

<b>State:</b>	Pennsylvania	<b>Filing Company:</b>	Highmark Benefits Group
<b>TOI/Sub-TOI:</b>	H15I Individual Health - Hospital/Surgical/Medical Expense/H15I.001 Health - Hospital/Surgical/Medical Expense		
<b>Product Name:</b>	1A-DP-19-HBG		
<b>Project Name/Number:</b>	1A-DP-19-HBG/1A-DP-19-HBG		

## Supporting Document Schedules

<b>Satisfied - Item:</b>	ACA Public Rate Filing PDF
<b>Comments:</b>	A redacted version of the rate filing is attached for public disclosure.
<b>Attachment(s):</b>	1A-DP-19-HBG Public Rate Filing 071919.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	



May 21, 2019

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

Re: Highmark Benefits Group 2020 ACA Rate Filing (Individual Market)  
Filing # 1A-DP-19-HBG (SERFF # HGHM-131904542)

**This constitutes Notice pursuant to Section 707 of the Pennsylvania Right-to-Know Law that the attached Highmark Benefits Group (HBG) 2020 Individual Market Rate Filing contains Trade Secret and Confidential Proprietary Information. Therefore, HBG must, prior to the release of any portion of this Filing, be notified of any request by a third party for access to this Filing, and the Trade Secret and/or Confidential Proprietary Information identified by HBG should be redacted before release.**

Dear Ms. Gray:

This Filing includes the Highmark Benefits Group ("HBG", "Company") Individual Market rates and the supporting rate development for policies with effective dates on or after January 1, 2020.

**In the event the Department decides to publish this Filing in the PA Bulletin, the company information requested in the Department's 2020 ACA-Compliant Health Insurance Rate Filing Guidance, Section B, is provided below:**

**Requested Company Information**

1. Company Name & NAIC #: **Highmark Benefits Group, NAIC # 15508**
2. Market: **Individual**
3. On or Off Exchange: **This filing reflects that the Company anticipates selling plans on and off of the exchange.**
4. Effective date of coverage: **January 1, 2020**
5. Average rate change requested: **Not applicable; the Company did not offer individual market plans in 2019.**

6. Range of rate change requested: **Not applicable; the Company did not offer individual market plans in 2019.**
7. Total additional annual revenue generated from the proposed rate change: **Not applicable; the Company did not offer individual market plans in 2019.**
8. Product(s): **EPO**
9. Rating Areas and the change from 2019: **Rating Area 3**

The Company did not offer individual market plans in 2019.

10. Metal Levels and Catastrophic Plans: This filing reflects that the Company anticipates selling the following Metal Levels in the indicated market: **Platinum, Gold, Silver, Bronze, and Catastrophic**
11. Current number of covered lives and policyholders as of February 1, 2019: **0 covered lives; 0 policyholders**
12. Number of plans offered in 2020 and the change this represents from 2019: **12**

The Company did not offer individual market plans in 2019.

Please note that inclusion of premium rates in this filing for a given offering should not be construed to mean that the offering will ultimately be made available for sale in the Market. Final offering decisions will be made consistent with and within the timelines set forth in CMS rules and/or ACA regulations.

13. Corresponding contract form #, SERFF and Binder ID#s: **The corresponding SERFF binder number is HGHM-PA20-125092163 affecting the following Company products and forms:**

Product Name / Type	Contract Form & SERFF#
my Priority Blue EPO	EPO/HBG/DP; HGHM-131923656
my Priority Blue Flex EPO HDHP	EPO/HDHP/HBG/DP; HGHM-131925011
my Priority Blue Major Events EPO	CAT/EPO/HBG/DP; HGHM-131925017

14. HIOS Issuer ID # and submission tracking number: **HIOS Issuer ID #79962, Company Filing #1A-DP-19-HBG (SERFF Filing # HGHM-131904542)**

#### **Additional Filing Disclosures**

The Company has submitted all Required Documents stipulated by the Department, including the federal documents related to this filing, in its SERFF submission. In addition to the Required Documents, the Company has submitted a Supplemental Exhibits file containing additional detailed exhibits on items referenced in the PA Actuarial Memorandum. All tables, exhibits, and detail in support of this filing and the PA Actuarial Memorandum have been included in Excel format. To assist in the Department's review, the Excel files have retained their formulas to the extent possible.

CMS has instructed issuers that it no longer requires any interim changes to the URRT to be submitted to HIOS. CMS is requesting that only the initial URRT and the final URRT be submitted to HIOS.

### **Potential Changes to Federal Regulations**

In accordance with the filing instructions specified by the Pennsylvania Insurance Department, the rate development in this filing is based on certain assumptions we have had to make at this point in time. We have accounted for the elimination of the Individual Mandate penalty and the lack of CSR funding in 2020 by using the factors prescribed in the Department's guidance. Additional assumptions include that advance payment of premium credits (APTCs) will continue until the end of 2020, there will be no significant changes in legislation, regulations or otherwise (i.e. rules, regulatory guidance, etc.) impacting the ACA market, and all Pennsylvania QHP issuers currently participating on the Marketplace will continue to do so throughout 2020. In addition, there are other uncertainties that may directly or indirectly affect an already unstable insurance market and ultimately, rates. If any of these assumptions are ultimately incorrect or additional developments occur that similarly have a detrimental impact to the market, modifications to the rate development may be necessary. As a result, HBG reserves the right to submit a revised filing.

### **Request for Confidentiality**

Please note that the rates and the supporting rate development contained in this Filing are competitively sensitive, are not in the public domain, and constitute business confidential proprietary/trade secret information that would cause harm to the competitive position of HBG if disclosed to the public.

Public disclosure of any information contained in this Filing would allow HBG competitors to better understand or discover its confidential and proprietary rating, pricing and/or marketing practices, would undermine competition in the Individual market and could have negative consequences for the operation of HBG's business. Therefore, HBG asserts that this Filing, in its entirety, constitutes Trade Secret and Confidential Proprietary Information and should not be disclosed.

It is our understanding that the Department does not intend to publish the confidential & proprietary information contained in this Filing or to otherwise permit this Filing and its

confidential information, other than the redacted information and final approved rates, to be disclosed or released.

Furthermore and pursuant to the Pennsylvania Right-to-Know Law ("RTKL"), HBG must be notified prior to release of information contained in this Filing and be given the opportunity to respond to requests for such information. Should the Department receive such request or require the release of information contained in this Filing for its own purposes, HBG asserts its right to release a redacted version of the Filing. In accordance with the RTKL, please contact the HBG RTKL representative identified below prior to release of any information contained in this Filing:

[REDACTED]  
RTKL Representative  
VP Chief Privacy Officer  
Highmark Health  
120 Fifth Avenue, Suite 2114  
Pittsburgh, PA 15222

Furthermore, it should be noted that HBG is equally concerned that even if this information is released in aggregate form, it still may be easy to identify the carrier that submitted it.

Should you have any questions regarding the attached Filing, please feel free to contact me at [REDACTED] or via e-mail at: [REDACTED]

Sincerely,

[REDACTED]  
[REDACTED]  
Vice President, Actuarial Services  
Highmark Inc.

cc:

[REDACTED]

# Rate Change Summary

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## Highmark Benefits Group – Individual Plans

Rate request filing ID # 1A-DP-19-HBG (SERFF # HGHM-131904542) - 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:	N/A <sup>1</sup>
Revised requested average rate change:	N/A <sup>1</sup>
Range of requested rate change:	N/A
Effective date:	January 1, 2020
People impacted:	N/A
Available in:	Rating Area 3

### Key information

#### Jan. 2018-Dec. 2018 financial experience

Premiums	N/A
Claims	N/A
Administrative expenses	N/A
Taxes & fees	N/A
Company made (after taxes)	N/A

#### How it plans to spend your premium

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

Claims:	86%
Administrative:	9%
Taxes & fees:	5%
Profit:	0%

The company expects its annual medical costs to increase **7.5%**.

### Explanation of requested rate change

There is no rate change because this company did not offer individual market plans in 2019.

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

# Actuarial Memorandum

## 1. Basic Information and Data

### A. Company Information

The appropriate company information has been provided in Table 0. General information pertaining to this rate filing is summarized below:

- Company Name: Highmark Benefits Group (“HBG”, “Company”)
- NAIC #: 15508
- HIOS Issuer ID: 79962
- State: Pennsylvania
- Market: Individual
- Effective Date: 1/1/2020
- SERFF Rate Filing #: HGHM-131904542

In accordance with the filing instructions specified by the Pennsylvania Insurance Department, the rate development in this filing is based on certain assumptions we have had to make at this point in time. We have accounted for the elimination of the Individual Mandate penalty and the lack of CSR funding in 2020 by using the factors prescribed in the Department’s guidance. Additional assumptions include that advance payment of premium credits (APTCs) will continue until the end of 2020, there will be no significant changes in legislation, regulations or otherwise (i.e. rules, regulatory guidance, etc.) impacting the ACA market, and all Pennsylvania QHP issuers currently participating on the Marketplace will continue to do so throughout 2020. In addition, there are other uncertainties that may directly or indirectly affect an already unstable insurance market and ultimately, rates. If any of these assumptions are ultimately incorrect or additional developments occur that similarly have a detrimental impact to the market, modifications to the rate development may be necessary. As a result, the Company reserves the right to submit a revised filing.

### B. Rate History and Proposed Variations in Rate Changes

Not applicable; The Company is new to the Individual Market for 2020.

### C. Average Rate Change

Not applicable; The Company is new to the Individual Market for 2020.

### D. Membership Count

Please see Table 1 for the average age, age breakdown, and total membership for the periods shown.

### E. Benefit/Cost Sharing Changes

Benefit changes are not applicable, as all plans are new for 2020.

The screenshots from the HHS AV calculator, showing the plan benefits and the resulting actuarial values, can be found as a separate attachment within the *Supporting Documentation* section in

SERFF. Also, the PA Plan Design Summary and Rate Tables along with the HIOS Plan IDs can be found within the *Rate/Rule Schedule* section in SERFF.

## **F. Experience Period Claims and Premium**

Not applicable, as all plans are new for 2020.

## **G. Credibility of Data**

HBG did not offer any products in 2018. The 2020 rates are based on 2018 experience from First Priority Health (FPH) and First Priority Life Insurance Company (FPLIC), adjusted for the expected 2020 HBG population. This experience was chosen because it is large and reasonably represents the population expected to buy HBG products.

A manual rate was developed by blending 2018 experience from multiple sources, primarily ACA and group claims for the February 1, 2019 snapshot membership, to approximate the anticipated 2020 HBG population. A demonstration of the manual rate calculation can be found in Attachment A.

Given the lack of premium and paid claims data for some of the membership sources, these items have been left blank in Table 2b. Additionally, Risk Adjustment has been left blank as it is not used in the rate calculation. All other fields represent the data and assumptions that make up the manual rate.

## **H. Trend Identification**

Table 3b identifies the annual medical and prescription drug allowed claims cost and utilization trends. The underlying total annual trend is 7.5%. Additionally, there is an induced utilization adjustment of -0.01% per year applied to reach the overall trend of 7.47% shown in Table 3b column G. The definitions of service categories, cost, and utilization in Table 3b are consistent with the URRT instructions.

The cost trends presented in Table 3b reflect the Company's expectations regarding increases in in-network contractual reimbursement, as well as projected out-of-network costs. These estimates measure and normalize for benefit leverage, population aging, and historical changes for fee schedules, as well as company-wide utilization management programs, and external trend drivers.

The significant changes observed in the volume, demographics and morbidity of the ACA population from 2015 to 2018 yield component trends that are not directly applicable for trend analysis. The trend components in Table 3b therefore represent the same blended average for all types of service and are applied to the aggregate experience for pricing. Component data was not used in the development of the trend.

A separate regression study was developed by the Company's valuation team to analyze the ACA trend levels of enrolled cohorts of ACA members. The enrollment period covers a significant portion of both 2017 and 2018. The analysis took into consideration seasonality and adjusted for step changes that were included in the network factors in the two periods. Resulting r-squared levels were compared to determine confidence levels of the resulting regression trends to develop a reasonable range of trend assumptions.



The regression study resulted in a composite trend in line with the requested composite trend of 7.5%. This trend level was also compared to the Highmark group business for reasonability.

## **I. Historical Experience**

Not applicable; all plans are new for 2020.

## **2. Rate Development & Change**

### **A. Development of Projected Index Rate, Market-Adjusted Index Rate, & Total Allowed Claims**

The development of the Projected Index Rate, Projected Market-Adjusted Index Rate, and Projected Total Allowed Claims, shown in Table 5, closely follows the methodologies discussed in the Part III Actuarial Memorandum submitted in the Rate Filing Justification. Please refer to the Part III Memorandum for further details.

Some of the items separately identified in Table 5 include:

- Given that expected 2019 population is used to develop the manual cost, no Change in Morbidity is required.

#### **Impact of Health Insurance Coverage Mandate Elimination**

In accordance with the Department's guidance, the morbidity factor was increased by 6.0% to reflect the market uncertainty from the elimination of the health insurance coverage mandate. This deterioration is reflected in the filing by multiplying the morbidity factor of 1.00 by 1.06 to arrive at a final morbidity factor of 1.06.

- Given that the population used to set the manual cost is consistent with the expected 2019 population no Change in Demographics is required.
- There is a Change in Network adjustment of 0.975.
- There is no Change in Benefits adjustment.
- The Change in Other adjustment of 1.002 reflects changes in pharmacy rebates and expected changes in hospital/physician settlements.

Please see Attachment A and E for a more detailed calculation of these factors. These factors can also be found in the accompanying spreadsheet.

The projected paid-to-allowed ratio is 0.789. The formula found in Table 5 cell C28 was overwritten because, unlike the average factor found in Table 10 cell K15, the Company's paid-to-allowed factor accounts for the projected enrollment by plan and is dampened by items such as capitation.

The quantitative development of the projected risk adjustment transfer amount for the Company is shown in Attachment B and included in the accompanying spreadsheet. The transfer amount is developed based on an analysis of the claims data underlying the manual rate development for this

filing (risk scores as defined in the HHS Notice of Benefit and Payment Parameters, as well as other risk transfer formula components) and an estimate as to the market-wide risk profile. This market-wide risk profile is developed from available market data, including prior years' risk adjustment transfer results, publicly available data (such as MLR reports), outside expertise from actuarial consultants, and results from the PA Insurance Department's RATEE analysis. Applying the federally prescribed transfer formula at the level of granularity available in Attachment B yields a projected gross risk adjustment transfer of (\$42.13) PMPM on a *billable* member month basis. This amount is then converted to a *total* member month basis of (\$42.06) PMPM in order to be used in the rate development. The expected risk adjustment payable reflects that the Company anticipates its average risk score (net of allowable rating factors) to be lower than the statewide average.

The (\$42.07) PMPM value in cell C31 of Table 5 equals the (\$42.06) PMPM value from Attachment B adjusted further for the composite effect of catastrophic eligibility and benefits in addition to EHB. Please note that, pursuant to the revised URRT instructions for 2020, the risk adjustment user fee is no longer included here but is now captured in the taxes and fees portion of administrative costs.

The exchange user fee in cell C32 of Table 5 is developed by taking the required user fee percentage of 3.0% and multiplying by the percentage of total members in expected to be on exchange of 87%. This results in a percentage of 2.6%. The PMPM of \$16.74 is calculated as 2.6% of the total required premium adjusted further for the composite effect of catastrophic eligibility and benefits in addition to EHB.

## **B. Retention Items**

Table 6 has been completed with the requested retention elements for the proposed rates for the rating period. The amounts presented separately sum to the total administrative expenses and taxes and fees presented in the rate development.

Administrative costs reflect internal costs that the Company is projected to incur in the rating period and are developed from standard expense allocation methods. Administrative expenses do not vary by plan.

The proposed rate development assumes an average broker commission of \$1.32 PMPM for 2020. The assumed broker commission schedule and the development of the average value are included in Attachment D.

Expenses for Quality Improvement initiatives are assumed to be 0.80%.

The following is a summary of the Taxes and Fees included in the rate development:

- Pennsylvania Premium Tax is not applicable to this issuer and thus is set to 0.0%.
- Federal Income Tax is set to 0.0%.
- Health Insurance Provider Fee is estimated to be 2.8%.
- Risk Adjustment User Fee is set to \$0.18 PMPM consistent with Federal regulations.

- Please note that, pursuant to the revised URRT instructions for 2020, the risk adjustment user fee should be captured in the taxes and fees portion of administrative costs. Table 10, column S thus captures this fee.

The Profit/Contingency for all plans is set to 0%. HBG has voluntarily refrained from adding a risk and contingency factor in this filing. By this voluntary action, HBG is not waving any right to include a risk and contingency factor which HBG believes is consistent with historical and legal interpretations of HBG and the Pennsylvania Insurance Department.

### **C. Normalized Market-Adjusted Projected Allowed Total Claims**

The normalization factors presented in Table 7 are each determined from the underlying membership demographics expected in the projected rating period. The 2019 values are not applicable since the Company did not offer individual market plans in 2019. The 2020 values represent our projection for 2020 assumed in the 2020 rate development.

### **D. Components of Rate Change**

Table 8 presents the components of change in the proposed 2020 Calibrated Plan Adjusted Index Rate (PMPM). Since all plans are new for 2020, this table is not applicable.

Table 9 presents the data elements supporting the calculations in Table 8. Since all plans are new for 2020, this table is not applicable.

## **3. Plan Rate Development**

Table 10 shows the plan rate development for 2020. This table shows the plans that the Company intends to offer in 2020. The 2020 rating factors are consistent with the factors found on Worksheet 2 of the URRT. The pricing effect on Table 10 is further broken out into Pricing AV, Benefit Richness, and Non-Funding of CSR Adjustment. Similar to the URRT, the admin effect on Table 10 is broken out into Admin Costs, Taxes and Fees, and Profit or Contingency.

The benefit richness factors in column L are populated with the factors found in Attachment C and the corresponding supporting spreadsheet included with this rate filing. The derivation of the AV and Cost Sharing factors can also be found in Attachment C. The values in column 8 of the attachment represent the pure induced utilization for each plan. The Company's utilization factors are consistent with those used in the Federal Risk Adjustment program except for the platinum plan. Using the standard platinum utilization factor from the Federal Risk Adjustment program would have yielded rate levels significantly different from other comparable platinum rates in the market. Thus, the Company's utilization factor for the platinum plan was selected based on an assessment of other prevailing platinum utilization factors in the market. Each plan's factor was then normalized by the average utilization factor. The average is a weighted average using projected membership as the weight. After normalization the average factor as shown in Attachment C is 1.000.

Note that the HHS Actuarial Value Calculator was unable to accommodate all of the Company's benefit designs. Plans needing certification are marked in column I of Table 10. Screen shots of all of the AV

calculations and the appropriate certifications are included as a separate attachment within the *Supporting Documentation* section in SERFF.

Columns AG through AP are populated with the February 1, 2019 enrollment by 2020 plan and rating area. Since HBG did not offer individual market plans in 2019, this section is blank.

#### **Impact of Non-Payment of Cost Sharing Reduction Subsidies**

In accordance with the Department's guidance, we have applied an additional adjustment to our AV pricing values for those Silver plans not offered exclusively off-exchange. This adjustment factor was 1.2 and represents the non-payment of Cost Sharing Reduction subsidies. Consistent with the Department's guidance, this adjustment was reflected in Table 10 in Column P.

### **4. Plan Premium Development for 21-Year-Old Non-Tobacco User**

Table 11 presents the Company's 21-year-old non-tobacco premium in the Individual Market. Since the Company is new to the Individual Market for 2020, the change in 21-year-old premiums is not applicable.

## **5. Plan Factors**

### **A. Age and Tobacco Factors**

Please see Table 12 for the Company's age and tobacco factors.

### **B. Geographic Factors**

Please see Table 13 for the Company's geographic factors. The Company's factors for the rating period are unchanged from the currently approved factors.

### **C. Network Factors**

Please see Table 14 for a summary of the Company's network rating factors. The factors presented here represent the medical network factors from the prior approved rate filing (if applicable) and the projected medical network factors for the rating period.

### **D. Service Area Composition**

The Plan Design Summary exhibit uploaded as a separate document contains the service areas related to this filing. As requested, service area maps are included.

## **6. Actuarial Certifications**

I, [REDACTED], am a member of the American Academy of Actuaries and meet its qualification standards for actuaries issuing statements of actuarial opinions in the United States. This filing is prepared on behalf of HBG to accompany its rate filing (for calendar year 2020) for the Individual Market on and off the Pennsylvania Exchange.

I hereby certify that the projected index rate is, to the best of my knowledge and understanding:

- In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80(d)(1) and 147.102),
- Developed in compliance with the applicable Actuarial Standards of Practice
- Reasonable in relation to the benefits provided and the population anticipated to be covered
- Neither excessive nor deficient.

I certify that 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 allowable modifiers used to generate plan-level rates were:

- The actuarial value and cost-sharing design of the plan.
- The plan's provider network, delivery system characteristics, and utilization management practices.
- The benefits provided under the plan that are in addition to the essential health benefits. These estimated benefits were pooled with similar benefits within the single risk pool and the claims experience from those benefits was utilized to determine rate variations.
- Administrative costs, excluding Exchange user fees.

I certify that all factors, benefit and other changes from the prior approved filing have been disclosed in the 2020 PA Actuarial Memorandum Rate Exhibits.

I certify that new plans are not considered modifications of existing plans (per the uniform modification standards in 45 CFR 147.106).

I certify that the AV Metal Values included in Table 10 were based entirely on the Federal AV Calculator or one of the approved alternative approaches.

I certify that the geographic rating factors reflect only differences in the costs of delivery (which can include unit cost and provider practice pattern differences) and do not include differences for population morbidity by geographic area.

I certify that 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.

[Redacted Signature]

[Redacted Title]

Title: [Redacted Title]

Date: 07/12/2019

**Highmark Benefits Group**  
**Individual Market Product Portfolio**  
**Supplemental Exhibits**

Attachment A	Manual Cost Development
Attachment B	Risk Adjustment Calculation
Attachment C	Induced Demand Calculation
Attachment D	Broker Commission Calculation
Attachment E	Demographics Calculation
Attachment F	Milliman Certification

## Highmark Benefits Group

### Individual Market

#### Attachment A - Manual Cost Development

Projected Member Months	173,124
Manual Allowed Claims	\$96,303,215
Medical Allowed PMPM	\$556.27
Rx Rebates PMPM	(\$23.10)
Hosp/Phys. Settlement PMPM	\$2.79
Dental Claims PMPM	\$0.52
Pediatric Vision Capitation PMPM	\$0.34
Adjusted Manual Cost PMPM - PID Table 5	\$536.81

Highmark Benefits Group

Individual Market

Attachment B - Risk Adjustment Calculation

2020 Total State Development

2020 Calculated Results

Non-  
Catastrophic  
Pool

Catastrophic  
Pool

Composite



# Highmark Benefits Group

## Individual Market

### Attachment C - Induced Demand Calculations

Induced Utilization Exhibit							
Plan ID (1)	Metal Level (2)	Projected Membership (3)	Projected Allowed Claims (4)	Projected Paid Claims (5)	Paid to Allowed Factor (6)	AV & Cost Sharing Factor (7)	(7)/(6) (8)
79962PA0190008	Platinum	4,152	\$3,855,267.20	\$3,837,201.33	0.995	1.440	1.447
79962PA0190007	Gold	5,364	\$3,586,067.04	\$3,130,214.60	0.873	0.909	1.042
79962PA0190006	Gold	22,704	\$15,178,610.39	\$13,782,505.06	0.908	0.946	1.042
79962PA0200003	Silver	1,776	\$1,132,364.03	\$865,208.52	0.764	0.759	0.994
79962PA0190005	Silver	27,696	\$17,658,758.01	\$16,148,185.84	0.914	0.909	0.994
79962PA0200002	Silver	37,800	\$24,100,991.21	\$20,083,425.90	0.833	0.828	0.994
79962PA0190001	Bronze	39,516	\$24,461,261.85	\$16,238,862.84	0.664	0.640	0.965
79962PA0200001	Bronze	564	\$349,128.24	\$231,916.10	0.664	0.641	0.965
79962PA0190004	Bronze	7,776	\$4,813,512.81	\$3,216,797.03	0.668	0.645	0.965
79962PA0190002	Bronze	24,168	\$14,960,516.66	\$9,494,531.55	0.635	0.612	0.965
79962PA0210001	Catastrophic	696	\$396,371.98	\$239,413.99	0.604	0.583	0.965
79962PA0190003	Bronze	912	\$564,547.80	\$377,278.66	0.668	0.645	0.965
Total		173,124	\$111,057,397.23	\$87,645,541.41	0.789	0.789	1.000

Components of AV & Cost Sharing Factor					
HIOS Plan ID	Metal Level	Paid-to- Allowed Ratio	Induced Utilization Factor	Avg. Benefit Richness	AV & Cost Sharing Factor
79962PA0190008	Platinum	0.995	1.500	1.037	1.440
79962PA0190007	Gold	0.873	1.080	1.037	0.909
79962PA0190006	Gold	0.908	1.080	1.037	0.946
79962PA0200003	Silver	0.764	1.030	1.037	0.759
79962PA0190005	Silver	0.914	1.030	1.037	0.909
79962PA0200002	Silver	0.833	1.030	1.037	0.828
79962PA0190001	Bronze	0.664	1.000	1.037	0.640
79962PA0200001	Bronze	0.664	1.000	1.037	0.641
79962PA0190004	Bronze	0.668	1.000	1.037	0.645
79962PA0190002	Bronze	0.635	1.000	1.037	0.612
79962PA0210001	Catastrophic	0.604	1.000	1.037	0.583
79962PA0190003	Bronze	0.668	1.000	1.037	0.645

**Highmark Benefits Group**

**Individual Market**

**Attachment D - Broker Commission Schedule**



### Attachment E - 'Change in Demographics' Calculation

**Table E.3 - Projection Period Membership**

Membership Mix		
Non-Tobacco	Tobacco	Total
0.14%	0.00%	0.14%
0.16%	0.00%	0.16%
0.16%	0.00%	0.16%
0.23%	0.00%	0.23%
0.28%	0.00%	0.28%
0.22%	0.00%	0.22%
0.24%	0.00%	0.24%
0.28%	0.00%	0.28%
0.28%	0.00%	0.28%
0.38%	0.00%	0.38%
0.24%	0.00%	0.24%
0.36%	0.00%	0.36%
0.39%	0.00%	0.39%
0.38%	0.00%	0.38%
0.52%	0.00%	0.52%
0.44%	0.00%	0.44%
0.44%	0.00%	0.44%
0.54%	0.00%	0.54%
0.46%	0.00%	0.46%
0.70%	0.03%	0.72%
0.73%	0.01%	0.74%
0.95%	0.00%	0.95%
0.92%	0.04%	0.95%
0.92%	0.01%	0.93%
0.66%	0.02%	0.68%
0.72%	0.07%	0.80%
1.02%	0.11%	1.13%
1.01%	0.10%	1.11%
1.15%	0.18%	1.33%
1.35%	0.17%	1.52%
1.26%	0.15%	1.41%
1.09%	0.14%	1.23%
1.11%	0.07%	1.18%
0.90%	0.12%	1.02%
1.04%	0.13%	1.17%
0.83%	0.12%	0.96%
0.92%	0.11%	1.03%
0.96%	0.17%	1.13%
1.03%	0.15%	1.18%
1.12%	0.08%	1.20%
1.11%	0.11%	1.22%
1.11%	0.13%	1.24%
1.26%	0.12%	1.37%
1.19%	0.14%	1.33%
1.27%	0.07%	1.34%
1.22%	0.13%	1.35%
1.45%	0.08%	1.53%
1.63%	0.13%	1.76%
1.75%	0.14%	1.89%
2.00%	0.17%	2.17%
2.13%	0.09%	2.21%
2.06%	0.15%	2.21%
2.18%	0.26%	2.44%
2.33%	0.13%	2.46%
2.75%	0.20%	2.95%
2.87%	0.15%	3.02%
3.23%	0.17%	3.40%
2.99%	0.19%	3.17%
3.77%	0.19%	3.95%
3.47%	0.29%	3.77%
3.88%	0.32%	4.20%
4.21%	0.15%	4.36%
5.29%	0.27%	5.56%
5.58%	0.28%	5.86%
6.45%	0.29%	6.74%
93.71%	6.29%	100.00%

**Table E.5 - 'Change in Demographics' Calculation**

	Experience Period	Projection Period	Change in Demographics
Average Age Factor	N/A	1.959	
Average Tobacco Factor	N/A	1.009	
<u>Average Area Factor</u>	<u>N/A</u>	<u>1.000</u>	
Average Demographic Factor	N/A	1.978	
Child Capping Adjustment		0.999	
Adjusted Demographic Factor		1.979	
<u>Capitation Dampening</u>	<u>N/A</u>	<u>1.000</u>	
Final Demographic Factor	N/A	1.979	N/A



1550 Liberty Ridge Drive, Suite 200  
Wayne, PA 19087-5572  
Tel + 610 687.5644  
Fax + 610 687.4236  
www.milliman.com

## ACTUARIAL MEMORANDUM

### Highmark Benefits Group

#### Individual Rate Filing - January 1, 2020

I, [REDACTED], am a member of the American Academy of Actuaries and meet its qualification standards for preparing individual rate filings. As a consulting actuary, I was requested by Highmark Benefits Group (“HBG”) to review the development of the market-wide base rate for the individual market on and off the Pennsylvania Exchange. The confidential material presented in this filing was prepared for the specific purpose of submitting the rating formula for the Pennsylvania Insurance Department and may not be appropriate for other purposes. This filing represents premium rates for individuals sold or renewed effective January 1, 2020. The rates are guaranteed until December 31, 2020.

To the best of my knowledge and judgment, the following are true with respect to this filing:

1. Premium rates are established in accordance with generally accepted actuarial principles and the applicable Actuarial Standards of Practice. They are not excessive, inadequate, or unfairly discriminatory. Rates are reasonable in relationship to the benefits provided. However, it is certain that actual experience will not conform exactly to the assumptions used in this analysis. To the extent that actual experience is different from the assumptions used in developing the rates, the actual results will also deviate from the projected amounts.
2. In compliance with all applicable Pennsylvania and Federal Statutes and Regulations (45 CFR 156.80 and 147.102).
3. The rating factors and rating methodology are reasonable and consistent with HBG’s business plan at the time of the filing.

[REDACTED]  
[REDACTED]  
Fellow, Society of Actuaries  
Member, American Academy of Actuaries  
May 17, 2019

PA Rate Template Part I  
Data Relevant to the Rate Filing

Table 0. Identifying Information

Carrier Name:	HBG		
Product(s):	EPO		
Market Segment:	Individual		
Rate Effective Date:	01/01/2020	to	12/31/2020
Base Period Start Date	01/01/2018	to	12/31/2018
Date of Most Recent Membership	02/01/2019		

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of 02-01-2019)	Projected Rating Period
Average Age			47.0
Total	0	0	173,124
<18		0	9,868
18-24		0	9,415
25-29		0	10,180
30-34		0	10,402
35-39		0	9,510
40-44		0	11,247
45-49		0	15,048
50-54		0	21,252
55-59		0	29,972
60-63		0	34,568
64+		0	11,663

\*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
			-							
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)										\$ -
Loss Ratio										0.00%

\*Express Prescription Drug Rebates as a negative number

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital				0.00%	
Outpatient Hospital				0.00%	
Professional				0.00%	
Other Medical				0.00%	
Capitation					
Prescription Drugs				0.00%	
Total Annual Trend				0.00%	0.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.000	

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

\*\* Should = URRT Trend

Table 4. Historical Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-15				#DIV/0!		#DIV/0!				#DIV/0!
Feb-15				#DIV/0!		#DIV/0!				#DIV/0!
Mar-15				#DIV/0!		#DIV/0!				#DIV/0!
Apr-15				#DIV/0!		#DIV/0!				#DIV/0!
May-15				#DIV/0!		#DIV/0!				#DIV/0!
Jun-15				#DIV/0!		#DIV/0!				#DIV/0!
Jul-15				#DIV/0!		#DIV/0!				#DIV/0!
Aug-15				#DIV/0!		#DIV/0!				#DIV/0!
Sep-15				#DIV/0!		#DIV/0!				#DIV/0!
Oct-15				#DIV/0!		#DIV/0!				#DIV/0!
Nov-15				#DIV/0!		#DIV/0!				#DIV/0!
Dec-15				#DIV/0!		#DIV/0!				#DIV/0!
Jan-16				#DIV/0!		#DIV/0!				#DIV/0!
Feb-16				#DIV/0!		#DIV/0!				#DIV/0!
Mar-16				#DIV/0!		#DIV/0!				#DIV/0!
Apr-16				#DIV/0!		#DIV/0!				#DIV/0!
May-16				#DIV/0!		#DIV/0!				#DIV/0!
Jun-16				#DIV/0!		#DIV/0!				#DIV/0!
Jul-16				#DIV/0!		#DIV/0!				#DIV/0!
Aug-16				#DIV/0!		#DIV/0!				#DIV/0!
Sep-16				#DIV/0!		#DIV/0!				#DIV/0!
Oct-16				#DIV/0!		#DIV/0!				#DIV/0!
Nov-16				#DIV/0!		#DIV/0!				#DIV/0!
Dec-16				#DIV/0!		#DIV/0!				#DIV/0!
Jan-17				#DIV/0!		#DIV/0!				#DIV/0!
Feb-17				#DIV/0!		#DIV/0!				#DIV/0!
Mar-17				#DIV/0!		#DIV/0!				#DIV/0!
Apr-17				#DIV/0!		#DIV/0!				#DIV/0!
May-17				#DIV/0!		#DIV/0!				#DIV/0!
Jun-17				#DIV/0!		#DIV/0!				#DIV/0!
Jul-17				#DIV/0!		#DIV/0!				#DIV/0!
Aug-17				#DIV/0!		#DIV/0!				#DIV/0!
Sep-17				#DIV/0!		#DIV/0!				#DIV/0!
Oct-17				#DIV/0!		#DIV/0!				#DIV/0!
Nov-17				#DIV/0!		#DIV/0!				#DIV/0!
Dec-17				#DIV/0!		#DIV/0!				#DIV/0!
Jan-18				#DIV/0!		#DIV/0!				#DIV/0!
Feb-18				#DIV/0!		#DIV/0!				#DIV/0!
Mar-18				#DIV/0!		#DIV/0!				#DIV/0!
Apr-18				#DIV/0!		#DIV/0!				#DIV/0!
May-18				#DIV/0!		#DIV/0!				#DIV/0!
Jun-18				#DIV/0!		#DIV/0!				#DIV/0!
Jul-18				#DIV/0!		#DIV/0!				#DIV/0!
Aug-18				#DIV/0!		#DIV/0!				#DIV/0!
Sep-18				#DIV/0!		#DIV/0!				#DIV/0!
Oct-18				#DIV/0!		#DIV/0!				#DIV/0!
Nov-18				#DIV/0!		#DIV/0!				#DIV/0!
Dec-18				#DIV/0!		#DIV/0!				#DIV/0!

\* Express Completion Factor as a percentage

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

Carrier Name: HBIG  
Product(s): EPO  
Market Segment: Individual  
Rate Effective Date: 01/01/2020

Table 2b. Manual 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
			173,124		\$ 96,875,622.96	\$ -	\$ (3,999,164.40)	\$ 58,862.16	\$ -	\$ 536.81
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)										\$ 536.81
Loss Ratio										0.00%

\*Express Prescription Drug Rebates as a negative number

Table 3b. Manual Trend Components

Service Category	Cost*	Utilization*	Induced Utilization*	Composite Trend	Weight*
Inpatient Hospital	4.50%	2.87%	-0.01%	7.49%	19.91%
Outpatient Hospital	4.50%	2.87%	-0.01%	7.49%	37.10%
Professional	4.50%	2.87%	-0.01%	7.49%	20.49%
Other Medical	4.50%	2.87%	-0.01%	7.49%	2.05%
Capitation				-25.51%	0.06%
Prescription Drugs	4.50%	2.87%	-0.01%	7.49%	20.38%
Total Annual Trend				7.47%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.155	

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

Table 4b. Historical Manual Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors *	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-15				#DIV/0!		#DIV/0!				#DIV/0!
Feb-15				#DIV/0!		#DIV/0!				#DIV/0!
Mar-15				#DIV/0!		#DIV/0!				#DIV/0!
Apr-15				#DIV/0!		#DIV/0!				#DIV/0!
May-15				#DIV/0!		#DIV/0!				#DIV/0!
Jun-15				#DIV/0!		#DIV/0!				#DIV/0!
Jul-15				#DIV/0!		#DIV/0!				#DIV/0!
Aug-15				#DIV/0!		#DIV/0!				#DIV/0!
Sep-15				#DIV/0!		#DIV/0!				#DIV/0!
Oct-15				#DIV/0!		#DIV/0!				#DIV/0!
Nov-15				#DIV/0!		#DIV/0!				#DIV/0!
Dec-15				#DIV/0!		#DIV/0!				#DIV/0!
Jan-16				#DIV/0!		#DIV/0!				#DIV/0!
Feb-16				#DIV/0!		#DIV/0!				#DIV/0!
Mar-16				#DIV/0!		#DIV/0!				#DIV/0!
Apr-16				#DIV/0!		#DIV/0!				#DIV/0!
May-16				#DIV/0!		#DIV/0!				#DIV/0!
Jun-16				#DIV/0!		#DIV/0!				#DIV/0!
Jul-16				#DIV/0!		#DIV/0!				#DIV/0!
Aug-16				#DIV/0!		#DIV/0!				#DIV/0!
Sep-16				#DIV/0!		#DIV/0!				#DIV/0!
Oct-16				#DIV/0!		#DIV/0!				#DIV/0!
Nov-16				#DIV/0!		#DIV/0!				#DIV/0!
Dec-16				#DIV/0!		#DIV/0!				#DIV/0!
Jan-17				#DIV/0!		#DIV/0!				#DIV/0!
Feb-17				#DIV/0!		#DIV/0!				#DIV/0!
Mar-17				#DIV/0!		#DIV/0!				#DIV/0!
Apr-17				#DIV/0!		#DIV/0!				#DIV/0!
May-17				#DIV/0!		#DIV/0!				#DIV/0!
Jun-17				#DIV/0!		#DIV/0!				#DIV/0!
Jul-17				#DIV/0!		#DIV/0!				#DIV/0!
Aug-17				#DIV/0!		#DIV/0!				#DIV/0!
Sep-17				#DIV/0!		#DIV/0!				#DIV/0!
Oct-17				#DIV/0!		#DIV/0!				#DIV/0!
Nov-17				#DIV/0!		#DIV/0!				#DIV/0!
Dec-17				#DIV/0!		#DIV/0!				#DIV/0!
Jan-18				#DIV/0!		#DIV/0!				#DIV/0!
Feb-18				#DIV/0!		#DIV/0!				#DIV/0!
Mar-18				#DIV/0!		#DIV/0!				#DIV/0!
Apr-18				#DIV/0!		#DIV/0!				#DIV/0!
May-18				#DIV/0!		#DIV/0!				#DIV/0!
Jun-18				#DIV/0!		#DIV/0!				#DIV/0!
Jul-18				#DIV/0!		#DIV/0!				#DIV/0!
Aug-18				#DIV/0!		#DIV/0!				#DIV/0!
Sep-18				#DIV/0!		#DIV/0!				#DIV/0!
Oct-18				#DIV/0!		#DIV/0!				#DIV/0!
Nov-18				#DIV/0!		#DIV/0!				#DIV/0!
Dec-18				#DIV/0!		#DIV/0!				#DIV/0!

\* 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:	HBG
Product(s):	EPO
Market Segment:	Individual
Rate Effective Date:	01/01/2020

**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	\$ -	\$ 536.81	<- Actual Experience PMPM should be consistent with the Index Rate for Experience Period
Two year trend projection Factor	1.000	1.155	
Unadjusted Projected Allowed EHB Claims PMPM	\$ -	\$ 619.99	
<u>Single Risk Pool Adjustment Factors</u>			
Change in Morbidity		1.060	<- See URRT Instructions
Change in Other	0.000	0.976	
Change in Demographics		1.000	<- See URRT Instructions
Change in Network		0.975	
Change in Benefits		1.000	<- See URRT Instructions
Change in Other		1.002	
Total Adjusted Projected Allowed EHB Claims PMPM	\$ -	\$ 641.69	
Credibility Factors	0%	100%	<- See Instructions
Blended Projected EHB Claims PMPM		\$ 641.69	
			<- Projected Index Rate
<b>Development of the Market-Adjusted Index Rate and Total Allowed Claims</b>			
Adjusted Projected Allowed EHB Claims PMPM	\$ 641.69		<- 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	0.789		
Projected Paid EHB Claims PMPM	\$ 506.42		
<u>Market-wide Adjustments</u>			
Projected Risk Adjustment PMPM	\$ (42.07)		
Projected Paid Exchange User Fees PMPM	\$ 16.74		
Market-Adjusted Projected Paid EHB Claims PMPM	\$ 565.23		
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 716.21		<- Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM	\$ -		
Market-Adjusted Projected Paid Total Claims PMPM	\$ 565.23		
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 716.21		

**Table 6. Retention**

Retention Items - Express in percentages	Percentages	PMPM Amounts
Administrative Expenses	8.88%	\$56.86
General and Claims	7.88%	\$50.42
Agent/Broker Fees and Commissions	0.21%	\$1.32
Quality Improvement Initiatives	0.80%	\$5.12
Taxes and Fees	2.83%	\$18.11
RA User Fee	0.03%	\$0.18
PA Premium Tax (if applicable)	0.00%	\$0.00
Federal Income Tax	0.00%	\$0.00
Health Insurance Providers Fee (Prorated for Small Groups only)	2.80%	\$17.93
Profit/Contingency (after tax)	0.00%	\$0.00
Total Retention	11.71%	\$74.97
Projected Required Revenue PMPM	\$ 640.20	

**Table 8. Components of Rate Change**

Rate Components	2019	2020	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
B. Base period allowed claims before normalization		\$ 536.81	\$536.81	#DIV/0!
C. Normalization factor component of change	#DIV/0!	\$ (268.32)	#DIV/0!	#DIV/0!
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	#DIV/0!	\$ 268.49	#DIV/0!	#DIV/0!
D2. URRT Trend	#DIV/0!	\$ 41.60	#DIV/0!	#DIV/0!
D3. URRT Morbidity	#DIV/0!	\$ 18.61	#DIV/0!	#DIV/0!
D4. URRT Other	#DIV/0!	\$ (7.75)	#DIV/0!	#DIV/0!
D5. Normalized URRT RA/RI on an allowed basis	#DIV/0!	\$ 26.66	#DIV/0!	#DIV/0!
D6. Normalized Exchange User Fee on an allowed basis	#DIV/0!	\$ 10.61	#DIV/0!	#DIV/0!
D7. Subtotal - Sum(D1:D6)	#DIV/0!	\$ 358.22	#DIV/0!	#DIV/0!
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	#DIV/0!	\$ (9.11)	#DIV/0!	#DIV/0!
E2. Pricing AV	#DIV/0!	\$ (81.71)	#DIV/0!	#DIV/0!
E3. Benefit Richness	#DIV/0!	\$ 16.71	#DIV/0!	#DIV/0!
E4. Catastrophic Eligibility	#DIV/0!	\$ (1.89)	#DIV/0!	#DIV/0!
E5. Subtotal - Sum(E1:E4)	#DIV/0!	\$ (76.00)	#DIV/0!	#DIV/0!
F. Change in Retention Components				
F1. Administrative Expenses	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
F2. Taxes and Fees	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
F3. Profit and/or Contingency	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
F4. Subtotal - Sum(F1:F3)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
G. Change in Miscellaneous Items			\$ -	#DIV/0!
H. Sum of Components of Rate Change (should approximate the change shown in line A)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!



nce Period

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$	536.81	<- Index Rate of Experience Period on URRT
Blended Earned Premium	\$	-	
Blended Loss Ratio		0.00%	

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

Effective Date	01/01/2020	04/01/2020	07/01/2020	10/01/2020	Total Single Risk Pool
# of Member Months Renewing in Quarter					-
Adjusted Projected Allowed EHB Claims PMPM Q1	\$ 641.69	\$ 641.69	\$ 641.69	\$ 641.69	\$ 641.69
Months of Trend	-	3	6	9	
Annual Trend	7.47%	7.47%	7.47%	7.47%	
Single Risk Pool Projected Allowed Claims	\$ 641.69	\$ 653.35	\$ 665.22	\$ 677.31	\$ -
Quarterly Trend Factor	100.0%	101.8%	103.7%	105.6%	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	0.000	1.961
Average Geographic Factor	0.000	1.000
Average Tobacco Factor	0.000	1.009
Average Benefit Richness (induced demand)	0.000	1.037
Average Network Factor	0.000	0.975
Market-Adjusted Projected Allowed Total Claims PMPM	\$ -	\$ 716.21
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	#DIV/0!	\$ 358.22

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

	2019	2020	
Paid-to-Allowed	0.000	0.789	
URRT Trend (Total Applied Trend Factor)	0.000	1.155	<- URRT W1, S2
URRT Morbidity	0.000	1.060	<- URRT W1, S2
URRT "Other"	0.000	0.976	<- URRT W1, S2
Risk Adjustment	\$ -	\$ 42.07	<- URRT W1, S3
Exchange User Fee	\$ -	\$ 16.74	<- URRT W1, S3
Capitation	\$ -	\$ 0.20	<- URRT W1, S2
Network		0.975	
Pricing AV		0.766	<- For 2019 in cell J81, please include a factor equal to the product of the average Pricing AV and the Non-Funding of CSR Adjustment
Benefit Richness		1.063	
Catastrophic Eligibility		0.993	
Administrative Expenses	0.00%	8.88%	
Taxes and Fees	0.00%	2.83%	
Profit and/or Contingency	0.00%	0.00%	

PA Rate Template Part III  
Table 10. Plan Rates

Carrier Name:	HBG
Product(s):	EPO
Market Segment:	Individual
Rate Effective Date:	01/01/2020
Base Period Start Date	01/01/2018
Date of Most Recent Membership	02/01/2019
Market Adjusted Index Rate	\$ 716.21

										45 CFR Part 156.8 (d) (2) Allowable Factors						
Plan Number	HIOS Plan ID (Standard Component)	Plan Type (HMO, POS, PPO, EPO, Indemnity, Other)	1/1/2019 Plan Marketing Name	Existing, Modified, New, Discontinued & Mapped, Discontinued & Not Mapped (E,M,N,DM, DNM) for 2020	1/1/2020 Plan HIOS Plan ID (If 1/1/2019 Plan Discontinued & Mapped)	Metallic Tier	Metallic Tier Actuarial Value	Standard AV, Approach (1), Approach (2)	Exchange On/Off or Off	Pricing AV (company-determined AV)	Benefit Richness (induced demand)	Benefits in addition to EHB	Provider Network	Catastrophic Eligibility	Non-Funding of CSR Adjustment	Pure Premium
Totals							0.695			0.766	1.025	1.000	1.000	0.993	1.033	\$ 34.06
Transitional Plans	TRANSITIONAL	N/A	TRANSITIONAL	DNM	TRANSITIONAL	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Plan 1	79962PA0190001	EPO	my Priority Blue Flex EPO Bronze 3900	N		Bronze	0.647	Approach (1)	On/Off	0.664	0.965	1.000	1.000	1.000	1.000	\$458.67
Plan 2	79962PA0190002	EPO	my Priority Blue Flex EPO Bronze 7900	N		Bronze	0.599	Approach (1)	On/Off	0.635	0.965	1.000	1.000	1.000	1.000	\$438.48
Plan 3	79962PA0190003	EPO	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	N		Bronze	0.648	Approach (1)	Off	0.668	0.965	1.000	1.000	1.000	1.000	\$461.73
Plan 4	79962PA0190004	EPO	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	N		Bronze	0.648	Approach (1)	On/Off	0.668	0.965	1.000	1.000	1.000	1.000	\$461.73
Plan 5	79962PA0190005	EPO	my Priority Blue Flex EPO Silver 2900 - 2 Free PCP Visits	N		Silver	0.717	Approach (1)	On/Off	0.762	0.994	1.000	1.000	1.000	1.200	\$650.77
Plan 6	79962PA0190006	EPO	my Priority Blue Flex EPO Gold 800 - 2 Free PCP Visits	N		Gold	0.812	Approach (1)	On/Off	0.908	1.042	1.000	1.000	1.000	1.000	\$677.55
Plan 7	79962PA0190007	EPO	my Priority Blue Flex EPO Gold 0 - 2 Free PCP Visits	N		Gold	0.78	Approach (1)	On/Off	0.873	1.042	1.000	1.000	1.000	1.000	\$651.33
Plan 8	79962PA0190008	EPO	my Priority Blue Flex EPO Platinum 200 - 2 Free PCP Visits	N		Platinum	0.908	Approach (1)	On/Off	0.995	1.447	1.000	1.000	1.000	1.000	\$1,031.51
Plan 9	79962PA0200001	EPO	my Priority Blue Flex EPO Bronze 6750 HSA	N		Bronze	0.625	Standard AV	Off	0.664	0.965	1.000	1.000	1.000	1.000	\$458.95
Plan 10	79962PA0200002	EPO	my Priority Blue Flex EPO Silver 3950 HSA	N		Silver	0.66	Approach (1)	On/Off	0.694	0.994	1.000	1.000	1.000	1.200	\$593.01
Plan 11	79962PA0200003	EPO	my Priority Blue Flex EPO Silver 1750 HSA	N		Silver	0.717	Standard AV	Off	0.764	0.994	1.000	1.000	1.000	1.000	\$543.75
Plan 12	79962PA0210001	EPO	my Priority Blue Major Events EPO 8150 - 3 Free PCP Visits	N		Catastrophic	0.575	Standard AV	On/Off	0.604	0.965	1.000	1.000	0.920	1.000	\$383.94

Calibration	
Age Calibration Factor	1.961
Geographic Calibration Factor	1.000
Tobacco Calibration Factor	1.009
Aggregate Calibration Factor	1.979

Admin Costs	Taxes & Fees (not including Exchange fees)	Profit or Contingency
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8.9%	2.8%	0.0%
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[illegible]

2019 Calibrated Plan Adjusted Index Rate PMPM	2020 Calibrated Plan Adjusted Index Rate PMPM
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#DIV/0! #DIV/0!

N/A	N/A
	\$ 262.50
	\$ 250.94
	\$ 264.25
	\$ 264.25
	\$ 372.43
	\$ 387.76
	\$ 372.76
	\$ 590.34
	\$ 262.66
	\$ 339.38
	\$ 311.19
	\$ 219.73

**% of Total Covered Lives**

[illegible][illegible]

PA Rate Template Part IV A - Individual
Table 11. Plan Premium Development for 21-Year-Old Non-Tobacco User

Carrier Name: HBG
Product(s): EPO
Market Segment: Individual
Rate Effective Date: 01/01/2020

Table with 7 columns: Plan Number, HIOS Plan ID (Standard Component), 1/1/2019 Plan Marketing Name, Discontinued, New, Modified, Existing (D,N,M,E) for 2020, 1/1/2020 Plan HIOS Plan ID (If 1/1/2019 Plan Discontinued & Mapped), Metallic Tier, Exchange On/Off or Off

Totals These cells auto-fill using the data entered in Table 10.

Table with 7 columns: Plan Number, HIOS Plan ID (Standard Component), 1/1/2019 Plan Marketing Name, Discontinued, New, Modified, Existing (D,N,M,E) for 2020, 1/1/2020 Plan HIOS Plan ID (If 1/1/2019 Plan Discontinued & Mapped), Metallic Tier, Exchange On/Off or Off. Rows include Plan 1 through Plan 12 with various plan details.

Table with 10 columns: 1, 2, 3, 4, 5, 6, 7, 8, 9, Average (weighted by enrollment by rating area). Header: 2019 21-year-old, Non-Tobacco Premium PMPM. Row 1: \$ -, \$ -, \$ -, \$ -, \$ -, \$ -, \$ -, \$ -, \$ -. Row 2: \$ -, \$ -, \$ -, \$ -, \$ -, \$ -, \$ -, \$ -, \$ -.

Table with 10 columns: 1, 2, 3, 4, 5, 6, 7, 8, 9, Average (weighted by enrollment by rating area). Rows 3-12 showing premium values for each plan, all showing \$ - for most categories.

[illegible][illegible]

## PA Rate Quarterly Template Part V Consumer Factors

Carrier Name:	HBG
Product(s):	EPO
Market Segment:	Individual
Rate Effective Date:	01/01/2020

### 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	1.100
15	0.833			41	1.302	1.105
16	0.859			42	1.325	1.112
17	0.885			43	1.357	1.121
18	0.913	1.000		44	1.397	1.132
19	0.941	1.000		45	1.444	1.145
20	0.970	1.000		46	1.500	1.160
21	1.000	1.025		47	1.563	1.177
22	1.000	1.025		48	1.635	1.196
23	1.000	1.025		49	1.706	1.217
24	1.000	1.025		50	1.786	1.225
25	1.004	1.025		51	1.865	1.225
26	1.024	1.025		52	1.952	1.225
27	1.048	1.025		53	2.040	1.225
28	1.087	1.025		54	2.135	1.225
29	1.119	1.025		55	2.230	1.225
30	1.135	1.025		56	2.333	1.225
31	1.159	1.025		57	2.437	1.225
32	1.183	1.025		58	2.548	1.225
33	1.198	1.025		59	2.603	1.225
34	1.214	1.025		60	2.714	1.225
35	1.222	1.025		61	2.810	1.225
36	1.230	1.025		62	2.873	1.225
37	1.238	1.025		63	2.952	1.225
38	1.246	1.025		64+	3.000	1.225
39	1.262	1.025				

\*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	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming, Lycoming	1.000	1.000
Rating Area 4			
Rating Area 5			
Rating Area 6			
Rating Area 7			
Rating Area 8			
Rating Area 9			

### Table 14. Network Factors

[illegible]

Company Name: Highmark Benefits Group  
Market: Individual  
Product: EPO  
Effective Date of Rates: January 1, 2020

Ending date of Rates: December 31, 2020

HIOS Plan ID (On Exchange)=>	79962PA0190008		79962PA0190007		79962PA0190006		N/A	
HIOS Plan ID (Off Exchange)=>	79962PA0190008		79962PA0190007		79962PA0190006		79962PA0200003	
Plan Marketing Name =>	my Priority Blue Flex EPO Platinum 200 - 2		my Priority Blue Flex EPO Gold 0 - 2 Free		my Priority Blue Flex EPO Gold 800 - 2 Free		my Priority Blue Flex EPO Silver 1750 HSA	
Form # =>	EPO/HBG/DP		EPO/HBG/DP		EPO/HBG/DP		EPO/HDHP/HBG/DP	
Rating Area =>	Area 3		Area 3		Area 3		Area 3	
Network =>	P		P		P		P	
Metal =>	Platinum		Gold		Gold		Silver	
Deductible =>	200		0		800		1750	
Coinsurance =>	90%		60%		80%		70%	
Copays =>	\$0 (Visits 1-2); then \$5 PCP		\$0 (Visits 1-2); then \$25 PCP		\$0 (Visits 1-2); then \$20 PCP		N/A	
OOP Maximum =>	5000		7500		6000		6750	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$451.61	\$451.61	\$285.16	\$285.16	\$296.64	\$296.64	\$238.06	\$238.06
15	\$491.75	\$491.75	\$310.51	\$310.51	\$323.00	\$323.00	\$259.22	\$259.22
16	\$507.10	\$507.10	\$320.20	\$320.20	\$333.09	\$333.09	\$267.31	\$267.31
17	\$522.45	\$522.45	\$329.89	\$329.89	\$343.17	\$343.17	\$275.40	\$275.40
18	\$538.98	\$538.98	\$340.33	\$340.33	\$354.02	\$354.02	\$284.12	\$284.12
19	\$555.51	\$555.51	\$350.77	\$350.77	\$364.88	\$364.88	\$292.83	\$292.83
20	\$572.63	\$572.63	\$361.58	\$361.58	\$376.13	\$376.13	\$301.85	\$301.85
21	\$590.34	\$605.10	\$372.76	\$382.08	\$387.76	\$397.45	\$311.19	\$318.97
22	\$590.34	\$605.10	\$372.76	\$382.08	\$387.76	\$397.45	\$311.19	\$318.97
23	\$590.34	\$605.10	\$372.76	\$382.08	\$387.76	\$397.45	\$311.19	\$318.97
24	\$590.34	\$605.10	\$372.76	\$382.08	\$387.76	\$397.45	\$311.19	\$318.97
25	\$592.70	\$607.52	\$374.25	\$383.61	\$389.31	\$399.04	\$312.43	\$320.24
26	\$604.51	\$619.62	\$381.71	\$391.25	\$397.07	\$407.00	\$318.66	\$326.63
27	\$618.68	\$634.15	\$390.65	\$400.42	\$406.37	\$416.53	\$326.13	\$334.28
28	\$641.70	\$657.74	\$405.19	\$415.32	\$421.50	\$432.04	\$338.26	\$346.72
29	\$660.59	\$677.10	\$417.12	\$427.55	\$433.90	\$444.75	\$348.22	\$356.93
30	\$670.04	\$686.79	\$423.08	\$433.66	\$440.11	\$451.11	\$353.20	\$362.03
31	\$684.20	\$701.31	\$432.03	\$442.83	\$449.41	\$460.65	\$360.67	\$369.69
32	\$698.37	\$715.83	\$440.98	\$452.00	\$458.72	\$470.19	\$368.14	\$377.34
33	\$707.23	\$724.91	\$446.57	\$457.73	\$464.54	\$476.15	\$372.81	\$382.13
34	\$716.67	\$734.59	\$452.53	\$463.84	\$470.74	\$482.51	\$377.78	\$387.22
35	\$721.40	\$739.44	\$455.51	\$466.90	\$473.84	\$485.69	\$380.27	\$389.78
36	\$726.12	\$744.27	\$458.49	\$469.95	\$476.94	\$488.86	\$382.76	\$392.33
37	\$730.84	\$749.11	\$461.48	\$473.02	\$480.05	\$492.05	\$385.25	\$394.88
38	\$735.56	\$753.95	\$464.46	\$476.07	\$483.15	\$495.23	\$387.74	\$397.43
39	\$745.01	\$763.64	\$470.42	\$482.18	\$489.35	\$501.58	\$392.72	\$402.54
40	\$754.45	\$829.90	\$476.39	\$524.03	\$495.56	\$545.12	\$397.70	\$437.47
41	\$768.62	\$849.33	\$485.33	\$536.29	\$504.86	\$557.87	\$405.17	\$447.71
42	\$782.20	\$869.81	\$493.91	\$549.23	\$513.78	\$571.32	\$412.33	\$458.51
43	\$801.09	\$898.02	\$505.84	\$567.05	\$526.19	\$589.86	\$422.28	\$473.38
44	\$824.70	\$933.56	\$520.75	\$589.49	\$541.70	\$613.20	\$434.73	\$492.11
45	\$852.45	\$976.06	\$538.27	\$616.32	\$559.93	\$641.12	\$449.36	\$514.52
46	\$885.51	\$1,027.19	\$559.14	\$648.60	\$581.64	\$674.70	\$466.79	\$541.48
47	\$922.70	\$1,086.02	\$582.62	\$685.74	\$606.07	\$713.34	\$486.39	\$572.48
48	\$965.21	\$1,154.39	\$609.46	\$728.91	\$633.99	\$758.25	\$508.80	\$608.52
49	\$1,007.12	\$1,225.67	\$635.93	\$773.93	\$661.52	\$805.07	\$530.89	\$646.09
50	\$1,054.35	\$1,291.58	\$665.75	\$815.54	\$692.54	\$848.36	\$555.79	\$680.84
51	\$1,100.98	\$1,348.70	\$695.20	\$851.62	\$723.17	\$885.88	\$580.37	\$710.95
52	\$1,152.34	\$1,411.62	\$727.63	\$891.35	\$756.91	\$927.21	\$607.44	\$744.11
53	\$1,204.29	\$1,475.26	\$760.43	\$931.53	\$791.03	\$969.01	\$634.83	\$777.67
54	\$1,260.38	\$1,543.97	\$795.84	\$974.90	\$827.87	\$1,014.14	\$664.39	\$813.88
55	\$1,316.46	\$1,612.66	\$831.25	\$1,018.28	\$864.70	\$1,059.26	\$693.95	\$850.09
56	\$1,377.26	\$1,687.14	\$869.65	\$1,065.32	\$904.64	\$1,108.18	\$726.01	\$889.36
57	\$1,438.66	\$1,762.36	\$908.42	\$1,112.81	\$944.97	\$1,157.59	\$758.37	\$929.00
58	\$1,504.19	\$1,842.63	\$949.79	\$1,163.49	\$988.01	\$1,210.31	\$792.91	\$971.31
59	\$1,536.66	\$1,882.41	\$970.29	\$1,188.61	\$1,009.34	\$1,236.44	\$810.03	\$992.29
60	\$1,602.18	\$1,962.67	\$1,011.67	\$1,239.30	\$1,052.38	\$1,289.17	\$844.57	\$1,034.60
61	\$1,658.86	\$2,032.10	\$1,047.46	\$1,283.14	\$1,089.61	\$1,334.77	\$874.44	\$1,071.19
62	\$1,696.05	\$2,077.66	\$1,070.94	\$1,311.90	\$1,114.03	\$1,364.69	\$894.05	\$1,095.21
63	\$1,742.68	\$2,134.78	\$1,100.39	\$1,347.98	\$1,144.67	\$1,402.22	\$918.63	\$1,125.32
64+	\$1,771.02	\$2,169.50	\$1,118.28	\$1,369.89	\$1,163.28	\$1,425.02	\$933.57	\$1,143.62

HIOS Plan ID (On Exchange)=>	79962PA0190005		79962PA0200002		79962PA0190001		N/A	
HIOS Plan ID (Off Exchange)=>	79962PA0190005		79962PA0200002		79962PA0190001		79962PA0200001	
Plan Marketing Name =>	my Priority Blue Flex EPO Silver 2900 - 2		my Priority Blue Flex EPO Silver 3950 HSA		my Priority Blue Flex EPO Bronze 3900		my Priority Blue Flex EPO Bronze 6750 HSA	
Form # =>	EPO/HBG/DP		EPO/HDHP/HBG/DP		EPO/HBG/DP		EPO/HDHP/HBG/DP	
Rating Area =>	Area 3		Area 3		Area 3		Area 3	
Network =>	P		P		P		P	
Metal =>	Silver		Silver		Bronze		Bronze	
Deductible =>	2900		3950		3900		6750	
Coinsurance =>	70%		90%		60%		100%	
Copays =>	\$0 (Visits 1-2); then \$40 PCP		\$50 A/D PCP		\$60 PCP		N/A	
OOP Maximum =>	7800		6750		7900		6750	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$284.91	\$284.91	\$259.63	\$259.63	\$200.81	\$200.81	\$200.93	\$200.93
15	\$310.23	\$310.23	\$282.70	\$282.70	\$218.66	\$218.66	\$218.80	\$218.80
16	\$319.92	\$319.92	\$291.53	\$291.53	\$225.49	\$225.49	\$225.62	\$225.62
17	\$329.60	\$329.60	\$300.35	\$300.35	\$232.31	\$232.31	\$232.45	\$232.45
18	\$340.03	\$340.03	\$309.85	\$309.85	\$239.66	\$239.66	\$239.81	\$239.81
19	\$350.46	\$350.46	\$319.36	\$319.36	\$247.01	\$247.01	\$247.16	\$247.16
20	\$361.26	\$361.26	\$329.20	\$329.20	\$254.63	\$254.63	\$254.78	\$254.78
21	\$372.43	\$381.74	\$339.38	\$347.86	\$262.50	\$269.06	\$262.66	\$269.23
22	\$372.43	\$381.74	\$339.38	\$347.86	\$262.50	\$269.06	\$262.66	\$269.23
23	\$372.43	\$381.74	\$339.38	\$347.86	\$262.50	\$269.06	\$262.66	\$269.23
24	\$372.43	\$381.74	\$339.38	\$347.86	\$262.50	\$269.06	\$262.66	\$269.23
25	\$373.92	\$383.27	\$340.74	\$349.26	\$263.55	\$270.14	\$263.71	\$270.30
26	\$381.37	\$390.90	\$347.53	\$356.22	\$268.80	\$275.52	\$268.96	\$275.68
27	\$390.31	\$400.07	\$355.67	\$364.56	\$275.10	\$281.98	\$275.27	\$282.15
28	\$404.83	\$414.95	\$368.91	\$378.13	\$285.34	\$292.47	\$285.51	\$292.65
29	\$416.75	\$427.17	\$379.77	\$389.26	\$293.74	\$301.08	\$293.92	\$301.27
30	\$422.71	\$433.28	\$385.20	\$394.83	\$297.94	\$305.39	\$298.12	\$305.57
31	\$431.65	\$442.44	\$393.34	\$403.17	\$304.24	\$311.85	\$304.42	\$312.03
32	\$440.58	\$451.59	\$401.49	\$411.53	\$310.54	\$318.30	\$310.73	\$318.50
33	\$446.17	\$457.32	\$406.58	\$416.74	\$314.48	\$322.34	\$314.67	\$322.54
34	\$452.13	\$463.43	\$412.01	\$422.31	\$318.68	\$326.65	\$318.87	\$326.84
35	\$455.11	\$466.49	\$414.72	\$425.09	\$320.78	\$328.80	\$320.97	\$328.99
36	\$458.09	\$469.54	\$417.44	\$427.88	\$322.88	\$330.95	\$323.07	\$331.15
37	\$461.07	\$472.60	\$420.15	\$430.65	\$324.98	\$333.10	\$325.17	\$333.30
38	\$464.05	\$475.65	\$422.87	\$433.44	\$327.08	\$335.26	\$327.27	\$335.45
39	\$470.01	\$481.76	\$428.30	\$439.01	\$331.28	\$339.56	\$331.48	\$339.77
40	\$475.97	\$523.57	\$433.73	\$477.10	\$335.48	\$369.03	\$335.68	\$369.25
41	\$484.90	\$535.81	\$441.87	\$488.27	\$341.78	\$377.67	\$341.98	\$377.89
42	\$493.47	\$548.74	\$449.68	\$500.04	\$347.81	\$386.76	\$348.02	\$387.00
43	\$505.39	\$566.54	\$460.54	\$516.27	\$356.21	\$399.31	\$356.43	\$399.56
44	\$520.28	\$588.96	\$474.11	\$536.69	\$366.71	\$415.12	\$366.94	\$415.38
45	\$537.79	\$615.77	\$490.06	\$561.12	\$379.05	\$434.01	\$379.28	\$434.28
46	\$558.65	\$648.03	\$509.07	\$590.52	\$393.75	\$456.75	\$393.99	\$457.03
47	\$582.11	\$685.14	\$530.45	\$624.34	\$410.29	\$482.91	\$410.54	\$483.21
48	\$608.92	\$728.27	\$554.89	\$663.65	\$429.19	\$513.31	\$429.45	\$513.62
49	\$635.37	\$773.25	\$578.98	\$704.62	\$447.83	\$545.01	\$448.10	\$545.34
50	\$665.16	\$814.82	\$606.13	\$742.51	\$468.83	\$574.32	\$469.11	\$574.66
51	\$694.58	\$850.86	\$632.94	\$775.35	\$489.56	\$599.71	\$489.86	\$600.08
52	\$726.98	\$890.55	\$662.47	\$811.53	\$512.40	\$627.69	\$512.71	\$628.07
53	\$759.76	\$930.71	\$692.34	\$848.12	\$535.50	\$655.99	\$535.83	\$656.39
54	\$795.14	\$974.05	\$724.58	\$887.61	\$560.44	\$686.54	\$560.78	\$686.96
55	\$830.52	\$1,017.39	\$756.82	\$927.10	\$585.38	\$717.09	\$585.73	\$717.52
56	\$868.88	\$1,064.38	\$791.77	\$969.92	\$612.41	\$750.20	\$612.79	\$750.67
57	\$907.61	\$1,111.82	\$827.07	\$1,013.16	\$639.71	\$783.64	\$640.10	\$784.12
58	\$948.95	\$1,162.46	\$864.74	\$1,059.31	\$668.85	\$819.34	\$669.26	\$819.84
59	\$969.44	\$1,187.56	\$883.41	\$1,082.18	\$683.29	\$837.03	\$683.70	\$837.53
60	\$1,010.78	\$1,238.21	\$921.08	\$1,128.32	\$712.43	\$872.73	\$712.86	\$873.25
61	\$1,046.53	\$1,282.00	\$953.66	\$1,168.23	\$737.63	\$903.60	\$738.07	\$904.14
62	\$1,069.99	\$1,310.74	\$975.04	\$1,194.42	\$754.16	\$923.85	\$754.62	\$924.41
63	\$1,099.41	\$1,346.78	\$1,001.85	\$1,227.27	\$774.90	\$949.25	\$775.37	\$949.83
64+	\$1,117.29	\$1,368.68	\$1,018.14	\$1,247.22	\$787.50	\$964.69	\$787.98	\$965.28



HIOS Plan ID (On Exchange)=>	79962PA0190004		79962PA0190002		79962PA0210001		N/A	
HIOS Plan ID (Off Exchange)=>	79962PA0190004		79962PA0190002		79962PA0210001		79962PA0190003	
Plan Marketing Name =>	my Priority Blue Flex EPO Bronze 7800 - 1		my Priority Blue Flex EPO Bronze 7900		my Priority Blue Major Events EPO 8150 - 3		my Priority Blue Flex EPO Bronze 7800 - 1	
Form # =>	EPO/HBG/DP		EPO/HBG/DP		CAT/EPO/HBG/DP		EPO/HBG/DP	
Rating Area =>	Area 3		Area 3		Area 3		Area 3	
Network =>	P		P		P		R	
Metal =>	Bronze		Bronze		Catastrophic		Bronze	
Deductible =>	7800		7900		8150		7800	
Coinsurance =>	60%		100%		100%		60%	
Copays =>	\$0 (Visit 1); then 60% A/D PCP		N/A		\$0 (Visits 1-3); then subject to deductible		\$0 (Visit 1); then 60% A/D PCP	
OOP Maximum =>	7900		7900		8150		7900	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$202.15	\$202.15	\$191.97	\$191.97	\$168.09	\$168.09	\$202.15	\$202.15
15	\$220.12	\$220.12	\$209.03	\$209.03	\$183.04	\$183.04	\$220.12	\$220.12
16	\$226.99	\$226.99	\$215.56	\$215.56	\$188.75	\$188.75	\$226.99	\$226.99
17	\$233.86	\$233.86	\$222.08	\$222.08	\$194.46	\$194.46	\$233.86	\$233.86
18	\$241.26	\$241.26	\$229.11	\$229.11	\$200.61	\$200.61	\$241.26	\$241.26
19	\$248.66	\$248.66	\$236.13	\$236.13	\$206.77	\$206.77	\$248.66	\$248.66
20	\$256.32	\$256.32	\$243.41	\$243.41	\$213.14	\$213.14	\$256.32	\$256.32
21	\$264.25	\$270.86	\$250.94	\$257.21	\$219.73	\$225.22	\$264.25	\$270.86
22	\$264.25	\$270.86	\$250.94	\$257.21	\$219.73	\$225.22	\$264.25	\$270.86
23	\$264.25	\$270.86	\$250.94	\$257.21	\$219.73	\$225.22	\$264.25	\$270.86
24	\$264.25	\$270.86	\$250.94	\$257.21	\$219.73	\$225.22	\$264.25	\$270.86
25	\$265.31	\$271.94	\$251.94	\$258.24	\$220.61	\$226.13	\$265.31	\$271.94
26	\$270.59	\$277.35	\$256.96	\$263.38	\$225.00	\$230.63	\$270.59	\$277.35
27	\$276.93	\$283.85	\$262.99	\$269.56	\$230.28	\$236.04	\$276.93	\$283.85
28	\$287.24	\$294.42	\$272.77	\$279.59	\$238.85	\$244.82	\$287.24	\$294.42
29	\$295.70	\$303.09	\$280.80	\$287.82	\$245.88	\$252.03	\$295.70	\$303.09
30	\$299.92	\$307.42	\$284.82	\$291.94	\$249.39	\$255.62	\$299.92	\$307.42
31	\$306.27	\$313.93	\$290.84	\$298.11	\$254.67	\$261.04	\$306.27	\$313.93
32	\$312.61	\$320.43	\$296.86	\$304.28	\$259.94	\$266.44	\$312.61	\$320.43
33	\$316.57	\$324.48	\$300.63	\$308.15	\$263.24	\$269.82	\$316.57	\$324.48
34	\$320.80	\$328.82	\$304.64	\$312.26	\$266.75	\$273.42	\$320.80	\$328.82
35	\$322.91	\$330.98	\$306.65	\$314.32	\$268.51	\$275.22	\$322.91	\$330.98
36	\$325.03	\$333.16	\$308.66	\$316.38	\$270.27	\$277.03	\$325.03	\$333.16
37	\$327.14	\$335.32	\$310.66	\$318.43	\$272.03	\$278.83	\$327.14	\$335.32
38	\$329.26	\$337.49	\$312.67	\$320.49	\$273.78	\$280.62	\$329.26	\$337.49
39	\$333.48	\$341.82	\$316.69	\$324.61	\$277.30	\$284.23	\$333.48	\$341.82
40	\$337.71	\$371.48	\$320.70	\$352.77	\$280.81	\$308.89	\$337.71	\$371.48
41	\$344.05	\$380.18	\$326.72	\$361.03	\$286.09	\$316.13	\$344.05	\$380.18
42	\$350.13	\$389.34	\$332.50	\$369.74	\$291.14	\$323.75	\$350.13	\$389.34
43	\$358.59	\$401.98	\$340.53	\$381.73	\$298.17	\$334.25	\$358.59	\$401.98
44	\$369.16	\$417.89	\$350.56	\$396.83	\$306.96	\$347.48	\$369.16	\$417.89
45	\$381.58	\$436.91	\$362.36	\$414.90	\$317.29	\$363.30	\$381.58	\$436.91
46	\$396.38	\$459.80	\$376.41	\$436.64	\$329.60	\$382.34	\$396.38	\$459.80
47	\$413.02	\$486.12	\$392.22	\$461.64	\$343.44	\$404.23	\$413.02	\$486.12
48	\$432.05	\$516.73	\$410.29	\$490.71	\$359.26	\$429.67	\$432.05	\$516.73
49	\$450.81	\$548.64	\$428.10	\$521.00	\$374.86	\$456.20	\$450.81	\$548.64
50	\$471.95	\$578.14	\$448.18	\$549.02	\$392.44	\$480.74	\$471.95	\$578.14
51	\$492.83	\$603.72	\$468.00	\$573.30	\$409.80	\$502.01	\$492.83	\$603.72
52	\$515.82	\$631.88	\$489.83	\$600.04	\$428.91	\$525.41	\$515.82	\$631.88
53	\$539.07	\$660.36	\$511.92	\$627.10	\$448.25	\$549.11	\$539.07	\$660.36
54	\$564.17	\$691.11	\$535.76	\$656.31	\$469.12	\$574.67	\$564.17	\$691.11
55	\$589.28	\$721.87	\$559.60	\$685.51	\$490.00	\$600.25	\$589.28	\$721.87
56	\$616.50	\$755.21	\$585.44	\$717.16	\$512.63	\$627.97	\$616.50	\$755.21
57	\$643.98	\$788.88	\$611.54	\$749.14	\$535.48	\$655.96	\$643.98	\$788.88
58	\$673.31	\$824.80	\$639.40	\$783.27	\$559.87	\$685.84	\$673.31	\$824.80
59	\$687.84	\$842.60	\$653.20	\$800.17	\$571.96	\$700.65	\$687.84	\$842.60
60	\$717.17	\$878.53	\$681.05	\$834.29	\$596.35	\$730.53	\$717.17	\$878.53
61	\$742.54	\$909.61	\$705.14	\$863.80	\$617.44	\$756.36	\$742.54	\$909.61
62	\$759.19	\$930.01	\$720.95	\$883.16	\$631.28	\$773.32	\$759.19	\$930.01
63	\$780.07	\$955.59	\$740.77	\$907.44	\$648.64	\$794.58	\$780.07	\$955.59
64+	\$792.75	\$971.12	\$752.82	\$922.20	\$659.19	\$807.51	\$792.75	\$971.12

**Highmark Benefits Group  
Individual  
Plan Design Summary**

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
79962PA0190008	my Priority Blue Flex EPO Platinum 200 - 2 Free PCP Visits	EPO	Platinum	On/Off	P	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0190007	my Priority Blue Flex EPO Gold 0 - 2 Free PCP Visits	EPO	Gold	On/Off	P	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0190006	my Priority Blue Flex EPO Gold 800 - 2 Free PCP Visits	EPO	Gold	On/Off	P	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0200003	my Priority Blue Flex EPO Silver 1750 HSA	EPO	Silver	Off	P	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0190005	my Priority Blue Flex EPO Silver 2900 - 2 Free PCP Visits	EPO	Silver	On/Off	P	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0200002	my Priority Blue Flex EPO Silver 3950 HSA	EPO	Silver	On/Off	P	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0190001	my Priority Blue Flex EPO Bronze 3900	EPO	Bronze	On/Off	P	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0200001	my Priority Blue Flex EPO Bronze 6750 HSA	EPO	Bronze	Off	P	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0190004	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	On/Off	P	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0190002	my Priority Blue Flex EPO Bronze 7900	EPO	Bronze	On/Off	P	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0210001	my Priority Blue Major Events EPO 8150 - 3 Free PCP Visits	EPO	Catastrophic	On/Off	P	3	Wayne, Wyoming
79962PA0190003	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	Off	R	3	Lycoming

Company Name Highmark Benefits Group  
Market Individual  
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2019 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
79962PA0190008	my Priority Blue Flex EPO Platinum 200 - 2 Free PCP Visits	EPO	Platinum	On/Off
79962PA0190007	my Priority Blue Flex EPO Gold 0 - 2 Free PCP Visits	EPO	Gold	On/Off
79962PA0190006	my Priority Blue Flex EPO Gold 800 - 2 Free PCP Visits	EPO	Gold	On/Off
79962PA0200003	my Priority Blue Flex EPO Silver 1750 HSA	EPO	Silver	Off
79962PA0190005	my Priority Blue Flex EPO Silver 2900 - 2 Free PCP Visits	EPO	Silver	On/Off
79962PA0200002	my Priority Blue Flex EPO Silver 3950 HSA	EPO	Silver	On/Off
79962PA0190001	my Priority Blue Flex EPO Bronze 3900	EPO	Bronze	On/Off
79962PA0200001	my Priority Blue Flex EPO Bronze 6750 HSA	EPO	Bronze	Off
79962PA0190004	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	On/Off
79962PA0190002	my Priority Blue Flex EPO Bronze 7900	EPO	Bronze	On/Off
79962PA0210001	my Priority Blue Major Events EPO 8150 - 3 Free PCP Visits	EPO	Catastrophic	On/Off
79962PA0190003	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	Off

RATING AREA 1

0	0	0	0	0	0	0	0
Crawford	Clarion	Erie	Forest	McKean	Mercer	Venango	Warren

RATING AREA 2

0	0	0
Elk	Cameron	Potter

Company Name Highmark Benefits Group  
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 3											
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0	0	0	0	0	0	0	0	0	0
					Bradford	Carbon	Clinton	Lackawanna	Luzerne	Lycoming	Monroe	Pike	Sullivan	Susquehanna	Tioga	Wayne
79962PA0190008	my Priority Blue Flex EPO Platinum 200 - 2 Free PCP Visits	EPO	Platinum	On/Off	\$590.34	\$590.34	\$590.34	\$590.34	\$590.34		\$590.34	\$590.34	\$590.34	\$590.34	\$590.34	\$590.34
79962PA0190007	my Priority Blue Flex EPO Gold 0 - 2 Free PCP Visits	EPO	Gold	On/Off	\$372.76	\$372.76	\$372.76	\$372.76	\$372.76		\$372.76	\$372.76	\$372.76	\$372.76	\$372.76	\$372.76
79962PA0190006	my Priority Blue Flex EPO Gold 800 - 2 Free PCP Visits	EPO	Gold	On/Off	\$387.76	\$387.76	\$387.76	\$387.76	\$387.76		\$387.76	\$387.76	\$387.76	\$387.76	\$387.76	\$387.76
79962PA0200003	my Priority Blue Flex EPO Silver 1750 HSA	EPO	Silver	Off	\$311.19	\$311.19	\$311.19	\$311.19	\$311.19		\$311.19	\$311.19	\$311.19	\$311.19	\$311.19	\$311.19
79962PA0190005	my Priority Blue Flex EPO Silver 2900 - 2 Free PCP Visits	EPO	Silver	On/Off	\$372.43	\$372.43	\$372.43	\$372.43	\$372.43		\$372.43	\$372.43	\$372.43	\$372.43	\$372.43	\$372.43
79962PA0200002	my Priority Blue Flex EPO Silver 3950 HSA	EPO	Silver	On/Off	\$339.38	\$339.38	\$339.38	\$339.38	\$339.38		\$339.38	\$339.38	\$339.38	\$339.38	\$339.38	\$339.38
79962PA0190001	my Priority Blue Flex EPO Bronze 3900	EPO	Bronze	On/Off	\$262.50	\$262.50	\$262.50	\$262.50	\$262.50		\$262.50	\$262.50	\$262.50	\$262.50	\$262.50	\$262.50
79962PA0200001	my Priority Blue Flex EPO Bronze 6750 HSA	EPO	Bronze	Off	\$262.66	\$262.66	\$262.66	\$262.66	\$262.66		\$262.66	\$262.66	\$262.66	\$262.66	\$262.66	\$262.66
79962PA0190004	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	On/Off	\$264.25	\$264.25	\$264.25	\$264.25	\$264.25		\$264.25	\$264.25	\$264.25	\$264.25	\$264.25	\$264.25
79962PA0190002	my Priority Blue Flex EPO Bronze 7900	EPO	Bronze	On/Off	\$250.94	\$250.94	\$250.94	\$250.94	\$250.94		\$250.94	\$250.94	\$250.94	\$250.94	\$250.94	\$250.94
79962PA0210001	my Priority Blue Major Events EPO 8150 - 3 Free PCP Visits	EPO	Catastrophic	On/Off	\$219.73	\$219.73	\$219.73	\$219.73	\$219.73		\$219.73	\$219.73	\$219.73	\$219.73	\$219.73	\$219.73
79962PA0190003	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	Off						\$264.25						

Company Name    Highmark Benefits Group  
Market            Individual  
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2019 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
79962PA0190008	my Priority Blue Flex EPO Platinum 200 - 2 Free PCP Visits	EPO	Platinum	On/Off
79962PA0190007	my Priority Blue Flex EPO Gold 0 - 2 Free PCP Visits	EPO	Gold	On/Off
79962PA0190006	my Priority Blue Flex EPO Gold 800 - 2 Free PCP Visits	EPO	Gold	On/Off
79962PA0200003	my Priority Blue Flex EPO Silver 1750 HSA	EPO	Silver	Off
79962PA0190005	my Priority Blue Flex EPO Silver 2900 - 2 Free PCP Visits	EPO	Silver	On/Off
79962PA0200002	my Priority Blue Flex EPO Silver 3950 HSA	EPO	Silver	On/Off
79962PA0190001	my Priority Blue Flex EPO Bronze 3900	EPO	Bronze	On/Off
79962PA0200001	my Priority Blue Flex EPO Bronze 6750 HSA	EPO	Bronze	Off
79962PA0190004	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	On/Off
79962PA0190002	my Priority Blue Flex EPO Bronze 7900	EPO	Bronze	On/Off
79962PA0210001	my Priority Blue Major Events EPO 8150 - 3 Free PCP Visits	EPO	Catastrophic	On/Off
79962PA0190003	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	Off

RATING AREA 4

0	0	0	0	0	0	0	0	0	0
Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland

Company Name Highmark Benefits Group  
Market Individual  
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2019 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
79962PA0190008	my Priority Blue Flex EPO Platinum 200 - 2 Free PCP Visits	EPO	Platinum	On/Off
79962PA0190007	my Priority Blue Flex EPO Gold 0 - 2 Free PCP Visits	EPO	Gold	On/Off
79962PA0190006	my Priority Blue Flex EPO Gold 800 - 2 Free PCP Visits	EPO	Gold	On/Off
79962PA0200003	my Priority Blue Flex EPO Silver 1750 HSA	EPO	Silver	Off
79962PA0190005	my Priority Blue Flex EPO Silver 2900 - 2 Free PCP Visits	EPO	Silver	On/Off
79962PA0200002	my Priority Blue Flex EPO Silver 3950 HSA	EPO	Silver	On/Off
79962PA0190001	my Priority Blue Flex EPO Bronze 3900	EPO	Bronze	On/Off
79962PA0200001	my Priority Blue Flex EPO Bronze 6750 HSA	EPO	Bronze	Off
79962PA0190004	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	On/Off
79962PA0190002	my Priority Blue Flex EPO Bronze 7900	EPO	Bronze	On/Off
79962PA0210001	my Priority Blue Major Events EPO 8150 - 3 Free PCP Visits	EPO	Catastrophic	On/Off
79962PA0190003	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	Off

RATING AREA 5

0	0	0	0	0	0	0
Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset

Company Name Highmark Benefits Group  
Market Individual  
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

					RATING AREA 6									
02-01-2019 Number of Covered Lives by Rating County					0	0	0	0	0	0	0	0	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union
79962PA0190008	my Priority Blue Flex EPO Platinum 200 - 2 Free PCP Visits	EPO	Platinum	On/Off										
79962PA0190007	my Priority Blue Flex EPO Gold 0 - 2 Free PCP Visits	EPO	Gold	On/Off										
79962PA0190006	my Priority Blue Flex EPO Gold 800 - 2 Free PCP Visits	EPO	Gold	On/Off										
79962PA0200003	my Priority Blue Flex EPO Silver 1750 HSA	EPO	Silver	Off										
79962PA0190005	my Priority Blue Flex EPO Silver 2900 - 2 Free PCP Visits	EPO	Silver	On/Off										
79962PA0200002	my Priority Blue Flex EPO Silver 3950 HSA	EPO	Silver	On/Off										
79962PA0190001	my Priority Blue Flex EPO Bronze 3900	EPO	Bronze	On/Off										
79962PA0200001	my Priority Blue Flex EPO Bronze 6750 HSA	EPO	Bronze	Off										
79962PA0190004	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	On/Off										
79962PA0190002	my Priority Blue Flex EPO Bronze 7900	EPO	Bronze	On/Off										
79962PA0210001	my Priority Blue Major Events EPO 8150 - 3 Free PCP Visits	EPO	Catastrophic	On/Off										
79962PA0190003	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	Off										

Company Name Highmark Benefits Group  
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 7				RATING AREA 8				
					0	0	0	0	0	0	0	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Adams	Berks	Lancaster	York	Bucks	Chester	Delaware	Montgomery	Philadelphia
79962PA0190008	my Priority Blue Flex EPO Platinum 200 - 2 Free PCP Visits	EPO	Platinum	On/Off									
79962PA0190007	my Priority Blue Flex EPO Gold 0 - 2 Free PCP Visits	EPO	Gold	On/Off									
79962PA0190006	my Priority Blue Flex EPO Gold 800 - 2 Free PCP Visits	EPO	Gold	On/Off									
79962PA0200003	my Priority Blue Flex EPO Silver 1750 HSA	EPO	Silver	Off									
79962PA0190005	my Priority Blue Flex EPO Silver 2900 - 2 Free PCP Visits	EPO	Silver	On/Off									
79962PA0200002	my Priority Blue Flex EPO Silver 3950 HSA	EPO	Silver	On/Off									
79962PA0190001	my Priority Blue Flex EPO Bronze 3900	EPO	Bronze	On/Off									
79962PA0200001	my Priority Blue Flex EPO Bronze 6750 HSA	EPO	Bronze	Off									
79962PA0190004	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	On/Off									
79962PA0190002	my Priority Blue Flex EPO Bronze 7900	EPO	Bronze	On/Off									
79962PA0210001	my Priority Blue Major Events EPO 8150 - 3 Free PCP Visits	EPO	Catastrophic	On/Off									
79962PA0190003	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	Off									



Company Name Highmark Benefits Group  
Market Individual  
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2019 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
79962PA0190008	my Priority Blue Flex EPO Platinum 200 - 2 Free PCP Visits	EPO	Platinum	On/Off
79962PA0190007	my Priority Blue Flex EPO Gold 0 - 2 Free PCP Visits	EPO	Gold	On/Off
79962PA0190006	my Priority Blue Flex EPO Gold 800 - 2 Free PCP Visits	EPO	Gold	On/Off
79962PA0200003	my Priority Blue Flex EPO Silver 1750 HSA	EPO	Silver	Off
79962PA0190005	my Priority Blue Flex EPO Silver 2900 - 2 Free PCP Visits	EPO	Silver	On/Off
79962PA0200002	my Priority Blue Flex EPO Silver 3950 HSA	EPO	Silver	On/Off
79962PA0190001	my Priority Blue Flex EPO Bronze 3900	EPO	Bronze	On/Off
79962PA0200001	my Priority Blue Flex EPO Bronze 6750 HSA	EPO	Bronze	Off
79962PA0190004	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	On/Off
79962PA0190002	my Priority Blue Flex EPO Bronze 7900	EPO	Bronze	On/Off
79962PA0210001	my Priority Blue Major Events EPO 8150 - 3 Free PCP Visits	EPO	Catastrophic	On/Off
79962PA0190003	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	EPO	Bronze	Off

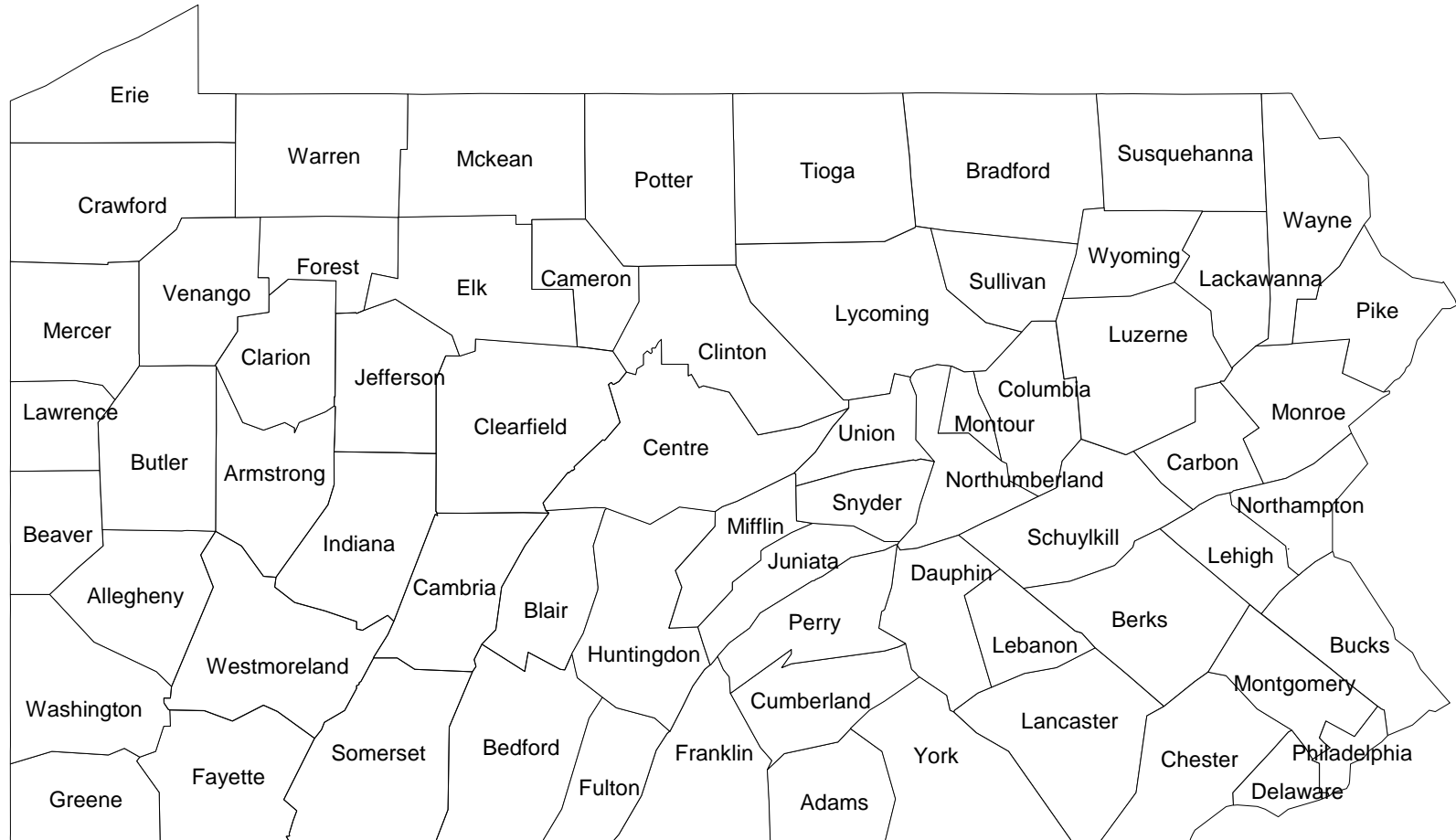
RATING AREA 9

0	0	0	0	0	0	0
Cumberland	Dauphin	Franklin	Fulton	Juniata	Lebanon	Perry

# **2019 Service Area**


**Issuer: Highmark Benefits Group (HBG)**

**Market: Individual**



**Key** *(modify as needed)*

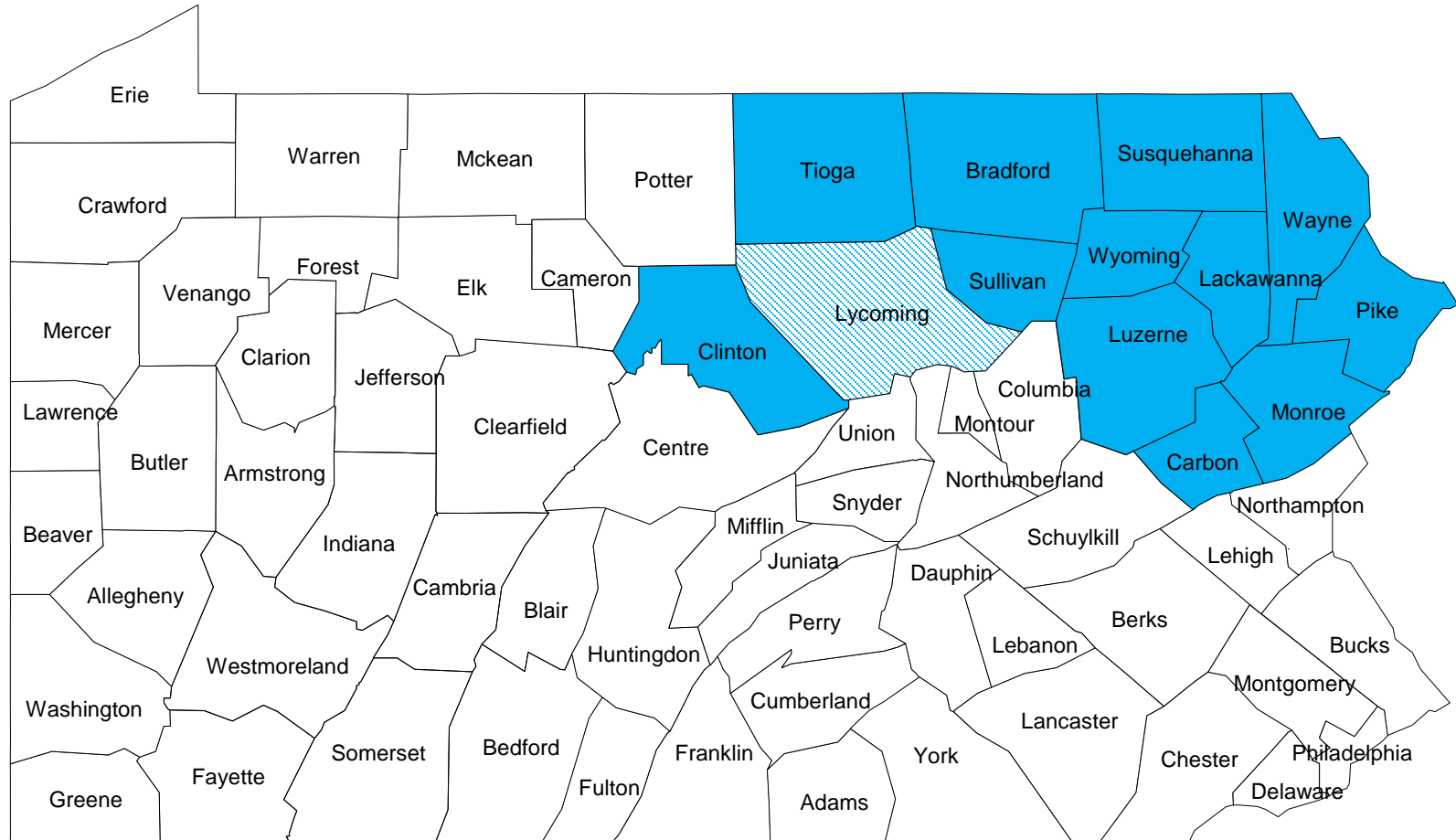
 : 2019 on-exchange service area

 : 2019 off-exchange only service area


# **2020 Service Area**


**Issuer: Highmark Benefits Group (HBG)**

**Market: Individual**



**Key** *(modify as needed)*

 : 2020 on-exchange service area

 : 2020 off-exchange only service area



June 25, 2019

Mr. James Lavery, Actuary  
Bureau of Life, Accident & Health Insurance  
Commonwealth of Pennsylvania Insurance Department  
1311 Strawberry Square  
Harrisburg, PA 17120

Re: Highmark Benefits Group 2020 ACA Rate Filing (Individual Market)  
Filing # 1A-DP-19-HBG (SERFF # HGHM-131904542)

Dear Mr. Lavery:

Enclosed are responses to your June 18, 2019 questions regarding SERFF Filing # HGHM-131904542. We have included your questions along with our responses for your convenience. Since the questions did not require changes to the originally submitted content, the Filing has not been revised at this time.

Should you have any further questions regarding this Filing, please feel free to contact me at [REDACTED] or via e-mail at: [REDACTED]

Sincerely,

[REDACTED]

Manager, Actuarial Services  
Highmark Inc.

cc:

[REDACTED]

Enclosures

**1. Section VI.1 of the Part III memo indicates that 2018 experience from First Priority Health and First Priority Life Insurance Company was adjusted for the expected 2020 HBG population. Please explain how it was adjusted and provide quantitative support. Also, please explain how these sources were blended as referenced in the second paragraph of that section.**

Response:

Please see the attached exhibits for response to Question 1.

The manual rate is derived using the 2/1/2019 enrollment profile which is categorized into the following categories:

Renewal

- This represents our 2018 ACA members that reenrolled in FPH and FPLIC.

Other Highmark

- This represents the 2018 members from other Highmark markets such as group markets that enrolled in FPH.

Prior ACA

- This represents our 2017 ACA members that lapsed in 2018 and now reenrolled in FPH. We reviewed its 2017 ACA claims, trended to 2018, and used this as starting point to approximate the 2018 allowed claims.

New

- This represents the catch-all category of the remaining members that enrolled in FPH. The 2018 allowed PMPM was set to approximate the “Renewal” segment.

**2. With respect to the data used to develop the manual rate, was the volume of large claims during the experience period unusually high or low? If so, was any adjustment made to reflect this?**

Response:

In the development of the manual rate, the volume of large claims was assumed to be reasonably consistent from year to year. Due to the level of population changes that typically occur in the ACA individual market, it would be unreliable to explicitly make an adjustment based on current data. The morbidity factor adjustments implicitly account for large claim volume differences between populations.

**3. Please explain the difference between the .975 network factor shown in Tables 7 and 9 of the PAAM exhibits and the .968 shown in Table 14. Please provide quantitative support for these factors.**

Response:

The network factor of 0.968 shown in Table 14 is a medical only network factor as explained in the actuarial memorandum. Whereas, medical, pharmacy, capitation, and dental are weighted to derive the overall network factor of 0.975 as shown in Tables 7 and 9. The resulting calculation is  $0.975 = 0.968 \times 78\% \text{ medical benefit} + 1.00 \times 22\% \text{ other benefit categories}$ .

**4. Please support the -25.51% capitation trend applied in the PAAM Table 3b.**

Response:

The -25.51% capitation trend is due to a reduction in the pediatric vision capitation rate from the experience period to the projection period. The capitation weight in Table 3b is negligible signifying the actual PMPM reduction is minimal as well.

**5. Please explain how the each of the values in the Risk Adjustment demonstration in Attachment B were developed for HBG.**

Response:

The issuer-specific factors included in rows 11 and 16 of Attachment B for the 2020 projection were developed for the population of members that comprised the manual rate development discussed in the response to Question 1 above. For sources of members where we had 2018 (or 2017) claims experience and diagnosis data, we utilized their risk scores in the calculation. For the “New” source of members where we did not have claims experience, we made an assumption regarding this category’s risk score based on a review of the claim level and risk score relativities of the other sources.

The statewide factors included in rows 13 and 18 of Attachment B for the 2020 projection were developed by starting with information from the following sources: (1) the PID’s 2018 RATEE study released on May 8, 2019, (2) the PID’s 1Q2019 Enrollment Survey released on April 23, 2019, and (3) the CMS Interim Summary Report for 2018 released on March 22, 2019. The attached exhibit labeled Q5 Response demonstrates how we used the information from these sources in order to derive the 2020 statewide average estimates shown in Attachment B. We assumed the statewide average premium will decrease by [REDACTED] in 2019 based on knowledge of approved rates and assumed no additional change for 2020. [REDACTED]

[REDACTED] For the statewide average actuarial value and induced demand factors, we assumed [REDACTED]. All of these calculations can be found in the Q5 Response exhibit.

**6. Please provide quantitative support for the Projected MLR of 91.5%.**

Response:

Please see the attached exhibit labeled Q6 Response for the development of the 91.5% Projected MLR.

**7. For all plans, the paid to allowed as shown in Attachment C, which does not include the CSR load or induced demand, is larger than the Metal AV in the URRT. What is driving these differences?**

Response:

The paid-to-allowed ratios in Attachment C are the pricing factors which are determined using Highmark’s underlying ACA claims experience. Our actual paid-to-allowed factors have historically been higher than the factors from the HHS AV calculator. For on exchange Silver Plans, the pricing factors in Attachment C include the 1.20 CSR load.

The metal AV factors on URRT Worksheet 2 (line 1.6 or row 15), however, are derived using the HHS AV calculator which relies on standard national population claims experience and would not be aligned to the pricing AVs in general. The HHS AV calculator is helpful in determining the metal level of a given benefit plan which allows for ease in comparing the qualified health plans among the carriers.

**8. Please provide substantial support for the 1.5 induced utilization factor for the platinum plan.**

Response:

In the absence of recent historical platinum experience, HCA performed an assessment of the prevailing platinum induced utilization factors in the Pennsylvania individual market. This assessment revealed current platinum factors that were approximately 70% higher than corresponding bronze factors. In addition to this industry information, HCA also performed a review of historical Highmark data from

2016 and 2017 in regions where it offered platinum plans. This review of risk-adjusted allowed PMPMs for platinum plans versus bronze plans resulted in factors that directionally align with what was observed in the industry. Thus, HCA determined that an induced utilization factor of 1.5 would be appropriate.

**9. We note that the benefit richness on Table 10 is not completely normalized (1.061 in L15). Please resubmit PAAM normalizing this adjustment.**

Response:

The benefit richness factors in Table 10 of the PAAM were normalized. Please see Attachment C for a demonstration that the normalized benefit richness factors composite to 1.000 by weighting on the projected enrollment. Since there is no snapshot enrollment for this issuer, Table 10 calculates a straight average of the normalized factors rather than weighting by projected enrollment, which is why the total value on Table 10 is not 1.000.

**10. Please explain how the 0.92 catastrophic plan adjustment factor was developed.**

Response:

The 0.92 factor is intended to represent the expected impact of the unique catastrophic plan eligibility category, which is one of the permitted plan-level adjustments to the index rate. Given the leaner benefit design of catastrophic plan, separate risk adjustment and greater eligibility by younger individuals, it was reasonable to assume that a reduction factor (i.e. a factor less than 1.0) was appropriate. This factor was developed in our initial ACA rate filing for the 2014 Plan Year and was based on data and analysis from outside consultants with better access to industry data. The development of the 0.92 factor took into consideration the compressed age curve, along with the eligibility restrictions for catastrophic plans. We have continued to use the same factor in each subsequent year. Similar factors are used by other issuers in the market and the resulting premium rates are in line with other issuers in the marketplace, supporting the reasonability and appropriateness of this factor.

**11. Please provide quantitative support for the health insurer fee.**

Response:

The first step in calculating the health insurer fee is estimating the industry-wide fee to be collected as well as the industry-wide eligible premium in billions of dollars based on historical amounts. The ratio of these two estimates produces an estimated percentage of premium. Second, this percentage of premium is multiplied by our company-specific projected 2019 premium to derive an estimate of the dollars expected to be assessed in 2020. Finally, these estimated dollars are then divided by our company-specific projected 2020 premium to derive an estimate of the percentage of premium need to be built into the rate filing. This amount is 2.14%, which is further divided by (1 - 0.21) to account for the income tax rate. The resulting value is 2.71%. The pricing assumption was set at 2.8% given the potential fluctuation in the estimates outlined above.

**The following are additional questions or comments from the PID:**

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

Response:

We have tested and confirmed that the rates in Table 11 of the Actuarial Memorandum Exhibits, the PA Plan Design Summary and Rate Tables, the Federal Rates Template, and in the binder are identical.

**2. Regarding Risk Adjustment Data Validation process (RADV):**

- a) Please describe any adjustments or considerations made due to the Risk Adjustment Data Validation process (RADV).
- 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.

Response:

- a) The Company did consider whether or not any adjustment to projected experience was warranted due to the RADV process. However, since this process was only recently implemented, with 2017 results only recently released, we believe that it is too soon to make any assumptions in our projections regarding the anticipated level of payments or recoveries from this program.
- b) We provide the following additional considerations in assessing whether or not future adjustments would be practicable:
  - Overall, this program is designed to be revenue neutral across the market. So absent any reliable market-wide analysis, it would be equally likely that a company would receive a payment or would be required to make a contribution.
  - The consideration of risk score adjustments from the RADV process is dependent upon the entirety of market participants, and each participant's ultimate condition profile. These risk profiles are generally not known and could fluctuate from year to year.
  - The Individual market results for 2017 in Pennsylvania showed that a small risk score adjustment would be made for the 2018 risk adjustment transfer results. However, it has not been demonstrated that such an adjustment would tend to persist year over year. Furthermore, an adjustment could be made in the opposite direction in a future year.
  - Although we have not adjusted for the RADV process in our 2020 experience projection, we believe that such an adjustment may be warranted in future rate development periods if the process exhibits a reasonable level of predictability and recurrence. This may not be known until several years beyond the initial implementation.

**3. We have repurposed row 54 of Table 6 to capture RA User Fees. Please provide the RA User Fee percentage and pmpm amount in cells C54 and D54, respectively.**

Response:

We intend to make this update to the template later in the review process so that if there are other subsequent updates needed, the number of document versions produced can be minimized.

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

Response:

The Prescription Drug Benefit Plan provides three major services of coverage (as defined on page 94142 of the 2018 Notice of Benefit and Payment Parameters) that are less than or equal to 50% coinsurance and available prior to any deductible. These services include: generic drugs, specialty drugs, and preferred brand drugs. The coinsurance percentages and certifications of the values corresponding to these



categories can be found in the AV screenshots and Certifications documents provided as a separate attachments with the initial SERFF submission.

## Highmark Benefits Group

## Individual Market

## Response to Objection 1 - Question 1

	Projected 2020 ACA Segment					Total
	FPH - Renewal	FPH - Other HMRK	FPH - Prior ACA	FPH - New	FPLIC - Renewal	
Member Months	131,574	2,597	8,656	29,431	866	173,124
Member Month %	76%	2%	5%	17%	1%	100%
Risk Score	■	■	■	■	■	■
Completed Allowed PMPM	\$564.08	\$1,157.64	\$268.16	\$537.07	\$1,097.97	\$556.27

## Highmark Benefits Group

## Individual Market

## Response to Objection 1 - Question 5

Statewide Assumptions	Starting Value for 2020 Projection	Source of Starting Value	Adjustment for 2020	2020 Factor on Attachment B
<b>Non-Catastrophic Pool</b>				
State Avg Premium				
Member Months				
Billable Member Months				
HHS Risk Score				
Allowable Rating Factor				
Geo Cost Factor				
Induced Demand Factor				
Actuarial Value				
<b>Catastrophic Pool</b>				
State Avg Premium				
Member Months				
Billable Member Months				
HHS Risk Score				
Allowable Rating Factor				
Geo Cost Factor				
Induced Demand Factor				
Actuarial Value				

## 1Q2019 PID Enrollment Survey

Source: April 23, 2019 email from PID

Metal	1Q2019 Mix		Estimated 2019 Factors	
	MMs	%	AV	IDF
Platinum	6,258	0.5%	0.90	1.15
Gold	276,843	20.9%	0.80	1.08
Silver	737,345	55.7%	0.70	1.03
Bronze	303,227	22.9%	0.60	1.00
Total	1,323,673	100.0%	0.699	1.034

Estimated Annual 2019 MMs: 5,029,957

## Highmark Benefits Group

## Individual Market

## Response to Objection 1 - Question 6

Description	Source	Calculation
<b>Numerator</b>		
Projected Paid EHB Claims PMPM	Table 5, C29	\$506.42
Projected Required Revenue PMPM	Table 6, C63	\$640.20
Quality Improvement Factor	CMS Default	0.80%
<u>Projected Risk Adjustment PMPM</u>	<u>Table 5, C31</u>	<u>(\$42.07)</u>
<b>Adjusted Claims</b>		<b>\$553.61</b>
<b>Denominator</b>		
Projected Required Revenue PMPM	Table 6, C63	\$640.20
Projected Exchange User Fee	Table 5, C32	\$16.74
Risk Adjustment User Fee	CMS	\$0.18
<u>Health Insurer Fee</u>	<u>Table 6, D57</u>	<u>\$17.93</u>
<b>Adjusted Premium</b>		<b>\$605.35</b>
<b>Projected MLR</b>		<b>91.5%</b>



July 12, 2019

Mr. James Lavery, Actuary  
Bureau of Life, Accident & Health Insurance  
Commonwealth of Pennsylvania Insurance Department  
1311 Strawberry Square  
Harrisburg, PA 17120

Re: Highmark Benefits Group 2020 ACA Rate Filing (Individual Market)  
Filing # 1A-DP-19-HBG (SERFF # HGHM-131904542)

Dear Mr. Lavery:

Enclosed are responses to your July 5, 2019 questions regarding SERFF Filing # HGHM-131904542. We have included your questions along with our responses for your convenience. In conjunction with these responses, we are also submitting revisions to the following documents in SERFF:

- PAAM Exhibits – This file is being revised to utilize the Department's new template that repurposed row 54 of Table 6 to capture the RA User Fee.
- PA Actuarial Memorandum – This document is being revised to remove language that explained the prior disconnect on Table 6 caused by the fact that the RA User Fee was missing from that table. This language is no longer applicable in light of the Department's new template.

Should you have any further questions regarding this Filing, please feel free to contact me at [REDACTED] or via e-mail at: [REDACTED]

Sincerely,

[REDACTED]

[REDACTED]  
Manager, Actuarial Services  
Highmark Inc.

cc:

[REDACTED]

Enclosures

**1. Regarding your response to item 1 of our previous objections, please explain the differences between the “Completed AC PMPMs” of \$556.27 shown in cell H15 of your response and the Experience Period “Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)” of \$536.81 shown in Cell L10 of Table 2b of the PAAM Exhibits.**

Response:

The “Completed AC PMPMs” of \$556.27 is the Medical Allowed Charge PMPM prior to adjusting for Rx Rebates, Hospital and Physician Settlements, Dental claims and Vision capitation. The \$536.81 value shown in Table 2b reflects these adjustments to the Medical Allowed Charge PMPM. A reconciliation of the two amounts can be found in Attachment A – Manual Cost Development.

**2. Regarding your response to item 8 of our previous objections:**

**a) Factors used by other carriers are not a valid justification for your factor, particularly since a factor as high as 1.5 strongly suggests that morbidity is included.**

**b) Please provide more detail concerning your review of historical Highmark data from 2016 and 2017 in regions where it offered platinum plans. You said it was directionally consistent with factors used in the market, but you did not say anything about the magnitude. What would the platinum induced utilization factor be based on that data? Please provide the calculation.**

Response:

Please see the attached exhibit labeled Q2 Response for a summary of the historical data used to inform our selection of the 1.5 induced utilization factor. We reviewed three separate cohorts of historical data and compared risk-normalized allowed charge PMPMs for platinum members vs. bronze members. The risk normalization was performed to remove morbidity differences from the factors. In selecting our assumption for the filing, we gave more weight to the CY2016 cohorts since these cohorts had larger enrollment volumes for both metal levels.

Because we did not have more recent platinum experience but other carriers did, we considered their rating to be a reasonable and valid data point to use as an additional reference in selecting our assumption.

**The following are additional questions or comments from the PID:**

**1. 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. 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.**

Response:

The Company is not modifying its projected 2020 risk adjustment transfer amounts based on the 2018 results released by CMS on June 28, 2019.

**2. In response to the Department’s RADV survey, issuers indicated that they did not include a RADV adjustment in the initial submission, as there is no supportable reason for an adjustment when calculating the 2020 rates. Therefore, the Department has determined that there should be no RADV adjustments in the 2020 rate filings.**

Response:

The Company supports this position for the 2020 rate development and has not included any adjustments for RADV in our submitted 2020 rate filings.

## Highmark Benefits Group

## Individual Market

## Response to Objection 2 - Question 2

Cohort (Entity, Region, Year)		Bronze	Platinum
HHIC, Western PA, CY2017	Average Members	441	668
	Allowed Charge PMPM	████████	████████
	Risk Score*	██████	██████
	Normalized Allowed Charge PMPM	\$312.59	\$433.84
	Relationship to Bronze	1.00	1.39
HHIC, Western PA, CY2016	Average Members	1,029	2,258
	Allowed Charge PMPM	████████	████████
	Risk Score*	██████	██████
	Normalized Allowed Charge PMPM	\$247.17	\$372.05
	Relationship to Bronze	1.00	1.51
Non-PA, CY2016	Average Members	5,574	1,430
	Allowed Charge PMPM	████████	████████
	Risk Score*	██████	██████
	Normalized Allowed Charge PMPM	\$276.82	\$406.30
	Relationship to Bronze	1.00	1.47

\*Based on Silver Model coefficients to ensure AV differences do not impact results.





	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T			
1	Product-Plan Data Collection															To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift +						
2																To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L.						
3	Company Legal Name:				Highmark Benefits Group										State:		PA		To validate, select the Validate button or Ctrl + Shift + I.			
4	HIOS Issuer ID:				79962										Market:		Individual		To finalize, select the Finalize button or Ctrl + Shift + F.			
5	Effective Date of Rate Change(s):				01/01/2020																	
6																						
7	Product/Plan Level Calculations																					
8																						
9	Field # Section I: General Product and Plan Information																					
10	1.1 Product Name		my Priority Blue EPO															my Priority Blue Flex EPO HSA			my Priority Blue Major Events EPO	
11	1.2 Product ID		79962PA019															79962PA020			79962PA021	
12	1.3 Plan Name		my Priority Blue Flex EPO Bronze 3900	my Priority Blue Flex EPO Bronze 7900	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visit	my Priority Blue Flex EPO Bronze 7800 - 1 Free PCP Visits	my Priority Blue Flex EPO Silver 2900 - 2 Free PCP Visits	my Priority Blue Flex EPO Gold 800 - 2 Free PCP Visits	my Priority Blue Flex EPO Gold 0 - 2 Free PCP Visits	my Priority Blue Flex EPO Platinum 200 - 2 Free PCP Visits	my Priority Blue Flex EPO Bronze 6750 HSA	my Priority Blue Flex EPO Silver 3950 HSA	my Priority Blue Flex EPO Silver 1750 HSA	my Priority Blue Major Events EPO 8150 - 3 Free PCP Visits								
13	1.4 Plan ID (Standard Component ID)		79962PA0190001	79962PA0190002	79962PA0190003	79962PA0190004	79962PA0190005	79962PA0190006	79962PA0190007	79962PA0190008	79962PA0200001	79962PA0200002	79962PA0200003	79962PA0210001								
14	1.5 Metal		Bronze	Bronze	Bronze	Bronze	Silver	Gold	Gold	Platinum	Bronze	Silver	Silver	Catastrophic								
15	1.6 AV Metal Value		0.647	0.599	0.648	0.648	0.717	0.812	0.780	0.908	0.625	0.660	0.717	0.575								
16	1.7 Plan Category		New	New	New	New	New	New	New	New	New	New	New	New								
17	1.8 Plan Type		EPO	EPO	EPO	EPO	EPO	EPO	EPO	EPO	EPO	EPO	EPO	EPO								
18	1.9 Exchange Plan?		Yes	Yes	No	Yes	Yes	Yes	Yes	No	Yes	No	Yes	No								
19	1.10 Effective Date of Proposed Rates		01/01/2020	01/01/2020	01/01/2020	01/01/2020	01/01/2020	01/01/2020	01/01/2020	01/01/2020	01/01/2020	01/01/2020	01/01/2020	01/01/2020								
20	1.11 Cumulative Rate Change % (over 12 mos prior)		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%								
21	1.12 Product Rate Increase %																					
22	1.13 Submission Level Rate Increase %						0.00%							0.00%				0.00%				
23																						
24	Section II: Experience Period and Current Plan Level Information																					
25	2.1 Plan ID (Standard Component ID)		Total	79962PA0190001	79962PA0190002	79962PA0190003	79962PA0190004	79962PA0190005	79962PA0190006	79962PA0190007	79962PA0190008	79962PA0200001	79962PA0200002	79962PA0200003	79962PA0210001							
26	2.2 Allowed Claims		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0							
27	2.3 Reinsurance		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0							
28	2.4 Member Cost Sharing		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0							
29	2.5 Cost Sharing Reduction		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0							
30	2.6 Incurred Claims		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0							
31	2.7 Risk Adjustment Transfer Amount		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0							
32	2.8 Premium		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0							
33	2.9 Experience Period Member Months		0	0	0	0	0	0	0	0	0	0	0	0	0							
34	2.10 Current Enrollment		0	0	0	0	0	0	0	0	0	0	0	0	0							
35	2.11 Current Premium PMPM		#DIV/0!	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00							
36	2.12 Loss Ratio		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!							
37	Per Member Per Month																					
38	2.13 Allowed Claims		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!							
39	2.14 Reinsurance		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!							
40	2.15 Member Cost Sharing		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!							
41	2.16 Cost Sharing Reduction		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!							
42	2.17 Incurred Claims		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!							
43	2.18 Risk Adjustment Transfer Amount		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!							
44	2.19 Premium		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!							
45																						
46	Section III: Plan Adjustment Factors																					
47	3.1 Plan ID (Standard Component ID)			79962PA0190001	79962PA0190002	79962PA0190003	79962PA0190004	79962PA0190005	79962PA0190006	79962PA0190007	79962PA0190008	79962PA0200001	79962PA0200002	79962PA0200003	79962PA0210001							
48	3.2 Market Adjusted Index Rate								\$716.20													
49	3.3 AV and Cost Sharing Design of Plan			0.6404	0.6122	0.6447	0.6447	0.9086	0.9460	0.9094	1.4402	0.6408	0.8280	0.7592	0.5827							
50	3.4 Provider Network Adjustment			1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000							
51	3.5 Benefits in Addition to EHB			1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000							
52	Administrative Costs																					
53	3.6 Administrative Expense			8.88%	8.88%	8.88%	8.88%	8.88%	8.88%	8.88%	8.88%	8.88%	8.88%	8.88%	8.88%							
54	3.7 Taxes and Fees			2.83%	2.83%	2.83%	2.83%	2.83%	2.83%	2.83%	2.83%	2.83%	2.83%	2.83%	2.83%							
55	3.8 Profit & Risk Load			0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%							
56	3.9 Catastrophic Adjustment			1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9200							
57	3.10 Plan Adjusted Index Rate			\$519.49	\$496.61	\$522.97	\$522.97	\$737.05	\$767.39	\$737.70	\$1,168.28	\$519.81	\$671.67	\$615.86	\$434.87							
58																						
59	3.11 Age Calibration Factor			0.5100						0.5100												
60	3.12 Geographic Calibration Factor			1.0000						1.0000												
61	3.13 Tobacco Calibration Factor			0.9908						0.9908												
62	3.14 Calibrated Plan Adjusted Index Rate			\$262.50	\$250.94	\$264.26	\$264.26	\$372.44	\$387.77	\$372.76	\$590.34	\$262.66	\$339.40	\$311.20	\$219.74							
63																						
64	Section IV: Projected Plan Level Information																					
65	4.1 Plan ID (Standard Component ID)		Total	79962PA0190001	79962PA0190002	79962PA0190003	79962PA0190004	79962PA0190005	79962PA0190006	79962PA0190007	79962PA0190008	79962PA0200001	79962PA0200002	79962PA0200003	79962PA0210001							
66	4.2 Allowed Claims		\$111,057,397	\$24,461,262	\$14,960,517	\$564,548	\$4,813,513	\$17,658,758	\$15,178,610	\$3,586,067	\$3,855,267	\$349,128	\$24,100,991	\$1,132,364	\$396,372							
67	4.3 Reinsurance		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0							
68	4.4 Member Cost Sharing		\$23,411,856	\$8,222,399	\$5,465,985	\$187,269	\$1,596,716	\$1,510,572	\$1,396,105	\$455,852	\$18,066	\$117,212	\$4,017,565	\$267,156	\$156,958							
69	4.5 Cost Sharing Reduction		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0							
70	4.6 Incurred Claims		\$87,645,541	\$16,238,863	\$9,494,532	\$377,279	\$3,216,797	\$16,148,186	\$13,782,505	\$3,130,215	\$3,837,201	\$231,916	\$20,083,426	\$865,209	\$239,414							
71	4.7 Risk Adjustment Transfer Amount		-\$7,281,544	-\$1,349,116	-\$788,801	-\$31,344	-\$267,250	-\$1,341,583	-\$1,145,043	-\$260,057	-\$318,793	-\$19,267	-\$1,668,520	-\$71,881	-\$19,890							
72	4.8 Premium		\$110,795,890	\$20,528,008	\$12,002,081	\$476,952	\$4,066,647	\$20,413,256	\$17,422,722	\$3,957,002	\$4,850,680	\$293,173	\$25,388,944	\$1,093,759	\$302,667							
73	4.9 Projected Member Months		713,124	39,516	24,168	912	7,776	27,696	22,704	5,364	4,152	564	37,800	1,776	696							
74	4.10 Loss Ratio		84.67%	84.67%	84.67%	84.67%	84.67%	84.67%	84.67%	84.67%	84.67%	84.67%	84.67%	84.67%	84.67%							
75	Per Member Per Month																					
76	4.11 Allowed Claims		\$641.49	\$619.02	\$619.02	\$619.02	\$619.02	\$637.59	\$668.54	\$668.54	\$928.53	\$619.02	\$637.59	\$637.59	\$569.50							
77	4.12 Reinsurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00							
78	4.13 Member Cost Sharing		\$135.23	\$208.08	\$226.17	\$205.34	\$205.34	\$54.54	\$61.49	\$84.98	\$4.35	\$207.82	\$106.28	\$150.43	\$225.51							
79	4.14 Cost Sharing Reduction		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00							
80	4.15 Incurred Claims		\$506.26	\$410.94	\$392.86	\$413.68	\$583.05	\$607.05	\$583.56	\$924.18	\$411.20	\$531.31	\$487.17	\$343.99								
81	4.16 Risk Adjustment Transfer Amount		-\$42.06	-\$34.14	-\$32.64	-\$34.37	-\$48.44	-\$50.43	-\$48.48	-\$76.78	-\$34.16	-\$44.14	-\$40.47	-\$28.58								
82	4.17 Premium		\$639.98	\$519.49	\$496.61	\$522.97	\$522.97	\$737.05	\$767.39	\$737.70	\$1,168.28	\$519.81	\$671.67	\$615.86	\$434.87							

	A	B
1	<b>Rating Area Data Collection</b>	
2		
3		
4		
5	<b>Rating Area</b>	<b>Rating Factor</b>
6	Rating Area 3	1.0000
7		
8		

## **Part II of the Preliminary Justification**

### **Highmark Benefits Group – Individual Market**

#### **Scope and Range:**

Highmark Benefits Group is new to the individual market for 2020. Thus, there is no proposed average rate change or range of proposed rate change to report. Products submitted with this filing will have effective dates from January 1, 2020 to December 31, 2020.

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

#### **Historical Financial Experience:**

This section is not applicable since Highmark Benefits Group did not previously offer Individual ACA market plans.

#### **Change in Medical Service Costs:**

This section is not applicable since Highmark Benefits Group did not previously offer Individual ACA market plans.

#### **Change in Benefits and Cost Sharing:**

This section is not applicable since Highmark Benefits Group did not previously offer Individual ACA market plans.

#### **Administrative Costs and Anticipated Operating Results:**

The anticipated administrative costs and operating results are not excessive or unreasonable. In accordance with regulations, the projected medical loss ratio is over 80%.

**Part III Actuarial Memorandum**

**Highmark Benefits Group**

**Individual Rate Filing**

**Effective January 1, 2020**

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## **I. General Information**

### **Document Overview**

This document contains the Part III Actuarial Memorandum for Highmark Benefits Group's (HBG) individual block of business rate filing, for products with an effective date of January 1, 2020. This actuarial memorandum is submitted in conjunction with the Part I Unified Rate Review Template.

The purpose of the actuarial memorandum is to provide certain information related to the submission, including support for the values entered into the Part I Unified Rate Review Template, which supports compliance with the market rating rules and reasonableness of applicable rate increases. This information may not be appropriate for other purposes.

This information is intended for use by the Pennsylvania Insurance Department, the Center for Consumer Information and Insurance Oversight (CCIIO), and their subcontractors to assist in the review of HBG's rate filing. However, we recognize that this certification may become a public document. HBG makes no representations or warranties regarding the contents of this letter to third parties. Likewise, third parties are instructed that they are to place no reliance upon this actuarial memorandum that would result in the creation of any duty or liability under any theory of law by HBG.

The results are actuarial projections. Actual experience is likely to differ for a number of reasons, including population changes, claims experience, and random deviations from assumptions.

#### **I.1 Company Identifying Information:**

- Company Legal Name: Highmark Benefits Group
- State: The Commonwealth of Pennsylvania has regulatory authority over these policies.
- HIOS Issuer ID: 79962
- Market: Individual
- Effective Date: January 1, 2020

#### **I.2 Company Contact Information:**

- Primary Contact Name: [REDACTED]
- Primary Contact Telephone Number: [REDACTED]
- Primary Contact Email Address: [REDACTED]

## **II. Proposed Rate Changes**

For all rate increases by plan, see the 'Cum'lative Rate Change % (over 12 mos prior)' found in Worksheet 2, line 1.11 of the URRT.

The Company is new to the Individual Market for 2020. Therefore, there are no rate increases.

In accordance with the filing instructions specified by the Pennsylvania Insurance Department, the rate development in this filing is based on certain assumptions we have had to make at this point in time. We have accounted for the elimination of the Individual Mandate penalty and the lack of CSR funding in 2020 by using the factors prescribed in the Department's guidance. Additional assumptions include that advance payment of premium credits (APTCs) will continue until the end of 2020, there will be no significant changes in legislation, regulations or otherwise (i.e. rules, regulatory guidance, etc.) impacting the ACA market, and all Pennsylvania QHP issuers currently participating on the Marketplace will continue to do so throughout 2020. In addition, there are other uncertainties that may directly or indirectly affect an already unstable insurance market and ultimately, rates. If any of these assumptions are ultimately incorrect or additional developments occur that similarly have a detrimental impact to the market, modifications to the rate development may be necessary. As a result, HBG reserves the right to submit a revised filing.

## **III. Experience and Current Period Premium, Claims, and Enrollment**

### **III.1 Paid through Date:**

Not applicable; the Company did not have experience in the experience period.

### **III.2 Current Date:**

The current date shown represents a snapshot of February 1, 2019.

### **III.3 Premiums in Experience Period:**

Not applicable; the Company did not have experience in the experience period.

### **III.4 Allowed and Paid Claims Incurred During the Experience Period:**

Not applicable; the Company did not have experience in the experience period.

## **IV. Benefit Categories**

Not applicable; the Company did not have experience in the experience period.

## **V. Projection Factors**

Not applicable; the Company did not have experience in the experience period. Please see the explanation of the projection factors for the manual rate development below.

## **VI. Manual Rate Adjustments**

### **VI.1 Source and Appropriateness of Experience Data Used**

HBG did not offer any Individual Market products in 2018. The 2020 rates are based on 2018 claims experience from First Priority Health (FPH) and First Priority Life Insurance Company (FPLIC), adjusted for the expected 2020 HBG population.

A manual rate was developed by blending 2018 experience from multiple sources, including ACA claims experience from First Priority Health (FPH) and First Priority Life Insurance Company (FPLIC), group claims for the February 1, 2019 snapshot membership as well as assumptions for any new members found in the snapshot. This experience was chosen because it is large and reasonably represents the anticipated 2020 HBG population.

### **VI.2 Adjustments Made to the Data**

Given that the expected 2020 population is used to develop the manual cost, no change in morbidity is required aside from the adjustment pertaining to the elimination of the health insurance coverage mandate described below. Similarly, the change in demographics adjustment is very small.

#### **Impact of Health Insurance Coverage Mandate Elimination**

In accordance with the Department's guidance, the morbidity was increased by 6.0% to reflect the market uncertainty from the elimination of the health insurance coverage mandate. This deterioration is reflected in the Manual EHB Allowed Claims PMPM found on worksheet 1 of the URRT.

The underlying manual data was further adjusted to account for changes in network, pharmacy rebates, and hospital/physician settlements.

### **VI.3 Trend Factors**

This development of the CY2020 rates reflects an annual trend rate of 7.5% (4.5% cost, 2.9% utilization). These trends reflect HBG's expectations regarding increases in in-network contractual reimbursement and out-of-network costs. These estimates measure and normalize for benefit leverage, population aging, and historical changes for fee schedules, as well as company-wide utilization management programs, and external trend drivers.

The trend represents a blended average for all types of service and is applied to the aggregate experience for pricing. These trends represent assumed community-wide expectations. Claim variations due to the specific projected enrolled population in this single risk pool are reflected in the morbidity adjustment.



## **VII. Credibility of Experience**

HBG had no 2018 claims experience. It is new to the Individual Market for 2020. Therefore, the rate is 100% manual.

## **VIII. Index Rate**

The index rates as shown on Worksheet 1 of the URRT are simply the single risk pool average allowed claims for the Essential Health Benefits for the experience and projected populations, respectively, for HBG. For the experience period, only non-grandfathered plans are included. The projection period Index Rate is not adjusted for reinsurance or risk adjustment programs or any other fee.

## **IX. Market Adjusted Index Rate [MAIR]**

The Market Adjusted Index Rate is the Projected Index Rate further adjusted for risk adjustment and the exchange fee.

### **IX.1 Projected Reinsurance PMPM**

There is no reinsurance program for HBG.

### **IX.2 Projected Risk Adjustment PMPM:**

The estimated average risk score for HBG's projected 2020 population was developed by using 2018 claim diagnoses underlying the manual rate development and the risk adjustment coefficients as finalized in the Notice of Benefit and Payment Parameters. Similarly, allowable rating factors, actuarial value factors and induced demand factors were estimated for HBG based upon its projected 2020 population.

We estimated the statewide average risk transfer factors based on current market assumptions. We estimated the statewide average premium using current market premium assumptions with adjustments for anticipated rate changes for 2020.

The actual calculation of the risk transfer followed the risk transfer methodology as prescribed.

The analysis resulted in HBG paying to the risk adjustment pool. The (\$53.31) PMPM value shown in worksheet 1 of the URRT is developed by taking the expected risk transfer amount and adjusting it to an equivalent allowed claims basis by dividing it by the paid-to-allowed factor and the composite effect of catastrophic eligibility.

For the purposes of this rate filing, HBG has assumed that projected High Cost Risk Pool (HCRP) charges are offset by projected HCRP reimbursements. Thus, no adjustment has been made to the projected risk adjustment transfer discussed above for the HCRP component of the program. Similarly, we have not included an adjustment to the projected risk adjustment transfer for the Risk Adjustment Data Validation (RADV) program.

### **IX.3 Exchange User Fee %**

The 2.96% value shown in worksheet 1 of the URRT is developed by multiplying the 3% exchange user fee by the assumed percentage of on exchange membership. This calculated amount is then divided by the paid-to-allowed factor to bring it to an equivalent allowed claims basis and adjusted further for the composite effect of catastrophic eligibility and benefits in addition to EHB.

## **X. Plan Adjusted Index Rates [PAIR]**

The Plan Adjusted Index Rates can be found on line 3.10, Worksheet 2 of the URRT. The PAIR rates are calculated by applying the allowable rating factors as described below to the Market Adjusted Index Rate.

### **X.1 AV and Cost Sharing Design of Plan**

The AV and Cost Sharing allowable rating factor is comprised of the following components:

- The utilization due to differences in cost sharing is based on the factors adopted by the risk adjustment methodology relative to the weighted average. Please note that the platinum utilization factor deviates from the risk adjustment methodology based on an assessment of prevailing factors in the market. No differences due to health status are in these adjustments.
- The pricing AV for the benefits and cost sharing of the plan and a CSR load for the on exchange silver plans.

#### **Impact of Non-Payment of Cost Sharing Reduction Subsidies**

In accordance with the Department's guidance, we have applied an additional adjustment to our AV pricing values for those Silver plans not offered exclusively off-exchange. This adjustment factor was 1.20 and represents the non-payment of Cost Sharing Reduction subsidies.

### **X.2 Provider Network Adjustment**

The provider network adjustments are developed by dividing the plan level network factors by the overall weighted average from all plans.

### **X.3 Benefits in Addition to EHB**

There are no benefits in addition to EHB.

### **X.4 Administrative Expense**

The proposed rates reflect internal administrative costs including quality improvement administrative expenses. This cost was developed based on standard expense allocation methods.

#### **X.5 Taxes and Fees:**

The following fees were added:

- \$0.18 PMPM for Risk Transfer User Fee
- 2.8% for the Health Insurance Provider Fee
- 0.0% for the PA Premium Tax

#### **X.6 Profit (or Contribution to Surplus) & Risk Margin:**

HBG has voluntarily refrained from including a risk and contingency factor in this filing. By this voluntary restraint, HBG is not waiving any right to include a risk and contingency factor which HBG believes is consistent with historical and legal interpretations of HBG and the Pennsylvania Insurance Department.

#### **X.7 Catastrophic Adjustment**

For catastrophic plans, we use a 0.92 factor for the specific eligibility adjustment.

### **XI. Calibration**

#### **XI.1 Age Curve Calibration:**

The projected weighted average age factor for billable members is 1.961. This factor is calculated by dividing the all members age factor of 1.959 by the ratio of billable members to total members 0.9992. The age curve calibration factor is  $1/1.961 = 0.5100$ .

#### **XI.2 Geographic Calibration Factor:**

The projected weighted average geographic factor is 1.000. Each Plan Adjusted Index Rate represents the rate for an average member with a geographic factor of 1.000. The geographic calibration factor is  $1/1.000 = 1.000$ .

#### **XI.3 Tobacco Calibration Factor:**

The projected weighted average tobacco factor is 1.009. Each Plan Adjusted Index Rate represents the rate for an average member with a tobacco factor of 1.009. The tobacco calibration factor is  $1/1.009 = 0.9908$ .

#### **XI.4 Consumer Adjusted Premium Rate Development:**

The calibrated plan adjusted index rate represents the base rate for an age factor of 1.0, geographic rating factor of 1.0 and tobacco rating factor of 1.0. Thus, the approximate premium for a specific member can be derived by multiplying this rate by the HHS age curve

factor, the rating area factor on Worksheet 3 of the URRT, and the appropriate tobacco factor. Please note that this method will only produce approximate rates due to URRT rounding constraints.

## **XII. Projected Loss Ratio**

The projected loss ratio for 2020 using the federally-prescribed MLR methodology is 91.5%.

## **XIII. AV Metal Values**

The AV Metal Values included in Worksheet 2 of the Part I Unified Rate Review Template were based the Federal AV Calculator. Some plans did require an adjustment to the inputs entered into the AV calculator. Screen shots and certifications for these plans were submitted as part of HBG's QHP application.

## **XIV. Membership Projections**

Membership projections reflect HBG's expectations for 2020. These projections reflect expected changes in market share due to market competition, relative price levels, and changes in plan offerings (where applicable).

HBG expects membership in 2020 to follow a similar metal level distribution as the Individual ACA experience period in the markets where plans will continue to be offered.

For the Silver level plans, the projected membership by cost sharing subsidy levels is based on the observed distribution of ACA members that were eligible under the federal poverty levels as determined by the federal health insurance exchange. The projected enrollment by plan and subsidy level is as follows:

<b>CSR Silver Plan Membership Distribution</b>			
<b>FPL</b>	<b>Subsidy Level</b>	<b>% of Silver Membership</b>	<b>% of Total Membership</b>
<150%	94%	27.2%	10.6%
150%-200%	87%	39.2%	15.2%
200%-250%	73%	13.3%	5.2%
<u>&gt;250%</u>	<u>70%</u>	<u>20.4%</u>	<u>7.9%</u>
Total		100.0%	38.9%

## **XV. Terminated Plans and Products**

Not applicable; the Company is new to the Individual Market for 2020.

## **XVI. Plan Type**

The Plan types listed in Worksheet 2, Section I of the Part I Unified Rate Review Template describe HBG's plans adequately.

## **XVII. Actuarial Certification**

I, [REDACTED], am a member of the American Academy of Actuaries and meet its qualification standards for actuaries issuing statements of actuarial opinions in the United States. This filing is prepared to accompany HBG's rate filing for the individual combined market on and off the Pennsylvania Exchange.

I hereby certify that the projected index rate is, to the best of my knowledge and understanding:

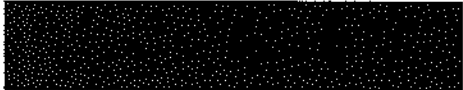
- In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80 and 147.102),
- Developed in compliance with the applicable Actuarial Standards of Practice
- Reasonable in relation to the benefits provided and the population anticipated to be covered
- Neither excessive nor deficient.

I certify that 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.

I certify that 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. The AV Metal Values included in Worksheet 2 of the Part I Unified Rate Review Template were based on the Federal AV Calculator. If any adjustments were required outside of the AV Calculator, appropriate certification has been provided to CMS through the QHP application process.

I certify that the geographic rating reflect only differences in the costs of delivery (which can include unit cost and provider practice pattern differences) and do not include differences for population morbidity by geographic area.

The Part I Unified Rate Review Template does not demonstrate the process used by HBG to develop the rates. 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.

Signed: 

Title: Actuarial Manager, Individual Markets

Date: May 21, 2019

## **ACTUARIAL MEMORANDUM**

### **Highmark Benefits Group**

#### **Individual Rate Filing - January 1, 2020**

I, [REDACTED], am a member of the American Academy of Actuaries and meet its qualification standards for preparing individual rate filings. As a consulting actuary, I was requested by Highmark Benefits Group ("HBG") to review the development of the market-wide base rate for the individual market on and off the Pennsylvania Exchange. The confidential material presented in this filing was prepared for the specific purpose of submitting the rating formula for the Pennsylvania Insurance Department and may not be appropriate for other purposes. This filing represents premium rates for individuals sold or renewed effective January 1, 2020. The rates are guaranteed until December 31, 2020.

To the best of my knowledge and judgment, the following are true with respect to this filing:

1. Premium rates are established in accordance with generally accepted actuarial principles and the applicable Actuarial Standards of Practice. They are not excessive, inadequate, or unfairly discriminatory. Rates are reasonable in relationship to the benefits provided. However, it is certain that actual experience will not conform exactly to the assumptions used in this analysis. To the extent that actual experience is different from the assumptions used in developing the rates, the actual results will also deviate from the projected amounts.
2. In compliance with all applicable Pennsylvania and Federal Statutes and Regulations (45 CFR 156.80 and 147.102).
3. The rating factors and rating methodology are reasonable and consistent with HBG's business plan at the time of the filing.

[REDACTED]

[REDACTED]

Fellow, Society of Actuaries  
Member, American Academy of Actuaries  
May 17, 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*	79962				
Federal TIN*	46-4763378				
Rate Effective Date*	01/01/2020				
Rate Expiration Date*	12/31/2020				
Rating Method*	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
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	451.61	451.61
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	15	491.75	491.75
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	16	507.10	507.10
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	17	522.45	522.45
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	18	538.98	538.98
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	19	555.51	555.51
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	20	572.63	572.63
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	21	590.34	605.10
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	22	590.34	605.10
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	23	590.34	605.10
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	24	590.34	605.10
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	25	592.70	607.52
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	26	604.51	619.62
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	27	618.68	634.15
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	28	641.70	657.74
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	29	660.59	677.10
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	30	670.04	686.79
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	31	684.20	701.31
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	32	698.37	715.83
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	33	707.23	724.91
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	34	716.67	734.59
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	35	721.40	739.44
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	36	726.12	744.27
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	37	730.84	749.11
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	38	735.56	753.95
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	39	745.01	763.64
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	40	754.45	829.90
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	41	768.62	849.33
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	42	782.20	869.81
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	43	801.09	898.02
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	44	824.70	933.56
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	45	852.45	976.06
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	46	885.51	1027.19
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	47	922.70	1086.02
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	48	965.21	1154.39
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	49	1007.12	1225.67
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	50	1054.35	1291.58
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	51	1100.98	1348.70
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	52	1152.34	1411.62
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	53	1204.29	1475.26
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	54	1260.38	1543.97
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	55	1316.46	1612.66
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	56	1377.26	1687.14
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	57	1438.66	1762.36
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	58	1504.19	1842.63
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	59	1536.66	1882.41
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	60	1602.18	1962.67
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	61	1658.86	2032.10
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	62	1696.05	2077.66
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	63	1742.68	2134.78
79962PA0190008	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1771.02	2169.50
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	285.16	285.16
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	15	310.51	310.51
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	16	320.20	320.20
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	17	329.89	329.89
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	18	340.33	340.33
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	19	350.77	350.77
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	20	361.58	361.58
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	21	372.76	382.08
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	22	372.76	382.08
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	23	372.76	382.08
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	24	372.76	382.08
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	25	374.25	383.61
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	26	381.71	391.25
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	27	390.65	400.42
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	28	405.19	415.32
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	29	417.12	427.55
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	30	423.08	433.66
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	31	432.03	442.83
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	32	440.98	452.00
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	33	446.57	457.73
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	34	452.53	463.84
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	35	455.51	466.90
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	36	458.49	469.95
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	37	461.48	473.02
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	38	464.46	476.07
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	39	470.42	482.18
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	40	476.39	524.03
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	41	485.33	536.29
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	42	493.91	549.23
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	43	505.84	567.05
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	44	520.75	589.49
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	45	538.27	616.32
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	46	559.14	648.60
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	47	582.62	685.74
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	48	609.46	728.91
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	49	635.93	773.93
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	50	665.75	815.54
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	51	695.20	851.62
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	52	727.63	891.35
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	53	760.43	931.53
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	54	795.84	974.90
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	55	831.25	1018.28
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	56	869.65	1065.32
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	57	908.42	1112.81
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	58	949.79	1163.49
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	59	970.29	1188.61
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	60	1011.67	1239.30
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	61	1047.46	1283.14
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	62	1070.94	1311.90
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	63	1100.39	1347.98
79962PA0190007	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1118.28	1369.89
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	296.64	296.64
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	15	323.00	323.00
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	16	333.09	333.09
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	17	343.17	343.17
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	18	354.02	354.02
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	19	364.88	364.88
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	20	376.13	376.13
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	21	387.76	397.45
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	22	387.76	397.45
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	23	387.76	397.45
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	24	387.76	397.45
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	25	389.31	399.04
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	26	397.07	407.00
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	27	406.37	416.53
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	28	421.50	432.04
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	29	433.90	444.75
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	30	440.11	451.11
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	31	449.41	460.65
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	32	458.72	470.19
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	33	464.54	476.15
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	34	470.74	482.51
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	35	473.84	485.69
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	36	476.94	488.86
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	37	480.05	492.05
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	38	483.15	495.23
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	39	489.35	501.58
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	40	495.56	545.12
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	41	504.86	557.87
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	42	513.78	571.32
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	43	526.19	589.86
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	44	541.70	613.20
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	45	559.93	641.12
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	46	581.64	674.70
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	47	606.07	713.34
79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	48	633.99	758.25



	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	49	661.52	805.07
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	50	692.54	848.36
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	51	723.17	885.88
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	52	756.91	927.21
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	53	791.03	969.01
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	54	827.87	1014.14
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	55	864.70	1059.26
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	56	904.64	1108.18
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	57	944.97	1157.59
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	58	988.01	1210.31
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	59	1009.34	1236.44
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	60	1052.38	1289.17
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	61	1089.61	1334.77
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	62	1114.03	1364.69
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	63	1144.67	1402.22
	79962PA0190006	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1163.28	1425.02
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	238.06	238.06
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	15	259.22	259.22
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	16	267.31	267.31
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	17	275.40	275.40
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	18	284.12	284.12
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	19	292.83	292.83
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	20	301.85	301.85
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	21	311.19	318.97
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	22	311.19	318.97
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	23	311.19	318.97
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	24	311.19	318.97
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	25	312.43	320.24
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	26	318.66	326.63
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	27	326.13	334.28
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	28	338.26	346.72
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	29	348.22	356.93
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	30	353.20	362.03
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	31	360.67	369.69
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	32	368.14	377.34
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	33	372.81	382.13
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	34	377.78	387.22
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	35	380.27	389.78
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	36	382.76	392.33
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	37	385.25	394.88
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	38	387.74	397.43
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	39	392.72	402.54
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	40	397.70	437.47
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	41	405.17	447.71
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	42	412.33	458.51
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	43	422.28	473.38
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	44	434.73	492.11
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	45	449.36	514.52
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	46	466.79	541.48
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	47	486.39	572.48
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	48	508.80	608.52
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	49	530.89	646.09
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	50	555.79	680.84
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	51	580.37	710.95
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	52	607.44	744.11
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	53	634.83	777.67
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	54	664.39	813.88
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	55	693.95	850.09
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	56	726.01	889.36
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	57	758.37	929.00
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	58	792.91	971.31
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	59	810.03	992.29
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	60	844.57	1034.60
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	61	874.44	1071.19
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	62	894.05	1095.21
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	63	918.63	1125.32
	79962PA0200003	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	933.57	1143.62
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	284.91	284.91
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	15	310.23	310.23
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	16	319.92	319.92
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	17	329.60	329.60
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	18	340.03	340.03
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	19	350.46	350.46
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	20	361.26	361.26
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	21	372.43	381.74
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	22	372.43	381.74
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	23	372.43	381.74
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	24	372.43	381.74
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	25	373.92	383.27
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	26	381.37	390.90
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	27	390.31	400.07
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	28	404.83	414.95
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	29	416.75	427.17
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	30	422.71	433.28
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	31	431.65	442.44
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	32	440.58	451.59
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	33	446.17	457.32
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	34	452.13	463.43
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	35	455.11	466.49
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	36	458.09	469.54
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	37	461.07	472.60
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	38	464.05	475.65
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	39	470.01	481.76
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	40	475.97	523.57
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	41	484.90	535.81
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	42	493.47	548.74
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	43	505.39	566.54
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	44	520.28	588.96
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	45	537.79	615.77
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	46	558.65	648.03
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	47	582.11	685.14
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	48	608.92	728.27
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	49	635.37	773.25
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	50	665.16	814.82
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	51	694.58	850.86
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	52	726.98	890.55
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	53	759.76	930.71
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	54	795.14	974.05
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	55	830.52	1017.39
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	56	868.88	1064.38
	79962PA0190005	Rating Area 3	Tobacco User/Non-Tobacco User	57	907.61	1111.82

	79962PA0190005 Rating Area 3	Tobacco User/Non-Tobacco User	58	948.95	1162.46
	79962PA0190005 Rating Area 3	Tobacco User/Non-Tobacco User	59	969.44	1187.56
	79962PA0190005 Rating Area 3	Tobacco User/Non-Tobacco User	60	1010.78	1238.21
	79962PA0190005 Rating Area 3	Tobacco User/Non-Tobacco User	61	1046.53	1282.00
	79962PA0190005 Rating Area 3	Tobacco User/Non-Tobacco User	62	1069.99	1310.74
	79962PA0190005 Rating Area 3	Tobacco User/Non-Tobacco User	63	1099.41	1346.78
	79962PA0190005 Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1117.29	1368.68
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	0-14	259.63	259.63
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	15	282.70	282.70
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	16	291.53	291.53
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	17	300.35	300.35
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	18	309.85	309.85
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	19	319.36	319.36
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	20	329.20	329.20
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	21	339.38	347.86
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	22	339.38	347.86
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	23	339.38	347.86
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	24	339.38	347.86
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	25	340.74	349.26
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	26	347.53	356.22
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	27	355.67	364.56
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	28	368.91	378.13
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	29	379.77	389.26
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	30	385.20	394.83
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	31	393.34	403.17
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	32	401.49	411.53
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	33	406.58	416.74
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	34	412.01	422.31
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	35	414.72	425.09
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	36	417.44	427.88
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	37	420.15	430.65
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	38	422.87	433.44
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	39	428.30	439.01
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	40	433.73	477.10
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	41	441.87	488.27
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	42	449.68	500.04
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	43	460.54	516.27
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	44	474.11	536.69
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	45	490.06	561.12
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	46	509.07	590.52
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	47	530.45	624.34
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	48	554.89	663.65
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	49	578.98	704.62
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	50	606.13	742.51
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	51	632.94	775.35
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	52	662.47	811.53
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	53	692.34	848.12
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	54	724.58	887.61
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	55	756.82	927.10
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	56	791.77	969.92
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	57	827.07	1013.16
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	58	864.74	1059.31
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	59	883.41	1082.18
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	60	921.08	1128.32
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	61	953.66	1168.23
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	62	975.04	1194.42
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	63	1001.85	1227.27
	79962PA0200002 Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1018.14	1247.22
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	0-14	200.81	200.81
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	15	218.66	218.66
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	16	225.49	225.49
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	17	232.31	232.31
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	18	239.66	239.66
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	19	247.01	247.01
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	20	254.63	254.63
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	21	262.50	269.06
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	22	262.50	269.06
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	23	262.50	269.06
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	24	262.50	269.06
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	25	263.55	270.14
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	26	268.80	275.52
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	27	275.10	281.98
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	28	285.34	292.47
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	29	293.74	301.08
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	30	297.94	305.39
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	31	304.24	311.85
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	32	310.54	318.30
	79962PA0190001 Rating Area 3	Tobacco User/Non-Tobacco User	33	314.48	322.34

	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	34	318.68	326.65
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	35	320.78	328.80
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	36	322.88	330.95
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	37	324.98	333.10
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	38	327.08	335.26
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	39	331.28	339.56
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	40	335.48	369.03
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	41	341.78	377.67
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	42	347.81	386.76
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	43	356.21	399.31
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	44	366.71	415.12
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	45	379.05	434.01
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	46	393.75	456.75
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	47	410.29	482.91
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	48	429.19	513.31
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	49	447.83	545.01
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	50	468.83	574.32
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	51	489.56	599.71
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	52	512.40	627.69
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	53	535.50	655.99
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	54	560.44	686.54
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	55	585.38	717.09
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	56	612.41	750.20
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	57	639.71	783.64
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	58	668.85	819.34
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	59	683.29	837.03
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	60	712.43	872.73
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	61	737.63	903.60
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	62	754.16	923.85
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	63	774.90	949.25
	79962PA0190001	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	787.50	964.69
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	200.93	200.93
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	15	218.80	218.80
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	16	225.62	225.62
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	17	232.45	232.45
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	18	239.81	239.81
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	19	247.16	247.16
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	20	254.78	254.78
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	21	262.66	269.23
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	22	262.66	269.23
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	23	262.66	269.23
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	24	262.66	269.23
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	25	263.71	270.30
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	26	268.96	275.68
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	27	275.27	282.15
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	28	285.51	292.65
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	29	293.92	301.27
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	30	298.12	305.57
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	31	304.42	312.03
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	32	310.73	318.50
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	33	314.67	322.54
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	34	318.87	326.84
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	35	320.97	328.99
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	36	323.07	331.15
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	37	325.17	333.30
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	38	327.27	335.45
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	39	331.48	339.77
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	40	335.68	369.25
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	41	341.98	377.89
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	42	348.02	387.00
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	43	356.43	399.56
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	44	366.94	415.38
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	45	379.28	434.28
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	46	393.99	457.03
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	47	410.54	483.21
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	48	429.45	513.62
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	49	448.10	545.34
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	50	469.11	574.66
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	51	489.86	600.08
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	52	512.71	628.07
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	53	535.83	656.39
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	54	560.78	686.96
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	55	585.73	717.52
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	56	612.79	750.67
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	57	640.10	784.12
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	58	669.26	819.84
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	59	683.70	837.53
	79962PA0200001	Rating Area 3	Tobacco User/Non-Tobacco User	60	712.86	873.25

	79962PA0200001 Rating Area 3		Tobacco User/Non-Tobacco User	61	738.07	904.14
	79962PA0200001 Rating Area 3		Tobacco User/Non-Tobacco User	62	754.62	924.41
	79962PA0200001 Rating Area 3		Tobacco User/Non-Tobacco User	63	775.37	949.83
	79962PA0200001 Rating Area 3		Tobacco User/Non-Tobacco User	64 and over	787.98	965.28
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	0-14	202.15	202.15	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	15	220.12	220.12	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	16	226.99	226.99	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	17	233.86	233.86	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	18	241.26	241.26	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	19	248.66	248.66	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	20	256.32	256.32	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	21	264.25	270.86	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	22	264.25	270.86	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	23	264.25	270.86	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	24	264.25	270.86	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	25	265.31	271.94	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	26	270.59	277.35	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	27	276.93	283.85	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	28	287.24	294.42	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	29	295.70	303.09	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	30	299.92	307.42	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	31	306.27	313.93	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	32	312.61	320.43	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	33	316.57	324.48	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	34	320.80	328.82	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	35	322.91	330.98	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	36	325.03	333.16	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	37	327.14	335.32	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	38	329.26	337.49	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	39	333.48	341.82	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	40	337.71	371.48	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	41	344.05	380.18	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	42	350.13	389.34	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	43	358.59	401.98	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	44	369.16	417.89	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	45	381.58	436.91	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	46	396.38	459.80	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	47	413.02	486.12	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	48	432.05	516.73	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	49	450.81	548.64	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	50	471.95	578.14	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	51	492.83	603.72	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	52	515.82	631.88	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	53	539.07	660.36	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	54	564.17	691.11	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	55	589.28	721.87	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	56	616.50	755.21	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	57	643.98	788.88	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	58	673.31	824.80	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	59	687.84	842.60	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	60	717.17	878.53	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	61	742.54	909.61	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	62	759.19	930.01	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	63	780.07	955.59	
79962PA0190004 Rating Area 3		Tobacco User/Non-Tobacco User	64 and over	792.75	971.12	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	0-14	191.97	191.97	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	15	209.03	209.03	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	16	215.56	215.56	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	17	222.08	222.08	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	18	229.11	229.11	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	19	236.13	236.13	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	20	243.41	243.41	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	21	250.94	257.21	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	22	250.94	257.21	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	23	250.94	257.21	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	24	250.94	257.21	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	25	251.94	258.24	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	26	256.96	263.38	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	27	262.99	269.56	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	28	272.77	279.59	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	29	280.80	287.82	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	30	284.82	291.94	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	31	290.84	298.11	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	32	296.86	304.28	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	33	300.63	308.15	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	34	304.64	312.26	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	35	306.65	314.32	
79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	36	308.66	316.38	

	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	37	310.66	318.43
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	38	312.67	320.49
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	39	316.69	324.61
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	40	320.70	352.77
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	41	326.72	361.03
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	42	332.50	369.74
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	43	340.53	381.73
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	44	350.56	396.83
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	45	362.36	414.90
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	46	376.41	436.64
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	47	392.22	461.64
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	48	410.29	490.71
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	49	428.10	521.00
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	50	448.18	549.02
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	51	468.00	573.30
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	52	489.83	600.04
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	53	511.92	627.10
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	54	535.76	656.31
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	55	559.60	685.51
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	56	585.44	717.16
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	57	611.54	749.14
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	58	639.40	783.27
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	59	653.20	800.17
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	60	681.05	834.29
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	61	705.14	863.80
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	62	720.95	883.16
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	63	740.77	907.44
	79962PA0190002 Rating Area 3		Tobacco User/Non-Tobacco User	64 and over	752.82	922.20
	79962PA0210001	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	168.09	168.09
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	15	183.04	183.04
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	16	188.75	188.75
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	17	194.46	194.46
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	18	200.61	200.61
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	19	206.77	206.77
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	20	213.14	213.14
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	21	219.73	225.22
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	22	219.73	225.22
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	23	219.73	225.22
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	24	219.73	225.22
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	25	220.61	226.13
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	26	225.00	230.63
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	27	230.28	236.04
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	28	238.85	244.82
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	29	245.88	252.03
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	30	249.39	255.62
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	31	254.67	261.04
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	32	259.94	266.44
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	33	263.24	269.82
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	34	266.75	273.42
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	35	268.51	275.22
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	36	270.27	277.03
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	37	272.03	278.83
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	38	273.78	280.62
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	39	277.30	284.23
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	40	280.81	308.89
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	41	286.09	316.13
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	42	291.14	323.75
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	43	298.17	334.25
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	44	306.96	347.48
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	45	317.29	363.30
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	46	329.60	382.34
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	47	343.44	404.23
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	48	359.26	429.67
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	49	374.86	456.20
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	50	392.44	480.74
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	51	409.80	502.01
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	52	428.91	525.41
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	53	448.25	549.11
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	54	469.12	574.67
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	55	490.00	600.25
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	56	512.63	627.97
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	57	535.48	655.96
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	58	559.87	685.84
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	59	571.96	700.65
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	60	596.35	730.53
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	61	617.44	756.36
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	62	631.28	773.32
	79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	63	648.64	794.58

79962PA0210001 Rating Area 3		Tobacco User/Non-Tobacco User	64 and over	659.19	807.51
79962PA0190003	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	202.15	202.15
79962PA0190003 Rating Area 3	79962PA0190003 Rating Area 3	Tobacco User/Non-Tobacco User	15	220.12	220.12
			16	226.99	226.99
			17	233.86	233.86
			18	241.26	241.26
			19	248.66	248.66
			20	256.32	256.32
			21	264.25	270.86
			22	264.25	270.86
			23	264.25	270.86
			24	264.25	270.86
			25	265.31	271.94
			26	270.59	277.35
			27	276.93	283.85
			28	287.24	294.42
			29	295.70	303.09
			30	299.92	307.42
			31	306.27	313.93
			32	312.61	320.43
			33	316.57	324.48
			34	320.80	328.82
			35	322.91	330.98
			36	325.03	333.16
			37	327.14	335.32
			38	329.26	337.49
			39	333.48	341.82
			40	337.71	371.48
			41	344.05	380.18
			42	350.13	389.34
			43	358.59	401.98
			44	369.16	417.89
			45	381.58	436.91
			46	396.38	459.80
			47	413.02	486.12
			48	432.05	516.73
			49	450.81	548.64
			50	471.95	578.14
			51	492.83	603.72
			52	515.82	631.88
			53	539.07	660.36
			54	564.17	691.11
			55	589.28	721.87
			56	616.50	755.21
			57	643.98	788.88
			58	673.31	824.80
			59	687.84	842.60
			60	717.17	878.53
			61	742.54	909.61
			62	759.19	930.01
			63	780.07	955.59
			64 and over	792.75	971.12