

Payment Deadlines FAQs:

The following information provides information about payment deadlines and how to make a payment.

What is the deadline for submitting a monthly payment?

Payment for your next month's health insurance coverage is ALWAYS due before 5 p.m. Pacific Standard Time on the 23rd of each month for coverage the following month. Invoices must be paid in full.

You can pay for your coverage each month by one-time electronic transfer or you can set up recurring monthly automatic payments through wahealthplanfinder.org. You can also mail a check, set up payment through a third party bill-payer or pay your health insurance carrier directly.

Electronic payment is the fastest payment method. Visa, MasterCard, Discover, or e-check are methods of electronic payment accepted through wahealthplanfinder.org.

If you mail a check to Healthplanfinder, it must be received by Healthplanfinder by the 21st of the month. You must include your 12-digit Billing Account Number on it. You can find your Billing Account Number on your invoice or in the top right corner of the "billing & payments" tab of your Healthplanfinder account dashboard. Make your check payable to Washington Healthplanfinder.

The Washington Healthplanfinder billing address is:

Washington Healthplanfinder
PO Box 34021
Seattle, WA 98124

You will receive a notification each time your payment is processed. When your payment has been received and processed by the Exchange you will receive a notification by email or through the mail, depending on your selected notification preference. This notice will be stored in your Healthplanfinder account.

Where can I view my monthly invoice?

Invoices are available on your Healthplanfinder account dashboard around the 1st of each month. Your invoice will be sent in an email or through the US Postal Service mail depending on the notification preference you select. Invoices are mailed around the 4th of each month – If you select US Postal Service mail as your notification preference through Washington Healthplanfinder, you can expect to receive your invoice around the 5th-8th of each month.

Your payment records are stored in your Healthplanfinder account. Check your payment history through the "billing & payments" tab from your Healthplanfinder account dashboard to know what you paid in the past.

What should I do if I want to pay my Qualified Health Plan carrier directly?

You can mail your payment directly to your existing carrier listed below.

CARRIER MAILING ADDRESSES		
Columbia United Providers	<u>Regular Mail:</u> 19120 SE 34 th St. #201 Vancouver, WA 98683	
Dental Health Services	<u>Dental Health Services</u> 100 W. Harrison Street Suite #440, South Tower Seattle, WA 98119	Dental Health Services PO Box 84885 Seattle, WA 98124-6185
MODA Health	<u>Regular Mail:</u> PO Box 4220 Portland, OR 97208-4220	
Community Health Plan of WA (CHPW)	Regular and overnight First Choice Health Attn: CHPW Exchange Premiums 600 University St, Ste 1400 Seattle, WA 98101	Payable to Coordinated Care <u>Overnight</u> Coordinated Care 1 Allied Drive, Bldg. 1, Ste 1400 Little Rock, AR 72202
Coordinated Care	<u>Regular Mail:</u> Coordinated Care PO BOX 25408 Little Rock, AR 72221	Payable to Coordinated Care <u>Overnight</u> Coordinated Care 1 Allied Drive, Bldg. 1, Ste 1400 Little Rock, AR 72202
BridgeSpan	Premium Payment - For Delivery Services Able to Deliver to a PO Box BridgeSpan PO BOX 35022 SEATTLE, WA 98124 – 3500	Premium Payment - For Delivery Services Unable to Deliver to a PO Box Members may submit a check or money order to: US BANK /BridgeSpan SEATTLE LOCKBOX SERVICES 2500 E VALLEY ROAD SUITE C RENTON WA 98057
Group Health	Make Check/Money Order Payments: Group Health Cooperative PO Box 34581 Seattle, WA 98124-1900	Overnight or Walk-in payments: Group Health Attn: Cash Desk, GHQ E3N 320 Westlake Ave N, Ste 100 Seattle, WA 98109-5233
Kaiser	Kaiser Foundation Health Plan PO Box 7192 Pasadena, CA 91109-7192	

Molina	Molina Healthcare of Washington Enrollment & Billing Department 21540 30 th Drive SE, Suite 140 Bothell, WA 98021	
Premera/LifeWise	Attention: Payment Processing P.O. Box 91060 Seattle, WA 98111-9160 Please include Premera subscriber ID and coverage month	For overnight FED EX PBC 7001 220 th St SW Bldg 1 Mountlake Terrace, WA 98403

What if I forgot my Washington Healthplanfinder password or username?

To get your password, click on “Forgot your password?” from the Washington Healthplanfinder homepage in the Sign In box. You will be prompted to enter your username and answer one of the security questions that you established when you set up your account. After correctly answering the question, Washington Healthplanfinder will allow you access to your account.

To get your username, click on “Forgot your username?” from the Washington Healthplanfinder homepage in the Sign In box. Washington Healthplanfinder will send you an email with your username so that you can log back into your account.

If you tried reset your username or password yourself and still need help, contact Washington Healthplanfinder Customer Support at 1-855-923-4633.

What are the dis-enrollment and refund policies of Washington Healthplanfinder? In which circumstances do customers receive a refund?

You may dis-enroll from your coverage at any time after coverage starts through your account dashboard on wahealthplanfinder.org. Any disenrollment of policy, change to the policy, or qualification for tax credits or Washington Apple Health must be made by 4:59 PM on the 23rd of the month in order to qualify for a refund of premiums paid for the next month’s coverage. Requests made after 4:59 PM on the 23rd of the month will not be refunded for the following month’s coverage, but may qualify for future month’s premiums outside of the following month.

Washington Healthplanfinder will follow federal regulations that require or permit Healthplanfinder to honor customer refund requests based on specific facts and circumstances. In these cases, Healthplanfinder will comply with such federal guidance.

For customers who make monthly premium payments directly to their health insurance carrier, Healthplanfinder will not be able to refund these premium payments. These customers must request such refunds directly from the health insurance carrier they paid.

Any adjustment to advanced premium tax credit amounts that might involve a refund is handled through a reconciliation process between the IRS, the Issuer, and the customer. Healthplanfinder is not part of this process.



Healthplanfinder will make every attempt to issue refunds in a timely process. Refunds are issued back to the method used to make the premium payment, unless the method used is no longer available (such as a bank account closed, or credit card expired). In general, financial institutions will return funds to your account within 2-3 business days but it is unique to each customer's bank policies. Once issued, Healthplanfinder has no ability to control the timeline to which the receiving bank processes the funds back to each customer's account.

I've uploaded or submitted my documents but I haven't heard back from Washington Healthplanfinder. What should I expect?

Thanks for uploading or submitting your documents to us. We are reviewing documents as quickly as possible and will get back to you soon. If any additional follow up is required, you will receive a notice from Washington Healthplanfinder. Depending on your selected preference, this notice will be sent by email or mail and will be posted to the Message Center of your Washington Healthplanfinder account.

If Washington Healthplanfinder has successfully received and reviewed your documents, they will also appear at the bottom of your Healthplanfinder account dashboard "Action Center" tab. If you don't see documents listed there, upload documents again and contact the Customer Support Center at 1-855-923-4633 or customersupport@wabhexchange.org to report this issue.

We request that Customer Support Assistants create a ZenDesk ticket if you are working with a customer in this situation.

What happens if I stop making payments?

The Exchange is obligated **under** federal law to terminate coverage for individuals who do not submit full payment for premiums owed before the end of a federally designated grace period. Customers enter their grace period when they are receiving coverage they did not pay for by the 23rd of the previous month. The grace period is 90 days for Qualified Health Plan enrollees who are applying monthly advance payments of the premium tax credits, and 30 days for Qualified Health Plan enrollees not applying a tax credit. For Qualified Health Plan enrollees applying monthly advance payments of the premium tax credits, carriers must pay all appropriate claims for services rendered to the enrollee during the first month of the grace period and may suspend claims for services rendered to the enrollee in the second and third months of the grace period.