

State: Pennsylvania Filing Company: HM Health Insurance Company- HHIC  
TOI/Sub-TOI: H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only  
Product Name: HHIC Small Group 2020 ACA Rate Filing  
Project Name/Number: HHIC 2020 ACA Rate Filing/1A-SG-HHIC-2019

## Supporting Document Schedules

Satisfied - Item:	ACA Public Rate Filing PDF
Comments:	
Attachment(s):	2020 HHIC Public PDF 2019-07-19 1 of 2.pdf 2020 HHIC Public PDF 2019-07-19 2 of 2.pdf
Item Status:	
Status Date:	



May 21, 2019

Ms. Tracie Gray, Director  
Bureau of Life, Accident & Health Insurance  
Commonwealth of Pennsylvania Insurance Department  
1311 Strawberry Square  
Harrisburg, PA 17120

Re: Highmark Health Insurance Company (HHIC) 2020 ACA Rate Filing (Small Group Market)  
HHIC Filing # 1A-SG-HHIC-2019 (SERFF Filing # HGHM-131937084)

**This constitutes Notice pursuant to Section 707 of the Pennsylvania Right-to-Know Law that the attached Highmark Health Insurance Company 2020 Small Group Market Rates Filing contains Trade Secret and Confidential Proprietary Information. Therefore, Highmark Health Insurance Company must, prior to the release of any portion of this Filing, be notified of any request by a third party for access to this Filing, and the Trade Secret and/or Confidential Proprietary Information identified by Highmark Health Insurance Company should be redacted before release.**

Dear Ms. Gray:

This Filing includes the Highmark Health Insurance Company (HHIC) (NAIC # 71768; HIOS Issuer ID # 70194) Small Group Market Off Exchange ACA rates and the supporting rate development for policies with effective dates on or after **January 1, 2020**.

**In the event the Department decides to publish this Filing in the PA Bulletin, the company information requested as per the Department's 2020 ACA-Compliant Health Insurance Rate Filing Guidance, Section B, is provided below:**

1. Company Name & NAIC #: **Highmark Health Insurance Company, NAIC # 71768**  
**("Company")**
2. Market: **Small Group** ("**Market**")
3. On or Off Exchange: This Company's products are offered **Off Exchange only**
4. Effective date of coverage: **January 1, 2020**

5. Average rate change requested: **-2.96% increase**
6. Range of rate change requested: **-3.1% to -0.7%**
7. Total additional annual revenue generated from the proposed rate change: **(\$84,899)**
8. Product(s): **PPO**
9. Rating Areas and the change from 2019: **Regions 1, 2, 4, 5, 6, 7, 9** (Western and Central PA)

There are no changes in our covered Rating Areas from the 2019 rate filing.

10. Metal Levels and Catastrophic Plans: This filing reflects that the Company anticipates selling the following Metal Levels of coverage in the indicated Market: **Gold and Bronze**
11. Current number of covered lives and of policyholders as of February 1, 2019: **417 covered lives; 240 policyholders**
12. Number of plans offered in 2020 and the change this represents from 2019: **4**

This is no change from the number of plans the Company offered in 2019.

Please note that inclusion of premium rates in this filing for a given offering should not be construed to mean that the offering will ultimately be made available for sale in the market. Final offering decisions will be made consistent with and within the timelines set forth in CMS rules and/or ACA regulations.

13. Corresponding contract form number, SERFF and Binder ID numbers: The corresponding SERFF binder number is **HGHM-PA20-125092192** affecting the following Company products and forms:

<b>Product Name / Type</b>	<b>Contract Form &amp; SERFF #</b>
Shared Cost PPO	HHIC/PPO-8; HGHM-131920522
Health Savings HDHP	HHIC/HDHP-8; HGHM-131921372

14. HIOS Issuer ID # and submission tracking number: **HIOS Issuer ID # 70194, Company Filing # 1A-SG-HHIC-2019 (SERFF Filing # HGHM-131937084)**

#### **Additional Filing Disclosures**

The Company has submitted all Required Documents stipulated by the Department, including the federal documents related to this filing, in its SERFF submission. In addition to the Required

Documents, the Company has submitted a Supplemental Exhibits file containing additional detailed exhibits on items referenced in the PA Actuarial Memorandum. All tables, exhibits, and detail in support of this filing and the PA Actuarial Memorandum have been included in Excel format. For the Department's benefit, the Excel files have retained their formulas to the extent possible.

CMS has instructed issuers that it no longer requires any interim changes to the URRT to be submitted to HIOS. CMS is requesting that only the initial URRT and the final URRT be submitted to HIOS.

### **Request for Confidentiality**

Please note that the rates and the supporting rate development contained in this Filing are competitively sensitive, are not in the public domain, and constitute business confidential proprietary/trade secret information that would cause harm to the competitive position of Highmark Health Insurance Company if disclosed to the public.

Public disclosure of any information contained in this Filing would allow Highmark Health Insurance Company competitors to better understand or discover its confidential and proprietary rating, pricing and/or marketing practices, would undermine competition in the Small Group market, and could have negative consequences for the operation of Highmark Health Insurance Company's business. Therefore, Highmark Health Insurance Company asserts that this Filing, in its entirety, constitutes Trade Secret and Confidential Proprietary Information and should not be disclosed.

It is our understanding that the Department does not intend to publish the confidential and proprietary information contained in this Filing or to otherwise permit this Filing and its confidential information, other than the redacted information and final approved rates, to be disclosed or released.

Furthermore and pursuant to the Pennsylvania Right-to-Know Law ("RTKL"), Highmark Health Insurance Company must be notified prior to release of information contained in this Filing and be given the opportunity to respond to requests for such information. Should the Department receive such request or require the release of information contained in this Filing for its own purposes, Highmark Health Insurance Company asserts its right to release a redacted version of the Filing. In accordance with the RTKL, please contact the Highmark Health Insurance Company RTKL representative identified below prior to release of any information contained in this Filing:

Ms. Tracie Gray, Director  
Highmark Health Insurance Company 2020 Small Group Market Rates  
May 21, 2019

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Lisa Martinelli, Esq.  
RTKL Representative  
VP Chief Privacy Officer  
120 Fifth Avenue, FAP Suite 2114  
Pittsburgh, PA 15222

Furthermore, it should be noted that Highmark Health Insurance Company is equally concerned that even if this information is released in aggregate form, it still may be easy to identify the carrier that submitted it.

Should you have any questions regarding the attached Filing, please feel free to contact me at (717) 302-3077 or via e-mail at: [frank.haver@highmark.com](mailto:frank.haver@highmark.com).

Sincerely,

A handwritten signature in blue ink that reads "Frank B. Haver". The signature is fluid and cursive, with a long horizontal stroke at the end.

Frank Haver, FSA, MAAA  
Vice President, Actuarial Services  
Highmark Inc.

cc: Robert Royer  
Tija Hilton-Phillips, Esq.  
William R. Sarniak

# Pennsylvania Actuarial Memorandum

## 1. Basic Information and Data

### A. Company Information (Table 0)

Table 0 has been completed as per the instructions. Please refer to the Excel file “2020\_SmGrp\_HHIC\_PAAME Exhibits\_052119.xlsm” submitted with this filing containing the department’s required tables.

Note that for the remainder of this document, “Company” refers to Highmark Health Insurance Company, “Market” refers to Small Group, and “Rating Area” refers to Pennsylvania Rating Regions 1, 2, 4, 5, 6, 7, and 9 (Western and Central, PA). No Service Area changes were made since the last approved filing.

### B. Rate History and Proposed Variations in Rate Changes

The most recent three years of historical rate changes in the Pennsylvania Small Group Market for the Company are as follows:

Year	Avg. Increase	SERFF ID#
2019	10.3%	HGHM-131496229
2018	3.3%	HGHM-131014792
2017	-6.0%	HGHM-130535961

Rate changes vary by plan, as plan benefits need adjusted to help maintain compliance with metal level requirements. Other base rate components (pricing actuarial factor and network discount) are also re-evaluated each year. For 2020, the Company’s proposed rate revisions vary by plan, according to the detail presented in the URRT, Worksheet 2, and the PA Rate Template Table 10.

### C. Average Rate Change

The average rate change from Table 10, column AC is a -2.96% increase. The rate change presented in this table reflects the average rate change over 2019 for the entire plan year, premium weighted based on the anticipated distribution of quarterly renewals.

For comparison, the change in 21-year-old non-tobacco premium PMPM calculated in Table 11, cell AN13, is a 0.1% increase. This rate change reflects the change for first quarter 2020 rates over first quarter 2019 rates.

### D. Membership Count (Table 1)

Table 1 has been completed according to the instructions with the average age, age breakdown and total number of members or member months, as indicated in the table. For the 2/1/2019 data, this table reflects all Small Group enrollment, including enrollment from 2018 and 2019 plan year plans.

## **E. Benefit Changes**

Most plans required benefit changes because of the new Actuarial Value (AV) calculator released for 2020 effective dates. The plan changes were mostly required so that the plans remained within the defined metal level AV requirements, and were enacted by adjusting member cost sharing and the maximum out of pocket levels.

## **F. Experience Period Claims and Premium (Table 2)**

Please see Table 2 for the experience period data for the most recent calendar year, for the Company and Market. The experience period paid claims data represents the 2018 calendar year results for all non-grandfathered policies in the single risk pool, with run out through February 2019 (2 months). This data is consistent with the data reported in Section I of Worksheet I of the URRT (see below commentary). As requested, the transitional policy experience is broken out in the "2020 Supplemental Exhibits - HHIC.xlsx" file included in this filing, on the worksheet labeled "Table 4 Transitional".

The components of this exhibit were developed as follows:

- The Earned Premium represents actual revenues earned in the experience period, less the anticipated MLR rebates expected to be paid by the Company (per the URRT instructions).
- The Allowed Claims represent our best estimate of the total claims prior to member cost sharing incurred during the experience period. The Allowed Claims include:
  - Two months of run out from the end of the experience period,
  - Claims processed outside of the Company's claims system (e.g., settlements and capitations), and
  - Our best estimate of claims incurred but not paid as of the end of the run out period.

Note that the Incurred Claims and Allowed Claims presented in the URRT are net of the Prescription Drug Rebates, while Table 2 has the Prescription Drug Rebates separately identified. As per the URR instructions, Allowed Claims do not include reinsurance recoveries or pooling charges, nor do they include quality incentive payments.

- There are no non-EHB benefits or costs in the experience period.
- There are no capitated claim services in the experience period.
- The EHB coverage for pediatric vision benefits are provided by our vision coverage vendor under a capitation arrangement. These costs are \$0.18 PMPM uniform across each member in the experience period and are reflected in Table 2 under the Total EHB Capitation section.
- Prescription Drug Rebates are used to reduce the level of Incurred Claims in the experience period.
- The Estimated Risk Adjustment represents our best estimate of the year end risk adjustment transfer payment that the Company will incur based on the results in the experience period. This amount is developed based on an analysis of Company data (risk scores as defined in the HHS Notice of Benefit and Payment Parameters, as well as other risk transfer formula components), and an estimate as to the Market-wide risk transfer component profile. This Market-wide profile is developed from available Market data, including the Interim Summary Report for 2018 risk adjustment published by CMS, the PA Insurance Department's calculation of 2018 risk adjustment

transfer amounts using the 5/1/2019 RATEE files, prior years' risk adjustment transfer results, publicly available data (such as MLR reports), and outside expertise from actuarial consultants.

- The calculated loss ratio is 79.26%.

## **G. Credibility of Data (Tables 2b, 3b, 4b)**

The experience period data for this Company is large enough to be fully credible. The results are based 100% on the experience period data, adjusted as described herein. Given the Company's fully credible rate development, Tables 2b, 3b, and 4b have not been populated.

## **H. Trend Identification (Table 3)**

Table 3 identifies the annual medical and prescription drug allowed claims cost and utilization trends, as requested by the Pennsylvania Insurance Department. The definitions of service categories, cost, and utilization in Table 3 are consistent with the URRT instructions. The numbers entered in the Cost and Utilization columns are consistent with those entered in Worksheet I, Section 2 of the URRT, except as noted below.

To arrive at our trend assumption, the experience period cost and utilization data were pulled from the Company's claims systems by the defined benefit categories. For the trend component development, the Company uses results from the combined experience of the following companies within the Highmark corporate family: Highmark Inc., Highmark Choice Company, Highmark Health Insurance Company, Highmark Benefits Group, and Highmark Coverage Advantage. The combined experience used is limited to the Company's Rating Area and Market, and provides a more credible base to analyze the trend components impacting the business in the Company's Market. The trend development uses a projection of allowed claim PMPMs by service category that takes into account many factors, including the Company's expectations of changes in in-network provider contracting levels, changes in out-of-network costs, changes in utilization from medical management programs, and changes in drug costs from impacts such as generic drug development and new drug treatments. To reflect the impact of provider contracting on trend, changes in in-network provider contracting levels, either known or anticipated, are factored into the cost component of trend using detailed analysis of the impact on claim levels from each material provider arrangement.

These projected costs measure and normalize for benefit leveraging, population aging, and historical changes in fee schedules, as well as company-wide utilization management programs, and external trend drivers. Based upon the coverage and demographics of our membership, our historical claim levels, adjusted for these factors and projected forward, represent the best estimates of trend for this block of business. Please note that since these historical claim levels are normalized throughout to account for these forces impacting claim utilization and costs, the claim levels presented will not reflect actual experience claim levels.

For the rate development, the Company uses the aggregate claim trend for all types of service, applied to the experience period. This is done so that the combined trend is reasonable in consideration of the various pricing trend components and the overall anticipated trend level. Based on a review of the projected normalized annual trends for 2019 and 2020, an overall claim trend of 7.45% (6.7% cost; 0.7%



utilization) was selected for the 2020 rate development. Please refer to the “Trend Support” exhibit in the “2020 Supplemental Exhibits - HHIC.xlsx” file showing the historical and projected normalized claim values for the Company’s trend determination, along with the Company’s proposed rate trend.

For this Small Group Market filing, quarterly rates are proposed, with rates adjusted each quarter based on the Total Annual Trend presented in Table 3, excluding the Induced Utilization trend. The quarterly trend is based on the cost and utilization trend from Table 3. Note that we zeroed out the impact of the Capitation trend in the Composite URRT Trend. The change in the Capitation charge is reflected in the Change in Benefits adjustment discussed below.

## **I. Historical Experience (Table 4)**

Table 4 presents the most recent 48 months (4 calendar years) of Company data with run-out through February 2019. Allowed claims are sourced from claim records with adjustments for claims that are outside of the claims processing system such as hospital settlements. This data, combined with the data from other companies within Highmark’s corporate family, was used to develop the trend in Table 3. Please see Section H for further details.

Since this table includes experience from transitional policies, the transitional policy experience by year is broken out in the “2020 Supplemental Exhibits - HHIC.xlsx” file included in this filing, on the worksheet labeled “Table 4 Transitional”.

## **2. Rate Development & Change**

### **A. Projected Index Rate, Market-Adjusted Index Rate, & Total Allowed Claims (Table 5)**

The development of the Projected Index Rate, Projected Market-Adjusted Index Rate, and Projected Total Allowed Claims, shown in Table 5, closely follows that utilized in the development presented in Worksheet 1 of the URRT, a discussion of which can be found in the Part III Actuarial Memorandum submitted in the Rate Filing Justification. Some of the items separately identified in Table 5 include:

- The Change in Morbidity represents an adjustment from the experience period claims to the projection period. See below for additional commentary related to the projection period assumptions.
- The Change in Demographics adjustment reflects the change in age and geography factors we expect from the experience period to the projection period.
- The Change in Network adjustment reflects the change in the allowed claims we anticipate due to changes in in-network discount levels between the experience period and the projection period.
- The Change in Benefits adjustment reflects the change in the EHB benefits (pediatric benefits) we anticipate between the experience period and the projection period, as well as the change in expected pharmacy rebates. See below for additional commentary related to these cost changes.

Please see the worksheet named “Table 5 Support” in the “2020 Supplemental Exhibits - HHIC.xlsx” file for the calculation of these factors from our experience period data and projected rate results.

Our initial step in developing the index rates is to determine the expected covered membership for the rating period. We estimate the covered member base by adjusting for those groups known to have lapsed during the experience period, and those that we expect will lapse prior to the projection period. Then we add in expected new business from groups with current transitional coverage moving to ACA plans, and groups currently with another carrier.

As we have seen through the transitional coverage availability period, many of the Small Group market customers have retained their pre-ACA coverage, and have yet to join the ACA risk pool. With the transitional coverage provisions extension through the end of 2020 for groups that renew on or prior to October 1, 2020, we continue to believe that many groups, especially lower-risk groups, will continue to retain their current transitional coverage until required to transfer coverage. As there is a significant level of transitional policy experience in this Company’s single risk pool, we anticipate that the morbidity within the ACA products will be considerably worse and reflect this with a Change in Morbidity adjustment of 1.418.

The Change in Benefits adjustment reflects our estimate of the additional costs associated with the addition of EHBs from the experience period to the coverage period, as well as a change in expected Pharmacy rebates.

The development of the Projected Paid to Allowed Ratio shown in Table 5 is presented in the “2020 Supplemental Exhibits - HHIC.xlsx” file in the “Table 5 Paid-to-Allowed” worksheet. This value is consistent with the paid-to-allowed ratio in the URRT Worksheet 2, line 4.15 Incurred Claims, divided by line 4.11 Allowed Claims.

Table 5 reflects that we are assuming a Projected Risk Adjustment payment in the projection period of \$9.20 PMPM. This amount reflects an anticipated risk transfer receipt of \$8.94, which is trended by the average 2020 pricing trend to arrive at the value of \$9.20 reflected in Table 5.

To arrive at the anticipated risk transfer for 2020, we bring in the risk adjustment calculation components for the projected 2020 Company portfolio (as discussed above), and use our current knowledge of the Pennsylvania Small Group market profile to estimate the risk adjustment components for the entire state Market. This Market-wide profile is developed from available Market data, including the Interim Summary Report on Risk Adjustment for the 2018 Benefit Year published by CMS, the PA Insurance Department’s calculation of 2018 risk adjustment transfer amounts using the 5/1/2019 RATEE files, prior years’ risk adjustment transfer results, publicly available data (such as MLR reports and rate filings), and outside expertise from actuarial consultants.

In analyzing the risk transfer components from Highmark’s corporate family of businesses, we have noticed a significant difference in results between the various regions (Western, Central, and Northeastern Pennsylvania). Thus when projecting the risk transfer components to 2020, we determine

each region's risk transfer results separately to arrive at the estimated risk transfer results for each company, as appropriate for each company's region.

The Company considered the impact of the high-cost risk pooling payment for the Small Group market, first implemented in 2018, in its development of its anticipated risk transfer for 2020, and is assuming that the net cost (payments less recoveries) will be negligible for the 2020 projection period.

The Projected Paid Exchange User Fees are developed from the Exchange user fees to be charged by CMS in 2020, multiplied by the percentage of business we expect to purchase Market coverage through the Exchange for this Company. For this Company, all business will be offered Off Exchange in 2020, so there are no Exchange User Fees charged in the rate development.

For this Small Group Market filing, Table 5A has been completed, showing the number of member months renewing by quarter, and the quarterly Single Risk Pool Projected Allowed Claims.

## **B. Retention Items (Table 6)**

Table 6 has been completed with the requested retention elements for the proposed rates for the rating period. The administrative expenses and taxes and fees presented in the rate development in Table 6 cell C53 equal the Taxes and Fees in Table 10. Due to the Risk Adjustment User Fee not having a line in Table 6, the sum of the taxes and fees in Table 6 will not match the total taxes and fees in Table 6.

Administrative costs reflect internal costs that the Company is projected to incur in the projected experience period, and are developed from standard expense allocation methods. Agent/broker fees and commissions reflect our anticipated costs for these items in the experience period.

The development of internal administrative costs utilizes an allocation of Company costs back to lines of business. The allocation method uses measureable stats such as claims worked, inquiries worked, contracts, and members to allocate the majority of expenses. When possible, expenses are direct charged if they can be identified by product instead of going through an allocation method. For corporate allocations, a TCI (total costs incurred) methodology is generally used to allocate by product.

The following Taxes and Fees were included in the rate development:

- \$2.16 per member per annum for the Risk Adjustment User Fee; and
- 2.0% for PA Premium Tax; and
- 2.8% for the Health Insurer Provider Fee.

Note the following regarding plan level retention items:

- The rate development reflects a 0% risk/contribution to surplus margin for all products and plans. The Company has voluntarily refrained from including a risk and contingency factor in this filing. By this voluntary action, the Company is not waiving any right to include a risk and contingency factor which the Company believes is consistent with historical and legal interpretations of the Company and the Department.

- The administrative expenses vary by region due to the costs associated with the anticipated utilization of services we expect by Service Area.
- Expenses for Quality Improvement Initiatives are estimated to be 7% of internal Company expenses, based upon historical analysis of these costs.

Please note that for the Small Group Market the Projected Required Revenue PMPM shown in Table 6 will not match the URRT Worksheet 2 value in line 4.17 Premium since the value in the URRT is based on a January 1 effective date without reflecting the impact of quarterly rates in the Small Group market.

### **C. Normalized Market-Adjusted Projected Allowed Total Claims (Table 7)**

The normalization factors presented in Table 7 are each determined from the underlying membership demographics expected in the projected rating period. The 2019 values are pulled from the prior year's filing, while the 2020 values represent our projection for 2020 assumed in the 2020 rate development.

The Age Factor is the weighted average of the Average Age Factors for the Current ACA Book of Business as of the End of Year 2018 and for the Membership Moving to the ACA Book (from transitional and new business).

The Geographic Calibration Factor is the weighted average of the Area Factors by County. This average is weighted by membership.

The Tobacco Surcharge is not applicable since the Company does not use one.

### **D. Components of Rate Change (Tables 8 and 9)**

Table 8 presents the components of change in the proposed 2020 Calibrated Plan Adjusted Index Rate (PMPM). The 2019 base period allowed claims is carried over from the 2019 rate filing. Row H of Table 8 may differ from Row A due to the detailed breakdown of all the components of the increases in rows B through G not calculating exactly to the change in the calibrated plan adjusted index rate in Row A, which is the more accurate percentage change based on the rate development.

Table 9 presents the data elements supporting the calculations in Table 8. The amounts shown in the 2019 Column match those entered in the 2019 Column in the plan year 2019 rate filing.

## **3. Plan Rate Development (Table 10)**

Table 10 showing the plan rate development has been completed following the instructions in the 2020 ACA-Compliant Health Insurance Rate Filing Guidance. This table shows the plans that the Company intends to offer in 2020, as well as plans discontinued from the 2019 portfolio for 2020. Since many Small Group market enrollees as of 2/1/18 are still in plan year 2018 plans, the enrollees in plan year 2018 plans were mapped to the plan year 2019 plan that we anticipate they will renew into in 2019. The calibrated plan adjusted index rates for 2020 and 2019, and all of the supporting factors, are calculated according to the instructions.

Each plan takes the Market Adjusted Index Rate and multiplies by the Pricing AV, Benefit Richness Factor, Benefits in Addition to EHB Factor, Provider Network Factor, Catastrophic Eligibility Factor, and Non-Funding of CSR Adjustment Factor (not applicable to Small Group) in order to calculate the Pure Premium. The Pure Premium is then grossed up to account for expenses (Admin Costs, Taxes & Fees, and Profit or Contingency) in order to calculate the Calibrated Plan Adjusted Index Rate. Since each component of the Calibrated Plan Adjusted Index Rate is applied multiplicatively (including the Plan AV Pricing Value), plan premiums are in proportion to the Plan AV Pricing Values.

Note that the HHS Actuarial Value Calculator was able to accommodate all of the Company's benefit designs, and that no adjustments were needed from the values produced by the calculator.

The requested Induced Utilization Exhibit was completed and is presented within the "2020 Supplemental Exhibits - HHIC.xlsx" file submitted with this filing (worksheet named "Induced Utilization"). Note that the calculated Induced Utilization factor in Column (8) is a component of the Actuarial Value Allowable Modifier. As such, it is adjusted by the Average Benefit Richness normalization factor of 1.0730. In multiplying the Induced Utilization column (8) result by the Average Benefit Richness normalization factor, the result is the Induced Utilization factor appropriate for the plan's metal level (before normalization), which are the CMS-prescribed assumptions used in the risk adjustment transfer calculation. These factors have been unchanged since they were originally developed for the 2014 rating period.

The member-weighted average of the pure plan-level Induced Utilization factors in the last column of the induced utilization exhibit against the projected membership does match the 1.000 expectation of the Department. This calculation can be seen at the bottom of the Induced Utilization Exhibit, where the formulas used in the calculation have been retained.

The Child Capping Adjustment is applied to the Age Calibration Factor in Table 10 to reflect the limitation on the number of children allowed in rating. This factor is determined by estimating the amount of lost revenue due to this restriction, and applying the resulting factor to the normalized age factor in the base rate development. Support for the calibration factors is shown in the "2020 Supplemental Exhibits - HHIC.xlsx" file on the worksheet named "Table 10 Calibration Factors".

#### **4. Plan Premium Development for 21-Year-Old Non-Tobacco User (Table 11)**

Table 11 presents the Company's 21-year-old non-tobacco premium in the Market for each rating quarter in 2020 (see note below). As mentioned in Section 1.C above, the change in 21-year-old non-tobacco premium PMPM calculated in this table is a 0.1% increase, while the "percent rate change requested" from the SERFF Rate Review Detail Screen (and Table 10) is -2.96%.

## **5. Plan Factors**

### **A. Age and Tobacco Factors (Table 12)**

Please see Table 12 for the Company's age and tobacco factors.

### **B. Geographic Factors (Table 13)**

Please see Table 13 for the Company's geographic factors. The Company's factors for the rating period are unchanged from the currently approved factors.

As mentioned in the Cover Letter, the Company is not changing its product offerings by Rating Area.

### **C. Network Factors (Table 14)**

Please see Table 14 for the Company's network rating factors.

### **D. Service Area Composition**

The Company follows the Rating Area designations created by the state. All counties within a Rating Area are serviced by the Company, according to the Rating Areas specified in Table 14. The Company has submitted its current 2019 service area and its proposed 2020 service area in the file "Pennsylvania Counties Map - 2020 Filings - HHIC.pdf" submitted with this filing. There are no proposed changes to the Company's service area from 2019 to 2020.

### **E. Composite Rating**

The Company is currently not planning to use CMS's composite rating method for any of its off-SHOP plans offered during the rating period.

## **6. Actuarial Certifications**

I am a member of the American Academy of Actuaries and meet its qualification standards for actuaries issuing statements of actuarial opinions in the United States. This filing is prepared on behalf of the Company to accompany its rate filing (for calendar year 2020) for the Small Group Market off the Pennsylvania Exchange.

I hereby certify that the projected Index Rate is, to the best of my knowledge and understanding:

- In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80 and 147.102)
- Developed in compliance with the applicable Actuarial Standards of Practice
- Reasonable in relation to the benefits provided and the population anticipated to be covered
- Neither excessive nor deficient.

I certify that the index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates.

I certify that all factor, benefit and other changes from the prior approved filing have been disclosed in the 2020 PA Actuarial Memorandum Rate Exhibits.

I certify that new plans are not considered modifications of existing plans (per the uniform modification standards in 45 CFR 147.106).

I certify that the geographic rating factors reflect only differences in the costs of delivery (which can include unit cost and provider practice pattern differences) and do not include differences for population morbidity by geographic area.

I certify that the AV Calculator was used to determine the AV Metal Values shown in Part I of Worksheet 2 in the URRT for all plans.

The Unified Rate Review Template does not demonstrate the process used by the Company to develop the rates. Rather, it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of Qualified Health Plans for Federally-facilitated Exchanges, and for certification that the Index Rate is developed in accordance with Federal regulation and used consistently and only adjusted by the allowable modifiers.

I certify that the information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2020 Rate Filing Justification.

Signed: [Redacted]

Date: 05/21/2019

# Rate Change Summary

## Highmark Health Insurance Company (HHIC) – Small Group Plans

Rate request filing ID # HGHM-131937084 - This document is prepared by the insurance company submitting the rate filing as a consumer tool to help explain the rate filing. It is not intended to describe or include all factors or information considered in the review process. For more information, see the filing at

<http://www.insurance.pa.gov/Consumers/ACARelatedFilings/>

### Overview

Initial requested average rate change:	-2.96% <sup>1</sup>
Revised requested average rate change:	N/A <sup>1</sup>
Range of requested rate change:	-3.1% to -0.7%
Effective date:	January 1, 2020
Mapped Members:	417
Available in:	Rating Areas 1, 2, 4, 5, 6, 7, 9

### Key information

#### Jan. 2018-Dec. 2018 financial experience

Premiums	\$275,251,939
Claims	\$218,169,902
Administrative expenses	\$35,146,858
Taxes & fees	\$12,747,468
Company made (after taxes)	<b>\$9,187,711</b>

#### How it plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2020:

Claims:	85.3%
Administrative:	9.9%
Taxes & fees:	4.8%
Profit:	0%

The company expects its annual medical costs to increase **7.45%**.

### Explanation of requested rate change

The proposed increases are being driven by rising medical care costs, which are expected to continue through the remainder of 2019 and throughout 2020 as a result of both higher utilization and the increasing cost of healthcare services, and the underlying morbidity of the population within HHIC's ACA products.

<sup>1</sup> Note that insurers will have the opportunity to revise their rate change request in July, after they are scheduled to receive updated information about the impact of a federal program called risk adjustment. This document will be updated accordingly at that time.



PA Rate Template Part I  
Data Relevant to the Rate Filing

Table 0. Identify Information

Carrier Name:	Highmark Health Insurance Co. (PA)	
Product(s):	PHO	
Market Segment:	Small Group	
Rate Effective Date:	1/1/2020	to 12/31/2020
Base Period Start Date:	1/1/2019	to 12/31/2019
Date of Most Recent Membership:	2/1/2019	

Table 1. Number of Members

Average Age	Member months	Members	Member months
	Experience Period	Current Period (as of 02-01-2019)	Projected Rating Period
	37.0	36.0	37.0
Total	615,959	47,462	4,392
13-17	112,124	4,443	375
18-24	69,794	5,496	508
25-29	44,971	3,175	294
30-34	41,574	3,377	312
35-39	46,661	3,663	339
40-44	45,710	3,496	323
45-49	33,906	4,317	405
50-54	31,125	4,756	440
55-59	42,519	4,015	366
60-64	42,488	3,093	286
65+	18,019	1,773	164

\*Tables 1, 2 and 4 must include data for all non-granfathered business (ACA compliant and Transitional)

Table 2. Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member + HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment
\$ 275,433,959.00	\$ 227,319,942.30	\$ 231,279,728.29	615,959	\$ 5,503,662.84	\$ 266,793,441.04	\$	\$ 13,169,619.22	\$ 109,743.20	\$	\$ (6,220.13)
<b>Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)</b>										\$ 79.206
<b>Loss Ratio</b>										79.206

\*Express Prescription Drug Rebates as a negative number

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	6.2%	0.6%	0.0%	6.8%	14.2%
Outpatient Hospital	6.7%	0.6%	0.7%	8.0%	14.1%
Professional	6.7%	0.6%	0.7%	8.0%	14.8%
Other Medical	6.7%	0.6%	0.7%	8.0%	14.8%
Capitation				54.4%	4.0%
Prescription Drugs	6.7%	0.6%	0.7%	8.0%	18.4%
Total Annual Trend				2.4	100.00%
Months of Trend				1.138	
Total Applied Trend Projection Factor					

\* Express Cost, Utilization, Induced Utilization and Weight as percentages

\*\* Shaded = UDR Trend

Table 4. Historical Experience

Month Year	Total Annual Premium	Inurred Claims	Completion Factor*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-15	\$ 43,656,494.03	\$ 40,183,822.38	1.0000	\$ 43,656,494.03	127,676	\$ 341.93	\$	\$ (1,022,298.11)	\$ 52,572,126.58	\$ 413.76
Feb-15	\$ 43,428,783.85	\$ 40,183,822.38	1.0000	\$ 43,428,783.85	133,449	\$ 351.80	\$	\$ (889,238.88)	\$ 51,607,798.13	\$ 413.19
Mar-15	\$ 39,139,413.39	\$ 38,199,189.30	1.0000	\$ 39,139,413.39	140,434	\$ 326.65	\$	\$ (964,843.84)	\$ 48,883,403.18	\$ 382.65
Apr-15	\$ 38,199,189.30	\$ 36,006,776.40	1.0000	\$ 38,199,189.30	138,876	\$ 322.34	\$	\$ (952,733.61)	\$ 46,195,970.29	\$ 371.78
May-15	\$ 40,296,733.90	\$ 38,968,844.31	1.0000	\$ 40,296,733.90	117,034	\$ 344.32	\$	\$ (938,651.46)	\$ 46,470,888.69	\$ 397.07
Jun-15	\$ 38,968,844.31	\$ 36,006,776.40	1.0000	\$ 38,968,844.31	112,540	\$ 346.27	\$	\$ (951,710.81)	\$ 44,980,422.61	\$ 399.69
Jul-15	\$ 34,833,447.81	\$ 32,517,036.29	1.0000	\$ 34,833,447.81	113,507	\$ 312.95	\$	\$ (951,118.85)	\$ 40,372,860.79	\$ 362.72
Sep-15	\$ 37,519,036.29	\$ 36,006,776.40	1.0000	\$ 37,519,036.29	109,878	\$ 341.46	\$	\$ (881,193.70)	\$ 42,805,178.98	\$ 389.57
Oct-15	\$ 36,006,776.40	\$ 34,833,447.81	1.0000	\$ 36,006,776.40	105,278	\$ 347.32	\$	\$ (882,256.10)	\$ 42,245,468.14	\$ 397.20
Nov-15	\$ 36,006,776.40	\$ 34,833,447.81	1.0000	\$ 36,006,776.40	105,500	\$ 349.31	\$	\$ (879,774.80)	\$ 41,161,013.14	\$ 393.65
Dec-15	\$ 34,833,447.81	\$ 32,517,036.29	1.0000	\$ 34,833,447.81	106,876	\$ 329.84	\$ 76,583,114.14	\$ (791,485.70)	\$ 30,995,120.97	\$ 356.78
Jan-16	\$ 24,728,187.02	\$ 23,128,187.02	1.0000	\$ 24,728,187.02	85,300	\$ 289.23	\$	\$ (773,163.61)	\$ 29,277,024.38	\$ 358.16
Feb-16	\$ 25,660,479.15	\$ 24,059,657.38	1.0000	\$ 25,660,479.15	83,841	\$ 310.07	\$	\$ (772,413.20)	\$ 31,880,284.54	\$ 380.14
Mar-16	\$ 27,128,187.02	\$ 25,517,036.29	1.0000	\$ 27,128,187.02	83,200	\$ 326.21	\$	\$ (787,739.72)	\$ 32,121,204.27	\$ 388.06
Apr-16	\$ 25,107,098.08	\$ 23,600,949.66	1.0000	\$ 25,107,098.08	87,469	\$ 289.47	\$	\$ (760,171.00)	\$ 29,375,707.88	\$ 356.20
May-16	\$ 25,517,036.29	\$ 23,600,949.66	0.9999	\$ 25,517,036.29	81,820	\$ 311.87	\$	\$ (754,188.76)	\$ 29,679,601.24	\$ 362.74
Jun-16	\$ 28,963,887.49	\$ 26,963,887.49	0.9999	\$ 28,963,887.49	81,387	\$ 354.70	\$	\$ (750,013.16)	\$ 32,216,984.48	\$ 395.09
Jul-16	\$ 24,305,818.21	\$ 22,800,000.04	0.9999	\$ 24,305,818.21	79,304	\$ 308.00	\$	\$ (733,183.48)	\$ 28,811,309.16	\$ 363.13
Aug-16	\$ 28,900,664.93	\$ 26,963,887.49	0.9999	\$ 28,900,664.93	78,888	\$ 374.88	\$	\$ (727,162.59)	\$ 32,884,018.80	\$ 410.51
Sep-16	\$ 26,076,372.38	\$ 24,059,657.38	0.9998	\$ 26,076,372.38	79,446	\$ 332.47	\$	\$ (723,088.98)	\$ 29,703,375.96	\$ 378.65
Oct-16	\$ 26,396,202.11	\$ 24,059,657.38	0.9998	\$ 26,396,202.11	77,400	\$ 343.09	\$	\$ (713,446.71)	\$ 30,206,769.98	\$ 390.27
Nov-16	\$ 26,682,741.13	\$ 24,059,657.38	0.9997	\$ 26,682,741.13	76,788	\$ 347.58	\$	\$ (707,805.50)	\$ 30,416,037.54	\$ 396.10
Dec-16	\$ 297,103,584.45	\$ 280,522,826.64	0.9999	\$ 297,103,584.45	70,280	\$ 426.51	\$ 52,684,532.20	\$ (646,891.22)	\$ 29,743,809.65	\$ 386.83
Jan-17	\$ 24,808,009.21	\$ 23,600,949.66	0.9997	\$ 24,808,009.21	69,641	\$ 354.80	\$	\$ (1,119,814.01)	\$ 26,486,400.65	\$ 385.24
Feb-17	\$ 20,445,788.43	\$ 19,652,000.41	0.9997	\$ 20,445,788.43	69,207	\$ 298.41	\$	\$ (1,096,009.52)	\$ 24,755,242.51	\$ 360.89
Mar-17	\$ 24,239,907.28	\$ 22,800,000.04	0.9997	\$ 24,239,907.28	68,276	\$ 352.55	\$	\$ (1,028,148.91)	\$ 28,600,880.94	\$ 418.90
Apr-17	\$ 23,619,222.88	\$ 22,027,272.40	0.9997	\$ 23,619,222.88	68,217	\$ 337.58	\$	\$ (1,080,252.00)	\$ 26,449,374.41	\$ 390.68
May-17	\$ 24,499,099.84	\$ 22,800,000.04	0.9994	\$ 24,499,099.84	68,019	\$ 360.24	\$	\$ (1,177,670.46)	\$ 28,248,409.26	\$ 414.41
Jun-17	\$ 23,531,865.24	\$ 21,547,726.21	0.9994	\$ 23,531,865.24	67,867	\$ 348.97	\$	\$ (1,070,788.36)	\$ 27,095,317.58	\$ 399.24
Jul-17	\$ 22,454,707.81	\$ 21,475,929.01	0.9991	\$ 22,454,707.81	66,471	\$ 338.06	\$	\$ (1,052,680.14)	\$ 25,606,718.51	\$ 385.23
Aug-17	\$ 24,905,017.67	\$ 23,903,640.47	0.9991	\$ 24,905,017.67	66,072	\$ 372.38	\$	\$ (1,046,171.90)	\$ 28,187,044.57	\$ 429.74
Sep-17	\$ 23,930,844.76	\$ 21,907,210.16	0.9989	\$ 23,930,844.76	65,668	\$ 360.16	\$	\$ (1,030,013.29)	\$ 27,044,844.81	\$ 422.21
Oct-17	\$ 24,909,516.84	\$ 23,095,687.26	0.9985	\$ 24,909,516.84	64,811	\$ 374.55	\$	\$ (1,027,024.91)	\$ 27,431,873.25	\$ 423.00
Nov-17	\$ 22,885,231.57	\$ 21,903,245.27	0.9988	\$ 22,885,231.57	64,600	\$ 354.77	\$	\$ (1,021,049.91)	\$ 26,074,900.79	\$ 403.63
Dec-17	\$ 15,085,279.67	\$ 14,511,447.40	0.9983	\$ 15,085,279.67	53,473	\$ 283.99	\$ 44,693,880.45	\$ (846,866.76)	\$ 19,003,799.60	\$ 355.38
Jan-18	\$ 18,315,621.64	\$ 17,309,622.48	0.9976	\$ 18,315,621.64	52,369	\$ 350.58	\$	\$ (1,119,884.57)	\$ 22,159,193.60	\$ 423.14
Feb-18	\$ 17,309,622.48	\$ 16,211,546.90	0.9976	\$ 17,309,622.48	52,029	\$ 329.96	\$	\$ (1,115,194.61)	\$ 20,510,887.50	\$ 396.55
Mar-18	\$ 18,709,772.85	\$ 17,643,165.42	0.9966	\$ 18,709,772.85	51,989	\$ 351.43	\$	\$ (1,113,939.91)	\$ 22,166,044.61	\$ 428.09
Apr-18	\$ 18,021,876.61	\$ 17,120,981.16	0.9945	\$ 18,021,876.61	51,770	\$ 350.83	\$	\$ (1,104,827.55)	\$ 20,932,082.98	\$ 404.33
May-18	\$ 19,324,564.73	\$ 18,440,661.57	0.9939	\$ 19,324,564.73	51,886	\$ 372.10	\$	\$ (1,108,268.67)	\$ 22,188,073.82	\$ 427.92
Jun-18	\$ 17,807,754.15	\$ 17,069,005.32	0.9910	\$ 17,807,754.15	51,696	\$ 347.99	\$	\$ (1,105,295.98)	\$ 20,884,348.15	\$ 404.31
Jul-18	\$ 18,017,811.08	\$ 17,278,784.27	0.9879	\$ 18,017,811.08	51,486	\$ 354.39	\$	\$ (1,100,977.82)	\$ 20,893,444.29	\$ 405.93
Aug-18	\$ 18,375,416.60	\$ 17,643,165.42	0.9874	\$ 18,375,416.60	51,389	\$ 361.19	\$	\$ (1,098,710.13)	\$ 21,166,054.51	\$ 415.58
Sep-18	\$ 17,308,877.67	\$ 17,747,183.94	0.9801	\$ 17,308,877.67	51,345	\$ 345.45	\$	\$ (1,097,790.76)	\$ 20,055,167.91	\$ 390.60
Oct-18	\$ 19,173,154.27	\$ 18,684,487.25	0.9740	\$ 19,173,154.27	50,930	\$ 386.50	\$	\$ (1,088,917.78)	\$ 22,252,017.61	\$ 440.13
Nov-18	\$ 17,480,792.27	\$ 16,845,374.17	0.9676	\$ 17,480,792.27	50,771	\$ 359.72	\$	\$ (1,084,449.22)	\$ 21,053,974.15	\$ 415.09
Dec-18	\$ 275,119,919.00	\$ 15,294,443.80	0.0138	\$ 15,643,583.05	48,200	\$ 323.95	\$ 15,503,662.84	\$ (1,032,472.80)	\$ 19,026,484.61	\$ 406.02

\* Express Completion Factor as a percentage

\*\* Express Prescription Drug Rebates as a negative number

Carrier Name: Highmark Health Insurance Co. (HHC)  
 Product(s): PPO  
 Market Segment: Small Group  
 Rate Effective Date: 1/1/2020

Table 2b. Manual Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member & HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)										
Total Risk										
*Express Prescription Drug Rebates as a negative number										
0.00%										

Table 3b. Manual Trend Components

Service Category	Cost*	Utilization*	Induced Utilization*	Composite Trend	Weights*
Inpatient Hospital				0.00%	
Outpatient Hospital				0.00%	
Professional				0.00%	
Other Medical				0.00%	
Chiropractic				0.00%	
Prescription Drugs				0.00%	
Total Annual Trend				0.00%	1.00%
Months of Trend				12	
Total Applied Trend Projection Factor				1.000	

\*Express Cost, Utilization, Induced Utilization and Weights as percentages

Table 4b. Historical Manual Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-14										
Feb-14										
Mar-14										
Apr-14										
May-14										
Jun-14										
Jul-14										
Aug-14										
Sep-14										
Oct-14										
Nov-14										
Dec-14										
Jan-15										
Feb-15										
Mar-15										
Apr-15										
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Jan-18										
Feb-18										
Mar-18										
Apr-18										
May-18										
Jun-18										
Jul-18										
Aug-18										
Sep-18										
Oct-18										
Nov-18										
Dec-18										

\*Express Completion Factor as a percentage

\*\*Express Prescription Drug Rebates as a negative number

**PA Rate Template Part II  
Rate Development and Change**

Carrier Name: Highmark Health Insurance Co. (NH2)  
 Product/ID: PPO  
 Market Segment: Small Group  
 Rate Effective Date: 1/1/2020

**Table 5. Development of the Projected Index Rate, Market-Adjusted Index Rate, and Total Allowed Claims**

Development of the Projected Index Rate	Actual Experience Data	Manual Data
Total Allowed EIB Claims + EIB Cancellation PMPM (net of prescription drug related) PMPM	\$ 411.84	
Two year trend adjustment factor	1.18	1.00
Unloaded Projected Allowed EIB Claims PMPM	\$ 485.11	
Index Risk Pool Adjustment Factors		
Chosen Alternative	2.43	0.00
Chosen in Other	1.025	0.00
Chosen in Demographics	1.025	
Chosen in Network	1.000	
Chosen in Benefits	1.000	
Chosen in Other	1.000	
Total Adjusted Projected Allowed EIB Claims PMPM	\$ 681.20	
Specialty factors	100%	0%
Blended Projected EIB Claims PMPM	\$ 681.20	
Development of the Market-Adjusted Index Rate and Total Allowed Claims		
Adjusted Projected Allowed EIB Claims PMPM	\$ 681.20	
Adjusted Projected Allowed EIB Claims PMPM (net only populate for small group filings)	\$ 700.82	
Projected Total Allowed Claims	\$ 681.20	
Projected Paid EIB Claims PMPM	\$ 564.83	
Market-Adjusted Factors		
Projected Risk Adjustment PMPM	\$ 9.00	
Projected Risk Exchange User Fee PMPM	\$ -	
Market-Adjusted Projected Paid EIB Claims PMPM	\$ 555.83	
Market-Adjusted Projected Allowed EIB Claims PMPM	\$ 681.20	Market-Adjusted Index Rate
Projected Allowed Non-EIB Claims PMPM	\$ -	
Market-Adjusted Projected Paid Total Claims PMPM	\$ 555.83	
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 681.20	

Actual Experience PMPM should be consistent with the Index Rate for Experience Period on UBRP

See UBRP Instructions

See UBRP Instructions

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**For Informational Purposes only - No input required.**

Blended Base Period Unloaded Claims before Normalization	\$ 411.84	= Index Rate of Experience Period on UBRP
Blended Earned Premium	\$ 275,313,068.00	
Blended Loss Ratio	70.26%	

**Table 5A. Small Group Projected Index Rate with Quarterly Trend**

Effective Date	1/1/2020	4/1/2020	7/1/2020	10/1/2020	Total Unpaid Risk Pool
# of Member Months Remaining in Quarter	2,623	596	831	1,576	4,626
Adjusted Projected Allowed EIB Claims PMPM (C)	\$ 681.20	\$ 681.20	\$ 681.20	\$ 681.20	\$ 681.20
Months of Trend	-	3	6	9	12
Annual Trend	7.45%	7.45%	7.45%	7.45%	7.45%
Single Risk Pool Projected Allowed Claims	\$ 681.20	\$ 681.54	\$ 706.11	\$ 738.91	\$ 700.82
Quarterly Trend Factor	200.0%	203.8%	208.7%	205.7%	202.9%
2020 Trend Factors by Quarter	0.972%	0.985%	1.007%	1.015%	

**Table 6. Retention**

Retention Items / Expense in percentages	Percentage	PMPM Amounts
Administrative Expenses	0.16%	\$4.90
General and Claims	0.13%	\$42.76
Agent/Broker Fees and Commissions	2.39%	\$79.10
Quality Improvement Initiatives	0.46%	\$15.30
Taxes and Fees	4.81%	\$161.46
Risk User Fee	0.00%	\$0.00
PA Premium Tax (if applicable)	2.00%	\$67.00
Federal Income Tax	0.00%	\$0.00
Health Insurance Provider Fee (Prorated for Small Groups only)	2.80%	\$93.26
Profit/Contingency (after tax)	0.00%	\$0.00
Total Retention	14.35%	\$466.78
Projected Required Revenue PMPM		\$ 513.06

**Table 7. Normalized Market-Adjusted Projected Allowed Total Claims**

Normalization Factors	2019	2020
Average Age Factor	1.00	1.00
Average Geographic Factor	1.00	1.00
Average Tobacco Factor	1.00	1.00
Average Benefit Richness (Indicated demand)	1.00	1.00
Average Network Factor	1.00	1.00
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 702.93	\$ 681.20
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 443.78	\$ 425.56

**Table 8. Components of Rate Change**

Rate Components	2019	2020	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$ 427.83	\$ 424.86	\$ -2.97	-0.7%
B. Base period allowed claims before normalization	\$ 406.71	\$ 411.84	\$ 5.13	1.3%
C. Normalization factor component of change	\$ (194.87)	\$ (683.30)	\$ -488.43	-125.4%
D. Changes in Normalized Allowed Claims Adjustment Components				
01. UBRP Trend	\$ 46.14	\$ 64.11	\$ 17.97	38.9%
02. UBRP Multiplier	\$ 73.42	\$ 118.17	\$ 44.75	61.0%
03. UBRP Other	\$ 3.12	\$ 15.15	\$ 12.03	385.4%
04. UBRP Other	\$ 0.34	\$ (0.89)	\$ -1.23	-362.1%
05. Normalized Exchange User Fee on an allowed basis	\$ -	\$ -	\$ -	0.0%
06. Normalized Exchange User Fee on an allowed basis	\$ 205.69	\$ 404.12	\$ 198.43	96.5%
E. Changes in Allowable Plan Adjusted Level Components				
01. Network	\$ -	\$ -	\$ -	0.0%
02. Pricing AY	\$ 81,154,021.79	\$ 78,108	\$ -81,153,913.69	-0.1%
03. Benefit Richness	\$ (2.00)	\$ 23.79	\$ 25.79	1,289.5%
04. Geographic Eligibility	\$ -	\$ -	\$ -	0.0%
05. Subtotal - Sum(F1-F5)	\$ (88.18)	\$ (14,900)	\$ -14,811.82	-16,809.5%
F. Changes in Retention Components				
01. Administrative Expenses	\$ 39.52	\$ 42.27	\$ 2.74	6.9%
02. Taxes and Fees	\$ 23.80	\$ 20.32	\$ -3.48	-14.6%
03. Profit and/or Contingency	\$ -	\$ -	\$ -	0.0%
04. Subtotal - Sum(F1-F3)	\$ 63.32	\$ 62.59	\$ -0.73	-1.1%
G. Changes in Miscellaneous Items	\$ -	\$ -	\$ -	0.0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 370.83	\$ 412.00	\$ 41.17	11.1%

**Table 9. Year-over-Year Data to Support Table 8**

	2019	2020
Field-to-Allowed	0.73%	0.80%
UBRP Trend (Total Allowed Trend Factor)	1.18%	1.13%
UBRP Multiplier	1.34%	1.43%
UBRP Other	0.00%	0.00%
Risk Adjustment	\$ 0.86	\$ (0.20)
Exchange User Fee	\$ -	\$ (0.42)
Network	1.00%	1.00%
Pricing AY	0.77%	0.80%
Benefit Richness	1.00%	1.01%
Catastrophic Eligibility	1.00%	1.00%
Administrative Expenses	0.00%	0.00%
Taxes and Fees	0.44%	0.40%
Profit and/or Contingency	0.00%	0.00%





**PA Rate Template Part IV B - Small Group Annual**  
**Table 11. Plan Premium Development for 21-Year-Old Non-Tobacco User**

Carrier Name: Highmark Health Insurance Co. (HHIC)  
 Product(s): PPO  
 Market Segment: Small Group  
 Rate Effective Date: 1/1/2020

Plan Number	HIOS Plan ID (Standard Component)	1/1/2019 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2020	1/1/2020 Plan HIOS Plan ID (If 1/1/2019 Plan Discontinued & Mapped)	Metallic Tier	Exchange On/Off or Off
Totals						
These cells auto-fill using the data entered in Table 10.						
Plan 1	70184PA0220006	Shared Cost PPO \$1500	M	70184PA0220006	Gold	Off
Plan 2	70184PA0230002	Shared PPO Embedded	M	70184PA0230002	Bronze	Off
Plan 3	70184PA0240006	Shared Cost PPO \$1500	M	70184PA0240006	Gold	Off
Plan 4	70184PA0250002	Shared PPO Embedded	M	70184PA0250002	Bronze	Off

Quarter 1 2019, 21-year-old Non-Tobacco Premium PMPM									Average (weighted by enrollment by rating area)
1	2	3	4	5	6	7	8	9	
\$ 400.80	\$ 400.80	\$ -	\$ 395.76	\$ 396.96	\$ 426.58	\$ 440.27	\$ -	\$ 426.58	\$ 416.38



**PA Rate Template Part IV B - Small Group Annual**  
**Table 11. Plan Premium Development for 21-Year-Old Non-Tobacco User**

Carrier Name: Highmark Health Insurance Co. (HHIC)  
 Product(s): PPO  
 Market Segment: Small Group  
 Rate Effective Date: 1/1/2020

Plan Number	HDS Plan ID (Standard Component)	1/1/2019 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2020	1/1/2020 Plan HDS Plan ID (If 1/1/2019 Plan Discontinued & Mapped)	Quarter 2 2020, 21-year-old Non-Tobacco Premium PMPM									Average (weighted by enrollment by rating area)										
					1	2	3	4	5	6	7	8	9											
Totals					\$ 408.07	\$ 408.07	\$ -	\$ 408.07	\$ 395.20	\$ 424.80	\$ 448.23	\$ -	\$ 423.51	\$ 424.24	\$ 415.47	\$ 415.47	\$ -	\$ 408.11	\$ 372.95	\$ 442.68	\$ 456.45	\$ -	\$ 441.37	\$ 431.93
Plan 1	70194PA0220006	Shared Cost PPO S1500	M	70194PA0220006	\$ 408.07	\$ 408.07	\$ -	\$ 408.07	\$ 408.07	\$ 437.52	\$ 437.52	\$ -	\$ 429.13	\$ 408.07	\$ 415.47	\$ 415.47	\$ -	\$ 415.47	\$ 415.47	\$ 445.45	\$ 445.45	\$ -	\$ 436.88	\$ 415.47
Plan 2	70194PA0230002	Survive PPO Embedded	M	70194PA0230002	\$ 303.68	\$ 303.68	\$ -	\$ 303.68	\$ 303.68	\$ 325.59	\$ 325.59	\$ -	\$ 319.33	\$ 303.68	\$ 309.18	\$ 309.18	\$ -	\$ 309.18	\$ 309.18	\$ 331.49	\$ 331.49	\$ -	\$ 325.17	\$ 309.18
Plan 3	70194PA0240006	Shared Cost PPO S1500	M	70194PA0240006	\$ 422.35	\$ 422.35	\$ -	\$ 422.35	\$ 422.35	\$ 452.83	\$ 452.83	\$ -	\$ 444.12	\$ 450.39	\$ 430.00	\$ 430.00	\$ -	\$ 430.00	\$ 430.00	\$ 461.04	\$ 461.04	\$ -	\$ 452.17	\$ 458.25
Plan 4	70194PA0250002	Survive PPO Embedded	M	70194PA0250002	\$ 321.48	\$ 321.48	\$ -	\$ 321.48	\$ 321.48	\$ 344.61	\$ 344.61	\$ -	\$ 338.05	\$ 342.82	\$ 327.30	\$ 327.30	\$ -	\$ 327.30	\$ 327.30	\$ 350.92	\$ 350.92	\$ -	\$ 344.18	\$ 349.03



**PA Rate Template Part IV B - Small Group Annual**  
**Table 11. Plan Premium Development for 21-Year-Old Non-Tobacco User**

Carrier Name: Highmark Health Insurance Co. (HHIC)  
 Product(s): PPO  
 Market Segment: Small Group  
 Rate Effective Date: 1/1/2020

Plan Number	HIOS Plan ID (Standard Component)	1/1/2019 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2020	1/1/2020 Plan HIOS Plan ID (If 1/1/2019 Plan Discontinued & Mapped)	Quarter 4 2019, 21-year-old Non-Tobacco Premium PMPM									Average Weighted by enrollment by rating area
					1	2	3	4	5	6	7	8	9	
Totals					\$ 423.00	\$ 423.00	\$	\$ 435.51	\$ 379.71	\$ 460.71	\$ 466.72	\$	\$ 448.37	\$ 429.76
Plan 1	70194PA0220006	Shared Cost PPO \$1500	M	70194PA0220006	\$ 423.00	\$ 423.00	\$	\$ 423.00	\$ 423.00	\$ 453.52	\$ 453.52	\$	\$ 444.80	\$ 423.00
Plan 2	70194PA0230002	Shared Cost PPO \$1500	M	70194PA0230002	\$ 314.78	\$ 314.78	\$	\$ 314.78	\$ 314.78	\$ 337.90	\$ 337.90	\$	\$ 331.01	\$ 314.78
Plan 3	70194PA0240006	Shared Cost PPO \$1500	M	70194PA0240006	\$ 437.80	\$ 437.80	\$	\$ 437.80	\$ 437.80	\$ 469.39	\$ 469.39	\$	\$ 460.47	\$ 466.86
Plan 4	70194PA0250002	Shared Cost PPO \$1500	M	70194PA0250002	\$ 333.24	\$ 333.24	\$	\$ 333.24	\$ 333.24	\$ 357.28	\$ 357.28	\$	\$ 350.41	\$ 351.56



Company Name: **hmark Health Insurance Co. (H**  
 Market: **Small Group**  
 Product: **PPO**  
 Effective Date of Rates: **January 1, 2020**

Ending date of Rates: **March 31, 2020**

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	70194PA0220006		70194PA0220006		70194PA0230002		70194PA0230002	
Plan Marketing Name =>	Shared Cost PPO \$1500		Shared Cost PPO \$1500		Health Savings PPO Embedded Q\$4750		Health Savings PPO Embedded Q\$4750	
Form # =>	HHIC/PPO-8		HHIC/PPO-8		HHIC/HDHP-8		HHIC/HDHP-8	
Rating Area =>	Area 1,2,4,5		Area 6		Area 1,2,4,5		Area 6	
Network =>	C		C		C		C	
Metal =>	Gold		Gold		Bronze		Bronze	
Deductible =>	\$1,500		\$1,500		\$4,750		\$4,750	
Coinsurance =>	90%		90%		60%		60%	
Copays =>	\$30		\$30		60%		60%	
OOP Maximum =>	\$4,500		\$4,500		\$6,650		\$6,650	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$306.62	\$306.62	\$328.74	\$328.74	\$228.18	\$228.18	\$244.64	\$244.64
15	\$333.87	\$333.87	\$357.97	\$357.97	\$248.46	\$248.46	\$266.39	\$266.39
16	\$344.30	\$344.30	\$369.14	\$369.14	\$256.21	\$256.21	\$274.70	\$274.70
17	\$354.72	\$354.72	\$380.31	\$380.31	\$263.97	\$263.97	\$283.01	\$283.01
18	\$365.94	\$365.94	\$392.34	\$392.34	\$272.32	\$272.32	\$291.97	\$291.97
19	\$377.16	\$377.16	\$404.38	\$404.38	\$280.67	\$280.67	\$300.92	\$300.92
20	\$388.79	\$388.79	\$416.84	\$416.84	\$289.32	\$289.32	\$310.20	\$310.20
21	\$400.81	\$400.81	\$429.73	\$429.73	\$298.27	\$298.27	\$319.79	\$319.79
22	\$400.81	\$400.81	\$429.73	\$429.73	\$298.27	\$298.27	\$319.79	\$319.79
23	\$400.81	\$400.81	\$429.73	\$429.73	\$298.27	\$298.27	\$319.79	\$319.79
24	\$400.81	\$400.81	\$429.73	\$429.73	\$298.27	\$298.27	\$319.79	\$319.79
25	\$402.41	\$402.41	\$431.45	\$431.45	\$299.46	\$299.46	\$321.07	\$321.07
26	\$410.43	\$410.43	\$440.04	\$440.04	\$305.43	\$305.43	\$327.46	\$327.46
27	\$420.05	\$420.05	\$450.36	\$450.36	\$312.59	\$312.59	\$335.14	\$335.14
28	\$435.68	\$435.68	\$467.12	\$467.12	\$324.22	\$324.22	\$347.61	\$347.61
29	\$448.51	\$448.51	\$480.87	\$480.87	\$333.76	\$333.76	\$357.85	\$357.85
30	\$454.92	\$454.92	\$487.74	\$487.74	\$338.54	\$338.54	\$362.96	\$362.96
31	\$464.54	\$464.54	\$498.06	\$498.06	\$345.69	\$345.69	\$370.64	\$370.64
32	\$474.16	\$474.16	\$508.37	\$508.37	\$352.85	\$352.85	\$378.31	\$378.31
33	\$480.17	\$480.17	\$514.82	\$514.82	\$357.33	\$357.33	\$383.11	\$383.11
34	\$486.58	\$486.58	\$521.69	\$521.69	\$362.10	\$362.10	\$388.23	\$388.23
35	\$489.79	\$489.79	\$525.13	\$525.13	\$364.49	\$364.49	\$390.78	\$390.78
36	\$493.00	\$493.00	\$528.57	\$528.57	\$366.87	\$366.87	\$393.34	\$393.34
37	\$496.20	\$496.20	\$532.01	\$532.01	\$369.26	\$369.26	\$395.90	\$395.90
38	\$499.41	\$499.41	\$535.44	\$535.44	\$371.64	\$371.64	\$398.46	\$398.46
39	\$505.82	\$505.82	\$542.32	\$542.32	\$376.42	\$376.42	\$403.57	\$403.57
40	\$512.24	\$512.24	\$549.19	\$549.19	\$381.19	\$381.19	\$408.69	\$408.69
41	\$521.85	\$521.85	\$559.51	\$559.51	\$388.35	\$388.35	\$416.37	\$416.37
42	\$531.07	\$531.07	\$569.39	\$569.39	\$395.21	\$395.21	\$423.72	\$423.72
43	\$543.90	\$543.90	\$583.14	\$583.14	\$404.75	\$404.75	\$433.96	\$433.96
44	\$559.93	\$559.93	\$600.33	\$600.33	\$416.68	\$416.68	\$446.75	\$446.75
45	\$578.77	\$578.77	\$620.53	\$620.53	\$430.70	\$430.70	\$461.78	\$461.78
46	\$601.22	\$601.22	\$644.60	\$644.60	\$447.41	\$447.41	\$479.69	\$479.69
47	\$626.47	\$626.47	\$671.67	\$671.67	\$466.20	\$466.20	\$499.83	\$499.83
48	\$655.32	\$655.32	\$702.61	\$702.61	\$487.67	\$487.67	\$522.86	\$522.86
49	\$683.78	\$683.78	\$733.12	\$733.12	\$508.85	\$508.85	\$545.56	\$545.56
50	\$715.85	\$715.85	\$767.50	\$767.50	\$532.71	\$532.71	\$571.14	\$571.14
51	\$747.51	\$747.51	\$801.45	\$801.45	\$556.27	\$556.27	\$596.41	\$596.41
52	\$782.38	\$782.38	\$838.83	\$838.83	\$582.22	\$582.22	\$624.23	\$624.23
53	\$817.65	\$817.65	\$876.65	\$876.65	\$608.47	\$608.47	\$652.37	\$652.37
54	\$855.73	\$855.73	\$917.47	\$917.47	\$636.81	\$636.81	\$682.75	\$682.75
55	\$893.81	\$893.81	\$958.30	\$958.30	\$665.14	\$665.14	\$713.13	\$713.13
56	\$935.09	\$935.09	\$1,002.56	\$1,002.56	\$695.86	\$695.86	\$746.07	\$746.07
57	\$976.77	\$976.77	\$1,047.25	\$1,047.25	\$726.88	\$726.88	\$779.33	\$779.33
58	\$1,021.26	\$1,021.26	\$1,094.95	\$1,094.95	\$759.99	\$759.99	\$814.82	\$814.82
59	\$1,043.31	\$1,043.31	\$1,118.59	\$1,118.59	\$776.40	\$776.40	\$832.41	\$832.41
60	\$1,087.80	\$1,087.80	\$1,166.29	\$1,166.29	\$809.50	\$809.50	\$867.91	\$867.91
61	\$1,126.28	\$1,126.28	\$1,207.54	\$1,207.54	\$838.14	\$838.14	\$898.61	\$898.61
62	\$1,151.53	\$1,151.53	\$1,234.61	\$1,234.61	\$856.93	\$856.93	\$918.76	\$918.76
63	\$1,183.19	\$1,183.19	\$1,268.56	\$1,268.56	\$880.49	\$880.49	\$944.02	\$944.02
64+	\$1,202.43	\$1,202.43	\$1,289.19	\$1,289.19	\$894.81	\$894.81	\$959.37	\$959.37

Company Name:  
 Market:  
 Product:  
 Effective Date of Rates:

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	70194PA0240006		70194PA0240006		70194PA0250002		70194PA0250002	
Plan Marketing Name =>	Shared Cost PPO \$1500		Shared Cost PPO \$1500		Health Savings PPO Embedded Q\$4750		Health Savings PPO Embedded Q\$4750	
Form # =>	HHIC/PPO-8		HHIC/PPO-8		HHIC/HDHP-8		HHIC/HDHP-8	
Rating Area =>	Area 6,7		Area 9		Area 6,7		Area 9	
Network =>	F		F		F		F	
Metal =>	Gold		Gold		Bronze		Bronze	
Deductible =>	\$1,500		\$1,500		\$4,750		\$4,750	
Coinsurance =>	90%		90%		60%		60%	
Copays =>	\$30		\$30		60%		60%	
OOP Maximum =>	\$4,500		\$4,500		\$6,650		\$6,650	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$340.25	\$340.25	\$333.70	\$333.70	\$258.98	\$258.98	\$254.00	\$254.00
15	\$370.49	\$370.49	\$363.36	\$363.36	\$282.00	\$282.00	\$276.58	\$276.58
16	\$382.06	\$382.06	\$374.70	\$374.70	\$290.81	\$290.81	\$285.21	\$285.21
17	\$393.62	\$393.62	\$386.05	\$386.05	\$299.61	\$299.61	\$293.85	\$293.85
18	\$406.08	\$406.08	\$398.26	\$398.26	\$309.09	\$309.09	\$303.14	\$303.14
19	\$418.53	\$418.53	\$410.47	\$410.47	\$318.57	\$318.57	\$312.44	\$312.44
20	\$431.43	\$431.43	\$423.12	\$423.12	\$328.38	\$328.38	\$322.07	\$322.07
21	\$444.77	\$444.77	\$436.21	\$436.21	\$338.54	\$338.54	\$332.03	\$332.03
22	\$444.77	\$444.77	\$436.21	\$436.21	\$338.54	\$338.54	\$332.03	\$332.03
23	\$444.77	\$444.77	\$436.21	\$436.21	\$338.54	\$338.54	\$332.03	\$332.03
24	\$444.77	\$444.77	\$436.21	\$436.21	\$338.54	\$338.54	\$332.03	\$332.03
25	\$446.55	\$446.55	\$437.95	\$437.95	\$339.89	\$339.89	\$333.36	\$333.36
26	\$455.44	\$455.44	\$446.68	\$446.68	\$346.66	\$346.66	\$340.00	\$340.00
27	\$466.12	\$466.12	\$457.15	\$457.15	\$354.79	\$354.79	\$347.97	\$347.97
28	\$483.46	\$483.46	\$474.16	\$474.16	\$367.99	\$367.99	\$360.92	\$360.92
29	\$497.70	\$497.70	\$488.12	\$488.12	\$378.83	\$378.83	\$371.54	\$371.54
30	\$504.81	\$504.81	\$495.10	\$495.10	\$384.24	\$384.24	\$376.85	\$376.85
31	\$515.49	\$515.49	\$505.57	\$505.57	\$392.37	\$392.37	\$384.82	\$384.82
32	\$526.16	\$526.16	\$516.04	\$516.04	\$400.49	\$400.49	\$392.79	\$392.79
33	\$532.83	\$532.83	\$522.58	\$522.58	\$405.57	\$405.57	\$397.77	\$397.77
34	\$539.95	\$539.95	\$529.56	\$529.56	\$410.99	\$410.99	\$403.08	\$403.08
35	\$543.51	\$543.51	\$533.05	\$533.05	\$413.70	\$413.70	\$405.74	\$405.74
36	\$547.07	\$547.07	\$536.54	\$536.54	\$416.40	\$416.40	\$408.40	\$408.40
37	\$550.63	\$550.63	\$540.03	\$540.03	\$419.11	\$419.11	\$411.05	\$411.05
38	\$554.18	\$554.18	\$543.52	\$543.52	\$421.82	\$421.82	\$413.71	\$413.71
39	\$561.30	\$561.30	\$550.50	\$550.50	\$427.24	\$427.24	\$419.02	\$419.02
40	\$568.42	\$568.42	\$557.48	\$557.48	\$432.65	\$432.65	\$424.33	\$424.33
41	\$579.09	\$579.09	\$567.95	\$567.95	\$440.78	\$440.78	\$432.30	\$432.30
42	\$589.32	\$589.32	\$577.98	\$577.98	\$448.57	\$448.57	\$439.94	\$439.94
43	\$603.55	\$603.55	\$591.94	\$591.94	\$459.40	\$459.40	\$450.56	\$450.56
44	\$621.34	\$621.34	\$609.39	\$609.39	\$472.94	\$472.94	\$463.85	\$463.85
45	\$642.25	\$642.25	\$629.89	\$629.89	\$488.85	\$488.85	\$479.45	\$479.45
46	\$667.16	\$667.16	\$654.32	\$654.32	\$507.81	\$507.81	\$498.05	\$498.05
47	\$695.18	\$695.18	\$681.80	\$681.80	\$529.14	\$529.14	\$518.96	\$518.96
48	\$727.20	\$727.20	\$713.20	\$713.20	\$553.51	\$553.51	\$542.87	\$542.87
49	\$758.78	\$758.78	\$744.17	\$744.17	\$577.55	\$577.55	\$566.44	\$566.44
50	\$794.36	\$794.36	\$779.07	\$779.07	\$604.63	\$604.63	\$593.01	\$593.01
51	\$829.50	\$829.50	\$813.53	\$813.53	\$631.38	\$631.38	\$619.24	\$619.24
52	\$868.19	\$868.19	\$851.48	\$851.48	\$660.83	\$660.83	\$648.12	\$648.12
53	\$907.33	\$907.33	\$889.87	\$889.87	\$690.62	\$690.62	\$677.34	\$677.34
54	\$949.58	\$949.58	\$931.31	\$931.31	\$722.78	\$722.78	\$708.88	\$708.88
55	\$991.84	\$991.84	\$972.75	\$972.75	\$754.94	\$754.94	\$740.43	\$740.43
56	\$1,037.65	\$1,037.65	\$1,017.68	\$1,017.68	\$789.81	\$789.81	\$774.63	\$774.63
57	\$1,083.90	\$1,083.90	\$1,063.04	\$1,063.04	\$825.02	\$825.02	\$809.16	\$809.16
58	\$1,133.27	\$1,133.27	\$1,111.46	\$1,111.46	\$862.60	\$862.60	\$846.01	\$846.01
59	\$1,157.74	\$1,157.74	\$1,135.45	\$1,135.45	\$881.22	\$881.22	\$864.27	\$864.27
60	\$1,207.11	\$1,207.11	\$1,183.87	\$1,183.87	\$918.80	\$918.80	\$901.13	\$901.13
61	\$1,249.80	\$1,249.80	\$1,225.75	\$1,225.75	\$951.30	\$951.30	\$933.00	\$933.00
62	\$1,277.82	\$1,277.82	\$1,253.23	\$1,253.23	\$972.63	\$972.63	\$953.92	\$953.92
63	\$1,312.96	\$1,312.96	\$1,287.69	\$1,287.69	\$999.37	\$999.37	\$980.15	\$980.15
64+	\$1,334.31	\$1,334.31	\$1,308.63	\$1,308.63	\$1,015.62	\$1,015.62	\$996.09	\$996.09

Company Name: **hmark Health Insurance Co. (H**  
 Market: **Small Group**  
 Product: **PPO**  
 Effective Date of Rates: **April 1, 2020**

Ending date of Rates: **June 30, 2020**

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	70194PA0220006		70194PA0220006		70194PA0230002		70194PA0230002	
Plan Marketing Name =>	Shared Cost PPO \$1500		Shared Cost PPO \$1500		Health Savings PPO Embedded Q\$4750		Health Savings PPO Embedded Q\$4750	
Form # =>	HHIC/PPO-8		HHIC/PPO-8		HHIC/HDHP-8		HHIC/HDHP-8	
Rating Area =>	Area 1,2,4,5		Area 6		Area 1,2,4,5		Area 6	
Network =>	C		C		C		C	
Metal =>	Gold		Gold		Bronze		Bronze	
Deductible =>	\$1,500		\$1,500		\$4,750		\$4,750	
Coinsurance =>	90%		90%		60%		60%	
Copays =>	\$30		\$30		60%		60%	
OOP Maximum =>	\$4,500		\$4,500		\$6,650		\$6,650	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$312.17	\$312.17	\$334.70	\$334.70	\$232.32	\$232.32	\$249.08	\$249.08
15	\$339.92	\$339.92	\$364.45	\$364.45	\$252.97	\$252.97	\$271.22	\$271.22
16	\$350.53	\$350.53	\$375.83	\$375.83	\$260.86	\$260.86	\$279.68	\$279.68
17	\$361.14	\$361.14	\$387.21	\$387.21	\$268.76	\$268.76	\$288.15	\$288.15
18	\$372.57	\$372.57	\$399.46	\$399.46	\$277.26	\$277.26	\$297.26	\$297.26
19	\$383.99	\$383.99	\$411.71	\$411.71	\$285.76	\$285.76	\$306.38	\$306.38
20	\$395.83	\$395.83	\$424.39	\$424.39	\$294.57	\$294.57	\$315.82	\$315.82
21	\$408.07	\$408.07	\$437.52	\$437.52	\$303.68	\$303.68	\$325.59	\$325.59
22	\$408.07	\$408.07	\$437.52	\$437.52	\$303.68	\$303.68	\$325.59	\$325.59
23	\$408.07	\$408.07	\$437.52	\$437.52	\$303.68	\$303.68	\$325.59	\$325.59
24	\$408.07	\$408.07	\$437.52	\$437.52	\$303.68	\$303.68	\$325.59	\$325.59
25	\$409.70	\$409.70	\$439.27	\$439.27	\$304.89	\$304.89	\$326.89	\$326.89
26	\$417.86	\$417.86	\$448.02	\$448.02	\$310.97	\$310.97	\$333.40	\$333.40
27	\$427.66	\$427.66	\$458.52	\$458.52	\$318.26	\$318.26	\$341.22	\$341.22
28	\$443.57	\$443.57	\$475.58	\$475.58	\$330.10	\$330.10	\$353.92	\$353.92
29	\$456.63	\$456.63	\$489.58	\$489.58	\$339.82	\$339.82	\$364.34	\$364.34
30	\$463.16	\$463.16	\$496.59	\$496.59	\$344.68	\$344.68	\$369.54	\$369.54
31	\$472.95	\$472.95	\$507.09	\$507.09	\$351.97	\$351.97	\$377.36	\$377.36
32	\$482.75	\$482.75	\$517.59	\$517.59	\$359.25	\$359.25	\$385.17	\$385.17
33	\$488.87	\$488.87	\$524.15	\$524.15	\$363.81	\$363.81	\$390.06	\$390.06
34	\$495.40	\$495.40	\$531.15	\$531.15	\$368.67	\$368.67	\$395.27	\$395.27
35	\$498.66	\$498.66	\$534.65	\$534.65	\$371.10	\$371.10	\$397.87	\$397.87
36	\$501.93	\$501.93	\$538.15	\$538.15	\$373.53	\$373.53	\$400.48	\$400.48
37	\$505.19	\$505.19	\$541.65	\$541.65	\$375.96	\$375.96	\$403.08	\$403.08
38	\$508.46	\$508.46	\$545.15	\$545.15	\$378.39	\$378.39	\$405.69	\$405.69
39	\$514.98	\$514.98	\$552.15	\$552.15	\$383.24	\$383.24	\$410.89	\$410.89
40	\$521.51	\$521.51	\$559.15	\$559.15	\$388.10	\$388.10	\$416.10	\$416.10
41	\$531.31	\$531.31	\$569.65	\$569.65	\$395.39	\$395.39	\$423.92	\$423.92
42	\$540.69	\$540.69	\$579.71	\$579.71	\$402.38	\$402.38	\$431.41	\$431.41
43	\$553.75	\$553.75	\$593.71	\$593.71	\$412.09	\$412.09	\$441.83	\$441.83
44	\$570.07	\$570.07	\$611.22	\$611.22	\$424.24	\$424.24	\$454.85	\$454.85
45	\$589.25	\$589.25	\$631.78	\$631.78	\$438.51	\$438.51	\$470.15	\$470.15
46	\$612.11	\$612.11	\$656.28	\$656.28	\$455.52	\$455.52	\$488.39	\$488.39
47	\$637.81	\$637.81	\$683.84	\$683.84	\$474.65	\$474.65	\$508.90	\$508.90
48	\$667.19	\$667.19	\$715.35	\$715.35	\$496.52	\$496.52	\$532.34	\$532.34
49	\$696.17	\$696.17	\$746.41	\$746.41	\$518.08	\$518.08	\$555.46	\$555.46
50	\$728.81	\$728.81	\$781.41	\$781.41	\$542.37	\$542.37	\$581.50	\$581.50
51	\$761.05	\$761.05	\$815.97	\$815.97	\$566.36	\$566.36	\$607.23	\$607.23
52	\$796.55	\$796.55	\$854.04	\$854.04	\$592.78	\$592.78	\$635.55	\$635.55
53	\$832.46	\$832.46	\$892.54	\$892.54	\$619.51	\$619.51	\$664.20	\$664.20
54	\$871.23	\$871.23	\$934.11	\$934.11	\$648.36	\$648.36	\$695.13	\$695.13
55	\$910.00	\$910.00	\$975.67	\$975.67	\$677.21	\$677.21	\$726.07	\$726.07
56	\$952.03	\$952.03	\$1,020.73	\$1,020.73	\$708.49	\$708.49	\$759.60	\$759.60
57	\$994.47	\$994.47	\$1,066.24	\$1,066.24	\$740.07	\$740.07	\$793.46	\$793.46
58	\$1,039.76	\$1,039.76	\$1,114.80	\$1,114.80	\$773.78	\$773.78	\$829.60	\$829.60
59	\$1,062.21	\$1,062.21	\$1,138.86	\$1,138.86	\$790.48	\$790.48	\$847.51	\$847.51
60	\$1,107.50	\$1,107.50	\$1,187.43	\$1,187.43	\$824.19	\$824.19	\$883.65	\$883.65
61	\$1,146.68	\$1,146.68	\$1,229.43	\$1,229.43	\$853.34	\$853.34	\$914.91	\$914.91
62	\$1,172.39	\$1,172.39	\$1,256.99	\$1,256.99	\$872.47	\$872.47	\$935.42	\$935.42
63	\$1,204.62	\$1,204.62	\$1,291.56	\$1,291.56	\$896.46	\$896.46	\$961.14	\$961.14
64+	\$1,224.21	\$1,224.21	\$1,312.56	\$1,312.56	\$911.04	\$911.04	\$976.77	\$976.77

Company Name:  
 Market:  
 Product:  
 Effective Date of Rates:

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	70194PA0240006		70194PA0240006		70194PA0250002		70194PA0250002	
Plan Marketing Name =>	Shared Cost PPO \$1500		Shared Cost PPO \$1500		Health Savings PPO Embedded Q\$4750		Health Savings PPO Embedded Q\$4750	
Form # =>	HHIC/PPO-8		HHIC/PPO-8		HHIC/HDHP-8		HHIC/HDHP-8	
Rating Area =>	Area 6,7		Area 9		Area 6,7		Area 9	
Network =>	F		F		F		F	
Metal =>	Gold		Gold		Bronze		Bronze	
Deductible =>	\$1,500		\$1,500		\$4,750		\$4,750	
Coinsurance =>	90%		90%		60%		60%	
Copays =>	\$30		\$30		60%		60%	
OOP Maximum =>	\$4,500		\$4,500		\$6,650		\$6,650	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$346.41	\$346.41	\$339.75	\$339.75	\$263.68	\$263.68	\$258.61	\$258.61
15	\$377.21	\$377.21	\$369.95	\$369.95	\$287.12	\$287.12	\$281.60	\$281.60
16	\$388.98	\$388.98	\$381.50	\$381.50	\$296.08	\$296.08	\$290.38	\$290.38
17	\$400.75	\$400.75	\$393.05	\$393.05	\$305.04	\$305.04	\$299.17	\$299.17
18	\$413.43	\$413.43	\$405.48	\$405.48	\$314.69	\$314.69	\$308.64	\$308.64
19	\$426.11	\$426.11	\$417.92	\$417.92	\$324.34	\$324.34	\$318.11	\$318.11
20	\$439.25	\$439.25	\$430.80	\$430.80	\$334.34	\$334.34	\$327.91	\$327.91
21	\$452.83	\$452.83	\$444.12	\$444.12	\$344.68	\$344.68	\$338.05	\$338.05
22	\$452.83	\$452.83	\$444.12	\$444.12	\$344.68	\$344.68	\$338.05	\$338.05
23	\$452.83	\$452.83	\$444.12	\$444.12	\$344.68	\$344.68	\$338.05	\$338.05
24	\$452.83	\$452.83	\$444.12	\$444.12	\$344.68	\$344.68	\$338.05	\$338.05
25	\$454.64	\$454.64	\$445.90	\$445.90	\$346.06	\$346.06	\$339.40	\$339.40
26	\$463.70	\$463.70	\$454.78	\$454.78	\$352.95	\$352.95	\$346.16	\$346.16
27	\$474.57	\$474.57	\$465.44	\$465.44	\$361.22	\$361.22	\$354.28	\$354.28
28	\$492.23	\$492.23	\$482.76	\$482.76	\$374.67	\$374.67	\$367.46	\$367.46
29	\$506.72	\$506.72	\$496.97	\$496.97	\$385.70	\$385.70	\$378.28	\$378.28
30	\$513.96	\$513.96	\$504.08	\$504.08	\$391.21	\$391.21	\$383.69	\$383.69
31	\$524.83	\$524.83	\$514.74	\$514.74	\$399.48	\$399.48	\$391.80	\$391.80
32	\$535.70	\$535.70	\$525.39	\$525.39	\$407.76	\$407.76	\$399.91	\$399.91
33	\$542.49	\$542.49	\$532.06	\$532.06	\$412.93	\$412.93	\$404.98	\$404.98
34	\$549.74	\$549.74	\$539.16	\$539.16	\$418.44	\$418.44	\$410.39	\$410.39
35	\$553.36	\$553.36	\$542.71	\$542.71	\$421.20	\$421.20	\$413.10	\$413.10
36	\$556.98	\$556.98	\$546.27	\$546.27	\$423.96	\$423.96	\$415.80	\$415.80
37	\$560.60	\$560.60	\$549.82	\$549.82	\$426.71	\$426.71	\$418.51	\$418.51
38	\$564.23	\$564.23	\$553.37	\$553.37	\$429.47	\$429.47	\$421.21	\$421.21
39	\$571.47	\$571.47	\$560.48	\$560.48	\$434.99	\$434.99	\$426.62	\$426.62
40	\$578.72	\$578.72	\$567.59	\$567.59	\$440.50	\$440.50	\$432.03	\$432.03
41	\$589.58	\$589.58	\$578.24	\$578.24	\$448.77	\$448.77	\$440.14	\$440.14
42	\$600.00	\$600.00	\$588.46	\$588.46	\$456.70	\$456.70	\$447.92	\$447.92
43	\$614.49	\$614.49	\$602.67	\$602.67	\$467.73	\$467.73	\$458.73	\$458.73
44	\$632.60	\$632.60	\$620.44	\$620.44	\$481.52	\$481.52	\$472.26	\$472.26
45	\$653.89	\$653.89	\$641.31	\$641.31	\$497.72	\$497.72	\$488.14	\$488.14
46	\$679.25	\$679.25	\$666.18	\$666.18	\$517.02	\$517.02	\$507.08	\$507.08
47	\$707.77	\$707.77	\$694.16	\$694.16	\$538.73	\$538.73	\$528.37	\$528.37
48	\$740.38	\$740.38	\$726.14	\$726.14	\$563.55	\$563.55	\$552.71	\$552.71
49	\$772.53	\$772.53	\$757.67	\$757.67	\$588.02	\$588.02	\$576.71	\$576.71
50	\$808.75	\$808.75	\$793.20	\$793.20	\$615.60	\$615.60	\$603.76	\$603.76
51	\$844.53	\$844.53	\$828.28	\$828.28	\$642.83	\$642.83	\$630.46	\$630.46
52	\$883.92	\$883.92	\$866.92	\$866.92	\$672.82	\$672.82	\$659.87	\$659.87
53	\$923.77	\$923.77	\$906.00	\$906.00	\$703.15	\$703.15	\$689.62	\$689.62
54	\$966.79	\$966.79	\$948.20	\$948.20	\$735.89	\$735.89	\$721.74	\$721.74
55	\$1,009.81	\$1,009.81	\$990.39	\$990.39	\$768.64	\$768.64	\$753.85	\$753.85
56	\$1,056.45	\$1,056.45	\$1,036.13	\$1,036.13	\$804.14	\$804.14	\$788.67	\$788.67
57	\$1,103.55	\$1,103.55	\$1,082.32	\$1,082.32	\$839.99	\$839.99	\$823.83	\$823.83
58	\$1,153.81	\$1,153.81	\$1,131.62	\$1,131.62	\$878.24	\$878.24	\$861.35	\$861.35
59	\$1,178.72	\$1,178.72	\$1,156.04	\$1,156.04	\$897.20	\$897.20	\$879.94	\$879.94
60	\$1,228.98	\$1,228.98	\$1,205.34	\$1,205.34	\$935.46	\$935.46	\$917.47	\$917.47
61	\$1,272.45	\$1,272.45	\$1,247.98	\$1,247.98	\$968.55	\$968.55	\$949.92	\$949.92
62	\$1,300.98	\$1,300.98	\$1,275.96	\$1,275.96	\$990.27	\$990.27	\$971.22	\$971.22
63	\$1,336.75	\$1,336.75	\$1,311.04	\$1,311.04	\$1,017.50	\$1,017.50	\$997.92	\$997.92
64+	\$1,358.49	\$1,358.49	\$1,332.36	\$1,332.36	\$1,034.04	\$1,034.04	\$1,014.15	\$1,014.15

Company Name: **hmark Health Insurance Co. (H**  
 Market: **Small Group**  
 Product: **PPO**  
 Effective Date of Rates: **July 1, 2020**

Ending date of Rates: **September 30, 2020**

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	70194PA0220006		70194PA0220006		70194PA0230002		70194PA0230002	
Plan Marketing Name =>	Shared Cost PPO \$1500		Shared Cost PPO \$1500		Health Savings PPO Embedded Q\$4750		Health Savings PPO Embedded Q\$4750	
Form # =>	HHIC/PPO-8		HHIC/PPO-8		HHIC/HDHP-8		HHIC/HDHP-8	
Rating Area =>	Area 1,2,4,5		Area 6		Area 1,2,4,5		Area 6	
Network =>	C		C		C		C	
Metal =>	Gold		Gold		Bronze		Bronze	
Deductible =>	\$1,500		\$1,500		\$4,750		\$4,750	
Coinsurance =>	90%		90%		60%		60%	
Copays =>	\$30		\$30		60%		60%	
OOP Maximum =>	\$4,500		\$4,500		\$6,650		\$6,650	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$317.83	\$317.83	\$340.77	\$340.77	\$236.52	\$236.52	\$253.59	\$253.59
15	\$346.09	\$346.09	\$371.06	\$371.06	\$257.55	\$257.55	\$276.13	\$276.13
16	\$356.89	\$356.89	\$382.64	\$382.64	\$265.59	\$265.59	\$284.75	\$284.75
17	\$367.69	\$367.69	\$394.22	\$394.22	\$273.62	\$273.62	\$293.37	\$293.37
18	\$379.32	\$379.32	\$406.70	\$406.70	\$282.28	\$282.28	\$302.65	\$302.65
19	\$390.96	\$390.96	\$419.17	\$419.17	\$290.94	\$290.94	\$311.93	\$311.93
20	\$403.01	\$403.01	\$432.09	\$432.09	\$299.90	\$299.90	\$321.55	\$321.55
21	\$415.47	\$415.47	\$445.45	\$445.45	\$309.18	\$309.18	\$331.49	\$331.49
22	\$415.47	\$415.47	\$445.45	\$445.45	\$309.18	\$309.18	\$331.49	\$331.49
23	\$415.47	\$415.47	\$445.45	\$445.45	\$309.18	\$309.18	\$331.49	\$331.49
24	\$415.47	\$415.47	\$445.45	\$445.45	\$309.18	\$309.18	\$331.49	\$331.49
25	\$417.13	\$417.13	\$447.23	\$447.23	\$310.42	\$310.42	\$332.82	\$332.82
26	\$425.44	\$425.44	\$456.14	\$456.14	\$316.60	\$316.60	\$339.45	\$339.45
27	\$435.41	\$435.41	\$466.83	\$466.83	\$324.02	\$324.02	\$347.40	\$347.40
28	\$451.62	\$451.62	\$484.20	\$484.20	\$336.08	\$336.08	\$360.33	\$360.33
29	\$464.91	\$464.91	\$498.46	\$498.46	\$345.97	\$345.97	\$370.94	\$370.94
30	\$471.56	\$471.56	\$505.59	\$505.59	\$350.92	\$350.92	\$376.24	\$376.24
31	\$481.53	\$481.53	\$516.28	\$516.28	\$358.34	\$358.34	\$384.20	\$384.20
32	\$491.50	\$491.50	\$526.97	\$526.97	\$365.76	\$365.76	\$392.15	\$392.15
33	\$497.73	\$497.73	\$533.65	\$533.65	\$370.40	\$370.40	\$397.13	\$397.13
34	\$504.38	\$504.38	\$540.78	\$540.78	\$375.34	\$375.34	\$402.43	\$402.43
35	\$507.70	\$507.70	\$544.34	\$544.34	\$377.82	\$377.82	\$405.08	\$405.08
36	\$511.03	\$511.03	\$547.90	\$547.90	\$380.29	\$380.29	\$407.73	\$407.73
37	\$514.35	\$514.35	\$551.47	\$551.47	\$382.76	\$382.76	\$410.38	\$410.38
38	\$517.68	\$517.68	\$555.03	\$555.03	\$385.24	\$385.24	\$413.04	\$413.04
39	\$524.32	\$524.32	\$562.16	\$562.16	\$390.19	\$390.19	\$418.34	\$418.34
40	\$530.97	\$530.97	\$569.29	\$569.29	\$395.13	\$395.13	\$423.64	\$423.64
41	\$540.94	\$540.94	\$579.98	\$579.98	\$402.55	\$402.55	\$431.60	\$431.60
42	\$550.50	\$550.50	\$590.22	\$590.22	\$409.66	\$409.66	\$439.22	\$439.22
43	\$563.79	\$563.79	\$604.48	\$604.48	\$419.56	\$419.56	\$449.83	\$449.83
44	\$580.41	\$580.41	\$622.29	\$622.29	\$431.92	\$431.92	\$463.09	\$463.09
45	\$599.94	\$599.94	\$643.23	\$643.23	\$446.46	\$446.46	\$478.67	\$478.67
46	\$623.21	\$623.21	\$668.18	\$668.18	\$463.77	\$463.77	\$497.24	\$497.24
47	\$649.38	\$649.38	\$696.24	\$696.24	\$483.25	\$483.25	\$518.12	\$518.12
48	\$679.29	\$679.29	\$728.31	\$728.31	\$505.51	\$505.51	\$541.99	\$541.99
49	\$708.79	\$708.79	\$759.94	\$759.94	\$527.46	\$527.46	\$565.52	\$565.52
50	\$742.03	\$742.03	\$795.57	\$795.57	\$552.20	\$552.20	\$592.04	\$592.04
51	\$774.85	\$774.85	\$830.76	\$830.76	\$576.62	\$576.62	\$618.23	\$618.23
52	\$811.00	\$811.00	\$869.52	\$869.52	\$603.52	\$603.52	\$647.07	\$647.07
53	\$847.56	\$847.56	\$908.72	\$908.72	\$630.73	\$630.73	\$676.24	\$676.24
54	\$887.03	\$887.03	\$951.04	\$951.04	\$660.10	\$660.10	\$707.73	\$707.73
55	\$926.50	\$926.50	\$993.35	\$993.35	\$689.47	\$689.47	\$739.22	\$739.22
56	\$969.29	\$969.29	\$1,039.23	\$1,039.23	\$721.32	\$721.32	\$773.37	\$773.37
57	\$1,012.50	\$1,012.50	\$1,085.56	\$1,085.56	\$753.47	\$753.47	\$807.84	\$807.84
58	\$1,058.62	\$1,058.62	\$1,135.01	\$1,135.01	\$787.79	\$787.79	\$844.64	\$844.64
59	\$1,081.47	\$1,081.47	\$1,159.51	\$1,159.51	\$804.80	\$804.80	\$862.87	\$862.87
60	\$1,127.59	\$1,127.59	\$1,208.95	\$1,208.95	\$839.11	\$839.11	\$899.66	\$899.66
61	\$1,167.47	\$1,167.47	\$1,251.71	\$1,251.71	\$868.80	\$868.80	\$931.49	\$931.49
62	\$1,193.65	\$1,193.65	\$1,279.78	\$1,279.78	\$888.27	\$888.27	\$952.37	\$952.37
63	\$1,226.47	\$1,226.47	\$1,314.97	\$1,314.97	\$912.70	\$912.70	\$978.56	\$978.56
64+	\$1,246.41	\$1,246.41	\$1,336.35	\$1,336.35	\$927.54	\$927.54	\$994.47	\$994.47

Company Name:  
 Market:  
 Product:  
 Effective Date of Rates:

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	70194PA0240006		70194PA0240006		70194PA0250002		70194PA0250002	
Plan Marketing Name =>	Shared Cost PPO \$1500		Shared Cost PPO \$1500		Health Savings PPO Embedded Q\$4750		Health Savings PPO Embedded Q\$4750	
Form # =>	HHIC/PPO-8		HHIC/PPO-8		HHIC/HDHP-8		HHIC/HDHP-8	
Rating Area =>	Area 6,7		Area 9		Area 6,7		Area 9	
Network =>	F		F		F		F	
Metal =>	Gold		Gold		Bronze		Bronze	
Deductible =>	\$1,500		\$1,500		\$4,750		\$4,750	
Coinsurance =>	90%		90%		60%		60%	
Copays =>	\$30		\$30		60%		60%	
OOP Maximum =>	\$4,500		\$4,500		\$6,650		\$6,650	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$352.70	\$352.70	\$345.91	\$345.91	\$268.45	\$268.45	\$263.30	\$263.30
15	\$384.05	\$384.05	\$376.66	\$376.66	\$292.32	\$292.32	\$286.70	\$286.70
16	\$396.03	\$396.03	\$388.41	\$388.41	\$301.44	\$301.44	\$295.65	\$295.65
17	\$408.02	\$408.02	\$400.17	\$400.17	\$310.56	\$310.56	\$304.60	\$304.60
18	\$420.93	\$420.93	\$412.83	\$412.83	\$320.39	\$320.39	\$314.24	\$314.24
19	\$433.84	\$433.84	\$425.49	\$425.49	\$330.22	\$330.22	\$323.87	\$323.87
20	\$447.21	\$447.21	\$438.60	\$438.60	\$340.39	\$340.39	\$333.85	\$333.85
21	\$461.04	\$461.04	\$452.17	\$452.17	\$350.92	\$350.92	\$344.18	\$344.18
22	\$461.04	\$461.04	\$452.17	\$452.17	\$350.92	\$350.92	\$344.18	\$344.18
23	\$461.04	\$461.04	\$452.17	\$452.17	\$350.92	\$350.92	\$344.18	\$344.18
24	\$461.04	\$461.04	\$452.17	\$452.17	\$350.92	\$350.92	\$344.18	\$344.18
25	\$462.88	\$462.88	\$453.98	\$453.98	\$352.32	\$352.32	\$345.56	\$345.56
26	\$472.10	\$472.10	\$463.02	\$463.02	\$359.34	\$359.34	\$352.44	\$352.44
27	\$483.17	\$483.17	\$473.87	\$473.87	\$367.76	\$367.76	\$360.70	\$360.70
28	\$501.15	\$501.15	\$491.51	\$491.51	\$381.45	\$381.45	\$374.12	\$374.12
29	\$515.90	\$515.90	\$505.98	\$505.98	\$392.68	\$392.68	\$385.14	\$385.14
30	\$523.28	\$523.28	\$513.21	\$513.21	\$398.29	\$398.29	\$390.64	\$390.64
31	\$534.35	\$534.35	\$524.07	\$524.07	\$406.72	\$406.72	\$398.90	\$398.90
32	\$545.41	\$545.41	\$534.92	\$534.92	\$415.14	\$415.14	\$407.16	\$407.16
33	\$552.33	\$552.33	\$541.70	\$541.70	\$420.40	\$420.40	\$412.33	\$412.33
34	\$559.70	\$559.70	\$548.93	\$548.93	\$426.02	\$426.02	\$417.83	\$417.83
35	\$563.39	\$563.39	\$552.55	\$552.55	\$428.82	\$428.82	\$420.59	\$420.59
36	\$567.08	\$567.08	\$556.17	\$556.17	\$431.63	\$431.63	\$423.34	\$423.34
37	\$570.77	\$570.77	\$559.79	\$559.79	\$434.44	\$434.44	\$426.09	\$426.09
38	\$574.46	\$574.46	\$563.40	\$563.40	\$437.25	\$437.25	\$428.85	\$428.85
39	\$581.83	\$581.83	\$570.64	\$570.64	\$442.86	\$442.86	\$434.36	\$434.36
40	\$589.21	\$589.21	\$577.87	\$577.87	\$448.48	\$448.48	\$439.86	\$439.86
41	\$600.27	\$600.27	\$588.73	\$588.73	\$456.90	\$456.90	\$448.12	\$448.12
42	\$610.88	\$610.88	\$599.13	\$599.13	\$464.97	\$464.97	\$456.04	\$456.04
43	\$625.63	\$625.63	\$613.59	\$613.59	\$476.20	\$476.20	\$467.05	\$467.05
44	\$644.07	\$644.07	\$631.68	\$631.68	\$490.24	\$490.24	\$480.82	\$480.82
45	\$665.74	\$665.74	\$652.93	\$652.93	\$506.73	\$506.73	\$497.00	\$497.00
46	\$691.56	\$691.56	\$678.26	\$678.26	\$526.38	\$526.38	\$516.27	\$516.27
47	\$720.61	\$720.61	\$706.74	\$706.74	\$548.49	\$548.49	\$537.95	\$537.95
48	\$753.80	\$753.80	\$739.30	\$739.30	\$573.75	\$573.75	\$562.73	\$562.73
49	\$786.53	\$786.53	\$771.40	\$771.40	\$598.67	\$598.67	\$587.17	\$587.17
50	\$823.42	\$823.42	\$807.58	\$807.58	\$626.74	\$626.74	\$614.71	\$614.71
51	\$859.84	\$859.84	\$843.30	\$843.30	\$654.47	\$654.47	\$641.90	\$641.90
52	\$899.95	\$899.95	\$882.64	\$882.64	\$685.00	\$685.00	\$671.84	\$671.84
53	\$940.52	\$940.52	\$922.43	\$922.43	\$715.88	\$715.88	\$702.13	\$702.13
54	\$984.32	\$984.32	\$965.38	\$965.38	\$749.21	\$749.21	\$734.82	\$734.82
55	\$1,028.12	\$1,028.12	\$1,008.34	\$1,008.34	\$782.55	\$782.55	\$767.52	\$767.52
56	\$1,075.61	\$1,075.61	\$1,054.91	\$1,054.91	\$818.70	\$818.70	\$802.97	\$802.97
57	\$1,123.55	\$1,123.55	\$1,101.94	\$1,101.94	\$855.19	\$855.19	\$838.77	\$838.77
58	\$1,174.73	\$1,174.73	\$1,152.13	\$1,152.13	\$894.14	\$894.14	\$876.97	\$876.97
59	\$1,200.09	\$1,200.09	\$1,177.00	\$1,177.00	\$913.44	\$913.44	\$895.90	\$895.90
60	\$1,251.26	\$1,251.26	\$1,227.19	\$1,227.19	\$952.40	\$952.40	\$934.10	\$934.10
61	\$1,295.52	\$1,295.52	\$1,270.60	\$1,270.60	\$986.09	\$986.09	\$967.15	\$967.15
62	\$1,324.57	\$1,324.57	\$1,299.08	\$1,299.08	\$1,008.19	\$1,008.19	\$988.83	\$988.83
63	\$1,360.99	\$1,360.99	\$1,334.81	\$1,334.81	\$1,035.92	\$1,035.92	\$1,016.02	\$1,016.02
64+	\$1,383.12	\$1,383.12	\$1,356.51	\$1,356.51	\$1,052.76	\$1,052.76	\$1,032.54	\$1,032.54



Company Name: **hmark Health Insurance Co. (H**  
 Market: **Small Group**  
 Product: **PPO**  
 Effective Date of Rates: **October 1, 2020**

Ending date of Rates: **December 31, 2020**

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	70194PA0220006		70194PA0220006		70194PA0230002		70194PA0230002	
Plan Marketing Name =>	Shared Cost PPO \$1500		Shared Cost PPO \$1500		Health Savings PPO Embedded Q\$4750		Health Savings PPO Embedded Q\$4750	
Form # =>	HHIC/PPO-8		HHIC/PPO-8		HHIC/HDHP-8		HHIC/HDHP-8	
Rating Area =>	Area 1,2,4,5		Area 6		Area 1,2,4,5		Area 6	
Network =>	C		C		C		C	
Metal =>	Gold		Gold		Bronze		Bronze	
Deductible =>	\$1,500		\$1,500		\$4,750		\$4,750	
Coinsurance =>	90%		90%		60%		60%	
Copays =>	\$30		\$30		60%		60%	
OOP Maximum =>	\$4,500		\$4,500		\$6,650		\$6,650	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$323.60	\$323.60	\$346.94	\$346.94	\$240.81	\$240.81	\$258.19	\$258.19
15	\$352.36	\$352.36	\$377.78	\$377.78	\$262.21	\$262.21	\$281.14	\$281.14
16	\$363.36	\$363.36	\$389.57	\$389.57	\$270.40	\$270.40	\$289.91	\$289.91
17	\$374.36	\$374.36	\$401.37	\$401.37	\$278.58	\$278.58	\$298.69	\$298.69
18	\$386.20	\$386.20	\$414.06	\$414.06	\$287.39	\$287.39	\$308.14	\$308.14
19	\$398.04	\$398.04	\$426.76	\$426.76	\$296.21	\$296.21	\$317.59	\$317.59
20	\$410.31	\$410.31	\$439.91	\$439.91	\$305.34	\$305.34	\$327.38	\$327.38
21	\$423.00	\$423.00	\$453.52	\$453.52	\$314.78	\$314.78	\$337.50	\$337.50
22	\$423.00	\$423.00	\$453.52	\$453.52	\$314.78	\$314.78	\$337.50	\$337.50
23	\$423.00	\$423.00	\$453.52	\$453.52	\$314.78	\$314.78	\$337.50	\$337.50
24	\$423.00	\$423.00	\$453.52	\$453.52	\$314.78	\$314.78	\$337.50	\$337.50
25	\$424.69	\$424.69	\$455.33	\$455.33	\$316.04	\$316.04	\$338.85	\$338.85
26	\$433.15	\$433.15	\$464.40	\$464.40	\$322.33	\$322.33	\$345.60	\$345.60
27	\$443.30	\$443.30	\$475.29	\$475.29	\$329.89	\$329.89	\$353.70	\$353.70
28	\$459.80	\$459.80	\$492.98	\$492.98	\$342.17	\$342.17	\$366.86	\$366.86
29	\$473.34	\$473.34	\$507.49	\$507.49	\$352.24	\$352.24	\$377.66	\$377.66
30	\$480.11	\$480.11	\$514.75	\$514.75	\$357.28	\$357.28	\$383.06	\$383.06
31	\$490.26	\$490.26	\$525.63	\$525.63	\$364.83	\$364.83	\$391.16	\$391.16
32	\$500.41	\$500.41	\$536.51	\$536.51	\$372.38	\$372.38	\$399.26	\$399.26
33	\$506.75	\$506.75	\$543.32	\$543.32	\$377.11	\$377.11	\$404.33	\$404.33
34	\$513.52	\$513.52	\$550.57	\$550.57	\$382.14	\$382.14	\$409.73	\$409.73
35	\$516.91	\$516.91	\$554.20	\$554.20	\$384.66	\$384.66	\$412.43	\$412.43
36	\$520.29	\$520.29	\$557.83	\$557.83	\$387.18	\$387.18	\$415.13	\$415.13
37	\$523.67	\$523.67	\$561.46	\$561.46	\$389.70	\$389.70	\$417.83	\$417.83
38	\$527.06	\$527.06	\$565.09	\$565.09	\$392.22	\$392.22	\$420.53	\$420.53
39	\$533.83	\$533.83	\$572.34	\$572.34	\$397.25	\$397.25	\$425.93	\$425.93
40	\$540.59	\$540.59	\$579.60	\$579.60	\$402.29	\$402.29	\$431.33	\$431.33
41	\$550.75	\$550.75	\$590.48	\$590.48	\$409.84	\$409.84	\$439.43	\$439.43
42	\$560.48	\$560.48	\$600.91	\$600.91	\$417.08	\$417.08	\$447.19	\$447.19
43	\$574.01	\$574.01	\$615.43	\$615.43	\$427.16	\$427.16	\$457.99	\$457.99
44	\$590.93	\$590.93	\$633.57	\$633.57	\$439.75	\$439.75	\$471.49	\$471.49
45	\$610.81	\$610.81	\$654.88	\$654.88	\$454.54	\$454.54	\$487.35	\$487.35
46	\$634.50	\$634.50	\$680.28	\$680.28	\$472.17	\$472.17	\$506.25	\$506.25
47	\$661.15	\$661.15	\$708.85	\$708.85	\$492.00	\$492.00	\$527.51	\$527.51
48	\$691.61	\$691.61	\$741.51	\$741.51	\$514.67	\$514.67	\$551.81	\$551.81
49	\$721.64	\$721.64	\$773.71	\$773.71	\$537.01	\$537.01	\$575.78	\$575.78
50	\$755.48	\$755.48	\$809.99	\$809.99	\$562.20	\$562.20	\$602.78	\$602.78
51	\$788.90	\$788.90	\$845.81	\$845.81	\$587.06	\$587.06	\$629.44	\$629.44
52	\$825.70	\$825.70	\$885.27	\$885.27	\$614.45	\$614.45	\$658.80	\$658.80
53	\$862.92	\$862.92	\$925.18	\$925.18	\$642.15	\$642.15	\$688.50	\$688.50
54	\$903.11	\$903.11	\$968.27	\$968.27	\$672.06	\$672.06	\$720.56	\$720.56
55	\$943.29	\$943.29	\$1,011.35	\$1,011.35	\$701.96	\$701.96	\$752.63	\$752.63
56	\$986.86	\$986.86	\$1,058.06	\$1,058.06	\$734.38	\$734.38	\$787.39	\$787.39
57	\$1,030.85	\$1,030.85	\$1,105.23	\$1,105.23	\$767.12	\$767.12	\$822.49	\$822.49
58	\$1,077.80	\$1,077.80	\$1,155.57	\$1,155.57	\$802.06	\$802.06	\$859.95	\$859.95
59	\$1,101.07	\$1,101.07	\$1,180.51	\$1,180.51	\$819.37	\$819.37	\$878.51	\$878.51
60	\$1,148.02	\$1,148.02	\$1,230.85	\$1,230.85	\$854.31	\$854.31	\$915.98	\$915.98
61	\$1,188.63	\$1,188.63	\$1,274.39	\$1,274.39	\$884.53	\$884.53	\$948.38	\$948.38
62	\$1,215.28	\$1,215.28	\$1,302.96	\$1,302.96	\$904.36	\$904.36	\$969.64	\$969.64
63	\$1,248.70	\$1,248.70	\$1,338.79	\$1,338.79	\$929.23	\$929.23	\$996.30	\$996.30
64+	\$1,269.00	\$1,269.00	\$1,360.56	\$1,360.56	\$944.34	\$944.34	\$1,012.50	\$1,012.50

Company Name:  
 Market:  
 Product:  
 Effective Date of Rates:

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	70194PA0240006		70194PA0240006		70194PA0250002		70194PA0250002	
Plan Marketing Name =>	Shared Cost PPO \$1500		Shared Cost PPO \$1500		Health Savings PPO Embedded Q\$4750		Health Savings PPO Embedded Q\$4750	
Form # =>	HHIC/PPO-8		HHIC/PPO-8		HHIC/HDHP-8		HHIC/HDHP-8	
Rating Area =>	Area 6,7		Area 9		Area 6,7		Area 9	
Network =>	F		F		F		F	
Metal =>	Gold		Gold		Bronze		Bronze	
Deductible =>	\$1,500		\$1,500		\$4,750		\$4,750	
Coinsurance =>	90%		90%		60%		60%	
Copays =>	\$30		\$30		60%		60%	
OOP Maximum =>	\$4,500		\$4,500		\$6,650		\$6,650	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$359.08	\$359.08	\$352.18	\$352.18	\$273.32	\$273.32	\$268.06	\$268.06
15	\$391.00	\$391.00	\$383.49	\$383.49	\$297.61	\$297.61	\$291.89	\$291.89
16	\$403.21	\$403.21	\$395.46	\$395.46	\$306.90	\$306.90	\$301.00	\$301.00
17	\$415.41	\$415.41	\$407.43	\$407.43	\$316.19	\$316.19	\$310.11	\$310.11
18	\$428.55	\$428.55	\$420.32	\$420.32	\$326.20	\$326.20	\$319.92	\$319.92
19	\$441.70	\$441.70	\$433.21	\$433.21	\$336.20	\$336.20	\$329.74	\$329.74
20	\$455.31	\$455.31	\$446.56	\$446.56	\$346.56	\$346.56	\$339.90	\$339.90
21	\$469.39	\$469.39	\$460.37	\$460.37	\$357.28	\$357.28	\$350.41	\$350.41
22	\$469.39	\$469.39	\$460.37	\$460.37	\$357.28	\$357.28	\$350.41	\$350.41
23	\$469.39	\$469.39	\$460.37	\$460.37	\$357.28	\$357.28	\$350.41	\$350.41
24	\$469.39	\$469.39	\$460.37	\$460.37	\$357.28	\$357.28	\$350.41	\$350.41
25	\$471.27	\$471.27	\$462.21	\$462.21	\$358.71	\$358.71	\$351.81	\$351.81
26	\$480.66	\$480.66	\$471.42	\$471.42	\$365.85	\$365.85	\$358.82	\$358.82
27	\$491.92	\$491.92	\$482.47	\$482.47	\$374.43	\$374.43	\$367.23	\$367.23
28	\$510.23	\$510.23	\$500.42	\$500.42	\$388.36	\$388.36	\$380.90	\$380.90
29	\$525.25	\$525.25	\$515.15	\$515.15	\$399.80	\$399.80	\$392.11	\$392.11
30	\$532.76	\$532.76	\$522.52	\$522.52	\$405.51	\$405.51	\$397.72	\$397.72
31	\$544.02	\$544.02	\$533.57	\$533.57	\$414.09	\$414.09	\$406.13	\$406.13
32	\$555.29	\$555.29	\$544.62	\$544.62	\$422.66	\$422.66	\$414.54	\$414.54
33	\$562.33	\$562.33	\$551.52	\$551.52	\$428.02	\$428.02	\$419.79	\$419.79
34	\$569.84	\$569.84	\$558.89	\$558.89	\$433.74	\$433.74	\$425.40	\$425.40
35	\$573.59	\$573.59	\$562.57	\$562.57	\$436.60	\$436.60	\$428.20	\$428.20
36	\$577.35	\$577.35	\$566.26	\$566.26	\$439.45	\$439.45	\$431.00	\$431.00
37	\$581.10	\$581.10	\$569.94	\$569.94	\$442.31	\$442.31	\$433.81	\$433.81
38	\$584.86	\$584.86	\$573.62	\$573.62	\$445.17	\$445.17	\$436.61	\$436.61
39	\$592.37	\$592.37	\$580.99	\$580.99	\$450.89	\$450.89	\$442.22	\$442.22
40	\$599.88	\$599.88	\$588.35	\$588.35	\$456.60	\$456.60	\$447.82	\$447.82
41	\$611.15	\$611.15	\$599.40	\$599.40	\$465.18	\$465.18	\$456.23	\$456.23
42	\$621.94	\$621.94	\$609.99	\$609.99	\$473.40	\$473.40	\$464.29	\$464.29
43	\$636.96	\$636.96	\$624.72	\$624.72	\$484.83	\$484.83	\$475.51	\$475.51
44	\$655.74	\$655.74	\$643.14	\$643.14	\$499.12	\$499.12	\$489.52	\$489.52
45	\$677.80	\$677.80	\$664.77	\$664.77	\$515.91	\$515.91	\$505.99	\$505.99
46	\$704.09	\$704.09	\$690.56	\$690.56	\$535.92	\$535.92	\$525.62	\$525.62
47	\$733.66	\$733.66	\$719.56	\$719.56	\$558.43	\$558.43	\$547.69	\$547.69
48	\$767.45	\$767.45	\$752.70	\$752.70	\$584.15	\$584.15	\$572.92	\$572.92
49	\$800.78	\$800.78	\$785.39	\$785.39	\$609.52	\$609.52	\$597.80	\$597.80
50	\$838.33	\$838.33	\$822.22	\$822.22	\$638.10	\$638.10	\$625.83	\$625.83
51	\$875.41	\$875.41	\$858.59	\$858.59	\$666.33	\$666.33	\$653.51	\$653.51
52	\$916.25	\$916.25	\$898.64	\$898.64	\$697.41	\$697.41	\$684.00	\$684.00
53	\$957.56	\$957.56	\$939.15	\$939.15	\$728.85	\$728.85	\$714.84	\$714.84
54	\$1,002.15	\$1,002.15	\$982.89	\$982.89	\$762.79	\$762.79	\$748.13	\$748.13
55	\$1,046.74	\$1,046.74	\$1,026.63	\$1,026.63	\$796.73	\$796.73	\$781.41	\$781.41
56	\$1,095.09	\$1,095.09	\$1,074.04	\$1,074.04	\$833.53	\$833.53	\$817.51	\$817.51
57	\$1,143.90	\$1,143.90	\$1,121.92	\$1,121.92	\$870.69	\$870.69	\$853.95	\$853.95
58	\$1,196.01	\$1,196.01	\$1,173.02	\$1,173.02	\$910.35	\$910.35	\$892.84	\$892.84
59	\$1,221.82	\$1,221.82	\$1,198.34	\$1,198.34	\$930.00	\$930.00	\$912.12	\$912.12
60	\$1,273.92	\$1,273.92	\$1,249.44	\$1,249.44	\$969.66	\$969.66	\$951.01	\$951.01
61	\$1,318.99	\$1,318.99	\$1,293.64	\$1,293.64	\$1,003.96	\$1,003.96	\$984.65	\$984.65
62	\$1,348.56	\$1,348.56	\$1,322.64	\$1,322.64	\$1,026.47	\$1,026.47	\$1,006.73	\$1,006.73
63	\$1,385.64	\$1,385.64	\$1,359.01	\$1,359.01	\$1,054.69	\$1,054.69	\$1,034.41	\$1,034.41
64+	\$1,408.17	\$1,408.17	\$1,381.11	\$1,381.11	\$1,071.84	\$1,071.84	\$1,051.23	\$1,051.23

**Highmark Health Insurance Co. (HHIC)**  
**Small Group**  
**Plan Design Summary**

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
70194PA0220006	Shared Cost PPO \$1500	PPO	Gold	Off	C	1,2,4,5,6	Erie, Clarion, Forest, McKean, Venango, Warren, Crawford, Mercer, Cameron, Elk, Potter, Allegheny, Beaver, Butler, Washington, Westmoreland, Armstrong, Indiana, Fayette, Greene, Lawrence, Bedford, Blair, Cambria, Huntingdon, Somerset, Clearfield, Jefferson, Centre
70194PA0230002	Health Savings PPO Embedded QS\$4750	PPO	Bronze	Off	C	1,2,4,5,6	Erie, Clarion, Forest, McKean, Venango, Warren, Crawford, Mercer, Cameron, Elk, Potter, Allegheny, Beaver, Butler, Washington, Westmoreland, Armstrong, Indiana, Fayette, Greene, Lawrence, Bedford, Blair, Cambria, Huntingdon, Somerset, Clearfield, Jefferson, Centre
70194PA0240006	Shared Cost PPO \$1500	PPO	Gold	Off	F	6,7,9	Lehigh, Northampton, Schuylkill, Centre, Columbia, Mifflin, Montour, Northumberland, Snyder, Union, Berks, Lancaster, Adams, York, Cumberland, Dauphin, Lebanon, Perry, Franklin, Fulton, Juniata
70194PA0250002	Health Savings PPO Embedded QS\$4750	PPO	Bronze	Off	F	6,7,9	Lehigh, Northampton, Schuylkill, Centre, Columbia, Mifflin, Montour, Northumberland, Snyder, Union, Berks, Lancaster, Adams, York, Cumberland, Dauphin, Lebanon, Perry, Franklin, Fulton, Juniata

Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2019 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
70194PA0220006	Shared Cost PPO \$1500	PPO	Gold	Off
70194PA0230002	Health Savings PPO Embedded Q\$4750	PPO	Bronze	Off
70194PA0240006	Shared Cost PPO \$1500	PPO	Gold	Off
70194PA0250002	Health Savings PPO Embedded Q\$4750	PPO	Bronze	Off

RATING AREA 1

0	0	5	0	2	24	0	0
Crawford	Clarion	Erie	Forest	Mckean	Mercer	Venango	Warren
\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81
\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27

RATING AREA 2

0	0	1
Elk	Cameron	Potter
\$400.81	\$400.81	\$400.81
\$298.27	\$298.27	\$298.27

Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA A

		RATING AREA 4										RATING AREA 5						
		02-01-2019 Number of Cov																
		94	0	4	0	10	1	0	12	9	0	0	0	1	0	0	4	
HIOS Plan ID	Plan Marketing Name	Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland	Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
70194PA0220006	Shared Cost PPO \$1500	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81	\$400.81
70194PA0230002	Health Savings PPO Embedded Q,\$4750	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27	\$298.27
70194PA0240006	Shared Cost PPO \$1500																	
70194PA0250002	Health Savings PPO Embedded Q,\$4750																	



Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2019 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
70194PA0220006	Shared Cost PPO \$1500	PPO	Gold	Off
70194PA0230002	Health Savings PPO Embedded Q\$4750	PPO	Bronze	Off
70194PA0240006	Shared Cost PPO \$1500	PPO	Gold	Off
70194PA0250002	Health Savings PPO Embedded Q\$4750	PPO	Bronze	Off

RATING AREA 1

0	0	5	0	2	24	0	0
Crawford	Clarion	Erie	Forest	Mckean	Mercer	Venango	Warren
\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07
\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68

RATING AREA 2

0	0	1
Elk	Cameron	Potter
\$408.07	\$408.07	\$408.07
\$303.68	\$303.68	\$303.68

Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA A

		RATING AREA 4										RATING AREA 5						
		02-01-2019 Number of Cov																
		94	0	4	0	10	1	0	12	9	0	0	0	1	0	0	4	
HIOS Plan ID	Plan Marketing Name	Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland	Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
70194PA0220006	Shared Cost PPO \$1500	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07	\$408.07
70194PA0230002	Health Savings PPO Embedded Q,\$4750	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68	\$303.68
70194PA0240006	Shared Cost PPO \$1500																	
70194PA0250002	Health Savings PPO Embedded Q,\$4750																	



Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA A

		RATING AREA 6										RATING AREA 7				RATING AREA 9							
		02-01-2019 Number of Cov										19	34	28	15	17	25	24	1	0	0	3	
HIOS Plan ID	Plan Marketing Name	Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union	Adams	Berks	Lancaster	York	Cumberland	Dauphin	Franklin	Fulton	Juniata	Lebanon	Perry	
70194PA0220006	Shared Cost PPO \$1500	\$437.52																					
70194PA0230002	Health Savings PPO Embedded Q\$4750	\$325.59																					
70194PA0240006	Shared Cost PPO \$1500	\$452.83	\$452.83	\$452.83	\$452.83	\$452.83	\$452.83	\$452.83		\$452.83	\$452.83	\$452.83	\$452.83	\$452.83	\$452.83	\$444.12	\$444.12	\$444.12	\$444.12	\$444.12	\$444.12	\$444.12	\$444.12
70194PA0250002	Health Savings PPO Embedded Q\$4750	\$344.68	\$344.68	\$344.68	\$344.68	\$344.68	\$344.68	\$344.68		\$344.68	\$344.68	\$344.68	\$344.68	\$344.68	\$344.68	\$338.05	\$338.05	\$338.05	\$338.05	\$338.05	\$338.05	\$338.05	\$338.05

Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2019 Number of Covered Lives by Rating County					RATING AREA 1								RATING AREA 2		
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	5	0	2	24	0	0	0	0	1
					Crawford	Clarion	Erie	Forest	Mckean	Mercer	Venango	Warren	Elk	Cameron	Potter
70194PA0220006	Shared Cost PPO \$1500	PPO	Gold	Off	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47
70194PA0230002	Health Savings PPO Embedded QS\$4750	PPO	Bronze	Off	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18
70194PA0240006	Shared Cost PPO \$1500	PPO	Gold	Off											
70194PA0250002	Health Savings PPO Embedded QS\$4750	PPO	Bronze	Off											

Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AN

		RATING AREA 4										RATING AREA 5						
02-01-2019 Number of Cov		94	0	4	0	10	1	0	12	9	0	0	0	0	0	4		
HIOS Plan ID	Plan Marketing Name	Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland	Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
70194PA0220006	Shared Cost PPO \$1500	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47	\$415.47
70194PA0230002	Health Savings PPO Embedded QS\$4750	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18	\$309.18
70194PA0240006	Shared Cost PPO \$1500																	
70194PA0250002	Health Savings PPO Embedded QS\$4750																	

Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AN

HIOS Plan ID	Plan Marketing Name	RATING AREA 6										RATING AREA 7				RATING AREA 9								
		Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union	Adams	Berks	Lancaster	York	Cumberland	Dauphin	Franklin	Fulton	Juniata	Lebanon	Perry		
70194PA0220006	Shared Cost PPO \$1500	\$445.45																						
70194PA0230002	Health Savings PPO Embedded QS4750	\$331.49																						
70194PA0240006	Shared Cost PPO \$1500	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04	\$461.04
70194PA0250002	Health Savings PPO Embedded QS4750	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92	\$350.92

Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2019 Number of Covered Lives by Rating County					RATING AREA 1								RATING AREA 2		
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	5	0	2	24	0	0	0	0	1
					Crawford	Clarion	Erie	Forest	Mckean	Mercer	Venango	Warren	Elk	Cameron	Potter
70194PA0220006	Shared Cost PPO \$1500	PPO	Gold	Off	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00
70194PA0230002	Health Savings PPO Embedded QS4750	PPO	Bronze	Off	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78
70194PA0240006	Shared Cost PPO \$1500	PPO	Gold	Off											
70194PA0250002	Health Savings PPO Embedded QS4750	PPO	Bronze	Off											

Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA A1

		RATING AREA 4										RATING AREA 5						
02-01-2019 Number of Cov		94	0	4	0	10	1	0	12	9	0	0	0	1	0	0	4	
HIOS Plan ID	Plan Marketing Name	Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland	Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
70194PA0220006	Shared Cost PPO \$1500	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00	\$423.00
70194PA0230002	Health Savings PPO Embedded QS\$4750	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78	\$314.78
70194PA0240006	Shared Cost PPO \$1500																	
70194PA0250002	Health Savings PPO Embedded QS\$4750																	

Company Name Highmark Health Insurance Co. (HHIC)  
 Market Small Group  
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA A1

HIOS Plan ID	Plan Marketing Name	RATING AREA 6										RATING AREA 7				RATING AREA 9								
		Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union	Adams	Berks	Lancaster	York	Cumberland	Dauphin	Franklin	Fulton	Juniata	Lebanon	Perry		
70194PA0220006	Shared Cost PPO \$1500	\$453.52																						
70194PA0230002	Health Savings PPO Embedded Q\$4750	\$337.50																						
70194PA0240006	Shared Cost PPO \$1500	\$469.39	\$469.39	\$469.39	\$469.39	\$469.39	\$469.39	\$469.39	\$469.39	\$469.39	\$469.39	\$469.39	\$469.39	\$469.39	\$460.37	\$460.37	\$460.37	\$460.37	\$460.37	\$460.37	\$460.37	\$460.37	\$460.37	\$460.37
70194PA0250002	Health Savings PPO Embedded Q\$4750	\$357.28	\$357.28	\$357.28	\$357.28	\$357.28	\$357.28	\$357.28	\$357.28	\$357.28	\$357.28	\$357.28	\$357.28	\$357.28	\$350.41	\$350.41	\$350.41	\$350.41	\$350.41	\$350.41	\$350.41	\$350.41	\$350.41	\$350.41

1	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U		
2		<b>Unified Rate Review v5.0</b>																					
3		Company Legal Name:	Highmark Health Insurance Co. (HHIC)													State:	PA		To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + P.				
4		HIOS Issuer ID:	70194													Market:	Small Group		To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L.				
5		Effective Date of Rate Change(s):	01/01/2020																				
6																							
7																							
8		<b>Market Level Calculations (Same for all Plans)</b>																					
9																							
10																							
11		<b>Section I: Experience Period Data</b>																					
12		Experience Period:	01/01/2018		to	12/31/2018																	
13					Total	PMPM																	
14		Allowed Claims			\$253,673,565.00			\$411.84															
15		Reinsurance			\$0.00			\$0.00															
16		Incurred Claims in Experience Period			\$218,169,901.00			\$354.20															
17		Risk Adjustment			\$62,020.15			\$0.10															
18		Experience Period Premium			\$275,313,959.00			\$446.97															
19		Experience Period Member Months			615,959																		
20																							
21		<b>Section II: Projections</b>																					
22			Experience Period Index	Year 1 Trend				Year 2 Trend				Trended EHB Allowed Claims											
23		Benefit Category	Rate PMPM	Cost	Utilization	Cost	Utilization	Cost	Utilization	PMPM													
24		Inpatient Hospital	\$79.17	1.067	1.007	1.067	1.007	1.067	1.007	\$91.40													
25		Outpatient Hospital	\$140.42	1.067	1.007	1.067	1.007	1.067	1.007	\$162.11													
26		Professional	\$105.73	1.067	1.007	1.067	1.007	1.067	1.007	\$122.06													
27		Other Medical	\$10.40	1.067	1.007	1.067	1.007	1.067	1.007	\$12.01													
28		Capitation	\$0.18	1.544	1.000	1.544	1.000	1.544	1.000	\$0.43													
29		Prescription Drug	\$75.94	1.067	1.007	1.067	1.007	1.067	1.007	\$87.67													
30		Total	\$411.84							\$475.68													
31																							
32		Morbidity Adjustment					1.418																
33		Demographic Shift					1.015																
34		Plan Design Changes					0.985																
35		Other					1.010																
36		Adjusted Trended EHB Allowed Claims PMPM for	01/01/2020				\$681.11																
37																							
38		Manual EHB Allowed Claims PMPM					\$0.00																
39		Applied Credibility %					100.00%																
40																							
41																							
42		Projected Index Rate for	01/01/2020				\$681.11	Projected Period Totals				\$2,991,435.12											
43		Reinsurance					\$0.00					\$0.00											
44		Risk Adjustment Payment/Charge					\$11.09					\$48,707.28											
45		Exchange User Fees					0.00%					\$0.00											
46		Market Adjusted Index Rate					\$670.02					\$2,942,727.84											
47																							
48		Projected Member Months					4,392																
49																							
50		<b>Information Not Releasable to the Public Unless Authorized by Law:</b> This information has not been publically disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in																					
51		prosecution to the full extent of the law.																					



**Product-Plan Data Collection**

Company Legal Name: Highmark Health Insurance Co. (NHIC)  
 HIOS Issuer ID: 70194  
 Effective Date of Rate Change(s): 01/01/2020

State: PA  
 Market: Small Group

To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + P.  
 To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L.  
 To validate, select the Validate button or Ctrl + Shift + V.  
 To finalize, select the Finalize button or Ctrl + Shift + F.

**Product/Plan Level Calculations**

**Field # Section I: General Product and Plan Information**

1.1 Product Name	Terminated Product	Comprehensive Care E	Flex EPO	Shared Cost PPO	Savings PPO Emb	Shared Cost PPO	Savings PPO Emb	Alliance Flex Blue PPO				
1.2 Product ID	70194PA005	70194PA021	70194PA022	70194PA023	70194PA024	70194PA025	70194PA029					
1.3 Plan Name	Comprehensive Care EPO 2000 70	FLEX EPO 1650 80	FLEX EPO 1650 80	Health Savings PPO Embedded	Health Savings PPO Embedded	Alliance Flex Blue PPO 500	Alliance Flex Blue PPO 1250	Alliance Flex Blue PPO 2500	Alliance Flex Blue PPO 1600			
1.4 Plan ID (Standard Component ID)	2018 Experience Blue Plan	70 A Community Blue Plan	70 A Community Blue Plan	70 A Community Blue Plan	70 A Community Blue Plan	70 A Community Blue Plan	70 A Community Blue Plan	70 A Community Blue Plan	70 A Community Blue Plan	70 A Community Blue Plan	70 A Community Blue Plan	70 A Community Blue Plan
1.5 Metal	Not Applicable	Silver	Silver	Gold	Bronze	Gold	Bronze	Gold	Gold	Silver	Gold	
1.6 AV Metal Value	0.000	0.714	0.718	0.719	0.810	0.637	0.810	0.810	0.780	0.732	0.782	
1.7 Plan Category	Terminated	Terminated	Terminated	Renewing	Renewing	Renewing	Renewing	Terminated	Terminated	Terminated	Terminated	
1.8 Plan Type	PPO	EPO	EPO	EPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	
1.9 Exchange Plan?	No	No	No	No	No	No	No	No	No	No	No	
1.10 Effective Date of Proposed Rates	01/01/2018	01/01/2018	01/01/2018	01/01/2018	01/01/2020	01/01/2020	01/01/2020	01/01/2020	01/01/2018	01/01/2018	01/01/2018	01/01/2018
1.11 Cumulative Rate Change % (over 12 mos prior)	0.00%	0.00%	0.00%	0.00%	-1.80%	1.09%	-1.39%	-1.36%	0.00%	0.00%	0.00%	0.00%
1.12 Product Rate Increase %	0.00%	0.00%	0.00%	0.00%	-1.80%	1.09%	-1.40%	-1.37%	0.00%	0.00%	0.00%	0.00%
1.13 Submission Level Rate Increase %												

**Worksheet 1 Totals**

**Section II: Experience Period and Current Plan Level Information**

2.1 Plan ID (Standard Component ID)	Total	70194PA0050001	70194PA0200002	70194PA0210002	70194PA0210004	70194PA0220006	70194PA0230002	70194PA0240006	70194PA0250002	70194PA0490001	70194PA0490002	70194PA0490003	70194PA0490004
2.2 Allowed Claims	\$253,673,565	\$249,998,038	\$8,330	\$6,480	\$13,976	\$1,933,641	\$8,268	\$1,452,768	\$118,751	\$64,008	\$20,223	\$16,853	\$31,463
2.3 Reinsurance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2.4 Member Cost Sharing	\$35,503,664	\$34,802,292	\$4,978	\$1,752	\$5,858	\$279,428	\$9,849	\$303,734	\$76,949	\$11,711	\$1,450	\$4,652	\$1,010
2.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2.6 Incurred Claims	\$218,169,901	\$215,195,744	\$3,352	\$4,728	\$8,118	\$1,654,214	\$1,642	\$1,149,049	\$41,803	\$52,893	\$18,971	\$12,200	\$30,471
2.7 Risk Adjustment Transfer Amount	\$92,000	\$92,000	\$0	\$3,258	\$3,258	\$3,258	\$3,258	\$3,258	\$3,258	\$3,258	\$3,258	\$3,258	\$3,258
2.8 Premium	\$275,313,959	\$271,226,942	\$17,990	\$6,671	\$36,543	\$1,714,431	\$59,398	\$1,799,915	\$273,082	\$91,377	\$22,172	\$41,937	\$23,501
2.9 Experience Period Member Months	615,959	609,197	46	10	67	2,467	148	3,118	573	186	49	71	27
2.10 Current Enrollment	417	0	0	0	456	11	225	25	0	0	0	0	0
2.11 Current Premium PMPM	\$658.76	\$0.00	\$0.00	\$0.00	\$663.23	\$478.21	\$679.54	\$524.16	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2.12 Loss Ratio	79.23%	79.34%	22.75%	45.49%	15.60%	140.76%	-2.04%	52.33%	11.30%	55.83%	19.62%	81.04%	
<b>Per Member Per Month</b>													
2.13 Allowed Claims	\$411.84	\$410.37	\$181.09	\$648.01	\$208.60	\$783.80	\$55.46	\$465.93	\$207.24	\$347.33	\$416.75	\$237.36	\$1,165.97
2.14 Reinsurance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2.15 Member Cost Sharing	\$57.64	\$57.11	\$108.22	\$175.17	\$87.44	\$113.27	\$66.55	\$97.11	\$124.26	\$62.96	\$29.60	\$65.53	\$37.42
2.16 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2.17 Incurred Claims	\$354.20	\$353.24	\$72.87	\$472.84	\$121.16	\$670.54	\$-11.09	\$368.52	\$72.95	\$284.37	\$387.16	\$171.83	\$1,128.55
2.18 Risk Adjustment Transfer Amount	\$0.10	\$0.10	\$-0.82	\$372.47	\$231.44	\$-218.58	\$142.69	\$126.97	\$168.99	\$136.07	\$240.93	\$285.31	\$522.14
2.19 Premium	\$446.97	\$445.22	\$391.08	\$667.07	\$545.42	\$694.95	\$401.34	\$577.27	\$476.58	\$491.27	\$452.48	\$590.66	\$870.41

**Section III: Plan Adjustment Factors**

3.1 Plan ID (Standard Component ID)	70194PA0050001	70194PA0200002	70194PA0210002	70194PA0210004	70194PA0220006	70194PA0230002	70194PA0240006	70194PA0250002	70194PA0490001	70194PA0490002	70194PA0490003	70194PA0490004
3.2 Market Adjusted Index Rate							\$670.02					
3.3 AV and Cost Sharing Design of Plan	0.0000	0.0000	0.0000	0.0000	0.8067	0.6003	0.8349	0.6355	0.0000	0.0000	0.0000	0.0000
3.4 Provider Network Adjustment	0.0000	0.0000	0.0000	0.0000	1.0000	1.0000	1.0000	1.0000	0.0000	0.0000	0.0000	0.0000
3.5 Benefits in Addition to EHB	0.0000	0.0000	0.0000	0.0000	1.0000	1.0000	1.0000	1.0000	0.0000	0.0000	0.0000	0.0000
<b>Administrative Costs</b>												
3.6 Administrative Expense	9.95%	9.95%	9.95%	9.95%	9.95%	9.95%	9.95%	9.95%	9.95%	9.95%	9.95%	9.95%
3.7 Taxes and Fees	4.83%	4.83%	4.83%	4.83%	4.83%	4.83%	4.83%	4.83%	4.83%	4.83%	4.83%	4.83%
3.8 Profit & Risk Load	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
3.9 Catastrophic Adjustment	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
3.10 Plan Adjusted Index Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$634.25	\$471.97	\$656.42	\$499.65	\$0.00	\$0.00	\$0.00	\$0.00
3.11 Age Calibration Factor	0.6560						0.6560					
3.12 Geographic Calibration Factor	0.9930						0.9930					
3.13 Tobacco Calibration Factor	1.0000						1.0000					
3.14 Calibrated Plan Adjusted Index Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$413.15	\$307.45	\$427.60	\$325.47	\$0.00	\$0.00	\$0.00	\$0.00

**Section IV: Projected Plan Level Information**

4.1 Plan ID (Standard Component ID)	Total	70194PA0050001	70194PA0200002	70194PA0210002	70194PA0210004	70194PA0220006	70194PA0230002	70194PA0240006	70194PA0250002	70194PA0490001	70194PA0490002	70194PA0490003	70194PA0490004
4.2 Allowed Claims	\$2,991,818	\$0	\$0	\$0	\$0	\$1,127,187	\$76,182	\$1,620,848	\$167,608	\$0	\$0	\$0	\$0
4.3 Reinsurance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4.4 Member Cost Sharing	\$580,538	\$0	\$0	\$0	\$0	\$223,783	\$27,110	\$276,334	\$53,313	\$0	\$0	\$0	\$0
4.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4.6 Incurred Claims	\$2,411,278	\$0	\$0	\$0	\$0	\$903,408	\$49,072	\$1,344,512	\$114,288	\$0	\$0	\$0	\$0
4.7 Risk Adjustment Transfer Amount	\$39,274	\$0	\$0	\$0	\$0	\$14,701	\$1,073	\$21,139	\$2,361	\$0	\$0	\$0	\$0
4.8 Premium	\$2,783,112	\$0	\$0	\$0	\$0	\$1,042,792	\$56,644	\$1,551,956	\$131,921	\$0	\$0	\$0	\$0
4.9 Projected Member Months	4,392	0	0	0	0	1,644	120	2,364	264	0	0	0	0
4.10 Loss Ratio	85.43%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	85.43%	85.02%	85.47%	85.11%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
<b>Per Member Per Month</b>													
4.11 Allowed Claims	\$681.30	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	\$681.64	\$634.83	\$685.64	\$634.85	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.12 Reinsurance	\$0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.13 Member Cost Sharing	\$132.18	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	\$136.12	\$225.91	\$116.89	\$201.94	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.14 Cost Sharing Reduction	\$0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.15 Incurred Claims	\$549.02	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	\$549.52	\$408.94	\$568.74	\$432.91	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.16 Risk Adjustment Transfer Amount	\$8.94	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	\$8.94	\$8.94	\$8.94	\$8.94	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.17 Premium	\$633.72	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	\$634.30	\$472.03	\$656.50	\$499.70	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

## Rating Area Data Collection

*Specify the total number of Rating Areas in your State by selecting the Create Rating Areas button or Ctrl + Shift + R.*

*Select only the Rating Areas you are offering plans within and add a factor for each area.*

*To validate, select the Validate button or Ctrl + Shift + I.*

*To finalize, select the Finalize button or Ctrl + Shift + F.*

Rating Area	Rating Factor
Rating Area 1	0.9700
Rating Area 2	0.9700
Rating Area 4	0.9700
Rating Area 5	0.9700
Rating Area 6	1.0400
Rating Area 7	1.0400
Rating Area 9	1.0200

## **Part II of the Preliminary Justification**

### **Highmark Health Insurance Company – Small Group Market**

#### **Scope and Range:**

Highmark Health Insurance Company (HHIC) is requesting a weighted average rate change of -1.50% weighted on the projected enrollment for renewing plans shown in the Unified Rate Review Template for its 2020 ACA qualifying small group products with effective dates from January 1, 2020 to December 31, 2020. This will impact 417 individuals.

Due to changes in benefits, metal levels and plan design pricing relativities, average rate changes at the plan level differ and range from -1.80% to 1.09% as shown in the Unified Rate Review Template.

The proposed rate changes are being driven by medical care costs and the underlying morbidity of the population within HHIC's ACA products.

Lower cost small groups are expected to remain outside the ACA single-risk pool for most of 2020 due to more favorable premium rates afforded to them in the pre ACA rating formula. The remaining population expected to enroll in the ACA qualifying products represents a small portion of the pool, and those groups generally have unfavorable demographics and higher than average claim costs.

#### **Historical Financial Experience:**

HHIC's Small Group Market reported a financial gain in 2018.

#### **Change in Medical Service Costs:**

The projected average cost of medical care for the projected population is expected to increase. The increase will emerge in utilization and average cost per service, and is spread across all types of services.

#### **Change in Benefits:**

Some cost sharing parameters were changed in order to maintain compliance with Federal AV requirements. Additionally, some out of pocket maximum parameters were changed to keep up with the rising cost of health care. These out of pocket maximum changes also aided in mitigating the rate increase.

#### **Administrative Costs, Anticipated Operating Results, and Medical Loss Ratio:**

Relative to the 2019 rate filing, taxes and fees are higher since the Health Insurance Provider Fee was reinstated for 2020. The anticipated operating results are not excessive or unreasonable. In accordance with regulations, the projected medical loss ratio is over 80%.

**Part III Actuarial Memorandum**

**Redacted Version**

**Highmark Health Insurance Company**

**Small Group Rate Filing**

**Effective January 1, 2020**

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# **I. General Information**

## **Document Overview**

This document contains the Part III Actuarial Memorandum for Highmark Health Insurance Company's ("HHIC") Small Group block of business rate filing ("Filing"), for products with effective dates in calendar year 2020. This actuarial memorandum is submitted in conjunction with the Part I Unified Rate Review Template.

The purpose of the actuarial memorandum is to provide certain information related to the submission, including support for the values entered into the Part I Unified Rate Review Template, which supports compliance with the market rating rules and reasonableness of applicable rate increases. This information may not be appropriate for other purposes.

This information is intended for use by the State of Pennsylvania Department of Insurance, the Center for Consumer Information and Insurance Oversight (CCIIO), and their subcontractors to assist in the review of HHIC's Filing. However, we recognize that this certification may become a public document. HHIC makes no representations or warranties regarding the contents of this letter to third parties. Likewise, third parties are instructed that they are to place no reliance upon this actuarial memorandum prepared by HHIC that would result in the creation of any duty or liability under any theory of law by HHIC or its employees to third parties.

The results are actuarial projections. Actual experience is likely to differ for a number of reasons, including population changes, claims experience, and random deviations from assumptions.

### **I.1 Company Identifying Information:**

- Company Legal Name: Highmark Health Insurance Company
- State: The State of Pennsylvania has regulatory authority over these policies.
- HIOS Issuer ID: 70194
- Market: Small Group
- Effective Date: January 1, 2020

## **II. Proposed Rate Increase(s)**

For all rate increases by plan please see the ‘Cumulative Rate Change % (over 12 mos prior)’ found in line 1.11 of the URRT Worksheet 2. Rate changes vary by plan, as plan benefits need adjusted to help maintain compliance with metal level requirements. Other base rate components (pricing actuarial factor and network discount) are also re-evaluated each year. For 2020, the Company’s proposed rate revisions vary by plan, according to the detail presented in the URRT, Worksheet 2.

The primary drivers of the -1.50% rate increase (weighted on the projected enrollment for renewing plans in the URRT) are anticipated cost and utilization increases impacting claims (such as changes in provider reimbursement levels and the availability of new pharmaceutical treatments), partially offset by an improvement in the base experience period over projected levels, and an increase in claim savings due to negotiated terms with our pharmaceutical benefit manager.

## **III. Experience and Current Period Premium, Claims, and Enrollment**

### **III.1 Paid through Date:**

Experience period claims were based on incurred calendar year 2018, paid through February 2019. We included only the non-grandfathered, insured members in HHIC’s book-of-business.

### **III.2 Current Date:**

The current date used for enrollment and premium is February 2019.

### **III.3 Allowed and Incurred Claims Incurred During the Experience Period:**

- Historical Experience: To complete the URRT historical experience section we chose HHIC’s current experience for the small group block of business for the period January 1, 2018 through December 31, 2018, with claims paid through February, 2019.
- Claims Incurred During the 12-month experience period: Worksheet 1, Section I shows our best estimate of the amount of claims that were incurred during the 12-month experience period for HHIC’s book-of-business. This section includes:
  - The amount of claims which were processed through our claims system,
  - Claims processed outside of our claims system (Rx rebates, settlements, capitated benefits), and
  - Our best estimate of claims incurred but not paid as of the Paid through Date stated above.

- **Method for Determining Allowed Claims:** For non-capitated claims, the allowed charges are summarized from HHIC’s detailed claim-level historical data. We only include the non-grandfathered, insured members from HHIC’s book-of-business.
- **Paid Claims:** We also summarized the paid claims from detailed member records. The paid-to-allowed ratio for the experience period reflects the underlying benefit plan designs chosen by each member.
- **Incurred but Not Paid (IBNR) Claims Estimate:** HHIC’s estimate of the remaining incurred but not recorded (IBNR) claims reflects the anticipated IBNR as of the end of the paid claim run out period. The IBNR completion factor of 0.982 was developed for HHIC’s total small group business through analysis of historical claim completion factors. The completion factor was applied equally to both paid and allowed total claims (as a change in utilization) to complete the experience.

#### **IV. Benefit Categories**

Experience period claims data were pulled from HHIC’s claims systems, and categorized into benefit category components according to types of services associated with each claim. The resulting categories closely adhere to the preferred definitions of the Benefit Categories included in the URRT instructions, including the “Other Medical” category. The “Other Medical” category units reflect visits for PDN/home health, trips for ambulance and procedures for DME/prosthetics. The “Capitation” category represents the monthly charge paid to our Vision benefit provider for covering pediatric vision benefits.

#### **V. Projection Factors**

##### **V.1 Trend Factors (cost/utilization)**

This development of the CY 2020 rates reflects an annual trend rate of 7.45% (6.7% cost, 0.7% utilization). These trends reflect HHIC’s expectations regarding increases in in-network contractual reimbursement. The annual trend estimates include the impact of provider contracting and anticipated utilization changes to both projected in-network and out-of-network costs. These estimates measure and normalize for benefit leverage, population aging, and historical changes for fee schedules, as well as company-wide utilization management programs, and external trend drivers.

The trend represents a blended average for all types of service and is applied to the aggregate experience for pricing. These trends represent assumed community-wide expectations. Claim variations due to the specific projected enrolled population in this single risk pool are reflected in the morbidity adjustment.



## **V.2 Morbidity Adjustment**

The morbidity adjustment reflects the anticipated changes in the average morbidity of the covered population (beyond allowable rating factors) from the experience period to the rating period. As we have seen through 2018, many of the Small Group market customers have retained their pre-ACA coverage through the transitional coverage provisions, and have yet to join the ACA risk pool. With the transitional coverage provisions extension through the end of 2020 for groups that renew on or prior to October 1, 2020, we continue to believe that many groups, especially lower-risk groups, will continue to retain their current transitional coverage until required to transfer coverage. As there is a significant level of transitional policy experience in HHIC's single risk pool, we anticipate that the morbidity within the ACA products will be considerably worse. For the development of the CY 2020 rates, this is reflected with a 1.418 Morbidity Adjustment factor in the URRT Worksheet 1.

## **V.3 Demographic Shifts**

We are projecting a slight decrease in the average age from the experience period to the projection period as business migrates into ACA plans from transitional plans and other plans in the Small Group market. There is no change assumed in the projected area factor. For the development of the CY 2020 rates, this is reflected with a 1.015 Demographic Shift factor in the URRT Worksheet 1.

## **V.4 Plan Design Changes**

We made the following adjustments to reflect the expected differences in benefits between the experience period and projection period:

- We reflected anticipated changes in the average utilization of services due to differences in average cost sharing requirements during the experience period and average cost sharing requirements in the projection period: -1.5%.
- We reflected the additional cost of the following benefits that must now be covered under the essential health benefit package for members moving into ACA compliant policies from the transitional pre-ACA policies which do not cover these benefits:
  - Pediatric dental benefits: +\$0.12
- We reflected a reduction in the capitation costs for the pediatric vision benefits: -\$0.19.
- We reflected the following newly mandated benefits required under state law, which are not reflected in the experience period claims: None.
- We reflected the following new benefits that are not part of the essential health benefit package or required under state law that did not exist in the experience period claims: None.

- We made an adjustment to reflect the removal of benefits covered in the experience period claims that will not be covered in the projection period: None.
- For the development of the CY 2020 rates, the combination of the above factors produces a 0.985 Plan Design Changes factor in the URRT Worksheet 1.

**V.5 Other Adjustments**

We are expecting an increase in savings associated with prescription drug rebates from the experience period to the projection period of (\$7.55) PMPM. This increase in rebates is due to new levels of negotiated rebates with our pharmaceutical vendor.

**V.6 Manual Rate Adjustments**

HHIC’s small group experience is fully credible; no manual rate is developed or used in this projection.

**V.7 Credibility of Experience**

The experience is for HHIC’s non-grandfathered plans in 2018. It is large enough to be fully credible. Our results are based 100% on the experience rate, adjusted as described herein.

**V.8 Establishing the Index Rate**

The index rates as shown on Worksheet 1 of the URRT are simply the average allowed claims for the Essential Health benefits for the experience and projected populations, respectively, for HHIC. It is not adjusted for the risk adjustment program or any other fee. For the projection period, it is the member-weighted average of the quarterly rate indices (Jan 1, Apr 1, Jul 1, and Oct 1) based on the assumed membership distribution effective in each quarter, as shown in the table below.

<b>2020</b>	<b>% of Members</b>	<b>Projected Quarterly Index Rate PMPM</b>
1Q	32.4%	\$667.06
2Q	13.6%	\$679.15
3Q	18.9%	\$691.46
4Q	35.1%	\$703.99
Composite	100.0%	\$686.27

See the sections below for a description of how the projected index rate is adjusted to arrive at each plan adjusted index rate.

## **V.9 Development of the Market-wide Adjusted Index Rate**

The limitations imposed by verifications and rounding in the URRT v5.0 workbook produce a Market Adjusted Index Rate that is slightly different from the one ultimately used in the rate development. Please see Exhibit I for a numerical demonstration of the Market-wide Adjusted Index Rate development that removes these limitations, including the Reinsurance, Risk Adjustment Payment/Charge, and Exchange User Fees discussed below.

## **V.10 Reinsurance**

HHIC does not have any reinsurance contracts in effect that would impact this rate development. The consideration for the federal high-cost risk pooling program is discussed in the following Risk Adjustment Payment/Charge section.

## **V.11 Risk Adjustment Payment/Charge**

To determine our estimated risk transfer for 2020, we examined historical risk scores calculated from the factors in the HHS Notice of Benefit and Payment Parameters, and other risk adjustment transfer formula components, for those members anticipated to be covered by HHIC in 2020. We then estimate the statewide average risk scores and other transfer formula components by analyzing the available risk adjustment transfer component information: the Interim Summary Report on Risk Adjustment for the 2018 Benefit Year published by CMS, the PA Insurance Department's calculation of 2018 risk adjustment transfer amounts using the 5/1/2019 RATEE files, prior years' risk adjustment transfer results, publicly available data (such as MLR reports and rate filings), and outside expertise from actuarial consultants. We do not anticipate significant migration into the small group risk pool from external populations (such as the uninsured).

In analyzing the risk transfer components from Highmark's corporate family of businesses, we have noticed a significant difference in results between the various regions (Western, Central, and Northeastern Pennsylvania). Thus when projecting the risk transfer components to 2020, we determine the each region's risk transfer results separately to arrive at the estimated risk transfer results for each company, as appropriate for each company's covered region.

HHIC considered the impact of the high-cost risk pooling payment for the Small Group market, first implemented in 2018, in its development of its anticipated risk transfer for 2020, and is assuming that the net cost (payments less recoveries) will be negligible for the 2020 rating period.

Given the anticipated profile of the membership within HHIC in 2020, and the estimated market-wide profile, we are assuming that HHIC members will have a risk profile higher than the market-wide averages, and that HHIC will receive a contribution from the risk adjustment program in 2020, decreasing premiums in the rate development by \$11.09 PMPM. Note that this value is gross of the paid-to-allowed ratio, and obtained by dividing the expected risk transfer amount of \$8.94 by HCA's expected paid-to-allowed ratio in 2020.

## **V.12 Exchange User Fees**

The projected Exchange User Fees are developed from the Exchange user fees to be charged by CMS in 2020, multiplied by the percentage of business we expect to purchase Market coverage through the Exchange for HHIC. For HHIC, all business will be offered Off Exchange in 2020, so there are no Exchange User Fees charged in the rate development.

## **VI. Plan Adjusted Index Rates**

Plan Adjusted Index Rates are developed by taking the Market Adjusted Index Rate and adjusting for each plan's actuarial value, relative benefit richness, relative network, and remaining administrative expenses (including profit and risk, and taxes and fees). Please see Exhibit II for the development of the Plan Adjusted Index Rate for each plan. The administrative expenses vary slightly between Western, PA and Central, PA plans, due to the costs associated with the anticipated utilization of services we expect by Service Area.

### **VI.1 Administrative Expense**

The proposed rates reflect internal administrative costs, including commissions and quality improvement admin. This cost was developed based on its standard expense allocation methods.

### **VI.2 Taxes and Fees**

The Health Insurance Provider Fee is currently scheduled to be in effect for both 2020 and 2021. As such, the full charge for this fee is built into the 2020 rate development.

In addition, the Patient Centered Outcomes Research Fee was eliminated in 2019. There is no charge built into the rates for this fee.

The following taxes and fees were included in the 2020 rate development:

- 2.0% for premium tax;
- \$2.16 Per Member Per Annum for the Risk Adjustment User Fee; and
- 2.8% for the Health Insurance Provider Fee.

In total, these taxes and fees amount to 4.83% of the anticipated premium collected in 2020.

### **VI.3 Profit & Risk Load**

The proposed rates reflect 0% of premium as a risk/contribution to surplus margin. This load was applied to all products and plans. HHIC has voluntarily refrained from including a risk and contingency factor in this filing. By this voluntary action, HHIC is not waiving any right

to include a risk and contingency factor which HHIC believes is consistent with historical and legal interpretations of HHIC and the Department.

## **VII. Calibration**

### **VII.1 Age Curve Calibration (to age 21, non-smoker, area with 1.0 geographic factor, January 1 effective date):**

The projected weighted average age factor is 1.524. Each Plan Adjusted Index Rate represents the rate for an average member (i.e., a member with an age factor is 1.524). Please note that no member will pay these rates because the age factor of 1.524 is not found on the HHS Age Curve. It only represents the average age factor of the projected population. Please see Exhibit I for the development of the calibration factor, which calibrates the index rate to an Age 21 age factor. The Age Calibration Factor shown in URRT Worksheet 2 is the inverse of weighted average age factor, which for HHIC is 0.656.

### **VII.2 Geographic Factor Calibration:**

The projected weighted average geographic factor is 1.0071. Each Plan Adjusted Index Rate represents the rate for an average member with a geographic factor of 1.0071. Please note that no member will pay these rates because HHIC is not using a geographic factor of 1.0071 for any of the Pennsylvania rating areas. It only represents the average geographic factor of the projected population. Please see Exhibit I for the development of the calibration factor. The Geographic Calibration Factor shown in URRT Worksheet 2 is the inverse of weighted average geographic factor, which for HHIC is 0.993.

### **VII.3 Tobacco Use Rating Factor Calibration**

HHIC does not currently utilize tobacco rating factors.

## **VIII. Consumer Adjusted Premium Rate Development**

The Calibrated Plan Adjusted Index Rate shown in URRT Worksheet 2 represents the rate for a non-smoker member with a 1.0 age factor and 1.0 geographic factor for a 1/1/2020 renewal. The appropriate value to calibrate the Plan Adjusted Index Rate by is located at the bottom of Exhibit I. By applying the 'Combined Calibration Factor' found in Exhibit I or the calibration factors in 3.11, 3.12 and 3.13 of URRT Worksheet II Section III to the Plan Adjusted Index Rates, the resulting value will represent the plan premium for a 21 year old in a 1.0 area on 1/1/2020. The standard HHS Age Curve and area factors of 0.97 for regions 1, 2, 4, and 5; 1.04 for regions 6 and 7; and 1.02 for region 9 can be used to calculate any rate found in the QHP rate template.

HHIC is filing quarterly Index Rate trends of 1.81% per quarter. Subsequent quarterly rates can be developed by applying the quarterly Index Rate trend to the first quarter rates.

## **IX. Projected Loss Ratio**

The anticipated medical loss ratio is about 89.5% relative to total premium less taxes and fees. This loss ratio is calculated consistent with the federally prescribed MLR methodology.

## **X. AV Metal Values**

The AV Metal Values included in Worksheet 2 of the Part I Unified Rate Review Template were based entirely on the Federal AV Calculator. No adjustments were needed for any benefits from those values produced by the AV calculator.

## **XI. Membership Projections**

Since transitional policy relief was extended through 2020 for groups that renew on or prior to October 1, 2020, we project that the bulk of the members in the small group market will remain outside of the ACA-compliant products, and remain outside the ACA single-risk pool. As such, HHIC is projected to have very little membership in its ACA products in 2020. See line 4.9 of the URRT Worksheet 2 to see projected membership by plan.

## **XII. Terminated Plans and Products**

HHIC is terminating 7 QHP plans that were active in the 2018 experience period. These plans are being terminated due to changes in the CMS Actuarial Value calculator, which would have valued these plans outside of the regulated metal level bands. These plans will be mapped to a corresponding QHP of similar metal level and plan design, and the experience period members and allowed charges will be moved to the mapped plans in the URRT.

Exhibit III lists all terminating QHP plans, as well as their URRT plan mappings.

## **XIII. Plan Type**

The Plan types listed in Worksheet 2, Section I of the Part I Unified Rate Review Template describe HHIC's plans adequately.

## **XIV. Actuarial Certification**

I am a member of the American Academy of Actuaries and meet its qualification standards for actuaries issuing statements of actuarial opinions in the United States. This filing is prepared on behalf of HHIC to accompany its rate filing (for calendar year 2020) for the Small Group Market off the Pennsylvania Exchange.

I hereby certify that the projected Index Rate is, to the best of my knowledge and understanding:

- In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80 and 147.102),

- Developed in compliance with the applicable Actuarial Standards of Practice
- Reasonable in relation to the benefits provided and the population anticipated to be covered
- Neither excessive nor deficient.

I certify that the index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates.

I certify that the geographic rating factors reflect only differences in the costs of delivery (which can include unit cost and provider practice pattern differences) and do not include differences for population morbidity by geographic area.

I certify that the AV Calculator was used to determine the AV Metal Values shown in Part I of Worksheet 2 in the URRT for all plans.

The Unified Rate Review Template does not demonstrate the process used by HHIC to develop the rates. Rather, it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of Qualified Health Plans for Federally-facilitated Exchanges and for certification that the Index Rate is developed in accordance with Federal regulation and used consistently and only adjusted by the allowable modifiers.

Signed: [Redacted]

Date: 05/21/2019

**Exhibit I**  
**Highmark Health Insurance Company (HHIC)**  
**2020**

**Pennsylvania Small Group Market Base Rate**

	1/1/2020 Values
<b>CY2020 Projected Period Average Members</b>	366
<b>CY2020 Allowed Claims</b>	\$681.20
<b>Projected Non-EHBs</b>	
None	\$0.00
<b>CY2020 Allowed Claims for EHB Only (Index Rate)</b>	\$681.20
<b>Market Index Rate Adjustments</b>	
Risk Adjustment (Includes Risk Adjuster Fee)	0.984
Federal Reinsurance Program (Includes Reinsurance Premium)	1.000
Exchange User Fee Adjustment	1.000
<b>CY2020 Market Adjusted Index Rate</b>	\$670.10
<b>Calibration</b>	
<b>Calibration from Plan Adjusted Index Rate to Age 21, 1.0 Area, Non-Smoker, January 1, 2020 Rate</b>	
(a) Average Age Factor	1.524
(b) Age 21 Factor	1.000
(c) Average Geographic Factor	1.0071
Combined Calibration Factor $1/((a/b)*c)$	0.6514

\*Quarterly Index Rate trends are being set at 1.81%.



**Highmark Health Insurance Company (HHIC)**

**Exhibit II**

**Western, PA (WPA) and Central, PA (CPA) Regions**

**Unified Rate Review Template (URRT) AV Pricing Value Development**

**Plan Design Summary**

HHIC	HIOS Plan ID	Metallic Level	Plan Design Marketing Name	Service Zone	Regions Offered	On or Off Exchange	Plan Adjusted	URRT AV Pricing Value	Portion of URRT AV Pricing Value Attributable to each Allowable Modifier <sup>[1]</sup>				
							Index Rate		(i)	(ii)	(iii)	(iv)	(v)
Western, PA Region	70194PA0220006	Gold	Shared Cost PPO \$1500	C	1,2,4,5,6	Off	\$634.30	0.947	0.807	1.000	1.000	1.173	1.000
	70194PA0230002	Bronze	Health Savings PPO Embedded Q\$4750	C	1,2,4,5,6	Off	\$472.03	0.704	0.600	1.000	1.000	1.173	1.000
Central, PA Region	70194PA0240006	Gold	Shared Cost PPO \$1500	F	6,7,9	Off	\$656.50	0.980	0.835	1.000	1.000	1.173	1.000
	70194PA0250002	Bronze	Health Savings PPO Embedded Q\$4750	F	6,7,9	Off	\$499.70	0.746	0.636	1.000	1.000	1.173	1.000

<sup>[1]</sup> Permitted Plan-Level Adjustments to the Index Rate as prescribed in 45 CFR Part 156, §156.80(d)(2):

- (i) The actuarial value and cost-sharing design of the plan.
- (ii) The plan's provider network, delivery system characteristics, and utilization management practices.
- (iii) The benefits provided under the plan that are in addition to the essential health benefits.
- (iv) Administrative costs, excluding Exchange user fees.
- (v) With respect to catastrophic plans, the expected impact of the specific eligibility categories for those plans.

**Exhibit III**  
**Highmark Health Insurance Company (HHIC)**  
**Small Group Market**

**Terminated ACA Plans**

Exchange	Service Zone	Regions	Terminating Plans		Mapping To...	
			HIOS ID	Plan Design Name	HIOS ID	Plan Design Name
On	A	1, 4	70194PA0200002	Comprehensive Care EPO \$2000 70% A Community Blue Plan	70194PA0220006	Shared Cost PPO \$1500
On	D	6,9	70194PA0210002	FLEX EPO \$1650 80%/70% A Community Blue Plan	70194PA0240006	Shared Cost PPO \$1500
On	D	6, 9	70194PA0210004	FLEX EPO \$1650 80%/70% A Community Blue Plan	70194PA0240006	Shared Cost PPO \$1500
On	E	6,7,9	70194PA0490001	Alliance Flex Blue PPO \$500	70194PA0240006	Shared Cost PPO \$1500
On	E	6, 7, 9	70194PA0490002	Alliance Flex Blue PPO \$1250	70194PA0240006	Shared Cost PPO \$1500
On	K	7, 9	70194PA0490003	Alliance Flex Blue PPO \$2500	70194PA0240006	Shared Cost PPO \$1500
On	K	7, 9	70194PA0490004	Alliance Flex Blue PPO \$1600	70194PA0240006	Shared Cost PPO \$1500

2020 Rates Table Template v9.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
<b>HIOS Issuer ID*</b>	70194				
<b>Federal TIN*</b>	54-1637426				
<b>Rate Effective Date*</b>	01/01/2020				
<b>Rate Expiration Date*</b>	03/31/2020				
<b>Rating Method*</b>	Age-Based Rates				
<b>Plan ID*</b>	<b>Rating Area ID*</b>	<b>Tobacco*</b>	<b>Age*</b>	<b>Individual Rate*</b>	
<b>Required:</b> Enter the 14-character Plan ID	<b>Required:</b> Select the Rating Area ID	<b>Required:</b> Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	<b>Required:</b> Select the age of a subscriber eligible for the rate	<b>Required:</b> Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	
70194PA0220006	Rating Area 1	No Preference	0-14	306.62	
70194PA0220006	Rating Area 1	No Preference	15	333.87	
70194PA0220006	Rating Area 1	No Preference	16	344.30	
70194PA0220006	Rating Area 1	No Preference	17	354.72	
70194PA0220006	Rating Area 1	No Preference	18	365.94	
70194PA0220006	Rating Area 1	No Preference	19	377.16	
70194PA0220006	Rating Area 1	No Preference	20	388.79	
70194PA0220006	Rating Area 1	No Preference	21	400.81	
70194PA0220006	Rating Area 1	No Preference	22	400.81	
70194PA0220006	Rating Area 1	No Preference	23	400.81	
70194PA0220006	Rating Area 1	No Preference	24	400.81	
70194PA0220006	Rating Area 1	No Preference	25	402.41	
70194PA0220006	Rating Area 1	No Preference	26	410.43	
70194PA0220006	Rating Area 1	No Preference	27	420.05	
70194PA0220006	Rating Area 1	No Preference	28	435.68	
70194PA0220006	Rating Area 1	No Preference	29	448.51	
70194PA0220006	Rating Area 1	No Preference	30	454.92	
70194PA0220006	Rating Area 1	No Preference	31	464.54	
70194PA0220006	Rating Area 1	No Preference	32	474.16	
70194PA0220006	Rating Area 1	No Preference	33	480.17	
70194PA0220006	Rating Area 1	No Preference	34	486.58	
70194PA0220006	Rating Area 1	No Preference	35	489.79	
70194PA0220006	Rating Area 1	No Preference	36	493.00	
70194PA0220006	Rating Area 1	No Preference	37	496.20	
70194PA0220006	Rating Area 1	No Preference	38	499.41	
70194PA0220006	Rating Area 1	No Preference	39	505.82	
70194PA0220006	Rating Area 1	No Preference	40	512.24	
70194PA0220006	Rating Area 1	No Preference	41	521.85	
70194PA0220006	Rating Area 1	No Preference	42	531.07	
70194PA0220006	Rating Area 1	No Preference	43	543.90	
70194PA0220006	Rating Area 1	No Preference	44	559.93	
70194PA0220006	Rating Area 1	No Preference	45	578.77	
70194PA0220006	Rating Area 1	No Preference	46	601.22	
70194PA0220006	Rating Area 1	No Preference	47	626.47	
70194PA0220006	Rating Area 1	No Preference	48	655.32	
70194PA0220006	Rating Area 1	No Preference	49	683.78	
70194PA0220006	Rating Area 1	No Preference	50	715.85	
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70194PA0220006	Rating Area 1	No Preference	62	1151.53	
70194PA0220006	Rating Area 1	No Preference	63	1183.19	
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70194PA0220006	Rating Area 2	No Preference	23	400.81	
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70194PA0220006	Rating Area 2	No Preference	25	402.41	
70194PA0220006	Rating Area 2	No Preference	26	410.43	
70194PA0220006	Rating Area 2	No Preference	27	420.05	
70194PA0220006	Rating Area 2	No Preference	28	435.68	
70194PA0220006	Rating Area 2	No Preference	29	448.51	
70194PA0220006	Rating Area 2	No Preference	30	454.92	
70194PA0220006	Rating Area 2	No Preference	31	464.54	
70194PA0220006	Rating Area 2	No Preference	32	474.16	
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70194PA0220006	Rating Area 2	No Preference	36	493.00	
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70194PA0220006	Rating Area 2	No Preference	41	521.85	
70194PA0220006	Rating Area 2	No Preference	42	531.07	
70194PA0220006	Rating Area 2	No Preference	43	543.90	
70194PA0220006	Rating Area 2	No Preference	44	559.93	
70194PA0220006	Rating Area 2	No Preference	45	578.77	
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70194PA0220006	Rating Area 2	No Preference	50	715.85	
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70194PA0220006	Rating Area 2	No Preference	62	1151.53	
70194PA0220006	Rating Area 2	No Preference	63	1183.19	
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70194PA0240006	Rating Area 7	No Preference	63	1312.96
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70194PA0240006	Rating Area 9	No Preference	57	1063.04
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70194PA0240006	Rating Area 9	No Preference	62	1253.23
70194PA0240006	Rating Area 9	No Preference	63	1287.69
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70194PA0250002	Rating Area 6	No Preference	18	309.09
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70194PA0250002	Rating Area 6	No Preference	29	378.83
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70194PA0250002	Rating Area 6	No Preference	38	421.82
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70194PA0250002	Rating Area 6	No Preference	40	432.65
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70194PA0250002	Rating Area 6	No Preference	43	459.40
70194PA0250002	Rating Area 6	No Preference	44	472.94





2020 Rates Table Template v9.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.		
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.		
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.		
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.		
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.		
<b>HIOS Issuer ID*</b>	70194			
<b>Federal TIN*</b>	54-1637426			
<b>Rate Effective Date*</b>	04/01/2020			
<b>Rate Expiration Date*</b>	06/30/2020			
<b>Rating Method*</b>	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
<b>Required:</b> Enter the 14-character Plan ID	<b>Required:</b> Select the Rating Area ID	<b>Required:</b> Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	<b>Required:</b> Select the age of a subscriber eligible for the rate	<b>Required:</b> Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
70194PA0220006	Rating Area 1	No Preference	0-14	312.17
70194PA0220006	Rating Area 1	No Preference	15	339.92
70194PA0220006	Rating Area 1	No Preference	16	350.53
70194PA0220006	Rating Area 1	No Preference	17	361.14
70194PA0220006	Rating Area 1	No Preference	18	372.57
70194PA0220006	Rating Area 1	No Preference	19	383.99
70194PA0220006	Rating Area 1	No Preference	20	395.83
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70194PA0220006	Rating Area 1	No Preference	22	408.07
70194PA0220006	Rating Area 1	No Preference	23	408.07
70194PA0220006	Rating Area 1	No Preference	24	408.07
70194PA0220006	Rating Area 1	No Preference	25	409.70
70194PA0220006	Rating Area 1	No Preference	26	417.86
70194PA0220006	Rating Area 1	No Preference	27	427.66
70194PA0220006	Rating Area 1	No Preference	28	443.57
70194PA0220006	Rating Area 1	No Preference	29	456.63
70194PA0220006	Rating Area 1	No Preference	30	463.16
70194PA0220006	Rating Area 1	No Preference	31	472.95
70194PA0220006	Rating Area 1	No Preference	32	482.75
70194PA0220006	Rating Area 1	No Preference	33	488.87
70194PA0220006	Rating Area 1	No Preference	34	495.40
70194PA0220006	Rating Area 1	No Preference	35	498.66
70194PA0220006	Rating Area 1	No Preference	36	501.93
70194PA0220006	Rating Area 1	No Preference	37	505.19
70194PA0220006	Rating Area 1	No Preference	38	508.46
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70194PA0220006	Rating Area 1	No Preference	41	531.31
70194PA0220006	Rating Area 1	No Preference	42	540.69
70194PA0220006	Rating Area 1	No Preference	43	553.75
70194PA0220006	Rating Area 1	No Preference	44	570.07
70194PA0220006	Rating Area 1	No Preference	45	589.25
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70194PA0220006	Rating Area 1	No Preference	48	667.19
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70194PA0220006	Rating Area 1	No Preference	51	761.05
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70194PA0220006	Rating Area 1	No Preference	56	952.03
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70194PA0220006	Rating Area 1	No Preference	59	1062.21
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70194PA0220006	Rating Area 1	No Preference	61	1146.68
70194PA0220006	Rating Area 1	No Preference	62	1172.39
70194PA0220006	Rating Area 1	No Preference	63	1204.62
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70194PA0220006	Rating Area 2	No Preference	0-14	312.17
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70194PA0220006	Rating Area 2	No Preference	17	361.14
70194PA0220006	Rating Area 2	No Preference	18	372.57
70194PA0220006	Rating Area 2	No Preference	19	383.99
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70194PA0220006	Rating Area 2	No Preference	21	408.07
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70194PA0220006	Rating Area 2	No Preference	23	408.07
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70194PA0220006	Rating Area 2	No Preference	25	409.70
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70194PA0220006	Rating Area 2	No Preference	36	501.93
70194PA0220006	Rating Area 2	No Preference	37	505.19
70194PA0220006	Rating Area 2	No Preference	38	508.46
70194PA0220006	Rating Area 2	No Preference	39	514.98
70194PA0220006	Rating Area 2	No Preference	40	521.51
70194PA0220006	Rating Area 2	No Preference	41	531.31
70194PA0220006	Rating Area 2	No Preference	42	540.69
70194PA0220006	Rating Area 2	No Preference	43	553.75
70194PA0220006	Rating Area 2	No Preference	44	570.07
70194PA0220006	Rating Area 2	No Preference	45	589.25
70194PA0220006	Rating Area 2	No Preference	46	612.11
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70194PA0220006	Rating Area 2	No Preference	49	696.17
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70194PA0220006	Rating Area 2	No Preference	52	796.55
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70194PA0220006	Rating Area 2	No Preference	54	871.23
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70194PA0220006	Rating Area 2	No Preference	56	952.03
70194PA0220006	Rating Area 2	No Preference	57	994.47
70194PA0220006	Rating Area 2	No Preference	58	1039.76
70194PA0220006	Rating Area 2	No Preference	59	1062.21
70194PA0220006	Rating Area 2	No Preference	60	1107.50
70194PA0220006	Rating Area 2	No Preference	61	1146.68
70194PA0220006	Rating Area 2	No Preference	62	1172.39
70194PA0220006	Rating Area 2	No Preference	63	1204.62
70194PA0220006	Rating Area 2	No Preference	64 and over	1224.21
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70194PA0240006	Rating Area 7	No Preference	56	1056.45
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70194PA0240006	Rating Area 7	No Preference	59	1178.72
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70194PA0240006	Rating Area 9	No Preference	19	417.92
70194PA0240006	Rating Area 9	No Preference	20	430.80
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70194PA0240006	Rating Area 9	No Preference	23	444.12
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70194PA0240006	Rating Area 9	No Preference	30	504.08
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70194PA0240006	Rating Area 9	No Preference	36	546.27
70194PA0240006	Rating Area 9	No Preference	37	549.82
70194PA0240006	Rating Area 9	No Preference	38	553.37
70194PA0240006	Rating Area 9	No Preference	39	560.48
70194PA0240006	Rating Area 9	No Preference	40	567.59
70194PA0240006	Rating Area 9	No Preference	41	578.24
70194PA0240006	Rating Area 9	No Preference	42	588.46
70194PA0240006	Rating Area 9	No Preference	43	602.67
70194PA0240006	Rating Area 9	No Preference	44	620.44
70194PA0240006	Rating Area 9	No Preference	45	641.31
70194PA0240006	Rating Area 9	No Preference	46	666.18
70194PA0240006	Rating Area 9	No Preference	47	694.16
70194PA0240006	Rating Area 9	No Preference	48	726.14
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70194PA0240006	Rating Area 9	No Preference	50	793.20
70194PA0240006	Rating Area 9	No Preference	51	828.28
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70194PA0240006	Rating Area 9	No Preference	56	1036.13
70194PA0240006	Rating Area 9	No Preference	57	1082.32
70194PA0240006	Rating Area 9	No Preference	58	1131.62
70194PA0240006	Rating Area 9	No Preference	59	1156.04
70194PA0240006	Rating Area 9	No Preference	60	1205.34
70194PA0240006	Rating Area 9	No Preference	61	1247.98
70194PA0240006	Rating Area 9	No Preference	62	1275.96
70194PA0240006	Rating Area 9	No Preference	63	1311.04
70194PA0240006	Rating Area 9	No Preference	64 and over	1332.36
70194PA0250002	Rating Area 6	No Preference	0-14	263.68
70194PA0250002	Rating Area 6	No Preference	15	287.12
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70194PA0250002	Rating Area 6	No Preference	18	314.69
70194PA0250002	Rating Area 6	No Preference	19	324.34
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70194PA0250002	Rating Area 6	No Preference	21	344.68
70194PA0250002	Rating Area 6	No Preference	22	344.68
70194PA0250002	Rating Area 6	No Preference	23	344.68
70194PA0250002	Rating Area 6	No Preference	24	344.68
70194PA0250002	Rating Area 6	No Preference	25	346.06
70194PA0250002	Rating Area 6	No Preference	26	352.95
70194PA0250002	Rating Area 6	No Preference	27	361.22
70194PA0250002	Rating Area 6	No Preference	28	374.67
70194PA0250002	Rating Area 6	No Preference	29	385.70
70194PA0250002	Rating Area 6	No Preference	30	391.21
70194PA0250002	Rating Area 6	No Preference	31	399.48
70194PA0250002	Rating Area 6	No Preference	32	407.76
70194PA0250002	Rating Area 6	No Preference	33	412.93
70194PA0250002	Rating Area 6	No Preference	34	418.44
70194PA0250002	Rating Area 6	No Preference	35	421.20
70194PA0250002	Rating Area 6	No Preference	36	423.96
70194PA0250002	Rating Area 6	No Preference	37	426.71
70194PA0250002	Rating Area 6	No Preference	38	429.47
70194PA0250002	Rating Area 6	No Preference	39	434.99
70194PA0250002	Rating Area 6	No Preference	40	440.50
70194PA0250002	Rating Area 6	No Preference	41	448.77
70194PA0250002	Rating Area 6	No Preference	42	456.70
70194PA0250002	Rating Area 6	No Preference	43	467.73
70194PA0250002	Rating Area 6	No Preference	44	481.52





2020 Rates Table Template v9.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.		
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.		
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.		
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.		
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.		
<b>HIOS Issuer ID*</b>	70194			
<b>Federal TIN*</b>	54-1637426			
<b>Rate Effective Date*</b>	07/01/2020			
<b>Rate Expiration Date*</b>	09/30/2020			
<b>Rating Method*</b>	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
<b>Required:</b> Enter the 14-character Plan ID	<b>Required:</b> Select the Rating Area ID	<b>Required:</b> Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	<b>Required:</b> Select the age of a subscriber eligible for the rate	<b>Required:</b> Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
70194PA0220006	Rating Area 1	No Preference	0-14	317.83
70194PA0220006	Rating Area 1	No Preference	15	346.09
70194PA0220006	Rating Area 1	No Preference	16	356.89
70194PA0220006	Rating Area 1	No Preference	17	367.69
70194PA0220006	Rating Area 1	No Preference	18	379.32
70194PA0220006	Rating Area 1	No Preference	19	390.96
70194PA0220006	Rating Area 1	No Preference	20	403.01
70194PA0220006	Rating Area 1	No Preference	21	415.47
70194PA0220006	Rating Area 1	No Preference	22	415.47
70194PA0220006	Rating Area 1	No Preference	23	415.47
70194PA0220006	Rating Area 1	No Preference	24	415.47
70194PA0220006	Rating Area 1	No Preference	25	417.13
70194PA0220006	Rating Area 1	No Preference	26	425.44
70194PA0220006	Rating Area 1	No Preference	27	435.41
70194PA0220006	Rating Area 1	No Preference	28	451.62
70194PA0220006	Rating Area 1	No Preference	29	464.91
70194PA0220006	Rating Area 1	No Preference	30	471.56
70194PA0220006	Rating Area 1	No Preference	31	481.53
70194PA0220006	Rating Area 1	No Preference	32	491.50
70194PA0220006	Rating Area 1	No Preference	33	497.73
70194PA0220006	Rating Area 1	No Preference	34	504.38
70194PA0220006	Rating Area 1	No Preference	35	507.70
70194PA0220006	Rating Area 1	No Preference	36	511.03
70194PA0220006	Rating Area 1	No Preference	37	514.35
70194PA0220006	Rating Area 1	No Preference	38	517.68
70194PA0220006	Rating Area 1	No Preference	39	524.32
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70194PA0220006	Rating Area 1	No Preference	41	540.94
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70194PA0220006	Rating Area 1	No Preference	48	679.29
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70194PA0220006	Rating Area 1	No Preference	50	742.03
70194PA0220006	Rating Area 1	No Preference	51	774.85
70194PA0220006	Rating Area 1	No Preference	52	811.00
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70194PA0220006	Rating Area 1	No Preference	58	1058.62
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70194PA0220006	Rating Area 1	No Preference	64 and over	1246.41
70194PA0220006	Rating Area 2	No Preference	0-14	317.83
70194PA0220006	Rating Area 2	No Preference	15	346.09
70194PA0220006	Rating Area 2	No Preference	16	356.89
70194PA0220006	Rating Area 2	No Preference	17	367.69
70194PA0220006	Rating Area 2	No Preference	18	379.32
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70194PA0220006	Rating Area 2	No Preference	23	415.47
70194PA0220006	Rating Area 2	No Preference	24	415.47
70194PA0220006	Rating Area 2	No Preference	25	417.13
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70194PA0220006	Rating Area 2	No Preference	27	435.41
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70194PA0220006	Rating Area 2	No Preference	29	464.91
70194PA0220006	Rating Area 2	No Preference	30	471.56
70194PA0220006	Rating Area 2	No Preference	31	481.53
70194PA0220006	Rating Area 2	No Preference	32	491.50
70194PA0220006	Rating Area 2	No Preference	33	497.73
70194PA0220006	Rating Area 2	No Preference	34	504.38
70194PA0220006	Rating Area 2	No Preference	35	507.70
70194PA0220006	Rating Area 2	No Preference	36	511.03
70194PA0220006	Rating Area 2	No Preference	37	514.35
70194PA0220006	Rating Area 2	No Preference	38	517.68
70194PA0220006	Rating Area 2	No Preference	39	524.32
70194PA0220006	Rating Area 2	No Preference	40	530.97
70194PA0220006	Rating Area 2	No Preference	41	540.94
70194PA0220006	Rating Area 2	No Preference	42	550.50
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70194PA0220006	Rating Area 2	No Preference	44	580.41
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70194PA0220006	Rating Area 2	No Preference	46	623.21
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70194PA0220006	Rating Area 2	No Preference	48	679.29
70194PA0220006	Rating Area 2	No Preference	49	708.79
70194PA0220006	Rating Area 2	No Preference	50	742.03
70194PA0220006	Rating Area 2	No Preference	51	774.85
70194PA0220006	Rating Area 2	No Preference	52	811.00
70194PA0220006	Rating Area 2	No Preference	53	847.56
70194PA0220006	Rating Area 2	No Preference	54	887.03
70194PA0220006	Rating Area 2	No Preference	55	926.50
70194PA0220006	Rating Area 2	No Preference	56	969.29
70194PA0220006	Rating Area 2	No Preference	57	1012.50
70194PA0220006	Rating Area 2	No Preference	58	1058.62
70194PA0220006	Rating Area 2	No Preference	59	1081.47
70194PA0220006	Rating Area 2	No Preference	60	1127.59
70194PA0220006	Rating Area 2	No Preference	61	1167.47
70194PA0220006	Rating Area 2	No Preference	62	1193.65
70194PA0220006	Rating Area 2	No Preference	63	1226.47
70194PA0220006	Rating Area 2	No Preference	64 and over	1246.41
70194PA0220006	Rating Area 4	No Preference	0-14	317.83









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70194PA0240006	Rating Area 7	No Preference	49	786.53
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70194PA0240006	Rating Area 7	No Preference	51	859.84
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70194PA0240006	Rating Area 7	No Preference	53	940.52
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70194PA0240006	Rating Area 7	No Preference	55	1028.12
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70194PA0240006	Rating Area 7	No Preference	58	1174.73
70194PA0240006	Rating Area 7	No Preference	59	1200.09
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70194PA0240006	Rating Area 7	No Preference	61	1295.52
70194PA0240006	Rating Area 7	No Preference	62	1324.57
70194PA0240006	Rating Area 7	No Preference	63	1360.99
70194PA0240006	Rating Area 7	No Preference	64 and over	1383.12
70194PA0240006	Rating Area 9	No Preference	0-14	345.91
70194PA0240006	Rating Area 9	No Preference	15	376.66
70194PA0240006	Rating Area 9	No Preference	16	388.41
70194PA0240006	Rating Area 9	No Preference	17	400.17
70194PA0240006	Rating Area 9	No Preference	18	412.83
70194PA0240006	Rating Area 9	No Preference	19	425.49
70194PA0240006	Rating Area 9	No Preference	20	438.60
70194PA0240006	Rating Area 9	No Preference	21	452.17
70194PA0240006	Rating Area 9	No Preference	22	452.17
70194PA0240006	Rating Area 9	No Preference	23	452.17
70194PA0240006	Rating Area 9	No Preference	24	452.17
70194PA0240006	Rating Area 9	No Preference	25	453.98
70194PA0240006	Rating Area 9	No Preference	26	463.02
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70194PA0240006	Rating Area 9	No Preference	30	513.21
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70194PA0240006	Rating Area 9	No Preference	32	534.92
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70194PA0240006	Rating Area 9	No Preference	37	559.79
70194PA0240006	Rating Area 9	No Preference	38	563.40
70194PA0240006	Rating Area 9	No Preference	39	570.64
70194PA0240006	Rating Area 9	No Preference	40	577.87
70194PA0240006	Rating Area 9	No Preference	41	588.73
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70194PA0240006	Rating Area 9	No Preference	43	613.59
70194PA0240006	Rating Area 9	No Preference	44	631.68
70194PA0240006	Rating Area 9	No Preference	45	652.93
70194PA0240006	Rating Area 9	No Preference	46	678.26
70194PA0240006	Rating Area 9	No Preference	47	706.74
70194PA0240006	Rating Area 9	No Preference	48	739.30
70194PA0240006	Rating Area 9	No Preference	49	771.40
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70194PA0240006	Rating Area 9	No Preference	55	1008.34
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70194PA0240006	Rating Area 9	No Preference	57	1101.94
70194PA0240006	Rating Area 9	No Preference	58	1152.13
70194PA0240006	Rating Area 9	No Preference	59	1177.00
70194PA0240006	Rating Area 9	No Preference	60	1227.19
70194PA0240006	Rating Area 9	No Preference	61	1270.60
70194PA0240006	Rating Area 9	No Preference	62	1299.08
70194PA0240006	Rating Area 9	No Preference	63	1334.81
70194PA0240006	Rating Area 9	No Preference	64 and over	1356.51
70194PA0250002	Rating Area 6	No Preference	0-14	268.45
70194PA0250002	Rating Area 6	No Preference	15	292.32
70194PA0250002	Rating Area 6	No Preference	16	301.44
70194PA0250002	Rating Area 6	No Preference	17	310.56
70194PA0250002	Rating Area 6	No Preference	18	320.39
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70194PA0250002	Rating Area 6	No Preference	20	340.39
70194PA0250002	Rating Area 6	No Preference	21	350.92
70194PA0250002	Rating Area 6	No Preference	22	350.92
70194PA0250002	Rating Area 6	No Preference	23	350.92
70194PA0250002	Rating Area 6	No Preference	24	350.92
70194PA0250002	Rating Area 6	No Preference	25	352.32
70194PA0250002	Rating Area 6	No Preference	26	359.34
70194PA0250002	Rating Area 6	No Preference	27	367.76
70194PA0250002	Rating Area 6	No Preference	28	381.45
70194PA0250002	Rating Area 6	No Preference	29	392.68
70194PA0250002	Rating Area 6	No Preference	30	398.29
70194PA0250002	Rating Area 6	No Preference	31	406.72
70194PA0250002	Rating Area 6	No Preference	32	415.14
70194PA0250002	Rating Area 6	No Preference	33	420.40
70194PA0250002	Rating Area 6	No Preference	34	426.02
70194PA0250002	Rating Area 6	No Preference	35	428.82
70194PA0250002	Rating Area 6	No Preference	36	431.63
70194PA0250002	Rating Area 6	No Preference	37	434.44
70194PA0250002	Rating Area 6	No Preference	38	437.25
70194PA0250002	Rating Area 6	No Preference	39	442.86
70194PA0250002	Rating Area 6	No Preference	40	448.48
70194PA0250002	Rating Area 6	No Preference	41	456.90
70194PA0250002	Rating Area 6	No Preference	42	464.97
70194PA0250002	Rating Area 6	No Preference	43	476.20
70194PA0250002	Rating Area 6	No Preference	44	490.24





2020 Rates Table Template v9.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.		
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.		
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.		
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.		
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.		
<b>HIOS Issuer ID*</b>	70194			
<b>Federal TIN*</b>	54-1637426			
<b>Rate Effective Date*</b>	10/01/2020			
<b>Rate Expiration Date*</b>	12/31/2020			
<b>Rating Method*</b>	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
<b>Required:</b> Enter the 14-character Plan ID	<b>Required:</b> Select the Rating Area ID	<b>Required:</b> Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	<b>Required:</b> Select the age of a subscriber eligible for the rate	<b>Required:</b> Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
70194PA0220006	Rating Area 1	No Preference	0-14	323.60
70194PA0220006	Rating Area 1	No Preference	15	352.36
70194PA0220006	Rating Area 1	No Preference	16	363.36
70194PA0220006	Rating Area 1	No Preference	17	374.36
70194PA0220006	Rating Area 1	No Preference	18	386.20
70194PA0220006	Rating Area 1	No Preference	19	398.04
70194PA0220006	Rating Area 1	No Preference	20	410.31
70194PA0220006	Rating Area 1	No Preference	21	423.00
70194PA0220006	Rating Area 1	No Preference	22	423.00
70194PA0220006	Rating Area 1	No Preference	23	423.00
70194PA0220006	Rating Area 1	No Preference	24	423.00
70194PA0220006	Rating Area 1	No Preference	25	424.69
70194PA0220006	Rating Area 1	No Preference	26	433.15
70194PA0220006	Rating Area 1	No Preference	27	443.30
70194PA0220006	Rating Area 1	No Preference	28	459.80
70194PA0220006	Rating Area 1	No Preference	29	473.34
70194PA0220006	Rating Area 1	No Preference	30	480.11
70194PA0220006	Rating Area 1	No Preference	31	490.26
70194PA0220006	Rating Area 1	No Preference	32	500.41
70194PA0220006	Rating Area 1	No Preference	33	506.75
70194PA0220006	Rating Area 1	No Preference	34	513.52
70194PA0220006	Rating Area 1	No Preference	35	516.91
70194PA0220006	Rating Area 1	No Preference	36	520.29
70194PA0220006	Rating Area 1	No Preference	37	523.67
70194PA0220006	Rating Area 1	No Preference	38	527.06
70194PA0220006	Rating Area 1	No Preference	39	533.83
70194PA0220006	Rating Area 1	No Preference	40	540.59
70194PA0220006	Rating Area 1	No Preference	41	550.75
70194PA0220006	Rating Area 1	No Preference	42	560.48
70194PA0220006	Rating Area 1	No Preference	43	574.01
70194PA0220006	Rating Area 1	No Preference	44	590.93
70194PA0220006	Rating Area 1	No Preference	45	610.81
70194PA0220006	Rating Area 1	No Preference	46	634.50
70194PA0220006	Rating Area 1	No Preference	47	661.15
70194PA0220006	Rating Area 1	No Preference	48	691.61
70194PA0220006	Rating Area 1	No Preference	49	721.64
70194PA0220006	Rating Area 1	No Preference	50	755.48
70194PA0220006	Rating Area 1	No Preference	51	788.90
70194PA0220006	Rating Area 1	No Preference	52	825.70
70194PA0220006	Rating Area 1	No Preference	53	862.92
70194PA0220006	Rating Area 1	No Preference	54	903.11
70194PA0220006	Rating Area 1	No Preference	55	943.29
70194PA0220006	Rating Area 1	No Preference	56	986.86
70194PA0220006	Rating Area 1	No Preference	57	1030.85
70194PA0220006	Rating Area 1	No Preference	58	1077.80
70194PA0220006	Rating Area 1	No Preference	59	1101.07
70194PA0220006	Rating Area 1	No Preference	60	1148.02
70194PA0220006	Rating Area 1	No Preference	61	1188.63
70194PA0220006	Rating Area 1	No Preference	62	1215.28
70194PA0220006	Rating Area 1	No Preference	63	1248.70
70194PA0220006	Rating Area 1	No Preference	64 and over	1269.00
70194PA0220006	Rating Area 2	No Preference	0-14	323.60
70194PA0220006	Rating Area 2	No Preference	15	352.36
70194PA0220006	Rating Area 2	No Preference	16	363.36
70194PA0220006	Rating Area 2	No Preference	17	374.36
70194PA0220006	Rating Area 2	No Preference	18	386.20
70194PA0220006	Rating Area 2	No Preference	19	398.04
70194PA0220006	Rating Area 2	No Preference	20	410.31
70194PA0220006	Rating Area 2	No Preference	21	423.00
70194PA0220006	Rating Area 2	No Preference	22	423.00
70194PA0220006	Rating Area 2	No Preference	23	423.00
70194PA0220006	Rating Area 2	No Preference	24	423.00
70194PA0220006	Rating Area 2	No Preference	25	424.69
70194PA0220006	Rating Area 2	No Preference	26	433.15
70194PA0220006	Rating Area 2	No Preference	27	443.30
70194PA0220006	Rating Area 2	No Preference	28	459.80
70194PA0220006	Rating Area 2	No Preference	29	473.34
70194PA0220006	Rating Area 2	No Preference	30	480.11
70194PA0220006	Rating Area 2	No Preference	31	490.26
70194PA0220006	Rating Area 2	No Preference	32	500.41
70194PA0220006	Rating Area 2	No Preference	33	506.75
70194PA0220006	Rating Area 2	No Preference	34	513.52
70194PA0220006	Rating Area 2	No Preference	35	516.91
70194PA0220006	Rating Area 2	No Preference	36	520.29
70194PA0220006	Rating Area 2	No Preference	37	523.67
70194PA0220006	Rating Area 2	No Preference	38	527.06
70194PA0220006	Rating Area 2	No Preference	39	533.83
70194PA0220006	Rating Area 2	No Preference	40	540.59
70194PA0220006	Rating Area 2	No Preference	41	550.75
70194PA0220006	Rating Area 2	No Preference	42	560.48
70194PA0220006	Rating Area 2	No Preference	43	574.01
70194PA0220006	Rating Area 2	No Preference	44	590.93
70194PA0220006	Rating Area 2	No Preference	45	610.81
70194PA0220006	Rating Area 2	No Preference	46	634.50
70194PA0220006	Rating Area 2	No Preference	47	661.15
70194PA0220006	Rating Area 2	No Preference	48	691.61
70194PA0220006	Rating Area 2	No Preference	49	721.64
70194PA0220006	Rating Area 2	No Preference	50	755.48
70194PA0220006	Rating Area 2	No Preference	51	788.90
70194PA0220006	Rating Area 2	No Preference	52	825.70
70194PA0220006	Rating Area 2	No Preference	53	862.92
70194PA0220006	Rating Area 2	No Preference	54	903.11
70194PA0220006	Rating Area 2	No Preference	55	943.29
70194PA0220006	Rating Area 2	No Preference	56	986.86
70194PA0220006	Rating Area 2	No Preference	57	1030.85
70194PA0220006	Rating Area 2	No Preference	58	1077.80
70194PA0220006	Rating Area 2	No Preference	59	1101.07
70194PA0220006	Rating Area 2	No Preference	60	1148.02
70194PA0220006	Rating Area 2	No Preference	61	1188.63
70194PA0220006	Rating Area 2	No Preference	62	1215.28
70194PA0220006	Rating Area 2	No Preference	63	1248.70
70194PA0220006	Rating Area 2	No Preference	64 and over	1269.00
70194PA0220006	Rating Area 4	No Preference	0-14	323.60











70194PA0240006	Rating Area 7	No Preference	48	767.45
70194PA0240006	Rating Area 7	No Preference	49	800.78
70194PA0240006	Rating Area 7	No Preference	50	838.33
70194PA0240006	Rating Area 7	No Preference	51	875.41
70194PA0240006	Rating Area 7	No Preference	52	916.25
70194PA0240006	Rating Area 7	No Preference	53	957.56
70194PA0240006	Rating Area 7	No Preference	54	1002.15
70194PA0240006	Rating Area 7	No Preference	55	1046.74
70194PA0240006	Rating Area 7	No Preference	56	1095.09
70194PA0240006	Rating Area 7	No Preference	57	1143.90
70194PA0240006	Rating Area 7	No Preference	58	1196.01
70194PA0240006	Rating Area 7	No Preference	59	1221.82
70194PA0240006	Rating Area 7	No Preference	60	1273.92
70194PA0240006	Rating Area 7	No Preference	61	1318.99
70194PA0240006	Rating Area 7	No Preference	62	1348.56
70194PA0240006	Rating Area 7	No Preference	63	1385.64
70194PA0240006	Rating Area 7	No Preference	64 and over	1408.17
70194PA0240006	Rating Area 9	No Preference	0-14	352.18
70194PA0240006	Rating Area 9	No Preference	15	383.49
70194PA0240006	Rating Area 9	No Preference	16	395.46
70194PA0240006	Rating Area 9	No Preference	17	407.43
70194PA0240006	Rating Area 9	No Preference	18	420.32
70194PA0240006	Rating Area 9	No Preference	19	433.21
70194PA0240006	Rating Area 9	No Preference	20	446.56
70194PA0240006	Rating Area 9	No Preference	21	460.37
70194PA0240006	Rating Area 9	No Preference	22	460.37
70194PA0240006	Rating Area 9	No Preference	23	460.37
70194PA0240006	Rating Area 9	No Preference	24	460.37
70194PA0240006	Rating Area 9	No Preference	25	462.21
70194PA0240006	Rating Area 9	No Preference	26	471.42
70194PA0240006	Rating Area 9	No Preference	27	482.47
70194PA0240006	Rating Area 9	No Preference	28	500.42
70194PA0240006	Rating Area 9	No Preference	29	515.15
70194PA0240006	Rating Area 9	No Preference	30	522.52
70194PA0240006	Rating Area 9	No Preference	31	533.57
70194PA0240006	Rating Area 9	No Preference	32	544.62
70194PA0240006	Rating Area 9	No Preference	33	551.52
70194PA0240006	Rating Area 9	No Preference	34	558.89
70194PA0240006	Rating Area 9	No Preference	35	562.57
70194PA0240006	Rating Area 9	No Preference	36	566.26
70194PA0240006	Rating Area 9	No Preference	37	569.94
70194PA0240006	Rating Area 9	No Preference	38	573.62
70194PA0240006	Rating Area 9	No Preference	39	580.99
70194PA0240006	Rating Area 9	No Preference	40	588.35
70194PA0240006	Rating Area 9	No Preference	41	599.40
70194PA0240006	Rating Area 9	No Preference	42	609.99
70194PA0240006	Rating Area 9	No Preference	43	624.72
70194PA0240006	Rating Area 9	No Preference	44	643.14
70194PA0240006	Rating Area 9	No Preference	45	664.77
70194PA0240006	Rating Area 9	No Preference	46	690.56
70194PA0240006	Rating Area 9	No Preference	47	719.56
70194PA0240006	Rating Area 9	No Preference	48	752.70
70194PA0240006	Rating Area 9	No Preference	49	785.39
70194PA0240006	Rating Area 9	No Preference	50	822.22
70194PA0240006	Rating Area 9	No Preference	51	858.59
70194PA0240006	Rating Area 9	No Preference	52	898.64
70194PA0240006	Rating Area 9	No Preference	53	939.15
70194PA0240006	Rating Area 9	No Preference	54	982.89
70194PA0240006	Rating Area 9	No Preference	55	1026.63
70194PA0240006	Rating Area 9	No Preference	56	1074.04
70194PA0240006	Rating Area 9	No Preference	57	1121.92
70194PA0240006	Rating Area 9	No Preference	58	1173.02
70194PA0240006	Rating Area 9	No Preference	59	1198.34
70194PA0240006	Rating Area 9	No Preference	60	1249.44
70194PA0240006	Rating Area 9	No Preference	61	1293.64
70194PA0240006	Rating Area 9	No Preference	62	1322.64
70194PA0240006	Rating Area 9	No Preference	63	1359.01
70194PA0240006	Rating Area 9	No Preference	64 and over	1381.11
70194PA0250002	Rating Area 6	No Preference	0-14	273.32
70194PA0250002	Rating Area 6	No Preference	15	297.61
70194PA0250002	Rating Area 6	No Preference	16	306.90
70194PA0250002	Rating Area 6	No Preference	17	316.19
70194PA0250002	Rating Area 6	No Preference	18	326.20
70194PA0250002	Rating Area 6	No Preference	19	336.20
70194PA0250002	Rating Area 6	No Preference	20	346.56
70194PA0250002	Rating Area 6	No Preference	21	357.28
70194PA0250002	Rating Area 6	No Preference	22	357.28
70194PA0250002	Rating Area 6	No Preference	23	357.28
70194PA0250002	Rating Area 6	No Preference	24	357.28
70194PA0250002	Rating Area 6	No Preference	25	358.71
70194PA0250002	Rating Area 6	No Preference	26	365.85
70194PA0250002	Rating Area 6	No Preference	27	374.43
70194PA0250002	Rating Area 6	No Preference	28	388.36
70194PA0250002	Rating Area 6	No Preference	29	399.80
70194PA0250002	Rating Area 6	No Preference	30	405.51
70194PA0250002	Rating Area 6	No Preference	31	414.09
70194PA0250002	Rating Area 6	No Preference	32	422.66
70194PA0250002	Rating Area 6	No Preference	33	428.02
70194PA0250002	Rating Area 6	No Preference	34	433.74
70194PA0250002	Rating Area 6	No Preference	35	436.60
70194PA0250002	Rating Area 6	No Preference	36	439.45
70194PA0250002	Rating Area 6	No Preference	37	442.31
70194PA0250002	Rating Area 6	No Preference	38	445.17
70194PA0250002	Rating Area 6	No Preference	39	450.89
70194PA0250002	Rating Area 6	No Preference	40	456.60
70194PA0250002	Rating Area 6	No Preference	41	465.18
70194PA0250002	Rating Area 6	No Preference	42	473.40
70194PA0250002	Rating Area 6	No Preference	43	484.83
70194PA0250002	Rating Area 6	No Preference	44	499.12



**Highmark Health Insurance Co. (HHIC)**  
**2020 Small Group Rate Filing**  
**Transitional Policy Data by Year from Table 4**  
**Company: HHIC**

Year	Premium	Ultimate Incurred Claims (Net of Rx Rebates)	Member Months
2015	\$ 476,999,173	\$ 379,326,758	1,223,922
2016	\$ 392,410,696	\$ 312,756,288	950,604
2017	\$ 340,453,996	\$ 272,675,395	783,919
2018	\$ 271,226,942	\$ 215,195,744	609,197

# Highmark Health Insurance Co. (HHIC)

## 2020 Small Group Rate Filing

### Trend Exhibit

#### Western and Central, PA Region

Incurred Month	Members	Normalized Allowed PMPM	12 Month Moving Average PMPM	Annual Trend
Jan-15	149,173	\$ 431.68		
Feb-15	147,720	\$ 401.96		
Mar-15	146,768	\$ 444.95		
Apr-15	145,075	\$ 416.63		
May-15	144,573	\$ 399.40		
Jun-15	143,895	\$ 419.02		
Jul-15	141,490	\$ 431.10		
Aug-15	140,718	\$ 399.29		
Sep-15	139,686	\$ 430.67		
Oct-15	136,878	\$ 451.70		
Nov-15	135,508	\$ 438.74		
Dec-15	119,692	\$ 425.78	\$ 424.05	
Jan-16	115,341	\$ 421.04	\$ 423.15	
Feb-16	114,145	\$ 454.97	\$ 427.32	
Mar-16	112,293	\$ 461.86	\$ 428.13	
Apr-16	110,370	\$ 435.36	\$ 429.72	
May-16	108,497	\$ 432.41	\$ 432.79	
Jun-16	106,935	\$ 465.04	\$ 436.46	
Jul-16	104,049	\$ 425.74	\$ 436.21	
Aug-16	103,100	\$ 491.05	\$ 443.93	
Sep-16	102,062	\$ 472.39	\$ 447.40	
Oct-16	100,266	\$ 470.67	\$ 448.71	
Nov-16	99,269	\$ 476.04	\$ 451.85	
Dec-16	88,839	\$ 463.69	\$ 455.14	7.3%
Jan-17	88,707	\$ 495.79	\$ 461.23	9.0%
Feb-17	88,195	\$ 460.65	\$ 461.78	8.1%
Mar-17	87,618	\$ 518.16	\$ 465.93	8.8%
Apr-17	86,871	\$ 497.49	\$ 471.18	9.6%
May-17	86,528	\$ 528.94	\$ 479.24	10.7%
Jun-17	86,343	\$ 519.27	\$ 483.67	10.8%
Jul-17	84,672	\$ 501.34	\$ 490.50	12.4%
Aug-17	84,315	\$ 537.47	\$ 494.10	11.3%
Sep-17	83,706	\$ 522.61	\$ 498.42	11.4%
Oct-17	82,707	\$ 544.86	\$ 504.74	12.5%
Nov-17	82,367	\$ 516.03	\$ 508.41	12.5%
Dec-17	70,991	\$ 485.92	\$ 510.75	12.2%
Jan-18	70,522	\$ 626.32	\$ 520.28	12.8%
Feb-18	70,353	\$ 520.20	\$ 525.66	13.8%
Mar-18	70,195	\$ 578.67	\$ 530.22	13.8%
Apr-18	69,947	\$ 550.62	\$ 534.75	13.5%
May-18	70,380	\$ 551.99	\$ 536.60	12.0%
Jun-18	70,334	\$ 543.74	\$ 538.80	11.4%
Jul-18	70,694	\$ 540.57	\$ 542.47	10.6%
Aug-18	71,018	\$ 567.29	\$ 544.95	10.3%
Sep-18	71,520	\$ 521.29	\$ 545.15	9.4%
Oct-18	72,512	\$ 579.39	\$ 548.06	8.6%
Nov-18	73,111	\$ 573.43	\$ 553.34	8.8%
Dec-18	74,217	\$ 549.84	\$ 558.64	9.4%
Jan-19	72,560	\$ 642.44	\$ 560.16	7.7%
Feb-19	72,560	\$ 569.30	\$ 564.21	7.3%
Mar-19	72,560	\$ 599.07	\$ 565.96	6.7%
Apr-19	72,560	\$ 610.54	\$ 570.95	6.8%
May-19	72,560	\$ 613.26	\$ 576.03	7.3%
Jun-19	72,560	\$ 573.28	\$ 578.42	7.4%
Jul-19	72,560	\$ 624.36	\$ 585.33	7.9%
Aug-19	72,560	\$ 618.41	\$ 589.55	8.2%
Sep-19	72,560	\$ 597.29	\$ 595.78	9.3%
Oct-19	72,560	\$ 658.53	\$ 602.36	9.9%
Nov-19	72,560	\$ 621.31	\$ 606.36	9.6%
Dec-19	72,560	\$ 609.58	\$ 611.45	9.5%
Jan-20	72,560	\$ 662.98	\$ 613.16	9.5%
Feb-20	72,560	\$ 629.88	\$ 618.21	9.6%
Mar-20	72,560	\$ 677.94	\$ 624.78	10.4%
Apr-20	72,560	\$ 662.89	\$ 629.14	10.2%
May-20	72,560	\$ 629.40	\$ 630.49	9.5%
Jun-20	72,560	\$ 669.32	\$ 638.49	10.4%
Jul-20	72,560	\$ 669.85	\$ 642.28	9.7%
Aug-20	72,560	\$ 649.95	\$ 644.91	9.4%
Sep-20	72,560	\$ 663.91	\$ 650.46	9.2%
Oct-20	72,560	\$ 687.73	\$ 652.90	8.4%
Nov-20	72,560	\$ 672.07	\$ 657.13	8.4%
Dec-20	72,560	\$ 678.10	\$ 662.84	8.4%

Proposed Annual Trend (Cost & Utilization) **7.6%**

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**Highmark Health Insurance Co. (HHIC)**  
**2020 Small Group Rate Filing**  
**Derivation of Change in Morbidity, Demographics, and Benefits**

<u>Change in Morbidity Calculation</u>	<u>Reference</u>	<u>Formula</u>	<u>Calculation</u>
2018 Allowed Claims for those Members Expected to be Effective in 2020	(1)		\$583.99
Calendar year 2018 allowed claims PMPM	(2)		\$411.84
<b>Change in Morbidity</b>	<b>(3)</b>	<b>=(1)/(2)</b>	<b>1.418</b>

<u>Change in Demographics Calculation</u>	<u>Reference</u>	<u>Formula</u>	<u>Calculation</u>
2020 Age Factor for Members Expected to be Effective in 2019	(1)		1.532
2020 Area Factor for Members Expected to be Effective in 2019	(2)		1.008
Calendar Year 2018 Age Factor	(3)		1.508
Calendar Year 2018 Area Factor	(4)		1.009
<b>Change in Demographics</b>	<b>(5)</b>	<b>=[(1)*(2)]/[(3)*(4)]</b>	<b>1.015</b>

<u>Change in Benefits Calculation</u>	
Total Adjusted Projected Allowed EHB Claims PMPM (Before Change in Benefits)	\$ 680.44
EHB - Autism Benefit	\$ -
EHB - Pediatric Benefits	\$ 0.55
Change in Pharmacy Rebates	\$ 0.21
Total Adjusted Projected Allowed EHB Claims PMPM (After Change in Benefits)	\$ 681.20
<b>Change in Benefits</b>	<b>1.001</b>

**Highmark Health Insurance Co. (HHIC)**  
**2020 Small Group Rate Filing**  
**Paid-to-Allowed Ratio in the Projection Period**

Sum of Projected Claims by Plan \$ 2,991,816 \$ 2,411,278  
 Calculated Paid to Allowed Ratio 80.6%  
 URRT Worksheet I Value 80.6%

Plan ID	Metal Level	Projected Member Months	Projected Allowed Claims	Projected Paid Claims
70194PA0220006	Gold	137	\$ 1,127,187	\$ 903,406
70194PA0230002	Bronze	10	\$ 76,182	\$ 49,072
70194PA0240006	Gold	197	\$ 1,620,846	\$ 1,344,512
70194PA0250002	Bronze	22	\$ 167,600	\$ 114,288

**Highmark Health Insurance Co. (HHIC)**  
**2020 Small Group Filing**  
**Induced Utilization Exhibit**

Plan ID (1)	Metal Level (2)	Projected Membership (3)	Projected Allowed Claims (4)	Projected Paid Claims (5)	Paid-To- Allowed Factor (6)	AV & Cost Sharing Factor (7)	(7)/(6) (8)
70194PA0220006	Gold	137	\$ 1,127,187	\$ 903,406	0.8015	0.8067	1.0065
70194PA0230002	Bronze	10	\$ 76,182	\$ 49,072	0.6441	0.6003	0.9320
70194PA0240006	Gold	197	\$ 1,620,846	\$ 1,344,512	0.8295	0.8349	1.0065
70194PA0250002	Bronze	22	\$ 167,600	\$ 114,288	0.6819	0.6355	0.9320
						<b>Average</b>	<b>1.0000</b>

**Highmark Health Insurance Co. (HHIC)**  
**2020 Small Group Filing**  
**Derivation of the Age, Geographic, and Tobacco Calibration Factors**

<b>Age Factor</b>					
Type	Average Age Factor	% of Members	Allowed Claims	% of PA Members	
Western PA					
Current ACA Book - EOY 2017	1.546	83.7%	\$ 546.41	32.3%	
Movement to ACA Book (from Transitional and New Business)	1.548	16.3%	\$ 566.08	6.3%	
<b>Western PA</b>	<b>1.546</b>	<b>100.0%</b>	<b>\$ 549.62</b>	<b>38.6%</b>	
Central PA					
Current ACA Book - EOY 2016	1.524	70.8%	\$ 583.64	43.5%	
Movement to ACA Book (from Transitional and New Business)	1.523	29.2%	\$ 580.49	17.9%	
<b>Central PA</b>	<b>1.524</b>	<b>100.0%</b>	<b>\$ 582.72</b>	<b>61.4%</b>	
<b>Overall</b>	<b>1.532</b>		<b>\$ 569.94</b>	<b>100.0%</b>	

<b>Child Capping Adjustment</b>		
Area	Average Child Capping Adjustment	% of Members
Western PA	1.005	38.6%
Central PA	1.006	61.4%
<b>Overall</b>	<b>1.005</b>	<b>100.0%</b>

Average Age Factor **1.524**

Geographic Factor **1.007**

Tobacco Surcharge (Not Applicable) **1.000**

<b>Area Factors - WPA</b>					
State	County Code	County	Rating Area	Area Factor	% of PA Membership
PA	031	Clarion	R-PA001	0.97	0.9%
PA	039	Crawford	R-PA001	0.97	4.4%
PA	049	Erie	R-PA001	0.97	10.9%
PA	053	Forest	R-PA001	0.97	0.2%
PA	083	McKean	R-PA001	0.97	1.1%
PA	085	Mercer	R-PA001	0.97	3.6%
PA	121	Venango	R-PA001	0.97	1.5%
PA	123	Warren	R-PA001	0.97	1.6%
PA	023	Cameron	R-PA002	0.97	0.0%
PA	047	Elk	R-PA002	0.97	1.8%
PA	105	Potter	R-PA002	0.97	0.5%
PA	003	Allegheny	R-PA004	0.97	30.6%
PA	005	Armstrong	R-PA004	0.97	1.1%
PA	007	Beaver	R-PA004	0.97	2.5%
PA	019	Butler	R-PA004	0.97	4.4%
PA	051	Fayette	R-PA004	0.97	1.9%
PA	059	Greene	R-PA004	0.97	1.6%
PA	063	Indiana	R-PA004	0.97	2.4%
PA	073	Lawrence	R-PA004	0.97	2.8%
PA	125	Washington	R-PA004	0.97	7.2%
PA	129	Westmoreland	R-PA004	0.97	7.6%
PA	009	Bedford	R-PA005	0.97	0.9%
PA	013	Blair	R-PA005	0.97	3.0%
PA	021	Cambria	R-PA005	0.97	2.7%
PA	033	Clearfield	R-PA005	0.97	2.1%
PA	061	Huntingdon	R-PA005	0.97	0.6%
PA	065	Jefferson	R-PA005	0.97	0.9%
PA	111	Somerset	R-PA005	0.97	1.2%

<b>Area Factors - CPA</b>					
State	County Code	County	Rating Area	Area Factor	% of PA Membership
PA	027	Centre	R-PA006	1.04	1.1%
PA	037	Columbia	R-PA006	1.04	0.3%
PA	077	Lehigh	R-PA006	1.04	7.2%
PA	087	Mifflin	R-PA006	1.04	0.4%
PA	093	Montour	R-PA006	1.04	0.0%
PA	095	Northampton	R-PA006	1.04	4.2%
PA	097	Northumberland	R-PA006	1.04	0.7%
PA	107	Schuylkill	R-PA006	1.04	2.1%
PA	109	Snyder	R-PA006	1.04	0.8%
PA	119	Union	R-PA006	1.04	0.3%
PA	001	Adams	R-PA007	1.04	2.0%
PA	011	Berks	R-PA007	1.04	14.0%
PA	071	Lancaster	R-PA007	1.04	21.2%
PA	133	York	R-PA007	1.04	12.5%
PA	041	Cumberland	R-PA009	1.02	10.6%
PA	043	Dauphin	R-PA009	1.02	12.8%
PA	055	Franklin	R-PA009	1.02	4.1%
PA	057	Fulton	R-PA009	1.02	0.2%
PA	067	Juniata	R-PA009	1.02	0.2%
PA	075	Lebanon	R-PA009	1.02	4.2%
PA	099	Perry	R-PA009	1.02	0.6%







**Highmark Health Insurance Company's Response to Objection Letter Dated  
06/18/2019**

**Product Name: HHIC Small Group 2020 ACA Rate Filing**

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**RE: HHIC – 2020 Small Group ACA Compliant Plans (1A-SG-HHIC-2019);**

**Pennsylvania Insurance Department ID #: HGHM-131937084**

**Objection Letter Status: Data Request Sent**

**Objection Letter Date: 06/18/2019**

**Respond By Date: 06/25/2019**

**Response Date: 06/24/2019**

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Below please find our responses to the Highmark Health Insurance Company (HHIC, “Company”) Small Group 2020 ACA Rate Filing Objection Letter dated 06/18/2019. For convenience, the questions have been reproduced below, with our responses immediately following each question.

1. The updated URR instructions require the quantitative impact of rate increase drivers. Please provide the estimated impact of the drivers discussed on page 2 of the Part III memorandum

**Response:**

Please see the worksheet named "Question #1" in the exhibits file “PID Response HHIC 2019-06-24.xlsx” submitted with this response. As this exhibit demonstrates, the (-1.5%) rate increase referenced in the URR Part III memorandum is composed of the following drivers:

- 3.8% is due to the increase in claim levels from the base experience period
- 2.2% is due to increases in administrative costs, taxes and fees
- 7.2% is due to an increase in morbidity

These increases are being offset by the following to produce the net (-1.5%) average increase:

- (-0.2%) from an increase in pharmaceutical rebates
- (-3.2%) from changes in our claims trend
- (-10.3%) from changes in the risk adjustment transfer

2. The updated URR instructions require an explanation of how morbidity was removed from impacting the variations in rate increases. Please provide this explanation.

**Response:**

When developing the AV and Cost Sharing Design for each plan design, we did not include adjustments that take into account the morbidity of the population expected to enroll in the plan. Additionally, the geographic rating factors used for pricing do not include differences in population morbidity by geographic area. Therefore, the variations in plan increases are not impacted by morbidity.

3. What is the run-out and current date for the URRT and the PA template, February 1st or February 28th?

**Response:**

As requested by the PID, the run-out date for all data used in the development of these templates is February 28<sup>th</sup>, 2019.

4. Please confirm the experience premiums on WS1 of the URRT do not reflect MLR rebates.

**Response:**

Confirmed. The WS1 premium excludes MLR rebates.

5. Please explain why the current members in the URRT WS2 is 417 and in the PA Table 1 is 47,462.

**Response:**

The current membership shown on Worksheet II of the URRT is for ACA-compliant plans only and excludes our current transitional membership. The Table 1 membership includes both ACA and transitional membership and this total ties to the membership distribution on Table 10. On Table 10, the Transitional line contains 47,045 members as of February, 2019. The remaining ACA plans listed in this table sum to 417 members, which ties to the URRT Worksheet II.

6. Please explain the basis of your 54.41% increase in capitation rates PMPM for the vision benefit provider for covering pediatric vision benefits. This contradicts the statement on page 4 of the Part III Actuarial Memorandum that there was an \$0.19 reduction in the capitation.



**Response:**

On URRT Worksheet I, Section II, the “Experience Period Index Rate PMPM” is reflective of HHIC’s Transitional and ACA experience. Since there are only capitations for HHIC’s ACA plans, the ACA capitation PMPM gets diluted to \$0.18 by the Transitional membership. The 1.544 cost factor is applied to adjust the \$0.18 PMPM capitation to be reflective of the ACA PMPM capitation rate in 2020, \$0.42. The \$0.19 reduction in the capitation that is mentioned in the Part III Actuarial Memorandum signifies a \$0.19 PMPM reduction from the ACA-only experience capitation rate.

7. Why are you expecting the capitation trend to go from -0.11% in 2019 to 54.4% in the current filing?

**Response:**

Although it appears to be, this is not an actual change in capitation trend, rather it is a change in how we present the experience period capitations. In previous filings, we have presented WPA’s ACA only experience as the experience period capitation index rate, while the rest of the experience period index rates are developed from Transitional and ACA experience. In this filing, we have developed the experience period index rate from Transitional and ACA experience to be consistent with the other service types. Since our Transitional plans do not have capitation payments, the capitation PMPM value shown as the experience period index rate is much lower than that the capitation amount we expect to pay in the ACA. So, we need a very large trend factor to adjust this combined experience to be ACA experience, whereas in the past, we did not.

8. Are trends adjusted due to fluctuation in large claim amounts? If so, please explain how.

**Response:**

Yes. As part of our trend analysis, member claims in excess of \$100,000 in any single month are removed from the total monthly claims. An additional analysis is performed on these excess claims to determine if an adjustment to the projected trend is warranted.

9. If adjustments are made for large claim pooling, was the federal risk adjustment program considered?

**Response:**

The Company did not adjust the claims in its base experience period for the pooling of large claims.

10. Please explain why you believe that it is important to have the same trend for all service categories (i.e. Inpatient Hospital, Outpatient Hospital, Professional, Other Medical, and Prescription Drugs) when other carriers provide trends by service category.

**Response:**

Our trend development modeling utilizes a regression trend model that is intended to smooth out statistical noise in the historical claim levels. In addition to the regression analysis, the Company's development of trend involves a comprehensive assessment of many factors that impact historical and projected claims levels. These adjustments include changes for in-network provider contracting levels, changes for out-of-network costs, changes in utilization from medical management programs, and changes in drug costs from impacts such as generic drug development and new drug treatments. In addition, the trend estimates normalize for benefit leveraging, population aging, changes in fee schedules, and external trend drivers.

The projection of claim costs into the rating period utilizes the same categories of adjustment factors, adjusts for seasonality, and uses a statistical regression of historical trend levels to project monthly claim levels. This normalized and adjusted claim progression is then used to provide the basis for our trend regression model, which will be used to establish the Company's rating trend.

Given the historical shifts that have occurred among medical and drug service categories, and that continue to occur, we believe it is more appropriate to provide an assessment of trend at a combined level. This allows us to focus on the overall level of trend impacting our markets, and minimize the effect of market dynamics that shift service utilization between categories. By keeping the trend analysis at this macro level, it minimizes the aggregated actuarial judgment that would need to be applied at each service category level, which may unduly increase our projected trend levels.

11. The Change in Benefits Calculation in Table 5 shows \$0.55 PMPM for EHB – Pediatric Benefits, but page 6 of the Part III memo shows \$0.34 for Pediatric Dental and a reduction of \$0.20 PMPM for Pediatric Vision. Please explain why these are different.

**Response:**

The \$0.20 PMPM reduction is the expected change in the Pediatric Vision capitations from the experience period to the rating period. The Pediatric Vision capitation rate in the experience period for ACA plans was \$0.41 PMPM. The \$0.34 PMPM is the expected cost of Pediatric Dental in the rating period.  $\$0.34 + (\$0.41 - \$0.20) = \$0.55$  gets you to the 2020 EHB pediatric benefits amount of \$0.55 PMPM. The “Change in Morbidity” in Table 5 is calculated from non-capitation adjusted claims, essentially removing the pediatric benefit, so the expected \$0.55 PMPM for pediatric benefits has to be brought back in with the change in benefits calculation, as opposed to using experience to rating period change values, like the change in vision mentioned in the memo.

12. Please explain why the ‘Plan Design Change factor on the URRT shows 0.985, while the PA Table 5 shows 1.001 for the change in benefits. Please correct where appropriate.

**Response:**

The Plan Design Changes on the URRT (0.985) include the impact of induced utilization while the PA Rate Template (1.001) does not include the impact of induced utilization.

Please see the exhibit tab named “Question #12” in the submitted response file “PID Response HHIC 2019-06-24.xlsx” showing the quantitative development of the Plan Design Changes for both the URRT and PA Rate template.

13. The Change in Benefits Calculation in Table 5 shows (\$.21) PMPM for change in pharmacy rebates. How is this different than the (\$7.55) PMPM Other adjustment for prescription drug rebates listed in the actuarial memorandum?

**Response:**

The (\$7.55) PMPM rebate change listed in the actuarial memorandum is the change from 2018 to 2020 rebates, while the (\$.21) PMPM rebate change in the supplemental exhibits is the change from the 2018 rebate that has been population adjusted and trended to the 2020 rebate.

14. The actuarial memorandum says the experience is large enough to be fully credible. What credibility methodology are you using to determine this?

**Response:**

Credibility of the data was considered in the filing. In general, the size of the enrollment in the experience period is somewhat less than what we would consider to be fully credible. However, since the health plan has multiple entities, the experience for this entity was compared to the experience of other entities to assess the reasonableness of the data after accounting for known differences. For example, final rates of the different entities can be compared and expected to differ for things like network or benefit design. Based on professional judgement a rigorous mathematical credibility model seemed unlikely to result in materially different rates and did not seem warranted for this entity.

15. Did you consider ASOP #25 when determining the credibility?

**Response:**

Yes. See response to question 14 above.

16. Please explain why the URRT projected index rate of \$681.11 does not match PA Table 5 index rate of \$681.20. Please correct where appropriate.

**Response:**

The difference between the URRT projected index rate and the development of the PA Table 5 index rate is due to the rounding required in the URRT. Specifically, the URRT requires the Year 1 Trend and Year 2 Trend values to be rounded, which causes the Trended EHB Allowed Claims PMPM to be slightly different. Furthermore, the Morbidity Adjustment, Demographic Shift, Plan Design Changes, and Other change factors are also rounded, which results in an Adjusted Trended EHB Allowed Claims PMPM for 01/01/2020 to be different than what is projected for the PA Table 5 Index Rate.

17. Please explain why the PA trend in Table 5A was overwritten.

**Response:**

To determine the Two year trend projection Factor on Table 5, the impact of induced demand is included as a trend component in Table 3. By applying this trend factor and the Single Risk Pool Adjustment Factors, we develop the correct projected index rate. When we trend this index rate to the 2nd, 3rd, and 4th quarters in Table 5A to develop the

Total Single Risk Pool index rate for all groups renewing in 2020, the impact of induced demand is excluded so that the quarterly trend represents cost and utilization only. By incorporating this methodology, we arrive at the same Market Adjusted Index Rate between the URRT and the PA Table 5 exhibit. To make this comparison, please note the rounding conventions within the URRT, and that the Market Adjusted Index Rate in Table 5 needs to be adjusted by the Total Single Risk Pool Quarterly Trend Factor from Table 5A.

18. We note in the URRT the risk adjustment for 2020 is \$39,274 on WS2 D7 but according to the PA Statewide results from RATEE files as of May 1, 2019 the risk adjustment is \$191,350. Please explain these variances.

**Response:**

Response redacted.

19. Please explain the 2018 to 2020 Annual Premium Trend of 8% in the development of the Risk Adjustment, compared to the 6.66% claims trend in the rate filing from 2018 to 2020.

**Response:**

The Company's claims trend projection reflects the average annualized increase in claim level we anticipate for the business covered by the Company in the projected experience period. The premium trend assumption in the risk adjustment development represents the average premium increase across the entire state marketplace. This is an estimate of annual premium increases expected in the market in 2019 and 2020. Given that this assumption reflects future unknown levels of rate increases in the state marketplace, we believe that the 8% premium increase assumption is reasonable and in line with past market-level increases.

20. Please describe any adjustments or considerations made due to the Risk Adjustment Data Validation process (RADV).

**Response:**

The Company considered whether or not any adjustment to projected experience was warranted due to the RADV process. However, since this process was only recently implemented, with 2017 results only recently released, we believe that it is too soon to

make any assumptions in our projections regarding the anticipated level of payments or recoveries from this program.

21. The projected risk adjustment on the PAAM of \$9.20 PMPM divided by the paid-to-allowed ratio of 0.806 results in \$11.41 PMPM, while the URRT shows \$11.09 PMPM. Please explain this discrepancy.

**Response:**

The projected risk adjustment on the PAAM represents an average amount for each of the renewal quarters in 2020, while the projected risk adjustment in the URRT is a first quarter amount. To reconcile the two values, the projected risk adjustment on the PAAM must also be divided by the Total Single Risk Pool Quarterly Trend Factor from Table 5A.

22. Please provide the completed federal MLR formula showing all elements or point to where we can find it in the filing.

**Response:**

Please see the exhibit tab named "Question #22" in the submitted response file "PID Response HHIC 2019-06-24.xlsx" showing the quantitative development, with all elements, of the 89.5% MLR.

23. (a) Please provide quantitative support for the health insurer fee and (b) provide the actual paid HIT fees on a pmpm and percent of premium for calendar years 2018 and 2016.

**Response:**

a) The first step in calculating the health insurer fee is estimating the industry-wide fee to be collected as well as the industry-wide eligible premium in billions of dollars based on historical amounts. The ratio of these two estimates produces an estimated percentage of premium. Second, this percentage of premium is multiplied by our company-specific projected 2019 premium to derive an estimate of the dollars expected to be assessed in 2020. Finally, these estimated dollars are then divided by our company-specific projected 2020 premium to derive an estimate of the percentage of premium need to be built into the rate filing. This amount is 2.14%, which is further divided by  $(1 - 0.21)$  to

account for the income tax rate. The resulting value is 2.71%. The pricing assumption was set at 2.8% given the potential fluctuation in the estimates outlined above.

b) The HIT paid in 2016 was \$10.20 PMPM or 2.27% of premium

The HIT paid in 2018 was \$17.08 PMPM or 2.83% of premium

24. Please explain the large projected decrease in membership.

**Response:**

The decrease in shown membership is due to the projection of the ACA only membership.

The following are additional questions or comments from the PID:

1. Please confirm that you have tested to ensure that the rates in Table 11 of the Actuarial Memorandum Exhibits, the PA Plan Design Summary and Rate Tables, the Federal Rates Template, and in the binder are identical.

**Response:**

We have tested and confirmed that the rates in Table 11 of the Actuarial Memorandum Exhibits, the PA Plan Design Summary and Rate Tables, the Federal Rates Template, and in the binder are identical.

2. Regarding Risk Adjustment Data Validation process (RADV):

a. Please describe any adjustments or considerations made due to the Risk Adjustment Data Validation process (RADV).

**Response:**

The Company considered whether or not any adjustment to projected experience was warranted due to the RADV process. However, since this process was only recently implemented, with 2017 results only recently released, we believe that it is too soon to make any assumptions in our projections regarding the anticipated level of payments or recoveries from this program.

b. As you know CMS is performing a risk adjustment validation starting with 2017 risk adjustment data. We are considering allowing an estimate of the impact of risk adjustment modifications in rate filings as an adjustment to the projected risk adjustment. Before implementation, we are soliciting feedback from our issuers on the pros and cons of the inclusion of this adjustment. If allowed, all issuers would be required to submit an estimate. The estimate may be \$0. Please provide any feedback that you would like us to consider.

**Response:**

We provide the following additional considerations in assessing whether or not future adjustments would be practicable:

- Overall, this program is designed to be revenue neutral across the market. So absent any reliable market-wide analysis, it would be equally likely that a company would receive a payment or would be required to make a contribution.
- The consideration of risk score adjustments from the RADV process is dependent upon the entirety of market participants, and each participant's ultimate condition profile. These risk profiles are generally not known and could fluctuate from year to year.
- The Small Group results for 2017 in Pennsylvania showed that no risk score adjustment would be made for the 2018 risk adjustment transfer results.
- Even if there was an adjustment made to 2018 results, it has not been demonstrated that such an adjustment would tend to persist year over year.
- Although we have not adjusted for the RADV process in our 2020 experience projection, we believe that such an adjustment may be warranted in future rate development periods if the process exhibits a reasonable level of predictability and recurrence. This may not be known until several years beyond the initial implementation.

3. We have repurposed row 54 of Table 6 to capture RA User Fees. Please provide the RA User Fee percentage and pmpm amount in cells C54 and D54, respectively.



**Response:**

We intend to make this update to the template later in the review process so that if there are other subsequent updates needed, the number of document versions produced can be minimized.

4. For the expanded bronze plans, please demonstrate that the copay is less than or equal to 50% coinsurance for that category.

**Response:**

None of the expanded Bronze plans have a copay element.

# Highmark Health Insurance Company (HHIC)

## 2020 Small Group ACA Rate Filing

Question #1, Components of Rate Increase

<b>Component of Rate Change</b>	<b>Factor</b>
<b>Base Claims Experience and Projection Year Trend</b>	<b>0.48%</b>
Base Experience	3.76%
Projection Year Trend	-3.17%
<b>Change in Projected Rebates</b>	<b>-0.16%</b>
<b>Risk Adjustment</b>	<b>-10.33%</b>
<b>Retention (Admin, Taxes, and Fees)</b>	<b>2.20%</b>
<b>Change in Morbidity</b>	<b>7.16%</b>
<b>Change in Pricing of Benefits and Benefit Richness</b>	<b>-0.01%</b>
<b>TOTAL</b>	<b>-1.50%</b>

**Highmark Health Insurance Company (HHIC)**  
**2020 Small Group ACA Rate Filing**

Question #12, Change in Benefits

**PA Rate Template**

CY2019 Projected Allowed PMPM (Based on CY2019 Population)	\$ 681.20	a.	
CY2019 Projected Allowed PMPM Excluding Capitations (Based on CY2017 Population)	\$ 517.71	b.	
Population Change Factor (Morbidity)	1.302	c.	
Pricing Factor Change	1.015	d.	
Change in Benefit Richness	0.985	e.	
Change in Network	1.009	f.	
Change in Benefits	1.001	g.	$g = a / (b * c * d * e * f)$

**URRT**

2018 Induced Utilization/Benefit Richness	1.089	a.	
2020 Induced Utilization/Benefit Richness	1.073	b.	
Change in Benefits	0.985	c.	$c = b / a$

# Highmark Health Insurance Company (HHIC)

## 2020 Small Group ACA Rate Filing

Question #22, Federal MLR Calculation

	<b>Claims</b>	
a.	Projected Incurred Claims Before 3 R's	\$537.62
b.	Projected Net Risk Adjustments PMPM	\$8.94
c.	Reinsurance Premium	\$0.00
d.	Projected Incurred Claims After 3 R's	<b>\$528.68</b> = a. - b. - c.
	<b>Admin / Margin / Taxes &amp; Fees</b>	
e.	Total Admin	\$61.72
f.	Profit / Risk Load	0.0%
g.	Risk Transfer Fee	\$0.00
h.	PCOR Tax	\$0.00
i.	Risk Adjustment User Fee	\$0.18
j.	Exchange Fee	0.0%
k.	HCR Insurer Tax	2.8%
	<b>Premium</b>	
l.	Final Premium	$\$607.59 = (d. + e. + g. + h.) / (1 - f. - i. - j. - k.)$
m.	Projected Incurred Claims w/o Taxes and Fee	<b>\$590.39</b> = d. + e. + (f. * l.)
	<b>Loss Ratio</b>	<b>89.5%</b> = d. / m.

**Highmark Health Insurance Company's Response to Objection Letter Dated  
07/05/2019**

**Product Name:** HHIC Small Group 2020 ACA Rate Filing

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**RE: HHIC – 2020 Small Group ACA Compliant Plans (1A-SG-HHIC-2019);**

**Pennsylvania Insurance Department ID #: HGHM-131937084**

**Objection Letter Status: Data Request Sent**

**Objection Letter Date: 07/05/2019**

**Respond By Date: 07/12/2019**

**Response Date: 07/12/2019**

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Below please find our responses to the Highmark Health Insurance Company (HHIC, “Company”) Small Group 2020 ACA Rate Filing Objection Letter dated 07/05/2019. For convenience, the questions have been reproduced below, with our responses immediately following each question.

1. As a follow-up to our original question 14, please provide the criteria used to determine credibility. At what measure do you use and at what level do you consider a block of business credible? What level do you consider a block partially credible?

**Response:**

We do not currently use a rigid credibility formula or pre-defined manual rate in the small group market. When additional entities with larger blocks of business are part of the overall portfolio, the staging of plans in smaller entities is considered across the entire portfolio. In general, the experience of smaller blocks of business is given full credibility in order to simplify the rate development, and credibility is kept in mind when developing the data and assumptions. Based on professional judgement, if the experience can be used to produce reasonable results, it will be considered fully credible in lieu of a rigid formula. This simplifies the rate development and makes it easier to avoid unreasonable product relationships and adverse selection across the entire portfolio.

2. As a follow-up to PID question 3, please remember to submit the new version of the PAAM.

**Response:**

The new version of the PAAM is included with this submission.

1. If the risk adjustment results released on June 28, 2019 are inconsistent with your projected assumptions, you may modify the risk adjustment transfer amount in Table 5. If such a modification is made, revise all the documents and exhibits impacted and the PA Actuarial Memorandum to discuss this change. This change must be made with your responses due by July 12, 2019.

**Response:**

The Company's Table 5 projection assumptions are consistent with the 2018 plan year risk adjustment results released on June 28, 2019. As such, modified documents are not required.

2. In response to the Department's RADV survey, issuers indicated that they did not include a RADV adjustment in the initial submission, as there is no supportable reason for an adjustment when calculating the 2020 rates. Therefore, the Department has determined that there should be no RADV adjustments in the 2020 rate filings.

**Response:**

The Company supports this position for the 2020 rate development and has not included any adjustments for RADV in our submitted 2020 rate filings.