

Highmark Health Insurance Company – Individual Plans

Rate request filing ID # 1A-DP-17-HHIC; SERFF # HGHM-131020572 - 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:	8.9% ¹
Revised requested average rate change:	N/A ¹
Range of requested rate change:	-6.7% to 15.5%
Effective date:	January 1, 2018
People impacted:	30,200
Available in:	Rating Areas 1, 2, 4, 5, 6, 7, and 9

Key information

Jan. 2016-Dec. 2016 financial experience

Premiums	\$193,469,022
Claims	\$206,167,150
Administrative expenses	\$14,991,469
Taxes & fees	\$11,718,810
Company made (after taxes)	(\$39,408,407)

How it plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2018:

Claims:	85%
Administrative:	7%
Taxes & fees:	8%
Profit:	0%

The company expects its annual medical costs to increase **10.5%**.

Explanation of requested rate change

These premium rates are being set at a level that is required to adequately cover rising costs, primarily due to increasing medical and pharmacy services in the Individual market and the re-introduction of the federal insurer fee.

¹The initial requested average rate change shows the average rate change when the filing was initially made in May. Based on revisions made in the course of the Department's review and information released by the federal government in July on the impact of a federal program called risk adjustment, the insurer may have revised the rate filing, resulting in a revised requested average rate change.