

KHPE – Individual Plans

Rate Request filing ID # INAC-134056069 – 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: 8.88% Revised requested average rate change: 5.38%

Range of requested rate change: 4.37% to 5.82% Effective date: January 1, 2025

Mapped members: 123,281
Available in: Rating Area 8

Key Information

Jan. 2023-Dec. 2023 financial experience

 Premiums
 \$783,086,917

 Claims
 \$652,720,234

 Administrative Expenses
 \$40,140,605

 Taxes & Fees
 \$69,617,208

Insurers made (after taxes) \$20,608,871

How it plans to spend your premium¹

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

Claims: 84%
Administrative: 11%
Taxes & Fees: 3%
Profit: 2%

The insurer expects its annual medical costs to increase 7.5%.

Our Decision

The insurer requested an average 8.88% 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 5.38% 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%.

Rate Decision – 2025



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- 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 5.38%, ranging from 4.37% to 5.82%.





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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.





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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.)





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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



Independence 🚭

May 15, 2024

Ms. Lindsi Swartz, Director Bureau of Accident and Health Insurance Pennsylvania Insurance Department 1311 Strawberry Square Harrisburg, PA 17120

SUBMITTED VIA SERFF

RE: Keystone Health Plan East Individual HMO Rate Filing effective 1/1/2025 INAC-134056069

Dear Ms. Swartz:

Attached is the 2025 annual rate filing for HMO plans of Keystone Health Plan East (KHPE) in the Individual (non-group) marketplace in the Commonwealth of Pennsylvania. Rates for new and renewing plans are being filed and satisfy market reform requirements of the Affordable Care Act (ACA).

This rate filing includes rates for these plans and specifies compliance with rating requirements of the ACA. The enclosed is for rating periods effective from January 1, 2025 through December 31, 2025.

Per the guidance provided in the 2025 ACA-Compliant Health Insurance Rate Filing Guidance provided by the Pennsylvania Insurance Department, we applied a Reinsurance Morbidity Adjustment factor of 1.00 to all individual plans. We also applied a factor of 1.22 to Silver plans for the impact of non-payment of CSR costs per the guidance. This submission incorporates a 60% coinsurance parameter for the reinsurance program.

The proposed rates represent an 5.4% increase over the previously approved 2024 rates.

Information for the Pennsylvania Bulletin:

Company Name and NAIC Number: 1. Keystone Health Plan East 95056 2. Market Individual 3. On or Off Exchange On and Off 4. Effective Date of Coverage January 1, 2025 5. Average Rate Change Requested 5.4%

6. Range of Rate Changes Requested 4.4% to 5.8%

Independence 👨

- 7. Total Annual Revenue Generated from the Proposed Rate Change
- 8. Products
- 9. Rating Areas and Change from 2024
- 10. Metal Levels and Catastrophic Plans
- 11. Current covered lives and policyholders as of February 1, 2024
- 12. Number of plans offered in 2025 and change from 2024
- 13. Corresponding contract form number, SERFF, and binder numbers
- 14. HIOS Issuer ID # and submission tracking Number

\$41,107,755 HMO Rating Area 8 No Change from 2024 Gold, Silver, Bronze

123,281 lives

15 plans in 2025; 15 plans in 2024

SERFF # INBC-134078704, INBC-PA25- 125118186 See appendix for form numbers HIOS Issuer ID # 33871; Filing # N/A

Please contact at a or with any questions regarding this filing.

Sincerely,

cc:

Independence 🍇

APPENDIX

Form Numbers

PREV/SCH-II Rev. 1.25

KE 650 IND FC EXC-ON Rev. 1.25 KE 650 IND FDED EXC-ON Rev. 1.25 KE 650 IND FTC EXC-ON Rev. 1.25 KE 650 IND FTDED EXC-ON Rev. 1.25 KE 650 IND FTDED LT EXC-ON Rev. 1.25 KE 650 IND FC EXC-OFF Rev. 1.25 KE 650 IND FDED EXC-OFF Rev. 1.25 KE 650 IND FTC EXC-OFF Rev. 1.25 KE 650 IND FTDED EXC-OFF II Rev. 1.25 KE 650 IND FTDED EXC-OFF Rev. 1.25 KE 680 IND FC EXC.OC-ON Rev. 1.25 KE 680 IND FDED EXC.OC-ON Rev. 1.25 KE 680 IND FTC EXC.OC-ON Rev. 1.25 KE 680 IND FTDED EXC.OC-ON Rev. 1.25 KE 680 IND FTDED LT EXC.OC-ON Rev. 1.25 KE 680 IND FC EXC.OC-OFF Rev. 1.25 KE 680 IND FDED EXC.OC-OFF Rev. 1.25 KE 680 IND FTC EXC.OC-OFF Rev. 1.25 KE 680 IND FTDED EXC.OC-OFF II Rev. 1.25 KE 680 IND FTDED EXC.OC-OFF Rev. 1.25

PENNSYLVANIA ACTUARIAL MEMORANDUM

PURPOSES

This Actuarial Memorandum is provided along with the Unified Rate Review Template (URRT) and PA Actuarial Memorandum Rate Exhibits to provide certain information to support the gross premium for the single risk pool for individual market health care insurance underwritten by Keystone Health Plan East in the Commonwealth of Pennsylvania. It is provided as a component of a state rate filing. This submission may not be appropriate for other purposes.

1. BASIC INFORMATION AND DATA

A. COMPANY INFORMATION

Company Legal Name: Keystone Health Plan East ("KHPE")

State: Pennsylvania

NAIC #: 95056
Market: Individual

Marketplace: On and Off Exchange

Effective Date(s): 1/1/2025 – 12/31/2025

Average Rate Change: 5.4%

Range of Rate Changes: 4.4% to 5.8%

Products: HMO

Rating Areas: Rating Area 8

Metal Levels: Gold, Silver, Bronze

Metal Levels: Gold, Silver, Bron

 Current Members:
 123,281

 Number of 2025 Plans:
 15

 HIOS Issuer ID (5-digit):
 33871

Worksheet 1 of the accompanying URRT contains experience period data and development of the projected Single Risk Pool Gross Premium Average Rate PMPM for the individual market for KHPE. Worksheet 2 contains experience period data and projections by product for the single risk pool for the same entities. This memorandum pertains only to plans denoted in Worksheet 2 by Plan IDs starting with the sequence 33871.

COMPANY CONTACT INFORMATION

Primary Contact Name:

Primary Contact Telephone Number:

Primary Contact Email Address:



B. RATE HISTORY AND PROPOSED VARIATIONS IN RATE CHANGES

January 1, 2021	-3.90%	INAC- 132358787
January 1, 2022	2.20%	INAC- 132818417
January 1, 2023	1.31%	INAC- 133249350
January 1, 2024	-3.50%	INAC- 133674084

The historical rate changes varied by metallic tier based on plan benefits as illustrated via the Pricing AV.

Proposed rate changes may vary by metallic tier and plan based on plan benefit changes, and the revision to the CSR Defunding Adjustment factor.

C. AVERAGE RATE CHANGE

The average proposed rate change shown in Cell AC15 of Table 10 is 5.4%. The changes to the single risk pool gross premium average rate per member per month (PMPM) from calendar year 2023 to calendar year 2025 are incorporated into the pricing and reflected in the Unified Rate Review Template.

The change in 21-year-old Non-Tobacco Premium PMPM calculated in Table 11, Cell AN13 is 5.4%.

D. MEMBERSHIP COUNT

Table 1 illustrates the Experience Period member-months, Current Period members as of February 1, 2024, and Projected Rating Period Member-months by ages.

E. BENEFIT CHANGES

Benefit changes were made to the following plans to assure compliance with Actuarial Value Requirements, including differences that resulted from changes to the AV Calculator. The basis for pricing changes was our internal pricing model.

F. EXPERIENCE PERIOD CLAIMS AND PREMIUMS

Table 2 illustrates the experience period claims and premiums using calendar year data. The data is consistent with the data reported in Section 1 of Worksheet I of the URRT.

We combined the experience period data for KHPE with the experience period data for QCC Insurance Company ("QCC"). This should provide a more stable basis for projecting the Index Rate. The combined data is shown in Tab Ib. The Change in Network Factor is intended to result in KHPE rates that are reasonable in relation to QCC rates.

Experience period premium, claims, and member months are obtained from the company's internal data warehouse. The claims data is collected for incurred dates from January through December 2023 and paid through February 2024. Earned premiums and member months are for January through December 2023. The data are for all direct-written individual business of KHPE in the Commonwealth of Pennsylvania, including out-of-network claims written by KHPE but paid by QCC for POS plans. No private reinsurance was applicable.

The Non-EHB benefits portion of Allowed Claims is shown separately in cell H36 of Table 2. Capitation is uniform by age for the experience period. Net pharmacy rebates are illustrated in cell I36 of Table 2.

Projected Risk Adjustment PMPM

Projected Risk Adjustment is accounted for in Projected Incurred Claims before the state based reinsurance program and Risk Adjustment to reflect anticipated risk adjustment transfer amounts for the projection period. The amount reflects the projected morbidity for the single risk pool in the projection period.

The estimated risk adjustment revenue for all of the plans in the risk pool is developed using the following methodology. We recognize that the HHS payment transfer formula implies that the projected incurred claims based solely on the experience period single risk pool claims need to be adjusted by the ratio of the current statewide market's risk relative to allowable rating factor (ARF) for age compared to the single risk pool's risk relative to ARF presented during the experience period. This adjustment, together with the assumed future changes in population risk morbidity, results in the issuer's pricing being consistent with the anticipated morbidity level of the future statewide market.

The anticipated risk adjustment transfer revenue is allocated proportionally based on plan premium. The Projected Risk Adjustment is subtracted from Projected Incurred Claims before ACA Risk Adjustment to reflect anticipated receipt of risk adjustment transfer amounts for the projection period.

The projected risk adjustment amounts for KHPE and Independence Blue Cross (QCC) are consistent with the projection made in the respective submissions. We also considered preliminary 2023 risk transfer results.

In the URRT v6.0, it is necessary to divide Risk Adjustment by the Paid to Allowed factor when it is used in calculations based on Allowed Claims to produce calculations that are consistent with the Actuarial Memo Rate Exhibit.

G. CREDIBILITY OF DATA

The experience period data, defined in Section F as the combined experience of Keystone Health Plan East, and the experience period data for QCC Insurance Company, Inc. ("QCC"). is considered 100% credible.

H. TREND IDENTIFICATION

Table 3 identifies the proposed annual medical and prescription drug allowed claims cost and utilization trends. These data match the data illustrated in Section 2 of Worksheet I of the URRT. Additional discussion is provided in Section I, Historical Experience.

We populated the URRT with the Total Annual Trend calculated in cell G52 of Table 3. The URRT requires that factors are rounded to four decimal places which results in some small differences.

I. HISTORICAL EXPERIENCE

Table 4 illustrates historical experience from 2019 through 2023 for the product line.

a. Annualized Cost Trend

Annual cost trend reflects changes in costs of medical treatment due to medical inflation and changes in the distribution of services across network providers. The trend value is developed by reviewing historical medical costs for the single risk pool and adjusting them for anticipated future provider contracting reimbursement levels. The data is normalized for changes in age, benefit changes during the experience period, changes to provider contracts, and prescription drug formulary, and new drugs brought to market.

b. Annualized Utilization Trend

Annual utilization trend reflects the change in the number of units per 1,000 members for a fixed level of illness burden and includes changes due to the mix and intensity of services provided and changes related to shifts in product mix. It also includes effects of selection, if any, since this cannot be reflected in the relative cost of the various products and plans offered.

c. Rebates

Rebate payments will be made as appropriate for 2023 for KHPE in Consumer. Rebate payments will be made if applicable for the 2024 policy period. We do not anticipate 2025 rebates for KHPE Consumer.

d. Benefit Changes

Historical medical costs are normalized for the impact of benefit and mix factors to isolate the effect that changes in plan design or member movements amongst plans has on historical trend. By isolating

this impact we avoid projecting cost trends into the future that are due to non-repeatable historical member movements or benefit changes.

- 1. Benefit changes are calculated to value the cost-to-health-plan impact of year-over-year changes in plan designs. The methodology used to calculate the benefit changes is consistent with the one used in the calculation of Pricing AV.
- 2. Mix impact is calculated using the historical average costs by member at the metallic level, separately for HMO and PPO products.

J. TERMINATED PLANS

No plans are being terminated in 2025.

2. RATE DEVELOPMENT AND CHANGE

A. DEVELOPMENT OF PROJECTED INDEX RATE, MARKET-ADJUSTED INDEX RATE, & TOTAL ALLOWED CLAIMS

Table 5 illustrates the development of the Projected Index Rate and Market-Adjusted Index Rate beginning with the Experience Period Index Rate. Exhibit A provides additional information about the adjustment factors.

Changes in Population Risk Morbidity

Experience period allowed claims are adjusted to account for differences in the average morbidity of the single risk pool population underlying the experience and the anticipated population in the projection period. This adjustment reflects changes in the individual market-wide morbidity.

Development of Reinsurance Tables

The Continuance Table for Calculating Reinsurance Impact - Individual Market Only, Experience Period Information was populated using combined 2023 KHPE and QCC Individual claims data by individual member. 2023 claims paid through February 2024 were completed and complied into the Annual Incurred Claims Ranges shown on Tab II.a. of the Actuarial Memorandum Exhibit.

The Continuance Table for Calculating Reinsurance Impact - Individual Market Only, Projection Period Information was populated by trending the data from the Experience Period table to 2025 using a 7.5% trend assumption on the incurred claims. The resulting impact is shown in Cell E7 of Tab II.b. of the Actuarial Memorandum Exhibit.

Changes in Other Factors

Experience period allowed claims are adjusted to account for differences in the single risk pool population underlying the experience and the anticipated population in the projection period pertaining to several factors not due to changes in morbidity or the costs and utilization of medical care. This adjustment reflects: additional benefits required to be covered as essential health benefits; recently mandated benefits required by state law that are not reflected in the experience period data (e.g., ABA coverage which was not covered in the experience period but will be covered in the projection period); benefits in the experience that are removed for the projection period; anticipated changes in the average utilization of services due to differences in average cost sharing requirements during the experience period and average cost sharing requirements in the projection period; changes in demographic characteristics of the single risk pool experience period population and the projection period population (including age, gender, region, and tobacco use); changes in the provider network (adding or removing a provider system or introducing a limited network option); and anticipated changes in pharmacy rebates.

Table 5 of the Actuarial Memorandum Rate Exhibit shows the components used in calculating change in other. The calculations of the components are based on the changes in values shown in Table 7.

CSR payments are funded through premiums in this filing. The additional cost to provide the CSRs is recognized in Column P of Table 10 of the Actuarial Memorandum Rate Exhibit. In URRT Part I, the cost is reflected in the Paid to Allowed factor. The Paid to Allowed factor in the URRT Part 1 is equal to the Paid to Allowed factor in Table 5 multiplied by the value in cell P15 of Table 10 of the Actuarial Memorandum Rate Exhibit.

B. RETENTION ITEMS

Table 6 illustrates the retention items, expressed as percentages of premium. Federal Income Tax is calculated by applying the tax rate to the sum of the HIF plus Profit/Contingency.

Administrative Expenses		13.87%
General and Claims	11.12%	
Agent/Broker Fees and Commissions	1.95%	
Quality Improvement Initiatives	0.80%	
Taxes and Fees		0.65%
RA User Fee	0.03%	
PCORI Fee	0.08%	
PA Premium Tax	0.00%	
Federal Income Tax	0.53%	
Health Insurance Providers Fee	0.00%	
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KHPE Consumer		May 15, 2024
		Revised August 29, 2024

Profit/Contingency 2.00%

Total Retention 16.52%

C. NORMALIZED MARKET-ADJUSTED PROJECTED ALLOWED TOTAL CLAIMS

Table 7 compares the normalization factors used in this filing to those used in the 2024 filing. The changes in the factors reflect small differences from the projected populations in 2023 and 2024.

D. COMPONENTS OF RATE CHANGE

Table 8 illustrates the components of rate change, based on inputs form other sections of the Rate Exhibits. The results in Row H are similar to the values in Row A of Table 8.

Data in Table 9 is consistent with the 2024 and 2025 URRT with the exception of Risk Adjustment which was revised to project company-specific values.

E. MLR DEMONSTRATION

Projected Claims PMPM (After Reinsurance)	\$454.57
Premium PMPM	\$544.51
Quality Improvement Expense PMPM	\$4.36
Exchange User Fee PMPM	\$13.51
HIF PMPM	\$0.00
Federal Income Tax PMPM	\$2.89
Premium Tax PMPM	\$0.00
Federal MLR	84.3%

3. PLAN RATE DEVELOPMENT

Table 10 is populated with plan information consistent with entries in the 2025 URRT. Plan mappings, where applicable, are illustrated in Column F of Table 10.

Attached to this actuarial memorandum are exhibits providing actuarial certifications for the use of alternate methods of calculating the Actuarial Value, where applicable, as well as required support for the calculations.

The factor "AV and Cost Sharing Design of Plan" in Worksheet 2 of the URRT is the product of the Pricing AV, the Non-Funding of CSR Adjustment, and the Benefit Richness Factors from the Actuarial Memo Rate Exhibit. Again, please note that the URRT requires factors to be rounded to four decimal places, resulting in small differences.

4. PLAN PREMIUM DEVELOPMENT FOR 21-YEAR OLD NON-TOBACCO USER

Table 11 is populated from other sections of the Rate Exhibits, along with the population by age and rating area for the Projection Period.

5. PLAN FACTORS

Tables 12, 13, and 14 illustrate the factors used in pricing for age, tobacco, geographic rating area, and network. The tobacco factors match the previously approved tobacco factors from the 2024 filing.

6. ACTUARIAL CERTIFICATION

I, am Director & Actuary of Commercial Markets for the Independence Blue Cross Family of Companies. I am a member of the Society of Actuaries and the American Academy of Actuaries with the education and experience necessary to perform the work necessary and meet the Qualification Standards of the American Academy of Actuaries to render the qualified actuarial opinion contained herein. The developed rates and memorandum have been prepared in conformity with appropriate Actuarial Standards of Practice and the Academy's Code of Professional Conduct.

The Part I Unified Rate Review Template does not demonstrate the process used by the issuer to develop the premium rates and allowable rating factors. Rather, it represents information required by Federal regulation to be provided in support of the review of gross premium rate increases, for certification of qualified health plans for Federally facilitated exchanges, and for certification that the index rate is developed in accordance with Federal regulation and used consistently and only adjusted by the allowable modifiers.

I hereby certify that, to the best of my knowledge and judgment, the following:

- The projected index rate is:
 - —In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.08(d)(1) and 147.106);
 - —Developed in compliance with applicable Actuarial Standards of Practice;
 - Reasonable in relation to the benefits provided and the population anticipated to be covered; and
 - —Neither excessive nor deficient.
- 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.
- The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice.
- The AV Calculator was used to determine the AV Metal Values illustrated in Worksheet 2 of the Part I Unified Rate Review Template for all plans, unless an alternate methodology was required. If an alternate methodology was used to calculate the AV Metal Value for at least

- one plan offered, a copy of the actuarial certification required by 45 CFR Part 156, §156.135 will be included.
- All factor, benefit, and other changes from the prior approved filing have been disclosed in the actuarial memorandum.
- New plans cannot be considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106.
- 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.

May 15, 2024

PA Rate Template Part I

Data Relevant to the Rate Filing

Table 0. Identifying Information

Carrier Name:	Keystone Health Plan East
Product(s):	НМО
Market Segment:	Individual
Rate Effective Date:	1/1/2025
Base Period Start Date:	1/1/2023
Date of Most Recent Membership:	2/1/2024

12/31/2025 12/31/2023

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of 02-01-2024)	Projected Rating Period
Average Age	42.1	41.7	41.7
Total	1,411,515	123,281	1,479,372
<18	132,075	11,773	141,276
18-24	96,423	8,787	105,444
25-29	112,069	10,174	122,088
30-34	126,207	11,189	134,268
35-39	125,369	11,375	136,500
10-44	123,313	10,817	129,804
15-49	121,911	10,696	128,352
50-54	145,732	12,232	146,784
55-59	175,437	14,680	176,160
50-63	178,897	15,257	183,084
64+	74,082	6,301	75,612

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
\$ 825,990,960.28	\$ 583,726,448.05	\$ 590,193,168.07	1,411,515	\$ 107,782,639.36	\$ 697,975,807.42	\$ -	\$ (67,019,690.70)	\$ 157,549,815.59	\$ 178,839.84	\$ (42,904,042.88)	\$ 28,181,898.95
Experience Period Total Allowed EH	IB Claims + EHB Capitation PMPM (net of prescription drug rebates)									\$ 558.62
Loss Ratio											83.35%

*Express Prescription Drug Rebates as a negative number

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	5.50%	5.05%		10.83%	17.59%
Outpatient Hospital	5.16%	5.05%		10.47%	21.23%
Professional	2.90%	5.05%		8.10%	23.16%
Other Medical	2.90%	5.05%		8.10%	0.00%
Capitation				3.51%	14.39%
Prescription Drugs	-0.97%	5.05%		4.03%	23.63%
Total Annual Trend				7.50%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.156	

* 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	\$	43,703,856.03	1.0000	\$ 43,703,856.03	116,561	\$ 374.94	,	\$ (3,272,756.15)		440.1
Feb-20	\$	37,390,884.50	1.0000	\$ 37,390,884.50	112,043	\$ 333.72		\$ (3,145,459.18)	\$ 42,982,713.47 \$	383.6
Mar-20	\$	34,668,964.36	1.0000	\$ 34,668,964.36	110,936			\$ (3,114,610.12)	\$ 39,070,343.27 \$	352.1
Apr-20	\$	31,641,371.58	1.0000	\$ 31,641,371.58	110,267	\$ 286.95		\$ (3,412,031.39)	\$ 33,316,533.97 \$	302.1
May-20	\$	32,984,549.87	1.0000	\$ 32,984,549.87	110,282	\$ 299.09		\$ (3,412,100.21)	\$ 35,202,660.34 \$	319.2
Jun-20	\$	38,486,944.82	1.0000	\$ 38,486,944.82	109,198	\$ 352.45		\$ (3,378,542.75)	\$ 41,682,584.47 \$	381.7
Jul-20	\$	41,322,632.71	1.0000	\$ 41,322,632.71	108,625	\$ 380.42		\$ (3,657,736.22)	\$ 44,415,351.51 \$	408.8
Aug-20	\$	41,783,354.81	1.0000	\$ 41,783,354.81	107,898	\$ 387.25		\$ (3,633,171.27)	\$ 44,602,669.60 \$	413.3
Sep-20	\$	42,342,304.42	1.0000		107,154	•		\$ (3,607,887.27)	·	422.7
Oct-20	\$	44,360,607.16	1.0000		106,172			\$ (3,841,481.30)		444.9
Nov-20	\$	43,468,833.61	1.0000	·	104,503			\$ (3,781,160.27)		439.3
Dec-20	\$ 797,737,191.41 \$	45,202,796.09	1.0000	\$ 45,202,796.09	102,616	\$ 440.50	\$ 83,234,416.79	\$ (3,712,851.30)	\$ 47,622,402.49 \$	464.0
Jan-21	\$	38,865,702.33	1.0000	\$ 38,865,702.33	108,979	\$ 356.63		\$ (3,721,966.70)	\$ 44,502,030.27 \$	408.3
Feb-21	\$	38,078,437.57	1.0000	\$ 38,078,437.57	111,005	\$ 343.03		\$ (3,790,436.97)	\$ 42,391,599.28 \$	381.8
Mar-21	\$	49,889,141.53	1.0000	\$ 49,889,141.53	110,252	\$ 452.50		\$ (3,764,981.34)	\$ 55,195,462.43 \$	500.6
Apr-21	\$	46,799,334.82	1.0000	\$ 46,799,334.82	110,338	\$ 424.15		\$ (4,135,520.37)	\$ 50,890,711.57 \$	461.2
May-21	\$	42,762,006.40	1.0000	\$ 42,762,006.40	111,047	\$ 385.08		\$ (4,162,195.09)	\$ 45,948,490.50 \$	413.7
Jun-21	\$	46,479,187.74	1.0000	\$ 46,479,187.74	112,196	\$ 414.27		\$ (4,205,040.39)	\$ 50,074,940.85 \$	446.3
Jul-21	\$	46,845,514.25	1.0000	\$ 46,845,514.25	113,596	\$ 412.39		\$ (4,315,959.05)	\$ 49,613,189.07 \$	436.
Aug-21	\$	50,700,618.52	1.0000	\$ 50,700,618.52	114,875	\$ 441.35		\$ (4,364,419.24)	\$ 53,232,869.14 \$	463.4
Sep-21	\$	51,552,019.12	1.0000	\$ 51,552,019.12	115,555	\$ 446.13		\$ (4,390,206.05)	\$ 53,697,201.95 \$	464.6
Oct-21	\$	51,435,567.91	1.0000	\$ 51,435,567.91	115,048	\$ 447.08		\$ (4,446,996.84)	\$ 53,594,511.23 \$	465.8
Nov-21	\$	52,424,352.32	1.0000	\$ 52,424,352.32	114,038	\$ 459.71		\$ (4,407,894.59)	\$ 54,258,970.32 \$	475.8
Dec-21	\$ 802,228,035.94 \$	51,346,653.08	1.0000	\$ 51,346,653.08	112,727	\$ 455.50	\$ 88,889,504.23	\$ (4,356,250.17)	\$ 52,606,196.41 \$	466.
Jan-22	\$	43,082,683.18	1.0000	\$ 43,082,683.18	115,587	\$ 372.73		\$ (5,061,148.21)	\$ 47,913,991.32 \$	414.
Feb-22	\$	42,614,961.20	1.0000	\$ 42,614,961.20	117,022	\$ 364.16		\$ (5,123,314.38)	\$ 46,563,963.94 \$	397.
Mar-22	\$	49,452,491.59	1.0000	\$ 49,452,491.59	115,589	\$ 427.83		\$ (5,061,142.92)	\$ 54,205,425.42 \$	468.9
Apr-22	\$	45,352,827.22	1.0000	\$ 45,352,827.22	114,339	\$ 396.65		\$ (5,290,526.46)	\$ 48,985,128.13 \$	428.
May-22	\$	46,093,941.62	1.0000	\$ 46,093,941.62	113,131	\$ 407.44		\$ (5,234,758.70)	\$ 48,904,934.43 \$	432.2
Jun-22	\$	47,140,021.17	1.0000	\$ 47,140,021.17	112,371	\$ 419.50		\$ (5,199,733.92)	\$ 50,231,661.27 \$	447.
Jul-22	\$	46,282,368.04	1.0000	\$ 46,282,368.04	111,911	\$ 413.56		\$ (4,994,006.55)	\$ 48,611,729.20 \$	434.3
Aug-22	\$	47,330,106.26	1.0000	\$ 47,330,106.26	111,426	\$ 424.77		\$ (4,972,332.37)	\$ 50,107,894.93 \$	449.
Sep-22	\$	48,753,290.97	1.0000	\$ 48,753,290.97	110,865	\$ 439.75		\$ (4,947,624.66)	\$ 51,000,154.85 \$	460.0
Oct-22	\$	46,117,242.51	1.0000	\$ 46,117,242.51	110,028	\$ 419.14		\$ (4,971,938.65)	\$ 47,921,896.56 \$	435.
Nov-22	\$	47,739,177.07	1.0000	\$ 47,739,177.07	109,019	\$ 437.90		\$ (4,926,107.85)	\$ 49,544,764.79 \$	454.
Dec-22	\$ 763,447,233.92 \$	45,824,270.66	1.0000	\$ 45,824,270.66	107,476	\$ 426.37	\$ 96,224,465.53	\$ (4,855,850.78)	\$ 47,377,816.73 \$	440.
Jan-23	\$	45,291,009.02	1.0000	\$ 45,291,009.02	114,158	\$ 396.74		\$ (5,250,333.50)	\$ 51,183,635.31 \$	448.
Feb-23	\$	43,465,864.79	0.9990	\$ 43,510,814.37	118,333	\$ 367.70		\$ (5,442,492.30)	\$ 47,597,139.34 \$	402.
Mar-23	\$	50,168,998.38	0.9984	\$ 50,247,101.95	117,574	\$ 427.37		\$ (5,408,769.38)	\$ 55,237,992.93 \$	469.
Apr-23	\$	44,447,269.56	0.9977	\$ 44,548,640.34	116,873	\$ 381.17		\$ (5,542,117.96)	\$ 47,909,133.28 \$	409.
May-23	\$	50,139,606.40	0.9971	\$ 50,284,768.42	116,145	\$ 432.95		\$ (5,508,192.78)	\$ 54,352,736.30 \$	467.
Jun-23	\$	47,276,777.19	0.9964	\$ 47,445,846.34	116,206	\$ 408.29		\$ (5,511,404.88)	\$ 51,045,771.40 \$	439.
Jul-23	\$	47,589,197.00	0.9951	\$ 47,822,823.10	117,012	\$ 408.70		\$ (5,584,946.26)	\$ 50,465,370.72 \$	431.
Aug-23	\$	50,664,167.09	0.9918	\$ 51,082,273.78	117,609	\$ 434.34		\$ (5,615,267.43)	\$ 54,085,817.48 \$	459.
Sep-23	\$	50,681,416.52	0.9867	\$ 51,364,767.21	118,603	\$ 433.08		\$ (5,663,336.60)	\$ 53,764,092.26 \$	453
Oct-23	\$	55,474,443.56	0.9807		118,805			\$ (5,778,827.27)		498
Nov-23	\$	51,140,945.22	0.9751		120,133			\$ (5,848,760.86)		454
Dec-23	\$ 825,990,960.28 \$	47,386,753.32	0.9557		120,064		\$ 107,782,639.36			

* Express Completion Factor as a percentage **Express Prescription Drug Rebates as a negative number Carrier Name:

Product(s):

Market Segment:

Rate Effective Date:

Keystone Health Plan East

HMO

Individual

1/1/2025

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
\$ 1,111,604,315.05	\$ 863,932,780.02	\$ 874,403,772.25	1,820,963	\$ 180,766,807.68	\$ 1,055,170,579.93	\$ -	\$ (98,291,013.11)	\$ 158,658,877.37	\$ 306,122.82	\$ 5,785,229.03	\$ 44,211,266.15
Experience Period Total Allowed EH	B Claims + EHB Capitation PMPM (net of prescription drug rebates)									\$ 612.61
Loss Ratio											79.73%

*Express Prescription Drug Rebates as a negative number

Table 3b. Manual Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	5.50%	5.05%		10.83%	17.59%
Outpatient Hospital	5.16%	5.05%		10.47%	21.23%
Professional	2.90%	5.05%		8.10%	23.16%
Other Medical	2.90%	5.05%		8.10%	0.00%
Capitation				3.51%	14.39%
Prescription Drugs	-0.97%	5.05%		4.03%	23.63%
Total Annual Trend				7.50%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1 156	

* 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	Ś	61,577,299.90	1.0000	\$ 61,577,299.90	157,551	\$ 390.84	(Member + Inte)	\$ (4,719,110.48)		48
Feb-20	Š	56,129,918.94	1.0000	\$ 56,129,918.94	152,254	\$ 368.66		\$ (4.564.295.08)		44
Mar-20	Š	52,382,927.18	1.0000	\$ 52,382,927.18	150,593	\$ 347.84		\$ (4,513,914.25)	\$ 60,761,233.65 \$	40
Apr-20	\$	47,998,694.64	1.0000	\$ 47,998,694.64	149,729	\$ 320.57		\$ (4,923,972.89)	\$ 51,333,492.86 \$	34
May-20	Ś	49,683,997.30	1.0000		149,621	\$ 332.07		\$ (4,919,170.91)	\$ 54,036,580.08 \$	36
Jun-20	\$	57,600,159.37	1.0000		148,292	\$ 388.42		\$ (4,876,303.41)		42
Jul-20	\$	61,195,049.25	1.0000		147,512	\$ 414.85		\$ (5,228,424.90)	\$ 67,129,329.09 \$	45
Aug-20	\$	61,087,674.79	1.0000	\$ 61,087,674.79	146,747	\$ 416.28		\$ (5,202,283.72)	\$ 66,586,274.19 \$	45
Sep-20	\$	63,337,076.72	1.0000	\$ 63,337,076.72	145,817	\$ 434.36		\$ (5,169,717.00)	\$ 69,153,421.85 \$	47
Oct-20	\$	66,397,404.60	1.0000	\$ 66,397,404.60	144,459	\$ 459.63		\$ (5,547,714.56)	\$ 71,937,717.49 \$	49
Nov-20	\$	65,025,717.57	1.0000	\$ 65,025,717.57	142,273	\$ 457.05		\$ (5,464,339.93)	\$ 69,578,179.74 \$	48
Dec-20	\$ 1,100,254,427.85 \$	67,873,105.23	1.0000	\$ 67,873,105.23	139,776	\$ 485.58	\$ 140,519,098.65	\$ (5,369,022.64)	\$ 72,390,069.40 \$	51
Jan-21	\$	55,605,291.82	1.0000	\$ 55,605,291.82	149,540	\$ 371.84		\$ (5,177,075.95)	\$ 67,768,892.00 \$	45
Feb-21	\$	54,806,468.81	1.0000	\$ 54,806,468.81	152,680	\$ 358.96		\$ (5,285,149.47)	\$ 64,449,253.88 \$	42
Mar-21	\$	71,754,704.61	1.0000	\$ 71,754,704.61	151,689	\$ 473.04		\$ (5,251,235.53)	\$ 82,871,292.45 \$	54
Apr-21	\$	68,143,682.43	1.0000	\$ 68,143,682.43	151,931	\$ 448.52		\$ (5,788,220.14)	\$ 76,925,500.85 \$	50
May-21	\$	65,189,970.17	1.0000	\$ 65,189,970.17	152,725	\$ 426.85		\$ (5,817,521.29)	\$ 72,396,646.19 \$	47
Jun-21	\$	69,710,918.28	1.0000	\$ 69,710,918.28	153,662	\$ 453.66		\$ (5,852,339.55)	\$ 77,333,527.67 \$	50
Jul-21	\$	67,650,477.52	1.0000	\$ 67,650,477.52	154,912	\$ 436.70		\$ (6,038,221.27)	\$ 73,952,259.74 \$	4
Aug-21	\$	73,586,320.11	1.0000	\$ 73,586,320.11	156,221	\$ 471.04		\$ (6,087,318.17)	\$ 79,701,551.56 \$	5
Sep-21	\$	74,264,376.64	1.0000	\$ 74,264,376.64	157,288	\$ 472.16		\$ (6,128,998.83)	\$ 79,567,390.29 \$	5
Oct-21	\$	75,848,290.10	1.0000	\$ 75,848,290.10	156,586	\$ 484.39		\$ (6,302,747.17)	\$ 80,910,834.50 \$	5
Nov-21	\$	76,681,852.34	1.0000	\$ 76,681,852.34	155,470	\$ 493.23		\$ (6,258,979.73)	\$ 81,366,559.80 \$	5
Dec-21	\$ 1,109,353,658.71 \$	76,508,969.68	1.0000	\$ 76,508,969.68	153,972	\$ 496.90	\$ 157,874,327.85	\$ (6,198,953.89)	\$ 80,195,180.44 \$	52
Jan-22	\$	62,101,622.44	1.0000	\$ 62,101,622.44	154,040	\$ 403.15		\$ (7,375,433.88)	\$ 73,120,590.54 \$	47
Feb-22	\$	62,768,020.67	1.0000	\$ 62,768,020.67	155,268	\$ 404.26		\$ (7,424,973.84)	\$ 71,688,320.79 \$	4
Mar-22	\$	71,182,611.77	1.0000	\$ 71,182,611.77	153,233	\$ 464.54		\$ (7,326,075.01)	\$ 81,077,066.00 \$	5
Apr-22	\$	67,095,362.20	1.0000	\$ 67,095,362.20	151,421	\$ 443.10		\$ (7,596,361.85)	\$ 74,395,531.91 \$	4
May-22	\$	69,379,531.56	1.0000	\$ 69,379,531.56	149,892	\$ 462.86		\$ (7,520,828.95)	\$ 75,547,476.94 \$	5
Jun-22	\$	69,837,573.26	1.0000	\$ 69,837,573.26	148,729	\$ 469.56		\$ (7,460,451.84)	\$ 75,935,993.44 \$	5
Jul-22	\$	67,640,611.82	1.0000	\$ 67,640,611.82	147,981	\$ 457.09		\$ (7,217,746.96)	\$ 72,362,258.33 \$	4
Aug-22	\$	69,468,875.67	1.0000	\$ 69,468,875.67	147,240	\$ 471.81		\$ (7,180,169.90)	\$ 74,949,364.97 \$	5
Sep-22	\$	70,772,413.74	1.0000	\$ 70,772,413.74	146,396	\$ 483.43		\$ (7,137,965.32)	\$ 75,264,095.09 \$	5
Oct-22	\$	68,951,166.67	1.0000	\$ 68,951,166.67	145,264	\$ 474.66		\$ (7,317,534.09)	\$ 72,727,048.21 \$	5
Nov-22	\$	71,343,659.88	1.0000	\$ 71,343,659.88	143,986	\$ 495.49		\$ (7,253,615.23)	\$ 75,183,025.23 \$	5
Dec-22	\$ 1,042,320,735.81 \$	69,892,524.36	1.0000	\$ 69,892,524.36	142,089	\$ 491.89	\$ 163,091,481.60	\$ (7,159,811.90)	\$ 73,303,715.42 \$	5
Jan-23	\$	66,598,720.11	0.9988	\$ 66,678,257.98	148,698	\$ 448.41		\$ (7,788,840.11)	\$ 79,455,278.10 \$	
Feb-23	\$	62,610,477.45	0.9983	\$ 62,715,213.39	153,282	\$ 409.15		\$ (8,010,725.26)	\$ 71,852,438.29 \$	4
Mar-23	\$	75,772,340.53	0.9968		152,237			\$ (7,956,217.24)	\$ 86,148,563.98 \$	
Apr-23	\$	66,186,065.34	0.9965		151,369	\$ 438.78		\$ (8,169,814.33)		
May-23	\$	72,557,950.24	0.9964		150,336	\$ 484.39		\$ (8,112,452.94)		5
Jun-23	\$	71,154,604.32	0.9939		150,151			\$ (8,096,861.85)	. , , ,	5
Jul-23	\$	71,591,127.62	0.9928		150,992			\$ (8,166,208.39)		
Aug-23	\$	76,162,253.15	0.9902		151,550	\$ 507.55		\$ (8,193,630.09)	\$ 82,738,155.63 \$	5
Sep-23	\$	74,318,720.26	0.9859		152,459			\$ (8,234,984.92)		
Oct-23	\$	81,078,322.25	0.9813		152,385			\$ (8,459,608.74)		
Nov-23	\$	76,034,643.26	0.9738		153,814			\$ (8,540,443.05)		
Dec-23	\$ 1,111,604,315.05 \$	69,867,555.49	0.9564	\$ 73,050,349.90	153,690	\$ 475.31	\$ 180,766,807.68	\$ (8,561,226.21)	\$ 76,630,419.72 \$	4

* 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: Keystone Health Plan East

Product(s): HMO
Market Segment: Individual
Rate Effective Date: 1/1/2025

Incurred Dates: 1/1/2023 to 12/31/2023

Attachment Point: \$60,000
Reinsurance Cap: \$100,000
Coinsurance Rate: 60%

Proj. Incurred Claim Impact: -4.4%

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	184,092	1,764,128	\$495,633,941	\$495,633,941				
\$30,000	\$34,999	761	8,173	\$24,628,317	\$24,628,317				
\$35,000	\$39,999	560	6,179	\$20,884,334	\$20,884,334				
\$40,000	\$44,999	443	4,846	\$18,808,006	\$18,808,006				
\$45,000	\$49,999	344	3,779	\$16,293,279	\$16,293,279				
\$50,000	\$54,999	308	3,378	\$16,146,649	\$16,146,649				
\$55,000	\$59,999	271	3,001	\$15,550,246	\$15,550,246				
\$60,000	\$64,999	209	2,286	\$13,066,110	\$12,750,444				
\$65,000	\$69,999	183	1,986	\$12,345,280	\$11,526,112				
\$70,000	\$74,999	157	1,678	\$11,340,606	\$10,188,242				
\$75,000	\$79,999	128	1,418	\$9,869,987	\$8,555,995				
\$80,000	\$84,999	128	1,415	\$10,546,642	\$8,826,657				
\$85,000	\$89,999	106	1,143	\$9,273,157	\$7,525,263				
\$90,000	\$94,999	99	1,143	\$9,154,571	\$7,325,263				
\$95,000	\$94,999 \$99,999	72	781	\$7,034,831					
	· · · · · · · · · · · · · · · · · · ·				\$5,405,932				
\$100,000	\$109,999	157	1,733	\$16,458,538	\$12,690,538				
\$110,000	\$119,999	152	1,645	\$17,425,370	\$13,777,370				
\$120,000	\$129,999	116	1,277	\$14,493,131	\$11,709,131				
\$130,000	\$139,999	89	937	\$12,014,081	\$9,878,081				
\$140,000	\$149,999	93	1,017	\$13,469,449	\$11,237,449				
\$150,000	\$159,999	75	798	\$11,597,588	\$9,797,588				
\$160,000	\$169,999	71	806	\$11,716,135	\$10,012,135				
\$170,000	\$179,999	60	643	\$10,478,742	\$9,038,742				
\$180,000	\$189,999	47	501	\$8,705,035	\$7,577,035				
\$190,000	\$199,999	49	523	\$9,573,881	\$8,397,881				
\$200,000	\$209,999	41	456	\$8,428,602	\$7,444,602				
\$210,000	\$219,999	35	412	\$7,549,271	\$6,709,271				
\$220,000	\$229,999	35	381	\$7,849,695	\$7,009,695				
\$230,000	\$239,999	31	340	\$7,311,616	\$6,567,616				
\$240,000	\$249,999	38	408	\$9,288,456	\$8,376,456				
\$250,000	\$259,999	19	197	\$4,852,895	\$4,396,895				
\$260,000	\$269,999	21	240	\$5,586,195	\$5,082,195				
\$270,000	\$279,999	20	207	\$5,502,752	\$5,022,752				
\$280,000	\$289,999	17	181	\$4,831,321	\$4,423,321				
\$290,000	\$299,999	15	169	\$4,410,774	\$4,050,774				
\$300,000	\$324,999	25	278	\$7,803,053	\$7,203,053				
\$325,000	\$349,999	25	274	\$8,429,306	\$7,829,306				
\$350,000	\$374,999	24	277	\$8,684,901	\$8,108,901				
\$375,000	\$399,999	22	244	\$8,488,494	\$7,960,494				
\$400,000	\$424,999	18	194	\$7,366,963	\$6,934,963				
\$425,000	\$449,999	9	104	\$3,958,524	\$3,742,524				
\$450,000	\$474,999	17	183	\$7,842,769	\$7,434,769				
\$475,000	\$499,999	13	154	\$6,328,350	\$6,016,350				
\$500,000	\$599,999	32	364	\$17,174,126	\$16,406,126				
\$600,000	\$699,999	19	184	\$17,174,126	\$10,400,120				
\$700,000	\$799,999 \$799,999	14	156	\$12,283,008					
	<u> </u>		82	\$10,553,043	\$10,217,043				
\$800,000	\$899,999	8			\$6,606,983				
\$900,000	\$999,999	4	43	\$3,850,372	\$3,754,372				
\$1,000,000+ Total		23 189,295	252 1,820,963	\$41,380,616	\$40,828,616 \$988,019,939				

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

Carrier Name: Keystone Health Plan East

Product(s): HMO
Market Segment: Individual
Rate Effective Date: 1/1/2025

Attachment Point: \$60,000
Reinsurance Cap: \$100,000
Coinsurance Rate: 60%

Proj. Incurred Claim Impact: -4.4%
Proj. Morbidity Impact: 0.0%

		Remsurance Program impact cor	ntinuance Table Development - Pla		1
Annual Incurre	ed Claims Range	Linique Members	Member Months	Total Incurred Claims	Total Incurred Claims wit Reinsurance
	-	Unique Members			
\$0	\$29,999	183,250	1,755,017	\$545,655,505	\$545,655,505
\$30,000	\$34,999	892	9,633	\$28,852,516	\$28,852,516
\$35,000	\$39,999	658	7,046	\$24,587,255	\$24,587,255
\$40,000	\$44,999	519	5,742	\$21,980,275	\$21,980,275
\$45,000	\$49,999	391	4,287	\$18,581,532	\$18,581,532
\$50,000	\$54,999	342	3,776	\$17,917,185	\$17,917,185
\$55,000	\$59,999	277	2,959	\$15,942,487	\$15,942,487
\$60,000	\$64,999	254	2,860	\$15,887,610	\$15,499,044
\$65,000	\$69,999	218	2,413	\$14,683,870	\$13,721,548
\$70,000	\$74,999	179	1,944	\$12,967,027	\$11,630,811
\$75,000	\$79,999	159	1,734	\$12,292,586	\$10,641,034
\$80,000	\$84,999	153	1,643	\$12,592,356	\$10,544,943
\$85,000	\$89,999	124	1,355	\$10,847,892	\$8,803,157
\$90,000	\$94,999	102	1,119	\$9,456,079	\$7,454,432
\$95,000	\$99,999	97	1,098	\$9,452,062	\$7,272,825
\$100,000	\$109,999	176	1,919	\$18,440,610	\$14,216,610
\$110,000	\$119,999	134	1,473	\$15,443,827	\$12,227,827
\$120,000	\$129,999	133	1,457	\$16,619,312	\$13,427,312
\$130,000	\$139,999	125	1,355	\$16,817,605	\$13,817,605
\$140,000	\$149,999	103	1,128	\$14,934,962	\$12,462,962
\$150,000	\$159,999	75	770	\$11,630,114	\$9,830,114
\$160,000	\$169,999	83	927	\$13,699,759	\$11,707,759
\$170,000	\$179,999	73	787	\$12,783,086	\$11,031,086
\$180,000	\$189,999	58	636	\$10,732,098	\$9,340,098
\$190,000	\$199,999	60	675	\$11,708,030	\$10,268,030
\$200,000	\$209,999	46	480	\$9,411,481	\$8,307,481
	\$209,999		436		
\$210,000	' '	41		\$8,815,889	\$7,831,889
\$220,000	\$229,999	43	459	\$9,691,933	\$8,659,933
\$230,000	\$239,999	35	394	\$8,238,498	\$7,398,498
\$240,000	\$249,999	32	365	\$7,839,459	\$7,071,459
\$250,000	\$259,999	37	423	\$9,458,169	\$8,570,169
\$260,000	\$269,999	20	208	\$5,297,617	\$4,817,617
\$270,000	\$279,999	37	406	\$10,206,030	\$9,318,030
\$280,000	\$289,999	26	267	\$7,410,389	\$6,786,389
\$290,000	\$299,999	17	186	\$5,029,160	\$4,621,160
\$300,000	\$324,999	44	483	\$13,786,948	\$12,730,948
\$325,000	\$349,999	32	350	\$10,756,678	\$9,988,678
\$350,000	\$374,999	21	231	\$7,593,481	\$7,089,481
\$375,000	\$399,999	25	273	\$9,713,247	\$9,113,247
\$400,000	\$424,999	17	201	\$7,014,411	\$6,606,411
\$425,000	\$449,999	21	225	\$9,126,542	\$8,622,542
\$450,000	\$474,999	18	203	\$8,310,462	\$7,878,462
\$475,000	\$499,999	12	130	\$5,800,959	\$5,512,959
\$500,000	\$599,999	45	511	\$24,764,748	\$23,684,748
\$600,000	\$699,999	23	262	\$14,543,472	\$13,991,472
\$700,000	\$799,999	19	184	\$14,195,314	\$13,739,314
\$800,000	\$899,999	11	120	\$9,459,023	\$9,195,023
\$900,000	\$999,999	8	87	\$7,520,552	\$7,328,552
\$1,000,000+	, ,	30	326	\$55,342,920	\$54,622,920
Total		189,295	1,820,963	\$1,193,833,024	\$1,140,901,335

PA Rate Template Part II

Rate Development and Change

Carrier Name:

Product(s):

Market Segment:

Rate Effective Date:

Keystone Health Plan East
HMO
Individual
1/1/2025

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

Development of the Projected Index Rate	Act	ual Experience Data	Manual Data	
Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates) PMPM	\$	558.62	\$ 612.61	<- Actual Experience PMPM sho
Two year trend projection Factor		1.156	1.156	
Unadjusted Projected Allowed EHB Claims PMPM	\$	645.59	\$ 707.98	
Single Risk Pool Adjustment Factors				
Change in Morbidity - Impact of Reinsurance Program		1.000	1.000	
Change in Morbidity - All Other		1.000	1.000	<- See URRT Instructions
Total Non-Morbidity Changes		0.994	0.859	
Change in Demographics		0.989	0.990	<- See URRT Instructions
Change in Network		1.003	0.865	
Change in Benefits		1.002	1.002	<- See URRT Instructions
Change in Other		1.000	1.000	<- See URRT Instructions
Total Adjusted Projected Allowed EHB Claims PMPM	\$	641.71	\$ 607.99	
Credibility Factors		0%	100%	<- See Instructions
Blended Projected EHB Claims PMPM			\$ 607.99	<- Projected Index Rate
Development of the Market-Adjusted Index Rate and Total Allowed Claims				-
Adjusted Projected Allowed EHB Claims PMPM	\$	607.99	<- Index Rate for Proj	ection Period on URRT
Projected Paid to Allowed Ratio		0.739		
Projected Incurred EHB Claims PMPM	\$	449.41		
Market-wide Adjustments Projected Incurred Risk Adjustment PMPM	\$	(10.82)		
Projected Incurred Exchange User Fees PMPM	Ş	\$13.51		
Projected Incurred Reinsurance Recoveries PMPM		\$19.93		
Market-Adjusted Projected Incurred EHB Claims PMPM	\$	453.81		
Market-Adjusted Projected Allowed EHB Claims PMPM	\$	613.95	<- Market-Adjusted Ir	ndex Rate
Projected Allowed Non-EHB Claims PMPM	\$	0.13		
Catastrophic Eligibility Adjustment		1.000		
Market-Adjusted Projected Incurred Total Claims PMPM		453.9057108		
Market-Adjusted Projected Allowed Total Claims PMPM	\$	614.07		

Table 6. Retention

Retention Items - Express in percentages	Percentages	PMPM Amounts
Administrative Expenses	13.87	% \$75.42
General and Claims	11.12	<mark>%</mark> \$60.46
Agent/Broker Fees and Commissions	1.95	<mark>%</mark> \$10.61
Quality Improvement Initiatives	0.80	<mark>%</mark> \$4.35
Taxes and Fees	0.65	% \$3.51
Risk Adjustment User Fee	0.03	<mark>%</mark> \$0.18
PCORI Fee	0.08	<mark>%</mark> \$0.44
PA Premium & Other Taxes (if applicable)	0.00	<mark>%</mark> \$0.00
Federal Income Tax	0.53	<mark>%</mark> \$2.89
Health Insurance Providers Fee (Prorated for Small Groups only)	0.00	<mark>%</mark> \$0.00
Profit/Contingency (after tax)	2.00	% \$10.87
Total Retention	16.52	% \$89.81
Projected Required Revenue PMPM	\$ 543.72	L

Table 8. Components of Rate Change

Rate Components	2024	2025		Dif	fference	Percent Change	
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$ 303.19	\$	319.49	\$	16.30	5.4	
B. Base period allowed claims before normalization	\$ 572.52	\$	612.61	\$	40.09	13.2	
C. Normalization factor component of change	\$ (239.63)	\$	(253.16)	\$	(13.53)	-4.5	
D. Change in Normalized Allowed Claims Adjustment Components							
D1. Base period allowed claims after normalization	\$ 332.88	\$	359.45	\$	26.56	8.8	
D2. URRT Trend	\$ 61.02	\$	55.96	\$	(5.06)	-1.7	
D3. URRT Morbidity	\$ -	\$	-	\$	-	0.0	
D4. URRT Other	\$ (52.94)	\$	(58.66)	\$	(5.73)	-1.9	
D5. Normalized URRT Risk Adjustment on an allowed basis	\$ 7.86	\$	8.59	\$	0.73	0.2	
D6. Normalized Exchange User Fee on an allowed basis	\$ 10.42	\$	10.72	\$	0.30	0.1	
D7. Normalized Reinsurance Recoveries on an allowed basis	\$ (14.83)	\$	(15.82)	\$	(0.99)	-0.3	
D8. Subtotal - Sum(D1:D7)	\$ 344.42	\$	360.23	\$	15.81	5.2	
E. Change in Allowable Plan Adjusted Level Components							
E1. Network	\$ -	\$	-	\$	-	0.0	
E2. Pricing AV	\$ (85.91)	\$	(93.96)	\$	(8.05)	-2.7	
E3. Benefit Richness	\$ -	\$	-	\$	- 1	0.0	
E4. Catastrophic Eligibility	\$ -	\$	-	\$	-	0.0	
E5. Benefits in Addition to EHB	\$ 0.06	\$	0.06	\$	(0.00)	0.0	
E6. Subtotal - Sum(E1:E5)	\$ (85.85)	\$	(93.90)	\$	(8.05)	-2.7	
F. Change in Retention Components	,		,		,		
F1. Administrative Expenses	\$ 41.52	\$	44.32	\$	2.80	0.9	
F2. Taxes and Fees	\$ 1.86	\$	2.06	\$	0.20	0.1	
F3. Profit and/or Contingency	\$ 6.06	\$	6.39	\$	0.33	0.1	
F4. Subtotal - Sum(F1:F3)	\$ 49.44	\$	52.77	\$	3.33	1.1	
G. Change in Miscellaneous Items	\$ -	\$	-	\$	-	0.0	
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 308.01	\$	319.10	\$	11.09	3.	

perience PMPM should be consistent with the Index Rate for Experience Period on URRT

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 612.61	<- Index Rate of Experience Period on URRT
Blended Earned Premium	\$ 1,111,604,315.05	
Blended Loss Ratio	79.73%	

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

Effective Date		1/1/2025	4/1/2025	7/1/2025	10/1/2025	Total Single Risk Pool
# of Member Months Renewing in Quarter						-
Adjusted Projected Allowed EHB Claims PMPM	\$	607.99	\$ 607.99	\$ 607.99	\$ 607.99	\$ 607.99
Months of Trend		-	3	6	9	
Annual Trend		7.50%	7.50%	7.50%	7.50%	
Single Risk Pool Projected Allowed Claims	\$	607.99	\$ 619.09	\$ 630.39	\$ 641.89	\$ -
Quarterly Trend Factor		1.000	1.018	1.037	1.056	0.000

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2024	2025
Average Age Factor	1.712	1.69
Average Geographic Factor	1.000	1.00
Average Tobacco Factor	1.004	1.00
Average Benefit Richness (induced demand)	1.000	1.00
Average Network Factor	1.000	1.00
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 592.49	\$ 614.07
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 344.50	\$ 360.31

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

	2024	2025	
Paid-to-Allowed	0.751	0.739	
URRT Trend (Total Applied Trend Factor)	1.183	1.156	<- URRT W1, S2
URRT Morbidity	1.000	1.000	<- URRT W1, S2
URRT "Other"	0.866	0.859	<- URRT W1, S2
Risk Adjustment	\$ 10.14	\$ 10.82	<- URRT W1, S3
Exchange User Fee	\$ 13.45	\$ 13.51	<- URRT W1, S3
Reinsurance Recoveries	\$ 19.14	\$ 19.93	<- URRT W1, S3
Capitation	\$ -	\$ -	<- URRT W1, S2
Network	1.000	1.000	
Pricing AV	0.751	0.739	<- 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	1.000	1.000	
Catastrophic Eligibility	1.000	1.000	
Benefits in Addition to EHB	1.000	1.000	
Administrative Expenses	13.70%	13.87%	
Taxes and Fees	0.61%	0.65%	
Profit and/or Contingency	2.00%	2.00%	

0.0% 0.0%

0.0%

Market Segment: Individual Rate Effective Date: 1/1/2025													
Discontinued, Now, Modified 1/1/2025 Plan III		2024 21-year-old, Non-To	Tobacco Premium PMPM	Average (weighted by	2025 21-year-old, Non-Tobacco Premium PMPM	Average (weighted by	Change in 21-year-old No	Average (weighted by				02-01-2024 Number of Covered Lives by County	
HIOS Plan ID (Standard 1/1/2024 Plan Existing (D,N,M,E) (If 1/1/2024 Plan On/Of Discontinued & Mapped) Totals New, Modified, Existing (D,N,M,E) (If 1/1/2024 Plan Discontinued & Mapped) New, Modified, Existing (D,N,M,E) (If 1/1/2024 Plan Discontinued & Mapped) Totals These cells auto-fill using the data entered in Table 10.	Off or Off 1 2	3 4 5	6 7 8 \$ - \$ - \$ 303.19	enrollment by rating area) \$ - \$ 303.19	1 2 3 4 5 6 7 8 9 \$ - \\$ - \\$ - \\$ - \\$ - \\$ - \\$ - \\$ 319.49 \\$	enrollment by rating area) - \$ 319.49	1 2 3 4 5 0.0% 0.0% 0.0% 0.0% 0.0%	6 7 8 9 enrollment by rating area) 6 0.0% 0.0% 5.4% 0.0% 5.4%	Clarion Crawford Erie Forest McKean 0 0 0 0 0	Mercer Venango Warren 1 Cameron Elk Potter 2 Bradford Carbon Clinton Lackawanna Luzerne 0 0 0 Match 0 0 Match 0 0 0 0 0 0	Lycoming Monroe Pike Sullivan Susquehanna Tioga Wayne Wyoming 3 Allegheny Armstrong Beave	Butler Fayette Greene Indiana Lawrence Washington Westmoreland 4 Bedford Blair Cambria Clearfield Hunting	don Jefferson Somerset 5 Centre Columbia Lehigh Mifflin 0 0 0 0 0 0 0
Plan 1 33871PA0040002 Keystone HMO Gold E 0 Gold On/O Plan 2 33871PA0040005 eystone HMO Gold Proactiv E 0 Gold On/O Plan 3 33871PA0040006 eystone HMO Silver Proactiv E 0 Gilver On/O	/Off \$ - \$ - \$ /Off \$ - \$ - \$	- \$ - \$ - - \$ - \$ -	\$ - \$ - \$ 463.84 \$ - \$ - \$ 423.53	\$ - \$ 463.84 \$ - \$ 423.53	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ 484.12 \$ \$ - \$ - \$ - \$ - \$ - \$ - \$ \$ 442.87 \$	- \$ 484.12 - \$ 442.87		4.4% 4% 4% 4.6% 5%		Match Match Match Match	Match Match	Match	Match Match
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Plan 16 0 0 0 0 0 Plan 17 0 0 0 0 0 0 Plan 18 0 0 0 0 0 0 Plan 19 0 0 0 0 0 0 Plan 20 0 0 0 0 0 0	\$ - \$ - \$ 0 \$ - \$ - \$	- \$ - \$ - - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	- \$ -				Match Match	Match	Match	Match Match Match Match Match Match Match Match
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Plan 38 0 0 0 0 0 0 Plan 39 0 0 0 0 0 0 Plan 40 0 0 0 0 0 0 Plan 41 0 0 0 0 0 0 Plan 42 0 0 0 0 0 0	0 \$ - \$ - \$	- \$ - \$ -	\$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	- \$ -				Match Match Match Match Match Match Match Match Match Match Match Match	Match	Match Match Match Match Match Match Match Match Match Match Match Match	Match Match Match Match Match Match Match Match
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Plan 47 0 0 0 0 0 0 Plan 48 0 0 0 0 0 0 0 Plan 49 0 0 0 0 0 0 0 Plan 50 0 0 0 0 0 0 0	\$ - \$ - \$ 0 \$ - \$ - \$ 0 \$ - \$ - \$ 0 \$ - \$ - \$	- \$ - \$ - - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	- \$ - - \$ - - \$ - - \$ -				Match Match <td< td=""><td>Image: Control of the contro</td><td>Image: Control of the contro</td><td>Match Match Match Match Match Match</td></td<>	Image: Control of the contro	Image: Control of the contro	Match Match Match Match Match Match
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			Match Match Match Match			Match Match Match Match	102 910 4,466 940	108 603 2,241 576	112 644 2,082 731	120 1,113 4,702 998	932	Match Match Match Match							Mat Mat Mat
			Match Match Match Match Match Match			Match Match Match Match Match Match Match	30 2,768 297 3,787 251	20 2,741 206 1,873 299	16 2,145 249 2,363 306	27 3,788 289 4,179 430	32 4,881 431 6,784	Match Match Match							Mat Mat Mat Mat Mat
			Match Match Match Match			Match Match Match Match Match	5,009 197 1,167 483	2,049 131 1,211 307	3,339 155 917 298	4,841 200 1,586 520	16,627 154 1,113 322	Match Match Match Match							Mate Mate Mate
			Match Match Match Match Match Match			Match Match Match Match Match Match	2,957 1,882	1,790 1,016	1,292 659	3,016 1,840	881	Match Match Match Match Match							Mate Mate Mate Mate
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PA Rate Quarterly Template Part V Consumer Factors

Table 12. Age and Tobacco Factors

	Proj	ection Perio	d Age and	Tobacco F	actors	
Age	Age	Tobacco		Age	Age	Tobacco
Band	Factor	Factor		Band	Factor	Factor
0-14	0.765			40	1.278	1.225
15	0.833			41	1.302	1.225
16	0.859			42	1.325	1.225
17	0.885			43	1.357	1.225
18	0.913			44	1.397	1.225
19	0.941			45	1.444	1.225
20	0.970			46	1.500	1.225
21	1.000	1.125		47	1.563	1.225
22	1.000	1.125		48	1.635	1.225
23	1.000	1.125		49	1.706	1.225
24	1.000	1.125		50	1.786	1.375
25	1.004	1.125		51	1.865	1.375
26	1.024	1.125		52	1.952	1.375
27	1.048	1.125		53	2.040	1.375
28	1.087	1.125		54	2.135	1.375
29	1.119	1.125		55	2.230	1.375
30	1.135	1.175		56	2.333	1.375
31	1.159	1.175		57	2.437	1.375
32	1.183	1.175		58	2.548	1.375
33	1.198	1.175		59	2.603	1.375
34	1.214	1.175		60	2.714	1.375
35	1.222	1.175		61	2.810	1.375
36	1.230	1.175		62	2.873	1.375
37	1.238	1.175		63	2.952	1.375
38	1.246	1.175		64+	3.000	1.375
39	1.262	1.175				

^{*}PA follows the federal default age curve.

Carrier Name: Keystone Health Plan East

Product(s): HMO
Market Segment: Individual
Rate Effective Date: 1/1/2025

Table 13. Geographic Factors

	Geographic Area Factors									
Area	Counties	Current Factor	Proposed Factor							
Rating Area 1										
Rating Area 2										
Rating Area 3										
Rating Area 4										
Rating Area 5										
Rating Area 6										
Rating Area 7										
Rating Area 8	Bucks, Chester, Delaware, Philadelphia, Montgomery	1.000	1.000							
Rating Area 9										

Table 14. Network Factors

Projection Period Network Factors												
Network Name	Rating Area	Current Factor	Proposed Factor	Approval Date								
HMO	Rating Area 8	1.100										
Proactive	Rating Area 8	1.000	1.000									

PA Rate Template Part VI - Rate Change Summary

Table 15. Rate Change Summary Information

Overview

Initial Requested Average Rate Change:

Revised Requested Average Rate Change:

Minimum Requested Rate Change:

Maximum Requested Rate Change:

Maximum Requested Rate Change:

Mapped Members:

Available in Rating Areas:

8.83%

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Key Information

Jan. 2023 - Dec. 2023 Financial Experience

Explanation of requested rate change:

The company expects its annual medical costs to increase:

 Premium
 \$
 783,086,917.40

 Claims
 \$
 652,720,233.85

 Administrative Expenses
 \$
 40,140,605.00

 Taxes & Fees
 \$
 69,617,208.00

 Company Made After Taxes
 \$
 20,608,870.55

Carrier Name: Keystone Health Plan East
Product(s): HMO
Market Segment: Individual
Rate Effective Date: 1/1/2025

How It Plans to Spend Your Premium

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

Claims:
Administrative Expenses:
Taxes & Fees:
Profit:

7.50%

Premium rates for health care insurance are increasing as the cost of health care service rise.

84% 11% 3%

 Rating Area
 Active Rating Areas
 Count of Remaining Active Rating Areas
 Text

 1
 1

 2
 1

 3
 1

 4
 1

 5
 1

 6
 1

 7
 1

 8
 8

 9
 0

Table 16. Risk Adjustme	nt Calculation	า	
Component	Statewide	Insurer Specific	
State Average Monthly Premium Before Adjustment	\$700.12		1
Administrative Cost Adjustment	0.86		1
State Average Monthly Premium	602.10		
Actuarial Value (AV)	0.72	0.70]
Plan Liability Risk Score (PLRS)	1.47	1.33	
Allowable Rating Factor (ARF)	1.80	1.70]
Induced Demand Factor (IDF)	1.04	1.03	
Geographic Cost Factor (GCF)	1.04	0.98	
Factors Including Risk Score	1.59	1.33	
Factors Excluding Risk Score	1.39	1.19	
Risk Adjustment Transfer PMPM		(10.82)	< Negative i
Insurer Specific Manual Adjustment PMPM			< Please pro
High Cost Risk Pool Adjustment PMPM			
Total Risk Adjustment Transfer		(10.82)	

<-- Negative implies payer of RA

Yes Please provide explanation and calculation if value provided.

Company Name:	Keystone Health Plan East, Inc.	i .	
Market:	Individual		
Product:	HMO		
Effective Date of Rates:	January 1, 2025		Ending d

HIOS Plan ID (On Exchange)+>	33871PA00	340002	33871PA00	40005	33871PA0	040006	33871PA0	040010	33871PA0	040013	33871PA00	040014	33871PA0	040015	33871PA00	40016	33871PAC	0040017	33871PA0	040018										
HIOS Plan ID (Off Exchange)+>																					33871PA		33871PA0		33871PA		33871PA01		33871PA0	
Plan Marketing Name ->	Keystone HN		Keystone HMO Go												ystone HMO Silver						Keystone H		Keystone HM				stone HMO Silver		tone HMO Silve	
	CE 650 IND FC EXC	ON Rev. 1.252	650 IND FTC EXC	CON Rev. 1.25	650 IND FTDED E	XC-ON Rev. 1.35	0 IND FTDED LT	EXC-ON Rev. 2	650 IND FDED E	CC-ON Rev. 1.2	650 IND FDED EX	CC-ON Rev. 1.2	650 IND FDED E	KC-ON Rev. 1.2	50 IND FTDED LT I	EXC-ON Rev. 3	50 IND FTDED LT	EXC-ON Rev. 3	50 IND FTDED LT	EXC-ON Rev. 3	E 650 IND FC EX	C-OFF Rev. 1.25	650 IND FOED EX	CC-OFF Rev. 1.	E 650 IND FTC EX	C-Off Rev. 1.26	550 IND FTDED EX	CC-OFF Rev. 1.5	O IND FTDED EX	CC-OFF II Rev.
Rating Area ->	8		8		8		8				8		8		8		8	8 8					8				8		8	
Network =>	KHPE Net	work	Proactive No	etwork	Proactive P	letwork	Proactive 9	Vetwork	KHPE Ne	twork	KHPE Net	twork	KHPE Ne	twork	Proactive N	etwork	Proactive I	Network	Proactive I	roactive Network KHPE Network		rtwork	KHPE Net	twork	Proactive	Network	Proactive N	letwork	Proactive Netwo	
Metal ->	Gold		Gold		Silve		Silve		Silve	ır	Expanded		Silve		Silver		Gol	ld	Silve		Go		Expanded		Gold		Silve			
Deductible ->	50		\$0		\$0/\$6000	/\$6000	\$2000/\$650	00/\$6500	\$3,51	30	\$8,50	10	\$5,5	30	\$2500/\$7000	0/\$7000	\$50	10	\$5000/\$800	30/\$8000	50		\$8,50	30	\$4	,	\$1500/\$600	0/\$6000	\$0/\$6000	V\$6000
Coinsurance ->	20%		0%/20%/		0%/5%		0%/5%)		309		50%		509		0%/5%/		201		0%/5%		20		50%		0%/201		0%/5%/		0%/5%/	
Copays ->	\$35/\$1		\$15/\$40, \$30/\$6						\$35/5		\$75/\$1		\$35/5		no ded, \$60/120 n				no ded, \$60/120		\$35/		\$75/\$:				0, \$60/120 no de			
OOP Maximum =>	\$8,00	0	\$9,200	0	\$9,21	00	\$9,20	00	\$8,51	30	\$9,20	10	\$8,5	30	\$9,20	0	\$8,0	100	\$9,21	00	\$8,0	00	\$9,20	30	\$9,2	100	\$9,20	10	\$9,21	00
Pediatric Dental (Yes/No) ->	Yes		Yes		Yes		Yes		Ye	s	Yes	s	Ye	s	Yes		Ye	ś	Yes		Yes	s .								
Age Band		Tobacco		Tobacco	Non-Tobacco		Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco		Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco		Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0-14	\$370.35	\$370.35	\$338.80	\$338.80	\$287.80	\$287.80	\$285.18	\$285.18	\$332.45	\$332.45	\$176.43	\$176.43	\$267.33	\$267.33	\$250.31	\$250.31	\$303.93	\$303.93	\$239.65	\$239.65	\$370.35	\$370.35	\$176.43	\$176.43	\$338.80	\$338.80	\$220.32	\$220.32	\$237.46	\$237.46
15	\$403.27	\$403.27	\$368.91	\$368.91	\$313.38	\$313.38	\$310.53	\$310.53	\$362.01	\$362.01	\$192.11	\$192.11	\$291.09	\$291.09	\$272.56	\$272.56	\$330.94	\$330.94	\$260.95	\$260.95	\$403.27	\$403.27	\$192.11	\$192.11	\$368.91	\$368.91	\$239.90	\$239.90	\$258.56	\$258.56
16	\$415.86	\$415.86	\$380.43	\$380.43	\$323.16	\$323.16	\$320.22	\$320.22	\$373.30	\$373.30	\$198.11	\$198.11	\$300.18	\$300.18	\$281.06	\$281.06	\$341.27	\$341.27	\$269.10	\$269.10	\$415.86	\$415.86	\$198.11	\$198.11	\$380.43	\$380.43	\$247.39	\$247.39	\$266.63	\$266.63
17	\$428.45	\$428.45	\$391.94	\$391.94	\$332.95	\$332.95	\$329.91	\$329.91	\$384.60	\$384.60	\$204.11	\$204.11	\$309.26	\$309.26	\$289.57	\$289.57	\$351.60	\$351.60	\$277.24	\$277.24	\$428.45	\$428.45	\$204.11	\$204.11	\$391.94	\$391.94	\$254.88	\$254.88	\$274.70	\$274.70
18	\$442.00	\$442.00	\$404.34	\$404.34	\$343.48	\$343.48	\$340.35	\$340.35	\$396.77	\$396.77	\$210.57	\$210.57	\$319.05	\$319.05	\$298.73	\$298.73	\$362.73	\$362.73	\$286.02	\$286.02	\$442.00	\$442.00	\$210.57	\$210.57	\$404.34	\$404.34	\$262.94	\$262.94	\$283.40	\$283.40
19	\$455.56	\$455.56	\$416.74	\$416.74	\$354.01	\$354.01	\$350.79	\$350.79	\$408.94	\$408.94	\$217.02	\$217.02	\$328.83	\$328.83	\$307.90	\$307.90	\$373.85	\$373.85	\$294.79	\$294.79	\$455.56	\$455.56	\$217.02	\$217.02	\$416.74	\$416.74	\$271.01	\$271.01	\$292.09	\$292.09
20	\$469.60	\$469.60	\$429.58	\$429.58	\$364.92	\$364.92	\$361.60	\$361.60	\$421.54	\$421.54	\$223.71	\$223.71	\$338.97	\$338.97	\$317.38	\$317.38	\$385.37	\$385.37	\$303.87	\$303.87	\$469.60	\$469.60	\$223.71	\$223.71	\$429.58	\$429.58	\$279.36	\$279.36	\$301.09	\$301.09
21	\$484.12	\$544.64	\$442.87	\$498.23	\$376.21	\$423.24	\$372.78	\$419.38	\$434.58	\$488.90	\$230.63	\$259.46	\$349.45	\$393.13	\$327.20	\$368.10	\$397.29	\$446.95	\$313.27	\$352.43	\$484.12	\$544.64	\$230.63	\$259.46	\$442.87	\$498.23	\$288.00	\$324.00	\$310.40	\$349.20
22	\$484.12	\$544.64	\$442.87	\$498.23	\$376.21	\$423.24	\$372.78	\$419.38	\$434.58	\$488.90	\$230.63	\$259.46	\$349.45	\$393.13	\$327.20	\$368.10	\$397.29	\$446.95	\$313.27	\$352.43	\$484.12	\$544.64	\$230.63	\$259.46	\$442.87	\$498.23	\$288.00	\$324.00	\$310.40	\$349.2
23	\$484.12	\$544.64	\$442.87	\$498.23	\$376.21	\$423.24	\$372.78	\$419.38	\$434.58	\$488.90	\$230.63	\$259.46	\$349.45	\$393.13	\$327.20	\$368.10	\$397.29	\$446.95	\$313.27	\$352.43	\$484.12	\$544.64	\$230.63	\$259.46	\$442.87	\$498.23	\$288.00	\$324.00	\$310.40	\$349.2
24	\$484.12	\$544.64	\$442.87	\$498.23	\$376.21	\$423.24	\$372.78	\$419.38	\$434.58	\$488.90	\$230.63	\$259.46	\$349.45	\$393.13	\$327.20	\$368.10	\$397.29	\$446.95	\$313.27	\$352.43	\$484.12	\$544.64	\$230.63	\$259.46	\$442.87	\$498.23	\$288.00	\$324.00	\$310.40	\$349.2
25	\$486.06	\$546.81	\$444.64	\$500.22	\$377.71	\$424.93	\$374.27	\$421.06	\$436.32	\$490.86	\$231.55	\$260.50	\$350.85	\$394.70	\$328.51	\$369.57	\$398.88	\$448.74	\$314.52	\$353.84	\$486.06	\$546.81	\$231.55	\$260.50	\$444.64	\$500.22	\$289.15	\$325.30	\$311.64	\$350.6
26	\$495.74	\$557.71	\$453.50	\$510.19	\$385.24	\$433.39	\$381.73	\$429.44	\$445.01	\$500.64	\$236.17	\$265.69	\$357.84	\$402.57	\$335.05	\$376.93	\$406.82	\$457.68	\$320.79	\$360.89	\$495.74	\$557.71	\$236.17	\$265.69	\$453.50	\$510.19	\$294.91	\$331.78	\$317.85	\$357.5
27	\$507.36	\$570.78	\$464.13	\$522.14	\$394.27	\$443.55	\$390.67	\$439.51	\$455.44	\$512.37	\$241.70	\$271.91	\$366.22	\$412.00	\$342.91	\$385.77	\$416.36	\$468.40	\$328.31	\$369.35	\$507.36	\$570.78	\$241.70	\$271.91	\$464.13	\$522.14	\$301.82	\$339.55	\$325.30	\$365.9
28	\$526.24	\$592.02	\$481.40	\$541.57	\$408.94	\$460.06	\$405.21	\$455.86	\$472.39	\$531.44	\$250.69	\$282.03	\$379.85	\$427.33	\$355.67	\$400.12	\$431.85	\$485.84	\$340.52	\$383.09	\$526.24	\$592.02	\$250.69	\$282.03	\$481.40	\$541.57	\$313.06	\$352.19	\$337.40	\$379.5
29	\$541.73	\$609.45	\$495.57	\$557.52	\$420.98	\$473.60	\$417.14	\$469.28	\$486.30	\$547.08	\$258.07	\$290.33	\$391.03	\$439.91	\$366.14	\$411.90	\$444.57	\$500.14	\$350.55	\$394.37	\$541.73	\$609.45	\$258.07	\$290.33	\$495.57	\$557.52	\$322.27	\$362.56	\$347.34	\$390.7
30	\$549.48	\$645.63	\$502.66	\$590.62	\$427.00	\$501.72	\$423.11	\$497.15	\$493.25	\$579.57	\$261.77	\$307.57	\$396.63	\$466.04	\$371.37	\$436.36	\$450.92	\$529.84	\$355.56	\$417.78	\$549.48	\$645.63	\$261.77	\$307.57	\$502.66	\$590.62	\$326.88	\$384.08	\$352.30	\$413.96
31	\$561.10	\$659.29	\$513.29	\$603.11	\$436.03	\$512.33	\$432.05	\$507.66	\$503.68	\$591.82	\$267.30	\$314.08	\$405.01	\$475.89	\$379.22	\$445.59	\$460.46	\$541.04	\$363.08	\$426.62	\$561.10	\$659.29	\$267.30	\$314.08	\$513.29	\$603.11	\$333.79	\$392.21	\$359.75	\$422.71
32	\$572.71	\$672.94	\$523.92	\$615.60	\$445.06	\$522.94	\$441.00	\$518.17	\$514.11	\$604.08	\$272.84	\$320.58	\$413.40	\$485.74	\$387.08	\$454.82	\$469.99	\$552.24	\$370.60	\$435.45	\$572.71	\$672.94	\$272.84	\$320.58	\$523.92	\$615.60	\$340.70	\$400.33	\$367.20	\$431.46
33	\$579.98	\$681.47	\$530.56	\$623.41	\$450.70	\$529.57	\$446.59	\$524.74	\$520.63	\$611.74	\$276.29	\$324.65	\$418.64	\$491.90	\$391.99	\$460.58	\$475.95	\$559.25	\$375.30	\$440.97	\$579.98	\$681.47	\$276.29	\$324.65	\$530.56	\$623.41	\$345.02	\$405.40	\$371.86	\$436.93
34	\$587.72	\$690.57	\$537.64	\$631.73	\$456.72	\$536.64	\$452.55	\$531.75	\$527.58	\$619.91	\$279.98	\$328.98	\$424.23	\$498.47	\$397.22	\$466.73	\$482.31	\$566.71	\$380.31	\$446.86	\$587.72	\$690.57	\$279.98	\$328.98	\$537.64	\$631.73	\$349.63	\$410.82	\$376.83	\$442.77
35	\$591.59	\$695.12	\$541.19	\$635.89	\$459.73	\$540.18	\$455.54	\$535.26	\$531.06	\$623.99	\$281.83	\$331.15	\$427.03	\$501.76	\$399.84	\$469.81	\$485.49	\$570.45	\$382.82	\$449.81	\$591.59	\$695.12	\$281.83	\$331.15	\$541.19	\$635.89	\$351.94	\$413.52	\$379.31	\$445.69
36	\$595.47	\$699.67	\$544.73	\$640.06	\$462.74	\$543.72	\$458.52	\$538.76	\$534.53	\$628.08	\$283.67	\$333.32	\$429.82	\$505.04	\$402.46	\$472.89	\$488.67	\$574.18	\$385.32	\$452.75	\$595.47	\$699.67	\$283.67	\$333.32	\$544.73	\$640.06	\$354.24	\$416.23	\$381.79	\$448.61
37	\$599.34	\$704.23	\$548.27	\$644.22	\$465.75	\$547.25	\$461.50	\$542.26	\$538.01	\$632.16	\$285.52	\$335.49	\$432.62	\$508.33	\$405.07	\$475.96	\$491.85	\$577.92	\$387.83	\$455.70	\$599.34	\$704.23	\$285.52	\$335.49	\$548.27	\$644.22	\$356.54	\$418.94	\$384.28	\$451.52
38	\$603.21	\$708.78	\$551.82	\$648.38	\$468.76	\$550.79	\$464.48	\$545.77	\$541.49	\$636.25	\$287.36	\$337.65	\$435.41	\$511.61	\$407.69	\$479.04	\$495.02	\$581.65	\$390.33	\$458.64	\$603.21	\$708.78	\$287.36	\$337.65	\$551.82	\$648.38	\$358.85	\$421.65	\$386.76	\$454.44
39	\$610.96	\$717.88	\$558.90	\$656.71	\$474.78	\$557.86	\$470.45	\$552.78	\$548.44	\$644.42	\$291.06	\$341.99	\$441.01	\$518.18	\$412.93	\$485.19	\$501.38	\$589.12	\$395.35	\$464.53	\$610.96	\$717.88	\$291.06	\$341.99	\$558.90	\$656.71	\$363.46	\$427.05	\$391.72	\$460.28
40	\$618.71	\$757.91	\$565.99	\$693.34	\$480.80	\$588.98	\$476.41	\$583.61	\$555.39	\$680.36	\$294.75	\$361.06	\$446.60	\$547.08	\$418.16	\$512.25	\$507.74	\$621.98	\$400.36	\$490.44	\$618.71	\$757.91	\$294.75	\$361.06	\$565.99	\$693.34	\$368.06	\$450.88	\$396.69	\$485.95
41	\$630.32	\$772.15	\$576.62	\$706.36	\$489.83	\$600.04	\$485.36	\$594.57	\$565.82	\$693.13	\$300.28	\$367.84	\$454.98	\$557.36	\$426.01	\$521.87	\$517.27	\$633.66	\$407.88	\$499.65	\$630.32	\$772.15	\$300.28	\$367.84 \$374.34	\$576.62	\$706.36	\$374.98	\$459.35	\$404.14	\$495.07
42	\$641.46	\$785.79	\$586.80 \$600.97	\$718.83 \$736.19	\$498.48 \$510.52	\$610.64 \$625.38	\$493.93 \$505.86	\$605.07 \$619.68	\$575.82 \$589.73	\$705.38 \$722.41	\$305.58	\$374.34 \$383.38	\$463.02 \$474.20	\$567.20 \$580.90	\$433.54 \$444.01	\$531.09	\$526.41 \$539.12	\$644.85 \$660.43	\$415.08 \$425.11	\$508.48 \$520.76	\$641.46	\$785.79 \$804.76	\$305.58 \$312.96	\$374.34 \$383.38	\$586.80 \$600.97	\$718.83	\$381.60 \$390.82	\$467.46 \$478.75	\$411.28 \$421.21	\$503.82 \$515.99
43	\$656.95	\$804.76									\$312.96				\$444.01 \$457.10	\$543.91		\$660.43 \$679.89			\$656.95			\$383.38 \$394.68		\$736.19	\$390.82 \$402.34			
**	\$676.32 \$699.07	\$828.49	\$618.69 \$639.50	\$757.89 \$783.39	\$525.57 \$543.25	\$643.82 \$665.48	\$520.77 \$538.29	\$637.95 \$659.41	\$607.11 \$627.53	\$743.71 \$768.73	\$322.19 \$333.03	\$394.68 \$407.96	\$488.18 \$504.61	\$598.02 \$618.14	\$457.10 \$472.48	\$559.95	\$555.01 \$573.69	\$679.89 \$702.77	\$437.64 \$452.36	\$536.11 \$554.14	\$676.32 \$699.07	\$828.49 \$856.36	\$322.19 \$333.03	\$394.68	\$618.69 \$639.50	\$757.89 \$783.39	\$402.34 \$415.87	\$492.86 \$509.44	\$433.63 \$448.22	\$531.20 \$549.07
45		\$856.36														\$578.78														5549.0 5570.3
40	\$726.18 \$756.68	\$889.57 \$926.93	\$664.31 \$692.21	\$813.77 \$847.95	\$564.32 \$588.02	\$691.29 \$720.32	\$559.17 \$582.66	\$684.98 \$713.75	\$651.87 \$679.25	\$798.54 \$832.08	\$345.95 \$360.47	\$423.78 \$441.58	\$524.18 \$546.19	\$642.11 \$669.08	\$490.80 \$511.41	\$601.23 \$626.48	\$595.94 \$620.96	\$730.02 \$760.68	\$469.91 \$489.64	\$575.63 \$599.81	\$726.18 \$756.68	\$889.57 \$926.93	\$345.95 \$360.47	\$423.78 \$441.58	\$664.31 \$692.21	\$813.77 \$847.95	\$432.00 \$450.14	\$529.20 \$551.43	\$465.60 \$485.16	\$570.3 \$594.3
49	5791.54	5969.63	5724.09	5887.01	\$615.10	\$720.32	\$609.50	5746.63	\$710.54	5870.41	\$377.08	\$461.92	5571.35	\$699.90	\$534.97	\$655.34	\$649.57	\$795.72	\$512.20	\$627.44	\$791.54	5969.63	5377.08	\$441.58 \$461.92	5724.09	\$847.95 \$887.01	\$470.88	\$576.83	\$507.50	\$621.6
40	5825.91	\$1.011.74	\$755.54	5925.53	5641.81	5786.22	\$635.96	5779.05	\$741.39	5908.21	\$393.45	\$481.92 \$481.98	\$596.16	\$730.30	\$558.20	\$683.80	5677.78	\$830.28	\$534.44	\$654.69	5825.91	\$1,011.74	5393.45	\$481.92 \$481.98	\$755.54	\$925.53	\$470.88 \$491.33	\$570.83 \$601.88	\$529.54	\$648.6
50	\$854.64	\$1,011.74	\$790.97	\$1.087.58	5671.91	5923.88	\$665.79	5915.45	5776.16	\$1.067.22	\$411.91	\$461.98 \$566.37	\$624.12	\$730.30 \$858.16	\$584.38	\$803.52	\$709.56	\$975.64	\$559.50	\$769.31	5864.64	\$1,011.74	\$411.91	\$481.98 \$566.37	\$790.97	\$1,087.58	\$514.37	\$707.26	\$554.37	5762.2
61	5902.88	\$1,241.47	\$825.95	\$1,087.58	5701.63	\$964.74	5695.23	5915.45 5955.95	5810.49	\$1,067.22	\$430.12	\$591.42	\$651.72	\$896.12	\$610.23	\$839.06	\$740.95	\$975.64	\$584.25	\$769.31 \$803.34	5902.88	\$1,241.47	\$430.12	\$591.42	\$825.95	\$1,087.58	\$537.12	\$707.26 \$738.54	\$578.90	5795.5
52	\$945.00	\$1,241.47	\$864.48	\$1,133.66	5734.36	\$1,009.75	\$727.67	\$1,000.54	5848.30	\$1,114.43 \$1,166.41	\$450.12 \$450.19	\$619.01	5682.13	5937.92	\$638.69	\$878.20	5775.51	\$1,018.80	\$611.50	\$840.82	\$945.00	\$1,241.47	\$450.12 \$450.19	\$619.01	\$864.48	\$1,135.66	\$562.18	\$738.54 \$772.99	\$605.90	\$833.1
53	5987.60	\$1,357.96	5903.45	51,242.25	5767.47	\$1,055.27	\$760.47	\$1,045.65	\$886.54	\$1,219.00	\$470.49	\$646.92	5712.88	5980.21	\$667.49	5917.80	\$810.47	\$1,114.40	\$639.07	\$878.72	5987.60	\$1,357.96	\$470.49	\$646.92	5903.45	\$1,242.25	\$587.52	\$807.84	5633.22	\$870.6
54	\$1,033,60	\$1,421.19	5945.53	\$1,300.10	5803.21	\$1,104.41	5795.89	\$1,094,34	5927.83	\$1,275.76	\$492.40	\$677.04	5746.08	\$1,025.85	\$698.57	\$960.54	5848.21	\$1,166.29	5668.83	5919.64	\$1,033,60	\$1,421.19	\$492.40	\$677.04	5945.53	\$1,300.10	5614.88	5845.46	\$662.70	5911.2
55	\$1,033.60	\$1,421.19	5987.60	\$1,350.10	5838.95	\$1,153.55	\$831.30	\$1,094.34	5969.11	\$1,275.76	\$514.30	\$707.17	\$779.27	\$1,025.85	\$729.66	\$1,003.28	5885.96	51,100.29	5698.59	5919.64 5960.56	\$1,033.60	\$1,421.19	\$514.30	\$707.17	\$987.60	\$1,357.95	5642.24	\$845.46 \$883.08	5692.19	\$951.7
56	\$1,129.45	\$1,553.00	\$1,033.22	\$1,420.67	5877.70	\$1,206.83	\$869.70	\$1,195.83	51.013.88	\$1,394.08	\$538.06	5739.83	\$815.27	\$1,120.99	5763.36	\$1,049.62	5926.88	\$1,274.46	5730.86	\$1,004.93	\$1,129.45	\$1,553.00	\$538.06	5739.83	51.033.22	\$1,420.67	\$671.90	5923.87	5724.16	\$995.3
57	\$1,179.80	\$1,622.23	\$1,079.27	\$1,484.00	5916.82	\$1,260.63	5908.46	\$1,249.14	\$1,059.07	\$1,456.22	\$562.05	5772.81	\$851.61	\$1,170.96	\$797.39	\$1,096.41	5968.20	51,331.27	\$763.44	\$1,049.73	\$1,179.80	\$1,622.23	\$562.05	5772.81	\$1,079.27	\$1,484.00	5701.86	\$965.05	\$756.44	\$1,040.1
58	51,179.80	\$1,627.23	\$1,079.27	\$1,484.00	5958.58	\$1,260.63	5949.84	\$1,249.14	\$1,107.31	\$1,436.22	\$587.65	5808.01	\$890.40	\$1,170.96	\$833.71	\$1,146.35	\$1,012.29	\$1,331.27	5798.21	\$1,049.73	\$1,233.54	\$1,622.23	\$587.65	\$808.01	\$1,079.27	\$1,551.60	5733.82	\$1,009.01	5790.90	\$1,040.
59	\$1,250.16	\$1,732.73	\$1,152.79	\$1,585.09	5979.27	\$1,346.50	5970.35	\$1,334.23	\$1,131,21	\$1,555.42	\$600.33	\$825.45	5909.62	\$1,250.73	\$851.70	\$1,171.09	\$1,034.15	\$1,421.95	\$815.44	\$1,121.23	\$1,260.16	\$1,732.73	5600.33	\$825.45	\$1,152,79	\$1,585.09	\$749.66	\$1,030.79	5807.97	\$1,110
60	\$1,260.16	\$1,732.73	\$1,152.79	\$1,585.09	\$1.021.03	\$1,340.50	\$1,011.72	\$1,334.23	\$1,131.21	\$1,535.AZ \$1,621.74	5625.93	\$860.65	5948.41	\$1,250.73	\$888.02	\$1,171.09	\$1,034.15	\$1,421.95	5850.21	\$1,121.23	\$1,260.16	\$1,732.73	5625.93	\$860.65	\$1,152.79	\$1,585.09	5781.63	\$1,030.79	5842.43	\$1,158
61	\$1,313.90	\$1,800.01	\$1,201.95	\$1,052.08	\$1,027.03	\$1,453.58	\$1,047.51	\$1,391.12	\$1,221.17	\$1,679.11	\$648.07	\$891.10	5981.95	\$1,359.00	\$919.43	\$1,221.03	\$1,078.25	\$1,482.59	5880.29	\$1,169.05	\$1,313.90	\$1,800.61	\$648.07	\$891.10	\$1,201.95	\$1,032.08	5809.28	\$1,074.74	5872.22	\$1,158
63	\$1,360.38	\$1,070.52	51,272.37	\$1,711.14	\$1,037.15	\$1,486.17	\$1,047.51	\$1,440.33	\$1,221.17	\$1,079.11	\$662.60	5911.07	\$1.003.97	\$1,350.19	\$940.05	\$1,264.22	\$1,110.38	\$1,535.03	\$800.29 \$900.02	\$1,210.40	\$1,360.38	\$1,870.52	\$662.60	\$891.10 \$911.07	\$1,244,46	\$1,711.14	5827.42	\$1,117.76	5891.78	\$1,199.5
63	\$1,390.88	\$1,912.46	\$1,272.37	\$1,749.50	\$1,080.85	\$1,480.17	\$1,071.00	\$1,513.11	\$1,248.35	\$1,718.75	\$680.82	5936.13	\$1,003.97	\$1,380.40	\$965.89	\$1,292.50	51,141.41	\$1,569.44	5924.77	\$1,237.53	\$1,429.12	\$1,912.46	5680.82	5936.13	\$1,272.37	\$1,749.50	5850.18	\$1,137.71	5916.30	\$1,259.9
644	\$1,452.36	\$1,965.04	51,328.61	51,797.61	\$1,110.57	\$1,527.04	\$1,118.34	\$1,537.72	51,202.00	\$1,792.64	\$691.89	\$951.35	\$1,031.58	\$1,418.42 \$1,441.48	\$981.60	\$1,328.10	\$1,172.80	\$1,612.60 \$1,638.82	5939.81	\$1,271.56	\$1,452.36	\$1,965.04	5691.89	\$951.35	51,328.61	\$1,826.84	\$864.00	\$1,188.00	\$931.20	\$1,259.9
		34,937.00	Ja,440.01	P8.03m,44	44,44B.03	Ja. 2018/	24,410.34	24,131.12	44,603.74	JAJ 92.04	201.09	A421.32	Ja,048.33	JA,~41.46	J#81.00	44,049.70	Ja,191.07	\$4,03B.BZ	JJ39.81	44,292.24	##/HDZ-30	44,897.00	2031793	**2132	PA,320.01	JAJE20.89	Ju04.00	24,400.00	pp31.20	34,280.4

Keystone Health Plan East, Inc. Individual Plan Design Summary

				On/Off			
HIOS Plan ID	Plan Marketing Name	Product	Metal	Exchange	Network	Rating Area	Counties Covered
33871PA0040002	Keystone HMO Gold	нмо	Gold	On/Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0040005	Keystone HMO Gold Proactive	нмо	Gold	On/Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0040006	Keystone HMO Silver Proactive	нмо	Silver	On/Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0040010	Keystone HMO Silver Proactive Lite	нмо	Silver	On/Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0040013	Keystone HMO Silver Classic	нмо	Silver	On/Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0040014	Keystone HMO Bronze	нмо	Bronze	On/Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0040015	Keystone HMO Silver Basic	нмо	Silver	On/Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0040016	Keystone HMO Silver Proactive Basic	нмо	Silver	On/Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0040017	Keystone HMO Gold Classic	нмо	Gold	On/Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0040018	Keystone HMO Silver Proactive Essential	нмо	Silver	On/Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0120002	Keystone HMO Gold	нмо	Gold	Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0120004	Keystone HMO Bronze	нмо	Bronze	Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0120005	Keystone HMO Gold Proactive	нмо	Gold	Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0120007	Keystone HMO Silver Proactive Value	нмо	Silver	Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
33871PA0120008	Keystone HMO Silver Proactive Select	нмо	Silver	Off	Keystone	8	Bucks, Chester, Delaware, Montgomery, Philadelphia

В	С	D	F	F	G	н	I J K L M N O P Q R S
Unified Rate Review v6.0					, ,		To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + I To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L.
Company Legal Name:	Keystone Health Plan East						To validate, select the Validate button or Ctrl + Shift + I.
HIOS Issuer ID:	33871 State:		PA				To finalize, select the Finalize button or Ctrl + Shift + F.
Effective Date of Rate Change(s):			Individual	†			To findize, select the Findize button of eth F Singt FT.
	. ,						
Market Level Calculations (Same for a	all Plans)						
Section I: Experience Period Data		. (. (10.10.10.00			
Experience Period:		1/1/202		12/31/2023			
Allowed Claims			<u>Total</u> \$788,684,772.15	<u>PMPM</u> \$558.75	3		
Reinsurance			\$28,181,898.95	-			
Incurred Claims in Experience Period			\$652,720,233.85	-			
Risk Adjustment			-\$42,904,042.88				
Experience Period Premium			\$825,990,960.28				
Experience Period Member Months			1,411,515				
Section II: Projections					_		
		Yea	r 1 Trend	Year	2 Trend		
Benefit Category	Experience Period Index Rate PMPM	Cost	Utilization	Cost	Utilization	Trended EHB Allowed Claims PMPM	
Inpatient Hospital	\$98.26	1.05					
Outpatient Hospital	\$118.59	1.05				\$144.97	
Professional	\$129.39	1.02	29 1.051	1.029	1.051	\$151.33	
Other Medical	\$0.00	1.02				\$0.00	
Capitation	\$80.36	1.00				\$86.08	
Prescription Drug	\$132.02	0.99	90 1.051	0.990	1.051	\$142.93	
Total	\$558.62					\$646.12	
Marhidity Adjustment				1.000	5		
Morbidity Adjustment Demographic Shift				0.989			
Plan Design Changes				1.002			
Other				1.003			
Adjusted Trended EHB Allowed Claim	s PMPM for	1/1/202	25	\$642.21			
Manual EHB Allowed Claims PMPM				\$607.99			
Applied Credibility %				0.00%	-		
Projected Index Rate for		1/1/202	25	\$607.99	Projected Period Totals \$899,443,382.28		
Reinsurance		-, -, - 0		\$26.96			
Risk Adjustment Payment/Charge				-\$14.64			
Exchange User Fees				2.98%			
Market Adjusted Index Rate				\$613.97			
Projected Member Months				1,479,372			

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.

Product-Plan Data Collection

Company Legal Name: Keystone Health Plan East

HIOS Issuer ID: 33871 State: PA

Effective Date of Rate Change(s): 1/1/2025 Market: Individual

Product/Plan Level Calculations

4.15 Incurred Claims

4.17 Premium

4.16 Risk Adjustment Transfer Amount

\$430.24

-\$10.82

\$544.54

-\$10.82

\$825.14

\$605.78

-\$10.82

\$754.84

\$510.95

-\$10.82

\$641.21

\$506.06

-\$10.82

\$635.38

\$593.99

-\$10.82

\$740.75

\$303.82

-\$10.82

\$393.14

\$472.87

-\$10.82

\$595.64

\$441.21

-\$10.82

\$557.66

\$540.93

-\$10.82

\$677.18

\$421.39

-\$10.82

\$533.91

\$664.48

-\$10.82

\$825.17

\$303.82

-\$10.82

\$393.13

#DIV/0!

#DIV/0!

#DIV/0!

\$605.78

-\$10.82

\$754.81

\$385.43

-\$10.82

\$490.86

-\$10.82 \$529.04

#DIV/0!

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Field # Section I: General Product and Plan Information

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.

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.

	1.1 Product Name	Keystone HMO ON Exchange Indiv											Keystone HMO OFF Exchange Indiv								
	1.2 Product ID	33871PA004											33871PA012								
	1.3 Plan Name	-	Gold	Gold Proactive	Silver Proactive	Silver Proactive	Silver Classic	Bronze	Silver Basic	Silver Proactive	Gold Classic	Silver Proactive	Gold	Silver Classic	Bronze		Silver Proactive	Silver Proactive	Silver Proactive		
	1.4 Plan ID (Standard Component ID)	-	33871PA0040002 3				33871PA0040013 3						33871PA0120002 33								
-	1.5 Metal		536/1PA0040002 3	Gold		Silver	Silver	Bronze	Silver	Silver	Gold		Gold Gold	Silver	Bronze	Gold Gold	Silver	Silver			
		_	0.001	0.809		0.707	0.701	0.638	0.701	0.702	0.781	0.702	0.801	0.705	0.638	0.809	0.718	0.712			
	1.6 AV Metal Value	_	0.801														Terminated				
	1.7 Plan Category	_	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Terminated	Renewing	Renewing		Renewing	Renewing		
	1.8 Plan Type	_	HMO	HMO	HMO	HMO	НМО	HMO	НМО	НМО	HMO	НМО	HMO	HMO	НМО	HMO	HMO	НМО	HIVIO		
	1.9 Exchange Plan?	_	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No	No	No		
	1.10 Effective Date of Proposed Rates	_	1/1/2025	1/1/2025		1/1/2025	1/1/2025	1/1/2025	1/1/2025	1/1/2025	1/1/2025		1/1/2025	1/1/2025	1/1/2025	1/1/2025	1/1/2025	1/1/2025	1/1/2025		
	1.11 Cumulative Rate Change % (over 12 mos prior)		4.37%	4.56%	5.16%	5.33%	5.50%	5.38%	5.25%	5.45%	4.87%	5.82%	4.37%	0.00%	5.38%	4.57%	0.00%	5.45%	5.28%		
	1.12 Product Rate Increase %						5.41%	6								5.25%					
	1.13 Submission Level Rate Increase %										5.38%										
Worksheet 1 Totals	Section II: Experience Period and Current Plan Leve	r																			
A=00 00 1 ==0	2.1 Plan ID (Standard Component ID)												33871PA0120002 33								
\$788,684,772	2.2 Allowed Claims	\$788,684,772	\$10,209,830	\$48,942,237		\$50,218,539	\$721,607	\$56,365,307	\$9,841,428	\$171,726,755	\$11,316,690		\$10,058,080	\$4,078,937	\$30,042,193	\$16,599,534	\$4,501,236	\$68,648,983	\$35,410,757		
\$28,181,899	2.3 Reinsurance	\$25,698,170	\$561,081	\$1,966,304		\$1,954,206	\$40,000	\$1,286,756	\$374,413	\$5,715,459	\$401,696	\$2,733,061	\$395,085	\$169,791	\$887,967	\$522,589	\$124,229	\$1,586,995	\$889,489		
	2.4 Member Cost Sharing	\$107,782,639	\$1,124,276	\$5,755,795	\$19,805,483	\$5,198,945	\$108,873	\$13,362,288	\$1,534,990	\$18,591,824	\$1,584,626	\$7,895,069	\$1,036,228	\$730,057	\$7,342,154	\$2,011,334	\$655,241	\$14,264,255	\$6,781,201		
	2.5 Cost Sharing Reduction	\$0	\$0	\$0	, -	\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$0		
\$652,720,234		\$655,203,963	\$8,524,473	\$41,220,137	\$137,211,568	\$43,065,388	\$572,734	\$41,716,263	\$7,932,025	\$147,419,473	\$9,330,369	\$86,268,428	\$8,626,767	\$3,179,089	\$21,812,072	\$14,065,611	\$3,721,766	\$52,797,732	\$27,740,067		
-\$42,904,043	2.7 Risk Adjustment Transfer Amount	-\$42,904,043	\$2,871,422	\$10,047,909	\$23,680,539	\$5,644,568	-\$97,361	-\$18,563,429	\$707,909	-\$26,940,843	\$424,534	-\$14,371,724	\$2,894,252	\$586,520	-\$18,640,382	\$3,495,747	\$798,207	-\$13,766,270	-\$1,675,642		
\$825,990,960	2.8 Premium	\$825,990,959	\$6,835,226	\$38,630,538	\$168,532,469	\$52,693,464	\$847,976	\$61,475,155	\$8,908,529	\$198,882,901	\$9,068,447		\$7,446,921	\$3,734,405	\$30,775,386	\$14,626,376	\$3,090,769	\$66,297,115			
1,411,515	2.9 Experience Period Member Months	1,411,515	7,700	51,375	231,268	74,066	1,104	152,477	13,817	324,496	13,052	•	9,816	5,091	75,467	22,204	5,135	135,353			
	2.10 Current Enrollment	123,281	582	4,202	•	4,678	125	16,323	1,472	18,986	1,719	31,865	837	0	5,994	1,930	0	10,706	6,278		
	2.11 Current Premium PMPM	\$554.35	\$883.39	\$727.48		\$703.41	\$710.50	\$389.83	\$609.49	\$604.68	\$684.45	\$527.50	\$756.46	\$0.00	\$394.71	\$664.66	\$0.00	\$481.15	\$484.26		
	2.12 Loss Ratio	83.67%	87.82%	84.68%	71.39%	73.82%	76.30%	97.21%	82.48%	85.74%	98.29%	80.76%	83.42%	73.57%	179.75%	77.62%	95.70%	100.51%	88.68%		
	Per Member Per Month																				
	2.13 Allowed Claims	\$558.75	\$1,325.95	\$952.65	\$705.27	\$678.02	\$653.63	\$369.66	\$712.27	\$529.21	\$867.05	\$430.29	\$1,024.66	\$801.21	\$398.08	\$747.59	\$876.58	\$507.18	·		
	2.14 Reinsurance	\$18.21	\$72.87	\$38.27	\$26.33	\$26.38	\$36.23	\$8.44	\$27.10	\$17.61	\$30.78	\$12.14	\$40.25	\$33.35	\$11.77	\$23.54	\$24.19	\$11.72	\$13.92		
	2.15 Member Cost Sharing	\$76.36	\$146.01	\$112.03	\$85.64	\$70.19	\$98.62	\$87.63	\$111.09	\$57.29	\$121.41	\$35.06	\$105.57	\$143.40	\$97.29	\$90.58	\$127.60	\$105.39	\$106.11		
	2.16 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
	2.17 Incurred Claims	\$464.18	\$1,107.07	\$802.34	\$593.30	\$581.45	\$518.78	\$273.59	\$574.08	\$454.30	\$714.86	\$383.10	\$878.85	\$624.45	\$289.03	\$633.47	\$724.78	\$390.07	\$434.08		
	2.18 Risk Adjustment Transfer Amount	-\$30.40	\$372.91	\$195.58	\$102.39	\$76.21	-\$88.19	-\$121.75	\$51.23	-\$83.02	\$32.53	-\$63.82	\$294.85	\$115.21	-\$247.00	\$157.44	\$155.44	-\$101.71	-\$26.22		
	2.19 Premium	\$585.18	\$887.69	\$751.93	\$728.73	\$711.44	\$768.09	\$403.18	\$644.75	\$612.90	\$694.79	\$538.17	\$758.65	\$733.53	\$407.80	\$658.73	\$601.90	\$489.81	\$515.68		
	Section III: Plan Adjustment Factors																				
	3.1 Plan ID (Standard Component ID)	3	33871PA0040002 3	3871PA0040005	33871PA0040006	33871PA0040010	33871PA0040013 3	3871PA0040014 3	3871PA0040015 33	8871PA0040016 3	3871PA0040017	33871PA0040018	33871PA0120002 33	3871PA0120003 3	3871PA0120004 3	3871PA0120005 33	871PA0120006	33871PA0120007	33871PA0120008		
	3.2 Market Adjusted Index Rate				<u>.</u>			<u>.</u>	•		\$613.97		<u>.</u>		<u>.</u>	<u>.</u>					
	3.3 AV and Cost Sharing Design of Plan		1.0423	1.0489	0.8910	0.8829	0.9357	0.4966	0.7524	0.7749	0.8554	0.7419	1.0413	0.0000	0.4961	1.0478	0.0000	0.6814	0.7344		
	3.4 Provider Network Adjustment		1.0764	0.9785	0.9785	0.9785	1.0764	1.0764	1.0764	0.9785	1.0764	0.9785	1.0764	0.0000	1.0764	0.9785	0.0000	0.9785	0.9785		
	3.5 Benefits in Addition to EHB		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0010	0.0000	1.0010	1.0010	0.0000	1.0010	1.0010		
<u>.</u>	Administrative Costs																				
	3.6 Administrative Expense		13.87%	13.87%	13.87%	13.87%	13.87%	13.87%	13.87%	13.87%	13.87%	13.87%	13.87%	0.00%	13.87%	13.87%	0.00%	13.87%	13.87%		
	3.7 Taxes and Fees		0.65%	0.65%	0.65%	0.65%	0.65%	0.65%	0.65%	0.65%	0.65%	0.65%	0.65%	0.00%	0.65%	0.65%	0.00%	0.65%	0.65%		
	3.8 Profit & Risk Load		2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	0.00%	2.00%	2.00%	0.00%	2.00%	0.65% 2.00%		
	3.9 Catastrophic Adjustment		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.0000	1.0000	1.0000	0.0000	1.0000			
	3.10 Plan Adjusted Index Rate		\$825.14	\$754.84	\$641.21	\$635.38	\$740.75	\$393.14	\$595.64	\$557.66	\$677.18	\$533.91	\$825.17	\$0.00	\$393.13	\$754.81	\$0.00	\$490.86	\$529.04		
_			•		•			<u> </u>	•	•	1		<u> </u>	•	•		•				
ſ	3.11 Age Calibration Factor	0.5892									0.5892										
	3.12 Geographic Calibration Factor	1.0000									1.0000										
	3.13 Tobacco Calibration Factor	0.9958									0.9958										
	3.14 Calibrated Plan Adjusted Index Rate		\$484.15	\$442.90	\$376.23	\$372.81	\$434.63	\$230.67	\$349.49	\$327.21	\$397.33	\$313.27	\$484.17	\$0.00	\$230.67	\$442.88	\$0.00	\$288.01	\$310.41		
_	<u> </u>		•		•		<u> </u>	•	•	•	1	•	•	•	•		•				
	Section IV: Projected Plan Level Information																				
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	4.2 Allowed Claims	\$901,044,643	\$5,107,800	\$33,591,798	\$132,052,283	\$35,018,644	\$1,051,637	\$120,142,474	\$11,543,733	\$136,378,159	\$14,012,832	\$226,177,779	\$7,350,148	\$0	\$44,160,801	\$15,438,055	\$0	\$74,530,642	\$44,487,857		
	4.3 Reinsurance	\$29,483,893	\$139,191	\$1,004,951	\$4,205,391	\$1,118,791	\$29,895	\$3,903,810	\$352,044	\$4,540,693	\$411,116	\$7,620,836	\$200,177	\$0	\$1,433,525	\$461,579	\$0	\$2,560,448	\$1,501,447		
	4.4 Member Cost Sharing	\$235,073,244	\$327,917	\$2,040,906	\$20,032,633	\$5,491,823	\$130,757	\$56,728,503	\$2,838,927	\$31,316,412	\$2,443,400		\$475,936	\$0	\$20,874,401	\$946,533	\$0	\$22,452,922			
	4.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
	4.6 Incurred Claims	\$636,487,506	\$4,640,693	\$30,545,941	\$107,814,259	\$28,408,031	\$890,985	\$59,510,162	\$8,352,762	\$100,521,054	\$11,158,315	\$161,132,954	\$6,674,035	\$0	\$21,852,874	\$14,029,942	\$0	\$49,517,273	\$31,438,225		
	4.7 Risk Adjustment Transfer Amount	-\$16,008,720	-\$75,576	-\$545,653		-\$607,464	-\$16,232	-\$2,119,632	-\$191,147	-\$2,465,437	-\$223,222		-\$108,689	\$0	-\$778,354	-\$250,621	\$0	-\$1,390,233			
	4.8 Premium	\$805,574,070	\$5,762,788	\$38,062,230		\$35,667,759	\$1,111,127	\$77,005,837	\$10,521,400	\$127,052,505	\$13,968,896		\$8,288,050	\$0	\$28,277,239	\$17,481,306	\$0	\$63,061,971			
	4.9 Projected Member Months	1,479,372	6,984	50,424		56,136	1,500	195,876	17,664	227,832	20,628		10,044	0	71,928	23,160	0	128,472			
	4.10 Loss Ratio	80.61%	81.60%	81.42%		81.03%	81.38%	79.47%	80.86%	80.68%	81.18%		81.60%	#DIV/0!	79.47%	81.42%	#DIV/0!	80.29%	•		
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ſ	4.11 Allowed Claims	\$609.07	\$731.36	\$666.19	\$625.82	\$623.82	\$701.09	\$613.36	\$653.52	\$598.59	\$679.31	\$591.50	\$731.79	#DIV/0!	\$613.96	\$666.58	#DIV/0!	\$580.13	\$590.53		
	4.12 Reinsurance	\$19.93	\$19.93	\$19.93		\$19.93	\$19.93	\$19.93	\$19.93	\$19.93	\$19.93		\$19.93	#DIV/0!	\$19.93	\$19.93	#DIV/0!	\$19.93			
	4.13 Member Cost Sharing	\$158.90	\$46.95	\$40.47		\$97.83	\$87.17	\$289.61	\$160.72	\$137.45	\$118.45	•	\$47.39	#DIV/0!	\$290.21	\$40.87	#DIV/0!	\$174.77			
	4.14 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	·	\$0.00	#DIV/0!	\$0.00	\$0.00	#DIV/0!	\$0.00	· · · · · · · · · · · · · · · · · · ·		
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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 validate, select the Validate button or Ctrl + Shift + I. _To finalize, select the Finalize button or Ctrl + Shift + F.

Rating Area Rating Factor
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GENERAL OVERVIEW

PURPOSES

This Actuarial Memorandum is provided along with the Unified Rate Review Template (URRT) to provide certain information to support the gross premium for the single risk pool for individual market health care insurance underwritten by Keystone Health Plan East in the Commonwealth of Pennsylvania. It is provided as a component of an application for certification as a Qualified Health Plan and a state rate filing. This submission may not be appropriate for other purposes.

GENERAL INFORMATION

COMPANY IDENTIFYING INFORMATION

Company Legal Name: Keystone Health Plan East ("KHPE")

State: Pennsylvania

HIOS Issuer ID (5-digit): 33871

Market: Individual

Effective Date(s): 1/1/2025

Worksheet 1 of the accompanying URRT contains experience period data and development of the projected Single Risk Pool Gross Premium Average Rate PMPM for the individual market for KHPE. Worksheet 2 contains experience period data and projections by product for the single risk pool for the same entities.

COMPANY CONTACT INFORMATION

Primary Contact Name:

Primary Contact Telephone Number:

Primary Contact Email Address:



PROPOSED RATE INCREASE

The changes to the single risk pool gross premium average rate per member per month (PMPM) from calendar year 2023 to calendar year 2024 were incorporated into the pricing and reflected in the Unified Rate Review Template. The changes are driven by factors including: changes in market-wide population risk morbidity and covered services, increasing unit costs for medical services, increasing utilization of medical services, increasing fees and taxes imposed by the federal government, anticipated costs to administer the plan, and anticipated revenue or payments due to market-wide risk adjustment.

We are projecting that claims will increase by 9.1% in 2025. More than half of the change in health care service costs is driven by changes to health care provider fees.

A reinsurance program administered by the state became effective January 1, 2023. We project that this will reduce rates by approximately 5.4% in the 2025 time period.

Some plan benefits are mandated by federal and state law. Benefit changes for some plans were also made. All changes in benefits are in compliance with the uniform modifications rules stipulated by the Federal government (e.g., ABA coverage which was not covered in the experience period but will be covered in the projection period).

The weighted average increase across KHPE plans based on projected membership, inclusive of the impact of benefit and cost sharing changes, is 5.4%. The minimum increase is 4.4% and the maximum increase is 5.8%.

WORKSHEET 1: MARKET EXPERIENCE

SECTION I: EXPERIENCE PERIOD DATA

SINGLE RISK POOL

The single risk pool reflects all covered lives for every individual non-grandfathered product and plan combination for KHPE in the state of Pennsylvania. It is established according to the Single Risk Pool requirements in 45 CFR § 156.80(d).

PAID THROUGH DATE

Experience period premium, claims, and member months are obtained from the company's internal data warehouse. The claims data is collected for incurred dates from January through December 2023 and paid through February 2024. Earned premiums and member months are for January through December 2023. The data are for all direct-written individual business of KHPE in the Commonwealth of Pennsylvania.

PREMIUMS IN EXPERIENCE PERIOD

Earned Premiums in the Experience Period are developed by summing the earned premium reported in the company's internal data warehouse.

ALLOWED AND INCURRED CLAIMS INCURRED DURING THE EXPERIENCE PERIOD

Paid-to-Date and Incurred Claims, and Member Months

Insurer fee-for-service claims expenses and member liabilities for dates of service in January 2023 through December 2023 and paid through February 2024 are sourced from the IBCFOC's internal data

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warehouse. The claims and member liabilities are completed with incurred but not reported (IBNR) adjustments to develop ultimate incurred insurer fee-for-service claims expenses and member liabilities for the January through December 2023 period. Capitation amounts are also sourced from the internal

data warehouse for the January through December 2023 period but they are not adjusted for IBNR.

Allowed Claims

Allowed claims are determined by separately obtaining paid-to-date fee-for-service claims and member cost-sharing amounts, applying claim lag factors to those amounts to estimate ultimate incurred fee-forservice claims and member-sharing amounts and adding them together with capitation amounts.

Allowed claims do not include ineligible claims, payments for services other than medical care provided, recovery payments related to internal large claim pooling mechanisms, or active live reserves.

IBNR Development

Medical fee for service incurred but not reported (IBNR) claims are modeled through the use of standard claim lag methodologies. A range of results is developed, and a provision for adverse deviation is applied. The provision for adverse deviation is dependent on many factors such as stability, size, product

mix, etc.

The completion factors are developed annually in the 2Q – 3Q period. We do not believe our IBNR is unusually high or unusually low for incurred 2023 paid through February 2024.

Experience Period Index Rate

The Index Rate of Experience Period is estimated by removing cost and utilization trend from the Index Rate for Projection Period.

SECTION II: PROJECTIONS

BENEFIT CATEGORIES

Experience Period Index Rate PMPM Data is provided in Section II. The data is provided by benefit category using a standardized indicator from the internal data warehouse that assigns each claim line to

a category based on the type of provider and the location of the service.

PROJECTION FACTORS

The estimated incurred claims experience on an allowed basis for January 2023 through December 2023 is projected to the future rating period by several factors.

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Morbidity Adjustment

Experience period allowed claims are adjusted to account for differences in the average morbidity of the single risk pool population underlying the experience and the anticipated population in the projection period. This adjustment reflects changes in the individual market-wide morbidity.

Demographic Shift

This factor reflects the projected change in the average age, rating area, and tobacco utilization of the single risk pool.

Plan Design Changes

This factor reflects any changes in EHB allowed claims due to plan design changes.

Other Changes

This factor reflects changes in cost related to items other than changes in Morbidity, Demographic Shift, or Plan Design.

Trend Factors

a. Annualized Cost Trend

Annual cost trend reflects changes in costs of medical treatment due to medical inflation and changes in the distribution of services across network providers. The trend value is developed by reviewing historical medical costs for the single risk pool and adjusting them for anticipated future provider contracting reimbursement levels. The data is normalized for changes in age, benefit changes during the experience period, changes to provider contracts, and prescription drug formulary, and new drugs brought to market.

b. Annualized Utilization Trend

Annual utilization trend reflects the change in the number of units per 1,000 members for a fixed level of illness burden and includes changes due to the mix and intensity of services provided and changes related to shifts in product mix. It also includes effects of selection, if any, since this cannot be reflected in the relative cost of the various products and plans offered.

CREDIBILITY MANUAL RATE DEVELOPMENT

We combined the experience period data for KHPE with the experience period data for QCC Insurance Company ("QCC"). This should provide a more stable basis for projecting the Index Rate. The combined data is shown in Tab Ib. The Change in Network Factor is intended to result in KHPE rates that are reasonable in relation to QCC rates. The combined claims are determined to be 100% credible as reflected in Table 5.

RISK ADJUSTMENT AND REINSURANCE

Projected Risk Adjustment PMPM

Projected Risk Adjustment is accounted for in Projected Incurred Claims before the state based reinsurance program and Risk Adjustment to reflect anticipated risk adjustment transfer amounts for the projection period. The amount reflects the projected morbidity for the single risk pool in the projection period.

The estimated risk adjustment revenue for all of the plans in the risk pool is developed using the following methodology. We recognize that the HHS payment transfer formula implies that the projected incurred claims based solely on the experience period single risk pool claims need to be adjusted by the ratio of the current statewide market's risk relative to allowable rating factor (ARF) for age compared to the single risk pool's risk relative to ARF presented during the experience period. This adjustment, together with the assumed future changes in population risk morbidity, results in the issuer's pricing being consistent with the anticipated morbidity level of the future statewide market.

The anticipated risk adjustment transfer revenue is allocated proportionally based on plan premium. The Projected Risk Adjustment is subtracted from Projected Incurred Claims before ACA Risk Adjustment to reflect anticipated receipt of risk adjustment transfer amounts for the projection period.

The projected risk adjustment amounts for KHPE and Independence Blue Cross (QCC) are consistent with the projection made in the respective submissions. We also considered preliminary 2023 risk transfer results.

Projected ACA Reinsurance Recoveries Net of Reinsurance Premium (Individual Market Only)

With the expiration of the reinsurance program at the end of the 2016 benefit year, there are no projected reinsurance recoveries or reinsurance premium assumed in the rates.

MARKET ADJUSTED INDEX RATE

The template calculates a MAIR by subtracting the amounts entered for reinsurance and risk adjustment and dividing by 1 minus the exchange user fee percentage. The MAIR calculation flows into Worksheet 2.

The Market Adjusted Index rate is calculated as the Index Rate adjusted for all allowable market-wide modifiers defined in the market rating rules: federal reinsurance program adjustment, risk adjustment and exchange user fees. The Market Adjusted Index Rate reflects the average demographic characteristics of the single risk pool.

WORKSHEET 2: PRODUCT-PLAN DATA COLLECTION

SECTION I: GENERAL PRODUCT AND PLAN INFORMATION

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All products and plans included in the single risk pool are shown in Worksheet 2.

AV METAL VALUES

The AV Metal Values included in Worksheet 2 of the URRT were valued using the AV Calculator, where possible, otherwise the AV Metal Values were developed under an alternate methodology. Actuarial certifications required by 45 CFR Part 156, §156.135 are provided in a separate document.

SECTION II: EXPERIENCE PERIOD AND CURRENT PLAN LEVEL INFORMATION

Experience Period data is shown for each plan included in the single risk pool.

SECTION III: PLAN ADJUSTMENT FACTORS

The MAIR is adjusted for each plan based on its plan design, provider network, and non-EHBs.

Administrative costs are added to calculate the Plan Adjusted Index Rate. The Plan Adjusted Index Rate is multiplied by the Age Calibration Factor, Geographic Calibration Factor, and Tobacco Calibration Factor to calculate the Calibrated Plan Adjusted Index Rate.

PLAN ADJUSTED INDEX RATE

The Plan Adjusted Index Rate is calculated as the issuer Market Adjusted Index Rate adjusted for all allowable plan level modifiers defined in the market rating rule. These include actuarial value and cost sharing adjustment, provider network, delivery system and utilization management adjustment, adjustment for benefits in addition to the EHBs, impact of specific eligibility categories for the catastrophic plan and administrative costs.

NON-BENEFIT EXPENSES AND PROFIT & RISK

Administrative Expense Load

An Administrative Expense Load is applied to Projected Incurred Claims to reflect expenses related to quality improvement and fraud detection/recovery and other expenses of operating a business, broker commissions, and premium payment processing fees.

Profit & Risk Load/Contribution to Surplus

A Profit & Risk Load/Contribution to Surplus for the single risk pool is applied to Projected Incurred Claims for the projection period, if applicable.

Taxes and Fees

A Taxes & Fees load is applied to Projected Incurred Claims to pass through fees and taxes levied by the federal and state governments.

CALIBRATION

The plan adjusted index rate is projected for all products using the same anticipated age distribution and the mandated age curve. Therefore the consumer adjusted premium rate is the plan adjusted index rate divided by the average age, geographic and tobacco factors for the expected distribution. The average age of the combined individual risk pool population is 42.

The Average Age factor is the reciprocal of the weighted average age factor based on the projected membership. The Tobacco Factor is calculated as the reciprocal of the projected average factor for tobacco users multiplied by the projected tobacco use prevalence.

There is only one geographic rating area for this filing. The geographic rating area factor for this filing is 1.0.

Small differences result between the Calibrated Plan Adjusted Index rates and the Age 21 non-tobacco rates in the Rate Template due to rounding restrictions required in the URRT Part 1.

When rounded to the nearest dollar, the Calibrated Plan Adjusted Index Rates match the Age 21 non-tobacco rates in the Rate Template as required in the DIT.

MEMBERSHIP PROJECTIONS

Enrollment is projected based on current and anticipated enrollment by plan. Items impacting these projections include changes in the size of the market due to guarantee issue requirements and the individual mandate changes. The enrollment is our February 2024 enrollment.

LOSS RATIO

The loss ratio calculated in Section IV is generated within the template and is not based on the MLR formula. The projected loss ratio for the single risk pool is estimated to exceed 80% reflecting premium adjustments permitted by the federal MLR calculation.

INDEX RATE

The Index Rate is defined as the EHB portion of projected allowed claims divided by all projected single risk pool lives. The Index Rate is the same value for all non-grandfathered plans for KHPE Individual Plans in Pennsylvania. The Index Rate reflects the twelve month projection for calendar year 2024. It has been developed following the specifications of 45 CFR § 156.80(d)(1).

TERMINATED PLANS

No plans are being terminated in 2025:

WORKSHEET 3: RATING AREAS

There are nine rating areas in Pennsylvania. These plans are offered only in Rating Area 8, which consists of Bucks, Chester, Delaware, Montgomery, and Philadelphia counties.

ACTUARIAL CERTIFICATION

I, am Director & Actuary of Commercial Markets for the Independence Blue Cross Family of Companies. I am a member of the Society of Actuaries and the American Academy of Actuaries in good standing with the education and experience necessary to perform the work necessary and meet the Qualification Standards of the American Academy of Actuaries to render the qualified actuarial opinion contained herein. The developed rates and memorandum have been prepared in conformity with appropriate Actuarial Standards of Practice and the Academy's Code of Professional Conduct.

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

I hereby certify that, to the best of my knowledge and judgment, the following:

- The projected index rate is:
 - —In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80 and 147.102);
 - —Developed in compliance with applicable Actuarial Standards of Practice;
 - Reasonable in relation to the benefits provided and the population anticipated to be covered; and
 - Neither excessive nor deficient.
- 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.
- Geographic rating factors reflect only differences in the costs of delivery of and do not include differences for population morbidity by geographic area.
- 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, unless an alternate methodology was required. If an alternate methodology was used to calculate the AV Metal Value for at least

one plan offered, a copy of the actuarial certification required by 45 CFR Part 156, §156.135 will be included.

May 15, 2024

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SECTIONS AND AND ASS.	Total Charles Administrative Total Charles Administrative		50	
SECTION PROJECT A	Total in countries, following court		355	- 3
SECTIONS SECTION 5	Total Courter State Court			
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SECTIONS DESIGNATED	Total Courter Steel Court Court		80	
SECTIONS RESIDENT	Salar Sauren Salar Salar Salar Sauren Salar Salar	000	80	- 2
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INCOME SECTION	Salara Garban Assess Gar Salara Garban Assess Gar		922	- 2
SECTION SECTION S	Total in courter, following our		20	- 8
SECTION SECTION S	Separate Separate		750	- 3
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SECTIONS PROJECT I	Salam Salam Salam Salam Salam	60000	152	- 2
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SECTIONS NAME AND ADDRESS OF THE PERSON NAME AND ADDRESS OF TH	Separa Garden, Separa Gar Separa Garden, Separa Gar Separa Garden, Separa Gar Separa Garden, Separa Gar		- 6	- 5
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Cover Page

HIOS Issuer ID: 33871

HIOS Product IDs: 33871PA004, 33871PA012

Unique Plan Design Supporting Documentation and Justification

ACTUARIAL MEMORANDUM

HIOS Issuer ID: 33871

HIOS Product IDs: 33871PA004, 33871PA012

Applicable HIOS Plan IDs (Standard Component): 33871PA0040002, 33871PA0120002, 33871PA0120004, 33871PA0040014, 33871PA0040005, 33871PA0120005, 33871PA0040006, 33871PA0120007, 33871PA0120008, 33871PA0040010, 33871PA0040016, 33871PA0040015, 33871PA0040017, 33871PA0040013, 33871PA0040018

Purpose of document:

The purpose of this document is to provide CMS with a justification of the methods used in calculating the actuarial value for unique plan designs offered in the individual or small group market for the plan year beginning 1/1/2025. As prescribed by law, the AV calculation was based on the AV calculator to the full extent possible. The AV is meant to represent the average percent of costs paid by the insurer for a standard population and may vary from actual member experience. The resulting AV was based on prescribed methodology and, therefore, may not reasonably reflect the actuary's estimate of the portion of allowed costs covered by the health insurance plan. The AV was determined based on the plan's benefits and coverage data, the standard population, and utilization and continuance tables published by HHS for purposes of thevaluation of AV. This actuarial analysis is not appropriate for any other purposes.

Reasons the plan design is unique (benefits that are not compatible with the parameters of the AV calculator and the materiality of those benefits):

The cost-sharing for inpatient hospital services for a subset of these plans differs by facility and professional claims. Inpatient hospital services account for about 16% of allowed costs in the AV calculation.

The outpatient facility fee cost-sharing for a subset of these plans varies by site of service. Services have different copays for a free-standing facility setting and a hospital setting. Outpatient facility fee accounts for about 13% of allowed costs in the AV calculation.

The cost-sharing for primary care for these plans is a combination of copays for office visits in person and virtual care. Primary care services account for about 3% of allowed costs in the AV calculation.

The cost-sharing for specialist care for these plans is a combination of copays for office visits in person and virtual care. Specialist services account for about 8% of allowed costs in the AV calculation.

The cost-sharing for Outpatient Mental Health and Substance Abuse for these plans varies between Office visits and All Other services. Outpatient Mental Health and Substance Abuse accounts for about 4% of allowed costs in the AV calculation.

The cost-sharing for Generic Drugs for these plans varies between low-cost Generics and normal Generics. Generic Drugs accounts for about 4% of allowed costs in the AV calculation.

A subset of these plans has a three-tier benefit design structure. Plans 33871PA0040005 and 33871PA0120005 have expected utilization of 45% in the third tier. Plans 33871PA0040006, 33871PA0120007, 33871PA0120008, 33871PA0040010, 33871PA0040016, and 33871PA0040018 have expected utilization of 40% in the third tier.

Acceptable alternate method used per 156.135(b)(2) or 156.135(b)(3):

Method 156.135(b)(2) was used for inpatient hospital, outpatient facility, primary care, specialist care, outpatient mental health and substance abuse, and generic drugs cost-sharing.

Method 156.135(b)(3) was used to accommodate the three-tier design.

Confirmation that only in-network cost sharing, including multitier networks, was considered:

I confirm that only in-network cost sharing was considered.

Description of the standardized plan population data used:

For the inpatient hospital utilization, we considered our commercial PPO and HMO data incurred between January 2023 and December 2023.

For the freestanding and hospital utilization data for outpatient facility, we considered our commercial PPO and HMO data incurred between January 2023 and December 2023.

For the primary care and specialist utilization, we used our commercial PPO and HMO data incurred between January 2023 and December 2023.

For the outpatient mental health and substance abuse utilization, we used our commercial HMO data incurred between January 2023 and December 2023.

For the generic drugs utilization, we used our commercial PPO and HMO data incurred between January 2023 and December 2023.

If the method described in 156.135(b)(2) was used, a description of how the benefits were modified to fit the parameters of the AV calculator:

Primary Care Copay Differential

For primary care, our recent data indicated that 85% of utilization came from office visits in person and 15% from virtual care. The cost-sharing entered into the AV calculator is a weighted average of copays based on utilization at each site.

	Co	st - sharing	
HIOS_ID	PCP	Virtual PCP	AV Input
33871PA0040002, 33871PA0120002	\$35	\$25	\$ 33.50
33871PA0040014, 33871PA0120004	\$75	\$50	\$ 71.25
Tier 1: 33871PA0040005, 33871PA0120005	\$15	\$10	\$ 14.25
Tier 2: 33871PA0040005, 33871PA0120005	\$30	\$20	\$ 28.50
Tier 3: 33871PA0040005, 33871PA0120005	\$45	\$30	\$ 42.75
Tier 1: 33871PA0040006	\$40	\$30	\$ 38.50
Tier 2: 33871PA0040006	\$70	\$50	\$ 67.00
Tier 3: 33871PA0040006	\$80	\$55	\$ 76.25
Tier 1: 33871PA0120007	\$40	\$30	\$ 38.50
Tier 2: 33871PA0120007	\$60	\$40	\$ 57.00
Tier 3: 33871PA0120007	\$70	\$50	\$ 67.00
Tier 1: 33871PA0120008	\$40	\$30	\$ 38.50
Tier 2: 33871PA0120008	\$70	\$50	\$ 67.00
Tier 3: 33871PA0120008	\$80	\$55	\$ 76.25
Tier 1: 33871PA0040010	\$50	\$35	\$ 47.75
Tier 2: 33871PA0040010	\$60	\$40	\$ 57.00
Tier 3: 33871PA0040010	\$70	\$50	\$ 67.00
Tier 1: 33871PA0040016	\$50	\$35	\$ 47.75
Tier 2: 33871PA0040016	\$60	\$40	\$ 57.00
Tier 3: 33871PA0040016	\$70	\$50	\$ 67.00
Tier 1: 33871PA0040006-04	\$40	\$30	\$ 38.50
Tier 2: 33871PA0040006-04	\$70	\$50	\$ 67.00
Tier 3: 33871PA0040006-04	\$80	\$55	\$ 76.25
Tier 1: 33871PA0040006-05	\$20	\$15	\$ 19.25
Tier 2: 33871PA0040006-05	\$30	\$20	\$ 28.50
Tier 3: 33871PA0040006-05	\$40	\$30	\$ 38.50
Tier 1: 33871PA0040006-06	\$5	\$0	\$ 4.25
Tier 2: 33871PA0040006-06	\$10	\$5	\$ 9.25
Tier 3: 33871PA0040006-06	\$20	\$15	\$ 19.25
Tier 1: 33871PA0040010-04	\$50	\$35	\$ 47.75
Tier 2: 33871PA0040010-04	\$60	\$40	\$ 57.00
Tier 3: 33871PA0040010-04	\$70	\$50	\$ 67.00

	Со	st - sharing	
HIOS_ID	PCP	Virtual PCP	AV Input
Tier 1: 33871PA0040010-05	\$20	\$15	\$ 19.25
Tier 2: 33871PA0040010-05	\$30	\$20	\$ 28.50
Tier 3: 33871PA0040010-05	\$40	\$30	\$ 38.50
Tier 1: 33871PA0040010-06	\$5	\$0	\$ 4.25
Tier 2: 33871PA0040010-06	\$10	\$5	\$ 9.25
Tier 3: 33871PA0040010-06	\$20	\$15	\$ 19.25
Tier 1: 33871PA0040016-04	\$50	\$35	\$ 47.75
Tier 2: 33871PA0040016-04	\$60	\$40	\$ 57.00
Tier 3: 33871PA0040016-04	\$70	\$50	\$ 67.00
Tier 1: 33871PA0040016-05	\$20	\$15	\$ 19.25
Tier 2: 33871PA0040016-05	\$30	\$20	\$ 28.50
Tier 3: 33871PA0040016-05	\$40	\$30	\$ 38.50
Tier 1: 33871PA0040016-06	\$5	\$0	\$ 4.25
Tier 2: 33871PA0040016-06	\$10	\$5	\$ 9.25
Tier 3: 33871PA0040016-06	\$20	\$15	\$ 19.25
33871PA0040013	\$35	\$25	\$ 33.50
33871PA0040015	\$35	\$25	\$ 33.50
33871PA0040017	\$40	\$25	\$ 37.75
33871PA0040013-04	\$35	\$25	\$ 33.50
33871PA0040013-05	\$30	\$20	\$ 28.50
33871PA0040013-06	\$10	\$5	\$ 9.25
33871PA0040015-04	\$35	\$25	\$ 33.50
33871PA0040015-05	\$20	\$15	\$ 19.25
33871PA0040015-06	\$15	\$10	\$ 14.25
Tier 1: 33871PA0040018	\$50	\$35	\$ 47.75
Tier 2: 33871PA0040018	\$60	\$40	\$ 57.00
Tier 3: 33871PA0040018	\$70	\$50	\$ 67.00
Tier 1: 33871PA0040018-04	\$50	\$35	\$ 47.75
Tier 2: 33871PA0040018-04	\$60	\$40	\$ 57.00
Tier 3: 33871PA0040018-04	\$70	\$50	\$ 67.00
Tier 1: 33871PA0040018-05	\$20	\$15	\$ 19.25
Tier 2: 33871PA0040018-05	\$30	\$20	\$ 28.50
Tier 3: 33871PA0040018-05	\$40	\$30	\$ 38.50
Tier 1: 33871PA0040018-06	\$5	\$0	\$ 4.25
Tier 2: 33871PA0040018-06	\$10	\$5	\$ 9.25
Tier 3: 33871PA0040018-06	\$20	\$15	\$ 19.25

Specialist Copay Differential

For specialist visits, our recent data indicated that 95% of utilization came from office visits in person and 5% from virtual care. The cost-sharing entered into the AV calculator is a weighted average of copays based on utilization at each site.

	Cost - sharing			
HIOS_ID	SP	Virtual SP	Α	V Input
33871PA0040002, 33871PA0120002	\$65	\$45	\$	64.00
33871PA0040014, 33871PA0120004	\$150	\$100	\$	147.50
Tier 1: 33871PA0040005, 33871PA0120005	\$40	\$30	\$	39.50
Tier 2: 33871PA0040005, 33871PA0120005	\$60	\$40	\$	59.00
Tier 3: 33871PA0040005, 33871PA0120005	\$80	\$55	\$	78.75
Tier 1: 33871PA0040006	\$90	\$65	\$	88.75
Tier 2: 33871PA0040006	\$140	\$100	\$	138.00
Tier 3: 33871PA0040006	\$150	\$105	\$	147.75
Tier 1: 33871PA0120007	\$80	\$55	\$	78.75
Tier 2: 33871PA0120007	\$120	\$80	\$	118.00
Tier 3: 33871PA0120007	\$140	\$95	\$	137.75
Tier 1: 33871PA0120008	\$90	\$60	\$	88.50
Tier 2: 33871PA0120008	\$140	\$100	\$	138.00
Tier 3: 33871PA0120008	\$150	\$105	\$	147.75
Tier 1: 33871PA0040010	\$90	\$60	\$	88.50
Tier 2: 33871PA0040010	\$120	\$80	\$	118.00
Tier 3: 33871PA0040010	\$140	\$95	\$	137.75
Tier 1: 33871PA0040016	\$100	\$70	\$	98.50
Tier 2: 33871PA0040016	\$120	\$80	\$	118.00
Tier 3: 33871PA0040016	\$140	\$95	\$	137.75
Tier 1: 33871PA0040006-04	\$90	\$65	\$	88.75
Tier 2: 33871PA0040006-04	\$140	\$100	\$	138.00
Tier 3: 33871PA0040006-04	\$150	\$105	\$	147.75
Tier 1: 33871PA0040006-05	\$40	\$30	\$	39.50
Tier 2: 33871PA0040006-05	\$60	\$40	\$	59.00
Tier 3: 33871PA0040006-05	\$80	\$55	\$	78.75
Tier 1: 33871PA0040006-06	\$15	\$10	\$	14.75
Tier 2: 33871PA0040006-06	\$20	\$15	\$	19.75
Tier 3: 33871PA0040006-06	\$40	\$30	\$	39.50
Tier 1: 33871PA0040010-04	\$90	\$60	\$	88.50
Tier 2: 33871PA0040010-04	\$120	\$80	\$	118.00
Tier 3: 33871PA0040010-04	\$140	\$95	\$	137.75

	Cost - sharing		
HIOS_ID	SP	Virtual SP	AV Input
Tier 1: 33871PA0040010-05	\$40	\$30	\$ 39.50
Tier 2: 33871PA0040010-05	\$60	\$40	\$ 59.00
Tier 3: 33871PA0040010-05	\$80	\$55	\$ 78.75
Tier 1: 33871PA0040010-06	\$15	\$10	\$ 14.75
Tier 2: 33871PA0040010-06	\$20	\$15	\$ 19.75
Tier 3: 33871PA0040010-06	\$40	\$30	\$ 39.50
Tier 1: 33871PA0040016-04	\$100	\$70	\$ 98.50
Tier 2: 33871PA0040016-04	\$120	\$80	\$ 118.00
Tier 3: 33871PA0040016-04	\$140	\$95	\$ 137.75
Tier 1: 33871PA0040016-05	\$40	\$30	\$ 39.50
Tier 2: 33871PA0040016-05	\$60	\$40	\$ 59.00
Tier 3: 33871PA0040016-05	\$80	\$55	\$ 78.75
Tier 1: 33871PA0040016-06	\$15	\$10	\$ 14.75
Tier 2: 33871PA0040016-06	\$20	\$15	\$ 19.75
Tier 3: 33871PA0040016-06	\$40	\$30	\$ 39.50
33871PA0040013	\$80	\$55	\$ 78.75
33871PA0040015	\$80	\$55	\$ 78.75
33871PA0040017	\$80	\$55	\$ 78.75
33871PA0040013-04	\$70	\$50	\$ 69.00
33871PA0040013-05	\$60	\$40	\$ 59.00
33871PA0040013-06	\$20	\$15	\$ 19.75
33871PA0040015-04	\$80	\$55	\$ 78.75
33871PA0040015-05	\$40	\$30	\$ 39.50
33871PA0040015-06	\$30	\$20	\$ 29.50
Tier 1: 33871PA0040018	\$100	\$70	\$ 98.50
Tier 2: 33871PA0040018	\$120	\$80	\$ 118.00
Tier 3: 33871PA0040018	\$140	\$95	\$ 137.75
Tier 1: 33871PA0040018-04	\$100	\$70	\$ 98.50
Tier 2: 33871PA0040018-04	\$120	\$80	\$ 118.00
Tier 3: 33871PA0040018-04	\$140	\$95	\$ 137.75
Tier 1: 33871PA0040018-05	\$40	\$30	\$ 39.50
Tier 2: 33871PA0040018-05	\$60	\$40	\$ 59.00
Tier 3: 33871PA0040018-05	\$80	\$55	\$ 78.75
Tier 1: 33871PA0040018-06	\$15	\$10	\$ 14.75
Tier 2: 33871PA0040018-06	\$20	\$15	\$ 19.75
Tier 3: 33871PA0040018-06	\$40	\$30	\$ 39.50

Combination of Copays and Coinsurance for IP Hospital

The copays for inpatient hospital facility claims were combined with the coinsurance on professional claims to calculate equivalent copays for inpatient claims.

First, we took the allowed PMPY inpatient costs and divided that by the utilization by admit PMPY to calculate the average cost per admit. We also took the utilization by day PMPY and divided that by the utilization by admit PMPY to calculate the average length of stay.

The average cost per admit was divided by the average length of stay to calculate the average cost per day. Based on our data, we assumed that 85% of the cost was from facility claims and the remaining 15% was from professional claims.

The professional coinsurance was multiplied by the professional portion of the daily inpatient cost to calculate equivalent daily copay for that piece. Because there is a 5-day maximum on our plans' inpatient copays, an effective copay factor was calculated by dividing the PMPY cost sharing from a \$100 per day inpatient copay with a 5-day maximum by the PMPY cost sharing from a \$100 per day inpatient copay without any maximum. The equivalent daily professional copay amount was then divided by this factor in order to determine the final professional copay reflecting a 5-day maximum.

The final professional copay was then added onto the facility copay in order to determine the equivalent overall IP hospital copay amount. The exhibit below shows this calculation.

					33871PA0040006,	33871PA0040006,
					33871PA0040006-04,	33871PA0040006-04,
					33871PA0120007,	33871PA0120007,
					33871PA0120008,	33871PA0120008,
					33871PA0040010,	33871PA0040010,
					33871PA0040010-04,	33871PA0040010-04,
	33871PA0040002,	33871PA0040014,	33871PA0040005,	33871PA0040005,	33871PA0040016,	33871PA0040016,
HIOS IDs	33871PA0120002	33871PA0120004	33871PA0120005	33871PA0120005	33871PA0040016-04,	33871PA0040016-04,
					33871PA0040018, 33871PA0040018-04	33871PA0040018, 33871PA0040018-04
IP Cost Sharing					3307 IT A0040018-04	330717 A0040010-04
Facility	\$750	\$700	\$700	\$1,100	\$900	\$1,300
Professional	20%	the state of the s				
AVC Continuance Table	Gold	Bronze	Gold	Gold	Silver	Silver
PMPY for IP	\$1,321	\$855	\$1,321	\$1,321	\$1,057	\$1,057
Admit PMPY	91,321 0.05	•				
Claim per Admit	\$27,080		\$27,080	\$27,080		
Average LOS (days)	\$27,080 1.6	·			·	
Effective Copay Factor for 5 days	0.41					
Assumption from Date						
Assumption from Data	950		0.70	0=0	,	
% Facility Cost % Professional Cost	85%					
% Professional Cost	15%	5 15%	15%	15%	5 15%	5 15%
Calculations						
Professional Claim per Admit	\$4,062	\$3,908	\$4,062	\$4,062	\$4,044	\$4,044
Professional Claim per Day	\$2,476	\$2,426	\$2,476	\$2,476	• •	
Equiv. Copay per Day no max	\$495	\$1,213	\$495	\$743	\$129	\$258
Equiv. Copay per Day, 5-day max	\$1,217	\$2,831	\$1,217	\$1,826	\$299	\$598
Total Copay per Day, 5-day max	\$1,967	\$3,531	\$1,917	\$2,926	\$1,199	\$1,898

	33871PA0040006-05,	33871PA0040006-05,	33871PA0040006-06,	33871PA0040006-06,
	33871PA0040010-05,	33871PA0040010-05,	33871PA0040010-06,	33871PA0040010-06,
HIOS IDs	33871PA0040016-05,	33871PA0040016-05,	33871PA0040016-06,	33871PA0040016-06,
	33871PA0040018-05	33871PA0040018-05	33871PA0040018-06	33871PA0040018-06
IP Cost Sharing				
Facility	\$5	00 \$	900 \$250	\$500
Professional		5%	10%	% 10%
AVC Continuance Table	Gold	Gold	Platinum	Platinum
PMPY for IP	\$1,3			
Admit PMPY			.05 0.05	
Claim per Admit	\$27,0	80 \$27,0	980 \$26,628	
Average LOS (days)		1.6	1.6	
Effective Copay Factor for 5 days	C	.41 (0.3	9 0.39
Assumption from Data				
% Facility Cost	8	5%	85% 859	% 85%
% Professional Cost	1	5% 1	15%	% 15%
Calculations				
Professional Claim per Admit	\$4,0	62 \$4,0	962 \$3,994	\$3,994
Professional Claim per Day	\$2,4	76 \$2,4	\$2,403	\$2,403
Equiv. Copay per Day no max	\$1	24 \$2	248 \$120	\$240
Equiv. Copay per Day, 5-day max	\$3	04 \$6	\$306	\$612
Total Copay per Day, 5-day max	\$8	04 \$1,5	\$556	\$1,112

Combination of Copays for Outpatient Facility Fee

For the outpatient facility site of service cost-sharing, our recent data indicated that 55% of outpatient facility utilization came from the hospital setting. The cost-sharing entered into the AV calculator is a blend of the copay in a hospital setting and the copay in an ambulatory surgery center.

		Cost-shar	ring	
HIOS ID	Service Type	ASC	Hospital	AV Input
33871PA0040002, 33871PA0120002	OP Fac.	\$300	\$700	\$520.00
33871PA0040017	OP Fac.	\$300	\$700	\$520.00
33871PA0040013	OP Fac.	\$400	\$800	\$620.00
33871PA0040014, 33871PA0120004	OP Fac.	\$750	\$1,000	\$887.50
33871PA0040013-04	OP Fac.	\$400	\$800	\$620.00
33871PA0040013-05	OP Fac.	\$200	\$400	\$310.00
33871PA0040013-06	OP Fac.	\$40	\$80	\$62.00

Combination of Cost-sharing for Outpatient Mental Health and Substance Abuse

For the outpatient mental health and substance abuse cost-sharing, our recent data indicated that 75% of outpatient mental health utilization came from office visits. The cost-sharing entered into the AV calculator is a blend of the cost-sharing for outpatient mental health office visits and the cost-sharing for all other outpatient mental health services.

	Cost - sharing			
	MH/SA MH/SA			
HIOS_ID	Office	Other	AV	Input
33871PA0040002,				
33871PA0120002	\$65	\$65	\$	65.00
33871PA0040005,				
33871PA0120005	\$40	\$40	\$	40.00
33871PA0040017	\$80	\$80	\$	80.00
33871PA0040013	\$80	\$80	\$	80.00
33871PA0040006	\$90	\$90	\$	90.00
33871PA0040010	\$90	\$90	\$	90.00
33871PA0040016	\$100	\$100	\$	100.00
33871PA0120008	\$90	\$90	\$	90.00
33871PA0120007	\$80	\$80	\$	80.00
33871PA0040014,				
33871PA0120004	\$150	\$150	\$	150.00
33871PA0040013-04	\$70	\$70	\$	70.00
33871PA0040013-05	\$60	\$60	\$	60.00
33871PA0040013-06	\$20	\$20	\$	20.00
33871PA0040006-04	\$90	\$90	\$	90.00
33871PA0040006-05	\$40	\$40	\$	40.00
33871PA0040006-06	\$15	\$15	\$	15.00
33871PA0040010-04	\$90	\$90	\$	90.00
33871PA0040010-05	\$40	\$40	\$	40.00
33871PA0040010-06	\$15	\$15	\$	15.00
33871PA0040016-04	\$100	\$100	\$	100.00
33871PA0040016-05	\$40	\$40	\$	40.00
33871PA0040016-06	\$15	\$15	\$	15.00
33871PA0040018	\$100	\$100	\$	100.00
33871PA0040018-04	\$100	\$100	\$	100.00
33871PA0040018-05	\$40	\$40	\$	40.00
33871PA0040018-06	\$15	\$15	\$	15.00
33871PA0040015	\$80	\$120	\$	90.00
33871PA0040015-04	\$80	\$120	\$	90.00
33871PA0040015-05	\$40	\$70	\$	47.50
33871PA0040015-06	\$30	\$30	\$	30.00

Generic Drugs Copay Differential

For generic drugs, our recent data indicated that 40% of utilization came from low-cost generic drugs. The cost-sharing entered into the AV calculator is a weighted average of copays based on utilization for low-cost generic drugs and normal generic drugs.

HIOS_ID	Low-Cost Generic Generic		AV	Input
33871PA0040002,				
33871PA0120002	\$3	\$20	\$	13.20
33871PA0040005,				
33871PA0120005	\$3	\$20	\$	13.20
33871PA0040017	\$3	\$20	\$	13.20
33871PA0040015	\$3	\$20	\$	13.20
33871PA0040013	\$3	\$20	\$	13.20
33871PA0040006	\$7	\$25	\$	17.80
33871PA0040010	\$5	\$20	\$	14.00
33871PA0040016	\$5	\$20	\$	14.00
33871PA0120008	\$5	\$25	\$	17.00
33871PA0120007	\$5	\$20	\$	14.00
33871PA0040014, 33871PA0120004	\$5	\$25	\$	17.00
33871PA0040013-04	\$3	\$15	\$	10.20
33871PA0040013-05	\$3	\$10	\$	7.20
33871PA0040013-06	\$3	\$4	\$	3.60
33871PA0040006-04	\$7	\$25	\$	17.80
33871PA0040006-05	\$3	\$10	\$	7.20
33871PA0040006-06	\$1	\$4	\$	2.80
33871PA0040010-04	\$5	\$20	\$	14.00
33871PA0040010-05	\$3	\$10	\$	7.20
33871PA0040010-06	\$1	\$4	\$	2.80
33871PA0040016-04	\$5	\$20	\$	14.00
33871PA0040016-05	\$3	\$10	\$	7.20
33871PA0040016-06	\$1	\$4	\$	2.80
33871PA0040015-04	\$3	\$15	\$	10.20
33871PA0040015-05	\$3	\$10	\$	7.20
33871PA0040015-06	\$3	\$4	\$	3.60
33871PA0040018	\$5	\$25	\$	17.00
33871PA0040018-04	\$5	\$20	\$	14.00
33871PA0040018-05	\$3	\$15	\$	10.20
33871PA0040018-06	\$1	\$10	\$	6.40

If the method described in 156.135(b)(3) was used, a description of the data and method used to develop the adjustments:

Using the AV calculator and the methods described above, we calculated the AV for each tier in each plan, as follows. Based on the average actual tier utilization experience over the past three years of data (2021, 2022, and 2023), we projected expected utilization by tier for the plans. The final AV for the plan was then calculated by taking the weighted average of the tier AVs using the utilization by tier. The following exhibits details this calculation.

Utilization	Tier 1	Tier 2	Tier 3	Total
33871PA0040005, 33871PA0120005,	45%	10%	45%	100%
33871PA0040006, 33871PA0120007, 33871PA0120008, 33871PA0040010, 33871PA0040016, 33871PA0040018	50%	10%	40%	100%

	Actuarial Value				
HIOS ID	Tier 1	Tier 2	Tier 3	Average	
33871PA0040005, 33871PA0120005	84.14%	79.46%	78.08%	80.95%	
33871PA0040006	73.16%	69.02%	68.59%	70.92%	
33871PA0040006-04	74.83%	71.57%	71.15%	73.03%	
33871PA0040006-05	89.24%	87.16%	86.57%	87.96%	
33871PA0040006-06	95.99%	93.25%	92.38%	94.27%	
33871PA0120007	72.28%	70.67%	69.86%	71.15%	
33871PA0120008	73.34%	69.06%	68.63%	71.03%	
33871PA0040010	71.58%	70.40%	69.66%	70.69%	
33871PA0040010-04	74.04%	72.99%	72.01%	73.12%	
33871PA0040010-05	88.61%	87.55%	86.98%	87.85%	
33871PA0040010-06	95.99%	93.25%	92.38%	94.27%	
33871PA0040016	70.95%	70.18%	69.37%	70.24%	
33871PA0040016-04	73.72%	73.14%	72.16%	73.04%	
33871PA0040016-05	88.60%	87.53%	86.96%	87.84%	
33871PA0040016-06	95.91%	93.23%	92.37%	94.23%	
33871PA0040018	70.92%	70.26%	69.34%	70.22%	
33871PA0040018-04	74.12%	73.42%	72.45%	73.38%	
33871PA0040018-05	88.70%	87.51%	86.95%	87.88%	
33871PA0040018-06	95.79%	94.43%	93.76%	94.84%	

Certification Language:

The development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for those benefits that deviate substantially from the parameters of the AV Calculator and have a material impact on the AV.

The analysis was

- (i) conducted by a member of the American Academy of Actuaries; and
- (ii) performed in accordance with generally accepted actuarial principles and methodologies.

I am an employee of the issuer, I meet the *Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States* promulgated by the American Academy of Actuaries, and I have the education and experience necessary to perform this work. All AVs herein were determined in accordance with the ASOPs established by the Actuarial Standards Board and comply with applicable laws and regulations; furthermore, all metal levels herein were appropriately assigned based on applicable law.

Actuary signs	ature:		
A -4 D-:	4. J.N		
Actuary Prin	ted Name:		
Date:	4/29/2024		

AV screenshots redacted.

A Reinsurance Morbidity Adjustment of 1.000 was used. An Individual Morbidity Adjustment of 1.000 was used.

No adjustment was made for the impact of COVID in the Experience Period that we do not expect to recur in the Projection Period.

The change in demographics was calculated considering changes to age, geography, and tobacco use.

The change in the average age was measured by comparing the average age factor calculated in this filing, based on February 2024 enrollments, to the average age factor calculated for the prior annual filing.

	2024	2025	
	Filing	Filing Ch	nange
Age Factor	1.712	1.697	0.991
Geographic Factor	1.000	1.000	1.000
Tobacco Factor	1.004	1.004	1.000
Total change			0.991

No changes were assumed for this filing.

The network factors used in Table 10 are based on the network differentials from the prior filing.

The network factor used for Keystone HMO was 1.100.

The network factor used for Proactive was 1.000.

The factors used in Table 10 recalibrate the values so that the differentials between the factors remains constant, and the composite factor equals 1.000.

Table 10 factors: HMO 1.076

Proactive 0.979

REDACTION JUSTIFICATION – KHPE CONSUMER

DOCUMENT

<u>URRT Part III – Federal Actuarial Memorandum</u>

Redacted Name of opining actuary (pages 8 and 9)
Redacted Company Contact Information (page 1) – name, telephone number, email address

PA Actuarial Memorandum

Redacted Name of opining actuary (pages 8 and 9)
Redacted Company Contact Information (page 1) – name, telephone number, email address

PA Actuarial Memo Rate Exhibits

Column C through E in Tabs "II.a. Reins Table – Exp" and "II.b. Reins Table – Proj" – confidential and proprietary information

Cover Letter

Redacted names and contact information (page 2)

AV Screenshots

Entire File Redacted

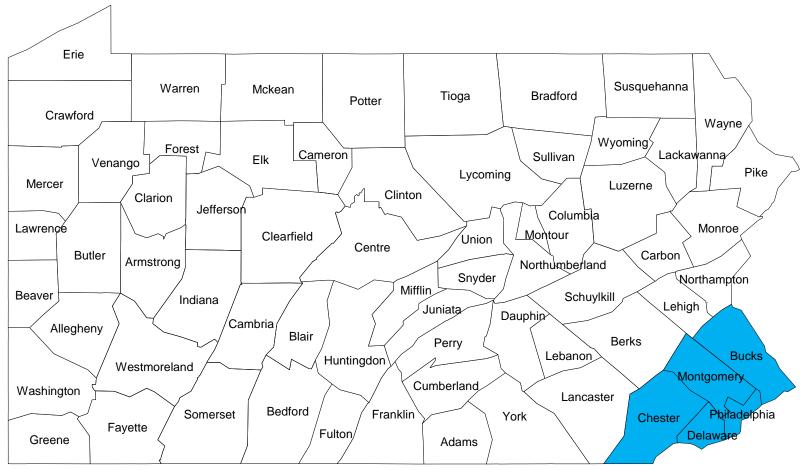
Unique AV Justification file

Redacted name of opining actuary (page 15) Redacted AV Screenshots (all)

2024 and 2025 Service Area

Issuer: Keystone Health Plan East

Market: Individual



Key (modify as needed)

: On-exchange service area

: Off-exchange only service area

Responses to Section E, Standard Questions

1. <u>Membership</u>: a. If the projected membership for plan year 2025 significantly differs from the current 2/1/2024 membership, please explain why.

We do not project that 2025 membership will differ significantly from the current membership.

2. <u>a. Experience Period Claims</u>: a. Please confirm that all claims which are capitated have been removed from the experience period claims.

We confirm that capitated claims have been removed.

b. Please confirm that all non-EHB claims have been removed from the experience period claims.

We confirm that non-EHB claims have been removed.

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?

We work with our PBM to forecast rx rebate increases from the base period to the rating period. These projected increases are fully reflected in the trend component of the rate development.

3. <u>COVID</u>: 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.

We confirm there is no COVID adjustment in Tables 2-4. No COVID adjustment was made in Table 5.

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.

N/A

b. [SG. Only] In Table 5A, if cells K32:M32 are left to equal J32, please explain why that is a reasonable assumption.

N/A

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.

We confirm that we used a Federal Income Tax rate of 21% in this 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.

We confirm that these factors are consistent.

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.

We confirm that the commission PMPM is consistent between the four options.

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).

We confirm that the Pricing AV's were calculated using a single risk pool.

b. Please identify and support any differences between the company's metallic AV calculator results and the corresponding Pricing AVs.

Metal AV is a national average AV which is not intended for pricing purposes per CMS Guidance (noted below). Please see attached model for Pricing AV calculation. The metal AV is based on the AV calculator which is calibrated to national average costs. The Philadelphia market is significantly more expensive than the national average from a cost of services standpoint. The same deductible or copay is worth significantly less as a percentage of total allowed cost in the Philadelphia market compared to the national average. This leads to different Pricing AVs for the same metal level.

Pricing based on local data should give a more accurate result than pricing using national data. Our pricing model is using data that is more aligned with of how members buying these plans in this area will use them than another model which relies on national data.

In addition, CMS continues to state that "the AV Calculator is intended to establish a comparison tool and was not developed for pricing purposes" in its Actuarial Calculator Methodology.

This is further supported by the Society of Actuaries paper, "A Summary of the 2020 Actuarial Value Calculator", which states " It is important to remember that the AV calculator was designed to determine if specific benefit designs meet the de minimis criteria and not for plan pricing."

7. Expanded Bronze Plans

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

Please see the attached "EBP" exhibit.

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.

The proposed geographic area rating factors shown in Tab V are the same as those used in the previous year.

b. Please provide quantitative and qualitative support for the proposed network factors, if different from the previous year.

The proposed network factors shown in Tab V are the same as those used in the previous year. Within Table 10, they are normalized using the membership in Table 10 to result in a composite factor of 1.000.

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. Pricing is the information which was projected in the final annual filing for the given year (i.e., 2021 pricing information is from the plan year 2021 annual filing submitted in 2020)
- 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. Pricing is the information which was projected in the final annual filing for the given year (i.e., 2020 pricing information is from the plan year 2020 annual filing submitted in 2019)

	N.	ILR	Mombo	Months
Calendar Year	Actual	Pricing	Actual	Pricing
2020	79.6%	84.5%	1,306,255	1,692,948
2021	76.8%	84.8%	1,349,656	1,395,000
2022	76.8%	84.5%	1,348,764	1,338,960

10. Plan of Withdrawal:

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

No withdrawals are proposed in this filing.

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.

There are no transitional plans.

12. Copay Adjustment Programs

a. Does the company use a copay adjustment program (also known as a copay accumulator program)?

Yes, IBX has copay card maximizer and accumulator adjustment programs in place.

b. How does the company handle copay assistance coupons? For example, does the coupon apply to the MOOP?

The manufacturer coupon programs are used to reduce/eliminate the member cost share and save on the cost of the medication. Because they are not an out of pocket expense for the member they do not count towards 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.

We reduced our pharmacy trend by 0.7%. This was based on guidance provided to us by our PBM rather than an internal study.

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

These plans satisfy the requirements by providing first dollar coverage (before deductible) as follows:

KHPEHIOS IDsPlan Marketing NameFDC Generic Rx

33871PA0120004, 33871PA0040014 Keystone HMO Bronze X

Completeness and Redaction Justification Checklist

Issuer Name: Keystone Health Plan East

Market: Individual HMO SERFF ID: INAC-134056069

			Redaction Justification		
TOC#	Description	Completed (Mark with "X")	Redacted (Y/N)	Page # in Public PDF	Justification submitted (Y/NA)
Federal Do	ocuments Required to Be Filed with PID				
	RFJ Part I - Unified Rate Review Template	Х			
A.2.	RFJ Part II – Consumer Friendly Justification				
	RFJ Part III – Actuarial Memorandum	Х	Υ	31-39	Υ
	Federal Rates Template	Х			
Summary	Documents/Confirmation of HIOS & SERFF Submissions				
A.2.B.	HIOS Submission	Х			
A.2.C.	SERFF Submission	X			
A.2.D.	SERFF Rate/Rule Schedule Tab	Х			
В.	Cover Letter & PA Bulletin Information	X			
	ial Memorandum and Rate Exhibits		,		
D.1.A.	Company Information	Х	Υ	4	Т
D.1.A.	Rate History & Proposed Variation in Rate Changes	X	N	5	N/A
D.1.C.	Average Rate Change	X	N	5	N/A
D.1.C.	Membership Count	X	N	5	N/A
D.1.D.	·				<u> </u>
	PA Act. Exhibits Table 1	X	N	13	N/A
D.1.E.	Benefit Changes	X	N	5	N/A
D.1.F.	Experience Period Claims & Premium	X	N	5-6	N/A
	PA Act. Exhibits Table 2	Х	N	13	N/A
D.1.G.	Credibility of Data	Х	N	7	N/A
	PA Act. Exhibits Tables 2b, 3b, 4b (if applicable)	X	N	14	N/A
D.1.H.	Trend Identification	X	N	7	N/A
	PA Act. Exhibits Table 3	X	N	13	N/A
D.1.I.	Historical Experience	Х	N	7	N/A
	PA Act. Exhibits Table 4	X	N	13	N/A
D.2.A.	Development of PAIR, MAIR and Total Allowed Claims	X	N	8-9	N/A
	PA Act. Exhibits Table 5	Х	N	17	N/A
D.2.B.	Retention Items	Х	N	9	N/A
	PA Act. Exhibits Table 6	Х	N	17	N/A
D.2.C.	Normalized Market-Adjusted Projected Allowed Total Claims	Х	N	10	N/A
	PA Act. Exhibits Table 7	Х	N	17	N/A
D.2.D.	Components of Rate Change	Х	N	10	N/A
	PA Act. Exhibits Table 8	Х	N	17	N/A
	PA Act. Exhibits Table 9	Х	N	17	N/A
D.3.	Plan Rate Development	Х	N	10	N/A
	PA Act. Exhibits Table 10	X	N	18	N/A
D.4.	Plan Premium Development for 21-Year-Old Non-Tobacco User	X	N	11	N/A
	PA Act. Exhibits Table 11	X	N	19-20	N/A
D.5.A.	Age and Tobacco Factors	X	N	11	N/A
	PA Act. Exhibits Table 12	X	N	21	N/A
		X		11	N/A
D.5.B.	Geographic Factors PA Act. Exhibits Table 13	X	N N		<u> </u>
			N	21	N/A
D.5.C.	Network Factors	X	N	11	N/A
	PA Act. Exhibits Table 14	X	N	21	N/A
D.5.D	Rate Change Request Summary	X	N	22	N/A
	PA Act. Exhibits Table 15	X	N	22	N/A
D.5.E.	Service Area Composition	X	N	11	N/A
D.5.F	Composite Rating	X	N	11	N/A
D.6.	Actuarial Certifications	X	Y	11-12	Υ
Additional			1	1	
E.	Department Plan Design Summary & Rate Tables	Х	N	24-26	N/A
	Service Area Map	Х	N	70	N/A
Summani	Documents/Confirmation of HIOS & SERFF Submissions	Х			Υ