



Department of Health

KATHY HOCHUL
Governor

JAMES V. McDONALD, M.D., M.P.H.
Commissioner

JOHANNE E. MORNE, M.S.
Acting Executive Deputy Commissioner

November 13, 2023

The Honorable Janet Yellen
Secretary of the Treasury
Department of the Treasury
1500 Pennsylvania Avenue, NW
Washington, D.C. 20220

The Honorable Xavier Becerra
Secretary of Health and Human Services
Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Dear Secretary Yellen and Secretary Becerra,

The State of New York respectfully requests that the U.S. Department of Treasury and U.S. Department of Health and Human Services grant New York's application for a Section 1332 State Innovation Waiver as soon as possible. With the release of final regulations related to the current Basic Health Program (42 CFR Part 600), we are requesting that consideration of our application resume. Enclosed is an Addendum to New York's May 12, 2023 State Innovation Waiver Application that outlines the state's mid-year implementation approach and provides updated actuarial analysis reflecting updated data.

New York is requesting that Sections 36B(c)(2)(B) and 18071(b) be waived for a period of five years beginning April 1, 2024 through 2028 to enable New York to extend its successful "Essential Plan" program to more low- and moderate-income New Yorkers. This waiver is in compliance with federal guardrails established by Section 1332 of the Affordable Care Act and associated federal regulations.

In last year's budget, New York's Legislature passed and Governor Hochul signed into law, language authorizing the Commissioner of Health expand New York's Essential Plan to individuals with incomes up to 250% of the Federal Poverty Level using Section 1332 waiver authority. This year's budget, New York's Legislature passed and Governor Hochul signed into law, authorizes and outlines the requirements of the program. The Essential Plan currently provides affordable, comprehensive, health insurance to more than 1 million New Yorkers, and under this waiver nearly 100,000 more New Yorkers are estimated to gain access to this program. As outlined in the enclosed actuarial analysis, the waiver is estimated to expand coverage to previously uninsured individuals and save eligible individuals an average of \$4,700 per year.

If implemented by April 1, 2024, the waiver will have the added benefit of smoothing the affordability "cliff" for many New Yorkers who transition from Medicaid, as the state implements the end of continuous coverage requirements under the Consolidated Appropriations Act.

Granting this waiver will allow New York to make important strides in broadening access to affordable health insurance coverage and advancing health equity among the remaining uninsured in New York.

It is the state's intent to include the Deferred Action for Childhood Arrivals (DACA) population in the State Innovation Program upon implementation of the HHS [proposed federal rule](#) to extend Affordable Care Act coverage to DACA recipients. The State is also seeking new federal solutions to support coverage of undocumented New Yorkers, including through the State Innovation Program, and would amend the state's waiver application if there is agreement in the future.

Sincerely,

A handwritten signature in black ink, appearing to read "James V. McDonald, M.D., M.P.H.", written in a cursive style.

James V McDonald, M.D., M.P.H
Commissioner of Health



**New York Section 1332 Innovation Waiver
Essential Plan Expansion Updates**

November 13, 2023

Table of Contents

- 1: Elimination of \$15 Monthly Premium 3
- 2: Revised Waiver Implementation Plan for 4/1/2024 Start 3
- 3: Insurer Reimbursement Implementation Plan (IRIP) 7
- 4: DFS Instructions to Insurers on Estimating the Impact of the 1332 Waiver in 2024 Rate Filings..... 15
- 5: Actuarial & Economic Analysis Updates 21

1: Elimination of \$15 Monthly Premium

In response to public comments and because of anticipated surplus in expected passthrough funding, New York has decided to eliminate the proposed \$15 monthly member premium for the Essential Plan (EP) expansion group (consumers with incomes above 200% up to 250% of FPL). Extending a premium-free health insurance option to lower-income New Yorkers enabling access to health care fulfills one of NY State of Health's core missions of promoting the health, productivity, and well-being of New Yorkers. Eliminating the monthly member premium strengthens the 1332 Waiver Application's compliance with the affordability guardrail, removes the administrative burdens related to the monthly premiums for consumers, the State, and the health plans, and it further smooths the coverage transition for consumers who are no longer eligible for free coverage in Medicaid due to the post-COVID-19 Public Health Emergency (PHE) "unwind" redetermination effort. If the pass-through funding is insufficient to fully fund covering monthly premiums for members, the State will identify other state funds to cover the balance through annual budget-marking. For example, the Quality Incentive Pool funds are subject to available funds, and the State could consider adjusting the size of this pool as needed.

2: Revised Waiver Implementation Plan for 4/1/2024 Start

Due to the complex nature of New York's 1332 Waiver Application and its intersection with the Basic Health Program (BHP) that has been in effect in New York since 2015, and federal regulation (88 FR 52262, 52542 (Aug. 8, 2023)) pertaining to the BHP¹ was not finalized until November 2, 2023 after Open Enrollment activities were underway, New York has revised the waiver implementation start date to April 1, 2024. As a result, the State is providing information on its revised implementation plan.

During Open Enrollment 2024, consumers received renewal notices under the standard timeframe, and did not receive any information about the EP Expansion. Consumers with incomes above 200% up to 250% of FPL received a notice of Qualified Health Plan (QHP) eligibility. The State has implemented a PHE Unwinding exceptional circumstances Special Enrollment Period that provides that any individual may enroll in QHP coverage up until May 2024. The State expects a nominal impact on enrollment with the mid-year implementation due to IT system functionality and NY State of Health's (NYSOH) ability to auto-enroll QHP-eligible individuals into EP expansion coverage. NYSOH is a fully integrated marketplace across Medicaid, Child Health Plus, Essential Plan and QHPs and has significant overlap of health plan issuer participation (11 issuers participate across all markets).

NYSOH will capture and store eligibility information for consumers with incomes above 200% up to 250% of FPL who are determined eligible for QHPs with tax credits during the annual Open Enrollment Period. By early March, the State will re-run eligibility for all QHP-eligible

¹ These regulation changes do not impact the waiver's compliance with the 1332 guardrails or eligibility for 1332 pass-through funding.

individuals with incomes above 200% up to 250% of FPL and auto-enroll them to an EP plan starting April 1, 2024. QHP enrollees will be transitioned to the EP plan offered by their same insurer. While the State expects to capture over 70% of expected enrollment through the autoenrollment of existing NYSOH enrollees, the State will also run a robust consumer outreach and advertising campaign to promote the eligibility expansion in order to reach uninsured individuals who may be eligible for this new program. During the 2022 Open Enrollment Period, over 72% of individuals in the 200 – 250% of FPL income cohort were administratively renewed. Paid advertising will be targeted to individuals who are newly eligible for coverage and outreach activities will include partnerships with community-based organizations, other state and city agencies, public libraries, pharmacies, faith-based organizations, and community boards. All of these activities will be informed by data so that we can target efforts to communities and areas of the state where we are most likely to reach eligible individuals.

IT System Changes

The State will implement the EP expansion IT system functionality in by early March to enable an April 1, 2024 effective date. The IT implementation involves:

1. Identifying individuals with active QHP eligibility determinations through NY State of Health with incomes above 200% and up to 250% of FPL who are eligible for the EP expansion;
2. Redetermining consumers' eligibility for EP, mapping current QHP enrollees into their QHP issuer's EP product, and sending them eligibility and enrollment notices to align with these changes;
 - Individuals enrolled with a QHP issuer that does not offer EP products will be auto-assigned to an EP product if they do not select one, analogous to what is done in Medicaid Managed Care today. This circumstance only applies to one issuer with approximately 1% of applicable enrollees.

Enrollment Assistor and Customer Service Staff Trainings

Contemporaneous with the release of consumer notices by early March, NYSOH will send pre-recorded trainings on the EP expansion to enrollment assistors, which will be adapted to Customer Service Center training materials. Since there are no changes to the actual NYSOH application, trainings will focus on the new eligibility result, and the new EP product and benefits. As noted in the State's waiver application, eligibility and benefits for the population with incomes at or below 200% of FPL remain the same under the waiver.

Operational Considerations

As part of its PHE Unwind Plan, NYSOH has already determined that it will allow enrollment into QHPs through the end of its unwind period in May 2024 using the "exceptional circumstances" Special Enrollment Period authority. NYSOH will also offer a one-time, 60-day exceptional circumstances SEP for enrollees who would like to maintain enrollment in their QHP

without financial assistance (45 CFR 155.420(d)(9)). This SEP gives us flexibility on effective dates for enrollment, so we can maintain the status quo for those enrollees who want to keep their QHP (45 CFR 155.420(b)(2)(iii)).

Enrollment in all other state programs – Medicaid, EP and Child Health Plus – is year-round. As a result, all enrollment assistance channels, including enrollment assistors, Customer Service, and the NYSOH website are open for enrollment year-round.

Currently, when a member moves from a QHP to Medicaid/EP/CHP, they receive a new eligibility notice and are enrolled in their QHP issuer’s Medicaid/EP/CHP product, if applicable. Auto-assignment applies to EP and Medicaid, if the QHP issuer does not participate in those plans. If a member moves from Medicaid/EP/CHIP to QHP outside of open enrollment, the member receives a new eligibility notice and NYSOH automatically opens a loss of Minimum Essential Coverage (MEC) Special Enrollment Period for members to come in and pick a plan.

Mid-year implementation considerations:

- All members who have enrolled in a QHP with incomes above 200% and up to 250% of FPL will receive updated eligibility and enrollment notices by March 2, 2024 indicating that they are eligible for Essential Plan beginning April 1, 2024. NYSOH will send this updated eligibility notice to both members who have and have not enrolled in a QHP in 2024. Members will also be informed to look at their updated eligibility information via email, text message, and through enrollment assistors connected to their accounts. In 2022 and 2023 the State has worked with Ichor Strategies to facilitate a series of community dialogues to fine tune consumer messaging through various modalities, including direct to consumer messaging. More recently, the State worked with the US Digital Service (USDS) to update text message, information website, and direct mail content to consumers based on feedback from consumers, navigators, and USDS digital experts. Finally, consumers would receive a welcome letter and ID card from their health plan.
- NYSOH’s application process includes language informing QHP-eligible consumers who apply APTC towards reducing their monthly premiums of their obligation to reconcile APTC received if there are changes in income throughout the year. The State will issue these members a Form 1095-A in early 2025 (for the 2024 tax year) with a cover letter reiterating the requirement to reconcile their APTC using IRS form 8962. This is consistent with current operations when NYSOH members move between public programs, like Medicaid or EP, and QHPs. All members who had at least one month of QHP coverage in a given Plan Year receives a Form 1095-A with a cover letter containing instructions.
- To ensure that consumers who switch from a QHP to an EP effective April 1, 2024 are “made whole” for out-of-pocket spending while enrolled in a QHP, NY will issue guidance encouraging participating QHP issuers to carry over consumers’ maximum out-of-pocket spending accumulators to date from their QHP to their EP with the same issuer, in line with past examples where issuers extended this policy to consumers. The State had initial discussions on October 11, 2023 with Health Plan Associations and consumer

groups about the State's policy requesting issuers to carry over accumulators for members and has not received concerns or opposition to this policy to date. This is consistent with what was done after the American Rescue Plan Act entitled individuals who received or were determined eligible to receive unemployment insurance benefits to move to the 94% AV Silver Plans with Cost-Sharing Reductions, regardless of income. Participating insurers carried over members' out-of-pocket spending accumulators to their new product without requiring any additional member actions, assuming they stayed enrolled with the same issuer. NY will also facilitate the transfer of accumulator information between issuers in order to extend the same benefit to EP members who newly enroll with a different EP issuer from their QHP issuer.

Timeline for Implementation.

- **By March 2, 2024:** EP expansion eligible individuals will receive updated eligibility and enrollment notices telling them they are eligible for the EP, which plan they have been automatically enrolled into, and how to shop for and change their health plan. Health plans will receive 834 enrollment transactions for all NYSOH members, including the EP expansion population. All members will be mapped to the EP product offered by the member's QHP issuer. For members whose QHP issuer is not in EP (this impacts about 1% of applicable enrollees with one issuer), they will be auto-assigned to an EP product if they don't pick a plan in 10 days, consistent with NYSOH's Medicaid Managed Care Auto-assignment rules.
- **April 1, 2024:** Coverage takes effect for all EP expansion members.
- **End of April:** Health plans are paid for EP expansion members for April.

Public Education Campaign

The State will develop outreach and education campaign plans to promote the EP expansion to eligible individuals. NYSOH has significant experience promoting Open Enrollment, the launch of the State's EP in 2016, and most recently a robust public education campaign around the PHE unwind. NYSOH engages in an annual outreach and advertising campaign, typically focused on Open Enrollment, but in recent years has been year-round to promote messaging around the PHE unwind. For CY2024, NYSOH has an advertising and outreach budget of \$16 million; approximately \$2.5 million of this budget will be allocated to promote this EP expansion inclusive of message development, paid advertising, and community outreach activities. This advertising campaign will begin in February 2024 and continue throughout the year to ensure awareness of this new coverage option.

The State will leverage data sources, including both NYSOH administrative data and survey data, such as U.S. Census Bureau American Community Survey data, to identify the demographics and locations of the eligible population and target outreach and advertising accordingly. Advertising will run across various platforms including digital and print. The outreach campaign, which will be ongoing, will also include educational materials such as fact sheets, organic social media, targeted emails and text messages, awareness events statewide, notifying consumers of this new coverage option.

Once the IT system change is implemented, NYSOH intends to redetermine eligibility for individuals in the 200-250% of FPL group, which will trigger the receipt of:

- **Text messages:** Informing them that there is a new eligibility and enrollment notice available in their NYSOH account. Consumers will receive a text message contemporaneous with the updated eligibility and enrollment notices being generated and another 2 weeks before their new coverage begins.
- **Email outreach:** Emails indicating that individuals are eligible for a new program and will be enrolled in a plan, unless they opt-out. Consumers will receive an email contemporaneous with the updated eligibility and enrollment notices being generated and another 2 weeks before their new coverage begins.
- **Assistor/Health Plan outreach:** Associated certified enrollment assistors (or health plans for members without assistors), will be provided lists of their members who are eligible for EP Expansion coverage and asked to perform outreach and make any changes to enrollment.

3: Insurer Reimbursement Implementation Plan (IRIP)

In order to address public comments received during the initial federal comment period held from June 7, 2023 through July 5, 2023 concerning the stability of the individual market, the State evaluated several options to mitigate the impact of its 1332 Waiver on individual market premiums as the 200 – 250% of the Federal Poverty Level (FPL) population transitions out of the market into the Essential Plan. The State provided a draft of its plan to the Departments on August 23, 2023 to use some of the surplus passthrough funding each year the waiver is in effect to provide a reimbursement to insurers in lieu of approving the higher, with waiver individual market premium rates. A federal comment period was opened from August 23, 2023 through August 30, 2023.

Based on the comments received, the State has decided to implement the IRIP as part of its 1332 Waiver. Under this scenario, DFS will approve insurers' with-waiver, with-IRIP rates (defined as the rates that would have been set if the 200 – 250% of FPL population stayed in the individual market) for each plan year. This approach has several benefits:

- 1) **Lowers Premiums for Consumers:** Consumers in the individual market will not experience an increase in premiums due to the waiver. This means there is no difference in affordability for consumers remaining in the individual market with and without the waiver. It also means that there is no longer an expected decline in individual market enrollment beyond the transition of the 200-250% of FPL group into the Essential Plan.
- 2) **Makes Insurers Whole:** Insurers will be provided a reimbursement for the lost revenue under the waiver in lieu of passing along increased costs to consumers in the form of higher premiums.

- 3) **Impact on Pass-through Funding for New York:** Expected federal spend on advance premium tax credits/premium tax credits (APTCs/PTCs) for consumers is expected to be lower under the waiver after implementing the IRIP (since Second Lowest Cost Silver Plan (SLCSP) premiums would be lower relative to under the waiver *without* implementing the reimbursement program). As a result, the pass-through funding amount would not need to be offset by any increases in the SLCSP premium (since the reimbursement program eliminates SLCSP premium increases due to the waiver, as described in the May 2023 application). Any available pass-through funding would be used to fund the insurer reimbursement program.

Based on the 1332 waiver actuarial and economic analysis and the State’s approved 2024 rates, the total insurer reimbursement for PY 2024 is estimated to be \$45 million. The final figure will depend on actual enrollment.² This does not change the State’s analysis with respect to affordability for those with incomes under 250% of FPL who will transition to the Essential Plan. Under the 1332 Waiver, consumers with incomes above 250% of FPL will experience no change in affordability compared to without the waiver with the implementation of the IRIP. This amount has also been updated to reflect the implementation date of April 1, 2024.

The Single Risk Pool provision of the ACA (PPACA § 1312) and implementing regulations (45 CFR 156.80) require a health insurance issuer to consider “all enrollees in all health plans (other than grandfathered health plans) offered by such issuer in the individual market, including those enrollees who do not enroll in such plans through the Exchange, to be members of a single risk pool.” 45 CFR 156.80(d)(2) provides that an “issuer may vary premium rates for a particular plan from its market-wide index rate for a relevant state market based only on the following actuarially justified plan-specific factors.” These regulations enumerate specific factors, and limit an issuer’s ability to make plan-level premium adjustments to the market-wide index rate based only on those factors. The permitted factors include actuarial value and cost-sharing design; provider network, delivery system characteristics, and utilization management practices; benefits provided in addition to EHBs; and administrative costs. The enumerated factors apply to all plans in the applicable single risk pool. The permitted factors above do not include setting the market-wide index rate as if the population with estimated household incomes 200-250% of FPL were included in the individual market.

Because New York will reimburse insurers for the impact of moving these individuals out of the individual market, excluding these individuals from the risk pool when setting the market-wide index rate would overstate issuers’ net cost of providing coverage and result in inappropriately high premiums. To achieve its goals of reducing premiums and ensuring stability for the individual markets, New York is requesting a waiver of PPACA §§ 1312(c)(1) as implemented at 45 CFR 156.80, and any other provisions if necessary to allow issuers in New York to set rates

² Note that \$44M represents the estimated carrier reimbursement in the 1332 Waiver using the data and assumptions reflected in the original waiver submission. This assumed an estimated 2024 rate increase of 6.2%. DFS approved a market-wide rate increase of 13.5% for 2024. The updated \$45M estimate for 2024 is based on this higher premium increase adjusted for 9 months of 2024. Actual reimbursement is dependent upon enrollment.

as if the individual market risk pool continued to include the population with estimated household incomes 200-250 percent of FPL.

Approach

Implementation

Each year, DFS will collect information from insurers during plan rate filings for both with and without the waiver. Since in New York insurers must receive prior approval of proposed health insurance premiums, insurers must provide justification for every component of the premium increase they request. During this process, DFS reviews and validates the data and justifications in order to issue an approved increase. DFS will then calculate the market-wide average premium increase with and without the waiver.

Given that the State will reimburse insurers for the impact of the waiver, rather than approve the with waiver premium increases, DFS will approve the without waiver premium increases. DFS will be able to confirm that without waiver premiums were appropriately determined under the assumption that the risk pool still includes the population with incomes 200 – 250% of FPL by using data that DFS has already collected as well as data that DFS will collect in the future. Please see the Appendix for additional details on the guidance that was issued by DFS to insurers for estimating the impact of the 1332 Waiver in their 2024 rate filings.

Based on discussions with health plan associations, the State will calculate the reimbursements on a retrospective basis and make quarterly payments to insurers. To calculate the insurer reimbursement, the State will require insurers to provide data to determine their premium shortfall from having not included the migration of the 200 – 250% of FPL population out of the individual market in their pricing.

This approach has been reviewed and discussed with the health plan associations on August 11, 17, and 18, 2023. The State does not believe there will be issues with liquidity given the quarterly reimbursements, especially given the relatively small impact the waiver is expected to have on individual market premium rates. Retrospective payments are also common in other programs targeted at premium reductions in the individual market, such as reinsurance, risk adjustment, risk corridors programs. DFS will continue to monitor insurers liquidity and recommend modifying the payment schedule if necessary.

Data Collection & Reimbursement Calculation Methodology

In the beginning of the third quarter of the year, DFS will collect data sufficient to calculate each insurer's respective reimbursement using the reimbursement parameters below. Please see the Appendix for an example of the data that DFS collected from insurers to determine the impact of the 1332 Waiver on 2024 premium rates.

Reimbursement Parameters

Carriers in the individual market can qualify for carrier subsidies based on DFS' evaluation of the information they submit with respect to the amount of earned premium each insurer collects for the applicable plans of insurance sold during the year in question. The State expects that the

carrier subsidy will cost approximately \$45 million for 2024 and \$63 million per year thereafter. However, if actual costs exceed the estimate, the State anticipates being able to use sufficient surplus in annual pass-through funding that could absorb increased costs. If the surplus in annual pass-through funding is insufficient to fully fund the carrier subsidy cost, the State would identify other state funds to cover the balance through annual budget-making. For example, the Essential Plan Quality Incentive Pool funds are subject to available funds, and the State could consider adjusting the size of this pool as needed based on the amount of the final insurer reimbursement amount.

To calculate the insurer reimbursement, the State will require insurers to provide data including the actual earned premiums for the year in question, with respect to the individual market population. The State will then determine what the aggregate premium base for that year would have been in the individual market had insurers actually included a provision for the waiver in their premium rates for the period of the year the waiver would have been in place. Each company would receive a pro-rata share of the aggregate difference between the with and without waiver aggregate premiums.

To compensate insurers for the lost revenue associated with having charged premium rates that did not reflect the migration of the 200 – 250% FPL population to the Essential Plan, at the beginning of each quarter beginning in the third quarter of 2024:

1. DFS will collect data associated with the previous quarter from each insurer; including total earned premium and total member months.
2. For each insurer, DFS will use that data to recalculate the hypothetical earned premium that would have been collected had that insurer charged the “with waiver” premium for the quarter in question (i.e., multiply the actual premium for that quarter by the factor³ that DFS approved for 2024 to reflect the migration of the 200-250% of FPL population to the Essential Plan (EP) for that company’s “with waiver” version of the approved 2024 premium rates).
3. The difference between the hypothetical earned premium calculated in Step 2 above and the actual earned premium for the quarter will be remitted to the insurer.
4. Payments are expected to be made at the end of the quarter following the quarter upon which payments are based (i.e., payments for Q2 are expected to be made before the end of Q3).

Below is an example of the payment calculation:

- Hypothetical Results for Quarter 2 of 2024 (calculated in July of 2024):
 - i. Company A
 1. Earned Premium: \$39,000,000

³ For 2024, DFS reviewed two sets of individual premium rates. One set assumed the transition of the population 200 – 250% of FPL out of the individual market under the 1332 Waiver, without the IRIP, and the other assumed consumers remained in the market for 2024. The two sets of rates differed by an approved factor that reflected the impact of the 200-250% FPL population moving from the individual market to the EP.

2. DFS Approved 1332 Factor: 1.025
 3. Company A's Reimbursement = \$975,000 = (\$39,000,000 * 1.025 - \$39,000,000)
- ii. Company B
1. Earned Premium: \$24,000,000
 2. DFS Approved 1332 Factor: 1.020
 3. Company B's Reimbursement = \$480,000 = (\$24,000,000 * 1.020 - \$24,000,000)

Payment

The State of New York, as approved by the Department of Health, the Office of the State Comptroller, and any third-party fiscal agent of the DOH, will issue payments to insurers.

State Regulations for Issuing Reimbursements

The State believes that our current enabling legislation, [NY Social Services Law section 369-ii\(1\)](#) along with [NY State Finance Law section 98-d\(3\)](#), contains sufficient authority to implement the subsidy program outlined here. The language is included below:

NY Social Services Law section 369-ii(1): *Notwithstanding section three hundred sixty-nine-gg of this title, subject to federal approval, if it is in the financial interest of the state to do so, the commissioner of health is authorized, with the approval of the director of the budget, to establish a 1332 state innovation program pursuant to section 1332 of the patient protection and affordable care act (P.L. 111-148) and subdivision twenty-five of section two hundred sixty-eight-c of the public health law. The commissioner of health's authority pursuant to this section is contingent upon obtaining and maintaining all necessary approvals from the secretary of health and human services and the secretary of the treasury based on an application for a waiver for state innovation. The commissioner of health may take all actions necessary to obtain such approvals.*

NY State Finance Law section 98-d(3): *Such fund shall consist of moneys transferred from the federal government pursuant to 42 U.S.C. 18052 and an approved 1332 state innovation program waiver application for the purpose implementing the state plan under the 1332 state innovation program, established pursuant to section three hundred sixty-nine-ii of the social services law.*

The State Departments of Health and Financial Services expect to issue guidance within the second quarter of 2024 to define the methodology for the carrier reimbursement in advance of issuing the payments, allowing for carrier feedback.

The State anticipates that it will continue to refine and improve the implementation of the insurer reimbursement as details are further clarified. This information, including additional specifics of the data collection and calculation methodology, will be communicated to insurers and other stakeholders as necessary through additional bulletins or communications.

Implementation Timeline

The State will build on top of its annual rate filing cadence to collect information from carriers to evaluate the impact the waiver would have had on the individual market and estimate the reimbursement required to make up for lost revenue. Below is an example timeline for PY 2024.

Timeline for PY 2024 Estimates and Insurer Reimbursements

January 2023	DFS begins regular workgroups with issuers to discuss upcoming rate filings.
April 2023	NYSOH releases the Plan Invitation to sell on the exchange.
May – July 2023	DFS collects rate filings and application materials from carriers, including estimates on premium impacts with and without the waiver.
August 2023	DFS identifies the approved with and without waiver premium increases and any differences in carriers’ plans or service areas under the waiver; DFS approves without waiver premium increases.
September 2023	NYSOH uploads premiums and plan information to its website.
September – October 2023	DFS communicates further details regarding final insurer reimbursement calculations with plans.
November 2023	Consumers begin enrolling in plans for 2024; consumers between 200 – 250% of FPL enroll in Qualified Health Plans.
January-March 2024	The plan year begins. 200-250% of FPL population remains in a QHP through March 2024
April 2024	200-250% of FPL QHP eligible population moves to Essential Plan.
Second Quarter 2024 (April – June 2024)	DFS issues guidance to define the methodology for the carrier reimbursement for Quarters 2 – 4 of PY 2024.
Third Quarter 2024 (July – September 2024)	DFS calculates insurer reimbursement for each plan for Quarter 2 based on the difference between the plans’ actual earned premium and their recalculated earned premium reflecting the with-waiver, without-IRIP version of approved premium rates. NYSoH issues payment to issuers based on DFS calculations.
Fourth Quarter 2024 (October – December 2024)	DFS calculates insurer reimbursement for each plan for Quarter 3 based on the difference between the plans’ actual earned premium and their recalculated earned premium reflecting the with-waiver, without-IRIP version of approved premium rates. NYSoH issues payment to issuers based on DFS calculations.
December 2024	The plan year ends.
First Quarter 2025 (January – March 2025)	The claims runout period for the preceding plan year ends. DFS calculates insurer reimbursement for each plan for Quarter 4 based on the difference between the plans’ actual earned premium and their recalculated earned premium reflecting the with-waiver, without-IRIP version of approved premium rates. NYSoH issues payment to issuers based on DFS calculations.

Public Comments Received on the IRIP and State Responses

The Federal Government held an additional comment period from August 23, 2023 through August 30, 2023 on the State's IRIP addendum submitted on August 23, 2023. The addendum was posted on the CMS Section 1332 Waiver website and New York shared the addendum and comment period information with the same stakeholder groups as the initial federal comment period.

The State engaged with stakeholders during the federal comment period to discuss and revise the proposed Insurer Reimbursement Implementation Plan (IRIP). This engagement included a series of calls on August 11, August 17, and August 18 with representatives from the Departments of Health and Financial Services and New York's Health Plan Associations to describe the IRIP with a focus on how the IRIP would impact the premium rates paid to health plans. During the federal comment period, the State notified consumer groups, health plan associations, and health provider associations that the IRIP Addendum to the 1332 Waiver had been submitted and that CMS opened a public comment period and encouraged these groups to review and comment on the plan. In addition, the State engaged with representatives from a NYS Provider Association on August 24, a Consumer Advocacy organization on August 29, and responded to questions from a NYS Senate/Health Committee Office on August 30 about the IRIP.

A total of seven comments were received during the federal comment period. Two comments were from the same organization. Five commenters supported the State's plan to mitigate premium increases in the individual market. One commenter was opposed to the implementation of the IRIP. In response to public comments received and questions from the Departments, New York submitted a revised addendum to its waiver application on September 7, 2023.

State Response to Public Comments from Federal Comment Period Held August 23 through August 30, 2023

The State reviewed all comments as a matter of policy and appreciates the input received. All comments were considered equally. The following outlines the predominant themes from commenters:

- Support for IRIP and positive impact on the individual market
- Request for more frequent IRIP payments
- Request for the State to consider alternatives to IRIP
- Concern the IRIP will disproportionately benefit higher income New Yorkers
- Recommendation that the IRIP have an upward payment guardrail
- Request to include coverage of undocumented immigrants
- Inadequate notice for the public comment period

Support for IRIP and the positive impact on the individual market

Summary of Comments: Five of the commenters supported the State's plan to implement a IRIP to mitigate increases in premiums in the individual market from the EP Expansion under the

1332 Waiver. Commenters said it will shield consumers from increased premiums and add additional savings for those with lower income levels.

State Response: Consistent with these comments, the State is retaining IRIP as part of the waiver plan.

Request for more frequent IRIP payments

Summary of Comments: Some commenters supported payments on a more frequent basis rather than implementing a reconciliation after the run out of the plan year as initially described in the August 23, 2023 addendum.

State Response: In response to these comments, the State modified its addendum to reimburse insurers on a quarterly basis once the EP Expansion begins.

Request for the State to consider alternatives to IRIP

Summary of Comments: Some commenters offered alternative suggestions for addressing potential risk pool impacts of the waiver such as leveraging reinsurance or other methods like risk adjustment to provide stability for issuers using a more established methodology.

State Response: The State may consider alternate options in future years to offset the waiver's impact on the individual market, such as a risk adjustment or reinsurance program. Due to the complexity of implementing those programs, the State decided to include an Insurer Reimbursement Implementation Plan but plans to explore other options for future waiver updates.

Concern the IRIP will disproportionately benefit higher income New Yorkers

Summary of Comments: One commenter was concerned that the IRIP, and associated decrease in premiums in the individual market, will primarily support consumers who buy off exchange and whose income exceeds the threshold for tax credits.

State Response: Stabilizing premiums have market-wide benefits.

Recommendation that the IRIP have an upward payment guardrail

Summary of Comments: One commenter voiced concerns with the methodology insurers would use to potentially inflate reimbursements and that the IRIP does not have an upward cap on the carrier reimbursement amount.

State Response: Based on this comment, the State modified its payment methodology and schedule to reflect actual market experience instead of using initial projections. Additionally, insurers must receive prior approval of proposed health insurance premiums and must provide justification for every component of the premium increase they request, including the impact of the 1332 waiver on rates. During this process, DFS reviews and validates the data and justifications in order to issue an approved increase.

Request to include coverage of undocumented immigrants

Summary of Comments: One commenter expressed support for the State to expand Essential Plan coverage to undocumented immigrants.

State Response: The State does not currently have plans to expand coverage to undocumented immigrants.

Inadequate notice for the public comment period

Summary of Comments: One commenter expressed concern that not enough notice was given to other stakeholders about the addendum and public comment period.

State Response: The State shared information with the same stakeholder groups that were notified during the 1332 Waiver Application public comment period.

4: DFS Instructions to Insurers on Estimating the Impact of the 1332 Waiver in 2024 Rate Filings

The information below was sent to health plan actuaries in order to provide guidance on estimating the impact of the 1332 waiver on 2024 rate filings.

Data Request

Attention Health Plan Actuaries:

Please submit your response to this data request using the attached data template. Note that we added a column for “Allowed” claims.

Also, to address the fact that all family members may not be insured under the same policy, when attempting to identify individuals in the 200-250% FPL band, for purposes of determining the appropriate 250% FPL family income in the table below, the following assumptions should be used:

- Single Rating Tier: Assume 1 additional family member (2 in total); and
- Single + Spouse Rating Tier: Assume 1 additional family member (3 in total); and
- Single + Child(ren) Rating Tier: Assume 1 additional family member than what was reported by the policyholder; and
- Single + Spouse + Child(ren) Rating Tier: Assume 0 additional family members (use the number reported by the policyholder); and
- Child Only Rating Tier: Assume 2 additional family members (3 in total); and
- Assume that all individuals enrolled in the “Silver 73%” plan fall into the 200-250% FPL band (even if they are not captured using the assumptions above).

2021 ANNUAL FAMILY INCOME

Family Size	250% FPL
1	32,200
2	43,550
3	54,900
4	66,250
5	77,600
6	88,950
7	100,300
8	111,650
Each add'l person, add:	11,350

Updated Examples:

- **Example 1:**
 - For a single adult purchasing the SLCSP in Albany (1 person being insured):
 - The SLCSP in Albany in 2022 for an single adult purchaser was \$564.85
 - Assume one additional family member per the assumptions above (2 in total)
 - Using the table above, the applicable 2021 Family income is \$43,550
 - $\$43,550 / 12 = \$3,629.17$
 - The maximum amount this policyholder would have paid in 2022 is \$145.17 (4.0% of \$3,629.17) per month
 - Using these assumptions, any policyholder who purchased a single adult SLCSP in Albany who received an APTC of \$419.68 ($\$564.85 - \145.17) per month or more, would fall into the 200-250% FPL band.
- **Example 2:**
 - For a policyholder purchasing a family policy in Albany, where the family is composed of 2 adults and 4 children (6 persons being insured):
 - The SLCSP in Albany in 2022 for a family policy was 1,609.82 ($\$564.85 * 2.85$)
 - Assume no additional family member per the assumptions above (6 in total)
 - Using the table above, the applicable 2021 Family income is \$88,950
 - $\$88,950 / 12 = \$7,412.50$
 - The maximum amount this policyholder would have paid (after consideration of APTC) in 2022 is \$296.50 (4.0% of \$7,412.50) per month
 - Using these assumptions, any policyholder who purchased a family policy in Albany, with 6 family members in total, who received an APTC of \$1,313.32 ($\$1,609.82 - \296.50) per month or more, would fall into the 200-250% FPL band. In addition to the policyholder, any other individuals insured under this policy would also fall in to the 200-250% FPL band.

We expect that the use of these assumptions by all insurers will result in a fairly accurate estimate of the impact. We are also interested in any estimates that you may have prepared using a methodology that differs from the one prescribed above. Once we have received all of the data, we will provide information back to the plans. Insurers should then use that information to develop their own factors for purposes of completing Line 23c of Exhibit 18 for the rate filing that is due on May 10th, 2023.

Summary of Responses

Attention Health Plan Actuaries:

The attached file, “1332 Waiver Response Summary – 4-28-2023.xlsx” includes a summary of the data that was collected for purposes of estimating the impact of New York’s 1332 Waiver, to expand the Essential Plan up to 250% FPL, on 2024 Individual premium rates. This information shows what the impact would have been with respect to calendar year 2022, and should be used to develop your own estimate of the impact on 2024 rates should the Waiver be approved by CMS.

Any impact associated with this item that is included in the 2024 Individual rate application should be expressed as a factor on Line 23c of Exhibit 18 and accompanied by appropriate justification in the Actuarial Memorandum.

Attachment: [1332 Waiver Responses Summary – 4-28-2023.xlsx]:

Federal Poverty Level (FPL) Band	Metal Level	Member Months	Earned Premiums	Allowed Claims	Paid Claims	Incurred Claims (2022 Claims Paid with run-out through February 2023 including IBNR)
200-250% of FPL	Platinum	10,783	10,049,821	17,429,475	16,169,433	16,974,845
200-250% of FPL	Gold	26,030	20,158,971	26,971,000	23,859,178	24,664,931
200-250% of FPL	Silver	41,280	25,534,396	29,075,371	23,760,448	25,050,459
200-250% of FPL	Silver 73%	226,823	138,582,503	128,748,935	105,069,424	108,712,891
200-250% of FPL	Bronze	119,983	58,833,932	39,228,683	27,021,429	28,690,439
200-250% of FPL	Catastrophic	-	-	-	-	-
200-250% of FPL	All Metals	424,899	253,159,623	241,453,465	195,879,911	204,093,566

FPL Band	Metal Level	Member Months	Earned Premiums	Allowed Claims	Paid Claims	Incurred Claims (2022 Claims Paid with run-out through February 2023 including IBNR)
Greater than 250% of FPL	Platinum	290,518	269,756,264	541,494,188	511,190,884	530,450,364
Greater than 250% of FPL	Gold	395,235	306,917,114	378,803,371	332,063,005	345,869,462
Greater than 250% of FPL	Silver	929,848	585,546,193	604,770,307	490,168,273	510,462,546
Greater than 250% FPL	Silver 73%	-	-	-	-	-
Greater than 250% of FPL	Bronze	991,074	449,822,556	348,422,157	245,197,058	256,831,627
Greater than 250% of FPL	Catastrophic	55,035	11,412,590	10,059,587	6,116,774	6,766,018
Greater than 250% of FPL	All Metals	2,661,710	1,623,454,716	1,883,549,611	1,584,735,994	1,650,380,016

FPL Band	Metal Level	Member Months	Earned Premiums	Allowed Claims	Paid Claims	Incurred Claims (2022 Claims Paid with run-out through February 2023 including IBNR)
Total Individual Market	Platinum	301,301	279,806,085	558,923,663	527,360,317	547,425,209
Total Individual Market	Gold	421,265	327,076,084	405,774,371	355,922,183	370,534,393
Total Individual Market	Silver	971,128	611,080,589	633,845,678	513,928,720	535,513,005
Total Individual Market	Silver 73%	226,823	138,582,503	128,748,935	105,069,424	108,712,891
Total Individual Market	Bronze	1,111,057	508,656,488	387,650,841	272,218,487	285,522,066
Total Individual Market	Catastrophic	55,035	11,412,590	10,059,587	6,116,774	6,766,018
Total Individual Market	All Metals	3,086,609	1,876,614,339	2,125,003,075	1,780,615,905	1,854,473,582

	Change in Member Months	Change in Earned Premiums	Change in Allowed Claims	Change in Paid Claims	Change in Incurred Claims
Estimated Impact of Removing the 200-250% FPL Population:	-13.8%	-13.5%	-11.4%	-11.0%	-11.0%

FPL Band	Metal Level	Paid/Allowed Ratio	PMPM Earned Premium	PMPM Allowed	PMPM Paid	PMPM Incurred
200-250% of FPL	Platinum	97.4%	932.01	1,616.38	1,499.53	1,574.22
200-250% of FPL	Gold	91.4%	774.45	1,036.15	916.60	947.56
200-250% of FPL	Silver	86.2%	618.57	704.35	575.59	606.84
200-250% of FPL	Silver 73%	84.4%	610.97	567.62	463.22	479.29
200-250% of FPL	Bronze	73.1%	490.35	326.95	225.21	239.12
200-250% of FPL	Catastrophic					
200-250% of FPL	All Metals	84.5%	595.81	568.26	461.00	480.33

FPL Band	Metal Level	Paid/Allowed Ratio	PMPM Earned Premium	PMPM Allowed	PMPM Paid	PMPM Incurred
Greater than 250% of FPL	Platinum	98.0%	928.54	1,863.89	1,759.58	1,825.88
Greater than 250% of FPL	Gold	91.3%	776.54	958.43	840.17	875.10
Greater than 250% of FPL	Silver	84.4%	629.72	650.40	527.15	548.97
Greater than 250% of FPL	Silver 73%					
Greater than 250% of FPL	Bronze	73.7%	453.87	351.56	247.41	259.14
Greater than 250% of FPL	Catastrophic	67.3%	207.37	182.79	111.14	122.94
Greater than 250% of FPL	All Metals	87.6%	609.93	707.65	595.38	620.05

FPL Band	Metal Level	Paid/ Allowed Ratio	PMPM Earned Premium	PMPM Allowed	PMPM Paid	PMPM Incurred
Total Individual Market	Platinum	97.9%	928.66	1,855.03	1,750.28	1,816.87
Total Individual Market	Gold	91.3%	776.41	963.23	844.89	879.58
Total Individual Market	Silver	84.5%	629.25	652.69	529.21	551.43
Total Individual Market	Silver 73%	84.4%	610.97	567.62	463.22	479.29
Total Individual Market	Bronze	73.7%	457.81	348.90	245.01	256.98
Total Individual Market	Catastrophic	67.3%	207.37	182.79	111.14	122.94
Total Individual Market	All Metals	87.3%	607.99	688.46	576.88	600.81

Change in Paid/ Allowed Ratio	Change in PMPM Earned Premium	Change in PMPM Allowed	Change in PMPM Paid	Change in PMPM Incurred
0.4%	0.3%	2.8%	3.2%	3.2%

2022 Statewide Loss Ratio Without Waiver	98.8%
2022 Statewide Loss Ratio With Waiver	<u>101.7%</u>
Change in 2022 Statewide Loss Ratio	2.9%



1332 Waiver Actuarial & Economic Analysis Updates

Overview

Since the submission of New York’s 1332 Waiver Application on May 12, 2023, the State has made three policy changes to its proposed expansion for the Essential Plan (EP) under the waiver:

1. Addition of the Insurer Reimbursement Implementation Plan (IRIP).
2. Modification of the start date from January 1, 2024 to April 1, 2024.
3. Elimination of the \$15 monthly member premium for consumers between 200 – 250% of FPL in the Essential Plan.

The five- and ten-year estimates in the 1332 Waiver Actuarial and Economic Analysis have been updated to reflect these policy changes. Where applicable, the analysis also includes updated data and assumptions that have changed since the initial waiver submission. Unless otherwise noted, the Appendix Tables in this addendum use the same data, methodology, and assumptions as outlined in the Actuarial and Economic Analysis submitted on May 12, 2023.

Data Sources and Reliance

In addition to the data sources outlined in Section 3 of the May 12, 2023 Actuarial and Economic Analysis, the following data was collected for this updated analysis:

- Updated estimated monthly enrollment for 2024-2033 from the Urban Institute Health Policy Simulation Model (HIPSM) for the current EP population based on actual recent enrollment, the 200 - 250% of FPL EP expansion population, and for the pregnancy provision population.
- Summary of the number of uninsured individuals in New York in with and without waiver by race/ethnicity and FPL from the Urban Institute HIPSM model.
- EP estimated enrollment by county and FPL for Q4 2023, provided by New York State of Health (NYSoH).
- Actual distribution of enrollment by EP cohort, provided by NYSoH.
- Approved 2024 Essential Plan (EP) premium rates (capitation rates) and non-claim/administrative amounts from NYSoH.
- 2024 Second Lowest Cost Silver Premiums (SLCSP) from NYSoH.
- QHP enrollment by county and plan as of September 30, 2023 from NYSoH.
- Approved 2024 aggregate premium increases for the QHP market (including and excluding the 200 – 250% of FPL population) from the New York Department of Financial Services (DFS).

- Summary of data collected by DFS from health plan actuaries to estimate the impact of the 1332 waiver on the QHP market.
- Premium growth assumptions for private health insurance from the Centers for Medicare & Medicaid Services (CMS) Office of the Actuary (OACT) published on June 24, 2023.¹
- Letter from the CMS OACT to the State of New York, dated September 5, 2023, subject “Federal Basic Health Program Payment to New York for October - December (Q4) 2023 and Reconciled Payment Adjustments for October – December 2020 (Q4 2020), January – March 2021 (Q1 2021) and April - June (Q2) 2021”
- CMCS Informational Bulletin for the BHP Federal Funding Methodology for Program Year 2024, dated September 15, 2023²

The data received from DFS, NYSoH, and the Urban Institute were reviewed for reasonableness and consistency during the work; however, it was not audited by the team conducting the actuarial and economic analysis. Enrollment data for NYSoH is audited and validated with CMS and insurers. Urban Institute likewise has validation mechanisms for its economic microsimulation model.

All data was reviewed for appropriateness, sufficiency, and a reasonable effort was made to identify data values that were questionable or relationships that were significantly inconsistent. The actuarial guidelines related to reliance on models developed by others as outlined in Actuarial Standard of Practice No. 56 were followed. It was assumed that all data and information provided was accurate and complete; if it was not, the results of the analysis may likewise be inaccurate or incomplete.

The scope of the actuarial certification and the intended use of the analysis being performed to determine the nature of the data needed was considered. Additionally, the actuarial guidelines on utilizing imperfect data and considering the quality of data in the actuarial analysis as outlined in Actuarial Standard of Practice No. 23 were followed. The team relied on the State of New York enrollment and premium data highlighted. Based on reasonableness checks, the team believes it is a credible and reasonable data source to assess the impact of the Waiver on the State of New York’s individual market population.

Methodology and Assumptions

The following adjustments were made to the original methodology and assumptions in the 1332 Waiver Actuarial and Economic Analysis.

Current EP (BHP) Population Enrollment (< 200% of FPL)

Two updates were made to the estimated enrollment of the current EP population (those < 200% of FPL) in both the with and without waiver scenarios. 1) The total projected enrollment in the EP for current members was updated based on actuals, and 2) The distribution of enrollment

¹ <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2023.00403>

² <https://www.medicaid.gov/sites/default/files/2023-09/cib091523.pdf>

between the four current EP cohorts (EP1 - EP4)³ was also updated based on actuals. These estimates were provided by Urban Institute based on the experience of the State since the COVID-19 Public Health Emergency (PHE) ended.

The table below provides a summary of the EP rate cohorts and cost sharing.

Rate Cohorts	Population	Income	Ages	Premium	Deductible	Cost Sharing	Max Out-Of-Pocket
EP 200-250%	Non-Medicaid	200 – 250% FPL	19-64	\$0	\$0	Yes	\$2,000
EP 1	Non-Medicaid	150 – 200% FPL	19-64	\$0	\$0	Yes	\$360
EP 2	Non-Medicaid	138 – 150% FPL	19-64	\$0	\$0	RX only	\$200
EP 3	Aliessa	100 – 138% FPL	19-64	\$0	\$0	RX only	\$200
EP 4	Aliessa	< 100% FPL	19-64	\$0	\$0	No	\$0

The total estimated enrollment for the current EP population accounts for the emerging experience throughout 2023 that reflects the impact of several state policy changes, including the implementation of a 50% reasonable income compatibility threshold, the experience of transitions between EP and other programs during the PHE unwinding, the State’s ex parte system and mitigation strategy, and the impact of Section e14 waivers.

The distribution of total enrollment for the current BHP population was also updated to reflect the latest administrative data. Compared to the waiver application submitted in May 2023, this change decreased the relative percentage of the total population in the EP1 cohort and increased the percentage in the EP2, EP3, and EP4 cohorts.

200-250% FPL Population Enrollment

Two updates were made to the estimated enrollment of the 200 - 250% of FPL population due to 1) removing the \$15 member monthly premium and 2) modifying the waiver implementation start date to April 1, 2024.

With the elimination of the \$15 member premium for the EP 200 - 250% of FPL expansion population, enrollment is estimated to increase by 3% from the initial waiver application. This estimate, developed by Urban Institute, is based on an analysis of historical EP enrollment and the difference in average month-over-month enrollment growth for consumers 150 – 200% of FPL in EP1 before and after the reduction of a monthly premium from \$20 to \$0 in June 2021.

Enrollment ramp up was adjusted to account for the impact of the April 1, 2024 implementation date. It is assumed all consumers enrolled in QHPs on-exchange between 200 – 250% of FPL will be automatically moved into the EP on April 1, 2024. There will be a slower ramp up of the

³ EP cohort eligibility by FPL are as follows: EP1 151%-200%, EP2 139%-150%, EP3 100%-138%, and EP4 <100%. With the removal of the \$15 member premium for the EP5 expansion population (200%-250% of FPL), no EP cohorts have a premium cost. EP Benefits and Cost Sharing is available at: https://info.nystateofhealth.ny.gov/sites/default/files/Attachment%20G%20-%20EP%20Benefits%20and%20Cost-Sharing_Revised%206%2020%202023.pdf

off-exchange and uninsured population compared to the initial waiver due to the implementation no longer aligning with Open Enrollment. Urban Institute estimated that With Waiver enrollment would ramp up from original QHP Without Waiver levels (approximately 69,010) in January through March of 2024 to the final projected With Waiver level of 91,928 in July through December of 2024. The additional enrollment (22,918 members) was assumed to ramp-up 50% in April, 75% in May, and 90% in June, as outlined below. The take-up rates shown below reflect the percentage of additional enrollees (those not currently enrolled in QHPs) that are assumed to enroll in the EP for each month.

2024 Monthly Projected Enrollment for 200-250% FPL Population								
	Jan - Mar	Apr	May	Jun	Jul - Dec	Avg. First 3 Months	Avg. Last 9 Months	Avg. 12 Months
200%-250% FPL in QHP	69,010	410	410	410	410	69,010	410	17,560
200%-250% FPL in EP	-	80,469	86,198	89,636	91,928	-	89,763	67,322
EP Take-Up Rate		50.0%	75.0%	90.0%	100.0%			

Note that an estimated 410 individuals enrolling in QHPs with incomes of 200-250% are *not* eligible for EP expansion due to age.

The tables below reflect the additional cost of the 1332 Waiver to the State with the removal of the \$15 monthly member premium which have been incorporated into the updated PMPM Essential Plan premium rates (state capitation rates) for the 200 – 250% of FPL cohort. The estimates for 2024 reflect costs of removing the \$15 monthly premium for 9 months.

Scenario A: Current Law & Insurer Reimbursement

With Waiver - Scenario A	2024	2025	2026	2027	2028	5-Year Total
EP 200-250% Enrollment	67,322	102,973	95,995	96,319	96,645	91,851
\$15 Member Premium Removal Cost (millions)	\$12	\$19	\$17	\$17	\$17	\$83

Scenario B: IRA Subsidies Are Extended & Insurer Reimbursement

With Waiver - Scenario B	2024	2025	2026	2027	2028	5-Year Total
EP 200-250% Enrollment	67,322	102,973	95,995	96,319	96,645	91,851
\$15 Member Premium Removal Cost (millions)	\$12	\$19	\$17	\$17	\$17	\$83

Scenario C: Pregnancy Choice, Current Law & Insurer Reimbursement

With Waiver - Scenario C	2024	2025	2026	2027	2028	5-Year Total
EP 200-250% Enrollment	67,454	103,683	96,779	97,110	97,441	92,494
\$15 Member Premium Removal Cost (millions)	\$12	\$19	\$17	\$17	\$18	\$83

Impact on Uninsured

The 1332 Waiver is expected to increase health equity and expand access to currently uninsured individuals in New York. The waiver targets the income group with the highest uninsured rate. The following data from Urban Institute highlights the estimated yearly impact of the waiver on the uninsured by FPL and race/ethnicity. The first table demonstrates the impact on the uninsured with the enhanced APTCs under the Inflation Reduction Act (IRA) in 2026 when enrollment is expected to reach a steady state during the waiver. In comparison, the second table demonstrates the impact in 2026 if the enhanced subsidies no longer continue.

Impact on Uninsured, 2026 with Continuation of Enhanced PTCs Under the IRA

Characteristics	Uninsured Without Waiver			Uninsured With Waiver		
	Number of Uninsured	% of Total	Uninsured Rate	Number of Uninsured	% of Total	Uninsured Rate
Race & Ethnicity						
White, non-Hispanic	257	27.9%	3.1%	248	27.5%	3.0%
Hispanic	401	43.6%	11.8%	397	44.0%	11.7%
Black, non-Hispanic	117	12.7%	4.8%	114	12.7%	4.7%
Asian & Pacific Islander	113	12.3%	6.8%	111	12.3%	6.7%
American Indian/Alaska Native	12	1.3%	6.5%	12	1.3%	6.4%
Other	20	2.2%	4.9%	20	2.2%	4.8%
Income						
Below 138% FPL	418	45.4%	6.3%	416	46.1%	6.2%
Between 138% FPL and 200% FPL	81	8.8%	6.2%	81	9.0%	6.2%
Between 200% FPL and 400% FPL	313	34.0%	9.2%	296	32.8%	8.7%
Above 400% FPL	109	11.8%	2.2%	109	12.0%	2.2%
Total	921	100.0%	5.6%	902	100.0%	5.5%

Impact on Uninsured, 2026 with Standard PTCs (Current Law)

Characteristics	Uninsured Without Waiver			Uninsured With Waiver		
	Number of Uninsured	% of Total	Uninsured Rate	Number of Uninsured	% of Total	Uninsured Rate
Race & Ethnicity						
White, non-Hispanic	263	28.2%	3.2%	254	27.8%	3.1%
Hispanic	403	43.3%	11.8%	399	43.7%	11.7%
Black, non-Hispanic	118	12.7%	4.9%	116	12.7%	4.8%
Asian & Pacific Islander	114	12.2%	6.9%	112	12.2%	6.7%
American Indian/Alaska Native	12	1.3%	6.5%	12	1.3%	6.4%
Other	21	2.2%	4.9%	20	2.2%	4.9%
Income						
Below 138% FPL	418	44.9%	6.3%	416	45.6%	6.2%
Between 138% FPL and 200% FPL	81	8.7%	6.2%	81	8.9%	6.2%
Between 200% FPL and 400% FPL	321	34.4%	9.4%	304	33.3%	8.9%
Above 400% FPL	111	11.9%	2.2%	111	12.2%	2.2%
Total	931	100.0%	5.7%	913	100.0%	5.6%

BHP Funding

The baseline without waiver BHP funding was updated to reflect the latest funding as reported by NYSoH and CMS for Q4 2023. This amount was further adjusted in the with and without waiver scenarios to account for the change in Income Reconciliation Factor (IRF) for 2024, which is 96.05%. The initial waiver application assumed an IRF of 100.66% from 2023 onwards. Because Q4 2023 BHP funding is reported in aggregate, the PMPM funding amount by EP cohort was estimated by applying the relative distributions of enrollment across EP 1- 4 cohorts from historical data.

Additionally, for Scenarios A and C which reflect the current law whereas the enhanced APTCs under the IRA expires at the end of 2025, the BHP funding amounts for 2026 and beyond were updated to assume a 98.37% IRF. This aligns with the IRF from the 2019 BHP funding methodology, which is the most recent year available before the COVID-19 PHE and enhanced APTCs began.

Enrollment and Projected Savings for the Essential Plan Pregnancy Choice Provision (Scenario C)

Three updates were made to Scenario C for estimating enrollment and federal savings for the pregnancy choice provision. These include: 1) updating Medicaid postpartum care from 60 to 365 days based on New York’s CMS-approved policy change in 2023, 2) applying updated Medicaid rates, and 3) modifying estimated enrollment based on the latest administrative data and a waiver implementation start date of April 1, 2024.

On June 14, 2023, New York announced the extension of Medicaid postpartum health coverage from 60 days to 365 days following pregnancy. This program change has been incorporated into the estimated enrollment, ramp-up, and Medicaid savings for pregnant women who remain within the EP under the 1332 Waiver instead of transitioning into Medicaid.

The cost estimates for Medicaid spend for pregnancy, delivery, and post-partum care of EP members who would otherwise move to Medicaid is based on an analysis of the Per Member Per Month (PMPM) Medicaid capitation rates of this population. The analysis assumes all Medicaid members, both Fee For Service (FFS) and Medicaid Managed Care (MMC), would be moved into the MMC Temporary Assistance for Needy Families (TANF) Adult rate cohort and that all members would have maternity and delivery rates similar to the supplemental maternity “kick” payment in the MMC program. The monthly Medicaid capitation rate for individuals who are pregnant is the MMC TANF rate. Therefore, the State Fiscal Year (SFY) 2023-2024 Medicaid capitation rates for TANF Adult and the supplemental maternity kick payment were used to estimate Federal cost savings for this population. Additionally, since prescription drugs were carved out of the SFY 2023-2024 TANF Adult rates, the SFY 2022-2023 pharmacy component of the TANF Adult rate was trended forward at 5% and added to the SFY 2023-2024 TANF Adult rate. Both rates (the TANF adult and supplemental maternity kick payment) were trended at a rate of 5% per year. Based on historical data and guidance from DOH, the estimates assume EP members who report being pregnant and are eligible for Medicaid would spend on average 16.5 months in Medicaid (an average of 4.5 months from when a member reports being pregnant to when the birth occurs with 12 months of postpartum coverage). Additionally, the analysis assumes an average of 50% Federal Medical Assistance Percentage (FMAP) for the non-5-year bar population - (those 138% - 223% of FPL) and a 0% Federal share of Medicaid costs for the 5-year bar population (those below 138% of FPL, known as the Aliessa population in New York).

The table below provides the ten-year estimates for total Pregnancy Medicaid enrollment and state and federal spend with and without the waiver. The population displayed in the table are based on the number of estimated MMC maternity kick payments for SFY 2023-2024 as provided by New York’s Medicaid actuarial team. There are approximately 102,000 projected MMC maternity kick payments for SFY 2023 - 2024, which was adjusted to reflect the anticipated member months per delivery consistent with average of 4.5 months of pregnancy Medicaid prior to delivery and 12 months of post-partum Medicaid. Enrollment was adjusted to reflect a calendar year basis for the waiver and trended at a rate of approximately 2% per year, which is consistent with the assumed enrollment growth of the population that is assumed to stay

in EP rather than moving to Medicaid when they report becoming pregnant. The estimated volume of EP members that report a pregnancy and would otherwise transition to pregnancy Medicaid without the waiver is based on historical NYSOH administrative data. Under the pregnancy choice provision, EP consumers that report being pregnant will default to staying within the EP and will need to opt to transition to pregnancy Medicaid instead. It was assumed that everyone in the EP who reports being pregnant will choose to stay in the EP in order to model the maximum impact of the pregnancy choice provision.⁴ Since there is parity in coverage and benefits between the EP and pregnancy Medicaid, and because the EP has made investments to increase provider payments which will continue to have positive impacts on EP provider networks, it is anticipated that most consumers will remain in the EP. There is a 17 month ramp up assumption for program adoption. The analysis also reflects the mix of the 5-year bar population (which receives a 0% Federal match on Medicaid payments) and the non-5-year bar population (which receives a 50% Federal match on Medicaid payments). According to the data provided by New York’s Medicaid actuaries, approximately 99% of maternity kick payments in MMC are in the non-5-year bar population.

Pregnancy Medicaid Estimates With and Without the Waiver										
Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Without Waiver										
Pregnancy Medicaid Total Enrollment	146,091	149,012	151,993	155,032	158,133	161,296	164,522	167,812	171,168	174,592
Enrollment >138% FPL	144,535	147,426	150,374	153,382	156,449	159,578	162,770	166,025	169,346	172,733
Federal Spend (millions)	\$1,015	\$1,084	\$1,161	\$1,244	\$1,332	\$1,426	\$1,528	\$1,636	\$1,752	\$1,835
With Waiver										
Pregnancy Medicaid Total Enrollment	141,973	136,915	137,748	140,503	143,313	146,179	149,102	152,085	155,126	158,229
Enrollment >138% FPL	141,539	136,472	137,296	140,042	142,843	145,700	148,614	151,586	154,618	157,710
Federal Spend (millions)	\$990	\$996	\$1,060	\$1,136	\$1,217	\$1,303	\$1,395	\$1,494	\$1,601	\$1,673
Difference										
Pregnancy Medicaid Total Enrollment	(4,118)	(12,098)	(14,245)	(14,530)	(14,820)	(15,117)	(15,419)	(15,728)	(16,042)	(16,363)
Enrollment >138% FPL	(2,996)	(10,954)	(13,078)	(13,339)	(13,606)	(13,878)	(14,156)	(14,439)	(14,728)	(15,022)
Federal Spend (millions)	(\$25)	(\$89)	(\$101)	(\$108)	(\$115)	(\$124)	(\$133)	(\$142)	(\$152)	(\$161)

Note: 2024 without waiver Pregnancy Medicaid enrollment reflects the average monthly enrollment for the 12-month period. 2024 with waiver Pregnancy Medicaid enrollment reflects the average monthly enrollment for the 9-month period starting 4/1/2024.

The impact of the pregnancy choice provision on EP enrollment and cost savings to the federal government is included within Table C4 in the Appendix.

The initial estimated enrollment for the number of EP pregnant individuals expected to remain in the EP under the waiver was based on historical administrative data, trended with EP enrollment growth. Estimates for the ramp-up in the first year were provided by Urban Institute. To account for the waiver implementation date of April 1, 2024 and the 12 months of postpartum Medicaid coverage, the initial monthly enrollment estimates provided by Urban Institute were adjusted to reflect a seventeen-month enrollment ramp-up until reaching a steady state. The adjustment simulates the progression of new program adoption and member turnover.

⁴ Under the BHP, individuals are automatically moved to Medicaid from the Essential Plan when they report being pregnant. They are provided the option to call NYSOH to be moved back into the Essential Plan. The historical volume of individuals who choose to opt into moving has been very low. Given coverage and benefits are equivalent, we do not expect many individuals to opt to move from the Essential Plan to Medicaid under the 1332 Waiver.

Insurer Reimbursement Implementation Plan (IRIP)

The State has decided to use some of the surplus passthrough funding each year to provide a reimbursement to insurers in lieu of approving the higher, with waiver individual market premium rates. Under IRIP, DFS approves the individual market premiums which assume the 200 – 250% of FPL population remains in the market. Therefore, there is no difference in affordability for consumers that remain in the individual market under the waiver.

As a result, the following changes were made to the assumptions used in the initial waiver application:

1. The assumed 2.2% increase to individual market premiums for subsidy-ineligible On-Exchange consumers and Off-Exchange consumers was removed; this amount was included in the initial analysis to reflect the estimated impact of the migration of the 200 – 250% of FPL population to the EP.
2. The associated price elasticity adjustment that reduced subsidy-ineligible On-Exchange consumers and Off-Exchange enrollment by approximately 2.6% was removed; this amount was previously included to account for the number of consumers who were estimated to choose different health coverage in response to the assumed 2.2% premium increase.

In addition, an investment line item was added to account for the State’s IRIP payments to carriers. The estimated state payment amount for IRIP was calculated to reflect the difference between the aggregate rate increase based on carrier submissions for two scenarios: (i) the 200 – 250% of FPL population would move out of the individual market, and (ii) that the 200 – 250% of FPL population would remain in the market. The difference in the premiums for these scenarios was approximately 2.7%. These IRIP payments are shown in the Appendix. The amount for CY2024 was further adjusted to reflect 9 months of waiver implementation rather than 12 with the April 1, 2024 start.

Loss Ratios and Actuarial Values

Several updates were made to the loss ratios and actuarial values for each QHP metal level and EP cohort for purposes of estimating out-of-pocket expenses. 2024 QHP loss ratios were updated by using the summary of data collected by DFS to estimate the impact of the 1332 Waiver on the QHP market. The loss ratios assume that the 200 – 250% of FPL would continue to be enrolled in the QHP market, consistent with IRIP. 2024 EP loss ratios were also updated to reflect administrative cost loads (~10.9% for EP1) that are reflected in the approved 2024 EP rates. Finally, 2024 EP actuarial values were updated to account for the most recent benefit designs which reflect reduced cost sharing for EP members relative to prior benefits. The updates to the EP actuarial values effectively reduce expected out-of-pocket expenditures for EP members relative to prior estimates.

Premium Rates for EP

Essential Plan 2024 premium rates (state capitation rates) have been updated to reflect the rates that were approved by the EP Board of Trustees in August 2023 and weighted for projected

CY2024 enrollment. In addition, the premium for the 200 – 250% of FPL expansion population has been adjusted to account for the removal of the \$15 monthly member premium.

The Essential Plan Board of Trustees voted on April 21, 2023 to increase provider reimbursement for the EP 3 and EP 4 tiers to be consistent with EP 1 and EP 2. The goal of this adjustment was to bring greater equity across the EP tiers by improving access to providers. The Board voted to increase the provider reimbursements up to a maximum of \$800M per year. These reimbursements were included within the approved EP rates for 2024, which are reflected in the program costs in tables A2/B2/C2 in the appendices.

In the initial waiver application, there were separate investment line items reported for Provider Rate Adjustments (\$800M per year) and Reductions in Member Cost Sharing (\$100M for CY2024 and trended forward to future years). These EP investments were included in the approved EP rates for 2024 for EP 1 – 4; therefore, these separate line items have been removed from the Appendix tables. Because the Provider Rate Adjustment investment is approved at a constant level of \$800M per year, the PMPM amount attributable to this investment item has not been trended forward to future years and has instead been added as a constant PMPM level each year for each EP cohort. To develop the PMPM amounts attributable to the Provider Rate Adjustment in the EP premium rates, the State’s EP rate-setting actuaries used CY2024 rates for inpatient, outpatient, and physician services and multiplied by CY2024 enrollment estimates to summarize total expected expenditures. The State’s actuaries then took each cohort’s PMPM and increased it by a constant percentage, specific to each category of service, to achieve the Provider Rate Adjustment budget provision targets. As the provider rate adjustments become part of the base costs for the program, they will be trended forward each year.

Premium Rates for QHP

In the initial waiver application, it was assumed that QHP premiums would increase by 6.2% in 2024 because health insurers’ requested premium rate increases and approvals from DFS were not known at the time of the application submission. Based on DFS’ approved 2024 QHP rates, this assumption was adjusted to reflect the approved rate increase of 13.5%. This amount was applied equally across all metal levels and across on- and off-exchange plans.

This analysis also has adjusted the QHP premium trend factor for 2025 and beyond from 4.8% to 5.2%. This is based on updated data for the projected growth in Private Health Insurance spend from the Office of the Actuary (OACT) in the Centers for Medicare & Medicaid Services (CMS) projections of health care spending for 2022-2031 published on June 24, 2023.⁵

Second Lowest Cost Silver Premiums (SLCSP)

The SLCSPs shown in the Appendix have been updated to reflect actual values for 2024. This was based on the 2024 SLCSPs for individual adults reflected in NYSoH’s system for the 2024 Open Enrollment Period. Estimated enrollment for Q4 of 2023 was used to calculate weighted average SLCSPs by Rating Area for 2024.

⁵ <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2023.00403>

2024 Results in the Appendix Tables

Throughout the Appendix tables, the With Waiver Summary of Enrollment, Premium, and Cost Estimates (Appendix Tables A3, B3, and C3,) display 2024 With Waiver enrollment, premium, and APTC amounts as 12-month averages or totals for based on consumers 200 – 250% of FPL spending the first three months of the year in the individual market. All other Appendix tables display the With Waiver amounts as 9-month averages for 2024, since the first year of the waiver will only contain 9 months.

The following tables depict how the enrollment and premium estimates were calculated for 2024 with the mid-year implementation of the 1332 Waiver, using a weighted average of the first 3 months in the individual market and last 9 months in the Essential Plan. Please note, the aggregated premiums under the Essential Plan reflect the capitation rate paid by the State to insurers.

Scenario A: Current Law & Insurer Reimbursement

	200-250% FPL	All Other FPL	200-250% FPL	All Other FPL
With Waiver - Scenario A	1/1/24-3/31/24		4/1/24-12/31/24	
Unsubsidized On/Off-Exchange				
Enrollment ¹	0	66,122	0	66,122
Average Premium PMPM	\$0	\$802	\$0	\$802
Subsidized On-Exchange				
Enrollment ¹	69,010	168,922	410	168,512
Average Premium PMPM	\$756	\$761	\$756	\$761
Average APTC PMPM	\$332	\$314	\$332	\$314
Total Individual Market				
Enrollment ¹	69,010	235,044	410	234,634
Average Premium PMPM	\$756	\$773	\$756	\$773
Aggregate Premiums (millions)	\$156	\$545	\$3	\$1,632
Projected Federal Spend (millions)	\$64	\$149	\$1	\$445
Essential Plan				
Enrollment ¹	0	1,365,381	89,763	1,365,381
Average Premium PMPM	\$0	\$625	\$718	\$625
Aggregate Premiums (millions)	\$0	\$2,559	\$580	\$7,678
IRIP Payment (millions)		\$0		\$45
Quality Incentive Pool Costs (millions)		\$56		\$169
LTSS Coverage (millions)		\$0		\$0
SDoH/BH Grant Program (millions)		\$6		\$19
Total Program Costs (millions)		\$2,778		\$8,334
Projected Federal Spend (millions)		\$802		\$2,405

Scenario B: IRA Subsidies Are Extended & Insurer Reimbursement

	200-250% FPL	All Other FPL	200-250% FPL	All Other FPL
With Waiver - Scenario B	1/1/24-3/31/24		4/1/24-12/31/24	
Unsubsidized On/Off-Exchange				
Enrollment ¹	0	66,122	0	66,122
Average Premium PMPM	\$0	\$802	\$0	\$802
Subsidized On-Exchange				
Enrollment ¹	69,010	168,922	410	168,512
Average Premium PMPM	\$756	\$761	\$756	\$761
Average APTC PMPM	\$332	\$314	\$332	\$314
Total Individual Market				
Enrollment ¹	69,010	235,044	410	234,634
Average Premium PMPM	\$756	\$773	\$756	\$773
Aggregate Premiums (millions)	\$156	\$545	\$3	\$1,632
Projected Federal Spend (millions)	\$64	\$149	\$1	\$445
Essential Plan				
Enrollment ¹	0	1,365,381	89,763	1,365,381
Average Premium PMPM	\$0	\$625	\$718	\$625
Aggregate Premiums (millions)	\$0	\$2,559	\$580	\$7,678
IRIP Payment (millions)	\$0		\$45	
Quality Incentive Pool Costs (millions)	\$56		\$169	
LTSS Coverage (millions)	\$0		\$0	
SDoH/BH Grant Program (millions)	\$6		\$19	
Total Program Costs (millions)	\$2,778		\$8,334	
Projected Federal Spend (millions)	\$802		\$2,405	

Scenario C: Pregnancy Choice, Current Law & Insurer Reimbursement

	200-250% FPL	All Other FPL	200-250% FPL	All Other FPL
With Waiver - Scenario C	1/1/24-3/31/24		4/1/24-12/31/24	
Unsubsidized On/Off-Exchange				
Enrollment ¹	0	66,122	0	66,122
Average Premium PMPM	\$0	\$802	\$0	\$802
Subsidized On-Exchange				
Enrollment ¹	69,010	168,922	410	168,512
Average Premium PMPM	\$756	\$761	\$756	\$761
Average APTC PMPM	\$332	\$314	\$332	\$314
Total Individual Market				
Enrollment ¹	69,010	235,044	410	234,634
Average Premium PMPM	\$756	\$773	\$756	\$773
Aggregate Premiums (millions)	\$156	\$545	\$3	\$1,632
Projected Federal Spend (millions)	\$64	\$149	\$1	\$445
Essential Plan				
Enrollment ¹	0	1,369,339	89,922	1,369,339
Average Premium PMPM	\$0	\$625	\$718	\$625
Aggregate Premiums (millions)	\$0	\$2,567	\$581	\$7,701
IRIP Payment (millions)	\$0		\$45	
Quality Incentive Pool Costs (millions)	\$56		\$169	
LTSS Coverage (millions)	\$0		\$0	
SDoH/BH Grant Program (millions)	\$6		\$19	
Total Program Costs (millions)	\$2,786		\$8,358	
Projected Federal Spend (millions)	\$802		\$2,405	

Actuarial Certification

Steven N. Wander is a Principal with Deloitte Consulting LLP. He is a Fellow of the Society of Actuaries and a Member of the American Academy of Actuaries. He meets the Academy's qualification standards for rendering the actuarial opinions contained in this analysis.

The State of New York retained Deloitte Consulting to develop this actuarial and economic analysis, a component of the State of New York's 1332 Waiver application.

I certify that the estimates presented in this analysis:

- Address requirements and prohibitions of section 45 CFR 155.1308(f)(iv)(A)-(D)
- Are consistent with the CMS "Checklist for Section 1332 State Relief and Empowerment Waivers Applications" (updated July 2019)
- Have been developed in accordance with applicable Actuarial Standards of Practice (ASOP) requirements, specifically No. 23 (Data Quality), No. 41 (Actuarial Communication), and No. 56 (Modeling)

In this analysis, we relied on enrollment, premium, funding, loss ratio, and trend data provided to Deloitte as outlined in Section 3 of the Actuarial and Economic Analysis submitted on May 12, 2023 and the items outlined in the Data Sources and Reliance section above. All data was reviewed for appropriateness, sufficiency, and a reasonable effort was made to identify data values that were questionable or relationships that were significantly inconsistent; however, we have not audited the data we received. If the underlying data or information provided is inaccurate or incomplete, the results of our review may likewise be inaccurate or incomplete.

Estimates developed by Deloitte are based on an actuarial analysis of future costs and enrollment for PY 2019–2033. It may be expected that actual experience will vary from the values shown in this analysis.

This document is intended solely for the information and use of the State of New York in support of its 1332 Waiver Application and is not for the benefit of or to be relied upon by any other person or entity.



Steven N. Wander, FSA, MAAA
Principal, Deloitte Consulting LLP

November 13, 2023

Date

Updated Appendix A: Scenario A Detailed 10-Year Estimates (Current Law & Insurer Reimbursement)

The following provides an analysis of the proposed 1332 Waiver under current law for expansion to consumers with incomes between 200–250% of the FPL. The analysis estimates that the proposed Waiver meets each of the four guardrails for the five years of the Waiver and 10-year analysis.

Table A1. Scenario A High-Level Guardrail Compliance of 1332 Waiver

Guardrail	Estimated Impact With-Waiver (WW) Compared to Without-Waiver (WoW)
Comprehensiveness	<p>The Waiver is projected to meet the comprehensiveness guardrail as consumers have access to more comprehensive coverage compared to the Baseline Without-Waiver Scenario.</p> <ul style="list-style-type: none"> • Consumers with incomes between 200–250% of the FPL will experience an increase in comprehensiveness. • There are no expected impacts for other consumers in the individual market. • There are no expected impacts for other consumers in the Essential Plan.
Affordability	<p>The Waiver is projected to meet the affordability guardrail as the affordability across the market is improved compared to the Baseline Without-Waiver Scenario.</p> <ul style="list-style-type: none"> • Affordability for current Essential Plan members is not expected to change. • Affordability for consumers with incomes between 200–250% of the FPL is expected to improve under the Waiver for an aggregate savings of \$1.5 billion over the 5 years. <ul style="list-style-type: none"> ○ This is an average annual savings of \$4,700 under the Waiver (\$2,300 in premiums and \$2,400 in out-of-pocket spend), which is approximately 12% of income for consumers 200 – 250% of the FPL. • Affordability for subsidized On-Exchange consumers is not expected to change under the Waiver. • Affordability for subsidy-ineligible On-Exchange consumers and Off-Exchange consumers is also not expected to change under the Waiver, as premiums will be calculated at without-waiver levels as part of the insurer reimbursement program.
Coverage	<p>The Waiver is projected to meet the coverage guardrail as more consumers are expected to enroll in coverage compared to the Baseline Without-Waiver Scenario.</p> <ul style="list-style-type: none"> • Overall enrollment for the Essential Plan and individual market is expected to increase by a combined 1.0% for PY 2024, 2.2% for PY 2025, 2.2% for PY 2026, 2.1% for PY 2027, and 2.1% for PY 2028.
Deficit Neutrality	<p>The Waiver is projected to meet the deficit neutrality guardrail and generate savings for the federal government.</p> <ul style="list-style-type: none"> • The federal spend under the Waiver is estimated to decrease by \$9.8 billion in PY 2024 (which reflects the impact of the April 1, 2023 implementation date) and \$65.9 billion over the 5-year Waiver period, before pass-through funding. • The net federal spend under the Waiver is estimated to remain the same in PY 2024 and over the 5-year Waiver period, after accounting for pass-through funding.

Table A2. Baseline Without-Waiver Summary of Enrollment, Premium, and Cost Estimates, PY 2024-2033

Baseline - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5-Year Total	10-Year Total
Unsubsidized On/Off-Exchange												
Enrollment ¹	66,122	64,435	124,043	123,236	122,435	121,639	120,849	120,063	119,283	118,507	100,054	110,061
Average Premium PMPM	\$802	\$843	\$868	\$913	\$961	\$1,011	\$1,063	\$1,118	\$1,176	\$1,237	\$890	\$1,016
Subsidized On-Exchange												
Enrollment ¹	236,570	237,659	149,369	150,356	151,349	152,348	153,354	154,367	155,387	156,413	185,061	169,717
Average Premium PMPM	\$761	\$801	\$842	\$886	\$932	\$981	\$1,032	\$1,085	\$1,142	\$1,201	\$833	\$949
Average APTC PMPM	\$314	\$345	\$325	\$358	\$394	\$432	\$472	\$514	\$559	\$607	\$344	\$423
Total Individual Market												
Enrollment ¹	302,692	302,094	273,412	273,592	273,784	273,988	274,203	274,430	274,670	274,920	285,115	279,779
Average Premium PMPM	\$770	\$810	\$854	\$898	\$945	\$994	\$1,046	\$1,100	\$1,157	\$1,217	\$853	\$975
Aggregate Premiums (millions)	\$2,798	\$2,936	\$2,802	\$2,950	\$3,105	\$3,268	\$3,440	\$3,622	\$3,813	\$4,014	\$14,590	\$32,747
Projected Federal Spend (millions)	\$833	\$918	\$544	\$604	\$668	\$737	\$810	\$889	\$973	\$1,063	\$3,567	\$8,039
Essential Plan												
Enrollment ¹	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382	1,337,542	1,382,057
Average Premium PMPM	\$625	\$647	\$671	\$695	\$720	\$747	\$774	\$803	\$832	\$863	\$672	\$740
Aggregate Premiums (millions)	\$10,237	\$10,156	\$10,601	\$11,162	\$11,755	\$12,380	\$13,041	\$13,738	\$14,474	\$15,251	\$53,912	\$122,796
Quality Incentive Pool Costs (millions)	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$1,125	\$2,250
LTSS Coverage (millions)	\$0	\$131	\$137	\$144	\$152	\$160	\$168	\$177	\$187	\$197	\$563	\$1,451
SDoH/BH Grant Program (millions)	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$125	\$250
Total Program Costs (millions)	\$10,487	\$10,537	\$10,988	\$11,556	\$12,156	\$12,790	\$13,459	\$14,165	\$14,911	\$15,698	\$55,725	\$126,747
Projected Federal Spend (millions)	\$12,829	\$12,924	\$13,126	\$14,030	\$14,997	\$16,030	\$17,134	\$18,315	\$19,577	\$20,925	\$67,907	\$159,888
Employer Shared Responsibility Revenue												
Projected Federal Revenue (millions)	(\$3)	(\$3)	(\$3)	(\$3)	(\$4)	(\$4)	(\$5)	(\$6)	(\$7)	(\$8)	(\$16)	(\$45)
Combined Totals												
Enrollment ¹	1,668,073	1,609,554	1,590,454	1,611,761	1,633,440	1,655,476	1,677,875	1,700,642	1,723,782	1,747,302	1,622,657	1,661,836
Projected Federal Spend (millions)	\$13,660	\$13,839	\$13,667	\$14,631	\$15,661	\$16,762	\$17,940	\$19,198	\$20,543	\$21,981	\$71,458	\$167,883

¹5- and 10-year totals are straight averages.

Table A3. With-Waiver Summary of Enrollment, Premium, and Cost Estimates, PY 2024-2033

With Waiver - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5-Year Total	10-Year Total
Unsubsidized On/Off-Exchange												
Enrollment ¹	66,122	64,587	124,347	123,692	123,043	122,399	121,761	121,127	120,499	119,875	100,358	110,745
Average Premium PMPM	\$802	\$843	\$868	\$913	\$961	\$1,010	\$1,063	\$1,118	\$1,176	\$1,237	\$890	\$1,016
Subsidized On-Exchange												
Enrollment ¹	186,174	170,243	87,405	87,979	88,556	89,138	89,724	90,313	90,906	91,503	124,071	107,194
Average Premium PMPM	\$761	\$801	\$842	\$886	\$932	\$981	\$1,032	\$1,085	\$1,142	\$1,201	\$826	\$937
Average APTC PMPM	\$316	\$345	\$325	\$358	\$394	\$432	\$472	\$514	\$559	\$607	\$342	\$416
Total Individual Market												
Enrollment ¹	252,296	234,830	211,752	211,671	211,599	211,537	211,485	211,440	211,405	211,378	224,430	217,939
Average Premium PMPM	\$772	\$812	\$858	\$902	\$949	\$998	\$1,050	\$1,104	\$1,161	\$1,221	\$854	\$977
Aggregate Premiums (millions)	\$2,336	\$2,289	\$2,179	\$2,291	\$2,409	\$2,533	\$2,664	\$2,801	\$2,946	\$3,098	\$11,505	\$25,547
Projected Federal Spend (millions)	\$659	\$658	\$318	\$353	\$391	\$431	\$474	\$520	\$569	\$622	\$2,379	\$4,996
Essential Plan												
Enrollment ¹	1,432,703	1,410,434	1,413,037	1,434,488	1,456,301	1,478,460	1,500,970	1,523,838	1,547,069	1,570,669	1,429,393	1,476,797
Average Premium PMPM	\$629	\$655	\$678	\$703	\$728	\$755	\$783	\$812	\$841	\$873	\$679	\$748
Aggregate Premiums (millions)	\$10,818	\$11,079	\$11,495	\$12,094	\$12,726	\$13,393	\$14,097	\$14,839	\$15,622	\$16,448	\$58,211	\$132,611
IRIP Payment (millions)	\$45	\$63	\$60	\$63	\$66	\$69	\$73	\$77	\$80	\$85	\$295	\$679
Quality Incentive Pool Costs (millions)	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$1,125	\$2,250
LTSS Coverage (millions)	\$0	\$131	\$136	\$143	\$150	\$158	\$167	\$175	\$185	\$194	\$560	\$1,440
SDoH/BH Grant Program (millions)	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$125	\$250
Total Program Costs (millions)	\$11,112	\$11,522	\$11,940	\$12,549	\$13,192	\$13,871	\$14,586	\$15,341	\$16,137	\$16,978	\$60,317	\$137,230
Projected Federal Spend (millions)	\$3,207	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,207	\$3,207
Employer Shared Responsibility Revenue												
Projected Federal Revenue (millions)	(\$1)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$1)	(\$1)
Combined Totals												
Enrollment ¹	1,684,999	1,645,264	1,624,789	1,646,159	1,667,900	1,689,997	1,712,455	1,735,278	1,758,474	1,782,047	1,653,822	1,694,736
Projected Federal Spend (millions)	\$3,866	\$658	\$318	\$353	\$391	\$431	\$474	\$520	\$569	\$622	\$5,586	\$8,202

¹5- and 10-year totals are straight averages. 2024 enrollment, premium, and APTC amounts reflect the average monthly enrollment for the 12-month period. 2024 amounts in other With Waiver enrollment tables reflect a 9-month average after waiver implementation.

Note: The program investments for Quality Incentive Pool and SDoH/BH Grant Program for 2024 are displayed as total costs over all 12 months. The first 3 months of these amounts would be incurred under the BHP and the last 9 months would be incurred under the 1332 Waiver.

Table A3. With-Waiver PY 2024 Break-Out

	200-250% FPL	All Other FPL	200-250% FPL	All Other FPL
With Waiver - Scenario A	1/1/24-3/31/24		4/1/24-12/31/24	
Unsubsidized On/Off-Exchange				
Enrollment ¹	0	66,122	0	66,122
Average Premium PMPM	\$0	\$802	\$0	\$802
Subsidized On-Exchange				
Enrollment ¹	69,010	168,922	410	168,512
Average Premium PMPM	\$756	\$761	\$756	\$761
Average APTC PMPM	\$332	\$314	\$332	\$314
Total Individual Market				
Enrollment ¹	69,010	235,044	410	234,634
Average Premium PMPM	\$756	\$773	\$756	\$773
Aggregate Premiums (millions)	\$156	\$545	\$3	\$1,632
Projected Federal Spend (millions)	\$64	\$149	\$1	\$445
Essential Plan				
Enrollment ¹	0	1,365,381	89,763	1,365,381
Average Premium PMPM	\$0	\$625	\$718	\$625
Aggregate Premiums (millions)	\$0	\$2,559	\$580	\$7,678
IRIP Payment (millions)	\$0		\$45	
Quality Incentive Pool Costs (millions)	\$56		\$169	
LTSS Coverage (millions)	\$0		\$0	
SDoH/BH Grant Program (millions)	\$6		\$19	
Total Program Costs (millions)	\$2,778		\$8,334	
Projected Federal Spend (millions)	\$802		\$2,405	

Table A4. Baseline Without and With-Waiver Annual Funding Estimates, PY 2024-2033

Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Individual Market										
Without Waiver PTCs	\$832,994,392	\$918,399,798	\$543,752,041	\$603,685,799	\$667,898,054	\$736,660,976	\$810,263,312	\$889,011,384	\$973,230,136	\$1,063,264,246
With Waiver PTCs	\$658,913,426	\$657,880,975	\$318,180,580	\$353,238,621	\$390,797,546	\$431,016,325	\$474,063,603	\$520,118,284	\$569,370,136	\$622,020,447
Difference	\$174,080,966	\$260,518,823	\$225,571,462	\$250,447,179	\$277,100,509	\$305,644,651	\$336,199,708	\$368,893,100	\$403,860,000	\$441,243,800
Essential Plan										
Without Waiver BHP Funding	\$12,829,257,312	\$12,923,855,551	\$13,126,291,459	\$14,030,366,556	\$14,996,951,508	\$16,030,127,338	\$17,134,481,121	\$18,314,916,475	\$19,576,674,841	\$20,925,358,757
With Waiver BHP Funding	\$3,207,314,328	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Difference	\$9,621,942,984	\$12,923,855,551	\$13,126,291,459	\$14,030,366,556	\$14,996,951,508	\$16,030,127,338	\$17,134,481,121	\$18,314,916,475	\$19,576,674,841	\$20,925,358,757
Employer Shared Responsibility Revenue										
Employer Penalty Loss	(\$2,592,000)	(\$2,970,000)	(\$3,006,000)	(\$3,258,000)	(\$3,746,700)	(\$4,308,705)	(\$4,955,011)	(\$5,698,262)	(\$6,553,002)	(\$7,535,952)
Combined Totals										
Without Waiver Federal Spend	\$13,659,659,705	\$13,839,285,349	\$13,667,037,501	\$14,630,794,355	\$15,661,102,862	\$16,762,479,609	\$17,939,789,422	\$19,198,229,596	\$20,543,351,975	\$21,981,087,051
With Waiver Federal Spend	\$3,866,227,755	\$657,880,975	\$318,180,580	\$353,238,621	\$390,797,546	\$431,016,325	\$474,063,603	\$520,118,284	\$569,370,136	\$622,020,447
Total Federal Savings	\$9,793,431,950	\$13,181,404,374	\$13,348,856,921	\$14,277,555,734	\$15,270,305,317	\$16,331,463,284	\$17,465,725,818	\$18,678,111,312	\$19,973,981,839	\$21,359,066,604
Requested Pass-through	\$9,793,431,950	\$13,181,404,374	\$13,348,856,921	\$14,277,555,734	\$15,270,305,317	\$16,331,463,284	\$17,465,725,818	\$18,678,111,312	\$19,973,981,839	\$21,359,066,604
Net Federal Savings	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Combined Totals										
	5-Year Total	10-Year Total								
Without Waiver Federal Spend	\$71,457,879,772	\$167,882,817,425								
With Waiver Federal Spend	\$5,586,325,475	\$8,202,914,270								
Total Federal Savings	\$65,871,554,296	\$159,679,903,155								
Requested Pass-through	\$65,871,554,296	\$159,679,903,155								
Net Federal Savings	\$0	\$0								

Note: For 2024, due to the April 1 implementation date, there will still be 1 quarter of BHP funding compared to the other years of the Waiver.

Table A5. SLCSP Premium Without and With-Waiver by Rating Area, PY 2024 – 2033

Baseline - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Second Lowest Cost Silver Plans (SLCSP) Monthly Premiums</i>										
Rating Area 1	\$599	\$630	\$662	\$697	\$733	\$771	\$811	\$853	\$898	\$945
Rating Area 2	\$512	\$539	\$567	\$596	\$627	\$660	\$694	\$731	\$769	\$808
Rating Area 3	\$744	\$782	\$823	\$866	\$911	\$958	\$1,008	\$1,061	\$1,116	\$1,174
Rating Area 4	\$808	\$850	\$894	\$941	\$990	\$1,041	\$1,095	\$1,152	\$1,212	\$1,275
Rating Area 5	\$600	\$631	\$664	\$699	\$735	\$773	\$813	\$856	\$900	\$947
Rating Area 6	\$617	\$649	\$683	\$718	\$756	\$795	\$836	\$880	\$926	\$974
Rating Area 7	\$612	\$644	\$677	\$712	\$749	\$788	\$829	\$872	\$918	\$965
Rating Area 8	\$775	\$815	\$857	\$902	\$949	\$998	\$1,050	\$1,105	\$1,162	\$1,222
With Waiver - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Second Lowest Cost Silver Plans (SLCSP) Monthly Premiums</i>										
Rating Area 1	\$599	\$630	\$663	\$697	\$733	\$772	\$812	\$854	\$898	\$945
Rating Area 2	\$512	\$539	\$567	\$597	\$628	\$660	\$695	\$731	\$769	\$809
Rating Area 3	\$744	\$783	\$824	\$866	\$911	\$959	\$1,009	\$1,061	\$1,116	\$1,174
Rating Area 4	\$808	\$850	\$895	\$941	\$990	\$1,042	\$1,096	\$1,153	\$1,213	\$1,276
Rating Area 5	\$600	\$632	\$664	\$699	\$735	\$774	\$814	\$856	\$901	\$948
Rating Area 6	\$617	\$649	\$683	\$719	\$756	\$795	\$837	\$880	\$926	\$974
Rating Area 7	\$612	\$644	\$677	\$713	\$750	\$789	\$830	\$873	\$918	\$966
Rating Area 8	\$775	\$815	\$858	\$902	\$949	\$999	\$1,051	\$1,105	\$1,163	\$1,223

Table A6. Baseline Without Waiver Average Annual Enrollment by Metal Level, PY 2024 – 2033

Baseline - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,668,073	1,609,554	1,590,454	1,611,761	1,633,440	1,655,476	1,677,875	1,700,642	1,723,782	1,747,302
<i>Unsubsidized On/Off-Exchange Enrollment</i>	66,122	64,435	124,043	123,236	122,435	121,639	120,849	120,063	119,283	118,507
Catastrophic	5,073	5,025	4,739	4,730	4,722	4,714	4,706	4,699	4,691	4,684
Bronze	21,026	20,462	42,758	42,472	42,189	41,907	41,627	41,349	41,072	40,797
Silver	21,525	20,941	45,249	44,945	44,644	44,344	44,046	43,750	43,456	43,164
Gold	10,038	9,771	17,674	17,556	17,439	17,322	17,206	17,091	16,977	16,863
Platinum	8,461	8,236	13,624	13,533	13,442	13,352	13,263	13,174	13,086	12,999
<i>Subsidized On-Exchange Enrollment</i>	236,570	237,659	149,369	150,356	151,349	152,348	153,354	154,367	155,387	156,413
Catastrophic	0	0	0	0	0	0	0	0	0	0
Bronze	88,312	88,718	55,760	56,128	56,499	56,872	57,247	57,625	58,006	58,389
Silver	96,331	96,774	60,823	61,225	61,629	62,036	62,446	62,858	63,273	63,691
Gold	30,993	31,136	19,569	19,698	19,828	19,959	20,091	20,224	20,357	20,492
Platinum	20,934	21,030	13,218	13,305	13,393	13,481	13,570	13,660	13,750	13,841
Essential Plan Enrollment	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382
EP1	573,460	549,133	553,158	562,031	571,056	580,225	589,542	599,009	608,627	618,400
EP2	163,846	156,895	158,045	160,580	163,159	165,779	168,441	171,145	173,894	176,686
EP3	95,577	91,522	92,193	93,672	95,176	96,704	98,257	99,835	101,438	103,067
EP4	532,498	509,910	513,646	521,886	530,266	538,781	547,432	556,222	565,154	574,229

Table A7. With-Waiver Average Annual Enrollment by Metal Level, PY 2024 – 2033

With Waiver - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,690,188	1,645,264	1,624,789	1,646,159	1,667,900	1,689,997	1,712,455	1,735,278	1,758,474	1,782,047
<i>Unsubsidized On/Off-Exchange Enrollment</i>	66,122	64,587	124,347	123,692	123,043	122,399	121,761	121,127	120,499	119,875
Catastrophic	5,073	5,037	4,750	4,748	4,745	4,743	4,742	4,740	4,739	4,738
Bronze	21,026	20,510	42,863	42,629	42,398	42,169	41,941	41,715	41,491	41,268
Silver	21,525	20,991	45,360	45,112	44,865	44,621	44,379	44,138	43,899	43,662
Gold	10,038	9,794	17,717	17,621	17,525	17,430	17,336	17,243	17,150	17,058
Platinum	8,461	8,255	13,657	13,583	13,509	13,436	13,363	13,291	13,220	13,149
<i>Subsidized On-Exchange Enrollment</i>	168,922	170,243	87,405	87,979	88,556	89,138	89,724	90,313	90,906	91,503
Catastrophic	0	0	0	0	0	0	0	0	0	0
Bronze	63,059	63,552	32,628	32,842	33,058	33,275	33,494	33,714	33,935	34,158
Silver	68,785	69,323	35,591	35,825	36,060	36,297	36,535	36,775	37,017	37,260
Gold	22,131	22,304	11,451	11,526	11,602	11,678	11,755	11,832	11,910	11,988
Platinum	14,948	15,065	7,734	7,785	7,836	7,888	7,940	7,992	8,044	8,097
Essential Plan Enrollment	1,455,144	1,410,434	1,413,037	1,434,488	1,456,301	1,478,460	1,500,970	1,523,838	1,547,069	1,570,669
EP1	573,460	549,133	553,158	562,031	571,056	580,225	589,542	599,009	608,627	618,400
EP2	163,846	156,895	158,045	160,580	163,159	165,779	168,441	171,145	173,894	176,686
EP3	95,577	91,522	92,193	93,672	95,176	96,704	98,257	99,835	101,438	103,067
EP4	532,498	509,910	513,646	521,886	530,266	538,781	547,432	556,222	565,154	574,229
QHP 200%-250% FPL Population	89,763	102,973	95,995	96,319	96,645	96,971	97,298	97,627	97,957	98,288

Note: this table displays the With Waiver amounts as 9-month averages for 2024, since the first year of the waiver will only contain 9 months. There is an increase from the WoW scenario (~0.6% in total) for the on-exchange Unsubsidized and Subsidized population with incomes above 250% of the FPL. This is due to increased awareness, concentrated advertisement, and outreach activities with the implementation of the waiver.

Table A8. Baseline Without-Waiver Average Annual Enrollment by FPL, PY 2024 – 2033

Baseline - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,668,073	1,609,554	1,590,454	1,611,761	1,633,440	1,655,476	1,677,875	1,700,642	1,723,782	1,747,302
Unsubsidized On/Off-Exchange Enrollment	66,122	64,435	124,043	123,236	122,435	121,639	120,849	120,063	119,283	118,507
Below 400%	0	0	0	0	0	0	0	0	0	0
401% - 500%	0	0	24,239	24,082	23,925	23,770	23,615	23,462	23,309	23,158
501% - 600%	0	0	12,400	12,319	12,239	12,159	12,080	12,002	11,924	11,846
Over 600%	12,291	13,896	15,502	15,401	15,301	15,201	15,103	15,004	14,907	14,810
Do Not Report	53,831	50,539	71,902	71,435	70,970	70,509	70,051	69,595	69,143	68,693
Subsidized On-Exchange Enrollment	236,570	237,659	149,369	150,356	151,349	152,348	153,354	154,367	155,387	156,413
Below 139%	7,523	7,558	4,750	4,782	4,813	4,845	4,877	4,909	4,942	4,974
139% - 150%	288	290	182	183	184	186	187	188	189	191
151% - 200%	1,757	1,765	1,110	1,117	1,124	1,132	1,139	1,147	1,154	1,162
201% - 250%	69,010	69,122	62,093	62,470	62,849	63,230	63,614	64,000	64,388	64,779
251% - 300%	54,227	54,547	36,619	36,876	37,134	37,395	37,657	37,921	38,187	38,455
301% - 350%	40,022	40,258	27,027	27,216	27,407	27,599	27,793	27,988	28,184	28,381
351% - 400%	26,047	26,201	17,589	17,713	17,837	17,962	18,088	18,215	18,342	18,471
401% - 500%	21,502	21,629	0	0	0	0	0	0	0	0
501% - 600%	9,595	9,652	0	0	0	0	0	0	0	0
Over 600%	6,599	6,638	0	0	0	0	0	0	0	0
Essential Plan Enrollment	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382
Below 150%	791,921	758,327	763,884	776,138	788,601	801,264	814,130	827,203	840,485	853,981
Over 151%	573,460	549,133	553,158	562,031	571,056	580,225	589,542	599,009	608,627	618,400

Table A9. With-Waiver PY Average Annual Enrollment by FPL, PY 2024 – 2033

With Waiver - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,690,188	1,645,264	1,624,789	1,646,159	1,667,900	1,689,997	1,712,455	1,735,278	1,758,474	1,782,047
Unsubsidized On/Off-Exchange Enrollment	66,122	64,587	124,347	123,692	123,043	122,399	121,761	121,127	120,499	119,875
Below 400% ²	0	0	0	0	0	0	0	0	0	0
401% - 500% ²	0	0	24,299	24,171	24,044	23,918	23,793	23,670	23,547	23,425
501% - 600% ²	0	0	12,430	12,365	12,300	12,235	12,171	12,108	12,045	11,983
Over 600% ²	12,314	13,927	15,540	15,458	15,377	15,296	15,217	15,137	15,059	14,981
Do Not Report ²	53,808	50,660	72,078	71,699	71,323	70,949	70,579	70,212	69,848	69,486
Subsidized On-Exchange Enrollment	168,922	170,243	87,405	87,979	88,556	89,138	89,724	90,313	90,906	91,503
Below 139% ¹	7,490	7,548	3,875	3,901	3,927	3,952	3,978	4,004	4,031	4,057
139% - 150% ¹	287	289	149	149	150	151	152	153	154	155
151% - 200% ¹	1,750	1,763	905	911	917	923	929	935	942	948
201% - 250%	410	413	212	213	215	216	218	219	220	222
251% - 300% ²	54,568	54,995	37,083	37,326	37,571	37,818	38,067	38,317	38,568	38,822
301% - 350% ²	40,274	40,589	27,369	27,548	27,729	27,912	28,095	28,279	28,465	28,652
351% - 400% ²	26,211	26,416	17,812	17,929	18,047	18,165	18,285	18,405	18,526	18,647
401% - 500% ²	21,637	21,807	0	0	0	0	0	0	0	0
501% - 600% ²	9,655	9,731	0	0	0	0	0	0	0	0
Over 600% ²	6,641	6,693	0	0	0	0	0	0	0	0
Essential Plan Enrollment	1,455,144	1,410,434	1,413,037	1,434,488	1,456,301	1,478,460	1,500,970	1,523,838	1,547,069	1,570,669
Below 150%	791,921	758,327	763,884	776,138	788,601	801,264	814,130	827,203	840,485	853,981
151% - 200%	573,460	549,133	553,158	562,031	571,056	580,225	589,542	599,009	608,627	618,400
Over 201%	89,763	102,973	95,995	96,319	96,645	96,971	97,298	97,627	97,957	98,288

¹ The decrease in enrollment from the WoW scenario (~0.4% in total) is due to the methodology for allocating estimated enrollment by income and does not reflect any changes in eligibility for this population that would cause consumers below 200% of FPL to lose coverage.

² There is an increase from the WoW scenario (~0.6% in total) for the on-exchange Unsubsidized and Subsidized population with incomes above 250% of the FPL. This is due to increased awareness, concentrated advertisement, and outreach activities with the implementation of the waiver.

Note: This table displays the With Waiver amounts as 9-month averages for 2024, since the first year of the waiver will only contain 9 months.

Table A10. Without and With-Waiver Monthly Federal Funding PMPM by Metal Level and Rate Cohort, PY 2024 – 2033

Without Waiver - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Exchange Subsidized APTCs	\$314	\$345	\$325	\$358	\$394	\$432	\$472	\$514	\$559	\$607
Bronze	\$289	\$313	\$305	\$331	\$360	\$389	\$421	\$454	\$490	\$527
Silver	\$365	\$398	\$383	\$418	\$456	\$496	\$538	\$583	\$630	\$681
Gold	\$281	\$317	\$275	\$315	\$357	\$403	\$450	\$501	\$555	\$613
Platinum	\$237	\$278	\$216	\$260	\$308	\$359	\$413	\$470	\$531	\$596
Essential Plan BHP Funding	\$783	\$824	\$831	\$874	\$919	\$967	\$1,017	\$1,070	\$1,126	\$1,184
EP1	\$704	\$741	\$711	\$748	\$786	\$827	\$870	\$916	\$963	\$1,013
EP2	\$771	\$811	\$809	\$851	\$896	\$942	\$991	\$1,043	\$1,097	\$1,154
EP3	\$835	\$878	\$915	\$962	\$1,012	\$1,065	\$1,120	\$1,179	\$1,240	\$1,304
EP4	\$862	\$907	\$951	\$1,001	\$1,053	\$1,107	\$1,165	\$1,226	\$1,289	\$1,356
With Waiver - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Exchange Subsidized APTCs	\$314	\$345	\$325	\$358	\$394	\$432	\$472	\$514	\$559	\$607
Bronze	\$289	\$313	\$305	\$331	\$360	\$389	\$421	\$454	\$490	\$527
Silver	\$365	\$398	\$383	\$418	\$456	\$496	\$538	\$583	\$630	\$681
Gold	\$281	\$317	\$275	\$315	\$357	\$403	\$450	\$501	\$555	\$613
Platinum	\$237	\$278	\$216	\$260	\$308	\$359	\$413	\$470	\$531	\$596
Essential Plan BHP Funding	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP1	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP2	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP3	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP4	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
QHP 200%-250% FPL Population	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table A11. Without and With Waiver - 5-Year Enrollment, Premium, and Federal Deficit Estimates, PY 2024 – 2033

Without Waiver - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Unsubsidized On-exchange & Off-exchange Enrollment</i>	66,122	64,435	124,043	123,236	122,435	121,639	120,849	120,063	119,283	118,507
Below 400%	0	0	0	0	0	0	0	0	0	0
401% - 500%	0	0	24,239	24,082	23,925	23,770	23,615	23,462	23,309	23,158
501% - 600%	0	0	12,400	12,319	12,239	12,159	12,080	12,002	11,924	11,846
Over 600%	12,291	13,896	15,502	15,401	15,301	15,201	15,103	15,004	14,907	14,810
Do Not Report	53,831	50,539	71,902	71,435	70,970	70,509	70,051	69,595	69,143	68,693
<i>Unsubsidized On-exchange Enrollment</i>	16,531	16,109	74,426	73,942	73,461	72,984	72,509	72,038	71,570	71,104
<i>Off-exchange Enrollment</i>	49,592	48,326	49,617	49,295	48,974	48,656	48,339	48,025	47,713	47,403
With Waiver - Scenario A	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Unsubsidized On-exchange & Off-exchange Enrollment</i>	66,122	64,587	124,347	123,692	123,043	122,399	121,761	121,127	120,499	119,875
Below 400%	0	0	0	0	0	0	0	0	0	0
401% - 500%	0	0	24,299	24,171	24,044	23,918	23,793	23,670	23,547	23,425
501% - 600%	0	0	12,430	12,365	12,300	12,235	12,171	12,108	12,045	11,983
Over 600%	12,314	13,927	15,540	15,458	15,377	15,296	15,217	15,137	15,059	14,981
Do Not Report	53,808	50,660	72,078	71,699	71,323	70,949	70,579	70,212	69,848	69,486
<i>Unsubsidized On-exchange & Off-exchange Premium Increase (Annual)</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<i>Unsubsidized On-exchange Enrollment</i>	16,531	16,147	74,608	74,215	73,826	73,439	73,057	72,676	72,299	71,925
<i>Unsubsidized On-exchange Premium Increase (Annual)</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<i>Off-exchange Enrollment</i>	49,592	48,440	49,739	49,477	49,217	48,960	48,704	48,451	48,200	47,950
<i>Off-exchange Premium Increase (Annual)</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Note: due to IRIP, there are no expected increases of premiums for consumers that remain in the individual market compared to Without Waiver.

Note: there is an increase from the WoW scenario (~0.6% in total) for the on-exchange Unsubsidized and Subsidized population with incomes above 250% of the FPL. This is due to increased awareness, concentrated advertisement, and outreach activities with the implementation of the Waiver.

Table A12. Without and With-Waiver Annual Out-of-Pocket Expenses by FPL, PY 2024 – 2033

Without Waiver - Scenario A - FPL	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
<i>Exchange - Annual Out-of-Pocket Expenses - FPL</i>												
Below 250%	\$2,751	\$2,895	\$3,045	\$3,203	\$3,370	\$3,545	\$3,730	\$3,923	\$4,128	\$4,342	\$3,040	\$3,481
251% - 300%	\$2,643	\$2,781	\$2,925	\$3,078	\$3,238	\$3,406	\$3,583	\$3,769	\$3,965	\$4,172	\$2,898	\$3,308
301% - 350%	\$2,641	\$2,778	\$2,922	\$3,074	\$3,234	\$3,402	\$3,579	\$3,766	\$3,961	\$4,167	\$2,895	\$3,304
351% - 400%	\$2,653	\$2,791	\$2,936	\$3,089	\$3,250	\$3,419	\$3,596	\$3,783	\$3,980	\$4,187	\$2,909	\$3,320
401% - 500%	\$2,672	\$2,811	\$2,957	\$3,111	\$3,272	\$3,442	\$3,621	\$3,810	\$4,008	\$4,216	\$2,974	\$3,399
501% - 600%	\$2,686	\$2,826	\$2,973	\$3,128	\$3,290	\$3,462	\$3,642	\$3,831	\$4,030	\$4,240	\$3,002	\$3,434
Over 600%/Do Not Report	\$2,742	\$2,885	\$3,034	\$3,192	\$3,358	\$3,533	\$3,717	\$3,910	\$4,113	\$4,327	\$3,058	\$3,498
<i>Essential Plan - Annual Out-of-Pocket Expenses - FPL</i>												
Below 150%	\$9	\$10	\$10	\$11	\$11	\$11	\$12	\$12	\$13	\$13	\$10	\$11
Over 151%	\$139	\$145	\$150	\$156	\$163	\$169	\$176	\$183	\$190	\$198	\$151	\$168
With Waiver - Scenario A - FPL	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
<i>Exchange - Annual Out-of-Pocket Expenses - FPL</i>												
Below 250%	\$2,757	\$2,901	\$3,051	\$3,210	\$3,377	\$3,553	\$3,737	\$3,932	\$4,136	\$4,351	\$2,997	\$3,403
251% - 300%	\$2,648	\$2,785	\$2,930	\$3,082	\$3,243	\$3,411	\$3,589	\$3,775	\$3,972	\$4,178	\$2,903	\$3,313
301% - 350%	\$2,645	\$2,782	\$2,927	\$3,079	\$3,239	\$3,408	\$3,585	\$3,771	\$3,967	\$4,174	\$2,900	\$3,310
351% - 400%	\$2,657	\$2,795	\$2,941	\$3,094	\$3,255	\$3,424	\$3,602	\$3,789	\$3,986	\$4,193	\$2,914	\$3,325
401% - 500%	\$2,676	\$2,815	\$2,961	\$3,115	\$3,277	\$3,448	\$3,627	\$3,816	\$4,014	\$4,223	\$2,978	\$3,405
501% - 600%	\$2,691	\$2,830	\$2,978	\$3,132	\$3,295	\$3,467	\$3,647	\$3,837	\$4,036	\$4,246	\$3,006	\$3,440
Over 600%/Do Not Report	\$2,746	\$2,889	\$3,039	\$3,197	\$3,363	\$3,538	\$3,722	\$3,916	\$4,119	\$4,333	\$3,063	\$3,504
<i>Essential Plan - Annual Out-of-Pocket Expenses - FPL</i>												
Below 150%	\$9	\$10	\$10	\$11	\$11	\$11	\$12	\$12	\$13	\$13	\$10	\$11
151% - 200%	\$139	\$145	\$150	\$156	\$163	\$169	\$176	\$183	\$190	\$198	\$151	\$168
Over 201%	\$238	\$247	\$257	\$267	\$278	\$289	\$301	\$313	\$325	\$338	\$257	\$286

Table A13. Without and With-Waiver Annual Out-of-Pocket Expenses by Age, PY 2024 – 2033

Without Waiver - Scenario A - Age	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
Exchange - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$1,131	\$1,190	\$1,252	\$1,317	\$1,386	\$1,458	\$1,533	\$1,613	\$1,697	\$1,785	\$1,255	\$1,436
21 - 25 Years	\$1,126	\$1,184	\$1,246	\$1,311	\$1,379	\$1,450	\$1,526	\$1,605	\$1,689	\$1,776	\$1,249	\$1,429
26 - 30 Years	\$1,459	\$1,534	\$1,614	\$1,698	\$1,787	\$1,879	\$1,977	\$2,080	\$2,188	\$2,302	\$1,618	\$1,852
31 - 35 Years	\$1,783	\$1,876	\$1,973	\$2,076	\$2,184	\$2,297	\$2,417	\$2,542	\$2,675	\$2,814	\$1,978	\$2,264
36 - 40 Years	\$1,960	\$2,062	\$2,169	\$2,282	\$2,401	\$2,526	\$2,657	\$2,795	\$2,941	\$3,094	\$2,175	\$2,489
41 - 45 Years	\$2,186	\$2,299	\$2,419	\$2,545	\$2,677	\$2,816	\$2,963	\$3,117	\$3,279	\$3,449	\$2,425	\$2,775
46 - 50 Years	\$2,578	\$2,712	\$2,853	\$3,001	\$3,158	\$3,322	\$3,494	\$3,676	\$3,867	\$4,068	\$2,860	\$3,273
51 - 55 Years	\$3,180	\$3,346	\$3,520	\$3,703	\$3,895	\$4,098	\$4,311	\$4,535	\$4,771	\$5,019	\$3,529	\$4,038
56 - 60 Years	\$3,896	\$4,098	\$4,311	\$4,536	\$4,772	\$5,020	\$5,281	\$5,555	\$5,844	\$6,148	\$4,323	\$4,946
61 - 65 Years	\$4,802	\$5,052	\$5,315	\$5,591	\$5,882	\$6,188	\$6,509	\$6,848	\$7,204	\$7,578	\$5,328	\$6,097
Essential Plan - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$45	\$47	\$48	\$50	\$52	\$54	\$57	\$59	\$61	\$64	\$49	\$54
21 - 25 Years	\$45	\$46	\$48	\$50	\$52	\$54	\$56	\$59	\$61	\$63	\$48	\$54
26 - 30 Years	\$58	\$60	\$62	\$65	\$68	\$70	\$73	\$76	\$79	\$82	\$63	\$69
31 - 35 Years	\$71	\$73	\$76	\$79	\$83	\$86	\$89	\$93	\$97	\$100	\$76	\$85
36 - 40 Years	\$78	\$81	\$84	\$87	\$91	\$94	\$98	\$102	\$106	\$110	\$84	\$93
41 - 45 Years	\$87	\$90	\$94	\$97	\$101	\$105	\$109	\$114	\$118	\$123	\$94	\$104
46 - 50 Years	\$102	\$106	\$110	\$115	\$119	\$124	\$129	\$134	\$140	\$145	\$111	\$123
51 - 55 Years	\$126	\$131	\$136	\$142	\$147	\$153	\$159	\$166	\$172	\$179	\$136	\$151
56 - 60 Years	\$154	\$160	\$167	\$174	\$180	\$188	\$195	\$203	\$211	\$220	\$167	\$185
61 - 65 Years	\$190	\$198	\$206	\$214	\$222	\$231	\$241	\$250	\$260	\$271	\$206	\$228
With Waiver - Scenario A - Age												
Exchange - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$1,126	\$1,185	\$1,247	\$1,312	\$1,380	\$1,451	\$1,527	\$1,606	\$1,690	\$1,778	\$1,250	\$1,430
21 - 25 Years	\$1,121	\$1,179	\$1,240	\$1,305	\$1,373	\$1,444	\$1,519	\$1,598	\$1,681	\$1,769	\$1,244	\$1,423
26 - 30 Years	\$1,453	\$1,528	\$1,607	\$1,691	\$1,779	\$1,872	\$1,969	\$2,071	\$2,179	\$2,292	\$1,612	\$1,844
31 - 35 Years	\$1,775	\$1,868	\$1,965	\$2,067	\$2,175	\$2,288	\$2,407	\$2,532	\$2,663	\$2,802	\$1,970	\$2,254
36 - 40 Years	\$1,952	\$2,054	\$2,160	\$2,273	\$2,391	\$2,515	\$2,646	\$2,784	\$2,928	\$3,081	\$2,166	\$2,478
41 - 45 Years	\$2,176	\$2,290	\$2,409	\$2,534	\$2,666	\$2,804	\$2,950	\$3,104	\$3,265	\$3,435	\$2,415	\$2,763
46 - 50 Years	\$2,567	\$2,701	\$2,841	\$2,989	\$3,144	\$3,308	\$3,480	\$3,661	\$3,851	\$4,051	\$2,848	\$3,259
51 - 55 Years	\$3,167	\$3,331	\$3,505	\$3,687	\$3,879	\$4,080	\$4,293	\$4,516	\$4,751	\$4,998	\$3,514	\$4,021
56 - 60 Years	\$3,879	\$4,081	\$4,293	\$4,517	\$4,751	\$4,999	\$5,258	\$5,532	\$5,820	\$6,122	\$4,304	\$4,925
61 - 65 Years	\$4,782	\$5,031	\$5,292	\$5,567	\$5,857	\$6,162	\$6,482	\$6,819	\$7,174	\$7,547	\$5,306	\$6,071
Essential Plan - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$49	\$51	\$53	\$55	\$57	\$59	\$62	\$64	\$67	\$69	\$53	\$59
21 - 25 Years	\$48	\$50	\$52	\$55	\$57	\$59	\$61	\$64	\$66	\$69	\$53	\$58
26 - 30 Years	\$63	\$65	\$68	\$71	\$74	\$76	\$80	\$83	\$86	\$89	\$68	\$75
31 - 35 Years	\$77	\$80	\$83	\$86	\$90	\$93	\$97	\$101	\$105	\$109	\$83	\$92
36 - 40 Years	\$84	\$88	\$91	\$95	\$99	\$103	\$107	\$111	\$116	\$120	\$91	\$101
41 - 45 Years	\$94	\$98	\$102	\$106	\$110	\$115	\$119	\$124	\$129	\$134	\$102	\$113
46 - 50 Years	\$111	\$115	\$120	\$125	\$130	\$135	\$141	\$146	\$152	\$158	\$120	\$133
51 - 55 Years	\$137	\$142	\$148	\$154	\$160	\$167	\$173	\$180	\$187	\$195	\$148	\$164
56 - 60 Years	\$168	\$175	\$182	\$189	\$196	\$204	\$212	\$221	\$230	\$239	\$182	\$201
61 - 65 Years	\$207	\$215	\$224	\$233	\$242	\$252	\$262	\$272	\$283	\$294	\$224	\$248

Table A14. Without and With-Waiver Annual Enrollment by Age, PY 2024 – 2033

Without Waiver - Scenario A - Age	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
Exchange - Enrollment - Age												
Total Enrollment	302,692	302,094	273,412	273,592	273,784	273,988	274,203	274,430	274,670	274,920	285,115	279,779
00 - 20 Years	22,981	22,874	21,009	21,004	21,000	20,998	20,996	20,995	20,994	20,995	21,774	21,385
21 - 25 Years	16,810	16,768	15,221	15,228	15,236	15,245	15,245	15,254	15,264	15,275	15,286	15,559
26 - 30 Years	25,800	25,777	23,186	23,210	23,235	23,261	23,288	23,316	23,345	23,375	24,242	23,779
31 - 35 Years	26,063	26,058	23,350	23,380	23,410	23,442	23,474	23,508	23,542	23,578	24,452	23,981
36 - 40 Years	23,972	23,964	21,493	21,519	21,546	21,574	21,603	21,632	21,663	21,695	22,499	22,066
41 - 45 Years	23,948	23,932	21,501	21,525	21,550	21,575	21,602	21,629	21,658	21,687	22,491	22,061
46 - 50 Years	26,738	26,708	24,057	24,079	24,103	24,128	24,154	24,181	24,209	24,238	25,137	24,660
51 - 55 Years	34,911	34,845	31,520	31,542	31,565	31,589	31,615	31,642	31,671	31,701	32,876	32,260
56 - 60 Years	47,162	47,035	42,742	42,759	42,779	42,800	42,824	42,849	42,876	42,904	44,495	43,673
61 - 65 Years	49,962	49,797	45,402	45,412	45,423	45,437	45,453	45,470	45,490	45,511	47,199	46,336
65+ Years	4,346	4,336	3,931	3,933	3,935	3,938	3,941	3,944	3,947	3,950	4,096	4,020
Essential Plan - Enrollment - Age												
Total Enrollment	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382	1,337,542	1,382,057
00 - 20 Years	22,968	21,994	22,155	22,511	22,872	23,239	23,612	23,992	24,377	24,768	22,500	23,249
21 - 25 Years	133,178	127,528	128,463	130,524	132,620	134,749	136,913	139,111	141,345	143,615	130,463	134,805
26 - 30 Years	185,132	177,279	178,578	181,442	184,356	187,316	190,324	193,380	196,485	199,640	181,357	187,393
31 - 35 Years	174,980	167,557	168,785	171,492	174,246	177,044	179,887	182,775	185,710	188,692	171,412	177,117
36 - 40 Years	164,741	157,753	158,909	161,458	164,051	166,685	169,362	172,081	174,844	177,652	161,382	166,754
41 - 45 Years	158,981	152,237	153,353	155,812	158,314	160,857	163,439	166,064	168,730	171,440	155,739	160,923
46 - 50 Years	149,534	143,191	144,240	146,554	148,907	151,298	153,727	156,196	158,704	161,252	146,485	151,360
51 - 55 Years	143,638	137,545	138,553	140,775	143,036	145,332	147,666	150,037	152,446	154,894	140,709	145,392
56 - 60 Years	136,399	130,613	131,570	133,680	135,827	138,008	140,224	142,475	144,763	147,088	133,618	138,065
61 - 65 Years	95,830	91,765	92,437	93,920	95,428	96,961	98,518	100,100	101,707	103,340	93,876	97,001
65+ Years	-	-	-	-	-	-	-	-	-	-	-	-
With Waiver - Scenario A - Age												
Exchange - Enrollment - Age												
Total Enrollment	235,044	234,830	211,752	211,671	211,599	211,537	211,485	211,440	211,405	211,378	220,979	216,214
00 - 20 Years	20,741	20,670	18,946	18,940	18,934	18,930	18,926	18,922	18,920	18,918	19,646	19,285
21 - 25 Years	12,419	12,397	11,228	11,217	11,208	11,198	11,189	11,181	11,173	11,166	11,694	11,438
26 - 30 Years	16,894	16,898	15,099	15,083	15,067	15,052	15,037	15,024	15,011	14,998	15,808	15,416
31 - 35 Years	18,804	18,828	16,740	16,738	16,736	16,735	16,735	16,735	16,736	16,738	17,569	17,152
36 - 40 Years	17,352	17,371	15,466	15,463	15,460	15,459	15,458	15,457	15,458	15,459	16,222	15,840
41 - 45 Years	17,652	17,664	15,767	15,764	15,761	15,760	15,758	15,758	15,758	15,759	16,522	16,140
46 - 50 Years	20,384	20,387	18,265	18,262	18,260	18,258	18,257	18,257	18,258	18,260	19,112	18,685
51 - 55 Years	27,411	27,390	24,680	24,673	24,667	24,663	24,659	24,657	24,655	24,655	25,764	25,211
56 - 60 Years	38,281	38,217	34,634	34,622	34,611	34,601	34,593	34,586	34,581	34,577	36,073	35,330
61 - 65 Years	40,741	40,645	36,989	36,969	36,950	36,933	36,918	36,904	36,892	36,881	38,459	37,682
65+ Years	4,365	4,363	3,937	3,941	3,945	3,949	3,954	3,958	3,963	3,968	4,110	4,034
Essential Plan - Enrollment - Age												
Total Enrollment	1,455,144	1,410,434	1,413,037	1,434,488	1,456,301	1,478,460	1,500,970	1,523,838	1,547,069	1,570,669	1,433,881	1,479,041
00 - 20 Years	25,649	24,899	24,823	25,191	25,564	25,943	26,328	26,720	27,117	27,521	25,225	25,975
21 - 25 Years	139,667	135,303	135,787	137,867	139,982	142,131	144,314	146,532	148,785	151,074	137,721	142,144
26 - 30 Years	196,973	190,911	191,297	194,204	197,160	200,162	203,213	206,312	209,460	212,658	194,109	200,235
31 - 35 Years	185,025	179,293	179,775	182,516	185,303	188,135	191,012	193,934	196,903	199,919	182,382	188,182
36 - 40 Years	173,981	168,584	169,060	171,640	174,263	176,927	179,635	182,385	185,179	188,017	171,505	176,967
41 - 45 Years	167,807	162,598	163,067	165,556	168,087	170,658	173,270	175,924	178,619	181,358	165,423	170,694
46 - 50 Years	158,285	153,386	153,782	156,125	158,508	160,929	163,388	165,886	168,425	171,003	156,017	160,972
51 - 55 Years	153,478	148,776	149,009	151,268	153,565	155,898	158,268	160,676	163,122	165,607	151,219	155,967
56 - 60 Years	147,559	143,096	143,133	145,287	147,479	149,704	151,965	154,262	156,595	158,965	145,311	149,804
61 - 65 Years	106,719	103,589	103,304	104,835	106,391	107,971	109,577	111,207	112,864	114,546	104,967	108,100
65+ Years	-	-	-	-	-	-	-	-	-	-	-	-

Updated Appendix B: Scenario B Detailed 10-Year Estimates (IRA Subsidies Are Extended & Insurer Reimbursement)

The following provides an analysis of the proposed 1332 Waiver under current law for the expansion to consumers with incomes between 200 – 250% of the FPL. The analysis estimates that the proposed Waiver meets each of the four guardrails for the five years of the Waiver and 10-year analysis.

Table B1. Scenario B High-Level Guardrail Compliance of 1332 Waiver

Guardrail	Estimated Impact With-Waiver (WW) Compared to Without-Waiver (WoW)
Comprehensiveness	<p>The Waiver is projected to meet the comprehensiveness guardrail as consumers have access to more comprehensive coverage compared to the Baseline Without-Waiver Scenario.</p> <ul style="list-style-type: none"> • Consumers with incomes between 200 – 250% of the FPL will experience an increase in comprehensiveness. • There are no expected impacts for other consumers in the individual market. • There are no expected impacts for other consumers in the Essential Plan.
Affordability	<p>The Waiver is projected to meet the affordability guardrail as the affordability across the market is improved compared to the Baseline Without-Waiver Scenario.</p> <ul style="list-style-type: none"> • Affordability for current Essential Plan members is not expected to change. • Affordability for consumers with incomes between 200-250% of the FPL is expected to improve under the Waiver for an aggregate savings of \$1.5 billion over the 5 years. <ul style="list-style-type: none"> ○ This is an average annual savings of \$4,600 under the Waiver (\$2,200 in premiums and \$2,400 in out-of-pocket spend), which is approximately 12% of income for consumers 200 – 250% of the FPL. • Affordability for subsidized On-Exchange consumers is not expected to change under the Waiver. • Affordability for subsidy-ineligible On-Exchange consumers and Off-Exchange consumers is also not expected to change under the Waiver, as premiums will be calculated at without-waiver levels as part of the insurer reimbursement program.
Coverage	<p>The Waiver is projected to meet the coverage guardrail as more consumers are expected to enroll in coverage compared to the Baseline Without-Waiver Scenario.</p> <ul style="list-style-type: none"> • Overall enrollment for the Essential Plan and individual market is expected to increase by a combined 1.0% for PY 2024, 2.2% for PY 2025, 1.8% for PY 2026, 1.8% for PY 2027, and 1.7% for PY 2028.
Deficit Neutrality	<p>The Waiver is projected to meet the deficit neutrality guardrail and generate savings for the federal government.</p> <ul style="list-style-type: none"> • The federal spend under the Waiver is estimated to decrease by \$9.8 billion in PY 2024 (which reflects the impact of the April 1, 2023 implementation date) and \$69.0 billion over the 5-year Waiver period, before pass-through funding. • The net federal spend under the Waiver is estimated to remain the same in PY 2024 and over the 5-year Waiver period, after accounting for pass-through funding.

Table B2. Baseline Without-Waiver Summary of Enrollment, Premium, and Cost Estimates, PY 2024-2033

Baseline - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5-Year Total	10-Year Total
Unsubsidized On/Off-Exchange												
Enrollment ¹	66,122	64,435	62,609	60,248	57,976	55,790	53,686	51,662	49,714	47,839	62,278	57,008
Average Premium PMPM	\$802	\$843	\$886	\$931	\$978	\$1,027	\$1,079	\$1,133	\$1,190	\$1,249	\$885	\$997
Subsidized On-Exchange												
Enrollment ¹	236,570	237,659	239,503	241,952	244,435	246,953	249,506	252,095	254,721	257,385	240,024	246,078
Average Premium PMPM	\$761	\$801	\$842	\$886	\$932	\$981	\$1,032	\$1,085	\$1,142	\$1,201	\$845	\$970
Average APTC PMPM	\$314	\$345	\$378	\$412	\$449	\$487	\$529	\$572	\$618	\$667	\$380	\$480
Total Individual Market												
Enrollment ¹	302,692	302,094	302,112	302,200	302,411	302,743	303,192	303,757	304,435	305,224	302,302	303,086
Average Premium PMPM	\$770	\$810	\$852	\$895	\$941	\$989	\$1,040	\$1,094	\$1,150	\$1,209	\$854	\$975
Aggregate Premiums (millions)	\$2,798	\$2,936	\$3,087	\$3,246	\$3,415	\$3,594	\$3,784	\$3,986	\$4,200	\$4,427	\$15,482	\$35,474
Projected Federal Spend (millions)	\$833	\$918	\$1,013	\$1,117	\$1,228	\$1,348	\$1,477	\$1,616	\$1,764	\$1,924	\$5,109	\$13,238
Essential Plan												
Enrollment ¹	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382	1,337,542	1,382,057
Average Premium PMPM	\$625	\$647	\$671	\$695	\$720	\$747	\$774	\$803	\$832	\$863	\$672	\$740
Aggregate Premiums (millions)	\$10,237	\$10,156	\$10,601	\$11,162	\$11,755	\$12,380	\$13,041	\$13,738	\$14,474	\$15,251	\$53,912	\$122,796
Quality Incentive Pool Costs (millions)	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$1,125	\$2,250
LTSS Coverage (millions)	\$0	\$131	\$137	\$144	\$152	\$160	\$168	\$177	\$187	\$197	\$563	\$1,451
SDoH/BH Grant Program (millions)	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$125	\$250
Total Program Costs (millions)	\$10,487	\$10,537	\$10,988	\$11,556	\$12,156	\$12,790	\$13,459	\$14,165	\$14,911	\$15,698	\$55,725	\$126,747
Projected Federal Spend (millions)	\$12,829	\$12,924	\$14,026	\$14,992	\$16,025	\$17,129	\$18,309	\$19,571	\$20,919	\$22,360	\$70,797	\$169,086
Employer Shared Responsibility Revenue												
Projected Federal Revenue (millions)	(\$3)	(\$3)	(\$3)	(\$3)	(\$4)	(\$4)	(\$5)	(\$6)	(\$7)	(\$8)	(\$16)	(\$45)
Combined Totals												
Enrollment ¹	1,668,073	1,609,554	1,619,155	1,640,369	1,662,067	1,684,232	1,706,864	1,729,969	1,753,548	1,777,606	1,639,844	1,685,144
Projected Federal Spend (millions)	\$13,660	\$13,839	\$15,036	\$16,106	\$17,250	\$18,473	\$19,782	\$21,181	\$22,677	\$24,276	\$75,891	\$182,279

¹ 5- and 10-year totals are straight averages

Table B3. With-Waiver Summary of Enrollment, Premium, and Cost Estimates, PY 2024-2033

With Waiver - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5-Year Total	10-Year Total
Unsubsidized On/Off-Exchange												
Enrollment ¹	66,122	64,780	63,298	61,282	59,355	57,513	55,754	54,075	52,471	50,941	62,967	58,559
Average Premium PMPM	\$802	\$843	\$886	\$931	\$978	\$1,027	\$1,079	\$1,133	\$1,189	\$1,249	\$886	\$1,000
Subsidized On-Exchange												
Enrollment ¹	186,174	170,243	172,199	173,370	174,549	175,736	176,932	178,135	179,347	180,567	175,307	176,725
Average Premium PMPM	\$761	\$801	\$842	\$886	\$932	\$981	\$1,032	\$1,085	\$1,142	\$1,201	\$844	\$967
Average APTC PMPM	\$316	\$345	\$378	\$412	\$449	\$487	\$529	\$572	\$618	\$667	\$379	\$478
Total Individual Market												
Enrollment ¹	252,296	235,023	235,497	234,652	233,904	233,249	232,686	232,210	231,818	231,508	238,275	235,284
Average Premium PMPM	\$772	\$812	\$854	\$898	\$944	\$992	\$1,043	\$1,096	\$1,153	\$1,212	\$855	\$975
Aggregate Premiums (millions)	\$2,336	\$2,291	\$2,414	\$2,528	\$2,649	\$2,777	\$2,912	\$3,055	\$3,206	\$3,366	\$12,219	\$27,537
Projected Federal Spend (millions)	\$659	\$658	\$728	\$800	\$877	\$959	\$1,048	\$1,142	\$1,242	\$1,349	\$3,722	\$9,462
Essential Plan												
Enrollment ¹	1,432,703	1,410,434	1,413,037	1,434,488	1,456,301	1,478,460	1,500,970	1,523,838	1,547,069	1,570,669	1,429,393	1,476,797
Average Premium PMPM	\$629	\$655	\$678	\$703	\$728	\$755	\$783	\$812	\$841	\$873	\$679	\$748
Aggregate Premiums (millions)	\$10,818	\$11,079	\$11,495	\$12,094	\$12,726	\$13,393	\$14,097	\$14,839	\$15,622	\$16,448	\$58,211	\$132,611
IRIP Payment (millions)	\$45	\$63	\$66	\$69	\$72	\$76	\$80	\$83	\$88	\$92	\$315	\$733
Quality Incentive Pool Costs (millions)	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$1,125	\$2,250
LTSS Coverage (millions)	\$0	\$131	\$136	\$143	\$150	\$158	\$167	\$175	\$185	\$194	\$560	\$1,440
SDoH/BH Grant Program (millions)	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$125	\$250
Total Program Costs (millions)	\$11,112	\$11,522	\$11,946	\$12,556	\$13,199	\$13,877	\$14,593	\$15,348	\$16,145	\$16,985	\$60,336	\$137,284
Projected Federal Spend (millions)	\$3,207	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,207	\$3,207
Employer Shared Responsibility Revenue												
Projected Federal Revenue (millions)	(\$1)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$1)	(\$1)
Combined Totals												
Enrollment ¹	1,684,999	1,645,457	1,648,534	1,669,140	1,690,205	1,711,709	1,733,656	1,756,049	1,778,887	1,802,178	1,667,667	1,712,081
Projected Federal Spend (millions)	\$3,866	\$658	\$728	\$800	\$877	\$959	\$1,048	\$1,142	\$1,242	\$1,349	\$6,929	\$12,669

¹ 5- and 10-year totals are straight averages. 2024 enrollment, premium, and APTC amounts reflect the average monthly enrollment for the 12-month period. 2024 amounts in other With Waiver enrollment tables reflect a 9-month average after waiver implementation.

Note: The program investments for Quality Incentive Pool and SDoH/BH Grant Program for 2024 are displayed as total costs over all 12 months. The first 3 months of these amounts would be incurred under the BHP and the last 9 months would be incurred under the 1332 Waiver.

Table B3. With-Waiver PY 2024 Break-Out

	200-250% FPL	All Other FPL	200-250% FPL	All Other FPL
With Waiver - Scenario B	1/1/24-3/31/24		4/1/24-12/31/24	
Unsubsidized On/Off-Exchange				
Enrollment ¹	0	66,122	0	66,122
Average Premium PMPM	\$0	\$802	\$0	\$802
Subsidized On-Exchange				
Enrollment ¹	69,010	168,922	410	168,512
Average Premium PMPM	\$756	\$761	\$756	\$761
Average APTC PMPM	\$332	\$314	\$332	\$314
Total Individual Market				
Enrollment ¹	69,010	235,044	410	234,634
Average Premium PMPM	\$756	\$773	\$756	\$773
Aggregate Premiums (millions)	\$156	\$545	\$3	\$1,632
Projected Federal Spend (millions)	\$64	\$149	\$1	\$445
Essential Plan				
Enrollment ¹	0	1,365,381	89,763	1,365,381
Average Premium PMPM	\$0	\$625	\$718	\$625
Aggregate Premiums (millions)	\$0	\$2,559	\$580	\$7,678
IRIP Payment (millions)		\$0		\$45
Quality Incentive Pool Costs (millions)		\$56		\$169
LTSS Coverage (millions)		\$0		\$0
SDoH/BH Grant Program (millions)		\$6		\$19
Total Program Costs (millions)		\$2,778		\$8,334
Projected Federal Spend (millions)		\$802		\$2,405

Table B4. Baseline Without and With-Waiver Annual Funding Estimates, PY 2024-2033

Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Individual Market										
Without Waiver PTCs	\$832,994,392	\$918,399,798	\$1,012,775,685	\$1,116,643,747	\$1,228,303,323	\$1,348,291,655	\$1,477,182,068	\$1,615,586,375	\$1,764,157,453	\$1,923,591,985
With Waiver PTCs	\$658,913,296	\$657,880,975	\$728,170,345	\$800,128,828	\$877,122,565	\$959,470,503	\$1,047,511,038	\$1,141,603,175	\$1,242,127,769	\$1,349,488,831
Difference	\$174,081,096	\$260,518,823	\$284,605,340	\$316,514,919	\$351,180,758	\$388,821,152	\$429,671,030	\$473,983,199	\$522,029,684	\$574,103,154
Essential Plan										
Without Waiver BHP Funding	\$12,829,257,312	\$12,923,855,551	\$14,026,334,661	\$14,992,400,354	\$16,025,262,078	\$17,129,280,681	\$18,309,357,764	\$19,570,733,177	\$20,919,007,758	\$22,360,168,196
With Waiver BHP Funding	\$3,207,314,328	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Difference	\$9,621,942,984	\$12,923,855,551	\$14,026,334,661	\$14,992,400,354	\$16,025,262,078	\$17,129,280,681	\$18,309,357,764	\$19,570,733,177	\$20,919,007,758	\$22,360,168,196
Employer Shared Responsibility Revenue										
Employer Penalty Loss	(\$2,592,000)	(\$2,970,000)	(\$3,006,000)	(\$3,258,000)	(\$3,746,700)	(\$4,308,705)	(\$4,955,011)	(\$5,698,262)	(\$6,553,002)	(\$7,535,952)
Combined Totals										
Without Waiver Federal Spend	\$13,659,659,705	\$13,839,285,349	\$15,036,104,346	\$16,105,786,101	\$17,249,818,701	\$18,473,263,631	\$19,781,584,821	\$21,180,621,290	\$22,676,612,209	\$24,276,224,229
With Waiver Federal Spend	\$3,866,227,625	\$657,880,975	\$728,170,345	\$800,128,828	\$877,122,565	\$959,470,503	\$1,047,511,038	\$1,141,603,175	\$1,242,127,769	\$1,349,488,831
Total Federal Savings	\$9,793,432,080	\$13,181,404,374	\$14,307,934,001	\$15,305,657,273	\$16,372,696,136	\$17,513,793,128	\$18,734,073,783	\$20,039,018,115	\$21,434,484,440	\$22,926,735,398
Requested Pass-through	\$9,793,432,080	\$13,181,404,374	\$14,307,934,001	\$15,305,657,273	\$16,372,696,136	\$17,513,793,128	\$18,734,073,783	\$20,039,018,115	\$21,434,484,440	\$22,926,735,398
Net Federal Savings	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Combined Totals										
	5-Year Total	10-Year Total								
Without Waiver Federal Spend	\$75,890,654,201	\$182,278,960,380								
With Waiver Federal Spend	\$6,929,530,337	\$12,669,731,653								
Total Federal Savings	\$68,961,123,865	\$169,609,228,728								
Requested Pass-through	\$68,961,123,865	\$169,609,228,728								
Net Federal Savings	\$0	\$0								

Note: for 2024 due to the April 1 implementation date, there will still be 1 quarter of BHP funding compared to the other years of the Waiver.

Table B5. SLCSP Premium Without and With-Waiver by Rating Area, PY 2024 – 2033

Baseline - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Second Lowest Cost Silver Plans (SLCSP) Monthly Premiums</i>										
Rating Area 1	\$599	\$630	\$662	\$697	\$733	\$771	\$811	\$853	\$898	\$945
Rating Area 2	\$512	\$539	\$567	\$596	\$627	\$660	\$694	\$731	\$769	\$808
Rating Area 3	\$744	\$782	\$823	\$866	\$911	\$958	\$1,008	\$1,061	\$1,116	\$1,174
Rating Area 4	\$808	\$850	\$894	\$941	\$990	\$1,041	\$1,095	\$1,152	\$1,212	\$1,275
Rating Area 5	\$600	\$631	\$664	\$699	\$735	\$773	\$813	\$856	\$900	\$947
Rating Area 6	\$617	\$649	\$683	\$718	\$756	\$795	\$836	\$880	\$926	\$974
Rating Area 7	\$612	\$644	\$677	\$712	\$749	\$788	\$829	\$872	\$918	\$965
Rating Area 8	\$775	\$815	\$857	\$902	\$949	\$998	\$1,050	\$1,105	\$1,162	\$1,222
With Waiver - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Second Lowest Cost Silver Plans (SLCSP) Monthly Premiums</i>										
Rating Area 1	\$599	\$630	\$663	\$697	\$733	\$772	\$812	\$854	\$898	\$945
Rating Area 2	\$512	\$539	\$567	\$597	\$628	\$660	\$695	\$731	\$769	\$809
Rating Area 3	\$744	\$783	\$824	\$866	\$911	\$959	\$1,009	\$1,061	\$1,116	\$1,174
Rating Area 4	\$808	\$850	\$895	\$941	\$990	\$1,042	\$1,096	\$1,153	\$1,213	\$1,276
Rating Area 5	\$600	\$632	\$664	\$699	\$735	\$774	\$814	\$856	\$901	\$948
Rating Area 6	\$617	\$649	\$683	\$719	\$756	\$795	\$837	\$880	\$926	\$974
Rating Area 7	\$612	\$644	\$677	\$713	\$750	\$789	\$830	\$873	\$918	\$966
Rating Area 8	\$775	\$815	\$858	\$902	\$949	\$999	\$1,051	\$1,105	\$1,163	\$1,223

Table B6. Baseline Without Average Annual Enrollment by Metal Level, PY 2024 – 2033

Baseline - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,668,073	1,609,554	1,619,155	1,640,369	1,662,067	1,684,232	1,706,864	1,729,969	1,753,548	1,777,606
<i>Unsubsidized On/Off-Exchange Enrollment</i>	66,122	64,435	62,609	60,248	57,976	55,790	53,686	51,662	49,714	47,839
Catastrophic	5,073	5,025	4,981	4,924	4,871	4,822	4,776	4,733	4,694	4,657
Bronze	21,026	20,462	19,850	19,057	18,295	17,560	16,853	16,171	15,515	14,884
Silver	21,525	20,941	20,307	19,485	18,695	17,933	17,200	16,493	15,813	15,158
Gold	10,038	9,771	9,480	9,105	8,743	8,395	8,059	7,736	7,425	7,126
Platinum	8,461	8,236	7,992	7,677	7,373	7,080	6,799	6,528	6,267	6,015
<i>Subsidized On-Exchange Enrollment</i>	236,570	237,659	239,503	241,952	244,435	246,953	249,506	252,095	254,721	257,385
Catastrophic	0	0	0	0	0	0	0	0	0	0
Bronze	88,312	88,718	89,407	90,321	91,248	92,187	93,141	94,107	95,088	96,082
Silver	96,331	96,774	97,525	98,522	99,533	100,559	101,598	102,653	103,722	104,807
Gold	30,993	31,136	31,378	31,698	32,024	32,353	32,688	33,027	33,371	33,720
Platinum	20,934	21,030	21,194	21,410	21,630	21,853	22,079	22,308	22,540	22,776
Essential Plan Enrollment	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382
EP1	573,460	549,133	553,158	562,031	571,056	580,225	589,542	599,009	608,627	618,400
EP2	163,846	156,895	158,045	160,580	163,159	165,779	168,441	171,145	173,894	176,686
EP3	95,577	91,522	92,193	93,672	95,176	96,704	98,257	99,835	101,438	103,067
EP4	532,498	509,910	513,646	521,886	530,266	538,781	547,432	556,222	565,154	574,229

Table B7. With-Waiver Average Annual Enrollment by Metal Level, PY 2024 – 2033

With Waiver - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,690,188	1,645,457	1,648,534	1,669,140	1,690,205	1,711,709	1,733,656	1,756,049	1,778,887	1,802,178
<i>Unsubsidized On/Off-Exchange Enrollment</i>	66,122	64,780	63,298	61,282	59,355	57,513	55,754	54,075	52,471	50,941
Catastrophic	5,073	5,052	5,036	5,009	4,987	4,971	4,960	4,954	4,954	4,959
Bronze	21,026	20,572	20,068	19,384	18,730	18,102	17,502	16,927	16,376	15,849
Silver	21,525	21,053	20,530	19,820	19,139	18,487	17,862	17,264	16,690	16,140
Gold	10,038	9,823	9,585	9,261	8,951	8,654	8,370	8,098	7,837	7,588
Platinum	8,461	8,280	8,080	7,808	7,548	7,299	7,061	6,833	6,614	6,405
<i>Subsidized On-Exchange Enrollment</i>	168,922	170,243	172,199	173,370	174,549	175,736	176,932	178,135	179,347	180,567
Catastrophic	0	0	0	0	0	0	0	0	0	0
Bronze	63,059	63,552	64,282	64,719	65,159	65,602	66,049	66,498	66,950	67,406
Silver	68,785	69,323	70,119	70,596	71,076	71,560	72,046	72,536	73,030	73,527
Gold	22,131	22,304	22,560	22,713	22,868	23,023	23,180	23,338	23,496	23,656
Platinum	14,948	15,065	15,238	15,342	15,446	15,551	15,657	15,763	15,870	15,978
Essential Plan Enrollment	1,455,144	1,410,434	1,413,037	1,434,488	1,456,301	1,478,460	1,500,970	1,523,838	1,547,069	1,570,669
EP1	573,460	549,133	553,158	562,031	571,056	580,225	589,542	599,009	608,627	618,400
EP2	163,846	156,895	158,045	160,580	163,159	165,779	168,441	171,145	173,894	176,686
EP3	95,577	91,522	92,193	93,672	95,176	96,704	98,257	99,835	101,438	103,067
EP4	532,498	509,910	513,646	521,886	530,266	538,781	547,432	556,222	565,154	574,229
QHP 200%-250% FPL Population	89,763	102,973	95,995	96,319	96,645	96,971	97,298	97,627	97,957	98,288

Note: This table displays the With Waiver amounts as 9-month averages for 2024, since the first year of the waiver will only contain 9 months. There is an increase from the WoW scenario (~0.6% in total) for the on-exchange Unsubsidized and Subsidized population with incomes above 250% of the FPL. This is due to increased awareness, concentrated advertisement, and outreach activities with the implementation of the waiver.

Table B8. Baseline Without-Waiver Average Annual Enrollment by FPL, PY 2024 – 2033

Baseline - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,668,073	1,609,554	1,619,155	1,640,369	1,662,067	1,684,232	1,706,864	1,729,969	1,753,548	1,777,606
Unsubsidized On/Off-Exchange Enrollment	66,122	64,435	62,609	60,248	57,976	55,790	53,686	51,662	49,714	47,839
Below 400%	0	0	0	0	0	0	0	0	0	0
401% - 500%	0	0	0	0	0	0	0	0	0	0
501% - 600%	0	0	0	0	0	0	0	0	0	0
Over 600%	7,685	7,755	7,824	7,529	7,245	6,972	6,709	6,456	6,213	5,979
Do Not Report	58,437	56,680	54,785	52,719	50,731	48,818	46,977	45,206	43,501	41,861
Subsidized On-Exchange Enrollment	236,570	237,659	239,503	241,952	244,435	246,953	249,506	252,095	254,721	257,385
Below 139%	7,523	7,558	7,617	7,694	7,773	7,853	7,935	8,017	8,101	8,185
139% - 150%	288	290	292	295	298	301	304	307	310	314
151% - 200%	1,757	1,765	1,779	1,797	1,816	1,834	1,853	1,873	1,892	1,912
201% - 250%	69,010	69,122	69,500	69,870	70,241	70,615	70,990	71,368	71,748	72,129
251% - 300%	54,227	54,547	55,024	55,704	56,394	57,095	57,807	58,530	59,265	60,011
301% - 350%	40,022	40,258	40,610	41,112	41,621	42,139	42,664	43,198	43,740	44,291
351% - 400%	26,047	26,201	26,430	26,756	27,088	27,425	27,767	28,114	28,467	28,825
401% - 500%	21,502	21,629	21,818	22,088	22,362	22,640	22,922	23,209	23,500	23,796
501% - 600%	9,595	9,652	9,736	9,856	9,978	10,102	10,228	10,356	10,486	10,618
Over 600%	6,599	6,638	6,696	6,779	6,863	6,948	7,035	7,123	7,213	7,303
Essential Plan Enrollment	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382
Below 150%	442,298	444,312	453,719	462,398	471,247	480,267	489,462	498,834	508,388	518,126
Over 151%	923,082	863,149	863,323	875,770	888,409	901,221	914,210	927,377	940,725	954,255

Table B9. With-Waiver PY Average Annual Enrollment by FPL, PY 2024 – 2033

With Waiver - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,690,188	1,645,457	1,648,534	1,669,140	1,690,205	1,711,709	1,733,656	1,756,049	1,778,887	1,802,178
Unsubsidized On/Off-Exchange Enrollment	66,122	64,780	63,298	61,282	59,355	57,513	55,754	54,075	52,471	50,941
Below 400% ²	0	0	0	0	0	0	0	0	0	0
401% - 500% ²	0	0	0	0	0	0	0	0	0	0
501% - 600% ²	0	0	0	0	0	0	0	0	0	0
Over 600% ²	7,736	7,823	7,910	7,658	7,418	7,187	6,968	6,758	6,557	6,366
Do Not Report ²	58,386	56,957	55,388	53,624	51,937	50,326	48,786	47,317	45,914	44,575
Subsidized On-Exchange Enrollment	168,922	170,243	172,199	173,370	174,549	175,736	176,932	178,135	179,347	180,567
Below 139% ¹	7,490	7,548	7,635	7,687	7,739	7,792	7,845	7,898	7,952	8,006
139% - 150% ¹	287	289	293	295	297	299	301	303	305	307
151% - 200% ¹	1,750	1,763	1,783	1,796	1,808	1,820	1,832	1,845	1,857	1,870
201% - 250%	410	413	418	420	423	426	429	432	435	438
251% - 300% ²	54,568	54,995	55,627	56,005	56,386	56,769	57,155	57,544	57,936	58,330
301% - 350% ²	40,274	40,589	41,055	41,334	41,615	41,898	42,183	42,470	42,759	43,050
351% - 400% ²	26,211	26,416	26,719	26,901	27,084	27,268	27,454	27,640	27,828	28,018
401% - 500% ²	21,637	21,807	22,057	22,207	22,358	22,510	22,663	22,818	22,973	23,129
501% - 600% ²	9,655	9,731	9,843	9,910	9,977	10,045	10,113	10,182	10,251	10,321
Over 600% ²	6,641	6,693	6,770	6,816	6,862	6,909	6,956	7,003	7,051	7,099
Essential Plan Enrollment	1,455,144	1,410,434	1,413,037	1,434,488	1,456,301	1,478,460	1,500,970	1,523,838	1,547,069	1,570,669
Below 150%	791,921	758,327	763,884	776,138	788,601	801,264	814,130	827,203	840,485	853,981
151% - 200%	573,460	549,133	553,158	562,031	571,056	580,225	589,542	599,009	608,627	618,400
Over 201%	89,763	102,973	95,995	96,319	96,645	96,971	97,298	97,627	97,957	98,288

¹ The decrease in enrollment from the WoW scenario (~0.4% in total) is due to the methodology for allocating estimated enrollment by income and does not reflect any changes in eligibility for this population that would cause consumers below 200% of FPL to lose coverage.

² There is an increase from the WoW scenario (~0.6% in total) for the on-exchange Unsubsidized and Subsidized population with incomes above 250% of the FPL. This is due to increased awareness, concentrated advertisement, and outreach activities with the implementation of the waiver.

Note: This table displays the With Waiver amounts as 9-month averages for 2024, since the first year of the waiver will only contain 9 months.

Table B10. Without and With-Waiver Monthly Federal Funding PMPM by Metal Level and Rate Cohort

Without Waiver - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Exchange Subsidized APTCs	\$314	\$345	\$378	\$412	\$449	\$487	\$529	\$572	\$618	\$667
Bronze	\$289	\$313	\$339	\$366	\$395	\$425	\$457	\$491	\$528	\$566
Silver	\$365	\$398	\$432	\$469	\$507	\$548	\$591	\$637	\$686	\$737
Gold	\$281	\$317	\$356	\$397	\$441	\$488	\$538	\$590	\$646	\$706
Platinum	\$237	\$278	\$322	\$368	\$418	\$471	\$527	\$586	\$650	\$717
Essential Plan BHP Funding	\$783	\$824	\$887	\$934	\$982	\$1,033	\$1,087	\$1,144	\$1,203	\$1,266
EP1	\$704	\$741	\$798	\$840	\$883	\$929	\$977	\$1,028	\$1,082	\$1,138
EP2	\$771	\$811	\$874	\$920	\$967	\$1,018	\$1,071	\$1,126	\$1,185	\$1,246
EP3	\$835	\$878	\$946	\$995	\$1,047	\$1,102	\$1,159	\$1,219	\$1,282	\$1,349
EP4	\$862	\$907	\$977	\$1,028	\$1,082	\$1,138	\$1,197	\$1,259	\$1,325	\$1,394
With Waiver - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Exchange Subsidized APTCs	\$314	\$345	\$378	\$412	\$449	\$487	\$529	\$572	\$618	\$667
Bronze	\$289	\$313	\$339	\$366	\$395	\$425	\$457	\$491	\$528	\$566
Silver	\$365	\$398	\$432	\$469	\$507	\$548	\$591	\$637	\$686	\$737
Gold	\$281	\$317	\$356	\$397	\$441	\$488	\$538	\$590	\$646	\$706
Platinum	\$237	\$278	\$322	\$368	\$418	\$471	\$527	\$586	\$650	\$717
Essential Plan BHP Funding	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP1	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP2	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP3	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP4	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
QHP 200%-250% FPL Population	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table B11. Without and With Waiver - 5-Year Enrollment, Premium, and Federal Deficit Estimates, PY 2024 – 2033

Without Waiver - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Unsubsidized On-exchange & Off-exchange Enrollment</i>	66,122	64,435	62,609	60,248	57,976	55,790	53,686	51,662	49,714	47,839
Below 400%	0	0	0	0	0	0	0	0	0	0
401% - 500%	0	0	0	0	0	0	0	0	0	0
501% - 600%	0	0	0	0	0	0	0	0	0	0
Over 600%	7,685	7,755	7,824	7,529	7,245	6,972	6,709	6,456	6,213	5,979
Do Not Report	58,437	56,680	54,785	52,719	50,731	48,818	46,977	45,206	43,501	41,861
<i>Unsubsidized On-exchange Enrollment</i>	16,531	16,109	15,652	15,062	14,494	13,948	13,422	12,915	12,428	11,960
<i>Off-exchange Enrollment</i>	49,592	48,326	46,957	45,186	43,482	41,843	40,265	38,746	37,285	35,879
With Waiver - Scenario B	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Unsubsidized On-exchange & Off-exchange Enrollment</i>	66,122	64,780	63,298	61,282	59,355	57,513	55,754	54,075	52,471	50,941
Below 400%	0	0	0	0	0	0	0	0	0	0
401% - 500%	0	0	0	0	0	0	0	0	0	0
501% - 600%	0	0	0	0	0	0	0	0	0	0
Over 600%	7,736	7,823	7,910	7,658	7,418	7,187	6,968	6,758	6,557	6,366
Do Not Report	58,386	56,957	55,388	53,624	51,937	50,326	48,786	47,317	45,914	44,575
<i>Unsubsidized On-exchange & Off-exchange Premium Increase (Annual)</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<i>Unsubsidized On-exchange Enrollment</i>	16,531	16,195	15,825	15,321	14,839	14,378	13,939	13,519	13,118	12,735
<i>Unsubsidized On-exchange Premium Increase (Annual)</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<i>Off-exchange Enrollment</i>	49,592	48,585	47,474	45,962	44,516	43,135	41,816	40,556	39,353	38,206
<i>Off-exchange Premium Increase (Annual)</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Note: Due to IRIP, there are no expected increases of premiums for consumers that remain in the individual market compared to Without Waiver.

Note: There is an increase from the WoW scenario (~0.6% in total) for the on-exchange Unsubsidized and Subsidized population with incomes above 250% of the FPL. This is due to increased awareness, concentrated advertisement, and outreach activities with the implementation of the Waiver.

Table B12. Without and With-Waiver Annual Out-of-Pocket Expenses by FPL, PY 2024 – 2033

Without Waiver - Scenario B - FPL	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
<i>Exchange - Annual Out-of-Pocket Expenses - FPL</i>												
Below 250%	\$2,751	\$2,895	\$3,043	\$3,199	\$3,363	\$3,535	\$3,716	\$3,906	\$4,106	\$4,317	\$3,052	\$3,491
251% - 300%	\$2,643	\$2,781	\$2,924	\$3,073	\$3,230	\$3,396	\$3,570	\$3,753	\$3,945	\$4,147	\$2,933	\$3,362
301% - 350%	\$2,641	\$2,778	\$2,921	\$3,070	\$3,227	\$3,392	\$3,566	\$3,749	\$3,941	\$4,143	\$2,930	\$3,359
351% - 400%	\$2,653	\$2,791	\$2,934	\$3,085	\$3,243	\$3,409	\$3,583	\$3,767	\$3,960	\$4,163	\$2,944	\$3,375
401% - 500%	\$2,672	\$2,811	\$2,955	\$3,106	\$3,265	\$3,432	\$3,608	\$3,793	\$3,987	\$4,192	\$2,965	\$3,398
501% - 600%	\$2,686	\$2,826	\$2,971	\$3,123	\$3,283	\$3,451	\$3,628	\$3,814	\$4,010	\$4,215	\$2,981	\$3,417
Over 600%/Do Not Report	\$2,742	\$2,885	\$3,033	\$3,188	\$3,351	\$3,523	\$3,703	\$3,893	\$4,092	\$4,302	\$3,031	\$3,426
<i>Essential Plan - Annual Out-of-Pocket Expenses - FPL</i>												
Below 150%	\$9	\$10	\$10	\$11	\$11	\$11	\$12	\$12	\$13	\$13	\$10	\$11
Over 151%	\$139	\$145	\$150	\$156	\$163	\$169	\$176	\$183	\$190	\$198	\$151	\$167
With Waiver - Scenario B - FPL	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
<i>Exchange - Annual Out-of-Pocket Expenses - FPL</i>												
Below 250%	\$2,757	\$2,901	\$3,049	\$3,206	\$3,370	\$3,542	\$3,724	\$3,914	\$4,115	\$4,326	\$3,059	\$3,501
251% - 300%	\$2,648	\$2,785	\$2,928	\$3,078	\$3,236	\$3,401	\$3,576	\$3,759	\$3,951	\$4,154	\$2,937	\$3,362
301% - 350%	\$2,645	\$2,782	\$2,925	\$3,075	\$3,232	\$3,398	\$3,572	\$3,755	\$3,947	\$4,150	\$2,934	\$3,358
351% - 400%	\$2,657	\$2,795	\$2,939	\$3,089	\$3,247	\$3,414	\$3,589	\$3,772	\$3,966	\$4,169	\$2,948	\$3,374
401% - 500%	\$2,676	\$2,815	\$2,959	\$3,111	\$3,270	\$3,438	\$3,614	\$3,799	\$3,994	\$4,198	\$2,969	\$3,397
501% - 600%	\$2,691	\$2,830	\$2,976	\$3,128	\$3,288	\$3,457	\$3,634	\$3,820	\$4,016	\$4,221	\$2,985	\$3,416
Over 600%/Do Not Report	\$2,746	\$2,889	\$3,037	\$3,192	\$3,356	\$3,528	\$3,708	\$3,898	\$4,098	\$4,308	\$3,037	\$3,439
<i>Essential Plan - Annual Out-of-Pocket Expenses - FPL</i>												
Below 150%	\$9	\$10	\$10	\$11	\$11	\$11	\$12	\$12	\$13	\$13	\$10	\$11
151% - 200%	\$139	\$145	\$150	\$156	\$163	\$169	\$176	\$183	\$190	\$198	\$151	\$168
Over 201%	\$238	\$247	\$257	\$267	\$278	\$289	\$301	\$313	\$325	\$338	\$257	\$286

Table B13. Without and With-Waiver Annual Out-of-Pocket Expenses by Age, PY 2024 – 2033

Without Waiver - Scenario B - Age	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
Exchange - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$1,131	\$1,190	\$1,251	\$1,315	\$1,383	\$1,453	\$1,528	\$1,606	\$1,688	\$1,775	\$1,254	\$1,432
21 - 25 Years	\$1,126	\$1,184	\$1,245	\$1,309	\$1,376	\$1,446	\$1,520	\$1,598	\$1,680	\$1,766	\$1,248	\$1,425
26 - 30 Years	\$1,459	\$1,534	\$1,613	\$1,696	\$1,783	\$1,874	\$1,970	\$2,071	\$2,177	\$2,289	\$1,617	\$1,847
31 - 35 Years	\$1,783	\$1,876	\$1,972	\$2,073	\$2,179	\$2,291	\$2,408	\$2,531	\$2,661	\$2,797	\$1,976	\$2,257
36 - 40 Years	\$1,960	\$2,062	\$2,168	\$2,279	\$2,396	\$2,518	\$2,647	\$2,783	\$2,926	\$3,076	\$2,173	\$2,482
41 - 45 Years	\$2,186	\$2,299	\$2,417	\$2,541	\$2,671	\$2,808	\$2,952	\$3,103	\$3,262	\$3,429	\$2,423	\$2,767
46 - 50 Years	\$2,578	\$2,712	\$2,851	\$2,997	\$3,151	\$3,312	\$3,482	\$3,660	\$3,848	\$4,045	\$2,858	\$3,264
51 - 55 Years	\$3,180	\$3,346	\$3,517	\$3,697	\$3,887	\$4,086	\$4,295	\$4,515	\$4,746	\$4,990	\$3,525	\$4,026
56 - 60 Years	\$3,896	\$4,098	\$4,309	\$4,529	\$4,761	\$5,005	\$5,261	\$5,531	\$5,814	\$6,112	\$4,319	\$4,932
61 - 65 Years	\$4,802	\$5,052	\$5,311	\$5,583	\$5,869	\$6,169	\$6,485	\$6,818	\$7,167	\$7,535	\$5,323	\$6,079
Essential Plan - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$45	\$47	\$48	\$50	\$52	\$54	\$57	\$59	\$61	\$64	\$49	\$54
21 - 25 Years	\$45	\$46	\$48	\$50	\$52	\$54	\$56	\$59	\$61	\$63	\$48	\$54
26 - 30 Years	\$58	\$60	\$62	\$65	\$68	\$70	\$73	\$76	\$79	\$82	\$63	\$69
31 - 35 Years	\$71	\$73	\$76	\$79	\$83	\$86	\$89	\$93	\$97	\$100	\$76	\$85
36 - 40 Years	\$78	\$81	\$84	\$87	\$91	\$94	\$98	\$102	\$106	\$110	\$84	\$93
41 - 45 Years	\$87	\$90	\$94	\$97	\$101	\$105	\$109	\$114	\$118	\$123	\$94	\$104
46 - 50 Years	\$102	\$106	\$110	\$115	\$119	\$124	\$129	\$134	\$140	\$145	\$111	\$123
51 - 55 Years	\$126	\$131	\$136	\$142	\$147	\$153	\$159	\$166	\$172	\$179	\$136	\$151
56 - 60 Years	\$154	\$160	\$167	\$174	\$180	\$188	\$195	\$203	\$211	\$220	\$167	\$185
61 - 65 Years	\$190	\$198	\$206	\$214	\$222	\$231	\$241	\$250	\$260	\$271	\$206	\$228
With Waiver - Scenario B - Age												
Exchange - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$1,126	\$1,185	\$1,246	\$1,310	\$1,377	\$1,447	\$1,521	\$1,599	\$1,681	\$1,767	\$1,249	\$1,426
21 - 25 Years	\$1,121	\$1,179	\$1,240	\$1,303	\$1,370	\$1,440	\$1,514	\$1,591	\$1,673	\$1,759	\$1,243	\$1,419
26 - 30 Years	\$1,453	\$1,528	\$1,606	\$1,689	\$1,775	\$1,866	\$1,962	\$2,062	\$2,168	\$2,279	\$1,610	\$1,839
31 - 35 Years	\$1,775	\$1,868	\$1,964	\$2,064	\$2,170	\$2,281	\$2,398	\$2,521	\$2,650	\$2,786	\$1,968	\$2,248
36 - 40 Years	\$1,952	\$2,054	\$2,159	\$2,269	\$2,386	\$2,508	\$2,636	\$2,771	\$2,913	\$3,063	\$2,164	\$2,471
41 - 45 Years	\$2,176	\$2,290	\$2,407	\$2,530	\$2,660	\$2,796	\$2,939	\$3,090	\$3,248	\$3,415	\$2,413	\$2,755
46 - 50 Years	\$2,567	\$2,701	\$2,839	\$2,985	\$3,137	\$3,298	\$3,467	\$3,645	\$3,831	\$4,028	\$2,846	\$3,250
51 - 55 Years	\$3,167	\$3,331	\$3,502	\$3,682	\$3,870	\$4,068	\$4,277	\$4,496	\$4,726	\$4,969	\$3,511	\$4,009
56 - 60 Years	\$3,879	\$4,081	\$4,291	\$4,510	\$4,741	\$4,984	\$5,239	\$5,508	\$5,790	\$6,087	\$4,300	\$4,911
61 - 65 Years	\$4,782	\$5,031	\$5,289	\$5,560	\$5,844	\$6,143	\$6,458	\$6,789	\$7,137	\$7,503	\$5,301	\$6,054
Essential Plan - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$49	\$51	\$53	\$55	\$57	\$59	\$62	\$64	\$67	\$69	\$53	\$59
21 - 25 Years	\$48	\$50	\$52	\$55	\$57	\$59	\$61	\$64	\$66	\$69	\$53	\$58
26 - 30 Years	\$63	\$65	\$68	\$71	\$74	\$76	\$80	\$83	\$86	\$89	\$68	\$75
31 - 35 Years	\$77	\$80	\$83	\$86	\$90	\$93	\$97	\$101	\$105	\$109	\$83	\$92
36 - 40 Years	\$84	\$88	\$91	\$95	\$99	\$103	\$107	\$111	\$116	\$120	\$91	\$101
41 - 45 Years	\$94	\$98	\$102	\$106	\$110	\$115	\$119	\$124	\$129	\$134	\$102	\$113
46 - 50 Years	\$111	\$115	\$120	\$125	\$130	\$135	\$141	\$146	\$152	\$158	\$120	\$133
51 - 55 Years	\$137	\$142	\$148	\$154	\$160	\$167	\$173	\$180	\$187	\$195	\$148	\$164
56 - 60 Years	\$168	\$175	\$182	\$189	\$196	\$204	\$212	\$221	\$230	\$239	\$182	\$201
61 - 65 Years	\$207	\$215	\$224	\$233	\$242	\$252	\$262	\$272	\$283	\$294	\$224	\$248

Table B14. Without and With-Waiver Annual Enrollment by Age, PY 2024 – 2033

Without Waiver - Scenario B - Age	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
Exchange - Enrollment - Age												
Total Enrollment	302,692	302,094	302,112	302,200	302,411	302,743	303,192	303,757	304,435	305,224	302,302	303,086
00 - 20 Years	22,981	22,874	22,804	22,718	22,643	22,580	22,528	22,487	22,457	22,437	22,804	22,651
21 - 25 Years	16,810	16,768	16,758	16,749	16,748	16,753	16,765	16,784	16,810	16,842	16,767	16,779
26 - 30 Years	25,800	25,777	25,813	25,864	25,924	25,994	26,072	26,160	26,256	26,361	25,836	26,002
31 - 35 Years	26,063	26,058	26,114	26,193	26,280	26,376	26,481	26,593	26,714	26,843	26,142	26,372
36 - 40 Years	23,972	23,964	24,011	24,077	24,151	24,234	24,324	24,422	24,528	24,642	24,035	24,233
41 - 45 Years	23,948	23,932	23,970	24,025	24,089	24,160	24,240	24,328	24,424	24,528	23,993	24,165
46 - 50 Years	26,738	26,708	26,736	26,779	26,832	26,895	26,967	27,048	27,139	27,239	26,759	26,908
51 - 55 Years	34,911	34,845	34,851	34,866	34,896	34,939	34,995	35,065	35,148	35,243	34,874	34,976
56 - 60 Years	47,162	47,035	46,997	46,959	46,941	46,942	46,964	47,005	47,064	47,142	47,019	47,021
61 - 65 Years	49,962	49,797	49,722	49,636	49,572	49,531	49,512	49,514	49,537	49,580	49,738	49,636
65+ Years	4,346	4,336	4,335	4,334	4,335	4,338	4,343	4,349	4,357	4,367	4,337	4,344
Essential Plan - Enrollment - Age												
Total Enrollment	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382	1,337,542	1,382,057
00 - 20 Years	22,968	21,994	22,155	22,511	22,872	23,239	23,612	23,992	24,377	24,768	22,500	23,249
21 - 25 Years	133,178	127,528	128,463	130,524	132,620	134,749	136,913	139,111	141,345	143,615	130,463	134,805
26 - 30 Years	185,132	177,279	178,578	181,442	184,356	187,316	190,324	193,380	196,485	199,640	181,357	187,393
31 - 35 Years	174,980	167,557	168,785	171,492	174,246	177,044	179,887	182,775	185,710	188,692	171,412	177,117
36 - 40 Years	164,741	157,753	158,909	161,458	164,051	166,685	169,362	172,081	174,844	177,652	161,382	166,754
41 - 45 Years	158,981	152,237	153,353	155,812	158,314	160,857	163,439	166,064	168,730	171,440	155,739	160,923
46 - 50 Years	149,534	143,191	144,240	146,554	148,907	151,298	153,727	156,196	158,704	161,252	146,485	151,360
51 - 55 Years	143,638	137,545	138,553	140,775	143,036	145,332	147,666	150,037	152,446	154,894	140,709	145,392
56 - 60 Years	136,399	130,613	131,570	133,680	135,827	138,008	140,224	142,475	144,763	147,088	133,618	138,065
61 - 65 Years	95,830	91,765	92,437	93,920	95,428	96,961	98,518	100,100	101,707	103,340	93,876	97,001
65+ Years	-	-	-	-	-	-	-	-	-	-	-	-
With Waiver - Scenario B - Age												
Exchange - Enrollment - Age												
Total Enrollment	235,044	235,023	235,497	234,652	233,904	233,249	232,686	232,210	231,818	231,508	234,824	233,559
00 - 20 Years	20,741	20,691	20,677	20,554	20,441	20,337	20,243	20,158	20,082	20,014	20,621	20,394
21 - 25 Years	12,419	12,409	12,422	12,361	12,305	12,255	12,210	12,171	12,136	12,107	12,383	12,279
26 - 30 Years	16,894	16,912	16,966	16,912	16,865	16,825	16,791	16,764	16,742	16,727	16,910	16,840
31 - 35 Years	18,804	18,840	18,923	18,900	18,882	18,871	18,866	18,867	18,873	18,884	18,870	18,871
36 - 40 Years	17,352	17,382	17,454	17,428	17,408	17,394	17,385	17,381	17,383	17,390	17,405	17,396
41 - 45 Years	17,652	17,676	17,742	17,709	17,682	17,661	17,645	17,636	17,632	17,634	17,692	17,667
46 - 50 Years	20,384	20,402	20,466	20,418	20,377	20,343	20,317	20,297	20,284	20,277	20,409	20,357
51 - 55 Years	27,411	27,412	27,472	27,380	27,300	27,229	27,170	27,120	27,080	27,049	27,395	27,262
56 - 60 Years	38,281	38,250	38,297	38,132	37,984	37,851	37,735	37,633	37,546	37,473	38,189	37,918
61 - 65 Years	40,741	40,683	40,701	40,491	40,300	40,127	39,972	39,834	39,712	39,606	40,583	40,217
65+ Years	4,365	4,365	4,376	4,368	4,361	4,356	4,351	4,349	4,347	4,347	4,367	4,359
Essential Plan - Enrollment - Age												
Total Enrollment	1,455,144	1,410,434	1,413,037	1,434,488	1,456,301	1,478,460	1,500,970	1,523,838	1,547,069	1,570,669	1,433,881	1,479,041
00 - 20 Years	25,649	24,899	24,949	25,316	25,689	26,069	26,454	26,845	27,242	27,645	25,301	26,076
21 - 25 Years	139,667	135,303	135,544	137,624	139,740	141,889	144,072	146,290	148,544	150,833	137,576	141,951
26 - 30 Years	196,973	190,911	191,262	194,169	197,124	200,127	203,178	206,276	209,425	212,623	194,088	200,207
31 - 35 Years	185,025	179,293	179,618	182,360	185,147	187,979	190,856	193,779	196,748	199,764	182,289	188,057
36 - 40 Years	173,981	168,584	168,889	171,469	174,092	176,757	179,465	182,215	185,009	187,848	171,403	176,831
41 - 45 Years	167,807	162,598	162,893	165,382	167,913	170,484	173,096	175,750	178,446	181,185	165,319	170,555
46 - 50 Years	158,285	153,386	153,666	156,009	158,392	160,813	163,273	165,771	168,309	170,888	155,948	160,879
51 - 55 Years	153,478	148,776	149,052	151,310	153,607	155,940	158,311	160,719	163,165	165,650	151,245	156,001
56 - 60 Years	147,559	143,096	143,368	145,523	147,713	149,939	152,200	154,496	156,829	159,199	145,452	149,992
61 - 65 Years	106,719	103,589	103,797	105,327	106,882	108,462	110,067	111,697	113,353	115,035	105,263	108,493
65+ Years	-	-	-	-	-	-	-	-	-	-	-	-

Updated Appendix C: Scenario C Detailed 10-Year Estimates (Pregnancy Choice, Current Law & Insurer Reimbursement)

The following provides an analysis of the proposed 1332 Waiver under current law for expansion to consumers with incomes between 200 – 250% of the FPL and with the policy of allowing pregnant individuals to remain in the With-Waiver Essential Plan. The analysis estimates that the proposed Waiver meets each of the four guardrails for the five years of the Waiver and 10-year analysis.

Table C1. Scenario C High-Level Guardrail Compliance of 1332 Waiver

Guardrail	Estimated Impact With-Waiver (WW) Compared to Without-Waiver (WoW)
Comprehensiveness	<p>The Waiver is projected to meet the comprehensiveness guardrail as consumers have access to more comprehensive coverage compared to the Baseline Without-Waiver Scenario.</p> <ul style="list-style-type: none"> • Consumers with incomes between 200–250% of the FPL will experience an increase in comprehensiveness. • There are no expected impacts for other consumers in the individual market. • There are no expected impacts for other consumers in the Essential Plan.
Affordability	<p>The Waiver is projected to meet the affordability guardrail as the affordability across the market is improved compared to the Baseline Without-Waiver Scenario.</p> <ul style="list-style-type: none"> • Affordability for current Essential Plan members is not expected to change. • Affordability for consumers with incomes between 200–250% of the FPL is expected to improve under the Waiver for an aggregate savings of \$1.5 billion over the 5 years. <ul style="list-style-type: none"> ◦ This is an average annual savings of \$4,700 under the Waiver (\$2,300 in premiums and \$2,400 in out-of-pocket spend), which is approximately 12% of income for consumers 200 – 250% of the FPL. • Affordability for subsidized On-Exchange consumers is not expected to change under the Waiver. • Affordability for subsidy-ineligible On-Exchange consumers and Off-Exchange consumers is also not expected to change under the Waiver, as premiums will be calculated at without-waiver levels as part of the insurer reimbursement program.
Coverage	<p>The Waiver is projected to meet the coverage guardrail as more consumers are expected to enroll in coverage compared to the Baseline Without-Waiver Scenario.</p> <ul style="list-style-type: none"> • Overall enrollment for the Essential Plan and individual market is expected to increase by a combined 1.3% for PY 2024, 3.0% for PY 2025, 3.1% for PY 2026, 3.0% for PY 2027, and 3.0% for PY 2028. • Individuals who become pregnant may opt to remain in the Essential Plan, this is estimated to increase enrollment by 4,118 (average monthly enrollment over the 9 months of implementation) for 2024, 12,098 for 2025, 14,245 for 2026, 14,530 for 2027, and 14,820 for 2028.
Deficit Neutrality	<p>The Waiver is projected to meet the deficit neutrality guardrail and generate savings for the federal government.</p> <ul style="list-style-type: none"> • The federal spend under the Waiver is estimated to decrease by \$9.8 billion in PY 2024 (which reflects the impact of the April 1, 2023 implementation date) and \$66.2 billion over the 5-year Waiver period, before pass-through funding. • The net federal spend under the waiver is estimated to decrease by \$22.5 million in PY 2024 and \$442.2 million over the 5-year waiver period, after accounting for pass-through funding.

Table C2. Baseline Without-Waiver Summary of Enrollment, Premium, and Cost Estimates, PY 2024-2033

Baseline - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5-Year Total	10-Year Total
Unsubsidized On/Off-Exchange												
Enrollment ¹	66,122	64,435	124,043	123,236	122,435	121,639	120,849	120,063	119,283	118,507	100,054	110,061
Average Premium PMPM	\$802	\$843	\$868	\$913	\$961	\$1,011	\$1,063	\$1,118	\$1,176	\$1,237	\$890	\$1,016
Subsidized On-Exchange												
Enrollment ¹	236,570	237,659	149,369	150,356	151,349	152,348	153,354	154,367	155,387	156,413	185,061	169,717
Average Premium PMPM	\$761	\$801	\$842	\$886	\$932	\$981	\$1,032	\$1,085	\$1,142	\$1,201	\$833	\$949
Average APTC PMPM	\$314	\$345	\$325	\$358	\$394	\$432	\$472	\$514	\$559	\$607	\$344	\$423
Total Individual Market												
Enrollment ¹	302,692	302,094	273,412	273,592	273,784	273,988	274,203	274,430	274,670	274,920	285,115	279,779
Average Premium PMPM	\$770	\$810	\$854	\$898	\$945	\$994	\$1,046	\$1,100	\$1,157	\$1,217	\$853	\$975
Aggregate Premiums (millions)	\$2,798	\$2,936	\$2,802	\$2,950	\$3,105	\$3,268	\$3,440	\$3,622	\$3,813	\$4,014	\$14,590	\$32,747
Projected Federal Spend (millions)	\$833	\$918	\$544	\$604	\$668	\$737	\$810	\$889	\$973	\$1,063	\$3,567	\$8,039
Essential Plan												
Enrollment ¹	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382	1,337,542	1,382,057
Average Premium PMPM	\$625	\$647	\$671	\$695	\$720	\$747	\$774	\$803	\$832	\$863	\$672	\$740
Aggregate Premiums (millions)	\$10,237	\$10,156	\$10,601	\$11,162	\$11,755	\$12,380	\$13,041	\$13,738	\$14,474	\$15,251	\$53,912	\$122,796
Quality Incentive Pool Costs (millions)	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$1,125	\$2,250
LTSS Coverage (millions)	\$0	\$131	\$137	\$144	\$152	\$160	\$168	\$177	\$187	\$197	\$563	\$1,451
SDoH/BH Grant Program (millions)	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$125	\$250
Total Program Costs (millions)	\$10,487	\$10,537	\$10,988	\$11,556	\$12,156	\$12,790	\$13,459	\$14,165	\$14,911	\$15,698	\$55,725	\$126,747
Projected Federal Spend (millions)	\$12,829	\$12,924	\$13,126	\$14,030	\$14,997	\$16,030	\$17,134	\$18,315	\$19,577	\$20,925	\$67,907	\$159,888
Other Federal Spend/Revenue												
Pregnancy Medicaid Spend (millions)	\$25	\$89	\$101	\$108	\$115	\$124	\$133	\$142	\$152	\$161	\$438	\$1,149
ESRP Revenue (millions)	(\$3)	(\$3)	(\$3)	(\$3)	(\$4)	(\$4)	(\$5)	(\$6)	(\$7)	(\$8)	(\$16)	(\$45)
Combined Totals												
Enrollment ¹	1,668,073	1,609,554	1,590,454	1,611,761	1,633,440	1,655,476	1,677,875	1,700,642	1,723,782	1,747,302	1,622,657	1,661,836
Projected Federal Spend (millions)	\$13,685	\$13,928	\$13,768	\$14,739	\$15,776	\$16,886	\$18,072	\$19,340	\$20,695	\$22,142	\$71,896	\$169,032

¹5- and 10-year totals are straight averages.

Table C3. With-Waiver Summary of Enrollment, Premium, and Cost Estimates, PY 2024-2033

With Waiver - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5-Year Total	10-Year Total
Unsubsidized On/Off-Exchange												
Enrollment ¹	66,122	64,587	124,347	123,692	123,043	122,399	121,761	121,127	120,499	119,875	100,358	110,745
Average Premium PMPM	\$802	\$843	\$868	\$913	\$961	\$1,010	\$1,063	\$1,118	\$1,176	\$1,237	\$890	\$1,016
Subsidized On-Exchange												
Enrollment ¹	186,174	170,243	87,405	87,979	88,556	89,138	89,724	90,313	90,906	91,503	124,071	107,194
Average Premium PMPM	\$761	\$801	\$842	\$886	\$932	\$981	\$1,032	\$1,085	\$1,142	\$1,201	\$826	\$937
Average APTC PMPM	\$316	\$345	\$325	\$358	\$394	\$432	\$472	\$514	\$559	\$607	\$342	\$416
Total Individual Market												
Enrollment ¹	252,296	234,830	211,752	211,671	211,599	211,537	211,485	211,440	211,405	211,378	224,430	217,939
Average Premium PMPM	\$772	\$812	\$858	\$902	\$949	\$998	\$1,050	\$1,104	\$1,161	\$1,221	\$854	\$977
Aggregate Premiums (millions)	\$2,336	\$2,289	\$2,179	\$2,291	\$2,409	\$2,533	\$2,664	\$2,801	\$2,946	\$3,098	\$11,505	\$25,547
Projected Federal Spend (millions)	\$659	\$658	\$318	\$353	\$391	\$431	\$474	\$520	\$569	\$622	\$2,379	\$4,996
Essential Plan												
Enrollment ¹	1,436,781	1,422,531	1,427,282	1,449,018	1,471,121	1,493,577	1,516,390	1,539,566	1,563,111	1,587,032	1,441,347	1,490,641
Average Premium PMPM	\$629	\$655	\$678	\$703	\$729	\$755	\$783	\$812	\$842	\$873	\$679	\$749
Aggregate Premiums (millions)	\$10,849	\$11,177	\$11,615	\$12,222	\$12,862	\$13,537	\$14,249	\$15,000	\$15,793	\$16,629	\$58,725	\$133,932
IRIP Payment (millions)	\$45	\$63	\$60	\$63	\$66	\$69	\$73	\$77	\$80	\$85	\$295	\$679
Quality Incentive Pool Costs (millions)	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$225	\$1,125	\$2,250
LTSS Coverage (millions)	\$0	\$131	\$136	\$143	\$151	\$159	\$167	\$176	\$185	\$195	\$561	\$1,442
SDoH/BH Grant Program (millions)	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$125	\$250
Total Program Costs (millions)	\$11,144	\$11,621	\$12,061	\$12,677	\$13,328	\$14,014	\$14,738	\$15,502	\$16,308	\$17,159	\$60,831	\$138,553
Projected Federal Spend (millions)	\$3,207	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,207	\$3,207
Other Federal Spend/Revenue												
Pregnancy Medicaid Spend (millions)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
ESRP Revenue (millions)	(\$1)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$1)	(\$1)
Combined Totals												
Enrollment ¹	1,689,077	1,657,361	1,639,034	1,660,689	1,682,721	1,705,114	1,727,874	1,751,006	1,774,517	1,798,410	1,665,776	1,708,580
Projected Federal Spend (millions)	\$3,866	\$658	\$318	\$353	\$391	\$431	\$474	\$520	\$569	\$622	\$5,586	\$8,202

¹ 5- and 10-year totals are straight averages. 2024 enrollment, premium, and APTC amounts reflect the average monthly enrollment for the 12-month period. 2024 amounts in other With Waiver enrollment tables reflect a 9-month average after waiver implementation.

Note: The program investments for Quality Incentive Pool and SDoH/BH Grant Program for 2024 are displayed as total costs over all 12 months. The first 3 months of these amounts would be incurred under the BHP and the last 9 months would be incurred under the 1332 Waiver.

Table C3. With-Waiver PY 2024 Break-Out

	200-250% FPL	All Other FPL	200-250% FPL	All Other FPL
With Waiver - Scenario C	1/1/24-3/31/24		4/1/24-12/31/24	
Unsubsidized On/Off-Exchange				
Enrollment ¹	0	66,122	0	66,122
Average Premium PMPM	\$0	\$802	\$0	\$802
Subsidized On-Exchange				
Enrollment ¹	69,010	168,922	410	168,512
Average Premium PMPM	\$756	\$761	\$756	\$761
Average APTC PMPM	\$332	\$314	\$332	\$314
Total Individual Market				
Enrollment ¹	69,010	235,044	410	234,634
Average Premium PMPM	\$756	\$773	\$756	\$773
Aggregate Premiums (millions)	\$156	\$545	\$3	\$1,632
Projected Federal Spend (millions)	\$64	\$149	\$1	\$445
Essential Plan				
Enrollment ¹	0	1,369,339	89,922	1,369,339
Average Premium PMPM	\$0	\$625	\$718	\$625
Aggregate Premiums (millions)	\$0	\$2,567	\$581	\$7,701
IRIP Payment (millions)		\$0		\$45
Quality Incentive Pool Costs (millions)		\$56		\$169
LTSS Coverage (millions)		\$0		\$0
SDoH/BH Grant Program (millions)		\$6		\$19
Total Program Costs (millions)		\$2,786		\$8,358
Projected Federal Spend (millions)		\$802		\$2,405

Table C4. Baseline Without and With-Waiver Annual Funding Estimates, PY 2024-2033

Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Individual Market										
Without Waiver PTCs	\$832,994,392	\$918,399,798	\$543,752,041	\$603,685,799	\$667,898,054	\$736,660,976	\$810,263,312	\$889,011,384	\$973,230,136	\$1,063,264,246
With Waiver PTCs	\$658,913,296	\$657,880,975	\$318,180,580	\$353,238,621	\$390,797,546	\$431,016,325	\$474,063,603	\$520,118,284	\$569,370,136	\$622,020,447
Difference	\$174,081,096	\$260,518,823	\$225,571,462	\$250,447,179	\$277,100,509	\$305,644,651	\$336,199,708	\$368,893,100	\$403,860,000	\$441,243,800
Essential Plan										
Without Waiver BHP Funding	\$12,829,257,312	\$12,923,855,551	\$13,126,291,459	\$14,030,366,556	\$14,996,951,508	\$16,030,127,338	\$17,134,481,121	\$18,314,916,475	\$19,576,674,841	\$20,925,358,757
With Waiver BHP Funding	\$3,207,314,328	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Difference	\$9,621,942,984	\$12,923,855,551	\$13,126,291,459	\$14,030,366,556	\$14,996,951,508	\$16,030,127,338	\$17,134,481,121	\$18,314,916,475	\$19,576,674,841	\$20,925,358,757
Other Federal Spend/Savings										
Pregnancy Medicaid Total Enrollment	4,118	12,098	14,245	14,530	14,820	15,117	15,419	15,728	16,042	16,363
Enrollment >138% FPL	4,074	11,969	14,093	14,375	14,663	14,956	15,255	15,560	15,871	16,189
Pregnancy Medicaid Reduction	\$25,108,274	\$88,542,913	\$100,943,689	\$107,885,204	\$115,310,143	\$123,755,769	\$132,643,493	\$141,777,455	\$151,755,984	\$161,163,031
Employer Penalty Loss	(\$2,592,000)	(\$2,970,000)	(\$3,006,000)	(\$3,258,000)	(\$3,746,700)	(\$4,308,705)	(\$4,955,011)	(\$5,698,262)	(\$6,553,002)	(\$7,535,952)
Combined Totals										
Without Waiver Federal Spend	\$13,684,767,979	\$13,927,828,262	\$13,767,981,189	\$14,738,679,559	\$15,776,413,005	\$16,886,235,378	\$18,072,432,915	\$19,340,007,052	\$20,695,107,960	\$22,142,250,082
With Waiver Federal Spend	\$3,866,227,625	\$657,880,975	\$318,180,580	\$353,238,621	\$390,797,546	\$431,016,325	\$474,063,603	\$520,118,284	\$569,370,136	\$622,020,447
Total Federal Savings	\$9,818,540,354	\$13,269,947,287	\$13,449,800,610	\$14,385,440,939	\$15,385,615,460	\$16,455,219,054	\$17,598,369,312	\$18,819,888,768	\$20,125,737,823	\$21,520,229,635
Requested Pass-through	\$9,796,024,080	\$13,184,374,374	\$13,351,862,921	\$14,280,813,734	\$15,274,052,017	\$16,335,771,989	\$17,470,680,829	\$18,683,809,575	\$19,980,534,841	\$21,366,602,556
Net Federal Savings	\$22,516,274	\$85,572,913	\$97,937,689	\$104,627,204	\$111,563,443	\$119,447,064	\$127,688,482	\$136,079,193	\$145,202,982	\$153,627,079
Combined Totals										
	5-Year Total	10-Year Total								
Without Waiver Federal Spend	\$71,895,669,994	\$169,031,703,380								
With Waiver Federal Spend	\$5,586,325,345	\$8,202,914,140								
Total Federal Savings	\$66,309,344,649	\$160,828,789,240								
Requested Pass-through	\$65,887,127,126	\$159,724,526,916								
Net Federal Savings	\$422,217,522	\$1,104,262,324								

Note: For 2024 due to the April 1 implementation date, there will still be 1 quarter of BHP funding compared to the other years of the Waiver.

Table C5. SLCSP Premium Without and With-Waiver by Rating Area, PY 2024 – 2033

Baseline - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Second Lowest Cost Silver Plans (SLCSP) Monthly Premiums</i>										
Rating Area 1	\$599	\$630	\$662	\$697	\$733	\$771	\$811	\$853	\$898	\$945
Rating Area 2	\$512	\$539	\$567	\$596	\$627	\$660	\$694	\$731	\$769	\$808
Rating Area 3	\$744	\$782	\$823	\$866	\$911	\$958	\$1,008	\$1,061	\$1,116	\$1,174
Rating Area 4	\$808	\$850	\$894	\$941	\$990	\$1,041	\$1,095	\$1,152	\$1,212	\$1,275
Rating Area 5	\$600	\$631	\$664	\$699	\$735	\$773	\$813	\$856	\$900	\$947
Rating Area 6	\$617	\$649	\$683	\$718	\$756	\$795	\$836	\$880	\$926	\$974
Rating Area 7	\$612	\$644	\$677	\$712	\$749	\$788	\$829	\$872	\$918	\$965
Rating Area 8	\$775	\$815	\$857	\$902	\$949	\$998	\$1,050	\$1,105	\$1,162	\$1,222
With Waiver - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Second Lowest Cost Silver Plans (SLCSP) Monthly Premiums</i>										
Rating Area 1	\$599	\$630	\$663	\$697	\$733	\$772	\$812	\$854	\$898	\$945
Rating Area 2	\$512	\$539	\$567	\$597	\$628	\$660	\$695	\$731	\$769	\$809
Rating Area 3	\$744	\$783	\$824	\$866	\$911	\$959	\$1,009	\$1,061	\$1,116	\$1,174
Rating Area 4	\$808	\$850	\$895	\$941	\$990	\$1,042	\$1,096	\$1,153	\$1,213	\$1,276
Rating Area 5	\$600	\$632	\$664	\$699	\$735	\$774	\$814	\$856	\$901	\$948
Rating Area 6	\$617	\$649	\$683	\$719	\$756	\$795	\$837	\$880	\$926	\$974
Rating Area 7	\$612	\$644	\$677	\$713	\$750	\$789	\$830	\$873	\$918	\$966
Rating Area 8	\$775	\$815	\$858	\$902	\$949	\$999	\$1,051	\$1,105	\$1,163	\$1,223

Table C6. Baseline Without Average Annual Enrollment by Metal Level, PY 2024 – 2033

Baseline - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,668,073	1,609,554	1,590,454	1,611,761	1,633,440	1,655,476	1,677,875	1,700,642	1,723,782	1,747,302
<i>Unsubsidized On/Off-Exchange Enrollment</i>	66,122	64,435	124,043	123,236	122,435	121,639	120,849	120,063	119,283	118,507
Catastrophic	5,073	5,025	4,739	4,730	4,722	4,714	4,706	4,699	4,691	4,684
Bronze	21,026	20,462	42,758	42,472	42,189	41,907	41,627	41,349	41,072	40,797
Silver	21,525	20,941	45,249	44,945	44,644	44,344	44,046	43,750	43,456	43,164
Gold	10,038	9,771	17,674	17,556	17,439	17,322	17,206	17,091	16,977	16,863
Platinum	8,461	8,236	13,624	13,533	13,442	13,352	13,263	13,174	13,086	12,999
<i>Subsidized On-Exchange Enrollment</i>	236,570	237,659	149,369	150,356	151,349	152,348	153,354	154,367	155,387	156,413
Catastrophic	0	0	0	0	0	0	0	0	0	0
Bronze	88,312	88,718	55,760	56,128	56,499	56,872	57,247	57,625	58,006	58,389
Silver	96,331	96,774	60,823	61,225	61,629	62,036	62,446	62,858	63,273	63,691
Gold	30,993	31,136	19,569	19,698	19,828	19,959	20,091	20,224	20,357	20,492
Platinum	20,934	21,030	13,218	13,305	13,393	13,481	13,570	13,660	13,750	13,841
Essential Plan Enrollment	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382
EP1	573,460	549,133	553,158	562,031	571,056	580,225	589,542	599,009	608,627	618,400
EP2	163,846	156,895	158,045	160,580	163,159	165,779	168,441	171,145	173,894	176,686
EP3	95,577	91,522	92,193	93,672	95,176	96,704	98,257	99,835	101,438	103,067
EP4	532,498	509,910	513,646	521,886	530,266	538,781	547,432	556,222	565,154	574,229

Table C7. With-Waiver Average Annual Enrollment by Metal Level, PY 2024 – 2033

With Waiver - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,694,305	1,657,361	1,639,034	1,660,689	1,682,721	1,705,114	1,727,874	1,751,006	1,774,517	1,798,410
<i>Unsubsidized On/Off-Exchange Enrollment</i>	66,122	64,587	124,347	123,692	123,043	122,399	121,761	121,127	120,499	119,875
Catastrophic	5,073	5,037	4,750	4,748	4,745	4,743	4,742	4,740	4,739	4,738
Bronze	21,026	20,510	42,863	42,629	42,398	42,169	41,941	41,715	41,491	41,268
Silver	21,525	20,991	45,360	45,112	44,865	44,621	44,379	44,138	43,899	43,662
Gold	10,038	9,794	17,717	17,621	17,525	17,430	17,336	17,243	17,150	17,058
Platinum	8,461	8,255	13,657	13,583	13,509	13,436	13,363	13,291	13,220	13,149
<i>Subsidized On-Exchange Enrollment</i>	168,922	170,243	87,405	87,979	88,556	89,138	89,724	90,313	90,906	91,503
Catastrophic	0	0	0	0	0	0	0	0	0	0
Bronze	63,059	63,552	32,628	32,842	33,058	33,275	33,494	33,714	33,935	34,158
Silver	68,785	69,323	35,591	35,825	36,060	36,297	36,535	36,775	37,017	37,260
Gold	22,131	22,304	11,451	11,526	11,602	11,678	11,755	11,832	11,910	11,988
Platinum	14,948	15,065	7,734	7,785	7,836	7,888	7,940	7,992	8,044	8,097
Essential Plan Enrollment	1,459,261	1,422,531	1,427,282	1,449,018	1,471,121	1,493,577	1,516,390	1,539,566	1,563,111	1,587,032
EP1	575,666	557,117	562,735	571,807	581,034	590,411	599,938	609,620	619,459	629,456
EP2	164,476	159,176	160,781	163,373	166,010	168,689	171,411	174,177	176,988	179,844
EP3	95,747	91,696	92,371	93,853	95,361	96,893	98,449	100,031	101,638	103,271
EP4	533,450	510,880	514,636	522,895	531,295	539,831	548,503	557,315	566,268	575,365
Undocumented Population	0	0	0	0	0	0	0	0	0	0
200%-250% FPL Population	89,922	103,662	96,760	97,090	97,421	97,754	98,088	98,423	98,759	99,096

Note: This table displays the With Waiver amounts as 9-month averages for 2024, since the first year of the waiver will only contain 9 months. There is an increase from the WoW scenario (~0.6% in total) for the on-exchange Unsubsidized and Subsidized population with incomes above 250% of the FPL. This is due to increased awareness, concentrated advertisement, and outreach activities with the implementation of the waiver.

Table C8. Baseline Without-Waiver Average Annual Enrollment by FPL, PY 2024 – 2033

Baseline - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,668,073	1,609,554	1,590,454	1,611,761	1,633,440	1,655,476	1,677,875	1,700,642	1,723,782	1,747,302
Unsubsidized On/Off-Exchange Enrollment	66,122	64,435	124,043	123,236	122,435	121,639	120,849	120,063	119,283	118,507
Below 400%	0	0	0	0	0	0	0	0	0	0
401% - 500%	0	0	24,239	24,082	23,925	23,770	23,615	23,462	23,309	23,158
501% - 600%	0	0	12,400	12,319	12,239	12,159	12,080	12,002	11,924	11,846
Over 600%	12,291	13,896	15,502	15,401	15,301	15,201	15,103	15,004	14,907	14,810
Do Not Report	53,831	50,539	71,902	71,435	70,970	70,509	70,051	69,595	69,143	68,693
Subsidized On-Exchange Enrollment	236,570	237,659	149,369	150,356	151,349	152,348	153,354	154,367	155,387	156,413
Below 139%	7,523	7,558	4,750	4,782	4,813	4,845	4,877	4,909	4,942	4,974
139% - 150%	288	290	182	183	184	186	187	188	189	191
151% - 200%	1,757	1,765	1,110	1,117	1,124	1,132	1,139	1,147	1,154	1,162
201% - 250%	69,010	69,122	62,093	62,470	62,849	63,230	63,614	64,000	64,388	64,779
251% - 300%	54,227	54,547	36,619	36,876	37,134	37,395	37,657	37,921	38,187	38,455
301% - 350%	40,022	40,258	27,027	27,216	27,407	27,599	27,793	27,988	28,184	28,381
351% - 400%	26,047	26,201	17,589	17,713	17,837	17,962	18,088	18,215	18,342	18,471
401% - 500%	21,502	21,629	0	0	0	0	0	0	0	0
501% - 600%	9,595	9,652	0	0	0	0	0	0	0	0
Over 600%	6,599	6,638	0	0	0	0	0	0	0	0
Essential Plan Enrollment	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382
Below 150%	791,921	758,327	763,884	776,138	788,601	801,264	814,130	827,203	840,485	853,981
Over 151%	573,460	549,133	553,158	562,031	571,056	580,225	589,542	599,009	608,627	618,400

Table C9. With-Waiver PY Average Annual Enrollment by FPL, PY 2024 – 2033

With Waiver - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Total Combined Enrollment	1,694,305	1,657,361	1,639,034	1,660,689	1,682,721	1,705,114	1,727,874	1,751,006	1,774,517	1,798,410
Unsubsidized On/Off-Exchange Enrollment	66,122	64,587	124,347	123,692	123,043	122,399	121,761	121,127	120,499	119,875
Below 400% ²	0	0	0	0	0	0	0	0	0	0
401% - 500% ²	0	0	24,299	24,171	24,044	23,918	23,793	23,670	23,547	23,425
501% - 600% ²	0	0	12,430	12,365	12,300	12,235	12,171	12,108	12,045	11,983
Over 600% ²	12,314	13,927	15,540	15,458	15,377	15,296	15,217	15,137	15,059	14,981
Do Not Report ²	53,808	50,660	72,078	71,699	71,323	70,949	70,579	70,212	69,848	69,486
Subsidized On-Exchange Enrollment	168,922	170,243	87,405	87,979	88,556	89,138	89,724	90,313	90,906	91,503
Below 139% ¹	7,490	7,548	3,875	3,901	3,927	3,952	3,978	4,004	4,031	4,057
139% - 150% ¹	287	289	149	149	150	151	152	153	154	155
151% - 200% ¹	1,750	1,763	905	911	917	923	929	935	942	948
201% - 250%	410	413	212	213	215	216	218	219	220	222
251% - 300% ²	54,568	54,995	37,083	37,326	37,571	37,818	38,067	38,317	38,568	38,822
301% - 350% ²	40,274	40,589	27,369	27,548	27,729	27,912	28,095	28,279	28,465	28,652
351% - 400% ²	26,211	26,416	17,812	17,929	18,047	18,165	18,285	18,405	18,526	18,647
401% - 500% ²	21,637	21,807	0	0	0	0	0	0	0	0
501% - 600% ²	9,655	9,731	0	0	0	0	0	0	0	0
Over 600% ²	6,641	6,693	0	0	0	0	0	0	0	0
Essential Plan Enrollment	1,459,261	1,422,531	1,427,282	1,449,018	1,471,121	1,493,577	1,516,390	1,539,566	1,563,111	1,587,032
Below 150%	793,673	761,752	767,788	780,121	792,666	805,412	818,363	831,523	844,894	858,481
151% - 200%	575,666	557,117	562,735	571,807	581,034	590,411	599,938	609,620	619,459	629,456
Over 201%	89,922	103,662	96,760	97,090	97,421	97,754	98,088	98,423	98,759	99,096

¹ The decrease in enrollment from the WoW scenario (~0.4% in total) is due to the methodology for allocating estimated enrollment by income and does not reflect any changes in eligibility for this population that would cause consumers below 200% of FPL to lose coverage.

² There is an increase from the WoW scenario (~0.6% in total) for the on-exchange Unsubsidized and Subsidized population with incomes above 250% of the FPL. This is due to increased awareness, concentrated advertisement, and outreach activities with the implementation of the waiver.

Note: This table displays the With Waiver amounts as 9-month averages for 2024, since the first year of the waiver will only contain 9 months.

Table C10. Without and With-Waiver Monthly Federal Funding PMPM by Metal Level and Rate Cohort, PY 2024 – 2033

Without Waiver - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Exchange Subsidized APTCs	\$314	\$345	\$325	\$358	\$394	\$432	\$472	\$514	\$559	\$607
Bronze	\$289	\$313	\$305	\$331	\$360	\$389	\$421	\$454	\$490	\$527
Silver	\$365	\$398	\$383	\$418	\$456	\$496	\$538	\$583	\$630	\$681
Gold	\$281	\$317	\$275	\$315	\$357	\$403	\$450	\$501	\$555	\$613
Platinum	\$237	\$278	\$216	\$260	\$308	\$359	\$413	\$470	\$531	\$596
Essential Plan BHP Funding	\$783	\$824	\$831	\$874	\$919	\$967	\$1,017	\$1,070	\$1,126	\$1,184
EP1	\$704	\$741	\$711	\$748	\$786	\$827	\$870	\$916	\$963	\$1,013
EP2	\$771	\$811	\$809	\$851	\$896	\$942	\$991	\$1,043	\$1,097	\$1,154
EP3	\$835	\$878	\$915	\$962	\$1,012	\$1,065	\$1,120	\$1,179	\$1,240	\$1,304
EP4	\$862	\$907	\$951	\$1,001	\$1,053	\$1,107	\$1,165	\$1,226	\$1,289	\$1,356
With Waiver - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
Exchange Subsidized APTCs	\$314	\$345	\$325	\$358	\$394	\$432	\$472	\$514	\$559	\$607
Bronze	\$289	\$313	\$305	\$331	\$360	\$389	\$421	\$454	\$490	\$527
Silver	\$365	\$398	\$383	\$418	\$456	\$496	\$538	\$583	\$630	\$681
Gold	\$281	\$317	\$275	\$315	\$357	\$403	\$450	\$501	\$555	\$613
Platinum	\$237	\$278	\$216	\$260	\$308	\$359	\$413	\$470	\$531	\$596
Essential Plan BHP Funding	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP1	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP2	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP3	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EP4	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
QHP 200%-250% FPL Population	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table C11. Without and With Waiver - 5-Year Enrollment, Premium, and Federal Deficit Estimates, PY 2024 – 2033

Without Waiver - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Unsubsidized On-exchange & Off-exchange Enrollment</i>	66,122	64,435	124,043	123,236	122,435	121,639	120,849	120,063	119,283	118,507
Below 400%	0	0	0	0	0	0	0	0	0	0
401% - 500%	0	0	24,239	24,082	23,925	23,770	23,615	23,462	23,309	23,158
501% - 600%	0	0	12,400	12,319	12,239	12,159	12,080	12,002	11,924	11,846
Over 600%	12,291	13,896	15,502	15,401	15,301	15,201	15,103	15,004	14,907	14,810
Do Not Report	53,831	50,539	71,902	71,435	70,970	70,509	70,051	69,595	69,143	68,693
<i>Unsubsidized On-exchange Enrollment</i>	16,531	16,109	74,426	73,942	73,461	72,984	72,509	72,038	71,570	71,104
<i>Off-exchange Enrollment</i>	49,592	48,326	49,617	49,295	48,974	48,656	48,339	48,025	47,713	47,403
With Waiver - Scenario C	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033
<i>Unsubsidized On-exchange & Off-exchange Enrollment</i>	66,122	64,587	124,347	123,692	123,043	122,399	121,761	121,127	120,499	119,875
Below 400%	0	0	0	0	0	0	0	0	0	0
401% - 500%	0	0	24,299	24,171	24,044	23,918	23,793	23,670	23,547	23,425
501% - 600%	0	0	12,430	12,365	12,300	12,235	12,171	12,108	12,045	11,983
Over 600%	12,314	13,927	15,540	15,458	15,377	15,296	15,217	15,137	15,059	14,981
Do Not Report	53,808	50,660	72,078	71,699	71,323	70,949	70,579	70,212	69,848	69,486
<i>Unsubsidized On-exchange & Off-exchange Premium Increase (Annual)</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<i>Unsubsidized On-exchange Enrollment</i>	16,531	16,147	74,608	74,215	73,826	73,439	73,057	72,676	72,299	71,925
<i>Unsubsidized On-exchange Premium Increase (Annual)</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<i>Off-exchange Enrollment</i>	49,592	48,440	49,739	49,477	49,217	48,960	48,704	48,451	48,200	47,950
<i>Off-exchange Premium Increase (Annual)</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Note: Due to IRIP, there are no expected increases of premiums for consumers that remain in the individual market compared to Without Waiver.

Note: There is an increase from the WoW scenario (~0.6% in total) for the on-exchange Unsubsidized and Subsidized population with incomes above 250% of the FPL. This is due to increased awareness, concentrated advertisement, and outreach activities with the implementation of the Waiver.

Table C12. Without and With-Waiver Annual Out-of-Pocket Expenses by FPL, PY 2024 – 2033

Without Waiver - Scenario C - FPL	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
<i>Exchange - Annual Out-of-Pocket Expenses - FPL</i>												
Below 250%	\$2,751	\$2,895	\$3,045	\$3,203	\$3,370	\$3,545	\$3,730	\$3,923	\$4,128	\$4,342	\$3,040	\$3,481
251% - 300%	\$2,643	\$2,781	\$2,925	\$3,078	\$3,238	\$3,406	\$3,583	\$3,769	\$3,965	\$4,172	\$2,898	\$3,308
301% - 350%	\$2,641	\$2,778	\$2,922	\$3,074	\$3,234	\$3,402	\$3,579	\$3,766	\$3,961	\$4,167	\$2,895	\$3,304
351% - 400%	\$2,653	\$2,791	\$2,936	\$3,089	\$3,250	\$3,419	\$3,596	\$3,783	\$3,980	\$4,187	\$2,909	\$3,320
401% - 500%	\$2,672	\$2,811	\$2,957	\$3,111	\$3,272	\$3,442	\$3,621	\$3,810	\$4,008	\$4,216	\$2,974	\$3,399
501% - 600%	\$2,686	\$2,826	\$2,973	\$3,128	\$3,290	\$3,462	\$3,642	\$3,831	\$4,030	\$4,240	\$3,002	\$3,434
Over 600%/Do Not Report	\$2,742	\$2,885	\$3,034	\$3,192	\$3,358	\$3,533	\$3,717	\$3,910	\$4,113	\$4,327	\$3,058	\$3,498
<i>Essential Plan - Annual Out-of-Pocket Expenses - FPL</i>												
Below 150%	\$9	\$10	\$10	\$11	\$11	\$11	\$12	\$12	\$13	\$13	\$10	\$11
Over 151%	\$139	\$145	\$150	\$156	\$163	\$169	\$176	\$183	\$190	\$198	\$151	\$168
With Waiver - Scenario C - FPL	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
<i>Exchange - Annual Out-of-Pocket Expenses - FPL</i>												
Below 250%	\$2,757	\$2,901	\$3,051	\$3,210	\$3,377	\$3,553	\$3,737	\$3,932	\$4,136	\$4,351	\$2,997	\$3,403
251% - 300%	\$2,648	\$2,785	\$2,930	\$3,082	\$3,243	\$3,411	\$3,589	\$3,775	\$3,972	\$4,178	\$2,903	\$3,313
301% - 350%	\$2,645	\$2,782	\$2,927	\$3,079	\$3,239	\$3,408	\$3,585	\$3,771	\$3,967	\$4,174	\$2,900	\$3,310
351% - 400%	\$2,657	\$2,795	\$2,941	\$3,094	\$3,255	\$3,424	\$3,602	\$3,789	\$3,986	\$4,193	\$2,914	\$3,325
401% - 500%	\$2,676	\$2,815	\$2,961	\$3,115	\$3,277	\$3,448	\$3,627	\$3,816	\$4,014	\$4,223	\$2,978	\$3,405
501% - 600%	\$2,691	\$2,830	\$2,978	\$3,132	\$3,295	\$3,467	\$3,647	\$3,837	\$4,036	\$4,246	\$3,006	\$3,440
Over 600%/Do Not Report	\$2,746	\$2,889	\$3,039	\$3,197	\$3,363	\$3,538	\$3,722	\$3,916	\$4,119	\$4,333	\$3,063	\$3,504
<i>Essential Plan - Annual Out-of-Pocket Expenses - FPL</i>												
Below 150%	\$9	\$10	\$10	\$11	\$11	\$11	\$12	\$12	\$13	\$13	\$10	\$11
151% - 200%	\$139	\$145	\$150	\$156	\$163	\$169	\$176	\$183	\$190	\$198	\$151	\$168
Over 201%	\$238	\$247	\$257	\$267	\$278	\$289	\$301	\$313	\$325	\$338	\$257	\$286

Table C13. Without and With-Waiver Annual Out-of-Pocket Expenses by Age, PY 2024 – 2033

Without Waiver - Scenario C - Age	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
Exchange - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$1,131	\$1,190	\$1,252	\$1,317	\$1,386	\$1,458	\$1,533	\$1,613	\$1,697	\$1,785	\$1,255	\$1,436
21 - 25 Years	\$1,126	\$1,184	\$1,246	\$1,311	\$1,379	\$1,450	\$1,526	\$1,605	\$1,689	\$1,776	\$1,249	\$1,429
26 - 30 Years	\$1,459	\$1,534	\$1,614	\$1,698	\$1,787	\$1,879	\$1,977	\$2,080	\$2,188	\$2,302	\$1,618	\$1,852
31 - 35 Years	\$1,783	\$1,876	\$1,973	\$2,076	\$2,184	\$2,297	\$2,417	\$2,542	\$2,675	\$2,814	\$1,978	\$2,264
36 - 40 Years	\$1,960	\$2,062	\$2,169	\$2,282	\$2,401	\$2,526	\$2,657	\$2,795	\$2,941	\$3,094	\$2,175	\$2,489
41 - 45 Years	\$2,186	\$2,299	\$2,419	\$2,545	\$2,677	\$2,816	\$2,963	\$3,117	\$3,279	\$3,449	\$2,425	\$2,775
46 - 50 Years	\$2,578	\$2,712	\$2,853	\$3,001	\$3,158	\$3,322	\$3,494	\$3,676	\$3,867	\$4,068	\$2,860	\$3,273
51 - 55 Years	\$3,180	\$3,346	\$3,520	\$3,703	\$3,895	\$4,098	\$4,311	\$4,535	\$4,771	\$5,019	\$3,529	\$4,038
56 - 60 Years	\$3,896	\$4,098	\$4,311	\$4,536	\$4,772	\$5,020	\$5,281	\$5,555	\$5,844	\$6,148	\$4,323	\$4,946
61 - 65 Years	\$4,802	\$5,052	\$5,315	\$5,591	\$5,882	\$6,188	\$6,509	\$6,848	\$7,204	\$7,578	\$5,328	\$6,097
Essential Plan - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$45	\$47	\$48	\$50	\$52	\$54	\$57	\$59	\$61	\$64	\$49	\$54
21 - 25 Years	\$45	\$46	\$48	\$50	\$52	\$54	\$56	\$59	\$61	\$63	\$48	\$54
26 - 30 Years	\$58	\$60	\$62	\$65	\$68	\$70	\$73	\$76	\$79	\$82	\$63	\$69
31 - 35 Years	\$71	\$73	\$76	\$79	\$83	\$86	\$89	\$93	\$97	\$100	\$76	\$85
36 - 40 Years	\$78	\$81	\$84	\$87	\$91	\$94	\$98	\$102	\$106	\$110	\$84	\$93
41 - 45 Years	\$87	\$90	\$94	\$97	\$101	\$105	\$109	\$114	\$118	\$123	\$94	\$104
46 - 50 Years	\$102	\$106	\$110	\$115	\$119	\$124	\$129	\$134	\$140	\$145	\$111	\$123
51 - 55 Years	\$126	\$131	\$136	\$142	\$147	\$153	\$159	\$166	\$172	\$179	\$136	\$151
56 - 60 Years	\$154	\$160	\$167	\$174	\$180	\$188	\$195	\$203	\$211	\$220	\$167	\$185
61 - 65 Years	\$190	\$198	\$206	\$214	\$222	\$231	\$241	\$250	\$260	\$271	\$206	\$228
With Waiver - Scenario C - Age												
Exchange - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$1,126	\$1,185	\$1,247	\$1,312	\$1,380	\$1,451	\$1,527	\$1,606	\$1,690	\$1,778	\$1,250	\$1,430
21 - 25 Years	\$1,121	\$1,179	\$1,240	\$1,305	\$1,373	\$1,444	\$1,519	\$1,598	\$1,681	\$1,769	\$1,244	\$1,423
26 - 30 Years	\$1,453	\$1,528	\$1,607	\$1,691	\$1,779	\$1,872	\$1,969	\$2,071	\$2,179	\$2,292	\$1,612	\$1,844
31 - 35 Years	\$1,775	\$1,868	\$1,965	\$2,067	\$2,175	\$2,288	\$2,407	\$2,532	\$2,663	\$2,802	\$1,970	\$2,254
36 - 40 Years	\$1,952	\$2,054	\$2,160	\$2,273	\$2,391	\$2,515	\$2,646	\$2,784	\$2,928	\$3,081	\$2,166	\$2,478
41 - 45 Years	\$2,176	\$2,290	\$2,409	\$2,534	\$2,666	\$2,804	\$2,950	\$3,104	\$3,265	\$3,435	\$2,415	\$2,763
46 - 50 Years	\$2,567	\$2,701	\$2,841	\$2,989	\$3,144	\$3,308	\$3,480	\$3,661	\$3,851	\$4,051	\$2,848	\$3,259
51 - 55 Years	\$3,167	\$3,331	\$3,505	\$3,687	\$3,879	\$4,080	\$4,293	\$4,516	\$4,751	\$4,998	\$3,514	\$4,021
56 - 60 Years	\$3,879	\$4,081	\$4,293	\$4,517	\$4,751	\$4,999	\$5,258	\$5,532	\$5,820	\$6,122	\$4,304	\$4,925
61 - 65 Years	\$4,782	\$5,031	\$5,292	\$5,567	\$5,857	\$6,162	\$6,482	\$6,819	\$7,174	\$7,547	\$5,306	\$6,071
Essential Plan - Annual Out-of-Pocket Expenses - Age												
00 - 20 Years	\$49	\$51	\$53	\$55	\$57	\$59	\$62	\$64	\$67	\$69	\$53	\$59
21 - 25 Years	\$48	\$50	\$52	\$55	\$57	\$59	\$61	\$64	\$66	\$69	\$53	\$58
26 - 30 Years	\$63	\$65	\$68	\$71	\$74	\$76	\$80	\$83	\$86	\$89	\$68	\$75
31 - 35 Years	\$77	\$80	\$83	\$86	\$90	\$93	\$97	\$101	\$105	\$109	\$83	\$92
36 - 40 Years	\$84	\$88	\$91	\$95	\$99	\$103	\$107	\$111	\$116	\$120	\$91	\$101
41 - 45 Years	\$94	\$98	\$102	\$106	\$110	\$115	\$119	\$124	\$129	\$134	\$102	\$113
46 - 50 Years	\$111	\$115	\$120	\$125	\$130	\$135	\$141	\$146	\$152	\$158	\$120	\$133
51 - 55 Years	\$137	\$142	\$148	\$154	\$160	\$167	\$173	\$180	\$187	\$195	\$148	\$164
56 - 60 Years	\$168	\$175	\$182	\$189	\$196	\$204	\$212	\$221	\$230	\$239	\$182	\$201
61 - 65 Years	\$207	\$215	\$224	\$233	\$242	\$252	\$262	\$272	\$283	\$294	\$224	\$248

Table C14. Without and With-Waiver Annual Enrollment by Age, PY 2024 – 2033

Without Waiver - Scenario C - Age	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	5 Year	10 Year
Exchange - Enrollment - Age												
Total Enrollment	302,692	302,094	273,412	273,592	273,784	273,988	274,203	274,430	274,670	274,920	285,115	279,779
00 - 20 Years	22,981	22,874	21,009	21,004	21,000	20,998	20,996	20,995	20,994	20,995	21,774	21,385
21 - 25 Years	16,810	16,768	15,221	15,228	15,236	15,245	15,254	15,264	15,275	15,286	15,853	15,559
26 - 30 Years	25,800	25,777	23,186	23,210	23,235	23,261	23,288	23,316	23,345	23,375	24,242	23,779
31 - 35 Years	26,063	26,058	23,350	23,380	23,410	23,442	23,474	23,508	23,542	23,578	24,452	23,981
36 - 40 Years	23,972	23,964	21,493	21,519	21,546	21,574	21,603	21,632	21,663	21,695	22,499	22,066
41 - 45 Years	23,948	23,932	21,501	21,525	21,550	21,575	21,602	21,629	21,658	21,687	22,491	22,061
46 - 50 Years	26,738	26,708	24,057	24,079	24,103	24,128	24,154	24,181	24,209	24,238	25,137	24,660
51 - 55 Years	34,911	34,845	31,520	31,542	31,565	31,589	31,615	31,642	31,671	31,701	32,876	32,260
56 - 60 Years	47,162	47,035	42,742	42,759	42,779	42,800	42,824	42,849	42,876	42,904	44,495	43,673
61 - 65 Years	49,962	49,797	45,402	45,412	45,423	45,437	45,453	45,470	45,490	45,511	47,199	46,336
65+ Years	4,346	4,336	3,931	3,933	3,935	3,938	3,941	3,944	3,947	3,950	4,096	4,020
Essential Plan - Enrollment - Age												
Total Enrollment	1,365,381	1,307,461	1,317,042	1,338,169	1,359,656	1,381,489	1,403,672	1,426,211	1,449,113	1,472,382	1,337,542	1,382,057
00 - 20 Years	22,968	21,994	22,155	22,511	22,872	23,239	23,612	23,992	24,377	24,768	22,500	23,249
21 - 25 Years	133,178	127,528	128,463	130,524	132,620	134,749	136,913	139,111	141,345	143,615	130,463	134,805
26 - 30 Years	185,132	177,279	178,578	181,442	184,356	187,316	190,324	193,380	196,485	199,640	181,357	187,393
31 - 35 Years	174,980	167,557	168,785	171,492	174,246	177,044	179,887	182,775	185,710	188,692	171,412	177,117
36 - 40 Years	164,741	157,753	158,909	161,458	164,051	166,685	169,362	172,081	174,844	177,652	161,382	166,754
41 - 45 Years	158,981	152,237	153,353	155,812	158,314	160,857	163,439	166,064	168,730	171,440	155,739	160,923
46 - 50 Years	149,534	143,191	144,240	146,554	148,907	151,298	153,727	156,196	158,704	161,252	146,485	151,360
51 - 55 Years	143,638	137,545	138,553	140,775	143,036	145,332	147,666	150,037	152,446	154,894	140,709	145,392
56 - 60 Years	136,399	130,613	131,570	133,680	135,827	138,008	140,224	142,475	144,763	147,088	133,618	138,065
61 - 65 Years	95,830	91,765	92,437	93,920	95,428	96,961	98,518	100,100	101,707	103,340	93,876	97,001
65+ Years	-	-	-	-	-	-	-	-	-	-	-	-
With Waiver - Scenario C - Age												
Exchange - Enrollment - Age												
Total Enrollment	235,044	234,830	211,752	211,671	211,599	211,537	211,485	211,440	211,405	211,378	220,979	216,214
00 - 20 Years	20,741	20,670	18,946	18,940	18,934	18,930	18,926	18,922	18,920	18,918	19,646	19,285
21 - 25 Years	12,419	12,397	11,228	11,217	11,208	11,198	11,189	11,181	11,173	11,166	11,694	11,438
26 - 30 Years	16,894	16,898	15,099	15,083	15,067	15,052	15,037	15,024	15,011	14,998	15,808	15,416
31 - 35 Years	18,804	18,828	16,740	16,738	16,736	16,735	16,735	16,735	16,736	16,738	17,569	17,152
36 - 40 Years	17,352	17,371	15,466	15,463	15,460	15,459	15,458	15,457	15,458	15,459	16,222	15,840
41 - 45 Years	17,652	17,664	15,767	15,764	15,761	15,760	15,758	15,758	15,758	15,759	16,522	16,140
46 - 50 Years	20,384	20,387	18,265	18,262	18,260	18,258	18,257	18,257	18,258	18,260	19,112	18,685
51 - 55 Years	27,411	27,390	24,680	24,673	24,667	24,663	24,659	24,657	24,655	24,655	25,764	25,211
56 - 60 Years	38,281	38,217	34,634	34,622	34,611	34,601	34,593	34,586	34,581	34,577	36,073	35,330
61 - 65 Years	40,741	40,645	36,989	36,969	36,950	36,933	36,918	36,904	36,892	36,881	38,459	37,682
65+ Years	4,365	4,363	3,937	3,941	3,945	3,949	3,954	3,958	3,963	3,968	4,110	4,034
Essential Plan - Enrollment - Age												
Total Enrollment	1,459,261	1,422,531	1,427,282	1,449,018	1,471,121	1,493,577	1,516,390	1,539,566	1,563,111	1,587,032	1,445,843	1,492,889
00 - 20 Years	25,962	25,818	25,906	26,295	26,691	27,092	27,501	27,915	28,336	28,765	26,135	27,028
21 - 25 Years	140,480	137,692	138,600	140,737	142,909	145,116	147,359	149,638	151,953	154,306	140,084	144,879
26 - 30 Years	198,145	194,351	195,349	198,337	201,375	204,462	207,598	210,785	214,022	217,312	197,511	204,174
31 - 35 Years	186,160	182,629	183,703	186,523	189,390	192,304	195,264	198,271	201,327	204,432	185,681	192,000
36 - 40 Years	174,542	170,231	171,000	173,618	176,281	178,986	181,734	184,527	187,364	190,246	173,134	178,853
41 - 45 Years	167,922	162,938	163,467	165,963	168,502	171,082	173,702	176,365	179,069	181,817	165,758	171,083
46 - 50 Years	158,293	153,409	153,808	156,152	158,536	160,957	163,417	165,916	168,455	171,034	156,040	160,998
51 - 55 Years	153,479	148,778	149,012	151,271	153,568	155,901	158,272	160,680	163,126	165,611	151,222	155,970
56 - 60 Years	147,559	143,096	143,133	145,287	147,479	149,704	151,965	154,262	156,595	158,965	145,311	149,804
61 - 65 Years	106,719	103,589	103,304	104,835	106,391	107,971	109,577	111,207	112,864	114,546	104,967	108,100
65+ Years	-	-	-	-	-	-	-	-	-	-	-	-