

Highmark Coverage Advantage Inc – Individual Plans

Rate Request filing ID # HGHM-134061466 – 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 <https://www.insurance.pa.gov/Consumers/HealthInsuranceFilings/Pages/ACA-Health-Rate-Filings.aspx>

Overview

Initial requested average rate change:	12.96%
Revised requested average rate change:	9.21%
Range of requested rate change:	2.49% to 10.21%
Effective date:	January 1, 2025
Mapped members:	26,051
Available in:	Rating Areas 1 and 4

Key Information

Jan. 2023-Dec. 2023 financial experience

Premiums	\$97,672,973
Claims	\$81,803,185
Administrative Expenses	\$17,070,055
Taxes & Fees	\$2,915,799
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Insurers made (after taxes)	\$-4,116,067

How it plans to spend your premium¹

This is how the insurance company plans to spend the premium it collects in 2025

Claims:	85%
Administrative:	13%
Taxes & Fees:	3%
Profit:	0%

The insurer expects its annual medical costs to increase **7.2%**.

Our Decision

The insurer requested an average 12.96% rate change in the individual market for enrollees in current 2024 plans who will continue coverage with the insurer in 2025. The insurer later revised its rate filing to request a rate change of 9.21% due to revisions made during the Department’s standard review. The statewide average rate change request across all insurers was originally 9.3% and was revised to 6%. A factor contributing to the rate change is the change in reimbursement from the state reinsurance program. In addition to the reinsurance program, the following have been cited as key rate drivers:

- Increased hospital, physician, and prescription drug costs;
- Increased anticipated subscriber usage;

¹ Due to rounding, the percent total, in How it plans to spend your premium section, may not sum to 100%.

- Changes in anticipated risk adjustment amounts (money from a federal program that redistributes funds from plans with lower-risk enrollees to plans with higher-risk enrollees);
- Increased administrative expenses; and
- The base experience claims deviated from expected claim levels.

Process and Considerations for the 2025 Plan Year

Consistent with plan year 2024, the Department instructed insurers to file requested rates for 2025 Affordable Care Act compliant plans assuming the federal government would not make Cost-Sharing Reduction (CSR) payments. Cost-Sharing Reductions apply to certain out-of-pocket costs, like deductibles and copayments, for low- and middle-income enrollees. Although the federal government has stopped making CSR payments, insurers are still required by federal law to reduce out-of-pocket costs for low- and middle-income enrollees.

Insurers offering on-exchange silver plans adjusted premiums for those plans to compensate for the ending of federal CSR payments. This means that premiums for on-exchange silver plans are greater than the premiums for off-exchange silver plans. Many on-exchange consumers who receive the Advanced Premium Tax Credit (APTC) will not experience the full effect of any rate change because this subsidy will change as well. Consumers who have an on-exchange silver plan and do not qualify for a subsidy may want to consider evaluating other metal level plans available on-exchange or purchasing an off-exchange silver plan because these plans will likely have lower premiums relative to the coverage level.

Pennsylvania was granted a 1332 Waiver by the federal government allowing the Commonwealth to create a state-based insurance exchange (Pennie™) and reinsurance program. The state reinsurance program will reimburse insurers for a portion of claims above a set dollar amount threshold which will allow the companies to lower premiums. As a result of the reinsurance program, Pennsylvania residents who purchase individual ACA compliant health policies effective in 2025 will have premiums that are approximately 5% less on average than they otherwise would have been without that program.

For each requested plan, the Department reviewed the contract to see if the plan included all the benefits required by state and federal law, if the rates are reasonable in relation to the benefits, and if the insurer will be able to pay projected claims and expenses. The Department also considers factors such as the insurer's revenues, medical and administrative costs, actual and projected profits, and past rate changes, as well as the effect the 2025 rate change will have on Pennsylvania consumers. In approving rates for 2025, the Department focused on making sure that Pennsylvanians in every county in the state continue to have access to healthcare coverage. Ensuring that affordable options remain available to Pennsylvania consumers is a top priority for the Department. The resulting average final rate change approved for this insurer is 9.21%, ranging from 2.49% to 10.21%.

General Note: An insurer may not increase your rates more than once in a calendar year. The change in premium for a specific individual or employer may vary from the average rate change shown in this summary due to plan-specific factors, like the benefit package and provider network used by the plan, as well as four factors specific to the individual or employer/employees: geographic location, age, tobacco use, and family size.

What we consider

Premium is made up of three parts: medical claims, administrative expenses, and profit or loss. We review all of the information in rate filings for individual and small group health plans, including the plans' medical claims, administrative expenses, and projected profit or loss.

A key component used to calculate projected claims is medical trend. Medical trend is the change in claims costs over a specific period of time—usually one to two years—and is often based on both the company's past claims costs and what they expect to spend on claims in the future.

Administrative expenses are any expenses not related to the cost of medical claims; including, but not limited to, employee salaries and benefits, the cost of the company's office and equipment, customer service, appeals costs, taxes, agent commissions, etc.

The company's projected profit (or contribution to surplus) is a small part of the premium. The reasonableness of the projected profit may depend on the company's current surplus level and other factors.

Federal law requires health insurance companies to have a medical loss ratio (MLR) of at least 80%. This means that your insurance company must spend at least 80% of your premium dollars on medical care and activities that improve the quality of care. If your insurance company spends less than 80% on medical care and quality improvement then the company must give you money back in the form of a rebate. A medical loss ratio of 80% indicates that the insurer is using the remaining 20 cents of each premium dollar for administrative costs and profits. The Department does not approve rates in this market that appear likely to result in an MLR of less than 80%.

Glossary

Annual rate change: Companies normally file a rate change each year due to their medical claims experience. The annual rate request may or may not include benefit changes.

Average rate change: The average amount rates will change for all enrollees.

For individual health plans: How much your premium will change depends on your age, where you live, how many family members are covered on your plan, whether or not you or your family members smoke and which benefits you choose

For small employer health plans: The employer's premium will vary based on their employees' age, the employer's location, their employee's family size, and the benefits they choose.

Claims/Medical Costs: What the health plan spends on direct medical services including hospital stays, providers, and prescription drugs.

Individual Plans: Insurance you buy from an insurance company for yourself and/or your dependents; not insurance you get from your employer.

Premium: Under federal law, insurance companies can take into account only four factors when varying your rate in order to set the premium costs you will be charged each month. These four factors are:

- Age: Older people can be charged up to 3 times more for premiums than younger people.
- Geographic location: Where you live has a big effect on your premiums. Competition, local regulation, and cost of living in different areas account for this.
- Tobacco Use: Insurers can charge tobacco users up to 50% more than those who don't use tobacco.
- Individual vs. family enrollment: Insurers can charge more for a plan that covers a spouse and/or dependents.

Profit: The amount of money remaining after the company's claims, administrative expenses, and taxes and fees are paid.

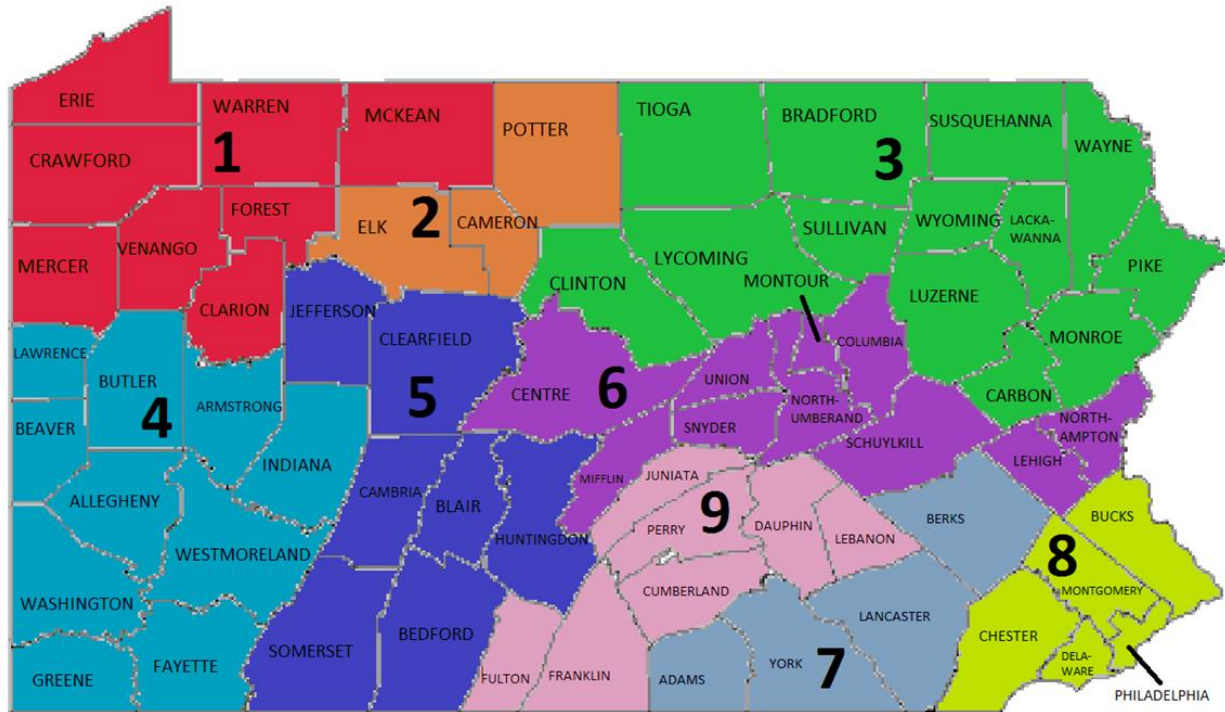
Rate: The rate is the base amount that an insurance company charges a person. An insurance company can increase the base rate depending on four factors in order to calculate the monthly premium that a consumer will be charged. See "Premium."

Rating Area: Federal law requires that each state have a set number of geographic areas that all insurance companies may use to adjust how much they charge consumers. When insurance companies calculate premiums, all enrollees within a rating area will have the same adjustment factor applied. Depending on the rating area you live in the prices you pay may be higher or lower than the state average. Pennsylvania has 9 rating areas. (See the Pennsylvania Geographic Rating Area Map below.)

Small Group Plans: Small group plans are those sold to employers with 1-50 employees.

Surplus: An insurer's funds on hand for which the company has no corresponding liabilities. Insurers maintain a surplus so that they have sufficient funds to withstand adverse business conditions such as unexpectedly high medical claims or low enrollment, and in order to make investments in infrastructure and technology.

Pennsylvania Geographic Rating Areas





August 16, 2024

Ms. Lindsy Swartz, MBA, MCM, Director
Bureau of Life, Accident & Health Insurance
Commonwealth of Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

Re: Highmark Coverage Advantage 2025 ACA Rate Filing (Individual Market)
Filing # 1A-DP-24-HCA (SERFF # HGHM-134061466)

This constitutes Notice pursuant to Section 707 of the Pennsylvania Right-to-Know Law that the attached Highmark Coverage Advantage (HCA) 2025 Individual Market Rate Filing contains Trade Secret and Confidential Proprietary Information. Therefore, HCA 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 HCA should be redacted before release.

Dear Ms. Swartz:

This Filing includes the Highmark Coverage Advantage (“HCA”, “Company”) Individual Market rates and the supporting rate development for policies with effective dates on or after January 1, 2025.

This rate filing has been modified from the version submitted on May 15, 2024 and revised on August 2, 2024. As a result of the Department’s review of this filing, the requested average rate increase has been lowered from 11.9% to 9.2%. This change was implemented by making the following changes to the prior version of the filing:

- The medical trend was decreased from 8.7% to 6.5%.
- The drug trend was decreased from 9.7% to 8.8%.

The remainder of this cover letter and all of the supporting documents have been revised to reflect the changes described above.

In the event the Department decides to publish this Filing in the PA Bulletin, the company information requested in the Department's 2025 ACA-Compliant Health Insurance Rate Filing Guidance, Section B, is provided below:

Requested Company Information

1. Company Name & NAIC #: **Highmark Coverage Advantage, NAIC # 15507**
2. Market: **Individual**
3. On or Off Exchange: **The Company anticipates selling plans on and off the exchange.**
4. Effective date of coverage: **January 1, 2025**
5. Average rate change requested: **9.2% increase**
6. Range of rate change requested: **2.5% to 10.2%**
7. Total additional annual revenue generated from the proposed rate change: **\$ 15,013,029**
8. Product(s): **EPO**
9. Rating Areas and the change from 2024: **Rating Areas 1 and 4**

There are no changes in the covered Rating Areas from the 2024 rate filing.
10. Metal Levels and Catastrophic Plans: **The Company anticipates selling Platinum, Gold, Silver, Bronze, and Catastrophic plans in 2025.**
11. Current number of covered lives as of February 1, 2024: **26,051 covered lives**
12. Number of plans offered in 2025 and the change this represents from 2024: **18**

The Company offered 16 plans in 2024. For 2025, the Company is offering 2 new plans in the Market.

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 federal and state rules/regulations.

13. Corresponding contract form #, SERFF and Binder ID#s: **The corresponding SERFF binder number is HGHM-PA25-125117893, affecting the following Company products and forms:**

Product Name / Type	Contract Form & SERFF#
Together Blue [Virtual Choice] EPO	TB/EPO/HCA/DP-5; HGHM-134058725
Together Blue EPO Premier	TB/EPO/Premier/HCA/DP-3; HGHM-134058728
Together Blue EPO HDHP	TB/EPO/HDHP/HCA/DP-5; HGHM-134058731
Together Blue Major Events EPO	TB/CAT/EPO/HCA/DP-5; HGHM-134058736
Together Blue EPO Adult Dental and Vision	TB/EPO/ADV/HCA/DP-5; HGHM-134058737
Together Blue EPO Premier Adult Dental and Vision	TB/EPO/Premier/ADV/HCA/DP-3; HGHM-134058756

14. HIOS Issuer ID # and submission tracking number: **HIOS Issuer ID #79279, Company Filing #1A-DP-24-HCA (SERFF Filing # HGHM-134061466)**

Additional Filing Disclosures

The Company has submitted all of the federal and state Required Documents 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 with the formulas retained to the extent possible.

Modifications to the rate development may be necessary if significant unforeseen events occur. Examples include, but are not limited to, changes in legislation/regulations (including rules, regulatory guidance, etc.), material provider contracting changes, or changes in the participation of QHP issuers that would materially impact risk adjustment transfer amounts. As a result, the Company reserves the right to submit a revised filing.

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 HCA if disclosed to the public.

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

Ms. Lindsy Swartz, Director
HCA 2025 Individual Market Rates
August 16, 2024
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It is our understanding that the Department does not intend to publish the confidential & 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”), HCA 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, HCA asserts its right to release a redacted version of the Filing. In accordance with the RTKL, please contact the HCA RTKL representative identified below prior to release of any information contained in this Filing:

[REDACTED]
RTKL Representative
Director Privacy & Data Ethics
Highmark Health
120 Fifth Avenue, Suite 2114
Pittsburgh, PA 15222

Furthermore, it should be noted that HCA 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 [REDACTED] or via e-mail at: [REDACTED]

Sincerely,

[REDACTED]

[REDACTED]
Director, Actuarial Services
Highmark Inc.

Actuarial Memorandum

1. Basic Information and Data

A. Company Information

The appropriate company information has been provided in Table 0. General information pertaining to this rate filing is summarized below:

- Company Name: Highmark Coverage Advantage (“HCA”, “Company”)
- NAIC #: 15507
- HIOS Issuer ID: 79279
- State: Pennsylvania
- Market: Individual
- Effective Date: 1/1/2025
- SERFF Rate Filing #: HGHM-134061466

In accordance with the Department’s guidance in the July 24, 2024 objection letter, the impact of the state 1332 Reinsurance program is captured using the prescribed parameters of \$60,000 attachment point, 60% coinsurance rate, and \$100,000 reinsurance cap. If the finalized parameters differ from those described in this filing, a revised submission would be required.

Finally, modifications to the rate development may be necessary if significant unforeseen events occur. Examples include, but are not limited to, changes in legislation/regulations (including rules, regulatory guidance, etc.), material provider contracting changes, or changes in the participation of QHP issuers that would materially impact risk adjustment transfer amounts. As a result, HCA reserves the right to submit a revised filing.

B. Rate History and Proposed Variations in Rate Changes

The three most recent rate changes in Pennsylvania for HCA are as follows:

Year	Avg. Increase	SERFF ID#
2024	8.0%	HGHM-133630381
2023	4.3%	HGHM-133249767
2022	-3.6%	HGHM-132820368

Historical rate changes varied by plan due to updated cost sharing levels to meet federal AV requirements as well as updates to AV and other pricing factors.

The proposed 2025 rate changes vary by plan. This is primarily due to updates in the pricing AV factors and benefit richness factors. The plan level rate changes can be found in Table 10.

As requested by the Department, a historical MLR Exhibit is included as Attachment G. MLR results reflect any amounts attributed to the applicable benefit year. As an example, Risk Adjustment paid in mid-2021 for the 2020 benefit year is attributed to the 2020 benefit year.

C. Average Rate Change

The average rate changes as presented in the filing are:

- Table 10: 9.2%
- Table 11: 9.2%

Table 10 calculates the percentage change in the member weighted average rate for 2024 and the member weighted average rate for 2025. Table 11 calculates the percentage increase for each geographic rating area and then member weights the percentage increases.

Worksheet 2 of the URRT also shows a submission level rate change. This value is used in the development of the average rate change shown in the Federal Part II justification (when applicable). A demonstration of this calculation is included in Attachment F.

D. Membership Count

Please see Table 1 for the average age, age breakdown, and total membership for the periods shown.

E. Benefit/Cost Sharing Changes

The majority of Highmark Coverage Advantage's renewing 2025 plans contain cost sharing that differs from the 2024 offering.

The screenshots from the HHS AV calculator, showing the plan benefits and the resulting actuarial values, can be found as a separate attachment within the *Supporting Documentation* section in SERFF. Also, the PA Plan Design Summary and Rate Tables along with the HIOS Plan IDs can be found within the *Rate/Rule Schedule* section in SERFF.

F. Experience Period Claims and Premium

Please see Table 2 for the experience period data for the most recent calendar year. The experience period paid claims data represents the 2023 calendar year results for all policies in the single risk pool, with run out through February 2024. This data is consistent with the data reported in Section I of Worksheet I of the URRT.

Table 2 is populated with the experience period data as follows:

- The Earned Premium represents actual revenues earned in the experience period.
- Incurred Claims represent claims paid by HCA. Note that the URRT includes capitated services and is net of Rx Rebates. Those values are not included here as they are listed as separate items.
- 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., claim settlement costs), and
- Our best estimate of claims incurred but not paid as of the end of the run out period.

Note that allowed claims in the URRT include capitation and are net of drug rebates. They are not included here as they are called out separately in the exhibit.

- Allowed Charges for non EHB services are included in column G. The amount of non EHB included is shown in column H.
- Prescription Drug Rebates are used to reduce the level of Incurred Claims in the experience period.
- Total EHB capitation includes \$0.15 PMPM for the pediatric vision benefit.
- Estimated Risk Adjustment includes the transfer dollars and an estimate for the High Cost Risk Pool for the experience period.

G. Credibility of Data

The experience period data for HCA is large enough to be fully credible. The results are based 100% on the experience period data.

H. Trend Identification

Table 3 identifies the annual medical and prescription drug allowed claims cost and utilization trends. The underlying total annual trend is 6.5% for medical and 8.8% for pharmacy, resulting in an overall trend of 7.18%. 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.

The cost trends presented in Table 3 reflect the Company's expectations regarding increases in in-network contractual reimbursement, as well as projected out-of-network costs. The significant changes observed in the volume, demographics and morbidity of the ACA population from 2020 to 2023 yield component trends that are generally not directly applicable for trend analysis.

A multi-year regression analysis was developed by the Company's valuation team to analyze the ACA individual population trend levels. The analysis was completed at the medical and pharmacy level. The regression tool removes components of trend that are more explainable from the observed trend rates and then uses regression analysis to isolate the underlying trend rate. Some of the more explainable variables include high dollar claims, workdays, provider contracting, demographics, and seasonality. The valuation regression tool primarily informed the trend selection with the final requested medical and pharmacy trends also based on actuarial judgment.

I. Historical Experience

Table 4 presents the most recent 48 months (4 calendar years) of HCA data with run-out through February 2024. This data was not used to develop the trend in Table 3. Please see Section H for further details.

2. Rate Development & Change

A. Development of Projected Index Rate, Market-Adjusted Index Rate, & Total Allowed Claims

The development of the Projected Index Rate, Projected Market-Adjusted Index Rate, and Projected Total Allowed Claims, shown in Table 5, closely follows the methodologies discussed in the Part III Actuarial Memorandum submitted in the Rate Filing Justification. Please refer to the Part III Memorandum for further details.

Some of the items separately identified in Table 5 include:

- In accordance with the Department's guidance, the morbidity change related to the Reinsurance program is set to 1.000.
- The Change in Morbidity adjustment of 0.969 reflects the change in the population mix/claim levels from the experience period to the projection period. We continue to observe a high degree of membership churn from year-to-year, which impacts the morbidity. This factor also takes into consideration the effects of adverse selection inherent to guaranteed issue markets. The Individual ACA risk pool continues to have a significantly higher proportion of older members with a high prevalence of chronic conditions compared to group business, which adds to the uncertainty of any future claim projections.
- There are no longer any COVID adjustments from the experience period to the rating period.
- The Change in Demographics adjustment of 0.999 reflects the change in age and geography factors we expect from the experience period to the projection period.
- There is a Change in Network adjustment of 1.062.
- There is no Change in Benefits adjustment.
- The Change in Other adjustment of 0.974 reflects changes in pharmacy rebates, expected changes in hospital/physician settlements, and changes in induced demand.

Please see Attachments A and E for a more detailed calculation of these factors. These factors can also be found in the accompanying spreadsheet.

The projected paid-to-allowed ratio is 0.831. The formula found in Table 5 cell C28 was overwritten because, unlike the average factor found in Table 10 cell K16, the Company's paid-to-allowed factor is dampened by items such as capitation.

The quantitative development of the projected risk adjustment transfer amount for the Company is shown in Attachment B and included in the accompanying spreadsheet. The transfer amount is developed based on an analysis of the claims data underlying the rate development for this filing (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 profile. This market-wide risk profile is developed from available market data, including prior years' risk adjustment transfer results, publicly available data, and outside expertise from actuarial consultants. Applying the federally prescribed transfer formula at the level of granularity available in Attachment B yields a projected gross risk adjustment transfer of (\$63.78)

PMPM on a *billable* member month basis. This amount is then converted to a *total* member month basis of (\$63.69) PMPM in order to be used in the rate development. The expected risk adjustment payable reflects that the Company anticipates its average risk score (net of allowable rating factors) to be lower than the statewide average.

The development of the (\$65.51) PMPM value in cell C31 of Table 5 is found in Table 16. Table 16 begins with the development of the risk adjustment transfer for the non-catastrophic pool. This produces the (\$63.45) PMPM in Table 16 cell C15, which aligns to Attachment B. Next, Table 16 cell C17 includes a manual adjustment of \$0.56 PMPM to account for the inclusion of the catastrophic pool, conversion from billable to total membership, and an adjustment for the composite effect of catastrophic eligibility and benefits in addition to EHB. Finally, Table 16 cell C19 incorporates the projected net impact for the High Cost Risk Pool program of (\$2.62) PMPM. Please note that the risk adjustment user fee is captured in the taxes and fees portion of administrative costs.

The exchange user fee in cell C32 of Table 5 is developed by taking the required user fee percentage of 3.0% and multiplying by the percentage of total members expected to be on exchange of 89%. This results in a percentage of 2.7%. The PMPM of \$13.83 is calculated as 2.7% of the total required premium adjusted further for the composite effect of catastrophic eligibility and benefits in addition to EHB.

The projected incurred reinsurance recoveries of \$21.31 PMPM is found in cell C33 of Table 5. The reinsurance recoveries PMPM was developed by trending Highmark PA individual ACA CY2023 incurred claims by member to the CY2025 rating period, applying the parameters defined in Tab II.b, and calculating the amount of incurred claims expected to be reimbursed by the program. Highmark PA individual ACA business was considered due to its level of credibility. The modeling produced an estimated incurred claims savings of 5.4%. This percentage was converted to a PMPM and adjusted further for the composite effect of catastrophic eligibility and benefits in addition to EHB.

The Company intends to offer several plans that include benefits in addition to EHB. Six plans have an adult dental and vision benefit, two plans have an adult vision exam benefit, and six plans have a hearing benefit. The Company relied on cost estimates from other departments for the following non-EHB benefits:

- **Adult dental benefit** – United Concordia Dental (UCD) estimated this benefit to be worth \$23.88 PMPM on a paid basis.
- **Adult vision benefit** – Davis Vision estimated this benefit to be worth \$2.40 PMPM on a paid basis.
- **Adult vision exam benefit** – Davis Vision estimated this benefit to be worth \$0.97 PMPM on a paid basis.
- **Hearing benefit** – TruHearing estimated this benefit to be worth \$0.03 PMPM on a paid basis.

B. Retention Items

Table 6 has been completed with the requested retention elements for the proposed rates for the rating period. The amounts presented separately sum to the total administrative expenses and taxes and fees presented in the rate development.

Administrative costs reflect internal costs that the Company is projected to incur in the rating period and are developed from standard expense allocation methods. Administrative expenses do not vary by plan.

The proposed rate development assumes an average broker commission of \$8.58 PMPM for 2025. The assumed broker commission schedule and the development of the average value are included in Attachment D.

Expenses for Quality Improvement initiatives are assumed to be 2.84%.

The following is a summary of the Taxes and Fees included in the rate development:

- Pennsylvania Premium Tax is not applicable to this issuer and thus is set to 0.0%.
- Federal Income Tax is set to 0.0%.
- Health Insurance Provider Fee is set to 0.0%.
- Risk Adjustment User Fee is set to \$0.18 PMPM consistent with Federal regulations.
- Patient-Centered Outcomes Research Institute (PCORI) fee is set to \$0.31 PMPM.

The Profit/Contingency for all plans is set to 0%. HCA has voluntarily refrained from adding a risk and contingency factor in this filing. By this voluntary action, HCA is not waving any right to include a risk and contingency factor which HCA believes is consistent with historical and legal interpretations of HCA and the Pennsylvania Insurance Department.

C. Normalized Market-Adjusted Projected Allowed Total Claims

The normalization factors presented in Table 7 are each determined from the underlying membership demographics expected in the projected rating period. The 2024 values are pulled from the prior year's filing, while the 2025 values represent our projection for 2025 assumed in the 2025 rate development.

D. Components of Rate Change

Table 8 presents the components of change in the proposed 2025 Calibrated Plan Adjusted Index Rate (PMPM). Cell C73 is populated with the base period allowed charges found in the 2024 plan year rate filing (\$387.88).

Table 9 presents the data elements supporting the calculations in Table 8. The 2024 values are populated using the 2024 filed factors adjusted for the membership mix as of February 1, 2024.

3. Plan Rate Development

Table 10 shows the plan rate development for 2025. This table shows the plans that the Company intends to offer in 2025, as well as all plans offered in the 2024 portfolio. The calibrated plan adjusted index rates

for 2024 are calculated according to the instructions. The 2025 rating factors are consistent with the factors found on Worksheet 2 of the URRT. The pricing effect on Table 10 is further broken out into Pricing AV, Benefit Richness, and Non-Funding of CSR Adjustment. Similar to the URRT, the admin effect on Table 10 is broken out into Admin Costs, Taxes and Fees, and Profit or Contingency.

The benefit richness factors in column L are populated with the factors found in Attachment C and the corresponding supporting spreadsheet included with this rate filing. The derivation of the AV and Cost Sharing factors can also be found in Attachment C. The values in column 8 of the attachment represent the pure induced utilization for each plan. The Company's induced utilization factors are based on the following state-defined formula: $(\text{Plan AV})^2 - (\text{Plan AV}) + 1.24$. The "Plan AV" is the product of the "Pricing AV" and "Non-Funding of CSR Adjustment." Each plan's factor was then normalized by the average utilization factor. The average is a weighted average using projected membership as the weight. After normalization the average factor as shown in Attachment C is 1.000.

Note that the HHS Actuarial Value Calculator was unable to accommodate all of the Company's benefit designs. Plans needing certification are marked in column I of Table 10. Screen shots of all of the AV calculations and the appropriate certifications are included as a separate attachment within the *Supporting Documentation* section in SERFF.

For discontinuing plans where members are being mapped into a new plan, an effective rate increase is calculated by comparing the 2024 rate of the discontinuing plan to the 2025 rate of the plan to which the member is being mapped. This is not applicable for this filing since there are no discontinuing plans.

Columns AG through AP are populated with the February 1, 2024 enrollment by 2025 plan and rating area.

Impact of Non-Payment of Cost Sharing Reduction Subsidies

In accordance with the Department's guidance, we have applied an additional adjustment to our AV pricing values for those Silver plans not offered exclusively off-exchange. This adjustment factor was 1.25 and represents the non-payment of Cost Sharing Reduction subsidies. Consistent with the Department's guidance, this adjustment was reflected in Table 10 in Column P.

4. Plan Premium Development for 21-Year-Old Non-Tobacco User

Table 11 presents the Company's 21-year-old non-tobacco premium in the Individual Market. As mentioned in Section 1.C above, the change in 21-year-old non-tobacco premium PMPM calculated in this table is 9.2%.

5. Plan Factors

A. Age and Tobacco Factors

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

B. Geographic Factors

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.

C. Network Factors

Please see Table 14 for a summary of the Company's network rating factors. The factors presented here represent the medical network factors from the prior approved rate filing (if applicable) and the projected medical network factors for the rating period.

[REDACTED] Quantitative support for this change can be found on Attachment H.

D. Service Area Composition

The Plan Design Summary exhibit uploaded as a separate document contains the service areas related to this filing. As requested, service area maps are included.

6. Actuarial Certifications

I, [REDACTED], 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. All statements in this actuarial certification are accurate to the best of my knowledge and understanding. This filing is prepared in compliance with applicable Actuarial Standards of Practice. In completing this filing, I relied on data/information from other sources which was reviewed for reasonableness. This filing is prepared on behalf of HCA to accompany its rate filing (for calendar year 2025) for the Individual Market on and 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.

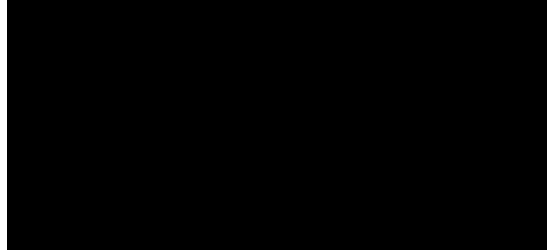
I certify that all factor, benefit and other changes from the prior approved filing have been disclosed in the actuarial memorandum.

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 AV Metal Values included in Table 10 were based entirely on the Federal AV Calculator or one of the approved alternative approaches.

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 information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2025 Rate Filing Justification.



Title: Actuarial Manager, Individual Markets

Date: 08/16/2024

Highmark Coverage Advantage
Individual Market Product Portfolio
Supplemental Exhibits

Attachment A	Change in Morbidity & Non-Morbidity Changes Calculations
Attachment B	Risk Adjustment Calculation
Attachment C	Induced Demand Calculation
Attachment D	Broker Commission Calculation
Attachment E	Change in Demographics Calculation
Attachment F	URRT Average Increase
Attachment G	MLR Exhibit
Attachment H	Network Factor Support

Highmark Coverage Advantage

Individual Market

Attachment A - 'Change in Morbidity' & 'Non-Morbidity Changes' Calculations

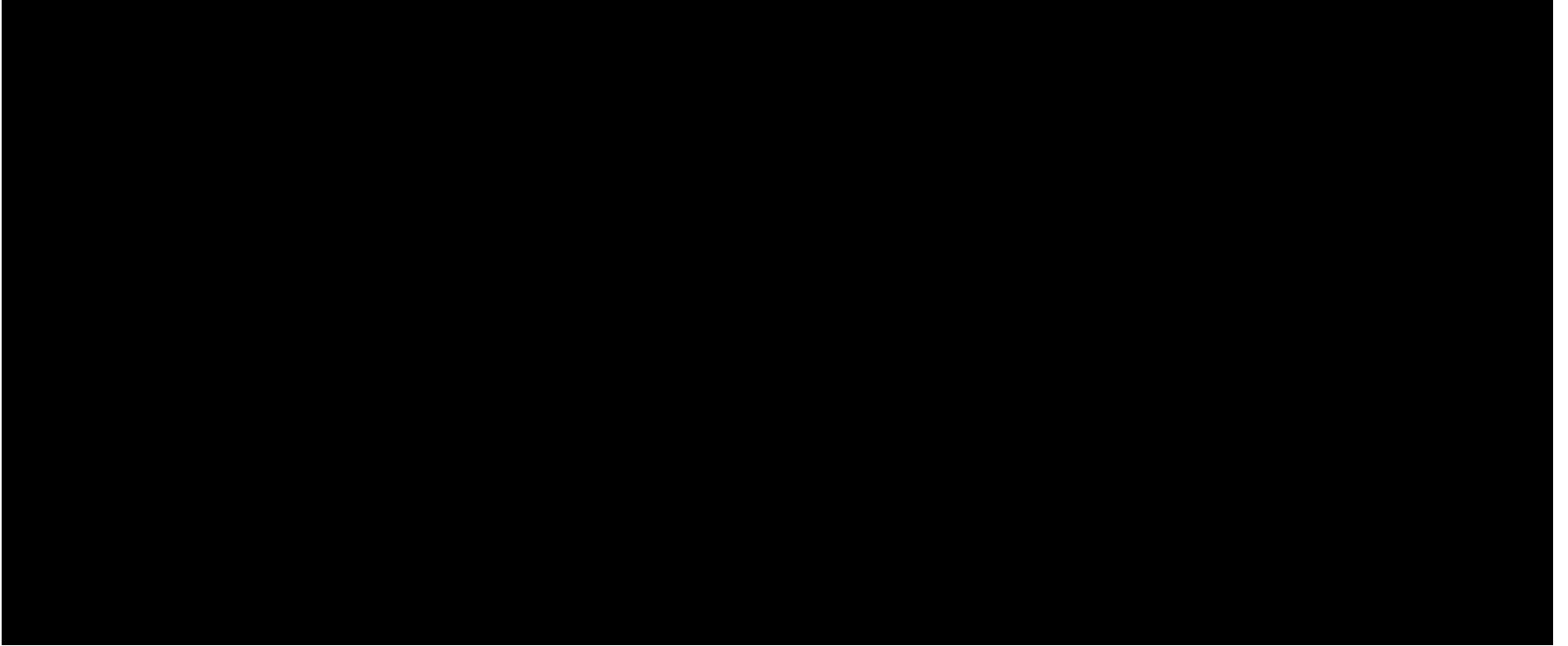
Components of 'Change in Morbidity'	2023 Member Distribution	2023 Normalized Allowed PMPM	2025 Member Distribution	2023 Normalized Allowed PMPM	Morbidity Change Relative to Total
<u>Population Source</u>					
HMCAI ACA	100.0%	\$350.22	76.0%	\$339.95	0.971
Other Highmark			3.0%	\$330.59	0.944
Prior ACA			1.0%	\$300.21	0.857
New-to-Blue			20.0%	\$339.95	0.971
Morbidity Factor	100.0%	\$350.22	100.0%	\$339.28	0.969
Capitation and Dental Dampening Factor					1.000
Table 5 'Change in Morbidity' Factor					0.969

Components of 'Non-Morbidity Changes'	Factor
CY2023 Demographic Factor	1.613
<u>CY2025 Demographic Factor</u>	<u>1.611</u>
Change in Demographics	0.999
CY2023 Network Factor	0.701
<u>CY2025 Network Factor</u>	<u>0.744</u>
Change in Network	1.062
Change in Benefits	1.000
Change in Other	0.974
Table 5 'Non-Morbidity Changes' Factor	1.033

Highmark Coverage Advantage

Individual Market

Attachment B - Risk Adjustment Calculation



Highmark Coverage Advantage

Individual Market

Attachment C - Induced Demand Calculation

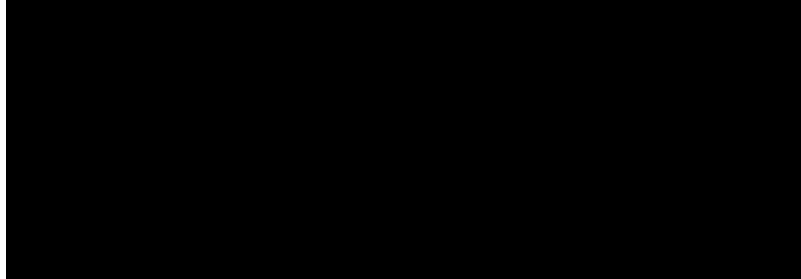
Induced Utilization Exhibit							
Plan ID (1)	Metal Level (2)	Projected Membership (3)	Projected Allowed Claims (4)	Projected Paid Claims (5)	Paid to Allowed Factor (6)	AV & Cost Sharing Factor (7)	(7)/(6) (8)
79279PA0140003	Platinum	3,036	\$1,545,805.10	\$1,452,577.50	0.940	1.008	1.073
79279PA0150003	Platinum	1,788	\$960,379.75	\$902,459.18	0.940	1.008	1.073
79279PA0080008	Gold	110,484	\$52,514,483.89	\$44,043,397.94	0.839	0.840	1.002
79279PA0130005	Gold	28,092	\$14,232,743.96	\$11,936,866.92	0.839	0.840	1.002
79279PA0140001	Gold	47,892	\$23,062,521.33	\$19,818,931.74	0.859	0.872	1.015
79279PA0150001	Gold	23,508	\$12,039,239.10	\$10,346,000.53	0.859	0.872	1.015
79279PA0090004	Gold	6,912	\$3,200,530.16	\$2,524,083.65	0.789	0.768	0.973
79279PA0080013	Gold	10,380	\$4,812,706.74	\$3,830,778.73	0.796	0.778	0.977
79279PA0140002	Silver	6,312	\$3,143,034.78	\$2,856,921.62	0.909	0.954	1.049
79279PA0150002	Silver	6,252	\$3,293,915.05	\$2,994,067.13	0.909	0.954	1.049
79279PA0080012	Silver	55,848	\$27,053,605.54	\$23,499,023.24	0.869	0.887	1.021
79279PA0080010	Silver	3,084	\$1,370,290.19	\$968,163.55	0.707	0.662	0.936
79279PA0130004	Silver	1,140	\$548,930.25	\$387,840.67	0.707	0.662	0.936
79279PA0080001	Bronze	14,004	\$6,152,936.84	\$4,162,319.37	0.676	0.626	0.926
79279PA0130002	Bronze	4,716	\$2,255,277.45	\$1,525,643.00	0.676	0.626	0.926
79279PA0090001	Bronze	4,632	\$2,048,230.73	\$1,404,083.56	0.686	0.637	0.929
79279PA0080011	Bronze	8,904	\$3,841,256.21	\$2,352,363.41	0.612	0.557	0.909
79279PA0100001	Catastrophic	2,688	\$1,060,650.85	\$617,788.84	0.582	0.527	0.904
Total		339,672	\$163,136,537.94	\$135,623,310.56	0.831	0.831	1.000

Components of AV & Cost Sharing Factor					
HIOS Plan ID	Metal Level	Paid-to-Allowed Ratio	Induced Utilization Factor	Avg. Benefit Richness	AV & Cost Sharing Factor
79279PA0140003	Platinum	0.940	1.183	1.103	1.008
79279PA0150003	Platinum	0.940	1.183	1.103	1.008
79279PA0080008	Gold	0.839	1.105	1.103	0.840
79279PA0130005	Gold	0.839	1.105	1.103	0.840
79279PA0140001	Gold	0.859	1.119	1.103	0.872
79279PA0150001	Gold	0.859	1.119	1.103	0.872
79279PA0090004	Gold	0.789	1.073	1.103	0.768
79279PA0080013	Gold	0.796	1.078	1.103	0.778
79279PA0140002	Silver	0.909	1.157	1.103	0.954
79279PA0150002	Silver	0.909	1.157	1.103	0.954
79279PA0080012	Silver	0.869	1.126	1.103	0.887
79279PA0080010	Silver	0.707	1.033	1.103	0.662
79279PA0130004	Silver	0.707	1.033	1.103	0.662
79279PA0080001	Bronze	0.676	1.021	1.103	0.626
79279PA0130002	Bronze	0.676	1.021	1.103	0.626
79279PA0090001	Bronze	0.686	1.024	1.103	0.637
79279PA0080011	Bronze	0.612	1.003	1.103	0.557
79279PA0100001	Catastrophic	0.582	0.997	1.103	0.527

Highmark Coverage Advantage

Individual Market

Attachment D - Broker Commission Calculation



Highmark Coverage Advantage

Individual Market

Attachment E - 'Change in Demographics' Calculation

Table E.1 - Age & Tobacco Factors

Age Band	HHS Age Factor	Tobacco Factor
0	0.765	1.000
1	0.765	1.000
2	0.765	1.000
3	0.765	1.000
4	0.765	1.000
5	0.765	1.000
6	0.765	1.000
7	0.765	1.000
8	0.765	1.000
9	0.765	1.000
10	0.765	1.000
11	0.765	1.000
12	0.765	1.000
13	0.765	1.000
14	0.765	1.000
15	0.833	1.000
16	0.859	1.000
17	0.885	1.000
18	0.913	1.000
19	0.941	1.000
20	0.970	1.000
21	1.000	1.025
22	1.000	1.025
23	1.000	1.025
24	1.000	1.025
25	1.004	1.025
26	1.024	1.025
27	1.048	1.025
28	1.087	1.025
29	1.119	1.025
30	1.135	1.025
31	1.159	1.025
32	1.183	1.025
33	1.198	1.025
34	1.214	1.025
35	1.222	1.025
36	1.230	1.025
37	1.238	1.025
38	1.246	1.025
39	1.262	1.025
40	1.278	1.100
41	1.302	1.105
42	1.325	1.112
43	1.357	1.121
44	1.397	1.132
45	1.444	1.145
46	1.500	1.160
47	1.563	1.177
48	1.635	1.196
49	1.706	1.217
50	1.786	1.225
51	1.865	1.225
52	1.952	1.225
53	2.040	1.225
54	2.135	1.225
55	2.230	1.225
56	2.333	1.225
57	2.437	1.225
58	2.548	1.225
59	2.603	1.225
60	2.714	1.225
61	2.810	1.225
62	2.873	1.225
63	2.952	1.225
64	3.000	1.225

Table E.2 - Experience Period Membership

Membership Mix		
Non-Tobacco	Tobacco	Total
0.73%	0.00%	0.73%
0.44%	0.00%	0.44%
0.34%	0.00%	0.34%
0.44%	0.00%	0.44%
0.40%	0.00%	0.40%
0.36%	0.00%	0.36%
0.39%	0.00%	0.39%
0.37%	0.00%	0.37%
0.32%	0.00%	0.32%
0.31%	0.00%	0.31%
0.29%	0.00%	0.29%
0.34%	0.00%	0.34%
0.29%	0.00%	0.29%
0.31%	0.00%	0.31%
0.31%	0.00%	0.31%
0.35%	0.00%	0.35%
0.36%	0.00%	0.36%
0.27%	0.00%	0.27%
0.43%	0.00%	0.43%
0.71%	0.00%	0.71%
0.79%	0.00%	0.79%
0.91%	0.02%	0.93%
1.00%	0.02%	1.01%
1.10%	0.03%	1.12%
1.11%	0.03%	1.14%
1.20%	0.04%	1.24%
4.13%	0.11%	4.25%
3.04%	0.13%	3.17%
2.85%	0.14%	2.99%
2.20%	0.13%	2.33%
2.24%	0.14%	2.38%
2.10%	0.16%	2.26%
1.99%	0.14%	2.13%
2.04%	0.10%	2.14%
1.88%	0.10%	1.99%
1.81%	0.14%	1.95%
1.79%	0.15%	1.95%
1.79%	0.08%	1.87%
1.73%	0.13%	1.85%
1.51%	0.13%	1.64%
1.48%	0.11%	1.59%
1.56%	0.12%	1.68%
1.37%	0.08%	1.45%
1.44%	0.09%	1.53%
1.31%	0.10%	1.41%
1.16%	0.07%	1.24%
1.24%	0.04%	1.27%
1.19%	0.09%	1.27%
1.17%	0.06%	1.23%
1.25%	0.10%	1.35%
1.24%	0.08%	1.32%
1.61%	0.06%	1.67%
1.63%	0.10%	1.73%
1.71%	0.11%	1.81%
1.70%	0.12%	1.82%
1.74%	0.11%	1.85%
1.76%	0.14%	1.90%
2.12%	0.13%	2.24%
2.31%	0.13%	2.44%
2.57%	0.14%	2.71%
2.72%	0.13%	2.85%
3.32%	0.18%	3.50%
4.24%	0.20%	4.44%
4.94%	0.29%	5.23%
3.40%	0.15%	3.55%

Table E.3 - Projection Period Membership

Membership Mix		
Non-Tobacco	Tobacco	Total
0.29%	0.00%	0.29%
0.45%	0.00%	0.45%
0.37%	0.00%	0.37%
0.37%	0.00%	0.37%
0.45%	0.00%	0.45%
0.40%	0.00%	0.40%
0.38%	0.00%	0.38%
0.34%	0.00%	0.34%
0.34%	0.00%	0.34%
0.44%	0.00%	0.44%
0.37%	0.00%	0.37%
0.34%	0.00%	0.34%
0.34%	0.00%	0.34%
0.35%	0.00%	0.35%
0.34%	0.00%	0.34%
0.28%	0.00%	0.28%
0.32%	0.00%	0.32%
0.37%	0.00%	0.37%
0.38%	0.00%	0.38%
0.29%	0.00%	0.29%
0.63%	0.00%	0.63%
0.80%	0.00%	0.80%
1.04%	0.02%	1.06%
1.01%	0.02%	1.03%
1.01%	0.03%	1.04%
1.20%	0.04%	1.24%
1.37%	0.08%	1.45%
2.65%	0.09%	2.74%
3.17%	0.12%	3.29%
2.71%	0.13%	2.84%
2.76%	0.13%	2.89%
2.28%	0.14%	2.42%
2.17%	0.14%	2.31%
2.10%	0.16%	2.27%
1.98%	0.17%	2.15%
1.99%	0.09%	2.07%
1.87%	0.11%	1.98%
1.90%	0.12%	2.02%
1.82%	0.14%	1.96%
1.85%	0.13%	1.97%
1.74%	0.13%	1.87%
1.58%	0.13%	1.70%
1.65%	0.10%	1.75%
1.59%	0.11%	1.70%
1.43%	0.07%	1.50%
1.47%	0.10%	1.57%
1.32%	0.05%	1.37%
1.26%	0.06%	1.31%
1.24%	0.05%	1.29%
1.19%	0.06%	1.25%
1.22%	0.06%	1.28%
1.35%	0.10%	1.45%
1.27%	0.10%	1.36%
1.70%	0.07%	1.77%
1.66%	0.11%	1.76%
1.68%	0.12%	1.80%
1.70%	0.11%	1.81%
1.77%	0.11%	1.88%
1.79%	0.13%	1.92%
2.14%	0.13%	2.27%
2.40%	0.12%	2.52%
2.70%	0.11%	2.81%
2.89%	0.17%	3.06%
3.68%	0.19%	3.88%
4.38%	0.17%	4.55%
5.26%	0.24%	5.50%

Table E.4 - Area Factors

Rating Area	Experience Period Enrollment		Projection Period Area Factor	
	Enrollment	Area Factor	Enrollment	Area Factor
1	11.7%	0.940	11.2%	0.940
2	0.0%	0.940	0.0%	0.940
4	88.3%	0.940	88.8%	0.940
5	0.0%	0.940	0.0%	0.940
6	0.0%	1.040	0.0%	1.040
7	0.0%	1.040	0.0%	1.040
9	0.0%	1.040	0.0%	1.040
Total	100.0%	0.940	100.0%	0.940

Table E.5 - 'Change in Demographics' Calculation

	Experience Period	Projection Period	Change in Demographics
Average Age Factor	1.706	1.704	
Average Tobacco Factor	1.006	1.006	
Average Area Factor	0.940	0.940	
Average Demographic Factor	1.614	1.612	
Capitation Dampening	0.999	0.999	
Final Demographic Factor	1.612	1.610	0.999

Highmark Coverage Advantage

Individual Market

Attachment F - URRT Average Increase

HIOS Plan ID	URRT Plan Category	URRT Current Enrollment	Current Enrollment in Renewing Plans	Current Avg Rate	Projected Avg Rate	Cumulative Rate Change %
79279PA0080001	Renewing	1,712	1,712	\$364.32	\$392.63	7.77%
79279PA0080008	Renewing	8,477	8,477	\$477.93	\$526.58	10.18%
79279PA0080010	Renewing	235	235	\$397.41	\$414.70	4.35%
79279PA0080011	Renewing	660	660	\$329.40	\$348.97	5.94%
79279PA0080012	Renewing	4,208	4,208	\$508.64	\$555.79	9.27%
79279PA0080013	Renewing	685	685	\$448.51	\$487.49	8.69%
79279PA0090001	Renewing	356	356	\$371.42	\$400.43	7.81%
79279PA0090004	Renewing	549	549	\$443.13	\$482.39	8.86%
79279PA0100001	Renewing	206	206	\$280.20	\$303.60	8.35%
79279PA0130002	Renewing	359	359	\$405.37	\$427.34	5.42%
79279PA0130004	Renewing	90	90	\$438.46	\$449.38	2.49%
79279PA0130005	Renewing	2,144	2,144	\$518.98	\$561.28	8.15%
79279PA0140001	Renewing	3,669	3,669	\$496.84	\$546.62	10.02%
79279PA0140002	Renewing	448	448	\$542.51	\$597.90	10.21%
79279PA0140003	New	0	0	\$0.00	\$0.00	0.00%
79279PA0150001	Renewing	1,780	1,780	\$537.89	\$581.35	8.08%
79279PA0150002	Renewing	473	473	\$583.56	\$632.58	8.40%
79279PA0150003	New	0	0	\$0.00	\$0.00	0.00%
79279PA0260001	Terminated	0	0	\$0.00	\$0.00	0.00%
79279PA0270001	Terminated	0	0	\$0.00	\$0.00	0.00%
Total		26,051	26,051	\$478.44	\$522.48	9.20%

Highmark Coverage Advantage

Individual Market

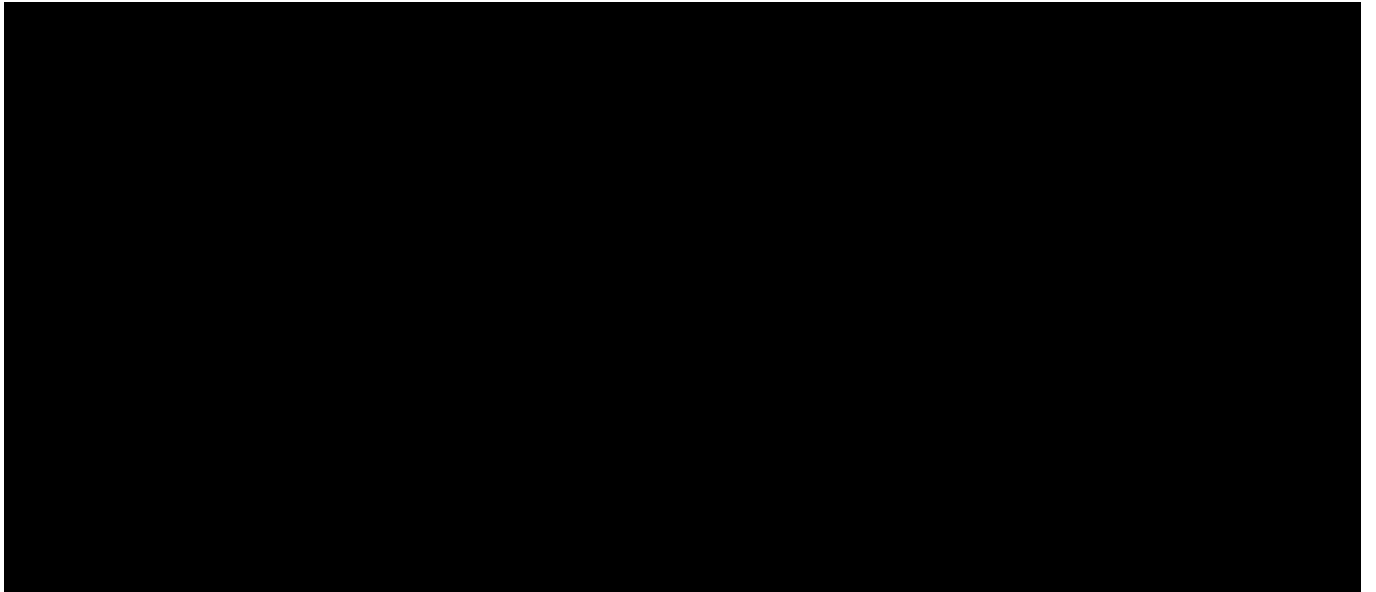
Attachment G - MLR Exhibit

Calendar Year	MLR		Member Months	
	Actual	Pricing	Actual	Pricing
2020	69.4%	81.2%	80,110	138,912
2021	81.7%	82.4%	128,970	123,144
2022	82.5%	80.2%	184,824	162,084
3-yr Total	79.7%	81.1%	393,904	424,140

Highmark Coverage Advantage

Individual Market

Attachment H - Network Factor Support



Standard Questions

1. Membership:

- a. **If the projected membership for plan year 2025 significantly differs from the current 2/1/2024 membership, please explain why.**

Response:

- a. The projected membership for 2025 is not significantly different from the current membership in 2024.

2. Experience Period Claims:

- a. **Please confirm that all claims which are capitated have been removed from the experience period claims.**
- b. **Please confirm that all non-EHB claims have been removed from the experience period claims.**
- c. **How are drug rebates projected to change from the base period to the rating period? How has this change been reflected in the rate development?**

Response:

- a. All capitation dollars are excluded from the experience period paid claims in Table 2. Capitation dollars are captured in the appropriate EHB Capitation and Non-EHB Capitation cells in Table 2.
- b. All non-EHB claims have been removed from the experience period claims that are used to develop the Index Rate.

c.



3. COVID:

- a. **Please confirm that Tables 2-4 of the PAAM Exhibits do not have any COVID adjustment. Additionally, please confirm that any COVID adjustment factor in the filing is reflected in Table 5 of the PAAM Exhibits.**
- b. **If there is a COVID adjustment factor other than 1.0, please provide a quantitative exhibit supporting the factor.**
- c. **Please provide commentary on how the Company believes services such as COVID vaccinations and COVID testing will be handled in PY25. Within your response, please clarify if these services will be considered preventative and covered at 100%.**

Response:

- a. Tables 2-4 of the PAAM Exhibits do not have any COVID adjustments. Furthermore, there are no longer any COVID adjustments from the experience period to the rating period.
- b. The COVID adjustment factor used for this filing is 1.0. There are no longer any COVID adjustments from the experience period to the rating period.
- c. There will be no change in how COVID vaccinations and testing will be handled in PY25. The COVID vaccine is on the CDC's general immunization schedule and is considered to be

preventative with no cost share for members. COVID tests will be covered according to a member's cost share for diagnostic testing.

4. Trend:

- a. **[SG. Only] If the Total Annual Trend in Table 3 (weighted by credibility) and the Annual Trend used to calculate quarterly rates in Table 5A differ, please provide an explanation and exhibit in support of the variation.**
- b. **[SG. Only] In Table 5A, if cells K32:M32 are left to equal J32, please explain why that is a reasonable assumption.**

Response:

- a. This question is not applicable to this filing.
- b. This question is not applicable to this filing.

5. Table 6 – Retention:

- a. **Please confirm that the federal income tax is calculated using a Federal Income Tax Rate of 21%. If other adjustments were made in Table 6, cell C57, please provide a demonstration of how this number was calculated and an explanation of the other adjustments included in the calculation.**
- b. **Please confirm that the Risk Adjustment User Fee PMPM is consistent with HHS Final Notice of Benefit and Payment Parameters for plan year 2025.**
- c. **Please provide an exhibit showing the commission PMPM amount to be paid to brokers in the following situations: Open-Enrollment Enrollee – Renewing, Open Enrollment Enrollee – New, Special Enrollment Period Enrollee – New, Special Enrollment Enrollee – Renewing. If the commission PMPM is not consistent between the four options above, please provide a detailed explanation as to the reason for the difference.**

Response:

- a. The value in Table 6, cell C57 is 0.00%.
- b. As stated in Section 2.B of the PA Actuarial Memorandum, the rate development assumes a risk adjustment user fee of \$0.18 PMPM for plan year 2025, which is consistent with the Final Notice of Benefit and Payment Parameters.
- c. [REDACTED]

6. Pricing AVs:

- a. **Please confirm that the Pricing AVs were calculated using a single risk pool (i.e., claims experience is not separated by metal level).**
- b. **Please identify and support any differences between the company's metallic AV calculator results and the corresponding Pricing AVs.**

Response:

- a. The Company's Pricing AV tool does not separate claims experience by metal level and the underlying claims experience is applied to the applicable cost sharing levels.
- b. The differences in comparing the CMS metallic AV calculator to the Company's corresponding Pricing AVs average approximately 3%. These differences occur due to a number of factors

such as the CMS metallic AV calculator is based on a completely different underlying population, assumptions regarding trends in deductible and copay tables, assumptions regarding mix of services, etc.

7. Expanded Bronze Plans:

- a. **Please provide an exhibit which demonstrates that the criteria for expanded bronze plans have been met.**

Response:

- a. Our expanded bronze plans satisfy the requirements as defined by 45 CFR 156.140(c) by either covering at least one major service, other than preventive services, before the deductible or meeting the requirements to be a high deductible health plan within the meaning of 26 U.S.C. 223(c)(2). For plans satisfying the requirement by covering at least one major service before the deductible, several major services are covered prior to the deductible including primary care and specialty care. The coinsurance percentages and certifications of the values corresponding to these categories can be found in the AV screenshots and Certifications document provided as a separate attachment with the initial SERFF submission.

8. PAAM Exhibits – Consumer Factors:

- a. **Please provide quantitative and qualitative support for the proposed geographic rating area factors, if different from the previous year.**
- b. **Please provide quantitative and qualitative support for the proposed network factors, if different from the previous year.**

Response:

- a. The proposed geographic rating area factors are unchanged from the currently approved factors.
- b. Attachment H of the PA Actuarial Memorandum provides quantitative support for the proposed network factor that is being adjusted from the currently approved factors. A discussion of this adjustment is included in Section 5.C of the PA Actuarial Memorandum.

9. MLR Exhibit:

- a. **Please complete table below which summarizes the most recent three years of complete MLR information.**
 - i. **Actual is the final information which was filed for the specified calendar year**
 - ii. **Projected is the information which was projected in the final annual filing for the given year (i.e., 2021 projected information is from the plan year 2021 annual filing submitted in 2020)**

Calendar Year	MLR		Member Months	
	Actual	Projected	Actual	Projected
2020				
2021				
2022				

- b. **Are the MLRs and Member Months between Actual and Pricing comparable? If not, explain.**
- c. **Does the insurer expect to pay MLR rebates for the 3-year period above?**

Response:

- a. Attachment G of the PA Actuarial Memorandum contains the historical MLR Exhibit as requested.
- b. The differences between Actual and Projected MLRs vary by year. The 2020 variance was driven primarily by the COVID-19 pandemic. In 2021 and 2022, there was no material MLR variance.

The Member Month differences also vary by year. The 2020 variance was driven by lower-than-expected switching rates from competition after the new HCA product launch (Together Blue EPO). This was partially offset by increased market size resulting from the COVID PHE (due to employment losses and an internal decision to not terminate existing members for non-payment). In 2021, there was no material enrollment variance. The 2022 variance was driven by ARPA subsidies, which expanded the market more than expected.

- c. No MLR rebates were payable for the 2022 MLR rebate reporting year (2020-2022 period).

10. Plan of Withdrawal:

- a. **Please confirm that a Plan of Withdrawal has been submitted if any plans are being discontinued.**

Response:

- a. Based on the guidance from the PA Insurance Department regarding Plan of Withdrawal requirements, it is the Company's understanding that a Plan of Withdrawal is not applicable for the 2025 plans submitted. In the event that a plan is discontinued, all members are being renewed into other plans.

11. Transitional Plans:

- a. **Starting in October 2024, the PID will discontinue the non-enforcement policy for individual transitional plans (the non-enforcement policy for small group transitional plans will continue until further notice, or until the federal government discontinues its non-enforcement policy). If applicable, please discuss the migration of individual transitional members into ACA-compliant plans effective January 1, 2025.**

Response:

- a. The Company does not offer individual transitional plans. The Company believes there is very little enrollment left in individual transition plans across the market and thus the migration of these members into ACA-compliant plans would have a minimal impact on the overall pool.

12. Copay Adjustment Programs:

- a. **Does the company use a copay adjustment program (also known as a copay accumulator program)?**
- b. **How does the company handle copay assistance coupons? For example, does the coupon apply to the MOOP?**
- c. **If any change to such a program has resulted in a pricing impact, please include a detailed quantitative exhibit supporting the pricing impact.**

Response:

- a. Yes, the Company uses a copay adjustment program called [REDACTED] on certain plans.

- b. The value of the manufacturer copay assistance coupons processed through the [REDACTED] program bypasses the members' deductible and annual out-of-pocket maximum.
- c. There is no material pricing impact to the [REDACTED] program.

**PA Rate Template Part I
Data Relevant to the Rate Filing**

Table 0. Identifying Information

Carrier Name:	HMCAI		
Product(s):	EPO		
Market Segment:	Individual		
Rate Effective Date:	01/01/2025	to	12/31/2025
Base Period Start Date:	01/01/2023	to	12/31/2023
Date of Most Recent Membership:	02/01/2024		

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of 02-01-2024)	Projected Rating Period
Average Age	41.7	41.4	41.7
Total	244,880	26,051	339,672
<18	16,230	1,807	22,387
18-24	15,026	1,677	20,691
25-29	34,228	3,509	44,900
30-34	26,703	2,902	38,115
35-39	22,685	2,537	33,311
40-44	18,746	2,137	27,900
45-49	15,583	1,709	22,131
50-54	20,459	2,112	27,656
55-59	27,286	2,640	35,224
60-63	39,231	3,622	48,563
64+	8,694	1,399	18,693

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	Estimated Reinsurance Recoveries
\$ 107,544,031.59	\$ 84,210,802.76	\$ 97,142,106.49	244,880	\$ 17,171,029.12	\$ 114,313,135.61	\$ 664,091.29	\$ (12,657,847.20)	\$ 36,732.00	\$ 101,878.35	\$ (9,971,059.04)	\$ 2,819,684.15
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$ 412.56
Loss Ratio											\$ 83.75%

*Express Prescription Drug Rebates as a negative number

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	5.00%	1.43%		6.50%	13.28%
Outpatient Hospital	5.00%	1.43%		6.50%	19.13%
Professional	5.00%	1.43%		6.50%	36.33%
Other Medical	5.00%	1.43%		6.50%	1.95%
Capitation				6.50%	0.04%
Prescription Drugs	5.00%	3.62%		8.80%	29.26%
Total Annual Trend				7.18%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.149	

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

** Should equal URRT Trend

Table 4. Historical 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-20		\$ 1,450,783.77	1.0000	\$ 1,450,783.77	5,978	\$ 242.69		\$ (125,982.32)	\$ 1,910,180.38	\$ 319.54
Feb-20		\$ 1,361,341.79	1.0000	\$ 1,361,341.79	6,063	\$ 224.53		\$ (143,886.01)	\$ 1,742,631.77	\$ 287.42
Mar-20		\$ 1,693,173.95	1.0000	\$ 1,693,173.95	6,287	\$ 269.31		\$ (196,611.27)	\$ 2,011,236.11	\$ 319.90
Apr-20		\$ 1,376,296.55	1.0000	\$ 1,376,296.55	6,352	\$ 210.86		\$ (184,388.63)	\$ 1,507,502.52	\$ 230.88
May-20		\$ 1,592,375.77	1.0000	\$ 1,592,375.77	6,762	\$ 235.40		\$ (191,654.12)	\$ 1,872,867.23	\$ 276.97
Jun-20		\$ 2,098,271.67	1.0000	\$ 2,098,271.67	6,914	\$ 303.48		\$ (245,289.87)	\$ 2,349,202.11	\$ 339.77
Jul-20		\$ 2,098,800.78	1.0000	\$ 2,098,800.78	6,919	\$ 303.34		\$ (227,463.94)	\$ 2,580,514.27	\$ 372.96
Aug-20		\$ 2,472,989.12	1.0000	\$ 2,472,989.12	6,825	\$ 362.34		\$ (221,994.52)	\$ 2,772,518.37	\$ 406.23
Sep-20		\$ 2,152,379.63	1.0000	\$ 2,152,379.63	6,977	\$ 308.50		\$ (215,108.65)	\$ 2,406,430.01	\$ 344.91
Oct-20		\$ 2,178,505.89	1.0000	\$ 2,178,505.89	6,993	\$ 311.53		\$ (260,508.25)	\$ 2,427,419.42	\$ 347.12
Nov-20		\$ 2,221,535.44	1.0000	\$ 2,221,535.44	6,993	\$ 317.68		\$ (232,384.20)	\$ 2,426,719.26	\$ 347.02
Dec-20	\$ 33,868,649.47	\$ 2,362,589.65	1.0000	\$ 2,362,589.65	6,847	\$ 345.05	\$ 6,019,212.44	\$ (263,394.63)	\$ 2,552,358.60	\$ 372.77
Jan-21		\$ 2,730,899.30	1.0000	\$ 2,730,899.30	9,260	\$ 294.91		\$ (243,469.42)	\$ 3,174,853.19	\$ 342.86
Feb-21		\$ 3,182,555.66	1.0000	\$ 3,182,555.66	9,363	\$ 319.44		\$ (268,738.89)	\$ 3,678,889.98	\$ 369.26
Mar-21		\$ 3,839,032.29	1.0000	\$ 3,839,032.29	9,954	\$ 385.66		\$ (338,038.53)	\$ 4,404,435.22	\$ 442.48
Apr-21		\$ 3,691,532.94	1.0000	\$ 3,691,532.94	10,135	\$ 364.24		\$ (380,122.72)	\$ 4,092,945.16	\$ 403.84
May-21		\$ 3,621,476.21	1.0000	\$ 3,621,476.21	10,437	\$ 346.98		\$ (386,844.65)	\$ 3,990,418.56	\$ 382.33
Jun-21		\$ 4,312,916.39	1.0000	\$ 4,312,916.39	10,694	\$ 403.30		\$ (396,902.78)	\$ 4,676,907.67	\$ 437.34
Jul-21		\$ 4,777,907.97	1.0000	\$ 4,777,907.97	11,017	\$ 433.69		\$ (443,151.55)	\$ 5,113,010.33	\$ 464.10
Aug-21		\$ 4,407,843.52	1.0000	\$ 4,407,843.52	11,286	\$ 390.56		\$ (453,494.09)	\$ 4,759,223.69	\$ 421.69
Sep-21		\$ 4,886,438.91	1.0000	\$ 4,886,438.91	11,572	\$ 422.26		\$ (459,589.29)	\$ 5,228,716.31	\$ 451.84
Oct-21		\$ 4,567,464.74	1.0000	\$ 4,567,464.74	11,614	\$ 393.27		\$ (442,513.03)	\$ 4,861,750.93	\$ 418.61
Nov-21		\$ 4,685,976.20	0.9999	\$ 4,686,243.63	11,560	\$ 405.38		\$ (508,406.60)	\$ 4,887,359.11	\$ 422.78
Dec-21	\$ 56,717,121.25	\$ 4,724,895.36	0.9999	\$ 4,725,409.12	11,478	\$ 411.69	\$ 9,184,110.68	\$ (534,367.69)	\$ 4,843,304.09	\$ 421.96
Jan-22		\$ 4,536,613.24	0.9998	\$ 4,537,540.62	14,239	\$ 318.67		\$ (543,066.95)	\$ 5,161,884.53	\$ 362.52
Feb-22		\$ 5,327,175.66	0.9998	\$ 5,328,357.85	15,755	\$ 338.20		\$ (525,659.97)	\$ 5,908,732.63	\$ 375.04
Mar-22		\$ 5,598,965.16	0.9999	\$ 5,599,482.66	15,546	\$ 360.19		\$ (622,597.46)	\$ 6,157,436.59	\$ 396.08
Apr-22		\$ 5,156,468.13	1.0000	\$ 5,156,510.63	15,500	\$ 332.68		\$ (578,038.43)	\$ 5,672,506.11	\$ 365.97
May-22		\$ 5,287,162.19	0.9997	\$ 5,288,835.87	15,405	\$ 343.32		\$ (597,340.85)	\$ 5,822,493.08	\$ 377.96
Jun-22		\$ 6,639,846.94	0.9112	\$ 7,286,800.66	15,374	\$ 473.97		\$ (615,163.17)	\$ 7,924,575.27	\$ 515.45
Jul-22		\$ 5,033,480.93	0.9994	\$ 5,036,466.02	15,546	\$ 323.97		\$ (576,711.31)	\$ 5,408,253.18	\$ 347.89
Aug-22		\$ 5,869,672.38	0.9994	\$ 5,873,047.33	15,595	\$ 376.60		\$ (672,059.97)	\$ 6,267,990.76	\$ 401.92
Sep-22		\$ 6,136,293.04	0.9992	\$ 6,141,132.62	15,600	\$ 393.66		\$ (617,550.19)	\$ 6,526,378.76	\$ 418.36
Oct-22		\$ 5,751,002.36	0.9992	\$ 5,755,364.61	15,520	\$ 370.84		\$ (661,407.49)	\$ 6,077,016.39	\$ 391.36
Nov-22		\$ 5,747,132.84	0.9993	\$ 5,751,073.19	15,460	\$ 372.00		\$ (641,723.45)	\$ 6,047,448.78	\$ 391.17
Dec-22	\$ 79,310,002.49	\$ 6,379,440.03	0.9988	\$ 6,387,394.32	15,284	\$ 417.91	\$ 12,796,793.55	\$ (606,145.43)	\$ 6,708,598.58	\$ 438.93
Jan-23		\$ 6,831,038.44	0.9977	\$ 6,846,706.29	18,386	\$ 372.39		\$ (824,511.09)	\$ 7,413,913.30	\$ 403.24
Feb-23		\$ 6,088,509.08	0.9984	\$ 6,098,187.70	19,968	\$ 305.40		\$ (779,673.10)	\$ 6,677,188.22	\$ 334.39
Mar-23		\$ 7,785,168.84	0.9975	\$ 7,804,556.08	19,873	\$ 392.72		\$ (990,172.96)	\$ 8,340,107.46	\$ 419.67
Apr-23		\$ 7,011,848.99	0.9937	\$ 7,026,073.43	19,708	\$ 358.03		\$ (915,448.62)	\$ 7,496,953.97	\$ 380.40
May-23		\$ 8,473,583.18	0.9917	\$ 8,544,665.24	19,700	\$ 433.74		\$ (1,109,272.47)	\$ 8,928,065.15	\$ 453.20
Jun-23		\$ 7,961,513.88	0.9239	\$ 8,617,176.46	19,882	\$ 433.42		\$ (1,083,638.99)	\$ 9,051,541.84	\$ 455.26
Jul-23		\$ 7,701,250.92	0.9855	\$ 7,814,838.39	20,414	\$ 382.82		\$ (1,008,525.44)	\$ 8,152,543.93	\$ 399.36
Aug-23		\$ 8,495,421.40	0.9824	\$ 8,647,750.49	20,832	\$ 415.12		\$ (1,193,357.11)	\$ 8,900,691.34	\$ 427.26
Sep-23		\$ 8,234,455.51	0.9760	\$ 8,539,131.68	21,389	\$ 401.11		\$ (1,151,619.97)	\$ 8,792,308.44	\$ 413.00
Oct-23		\$ 9,016,596.29	0.9693	\$ 9,301,757.11	21,421	\$ 434.24		\$ (1,268,643.61)	\$ 9,472,150.73	\$ 442.19
Nov-23		\$ 8,562,147.20	0.9534	\$ 8,980,993.70	21,741	\$ 413.09		\$ (1,147,049.46)	\$ 9,274,511.30	\$ 426.59
Dec-23	\$ 107,644,031.59	\$ 7,949,369.03	0.8942	\$ 8,890,269.92	21,666	\$ 410.33	\$ 17,171,029.12	\$ (1,184,934.40)	\$ 9,155,402.72	\$ 422.57

* Express Completion Factor as a percentage

** Express Prescription Drug Rebates as a negative number

Carder Name: HMCAI
 Product(s): EPD
 Market Segment: Individual
 Rate Effective Date: 01/01/2025

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	Estimated Reinsurance Recoveries
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$ -
Loss Ratio											0.00%

*Express Prescription Drug Rebates as a negative number

Table 3b. Manual Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital				0.00%	
Outpatient Hospital				0.00%	
Professional				0.00%	
Other Medical				0.00%	
Capitation					
Prescription Drugs				0.00%	
Total Annual Trend				0.00%	0.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.000	

*Express Cost, Utilization, Induced Utilization and Weight 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-20				#DIV/0!		#DIV/0!				#DIV/0!
Feb-20				#DIV/0!		#DIV/0!				#DIV/0!
Mar-20				#DIV/0!		#DIV/0!				#DIV/0!
Apr-20				#DIV/0!		#DIV/0!				#DIV/0!
May-20				#DIV/0!		#DIV/0!				#DIV/0!
Jun-20				#DIV/0!		#DIV/0!				#DIV/0!
Jul-20				#DIV/0!		#DIV/0!				#DIV/0!
Aug-20				#DIV/0!		#DIV/0!				#DIV/0!
Sep-20				#DIV/0!		#DIV/0!				#DIV/0!
Oct-20				#DIV/0!		#DIV/0!				#DIV/0!
Nov-20				#DIV/0!		#DIV/0!				#DIV/0!
Dec-20				#DIV/0!		#DIV/0!				#DIV/0!
Jan-21				#DIV/0!		#DIV/0!				#DIV/0!
Feb-21				#DIV/0!		#DIV/0!				#DIV/0!
Mar-21				#DIV/0!		#DIV/0!				#DIV/0!
Apr-21				#DIV/0!		#DIV/0!				#DIV/0!
May-21				#DIV/0!		#DIV/0!				#DIV/0!
Jun-21				#DIV/0!		#DIV/0!				#DIV/0!
Jul-21				#DIV/0!		#DIV/0!				#DIV/0!
Aug-21				#DIV/0!		#DIV/0!				#DIV/0!
Sep-21				#DIV/0!		#DIV/0!				#DIV/0!
Oct-21				#DIV/0!		#DIV/0!				#DIV/0!
Nov-21				#DIV/0!		#DIV/0!				#DIV/0!
Dec-21				#DIV/0!		#DIV/0!				#DIV/0!
Jan-22				#DIV/0!		#DIV/0!				#DIV/0!
Feb-22				#DIV/0!		#DIV/0!				#DIV/0!
Mar-22				#DIV/0!		#DIV/0!				#DIV/0!
Apr-22				#DIV/0!		#DIV/0!				#DIV/0!
May-22				#DIV/0!		#DIV/0!				#DIV/0!
Jun-22				#DIV/0!		#DIV/0!				#DIV/0!
Jul-22				#DIV/0!		#DIV/0!				#DIV/0!
Aug-22				#DIV/0!		#DIV/0!				#DIV/0!
Sep-22				#DIV/0!		#DIV/0!				#DIV/0!
Oct-22				#DIV/0!		#DIV/0!				#DIV/0!
Nov-22				#DIV/0!		#DIV/0!				#DIV/0!
Dec-22				#DIV/0!		#DIV/0!				#DIV/0!
Jan-23				#DIV/0!		#DIV/0!				#DIV/0!
Feb-23				#DIV/0!		#DIV/0!				#DIV/0!
Mar-23				#DIV/0!		#DIV/0!				#DIV/0!
Apr-23				#DIV/0!		#DIV/0!				#DIV/0!
May-23				#DIV/0!		#DIV/0!				#DIV/0!
Jun-23				#DIV/0!		#DIV/0!				#DIV/0!
Jul-23				#DIV/0!		#DIV/0!				#DIV/0!
Aug-23				#DIV/0!		#DIV/0!				#DIV/0!
Sep-23				#DIV/0!		#DIV/0!				#DIV/0!
Oct-23				#DIV/0!		#DIV/0!				#DIV/0!
Nov-23				#DIV/0!		#DIV/0!				#DIV/0!
Dec-23				#DIV/0!		#DIV/0!				#DIV/0!

*Express Completion Factor as a percentage

**Express Prescription Drug Rebates as a negative number

Continuance Table for Calculating Reinsurance Impact - Individual Market Only, Experience Period Information

Carrier Name:	HMCAI	Attachment Point:	\$60,000
Product(s):	EPO	Reinsurance Cap:	\$100,000
Market Segment:	Individual	Coinsurance Rate:	60%
Rate Effective Date:	01/01/2025		
Incurred Dates:	1/1/2023 to 12/31/2023	Proj. Incurred Claim Impact:	-3.4%

Individual ACA Compliant Policies Only: Incurred Dates 1/1/2023 to 12/31/2023					
Annual Incurred Claims Range		Unique Members	Member Months	Total Incurred Claims	Total Incurred Claims with Reinsurance
\$0	\$29,999				\$54,223,649
\$30,000	\$34,999				\$3,010,408
\$35,000	\$39,999				\$2,716,469
\$40,000	\$44,999				\$2,030,750
\$45,000	\$49,999				\$2,181,857
\$50,000	\$54,999				\$1,786,597
\$55,000	\$59,999				\$1,035,936
\$60,000	\$64,999				\$1,032,324
\$65,000	\$69,999				\$1,639,412
\$70,000	\$74,999				\$1,693,014
\$75,000	\$79,999				\$1,337,564
\$80,000	\$84,999				\$896,079
\$85,000	\$89,999				\$712,331
\$90,000	\$94,999				\$437,052
\$95,000	\$99,999				\$526,946
\$100,000	\$109,999				\$883,177
\$110,000	\$119,999				\$549,078
\$120,000	\$129,999				\$817,622
\$130,000	\$139,999				\$452,315
\$140,000	\$149,999				\$1,086,532
\$150,000	\$159,999				\$917,985
\$160,000	\$169,999				\$419,801
\$170,000	\$179,999				\$452,335
\$180,000	\$189,999				\$479,753
\$190,000	\$199,999				\$339,955
\$200,000	\$209,999				\$362,113
\$210,000	\$219,999				\$941,904
\$220,000	\$229,999				\$199,341
\$230,000	\$239,999				\$215,855
\$240,000	\$249,999				\$217,206
\$250,000	\$259,999				\$0
\$260,000	\$269,999				\$482,747
\$270,000	\$279,999				\$250,832
\$280,000	\$289,999				\$257,567
\$290,000	\$299,999				\$0
\$300,000	\$324,999				\$2,011,023
\$325,000	\$349,999				\$314,884
\$350,000	\$374,999				\$668,673
\$375,000	\$399,999				\$374,777
\$400,000	\$424,999				\$1,154,586
\$425,000	\$449,999				\$0
\$450,000	\$474,999				\$431,670
\$475,000	\$499,999				\$0
\$500,000	\$599,999				\$572,854
\$600,000	\$699,999				\$0
\$700,000	\$799,999				\$0
\$800,000	\$899,999				\$0
\$900,000	\$999,999				\$0
\$1,000,000+					\$1,007,370
Total		29,507	244,880	\$94,372,431	\$91,122,346

Continuance Table for Calculating Reinsurance Impact - Individual Market Only, Projection Period Information

Carrier Name:	HMCAI	Attachment Point:	\$60,000
Product(s):	EPO	Reinsurance Cap:	\$100,000
Market Segment:	Individual	Coinsurance Rate:	60%
Rate Effective Date:	01/01/2025	Proj. Incurred Claim Impact:	-5.4%
		Proj. Morbidity Impact:	0.0%

Reinsurance Program Impact Continuance Table Development - Plan Year 2025					
Annual Incurred Claims Range		Unique Members	Member Months	Total Incurred Claims	Total Incurred Claims with Reinsurance
\$0	\$29,999				\$367,825,704
\$30,000	\$34,999				\$28,177,891
\$35,000	\$39,999				\$27,683,261
\$40,000	\$44,999				\$24,458,391
\$45,000	\$49,999				\$21,662,203
\$50,000	\$54,999				\$19,758,482
\$55,000	\$59,999				\$18,494,998
\$60,000	\$64,999				\$17,491,397
\$65,000	\$69,999				\$14,857,882
\$70,000	\$74,999				\$12,142,367
\$75,000	\$79,999				\$11,853,176
\$80,000	\$84,999				\$11,114,932
\$85,000	\$89,999				\$13,561,496
\$90,000	\$94,999				\$10,142,533
\$95,000	\$99,999				\$10,063,992
\$100,000	\$109,999				\$14,798,013
\$110,000	\$119,999				\$14,086,783
\$120,000	\$129,999				\$11,716,963
\$130,000	\$139,999				\$10,555,695
\$140,000	\$149,999				\$12,632,238
\$150,000	\$159,999				\$9,016,034
\$160,000	\$169,999				\$11,602,477
\$170,000	\$179,999				\$9,234,714
\$180,000	\$189,999				\$10,448,336
\$190,000	\$199,999				\$8,049,235
\$200,000	\$209,999				\$7,236,852
\$210,000	\$219,999				\$8,228,123
\$220,000	\$229,999				\$6,009,663
\$230,000	\$239,999				\$7,138,611
\$240,000	\$249,999				\$6,426,827
\$250,000	\$259,999				\$6,473,667
\$260,000	\$269,999				\$4,338,541
\$270,000	\$279,999				\$4,033,841
\$280,000	\$289,999				\$3,897,469
\$290,000	\$299,999				\$6,233,046
\$300,000	\$324,999				\$8,844,635
\$325,000	\$349,999				\$9,736,908
\$350,000	\$374,999				\$8,456,054
\$375,000	\$399,999				\$9,438,613
\$400,000	\$424,999				\$7,783,692
\$425,000	\$449,999				\$5,764,378
\$450,000	\$474,999				\$7,467,887
\$475,000	\$499,999				\$7,855,997
\$500,000	\$599,999				\$15,917,972
\$600,000	\$699,999				\$14,385,736
\$700,000	\$799,999				\$6,508,704
\$800,000	\$899,999				\$8,141,710
\$900,000	\$999,999				\$7,339,902
\$1,000,000+					\$19,168,327
Total		142,336	1,239,770	\$970,714,011	\$918,256,349

PA Rate Template Part II
Rate Development and Change

Carrier Name:
 Product(s):
 Market Segment:
 Rate Effective Date:

HMCAI
 EPO
 Individual
 01/01/2025

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 EHB Claims + EHB Capitation PMPM (net of prescription drug rebates) PMPM	\$ 412.56	\$ -	<- Actual Experience PMPM should be consistent with the Index Rate for Experien
Two year trend projection Factor	1.149	1.000	
Unadjusted Projected Allowed EHB Claims PMPM	\$ 473.91	\$ -	
Single Risk Pool Adjustment Factors			
Change in Morbidity - Impact of Reinsurance Program	1.000	1.000	
Change in Morbidity - All Other	0.969		<- See URRT Instructions
Total Non-Morbidity Changes	1.033	0.000	
Change in Demographics	0.999		<- See URRT Instructions
Change in Network	1.062		
Change in Benefits	1.000		<- See URRT Instructions
Change in Other	0.974		<- See URRT Instructions
Total Adjusted Projected Allowed EHB Claims PMPM	\$ 474.44	\$ -	
Credibility Factors	100%	0%	<- See Instructions
Blended Projected EHB Claims PMPM		\$ 474.44	<- Projected Index Rate
Development of the Market-Adjusted Index Rate and Total Allowed Claims			
Adjusted Projected Allowed EHB Claims PMPM	\$ 474.44		<- Index Rate for Projection Period on URRT
Projected Paid to Allowed Ratio	0.831		
Projected Incurred EHB Claims PMPM	\$ 394.43		
Market-wide Adjustments			
Projected Incurred Risk Adjustment PMPM	\$ (65.51)		
Projected Incurred Exchange User Fees PMPM	\$ 113.83		
Projected Incurred Reinsurance Recoveries PMPM	\$ 21.31		
Market-Adjusted Projected Incurred EHB Claims PMPM	\$ 452.45		
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 544.24		<- Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM	\$ 7.01		
Catastrophic Eligibility Adjustment	0.999		
Market-Adjusted Projected Incurred Total Claims PMPM	458.0120426		
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 550.93		

Table 6. Retention

Retention Items - Express in percentages	Percentages	PMPM Amounts
Administrative Expenses	12.55%	\$65.82
General and Claims	8.08%	\$42.34
Agent/Broker Fees and Commissions	1.64%	\$8.58
Quality Improvement Initiatives	2.84%	\$14.90
Taxes and Fees	0.09%	\$0.49
Risk Adjustment User Fee	0.03%	\$0.18
PCORI Fee	0.06%	\$0.31
PA Premium & Other Taxes (if applicable)	0.00%	\$0.00
Federal Income Tax	0.00%	\$0.00
Health Insurance Providers Fee (Prorated for Small Groups only)	0.00%	\$0.00
Profit/Contingency (after tax)	0.00%	\$0.00
Total Retention	12.65%	\$66.31
Projected Required Revenue PMPM		\$ 524.32

Table 8. Components of Rate Change

Rate Components	2024	2025	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$ 294.86	\$ 322.00	\$ 27.14	9.2%
B. Base period allowed claims before normalization	\$ 387.88	\$ 412.56	\$ 24.68	8.4%
C. Normalization factor component of change	\$ (77.11)	\$ (99.79)	\$ (22.68)	-7.7%
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 310.77	\$ 312.77	\$ 2.00	0.7%
D2. URRT Trend	\$ 59.59	\$ 46.51	\$ (13.07)	-4.4%
D3. URRT Morbidity	\$ (3.49)	\$ (11.20)	\$ (7.71)	-2.6%
D4. URRT Other	\$ (13.83)	\$ 11.60	\$ 25.43	8.6%
D5. Normalized URRT Risk Adjustment on an allowed basis	\$ 56.07	\$ 59.74	\$ 3.67	1.2%
D6. Normalized Exchange User Fee on an allowed basis	\$ 12.76	\$ 12.61	\$ (0.15)	-0.1%
D7. Normalized Reinsurance Recoveries on an allowed basis	\$ (15.77)	\$ (19.44)	\$ (3.67)	-1.2%
D8. Subtotal - Sum(D1:D7)	\$ 406.10	\$ 412.59	\$ 6.49	2.2%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ (125.72)	\$ (106.63)	\$ 19.09	6.5%
E2. Pricing AV	\$ (51.77)	\$ (53.93)	\$ (2.16)	-0.7%
E3. Benefit Richness	\$ 20.88	\$ 25.09	\$ 4.21	1.4%
E4. Catastrophic Eligibility	\$ (0.16)	\$ (0.18)	\$ (0.02)	0.0%
E5. Benefits in Addition to EHB	\$ 4.33	\$ 3.45	\$ (0.89)	-0.3%
E6. Subtotal - Sum(E1:E5)	\$ (152.43)	\$ (132.19)	\$ 20.24	6.9%
F. Change in Retention Components				
F1. Administrative Expenses	\$ 41.19	\$ 40.42	\$ (0.76)	-0.3%
F2. Taxes and Fees	\$ 0.30	\$ 0.30	\$ (0.00)	0.0%
F3. Profit and/or Contingency	\$ -	\$ -	\$ -	0.0%
F4. Subtotal - Sum(F1:F3)	\$ 41.49	\$ 40.72	\$ (0.77)	-0.3%
G. Change in Miscellaneous Items	\$ (0.30)	\$ 0.87	\$ 1.17	0.4%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 294.86	\$ 322.00	\$ 27.14	9.2%

ice Period on URR1

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 412.56	<- Index Rate of Experience Period on URR1
Blended Earned Premium	\$ 107,644,031.59	
Blended Loss Ratio	83.75%	

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

Effective Date	01/01/2025	04/01/2025	07/01/2025	10/01/2025	Total Single Risk Pool
# of Member Months Renewing in Quarter					-
Adjusted Projected Allowed EHB Claims PMPM	\$ 474.44	\$ 474.44	\$ 474.44	\$ 474.44	\$ 474.44
Months of Trend	-	3	6	9	
Annual Trend	7.18%	7.18%	7.18%	7.18%	
Single Risk Pool Projected Allowed Claims	\$ 474.44	\$ 482.74	\$ 491.18	\$ 499.76	\$ -
Quarterly Trend Factor	1.000	1.017	1.035	1.053	0.000

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2024	2025
Average Age Factor	1.752	1.706
Average Geographic Factor	0.940	0.940
Average Tobacco Factor	1.007	1.006
Average Benefit Richness (induced demand)	1.090	1.103
Average Network Factor	0.690	0.742
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 515.06	\$ 550.93
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 412.67	\$ 417.67

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

	2024	2025	
Paid-to-Allowed	0.812	0.831	
URRT Trend (Total Applied Trend Factor)	1.192	1.149	<- URRT W1, S2
URRT Morbidity	0.991	0.969	<- URRT W1, S2
URRT "Other"	0.962	1.033	<- URRT W1, S2
Risk Adjustment	\$ 56.85	\$ 65.51	<- URRT W1, S3
Exchange User Fee	\$ 12.94	\$ 13.83	<- URRT W1, S3
Reinsurance Recoveries	\$ 15.99	\$ 21.31	<- URRT W1, S3
Capitation	\$ 0.66	\$ 0.75	<- URRT W1, S2
Network	0.690	0.742	
Pricing AV	0.815	0.824	<- For 2024 in cell J81, please include a factor equal to the product of the average Pricing AV and the Non-Funding of CSR Adjustment
Benefit Richness	1.091	1.100	
Catastrophic Eligibility	0.999	0.999	
Benefits in Addition to EHB	1.017	1.012	
Administrative Expenses	13.97%	12.55%	
Taxes and Fees	0.10%	0.09%	
Profit and/or Contingency	0.00%	0.00%	

02-01-2024 Number of Covered Lives by County

Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland	4	Bedford	Blair	Cambria	Clearfield	Huntingdon	Jefferson	Somerset	5	Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union	6
15756	0	0	1613	0	0	0	0	2574	3176	Match	0	0	0	0	0	0	0	Match	0	0	0	0	0	0	0	0	0	0	Match

1,056	-	-	102	-	-	-	-	176	166	Match								Match											Match
5,068	-	-	511	-	-	-	-	808	1,094	Match								Match											Match
134	-	-	15	-	-	-	-	31	24	Match								Match											Match
388	-	-	43	-	-	-	-	73	89	Match								Match											Match
2,521	-	-	241	-	-	-	-	433	520	Match								Match											Match
426	-	-	57	-	-	-	-	54	92	Match								Match											Match
229	-	-	19	-	-	-	-	44	25	Match								Match											Match
334	-	-	53	-	-	-	-	53	62	Match								Match											Match
132	-	-	9	-	-	-	-	21	17	Match								Match											Match
256	-	-	19	-	-	-	-	22	33	Match								Match											Match
67	-	-	4	-	-	-	-	8	2	Match								Match											Match
1,279	-	-	169	-	-	-	-	164	282	Match								Match											Match
2,262	-	-	187	-	-	-	-	379	423	Match								Match											Match
213	-	-	36	-	-	-	-	69	88	Match								Match											Match
-	-	-	-	-	-	-	-	-	-	Match								Match											Match
1,160	-	-	100	-	-	-	-	189	168	Match								Match											Match
231	-	-	48	-	-	-	-	50	91	Match								Match											Match
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PA Rate Template Part VI - Rate Change Summary

Table 15. Rate Change Summary Information

Overview

Initial Requested Average Rate Change:	12.96%
Revised Requested Average Rate Change:	9.21%
Minimum Requested Rate Change:	2.49%
Maximum Requested Rate Change:	10.21%
Mapped Members:	26,051
Available in Rating Areas:	Rating Areas 1 and 4

Carrier Name:	HMCAI
Product(s):	EPO
Market Segment:	Individual
Rate Effective Date:	01/01/2025

Key Information

Jan. 2023 - Dec. 2023 Financial Experience

Premium	\$	97,672,972.55
Claims	\$	81,803,185.49
Administrative Expenses	\$	17,070,054.58
Taxes & Fees	\$	2,915,799.42
Company Made After Taxes	\$	(4,116,066.94)

How It Plans to Spend Your Premium

This is how the company plans to spend the premium it collects in 2025:

Claims:	85%
Administrative Expenses:	13%
Taxes & Fees:	3%
Profit:	0%

The company expects its annual medical costs to increase: 7.18%

Explanation of requested rate change: The primary drivers of the rate increase are cost and utilization trend.

Table 16. Risk Adjustment Calculation

Component	Statewide	Insurer Specific
State Average Monthly Premium Before Adjustment		
Administrative Cost Adjustment		
State Average Monthly Premium		
Actuarial Value (AV)		
Plan Liability Risk Score (PLRS)		
Allowable Rating Factor (ARF)		
Induced Demand Factor (IDF)		
Geographic Cost Factor (GCF)		
Factors Including Risk Score		
Factors Excluding Risk Score		
Risk Adjustment Transfer PMPM		(63.45)
Insurer Specific Manual Adjustment PMPM		\$0.56
High Cost Risk Pool Adjustment PMPM		(\$2.62)
Total Risk Adjustment Transfer		(65.51)

Company Name: **Highmark Coverage Advantage**
Market: **Individual**
Product: **EPO**
Effective Date of Rates: **January 1, 2025**

Ending date of Rates: **December 31, 2025**

HIOS Plan ID (On Exchange)=>	79279PA0140003		79279PA0140003		79279PA0150003		79279PA0150003		79279PA0080008		79279PA0080008		79279PA0130005		79279PA0130005		79279PA0140001	
HIOS Plan ID (Off Exchange)=>	79279PA0140003		79279PA0140003		79279PA0150003		79279PA0150003		79279PA0080008		79279PA0080008		79279PA0130005		79279PA0130005		79279PA0140001	
Plan Marketing Name =>	Together Blue EPO Premier Platinum 0		Together Blue EPO Premier Platinum 0		Together Blue EPO Premier Platinum 0 + Adult Dental and Vision		Together Blue EPO Premier Platinum 0 + Adult Dental and Vision		Together Blue EPO Gold 0		Together Blue EPO Gold 0		Together Blue EPO Gold 0 + Adult Dental and Vision		Together Blue EPO Gold 0 + Adult Dental and Vision		Together Blue EPO Premier Gold 0	
Form # =>	TB/EPO/HCA/DP-5		TB/EPO/HCA/DP-5		TB/EPO/ADV/HCA/DP-5		TB/EPO/ADV/HCA/DP-5		TB/EPO/HCA/DP-5		TB/EPO/HCA/DP-5		TB/EPO/ADV/HCA/DP-5		TB/EPO/ADV/HCA/DP-5		TB/EPO/ADV/HCA/DP-5	
Rating Area =>	Area 1		Area 4		Area 1		Area 4		Area 1		Area 4		Area 1		Area 4		Area 1	
Network =>	L		L		L		L		L		L		L		L		L	
Metal =>	Platinum		Platinum		Platinum		Platinum		Gold		Gold		Gold		Gold		Gold	
Deductible =>	0		0		0		0		0		0		0		0		0	
Coinurance =>	90%		90%		90%		90%		70%		70%		70%		70%		80%	
Copays =>	\$0 PCP		\$0 PCP		\$0 PCP		\$0 PCP		\$20 PCP		\$20 PCP		\$20 PCP		\$20 PCP		\$15 PCP	
OOP Maximum =>	5000		5000		5000		5000		7500		7500		7500		7500		6550	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$280.09	\$280.09	\$280.09	\$280.09	\$295.47	\$295.47	\$295.47	\$295.47	\$233.36	\$233.36	\$233.36	\$233.36	\$248.75	\$248.75	\$248.75	\$248.75	\$242.25	\$242.25
15	\$304.99	\$304.99	\$304.99	\$304.99	\$321.74	\$321.74	\$321.74	\$321.74	\$254.11	\$254.11	\$254.11	\$254.11	\$270.86	\$270.86	\$270.86	\$270.86	\$263.79	\$263.79
16	\$314.51	\$314.51	\$314.51	\$314.51	\$331.78	\$331.78	\$331.78	\$331.78	\$262.04	\$262.04	\$262.04	\$262.04	\$279.31	\$279.31	\$279.31	\$279.31	\$272.02	\$272.02
17	\$324.03	\$324.03	\$324.03	\$324.03	\$341.82	\$341.82	\$341.82	\$341.82	\$269.97	\$269.97	\$269.97	\$269.97	\$287.77	\$287.77	\$287.77	\$287.77	\$280.25	\$280.25
18	\$334.28	\$334.28	\$334.28	\$334.28	\$352.64	\$352.64	\$352.64	\$352.64	\$278.51	\$278.51	\$278.51	\$278.51	\$296.87	\$296.87	\$296.87	\$296.87	\$289.12	\$289.12
19	\$344.53	\$344.53	\$344.53	\$344.53	\$363.45	\$363.45	\$363.45	\$363.45	\$287.05	\$287.05	\$287.05	\$287.05	\$305.98	\$305.98	\$305.98	\$305.98	\$297.99	\$297.99
20	\$355.15	\$355.15	\$355.15	\$355.15	\$374.65	\$374.65	\$374.65	\$374.65	\$295.90	\$295.90	\$295.90	\$295.90	\$315.41	\$315.41	\$315.41	\$315.41	\$307.17	\$307.17
21	\$366.13	\$375.28	\$366.13	\$375.28	\$386.24	\$395.90	\$386.24	\$395.90	\$305.05	\$312.68	\$305.05	\$312.68	\$325.16	\$333.29	\$325.16	\$333.29	\$316.67	\$324.59
22	\$366.13	\$375.28	\$366.13	\$375.28	\$386.24	\$395.90	\$386.24	\$395.90	\$305.05	\$312.68	\$305.05	\$312.68	\$325.16	\$333.29	\$325.16	\$333.29	\$316.67	\$324.59
23	\$366.13	\$375.28	\$366.13	\$375.28	\$386.24	\$395.90	\$386.24	\$395.90	\$305.05	\$312.68	\$305.05	\$312.68	\$325.16	\$333.29	\$325.16	\$333.29	\$316.67	\$324.59
24	\$366.13	\$375.28	\$366.13	\$375.28	\$386.24	\$395.90	\$386.24	\$395.90	\$305.05	\$312.68	\$305.05	\$312.68	\$325.16	\$333.29	\$325.16	\$333.29	\$316.67	\$324.59
25	\$367.59	\$376.78	\$367.59	\$376.78	\$387.78	\$397.47	\$387.78	\$397.47	\$306.27	\$313.93	\$306.27	\$313.93	\$326.46	\$334.62	\$326.46	\$334.62	\$317.94	\$325.89
26	\$374.92	\$384.29	\$374.92	\$384.29	\$395.51	\$405.40	\$395.51	\$405.40	\$312.37	\$320.18	\$312.37	\$320.18	\$332.96	\$341.28	\$332.96	\$341.28	\$324.27	\$332.38
27	\$383.70	\$393.29	\$383.70	\$393.29	\$404.78	\$414.90	\$404.78	\$414.90	\$319.69	\$327.68	\$319.69	\$327.68	\$340.77	\$349.29	\$340.77	\$349.29	\$331.87	\$340.17
28	\$397.98	\$407.93	\$397.98	\$407.93	\$419.84	\$430.34	\$419.84	\$430.34	\$331.59	\$339.88	\$331.59	\$339.88	\$353.45	\$362.29	\$353.45	\$362.29	\$344.22	\$352.83
29	\$409.70	\$419.94	\$409.70	\$419.94	\$432.20	\$443.01	\$432.20	\$443.01	\$341.35	\$349.88	\$341.35	\$349.88	\$363.85	\$372.95	\$363.85	\$372.95	\$354.35	\$363.21
30	\$415.56	\$425.95	\$415.56	\$425.95	\$438.38	\$449.34	\$438.38	\$449.34	\$346.23	\$354.89	\$346.23	\$354.89	\$369.06	\$378.29	\$369.06	\$378.29	\$359.42	\$368.41
31	\$424.34	\$434.95	\$424.34	\$434.95	\$447.65	\$458.84	\$447.65	\$458.84	\$353.55	\$362.39	\$353.55	\$362.39	\$376.86	\$386.28	\$376.86	\$386.28	\$367.02	\$376.20
32	\$433.13	\$443.96	\$433.13	\$443.96	\$456.92	\$468.34	\$456.92	\$468.34	\$360.87	\$369.89	\$360.87	\$369.89	\$384.66	\$394.28	\$384.66	\$394.28	\$374.62	\$383.99
33	\$438.62	\$449.59	\$438.62	\$449.59	\$462.72	\$474.29	\$462.72	\$474.29	\$366.45	\$374.59	\$366.45	\$374.59	\$389.54	\$399.28	\$389.54	\$399.28	\$379.37	\$388.85
34	\$444.48	\$455.59	\$444.48	\$455.59	\$468.90	\$480.62	\$468.90	\$480.62	\$370.33	\$379.59	\$370.33	\$379.59	\$394.74	\$404.61	\$394.74	\$404.61	\$384.44	\$394.05
35	\$447.41	\$458.60	\$447.41	\$458.60	\$471.99	\$483.79	\$471.99	\$483.79	\$372.77	\$382.09	\$372.77	\$382.09	\$397.35	\$407.28	\$397.35	\$407.28	\$386.97	\$396.64
36	\$450.34	\$461.60	\$450.34	\$461.60	\$475.08	\$486.96	\$475.08	\$486.96	\$375.21	\$384.59	\$375.21	\$384.59	\$399.95	\$409.95	\$399.95	\$409.95	\$389.50	\$399.24
37	\$453.27	\$464.60	\$453.27	\$464.60	\$478.17	\$490.12	\$478.17	\$490.12	\$377.65	\$387.09	\$377.65	\$387.09	\$402.55	\$412.61	\$402.55	\$412.61	\$392.04	\$401.84
38	\$456.20	\$467.61	\$456.20	\$467.61	\$481.26	\$493.29	\$481.26	\$493.29	\$380.09	\$389.59	\$380.09	\$389.59	\$405.15	\$415.28	\$405.15	\$415.28	\$394.57	\$404.43
39	\$462.06	\$473.61	\$462.06	\$473.61	\$487.43	\$499.62	\$487.43	\$499.62	\$384.97	\$394.59	\$384.97	\$394.59	\$410.35	\$420.61	\$410.35	\$420.61	\$399.64	\$409.63
40	\$467.91	\$514.70	\$467.91	\$514.70	\$493.61	\$542.97	\$493.61	\$542.97	\$389.85	\$428.84	\$389.85	\$428.84	\$415.55	\$457.11	\$415.55	\$457.11	\$404.70	\$445.17
41	\$476.70	\$526.75	\$476.70	\$526.75	\$502.88	\$555.68	\$502.88	\$555.68	\$397.18	\$438.88	\$397.18	\$438.88	\$423.36	\$467.81	\$423.36	\$467.81	\$412.30	\$455.59
42	\$485.12	\$539.45	\$485.12	\$539.45	\$511.77	\$569.09	\$511.77	\$569.09	\$404.19	\$449.46	\$404.19	\$449.46	\$430.84	\$479.09	\$430.84	\$479.09	\$419.59	\$466.58
43	\$496.84	\$556.96	\$496.84	\$556.96	\$524.13	\$587.55	\$524.13	\$587.55	\$413.95	\$464.04	\$413.95	\$464.04	\$441.24	\$494.63	\$441.24	\$494.63	\$429.72	\$481.72
44	\$511.48	\$579.00	\$511.48	\$579.00	\$539.58	\$610.80	\$539.58	\$610.80	\$426.15	\$482.40	\$426.15	\$482.40	\$454.25	\$514.21	\$454.25	\$514.21	\$442.39	\$500.79
45	\$528.69	\$605.35	\$528.69	\$605.35	\$557.73	\$638.60	\$557.73	\$638.60	\$440.49	\$504.36	\$440.49	\$504.36	\$469.53	\$537.61	\$469.53	\$537.61	\$457.27	\$523.57
46	\$549.20	\$637.07	\$549.20	\$637.07	\$579.36	\$672.06	\$579.36	\$672.06	\$457.58	\$530.79	\$457.58	\$530.79	\$487.74	\$565.78	\$487.74	\$565.78	\$475.01	\$551.01
47	\$572.26	\$673.55	\$572.26	\$673.55	\$603.69	\$710.54	\$603.69	\$710.54	\$476.79	\$561.18	\$476.79	\$561.18	\$508.23	\$598.19	\$508.23	\$598.19	\$494.96	\$582.57
48	\$598.62	\$715.95	\$598.62	\$715.95	\$631.50	\$755.27	\$631.50	\$755.27	\$498.76	\$596.52	\$498.76	\$596.52	\$531.64	\$635.84	\$531.64	\$635.84	\$517.76	\$619.24
49	\$624.62	\$760.16	\$624.62	\$760.16	\$658.93	\$801.92	\$658.93	\$801.92	\$520.42	\$633.35	\$520.42	\$633.35	\$554.72	\$675.09	\$554.72	\$675.09	\$540.24	\$657.47
50	\$653.91	\$801.04	\$653.91	\$801.04	\$689.82	\$845.03	\$689.82	\$845.03	\$544.82	\$667.40	\$544.82	\$667.40	\$580.74	\$711.41	\$580.74	\$711.41	\$565.57	\$692.82
51	\$682.83	\$836.47	\$682.83	\$836.47	\$720.34	\$882.42	\$720.34	\$882.42	\$568.92	\$696.93	\$568.92	\$696.93	\$606.42	\$742.86	\$606.42	\$742.86	\$590.59	\$723.47
52	\$714.69	\$875.50	\$714.69	\$875.50	\$753.94	\$923.58	\$753.94	\$923.58	\$595.46	\$729.44	\$595.46	\$729.44	\$634.71	\$777.52	\$634.71	\$777.52	\$618.14	\$757.22
53	\$746.91	\$914.96	\$746.91	\$914.96	\$787.93	\$965.21	\$787.93	\$965.21	\$622.30	\$762.32	\$622.30	\$762.32	\$663.33	\$812.58	\$663.33	\$812.58	\$646.01	\$791.36
54	\$781.69	\$957.57	\$781.69	\$957.57	\$824.62	\$1,010.16	\$824.62	\$1,010.16	\$651.28	\$797.82	\$651.28	\$797.82	\$694.22	\$850.42	\$694.22	\$850.42	\$676.09	\$828.21
55	\$816.47	\$1,000.18	\$816.47	\$1,000.18	\$861.32	\$1,055.12	\$861.32	\$1,055.12	\$680.26	\$833.32	\$680.26	\$833.32	\$725.11	\$888.26	\$725.11	\$888.26	\$706.17	\$865.06
56	\$854.18	\$1,046.37	\$854.18	\$1,046.37	\$901.10	\$1,103.85	\$901.10	\$1,103.85	\$711.68	\$871.81	\$711.68	\$871.81	\$758.60	\$929.29	\$758.60	\$929.29	\$738.79	\$905.02
57	\$892.26	\$1,093.02	\$892.26	\$1,093.02	\$941.27	\$1,153.06	\$941.27	\$1,153.06	\$743.41	\$910.68	\$743.41	\$910.68	\$792.41	\$970.70	\$792.41	\$970.70	\$771.72	\$945.36
58	\$932.90	\$1,142.80	\$932.90	\$1,142.80	\$984.14	\$1,205.57	\$984.14	\$1,205.57	\$777.27	\$952.16	\$777.27	\$952.16	\$828.51	\$1,014.92	\$828.51	\$1,014.92	\$806.88	\$988.43
59	\$953.04	\$1,167.47	\$953.04	\$1,167.47	\$1,005.38	\$1,231.59	\$1,005.38	\$1,231.59	\$794.05	\$972.71	\$794.05	\$972.71	\$846.39	\$1,036.83	\$846.39	\$1,036.83	\$824.29	\$1,009.76
60	\$993.68	\$1,217.26	\$993.68	\$1,217.26	\$1,048.26	\$1,284.12	\$1,048.26	\$1,284.12	\$827.91	\$1,014.19	\$827.91	\$1,014.19	\$882.48	\$1,081.04	\$882.48	\$1,081.04	\$859.44	\$1,052.81
61	\$1,028.83	\$1,260.32	\$1,028.83	\$1,260.32	\$1,085.33	\$1,329.53	\$1,085.33	\$1,329.53	\$857.19	\$1,050.06	\$857.19	\$1,050.06	\$913.70	\$1,119.28	\$913.70	\$1,119.28	\$889.84	\$1,090.05
62	\$1,051.89	\$1,288.57	\$1,051.89	\$1,288.57														

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

HIOS Plan ID (On Exchange)=>	79279PA0140001		79279PA0150001		79279PA0150001		79279PA0090004		79279PA0090004		79279PA0080013		79279PA0080013		79279PA0140002		79279PA0140002	
HIOS Plan ID (Off Exchange)=>	79279PA0140001		79279PA0150001		79279PA0150001		79279PA0090004		79279PA0090004		79279PA0080013		79279PA0080013		79279PA0140002		79279PA0140002	
Plan Marketing Name =>	Together Blue EPO Premier Gold 0		Together Blue EPO Premier Gold 0 + Adult Dental and Vision		Together Blue EPO Premier Gold 0 + Adult Dental and Vision		Together Blue EPO Gold 1700 HSA		Together Blue EPO Gold 1700 HSA		Together Blue Virtual Choice EPO Gold 1500		Together Blue Virtual Choice EPO Gold 1500		Together Blue EPO Premier Silver 0		Together Blue EPO Premier Silver 0	
Form # =>	TB/EPO/Premier/HCA/DP-3		B/EPO/Premier/ADV/HCA/DP-3		B/EPO/Premier/ADV/HCA/DP-3		TB/EPO/HDHP/HCA/DP-5		TB/EPO/HDHP/HCA/DP-5		TB/EPO/HCA/DP-5		TB/EPO/HCA/DP-5		TB/EPO/Premier/HCA/DP-3		TB/EPO/Premier/HCA/DP-3	
Rating Area =>	Area 4		Area 1		Area 4		Area 1		Area 4		Area 1		Area 4		Area 1		Area 4	
Network =>	L		L		L		L		L		L		L		L		L	
Metal =>	Gold		Gold		Gold		Gold		Gold		Gold		Gold		Silver		Silver	
Deductible =>	0		0		0		1700		1700		1500		1500		0		0	
Coinsurance =>	80%		80%		80%		80%		80%		70%		70%		70%		70%	
Copays =>	\$15 PCP		\$15 PCP		\$15 PCP		\$20 after Ded. PCP		\$20 after Ded. PCP		\$35 PCP		\$35 PCP		\$70 PCP		\$70 PCP	
OOP Maximum =>	6550		6550		6550		5700		5700		8300		8300		8350		8350	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$242.25	\$242.25	\$257.64	\$257.64	\$257.64	\$257.64	\$213.77	\$213.77	\$213.77	\$213.77	\$216.04	\$216.04	\$216.04	\$216.04	\$264.97	\$264.97	\$264.97	\$264.97
15	\$263.79	\$263.79	\$280.54	\$280.54	\$280.54	\$280.54	\$232.77	\$232.77	\$232.77	\$232.77	\$235.25	\$235.25	\$235.25	\$235.25	\$288.52	\$288.52	\$288.52	\$288.52
16	\$272.02	\$272.02	\$289.29	\$289.29	\$289.29	\$289.29	\$240.04	\$240.04	\$240.04	\$240.04	\$242.59	\$242.59	\$242.59	\$242.59	\$297.52	\$297.52	\$297.52	\$297.52
17	\$280.25	\$280.25	\$298.05	\$298.05	\$298.05	\$298.05	\$247.30	\$247.30	\$247.30	\$247.30	\$249.93	\$249.93	\$249.93	\$249.93	\$306.53	\$306.53	\$306.53	\$306.53
18	\$289.12	\$289.12	\$307.48	\$307.48	\$307.48	\$307.48	\$255.13	\$255.13	\$255.13	\$255.13	\$257.84	\$257.84	\$257.84	\$257.84	\$316.23	\$316.23	\$316.23	\$316.23
19	\$297.99	\$297.99	\$316.91	\$316.91	\$316.91	\$316.91	\$262.95	\$262.95	\$262.95	\$262.95	\$265.75	\$265.75	\$265.75	\$265.75	\$325.92	\$325.92	\$325.92	\$325.92
20	\$307.17	\$307.17	\$326.68	\$326.68	\$326.68	\$326.68	\$271.06	\$271.06	\$271.06	\$271.06	\$273.94	\$273.94	\$273.94	\$273.94	\$335.97	\$335.97	\$335.97	\$335.97
21	\$316.67	\$316.67	\$336.78	\$336.78	\$336.78	\$336.78	\$279.44	\$279.44	\$279.44	\$279.44	\$282.41	\$282.41	\$282.41	\$282.41	\$346.36	\$346.36	\$346.36	\$346.36
22	\$316.67	\$316.67	\$336.78	\$336.78	\$336.78	\$336.78	\$279.44	\$279.44	\$279.44	\$279.44	\$282.41	\$282.41	\$282.41	\$282.41	\$346.36	\$346.36	\$346.36	\$346.36
23	\$316.67	\$316.67	\$336.78	\$336.78	\$336.78	\$336.78	\$279.44	\$279.44	\$279.44	\$279.44	\$282.41	\$282.41	\$282.41	\$282.41	\$346.36	\$346.36	\$346.36	\$346.36
24	\$316.67	\$316.67	\$336.78	\$336.78	\$336.78	\$336.78	\$279.44	\$279.44	\$279.44	\$279.44	\$282.41	\$282.41	\$282.41	\$282.41	\$346.36	\$346.36	\$346.36	\$346.36
25	\$317.94	\$317.94	\$338.13	\$338.13	\$338.13	\$338.13	\$280.56	\$280.56	\$280.56	\$280.56	\$283.54	\$283.54	\$283.54	\$283.54	\$347.75	\$347.75	\$347.75	\$347.75
26	\$324.27	\$324.27	\$344.86	\$344.86	\$344.86	\$344.86	\$286.15	\$286.15	\$286.15	\$286.15	\$289.19	\$289.19	\$289.19	\$289.19	\$354.67	\$354.67	\$354.67	\$354.67
27	\$331.87	\$331.87	\$352.95	\$352.95	\$352.95	\$352.95	\$292.85	\$292.85	\$292.85	\$292.85	\$295.97	\$295.97	\$295.97	\$295.97	\$362.99	\$362.99	\$362.99	\$362.99
28	\$344.22	\$344.22	\$366.08	\$366.08	\$366.08	\$366.08	\$303.75	\$303.75	\$303.75	\$303.75	\$306.98	\$306.98	\$306.98	\$306.98	\$376.49	\$376.49	\$376.49	\$376.49
29	\$354.35	\$354.35	\$376.86	\$376.86	\$376.86	\$376.86	\$312.69	\$312.69	\$312.69	\$312.69	\$316.02	\$316.02	\$316.02	\$316.02	\$387.58	\$387.58	\$387.58	\$387.58
30	\$359.42	\$359.42	\$382.25	\$382.25	\$382.25	\$382.25	\$317.16	\$317.16	\$317.16	\$317.16	\$320.54	\$320.54	\$320.54	\$320.54	\$393.12	\$393.12	\$393.12	\$393.12
31	\$367.02	\$367.02	\$390.33	\$390.33	\$390.33	\$390.33	\$323.87	\$323.87	\$323.87	\$323.87	\$327.31	\$327.31	\$327.31	\$327.31	\$401.43	\$401.43	\$401.43	\$401.43
32	\$374.62	\$374.62	\$398.41	\$398.41	\$398.41	\$398.41	\$330.58	\$330.58	\$330.58	\$330.58	\$334.09	\$334.09	\$334.09	\$334.09	\$409.74	\$409.74	\$409.74	\$409.74
33	\$379.37	\$379.37	\$403.46	\$403.46	\$403.46	\$403.46	\$334.77	\$334.77	\$334.77	\$334.77	\$338.33	\$338.33	\$338.33	\$338.33	\$414.94	\$414.94	\$414.94	\$414.94
34	\$384.44	\$384.44	\$408.85	\$408.85	\$408.85	\$408.85	\$339.24	\$339.24	\$339.24	\$339.24	\$342.85	\$342.85	\$342.85	\$342.85	\$420.48	\$420.48	\$420.48	\$420.48
35	\$386.97	\$386.97	\$411.55	\$411.55	\$411.55	\$411.55	\$341.48	\$341.48	\$341.48	\$341.48	\$345.11	\$345.11	\$345.11	\$345.11	\$423.25	\$423.25	\$423.25	\$423.25
36	\$389.50	\$389.50	\$414.24	\$414.24	\$414.24	\$414.24	\$343.71	\$343.71	\$343.71	\$343.71	\$347.36	\$347.36	\$347.36	\$347.36	\$426.02	\$426.02	\$426.02	\$426.02
37	\$392.04	\$392.04	\$416.93	\$416.93	\$416.93	\$416.93	\$345.95	\$345.95	\$345.95	\$345.95	\$349.62	\$349.62	\$349.62	\$349.62	\$428.79	\$428.79	\$428.79	\$428.79
38	\$394.57	\$394.57	\$419.63	\$419.63	\$419.63	\$419.63	\$348.18	\$348.18	\$348.18	\$348.18	\$352.88	\$352.88	\$352.88	\$352.88	\$431.56	\$431.56	\$431.56	\$431.56
39	\$399.64	\$399.64	\$425.02	\$425.02	\$425.02	\$425.02	\$352.65	\$352.65	\$352.65	\$352.65	\$356.40	\$356.40	\$356.40	\$356.40	\$434.71	\$434.71	\$434.71	\$434.71
40	\$404.70	\$404.70	\$430.40	\$430.40	\$430.40	\$430.40	\$357.12	\$357.12	\$357.12	\$357.12	\$360.92	\$360.92	\$360.92	\$360.92	\$437.11	\$437.11	\$437.11	\$437.11
41	\$412.30	\$412.30	\$438.49	\$438.49	\$438.49	\$438.49	\$363.83	\$363.83	\$363.83	\$363.83	\$367.70	\$367.70	\$367.70	\$367.70	\$440.94	\$440.94	\$440.94	\$440.94
42	\$419.59	\$419.59	\$446.58	\$446.58	\$446.58	\$446.58	\$370.26	\$370.26	\$370.26	\$370.26	\$374.19	\$374.19	\$374.19	\$374.19	\$444.65	\$444.65	\$444.65	\$444.65
43	\$429.72	\$429.72	\$457.01	\$457.01	\$457.01	\$457.01	\$379.20	\$379.20	\$379.20	\$379.20	\$383.23	\$383.23	\$383.23	\$383.23	\$448.46	\$448.46	\$448.46	\$448.46
44	\$442.39	\$442.39	\$470.48	\$470.48	\$470.48	\$470.48	\$390.38	\$390.38	\$390.38	\$390.38	\$394.53	\$394.53	\$394.53	\$394.53	\$452.25	\$452.25	\$452.25	\$452.25
45	\$457.27	\$457.27	\$486.31	\$486.31	\$486.31	\$486.31	\$403.51	\$403.51	\$403.51	\$403.51	\$407.80	\$407.80	\$407.80	\$407.80	\$456.06	\$456.06	\$456.06	\$456.06
46	\$475.01	\$475.01	\$505.17	\$505.17	\$505.17	\$505.17	\$419.16	\$419.16	\$419.16	\$419.16	\$423.62	\$423.62	\$423.62	\$423.62	\$459.85	\$459.85	\$459.85	\$459.85
47	\$494.96	\$494.96	\$526.39	\$526.39	\$526.39	\$526.39	\$436.76	\$436.76	\$436.76	\$436.76	\$441.41	\$441.41	\$441.41	\$441.41	\$463.67	\$463.67	\$463.67	\$463.67
48	\$517.76	\$517.76	\$550.64	\$550.64	\$550.64	\$550.64	\$456.88	\$456.88	\$456.88	\$456.88	\$461.74	\$461.74	\$461.74	\$461.74	\$467.29	\$467.29	\$467.29	\$467.29
49	\$540.24	\$540.24	\$574.55	\$574.55	\$574.55	\$574.55	\$476.72	\$476.72	\$476.72	\$476.72	\$481.79	\$481.79	\$481.79	\$481.79	\$487.11	\$487.11	\$487.11	\$487.11
50	\$565.57	\$565.57	\$601.49	\$601.49	\$601.49	\$601.49	\$499.08	\$499.08	\$499.08	\$499.08	\$504.38	\$504.38	\$504.38	\$504.38	\$510.44	\$510.44	\$510.44	\$510.44
51	\$590.59	\$590.59	\$628.09	\$628.09	\$628.09	\$628.09	\$521.16	\$521.16	\$521.16	\$521.16	\$526.69	\$526.69	\$526.69	\$526.69	\$532.50	\$532.50	\$532.50	\$532.50
52	\$618.14	\$618.14	\$657.39	\$657.39	\$657.39	\$657.39	\$545.47	\$545.47	\$545.47	\$545.47	\$551.26	\$551.26	\$551.26	\$551.26	\$557.29	\$557.29	\$557.29	\$557.29
53	\$646.01	\$646.01	\$687.03	\$687.03	\$687.03	\$687.03	\$570.06	\$570.06	\$570.06	\$570.06	\$576.12	\$576.12	\$576.12	\$576.12	\$582.31	\$582.31	\$582.31	\$582.31
54	\$676.09	\$676.09	\$719.03	\$719.03	\$719.03	\$719.03	\$596.60	\$596.60	\$596.60	\$596.60	\$602.95	\$602.95	\$602.95	\$602.95	\$609.36	\$609.36	\$609.36	\$609.36
55	\$706.17	\$706.17	\$751.02	\$751.02	\$751.02	\$751.02	\$623.15	\$623.15	\$623.15	\$623.15	\$630.77	\$630.77	\$630.77	\$630.77	\$637.54	\$637.54	\$637.54	\$637.54
56	\$738.79	\$738.79	\$785.71	\$785.71	\$785.71	\$785.71	\$651.93	\$651.93	\$651.93	\$651.93	\$659.81	\$659.81	\$659.81	\$659.81	\$667.84	\$667.84	\$667.84	\$667.84
57	\$771.72	\$771.72	\$820.73	\$820.73	\$820.73	\$820.73	\$681.00	\$681.00	\$681.00	\$681.00	\$689.23	\$689.23	\$689.23	\$689.23	\$697.52	\$697.52	\$697.52	\$697.52
58	\$806.88	\$806.88	\$858.12	\$858.12	\$858.12	\$858.12	\$712.01	\$712.01	\$712.01	\$712.01	\$720.58	\$720.58	\$720.58	\$720.58	\$729.31	\$729.31	\$729.31	\$729.31
59	\$824.29	\$824.29	\$876.64	\$876.64	\$876.64	\$876.64	\$727.38	\$727.38	\$727.38	\$727.38	\$736.31	\$736.31	\$736.31	\$736.31	\$745.40	\$745.40	\$745.40	\$745.40
60	\$859.44	\$859.44	\$914.02	\$914.02	\$914.02	\$914.02	\$758.40	\$758.40	\$758.40	\$758.40	\$767.64	\$767.64	\$767.64	\$767.64	\$777.04	\$777.04	\$777.04	\$777.04
61	\$889.84	\$889.84	\$946.35	\$946.35	\$946.35	\$946.35	\$785.23	\$785.23	\$785.23	\$785.23	\$794.77	\$794.77	\$794.77	\$794.77	\$804.46	\$804.46	\$804.46	\$804.46
62	\$909.79	\$909.79	\$967.57	\$967.57	\$967.57	\$967.57	\$802.83	\$802.83	\$802.83	\$802.83	\$812.67	\$812.67	\$812.67	\$812.67	\$822.66	\$822.66	\$822.66	\$822.66
63	\$934																	

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

HIOS Plan ID (On Exchange)=>	79279PA0150002		79279PA0150002		79279PA0080012		79279PA0080012		N/A		N/A		N/A		N/A		79279PA0080001	
HIOS Plan ID (Off Exchange)=>	79279PA0150002		79279PA0150002		79279PA0080012		79279PA0080012		79279PA0080010		79279PA0080010		79279PA0130004		79279PA0130004		79279PA0080001	
Plan Marketing Name =>	Together Blue EPO Premier Silver 0 + Adult Dental and Vision		Together Blue EPO Premier Silver 0 + Adult Dental and Vision		Together Blue EPO Silver 7000		Together Blue EPO Silver 7000		Together Blue EPO Silver 3500		Together Blue EPO Silver 3500		Together Blue EPO Silver 3500 + Adult Dental and Vision		Together Blue EPO Silver 3500 + Adult Dental and Vision		Together Blue EPO Bronze 3800	
Form # =>	B/EPO/Premier/ADV/HCA/DP-		B/EPO/Premier/ADV/HCA/DP-		TB/EPO/HCA/DP-5		TB/EPO/HCA/DP-5		TB/EPO/HCA/DP-5		TB/EPO/HCA/DP-5		TB/EPO/ADV/HCA/DP-5		TB/EPO/ADV/HCA/DP-5		TB/EPO/HCA/DP-5	
Rating Area =>	Area 1		Area 4		Area 1		Area 4		Area 1		Area 4		Area 1		Area 4		Area 1	
Network =>	L		L		L		L		L		L		L		L		L	
Metal =>	Silver		Silver		Silver		Silver		Silver		Silver		Silver		Silver		Bronze	
Deductible =>	0		0		7000		7000		3500		3500		3500		3500		3800	
Coinurance =>	70%		70%		70%		70%		70%		70%		70%		70%		50%	
Copays =>	\$70 PCP		\$70 PCP		\$70 PCP		\$70 PCP		\$50 PCP		\$50 PCP		\$50 PCP		\$50 PCP		\$65 PCP	
OOP Maximum =>	8350		8350		9200		9200		9200		9200		9200		9200		9200	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$280.35	\$280.35	\$280.35	\$280.35	\$246.31	\$246.31	\$246.31	\$246.31	\$183.78	\$183.78	\$183.78	\$183.78	\$199.16	\$199.16	\$199.16	\$199.16	\$173.99	\$173.99
15	\$305.27	\$305.27	\$305.27	\$305.27	\$268.21	\$268.21	\$268.21	\$268.21	\$200.11	\$200.11	\$200.11	\$200.11	\$216.86	\$216.86	\$216.86	\$216.86	\$189.46	\$189.46
16	\$314.80	\$314.80	\$314.80	\$314.80	\$276.58	\$276.58	\$276.58	\$276.58	\$206.36	\$206.36	\$206.36	\$206.36	\$223.63	\$223.63	\$223.63	\$223.63	\$195.37	\$195.37
17	\$324.33	\$324.33	\$324.33	\$324.33	\$284.95	\$284.95	\$284.95	\$284.95	\$212.60	\$212.60	\$212.60	\$212.60	\$230.40	\$230.40	\$230.40	\$230.40	\$201.28	\$201.28
18	\$334.59	\$334.59	\$334.59	\$334.59	\$293.97	\$293.97	\$293.97	\$293.97	\$219.33	\$219.33	\$219.33	\$219.33	\$237.69	\$237.69	\$237.69	\$237.69	\$207.65	\$207.65
19	\$344.85	\$344.85	\$344.85	\$344.85	\$302.98	\$302.98	\$302.98	\$302.98	\$226.06	\$226.06	\$226.06	\$226.06	\$244.98	\$244.98	\$244.98	\$244.98	\$214.02	\$214.02
20	\$355.48	\$355.48	\$355.48	\$355.48	\$312.32	\$312.32	\$312.32	\$312.32	\$233.02	\$233.02	\$233.02	\$233.02	\$252.53	\$252.53	\$252.53	\$252.53	\$220.62	\$220.62
21	\$366.47	\$366.47	\$366.47	\$366.47	\$321.98	\$321.98	\$321.98	\$321.98	\$240.23	\$240.23	\$240.23	\$240.23	\$260.34	\$260.34	\$260.34	\$260.34	\$227.44	\$227.44
22	\$375.63	\$375.63	\$375.63	\$375.63	\$330.03	\$330.03	\$330.03	\$330.03	\$246.24	\$246.24	\$246.24	\$246.24	\$266.85	\$266.85	\$266.85	\$266.85	\$233.13	\$233.13
23	\$386.47	\$386.47	\$386.47	\$386.47	\$337.63	\$337.63	\$337.63	\$337.63	\$252.44	\$252.44	\$252.44	\$252.44	\$273.25	\$273.25	\$273.25	\$273.25	\$239.02	\$239.02
24	\$397.14	\$397.14	\$397.14	\$397.14	\$345.88	\$345.88	\$345.88	\$345.88	\$260.36	\$260.36	\$260.36	\$260.36	\$281.99	\$281.99	\$281.99	\$281.99	\$245.99	\$245.99
25	\$407.85	\$407.85	\$407.85	\$407.85	\$354.33	\$354.33	\$354.33	\$354.33	\$269.09	\$269.09	\$269.09	\$269.09	\$291.32	\$291.32	\$291.32	\$291.32	\$253.13	\$253.13
26	\$418.59	\$418.59	\$418.59	\$418.59	\$363.03	\$363.03	\$363.03	\$363.03	\$277.84	\$277.84	\$277.84	\$277.84	\$299.99	\$299.99	\$299.99	\$299.99	\$260.27	\$260.27
27	\$429.36	\$429.36	\$429.36	\$429.36	\$371.98	\$371.98	\$371.98	\$371.98	\$286.74	\$286.74	\$286.74	\$286.74	\$309.27	\$309.27	\$309.27	\$309.27	\$267.44	\$267.44
28	\$440.15	\$440.15	\$440.15	\$440.15	\$380.67	\$380.67	\$380.67	\$380.67	\$295.74	\$295.74	\$295.74	\$295.74	\$318.89	\$318.89	\$318.89	\$318.89	\$274.79	\$274.79
29	\$450.96	\$450.96	\$450.96	\$450.96	\$389.99	\$389.99	\$389.99	\$389.99	\$304.99	\$304.99	\$304.99	\$304.99	\$328.49	\$328.49	\$328.49	\$328.49	\$282.19	\$282.19
30	\$461.80	\$461.80	\$461.80	\$461.80	\$399.99	\$399.99	\$399.99	\$399.99	\$314.49	\$314.49	\$314.49	\$314.49	\$337.99	\$337.99	\$337.99	\$337.99	\$289.69	\$289.69
31	\$472.67	\$472.67	\$472.67	\$472.67	\$410.19	\$410.19	\$410.19	\$410.19	\$324.33	\$324.33	\$324.33	\$324.33	\$347.69	\$347.69	\$347.69	\$347.69	\$297.19	\$297.19
32	\$483.57	\$483.57	\$483.57	\$483.57	\$420.74	\$420.74	\$420.74	\$420.74	\$334.44	\$334.44	\$334.44	\$334.44	\$357.49	\$357.49	\$357.49	\$357.49	\$304.69	\$304.69
33	\$494.50	\$494.50	\$494.50	\$494.50	\$431.54	\$431.54	\$431.54	\$431.54	\$344.99	\$344.99	\$344.99	\$344.99	\$367.49	\$367.49	\$367.49	\$367.49	\$312.19	\$312.19
34	\$505.46	\$505.46	\$505.46	\$505.46	\$442.59	\$442.59	\$442.59	\$442.59	\$355.74	\$355.74	\$355.74	\$355.74	\$377.69	\$377.69	\$377.69	\$377.69	\$319.69	\$319.69
35	\$516.45	\$516.45	\$516.45	\$516.45	\$453.88	\$453.88	\$453.88	\$453.88	\$366.74	\$366.74	\$366.74	\$366.74	\$387.99	\$387.99	\$387.99	\$387.99	\$327.19	\$327.19
36	\$527.47	\$527.47	\$527.47	\$527.47	\$465.41	\$465.41	\$465.41	\$465.41	\$377.99	\$377.99	\$377.99	\$377.99	\$399.27	\$399.27	\$399.27	\$399.27	\$334.69	\$334.69
37	\$538.52	\$538.52	\$538.52	\$538.52	\$477.14	\$477.14	\$477.14	\$477.14	\$389.49	\$389.49	\$389.49	\$389.49	\$410.99	\$410.99	\$410.99	\$410.99	\$342.19	\$342.19
38	\$549.60	\$549.60	\$549.60	\$549.60	\$488.99	\$488.99	\$488.99	\$488.99	\$401.33	\$401.33	\$401.33	\$401.33	\$422.99	\$422.99	\$422.99	\$422.99	\$349.69	\$349.69
39	\$560.71	\$560.71	\$560.71	\$560.71	\$500.74	\$500.74	\$500.74	\$500.74	\$412.99	\$412.99	\$412.99	\$412.99	\$434.99	\$434.99	\$434.99	\$434.99	\$357.19	\$357.19
40	\$571.85	\$571.85	\$571.85	\$571.85	\$513.03	\$513.03	\$513.03	\$513.03	\$424.99	\$424.99	\$424.99	\$424.99	\$447.49	\$447.49	\$447.49	\$447.49	\$364.69	\$364.69
41	\$583.09	\$583.09	\$583.09	\$583.09	\$525.96	\$525.96	\$525.96	\$525.96	\$437.49	\$437.49	\$437.49	\$437.49	\$460.49	\$460.49	\$460.49	\$460.49	\$372.19	\$372.19
42	\$594.44	\$594.44	\$594.44	\$594.44	\$539.19	\$539.19	\$539.19	\$539.19	\$450.74	\$450.74	\$450.74	\$450.74	\$473.99	\$473.99	\$473.99	\$473.99	\$379.69	\$379.69
43	\$605.90	\$605.90	\$605.90	\$605.90	\$553.33	\$553.33	\$553.33	\$553.33	\$464.49	\$464.49	\$464.49	\$464.49	\$487.99	\$487.99	\$487.99	\$487.99	\$387.19	\$387.19
44	\$617.47	\$617.47	\$617.47	\$617.47	\$568.41	\$568.41	\$568.41	\$568.41	\$479.49	\$479.49	\$479.49	\$479.49	\$501.99	\$501.99	\$501.99	\$501.99	\$394.69	\$394.69
45	\$629.05	\$629.05	\$629.05	\$629.05	\$584.44	\$584.44	\$584.44	\$584.44	\$494.99	\$494.99	\$494.99	\$494.99	\$516.99	\$516.99	\$516.99	\$516.99	\$402.19	\$402.19
46	\$640.74	\$640.74	\$640.74	\$640.74	\$601.44	\$601.44	\$601.44	\$601.44	\$511.49	\$511.49	\$511.49	\$511.49	\$532.99	\$532.99	\$532.99	\$532.99	\$409.69	\$409.69
47	\$652.54	\$652.54	\$652.54	\$652.54	\$619.33	\$619.33	\$619.33	\$619.33	\$528.99	\$528.99	\$528.99	\$528.99	\$549.99	\$549.99	\$549.99	\$549.99	\$417.19	\$417.19
48	\$664.45	\$664.45	\$664.45	\$664.45	\$638.19	\$638.19	\$638.19	\$638.19	\$547.49	\$547.49	\$547.49	\$547.49	\$567.99	\$567.99	\$567.99	\$567.99	\$424.69	\$424.69
49	\$676.47	\$676.47	\$676.47	\$676.47	\$657.14	\$657.14	\$657.14	\$657.14	\$566.74	\$566.74	\$566.74	\$566.74	\$586.99	\$586.99	\$586.99	\$586.99	\$432.19	\$432.19
50	\$688.60	\$688.60	\$688.60	\$688.60	\$676.67	\$676.67	\$676.67	\$676.67	\$586.99	\$586.99	\$586.99	\$586.99	\$607.49	\$607.49	\$607.49	\$607.49	\$439.69	\$439.69
51	\$699.94	\$699.94	\$699.94	\$699.94	\$697.09	\$697.09	\$697.09	\$697.09	\$607.99	\$607.99	\$607.99	\$607.99	\$628.99	\$628.99	\$628.99	\$628.99	\$447.19	\$447.19
52	\$711.59	\$711.59	\$711.59	\$711.59	\$718.44	\$718.44	\$718.44	\$718.44	\$629.49	\$629.49	\$629.49	\$629.49	\$650.99	\$650.99	\$650.99	\$650.99	\$454.69	\$454.69
53	\$723.35	\$723.35	\$723.35	\$723.35	\$740.74	\$740.74	\$740.74	\$740.74	\$651.99	\$651.99	\$651.99	\$651.99	\$673.99	\$673.99	\$673.99	\$673.99	\$462.19	\$462.19
54	\$735.22	\$735.22	\$735.22	\$735.22	\$764.09	\$764.09	\$764.09	\$764.09	\$674.99	\$674.99	\$674.99	\$674.99	\$696.99	\$696.99	\$696.99	\$696.99	\$469.69	\$469.69
55	\$747.20	\$747.20	\$747.20	\$747.20	\$788.44	\$788.44	\$788.44	\$788.44	\$699.49	\$699.49	\$699.49	\$699.49	\$719.99	\$719.99	\$719.99	\$719.99	\$477.19	\$477.19
56	\$759.29	\$759.29	\$759.29	\$759.29	\$813.88	\$813.88	\$813.88	\$813.88	\$724.99	\$724.99	\$724.99	\$724.99	\$743.99	\$743.99	\$743.99	\$743.99	\$484.69	\$484.69
57	\$771.49	\$771.49	\$771.49	\$771.49	\$840.41	\$840.41	\$840.41	\$840.41	\$751.49	\$751.49	\$751.49	\$751.49	\$764.99	\$764.99	\$764.99	\$764.99	\$492.19	\$492.19
58	\$783.80	\$783.80	\$783.80	\$783.80	\$867.94	\$867.94	\$867.94	\$867.94	\$779.49	\$779.49	\$779.49	\$779.49	\$786.99	\$786.99	\$786.99	\$786.99	\$499.69	\$499.69
59	\$796.32	\$796.32	\$796.32	\$796.32	\$896.56	\$896.56	\$896.56	\$896.56	\$808.99	\$808.99	\$808.99	\$808.99	\$801.99	\$801.99	\$801.99	\$801.99	\$507.19	\$507.19
60	\$809.05	\$809.05	\$809.05	\$809.05	\$927.27	\$927.27	\$927.27	\$927.27	\$839.49	\$839.49	\$839.49	\$839.49	\$811.99	\$811.99	\$811.99	\$811.99	\$514.69	\$514.69
61	\$821.99	\$821.99	\$821.99	\$821.99	\$959.06	\$959.06	\$959.06	\$959.06	\$871.99	\$871.99	\$871.99	\$871.99	\$824.99	\$824.99	\$824.99	\$824.99	\$522.19	\$522.19
62	\$835.14	\$835.14	\$835.14	\$835.14	\$991.74	\$991.74	\$991.74	\$991.74	\$904.99	\$904.99	\$904.99	\$904.99	\$838.99	\$838.99	\$838.99	\$838.99	\$529.69	\$529.69
63	\$848.50	\$848.50	\$848.50	\$848.50	\$1,02													

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

HIOS Plan ID (On Exchange)=>	79279PA0080001		79279PA0130002		79279PA0130002		79279PA0090001		79279PA0090001		79279PA0080011		79279PA0080011		79279PA0100001		79279PA0100001	
HIOS Plan ID (Off Exchange)=>	79279PA0080001		79279PA0130002		79279PA0130002		79279PA0090001		79279PA0090001		79279PA0080011		79279PA0080011		79279PA0100001		79279PA0100001	
Plan Marketing Name =>	Together Blue EPO Bronze 3800		Together Blue EPO Bronze 3800 + Adult Dental and Vision		Together Blue EPO Bronze 3800 + Adult Dental and Vision		Together Blue EPO Bronze 7400 HSA - Custom Drug Benefit		Together Blue EPO Bronze 7400 HSA - Custom Drug Benefit		Together Blue EPO Bronze 8900		Together Blue EPO Bronze 8900		Together Blue Major Events EPO Catastrophic 9200 - 3 Free PCP Visits		Together Blue Major Events EPO Catastrophic 9200 - 3 Free PCP Visits	
Form # =>	TB/EPO/HCA/DP-5		TB/EPO/ADV/HCA/DP-5		TB/EPO/ADV/HCA/DP-5		TB/EPO/ADV/HCA/DP-5		TB/EPO/ADV/HCA/DP-5		TB/EPO/HCA/DP-5		TB/EPO/HCA/DP-5		TB/CAT/EPO/HCA/DP-5		TB/CAT/EPO/HCA/DP-5	
Rating Area =>	Area 4		Area 1		Area 4		Area 1		Area 4		Area 1		Area 4		Area 1		Area 4	
Network =>	L		L		L		L		L		L		L		L		L	
Metal =>	Bronze		Bronze		Bronze		Bronze		Bronze		Bronze		Bronze		Catastrophic		Catastrophic	
Deductible =>	3800		3800		3800		7400		7400		8900		8900		9200		9200	
Coinurance =>	50%		50%		50%		100%		100%		100%		100%		100%		100%	
Copays =>	\$65 PCP		\$65 PCP		\$65 PCP		N/A		N/A		N/A		N/A		\$0 (Visits 1-3); then 100% after Ded. PCP		\$0 (Visits 1-3); then 100% after Ded. PCP	
OOP Maximum =>	9200		9200		9200		7400		7400		8900		8900		9200		9200	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$173.99	\$173.99	\$189.38	\$189.38	\$189.38	\$189.38	\$177.45	\$177.45	\$177.45	\$177.45	\$154.66	\$154.66	\$154.66	\$154.66	\$134.54	\$134.54	\$134.54	\$134.54
15	\$189.46	\$189.46	\$206.22	\$206.22	\$206.22	\$206.22	\$193.22	\$193.22	\$193.22	\$193.22	\$168.41	\$168.41	\$168.41	\$168.41	\$146.50	\$146.50	\$146.50	\$146.50
16	\$195.37	\$195.37	\$212.65	\$212.65	\$212.65	\$212.65	\$199.25	\$199.25	\$199.25	\$199.25	\$173.66	\$173.66	\$173.66	\$173.66	\$151.07	\$151.07	\$151.07	\$151.07
17	\$201.28	\$201.28	\$219.09	\$219.09	\$219.09	\$219.09	\$205.28	\$205.28	\$205.28	\$205.28	\$178.92	\$178.92	\$178.92	\$178.92	\$155.64	\$155.64	\$155.64	\$155.64
18	\$207.65	\$207.65	\$226.02	\$226.02	\$226.02	\$226.02	\$211.78	\$211.78	\$211.78	\$211.78	\$184.58	\$184.58	\$184.58	\$184.58	\$160.57	\$160.57	\$160.57	\$160.57
19	\$214.02	\$214.02	\$232.95	\$232.95	\$232.95	\$232.95	\$218.27	\$218.27	\$218.27	\$218.27	\$190.24	\$190.24	\$190.24	\$190.24	\$165.49	\$165.49	\$165.49	\$165.49
20	\$220.62	\$220.62	\$240.13	\$240.13	\$240.13	\$240.13	\$225.00	\$225.00	\$225.00	\$225.00	\$196.10	\$196.10	\$196.10	\$196.10	\$170.59	\$170.59	\$170.59	\$170.59
21	\$227.44	\$227.44	\$247.56	\$247.56	\$247.56	\$247.56	\$231.96	\$231.96	\$231.96	\$231.96	\$202.17	\$202.17	\$202.17	\$202.17	\$175.87	\$175.87	\$175.87	\$175.87
22	\$227.44	\$227.44	\$247.56	\$247.56	\$247.56	\$247.56	\$231.96	\$231.96	\$231.96	\$231.96	\$202.17	\$202.17	\$202.17	\$202.17	\$175.87	\$175.87	\$175.87	\$175.87
23	\$227.44	\$227.44	\$247.56	\$247.56	\$247.56	\$247.56	\$231.96	\$231.96	\$231.96	\$231.96	\$202.17	\$202.17	\$202.17	\$202.17	\$175.87	\$175.87	\$175.87	\$175.87
24	\$227.44	\$227.44	\$247.56	\$247.56	\$247.56	\$247.56	\$231.96	\$231.96	\$231.96	\$231.96	\$202.17	\$202.17	\$202.17	\$202.17	\$175.87	\$175.87	\$175.87	\$175.87
25	\$228.35	\$228.35	\$248.55	\$248.55	\$248.55	\$248.55	\$232.89	\$232.89	\$232.89	\$232.89	\$202.98	\$202.98	\$202.98	\$202.98	\$176.57	\$176.57	\$176.57	\$176.57
26	\$232.90	\$232.90	\$259.84	\$259.84	\$259.84	\$259.84	\$243.47	\$243.47	\$243.47	\$243.47	\$207.02	\$207.02	\$207.02	\$207.02	\$180.09	\$180.09	\$180.09	\$180.09
27	\$238.36	\$238.36	\$269.44	\$269.44	\$269.44	\$269.44	\$252.14	\$252.14	\$252.14	\$252.14	\$211.87	\$211.87	\$211.87	\$211.87	\$184.31	\$184.31	\$184.31	\$184.31
28	\$247.23	\$247.23	\$279.02	\$279.02	\$279.02	\$279.02	\$263.27	\$263.27	\$263.27	\$263.27	\$229.46	\$229.46	\$229.46	\$229.46	\$199.61	\$199.61	\$199.61	\$199.61
29	\$254.51	\$254.51	\$288.98	\$288.98	\$288.98	\$288.98	\$275.56	\$275.56	\$275.56	\$275.56	\$234.32	\$234.32	\$234.32	\$234.32	\$204.18	\$204.18	\$204.18	\$204.18
30	\$263.60	\$263.60	\$299.09	\$299.09	\$299.09	\$299.09	\$284.84	\$284.84	\$284.84	\$284.84	\$242.20	\$242.20	\$242.20	\$242.20	\$210.69	\$210.69	\$210.69	\$210.69
31	\$269.06	\$269.06	\$300.18	\$300.18	\$300.18	\$300.18	\$287.41	\$287.41	\$287.41	\$287.41	\$245.15	\$245.15	\$245.15	\$245.15	\$215.25	\$215.25	\$215.25	\$215.25
32	\$272.47	\$272.47	\$303.99	\$303.99	\$303.99	\$303.99	\$289.88	\$289.88	\$289.88	\$289.88	\$248.26	\$248.26	\$248.26	\$248.26	\$219.88	\$219.88	\$219.88	\$219.88
33	\$276.11	\$276.11	\$308.05	\$308.05	\$308.05	\$308.05	\$291.08	\$291.08	\$291.08	\$291.08	\$251.57	\$251.57	\$251.57	\$251.57	\$223.51	\$223.51	\$223.51	\$223.51
34	\$277.93	\$277.93	\$310.08	\$310.08	\$310.08	\$310.08	\$293.46	\$293.46	\$293.46	\$293.46	\$254.05	\$254.05	\$254.05	\$254.05	\$226.28	\$226.28	\$226.28	\$226.28
35	\$279.75	\$279.75	\$312.11	\$312.11	\$312.11	\$312.11	\$295.84	\$295.84	\$295.84	\$295.84	\$256.54	\$256.54	\$256.54	\$256.54	\$228.77	\$228.77	\$228.77	\$228.77
36	\$281.57	\$281.57	\$314.14	\$314.14	\$314.14	\$314.14	\$298.22	\$298.22	\$298.22	\$298.22	\$259.03	\$259.03	\$259.03	\$259.03	\$231.26	\$231.26	\$231.26	\$231.26
37	\$283.39	\$283.39	\$316.17	\$316.17	\$316.17	\$316.17	\$299.02	\$299.02	\$299.02	\$299.02	\$261.52	\$261.52	\$261.52	\$261.52	\$233.75	\$233.75	\$233.75	\$233.75
38	\$287.03	\$287.03	\$320.23	\$320.23	\$320.23	\$320.23	\$300.05	\$300.05	\$300.05	\$300.05	\$264.01	\$264.01	\$264.01	\$264.01	\$236.24	\$236.24	\$236.24	\$236.24
39	\$290.67	\$290.67	\$324.29	\$324.29	\$324.29	\$324.29	\$302.43	\$302.43	\$302.43	\$302.43	\$266.50	\$266.50	\$266.50	\$266.50	\$238.73	\$238.73	\$238.73	\$238.73
40	\$296.13	\$296.13	\$328.35	\$328.35	\$328.35	\$328.35	\$304.81	\$304.81	\$304.81	\$304.81	\$269.00	\$269.00	\$269.00	\$269.00	\$241.22	\$241.22	\$241.22	\$241.22
41	\$301.36	\$301.36	\$332.41	\$332.41	\$332.41	\$332.41	\$307.19	\$307.19	\$307.19	\$307.19	\$271.49	\$271.49	\$271.49	\$271.49	\$243.71	\$243.71	\$243.71	\$243.71
42	\$308.64	\$308.64	\$336.47	\$336.47	\$336.47	\$336.47	\$309.57	\$309.57	\$309.57	\$309.57	\$273.98	\$273.98	\$273.98	\$273.98	\$246.20	\$246.20	\$246.20	\$246.20
43	\$317.73	\$317.73	\$340.53	\$340.53	\$340.53	\$340.53	\$311.95	\$311.95	\$311.95	\$311.95	\$276.47	\$276.47	\$276.47	\$276.47	\$248.69	\$248.69	\$248.69	\$248.69
44	\$328.42	\$328.42	\$344.59	\$344.59	\$344.59	\$344.59	\$314.33	\$314.33	\$314.33	\$314.33	\$278.96	\$278.96	\$278.96	\$278.96	\$251.18	\$251.18	\$251.18	\$251.18
45	\$341.16	\$341.16	\$348.65	\$348.65	\$348.65	\$348.65	\$316.71	\$316.71	\$316.71	\$316.71	\$281.45	\$281.45	\$281.45	\$281.45	\$253.67	\$253.67	\$253.67	\$253.67
46	\$355.49	\$355.49	\$352.71	\$352.71	\$352.71	\$352.71	\$319.09	\$319.09	\$319.09	\$319.09	\$283.94	\$283.94	\$283.94	\$283.94	\$256.16	\$256.16	\$256.16	\$256.16
47	\$371.86	\$371.86	\$356.77	\$356.77	\$356.77	\$356.77	\$321.47	\$321.47	\$321.47	\$321.47	\$286.43	\$286.43	\$286.43	\$286.43	\$258.65	\$258.65	\$258.65	\$258.65
48	\$388.01	\$388.01	\$360.83	\$360.83	\$360.83	\$360.83	\$323.85	\$323.85	\$323.85	\$323.85	\$288.92	\$288.92	\$288.92	\$288.92	\$261.14	\$261.14	\$261.14	\$261.14
49	\$406.21	\$406.21	\$364.89	\$364.89	\$364.89	\$364.89	\$326.23	\$326.23	\$326.23	\$326.23	\$291.41	\$291.41	\$291.41	\$291.41	\$263.63	\$263.63	\$263.63	\$263.63
50	\$424.18	\$424.18	\$368.95	\$368.95	\$368.95	\$368.95	\$328.61	\$328.61	\$328.61	\$328.61	\$293.90	\$293.90	\$293.90	\$293.90	\$266.12	\$266.12	\$266.12	\$266.12
51	\$443.96	\$443.96	\$373.01	\$373.01	\$373.01	\$373.01	\$330.99	\$330.99	\$330.99	\$330.99	\$296.38	\$296.38	\$296.38	\$296.38	\$268.61	\$268.61	\$268.61	\$268.61
52	\$463.98	\$463.98	\$377.07	\$377.07	\$377.07	\$377.07	\$333.37	\$333.37	\$333.37	\$333.37	\$298.87	\$298.87	\$298.87	\$298.87	\$271.10	\$271.10	\$271.10	\$271.10
53	\$485.58	\$485.58	\$381.13	\$381.13	\$381.13	\$381.13	\$335.75	\$335.75	\$335.75	\$335.75	\$301.36	\$301.36	\$301.36	\$301.36	\$273.59	\$273.59	\$273.59	\$273.59
54	\$507.19	\$507.19	\$385.19	\$385.19	\$385.19	\$385.19	\$338.13	\$338.13	\$338.13	\$338.13	\$303.85	\$303.85	\$303.85	\$303.85	\$276.08	\$276.08	\$276.08	\$276.08
55	\$530.62	\$530.62	\$389.25	\$389.25	\$389.25	\$389.25	\$340.51	\$340.51	\$340.51	\$340.51	\$306.34	\$306.34	\$306.34	\$306.34	\$278.57	\$278.57	\$278.57	\$278.57
56	\$554.27	\$554.27	\$393.31	\$393.31	\$393.31	\$393.31	\$342.89	\$342.89	\$342.89	\$342.89	\$308.83	\$308.83	\$308.83	\$308.83	\$281.06	\$281.06	\$281.06	\$281.06
57	\$579.52	\$579.52	\$397.37	\$397.37	\$397.37	\$397.37	\$345.27	\$345.27	\$345.27	\$345.27	\$311.32	\$311.32	\$311.32	\$311.32	\$283.55	\$283.55	\$283.55	\$283.55
58	\$592.03	\$592.03	\$401.43	\$401.43	\$401.43	\$401.43	\$347.65	\$347.65	\$347.65	\$347.65	\$313.81	\$313.81	\$313.81	\$313.81	\$286.04	\$286.04	\$286.04	\$286.04
59	\$617.27	\$617.27	\$405.49	\$405.49	\$405.49	\$405.49	\$350.03	\$350.03	\$350.03	\$350.03	\$316.30	\$316.30	\$316.30	\$316.30	\$288.53	\$288.53	\$288.53	\$288.53
60	\$639.11	\$639.11	\$409.55	\$409.55	\$409.55	\$409.55	\$352.41	\$352.41	\$352.41	\$352.41	\$318.79	\$318.79	\$318.79	\$318.79	\$291.02	\$291.02	\$291.02	\$291.02
61	\$653.44	\$653.44	\$413.61	\$413.61	\$413.61	\$413.61	\$354.79	\$354.79	\$354.79	\$354.79	\$321.28	\$321.28	\$321.28	\$321.28	\$293.51	\$293.51	\$293.51	\$293.51
62	\$671.40	\$671.40	\$417.67	\$417.67	\$417.67	\$417.67	\$357.17	\$357.17	\$357.17	\$357.17	\$323.77	\$323.77	\$32					

**Highmark Coverage Advantage
Individual
Plan Design Summary**

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
79279PA0140003	Together Blue EPO Premier Platinum 0	EPO	Platinum	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0150003	Together Blue EPO Premier Platinum 0 + Adult Dental and Vision	EPO	Platinum	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0080008	Together Blue EPO Gold 0	EPO	Gold	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0130005	Together Blue EPO Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0140001	Together Blue EPO Premier Gold 0	EPO	Gold	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0150001	Together Blue EPO Premier Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0090004	Together Blue EPO Gold 1700 HSA	EPO	Gold	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0080013	Together Blue Virtual Choice EPO Gold 1500	EPO	Gold	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0140002	Together Blue EPO Premier Silver 0	EPO	Silver	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0150002	Together Blue EPO Premier Silver 0 + Adult Dental and Vision	EPO	Silver	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0080012	Together Blue EPO Silver 7000	EPO	Silver	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0080010	Together Blue EPO Silver 3500	EPO	Silver	Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0130004	Together Blue EPO Silver 3500 + Adult Dental and Vision	EPO	Silver	Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0080001	Together Blue EPO Bronze 3800	EPO	Bronze	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0130002	Together Blue EPO Bronze 3800 + Adult Dental and Vision	EPO	Bronze	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0090001	Together Blue EPO Bronze 7400 HSA - Custom Drug Benefit	EPO	Bronze	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0080011	Together Blue EPO Bronze 8900	EPO	Bronze	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland
79279PA0100001	Together Blue Major Events EPO Catastrophic 9200 - 3 Free PCP Visits	EPO	Catastrophic	On/Off	L	1, 4	Allegheny, Erie, Washington, Butler, Westmoreland

Company Name Highmark Coverage Advantage
 Market Individual
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2024 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	2,932	0	0	0	0	0	0	0	0
					Crawford	Clarion	Erie	Forest	Mckean	Mercer	Venango	Warren	Elk	Cameron	Potter
79279PA0140003	Together Blue EPO Premier Platinum 0	EPO	Platinum	On/Off			\$366.13								
79279PA0150003	Together Blue EPO Premier Platinum 0 + Adult Dental and Vision	EPO	Platinum	On/Off			\$386.24								
79279PA0080008	Together Blue EPO Gold 0	EPO	Gold	On/Off			\$305.05								
79279PA0130005	Together Blue EPO Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off			\$325.16								
79279PA0140001	Together Blue EPO Premier Gold 0	EPO	Gold	On/Off			\$316.67								
79279PA0150001	Together Blue EPO Premier Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off			\$336.78								
79279PA0090004	Together Blue EPO Gold 1700 HSA	EPO	Gold	On/Off			\$279.44								
79279PA0080013	Together Blue Virtual Choice EPO Gold 1500	EPO	Gold	On/Off			\$282.41								
79279PA0140002	Together Blue EPO Premier Silver 0	EPO	Silver	On/Off			\$346.36								
79279PA0150002	Together Blue EPO Premier Silver 0 + Adult Dental and Vision	EPO	Silver	On/Off			\$366.47								
79279PA0080012	Together Blue EPO Silver 7000	EPO	Silver	On/Off			\$321.98								
79279PA0080010	Together Blue EPO Silver 3500	EPO	Silver	Off			\$240.23								
79279PA0130004	Together Blue EPO Silver 3500 + Adult Dental and Vision	EPO	Silver	Off			\$260.34								
79279PA0080001	Together Blue EPO Bronze 3800	EPO	Bronze	On/Off			\$227.44								
79279PA0130002	Together Blue EPO Bronze 3800 + Adult Dental and Vision	EPO	Bronze	On/Off			\$247.56								
79279PA0090001	Together Blue EPO Bronze 7400 HSA - Custom Drug Benefit	EPO	Bronze	On/Off			\$231.96								
79279PA0080011	Together Blue EPO Bronze 8900	EPO	Bronze	On/Off			\$202.17								
79279PA0100001	Together Blue Major Events EPO Catastrophic 9200 - 3 Free PCP Visits	EPO	Catastrophic	On/Off			\$175.87								

Company Name Highmark Coverage Advantage
 Market Individual
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

RATING AREA 3

02-01-2024 Number of Covered Lives by Rating County					0	0	0	0	0	0	0	0	0	0	0		
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Bradford	Carbon	Clinton	Lackawanna	Luzerne	Lycoming	Monroe	Pike	Sullivan	Susquehanna	Tioga	Wayne	Wyoming
79279PA0140003	Together Blue EPO Premier Platinum 0	EPO	Platinum	On/Off													
79279PA0150003	Together Blue EPO Premier Platinum 0 + Adult Dental and Vision	EPO	Platinum	On/Off													
79279PA0080008	Together Blue EPO Gold 0	EPO	Gold	On/Off													
79279PA0130005	Together Blue EPO Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off													
79279PA0140001	Together Blue EPO Premier Gold 0	EPO	Gold	On/Off													
79279PA0150001	Together Blue EPO Premier Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off													
79279PA0090004	Together Blue EPO Gold 1700 HSA	EPO	Gold	On/Off													
79279PA0080013	Together Blue Virtual Choice EPO Gold 1500	EPO	Gold	On/Off													
79279PA0140002	Together Blue EPO Premier Silver 0	EPO	Silver	On/Off													
79279PA0150002	Together Blue EPO Premier Silver 0 + Adult Dental and Vision	EPO	Silver	On/Off													
79279PA0080012	Together Blue EPO Silver 7000	EPO	Silver	On/Off													
79279PA0080010	Together Blue EPO Silver 3500	EPO	Silver	Off													
79279PA0130004	Together Blue EPO Silver 3500 + Adult Dental and Vision	EPO	Silver	Off													
79279PA0080001	Together Blue EPO Bronze 3800	EPO	Bronze	On/Off													
79279PA0130002	Together Blue EPO Bronze 3800 + Adult Dental and Vision	EPO	Bronze	On/Off													
79279PA0090001	Together Blue EPO Bronze 7400 HSA - Custom Drug Benefit	EPO	Bronze	On/Off													
79279PA0080011	Together Blue EPO Bronze 8900	EPO	Bronze	On/Off													
79279PA0100001	Together Blue Major Events EPO Catastrophic 9200 - 3 Free PCP Visits	EPO	Catastrophic	On/Off													

Company Name Highmark Coverage Advantage
 Market Individual
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2024 Number of Covered Lives by Rating County					RATING AREA 4									
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	15,756	0	0	1,613	0	0	0	0	2,574	3,176
					Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland
79279PA0140003	Together Blue EPO Premier Platinum 0	EPO	Platinum	On/Off	\$366.13			\$366.13					\$366.13	\$366.13
79279PA0150003	Together Blue EPO Premier Platinum 0 + Adult Dental and Vision	EPO	Platinum	On/Off	\$386.24			\$386.24					\$386.24	\$386.24
79279PA0080008	Together Blue EPO Gold 0	EPO	Gold	On/Off	\$305.05			\$305.05					\$305.05	\$305.05
79279PA0130005	Together Blue EPO Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off	\$325.16			\$325.16					\$325.16	\$325.16
79279PA0140001	Together Blue EPO Premier Gold 0	EPO	Gold	On/Off	\$316.67			\$316.67					\$316.67	\$316.67
79279PA0150001	Together Blue EPO Premier Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off	\$336.78			\$336.78					\$336.78	\$336.78
79279PA0090004	Together Blue EPO Gold 1700 HSA	EPO	Gold	On/Off	\$279.44			\$279.44					\$279.44	\$279.44
79279PA0080013	Together Blue Virtual Choice EPO Gold 1500	EPO	Gold	On/Off	\$282.41			\$282.41					\$282.41	\$282.41
79279PA0140002	Together Blue EPO Premier Silver 0	EPO	Silver	On/Off	\$346.36			\$346.36					\$346.36	\$346.36
79279PA0150002	Together Blue EPO Premier Silver 0 + Adult Dental and Vision	EPO	Silver	On/Off	\$366.47			\$366.47					\$366.47	\$366.47
79279PA0080012	Together Blue EPO Silver 7000	EPO	Silver	On/Off	\$321.98			\$321.98					\$321.98	\$321.98
79279PA0080010	Together Blue EPO Silver 3500	EPO	Silver	Off	\$240.23			\$240.23					\$240.23	\$240.23
79279PA0130004	Together Blue EPO Silver 3500 + Adult Dental and Vision	EPO	Silver	Off	\$260.34			\$260.34					\$260.34	\$260.34
79279PA0080001	Together Blue EPO Bronze 3800	EPO	Bronze	On/Off	\$227.44			\$227.44					\$227.44	\$227.44
79279PA0130002	Together Blue EPO Bronze 3800 + Adult Dental and Vision	EPO	Bronze	On/Off	\$247.56			\$247.56					\$247.56	\$247.56
79279PA0090001	Together Blue EPO Bronze 7400 HSA - Custom Drug Benefit	EPO	Bronze	On/Off	\$231.96			\$231.96					\$231.96	\$231.96
79279PA0080011	Together Blue EPO Bronze 8900	EPO	Bronze	On/Off	\$202.17			\$202.17					\$202.17	\$202.17
79279PA0100001	Together Blue Major Events EPO Catastrophic 9200 - 3 Free PCP Visits	EPO	Catastrophic	On/Off	\$175.87			\$175.87					\$175.87	\$175.87

Company Name Highmark Coverage Advantage
 Market Individual
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

RATING AREA 5

02-01-2024 Number of Covered Lives by Rating County					0	0	0	0	0	0	
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
79279PA0140003	Together Blue EPO Premier Platinum 0	EPO	Platinum	On/Off							
79279PA0150003	Together Blue EPO Premier Platinum 0 + Adult Dental and Vision	EPO	Platinum	On/Off							
79279PA0080008	Together Blue EPO Gold 0	EPO	Gold	On/Off							
79279PA0130005	Together Blue EPO Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off							
79279PA0140001	Together Blue EPO Premier Gold 0	EPO	Gold	On/Off							
79279PA0150001	Together Blue EPO Premier Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off							
79279PA0090004	Together Blue EPO Gold 1700 HSA	EPO	Gold	On/Off							
79279PA0080013	Together Blue Virtual Choice EPO Gold 1500	EPO	Gold	On/Off							
79279PA0140002	Together Blue EPO Premier Silver 0	EPO	Silver	On/Off							
79279PA0150002	Together Blue EPO Premier Silver 0 + Adult Dental and Vision	EPO	Silver	On/Off							
79279PA0080012	Together Blue EPO Silver 7000	EPO	Silver	On/Off							
79279PA0080010	Together Blue EPO Silver 3500	EPO	Silver	Off							
79279PA0130004	Together Blue EPO Silver 3500 + Adult Dental and Vision	EPO	Silver	Off							
79279PA0080001	Together Blue EPO Bronze 3800	EPO	Bronze	On/Off							
79279PA0130002	Together Blue EPO Bronze 3800 + Adult Dental and Vision	EPO	Bronze	On/Off							
79279PA0090001	Together Blue EPO Bronze 7400 HSA - Custom Drug Benefit	EPO	Bronze	On/Off							
79279PA0080011	Together Blue EPO Bronze 8900	EPO	Bronze	On/Off							
79279PA0100001	Together Blue Major Events EPO Catastrophic 9200 - 3 Free PCP Visits	EPO	Catastrophic	On/Off							

Company Name Highmark Coverage Advantage
 Market Individual
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2024 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
79279PA0140003	Together Blue EPO Premier Platinum 0	EPO	Platinum	On/Off
79279PA0150003	Together Blue EPO Premier Platinum 0 + Adult Dental and Vision	EPO	Platinum	On/Off
79279PA0080008	Together Blue EPO Gold 0	EPO	Gold	On/Off
79279PA0130005	Together Blue EPO Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off
79279PA0140001	Together Blue EPO Premier Gold 0	EPO	Gold	On/Off
79279PA0150001	Together Blue EPO Premier Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off
79279PA0090004	Together Blue EPO Gold 1700 HSA	EPO	Gold	On/Off
79279PA0080013	Together Blue Virtual Choice EPO Gold 1500	EPO	Gold	On/Off
79279PA0140002	Together Blue EPO Premier Silver 0	EPO	Silver	On/Off
79279PA0150002	Together Blue EPO Premier Silver 0 + Adult Dental and Vision	EPO	Silver	On/Off
79279PA0080012	Together Blue EPO Silver 7000	EPO	Silver	On/Off
79279PA0080010	Together Blue EPO Silver 3500	EPO	Silver	Off
79279PA0130004	Together Blue EPO Silver 3500 + Adult Dental and Vision	EPO	Silver	Off
79279PA0080001	Together Blue EPO Bronze 3800	EPO	Bronze	On/Off
79279PA0130002	Together Blue EPO Bronze 3800 + Adult Dental and Vision	EPO	Bronze	On/Off
79279PA0090001	Together Blue EPO Bronze 7400 HSA - Custom Drug Benefit	EPO	Bronze	On/Off
79279PA0080011	Together Blue EPO Bronze 8900	EPO	Bronze	On/Off
79279PA0100001	Together Blue Major Events EPO Catastrophic 9200 - 3 Free PCP Visits	EPO	Catastrophic	On/Off

RATING AREA 6

0	0	0	0	0	0	0	0	0	0
Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union

Company Name Highmark Coverage Advantage
 Market Individual
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2024 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
79279PA0140003	Together Blue EPO Premier Platinum 0	EPO	Platinum	On/Off
79279PA0150003	Together Blue EPO Premier Platinum 0 + Adult Dental and Vision	EPO	Platinum	On/Off
79279PA0080008	Together Blue EPO Gold 0	EPO	Gold	On/Off
79279PA0130005	Together Blue EPO Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off
79279PA0140001	Together Blue EPO Premier Gold 0	EPO	Gold	On/Off
79279PA0150001	Together Blue EPO Premier Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off
79279PA0090004	Together Blue EPO Gold 1700 HSA	EPO	Gold	On/Off
79279PA0080013	Together Blue Virtual Choice EPO Gold 1500	EPO	Gold	On/Off
79279PA0140002	Together Blue EPO Premier Silver 0	EPO	Silver	On/Off
79279PA0150002	Together Blue EPO Premier Silver 0 + Adult Dental and Vision	EPO	Silver	On/Off
79279PA0080012	Together Blue EPO Silver 7000	EPO	Silver	On/Off
79279PA0080010	Together Blue EPO Silver 3500	EPO	Silver	Off
79279PA0130004	Together Blue EPO Silver 3500 + Adult Dental and Vision	EPO	Silver	Off
79279PA0080001	Together Blue EPO Bronze 3800	EPO	Bronze	On/Off
79279PA0130002	Together Blue EPO Bronze 3800 + Adult Dental and Vision	EPO	Bronze	On/Off
79279PA0090001	Together Blue EPO Bronze 7400 HSA - Custom Drug Benefit	EPO	Bronze	On/Off
79279PA0080011	Together Blue EPO Bronze 8900	EPO	Bronze	On/Off
79279PA0100001	Together Blue Major Events EPO Catastrophic 9200 - 3 Free PCP Visits	EPO	Catastrophic	On/Off

RATING AREA 7

0	0	0	0
Adams	Berks	Lancaster	York

RATING AREA 8

0	0	0	0	0
Bucks	Chester	Delaware	Montgomery	Philadelphia

Company Name Highmark Coverage Advantage
 Market Individual
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

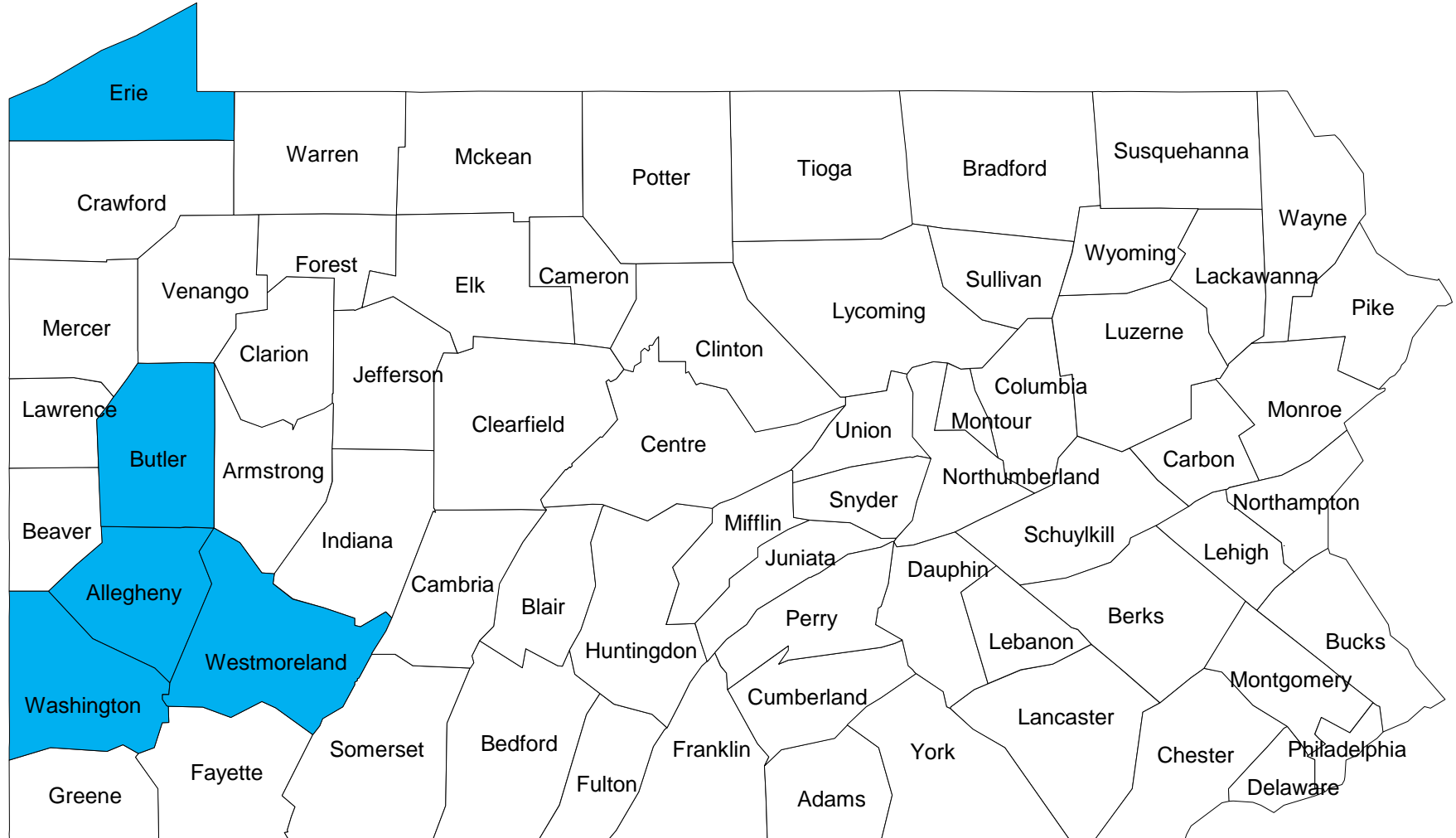
RATING AREA 9

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	02-01-2024 Number of Covered Lives by Rating County						
					0	0	0	0	0	0	0
					Cumberland	Dauphin	Franklin	Fulton	Juniata	Lebanon	Perry
79279PA0140003	Together Blue EPO Premier Platinum 0	EPO	Platinum	On/Off							
79279PA0150003	Together Blue EPO Premier Platinum 0 + Adult Dental and Vision	EPO	Platinum	On/Off							
79279PA0080008	Together Blue EPO Gold 0	EPO	Gold	On/Off							
79279PA0130005	Together Blue EPO Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off							
79279PA0140001	Together Blue EPO Premier Gold 0	EPO	Gold	On/Off							
79279PA0150001	Together Blue EPO Premier Gold 0 + Adult Dental and Vision	EPO	Gold	On/Off							
79279PA0090004	Together Blue EPO Gold 1700 HSA	EPO	Gold	On/Off							
79279PA0080013	Together Blue Virtual Choice EPO Gold 1500	EPO	Gold	On/Off							
79279PA0140002	Together Blue EPO Premier Silver 0	EPO	Silver	On/Off							
79279PA0150002	Together Blue EPO Premier Silver 0 + Adult Dental and Vision	EPO	Silver	On/Off							
79279PA0080012	Together Blue EPO Silver 7000	EPO	Silver	On/Off							
79279PA0080010	Together Blue EPO Silver 3500	EPO	Silver	Off							
79279PA0130004	Together Blue EPO Silver 3500 + Adult Dental and Vision	EPO	Silver	Off							
79279PA0080001	Together Blue EPO Bronze 3800	EPO	Bronze	On/Off							
79279PA0130002	Together Blue EPO Bronze 3800 + Adult Dental and Vision	EPO	Bronze	On/Off							
79279PA0090001	Together Blue EPO Bronze 7400 HSA - Custom Drug Benefit	EPO	Bronze	On/Off							
79279PA0080011	Together Blue EPO Bronze 8900	EPO	Bronze	On/Off							
79279PA0100001	Together Blue Major Events EPO Catastrophic 9200 - 3 Free PCP Visits	EPO	Catastrophic	On/Off							



2024 Service Area

Issuer: Highmark Coverage Advantage (HCA)

Market: Individual



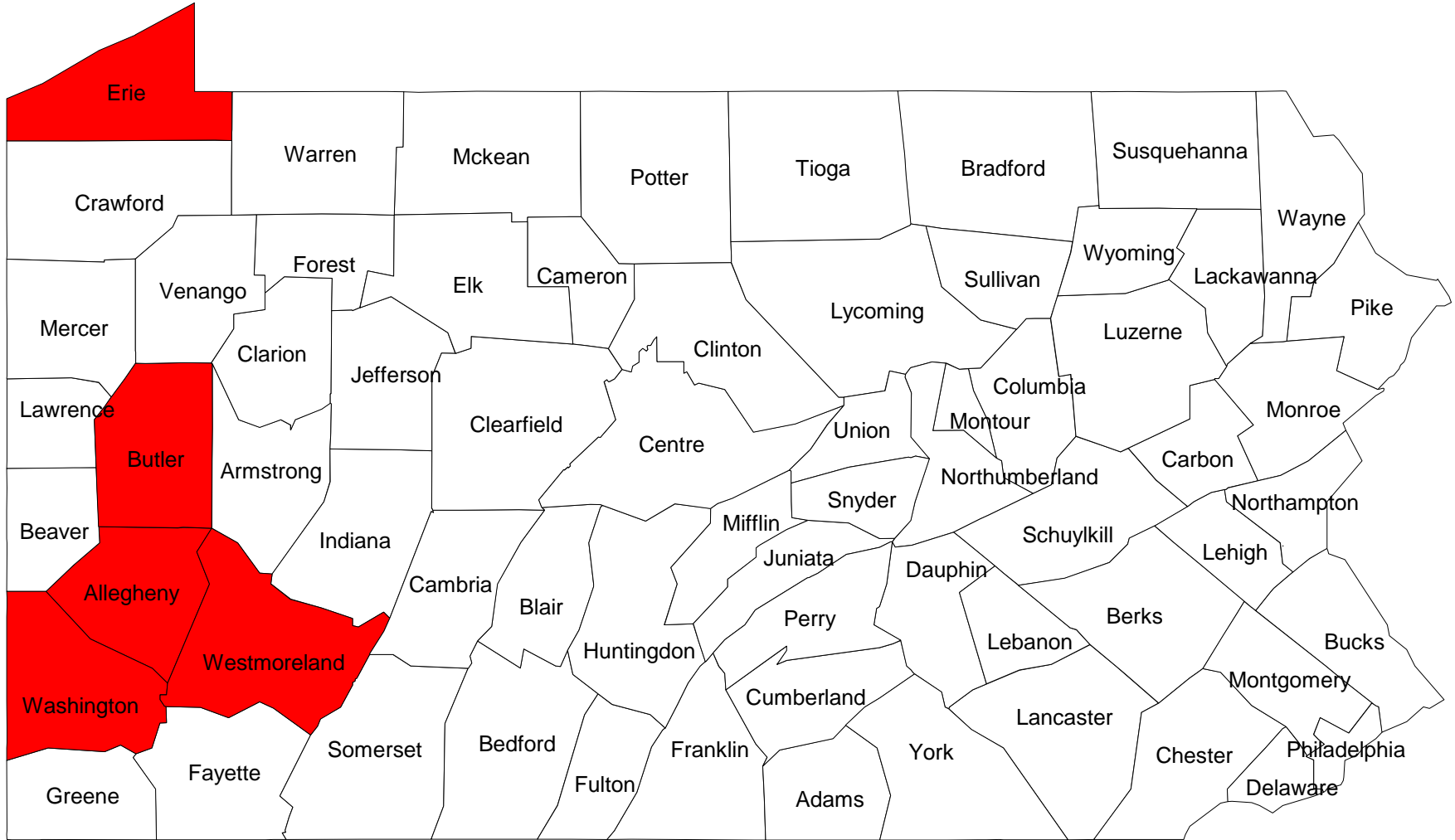
Key (*modify as needed*)

-  : 2024 on-exchange service area
-  : 2024 off-exchange only service area

2025 Service Area

Issuer: Highmark Coverage Advantage (HCA)

Market: Individual



Key (*modify as needed*)

- : 2025 on-exchange service area
- : 2025 off-exchange only service area



June 19, 2024

Mr. Michael Hibbert, Actuary
Bureau of Life, Accident & Health Insurance
Commonwealth of Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

Re: Highmark Coverage Advantage 2025 ACA Rate Filing (Individual Market)
Highmark Filing # 1A-DP-24-HCA (SERFF Filing # HGHM-134061466)

Dear Mr. Hibbert:

Enclosed are responses to your June 5, 2024 questions regarding SERFF Filing # HGHM- 134061466.
We have included your questions along with our responses for your convenience.

Should you have any further questions regarding this Filing, please feel free to contact me at [REDACTED]
[REDACTED] or via e-mail at: [REDACTED]

Sincerely,

[REDACTED]

Actuarial Manager, Individual Markets
Highmark Inc.

1. **The following objections relate to the file “1A-DP-24-HCA PA Actuarial Memorandum 051524.pdf”:**
 - a. **Please change the first sentence of the PA actuarial memo to “The appropriate company information has been provided in Table 0 of the PA Actuarial Memorandum Exhibits”.**
 - b. **Please add membership and metal levels offered to the bulleted list in section 1.A. of the PA actuarial memo.**

Response:

- a. The first sentence of the PA actuarial memorandum has been updated accordingly.
 - b. Membership and metal levels offered have been added to the PA actuarial memorandum.
2. **Section 1H of the PA Actuarial Memorandum indicates that the regression analysis primarily informed the trend selection with the final requested trend also based on actuarial judgement. The following questions relate to the trend assumption:**
 - a. **Please describe how the regression analysis was used to inform trend and if it was used to inform utilization, unit cost, and severity/mix portion of the trend. For the components of trend not using the regression analysis method, please describe how those components were determined.**
 - b. **Please provide a detailed exhibit displaying the quantitative development of the trend estimates produced by the regression analysis and the results produced by the regression analysis performed, separately for medical and prescription drug.**
 - c. **For trend assumptions that differ from the results of the regression analysis, please explain why a different assumption was used.**
 - d. **Please provide an exhibit displaying what explicit adjustments were made to the results of the regression analysis to arrive at the final proposed trend assumptions (e.g., an adjustment was applied to the results of the regression analysis to capture anticipated changes in the pharmacy formulary).**
 - e. **Please provide a quantitative exhibit supporting out-of-network costs and show how out-of-network costs impact the cost trends entered in Table 3 of the PAAM Exhibits.**
 - f. **Please provide a revised version of the PAAM Exhibits with Table 3 including trends that differ by service category. The revised table should at least show different medical and prescription drug trends.**
 - g. **Please explain how provider contracting has been normalized for in the trend development since this is being adjusted for separately.**
 - h. **Based on the historical data provided in Table 4, the requested trend of 9% doesn’t appear to be justified. Please explain further why this data shouldn’t be used to develop a justified trend.**

Response:

- a. Please see exhibit labeled Q2a Response for the development of the trend estimates produced by the regression analysis. The medical and pharmacy trends are developed separately, as shown in the exhibit, but were combined in the filing submission because the final trend applied was a total

trend. An assumed Cost trend of 5% was assigned based on historical and projected cost trend patterns with the remaining trend component assigned to Utilization.

- b. Please see exhibit labeled Q2a Response for the development of the trend estimates produced by the regression analysis. Shaded in gray is the time-period used for the regressions.
- c. The only adjustment made to the regression trend output was actuarial judgment. This adjustment is described in the exhibit labeled Q2c Response.
- d. Please refer to response 2c. above.
- e. Out-of-network costs are included as part of the overall trend development, but not isolated in the trend regression development. The out-of-network cost trend assumptions are aligned with the overall cost trends and are [REDACTED] in January and July of each year.
- f. The regression analysis was performed on the medical and Rx component data only, not by benefit cost category, so benefit cost category level results are not available. The medical and Rx results were combined to produce one overall trend.
- g. [REDACTED]
- h. Table 4 should not be used to develop the rate filing trend because it is an historical trend view, rather than based on future projection estimations. Many factors change from historical to future trends such as utilization patterns, provider contracting, pharmacy cost and utilization, etc. In addition, the population for this filing has grown over 30% from 2022 to 2023.

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

4. The Department is interested in the issuer's estimate of the drivers of the rate change, in particular, what portion of the indicated rate change from Table 11 is due to changes in various components such as reinsurance (individual market only), utilization trend, unit cost trend, expenses, morbidity, benefits, risk adjustment, or other relevant factors? Please add this to section 1.C. of the PA actuarial memo.

Response:

Please see section 1.C. of the PA actuarial memorandum for a summary of the estimated drivers of the rate change from Table 11.

5. The following objections pertain to the file

“2025_Indiv_HCA_PAAM_Attachments_AtoH_051524.xlsx”

- a. It is noted that the Change in Other adjustment includes an impact for both pharmacy rebates and expected changes in hospital/physician settlements, and is included as a hardcoded number on the Att A tab. Please provide separately what both these adjustments are.

In addition, please provide a detailed quantitative exhibit, with all formulas preserved, that supports the development of the expected change in pharmacy rebates. Please ensure that this supplemental exhibit supports the historical pharmacy rebates that have been provided in Table 4 of the PAAME.

- b. Please provide a quantitative exhibit displaying the development of the 2023 Normalized Allowed PMPM shown in column D on the Att A tab. Please demonstrate all calculations.
- c. Please provide support for and include a quantitative exhibit displaying the development of the assumed 2025 Member Distribution shown on the Att A tab.
- d. Please provide a detailed quantitative exhibit displaying the development of the 2023 Normalized Allowed PMPM shown in column F on the Att A tab. Please demonstrate all calculations.
- e. Please provide a quantitative exhibit displaying the development of the average 2023 and 2025 network factors used in the development of the “Changes in Network” Index Rate Adjustment shown on the Att A tab.
- f. [REDACTED]
- g. Please provide a detailed quantitative exhibit supporting the facility as a % of total medical dollars in row 18 of the Att H tab.
- h. Please explain the reason for the slight difference between the Final Demographic Factors included in cells J90 and K90 on the Att E tab and the CY2023 and CY2025 Demographic Factors in cells C33 and C34 of the Att A tab.
- i. Based on Att G, the actual 3-yr total MLR in cell C15 is below 80%. Please explain why the response to standard question 9c indicates that no MLR rebates are payable for the three-year period.
- j. Please provide an exhibit in Excel comparing the actual 2023 member distribution and normalized allowed PMPM values from Att A to the projected 2023 values from Att A of the PY23 filing (HGHM-133249767).

Response:

- a. Please see the attached exhibit labeled Q5a Response for the development of the “Change in Other” factor and the expected change in pharmacy rebates. The factors used in the development of the “Change in Other” factor can be found in Table 1. The estimated pharmacy rebate PMPMs for both the base experience period and the projection period can be found in Table 2 of the Q5a Response exhibit. This table also demonstrates how the experience period pharmacy rebate dollars in Table 4 of the PAAM Exhibits can be derived from the experience period PMPM.

Table 3 of the Q5a Response exhibit demonstrates the quantitative development of the change in pharmacy rebate factor that is shown in Table 1.

- b. Please see the attached exhibit labeled Q5b Response for the development of the 2023 normalized allowed PMPM (column D) in Att A.
- c. Please see the attached exhibit labeled Q5c Response for the development of the assumed 2025 member distribution shown in Att A. A definition of each category is described in the response to Question 5d. The development starts with the actual member distribution by population source as of the 2024 snapshot date. The assumed values that were incorporated into Att A reflect very minor adjustments in order to use more rounded assumptions.
- d. Please see the attached exhibit labeled Q5d Response for the development of the 2023 normalized allowed PMPMs (column F) in Att A. The composite PMPM is derived using the 2/1/2024 enrollment profile which is categorized into the following sources:

Renewal

- This represents our 2023 ACA members that re-enrolled in HCA. The normalized allowed PMPM was calculated by normalizing the allowed PMPM for demographic, network, and benefit richness factors.

Other Highmark

- This represents the 2023 members from other Highmark markets such as group markets that enrolled in HCA. The normalized PMPM was calculated by reviewing its allowed claims, adjusted for benefit differential if needed and then normalized for demographic, network, and benefit richness factors.

Prior ACA

- This represents our 2022 ACA members that lapsed in 2023 and now reenrolled in HCA. We reviewed their 2022 ACA claims, trended to 2023, and used this as starting point to approximate the 2023 allowed claims. The normalized allowed PMPM was then calculated by normalizing the allowed PMPM for demographic, network, and benefit richness factors.

New

- This represents the catch-all category of the remaining members that enrolled in HCA. The adjusted allowed claims PMPM for the “New” segment was set such that its normalized allowed PMPM is equal to the “Renewal” segment.

Since the underlying claims only reflected the claims experience of the 2/1/2024 active enrollment, we added a death load adjustment to the underlying allowed PMPMs to capture the incremental claims of terminated members due to death as developed from historical experience. In conjunction with the claim adjustment, we also adjusted the risk scores as discussed further in the response to Question 8c below. These adjustments are necessary to account for the fact that the underlying claim projection is based on the active enrollment snapshot as of 2/1/2024. Absent this adjustment, the claim projection and risk scores would be artificially low because they would exclude the experience associated with members who lapse due to death each year.

- e. Please see the attached exhibit labeled Q5e Response for the development of the average 2023 and 2025 network factors. As demonstrated in Att A of the rate filing, these two factors are used to develop the “change in network” factor shown in Table 5 of the PA Rate Template file.
- f. [REDACTED]
- g. [REDACTED]
- h. The experience period demographic factor in Att A is a dollar weighted factor based solely on projected EHB claims, while the factor in Att E is weighted on all claims.
- i. The MLRs in Att G do not exactly mimic the federal MLR formula. The MLRs in Att G follow the more traditional MLR definition (i.e. claims / revenue). The federal MLR formula used for MLR rebate calculation purposes makes adjustments for quality improvement expenses, taxes/fees, and includes risk adjustment in the numerator rather than the denominator. Furthermore, there is a credibility adjustment applied to the federal MLR formula. For reference, the actual three-year total MLR reported by the Company on its 2022 MLR Annual Reporting Form was 80.8%. Therefore, no MLR rebates were payable for the three-year period ending calendar year 2022.
- j. Please see the attached exhibit labeled Q5j Response for the comparison of 2023 actual and projected membership distributions. The response to Q5d details the development of the normalized allowed PMPMs in Att A. These normalized allowed PMPMs are used to evaluate the morbidity factor, reflecting the change in the population mix/claim levels and are therefore not projected values.

6. In the file “1A-DP-24-HCA Screenshots and Certifications.pdf” on page 3, should the year of data listed under the Description of the standardized plan population data used be 2023 instead of 2022? If not, please explain why this differs from the data listed for the other plans.

Response:

Page 3 of the file “1A-DP-24-HCA Screenshots and Certifications.pdf” uses the 2022 population because we rely on our internal pharmacy pricing team for this information and the 2022 data was readily available. This differs from the other plans because the plan on page 3 uses Method 156.135(b)(3) while the remaining plans use Method 156.125(b)(2) and required a different analysis.

7. Please explain what adjustments are applied to the metallic AV values to generate the pricing AV values.

Response:

It is not applicable to apply adjustments to the metallic AV values to generate the pricing AV values. The metallic AV values and pricing AV values are produced using two independent processes and models.

8. The following questions relate to the risk transfer assumption:

- a. Please provide a detailed quantitative exhibit displaying the development of the Company-specific average PLRS, ARF, GCF, ID, AV, and premium PMPM assumptions underlying the projected 2025 risk adjustment transfer, as shown in Attachment B.**
- b. Please provide a detailed quantitative exhibit displaying the development of the market wide average PLRS, ARF, GCF, ID, AV, and premium PMPM assumptions underlying the projected 2025 risk adjustment transfer, as shown in Attachment B.**
- c. To the extent that a portion of the Company's morbidity adjustment reflects anticipated changes in morbidity specific to the Company's internal book of business (i.e., in addition to, or rather than, any changes in the morbidity of the overall PA Individual ACA market), please explain how the morbidity adjustment was considered in the development of the Company's risk adjustment transfer assumption.**
- d. Please provide a detailed quantitative exhibit displaying the anticipated receipt and assessment associated with the high-cost risk pool component of the projected risk transfer results.**
- e. The risk adjustment calculations for the Non-Catastrophic Pool included on the Att B tab match with the calculations shown on the VII Risk Adjustment tab of the PAAM Exhibits. The number contained in cell R25 of the Att B tab doesn't match the final risk adjustment number in cell C21 of the VII Risk Adjustment tab of the PAAM Exhibits.**

Based on the actuarial memo, "Table 16 cell C17 includes a manual adjustment of \$0.53 PMPM to account for the inclusion of the catastrophic pool, conversion from billable to total membership, and an adjustment for the composite effect of catastrophic eligibility and benefits in addition to EHB". Att B only appears to adjust for the inclusion of the catastrophic pool and the conversion from billable to total membership and the adjustments for "composite effect of catastrophic eligibility and benefits in addition to EHB" isn't included.

If this is the case, please confirm and submit a revised version of the supplemental exhibits with these adjustments incorporated on the Att B tab along with the net impact of the High-Cost Risk Pool program so that the Att B value matches the final Table 16 value.

Response:

- a. Please see the attached exhibit labeled Q8a Response for the development of the Company-specific assumptions underlying the projected 2025 risk transfer. The Company-specific PLRS, ARF, GCF, IDF, and AV assumptions shown in Att B and used to develop the projected 2025**

risk transfer were developed for the population of members that comprised the normalized allowed PMPM development discussed in the response to Question 5d above.

- b. The statewide factors included in rows 13 and 18 of Att B for the 2025 projection were developed by starting with information from the following sources: (1) the CMS Interim Report for 2023 released on March 14, 2024 and (2) the PID's 1Q2024 Enrollment Survey released on May 7, 2024. The attached exhibit labeled Q8b Response demonstrates how we used the information from these sources to derive the 2025 statewide average estimates shown in Att B. Most of the assumed 2025 statewide factors are identical to our best estimates of the 2023 or 2024 statewide factors. The only exceptions are the statewide average premium assumptions. We anticipate that the statewide average premium will be approximately 12% higher in 2025 compared to 2023 due to rate increase requests for the 2024 and 2025 benefit years.
 - c. The Company-specific PLRS factors shown in the attached exhibit labeled Q8a Response were developed using the 2023 HHS-HCC risk adjustment model. The risk scores were increased by 3.0% in conjunction with the death load claim adjustment discussed in the response to Question 5d above. We selected a 3.0% risk score load based on a review of the data.
 - d. Please see the attached exhibit labeled Q8d Response for the development of the high cost risk pool component of the projected risk transfer results. We relied upon estimates from an external actuarial consulting company's study to inform our selection of an appropriate percentage of premium charge for 2025. The external study was based upon data collected by issuers across the country and included over 184 million submitted member months. Given the extremely volatile and unpredictable nature of claims in excess of the \$1 million attachment point, as a simplifying assumption we assumed there would be no anticipated reimbursements in 2025.
 - e. A revised version of Att B has been submitted that adjusts for the composite effect of catastrophic eligibility and benefits in addition to EHB along with the net impact of the High-Cost Risk Pool program.
- 9. The following objections relate to the file "2025_Indiv_HCA_PAAMExhibits_051524.xlsm":**
- a. Please provide a detailed quantitative exhibit supporting the \$7.03 projected allowed non-EHB claims PMPM from cell C38 on the II Rate Development & Change tab.**
 - b. Please provide a detailed quantitative exhibit supporting the 2.84% expense for quality improvement initiatives from cell C52 on the II Rate Development & Change tab.**
 - c. In Table 8, the URRT Other change indicated in cell F80 is 9.1%. Please explain what factors are driving this change and provide a detailed quantitative exhibit supporting it.**
 - d. Please provide a detailed quantitative exhibit walking through the development of the projected incurred reinsurance recoveries PMPM included in cell C33 of the II Rate Development & Change tab.**
 - e. Please provide a detailed quantitative exhibit demonstrating the change in miscellaneous items shown in cell F98 in Table 8 on the II Rate Development & Change tab.**

- f. Please provide a detailed quantitative exhibit supporting the change in the paid-to-allowed ratio from 2024 to 2025 shown in cells J71 and K71 of Table 9 on the II Rate Development and Change tab.**
- g. In the PY24 filing, the completion factor listed in Table 4 for December of the most recent year is .9558. For the PY25 filing it's .8942. Please explain the reason for this change.**
- h. Please provide a detailed quantitative exhibit in Excel supporting the projected increase in membership compared to current membership shown in Table 1. Please explain what factors are driving the difference.**

Response:

- a. Please see the attached exhibit labeled Q9a Response for the development of the projected allowed non-EHB claims PMPM.
- b. Please see the attached exhibit labeled Q9b Response for the development of the quality improvement initiatives expense percentage using the most recent actual QIA data available.
- c. Please see the attached exhibit labeled Q9c Response for the components of the 9.1% change in cell F80 of Table 8. The main driver is change in network.
- d. Please see the attached exhibit labeled Q9d Response for the development of the projected incurred reinsurance recoveries PMPM.
- e. Based on our preliminary research, we believe the small amount of impact captured on the Change in Miscellaneous Items line of Table 8 of the PAAM Exhibits is largely a function of differences in the ordering of the plan level adjustment components between Table 8 and Table 10. For example, Table 8 begins with Network (line E1), then applies Pricing AV (line E2), etc. On the other hand, Table 10 begins with Pricing AV (column K), then applies Benefit Richness (column L), etc. If it would be helpful to the Department, after this current pricing cycle we could attempt to create a modified version of the PAAM Exhibits that would correct for (or at least minimize) this issue.
- f. The primary driver of the change in the paid-to-allowed ratio from 2024 to 2025 is a change in enrollment mix by metal level. The attached exhibit labeled Q9f Response shows the Platinum and Silver-On exchange membership has increased from 2024 to 2025 while the Gold and Bronze membership has decreased from 2024 to 2025. Since Platinum and Silver-On exchange plans have a higher paid-to-allowed ratio than Gold and Bronze plans, the paid-to-allowed ratio in row 71 of Table 9 on the II Rate Development and Change tab has increased.
- g. Several factors can influence completion factors. These factors include paid claims levels, inventory levels, and other potential operational issues. As a result, there is a broad range of possible completion factors for any given month. The Company's analysis shows that both factors are within the reasonable range.

- h. The primary driver of membership growth for 2024 was the expansion of the ACA market due to Medicaid Redeterminations, which began in mid-2023. This trend is expected to continue into 2025 due to a "long tail" effect from the associated Special Enrollment Periods (SEPs) for individuals who lost Medicaid coverage as part of the PHE Unwinding (active through Fall 2024) and those under 150% FPL (indefinite).

While the overall membership increase from 2023 to 2025 is 39%, it's important to note that ~27% of this growth occurred (or is anticipated to occur) for 2024. Therefore, the projected increase from 2024 to 2025 is approximately 10%, representing less than half of the growth already experienced.

The 2024 to 2025 growth is attributed to both the conclusion of Medicaid Redeterminations and associated SEPs, as well as strong anticipated competitive positioning in key counties where price relativity with the second lowest cost silver plan is crucial.

10. Please provide an exhibit in Excel showing prior year lapse rates broken out by age band and metal level.

Response:

Please see the attached exhibit labeled Q10 Response showing the prior year lapse rates by age band and metal level.

11. Please provide a detailed quantitative exhibit walking from the experience period loss ratio in cell M38 to the projected loss ratio for the projection period. Please include applicable adjustments for the prior year increase, trend, single risk pool adjustment factors, administrative expenses, and taxes and fees. Please develop a projected loss ratio both with and without the current requested increase. Please explain any additional adjustments included in the demonstration.

Response:

Please see the attached exhibit labeled Q11 Response which shows a walk from the experience period loss ratio in cell M38 of Table 2 to the projected loss ratio for the projection period.

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 2a

Incurred Month	Members	Medical					Rx									
		Allowed PMPM	AGING	Cumul Factor	Monthly Factor	Pricing PMPM	12 Mo. PMPM	Annual Trend	Members	Allowed PMPM	AGING	Cumul Factor	Monthly Factor	Pricing PMPM	12 Mo. PMPM	Annual Trend
1/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
2/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
3/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
4/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
5/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
6/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
7/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
8/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
9/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
10/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
11/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
12/18	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
1/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
2/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
3/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
4/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
5/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
6/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
7/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
8/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
9/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
10/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
11/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
12/19	0		1.000	1.000	1.000				0		1.000	1.000	1.000			
1/20	5,978	\$245.17	1.000	1.207	0.828	\$203.06	\$203.06		5,978	\$83.01	1.000	1.274	0.785	\$65.18	\$65.18	
2/20	6,063	\$207.31	1.000	1.214	0.824	\$170.79	\$186.81		6,063	\$93.48	1.000	1.319	0.758	\$70.90	\$68.06	
3/20	6,287	\$217.43	1.000	1.205	0.830	\$180.47	\$184.63		6,287	\$123.18	1.000	1.352	0.740	\$91.14	\$75.97	
4/20	6,552	\$141.57	1.000	1.184	0.844	\$119.54	\$167.49		6,552	\$110.86	1.000	1.365	0.733	\$81.23	\$77.36	
5/20	6,762	\$185.90	1.000	1.149	0.871	\$161.83	\$166.28		6,762	\$111.64	1.000	1.391	0.719	\$80.27	\$77.98	
6/20	6,914	\$225.74	1.000	1.128	0.887	\$200.13	\$172.35		6,914	\$139.75	1.000	1.372	0.729	\$101.85	\$82.26	
7/20	6,919	\$263.17	1.000	1.131	0.884	\$232.60	\$181.52		6,919	\$129.50	1.000	1.365	0.733	\$94.89	\$84.18	
8/20	6,825	\$296.59	1.000	1.124	0.890	\$263.96	\$192.28		6,825	\$128.12	1.000	1.381	0.724	\$92.77	\$85.30	
9/20	6,977	\$239.61	1.000	1.106	0.904	\$216.66	\$195.15		6,977	\$127.09	1.000	1.355	0.738	\$93.81	\$86.30	
10/20	6,993	\$227.98	1.000	1.099	0.910	\$207.52	\$196.45		6,993	\$146.74	1.000	1.353	0.739	\$108.46	\$88.64	
11/20	6,993	\$238.68	1.000	1.078	0.928	\$221.47	\$198.84		6,993	\$130.90	1.000	1.293	0.774	\$101.25	\$89.85	
12/20	6,847	\$249.11	1.000	1.082	0.924	\$230.28	\$201.53		6,847	\$151.53	1.000	1.310	0.764	\$115.70	\$92.06	
1/21	9,260	\$248.89	1.000	1.086	0.921	\$229.15	\$204.49	0.7%	9,260	\$113.91	1.000	1.188	0.842	\$95.89	\$94.41	44.9%
2/21	9,963	\$271.66	1.000	1.096	0.912	\$247.82	\$211.77	13.4%	9,963	\$116.86	1.000	1.143	0.875	\$102.27	\$96.94	42.4%
3/21	9,954	\$321.32	1.000	1.107	0.904	\$290.35	\$222.53	20.5%	9,954	\$147.13	1.000	1.160	0.862	\$126.82	\$100.61	32.4%
4/21	10,135	\$272.36	1.000	1.088	0.919	\$250.27	\$232.65	38.9%	10,135	\$162.49	1.000	1.304	0.767	\$124.58	\$104.52	35.1%
5/21	10,437	\$252.49	1.000	1.087	0.920	\$232.37	\$237.49	42.8%	10,437	\$160.58	1.000	1.293	0.773	\$124.14	\$108.28	38.9%
6/21	10,694	\$305.47	1.000	1.081	0.925	\$282.66	\$244.76	42.0%	10,694	\$160.79	1.000	1.303	0.768	\$123.42	\$110.30	34.1%
7/21	11,017	\$321.08	1.000	1.081	0.925	\$296.92	\$250.97	38.3%	11,017	\$174.27	1.000	1.317	0.760	\$132.36	\$113.60	34.9%
8/21	11,286	\$279.88	1.000	1.078	0.927	\$259.55	\$251.04	30.6%	11,286	\$174.08	1.000	1.334	0.750	\$130.53	\$116.61	36.7%
9/21	11,572	\$311.25	1.000	1.082	0.924	\$287.65	\$256.80	31.6%	11,572	\$172.06	1.000	1.319	0.758	\$130.46	\$119.38	38.3%
10/21	11,614	\$283.95	1.000	1.074	0.931	\$264.29	\$260.41	32.6%	11,614	\$165.07	1.000	1.311	0.763	\$125.94	\$120.66	36.1%
11/21	11,560	\$269.15	1.000	1.062	0.941	\$253.38	\$261.94	31.7%	11,560	\$190.54	1.000	1.324	0.755	\$143.88	\$123.91	37.9%
12/21	11,478	\$260.57	1.000	1.066	0.938	\$244.38	\$262.06	30.0%	11,478	\$201.70	1.000	1.333	0.750	\$151.31	\$126.78	37.7%
1/22	14,239	\$245.11	1.000	1.031	0.970	\$237.70	\$261.75	28.0%	14,239	\$146.01	1.000	1.110	0.901	\$131.49	\$129.42	37.1%
2/22	15,755	\$268.30	1.000	1.009	0.991	\$265.88	\$263.21	24.3%	15,755	\$127.73	1.000	1.039	0.962	\$122.91	\$130.62	34.7%
3/22	15,546	\$271.48	1.000	1.002	0.998	\$270.89	\$262.17	17.8%	15,546	\$153.31	1.000	1.054	0.949	\$145.48	\$132.47	31.7%
4/22	15,500	\$250.38	1.000	0.993	1.007	\$252.21	\$261.94	12.6%	15,500	\$142.76	1.000	1.069	0.936	\$133.58	\$133.11	27.4%
5/22	15,405	\$257.47	1.000	0.996	1.004	\$258.39	\$263.58	11.0%	15,405	\$148.44	1.000	1.083	0.923	\$137.06	\$134.11	23.9%
6/22	15,374	\$378.80	1.000	1.002	0.998	\$378.11	\$273.28	11.7%	15,374	\$152.88	1.000	1.092	0.916	\$140.00	\$135.38	22.7%
7/22	15,546	\$232.84	1.000	0.995	1.005	\$234.06	\$268.01	6.8%	15,546	\$142.03	1.000	1.063	0.941	\$133.61	\$135.42	19.2%
8/22	15,595	\$268.42	1.000	0.995	1.005	\$269.70	\$268.73	7.0%	15,595	\$165.00	1.000	1.042	0.960	\$158.38	\$137.86	18.2%
9/22	15,600	\$294.38	1.000	0.988	1.012	\$297.97	\$270.10	5.2%	15,600	\$151.56	1.000	1.036	0.966	\$146.35	\$139.12	16.5%
10/22	15,520	\$259.74	1.000	0.980	1.020	\$264.92	\$270.02	3.7%	15,520	\$163.17	1.000	1.041	0.960	\$156.70	\$141.52	17.3%
11/22	15,460	\$262.59	1.000	0.981	1.019	\$267.59	\$270.88	3.4%	15,460	\$158.93	1.000	1.038	0.964	\$153.14	\$142.37	14.9%
12/22	15,284	\$311.88	1.000	0.978	1.022	\$318.75	\$276.48	5.5%	15,284	\$151.87	1.000	1.043	0.959	\$145.66	\$142.08	12.1%
1/23	18,386	\$288.70	1.000	0.933	1.072	\$309.55	\$282.62	8.0%	18,386	\$144.99	1.000	0.956	1.046	\$151.66	\$143.81	11.1%
2/23	19,968	\$236.16	1.000	0.917	1.090	\$257.42	\$281.38	6.9%	19,968	\$126.35	1.000	0.923	1.083	\$136.88	\$144.80	10.9%
3/23	19,873	\$291.14	1.000	0.925	1.081	\$314.86	\$285.58	8.9%	19,873	\$161.23	1.000	0.931	1.075	\$173.26	\$147.61	11.4%
4/23	19,708	\$263.64	1.000	0.920	1.087	\$286.46	\$288.23	10.0%	19,708	\$150.50	1.000	0.963	1.039	\$156.34	\$149.54	12.3%
5/23	19,700	\$313.54	1.000	0.925	1.081	\$338.96	\$295.31	12.0%	19,700	\$182.59	1.000	0.947	1.056	\$192.73	\$154.61	15.3%
6/23	19,882	\$312.89	1.000	0.934	1.071	\$335.03	\$293.02	7.2%	19,882	\$177.45	1.000	0.955	1.047	\$185.80	\$158.62	17.2%
7/23	20,415	\$274.61	1.000	0.943	1.061	\$291.27	\$297.11	10.9%	20,415	\$159.84	1.000	0.955	1.047	\$167.36	\$161.25	19.1%
8/23	20,834	\$286.18	1.000	0.955	1.047	\$299.55	\$299.27	11.4%	20,834	\$185.42	1.000	0.956	1.046	\$193.96	\$164.54	19.4%
9/23	21,297	\$282.18	1.000	0.958	1.044	\$294.51	\$298.92	10.7%	21,297	\$175.18	1.000	0.940	1.063	\$186.29	\$167.84	20.6%
10/23	21,442	\$299.73	1.000	0.950	1.052	\$315.38	\$302.71	12.1%	21,442	\$191.54	1.000	0.930	1.075	\$205.94	\$172.11	21.6%
11/23	21,903	\$304.78	1.000	0.963	1.038	\$316.47	\$306.25	13.1%	21,903	\$169.50	1.000	0.935	1.069	\$181.22	\$174.17	22.3%
12/23	22,074	\$285.08	1.000	0.978	1.022	\$291.34	\$304.13	10.0%	22,074	\$173.99	1.000	0.935	1.070	\$186.18	\$177.03	24.6%
1/24	22,074	\$279.41	1.000	0.864	1.158	\$323.47	\$305.44	8.1%	22,074	\$182.84	1.000	0.990	1.010	\$184.70	\$179.58	24.9%
2/24	22,074	\$309.16	1.000	0.928	1.077	\$333.07	\$311.68	10.8%	22,074	\$158.25	1.000	0.892	1.121	\$177.35	\$182.77	26.2%
3/24	22,074	\$309.37	1.000	0.926	1.080	\$334.13	\$313.39	9.7%	22,074	\$173.13	1.000	0.892	1.121	\$194.02	\$184.50	25.0%
4/24	22,074	\$302.71	1.000	0.923	1.084	\$328.06	\$316.73	9.9%	22,074	\$177.17	1.000	0.892				

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 2c

Description	Medical	Rx	Total	Notes
2023 Allowed 12-Month PMPM	\$ 304.13	\$ 177.03	\$ 481.15	Source is supporting monthly PMPMs streams.
2025 Allowed 12-Month PMPM	\$ 359.05	\$ 218.73	\$ 577.77	Source is supporting monthly PMPMs streams.
Allowed Annual Trend 2023 to 2025			9.6%	Reasonable range around deterministic estimate applied including consideration for enrollment changes
Actuarial Judgment			(0.5%)	
Required Annual Trend			9.0%	

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 5a

Table 1

Description	Factor
Change in Rx Rebates	0.979
Change in Hospital/Physician Settlements	1.002
Change in Benefit Richness	0.993
Total "Change in Other"	0.974

Table 2

Description	2023	2025
Prescription Drug Allowed PMPM (w/ Rx Rebates; URRR Wksh1)		
Rx Rebates PMPM		
Member Months		
Rx Rebate Dollars (Table 4)		

Table 3

Description	Medical	Rx	Total
Change in Rx Rebates	1.000	0.922	
Change in Other (Table 5)			0.974
Adjusted Projected Allowed EHB Claims PMPM (Table 5)			\$491.89
Adjusted Projected Allowed EHB Claims PMPM (prior to change in other)	\$366.29	\$138.77	\$505.05
Final Change in Rx Rebates			0.979

Highmark Coverage Advantage**Individual Market****Response to Objection 1 - Question 5b**

	HCA
2023 Allowed PMPM	\$454.49
Demographic Factor	1.614
Network Factor	0.724
Benefit Richness Factor	1.110
Normalized Allowed PMPM	\$350.22

Highmark Coverage Advantage**Individual Market****Response to Objection 1 - Question 5c**

Population Source	Member Distribution	
	2024 Actual	2025 Assumed
HCA ACA	75.6%	76.0%
Other Highmark	3.0%	3.0%
Prior ACA	1.0%	1.0%
<u>New-to-Blue</u>	<u>20.4%</u>	<u>20.0%</u>
Subtotal	100.0%	100.0%

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 5d

	HCA				Combined
	Renewal	Other Highmark	Prior ACA	New	Total
2025 Member Months	258,151	10,190	3,397	67,934	339,672
2025 Member Months %	76.0%	3.0%	1.0%	20.0%	100.0%
2023 or 2022 Allowed PMPM*	\$449.09	\$555.99	\$439.13	N/A	
Trend from 2021 to 2022	N/A	N/A	1.081	N/A	
Death Load Adjustment	1.030	1.030	1.030	N/A	
Adjusted Allowed PMPM	\$462.56	\$572.67	\$488.94	\$535.70	\$480.76
Demographic Factor	1.667	1.604	1.508	1.459	1.612
Network Factor	0.735	1.000	1.000	1.000	0.797
Benefit Richness Factor	1.111	1.080	1.080	1.080	1.104
Normalized Allowed PMPM	\$339.95	\$330.59	\$300.21	\$339.95	\$339.28

*The 'Renewal' & 'Other Highmark' sources start with 2023 experience. The 'Prior ACA' source starts with 2022 experience.

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 5e

Table 1 - 2023 Development

HIOS Plan ID	2023	2023 Network Factors				
	Member Months	Medical	Rx	Capitation	Dental	Total
79279PA0080008	84,370	0.620	1.000	1.000	1.000	
79279PA0130005	15,988	0.620	1.000	1.000	1.000	
79279PA0140001	40,948	0.620	1.000	1.000	1.000	
79279PA0150001	18,411	0.620	1.000	1.000	1.000	
79279PA0260001	1,607	0.620	1.000	1.000	1.000	
79279PA0270001	769	0.620	1.000	1.000	1.000	
79279PA0090004	4,149	0.620	1.000	1.000	1.000	
79279PA0140002	3,639	0.620	1.000	1.000	1.000	
79279PA0150002	2,477	0.620	1.000	1.000	1.000	
79279PA0080012	35,307	0.620	1.000	1.000	1.000	
79279PA0080010	2,123	0.620	1.000	1.000	1.000	
79279PA0130004	737	0.620	1.000	1.000	1.000	
79279PA0080001	19,522	0.620	1.000	1.000	1.000	
79279PA0130002	3,201	0.620	1.000	1.000	1.000	
79279PA0090001	5,010	0.620	1.000	1.000	1.000	
79279PA0080011	4,486	0.620	1.000	1.000	1.000	
79279PA0100001	2,136	0.620	1.000	1.000	1.000	
Total	244,880	0.620	1.000	1.000	1.000	0.698
Weight		79.41%	20.43%	0.03%	0.13%	100.0%

Table 2 - 2025 Development

HIOS Plan ID	2025 Projected	Induced	2025 Network Factors				
	Member Months	Utilization Factor	Medical	Rx	Capitation	Dental	Total
79279PA0140003	3,036	1.183	0.677	1.000	1.000	1.000	
79279PA0150003	1,788	1.183	0.677	1.000	1.000	1.000	
79279PA0080008	110,484	1.105	0.677	1.000	1.000	1.000	
79279PA0130005	28,092	1.105	0.677	1.000	1.000	1.000	
79279PA0140001	47,892	1.119	0.677	1.000	1.000	1.000	
79279PA0150001	23,508	1.119	0.677	1.000	1.000	1.000	
79279PA0090004	6,912	1.073	0.677	1.000	1.000	1.000	
79279PA0080013	10,380	1.078	0.677	1.000	1.000	1.000	
79279PA0140002	6,312	1.157	0.677	1.000	1.000	1.000	
79279PA0150002	6,252	1.157	0.677	1.000	1.000	1.000	
79279PA0080012	55,848	1.126	0.677	1.000	1.000	1.000	
79279PA0080010	3,084	1.033	0.677	1.000	1.000	1.000	
79279PA0130004	1,140	1.033	0.677	1.000	1.000	1.000	
79279PA0080001	14,004	1.021	0.677	1.000	1.000	1.000	
79279PA0130002	4,716	1.021	0.677	1.000	1.000	1.000	
79279PA0090001	4,632	1.024	0.677	1.000	1.000	1.000	
79279PA0080011	8,904	1.003	0.677	1.000	1.000	1.000	
79279PA0100001	2,688	0.997	0.677	1.000	1.000	1.000	
Total	339,672		0.677	1.000	1.000	1.000	0.744
Weight			79.41%	20.43%	0.03%	0.13%	100.0%

Table 3 - Development of Change in Network Factor

2023 Network Factor	0.698
2025 Network Factor	0.744
Change in Network Factor	1.065

Highmark Coverage Advantage**Individual Market****Response to Objection 1 - Question 5g**

Service Category	Weight
Inpatient Hospital (Table 3)	13.3%
Outpatient Hospital (Table 3)	19.1%
Professional (Table 3)	36.3%
<u>Other Medical (Table 3)</u>	<u>2.0%</u>
Total Medical	70.7%
Facility as a % of Total Medical	45.8%

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 5j

Population Source	2023 Member Distribution	
	Actual	Assumed
HCA ACA	67.5%	67.0%
Other Highmark	6.1%	6.0%
Prior ACA	0.5%	1.0%
<u>New-to-Blue</u>	<u>26.0%</u>	<u>26.0%</u>
Subtotal	100.0%	100.0%

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 8a

	HCA				Combined
	Renewal	Other Highmark	Prior ACA	New	Total
2025 Billable Member Months	257,775	10,175	3,392	67,835	339,177
2025 Billable Member Months %	76.0%	3.0%	1.0%	20.0%	100.0%
2025 Company-specific Factors					
PLRS					
ARF					
GCF					
IDF					
AV					

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 8b

Table 1

Statewide Assumptions	Starting Value for 2025 Projection	Source of Starting Value	Adjustment for 2025	2025 Factor on Attachment B
Non-Catastrophic Pool				
Average Premium		2023 Estimate based on CMS Interim Report		
HHS Risk Score		2022 Actual based on CMS Final Report		
Allowable Rating Factor		2023 Estimate based on CMS Interim Report		
Geographic Cost Factor		2023 Estimate based on CMS Interim Report		
Induced Demand Factor		1Q 2024 PID Enrollment Survey (see Table 2 below)		
Actuarial Value		1Q 2024 PID Enrollment Survey (see Table 2 below)		
Catastrophic Pool				
State Avg Premium		2023 Estimate based on CMS Interim Report		
HHS Risk Score		2022 Actual based on CMS Final Report		
Allowable Rating Factor		2023 Estimate based on CMS Interim Report		
Geographic Cost Factor		2023 Estimate based on CMS Interim Report		
Induced Demand Factor		1Q 2024 PID Enrollment Survey (see Table 2 below)		
Actuarial Value		1Q 2024 PID Enrollment Survey (see Table 2 below)		

Table 2

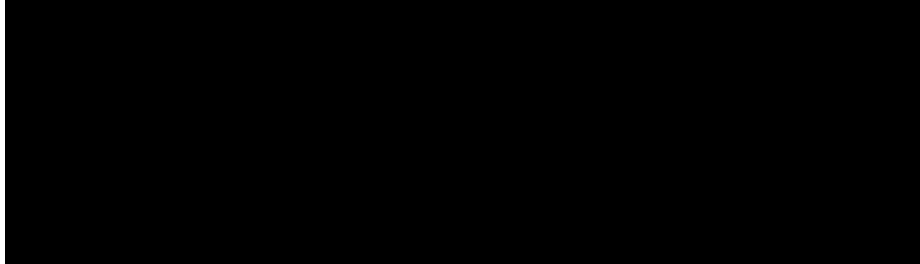
Metal	1Q 2024 Enrollment*		AV Factors	ID Factors
	Member Mths	%		
Gold			0.80	1.08
Silver			0.70	1.03
Bronze			0.60	1.00
Catastrophic			0.57	1.00
Total				

*Source: May 7, 2024 email from PID

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 8d



Highmark Coverage Advantage**Individual Market****Response to Objection 1 - Question 9a**

Description	Value
Adjusted Projected Allowed EHB Claims PMPM (Table 5)	\$491.89
Catastrophic Eligibility Adjustment (Table 5)	0.999
<u>Benefits in Addition to EHB PMPM</u>	<u>\$6.10</u>
Non-EHB Adjustment factor	1.012
Market-Adjusted Projected Allowed EHB Claims PMPM (Table 5)	\$565.89
Projected Allowed Non-EHB Claims PMPM (Table 5)	\$7.03

Highmark Coverage Advantage**Individual Market****Response to Objection 1 - Question 9b**

Description	2023 SHCE* HCA
Adjusted Premium Earned (Line 1.8)	\$100,210,427
Improving HC Quality Expenses (Line 6.6)	\$2,847,710
Quality Improvement as % of Premium	2.84%

*SHCE = Supplemental Health Care Exhibit

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 9c

Description	2024	2025	% Difference
A. Calibrated Plan Adjusted Index Rate (PMPM) (Table 8)	\$294.86	\$333.06	13.0%
D. Change in Normalized Allowed Claims Adjustment Components (Table 8)			
D1. Base period allowed claims after normalization (Table 8)	\$310.77	\$312.98	0.7%
D2. URRT Trend (Table 8)	\$59.59	\$58.87	(0.2%)
D3. URRT Morbidity (Table 8)	(\$3.49)	(\$11.59)	(2.7%)
D4. URRT Other (Table 8)	(\$13.83)	\$12.91	9.1%
URRT Trend (Total Applied Trend Factor) (Table 9)	1.192	1.188	
URRT Morbidity (Table 9)	0.991	0.969	
URRT "Other" (Table 9)	0.962	1.036	
Change in Demographics (Table 5)	1.006	0.999	
Change in Network (Table 5)	1.000	1.065	
Change in Benefits (Table 5)	1.000	1.000	
Change in Other (Table 5)	0.956	0.974	

Highmark Coverage Advantage**Individual Market****Response to Objection 1 - Question 9d**

Description	Value
Adjusted Projected Allowed EHB Claims PMPM (Table 5)	\$491.89
Projected Paid to Allowed Ratio (Table 5)	0.831
Projected Reinsurance Incurred Claim Impact	4.5%
Projected Incurred Reinsurance Recoveries PMPM	\$18.42

Highmark Coverage Advantage**Individual Market****Response to Objection 1 - Question 9f**

Metal	2024 Projected Membership Distribution	2025 Projected Membership Distribution
Platinum	0%	1%
Gold	69%	67%
Silver-On	16%	20%
Silver-Off	1%	1%
Bronze	13%	9%
Catastrophic	1%	1%
Total	100%	100%

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 10

Lapse Rates					
Age Band	Metal Level				
	Platinum	Gold	Silver	Bronze	Catastrophic
<18					
18-24					
25-29					
30-34					
35-39					
40-44					
45-49					
50-54					
55-59					
60-63					
64+					

Highmark Coverage Advantage

Individual Market

Response to Objection 1 - Question 11

Service Category	Value
2023 MLR (Table 2)	84.7%
Trend	1.188
Morbidity	0.969
Demographics	0.999
Network	1.065
Risk Adjustment	1.052
Reinsurance	0.982
Other	0.969
2024 Average Rate Increase	0.926
Projected 2025 MLR (w/o 2025 Requested Rate Increase)	96.2%
2025 Average Requested Rate Increase	13.0%
Projected 2025 MLR (with 2025 Requested Rate Increase)	85.1%



July 17, 2024

Mr. Michael Hibbert, Actuary
Bureau of Life, Accident & Health Insurance
Commonwealth of Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

Re: Highmark Coverage Advantage 2025 ACA Rate Filing (Individual Market)
Highmark Filing # 1A-DP-24-HCA (SERFF Filing # HGHM-134061466)

Dear Mr. Hibbert:


Enclosed are responses to your July 3, 2024 questions regarding SERFF Filing # HGHM-134061466. We have included your questions along with our responses for your convenience.

Should you have any further questions regarding this Filing, please feel free to contact me at [REDACTED] or via e-mail at: [REDACTED]

Sincerely,

[REDACTED]

Actuarial Manager, Individual Markets
Highmark Inc.

1. The following are related to trend:
 - a. Objection 2f from the prior letter still stands. Please provide a revised version of the PAAM Exhibits with different medical and prescription drug trends.
 - b. Please explain what data is being used in the Q2a tab of the Response Exhibits. If this is adjusted historical HCA ACA data, please explain what adjustments were made. If this is a different data source, please provide the source and list any market types represented in the data.
 - c. The trend exhibits provided in response to Question 2a indicates a ‘Cumul Factor’ was used to determine the pricing PMPM for both medical and pharmacy claims. Please provide a detailed exhibit displaying an example of the underlying assumptions and the quantitative development of these factors for each of medical and pharmacy.
 - d. Please provide a detailed narrative that describes how projected changes in provider contracting arrangements has been considered within the trend development.
 - e. Please provide a detailed narrative that describes how current and future cost of care initiatives have been considered within the trend development. In addition, please provide a detailed quantitative exhibit that summarizes the cost of care initiatives that the company has in place or expects to be in place for PY25 and the favorable adjustment to trend as a result of the initiatives.
 - f. Please provide a detailed narrative that explains why all of 2023 was not utilized in the regression analysis. Please provide an updated version of the table included on the Q2c Response tab that includes all of 2023 in the regression.
 - g. Please clarify the response provided in prior objection 2h. While historical trends may not adequately reflect future trends, the regression analysis is based off of historical claims experience.
 - h. 

Response:

- a. A revised version of the PAAM Exhibits has been uploaded to SERFF in conjunction with these responses. Please see exhibit labeled Q1a Response1 for the development of the trend estimates produced by the regression analysis. Shaded in gray is the time-period used for the regressions. Please see the attached exhibit labeled Q1a Response2 for the development of the separate medical and prescription drug trends. The only adjustment made to the regression trend output was actuarial judgment. This adjustment is described in the exhibit labeled Q1a Response2.

If the Department wants to use the revised version of the PAAM Exhibits with the split medical and drug trends, the Company will need to submit revised versions of all of the other filing documents at a later date.

- b. The data used in Objection 1, Q2a tab is historical HCA data normalized for population mix, cost savings, and provider shift as described in response to Question 1c below.
- c. Please see the attached exhibit labeled Q1c Response for an example of the “Cumul Factor” development. The Population Mix column represents changes in population age, gender, etc. over time. The Cost Savings column represents changes in care costs initiatives value, and the Provider Shift column represents change in provider mix.

- d. The Company's provider contracting area has analyzed future expected contracting changes and provided factors to account for these future changes. The changes are included in the Allowed PMPM streams provided in column C of the Company's Objection 1, Question 2a response dated June 19, 2024.

For in-area facilities, the timing and impact of increases by facility are provided by the provider contracting area. For out of area facilities, we use a standard assumption based on historical data. For professional services, we use the aggregate change in our fee schedule. These are all composited using actual utilization into the provider contracting factors, which are incorporated in the trend development.

- e. The realized value of current cost of care initiatives are included in the base period data. As a result, ongoing and future levels are assumed to increase at the same rate as the trend assumption. Any further improvement due to Highmark's continued efforts to lower cost of care would be reflected in future experience as it emerges and could offset unexpected trend drivers that emerge after the filing trend development.

The attached exhibit labeled Q1c Response has a column showing the cost of care initiatives estimated value that is part of the "Cumul Factor" column in the trend development.

- f. The Company noticed a step up in medical claims spend in the later parts of 2023. By not using the last few months of 2023 in the regression analysis, we implicitly treated this step up as a one-time event. If the step up ultimately is not a one-time event, the underlying trend assumption would be insufficient. Please see the exhibit labeled Q1f Response1 for an updated version of the table that shows all of 2023 in the regression. Additionally, please see the exhibit labeled Q1f Response2 for a summary of the revised annual trend resulting from using all of 2023 in the regression. If the same explicit actuarial judgment adjustment of -0.5% is applied, the revised required annual trend becomes 9.2% (instead of the original 9.0%). This implies that there is an additional *implicit* actuarial judgment adjustment of -0.2% resulting from the decision to not include all of 2023 in the regression analysis.

The Company makes every effort to select filing assumptions that are reasonable individually and produce rates that are reasonable in aggregate. Based on the preceding paragraph, it is evident that the selected trend assumption in the filing is lower than an alternative approach that could also reasonably be justified. If the Department requests changes to other filing assumptions that have the effect of reducing the rates, the trend assumption may need to be increased to ensure the rates are reasonable in aggregate.

- g. The response to Objection 1, question 2h was intended to indicate that using raw historical data without adjustment would not be a recommended approach to developing future trends in most situations. This is due to the factors mentioned in the prior response.

Although it is based on historical data, the regression tool removes components of trend that are more explainable from the observed trend rates and then uses regression analysis to isolate the underlying trend rate. The total trend is the sum of the explainable components and the estimated underlying trend rate.

Highmark's regression analysis approach to trend development in this filing is consistent with the trend development approach in our other ACA filings for PA. Highmark also periodically reviews industry trend surveys and compares our trends for reasonability.

h. [REDACTED]

2. The following are related to the file “1A-DP-24-HCA Objection 1 Response Exhibits.xlsx”:
- a. Using the Rx Rebates PMPM values from cells D19 and C19 of the Q5a Response tab, the implied annual growth rate is [REDACTED]. Please explain why this is significantly different from the rolling 12-month growth rate of Prescription Drug Rebates (Column J from Table 4 of the PAAME), which is 31.7%.
 - b. Please provide a detailed quantitative exhibit in Excel supporting the 0.922 Change in Rx Rebates factor in cell D27 of the Q5a Response tab.
 - c. Please provide an exhibit in Excel supporting the Death Load Adjustment of 1.03 in row 16 of the Q5d Response tab. Additionally, please explain the source of the data used.
 - d. Please provide an exhibit in Excel showing the development of the Demographic, Network, and Benefit Richness factors for each member category shown in rows 19, 20, and 21 of the Q5d Response tab. Additionally, please explain the source of the data used.
 - e. Please provide an exhibit in Excel with data supporting the PLRS, ARF, GCF, IDF, and AV factors in rows 15, 16, 17, 18, and 19 of the Q8a Response tab. Additionally, please explain the source of the data used.

Response:

- a. [REDACTED]
- b. The development of the 0.922 Change in Rx Rebate factor can be found in the formula for cell D27 of the exhibit labeled Q2b Response.
- c. Please see the attached exhibit labeled Q2c Response for the development of the Death Load Adjustment Factor. The data used in the development is experience period data for the most recent calendar year. In this response, the experience period paid claims data represents the 2023 calendar year results across Highmark’s PA individual ACA footprint, with run out through February 2024.
- d. Please see the attached exhibit labeled Q2d Response for the development of the Demographic, Network, and Benefit Richness Factors. Please refer to Objection 1, Question 5d response dated June 19, 2024 for a description of each sources. The Demographic Factor is comprised of the average age factor, average tobacco factor, and average area factor for members identified in the 2/1/2024 snapshot. The Network Factor is derived using the base enrollment period data to dollar weight the average medical and RX network factors. The Benefit Richness Factor for the “Renewal” source is the average induced demand factor and all other sources assumed a richness of 1.08 to align with the assumption that new entrances align most closely to the gold metal level.

- e. When reviewing the response to this question, we determined that the exhibit from Objection 1, Question 8a response dated June 19, 2024 needed revised. Please see the attached exhibit labeled Q2e Response1 for an updated version.

Please see the attached exhibit labeled Q2e Response2 for the development of the PLRS, ARF, GCF, IDF, and AV factors in rows 15, 16, 17, 18, and 19 of the Q2e Response1 tab. Tables 1 and 2 show these factors for the Non-Catastrophic and Catastrophic Pools, respectively. Table 3 calculates the composite factors from Tables 1 and 2. Table 4 is included for illustrative purposes and demonstrates how the factors in Table 1 are calculated for the “Renewal” source. Table 5 calculates the GCF used in Table 4.

The data used is historical Company experience. The only exception is for the PLRS for the “New” source, which is adjusted from the “Renewal” data.

- 3. As a follow-up to objection 7 from the prior objection letter, please explain what factors are causing the differences between the Metallic and Pricing AV values. It is noted that the spread between Metallic and Pricing AVs is largest for both Platinum and Gold level plans. This would suggest that the Company is attempting to include additional induced demand beyond what is prescribed by the Department for these metal levels. Please provide a detailed quantitative exhibit that illustrates that there is no additional induced demand being included in the Platinum and Gold metal level plans.**

Response:

The Metallic AV values are produced using the CMS provided AV calculator. This model is based on nationwide data, whereas the Pricing AV values are developed using a model that is based on the Company's own data. We have found that the CMS AV calculator produces Metallic AV values that are materially lower than the actual paid to allowed ratios that materialize.

The exhibit labeled Q3 Response illustrates these variances for Gold and Bronze plans using 2023 Metallic AVs and actual 2023 experience for the Company. As shown, the Metallic AVs are not adequate for the Company's actual experience. Thus, the variances are generated by observed paid to allowed ratios and not the inclusion of any additional induced demand. Please note that Silver experience is excluded from the exhibit because it is not credible after the CSR variant members are removed.

Regarding the Platinum Pricing AVs, the Company offers similar Platinum plans in the state of Delaware. The actual 2023 paid to allowed ratio for the Delaware Platinum plans was 94.8%. Based on this experience, the Metallic AVs for the Company's Platinum plans are not adequate. Our internal model produces Pricing AVs that are aligned with actual experience.

- 4. What markets are represented in the data used in the external actuarial consulting company's study discussed in response to objection 8b from the prior objection letter?**

Response:

The external actuarial consulting company's study that we utilized is specific to the Individual market. We do not have any additional details beyond the member months previously cited.

5. **The Company notes that the population for this filing has grown over 30% from 2022 to 2023, has continued to grow in 2024 and is projected to further grow in 2025. Please provide a detailed quantitative exhibit and narrative that illustrates what this new Medicaid Expansion membership looks like from a morbidity and age perspective, compared to remaining membership in the block.**
- a. **Please provide a detailed narrative that describes the implications to risk adjustment for this membership growth.**

Response:

Please see the attached exhibit labeled Q5 Response for a comparison of the Medicaid Redetermination membership and the remaining membership. Claims are incurred through December 2023 and paid through January 2024 due to this data being readily available. Please note that the Medicaid Redetermination membership identified in this exhibit is limited to those members who were previously enrolled in our Medicaid MCO.

- a. Medicaid Redetermination members who enrolled in 2023 are already accounted for in the base data. Highmark assumes that its impact to risk adjustment for this membership growth will be similar to the market.

6.

[REDACTED]

Response:

[REDACTED]

7. **In the response to question 8d from the prior objection letter, it is indicated that there are no anticipated reimbursements in 2025 related to the high cost risk pool. On the II.b. Reins Table – Proj there are 13 members with annual incurred claims of \$1,000,000+ for the projection period. Please revise so these are consistent.**

Response:

The [REDACTED] members with annual incurred claims greater than \$1,000,000 shown on the II.b. Reins Table – Proj tab of the PAAM Exhibits represents the total members across all of Highmark’s three Pennsylvania entities after completing and trending the claims from 2023 to 2025. By comparison, we had only [REDACTED] members with annual incurred claims greater than \$1,000,000 across all of Highmark’s three Pennsylvania entities during the most recent 2023 EDGE submission. While standard completion and trend methodologies are appropriate in aggregate, they are likely to be much less accurate when applied to such a narrow portion of the continuance table. Furthermore, there is a significant amount of volatility both in the number of members that reach the HCRP attachment point and in the amount of the incurred claim dollars from year to year. As a result, the Company believes that a more stable adjustment would be to apply the average HCRP reimbursement as a percentage of

premium observed across all of Highmark's three Pennsylvania entities over the last two years (2022 & 2023). This value equals [REDACTED]. We would also appreciate an opportunity to reassess the percentage of premium charge assumption after CMS releases the 2023 HCRP results in the next week. If the Department agrees with this approach, we will update the filing documents to reflect this change in a subsequent submission.

- 8. In response to question 9h from the prior objection letter, it is indicated that The Company anticipates strong competitive positioning in key counties. Which counties specifically are being referred to?**

Response:

[REDACTED]

- 9. Please provide the level of reserve conservatism included in completion factor of .9558 for December of 2022 in the PY24 filing and the level of reserve conservatism included in the completion factor of .8942 for December of 2023 in the current filing. Please explain why this was adjusted.**

Response:

There is a reasonable range around any point estimate completion factor. The December 2022 completion factor from the PY2024 rate filing was Highmark's best estimate completion factor. The completion factor used in the PY2025 rate filing was on the lower half of the reasonable range and includes a 1.2% adjustment from the middle of the range.

- 10. The Completion Factor contained in cell E90 of the I Data tab of the PAAME is .9112 for June 2022. Please explain what is causing this completion factor to be significantly lower than other 2022 completion factors.**

Response:

There is a high dollar claim worth approximately \$650k that is in process but was not paid at the time of the filing. This is driving the low completion factor found in June 2022.

Highmark Coverage Advantage

Individual Market

Response to Objection 2 - Question 1a

Incurred Month	Medical						Rx									
	Members	Allowed PMPM	AGING	Cumul Factor	Monthly Factor	Pricing PMPM	12 Mo. PMPM	Annual Trend	Members	Allowed PMPM	AGING	Cumul Factor	Monthly Factor	Pricing PMPM	12 Mo. PMPM	Annual Trend
1/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
2/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
3/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
4/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
5/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
6/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
7/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
8/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
9/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
10/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
11/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
12/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
1/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
2/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
3/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
4/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
5/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
6/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
7/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
8/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
9/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
10/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
11/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
12/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
1/20	5,978	\$245.17	1,000	1,207	0.828	\$203.06	\$203.06		5,978	\$83.01	1,000	1,274	0.785	\$65.18	\$65.18	
2/20	6,063	\$207.31	1,000	1,214	0.824	\$170.79	\$186.81		6,063	\$93.48	1,000	1,319	0.758	\$70.90	\$68.06	
3/20	6,287	\$217.43	1,000	1,205	0.830	\$180.47	\$184.63		6,287	\$123.18	1,000	1,352	0.740	\$91.14	\$75.97	
4/20	6,552	\$141.57	1,000	1,184	0.844	\$119.54	\$167.49		6,552	\$110.86	1,000	1,365	0.733	\$81.23	\$77.36	
5/20	6,762	\$185.90	1,000	1,149	0.871	\$161.83	\$166.28		6,762	\$111.64	1,000	1,391	0.719	\$80.27	\$77.98	
6/20	6,914	\$225.74	1,000	1,128	0.887	\$200.13	\$172.35		6,914	\$139.75	1,000	1,372	0.729	\$101.85	\$82.26	
7/20	6,919	\$263.17	1,000	1,131	0.884	\$232.60	\$181.52		6,919	\$129.50	1,000	1,365	0.733	\$94.89	\$84.18	
8/20	6,825	\$296.59	1,000	1,124	0.890	\$263.96	\$192.28		6,825	\$128.12	1,000	1,381	0.724	\$92.77	\$85.30	
9/20	6,977	\$239.61	1,000	1,106	0.904	\$216.66	\$195.15		6,977	\$127.09	1,000	1,355	0.738	\$93.81	\$86.30	
10/20	6,993	\$227.98	1,000	1,099	0.910	\$207.52	\$196.45		6,993	\$146.74	1,000	1,353	0.739	\$108.46	\$88.64	
11/20	6,993	\$238.68	1,000	1,078	0.928	\$221.47	\$198.84		6,993	\$130.90	1,000	1,293	0.774	\$101.25	\$89.85	
12/20	6,847	\$249.11	1,000	1,082	0.924	\$230.28	\$201.53		6,847	\$151.53	1,000	1,310	0.764	\$115.70	\$92.06	
1/21	9,260	\$248.89	1,000	1,086	0.921	\$229.15	\$204.49	0.7%	9,260	\$113.91	1,000	1,188	0.842	\$95.89	\$94.41	44.9%
2/21	9,963	\$271.66	1,000	1,096	0.912	\$247.82	\$211.77	13.4%	9,963	\$116.86	1,000	1,143	0.875	\$102.27	\$96.94	42.4%
3/21	9,954	\$321.32	1,000	1,107	0.904	\$290.35	\$222.53	20.5%	9,954	\$147.13	1,000	1,160	0.862	\$126.82	\$100.61	32.4%
4/21	10,135	\$272.36	1,000	1,088	0.919	\$250.27	\$232.65	38.9%	10,135	\$162.49	1,000	1,304	0.767	\$124.58	\$104.52	35.1%
5/21	10,437	\$252.49	1,000	1,087	0.920	\$232.37	\$237.49	42.8%	10,437	\$160.58	1,000	1,293	0.773	\$124.14	\$108.28	38.9%
6/21	10,694	\$305.47	1,000	1,081	0.925	\$282.66	\$244.76	42.0%	10,694	\$160.79	1,000	1,303	0.768	\$123.42	\$110.30	34.1%
7/21	11,017	\$321.08	1,000	1,081	0.925	\$296.92	\$250.97	38.3%	11,017	\$174.27	1,000	1,317	0.760	\$132.36	\$113.60	34.9%
8/21	11,286	\$279.88	1,000	1,078	0.927	\$259.55	\$251.04	30.6%	11,286	\$174.08	1,000	1,334	0.750	\$130.53	\$116.61	36.7%
9/21	11,572	\$311.25	1,000	1,082	0.924	\$287.65	\$256.80	31.6%	11,572	\$172.06	1,000	1,319	0.758	\$130.46	\$119.38	38.3%
10/21	11,614	\$283.95	1,000	1,074	0.931	\$264.29	\$260.41	32.6%	11,614	\$165.07	1,000	1,311	0.763	\$125.94	\$120.66	36.1%
11/21	11,560	\$269.15	1,000	1,062	0.941	\$253.38	\$261.94	31.7%	11,560	\$190.54	1,000	1,324	0.755	\$143.88	\$123.91	37.9%
12/21	11,478	\$260.57	1,000	1,066	0.938	\$244.38	\$262.06	30.0%	11,478	\$201.70	1,000	1,333	0.750	\$151.31	\$126.78	37.7%
1/22	14,239	\$245.11	1,000	1,031	0.970	\$237.70	\$261.75	28.0%	14,239	\$146.01	1,000	1,110	0.901	\$131.49	\$129.42	37.1%
2/22	15,755	\$268.30	1,000	1,009	0.991	\$265.88	\$263.21	24.3%	15,755	\$127.73	1,000	1,039	0.962	\$122.91	\$130.62	34.7%
3/22	15,546	\$271.48	1,000	1,002	0.988	\$270.89	\$262.17	17.8%	15,546	\$153.31	1,000	1,054	0.949	\$145.48	\$132.47	31.7%
4/22	15,500	\$250.38	1,000	0.993	1.007	\$252.21	\$261.94	12.6%	15,500	\$142.76	1,000	1,069	0.936	\$133.58	\$133.11	27.4%
5/22	15,405	\$257.47	1,000	0.996	1.004	\$258.39	\$263.58	11.0%	15,405	\$148.44	1,000	1,083	0.923	\$137.06	\$134.11	23.9%
6/22	15,374	\$378.80	1,000	1,002	0.998	\$378.11	\$273.28	11.7%	15,374	\$152.88	1,000	1,092	0.916	\$140.00	\$135.38	22.7%
7/22	15,546	\$232.84	1,000	0.995	1.005	\$234.06	\$268.01	6.8%	15,546	\$142.03	1,000	1,063	0.941	\$133.61	\$135.42	19.2%
8/22	15,595	\$268.42	1,000	0.995	1.005	\$269.70	\$268.73	7.0%	15,595	\$165.00	1,000	1,042	0.960	\$158.38	\$137.86	18.2%
9/22	15,600	\$294.38	1,000	0.988	1.012	\$297.97	\$270.10	5.2%	15,600	\$151.56	1,000	1,036	0.966	\$146.35	\$139.12	16.5%
10/22	15,520	\$259.74	1,000	0.980	1.020	\$264.92	\$270.02	3.7%	15,520	\$163.17	1,000	1,041	0.960	\$156.70	\$141.52	17.3%
11/22	15,460	\$262.59	1,000	0.981	1.019	\$267.59	\$270.88	3.4%	15,460	\$158.93	1,000	1,038	0.964	\$153.14	\$142.37	14.9%
12/22	15,284	\$311.88	1,000	0.978	1.022	\$318.75	\$276.48	5.5%	15,284	\$151.87	1,000	1,043	0.959	\$145.66	\$142.08	12.1%
1/23	18,386	\$288.70	1,000	0.933	1.072	\$309.55	\$282.62	8.0%	18,386	\$144.99	1,000	0.956	1.046	\$151.66	\$143.81	11.1%
2/23	19,968	\$236.16	1,000	0.917	1.090	\$257.42	\$281.38	6.9%	19,968	\$126.35	1,000	0.923	1.083	\$136.88	\$144.80	10.9%
3/23	19,873	\$291.14	1,000	0.925	1.081	\$314.86	\$285.58	8.9%	19,873	\$161.23	1,000	0.931	1.075	\$173.26	\$147.61	11.4%
4/23	19,708	\$263.64	1,000	0.920	1.087	\$286.46	\$288.23	10.0%	19,708	\$150.50	1,000	0.963	1.039	\$156.34	\$149.54	12.3%
5/23	19,700	\$313.54	1,000	0.925	1.081	\$338.96	\$295.31	12.0%	19,700	\$182.59	1,000	0.947	1.056	\$192.73	\$154.61	15.3%
6/23	19,882	\$312.89	1,000	0.934	1.071	\$335.03	\$293.02	7.2%	19,882	\$177.45	1,000	0.955	1.047	\$185.80	\$158.62	17.2%
7/23	20,415	\$274.61	1,000	0.943	1.061	\$291.27	\$297.11	10.9%	20,415	\$159.84	1,000	0.955	1.047	\$167.36	\$161.25	19.1%
8/23	20,834	\$286.18	1,000	0.955	1.047	\$299.55	\$299.27	11.4%	20,834	\$185.42	1,000	0.956	1.046	\$193.96	\$164.54	19.4%
9/23	21,297	\$282.18	1,000	0.958	1.044	\$294.51	\$298.92	10.7%	21,297	\$175.18	1,000	0.940	1.063	\$186.29	\$167.84	20.6%
10/23	21,442	\$299.73	1,000	0.950	1.052	\$315.38	\$302.71	12.1%	21,442	\$191.54	1,000	0.930	1.075	\$205.94	\$172.11	21.6%
11/23	21,903	\$304.78	1,000	0.963	1.038	\$316.47	\$306.25	13.1%	21,903	\$169.50	1,000	0.935	1.069	\$181.22	\$174.17	22.3%
12/23	22,074	\$285.08	1,000	0.978	1.022	\$291.34	\$304.13	10.0%	22,074	\$173.99	1,000	0.935	1.070	\$186.18	\$177.03	24.6%
1/24	22,074	\$279.41	1,000	0.864	1.158	\$323.47	\$305.44	8.1%	22,074	\$182.84	1,000	0.990	1.010	\$184.70	\$179.58	24.9%
2/24	22,074	\$309.16	1,000	0.928	1.077	\$333.07	\$311.68	10.8%	22,074	\$158.25	1,000	0.892	1.121	\$177.35	\$182.77	26.2%
3/24	22,074	\$309.37	1,000	0.926	1.080	\$334.13	\$313.39	9.7%	22,074	\$173.13	1,000	0.892	1.121	\$194.02	\$184.50	25.0%
4/24	22,074	\$302.71	1,000	0.923	1.084	\$328.06	\$316.73	9.9%	22,074	\$177.17	1,000	0.892				

Highmark Coverage Advantage

Individual Market

Response to Objection 2 - Question 1a

Description	Medical	Rx	Total	Notes
2023 Allowed 12-Month PMPM	\$ 304.13	\$ 177.03	\$ 481.15	Source is supporting monthly PMPMs streams.
2025 Allowed 12-Month PMPM	\$ 359.05	\$ 218.73	\$ 577.77	Source is supporting monthly PMPMs streams.
Allowed Annual Trend 2023 to 2025	8.7%	11.2%	9.6%	Reasonable range around deterministic estimate applied including consideration for enrollment changes
Actuarial Judgment	0.0%	(1.3%)	(0.5%)	
Required Annual Trend	8.65%	9.68%	9.03%	

Highmark Coverage Advantage

Individual Market

Response to Objection 2 - Question 1c

Incurred Month	Medical				Rx			
	Population Mix	Cost Savings	Provider Shift	Cumul Factor	Population Mix	Cost Savings	Provider Shift	Cumul Factor
1/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
2/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
3/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
4/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
5/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
6/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
7/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
8/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
9/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
10/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
11/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
12/18	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
1/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
2/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
3/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
4/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
5/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
6/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
7/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
8/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
9/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
10/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
11/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
12/19	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
1/20	1.21	1.00	1.00	1.21	1.27	1.00	1.00	1.27
2/20	1.22	1.00	1.00	1.21	1.32	1.00	1.00	1.32
3/20	1.21	1.00	1.00	1.20	1.35	1.00	1.00	1.35
4/20	1.19	1.00	1.00	1.18	1.37	1.00	1.00	1.36
5/20	1.15	1.00	1.00	1.15	1.39	1.00	1.00	1.39
6/20	1.14	0.99	1.00	1.13	1.37	1.00	1.00	1.37
7/20	1.14	0.99	1.00	1.13	1.37	1.00	1.00	1.36
8/20	1.13	0.99	1.00	1.12	1.38	1.00	1.00	1.38
9/20	1.12	0.99	1.00	1.11	1.36	1.00	1.00	1.35
10/20	1.11	0.99	1.00	1.10	1.35	1.00	1.00	1.35
11/20	1.09	0.99	1.00	1.08	1.29	1.00	1.00	1.29
12/20	1.10	0.99	1.00	1.08	1.31	1.00	1.00	1.31
1/21	1.11	0.98	1.00	1.09	1.19	1.00	1.00	1.19
2/21	1.13	0.97	1.00	1.10	1.15	0.99	1.00	1.14
3/21	1.14	0.97	1.00	1.11	1.17	0.99	1.00	1.16
4/21	1.12	0.97	1.00	1.09	1.32	0.99	1.00	1.30
5/21	1.12	0.97	1.00	1.09	1.30	0.99	1.00	1.29
6/21	1.12	0.96	1.00	1.08	1.32	0.99	1.00	1.30
7/21	1.12	0.96	1.00	1.08	1.33	0.99	1.00	1.32
8/21	1.12	0.96	1.00	1.08	1.35	0.99	1.00	1.33
9/21	1.13	0.96	1.00	1.08	1.33	0.99	1.00	1.32
10/21	1.12	0.96	1.00	1.07	1.33	0.99	1.00	1.31
11/21	1.11	0.96	1.00	1.06	1.34	0.99	1.00	1.32
12/21	1.12	0.96	1.00	1.07	1.35	0.99	1.00	1.33
1/22	1.08	0.95	1.00	1.03	1.13	0.98	1.00	1.11
2/22	1.06	0.95	1.00	1.01	1.06	0.98	1.00	1.04
3/22	1.06	0.95	1.00	1.00	1.07	0.98	1.00	1.05
4/22	1.05	0.94	1.00	0.99	1.09	0.98	1.00	1.07
5/22	1.06	0.94	1.00	1.00	1.10	0.98	1.00	1.08
6/22	1.07	0.94	1.00	1.00	1.11	0.98	1.00	1.09
7/22	1.06	0.94	1.00	0.99	1.08	0.98	1.00	1.06
8/22	1.06	0.94	1.00	1.00	1.06	0.98	1.00	1.04
9/22	1.05	0.94	1.00	0.99	1.05	0.98	1.00	1.04
10/22	1.05	0.94	1.00	0.98	1.06	0.98	1.00	1.04
11/22	1.05	0.94	1.00	0.98	1.06	0.98	1.00	1.04
12/22	1.04	0.94	1.00	0.98	1.06	0.98	1.00	1.04
1/23	1.00	0.93	1.00	0.93	0.98	0.98	1.00	0.96
2/23	0.99	0.93	1.00	0.92	0.94	0.98	1.00	0.92
3/23	1.00	0.93	1.00	0.92	0.95	0.98	1.00	0.93
4/23	0.99	0.93	1.00	0.92	0.98	0.98	1.00	0.96
5/23	1.00	0.93	1.00	0.92	0.97	0.98	1.00	0.95
6/23	1.01	0.93	1.00	0.93	0.98	0.98	1.00	0.96
7/23	1.02	0.93	1.00	0.94	0.98	0.98	1.00	0.96
8/23	1.03	0.93	1.00	0.96	0.98	0.98	1.00	0.96
9/23	1.04	0.92	1.00	0.96	0.96	0.98	1.00	0.94
10/23	1.03	0.92	1.00	0.95	0.95	0.98	1.00	0.93
11/23	1.05	0.92	1.00	0.96	0.96	0.98	1.00	0.94
12/23	1.06	0.92	1.00	0.98	0.95	0.98	1.00	0.93
1/24	0.95	0.91	1.00	0.86	1.01	0.98	1.00	0.99
2/24	1.02	0.91	1.00	0.93	0.91	0.98	1.00	0.89
3/24	1.02	0.91	1.00	0.93	0.91	0.98	1.00	0.89
4/24	1.02	0.91	1.00	0.92	0.91	0.98	1.00	0.89
5/24	1.02	0.91	1.00	0.92	0.91	0.98	1.00	0.89
6/24	1.02	0.90	1.00	0.92	0.91	0.98	1.00	0.89
7/24	1.02	0.90	1.00	0.92	0.91	0.98	1.00	0.89
8/24	1.02	0.90	1.00	0.92	0.91	0.98	1.00	0.89
9/24	1.02	0.90	1.00	0.92	0.91	0.98	1.00	0.89
10/24	1.02	0.90	1.00	0.92	0.91	0.98	1.00	0.89
11/24	1.02	0.90	1.00	0.92	0.91	0.98	1.00	0.89
12/24	1.02	0.90	1.00	0.92	0.91	0.98	1.00	0.89
1/25	1.02	0.90	1.00	0.92	0.91	0.98	1.00	0.89
2/25	1.02	0.90	1.00	0.92	0.91	0.98	1.00	0.89
3/25	1.02	0.90	1.00	0.92	0.91	0.98	1.00	0.89
4/25	1.02	0.89	1.00	0.91	0.91	0.98	1.00	0.89
5/25	1.02	0.89	1.00	0.91	0.91	0.98	1.00	0.89
6/25	1.02	0.89	1.00	0.91	0.91	0.98	1.00	0.89
7/25	1.02	0.89	1.00	0.91	0.91	0.98	1.00	0.89
8/25	1.02	0.89	1.00	0.91	0.91	0.98	1.00	0.89
9/25	1.02	0.89	1.00	0.91	0.91	0.98	1.00	0.89
10/25	1.02	0.89	1.00	0.91	0.91	0.98	1.00	0.89
11/25	1.02	0.89	1.00	0.91	0.91	0.98	1.00	0.89
12/25	1.02	0.89	1.00	0.91	0.91	0.98	1.00	0.89

Highmark Coverage Advantage

Individual Market

Response to Objection 2 - Question 1f

Incurred Month	Medical						Rx									
	Members	Allowed PMPM	AGING	Cumul Factor	Monthly Factor	Pricing PMPM	12 Mo. PMPM	Annual Trend	Members	Allowed PMPM	AGING	Cumul Factor	Monthly Factor	Pricing PMPM	12 Mo. PMPM	Annual Trend
1/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
2/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
3/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
4/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
5/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
6/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
7/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
8/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
9/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
10/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
11/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
12/18	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
1/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
2/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
3/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
4/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
5/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
6/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
7/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
8/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
9/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
10/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
11/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
12/19	0		1,000	1,000	1,000				0		1,000	1,000	1,000			
1/20	5,978	\$245.17	1,000	1,207	0.828	\$203.06	\$203.06		5,978	\$83.01	1,000	1,274	0.785	\$65.18	\$65.18	
2/20	6,063	\$207.31	1,000	1,214	0.824	\$170.79	\$186.81		6,063	\$93.48	1,000	1,319	0.758	\$70.90	\$68.06	
3/20	6,287	\$217.43	1,000	1,205	0.830	\$180.47	\$184.63		6,287	\$123.18	1,000	1,352	0.740	\$91.14	\$75.97	
4/20	6,552	\$141.57	1,000	1,184	0.844	\$119.54	\$167.49		6,552	\$110.86	1,000	1,365	0.733	\$81.23	\$77.36	
5/20	6,762	\$185.90	1,000	1,149	0.871	\$161.83	\$166.28		6,762	\$111.64	1,000	1,391	0.719	\$80.27	\$77.98	
6/20	6,914	\$225.74	1,000	1,128	0.887	\$200.13	\$172.35		6,914	\$139.75	1,000	1,372	0.729	\$101.85	\$82.26	
7/20	6,919	\$263.17	1,000	1,131	0.884	\$232.60	\$181.52		6,919	\$129.50	1,000	1,365	0.733	\$94.89	\$84.18	
8/20	6,825	\$296.59	1,000	1,124	0.890	\$263.96	\$192.28		6,825	\$128.12	1,000	1,381	0.724	\$92.77	\$85.30	
9/20	6,977	\$239.61	1,000	1,106	0.904	\$216.66	\$195.15		6,977	\$127.09	1,000	1,355	0.738	\$93.81	\$86.30	
10/20	6,993	\$227.98	1,000	1,099	0.910	\$207.52	\$196.45		6,993	\$146.74	1,000	1,353	0.739	\$108.46	\$88.64	
11/20	6,993	\$238.68	1,000	1,078	0.928	\$221.47	\$198.84		6,993	\$130.90	1,000	1,293	0.774	\$101.25	\$89.85	
12/20	6,847	\$249.11	1,000	1,082	0.924	\$230.28	\$201.53		6,847	\$151.53	1,000	1,310	0.764	\$115.70	\$92.06	
1/21	9,260	\$248.89	1,000	1,086	0.921	\$229.15	\$204.49	0.7%	9,260	\$113.91	1,000	1,188	0.842	\$95.89	\$94.41	44.9%
2/21	9,963	\$271.66	1,000	1,096	0.912	\$247.82	\$211.77	13.4%	9,963	\$116.86	1,000	1,143	0.875	\$102.27	\$96.94	42.4%
3/21	9,954	\$321.32	1,000	1,107	0.904	\$290.35	\$222.53	20.5%	9,954	\$147.13	1,000	1,160	0.862	\$126.82	\$100.61	32.4%
4/21	10,135	\$272.36	1,000	1,088	0.919	\$250.27	\$232.65	38.9%	10,135	\$162.49	1,000	1,304	0.767	\$124.58	\$104.52	35.1%
5/21	10,437	\$252.49	1,000	1,087	0.920	\$232.37	\$237.49	42.8%	10,437	\$160.58	1,000	1,293	0.773	\$124.14	\$108.28	38.9%
6/21	10,694	\$305.47	1,000	1,081	0.925	\$282.66	\$244.76	42.0%	10,694	\$160.79	1,000	1,303	0.768	\$123.42	\$110.30	34.1%
7/21	11,017	\$321.08	1,000	1,081	0.925	\$296.92	\$250.97	38.3%	11,017	\$174.27	1,000	1,317	0.760	\$132.36	\$113.60	34.9%
8/21	11,286	\$279.88	1,000	1,078	0.927	\$259.55	\$251.04	30.6%	11,286	\$174.08	1,000	1,334	0.750	\$130.53	\$116.61	36.7%
9/21	11,572	\$311.25	1,000	1,082	0.924	\$287.65	\$256.80	31.6%	11,572	\$172.06	1,000	1,319	0.758	\$130.46	\$119.38	38.3%
10/21	11,614	\$283.95	1,000	1,074	0.931	\$264.29	\$260.41	32.6%	11,614	\$165.07	1,000	1,311	0.763	\$125.94	\$120.66	36.1%
11/21	11,560	\$269.15	1,000	1,062	0.941	\$253.38	\$261.94	31.7%	11,560	\$190.54	1,000	1,324	0.755	\$143.88	\$123.91	37.9%
12/21	11,478	\$260.57	1,000	1,066	0.938	\$244.38	\$262.06	30.0%	11,478	\$201.70	1,000	1,333	0.750	\$151.31	\$126.78	37.7%
1/22	14,239	\$245.11	1,000	1,031	0.970	\$237.70	\$261.75	28.0%	14,239	\$146.01	1,000	1,110	0.901	\$131.49	\$129.42	37.1%
2/22	15,755	\$268.30	1,000	1,009	0.991	\$265.88	\$263.21	24.3%	15,755	\$127.73	1,000	1,039	0.962	\$122.91	\$130.62	34.7%
3/22	15,546	\$271.48	1,000	1,002	0.988	\$270.89	\$262.17	17.8%	15,546	\$153.31	1,000	1,054	0.949	\$145.48	\$132.47	31.7%
4/22	15,500	\$250.38	1,000	0.993	1.007	\$252.21	\$261.94	12.6%	15,500	\$142.76	1,000	1,069	0.936	\$133.58	\$133.11	27.4%
5/22	15,405	\$257.47	1,000	0.996	1.004	\$258.39	\$263.58	11.0%	15,405	\$148.44	1,000	1,083	0.923	\$137.06	\$134.11	23.9%
6/22	15,374	\$378.80	1,000	1,002	0.998	\$378.11	\$273.28	11.7%	15,374	\$152.88	1,000	1,092	0.916	\$140.00	\$135.38	22.7%
7/22	15,546	\$232.84	1,000	0.995	1.005	\$234.06	\$268.01	6.8%	15,546	\$142.03	1,000	1,063	0.941	\$133.61	\$135.42	19.2%
8/22	15,595	\$268.42	1,000	0.995	1.005	\$269.70	\$268.73	7.0%	15,595	\$165.00	1,000	1,042	0.960	\$158.38	\$137.86	18.2%
9/22	15,600	\$294.38	1,000	0.988	1.012	\$297.97	\$270.10	5.2%	15,600	\$151.56	1,000	1,036	0.966	\$146.35	\$139.12	16.5%
10/22	15,520	\$259.74	1,000	0.980	1.020	\$264.92	\$270.02	3.7%	15,520	\$163.17	1,000	1,041	0.960	\$156.70	\$141.52	17.3%
11/22	15,460	\$262.59	1,000	0.981	1.019	\$267.59	\$270.88	3.4%	15,460	\$158.93	1,000	1,038	0.964	\$153.14	\$142.37	14.9%
12/22	15,284	\$311.88	1,000	0.978	1.022	\$318.75	\$276.48	5.5%	15,284	\$151.87	1,000	1,043	0.959	\$145.66	\$142.08	12.1%
1/23	18,386	\$288.70	1,000	0.933	1.072	\$309.55	\$282.62	8.0%	18,386	\$144.99	1,000	0.956	1.046	\$151.66	\$143.81	11.1%
2/23	19,968	\$236.16	1,000	0.917	1.090	\$257.42	\$281.38	6.9%	19,968	\$126.35	1,000	0.923	1.083	\$136.88	\$144.80	10.9%
3/23	19,873	\$291.14	1,000	0.925	1.081	\$314.86	\$285.58	8.9%	19,873	\$161.23	1,000	0.931	1.075	\$173.26	\$147.61	11.4%
4/23	19,708	\$263.64	1,000	0.920	1.087	\$286.46	\$288.23	10.0%	19,708	\$150.50	1,000	0.963	1.039	\$156.34	\$149.54	12.3%
5/23	19,700	\$313.54	1,000	0.925	1.081	\$338.96	\$295.31	12.0%	19,700	\$182.59	1,000	0.947	1.056	\$192.73	\$154.61	15.3%
6/23	19,882	\$312.89	1,000	0.934	1.071	\$335.03	\$293.02	7.2%	19,882	\$177.45	1,000	0.955	1.047	\$185.80	\$158.62	17.2%
7/23	20,415	\$274.61	1,000	0.943	1.061	\$291.27	\$297.11	10.9%	20,415	\$159.84	1,000	0.955	1.047	\$167.36	\$161.25	19.1%
8/23	20,834	\$286.18	1,000	0.955	1.047	\$299.55	\$299.27	11.4%	20,834	\$185.42	1,000	0.956	1.046	\$193.96	\$164.54	19.4%
9/23	21,297	\$282.18	1,000	0.958	1.044	\$294.51	\$298.92	10.7%	21,297	\$175.18	1,000	0.940	1.063	\$186.29	\$167.84	20.6%
10/23	21,442	\$299.73	1,000	0.950	1.052	\$315.38	\$302.71	12.1%	21,442	\$191.54	1,000	0.930	1.075	\$205.94	\$172.11	21.6%
11/23	21,903	\$304.78	1,000	0.963	1.038	\$316.47	\$306.25	13.1%	21,903	\$169.50	1,000	0.935	1.069	\$181.22	\$174.17	22.3%
12/23	22,074	\$285.08	1,000	0.978	1.022	\$291.34	\$304.13	10.0%	22,074	\$173.99	1,000	0.935	1.070	\$186.18	\$177.03	24.6%
1/24	22,074	\$279.41	1,000	0.862	1.161	\$324.28	\$305.51	8.1%	22,074	\$182.84	1,000	0.995	1.005	\$183.72	\$179.49	24.8%
2/24	22,074	\$310.10	1,000	0.928	1.077	\$334.08	\$311.84	10.8%	22,074	\$157.35	1,000	0.892	1.121	\$176.34	\$182.60	26.1%
3/24	22,074	\$310.49	1,000	0.926	1.080	\$335.33	\$313.65	9.8%	22,074	\$172.08	1,000	0.892	1.121	\$192.84	\$184.22	24.8%
4/24	22,074	\$303.98	1,000	0.923	1.084	\$329.43	\$317.11	10.0%	22,074	\$176.02	1,000	0.892	1.121			

Highmark Coverage Advantage

Individual Market

Response to Objection 2 - Question 1f

Description	Medical	Rx	Total	Notes
2023 Allowed 12-Month PMPM	\$ 304.13	\$ 177.03	\$ 481.15	Source is supporting monthly PMPMs streams.
2025 Allowed 12-Month PMPM	\$ 363.47	\$ 216.06	\$ 579.54	Source is supporting monthly PMPMs streams.
Allowed Annual Trend 2023 to 2025			9.7%	Reasonable range around deterministic estimate applied including consideration for enrollment changes
Actuarial Judgment			(0.5%)	
Required Annual Trend			9.2%	

Highmark Coverage Advantage

Individual Market

Response to Objection 2 - Question 2b

Table 1

Description	Factor
Change in Rx Rebates	0.979
Change in Hospital/Physician Settlements	1.002
Change in Benefit Richness	0.993
Total "Change in Other"	0.974

Table 2

Description	2023	2025
Prescription Drug Allowed PMPM (w/ Rx Rebates; URRT Wksh1)		
Rx Rebates PMPM		
Member Months		
Rx Rebate Dollars (Table 4)		

Table 3

Description	Medical	Rx	Total
Change in Rx Rebates	1.000	0.922	
Change in Other (Table 5)			0.974
Adjusted Projected Allowed EHB Claims PMPM (Table 5)			\$491.89
Adjusted Projected Allowed EHB Claims PMPM (prior to change in other)	\$366.29	\$138.77	\$505.05
Final Change in Rx Rebates			0.979

Highmark Coverage Advantage

Individual Market

Response to Objection 2 - Question 2c

Description	PA ACA Population Subset		
	2024 Renewal	2024 Lapse Due to Death	Renewal and Dead Population
2023 Member Months	965,772	1,053	966,825
2023 Incurred Claims (Not Completed)	\$618,435,508	\$18,636,458	\$637,071,966
Death Load Adjustment Factor			1.03

Highmark Coverage Advantage

Individual Market

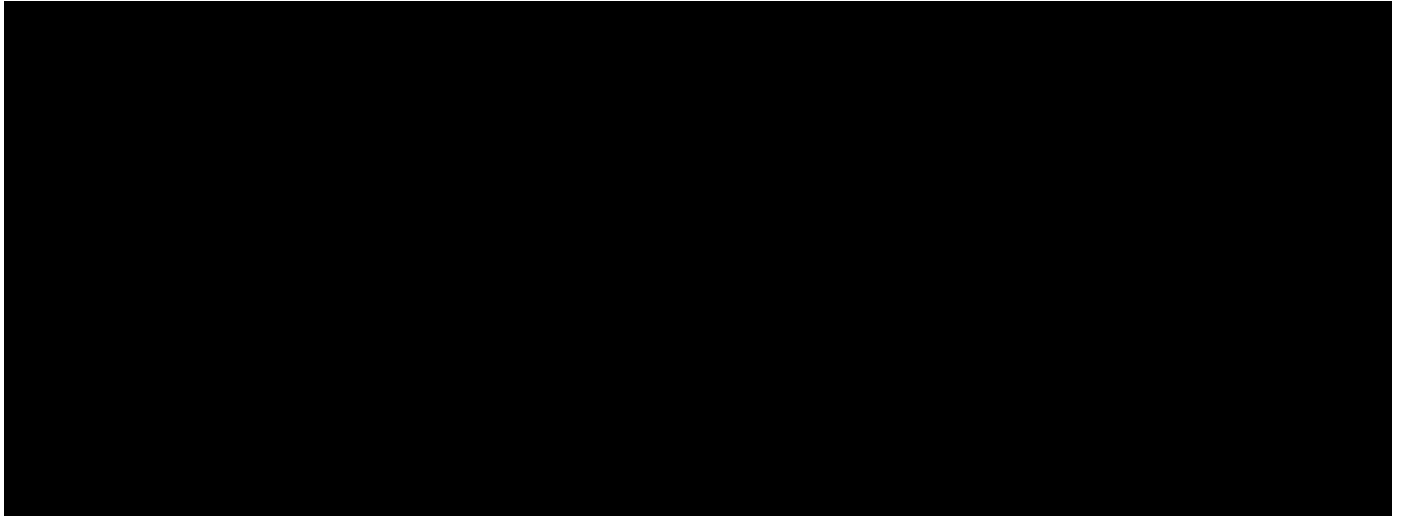
Response to Objection 2 - Question 2d

	HCA			
	Renewal	Other Highmark	Prior ACA	New
2023 Average Age	1.763	1.697	1.598	1.543
2023 Average Tobacco	1.006	1.006	1.004	1.006
2023 Average Area	0.940	0.940	0.940	0.940
Demographic Factor	1.667	1.604	1.508	1.459
2023 Allowed Medical PMPM	\$267.86			
2023 Allowed RX PMPM	\$167.37			
2023 Average Medical Network	0.630			
2023 Average Rx Network	1.000			
Network Factor	0.735	1.000	1.000	1.000
Benefit Richness Factor	1.111	1.080	1.080	1.080

Highmark Coverage Advantage

Individual Market

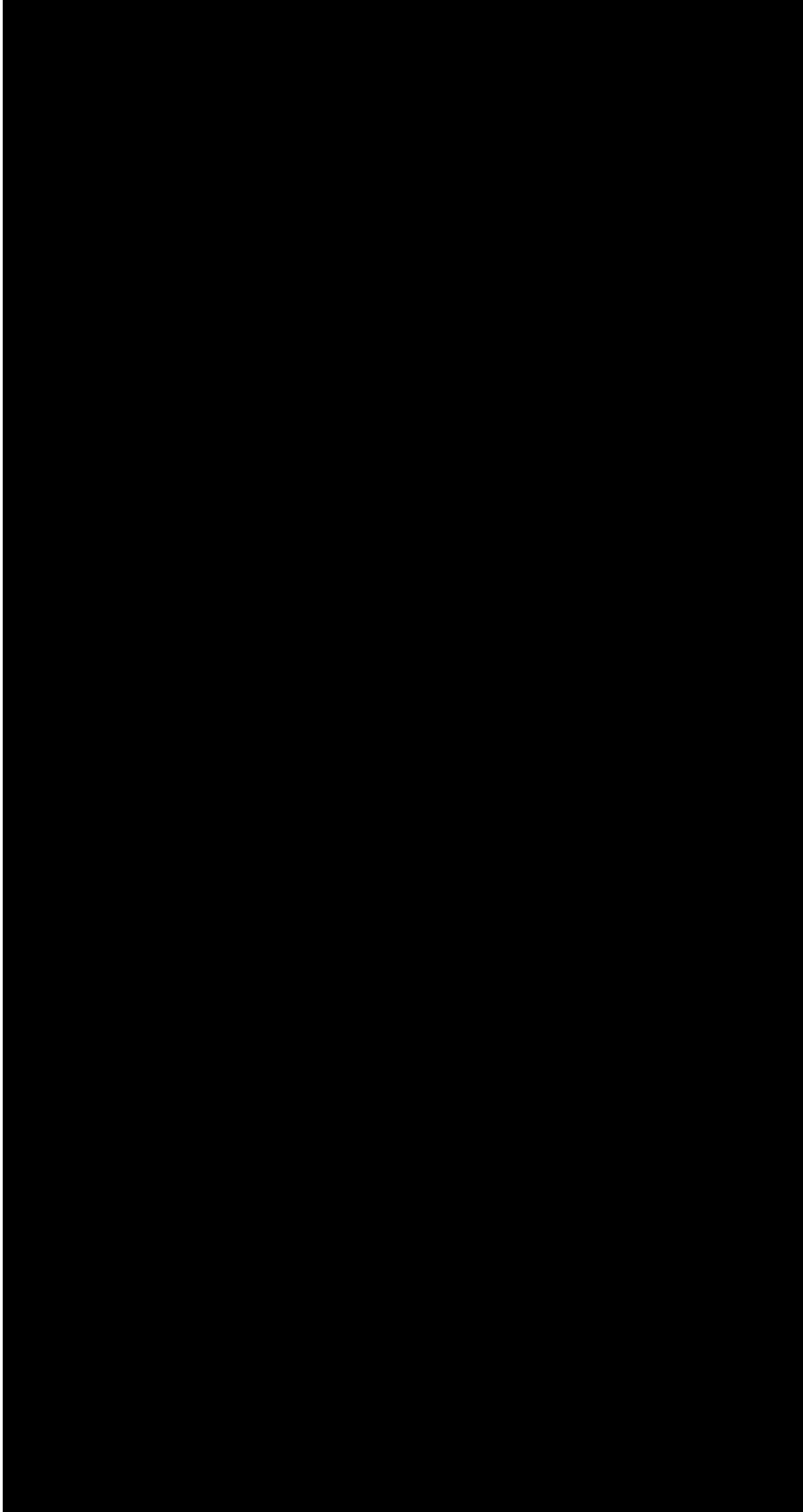
Response to Objection 2 - Question 2e



Highmark Coverage Advantage

Individual Market

Response to Objection 2 - Question 2e



Highmark Coverage Advantage**Individual Market****Response to Objection 2 - Question 3**

Metal	2023 Metallic AV	Actual 2023 Paid to Allowed Ratio
Gold	79.9%	84.6%
Bronze	64.0%	68.8%

Highmark Coverage Advantage**Individual Market****Response to Objection 2 - Question 5**

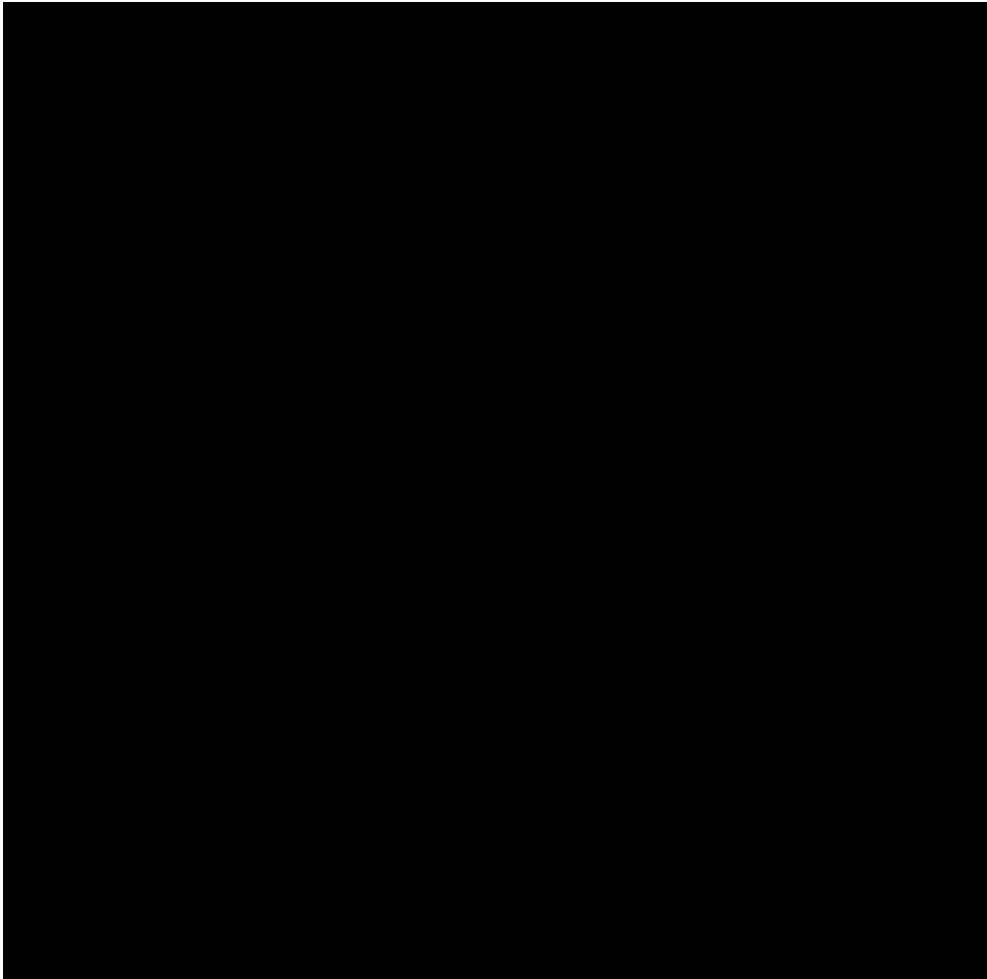
	Average Age	Paid Claim PMPM
Medicaid Redetermination Membership	36.8	\$250.33
Remaining Membership	41.7	\$334.65

** Completed claims incurred Dec 2023 paid through Jan 2024*

Highmark Coverage Advantage

Individual Market

Response to Objection 2 - Question 6





August 2, 2024

Mr. Michael Hibbert, Actuary
Bureau of Life, Accident & Health Insurance
Commonwealth of Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

Re: Highmark Coverage Advantage 2025 ACA Rate Filing (Individual Market)
Highmark Filing # 1A-DP-24-HCA (SERFF Filing # HGHM-134061466)

Dear Mr. Hibbert:

Enclosed are responses to your July 24, 2024 questions regarding SERFF Filing # HGHM-134061466. We have included your questions along with our responses for your convenience. In conjunction with these responses, we are also submitting revisions to relevant filing documents to reflect the following changes:

- In response to Question 2f and Question 6a of the Department’s objection letters dated June 5, 2024 and July 24, 2024, respectively, the medical and drug trends have been split out and set such that the aggregate trend aligns to the aggregate trend initially filed on May 15, 2024.
- In response to Question 2 of the Department’s objection letter dated July 24, 2024, the 2023 experience period risk adjustment amount found in Table 2 of the PAAM Exhibits has been updated to reflect the final amount released by CMS on July 22, 2024.
- In response to Question 5 of the Department’s objection letter dated July 24, 2024, the reinsurance parameters have been updated to reflect a \$60,000 attachment point, a 60% coinsurance rate, and a \$100,000 reinsurance cap.
- [REDACTED]

Should you have any further questions regarding this Filing, please feel free to contact me at [REDACTED] or via e-mail at: [REDACTED]

Sincerely,

[REDACTED]

Actuarial Manager, Individual Markets
Highmark Inc.

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

- 2. Please update the 2023 experience period risk adjustment amount, in Table 2, to reflect the final CMS risk adjustment amount released on July 22nd.**

Response:

The 2023 experience period risk adjustment amount in Table 2 has been updated to reflect the final amount released by CMS on July 22, 2024.

- 3. If the projected risk adjustment transfer amount in Table 5 will be modified, due to the final CMS transfer amount published on July 22nd, please provide narrative and detailed supporting data to justify the proposed changes. Additionally, please ensure all applicable supporting exhibits are updated to reflect these changes.**

Response:

The Company does not intend to modify its projected 2025 risk adjustment transfer amounts based on the 2023 results.

- 4. Please ensure that the 7/31/24 versions of the following items are posted in SERFF with your July 31st response to this data call.**
 - a. Cover Letter identifying all changes made and the reasons for the change. Also, show the revised rate change.**
 - b. PA Actuarial Memorandum.**
 - c. PA Actuarial Memorandum Exhibits.**
 - d. Department's Plan Design Summary and Rate Template Exhibits (please ensure that the rate template by county is populated with only numeric values – no "NA").**
 - e. URRT.**
 - f. Federal Rate Template.**
 - g. Part III: Actuarial Memorandum.**
 - h. Rate Change Summary information included on the VI Rate Change Summary tab of the PA Actuarial Memorandum Exhibits.**
 - i. Public PDF with limited redactions as previously directed in the Guidance (includes all correspondence and supporting exhibits after the initial submission, in addition to all the above items).**

Response:

All of the relevant rate filing documents are being updated and submitted in SERFF in conjunction with these responses.

5. **The program parameters for Plan Year 2025 will be adjusted from the parameters announced in Notice 2024-07 published at 54 Pa.B. 2907 (May 25, 2024). Beginning January 1, 2025, the program-adopted parameters will be adjusted to an attachment point of \$60,000, a cap of \$100,000 and a coinsurance rate of 60%. Please update these factors in the PAAM Exhibits.**

Response:

The Company is submitting a revised filing to reflect this change in the coinsurance rate in conjunction with these responses.

6. **The following are related to trend:**
- a. **As a result of separating the medical and prescription drug trends, the Total Annual Trend in cell G52 of Table 3 of the PAAM Exhibits changed. It appears that this is because the Weights included in column H differ from the Medical and Rx weights implied by the 2023 Allowed 12-Month PMPM values in the response exhibit. Please provide a detailed narrative explaining why different weights are used and revise so that the aggregate trend shown in Table 3 matches the requested aggregate trend from the prior version of the PAAM Exhibits.**
 - b. **Please explain why an adjustment for actuarial judgement is applied to the prescription drug trend and not the medical trend.**
 - c. **Please explain why the same actuarial judgement adjustment used on the Q1a Response2 tab is used on the Q1f Response2 tab.**

Response:

- a. The aggregate trend is applied to the EHB claims and capitation PMPMs net of drug rebates found on Table 5 of the PAAM Exhibits. To align with Table 5, the prescription drug claims weighting in Table 3 must also be net of drug rebates. This differs from the weighting in the Company's Objection 2, Question 1a response dated July 17, 2024, where the weighting uses gross prescription drug claims. In the revised Table 3 that is being submitted with these responses, a uniform adjustment factor is applied to the split medical and drug utilization trends to account for the difference in weighting and align the aggregate trend to what was initially filed on May 15, 2024.
- b. The trend is evaluated on an overall basis (medical and Rx combined). Since the Department has requested separate Medical and Rx trends, Highmark has applied adjustments at the Medical and Rx component level as shown in the Round 2 response to result in reasonable component trends that tie back to the total trend. The (0.5%) per year actuarial judgment in total needed to be distributed between Medical and Rx in response to the question asked. We believe that an 11.2% Rx component trend for the HCA business should be adjusted lower to be more in-line with our other PA ACA business. Medical trend was not adjusted since it is lower than other PA ACA business.
- c. Q1fResponse2 isolates the change in trend related to including data points through 12/2023. This was not the trend used in the filing, but if those data points were to be used, the assumption is that those additional trend points are valid to include. The same level of actuarial judgment from the filing would apply, and the more recent data points are being relied upon to change the trend.

There are limits to the level of actuarial judgment that should be applied to a calculated trend. As a hypothetical example, assume a trend calculation was 9.1% - 0.6% actuarial judgment = 8.5% without recent historical data points. Then, an alternative approach of adding data points through 12/23 is considered under the assumption that those points are valid for the future. If this revision results in a raw calculated trend of 10.5%, applying an actuarial judgment factor of -2% to get back to the original 8.5% would be extreme.

We have made every effort to reasonably reduce our trends through the actuarial judgment applied in the filing.

- 7. This is a follow-up to question 1h from the prior objection letter. This objection still stands. Please either revise the trend assumption so that this one-time adjustment isn't incorporated in the PMPMs or revise the Table 5 factor.**

Response:

[REDACTED]

- 8. Please provide an exhibit in Excel showing the Medicare Reimbursement rate at the beginning of the base experience period through the end of the projection period.**

Response:

The information needed for this exhibit is not readily available.

- 9. Please provide a table in Excel showing what the projected prescription drug rebate PMPMs were for 2023, 2022, and 2021 based on the filings for PY23, PY22, and PY21. Please also include a column showing the actual prescription drug rebate PMPMs. Please describe any applicable adjustments made as a result of any differences for the PY25 filing.**

Response:

Please see the attached exhibit labeled Q9 Response for a comparison of the priced vs. actual prescription drug rebate PMPMs from 2021 to 2023. Although the exhibit shows that the actuals have generally exceeded the priced values, this comparison is only telling part of the story. A likely driver of actual rebates exceeding priced rebates is higher-than-expected prescription drug utilization. Using data from the Objection 1, Question 2a Response tab, the observed actual prescription drug trend from 2022 to 2023 was approximately 11% compared to a pricing trend of approximately 7%. This illustrates why all of the filing assumptions must be assessed not only individually but also in aggregate.

Additionally, please note that in researching the response to this question, we discovered that the underlying model was overstating the projected Rx rebates for 2025. After considering all of the other filed factors/assumptions, the Company believes that the overall rate change is still reasonable assuming no other assumption changes occur and proposes to not increase the rates to adjust for this issue.

10. This is a follow-up to question 9 from the prior objection letter. Please explain the motivation behind the 1.2% adjustment to the completion factor included in the PY25 filing discussed in the response.

Response:

For the December 2023 month, the standard completion factor produced from internal modeling was used. For the December 2022 month in the PY24 filing, a more aggressive factor (lower claims) was utilized at that time. This was a one-time adjustment made at that time based on a consideration that the 2022 completion factors may have introduced too much conservatism in the overall filing rate increase for that year.

11.

[Redacted]

Response:

[Redacted]

12.

[Redacted]

Response:

[Redacted]

13. In response to standard question 12a, it's indicated that the Company will use a copay adjustment program. Has this impacted the rate development? If so, where is this incorporated and what is the magnitude of the impact?

Response:

The impact of the copay adjustment program used by the Company is included as an immaterial 0.1% reduction to the Pricing AVs on the plans that offer the program. Pharmaceutical manufacturers have been lowering financial assistance, removing drugs, and/or discontinuing participation in the copay adjustment program which is leading to lower expected savings.

14. The Department is interested in seeing certain updated items from Table 2 of the PAAM. In particular, we would like to see the revised calendar year 2023 membership, drug rebates, capitations, and claims with run-out through the end of May 2024. Please fill out the restated experience exhibit spreadsheet which is provided as an Excel attachment.

Response:

Please see the attached exhibit labeled “Q14 Response.” Additionally, please see the table below for a summary of the Company’s restated 2023 financial performance. These values include the final risk adjustment results from the revised Table 15 plus the additional claim run-out provided in the response to this question. Though not captured in prescribed template, please note that the final 2023 reinsurance receivable restated unfavorably compared to the value initially estimated and filed using runout through February 2024.

HCA	2023 Financial Performance		
	Revenue	G/(L)	% G/(L)
Table 15 w/updated RA & claim run-out	\$97,639,463	(\$3,846,730)	(3.9%)

Highmark Coverage Advantage

Individual Market

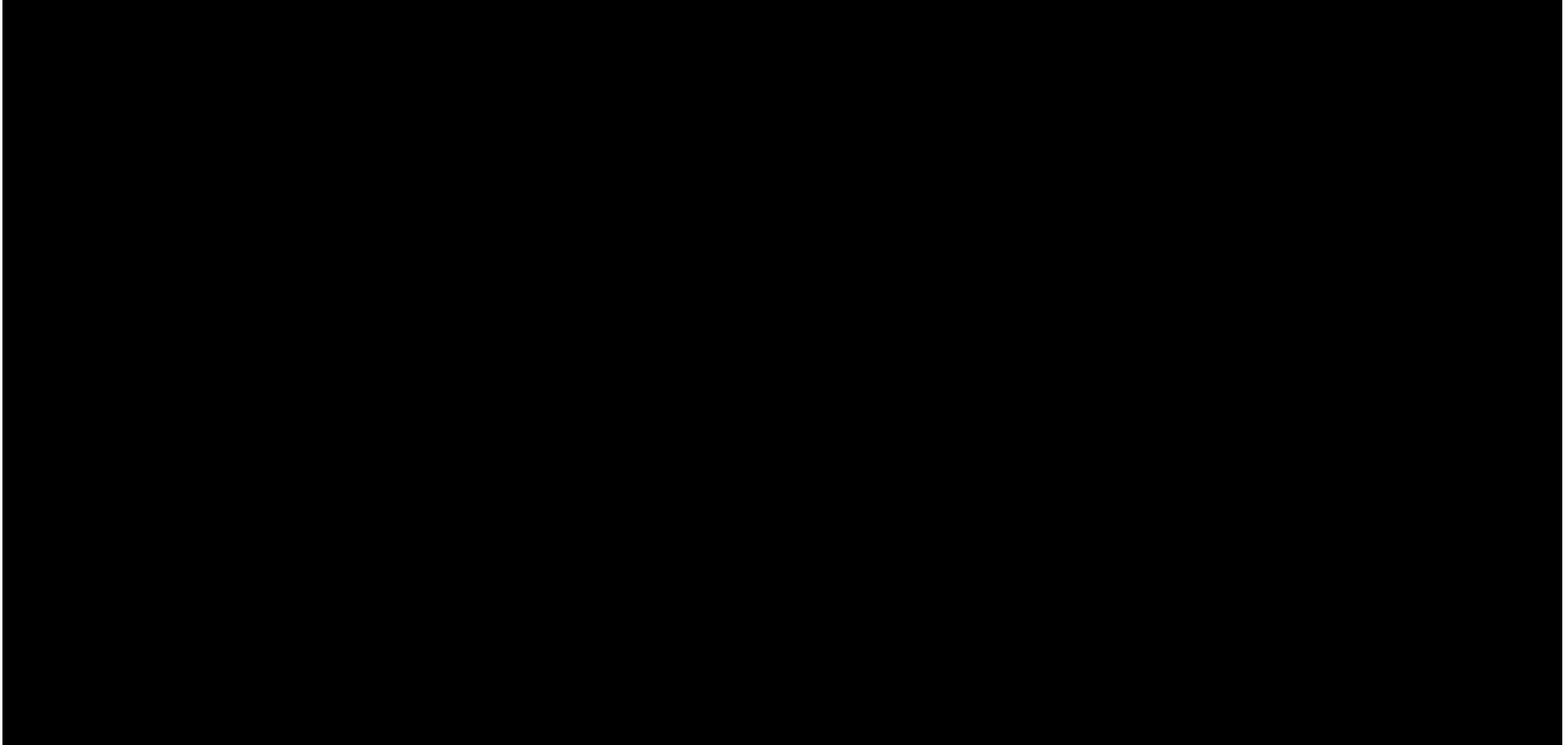
Response to Objection 3 - Question 9

RX Rebate PMPMs			
Year	Priced	Actual	\$ Difference
2021			
2022			
2023			

Highmark Coverage Advantage

Individual Market

Response to Objection 3 - Question 11



Highmark Coverage Advantage**Individual Market****Response to Objection 3 - Question 14**

CY23 Experience with Runout Through May 2024				
Member Months	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Prescription Drug Rebates	Total EHB Capitation
244,782	\$113,542,203	\$652,927	(\$12,486,329.82)	\$36,717



August 16, 2024

Mr. Michael Hibbert, Actuary
Bureau of Life, Accident & Health Insurance
Commonwealth of Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

Re: Highmark Coverage Advantage 2025 ACA Rate Filing (Individual Market)
Highmark Filing # 1A-DP-24-HCA (SERFF Filing # HGHM-134061466)

Dear Mr. Hibbert:

This rate filing has been modified from the version submitted on May 15, 2024 and revised on August 2, 2024. As a result of the Department's review of this filing, the requested average rate increase has been lowered from 11.9% to 9.2%. This change was implemented by making the following changes to the prior version of the filing:

- The medical trend was decreased from 8.7% to 6.5%.
- The drug trend was decreased from 9.7% to 8.8%.

In light of these changes, the questions from your August 12, 2024 objection letter are no longer applicable. However, in conjunction with this response, we are submitting revisions to relevant filing documents that support the development of the revised rate increase.

Should you have any further questions regarding this Filing, please feel free to contact me at [REDACTED] or via e-mail at: [REDACTED].

Sincerely,

[REDACTED]

Actuarial Manager, Individual Markets
Highmark Inc.

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	
1	Unified Rate Review v6.0																			
2																				
3	Company Legal Name:	Highmark Coverage Advantage																		
4	HIOS Issuer ID:	79279	State:	PA																
5	Effective Date of Rate Change(s):	01/01/2025	Market:	Individual																
6																				
7																				
8	Market Level Calculations (Same for all Plans)																			
9																				
10																				
11	Section I: Experience Period Data																			
12	Experience Period:	01/01/2023	to	12/31/2023																
13			Total	PMPM																
14	Allowed Claims		\$101,793,898.76		\$415.69															
15	Reinsurance		\$2,819,684.15		\$11.51															
16	Incurred Claims in Experience Period		\$81,803,185.49		\$334.05															
17	Risk Adjustment		-\$9,971,059.04		-\$40.72															
18	Experience Period Premium		\$107,644,031.59		\$439.58															
19	Experience Period Member Months		244,880																	
20																				
21	Section II: Projections																			
22																				
23	Benefit Category	Experience Period Index Rate PMPM	Year 1 Trend			Year 2 Trend			Trended EHB Allowed Claims PMPM											
24	Inpatient Hospital	\$54.80	Cost	1.050	Utilization	1.014	Cost	1.050	Utilization	1.014	\$62.16									
25	Outpatient Hospital	\$78.90	1.050	1.014	1.050	1.014	1.050	1.014	\$89.49											
26	Professional	\$149.95	1.050	1.014	1.050	1.014	1.050	1.014	\$170.07											
27	Other Medical	\$8.05	1.050	1.014	1.050	1.014	1.050	1.014	\$9.13											
28	Capitation	\$0.15	1.050	1.014	1.050	1.014	1.050	1.014	\$0.17											
29	Prescription Drug	\$120.71	1.050	1.036	1.050	1.036	1.050	1.036	\$142.89											
30	Total	\$412.56								\$473.91										
31																				
32	Morbidity Adjustment							0.969												
33	Demographic Shift							0.999												
34	Plan Design Changes							1.000												
35	Other							1.035												
36	Adjusted Trended EHB Allowed Claims PMPM for		01/01/2025					\$474.44												
37																				
38	Manual EHB Allowed Claims PMPM							\$0.00												
39	Applied Credibility %							100.00%												
40																				
41																				
42	Projected Period Totals																			
43	Projected Index Rate for	01/01/2025					\$474.44		\$161,153,983.68											
44	Reinsurance						\$25.64		\$8,708,869.12											
45	Risk Adjustment Payment/Charge						-\$78.80		-\$26,764,837.29											
46	Exchange User Fees						3.06%		\$5,650,351.31											
47	Market Adjusted Index Rate						\$544.23		\$184,860,303.16											
48	Projected Member Months						339,672													
49																				
50	Information Not Releasable to the Public Unless Authorized by Law: 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 prosecution to the full extent of the law.																			
51																				

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

Product-Plan Data Collection

Company Legal Name: Highmark Coverage Advantage PA
HIOS Issue ID: 79279 State: PA
Effective Date of Rate Change(s): 01/01/2025 Market: Individual

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.

To remove a product, navigate to the corresponding Product Name/Product ID field and select the Remove Product button or Ctrl + Shift + Q.

To remove a plan, navigate to the corresponding Plan Name/Plan ID field and select the Remove Plan button or Ctrl + Shift + A.

Product/Plan Level Calculations

Field # Section I: General Product and Plan Information

Table with columns for Product Name, Product ID, Plan Name, Plan ID, Plan Type, Exchange Plan, Effective Date, and various Rate Change % metrics for multiple products and plans.

Worksheet 1 Totals

Section II: Experience Period and Current Plan Level Information

Large data table showing experience period and current plan level information for various products and plans, including columns for Total, Allowed Claims, Remuneration, Member Cost Sharing, and various rates.

Section III: Plan Adjustment Factors

Table showing plan adjustment factors for Market Adjusted Index Rate, Administrative Costs, and Calibrated Plan Adjusted Index Rate across multiple products and plans.

Section IV: Projected Plan Level Information

Large data table showing projected plan level information for Allowed Claims, Remuneration, Member Cost Sharing, and various rates across multiple products and plans.

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	0.9400
Rating Area 4	0.9400

Part III Actuarial Memorandum
Highmark Coverage Advantage
Individual Rate Filing
Effective January 1, 2025

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I. General Information

Document Overview

This document contains the Part III Actuarial Memorandum for Highmark Coverage Advantage’s (HCA) individual block of business rate filing, for products with an effective date of January 1, 2025. 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 Pennsylvania Insurance Department (“Department”), the Center for Consumer Information and Insurance Oversight (CCIIO), and their subcontractors to assist in the review of HCA’s rate filing. However, we recognize that this certification may become a public document. HCA 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 that would result in the creation of any duty or liability under any theory of law by HCA.

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 Coverage Advantage
- State: The Commonwealth of Pennsylvania has regulatory authority over these policies.
- HIOS Issuer ID: 79279
- Market: Individual
- Effective Date: January 1, 2025

I.2 Company Contact Information:

- Primary Contact Name: [REDACTED]
- Primary Contact Telephone Number: [REDACTED]
- Primary Contact Email Address: [REDACTED]

II. Proposed Rate Changes

For all rate changes by plan, see the ‘Cumulative Rate Change % (over 12 mos prior)’ found in Worksheet 2, line 1.11 of the URRT. The rate change varies by plan due to an update in several of our pricing factors and changes in cost sharing required to meet Actuarial Value and other cost sharing restrictions under the Affordable Care Act as well as mappings between discontinued and new plans.

The primary drivers of the rate increase are cost and utilization trend.

In accordance with the Department’s guidance in the July 24, 2024 objection letter, the impact of the state 1332 Reinsurance program is captured using the prescribed parameters of \$60,000 attachment point, 60% coinsurance rate, and \$100,000 reinsurance cap. If the finalized parameters differ from those described in this filing, a revised submission would be required.

Finally, modifications to the rate development may be necessary if significant unforeseen events occur. Examples include, but are not limited to, changes in legislation/regulations (including rules, regulatory guidance, etc.), material provider contracting changes, or changes in the participation of QHP issuers that would materially impact risk adjustment transfer amounts. As a result, HCA reserves the right to submit a revised filing.

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

III.1 Paid through Date:

Experience Period claims were based on incurred calendar year 2023, paid through February 2024. This includes 2023 experience in Affordable Care Act compliant plans. HCA did not offer any transitional plans in 2023.

III.2 Current Date:

The current date shown represents a snapshot of February 1, 2024.

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

- **Historical Experience:** We chose HCA’s current experience for the individual block of business for the period January 1, 2023 through December 31, 2023, with claims paid through February 2024 as the basis for the 2025 projected individual market pricing.
- **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 HCA’s individual book-of-business. This section includes:
 - The amount of claims which were processed through Company’s claims system,

- Claims processed outside of the Company’s claims system, 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 The Company’s detailed claim-level historical data. This experience includes 2023 claims for Affordable Care Act compliant business. For capitated and other off-system claims, historical capitations and experience were tabulated and added to the claims.
 - **Paid Claims:** We also summarized the paid claims from detailed member records. The paid-to-allowed ratio for the experience period reflects the 2023 plan designs chosen by each member.
 - **Incurred but Not Paid (IBNR) Claims Estimate:** The Company is using a completion factor of 0.9691 to include IBNR claims in allowed charges. The IBNR completion factor was developed using our corporate reserving system for The Company’s individual business. We applied it equally to both paid and allowed total claims (as a change to utilization) to complete the experience.

IV. Benefit Categories

The index rate of the experience period was summarized at the defined benefit categories included in Worksheet 1, Section II of the URRT.

The data provided in this section closely adheres 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. Prescription drug utilization was converted to a “per 30-day” script count.

V. Projection Factors

V.1 Trend Factors

This development of the CY2025 rates reflects an annual trend rate of 6.5% (5.0% cost, 1.4% utilization) for medical and 8.8% (5.0% cost, 3.6% utilization) for pharmacy. These trends reflect HCA’s expectations regarding increases in in-network contractual reimbursement and out-of-network costs. These estimates measure and normalize for some of the more explainable variables such as high dollar claims, work days, provider contracting, demographics, and seasonality.

The medical trend represents a blended average for all medical types of services and is applied to the aggregate medical experience for pricing. Component data was not used in the development of the trend except pharmacy-specific projections were used to adjust the Pharmacy trend. The Pharmacy trend takes into account factors such as projected specialty drug use, pipeline drugs coming to market, and provider contracting. 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 Changes in the Morbidity of the Population Insured

The Morbidity Adjustment of 0.969 reflects the change in the population mix/claim levels from the experience period to the projection period. We continue to observe a high degree of membership churn from year-to-year, which impacts the morbidity. This factor also takes into consideration the effects of adverse selection inherent to guaranteed issue markets. The Individual ACA risk pool continues to have a significantly higher proportion of older members with a high prevalence of chronic conditions compared to group business, which adds to the uncertainty of any future claim projections.

In accordance with the Department's guidance, the morbidity change related to the Reinsurance program is set to 1.000.

There are no longer any COVID adjustments from the experience period to the rating period.

V.3 Changes in Demographics

We project that the average rating factor (age, tobacco load and area combined) will decrease by about 0.1% due to the change in the population. This is primarily due to the expectation that the new members from the group and/or uninsured populations to be slightly younger than the population in the underlying experience. This decreases the projected allowed claims (utilization) by the same amount.

V.4 Changes in Benefits

There is no change in benefits related to the essential health benefit (EHB) categories so the factor is set to 1.0. The cost sharing changes for the EHBs are captured in the paid to allowed ratio factors discussed in the AV and Cost Sharing Design of Plan section X.1.

V.5 Changes in Other

The 1.035 factor represents the combined impact of changes in network, induced demand, pharmacy rebates, hospital/physician settlements, and state mandates/laws (when applicable).

VI. Manual Rate Adjustments

HCA's individual experience is fully credible. No manual rate is developed or used in this projection.

VII. Credibility of Experience

The experience is from HCA's individual book of business in 2023. It is large enough to be fully credible. Our results are based 100% on the experience rate, as adjusted.

VIII. Index Rate

The index rates as shown on Worksheet 1 of the URRT are simply the single risk pool average allowed claims for the Essential Health Benefits for the experience and projected populations, respectively, for HCA. For the experience period, only non-grandfathered plans are included. The projection period Index Rate is not adjusted for reinsurance or risk adjustment programs or any other fee.

IX. Market Adjusted Index Rate [MAIR]

The Market Adjusted Index Rate is the Projected Index Rate further adjusted for reinsurance, risk adjustment, and the exchange user fee.

IX.1 Projected Reinsurance PMPM

In accordance with the Department's guidance in the July 24, 2024 objection letter, the impact of the state 1332 Reinsurance Program is captured using the following parameters for 2025: an attachment point of \$60,000, a coinsurance rate of 60%, and a cap of \$100,000. HCA estimated the impact of the reinsurance program under these tentative parameters by trending Highmark PA individual ACA CY2023 incurred claims by member to the CY2025 rating period, applying the parameters, and calculating the amount of incurred claims expected to be reimbursed by the program. The modeling produced an estimated incurred claims savings of 5.4%. This percentage was converted to a PMPM and adjusted to an equivalent allowed claim basis by dividing the PMPM by the paid-to-allowed factor and the composite effect of catastrophic eligibility and benefits in addition to EHB. This amount is reflected in worksheet 1 of the URRT.

IX.2 Projected Risk Adjustment PMPM

The estimated average risk score for HCA's projected 2025 population was developed by using HCA's 2023 claim diagnoses and the risk adjustment coefficients as finalized in the Notice of Benefit and Payment Parameters. Similarly, actuarial value factors and induced demand factors were estimated for HCA based upon its projected 2025 population.

We estimated the statewide average risk transfer factors based on current market assumptions. We estimated the statewide average premium using current market premium assumptions with adjustments for anticipated rate changes for 2025.

The actual calculation of the risk transfer followed the risk transfer methodology as prescribed.

The analysis resulted in HCA paying to the risk adjustment pool. The (\$78.80) PMPM value shown in worksheet 1 of the URRT is developed by taking the expected risk transfer amount plus the projected High Cost Risk Pool charge and adjusting it to an equivalent allowed claims basis by dividing it by the paid-to-allowed factor and the composite effect of catastrophic eligibility and benefits in addition to EHB.

For the purposes of this rate filing, HCA has assumed no adjustment to the projected risk adjustment transfer for the Risk Adjustment Data Validation (RADV) program.

IX.3 Exchange User Fee %

The 3.06% value shown in worksheet 1 of the URRT is developed by multiplying the 3% exchange user fee by the assumed percentage of on exchange membership. This calculated amount is then divided by the paid-to-allowed factor to bring it to an equivalent allowed claims basis and adjusted further for the composite effect of catastrophic eligibility and benefits in addition to EHB.

X. Plan Adjusted Index Rate [PAIR]

The Plan Adjusted Index Rates can be found on line 3.10, Worksheet 2 of the URRT. The PAIR rates are calculated by applying the allowable rating factors as described below to the Market Adjusted Index Rate.

X.1 AV and Cost Sharing Design of Plan

The AV and Cost Sharing allowable rating factor is comprised of the following components:

- The utilization due to differences in cost sharing is based on the factors calculated using a methodology prescribed in the Department's guidance relative to the weighted average. No differences due to health status are in these adjustments.
- The pricing AV for the benefits and cost sharing of the plan and a CSR load for the on exchange silver plans.

Impact of Non-Payment of Cost Sharing Reduction Subsidies

In accordance with the Department's guidance, we have applied an additional adjustment to our AV pricing values for those Silver plans not offered exclusively off-exchange. This adjustment factor was 1.25 and represents the non-payment of Cost Sharing Reduction subsidies.

X.2 Provider Network Adjustment

The provider network adjustments are developed by dividing the plan level network factors by the overall weighted average from all plans.

X.3 Benefits in Addition to EHB

Non-EHB benefits are offered in several plans. Six plans have an adult dental and vision benefit, two plans have an adult vision exam benefit, and six plans have a hearing benefit.

X.4 Administrative Expense

The proposed rates reflect internal administrative costs including quality improvement administrative expenses. This cost was developed based on standard expense allocation methods.

X.5 Taxes and Fees:

The following fees were added:

- \$0.18 PMPM for Risk Adjustment User Fee
- \$0.31 PMPM for Patient Centered Outcomes Research Institute (PCORI) Fee
- 0.0% for the Health Insurance Provider Fee
- 0.0% for the PA Premium Tax

X.6 Profit (or Contribution to Surplus) & Risk Margin:

HCA has voluntarily refrained from including a risk and contingency factor in this filing. By this voluntary restraint, HCA is not waiving any right to include a risk and contingency factor which HCA believes is consistent with historical and legal interpretations of HCA and the Pennsylvania Insurance Department.

X.7 Catastrophic Adjustment

For catastrophic plans, we use a 0.92 factor for the specific eligibility adjustment.

XI. Calibration

XI.1 Age Curve Calibration:

The projected weighted average age factor for billable members is 1.7058. This factor is calculated by dividing the all members age factor of 1.7045 by the ratio of billable members to total members 0.9992. The age curve calibration factor is $1/1.7058 = 0.5862$.

XI.2 Geographic Calibration Factor:

The projected weighted average geographic factor is 0.940. Each Plan Adjusted Index Rate represents the rate for an average member with a geographic factor of 0.940. The geographic calibration factor is $1/0.940 = 1.0638$.

XI.3 Tobacco Calibration Factor:

The projected weighted average tobacco factor is 1.0060. Each Plan Adjusted Index Rate represents the rate for an average member with a tobacco factor of 1.0060. The tobacco calibration factor is $1/1.0060 = 0.9940$.

XI.4 Consumer Adjusted Premium Rate Development:

The calibrated plan adjusted index rate represents the base rate for an age factor of 1.0, geographic rating factor of 1.0 and tobacco rating factor of 1.0. Thus, the approximate premium for a specific member can be derived by multiplying this rate by the HHS age curve factor, the rating area factor on Worksheet 3 of the URRT, and the appropriate tobacco factor. Please note that this method will only produce approximate rates due to URRT rounding constraints.

XII. Projected Loss Ratio

The projected loss ratio for 2025 using the federally-prescribed MLR methodology is 90.0%.

XIII. AV Metal Values

The AV Metal Values included in Worksheet 2 of the Part I Unified Rate Review Template were based the Federal AV Calculator. Some plans did require an adjustment to the inputs entered into the AV calculator. Screen shots and certifications for these plans were submitted as part of HCA’s QHP application. When applicable and per CMS’s guidance, a dummy AV Metal Value was applied to any terminated plans that fell out of the new de minimis range.

XIV. Membership Projections

Membership projections reflect HCA’s expectations for 2025. These projections reflect expected changes in market share due to market competition, relative price levels, and changes in plan offerings (where applicable).

HCA expects membership in 2025 to follow a similar metal level distribution as the Individual ACA experience period in the markets where plans will continue to be offered.

For the Silver level plans, the projected membership by cost sharing subsidy levels is based on the observed distribution of ACA members that were eligible under the federal poverty levels as determined by the federal health insurance exchange. The projected enrollment by plan and subsidy level is as follows:

CSR Silver Plan Membership Distribution			
FPL	Subsidy Level	% of Silver Membership	% of Total Membership
<150%	94%	49.9%	10.7%
150%-200%	87%	40.5%	8.7%
200%-250%	73%	1.0%	0.2%
<u>>250%</u>	<u>70%</u>	<u>8.6%</u>	<u>1.8%</u>
Total		100.0%	21.4%

XV. Terminated Plans and Products

Plans in the 2023 experience period that will no longer be available in 2025 can be found in Exhibit I.

XVI. Plan Type

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

XVII. Actuarial Certification

I, [REDACTED], 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. All statements in this actuarial certification are accurate to the best of my knowledge and understanding. This filing is prepared in compliance with applicable Actuarial Standards of Practice. In completing this filing, I relied on data/information from other sources which was reviewed for reasonableness. This filing is prepared on behalf of HCA to accompany its rate filing for the Individual Market on and 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 AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans. The AV Metal Values included in Worksheet 2 of the Part I Unified Rate Review Template were based on the Federal AV Calculator. If any adjustments were required outside of the AV Calculator, appropriate certification has been provided to CMS through the QHP application process.

I certify that the geographic rating 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.

The Part I Unified Rate Review Template does not demonstrate the process used by HCA 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:



Title: Actuarial Manager, Individual Markets

Date: August 16, 2024

XVIII. Exhibit I

Highmark Coverage Advantage

Terminated Experience Period Plans

HIOS ID	Metal	Plan Name	2025 Mapping
79279PA0260001	Gold	Together Blue Diabetes EPO Gold 0	N/A
79279PA0270001	Gold	Together Blue Diabetes EPO Gold 0 + Adult Dental and Vision	N/A

2025 Rates Table Template v14.0		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.				
HIOS Issuer ID*		79279				
Rate Effective Date*		1/1/2025				
Rate Expiration Date*		12/31/2025				
Rating Method*		Age-Based Rates				
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*	
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an Individual tobacco enrollee on a plan	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	280.09	280.09	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	15	304.99	304.99	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	16	314.51	314.51	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	17	324.03	324.03	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	18	334.28	334.28	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	19	344.53	344.53	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	20	355.15	355.15	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	21	366.13	375.28	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	22	366.13	375.28	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	23	366.13	375.28	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	24	366.13	375.28	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	25	367.59	376.78	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	26	374.92	384.29	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	27	383.70	393.29	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	28	397.98	407.93	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	29	409.70	419.94	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	30	415.56	425.95	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	31	424.34	434.95	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	32	433.13	443.96	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	33	438.62	449.59	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	34	444.48	455.59	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	35	447.41	458.60	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	36	450.34	461.60	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	37	453.27	464.60	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	38	456.20	467.61	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	39	462.06	473.61	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	40	467.91	514.70	
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79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	42	485.12	539.45	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	43	496.84	556.96	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	44	511.48	579.00	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	45	528.69	605.35	
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79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	47	572.26	673.55	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	48	598.62	715.95	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	49	624.62	760.16	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	50	653.91	801.04	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	51	682.83	836.47	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	52	714.69	875.50	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	53	746.91	914.96	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	54	781.69	957.57	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	55	816.47	1000.18	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	56	854.18	1046.37	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	57	892.26	1093.02	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	58	932.90	1142.80	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	59	953.04	1167.47	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	60	993.68	1217.26	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	61	1028.83	1260.32	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	62	1051.89	1288.57	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	63	1080.82	1324.00	
79279PA0140003	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1098.39	1345.53	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	0-14	280.09	280.09	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	15	304.99	304.99	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	16	314.51	314.51	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	17	324.03	324.03	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	18	334.28	334.28	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	19	344.53	344.53	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	20	355.15	355.15	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	21	366.13	375.28	
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79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	24	366.13	375.28	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	25	367.59	376.78	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	26	374.92	384.29	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	27	383.70	393.29	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	28	397.98	407.93	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	29	409.70	419.94	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	30	415.56	425.95	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	31	424.34	434.95	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	32	433.13	443.96	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	33	438.62	449.59	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	34	444.48	455.59	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	35	447.41	458.60	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	36	450.34	461.60	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	37	453.27	464.60	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	38	456.20	467.61	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	39	462.06	473.61	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	40	467.91	514.70	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	41	476.70	526.75	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	42	485.12	539.45	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	43	496.84	556.96	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	44	511.48	579.00	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	45	528.69	605.35	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	46	549.20	637.07	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	47	572.26	673.55	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	48	598.62	715.95	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	49	624.62	760.16	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	50	653.91	801.04	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	51	682.83	836.47	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	52	714.69	875.50	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	53	746.91	914.96	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	54	781.69	957.57	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	55	816.47	1000.18	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	56	854.18	1046.37	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	57	892.26	1093.02	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	58	932.90	1142.80	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	59	953.04	1167.47	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	60	993.68	1217.26	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	61	1028.83	1260.32	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	62	1051.89	1288.57	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	63	1080.82	1324.00	
79279PA0140003	Rating Area 4	Tobacco User/Non-Tobacco User	64 and over	1098.39	1345.53	
79279PA0150003	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	295.47	295.47	
79279PA0150003	Rating Area 1	Tobacco User/Non-Tobacco User	15	321.74	321.74	
79279PA0150003	Rating Area 1	Tobacco User/Non-Tobacco User	16	331.78	331.78	
79279PA0150003	Rating Area 1	Tobacco User/Non-Tobacco User	17	341.82	341.82	
79279PA0150003	Rating Area 1	Tobacco User/Non-Tobacco User	18	352.64	352.64	
79279PA0150003	Rating Area 1	Tobacco User/Non-Tobacco User	19	363.45	363.45	
79279PA0150003	Rating Area 1	Tobacco User/Non-Tobacco User	20	374.65	374.65	
79279PA0150003	Rating Area 1	Tobacco User/Non-Tobacco User	21	386.24	395.90	
79279PA0150003	Rating Area 1	Tobacco User/Non-Tobacco User	22	386.24	395.90	
79279PA0150003	Rating Area 1	Tobacco User/Non-Tobacco User	23	386.24	395.90	

79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	31	203.83	208.93
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	32	208.05	213.25
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	33	210.69	215.96
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	34	213.51	218.85
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	35	214.91	220.28
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	36	216.32	221.73
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	37	217.73	223.17
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	38	219.13	224.61
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	39	221.95	227.50
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	40	224.76	247.24
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	41	228.98	253.02
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	42	233.03	259.13
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	43	238.66	267.54
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	44	245.69	278.12
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	45	253.96	290.78
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	46	263.81	306.02
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	47	274.88	323.53
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	48	287.55	343.91
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	49	300.03	365.14
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	50	314.10	384.77
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	51	328.00	401.80
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	52	343.30	420.54
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	53	358.77	439.49
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	54	375.48	459.96
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	55	392.19	480.43
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	56	410.30	502.62
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	57	428.60	525.04
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	58	448.12	548.95
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	59	457.79	560.79
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	60	477.31	584.70
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	61	494.19	605.38
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	62	505.27	618.96
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	63	519.17	635.98
79279PA0100001	Rating Area 4	Tobacco User/Non-Tobacco User	64 and over	527.61	646.32