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 request average rate change:	8.88%
Revised requested average rate change:[1]	8.88%
Range of requested:	7.79% to 9.29%
Effective date:	January 1, 2025
Mapped members:	123,281
Available in:	Rating Area 8

Key Information

Jan. 2023 – Dec. 2023 financial experience

Premiums	$784,161,634
Claims	$652,720,234
Administrative Expenses	$40,140,605
Taxes & Fees	$69,617,208
Insurer made (after taxes)	$21,683,588

How insurer plans to spend your premium

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 9.1%.

Explanation of Requested Rate Change:

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

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

1901 Market Street
Philadelphia, PA 19103-1480

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 50% coinsurance parameter for the reinsurance program.

The proposed rates represent an 8.8% increase over the previously approved 2024 rates.

Information for the Pennsylvania Bulletin:

1.	Company Name and NAIC Number:	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	8.8%
6.	Range of Rate Changes Requested	7.8% to 9.3%

Independence

7.	Total Annual Revenue Generated from the Proposed Rate Change	$67,488,457
8.	Products	HMO
9.	Rating Areas and Change from 2024	Rating Area 8 No Change from 2024
10.	Metal Levels and Catastrophic Plans	Gold, Silver, Bronze
11.	Current covered lives and policyholders as of February 1, 2024	123,281 lives
12.	Number of plans offered in 2025 and change from 2024	15 plans in 2025; 15 plans in 2024
13.	Corresponding contract form number, SERFF, and binder numbers	SERFF # INBC-134078704, INBC-PA25- 125118186 See appendix for form numbers
14.	HIOS Issuer ID # and submission tracking Number	HIOS Issuer ID # 33871; Filing # N/A

Please contact [redacted] at [redacted] or [redacted] with any questions regarding this filing.

Sincerely,

[redacted]

cc: [redacted]

Independence

APPENDIX

Form Numbers

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
PREV/SCH-II 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:	8.8%
Range of Rate Changes:	7.8% to 9.3%
Products:	HMO
Rating Areas:	Rating Area 8
Metal Levels:	Gold, Silver, Bronze
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:	[redacted]
Primary Contact Telephone Number:	[redacted]
Primary Contact Email Address:	[redacted]

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 8.8%. 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 8.8%.

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 2023 KHPE 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 12% 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; 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		0.67%
RA User Fee	0.05%	
PCORI Fee	0.07%	
PA Premium Tax	0.00%	
Federal Income Tax	0.53%	
Health Insurance Providers Fee	0.00%	
Profit/Contingency		2.00%

Total Retention	16.54%

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)	$469.34
Premium PMPM	$562.35
Quality Improvement Expense PMPM	$4.50
Exchange User Fee PMPM	$13.51
HIF PMPM	$0.00
Federal Income Tax PMPM	$2.99
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, [redacted],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.

[redacted]
May 15, 2024

PA Rate Template Part I

Data Relevant to the Rate Filing

Table 0. Identifying Information

Carrier Name:	Keystone Health Plan East		
ProductId:	HMO		
Market Segment:	Individual		
Rate Effective Date:	1/1/2025	to	12/31/2025
Base Period Start Date:	1/1/2023	to	12/31/2023
Date of Most Recent Membership:	2/1/2024		

Table 1. Number of Members

	Member-months Experience Period	Members Current Period (as of 02-01-2024)	Member-months Projected Rating Period
Average Age	42.1	41.7	41.7
Total	1,411,515	123,281	1,479,372
418	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
40-44	123,313	10,817	129,804
45-49	121,911	10,696	128,352
50-54	145,732	12,232	146,784
55-59	175,437	14,680	176,160
60-63	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	$ 563,726,448.05	$ 590,193,168.07	1,411,515	$ 107,782,639.36	$ 697,975,807.42	$ -	$ (67,019,690.78)	$ 157,549,815.59	$ 178,839.84	$ (41,829,325.82)	$ 28,181,898.95
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											$ 558.62
Loss Ratio											**83.24%**

**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%	6.80%		12.67%	17.59%
Outpatient Hospital	5.16%	6.80%		12.31%	21.23%
Professional	2.90%	6.80%		9.90%	23.16%
Other Medical	2.90%	6.80%		9.90%	0.00%
Capitation	3.51%	3.51%		3.51%	14.39%
Prescription Drugs	-0.97%	6.80%		5.76%	23.63%
Total Annual Trend				9.06%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.189	

** 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)	$ 51,298,949.58	$ 440.10
Feb-20		$ 37,390,884.50	1.0000	$ 37,390,884.50	112,043	$ 333.72		$ (3,145,459.18)	$ 42,982,713.47	$ 383.63
Mar-20		$ 34,668,964.36	1.0000	$ 34,668,964.36	110,936	$ 312.51		$ (3,114,610.12)	$ 39,070,343.27	$ 352.19
Apr-20		$ 31,641,371.58	1.0000	$ 31,641,371.58	110,267	$ 286.95		$ (3,412,031.38)	$ 33,316,533.97	$ 302.14
May-20		$ 32,984,549.87	1.0000	$ 32,984,549.87	110,282	$ 299.09		$ (3,412,100.21)	$ 35,202,660.34	$ 319.21
Jun-20		$ 38,486,944.82	1.0000	$ 38,486,944.82	109,198	$ 352.45		$ (3,378,542.75)	$ 41,682,584.47	$ 381.72
Jul-20		$ 41,322,632.71	1.0000	$ 41,322,632.71	108,625	$ 380.42		$ (3,657,736.22)	$ 44,415,351.51	$ 408.89
Aug-20		$ 41,783,354.81	1.0000	$ 41,783,354.81	107,898	$ 387.25		$ (3,633,171.27)	$ 44,602,669.66	$ 413.38
Sep-20		$ 42,342,304.42	1.0000	$ 42,342,304.42	107,154	$ 395.15		$ (3,607,887.27)	$ 45,304,154.17	$ 422.79
Oct-20		$ 44,360,607.16	1.0000	$ 44,360,607.16	106,172	$ 417.82		$ (3,841,481.30)	$ 47,235,782.85	$ 444.90
Nov-20		$ 43,468,833.61	1.0000	$ 43,468,833.61	104,503	$ 415.96		$ (3,781,160.27)	$ 45,887,583.59	$ 439.10
Dec-20	$ 797,737,191.41	$ 45,202,796.09	1.0000	$ 45,202,796.09	102,616	$ 440.50	$ 83,234,416.78	$ (3,712,851.30)	$ 47,622,402.49	$ 464.08
Jan-21		$ 38,865,702.33	1.0000	$ 38,865,702.33	108,979	$ 356.63		$ (3,721,966.70)	$ 44,502,030.27	$ 408.35
Feb-21		$ 38,078,437.57	1.0000	$ 38,078,437.57	111,005	$ 343.03		$ (3,790,436.97)	$ 42,301,599.28	$ 381.09
Mar-21		$ 49,889,141.53	1.0000	$ 49,889,141.53	110,252	$ 452.50		$ (3,764,981.34)	$ 55,195,462.41	$ 500.63
Apr-21		$ 46,799,334.82	1.0000	$ 46,799,334.82	110,338	$ 424.15		$ (4,135,520.37)	$ 50,890,711.57	$ 461.23
May-21		$ 42,762,006.40	1.0000	$ 42,762,006.40	111,047	$ 385.08		$ (4,162,195.09)	$ 45,948,490.50	$ 413.78
Jun-21		$ 46,479,187.74	1.0000	$ 46,479,187.74	112,196	$ 414.27		$ (4,205,040.39)	$ 50,074,940.85	$ 446.32
Jul-21		$ 46,845,514.25	1.0000	$ 46,845,514.25	113,596	$ 412.39		$ (4,315,959.05)	$ 49,613,189.07	$ 436.75
Aug-21		$ 50,700,618.52	1.0000	$ 50,700,618.52	114,875	$ 441.35		$ (4,364,419.24)	$ 53,232,869.14	$ 463.40
Sep-21		$ 51,552,019.12	1.0000	$ 51,552,019.12	115,555	$ 446.13		$ (4,390,206.05)	$ 53,697,201.95	$ 464.69
Oct-21		$ 51,435,567.91	1.0000	$ 51,435,567.91	115,048	$ 447.08		$ (4,446,996.84)	$ 53,594,511.23	$ 465.84
Nov-21		$ 52,424,352.32	1.0000	$ 52,424,352.32	114,038	$ 459.71		$ (4,407,894.59)	$ 54,258,970.32	$ 475.80
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)	$ 52,606,196.43	$ 466.67
Jan-22		$ 43,082,683.18	1.0000	$ 43,082,683.18	115,587	$ 372.73		$ (5,061,148.21)	$ 47,813,991.32	$ 413.53
Feb-22		$ 42,614,961.20	1.0000	$ 42,614,961.20	117,022	$ 364.16		$ (5,123,314.38)	$ 46,563,963.94	$ 397.91
Mar-22		$ 49,452,491.59	1.0000	$ 49,452,491.59	115,589	$ 427.83		$ (5,061,142.93)	$ 54,205,425.42	$ 468.95
Apr-22		$ 45,352,827.22	1.0000	$ 45,352,827.22	114,339	$ 396.65		$ (5,290,526.46)	$ 48,985,128.13	$ 428.42
May-22		$ 46,093,941.62	1.0000	$ 46,093,941.62	113,131	$ 407.44		$ (5,234,758.70)	$ 48,904,934.43	$ 432.29
Jun-22		$ 47,140,021.17	1.0000	$ 47,140,021.17	112,371	$ 419.50		$ (5,199,733.62)	$ 50,231,681.27	$ 447.02
Jul-22		$ 46,282,368.04	1.0000	$ 46,282,368.04	111,911	$ 413.56		$ (4,994,006.55)	$ 48,611,729.20	$ 434.38
Aug-22		$ 47,330,106.26	1.0000	$ 47,330,106.26	111,426	$ 424.77		$ (4,972,332.37)	$ 50,107,894.93	$ 449.70
Sep-22		$ 48,753,290.97	1.0000	$ 48,753,290.97	110,865	$ 439.75		$ (4,947,624.66)	$ 51,000,154.85	$ 460.02
Oct-22		$ 46,117,242.51	1.0000	$ 46,117,242.51	110,028	$ 419.14		$ (4,971,938.65)	$ 47,921,896.56	$ 435.54
Nov-22		$ 47,739,127.02	1.0000	$ 47,739,177.02	109,019	$ 437.90		$ (4,926,107.85)	$ 49,544,764.79	$ 454.46
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	$ 440.82
Jan-23		$ 45,291,009.02	1.0000	$ 45,291,009.02	114,158	$ 396.74		$ (5,250,333.50)	$ 51,183,635.33	$ 448.36
Feb-23		$ 43,465,864.79	0.9990	$ 43,510,814.37	118,333	$ 367.70		$ (5,442,492.30)	$ 47,597,139.34	$ 402.23
Mar-23		$ 50,168,998.38	0.9984	$ 50,247,101.95	117,574	$ 427.37		$ (5,408,769.38)	$ 55,237,992.93	$ 469.81
Apr-23		$ 44,447,269.56	0.9977	$ 44,548,640.34	116,873	$ 381.17		$ (5,542,117.96)	$ 47,909,133.28	$ 409.92
May-23		$ 50,139,606.40	0.9971	$ 50,284,768.42	116,145	$ 432.95		$ (5,508,192.78)	$ 54,352,736.30	$ 467.97
Jun-23		$ 47,276,777.19	0.9964	$ 47,445,946.34	116,206	$ 408.29		$ (5,511,404.88)	$ 51,045,771.40	$ 439.27
Jul-23		$ 47,589,197.00	0.9951	$ 47,822,823.10	117,012	$ 408.70		$ (5,584,946.26)	$ 50,465,370.72	$ 431.28
Aug-23		$ 50,666,167.09	0.9918	$ 51,082,273.78	117,609	$ 434.34		$ (5,615,267.43)	$ 54,085,817.48	$ 459.88
Sep-23		$ 50,681,414.52	0.9867	$ 51,364,767.21	118,603	$ 433.08		$ (5,663,336.60)	$ 53,764,092.26	$ 453.31
Oct-23		$ 45,474,443.56	0.9807	$ 46,367,227.31	118,805	$ 476.14		$ (5,778,827.27)	$ 59,273,694.23	$ 498.92
Nov-23		$ 51,140,945.22	0.9751	$ 52,447,168.54	120,133	$ 436.58		$ (5,848,760.86)	$ 54,561,122.82	$ 454.17
Dec-23	$ 825,990,960.28	$ 47,386,753.32	0.9557	$ 49,580,727.68	120,064	$ 412.95	$ 107,782,639.36	$ (5,865,241.49)	$ 51,479,610.14	$ 428.77

** Express Completion Factor as a percentage*

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

Carrier Name:	**Keystone Health Plan East**
Product(s):	**HMO**
Market Segment:	**Individual**
Rate Effective Date:	**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	$ 874,401,772.25	1,820,983	$ 180,766,807.68	$ 1,055,170,579.93	$ -	$ (98,291,013.11)	$ 158,658,877.37	$ 306,122.82	$ 2,529,366.21	$ 44,211,266.15
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											$ 612.61
Loss Ratio											79.96%

**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%	6.80%		12.67%	17.59%
Outpatient Hospital	5.16%	6.80%		12.31%	21.23%
Professional	2.90%	6.80%		9.90%	23.16%
Other Medical	2.90%	6.80%		9.90%	0.00%
Capitation				3.51%	14.39%
Prescription Drugs	-0.97%	6.80%		5.76%	23.63%
Total Annual Trend				9.06%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.189	

** 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		$ 61,577,299.90	1.0000	$ 61,577,299.90	157,551	$ 390.84		$ (4,719,110.48)	$ 76,373,842.39	$ 484.76
Feb-20		$ 56,129,918.94	1.0000	$ 56,129,918.94	152,258	$ 368.66		$ (4,564,295.08)	$ 67,373,751.10	$ 442.51
Mar-20		$ 52,382,927.18	1.0000	$ 52,382,927.18	150,593	$ 347.84		$ (4,513,914.25)	$ 60,761,233.65	$ 403.48
Apr-20		$ 47,998,694.64	1.0000	$ 47,998,694.64	149,728	$ 320.57		$ (4,923,972.89)	$ 51,333,492.86	$ 342.84
May-20		$ 49,683,997.30	1.0000	$ 49,683,997.30	149,621	$ 332.07		$ (4,919,170.91)	$ 54,036,580.08	$ 361.16
Jun-20		$ 57,600,159.37	1.0000	$ 57,600,159.37	148,292	$ 388.42		$ (4,876,301.41)	$ 63,655,962.53	$ 429.26
Jul-20		$ 61,195,049.25	1.0000	$ 61,195,049.25	147,512	$ 414.85		$ (5,228,424.90)	$ 67,129,329.09	$ 455.08
Aug-20		$ 61,087,674.79	1.0000	$ 61,087,674.79	146,747	$ 416.28		$ (5,202,283.72)	$ 66,586,274.19	$ 453.75
Sep-20		$ 63,337,076.72	1.0000	$ 63,337,076.72	145,817	$ 434.36		$ (5,169,717.00)	$ 69,153,421.85	$ 474.25
Oct-20		$ 66,397,404.60	1.0000	$ 66,397,404.60	144,459	$ 459.63		$ (5,547,714.56)	$ 71,937,717.49	$ 497.98
Nov-20		$ 65,025,717.57	1.0000	$ 65,025,717.57	142,273	$ 457.05		$ (5,464,139.93)	$ 69,578,179.74	$ 489.05
Dec-20	$ 1,100,254,427.85	$ 67,873,105.23	1.0000	$ 67,873,105.23	139,779	$ 485.58	$ 140,519,088.65	$ (5,369,022.64)	$ 72,390,069.40	$ 517.90
Jan-21		$ 55,605,291.82	1.0000	$ 55,605,291.82	149,540	$ 371.84		$ (5,177,075.95)	$ 67,768,892.00	$ 453.18
Feb-21		$ 54,806,468.81	1.0000	$ 54,806,468.81	152,680	$ 358.96		$ (5,285,149.47)	$ 64,449,253.88	$ 422.12
Mar-21		$ 71,754,704.61	1.0000	$ 71,754,704.61	151,689	$ 473.04		$ (5,251,235.53)	$ 82,871,292.45	$ 546.32
Apr-21		$ 68,143,682.43	1.0000	$ 68,143,682.43	151,931	$ 448.52		$ (5,788,220.14)	$ 76,925,500.85	$ 506.32
May-21		$ 65,189,970.17	1.0000	$ 65,189,970.17	152,725	$ 426.85		$ (5,817,521.29)	$ 72,396,646.19	$ 474.03
Jun-21		$ 69,710,918.28	1.0000	$ 69,710,918.28	153,662	$ 453.66		$ (5,852,339.55)	$ 77,333,527.67	$ 503.27
Jul-21		$ 67,650,477.52	1.0000	$ 67,650,477.52	154,912	$ 436.70		$ (6,038,221.27)	$ 73,952,259.74	$ 477.38
Aug-21		$ 73,586,320.11	1.0000	$ 73,586,320.11	156,221	$ 471.06		$ (6,087,318.17)	$ 79,701,551.56	$ 510.18
Sep-21		$ 74,264,376.64	1.0000	$ 74,264,376.64	157,388	$ 472.16		$ (6,128,998.83)	$ 79,567,390.29	$ 505.87
Oct-21		$ 75,848,290.10	1.0000	$ 75,848,290.10	156,586	$ 484.39		$ (6,302,747.17)	$ 80,910,834.50	$ 516.72
Nov-21		$ 76,681,852.34	1.0000	$ 76,681,852.34	155,470	$ 493.21		$ (6,258,979.73)	$ 81,366,559.80	$ 523.36
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	$ 520.84
Jan-22		$ 62,101,622.44	1.0000	$ 62,101,622.44	154,040	$ 403.15		$ (7,375,433.88)	$ 73,120,590.54	$ 474.69
Feb-22		$ 62,768,020.67	1.0000	$ 62,768,020.67	155,268	$ 404.26		$ (7,424,973.84)	$ 71,688,320.79	$ 461.71
Mar-22		$ 71,182,611.77	1.0000	$ 71,182,611.77	153,233	$ 464.54		$ (7,326,075.01)	$ 81,077,066.00	$ 529.11
Apr-22		$ 67,095,362.20	1.0000	$ 67,095,362.20	151,423	$ 443.10		$ (7,596,361.85)	$ 74,395,531.91	$ 491.32
May-22		$ 69,379,531.56	1.0000	$ 69,379,531.56	149,892	$ 462.86		$ (7,520,828.95)	$ 75,547,476.94	$ 504.01
Jun-22		$ 69,837,573.26	1.0000	$ 69,837,573.26	148,729	$ 469.56		$ (7,460,451.84)	$ 75,935,993.44	$ 510.57
Jul-22		$ 67,640,611.82	1.0000	$ 67,640,611.82	147,984	$ 457.06		$ (7,217,746.96)	$ 72,362,258.31	$ 489.00
Aug-22		$ 69,468,875.67	1.0000	$ 69,468,875.67	147,240	$ 471.81		$ (7,180,169.90)	$ 74,949,364.97	$ 509.03
Sep-22		$ 70,772,413.74	1.0000	$ 70,772,413.74	146,398	$ 483.43		$ (7,117,965.32)	$ 75,264,095.09	$ 514.11
Oct-22		$ 68,951,166.67	1.0000	$ 68,951,166.67	145,264	$ 474.66		$ (7,317,534.09)	$ 72,727,048.21	$ 500.83
Nov-22		$ 71,343,659.88	1.0000	$ 71,343,659.88	143,986	$ 495.49		$ (7,253,615.23)	$ 75,183,025.23	$ 522.16
Dec-22	$ 1,042,320,735.81	$ 69,892,524.36	1.0000	$ 69,892,524.36	142,988	$ 491.85	$ 163,091,481.60	$ (7,159,811.90)	$ 73,303,715.42	$ 515.90
Jan-23		$ 66,598,720.11	0.9988	$ 66,678,257.68	148,698	$ 448.41		$ (7,788,840.11)	$ 79,455,278.10	$ 534.34
Feb-23		$ 62,610,477.45	0.9983	$ 62,715,213.39	153,282	$ 409.15		$ (8,010,725.26)	$ 71,852,438.29	$ 468.76
Mar-23		$ 75,772,340.53	0.9968	$ 76,018,657.80	152,237	$ 499.34		$ (7,956,217.24)	$ 86,148,563.98	$ 565.88
Apr-23		$ 66,186,063.34	0.9965	$ 66,417,905.23	151,369	$ 438.78		$ (8,169,814.33)	$ 73,442,335.11	$ 485.19
May-23		$ 72,557,950.24	0.9964	$ 72,820,987.83	150,336	$ 484.39		$ (8,112,452.94)	$ 80,810,046.90	$ 537.53
Jun-23		$ 71,154,604.32	0.9939	$ 71,593,887.63	150,151	$ 476.81		$ (8,096,861.85)	$ 78,692,918.58	$ 524.09
Jul-23		$ 71,591,127.62	0.9924	$ 72,111,594.38	150,992	$ 477.59		$ (8,166,208.39)	$ 77,317,248.58	$ 512.06
Aug-23		$ 76,162,253.15	0.9902	$ 76,919,301.44	151,559	$ 507.55		$ (8,193,630.09)	$ 82,738,155.63	$ 545.95
Sep-23		$ 74,318,720.26	0.9859	$ 75,377,840.30	152,459	$ 494.41		$ (8,234,984.92)	$ 79,958,107.35	$ 524.46
Oct-23		$ 81,078,322.25	0.9813	$ 82,622,230.40	152,385	$ 542.19		$ (8,459,608.74)	$ 87,590,515.39	$ 574.80
Nov-23		$ 76,034,643.26	0.9738	$ 78,077,545.91	153,814	$ 507.64		$ (8,540,443.05)	$ 82,243,539.18	$ 534.69
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	$ 498.60

** 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**

Individual ACA Compliant Policies Only: Incurred Dates 1/1/2023 to 12/31/2023		
Annual Incurred Claims Range		**Total Incurred Claims with Reinsurance**
$0	$29,999	$495,633,941
$30,000	$34,999	$24,628,317
$35,000	$39,999	$20,884,334
$40,000	$44,999	$18,808,006
$45,000	$49,999	$16,293,279
$50,000	$54,999	$16,146,649
$55,000	$59,999	$15,550,246
$60,000	$64,999	$12,803,055
$65,000	$69,999	$11,662,640
$70,000	$74,999	$10,380,303
$75,000	$79,999	$8,774,994
$80,000	$84,999	$9,113,321
$85,000	$89,999	$7,816,578
$90,000	$94,999	$7,547,286
$95,000	$99,999	$5,677,415
$100,000	$109,999	$13,318,538
$110,000	$119,999	$14,385,370
$120,000	$129,999	$12,173,131
$130,000	$139,999	$10,234,081
$140,000	$149,999	$11,609,449
$150,000	$159,999	$10,097,588
$160,000	$169,999	$10,296,135
$170,000	$179,999	$9,278,742
$180,000	$189,999	$7,765,035
$190,000	$199,999	$8,593,881
$200,000	$209,999	$7,608,602
$210,000	$219,999	$6,849,271
$220,000	$229,999	$7,149,695
$230,000	$239,999	$6,691,616
$240,000	$249,999	$8,528,456
$250,000	$259,999	$4,472,895
$260,000	$269,999	$5,166,195
$270,000	$279,999	$5,102,752
$280,000	$289,999	$4,491,321
$290,000	$299,999	$4,110,774
$300,000	$324,999	$7,303,053
$325,000	$349,999	$7,929,306
$350,000	$374,999	$8,204,901
$375,000	$399,999	$8,048,494
$400,000	$424,999	$7,006,963
$425,000	$449,999	$3,778,524
$450,000	$474,999	$7,502,769
$475,000	$499,999	$6,068,350
$500,000	$599,999	$16,534,126
$600,000	$699,999	$11,903,668
$700,000	$799,999	$10,273,043
$800,000	$899,999	$6,638,983
$900,000	$999,999	$3,770,372
$1,000,000+		$40,920,616
Total		**$995,527,058**

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**

Reinsurance Program Impact Continuance Table Development - Plan Year 2025		
Annual Incurred Claims Range		**Total Incurred Claims with Reinsurance**
$0	$29,999	$578,253,930
$30,000	$34,999	$28,787,762
$35,000	$39,999	$27,358,131
$40,000	$44,999	$23,677,906
$45,000	$49,999	$19,985,406
$50,000	$54,999	$19,271,816
$55,000	$59,999	$17,342,200
$60,000	$64,999	$15,438,346
$65,000	$69,999	$15,174,905
$70,000	$74,999	$14,170,631
$75,000	$79,999	$11,622,470
$80,000	$84,999	$10,613,608
$85,000	$89,999	$10,917,317
$90,000	$94,999	$8,993,887
$95,000	$99,999	$7,383,999
$100,000	$109,999	$16,631,876
$110,000	$119,999	$14,410,686
$120,000	$129,999	$13,375,969
$130,000	$139,999	$14,283,410
$140,000	$149,999	$14,471,644
$150,000	$159,999	$13,674,047
$160,000	$169,999	$10,142,138
$170,000	$179,999	$11,490,298
$180,000	$189,999	$11,691,226
$190,000	$199,999	$10,297,252
$200,000	$209,999	$9,781,920
$210,000	$219,999	$11,090,695
$220,000	$229,999	$7,980,744
$230,000	$239,999	$8,384,458
$240,000	$249,999	$9,022,848
$250,000	$259,999	$7,542,943
$260,000	$269,999	$7,609,066
$270,000	$279,999	$7,415,657
$280,000	$289,999	$6,600,395
$290,000	$299,999	$6,620,747
$300,000	$324,999	$16,500,281
$325,000	$349,999	$13,980,767
$350,000	$374,999	$10,928,110
$375,000	$399,999	$7,725,735
$400,000	$424,999	$7,492,450
$425,000	$449,999	$7,883,214
$450,000	$474,999	$10,195,065
$475,000	$499,999	$5,601,417
$500,000	$599,999	$26,341,747
$600,000	$699,999	$23,316,951
$700,000	$799,999	$9,624,774
$800,000	$899,999	$10,685,723
$900,000	$999,999	$11,205,666
$1,000,000+		$64,566,394
Total		**$1,247,558,626**

PA Rate Template Part II
Rate Development and Change

Carrier Name: Keystone Health Plan East
Product(s): HMO
Market Segment: Individual
Rate Effective Date: 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	Actual Experience Data	Manual Data	
Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates) PMPM	$ 558.62	$ 612.61	<- Actual Experience PMPM should be consistent with the Index Rate for Experience Period on URRT
Two year trend projection factor	1.189	1.189	
Unadjusted Projected Allowed EHB Claims PMPM	$ 664.38	$ 728.58	
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	0.992	0.857	
Change in Demographics	0.989	0.990	<- See URRT Instructions
Change in Network	1.003	0.865	
Change in Benefits	1.000	1.000	<- See URRT Instructions
Change in Other	1.000	1.000	<- See URRT Instructions
Total Adjusted Projected Allowed EHB Claims PMPM	$ 658.87	$ 624.25	
Credibility Factors	8%	100%	<- See Instructions
Blended Projected EHB Claims PMPM		$ 624.25	<- Projected Index Rate
Development of the Market-Adjusted Index Rate and Total Allowed Claims			
Adjusted Projected Allowed EHB Claims PMPM	$ 624.25	<- Index Rate for Projection Period on URRT	
Projected Paid to Allowed Ratio	0.739		
Projected Incurred EHB Claims PMPM	$ 461.43		
Market-wide Adjustments			
Projected Incurred Risk Adjustment PMPM	$ (10.82)		
Projected Incurred Exchange User Fees PMPM	$13.51		
Projected Incurred Reinsurance Recoveries PMPM	$17.21		
Market-Adjusted Projected Incurred EHB Claims PMPM	$ 468.55		
Market-Adjusted Projected Allowed EHB Claims PMPM	$ 633.89	<- Market-Adjusted Index Rate	
Projected Allowed Non-EHB Claims PMPM	$ 0.13		
Catastrophic Eligibility Adjustment	1.000		
Market-Adjusted Projected Incurred Total Claims PMPM	468.6472261		
Market-Adjusted Projected Allowed Total Claims PMPM	$ 634.02		

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	79.90%	

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	$ 624.25	$ 624.25	$ 624.25	$ 624.25	$ 624.25
Months of Trend	-	3	6	9	
Annual Trend	9.06%	9.06%	9.06%	9.06%	
Single Risk Pool Projected Allowed Claims	$ 624.25	$ 637.93	$ 651.91	$ 666.19	$ -
Quarterly Trend Factor	1.000	1.022	1.044	1.067	0.000

Table 6. Retention

Retention Items - *Express in percentages*	Percentages	PMPM Amounts
Administrative Expenses	13.87%	$77.89
General and Claims	11.12%	$62.44
Agent/Broker Fees and Commissions	1.95%	$10.96
Quality Improvement Initiatives	0.80%	$4.49
Taxes and Fees	0.67%	$3.75
Risk Adjustment User Fee	0.05%	$0.31
PCORI Fee	0.08%	$0.46
PA Premium & Other Taxes (if applicable)	0.00%	$0.00
Federal Income Tax	0.53%	$2.99
Health Insurance Providers Fee (Prorated for Small Groups only)	0.00%	$0.00
Profit/Contingency (after tax)	2.00%	$11.23
Total Retention	16.54%	$92.87
Projected Required Revenue PMPM	$ 561.52	

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2024	2025
Average Age Factor	1.712	1.697
Average Geographic Factor	1.000	1.000
Average Tobacco Factor	1.004	1.004
Average Benefit Richness (induced demand)	1.000	1.000
Average Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	$ 592.49	$ 634.02
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	$ 344.50	$ 372.01

Table 8. Components of Rate Change

Rate Components	2024	2025	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	$ 303.19	$ 329.96	$ 26.77	8.8%
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	$ 68.05	$ 7.03	2.3%
D3. URRT Morbidity	$ -	$ -	$ -	0.0%
D4. URRT Other	$ (52.94)	$ (61.21)	$ (8.28)	-2.7%
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)	$ (13.66)	$ 1.17	0.4%
D8. Subtotal - Sum(D1:D7)	$ 344.42	$ 371.93	$ 27.52	9.1%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	$ -	$ -	$ -	0.0%
E2. Pricing AV	$ (85.91)	$ (97.01)	$ (11.10)	-3.7%
E3. Benefit Richness	$ -	$ -	$ -	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)	$ (96.95)	$ (11.10)	-3.7%
F. Change in Retention Components				
F1. Administrative Expenses	$ 41.52	$ 45.77	$ 4.25	1.4%
F2. Taxes and Fees	$ 1.86	$ 2.20	$ 0.35	0.1%
F3. Profit and/or Contingency	$ 6.06	$ 6.60	$ 0.54	0.2%
F4. Subtotal - Sum(F1:F3)	$ 49.44	$ 54.57	$ 5.13	1.7%
G. Change in Miscellaneous Items	$ -	$ -	$ -	0.0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	$ 308.01	$ 329.55	$ 21.54	7.1%

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	1.189	<- URRT W1, S2
URRT Morbidity	1.000	1.000	<- URRT W1, S2
URRT "Other"	0.866	0.857	<- 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	$ 17.21	<- 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 Adjustme
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%	0.67%	
Profit and/or Contingency	2.00%	2.00%	

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PA Rate Template Part III
Table 10. Plan Rates

Carrier Name:	Keystone Health Plan East
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2025
Base Period Start Date	1/1/2023
Date of Most Recent Membership:	2/1/2024
Market Adjusted Index Rate:	$ 633.89

Calibration	
Age Calibration Factor	1.697
Geographic Calibration Factor	1.000
Tobacco Calibration Factor	1.004
Aggregate Calibration Factor	1.704

Total Covered Lives @ 02-01-2024
123,281

										45 CFR Part 156.8 (d) (2) Allowable Factors																02-01-2024 Number of Covered Lives by Rating Area											
Plan Number	HIOS Plan ID (Standard Component)	Product Type (HMO, POS, PPO, EPO, Indemnity, Other)	1/1/2024 Plan Marketing Name	Existing, Modified, New, Discontinued & Mapped, Discontinued & Not Mapped (E,M,N,DM, DNM) for 2025	1/1/2025 HIOS Plan ID (If 1/1/2024 Plan Discontinued & Mapped)	Metallic Tier	Metallic Tier Actuarial Value	Standard AV, Approach (1), Approach (2)	Exchange On/Off or Off	Pricing AV (company-determined AV)	Benefit Richness (induced demand)	Benefits in addition to EHB	Provider Network	Catastrophic Eligibility	Non-Funding of CSR Adjustment	Pure Premium	Admin Costs	Taxes & Fees (not including Exchange fees)	Profit or Contingency	Total Covered Lives Mapped into 2025 Plans @ 02-01-2024	Total Projected Lives	2024 Calibrated Plan Adjusted Index Rate PMPM	2025 Calibrated Plan Adjusted Index Rate PMPM	Proposed Rate Change Compared to Prior 12 months	% of Total Covered Lives	1	2	3	4	5	6	7	8	9	Total	2025 Continued/ Discontinued Plans Indicator	De Minimis Check
Totals - Current Membership							0.701			0.739	1.000	1.000	1.000	1.000	1.133	$ 469.34	13.9%	0.7%	2.0%	123,281	123,281	$ 303.19	$ 329.96	8.8%		-	-	-	-	-	-	-	#######	-	123,281		
Total - Projected Membership							0.701			0.739	1.000	1.000	1.000	1.000	1.133	$ 469.34	13.9%	0.7%	2.0%																		
Transitional Plan(s)	TRANSITIONAL	N/A	TRANSITIONAL	DNM	TRANSITIONAL	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	-		N/A	N/A	N/A	N/A										-	0	
Plan 1	33871PA0040002	HMO	Keystone HMO Gold	E	0	Gold	0.8010321	Approach 1	On/Off	0.936	1.113	1.000	1.076	1.000	1.000	$711.18	13.9%	0.7%	2.0%	582	582	$ 462.84	$ 499.98	7.8%	0.5%								582		582	1	yes
Plan 2	33871PA0040005	HMO	Keystone HMO Gold Proactive	E	0	Gold	0.8094786	Approach 2	On/Off	0.940	1.116	1.000	0.979	1.000	1.000	$650.58	13.9%	0.7%	2.0%	4,202	4,202	$ 423.53	$ 457.37	8.0%	3.4%								4,202		4,202	1	yes
Plan 3	33871PA0040006	HMO	Keystone HMO Silver Proactive	E	0	Silver	0.709189	Approach 2	On/Off	0.696	1.049	1.000	0.979	1.000	1.220	$552.67	13.9%	0.7%	2.0%	17,584	17,584	$ 357.77	$ 388.54	8.6%	14.3%								17,584		17,584	1	yes
Plan 4	33871PA0040010	HMO	Keystone HMO Silver Proactive Lite	E	0	Silver	0.7069433	Approach 2	On/Off	0.692	1.046	1.000	0.979	1.000	1.220	$547.62	13.9%	0.7%	2.0%	4,678	4,678	$ 353.91	$ 384.99	8.8%	3.8%								4,678		4,678	1	yes
Plan 5	33871PA0040013	HMO	Keystone HMO Silver Classic	E	0	Silver	0.7007782	Approach 1	On/Off	0.718	1.068	1.000	1.076	1.000	1.220	$638.41	13.9%	0.7%	2.0%	125	125	$ 411.91	$ 448.81	9.0%	0.1%								125		125	1	yes
Plan 6	33871PA0040014	HMO	Keystone HMO Bronze	E	0	Expanded B	0.638079	Approach 2	On/Off	0.531	0.935	1.000	1.076	1.000	1.000	$338.80	13.9%	0.7%	2.0%	16,323	16,323	$ 218.86	$ 238.19	8.8%	13.2%								16,323		16,323	1	yes
Plan 7	33871PA0040015	HMO	Keystone HMO Silver Basic	E	0	Silver	0.7005567	Approach 1	On/Off	0.619	0.996	1.000	1.076	1.000	1.220	$513.35	13.9%	0.7%	2.0%	1,472	1,472	$ 332.00	$ 360.90	8.7%	1.2%								1,472		1,472	1	yes
Plan 8	33871PA0040016	HMO	Keystone HMO Silver Proactive Basic	E	0	Silver	0.7024208	Approach 2	On/Off	0.633	1.004	1.000	0.979	1.000	1.220	$480.66	13.9%	0.7%	2.0%	18,986	18,986	$ 310.29	$ 337.92	8.9%	15.4%								18,986		18,986	1	yes
Plan 9	33871PA0040017	HMO	Keystone HMO Gold Classic	E	0	Gold	0.7814785	Approach 1	On/Off	0.827	1.035	1.000	1.076	1.000	1.000	$583.62	13.9%	0.7%	2.0%	1,719	1,719	$ 378.83	$ 410.30	8.3%	1.4%								1,719		1,719	1	yes
Plan 10	33871PA0040018	HMO	Keystone HMO Silver Proactive Essential	E	0	Silver	0.70221	Approach 2	On/Off	0.613	0.983	1.000	0.979	1.000	1.220	$460.20	13.9%	0.7%	2.0%	31,865	31,865	$ 296.04	$ 323.53	9.3%	25.8%								31,865		31,865	1	yes
Plan 11	33871PA0120002	HMO	Keystone HMO Gold	E	0	Gold	0.8010321	Approach 1	Off	0.936	1.113	1.001	1.076	1.000	1.000	$711.18	13.9%	0.7%	2.0%	837	837	$ 462.84	$ 499.98	7.8%	0.7%								837		837	1	yes
Plan 12	33871PA0120004	HMO	Keystone HMO Bronze	E	0	Expanded B	0.638079	Approach 1	Off	0.531	0.935	1.001	1.076	1.000	1.000	$338.81	13.9%	0.7%	2.0%	5,994	5,994	$ 218.86	$ 238.19	8.8%	4.9%								5,994		5,994	1	yes
Plan 13	33871PA0120005	HMO	Keystone HMO Gold Proactive	E	0	Gold	0.8094786	Approach 2	Off	0.939	1.116	1.001	0.979	1.000	1.000	$650.58	13.9%	0.7%	2.0%	1,930	1,930	$ 423.53	$ 457.37	8.0%	1.6%								1,930		1,930	1	yes
Plan 14	33871PA0120007	HMO	Keystone HMO Silver Proactive Value	E	0	Silver	0.7115046	Approach 2	Off	0.701	0.972	1.001	0.979	1.000	1.000	$423.07	13.9%	0.7%	2.0%	10,706	10,706	$ 273.12	$ 297.43	8.9%	8.7%								10,706		10,706	1	yes
Plan 15	33871PA0120008	HMO	Keystone HMO Silver Proactive Select	E	0	Silver	0.7102918	Approach 2	Off	0.742	0.989	1.001	0.979	1.000	1.000	$455.98	13.9%	0.7%	2.0%	6,278	6,278	$ 294.83	$ 320.57	8.7%	5.1%								6,278		6,278	1	yes
Plan 16																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 17																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 18																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 19																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 20																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 21																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 22																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 23																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 24																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 25																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 26																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 27																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 28																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 29																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 30																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 31																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 32																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 33																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 34																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 35																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 36																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 37																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 38																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 39																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 40																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 41																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 42																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 43																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 44																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 45																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 46																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 47																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 48																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 49																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 50																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 51																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 52																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 53																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 54																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 55																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 56																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 57																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 58																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 59																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 60																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 61																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 62																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 63																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 64																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 65																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 66																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 67																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 68																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 69																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 70																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 71																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 72																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 73																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 74																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 75																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 76																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 77																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 78																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 79																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 80																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 81																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 82																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 83																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 84																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 85																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 86																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 87																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 88																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 89																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 90																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 91																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 92																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 93																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 94																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 95																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 96																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 97																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 98																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 99																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 100																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 101																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 102																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 103																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 104																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 105																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 106																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 107																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 108																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 109																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 110																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 111																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 112																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 113																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 114																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 115																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 116																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 117																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 118																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 119																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 120																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 121																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 122																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 123																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 124																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 125																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 126																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 127																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 128																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 129																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 130																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 131																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 132																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 133																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 134																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 135																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 136																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 137																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 138																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 139																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 140																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 141																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 142																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 143																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 144																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 145																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 146																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 147																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 148																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 149																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 150																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 151																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 152																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 153																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 154																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 155																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 156																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 157																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 158																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 159																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 160																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 161																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 162																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 163																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 164																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 165																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 166																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 167																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 168																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 169																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 170																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 171																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 172																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 173																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 174																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 175																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 176																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 177																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 178																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 179																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 180																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 181																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 182																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 183																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 184																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 185																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 186																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 187																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 188																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 189																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 190																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 191																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 192																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 193																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 194																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 195																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 196																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 197																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 198																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 199																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 200																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 201																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 202																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 203																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 204																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 205																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 206																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 207																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 208																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 209																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 210																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 211																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 212																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 213																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 214																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 215																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 216																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 217																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 218																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 219																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 220																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 221																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 222																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 223																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 224																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 225																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 226																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 227																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 228																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 229																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 230																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 231																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 232																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 233																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 234																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 235																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 236																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 237																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 238																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 239																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 240																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 241																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 242																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 243																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 244																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 245																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 246																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 247																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 248																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 249																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 250																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 251																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 252																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 253																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 254																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 255																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 256																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 257																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 258																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 259																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 260																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 261																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 262																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 263																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 264																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 265																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 266																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 267																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 268																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 269																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 270																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 271																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 272																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 273																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 274																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 275																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 276																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 277																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 278																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 279																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 280																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 281																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 282																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 283																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 284																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 285																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 286																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 287																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 288																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 289																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 290																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 291																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 292																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 293																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 294																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 295																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 296																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 297																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 298																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 299																$0.00				-			$ -	0.0%	0.0%										-	0	
Plan 300																$0.00				-			$ -	0.0%	0.0%										-	0	

PA Rate Template Part IV A - Individual

Table 11 Plan Premium Development for 21-Year-Old Non-Tobacco User

Issue Age	21
Gender	Male
Risk Class	Non-Tobacco
Policy Form	ABC
Plan Name	Plan A
Underwriting Class	Non-Tobacco
Face Amount	$100,000

Plan Number	Plan Year (in Issue Age Attained Years)	Guaranteed Annual Premium	Guaranteed Annual Premium Including Policy Fee	Guaranteed Annual Premium Including Policy Fee and Rider Premiums	Policy Fee	Rider Premiums
	1					
	2					
	3					
	4					
	5					
	6					
	7					
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	120					

Minimum Non-Forfeiture Values (Guaranteed Values)

Plan Number	Plan Year (in Issue Age Attained Years)	Minimum Cash Surrender Value	Minimum Paid-Up Benefit	Minimum Extended Term Benefit	Minimum Reduced Paid-Up Benefit
	1				
	2				
	3				
	4				
	5				
	6				
	7				
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	117				
	118				
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	120				

Minimum Cash Surrender Values (Guaranteed Values)

Plan Number	Plan Year (in Issue Age Attained Years)	Minimum Cash Surrender Value
	1	
	2	
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Minimum Paid-Up Values (Guaranteed Values)

Plan Number	Plan Year (in Issue Age Attained Years)	Minimum Paid-Up Benefit
	1	
	2	
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	6	
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Minimum Extended Term Values (Guaranteed Values)

Plan Number	Plan Year (in Issue Age Attained Years)	Minimum Extended Term Benefit
	1	
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Minimum Reduced Paid-Up Values (Guaranteed Values)

Plan Number	Plan Year (in Issue Age Attained Years)	Minimum Reduced Paid-Up Benefit
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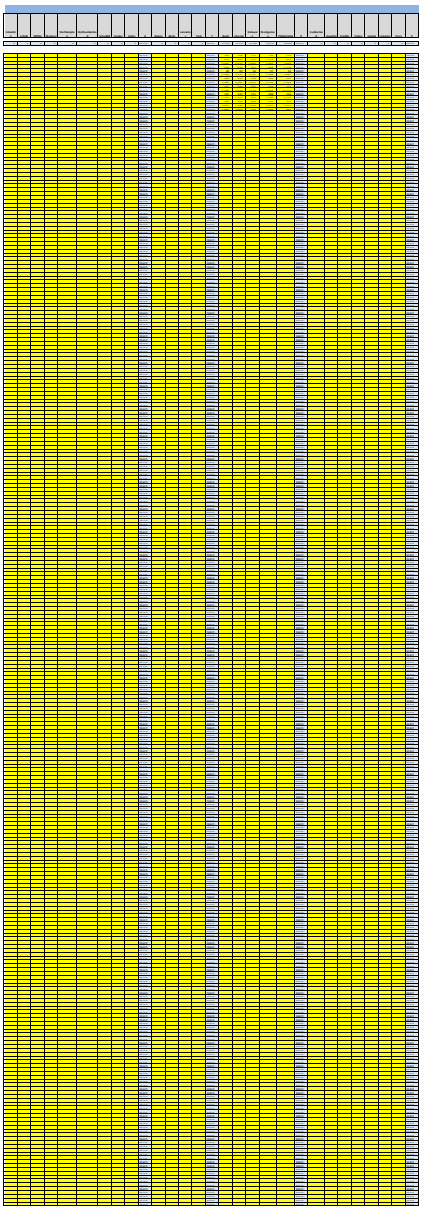

PA Rate Quarterly Template Part V
Consumer Factors

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

Table 12. Age and Tobacco Factors

Projection Period Age and Tobacco Factors						
Age Band	Age Factor	Tobacco Factor		Age Band	Age Factor	Tobacco 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.

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	1.100	3/11/1987
Proactive	Rating Area 8	1.000	1.000	8/12/2013

PA Rate Template Part VI - Rate Change Summary

Table 15. Rate Change Summary Information

Overview

Initial Requested Average Rate Change:	8.83%
Revised Requested Average Rate Change:	8.83%
Minimum Requested Rate Change:	7.79%
Maximum Requested Rate Change:	9.29%
Mapped Members:	123,281
Available in Rating Areas:	Rating Area 8

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

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	1	8
9		0	

Key Information

Jan. 2023 - Dec. 2023 Financial Experience

Premium	$	784,161,634.46
Claims	$	652,720,233.85
Administrative Expenses	$	40,140,605.00
Taxes & Fees	$	69,617,208.00
Company Made After Taxes	$	21,683,587.61

How It Plans to Spend Your Premium

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

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

The company expects its annual medical costs to increase: 9.06%

Explanation of requested rate change: Premium rates for health care insurance are increasing as the cost of health care service rise.

Table 16. Risk Adjustment Calculation			
Component	**Statewide**	**Insurer Specific**	
State Average Monthly Premium Before Adjustment	$700.12		
Administrative Cost Adjustment	0.86		
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 implies payer of RA
Insurer Specific Manual Adjustment PMPM			<-- Please provide explanation and calculation if value provided.
High Cost Risk Pool Adjustment PMPM			
Total Risk Adjustment Transfer		(10.82)	

Company Name: Keystone Health Plan East, Inc
Market: Individual
Product: HMO
Effective Date of Rates: January 1, 2025
Endine date of Rates: December 31, 2025

HIOS Plan ID (On Exchange)=>	33871PA0040002		33871PA0040005		33871PA0040006		33871PA0040010		33871PA0040013		33871PA0040014		33871PA0040015		33871PA0040016		33871PA0040017		33871PA0040018		33871PA0120002		33871PA0120004		33871PA0120005		33871PA0120007		33871PA0120008	
HIOS Plan ID (Off Exchange)=>																														
Plan Marketing Name =>	Keystone HMO Gold		Keystone HMO Gold Proactive		Keystone HMO Silver Proactive		Keystone HMO Silver Proactive C		Keystone HMO Silver Classic		Keystone HMO Bronze		Keystone HMO Silver Basic		ystone HMO Silver Proactive Bi		Keystone HMO Gold Classic		Sone HMO Silver Proactive Exce		Keystone HMO Gold		Keystone HMO Bronze		Keystone HMO Gold Proactive		Keystone HMO Silver Proactive		Keystone HMO Silver Proactive Se
Form # =>	RE 650 IND FC EXC-ON Rev. 1.20		E 650 IND FTC EXC-ON Rev. 1.20		E 650 IND FTDED EXC-ON Rev. 1.20		E 650 IND FTDED EXC-ON Rev. 1.20		E 650 IND FDED EXC-ON Rev. 1.20		E 650 IND FDED EXC-ON Rev. 1.20		E 650 IND FDED EXC-ON Rev. 1.20		E 650 IND FTDED EXC-ON Rev. 1.20		E 650 IND FTDED EXC-ON Rev. 1.20		E 650 IND FTDED EXC-ON Rev. 1.20		E 650 IND FTDED EXC-ON Rev. 1.20		E 650 IND FC EXC-OFF Rev. 1.20		E 650 IND FDED EXC-OFF Rev. 1.20		E 650 IND FTC EXC-OFF Rev. 1.20		E 650 IND FTDED EXC-OFF Rev. 1.20		E 650 IND FTDED EXC-OFF II Rev.
Rating Area =>	8		8		8		8		8		8		8		8		8		8		8		8		8		8		8	
Network =>	KHPE Network		Proactive Network		Proactive Network		Proactive Network		KHPE Network		KHPE Network		KHPE Network		Proactive Network		Proactive Network		Proactive Network		KHPE Network		KHPE Network		Proactive Network		Proactive Network		Proactive Network	
Metal =>	Gold		Gold		Silver		Silver		Silver		Expanded Bronze		Silver		Silver		Gold		Silver		Gold		Expanded Bronze		Gold		Silver		Silver	
Deductible =>	$0		$0		$0/$6000/$6000		$200/$6000/$6000		$3,500		$8,500		$5,500		$250/$7500/$7500		$500		$500/$8000/$8000		$0		$8,500		$0		$1500/$6000/$6000		$0/$6000/$6000	
Coinsurance =>	20%		0%/20%/30%		0%/5%/10%		0%/5%/10%		30%		50%		50%		0%/5%/10%		20%		0%/5%/10%		20%		50%		0%/20%/30%		0%/5%/10%		0%/5%/10%	
Copays =>	$15/$65		$15/$40, $30/$60, $45/$80		$0, $70/$140 no ded, $80/$150		o ded, $60/$120 no ded, $70/$		$35/$80		$75/$150		$35/$80		no ded, $40/$120 no ded, $70/$		$40 no ded, $80 no ded		no ded, $40/$120 no ded, $70/$		$35/$65		$75/$150		$15/$40, $30/$60, $45/$80		$0, $60/$120 no ded, $70/$140 no		$0, $70/$140 no ded, $80/$150	
OOP Maximum =>	$8,000		$9,200		$9,200		$9,200		$8,500		$9,200		$8,500		$9,200		$8,000		$9,200		$8,000		$9,200		$9,200		$9,200		$9,200	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	$182.48	$182.48	$149.89	$149.89	$297.23	$297.23	$294.52	$294.52	$343.34	$343.34	$182.22	$182.22	$276.09	$276.09	$258.51	$258.51	$313.88	$313.88	$247.50	$247.50	$382.48	$382.48	$182.22	$182.22	$349.89	$349.89	$227.53	$227.53	$245.24	$245.24
15	$416.48	$416.48	$380.99	$380.99	$323.65	$323.65	$320.70	$320.70	$373.85	$373.85	$198.41	$198.41	$300.63	$300.63	$281.49	$281.49	$341.78	$341.78	$269.50	$269.50	$416.48	$416.48	$198.41	$198.41	$380.99	$380.99	$247.76	$247.76	$267.03	$267.03
16	$429.48	$429.48	$392.88	$392.88	$333.76	$333.76	$330.71	$330.71	$385.53	$385.53	$204.61	$204.61	$310.01	$310.01	$290.27	$290.27	$352.45	$352.45	$277.91	$277.91	$429.48	$429.48	$204.61	$204.61	$392.88	$392.88	$255.49	$255.49	$275.37	$275.37
17	$442.48	$442.48	$404.77	$404.77	$343.86	$343.86	$340.72	$340.72	$397.20	$397.20	$210.80	$210.80	$319.40	$319.40	$299.06	$299.06	$363.12	$363.12	$286.32	$286.32	$442.48	$442.48	$210.80	$210.80	$404.77	$404.77	$263.23	$263.23	$283.70	$283.70
18	$456.48	$456.48	$417.58	$417.58	$354.74	$354.74	$351.50	$351.50	$409.76	$409.76	$217.47	$217.47	$329.50	$329.50	$308.52	$308.52	$374.60	$374.60	$295.38	$295.38	$456.48	$456.48	$217.47	$217.47	$417.58	$417.58	$271.55	$271.55	$292.68	$292.68
19	$470.48	$470.48	$430.39	$430.39	$365.62	$365.62	$362.28	$362.28	$422.33	$422.33	$224.14	$224.14	$339.61	$339.61	$317.98	$317.98	$386.09	$386.09	$304.44	$304.44	$470.48	$470.48	$224.14	$224.14	$430.39	$430.39	$279.88	$279.88	$301.66	$301.66
20	$484.98	$484.98	$443.65	$443.65	$376.88	$376.88	$373.44	$373.44	$435.35	$435.35	$231.04	$231.04	$350.07	$350.07	$327.78	$327.78	$397.99	$397.99	$313.82	$313.82	$484.98	$484.98	$231.04	$231.04	$443.65	$443.65	$288.51	$288.51	$310.95	$310.95
21	$499.98	$562.48	$457.37	$514.54	$388.54	$437.11	$384.99	$433.11	$448.81	$504.91	$238.19	$267.96	$360.90	$406.01	$337.92	$380.16	$410.30	$461.59	$323.53	$363.97	$499.98	$562.48	$238.19	$267.96	$457.37	$514.54	$297.43	$334.61	$320.57	$360.64
22	$499.98	$562.48	$457.37	$514.54	$388.54	$437.11	$384.99	$433.11	$448.81	$504.91	$238.19	$267.96	$360.90	$406.01	$337.92	$380.16	$410.30	$461.59	$323.53	$363.97	$499.98	$562.48	$238.19	$267.96	$457.37	$514.54	$297.43	$334.61	$320.57	$360.64
23	$499.98	$562.48	$457.37	$514.54	$388.54	$437.11	$384.99	$433.11	$448.81	$504.91	$238.19	$267.96	$360.90	$406.01	$337.92	$380.16	$410.30	$461.59	$323.53	$363.97	$499.98	$562.48	$238.19	$267.96	$457.37	$514.54	$297.43	$334.61	$320.57	$360.64
24	$499.98	$562.48	$457.37	$514.54	$388.54	$437.11	$384.99	$433.11	$448.81	$504.91	$238.19	$267.96	$360.90	$406.01	$337.92	$380.16	$410.30	$461.59	$323.53	$363.97	$499.98	$562.48	$238.19	$267.96	$457.37	$514.54	$297.43	$334.61	$320.57	$360.64
25	$501.98	$564.73	$459.20	$516.60	$390.09	$438.86	$386.53	$434.85	$450.61	$506.93	$239.14	$269.04	$362.34	$407.64	$339.27	$381.68	$411.94	$463.43	$324.82	$365.40	$501.98	$564.73	$239.14	$269.04	$459.20	$516.60	$298.62	$335.95	$321.85	$362.08
26	$511.98	$575.98	$468.35	$526.89	$397.86	$447.60	$394.23	$443.51	$459.58	$517.03	$243.91	$274.39	$369.56	$415.76	$346.03	$389.28	$420.15	$472.67	$331.29	$372.71	$511.98	$575.98	$243.91	$274.39	$468.35	$526.89	$304.57	$342.64	$328.26	$369.30
27	$523.98	$589.48	$479.32	$539.24	$407.19	$458.09	$403.47	$453.90	$470.35	$529.15	$249.62	$280.83	$378.22	$425.50	$354.14	$398.41	$429.99	$483.74	$339.06	$381.44	$523.98	$589.48	$249.62	$280.83	$479.32	$539.24	$311.71	$350.67	$335.96	$377.95
28	$543.48	$611.41	$497.16	$559.31	$422.34	$475.14	$418.48	$470.79	$487.86	$548.84	$258.91	$291.28	$392.30	$441.34	$367.32	$413.23	$446.00	$501.75	$351.68	$395.64	$543.48	$611.41	$258.91	$291.28	$497.16	$559.31	$323.31	$363.72	$348.46	$392.02
29	$559.48	$629.41	$511.80	$575.77	$434.78	$489.12	$430.80	$484.65	$502.22	$565.00	$266.53	$299.85	$403.85	$454.13	$378.13	$425.40	$459.13	$516.52	$362.03	$407.28	$559.48	$629.41	$266.53	$299.85	$511.80	$575.77	$332.82	$374.43	$358.72	$403.56
30	$567.48	$666.79	$519.11	$609.96	$440.99	$518.17	$436.96	$513.43	$509.40	$598.54	$270.35	$317.66	$409.62	$481.31	$383.54	$450.66	$465.69	$547.19	$367.21	$431.47	$567.48	$666.79	$270.35	$317.66	$519.11	$609.96	$337.58	$396.66	$363.85	$427.52
31	$579.48	$680.89	$530.09	$622.86	$450.32	$529.12	$446.20	$524.29	$520.17	$611.20	$276.06	$324.37	$418.28	$491.48	$391.65	$460.19	$475.54	$558.76	$374.97	$440.98	$579.48	$680.89	$276.06	$324.37	$530.09	$622.86	$344.72	$405.05	$371.54	$436.56
32	$591.48	$694.98	$541.07	$635.76	$459.64	$540.08	$455.44	$535.15	$530.94	$623.86	$281.78	$331.09	$426.94	$501.66	$399.76	$469.72	$485.38	$570.33	$382.74	$449.71	$591.48	$694.98	$281.78	$331.09	$541.07	$635.76	$351.86	$413.44	$379.23	$445.60
33	$598.98	$703.80	$547.93	$643.82	$465.47	$546.93	$461.22	$541.93	$537.67	$631.77	$285.35	$335.29	$432.36	$508.02	$404.83	$475.67	$491.54	$577.56	$387.59	$455.42	$598.98	$703.80	$285.35	$335.29	$547.93	$643.82	$356.32	$418.68	$384.04	$451.25
34	$606.98	$713.20	$555.25	$652.42	$471.69	$554.23	$467.38	$549.17	$544.86	$640.21	$289.16	$339.77	$438.13	$514.81	$410.23	$482.03	$498.10	$585.27	$392.77	$461.50	$606.98	$713.20	$289.16	$339.77	$555.25	$652.42	$361.08	$424.27	$389.17	$457.28
35	$610.98	$717.90	$558.91	$656.71	$474.80	$557.89	$470.46	$552.79	$548.45	$644.42	$291.07	$342.01	$441.02	$518.20	$412.94	$485.20	$501.39	$589.13	$395.35	$464.54	$610.98	$717.90	$291.07	$342.01	$558.91	$656.71	$363.46	$427.08	$391.74	$460.29
36	$614.98	$722.60	$562.57	$661.01	$477.90	$561.54	$473.54	$556.41	$552.04	$648.64	$292.97	$344.24	$443.91	$521.59	$415.64	$488.38	$504.67	$592.99	$397.94	$467.58	$614.98	$722.60	$292.97	$344.24	$562.57	$661.01	$365.84	$429.86	$394.30	$463.30
37	$618.98	$727.30	$566.22	$665.31	$481.01	$565.19	$476.62	$560.03	$555.63	$652.86	$294.88	$346.48	$446.79	$524.98	$418.34	$491.56	$507.95	$596.84	$400.53	$470.62	$618.98	$727.30	$294.88	$346.48	$566.22	$665.31	$368.22	$432.66	$396.87	$466.32
38	$622.98	$732.00	$569.88	$669.61	$484.12	$568.84	$479.70	$563.64	$559.22	$657.08	$296.78	$348.72	$449.68	$528.38	$421.05	$494.73	$511.23	$600.70	$403.12	$473.66	$622.98	$732.00	$296.78	$348.72	$569.88	$669.61	$370.60	$435.45	$399.43	$469.33
39	$630.97	$741.40	$577.20	$678.21	$490.34	$576.15	$485.86	$570.88	$566.40	$665.52	$300.60	$353.20	$455.46	$535.16	$426.46	$501.08	$517.80	$608.41	$408.29	$479.75	$630.97	$741.40	$300.60	$353.20	$577.20	$678.21	$375.36	$441.04	$404.56	$475.36
40	$638.97	$782.74	$584.52	$716.04	$496.55	$608.28	$492.02	$602.72	$573.58	$702.63	$304.41	$372.90	$461.23	$565.01	$431.86	$529.03	$524.36	$642.35	$413.47	$506.50	$638.97	$782.74	$304.41	$372.90	$584.52	$716.04	$380.12	$465.64	$409.69	$501.87
41	$650.97	$797.44	$595.50	$729.48	$505.88	$619.70	$501.26	$614.04	$584.35	$715.83	$310.12	$379.90	$469.89	$575.62	$439.97	$538.97	$534.21	$654.41	$421.24	$516.01	$650.97	$797.44	$310.12	$379.90	$595.50	$729.48	$387.25	$474.39	$417.38	$511.29
42	$662.47	$811.53	$606.02	$742.37	$514.82	$630.65	$510.11	$624.89	$594.67	$728.47	$315.60	$386.61	$478.18	$585.79	$447.74	$548.48	$543.65	$665.97	$428.68	$525.18	$662.47	$811.53	$315.60	$386.61	$606.02	$742.37	$394.09	$482.77	$424.76	$520.33
43	$678.47	$831.13	$620.65	$760.30	$527.25	$645.88	$522.43	$639.98	$609.04	$746.07	$323.22	$395.95	$489.74	$599.93	$458.56	$561.73	$556.78	$682.05	$439.03	$537.81	$678.47	$831.13	$323.22	$395.95	$620.65	$760.30	$403.61	$494.43	$435.01	$532.89
44	$698.47	$855.63	$638.95	$782.71	$542.78	$664.92	$537.83	$658.84	$626.99	$768.06	$332.75	$407.62	$504.18	$617.62	$472.07	$578.29	$573.19	$702.16	$451.97	$553.66	$698.47	$855.63	$332.75	$407.62	$638.95	$782.71	$415.51	$509.00	$447.84	$548.60
45	$721.97	$884.41	$660.44	$809.04	$561.05	$687.29	$555.93	$681.01	$648.08	$793.99	$343.95	$421.10	$521.14	$638.40	$487.96	$597.75	$592.47	$725.78	$467.18	$572.29	$721.97	$884.41	$343.95	$421.10	$660.44	$809.04	$429.40	$526.12	$462.90	$567.06
46	$749.97	$918.71	$686.06	$840.42	$582.81	$713.94	$577.49	$707.42	$673.22	$824.69	$357.29	$437.67	$541.35	$663.15	$506.88	$620.93	$615.45	$753.93	$485.30	$594.49	$749.97	$918.71	$357.29	$437.67	$686.06	$840.42	$446.15	$546.53	$480.86	$589.05
47	$781.47	$957.30	$714.87	$875.71	$607.29	$743.93	$601.74	$737.13	$701.49	$859.33	$372.29	$456.06	$564.09	$691.01	$528.17	$647.01	$641.30	$785.58	$505.68	$619.45	$781.47	$957.30	$372.29	$456.06	$714.87	$875.71	$464.88	$569.48	$501.05	$613.79
48	$817.47	$1,001.40	$747.80	$916.05	$635.26	$778.20	$629.46	$771.09	$733.80	$898.91	$389.44	$477.08	$590.07	$722.84	$552.50	$676.81	$670.84	$821.78	$528.97	$647.99	$817.47	$1,001.40	$389.44	$477.08	$747.80	$916.05	$486.30	$595.72	$524.13	$642.06
49	$852.97	$1,044.88	$780.27	$955.83	$662.85	$811.99	$656.79	$804.57	$765.67	$937.95	$406.35	$497.78	$615.70	$754.23	$576.49	$706.20	$699.97	$857.47	$551.94	$676.13	$852.97	$1,044.88	$406.35	$497.78	$780.27	$955.83	$507.42	$621.58	$546.89	$669.94
50	$892.96	$1,227.83	$816.86	$1,123.19	$693.93	$954.16	$687.50	$945.44	$801.57	$1,102.17	$425.41	$584.94	$644.57	$886.28	$603.53	$829.85	$732.80	$1,007.59	$577.82	$794.51	$892.96	$1,227.83	$425.41	$584.94	$816.86	$1,123.19	$531.21	$730.41	$572.54	$787.24
51	$932.46	$1,282.14	$853.00	$1,172.87	$724.63	$996.39	$718.01	$987.26	$837.03	$1,150.92	$444.22	$610.81	$673.08	$925.48	$630.22	$866.55	$765.21	$1,052.16	$603.38	$829.65	$932.46	$1,282.14	$444.22	$610.81	$853.00	$1,172.87	$554.71	$762.72	$597.86	$822.06
52	$975.96	$1,341.95	$892.79	$1,227.58	$758.43	$1,042.84	$751.50	$1,033.31	$876.08	$1,204.61	$464.95	$639.30	$704.48	$968.66	$659.62	$906.98	$800.91	$1,101.25	$631.53	$868.35	$975.96	$1,341.95	$464.95	$639.30	$892.79	$1,227.58	$580.58	$798.30	$625.75	$860.41
53	$1,019.96	$1,402.44	$933.03	$1,282.92	$792.62	$1,089.85	$785.38	$1,079.90	$915.57	$1,258.91	$485.91	$668.12	$736.24	$1,012.32	$689.36	$947.87	$837.01	$1,150.89	$660.00	$907.50	$1,019.96	$1,402.44	$485.91	$668.12	$933.03	$1,282.92	$606.76	$834.29	$653.96	$899.20
54	$1,067.46	$1,467.75	$976.48	$1,342.67	$829.53	$1,140.61	$821.95	$1,130.19	$958.21	$1,317.56	$508.56	$699.24	$770.52	$1,059.47	$721.46	$992.01	$875.99	$1,204.49	$690.74	$949.76	$1,067.46	$1,467.75	$508.56	$699.24	$976.48	$1,342.67	$635.01	$873.14	$684.42	$941.07
55	$1,114.96	$1,533.06	$1,019.94	$1,402.41	$866.44	$1,191.36	$858.53	$1,180.48	$1,000.85	$1,376.16	$531.16	$730.35	$804.81	$1,106.61	$753.56	$1,036.15	$914.97	$1,258.08	$721.47	$992.02	$1,114.96	$1,533.06	$531.16	$730.35	$1,019.94	$1,402.41	$663.27	$911.99	$714.87	$982.95
56	$1,166.45	$1,603.87	$1,067.04	$1,467.19	$906.46	$1,246.39	$898.18	$1,235.00	$1,047.07	$1,439.73	$555.70	$764.08	$841.98	$1,157.72	$788.37	$1,084.01	$957.23	$1,316.19	$754.80	$1,037.84	$1,166.45	$1,603.87	$555.70	$764.08	$1,067.04	$1,467.19	$693.90	$954.12	$747.89	$1,028.35
57	$1,218.45	$1,675.37	$1,114.61	$1,532.50	$946.87	$1,301.95	$938.22	$1,290.05	$1,093.75	$1,503.91	$580.47	$798.14	$879.51	$1,209.33	$823.51	$1,132.33	$999.90	$1,374.86	$788.44	$1,084.11	$1,218.45	$1,675.37	$580.47	$798.14	$1,114.61	$1,532.50	$724.84	$996.65	$781.21	$1,074.19
58	$1,273.95	$1,751.68	$1,165.38	$1,602.40	$990.00	$1,361.25	$980.95	$1,348.81	$1,143.57	$1,572.41	$606.91	$834.50	$919.57	$1,264.41	$861.02	$1,183.90	$1,045.44	$1,437.49	$824.35	$1,133.49	$1,273.95	$1,751.68	$606.91	$834.50	$1,165.38	$1,602.40	$757.85	$1,042.05	$816.81	$1,123.12
59	$1,301.45	$1,789.49	$1,190.51	$1,636.98	$1,011.37	$1,390.63	$1,002.13	$1,377.93	$1,168.25	$1,606.35	$620.01	$852.51	$939.42	$1,291.71	$879.61	$1,209.46	$1,068.01	$1,468.51	$842.15	$1,157.95	$1,301.45	$1,789.49	$620.01	$852.51	$1,190.51	$1,636.98	$774.21	$1,064.54	$834.44	$1,147.36
60	$1,356.95	$1,865.80	$1,241.30	$1,706.79	$1,054.50	$1,449.93	$1,044.86	$1,436.69	$1,218.07	$1,674.85	$646.45	$888.87	$979.48	$1,346.79	$917.11	$1,261.03	$1,113.55	$1,531.14	$878.05	$1,207.31	$1,356.95	$1,865.80	$646.45	$888.87	$1,241.30	$1,706.79	$807.23	$1,109.93	$870.03	$1,196.29
61	$1,404.94	$1,931.80	$1,285.21	$1,767.16	$1,091.80	$1,501.22	$1,081.82	$1,487.51	$1,261.16	$1,734.09	$669.31	$920.31	$1,014.13	$1,394.43	$949.50	$1,305.64	$1,152.94	$1,585.30	$909.12	$1,250.06	$1,404.94	$1,931.80	$669.31	$920.31	$1,285.21	$1,767.16	$835.78	$1,149.20	$900.80	$1,238.60
62	$1,436.44	$1,975.11	$1,314.02	$1,806.78	$1,116.28	$1,534.88	$1,106.08	$1,520.85	$1,289.43	$1,772.97	$684.32	$940.94	$1,036.87	$1,425.69	$970.84	$1,334.91	$1,178.79	$1,620.84	$929.50	$1,278.06	$1,436.44	$1,975.11	$684.32	$940.94	$1,314.02	$1,806.78	$854.52	$1,174.96	$921.00	$1,266.37
63	$1,475.94	$2,029.42	$1,350.16	$1,856.46	$1,146.97	$1,577.08	$1,136.49	$1,562.67	$1,324.88	$1,821.72	$703.14	$966.81	$1,065.38	$1,464.89	$997.54	$1,371.62	$1,211.21	$1,665.41	$955.06	$1,313.21	$1,475.94	$2,029.42	$703.14	$966.81	$1,350.16	$1,856.46	$878.01	$1,207.27	$946.32	$1,301.19
64+	$1,499.94	$2,062.42	$1,372.11	$1,886.65	$1,165.62	$1,602.73	$1,154.97	$1,588.08	$1,346.43	$1,851.34	$714.57	$982.53	$1,082.70	$1,488.71	$1,013.76	$1,393.92	$1,230.99	$1,692.49	$970.59	$1,334.56	$1,499.94	$2,062.42	$714.57	$982.53	$1,372.11	$1,886.65	$892.29	$1,226.90	$961.71	$1,322.35

Keystone Health Plan East, Inc.
Individual
Plan Design Summary

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

Company Name **Keystone Health Plan East, Inc.**
Market **Individual**
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2024 Number of Covered Lives by Rating County

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
33871PA0040002	Keystone HMO Gold	HMO	Gold	On/Off
33871PA0040005	Keystone HMO Gold Proactive	HMO	Gold	On/Off
33871PA0040006	Keystone HMO Silver Proactive	HMO	Silver	On/Off
33871PA0040010	Keystone HMO Silver Proactive Lite	HMO	Silver	On/Off
33871PA0040013	Keystone HMO Silver Classic	HMO	Silver	On/Off
33871PA0040014	Keystone HMO Bronze	HMO	Bronze	On/Off
33871PA0040015	Keystone HMO Silver Basic	HMO	Silver	On/Off
33871PA0040016	Keystone HMO Silver Proactive Basic	HMO	Silver	On/Off
33871PA0040017	Keystone HMO Gold Classic	HMO	Gold	On/Off
33871PA0040018	Keystone HMO Silver Proactive Essential	HMO	Silver	On/Off
33871PA0120002	Keystone HMO Gold	HMO	Gold	Off
33871PA0120004	Keystone HMO Bronze	HMO	Bronze	Off
33871PA0120005	Keystone HMO Gold Proactive	HMO	Gold	Off
33871PA0120007	Keystone HMO Silver Proactive Value	HMO	Silver	Off
33871PA0120008	Keystone HMO Silver Proactive Select	HMO	Silver	Off

RATING AREA 1

HIOS Plan ID	Crawford	Clarion	Erie	Forest	Mckean	Mercer	Venango	Warren
Covered Lives	0	0	0	0	0	0	0	0
33871PA0040002								
33871PA0040005								
33871PA0040006								
33871PA0040010								
33871PA0040013								
33871PA0040014								
33871PA0040015								
33871PA0040016								
33871PA0040017								
33871PA0040018								
33871PA0120002								
33871PA0120004								
33871PA0120005								
33871PA0120007								
33871PA0120008								

RATING AREA 2

HIOS Plan ID	Elk	Cameron	Potter
Covered Lives	0	0	0
33871PA0040002			
33871PA0040005			
33871PA0040006			
33871PA0040010			
33871PA0040013			
33871PA0040014			
33871PA0040015			
33871PA0040016			
33871PA0040017			
33871PA0040018			
33871PA0120002			
33871PA0120004			
33871PA0120005			
33871PA0120007			
33871PA0120008			

RATING AREA 3

HIOS Plan ID	Bradford	Carbon	Clinton	Lackawanna	Luzerne	Lycoming	Monroe	Pike	Sullivan	Susquehanna	Tioga	Wayne	Wyoming
Covered Lives	0	0	0	0	0	0	0	0	0	0	0	0	0
33871PA0040002													
33871PA0040005													
33871PA0040006													
33871PA0040010													
33871PA0040013													
33871PA0040014													
33871PA0040015													
33871PA0040016													
33871PA0040017													
33871PA0040018													
33871PA0120002													
33871PA0120004													
33871PA0120005													
33871PA0120007													
33871PA0120008													

RATING AREA 4

HIOS Plan ID	Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland
Covered Lives	0	0	0	0	0	0	0	0	0	0
33871PA0040002										
33871PA0040005										
33871PA0040006										
33871PA0040010										
33871PA0040013										
33871PA0040014										
33871PA0040015										
33871PA0040016										
33871PA0040017										
33871PA0040018										
33871PA0120002										
33871PA0120004										
33871PA0120005										
33871PA0120007										
33871PA0120008										

RATING AREA 5

HIOS Plan ID	Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
Covered Lives	0	0	0	0	0	0	0
33871PA0040002							
33871PA0040005							
33871PA0040006							
33871PA0040010							
33871PA0040013							
33871PA0040014							
33871PA0040015							
33871PA0040016							
33871PA0040017							
33871PA0040018							
33871PA0120002							
33871PA0120004							
33871PA0120005							
33871PA0120007							
33871PA0120008							

RATING AREA 6

HIOS Plan ID	Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union
Covered Lives	0	0	0	0	0	0	0	0	0	0
33871PA0040002										
33871PA0040005										
33871PA0040006										
33871PA0040010										
33871PA0040013										
33871PA0040014										
33871PA0040015										
33871PA0040016										
33871PA0040017										
33871PA0040018										
33871PA0120002										
33871PA0120004										
33871PA0120005										
33871PA0120007										
33871PA0120008										

RATING AREA 7

HIOS Plan ID	Adams	Berks	Lancaster	York
Covered Lives	0	0	0	0
33871PA0040002				
33871PA0040005				
33871PA0040006				
33871PA0040010				
33871PA0040013				
33871PA0040014				
33871PA0040015				
33871PA0040016				
33871PA0040017				
33871PA0040018				
33871PA0120002				
33871PA0120004				
33871PA0120005				
33871PA0120007				
33871PA0120008				

RATING AREA 8

HIOS Plan ID	Bucks	Chester	Delaware	Montgomery	Philadelphia
Covered Lives	25,246	15,171	15,308	27,649	39,907
33871PA0040002	$499.98	$499.98	$499.98	$499.98	$499.98
33871PA0040005	$457.37	$457.37	$457.37	$457.37	$457.37
33871PA0040006	$388.54	$388.54	$388.54	$388.54	$388.54
33871PA0040010	$384.99	$384.99	$384.99	$384.99	$384.99
33871PA0040013	$448.81	$448.81	$448.81	$448.81	$448.81
33871PA0040014	$238.19	$238.19	$238.19	$238.19	$238.19
33871PA0040015	$360.90	$360.90	$360.90	$360.90	$360.90
33871PA0040016	$337.92	$337.92	$337.92	$337.92	$337.92
33871PA0040017	$410.30	$410.30	$410.30	$410.30	$410.30
33871PA0040018	$323.53	$323.53	$323.53	$323.53	$323.53
33871PA0120002	$499.98	$499.98	$499.98	$499.98	$499.98
33871PA0120004	$238.19	$238.19	$238.19	$238.19	$238.19
33871PA0120005	$457.37	$457.37	$457.37	$457.37	$457.37
33871PA0120007	$297.43	$297.43	$297.43	$297.43	$297.43
33871PA0120008	$320.57	$320.57	$320.57	$320.57	$320.57

RATING AREA 9

HIOS Plan ID	Cumberland	Dauphin	Franklin	Fulton	Juniata	Lebanon	Perry
Covered Lives	0	0	0	0	0	0	0
33871PA0040002							
33871PA0040005							
33871PA0040006							
33871PA0040010							
33871PA0040013							
33871PA0040014							
33871PA0040015							
33871PA0040016							
33871PA0040017							
33871PA0040018							
33871PA0120002							
33871PA0120004							
33871PA0120005							
33871PA0120007							
33871PA0120008							

Unified Rate Review v6.0

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.

Company Legal Name:	Keystone Health Plan East		
HIOS Issuer ID:	33871	State:	PA
Effective Date of Rate Change(s):	1/1/2025	Market:	Individual

Market Level Calculations (Same for all Plans)

Section I: Experience Period Data

Experience Period: 1/1/2023 to 12/31/2023

	Total	PMPM
Allowed Claims	$788,684,772.15	$558.75
Reinsurance	$28,181,898.95	$19.97
Incurred Claims in Experience Period	$652,720,233.85	$462.43
Risk Adjustment	-$41,829,325.82	-$29.63
Experience Period Premium	$825,990,960.28	$585.18
Experience Period Member Months	1,411,515	

Section II: Projections

Benefit Category	Experience Period Index Rate PMPM	Year 1 Trend		Year 2 Trend		Trended EHB Allowed Claims PMPM
		Cost	Utilization	Cost	Utilization	
Inpatient Hospital	$98.26	1.055	1.068	1.055	1.068	$124.75
Outpatient Hospital	$118.59	1.052	1.068	1.052	1.068	$149.70
Professional	$129.39	1.029	1.068	1.029	1.068	$156.27
Other Medical	$0.00	1.029	1.068	1.029	1.068	$0.00
Capitation	$80.36	1.000	1.035	1.000	1.035	$86.08
Prescription Drug	$132.02	0.990	1.068	0.990	1.068	$147.59
Total	$558.62					**$664.39**

Morbidity Adjustment	1.000
Demographic Shift	0.989
Plan Design Changes	1.000
Other	1.003
Adjusted Trended EHB Allowed Claims PMPM for **1/1/2025**	**$659.05**

Manual EHB Allowed Claims PMPM	$624.25
Applied Credibility %	0.00%

		Projected Period Totals
Projected Index Rate for **1/1/2025**	**$624.25**	$923,497,971.00
Reinsurance	$23.28	$34,439,780.16
Risk Adjustment Payment/Charge	-$14.64	-$21,658,006.08
Exchange User Fees	2.88%	$27,006,411.11
Market Adjusted Index Rate	**$633.87**	**$937,722,608.03**

Projected Member Months	**1,479,372**

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**

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.

Product/Plan Level Calculations

Field #	Section I: General Product and Plan Information																		
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	Gold Proactive	Silver Proactive	Silver Proactive	Silver Proactive
1.4	Plan ID (Standard Component ID)		33871PA0040002	33871PA0040005	33871PA0040006	33871PA0040010	33871PA0040013	33871PA0040014	33871PA0040015	33871PA0040016	33871PA0040017	33871PA0040018	33871PA0120002	33871PA0120003	33871PA0120004	33871PA0120005	33871PA0120006	33871PA0120007	33871PA0120008
1.5	Metal		Gold	Gold	Silver	Silver	Silver	Bronze	Silver	Silver	Gold	Silver	Gold	Silver	Bronze	Gold	Silver	Silver	Silver
1.6	AV Metal Value		0.801	0.809	0.709	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	0.710
1.7	Plan Category		Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Terminated	Renewing	Renewing	Terminated	Renewing	Renewing
1.8	Plan Type		HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO
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	1/1/2025	1/1/2025
1.11	Cumulative Rate Change % (over 12 mos prior)		7.79%	7.99%	8.60%	8.78%	8.96%	8.83%	8.70%	8.90%	8.31%	9.29%	7.79%	0.00%	8.83%	7.99%	0.00%	8.90%	8.73%
1.12	Product Rate Increase %		8.86%										8.70%						
1.13	Submission Level Rate Increase %		8.83%																

Worksheet 1 Totals		Section II: Experience Period and Current Plan Level Information																	
	2.1	Plan ID (Standard Component ID)	Total	33871PA0040002	33871PA0040005	33871PA0040006	33871PA0040010	33871PA0040013	33871PA0040014	33871PA0040015	33871PA0040016	33871PA0040017	33871PA0040018	33871PA0120002	33871PA0120003	33871PA0120004	33871PA0120005	33871PA0120006	33871PA0120007	33871PA0120008
$788,684,772	2.2	Allowed Claims	$788,684,772	$10,209,830	$48,942,237	$163,106,100	$50,218,539	$721,607	$56,365,307	$9,841,428	$171,726,755	$11,316,690	$96,896,559	$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	$6,089,049	$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	$0	$0
$652,720,234	2.6	Incurred Claims	$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
-$41,829,326	2.7	Risk Adjustment Transfer Amount	-$41,829,326	$2,877,284	$10,087,025	$23,856,625	$5,700,961	-$96,520	-$18,447,334	$718,430	-$26,693,775	$434,472	-$14,200,268	$2,901,726	$590,396	-$18,582,922	$3,512,653	$802,117	-$13,663,213	-$1,626,985
$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	$121,190,181	$7,446,921	$3,734,405	$30,775,386	$14,626,376	$3,090,769	$66,297,115	$32,955,101
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	225,188	9,816	5,091	75,467	22,204	5,135	135,353	63,906
	2.10	Current Enrollment	123,281	582	4,202	17,584	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	$693.27	$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	83.55%	87.77%	84.61%	71.32%	73.75%	76.22%	96.95%	82.39%	85.61%	98.18%	80.63%	83.36%	73.51%	178.90%	77.54%	95.60%	100.31%	88.55%
		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	$554.11
	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	-$29.63	$373.67	$196.34	$103.16	$76.97	-$87.43	-$120.98	$52.00	-$82.26	$33.29	-$63.06	$295.61	$115.97	-$246.24	$158.20	$156.21	-$100.95	-$25.46
	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)		33871PA0040002	33871PA0040005	33871PA0040006	33871PA0040010	33871PA0040013	33871PA0040014	33871PA0040015	33871PA0040016	33871PA0040017	33871PA0040018	33871PA0120002	33871PA0120003	33871PA0120004	33871PA0120005	33871PA0120006	33871PA0120007	33871PA0120008
3.2	Market Adjusted Index Rate		$633.87																
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
	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		0.67%	0.67%	0.67%	0.67%	0.67%	0.67%	0.67%	0.67%	0.67%	0.67%	0.67%	0.00%	0.67%	0.67%	0.00%	0.67%	0.67%
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%	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	1.0000
3.10	**Plan Adjusted Index Rate**		$852.09	$779.50	$662.15	$656.13	$764.94	$405.97	$615.09	$575.87	$699.30	$551.35	$852.12	$0.00	$405.97	$779.46	$0.00	$506.89	$546.32
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**		$499.94	$457.35	$388.50	$384.97	$448.81	$238.20	$360.89	$337.88	$410.30	$323.49	$499.96	$0.00	$238.19	$457.33	$0.00	$297.41	$320.54

	Section IV: Projected Plan Level Information																		
4.1	Plan ID (Standard Component ID)	Total	33871PA0040002	33871PA0040005	33871PA0040006	33871PA0040010	33871PA0040013	33871PA0040014	33871PA0040015	33871PA0040016	33871PA0040017	33871PA0040018	33871PA0120002	33871PA0120003	33871PA0120004	33871PA0120005	33871PA0120006	33871PA0120007	33871PA0120008
4.2	Allowed Claims	$926,497,811	$5,255,705	$34,552,914	$135,797,527	$36,011,375	$1,081,929	$123,539,877	$11,873,151	$140,220,525	$14,414,810	$232,538,506	$7,563,000	$0	$45,409,766	$15,879,798	$0	$76,620,274	$45,738,655
4.3	Reinsurance	$25,456,176	$120,177	$867,667	$3,630,903	$965,956	$25,811	$3,370,521	$303,952	$3,920,401	$354,955	$6,579,773	$172,831	$0	$1,237,695	$398,524	$0	$2,210,672	$1,296,338
4.4	Member Cost Sharing	$242,709,339	$338,569	$2,107,202	$20,683,372	$5,670,219	$135,004	$58,571,266	$2,931,147	$32,333,691	$2,522,772	$59,289,344	$491,396	$0	$21,552,483	$977,281	$0	$23,182,280	$11,923,315
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	$658,332,296	$4,796,960	$31,578,044	$111,483,252	$29,375,200	$921,114	$61,598,091	$8,638,053	$103,966,433	$11,537,084	$166,669,388	$6,898,772	$0	$22,619,588	$14,503,994	$0	$51,227,322	$32,519,002
4.7	Risk Adjustment Transfer Amount	-$16,008,720	-$75,576	-$545,653	-$2,283,380	-$607,464	-$16,232	-$2,119,632	-$191,147	-$2,465,437	-$223,222	-$4,137,847	-$108,689	$0	-$778,354	-$250,621	$0	-$1,390,233	-$815,233
4.8	Premium	$831,850,577	$5,950,761	$39,303,757	$139,713,804	$36,831,183	$1,147,370	$79,517,642	$10,864,591	$131,196,749	$14,424,538	$210,815,836	$8,558,393	$0	$29,199,596	$18,051,518	$0	$65,118,949	$41,155,890
4.9	Projected Member Months	1,479,372	6,984	50,424	211,008	56,136	1,500	195,876	17,664	227,832	20,628	382,380	10,044	0	71,928	23,160	0	128,472	75,336
4.10	Loss Ratio	80.69%	81.65%	81.47%	81.12%	81.09%	81.43%	79.59%	80.93%	80.76%	81.24%	80.64%	81.65%	#DIV/0!	79.59%	81.48%	#DIV/0!	80.38%	80.61%
	Per Member Per Month																		
4.11	Allowed Claims	$626.28	$752.54	$685.25	$643.57	$641.50	$721.29	$630.70	$672.17	$615.46	$698.80	$608.13	$752.99	#DIV/0!	$631.32	$685.66	#DIV/0!	$596.40	$607.13
4.12	Reinsurance	$17.21	$17.21	$17.21	$17.21	$17.21	$17.21	$17.21	$17.21	$17.21	$17.21	$17.21	$17.21	#DIV/0!	$17.21	$17.21	#DIV/0!	$17.21	$17.21
4.13	Member Cost Sharing	$164.06	$48.48	$41.79	$98.02	$101.01	$90.00	$299.02	$165.94	$141.92	$122.30	$155.05	$48.92	#DIV/0!	$299.64	$42.20	#DIV/0!	$180.45	$158.27
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	$0.00	$0.00	#DIV/0!	$0.00	$0.00	#DIV/0!	$0.00	$0.00
4.15	Incurred Claims	$445.01	$686.85	$626.25	$528.34	$523.29	$614.08	$314.47	$489.02	$456.33	$559.29	$435.87	$686.86	#DIV/0!	$314.48	$626.25	#DIV/0!	$398.74	$431.65
4.16	Risk Adjustment Transfer Amount	-$10.82	-$10.82	-$10.82	-$10.82	-$10.82	-$10.82	-$10.82	-$10.82	-$10.82	-$10.82	-$10.82	-$10.82	#DIV/0!	-$10.82	-$10.82	#DIV/0!	-$10.82	-$10.82
4.17	Premium	$562.30	$852.06	$779.47	$662.13	$656.11	$764.91	$405.96	$615.07	$575.85	$699.27	$551.33	$852.09	#DIV/0!	$405.96	$779.43	#DIV/0!	$506.87	$546.30

Rating Area Data Collection

Specify the total number of Rating Areas in your State by selecting the Create Rating Areas button or Ctrl + Shift + R.
Select only the Rating Areas you are offering plans within and add a factor for each area.
To validate, select the Validate button or Ctrl + Shift + I.
To finalize, select the Finalize button or Ctrl + Shift + F.

Rating Area	Rating Factor
Rating Area 8	1.0000

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: [redacted]
Primary Contact Telephone Number: [redacted]
Primary Contact Email Address: [redacted]

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 3.7% 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.

The weighted average increase across KHPE plans based on projected membership, inclusive of the impact of benefit and cost sharing changes, is 8.8%. The minimum increase is 7.8% and the maximum increase is 9.2%.

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 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-for-service 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.

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

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, [redacted], 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.

[redacted]

May 15, 2024

2025 Rates Table Template v14.0

*All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.*
If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.
If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.
If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.
To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.

HIOS Issuer ID*	33871
Rate Effective Date*	1/1/2025
Rate Expiration Date*	12/31/2025
Rating Method*	Age-Based Rates

Plan ID* Required: Enter the 14-character Plan ID	Rating Area ID* Required: Select the Rating Area ID	Tobacco* Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Age* Required: Select the age of a subscriber eligible for the rate	Individual Rate* Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Individual Tobacco Rate* Required: Enter the rate of an Individual tobacco enrollee on a plan
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	382.48	382.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	15	416.48	416.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	16	429.48	429.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	17	442.48	442.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	18	456.48	456.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	19	470.48	470.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	20	484.98	484.98
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	21	499.98	562.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	22	499.98	562.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	23	499.98	562.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	24	499.98	562.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	25	501.98	564.73
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	26	511.98	575.98
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	27	523.98	589.48
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	28	543.48	611.41
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	29	559.48	629.41
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	30	567.48	666.79
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	31	579.48	680.89
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	32	591.48	694.98
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	33	598.98	703.80
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	34	606.98	713.20
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	35	610.98	717.90
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	36	614.98	722.60
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	37	618.98	727.30
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	38	622.98	732.00
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	39	630.97	741.40
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	40	638.97	782.74
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	41	650.97	797.44
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	42	662.47	811.53
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	43	678.47	831.13
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	44	698.47	855.63
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	45	721.97	884.41
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	46	749.97	918.71
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	47	781.47	957.30
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	48	817.47	1001.40
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	49	852.97	1044.88
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	50	892.96	1227.83
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	51	932.46	1282.14
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	52	975.96	1341.95
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	53	1019.96	1402.44
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	54	1067.46	1467.75
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	55	1114.96	1533.06
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	56	1166.45	1603.87
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	57	1218.45	1675.37
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	58	1273.95	1751.68
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	59	1301.45	1789.49
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	60	1356.95	1865.80
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	61	1404.94	1931.80
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	62	1436.44	1975.11
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	63	1475.94	2029.42
33871PA0040002	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1499.94	2062.42
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	349.89	349.89
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	15	380.99	380.99
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	16	392.88	392.88
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	17	404.77	404.77
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	18	417.58	417.58
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	19	430.39	430.39
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	20	443.65	443.65
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	21	457.37	514.54
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	22	457.37	514.54
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	23	457.37	514.54
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	24	457.37	514.54
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	25	459.20	516.60
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	26	468.35	526.89
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	27	479.32	539.24
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	28	497.16	559.31
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	29	511.80	575.77
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	30	519.11	609.96
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	31	530.09	622.86
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	32	541.07	635.76
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	33	547.93	643.82
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	34	555.25	652.42
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	35	558.91	656.71
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	36	562.57	661.01
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	37	566.22	665.31
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	38	569.88	669.61
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	39	577.20	678.21
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	40	584.52	716.04
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	41	595.50	729.48
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	42	606.02	742.37
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	43	620.65	760.30
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	44	638.95	782.71
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	45	660.44	809.04
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	46	686.06	840.42
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	47	714.87	875.71
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	48	747.80	916.05
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	49	780.27	955.83
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	50	816.86	1123.19
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	51	853.00	1172.87
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	52	892.79	1227.58
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	53	933.03	1282.92
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	54	976.48	1342.67
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	55	1019.94	1402.41
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	56	1067.04	1467.19
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	57	1114.61	1532.59
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	58	1165.38	1602.40
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	59	1190.53	1636.98
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	60	1241.30	1706.79
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	61	1285.21	1767.16
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	62	1314.02	1806.78
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	63	1350.16	1856.46
33871PA0040005	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1372.11	1886.65
33871PA0040006	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	297.23	297.23
33871PA0040006	Rating Area 8	Tobacco User/Non-Tobacco User	15	323.65	323.65
33871PA0040006	Rating Area 8	Tobacco User/Non-Tobacco User	16	333.76	333.76
33871PA0040006	Rating Area 8	Tobacco User/Non-Tobacco User	17	343.86	343.86
33871PA0040006	Rating Area 8	Tobacco User/Non-Tobacco User	18	354.74	354.74
33871PA0040006	Rating Area 8	Tobacco User/Non-Tobacco User	19	365.62	365.62
33871PA0040006	Rating Area 8	Tobacco User/Non-Tobacco User	20	376.88	376.88
33871PA0040006	Rating Area 8	Tobacco User/Non-Tobacco User	21	388.54	437.11
33871PA0040006	Rating Area 8	Tobacco User/Non-Tobacco User	22	388.54	437.11
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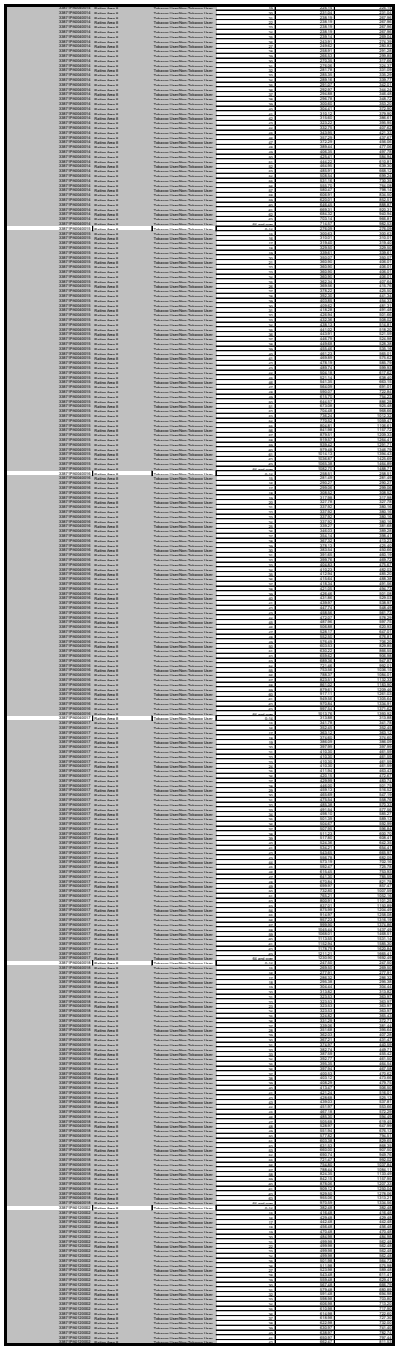
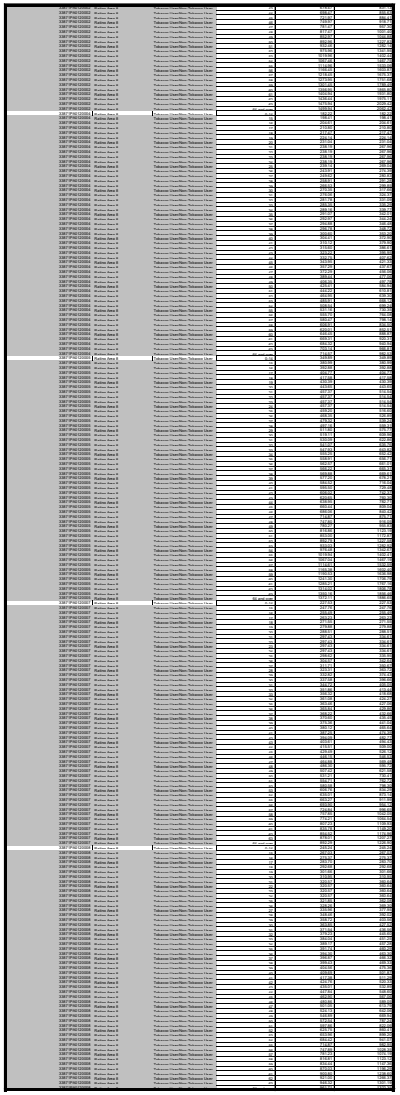
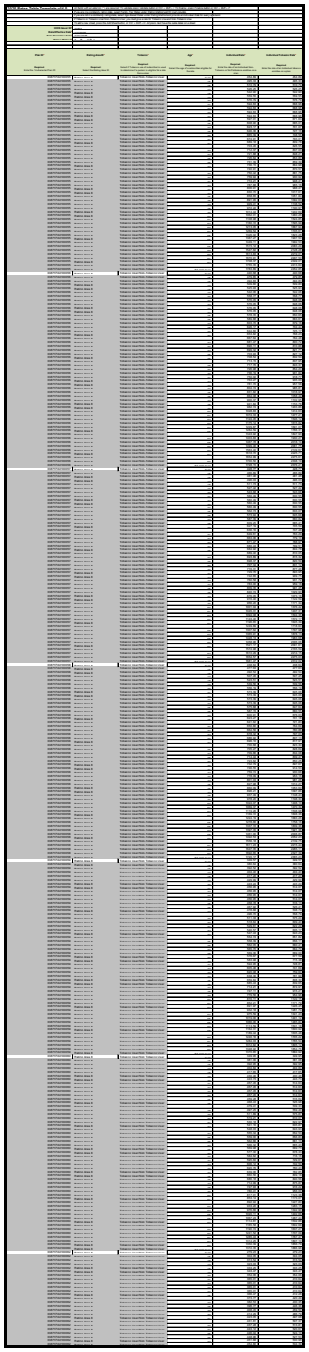
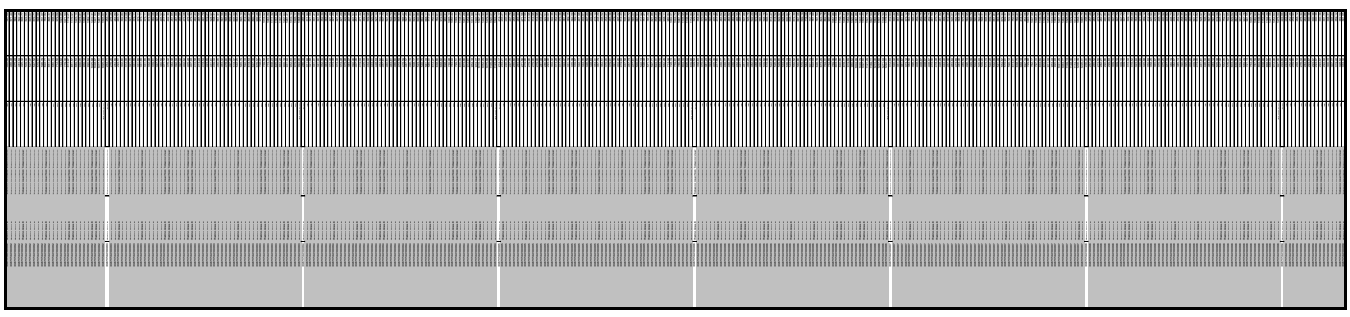
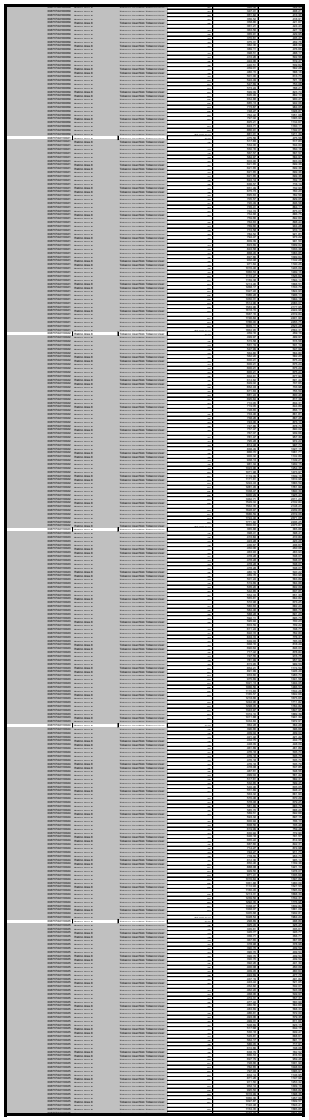
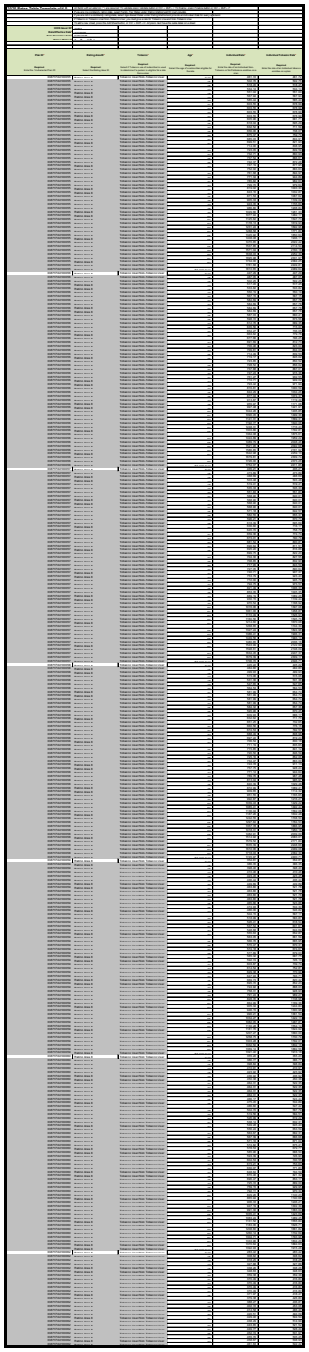


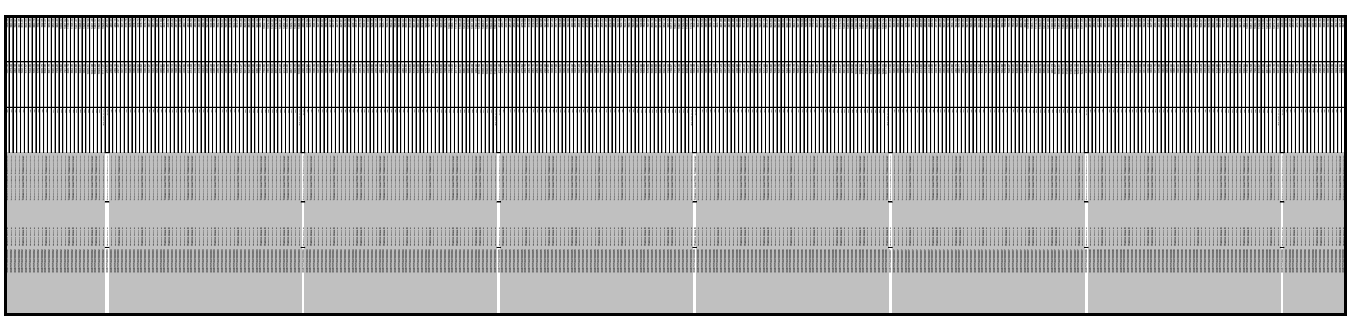


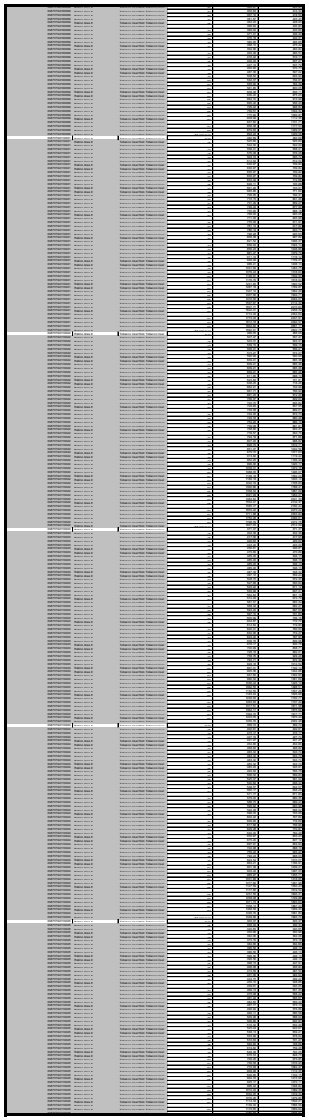


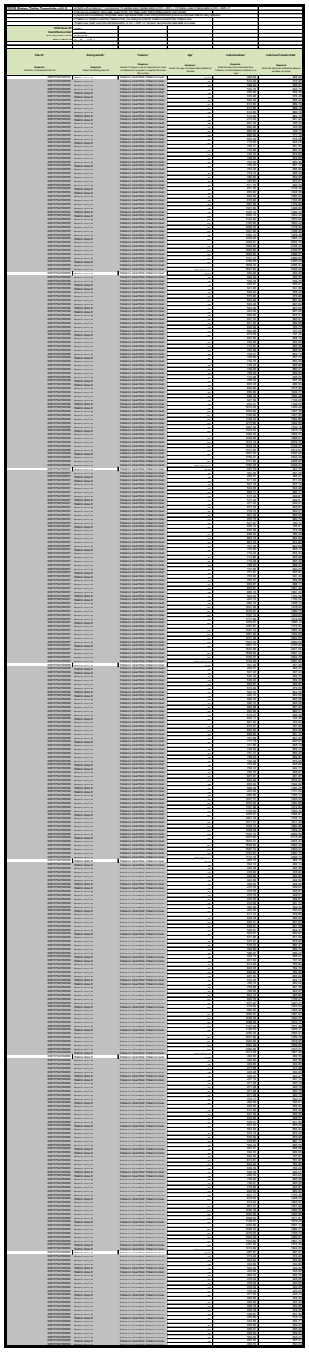


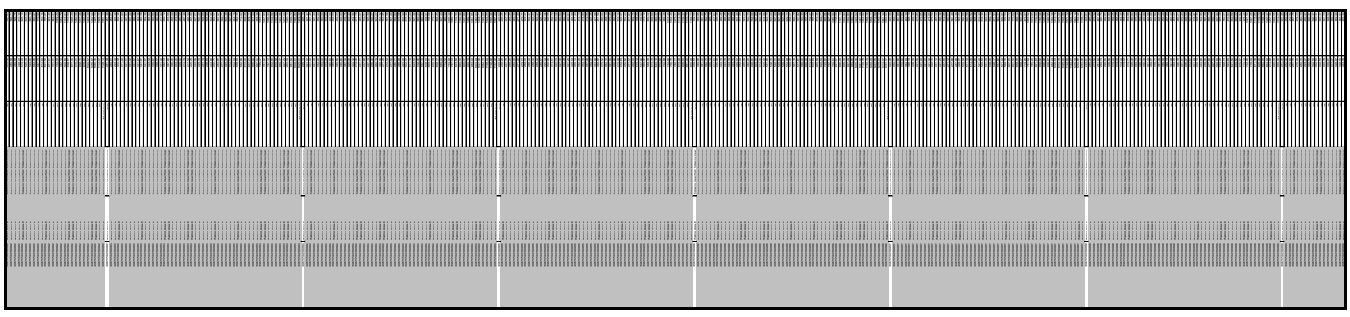


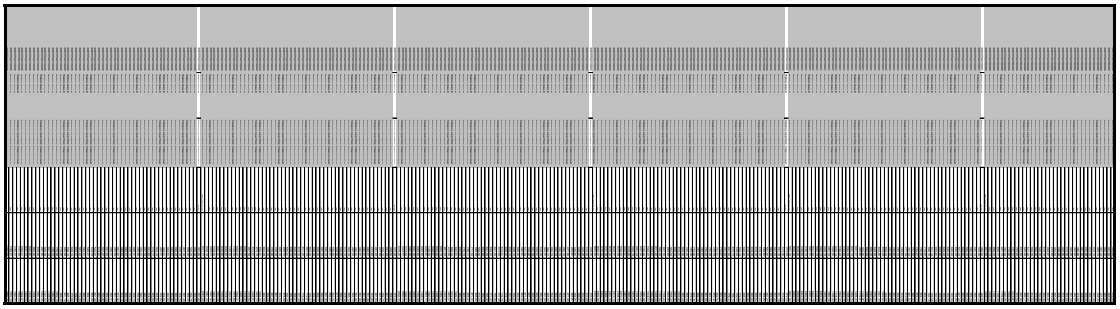


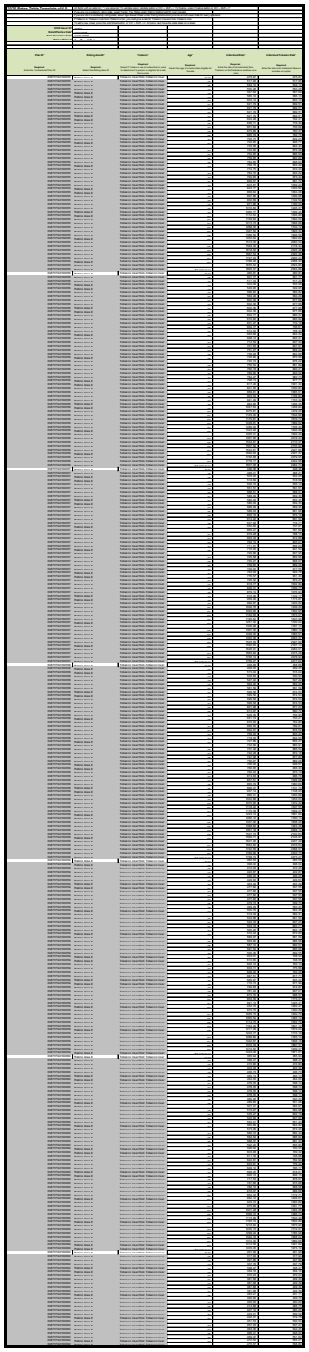


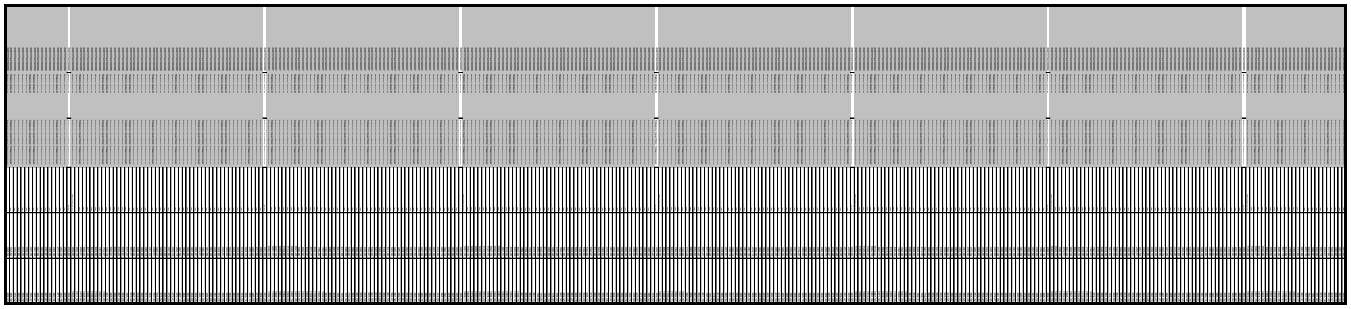


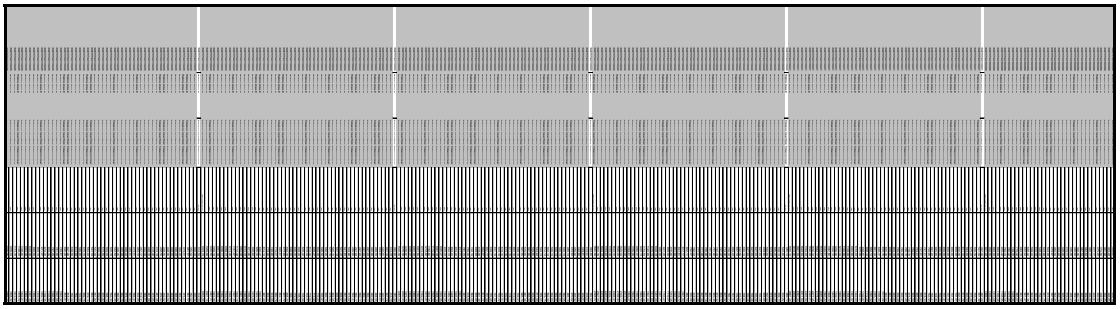












Cover Page

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.

	Cost - 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

	Cost - 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**	**AV 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.

HIOS IDs	33871PA0040002, 33871PA0120002	33871PA0040014, 33871PA0120004	33871PA0040005, 33871PA0120005	33871PA0040005, 33871PA0120005	33871PA0040006, 33871PA0040006-04, 33871PA0120007, 33871PA0120008, 33871PA0040010, 33871PA0040010-04, 33871PA0040016, 33871PA0040016-04, 33871PA0040018, 33871PA0040018-04	33871PA0040006, 33871PA0040006-04, 33871PA0120007, 33871PA0120008, 33871PA0040010, 33871PA0040010-04, 33871PA0040016, 33871PA0040016-04, 33871PA0040018, 33871PA0040018-04
IP Cost Sharing						
Facility	$750	$700	$700	$1,100	$900	$1,300
Professional	20%	50%	20%	30%	5%	10%
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	0.05	0.03	0.05	0.05	0.04	0.04
Claim per Admit	$27,080	$26,054	$27,080	$27,080	$26,960	$26,960
Average LOS (days)	1.6	1.6	1.6	1.6	1.6	1.6
Effective Copay Factor for 5 days	0.41	0.43	0.41	0.41	0.43	0.43
Assumption from Data						
% Facility Cost	85%	85%	85%	85%	85%	85%
% Professional Cost	15%	15%	15%	15%	15%	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	$2,578	$2,578
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**

HIOS IDs	33871PA0040006-05, 33871PA0040010-05, 33871PA0040016-05, 33871PA0040018-05	33871PA0040006-05, 33871PA0040010-05, 33871PA0040016-05, 33871PA0040018-05	33871PA0040006-06, 33871PA0040010-06, 33871PA0040016-06, 33871PA0040018-06	33871PA0040006-06, 33871PA0040010-06, 33871PA0040016-06, 33871PA0040018-06
IP Cost Sharing				
Facility	$500	$900	$250	$500
Professional	5%	10%	5%	10%
AVC Continuance Table	Gold	Gold	Platinum	Platinum
PMPY for IP	$1,321	$1,321	$1,462	$1,462
Admit PMPY	0.05	0.05	0.05	0.05
Claim per Admit	$27,080	$27,080	$26,628	$26,628
Average LOS (days)	1.6	1.6	1.7	1.7
Effective Copay Factor for 5 days	0.41	0.41	0.39	0.39
Assumption from Data				
% Facility Cost	85%	85%	85%	85%
% Professional Cost	15%	15%	15%	15%
Calculations				
Professional Claim per Admit	$4,062	$4,062	$3,994	$3,994
Professional Claim per Day	$2,476	$2,476	$2,403	$2,403
Equiv. Copay per Day no max	$124	$248	$120	$240
Equiv. Copay per Day, 5-day max	$304	$609	$306	$612
Total Copay per Day, 5-day max	**$804**	**$1,509**	**$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-sharing		
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		
HIOS_ID	MH/SA Office	MH/SA 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.

	Cost - sharing		
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 signature: _____

Actuary Printed 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 Filing	2025 Filing	Change
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

URRT Part III – Federal Actuarial Memorandum

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

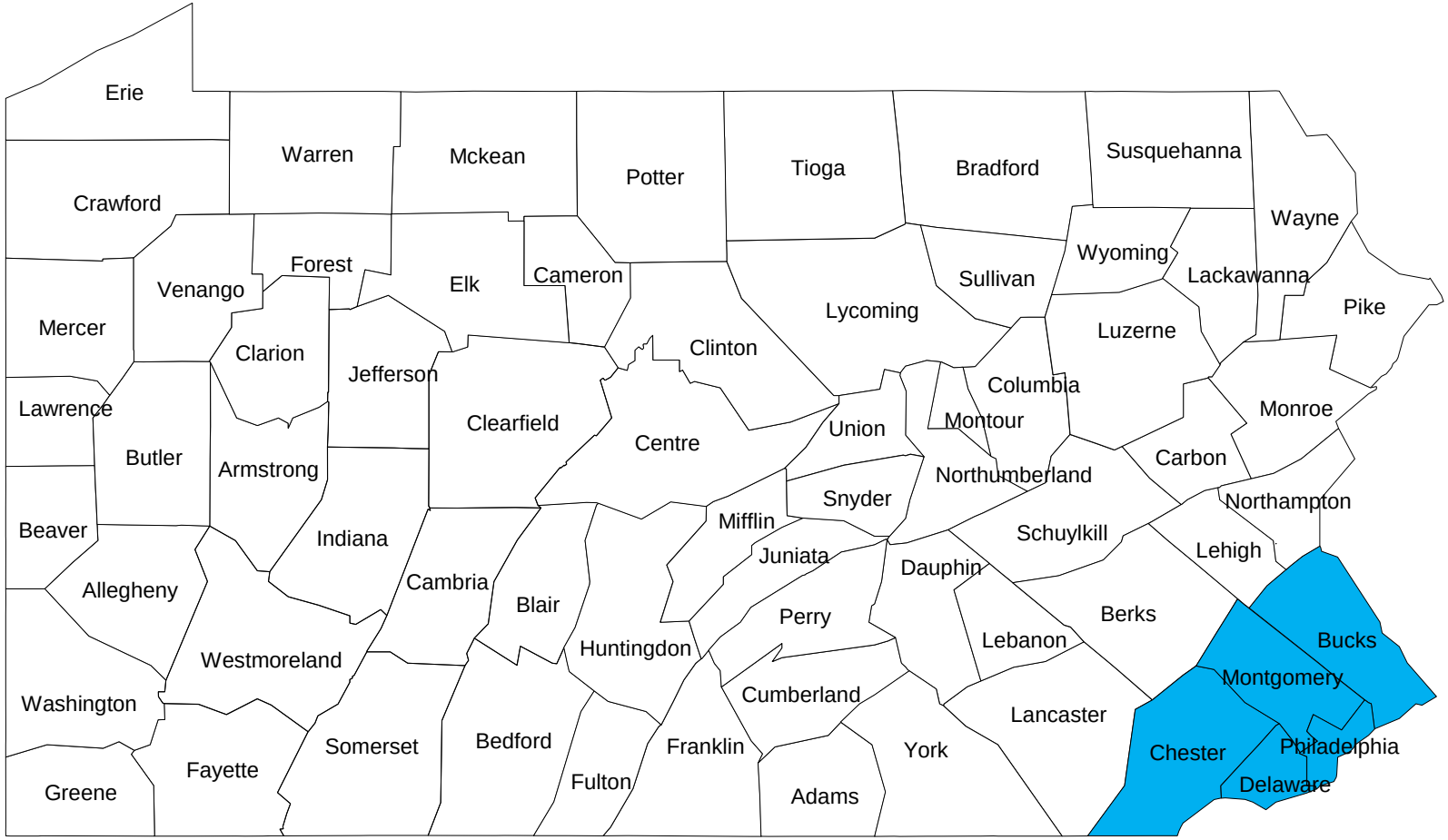
Unique AV Justification file

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. Membership: 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. a. Experience Period Claims: 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. COVID: a. Please confirm that Tables 2-4 of the PAAM Exhibits do not have any COVID adjustment. Additionally, please confirm that any COVID adjustment factor in the filing is reflected in Table 5 of the PAAM Exhibits.

   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)

	MLR		Member 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:

	HIOS IDs	**Plan Marketing Name**	**FDC Generic Rx**
KHPE	33871PA0120004, 33871PA0040014	Keystone HMO Bronze	X

Completeness and Redaction Justification Checklist

Issuer Name: Keystone Health Plan East
Market: Individual HMO
SERFF ID: INAC-134056069

TOC #	Description	Completed (Mark with "X")	Redaction Justification		
			Redacted (Y/N)	Page # in Public PDF	Justification submitted (Y/NA)
Federal Documents Required to Be Filed with PID					
A.2.	RFJ Part I - Unified Rate Review Template	X			
	RFJ Part II – Consumer Friendly Justification				
	RFJ Part III – Actuarial Memorandum	X	Y	31-39	Y
	Federal Rates Template	X			
Summary Documents/Confirmation of HIOS & SERFF Submissions					
A.2.B.	HIOS Submission	X			
A.2.C.	SERFF Submission	X			
A.2.D.	SERFF Rate/Rule Schedule Tab	X			
B.	Cover Letter & PA Bulletin Information	X			
PA Actuarial Memorandum and Rate Exhibits					
D.1.A.	Company Information	X	Y	4	Y
D.1.B.	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.D.	Membership Count	X	N	5	N/A
	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	X	N	13	N/A
D.1.G.	Credibility of Data	X	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	X	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	X	N	17	N/A
D.2.B.	Retention Items	X	N	9	N/A
	PA Act. Exhibits Table 6	X	N	17	N/A
D.2.C.	Normalized Market-Adjusted Projected Allowed Total Claims	X	N	10	N/A
	PA Act. Exhibits Table 7	X	N	17	N/A
D.2.D.	Components of Rate Change	X	N	10	N/A
	PA Act. Exhibits Table 8	X	N	17	N/A
	PA Act. Exhibits Table 9	X	N	17	N/A
D.3.	Plan Rate Development	X	N	10	N/A
	PA Act. Exhibits Table 10	X	N	19	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	20-21	N/A
D.5.A.	Age and Tobacco Factors	X	N	11	N/A
	PA Act. Exhibits Table 12	X	N	22	N/A
D.5.B.	Geographic Factors	X	N	11	N/A
	PA Act. Exhibits Table 13	X	N	22	N/A
D.5.C.	Network Factors	X	N	11	N/A
	PA Act. Exhibits Table 14	X	N	22	N/A
D.5.D	*Rate Change Request Summary*	X	N	23	N/A
	PA Act. Exhibits Table 15	X	N	23	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	Y
Additional Exhibits					
E.	Department Plan Design Summary & Rate Tables	X	N	25-27	N/A
	Service Area Map	X	N	76	N/A
Summary Documents/Confirmation of HIOS & SERFF Submissions		X			Y