

**State:** Pennsylvania **Filing Company:** National Foundation Life Insurance Company  
**TOI/Sub-TOI:** H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)  
**Product Name:** EHB Plan  
**Project Name/Number:** 2017 EHB Rates/

### Filing at a Glance

Company: National Foundation Life Insurance Company  
 Product Name: EHB Plan  
 State: Pennsylvania  
 TOI: H16I Individual Health - Major Medical  
 Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)  
 Filing Type: Rate - G.I. (Guaranteed Issue)  
 Date Submitted: 05/11/2016  
 SERFF Tr Num: USHG-130529979  
 SERFF Status: Pending State Action  
 State Tr Num: USHG-130529979  
 State Status: Pending Finalization  
 Co Tr Num: 2017 PA EHB NFL RATES OFF EXCHG  
  
 Implementation: 01/01/2017  
 Date Requested:  
 Author(s): Cecelia Marshall, Tom Kennedy, Diana Ivie, Daniel Cruz, Jamie Nordling  
 Reviewer(s): Rashmi Mathur (primary)  
 Disposition Date:  
 Disposition Status:  
 Implementation Date:  
  
 State Filing Description:  
 Binder USHG-PA17-125061233; Off Exchange; rri=9.95% ari=9.95%

**State:** Pennsylvania **Filing Company:** National Foundation Life Insurance Company  
**TOI/Sub-TOI:** H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)  
**Product Name:** EHB Plan  
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## General Information

Project Name: 2017 EHB Rates	Status of Filing in Domicile:
Project Number:	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type: Individual
Overall Rate Impact: 9.95%	Filing Status Changed: 07/26/2016
	State Status Changed: 08/12/2016
Deemer Date:	Created By: Diana Ivie
Submitted By: Diana Ivie	Corresponding Filing Tracking Number: USHG-130533866
	State TOI: H16I Individual Health - Major Medical
State Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)	

PPACA: Non-Grandfathered Immed Mkt Reforms

PPACA Notes: null  
 Include Exchange Intentions: No  
 Additional Benefits: No

Filing Description:  
 RE: INDIVIDUAL MARKET – OFF EXCHANGE ONLY

Rate Filing for Plan Year 2017 ACA Compliant forms:  
 EHB-2017-IP-PA-NFL with Policy Schedule EHB-2017-SCH-PA-NFL

Please see cover letter for more details.

## Company and Contact

### Filing Contact Information

Diana Ivie, Actuarial Assistant [ivied@ushealthgroup.com](mailto:ivied@ushealthgroup.com)  
 300 Burnett Street 817-878-3635 [Phone]  
 Suite 200  
 Fort Worth, TX 76102

### Filing Company Information

National Foundation Life Insurance Company	CoCode: 98205	State of Domicile: Texas
300 Burnett Street	Group Code: 839	Company Type: Accident, Life and Health
Suite 200	Group Name:	State ID Number:
Fort Worth, TX 76102	FEIN Number: 73-1187572	
(817) 878-3328 ext. [Phone]		

## Filing Fees

Fee Required? Yes

**State:** Pennsylvania **Filing Company:** National Foundation Life Insurance Company  
**TOI/Sub-TOI:** H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)  
**Product Name:** EHB Plan  
**Project Name/Number:** 2017 EHB Rates/

Fee Amount: \$50.00  
Retaliatory? Yes  
Fee Explanation: \$50.00 x 1 Individual Rate Filing = \$50.00  
Per Company: Yes

Company	Amount	Date Processed	Transaction #
National Foundation Life Insurance Company	\$50.00	05/11/2016	109261182

SERFF Tracking #:

USHG-130529979

State Tracking #:

USHG-130529979

Company Tracking #:

2017 PA EHB NFL RATES OFF EXCHG

State: Pennsylvania

Filing Company: National Foundation Life Insurance Company

TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

Product Name: EHB Plan

Project Name/Number: 2017 EHB Rates/

### Rate Information

Rate data applies to filing.

Filing Method: SERFF

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 0.000%

Effective Date of Last Rate Revision: 01/01/2016

Filing Method of Last Filing: SERFF

### Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
National Foundation Life Insurance Company	Increase	9.950%	9.950%	\$0	0	\$0	9.950%	9.950%

State: Pennsylvania Filing Company: National Foundation Life Insurance Company  
 TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)  
 Product Name: EHB Plan  
 Project Name/Number: 2017 EHB Rates/

**Rate Review Detail**

**COMPANY:**

Company Name: National Foundation Life Insurance Company  
 HHS Issuer Id: 37352

**PRODUCTS:**

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
PA EHB NFL	37352PA012	37352-687360061172921439	1

Trend Factors: The total trend is assumed to be 4.4% annually.

**FORMS:**

New Policy Forms: EHB-2017-IP-PA-NFL  
 Affected Forms:  
 Other Affected Forms:

**REQUESTED RATE CHANGE INFORMATION:**

Change Period: Annual  
 Member Months: 0  
 Benefit Change: None  
 Percent Change Requested: Min: 9.95 Max: 9.95 Avg: 9.95

**PRIOR RATE:**

Total Earned Premium: 0.00  
 Total Incurred Claims: 0.00  
 Annual \$: Min: 431.50 Max: 431.50 Avg: 431.50

**REQUESTED RATE:**

Projected Earned Premium: 696,937.00  
 Projected Incurred Claims: 580,549.00  
 Annual \$: Min: 474.43 Max: 474.43 Avg: 474.43

**SERFF Tracking #:**

USHG-130529979

**State Tracking #:**

USHG-130529979

**Company Tracking #:**

2017 PA EHB NFL RATES OFF EXCHG

**State:** Pennsylvania**Filing Company:**

National Foundation Life Insurance Company

**TOI/Sub-TOI:** H161 Individual Health - Major Medical/H161.005A Individual - Preferred Provider (PPO)**Product Name:** EHB Plan**Project Name/Number:** 2017 EHB Rates/

## Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Public documents	EHB-2017-IP-PA-NFL, EHB-2017-SCH-PA-NFL	Other	Previous State Filing Number: USHG-130034220 Rate Action Other Explanation: 9.95	PA NFL 2017 Plan Design Summary and Rate Tables_Rev20160909.pdf, PA NFL 2017 Plan Design Summary and Rate Tables_Rev20160909.xlsx, PA_NFL_EHB_2017_Rate_Tables_Template_Rev20160509.pdf, PA_NFL_EHB_2017_Rate_Tables_Template_Rev20160509.xls,

**SERFF Tracking #:**

USHG-130529979

**State Tracking #:**

USHG-130529979

**Company Tracking #:**

2017 PA EHB NFL RATES OFF EXCHG

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**State:**

Pennsylvania

**Filing Company:**

National Foundation Life Insurance Company

**TOI/Sub-TOI:**

H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

**Product Name:**

EHB Plan

**Project Name/Number:**

2017 EHB Rates/

***Attachment PA NFL 2017 Plan Design Summary and Rate Tables\_Rev20160909.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment PA\_NFL\_EHB\_2017\_Rate\_Tables\_Template\_Rev20160509.xls is not a PDF document and cannot be reproduced here.***

**National Foundation Life Insurance  
Individual Market  
Plan Design Summary**

HIOS Plan ID	On/Off Exchange	Product	Metal	Plan Design Marketing Name	Network	Rating Area	Counties Excluded
37352PA0120001	Off	PPO	Bronze	Essential Health Bronze	PAN001	1	Forest, McKean, Warren Pike, Sullivan, Susquehanna,
37352PA0120001	Off	PPO	Bronze	Essential Health Bronze	PAN001	3	Tioga, Wayne
37352PA0120001	Off	PPO	Bronze	Essential Health Bronze	PAN001	4	None
37352PA0120001	Off	PPO	Bronze	Essential Health Bronze	PAN001	5	Clearfield
37352PA0120001	Off	PPO	Bronze	Essential Health Bronze	PAN001	6	None
37352PA0120001	Off	PPO	Bronze	Essential Health Bronze	PAN001	7	None
37352PA0120001	Off	PPO	Bronze	Essential Health Bronze	PAN001	8	None
37352PA0120001	Off	PPO	Bronze	Essential Health Bronze	PAN001	9	None



Company Name: National Foundation Life Insurance  
 Market: Individual  
 Product: PPO  
 Effective Date of Rates: January 1, 2017

Ending date of Rates: 31-Dec-17

HIOS Plan ID (On Exchange)=>	37352PA0120001		37352PA0120001		37352PA0120001		37352PA0120001		37352PA0120001		37352PA0120001		37352PA0120001		37352PA0120001	
HIOS Plan ID (Off Exchange)=>	37352PA0120001		37352PA0120001		37352PA0120001		37352PA0120001		37352PA0120001		37352PA0120001		37352PA0120001		37352PA0120001	
Form # =>	EHB-2017-IP-PA-NFL		EHB-2017-IP-PA-NFL		EHB-2017-IP-PA-NFL		EHB-2017-IP-PA-NFL		EHB-2017-IP-PA-NFL		EHB-2017-IP-PA-NFL		EHB-2017-IP-PA-NFL		EHB-2017-IP-PA-NFL	
Rating Area =>	1		3		4		5		6		7		8		9	
Counties Excluded in Rating Area =>	NONE		NONE		NONE		NONE		NONE		NONE		NONE		NONE	
Network =>	PAN001		PAN001		PAN001		PAN001		PAN001		PAN001		PAN001		PAN001	
Metal =>	BRONZE		BRONZE		BRONZE		BRONZE		BRONZE		BRONZE		BRONZE		BRONZE	
Plan Name =>	Essential Health Bronze		Essential Health Bronze		Essential Health Bronze		Essential Health Bronze		Essential Health Bronze		Essential Health Bronze		Essential Health Bronze		Essential Health Bronze	
Deductible =>	7150		7150		7150		7150		7150		7150		7150		7150	
Coinsurance =>	100		100		100		100		100		100		100		100	
Copays =>	NONE		NONE		NONE		NONE		NONE		NONE		NONE		NONE	
OOP Maximum =>	7150		7150		7150		7150		7150		7150		7150		7150	
Pediatric Dental (Yes/No) =>	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
0 - 20	\$188.19	\$188.19	\$193.41	\$193.41	\$179.35	\$179.35	\$180.56	\$180.56	\$217.51	\$217.51	\$206.26	\$206.26	\$209.28	\$209.28	\$189.39	\$189.39
21	\$296.51	\$355.81	\$304.74	\$365.68	\$282.59	\$339.10	\$284.48	\$341.38	\$342.71	\$411.25	\$324.99	\$389.99	\$329.74	\$395.68	\$298.41	\$358.09
22	\$296.51	\$355.81	\$304.74	\$365.68	\$282.59	\$339.10	\$284.48	\$341.38	\$342.71	\$411.25	\$324.99	\$389.99	\$329.74	\$395.68	\$298.41	\$358.09
23	\$296.51	\$355.81	\$304.74	\$365.68	\$282.59	\$339.10	\$284.48	\$341.38	\$342.71	\$411.25	\$324.99	\$389.99	\$329.74	\$395.68	\$298.41	\$358.09
24	\$296.51	\$355.81	\$304.74	\$365.68	\$282.59	\$339.10	\$284.48	\$341.38	\$342.71	\$411.25	\$324.99	\$389.99	\$329.74	\$395.68	\$298.41	\$358.09
25	\$297.55	\$357.06	\$305.80	\$366.96	\$283.57	\$340.29	\$285.48	\$342.57	\$343.91	\$412.69	\$326.13	\$391.35	\$330.89	\$397.07	\$299.45	\$359.34
26	\$303.47	\$364.17	\$311.89	\$374.27	\$289.22	\$347.07	\$291.17	\$349.40	\$350.76	\$420.91	\$332.62	\$399.15	\$337.48	\$404.98	\$305.42	\$366.50
27	\$310.59	\$372.70	\$319.20	\$383.04	\$296.00	\$355.20	\$297.99	\$357.59	\$358.98	\$430.78	\$340.42	\$408.50	\$345.39	\$414.47	\$312.57	\$375.09
28	\$322.14	\$386.57	\$331.08	\$397.30	\$307.02	\$368.42	\$309.08	\$370.90	\$372.34	\$446.81	\$353.09	\$423.70	\$358.24	\$429.89	\$324.21	\$389.05
29	\$331.63	\$397.95	\$340.83	\$409.00	\$316.05	\$379.27	\$318.18	\$381.81	\$383.30	\$459.96	\$363.48	\$436.18	\$368.79	\$442.55	\$333.75	\$400.50
30	\$336.37	\$403.64	\$345.70	\$414.84	\$320.57	\$384.69	\$322.73	\$387.27	\$388.78	\$466.54	\$368.68	\$442.41	\$374.06	\$448.87	\$338.52	\$406.23
31	\$343.48	\$412.18	\$353.01	\$423.62	\$327.35	\$392.82	\$329.55	\$395.46	\$397.00	\$476.40	\$376.47	\$451.77	\$389.99	\$458.37	\$345.68	\$414.82
32	\$350.59	\$420.71	\$360.32	\$432.39	\$334.13	\$400.96	\$336.38	\$403.65	\$405.22	\$486.27	\$384.27	\$461.12	\$389.88	\$467.86	\$352.84	\$423.41
33	\$355.04	\$426.05	\$364.89	\$437.87	\$338.37	\$406.04	\$340.64	\$408.77	\$410.36	\$492.43	\$389.14	\$466.97	\$394.83	\$473.79	\$357.31	\$428.78
34	\$359.78	\$431.74	\$369.76	\$443.72	\$342.89	\$411.46	\$345.19	\$414.23	\$415.84	\$499.01	\$394.34	\$473.21	\$400.10	\$480.12	\$362.09	\$434.50
35	\$362.15	\$434.58	\$372.20	\$446.64	\$345.15	\$414.18	\$347.47	\$416.96	\$418.58	\$502.30	\$396.94	\$476.33	\$402.74	\$483.28	\$364.47	\$437.37
36	\$364.52	\$437.43	\$374.64	\$449.57	\$347.41	\$416.89	\$349.74	\$419.69	\$421.32	\$505.59	\$399.54	\$479.44	\$405.37	\$486.45	\$366.86	\$440.23
37	\$366.89	\$440.27	\$377.07	\$452.49	\$349.67	\$419.60	\$352.01	\$422.42	\$424.06	\$508.87	\$402.13	\$482.56	\$408.01	\$489.61	\$369.24	\$443.09
38	\$369.27	\$443.12	\$379.51	\$455.41	\$351.92	\$422.31	\$354.29	\$425.15	\$426.80	\$512.16	\$404.73	\$485.68	\$410.64	\$492.77	\$371.63	\$445.96
39	\$374.01	\$448.81	\$384.38	\$461.26	\$356.44	\$427.73	\$358.84	\$430.61	\$432.28	\$518.74	\$409.93	\$491.92	\$415.92	\$499.10	\$376.40	\$451.68
40	\$378.75	\$454.50	\$389.26	\$467.11	\$360.96	\$433.16	\$363.39	\$436.07	\$437.76	\$525.32	\$415.13	\$498.15	\$421.19	\$505.43	\$381.17	\$457.41
41	\$385.86	\$463.03	\$396.57	\$475.88	\$367.74	\$441.29	\$370.21	\$444.26	\$445.98	\$535.18	\$422.92	\$507.51	\$429.10	\$514.92	\$388.33	\$466.00
42	\$392.68	\$471.21	\$403.57	\$484.29	\$374.24	\$449.09	\$376.75	\$452.10	\$453.86	\$544.64	\$430.39	\$516.47	\$436.68	\$524.02	\$395.19	\$474.23
43	\$402.16	\$482.59	\$413.32	\$495.98	\$383.28	\$459.93	\$385.85	\$463.02	\$464.82	\$557.79	\$440.79	\$528.95	\$447.23	\$536.67	\$404.74	\$485.68
44	\$414.02	\$496.82	\$425.50	\$510.60	\$394.57	\$473.49	\$397.23	\$476.67	\$478.53	\$574.23	\$453.78	\$544.54	\$460.41	\$552.49	\$416.67	\$500.00
45	\$427.94	\$513.53	\$439.82	\$527.78	\$407.85	\$489.42	\$410.59	\$492.71	\$494.63	\$593.55	\$469.05	\$562.86	\$475.90	\$571.08	\$430.68	\$516.82
46	\$444.54	\$533.45	\$456.88	\$548.25	\$423.67	\$508.40	\$426.51	\$511.81	\$513.81	\$616.57	\$487.24	\$584.69	\$494.36	\$593.23	\$447.39	\$536.86
47	\$463.21	\$555.85	\$476.06	\$571.28	\$441.46	\$529.75	\$444.43	\$533.31	\$535.39	\$642.46	\$507.70	\$609.24	\$515.12	\$618.14	\$466.18	\$559.41
48	\$484.55	\$581.46	\$497.99	\$597.59	\$461.80	\$554.15	\$464.90	\$557.88	\$560.05	\$672.06	\$531.09	\$637.31	\$538.85	\$646.62	\$487.65	\$585.18
49	\$505.59	\$606.71	\$519.62	\$623.54	\$481.85	\$578.22	\$485.09	\$582.10	\$584.37	\$701.24	\$554.15	\$664.98	\$562.25	\$674.70	\$508.83	\$610.59
50	\$529.30	\$635.16	\$543.99	\$652.78	\$504.44	\$605.33	\$507.83	\$609.40	\$611.77	\$734.13	\$580.14	\$696.17	\$588.61	\$706.34	\$532.69	\$639.23
51	\$552.71	\$663.25	\$568.05	\$681.66	\$526.76	\$632.11	\$530.30	\$636.36	\$638.83	\$766.60	\$605.80	\$726.96	\$614.65	\$737.58	\$556.25	\$667.50
52	\$578.50	\$694.19	\$594.55	\$713.46	\$551.33	\$661.60	\$555.03	\$666.04	\$668.63	\$802.36	\$634.06	\$760.87	\$643.32	\$771.99	\$582.20	\$698.64
53	\$604.58	\$725.49	\$621.35	\$745.62	\$576.19	\$691.42	\$580.06	\$696.07	\$698.78	\$838.53	\$662.65	\$795.17	\$672.32	\$806.79	\$608.45	\$730.14
54	\$632.73	\$759.28	\$650.29	\$780.34	\$603.02	\$723.62	\$607.07	\$728.48	\$731.32	\$877.58	\$693.50	\$832.20	\$703.63	\$844.36	\$636.78	\$764.14
55	\$660.88	\$793.06	\$679.22	\$815.07	\$629.85	\$755.82	\$634.08	\$760.90	\$763.86	\$916.63	\$724.36	\$869.23	\$734.94	\$881.93	\$665.12	\$798.14
56	\$691.41	\$829.69	\$710.59	\$852.71	\$658.94	\$790.73	\$663.37	\$796.04	\$799.14	\$958.97	\$757.82	\$909.38	\$768.89	\$922.67	\$695.84	\$835.00
57	\$722.23	\$866.68	\$742.27	\$890.72	\$688.32	\$825.98	\$692.94	\$831.53	\$834.77	\$1,001.72	\$791.60	\$949.92	\$803.16	\$963.80	\$726.86	\$872.21
58	\$755.13	\$906.15	\$776.08	\$931.30	\$719.67	\$863.60	\$724.50	\$869.40	\$872.79	\$1,047.34	\$827.66	\$993.19	\$839.75	\$1,007.69	\$759.96	\$911.95
59	\$771.43	\$925.71	\$792.83	\$951.40	\$735.20	\$882.24	\$740.14	\$888.17	\$891.63	\$1,069.95	\$845.52	\$1,014.63	\$857.87	\$1,029.45	\$776.37	\$931.64
60	\$804.32	\$965.19	\$826.64	\$991.97	\$766.55	\$919.86	\$771.70	\$926.04	\$929.65	\$1,115.58	\$881.58	\$1,057.89	\$894.45	\$1,073.35	\$809.47	\$971.37
61	\$832.77	\$999.33	\$855.88	\$1,027.06	\$793.67	\$952.40	\$799.00	\$958.80	\$962.53	\$1,155.04	\$912.76	\$1,095.31	\$926.09	\$1,111.31	\$838.11	\$1,005.73
62	\$851.44	\$1,021.73	\$875.07	\$1,050.08	\$811.46	\$973.75	\$816.91	\$980.30	\$984.11	\$1,180.93	\$933.23	\$1,119.87	\$946.86	\$1,136.23	\$856.90	\$1,028.27
63	\$874.86	\$1,049.83	\$899.13	\$1,078.96	\$833.77	\$1,000.53	\$839.38	\$1,007.25	\$1,011.17	\$1,213.41	\$958.89	\$1,150.66	\$972.89	\$1,167.47	\$880.46	\$1,056.55
64+	\$888.93	\$1,066.72	\$913.60	\$1,096.32	\$847.19	\$1,016.63	\$852.88	\$1,023.46	\$1,027.44	\$1,232.93	\$974.32	\$1,169.18	\$988.55	\$1,186.26	\$894.63	\$1,073.55
	\$888.93	\$1,066.72	\$913.60	\$1,096.32	\$847.19	\$1,016.63	\$852.88	\$1,023.46	\$1,027.44	\$1,232.93	\$974.32	\$1,169.18	\$988.55	\$1,186.26	\$894.63	\$1,073.55

2017 Rates Table Template v6.0		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 a community rating state, select Family Option under Age and fill in all columns.			
		If you are not community rating state, select 0-20 under Age 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*	37352				
Federal TIN*	73-1187572				
Rate Effective Date*	1/1/2017				
Rate Expiration Date*	12/31/2017				
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an Individual tobacco enrollee on a plan
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	0-20	188.19	188.19
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	21	296.51	355.81
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	22	296.51	355.81
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	23	296.51	355.81
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	24	296.51	355.81
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	25	297.55	357.06
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	26	303.47	364.17
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	27	310.59	372.70
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	28	322.14	386.57
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	29	331.63	397.95
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	30	336.37	403.64
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	31	343.48	412.18
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	32	350.59	420.71
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	33	355.04	426.05
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	34	359.78	431.74
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	35	362.15	434.58
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	36	364.52	437.43
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	37	366.89	440.27
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	38	369.27	443.12
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	39	374.01	448.81
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	40	378.75	454.50
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	41	385.86	463.03
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	42	392.68	471.21
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	43	402.16	482.59
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	44	414.02	496.82
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	45	427.94	513.53
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	46	444.54	533.45
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	47	463.21	555.85
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	48	484.55	581.46
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	49	505.59	606.71
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	50	529.30	635.16
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	51	552.71	663.25
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	52	578.50	694.19
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	53	604.58	725.49
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	54	632.73	759.28
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	55	660.88	793.06
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	56	691.41	829.69
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	57	722.23	866.68
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	58	755.13	906.15
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	59	771.43	925.71
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	60	804.32	965.19
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	61	832.77	999.33
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	62	851.44	1021.73
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	63	874.86	1049.83
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	64	888.93	1066.72
37352PA0120001	Rating Area 1	Tobacco User/Non-Tobacco User	65 and over	888.93	1066.72
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	0-20	193.41	193.41
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	21	304.74	365.68
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	22	304.74	365.68
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	23	304.74	365.68
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	24	304.74	365.68
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	25	305.80	366.96
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	26	311.89	374.27
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	27	319.20	383.04
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	28	331.08	397.30
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	29	340.83	409.00
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	30	345.70	414.84
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	31	353.01	423.62
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	32	360.32	432.39
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	33	364.89	437.87
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	34	369.76	443.72
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	35	372.20	446.64
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	36	374.64	449.57
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	37	377.07	452.49
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	38	379.51	455.41
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	39	384.38	461.26
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	40	389.26	467.11
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	41	396.57	475.88
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	42	403.57	484.29
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	43	413.32	495.98
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	44	425.50	510.60
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	45	439.82	527.78
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	46	456.88	548.25
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	47	476.06	571.28
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	48	497.99	597.59
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	49	519.62	623.54
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	50	543.99	652.78
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	51	568.05	681.66
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	52	594.55	713.46
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	53	621.35	745.62
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	54	650.29	780.34
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	55	679.22	815.07
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	56	710.59	852.71
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	57	742.27	890.72
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	58	776.08	931.30
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	59	792.83	951.40
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	60	826.64	991.97
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	61	855.88	1027.06
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	62	875.07	1050.08
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	63	899.13	1078.96
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	64	913.60	1096.32
37352PA0120001	Rating Area 3	Tobacco User/Non-Tobacco User	65 and over	913.60	1096.32
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	0-20	179.35	179.35
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	21	282.59	339.10
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	22	282.59	339.10
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	23	282.59	339.10
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	24	282.59	339.10
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	25	283.57	340.29
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	26	289.22	347.07
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	27	296.00	355.20
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	28	307.02	368.42
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	29	316.05	379.27
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	30	320.57	384.69
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	31	327.35	392.82
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	32	334.13	400.96
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	33	338.37	406.04
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	34	342.89	411.46
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	35	345.15	414.18
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	36	347.41	416.89
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	37	349.67	419.60
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	38	351.92	422.31
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	39	356.44	427.73
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	40	360.96	433.16
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	41	367.74	441.29
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	42	374.24	449.09
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	43	383.28	459.93
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	44	394.57	473.49
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	45	407.85	489.42
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	46	423.67	508.40
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	47	441.46	529.75

37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	48	461.80	554.15
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	49	481.85	578.22
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	50	504.44	605.33
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	51	526.76	632.11
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	52	551.33	661.60
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	53	576.19	691.42
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	54	603.02	723.62
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	55	629.85	755.82
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	56	658.94	790.73
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	57	688.32	825.98
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	58	719.67	863.60
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	59	735.20	882.24
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	60	766.55	919.86
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	61	793.67	952.40
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	62	811.46	973.75
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	63	833.77	1000.53
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	64	847.19	1016.63
37352PA0120001	Rating Area 4	Tobacco User/Non-Tobacco User	65 and over	847.19	1016.63
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	0-20	180.56	180.56
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	21	284.48	341.38
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	22	284.48	341.38
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	23	284.48	341.38
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	24	284.48	341.38
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	25	285.48	342.57
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	26	291.17	349.40
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	27	297.99	357.59
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	28	309.08	370.90
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	29	318.18	381.81
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	30	322.73	387.27
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	31	329.55	395.46
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	32	336.38	403.65
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	33	340.64	408.77
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	34	345.19	414.23
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	35	347.47	416.96
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	36	349.74	419.69
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	37	352.01	422.42
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	38	354.29	425.15
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	39	358.84	430.61
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	40	363.39	436.07
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	41	370.21	444.26
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	42	376.75	452.10
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	43	385.85	463.02
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	44	397.23	476.67
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	45	410.59	492.71
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	46	426.51	511.81
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	47	444.43	533.31
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	48	464.90	557.88
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	49	485.09	582.10
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	50	507.83	609.40
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	51	530.30	636.36
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	52	555.03	666.04
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	53	580.06	696.07
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	54	607.07	728.48
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	55	634.08	760.90
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	56	663.37	796.04
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	57	692.94	831.53
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	58	724.50	869.40
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	59	740.14	888.17
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	60	771.70	926.04
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	61	799.00	958.80
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	62	816.91	980.30
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	63	839.38	1007.25
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	64	852.88	1023.46
37352PA0120001	Rating Area 5	Tobacco User/Non-Tobacco User	65 and over	852.88	1023.46
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	217.51	217.51
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	21	342.71	411.25
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	22	342.71	411.25
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	23	342.71	411.25
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	24	342.71	411.25
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	25	343.91	412.69
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	26	350.76	420.91
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	27	358.98	430.78
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	28	372.34	446.81
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	29	383.30	459.96
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	30	388.78	466.54
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	31	397.00	476.40
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	32	405.22	486.27
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	33	410.36	492.43
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	34	415.84	499.01
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	35	418.58	502.30
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	36	421.32	505.59
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	37	424.06	508.87
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	38	426.80	512.16
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	39	432.28	518.74
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	40	437.76	525.32
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	41	445.98	535.18
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	42	453.86	544.64
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	43	464.82	557.79
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	44	478.53	574.23
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	45	494.63	593.55
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	46	513.81	616.57
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	47	535.39	642.46
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	48	560.05	672.06
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	49	584.37	701.24
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	50	611.77	734.13
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	51	638.83	766.60
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	52	668.63	802.36
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	53	698.78	838.53
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	54	731.32	877.58
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	55	763.86	916.63
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	56	799.14	958.97
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	57	834.77	1001.72
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	58	872.79	1047.34
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	59	891.63	1069.95
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	60	929.65	1115.58
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	61	962.53	1155.04
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	62	984.11	1180.93
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	63	1011.17	1213.41
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	64	1027.44	1232.93
37352PA0120001	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	1027.44	1232.93
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	206.26	206.26
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	21	324.99	389.99
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	22	324.99	389.99
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	23	324.99	389.99
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	24	324.99	389.99
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	25	326.13	391.35
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	26	332.62	399.15
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	27	340.42	408.50
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	28	353.09	423.70
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	29	363.48	436.18
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	30	368.68	442.41
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	31	376.47	451.77
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	32	384.27	461.12
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	33	389.14	466.97
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	34	394.34	473.21
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	35	396.94	476.33
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	36	399.54	479.44
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	37	402.13	482.56
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	38	404.73	485.68
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	39	409.93	491.92
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	40	415.13	498.15
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	41	422.92	507.51
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	42	430.39	516.47
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	43	440.79	528.95
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	44	453.78	544.54
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	45	469.05	562.86
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	46	487.24	584.69
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	47	507.70	609.24
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	48	531.09	637.31

37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	49	554.15	664.98
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	50	580.14	696.17
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	51	605.80	726.96
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	52	634.06	760.87
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	53	662.65	795.17
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	54	693.50	832.20
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	55	724.36	869.23
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	56	757.82	909.38
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	57	791.60	949.92
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	58	827.66	993.19
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	59	845.52	1014.63
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	60	881.58	1057.89
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	61	912.76	1095.31
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	62	933.23	1119.87
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	63	958.89	1150.66
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	64	974.32	1169.18
37352PA0120001	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	974.32	1169.18
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	0-20	209.28	209.28
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	21	329.74	395.68
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	22	329.74	395.68
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	23	329.74	395.68
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	24	329.74	395.68
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	25	330.89	397.07
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	26	337.48	404.98
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	27	345.39	414.47
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	28	358.24	429.89
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	29	368.79	442.55
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	30	374.06	448.87
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	31	381.97	458.37
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	32	389.88	467.86
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	33	394.83	473.79
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	34	400.10	480.12
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	35	402.74	483.28
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	36	405.37	486.45
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	37	408.01	489.61
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	38	410.64	492.77
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	39	415.92	499.10
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	40	421.19	505.43
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	41	429.10	514.92
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	42	436.68	524.02
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	43	447.23	536.67
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	44	460.41	552.49
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	45	475.90	571.08
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	46	494.36	593.23
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	47	515.12	618.14
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	48	538.85	646.62
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	49	562.25	674.70
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	50	588.61	706.34
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	51	614.65	737.58
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	52	643.32	771.99
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	53	672.32	806.79
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	54	703.63	844.36
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	55	734.94	881.93
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	56	768.89	922.67
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	57	803.16	963.80
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	58	839.75	1007.69
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	59	857.87	1029.45
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	60	894.45	1073.35
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	61	926.09	1111.31
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	62	946.86	1136.23
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	63	972.89	1167.47
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	64	988.55	1186.26
37352PA0120001	Rating Area 8	Tobacco User/Non-Tobacco User	65 and over	988.55	1186.26
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	189.39	189.39
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	21	298.41	358.09
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	22	298.41	358.09
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	23	298.41	358.09
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	24	298.41	358.09
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	25	299.45	359.34
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	26	305.42	366.50
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	27	312.57	375.09
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	28	324.21	389.05
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	29	333.75	400.50
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	30	338.52	406.23
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	31	345.68	414.82
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	32	352.84	423.41
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	33	357.31	428.78
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	34	362.09	434.50
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	35	364.47	437.37
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	36	366.86	440.23
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	37	369.24	443.09
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	38	371.63	445.96
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	39	376.40	451.68
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	40	381.17	457.41
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	41	388.33	466.00
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	42	395.19	474.23
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	43	404.74	485.68
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	44	416.67	500.00
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	45	430.68	516.82
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	46	447.39	536.86
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	47	466.18	559.41
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	48	487.65	585.18
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	49	508.83	610.59
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	50	532.69	639.23
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	51	556.25	667.50
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	52	582.20	698.64
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	53	608.45	730.14
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	54	636.78	764.14
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	55	665.12	798.14
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	56	695.84	835.00
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	57	726.86	872.23
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	58	759.96	911.95
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	59	776.37	931.64
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	60	809.47	971.37
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	61	838.11	1005.73
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	62	856.90	1028.27
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	63	880.46	1056.55
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	64	894.63	1073.55
37352PA0120001	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	894.63	1073.55

**State:** Pennsylvania **Filing Company:** National Foundation Life Insurance Company  
**TOI/Sub-TOI:** H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)  
**Product Name:** EHB Plan  
**Project Name/Number:** 2017 EHB Rates/

## Supporting Document Schedules

<b>Satisfied - Item:</b>	Transmittal Letter (A&H)
<b>Comments:</b>	
<b>Attachment(s):</b>	PA EHB Cover letter 2017 NFL.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Consumer Disclosure Form
<b>Comments:</b>	
<b>Attachment(s):</b>	PA Part II Justification NFL.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Unified Rate Review Template
<b>Comments:</b>	
<b>Attachment(s):</b>	URRT_PA_NFL_06_03_2016_11_25.xlsm URRT_PA_NFL_06_03_2016_11_25.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Public Viewing Documents
<b>Comments:</b>	
<b>Attachment(s):</b>	PA Rate Change Request Summary 2017 EHB NFL.pdf 37352_01012017_IND_RedactedAM_Rev20160608.pdf PA SERFF Actuarial Memorandum NFL Rev 20160513_Redacted rev20160608.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	PA Actuarial Memorandum Rate Exhibits
<b>Comments:</b>	
<b>Attachment(s):</b>	2017 PA Actuarial Memorandum Rate Exhibits Template NFL.pdf 2017 PA Actuarial Memorandum Rate Exhibits Template NFL.xlsx
<b>Item Status:</b>	
<b>Status Date:</b>	

**SERFF Tracking #:**

USHG-130529979

**State Tracking #:**

USHG-130529979

**Company Tracking #:**

2017 PA EHB NFL RATES OFF EXCHG

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**State:**

Pennsylvania

**Filing Company:**

National Foundation Life Insurance Company

**TOI/Sub-TOI:**

H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

**Product Name:**

EHB Plan

**Project Name/Number:**

2017 EHB Rates/

***Attachment URRT\_PA\_NFL\_06\_03\_2016\_11\_25.xlsm is not a PDF document and cannot be reproduced here.***

***Attachment 2017 PA Actuarial Memorandum Rate Exhibits Template NFL.xlsx is not a PDF document and cannot be reproduced here.***



# NATIONAL FOUNDATION LIFE INSURANCE COMPANY

300 Burnett Street, Suite 200 • Fort Worth, Texas 76102 • (800) 387-9027

May 11, 2016

Commissioner Teresa Miller  
Pennsylvania Department of Insurance  
1326 Strawberry Square  
Harrisburg, PA 17120

**RE: INDIVIDUAL MARKET – OFF EXCHANGE ONLY**

**National Foundation Life Insurance Company, NAIC# 98205**

**RATE Filing for Plan Year 2017 ACA Compliant forms:**

EHB-2017-IP-PA-NFL with Policy Schedule EHB-2017-SCH-PA-NFL

HIOS Issuer ID # 37352, SERFF# USHG-130529979, Binder ID# USHG-PA17-125061233

Dear Commissioner Miller:

The enclosed rates are hereby submitted for your review. These rates are intended to be effective 1/1/2017 for the above referenced forms. These forms will be offered in the Individual market and will be offered OFF EXCHANGE only. These are Individual Major Medical products which cover the Essential Health Benefits (EHB) as required under the Patient Protection and Affordable Care Act (PPACA).

We believe the product changes for Plan Year 2017 are in compliance with the federal Uniform Modification of Coverage rules. We are currently offering only the Bronze metal level. The Bronze Plan Deductible will change from \$6,850 to \$7,150 for Plan Year 2017.

The existing HIOS Product IDs will be mapped to new form numbers for Plan Year 2017.

<u>Product ID:</u>	<u>CURRENT 2016 FORM#</u>	<u>NEW 2017 FORM#</u>	<u>Description</u>
37352PA012	EHB-2016-IP-PA-NFL	EHB-2017-IP-PA-NFL	Adult/Family plan

The proposed rates for 2017 are 9.95% higher than the current rates. This increase does not vary by plan. Any policyholders in force on the current form will be given the appropriate advanced notification and offered the new form for 2017. **We currently have 0 policies in force in your state.** Please see Actuarial Memorandum in support of these modifications.

The new forms have been submitted as well as the required HIOS rate filing for Plan Year 2017.

We appreciate your consideration of this filing. If you should have any questions or need additional information, please feel free to contact me.

Sincerely,



Diana Ivie  
Actuarial Assistant  
Telephone: (800) 387-9027 ext. 635  
Email: lvied@ushealthgroup.com

## **National Foundation Life Insurance Company**

The rate increase will affect 0 inforce members. The rate increase applied to all plans is equal to 9.95% and is due to an increase in medical cost and utilization of 4.4%, the elimination of the Federal Transitional Reinsurance Program in 2017 resulting in a 6.27% increase and a .9% decrease to account for the tobacco normalization factor. This rate increase is not based on financial experience but reflects the rate we feel that will adequately meet projected profit and financial goals of the company while maintaining the reasonableness of benefits provided to customers in relation to the premiums charged. There are no changes in administrative costs that affect the rates.



A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	X	Y
1	<b>Unified Rate Review v3.3</b>																						
2																							
3	Company Legal Name:	National Foundation Life Insur:State:										PA											
4	HIOS Issuer ID:	37352										Market:	Individual										
5	Effective Date of Rate Change(s):	1/1/2017																					
6																							
7																							
8	<b>Market Level Calculations (Same for all Plans)</b>																						
9																							
10																							
11	<b>Section I: Experience period data</b>																						
12	Experience Period:	1/1/2015	to	12/31/2015																			
13		<u>Experience Period</u>																					
14	Premiums (net of MLR Rebate) in Experience Period:	<u>Aggregate Amount</u>	<u>PMPM</u>	<u>% of Prem</u>																			
15	Incurred Claims in Experience Period	\$507,804	\$222.23	100.00%																			
16	Allowed Claims:	\$739,182	323.49	145.56%																			
17	Index Rate of Experience Period	\$923,454	404.14	181.85%																			
18	Experience Period Member Months		\$404.00																				
19																							
20	<b>Section II: Allowed Claims, PMPM basis</b>																						
21		<u>Experience Period</u>			<u>Projection Period:</u>		1/1/2017	to	12/31/2017	<u>Mid-point to Mid-point, Experience to Projection:</u>		24	months										
22		<u>on Actual Experience Allowed</u>			<u>Adj't. from Experience to Annualized Trend</u>				<u>Projections, before credibility Adjustment</u>			<u>Credibility Manual</u>											
23	<u>Benefit Category</u>	<u>Utilization Description</u>	<u>Utilization per 1,000</u>	<u>Average Cost/Service</u>	<u>PMPM</u>	<u>Pop'l risk Morbidity</u>		<u>Other</u>	<u>Cost</u>	<u>Util</u>	<u>Utilization per 1,000</u>	<u>Average Cost/Service</u>	<u>PMPM</u>	<u>Utilization per 1,000</u>	<u>Average Cost/Service</u>	<u>PMPM</u>							
24	Inpatient Hospital	Admits	110.28	\$31,223.54	\$286.94	1.806	1.259	1.029	1.014		204.78	\$41,623.50	\$710.31	190.20	\$12,507.62	\$198.25							
25	Outpatient Hospital	Visits	708.97	887.61	52.44	1.806	1.259	1.029	1.014		1,316.50	1,183.26	129.81	1312.76	1,877.93	205.44							
26	Professional	Visits	6,086.65	114.56	58.11	1.806	1.259	1.029	1.014		11,302.43	152.72	143.84	10590.16	198.26	174.97							
27	Other Medical	Visits	105.03	757.70	6.63	1.806	1.259	1.029	1.014		195.03	1,010.08	16.42	398.58	350.29	11.63							
28	Capitation	Benefit Period	0.00	0.00	0.00	1.806	1.259	1.029	1.014		0.00	0.00	0.00	0.00	0.00	0.00							
29	Prescription Drug	Prescriptions	5,052.08	0.00	0.00	1.806	1.259	1.029	1.014		9,381.32	0.00	0.00	4746.62	39.88	15.77							
30	Total				\$404.12								\$1,000.38			\$606.06							
31																							
32	<b>Section III: Projected Experience:</b>	Projected Allowed Experience Claims PMPM (w/applied credibility if applicable)										0.00%	100.00%	<u>After Credibility</u>	<u>Projected Period Totals</u>								
33		Paid to Allowed Average Factor in Projection Period												\$606.06	\$890,306								
34		Projected Incurred Claims, before ACA rein & Risk Adj't, PMPM												\$398.79	\$585,821								
35		Projected Risk Adjustments PMPM												-0.13	(191)								
36		Projected Incurred Claims, before reinsurance recoveries, net of rein prem, PMPM												\$398.92	\$586,012								
37		Projected ACA reinsurance recoveries, net of rein prem, PMPM												0.00	0								
38		Projected Incurred Claims												\$398.92	\$586,012								
39		Administrative Expense Load												18.40%	88.12	129,443							
40		Profit & Risk Load												-3.74%	(17.91)	(26,311)							
41		Taxes & Fees												2.04%	9.77	14,351							
42		Single Risk Pool Gross Premium Avg. Rate, PMPM													\$478.89	\$703,496							
43		Index Rate for Projection Period													\$606.06								
44		% increase over Experience Period													115.49%								
45		% Increase, annualized:													46.80%								
46		<b>Projected Member Months</b>														1,469							
47																							
48																							
49	<b>Information Not Releasable to the Public Unless Authorized by Law:</b> This information has not been publicly disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.																						
50																							

**Product-Plan Data Collection**

Company Legal Name: **National Foundation Life Insurance Company**  
 HIOS Issuer ID: **37352**  
 Effective Date of Rate Change(s): **1/1/2017**

State: **PA**  
 Market: **Individual**

**Product/Plan Level Calculations**

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

Product	Terminated	HB-2015-IP-PA-NF	HB-2017-IP-PA-NF
Product ID:	37352PA007	37352PA010	37352PA012
Metal:	Catastrophic	Bronze	Bronze
AV Metal Value	0.000	0.583	0.594
AV Pricing Value	0.000	0.010	0.783
Plan Category	Terminated	Terminated	Renewing
Plan Type:	PPO	PPO	PPO
Plan Name	Terminated Products 2016 Experience	Essential Health Bronze	Essential Health Bronze
Plan ID (Standard Component ID):	37352PA0070001	37352PA0100001	37352PA0120001
Exchange Plan?	No	No	No
Historical Rate Increase - Calendar Year - 2	0.00%	0.00%	0.00%
Historical Rate Increase - Calendar Year - 1	0.00%	0.00%	0.00%
Historical Rate Increase - Calendar Year 0	0.00%	0.00%	0.00%
Effective Date of Proposed Rates	1/1/2017	1/1/2017	1/1/2017
Rate Change % (over prior filing)	0.00%	0.00%	9.95%
Cum'lative Rate Change % (over 12 mos prior)	0.00%	0.00%	9.95%
Proj'd Per Rate Change % (over Exper. Period)	#DIV/0!	-100.00%	#DIV/0!
Product Rate Increase %	0.00%	0.00%	9.94%

**Section II: Components of Premium Increase (PMPM Dollar Amount above Current Average Rate PMPM)**

Plan ID (Standard Component ID):	Total	37352PA0070001	37352PA0100001	37352PA0120001
Inpatient	\$0.00	\$0.00	\$0.00	\$5.51
Outpatient	\$0.00	\$0.00	\$0.00	\$5.71
Professional	\$0.00	\$0.00	\$0.00	\$4.86
Prescription Drug	\$0.00	\$0.00	\$0.00	\$0.44
Other	\$0.00	\$0.00	\$0.00	\$0.32
Capitation	\$0.00	\$0.00	\$0.00	\$0.00
Administration	\$0.00	\$0.00	\$0.00	\$6.89
Taxes & Fees	\$0.00	\$0.00	\$0.00	\$20.71
Risk & Profit Charge	\$0.00	\$0.00	\$0.00	\$3.03
Total Rate Increase	\$0.00	\$0.00	\$0.00	\$47.47
Member Cost Share Increase	\$0.00	\$0.00	\$0.00	\$0.00

Average Current Rate PMPM	\$431.51	\$227.16	\$431.51	\$431.51
Projected Member Months	1,469	0	0	1,469

**Section III: Experience Period Information**

Plan ID (Standard Component ID):	Total	37352PA0070001	37352PA0100001	37352PA0120001
Plan Adjusted Index Rate	\$0.00	\$0.00	\$435.82	\$0.00
Member Months	2,285	2,285	0	0
Total Premium (TP)	\$0	\$0	\$0	\$0
EHB Percent of TP, [see instructions]	#DIV/0!	100.00%	100.00%	100.00%
state mandated benefits portion of TP that are other than EHB	#DIV/0!	0.00%	0.00%	0.00%
Other benefits portion of TP	#DIV/0!	0.00%	0.00%	0.00%
Total Allowed Claims (TAC)	\$923,454	\$923,454	\$0	\$0
EHB Percent of TAC, [see instructions]	100.00%	100.00%	100.00%	100.00%
state mandated benefits portion of TAC that are other than EHB	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TAC	0.00%	0.00%	0.00%	0.00%
Allowed Claims which are not the issuer's obligation:	\$184,272	\$184,272	\$0	\$0
Portion of above payable by HHS's funds on behalf of insured person, in dollars	\$0	\$0	\$0	\$0
Portion of above payable by HHS on behalf of insured person, as %	0.00%	0.00%	0.00%	0.00%
Total Incurred claims, payable with issuer funds	\$739,182	\$739,182	\$0	\$0
Net Amt of Rein	\$0.00	\$0.00	\$0.00	\$0.00
Net Amt of Risk Adj	\$0.00	\$0.00	\$0.00	\$0.00

Incurred Claims PMPM	\$323.49	\$323.49	#DIV/0!	#DIV/0!
Allowed Claims PMPM	\$404.14	\$404.14	#DIV/0!	#DIV/0!
EHB portion of Allowed Claims, PMPM	\$404.14	\$404.14	#DIV/0!	#DIV/0!

**Section IV: Projected (12 months following effective date)**

Plan ID (Standard Component ID):	Total	37352PA0070001	37352PA0100001	37352PA0120001
Plan Adjusted Index Rate	\$474.43	\$0.00	\$0.00	\$474.43
Member Months	1,469	-	-	1,469
Total Premium (TP)	\$696,937	\$0	\$0	\$696,937
EHB Percent of TP, [see instructions]	100.00%	100.00%	100.00%	100.00%
state mandated benefits portion of TP that are other than EHB	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TP	0.00%	0.00%	0.00%	0.00%
Total Allowed Claims (TAC)	\$890,306	\$0	\$0	\$890,306
EHB Percent of TAC, [see instructions]	100.00%	100.00%	100.00%	100.00%
state mandated benefits portion of TAC that are other than EHB	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TAC	0.00%	0.00%	0.00%	0.00%
Allowed Claims which are not the issuer's obligation:	\$304,484	\$0	\$0	\$304,484
Portion of above payable by HHS's funds on behalf of insured person, in dollars	\$0	\$0	\$0	\$0
Portion of above payable by HHS on behalf of insured person, as %	0.00%	0.00%	0.00%	0.00%
Total Incurred claims, payable with issuer funds	\$585,821	\$0	\$0	\$585,821
Net Amt of Rein	\$0	\$0	\$0	\$0
Net Amt of Risk Adj	-\$191	\$0	\$0	-\$191

Incurred Claims PMPM	\$398.79	#DIV/0!	#DIV/0!	\$398.79
Allowed Claims PMPM	\$606.06	#DIV/0!	#DIV/0!	\$606.06
EHB portion of Allowed Claims, PMPM	\$606.06	#DIV/0!	#DIV/0!	\$606.06

## National Foundation Life Insurance Company – Individual Plans

Rate request filing ID # USHG-130529979- This document is prepared by the insurance company submitting the rate filing as a consumer tool to help explain the rate filing. It is not intended to describe or include all factors or information considered in the review process. For more information, see the filing at <http://www.insurance.pa.gov/Consumers/ACARelatedFilings/>

### Overview

Requested average rate change:	9.95%
Range of requested rate change:	9.95%
Effective date:	1/1/2017
People impacted:	0 lives
Available in:	Rating Areas 1, 3, 4, 5, 6, 7, 8 and 9

### Key information

#### Jan. 2015-Dec. 2015 financial experience

Premiums	\$0
Claims	\$0
Administrative expenses	\$0
<b>Company made (before taxes)</b>	<b>\$0</b>

#### How it plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2017:

Claims:	83.3%
Administrative:	18.4%
Taxes & fees:	2.04%
Profit:	-3.74%

The company expects its annual medical costs to increase **2.9%**.

### Explanation of requested rate change

The rate increase applied to all plans is equal to 9.95% and is due to an increase in medical cost and utilization of 4.4% and the elimination of the Federal Transitional Reinsurance Program in 2017 resulting in a 6.27% increase. This rate increase is not based on financial experience but reflects the rate we feel that will adequately meet projected profit and financial goals of the company while maintaining the reasonableness of benefits provided to customers in relation to the premiums charged. There are no changes in administrative costs that affect the rates.

**National Foundation Life Insurance Company**  
**Actuarial Memorandum for Policy Form**  
**EHB-2017-IP-PA-NFL with EHB-2017-SCH-PA-NFL**

**I. GENERAL INFORMATION**

Insurance Company Name	National Foundation Life Insurance Company
State	Pennsylvania
HIOS Issuer ID	37352
Market	Individual Major Medical
Effective Date	January 1, 2017
Primary Contact Name	[REDACTED]
Primary Contact Phone #	[REDACTED]
Primary Contact E-mail Address	[REDACTED]

The rates included in this filing are for non-grandfathered individual major medical plans which cover the Essential Health Benefits (EHB) as required under the Affordable Care Act (ACA). These plans are guaranteed issue and guaranteed renewable as defined under the ACA and HIPAA. These plans are marketed through licensed agents operating through a variety of distribution channels. In 2017, our insurance company will only sell plans outside of the public health exchanges in this state. Coverage beyond age 65 will be secondary to Medicare. Premiums are on an attained age basis and will increase with age. Premiums also vary by plan design, tobacco status and geographic area. Only the oldest three dependents under age 21 will be charged a premium rate for a given policy. This actuarial memorandum has been prepared for the purpose of demonstrating compliance with the applicable requirements in your state, assuring that premium rates are reasonable in relation to benefits provided. This rate filing is not intended to be used for other purposes.

National Foundation Life Insurance Company has a previous product approved for plan year 2016 under the form name EHB-2016-IP-PA-NFL. Changes to the product necessitated the filing of a new form EHB-2017-IP-PA-NFL. This filing proposes renewal rates for the new form EHB-2017-IP-PA-NFL. We believe we are in compliance with the Uniform Modification of Coverage exceptions under sections 2702 and 2703 of the Public Health Service Act as defined by 45 CFR 146.152, 147.106 and 148.122.

**II. PROPOSED RATE INCREASE**

There are currently no inforce policies under these forms. The net total premium increase proposed for these policy forms is 9.95%. This increase reflects a trend increase of 4.4%, an increase of 6.27% to account for the new 2017 Federal Transitional Reinsurance Program and a .9% decrease to account for the tobacco normalization factor. The development of these factors is detailed in later Sections. The proposed increase does not vary for ACA compliant products.

In 2017 we are changing the deductible(s) due to the new HHS AV Calculator and due to our desire to provide a cost sharing level that is approximately equivalent to the originally

approved plan design. The new HHS AV Calculator has been updated to include medical cost and utilization trend as well as an updated out of pocket maximum. We have increased the deductibles so that the calculated 2017 Actuarial Value based on the 2017 Actuarial Value Calculator is approximately equal to the 2016 Actuarial Value as calculated using the 2016 Actuarial Value Calculator. There will be no change in rates because of this change. The annual trend of 4.4% does not include deductible leveraging. The deductible leveraging increase that would normally be included in the annual trend is offset by the increase in deductibles. This change is covered under the uniform modification of coverage exception under sections 2702 and 2703 of the Public Health Service Act as defined by 45 CFR 146.152, 147.106 and 148.122.

### **III. EXPERIENCE PERIOD PREMIUM AND CLAIMS**

The Unified Rate Review Template was completed using state and legal entity specific non-grandfathered experience in order to comply with the Department of Health and Human Services (HHS) requirements. For the purpose of estimating the average risk of the 2017 market, experience of our non-grandfathered major medical plans for all of our affiliate companies Freedom Life Insurance Company of America, National Foundation Life Insurance Company, and Enterprise Life Insurance Company was reviewed together. This combined experience was used in order to develop an actuarially appropriate prediction of the market wide per member per month risk and standardized claim cost in 2017.

**Experience Period:** The experience period is from January 1, 2015 through December 31, 2015.

**Paid Through Date:** The paid through date for which payments have been made on claims incurred during the experience period is February 29, 2016.

**Premiums (Net of MLR Rebate) in Experience Period:** In the Unified Rate Review Template, the Earned Premium net of Medical Loss Ratio (MLR) rebates for the Calendar Year 2015 experience period was \$507,804 for your state. Earned Premium was not adjusted for any reductions prescribed when calculating the MLR, such as taxes and assessments. There were no estimated MLR rebates for the experience period in your State. Our accounting department estimates accrued premium refunds required under Federal Minimum Loss Ratio regulations for our Individual Medical insurance business by projecting Incurred Claims, Earned Premiums, and other elements and applying adjustments as outlined in Federal laws and regulations. These projections are performed on a state and market level basis and recent claims experience is adjusted for estimated claims reserves on a state level basis.

**Allowed and Incurred Claims During the Experience Period:** For the Unified Rate Review Template (URRT), the amount of Incurred Claims processed through our claim system for the experience period 2015 was \$703,215 for your state. The best estimate of experience period claims incurred but not reported was \$35,967 for your state. The amount of allowed claims processed through our claim system for the experience period 2015 was \$858,409 for your state. The best estimate of experience period allowed claims incurred but not paid as of the paid through date shown above was \$65,045 for your state. Allowed claims are developed by subtracting ineligible charges and discounts from the total provider billed amount. We have no capitation agreements. All state experience provided in the URRT is based on our entity specific non-grandfathered block of business. See the Credibility Manual Rate Development section below for details on how the Credibility Manual section of Worksheet 1 of the URRT was determined.

Our accounting department develops lag triangles for our nationwide individual medical experience. Historical averages are used in order to calculate our monthly completion factors. Specific large claims are also analyzed and additional reserves may be set up based on anticipated PPO savings and run-out for those claims.

#### **IV. BENEFIT CATEGORIES**

Inpatient services are those received during a patient's hospital stay and are included in the Inpatient Hospital Category. Outpatient services (e.g. lab tests, X-rays, and some surgical services) are those rendered by a facility within an outpatient setting. Professional services include primary care, specialist, therapy and other professional charges that are not included in facility fees. Other Medical services include charges for items that do not fall into the categories above, such as ambulance and durable medical equipment. The Other category is measured based upon distinct services or items provided. Retail and mail order pharmacy claims are included in the Prescription Drug category.

#### **V. PROJECTION FACTORS**

**Changes in the Morbidity of the Insured Population:** There are no changes in the morbidity assumption used in the approved 2016 rates. However, the application of the assumption has changed as the 2015 experience includes a different proportion of ACA compliant products to transitional non-grandfathered products. The morbidity assumption is applied to the transitional non-grandfathered portion of the 2015 experience and the factor shown in the URRT reflects this change. The ACA has caused significant changes in the average risk of the population insured between ACA compliant products and transitional non-grandfathered products. Some drivers of the population change are guaranteed issue, the individual mandate, underwriting and rating changes and the availability of premium subsidies for lower income consumers. In addition, average morbidity will increase because issuers are no longer allowed to exclude coverage for pre-existing conditions. The insured population will also be changing due to uninsured individuals moving into the market because of subsidies,

currently insured individuals in the group market whose employers are directing them to the individual exchange and individuals moving over from high risk pools and conversion markets. We estimated the impact of these changes on the morbidity of the insured population in your state to be 80.60%. We utilized the data within the "Cost of the Future Newly Insured under the Affordable Care Act (ACA)" study prepared by Optum Health and commissioned by the Society of Actuaries and internal risk studies in order to assess possible scenarios and develop our assumption. In addition, we compared our estimates against various industry studies in order to validate the reasonableness of our results. Credible data is still unavailable to analyze this assumption, this morbidity load reflects our best estimate at this time.

**Changes in Benefits:** There are no changes in the benefits factor assumption used in the approved 2016 rates. However, the application of the assumption has changed as the 2015 experience includes a different proportion of ACA compliant products to transitional non-grandfathered products. The change in benefits factor assumption is applied to the transitional non-grandfathered portion of the 2015 experience and the factor shown in the URRT reflects this change. The adjustment in the URRT of 25.90% within our pricing and claim projection is used to include new and expanded benefits in accordance with the EHB requirements of the ACA. These are differences in benefits between the new EHB plan and our non-grandfathered major medical plans that were utilized for our allowed claims estimates. The table below lists the estimated additional cost associated with each new benefit. These estimates are based upon purchased data and experience of a standard population. The estimated additional benefit costs below represent the percentage increase applied to the transitional non-grandfathered policies only:

**Benefit Estimated Additional Cost**

Benefit	Percentage
Maternity	3.3%
Prescription Drug	11.4%
Mental Health & Substance Abuse	2.7%
Dental	1.3%
Doctor's Office Visits	4.4%
Vision	1.0%
All Other	1.8%
Total	25.9%

**Changes in Demographics:** No changes in demographics were made from the assumption used in the approved 2016 rates. Differences in expected average area of the population are also applied to the base period claims experience to project 2017 experience. An average area factor was originally derived by applying 2012 annualized premium to the existing area factors. The experience period allowed claims were adjusted by the relativity of the state average area factor to the nationwide average area factor to reflect differences in overall average expected claim costs for your state.

**Trend Factors (cost/utilization):** Our trend assumption utilized in our projections and proposed increase is 4.4% and was estimated based on current trend analysis studies. The estimated portion of this assumption due to increases in medical cost is 2.9%, and the estimated portion due to increased utilization is 1.4% (These portions are multiplicative).

## **VI. CREDIBILITY MANUAL RATE DEVELOPMENT**

The Credibility Manual Rate reflects the nationwide experience of our non-grandfathered major medical plans for our affiliate companies. Allowed claims per member per month (PMPM) were calculated from this experience and adjusted to reflect the 2017 projected allowed claims. The Changes in Demographics factor described in Section V is applied to the Credibility Manual in order to reflect your states expected morbidity. All pricing components, including the base experience period data, are applied consistently across the single risk pool in the state and market for 2017.

## **VII. CREDIBILITY OF EXPERIENCE**

Our standard for fully credible data is 2,000 life years, with less than 500 life years having no credibility. For life years between 500 and 2,000 life years, credibility is linearly interpolated from 0% at 500 life years to 100% at 2,000 life years. Credibility in your state is equal to 0%.

## **VIII. PAID TO ALLOWED RATIO**

Our paid to allowed ratio was estimated using our internal continuance tables for the plan benefits. The estimated paid to allowed ratio was 0.658 for Bronze. We projected 2017 enrollment given only one plan option, and assumed a 20% annual lapse on existing business for 2017.

## **IX. RISK ADJUSTMENT AND REINSURANCE**

**Risk Adjustment:** We have developed manual rates for a 1.0 average statewide risk and assumed that our company would enroll average risk individuals. Therefore, no risk adjustment PMPM payment is assumed in 2017. The Risk Adjustment Admin fee is \$1.80 per member per year and we assumed this amount to be negligible and therefore did not account for it in our pricing but still included a  $-\$.15$  PMPM charge in the URRT.

**Reinsurance Recoveries:** In 2017, the Transitional Reinsurance Program will no longer exist.



**Total Reinsurance Factor Increase:** The total Reinsurance factor change from 2016 rates to 2017 rates is 6.27%. The 2016 rates were priced for the parameters of the Federal Transitional Reinsurance Program for 2015 which reimbursed carriers 50% of claim costs between \$70,000 and \$250,000 per member. The Reinsurance Program for 2015 is funded by a fee of \$3.67 per member per month. Together our 2016 Reinsurance factor was .941.

The increase is therefore equal to  $1.000 / .941 = 1.0627$ .

**Tobacco Normalization Factor:** In order to use a tobacco load for smokers we have adjusted the projected index by .991. Based on our Non-Grandfathered Major Medical experience, we estimated only 4.5% of projected members would be smokers. The calibration would be  $1.2 \times .045 + 1.0 \times .955 = 1.009$ . The normalization factor is equal to  $1 / 1.009 = .991$ .

## X. NON-BENEFIT EXPENSES AND PROFIT & RISK

Expenses are estimated based off of current costs, adjusted for any anticipated changes in 2017. The pricing load to cover these expenses is applied consistently across all plans.

Category	Percent of Premium
Customer Service, Claims Administration, & Information Systems	5.0%
Marketing Expenses	3.0%
General Overhead	2.0%
Cost Containment	3.0%
Commissions and Sales Bonus	5.0%
Quality Improvement	0.4%
Taxes, Fees, and State Assessments	2.04%
Profit and Contingency Margin	-3.74%
Total	16.7%

## XI. PROJECTED LOSS RATIO

The projected loss ratio on a traditional Incurred Claims to Earned Premium basis is 83.3%. We project the loss ratio for these products based on the new MLR formula will meet or exceed 80%, after the allowed adjustments for quality improvement expenses, premium taxes & fees, credibility, and average deductible in your state.

## XII. SINGLE RISK POOL

The Single Risk Pool for this filing as displayed in Section I of Worksheet 1 of the Unified Rate Review Template consists of data specific to this state and for National Foundation Life Insurance Company. For pricing purposes, we utilized experience for all covered lives for every non-grandfathered product/plan combination for all of our affiliate companies Freedom Life Insurance Company of America, National Foundation Life Insurance Company, and Enterprise Life Insurance Company.

**XIII. INDEX RATE**

The Index Rate of \$606.06 is shown in cell V44 of worksheet 1 of the Unified Rate Review Template (URRT) and in the attachment “Index Rate Example”. This index rate reflects our expected allowed claims from our pricing assumptions.

**XIV. MARKET ADJUSTED INDEX RATE**

Our Market Adjusted Index Rate used in pricing is shown in the attachment “Index Rate Example”. Using the Risk Adjustment and Reinsurance Factor described in Section IX, the pricing Market Adjusted Index Rate as shown in “Index Rate Example” is calculated as follows:

$$\$606.06 = \$606.06 (\text{Index Rate}) \times 1.0 (\text{Risk Adjustment}) \times 1.0 (\text{Reinsurance})$$

**XV. PLAN ADJUSTED INDEX RATE**

The Plan Adjusted Index Rates are developed by adjusting the Market Adjusted Index Rate to account for the Actuarial Value and Cost Sharing adjustments for each plan and adjustments for distribution and administrative costs. Using the Actuarial Value and Cost Sharing Factors and the expenses described in Section X, the Plan Adjusted Index Rates are the following:

$$\text{Bronze} = \$474.43 = \$606.06 (\text{Market Adjusted Index Rate}) \times 0.658 (\text{AV and Cost Sharing Bronze}) / 0.833 (\text{Pricing Loss Ratio}) \times .991 (\text{Tobacco Adjustment})$$

**XVI. CALIBRATION**

An age curve calibration factor of 1.5 is used to adjust the Plan Adjusted Index Rates in order to calculate the Consumer Adjusted Premium Rates. There is no calibration needed to adjust for geography.

**XVII. CONSUMER ADJUSTED PREMIUM RATE DEVELOPMENT**

The Consumer Adjusted Premium Rate is the final premium rate for each plan that is charged to an individual after applying the calibration factors and the rating adjustments of age, area, and tobacco status. Please see the attached document “Index Rate Example”.

**XVIII. AV METAL VALUES**

The HHS Actuarial Value Calculator (AVC) was used to generate the AV metal values for the plans in our portfolio. These plans represent the standardized plans promulgated by your state. We have attached the HHS AV calculator page(s).

**XIX. AV PRICING VALUES**

The AV pricing values were determined by studying our own internal continuance tables, in addition to an adjustment for utilization differences we expect due to plan cost sharing design. In the Actuarial Value Calculator Methodology document released by HHS, HHS states that spending is affected by plan design through induced demand, and they in turn have explicitly differentiated and estimated the impact of induced utilization by metal level. The HHS defined induced utilization factor for the Bronze metal level is 1.00. Since we don't have enough credible experience to determine separate induced utilization factors for each metal level, we are applying the prescribed HHS induced utilization factors used in the HHS risk score to our plans. These values are then divided by the projected loss ratio in order to account for the administrative expenses.

**XX. MEMBERSHIP PROJECTIONS**

We projected 2017 enrollment from the existing business by assuming a 20% annual lapse rate. For new business, we analyzed current sales levels and projected anticipated sales of the new metal tier plan(s) in 2017.

**XXI. TERMINATED PRODUCTS**

We have not made a final decision as to whether Non-Compliant Non-Grandfathered forms will be allowed to renew for 2017. For filing purposes we have grouped the transitional policies in the URRT and labeled them "Terminated Products". Non-grandfathered products USHG-2009-C-PA-FLIC may be discontinued as of 12/31/2016. These products are included in the experience period data.

**XXII. PLAN TYPE**

All 2017 individual medical plans will be PPO plans.

**XXIII. WARNING ALERTS**

Warning alerts from the unified rate review template are explained below:

1. Worksheet 2 Cell A96 has a warning because there is no projected reinsurance as the Federal Reinsurance Program is going away in 2017.
2. Worksheet 2 Cells A55 and A57 have warnings because the premiums on Worksheet 1 include terminated plans while the premiums in Worksheet 2 do not. The URRT instructions for Worksheet 2 Plan Adjusted Index Rates say the following, "For terminated non-single risk pool compliant plans, enter zero in the template."
3. Worksheet 1 Cell H30 has a warning because of rounding of values.

**XXIV. EFFECTIVE RATE REVIEW INFORMATION**

See the attachments for additional rating information.

**XXV. RELIANCE**

In developing this rate filing I relied upon information provided by others within my department, as well as on information provided by other departments within the organization, and public information available including but not limited to the "Cost of the Future Newly Insured under the Affordable Care Act (ACA)" study prepared by Optum Health, external trend studies, various HHS publications, and other sources. I have reviewed this information for reasonableness, and I consider it to be reliable.

**XXVI. ACTUARIAL CERTIFICATION**

I am a member of the American Academy of Actuaries. To the best of my knowledge and judgment,

1. This rate filing is in compliance with the applicable laws and regulations concerning premium rate development in this state and the benefits are reasonable in relation to premiums.
2. The projected index rate is:
  - a. In compliance with all applicable State and Federal Statutes and Regulations.
  - b. Developed in compliance with Actuarial Standards of Practice.
  - c. Reasonable in relation to the benefits provided and the population anticipated to be covered.
  - d. Neither excessive nor deficient.
3. 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.
4. The percent of total premium that represents essential health benefits included in Worksheet 2, Sections 3 and 4 were calculated in accordance with actuarial standards of practice.
5. The HHS AV Calculator was used to determine the AV Metal Values for all plans shown in Worksheet 2 of the Part I Unified Rate Review Template.
6. The geographic rating factors reflect only differences in the costs of delivery (which can include unit cost and provider practice pattern differences) and do not include differences for population morbidity by geographic area.

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

[REDACTED]

May 6, 2016  
Date

**National Foundation Life Insurance Company**  
**Exhibit A**  
**Rate Formula and Example**

Rating Variables:

Bronze

Age 45

Non-Tobacco User

Rating Area 1

1/1/2017 Effective Date

Monthly Mode

<u>Formula</u>	<u>Value</u>
Monthly Base Rate	\$460.42
x Age Factor	1.444
x Tobacco Factor	1.00
x Actuarial Value Pricing Factor	0.658
x Area Factor	0.937
x Trend Factor	1.044
x Reinsurance Factor	1.00
x Modal Factor	1.00
Final Rate	<u><u>\$427.94</u></u>

A rate is calculated for each individual on the policy. However, only the oldest three child dependents under age 21 will be charged a premium rate.

Actual final rate may vary due to rounding.

**User Inputs for Plan Parameters**

- Use Integrated Medical and Drug Deductible?
- Apply Inpatient Copay per Day?
- Apply Skilled Nursing Facility Copay per Day?
- Use Separate OOP Maximum for Medical and Drug Spending?
- Indicate if Plan Meets CSR Standard?
- Desired Metal Tier: Bronze

HSA/HRA Options	Narrow Network Options
HSA/HRA Employer Contribution? <input type="checkbox"/>	Blended Network/POS Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization:
	2nd Tier Utilization:

	Tier 1 Plan Benefit Design		
	Medical	Drug	Combined
Deductible (\$)			\$7,150.00
Coinsurance (%; Insurer's Cost Share)			100.00%
OOP Maximum (\$)			\$7,150.00
OOP Maximum if Separate (\$)			

	Tier 2 Plan Benefit Design		
	Medical	Drug	Combined
Deductible (\$)			
Coinsurance (%; Insurer's Cost Share)			
OOP Maximum (\$)			
OOP Maximum if Separate (\$)			

[Click Here for Important Instructions](#)

Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	Copay applies only after deductible?
<b>Medical</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MHSA)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Abuse Disorder	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Rehabilitative Speech Therapy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Rehabilitative Occupational and Rehabilitative Physical Therapy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
<b>Drugs</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

**Options for Additional Benefit Design Limits:**

Set a Maximum on Specialty Rx Coinsurance Payments? <input type="checkbox"/>	Specialty Rx Coinsurance Maximum:
Set a Maximum Number of Days for Charging an IP Copay? <input type="checkbox"/>	# Days (1-10):
Begin Primary Care Cost-Sharing After a Set Number of Visits? <input type="checkbox"/>	# Visits (1-10):
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays? <input type="checkbox"/>	# Copays (1-10):

**Plan Description:**

Name: Essential Health Bronze  
 Plan HIOS ID: 37352PA0120001 & 0001  
 Issuer HIOS ID: 37352

**Output**

**Calculate**

Status/Error Messages: Calculation Successful.  
 Actuarial Value: 59.43%  
 Metal Tier: Bronze

**National Foundation Life Insurance Company**  
**Actuarial Memorandum for Policy Form**  
**EHB-2017-IP-PA-NFL with EHB-2017-SCH-PA-NFL &**

**I. BASIC INFORMATION AND DATA**

A. Company Information:

1. Insurance Company Name – National Foundation Life Insurance Company
2. Market – Individual
3. Off Exchange Only
4. Effective date of coverage – 1/1/2017
5. Average Rate Change Requested – 9.95%
6. Range of Rate Change Requested – 9.95%
7. PPO Products
8. Rating Areas Covered – 1 and 3-9
9. Metal Levels – Bronze
10. 0 current covered lives
11. 1 plan offered in 2017
12. Contract Forms - EHB-2017-IP-PA-NFL, SERFF# USHG-130529979, Binder ID# USHG-PA17-125061233
13. HIOS Issuer ID # 37352, SERFF# USHG-130529979

B. Rate History and Proposed Variations in Rate Changes:

There have been no previous increases on these forms. The current proposed increase will be applied uniformly.

C. Average Rate Change

The average rate change is 9.95% and does not vary by plan. Cell AZ13 in Table 11 of the Rate Exhibits Template is an error because we do not have any inforce policyholders.

D. Membership Count

Please see Table 1 of the Rate Exhibits Template.

E. Benefit Changes

The changes to the 2017 EHB Benchmark Plan were considered negligible and therefore had no impact on the proposed rates. In 2017 we are changing the deductible(s) due to the new HHS AV Calculator and due to our desire to provide a cost sharing level that is approximately equivalent to the originally approved plan design. The new HHS AV Calculator has been updated to include medical cost and utilization trend as well as an updated out of pocket maximum. We have increased the deductibles so that the calculated 2017 Actuarial Value based on the 2017 Actuarial Value Calculator is approximately equal to the 2016 Actuarial Value as calculated using the 2016 Actuarial Value Calculator.



There will be no change in rates because of this change. The annual trend of 4.4% does not include deductible leveraging. The deductible leveraging increase that would normally be included in the annual trend is offset by the increase in deductibles.

#### F. Experience Period Claims and Premiums

Please see Table 2 of the Rate Exhibits Template. The data is consistent with the data provided on the URRT. The Unified Rate Review Template was completed using state and legal entity specific non-grandfathered experience in order to comply with the Department of Health and Human Services (HHS) requirements. The data provided in Table 2 is prior to any adjustments to reflect the Essential Health Benefit plan. Allowed claims are developed by subtracting ineligible charges and discounts from the total provider billed amount. We have no capitation agreements. All state experience provided in the URRT is based on our entity specific non-grandfathered block of business. Our accounting department develops lag triangles for our nationwide individual medical experience. Historical averages are used in order to calculate our monthly completion factors. Specific large claims are also analyzed and additional reserves may be set up based on anticipated PPO savings and run-out for those claims. Incurred Claims includes RX Rebates. There was no experience and so there is no estimate for Reinsurance and risk Adjustment.

#### G. Credibility of Data

Our standard for fully credible data is 2,000 life years, with less than 500 life years having no credibility. For life years between 500 and 2,000 life years, credibility is linearly interpolated from 0% at 500 life years to 100% at 2,000 life years. Credibility in your state is equal to 0%. The Credibility Manual Rate reflects the nationwide experience of our non-grandfathered major medical plans for our affiliate companies. The data shown in Tables 2-4b reflect the Credibility Manual. The data shown in these tables is prior to adjustments made to reflect the Essential Health Benefit plans. For the URRT, the Allowed claims per member per month (PMPM) were calculated from this experience and adjusted to reflect the 2017 projected allowed claims. The Changes in Demographics factor of .878 is applied to the Credibility Manual in order to reflect your states expected morbidity. All pricing components, including the base experience period data, are applied consistently across the single risk pool in the state and market for 2017.

#### H. Trend Identification

Please see Table 3 of the Rate Exhibits Template. Our trend assumption utilized in our projections and proposed increase is 4.4% and was estimated based on current internal trend analysis studies and the 2016 Segal Health Plan Cost Trend Survey. For compliance purposes we have split the data by service category but for pricing purposes we do not split the data. The estimated portion of this assumption due to increases in medical cost is

2.9%, and the estimated portion due to increased utilization is 1.4% (These portions are multiplicative).

#### I. Historical Experience

Please see Table 4 of the Rate Exhibits Template. Please see section F and H above for further explanation on the development of Allowed Claims and the Trend assumption.

### II. RATE DEVELOPMENT AND CHANGE

#### A. Development of Projected Index Rate, Market Adjusted Index Rate and Total Allowed Claims

Please see Table 5 of the Rate Exhibits Template. The following details the assumptions used in the URRT to adjust the Credibility Manual. The assumptions are further adjusted by the percentage of Non ACA Compliant Transitional claims in the experience which for our Credibility Manual equals 73.7%. The Morbidity and Changes in Benefits factors applied to the Credibility Manual are based on a weighted average of ACA Compliant experience and Non ACA Compliant Transitional. The weighted average equals  $.737 \times \text{Adjustment Factor} + (1-.737)$ .

**Changes in the Morbidity of the Insured Population:** There are no changes in the morbidity assumption used in the approved 2016 rates. However, the application of the assumption has changed as the 2015 experience includes a different proportion of ACA compliant products to transitional non-grandfathered products. The morbidity assumption is applied to the transitional non-grandfathered portion of the 2015 experience and the factor shown in the URRT reflects this change. The ACA has caused significant changes in the average risk of the population insured between ACA compliant products and transitional non-grandfathered products. Some drivers of the population change are guaranteed issue, the individual mandate, underwriting and rating changes and the availability of premium subsidies for lower income consumers. In addition, average morbidity will increase because issuers are no longer allowed to exclude coverage for pre-existing conditions. The insured population will also be changing due to uninsured individuals moving into the market because of subsidies, currently insured individuals in the group market whose employers are directing them to the individual exchange and individuals moving over from high risk pools and conversion markets. We estimated the impact of these changes on the morbidity of the insured population in your state to be 80.60%. We utilized the data within the "Cost of the Future Newly Insured under the Affordable Care Act (ACA)" study prepared by Optum Health and commissioned by the Society of Actuaries and internal risk studies in order to assess possible scenarios and develop our assumption. In addition, we compared our estimates against various industry studies in order to validate the reasonableness of our results. Credible data is still unavailable to analyze this assumption, this morbidity load reflects our best estimate at this time.

**Changes in Benefits:** There are no changes in the benefits factor assumption used in the approved 2016 rates. However, the application of the assumption has changed as the 2015 experience includes a different proportion of ACA compliant products to transitional non-grandfathered products. The change in benefits factor assumption is applied to the transitional non-grandfathered portion of the 2015 experience and the factor shown in the URRT reflects this change. The adjustment in the URRT of 25.90% within our pricing and claim projection is used to include new and expanded benefits in accordance with the EHB requirements of the ACA. These are differences in benefits between the new EHB plan and our non-grandfathered major medical plans that were utilized for our allowed claims estimates. The table below lists the estimated additional cost associated with each new benefit. These estimates are based upon purchased data and experience of a standard population. The estimated additional benefit costs below represent the percentage increase applied to the transitional non-grandfathered policies only:

**Benefit Estimated Additional Cost**

Benefit	Percentage
Maternity	3.3%
Prescription Drug	11.4%
Mental Health & Substance Abuse	2.7%
Dental	1.3%
Doctor's Office Visits	4.4%
Vision	1.0%
All Other	1.8%
Total	25.9%

**Changes in Demographics:** No changes in demographics were made from the assumption used in the approved 2016 rates. Differences in expected average area of the population are also applied to the base period claims experience to project 2017 experience. An average area factor was originally derived by applying 2012 annualized premium to the existing area factors. The experience period allowed claims were adjusted by the relativity of the state average area factor to the nationwide average area factor to reflect differences in overall average expected claim costs for your state.

**Trend Factors (cost/utilization):** Our trend assumption utilized in our projections and proposed increase is 4.4% and was estimated based on current trend analysis studies. The estimated portion of this assumption due to increases in medical cost is 2.9%, and the estimated portion due to increased utilization is 1.4% (These portions are multiplicative).

**Tobacco Normalization Factor:** In order to use a tobacco load for smokers we have adjusted the projected index by .991. Based on our Non-Grandfathered Major Medical experience, we estimated only 4.5% of projected members would be smokers. The calibration would be  $1.2 \times .045 + 1.0 \times .955 = 1.009$ . The normalization factor is equal to  $1 / 1.009 = .991$ .

## B. Retention Items

Please see Table 6 of the Rate Exhibits Template. Expenses are estimated based off of current costs, adjusted for any anticipated changes in 2017. The pricing load to cover these expenses is applied consistently across all plans.

Category	Percent of Premium
Customer Service, Claims Administration, & Information Systems	5.0%
Marketing Expenses	3.0%
General Overhead	2.0%
Cost Containment	3.0%
Commissions and Sales Bonus	5.0%
Quality Improvement	0.4%
Taxes, Fees, and State Assessments	2.04%
Profit and Contingency Margin	-3.74%
Total	16.7%

## C. Normalized Market Adjusted Projected Allowed Claims

Please see Table 7 and 8 of the Rate Exhibits Template. An age curve calibration factor of 1.5 is used to adjust the Plan Adjusted Index Rates in order to calculate the Consumer Adjusted Premium Rates. There is no calibration needed to adjust for geography. The Tobacco Normalization factor is detailed in Section A. The differences in the 2016 and 2017 factors in Table 7 are due to different experience periods having different average ages.

## D. Components of Rate Change

Table 8 and 9 contain errors because we do not have any covered lives inforce. The net total premium increase proposed for these policy forms is 9.95%. This increase reflects a trend increase of 4.4%, an increase of 6.27% to account for the new 2017 Federal Transitional Reinsurance Program and a .9% decrease for the tobacco normalization factor.

### III. PLAN RATE DEVELOPMENT

Please see Table 10 of the Rate Exhibits Template. Table 10 contains errors because we do not have any covered lives inforce.

### IV. PLAN PREMIUM DEVELOPMENT FOR 21 YEAR OLD NON TOBACCO USER

Please see Table 11 of the Rate Exhibits Template. Table 11 contains errors because we do not have any covered lives inforce.

**V. PLAN FACTORS**

Please see Tables 12, 13 and 14. The only change in the calibration factors from 2016 to 2017 is the average age factor which was 1.444 in 2016 and is now 1.500.

**VI. ACTUARIAL CERTIFICATION**

I am a member of the American Academy of Actuaries. To the best of my knowledge and judgment,

1. All factor, benefit and other changes from the prior approved filing have been disclosed in the actuarial memorandum
2. New plans cannot be considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106
3. The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2017 Rate Filing Justification.

[REDACTED]

May 11, 2016  
Date

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

**Table 1. Number of Members**

	Member-months	Members	Member-months
	Experience Period	Current Period (as of Feb. 1, 2016)	Projected Rating Period
Total	-	-	1,469
<18	-	-	325
18-24	-	-	148
25-29	-	-	52
30-34	-	-	65
35-39	-	-	86
40-44	-	-	114
45-49	-	-	147
50-54	-	-	190
55-59	-	-	191
60-63	-	-	135
64+	-	-	16

**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
\$ 507,804.37	\$ 703,215.40	\$ 739,181.69	2,285	\$ 184,272.36	\$ 923,454.05	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2015 Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)</b>											\$ 404.14
<b>Loss Ratio</b>											<b>145.56%</b>

\*Express Prescription Drug Rebates as a negative number

**Table 3. Trend Components**

Service Category	Cost*	Utilization*	Composite	Weight*
Inpatient Hospital	2.91%	1.45%	4.40%	20.00%
Outpatient Hospital	2.91%	1.45%	4.40%	20.00%
Professional	2.91%	1.45%	4.40%	20.00%
Other Medical	2.91%	1.45%	4.40%	20.00%
Capitation			0.00%	0.00%
Prescription Drugs	2.91%	1.45%	4.40%	20.00%
Total Annual Trend			4.40%	100.00%
2 Year Trend Projection Factor			1.090	

<- Annualized Trend Factors on URRT

\* Express Cost, Utilization, and Weight as percentages

**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-13		\$ 7,498.18	1.0000	\$ 7,498.18	478	\$ 15.69		\$ -	\$ 36,239.05	\$ 75.81
Feb-13		\$ 28,102.09	1.0000	\$ 28,102.09	462	\$ 60.83		\$ -	\$ 54,615.00	\$ 118.21
Mar-13		\$ 33,856.63	1.0000	\$ 33,856.63	450	\$ 75.24		\$ -	\$ 74,589.49	\$ 165.75
Apr-13		\$ 49,192.56	1.0000	\$ 49,192.56	437	\$ 112.57		\$ -	\$ 80,009.64	\$ 183.09
May-13		\$ 63,606.24	1.0000	\$ 63,606.24	425	\$ 149.66		\$ -	\$ 100,372.42	\$ 236.17
Jun-13		\$ 26,731.50	1.0000	\$ 26,731.50	402	\$ 66.50		\$ -	\$ 42,891.03	\$ 106.69
Jul-13		\$ 24,018.34	1.0000	\$ 24,018.34	390	\$ 61.59		\$ -	\$ 57,566.06	\$ 147.61
Aug-13		\$ 69,559.78	1.0000	\$ 69,559.78	382	\$ 182.09		\$ -	\$ 99,742.34	\$ 261.11
Sep-13		\$ 13,571.97	1.0000	\$ 13,571.97	366	\$ 37.08		\$ -	\$ 27,858.34	\$ 76.12
Oct-13		\$ 23,873.44	1.0000	\$ 23,873.44	363	\$ 65.77		\$ -	\$ 48,382.86	\$ 133.29
Nov-13		\$ 24,004.23	1.0000	\$ 24,004.23	348	\$ 68.98		\$ -	\$ 41,867.06	\$ 120.31
Dec-13	\$ 926,332.00	\$ 25,029.78	1.0000	\$ 25,029.78	323	\$ 77.49	\$ 310,559.62	\$ -	\$ 35,471.07	\$ 109.82
Jan-14		\$ 11,308.52	1.0000	\$ 11,308.52	297	\$ 38.08		\$ -	\$ 31,252.26	\$ 105.23
Feb-14		\$ 90,257.71	1.0000	\$ 90,257.71	283	\$ 318.93		\$ -	\$ 118,638.42	\$ 419.22
Mar-14		\$ 74,684.19	1.0000	\$ 74,684.19	280	\$ 266.73		\$ -	\$ 116,149.79	\$ 414.82
Apr-14		\$ 18,156.27	0.9921	\$ 18,301.04	262	\$ 69.85		\$ -	\$ 44,898.07	\$ 171.37
May-14		\$ 8,227.65	0.9839	\$ 8,362.09	242	\$ 34.55		\$ -	\$ 19,861.90	\$ 82.07
Jun-14		\$ 29,141.90	0.9879	\$ 29,499.37	233	\$ 126.61		\$ -	\$ 48,769.59	\$ 209.31
Jul-14		\$ 14,628.25	0.9755	\$ 14,995.38	233	\$ 64.36		\$ -	\$ 27,850.10	\$ 119.53
Aug-14		\$ 2,452.11	0.8539	\$ 2,871.82	233	\$ 12.33		\$ -	\$ 15,937.21	\$ 68.40
Sep-14		\$ 4,145.76	0.9132	\$ 4,539.68	232	\$ 19.57		\$ -	\$ 13,332.96	\$ 57.47
Oct-14		\$ 2,251.19	0.8685	\$ 2,592.19	227	\$ 11.42		\$ -	\$ 6,501.13	\$ 28.64
Nov-14		\$ 17,903.31	0.9805	\$ 18,259.75	226	\$ 80.80		\$ -	\$ 31,392.87	\$ 138.91
Dec-14	\$ 606,475.00	\$ 4,740.53	0.8985	\$ 5,275.93	224	\$ 23.55	\$ 209,526.25	\$ -	\$ 15,889.62	\$ 70.94
Jan-15		\$ 41,864.42	0.9740	\$ 42,983.75	210	\$ 204.68		\$ -	\$ 58,589.18	\$ 279.00
Feb-15		\$ 4,794.90	0.9243	\$ 5,187.52	208	\$ 24.94		\$ -	\$ 18,423.00	\$ 88.57
Mar-15		\$ 2,773.45	0.8273	\$ 3,352.35	197	\$ 17.02		\$ -	\$ 10,765.44	\$ 54.65
Apr-15		\$ 51,498.18	0.9859	\$ 52,234.26	195	\$ 267.87		\$ -	\$ 62,202.94	\$ 318.99
May-15		\$ 135,573.89	0.9880	\$ 137,216.05	194	\$ 707.30		\$ -	\$ 145,749.83	\$ 751.29
Jun-15		\$ 12,139.96	0.8194	\$ 14,815.53	192	\$ 77.16		\$ -	\$ 28,989.24	\$ 150.99
Jul-15		\$ 3,391.73	0.6370	\$ 5,324.51	184	\$ 28.94		\$ -	\$ 18,705.75	\$ 101.66
Aug-15		\$ 55,839.73	0.9674	\$ 57,723.70	183	\$ 315.43		\$ -	\$ 71,418.58	\$ 390.27
Sep-15		\$ 182,419.95	0.9842	\$ 185,356.81	183	\$ 1,012.88		\$ -	\$ 205,849.28	\$ 1,124.86
Oct-15		\$ 4,964.46	0.4056	\$ 12,239.01	181	\$ 67.62		\$ -	\$ 27,963.08	\$ 154.49
Nov-15		\$ 177,750.05	0.9619	\$ 184,792.31	180	\$ 1,026.62		\$ -	\$ 196,930.14	\$ 1,094.06
Dec-15	\$ 507,804.37	\$ 30,204.68	0.7958	\$ 37,955.89	178	\$ 213.24	\$ 184,272.36	\$ -	\$ 77,867.59	\$ 437.46

\* Express Completion Factor as a percentage

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

Table 2b. 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
#####	#####	34,942	\$ 4,890,261.19	#####	\$ -	\$(20,132.05)	\$ -	\$ -	\$ 2,100,000.00	\$ 1,625,000.00	
<b>2015 Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)</b>											
<b>Loss Ratio</b>											
<b>\$ 634.18</b>											
<b>155.09%</b>											

\*Express Prescription Drug Rebates as a negative number

Table 2c. 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
#####	#####	34,942.00	\$ 4,890,261.19	#####	\$ -	\$(20,132.05)	\$ -	\$ -	\$ 2,100,000.00	\$ 1,625,000.00	
<b>2015 Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)</b>											
<b>Loss Ratio</b>											
<b>\$ 634.18</b>											
<b>155.09%</b>											

\*Express Prescription Drug Rebates as a negative number

Table 3b. Trend Components

Service Category	Cost*	Utilization*	Composite	Weight*
Inpatient Hospital	2.91%	1.45%	4.40%	20.00%
Outpatient Hospital	2.91%	1.45%	4.40%	20.00%
Professional	2.91%	1.45%	4.40%	20.00%
Other Medical	2.91%	1.45%	4.40%	20.00%
Capitation			0.00%	0.00%
Prescription Drugs	2.91%	1.45%	4.40%	20.00%
Total Annual Trend			4.40%	100.00%
2 Year Trend Projection			1.090	

<- Annualized Trend Factors on URRT

\* Express Cost, Utilization, and Weight as percentages

Table 4b. 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-13	#####	\$ 894,412.20	1.0000	\$ 894,412.21	9,573	\$ 93.43	#####	\$(2,592.02)	#####	\$ 207.10
Feb-13	#####	1,0000	1.0000	\$ 1,168,025.34	9,185	\$ 127.17	#####	\$(2,467.95)	#####	\$ 214.04
Mar-13	#####	1,0000	1.0000	\$ 1,225,530.22	8,822	\$ 138.92	#####	\$(2,296.76)	#####	\$ 231.37
Apr-13	#####	1,0000	1.0000	\$ 1,175,283.91	8,437	\$ 139.30	#####	\$(2,493.99)	#####	\$ 231.06
May-13	#####	1,0000	1.0000	\$ 1,535,161.26	8,115	\$ 189.18	#####	\$(2,635.48)	#####	\$ 272.08
Jun-13	#####	1,0000	1.0000	\$ 1,073,190.76	7,824	\$ 137.17	#####	\$(2,629.27)	#####	\$ 214.45
Jul-13	#####	1,0000	1.0000	\$ 1,303,373.90	7,570	\$ 172.18	#####	\$(2,614.09)	#####	\$ 257.96
Aug-13	#####	1,0000	1.0000	\$ 834,579.93	7,330	\$ 113.86	#####	\$(2,704.85)	#####	\$ 194.69
Sep-13	#####	1,0000	1.0000	\$ 1,147,062.47	7,095	\$ 161.67	#####	\$(2,509.59)	#####	\$ 238.08
Oct-13	#####	1,0000	1.0000	\$ 1,075,443.99	6,909	\$ 155.66	#####	\$(2,920.84)	#####	\$ 238.74
Nov-13	#####	1,0000	1.0000	\$ 1,395,925.62	6,641	\$ 210.20	#####	\$(2,563.88)	#####	\$ 290.62
Dec-13	#####	1,0000	1.0000	\$ 992,534.26	6,344	\$ 156.45	#####	\$(2,415.36)	#####	\$ 230.68
Jan-14	#####	1,0000	1.0000	\$ 277,511.94	5,783	\$ 47.99	#####	\$(2,022.62)	#####	\$ 137.75
Feb-14	#####	1,0000	1.0000	\$ 1,364,370.70	5,550	\$ 245.83	#####	\$(2,319.52)	#####	\$ 350.87
Mar-14	#####	1,0000	1.0000	\$ 497,854.35	5,307	\$ 93.81	#####	\$(2,350.78)	#####	\$ 189.47
Apr-14	#####	0.9981	0.9981	\$ 734,844.16	5,116	\$ 143.64	#####	\$(2,239.05)	#####	\$ 225.20
May-14	#####	0.9978	0.9978	\$ 1,121,109.52	4,933	\$ 227.27	#####	\$(2,128.82)	#####	\$ 332.31
Jun-14	#####	0.9886	0.9886	\$ 776,414.76	4,842	\$ 160.35	#####	\$(2,393.91)	#####	\$ 244.12
Jul-14	#####	0.9926	0.9926	\$ 1,293,468.34	4,766	\$ 271.39	#####	\$(2,831.53)	#####	\$ 372.11
Aug-14	#####	0.9913	0.9913	\$ 1,112,444.56	4,688	\$ 237.30	#####	\$(2,168.07)	#####	\$ 332.27
Sep-14	#####	0.9923	0.9923	\$ 1,105,997.56	4,647	\$ 238.00	#####	\$(1,922.77)	#####	\$ 326.19
Oct-14	#####	0.9919	0.9919	\$ 1,186,450.16	4,579	\$ 259.11	#####	\$(2,737.61)	#####	\$ 357.67
Nov-14	#####	0.9923	0.9923	\$ 1,513,778.26	4,507	\$ 335.87	#####	\$(2,296.70)	#####	\$ 416.81
Dec-14	#####	0.9919	0.9919	\$ 1,620,031.10	4,297	\$ 377.01	#####	\$(3,382.97)	#####	\$ 491.53
Jan-15	#####	0.9863	0.9863	\$ 1,280,389.90	3,250	\$ 393.97	#####	\$(1,269.79)	#####	\$ 527.72
Feb-15	#####	0.9766	0.9766	\$ 842,682.51	3,119	\$ 270.18	#####	\$(1,596.90)	#####	\$ 388.05
Mar-15	#####	0.9867	0.9867	\$ 1,640,633.34	3,031	\$ 541.28	#####	\$(1,673.28)	#####	\$ 686.60
Apr-15	#####	0.9817	0.9817	\$ 1,636,255.92	2,978	\$ 549.45	#####	\$(1,148.83)	#####	\$ 691.47
May-15	#####	0.9720	0.9720	\$ 1,346,402.86	2,960	\$ 454.87	#####	\$(1,439.64)	#####	\$ 574.20
Jun-15	#####	0.9612	0.9612	\$ 1,467,352.63	2,923	\$ 502.00	#####	\$(1,908.45)	#####	\$ 647.98
Jul-15	#####	0.9229	0.9229	\$ 1,331,386.59	2,885	\$ 461.49	#####	\$(1,747.82)	#####	\$ 582.73
Aug-15	#####	0.9613	0.9613	\$ 1,108,148.41	2,841	\$ 742.04	#####	\$(1,743.85)	#####	\$ 892.65
Sep-15	#####	0.9275	0.9275	\$ 1,458,381.89	2,800	\$ 520.85	#####	\$(1,539.20)	#####	\$ 644.73
Oct-15	#####	0.8920	0.8920	\$ 1,294,645.40	2,771	\$ 467.21	#####	\$(1,599.18)	#####	\$ 629.85
Nov-15	#####	0.8830	0.8830	\$ 1,493,569.48	2,726	\$ 547.90	#####	\$(1,810.04)	#####	\$ 691.77
Dec-15	#####	0.8127	0.8127	\$ 1,389,522.61	2,658	\$ 522.77	#####	\$(2,655.07)	#####	\$ 694.73

\* Express Completion Factor as a percentage

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

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

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

2015 Total Allowed EHB Claims PMPM + EHB Capitation PMPM (net of prescription drug rebates)	\$ 634.18	<- Index Rate of Experience Period on URRT
2 Year Trend Projection Factor	1.089	
Unadjusted Projected Allowed EHB Claims PMPM	\$ 690.43	
<b>Single Risk Pool Adjustment Factors</b>		
Change in Morbidity	1.320	<- Adj'L. from Experience to Projection Period - Pop'l risk Morbidity on URRT
Change in Other	0.665	<- Adj'L. from Experience to Projection Period - Other on URRT
Change in Demographics	1.000	
Change in Network	1.000	
Change in Benefits	1.103	
Change in Other	0.603	
Adjusted Projected Allowed EHB Claims PMPM	\$ 606.07	<- Index Rate for Projection Period on URRT - Individual (Small Group 1st Qtr)
Adjusted Projected Allowed EHB Claims PMPM [will only populate for small group filings]	\$ -	<- Index Rate for Projection Period on URRT - Small Group
Projected Paid to Allowed Ratio	0.658	<- Paid to Allowed Average Factor in Projection Period on URRT
Projected Paid EHB Claims PMPM	398.7918579	
<b>Market-wide Adjustments</b>		
Projected Paid Net Risk Adjustment PMPM	\$ -	
Projected Paid Exchange User Fees PMPM	\$ -	
Market-Adjusted Projected Paid EHB Claims PMPM	\$ 398.79	
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 606.07	<- Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM	\$ -	
Market-Adjusted Projected Paid Total Claims PMPM	\$ 398.79	
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 606.07	

**Table 6. Retention**

<b>Retention Items - Express in percentages</b>	
Administrative Expenses	#DIV/0!
General and Claims	96.30%
Agent/Broker Fees and Commissions	5.00%
Quality Improvement Initiatives	0.40%
Taxes and Fees	#DIV/0!
PCORI Fees (Enter \$ amount here: \$ _____)	0.04%
Pa Premium Tax (if applicable)	2.00%
Federal Income Tax	0.00%
Health Insurance Providers Fee (only for small group market, prorated for coverage in 2018)	0.00%
Profit/Contingency	#DIV/0!
Total Retention	#DIV/0!
Projected Required Revenue PMPM	#DIV/0!

<- Single Pool Gross Premium Avg. Rate, PMPM on URRT

**Table 8. Components of Rate Change**

Rate Components	2016	2017	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
B. Base period allowed claims before normalization	\$ 558.82	\$ 634.18	\$ 75.36	#DIV/0!
C. Normalization factor component of change	\$ (175.28)	\$ -215.1661266	\$ -39.89	#DIV/0!
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 383.54	\$ 419.02	\$ 35.48	#DIV/0!
D2. URRT Trend	\$ 77.14	\$ 37.68	\$ (39.45)	#DIV/0!
D3. URRT Morbidity	\$ 273.49	\$ 146.24	\$ (127.25)	#DIV/0!
D4. URRT Other	\$ (37.52)	\$ (202.05)	\$ (164.52)	#DIV/0!
D5. Normalized URRT RA/RI on an allowed basis	\$ 19.13	\$ -	\$ (19.13)	#DIV/0!
D6. Normalized Exchange User Fee on an allowed basis	\$ -	\$ -	\$ -	#DIV/0!
D7. Subtotal - Sum(D1:D6)	\$ 715.77	\$ 400.90	\$ (314.88)	#DIV/0!
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ -	#DIV/0!	#DIV/0!	#DIV/0!
E2. Pricing AV	\$ (244.79)	#DIV/0!	#DIV/0!	#DIV/0!
E3. Benefit Richness	\$ -	#DIV/0!	#DIV/0!	#DIV/0!
E4. Catastrophic Eligibility	\$ -	#DIV/0!	#DIV/0!	#DIV/0!
E5. Subtotal - Sum(E1:E4)	\$ (244.79)	#DIV/0!	#DIV/0!	#DIV/0!
F. Change in Retention Components				
F1. Administrative Expenses	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
F2. Taxes and Fees	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
F3. Profit and/or Contingency	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
F4. Subtotal - Sum(F1:F3)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
G. Change in Miscellaneous Items	\$ 1.00	\$ 1.00	\$ -	#DIV/0!
H. Sum of Components of Rate Change (should approximate the change shown in line A)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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

	January	April	July	October	Total Single Risk Pool
# of Member Months Renewing in Quarter	-	-	-	-	-
Percent of Members Months Renewing in Quarter	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Base Allowed Claims	\$ 606.07	\$ 606.07	\$ 606.07	\$ 606.07	\$ 606.07
Months of Trend	-	3	6	9	#DIV/0!
Annual Trend	4.40%	4.40%	4.40%	4.40%	4.40%
Single Risk Pool Projected Allowed Claims	\$ 606.07	\$ 612.63	\$ 619.26	\$ 625.96	\$ -

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

Normalization Factors	2016	2017
Average Age Factor	1.444	1.500
Average Geographic Factor	1.000	1.000
Average Tobacco Factor	1.009	1.009
Average Benefit Richness (Induced demand)	1.000	1.000
Average Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 532.00	\$ 606.07
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 365.13	\$ 400.44

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

	2016	2017
Paid-to-Allowed	0.658	0.658
URRT Trend (2-Year Trend Factor)	1.20111298	1.09
URRT Morbidity	1.59366123	1.320
URRT "Other"	0.94889057	0.665
Risk Adjustment	\$ -	\$ -
Reinsurance	\$ 18.34	\$ -
Exchange User Fee	\$ -	\$ -
Capitation	\$ -	\$ -
Network	1.000	#DIV/0!
Pricing AV	0.658	#DIV/0!
Benefit Richness	1.000	#DIV/0!
Catastrophic Eligibility	1.000	#DIV/0!
Administrative Expenses	18.40%	101.70%
Taxes and Fees	2.04%	2.04%
Profit and/or Contingency	-3.74%	#DIV/0!



**PA Rate Template Part III**  
**Table 10. Plan Rates**

Carrier Name: National Foundation Life Insurance Company  
 Plan Type(s): PPO  
 Market Segment: Individual  
 Rate Effective Date: 1/1/2017  
 Market Adjusted Index Rate: \$ 606.07

Calibration	
Age Calibration Factor	1.5
Geographic Calibration Factor	1.000
Aggregate Calibration Factor	1.500

Plan Number	HIOS Plan ID (Standard Component)	Plan Type (HMO, PDS, PPO, EPO, Indemnity, Other)	1/1/16 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2017	1/1/17 Plan Marketing Name (if 1/1/16 Plan Discontinued)	Metallic Tier	Metallic Actuarial Value	Standard AV, Approach (1), Approach (2)	Exchange On/Off or Off	45 CFR Part 156.8 (f) (2) Allowable Factors										Total Covered Lives @ 2/1/2016	Total Policyholders @ 2/1/2016	2016 Calibrated Plan Adjusted Index Rate PMPM	2017 Calibrated Plan Adjusted Index Rate PMPM	Change Compared to Prior 12 months	% of Total Covered Lives	
										Pricing AV (company-determined AV)	Benefit Richness (induced demand)	Benefits in addition to EHB	Provider Network	Catastrophic Eligibility	Tobacco Surcharge Adjustment	Pure Premium	Admin Costs	Taxes & Fees (not including Exchange fees)	Profit or Contingency							#DIV/0!
Totals										#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	#DIV/0!	#DIV/0!	#DIV/0!	
Plan 1	37352PAD120001	PPO	Essential Health Bronze	M	Essential Health Bronze	Bronze	0.5943	Standard AV	Off	0.658	1.000	1.000	1.000	1.000	1.000	0.991	\$395.20	18.8%	2.0%	-3.7%	-	-	\$ 287.67	\$316.29	9.3%	#DIV/0!
Plan 2										1.000	1.000	1.000	1.000	1.000	1.000	1.000	\$606.07	0.0%	0.0%	0.0%	-	-	\$	\$404.04	#DIV/0!	#DIV/0!



**PA Rate Template Part V  
Consumer Factors**

**Table 12. Age and Tobacco Factors**

2017 Age and Tobacco Factors						
Age Band	Age Factor	Tobacco Factor		Age Band	Age Factor	Tobacco Factor
0-20	0.635			43	1.357	1.2
21	1.000	1.2		44	1.397	1.2
22	1.000	1.2		45	1.444	1.2
23	1.000	1.2		46	1.500	1.2
24	1.000	1.2		47	1.563	1.2
25	1.004	1.2		48	1.635	1.2
26	1.024	1.2		49	1.706	1.2
27	1.048	1.2		50	1.786	1.2
28	1.087	1.2		51	1.865	1.2
29	1.119	1.2		52	1.952	1.2
30	1.135	1.2		53	2.040	1.2
31	1.159	1.2		54	2.135	1.2
32	1.183	1.2		55	2.230	1.2
33	1.198	1.2		56	2.333	1.2
34	1.214	1.2		57	2.437	1.2
35	1.222	1.2		58	2.548	1.2
36	1.230	1.2		59	2.603	1.2
37	1.238	1.2		60	2.714	1.2
38	1.246	1.2		61	2.810	1.2
39	1.262	1.2		62	2.873	1.2
40	1.278	1.2		63	2.952	1.2
41	1.302	1.2		64+	3.000	1.2
42	1.325	1.2				

\*PA follows the federal default age curve.

**Table 13. Geographic Factors**

Geographic Area Factors			
Area	Counties	Current Factor	Proposed Factor
Rating Area 1	Erie, Crawford, Mercer, Clarion, Venango	0.937	0.937
Rating Area 2		0.868	0.868
Rating Area 3	Clinton, Lycoming, Sullivan, Wyoming, Monroe, Carbon, Luzerne, Lackawanna	0.963	0.963
Rating Area 4	Lawrence, Beaver, Washington, Greene, Butler, Allegheny, Westmoreland, Armstrong, Indiana, Fayette	0.893	0.893
Rating Area 5	Jefferson, Cambria, Somerset, Bedford, Blair, Huntingdon	0.899	0.899
Rating Area 6	Centre, Mifflin, Union, Snyder, Montour, Northumberland, Columbia, Schuylkill, Lehigh, Northampton	1.083	1.083
Rating Area 7	Adams, York, Lancaster, Berks	1.027	1.027
Rating Area 8	Chester, Delaware, Montgomery, Bucks, Philadelphia	1.042	1.042
Rating Area 9	Fulton, Franklin, Cumberland, Perry, Juniata, Dauphin, Lebanon	0.943	0.943

**Table 14. Network Factors**

2017 Network Factors				
Network Name	Rating Area	Current Factor	Proposed Factor	DOH Approval Date
CIGNA	1	1.000	1.000	5/15/2006
CIGNA	2	1.000	1.000	5/15/2006
CIGNA	3	1.000	1.000	5/15/2006
CIGNA	4	1.000	1.000	5/15/2006
CIGNA	5	1.000	1.000	5/15/2006
CIGNA	6	1.000	1.000	5/15/2006
CIGNA	7	1.000	1.000	5/15/2006
CIGNA	8	1.000	1.000	5/15/2006
CIGNA	9	1.000	1.000	5/15/2006