

**State:** Pennsylvania **Filing Company:** Geisinger Health Plan  
**TOI/Sub-TOI:** HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only  
 - HMO  
**Product Name:** HMO  
**Project Name/Number:** Small Group HMO Rx Base Rate Filing-eff Jun2016/0250-062016Rx

### Filing at a Glance

Company: Geisinger Health Plan  
 Product Name: HMO  
 State: Pennsylvania  
 TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)  
 Sub-TOI: HOrg02G.004F Small Group Only - HMO  
 Filing Type: Rate - Small Group Base Rate Modification  
 Date Submitted: 11/25/2015  
 SERFF Tr Num: GSHP-130345768  
 SERFF Status: Assigned  
 State Tr Num: GSHP-130345768  
 State Status: Received Review in Progress  
 Co Tr Num: 0250-062016RX  
  
 Implementation: 06/01/2016  
 Date Requested:  
 Author(s): Vicki Bardsley  
 Reviewer(s): Rashmi Mathur (primary)  
 Disposition Date:  
 Disposition Status:  
 Implementation Date:  
  
 State Filing Description:  
 sm grp rx Transition

**State:** Pennsylvania **Filing Company:** Geisinger Health Plan  
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 - HMO  
**Product Name:** HMO  
**Project Name/Number:** Small Group HMO Rx Base Rate Filing-eff Jun2016/0250-062016Rx

## General Information

Project Name: Small Group HMO Rx Base Rate Filing-eff Jun2016	Status of Filing in Domicile: Not Filed
Project Number: 0250-062016Rx	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Group
Submission Type: New Submission	Group Market Size: Small
Group Market Type: Employer	Overall Rate Impact: 12.3%
Filing Status Changed: 11/30/2015	
State Status Changed: 12/01/2015	Deemer Date:
Created By: Vicki Bardsley	Submitted By: Vicki Bardsley
Corresponding Filing Tracking Number:	

PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions: No

Filing Description:

Small Group HMO Prescription Drug Rate Filing-eff Jun2016

## Company and Contact

### Filing Contact Information

Vicki Bardsley, Manager Actuarial Services vbardsley@thehealthplan.com  
 100 North Academy Ave. 570-271-7842 [Phone]  
 Danville, PA 17822-3225 570-271-5474 [FAX]

### Filing Company Information

Geisinger Health Plan	CoCode: 95923	State of Domicile:
100 North Academy Ave.	Group Code: 1143	Pennsylvania
Danville, PA 17822	Group Name:	Company Type: Health
(570) 271-7842 ext. [Phone]	FEIN Number: 23-2311553	Insurance
		State ID Number:

## Filing Fees

Fee Required? No  
 Retaliatory? No  
 Fee Explanation:

SERFF Tracking #:

GSHP-130345768

State Tracking #:

GSHP-130345768

Company Tracking #:

0250-062016RX

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**TOI/Sub-TOI:** HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO  
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**Project Name/Number:** Small Group HMO Rx Base Rate Filing-eff Jun2016/0250-062016Rx

### Rate Information

Rate data applies to filing.

**Filing Method:**

**Rate Change Type:** Increase

**Overall Percentage of Last Rate Revision:** 34.200%

**Effective Date of Last Rate Revision:** 06/01/2015

**Filing Method of Last Filing:**

### 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):
Geisinger Health Plan	Increase	12.300%	12.300%	\$459,441	3,804	\$4,186,258	13.300%	9.300%

**State:** Pennsylvania **Filing Company:** Geisinger Health Plan  
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 - HMO  
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**Project Name/Number:** Small Group HMO Rx Base Rate Filing-eff Jun2016/0250-062016Rx

## Rate Review Detail

### COMPANY:

Company Name: Geisinger Health Plan  
 HHS Issuer Id: 00000

### PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
Geisinger Health Plan HMO Rx Rider plans			3804

Trend Factors: The overall Trend used in these Exhibits represents an annual rate of 13.3%.

### FORMS:

New Policy Forms:  
 Affected Forms:  
 Other Affected Forms: N/A

### REQUESTED RATE CHANGE INFORMATION:

Change Period: Annual  
 Member Months: 52,315  
 Benefit Change: Increase  
 Percent Change Requested: Min: 9.3 Max: 13.3 Avg: 12.3

### PRIOR RATE:

Total Earned Premium: 3,726,817.00  
 Total Incurred Claims: 3,335,129.00  
 Annual \$: Min: 81.64 Max: 81.64 Avg: 81.64

### REQUESTED RATE:

Projected Earned Premium: 4,186,258.00  
 Projected Incurred Claims: 3,735,270.00  
 Annual \$: Min: 91.71 Max: 91.71 Avg: 91.71

**SERFF Tracking #:**

GSHP-130345768

**State Tracking #:**

GSHP-130345768

**Company Tracking #:**

0250-062016RX

**State:**

Pennsylvania

**Filing Company:**

Geisinger Health Plan

**TOI/Sub-TOI:**

HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

**Product Name:**

HMO

**Project Name/Number:**

Small Group HMO Rx Base Rate Filing-eff Jun2016/0250-062016Rx

## Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Small Group HMO Prescription Drug Filing-Rate Exhibits-PDF!		New		SG HMO Rx Rate Exhibits-eff June 2016.pdf,

Monthly Tiered Premium Rates

CONTRACT # M150-013-F REV. 4/10 FACE SHEET-#M150-XXX-F REV. 4/11  
 RIDER FORM #M-151-488-F, 489-F, 490-F, 491-F, 683-F, 684-F, 685-F, 686-F,  
 813-F, 814-F, 815-F, 816-F.

SUBSCRIBER RATES ARE RECAPITULATED BELOW ACCORDING TO TIER-STRUCTURE.  
 THE RATES ARE APPLICABLE FOR SUBSCRIBERS ENROLLING OR RENEWING BETWEEN THE EFFECTIVE  
 DATES OF JUNE 1, 2016 THROUGH OCTOBER 1, 2016. THE RATES SUMMARIZED HEREIN  
 REFLECT A 3.2% QUARTERLY INCREASE AND ARE GUARANTEED FOR A 12 MONTH PERIOD.

1.032	EXCLUDING CONTRACEPTIVES		
	06/1/16 THROUGH 06/30/2016	07/1/16 THROUGH 09/30/2016	10/1/16 THROUGH 10/31/16
\$10/\$20/\$35			
PRESCRIPTION DRUG PMPM (EXHIBIT III)	\$101.19	\$103.82	\$106.51
<u>2 TIER</u>			
SINGLE	\$111.70	\$114.61	\$117.58
FAMILY	\$279.25	\$286.53	\$293.95
<u>3 TIER</u>			
SINGLE	\$111.70	\$114.61	\$117.58
TWO-PARTY	\$223.40	\$229.22	\$235.16
FAMILY	\$331.61	\$340.25	\$349.07
<u>4 TIER</u> STANDARD			
SINGLE	\$111.70	\$114.61	\$117.58
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILD	\$156.38	\$160.45	\$164.61
FAMILY	\$321.55	\$329.93	\$338.48
<u>4 TIER</u> BY EMPLOYER REQUEST ONLY			
SINGLE	\$111.70	\$114.61	\$117.58
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILDREN	\$177.42	\$182.05	\$186.76
FAMILY	\$336.26	\$345.02	\$353.96
<u>5 TIER</u>			
SINGLE	\$111.70	\$114.61	\$117.58
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILD	\$156.38	\$160.45	\$164.61
PARENT-CHILDREN	\$223.40	\$229.22	\$235.16
FAMILY	\$336.27	\$345.03	\$353.97

Monthly Tiered Premium Rates

CONTRACT # M150-013-F REV. 4/10 FACE SHEET-#M150-XXX-F REV. 4/11  
 RIDER FORM #M-151-488-F, 489-F, 490-F, 491-F, 683-F, 684-F, 685-F, 686-F,  
 813-F, 814-F, 815-F, 816-F.

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 DATES OF JUNE 1, 2016 THROUGH OCTOBER 1, 2016. THE RATES SUMMARIZED HEREIN  
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EXCLUDING CONTRACEPTIVES

	06/1/16 THROUGH 06/30/2016	07/1/16 THROUGH 09/30/2016	10/1/16 THROUGH 10/31/16
<b>\$15/\$30/\$45</b>			
PRESCRIPTION DRUG PMPM (EXHIBIT III)	\$90.87	\$93.23	\$95.65
<u>2 TIER</u>			
SINGLE	\$100.31	\$102.92	\$105.59
FAMILY	\$250.78	\$257.30	\$263.98
<u>3 TIER</u>			
SINGLE	\$100.31	\$102.92	\$105.59
TWO-PARTY	\$200.62	\$205.84	\$211.18
FAMILY	\$297.80	\$305.55	\$313.48
<u>4 TIER</u> STANDARD			
SINGLE	\$100.31	\$102.92	\$105.59
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILD	\$156.38	\$160.45	\$164.61
FAMILY	\$321.55	\$329.93	\$338.48
<u>4 TIER</u> BY EMPLOYER REQUEST ONLY			
SINGLE	\$100.31	\$102.92	\$105.59
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILDREN	\$177.42	\$182.05	\$186.76
FAMILY	\$336.26	\$345.02	\$353.96
<u>5 TIER</u>			
SINGLE	\$100.31	\$102.92	\$105.59
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILD	\$156.38	\$160.45	\$164.61
PARENT-CHILDREN	\$223.40	\$229.22	\$235.16
FAMILY	\$336.27	\$345.03	\$353.97

Monthly Tiered Premium Rates

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 RIDER FORM #M-151-488-F, 489-F, 490-F, 491-F, 683-F, 684-F, 685-F, 686-F,  
 813-F, 814-F, 815-F, 816-F.

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EXCLUDING CONTRACEPTIVES

	06/1/16 THROUGH 06/30/2016	07/1/16 THROUGH 09/30/2016	10/1/16 THROUGH 10/31/16
<b>\$10/\$25/\$50</b>			
PRESCRIPTION DRUG PMPM (EXHIBIT III)	\$97.34	\$99.87	\$102.46
<u>2 TIER</u>			
SINGLE	\$107.45	\$110.25	\$113.11
FAMILY	\$268.63	\$275.63	\$282.78
<u>3 TIER</u>			
SINGLE	\$107.45	\$110.25	\$113.11
TWO-PARTY	\$214.90	\$220.50	\$226.22
FAMILY	\$319.00	\$327.31	\$335.80
<u>4 TIER</u> STANDARD			
SINGLE	\$107.45	\$110.25	\$113.11
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILD	\$156.38	\$160.45	\$164.61
FAMILY	\$321.55	\$329.93	\$338.48
<u>4 TIER</u> BY EMPLOYER REQUEST ONLY			
SINGLE	\$107.45	\$110.25	\$113.11
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILDREN	\$177.42	\$182.05	\$186.76
FAMILY	\$336.26	\$345.02	\$353.96
<u>5 TIER</u>			
SINGLE	\$107.45	\$110.25	\$113.11
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILD	\$156.38	\$160.45	\$164.61
PARENT-CHILDREN	\$223.40	\$229.22	\$235.16
FAMILY	\$336.27	\$345.03	\$353.97

Monthly Tiered Premium Rates

CONTRACT # M150-013-F REV. 4/10 FACE SHEET-#M150-XXX-F REV. 4/11  
 RIDER FORM #M-151-488-F, 489-F, 490-F, 491-F, 683-F, 684-F, 685-F, 686-F,  
 813-F, 814-F, 815-F, 816-F.

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 DATES OF JUNE 1, 2016 THROUGH OCTOBER 1, 2016. THE RATES SUMMARIZED HEREIN  
 REFLECT A 3.2% QUARTERLY INCREASE AND ARE GUARANTEED FOR A 12 MONTH PERIOD.

EXCLUDING CONTRACEPTIVES

	06/1/16 THROUGH 06/30/2016	07/1/16 THROUGH 09/30/2016	10/1/16 THROUGH 10/31/16
<b>\$20/\$35/\$50</b>			
PRESCRIPTION DRUG PMPM (EXHIBIT III)	\$84.36	\$86.55	\$88.80
<u>2 TIER</u>			
SINGLE	\$93.13	\$95.54	\$98.03
FAMILY	\$232.83	\$238.85	\$245.08
<u>3 TIER</u>			
SINGLE	\$93.13	\$95.54	\$98.03
TWO-PARTY	\$186.26	\$191.08	\$196.06
FAMILY	\$276.48	\$283.64	\$291.03
<u>4 TIER</u> STANDARD			
SINGLE	\$93.13	\$95.54	\$98.03
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILD	\$156.38	\$160.45	\$164.61
FAMILY	\$321.55	\$329.93	\$338.48
<u>4 TIER</u> BY EMPLOYER REQUEST ONLY			
SINGLE	\$93.13	\$95.54	\$98.03
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILDREN	\$177.42	\$182.05	\$186.76
FAMILY	\$336.26	\$345.02	\$353.96
<u>5 TIER</u>			
SINGLE	\$93.13	\$95.54	\$98.03
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILD	\$156.38	\$160.45	\$164.61
PARENT-CHILDREN	\$223.40	\$229.22	\$235.16
FAMILY	\$336.27	\$345.03	\$353.97

Monthly Tiered Premium Rates

CONTRACT # M150-013-F REV. 4/10 FACE SHEET-#M150-XXX-F REV. 4/11  
 RIDER FORM #M-151-488-F, 489-F, 490-F, 491-F, 683-F, 684-F, 685-F, 686-F,  
 813-F, 814-F, 815-F, 816-F.

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 THE RATES ARE APPLICABLE FOR SUBSCRIBERS ENROLLING OR RENEWING BETWEEN  
 DATES OF JUNE 1, 2016 THROUGH OCTOBER 1, 2016. THE RATES SUMMARIZED HEREIN  
 REFLECT A 3.2% QUARTERLY INCREASE AND ARE GUARANTEED FOR A 12 MONTH PERIOD.

EXCLUDING CONTRACEPTIVES

	06/1/16 THROUGH 06/30/2016	07/1/16 THROUGH 09/30/2016	10/1/16 THROUGH 10/31/16
50%			
PRESCRIPTION DRUG PMPM (EXHIBIT III)	\$51.87	\$53.22	\$54.60
<u>2 TIER</u>			
SINGLE	\$57.26	\$58.75	\$60.27
FAMILY	\$143.15	\$146.88	\$150.68
<u>3 TIER</u>			
SINGLE	\$57.26	\$58.75	\$60.27
TWO-PARTY	\$114.52	\$117.50	\$120.54
FAMILY	\$169.99	\$174.42	\$178.93
<u>4 TIER</u> STANDARD			
SINGLE	\$57.26	\$58.75	\$60.27
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILD	\$156.38	\$160.45	\$164.61
FAMILY	\$321.55	\$329.93	\$338.48
<u>4 TIER</u> BY EMPLOYER REQUEST ONLY			
SINGLE	\$57.26	\$58.75	\$60.27
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILDREN	\$177.42	\$182.05	\$186.76
FAMILY	\$336.26	\$345.02	\$353.96
<u>5 TIER</u>			
SINGLE	\$57.26	\$58.75	\$60.27
HUSBAND-WIFE	\$268.08	\$275.06	\$282.19
PARENT-CHILD	\$156.38	\$160.45	\$164.61
PARENT-CHILDREN	\$223.40	\$229.22	\$235.16
FAMILY	\$336.27	\$345.03	\$353.97

**SERFF Tracking #:**

GSHP-130345768

**State Tracking #:**

GSHP-130345768

**Company Tracking #:**

0250-062016RX

**State:**

Pennsylvania

**Filing Company:**

Geisinger Health Plan

**TOI/Sub-TOI:**

HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

**Product Name:**

HMO

**Project Name/Number:**

Small Group HMO Rx Base Rate Filing-eff Jun2016/0250-062016Rx

## Supporting Document Schedules

<b>Satisfied - Item:</b>	Actuarial Memorandum and Explanatory Information (A&H)
<b>Comments:</b>	
<b>Attachment(s):</b>	HMO Drug Filing for Jun thru Oct Groups with under 51 Employees-eff Jun 2016-Cover Letter.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	



November 25, 2015

**Johanna Fabian-Marks**

HMO/PPO Review Division  
Bureau of Accident and Health Insurance  
Office of Rate Policy and Regulation  
Commonwealth of Pennsylvania  
Department of Insurance  
1311 Strawberry Square  
Harrisburg, PA 17120

re: Geisinger Health Plan ("GHP")-NAIC # 95923  
Prescription Drug Rider Filing for HMO Groups with fewer than 51 **Employees**  
Effective June 1, 2016

Dear Ms. Fabian-Marks:

Enclosed for your review and approval is a copy of GHP's Prescription Drug Rider Rate Filing and Model for **Non-Grandfathered HMO groups renewing June through October 2016 (through September 2017)**. This filing is being submitted to the Department as a result of Insurance Commissioner Consedine's March 17, 2014 announcement that Pennsylvania insurers may allow people with individual or small group health insurance policies to keep their current plans through October 2016, in accordance with President Obama's March 5, 2014 statement. The proposed effective date is **June 1, 2016**. The main purposes of this filing are as follow:

1. Implement an average rate change of **12.3%** [over the second quarter (6/1/15-5/31/16) rates of the currently approved Prescription Drug Rider Rate Filing (ID# **GSHP-129826330** approved on February 27, 2015)]. This filing will impact approximately **3,804** members and generate approximately \$459K in additional annual revenue.
2. Increase the quarterly trend of from **2.6%** to **3.2%**.
3. The current prescription drug model is based on Rx claims incurred July 2011 to June 2012 and paid through August 2012. The relativities of our drug plans remain the same as our last filed model [Prescription Drug Rider Rate Filing (ID#GSHP-128800924 approved on Jan. 3, 2013)].
4. Use the plan relativities developed through the current prescription drug model (as shown in the file titled "Rx Model Eff June 2016 for HMO U51 Employees" for the rate development of all the existing drug plans as well as new drug plans). These plan relativities will be applied to the \$0 copay base rates (see "Rate calculation" tab for more details). The model includes a user tab "Cover Sheet", which allows one to input various copay and coinsurance options and generate rates. These are the base rates which we are proposing to use effective June 1, 2016.

5. **Include the pricing impact of any of the 2016 ACA taxes/subsidies in our base rates; these fees are included in Item#1.**

Please feel free to contact me at (570) 271-7842. Thank you for your attention to this matter & Happy Thanksgiving!

Sincerely,

Victoria Bardsley  
Manager of Actuarial Services, FAHM

cc. Kurt Wrobel, FSA, Chief Actuary for GHP  
Sarah MacDerment, FSA, Actuarial Services Director  
Everard Riley, Actuarial Consultant II

## Attachment I: Prescription Drug Rider Base Rate Filing and Model

- Exhibits I and II show the rate development using specific Plan Prescription Drug experience for all “transitional” HMO Groups (with fewer than 51 average employees) for the experience period August 1, 2014 through July 31, 2015.
- Exhibits IV through VIII contain the monthly premium rates for our top 5 plans based on membership.

The following items support specific calculations contained in each of the Exhibits:

### 1. Exhibit I

- The Cost and Utilization trends used in these Exhibits represent a combined annual trend of **13.3%** (as shown on the “SG HMO & PPO Rate Filings–eff 6.1.16–Trend Support-for PID!” file that is being submitted in SERFF). The total trend projects the cost and utilization from the middle of the aforementioned experience period to the middle of the rating period (i.e. 22 months).
- The rate increase that we are proposing reflects the rising costs of the brand formulary and brand non-formulary drugs. Even with GHP’s achievements during 2004 thru 2015 in promoting the use of generic drugs and in obtaining the best prices for all drugs, we continue to see increasing trends on the non-generic side. Consultants have told us that our generic usage is the highest that they have seen in the marketplace, and we believe that we have now reached maximum generic utilization of approximately 85%. Therefore, we cannot expect future savings from increasing generic utilization.

### 2. Exhibit II

- The “Benefit Plan Relativity Factors” in column 6 were calculated using our *current* prescription drug rating model (“Rx Model”). A copy of this *proprietary* model, along with several supporting worksheets showing the development of the plan relativities, has been supplied as a *separate electronic file in SERFF*. Note that manufacturers’ rebate credits have been applied in column 5. The amount shown reflects the actual rebate credits received for the experience period.

### 3. Exhibit III

- The contract mix distribution was derived using the average number of subscribers (with both medical & Rx benefits) in each contract type for the base period of August 2014 through July 2015. These factors tie to those used in the corresponding Small Group HMO medical filing (submitted in SERFF on 11/25/15) to ensure consistency in rating.
- Both the Average Family Size and the Family Rate Multiplier factors also tie to those used in our recent Small Group Medical Rate Filing.

#### 4. Exhibits IV through VIII

- These Exhibits use the Projected PMPM's developed on Exhibit II, and converted to tiered-rates using the Conversion factors on Exhibit III.
- A 3.2% quarterly trend was utilized in the development of our quarterly rates for 7/1/16 through 10/1/16 effective dates. This quarterly trend was derived from the annual trend on Schedule "A", i.e.  $1.133^{(3/12)} \approx 1.032$ .
- The Contraceptive Rider is displayed as "\$0" since the cost of this has been accounted for in our 8/1/12 "Well-Woman PPACA" filing. This load is applied (as warranted by the specific experience period used) to our filed Base Rates.

#### 5. Exhibit "A"

- As noted previously, this Filing contains rates for our current **plans** (approved in Filing ID# GSHP-129826330). The development of each of the plans is contained on Exhibit "A". As with our previous Filing, our Pharmacy Department has assigned each prescription drug to a tier as follows:
  - Tier 1 consists of Generic Drugs.
  - Tier 2 consists of Preferred Brand Drugs.
  - Tier 3 consists of Non-preferred Brand Drugs (available only upon prior authorization in all current pharmacy riders).
- Exhibit "A" calculates the PMPM costs for each of the current utilized plan options. The "Benefit Plan Relativity Factors" were calculated using our *current* prescription drug rating model. Each of these options was available with no deductible, a \$50 Single/\$150 Family annual deductible, and a \$100 Single/\$300 Family annual deductible. The factors used to calculate the plans subject to a deductible were developed using last year's claims probability table. For the \$50 deductible plans, the ratio is 0.9614 and for the \$100 deductible plans, the ratio is 0.9311. The projected PMPM's have been adjusted by these ratios on Exhibit "A".
- Please note that all claims for Diabetic prescription drugs have been removed from the experience used in this Rate Filing. As mentioned in our currently approved Prescription Drug Rider Rate filing, we began to move these services to our basic medical rider (upon renewal following April 1, 2004) and thus they have been excluded from our subsequent Prescription Drug Rate Filings.