SERFF Tracking #: CABC-132795942 State Tracking #: CABC-132795942 Company Tracking #: 21-62

State: Pennsylvania Filing Company: Capital Advantage Insurance Company

TOI/Sub-TOI: H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only

Product Name: Rates - CAIC Small Group PPO

Project Name/Number: /

#### **Supporting Document Schedules**

Satisfied - Item:	ACA Public Rate Filing PDF
Comments:	
Attachment(s):	SG_21-62_Initial_CAIC_PPO_PublicFiling01_Supporting_20210713.pdf SG_21-62_Initial_CAIC_PPO_PublicFiling02_Supporting_20210713.pdf SG_21-62_Initial_CAIC_PPO_PublicFiling03_Supporting_20210713.pdf SG_21-62_Initial_CAIC_PPO_PublicFiling04_Supporting_20210713.pdf
Item Status:	
Status Date:	



#### May 18, 2021

Ms. Tracie Gray, Director Bureau of Life, Accident and Health Insurance Office of Insurance Product Regulation and Administration Commonwealth of Pennsylvania Insurance Department 1311 Strawberry Square Harrisburg, PA 17120

Re: Capital Advantage Insurance Company

**Small Group Rates Filing No 21-62** 

**TOI Code: H15G Group Health – Hospital/Surgical/Medical Expense** 

Sub-TOI Code: H15G.003 Small Group Only

Filing Type: Rate

Dear Ms. Gray:

By this filing Capital BlueCross, on behalf of its wholly owned subsidiary Capital Advantage Insurance Company, submits to the Department Small Group Rates effective January 1, 2022.

The following is a summary of the rate filing:

- Company Name: Capital Advantage Insurance Company (CAIC)
- NAIC: 41203
- Market: Small Group
- On/Off Exchange: Off Exchange
- Effective Date: 1/1/2022
- Average Rate Change: 5.8%
- Range of Requested Rate Change: 5.8% to 5.8%
- Total additional annual revenue generated from the proposed rate change: \$60,284
- Product: PPO
- Rating Areas: 6,7,9
- Metal Levels: Gold
- Current Covered Lives and Policyholders: 132/83
- 2022 Number of Plans/Change from 2021: 1/No Changes
- Contract Form #: C22-CAIC-SGP
- Form Filing SERFF #: CABC-132793478
- Binder SERFF #: CABC-PA22-125107257
- HIOS Issuer ID: 82795
- HIOS Submission Tracking Number: 82795-2003721964618918916

In support of this filing, I have included an Actuarial Memorandum with supporting exhibits, URRT, Consumer Friendly Justification, Rates Table Template, and PA Plan Design Summary and Rate Tables.

If you have any questions regarding this filing, please call me at (o o at (o ). Thank you for your assistance in this matter.	or via email at
Sincerely,	
, ASA, MAAA Manager, Actuarial Services Capital BlueCross	
Enclosures	
cc: FSA, MAAA, Senior Director, Actuarial Services , ASA, MAAA, Vice President and Chief Actuary, Actuarial Services , Associate General Counsel	Services

## **Attachment I**

### Rate Change Summary

#### Capital Advantage Insurance Company (CAIC) - Small Group Plans

Rate request filing ID # CABC-132795942 - 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**

Initial requested average rate change: 5.5%<sup>1</sup>
Revised requested average rate change: N/A<sup>1</sup>

Range of requested rate change: 5.5% to 5.5% to 5.5% to 5.5% Mapped Members: 1/1/2022

Available in: Rating Areas 6, Rating Area 7, and Rating Area 9

#### **Key information**

#### Jan. 2020-Dec. 2020 financial experience

Company made (after taxes)	\$66,562
Taxes & fees	\$26,699
Administrative expenses	\$66,567
Claims	\$632,161
Premiums	\$791,989

How it plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2022:

 Claims:
 85.66%

 Administrative:
 9.75%

 Taxes & fees:
 2.59%

 Profit:
 2.00%

The company expects its annual medical costs to increase 6.52%.

#### **Explanation of requested rate change**

Future Cost and Utilization: 6.5%

Less migration of groups from ACA to ASO arrangements: -1.0%

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



#### July 13, 2021

Ms. Tracie Gray, Director Bureau of Life, Accident and Health Insurance Office of Insurance Product Regulation and Administration Commonwealth of Pennsylvania Insurance Department 1311 Strawberry Square Harrisburg, PA 17120

Re: Capital Advantage Insurance Company

**Small Group Rates Filing No 21-62** 

**TOI Code: H15G Group Health – Hospital/Surgical/Medical Expense** 

Sub-TOI Code: H15G.003 Small Group Only

Filing Type: Rate

Dear Ms. Gray:

By this filing Capital BlueCross, on behalf of its wholly owned subsidiary Capital Advantage Insurance Company, submits to the Department Small Group Rates effective January 1, 2022.

The following is a summary of the rate filing:

- Company Name: Capital Advantage Insurance Company (CAIC)
- NAIC: 41203
- Market: Small Group
- On/Off Exchange: Off Exchange
- Effective Date: 1/1/2022
- Average Rate Change: 5.5%
- Range of Requested Rate Change: 5.5% to 5.5%
- Total additional annual revenue generated from the proposed rate change: \$57,107
- Product: PPO
- Rating Areas: 6,7,9
- Metal Levels: Gold
- Current Covered Lives and Policyholders: 132/83
- 2022 Number of Plans/Change from 2021: 1/No Changes
- Contract Form #: C22-CAIC-SGP
- Form Filing SERFF #: CABC-132793478
- Binder SERFF #: CABC-PA22-125108746
- HIOS Issuer ID: 82795
- HIOS Submission Tracking Number: 82795-2003721964618918916

In support of this filing, I have included an Actuarial Memorandum with supporting exhibits, URRT, Consumer Friendly Justification, Rates Table Template, and PA Plan Design Summary and Rate Tables.

If you have any questions regarding this filing, please call me at (or via email at ) or at ( Thank you for your assistance in this matter.
Sincerely,
, ASA, MAAA Manager, Actuarial Services
Capital BlueCross
Enclosures
cc: FSA, MAAA, Senior Director, Actuarial Services  ASA, MAAA, Vice President and Chief Actuary, Actuarial Services  Associate General Counsel

#### CAPITAL ADVANTAGE INSURANCE COMPANY, INC.

#### ACTUARIAL MEMORANDUM Small Group Rates Effective January 1, 2022

#### **General Information**

#### **Company Information**

Company Legal Name: Capital Advantage Insurance Company – CAIC

• State: PA

HIOS Issuer ID: 82795Market: Small GroupEffective Date: 1/1/2022

#### **PID Company Information**

• Company Name: Capital Advantage Insurance Company (CAIC)

• NAIC: 41203

• Market: Small Group

• On/Off Exchange: Off Exchange

Effective Date: 1/1/2022Average Rate Change: 5.5%

• Range of Requested Rate Change: 5.5% to 5.5%

• Total additional annual revenue generated from the proposed rate change: \$57,107

Product: PPO

Rating Areas: 6,7,9Metal Levels: Gold

• Current Covered Lives and Policyholders: 132/83

• 2022 Number of Plans/Change from 2021: 1/No Changes

• Contract Form #: C22-CAIC-SGP

• Form Filing SERFF #: CABC-132793478

• Binder SERFF #: CABC-PA22-125108746

• HIOS Issuer ID: 82795

HIOS Submission Tracking Number: 82795-2003721964618918916

#### **Company Contact Information**

• Primary Contact Name:

• Primary Contact Telephone Number:

• Primary Contact Email Address:

#### **Scope and Purpose**

By this filing, Capital Advantage Insurance Company (CAIC), a subsidiary of Capital BlueCross (CBC), submits rates for products to be made available to all small groups effective January 1, 2022.

#### **Rate History and Proposed Variations in Rate Changes**

Market	Company	Effective Date	SERFF#	Annual Increase
Small Group	CAIC	1/1/2018	CABC-131022120	4.7%
Small Group	CAIC	1/1/2019	CABC-131455106	16.2%
Small Group	CAIC	1/1/2020	CABC-131921812	13.2%
Small Group	CAIC	7/1/2020	CABC-132294744	8.6%
Small Group	CAIC	1/1/2021	CABC-132352732	-6.0%
Small Group	CAIC	10/1/2021	CABC-132750951	-3.5%

#### **Average Rate Change**

CAIC is proposing an aggregate annual 5.5% rate change. The rate change is calculated in PA Rate Exhibits Part III, Table 10, cell AC15.

The key drivers of the rate change, and approximate impact, are as follows:

Future Cost and Utilization: 6.5%

Less migration of groups from ACA to ASO arrangements: -1.0%

Please note the filing includes a COVID-19 adjustment of 1.026.

#### **Membership**

Membership is shown in PA Rate Exhibits Part I, Table 1. The average age is 40.

#### **Benefit Changes 2021-2022**

A summary of proposed 2022 benefits is included in Exhibit A.

There are several benefit changes being implemented in 2022. All benefit changes comply with the uniform modification of coverage standards described in 45 CFR 147.106(e). Any plan with a

benefit change that did not meet the uniform modification of coverage standard was terminated, and a new plan was created in its place. Benefit changes by plan are listed in Exhibit B, highlighted in yellow.

#### **Experience Period Premium and Claims**

**Single Risk Pool**: The data used to develop rates and shown in URRT and PA Rate Exhibits abides by 45 CFR part 156.80(d) single risk pool requirements. The single risk pool reflects all covered lives for every non-grandfathered, non-transitional product/plan combination for CAIC in the small group market.

**Base Experience Period**: The base experience period (BEP) includes completed fee-for-service paid and incurred claims for dates of service between January 1, 2020 and December 31, 2020.

Transitional membership is not included in PA Rate Exhibits Table 2 or URRT.

Paid Through Date: Claims in the BEP are paid through February 28, 2021

**Premiums** (net of MLR Rebate) in BEP: Premiums are calculated on an earned basis in the BEP. MLR rebate adjustments are equal to zero as CAIC does not expect to refund any MLR rebates in the BEP.

#### Allowed and Incurred Claims in BEP:

- Allowed claims are developed by combining paid claims with member cost-sharing.
   Allowed claims meet the definition in the URR instructions. They do not include provider quality incentive payments.
- Incurred claims are net of HHS CSR payments (CSR does not apply to Small Group).
- CBC only covers Essential Health benefits (EHBs).
- CAIC does not include capitated services.
- Allowed and Incurred claims are net of pharmacy rebates. BEP rebates are completed based on actual utilization of rebate-eligible drugs and rebate amounts.

**Estimated Incurred but Not Paid Claims**: Paid claims by date of service come directly from CBC's data warehouse. The method for calculating incurred claims in the BEP is as follows:

- 1. Historical fee-for-service claims are viewed by date of service and date of payment in a claims triangle.
- 2. The claims triangle payments are then accumulated by date of service to develop factors that represent the rate of accumulation or rate of "completion".
- 3. Historical rates of completion by duration are used to derive projected rates of completion. Some of the methods used to develop projected completion factors are averages (e.g. harmonic averages, time weighted averages, geometric averages) and regression methods. Numerous items are considered when viewing these averages or regression statistics, such as the impact of high claims on perceived completion patterns.

- 4. For durations that exhibit a projected completion factor greater than the Valuation Actuary's chosen threshold (e.g. 80% complete), cumulative paid and incurred claims are divided by the projected completion factor to arrive at ultimate incurred claims. For durations that are less than the chosen threshold, a projection methodology is used. Similar to completion factor development, projection methodologies are worthy of a lengthy discussion. In general, an ultimate incurred claims PMPM is derived by projecting a recent 12-month period to the current month(s) and seasonally adjusting.
- 5. With all months having both a cumulative paid amount and an estimated ultimate incurred amount, the completion factors used in pricing are calculated by taking the quotient of the two. Allowed completion and incurred completion are assumed to be identical.
- 6. Both allowed and paid claims in the BEP are completed by applying completion factors by incurred month developed in Step 6.

$$BEP\ Incurred\ Claims\ =\ \sum \frac{BEP\ Paid\ Claims\ by\ Incurred\ Month}{Completion\ by\ Incurred\ Month}$$

BEP Allowed Claims

$$= \sum \frac{BEP\ Paid\ Claims + BEP\ Member\ Cost\ Share\ by\ Incurred\ Month}{Completion\ by\ Incurred\ Month}$$

**Risk Adjustment in BEP**: Risk adjustment amounts in the BEP are equal to the amounts sent by the Department on 5/9/2021.

**Loss Ratio in BEP:** Loss ratio is 79.82%

#### **Credibility of Data**

For the purpose of rate development, CAIC small group products are combined with other product offerings (HMO, PPO) from CBC subsidiaries. Combining the experience is actuarially justifiable for several reasons:

- 1. The demographics of members buying PPO and other products are similar.
- 2. Cost and utilization between PPO and other products are similar.
- 3. Medical policy between PPO and other products are almost identical, with the exception of referrals and no out-of-network benefit on HMO.

The credibility manual is the combination of CAIC, Capital Advantage Assurance Company (CAAC), and Keystone Health Plan Central (KHPC) HMO data. The credibility manual BEP includes completed fee-for-service paid and incurred claims and capitation for dates of service between January 1, 2020 and December 31, 2020. All data is trended and benefit-adjusted in the same manner as the experience data (same projection factors and trend).

#### **Trend Identification**

Trend: 6.52%

Trend levels reflect CBC's best estimate of changes in utilization, provider reimbursement contracts, the network of facilities and providers, disease management initiatives and the impact of utilization management.

The following is a description of considerations used to determine trend.

- 1. Base Cost/ Change in hospital and physician contracting: The contracted increase in reimbursements to hospitals and physicians is the basis of cost trends. CBC uses the following to project future costs:
  - a. Vendor Physician Cost Model and Internal Hospital Contracting Model
    - i. The medical cost models use best estimates of Capital BlueCross (CBC)'s future contracting increases with physicians and hospitals. The models use cost estimates based on varying contract effective dates by physician and hospital. All facilities and providers are considered in this modeling effort (i.e. acute and non-acute, network and non-network, inpatient and outpatient, in- area and out-of-area). From there, a monthly anticipated cost (assuming static utilization) summary is produced which can be used in projecting future claims costs. Cost trends are determined at the CBC book of business level for all commercial business.
  - b. Internal Prescription Drug Trend Model
    - i. Price Inflation
    - ii. Contract Pricing
    - iii. Member Cost-Sharing
    - iv. Units per Script
    - v. Brand/Generic Mix
    - vi. Therapeutic Mix
    - vii. Cost per Script
    - viii. Pipeline (new drugs)
- 2. Utilization Considerations:
  - a. Intensity of medical services rendered
  - b. Changes in place of service (e.g. continued migration of inpatient stays to outpatient setting)
  - c. Further migration from brand prescription drugs to generic prescription drugs
  - d. Favorable impacts of value based benefits designs
  - e. Medical utilization estimates reviewed by CBC's Chief Medical Officer
- 3. Leveraging: The trend model is based on allowed cost increases. Paid claims trend at a higher rate than allowed due to leveraging. Leveraging is the impact of static cost-share, such as deductibles and copays, to the paid trend.
- 4. Intensity: Measure of cost increase due to change in treatment sophistication. An example is migration from x-rays to MRIs at significantly higher cost.

5. Underwriting Cycle: The underwriting cycle is defined as the tendency to swing between profitable and unprofitable periods over time. The underwriting cycle is exacerbated partly by pricing performed with incomplete information as to the level of current experience trends. A reaction delay occurs, as carriers tend to rely on measurements of past experience in developing current pricing assumptions. As a result, carriers are often increasing their pricing trends when actual experience trends have begun to decline, and decreasing their pricing trends actual trends are increasing. CBC strives to mitigate the underwriting cycle by keeping trends consistent through times of increasing and decreasing claim cost and utilization.

**Historical Experience:** Historical experience was not used to the develop trend.

**Benefit Categories**: Claims in the benefit categories displayed in URRT come directly from CBC's data warehouse. These same categories are used to develop category-level trend. See Exhibit C for a description of benefits by benefit category.

See Exhibit E for CAIC's pricing trend, as well as cost and utilization components of the pricing trend.

#### Rate Development & Change

#### **Projection Factors**

**Changes in Morbidity:** Found in URRT Worksheet 1, "Morbidity Adjustment", and PA Rate Exhibits, Table 5. CBC projects 3% change in morbidity due to COVID-19 claim suppression during 2020. The morbidity factor is based on the following analysis:

- 1. Gather BEP claims, membership and premium from Ib Manual Data, Table 2. This is for the filing BEP 1/1/2020-12/31/2020.
- 2. Develop Claim PMPM A using data from (1)
- 3. Gather 2019 claims, membership and premium from Ib Manual Data, Table 2 from the 2021 annual filing. This is for BEP 1/1/2019-12/31/2019. Trend the claims data 12 months to the filing BEP in (1).
- 4. Develop Claim PMPM B using data from (2)
- 5. Claim PMPM B/Claim PMPM A 1 = 3.6%
- 6. 3% is applied in rating due to market competition.

The above calculation is found in Exhibit Q, Morbidity Factor Calculation.

2. In addition to the COVID-19 morbidity change, CAIC is also applying a factor of 1.14 to reflect the difference is projected Plan Liability Risk Score (PLRS) between CAIC and its subsidiary, CAAC, which underwrites the vast majority of the BEP experience. This factor aligns the rates with similar benefits offered under CAAC.

**Changes in Benefits:** Benefit changes are not applied to allowed claims as allowed should stay consistent from 2020 to 2022. Benefit changes are applied in the development of future incurred

claims, due to changes in member cost-share. This calculation is shown in Exhibit D, and applied in Exhibit G. The manual cost PMPMs are developed from CBC's internal benefit relativity model, discussed in the Plan Adjusted Index Rate section below. The benefit change is equal to member-month weighted average projected manual PMPM divided by member-month weighted average manual PMPM in the BEP. This process is further discussed in the Paid-to-Allowed section below.

**Changes in Demographics:** CAIC does not expect changes in demographics in its small group population.

**Changes in Network:** No Network change is applied.

**Other Adjustments:** No other adjustment is applied to the BEP.

Benefits, Demographics, Network and Other adjustments are found in URRT, Worksheet 1, and PA Rate Exhibits, Table 5.

#### **Index Rate**

The experience period index rate is CAIC's allowed claims PMPM, set in accordance with the single risk pool provision. All CAIC covered benefits are categorized as Essential Health Benefits (EHBs), therefore no adjustment was made to the experience period index.

**Projected Allowed Claims:** The CAIC experience period allowed claims, benefit-adjusted, trended to the projection period (See <u>Projection Factors</u> section above), and credibility adjusted, is the *Projected Allowed Claims at Current Benefits*. This number is reflected in Worksheet 1 of URRT ("Projected Allowed Experience Claims PMPM (w/ applied credibility if applicable)").

To calculate the projected index rate:

- 1. Start with Projected Allowed Claims at Current Benefits
- 2. The *Projected Allowed Claims at Current Benefits* reflect EHBs 100 percent, so no adjustment needs to be made to add EHBs and remove non-EHB claim cost. This is the index rate for individuals renewing January December.

See Exhibit J as well as PA Rate Exhibits Table 5 for the Index Rate.

#### **Paid to Allowed Ratio**

CAIC used the prescribed URRT allowed claim rate development methodology in conjunction with a paid and incurred rate development methodology to determine final premium rates. URRT projects allowed claims, and uses a paid-to-allowed ratio in order to adjust allowed claims to paid levels. This value is then used to develop premiums. In order to determine the paid-to-allowed ratio, CAIC projected paid and incurred claims, adjusted for benefits, to the experience period.

Projected Paid and Incurred Claims are calculated as follows:

- 1. Gather claims experience as described in the Data section above.
  - a. Base Experience Period (BEP) Paid Claims, Capitation, and Rx Rebates
  - b. BEP Member Months
- 2. Develop BEP Paid and Incurred Claims:

$$\textit{BEP Paid and Incurred Claims} = \frac{\textit{BEP Paid Claims}}{\textit{Completion Factor}}$$

The development of completion factors is described in <u>Experience Period Premium and Claims</u> above.

3. Develop the BEP Paid and Incurred Claim PMPM:

$$BEP\ Paid\ and\ Incurred\ Claim\ PMPM = \frac{BEP\ Paid\ and\ Incurred\ Claims}{BEP\ Member\ Months}$$

4. Develop *Trended Claim PMPM*: Using the aggregate trend described in the <u>Projection Factors</u> section above, trend the BEP Paid and Incurred Claim PMPM from the midpoint of the experience period to the midpoint of the rating period.

Trended Claim PMPM

$$= [\textit{BEP Paid and Incurred Claim PMPM}] \times (1 + [\textit{Trend\%}])^{\textit{Trend Months/12}}$$

5. Develop *Projected Paid and Incurred Claim PMPM*:

The *Benefit Adjustment*, *Morbidity Adjustment*, and *Other Adjustment* are discussed in the <u>Projections Factors</u> section above.

- 6. Develop *Projected Claims PMPM by Benefit* as follows:
  - a. CAIC uses an actuarial cost model to measure the impact of cost-sharing designs on cost and utilization amounts by service category. The cost model shows frequency per 1,000 per year by type of service (IP, OP, Professional), and allowed cost per service for each of the same types of service, normalized to a \$0 office visit copayment and a \$25 ER copayment. Given a particular benefit design (for example, \$20 office visit copayment), utilization is adjusted from the benchmark based on assumed utilization change factors, and cost per service is reduced by the copayment or coinsurance per service. Cost and utilization are multiplied together to derive a PMPM by service, summed for all services. The

- impact of global deductible, coinsurance, and out-of-pocket max is then measured based on cumulative probability distributions (CPDs), where the value of services that apply to the CPDs adjusts the level of the curve, as well as global utilization adjustments.
- b. This actuarial cost model derives a Manual Cost for each benefit design in the experience period, as well as plans being offered in the projection period. The average Manual Cost of the experience is compared to the Manual Cost of the base plan. The projected experience period data is then adjusted to the base plan:

$$Benefit\ Level\ Adjustment = rac{Average\ Manual\ Cost\ in\ Projection\ Period}{Manual\ Cost\ of\ Base\ Plan}$$

c. The *Projected Paid and Incurred Claim PMPM* (Step 5) is then adjusted to the Base Plan as follows:

$$Base\ Plan\ Paid\ and\ Incurred\ Claims\ PMPM \\ = \frac{Benefit\ Adjusted\ Paid\ and\ Incurred\ Claims\ PMPM}{Benefit\ Level\ Adjustment}$$

d. Each additional benefit design has its own unique Manual Cost, which can then be compared to the Base Plan to develop a Benefit Relativity:

$$Benefit \ Relativity \ A = \frac{Manual \ Cost \ of \ Benefit \ A}{Manual \ Cost \ of \ Base \ Plan}$$

- e. The Benefit Relativity developed in d. above is then used as a gauge to develop a final *Pricing Relativity*. This pricing relativity is developed using actuarial judgment including the following considerations:
  - i. Final premium relativities must make sense based on benefits. For example, the annual cost difference between a PPO 2000 and PPO 1000 must be less than \$1000.
  - ii. Adjustments for plan designs that fall outside of the actuarial cost model.
- a. So the *Projected Claims PMPM by Benefit* is:

b. And to arrive at the *Total Projected Claims PMPM*, CAIC assumes a distribution of members across the benefit plans being offered in the projection period. The *Total Projected Claims PMPM*:

- = Projected Claims PMPM Benefit  $A \times Expected$  Member Dist of Benefit A + Projected Claims PMPM Benefit  $B \times Expected$  Member Dis of Benefit  $B + \cdots$
- 7. The Paid-To-Allowed Ratio is then:

$$Paid \ to \ Allowed \ Ratio = \frac{Total \ Projected \ Claims \ PMPM}{Projected \ Allowed \ Claims \ at \ Current \ Benefits}$$

See Exhibit G for the development of the *Paid-to-Allowed Ratio*. And see Exhibit L for the plan-level projected incurred amount development.

#### **Market Adjusted Index Rate**

The Market Adjusted Index Rate is calculated as the Index Rate adjusted for all allowable market-wide modifiers defined in the market rating rules, 45 CFR Part 156.80(d)(1). So,

[Market Adjusted Index Rate]

- $= ([Index\ Rate]\ x\ [Paid\ to\ Allowed\ Ratio]$
- [Projected Incurred Reinsurace Recoveries]
- [Projected Incurred Risk Adjustment PMPM]
- + [Exchange Fees PMPM]) ÷ [Paid to Allowed Ratio]

#### **Projected Incurred Risk Adjustments PMPM:**

Relevant to 2022 pricing is the impact of Commercial Risk Adjustment (CRA) payment transfers that are expected to be earned in 2022. The following items are those that we deem important in generating a CRA payment transfer adjustment:

- 1. Risk profile of the those enrolled in CRA eligible plans for the market or state (i.e. competitors) relative to risk profile of CRA eligible membership enrolled in our plans
- 2. Statewide average premiums
- 3. Current market penetration of this company and competitors in the market and in the state
- 4. 2019-2020 risk adjustment results
- 5. Market improvement in coding risk: CBC's ACA book of business has had a churn rate that makes a multi-year perspective of member diagnosis and risk very challenging. Because closing gaps in care and coding, and a myriad of other risk adjustment functions require more than a single year of data to facilitate an accurate depiction of risk, it is believed that CBC is disadvantaged in the market. This will drive CBC's relative risk to the market down over time.

The 2022 projected risk adjustment PMPM is set equal to the 2020 amount sent by the Department on 5/9/21.

#### **Projected Incurred Reinsurance Recoveries:**

Reinsurance does not apply to the small group market.

#### **Exchange Fee PMPM:**

CAIC only offers off-exchange plans in the small group market, so the exchange fee is \$0.

The exchange fee PMPM is calculated as:

```
Exchange Fee PMPM
= [Avg \ 2022 \ On - Exchange \ Premium \ PMPM] \times [\% \ Members \ On \\ - Exchange]
Where
[Avg \ 2022 \ On - Exchange \ Premium \ PMPM \\ = [Avg \ 2021 \ On - Exchange \ Premium \ PMPM \ \times (1 \\ + [Avg \ Proposed \ Rate \ Change])
```

See Exhibit K for the development of the Market Adjusted Index Rate.

#### **Retention Items**

#### **Administrative Expense Load:**

- 1. Risk Adjustment User Fee: To fund the HHS-risk adjustment program, issuers will remit to HHS a fee of \$0.25 PMPM. The Risk Adjustment Fee PMPM is included in URRT Worksheet 1, URRT Worksheet 2, "Administrative Expense", and PA Rate Exhibits Table 6.
- 2. Administrative Expense: Calculated using an allocation method from CBC's Finance department, and trended to the rating period. Costs are allocated according to results reported through a company-wide questionnaire. On an annual basis, each cost center within the company completes a questionnaire listing the distribution of costs (in percentage terms) by product as well as by market segment. For example, the questionnaire will ask what percentage of time is spent on PPO versus HMO versus Drug versus Medicare. And separately will ask what percentage of time is spent on large group, small group, individual, and government programs. Using those distributions, all costs needed to perform the business are allocated to the proper market segments and lines of business. The administrative expense applied in the rate development is the total expense allocated to CBC small group products. Administrative expenses are included in URRT Worksheet 2, "Administrative Expense", and PA Rate Exhibits Table 6. Expense as a percentage of premium vary by plan because a fixed dollar admin PMPM is applied to each plan.
  - a. Value-Based Benefits (VBB): Standard with each plan, Capital BlueCross includes wellness incentives to maximize the likelihood that consumers make positive behavioral changes, which lead to better health, and curbed health care costs for employers and employees alike. The incentive is as follows:
    - i. Complete biometric screening and receive a gift card.

- ii. Meeting biometric measure or finish online coaching program and receive a gift card reward.
- iii. The wellness program is administered through a vendor and costs are based on vendor fees, anticipated participation, and reward card amounts.
- iv. Fees are included in overall administrative expense fee discussed above.
- v. Included in URRT Worksheet 2, "Administrative Expense", and PA Rate Exhibits Table 6.
- 3. Broker Expense: Calculated based on CBC's explicit per contract broker fee. Broker Expense is included in URRT Worksheet 2, "Administrative Expense", and PA Rate Exhibits Table 6. Brokers are paid on new business and renewals the same commission rate for all geographic locations, enrollment dates, and metal levels. The 2021 broker commission schedule is yet to be finalized. Attached please find the 1/1/2020 copy of the broker agreement redacted version. Files are as follows:
  - a. Redacted Standard Producer Master Agreement: "SG\_21-62\_Initial\_CAIC\_PPO\_SPMABrokerGroupRedacted\_Supporting\_20210518.pdf"
  - b. Redacted Preferred Producer Master Agreement: "SG\_20-62\_Initial\_CAIC\_PPO\_PPMABrokerGroupRedacted\_Supporting\_20210518.pdf"
- 4. Additional Quality Improvement: Additional QI amounts applied in rating equal 0.4%. Included in URRT Worksheet 2, "Administrative Expense", and PA Rate Exhibits Table 6.

#### **Profit (or Contribution to Surplus) & Risk Margin:**

5. Contingency: Contingency is included in URRT Worksheet 2, "Profit & Risk Load" and PA Rate Exhibits Table 6.

#### **Taxes and Fees:**

- 1. Exchange Fee: N/A
- 2. Federal Income Tax: Federal Income Tax will be collected on the 2% contingency built into the premium. The projected Federal Income Tax is included in URRT Worksheet 2, "Taxes and Fees", and PA Rate Exhibits, Table 6.
- 3. Premium Tax: CAIC is charged premium tax of 2%. Premium tax is included in URRT, Worksheet2, "Taxes and Fees" and PA Rate Exhibits, Table 6.

See Exhibit H as well as PA Rate Exhibits Table 6 for all retention values.

#### **Plan Adjusted Index Rates**

The Plan Adjusted Index Rates are included in Worksheet 2, Section IV of URRT.

The following adjustments were used to derive the Plan Adjusted Index Rate:

1. Actuarial Value and Cost Sharing adjustment: The Actuarial Value and Cost Sharing Adjustment is determined using CAIC's actuarial cost model. CAIC uses an actuarial cost model to measure the impact of cost-sharing designs on cost and utilization amounts by

service category. The cost model shows frequency per 1,000 per year by type of service (IP, OP, Professional), and allowed cost per service for each of the same types of service, normalized to a \$0 office visit copayment and a \$25 ER copayment. Given a particular benefit design (for example, \$20 office visit copayment), utilization is adjusted from the benchmark based on assumed utilization change factors, and cost per service is reduced by the copayment or coinsurance per service. Cost and utilization are multiplied together to derive a claim PMPM by service, summed for all services. The impact of global deductible, coinsurance, and out-of-pocket max is then measured based on CPDs, where the value of services that apply to the CPDs adjusts the level of the curve, as well as global utilization adjustments.

2. Induced Demand: Induced Demand: Please see Table 8. Induced Demand is calculated as:

$$[Pricing\ AV]^2 - [Pricing\ AV] + 1.24$$

Where *Pricing AV* is adjusted by the Non-Funding of CSR factor: PA Rate Exhibits, Table 10, column K x column P.

- 3. Provider Network: The Provider network is the same across all PPO plans.
- 4. Adjustment for benefits in addition to EHBs: No benefits other than EHBs are included in the plans, so no adjustment is necessary.
- 5. Adjustment for distribution and administrative costs: Described in <u>Retention Items</u> section above.
- 6. Tobacco Adjustment: Not applied to Small Group plans.

The development of the Plan Adjusted Index rate is found in Exhibit L, and summarized in Exhibit M.

#### **Calibrated Plan Adjusted Index Rates**

**Age Curve Calibration**: The average age factor is calculated by taking the member-weighted average of current small group enrollment by age in CBC. Age factors are applied in accordance with CMS's Standard Age Curve. The age calibration factor is adjusted for contracts with greater than three children under the age of 21. Please see file SG\_21-62\_Initial\_CAIC\_PPO\_List-Billed\_Supporting\_20210518.xlsb for the calculation.

**Geographic Factor Calibration**: The average geographic rating factor is calculated by taking the CBC member-weighted average by region.

Geographic factors are unchanged from 2021.

**Tobacco Factor Calibration:** Tobacco factor not applied.

The calibration is:

[Calibrated Plan Adjusted Index Rate] = [Plan Adjusted Index Rate]  $\div$  ([Age Curve Calibration]  $\times$  [Geographic Factor Calibration]  $\times$  [Tobacco Factor])

Calibrated Plan Adjusted Index Rates are found on PA Rate Exhibits Table 10.

The calibration factors and development are found on Exhibit N.

#### **Consumer Adjusted Premium Rate Development**

The Consumer Adjusted Premium Rate is developed as follows:

1. Member-Level Consumer Adjusted Premium Rate:

```
[Member - Level Consumer Adjusted Premium Rate] = [Calibrated Plan Adjusted Index Rate] \times [Age Factor] \times [Geographic Factor] \times [Tobacco Factor]
```

[Family Consumer Adjusted Premium Rate] = ∑[Member –
 Level Consumer Adjusted Premium Rate]
 With no more than three child dependents under age 21 taken into account

All consumer-level adjustments are applied uniformly to all plans in the Single Risk Pool. These adjustments do not vary by plan. Age and Geographic factors are displayed in Exhibits O.

Base Rates, i.e. Calibrated Plan Adjusted Index Rates, are found on Exhibit P.

#### **AV Metal Values**

The AV Metal Values included in URRT Worksheet 2 and PA Rate Exhibits, Table 10 were based on the federally issued AV Calculator.

See AV Screenshots included with the submission.

#### **AV Pricing Values**

All AV Pricing values were developed using CBC's actuarial cost model and actuarial judgment as described in section Paid to Allowed above. Differences in health status are not included.

#### **Projected Loss Ratio**

See Exhibit I for the projected loss ratio calculation. The projected loss ratio is calculated using the federally prescribed MLR methodology.

#### **Membership Projection**

The membership projections found in Worksheet 2 of URRT were developed by assuming that moderate decline in enrollment and similar distribution to current.

#### **Projected versus Actual MLR**

Exhibit R shows a history of projected versus actual MLR and Member Months. Projected comes from the 2017-2019 filings. Actual comes from Table 4.

#### **Attachments and Examples**

The following is a list of Exhibits and Data to support this filing:

PA Rate Exhibits Part I through Part V

Table 8

Exhibit A – Benefit Summary

Exhibit B – Benefit Change Summary

Exhibit C – Benefit Categories

Exhibit D – Benefit Mix

Exhibit E - Trend

Exhibit F – URRT

Exhibit G – Paid-to-Allowed Development

Exhibit H – Retention

Exhibit I – Projected Loss Ratio

Exhibit J – Index Rate

Exhibit K – Market Adjusted Index Rate

Exhibit L – Rate Development by Plan

Exhibit M – Plan Adjusted Index Rates

Exhibit N – Calibration

Exhibit O – Rating Factors

Exhibit P – Quarterly Base Rates

Exhibit Q – Morbidity Factor

Exhibit R – MLR Exhibit

Broker Contracts Actuarial Value Screenshots

List-Billed Data

#### **Actuarial Statement**

I, ASA, MAAA, am of the opinion that this filing is in compliance with the applicable Federal and State Laws and Regulations concerning the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010.

I, ASA, MAAA, do hereby certify that:

- 1. This filing has been prepared in accordance with the following:
  - a. Actuarial Standard of Practice No. 5, "Health and Disability Claims"

- b. Actuarial Standard of Practice No. 8, "Regulatory Filings for Rates and Financial Projections for Health Plans"
- c. Actuarial Standard of Practice No. 12, "Risk Classification"
- d. Actuarial Standard of Practice No. 23, "Data Quality"
- e. Actuarial Standard of Practice No. 25, "Credibility Procedures Applicable to Accident and Health, Group Term Life, and Property/Casualty Coverage"
- f. Actuarial Standard of Practice No. 26, "Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans"
- g. Actuarial Standard of Practice No. 41, "Actuarial Communications".

#### 2. The index rate is:

- a. Projected in compliance with all applicable state and federal statutes and regulations (45 CFR 156.80(d) (1)).
- b. Developed in compliance with the applicable Actuarial Standards of Practice.
- c. Reasonable in relation to the benefits provided and the population anticipated to be covered.
- d. Neither excessive nor deficient.
- e. Adjusted by only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) to generate plan level rates.
- 3. The percent of total premium that represents essential health benefits were calculated in accordance with actuarial standards of practice.
- 4. The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans, and in accordance with CFR 156.135(b)(2) as necessary. For any plan requiring an alternative method, the development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for benefits that deviate substantially from the parameters of the AVC and have a material impact on the actuarial value.
  - a. The analysis was
    - i. conducted by a member of the American Academy of Actuaries, and
    - ii. performed in accordance with generally accepted actuarial principles and methods.
- 5. Geographic area rating factors reflect only differences in the costs of delivery and not differences due to population morbidity.
- 6. All factor, benefit and other changes from the prior approved filing have been disclosed in the actuarial memorandum.
- 7. New plans are not considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106.

8. The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2021 Rate Filing Justification.

, ASA, MAAA

Actuarial Associate Capital BlueCross

## PA Rate Template Part I

## Data Relevant to the Rate Filing

### Table 0. Identifying Information

Carrier Name:	Capital Advantage Insurance Compa	ny	
Product(s):	PPO		
Market Segment:	Small Group		
Rate Effective Date:	1/1/2022	to	12/31/2022
Base Period Start Date:	1/1/2020	to	12/31/2020
Date of Most Recent Membership:	2/1/2021		

#### Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of 02-01-2021)	Projected Rating Period
Average Age	39.8	35.8	35.8
Total	974	132	1,509
<18	166	26	297
18-24	34	5	57
25-29	85	20	229
30-34	62	7	80
35-39	90	17	194
40-44	82	11	126
45-49	71	8	91
50-54	136	15	171
55-59	112	11	126
60-63	114	10	114
64+	22	2	23

### 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
\$716,916.31	\$617,469.37	\$632,160.89	974	\$44,714.16	\$676,875.05	\$0.00	\$0.00	\$0.00	\$0.00	\$75,073.00	
<b>Experience Period Total Allowed EHB</b>	Claims + EHB Capitation PMPM (	net of prescription drug rebates)		<del>-</del>			•	•			\$ 694.94
Loss Ratio											79.82%
*Express Prescription Drug Rebates a	s a negative number									-	

## Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	5.30%	0.00%	0.00%	5.30%	17.82%
Outpatient Hospital	5.45%	0.00%	0.00%	5.45%	36.37%
Professional	4.15%	0.00%	0.00%	4.15%	21.93%
Other Medical	5.45%	0.00%	0.00%	5.45%	2.63%
Capitation				3.00%	0.00%
Prescription Drugs	10.25%	1.40%	0.00%	11.79%	21.24%
Total Annual Trend				6.52%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.135	
* Express Cost, Utilization, Induced Utilization and Weight as	percentages				

## \*\* Should equal URRT Trend Table 4. Historical Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-17		\$14,035.05	1.0000	· · · · · · · · · · · · · · · · · · ·	117	•		(\$494.00)	\$20,241.15 \$	
Feb-17		\$11,460.91	1.0000		83			(\$1,499.00)	\$20,843.38 \$	
Mar-17		\$24,769.03	1.0000		83			(\$3,395.00)	\$30,272.67 \$	
Apr-17		\$9,145.01	1.0000		83	'		(\$445.00)	\$13,108.51 \$	
May-17		\$31,577.12	1.0000		92			(\$4,613.00)	\$34,308.43 \$	
Jun-17		\$26,529.01	1.0000	· · · · · · · · · · · · · · · · · · ·	111			(\$2,494.00)	\$33,373.72 \$	
Jul-17		\$34,855.90	1.0000	· · · · · · · · · · · · · · · · · · ·	113	-		(\$5.00)	\$40,281.77 \$	
Aug-17		\$41,633.32	1.0000		113			(\$5.00)	\$61,272.97 \$	
Sep-17		\$28,897.98	1.0000		112			(\$4,718.00)	\$30,021.10 \$	
Oct-17		\$32,117.93	1.0000		111			(\$3.00)	\$41,781.27 \$	
Nov-17		\$24,436.09	1.0000		110			(\$7.00)	\$31,510.32 \$	
Dec-17	\$645,904.42	\$32,507.20	1.0000		141		\$101,387.09	(\$6,178.00)	\$32,480.35 \$	
Jan-18		\$23,122.87	1.0000		117			(\$1,990.00)	\$31,300.33 \$	
Feb-18		\$17,298.55	1.0000		117			(\$428.00)	\$26,321.11 \$	
Mar-18		\$12,371.48	1.0000	· · · · · · · · · · · · · · · · · · ·	117			(\$596.00)	\$20,602.19 \$	
Apr-18		\$11,236.11	1.0000		120			(\$415.00)	\$20,545.92 \$	
May-18		\$19,104.52	1.0000	· · · · · · · · · · · · · · · · · · ·	122			(\$3,358.00)	\$28,022.88 \$	229.7
Jun-18		\$30,369.68	1.0000		106			(\$800.00)	\$38,457.02 \$	
Jul-18		\$9,581.37	1.0000		103			(\$577.00)	\$15,095.40 \$	
Aug-18		\$14,475.79	1.0000	· · · · · · · · · · · · · · · · · · ·	104	•		(\$629.00)	\$18,980.44 \$	182.5
Sep-18		\$16,702.12	1.0000		103			(\$1,346.00)	\$19,780.72 \$	
Oct-18		\$14,279.17	1.0000	· · · · · · · · · · · · · · · · · · ·	103	•		(\$1,274.00)	\$20,400.97 \$	
Nov-18		\$13,388.10	1.0000	· · · · · · · · · · · · · · · · · · ·	102		_	(\$1,308.00)	\$15,938.49 \$	156.2
Dec-18	\$679,416.75	\$8,545.92	0.9916	. ,	54			(\$1,242.00)	\$9,633.80 \$	
Jan-19		\$13,003.43	0.9913	. ,	57	•		(\$1,002.00)	\$15,685.85 \$	275.
Feb-19		\$20,805.12	0.9999	· · · · · · · · · · · · · · · · · · ·	63			(\$1,945.00)	\$22,936.64 \$	
Mar-19		\$24,123.49	0.9845		69			(\$1,756.00)	\$27,872.10 \$	
Apr-19		\$22,248.53	0.9998	· · · · · · · · · · · · · · · · · · ·	70			(\$2,087.00)	\$26,171.68 \$	
May-19		\$37,773.26	0.9997		72			(\$1,118.00)	\$42,912.17 \$	
Jun-19		\$23,321.21	0.9997		70			(\$1,131.00)	\$26,832.41 \$	
Jul-19		\$27,960.87	0.9997		69			(\$924.00)	\$31,109.88 \$	
Aug-19		\$19,689.42	0.9998	· · · · · · · · · · · · · · · · · · ·	69			(\$2,159.01)	\$20,972.71 \$	
Sep-19	_	\$21,380.89	0.9995		71			(\$193.00)	\$24,750.94 \$	
Oct-19		\$17,379.09	0.9994	· · · · · · · · · · · · · · · · · · ·	69			(\$193.00)	\$21,535.64 \$	
Nov-19		\$41,782.28	0.9953		76			(\$1,219.00)	\$47,425.01 \$	
Dec-19	\$600,758.78	\$124,199.34	0.9983		163		\$63,536.19	\$0.00	\$136,228.07 \$	
Jan-20		\$36,954.90	0.9981		61			\$0.00	\$39,876.55 \$	
Feb-20		\$63,296.96	0.9980		70			\$0.00	\$66,080.53 \$	
Mar-20		\$11,729.06	0.9975		64			\$0.00	\$13,069.57 \$	
Apr-20		\$59,980.96	0.9959	· · · · · · · · · · · · · · · · · · ·	63			\$0.00	\$64,164.59 \$	
May-20		\$15,213.14	0.9793		56			\$0.00	\$18,713.78 \$	
Jun-20		\$26,180.66	0.9940		56			\$0.00	\$27,895.10 \$	
Jul-20		\$43,342.24	0.9915		99			\$0.00	\$47,413.12 \$	
Aug-20		\$21,120.80	0.9902		99			\$0.00	\$26,181.92 \$	
Sep-20		\$63,559.73	0.9860	· · · · · · · · · · · · · · · · · · ·	100			\$0.00	\$70,498.36 \$	
Oct-20		\$128,538.94	0.9711		103			\$0.00	\$137,499.48 \$	
Nov-20		\$51,949.75	0.9637		102			\$0.00	\$58,219.62 \$	
Dec-20	\$716,916.31	\$95,602.23	0.9366	\$ 102,075.11	101	\$ 1,010.64	\$44,714.16	\$0.00	\$107,262.43 \$	1,062

\* Express Completion Factor as a percentage \*\*Express Prescription Drug Rebates as a negative number Carrier Name: Capital Advantage Insurance Company
Product(s): PPO
Market Segment: Small Group

## Table 2b. Manual Experience Period Claims and Premiums

1/1/2022

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
\$243,160,961.24	\$197,494,698.53	\$200,146,137.31	369,829	\$31,378,916.18	\$231,525,053.49		(\$9,413,365.99)	\$11,022.05	\$0.00	\$9,277,790.00	
<b>Experience Period Total Allowed EH</b>	xperience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)									\$ 600.61	
Loss Ratio											75.56%

\*Express Prescription Drug Rebates as a negative number

#### Table 3b. Manual Trend Components

**Rate Effective Date:** 

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	5.30%	0.00%	0.00%	5.30%	17.82%
Outpatient Hospital	5.45%	0.00%	0.00%	5.45%	36.37%
Professional	4.15%	0.00%	0.00%	4.15%	21.93%
Other Medical	5.45%	0.00%	0.00%	5.45%	2.63%
Capitation				3.00%	0.00%
Prescription Drugs	10.25%	1.40%	0.00%	11.79%	21.24%
Total Annual Trend				6.52%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.135	

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

### Table 4b. Historical Manual Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-17	_	\$29,394,451.86	1.0000 \$	29,394,451.86	76,234	\$ 385.58		(\$1,042,619.00)	\$36,063,894.37 \$	
Feb-17	_	\$29,617,677.13	1.0000 \$	29,617,677.13	77,116	\$ 384.07		(\$1,036,136.98)	\$35,407,797.37 \$	
Mar-17		\$35,077,319.14	1.0000 \$	35,077,319.14	77,690	\$ 451.50		(\$1,206,567.01)	\$41,158,167.52 \$	
Apr-17	_	\$31,389,464.71	1.0000 \$	31,389,464.71	77,964	\$ 402.61		(\$1,136,522.02)	\$36,520,773.41 \$	
May-17	_	\$36,055,718.56	1.0000 \$	36,055,718.56	78,157	•		(\$1,303,258.02)	\$41,369,607.05 \$	
Jun-17	_	\$32,936,338.47	1.0000 \$	32,936,338.47	78,149	•		(\$1,357,783.98)	\$38,062,141.50 \$	
Jul-17	_	\$33,159,991.47	1.0000 \$	33,159,991.47	78,209			(\$2,662.99)	\$38,765,815.75 \$	
Aug-17	_	\$37,416,076.25	1.0000 \$	37,416,076.25	78,295	\$ 477.89		(\$5,435.99)	\$43,717,236.25 \$	
Sep-17	_	\$33,270,810.40	1.0000 \$	33,270,810.40	78,589	•		(\$3,905,862.03)	\$35,119,945.36 \$	
Oct-17	_	\$36,504,119.59	1.0000 \$	36,504,119.59	77,999	•		(\$1,838.00)	\$42,851,880.49 \$	
Nov-17	_	\$37,607,028.84	1.0000 \$	37,607,028.84	77,269	•		\$1,136.03	\$43,369,662.90 \$	
Dec-17	\$469,012,898.02	\$32,217,656.66	1.0000 \$	32,217,656.66	74,213		\$77,425,908.91	(\$4,568,734.01)	\$34,099,356.02 \$	
Jan-18		\$33,363,729.87	1.0000 \$	33,363,729.87	72,082	•		(\$1,412,646.00)	\$39,610,201.46 \$	
Feb-18		\$31,675,615.65	1.0000 \$	31,675,615.65	71,504	•		(\$1,484,666.99)	\$36,647,604.83 \$	
Mar-18		\$34,169,282.32	1.0000 \$	34,169,282.32	70,481	•		(\$1,621,018.99)	\$39,177,010.50 \$	
Apr-18		\$32,778,664.80	1.0000 \$	32,778,664.80	69,694	•		(\$1,543,441.01)	\$37,366,752.06 \$	
May-18		\$33,779,606.85	1.0000 \$	33,779,606.85	68,551	•		(\$1,509,634.99)	\$38,334,058.77 \$	
Jun-18		\$31,499,808.06	1.0000 \$	31,499,808.06	67,483	•		(\$1,465,828.01)	\$35,367,884.19 \$	
Jul-18		\$31,759,705.39	1.0000 \$	31,759,705.39	65,758			(\$1,447,689.01)	\$35,455,249.63 \$	
Aug-18		\$33,118,106.86	1.0000 \$	33,118,106.86	64,686	•		(\$1,500,198.99)	\$36,927,534.14 \$	
Sep-18		\$28,336,710.90	1.0000 \$	28,336,710.90	63,198	•		(\$1,331,953.00)	\$31,660,816.36 \$	
Oct-18		\$32,661,154.42	1.0000 \$	32,661,836.29	60,890			(\$1,431,116.98)	\$36,409,710.61 \$	
Nov-18		\$29,081,368.23	0.9999 \$	29,083,358.31	59,406	•		(\$1,341,739.00)	\$32,148,614.98 \$	
Dec-18	\$440,902,829.00	\$23,995,851.09	0.9894 \$	24,253,237.87	48,412	\$ 500.98	\$67,284,579.76	(\$1,059,976.00)	\$27,508,896.43 \$	
Jan-19		\$24,331,016.31	0.9906 \$	24,560,974.93	45,073	\$ 544.92		(\$1,170,391.00)	\$28,562,626.07 \$	
Feb-19		\$22,659,237.63	0.9999 \$	22,662,563.90	44,461	•		(\$1,174,879.99)	\$25,722,047.28 \$	
Mar-19		\$23,117,842.94	0.9821 \$	23,539,012.41	43,741	\$ 538.15		(\$1,226,678.04)	\$26,723,258.51 \$	
Apr-19		\$22,001,983.01	0.9998 \$	22,007,347.06	43,130	\$ 510.26		(\$1,352,166.98)	\$24,821,832.14 \$	
May-19		\$23,211,712.27	0.9997 \$	23,217,649.98	42,847	\$ 541.87		(\$1,400,579.01)	\$25,664,245.05 \$	
Jun-19		\$19,874,453.98	0.9997 \$	19,879,685.06	42,350			(\$1,302,287.98)	\$22,034,622.28 \$	
Jul-19	_	\$24,294,430.34	0.9997 \$		41,965			(\$1,209,295.00)	\$26,816,115.95 \$	
Aug-19		\$22,516,828.21	0.9996 \$	22,525,382.03	41,467	•		(\$1,163,669.96)	\$24,846,072.57 \$	
Sep-19		\$20,954,752.52	0.9995 \$	20,964,827.40	41,020	\$ 511.09		(\$1,157,317.01)	\$23,040,799.88 \$	
Oct-19	_	\$23,570,764.29	0.9994 \$	23,584,899.52	40,723	•		(\$1,203,542.97)	\$26,066,373.44 \$	
Nov-19		\$20,613,805.19	0.9955 \$	20,707,894.29	40,359	•		(\$1,171,671.02)	\$22,680,100.29 \$	
Dec-19	\$315,455,338.05	\$20,946,589.90	0.9985 \$	20,977,187.92	39,582		\$46,463,527.81	(\$1,180,974.99)	\$23,701,806.99 \$	
Jan-20	_	\$18,193,470.88	0.9984 \$	18,223,157.36	35,008	\$ 520.54		(\$669,011.99)	\$21,383,224.62 \$	
Feb-20	_	\$19,560,414.54	0.9984 \$	19,592,349.38	34,110	\$ 574.39		(\$794,049.02)	\$22,268,508.30 \$	
Mar-20		\$16,448,700.56	0.9975 \$	16,489,122.17	33,404			(\$865,432.03)	\$18,307,470.49 \$	
Apr-20		\$12,778,726.16	0.9973 \$		32,391			(\$784,782.98)	<b>\$13,565,564.51 \$</b>	
May-20		\$14,026,649.35	0.9834 \$		31,478			(\$694,750.02)	\$15,678,638.79 \$	
Jun-20		\$16,441,376.06	0.9952 \$	16,521,152.84	30,745	•		(\$712,155.97)	\$18,280,294.48 \$	
Jul-20		\$18,485,548.57	0.9931 \$	18,613,614.66	30,167	•		(\$853,652.98)	\$20,402,176.48 \$	
Aug-20		\$17,362,355.11	0.9907	17,525,484.73	29,896			(\$845,051.99)	\$19,318,799.59 \$	
Sep-20		\$16,544,312.57	0.9882 \$	16,741,449.31	29,340	\$ 570.60		(\$788,706.00)	\$18,428,600.29 \$	
Oct-20		\$15,987,434.80	0.9777 \$	16,352,318.80	28,656	\$ 570.64		(\$793,175.01)	\$18,018,385.80 \$	
Nov-20		\$16,077,321.45	0.9697 \$	16,580,225.90	28,088	\$ 590.30		(\$800,196.01)	\$18,096,536.89 \$	
Dec-20	\$243,160,961.24	\$15,588,388.48	0.9481 \$		26,546		\$31,378,916.18	(\$812,401.99)	\$18,374,509.31 \$	

\* Express Completion Factor as a percentage \*\*Express Prescription Drug Rebates as a negative number

## PA Rate Template Part II

Rate Development and Change

Carrier Name:

Product(s):

Market Segment:

Rate Effective Date:

Capital Advantage Insurance Company
PPO
Small Group
1/1/2022

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

Development of the Projected Index Rate	Ac	tual Experience Data	ľ	Manual Data	
Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates) PMPM	\$	694.94	\$	600.61	<- Actual Experience PMPM should
Two year trend projection Factor		1.135		1.135	
Jnadjusted Projected Allowed EHB Claims PMPM	\$	788.55	\$	681.51	
Single Risk Pool Adjustment Factors					
Change in Morbidity - Impact of Reinsurance Program		1.000		1.000	
Change in Morbidity - All Other		1.170		1.170	<- See URRT Instructions
Total Non-Morbidity Changes		1.000		1.000	
Change in Demographics		1.000		1.000	<- See URRT Instructions
Change in Network		1.000		1.000	
Change in Benefits		1.000		1.000	<- See URRT Instructions
Change in Other		1.000		1.000	<- See URRT Instructions
Total Adjusted Projected Allowed EHB Claims PMPM	\$	922.32	\$	797.12	
Credibility Factors	,	0%		100%	<- See Instructions
Blended Projected EHB Claims PMPM			Ś	797.12	<- Projected Index Rate
Development of the Market-Adjusted Index Rate and Total Allowed Claims			<u> </u>		
Adjusted Projected Allowed EHB Claims PMPM	\$	797.12	<- Inc	dex Rate for Proje	ection Period on URRT
Projected Paid to Allowed Ratio		0.890			
Projected Incurred EHB Claims PMPM	\$	709.32			
Market-wide Adjustments					
Projected Incurred Risk Adjustment PMPM		\$77.08			
Projected Incurred Exchange User Fees PMPM Projected Incurred Reinsurance Recoveries PMPM		\$0.00 \$0.00			
Market-Adjusted Projected Incurred EHB Claims PMPM	\$	632.24			
Market-Adjusted Projected Allowed EHB Claims PMPM	\$	710.50	<- Ma	arket-Adjusted In	dex Rate
Projected Allowed Non-EHB Claims PMPM		\$0.00			

## Table 6. Retention

Retention Items - Express in percentages	Percentages	PMPM Amounts
Administrative Expenses	9.7	4% \$71.92
General and Claims	6.6	<mark>5%</mark> \$49.18
Agent/Broker Fees and Commissions	2.6	<mark>3%</mark> \$19.79
Quality Improvement Initiatives	0.4	<mark>0%</mark> \$2.95
Taxes and Fees	2.5	9% \$19.13
Risk Adjustment User Fee	0.0	<mark>3%</mark> \$0.25
PCORI Fee	0.0	<mark>3%</mark> \$0.20
PA Premium & Other Taxes (if applicable)	2.0	<mark>0%</mark> \$14.76
Federal Income Tax	0.5	<mark>3%</mark> \$3.92
Health Insurance Providers Fee (Prorated for Small Groups only)	0.0	<mark>)%</mark> \$0.00
Profit/Contingency (after tax)	2.0	)% \$14.76
Total Retention	14.3	\$105.81
Projected Required Revenue PMPM	\$ 738.0	06

#### **Table 8. Components of Rate Change**

Market-Adjusted Projected Allowed Total Claims PMPM

		2021		2022	Dif	fference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$	436.45	\$	460.46	\$	24.01	5.5%
B. Base period allowed claims before normalization	\$	597.30		600.61	•	3.31	0.8%
C. Normalization factor component of change	\$	(225.93)	\$	(225.90)	\$	0.04	0.0%
D. Change in Normalized Allowed Claims Adjustment Components	_	2-1.4-			_		2.00/
D1. Base period allowed claims after normalization	Ş	371.37	Ş	374.71	\$	3.35	0.8%
D2. URRT Trend	\$ \$	50.88	<b>\$</b>	50.47	\$ ¢	(0.40)	
D3. URRT Morbidity	\	6.76	\$ \$	72.13	\$ ¢	65.37	15.0%
D4. URRT Other	\$ \$	(3.86)	-	- /5 4 0 4 \	<u>ې</u>	3.86	0.9%
D5. Normalized URRT Risk Adjustment on an allowed basis	\$ \$	(0.13)	<b>\$</b>	(54.04)	\$	(53.91)	
D6. Normalized Exchange User Fee on an allowed basis	\$ \$	-	<b>\$</b>	-	\$ \$	-	0.0%
D7. Normalized Reinsurance Recoveries on an allowed basis	\$ \$	-	<u>\$</u>	-	\$	40.26	0.0%
D8. Subtotal - Sum(D1:D7)	\$	425.01	\$	443.27	\$	18.26	4.2%
E. Change in Allowable Plan Adjusted Level Components							0.00/
E1. Network	\$	- (=0.==)	\$	- (40.00)	\$	-	0.0%
E2. Pricing AV	\$	(53.55)	\$	(48.83)	\$	4.73	1.1%
E3. Benefit Richness	\$	-	\$	0.00	\$	0.00	0.0%
E4. Catastrophic Eligibility	\$	- (=0.==)	\$	- (40.00)	\$	-	0.0%
E5. Subtotal - Sum(E1:E4)	\$	(53.55)	\$	(48.83)	\$	4.73	1.1%
F. Change in Retention Components						<b>(</b> )	
F1. Administrative Expenses	\$	45.17	\$	44.87	\$	(0.30)	
F2. Taxes and Fees	\$	10.82	\$	11.94	\$	1.11	0.3%
F3. Profit and/or Contingency	Ş	8.73	Ş	9.21	\$	0.48	0.1%
F4. Subtotal - Sum(F1:F3)	\$	64.73	\$	66.02	\$	1.29	0.3%
G. Change in Miscellaneous Items		\$0.00			\$	-	0.0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$	436.18	\$	460.46	\$	24.28	5.6%

## For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 600.61	<- Index Rate of Experience Period on UR
Blended Earned Premium	\$ 243,160,961.24	
Blended Loss Ratio	75.56%	

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

Effective Date	1/1/2022	4/1/2022	7/1/2022	10/1/2022	Total Si	ngle Risk Pool
# of Member Months Renewing in Quarter	510	165	214	620		1,509
Adjusted Projected Allowed EHB Claims PMPM	\$ 797.12	\$ 797.12	\$ 797.12	\$ 797.12	\$	797.12
Months of Trend	-	3	6	9		
Annual Trend	6.52%	6.52%	6.52%	6.52%		
Single Risk Pool Projected Allowed Claims	\$ 797.12	\$ 809.81	\$ 822.71	\$ 835.81	\$	818.03
Quarterly Trend Factor	1.000	1.016	1.032	1.049		1.026

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

Normalization Factors	20	21		2022
Average Age Factor		1.554		1.560
Average Geographic Factor		1.035		1.028
Average Tobacco Factor		1.000		1.000
Average Benefit Richness (induced demand)		1.000		1.000
Average Network Factor		1.000		1.000
Market-Adjusted Projected Allowed Total Claims PMPM		\$683.75	\$	710.50
Market Adjusted Projected Anowed Potal Claims Pivil W		φουσί, σ	Y	, 10.30
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$	425.11	\$	443.27

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

	2021	2022
Paid-to-Allowed	0.874	0.890
	4.40	1.105
URRT Trend (Total Applied Trend Factor)	1.137	
URRT Morbidity	1.016	
URRT "Other"	0.991	1.000
Risk Adjustment	\$ (0.18)	\$ (77.08)
Exchange User Fee	\$ (0.18)	\$ (77.08)
Reinsurance Recoveries	\$ -	\$ -
Capitation	\$ 0.30	\$0.30
Network	1.000	1.000
Pricing AV	0.874	0.890
Benefit Richness	1.000	1.000
Catastrophic Eligibility	1.000	1.000
Administrative Expenses	10.35%	
Taxes and Fees	2.48%	
Profit and/or Contingency	2.00%	2.00%

PA Rate Template Part III Table 10. Plan Rates Total Covered Lives @ 02-01-2021 Age Calibration Factor Geographic Calibration Factor Carrier Name: Product(s): Capital Advantage Insurance Company Tobacco Calibration Factor
Aggregate Calibration Factor Market Segment: Small Group 1/1/2022 Rate Effective Date: **Base Period Start Date** 1/1/2020 Date of Most Recent Membership: 2/1/2021 45 CFR Part 156.8 (d) (2) Allowable Factors Market Adjusted Index Rate: 02-01-2021 Number of Covered Lives by Rating Area Existing, Modified,
New, Discontinued Total & Mapped, 1/1/2022 HIOS Plan ID **Covered Lives** 2021 Calibrated Plan Adjusted | Calibrated Plan HIOS Plan ID Mapped into including Prior 12 Index Rate Adjusted Index 2022 Plans @ 02- Total Projected PMPM Rate PMPM - - - - 64 47 - 21 **132 Totals - Current Membership Total - Projected Membership** Transitional Plans TRANSITIONAL N/A TRANSITIONAL 5.5% 100.0% Gold PPO 0/0/20 Rx 500 460.46 82795PA0130001 PPO \$436.45 \$ 0.0% | Section | - | | Section | - 0.0%

## PA Rate Template Part IV B - Small Group Annual Table 11. Plan Premium Development for 21-Year-Old Non-Tobacco User

Carrier Name:

Product(s):

Market Segment:

Rate Effective Date:

Capital Advantage Insurant
PPO
Small Group
1/1/2022

	Quarter 1 2021, 21-year-old Non-Tobacco Premium PMPM	Quarter 1 2022, 21-year-old Non-Tobacco Premium PMPM	Change in Quarter 1, 21-year-old Non-Tobacco Premium PMPM	Quarter 2 2022, 21-year-old Non-Tobacco Premium PMPM	Quarter 3 2022, 21-year-old Non-Tobacco Premium PMPM	Quarter 4 2022, 21-year-old Non-Tobacco Premium PMPM
Discontinued, New, Modified, Existing 1/1/2022 HIOS Plan ID (If Exchange (D,N,M,E) for Plan Number Component) Marketing Name 2022 Discontinued & Mapped) Metallic Tier Off	Average (weighted by enrollment by rating area)	Average (weighted by enrollment by rating 1 2 3 4 5 6 7 8 9 area)	Average (weighted by enrollment by rating 1 2 3 4 5 6 7 8 9 area)	Average (weighted by enrollment by rating 1 2 3 4 5 6 7 8 9 area)	Average (weighted by enrollment by rating 1 2 3 4 5 6 7 8 9 area)	Average (weighted by enrollment by rating 1 2 3 4 5 6 7 8 9 area)
Totals  These cells auto-fill using the data entered in Table 10.	\$ - \$ - \$ - \$ - \$ - \$ 436.45 \$ 471.37 \$ - \$ 445.18 \$ 450.27	\$ - \$ - \$ - \$ - \$ - \$ 460.46 \$ 497.30 \$ - \$ 469.67 \$ 475.05	0.0% 0.0% 0.0% 0.0% 5.5% 5.5% 0.0% 5.5% 5.5	\$ - \$ - \$ - \$ - \$ - \$ 467.80 \$ 505.22 \$ - \$ 477.15 \$ 482.61	\$ - \$ - \$ - \$ - \$ - \$ 475.24 \$ 513.26 \$ - \$ 484.75 \$ 490.29	\$ - \$ - \$ - \$ - \$ - \$ 482.81 \$ 521.43 \$ - \$ 492.47 \$ 498.10
Plan 1	\$436.45	S         -         S         -         S         -         S         460.46         S         497.30         S         -         S         475.05           S         -         S	5.5% 5.5% 5.5% 5.5%	S         -         S         -         S         -         S         -         S         467.80         S         505.22         S         -         S         482.61           S         -         S	\$ - \$ 0.00         \$ 0	S         -         S         -         S         -         S         -         S         482.81         S         521.43         S         -         S         498.40         S         992.47         S         498.10         S         - </th
Plan 37         0         0         0         0         0         0           Plan 38         0         0         0         0         0         0           Plan 39         0         0         0         0         0         0           Plan 40         0         0         0         0         0         0           Plan 41         0         0         0         0         0         0           Plan 42         0         0         0         0         0         0           Plan 43         0         0         0         0         0         0           Plan 44         0         0         0         0         0         0           Plan 45         0         0         0         0         0         0           Plan 46         0         0         0         0         0         0           Plan 47         0         0         0         0         0         0           Plan 48         0         0         0         0         0         0	\$0.00 \$0.00 \$0.00 \$ - \$0.0	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -
Plan 48         0         0         0         0         0         0           Plan 49         0         0         0         0         0         0           Plan 50         0         0         0         0         0         0	\$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -

## PA Rate Quarterly Template Part V Consumer Factors

Table 12. Age and Tobacco Factors

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

<sup>\*</sup>PA follows the federal default age curve.

Carrier Name: Capital Advantage Insurance Company

Product(s):

Market Segment:

Rate Effective Date:

PPO

Small Group

1/1/2022

**Table 13. Geographic Factors** 

Geographic Area Factors									
Area	Counties	Current Factor	Proposed Factor						
Rating Area 1									
Rating Area 2									
Rating Area 3									
Rating Area 4									
Rating Area 5									
Rating Area 6	Centre, Columbia, Lehigh, Mifflin, Montour, Northampton, Northumberland, Schutlkill, Snyder, Union	1.000	1.000						
Rating Area 7	Adams, Berks, Lancaster, York	1.080	1.080						
Rating Area 8									
Rating Area 9	Cumberland, Dauphin, Franklin, Fulton, Juniata, Lebanon, Perry	1.020	1.020						

**Table 14. Network Factors** 

Projection Period Network Factors									
Network Name	Rating Area	Area Current Proposed Factor Factor		DOH Approval Date					
PPO	All	1.000	1.000						

# Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022 Table B

			<u>Projected</u>	Projected Allowed	Projected Paid	Paid to Allowed	Average Tobacco	AV and Cost	(8)/(6*7) Induced	Induced Demand
<u>Plan ID</u>	<u>Plan Name</u>	Metal Level	<u>Membership</u>	<u>Claims</u>	<u>Claims</u>	<u>Factor</u>	<u>Factor</u>	<b>Sharing Factor</b>	<u>Utilization</u>	<u>Table 10</u>
(1)		(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
82795PA0130001	Gold PPO 0/0/20 Rx 500	Gold	1,509	\$1,072,151	\$954,055	0.89	1.000	0.89	1.00	1.00
Total			1,509	1,072,151	954,055	0.89	1.00	0.89	1.00	1.00
PMPM				710.50	632.24					
Rate Dev II				710.50	632.24					

7

7/12/2021

Company Name: Company (CAIC)

Market: Small Group

Product: PPO

Effective Date of Rates: January 1, 2022

Ending date of Rates:

March 31, 2022

HIOS Plan ID (Off Exchange)=>	_	82795PA0130001 Gold PPO 0/0/20 Rx 500		0130001	82795PA0130001 Gold PPO 0/0/20 Rx 500		
Plan Marketing Name =>			Gold PPO 0/				
Form # =>	C22-CA		C22-CAIC-SGP 7		C22-CAIC-SGP 9 PPO		
Rating Area =>	PF						
Network => Metal =>	_	old	PPO Gold		Gold		
Deductible =>	\$0 /\$500		\$0 /\$500 Med/Rx		\$0 /\$500 Med/Rx		
Coinsurance =>	3073300		3073300		3073300		
Copays =>		PCP/SPC/ER	\$20/\$40/\$300		\$20/\$40/\$300 PCP/SPC/ER		
OOP Maximum =>	\$8550 Med/		\$8550 Med/F		\$8550 Med/Rx Combined		
Pediatric Dental (Yes/No) =>	Y	es	Ye	es	Yes		
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	
0 - 14	\$352.26	\$352.26	\$380.44	\$380.44	\$359.30	\$359.3	
15	\$383.57	\$383.57	\$414.26	\$414.26	\$391.24	\$391.2	
16	\$395.54	\$395.54	\$427.19	\$427.19	\$403.45	\$403.4	
17	\$407.52	\$407.52	\$440.12	\$440.12	\$415.67	\$415.6	
18	\$420.41	\$420.41	\$454.04	\$454.04	\$428.82	\$428.8	
19	\$433.30	\$433.30	\$467.97	\$467.97	\$441.97	\$441.9	
20	\$446.66	\$446.66	\$482.39	\$482.39	\$455.59	\$455.	
21	\$460.47	\$460.47	\$497.31	\$497.31	\$469.68	\$469.6	
22	\$460.47	\$460.47	\$497.31	\$497.31	\$469.68	\$469.6	
23	\$460.47	\$460.47	\$497.31	\$497.31	\$469.68	\$469.0	
24	\$460.47	\$460.47	\$497.31	\$497.31	\$469.68	\$469.	
25	\$462.31	\$462.31	\$499.30	\$499.30	\$471.56	\$471.	
26	\$471.52	\$471.52	\$509.24	\$509.24	\$480.95	\$480.	
27	\$482.57	\$482.57	\$521.18	\$521.18	\$492.22	\$492.	
28	\$500.53	\$500.53	\$540.57	\$540.57	\$510.54	\$510.	
29	\$515.27	\$515.27	\$556.49	\$556.49	\$525.57	\$525.	
30	\$522.63	\$522.63	\$564.44	\$564.44	\$533.09	\$533.	
31	\$533.68	\$533.68	\$576.38	\$576.38	\$544.36	\$544.	
32	\$544.74	\$544.74	\$588.31	\$588.31	\$555.63	\$555.	
33	\$551.64	\$551.64	\$595.77	\$595.77	\$562.68	\$562.	
34 35	\$559.01	\$559.01	\$603.73 \$607.71	\$603.73 \$607.71	\$570.19 \$573.95	\$570. \$573.	
36	\$562.69	\$562.69 \$566.38	l ' I	\$611.69	1 1	\$573.	
37	\$566.38 \$570.06	\$570.06	\$611.69 \$615.67	\$615.67	\$577.71 \$581.46	\$577. \$581.	
38	\$573.75	\$573.75	\$619.65	\$619.65	\$585.22	\$585.	
39	\$581.11	\$581.11	\$627.60	\$627.60	\$592.74	\$592.	
40	\$588.48	\$588.48	\$635.56	\$635.56	\$600.25	\$600.	
41	\$599.53	\$599.53	\$647.49	\$647.49	\$611.52	\$611.	
42	\$610.12	\$610.12	\$658.93	\$658.93	\$622.33	\$622.	
43	\$624.86	\$624.86	\$674.85	\$674.85	\$637.35	\$637.	
44	\$643.28	\$643.28	\$694.74	\$694.74	\$656.14	\$656.	
45	\$664.92	\$664.92	\$718.11	\$718.11	\$678.22	\$678.	
46	\$690.70	\$690.70	\$745.96	\$745.96	\$704.52	\$704.	
47	\$719.71	\$719.71	\$777.29	\$777.29	\$734.11	\$734.	
48	\$752.87	\$752.87	\$813.10	\$813.10	\$767.93	\$767.	
49	\$785.56	\$785.56	\$848.41	\$848.41	\$801.27	\$801.	
50	\$822.40	\$822.40	\$888.19	\$888.19	\$838.85	\$838.	
51	\$858.78	\$858.78	\$927.48	\$927.48	\$875.95	\$875.	
52	\$898.84	\$898.84	\$970.74	\$970.74	\$916.81	\$916.	
53	\$939.36	\$939.36	\$1,014.51	\$1,014.51	\$958.15	\$958.	
54	\$983.10	\$983.10	\$1,061.75	\$1,061.75	\$1,002.77	\$1,002.	
55	\$1,026.85	\$1,026.85	\$1,109.00	\$1,109.00	\$1,047.39	\$1,047.	
56	\$1,074.28	\$1,074.28	\$1,160.22	\$1,160.22	\$1,095.76	\$1,095.	
57	\$1,122.17	\$1,122.17	\$1,211.94	\$1,211.94	\$1,144.61	\$1,144.	
58	\$1,173.28	\$1,173.28	\$1,267.14	\$1,267.14	\$1,196.74	\$1,196.	
59	\$1,198.60	\$1,198.60	\$1,294.49	\$1,294.49	\$1,222.58	\$1,222.	
60	\$1,249.72	\$1,249.72	\$1,349.69	\$1,349.69	\$1,274.71	\$1,274.	
61	\$1,293.92	\$1,293.92	\$1,397.43	\$1,397.43	\$1,319.80	\$1,319.	
62	\$1,322.93	\$1,322.93	\$1,428.76	\$1,428.76	\$1,349.39	\$1,349.	
63	\$1,359.31	\$1,359.31	\$1,468.05	\$1,468.05	\$1,386.49	\$1,386.	
64+	\$1,381.40	\$1,381.40	\$1,491.92	\$1,491.92	\$1,409.03	\$1,409.0	

Page Number: 1 12/24/2014

Company Name: Company (CAIC)

Market: Small Group

Product: PPO

Effective Date of Rates: April 1, 2022

Ending date of Rates:

June 30, 2022

HIOS Plan ID (On Exchange)=>							
HIOS Plan ID (Off Exchange)=>	82795PA0130001		82795PA		82795PA0130001		
Plan Marketing Name =>	Gold PPO 0/0/20 Rx 500			0/20 Rx 500	Gold PPO 0/0/20 Rx 500		
Form # =>		C22-CAIC-SGP 6		IC-SGP	C22-CAIC-SGP		
Rating Area =>		ь РО	7 PPO		9 PPO		
Network => Metal =>		old		old	Gold PPO		
Deductible =>		) Med/Rx	\$0 /\$500		\$0 /\$500 Med/Rx		
Coinsurance =>		%	3073300 0		0%		
Copays =>		0 PCP/SPC/ER		D PCP/SPC/ER	\$20/\$40/\$300 PCP/SPC/ER		
OOP Maximum =>		Rx Combined	\$8550 Med/I		\$8550 Med/Rx Combined		
Pediatric Dental (Yes/No) =>		es		es	Ye		
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	
0 - 14	\$357.87	\$357.87	\$386.50	\$386.50	\$365.02	\$365.02	
15	\$389.68	\$389.68	\$420.85	\$420.85	\$397.47	\$397.47	
16	\$401.84	\$401.84	\$433.99	\$433.99	\$409.88	\$409.88	
17	\$414.00	\$414.00	\$447.12	\$447.12	\$422.28	\$422.28	
18	\$427.10	\$427.10	\$461.27	\$461.27	\$435.64	\$435.64	
19	\$440.20	\$440.20	\$475.42	\$475.42	\$449.00	\$449.00	
20	\$453.77	\$453.77	\$490.07	\$490.07	\$462.84	\$462.84	
21	\$467.80	\$467.80	\$505.22	\$505.22	\$477.16	\$477.16	
22	\$467.80	\$467.80	\$505.22	\$505.22	\$477.16	\$477.16	
23	\$467.80	\$467.80	\$505.22	\$505.22	\$477.16	\$477.16	
24	\$467.80	\$467.80	\$505.22	\$505.22	\$477.16	\$477.16	
25	\$469.67	\$469.67	\$507.24	\$507.24	\$479.06	\$479.06	
26 27	\$479.03	\$479.03 \$490.25	\$517.35 \$529.47	\$517.35	\$488.61	\$488.61	
28	\$490.25 \$508.50	\$508.50	\$529.47	\$529.47 \$549.18	\$500.06 \$518.67	\$500.06 \$518.67	
29	\$523.47	\$523.47	\$565.35	\$565.35	\$533.94	\$533.9	
30	\$530.95	\$530.95	\$573.43	\$573.43	\$533.54	\$541.5	
31	\$542.18	\$542.18	\$585.55	\$585.55	\$553.02	\$553.02	
32	\$553.41	\$553.41	\$597.68	\$597.68	\$564.48	\$564.48	
33	\$560.42	\$560.42	\$605.26	\$605.26	\$571.63	\$571.63	
34	\$567.91	\$567.91	\$613.34	\$613.34	\$579.27	\$579.27	
35	\$571.65	\$571.65	\$617.38	\$617.38	\$583.08	\$583.08	
36	\$575.39	\$575.39	\$621.43	\$621.43	\$586.90	\$586.90	
37	\$579.14	\$579.14	\$625.47	\$625.47	\$590.72	\$590.72	
38	\$582.88	\$582.88	\$629.51	\$629.51	\$594.54	\$594.5	
39	\$590.36	\$590.36	\$637.59	\$637.59	\$602.17	\$602.1	
40	\$597.85	\$597.85	\$645.68	\$645.68	\$609.81	\$609.8	
41	\$609.08	\$609.08	\$657.80	\$657.80	\$621.26	\$621.20	
42	\$619.83	\$619.83	\$669.42	\$669.42	\$632.23	\$632.2	
43	\$634.80	\$634.80	\$685.59	\$685.59	\$647.50	\$647.50	
44	\$653.52	\$653.52	\$705.80	\$705.80	\$666.59	\$666.59	
45	\$675.50	\$675.50	\$729.54	\$729.54	\$689.01	\$689.0	
46	\$701.70	\$701.70	\$757.84	\$757.84	\$715.73	\$715.7	
47	\$731.17	\$731.17	\$789.67	\$789.67	\$745.79	\$745.7	
48	\$764.85	\$764.85	\$826.04	\$826.04	\$780.15	\$780.1	
49 50	\$798.07 \$835.49	\$798.07 \$835.49	\$861.91 \$902.33	\$861.91 \$902.33	\$814.03 \$852.20	\$814.03 \$852.20	
50 51	\$835.49	\$835.49	\$902.33	\$902.33	\$852.20	\$852.20	
52	\$913.15	\$913.15	\$986.20	\$986.20	\$931.41	\$931.4	
53	\$954.31	\$954.31	\$1,030.66	\$1,030.66	\$973.40	\$973.4	
54	\$998.75	\$998.75	\$1,078.65	\$1,078.65	\$1,018.73	\$1,018.7	
55	\$1,043.19	\$1,043.19	\$1,126.65	\$1,126.65	\$1,064.06	\$1,064.0	
56	\$1,091.38	\$1,091.38	\$1,178.69	\$1,178.69	\$1,113.20	\$1,113.2	
57	\$1,140.03	\$1,140.03	\$1,231.23	\$1,231.23	\$1,162.83	\$1,162.8	
58	\$1,191.95	\$1,191.95	\$1,287.31	\$1,287.31	\$1,215.79	\$1,215.7	
59	\$1,217.68	\$1,217.68	\$1,315.10	\$1,315.10	\$1,242.04	\$1,242.0	
60	\$1,269.61	\$1,269.61	\$1,371.18	\$1,371.18	\$1,295.00	\$1,295.0	
61	\$1,314.52	\$1,314.52	\$1,419.68	\$1,419.68	\$1,340.81	\$1,340.8	
62	\$1,343.99	\$1,343.99	\$1,451.51	\$1,451.51	\$1,370.87	\$1,370.87	
63	\$1,380.95	\$1,380.95	\$1,491.42	\$1,491.42	\$1,408.56	\$1,408.56	
64+	\$1,403.39	\$1,403.39	\$1,515.66	\$1,515.66	\$1,431.47	\$1,431.47	

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Company Name: Capital Advantage Insurance
Company (CAIC)

Market: Small Group
Product: PPO

Effective Date of Rates: July 1, 2022

Ending date of Rates:

September 30, 2022

HIOS Plan ID (On Exchange)=>							
HIOS Plan ID (Off Exchange)=>		A0130001	82795PA		82795PA0130001		
Plan Marketing Name =>	Gold PPO 0/0/20 Rx 500 C22-CAIC-SGP			0/20 Rx 500	Gold PPO 0/0/20 Rx 500		
Form # =>			SGP C22-CAIC-S		C22-CAIC-SGP		
Rating Area =>		6 PO	PPO		9 PPO		
Network => Metal =>		old		old	PPO Gold		
Deductible =>		) Med/Rx	\$0 /\$500		\$0 /\$500 Med/Rx		
Coinsurance =>		%	3073300 0		0%		
Copays =>		0 PCP/SPC/ER		D PCP/SPC/ER	\$20/\$40/\$300 PCP/SPC/ER		
OOP Maximum =>		Rx Combined	\$8550 Med/I		\$8550 Med/Rx Combined		
Pediatric Dental (Yes/No) =>		es		es	Yes		
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	
0 - 14	\$363.57	\$363.57	\$392.65	\$392.65	\$370.84	\$370.84	
15	\$395.88	\$395.88	\$427.55	\$427.55	\$403.80	\$403.80	
16	\$408.24	\$408.24	\$440.90	\$440.90	\$416.40	\$416.40	
17	\$420.60	\$420.60	\$454.24	\$454.24	\$429.01	\$429.01	
18	\$433.90	\$433.90	\$468.62	\$468.62	\$442.58	\$442.58	
19	\$447.21	\$447.21	\$482.99	\$482.99	\$456.15	\$456.15	
20	\$460.99	\$460.99	\$497.87	\$497.87	\$470.21	\$470.21	
21	\$475.25	\$475.25	\$513.27	\$513.27	\$484.76	\$484.76	
22	\$475.25	\$475.25	\$513.27	\$513.27	\$484.76	\$484.76	
23	\$475.25	\$475.25	\$513.27	\$513.27	\$484.76	\$484.76	
24	\$475.25	\$475.25	\$513.27	\$513.27	\$484.76	\$484.76	
25	\$477.15	\$477.15	\$515.32	\$515.32	\$486.69	\$486.69	
26	\$486.66	\$486.66	\$525.59	\$525.59	\$496.39	\$496.39	
27 28	\$498.06	\$498.06 \$516.60	\$537.91 \$557.92	\$537.91	\$508.02	\$508.02	
28 29	\$516.60 \$531.80	\$516.60		\$557.92 \$574.35	\$526.93 \$542.44	\$526.93 \$542.44	
29 30	\$531.80	\$531.80	\$574.35 \$582.56	\$574.35 \$582.56	\$542.44 \$550.20	\$542.44	
31	\$550.81	\$550.81	\$594.88	\$594.88	\$561.83	\$561.83	
32	\$562.22	\$562.22	\$607.20	\$607.20	\$573.47	\$573.47	
33	\$569.35	\$569.35	\$614.90	\$614.90	\$580.74	\$580.74	
34	\$576.95	\$576.95	\$623.11	\$623.11	\$588.49	\$588.49	
35	\$580.76	\$580.76	\$627.22	\$627.22	\$592.37	\$592.3	
36	\$584.56	\$584.56	\$631.32	\$631.32	\$596.25	\$596.2	
37	\$588.36	\$588.36	\$635.43	\$635.43	\$600.13	\$600.13	
38	\$592.16	\$592.16	\$639.53	\$639.53	\$604.00	\$604.00	
39	\$599.77	\$599.77	\$647.75	\$647.75	\$611.76	\$611.70	
40	\$607.37	\$607.37	\$655.96	\$655.96	\$619.52	\$619.52	
41	\$618.78	\$618.78	\$668.28	\$668.28	\$631.15	\$631.1	
42	\$629.71	\$629.71	\$680.08	\$680.08	\$642.30	\$642.30	
43	\$644.91	\$644.91	\$696.51	\$696.51	\$657.81	\$657.83	
44	\$663.92	\$663.92	\$717.04	\$717.04	\$677.20	\$677.20	
45	\$686.26	\$686.26	\$741.16	\$741.16	\$699.99	\$699.9	
46	\$712.88	\$712.88	\$769.91	\$769.91	\$727.13	\$727.1	
47	\$742.82	\$742.82	\$802.24	\$802.24	\$757.67	\$757.6	
48	\$777.03	\$777.03	\$839.20	\$839.20	\$792.57	\$792.5	
49	\$810.78	\$810.78	\$875.64	\$875.64	\$826.99	\$826.99	
50	\$848.80	\$848.80	\$916.70	\$916.70	\$865.77	\$865.7	
51	\$886.34	\$886.34	\$957.25	\$957.25	\$904.07	\$904.0	
52 53	\$927.69	\$927.69	\$1,001.90	\$1,001.90 \$1,047.07	\$946.24	\$946.2	
53 54	\$969.51	\$969.51	\$1,047.07		\$988.90	\$988.9	
54 55	\$1,014.66 \$1,059.81	\$1,014.66 \$1,059.81	\$1,095.83 \$1,144.59	\$1,095.83 \$1,144.59	\$1,034.95 \$1,081.00	\$1,034.9 \$1,081.0	
55 56	\$1,059.81	\$1,059.81	\$1,144.59	\$1,144.59	\$1,081.00	\$1,081.0	
56 57	\$1,108.76	\$1,108.76	\$1,197.46	\$1,197.46	\$1,130.93	\$1,130.9	
58	\$1,210.94	\$1,138.18	\$1,250.84	\$1,250.84	\$1,181.35	\$1,181.3	
56 59	\$1,210.94	\$1,210.94	\$1,307.81	\$1,307.81	\$1,255.16	\$1,261.8	
60	\$1,289.83	\$1,289.83	\$1,393.01	\$1,393.01	\$1,201.62	\$1,201.6	
61	\$1,335.45	\$1,335.45	\$1,442.29	\$1,442.29	\$1,362.16	\$1,362.1	
62	\$1,365.39	\$1,365.39	\$1,474.62	\$1,474.62	\$1,392.70	\$1,392.70	
63	\$1,402.94	\$1,402.94	\$1,515.17	\$1,515.17	\$1,431.00	\$1,431.00	
64+	\$1,425.74	\$1,425.74	\$1,539.80	\$1,539.80	\$1,454.26	\$1,454.26	

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Company Name: Company (CAIC)

Market: Small Group

Product: PPO

Effective Date of Rates: October 1, 2022

Ending date of Rates:

December 31, 2022

HIOS Plan ID (Off Exchange)=>	_	82795PA0130001 Gold PPO 0/0/20 Rx 500		0130001	82795PA0130001 Gold PPO 0/0/20 Rx 500		
Plan Marketing Name =>				0/20 Rx 500			
Form # =>	C22-CA		C22-CAIC-SGP 7		C22-CAIC-SGP 9 PPO		
Rating Area =>	PF						
Network => Metal =>		old	PPO Gold		Gold		
Deductible =>	\$0 /\$500		\$0 /\$500 Med/Rx		\$0 /\$500 Med/Rx		
Coinsurance =>	3073300		3073300		3073300		
Copays =>		PCP/SPC/ER	\$20/\$40/\$300		\$20/\$40/\$300 PCP/SPC/ER		
OOP Maximum =>	\$8550 Med/		\$8550 Med/F		\$8550 Med/Rx Combined		
Pediatric Dental (Yes/No) =>	Y	es	Ye	es	Ye	es	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	
0 - 14	\$369.35	\$369.35	\$398.90	\$398.90	\$376.74	\$376.7	
15	\$402.18	\$402.18	\$434.36	\$434.36	\$410.22	\$410.2	
16	\$414.73	\$414.73	\$447.91	\$447.91	\$423.03	\$423.0	
17	\$427.29	\$427.29	\$461.47	\$461.47	\$435.83	\$435.8	
18	\$440.81	\$440.81	\$476.07	\$476.07	\$449.62	\$449.6	
19	\$454.32	\$454.32	\$490.67	\$490.67	\$463.41	\$463.4	
20	\$468.33	\$468.33	\$505.79	\$505.79	\$477.69	\$477.6	
21	\$482.81	\$482.81	\$521.43	\$521.43	\$492.47	\$492.4	
22	\$482.81	\$482.81	\$521.43	\$521.43	\$492.47	\$492.4	
23	\$482.81	\$482.81	\$521.43	\$521.43	\$492.47	\$492.	
24	\$482.81	\$482.81	\$521.43	\$521.43	\$492.47	\$492.	
25 26	\$484.74	\$484.74	\$523.52	\$523.52 \$533.95	\$494.44	\$494.	
27	\$494.40 \$505.98	\$494.40 \$505.98	\$533.95 \$546.46	\$546.46	\$504.29 \$516.10	\$504.2 \$516.2	
28	\$524.81	\$505.98	\$566.80	\$566.80	\$535.31	\$535.	
29	\$540.26	\$540.26	\$583.49	\$583.49	\$553.31	\$551.	
30	\$547.99	\$547.99	\$591.83	\$591.83	\$558.95	\$558.	
31	\$559.58	\$559.58	\$604.34	\$604.34	\$570.77	\$570.	
32	\$571.16	\$571.16	\$616.86	\$616.86	\$582.59	\$582.	
33	\$578.41	\$578.41	\$624.68	\$624.68	\$589.97	\$589.	
34	\$586.13	\$586.13	\$633.02	\$633.02	\$597.85	\$597.	
35	\$589.99	\$589.99	\$637.19	\$637.19	\$601.79	\$601.	
36	\$593.86	\$593.86	\$641.36	\$641.36	\$605.73	\$605.	
37	\$597.72	\$597.72	\$645.54	\$645.54	\$609.67	\$609.	
38	\$601.58	\$601.58	\$649.71	\$649.71	\$613.61	\$613.	
39	\$609.31	\$609.31	\$658.05	\$658.05	\$621.49	\$621.	
40	\$617.03	\$617.03	\$666.39	\$666.39	\$629.37	\$629.	
41	\$628.62	\$628.62	\$678.91	\$678.91	\$641.19	\$641.	
42	\$639.72	\$639.72	\$690.90	\$690.90	\$652.52	\$652.	
43	\$655.17	\$655.17	\$707.59	\$707.59	\$668.28	\$668.	
44	\$674.49	\$674.49	\$728.44	\$728.44	\$687.98	\$687.	
45	\$697.18	\$697.18	\$752.95	\$752.95	\$711.12	\$711.	
46	\$724.22	\$724.22	\$782.15	\$782.15	\$738.70	\$738.	
47	\$754.63	\$754.63	\$815.00	\$815.00 \$852.55	\$769.72	\$769.	
48 49	\$789.39 \$823.67	\$789.39 \$823.67	\$852.55 \$889.57	\$852.55	\$805.18 \$840.15	\$805.: \$840.:	
50	\$862.30	\$862.30	\$931.28	\$931.28	\$879.54	\$879.	
51	\$900.44	\$900.44	\$972.48	\$972.48	\$918.45	\$918.	
52	\$942.45	\$942.45	\$1,017.84	\$1,017.84	\$961.29	\$961.	
53	\$984.93	\$984.93	\$1,063.73	\$1,063.73	\$1,004.63	\$1,004.	
54	\$1,030.80	\$1,030.80	\$1,113.26	\$1,113.26	\$1,051.42	\$1,051.	
55	\$1,076.67	\$1,076.67	\$1,162.80	\$1,162.80	\$1,098.20	\$1,098.	
56	\$1,126.40	\$1,126.40	\$1,216.51	\$1,216.51	\$1,148.92	\$1,148.	
57	\$1,176.61	\$1,176.61	\$1,270.74	\$1,270.74	\$1,200.14	\$1,200.	
58	\$1,230.20	\$1,230.20	\$1,328.62	\$1,328.62	\$1,254.80	\$1,254.	
59	\$1,256.75	\$1,256.75	\$1,357.29	\$1,357.29	\$1,281.89	\$1,281.	
60	\$1,310.35	\$1,310.35	\$1,415.17	\$1,415.17	\$1,336.55	\$1,336.	
61	\$1,356.70	\$1,356.70	\$1,465.23	\$1,465.23	\$1,383.83	\$1,383.	
62	\$1,387.11	\$1,387.11	\$1,498.08	\$1,498.08	\$1,414.86	\$1,414.8	
63	\$1,425.26	\$1,425.26	\$1,539.28	\$1,539.28	\$1,453.76	\$1,453.	
64+	\$1,448.42	\$1,448.42	\$1,564.29	\$1,564.29	\$1,477.40	\$1,477.4	

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#### Capital Advantage Insurance Company (CAIC) Small Group Plan Design Summary

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
82795PA0130001	Gold PPO 0/0/20 Rx 500	PPO	Gold	Off	PPO	6,7,9	All

Company Name Capital Advantage Insurance Company (CAIC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

RATING AREA 6 RATING AREA 7 RATING AREA 9	
<b>02-01-2021 Number of Covered Lives by Rating County</b> 0 0 9 1 0 47 0 3 4 0 9 8 29 1 9 12 0 0 0	0
HIOS Plan ID Plan Marketing Name Product Metal Exchange Centre Columbia Lehigh Mifflin Montour Northampton Northampton Northampton Northumberland Schuylkill Snyder Union Adams Berks Lancaster York Cumberland Dauphin Franklin Fulton Juniata Leb	non Perry
82795PA0130001 Gold PPO 0/0/20 Rx 500 PPO Gold Off \$460.47 \$460.47 \$460.47 \$460.47 \$460.47 \$460.47 \$460.47 \$460.47 \$460.47 \$460.47 \$497.31 \$497.31 \$497.31 \$497.31 \$497.31 \$469.68 \$46	9.68 \$469.68

0 М Ν Q **Unified Rate Review v5.3** To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + P. To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L. 3 4 **Capital Advantage Insurance Company** To validate, select the Validate button or Ctrl + Shift + I. Company Legal Name: State: HIOS Issuer ID: Small Group Market: To finalize, select the Finalize button or Ctrl + Shift + F. 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 Effective Date of Rate Change(s): 1/1/2022 Market Level Calculations (Same for all Plans) **Section I: Experience Period Data** 1/1/2020 Experience Period: to 12/31/2020 <u>Total</u> <u>PMPM</u> \$676,875.05 \$694.94 Allowed Claims Reinsurance \$0.00 \$0.00 Incurred Claims in Experience Period \$632,160.89 \$649.04 Risk Adjustment \$75,073.00 \$77.08 \$716,916.31 Experience Period Premium \$736.05 **Experience Period Member Months** 974 **Section II: Projections** Year 1 Trend Year 2 Trend **Trended EHB Allowed Claims Experience Period Index Benefit Category** 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 Rate PMPM Utilization Utilization Cost Cost 1.054 Inpatient Hospital \$132.56 1.000 1.052 1.00 \$146.98 \$303.98 1.056 1.000 1.053 1.000 \$338.02 Outpatient Hospital Professional \$186.44 1.049 1.000 1.034 1.000 \$202.23 Other Medical \$15.74 1.056 1.000 1.053 1.000 \$17.50 1.000 1.000 \$0.00 \$0.00 1.030 1.030 Capitation \$70.25 1.013 1.104 1.015 \$56.21 1.101 Prescription Drug \$694.93 \$774.98 Total Morbidity Adjustment 1.170 Demographic Shift 1.000 1.000 Plan Design Changes 1.000 Adjusted Trended EHB Allowed Claims PMPM for 1/1/2022 \$906.72 \$797.12 Manual EHB Allowed Claims PMPM 0.00% Applied Credibility % **Projected Period Totals** 1/1/2022 \$797.12 \$1,202,854.08 Projected Index Rate for \$0.00 \$0.00 \$86.62 \$130,709.58 Risk Adjustment Payment/Charge 0.00% Exchange User Fees \$710.50 Market Adjusted Index Rate \$1,072,144.50 1,509 Projected Member Months Information Not Releasable to the Public Unless Authorized by Law: This information has not been publically disclosure may result in prosecution to the full extent of the law. 51

# Product-Plan Data Collection

Capital Advantage Insurance Company Company Legal Name: 82795 HIOS Issuer ID:

Effective Date of Rate Change(s): 1/1/2022

# **Product/Plan Level Calculations**

## Field # Section I: General Product and Plan Information

Field # Section I: General Product and Plan Information	
1.1 Product Name	PPO
1.2 Product ID	82795PA013
1.3 Plan Name	Gold PPO 0/0/20
1.4 Plan ID (Standard Component ID)	82795PA0130001
1.5 Metal	Gold
1.6 AV Metal Value	0.803
1.7 Plan Category	Renewing
1.8 Plan Type	PPO
1.9 Exchange Plan?	No
1.10 Effective Date of Proposed Rates	1/1/2022
1.11 Cumulative Rate Change % (over 12 mos prior)	5.50%
1.12 Product Rate Increase %	5.49%
1.13 Submission Level Rate Increase %	5.49%

Worksheet 1 Totals	Section II: Experience Period and Current Plan	Level Information	
	2.1 Plan ID (Standard Component ID)	Total	82795PA0130001
\$676,875	2.2 Allowed Claims	\$676,875	\$676,875
\$0	2.3 Reinsurance	\$0	\$0
	2.4 Member Cost Sharing	\$44,714	\$44,714
	2.5 Cost Sharing Reduction	\$0	\$0
\$632,161	2.6 Incurred Claims	\$632,161	\$632,161
\$75,073	2.7 Risk Adjustment Transfer Amount	\$75,073	\$75,073
\$716,916	2.8 Premium	\$716,916	\$716,916
974	2.9 Experience Period Member Months	974	974
	2.10 Current Enrollment	132	132
	2.11 Current Premium PMPM	\$712.21	\$712.21
	2.12 Loss Ratio	79.82%	79.82%
	Per Member Per Month	·	
	2.13 Allowed Claims	\$694.94	\$694.94
	2.14 Reinsurance	\$0.00	\$0.00
	2.15 Member Cost Sharing	\$45.91	\$45.91
	2.16 Cost Sharing Reduction	\$0.00	\$0.00
	2.17 Incurred Claims	\$649.04	\$649.04
	2.18 Risk Adjustment Transfer Amount	\$77.08	\$77.08
	2.19 Premium	\$736.05	\$736.05

# Section III: Plan Adjustment Factors

3.1 Plan ID (Standard Component ID)		82795PA0130001
3.2 Market Adjusted Index Rate		\$710.50
3.3 AV and Cost Sharing Design of Plan		0.8899
3.4 Provider Network Adjustment		1.0000
3.5 Benefits in Addition to EHB		1.0000
Administrative Costs		
3.6 Administrative Expense		9.74%
3.7 Taxes and Fees		2.59%
3.8 Profit & Risk Load		2.00%
3.9 Catastrophic Adjustment		1.0000
3.10 Plan Adjusted Index Rate		\$738.03
	•	

3.11 Age Calibration Factor	0.6411	0.6411
3.12 Geographic Calibration Factor	0.9731	0.9731
3.13 Tobacco Calibration Factor	1.0000	1.0000
3.14 Calibrated Plan Adjusted Index Rate		\$460.43

# Section IV: Projected Plan Level Information

4.15 Incurred Claims

4.17 Premium

4.14 Cost Sharing Reduction

4.16 Risk Adjustment Transfer Amount

4.1 Plan ID (Standard Component ID)	Total	82795PA0130001
4.2 Allowed Claims	\$1,202,857	\$1,202,857
4.3 Reinsurance	\$0	\$0
4.4 Member Cost Sharing	\$132,493	\$132,493
4.5 Cost Sharing Reduction	\$0	\$0
4.6 Incurred Claims	\$1,070,364	\$1,070,364
4.7 Risk Adjustment Transfer Amount	\$116,309	\$116,309
4.8 Premium	\$1,113,730	\$1,113,730
4.9 Projected Member Months	1,509	1,509
4.10 Loss Ratio	87.02%	87.02%
Per Member Per Month		
4.11 Allowed Claims	\$797.12	\$797.12
4.12 Reinsurance	\$0.00	\$0.00
4.13 Member Cost Sharing	\$87.80	\$87.80

\$87.80 \$0.00

\$709.32

\$77.08

\$738.06

\$0.00

\$709.32

\$77.08

\$738.06

To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L.

To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + P.

State: To validate, select the Validate button or Ctrl + Shift + I. Small Group Market: To finalize, select the Finalize button or Ctrl + Shift + F.

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

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

# **Rating Area Data Collection**

Specify the total number of Rating Areas in your State by selecting the Create Rating Areas button or Ctrl + Shift + R. Select only the Rating Areas you are offering plans within and add a factor for each area.

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

Rating Area	Rating Factor
Rating Area 6	1.0000
Rating Area 7	1.0800
Rating Area 9	1.0200

# CAPITAL ADVANTAGE INSURANCE COMPANY, INC.

# ACTUARIAL MEMORANDUM Small Group Rates Effective January 1, 2022

# **General Information**

### **Company Information**

Company Legal Name: Capital Advantage Insurance Company – CAIC

• State: PA

HIOS Issuer ID: 82795Market: Small GroupEffective Date: 1/1/2022

### **PID Company Information**

• Company Name: Capital Advantage Insurance Company (CAIC)

• NAIC: 41203

• Market: Small Group

• On/Off Exchange: Off Exchange

Effective Date: 1/1/2022Average Rate Change: 5.5%

• Range of Requested Rate Change: 5.5% to 5.5%

• Total additional annual revenue generated from the proposed rate change: \$57,107

Product: PPO

Rating Areas: 6,7,9Metal Levels: Gold

• Current Covered Lives and Policyholders: 132/83

• 2022 Number of Plans/Change from 2021: 1/No Changes

• Contract Form #: C22-CAIC-SGP

• Form Filing SERFF #: CABC-132793478

• Binder SERFF #: CABC-PA22-125108746

• HIOS Issuer ID: 82795

HIOS Submission Tracking Number: 82795-2003721964618918916

### **Company Contact Information**

• Primary Contact Name:

• Primary Contact Telephone Number:

• Primary Contact Email Address:

### **Scope and Purpose**

By this filing, Capital Advantage Insurance Company (CAIC), a subsidiary of Capital BlueCross (CBC), submits rates for products to be made available to all small groups effective January 1, 2022.

# **Rate History and Proposed Variations in Rate Changes**

Market	Company	Effective Date	SERFF#	Annual Increase
Small Group	CAIC	1/1/2018	CABC-131022120	4.7%
Small Group	CAIC	1/1/2019	CABC-131455106	16.2%
Small Group	CAIC	1/1/2020	CABC-131921812	13.2%
Small Group	CAIC	7/1/2020	CABC-132294744	8.6%
Small Group	CAIC	1/1/2021	CABC-132352732	-6.0%
Small Group	CAIC	10/1/2021	CABC-132750951	-3.5%

### **Average Rate Change**

CAIC is proposing an aggregate annual 5.5% rate change. The rate change is calculated in PA Rate Exhibits Part III, Table 10, cell AC15.

The key drivers of the rate change, and approximate impact, are as follows:

Future Cost and Utilization: 6.5%

Less migration of groups from ACA to ASO arrangements: -1.0%

Please note the filing includes a COVID-19 adjustment of 1.026.

### **Membership**

Membership is shown in PA Rate Exhibits Part I, Table 1. The average age is 40.

### **Benefit Changes 2021-2022**

A summary of proposed 2022 benefits is included in Exhibit A.

There are several benefit changes being implemented in 2022. All benefit changes comply with the uniform modification of coverage standards described in 45 CFR 147.106(e). Any plan with a

benefit change that did not meet the uniform modification of coverage standard was terminated, and a new plan was created in its place. Benefit changes by plan are listed in Exhibit B, highlighted in yellow.

### **Experience Period Premium and Claims**

**Single Risk Pool**: The data used to develop rates and shown in URRT and PA Rate Exhibits abides by 45 CFR part 156.80(d) single risk pool requirements. The single risk pool reflects all covered lives for every non-grandfathered, non-transitional product/plan combination for CAIC in the small group market.

**Base Experience Period**: The base experience period (BEP) includes completed fee-for-service paid and incurred claims for dates of service between January 1, 2020 and December 31, 2020.

Transitional membership is not included in PA Rate Exhibits Table 2 or URRT.

Paid Through Date: Claims in the BEP are paid through February 28, 2021

**Premiums** (net of MLR Rebate) in BEP: Premiums are calculated on an earned basis in the BEP. MLR rebate adjustments are equal to zero as CAIC does not expect to refund any MLR rebates in the BEP.

### Allowed and Incurred Claims in BEP:

- Allowed claims are developed by combining paid claims with member cost-sharing.
   Allowed claims meet the definition in the URR instructions. They do not include provider quality incentive payments.
- Incurred claims are net of HHS CSR payments (CSR does not apply to Small Group).
- CBC only covers Essential Health benefits (EHBs).
- CAIC does not include capitated services.
- Allowed and Incurred claims are net of pharmacy rebates. BEP rebates are completed based on actual utilization of rebate-eligible drugs and rebate amounts.

**Estimated Incurred but Not Paid Claims**: Paid claims by date of service come directly from CBC's data warehouse. The method for calculating incurred claims in the BEP is as follows:

- 1. Historical fee-for-service claims are viewed by date of service and date of payment in a claims triangle.
- 2. The claims triangle payments are then accumulated by date of service to develop factors that represent the rate of accumulation or rate of "completion".
- 3. Historical rates of completion by duration are used to derive projected rates of completion. Some of the methods used to develop projected completion factors are averages (e.g. harmonic averages, time weighted averages, geometric averages) and regression methods. Numerous items are considered when viewing these averages or regression statistics, such as the impact of high claims on perceived completion patterns.

- 4. For durations that exhibit a projected completion factor greater than the Valuation Actuary's chosen threshold (e.g. 80% complete), cumulative paid and incurred claims are divided by the projected completion factor to arrive at ultimate incurred claims. For durations that are less than the chosen threshold, a projection methodology is used. Similar to completion factor development, projection methodologies are worthy of a lengthy discussion. In general, an ultimate incurred claims PMPM is derived by projecting a recent 12-month period to the current month(s) and seasonally adjusting.
- 5. With all months having both a cumulative paid amount and an estimated ultimate incurred amount, the completion factors used in pricing are calculated by taking the quotient of the two. Allowed completion and incurred completion are assumed to be identical.
- 6. Both allowed and paid claims in the BEP are completed by applying completion factors by incurred month developed in Step 6.

$$BEP\ Incurred\ Claims\ =\ \sum \frac{BEP\ Paid\ Claims\ by\ Incurred\ Month}{Completion\ by\ Incurred\ Month}$$

BEP Allowed Claims

$$= \sum \frac{BEP\ Paid\ Claims + BEP\ Member\ Cost\ Share\ by\ Incurred\ Month}{Completion\ by\ Incurred\ Month}$$

**Risk Adjustment in BEP**: Risk adjustment amounts in the BEP are equal to the amounts sent by the Department on 5/9/2021.

**Loss Ratio in BEP:** Loss ratio is 79.82%

### **Credibility of Data**

For the purpose of rate development, CAIC small group products are combined with other product offerings (HMO, PPO) from CBC subsidiaries. Combining the experience is actuarially justifiable for several reasons:

- 1. The demographics of members buying PPO and other products are similar.
- 2. Cost and utilization between PPO and other products are similar.
- 3. Medical policy between PPO and other products are almost identical, with the exception of referrals and no out-of-network benefit on HMO.

The credibility manual is the combination of CAIC, Capital Advantage Assurance Company (CAAC), and Keystone Health Plan Central (KHPC) HMO data. The credibility manual BEP includes completed fee-for-service paid and incurred claims and capitation for dates of service between January 1, 2020 and December 31, 2020. All data is trended and benefit-adjusted in the same manner as the experience data (same projection factors and trend).

### **Trend Identification**

Trend: 6.52%

Trend levels reflect CBC's best estimate of changes in utilization, provider reimbursement contracts, the network of facilities and providers, disease management initiatives and the impact of utilization management.

The following is a description of considerations used to determine trend.

- 1. Base Cost/ Change in hospital and physician contracting: The contracted increase in reimbursements to hospitals and physicians is the basis of cost trends. CBC uses the following to project future costs:
  - a. Vendor Physician Cost Model and Internal Hospital Contracting Model
    - i. The medical cost models use best estimates of Capital BlueCross (CBC)'s future contracting increases with physicians and hospitals. The models use cost estimates based on varying contract effective dates by physician and hospital. All facilities and providers are considered in this modeling effort (i.e. acute and non-acute, network and non-network, inpatient and outpatient, in- area and out-of-area). From there, a monthly anticipated cost (assuming static utilization) summary is produced which can be used in projecting future claims costs. Cost trends are determined at the CBC book of business level for all commercial business.
  - b. Internal Prescription Drug Trend Model
    - i. Price Inflation
    - ii. Contract Pricing
    - iii. Member Cost-Sharing
    - iv. Units per Script
    - v. Brand/Generic Mix
    - vi. Therapeutic Mix
    - vii. Cost per Script
    - viii. Pipeline (new drugs)
- 2. Utilization Considerations:
  - a. Intensity of medical services rendered
  - b. Changes in place of service (e.g. continued migration of inpatient stays to outpatient setting)
  - c. Further migration from brand prescription drugs to generic prescription drugs
  - d. Favorable impacts of value based benefits designs
  - e. Medical utilization estimates reviewed by CBC's Chief Medical Officer
- 3. Leveraging: The trend model is based on allowed cost increases. Paid claims trend at a higher rate than allowed due to leveraging. Leveraging is the impact of static cost-share, such as deductibles and copays, to the paid trend.
- 4. Intensity: Measure of cost increase due to change in treatment sophistication. An example is migration from x-rays to MRIs at significantly higher cost.

5. Underwriting Cycle: The underwriting cycle is defined as the tendency to swing between profitable and unprofitable periods over time. The underwriting cycle is exacerbated partly by pricing performed with incomplete information as to the level of current experience trends. A reaction delay occurs, as carriers tend to rely on measurements of past experience in developing current pricing assumptions. As a result, carriers are often increasing their pricing trends when actual experience trends have begun to decline, and decreasing their pricing trends actual trends are increasing. CBC strives to mitigate the underwriting cycle by keeping trends consistent through times of increasing and decreasing claim cost and utilization.

**Historical Experience:** Historical experience was not used to the develop trend.

**Benefit Categories**: Claims in the benefit categories displayed in URRT come directly from CBC's data warehouse. These same categories are used to develop category-level trend. See Exhibit C for a description of benefits by benefit category.

See Exhibit E for CAIC's pricing trend, as well as cost and utilization components of the pricing trend.

## Rate Development & Change

### **Projection Factors**

**Changes in Morbidity:** Found in URRT Worksheet 1, "Morbidity Adjustment", and PA Rate Exhibits, Table 5. CBC projects 3% change in morbidity due to COVID-19 claim suppression during 2020. The morbidity factor is based on the following analysis:

- 1. Gather BEP claims, membership and premium from Ib Manual Data, Table 2. This is for the filing BEP 1/1/2020-12/31/2020.
- 2. Develop Claim PMPM A using data from (1)
- 3. Gather 2019 claims, membership and premium from Ib Manual Data, Table 2 from the 2021 annual filing. This is for BEP 1/1/2019-12/31/2019. Trend the claims data 12 months to the filing BEP in (1).
- 4. Develop Claim PMPM B using data from (2)
- 5. Claim PMPM B/Claim PMPM A 1 = 3.6%
- 6. 3% is applied in rating due to market competition.

The above calculation is found in Exhibit Q, Morbidity Factor Calculation.

2. In addition to the COVID-19 morbidity change, CAIC is also applying a factor of 1.14 to reflect the difference is projected Plan Liability Risk Score (PLRS) between CAIC and its subsidiary, CAAC, which underwrites the vast majority of the BEP experience. This factor aligns the rates with similar benefits offered under CAAC.

**Changes in Benefits:** Benefit changes are not applied to allowed claims as allowed should stay consistent from 2020 to 2022. Benefit changes are applied in the development of future incurred

claims, due to changes in member cost-share. This calculation is shown in Exhibit D, and applied in Exhibit G. The manual cost PMPMs are developed from CBC's internal benefit relativity model, discussed in the Plan Adjusted Index Rate section below. The benefit change is equal to member-month weighted average projected manual PMPM divided by member-month weighted average manual PMPM in the BEP. This process is further discussed in the Paid-to-Allowed section below.

**Changes in Demographics:** CAIC does not expect changes in demographics in its small group population.

**Changes in Network:** No Network change is applied.

**Other Adjustments:** No other adjustment is applied to the BEP.

Benefits, Demographics, Network and Other adjustments are found in URRT, Worksheet 1, and PA Rate Exhibits, Table 5.

### **Index Rate**

The experience period index rate is CAIC's allowed claims PMPM, set in accordance with the single risk pool provision. All CAIC covered benefits are categorized as Essential Health Benefits (EHBs), therefore no adjustment was made to the experience period index.

**Projected Allowed Claims:** The CAIC experience period allowed claims, benefit-adjusted, trended to the projection period (See <u>Projection Factors</u> section above), and credibility adjusted, is the *Projected Allowed Claims at Current Benefits*. This number is reflected in Worksheet 1 of URRT ("Projected Allowed Experience Claims PMPM (w/ applied credibility if applicable)").

To calculate the projected index rate:

- 1. Start with Projected Allowed Claims at Current Benefits
- 2. The *Projected Allowed Claims at Current Benefits* reflect EHBs 100 percent, so no adjustment needs to be made to add EHBs and remove non-EHB claim cost. This is the index rate for individuals renewing January December.

See Exhibit J as well as PA Rate Exhibits Table 5 for the Index Rate.

### **Paid to Allowed Ratio**

CAIC used the prescribed URRT allowed claim rate development methodology in conjunction with a paid and incurred rate development methodology to determine final premium rates. URRT projects allowed claims, and uses a paid-to-allowed ratio in order to adjust allowed claims to paid levels. This value is then used to develop premiums. In order to determine the paid-to-allowed ratio, CAIC projected paid and incurred claims, adjusted for benefits, to the experience period.

Projected Paid and Incurred Claims are calculated as follows:

- 1. Gather claims experience as described in the Data section above.
  - a. Base Experience Period (BEP) Paid Claims, Capitation, and Rx Rebates
  - b. BEP Member Months
- 2. Develop BEP Paid and Incurred Claims:

$$\textit{BEP Paid and Incurred Claims} = \frac{\textit{BEP Paid Claims}}{\textit{Completion Factor}}$$

The development of completion factors is described in <u>Experience Period Premium and Claims</u> above.

3. Develop the BEP Paid and Incurred Claim PMPM:

$$BEP\ Paid\ and\ Incurred\ Claim\ PMPM = \frac{BEP\ Paid\ and\ Incurred\ Claims}{BEP\ Member\ Months}$$

4. Develop *Trended Claim PMPM*: Using the aggregate trend described in the <u>Projection Factors</u> section above, trend the BEP Paid and Incurred Claim PMPM from the midpoint of the experience period to the midpoint of the rating period.

Trended Claim PMPM

$$= [\textit{BEP Paid and Incurred Claim PMPM}] \times (1 + [\textit{Trend\%}])^{\textit{Trend Months/12}}$$

5. Develop *Projected Paid and Incurred Claim PMPM*:

The *Benefit Adjustment*, *Morbidity Adjustment*, and *Other Adjustment* are discussed in the <u>Projections Factors</u> section above.

- 6. Develop *Projected Claims PMPM by Benefit* as follows:
  - a. CAIC uses an actuarial cost model to measure the impact of cost-sharing designs on cost and utilization amounts by service category. The cost model shows frequency per 1,000 per year by type of service (IP, OP, Professional), and allowed cost per service for each of the same types of service, normalized to a \$0 office visit copayment and a \$25 ER copayment. Given a particular benefit design (for example, \$20 office visit copayment), utilization is adjusted from the benchmark based on assumed utilization change factors, and cost per service is reduced by the copayment or coinsurance per service. Cost and utilization are multiplied together to derive a PMPM by service, summed for all services. The

- impact of global deductible, coinsurance, and out-of-pocket max is then measured based on cumulative probability distributions (CPDs), where the value of services that apply to the CPDs adjusts the level of the curve, as well as global utilization adjustments.
- b. This actuarial cost model derives a Manual Cost for each benefit design in the experience period, as well as plans being offered in the projection period. The average Manual Cost of the experience is compared to the Manual Cost of the base plan. The projected experience period data is then adjusted to the base plan:

$$Benefit\ Level\ Adjustment = rac{Average\ Manual\ Cost\ in\ Projection\ Period}{Manual\ Cost\ of\ Base\ Plan}$$

c. The *Projected Paid and Incurred Claim PMPM* (Step 5) is then adjusted to the Base Plan as follows:

$$Base\ Plan\ Paid\ and\ Incurred\ Claims\ PMPM \\ = \frac{Benefit\ Adjusted\ Paid\ and\ Incurred\ Claims\ PMPM}{Benefit\ Level\ Adjustment}$$

d. Each additional benefit design has its own unique Manual Cost, which can then be compared to the Base Plan to develop a Benefit Relativity:

$$Benefit \ Relativity \ A = \frac{Manual \ Cost \ of \ Benefit \ A}{Manual \ Cost \ of \ Base \ Plan}$$

- e. The Benefit Relativity developed in d. above is then used as a gauge to develop a final *Pricing Relativity*. This pricing relativity is developed using actuarial judgment including the following considerations:
  - i. Final premium relativities must make sense based on benefits. For example, the annual cost difference between a PPO 2000 and PPO 1000 must be less than \$1000.
  - ii. Adjustments for plan designs that fall outside of the actuarial cost model.
- a. So the *Projected Claims PMPM by Benefit* is:

b. And to arrive at the *Total Projected Claims PMPM*, CAIC assumes a distribution of members across the benefit plans being offered in the projection period. The *Total Projected Claims PMPM*:

- = Projected Claims PMPM Benefit  $A \times Expected$  Member Dist of Benefit A + Projected Claims PMPM Benefit  $B \times Expected$  Member Dis of Benefit  $B + \cdots$
- 7. The Paid-To-Allowed Ratio is then:

$$Paid \ to \ Allowed \ Ratio = \frac{Total \ Projected \ Claims \ PMPM}{Projected \ Allowed \ Claims \ at \ Current \ Benefits}$$

See Exhibit G for the development of the *Paid-to-Allowed Ratio*. And see Exhibit L for the plan-level projected incurred amount development.

### **Market Adjusted Index Rate**

The Market Adjusted Index Rate is calculated as the Index Rate adjusted for all allowable market-wide modifiers defined in the market rating rules, 45 CFR Part 156.80(d)(1). So,

[Market Adjusted Index Rate]

- $= ([Index\ Rate]\ x\ [Paid\ to\ Allowed\ Ratio]$
- [Projected Incurred Reinsurace Recoveries]
- [Projected Incurred Risk Adjustment PMPM]
- + [Exchange Fees PMPM]) ÷ [Paid to Allowed Ratio]

# **Projected Incurred Risk Adjustments PMPM:**

Relevant to 2022 pricing is the impact of Commercial Risk Adjustment (CRA) payment transfers that are expected to be earned in 2022. The following items are those that we deem important in generating a CRA payment transfer adjustment:

- 1. Risk profile of the those enrolled in CRA eligible plans for the market or state (i.e. competitors) relative to risk profile of CRA eligible membership enrolled in our plans
- 2. Statewide average premiums
- 3. Current market penetration of this company and competitors in the market and in the state
- 4. 2019-2020 risk adjustment results
- 5. Market improvement in coding risk: CBC's ACA book of business has had a churn rate that makes a multi-year perspective of member diagnosis and risk very challenging. Because closing gaps in care and coding, and a myriad of other risk adjustment functions require more than a single year of data to facilitate an accurate depiction of risk, it is believed that CBC is disadvantaged in the market. This will drive CBC's relative risk to the market down over time.

The 2022 projected risk adjustment PMPM is set equal to the 2020 amount sent by the Department on 5/9/21.

### **Projected Incurred Reinsurance Recoveries:**

Reinsurance does not apply to the small group market.

### **Exchange Fee PMPM:**

CAIC only offers off-exchange plans in the small group market, so the exchange fee is \$0.

The exchange fee PMPM is calculated as:

```
Exchange Fee PMPM
= [Avg \ 2022 \ On - Exchange \ Premium \ PMPM] \times [\% \ Members \ On \\ - Exchange]
Where
[Avg \ 2022 \ On - Exchange \ Premium \ PMPM \\ = [Avg \ 2021 \ On - Exchange \ Premium \ PMPM \ \times (1 \\ + [Avg \ Proposed \ Rate \ Change])
```

See Exhibit K for the development of the Market Adjusted Index Rate.

### **Retention Items**

### **Administrative Expense Load:**

- 1. Risk Adjustment User Fee: To fund the HHS-risk adjustment program, issuers will remit to HHS a fee of \$0.25 PMPM. The Risk Adjustment Fee PMPM is included in URRT Worksheet 1, URRT Worksheet 2, "Administrative Expense", and PA Rate Exhibits Table 6.
- 2. Administrative Expense: Calculated using an allocation method from CBC's Finance department, and trended to the rating period. Costs are allocated according to results reported through a company-wide questionnaire. On an annual basis, each cost center within the company completes a questionnaire listing the distribution of costs (in percentage terms) by product as well as by market segment. For example, the questionnaire will ask what percentage of time is spent on PPO versus HMO versus Drug versus Medicare. And separately will ask what percentage of time is spent on large group, small group, individual, and government programs. Using those distributions, all costs needed to perform the business are allocated to the proper market segments and lines of business. The administrative expense applied in the rate development is the total expense allocated to CBC small group products. Administrative expenses are included in URRT Worksheet 2, "Administrative Expense", and PA Rate Exhibits Table 6. Expense as a percentage of premium vary by plan because a fixed dollar admin PMPM is applied to each plan.
  - a. Value-Based Benefits (VBB): Standard with each plan, Capital BlueCross includes wellness incentives to maximize the likelihood that consumers make positive behavioral changes, which lead to better health, and curbed health care costs for employers and employees alike. The incentive is as follows:
    - i. Complete biometric screening and receive a gift card.

- ii. Meeting biometric measure or finish online coaching program and receive a gift card reward.
- iii. The wellness program is administered through a vendor and costs are based on vendor fees, anticipated participation, and reward card amounts.
- iv. Fees are included in overall administrative expense fee discussed above.
- v. Included in URRT Worksheet 2, "Administrative Expense", and PA Rate Exhibits Table 6.
- 3. Broker Expense: Calculated based on CBC's explicit per contract broker fee. Broker Expense is included in URRT Worksheet 2, "Administrative Expense", and PA Rate Exhibits Table 6. Brokers are paid on new business and renewals the same commission rate for all geographic locations, enrollment dates, and metal levels. The 2021 broker commission schedule is yet to be finalized. Attached please find the 1/1/2020 copy of the broker agreement redacted version. Files are as follows:
  - a. Redacted Standard Producer Master Agreement: "SG\_21-62\_Initial\_CAIC\_PPO\_SPMABrokerGroupRedacted\_Supporting\_20210518.pdf"
  - b. Redacted Preferred Producer Master Agreement: "SG\_20-62\_Initial\_CAIC\_PPO\_PPMABrokerGroupRedacted\_Supporting\_20210518.pdf"
- 4. Additional Quality Improvement: Additional QI amounts applied in rating equal 0.4%. Included in URRT Worksheet 2, "Administrative Expense", and PA Rate Exhibits Table 6.

### **Profit (or Contribution to Surplus) & Risk Margin:**

5. Contingency: Contingency is included in URRT Worksheet 2, "Profit & Risk Load" and PA Rate Exhibits Table 6.

### **Taxes and Fees:**

- 1. Exchange Fee: N/A
- 2. Federal Income Tax: Federal Income Tax will be collected on the 2% contingency built into the premium. The projected Federal Income Tax is included in URRT Worksheet 2, "Taxes and Fees", and PA Rate Exhibits, Table 6.
- 3. Premium Tax: CAIC is charged premium tax of 2%. Premium tax is included in URRT, Worksheet2, "Taxes and Fees" and PA Rate Exhibits, Table 6.

See Exhibit H as well as PA Rate Exhibits Table 6 for all retention values.

# **Plan Adjusted Index Rates**

The Plan Adjusted Index Rates are included in Worksheet 2, Section IV of URRT.

The following adjustments were used to derive the Plan Adjusted Index Rate:

1. Actuarial Value and Cost Sharing adjustment: The Actuarial Value and Cost Sharing Adjustment is determined using CAIC's actuarial cost model. CAIC uses an actuarial cost model to measure the impact of cost-sharing designs on cost and utilization amounts by

service category. The cost model shows frequency per 1,000 per year by type of service (IP, OP, Professional), and allowed cost per service for each of the same types of service, normalized to a \$0 office visit copayment and a \$25 ER copayment. Given a particular benefit design (for example, \$20 office visit copayment), utilization is adjusted from the benchmark based on assumed utilization change factors, and cost per service is reduced by the copayment or coinsurance per service. Cost and utilization are multiplied together to derive a claim PMPM by service, summed for all services. The impact of global deductible, coinsurance, and out-of-pocket max is then measured based on CPDs, where the value of services that apply to the CPDs adjusts the level of the curve, as well as global utilization adjustments.

2. Induced Demand: Induced Demand: Please see Table 8. Induced Demand is calculated as:

$$[Pricing\ AV]^2 - [Pricing\ AV] + 1.24$$

Where *Pricing AV* is adjusted by the Non-Funding of CSR factor: PA Rate Exhibits, Table 10, column K x column P.

- 3. Provider Network: The Provider network is the same across all PPO plans.
- 4. Adjustment for benefits in addition to EHBs: No benefits other than EHBs are included in the plans, so no adjustment is necessary.
- 5. Adjustment for distribution and administrative costs: Described in <u>Retention Items</u> section above.
- 6. Tobacco Adjustment: Not applied to Small Group plans.

The development of the Plan Adjusted Index rate is found in Exhibit L, and summarized in Exhibit M.

# **Calibrated Plan Adjusted Index Rates**

**Age Curve Calibration**: The average age factor is calculated by taking the member-weighted average of current small group enrollment by age in CBC. Age factors are applied in accordance with CMS's Standard Age Curve. The age calibration factor is adjusted for contracts with greater than three children under the age of 21. Please see file SG\_21-62\_Initial\_CAIC\_PPO\_List-Billed\_Supporting\_20210518.xlsb for the calculation.

**Geographic Factor Calibration**: The average geographic rating factor is calculated by taking the CBC member-weighted average by region.

Geographic factors are unchanged from 2021.

**Tobacco Factor Calibration:** Tobacco factor not applied.

The calibration is:

[Calibrated Plan Adjusted Index Rate] = [Plan Adjusted Index Rate]  $\div$  ([Age Curve Calibration]  $\times$  [Geographic Factor Calibration]  $\times$  [Tobacco Factor])

Calibrated Plan Adjusted Index Rates are found on PA Rate Exhibits Table 10.

The calibration factors and development are found on Exhibit N.

## **Consumer Adjusted Premium Rate Development**

The Consumer Adjusted Premium Rate is developed as follows:

1. Member-Level Consumer Adjusted Premium Rate:

```
[Member - Level Consumer Adjusted Premium Rate] = [Calibrated Plan Adjusted Index Rate] \times [Age Factor] \times [Geographic Factor] \times [Tobacco Factor]
```

[Family Consumer Adjusted Premium Rate] = ∑[Member –
 Level Consumer Adjusted Premium Rate]
 With no more than three child dependents under age 21 taken into account

All consumer-level adjustments are applied uniformly to all plans in the Single Risk Pool. These adjustments do not vary by plan. Age and Geographic factors are displayed in Exhibits O.

Base Rates, i.e. Calibrated Plan Adjusted Index Rates, are found on Exhibit P.

### **AV Metal Values**

The AV Metal Values included in URRT Worksheet 2 and PA Rate Exhibits, Table 10 were based on the federally issued AV Calculator.

See AV Screenshots included with the submission.

## **AV Pricing Values**

All AV Pricing values were developed using CBC's actuarial cost model and actuarial judgment as described in section Paid to Allowed above. Differences in health status are not included.

# **Projected Loss Ratio**

See Exhibit I for the projected loss ratio calculation. The projected loss ratio is calculated using the federally prescribed MLR methodology.

# **Membership Projection**

The membership projections found in Worksheet 2 of URRT were developed by assuming that moderate decline in enrollment and similar distribution to current.

### **Projected versus Actual MLR**

Exhibit R shows a history of projected versus actual MLR and Member Months. Projected comes from the 2017-2019 filings. Actual comes from Table 4.

## **Attachments and Examples**

The following is a list of Exhibits and Data to support this filing:

PA Rate Exhibits Part I through Part V

Table 8

Exhibit A – Benefit Summary

Exhibit B – Benefit Change Summary

Exhibit C – Benefit Categories

Exhibit D – Benefit Mix

Exhibit E - Trend

Exhibit F – URRT

Exhibit G – Paid-to-Allowed Development

Exhibit H – Retention

Exhibit I – Projected Loss Ratio

Exhibit J – Index Rate

Exhibit K – Market Adjusted Index Rate

Exhibit L – Rate Development by Plan

Exhibit M – Plan Adjusted Index Rates

Exhibit N – Calibration

Exhibit O – Rating Factors

Exhibit P – Quarterly Base Rates

Exhibit Q – Morbidity Factor

Exhibit R – MLR Exhibit

Broker Contracts Actuarial Value Screenshots

List-Billed Data

# **Actuarial Statement**

I, ASA, MAAA, am of the opinion that this filing is in compliance with the applicable Federal and State Laws and Regulations concerning the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010.

I, ASA, MAAA, do hereby certify that:

- 1. This filing has been prepared in accordance with the following:
  - a. Actuarial Standard of Practice No. 5, "Health and Disability Claims"

- b. Actuarial Standard of Practice No. 8, "Regulatory Filings for Rates and Financial Projections for Health Plans"
- c. Actuarial Standard of Practice No. 12, "Risk Classification"
- d. Actuarial Standard of Practice No. 23, "Data Quality"
- e. Actuarial Standard of Practice No. 25, "Credibility Procedures Applicable to Accident and Health, Group Term Life, and Property/Casualty Coverage"
- f. Actuarial Standard of Practice No. 26, "Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans"
- g. Actuarial Standard of Practice No. 41, "Actuarial Communications".

### 2. The index rate is:

- a. Projected in compliance with all applicable state and federal statutes and regulations (45 CFR 156.80(d) (1)).
- b. Developed in compliance with the applicable Actuarial Standards of Practice.
- c. Reasonable in relation to the benefits provided and the population anticipated to be covered.
- d. Neither excessive nor deficient.
- e. Adjusted by only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) to generate plan level rates.
- 3. The percent of total premium that represents essential health benefits were calculated in accordance with actuarial standards of practice.
- 4. The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans, and in accordance with CFR 156.135(b)(2) as necessary. For any plan requiring an alternative method, the development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for benefits that deviate substantially from the parameters of the AVC and have a material impact on the actuarial value.
  - a. The analysis was
    - i. conducted by a member of the American Academy of Actuaries, and
    - ii. performed in accordance with generally accepted actuarial principles and methods.
- 5. Geographic area rating factors reflect only differences in the costs of delivery and not differences due to population morbidity.
- 6. All factor, benefit and other changes from the prior approved filing have been disclosed in the actuarial memorandum.
- 7. New plans are not considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106.

8. The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2021 Rate Filing Justification.

, ASA, MAAA

Actuarial Associate Capital BlueCross



# CAPITAL ADVANTAGE INSURANCE COMPANY, INC. RFJ Part II – Consumer Friendly Justification

Rate Increase Considerations: Changes being requested are based upon consideration of the factors that influence future period cost structures. The primary drivers of change in future costs are:

- Slowing migration to non-ACA group coverage options
- o Anticipated increase in facility and physician unit costs
- Anticipated changes in prescription drug unit costs
- o Continuing change in utilization such as
  - Intensity of medical services rendered
  - Changes in place of service (e.g. continued migration of inpatient stays to outpatient setting)
  - Further migration from brand prescription drugs to generic prescription drugs
  - Favorable impacts of value based benefits designs
- o Prescription drug patent expirations and new to market brand drugs
- Leveraging associated with unchanged cost share components such as deductible and copays
- o Inflation adjustment to administrative expenses

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82795PA0130001 82795PA0130001	Rating Area 7 Rating Area 7			

82795PA	A0130001 Rating Area 7	No Preference	56	1178.69
82795P	A0130001 Rating Area 7	No Preference	57	1231.23
	A0130001 Rating Area 7	No Preference	58	1287.31
	A0130001 Rating Area 7	No Preference	59	1315.10
	A0130001 Rating Area 7	No Preference	60	1371.18
	A0130001 Rating Area 7	No Preference	61	1419.68
	A0130001 Rating Area 7	No Preference	62	1451.51
	A0130001 Rating Area 7	No Preference	63	1491.42
	A0130001 Rating Area 7	No Preference	64 and over	1515.66
	A0130001 Rating Area 9	No Preference	0-14	365.02
	A0130001 Rating Area 9	No Preference	15	397.47
	A0130001 Rating Area 9	No Preference	16	409.88
	A0130001 Rating Area 9	No Preference	17	422.28
	A0130001 Rating Area 9	No Preference	18	435.64
82795P	A0130001 Rating Area 9	No Preference	19	449.00
82795P	A0130001 Rating Area 9	No Preference	20	462.84
82795PA	A0130001 Rating Area 9	No Preference	21	477.16
82795P	A0130001 Rating Area 9	No Preference	22	477.16
82795P	A0130001 Rating Area 9	No Preference	23	477.16
	A0130001 Rating Area 9	No Preference	24	477.16
	A0130001 Rating Area 9	No Preference	25	479.06
	A0130001 Rating Area 9	No Preference	26	488.61
	A0130001 Rating Area 9	No Preference	27	500.06
	A0130001 Rating Area 9	No Preference	28	518.67
	A0130001 Rating Area 9	No Preference	29	533.94
	A0130001 Rating Area 9	No Preference	30	541.57
	A0130001 Rating Area 9	No Preference	31	553.02
	A0130001 Rating Area 9	No Preference	32	564.48
	A0130001 Rating Area 9	No Preference	33	571.63
	A0130001 Rating Area 9	No Preference	34	579.27
	A0130001 Rating Area 9	No Preference	35	583.08
	A0130001 Rating Area 9	No Preference	36	586.90
	A0130001 Rating Area 9	No Preference	37	590.72
	A0130001 Rating Area 9	No Preference	38	594.54
82795P	A0130001 Rating Area 9	No Preference	39	602.17
82795P	A0130001 Rating Area 9	No Preference	40	609.81
82795PA	A0130001 Rating Area 9	No Preference	41	621.26
82795P	A0130001 Rating Area 9	No Preference	42	632.23
	A0130001 Rating Area 9	No Preference	43	647.50
	A0130001 Rating Area 9	No Preference	44	666.59
	A0130001 Rating Area 9	No Preference	45	689.01
	A0130001 Rating Area 9	No Preference	46	715.73
	A0130001 Rating Area 9	No Preference	47	745.79
	A0130001 Rating Area 9	No Preference	48	780.15
	A0130001 Rating Area 9	No Preference	49	814.03
	A0130001 Rating Area 9	No Preference	50	852.20
	A0130001 Rating Area 9	No Preference		
	•		51	889.90
	A0130001 Rating Area 9	No Preference	52	931.41
	A0130001 Rating Area 9	No Preference	53	973.40
	A0130001 Rating Area 9	No Preference	54	1018.73
	A0130001 Rating Area 9	No Preference	55	1064.06
	A0130001 Rating Area 9	No Preference	56	1113.20
	A0130001 Rating Area 9	No Preference	57	1162.83
	A0130001 Rating Area 9	No Preference	58	1215.79
82795P	A0130001 Rating Area 9	No Preference	59	1242.04
82795P	A0130001 Rating Area 9	No Preference	60	1295.00
	A0130001 Rating Area 9	No Preference	61	1340.81
82795P	A0130001 Rating Area 9	No Preference	62	1370.87
	A0130001 Rating Area 9	No Preference	63	1408.56
	A0130001 Rating Area 9	No Preference	64 and over	1431.47
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		state, select Age-Based Rates under Rating		e for every age band.
		bbacco User, you must give a rate for Tobacc Sheet button, or Ctrl + Shift + H. All plans m		
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Rate Effective Date*				
Rate Expiration Date* Rating Method*	9/30/2022 Age-Based Rates			
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Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
<b>Required:</b> 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
82795PA0130001		No Preference	0-14	363.57
82795PA0130001 82795PA0130001		No Preference No Preference	15 16	395.88 408.24
82795PA0130001		No Preference No Preference	17	420.60 433.90
82795PA0130001 82795PA0130001		No Preference	18	447.21
82795PA0130001 82795PA0130001		No Preference No Preference	20	460.99 475.25
82795PA0130001 82795PA0130001		No Preference	21 22	475.25
82795PA0130001	•	No Preference	23	475.25
82795PA0130001 82795PA0130001		No Preference No Preference	24	475.25 477.15
82795PA0130001	Rating Area 6	No Preference	26	486.66
82795PA0130001 82795PA0130001		No Preference No Preference	27	498.06 516.60
82795PA0130001	Rating Area 6	No Preference	29	531.80
82795PA0130001 82795PA0130001	•	No Preference No Preference	30	539.41 550.81
82795PA0130001	Rating Area 6	No Preference	32	562.22
82795PA0130001 82795PA0130001		No Preference No Preference	33	569.35 576.95
82795PA0130001	Rating Area 6	No Preference	35	580.76
82795PA0130001 82795PA0130001		No Preference No Preference	36 37	584.56 588.36
82795PA0130001	Rating Area 6	No Preference	38	592.16
82795PA0130001 82795PA0130001		No Preference No Preference	39	599.77 607.37
82795PA0130001 82795PA0130001	o o	No Preference	41	618.78
82795PA0130001		No Preference No Preference	42	629.71
82795PA0130001 82795PA0130001		No Preference	43	644.91 663.92
82795PA0130001		No Preference	45	686.26
82795PA0130001 82795PA0130001		No Preference  No Preference	46	712.88 742.82
82795PA0130001		No Preference	48	777.03
82795PA0130001 82795PA0130001		No Preference No Preference	50	810.78 848.80
82795PA0130001	•	No Preference	51	886.34
82795PA0130001 82795PA0130001		No Preference  No Preference	52 53	927.69 969.51
82795PA0130001		No Preference	54	1014.66
82795PA0130001 82795PA0130001		No Preference  No Preference	55 56	1059.81 1108.76
82795PA0130001	Rating Area 6	No Preference	57	1158.18
82795PA0130001 82795PA0130001		No Preference  No Preference	58 59	1210.94 1237.08
82795PA0130001	Rating Area 6	No Preference	60	1289.83
82795PA0130001 82795PA0130001	3	No Preference  No Preference	61	1335.45 1365.39
82795PA0130001	Rating Area 6	No Preference	63	1402.94
82795PA0130001 82795PA0130001		No Preference No Preference	64 and over 0-14	1425.74 392.65
82795PA0130001		No Preference	15	427.55
82795PA0130001 82795PA0130001		No Preference  No Preference	16 17	440.90 454.24
82795PA0130001	Rating Area 7	No Preference	18	468.62
82795PA0130001 82795PA0130001		No Preference No Preference	19	482.99 497.87
82795PA0130001	Rating Area 7	No Preference	21	513.27
82795PA0130001 82795PA0130001		No Preference No Preference	22 23	513.27 513.27
82795PA0130001	Rating Area 7	No Preference	24	513.27
82795PA0130001 82795PA0130001	•	No Preference No Preference	25 26	515.32 525.59
82795PA0130001	Rating Area 7	No Preference	26	537.91
82795PA0130001	Rating Area 7	No Preference	28	557.92
82795PA0130001 82795PA0130001		No Preference No Preference	29	574.35 582.56
82795PA0130001	Rating Area 7	No Preference	31	594.88
82795PA0130001 82795PA0130001		No Preference No Preference	32	607.20 614.90
82795PA0130001	Rating Area 7	No Preference	34	623.11
82795PA0130001 82795PA0130001	3	No Preference No Preference	35 36	627.22 631.32
82795PA0130001	Rating Area 7	No Preference	37	635.43
82795PA0130001 82795PA0130001		No Preference No Preference	38	639.53 647.75
82795PA0130001	Rating Area 7	No Preference	40	655.96
82795PA0130001	Rating Area 7	No Preference No Preference	41	668.28 680.08
82795PA0130001 82795PA0130001		No Preference No Preference	42	696.51
82795PA0130001	Rating Area 7	No Preference	44	717.04
82795PA0130001 82795PA0130001		No Preference No Preference	45 46	741.16 769.9
82795PA0130001	Rating Area 7	No Preference	47	802.24
82795PA0130001		No Preference  No Preference	48	839.20 875.64
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82795PA0130001 82795PA0130001	•	No Preference	50	
82795PA0130001 82795PA0130001	Rating Area 7	No Preference	51	957.25 1001.90
82795PA0130001	Rating Area 7 Rating Area 7 Rating Area 7			957.25

82795PA0130001 Rating Area 7	No Preference	56	1197.46
82795PA0130001 Rating Area 7	No Preference	57	1250.84
82795PA0130001 Rating Area 7	No Preference	58	1307.81
82795PA0130001 Rating Area 7	No Preference	59	1336.04
82795PA0130001 Rating Area 7	No Preference	60	1393.01
82795PA0130001 Rating Area 7	No Preference	61	1442.29
82795PA0130001 Rating Area 7	No Preference	62	1474.62
			1515.17
82795PA0130001 Rating Area 7	No Preference	63	
82795PA0130001 Rating Area 7	No Preference	64 and over	1539.80
82795PA0130001 Rating Area 9	No Preference	0-14	370.84
82795PA0130001 Rating Area 9	No Preference	15	403.80
82795PA0130001 Rating Area 9	No Preference	16	416.40
82795PA0130001 Rating Area 9	No Preference	17	429.01
82795PA0130001 Rating Area 9	No Preference	18	442.58
82795PA0130001 Rating Area 9	No Preference	19	456.15
82795PA0130001 Rating Area 9	No Preference	20	470.21
82795PA0130001 Rating Area 9	No Preference	21	484.76
82795PA0130001 Rating Area 9	No Preference	22	484.76
82795PA0130001 Rating Area 9	No Preference	23	484.76
82795PA0130001 Rating Area 9	No Preference	24	484.76
82795PA0130001 Rating Area 9	No Preference	25	486.69
82795PA0130001 Rating Area 9	No Preference	26	496.39
82795PA0130001 Rating Area 9	No Preference	27	508.02
82795PA0130001 Rating Area 9	No Preference	28	526.93
82795PA0130001 Rating Area 9	No Preference	29	542.44
82795PA0130001 Rating Area 9	No Preference	30	550.20
82795PA0130001 Rating Area 9	No Preference	31	561.83
82795PA0130001 Rating Area 9	No Preference	32	573.47
82795PA0130001 Rating Area 9	No Preference	33	580.74
82795PA0130001 Rating Area 9	No Preference	34	588.49
82795PA0130001 Rating Area 9	No Preference	35	592.37
82795PA0130001 Rating Area 9	No Preference	36	596.25
82795PA0130001 Rating Area 9	No Preference	37	600.13
82795PA0130001 Rating Area 9	No Preference	38	604.00
82795PA0130001 Rating Area 9	No Preference	39	611.76
82795PA0130001 Rating Area 9	No Preference	40	619.52
82795PA0130001 Rating Area 9	No Preference	41	631.15
82795PA0130001 Rating Area 9	No Preference	42	642.30
82795PA0130001 Rating Area 9	No Preference	43	657.81
82795PA0130001 Rating Area 9	No Preference	44	677.20
82795PA0130001 Rating Area 9	No Preference	45	699.99
82795PA0130001 Rating Area 9	No Preference	46	727.13
82795PA0130001 Rating Area 9	No Preference	47	757.67
82795PA0130001 Rating Area 9	No Preference	48	792.57
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82795PA0130001 Rating Area 9	No Preference	54	1034.95
82795PA0130001 Rating Area 9	No Preference	55	1081.00
82795PA0130001 Rating Area 9	No Preference	56	1130.93
82795PA0130001 Rating Area 9	No Preference	57	1181.35
82795PA0130001 Rating Area 9	No Preference	58	1235.16
82795PA0130001 Rating Area 9	No Preference	59	1261.82
82795PA0130001 Rating Area 9	No Preference	60	1315.63
82795PA0130001 Rating Area 9	No Preference	61	1362.16
82795PA0130001 Rating Area 9	No Preference	62	1392.70
82795PA0130001 Rating Area 9	No Preference	63	1431.00
82795PA0130001 Rating Area 9	No Preference	64 and over	1451.00
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Post   Company		If you are not in a community rating	state, select Age-Based Rates under Rating	g Method and provide an Individual Rate	e for every age band.
Rest   Rest   Process					
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### Part of Control   February					
Part	•				
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	Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
E299FA0130201   Falling Parts			Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a	Select the age of a subscriber eligible for the	
### SPECIFICATION   Refined Analog   16   No Preference   17   ### SPECIFICATION   Refined Analog   No Preference   17   ### SPECIFICATION   Refined Analog   No Preference   19   ### SPECIFI					
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82795PA0130001       Rating Area 7       No Preference       41         82795PA0130001       Rating Area 7       No Preference       42         82795PA0130001       Rating Area 7       No Preference       43         82795PA0130001       Rating Area 7       No Preference       44         82795PA0130001       Rating Area 7       No Preference       45         82795PA0130001       Rating Area 7       No Preference       46         82795PA0130001       Rating Area 7       No Preference       47					
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82795PA0130001 Rating Area 7       No Preference       44         82795PA0130001 Rating Area 7       No Preference       45         82795PA0130001 Rating Area 7       No Preference       46         82795PA0130001 Rating Area 7       No Preference       47					
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82795PA0130001 Rating Area 7 No Preference 47	82795PA0130001	Rating Area 7	No Preference	45	752.9
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	82795PA0130001	Rating Area 7	No Preference	48	852.5
82795PA0130001 Rating Area 7       No Preference       49         82795PA0130001 Rating Area 7       No Preference       50					
82795PA0130001 Rating Area 7 No Preference 51	82795PA0130001	Rating Area 7	No Preference	51	972.48
82795PA0130001 Rating Area 7       No Preference       52         82795PA0130001 Rating Area 7       No Preference       53		•			
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82795PA0130001 Rating Area 7	No Preference	56	1216.51
82795PA0130001 Rating Area 7	No Preference	57	1270.74
82795PA0130001 Rating Area 7	No Preference	58	1328.62
82795PA0130001 Rating Area 7	No Preference	59	1357.29
82795PA0130001 Rating Area 7	No Preference	60	1415.17
82795PA0130001 Rating Area 7	No Preference	61	1465.23
82795PA0130001 Rating Area 7	No Preference	62	1498.08
82795PA0130001 Rating Area 7	No Preference	63	1539.28
82795PA0130001 Rating Area 7	No Preference	64 and over	1564.29
82795PA0130001 Rating Area 9	No Preference	0-14	376.74
82795PA0130001 Rating Area 9	No Preference	15	410.22
82795PA0130001 Rating Area 9	No Preference	16	423.03
82795PA0130001 Rating Area 9		17	435.83
	No Preference		
82795PA0130001 Rating Area 9	No Preference	18	449.62
82795PA0130001 Rating Area 9	No Preference	19	463.41
82795PA0130001 Rating Area 9	No Preference	20	477.69
82795PA0130001 Rating Area 9	No Preference	21	492.47
82795PA0130001 Rating Area 9	No Preference	22	492.47
82795PA0130001 Rating Area 9	No Preference	23	492.47
82795PA0130001 Rating Area 9	No Preference	24	492.47
82795PA0130001 Rating Area 9	No Preference	25	494.44
82795PA0130001 Rating Area 9	No Preference	26	504.29
82795PA0130001 Rating Area 9	No Preference	27	516.10
82795PA0130001 Rating Area 9	No Preference	28	535.31
82795PA0130001 Rating Area 9	No Preference	29	551.07
82795PA0130001 Rating Area 9	No Preference	30	558.95
82795PA0130001 Rating Area 9	No Preference	31	570.77
82795PA0130001 Rating Area 9	No Preference	32	582.59
82795PA0130001 Rating Area 9	No Preference	33	589.97
82795PA0130001 Rating Area 9	No Preference	34	597.85
82795PA0130001 Rating Area 9	No Preference	35	601.79
82795PA0130001 Rating Area 9	No Preference	36	605.73
82795PA0130001 Rating Area 9	No Preference	37	609.67
82795PA0130001 Rating Area 9	No Preference	38	613.61
82795PA0130001 Rating Area 9	No Preference	39	621.49
82795PA0130001 Rating Area 9	No Preference	40	629.37
82795PA0130001 Rating Area 9	No Preference	41	641.19
82795PA0130001 Rating Area 9	No Preference	42	652.52
82795PA0130001 Rating Area 9	No Preference	43	668.28
82795PA0130001 Rating Area 9	No Preference	44	687.98
82795PA0130001 Rating Area 9	No Preference	45	711.12
82795PA0130001 Rating Area 9	No Preference	46	738.70
82795PA0130001 Rating Area 9	No Preference	40	769.72
82795PA0130001 Rating Area 9	No Preference		
		48	805.18 840.15
82795PA0130001 Rating Area 9	No Preference	49	
82795PA0130001 Rating Area 9	No Preference	50	879.54
82795PA0130001 Rating Area 9	No Preference	51	918.45
82795PA0130001 Rating Area 9	No Preference	52	961.29
82795PA0130001 Rating Area 9	No Preference	53	1004.63
82795PA0130001 Rating Area 9	No Preference	54	1051.42
82795PA0130001 Rating Area 9	No Preference	55	1098.20
82795PA0130001 Rating Area 9	No Preference	56	1148.92
82795PA0130001 Rating Area 9	No Preference	57	1200.14
82795PA0130001 Rating Area 9	No Preference	58	1254.80
82795PA0130001 Rating Area 9	No Preference	59	1281.89
82795PA0130001 Rating Area 9	No Preference	60	1336.55
82795PA0130001 Rating Area 9	No Preference	61	1383.83
82795PA0130001 Rating Area 9	No Preference	62	1414.86
82795PA0130001 Rating Area 9	No Preference	63	1453.76
82795PA0130001 Rating Area 9	No Preference	64 and over	1477.40

Exhibit A\_BenSummary

# Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022 Benefit Summary

# **SMALL GROUP 1-50 PORTFOLIO**

Changes	Plan Name	H	IOS ID	Deductible	Coinsurance	Out-of-Pocket	PCP	Specialist	Emergency	Urgent	IP Hospital	Hi-Tech Imaging	Lab	OP Surgery	Small Group: Rx \$0	Small Group: Rx \$250 (brand only deductible)
				(2x Family)		Maximum			Room	Care	per day,		Ind   Hos	ASC   ACH	Individual: Rx	Individual: N/A
											maximum of 5 days					
		Small Group: Rx \$0	Small Group: Rx \$250													
		Individual: Rx	(brand only deductible)													
			Individual: N/A	In-Network	In-Network	In-Network	In-Network	In-Network	In-Network	In-Network	In-Network	In-Network	In-Network	In-Network		
											GOLD PRODUCTS					
Changes Gold PPO 0	)/0/20	82795	PA0130001	\$0	0%	\$8,550	\$20	\$40	\$300	\$75	\$500	\$250	20 40	300 300	Rx Ded: \$500, Rx Gen - Ded Appli	lies? N, Retail: 4/15/45/70, Mail: 8/30/90/140

<sup>1</sup> Drug copays listed are Preferred Generic/Non-Preferred Generic/Preferred Brand/Non-Preferred Brand

<sup>2</sup> Speciality drug coverage = 20% up to \$250 per fill/20% up to \$350 per fill/20% up to \$450 per fill

<sup>3</sup> Tiered Lab benefits. Independent labs | Hospital based labs

<sup>4</sup> D = Deductible D/\$ = Deductible applies first then a copay

<sup>5</sup> Plan naming convention = Metal level, Plan type, Deductible/Coinsurance/Office Visit Copay - HRA funding

		A	V	Prici	ng AV	Meta	al Level	HRA	Amount	Deduct	ible: Tier 1	Deducti	ble: Tier 2	Coinsura	nce: Tier 1	Coinsura	nce: Tier 2	MC	OOP	PCP:	Tier 1	PCP: 1	Tier 2
Line On/Off Exchange New/Existing HIOS Med Description	Rx Description	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022
1 Off-Exchange Existing 82795PA0130001 Gold PPO 0/0/20	Rx 500	80.3%	80.3%	87 4%	89.0%	Gold	Gold	0	0	0	0	0	0	0%	0%	0%	0%	8 550	8 550	20	20	20	20

			SPC:	Tier 1	SPC	: Tier 2		ER	l	IC	IP Hosp Co	pay Per Day	Hi-Tech	Imaging	Low End	Imaging	Lab: Ti	er 1	Lab: T	ier 2	OP Surg:	Tier 1
Line On/Off Exchange New/Existing HIOS	Med Description	Rx Description	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022
1 Off-Exchange Existing 82795PA0130001 Gold PPO 0/0/2	20	Rx 500	40	40	40	40	300	300	75	75	500	500	250	250	0	0	20	20	40	40	300	300

		OP St	urg: Tier 2	Rx	Ded	Rx Gen - De	ed Applies?	Rx Ge	n Pref	Rx Gen N	lon-Pref	Rx Bra	nd Pref	Rx Brand I	Non-Pref	Rx Specialt	y Coin Tier 1	Rx Specialt	y Max Tier 1	Rx Specialty	/ Coin Tier 2	Rx Specialty	/ Max Tier 2
Line On/Off Exchange New/Existing HIOS Med	d Description Rx Description	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022
1 Off-Eychange Existing 82795PA0130001 Gold PPO 0/0/20	Ry 500	300	300	500	500	N	N	$\Delta$	$\boldsymbol{\it A}$	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350

		Rx Gen P	ref Coins	Rx Gen Nor	n-Pref Coins	Rx Brand	Pref Coin	Rx Brand No	on-Pref Coins	Rx Gen Pref	f Mail Copay	Rx Gen Non-P	ef Mail Copay	Rx Brand Pre	ef Mail Copay	Rx Brand Non-P	ref Mail Copay
Line On/Off Exchange New/Existing HIOS Med Description	Rx Description	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022
1 Off-Exchange Existing 82795PA0130001 Gold PPO 0/0/20	Rx 500	0%	0%	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140

IP OP Professional	Type of Service
Inpatient Inpatient	IP - CABG IP - Cesarean Maternity Delivery
Inpatient	IP - Major Joint Procedures of Lower Extremity
Inpatient	IP - Maternity Non-delivery
Inpatient Inpatient	IP - Medical IP - Neonatal
Inpatient	IP - Newborn
Inpatient Inpatient	IP - Normal maternity delivery IP - Other Cardiovascular Procedures
Inpatient	IP - Other Surgical
Inpatient	IP - Psychiatric
Inpatient Inpatient	IP - Substance Abuse IP - Ungroupable
Outpatient	OP - Blood
Outpatient Outpatient	OP - Cardiac Rehab OP - Cardiovascular
Outpatient	OP - Dialysis
Outpatient	OP - Emergency Room
Outpatient Outpatient	OP - Maternity Non-delivery Care OP - Observation Room
Outpatient	OP - Other OP Services
Outpatient	OP - PT/OT/ST
Outpatient Outpatient	OP - Pathology/Lab OP - Pharmacy
Outpatient	OP - Psychiatric
Outpatient Outpatient	OP - Radiology - CT/MRI/PET OP - Radiology - General
Outpatient	OP - Substance Abuse
Outpatient	OP - Surgery
Outpatient Professional	OP - Unmapped ADDL Benefits Other
Professional	Hearing Aids
Professional Professional	IP Visits - IP Psychiatric IP Visits - IP Substance Abuse
Professional	IP Visits - Medical
Professional	Inpatient Surgery - Primary Surgeon
Professional Professional	Inpatient Surgery - Anesthesia Inpatient Surgery - Assistant Surgeon
Professional	Maternity - Cesarean Deliveries
Professional Professional	Maternity - Non Deliveries  Maternity - Normal Deliveries
Professional	Office Administered Drugs
Professional	Office/Misc - Allergy Immunotherapy
Professional Professional	Office/Misc - Allergy Testing Office/Misc - Misc. Medical
Professional	Office/Misc - Office/Home Visits
Professional	Office/Misc - Urgent Care
Professional Professional	Other Physician - Cardiovascular Other Physician - Chiropractor
Professional	Other Physician - Consults
Professional Professional	Other Physician - Emergency Room Visits Other Physician - Physicial Therapy
Professional	Pathology/Lab - IP
Professional	Preventive care - Hearing/Speech Exams
Professional Professional	Preventive care - Immunization Preventive care - Other
Professional	Preventive care - Physical Exams
Professional Professional	Preventive care - Well Baby Exams
Professional	Radiology - IP Unmapped
Professional	ADDL Benefits Other
Professional Professional	Hearing Aids IP Visits - Medical
Professional	Independent Lab
Professional	Maternity - Cesarean Deliveries
Professional Professional	Maternity - Non Deliveries  Maternity - Normal Deliveries
Professional	OP Visits - OP Psychiatric
Professional Professional	OP Visits - OP Substance Abuse Office Administered Drugs
Professional	Office/Misc - Allergy Immunotherapy
Professional	Office/Misc - Allergy Testing
Professional Professional	Office/Misc - Misc. Medical Office/Misc - Office/Home Visits
Professional	Office/Misc - Urgent Care
Professional Professional	Other Physician - Cardiovascular
Professional Professional	Other Physician - Chiropractor Other Physician - Consults
Professional	Other Physician - Emergency Room Visits
Professional Professional	Other Physician - Physicial Therapy Outpatient Surgery - Anesthesia
Professional	Outpatient Surgery - Office
Professional	Outpatient Surgery - Outpatient Facility
Professional Professional	Pathology/Lab - OP Pathology/Lab - Office
Professional	Preventive care - Hearing/Speech Exams
Professional Professional	Preventive care - Immunization Preventive care - Other
Professional Professional	Preventive care - Other  Preventive care - Physical Exams
Professional	Preventive care - Well Baby Exams
Professional Professional	Radiology - OP - CT/MRI/PET Radiology - OP - General
Professional	Radiology - Office - CT/MRI/PET
Professional	Radiology - Office - General
Professional Other Medical	Unmapped Unmapped
Other Medical	OP - Ambulance
Other Medical Other Medical	OP - DME OP - Home Health/PDN
Other Medical	OP - Home Health/PDN OP - Medical Surgical Supplies
Other Medical	Dental
Other Medical Other Medical	Other - Ambulance Other - DME
Other Medical	Other - Glassess/Contacts
Other Medical	Other - PDN/Home Health
Other Medical Other Medical	Other - Prosthetics Preventive care - Vision Exams
Other Medical	Dental
Other Medical Other Medical	Other - Ambulance Other - DME
Other Medical Other Medical	Other - DME Other - Glassess/Contacts
Other Medical	Other - PDN/Home Health
Other Medical Other Medical	Other - Prosthetics Preventive care - Vision Exams
<del> </del>	

# Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022 Benefit Mix Changes

Benefit Mix Calculation	
	Manual Cost PMPM
Average in Experience Period	339.58
Average in Rating Period	344.64
Benefit Mix Adjustment	1.015

<b>BEP Manual Cost Calc</b>	_	369,829
HIOS 14 Digit	Manual Cost PMPM	BEP MM
45127PA0130001	329.28	96
45127PA0130001 45127PA0130002	339.51	90 196
45127PA0130002 45127PA0130003	285.19	80
45127PA0130003	297.07	101
45127PA0130004 45127PA0130005	329.28	0
45127PA0130005 45127PA0130006		
45127PA0130006 45127PA0130007	339.51	0
	285.19	0
45127PA0130008	297.07	0
45127PA0010054	396.82	11,712
45127PA0010055	404.51	23,929
45127PA0010057	387.71	6,932
45127PA0010058	395.69	11,070
45127PA0010069	310.59	652
45127PA0010070	319.72	2,412
45127PA0010084	353.35	11,538
45127PA0010085	362.65	32,604
45127PA0010089	332.72	19,544
45127PA0010090	342.84	65,799
45127PA0010116	367.13	9,629
45127PA0010117	375.89	23,922
45127PA0010124	312.69	13,868
45127PA0010131	298.49	12,725
45127PA0010132	309.97	20,892
45127PA0010135	243.29	10,256
45127PA0010143	310.59	10,911
45127PA0010144	319.72	31,699
45127PA0010161	347.48	5,246
45127PA0010170	290.97	11,984
45127PA0010184	284.28	5,776
45127PA0010185	296.26	8,608
45127PA0010186	279.20	2,907
45127PA0010187	291.37	3,657
45127PA0010188	333.35	3
45127PA0010189	343.46	697
45127PA0010190	318.33	539
45127PA0010191	329.10	452
45127PA0010192	311.49	406
45127PA0010193	317.72	207
45127PA0010194	323.66	2,433
45127PA0010195	334.15	4,485
45127PA0010196	346.08	0
45127PA0010197	311.63	0
45127PA0010197	322.53	0
45127PA0010198 45127PA0010199	277.28	0
45127PA0010199 45127PA0010200	362.65	0
45127PA0010200 45127PA0010201		0
45127PA0010201 45127PA0010202	312.69	0
	309.97 218.46	
53789PA0090004		888
82795PA0130001	344.64	974

Exhibit D\_BenMix

344.64	1,509
	Proj Member
<u>Total</u>	<u>Dist</u>
344.64	1,509
	<u>Total</u>

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# Capital Advantage Insurance Company Small Group Rates

### **Effective 1/1/2022**

## Trend

Trend by Service Category
Year 2

		<u>Year 1</u>			<u>Year 2</u>					
<u>Category</u>	Cost	<u>Util</u>	Induced Demand	Cost	<u>Util</u>	Induced Demand	Total Year 1	Total Year 2	Weights	Total Weights
Inpatient Hospital	5.40%	0.00%	0.00%	5.20%	0.00%	0.0%	5.4%	5.2%	23%	18%
Outpatient Hospital	5.60%	0.00%	0.00%	5.30%	0.00%	0.0%	5.6%	5.3%	46%	36%
Professional	4.90%	0.00%	0.00%	3.40%	0.00%	0.0%	4.9%	3.4%	28%	22%
Other Medical	5.60%	0.00%	0.00%	5.30%	0.00%	0.0%	5.6%	5.3%	3%	3%
Capitation	3.00%	0.00%	0.00%	3.00%	0.00%	0.0%	3.0%	3.0%	0%	0%
Prescription Drug	10.10%	1.30%	0.00%	10.40%	1.50%	0.0%	11.5%	12.1%	100%	21%
Dental & Vision	1.00%	1.00%	0.00%	1.00%	1.00%	0.0%	2.0%	2.0%	100%	100%

Aggregate Pricing Trend Year 1					
Total	6.7%				
Medical	5.4%				
Drug	11.5%				
Agg Med + Rx Trend	6.7%				
Dental and Vision	2.0%				

Aggregate Pricing Trend Year 2					
Total 6.3%					
Medical	4.7%				
Drug	12.1%				
Agg Med + Rx Trend	6.3%				
Dental and Vision	2.0%				

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Year 1 Raw Trends*	2 Raw Trends*
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URRT Categories	Cost	<u>Utilization</u>	Induced Demand	<u>Composite</u>	<u>Cost</u>	<u>Utilization</u>	Induced Demand	<u>Composite</u>
Inpatient Hospital	5.1%	0.0%	0.0%	5.1%	4.9%	0.0%	0.0%	4.9%
Outpatient Hospital	5.3%	0.0%	0.0%	5.3%	5.0%	0.0%	0.0%	5.0%
Professional	4.6%	0.0%	0.0%	4.6%	3.1%	0.0%	0.0%	3.1%
Other Medical	5.3%	0.0%	0.0%	5.3%	5.0%	0.0%	0.0%	5.0%
Capitation	3.0%	0.0%	0.0%	3.0%	3.0%	0.0%	0.0%	3.0%
Prescription Drugs	9.8%	1.3%	0.0%	11.1%	10.1%	1.5%	0.0%	11.8%
Dental & Vision	1.0%	1.0%	0.0%	2.0%	1.0%	1.0%	0.0%	2.0%

<sup>\*</sup>From Hospital and Physician Trend Models

Adjustments to Pricing Trend

	<u>Medical</u>		<u>Drug</u>
Intensity	0.0%	Contracting	0.0%
Leveraging	0.309	6 Leveraging	0.30%
Demographics	0.0%	Demographics	0.0%
Buy-Downs	0.0%	Buy-Downs	0.0%
Other	0.0%	Pipeline	0.0%
Total	0.309	6 Total	0.30%

# Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022

### **Credibility Manual Development for URRT**

16

**Experience Period Member Months** 

369,829

Section II: Projections		1	ear 1 Trend	Ye	ear 2 Trend					_	
							Trended EHB				
	Experience Perio	od Index Rate					Allowed Claims				
Benefit Category	PMPM		Cost	Utilization	Cost	Utilization	PMPM	Incurred	Allowed		PMPM
Inpatient Hospital	\$	107.01	1.054	1.000	1.052	1.000	118.65 \$	38,872,403	\$ 39,575,610	\$	107.01
Outpatient Hospital	\$	218.44	1.056	1.000	1.053	1.000	242.90 \$	68,020,496	\$ 80,786,689	\$	218.44
Professional	\$	131.74	1.049	1.000	1.034	1.000	142.89 \$	37,686,510	\$ 48,721,863	\$	131.74
Other Medical	\$	15.81	1.056	1.000	1.053	1.000	17.58 \$	4,879,674	\$ 5,848,460	\$	15.81
Capitation	\$	0.03	1.030	1.000	1.030	1.000	0.03 \$	11,022	\$ 11,022	\$	0.03
Prescription Drug	\$	127.57	1.101	1.013	1.104	1.015	159.43 \$	41,273,688	\$ 47,179,065	\$	127.57
Total	\$	600.60					681.49			\$	600.60

<sup>\*</sup> All data experience is from CAAC, and other CBC subsidiaries - Capital Advantage Insurance Company (CAIC), and Keystone Health Plan Central (KHPC)

Morbidity 1.170
Other
Change in Demographics 1.0000
Change in Network 1.0000
Change in Benefits 1.0000
Change in Other 1.0000
Projected Index Rate 797.10

# Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022 Paid to Allowed Ratio Development

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 Medical Rate Development

 Base Experience Period:
 1/1/2020-12/31/2020

 Data as of
 2/28/2021

 Rating Period:
 1/1/2022 - 12/31/2022

 Trend Months:
 24

5.4%

0.890

Drug Rate Development						
Base Experience Period:	1/1/2020-12/31/2020					
Data as of	2/28/2021					
Rating Period:	1/1/2022 - 12/31/2022					
Trend Months:	24					
Trend:	11.5%					

Pediatric Dental Rate Development						
Base Experience Period:	1/1/2020-12/31/2020					
Data as of	2/28/2021					
Rating Period:	1/1/2022 - 12/31/2022					
Trend Months:	24					
Trend: 2.0%						

Pediatric Vision Rate Dev	velopment
Base Experience Period:	1/1/2020-12/31/2020
Data as of	2/28/2021
Rating Period:	1/1/2022 - 12/31/2022
Trend Months:	24
Trend:	2.0%

1	Medical Paid and Incurred Claims + ACA Payments	146,225,490
2	Completion Factor	0.98
3	BEP Completed Claims (1) / (2)	148,840,757
4	BEP Member Months	369,829
5	BEP Completed Claim PMPM (3) / (4)	402.46
6	Trend Factor	1.11
7	Trended Claim PMPM (5) x (6)	446.76
8	Benefit Change Factor	1.015
9	Morbidity	1.170
10	Capitation	11,022
11	Capitation PMPM	0.03
12	Other Adjustment	1.000
13	Total Benefit Adjusted Claim PMPM [(7) x (8) x (9) x (10) + (11)] x (12)	530.36
		Expected Claim PMPM in

Trend:

	1101101	11.0 / 0
1	BEP Paid and Incurred Claims	50,685,447
2	Completion Factor	1.000
3	BEP Completed Claims (1) / (2)	50,687,054
4	BEP Member Months	369,829
5	BEP Completed Claim PMPM (3) / (4)	137.06
6	Trend Factor	1.24
7	Trended Claim PMPM (5) x (6)	170.49
8	Benefit Change Factor	1.015
9	Morbidity	1.170
10	Rx Rebates	9,413,366
11	Rx Rebates PMPM	25.45
12	Other Adjustment	1.000
13	Total Benefit Adjusted Claim PMPM [(7) x (8) x (9) x (10) + (11)] x (12)	176.93

BEP Paid and Incurred Claims	523,366
Completion Factor	0.921
BEP Completed Claims (1) / (2)	568,480
BEP Member Months	369,829
BEP Completed Claim PMPM (3) / (4)	1.54
Trend Factor	1.04
Trended Claim PMPM (5) x (6)	1.60
Benefit Change Factor	1.00
Morbidity	1.170
Other Adjustment	1.000
Total Benefit Adjusted Claim PMPM [(7) x (8) x (9) x (10) + (11)] x (12)	1.87

BEP Paid and Incurred Claims	49,373
Completion Factor	0.991
BEP Completed Claims (1) / (2)	49,846
BEP Member Months	369,829
BEP Completed Claim PMPM (3) / (4)	0.13
Trend Factor	1.04
Trended Claim PMPM (5) x (6)	0.14
Benefit Change Factor	1.00
Morbidity	1.170
Other Adjustment	1.000
Total Benefit Adjusted Claim PMPM [(7) x (8) x (9) x (10) + (11)] x (12)	0.16

	Expected Claim PMPM in
	Rating Period
Medical	530.36
Drug	176.93
Pediatric Dental	1.87
Pediatric Vision	0.16
Expected Distribution of Embedded Dental Benefit	100%
Total Expected Incurred in Rating Period	709.32
Total Expected Incurred in Rating Period Net RA	632.24

Projected Allowed

Paid to Allowed Ratio

\*Other Adjustment is for Rx Contracting

## Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022

### Retention

	$\underline{\text{Medical} + \text{Rx}}$	<u>Dental</u>	<u>Vision</u>
Reinsurance Contribution	\$0.00	\$0.00	\$0.00
Risk Adjustment Fee	\$0.25	\$0.00	\$0.00
Admin PMPM	\$48.49	\$0.60	\$0.09
Broker PMPM	\$19.79	\$0.00	\$0.00
Placeholder 1	\$0.00	\$0.00	\$0.00
Placeholder 2	\$0.00	\$0.00	\$0.00
Placeholder 3	\$0.00	\$0.00	\$0.00
Quality Improvement	0.4%	0.4%	0.4%
Contingency	2.0%	2.0%	2.0%
Patient-Centered Outcomes Research Trust Fund:	\$0.20	\$0.00	\$0.00
Insurer Tax	0.0%	0.0%	0.0%
Exchange Fee	\$0.00	\$0.00	\$0.00
Federal Income Tax	0.5%	0.5%	0.5%
Premium Tax	2.0%	0.0%	0.0%

<u>Total</u>	% of Premium
\$0.00	0.0%
\$0.25	0.0%
\$49.18	6.7%
\$19.79	2.7%
\$0.00	0.0%
\$0.00	0.0%
\$0.00	0.0%
0.4%	0.4%
2.0%	2.0%
\$0.20	0.0%
0.0%	0.0%
\$0.00	0.0%
0.5%	0.5%
2.0%	2.0%

#### Insurer Tax and Admin Fee Calc

Applied HIF to All Quarters

0.00%

Quarter	% of Enrollees	HIF		20	022 assessmen	2023 assessment
1	34%	0.00%		0	0.00%	0.00%
2	11%	0.00%		3	0.00%	0.00%
3	14%	0.00%		6	0.00%	0.00%
4	41%	0.00%		9	0.00%	0.00%
				_		
	<u>Admin</u>	<u>Profit</u>	<u>Taxes</u>			
	9.7%	2.0%	2.6%			
Claims	6.7%					
Broker	2.7%					
Quality Improvement	0.4%		18			

THOG	025050 1 0120001
HIOS	82795PA0130001
Med Plan	Gold PPO 0/0/20
Rx Plan	Rx 500
Deductible	0
Expected Claim Cost	632.24
Expected Premium PMPM *	\$738.05
Allowed Adjustments to Premium for MLR	
Reinsurance Contribution	0.00
Patient-Centered Outcomes Research Trust Fund:	0.20
Risk Adjustment Fee	0.25
Premium Tax	14.76
Insurer Tax	0.00
Exchange Fee	0.00
Quality Improvement	2.95
Federal Income Tax**	3.10
MLR Adjusted Claims	\$635.19
MLR Adjusted Premium	\$719.74
Expected Member Distribution	100.0%

Unadjusted Premium	\$738.05
Expected MLR Adjusted Claims	\$635.19
Expected MLR Adjusted Premium	\$719.74

WILK 00.570
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<sup>\*</sup> From Exhibit L

7/12/2021

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<sup>\*\*21%</sup> of profit or contingency (assumed to be 2%)

# Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022 Projected Index Rate

Projected Index Rate	\$797.12				
Effective Date	Total Index Rate	<u>Trend</u>	<u>Distribution of Members</u>	Projected Allowed	Market Adjusted Index Rate
January - March (Index 1)	\$797.12		34%	\$797.12	\$710.50
April - June (Index 2)	\$810.09	6.7%	11%	\$809.81	\$723.20
July - September (Index 3)	\$823.27	6.7%	14%	\$822.71	\$736.09
October - December (Index 4)	\$836.67	6.7%	41%	\$835.81	\$749.19
Average for Projection Period	\$818.49			\$818.03	\$731.41

<sup>\*</sup> From URRT and Exhibit B

20 7/12/2021

# Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022 Market Adjusted Index Rate

Q1 Index Rate	797.12
Paid to Allowed	0.89
Q1 Projected Claims	709.32
Net Projected ACA Reinsurace Recoveries	0.00
Net Projected Risk Adjustments PMPM	77.08
Exchange User Fee Adjustment	0.00
Q1 Market-Adjusted Projected Paid EHB Claims PMPM	632.24
Q1 Market Adjusted Index Rate	710.50

**Development of Exchange User Fee** 

Average SHOP Premium	\$0.00
Average Exchange Fee	\$0.00
Percentage of Membership on SHOP	0%
Exchange Fee to Add to Market Index Rate	\$0.00

#### **Development of Risk Adjustment Projection**

Projected 2022 Risk Adjustment Transfer

\$75,073
974
\$77.08

21

7/12/2021

\$77.08

HIOS Med Plan Name:	82795PA0130001 Gold PPO 0/0/20
Level of Coverage	Gold
Rate Development by Benefit Option	Off Exchange
Adjustment for Induced Demand	1.000
Adjustment for Network	1.000

Level of Coverage	Gold		
HIOS	82795PA0130001		
Med Plan Name:	Gold PPO 0/0/20		
Rx:	Rx 500		
Network:	PPO		
HRA	N		
Q1 Market Adjusted Index Rate	710.50		
AV and Cost Sharing Adjustment	0.89		
Network	1.000		
Induced Demand	1.000		
Total Projected Claims PMPM + Market Level Adjustments:	632.24		
Retention			
Admin PMPM	\$49.18		
Broker PMPM	\$19.79		
Risk Adjustment User Fee	\$0.25		
PCORTF	\$0.20		
Placeholder1	\$0.00		
Placeholder2	\$0.00		
Premium Tax	2.0%		
Federal Income Tax	0.5%		
Insurer Tax	0.0%		
Contingency	2.0%		
Quality Improvement	0.4%		
Premium Neutrality	1.60		
Total Premium Single Rate:	\$460.46		
Plan Adjusted Index Rates	\$738.05		
Expected Member Distribution	100.0%		
	\$68.97		

ExhibitL\_RateDev

| Calibrate | Cali

7/12/2021

Exhibit M\_PlanAdjInd

# Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022

# **Calibration**

Expected Average Age Factor:	1.571
List-Billed Adjustment for Max 3 Children	1.007
Adjusted Average Age Factor	1.560
Expected Average Region Factor:	1.03
Expected Average Tobacco Factor	1.00
Cumulative Rating Factors (Premium Neutrality)	1 603

	Age Factors	
<u>Age</u>	<b>Distribution of Poplulation</b>	Age Factor
0-14	12.8%	0.7650
15	1.0%	0.8330
16	1.0%	0.8590
17	1.1%	0.8850
18	1.0%	0.9130
19	1.1%	0.9410
20	1.1%	0.9700
21	1.4%	1.0000
22	1.4%	1.0000
23	1.3%	1.0000
24	1.4%	1.0000
25	1.6%	1.0040
26	1.6%	1.0240
27	1.6%	1.0480
28	1.5%	1.0870
29	1.7%	1.1190
30	1.8%	1.1350
31	1.6%	1.1590
32	1.7%	1.1830
33	1.7%	1.1980
34	1.6%	1.2140
35	1.6%	1.2220
36	1.7%	1.2300
37	1.7%	1.2380
38	1.7%	1.2460
39	1.8%	1.2620
40	1.7%	1.2780
41	1.8%	1.3020
42	1.6%	1.3250
43	1.6%	1.3570
44	1.8%	1.3970
45	1.5%	1.4440
46	1.7%	1.5000
47	1.7%	1.5630
48	1.8%	1.6350
49	1.8%	1.7060
50	2.0%	1.7860
51	2.1%	1.8650
52	2.1%	1.9520
53	2.1%	2.0400
54	2.2%	2.1350
55	2.2%	2.2300
56	2.3%	2.3330
57	2.2%	2.4370
58	2.2%	2.5480
59	2.3%	2.6030
60	2.3%	2.7140
61	2.2%	2.8100
62	2.1%	2.8730
63	2.1%	2.9520
64+	3.5%	3.0000

	<b>Region Factors</b>	
Region	<b>Distribution of Population</b>	Factor
6	49.6%	1.0000
7	29.2%	1.0800
9	21.2%	1.0200

7/12/2021

24

Exhibit N\_Calibration

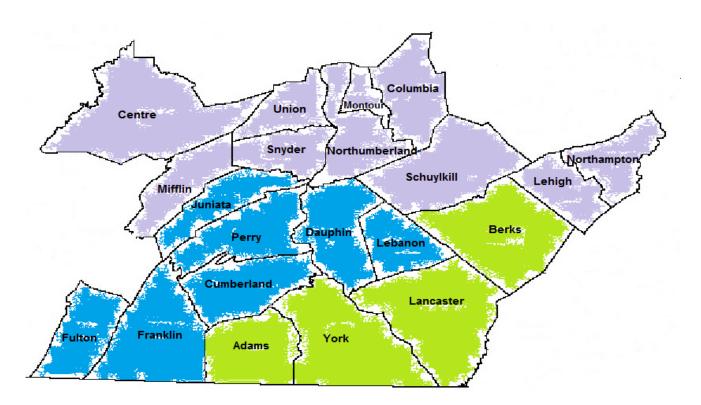
#### Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022 Rating Factors

**Age Factors** 

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

25

# Region



Region Property of the Region Region	<u>Factor</u>
6	1.0000
7	1.0800
9	1.0200

<u>Network</u>	<u>Factor</u>
PPO	1.00

Base Rates

| Base Rates | Base Rates | From the Control of the Co

Exhibit P\_QtlyRates

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# Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022 Morbidity Factor Calculation

# From Ib Manual Data Table 2

Earned Premium	ultimate Incurred Claims		Member Months Total Prescription  Drug Rebates*		Risk Adjustment
\$ 243,160,961.24	\$ 200,146,137.31	369,829	\$ (9,413,365.99)	\$ 11,022.05	\$ 9,277,790.00

Premium Incurred Clm PMPM PMPM		RA PMPM		Loss Ratio*	
\$ 657.50	\$	515.76	\$	25.09	75.6%

## 2019 BEP from 2021 Annual Filing

Earned Premium	Ultimate Incurred Claims	Member Months	Total Prescription Drug Rebates*	Total EHB Capitation	Risk Adjustment
\$ 315,438,722.74	\$ 269,696,701.86	506,640	\$ (14,153,272.73)	\$ 11,448.50	\$ 16,258,847.00

		urred Clm PMPM	R/	N PMPM	Loss Ratio*	
\$	622.61	\$	504.41	\$	32.09	77.0%

	BEP Start	BEP End	BEP MidPoint		
Annual Filing BEP (pre-COVID)	1/1/2019	12/31/2019	7/2/2019		
New BEP (w COVID)	1/1/2020	12/31/2020	7/1/2020		
	Trend Months				
	Total Claims Trend				
	Rx Trend for Rebates		12.1%		
	Capitation Trend		3%		

### 2019 BEP Trended to New BEP

	Earned Premium	Ultimate Incurred	Member Months	Total Prescription	Total EHB	Pick Adjustment
	Earned Premium	Claims	wiember wionths	Drug Rebates*	Capitation	Risk Adjustment
\$	333,113,599.54	\$ 286,688,433.4	506,640	\$ (15,859,591.29)	\$ 11,705.14	\$ 16,258,847.00

Premium PMPM		ncurred Clm PMPM		PMPM	Loss Ratio*	
\$	657.50	\$ 534.58	\$	32.09	77.5%	

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<sup>\*</sup>Loss Ratio net of risk adjustment

				Morbidity Factor
Change in Incurred Claims	Change in LR	COVID Morbidity	Addl Factor*	Applied
3.6%	2.6%	1.026	1.140	1.170

<sup>\*</sup>Note that this additional factor varies with projected risk adjustment transfer amount. This factor assumes CAIC membership is riskier than CAAC (majority of the BEP), and risk adjustment transfer will be higher than CAAC

<sup>\*</sup>Loss Ratio net of risk adjustment

# Capital Advantage Insurance Company Small Group Rates Effective 1/1/2022 MLR Exhibit

	MLR	Member	Months	
Calendar Year	Actual	Pricing	Actual	Pricing
2017	71.74%	84.00%	1,269	660
2018	39.71%	80.24%	1,268	1,008
2019	57.86%	83.86%	918	1,138

28 7/12/2021



#### June 25, 2021

Ms. Tracie Gray, Director Bureau of Life, Accident and Health Insurance Office of Insurance Product Regulation and Administration Commonwealth of Pennsylvania Insurance Department 1311 Strawberry Square Harrisburg, PA 17120

Re: Capital Advantage Insurance Company

**Small Group Rates Filing No 21-62** 

TOI Code: H15G Group Health - Hospital/Surgical/Medical Expense

Sub-TOI Code: H15G.003 Small Group Only

Filing Type: Rate

Dear Ms. Gray:

CAIC received an objection letter from the Department dated June 10, 2021. CAIC is providing the following in response to the objection letter:

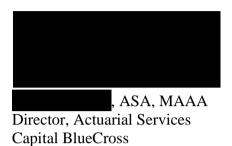
- Q&A written response
- O&A exhibits
- Trend leveraging calculation workbook
- Revised rate development workbook
- Revised PAAM exhibits
- Revised URRT
- Revised rates (PA and Federal templates)
- Revised memos Actuarial, Cover Letter, Rate Change Summary

All changes are due to PID requests/questions and have been disclosed in the Q&A written response. Additionally, below is a summary of changes:

- Question 1: Correction to Binder number
- Question 2: Correction to Rate/Rule Schedule tab: Last Filing
- Question 11: Correction to Table 6, Retention, Administrative Expenses, General and Claims
- Question 12: Correction to Table 6, Federal Income Tax
- Question 13: Correction to Table 12, include tobacco factors of 1.0 for ages 18-20

I	f you have any questions regarding this filing, please call me at (or via email a	at
	or at	
(	). Thank you for your assistance in this matter.	

#### Sincerely,



#### Enclosures

cc: , FSA, MAAA, Senior Director, Actuarial Services , ASA, MAAA, Vice President and Chief Actuary, Actuarial Services , Corporate Counsel

#### CAPITAL ADVANTAGE INSURANCE COMPANY, INC.

### Question and Answer Small Group Rates Effective January 1, 2022

With this response, please find corresponding Q&A Exhibits in SG\_21-62\_Initial\_CAIC\_PPO\_Q&AExhibits1\_Supporting\_20210625.xlsx

**Question 1.** Under the General Information tab, the binder number listed is CABC-PA22-125107257. Please update the binder number to CABC-PA22-125108746. Please update all exhibits with the correct binder number.

**Answer 1.** The exhibits have been updated with the new binder number.

**Question 2.** Under the Rate/Rule Schedule tab, please update the SERFF Tracking Number of the Last Filing as currently the provided SERFF number is linked to Keystone Health Plan Central's Q4 small group quarterly filing.

**Answer 2.** The Rate/Rule Schedule tab has been corrected.

**Question 3.** A COVID-19 morbidity adjustment factor was used to bring the 2020 base experience in line with a BEP not influenced by COVID19. Currently, there is no mention of a COVID-19 adjustment being made to the projected claims. Please confirm that Capital is expecting no impact to Plan Year 2022 claims as a result from COVID-19.

**Answer 3.** This confirms that Capital is not making an additional adjustment for COVID-19 in 2022. We assume that 2020 adjusted for COVID-19 and trended is the best predictor of 2022.

**Question 4.** For the development of the 1.03 COVID morbidity factor, we had the following questions.

- a. For the COVID factor development, please include demonstration for how the 2019 and 2020 calendar years were adjusted for any differences in morbidity, demographics, plan design, geography, trend, etc. in the development of the factor.
- b. In the LR calculation for the support for the COVID factor on the "Exhibit Q\_Morbidity" tab, the claims are trended from 2019 to 2020 but the premium is not. Please provide support for this apparent disconnect.

#### Answer 4.

- a. For this estimate, morbidity, demographics, plan design, and geography are assumed to be the same between 2019 and 2020.
- b. Exhibit Q has been corrected to reflect 2020 premium PMPM.

**Question 5.** Per Pennsylvania Final Rate Filing Guidance, the trend listed in Table 3 of the PAAM Exhibits should match the aggregate 2-year trend in the URRT. The composite 2-year

trend used in Table 5, row 12, is 1.135. However, the composite 2-year trend for the URRT comes out to 1.115. Please explain the difference or update, as necessary.

**Answer 5.** For both Table 5 and the URRT, the components of trend (IP, OP, Prof, etc.) match. The aggregate varies because the manual data (CAAC, CAIC, KHPC combined) is used to develop the average trend for rate development. In contrast, the URRT uses company-specific data in Section II: Projections, and then allows for a manual PMPM. The URRT manual PMPM comes directly from Table 5, and therefore uses the aggregate trend from Table 5.

**Question 6.** Per Table 5, the Change in Demographic, Change in Network, and Change in Benefits are all 1.000. Please provide quantitative and qualitative support for each adjustment. In your response please be sure to answer the following questions:

- a. For Change in Demographics, the manual rate is mainly CAAC small group which has a higher average age than CAIC so why is no adjustment necessary to reflect this difference.
- b. For Change in Network, the manual rate is mainly CAAC who has multiple networks, but CAIC only offers the PPO network. So, why is the 1.000 adjustment appropriate. Also, in Exhibit F\_URRT, the Network Calculation is the Network Projection Period / Network BEP. Does this represent only CAIC BEP or all the manual experience?

#### Answer 6.

- a. We utilize the assumption that small group membership will change annually in non-credible companies such as CAIC and Keystone Health Plan Central (KHPC). But for rating purposes, we use combined data to project demographics. Small Group members do not see a difference between a CBC plan offered by CAAC, CAIC or KHPC. They are able to choose the plan that best fits their needs and that could change from year to year.
- b. CAAC had a small portion of membership in its EPO plans in 2020 equaling 0.13% of total 2020 membermonths. Because of the negligible membership, the average 2020 network factor is 1.0, making a network adjustment unnecessary.

**Question 7.** Per "Exhibit Q\_Morbidity" tab, an additional factor of 1.14 is being applied to the Change in Morbidity – Other. It states "this additional factor varies with projected risk adjustment transfer amount. This factor assumes CAIC is riskier than CAAC (majority of the BEP), and risk adjustment transfer will be higher than CAAC." Please provide quantitative and qualitative support for this assumption.

**Answer 7.** We are required to use CAIC specific risk-adjustment estimates in the rating of CAIC. In order to align rates across issuers (CAAC, CAIC, KHPC), the morbidity factor is developed. We did not use a comparison of PLRS, but instead used the morbidity factor to align rate relativities across issuers. The rate relativity between plans offered in CAAC, CAIC and KHCP is consistent with 2021. This approach allows consumers to shop CBC based on benefit differences and lessens market confusion.

**Question 8.** The following questions pertain to the development of the 2022 risk adjustment estimate.

- a. Please provide support for applying no changes to the 2020 risk adjustment results in projecting the 2022 information.
- b. Please provide support for assuming no change to the statewide average premium would occur between 2020 and 2022.
- c. Please provide support for assuming no changes in the relative risk for the Company relative to the statewide.

#### Answer 8.

- a. Rate development is being performed on an experience net risk adjustment basis. That means that we are neither making an issuer-specific morbidity adjustment to the base experience period or an adjustment to risk adjustment. This approach assumes that experience net risk adjustment is the best predictor of future experience.
- b. The statewide average premium is assumed to be equal between 2020 and 2022. This is because premiums statewide decreased in 2021 and we expect them to be at or below trend in 2022. The net result is estimated to be no change from 2020.
- c. The rationale is the same as explained in bullet a. above. Capital is assuming a steady state when using experience net risk adjustment as the basis of our projection.

**Question 9.** Please provide support for not including any utilization trend in the Medical trend amounts.

**Answer 9.** Annually, the actuarial team meets with our Chief Medical Officer to discuss utilization trends by market segment based on provider conversations and emerging trends in the medical community. Based on those conversations, her best estimate is no change in utilization from 2020 to 2022. Please note this is pre-Covid-19, as Covid-19 factors are applied separately.

**Question 10.** Please provide quantitative support for the 0.3% leveraging adjustment utilized on the "Exhibit E Trend" tab.

Answer 10. Please see SG\_21-62\_Initial\_CAIC\_PPO\_Leveraging\_Supporting\_20210625.xlsx, tab: LeveragingSGAllData. In order to determine the future impact of leveraging, including the impact of increasing cost sharing due to allowed costs rising, the exhibit shows a claim probability distribution with allowed amounts by range. The data is 2020 CBC ACA single risk pool population. The average pricing AV in the Small Group market is approximately 0.86 ((from Exhibit G, Paid-to-Allowed Ratio). From the data, I can infer that a deductible (applying to all services) of \$1,160 is equal to 86% AV for this population. Using that deductible amount, I can measure incurred claims and member cost-sharing trend, given an allowed trend of 6.0%. Claims are trended in a database in order to move claims into the correct buckets. Please note that the total allowed amounts are increasing at 6.0% annually (columns P and Z). Given the deductible and allowed trend, incurred claims trend at 6.5%, member cost-share at 1.3% and leveraging is 6.5%-6.0% = 0.5%. Due to market competition, the applied leveraging factor is 0.3%.

**Question 11.** In the PAAM Exhibits, Table 6. Retention, under the Administrative Expenses section, General and Claims is listed as 68.63%. Please update.

**Answer 11.** Table 6, General and Claims Administrative Expenses has been corrected.

**Question 12.** Per the PA Final Rate Filing Guidance, the profit listed in Table 6 is an after-tax amount. Given, that the profit is after-tax, the federal income tax percentage, in Table 6, is understated. In Table 6, the Federal Income Tax is listed as 0.42%. Please either update the estimated federal income tax percentage to 0.5316456% or change the after-tax profit to 1.58%. Please update all affected exhibits and documents.

**Answer 12.** The Federal Income Tax has been corrected to 0.5316456%.

**Question 13.** In Table 12, Age and Tobacco Factors, please fill in the tobacco factor for Age Bands: 18, 19, and 20 to be listed as 1.000.

**Answer 13.** Table 12 has been corrected to include a Tobacco Factor of 1.000 for ages 18, 19, and 20.

**Question 14.** Based on Exhibit R\_MLR Exhibit, the Actual MLR has consistently been significantly lower than the Pricing MLR.

- a. Please provide some explanation as to why the Actual MLR has been significantly lower.
- b. Has CAIC been required to pay rebates? Do you foresee this to be the case in the next few years?
- c. Have any changes been made to this year's Pricing MLR assumptions to try to achieve a more accurate Actual to Pricing MLR for Plan Year 2022.?

#### Answer 14.

- a. CAIC offers one small group plan, and has hovered around 100 enrolled members over the past 4 years. The lack of credibility has led to missed projections.
- b. Due to a lack of credibility, CAIC has not been required to pay MLR rebates.
- c. We continue to price the CAIC plan alongside like CAAC plans. But we have taken a more aggressive pricing approach in the small group market as a whole. This includes relying more heavily on actual risk adjustment results to project future risk adjustment; reducing trend; and removing adverse morbidity adjustments for movement from Small Group insured to Small Group ASO.

**Question 15.** The current submitted broker contract agreement is not for this upcoming plan year. When does Capital expect to have their commission schedule finalized? Once finalized, please provide the current broker contract agreement. Please note that once rates have been finalized, a change to rates will not be allowed to change even if the commission schedule changes.

**Answer 15.** We expect to have 2022 broker contracts finalized by August. We acknowledge that a change to rates will not be allowed once rates are finalized.

**Question 16.** Please provide an exhibit that quantitatively shows a comparison of the actual to projected claim cost PMPMs for calendar years 2017 - 2020, as applicable.

**Answer 16.** Please see Q&A Exhibit 1 for the requested data.

**Question 17.** Please confirm that you have tested to ensure that the rates in Table 11 of the PAAM Exhibits, PA Plan Design Summary and Rate Table, Federal Rates Template, and binder are identical.

**Answer 17.** I confirm that the exhibits above have been tested to ensure that rates are identical.

# Capital Advantage Insurance Company Small Group Rates Q&A Exhibit 1

# Projected vs. Actual

	Paid		Risk Adjustment		Exchange User Fees		Market Adjusted Paid	
Year	Projected	Actual	Projected	Actual	Projected	Actual	Projected	Actual
2017	\$442.62	\$227.04	-\$0.13	-\$192.63	\$0.00	\$0.00	\$442.75	\$419.67
2018	\$401.81	\$139.26	-\$42.86	-\$185.08	\$0.00	\$0.00	\$444.68	\$324.34
2019	\$539.89	\$414.92	-\$10.13	\$68.57	\$0.00	\$0.00	\$550.02	\$346.35
2020	\$390.73	\$649.04	-\$246.98	\$77.08	\$0.00	\$0.00	\$637.71	\$571.96



#### July 13, 2021

Ms. Tracie Gray, Director Bureau of Life, Accident and Health Insurance Office of Insurance Product Regulation and Administration Commonwealth of Pennsylvania Insurance Department 1311 Strawberry Square Harrisburg, PA 17120

Re: Capital Advantage Insurance Company

**Small Group Rates Filing No 21-62** 

**TOI Code: H15G Group Health – Hospital/Surgical/Medical Expense** 

Sub-TOI Code: H15G.003 Small Group Only

Filing Type: Rate

Dear Ms. Gray:

CAIC received an objection letter from the Department dated July 6, 2021. CAIC is providing the following in response to the objection letter:

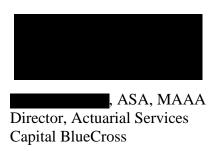
- Q&A written response
- Q&A exhibits
- Revised rate development workbook
- Revised PAAM exhibits
- Revised URRT
- Revised rates (PA and Federal templates)
- Revised memos Actuarial, Cover Letter, Rate Change Summary
- Public filing PDF

All changes are due to PID requests/questions and have been disclosed in the Q&A written response. Additionally, below is a summary of changes:

• Question 2: Correction to Table 5, Morbidity Factor

1	f you have any questions regarding this filing, please call me at a common (or via email at
	or at
(	). Thank you for your assistance in this matter.

#### Sincerely,



#### Enclosures

cc: FSA, MAAA, Senior Director, Actuarial Services
, ASA, MAAA, Vice President and Chief Actuary, Actuarial Services
, Corporate Counsel

#### CAPITAL ADVANTAGE INSURANCE COMPANY, INC.

### Question and Answer Small Group Rates Effective January 1, 2022

With this response, please find corresponding Q&A Exhibits in SG\_21-62\_Initial\_CAIC\_PPO\_Q&AExhibits2\_Supporting\_20210713.xlsx

**Question 1.** Does CAIC have any transitional membership? If so, has there recently been a significant drop in transition membership? Do you anticipate a drop in 2022?

**Answer 1.** CAIC does not have transitional membership.

**Question 2.** As a follow-up to question 4, please provide the 2019 and 2020 average risk score (using the same HHS model), average age factor, average actuarial value, and average geographic factor to support the assumption that the morbidity, demographic, plan design, and geographic mix is the same between 2019 and 2020.

Answer 2. Please see Q&A Exhibit 1 for the requested information. While the factors do vary between 2019 and 2020, the method used to estimate the impact of COVID shown in Exhibit Q is reasonable with a modification. In order to account for changes in risk, I have updated Exhibit Q to include the impact of risk adjustment on the 2019 and 2020 loss ratios. So if we compare the loss ratio net risk adjustment of 2020 compared to the loss ratio of 2019 claims and premium trended to 2020 (with risk adjustment equal to 2019), the difference is 2.6%. This would suggest that results are 2.6% better in 2020 than 2019 would have predicted. Using the loss ratio approach accounts for changes in geography and age since those are allowable rating factors so are included in premium. The addition of the risk adjustment transfer amount to the loss ratio means that change in risk is also considered. Due to this modification, I'm adjusting the COVID-19 adjustment factor from 1.03 to 1.026.

**Question 3.** Please update the 2020 experience period risk adjustment amount, in Table 2, to reflect the final CMS risk adjustment amount released on June 30th.

**Answer 3.** The risk adjustment amount in Table 2 has been updated to the CMS amount released on June 30<sup>th</sup>.

**Question 4.** If the projected risk adjustment transfer amount in Table 5 was modified due to the final CMS transfer amount published on June 30th, please provide narrative and detailed supporting data to justify the proposed changes.

**Answer 4.** The risk adjustment amount in Table 5 was not adjusted.

**Question 5.** Please provide an exhibit showing the actual experience for calendar years 2016 – 2020 and the projection experience for 2021 and 2022 for the following categories: Member

Months, Total Administrative Expenses, Total Incurred Claims, Total Premium, Total Actual Paid Taxes and Fees, Profit, Total Underwriting Gain/Loss and Underwriting Gain/Loss PMPM.

**Answer 5.** Please see Q&A Exhibit 2 for the requested data.

**Question 6.** Please confirm that you have tested to ensure that the rates in Table 11 of the Actuarial Memorandum Exhibits, PA Plan Design Summary and Rate Tables, and Federal Rate Templates are identical.

**Answer 6.** I confirm that the exhibits above have been tested to ensure that rates are identical.

**Question 7.** Please ensure that the 7/13/21 versions of the following items are posted in SERFF with your July 13th response to this data call.

- a. Cover Letter identifying all changes made and the reasons for the change. Also, show the revised rate change.
- b. PA Actuarial Memorandum
- c. PA Actuarial Memorandum Exhibits
- d. Department's Plan Design Summary and Rate Template Exhibits (please ensure that the rate template by county is populated with only numeric values no "NA")
- e. URRT
- f. Federal Rate Template
- g. Part III: Actuarial Memorandum
- h. Updated Rate Change Request Summary (Attachment I)
- i. Public PDF with limited redactions as previously directed in the Guidance (includes all correspondence and supporting exhibits after the initial submission, in addition to all the above items).

**Answer 7.** I confirm the requested information has been submitted.

## Capital Advantage Insurance Company Small Group Rates Q&A Exhibit 1

# Risk Score, Induced Demand, Geography, AV and Age

				<u>Risk</u>	Induced Demand	Geography	Actuarial Value	<u>Age</u>
<u>Year</u>	<u>Issuer</u>	<u>Market</u>	Billed MemberMoths	Issuer Avg PLRS	Issuer Avg IDF	Issuer Avg GCF	Issuer Avg AV	Issuer Avg ARF
2019	45127	Small Group	505,365	1.4952	1.0696	1.1874	0.7721	1.5448
2019	53789	Small Group	1,151	0.8023	1.0000	1.1876	0.6000	1.6143
2019	82795	Small Group	915	1.6438	1.0736	1.1867	0.7872	1.5935
2020	45217	Small Group	371,085	1.3245	1.0711	1.1772	0.7753	1.5567
2020	53789	Small Group	900	0.7726	1.0000	1.1696	0.6000	1.5541
2020	82795	Small Group	989	1.5293	1.0800	1.1778	0.8000	1.5963
2019	All	Small Group	507,431	1.4939	1.0694	1.1874	0.7718	1.5451
2020	All	Small Group	372,975	1.3237	1.0710	1.1772	0.7750	1.5568

# Capital Advantage Insurance Company Small Group Rates Q&A Exhibit 2 Financial History & Projection

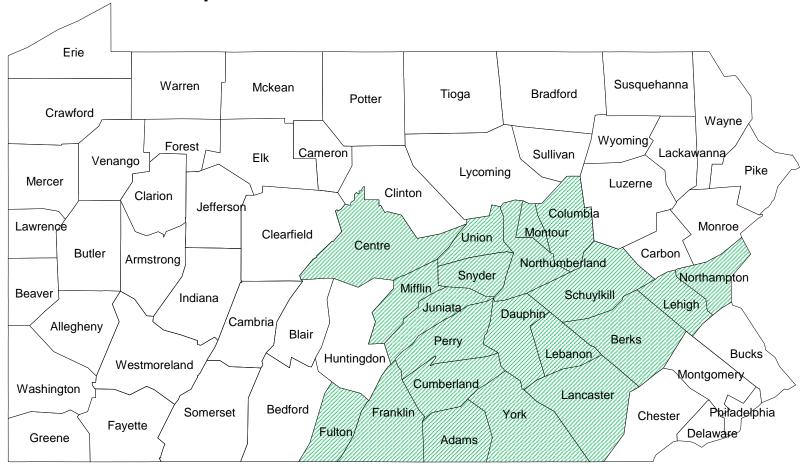
Year	Member Months	<b>Total Premium</b>	<b>Total Incurred</b>	<b>Total Admin</b>	Total Taxes & Fees	<b>Total Profit</b>	Annual Underwriting gain/loss	Annual Underwriting gain/loss PMPM
2016	1,024	\$250,983	-\$46,957	\$99,509	\$88,545	\$109,886	\$109,886	\$107.31
2017	1,270	\$388,024	\$263,522	\$96,865	\$46,180	-\$18,543	-\$18,543	-\$14.60
2018	1,271	\$432,263	\$173,026	\$73,149	\$4,345	\$181,743	\$181,743	\$142.99
2019	919	\$547,640	\$298,774	\$51,140	\$38,573	\$159,153	\$159,153	\$173.18
2020	974	\$1,001,974	\$693,140	\$66,567	\$26,699	\$215,568	\$215,568	\$221.32
Projected 2021	9	\$130,279	\$29,387	\$683	\$164	\$100,045	\$100,045	\$11,116.11
Projected 2022	1,509	\$1,118,273	\$958,375	\$108,544	\$28,990	\$22,364	\$22,364	\$14.82

2016-2020 is directly from Supplemental Health Care Exhibits 2021 is from the corporate budget

# 2021 Service Area

Issuer: 82795

**Market: Small Group** 



**Key** (modify as needed)

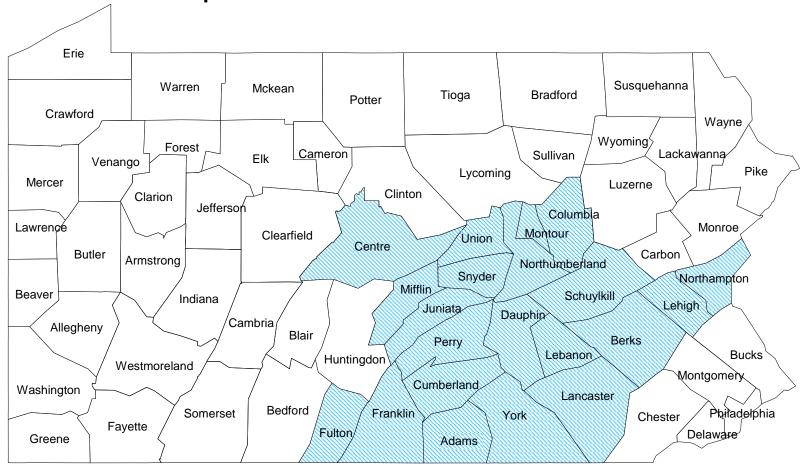
: 2021 on-exchange service area

: 2021 off-exchange only service area

# 2022 Service Area

Issuer: 82795

**Market: Small Group** 



**Key** (modify as needed)

: 2022 on-exchange service area

: 2022 off-exchange only service area