

ARKANSAS
Health Insurance
MARKETPLACE

SUSTAINABILITY ANALYSIS 2017-2020

I. Executive Summary

Arkansas Act 1500 created a non-profit entity designated to organize Arkansas's State-Based Marketplace, the Arkansas Health Insurance Marketplace (AHIM). As a nonprofit entity, AHIM allows Arkansas to comply with federal requirements while affording the State the flexibility to implement effective solutions outside of the state agency infrastructure.

The entity's mission is to increase access to health insurance through innovative and practical solutions, and a simplified customer interface. Specifically, AHIM aims to:

- Increase access to high quality health plans through consumer education;
- Organize a transparent and accountable insurance marketplace to facilitate consumer choice;
- Provide an efficient, accurate, and consumer-friendly eligibility determination process; and,
- Enhance health plan competition in key areas of price, access, quality, and service.

Following its creation, AHIM established a small business health options program (SHOP) that is compliant with all federal requirements and performs all necessary functions, designed based on direct input from Arkansas's consumers, employers, and industry professionals. In 2016, AHIM began supporting two additional programs: Arkansas Works – Employer Sponsored Insurance (AW-ESI) and Arkansas's Individual Marketplace.

II. Structure & Funding Overview

A. Level One Grant – State Partnership Model

Since 2012, Arkansas has applied for and received six Establishment grants from the federal government. Establishment grants were made available to states pursuant to 1311(a) of the ACA. Level One Establishment grants provided up to one year of funding to any state interested in pursuing activities related to the establishment of a State-Based Marketplace (SBM), Federally Facilitated Marketplace (FFM), or State Partnership Marketplace. Level Two Establishment grants provided up to three years of funding to states that chose to establish a State-Based Marketplace and demonstrated the capacity to establish all core Marketplace functionalities.

1. AID Contracts

As Arkansas moved from a Partnership to a State-Based model, the Insurance Commissioner applied for funding and entered into a Memorandum of Understanding (MOU) with AHIM to release those funds. The State was awarded five Level One grants to support design and implementation of various functional areas, as described below:

- A. Design and implement key components of the State Partnership Marketplace (SPM) in Arkansas (\$7,665,483 to AID);
- B. Fully implement Plan Management and Consumer Assistance programs by implementing a robust Outreach and Education campaign, In Person Assister program, and training Assisters of all types for licensure (\$18,595,072 to AID);
- C. Fund an Arkansas In-Person Assister (IPA) "Guide" program; to implement an outreach and education campaign; and to update Arkansas's Qualified Health Plan (QHP) certification and monitoring criteria (\$16,470,852 to AID);
- D. Support the State in its role as a Consumer Assistance and Plan Management State Partnership Marketplace (\$10,641,403 to AID);

- E. Explore the State's options towards establishing a State Based Marketplace (SBM) for plan year 2016 (\$3,576,093 to AID for AHIM).

As of July 1, 2015, authority was vested directly with the AHIM Board to assist with implementation and operation of AHIM. The Board's authority allowed it to apply for and expend any state, federal, or private grant funds on behalf of AHIM.

B. Level Two Grant - State Based Marketplace & State-Based Exchange on the Federal Platform

On December 17, 2014, AHIM was awarded a Level Two Establishment grant for \$99 million. Since then, the Board has used grant funding to contract with eligible outside entities to support implementation and operation of AHIM through a competitive bidding process.

Funding to date has been provided by a combination of federal grants, a SHOP assessment fee, and a Federal Platform fee. But the project period funded by the grant expires December 16, 2017. A final progress report on the project is due no later than March 16, 2018.

1. AHIM Contracts

AHIM must be self-sustaining over the long term. Therefore, AHIM has invested considerable time and energy planning for this event, modeling projected enrollment in the Marketplace, the cost of AHIM's operations, and AHIM's revenue. For a side-by-side comparison of contracts for outsourced services in similar states operating as an SBE-FP, see *Appendix A. Table 1*, below, includes a review of the Arkansas Health Insurance Marketplace (AHIM) Level 2 Grant expenses, which are one-time expenses including contracted services and AHIM functions.

TABLE 1: Total Level 2 Grant Dollars Used by Category

CATEGORY	VENDOR	DETAIL		EXPENDITURES
Personnel	AHIM	<ul style="list-style-type: none"> • Payroll • Benefits • Insurance • Workers Comp 	<ul style="list-style-type: none"> • Casualty Ins • Payroll Taxes • Training 	\$2,533,434
Equipment	AHIM	<ul style="list-style-type: none"> • Office IT • Office furniture • Printers 		\$140,121
Supplies	AHIM	<ul style="list-style-type: none"> • Paper • Ink/Toner • Pens • Business Cards 	<ul style="list-style-type: none"> • Postage • Binders • Folders 	\$49,942
Travel	AHIM	In-State <ul style="list-style-type: none"> • Agent/Broker Meetings • Community outreach • Association/Conventions 	Out-of-State <ul style="list-style-type: none"> • CMS Meetings • Seminars • Interstate collaboration 	\$85,430
Facilities	AHIM	<ul style="list-style-type: none"> • Rent • Networks • Cell phones • Utilities 	<ul style="list-style-type: none"> • Subscriptions • Teleconferencing • Board Member Payments 	\$348,022
Consultants	PCG; CC Law & Policy PLLC	<ul style="list-style-type: none"> • Planning/Project Management • Testing • Assurances • Federal Regulatory Compliance 		\$5,836,923
Legal	Cross Gunter Witherspoon & Galchus; Gill Ragon Owen	<ul style="list-style-type: none"> • Contract review • State Regulatory Compliance • Employment Policies & Procedures 		\$53,991
SHOP Marketplace Solution	hCentive	<ul style="list-style-type: none"> • Planning • Implementation • Operation • Tech Support 	<ul style="list-style-type: none"> • Reporting • End User Support • Training 	\$5,257,859
Independent Verification & Validation	CSG Government Solutions	<ul style="list-style-type: none"> • Product Assurance required by CMS 		\$622,468
Marketing & Outreach	CJRW	<ul style="list-style-type: none"> • Market Research & Evaluation • Marketing Plan • Branding • Website Development & Management • Web Hosting 	<ul style="list-style-type: none"> • Paid Media • Training Support Materials • Event Management • Outreach Education Support to Agents & Brokers 	\$4,539,355
Business Services	BKD; ETA Accounting	<ul style="list-style-type: none"> • Audit • Financial Reports • Cash Disbursements • General Ledger Support 		\$69,891
Hotline Call Center	Arkansas Foundation for Medical Care	<ul style="list-style-type: none"> • Individual Marketplace Hotline • Call transfer services to Navigators, Agents & Brokers, DHS, and SHOP • Reporting & Analysis 		\$149,954
	Total:			\$19,687,390

III. SHOP

In 2014, AHIM contracted with Cicero, an external research group, to conduct a comprehensive study of small businesses in Arkansas.¹ The study aimed to understand small employers' preferences, as well as the challenges they face, in offering health insurance to their employees.² Fifty-six percent of respondents believe that the responsibility for operating a health insurance marketplace lies with the State of Arkansas rather than the federal government.

Development of the SHOP solution began in February 2015 and implementation was completed in November 2015. During this time, AHIM planned, designed, procured, and implemented a technology solution that complies with relevant Health and Human Services (HHS) Information Technology Guidance, including the *Guidance for Exchange and Medicaid IT Systems Version 2.0* published in May of 2011.

A. Stakeholders & Committees

While the Cicero study contributed to the design and implementation of the SHOP, ongoing and formal stakeholder consultation continues to shape day to day operations.

¹ The study was conducted in two phases. Phase One focused on qualitative data gathering from 108 individuals, and Phase Two consisted of quantitative data gathered from a wider pool of participants.

² For the first part of Phase One, Cicero conducted twenty in-person focus groups in five cities across the state: Little Rock, Texarkana, Bentonville, Jonesboro, and Pine Bluff. The groups included 83 participants representing employees of small to medium sized Arkansas businesses, business owners and senior representatives of small to medium sized businesses, and licensed health insurance brokers. In the second part of Phase One, Cicero conducted twenty-five interviews with State legislators, healthcare provider representatives, health insurance carrier representatives, and Chamber of Commerce representatives from across the State of Arkansas.

Based on the qualitative results of Phase One, Phase Two consisted of a quantitative survey of 1,560 individuals across Arkansas. Participants included 1,147 individual employees, 231 business representatives, and 182 licensed health insurance brokers.

In June 2013, the AHIM Board of Directors established six committees for the purpose of stakeholder engagement. These committees consisted of the following:

- Information Technology Committee;
- Program Integration Committee;
- Plan Management Committee;
- Outreach & Marketing Committee;
- Financial Management & Sustainability Committee; and
- Policy Innovation Committee.

These committees have played an integral role in Marketplace design and operation, participating in procurement of key vendors including the SHOP IT System, Outreach and Marketing vendor, Hotline Center, and Premium Aggregation System. The Plan Management Committee continues its responsibility to establish plan requirements on a yearly basis, working with AID to distribute to issuers.

B. Agents & Brokers

As agents and brokers continue to serve a critical function in the Arkansas insurance market, AHIM has invested significant resources to establish collaborative relationships in this area. To facilitate agent and broker participation in the SHOP on behalf of their clients. AHIM worked with the broker community to design a comprehensive training program. As part of the training program, AHIM developed user manuals for agencies, brokers, and broker assistants to support ongoing use.

The broker manual describes how brokers use the portal to manage their prospects and customers lists, apply for health coverage on behalf of their customers, search plans and share proposals with customers. Key topics are organized by major activity, including:

- Managing the Agent Portal Account;
- Managing Clients;
- Managing Proposals; and
- Enrolling Employees.

The agency user manual describes how agencies manage their prospects, apply for health insurance on behalf of customers, search plans, and share proposals with clients. It also explains how the agency manages the functioning of brokers and broker admins that are linked to it. Key topics in this agency manual include:

- Client operations
 - Managing clients
 - Managing proposals
- Agency Operations
 - Managing agency operations
 - Managing Brokers
 - Managing Broker Admins
 - Managing documents
 - Managing cover page templates
 - Managing users

In addition to providing training and resources to the Agent/Broker community, AHIM provides consumers with a list of Agents/Brokers based on the location of the consumers. Agents/Brokers on the list are organized according to the plans they are licensed to sell, either SHOP or Individual market. As of April 2017, Arkansas had 946 Marketplace producers who are licensed to enroll individuals on the Individual Marketplace and 121 producers licensed on SHOP.

IV. Individual Marketplace

The Arkansas Individual Marketplace serves 70,641 enrollees as of the end of the latest open enrollment period. Under the current State Based Marketplace-Federal Platform (SBM-FP) model, Arkansas maintains control over two key functions of the individual market: 1) consumer assistance and 2) plan management. However, the State uses the Federal Information Technology solution located at www.healthcare.gov for the eligibility and enrollment functions.

A. Consumer Assistance

AHIM operates a state based hotline center, the State's Navigator Program, and Plan Review and Certification of the Individual Market plans sold in Arkansas. AHIM designed the Navigator Program according to what is currently required by law under the ACA. The hotline center and the Navigator Program ensure that individuals have access to bi-lingual assistance as well as technical support with application and enrollment through the Exchange.

1. Hotline

The hotline center acts as a local intermediary between consumers and the SHOP, DHS, and Federal call centers. The hotline center provides warm transfers to the necessary entity as well as basic information about the Individual Marketplace.

2. Navigator

The State Navigator Program is a critical outreach and education resource for the Individual Marketplace. For the 2017 Plan Year, AHIM contracted with two agencies that performed the Navigator function – Enroll the Ridge

and Future Builders. The two Navigator organizations held 343 events throughout Arkansas from November 2016 to February 2017 and provided assistance to 7,448 individuals enrolling 270 in QHPs.

V. Arkansas Works – Employer Sponsored Insurance

On August 17, 2016, the Arkansas Department of Human Services (DHS) entered into a Memorandum of Understanding with AHIM to establish the Arkansas Works Employer-Sponsored Insurance Premium Assistance Program, or AW-ESI. Through this program, certain Medicaid recipients with access to qualifying employer-sponsored coverage were required to enroll in that coverage. DHS covered up to 75 percent of the cost of premiums for that individual.

Major functions of AHIM with respect to AW-ESI include:

- Determine employer eligibility
- Enroll eligible employers
- Identify individuals required to participate
- Assist participants in enrolling in coverage
- Make payments to participating employers
- Identify individuals no longer eligible to participate
- Develop and maintain website
- Provide customer service to enrollees and employers
- Educate employers, enrollees, agents and brokers on program
- Collect attestation on PCP visits

In February of 2017, DHS sent notice to AHIM that the AW-ESI program will be discontinued. Following the receipt of the notice, AHIM and DHS agreed March 31, 2017 would be the last day of program operations and the last employer subsidy payment would be sent in March. Following the closure of AHIM's administration of the AW-ESI program, AHIM submitted the final invoice to DHS on April 7th.

VI. Operations and Revenue Forecast

AHIM has created a four-year sustainability plan. This includes enrollment, cost, and revenue assumptions for the time period. The estimates are based on what has occurred thus far in the Marketplace, including enrollment in the FFM and Arkansas Works, costs known from other states and professional experience, as well as revenue generation methods under consideration by the AHIM Board. Final contracts and decisions are outstanding in many cases and this plan is subject to change.

A. 2017 Cash Flow

1. Grant

AHIM receives no funding whatsoever from state revenue because existing laws prohibit state revenue from funding exchange operations. Instead, AHIM functions are funded by assessment fees and pass thru grant funds. AHIM's remaining use of grant funds is restricted to the hotline (AFMC) and consumer outreach (CJRW)—functions that are required by the ACA. Those expenses are therefore considered pass thru funding, or direct expenses.

2. Arkansas Works – ESI

Under the MOU between DHS and AHIM, DHS paid AHIM per an agreed schedule for development, build, technical support, and marketing for the Arkansas Works-Employer Sponsored Insurance Program. AHIM completed the development and build and continued technical and program support throughout the time period shown in *Table 2*. AHIM ceased all activities in March 2017 as requested by DHS, and turned over all developed assets to DHS.

3. Exchange Operations

Exchange Operations include the technology fee charged by the federal government (the FFM fee for Arkansas is currently 1.5% of all premiums sold on the exchange), contract costs associated with maintenance and support of the SHOP (hCentive), and project management and reporting costs (PCG). These expenditures are funded by the assessment fees collected by AHIM (currently AHIM collects 1.5% of all premiums sold on the exchange for operations and 1.5% to cover the FFM fee).

4. Indirect Expenditures

Indirect Expenditures are paid for by the gross of all the above categories. *Table 2* summarizes AHIM transactions in 2017 by category and by month.

AHIM Sustainability Analysis
August 10, 2017

Table 2

	January	February	March	April	May	June	July	Total
Grant								
CMS		\$24,994	\$283,516	\$10,659	\$425,418	\$52,722	\$24,994	\$822,304
- AFMC		\$24,994	\$24,994	\$24,994		\$49,988	\$24,994	\$149,964
-CJRW			\$244,187		\$425,418	\$2,734		\$672,339
Gross from Grant	\$0	\$0	\$14,335	-\$14,335	\$0	\$0	\$0	\$0
Arkansas Works ESI								
DHS	\$1,237,400				\$818,763			\$2,056,163
-PCG	\$570,104					\$1,220,135		\$1,790,239
-CJRW			\$14,335					\$14,335
Gross from AR Works ESI	\$667,296	\$0	-\$14,335	\$0	\$818,763	\$1,220,135	\$0	\$251,589
Exchange Operations								
FEES	\$719,351	\$328,530	\$655,622	\$677,706	\$243,157	\$461,374	\$467,514	\$3,553,254
-FFM		\$326,363	\$185,880	\$253,576		\$209,803	\$96,537	\$1,072,159
-hCentive		\$214,023	\$320,003	\$107,503	\$107,503	\$108,855		\$857,887
-PCG				\$276,000			\$276,000	\$552,000
Gross from Operations	\$719,351	-\$211,856	\$149,739	\$40,627	\$135,654	\$142,716	\$94,977	\$1,071,208
Total Gross:	\$1,386,647	-\$211,856	\$149,739	\$26,292	\$954,417	\$1,077,419	\$94,977	\$1,322,797
Indirect Expenditures								
Facilities	\$1,611	\$13,430	\$26,194	\$1,819	\$13,292	\$23,303	\$3,801	\$83,450
Finance	\$5	\$73	\$95	\$72	\$168	\$52	\$11,565	\$12,030
Personnel	\$61,833	\$121,459	\$120,357	\$102,932	\$115,275	\$173,465	\$114,593	\$809,914
Travel	\$18,693	\$3,125	\$1,329	\$5,748	\$7,053	\$6,142	\$1,535	\$43,625
Equip/Supply				\$1,162			\$614	\$1,776
Other		\$370	\$1,400	\$700	\$7,739	\$389	\$1,879	\$12,477
Indirect Expenditures	-\$82,142	-\$138,457	-\$149,375	-\$112,433	-\$143,527	-\$203,351	-\$133,987	-\$963,272
AHIM Net:	\$1,304,505	-\$350,313	\$364	-\$86,141	\$810,890	\$1,280,770	-\$39,010	\$359,525
YTD Net Asset Change	\$1,304,505	\$954,191	\$954,556	\$868,415	\$1,679,305	\$398,535	\$359,525	

B. The Sustainability Model

As of August 31, 2017, AHIM will have completely moved its operations in-house. Due to the added capacity in expectation of managing the ESI portion of the Arkansas Works program as requested by DHS, AHIM had existing capacity. When Arkansas Works – ESI was subsequently cancelled, AHIM began to reassign resources. As a result, AHIM has eliminated future contract costs associated with operations.

Shown below, AHIM is projected to be operating at a surplus in every year going forward from Plan Year 2017. AHIM would return any actual surplus to a trust fund account to pay for future operations with the goal of revisiting and potentially lowering the assessment fee. The AHIM Board recommends an assessment to the legislature on a yearly basis and thus the assessment fee will be considered on a yearly basis.

Future costs are likely to differ from these projections and AHIM will continually update its sustainability model as contracts are signed and real costs are known. Major assumptions of this plan include:

- All operations are funded by user fees assessed by the Marketplace;
- Because no state tax dollars are used, AHIM is able to track each dollar of cash flow due to operational separation from any state agency;
- The first year of operations will be considered Plan Year 2017 because AHIM assumed an operational budget that will no longer include grant dollars; and,
- AHIM will be allowed to continue to levy an assessment and use those funds for operational functions of the marketplace.

Assumptions are further demonstrated in *Table 3*. The current four - year model is provided below in *Table 4*, which is summarized in *Table 5*.

Table 3

SBE-FP Revenue Assumptions				
	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
Fed Fee Rate	1.50%	2.00%	2.50%	3.00%
Population	57,000	70,750	90,000	90,000
Average Annual Premium	\$6,000.00	\$6,300.00	\$6,615.00	\$6,945.75
Fed IT Fee Burden	\$5,130,000	\$8,914,500	\$14,883,750	\$18,753,525
AHIM only Fee Rate (NO Fed)	1.50%	1.00%	1.00%	1.00%
Population	57,000	70,750	90,000	90,000
Premium	\$6,000.00	\$6,300.00	\$6,615.00	\$6,945.75
Total Fee Burden	\$5,130,000	\$4,457,250	\$5,953,500	\$6,251,175
Total Fee Rate on Carriers:	3.00%	3.00%	3.50%	4.00%
Total Burden on Carriers:	\$10,260,000	\$13,371,750	\$20,837,250	\$25,004,700

NOTES:

The only discretionary expenses are indirect
Revenue projects are assuming 45K of 60K Medicaid users go to exchange
Premiums increase 5% year to year

2018 Enrollment (ARWorks)

Jan	57,000	
Feb	57,000	3,000
Mar	60,000	3,000
April	63,000	3,000
May	66,000	3,000
Jun	69,000	3,000
July	72,000	3,000
Aug	75,000	3,000
Sep	78,000	3,000
Oct	81,000	3,000
Nov	84,000	3,000
Dec	87,000	3,000
	Average	Sum
	70,750	33,000

2017 SHOP Costs

Jan	\$107,012
Feb	\$107,012
Mar	\$320,003
April	\$107,503
May	\$107,503
Jun	\$107,503
July	\$107,503
Aug	\$107,503
Sep	\$160,000
Oct	
Nov	
Dec	
	Sum
	1,231,542

Assumptions:

57,000 foundation from >138% pool
Migration begins with March enrollment
Migrate 3,000 premiums per month from <138% pool

Assumptions:

SHOP Ceases < 9-1-2017
No further SW Lic costs

AHIM Sustainability Analysis
August 10, 2017

Table 4

SBE-FP - Detail				
<u>Operating Expenses</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
Direct Expense:	\$7,161,542	\$11,089,500	\$17,083,750	\$20,963,525
AHIM SHOP Marketing	\$100,000	\$0	\$0	\$0
AHIM SHOP M&O	\$1,231,542	\$0	\$0	\$0
Navigator / Assister	\$700,000	\$575,000	\$600,000	\$610,000
FFM IT Fee	\$5,130,000	\$8,914,500	\$14,883,750	\$18,753,525
SBE-FP Call Center	\$0	\$350,000	\$350,000	\$350,000
SBE-FP Marketing	\$0	\$1,250,000	\$1,250,000	\$1,250,000
Indirect Expenses:	<u>\$1,935,000</u>	<u>\$2,057,500</u>	<u>\$2,173,875</u>	<u>\$2,274,319</u>
Salary and Fringe	\$1,550,000	\$1,627,500	\$1,708,875	\$1,794,319
Facilities	\$160,000	\$185,000	\$190,000	\$195,000
Equipment	\$45,000	\$50,000	\$65,000	\$60,000
Supplies	\$20,000	\$20,000	\$20,000	\$20,000
Travel	\$100,000	\$110,000	\$120,000	\$130,000
Other/Professional	\$60,000	\$65,000	\$70,000	\$75,000
Passthru:	<u>\$2,450,000</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Premium Aggregator Build	\$0	\$0	\$0	\$0
Premium Aggregator M&O	\$0	\$0	\$0	\$0
SBE-FP Call Center	\$300,000	\$0	\$0	\$0
SBE-FP Marketing	\$2,150,000	\$0	\$0	\$0
Total Projected Expenses	<u>\$11,546,542</u>	<u>\$13,147,000</u>	<u>\$19,257,625</u>	<u>\$23,237,844</u>
<u>Operating Revenue</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
Grant Funding	\$2,450,000	\$0	\$0	\$0
SHOP Assessment Revenue	\$27,500	\$0	\$0	\$0
Individual Market Assessment - Gross	\$10,260,000	\$13,371,750	\$20,837,250	\$25,004,700
Total Projected Revenue	\$12,737,500	\$13,371,750	\$20,837,250	\$25,004,700
Projected Operating Gain / (Loss)	\$1,190,958	\$224,750	\$1,579,625	\$1,766,856
Cumulative Effect	\$1,190,958	\$1,415,708	\$2,995,333	\$4,762,189

Table 5

Summary				
SBE-FP - Summary				
Calendar Year	2017	2018	2019	2020
Direct	\$7,161,542	\$11,089,500	\$17,083,750	\$20,963,525
Indirect	\$1,935,000	\$2,057,500	\$2,173,875	\$2,274,319
Passthru	\$2,450,000	\$0	\$0	\$0
Total Projected Expenses	\$11,546,542	\$13,147,000	\$19,257,625	\$23,237,844
Grant Funding	\$2,450,000	\$0	\$0	\$0
SHOP Assessment Revenue	\$27,500	\$0	\$0	\$0
Total AHIM Fee Burden	\$10,260,000	\$13,371,750	\$20,837,250	\$25,004,700
Total Projected Revenue	\$12,737,500	\$13,371,750	\$20,837,250	\$25,004,700
Projected Operating Gain / (Loss)	\$1,190,958	\$224,750	\$1,579,625	\$1,766,856
Cumulative Effect	\$1,190,958	\$1,415,708	\$2,995,333	\$4,762,189

Appendix A

As Arkansas operates a State-Based Exchange on the Federal Platform (SBE-FP), it is similar to other peer SBE-FP states. Below is a comparison of Arkansas, Nevada, and Oregon state exchange information.

Key State Demographics

	Arkansas	Nevada	New Mexico	Oregon
<i>State Population 2016</i> ³	2,988,248	2,940,058	2,081,015	4,093,465
<i>Percent Uninsured 2015</i> ⁴	10%	12%	11%	7%
<i>Number Enrolled in Marketplace 2017</i> ⁵	70,404	89,061	54,653	155,430
<i>Estimated Number of Potential Marketplace Enrollees 2015</i> ⁶	260,000	225,000	133,000	284,000
<i>Percent of Potential Marketplace Population Enrolled 2017/2015</i> ⁷	27%	40%	41%	55%

³ <https://www.census.gov/quickfacts/table/PST045216/00>

⁴ <https://www.census.gov/data/tables/time-series/demo/health-insurance/historical-series/hic.html>;
Calculated from data on website

⁵ https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Marketplace-Products/Plan_Selection_ZIP.html

⁶ <http://kff.org/health-reform/state-indicator/marketplace-enrollment-as-a-share-of-the-potential-marketplace-population-2015/>

⁷ <http://kff.org/health-reform/state-indicator/marketplace-enrollment-as-a-share-of-the-potential-marketplace-population-2015/>

AHIM Sustainability Analysis
August 10, 2017

	Arkansas	Nevada	New Mexico	Oregon
Population Enrolled in Medicaid 2016	1,132,517 ⁸	650,213 ⁹	886,000 ¹⁰	1,034,640 ¹¹

Peer State Exchange Information

	Arkansas	Nevada	New Mexico	Oregon
<i>SBE-FP Assessment Fees 2016</i> ¹²	1.5% of premium PMPM in addition to the 1.5% Federal user fee	1.65% of premium PMPM in addition to the 1.5% Federal user fee	Assessment varies based on Exchange's budgeted operating costs and is allocated to health carriers based on market share	\$6 PMPM in addition to the 1.5% Federal user fee
<i>Operational Structure</i>	Non-profit legal entity	Quasi-governmental organization	Non-profit Public corporation	Governmental Organization
<i>SHOP Details</i> ¹³	State-Run: 11/01/2015-Present	Federally-Run 10/01/2013-Present	State-Run: 11/01/2013-Present	None at state level; Employers purchase SHOP

⁸ <https://www.medicaid.state.ar.us/Download/general/MOBSFY2016.pdf>

⁹ http://controller.nv.gov/FinancialReports/Other_Reports/ReporttoourcitizensFY16.pdf

¹⁰ http://www.hsd.state.nm.us/uploads/FileLinks/cb212d4ee9ad436b89573e7f124fda47/2016_Annual_Report_Final.pdf

¹¹ http://www.oregon.gov/oha/HPA/ANALYTICS-MTX/Documents/2016_Mid-Year_Report.pdf

¹² <http://kff.org/state-health-marketplace-profiles/>

¹³ <http://kff.org/state-health-marketplace-profiles/>; <https://www.healthinsurance.org/faqs/what-type-of-health-insurance-exchange-does-my-state-have/>

AHIM Sustainability Analysis
August 10, 2017

				plans directly from insurers
--	--	--	--	------------------------------

Marketplace Contracts Comparison

Operational Area Expenditure Summary				
	Arkansas	Nevada	New Mexico	Oregon
<i>Marketing and Outreach</i>	\$3,178,421	\$3,666,073	\$8,881,504	\$3,025,482
<i>Legal and Compliance</i>	\$40,872	\$129,231	\$88,423	N/A
<i>Business Administration</i>	\$15,530	\$40,791	\$76,489	\$468
<i>Finance</i>	\$25,325	\$97,322	\$83,012	\$42,888
<i>Operations</i>	\$2,910,079	N/A	\$1,532,907	\$3,346,790
<i>Other</i>	\$5,532,076	\$1,966,583	\$4,655,068	\$6,416,244
<i>Total Program Expenditures</i>	\$10,823,883	\$5,900,000	\$15,317,404	\$12,831,872