

State:	Pennsylvania	Filing Company:	QCC Insurance Company
TOI/Sub-TOI:	H15I Individual Health - Hospital/Surgical/Medical Expense/H15I.001 Health - Hospital/Surgical/Medical Expense		
Product Name:	QCC Individual PPO effective 1-1-2020		
Project Name/Number:	/		

Supporting Document Schedules

Satisfied - Item:	ACA Public Rate Filing PDF
Comments:	
Attachment(s):	Public Rate Filing QCC Consumer 101019 (pages 1 to 48).pdf Public Rate Filing QCC Consumer 101019 (pages 49 to 102).pdf
Item Status:	
Status Date:	



May 21, 2019

Ms. Tracie Gray, Director
Bureau of Accident and Health Insurance
Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

SUBMITTED VIA SERFF

**RE: QCC Insurance Company, Inc.
Individual PPO Rate Filing effective 1/1/2020
INAC-131927222**

Dear Ms. Gray:

Attached is the 2020 annual rate filing for PPO plans of QCC Insurance Company, Inc. (QCC) in the Individual (non-group) marketplace in the Commonwealth of Pennsylvania. Rates for new and renewing plans are being filed and satisfy market reform requirements of the Affordable Care Act (ACA).

This rate filing includes rates for these plans and specifies compliance with rating requirements of the ACA. The enclosed is for rating periods effective from January 1, 2020 through December 31, 2020.

Per the guidance provided in the 2020 ACA-Compliant Health Insurance Rate Filing Guidance provided by the Pennsylvania Insurance Department, we applied a morbidity factor of 1.06 in consideration of changes to the individual mandate penalties. We also applied a factor of 1.20 for the impact of non-payment of CSR costs per the guidance.

The proposed rates represent a 9.5% increase over the previously approved 2019 rates.

Information for the Pennsylvania Bulletin:

- | | | |
|----|-------------------------------------|--------------------------------------|
| 1. | Company Name and NAIC Number: | QCC Insurance Company, Inc.
93688 |
| 2. | Market | Individual |
| 3. | On or Off Exchange | On and Off |
| 4. | Effective Date of Coverage | January 1, 2019 |
| 5. | Average Rate Change Requested | 9.5% |
| 6. | Range of Rate Changes Requested | 8.4% to 10.3% |
| 7. | Total Annual Revenue Generated from | |



	the Proposed Rate Change	\$31,245,593
8.	Products	PPO
9.	Rating Areas and Change from 2018	Rating Area 8; No Change
10.	Metal Levels and Catastrophic Plans	Platinum, Gold, Silver, Bronze
11.	Current covered lives and policyholders as of February 1, 2019	42,161 lives 29,117 policyholders
12.	Number of plans offered in 2019 and change from 2018	16 plans in 2020; 16 plans in 2019
13.	Corresponding contract form number, SERFF, and binder numbers	INLG-13193942, INLG-131936368, INLG-131936372 See appendix for form numbers
14.	HIOS Issuer ID # and submission tracking Number	HIOS Issuer ID # 31609; Tracking # 31609-1488619135297932291

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

Sincerely,

[REDACTED]

Director and Actuary, Commercial Pricing

cc: [REDACTED]
[REDACTED]



APPENDIX

Form Numbers

08535.ON Rev. 1.20
08535-OC.ON Rev. 1.20
08535.OFF Rev. 1.20
08535-OC.OFF Rev. 1.20
08537.ON.PDEN Rev. 1.20
08537-OC.ON.PDEN Rev. 1.20
08537.OFF Rev. 1.20
08537-OC.OFF Rev. 1.20
08537.ON.PDEN.HSA Rev. 1.20
08537-OC.ON.PDEN.HSA Rev. 1.20
08537.OFF.PDEN.HSA Rev 1.20
08537-OC.OFF.PDEN.HSA Rev 1.20
PREV/SCH-II Rev. 1.20

Rate Change Summary

QCC Insurance Company, Inc. – Individual Plans

Rate request filing ID INAC-131927222 - 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:	5.1%
Revised requested average rate change:	5.1%
Range of requested rate change:	4.0% - 5.8%
Effective date:	January 1, 2020
People impacted:	42,161
Available in:	Area 8

Key information

Jan. 2018-Dec. 2018 financial experience

Premiums	\$345,713,052
Claims	\$272,647,844
Administrative expenses	\$35,468,606
Taxes & fees	\$39,414,952
Company made (after taxes)	(\$1,818,350)

How it plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2020:

Claims:	85.0%
Administrative:	7.1%
Taxes & fees:	5.9%
Profit:	2.0%

The company expects its annual medical costs to increase **4.1%**.

Explanation of requested rate change

QCC Insurance Company ("QCC") is revising premium rates for the Pennsylvania Consumer ACA compliant products, effective from January 1, 2020.

About 42,000 members will be affected.

Changes in Taxes and Fees:

The Federal government suspended the Health Insurance Providers Fee for premiums due in 2019, but will be re-implementing it for premiums due in 2020. This adds 3.4% to 2020 premium rates.

Changes in Medical Service Costs:

Premium rates for health care insurance are increasing as the cost of health care service rise. Health care service costs increase as health care providers increase their fees, members use more health care services and supplies, and the types of health care services and supplies change, among other factors.

Financial Experience of the Product:

QCC is required by federal law to pay out a minimum of 80% percent of premium dollars for medical claims—this is referred to as the minimum Medical Loss Ratio (MLR). The rate action proposed in this filing is expected to achieve a Medical Loss Ratio of greater than 80% using the state's estimates for individual mandate and CSRs not being funded.

Changes in Benefits:

Some plan benefits are mandated by federal and state law. Benefit changes for some plans were also made. All changes in benefits are in compliance with the uniform modifications rules stipulated by the Federal government.

Administrative Costs:

In addition, the Affordable Care Act (ACA) imposes taxes and other levies.



May 21, 2019 (Revised July 3, 2019)

Ms. Tracie Gray, Director
Bureau of Accident and Health Insurance
Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

SUBMITTED VIA SERFF

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Individual PPO Rate Filing effective 1/1/2020
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This rate filing includes rates for these plans and specifies compliance with rating requirements of the ACA. The enclosed is for rating periods effective from January 1, 2020 through December 31, 2020.

Per the guidance provided in the 2020 ACA-Compliant Health Insurance Rate Filing Guidance provided by the Pennsylvania Insurance Department, we applied a morbidity factor of 1.06 in consideration of changes to the individual mandate penalties. We also applied a factor of 1.20 for the impact of non-payment of CSR costs per the guidance.

The proposed rates represent a 5.1% increase over the previously approved 2019 rates.

Information for the Pennsylvania Bulletin:

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| 1. | Company Name and NAIC Number: | QCC Insurance Company, Inc.
93688 |
| 2. | Market | Individual |
| 3. | On or Off Exchange | On and Off |
| 4. | Effective Date of Coverage | January 1, 2020 |
| 5. | Average Rate Change Requested | 5.1% |
| 6. | Range of Rate Changes Requested | 4.0% to 5.8% |
| 7. | Total Annual Revenue Generated from | |



	the Proposed Rate Change	\$16,763,655
8.	Products	PPO
9.	Rating Areas and Change from 2018	Rating Area 8; No Change
10.	Metal Levels and Catastrophic Plans	Platinum, Gold, Silver, Bronze
11.	Current covered lives and policyholders as of February 1, 2019	42,161 lives 29,117 policyholders
12.	Number of plans offered in 2019 and change from 2018	16 plans in 2020; 16 plans in 2019
13.	Corresponding contract form number, SERFF, and binder numbers	INLG-131932942, INLG-131936368, INLG-131936372 See appendix for form numbers
14.	HIOS Issuer ID # and submission tracking Number	HIOS Issuer ID # 31609; Tracking # 31609-1488619135297932291

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

Sincerely,

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Director and Actuary, Commercial Pricing

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[REDACTED]



APPENDIX

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PREV/SCH-II Rev. 1.20

PENNSYLVANIA ACTUARIAL MEMORANDUM

PURPOSES

This Actuarial Memorandum is provided along with the Unified Rate Review Template (URRT) and PA Actuarial Memorandum Rate Exhibits to provide certain information to support the gross premium for the single risk pool for individual market health care insurance underwritten by QCC Insurance Co., Inc. in the Commonwealth of Pennsylvania. It is provided as a component of a state rate filing. This submission may not be appropriate for other purposes.

1. BASIC INFORMATION AND DATA

A. COMPANY INFORMATION

Company Legal Name:	QCC Insurance Co., Inc. ("QCC")
State:	Pennsylvania
NAIC #:	93688
Market:	Individual
Marketplace:	On and Off Exchange
Effective Date(s):	1/1/2020 – 12/31/2020
Average Rate Change:	5.1%
Range of Rate Changes:	4.0% - 5.8%
Products:	PPO
Rating Areas:	Rating Area 8
Metal Levels:	Platinum, Gold, Silver, Bronze, Catastrophic
Current Members:	42,161
Current Policyholders:	29,117
Number of 2020 Plans:	16
HIOS Issuer ID (5-digit):	31609

Worksheet 1 of the accompanying URRT contains experience period data and development of the projected Single Risk Pool Gross Premium Average Rate PMPM for the individual market for QCC. Worksheet 2 contains experience period data and projections by product for the single risk pool for the same entities. This memorandum pertains only to plans denoted in Worksheet 2 by Plan IDs starting with the sequence 31609.

COMPANY CONTACT INFORMATION

Primary Contact Name:	
Primary Contact Telephone Number:	
Primary Contact Email Address:	

B. RATE HISTORY AND PROPOSED VARIATIONS IN RATE CHANGES

January 1, 2015	14.90%	INAC- 129626643
January 1, 2016	4.53%	INAC- 129938930
January 1, 2017	28.38%	INAC- 130539917
January 1, 2018	28.80%	INAC- 131146005
January 1, 2019	0.00%	INAC- 131478475

The historical rate changes varied by metallic tier based on plan benefits as illustrated via the Pricing AV.

Proposed rate changes may vary by metallic tier and plan based on plan benefit changes.

C. AVERAGE RATE CHANGE

The average proposed rate change shown in Cell AC15 of Table 10 is 5.1%. The changes to the single risk pool gross premium average rate per member per month (PMPM) from calendar year 2018 to calendar year 2020 are incorporated into the pricing and reflected in the Unified Rate Review Template.

The change in 21-year-old Non-Tobacco Premium PMPM calculated in Table 11, Cell AN13 is 5.2%.

D. MEMBERSHIP COUNT

Table 1 illustrates the Experience Period member-months, Current Period members as of February 1, 2019, and Projected Rating Period Member-months by ages.

E. BENEFIT CHANGES

Benefit changes were made to the following plans to assure compliance with Actuarial Value Requirements, including differences that resulted from changes to the AV Calculator. The basis for pricing changes was our internal pricing model.

F. EXPERIENCE PERIOD CLAIMS AND PREMIUMS

Table 2 illustrates the experience period claims and premiums using calendar year data. The data is consistent with the data reported in Section 1 of Worksheet I of the URRT.

Experience period premium, claims, and member months are obtained from the company's internal data warehouse. The claims data is collected for incurred dates from January through December 2018 and paid through February 2019. Earned premiums and member months are for January through December 2018. The data are for all direct-written individual business of QCC in the Commonwealth of

Pennsylvania, including out-of-network claims written by QCC but paid by QCC for POS plans. No private reinsurance was applicable.

The Non-EHB benefits portion of Allowed Claims is shown separately in cell H36 of Table 2. Capitation is uniform by age for the experience period. Net pharmacy rebates are illustrated in cell I36 of Table 2.

Projected Risk Adjustment PMPM

Projected Risk Adjustment is accounted for in Projected Incurred Claims before ACA Reinsurance and Risk Adjustment to reflect anticipated risk adjustment transfer amounts for the projection period. The amount reflects the projected morbidity for the single risk pool for IBCFOC in the projection period.

The estimated risk adjustment revenue for all of the plans in the risk pool is developed using the following methodology. We recognize that the HHS payment transfer formula implies that the projected incurred claims based solely on the experience period single risk pool claims need to be adjusted by the ratio of the current statewide market's risk relative to allowable rating factor (ARF) for age compared to the single risk pool's risk relative to ARF presented during the experience period. This adjustment, together with the assumed future changes in population risk morbidity, results in the issuer's pricing being consistent with the anticipated morbidity level of the future statewide market.

The anticipated risk adjustment transfer revenue is allocated proportionally based on plan premium. The Projected Risk Adjustment is subtracted from Projected Incurred Claims before ACA Risk Adjustment to reflect anticipated receipt of risk adjustment transfer amounts for the projection period.

When the projected risk adjustment amounts for QCC and Independence Blue Cross (QCC) are combined, the result is consistent with the projection made in our submission. We also considered preliminary 2018 risk transfer results.

The risk adjustment included in the URRT matches the risk adjustment that was included in the URRT from the annual QHP filing.

In the URRT v5.0, it is necessary to divide Risk Adjustment by the Paid to Allowed factor when it is used in calculations based on Allowed Claims to produce calculations that are consistent with the Actuarial Memo Rate Exhibit.

G. CREDIBILITY OF DATA

The experience period data is considered 100% credible.

H. TREND IDENTIFICATION

Table 3 identifies the proposed annual medical and prescription drug allowed claims cost and utilization trends. These data match the data illustrated in Section 2 of Worksheet I of the URRT. Additional discussion is provided in Section I, Historical Experience.

We populated the URRT with the Total Annual Trend calculated in cell C52 of Table 3. The URRT requires that factors are rounded to four decimal places which results in some small differences. To arrive more closely with the result in the Actuarial Memo Rate Exhibit, we adjusted the utilization component of Capitation trend in the URRT.

I. HISTORICAL EXPERIENCE

Table 4 illustrates historical experience from 2015 through 2018 for the product line.

a. Annualized Cost Trend

Annual cost trend reflects changes in costs of medical treatment due to medical inflation and changes in the distribution of services across network providers. The trend value is developed by reviewing historical medical costs for the single risk pool and adjusting them for anticipated future provider contracting reimbursement levels. The data is normalized for changes in age, benefit changes during the experience period, changes to provider contracts, and prescription drug formulary, and new drugs brought to market.

b. Annualized Utilization Trend

Annual utilization trend reflects the change in the number of units per 1,000 members for a fixed level of illness burden and includes changes due to the mix and intensity of services provided and changes related to shifts in product mix. It also includes effects of selection, if any, since this cannot be reflected in the relative cost of the various products and plans offered.

J. TERMINATED PLANS

The following plan is being terminated during 2020:

31609PA0180006 Personal Choice EPO Silver Reserve Select

2. RATE DEVELOPMENT AND CHANGE

A. DEVELOPMENT OF PROJECTED INDEX RATE, MARKET-ADJUSTED INDEX RATE, & TOTAL ALLOWED CLAIMS

Table 5 illustrates the development of the Projected Index Rate and Market-Adjusted Index Rate beginning with the Experience Period Index Rate. Exhibit A provides additional information about the adjustment factors.

Changes in Population Risk Morbidity

Experience period allowed claims are adjusted to account for differences in the average morbidity of the single risk pool population underlying the experience and the anticipated population in the projection period. This adjustment reflects changes in the individual market-wide morbidity.

Changes in Other Factors

Experience period allowed claims are adjusted to account for differences in the single risk pool population underlying the experience and the anticipated population in the projection period pertaining to several factors not due to changes in morbidity or the costs and utilization of medical care. This adjustment reflects: additional benefits required to be covered as essential health benefits; recently mandated benefits required by state law that are not reflected in the experience period data; benefits in the experience that are removed for the projection period; anticipated changes in the average utilization of services due to differences in average cost sharing requirements during the experience period and average cost sharing requirements in the projection period; changes in demographic characteristics of the single risk pool experience period population and the projection period population (including age, gender, region, and tobacco use); changes in the provider network (adding or removing a provider system or introducing a limited network option); and anticipated changes in pharmacy rebates.

Table 5 of the Actuarial Memorandum Rate Exhibit shows the components used in calculating change in other. The calculations of the components are based on the changes in values shown in Table 7.

CSR payments are funded through premiums in this filing. The additional cost to provide the CSRs is recognized in Column P of Table 10 of the Actuarial Memorandum Rate Exhibit. In URRT Part I, the cost is reflected in the Paid to Allowed factor. The Paid to Allowed factor in the URRT Part 1 is equal to the Paid to Allowed factor in Table 5 multiplied by the value in cell P15 of Table 10 of the Actuarial Memorandum Rate Exhibit.

B. RETENTION ITEMS

Table 6 illustrates the retention items, expressed as percentages of premium. Consistent with conversations with our State regulator, no Pricing load was applied for the Managed Care Assessment levied pursuant to Article VIII-I of the Pennsylvania Code, as it will be separately reimbursed. Federal Income Tax is calculated by applying the tax rate to the sum of the HIF plus Profit/Contingency.

Administrative Expenses		12.60%
General and Claims	10.40%	
Agent/Broker Fees and Commissions	1.40%	
Quality Improvement Initiatives	0.80%	
Taxes and Fees		5.86%
RA User Fee	0.03%	
PA Premium Tax	2.00%	
Federal Income Tax	1.14%	
Health Insurance Providers Fee	2.70%	

Profit/Contingency	2.00%
Total Retention	20.46%

C. NORMALIZED MARKET-ADJUSTED PROJECTED ALLOWED TOTAL CLAIMS

Table 7 compares the normalization factors used in this filing to those used in the 2019 filing. The changes in the factors reflect small differences from the projected populations in 2019 and 2020.

D. COMPONENTS OF RATE CHANGE

Table 8 illustrates the components of rate change, based on inputs from other sections of the Rate Exhibits. The results in Row H are similar to the values in Row A of Table 8.

Data in Table 9 is consistent with the 2019 and 2020 URRT with the exceptions of Risk Adjustment and Reinsurance which were revised to project company-specific values.

3. PLAN RATE DEVELOPMENT

Table 10 is populated with plan information consistent with entries in the 2020 URRT. Plan mappings, where applicable, are illustrated in Column F of Table 10.

Attached to this actuarial memorandum are exhibits providing actuarial certifications for the use of alternate methods of calculating the Actuarial Value, where applicable, as well as required support for the calculations.

The factor “AV and Cost Sharing Design of Plan” in Worksheet 2 of the URRT is the product of the Pricing AV, the Non-Funding of CSR Adjustment, and the Benefit Richness Factors from the Actuarial Memo Rate Exhibit. Again, please note that the URRT requires factors to be rounded to four decimal places, resulting in small differences.

4. PLAN PREMIUM DEVELOPMENT FOR 21-YEAR OLD NON-TOBACCO USER

Table 11 is populated from other sections of the Rate Exhibits, along with the population by age and rating area for the Projection Period.

5. PLAN FACTORS

Tables 12, 13, and 14 illustrate the factors used in pricing for age, tobacco, geographic rating area, and network. The tobacco factors match the previously approved tobacco factors from the 2019 filing.

6. ACTUARIAL CERTIFICATION

I, [REDACTED], am Director & Actuary of Commercial Markets for the Independence Blue Cross Family of Companies. I am a member of the Society of Actuaries and the American Academy of Actuaries with the education and experience necessary to perform the work necessary and meet the Qualification Standards of the American Academy of Actuaries to render the qualified actuarial opinion contained herein. The developed rates and memorandum have been prepared in conformity with appropriate Actuarial Standards of Practice and the Academy's Code of Professional Conduct.

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

I hereby certify that, to the best of my knowledge and judgment, the following:

- The projected index rate is:
 - In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.08(d)(1) and 147.106);
 - Developed in compliance with applicable Actuarial Standards of Practice;
 - Reasonable in relation to the benefits provided and the population anticipated to be covered; and
 - Neither excessive nor deficient.
- The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates.
- The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice.
- The AV Calculator was used to determine the AV Metal Values illustrated in Worksheet 2 of the Part I Unified Rate Review Template for all plans, unless an alternate methodology was required. If an alternate methodology was used to calculate the AV Metal Value for at least one plan offered, a copy of the actuarial certification required by 45 CFR Part 156, §156.135 will be included.
- All factor, benefit, and other changes from the prior approved filing have been disclosed in the actuarial memorandum.
- New plans cannot be considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106.
- The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2020 Rate Filing Justification.

- The Induced Demand factors applied to Platinum plans were reduced at the direction of the Pennsylvania Insurance Department. They are different from the induced demand factors that we had proposed.

May 21, 2019

PA Rate Template Part I
Data Relevant to the Rate Filing

Table 0. Identifivne Information

Carrier Name:	QCC Insurance Company, Inc.
Product(s):	PPD
Market Segment:	Individual
Rate Effective Date:	1/1/2020
Base Period Start Date	1/1/2018
Date of Most Recent Membership	2/1/2019

to 12/31/2020
to 12/31/2018

Table 1. Number of Members

	Member-months Experience Period	Members Current Period (as of 02-01-2019)	Member-months Projected Rating Period
	40.6	41.2	41.2
Average Age	40.6	41.2	41.2
Total	461,347	42,161	505,532
<18	54,694	4,368	59,062
18-24	39,900	3,474	43,374
25-29	46,547	4,232	50,779
30-34	36,337	3,651	40,000
35-39	30,392	3,016	33,408
40-44	29,589	2,881	32,470
45-49	37,601	3,427	41,028
50-54	46,725	4,204	50,929
55-59	61,889	5,521	67,410
60-64	65,094	5,668	70,762
65+	12,609	1,898	14,507

*Tables 1, 2 and 4 must include data for all non-grandfathered business (ACA compliant and Transitional)

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
\$ 345,713,051.75	\$ 272,135,073.99	\$ 276,692,997.13	461,347	\$ 60,760,501.14	\$ 337,453,498.27	\$ 1,252,705.65	\$ (56,591,929.43)	\$ 2,546,770.53		\$ 67,733,157.33
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)										\$ 718.89
Less Ratio										65.95%

*Express Prescription Drug Rebates as a negative number

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	1.23%	1.42%	0.00%	2.67%	21.88%
Outpatient Hospital	1.70%	1.42%	0.00%	5.18%	23.09%
Professional	2.25%	1.42%	0.00%	3.70%	28.53%
Other Medical	2.25%	1.42%	0.00%	3.70%	0.00%
Capitation				2.70%	0.78%
Prescription Drugs	0.00%	1.42%	0.00%	1.42%	25.72%
Total Annual Trend				3.22%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.066	

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

** Should = URR 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-15	\$	26,933,145.73	1.0000	\$ 26,933,145.73	48,070	\$	560.29		\$	-
Feb-15	\$	24,838,931.21	1.0000	\$ 24,838,931.21	45,266	\$	548.51		\$	-
Mar-15	\$	28,377,535.05	1.0000	\$ 28,377,535.05	45,390	\$	625.19		\$	-
Apr-15	\$	26,991,152.68	1.0000	\$ 26,991,152.68	44,562	\$	605.70		\$	-
May-15	\$	26,111,484.45	1.0000	\$ 26,111,484.45	43,904	\$	594.74		\$	-
Jun-15	\$	28,982,801.20	1.0000	\$ 28,982,801.20	43,346	\$	668.64		\$	-
Jul-15	\$	27,856,129.77	1.0000	\$ 27,856,129.77	42,919	\$	649.04		\$	-
Aug-15	\$	24,892,140.60	1.0000	\$ 24,892,140.60	42,698	\$	584.21		\$	-
Sep-15	\$	24,733,490.15	1.0000	\$ 24,733,490.15	42,266	\$	585.19		\$	-
Oct-15	\$	27,637,594.48	1.0000	\$ 27,637,594.48	41,881	\$	659.91		\$	-
Nov-15	\$	26,734,393.11	1.0000	\$ 26,734,393.11	41,506	\$	644.11		\$	-
Dec-15	\$ 312,273,650.00	\$ 26,990,000.10	1.0000	\$ 26,990,000.10	41,158	\$	643.86	\$ 57,483,507.00	\$	-
Jan-16	\$	22,787,547.80	1.0000	\$ 22,787,547.80	42,026	\$	542.22		\$	-
Feb-16	\$	25,435,410.94	1.0000	\$ 25,435,410.94	41,795	\$	608.58		\$	-
Mar-16	\$	29,646,912.13	1.0000	\$ 29,646,912.13	41,968	\$	706.42		\$	-
Apr-16	\$	26,398,590.70	1.0000	\$ 26,398,590.70	41,772	\$	631.97		\$	-
May-16	\$	28,072,608.21	1.0000	\$ 28,072,608.21	41,440	\$	677.43		\$	-
Jun-16	\$	28,406,113.23	1.0000	\$ 28,406,113.23	41,207	\$	689.35		\$	-
Jul-16	\$	27,059,596.60	1.0000	\$ 27,059,596.60	41,035	\$	659.45		\$	-
Aug-16	\$	31,590,335.80	1.0000	\$ 31,590,335.80	40,865	\$	773.04		\$	-
Sep-16	\$	29,115,971.22	1.0000	\$ 29,115,971.22	40,647	\$	716.31		\$	-
Oct-16	\$	27,664,365.70	1.0000	\$ 27,664,365.70	40,215	\$	686.84		\$	-
Nov-16	\$	28,168,137.79	1.0000	\$ 28,168,137.79	39,951	\$	705.03		\$	-
Dec-16	\$ 245,266,311.77	\$ 28,087,143.39	1.0000	\$ 28,087,143.39	39,293	\$	714.81	\$ 58,359,987.74	\$	-
Jan-17	\$	24,025,351.08	1.0000	\$ 24,025,351.08	50,174	\$	478.84		\$	-
Feb-17	\$	24,520,437.27	1.0000	\$ 24,520,437.27	50,984	\$	480.94		\$	-
Mar-17	\$	29,363,127.43	1.0000	\$ 29,363,127.43	52,008	\$	564.59		\$	-
Apr-17	\$	24,744,851.77	1.0000	\$ 24,744,851.77	51,889	\$	481.52		\$	-
May-17	\$	27,870,511.84	1.0000	\$ 27,870,511.84	50,480	\$	532.51		\$	-
Jun-17	\$	27,040,371.28	1.0000	\$ 27,040,371.28	49,805	\$	542.93		\$	-
Jul-17	\$	25,234,093.77	1.0000	\$ 25,234,093.77	49,228	\$	512.60		\$	-
Aug-17	\$	27,599,223.82	1.0000	\$ 27,599,223.82	48,658	\$	567.21		\$	-
Sep-17	\$	26,153,167.01	1.0000	\$ 26,153,167.01	48,178	\$	542.84		\$	-
Oct-17	\$	27,055,657.17	1.0000	\$ 27,055,657.17	47,625	\$	568.10		\$	-
Nov-17	\$	26,520,026.83	1.0000	\$ 26,520,026.83	46,983	\$	546.46		\$	-
Dec-17	\$ 329,835,945.00	\$ 27,179,286.47	1.0000	\$ 27,179,286.47	45,547	\$	596.71	\$ 78,555,125.18	\$	-
Jan-18	\$	21,683,040.64	0.9995	\$ 21,693,633.32	41,421	\$	523.74		\$	-
Feb-18	\$	19,506,005.16	0.9993	\$ 19,519,226.80	40,642	\$	480.27		\$	-
Mar-18	\$	21,383,616.30	0.9990	\$ 21,400,502.53	39,905	\$	515.51		\$	-
Apr-18	\$	22,195,382.00	0.9983	\$ 22,234,078.77	39,491	\$	583.02		\$	-
May-18	\$	24,836,049.05	0.9972	\$ 24,905,727.79	38,908	\$	640.12		\$	-
Jun-18	\$	22,074,747.76	0.9960	\$ 22,164,490.13	38,420	\$	576.87		\$	-
Jul-18	\$	22,460,116.77	0.9930	\$ 22,627,400.30	38,031	\$	584.84		\$	-
Aug-18	\$	25,288,245.71	0.9901	\$ 25,540,191.52	37,703	\$	677.40		\$	-
Sep-18	\$	23,100,304.81	0.9812	\$ 23,542,579.29	37,238	\$	630.69		\$	-
Oct-18	\$	25,651,117.81	0.9710	\$ 26,416,793.45	36,938	\$	715.18		\$	-
Nov-18	\$	22,092,993.51	0.9581	\$ 23,058,808.23	36,511	\$	631.56		\$	-
Dec-18	\$ 345,713,051.75	\$ 21,854,454.45	0.9266	\$ 23,585,598.50	35,883	\$	655.47	\$ 60,760,501.14	\$	-

* 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:	QCC Insurance Company, Inc.
Product(s):	PPO
Market Segment:	Individual
Rate Effective Date:	1/1/2020

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

Development of the Projected Index Rate	Actual Experience Data	Manual Data	
Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates) PMPM	\$ 719.97	\$ -	< Actual Experience PMPM should be consistent with the Index Rate for Experience Period on URRT
Two year trend projection factor	1.066	1.000	
Unadjusted Projected Allowed EHB Claims PMPM	\$ 767.28	\$ -	
Single Risk Pool Adjustment Factors			
Change in Morbidity	1.060	0.000	< See URRT Instructions
Change in Other	1.012	0.000	< See URRT Instructions
Change in Demographics	1.008		< See URRT Instructions
Change in Network	1.004		< See URRT Instructions
Change in Benefits	1.000		< See URRT Instructions
Change in Other	1.000		< See URRT Instructions
Total Adjusted Projected Allowed EHB Claims PMPM	\$ 822.81	\$ -	
Credibility Factors	100%	0%	< See Instructions
Blended Projected EHB Claims PMPM		\$ 822.81	< Projected Index Rate
Development of the Market-Adjusted Index Rate and Total Allowed Claims			
Adjusted Projected Allowed EHB Claims PMPM	\$ 822.81		< Index Rate for Projection Period on URRT - Individual or First Quarter Small Group
Adjusted Projected Allowed EHB Claims PMPM (will only populate for small group filings)			
Projected Paid to Allowed Ratio	0.707		
Projected Paid EHB Claims PMPM	\$ 581.74		
Market-wide Adjustments			
Projected Risk Adjustment PMPM	\$ 61.39		
Projected Paid Exchange User Fees PMPM	\$ 15.19		
Market-Adjusted Projected Paid EHB Claims PMPM	\$ 535.54		
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 757.47		< Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM	\$ 0.32		
Market-Adjusted Projected Paid Total Claims PMPM	\$ 535.77		
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 757.79		

Table 6. Retention

Retention Items - Express in percentages	Percentages	PMPM Amounts
Administrative Expenses	12.60%	\$84.88
General and Claims	10.40%	\$70.06
Agent/Broker Fees and Commissions	1.40%	\$9.43
Quality Improvement Initiatives	0.80%	\$5.39
Taxes and Fees	5.86%	\$39.51
RA User Fee	0.03%	\$0.18
PA Premium Tax (if applicable)	2.00%	\$13.47
Federal Income Tax	1.14%	\$7.66
Health Insurance Providers Fee (Prorated for Small Groups only)	2.70%	\$18.19
Profit/Contingency (after tax)	2.00%	\$13.47
Total Retention	20.46%	\$137.86
Projected Required Revenue PMPM		\$ 673.62

Table 8. Components of Rate Change

Rate Components	2019	2020	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$ 377.23	\$ 396.37	\$19.13	5.1%
B. Base period allowed claims before normalization	\$ 652.02	\$ 719.97	\$67.95	18.0%
C. Normalization factor component of change	\$ (267.61)	\$ (302.04)	-\$34.43	-9.1%
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 384.41	\$ 417.93	\$ 33.52	8.9%
D2. URRT Trend	\$ 70.64	\$ 27.46	\$ (43.17)	-11.4%
D3. URRT Morbidity	\$ 27.30	\$ 26.72	\$ (0.58)	-0.2%
D4. URRT Other	\$ 8.32	\$ 5.51	\$ (2.81)	-0.7%
D5. Normalized URRT RA/Rt on an allowed basis	\$ (57.75)	\$ (50.40)	\$ 7.34	1.9%
D6. Normalized Exchange User Fee on an allowed basis	\$ 15.32	\$ 12.47	\$ (2.85)	-0.8%
D7. Subtotal - Sum(D1-D6)	\$ 448.24	\$ 439.70	\$ (8.54)	-2.3%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ 0.00	\$ -	\$ (0.00)	0.0%
E2. Pricing AV	\$ -126.718686	\$ (128.82)	\$ (2.11)	-0.6%
E3. Benefit Richness	\$ (2.57)	\$ -	\$ 2.57	0.7%
E4. Catastrophic Eligibility	\$ (0.00)	\$ (0.00)	\$ 0.00	0.0%
E5. Subtotal - Sum(E1-E4)	\$ (129.28)	\$ (128.82)	\$ 0.46	0.1%
F. Change in Retention Components				
F1. Administrative Expenses	\$ 41.30	\$ 49.94	\$ 8.45	2.2%
F2. Taxes and Fees	\$ 9.13	\$ 23.25	\$ 14.12	3.7%
F3. Profit and/or Contingency	\$ 7.54	\$ 7.93	\$ 0.38	0.1%
F4. Subtotal - Sum(F1-F3)	\$ 58.17	\$ 81.12	\$ 22.95	6.1%
G. Change in Miscellaneous Items	\$ -	\$ -	\$ -	0.0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 377.12	\$ 391.99	\$ 14.87	3.9%

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 719.97	< Index Rate of Experience Period on URRT
Blended Earned Premium	\$ 345,713,051.75	
Blended Loss Ratio	65.95%	

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

Effective Date	1/1/2020	4/1/2020	7/1/2020	10/1/2020	Total Single Risk Pool
# of Member Months Renewing in Quarter	-	-	-	-	-
Adjusted Projected Allowed EHB Claims PMPM Q1	\$ 822.81	\$ 822.81	\$ 822.81	\$ 822.81	\$ 822.81
Months of Trend	3	6	9	12	
Annual Trend	3.23%	3.23%	3.23%	3.23%	
Single Risk Pool Projected Allowed Claims	\$ 822.81	\$ 829.38	\$ 836.00	\$ 842.68	\$ -
Quarterly Trend Factor	100.0%	100.0%	101.6%	102.4%	0.0%
2020 Trend Factors by Quarter	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2019	2020
Average Age Factor	1.088	1.701
Average Geographic Factor	1.000	1.000
Average Tobacco Factor	1.013	1.013
Average Benefit Richness (induced demand)	0.992	1.000
Average Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 760.53	\$ 757.79
Normalized Market Adjusted Projected Allowed Total Claims PMPM	\$ 448.38	\$ 439.88

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

	2019	2020	
Paid-to-Allowed	0.717	0.707	
URRT Trend (Total Applied Trend Factor)	1.184	1.066	< URRT W1, S2
URRT Morbidity	1.060	1.060	< URRT W1, S2
URRT "Other"	1.017	1.012	< URRT W1, S2
Risk Adjustment	\$ (70.26)	\$ (61.39)	< URRT W1, S3
Exchange User Fee	\$ 18.64	\$ 15.19	< URRT W1, S3
Capitation	\$ -	\$ -	< URRT W1, S2
Network	1.000	1.000	
Pricing AV	0.717	0.707	< For 2019 in cell J81, please include a factor equal to the product of the average Pricing AV and the Non-Funding of CSR Adjustmen
Benefit Richness	0.992	1.000	
Catastrophic Eligibility	1.000	1.000	
Administrative Expenses	11.00%	12.60%	
Taxes and Fees	2.42%	5.86%	
Profit and/or Contingency	2.00%	2.00%	

PA Rate Template Part III
Table 10. Plan Rates

Carrier Name: QCC Insurance Company, Inc.
Product(s): PPO
Market Segment: Individual
Rate Effective Date: 1/1/2020
Base Period Start Date: 1/1/2018
Date of Most Recent Membership: 2/1/2019
Market Adjusted Index Rate: \$ 757.47

Calibration	
Age Calibration Factor	1.702
Geographic Calibration Factor	1.000
Tobacco Calibration Factor	1.000
Aggregate Calibration Factor	1.702

Total Covered Lives @ 01-01-2019
42,161

Date of Most Recent Renewal		2/1/2019		757.47		45 CRR Part 136.9 (6) (2) Allowable Factors																											
HHS Plan ID (Standard Comparison)		Plan Type (HMO, PPO, PPO, EPO, Indemnity, Other)		1/1/2019 Plan Marketing Name		Existing, Modified, New, Discounted & Mapped, Discounted & Not Mapped (A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z)		1/1/2019 Plan HHS Plan ID (Standard Comparison)		Metals Tier		Metals Tier		Standard AV Approach (1)		Exchange On/Off or Off		Pricing AV (Jumping, Standard, AV)		Benefit Riders (Standard, AV)		Benefits in addition to FFR		Provider Network		Catastrophic Eligibility		Non-Funding of COB Adjustment		Team & Team (Including Endorsing Ins.)		Profit or Loss	
Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number		Plan Number	
Totals																																	
																												</					

PA Rate Quarterly Template Part V Consumer Factors

Carrier Name:	QCC Insurance Company, Inc.
Product(s):	PPO
Market Segment:	Individual
Rate Effective Date:	1/1/2020

Table 12. Age and Tobacco Factors

Projection Period Age and Tobacco Factors						
Age Band	Age Factor	Tobacco Factor		Age Band	Age Factor	Tobacco Factor
0-14	0.765			40	1.278	1.225
15	0.833			41	1.302	1.225
16	0.859			42	1.325	1.225
17	0.885			43	1.357	1.225
18	0.913	1.000		44	1.397	1.225
19	0.941	1.000		45	1.444	1.225
20	0.970	1.000		46	1.500	1.225
21	1.000	1.125		47	1.563	1.225
22	1.000	1.125		48	1.635	1.225
23	1.000	1.125		49	1.706	1.225
24	1.000	1.125		50	1.786	1.375
25	1.004	1.125		51	1.865	1.375
26	1.024	1.125		52	1.952	1.375
27	1.048	1.125		53	2.040	1.375
28	1.087	1.125		54	2.135	1.375
29	1.119	1.125		55	2.230	1.375
30	1.135	1.175		56	2.333	1.375
31	1.159	1.175		57	2.437	1.375
32	1.183	1.175		58	2.548	1.375
33	1.198	1.175		59	2.603	1.375
34	1.214	1.175		60	2.714	1.375
35	1.222	1.175		61	2.810	1.375
36	1.230	1.175		62	2.873	1.375
37	1.238	1.175		63	2.952	1.375
38	1.246	1.175		64+	3.000	1.375
39	1.262	1.175				

*PA follows the federal default age curve.

Table 13. Geographic Factors

Geographic Area Factors			
Area	Counties	Current Factor	Proposed Factor
Rating Area 1			
Rating Area 2			
Rating Area 3			
Rating Area 4			
Rating Area 5			
Rating Area 6			
Rating Area 7			
Rating Area 8	Bucks, Chester, Delaware, Philadelphia, Montgomery	1.000	1.000
Rating Area 9			

Table 14. Network Factors

[illegible]

Company Name: QCC Insurance Company
 Market: Individual
 Product: PPO
 Effective Date of Rates: January 1, 2020

Ending date of Rates: December 31, 2020

HIOS Plan ID (On Exchange)=>	31609PA0070002		31609PA0070003		31609PA0070004		31609PA0160001		31609PA0160003		31609PA0160004		31609PA0160005		31609PA0160006	
HIOS Plan ID (Off Exchange)=>																
Plan Marketing Name =>	Personal Choice PPO Gold		Personal Choice PPO Silver		Personal Choice PPO Bronze		Personal Choice EPO Catastrophic		Personal Choice EPO Silver Reserve		Personal Choice EPO Platinum		Personal Choice EPO Bronze Reserve		Personal Choice EPO Bronze Base	
Form # =>	08535 Rev. 1.20		08535 Rev. 1.20		08535 Rev. 1.20		08537 Rev. 1.20		8538 Rev. 1.20		08535 Rev. 1.20		08536 Rev. 1.20		08536 Rev. 1.20	
Rating Area =>	8		8		8		8		8		8		8		8	
Network =>	Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network	
Metal =>	Gold		Silver		Bronze		Catastrophic		Silver		Platinum		Bronze		Bronze	
Deductible =>	\$0		\$2,750		\$5,750		\$8,150		\$2,800		\$0		\$6,900		\$8,150	
Coinsurance =>	20%		30%		50%		0%		30%		0%		0%		0%	
Copays =>	\$30/\$65		\$30/\$70 no ded		\$50 no ded/\$50 after ded		\$1-3 no ded (0% after ded)/0%		\$30 after ded/\$70 after ded		\$15/\$50		0% after ded/0% after ded		\$1-3 no ded (0% after ded)/0%	
OOP Maximum =>	\$7,000		\$7,500		\$8,150		\$8,150		\$6,900		\$5,000		\$6,900		\$8,150	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0-14	\$427.86	\$427.86	\$382.97	\$382.97	\$254.24	\$254.24	\$210.41	\$210.41	\$385.60	\$385.60	\$572.30	\$572.30	\$234.30	\$234.30	\$215.42	\$215.42
15	\$465.89	\$465.89	\$417.02	\$417.02	\$276.84	\$276.84	\$229.11	\$229.11	\$419.87	\$419.87	\$623.18	\$623.18	\$255.13	\$255.13	\$234.57	\$234.57
16	\$480.43	\$480.43	\$430.03	\$430.03	\$285.48	\$285.48	\$236.26	\$236.26	\$432.98	\$432.98	\$642.63	\$642.63	\$263.09	\$263.09	\$241.89	\$241.89
17	\$494.97	\$494.97	\$443.05	\$443.05	\$294.12	\$294.12	\$243.41	\$243.41	\$446.08	\$446.08	\$662.08	\$662.08	\$271.06	\$271.06	\$249.22	\$249.22
18	\$510.63	\$510.63	\$457.07	\$457.07	\$303.43	\$303.43	\$251.11	\$251.11	\$460.20	\$460.20	\$683.02	\$683.02	\$279.63	\$279.63	\$257.10	\$257.10
19	\$526.29	\$526.29	\$471.08	\$471.08	\$312.73	\$312.73	\$258.81	\$258.81	\$474.31	\$474.31	\$703.97	\$703.97	\$288.21	\$288.21	\$264.99	\$264.99
20	\$542.51	\$542.51	\$485.60	\$485.60	\$322.37	\$322.37	\$266.79	\$266.79	\$488.93	\$488.93	\$725.67	\$725.67	\$297.09	\$297.09	\$273.15	\$273.15
21	\$559.29	\$629.20	\$500.62	\$563.20	\$332.34	\$373.88	\$275.04	\$309.42	\$504.05	\$567.06	\$748.11	\$841.62	\$306.28	\$344.57	\$281.60	\$316.80
22	\$559.29	\$629.20	\$500.62	\$563.20	\$332.34	\$373.88	\$275.04	\$309.42	\$504.05	\$567.06	\$748.11	\$841.62	\$306.28	\$344.57	\$281.60	\$316.80
23	\$559.29	\$629.20	\$500.62	\$563.20	\$332.34	\$373.88	\$275.04	\$309.42	\$504.05	\$567.06	\$748.11	\$841.62	\$306.28	\$344.57	\$281.60	\$316.80
24	\$559.29	\$629.20	\$500.62	\$563.20	\$332.34	\$373.88	\$275.04	\$309.42	\$504.05	\$567.06	\$748.11	\$841.62	\$306.28	\$344.57	\$281.60	\$316.80
25	\$561.53	\$631.72	\$502.62	\$565.45	\$333.67	\$375.38	\$276.14	\$310.66	\$506.07	\$569.32	\$751.10	\$844.99	\$307.51	\$345.94	\$282.73	\$318.07
26	\$572.71	\$644.30	\$512.63	\$576.71	\$340.32	\$382.86	\$281.64	\$316.85	\$516.15	\$580.67	\$766.06	\$861.82	\$313.63	\$352.83	\$288.36	\$324.40
27	\$586.14	\$659.40	\$524.65	\$590.23	\$348.29	\$391.83	\$288.24	\$324.27	\$528.24	\$594.27	\$784.02	\$882.02	\$320.98	\$361.10	\$295.12	\$332.01
28	\$607.95	\$683.94	\$544.17	\$612.20	\$361.25	\$406.41	\$298.97	\$336.34	\$547.90	\$616.39	\$813.20	\$914.85	\$332.93	\$374.54	\$306.10	\$344.36
29	\$625.85	\$704.08	\$560.19	\$630.22	\$371.89	\$418.37	\$307.77	\$346.24	\$564.03	\$634.54	\$837.14	\$941.78	\$342.73	\$385.57	\$315.11	\$354.50
30	\$634.79	\$745.88	\$568.20	\$667.64	\$377.21	\$443.22	\$312.17	\$366.80	\$572.10	\$672.21	\$849.10	\$997.70	\$347.63	\$408.46	\$319.62	\$375.55
31	\$648.22	\$761.66	\$580.22	\$681.76	\$385.18	\$452.59	\$318.77	\$374.56	\$584.19	\$686.43	\$867.06	\$1,018.79	\$354.98	\$417.10	\$326.37	\$383.49
32	\$661.64	\$777.43	\$592.23	\$695.87	\$393.16	\$461.96	\$325.37	\$382.31	\$596.29	\$700.64	\$885.01	\$1,039.89	\$362.33	\$425.74	\$333.13	\$391.43
33	\$670.03	\$787.28	\$599.74	\$704.70	\$398.14	\$467.82	\$329.50	\$387.16	\$603.85	\$709.53	\$896.24	\$1,053.08	\$366.92	\$431.14	\$337.36	\$396.39
34	\$678.98	\$797.80	\$607.75	\$714.11	\$403.46	\$474.07	\$333.90	\$392.33	\$611.92	\$719.00	\$908.21	\$1,067.14	\$371.82	\$436.89	\$341.86	\$401.69
35	\$683.45	\$803.06	\$611.76	\$718.82	\$406.12	\$477.19	\$336.10	\$394.92	\$615.95	\$723.74	\$914.19	\$1,074.17	\$374.27	\$439.77	\$344.12	\$404.34
36	\$687.93	\$808.31	\$615.76	\$723.52	\$408.78	\$480.31	\$338.30	\$397.50	\$619.98	\$728.48	\$920.18	\$1,081.21	\$376.72	\$442.65	\$346.37	\$406.98
37	\$692.40	\$813.57	\$619.77	\$728.23	\$411.44	\$483.44	\$340.50	\$400.09	\$624.01	\$733.22	\$926.16	\$1,088.24	\$379.17	\$445.53	\$348.62	\$409.63
38	\$696.88	\$818.83	\$623.77	\$732.93	\$414.10	\$486.56	\$342.70	\$402.67	\$628.05	\$737.95	\$932.15	\$1,095.27	\$381.62	\$448.41	\$350.87	\$412.28
39	\$705.82	\$829.34	\$631.78	\$742.34	\$419.41	\$492.81	\$347.10	\$407.84	\$636.11	\$747.43	\$944.11	\$1,109.33	\$386.53	\$454.17	\$355.38	\$417.57
40	\$714.77	\$875.60	\$639.79	\$783.75	\$424.73	\$520.29	\$351.50	\$430.59	\$644.18	\$789.12	\$956.08	\$1,171.20	\$391.43	\$479.50	\$359.88	\$440.86
41	\$728.20	\$892.04	\$651.81	\$798.46	\$432.71	\$530.07	\$358.10	\$438.68	\$656.27	\$803.93	\$974.04	\$1,193.20	\$398.78	\$488.50	\$366.64	\$449.14
42	\$741.06	\$907.80	\$663.32	\$812.57	\$440.35	\$539.43	\$364.43	\$446.42	\$667.87	\$818.14	\$991.25	\$1,214.28	\$405.82	\$497.13	\$373.12	\$457.07
43	\$758.96	\$929.72	\$679.34	\$832.19	\$450.99	\$552.46	\$373.23	\$457.21	\$684.00	\$837.89	\$1,015.19	\$1,243.60	\$415.62	\$509.14	\$382.13	\$468.11
44	\$781.33	\$957.13	\$699.37	\$856.72	\$464.28	\$568.74	\$384.23	\$470.68	\$704.16	\$862.59	\$1,045.11	\$1,280.26	\$427.87	\$524.14	\$393.40	\$481.91
45	\$807.61	\$989.33	\$722.90	\$885.55	\$479.90	\$587.88	\$397.16	\$486.52	\$727.85	\$891.61	\$1,080.27	\$1,323.33	\$442.27	\$541.78	\$406.63	\$498.12
46	\$838.94	\$1,027.70	\$750.93	\$919.89	\$498.51	\$610.67	\$412.56	\$505.39	\$756.08	\$926.19	\$1,122.17	\$1,374.65	\$459.42	\$562.79	\$422.40	\$517.44
47	\$874.17	\$1,070.86	\$782.47	\$958.52	\$519.45	\$636.32	\$429.89	\$526.61	\$787.83	\$965.09	\$1,169.30	\$1,432.39	\$478.72	\$586.43	\$440.14	\$539.17
48	\$914.44	\$1,120.19	\$818.51	\$1,002.68	\$543.38	\$665.64	\$449.69	\$550.87	\$824.12	\$1,009.55	\$1,223.16	\$1,498.37	\$500.77	\$613.44	\$460.42	\$564.01
49	\$954.15	\$1,168.83	\$854.06	\$1,046.22	\$566.97	\$694.54	\$469.22	\$574.79	\$859.91	\$1,053.39	\$1,276.28	\$1,563.44	\$522.51	\$640.08	\$480.41	\$588.50
50	\$998.89	\$1,373.48	\$894.11	\$1,229.40	\$593.56	\$816.14	\$491.22	\$675.43	\$900.23	\$1,237.82	\$1,336.12	\$1,837.17	\$547.02	\$752.15	\$502.94	\$691.54
51	\$1,043.08	\$1,434.23	\$933.66	\$1,283.78	\$619.81	\$852.24	\$512.95	\$705.31	\$940.05	\$1,292.57	\$1,395.23	\$1,918.43	\$571.21	\$785.42	\$525.18	\$722.13
52	\$1,091.73	\$1,501.13	\$977.21	\$1,343.66	\$648.73	\$892.00	\$536.88	\$738.21	\$983.91	\$1,352.87	\$1,460.31	\$2,007.93	\$597.86	\$822.06	\$549.68	\$755.81
53	\$1,140.95	\$1,568.81	\$1,021.26	\$1,404.24	\$677.97	\$932.21	\$561.08	\$771.49	\$1,028.26	\$1,413.86	\$1,526.14	\$2,098.45	\$624.81	\$859.12	\$574.46	\$789.89
54	\$1,194.08	\$1,641.87	\$1,068.82	\$1,469.63	\$709.55	\$975.63	\$587.21	\$807.41	\$1,076.15	\$1,497.21	\$1,597.21	\$2,196.17	\$653.91	\$899.12	\$601.22	\$826.67
55	\$1,247.22	\$1,714.92	\$1,116.38	\$1,535.03	\$741.12	\$1,019.04	\$613.34	\$843.34	\$1,124.03	\$1,545.54	\$1,668.29	\$2,293.89	\$683.00	\$939.13	\$627.97	\$863.46
56	\$1,304.82	\$1,794.13	\$1,167.95	\$1,605.93	\$775.35	\$1,066.11	\$641.67	\$882.29	\$1,175.95	\$1,616.93	\$1,745.34	\$2,399.84	\$714.55	\$982.51	\$656.97	\$903.34
57	\$1,362.99	\$1,874.11	\$1,220.01	\$1,677.52	\$809.91	\$1,113.63	\$670.27	\$921.62	\$1,228.37	\$1,689.01	\$1,823.14	\$2,506.82	\$746.40	\$1,026.31	\$686.26	\$943.61
58	\$1,425.07	\$1,959.47	\$1,275.58	\$1,753.92	\$846.80	\$1,164.35	\$700.80	\$963.60	\$1,284.32	\$1,765.94	\$1,906.18	\$2,621.00	\$780.40	\$1,073.05	\$717.52	\$986.59
59	\$1,455.83	\$2,001.77	\$1,303.11	\$1,791.78	\$865.08	\$1,189.49	\$715.93	\$984.40	\$1,312.04	\$1,804.06	\$1,947.33	\$2,677.58	\$797.25	\$1,096.21	\$733.00	\$1,007.88
60	\$1,517.91	\$2,087.13	\$1,358.68	\$1,868.19	\$901.97	\$1,240.21	\$746.46	\$1,026.38	\$1,367.99	\$1,880.99	\$2,030.37	\$2,791.76	\$831.24	\$1,142.96	\$764.26	\$1,050.86
61	\$1,571.60	\$2,160.96	\$1,406.74	\$1,934.27	\$933.88	\$1,284.08	\$772.86	\$1,062.69	\$1,416.38	\$1,947.52	\$2,102.19	\$2,890.51	\$860.65	\$1,183.39	\$791.30	\$1,088.03
62	\$1,606.84	\$2,209.41	\$1,438.28	\$1,977.64	\$954.81	\$1,312.87	\$790.19	\$1,086.51	\$1,448.14	\$1,991.19	\$2,149.32	\$2,955.32	\$879.94	\$1,209.92	\$809.04	\$1,112.43
63	\$1,651.02	\$2,270.16	\$1,477.83	\$2,032.02	\$981.07	\$1,348.97	\$811.92	\$1,116.39	\$1,487.96	\$2,045.94	\$2,208.42	\$3,036.58	\$904.14	\$1,243.19	\$831.28	\$1,143.01
64+	\$1,677.87	\$2,307.07	\$1,501.86	\$2,065.06	\$997.02	\$1,370.90	\$825.12	\$1,134.54	\$1,512.15	\$2,079.21	\$2,244.33	\$3,085.95	\$918.84	\$1,263.41	\$844.80	\$1,161.60

Company Name:
Market:
Product:
Effective Date of Rates:

HIOS Plan ID (On Exchange)=>	31609PA0180001		31609PA0180002		31609PA0180003		31609PA0180004		31609PA0180005		31609PA0190002		31609PA0190003		31609PA0190004	
HIOS Plan ID (Off Exchange)=>	31609PA0180001		31609PA0180002		31609PA0180003		31609PA0180004		31609PA0180005		31609PA0190002		31609PA0190003		31609PA0190004	
Plan Marketing Name =>	Personal Choice EPO Catastrophic		Personal Choice EPO Silver Reserve		Personal Choice EPO Platinum		Personal Choice EPO Bronze Reserve		Personal Choice EPO Bronze Basic		Personal Choice PPO Gold		Personal Choice PPO Silver		Personal Choice PPO Bronze	
Form # =>	08536 Rev. 1.20		08536 Rev. 1.20		08535 Rev. 1.20		08537 Rev. 1.20		08536 Rev. 1.20		08535 Rev. 1.20		08535 Rev. 1.20		08535 Rev. 1.20	
Rating Area =>	8		8		8		8		8		8		8		8	
Network =>	Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network	
Metal =>	Catastrophic		Silver		Platinum		Bronze		Bronze		Gold		Silver		Bronze	
Deductible =>	\$8,150		\$2,800		\$0		\$6,900		\$8,150		\$0		\$2,750		\$5,750	
Coinsurance =>	0%		30%		0%		0%		0%		20%		30%		50%	
Copays =>	\$ 1-3 no ded (0% after ded)/0%		\$30 after ded/\$70 after ded		\$15/\$50		0% after ded/0% after ded		\$ 1-3 no ded (0% after ded)/0%		\$30/\$65		\$30/\$70 no ded		\$50 no ded/50% after ded	
OOP Maximum =>	\$8,150		\$6,900		\$5,000		\$6,900		\$8,150		\$7,000		\$7,500		\$8,150	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0-14	\$210.41	\$210.41	\$385.60	\$385.60	\$572.30	\$572.30	\$234.30	\$234.30	\$215.42	\$215.42	\$427.86	\$427.86	\$382.97	\$382.97	\$254.24	\$254.24
15	\$229.11	\$229.11	\$419.87	\$419.87	\$623.18	\$623.18	\$255.13	\$255.13	\$234.57	\$234.57	\$465.89	\$465.89	\$417.02	\$417.02	\$276.84	\$276.84
16	\$236.26	\$236.26	\$432.98	\$432.98	\$642.63	\$642.63	\$263.09	\$263.09	\$241.89	\$241.89	\$480.43	\$480.43	\$430.03	\$430.03	\$285.48	\$285.48
17	\$243.41	\$243.41	\$446.08	\$446.08	\$662.08	\$662.08	\$271.06	\$271.06	\$249.22	\$249.22	\$494.97	\$494.97	\$443.05	\$443.05	\$294.12	\$294.12
18	\$251.11	\$251.11	\$460.20	\$460.20	\$683.02	\$683.02	\$279.63	\$279.63	\$257.10	\$257.10	\$510.63	\$510.63	\$457.07	\$457.07	\$303.43	\$303.43
19	\$258.81	\$258.81	\$474.31	\$474.31	\$703.97	\$703.97	\$288.21	\$288.21	\$264.99	\$264.99	\$526.29	\$526.29	\$471.08	\$471.08	\$312.73	\$312.73
20	\$266.79	\$266.79	\$488.93	\$488.93	\$725.67	\$725.67	\$297.09	\$297.09	\$273.15	\$273.15	\$542.51	\$542.51	\$485.60	\$485.60	\$322.37	\$322.37
21	\$275.04	\$309.42	\$504.05	\$567.06	\$748.11	\$841.62	\$306.28	\$344.57	\$281.60	\$316.80	\$559.29	\$629.20	\$500.62	\$563.20	\$332.34	\$373.88
22	\$275.04	\$309.42	\$504.05	\$567.06	\$748.11	\$841.62	\$306.28	\$344.57	\$281.60	\$316.80	\$559.29	\$629.20	\$500.62	\$563.20	\$332.34	\$373.88
23	\$275.04	\$309.42	\$504.05	\$567.06	\$748.11	\$841.62	\$306.28	\$344.57	\$281.60	\$316.80	\$559.29	\$629.20	\$500.62	\$563.20	\$332.34	\$373.88
24	\$275.04	\$309.42	\$504.05	\$567.06	\$748.11	\$841.62	\$306.28	\$344.57	\$281.60	\$316.80	\$559.29	\$629.20	\$500.62	\$563.20	\$332.34	\$373.88
25	\$276.14	\$310.66	\$506.07	\$569.32	\$751.10	\$844.99	\$307.51	\$345.94	\$282.73	\$318.07	\$561.53	\$631.72	\$502.62	\$565.45	\$333.67	\$375.38
26	\$281.64	\$316.85	\$516.15	\$580.67	\$766.06	\$861.82	\$313.63	\$352.83	\$288.36	\$324.40	\$572.71	\$644.30	\$512.63	\$576.71	\$340.32	\$382.86
27	\$288.24	\$324.27	\$528.24	\$594.27	\$784.02	\$882.02	\$320.98	\$361.10	\$295.12	\$332.01	\$586.14	\$659.40	\$524.65	\$590.23	\$348.29	\$391.83
28	\$298.97	\$336.34	\$547.90	\$616.39	\$813.20	\$914.85	\$332.93	\$374.54	\$306.10	\$344.36	\$607.95	\$683.94	\$544.17	\$612.20	\$361.25	\$406.41
29	\$307.77	\$346.24	\$564.03	\$634.54	\$837.14	\$941.78	\$342.73	\$385.57	\$315.11	\$354.50	\$625.85	\$704.08	\$560.19	\$630.22	\$371.89	\$418.37
30	\$312.17	\$366.80	\$572.10	\$672.21	\$849.10	\$997.70	\$347.63	\$408.46	\$319.62	\$375.55	\$634.79	\$745.88	\$568.20	\$667.64	\$377.21	\$443.22
31	\$318.77	\$374.56	\$584.19	\$686.43	\$867.06	\$1,018.79	\$354.98	\$417.10	\$326.37	\$383.49	\$648.22	\$761.66	\$580.22	\$681.76	\$385.18	\$452.59
32	\$325.37	\$382.31	\$596.29	\$700.64	\$885.01	\$1,039.89	\$362.33	\$425.74	\$333.13	\$391.43	\$661.64	\$777.43	\$592.23	\$695.87	\$393.16	\$461.96
33	\$329.50	\$387.16	\$603.85	\$709.53	\$896.24	\$1,053.08	\$366.92	\$431.14	\$337.36	\$396.39	\$670.03	\$787.28	\$599.74	\$704.70	\$398.14	\$467.82
34	\$333.90	\$392.33	\$611.92	\$719.00	\$908.21	\$1,067.14	\$371.82	\$436.89	\$341.86	\$401.69	\$678.98	\$797.80	\$607.75	\$714.11	\$403.46	\$474.07
35	\$336.10	\$394.92	\$615.95	\$723.74	\$914.19	\$1,074.17	\$374.27	\$439.77	\$344.12	\$404.34	\$683.45	\$803.06	\$611.76	\$718.82	\$406.12	\$477.19
36	\$338.30	\$397.50	\$619.98	\$728.48	\$920.18	\$1,081.21	\$376.72	\$442.65	\$346.37	\$406.98	\$687.93	\$808.31	\$615.76	\$723.52	\$408.78	\$480.31
37	\$340.50	\$400.09	\$624.01	\$733.22	\$926.16	\$1,088.24	\$379.17	\$445.53	\$348.62	\$409.63	\$692.40	\$813.57	\$619.77	\$728.23	\$411.44	\$483.44
38	\$342.70	\$402.67	\$628.05	\$737.95	\$932.15	\$1,095.27	\$381.62	\$448.41	\$350.87	\$412.28	\$696.88	\$818.83	\$623.77	\$732.93	\$414.10	\$486.56
39	\$347.10	\$407.84	\$636.11	\$747.43	\$944.11	\$1,109.33	\$386.53	\$454.17	\$355.38	\$417.57	\$705.82	\$829.34	\$631.78	\$742.34	\$419.41	\$492.81
40	\$351.50	\$430.59	\$644.18	\$789.12	\$956.08	\$1,171.20	\$391.43	\$479.50	\$359.88	\$440.86	\$714.77	\$875.60	\$639.79	\$783.75	\$424.73	\$520.29
41	\$358.10	\$438.68	\$656.27	\$803.93	\$974.04	\$1,193.20	\$398.78	\$488.50	\$366.64	\$449.14	\$728.20	\$892.04	\$651.81	\$798.46	\$432.71	\$530.07
42	\$364.43	\$446.42	\$667.87	\$818.14	\$991.25	\$1,214.28	\$405.82	\$497.13	\$373.12	\$457.07	\$741.06	\$907.80	\$663.32	\$812.57	\$440.35	\$539.43
43	\$373.23	\$457.21	\$684.00	\$837.89	\$1,015.19	\$1,243.60	\$415.62	\$509.14	\$382.13	\$468.11	\$758.96	\$929.72	\$679.34	\$832.19	\$450.99	\$552.46
44	\$384.23	\$470.68	\$704.16	\$862.59	\$1,045.11	\$1,280.26	\$427.87	\$524.14	\$393.40	\$481.91	\$781.33	\$957.13	\$699.37	\$856.72	\$464.28	\$568.74
45	\$397.16	\$486.52	\$727.85	\$891.61	\$1,080.27	\$1,323.33	\$442.27	\$541.78	\$406.63	\$498.12	\$807.61	\$989.33	\$722.90	\$885.55	\$479.90	\$587.88
46	\$412.56	\$505.39	\$756.08	\$926.19	\$1,122.17	\$1,374.65	\$459.42	\$562.79	\$422.40	\$517.44	\$838.94	\$1,027.70	\$750.93	\$919.89	\$498.51	\$610.67
47	\$429.89	\$526.61	\$787.83	\$965.09	\$1,169.30	\$1,432.39	\$478.72	\$586.43	\$440.14	\$539.17	\$874.17	\$1,070.86	\$782.47	\$958.52	\$519.45	\$636.32
48	\$449.69	\$550.87	\$824.12	\$1,009.55	\$1,223.16	\$1,498.37	\$500.77	\$613.44	\$460.42	\$564.01	\$914.44	\$1,120.19	\$818.51	\$1,002.68	\$543.38	\$665.64
49	\$469.22	\$574.79	\$859.91	\$1,053.39	\$1,276.28	\$1,563.44	\$522.51	\$640.08	\$480.41	\$588.50	\$954.15	\$1,168.83	\$854.06	\$1,046.22	\$566.97	\$694.54
50	\$491.22	\$675.43	\$900.23	\$1,237.82	\$1,336.12	\$1,837.17	\$547.02	\$752.15	\$502.94	\$691.54	\$998.89	\$1,373.48	\$894.11	\$1,229.40	\$593.56	\$816.14
51	\$512.95	\$705.31	\$940.05	\$1,292.57	\$1,395.23	\$1,918.43	\$571.21	\$785.42	\$525.18	\$722.13	\$1,043.08	\$1,434.23	\$933.66	\$1,283.78	\$619.81	\$852.24
52	\$536.88	\$738.21	\$983.91	\$1,352.87	\$1,460.31	\$2,007.93	\$597.86	\$822.06	\$549.68	\$755.81	\$1,091.73	\$1,501.13	\$977.21	\$1,343.66	\$648.73	\$892.00
53	\$561.08	\$771.49	\$1,028.26	\$1,413.86	\$1,526.14	\$2,098.45	\$624.81	\$859.12	\$574.46	\$789.89	\$1,140.95	\$1,568.81	\$1,021.26	\$1,404.24	\$677.92	\$932.21
54	\$587.21	\$807.41	\$1,076.15	\$1,479.70	\$1,597.21	\$2,196.17	\$653.91	\$899.12	\$601.22	\$826.67	\$1,194.08	\$1,641.87	\$1,068.82	\$1,469.63	\$709.55	\$975.63
55	\$613.34	\$843.34	\$1,124.03	\$1,545.54	\$1,668.29	\$2,293.89	\$683.00	\$939.13	\$627.97	\$863.46	\$1,247.22	\$1,714.92	\$1,116.38	\$1,535.03	\$741.12	\$1,019.04
56	\$641.67	\$882.29	\$1,175.95	\$1,616.93	\$1,745.34	\$2,399.84	\$714.55	\$982.51	\$656.97	\$903.34	\$1,304.82	\$1,794.13	\$1,167.95	\$1,605.93	\$775.35	\$1,066.11
57	\$670.27	\$921.62	\$1,228.37	\$1,689.01	\$1,823.14	\$2,506.82	\$746.40	\$1,026.31	\$686.26	\$943.61	\$1,362.99	\$1,874.11	\$1,220.01	\$1,677.52	\$809.91	\$1,113.63
58	\$700.80	\$963.60	\$1,284.32	\$1,765.94	\$1,906.18	\$2,621.00	\$780.40	\$1,073.05	\$717.52	\$986.59	\$1,425.07	\$1,959.47	\$1,275.58	\$1,753.92	\$846.80	\$1,164.35
59	\$715.93	\$984.40	\$1,312.04	\$1,804.06	\$1,947.33	\$2,677.58	\$797.25	\$1,096.21	\$733.00	\$1,007.88	\$1,455.83	\$2,001.77	\$1,303.11	\$1,791.78	\$865.08	\$1,189.49
60	\$746.46	\$1,026.38	\$1,367.99	\$1,880.99	\$2,030.37	\$2,791.76	\$831.24	\$1,142.96	\$764.26	\$1,050.86	\$1,517.91	\$2,087.13	\$1,358.68	\$1,868.19	\$901.97	\$1,240.21
61	\$772.86	\$1,062.69	\$1,416.38	\$1,947.52	\$2,102.19	\$2,890.51	\$860.65	\$1,183.39	\$791.30	\$1,088.03	\$1,571.60	\$2,160.96	\$1,406.74	\$1,934.27	\$933.88	\$1,284.08
62	\$790.19	\$1,086.51	\$1,448.14	\$1,991.19	\$2,149.32	\$2,955.32	\$879.94	\$1,209.92	\$809.04	\$1,112.43	\$1,606.84	\$2,209.41	\$1,438.28	\$1,977.64	\$954.81	\$1,312.87
63	\$811.92	\$1,116.39	\$1,487.96	\$2,045.94	\$2,208.42	\$3,036.58	\$904.14	\$1,263.49	\$831.28	\$1,143.01	\$1,651.02	\$2,270.16	\$1,477.83	\$2,032.02	\$981.07	\$1,348.97
64+	\$825.12	\$1,134.54	\$1,513.15	\$2,079.21	\$2,244.33	\$3,085.95	\$918.84	\$1,243.11	\$844.80	\$1,161.60	\$1,677.87	\$2,307.07	\$1,501.86	\$2,065.06	\$997.02	\$1,370.90

QCC Insurance Company
Individual
Plan Design Summary

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
31609PA0070002	Personal Choice PPO Gold	PPO	Gold	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0070003	Personal Choice PPO Silver	PPO	Silver	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0070004	Personal Choice PPO Bronze	PPO	Bronze	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0160001	Personal Choice EPO Catastrophic	EPO	Catastrophic	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0160003	Personal Choice EPO Silver Reserve	EPO	Silver	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0160004	Personal Choice EPO Platinum	EPO	Platinum	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0160005	Personal Choice EPO Bronze Reserve	EPO	Bronze	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0160006	Personal Choice EPO Bronze Basic	EPO	Bronze	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180001	Personal Choice EPO Catastrophic	EPO	Catastrophic	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180002	Personal Choice EPO Silver Reserve	EPO	Silver	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180003	Personal Choice EPO Platinum	EPO	Platinum	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180004	Personal Choice EPO Bronze Reserve	EPO	Bronze	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180005	Personal Choice EPO Bronze Basic	EPO	Bronze	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0190002	Personal Choice PPO Gold	PPO	Gold	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0190003	Personal Choice PPO Silver	PPO	Silver	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0190004	Personal Choice PPO Bronze	PPO	Bronze	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia

Company Name QCC Insurance Company

Market Individual

RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2019 Number of Covered Lives by Rating County					RATING AREA 8				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	7,300	7,228	5,854	10,637	11,142
					Bucks	Chester	Delaware	Montgomery	Philadelphia
31609PA0070002	Personal Choice PPO Gold	PPO	Gold	On	\$559.29	\$559.29	\$559.29	\$559.29	\$559.29
31609PA0070003	Personal Choice PPO Silver	PPO	Silver	On	\$500.62	\$500.62	\$500.62	\$500.62	\$500.62
31609PA0070004	Personal Choice PPO Bronze	PPO	Bronze	On	\$332.34	\$332.34	\$332.34	\$332.34	\$332.34
31609PA0160001	Personal Choice EPO Catastrophic	EPO	Catastrophic	On	\$275.04	\$275.04	\$275.04	\$275.04	\$275.04
31609PA0160003	Personal Choice EPO Silver Reserve	EPO	Silver	On	\$504.05	\$504.05	\$504.05	\$504.05	\$504.05
31609PA0160004	Personal Choice EPO Platinum	EPO	Platinum	On	\$748.11	\$748.11	\$748.11	\$748.11	\$748.11
31609PA0160005	Personal Choice EPO Bronze Reserve	EPO	Bronze	On	\$306.28	\$306.28	\$306.28	\$306.28	\$306.28
31609PA0160006	Personal Choice EPO Bronze Basic	EPO	Bronze	On	\$281.60	\$281.60	\$281.60	\$281.60	\$281.60
31609PA0180001	Personal Choice EPO Catastrophic	EPO	Catastrophic	Off	\$275.04	\$275.04	\$275.04	\$275.04	\$275.04
31609PA0180002	Personal Choice EPO Silver Reserve	EPO	Silver	Off	\$504.05	\$504.05	\$504.05	\$504.05	\$504.05
31609PA0180003	Personal Choice EPO Platinum	EPO	Platinum	Off	\$748.11	\$748.11	\$748.11	\$748.11	\$748.11
31609PA0180004	Personal Choice EPO Bronze Reserve	EPO	Bronze	Off	\$306.28	\$306.28	\$306.28	\$306.28	\$306.28
31609PA0180005	Personal Choice EPO Bronze Basic	EPO	Bronze	Off	\$281.60	\$281.60	\$281.60	\$281.60	\$281.60
31609PA0190002	Personal Choice PPO Gold	PPO	Gold	Off	\$559.29	\$559.29	\$559.29	\$559.29	\$559.29
31609PA0190003	Personal Choice PPO Silver	PPO	Silver	Off	\$500.62	\$500.62	\$500.62	\$500.62	\$500.62
31609PA0190004	Personal Choice PPO Bronze	PPO	Bronze	Off	\$332.34	\$332.34	\$332.34	\$332.34	\$332.34

	A	B	C	D	E	F	G	H	I	J
1	Unified Rate Review v5.0									
2										
3	Company Legal Name:	QCC Insurance Company, Inc.							State:	PA
4	HIOS Issuer ID:	31609							Market:	Individual
5	Effective Date of Rate Change(s):	1/1/2020								
6										
7										
8	Market Level Calculations (Same for all Plans)									
9										
10										
11	Section I: Experience Period Data									
12	Experience Period:	1/1/2018			to	12/31/2018				
13					Total	PMPM				
14	Allowed Claims				\$333,408,345.37			\$722.75		
15	Reinsurance				\$0.00			\$0.00		
16	Incurred Claims in Experience Period				\$272,647,844.23			\$591.03		
17	Risk Adjustment				\$67,723,137.32			\$146.81		
18	Experience Period Premium				\$272,135,073.99			\$589.92		
19	Experience Period Member Months				461,308					
20										
21	Section II: Projections									
22		Experience Period Index	Year 1 Trend		Year 2 Trend		Trended EHB Allowed Claims			
23	Benefit Category	Rate PMPM	Cost	Utilization	Cost	Utilization	PMPM			
24	Inpatient Hospital	\$157.50	1.012	1.014	1.012	1.014	\$165.85			
25	Outpatient Hospital	\$166.24	1.037	1.014	1.037	1.014	\$183.81			
26	Professional	\$205.43	1.022	1.014	1.022	1.014	\$220.62			
27	Other Medical	\$0.00	1.022	1.014	1.022	1.014	\$0.00			
28	Capitation	\$5.61	1.027	1.040	1.027	1.040	\$6.40			
29	Prescription Drug	\$185.18	1.020	1.014	0.980	1.014	\$190.33			
30	Total	\$719.96					\$767.00			
31										
32	Morbidity Adjustment				1.060					
33	Demographic Shift				1.008					
34	Plan Design Changes				1.000					
35	Other				1.004					
36	Adjusted Trended EHB Allowed Claims PMPM for	1/1/2020			\$822.81					
37										
38	Manual EHB Allowed Claims PMPM				\$0.00					
39	Applied Credibility %				100.00%					
40										
41										
42	Projected Period Totals									
43	Projected Index Rate for	1/1/2020			\$822.81	\$416,285,908.92				
44	Reinsurance				\$0.00	\$0.00				
45	Risk Adjustment Payment/Charge				\$86.83	\$43,930,075.56				
46	Exchange User Fees				2.84%	\$10,884,011.60				
47	Market Adjusted Index Rate				\$757.49	\$383,239,844.96				
48										
49	Projected Member Months				505,932					
50	Information Not Releasable to the Public Unless Authorized by Law: This information has not been publically disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information to the extent of the law.									
51										
52										

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11	1.2 Product ID		Personal Choice PPO Gold 31609PA0070002				Personal Choice PPO Silver 31609PA0070003				Personal Choice PPO Bronze 31609PA0070004				Personal Choice EPO Catastrophic 31609PA0160001				Personal Choice EPO Silver Reserve 31609PA0160003				Personal Choice EPO Platinum Reserve 31609PA0160004				Personal Choice EPO Bronze Basic 31609PA0160005				Personal Choice EPO Catastrophic 31609PA0180001				Personal Choice EPO Silver Reserve 31609PA0180002				Personal Choice EPO Platinum Reserve 31609PA0180003				Personal Choice EPO Bronze Basic 31609PA0180004				Personal Choice EPO Silver Reserve 31609PA0180005				Personal Choice EPO Platinum Select 31609PA0180006				Personal Choice PPO Gold 31609PA0190002				Personal Choice PPO Silver 31609PA0190003				Personal Choice PPO Bronze 31609PA0190004																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
12	1.3 Plan Name		31609PA0070002				31609PA0070003				31609PA0070004				31609PA0160001				31609PA0160003				31609PA0160004				31609PA0160005				31609PA0160006				31609PA0180001				31609PA0180002				31609PA0180003				31609PA0180004				31609PA0180005				31609PA0180006				31609PA0190002				31609PA0190003				31609PA0190004																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
13	1.4 Plan ID (Standard Component ID)		31609PA0070002				31609PA0070003				31609PA0070004				31609PA0160001				31609PA0160003				31609PA0160004				31609PA0160005				31609PA0160006				31609PA0180001				31609PA0180002				31609PA0180003				31609PA0180004				31609PA0180005				31609PA0180006				31609PA0190002				31609PA0190003				31609PA0190004																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
14	1.5 Metal		Gold				Silver				Bronze				Catastrophic				Silver				Platinum				Bronze				Catastrophic				Silver				Platinum				Bronze				Silver				Bronze				Platinum				Bronze				Silver				Bronze																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
15	1.6 AV Metal Value		0.803				0.716				0.625				0.612				0.679				0.881				0.621				0.614				0.612				0.679				0.881				0.621				0.614				0.678				0.803				0.716				0.625																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
16	1.7 Plan Category		Renewing				Renewing				Renewing				Renewing				Renewing				Renewing				Renewing				New				Renewing				Renewing				Renewing				Renewing				Renewing				Terminated				Renewing				Renewing				Renewing																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
17	1.8 Plan Type		PPO				PPO				PPO				EPO				EPO				EPO				EPO				EPO				EPO				EPO				EPO				EPO				EPO				EPO				EPO				PPO				PPO				PPO				PPO																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
18	1.9 Exchange Plan?		Yes				Yes				Yes				Yes				Yes				Yes				Yes				Yes				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No				No			

	A	B
1	Rating Area Data Collection	
2		
3		
4		
5	Rating Area	Rating Factor
6	Rating Area 8	1.0000

URRT Part II – Consumer Friendly Justification

Scope and Range of the Rate Increase:

QCC Insurance Company ("QCC") is revising premium rates for the Pennsylvania Consumer ACA compliant products, effective from January 1, 2020. The proposed revisions to each plan are shown on the second page of this exhibit.

About 42,000 members will be affected.

Financial Experience of the Product:

QCC is required by federal law to pay out a minimum of 80% percent of premium dollars for medical claims—this is referred to as the minimum Medical Loss Ratio (MLR). The rate action proposed in this filing is expected to achieve a Medical Loss Ratio of greater than 80% using the state's estimates for individual mandate and CSRs not being funded.

Changes in Taxes and Fees:

The Federal government suspended the Health Insurance Providers Fee for premiums due in 2019, but will be re-implementing it for premiums due in 2020. This adds 3.4% to 2020 premium rates.

Changes in Medical Service Costs:

Premium rates for health care insurance are increasing as the cost of health care service rise. Health care service costs increase as health care providers increase their fees, members use more health care services and supplies, and the types of health care services and supplies change, among other factors.

We are projecting that claims will increase by 4.1% in 2020. Nearly half of the change in health care service costs is driven by changes to health care provider fees.

Changes in Benefits:

Some plan benefits are mandated by federal and state law. Benefit changes for some plans were also made. All changes in benefits are in compliance with the uniform modifications rules stipulated by the Federal government.

Administrative Costs:

The premium rates presented in this filing include a 2% contribution to reserves. Furthermore, the Affordable Care Act (ACA) imposes taxes and other levies.

URRT Part II – Consumer Friendly Justification

HIOS ID	Plan Name	2020 % Change
31609PA0070002	Personal Choice PPO Gold	5.3%
31609PA0070003	Personal Choice PPO Silver	4.0%
31609PA0070004	Personal Choice PPO Bronze	5.7%
31609PA0160001	Personal Choice EPO Catastrophic	5.5%
31609PA0160003	Personal Choice EPO Silver Reserve	4.9%
31609PA0160004	Personal Choice EPO Platinum	5.4%
31609PA0160005	Personal Choice EPO Bronze Reserve	5.8%
31609PA0160006	Personal Choice EPO Bronze Basic	New
31609PA0180001	Personal Choice EPO Catastrophic	5.5%
31609PA0180002	Personal Choice EPO Silver Reserve	4.9%
31609PA0180003	Personal Choice EPO Platinum	5.4%
31609PA0180004	Personal Choice EPO Bronze Reserve	5.8%
31609PA0180005	Personal Choice EPO Bronze Basic	5.5%
31609PA0190002	Personal Choice PPO Gold	5.3%
31609PA0190003	Personal Choice PPO Silver	4.0%
31609PA0190004	Personal Choice PPO Bronze	5.7%

GENERAL OVERVIEW

PURPOSES

This Actuarial Memorandum is provided along with the Unified Rate Review Template (URRT) to provide certain information to support the gross premium for the single risk pool for individual market health care insurance underwritten by QCC Insurance Company, Inc. in the Commonwealth of Pennsylvania. It is provided as a component of an application for certification as a Qualified Health Plan and a state rate filing. This submission may not be appropriate for other purposes.

GENERAL INFORMATION

COMPANY IDENTIFYING INFORMATION

Company Legal Name: QCC Insurance Company, Inc. ("QCC")

State: Pennsylvania

HIOS Issuer ID (5-digit): 31609

Market: Individual

Effective Date(s): 1/1/2020

Worksheet 1 of the accompanying URRT contains experience period data and development of the projected Single Risk Pool Gross Premium Average Rate PMPM for the individual market for QCC. Worksheet 2 contains experience period data and projections by product for the single risk pool for the same entities.

COMPANY CONTACT INFORMATION

Primary Contact Name:

Primary Contact Telephone Number:

Primary Contact Email Address:

PROPOSED RATE INCREASE

The changes to the single risk pool gross premium average rate per member per month (PMPM) from calendar year 2018 to calendar year 2020 were incorporated into the pricing and reflected in the Unified Rate Review Template. The changes are driven by factors including: changes in market-wide population risk morbidity and covered services, increasing unit costs for medical services, increasing utilization of medical services, increasing fees and taxes imposed by the federal government, anticipated costs to administer the plan, and anticipated revenue or payments due to market-wide risk adjustment.

The weighted average increase across QCC plans based on projected membership, inclusive of the impact of benefit and cost sharing changes, is 5.1%. The minimum increase is 4.0% and the maximum increase is 5.8%.

WORKSHEET 1: MARKET EXPERIENCE

SECTION I: EXPERIENCE PERIOD DATA

SINGLE RISK POOL

The single risk pool reflects all covered lives for every individual non-grandfathered product and plan combination for KHPE in the state of Pennsylvania. It is established according to the Single Risk Pool requirements in 45 CFR § 156.80(d).

PAID THROUGH DATE

Experience period premium, claims, and member months are obtained from the company's internal data warehouse. The claims data is collected for incurred dates from January through December 2018 and paid through February 2019. Earned premiums and member months are for January through December 2018. The data are for all direct-written individual business of QCC in the Commonwealth of Pennsylvania.

PREMIUMS IN EXPERIENCE PERIOD

Earned Premiums in the Experience Period are developed by summing the earned premium reported in the company's internal data warehouse.

ALLOWED AND INCURRED CLAIMS INCURRED DURING THE EXPERIENCE PERIOD

Paid-to-Date and Incurred Claims, and Member Months

Insurer fee-for-service claims expenses and member liabilities for dates of service in January 2018 through December 2018 and paid through February 2019 are sourced from the IBCFOC's internal data warehouse. The claims and member liabilities are completed with incurred but not reported (IBNR) adjustments to develop ultimate incurred insurer fee-for-service claims expenses and member liabilities for the January through December 2018 period. Capitation amounts are also sourced from the internal data warehouse for the January through December 2018 period but they are not adjusted for IBNR.

Allowed Claims

Allowed claims are determined by separately obtaining paid-to-date fee-for-service claims and member cost-sharing amounts, applying claim lag factors to those amounts to estimate ultimate incurred fee-for-service claims and member-sharing amounts and adding them together with capitation amounts.

Allowed claims do not include ineligible claims, payments for services other than medical care provided, recovery payments related to internal large claim pooling mechanisms, or active live reserves.

IBNR Development

Medical fee for service incurred but not reported (IBNR) claims are modeled through the use of standard claim lag methodologies. A range of results is developed, and a provision for adverse deviation is applied. The provision for adverse deviation is dependent on many factors such as stability, size, product mix, etc.

The completion factors are developed annually in the 2Q – 3Q period. We do not believe our IBNR is unusually high or unusually low for incurred 2018 paid through February 2019.

Experience Period Index Rate

The Index Rate of Experience Period is estimated by removing cost and utilization trend from the Index Rate for Projection Period.

SECTION II: PROJECTIONS

BENEFIT CATEGORIES

Experience Period Index Rate PMPM Data is provided in Section II. The data is provided by benefit category using a standardized indicator from the internal data warehouse that assigns each claim line to a category based on the type of provider and the location of the service.

PROJECTION FACTORS

The estimated incurred claims experience on an allowed basis for January 2018 through December 2018 is projected to the future rating period by several factors.

Morbidity Adjustment

Experience period allowed claims are adjusted to account for differences in the average morbidity of the single risk pool population underlying the experience and the anticipated population in the projection period. This adjustment reflects changes in the individual market-wide morbidity.

Demographic Shift

This factor reflects the projected change in the average age, rating area, and tobacco utilization of the single risk pool.

Plan Design Changes

This factor reflects any changes in EHB allowed claims due to plan design changes.

Other Changes

This factor reflects changes in cost related to items other than changes in Morbidity, Demographic Shift, or Plan Design.

Trend Factors

a. Annualized Cost Trend

Annual cost trend reflects changes in costs of medical treatment due to medical inflation and changes in the distribution of services across network providers. The trend value is developed by reviewing historical medical costs for the single risk pool and adjusting them for anticipated future provider contracting reimbursement levels. The data is normalized for changes in age, benefit changes during the experience period, changes to provider contracts, and prescription drug formulary, and new drugs brought to market.

b. Annualized Utilization Trend

Annual utilization trend reflects the change in the number of units per 1,000 members for a fixed level of illness burden and includes changes due to the mix and intensity of services provided and changes related to shifts in product mix. It also includes effects of selection, if any, since this cannot be reflected in the relative cost of the various products and plans offered.

CREDIBILITY MANUAL RATE DEVELOPMENT

The experience period claims for the single risk pool are determined to be fully credible; therefore no credibility adjustment is required.

RISK ADJUSTMENT AND REINSURANCE

Projected Risk Adjustment PMPM

Projected Risk Adjustment is accounted for in Projected Incurred Claims before ACA Reinsurance and Risk Adjustment to reflect anticipated risk adjustment transfer amounts for the projection period. The amount reflects the projected morbidity for the single risk pool.

The estimated risk adjustment revenue for all of the plans in the risk pool is developed using the following methodology. We recognize that the HHS payment transfer formula implies that the projected incurred claims based solely on the experience period single risk pool claims need to be adjusted by the ratio of the current statewide market's risk relative to allowable rating factor (ARF) for age compared to the single risk pool's risk relative to ARF presented during the experience period. This adjustment, together with the assumed future changes in population risk morbidity, results in the issuer's pricing being consistent with the anticipated morbidity level of the future statewide market.

The anticipated risk adjustment transfer revenue is allocated proportionally based on plan premium. The Projected Risk Adjustment is subtracted from Projected Incurred Claims before ACA Risk Adjustment to reflect anticipated receipt of risk adjustment transfer amounts for the projection period.

When the projected risk adjustment amounts for KHPE and QCC are combined, the result is consistent with the projection made in our submission. We also considered preliminary 2018 risk transfer results.

Projected ACA Reinsurance Recoveries Net of Reinsurance Premium (Individual Market Only)

With the expiration of the reinsurance program at the end of the 2016 benefit year, there are no projected reinsurance recoveries or reinsurance premium assumed in the rates.

MARKET ADJUSTED INDEX RATE

The template calculates a MAIR by subtracting the amounts entered for reinsurance and risk adjustment and dividing by 1 minus the exchange user fee percentage. The MAIR calculation flows into Worksheet 2.

The Market Adjusted Index rate is calculated as the Index Rate adjusted for all allowable market-wide modifiers defined in the market rating rules: federal reinsurance program adjustment, risk adjustment and exchange user fees. The Market Adjusted Index Rate reflects the average demographic characteristics of the single risk pool.

WORKSHEET 2: PRODUCT-PLAN DATA COLLECTION

SECTION I: GENERAL PRODUCT AND PLAN INFORMATION

All products and plans included in the single risk pool are shown in Worksheet 2.

AV METAL VALUES

The AV Metal Values included in Worksheet 2 of the URRT were valued using the AV Calculator, where possible, otherwise the AV Metal Values were developed under an alternate methodology. Actuarial certifications required by 45 CFR Part 156, §156.135 are provided in a separate document.

SECTION II: EXPERIENCE PERIOD AND CURRENT PLAN LEVEL INFORMATION

Experience Period data is shown for each plan included in the single risk pool.

SECTION III: PLAN ADJUSTMENT FACTORS

The MAIR is adjusted for each plan based on its plan design, provider network, and non-EHBs. Administrative costs are added to calculate the Plan Adjusted Index Rate. The Plan Adjusted Index Rate is multiplied by the Age Calibration Factor, Geographic Calibration Factor, and Tobacco Calibration Factor to calculate the Calibrated Plan Adjusted Index Rate.

PLAN ADJUSTED INDEX RATE

The Plan Adjusted Index Rate is calculated as the issuer Market Adjusted Index Rate adjusted for all allowable plan level modifiers defined in the market rating rule. These include actuarial value and cost sharing adjustment, provider network, delivery system and utilization management adjustment, adjustment for benefits in addition to the EHBs, impact of specific eligibility categories for the catastrophic plan and administrative costs.

NON-BENEFIT EXPENSES AND PROFIT & RISK

Administrative Expense Load

An Administrative Expense Load is applied to Projected Incurred Claims to reflect expenses related to quality improvement and fraud detection/recovery and other expenses of operating a business, broker commissions, and premium payment processing fees.

Profit & Risk Load/Contribution to Surplus

A Profit & Risk Load/Contribution to Surplus for the single risk pool is applied to Projected Incurred Claims for the projection period, if applicable.

Taxes and Fees

A Taxes & Fees load is applied to Projected Incurred Claims to pass through fees and taxes levied by the federal and state governments.

CALIBRATION

The plan adjusted index rate is projected for all products using the same anticipated age distribution and the mandated age curve. Therefore the consumer adjusted premium rate is the plan adjusted index rate divided by the average age, geographic and tobacco factors for the expected distribution. The average age of the combined individual risk pool population is 41.

The Average Age factor is the reciprocal of the weighted average age factor based on the projected membership. The Tobacco Factor is calculated as the reciprocal of the projected average factor for tobacco users multiplied by the projected tobacco use prevalence.

There is only one geographic rating area for this filing. The geographic rating area factor for this filing is 1.0.

Small differences result between the Calibrated Plan Adjusted Index rates and the Age 21 non-tobacco rates in the Rate Template due to rounding restrictions required in the URRT Part 1.

When rounded to the nearest dollar, the Calibrated Plan Adjusted Index Rates match the Age 21 non-tobacco rates in the Rate Template as required in the DIT.

MEMBERSHIP PROJECTIONS

Enrollment is projected based on current and anticipated enrollment by plan. Items impacting these projections include changes in the size of the market due to guarantee issue requirements and the individual mandate changes. The enrollment is our February 2019 enrollment.

LOSS RATIO

The loss ratio calculated in Section IV is generated within the template and is not based on the MLR formula. The projected loss ratio for the single risk pool is estimated to exceed 80% reflecting premium adjustments permitted by the federal MLR calculation.

INDEX RATE

The Index Rate is defined as the EHB portion of projected allowed claims divided by all projected single risk pool lives. The Index Rate is the same value for all non-grandfathered plans for QCC Individual Plans in Pennsylvania. The Index Rate reflects the twelve month projection for calendar year 2020. It has been developed following the specifications of 45 CFR § 156.80(d)(1).

TERMINATED PLANS

The following plan is being terminated during 2020:

31609PA0180006 Personal Choice EPO Silver Reserve Select

WORKSHEET 3: RATING AREAS

There are nine rating areas in Pennsylvania. These plans are offered only in Rating Area 8, which consists of Bucks, Chester, Delaware, Montgomery, and Philadelphia counties.

ACTUARIAL CERTIFICATION

I, [REDACTED], am Director & Actuary of Commercial Markets for the Independence Blue Cross Family of Companies. I am a member of the Society of Actuaries and the American Academy of Actuaries in good standing with the education and experience necessary to perform the work necessary and meet the Qualification Standards of the American Academy of Actuaries to render the qualified actuarial opinion contained herein. The developed rates and memorandum have been prepared in conformity with appropriate Actuarial Standards of Practice and the Academy's Code of Professional Conduct.

The Part I Unified Rate Review Template does not demonstrate the process used by the issuer to develop the premium rates and allowable rating factors. Rather, it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of Qualified Health Plans for Federally-facilitated Exchanges, and for certification that the Index Rate is developed in accordance with federal regulation and used consistently and only adjusted by the allowable modifiers.

I hereby certify that, to the best of my knowledge and judgment, the following:

- The projected index rate is:
 - In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80 and 147.102);
 - Developed in compliance with applicable Actuarial Standards of Practice;
 - Reasonable in relation to the benefits provided and the population anticipated to be covered; and
 - Neither excessive nor deficient.
- The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates.
- Geographic rating factors reflect only differences in the costs of delivery of and do not include differences for population morbidity by geographic area.
- The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans, unless an alternate methodology was required. When an alternate methodology was used to calculate the AV Metal Value a copy of the actuarial certification required by 45 CFR Part 156, §156.135 was included.
- The Induced Demand factors applied to Platinum plans were reduced at the direction of the Pennsylvania Insurance Department. They are different from the induced demand factors that we had proposed.

[REDACTED]
May 21, 2019

2020 Rates Table Template v9.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID* Federal TIN* Rate Effective Date* Rate Expiration Date* Rating Method*	31609				
	23-2184623				
	1/1/2020				
	12/31/2020				
Age-Based Rates					
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an Individual tobacco enrollee on a plan
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	427.86	427.86
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	15	465.89	465.89
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	16	480.43	480.43
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	17	494.97	494.97
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	18	510.63	510.63
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	19	526.29	526.29
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	20	542.51	542.51
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	21	559.29	629.20
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	22	559.29	629.20
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	23	559.29	629.20
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	24	559.29	629.20
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	25	561.53	631.72
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	26	572.71	644.30
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	27	586.14	659.40
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	28	607.95	683.94
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	29	625.85	704.08
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	30	634.79	745.88
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	31	648.22	761.66
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	32	661.64	777.43
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	33	670.03	787.28
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	34	678.98	797.80
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	35	683.45	803.06
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	36	687.93	808.31
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	37	692.40	813.57
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	38	696.88	818.83
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	39	705.82	829.34
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	40	714.77	875.60
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	41	728.20	892.04
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	42	741.06	907.80
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	43	758.96	929.72
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	44	781.33	957.13
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	45	807.61	989.33
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	46	838.94	1027.70
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	47	874.17	1070.86
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	48	914.44	1120.19
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	49	954.15	1168.83
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	50	998.89	1373.48
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	51	1043.08	1434.23
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	52	1091.73	1501.13
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	53	1140.95	1568.81
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	54	1194.08	1641.87
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	55	1247.22	1714.92
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	56	1304.82	1794.13
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	57	1362.99	1874.11
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	58	1425.07	1959.47
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	59	1455.83	2001.77
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	60	1517.91	2087.13
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	61	1571.60	2160.96
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	62	1606.84	2209.41
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	63	1651.02	2270.16
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1677.87	2307.07
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	382.97	382.97
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	15	417.02	417.02
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	16	430.03	430.03
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	17	443.05	443.05
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	18	457.07	457.07
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	19	471.08	471.08
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	20	485.60	485.60
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	21	500.62	563.20
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	22	500.62	563.20
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	23	500.62	563.20
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	24	500.62	563.20
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	25	502.62	565.45
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	26	512.63	576.71
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	27	524.65	590.23
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	28	544.17	612.20
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	29	560.19	630.22
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	30	568.20	667.64
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	31	580.22	681.76
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	32	592.23	695.87
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31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	35	611.76	718.82
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31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	40	424.73	520.29
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	41	432.71	530.07
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	42	440.35	539.43
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	43	450.99	552.46
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	44	464.28	568.74
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	45	479.90	587.88
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	46	498.51	610.67
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	47	519.45	636.32
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	48	543.38	665.64
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31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	58	846.80	1164.35
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	59	865.08	1189.49
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	60	901.97	1240.21
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	61	933.88	1284.08
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	62	954.81	1312.87
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	63	981.07	1348.97
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	997.02	1370.90
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	210.41	210.41
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	15	229.11	229.11
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	16	236.26	236.26
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	17	243.41	243.41
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	18	251.11	251.11
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	19	258.81	258.81
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	20	266.79	266.79
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	21	275.04	309.42
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	22	275.04	309.42
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	23	275.04	309.42
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	24	275.04	309.42
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	25	276.14	310.66
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	26	281.64	316.85
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	27	288.24	324.27
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	28	298.97	336.34
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	29	307.77	346.24
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	30	312.17	366.80
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	31	318.77	374.56
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	32	325.37	382.31

31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	33	329.50	387.16
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	34	333.90	392.33
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	35	336.10	394.92
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	36	338.30	397.50
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	37	340.50	400.09
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	38	342.70	402.67
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	39	347.10	407.84
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	40	351.50	430.59
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	41	358.10	438.68
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	42	364.43	446.42
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	43	373.23	457.21
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	44	384.23	470.68
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	45	397.16	486.52
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	46	412.56	505.39
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	47	429.89	526.61
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	48	449.69	550.87
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	49	469.22	574.79
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	50	491.22	675.43
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	51	512.95	705.31
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	52	536.88	738.21
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	53	561.08	771.49
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	54	587.21	807.41
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	55	613.34	843.34
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	56	641.67	882.29
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	57	670.27	921.62
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	58	700.80	963.60
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	59	715.93	984.40
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	60	746.46	1026.38
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	61	772.86	1062.69
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	62	790.19	1086.51
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	63	811.92	1116.39
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	825.12	1134.54
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	385.60	385.60
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	15	419.87	419.87
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	16	432.98	432.98
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	17	446.08	446.08
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	18	460.20	460.20
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	19	474.31	474.31
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	20	488.93	488.93
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	21	504.05	567.06
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	22	504.05	567.06
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	23	504.05	567.06
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	24	504.05	567.06
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	25	506.07	569.32
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	26	516.15	580.67
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	27	528.24	594.27
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	28	547.90	616.39
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	29	564.03	634.54
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	30	572.10	672.21
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	31	584.19	686.43
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	32	596.29	700.64
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	33	603.85	709.53
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	34	611.92	719.00
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	35	615.95	723.74
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	36	619.98	728.48
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	37	624.01	733.22
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	38	628.05	737.95
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	39	636.11	747.43
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	40	644.18	789.12
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	41	656.27	803.93
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	42	667.87	818.14
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	43	684.00	837.89
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	44	704.16	862.59
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	45	727.85	891.61
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	46	756.08	926.19
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	47	787.83	965.09
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	48	824.12	1009.55
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	49	859.91	1053.39
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	50	900.23	1237.82
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	51	940.05	1292.57
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	52	983.91	1352.87
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	53	1028.26	1413.86
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	54	1076.15	1479.70
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	55	1124.03	1545.54
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	56	1175.95	1616.93
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	57	1228.37	1689.01
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	58	1284.32	1765.94
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	59	1312.04	1804.06
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	60	1367.99	1880.99
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	61	1416.38	1947.52
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	62	1448.14	1991.19
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	63	1487.96	2045.94
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1512.15	2079.21
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	572.30	572.30
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	15	623.18	623.18
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	16	642.63	642.63
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	17	662.08	662.08
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	18	683.02	683.02
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	19	703.97	703.97
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	20	725.67	725.67
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	21	748.11	841.62
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	22	748.11	841.62
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	23	748.11	841.62
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	24	748.11	841.62
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	25	751.10	844.99
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	26	766.06	861.82

31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	27	784.02	882.02
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	28	813.20	914.85
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	29	837.14	941.78
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	30	849.10	997.70
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	31	867.06	1018.79
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	32	885.01	1039.89
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	33	896.24	1053.08
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	34	908.21	1067.14
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	35	914.19	1074.17
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	36	920.18	1081.21
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	37	926.16	1088.24
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	38	932.15	1095.27
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	39	944.11	1109.33
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	40	956.08	1171.20
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	41	974.04	1193.20
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	42	991.25	1214.28
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	43	1015.19	1243.60
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	44	1045.11	1280.26
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	45	1080.27	1323.33
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	46	1122.17	1374.65
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	47	1169.30	1432.39
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	48	1223.16	1498.37
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	49	1276.28	1563.44
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	50	1336.12	1837.17
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	51	1395.23	1918.43
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	52	1460.31	2007.93
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	53	1526.14	2098.45
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	54	1597.21	2196.17
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	55	1668.29	2293.89
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	56	1745.34	2399.84
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	57	1823.14	2506.82
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	58	1906.18	2621.00
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	59	1947.33	2677.58
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	60	2030.37	2791.76
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	61	2102.19	2890.51
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	62	2149.32	2955.32
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	63	2208.42	3036.58
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	2244.33	3085.95
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	234.30	234.30
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	15	255.13	255.13
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	16	263.09	263.09
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	17	271.06	271.06
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	18	279.63	279.63
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	19	288.21	288.21
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	20	297.09	297.09
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	21	306.28	344.57
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	22	306.28	344.57
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	23	306.28	344.57
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	24	306.28	344.57
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	25	307.51	345.94
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	26	313.63	352.83
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	27	320.98	361.10
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	28	332.93	374.54
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	29	342.73	385.57
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	30	347.63	408.46
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	31	354.98	417.10
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	32	362.33	425.74
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	33	366.92	431.14
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	34	371.82	436.89
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	35	374.27	439.77
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	36	376.72	442.65
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	37	379.17	445.53
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	38	381.62	448.41
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	39	386.53	454.17
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	40	391.43	479.50
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	41	398.78	488.50
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	42	405.82	497.13
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	43	415.62	509.14
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	44	427.87	524.14
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	45	442.27	541.78
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	46	459.42	562.79
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	47	478.72	586.43
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	48	500.77	613.44
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	49	522.51	640.08
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	50	547.02	752.15
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	51	571.21	785.42
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	52	597.86	822.06
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	53	624.81	859.12
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	54	653.91	899.12
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	55	683.00	939.13
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	56	714.55	982.51
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	57	746.40	1026.31
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	58	780.40	1073.05
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	59	797.25	1096.21
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	60	831.24	1142.96
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	61	860.65	1183.39
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	62	879.94	1209.92
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	63	904.14	1243.19
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	918.84	1263.41
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	215.42	215.42
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	15	234.57	234.57
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	16	241.89	241.89
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	17	249.22	249.22
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	18	257.10	257.10
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	19	264.99	264.99
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	20	273.15	273.15

31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	21	281.60	316.80
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	22	281.60	316.80
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	23	281.60	316.80
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	24	281.60	316.80
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	25	282.73	318.07
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	26	288.36	324.40
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	27	295.12	332.01
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	28	306.10	344.36
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	29	315.11	354.50
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	30	319.62	375.55
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	31	326.37	383.49
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	32	333.13	391.43
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	33	337.36	396.39
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	34	341.86	401.69
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	35	344.12	404.34
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	36	346.37	406.98
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	37	348.62	409.63
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	38	350.87	412.28
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	39	355.38	417.57
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	40	359.88	440.86
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	41	366.64	449.14
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	42	373.12	457.07
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	43	382.13	468.11
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	44	393.40	481.91
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	45	406.63	498.12
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	46	422.40	517.44
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	47	440.14	539.17
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	48	460.42	564.01
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	49	480.41	588.50
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	50	502.94	691.54
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	51	525.18	722.13
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	52	549.68	755.81
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	53	574.46	789.89
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	54	601.22	826.67
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	55	627.97	863.46
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	56	656.97	903.34
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	57	686.26	943.61
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	58	717.52	986.59
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	59	733.00	1007.88
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	60	764.26	1050.86
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	61	791.30	1088.03
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	62	809.04	1112.43
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	63	831.28	1143.01
31609PA0160006	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	844.80	1161.60
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	210.41	210.41
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	15	229.11	229.11
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	16	236.26	236.26
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	17	243.41	243.41
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	18	251.11	251.11
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	19	258.81	258.81
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	20	266.79	266.79
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	21	275.04	309.42
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	22	275.04	309.42
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	23	275.04	309.42
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	24	275.04	309.42
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	25	276.14	310.66
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	26	281.64	316.85
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	27	288.24	324.27
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	28	298.97	336.34
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	29	307.77	346.24
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	30	312.17	366.80
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	31	318.77	374.56
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	32	325.37	382.31
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	33	329.50	387.16
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	34	333.90	392.33
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	35	336.10	394.92
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	36	338.30	397.50
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	37	340.50	400.09
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	38	342.70	402.67
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	39	347.10	407.84
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	40	351.50	430.59
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	41	358.10	438.68
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	42	364.43	446.42
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	43	373.23	457.21
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	44	384.23	470.68
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	45	397.16	486.52
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	46	412.56	505.39
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	47	429.89	526.61
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	48	449.69	550.87
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	49	469.22	574.79
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	50	491.22	675.43
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	51	512.95	705.31
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	52	536.88	738.21
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	53	561.08	771.49
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	54	587.21	807.41
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	55	613.34	843.34
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	56	641.67	882.29
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	57	670.27	921.62
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	58	700.80	963.60
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	59	715.93	984.40
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	60	746.46	1026.38
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	61	772.86	1062.69
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	62	790.19	1086.51
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	63	811.92	1116.39
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	825.12	1134.54
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	385.60	385.60

31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	60	2030.37	2791.76
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	61	2102.19	2890.51
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	62	2149.32	2955.32
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	63	2208.42	3036.58
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	2244.33	3085.95
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	234.30	234.30
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	15	255.13	255.13
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	16	263.09	263.09
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	17	271.06	271.06
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	18	279.63	279.63
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	19	288.21	288.21
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	20	297.09	297.09
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	21	306.28	344.57
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	22	306.28	344.57
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	23	306.28	344.57
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	24	306.28	344.57
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	25	307.51	345.94
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	26	313.63	352.83
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	27	320.98	361.10
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	28	332.93	374.54
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	29	342.73	385.57
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	30	347.63	408.46
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	31	354.98	417.10
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	32	362.33	425.74
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	33	366.92	431.14
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	34	371.82	436.89
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	35	374.27	439.77
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	36	376.72	442.65
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	37	379.17	445.53
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	38	381.62	448.41
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	39	386.53	454.17
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	40	391.43	479.50
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	41	398.78	488.50
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	42	405.82	497.13
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	43	415.62	509.14
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	44	427.87	524.14
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	45	442.27	541.78
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	46	459.42	562.79
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	47	478.72	586.43
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	48	500.77	613.44
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	49	522.51	640.08
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	50	547.02	752.15
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	51	571.21	785.42
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	52	597.86	822.06
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	53	624.81	859.12
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	54	653.91	899.12
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	55	683.00	939.13
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	56	714.55	982.51
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	57	746.40	1026.31
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	58	780.40	1073.05
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	59	797.25	1096.21
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	60	831.24	1142.96
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	61	860.65	1183.39
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	62	879.94	1209.92
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	63	904.14	1243.19
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	918.84	1263.41
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	215.42	215.42
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	15	234.57	234.57
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	16	241.89	241.89
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	17	249.22	249.22
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	18	257.10	257.10
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	19	264.99	264.99
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	20	273.15	273.15
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	21	281.60	316.80
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	22	281.60	316.80
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	23	281.60	316.80
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	24	281.60	316.80
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	25	282.73	318.07
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	26	288.36	324.40
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	27	295.12	332.01
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	28	306.10	344.36
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	29	315.11	354.50
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	30	319.62	375.55
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	31	326.37	383.49
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	32	333.13	391.43
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	33	337.36	396.39
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	34	341.86	401.69
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	35	344.12	404.34
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	36	346.37	406.98
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	37	348.62	409.63
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	38	350.87	412.28
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	39	355.38	417.57
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	40	359.88	440.86
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	41	366.64	449.14
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	42	373.12	457.07
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	43	382.13	468.11
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	44	393.40	481.91
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	45	406.63	498.12
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	46	422.40	517.44
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	47	440.14	539.17
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	48	460.42	564.01
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	49	480.41	588.50
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	50	502.94	691.54
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	51	525.18	722.13
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	52	549.68	755.81
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	53	574.46	789.89

31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	54	601.22	826.67
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	55	627.97	863.46
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	56	656.97	903.34
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	57	686.26	943.61
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	58	717.52	986.59
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	59	733.00	1007.88
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	60	764.26	1050.86
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	61	791.30	1088.03
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	62	809.04	1112.43
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	63	831.28	1143.01
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	844.80	1161.60
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	427.86	427.86
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	15	465.89	465.89
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	16	480.43	480.43
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	17	494.97	494.97
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	18	510.63	510.63
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	19	526.29	526.29
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	20	542.51	542.51
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	21	559.29	629.20
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	22	559.29	629.20
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	23	559.29	629.20
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	24	559.29	629.20
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	25	561.53	631.72
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	26	572.71	644.30
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	27	586.14	659.40
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	28	607.95	683.94
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	29	625.85	704.08
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	30	634.79	745.88
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	31	648.22	761.66
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	32	661.64	777.43
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	33	670.03	787.28
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	34	678.98	797.80
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	35	683.45	803.06
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	36	687.93	808.31
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	37	692.40	813.57
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	38	696.88	818.83
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	39	705.82	829.34
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	40	714.77	875.60
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	41	728.20	892.04
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	42	741.06	907.80
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	43	758.96	929.72
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	44	781.33	957.13
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	45	807.61	989.33
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	46	838.94	1027.70
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	47	874.17	1070.86
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	48	914.44	1120.19
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	49	954.15	1168.83
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	50	998.89	1373.48
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	51	1043.08	1434.23
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	52	1091.73	1501.13
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	53	1140.95	1568.81
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	54	1194.08	1641.87
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	55	1247.22	1714.92
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	56	1304.82	1794.13
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	57	1362.99	1874.11
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	58	1425.07	1959.47
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	59	1455.83	2001.77
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	60	1517.91	2087.13
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	61	1571.60	2160.96
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	62	1606.84	2209.41
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	63	1651.02	2270.16
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1677.87	2307.07
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	382.97	382.97
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	15	417.02	417.02
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	16	430.03	430.03
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	17	443.05	443.05
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	18	457.07	457.07
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	19	471.08	471.08
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	20	485.60	485.60
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	21	500.62	563.20
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	22	500.62	563.20
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	23	500.62	563.20
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	24	500.62	563.20
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	25	502.62	565.45
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	26	512.63	576.71
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	27	524.65	590.23
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	28	544.17	612.20
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	29	560.19	630.22
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	30	568.20	667.64
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	31	580.22	681.76
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	32	592.23	695.87
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	33	599.74	704.70
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	34	607.75	714.11
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	35	611.76	718.82
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	36	615.76	723.52
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	37	619.77	728.23
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	38	623.77	732.93
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	39	631.78	742.34
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	40	639.79	783.75
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	41	651.81	798.46
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	42	663.32	812.57
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	43	679.34	832.19
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	44	699.37	856.72
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	45	722.90	885.55
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	46	750.93	919.89
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	47	782.47	958.52

31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	48	818.51	1002.68
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	49	854.06	1046.22
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	50	894.11	1229.40
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	51	933.66	1283.78
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	52	977.21	1343.66
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	53	1021.26	1404.24
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	54	1068.82	1469.63
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	55	1116.38	1535.03
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	56	1167.95	1605.93
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	57	1220.01	1677.52
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	58	1275.58	1753.92
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	59	1303.11	1791.78
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	60	1358.68	1868.19
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	61	1406.74	1934.27
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	62	1438.28	1977.64
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	63	1477.83	2032.02
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1501.86	2065.06
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	254.24	254.24
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	15	276.84	276.84
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	16	285.48	285.48
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	17	294.12	294.12
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	18	303.43	303.43
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	19	312.73	312.73
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	20	322.37	322.37
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	21	332.34	373.88
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	22	332.34	373.88
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	23	332.34	373.88
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	24	332.34	373.88
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	25	333.67	375.38
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	26	340.32	382.86
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	27	348.29	391.83
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	28	361.25	406.41
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	29	371.89	418.37
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	30	377.21	443.22
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	31	385.18	452.59
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	32	393.16	461.96
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	33	398.14	467.82
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	34	403.46	474.07
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	35	406.12	477.19
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	36	408.78	480.31
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	37	411.44	483.44
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	38	414.10	486.56
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	39	419.41	492.81
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	40	424.73	520.29
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	41	432.71	530.07
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	42	440.35	539.43
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	43	450.99	552.46
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	44	464.28	568.74
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	45	479.90	587.88
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	46	498.51	610.67
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	47	519.45	636.32
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	48	543.38	665.64
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	49	566.97	694.54
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	50	593.56	816.14
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	51	619.81	852.24
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	52	648.73	892.00
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	53	677.97	932.21
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	54	709.55	975.63
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	55	741.12	1019.04
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	56	775.35	1066.11
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	57	809.91	1113.63
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	58	846.80	1164.35
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	59	865.08	1189.49
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	60	901.97	1240.21
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	61	933.88	1284.08
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	62	954.81	1312.87
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	63	981.07	1348.97
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	997.02	1370.90

Cover Page

HIOS Issuer ID: 31609

HIOS Product IDs: 31609PA007, 31609PA019, 31609PA016, 31609PA018

This single PDF file contains three separate actuarial certifications for the unique plan designs under Issuer ID 31609. Please refer to all of the pages contained herein.

Unique Plan Design Supporting Documentation and Justification

ACTUARIAL MEMORANDUM

HIOS Issuer ID: 31609

HIOS Product IDs: 31609PA016, 31609PA018

Applicable HIOS Plan IDs (Standard Component): 31609PA0160004, 31609PA0180003, 31609PA0160003, 31609PA0180002

Purpose of document:

The purpose of this document is to provide CMS with a justification of the methods used in calculating the actuarial value for unique plan designs offered in the individual or small group market for the plan year beginning 1/1/2020. As prescribed by law, the AV calculation was based on the AV calculator to the full extent possible. The AV is meant to represent the average percent of costs paid by the insurer for a standard population and may vary from actual member experience. The resulting AV was based on prescribed methodology and, therefore, may not reasonably reflect the actuary's estimate of the portion of allowed costs covered by the health insurance plan. The AV was determined based on the plan's benefits and coverage data, the standard population, and utilization and continuance tables published by HHS for purposes of the valuation of AV. This actuarial analysis is not appropriate for any other purposes.

Reasons the plan design is unique (benefits that are not compatible with the parameters of the AV calculator and the materiality of those benefits):

The cost-sharing of inpatient hospital services for these plans differs by facility and professional claims. Inpatient hospital services account for about 21% of allowed costs in the AV calculation.

The cost-sharing for laboratory outpatient and professional services varies by site of service. Lab work done at the office or a free-standing facility has zero cost-sharing, and lab work done by a hospital has 50% coinsurance. Laboratory outpatient and professional services account for roughly 3% of allowed costs in the AV calculation.

The cost-sharing for occupational and physical therapy varies by site of service. Occupational and physical therapy accounts for roughly 2% of allowed costs in the AV calculation.

The cost-sharing for x-rays and diagnostic imaging varies by site of service. X-rays and diagnostic imaging accounts for roughly 4% of allowed costs in the AV calculation.

The cost-sharing for imaging (CT/PET scans, MRIs) varies by site of service. Imaging accounts for roughly 2% of allowed costs in the AV calculation.

Acceptable alternate method used per 156.135(b)(2) or 156.135(b)(3):

Method 156.135(b)(2) was used for laboratory (for plans with no deductible), x-rays, imaging, inpatient hospital cost-sharing, and outpatient facility site of service cost-sharing.

Confirmation that only in-network cost-sharing, including multitier networks, was

considered:

I confirm that only in-network cost-sharing was considered.

Description of the standardized plan population data used:

We used our commercial PPO and HMO data incurred between July 2017 and June 2018.

For the freestanding and hospital utilization data for laboratory services, we used our commercial PPO data incurred between July 2017 and June 2018.

For the physical therapy and radiology site-of-service utilization, we used our commercial PPO data incurred between July 2017 and June 2018.

If the method described in 156.135(b)(2) was used, a description of how the benefits were modified to fit the parameters of the AV calculator:

Combination of Coinsurance for IP Hospital

The coinsurance for inpatient hospital facility claims were blended with the coinsurance on professional claims to calculate equivalent coinsurance for inpatient claims. Based on our data, we assumed that 84% of the cost was from facility claims and the remaining 16% was from professional claims.

HIOS IDs	31609PA0160003, 31609PA0180002
Facility	25%
Professional	30%
Blend	74.2%

The silver variations, 31609PA0160003-04, 31609PA0160003-05 and 31609PA0160003-06, do not require blending of the facility and professional inpatient coinsurances. They are included in this justification solely because their standard component is a unique plan design, and the Plans and Benefits template required indicating the same for these cost sharing variations. In fact, the actual benefit coinsurance amounts were entered directly into the AV calculator.

Laboratory Site-of-service Differential for Plans with No Deductible

For the lab site of service cost-sharing, our recent data suggested that 20% of units are at a hospital setting with an average unit cost of \$52.82, while 80% of units are at a freestanding setting with an average unit cost of \$19.08. Taking a weighted average of a 50% issuer coinsurance applied to \$52.82 and a 100% issuer coinsurance applied to \$19.08 produced an average issuer paid amount of \$20.29 out of an average cost of \$24.63, giving an effective issuer coinsurance of 82.4% which was entered into the AV calculator.

Occupational and Physical Therapy Site-of-service Differential

For the physical therapy site of service cost-sharing, our recent data indicated that 88% of utilization came from the preferred site. The cost-sharing entered into the AV calculator is a weighted average of the copays at each site.

X-rays and Diagnostic Imaging Site-of-service Copay Differential

For the x-ray site of service cost-sharing, our recent data indicated that 45% of utilization came from the preferred site. The cost-sharing entered into the AV calculator is a weighted average of copays based on utilization at each site.

Imaging (CT/PET scans, MRIs) Site-of-service Copay Differential

For the imaging site of service cost-sharing, our recent data indicated that 45% of utilization came from the preferred site. The cost-sharing entered into the AV calculator is a weighted average of copays based on utilization at each site.

		Cost-sharing		
HIOS ID	Service Type	Preferred Site	Non-preferred Site	AV Input
31609PA0160004, 31609PA0180003	Phys. Ther.	\$50	\$80	\$53.60
	X-rays	\$40	\$70	\$56.50
	Imaging	\$80	\$120	\$102.00

If the method described in 156.135(b)(3) was used, a description of the data and method used to develop the adjustments:

Not applicable.

Certification Language:

The development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for those benefits that deviate substantially from the parameters of the AV Calculator and have a material impact on the AV.

The analysis was

- (i) conducted by a member of the American Academy of Actuaries; and
- (ii) performed in accordance with generally accepted actuarial principles and methodologies.

I am an employee of the issuer, I meet the *Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States* promulgated by the American Academy of Actuaries, and I have the education and experience necessary to perform this work. All AVs herein were determined in accordance with the ASOPs established by the Actuarial Standards Board and comply with applicable laws and regulations; furthermore, all metal levels herein were appropriately assigned based on applicable law.

Actuary signature: _____

Actuary Printed Name: _____

Date: 5/21/2019

AV screenshots redacted.

Unique Plan Design Supporting Documentation and Justification

ACTUARIAL MEMORANDUM

HIOS Issuer ID: 31609

HIOS Product IDs: 31609PA007, 31609PA019

Applicable HIOS Plan IDs (Standard Component): 31609PA0070002, 31609PA0190002, 31609PA0070003, 31609PA0190003, 31609PA0070004, 31609PA0190004

Purpose of document:

The purpose of this document is to provide CMS with a justification of the methods used in calculating the actuarial value for unique plan designs offered in the individual or small group market for the plan year beginning 1/1/2020. As prescribed by law, the AV calculation was based on the AV calculator to the full extent possible. The AV is meant to represent the average percent of costs paid by the insurer for a standard population and may vary from actual member experience. The resulting AV was based on prescribed methodology and, therefore, may not reasonably reflect the actuary's estimate of the portion of allowed costs covered by the health insurance plan. The AV was determined based on the plan's benefits and coverage data, the standard population, and utilization and continuance tables published by HHS for purposes of the valuation of AV. This actuarial analysis is not appropriate for any other purposes.

Reasons the plan design is unique (benefits that are not compatible with the parameters of the AV calculator and the materiality of those benefits):

The cost-sharing of inpatient hospital services for these plans differs by facility and professional claims. Inpatient hospital services account for about 21% of allowed costs in the AV calculation.

The cost-sharing for laboratory outpatient and professional services varies by site of service. Laboratory outpatient and professional services account for roughly 3% of allowed costs in the AV calculation.

The outpatient facility fee cost-sharing for 31609PA0070003 and 31609PA0190003 varies by site of service. Services have different coinsurances for a free-standing facility setting and a hospital setting. Outpatient facility fee accounts for roughly 12% of allowed costs in the AV calculation.

The cost-sharing for occupational and physical therapy for 31609PA0190002, 31609PA0070002, 31609PA0190003, 31609PA0070003 varies by site of service. Occupational and physical therapy accounts for roughly 2% of allowed costs in the AV calculation.

The cost-sharing for x-rays and diagnostic imaging for 31609PA0190002, 31609PA0070002, 31609PA0190003, 31609PA0070003 varies by site of service. X-rays and diagnostic imaging accounts for roughly 4% of allowed costs in the AV calculation.

The cost-sharing for imaging (CT/PET scans, MRIs) varies by site of service. Imaging accounts

for roughly 2% of allowed costs in the AV calculation.

Acceptable alternate method used per 156.135(b)(2) or 156.135(b)(3):

Method 156.135(b)(2) was used for laboratory (for plans with no deductible), x-rays, imaging, inpatient hospital cost-sharing, and outpatient facility site of service cost-sharing.

Method 156.135(b)(3) was used for laboratory site of service cost-sharing (for plans with deductibles).

Confirmation that only in-network cost-sharing, including multitier networks, was considered:

I confirm that only in-network cost-sharing was considered.

Description of the standardized plan population data used:

We used our commercial PPO and HMO data incurred between July 2017 and June 2018.

For the freestanding and hospital utilization data for outpatient facility, we used our commercial PPO and HMO data incurred between July 2017 and June 2018.

For the freestanding and hospital utilization data for laboratory services, we used our commercial PPO data incurred between July 2017 and June 2018.

For the physical therapy and radiology site-of-service utilization, we used our commercial PPO data incurred between July 2017 and June 2018.

If the method described in 156.135(b)(2) was used, a description of how the benefits were modified to fit the parameters of the AV calculator:

Combination of Copays and Coinsurance for IP Hospital

The copays for inpatient hospital facility claims were combined with the coinsurance on professional claims to calculate equivalent copays for inpatient claims.

First, we took the allowed PMPY inpatient costs and divided that by the utilization by admit PMPY to calculate the average cost per admit. We also took the utilization by day PMPY and divided that by the utilization by admit PMPY to calculate the average length of stay.

The average cost per admit was divided by the average length of stay to calculate the average cost per day. Based on our data, we assumed that 84% of the cost was from facility claims and the remaining 16% was from professional claims.

The professional coinsurance was multiplied by the professional portion of the daily inpatient cost to calculate equivalent daily copay for that piece. Because there is a 5-day maximum on our plans' inpatient copays, an effective copay factor was calculated by dividing the PMPY cost-sharing from a \$100 per day inpatient copay with a 5-day maximum by the PMPY cost-sharing from a \$100 per day inpatient copay without any maximum. The equivalent daily professional copay amount was then divided by this factor in order to determine the final professional copay reflecting a 5-day maximum.

The final professional copay was then added onto the facility copay in order to determine the equivalent overall IP hospital copay amount. The exhibit below details this calculation.

HIOS IDs	31609PA0070002, 31609PA0190002
IP Cost Sharing	
Facility	\$750
Professional	20%

AVC Continuation Table	Gold
PMPY for IP	\$1,274
Admit PMPY	0.06
Claim per Admit	\$22,040
Average LOS (days)	4.5
Effective Copay Factor for 5-days	0.46

Assumption from Data	
% Facility Cost	84%
% Professional Cost	16%

Calculations	
Professional Claim per Admit	\$3,526
Professional Claim per Day	\$788
Equiv. Copay per Day no max	\$158
Equiv. Copay per Day, 5-day max	\$340
Total Copay per Day, 5-day max	\$1,090

Combination of Coinsurance for IP Hospital

The coinsurance for inpatient hospital facility claims were blended with the coinsurance on professional claims to calculate equivalent coinsurance for inpatient claims. Based on our data, we assumed that 84% of the cost was from facility claims and the remaining 16% was from professional claims.

HIOS IDs	31609PA0070003, 31609PA0190003	31609PA0070004, 31609PA0190004
Facility	25%	25%
Professional	30%	50%
Blend	74.2%	71.0%

The silver variations, 31609PA0070003-04, 31609PA0070003-05 and 31609PA0070003-06, do not require blending of the facility and professional inpatient coinsurances. They are included in this justification solely because their standard component is a unique plan design, and the Plans and Benefits template required indicating the same for these cost sharing variations. In fact, the actual benefit coinsurance amounts were entered directly into the AV calculator.

Combination of Coinsurance for Laboratory Services

For the lab site of service cost-sharing, our recent data suggested that 20% of units are at a hospital setting with an average unit cost of \$52.82, while 80% of units are at a freestanding setting with an average unit cost of \$19.08. Taking a weighted average of a 50% issuer coinsurance applied to \$52.82 and a 100% issuer coinsurance applied to \$19.08 produced an average issuer paid amount of \$20.29 out of an average cost of \$24.63, giving an effective issuer coinsurance of 82.4% which was entered into the AV calculator.

Combination of Coinsurance for Outpatient Facility Fee

For the outpatient facility site of service cost-sharing, our recent data indicated that 80% of outpatient facility claims came from the hospital setting. The cost-sharing entered into the AV calculator is a blend of the coinsurance in a hospital setting and the coinsurance in an ambulatory surgery center.

	31609PA0070003, 31609PA0190003
Hospital	50.0%
ASC	70.0%
Blend	54.0%

The silver variations, 31609PA0070003-04, 31609PA0070003-05 and 31609PA0070003-06, do not require blending of the hospital and ambulatory surgery center coinsurances. They are included in this justification solely because their standard component is a unique plan design, and the Plans and Benefits template required indicating the same for these cost-sharing variations. In fact, the actual benefit coinsurance amounts were entered directly into the AV calculator.

Occupational and Physical Therapy Site-of-service Differential

For the physical therapy site of service cost-sharing, our recent data indicated that 88% of utilization came from the preferred site. The cost-sharing entered into the AV calculator is a weighted average of the copays at each site.

X-rays and Diagnostic Imaging Site-of-service Copay Differential

For the x-ray site of service cost-sharing, our recent data indicated that 45% of utilization came from the preferred site. The cost-sharing entered into the AV calculator is a weighted average of copays based on utilization at each site.

X-rays and Diagnostic Imaging Site-of-service Coinsurance Differential

For the x-ray site of service cost-sharing, our recent data indicated that 20% of claims came from the preferred site. The cost-sharing entered into the AV calculator is a weighted average of coinsurance based on claims at each site.

Imaging (CT/PET scans, MRIs) Site-of-service Copay Differential

For the imaging site of service cost-sharing, our recent data indicated that 45% of utilization came from the preferred site. The cost-sharing entered into the AV calculator is a weighted average of copays based on utilization at each site.

Imaging (CT/PET scans, MRIs) Site-of-service Coinsurance Differential

For the imaging site of service cost-sharing, our recent data indicated that 25% of claims came from the preferred site. The cost-sharing entered into the AV calculator is a weighted average of coinsurance based on claims at each site.

		Cost-sharing		
HIOS ID	Service Type	Preferred Site	Non-preferred Site	AV Input
31609PA0190002, 31609PA0070002	Phys. Ther.	\$65	\$95	\$68.60
	X-rays	\$60	\$90	\$76.50
	Imaging	\$120	\$160	\$142.00
31609PA0190003, 31609PA0070003	Phys. Ther.	\$70	\$100	\$73.60
	X-rays	30%	50%	54%
	Imaging	30%	50%	55%

If the method described in 156.135(b)(3) was used, a description of the data and method used to develop the adjustments:

Not applicable.

Certification Language:

The development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for those benefits that deviate substantially from the parameters of the AV Calculator and have a material impact on the AV.

The analysis was

- (i) conducted by a member of the American Academy of Actuaries; and
- (ii) performed in accordance with generally accepted actuarial principles and methodologies.

I am an employee of the issuer, I meet the *Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States* promulgated by the American Academy of Actuaries, and I have the education and experience necessary to perform this work. All AVs herein were determined in accordance with the ASOPs established by the Actuarial Standards Board and comply with applicable laws and regulations; furthermore, all metal levels herein were appropriately assigned based on applicable law.

Actuary signature: _____

Actuary Printed Name: _____

Date: _____ 5/21/2019

AV screenshots redacted.

Unique Plan Design Supporting Documentation and Justification

ACTUARIAL MEMORANDUM

HIOS Issuer ID: 31609

HIOS Product IDs: 31609PA018

Applicable HIOS Plan IDs (Standard Component): 31609PA0160006, 31609PA0180005

Purpose of document:

The purpose of this document is to provide CMS with a justification of the methods used in calculating the actuarial value for unique plan designs offered in the individual or small group market for the plan year beginning 1/1/2020. As prescribed by law, the AV calculation was based on the AV calculator to the full extent possible. The AV is meant to represent the average percent of costs paid by the insurer for a standard population and may vary from actual member experience. The resulting AV was based on prescribed methodology and, therefore, may not reasonably reflect the actuary's estimate of the portion of allowed costs covered by the health insurance plan. The AV was determined based on the plan's benefits and coverage data, the standard population, and utilization and continuance tables published by HHS for purposes of the valuation of AV. This actuarial analysis is not appropriate for any other purposes.

Reasons the plan design is unique (benefits that are not compatible with the parameters of the AV calculator and the materiality of those benefits):

This plan exempts the first three outpatient mental health visits from the deductible. It has an outpatient mental health copay of \$40 for the first three visits without applying the copays to the deductible. Beyond three visits, outpatient mental health is covered 100% after the deductible. Outpatient mental health accounts for about 1% of allowed costs in the AV calculation.

Acceptable alternate method used per 156.135(b)(2) or 156.135(b)(3):

Method 156.135(b)(2) was used for the outpatient mental health cost-sharing.

Confirmation that only in-network cost-sharing, including multitier networks, was considered:

I confirm that only in-network cost-sharing was considered.

Description of the standardized plan population data used:

OP Surgery Copay/Coinsurance:

For the outpatient mental health utilization data, we used our commercial PPO data incurred between July 2017 and June 2018.

If the method described in 156.135(b)(2) was used, a description of how the benefits were modified to fit the parameters of the AV calculator:

Using the bronze continuance table in the Final 2020 AV Calculator, we calculated the average cost per visit for outpatient mental health before the out-of-pocket maximum. This average cost was used as a point estimate of the allowed cost per visit for services before satisfying the out-of-pocket maximum. An effective member copay is calculated by taking a weighted average of \$40 for the first three visits times the proportion of visits within the first three visits, which according to our experienced period between July 2017 and June 2018 for commercial PPO is 20.15%, and the average cost per service from the AV Calculator times the remaining proportion of visits.

	31609PA0160002
Cost per Visit	\$98.50
Copay for Visits 1-3:	\$40.00
Visits 1-3 Proportion:	20.15%
Eff. Member Copay	\$86.71

If the method described in 156.135(b)(3) was used, a description of the data and method used to develop the adjustments:

Not applicable.

Certification Language:

The development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for those benefits that deviate substantially from the parameters of the AV Calculator and have a material impact on the AV.

The analysis was

- (i) conducted by a member of the American Academy of Actuaries; and
- (ii) performed in accordance with generally accepted actuarial principles and methodologies.

I am an employee of the issuer, I meet the *Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States* promulgated by the American Academy of Actuaries, and I have the education and experience necessary to perform this work. All AVs herein were determined in accordance with the ASOPs established by the Actuarial Standards Board and comply with applicable laws and regulations; furthermore, all metal levels herein were appropriately assigned based on applicable law.

Actuary signature: _____

Actuary Printed Name: _____

Date: _____ 5/21/2019

AV screenshots redacted.

The 1.06 factor is the uniform adjustment stated in the 2020 Filing Guidance from the change to the individual mandate.

The change in demographics was calculated considering changes to age, geography, and tobacco use.

The change in the average age was measured by comparing the average age factor calculated in this filing, based on February 2019 enrollments, to the average age factor calculated for the prior filing.

	2019 Filing	2020 Filing	Change
Age Factor	1.688	1.701	1.008
Change from geography: No change			1.000
Change from tobacco use: No change			1.000
Total change			1.008

The Benefits factor is 1 due to minimal projected membership movement among plans.

No changes for Other were assumed for this filing.

The network factors used in Table 10 are based on the network differentials from the prior filing.

The network factor used for PPO was 1.000.

The network factor used for EPO was 0.950.

The factors used in Table 10 recalibrate the values so that the differentials between the factors remains constant, and the composite factor equals 1.000.

Table 10 factors:	PPO	1.023
	EPO	0.972

REDACTION JUSTIFICATION

DOCUMENT

URRT Part III – Federal Actuarial Memorandum

Redacted Name of opining actuary (page 8)

Redacted Company Contact Information (page 1) – name, telephone number, email address

PA Actuarial Memorandum

Redacted Name of opining actuary (page 7)

Redacted Company Contact Information (page 1) – name, telephone number, email address

Cover Letter

Redacted names and contact information (page 2)

AV Screenshots

Entire File Redacted

Unique AV Justification file

Redacted name of opining actuary (pages 5, 18, and 30)

Redacted AV Screenshots (pages 6-12, 19-27, and 31-32)

- 1. The updated URR instructions requires the quantitative impact of rate increase drivers. Please estimate the impact to the rate increase of each of the drivers described on page 1 of the Part III memorandum.**

The information is shown in Tab #1 of the attached worksheet.

- 2. The updated URR instructions require an explanation of how morbidity was removed from impacting the variations in rate increases. Please provide this explanation and provide a quantitative demonstration of the variation in rate increase by plan.**

We have held our rate increases constant by plan design across the single risk pool except for differences in changes in cost sharing between plan design. In this way the morbidity impact by plan was removed from the rate increases because if the plans had the same benefit changes, they would have received the same rate increase regardless of what their plan specific experience was. Please note that the benefit changes made resulted in reductions to the Pricing AVs.

Please also see our response to question 34 for more details of these calculations.

- 3. Was transitional business included in the experience period?**

QCC has no transitional business in the Consumer market.

- 4. Please confirm that the experience period premiums on the URRT do not reflect any MLR rebates.**

Confirmed, there are no MLR rebates reflected in the experience period premiums.

- 5. For both the allowed and incurred claims in the experience period, please provide the three components referenced in the Part III memo:**
 - a. The amount of claims that were processed through the claims system;**
 - b. The amount of claims processed outside of the company's claims system; and**
 - c. The best estimate of claims incurred but not paid as of the paid through date.**

This information is shown in Tab #5 of the attached worksheet. It is also found in Table 2 of the AM Exhibit.

- 6. Are trends adjusted due to fluctuation in large claim amounts? If so, please explain how.**

Since we consider this block to be fully credible on its own, no adjustments were made for large claims.

- 7. Was the volume of large claims during the experience period unusually high or low? If so, was any adjustment made to reflect this?**

The volume of large claims was in line with our expectation within the experience period. They were neither unusually high nor unusually low. No adjustment was made for large claims as noted in our response to question 6.

8. If adjustments are made for large claim pooling, was the federal risk adjustment program considered?

No, because no adjustments were made for Large claims there was no need to adjust risk adjustment

9. Please explain why no catastrophic plan adjustment is applied to the catastrophic plans.

This is consistent with our pricing from last year.

10. Please explain what is driving the projected increase in admin from 11% in the prior filing to 12.6% in this filing.

Expenses are projected annually based on the program's expectations and will vary based on our projections and average premium size.

11. Please provide substantial quantitative support for the development of the projected risk adjustment, and identify how the relative risk compared to the market was determined.

Information is shown in Tab #11 of the attached worksheet.

12. Regarding the Risk Adjustment Data Validation process (RADV):

- a. Please describe any considerations and provide quantitative support for any adjustments made due to the Risk Adjustment Data Validation process (RADV), or confirm that no such adjustments were made.**

Confirmed that no adjustment was made for RADV in this filing.

- b. As you know, CMS is performing a risk adjustment validation starting with 2017 risk adjustment data. We are considering allowing an estimate of the impact of risk adjustment modifications in rate filings as an adjustment to the projected risk adjustment. Before implementation, we are soliciting feedback from our issuers on the pros and cons of the inclusion of this adjustment. If allowed, all issuers would be required to submit an estimate. The estimate may be \$0. Please provide any feedback that you would like us to consider.**

Independence is open to submitting an estimate of the impact of RADV on projected risk adjustments, but we have several concerns:

- Commercial RADV is still a fairly new and evolving process. Carriers do not have sufficient information to accurately estimate the RADV impact.
- Without releasing carriers' proprietary information, it will be difficult to determine if RADV impact is due to a systemic risk score reporting issue or due to one-time bad audit. In the case of latter, carriers should not expect this experience to be reflective of the future.

Our preference remains to not include an adjustment.

13. Please explain why the PA estimate of the 2018 risk adjustment was not used, and confirm that the risk adjustment figure is not adjusted for the risk adjustment user fee.

We confirm that this figure will not be adjusted for the risk adjustment user fee. Our membership mix has changed since 2018, so we are reflecting our expected risk transfer in 2020 which includes the

impact of this membership change. Please also see our response to question 11 for the numeric demonstration. We also note that the PA estimate is preliminary and we may revisit our risk adjustment estimates after the release of the actual risk adjustment report.

- 14. Regarding the projected risk adjustment, the PAAM states, “When the projected risk adjustment amounts for KHPE and Independence Blue Cross (QCC) are combined, the result is consistent with the projection made in our submission.” Does this imply that the risk adjustment amounts for each company separately is not consistent with the projection made in your submission? Please explain.**

Risk adjustment amounts for each company separately are consistent with our best estimate projections in our filings.

- 15. Please provide the development of the exchange user fee and how it was converted to a % of index rate as applied on the URRT.**

The Exchange User Fee is calculated as a percentage of on-exchange premium.

We calculated the Exchange User Fee in the AM Exhibits, where it is shown as a PMPM. In building the MAIR, it gets divided by the paid-to-allowed factor.

In the new URRT the carriers are required to enter a factor that is applied to an amount not directly proportional to premium rates; you enter a percentage for Exchange user fee and it gets applied to an allowed claims related amount. We therefore solved for the percentage that needed to be entered to arrive as close as we could to the MAIR from the AM Exhibit. The state AM exhibit is doing the calculation correctly. When compared as PMPM amounts, the numbers are fairly consistent.

- 16. Please explain the discrepancy in the Total Allowed EHB Claims + Capitation between Table 5 Cell C11 and URRT Worksheet Cell F14.**

Cell F14 in the URRT includes non-EHBs, per the URR instructions (page 14 – “They include claims for EHBs as well as non-EHBs”). PAAM Cell C11 does not include non-EHBs.

- 17. Please explain the discrepancy in the Market-Adjusted Allowed Claims between Table 5 Cell C42 and URRT Worksheet 2 Cell D76.**

We identified that the impact of non-funding of the CSRs was not correctly incorporated into this row for applicable plans. We are working on trying to determine any other factors that caused the discrepancy.

- 18. The Pricing AV’s shown in Table 10 of the PAAM exhibits, which do not include the CSR load or induced demand, are larger than the Metal AV in the URRT for all plans. What is driving these differences?**

Please note that the metal AV is to determine compliance with Actuarial Value and is not a Pricing AV. The metal AV is based on the AV calculator which is calibrated to national average costs. The Philadelphia market is significantly more expensive than the national average from a cost of services standpoint. This means that the same deductible or copay is worth significantly less as a percentage of total allowed cost in the Philadelphia market compared to the national average. This leads to higher Pricing AVs for the same metal level. Please also refer to our response for question 19.

- 19. Please provide quantitative support for the Pricing AV's as shown in Table 10 of the PAAM exhibits, explain how they were developed, and explain how you ensure that the factors do not reflect morbidity differences between the enrolled populations.**

The information is shown in Tab #19 of the attached worksheet. The morbidity impact by plan has been removed from the rate increases. Without the benefit changes, the plans would have received the same rate increase regardless of what their plan specific experience was.

- 20. In support of the figures shown in Table 10, Column L, please complete the worksheet shown on page 15 of the Department's guidance as well as providing the following information related to the worksheet:**

- a. Please confirm that the ratio in Column (9) represents the pure induced utilization for each plan.**
- b. Please show quantitatively, including an Excel spreadsheet with formulas, the derivation of the AV and cost sharing factors for each plan. Please note that it is assumed that the AV and cost sharing factor includes the average tobacco factor.**
- c. Please provide any additional justification for induced utilization assumptions in the Company's pricing.**
- d. Please confirm that each plan's induced utilization factor was normalized by an aggregate factor, and that the resulting sum product (against 2/1/2019 membership or the projected membership distribution) produces**
- e. Please quantitatively demonstrate the calculation of the induced calibration factor.**
- f. Please quantitatively show and provide a detailed description of how the induced demand factor shown in Table 7 relates to the induced utilization factors calculated in this exhibit.**

Information is shown in Tab #20.

We confirm that the value represents the factor for each plan. They are equal to the values shown in Table 10 for each plan.

Table 10 demonstrates that when weighted by 2/1/2019 membership that the induced utilization factors composite to 1.000.

It is unclear what is being requested about an induced calibration factor. However, as noted above, the induced utilizations composite to 1.000.

The induced demand factor shown in Table 7 is the composite of the induced demand factors in Table 10 of 1.000. We do not anticipate a change to our single risk pool costs from induced demand in 2020.

- 21. Regarding Table 6:**

- a. We have repurposed row 54 to capture RA User Fees. Please provide the RA User Fee percentage and pmpm amount in cells C54 and D54, and identify where the risk adjustment user fees are currently included in the URRT and in the PAAM. Note the URR instructions specify that these fees are to be included in Taxes & Fees and not with the risk adjustment transfers on the URRT.**

At the direction of the state's reviewer, we revised these cells to produce an RA User Fee of \$0.18 and removed that amount from the Risk Adjustment, resulting in no change to the proposed rates.

b. Using financial data based on nationwide market share, please provide the quantitative development of the HIT percent and pmpm.

Insufficient time was provided to produce an answer for this question, so we were unable to respond.

c. Provide the actual paid HIT fees on a pmpm and percent of premium basis for calendar years 2018 and 2016.

Insufficient time was provided to produce an answer for this question, so we were unable to respond.

22. Please provide the quantitative development of the 2.7% for health insurer fee.

The health insurer fee was expected to be in the range of 2-3%. We used our estimate of 2.7% in setting the rates.

23. Please show the quantitative development of the Age Calibration Factor of 1.701 which appears in Table 10, Cell T4.

The information is shown in Tab #23 of the attached worksheet.

24. Please show the quantitative development of the Tobacco Calibration Factor of 1.013 which appears in Table 10, Cell T6.

The information is shown in Tab #24 of the attached worksheet.

25. Please provide the estimated 2020 federal MLR calculation showing all adjustments.

The information is shown in Tab #25 of the attached worksheet.

26. The Actuarial certification in the Part III Actuarial Memorandum appears to be based on last year's URRT and instructions. For example, it refers to "the percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV," which is not part of the current URRT. Please revise the certification consistent with this year's URR instructions.

We have updated the Actuarial Certification in the Part III Actuarial Memorandum.

27. Please provide the requested data in Table 4, Columns J and K of the PAAM exhibits, or explain why this data is not available.

We did not provide this in our 2019 filing.

28. Please support the weights shown in Table 3, Column J, and provide the actual weights by service category generated by the 2018 experience.

These weights are consistent with the weights used by benefit type in the URRT and they were obtained from our internal data warehouse.” We will convert these to \$ for them by multiplying the PMPMs in the URRT by MMOS.

29. Please show the quantitative development of the Federal Income Tax figure shown in Table 6.

The information is shown in Tab #29 of the attached worksheet.

30. In Table 10, please provide the DOH Approval Date for each network.

We have added this information to Table 14.

31. For the expanded Bronze plans, please demonstrate that the copay is less than or equal to the 50% coinsurance for that category.

Our average allowed cost per visit for PCP is about \$120. Therefore \$50 PCP copay is less than 50% coinsurance.

32. Please provide an exhibit that quantitatively shows a comparison of the actual to projected claim cost pmpms for calendar years 2015-2018, as applicable.

Insufficient time was provided to produce an answer for this question, so we were unable to respond.

33. Please provide an exhibit showing the actual experience for calendar years 2014 – 2018 and the projections for 2019 and 202 for the following categories: Member months, total administrative expenses, total incurred claims, total premium, total actual paid taxes and fees, profit, annual underwriting gain/loss and underwriting gain/loss pmpy. Also show how the financial gains and losses reconcile with the Annual Financial Statements for those periods.

Insufficient time was provided to produce an answer for this question, so we were unable to respond.

34. Please provide an exhibit that shows, by HIOS Plan ID, a summary of benefit and cost sharing changes for 2020 relative to the 2019 design for all plans to be offered in 2020. Include Pricing AV columns for 2019 and 2020. Please show the approved 2019 Pricing AVs for all plans in the 2019 column and the proposed 2020 Pricing AVs in the 2020 column. Also, provide a supporting worksheet that shows the quantitative development of the proposed factors in Table 10, in support of the overall change in benefits factor shown in Table 5.

The information is shown in Tab #34 of the attached worksheet.

35. Please confirm that you have tested to ensure that the PID rate exhibits and the Federal rates template included in this filing and in the binder are all the same.

We confirmed that this is correct.

QCC Consumer	2020	2019	Change
Change in Morbidity	1.06	1.06	0.00%
Taxes and Fees	5.84%	2.42%	3.42%
Administrative Costs	12.60%	11.00%	1.60%
Average Age Factor	1.701	1.688	0.75%
Projected Allowed Claims	\$ 767.03	\$832.25	-7.84%
Actual vs. Expected Experience			11.61%

Rate Change **9.5%**

	QCC Consumer	Allowed Claims	Incurred Claims
a	Claims processed through the claims system	\$ 331,894,676	\$ 276,692,997
b	Claims processed outside of the company's claims system	\$ 2,546,771	\$ 2,546,771
c	Incurred but not paid claims		\$ 4,557,923

This is the risk adjustment calculation.

$$T_i = \left[\frac{PLRS_i \cdot IDF_i \cdot GCF_i}{\sum_i (s_i \cdot PLRS_i \cdot IDF_i \cdot GCF_i)} - \frac{AV_i \cdot ARF_i \cdot IDF_i \cdot GCF_i}{\sum_i (s_i \cdot AV_i \cdot ARF_i \cdot IDF_i \cdot GCF_i)} \right] \bar{P}_s$$

Where

\bar{P}_s = State average premium * 0.86; PLRS_i = plan i's plan liability risk score; AV_i = plan i's metal level AV; ARF_i = plan i's allowable rating factor; IDF_i = plan i's induced demand factor;
 GCF_i = plan i's geographic cost factor;

QCC Consumer

Metal	BMMO	PLRS	ARF	GCF	IDF	AV	Product w Risk	Product w/o Risk	PMPM
Platinum	12,372	4.640	1.546	1.045	1.150	0.900	5.579	1.673	1,073.76
Gold	78,960	2.562	1.620	1.045	1.080	0.800	2.893	1.464	301.59
Silver	95,448	2.025	1.847	1.045	1.030	0.700	2.180	1.392	103.18
Bronze	312,468	1.086	1.683	1.045	1.000	0.600	1.136	1.056	(87.80)
Total	499,248	1.587	1.701	1.045	1.022	0.658	1.723	1.200	39.08
Estimated StateWide Average		1.681	\$ 651.86	1.77	1.00	1.039	0.711	1.747	1.308

HIOS ID	Plan Name	2019 Annual Filing Pricing AV	Proposed 2020 Filing Pricing AV	Difference	Proposed 2020 Filing Rate Change	Proposed 2020 Filing Benefit Change	Rate Change Before Benefit Change	Summary of Key Benefits Changes
31609PA0160004	Personal Choice EPO Platinum	0.989	0.981	-0.8%	9.95%	-0.64%	10.66%	Increase OOPM by \$500, PT/OT, RX Max Spec to \$1,000
31609PA0070002	Personal Choice PPO Gold	0.910	0.902	-0.9%	9.78%	-0.79%	10.65%	Increase OOPM to \$7,000, radiology and copays, RX Max Spec to \$1,000
31609PA0070003	Personal Choice PPO Silver	0.773	0.757	-2.1%	8.38%	-2.06%	10.61%	Increase OOPM to \$7,500, deductible, copays, RX Max Spec to \$1,000
31609PA0070004	Personal Choice PPO Bronze	0.617	0.614	-0.5%	10.16%	-0.45%	10.66%	Increase OOPM to \$8,150 and Ded to \$5,750, RX Max Spec to \$1,000
31609PA0160005	Personal Choice EPO Bronze Reserve	0.579	0.578	-0.2%	10.32%	-0.31%	10.66%	Increase Ded and OOPM \$6,900
31609PA0160001	Personal Choice EPO Catastrophic	0.578	0.574	-0.7%	9.94%	-0.65%	10.66%	Increase Ded and OOPM to \$8,150,
31609PA0180005	Personal Choice EPO Bronze Basic	0.617	0.613	-0.6%	9.94%	-0.65%	10.66%	Increase Ded and OOPM to \$8,150
31609PA0180003	Personal Choice EPO Platinum	0.989	0.98	-0.9%	9.95%	-0.64%	10.66%	Increase OOPM by \$500, PT/OT, RX Max Spec to \$1,000
31609PA0190002	Personal Choice PPO Gold	0.910	0.901	-1.0%	9.78%	-0.79%	10.65%	Increase OOPM by \$500, radiology and copays, RX Max Spec to \$1,000
31609PA0190003	Personal Choice PPO Silver	0.773	0.756	-2.2%	8.38%	-2.06%	10.61%	Increase OOPM to \$7,500, deductible, copays, RX Max Spec to \$1,000
31609PA0190004	Personal Choice PPO Bronze	0.617	0.613	-0.6%	10.16%	-0.45%	10.66%	Increase OOPM to \$8,150 and Ded to \$5,750, RX Max Spec to \$1,000
31609PA0180001	Personal Choice Catastrophic	0.578	0.574	-0.7%	9.94%	-0.65%	10.66%	Increase Ded and OOPM to \$8,150
31609PA0180004	Personal Choice EPO Bronze Reserve	0.579	0.577	-0.3%	10.32%	-0.31%	10.66%	Increase Ded and OOPM \$6,900
31609PA0160003	Personal Choice EPO Silver Reserve	0.758	0.749	-1.2%	9.36%	-1.18%	10.65%	Increase ded, OOPM, and added copays, RX Max Spec to \$1,000
31609PA0180002	Personal Choice EPO Silver Reserve	0.758	0.748	-1.3%	9.36%	-1.18%	10.65%	Increase ded, OOPM, and added copays, RX Max Spec to \$1,000
31609PA0160006	Personal Choice EPO Bronze Basic	New	0.613	N/A	0.00%	-0.90%	0.90%	New plan

Table B: Induced Utilization Exhibit								
Plan ID	Metal Level	Projected Membership	Projected Allowed Claims	Projected Paid Claims	Paid-To Allowed Factor	Average Tobacco Factor	AV & Cost Sharing Factor	(8)/(6*7)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
31609PA0160004	Platinum	2,520	2,745,119	2,693,783	0.9812989	1.013	1.34029409	1.34831
31609PA0070002	Gold	32,808	29,057,814	26,218,897	0.9023011	1.013	1.00201161	1.09626
31609PA0070003	Silver	68,580	53,999,960	49,056,706	0.90845819	1.013	0.89688961	0.9746
31609PA0070004	Bronze	78,144	60,464,262	37,108,743	0.61373019	1.013	0.59541353	0.95771
31609PA0160005	Bronze	146,712	111,162,963	64,206,773	0.57759142	1.013	0.57773467	0.98741
31609PA0160001	Catastrophic	5,616	3,842,898	2,207,067	0.57432355	1.013	0.51866846	0.8915
31609PA0180005	Bronze	16,080	10,558,634	6,470,196	0.61278721	1.013	0.53051632	0.85463
31609PA0180003	Platinum	9,852	10,742,842	10,531,407	0.98031858	1.013	1.33895513	1.34831
31609PA0190002	Gold	46,152	40,917,377	36,882,911	0.9013997	1.013	1.0010106	1.09626
31609PA0190003	Silver	20,532	16,183,084	14,686,968	0.90755064	1.013	0.89599362	0.9746
31609PA0190004	Bronze	22,836	17,687,125	10,844,278	0.61311707	1.013	0.59481871	0.95771
31609PA0180001	Catastrophic	1,068	731,538	419,720	0.5737498	1.013	0.51815031	0.8915
31609PA0180004	Bronze	51,036	38,708,397	22,335,302	0.5770144	1.013	0.57715752	0.98741
31609PA0160003	Silver	3,876	3,105,731	2,791,635	0.89886564	1.013	0.95091382	1.04433
31609PA0180002	Silver	120	96,249	86,428	0.89796767	1.013	0.94996386	1.04433
31609PA0160006	Bronze	1	656	402	0.6134	1.013	0.53104683	0.85463
Total		505,933	400,004,649	286,541,218	0.71634472	1.013		

Age	Member Count	Age Factor	QCC Consumer Age Calibration
0	185	0.765	1.701
1	162	0.765	
2	178	0.765	
3	193	0.765	
4	176	0.765	
5	185	0.765	
6	197	0.765	
7	211	0.765	
8	204	0.765	
9	244	0.765	
10	223	0.765	
11	259	0.765	
12	291	0.765	
13	278	0.765	
14	330	0.765	
15	370	0.833	
16	348	0.859	
17	384	0.885	
18	413	0.913	
19	476	0.941	
20	454	0.97	
21	599	1	
22	594	1	
23	495	1	
24	451	1	
25	483	1.004	
26	965	1.024	
27	912	1.048	
28	950	1.087	
29	862	1.119	
30	871	1.135	
31	765	1.159	
32	710	1.183	
33	657	1.198	
34	621	1.214	
35	608	1.222	
36	640	1.23	
37	618	1.238	
38	566	1.246	
39	587	1.262	
40	521	1.278	
41	574	1.302	
42	568	1.325	
43	556	1.357	
44	594	1.397	
45	607	1.444	
46	626	1.5	
47	724	1.563	
48	720	1.635	
49	758	1.706	
50	780	1.786	
51	802	1.865	
52	844	1.952	
53	839	2.04	
54	972	2.135	
55	1005	2.23	
56	1014	2.333	
57	1107	2.437	
58	1173	2.548	
59	1257	2.603	
60	1266	2.714	
61	1360	2.81	
62	1476	2.873	
63	1576	2.952	
64	1443	3	
65	72	3	
66	28	3	
67	17	3	
68	13	3	
69	15	3	
70	9	3	
71	11	3	
72	11	3	
73	11	3	
74	6	3	
75	11	3	
76	9	3	
77	7	3	
78	6	3	
79	10	3	
80	7	3	
81	4	3	
82	3	3	
83	7	3	
84	5	3	
85	3	3	
86	3	3	
87	3	3	
88	1	3	
89	1	3	
90	4	3	
91	1	3	
92	1	3	
93	2	3	
94	1	3	
95	1	3	
99	0	3	
100	1	3	
102	0	3	
Total	42,161		

Age	Projected Age Distribution	Projected % Tobacco Use	Approved Tobacco Factors
0-20	13.66%	5.00%	-
21-29	14.97%	5.00%	0.125
30-39	15.76%	5.00%	0.175
40-49	14.82%	5.00%	0.225
50-59	23.23%	6.00%	0.375
60-63	13.47%	6.00%	0.375
64+	4.10%	6.00%	0.375
Total	100.00%		0.013

$$\text{Federal MLR} = \frac{(\text{Projected Claims, after Risk Adjustment} + \text{Quality Improvement Expense} - \text{Risk Adj Prog User Fee})}{(\text{Premium, before Risk Adjustment} - \text{HCR Taxes \& Fees} - \text{Federal Income Tax} - \text{Premium Tax})}$$

	QCC Consumer	
Projected Claims PMPM (URRT)	\$	566.36
Premium PMPM (URRT)	\$	711.85
Quality Improvement Expense		0.80%
Exchange User Fee & HIF		5.52%
Federal Income Tax		1.14%
Premium Tax		2.00%
Federal MLR		88.0%

URRT Part I		Member Months	461,308
Benefit Category	Experience Period Index Rate PMPM	Amount	Weight
Inpatient Hospital	\$154.86	\$71,438,156.88	21.88%
Outpatient Hospital	\$163.46	\$75,405,405.68	23.09%
Professional	\$201.99	\$93,179,602.92	28.53%
Other Medical	\$0.00	\$0.00	0.00%
Capitation	\$5.52	\$2,546,420.16	0.78%
Prescription Drug	<u>\$182.08</u>	\$83,994,960.64	25.72%
Total	\$707.91	\$326,564,546.28	100.00%

AM Exhibits	
Service Category	Weight*
Inpatient Hospital	21.88%
Outpatient	23.09%
Professional	28.53%
Other Medical	0.00%
Capitation	0.78%
Prescription Drugs	25.72%
Total	100.00%

Health Insurance Providers Fee (Prorated for Small Groups only)	2.70%
Profit/Contingency (after tax)	2.00%
Tax Rate	21.00%
Federal Income Tax	1.14%

HIOS ID	Plan Name	2019 Annual Filing	Proposed 2020 Filing	Difference	2019 Annual Filing	Proposed 2020 Filing	Plan Factor
		Pricing AV	Pricing AV		AV & Cost Sharing factors	AV & Cost Sharing factors	Change %
31609PA0160004	Personal Choice EPO Platinum	0.989	0.981	-0.8%	1.3260	1.3231	-0.2%
31609PA0070002	Personal Choice PPO Gold	0.91	0.902	-0.9%	0.9918	0.9892	-0.3%
31609PA0070003	Personal Choice PPO Silver	0.773	0.757	-2.1%	0.8993	0.8854	-1.5%
31609PA0070004	Personal Choice PPO Bronze	0.617	0.614	-0.5%	0.5873	0.5878	0.1%
31609PA0160005	Personal Choice EPO Bronze Reserve	0.579	0.578	-0.2%	0.5691	0.5703	0.2%
31609PA0160001	Personal Choice EPO Catastrophic	0.578	0.574	-0.7%	0.5127	0.512	-0.1%
31609PA0180005	Personal Choice EPO Bronze Basic	0.617	0.613	-0.6%	0.5249	0.5237	-0.2%
31609PA0180003	Personal Choice EPO Platinum	0.989	0.98	-0.9%	1.3260	1.3218	-0.3%
31609PA0190002	Personal Choice PPO Gold	0.91	0.901	-1.0%	0.9918	0.9882	-0.4%
31609PA0190003	Personal Choice PPO Silver	0.773	0.756	-2.2%	0.8993	0.8845	-1.6%
31609PA0190004	Personal Choice PPO Bronze	0.617	0.613	-0.6%	0.5873	0.5872	0.0%
31609PA0180001	Personal Choice Catastrophic	0.578	0.574	-0.7%	0.5127	0.5115	-0.2%
31609PA0180004	Personal Choice EPO Bronze Reserve	0.579	0.577	-0.3%	0.5691	0.5698	0.1%
31609PA0160003	Personal Choice EPO Silver Reserve	0.758	0.749	-1.2%	0.9450	0.9387	-0.7%
31609PA0180002	Personal Choice EPO Silver Reserve	0.758	0.748	-1.3%	0.9450	0.9378	-0.8%
31609PA0160006	Personal Choice EPO Bronze Basic	New	0.613	N/A	New	0.5242	N/A

1. Please clarify how the Actual vs. Expected Experience was calculated in Table #1 submitted with your response, and indicate how this change percentage relates to the Projected Allowed Claims and other components of the rate change shown.

In the previous response we were using the Actual to expected to include all items of the rate increase not included in the prior portions of the exhibits. We have re-labeled that section as the “residual difference” and we have also updated the rate increase to match our re-filing due to risk adjustment results released on June 28, 2019. This residual difference is now quite small (Only -0.72% in this filing).

2. Your response to item 5 of our previous objections shows no incurred but not paid claims for allowed claims. Please explain or correct.

We did not include completion in the allowed claims, only in the incurred claims. We have adjusted all exhibits to include the value of completion in the allowed claims.

Please note that in the rate build up, the utilization trend was adjusting for this, so we have lowered the utilization trend so that the rates match what was previously filed.

We have updated our response for item 2 of this objection to clarify the components.

3. The total allowed and incurred claims shown in your response to item 5 of our previous objections are \$334,441,447 and \$283,797,691 respectively. These amounts are greater than the \$327,849,523.41 and \$272,647,844.23 shown in the URRT. Please explain or correct.

The claims in the URRT include Pharmacy rebate amounts. The response to item 5 of our previous objection did not include Pharmacy rebate amount. The difference between the two is the value of the pharmacy rebate, which can be found on Table 2 of the AM exhibits. We have updated our response for item 2 of this objection to clarify the components.

4. Your response to item 9 of our previous objections states that not applying a catastrophic plan adjustment to the catastrophic plans is consistent with your pricing from last year but does not explain the reason no catastrophic plan adjustment was used in either year. Please explain.

Given the small amount of membership in the catastrophic plan and the similarities in plan designs between the catastrophic plans and other bronze plans, we determined that a separate catastrophic adjustment was not required.

5. Please provide more detail regarding your response to item 10 of our previous objections. Was there a significant decrease in the average premium size? If not, the average premium size would not be a cause of the increased percentage administrative costs. If the projected expenses are greater than last year, please explain the reasons for this and specifically which expense categories are driving this increase.

Administrative expenses were reallocated by segment. This reallocation resulted in higher expenses being allocated to QCC Individual based on the expenses incurred by this segment.

6. Please clarify your response to item 17 of our previous objections. Which row of which spreadsheet are you referring to? Do you intend to provide a correction when you complete your analysis of what is causing the discrepancy? If not, please explain.

We have corrected the issue in the updated URRT submitted in the submission to revise the risk adjustment.

7. Regarding your response to item 20 of our previous objections, the induced utilization factors for the platinum plan is about 1.44 times the factors for the bronze plans, which strongly suggests that they reflect differences in the morbidity of the populations expected to enroll in the plans, which is contrary to the URR instructions and the Single Risk Pool concept. Please address this.

Please see the attached exhibits.

8. Please provide responses to items 21.b, 21.c, 32, and 33 of our previous objections.

Please see the response to question 9 for the response to 21 b., 21 c.

Regarding questions 32 and 33, We do not have this data readily available at the level that is being requested, therefore we are unable to provide a response to these two questions. We also view this data as proprietary, and since the filing responses are made public, we think it would be inappropriate to provide this information if it were readily available.

9. Your response to item 22 of our previous objections did not provide a quantitative development or any explanation of how the 2.7% estimate for the health insurer fee was determined. Please provide support for this estimate.

Please see attached exhibits.

10. Regarding your response to item 23 of our previous objections, please explain how the Age Calibration Factor reflects members with \$0 premium due to the requirement to charge premium for no more than three children.

The impact of members with \$0 premium due to requirement to charge premium to no more than three children is not included in the age calibration factor. We do not anticipate the percentage of children with \$0 premium increasing or decreasing, so there was no need to make an adjustment for this item.

The impact of \$0 premium is about 0.4% we would have collected 0.4% more premium if children in families with more than three children were required to pay premium.

11. Where is the RA User Fee reflected in your response to item 25 of our previous objections?

We have updated this exhibit after we moved the RA user fee into taxes.

12. Table 6 of “2020_Indiv_QCC_PAAMExhibits_061819.xlsm” shows taxes and fees totaling 5.86% including .03% for the RA User Fee. Cell E54 of Worksheet 2 of the URRT shows 5.84%. Table 5 of “2020_Indiv_QCC_PAAMExhibits_061819.xlsm” shows Projected Risk Adjustment PMPM of \$39.26, while cell D81 of Worksheet 2 of the URRT shows \$0.18 less. This suggests that the RA User Fee was included in risk adjustment in the URRT rather than in taxes and fees. If so, please provide a corrected URRT.

We have updated the URRT.

13. Regarding your response to item 26 of our previous objections, please address the following:

a. The revised Actuarial Certification does not include a certification that the percent of total premium that represents EHB included in Worksheet 2, Sections III and IV, was calculated in accordance with actuarial standards of practice.

We have updated the actuarial certification.

b. The last sentence of the revised Actuarial Certification begins, “If an alternate methodology was used to calculate the AV Metal Value for at least one plan offered” Either alternate methodology was used or it was not. Also, it states, “a copy of the actuarial certification required by 45 CFR Part 156, §156.135 will be included” when in fact it has already been included in the initial filing. Please clarify the certification.

That statement is saying that some plans used an alternate methodology and some plans did not. For the plans that used an alternate methodology we provided the required certification.

We have reworded that statement to say, “When an alternate methodology was used to calculate the AV Metal Value a copy of the actuarial certification required by 45 CFR Part 156, §156.135 was included.”

14. Your response to item 27 of our previous objections states that the requested data in Table 4, Columns J and K of the PAAM exhibits was not provided last year but did not explain why it was not provided this year. Please provide it or explain why this data is not available. Please provide it or explain why this data is not available.

We do not have this data readily available at the level of detail requested, therefore we have not provided it. Since the data at this level of detail is not used in the rate calculation it did not impact our MAIR. We did provide the aggregate value of the pharmacy rebates in the experience period in table 2 as required, and the value from table 2 is the value that impacts the MAIR.

15. Your response to item 34 of our previous objections does not appear to address the last sentence of the request: “Also, provide a supporting worksheet that shows the quantitative development of the proposed factors in Table 10, in support of the overall change in benefits factor shown in Table 5.” Please address this.

Because the overall change in benefits factor shown in Table 5 is 1.000, we did not provide a quantitative development because a factor of 1.000 would not affect the rates.

16. As requested, you have added the RA User Fees in Table 6. Please confirm that there were no offsetting adjustments made elsewhere, as this fee was not included in the initial submission.

We removed RA User Fee of \$0.18 from the Projected Risk Adjustment PMPM in Table 5 as noted in our response to question 21a of the June 18th objection letter.

17. In response to the Department’s RADV survey, issuers indicated that they did not include an adjustment in the initial submission, as there was no supportable reason for a RADV adjustment in the 2020 rate submission. Therefore, the Department has determined that there should be no RADV adjustments in the 2020 rate filings; please modify the filing accordingly, if necessary.

As noted in the response to the last objection letter, we did not include any RADV adjustment in our submission, therefore no change is required for this item.

18. If the risk adjustment results released on June 28, 2019 are inconsistent with your projected assumptions, you may modify the risk adjustment transfer amount in Table 5. Supporting documentation must be provided for all modifications. If such a modification is made, revise all the documents and exhibits impacted and the PA Actuarial Memorandum to discuss this change. This change must be made with your responses due by July 12, 2019.

We have updated our exhibits and submitted revised rates.

Original Response to #1 of June 18 Objection

QCC Consumer	2020	2019	Change
Change in Morbidity	1.06	1.06	0.00%
Taxes and Fees	5.84%	2.42%	3.42%
Administrative Costs	12.60%	11.00%	1.60%
Average Age Factor	1.701	1.688	0.75%
Projected Allowed Claims	\$ 767.03	\$832.25	-7.84%
Actual vs. Expected Experience			11.61%
Rate Change			9.5%

Revised Response to #1 of June 18 Objection

QCC Consumer	2020	2019	Change
Change in Morbidity	1.06	1.06	0.00%
Taxes and Fees	5.86%	2.42%	3.44%
Administrative Costs	12.60%	11.00%	1.60%
Average Age Factor	1.701	1.688	0.75%
Residual Difference			-0.72%
Rate Change			5.1%

Original Response to #5 of June 18 Objection

QCC Consumer	Allowed Claims	Incurred Claims
Claims processed through the claims system	\$ 331,894,676	\$ 276,692,997
Claims processed outside of the company's claims system	\$ 2,546,771	\$ 2,546,771
Incurred but not paid claims		\$ 4,557,923

Revised Response to #5 of June 18 Objection

QCC Consumer	Allowed Claims	Incurred Claims
Claims processed through the claims system	\$ 331,894,676	\$ 272,135,074
IBNR	\$ 5,558,821.96	\$ 4,557,923
<i>Sub total</i>	\$ 337,453,498	\$ 276,692,997
Claims processed outside of the company's claims system	\$ 2,546,771	\$ 2,546,771
Rx Rebates	\$ (6,591,923)	\$ (6,591,923)
<i>URRT Totals</i>	\$ 333,408,345	\$ 272,647,844

HIOS_ID	Approved Annual 2019 Filing		Updated MMs for 2020		Normalized for 2020		Proposed 2020 Filing	
	Total:	1.000	Total:	0.995	Total:	1.000		
	Lives	Induced Demand	Lives	Induced Demand	Lives	Induced Demand	Filing	
31609PA0070002	2,929	1.091	2,734	1.091	2,734	1.096		1.096
31609PA0070003	10,330	0.970	5,715	0.970	5,715	0.975		0.975
31609PA0070004	3,468	0.953	6,512	0.953	6,512	0.958		0.958
31609PA0160001	483	0.887	468	0.887	468	0.892		0.892
31609PA0160003	789	1.039	323	1.039	323	1.044		1.044
31609PA0160004	226	1.341	210	1.341	210	1.348		1.348
31609PA0160005	7,547	0.982	12,226	0.982	12,226	0.987		0.987
31609PA0160006	-	NEW	-	NEW	-	NEW		0.855
31609PA0180001	106	0.887	89	0.887	89	0.892		0.892
31609PA0180002	12	1.039	10	1.039	10	1.044		1.044
31609PA0180003	1,113	1.341	821	1.341	821	1.348		1.348
31609PA0180004	4,508	0.982	4,253	0.982	4,253	0.987		0.987
31609PA0180005	1,283	0.850	1,340	0.850	1,340	0.855		0.855
31609PA0190002	3,867	1.091	3,846	1.091	3,846	1.096		1.096
31609PA0190003	2,285	0.970	1,711	0.970	1,711	0.975		0.975
31609PA0190004	1,883	0.953	1,903	0.953	1,903	0.958		0.958

	Value from 8963	HIF % of Premium
2015	11,881,321,294	2.01%
2016	12,601,473,756	2.18%
2018	13,728,845,558	2.30%
2020 Projection		2.71%

Original Response to #25 of June 18 Objection

$$\text{Federal MLR} = \frac{(\text{Projected Claims, after Risk Adjustment} + \text{Quality Improvement Expense} - \text{Risk Adj Prog User Fee})}{(\text{Premium, before Risk Adjustment} - \text{HCR Taxes \& Fees} - \text{Federal Income Tax} - \text{Premium Tax})}$$

	QCC Consumer	
Projected Claims PMPM (URRT)	\$	566.36
Premium PMPM (URRT)	\$	711.85
Quality Improvement Expense		0.80%
Exchange User Fee & HIF		5.52%
Federal Income Tax		1.14%
Premium Tax		2.00%
Federal MLR		88.0%

Revised Response to #25 of June 18 Objection

$$\text{Federal MLR} = \frac{(\text{Projected Claims, after Risk Adjustment} + \text{Quality Improvement Expense})}{(\text{Premium, before Risk Adjustment} - \text{HCR Taxes \& Fees} - \text{Federal Income Tax} - \text{Premium Tax} - \text{Risk Adj Prog User Fee})} \quad \leftarrow \text{Per URRT Training: Risk Adj User fee moves from Risk Adj to Admin Cost}$$

	QCC Consumer	
Projected Claims, after Risk Adjustment	\$	543.09
Premium, before Risk Adjustment	\$	682.82
Quality Improvement Expense		0.80%
Exchange User Fee & HIF		5.54%
Federal Income Tax		1.14%
Premium Tax		2.00%
Risk Adjustment User Fee		0.03%
Federal MLR		88.0%

1. Regarding your response to item 1 of our second objections, please explain what changes account for the -0.72% “residual difference.”

The rate increase is measuring changes from 2019 to 2020 rates. We attempt to quantify changes that occurred since the 2019 pricing, some of which are measurable from the 2019 filing and others that may have occurred earlier and not easily measured, possibly changes that occurred from 2018 to 2019 and not reflected in last year’s filing, or additional impacts where the combination of several small amounts aren’t clear on their own but result in the residual differences calculated.

2. Regarding your response to item 7 of our second objections, your spreadsheet presumes that the 2019 induced utilization factors were appropriate, but for the reasons stated in our previous objections, that does not appear likely. Unless you have data that demonstrates that you have experienced induced utilization that is higher (after removing any morbidity impact on plan selection) than the induced utilization factors used in the risk adjustment model, we strongly recommend that you use those factors. If you propose higher factors, please demonstrate that the factors do not reflect morbidity.

The induced demand factors in the risk transfer formula are based on national data and do not reflect nuances that vary from state to state and market to market. Please see attached the demonstration that the pricing based on our induced demand factors does not reflect morbidity. In this demonstration we show what the rate increases would have been if we had been pricing for morbidity. The Platinum rate change would be significantly higher, and the Bronze rate change would be significantly lower.

We are also including a demonstration of the impact on our metal-level rate actions if we instead use the induced demand factors in the risk transfer formula. In this demonstration you can see that this approach would have an adverse impact on our most affordable plans. Specifically, our lowest cost QCC Bronze plan would see a rate action of 21.1% under this approach which is much higher than the 5.8% rate action we are proposing for that plan using our induced demand factors. We also have not reflected the impact that changing the induced demand factors could have on the membership mix by metallic level, our expectation is that more healthy members would drop coverage under a 21.1% increase scenario, since they would not have any other more affordable option within our portfolio. This change would also cause us to have to re-visit what plans we would choose to offer on exchange in 2020. We would also like to point out that 82% of our members would experience a higher rate increase if these induced demand factors are changed from what we have filed.

As we have previously demonstrated, our proposed induced demand factors are in line with the factors that have been previously approved.

3. Plans 31609PA0190003 and 31609PA0180002 are off-Exchange plans, but Table 10 of the PAAM exhibits shows that a Non-Funding of CSR Adjustment was included in the rate development. Please correct this.

Plans 31609PA0190003 and 31609PA0180002 are the off-exchange versions of Plans 31609PA0070003 and 31609PA0160003, respectively. The off-exchange versions include non-Hyde abortion coverage, the cost of which is offset by projected lower maternity costs. The rate for the off-exchange plan is required to be equal to the rate for the on-exchange plan, so the CSR non-funding factor must be applied.

- 4. Regarding your response to item 9 of our second objections, please explain why you expect the increase in the health insurer fee as a percent of premium from 2018 to 2020 to be at the same annual rate as the increase from 2015 to 2016 rather than the much lower rate of increase from 2016 to 2018. Further, given that the ACA provided for the amount collected from the health insurer fee to increase annually until reaching \$14.3 billion in 2018 but only to increase with premium growth after 2018, why do you expect any increase in the health insurer fee as a percent of premium after 2018? If there is not a good reason, please revise your estimate. Also, please address item 19.b of our first objections, which specified using nationwide market share data.**

In our market, we have observed that national carriers are moving more of their business off fully insured to self-funded. Since the HIF tax is allocated based on the share of fully insured, we anticipate that our share as a percentage of the total would continue to rise over time. Therefore, our percentage of premium should also rise.

- 5. Your response to item 10 of our second objections indicates that you did not reflect the impact of members with \$0 premium because you do not anticipate the percentage of children with \$0 premium to change. However, age calibration is not a year-to-year adjustment but a factor to convert the plan adjusted index rate to an age 21 rate. We recommend that the age calibration calculation include members with \$0 premium with an age factor of 0.**

This change would have no impact on the premium rate. It would change our experience period demographic factor and projection period demographic factors. This was therefore changing the demographic portion of trend. (It would go up). This would result in a higher MAIR. Then the age calibration adjustment factor would go down and the premium rates would stay the same.

Since this would not affect premium rates we have not made any changes given that we only have one day to respond to this request and given that the impact would not change premium rates.

- 6. Our first objection pointed out that the item in the actuarial certification that referred to “the percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV” was not relevant to the current URRT. In response, you removed it. Our second objection erroneously asked that it be put back in, which you did. Please remove it. We apologize for the error.**

We have revised the certification in the URRT Part III to remove this statement.

Demonstration that Proposed Rate Action Does Not Include Pricing for Morbidity							
Metal Level (2)	Exp Period Membership (3)	Exp Period Allowed Claims (4)	Exp Period Paid Claims (5)	Exp Period Premium (6)	Loss Ratio	Proposed Rate Action	Alternative Rate Action Assuming Morbidity Pricing
Platinum	15,112	30,543,479	28,141,379	18,202,431	154.6%	5.4%	106.0%
Gold	78,553	87,088,097	74,801,203	74,401,001	100.5%	5.3%	33.9%
Silver	152,430	118,385,126	100,334,356	135,982,830	73.8%	3.4%	-1.7%
Bronze	209,112	96,334,145	68,756,787	115,325,254	59.6%	5.7%	-20.6%
Catastrophic	6,101	1,057,498	614,120	1,801,535	34.1%	5.5%	-54.6%
Total	461,308	333,408,345	272,647,844	345,713,052	78.9%	5.1%	5.1%

Demonstration of Rate Actions Using Alternative Induced Demand Factors							
Metal Level	Covered Lives As of 02-01-2019	Proposed Induced Demand Factors			Alternative Induced Demand Factors		
		2019 Calibrated Plan Adjusted Index Rate PMPM	2020 Calibrated Plan Adjusted Index Rate PMPM	Rate Action	2019 Calibrated Plan Adjusted Index Rate PMPM	2020 Calibrated Plan Adjusted Index Rate PMPM	Rate Action
Platinum	1,031	\$710.05	\$748.11	5.4%	\$710.05	\$626.40	-11.8%
Gold	6,580	\$531.12	\$559.29	5.3%	\$531.12	\$540.91	1.8%
Silver	7,954	\$479.56	\$495.99	3.4%	\$479.56	\$512.81	6.9%
Bronze	26,039	\$296.40	\$313.43	5.7%	\$296.40	\$317.17	7.0%
Catastrophic	557	\$260.82	\$275.04	5.5%	\$260.82	\$302.86	16.1%
Total	42,161	\$377.23	\$396.37	5.1%	\$377.23	\$396.37	5.1%

Adversely Impacted Membership =>	82%
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Cover Letter for Changes Made August 7, 2019
QCC Individual Filing
INAC- 131927222

Reason for Changes: PID directed revisions to Induced Demand factors for Platinum plans.

Revised Rate Change (From PA AM Exhibit Table 10 Cell AC15) 5.1%

URRT Part III

- Revised overall rate increases and range

Pennsylvania Actuarial Memorandum

- Revised overall rate increases and range

Rate Change Request Summary

- Overall rate increase updated
- Word document will be sent separately

Public PDF File

- Updated most recent versions of filing components
 - URRT Part III submitted 8/7/19
 - Pennsylvania Actuarial Memorandum submitted 8/7/19
 - Rate Change Request Summary submitted 8/7/2019
 - Responses to July 16 Objection Letter
 - Updated Checklist

2019 and 2020 Service Area


Issuer: QCC Insurance Company

Market: Individual



Key (*modify as needed*)

 : On-exchange service area

 : Off-exchange only service area

Completeness and Redaction Justification Checklist

Issuer Name: QCC Insurance Company, Inc.

Market: Individual PPO

SERFF ID: INAC-131927222

TOC #	Description	Completed (Mark with "X")	Redaction Justification		
			Redacted (Y/N)	Page # in Public PDF	Justification submitted (Y/NA)
Federal Documents Required to Be Filed with PID					
A.2.	RFJ Part I - Unified Rate Review Template	X			
	RFJ Part II – Consumer Friendly Justification	X			
	RFJ Part III – Actuarial Memorandum	X	Y	33-40	Y
	Federal Rates Template	X			
Summary Documents/Confirmation of HIOS & SERFF Submissions					
A.2.B.	HIOS Submission	X			
A.2.C.	SERFF Submission	X			
A.2.D.	SERFF Rate/Rule Schedule Tab	X			
B.	Cover Letter & PA Bulletin Information	X			
C.	Rate Change Request Summary	X			
PA Actuarial Memorandum and Rate Exhibits					
D.1.A.	Company Information	X	Y	9	Y
D.1.B.	Rate History & Proposed Variation in Rate Changes	X	N	10	N/A
D.1.C.	Average Rate Change	X	N	10	N/A
D.1.D.	Membership Count	X	N	10	N/A
	PA Act. Exhibits Table 1	X	N	17	N/A
D.1.E.	Benefit Changes	X	N	10	N/A
D.1.F.	Experience Period Claims & Premium	X	N	10-11	N/A
	PA Act. Exhibits Table 2	X	N	17	N/A
D.1.G.	Credibility of Data	X	N	11	N/A
	PA Act. Exhibits Tables 2b, 3b, 4b (if applicable)	N/A	N	N/A	N/A
D.1.H.	Trend Identification	X	N	11-12	N/A
	PA Act. Exhibits Table 3	X	N	17	N/A
D.1.I.	Historical Experience	X	N	12	N/A
	PA Act. Exhibits Table 4	X	N	17	N/A
D.2.A.	Development of PAIR, MAIR and Total Allowed Claims	X	N	12-13	N/A
	PA Act. Exhibits Table 5	X	N	18	N/A
D.2.B.	Retention Items	X	N	13	N/A
	PA Act. Exhibits Table 6	X	N	18	N/A
D.2.C.	Normalized Market-Adjusted Projected Allowed Total Claims	X	N	14	N/A
	PA Act. Exhibits Table 7	X	N	18	N/A
D.2.D.	Components of Rate Change	X	N	14	N/A
	PA Act. Exhibits Table 8	X	N	18	N/A
	PA Act. Exhibits Table 9	X	N	18	N/A
D.3.	Plan Rate Development	X	N	14	N/A
	PA Act. Exhibits Table 10	X	N	19	N/A
D.4.	Plan Premium Development for 21-Year-Old Non-Tobacco User	X	N	14	N/A
	PA Act. Exhibits Table 11	X	N	20	N/A
D.5.A.	Age and Tobacco Factors	X	N	14	N/A
	PA Act. Exhibits Table 12	X	N	21	N/A
D.5.B.	Geographic Factors	X	N	14	N/A
	PA Act. Exhibits Table 13	X	N	21	N/A
D.5.C.	Network Factors	X	N	14	N/A
	PA Act. Exhibits Table 14	X	N	21	N/A
D.5.D.	Service Area Composition	N/A	N	N/A	N/A
D.5.E.	Composite Rating	N/A	N	N/A	N/A
D.6.	Actuarial Certifications	X	Y	15	Y
Additional Exhibits					
E.	Department Plan Design Summary & Rate Tables	X	N	22-27	N/A
	Service Area Map	X	N	101	N/A
Redaction Justification (must be submitted if any information is redacted)		X			Y