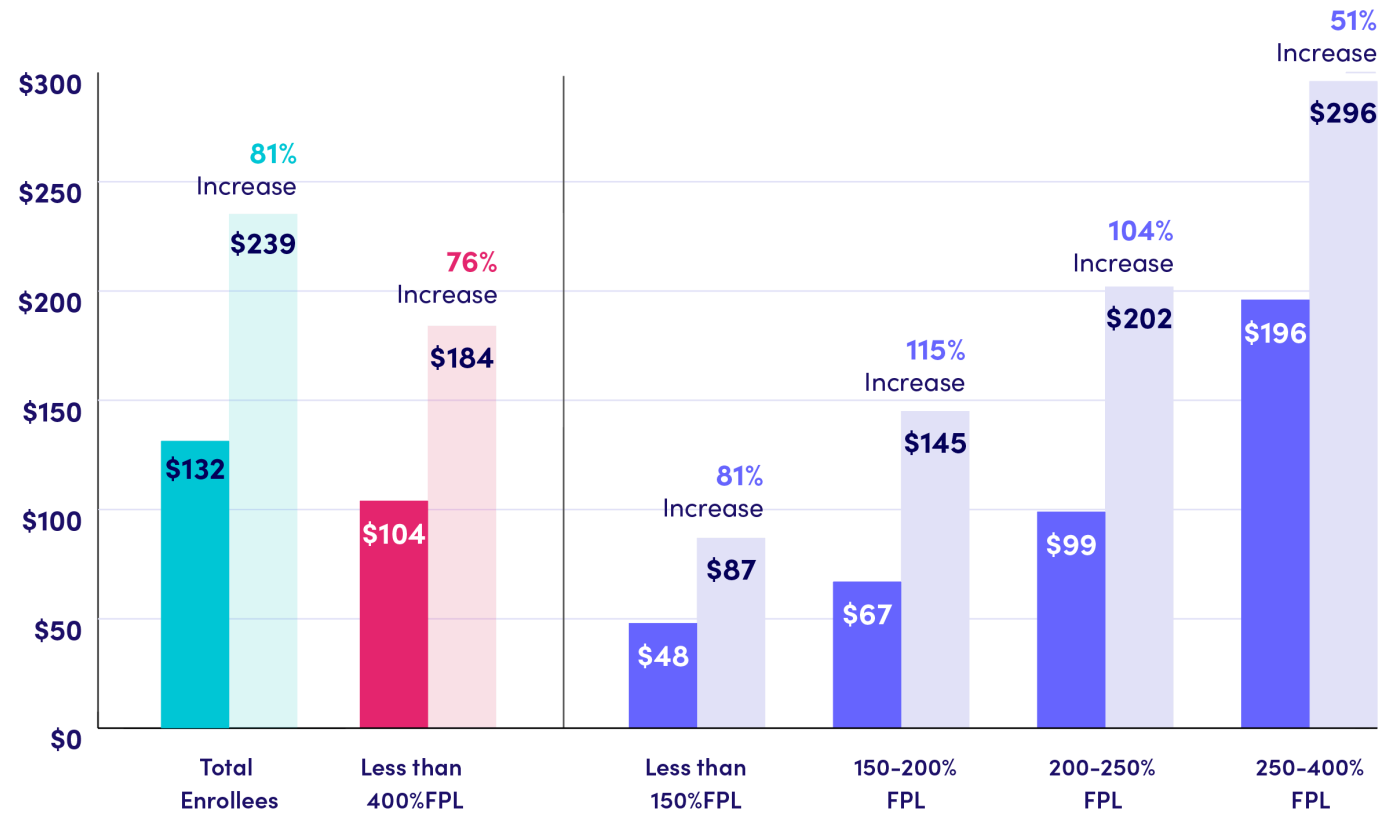
Top Takeaways

- Federal Inflation Reduction Act (IRA) enhanced premium tax credits are set to expire at the end of 2025 if Congress does not act. The enhanced premium tax credits go beyond the original Affordable Care Act to make coverage significantly more affordable.
- Over **\$500M** annually in advanced premium tax credits (APTCs) will no longer be available to Pennsylvanians if the tax credits expire. This accounts for **1/5th** of all premium tax credits distributed to Pennsylvanians annually.
- Since the enhanced tax credits have become available, we have seen enrollment gains in the **low income, pre-Medicare, young adult**, and **rural** communities. These vulnerable populations will be disproportionately impacted if the tax credits expire.
- For those receiving enhanced tax credits, **premiums would increase by 81%** if the customer remained in their same plan and the tax credits expired.
- Communicating the impact of expiring subsidies will be especially difficult, as **two-thirds** of current Pennie customers have only experienced enrollment with the enhanced tax credits in effect.

Enhanced Tax Credits Impact to Below 400% FPL Population

Per Member Per Month (PMPM) Net Premium Metrics

Federal Poverty Level (FPL)	Enrollees Using APTCs
Total enrollees	378,342
Less than 400% FPL	341,069
Less than 150% FPL	85,178
150-200% FPL	93,191
200-250% FPL	67,718
250-400% FPL	94,982



- 90% of enrollees** receiving APTCs are below 400% FPL. If the enhanced tax credits expired today, they could face **premium increases of up to 76%** if they remain enrolled in their current plan.
- When considering total enrollees receiving APTCs, these premium increases jump to **81%**.

*Note: The enrollment and net premium metrics shown do not include members who are eligible for APTCs but are not receiving them in advance.

Enhanced Tax Credits Impact to Above 400% FPL Population

- 10% of customers using APTCs have an FPL above 400%. They will see the largest cost increases – a monthly increase of \$376 per enrollee, or more than \$1,500 for a family of 4.
- These cost increases will disproportionately impact those approaching Medicare (55-64 age band) as 58% of customers receiving APTCs at the 400%+ FPL fall within this age band.

Scenario 1:

Married couple (60 years old), non-smokers, Philadelphia County, 420% FPL (\$82,782 annual income)

With enhanced premium tax credits:

- Monthly premium - **\$586** (\$7,032/year)
- Percent of income – 8.5%

Without enhanced premium tax credits:

- Monthly premium - **\$1,549** (\$18,588/year)
- Percent of income – 22.45%

Expiration of the tax credits results in a **164% increase** on this couple's net premium.

Scenario 2:

Married couple (60 years old), non-smokers, York County, 420% FPL (\$82,782 annual income)

With enhanced premium tax credits:

- Monthly premium - **\$586** (\$7,032/year)
- Percent of income – 8.5%

Without enhanced premium tax credits:

- Monthly premium - **\$2,827** (\$33,924/year)
- Percent of income – 41%

Expiration of the tax credits results in a **382% increase** on this couple's net premium.

Annualized Per Policy Tax Credit Metrics

Legend: Erie \$1,600

County	Annualized Per Policy Tax Credit Metric
Adams	\$2,751
Allegheny	\$1,512
Armstrong	\$1,985
Beaver	\$1,846
Bedford	\$1,708
Berks	\$1,836
Blair	\$1,703
Butler	\$1,910
Cambria	\$2,058
Carbon	\$1,690
Cecil	\$1,600
Chesapeake	\$1,600
Chester	\$1,660
Clearfield	\$2,481
Columbia	\$2,195
Crawford	\$2,141
Cumberland	\$2,517
Delaware	\$1,403
Dauphin	\$2,173
Franklin	\$2,400
Fayette	\$1,630
Fulton	\$2,758
Harrisburg	\$1,600
Huntingdon	\$2,419
Indiana	\$2,144
Juniata	\$2,924
Lancaster	\$1,998
Lebanon	\$2,418
Lehigh	\$1,810
Luzerne	\$1,493
Lycoming	\$2,112
McKean	\$2,254
Monroe	\$1,696
Montgomery	\$1,548
Morris	\$1,600
Mifflin	\$2,114
Nantuxet	\$1,600
Northampton	\$1,909
Northumberland	\$1,600
Perry	\$2,433
Pike	\$2,291
Potter	\$2,394
Pottsville	\$1,600
Schuylkill	\$1,830
Snyder	\$2,534
Somerset	\$1,841
Sullivan	\$1,897
Tioga	\$2,309
Union	\$2,543
Warren	\$1,974
Washington	\$1,740
Wayne	\$1,706
Westmoreland	\$1,709
York	\$2,689
York	\$2,689

- This county map shows the average annual loss of APTCs per policy if the enhanced tax credits were to expire today.
- Although policies in every county would receive less APTCs, counties in central PA are expected to lose more dollars. These counties are predominately rural, as compared to other parts of the Commonwealth.

PROPRIETARY & CONFIDENTIAL 

Enhanced Tax Credits Impact to Buying Power

- More than **1 in 8 customers (12.5%)** who were enrolled for both OE 2021 and OE 2024 have shopped and enrolled in a richer benefits plan.
- Since OE 2021, overall **enrollment in gold plans has increased 17 percentage points**, and enrollment in bronze plans has decreased 4 percentage points. This means both premiums and out of pocket costs are now more affordable for those individuals in richer benefits plans.
- Since OE 2021, the number of enrollees with **monthly premiums under \$10/month has doubled**, meaning these more generous plans are also more affordable today due to the enhanced tax credits.
- If the enhanced premium tax credits expire at the end of 2025, Pennsylvanians' buying power will be severely diminished, and we can expect to see either increased enrollment in less expensive plans, or disenrollment altogether.

How Is Your Organization Preparing?

- **Customer impact:**
 - What are some different ways to show the customer impact?
 - Will your organization be sharing testimonials from either customers or providers?
- **Financial impact:**
 - What are some different ways to show the financial impact?
 - Will your organization use any data to demonstrate the financial impact to enrollees? If so, what data will you use?
- **Other actions:**
 - Have you considered publishing educational materials speaking to the importance of extension and the disruption with expiration?
 - Have you considered connecting with your national contacts to urge timely legislative action? Remaining uncertainty even in early 2025 will have impacts (e.g. on proposed rates for 2026), and the longer uncertainty remains in 2025, the more directly the customer will be impacted.



State Update:

State Health Insurance Exchange
Affordability Program

Program Authority Update

- As part of the 2024-2025 Pennsylvania State Budget, the Fiscal Code was amended to allow for the creation of a State Health Insurance Exchange Affordability Program beginning in plan year 2025, contingent on funding provided through the General Assembly.
- This program would be managed by Pennie and its purpose is to incentivize enrollment by providing financial assistance to eligible individuals purchasing a health insurance policy through the exchange.
- The program must only provide financial assistance to individuals between 151% – 300% of the Federal Poverty Level (or lower if the federal enhanced tax credits are not extended after 2025) and cannot be applied towards bronze plans.
- The legislation provides two funding mechanisms for this program, a disbursement from the Joint Underwriters Association to not exceed \$50M annually for the program, or an appropriation from the General Assembly. **No funding is available at this time for plan year 2025.**

Program Implementation Update

To prepare for the earliest possible deployment of a state subsidy, Pennie had started working to build system functionality to operate a state subsidy program. To ensure readiness for eventual implementation, Pennie plans to finish the build, and then test this functionality with insurers early next year. A tentative timeline for next steps is shared below:

- **Present – Q1 2025: Coordinate with insurers to prepare for state subsidy testing**
 - State subsidy information will be transferred using the existing 834 file.
 - Insurers will need to be able to reconcile the net premium amount reflected in the 834 (inclusive of state subsidy) with their existing billing processes.
 - The state subsidy amount will need to be reflected on invoices sent to customers.
- **Spring 2025: Conduct testing with insurers**
- **Spring – Summer 2025: Pennie to test system functionality**

System Functionality Preview



Because other states have already deployed a state subsidy program, we were able to secure a preliminary look at how it would be presented to the customer at various points in the application process.

It is important to note, this system design is not final, and the language used to reference and describe the program is only serving as a placeholder.

1. Anonymous Shopping Eligibility Results
2. Member Portal – Enrollment Dashboard
3. Plan Shopping – Plan Tile
4. Issuer Enrollment Portal

Anonymous Shopping Eligibility Results

In this section:

-  The cost of health and dental insurance depends on where you live, how many people are in your household, and income.
-  You can view your selected favorite health and dental plans for coverage year 2025 from start of open enrollment.

Based on what you told us, here is what you may qualify for:

Household member: Applicant qualifies for:



Lower monthly premium

Estimated Tax Credit of \$565 /month

Based on the income you entered, you may qualify for an Advanced Premium Tax Credit (APTC). A tax credit could lower your monthly insurance bill.

Your monthly premium may be about \$50/month.

The second-lowest cost Silver level health plan ([SLCSP](#)) used to calculate the APTC shown above is \$615



PA Health Plan Savings

Estimated PA Health Plan Savings amount of \$50.25 /month

Based on the information provided, you may qualify for additional savings from Pennie and the Commonwealth of Pennsylvania.

Household member: Applicant qualifies for:



Lower out-of-pocket costs

It looks like you may qualify for cost-sharing reductions. These will reduce the

Member Portal - Enrollment Dashboard

Welcome, Mike Thomson

My Stuff

My Dashboard

My Applications

My Eligibility Results

My Enrollments

My Delegates

My Inbox

My Tickets

My Preferences

Quick Links

Find Local Assistance

2024

2025

Next Steps

You have successfully enrolled in health plans and dental plans. If you'd like to change your plans, please click on the button below and shop for new plans.

Change Plans

Overview

Your Application Status

(Your Case ID is PA1100043317)

2025 Application For 2 members	Complete	View Application
		Tobacco Status

Your Household Eligibility

Mike Thomson	<u>Advanced Premium Tax Credit</u> \$678.93 per month	View Details
Jenila Thomson	<u>PA Health Plan Savings</u> \$64.50 per month	Edit Application

One or more members of your household are eligible for Cost Sharing Reductions

Plan Shopping – Plan Tile

Coverage will start on 01/01/2025

SORT BY

- ☒ Expense Estimate
- ☐ Monthly price
- ☐ Preferred Provider or Facility
- ☐ Deductible
- ☐ Out-of-Pocket (OOP) Max

FILTER BY

PLAN TYPE

- ☐ EPO
- ☐ PPO

PLAN FEATURES

- ☐ CSR Eligible
includes special discounts

< 1 of 5 >

LOWER EXPENSE \$

Together Blue EPO Premier Gold 0

☒ YOUR CURRENT PLAN

GOLD EPO

\$3.75 /month

After \$718.10 in total savings

PRIMARY CARE VISIT \$15 Copay

GENERIC DRUGS \$0 Copay

DEDUCTIBLE \$0 / \$0

OOP MAX \$13100

LOWER EXPENSE \$

Together Blue EPO Gold 0

GOLD EPO

\$0.00 /month

After \$694.39 in total savings

Federal = \$678.93
 PA Savings = \$15.46
 Total Savings = \$694.39

OVERALL QUALITY
RATING ★★★★★

LOWER EXPENSE \$

Together Blue Virtual Choice EPO
Gold 1500

GOLD EPO

\$0.00 /month

After \$651.65 in total savings

PRIMARY CARE VISIT \$35 Copay

GENERIC DRUGS \$0 Copay

DEDUCTIBLE \$3000 / \$0

OOP MAX \$16600

OVERALL QUALITY
RATING ★★★★★

Issuer Enrollment Portal

Insurer Logo

Health and Wellness

Enrollment Status: **PENDING**

Confirmation Date:

MONTHLY PAYMENT

Premium Amount: \$378.29

Elected APTC Amount: \$168.08

PA Health Plan Savings Amount: **\$19.25**

Net Premium: \$190.96

Submitted Date: 07/22/2024

APTC Effective Date: 01/01/2025

PA Health Plan Savings Effective Date: **01/01/2025**

Last Update Date: 07/22/2024

Additional Information

COMPLETE SILVER + VISION + ADULT DENTAL

Effective Date: 01/01/2025 - 12/31/2025

Premium and APTC Grid

ENROLLMENT ID'S

Pennie Assigned Policy ID: 8706

Transaction ID: PA00000008769

Plan HIOS ID: 86199PA002000401

Agent Delegation History

Premium and APTC Grid

Month	Gross Premium	APTC	Net Premium	PA Savings	Application Type
January	\$378.29	\$168.08	\$190.96	\$19.25	Financial
February	\$378.29	\$168.08	\$190.96	\$19.25	Financial
March	\$378.29	\$168.08	\$190.96	\$19.25	Financial
April	\$378.29	\$168.08	\$190.96	\$19.25	Financial
May	\$378.29	\$168.08	\$190.96	\$19.25	Financial
June	\$378.29	\$168.08	\$190.96	\$19.25	Financial
July	\$378.29	\$168.08	\$190.96	\$19.25	Financial
August	\$378.29	\$168.08	\$190.96	\$19.25	Financial
September	\$378.29	\$168.08	\$190.96	\$19.25	Financial
October	\$378.29	\$168.08	\$190.96	\$19.25	Financial
November	\$378.29	\$168.08	\$190.96	\$19.25	Financial



Organizational Updates

Medicaid Unwinding Top Takeaways

(more detailed data found in the appendix)

Total enrollment
throughout
unwinding period

84,547
Enrollees

Overall
conversion rate: **18%**

- Geographically, unwinding enrollment patterns align with uninsured population disbursements in the Commonwealth (more highly concentrated in Philadelphia and Allegheny counties)
- **74%** of unwinding account transfers from Medicaid are eligible for the auto-eligibility process, which results in an automatic account and application creation, as well as an eligibility determination notice sent from Pennie without any customer action.
- **97%** of current unwinding enrollees are eligible for financial assistance.
- **23%** of current unwinding enrollees are **paying \$1 or less** for coverage, and **56%** of current unwinding enrollees are **paying \$50 or less**.
- Pennie will continue to support the enrollment of the unwinding population through the end of the final 120-day Loss of MA/CHIP SEP window (end of Oct 2024) and then throughout OEP 2025.

***Note:** all metrics are reflecting results of those ever enrolled throughout the unwinding period, not currently enrolled, unless indicated otherwise.

Open Enrollment 2025 Readiness

Overall strategy will focus on promoting enrollment gains through retaining existing consumers and expanding to new uninsured Pennsylvanians, similar to OE 2024.

Retention Strategy

- Dedicated focus on high quality execution of autorenewal process.
- Comprehensive outbound communication strategy to targeted groups of current customers before and during Open Enrollment
 - Examples: auto-renewals, non-auto-renewals, and customers who will be losing financial savings for various reasons.
- Outbound communication avenues includes email, outbound calls, mailers, notice inserts, and texting.

Growth Strategy

- Expansion of the broker recruitment and diversification effort enhanced by new data & business opportunities.
- Partnering with trusted community leaders in the Philadelphia region & collar counties.
- Communicating regionally specific “call to action” messages through digital advertising tactics.
- Targeting the media buy plan with advertising tactics around the Philadelphia region.
- Earned media strategy focusing on media outlets in the Philadelphia/Pittsburgh regions.

Two new implementations will have additional focus for this Open Enrollment:

- Failure to Reconcile (FTR)
- Deferred Action for Childhood Arrivals (DACA) eligibility changes

All operational activities for OE 2025 are on track.

August

Early-August

- End of Early Plan Preview for Insurers
- Blackout Period Begins for Assister Training

Mid-August

- Pennie Receives Approved Insurer 2025 Plan Data from PA Insurance Department (PID)
- 2025 Broker Training Available
- 2025 Assister Training Available

Late-August

- Load 2025 Plans Into Production for Insurer Review

September

Early-September

- Insurers Review Plans in Pennie Portal

Late-September

- Release 24.9 Production Deployment
- PID Finalizes 2025 Plans and Publishes Rates
- All 2025 Plans Certified

October

Early-October

- OEP Awareness Marketing Campaign
- Renewal Eligibility and Autorenewal Processing Begins

Mid-October

- OEP Email Campaign Begins
- Autorenewal Enrollments Sent to Insurers
- Stakeholder Materials Distributed

Late-October

- Broker/Assister Recertification Training Deadline
- Autorenewal and Eligibility Notices sent to Customers

November

Early-November

- Open Enrollment Begins
- 2025 Anonymous Shopping Available
- "Call to Action" Marketing Campaign Begins

December

Mid-December

- Plan Shopping Deadline for January 1 Coverage
- Catch-up Autorenewals Generated for New Customers

January

Mid-January

- Plan Shopping Deadline for February 1 Coverage
- Conclusion of OEP

Calendar Year (CY) 2024 Budget Updates

(more detailed update in the appendix)

Through Q2, revenue streams remain consistent and are 10% above expected, and expenditures continue to come in under budget (2% variance).

The 2023 reinsurance contribution has been confirmed and totals roughly \$29M. Payment was made to the Insurance Department at the beginning of July.

Pennie's financial positioning remains very strong.

Future Budget Contingencies

- Pennie has reached a point of stability with its financial operations.
- As we begin to prepare our fifth annual budget, we enter the planning process with a strong understanding of the revenue generation we can expect throughout the year, as well as the total expenditures required for our operations.
- Meanwhile, Pennie has accrued a substantial year-to-year carryover due to a unique combination of factors compared to original projections, including increased enrollment due to the enhanced premium tax credits and lower than expected reinsurance payments.
- With five years of historical data to draw upon, we feel confident in our ability to continue the strong work towards fulfilling our mission.
- However, as Pennie has self-funded operations, we believe we are at a point in our maturation where we should strategically establish operational reserves, or "rainy day" funds, to ensure long-term viability and protect against unforeseen circumstances in the future.

Future Budget Contingencies Cont.

- Historically, two buckets of expenditures would warrant an operational reserve: 1) operations/personnel and 2) the reinsurance contribution. Moving forward, we expect there to be one additional bucket to plan for: 3) state subsidy.
- For these three budget line items, Pennie is proposing the creation of an operational reserve starting in CY2025. Based on funding available to Pennie and in alignment with the industry standard of setting aside 50% of the annual budget, we are recommending the creation of an operational reserve of \$75M starting in CY2025.
- The operational reserve fund would be allocated as follows:
 - Operational/Personnel contingency: \$30M
 - Reinsurance contingency: \$20M
 - State subsidy contingency: \$25M
- This would allow Pennie to continue to have annual increases to operating costs to meet general inflation and a special project fund of about 5% of the operations budget each year.

Future Budget Contingencies Cont.

- **What is an operational reserve?**
 - An operational reserve is dedicated funds set aside and used to stabilize our organization's finances by providing a cushion against unexpected events, losses of income, and large, unbudgeted expenses.
- **How is the amount of the operational reserve determined?**
 - An operational reserve is often measured in terms of months of operating expenses. For example, 50% of the annual budget is equal to six months of operating reserve. The goal is to have six months of operating revenues in the operational reserve.
- **How is the operational reserve reflected in the annual statement of financial position?**
 - The operational reserve will be reflected in the equity section of our statement of financial position which is completed annually by our independent auditor and published on our website.*
- **Will the creation of an operational reserve change how Pennie plans its annual budget process?**
 - No, Pennie will continue to use projected annual revenues to determine how much funding is available for personnel, operations, special projects, and the reinsurance contribution.

*Historical financial audits can be found at the following link under the "Reports" tab: <https://agency.pennie.com/resources/>



Featured Plan Display Proposal

Possible Featured Plan Display Approach

- Pennie is pivoting its approach to simplifying the customer shopping experience.
- Rather than only allowing a certain number of plans on its platform, Pennie would leverage the plan filtering options available on its platform to display a limited number of plans initially with the option to see the full set of plans.
- This would put customers in the driver's seat to determine whether they want to shop from a default "featured plan" view, or the "all plans view."
- Insurers would determine which plans in each metal level they want to "feature."
- Recent survey of the uninsured in PA asked if certain factors would motivate them to search again for coverage. Responses indicated that some consumers wanted fewer plan options, and others wanted more as long as they met specific health coverage and cost needs. This proposal allows individuals to have an experience that matches what they are looking for.

Benefits and Parameters of New Approach

- Reduces the number of plans customers initially see, helping those customers who currently feel overwhelmed by plan shopping – addresses core objective of prior proposals.
- Would ensure continuity for current enrollees - all plans would not show initially but no plans would be eliminated. This will avoid consumer disruption, which was a key concern of prior proposals.
- Allows customers to decide if they want to see the featured plan display or all plans being offered – allowing for varying individual preferences and comfort with plan shopping.
- Insurers would determine which plans they want to highlight in the Featured Plan Display
 - Insurers could feature up to 6 plans per metal level, with no more than a total of 15 plans featured
 - Insurers would need to include the lowest cost premium plan for each metal level
 - The 15 featured plans would apply at the parent company level, which would need to identify the featured plans across legal entities
- **Data on consumer use of the featured plan display would be analyzed and discussed after implementation to inform future discussions on supporting effective consumer choice.**

Customer View

◀ Back to preferences

Health Plans Dental Plans 0

Health Coverage

For 1 Member in ZIP code 18211. [Edit Family](#)

Coverage will start on 08/01/2024

☒ On ☐ Off Featured Plan Display

Hover over text here

SORT BY

- ☒ Expense Estimate
- ☐ Monthly price
- ☐ Preferred Provider or Facility
- ☐ Deductible
- ☐ Out-of-Pocket (OOP) Max

FILTER BY

PLAN TYPE

- ☐ PPO
- ☐ HMO
- ☐ EPO

PLAN FEATURES

- ☐ HSA Qualified
eligible for Health Savings Account (HSA)

METAL TIER

- ☐ Gold
higher premiums, lower deductibles
- ☐ Silver
lower premiums, higher deductibles

1 of 6

EXAMPLE ONLY NOT FINAL DESIGN


LOWER EXPENSE \$	LOWER EXPENSE \$	LOWER EXPENSE \$
BRONZE HMO	BRONZE HMO	BRONZE HMO
\$386.69 /month	\$401.54 /month	\$451.24 /month
PRIMARY CARE VISIT \$40 Copay	PRIMARY CARE VISIT \$40 Copay	PRIMARY CARE VISIT \$45 Copay
GENERIC DRUGS \$3 Copay	GENERIC DRUGS \$3 Copay	GENERIC DRUGS \$3 Copay
DEDUCTIBLE \$8450	DEDUCTIBLE \$8450	DEDUCTIBLE \$0 / \$3800
OOP MAX \$9250	OOP MAX \$9250	OOP MAX \$9250
OVERALL QUALITY RATING ★★★★★	OVERALL QUALITY RATING ★★★★★	OVERALL QUALITY RATING ★★★★★
PROVIDER Search	PROVIDER Search	PROVIDER Search
<input type="checkbox"/> COMPARE <input type="button" value="DETAILS"/>	<input type="checkbox"/> COMPARE <input type="button" value="DETAILS"/>	<input type="checkbox"/> COMPARE <input type="button" value="DETAILS"/>
<input type="button" value="ADD"/>	<input type="button" value="ADD"/>	<input type="button" value="ADD"/>
LOWER EXPENSE \$	LOWER EXPENSE \$	LOWER EXPENSE \$


- Toggle switch to easily opt in or out of the featured plan display.
- Hover over text informing customers of the featured plan display.


Additional items for consideration in next-level detail discussions:


- Display options for communicating the featured display option to consumers
- Options for insurers to swap out plans mid year


Member Portal - Eligibility Results


 My Dashboard


 My Applications


 My Eligibility Results

 My Enrollments


 My Delegates

 My Inbox

 My Tickets

 My Preferences

Quick Links

 Find Local Assistance

Application ID: 1000032762
Application Date: July 23, 2024

Based on your application, members of your household are eligible for:

Qualified Health and Dental Plans

This is the amount of PA Health Plan Savings you can use to lower your monthly premium.

✓ PA Health Plan Savings of upto \$64.50 to lower your monthly premium.

✓ Cost Sharing Reductions to lower copayments, coinsurance and deductibles.

Your eligibility is based on your provided income of \$45000 and a household of 2, as well as other factors.
Update your application if this information has changed.

What Happens Next

Detailed eligibility for each household member is listed below. Click on the 'Go to Dashboard' button for the next steps to enroll in a plan.

Eligibility Results for household members

Household Member	Eligible for the following	Action needed
------------------	----------------------------	---------------

Plan Shopping - Cart

Confirm your Plan Selection

Health Plan Joe Wilkinson

Remove

Insurer Logo

Health and Wellness
Clear Gold + Vision + Adult Dental

Coverage Start Date: 01/01/2025

Monthly Premium

\$287.71

Monthly Tax Credit (APTC)

-\$242.92

Adjust APTC

Monthly PA Health Plan Savings

-\$34.14

HEALTH MONTHLY PAYMENT

\$10.65

Dental Plan Joe Wilkinson [Change Enrollees](#)

Remove

Insurer Logo

Dominion
Select Plan Basic

Coverage Start Date: 01/01/2025

Monthly Premium

\$6.00

Monthly Tax Credit (APTC)

-\$0.00

DENTAL MONTHLY PAYMENT

\$6.00

Cart Total

Health Monthly Payment

\$10.65

Dental Monthly Payment

\$6.00

TOTAL MONTHLY PAYMENT

\$16.65

[Continue Shopping](#)

[Sign Application](#)

Plan Shopping - Confirmation

Confirmation

Congratulations! You've completed the Pennie enrollment process. Your enrollment will be sent to the insurance company.

FURTHER ACTION REQUIRED:

Please pay your premium by your coverage effective date to ensure that your policy is activated on time. To pay immediately, please use the "Pay Now" button below. You will also receive information in the mail from your insurance company about making a payment.

Health

Joe Wilkinson

Coverage Start Date: 01/01/2025

Insurer Logo

Health and Wellness
Complete Gold

Monthly Price	\$294.29
Tax Credit (APTC)	-\$242.92
Monthly PA Health Plan Savings	-\$50.25

Health MONTHLY PAYMENT

\$1.12

If you would like to complete your payment now, please click the "Pay Now" button to submit your first payment.

Pay Now

Member Portal – My Enrollment

My Dashboard

My Applications

My Eligibility Results

My Enrollments

My Delegates

My Inbox

My Tickets

My Preferences

Quick Links

Find Local Assistance

Health Plan

Together Blue EPO Premier Gold 0

View Benefit Details

SUMMARY OF BENEFITS

Plan Type:	EPO
Primary Care Visit:	\$15 Copay
Generic Medications:	\$0 Copay
Deductible:	\$0
Out-of-Pocket Maximum:	\$13100

PLAN SUMMARY

Coverage Start Date:	01/01/2025
Coverage End Date:	12/31/2025
Enrollment Status:	Pending
Monthly Premium:	\$721.85
Elected APTC:	\$678.93
PA Savings	\$39.17
Net Premium:	\$3.75
Premium Effective Date ? :	01/01/2025

Cancel coverage

CONTACT YOUR INSURER

Customer Service:	8332318961
Web:	

COVERED FAMILY MEMBERS

Spouse	Jenila Thomson	01/01/2025 - 12/31/2025
Self	Mike Thomson	01/01/2025 - 12/31/2025



Q1 & Q2 2024 Financial Report

Q1 & Q2 2024 Financial Overview

Revenue Earned	Q1	Q2	Total
User Fees Billed	\$23,889,518	\$23,962,793	\$47,852,311
Federal Reimbursements Received	\$1,738,458	\$6,404,039	\$8,142,497
Treasury Interest	\$1,084,402	\$1,313,735	\$2,398,137
Q1 & Q2 Total Revenue	\$26,712,378	\$31,680,567	\$58,392,945

Expenses Incurred	Q1	Q2	Total
Personnel	\$1,530,117	\$1,759,379	\$3,289,496
Operations	\$8,044,021	\$11,823,473	\$19,867,494
Q1 & Q2 Total Expenses	\$9,574,138	\$13,582,852	\$23,156,990
Q1 & Q2 Net Position	\$17,138,240	\$18,097,715	\$35,235,955

Q1 & Q2 2024 User Fee Revenue Overview

Quarter	Projection	Actual
Q1 (Jan – Mar)	\$22,138,160	\$23,889,518
Q2 (Apr – Jun)	\$21,397,912	\$23,962,793
Total	\$43,536,072	\$47,852,311
Total \$ Variance	\$4,316,239	
Total % Variance	10%	

Q1 & Q2 2024 Budget Overview

Quarter	Expenses	Budgeted	Actual
Q1 (Jan – Mar)	Personnel	\$1,720,138	\$1,530,117
	Operations	\$8,097,856	\$8,044,021
	Total	\$9,817,994	\$9,574,138
Q2 (Apr – Jun)	Personnel	\$1,919,992	\$1,759,379
	Operations	\$11,844,568	\$11,823,473
	Total	\$13,764,560	\$13,582,852
Overall	Total	\$23,582,554	\$23,156,990
Overall \$ Variance (under budget)	(\$425,564)		
Overall % Variance (under budget)	2%		

Note: Personnel variance due to vacancies, and operations variance due to expenses coming in less than originally anticipated.



Unwinding Data Report

as of July 1, 2024

Unwinding Activity At A Glance

Applicants

460,289

Any Enrollment

84,547

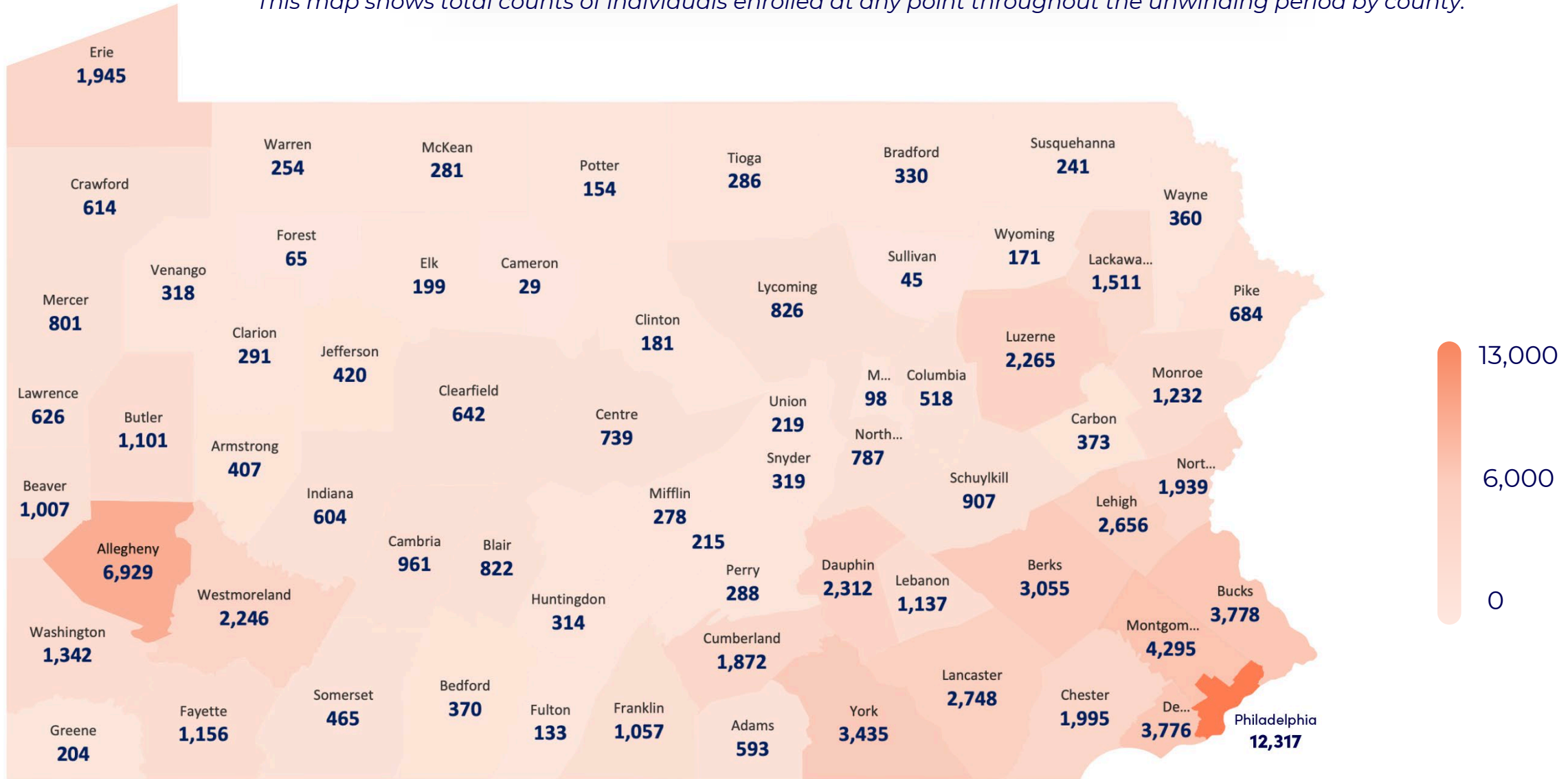
Current Enrollment

67,601

- Average of **1,007** Applicants per day
- Average of **185** Enrollees per day
(Capturing individuals enrolled at any point throughout unwinding period)
- Average of **148** Enrollees per day
(Capturing individuals currently enrolled as a result of unwinding)

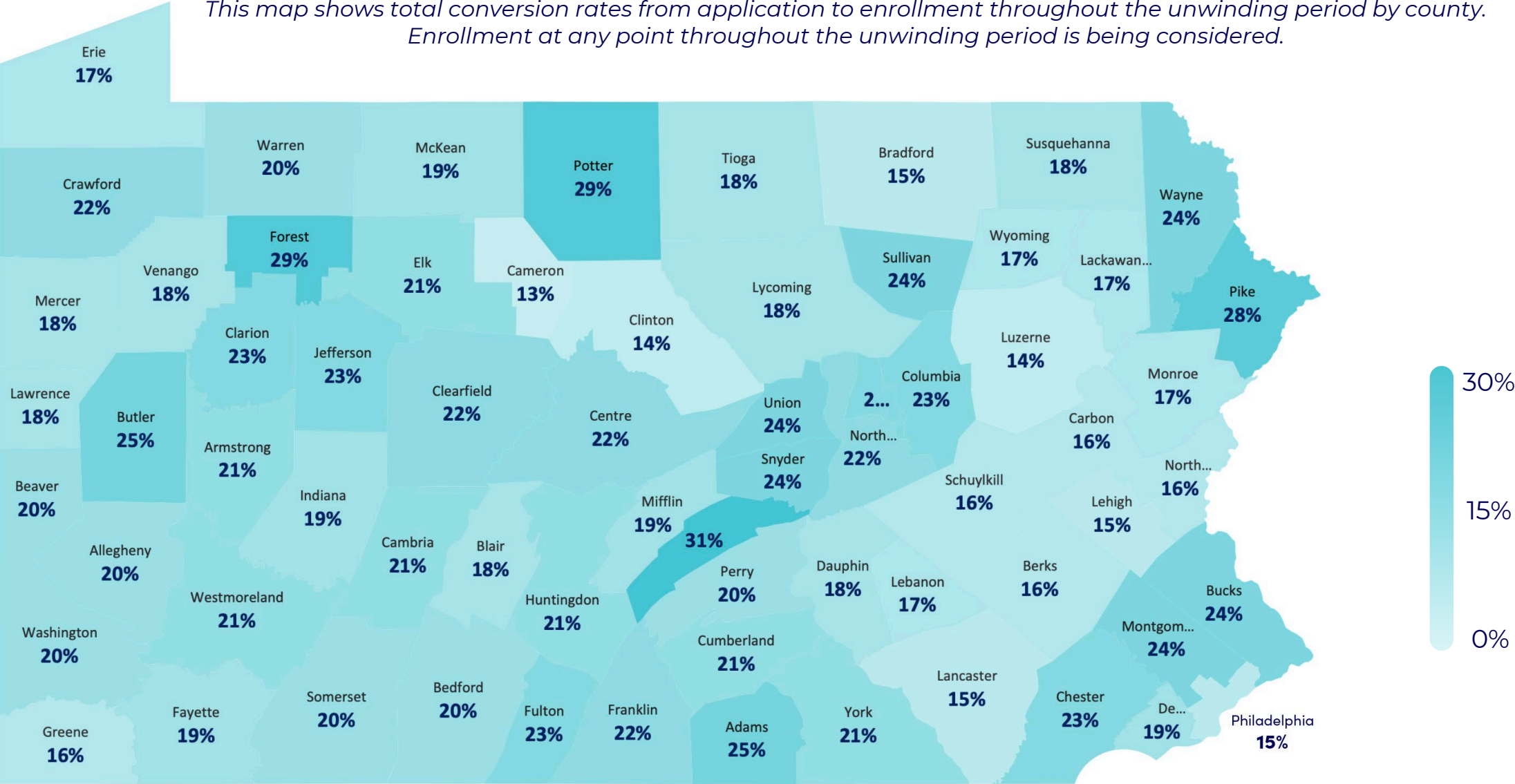
Unwinding Enrollments By County

This map shows total counts of individuals enrolled at any point throughout the unwinding period by county.



Unwinding Enrollment Conversion Rates By County

This map shows total conversion rates from application to enrollment throughout the unwinding period by county. Enrollment at any point throughout the unwinding period is being considered.



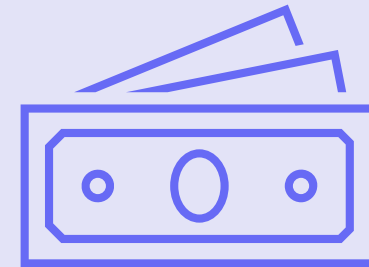
Unwinding Enrollment Avenues

This chart compares the efficacy of various enrollment avenues during the unwinding period. Enrollment at any point throughout the unwinding period is being considered.

Method	Applicants	Enrolled	Enrolled %
Total	460,289	84,547	18.4%
Account Transfer - Auto-Eligibility	341,126 (74%)	44,974	13.2%
Account Transfer - No Auto-Eligibility	76,275 (17%)	11,144	14.6%
Manual – New Application Submitted by Consumer	42,872 (9%)	28,426	66.3%

Financial Assistance Eligibility

Financial Assistance	Total Enrollees	<u>Current</u> Unwinding Enrollees
APTC	33%	18%
APTC_CSR	57%	79%
CSR	<1%	0%
QHP*	10%	3%
Total	435,097	67,601



Unwinding customers are more often eligible for Financial Assistance – especially cost sharing reductions - than the average Pennie customer.

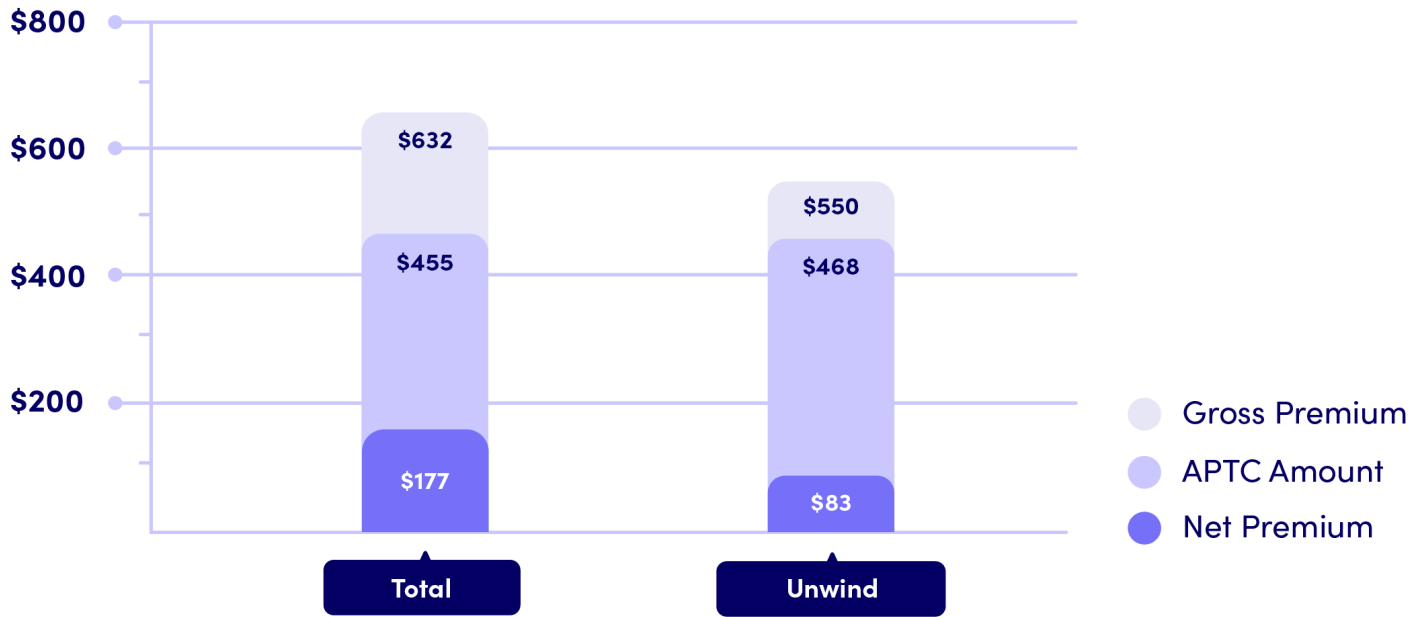
**Not eligible for financial assistance*

“Total” includes all enrollees with plan selections, even “Unwinding” customers.

“Unwinding” customers are those that have used the “Loss of Medical Assistance (MA)” special enrollment period (SEP) event. These could have come directly from an MA transfer or from a new application.

Premiums and Financial Assistance

Per Member Per Month (PMPM) APTC and Net Premium Metrics



Policy Net Premium	Total Enrollees	Current Unwinding Enrollees
Cost \$1 or less	15%	23%
Cost \$50 or less	32%	56%

Unwinding customers are more often paying less for coverage than the average Pennie customer.

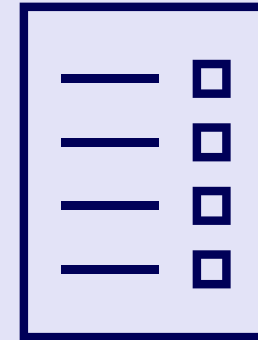
This measure is for current enrollees.

“Total” includes all enrollees with plan selections, even “Unwinding” customers.

“Unwinding” customers are those that have used the “Loss of MA” SEP event. These could have come directly from an MA transfer or from a new application.

Plan Selections

Metal Level	Total	<u>Current</u> Unwinding Enrollees
Bronze	22%	19%
Silver	34%	40%
Gold	43%	41%
Catastrophic	<1%	<1%
Total	435,097	67,601



Unwinding customers tend to select Bronze/Gold Plans slightly less, and Silver plans more than the average Pennie customer.

This measure is for current enrollees.

“Total” includes all enrollees with plan selections, even “Unwinding” customers.

“Unwinding” customers are those that have used the “Loss of MA” SEP event. These could have come directly from an MA transfer or from a new application.

Percents might not sum to 100% due to rounding.

Gender Demographics

Gender	Total	<u>Ever Enrolled</u> Unwinding Enrollees
Male	46.0%	38.1%
Female	54.0%	61.9%
Total	435,097	84,547



Unwinding customers are more likely to be female than the average Pennie customer.

This measure is for current enrollees for total, but ever enrolled for unwinding.

“Total” includes all enrollees with plan selections, even “Unwinding” customers.

“Unwinding” customers are those that have used the “Loss of MA” SEP event. These could have come directly from an MA transfer or from a new application.

Ethnicity Demographics

Ethnicity	Total	<u>Ever Enrolled</u> Unwinding Enrollees
Hispanic/ Latino	4.7%	11.9%
Not Hispanic/ Latino	74%	80%
No Response	22%	8%
Total	435,097	84,547



Unwinding customers are more likely to be of Hispanic/Latino ethnicity than the average Pennie customer.

This measure is for current enrollees for total, but ever enrolled for unwinding.

“Total” includes all enrollees with plan selections, even “Unwinding” customers.

“Unwinding” customers are those that have used the “Loss of MA” SEP event. These could have come directly from an MA transfer or from a new application.

Percents might not sum to 100% due to rounding.

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