

State:	Pennsylvania	Filing Company:	Keystone Health Plan Central
TOI/Sub-TOI:	H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only		
Product Name:	Rates - KHPC Small Group HMO		
Project Name/Number:	/		

Correspondence Summary

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Additional Information Needed	Jim Lavery	07/13/2016	07/13/2016
Data Request Sent	Jim Lavery	06/16/2016	06/16/2016

Response Letters

Responded By	Created On	Date Submitted
Pam Day	07/20/2016	07/20/2016
Pam Day	06/29/2016	06/29/2016

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Transmittal Letter (A&H)	Pam Day	07/21/2016	07/21/2016
Supporting Document	Q&A Exhibits	Pam Day	07/21/2016	07/21/2016

State: Pennsylvania **Filing Company:** Keystone Health Plan Central
TOI/Sub-TOI: H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only
Product Name: Rates - KHPC Small Group HMO
Project Name/Number: /

Objection Letter

Objection Letter Status	Additional Information Needed
Objection Letter Date	07/13/2016
Submitted Date	07/13/2016
Respond By Date	

Dear Stephanie Gray,

Introduction:

July 13, 2016

Stephanie Gray
Keystone Health Plan Central
2500 Elmerton Avenue
Harrisburg, PA 17110

RE: Proposed aggregate 8.0% increase (ranges from -4.6% to 39.1%) on 901 covered lives on KHPC's small group ACA-compliant HMO product;
Pennsylvania Insurance Department ID #: CABC-130539616

Dear Ms. Gray:

Please respond to the attached question concerning actuarial value and induced utilization for the small group KHPC plans that will be sold in 2017. Please respond to this question by close of business on Tuesday July 19th.

Should you have any questions regarding this correspondence, please contact me at (717) 783-2117.

Sincerely,

James Laverty, ASA, MAAA
Actuary
Bureau of Accident & Health Insurance

Conclusion:

Sincerely,
Jim Laverty

1. Induced Utilization

- a. Please complete the table below for all plans, and confirm that the ratio in column (8) represents the AV and Cost Sharing for each plan in your filing¹

Plan ID (1)	Metal Level (2)	Projected Membership (3)	Projected Allowed Claims (4)	Projected Paid Claims (5)	Company Determined AV Factor (6)	Induced Utilization ² (7)	AV & Cost Sharing (6)*(7) (8)
xxxxxx							
xxxxxx							
xxxxxx							
Total							

- b. Please show quantitatively, including an Excel spreadsheet with formulas, the derivation of each, the AV and the cost sharing factors for each plan. Also, provide narrative that explains the derivation.
- c. Please provide justification for relative induced utilization assumptions in the Company's pricing that exceed the federal factors used in the risk adjustment model proving that morbidity is not reflected.³
- d. Please confirm that each plan's induced utilization factor was normalized by an aggregate factor, and that the resulting sumproduct (against projected membership) produces a factor of 1.000. Please show the steps that demonstrate this.
2. Please show quantitatively that plan premiums are in proportion to the plan AV Pricing Values.

¹ If a tobacco factor is used in the AV and Cost Sharing please add a column for that amount and modify the formula.

² The Induced Demand is the amount used by the company to reflect increased demand. This may be called by another name in the filing

³ The federal factors relative to the Bronze factors are Silver 1.03, Gold 1.08 and Platinum 1.15.

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Project Name/Number: /

Objection Letter

Objection Letter Status	Data Request Sent
Objection Letter Date	06/16/2016
Submitted Date	06/16/2016
Respond By Date	

Dear Stephanie Gray,

Introduction:

June 16, 2016

Stephanie Gray
Keystone Health Plan Central
2500 Elmerton Avenue
Harrisburg, PA 17110

RE: Proposed aggregate 8.0% increase (ranges from -4.6% to 39.1%) on 901 covered lives on KHPC's small group ACA-compliant HMO product;
Pennsylvania Insurance Department ID #: CABC-130539616

Dear Ms. Gray:

The captioned filing has been reviewed by the Pennsylvania Insurance Department and it has been found that it fails to meet the requirements of our Insurance Company Laws and is therefore disapproved pursuant to the authority granted under Section 4(A) of Act 134, the Accident and Health Filing Reform Act. After you review the letter and if you do not understand the content of it or the disapproval reasons, please contact the Department for further clarification.

The disapproved filing may be resubmitted within 120 days of the date of disapproval. If you choose to resubmit the filing within that time, the filing will become effective for use 30 days after receipt by the Department as provided by Section 4(C) of Act 134, unless the filing is disapproved before the 30 day period expires.

If the Department does not hear from you within 120 days, the Department will close its files on the above captioned filing. After 120 days, the Department will reopen its files and continue its review of the forms if you respond within one year of the date of this letter and furnish duplicate copies of the previously filed forms and all correspondence between you and the Department. If the filing is resubmitted after 120 days, the Department will review it as if it were a new submission under Section 4(A) of Act 134.

The Pennsylvania Insurance Department has received and conducted a review of the above captioned filing. In order to complete the review, we are requesting the following information. To facilitate a timely review, we request this information be provided within 7 days of the date of this letter. If you have any questions or difficulties in providing the information within this time frame, please call.

Please furnish the following information.

1. Regarding broker commissions: (a) Under what circumstances and in what geographic locations will commissions be paid?, (b) Are commissions paid for SEP?, (c) Provide a copy of the broker agreement - current and 2017, (d) Show the calculation of the average commission - current and 2017.

When responding to this data call, you may provide a redacted version of this response as it contains proprietary information. Please place the redacted and non-redacted responses in separate sections of the Supporting Documentation tab in SERFF.

2. Please be advised that each time the URRT is changed in SERFF, the URRT in HIOS must also be updated. Please acknowledge

State: Pennsylvania **Filing Company:** Keystone Health Plan Central
TOI/Sub-TOI: H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only
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your understanding and certify that you are in compliance.

3. Does this filing propose Service Area changes relative to the last approved filing? If so, please discuss.

4. Please show quantitatively the derivation of the trend assumptions for each benefit category as shown in Table 3. Please include the sources and source claims data.

Please be advised that there may be additional questions based on the responses to the above.

Response to this request should be provided via SERFF in Microsoft Excel spreadsheets (version 2013 or less). Please retain all formulas.

Should you have any questions regarding this correspondence, please contact me at (717) 783-2117.

Sincerely,

James Lavery, ASA, MAAA
Actuary
Bureau of Accident & Health Insurance

Conclusion:

Sincerely,
Jim Lavery

SERFF Tracking #:	CABC-130539616	State Tracking #:	CABC-130539616	Company Tracking #:	16-45
State:	Pennsylvania	Filing Company:	Keystone Health Plan Central		
TOI/Sub-TOI:	H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only				
Product Name:	Rates - KHPC Small Group HMO				
Project Name/Number:	/				

Amendment Letter

Submitted Date: 07/21/2016

Comments:

Updated response and Q&A exhibits.

Changed Items:

No Form Schedule Items Changed.

No Rate Schedule Items Changed.

State:	Pennsylvania	Filing Company:	Keystone Health Plan Central
TOI/Sub-TOI:	H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only		
Product Name:	Rates - KHPC Small Group HMO		
Project Name/Number:	/		

Supporting Document Schedule Item Changes	
Satisfied - Item:	Transmittal Letter (A&H)
Comments:	
Attachment(s):	SG_16-45_Initial_KHP_HMO_RateCvLtr_Supporting_20160509.pdf SG_16-45_Revised_KHP_HMO_RateCvLtr_Supporting_20160721.pdf SG_16-45_Initial_KHP_HMO_Q&AResponse201607_Supporting_20160721.pdf
<i>Previous Version</i>	
Satisfied - Item:	<i>Transmittal Letter (A&H)</i>
Comments:	
Attachment(s):	<i>SG_16-45_Initial_KHP_HMO_RateCvLtr_Supporting_20160509.pdf SG_16-45_Revised_KHP_HMO_RateCvLtr_Supporting_20160721.pdf</i>
<i>Previous Version</i>	
Satisfied - Item:	<i>Transmittal Letter (A&H)</i>
Comments:	
Attachment(s):	<i>SG_16-45_Initial_KHP_HMO_RateCvLtr_Supporting_20160509.pdf</i>

Satisfied - Item:	Q&A Exhibits
Comments:	
Attachment(s):	SG_16-45_Initial_KHP_HMO_Q&AExhibits201607_Supporting_20160721.pdf SG_16-45_Initial_KHP_HMO_Q&AExhibits201607_Supporting_20160721.xlsm
<i>Previous Version</i>	
Satisfied - Item:	<i>Q&A Exhibits</i>
Comments:	
Attachment(s):	<i>SG_16-45_Initial_KHP_HMO_Q&AExhibits_Supporting_CONF_20160629.pdf SG_16-45_Initial_KHP_HMO_Q&AExhibits_Supporting_CONF_20160629.xlsm</i>

State: Pennsylvania **Filing Company:** Keystone Health Plan Central
TOI/Sub-TOI: H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only
Product Name: Rates - KHPC Small Group HMO
Project Name/Number: /

Post Submission Update Request Processed On 07/20/2016

Status: Allowed
Created By: Pam Day
Processed By: Jim Lavery
Comments:

Company Rate Information:

Company Name:Keystone Health Plan Central

Field Name	Requested Change	Prior Value
Overall % Indicated Change	9.400%	8.000%
Overall % Rate Impact	9.400%	8.000%
Written Premium Change for this Program	\$427254	\$363790
Number of Policy Holders Affected for this Program	600	44
Maximum %Change (where required)	41.400%	39.100%
Minimum %Change (where required)	-3.600%	-4.600%
Product:	NEW	
Product Name	KHPC Small Group Rates	
HIOS Product ID	000	
HIOS Submission ID	000	
Number of Covered Lives	901	

State:	Pennsylvania	Filing Company:	Keystone Health Plan Central
TOI/Sub-TOI:	H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only		
Product Name:	Rates - KHPC Small Group HMO		
Project Name/Number:	/		

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Rates and PA Plan Design		New		SG_16-45_Revised_KHP_HMO_PIDRates_RateRule_20160721.pdf, SG_16-45_Revised_KHP_HMO_PIDRates_RateRule_20160721.xlsx,

SERFF Tracking #:	CABC-130539616	State Tracking #:	CABC-130539616	Company Tracking #:	16-45
State:	Pennsylvania	Filing Company:	Keystone Health Plan Central		
TOI/Sub-TOI:	H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only				
Product Name:	Rates - KHPC Small Group HMO				
Project Name/Number:	/				

Attachment SG_16-45_Revised_KHP_HMO_PIDRates_RateRule_20160721.xlsx is not a PDF document and cannot be reproduced here.

Keystone Health Plan Central Small Group Plan Design Summary

HIOS Plan ID	On/Off Exchange	Product	Metal	Plan Design Marketing Name	Network	Rating Area	Counties Excluded
53789PA0090007	Off	HMO	Gold	Gold HMO 2000/0/30 Rx 250	HMO	6,7,9	None
53789PA0090008	Off	HMO	Gold	Gold HMO 2000/0/30 Rx 0	HMO	6,7,9	None
53789PA0090011	Off	HMO	Silver	Silver HMO 4000/0/35 Rx 250	HMO	6,7,9	None
53789PA0090012	Off	HMO	Silver	Silver HMO 4000/0/35 Rx 0	HMO	6,7,9	None
53789PA0090004	Off	HMO	Bronze	Bronze HMO 7000/0/60 Combined	HMO	6,7,9	None

Company Name: Keystone Health Plan Central
Market: Small Group
Product: HMO
Effective Date of Rates:

January 1, 2017

Ending date of Rates:

March 31, 2017

HIOS Plan ID (On Exchange)=>		53789PA0090007		53789PA0090007		53789PA0090007		53789PA0090008		53789PA0090008		53789PA0090008	
HIOS Plan ID (Off Exchange)=>		53789PA0090007		53789PA0090007		53789PA0090007		53789PA0090008		53789PA0090008		53789PA0090008	
Form # =>		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG	
Rating Area =>		6		7		9		6		7		7	
Counties Excluded in Rating Area =>		None		None		None		None		None		None	
Network =>		HMO		HMO		HMO		HMO		HMO		HMO	
Metal =>		Gold		Gold		Gold		Gold		Gold		Gold	
Plan Name =>		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 0		Gold HMO 2000/0/30 Rx 0		Gold HMO 2000/0/30 Rx 0	
Deductible =>		\$2000 /\$250 Med/Rx		\$2000 /\$250 Med/Rx		\$2000 /\$250 Med/Rx		\$2000 /\$0 Med/Rx		\$2000 /\$0 Med/Rx		\$2000 /\$0 Med/Rx	
Coinsurance =>		0%		0%		0%		0%		0%		0%	
Copays =>		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER	
OOP Maximum =>		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined	
Pediatric Dental (Yes/No) =>		Yes		Yes		Yes		Yes		Yes		Yes	
Age Band		Non-Tobacco		Tobacco		Non-Tobacco		Tobacco		Non-Tobacco		Tobacco	
0	0 - 20	\$217.83	\$217.83	\$220.01	\$220.01	\$215.66	\$215.66	\$221.61	\$221.61	\$223.83	\$223.83	\$219.39	\$219.39
21	21	\$343.04	\$343.04	\$346.48	\$346.48	\$339.61	\$339.61	\$348.99	\$348.99	\$352.48	\$352.48	\$345.50	\$345.50
22	22	\$343.04	\$343.04	\$346.48	\$346.48	\$339.61	\$339.61	\$348.99	\$348.99	\$352.48	\$352.48	\$345.50	\$345.50
23	23	\$343.04	\$343.04	\$346.48	\$346.48	\$339.61	\$339.61	\$348.99	\$348.99	\$352.48	\$352.48	\$345.50	\$345.50
24	24	\$343.04	\$343.04	\$346.48	\$346.48	\$339.61	\$339.61	\$348.99	\$348.99	\$352.48	\$352.48	\$345.50	\$345.50
25	25	\$344.42	\$344.42	\$347.86	\$347.86	\$340.97	\$340.97	\$350.39	\$350.39	\$353.89	\$353.89	\$346.88	\$346.88
26	26	\$351.28	\$351.28	\$354.79	\$354.79	\$347.77	\$347.77	\$357.37	\$357.37	\$360.94	\$360.94	\$353.79	\$353.79
27	27	\$359.51	\$359.51	\$363.11	\$363.11	\$355.92	\$355.92	\$365.74	\$365.74	\$369.40	\$369.40	\$362.09	\$362.09
28	28	\$372.89	\$372.89	\$376.62	\$376.62	\$369.16	\$369.16	\$379.36	\$379.36	\$383.15	\$383.15	\$375.56	\$375.56
29	29	\$383.87	\$383.87	\$387.71	\$387.71	\$380.03	\$380.03	\$390.52	\$390.52	\$394.43	\$394.43	\$386.62	\$386.62
30	30	\$389.36	\$389.36	\$393.25	\$393.25	\$385.46	\$385.46	\$396.11	\$396.11	\$400.07	\$400.07	\$392.15	\$392.15
31	31	\$397.59	\$397.59	\$401.57	\$401.57	\$393.61	\$393.61	\$404.48	\$404.48	\$408.53	\$408.53	\$400.44	\$400.44
32	32	\$405.82	\$405.82	\$409.88	\$409.88	\$401.76	\$401.76	\$412.86	\$412.86	\$416.99	\$416.99	\$408.73	\$408.73
33	33	\$410.97	\$410.97	\$415.08	\$415.08	\$406.86	\$406.86	\$418.09	\$418.09	\$422.27	\$422.27	\$413.91	\$413.91
34	34	\$416.46	\$416.46	\$420.62	\$420.62	\$412.29	\$412.29	\$423.68	\$423.68	\$427.91	\$427.91	\$419.44	\$419.44
35	35	\$419.20	\$419.20	\$423.39	\$423.39	\$415.01	\$415.01	\$426.47	\$426.47	\$430.73	\$430.73	\$422.20	\$422.20
36	36	\$421.95	\$421.95	\$426.16	\$426.16	\$417.73	\$417.73	\$429.26	\$429.26	\$433.55	\$433.55	\$424.97	\$424.97
37	37	\$424.69	\$424.69	\$428.94	\$428.94	\$420.44	\$420.44	\$432.05	\$432.05	\$436.37	\$436.37	\$427.73	\$427.73
38	38	\$427.43	\$427.43	\$431.71	\$431.71	\$423.16	\$423.16	\$434.85	\$434.85	\$439.19	\$439.19	\$430.50	\$430.50
39	39	\$432.92	\$432.92	\$437.25	\$437.25	\$428.59	\$428.59	\$440.43	\$440.43	\$444.83	\$444.83	\$436.02	\$436.02
40	40	\$438.41	\$438.41	\$442.80	\$442.80	\$434.03	\$434.03	\$446.01	\$446.01	\$450.47	\$450.47	\$441.55	\$441.55
41	41	\$446.64	\$446.64	\$451.11	\$451.11	\$442.18	\$442.18	\$454.39	\$454.39	\$458.93	\$458.93	\$449.84	\$449.84
42	42	\$454.53	\$454.53	\$459.08	\$459.08	\$449.99	\$449.99	\$462.42	\$462.42	\$467.04	\$467.04	\$457.79	\$457.79
43	43	\$465.51	\$465.51	\$470.17	\$470.17	\$460.86	\$460.86	\$473.58	\$473.58	\$478.32	\$478.32	\$468.85	\$468.85
44	44	\$479.23	\$479.23	\$484.03	\$484.03	\$474.44	\$474.44	\$487.54	\$487.54	\$492.42	\$492.42	\$482.67	\$482.67
45	45	\$495.36	\$495.36	\$500.31	\$500.31	\$490.40	\$490.40	\$503.95	\$503.95	\$508.99	\$508.99	\$498.91	\$498.91
46	46	\$514.57	\$514.57	\$519.71	\$519.71	\$509.42	\$509.42	\$523.49	\$523.49	\$528.72	\$528.72	\$518.25	\$518.25
47	47	\$536.18	\$536.18	\$541.54	\$541.54	\$530.82	\$530.82	\$545.48	\$545.48	\$550.93	\$550.93	\$540.02	\$540.02
48	48	\$560.88	\$560.88	\$566.49	\$566.49	\$555.27	\$555.27	\$570.60	\$570.60	\$576.31	\$576.31	\$564.90	\$564.90
49	49	\$585.23	\$585.23	\$591.09	\$591.09	\$579.38	\$579.38	\$595.38	\$595.38	\$601.34	\$601.34	\$589.43	\$589.43
50	50	\$612.68	\$612.68	\$618.81	\$618.81	\$606.55	\$606.55	\$623.30	\$623.30	\$629.53	\$629.53	\$617.07	\$617.07
51	51	\$639.78	\$639.78	\$646.18	\$646.18	\$633.38	\$633.38	\$650.87	\$650.87	\$657.38	\$657.38	\$644.36	\$644.36
52	52	\$669.62	\$669.62	\$676.32	\$676.32	\$662.93	\$662.93	\$681.23	\$681.23	\$688.05	\$688.05	\$674.42	\$674.42
53	53	\$699.81	\$699.81	\$706.81	\$706.81	\$692.81	\$692.81	\$711.95	\$711.95	\$719.06	\$719.06	\$704.83	\$704.83
54	54	\$732.40	\$732.40	\$739.73	\$739.73	\$725.08	\$725.08	\$745.10	\$745.10	\$752.55	\$752.55	\$737.65	\$737.65
55	55	\$764.99	\$764.99	\$772.64	\$772.64	\$757.34	\$757.34	\$778.25	\$778.25	\$786.04	\$786.04	\$770.47	\$770.47
56	56	\$800.32	\$800.32	\$808.33	\$808.33	\$792.32	\$792.32	\$814.20	\$814.20	\$822.34	\$822.34	\$806.06	\$806.06
57	57	\$836.00	\$836.00	\$844.36	\$844.36	\$827.64	\$827.64	\$850.50	\$850.50	\$859.00	\$859.00	\$841.99	\$841.99
58	58	\$874.08	\$874.08	\$882.82	\$882.82	\$865.34	\$865.34	\$889.23	\$889.23	\$898.13	\$898.13	\$880.34	\$880.34
59	59	\$892.95	\$892.95	\$901.88	\$901.88	\$884.02	\$884.02	\$908.43	\$908.43	\$917.51	\$917.51	\$899.34	\$899.34
60	60	\$931.02	\$931.02	\$940.33	\$940.33	\$921.71	\$921.71	\$947.17	\$947.17	\$956.64	\$956.64	\$937.69	\$937.69
61	61	\$963.96	\$963.96	\$973.60	\$973.60	\$954.32	\$954.32	\$980.67	\$980.67	\$990.48	\$990.48	\$970.86	\$970.86
62	62	\$985.57	\$985.57	\$995.42	\$995.42	\$975.71	\$975.71	\$1,002.66	\$1,002.66	\$1,012.68	\$1,012.68	\$992.63	\$992.63
63	63	\$1,012.67	\$1,012.67	\$1,022.80	\$1,022.80	\$1,002.54	\$1,002.54	\$1,030.23	\$1,030.23	\$1,040.53	\$1,040.53	\$1,019.92	\$1,019.92
64+	64+	\$1,029.13	\$1,029.13	\$1,039.43	\$1,039.43	\$1,018.83	\$1,018.83	\$1,046.97	\$1,046.97	\$1,057.44	\$1,057.44	\$1,036.50	\$1,036.50

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

HIOS Plan ID (On Exchange)=>		0090008	53789PA0090012		53789PA0090012		53789PA0090012		53789PA0090011		53789PA0090011	
HIOS Plan ID (Off Exchange)=>		0090008	53789PA0090012		53789PA0090012		53789PA0090012		53789PA0090011		53789PA0090011	
Form # =>		PC-SPG	C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG	
Rating Area =>		9	6		7		9		6		7	
Counties Excluded in Rating Area =>		ne	None		None		None		None		None	
Network =>		MO	HMO		HMO		HMO		HMO		HMO	
Metal =>		old	Silver		Silver		Silver		Silver		Silver	
Plan Name =>		00/0/30 Rx 0	Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 250		Silver HMO 4000/0/35 Rx 250	
Deductible =>		0 Med/Rx	\$4000 /\$0 Med/Rx		\$4000 /\$0 Med/Rx		\$4000 /\$0 Med/Rx		\$4000 /\$250 Med/Rx		\$4000 /\$250 Med/Rx	
Coinsurance =>		%	0%		0%		0%		0%		0%	
Copays =>		0 PCP/SPC/ER	\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER	
OOP Maximum =>		Rx Combined	\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined	
Pediatric Dental (Yes/No) =>		es	Yes		Yes		Yes		Yes		Yes	
Age Band		Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0	0 - 20	\$219.39	\$197.27	\$197.27	\$199.24	\$199.24	\$195.29	\$195.29	\$193.49	\$193.49	\$195.42	\$195.42
21	21	\$345.50	\$310.65	\$310.65	\$313.76	\$313.76	\$307.55	\$307.55	\$304.71	\$304.71	\$307.75	\$307.75
22	22	\$345.50	\$310.65	\$310.65	\$313.76	\$313.76	\$307.55	\$307.55	\$304.71	\$304.71	\$307.75	\$307.75
23	23	\$345.50	\$310.65	\$310.65	\$313.76	\$313.76	\$307.55	\$307.55	\$304.71	\$304.71	\$307.75	\$307.75
24	24	\$345.50	\$310.65	\$310.65	\$313.76	\$313.76	\$307.55	\$307.55	\$304.71	\$304.71	\$307.75	\$307.75
25	25	\$346.88	\$311.90	\$311.90	\$315.02	\$315.02	\$308.78	\$308.78	\$305.93	\$305.93	\$308.98	\$308.98
26	26	\$353.79	\$318.11	\$318.11	\$321.29	\$321.29	\$314.93	\$314.93	\$312.02	\$312.02	\$315.14	\$315.14
27	27	\$362.09	\$325.57	\$325.57	\$328.82	\$328.82	\$322.31	\$322.31	\$319.33	\$319.33	\$322.53	\$322.53
28	28	\$375.56	\$337.68	\$337.68	\$341.06	\$341.06	\$334.30	\$334.30	\$331.22	\$331.22	\$334.53	\$334.53
29	29	\$386.62	\$347.62	\$347.62	\$351.10	\$351.10	\$344.15	\$344.15	\$340.97	\$340.97	\$344.38	\$344.38
30	30	\$392.15	\$352.59	\$352.59	\$356.12	\$356.12	\$349.07	\$349.07	\$345.84	\$345.84	\$349.30	\$349.30
31	31	\$400.44	\$360.05	\$360.05	\$363.65	\$363.65	\$356.45	\$356.45	\$353.16	\$353.16	\$356.69	\$356.69
32	32	\$408.73	\$367.50	\$367.50	\$371.18	\$371.18	\$363.83	\$363.83	\$360.47	\$360.47	\$364.07	\$364.07
33	33	\$413.91	\$372.16	\$372.16	\$375.89	\$375.89	\$368.44	\$368.44	\$365.04	\$365.04	\$368.69	\$368.69
34	34	\$419.44	\$377.13	\$377.13	\$380.91	\$380.91	\$373.36	\$373.36	\$369.91	\$369.91	\$373.61	\$373.61
35	35	\$422.20	\$379.62	\$379.62	\$383.42	\$383.42	\$375.82	\$375.82	\$372.35	\$372.35	\$376.08	\$376.08
36	36	\$424.97	\$382.11	\$382.11	\$385.93	\$385.93	\$378.28	\$378.28	\$374.79	\$374.79	\$378.54	\$378.54
37	37	\$427.73	\$384.59	\$384.59	\$388.44	\$388.44	\$380.74	\$380.74	\$377.23	\$377.23	\$381.00	\$381.00
38	38	\$430.50	\$387.08	\$387.08	\$390.95	\$390.95	\$383.20	\$383.20	\$379.66	\$379.66	\$383.46	\$383.46
39	39	\$436.02	\$392.05	\$392.05	\$395.97	\$395.97	\$388.13	\$388.13	\$384.54	\$384.54	\$388.39	\$388.39
40	40	\$441.55	\$397.02	\$397.02	\$400.99	\$400.99	\$393.05	\$393.05	\$389.42	\$389.42	\$393.31	\$393.31
41	41	\$449.84	\$404.47	\$404.47	\$408.52	\$408.52	\$400.43	\$400.43	\$396.73	\$396.73	\$400.70	\$400.70
42	42	\$457.79	\$411.62	\$411.62	\$415.73	\$415.73	\$407.50	\$407.50	\$403.74	\$403.74	\$407.77	\$407.77
43	43	\$468.85	\$421.56	\$421.56	\$425.77	\$425.77	\$417.34	\$417.34	\$413.49	\$413.49	\$417.62	\$417.62
44	44	\$482.67	\$433.98	\$433.98	\$438.32	\$438.32	\$429.64	\$429.64	\$425.68	\$425.68	\$429.93	\$429.93
45	45	\$498.91	\$448.59	\$448.59	\$453.07	\$453.07	\$444.10	\$444.10	\$440.00	\$440.00	\$444.40	\$444.40
46	46	\$518.25	\$465.98	\$465.98	\$470.64	\$470.64	\$461.32	\$461.32	\$457.06	\$457.06	\$461.63	\$461.63
47	47	\$540.02	\$485.55	\$485.55	\$490.41	\$490.41	\$480.70	\$480.70	\$476.26	\$476.26	\$481.02	\$481.02
48	48	\$564.90	\$507.92	\$507.92	\$513.00	\$513.00	\$502.84	\$502.84	\$498.20	\$498.20	\$503.18	\$503.18
49	49	\$589.43	\$529.98	\$529.98	\$535.28	\$535.28	\$524.68	\$524.68	\$519.83	\$519.83	\$525.03	\$525.03
50	50	\$617.07	\$554.83	\$554.83	\$560.38	\$560.38	\$549.28	\$549.28	\$544.21	\$544.21	\$549.65	\$549.65
51	51	\$644.36	\$579.37	\$579.37	\$585.16	\$585.16	\$573.58	\$573.58	\$568.28	\$568.28	\$573.96	\$573.96
52	52	\$674.42	\$606.40	\$606.40	\$612.46	\$612.46	\$600.33	\$600.33	\$594.79	\$594.79	\$600.74	\$600.74
53	53	\$704.83	\$633.74	\$633.74	\$640.07	\$640.07	\$627.40	\$627.40	\$621.60	\$621.60	\$627.82	\$627.82
54	54	\$737.65	\$663.25	\$663.25	\$669.88	\$669.88	\$656.62	\$656.62	\$650.55	\$650.55	\$657.05	\$657.05
55	55	\$770.47	\$692.76	\$692.76	\$699.69	\$699.69	\$685.83	\$685.83	\$679.50	\$679.50	\$686.29	\$686.29
56	56	\$806.06	\$724.76	\$724.76	\$732.00	\$732.00	\$717.51	\$717.51	\$710.88	\$710.88	\$717.99	\$717.99
57	57	\$841.99	\$757.07	\$757.07	\$764.64	\$764.64	\$749.49	\$749.49	\$742.57	\$742.57	\$750.00	\$750.00
58	58	\$880.34	\$791.55	\$791.55	\$799.46	\$799.46	\$783.63	\$783.63	\$776.39	\$776.39	\$784.16	\$784.16
59	59	\$899.34	\$808.63	\$808.63	\$816.72	\$816.72	\$800.55	\$800.55	\$793.15	\$793.15	\$801.08	\$801.08
60	60	\$937.69	\$843.12	\$843.12	\$851.55	\$851.55	\$834.69	\$834.69	\$826.97	\$826.97	\$835.24	\$835.24
61	61	\$970.86	\$872.94	\$872.94	\$881.67	\$881.67	\$864.21	\$864.21	\$856.23	\$856.23	\$864.79	\$864.79
62	62	\$992.63	\$892.51	\$892.51	\$901.44	\$901.44	\$883.59	\$883.59	\$875.42	\$875.42	\$884.18	\$884.18
63	63	\$1,019.92	\$917.05	\$917.05	\$926.22	\$926.22	\$907.88	\$907.88	\$899.49	\$899.49	\$908.49	\$908.49
64+	64+	\$1,036.50	\$931.95	\$931.95	\$941.27	\$941.27	\$922.64	\$922.64	\$914.12	\$914.12	\$923.25	\$923.25

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

HIOS Plan ID (On Exchange)=>		53789PA0090011		53789PA0090004		53789PA0090004		53789PA0090004	
HIOS Plan ID (Off Exchange)=>		53789PA0090011		53789PA0090004		53789PA0090004		53789PA0090004	
Form # =>		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG	
Rating Area =>		9		6		7		9	
Counties Excluded in Rating Area =>		None		None		None		None	
Network =>		HMO		HMO		HMO		HMO	
Metal =>		Silver		Bronze		Bronze		Bronze	
Plan Name =>		Silver HMO 4000/0/35 Rx 250		Bronze HMO 7000/0/60 Combined		Bronze HMO 7000/0/60 Combined		Bronze HMO 7000/0/60 Combined	
Deductible =>		\$4000 /\$250 Med/Rx		\$7000 Med/Rx Combined		\$7000 Med/Rx Combined		\$7000 Med/Rx Combined	
Coinsurance =>		0%		0%		0%		0%	
Copays =>		\$35/\$65/\$350 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER	
OOP Maximum =>		\$6550 Med/Rx Combined		\$7150 Med/Rx Combined		\$7150 Med/Rx Combined		\$7150 Med/Rx Combined	
Pediatric Dental (Yes/No) =>		Yes		Yes		Yes		Yes	
Age Band		Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0	0 - 20	\$191.55	\$191.55	\$158.19	\$158.19	\$159.77	\$159.77	\$156.61	\$156.61
21	21	\$301.66	\$301.66	\$249.12	\$249.12	\$251.61	\$251.61	\$246.63	\$246.63
22	22	\$301.66	\$301.66	\$249.12	\$249.12	\$251.61	\$251.61	\$246.63	\$246.63
23	23	\$301.66	\$301.66	\$249.12	\$249.12	\$251.61	\$251.61	\$246.63	\$246.63
24	24	\$301.66	\$301.66	\$249.12	\$249.12	\$251.61	\$251.61	\$246.63	\$246.63
25	25	\$302.87	\$302.87	\$250.12	\$250.12	\$252.62	\$252.62	\$247.62	\$247.62
26	26	\$308.90	\$308.90	\$255.10	\$255.10	\$257.65	\$257.65	\$252.55	\$252.55
27	27	\$316.14	\$316.14	\$261.08	\$261.08	\$263.69	\$263.69	\$258.47	\$258.47
28	28	\$327.90	\$327.90	\$270.79	\$270.79	\$273.50	\$273.50	\$268.09	\$268.09
29	29	\$337.56	\$337.56	\$278.77	\$278.77	\$281.55	\$281.55	\$275.98	\$275.98
30	30	\$342.38	\$342.38	\$282.75	\$282.75	\$285.58	\$285.58	\$279.92	\$279.92
31	31	\$349.62	\$349.62	\$288.73	\$288.73	\$291.62	\$291.62	\$285.84	\$285.84
32	32	\$356.86	\$356.86	\$294.71	\$294.71	\$297.66	\$297.66	\$291.76	\$291.76
33	33	\$361.39	\$361.39	\$298.45	\$298.45	\$301.43	\$301.43	\$295.46	\$295.46
34	34	\$366.21	\$366.21	\$302.43	\$302.43	\$305.46	\$305.46	\$299.41	\$299.41
35	35	\$368.63	\$368.63	\$304.42	\$304.42	\$307.47	\$307.47	\$301.38	\$301.38
36	36	\$371.04	\$371.04	\$306.42	\$306.42	\$309.48	\$309.48	\$303.35	\$303.35
37	37	\$373.45	\$373.45	\$308.41	\$308.41	\$311.49	\$311.49	\$305.33	\$305.33
38	38	\$375.87	\$375.87	\$310.40	\$310.40	\$313.51	\$313.51	\$307.30	\$307.30
39	39	\$380.69	\$380.69	\$314.39	\$314.39	\$317.53	\$317.53	\$311.25	\$311.25
40	40	\$385.52	\$385.52	\$318.38	\$318.38	\$321.56	\$321.56	\$315.19	\$315.19
41	41	\$392.76	\$392.76	\$324.35	\$324.35	\$327.60	\$327.60	\$321.11	\$321.11
42	42	\$399.70	\$399.70	\$330.08	\$330.08	\$333.39	\$333.39	\$326.78	\$326.78
43	43	\$409.35	\$409.35	\$338.06	\$338.06	\$341.44	\$341.44	\$334.68	\$334.68
44	44	\$421.42	\$421.42	\$348.02	\$348.02	\$351.50	\$351.50	\$344.54	\$344.54
45	45	\$435.60	\$435.60	\$359.73	\$359.73	\$363.33	\$363.33	\$356.13	\$356.13
46	46	\$452.49	\$452.49	\$373.68	\$373.68	\$377.42	\$377.42	\$369.94	\$369.94
47	47	\$471.49	\$471.49	\$389.37	\$389.37	\$393.27	\$393.27	\$385.48	\$385.48
48	48	\$493.21	\$493.21	\$407.31	\$407.31	\$411.38	\$411.38	\$403.24	\$403.24
49	49	\$514.63	\$514.63	\$425.00	\$425.00	\$429.25	\$429.25	\$420.75	\$420.75
50	50	\$538.76	\$538.76	\$444.93	\$444.93	\$449.38	\$449.38	\$440.48	\$440.48
51	51	\$562.60	\$562.60	\$464.61	\$464.61	\$469.26	\$469.26	\$459.96	\$459.96
52	52	\$588.84	\$588.84	\$486.28	\$486.28	\$491.15	\$491.15	\$481.42	\$481.42
53	53	\$615.39	\$615.39	\$508.21	\$508.21	\$513.29	\$513.29	\$503.12	\$503.12
54	54	\$644.04	\$644.04	\$531.87	\$531.87	\$537.19	\$537.19	\$526.55	\$526.55
55	55	\$672.70	\$672.70	\$555.54	\$555.54	\$561.09	\$561.09	\$549.98	\$549.98
56	56	\$703.77	\$703.77	\$581.20	\$581.20	\$587.01	\$587.01	\$575.39	\$575.39
57	57	\$735.14	\$735.14	\$607.11	\$607.11	\$613.18	\$613.18	\$601.03	\$601.03
58	58	\$768.63	\$768.63	\$634.76	\$634.76	\$641.11	\$641.11	\$628.41	\$628.41
59	59	\$785.22	\$785.22	\$648.46	\$648.46	\$654.94	\$654.94	\$641.98	\$641.98
60	60	\$818.70	\$818.70	\$676.11	\$676.11	\$682.87	\$682.87	\$669.35	\$669.35
61	61	\$847.66	\$847.66	\$700.03	\$700.03	\$707.03	\$707.03	\$693.03	\$693.03
62	62	\$866.67	\$866.67	\$715.72	\$715.72	\$722.88	\$722.88	\$708.57	\$708.57
63	63	\$890.50	\$890.50	\$735.40	\$735.40	\$742.76	\$742.76	\$728.05	\$728.05
64+	64+	\$904.97	\$904.97	\$747.35	\$747.35	\$754.82	\$754.82	\$739.88	\$739.88

Company Name: Keystone Health Plan Central
Market: Small Group
Product: HMO
Effective Date of Rates:

April 1, 2017

Ending date of Rates:

June 30, 2017

HIOS Plan ID (On Exchange)=>		53789PA0090007		53789PA0090007		53789PA0090007		53789PA0090008		53789PA0090008	
HIOS Plan ID (Off Exchange)=>		53789PA0090007		53789PA0090007		53789PA0090007		53789PA0090008		53789PA0090008	
Form # =>		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG	
Rating Area =>		6		7		9		6		7	
Counties Excluded in Rating Area =>		None		None		None		None		None	
Network =>		HMO		HMO		HMO		HMO		HMO	
Metal =>		Gold		Gold		Gold		Gold		Gold	
Plan Name =>		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 0		Gold HMO 2000/0/30 Rx 0	
Deductible =>		\$2000 /\$250 Med/Rx		\$2000 /\$250 Med/Rx		\$2000 /\$250 Med/Rx		\$2000 /\$0 Med/Rx		\$2000 /\$0 Med/Rx	
Coinsurance =>		0%		0%		0%		0%		0%	
Copays =>		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER	
OOP Maximum =>		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined	
Pediatric Dental (Yes/No) =>		Yes		Yes		Yes		Yes		Yes	
Age Band		Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0	0 - 20	\$222.02	\$222.02	\$224.24	\$224.24	\$219.80	\$219.80	\$225.88	\$225.88	\$228.13	\$228.13
21	21	\$349.64	\$349.64	\$353.14	\$353.14	\$346.14	\$346.14	\$355.71	\$355.71	\$359.27	\$359.27
22	22	\$349.64	\$349.64	\$353.14	\$353.14	\$346.14	\$346.14	\$355.71	\$355.71	\$359.27	\$359.27
23	23	\$349.64	\$349.64	\$353.14	\$353.14	\$346.14	\$346.14	\$355.71	\$355.71	\$359.27	\$359.27
24	24	\$349.64	\$349.64	\$353.14	\$353.14	\$346.14	\$346.14	\$355.71	\$355.71	\$359.27	\$359.27
25	25	\$351.04	\$351.04	\$354.55	\$354.55	\$347.53	\$347.53	\$357.13	\$357.13	\$360.70	\$360.70
26	26	\$358.03	\$358.03	\$361.61	\$361.61	\$354.45	\$354.45	\$364.25	\$364.25	\$367.89	\$367.89
27	27	\$366.42	\$366.42	\$370.09	\$370.09	\$362.76	\$362.76	\$372.78	\$372.78	\$376.51	\$376.51
28	28	\$380.06	\$380.06	\$383.86	\$383.86	\$376.26	\$376.26	\$386.66	\$386.66	\$390.52	\$390.52
29	29	\$391.25	\$391.25	\$395.16	\$395.16	\$387.33	\$387.33	\$398.04	\$398.04	\$402.02	\$402.02
30	30	\$396.84	\$396.84	\$400.81	\$400.81	\$392.87	\$392.87	\$403.73	\$403.73	\$407.77	\$407.77
31	31	\$405.23	\$405.23	\$409.29	\$409.29	\$401.18	\$401.18	\$412.27	\$412.27	\$416.39	\$416.39
32	32	\$413.62	\$413.62	\$417.76	\$417.76	\$409.49	\$409.49	\$420.80	\$420.80	\$425.01	\$425.01
33	33	\$418.87	\$418.87	\$423.06	\$423.06	\$414.68	\$414.68	\$426.14	\$426.14	\$430.40	\$430.40
34	34	\$424.46	\$424.46	\$428.71	\$428.71	\$420.22	\$420.22	\$431.83	\$431.83	\$436.15	\$436.15
35	35	\$427.26	\$427.26	\$431.53	\$431.53	\$422.99	\$422.99	\$434.68	\$434.68	\$439.02	\$439.02
36	36	\$430.06	\$430.06	\$434.36	\$434.36	\$425.76	\$425.76	\$437.52	\$437.52	\$441.90	\$441.90
37	37	\$432.85	\$432.85	\$437.18	\$437.18	\$428.53	\$428.53	\$440.37	\$440.37	\$444.77	\$444.77
38	38	\$435.65	\$435.65	\$440.01	\$440.01	\$431.29	\$431.29	\$443.21	\$443.21	\$447.65	\$447.65
39	39	\$441.25	\$441.25	\$445.66	\$445.66	\$436.83	\$436.83	\$448.91	\$448.91	\$453.40	\$453.40
40	40	\$446.84	\$446.84	\$451.31	\$451.31	\$442.37	\$442.37	\$454.60	\$454.60	\$459.14	\$459.14
41	41	\$455.23	\$455.23	\$459.78	\$459.78	\$450.68	\$450.68	\$463.13	\$463.13	\$467.77	\$467.77
42	42	\$463.27	\$463.27	\$467.91	\$467.91	\$458.64	\$458.64	\$471.32	\$471.32	\$476.03	\$476.03
43	43	\$474.46	\$474.46	\$479.21	\$479.21	\$469.72	\$469.72	\$482.70	\$482.70	\$487.53	\$487.53
44	44	\$488.45	\$488.45	\$493.33	\$493.33	\$483.56	\$483.56	\$496.93	\$496.93	\$501.90	\$501.90
45	45	\$504.88	\$504.88	\$509.93	\$509.93	\$499.83	\$499.83	\$513.65	\$513.65	\$518.78	\$518.78
46	46	\$524.46	\$524.46	\$529.70	\$529.70	\$519.22	\$519.22	\$533.57	\$533.57	\$538.90	\$538.90
47	47	\$546.49	\$546.49	\$551.95	\$551.95	\$541.02	\$541.02	\$555.97	\$555.97	\$561.53	\$561.53
48	48	\$571.66	\$571.66	\$577.38	\$577.38	\$565.94	\$565.94	\$581.59	\$581.59	\$587.40	\$587.40
49	49	\$596.49	\$596.49	\$602.45	\$602.45	\$590.52	\$590.52	\$606.84	\$606.84	\$612.91	\$612.91
50	50	\$624.46	\$624.46	\$630.70	\$630.70	\$618.21	\$618.21	\$635.30	\$635.30	\$641.65	\$641.65
51	51	\$652.08	\$652.08	\$658.60	\$658.60	\$645.56	\$645.56	\$663.40	\$663.40	\$670.03	\$670.03
52	52	\$682.50	\$682.50	\$689.32	\$689.32	\$675.67	\$675.67	\$694.35	\$694.35	\$701.29	\$701.29
53	53	\$713.27	\$713.27	\$720.40	\$720.40	\$706.13	\$706.13	\$725.65	\$725.65	\$732.90	\$732.90
54	54	\$746.48	\$746.48	\$753.95	\$753.95	\$739.02	\$739.02	\$759.44	\$759.44	\$767.04	\$767.04
55	55	\$779.70	\$779.70	\$787.49	\$787.49	\$771.90	\$771.90	\$793.23	\$793.23	\$801.17	\$801.17
56	56	\$815.71	\$815.71	\$823.87	\$823.87	\$807.55	\$807.55	\$829.87	\$829.87	\$838.17	\$838.17
57	57	\$852.07	\$852.07	\$860.59	\$860.59	\$843.55	\$843.55	\$866.87	\$866.87	\$875.53	\$875.53
58	58	\$890.88	\$890.88	\$899.79	\$899.79	\$881.97	\$881.97	\$906.35	\$906.35	\$915.41	\$915.41
59	59	\$910.11	\$910.11	\$919.21	\$919.21	\$901.01	\$901.01	\$925.91	\$925.91	\$935.17	\$935.17
60	60	\$948.92	\$948.92	\$958.41	\$958.41	\$939.43	\$939.43	\$965.40	\$965.40	\$975.05	\$975.05
61	61	\$982.49	\$982.49	\$992.31	\$992.31	\$972.66	\$972.66	\$999.55	\$999.55	\$1,009.54	\$1,009.54
62	62	\$1,004.52	\$1,004.52	\$1,014.56	\$1,014.56	\$994.47	\$994.47	\$1,021.95	\$1,021.95	\$1,032.17	\$1,032.17
63	63	\$1,032.14	\$1,032.14	\$1,042.46	\$1,042.46	\$1,021.82	\$1,021.82	\$1,050.06	\$1,050.06	\$1,060.56	\$1,060.56
64+	64+	\$1,048.91	\$1,048.91	\$1,059.41	\$1,059.41	\$1,038.42	\$1,038.42	\$1,067.12	\$1,067.12	\$1,077.80	\$1,077.80

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

HIOS Plan ID (On Exchange)=>		53789PA0090008		53789PA0090012		53789PA0090012		53789PA0090012		53789PA0090011	
HIOS Plan ID (Off Exchange)=>		53789PA0090008		53789PA0090012		53789PA0090012		53789PA0090012		53789PA0090011	
Form # =>		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG	
Rating Area =>		9		6		7		9		6	
Counties Excluded in Rating Area =>		None		None		None		None		None	
Network =>		HMO		HMO		HMO		HMO		HMO	
Metal =>		Gold		Silver		Silver		Silver		Silver	
Plan Name =>		Gold HMO 2000/0/30 Rx 0		Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 250	
Deductible =>		\$2000 /\$0 Med/Rx		\$4000 /\$0 Med/Rx		\$4000 /\$0 Med/Rx		\$4000 /\$0 Med/Rx		\$4000 /\$250 Med/Rx	
Coinsurance =>		0%		0%		0%		0%		0%	
Copays =>		\$30/\$50/\$200 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER	
OOP Maximum =>		\$6350 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined	
Pediatric Dental (Yes/No) =>		Yes		Yes		Yes		Yes		Yes	
Age Band		Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0	0 - 20	\$223.62	\$223.62	\$201.06	\$201.06	\$203.07	\$203.07	\$199.05	\$199.05	\$197.21	\$197.21
21	21	\$352.15	\$352.15	\$316.63	\$316.63	\$319.80	\$319.80	\$313.46	\$313.46	\$310.56	\$310.56
22	22	\$352.15	\$352.15	\$316.63	\$316.63	\$319.80	\$319.80	\$313.46	\$313.46	\$310.56	\$310.56
23	23	\$352.15	\$352.15	\$316.63	\$316.63	\$319.80	\$319.80	\$313.46	\$313.46	\$310.56	\$310.56
24	24	\$352.15	\$352.15	\$316.63	\$316.63	\$319.80	\$319.80	\$313.46	\$313.46	\$310.56	\$310.56
25	25	\$353.56	\$353.56	\$317.90	\$317.90	\$321.08	\$321.08	\$314.72	\$314.72	\$311.80	\$311.80
26	26	\$360.60	\$360.60	\$324.23	\$324.23	\$327.47	\$327.47	\$320.99	\$320.99	\$318.01	\$318.01
27	27	\$369.06	\$369.06	\$331.83	\$331.83	\$335.15	\$335.15	\$328.51	\$328.51	\$325.47	\$325.47
28	28	\$382.79	\$382.79	\$344.18	\$344.18	\$347.62	\$347.62	\$340.74	\$340.74	\$337.58	\$337.58
29	29	\$394.06	\$394.06	\$354.31	\$354.31	\$357.85	\$357.85	\$350.77	\$350.77	\$347.52	\$347.52
30	30	\$399.69	\$399.69	\$359.38	\$359.38	\$362.97	\$362.97	\$355.78	\$355.78	\$352.49	\$352.49
31	31	\$408.15	\$408.15	\$366.97	\$366.97	\$370.64	\$370.64	\$363.30	\$363.30	\$359.94	\$359.94
32	32	\$416.60	\$416.60	\$374.57	\$374.57	\$378.32	\$378.32	\$370.83	\$370.83	\$367.39	\$367.39
33	33	\$421.88	\$421.88	\$379.32	\$379.32	\$383.12	\$383.12	\$375.53	\$375.53	\$372.05	\$372.05
34	34	\$427.51	\$427.51	\$384.39	\$384.39	\$388.23	\$388.23	\$380.54	\$380.54	\$377.02	\$377.02
35	35	\$430.33	\$430.33	\$386.92	\$386.92	\$390.79	\$390.79	\$383.05	\$383.05	\$379.50	\$379.50
36	36	\$433.15	\$433.15	\$389.45	\$389.45	\$393.35	\$393.35	\$385.56	\$385.56	\$381.99	\$381.99
37	37	\$435.97	\$435.97	\$391.99	\$391.99	\$395.91	\$395.91	\$388.07	\$388.07	\$384.47	\$384.47
38	38	\$438.78	\$438.78	\$394.52	\$394.52	\$398.47	\$398.47	\$390.58	\$390.58	\$386.96	\$386.96
39	39	\$444.42	\$444.42	\$399.59	\$399.59	\$403.58	\$403.58	\$395.59	\$395.59	\$391.93	\$391.93
40	40	\$450.05	\$450.05	\$404.65	\$404.65	\$408.70	\$408.70	\$400.61	\$400.61	\$396.90	\$396.90
41	41	\$458.50	\$458.50	\$412.25	\$412.25	\$416.37	\$416.37	\$408.13	\$408.13	\$404.35	\$404.35
42	42	\$466.60	\$466.60	\$419.53	\$419.53	\$423.73	\$423.73	\$415.34	\$415.34	\$411.49	\$411.49
43	43	\$477.87	\$477.87	\$429.67	\$429.67	\$433.96	\$433.96	\$425.37	\$425.37	\$421.43	\$421.43
44	44	\$491.96	\$491.96	\$442.33	\$442.33	\$446.76	\$446.76	\$437.91	\$437.91	\$433.85	\$433.85
45	45	\$508.51	\$508.51	\$457.21	\$457.21	\$461.79	\$461.79	\$452.64	\$452.64	\$448.45	\$448.45
46	46	\$528.23	\$528.23	\$474.94	\$474.94	\$479.69	\$479.69	\$470.20	\$470.20	\$465.84	\$465.84
47	47	\$550.41	\$550.41	\$494.89	\$494.89	\$499.84	\$499.84	\$489.94	\$489.94	\$485.41	\$485.41
48	48	\$575.77	\$575.77	\$517.69	\$517.69	\$522.87	\$522.87	\$512.51	\$512.51	\$507.77	\$507.77
49	49	\$600.77	\$600.77	\$540.17	\$540.17	\$545.57	\$545.57	\$534.77	\$534.77	\$529.82	\$529.82
50	50	\$628.95	\$628.95	\$565.50	\$565.50	\$571.16	\$571.16	\$559.85	\$559.85	\$554.66	\$554.66
51	51	\$656.77	\$656.77	\$590.51	\$590.51	\$596.42	\$596.42	\$584.61	\$584.61	\$579.19	\$579.19
52	52	\$687.40	\$687.40	\$618.06	\$618.06	\$624.24	\$624.24	\$611.88	\$611.88	\$606.21	\$606.21
53	53	\$718.39	\$718.39	\$645.93	\$645.93	\$652.38	\$652.38	\$639.47	\$639.47	\$633.54	\$633.54
54	54	\$751.85	\$751.85	\$676.01	\$676.01	\$682.77	\$682.77	\$669.24	\$669.24	\$663.05	\$663.05
55	55	\$785.30	\$785.30	\$706.08	\$706.08	\$713.15	\$713.15	\$699.02	\$699.02	\$692.55	\$692.55
56	56	\$821.57	\$821.57	\$738.70	\$738.70	\$746.08	\$746.08	\$731.31	\$731.31	\$724.54	\$724.54
57	57	\$858.20	\$858.20	\$771.63	\$771.63	\$779.34	\$779.34	\$763.91	\$763.91	\$756.83	\$756.83
58	58	\$897.29	\$897.29	\$806.77	\$806.77	\$814.84	\$814.84	\$798.71	\$798.71	\$791.31	\$791.31
59	59	\$916.65	\$916.65	\$824.19	\$824.19	\$832.43	\$832.43	\$815.95	\$815.95	\$808.39	\$808.39
60	60	\$955.74	\$955.74	\$859.33	\$859.33	\$867.93	\$867.93	\$850.74	\$850.74	\$842.86	\$842.86
61	61	\$989.55	\$989.55	\$889.73	\$889.73	\$898.63	\$898.63	\$880.83	\$880.83	\$872.67	\$872.67
62	62	\$1,011.74	\$1,011.74	\$909.68	\$909.68	\$918.77	\$918.77	\$900.58	\$900.58	\$892.24	\$892.24
63	63	\$1,039.56	\$1,039.56	\$934.69	\$934.69	\$944.04	\$944.04	\$925.34	\$925.34	\$916.77	\$916.77
64+	64+	\$1,056.45	\$1,056.45	\$949.88	\$949.88	\$959.39	\$959.39	\$940.38	\$940.38	\$931.67	\$931.67

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

	HIOS Plan ID (On Exchange)=>	53789PA0090011		53789PA0090011		53789PA0090004		53789PA0090004		53789PA0090004	
	HIOS Plan ID (Off Exchange)=>	53789PA0090011		53789PA0090011		53789PA0090004		53789PA0090004		53789PA0090004	
	Form # =>	C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG	
	Rating Area =>	7		9		6		7		9	
	Counties Excluded in Rating Area =>	None		None		None		None		None	
	Network =>	HMO		HMO		HMO		HMO		HMO	
	Metal =>	Silver		Silver		Bronze		Bronze		Bronze	
	Plan Name =>	Silver HMO 4000/0/35 Rx 250		Silver HMO 4000/0/35 Rx 250		Bronze HMO 7000/0/60 Combined		Bronze HMO 7000/0/60 Combined		Bronze HMO 7000/0/60 Combined	
	Deductible =>	\$4000 /\$250 Med/Rx		\$4000 /\$250 Med/Rx		\$7000 Med/Rx Combined		\$7000 Med/Rx Combined		\$7000 Med/Rx Combined	
	Coinsurance =>	0%		0%		0%		0%		0%	
	Copays =>	\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER	
	OOP Maximum =>	\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$7150 Med/Rx Combined		\$7150 Med/Rx Combined		\$7150 Med/Rx Combined	
	Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes	
	Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0	0 - 20	\$199.18	\$199.18	\$195.23	\$195.23	\$161.23	\$161.23	\$162.84	\$162.84	\$159.61	\$159.61
21	21	\$313.67	\$313.67	\$307.45	\$307.45	\$253.90	\$253.90	\$256.44	\$256.44	\$251.36	\$251.36
22	22	\$313.67	\$313.67	\$307.45	\$307.45	\$253.90	\$253.90	\$256.44	\$256.44	\$251.36	\$251.36
23	23	\$313.67	\$313.67	\$307.45	\$307.45	\$253.90	\$253.90	\$256.44	\$256.44	\$251.36	\$251.36
24	24	\$313.67	\$313.67	\$307.45	\$307.45	\$253.90	\$253.90	\$256.44	\$256.44	\$251.36	\$251.36
25	25	\$314.92	\$314.92	\$308.68	\$308.68	\$254.92	\$254.92	\$257.46	\$257.46	\$252.37	\$252.37
26	26	\$321.19	\$321.19	\$314.83	\$314.83	\$259.99	\$259.99	\$262.59	\$262.59	\$257.39	\$257.39
27	27	\$328.72	\$328.72	\$322.21	\$322.21	\$266.09	\$266.09	\$268.75	\$268.75	\$263.43	\$263.43
28	28	\$340.95	\$340.95	\$334.20	\$334.20	\$275.99	\$275.99	\$278.75	\$278.75	\$273.23	\$273.23
29	29	\$350.99	\$350.99	\$344.04	\$344.04	\$284.11	\$284.11	\$286.96	\$286.96	\$281.27	\$281.27
30	30	\$356.01	\$356.01	\$348.96	\$348.96	\$288.18	\$288.18	\$291.06	\$291.06	\$285.29	\$285.29
31	31	\$363.54	\$363.54	\$356.34	\$356.34	\$294.27	\$294.27	\$297.21	\$297.21	\$291.33	\$291.33
32	32	\$371.07	\$371.07	\$363.72	\$363.72	\$300.36	\$300.36	\$303.37	\$303.37	\$297.36	\$297.36
33	33	\$375.77	\$375.77	\$368.33	\$368.33	\$304.17	\$304.17	\$307.21	\$307.21	\$301.13	\$301.13
34	34	\$380.79	\$380.79	\$373.25	\$373.25	\$308.23	\$308.23	\$311.32	\$311.32	\$305.15	\$305.15
35	35	\$383.30	\$383.30	\$375.71	\$375.71	\$310.27	\$310.27	\$313.37	\$313.37	\$307.16	\$307.16
36	36	\$385.81	\$385.81	\$378.17	\$378.17	\$312.30	\$312.30	\$315.42	\$315.42	\$309.17	\$309.17
37	37	\$388.32	\$388.32	\$380.63	\$380.63	\$314.33	\$314.33	\$317.47	\$317.47	\$311.18	\$311.18
38	38	\$390.83	\$390.83	\$383.09	\$383.09	\$316.36	\$316.36	\$319.52	\$319.52	\$313.20	\$313.20
39	39	\$395.85	\$395.85	\$388.01	\$388.01	\$320.42	\$320.42	\$323.63	\$323.63	\$317.22	\$317.22
40	40	\$400.86	\$400.86	\$392.93	\$392.93	\$324.48	\$324.48	\$327.73	\$327.73	\$321.24	\$321.24
41	41	\$408.39	\$408.39	\$400.31	\$400.31	\$330.58	\$330.58	\$333.88	\$333.88	\$327.27	\$327.27
42	42	\$415.61	\$415.61	\$407.38	\$407.38	\$336.42	\$336.42	\$339.78	\$339.78	\$333.05	\$333.05
43	43	\$425.64	\$425.64	\$417.22	\$417.22	\$344.54	\$344.54	\$347.99	\$347.99	\$341.10	\$341.10
44	44	\$438.19	\$438.19	\$429.51	\$429.51	\$354.70	\$354.70	\$358.25	\$358.25	\$351.15	\$351.15
45	45	\$452.93	\$452.93	\$443.96	\$443.96	\$366.63	\$366.63	\$370.30	\$370.30	\$362.97	\$362.97
46	46	\$470.50	\$470.50	\$461.18	\$461.18	\$380.85	\$380.85	\$384.66	\$384.66	\$377.04	\$377.04
47	47	\$490.26	\$490.26	\$480.55	\$480.55	\$396.85	\$396.85	\$400.81	\$400.81	\$392.88	\$392.88
48	48	\$512.84	\$512.84	\$502.69	\$502.69	\$415.13	\$415.13	\$419.28	\$419.28	\$410.98	\$410.98
49	49	\$535.11	\$535.11	\$524.52	\$524.52	\$433.15	\$433.15	\$437.48	\$437.48	\$428.82	\$428.82
50	50	\$560.21	\$560.21	\$549.11	\$549.11	\$453.47	\$453.47	\$458.00	\$458.00	\$448.93	\$448.93
51	51	\$584.99	\$584.99	\$573.40	\$573.40	\$473.52	\$473.52	\$478.26	\$478.26	\$468.79	\$468.79
52	52	\$612.28	\$612.28	\$600.15	\$600.15	\$495.61	\$495.61	\$500.57	\$500.57	\$490.66	\$490.66
53	53	\$639.88	\$639.88	\$627.21	\$627.21	\$517.96	\$517.96	\$523.14	\$523.14	\$512.78	\$512.78
54	54	\$669.68	\$669.68	\$656.42	\$656.42	\$542.08	\$542.08	\$547.50	\$547.50	\$536.66	\$536.66
55	55	\$699.47	\$699.47	\$685.62	\$685.62	\$566.20	\$566.20	\$571.86	\$571.86	\$560.54	\$560.54
56	56	\$731.78	\$731.78	\$717.29	\$717.29	\$592.35	\$592.35	\$598.27	\$598.27	\$586.43	\$586.43
57	57	\$764.40	\$764.40	\$749.27	\$749.27	\$618.75	\$618.75	\$624.94	\$624.94	\$612.57	\$612.57
58	58	\$799.22	\$799.22	\$783.39	\$783.39	\$646.94	\$646.94	\$653.41	\$653.41	\$640.47	\$640.47
59	59	\$816.47	\$816.47	\$800.30	\$800.30	\$660.90	\$660.90	\$667.51	\$667.51	\$654.29	\$654.29
60	60	\$851.29	\$851.29	\$834.43	\$834.43	\$689.08	\$689.08	\$695.98	\$695.98	\$682.19	\$682.19
61	61	\$881.40	\$881.40	\$863.95	\$863.95	\$713.46	\$713.46	\$720.59	\$720.59	\$706.32	\$706.32
62	62	\$901.16	\$901.16	\$883.32	\$883.32	\$729.45	\$729.45	\$736.75	\$736.75	\$722.16	\$722.16
63	63	\$925.94	\$925.94	\$907.61	\$907.61	\$749.51	\$749.51	\$757.01	\$757.01	\$742.02	\$742.02
64+	64+	\$941.00	\$941.00	\$922.35	\$922.35	\$761.69	\$761.69	\$769.31	\$769.31	\$754.07	\$754.07

Company Name: Keystone Health Plan Central
Market: Small Group
Product: HMO
Effective Date of Rates:

July 1, 2017

Ending date of Rates:

September 30, 2017

HIOS Plan ID (On Exchange)=>		53789PA0090007		53789PA0090007		53789PA0090007		53789PA0090008		53789PA0090008		53789PA0090008	
HIOS Plan ID (Off Exchange)=>		53789PA0090007		53789PA0090007		53789PA0090007		53789PA0090008		53789PA0090008		53789PA0090008	
Form # =>		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG	
Rating Area =>		6		7		9		6		7		7	
Counties Excluded in Rating Area =>		None		None		None		None		None		None	
Network =>		PPO		PPO		PPO		PPO		PPO		PPO	
Metal =>		Gold		Gold		Gold		Gold		Gold		Gold	
Plan Name =>		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 0		Gold HMO 2000/0/30 Rx 0		Gold HMO 2000/0/30 Rx 0	
Deductible =>		\$2000 /\$250 Med/Rx		\$2000 /\$250 Med/Rx		\$2000 /\$250 Med/Rx		\$2000 /\$0 Med/Rx		\$2000 /\$0 Med/Rx		\$2000 /\$0 Med/Rx	
Coinsurance =>		0%		0%		0%		0%		0%		0%	
Copays =>		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER	
OOP Maximum =>		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined	
Pediatric Dental (Yes/No) =>		Yes		Yes		Yes		Yes		Yes		Yes	
Age Band		Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0	0 - 20	\$226.29	\$226.29	\$228.56	\$228.56	\$224.03	\$224.03	\$230.22	\$230.22	\$232.52	\$232.52	\$227.92	\$227.92
21	21	\$356.37	\$356.37	\$359.93	\$359.93	\$352.81	\$352.81	\$362.55	\$362.55	\$366.18	\$366.18	\$358.92	\$358.92
22	22	\$356.37	\$356.37	\$359.93	\$359.93	\$352.81	\$352.81	\$362.55	\$362.55	\$366.18	\$366.18	\$358.92	\$358.92
23	23	\$356.37	\$356.37	\$359.93	\$359.93	\$352.81	\$352.81	\$362.55	\$362.55	\$366.18	\$366.18	\$358.92	\$358.92
24	24	\$356.37	\$356.37	\$359.93	\$359.93	\$352.81	\$352.81	\$362.55	\$362.55	\$366.18	\$366.18	\$358.92	\$358.92
25	25	\$357.80	\$357.80	\$361.37	\$361.37	\$354.22	\$354.22	\$364.00	\$364.00	\$367.64	\$367.64	\$360.36	\$360.36
26	26	\$364.92	\$364.92	\$368.57	\$368.57	\$361.27	\$361.27	\$371.25	\$371.25	\$374.96	\$374.96	\$367.54	\$367.54
27	27	\$373.48	\$373.48	\$377.21	\$377.21	\$369.74	\$369.74	\$379.95	\$379.95	\$383.75	\$383.75	\$376.15	\$376.15
28	28	\$387.37	\$387.37	\$391.25	\$391.25	\$383.50	\$383.50	\$394.09	\$394.09	\$398.03	\$398.03	\$390.15	\$390.15
29	29	\$398.78	\$398.78	\$402.77	\$402.77	\$394.79	\$394.79	\$405.69	\$405.69	\$409.75	\$409.75	\$401.64	\$401.64
30	30	\$404.48	\$404.48	\$408.52	\$408.52	\$400.44	\$400.44	\$411.49	\$411.49	\$415.61	\$415.61	\$407.38	\$407.38
31	31	\$413.03	\$413.03	\$417.16	\$417.16	\$408.90	\$408.90	\$420.20	\$420.20	\$424.40	\$424.40	\$415.99	\$415.99
32	32	\$421.59	\$421.59	\$425.80	\$425.80	\$417.37	\$417.37	\$428.90	\$428.90	\$433.19	\$433.19	\$424.61	\$424.61
33	33	\$426.93	\$426.93	\$431.20	\$431.20	\$422.66	\$422.66	\$434.33	\$434.33	\$438.68	\$438.68	\$429.99	\$429.99
34	34	\$432.63	\$432.63	\$436.96	\$436.96	\$428.31	\$428.31	\$440.14	\$440.14	\$444.54	\$444.54	\$435.73	\$435.73
35	35	\$435.48	\$435.48	\$439.84	\$439.84	\$431.13	\$431.13	\$443.04	\$443.04	\$447.47	\$447.47	\$438.61	\$438.61
36	36	\$438.34	\$438.34	\$442.72	\$442.72	\$433.95	\$433.95	\$445.94	\$445.94	\$450.40	\$450.40	\$441.48	\$441.48
37	37	\$441.19	\$441.19	\$445.60	\$445.60	\$436.77	\$436.77	\$448.84	\$448.84	\$453.33	\$453.33	\$444.35	\$444.35
38	38	\$444.04	\$444.04	\$448.48	\$448.48	\$439.60	\$439.60	\$451.74	\$451.74	\$456.25	\$456.25	\$447.22	\$447.22
39	39	\$449.74	\$449.74	\$454.24	\$454.24	\$445.24	\$445.24	\$457.54	\$457.54	\$462.11	\$462.11	\$452.96	\$452.96
40	40	\$455.44	\$455.44	\$460.00	\$460.00	\$450.89	\$450.89	\$463.34	\$463.34	\$467.97	\$467.97	\$458.71	\$458.71
41	41	\$463.99	\$463.99	\$468.63	\$468.63	\$459.35	\$459.35	\$472.04	\$472.04	\$476.76	\$476.76	\$467.32	\$467.32
42	42	\$472.19	\$472.19	\$476.91	\$476.91	\$467.47	\$467.47	\$480.38	\$480.38	\$485.18	\$485.18	\$475.57	\$475.57
43	43	\$483.59	\$483.59	\$488.43	\$488.43	\$478.76	\$478.76	\$491.98	\$491.98	\$496.90	\$496.90	\$487.06	\$487.06
44	44	\$497.85	\$497.85	\$502.83	\$502.83	\$492.87	\$492.87	\$506.48	\$506.48	\$511.55	\$511.55	\$501.42	\$501.42
45	45	\$514.60	\$514.60	\$519.74	\$519.74	\$509.45	\$509.45	\$523.52	\$523.52	\$528.76	\$528.76	\$518.29	\$518.29
46	46	\$534.55	\$534.55	\$539.90	\$539.90	\$529.21	\$529.21	\$543.83	\$543.83	\$549.26	\$549.26	\$538.39	\$538.39
47	47	\$557.01	\$557.01	\$562.58	\$562.58	\$551.44	\$551.44	\$566.67	\$566.67	\$572.33	\$572.33	\$561.00	\$561.00
48	48	\$582.66	\$582.66	\$588.49	\$588.49	\$576.84	\$576.84	\$592.77	\$592.77	\$598.70	\$598.70	\$586.84	\$586.84
49	49	\$607.97	\$607.97	\$614.05	\$614.05	\$601.89	\$601.89	\$618.51	\$618.51	\$624.70	\$624.70	\$612.33	\$612.33
50	50	\$636.48	\$636.48	\$642.84	\$642.84	\$630.11	\$630.11	\$647.51	\$647.51	\$653.99	\$653.99	\$641.04	\$641.04
51	51	\$664.63	\$664.63	\$671.28	\$671.28	\$657.98	\$657.98	\$676.16	\$676.16	\$682.92	\$682.92	\$669.39	\$669.39
52	52	\$695.63	\$695.63	\$702.59	\$702.59	\$688.68	\$688.68	\$707.70	\$707.70	\$714.77	\$714.77	\$700.62	\$700.62
53	53	\$726.99	\$726.99	\$734.26	\$734.26	\$719.72	\$719.72	\$739.60	\$739.60	\$747.00	\$747.00	\$732.21	\$732.21
54	54	\$760.85	\$760.85	\$768.46	\$768.46	\$753.24	\$753.24	\$774.04	\$774.04	\$781.78	\$781.78	\$766.30	\$766.30
55	55	\$794.71	\$794.71	\$802.65	\$802.65	\$786.76	\$786.76	\$808.49	\$808.49	\$816.57	\$816.57	\$800.40	\$800.40
56	56	\$831.41	\$831.41	\$839.73	\$839.73	\$823.10	\$823.10	\$845.83	\$845.83	\$854.29	\$854.29	\$837.37	\$837.37
57	57	\$868.47	\$868.47	\$877.16	\$877.16	\$859.79	\$859.79	\$883.53	\$883.53	\$892.37	\$892.37	\$874.70	\$874.70
58	58	\$908.03	\$908.03	\$917.11	\$917.11	\$898.95	\$898.95	\$923.78	\$923.78	\$933.02	\$933.02	\$914.54	\$914.54
59	59	\$927.63	\$927.63	\$936.91	\$936.91	\$918.35	\$918.35	\$943.72	\$943.72	\$953.15	\$953.15	\$934.28	\$934.28
60	60	\$967.19	\$967.19	\$976.86	\$976.86	\$957.52	\$957.52	\$983.96	\$983.96	\$993.80	\$993.80	\$974.12	\$974.12
61	61	\$1,001.40	\$1,001.40	\$1,011.41	\$1,011.41	\$991.39	\$991.39	\$1,018.77	\$1,018.77	\$1,028.95	\$1,028.95	\$1,008.58	\$1,008.58
62	62	\$1,023.85	\$1,023.85	\$1,034.09	\$1,034.09	\$1,013.61	\$1,013.61	\$1,041.61	\$1,041.61	\$1,052.02	\$1,052.02	\$1,031.19	\$1,031.19
63	63	\$1,052.00	\$1,052.00	\$1,062.52	\$1,062.52	\$1,041.48	\$1,041.48	\$1,070.25	\$1,070.25	\$1,080.95	\$1,080.95	\$1,059.55	\$1,059.55
64+	64+	\$1,069.10	\$1,069.10	\$1,079.79	\$1,079.79	\$1,058.42	\$1,058.42	\$1,087.64	\$1,087.64	\$1,098.53	\$1,098.53	\$1,076.76	\$1,076.76

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

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HIOS Plan ID (On Exchange)=>		0090008	53789PA0090012		53789PA0090012		53789PA0090012		53789PA0090011		53789PA0090011	
HIOS Plan ID (Off Exchange)=>		0090008	53789PA0090012		53789PA0090012		53789PA0090012		53789PA0090011		53789PA0090011	
Form # =>		PC-SPG	C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG	
Rating Area =>		9	6		7		9		6		7	
Counties Excluded in Rating Area =>		ne	None		None		None		None		None	
Network =>		PO	PPO		PPO		PPO		PPO		PPO	
Metal =>		old	Silver		Silver		Silver		Silver		Silver	
Plan Name =>		00/0/30 Rx 0	Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 250		Silver HMO 4000/0/35 Rx 250	
Deductible =>		0 Med/Rx	\$4000 /\$0 Med/Rx		\$4000 /\$0 Med/Rx		\$4000 /\$0 Med/Rx		\$4000 /\$250 Med/Rx		\$4000 /\$250 Med/Rx	
Coinsurance =>		%	0%		0%		0%		0%		0%	
Copays =>		0 PCP/SPC/ER	\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER	
OOP Maximum =>		Rx Combined	\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined	
Pediatric Dental (Yes/No) =>		es	Yes		Yes		Yes		Yes		Yes	
Age Band		Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0	0 - 20	\$227.92	\$204.93	\$204.93	\$206.98	\$206.98	\$202.88	\$202.88	\$201.00	\$201.00	\$203.01	\$203.01
21	21	\$358.92	\$322.72	\$322.72	\$325.95	\$325.95	\$319.49	\$319.49	\$316.53	\$316.53	\$319.70	\$319.70
22	22	\$358.92	\$322.72	\$322.72	\$325.95	\$325.95	\$319.49	\$319.49	\$316.53	\$316.53	\$319.70	\$319.70
23	23	\$358.92	\$322.72	\$322.72	\$325.95	\$325.95	\$319.49	\$319.49	\$316.53	\$316.53	\$319.70	\$319.70
24	24	\$358.92	\$322.72	\$322.72	\$325.95	\$325.95	\$319.49	\$319.49	\$316.53	\$316.53	\$319.70	\$319.70
25	25	\$360.36	\$324.01	\$324.01	\$327.25	\$327.25	\$320.77	\$320.77	\$317.80	\$317.80	\$320.97	\$320.97
26	26	\$367.54	\$330.47	\$330.47	\$333.77	\$333.77	\$327.16	\$327.16	\$324.13	\$324.13	\$327.37	\$327.37
27	27	\$376.15	\$338.21	\$338.21	\$341.59	\$341.59	\$334.83	\$334.83	\$331.72	\$331.72	\$335.04	\$335.04
28	28	\$390.15	\$350.80	\$350.80	\$354.30	\$354.30	\$347.29	\$347.29	\$344.07	\$344.07	\$347.51	\$347.51
29	29	\$401.64	\$361.12	\$361.12	\$364.73	\$364.73	\$357.51	\$357.51	\$354.20	\$354.20	\$357.74	\$357.74
30	30	\$407.38	\$366.29	\$366.29	\$369.95	\$369.95	\$362.62	\$362.62	\$359.26	\$359.26	\$362.85	\$362.85
31	31	\$415.99	\$374.03	\$374.03	\$377.77	\$377.77	\$370.29	\$370.29	\$366.86	\$366.86	\$370.53	\$370.53
32	32	\$424.61	\$381.78	\$381.78	\$385.60	\$385.60	\$377.96	\$377.96	\$374.45	\$374.45	\$378.20	\$378.20
33	33	\$429.99	\$386.62	\$386.62	\$390.48	\$390.48	\$382.75	\$382.75	\$379.20	\$379.20	\$382.99	\$382.99
34	34	\$435.73	\$391.78	\$391.78	\$395.70	\$395.70	\$387.86	\$387.86	\$384.27	\$384.27	\$388.11	\$388.11
35	35	\$438.61	\$394.36	\$394.36	\$398.31	\$398.31	\$390.42	\$390.42	\$386.80	\$386.80	\$390.67	\$390.67
36	36	\$441.48	\$396.95	\$396.95	\$400.92	\$400.92	\$392.98	\$392.98	\$389.33	\$389.33	\$393.23	\$393.23
37	37	\$444.35	\$399.53	\$399.53	\$403.52	\$403.52	\$395.53	\$395.53	\$391.86	\$391.86	\$395.78	\$395.78
38	38	\$447.22	\$402.11	\$402.11	\$406.13	\$406.13	\$398.09	\$398.09	\$394.40	\$394.40	\$398.34	\$398.34
39	39	\$452.96	\$407.27	\$407.27	\$411.35	\$411.35	\$403.20	\$403.20	\$399.46	\$399.46	\$403.46	\$403.46
40	40	\$458.71	\$412.44	\$412.44	\$416.56	\$416.56	\$408.31	\$408.31	\$404.53	\$404.53	\$408.57	\$408.57
41	41	\$467.32	\$420.18	\$420.18	\$424.38	\$424.38	\$415.98	\$415.98	\$412.12	\$412.12	\$416.24	\$416.24
42	42	\$475.57	\$427.60	\$427.60	\$431.88	\$431.88	\$423.33	\$423.33	\$419.40	\$419.40	\$423.60	\$423.60
43	43	\$487.06	\$437.93	\$437.93	\$442.31	\$442.31	\$433.55	\$433.55	\$429.53	\$429.53	\$433.83	\$433.83
44	44	\$501.42	\$450.84	\$450.84	\$455.35	\$455.35	\$446.33	\$446.33	\$442.19	\$442.19	\$446.61	\$446.61
45	45	\$518.29	\$466.01	\$466.01	\$470.67	\$470.67	\$461.35	\$461.35	\$457.07	\$457.07	\$461.64	\$461.64
46	46	\$538.39	\$484.08	\$484.08	\$488.92	\$488.92	\$479.24	\$479.24	\$474.80	\$474.80	\$479.54	\$479.54
47	47	\$561.00	\$504.41	\$504.41	\$509.46	\$509.46	\$499.37	\$499.37	\$494.74	\$494.74	\$499.68	\$499.68
48	48	\$586.84	\$527.65	\$527.65	\$532.92	\$532.92	\$522.37	\$522.37	\$517.53	\$517.53	\$522.70	\$522.70
49	49	\$612.33	\$550.56	\$550.56	\$556.07	\$556.07	\$545.05	\$545.05	\$540.00	\$540.00	\$545.40	\$545.40
50	50	\$641.04	\$576.38	\$576.38	\$582.14	\$582.14	\$570.61	\$570.61	\$565.32	\$565.32	\$570.98	\$570.98
51	51	\$669.39	\$601.87	\$601.87	\$607.89	\$607.89	\$595.85	\$595.85	\$590.33	\$590.33	\$596.23	\$596.23
52	52	\$700.62	\$629.95	\$629.95	\$636.25	\$636.25	\$623.65	\$623.65	\$617.87	\$617.87	\$624.05	\$624.05
53	53	\$732.21	\$658.35	\$658.35	\$664.93	\$664.93	\$651.77	\$651.77	\$645.72	\$645.72	\$652.18	\$652.18
54	54	\$766.30	\$689.01	\$689.01	\$695.90	\$695.90	\$682.12	\$682.12	\$675.79	\$675.79	\$682.55	\$682.55
55	55	\$800.40	\$719.67	\$719.67	\$726.86	\$726.86	\$712.47	\$712.47	\$705.86	\$705.86	\$712.92	\$712.92
56	56	\$837.37	\$752.91	\$752.91	\$760.43	\$760.43	\$745.38	\$745.38	\$738.46	\$738.46	\$745.85	\$745.85
57	57	\$874.70	\$786.47	\$786.47	\$794.33	\$794.33	\$778.60	\$778.60	\$771.38	\$771.38	\$779.10	\$779.10
58	58	\$914.54	\$822.29	\$822.29	\$830.51	\$830.51	\$814.07	\$814.07	\$806.52	\$806.52	\$814.58	\$814.58
59	59	\$934.28	\$840.04	\$840.04	\$848.44	\$848.44	\$831.64	\$831.64	\$823.93	\$823.93	\$832.17	\$832.17
60	60	\$974.12	\$875.86	\$875.86	\$884.62	\$884.62	\$867.10	\$867.10	\$859.06	\$859.06	\$867.65	\$867.65
61	61	\$1,008.58	\$906.84	\$906.84	\$915.91	\$915.91	\$897.77	\$897.77	\$889.45	\$889.45	\$898.34	\$898.34
62	62	\$1,031.19	\$927.17	\$927.17	\$936.45	\$936.45	\$917.90	\$917.90	\$909.39	\$909.39	\$918.48	\$918.48
63	63	\$1,059.55	\$952.67	\$952.67	\$962.20	\$962.20	\$943.14	\$943.14	\$934.40	\$934.40	\$943.74	\$943.74
64+	64+	\$1,076.76	\$968.15	\$968.15	\$977.84	\$977.84	\$958.47	\$958.47	\$949.58	\$949.58	\$959.09	\$959.09

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

HIOS Plan ID (On Exchange)=>		53789PA0090011		53789PA0090004		53789PA0090004		53789PA0090004	
HIOS Plan ID (Off Exchange)=>		53789PA0090011		53789PA0090004		53789PA0090004		53789PA0090004	
Form # =>		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG	
Rating Area =>		9		6		7		9	
Counties Excluded in Rating Area =>		None		None		None		None	
Network =>		PPO		PPO		PPO		PPO	
Metal =>		Silver		Bronze		Bronze		Bronze	
Plan Name =>		Silver HMO 4000/0/35 Rx 250		Bronze HMO 7000/0/60 Combined		Bronze HMO 7000/0/60 Combined		Bronze HMO 7000/0/60 Combined	
Deductible =>		\$4000 /\$250 Med/Rx		\$7000 Med/Rx Combined		\$7000 Med/Rx Combined		\$7000 Med/Rx Combined	
Coinsurance =>		0%		0%		0%		0%	
Copays =>		\$35/\$65/\$350 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER	
OOP Maximum =>		\$6550 Med/Rx Combined		\$7150 Med/Rx Combined		\$7150 Med/Rx Combined		\$7150 Med/Rx Combined	
Pediatric Dental (Yes/No) =>		Yes		Yes		Yes		Yes	
Age Band		Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0	0 - 20	\$198.99	\$198.99	\$164.32	\$164.32	\$165.96	\$165.96	\$162.68	\$162.68
21	21	\$313.36	\$313.36	\$258.77	\$258.77	\$261.36	\$261.36	\$256.18	\$256.18
22	22	\$313.36	\$313.36	\$258.77	\$258.77	\$261.36	\$261.36	\$256.18	\$256.18
23	23	\$313.36	\$313.36	\$258.77	\$258.77	\$261.36	\$261.36	\$256.18	\$256.18
24	24	\$313.36	\$313.36	\$258.77	\$258.77	\$261.36	\$261.36	\$256.18	\$256.18
25	25	\$314.62	\$314.62	\$259.81	\$259.81	\$262.40	\$262.40	\$257.21	\$257.21
26	26	\$320.89	\$320.89	\$264.98	\$264.98	\$267.63	\$267.63	\$262.33	\$262.33
27	27	\$328.41	\$328.41	\$271.19	\$271.19	\$273.90	\$273.90	\$268.48	\$268.48
28	28	\$340.63	\$340.63	\$281.28	\$281.28	\$284.10	\$284.10	\$278.47	\$278.47
29	29	\$350.66	\$350.66	\$289.56	\$289.56	\$292.46	\$292.46	\$286.67	\$286.67
30	30	\$355.67	\$355.67	\$293.70	\$293.70	\$296.64	\$296.64	\$290.77	\$290.77
31	31	\$363.19	\$363.19	\$299.91	\$299.91	\$302.91	\$302.91	\$296.92	\$296.92
32	32	\$370.71	\$370.71	\$306.12	\$306.12	\$309.19	\$309.19	\$303.06	\$303.06
33	33	\$375.41	\$375.41	\$310.01	\$310.01	\$313.11	\$313.11	\$306.91	\$306.91
34	34	\$380.42	\$380.42	\$314.15	\$314.15	\$317.29	\$317.29	\$311.01	\$311.01
35	35	\$382.93	\$382.93	\$316.22	\$316.22	\$319.38	\$319.38	\$313.05	\$313.05
36	36	\$385.44	\$385.44	\$318.29	\$318.29	\$321.47	\$321.47	\$315.10	\$315.10
37	37	\$387.95	\$387.95	\$320.36	\$320.36	\$323.56	\$323.56	\$317.15	\$317.15
38	38	\$390.45	\$390.45	\$322.43	\$322.43	\$325.65	\$325.65	\$319.20	\$319.20
39	39	\$395.47	\$395.47	\$326.57	\$326.57	\$329.83	\$329.83	\$323.30	\$323.30
40	40	\$400.48	\$400.48	\$330.71	\$330.71	\$334.02	\$334.02	\$327.40	\$327.40
41	41	\$408.00	\$408.00	\$336.92	\$336.92	\$340.29	\$340.29	\$333.55	\$333.55
42	42	\$415.21	\$415.21	\$342.87	\$342.87	\$346.30	\$346.30	\$339.44	\$339.44
43	43	\$425.24	\$425.24	\$351.15	\$351.15	\$354.66	\$354.66	\$347.64	\$347.64
44	44	\$437.77	\$437.77	\$361.50	\$361.50	\$365.12	\$365.12	\$357.89	\$357.89
45	45	\$452.50	\$452.50	\$373.66	\$373.66	\$377.40	\$377.40	\$369.93	\$369.93
46	46	\$470.05	\$470.05	\$388.16	\$388.16	\$392.04	\$392.04	\$384.27	\$384.27
47	47	\$489.79	\$489.79	\$404.46	\$404.46	\$408.50	\$408.50	\$400.41	\$400.41
48	48	\$512.35	\$512.35	\$423.09	\$423.09	\$427.32	\$427.32	\$418.86	\$418.86
49	49	\$534.60	\$534.60	\$441.46	\$441.46	\$445.88	\$445.88	\$437.05	\$437.05
50	50	\$559.67	\$559.67	\$462.16	\$462.16	\$466.78	\$466.78	\$457.54	\$457.54
51	51	\$584.43	\$584.43	\$482.61	\$482.61	\$487.43	\$487.43	\$477.78	\$477.78
52	52	\$611.69	\$611.69	\$505.12	\$505.12	\$510.17	\$510.17	\$500.07	\$500.07
53	53	\$639.26	\$639.26	\$527.89	\$527.89	\$533.17	\$533.17	\$522.61	\$522.61
54	54	\$669.03	\$669.03	\$552.47	\$552.47	\$558.00	\$558.00	\$546.95	\$546.95
55	55	\$698.80	\$698.80	\$577.06	\$577.06	\$582.83	\$582.83	\$571.29	\$571.29
56	56	\$731.08	\$731.08	\$603.71	\$603.71	\$609.75	\$609.75	\$597.67	\$597.67
57	57	\$763.67	\$763.67	\$630.62	\$630.62	\$636.93	\$636.93	\$624.32	\$624.32
58	58	\$798.45	\$798.45	\$659.35	\$659.35	\$665.94	\$665.94	\$652.75	\$652.75
59	59	\$815.69	\$815.69	\$673.58	\$673.58	\$680.31	\$680.31	\$666.84	\$666.84
60	60	\$850.47	\$850.47	\$702.30	\$702.30	\$709.32	\$709.32	\$695.28	\$695.28
61	61	\$880.55	\$880.55	\$727.14	\$727.14	\$734.42	\$734.42	\$719.87	\$719.87
62	62	\$900.30	\$900.30	\$743.45	\$743.45	\$750.88	\$750.88	\$736.01	\$736.01
63	63	\$925.05	\$925.05	\$763.89	\$763.89	\$771.53	\$771.53	\$756.25	\$756.25
64+	64+	\$940.08	\$940.08	\$776.30	\$776.30	\$784.07	\$784.07	\$768.54	\$768.54

Company Name: Keystone Health Plan Central
Market: Small Group
Product: HMO
Effective Date of Rates:

October 1, 2017

Ending date of Rates:

December 31, 2017

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HIOS Plan ID (On Exchange)=>	53789PA0090007		53789PA0090007		53789PA0090007		53789PA0090008		53789PA0090008	
HIOS Plan ID (Off Exchange)=>	53789PA0090007		53789PA0090007		53789PA0090007		53789PA0090008		53789PA0090008	
Form # =>	C17-CAIC-SPG		C17-CAIC-SPG		C17-CAIC-SPG		C17-CAIC-SPG		C17-CAIC-SPG	
Rating Area =>	6		7		9		6		7	
Counties Excluded in Rating Area =>	None		None		None		None		None	
Network =>	PPO		PPO		PPO		PPO		PPO	
Metal =>	Gold		Gold		Gold		Gold		Gold	
Plan Name =>	Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 250		Gold HMO 2000/0/30 Rx 0		Gold HMO 2000/0/30 Rx 0	
Deductible =>	\$2000 /\$250 Med/Rx		\$2000 /\$250 Med/Rx		\$2000 /\$250 Med/Rx		\$2000 /\$0 Med/Rx		\$2000 /\$0 Med/Rx	
Coinsurance =>	0%		0%		0%		0%		0%	
Copays =>	\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER		\$30/\$50/\$200 PCP/SPC/ER	
OOP Maximum =>	\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined		\$6350 Med/Rx Combined	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 20	\$230.65	\$230.65	\$232.96	\$232.96	\$228.34	\$228.34	\$234.65	\$234.65	\$237.00	\$237.00
21	\$363.23	\$363.23	\$366.86	\$366.86	\$359.60	\$359.60	\$369.53	\$369.53	\$373.23	\$373.23
22	\$363.23	\$363.23	\$366.86	\$366.86	\$359.60	\$359.60	\$369.53	\$369.53	\$373.23	\$373.23
23	\$363.23	\$363.23	\$366.86	\$366.86	\$359.60	\$359.60	\$369.53	\$369.53	\$373.23	\$373.23
24	\$363.23	\$363.23	\$366.86	\$366.86	\$359.60	\$359.60	\$369.53	\$369.53	\$373.23	\$373.23
25	\$364.68	\$364.68	\$368.33	\$368.33	\$361.04	\$361.04	\$371.01	\$371.01	\$374.72	\$374.72
26	\$371.95	\$371.95	\$375.67	\$375.67	\$368.23	\$376.86	\$378.40	\$378.40	\$382.18	\$382.18
27	\$380.67	\$380.67	\$384.47	\$384.47	\$376.86	\$376.86	\$387.27	\$387.27	\$391.14	\$391.14
28	\$394.83	\$394.83	\$398.78	\$398.78	\$390.88	\$390.88	\$401.68	\$401.68	\$405.70	\$405.70
29	\$406.45	\$406.45	\$410.52	\$410.52	\$402.39	\$402.39	\$413.50	\$413.50	\$417.64	\$417.64
30	\$412.27	\$412.27	\$416.39	\$416.39	\$408.14	\$408.14	\$419.42	\$419.42	\$423.61	\$423.61
31	\$420.98	\$420.98	\$425.19	\$425.19	\$416.77	\$416.77	\$428.29	\$428.29	\$432.57	\$432.57
32	\$429.70	\$429.70	\$434.00	\$434.00	\$425.40	\$425.40	\$437.15	\$437.15	\$441.53	\$441.53
33	\$435.15	\$435.15	\$439.50	\$439.50	\$430.80	\$430.80	\$442.70	\$442.70	\$447.12	\$447.12
34	\$440.96	\$440.96	\$445.37	\$445.37	\$436.55	\$436.55	\$448.61	\$448.61	\$453.10	\$453.10
35	\$443.87	\$443.87	\$448.31	\$448.31	\$439.43	\$439.43	\$451.57	\$451.57	\$456.08	\$456.08
36	\$446.77	\$446.77	\$451.24	\$451.24	\$442.31	\$442.31	\$454.52	\$454.52	\$459.07	\$459.07
37	\$449.68	\$449.68	\$454.18	\$454.18	\$445.18	\$445.18	\$457.48	\$457.48	\$462.05	\$462.05
38	\$452.58	\$452.58	\$457.11	\$457.11	\$448.06	\$448.06	\$460.43	\$460.43	\$465.04	\$465.04
39	\$458.40	\$458.40	\$462.98	\$462.98	\$453.81	\$453.81	\$466.35	\$466.35	\$471.01	\$471.01
40	\$464.21	\$464.21	\$468.85	\$468.85	\$459.57	\$459.57	\$472.26	\$472.26	\$476.98	\$476.98
41	\$472.93	\$472.93	\$477.65	\$477.65	\$468.20	\$468.20	\$481.13	\$481.13	\$485.94	\$485.94
42	\$481.28	\$481.28	\$486.09	\$486.09	\$476.47	\$476.47	\$489.63	\$489.63	\$494.52	\$494.52
43	\$492.90	\$492.90	\$497.83	\$497.83	\$487.97	\$487.97	\$501.45	\$501.45	\$506.47	\$506.47
44	\$507.43	\$507.43	\$512.51	\$512.51	\$502.36	\$502.36	\$516.23	\$516.23	\$521.40	\$521.40
45	\$524.50	\$524.50	\$529.75	\$529.75	\$519.26	\$519.26	\$533.60	\$533.60	\$538.94	\$538.94
46	\$544.84	\$544.84	\$550.29	\$550.29	\$539.40	\$539.40	\$554.29	\$554.29	\$559.84	\$559.84
47	\$567.73	\$567.73	\$573.41	\$573.41	\$562.05	\$562.05	\$577.58	\$577.58	\$583.35	\$583.35
48	\$593.88	\$593.88	\$599.82	\$599.82	\$587.94	\$587.94	\$604.18	\$604.18	\$610.22	\$610.22
49	\$619.67	\$619.67	\$625.87	\$625.87	\$613.47	\$613.47	\$630.42	\$630.42	\$636.72	\$636.72
50	\$648.73	\$648.73	\$655.22	\$655.22	\$642.24	\$642.24	\$659.98	\$659.98	\$666.58	\$666.58
51	\$677.42	\$677.42	\$684.20	\$684.20	\$670.65	\$670.65	\$689.17	\$689.17	\$696.07	\$696.07
52	\$709.02	\$709.02	\$716.12	\$716.12	\$701.93	\$701.93	\$721.32	\$721.32	\$728.54	\$728.54
53	\$740.99	\$740.99	\$748.40	\$748.40	\$733.58	\$733.58	\$753.84	\$753.84	\$761.38	\$761.38
54	\$775.50	\$775.50	\$783.25	\$783.25	\$767.74	\$767.74	\$788.95	\$788.95	\$796.84	\$796.84
55	\$810.00	\$810.00	\$818.10	\$818.10	\$801.90	\$801.90	\$824.05	\$824.05	\$832.29	\$832.29
56	\$847.42	\$847.42	\$855.89	\$855.89	\$838.94	\$838.94	\$862.11	\$862.11	\$870.73	\$870.73
57	\$885.19	\$885.19	\$894.04	\$894.04	\$876.34	\$876.34	\$900.54	\$900.54	\$909.55	\$909.55
58	\$925.51	\$925.51	\$934.77	\$934.77	\$916.25	\$916.25	\$941.56	\$941.56	\$950.98	\$950.98
59	\$945.49	\$945.49	\$954.94	\$954.94	\$936.03	\$936.03	\$961.89	\$961.89	\$971.51	\$971.51
60	\$985.81	\$985.81	\$995.66	\$995.66	\$975.95	\$975.95	\$1,002.90	\$1,002.90	\$1,012.93	\$1,012.93
61	\$1,020.68	\$1,020.68	\$1,030.88	\$1,030.88	\$1,010.47	\$1,010.47	\$1,038.38	\$1,038.38	\$1,048.76	\$1,048.76
62	\$1,043.56	\$1,043.56	\$1,054.00	\$1,054.00	\$1,033.12	\$1,033.12	\$1,061.66	\$1,061.66	\$1,072.28	\$1,072.28
63	\$1,072.25	\$1,072.25	\$1,082.98	\$1,082.98	\$1,061.53	\$1,061.53	\$1,090.85	\$1,090.85	\$1,101.76	\$1,101.76
64+	\$1,089.68	\$1,089.68	\$1,100.58	\$1,100.58	\$1,078.79	\$1,078.79	\$1,108.58	\$1,108.58	\$1,119.68	\$1,119.68

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

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HIOS Plan ID (On Exchange)=>		53789PA0090008		53789PA0090012		53789PA0090012		53789PA0090012		53789PA0090011	
HIOS Plan ID (Off Exchange)=>		53789PA0090008		53789PA0090012		53789PA0090012		53789PA0090012		53789PA0090011	
Form # =>		C17-CAIC-SPG		C17-CAIC-SPG		C17-CAIC-SPG		C17-CAIC-SPG		C17-CAIC-SPG	
Rating Area =>		9		6		7		9		6	
Counties Excluded in Rating Area =>		None		None		None		None		None	
Network =>		PPO		PPO		PPO		PPO		PPO	
Metal =>		Gold		Silver		Silver		Silver		Silver	
Plan Name =>		Gold HMO 2000/0/30 Rx 0		Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 0		Silver HMO 4000/0/35 Rx 250	
Deductible =>		\$2000 /\$0 Med/Rx		\$4000 /\$0 Med/Rx		\$4000 /\$0 Med/Rx		\$4000 /\$0 Med/Rx		\$4000 /\$250 Med/Rx	
Coinsurance =>		0%		0%		0%		0%		0%	
Copays =>		\$30/\$50/\$200 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER	
OOP Maximum =>		\$6350 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined	
Pediatric Dental (Yes/No) =>		Yes		Yes		Yes		Yes		Yes	
Age Band		Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0	0 - 20	\$232.31	\$232.31	\$208.87	\$208.87	\$210.96	\$210.96	\$206.78	\$206.78	\$204.86	\$204.86
21	21	\$365.83	\$365.83	\$328.93	\$328.93	\$332.22	\$332.22	\$325.64	\$325.64	\$322.62	\$322.62
22	22	\$365.83	\$365.83	\$328.93	\$328.93	\$332.22	\$332.22	\$325.64	\$325.64	\$322.62	\$322.62
23	23	\$365.83	\$365.83	\$328.93	\$328.93	\$332.22	\$332.22	\$325.64	\$325.64	\$322.62	\$322.62
24	24	\$365.83	\$365.83	\$328.93	\$328.93	\$332.22	\$332.22	\$325.64	\$325.64	\$322.62	\$322.62
25	25	\$367.30	\$367.30	\$330.25	\$330.25	\$333.55	\$333.55	\$326.94	\$326.94	\$323.91	\$323.91
26	26	\$374.61	\$374.61	\$336.82	\$336.82	\$340.19	\$340.19	\$333.46	\$333.46	\$330.36	\$330.36
27	27	\$383.39	\$383.39	\$344.72	\$344.72	\$348.17	\$348.17	\$341.27	\$341.27	\$338.11	\$338.11
28	28	\$397.66	\$397.66	\$357.55	\$357.55	\$361.12	\$361.12	\$353.97	\$353.97	\$350.69	\$350.69
29	29	\$409.37	\$409.37	\$368.07	\$368.07	\$371.75	\$371.75	\$364.39	\$364.39	\$361.01	\$361.01
30	30	\$415.22	\$415.22	\$373.34	\$373.34	\$377.07	\$377.07	\$369.60	\$369.60	\$366.17	\$366.17
31	31	\$424.00	\$424.00	\$381.23	\$381.23	\$385.04	\$385.04	\$377.42	\$377.42	\$373.92	\$373.92
32	32	\$432.78	\$432.78	\$389.12	\$389.12	\$393.02	\$393.02	\$385.23	\$385.23	\$381.66	\$381.66
33	33	\$438.27	\$438.27	\$394.06	\$394.06	\$398.00	\$398.00	\$390.12	\$390.12	\$386.50	\$386.50
34	34	\$444.12	\$444.12	\$399.32	\$399.32	\$403.31	\$403.31	\$395.33	\$395.33	\$391.66	\$391.66
35	35	\$447.05	\$447.05	\$401.95	\$401.95	\$405.97	\$405.97	\$397.93	\$397.93	\$394.24	\$394.24
36	36	\$449.98	\$449.98	\$404.58	\$404.58	\$408.63	\$408.63	\$400.54	\$400.54	\$396.82	\$396.82
37	37	\$452.90	\$452.90	\$407.22	\$407.22	\$411.29	\$411.29	\$403.14	\$403.14	\$399.40	\$399.40
38	38	\$455.83	\$455.83	\$409.85	\$409.85	\$413.95	\$413.95	\$405.75	\$405.75	\$401.98	\$401.98
39	39	\$461.68	\$461.68	\$415.11	\$415.11	\$419.26	\$419.26	\$410.96	\$410.96	\$407.15	\$407.15
40	40	\$467.54	\$467.54	\$420.37	\$420.37	\$424.58	\$424.58	\$416.17	\$416.17	\$412.31	\$412.31
41	41	\$476.32	\$476.32	\$428.27	\$428.27	\$432.55	\$432.55	\$423.98	\$423.98	\$420.05	\$420.05
42	42	\$484.73	\$484.73	\$435.83	\$435.83	\$440.19	\$440.19	\$431.47	\$431.47	\$427.47	\$427.47
43	43	\$496.44	\$496.44	\$446.36	\$446.36	\$450.82	\$450.82	\$441.89	\$441.89	\$437.80	\$437.80
44	44	\$511.07	\$511.07	\$459.52	\$459.52	\$464.11	\$464.11	\$454.92	\$454.92	\$450.70	\$450.70
45	45	\$528.27	\$528.27	\$474.97	\$474.97	\$479.72	\$479.72	\$470.23	\$470.23	\$465.86	\$465.86
46	46	\$548.75	\$548.75	\$493.40	\$493.40	\$498.33	\$498.33	\$488.46	\$488.46	\$483.93	\$483.93
47	47	\$571.80	\$571.80	\$514.12	\$514.12	\$519.26	\$519.26	\$508.98	\$508.98	\$504.26	\$504.26
48	48	\$598.14	\$598.14	\$537.80	\$537.80	\$543.18	\$543.18	\$532.42	\$532.42	\$527.48	\$527.48
49	49	\$624.11	\$624.11	\$561.15	\$561.15	\$566.77	\$566.77	\$555.54	\$555.54	\$550.39	\$550.39
50	50	\$653.38	\$653.38	\$587.47	\$587.47	\$593.34	\$593.34	\$581.59	\$581.59	\$576.20	\$576.20
51	51	\$682.28	\$682.28	\$613.45	\$613.45	\$619.59	\$619.59	\$607.32	\$607.32	\$601.69	\$601.69
52	52	\$714.11	\$714.11	\$642.07	\$642.07	\$648.49	\$648.49	\$635.65	\$635.65	\$629.75	\$629.75
53	53	\$746.30	\$746.30	\$671.02	\$671.02	\$677.73	\$677.73	\$664.31	\$664.31	\$658.14	\$658.14
54	54	\$781.06	\$781.06	\$702.27	\$702.27	\$709.29	\$709.29	\$695.24	\$695.24	\$688.79	\$688.79
55	55	\$815.81	\$815.81	\$733.51	\$733.51	\$740.85	\$740.85	\$726.18	\$726.18	\$719.44	\$719.44
56	56	\$853.49	\$853.49	\$767.39	\$767.39	\$775.07	\$775.07	\$759.72	\$759.72	\$752.67	\$752.67
57	57	\$891.54	\$891.54	\$801.60	\$801.60	\$809.62	\$809.62	\$793.59	\$793.59	\$786.22	\$786.22
58	58	\$932.15	\$932.15	\$838.11	\$838.11	\$846.49	\$846.49	\$829.73	\$829.73	\$822.04	\$822.04
59	59	\$952.27	\$952.27	\$856.20	\$856.20	\$864.77	\$864.77	\$847.64	\$847.64	\$839.78	\$839.78
60	60	\$992.88	\$992.88	\$892.72	\$892.72	\$901.64	\$901.64	\$883.79	\$883.79	\$875.59	\$875.59
61	61	\$1,028.00	\$1,028.00	\$924.29	\$924.29	\$933.54	\$933.54	\$915.05	\$915.05	\$906.56	\$906.56
62	62	\$1,051.04	\$1,051.04	\$945.02	\$945.02	\$954.47	\$954.47	\$935.57	\$935.57	\$926.89	\$926.89
63	63	\$1,079.94	\$1,079.94	\$971.00	\$971.00	\$980.71	\$980.71	\$961.29	\$961.29	\$952.37	\$952.37
64+	64+	\$1,097.49	\$1,097.49	\$986.78	\$986.78	\$996.65	\$996.65	\$976.91	\$976.91	\$967.85	\$967.85

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

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HIOS Plan ID (On Exchange)=>		53789PA0090011		53789PA0090011		53789PA0090004		53789PA0090004		53789PA0090004	
HIOS Plan ID (Off Exchange)=>		53789PA0090011		53789PA0090011		53789PA0090004		53789PA0090004		53789PA0090004	
Form # =>		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG		C17-KHPC-SPG	
Rating Area =>		7		9		6		7		9	
Counties Excluded in Rating Area =>		None		None		None		None		None	
Network =>		PPO		PPO		PPO		PPO		PPO	
Metal =>		Silver		Silver		Bronze		Bronze		Bronze	
Plan Name =>		Silver HMO 4000/0/35 Rx 250		Silver HMO 4000/0/35 Rx 250		Bronze HMO 7000/0/60 Combined		Bronze HMO 7000/0/60 Combined		Bronze HMO 7000/0/60 Combined	
Deductible =>		\$4000 /\$250 Med/Rx		\$4000 /\$250 Med/Rx		\$7000 Med/Rx Combined		\$7000 Med/Rx Combined		\$7000 Med/Rx Combined	
Coinsurance =>		0%		0%		0%		0%		0%	
Copays =>		\$35/\$65/\$350 PCP/SPC/ER		\$35/\$65/\$350 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER		\$60/\$0/\$0 PCP/SPC/ER	
OOP Maximum =>		\$6550 Med/Rx Combined		\$6550 Med/Rx Combined		\$7150 Med/Rx Combined		\$7150 Med/Rx Combined		\$7150 Med/Rx Combined	
Pediatric Dental (Yes/No) =>		Yes		Yes		Yes		Yes		Yes	
Age Band		Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0	0 - 20	\$206.91	\$206.91	\$202.82	\$202.82	\$167.47	\$167.47	\$169.15	\$169.15	\$165.80	\$165.80
21	21	\$325.85	\$325.85	\$319.39	\$319.39	\$263.74	\$263.74	\$266.38	\$266.38	\$261.10	\$261.10
22	22	\$325.85	\$325.85	\$319.39	\$319.39	\$263.74	\$263.74	\$266.38	\$266.38	\$261.10	\$261.10
23	23	\$325.85	\$325.85	\$319.39	\$319.39	\$263.74	\$263.74	\$266.38	\$266.38	\$261.10	\$261.10
24	24	\$325.85	\$325.85	\$319.39	\$319.39	\$263.74	\$263.74	\$266.38	\$266.38	\$261.10	\$261.10
25	25	\$327.15	\$327.15	\$320.67	\$320.67	\$264.79	\$264.79	\$267.44	\$267.44	\$262.15	\$262.15
26	26	\$333.67	\$333.67	\$327.06	\$327.06	\$270.07	\$270.07	\$272.77	\$272.77	\$267.37	\$267.37
27	27	\$341.49	\$341.49	\$334.72	\$334.72	\$276.40	\$276.40	\$279.16	\$279.16	\$273.64	\$273.64
28	28	\$354.19	\$354.19	\$347.18	\$347.18	\$286.69	\$286.69	\$289.55	\$289.55	\$283.82	\$283.82
29	29	\$364.62	\$364.62	\$357.40	\$357.40	\$295.13	\$295.13	\$298.08	\$298.08	\$292.17	\$292.17
30	30	\$369.84	\$369.84	\$362.51	\$362.51	\$299.34	\$299.34	\$302.34	\$302.34	\$296.35	\$296.35
31	31	\$377.66	\$377.66	\$370.18	\$370.18	\$305.67	\$305.67	\$308.73	\$308.73	\$302.62	\$302.62
32	32	\$385.48	\$385.48	\$377.84	\$377.84	\$312.00	\$312.00	\$315.12	\$315.12	\$308.88	\$308.88
33	33	\$390.36	\$390.36	\$382.63	\$382.63	\$315.96	\$315.96	\$319.12	\$319.12	\$312.80	\$312.80
34	34	\$395.58	\$395.58	\$387.74	\$387.74	\$320.18	\$320.18	\$323.38	\$323.38	\$316.98	\$316.98
35	35	\$398.18	\$398.18	\$390.30	\$390.30	\$322.29	\$322.29	\$325.51	\$325.51	\$319.07	\$319.07
36	36	\$400.79	\$400.79	\$392.85	\$392.85	\$324.40	\$324.40	\$327.64	\$327.64	\$321.16	\$321.16
37	37	\$403.40	\$403.40	\$395.41	\$395.41	\$326.51	\$326.51	\$329.78	\$329.78	\$323.25	\$323.25
38	38	\$406.00	\$406.00	\$397.96	\$397.96	\$328.62	\$328.62	\$331.91	\$331.91	\$325.33	\$325.33
39	39	\$411.22	\$411.22	\$403.07	\$403.07	\$332.84	\$332.84	\$336.17	\$336.17	\$329.51	\$329.51
40	40	\$416.43	\$416.43	\$408.19	\$408.19	\$337.06	\$337.06	\$340.43	\$340.43	\$333.69	\$333.69
41	41	\$424.25	\$424.25	\$415.85	\$415.85	\$343.39	\$343.39	\$346.82	\$346.82	\$339.96	\$339.96
42	42	\$431.75	\$431.75	\$423.20	\$423.20	\$349.46	\$349.46	\$352.95	\$352.95	\$345.96	\$345.96
43	43	\$442.17	\$442.17	\$433.42	\$433.42	\$357.90	\$357.90	\$361.47	\$361.47	\$354.32	\$354.32
44	44	\$455.21	\$455.21	\$446.19	\$446.19	\$368.44	\$368.44	\$372.13	\$372.13	\$364.76	\$364.76
45	45	\$470.52	\$470.52	\$461.20	\$461.20	\$380.84	\$380.84	\$384.65	\$384.65	\$377.03	\$377.03
46	46	\$488.77	\$488.77	\$479.09	\$479.09	\$395.61	\$395.61	\$399.57	\$399.57	\$391.65	\$391.65
47	47	\$509.30	\$509.30	\$499.21	\$499.21	\$412.23	\$412.23	\$416.35	\$416.35	\$408.10	\$408.10
48	48	\$532.76	\$532.76	\$522.21	\$522.21	\$431.21	\$431.21	\$435.53	\$435.53	\$426.90	\$426.90
49	49	\$555.89	\$555.89	\$544.89	\$544.89	\$449.94	\$449.94	\$454.44	\$454.44	\$445.44	\$445.44
50	50	\$581.96	\$581.96	\$570.44	\$570.44	\$471.04	\$471.04	\$475.75	\$475.75	\$466.33	\$466.33
51	51	\$607.70	\$607.70	\$595.67	\$595.67	\$491.88	\$491.88	\$496.79	\$496.79	\$486.96	\$486.96
52	52	\$636.05	\$636.05	\$623.46	\$623.46	\$514.82	\$514.82	\$519.97	\$519.97	\$509.67	\$509.67
53	53	\$664.73	\$664.73	\$651.56	\$651.56	\$538.03	\$538.03	\$543.41	\$543.41	\$532.65	\$532.65
54	54	\$695.68	\$695.68	\$681.91	\$681.91	\$563.08	\$563.08	\$568.72	\$568.72	\$557.45	\$557.45
55	55	\$726.64	\$726.64	\$712.25	\$712.25	\$588.14	\$588.14	\$594.02	\$594.02	\$582.26	\$582.26
56	56	\$760.20	\$760.20	\$745.15	\$745.15	\$615.31	\$615.31	\$621.46	\$621.46	\$609.15	\$609.15
57	57	\$794.09	\$794.09	\$778.36	\$778.36	\$642.73	\$642.73	\$649.16	\$649.16	\$636.31	\$636.31
58	58	\$830.26	\$830.26	\$813.82	\$813.82	\$672.01	\$672.01	\$678.73	\$678.73	\$665.29	\$665.29
59	59	\$848.18	\$848.18	\$831.38	\$831.38	\$686.52	\$686.52	\$693.38	\$693.38	\$679.65	\$679.65
60	60	\$884.35	\$884.35	\$866.83	\$866.83	\$715.79	\$715.79	\$722.95	\$722.95	\$708.63	\$708.63
61	61	\$915.63	\$915.63	\$897.50	\$897.50	\$741.11	\$741.11	\$748.52	\$748.52	\$733.70	\$733.70
62	62	\$936.16	\$936.16	\$917.62	\$917.62	\$757.73	\$757.73	\$765.30	\$765.30	\$750.15	\$750.15
63	63	\$961.90	\$961.90	\$942.85	\$942.85	\$778.56	\$778.56	\$786.35	\$786.35	\$770.77	\$770.77
64+	64+	\$977.54	\$977.54	\$958.17	\$958.17	\$791.21	\$791.21	\$799.13	\$799.13	\$783.30	\$783.30

Silver Plan Rates for Age 21 Non-Smoker, by Geographic Area and Exchange Status

[illegible]

Silver Plan Rates for Age 21 Non-Smoker, by Geographic Area and Exchange Status

[illegible]

State:	Pennsylvania	Filing Company:	Keystone Health Plan Central
TOI/Sub-TOI:	H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only		
Product Name:	Rates - KHPC Small Group HMO		
Project Name/Number:	/		

Supporting Document Schedules

Satisfied - Item:	CFJ
Comments:	
Attachment(s):	SG_16-45_Revised_KHP_HMO_CFJ_Supporting_20160721.pdf
Item Status:	
Status Date:	

Satisfied - Item:	PA Bulletin
Comments:	
Attachment(s):	SG_16-45_Revised_KHP_HMO_PABulletin_Supporting_20160721.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Rate Change Summary
Comments:	
Attachment(s):	SG_16-45_Revised_KHP_HMO_RateChangeSummary_Supporting_20160721.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Rate Exhibits
Comments:	
Attachment(s):	SG_16-45_Revised_KHP_HMO_PIDRateExhibits_Supporting_20160721.pdf SG_16-45_Revised_KHP_HMO_PIDRateExhibits_Supporting_20160721.xlsx
Item Status:	
Status Date:	

Satisfied - Item:	Redacted Actuarial Memos
Comments:	
Attachment(s):	SG_16-45_Initial_KHP_HMO_FedActMemoRedacted_Supporting_20160607.pdf SG_16-45_Revised_KHP_HMO_PIDActMemoRedacted_Supporting_20160721.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Federal Rates Template pdf
Comments:	
Attachment(s):	SG_16-45_Initial_KHP_HMO_FedRatesTemplate_RateRule_20160615.pdf

State:	Pennsylvania	Filing Company:	Keystone Health Plan Central
TOI/Sub-TOI:	H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only		
Product Name:	Rates - KHPC Small Group HMO		
Project Name/Number:	/		

Item Status:	
Status Date:	
Satisfied - Item:	URRT pdf
Comments:	n/a
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	HMO Agent Agreement Redacted
Comments:	
Attachment(s):	SG_16-45_Initial_KHP_HMO_AgentAgreementRedacted_Supporting_20160629.pdf
Item Status:	
Status Date:	
Satisfied - Item:	HMO PPMA Redacted
Comments:	
Attachment(s):	SG_16-45_Initial_KHP_HMO_PPMARedacted_Supporting_20160629.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Q&A Exhibits Redacted
Comments:	
Attachment(s):	SG_16-45_Initial_KHP_HMO_Q&AExhibitsRedacted_Supporting_20160629.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Q&A Response Redacted
Comments:	
Attachment(s):	SG_16-45_Initial_KHP_HMO_Q&AResponseRedacted_Supporting_20160629.pdf
Item Status:	
Status Date:	

SERFF Tracking #:	CABC-130539616	State Tracking #:	CABC-130539616	Company Tracking #:	16-45
<hr/>					
State:	Pennsylvania		Filing Company:	Keystone Health Plan Central	
TOI/Sub-TOI:	H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only				
Product Name:	Rates - KHPC Small Group HMO				
Project Name/Number:	/				

Attachment SG_16-45_Revised_KHP_HMO_PIDRateExhibits_Supporting_20160721.xlsx is not a PDF document and cannot be reproduced here.



KEYSTONE HEALTH PLAN CENTRAL, INC.
RFJ Part II – Consumer Friendly Justification

1. Company Name & NAIC #: Keystone Health Plan Central (KHPC), NAIC #95199
2. Market: Small Group
3. Product: HMO
4. Average Rate Change (% and \$) and Range: 9.4%/\$474.20 PMPY, -3.6% to 41.4%
5. Current Covered Lives and Policyholders: 901/600
6. Financial Information:

Jan. 2015-Dec. 2015 financial experience	
Premiums	\$8,250,711
Claims	\$7,200,106
Administrative expenses	\$853,492
Company made (before taxes)	\$197,113

7. Rate Increase Considerations:

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

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



Capital BlueCross

July 21, 2016

**KEYSTONE HEALTH PLAN CENTRAL, INC.
Pennsylvania Bulletin Information**

The following is a summary prepared for the Pennsylvania Bulletin:

1. Company Name & NAIC #: Keystone Health Plan Central (KHPC), NAIC #95199
2. Market: Small Group
3. Product: HMO
4. Average Rate Change (% and \$) and Range: 9.4%/\$474.20 PMPY, -3.6% to 41.4%
5. Current Covered Lives and Policyholders: 901/600
6. Experience Period Revenue: \$6.5M
7. Additional Revenue from Rate Increase: \$427,254

Keystone Health Plan Central (KHPC) – Small Group Plans

Rate request filing ID # CAB-130539616- 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

Requested average rate change:	9.4%
Range of requested rate change:	-3.6% to 41.4%
Effective date:	1/1/2017
People impacted:	901
Available in:	Rating Area 6, Rating Area 7, and Rating Area 9

Key information

Jan. 2015-Dec. 2015 financial experience

Premiums	\$8,250,711
Claims	\$7,200,106
Administrative expenses	\$853,492
Company made (before taxes)	\$197,113

The company expects its annual medical costs to increase **8.3%**.

How it plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2017:

Claims:	82.0%
Administrative:	13.2%
Taxes & fees:	2.8%
Profit:	2.0%

Explanation of requested rate change

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

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

PA Rate Template Part I

Data Relevant to the Rate Filing

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of Feb. 1, 2016)	Projected Rating Period
Total	15,164	877	901
<18	2,090	125	133
18-24	1,196	76	77
25-29	1,154	71	72
30-34	1,104	76	79
35-39	1,320	82	84
40-44	1,340	90	94
45-49	1,662	91	93
50-54	1,494	77	77
55-59	1,818	94	98
60-63	1,333	68	69
64+	653	27	25

Table 2. Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member & HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
\$ 6,485,479.77	\$ 5,312,749.96	\$ 5,431,844.97	15,164	\$ 796,298.37	\$ 6,228,143.34	\$ -	\$ (35,675.25)	\$ 279,945.74	\$ -	\$ 5,269.47	\$ -
2015 Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$ 426.83
Loss Ratio											87.45%

*Express Prescription Drug Rebates as a negative number

Table 3. Trend Components

Service Category	Cost*	Utilization*	Composite	Weight*
Inpatient Hospital	5.00%	1.90%	7.00%	18.62%
Outpatient Hospital	5.00%	1.90%	7.00%	33.96%
Professional	5.00%	1.90%	7.00%	25.15%
Other Medical	5.00%	1.90%	7.00%	2.48%
Capitation			3.00%	0.11%
Prescription Drugs	13.50%	0.05%	13.56%	19.67%
Total Annual Trend			8.29%	100.00%
2 Year Trend Projection Factor			1.173	

* Express Cost, Utilization, and Weight as percentages

<- Annualized Trend Factors on URRT

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-13	\$ 17,212,663.14	\$ 881,339.29	1.0000	\$ 881,339.30	3,406	\$ 258.76	\$ 1,438,995.97	\$ (13.23)	\$ 1,028,264.57	\$ 301.90
Feb-13		\$ 893,495.98	1.0000	\$ 893,495.87	3,355	\$ 266.32		\$ (13.23)	\$ 1,007,321.42	\$ 300.24
Mar-13		\$ 1,061,930.15	1.0000	\$ 1,061,930.23	3,423	\$ 310.23		\$ -	\$ 1,175,950.34	\$ 343.54
Apr-13		\$ 1,047,569.85	1.0000	\$ 1,047,569.88	3,311	\$ 316.39		\$ -	\$ 1,190,371.06	\$ 359.52
May-13		\$ 1,015,726.07	1.0000	\$ 1,015,726.09	3,286	\$ 309.11		\$ -	\$ 1,144,429.66	\$ 348.27
Jun-13		\$ 784,427.11	1.0000	\$ 784,427.13	3,210	\$ 244.37		\$ -	\$ 888,936.29	\$ 276.93
Jul-13		\$ 983,805.71	1.0000	\$ 983,805.63	3,237	\$ 303.93		\$ -	\$ 1,104,653.65	\$ 341.26
Aug-13		\$ 1,073,116.14	1.0000	\$ 1,073,116.13	3,180	\$ 337.46		\$ -	\$ 1,194,743.35	\$ 375.71
Sep-13		\$ 865,937.08	1.0000	\$ 865,937.06	3,255	\$ 266.03		\$ -	\$ 985,449.82	\$ 302.75
Oct-13		\$ 1,075,651.61	1.0000	\$ 1,075,651.67	3,362	\$ 319.94		\$ -	\$ 1,195,264.18	\$ 355.52
Nov-13		\$ 915,296.17	1.0000	\$ 915,327.35	3,327	\$ 275.12		\$ -	\$ 1,023,313.78	\$ 307.58
Dec-13		\$ 1,287,514.92	0.9999	\$ 1,287,581.80	3,355	\$ 383.78		\$ -	\$ 1,386,179.52	\$ 413.17
Jan-14	\$ 12,453,923.63	\$ 874,981.68	1.0000	\$ 875,024.32	3,090	\$ 283.18	\$ 1,067,460.53	\$ -	\$ 1,002,962.96	\$ 324.58
Feb-14		\$ 920,000.36	0.9906	\$ 928,727.34	3,044	\$ 305.10		\$ (211.48)	\$ 1,039,989.39	\$ 341.65
Mar-14		\$ 1,078,154.17	0.9999	\$ 1,078,271.64	2,946	\$ 366.01		\$ (227.93)	\$ 1,212,098.60	\$ 411.44
Apr-14		\$ 793,193.48	0.9998	\$ 793,317.72	2,709	\$ 292.85		\$ 52.86	\$ 894,006.04	\$ 330.01
May-14		\$ 773,136.58	0.9998	\$ 773,291.69	2,637	\$ 293.25		\$ (68.95)	\$ 869,411.92	\$ 329.70
Jun-14		\$ 780,909.27	0.9997	\$ 781,135.85	2,440	\$ 320.14		\$ (381.31)	\$ 866,393.37	\$ 355.08
Jul-14		\$ 538,151.80	0.9996	\$ 538,359.00	2,292	\$ 234.89		\$ (380.49)	\$ 609,343.46	\$ 265.86
Aug-14		\$ 752,387.27	0.9994	\$ 752,825.23	2,183	\$ 344.86		\$ (744.09)	\$ 825,797.29	\$ 378.29
Sep-14		\$ 628,203.09	0.9992	\$ 628,688.08	2,048	\$ 306.98		\$ (1,834.84)	\$ 696,427.94	\$ 340.05
Oct-14		\$ 650,991.13	0.9991	\$ 651,570.42	1,925	\$ 338.48		\$ (394.98)	\$ 721,887.30	\$ 375.01
Nov-14		\$ 535,079.66	0.9989	\$ 535,679.65	1,913	\$ 280.02		\$ (464.48)	\$ 600,113.37	\$ 313.70
Dec-14		\$ 477,180.58	0.9984	\$ 477,933.48	1,651	\$ 289.48		\$ (708.34)	\$ 538,489.31	\$ 326.16
Jan-15	\$ 6,485,479.77	\$ 383,558.44	0.9978	\$ 384,389.62	1,429	\$ 268.99	\$ 650,979.57	\$ (357.75)	\$ 446,193.23	\$ 312.24
Feb-15		\$ 361,251.41	0.9110	\$ 396,551.75	1,420	\$ 279.26		\$ (232.25)	\$ 454,609.43	\$ 320.15
Mar-15		\$ 573,927.40	0.9964	\$ 576,003.23	1,404	\$ 410.26		\$ (1,722.18)	\$ 642,650.48	\$ 457.73
Apr-15		\$ 521,585.68	0.9953	\$ 524,050.52	1,415	\$ 370.35		\$ (15,666.12)	\$ 581,654.63	\$ 411.06
May-15		\$ 309,540.56	0.9781	\$ 316,473.87	1,369	\$ 231.17		\$ (14,152.07)	\$ 357,505.48	\$ 261.14
Jun-15		\$ 671,747.14	0.9921	\$ 677,102.79	1,354	\$ 500.08		\$ (9.02)	\$ 734,250.99	\$ 542.28
Jul-15		\$ 505,937.78	0.9897	\$ 511,209.17	1,316	\$ 388.46		\$ (59.78)	\$ 575,157.49	\$ 437.05
Aug-15		\$ 318,386.29	0.9874	\$ 322,458.81	1,292	\$ 249.58		\$ (952.92)	\$ 365,964.88	\$ 283.25
Sep-15		\$ 389,003.34	0.9837	\$ 395,444.28	1,230	\$ 321.50		\$ (832.63)	\$ 436,705.63	\$ 355.05
Oct-15		\$ 386,625.72	0.9779	\$ 395,379.94	1,041	\$ 379.81		\$ (181.99)	\$ 432,470.89	\$ 415.44
Nov-15		\$ 394,478.11	0.9598	\$ 411,010.89	1,053	\$ 390.32		\$ (1,243.20)	\$ 463,458.19	\$ 440.13
Dec-15		\$ 496,708.09	0.9520	\$ 521,770.09	841	\$ 620.42		\$ (265.34)	\$ 556,527.96	\$ 661.75

* Express Completion Factor as a percentage

**Express Prescription Drug Rebates as a negative number

Table 2b. Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member & HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
#####	#####	#####	552,687	\$ 39,173,571.74	#####	\$ -	#####	\$279,945.74	\$ -	\$ (3,208,016.61)	\$ -
2015 Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$ 449.13
Loss Ratio											77.91%

*Express Prescription Drug Rebates as a negative number

Table 2c. Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member & HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
#####	#####	#####	552,687	#####	#####	\$ -	#####	\$ 279,945.74	\$ -	\$ (3,208,016.61)	\$ -
2015 Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$ 449.13
Loss Ratio											77.91%

*Express Prescription Drug Rebates as a negative number

Table 3b. Trend Components

Service Category	Cost*	Utilization*	Composite	Weight*
Inpatient Hospital	5.00%	1.90%	7.00%	18.62%
Outpatient Hospital	5.00%	1.90%	7.00%	33.96%
Professional	5.00%	1.90%	7.00%	25.15%
Other Medical	5.00%	1.90%	7.00%	2.48%
Capitation			3.00%	0.11%
Prescription Drugs	13.50%	0.05%	13.56%	19.67%
Total Annual Trend			8.29%	100.00%
2 Year Trend Projection			1.173	

<- Annualized Trend Factors on URRT

* Express Cost, Utilization, and Weight as percentages

Table 4b. 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-13		#####	1.0000	\$ 25,694,935.99	69,258	\$ 371.00		#####	#####	\$ 434.42
Feb-13		#####	1.0000	\$ 22,429,297.05	69,077	\$ 324.70		#####	#####	\$ 378.11
Mar-13		#####	1.0000	\$ 22,058,947.02	68,833	\$ 320.47		#####	#####	\$ 375.93
Apr-13		#####	1.0000	\$ 22,934,264.92	68,110	\$ 336.72		#####	#####	\$ 393.76
May-13		#####	1.0000	\$ 23,964,539.35	67,301	\$ 356.08		#####	#####	\$ 411.82
Jun-13		#####	1.0000	\$ 22,219,690.69	66,138	\$ 335.96		#####	#####	\$ 389.24
Jul-13		#####	1.0000	\$ 24,011,020.33	64,855	\$ 370.23		#####	#####	\$ 424.56
Aug-13		#####	1.0000	\$ 22,054,406.01	64,454	\$ 342.17		#####	#####	\$ 394.94
Sep-13		#####	1.0000	\$ 20,664,164.05	63,687	\$ 324.46		#####	#####	\$ 376.07
Oct-13		#####	1.0000	\$ 24,556,788.18	63,296	\$ 387.97		#####	#####	\$ 447.61
Nov-13		#####	1.0000	\$ 20,788,930.94	62,892	\$ 330.55		#####	#####	\$ 382.68
Dec-13	#####	#####	1.0000	\$ 22,224,577.46	64,213	\$ 346.11	#####	#####	#####	\$ 396.75
Jan-14		#####	1.0000	\$ 23,889,643.62	63,050	\$ 378.90		#####	#####	\$ 447.17
Feb-14		#####	0.9920	\$ 22,893,928.36	63,082	\$ 362.92		#####	#####	\$ 422.03
Mar-14		#####	0.9999	\$ 23,326,046.76	62,087	\$ 375.70		#####	#####	\$ 440.58
Apr-14		#####	0.9998	\$ 22,775,399.46	60,691	\$ 375.27		#####	#####	\$ 434.17
May-14		#####	0.9998	\$ 22,652,333.84	58,941	\$ 384.32		#####	#####	\$ 439.71
Jun-14		#####	0.9997	\$ 21,093,055.65	57,458	\$ 367.10		#####	#####	\$ 419.56
Jul-14		#####	0.9996	\$ 21,889,366.76	55,931	\$ 391.36		#####	#####	\$ 444.75
Aug-14		#####	0.9995	\$ 19,822,915.11	55,060	\$ 360.02		#####	#####	\$ 409.92
Sep-14		#####	0.9993	\$ 21,040,805.21	53,815	\$ 390.98		#####	#####	\$ 440.93
Oct-14		#####	0.9992	\$ 22,996,620.84	51,949	\$ 442.68		#####	#####	\$ 497.23
Nov-14		#####	0.9990	\$ 21,444,873.81	51,119	\$ 419.51		#####	#####	\$ 464.30
Dec-14	#####	#####	0.9987	\$ 18,190,125.06	47,229	\$ 385.15	#####	#####	#####	\$ 445.29
Jan-15		#####	0.9982	\$ 16,352,523.34	47,310	\$ 345.65		#####	#####	\$ 419.07
Feb-15		#####	0.9263	\$ 17,370,874.33	46,776	\$ 371.36		#####	#####	\$ 440.52
Mar-15		#####	0.9968	\$ 19,327,943.58	46,184	\$ 418.50		#####	#####	\$ 483.68
Apr-15		#####	0.9959	\$ 19,102,689.34	45,944	\$ 415.78		#####	#####	\$ 477.62
May-15		#####	0.9806	\$ 17,338,563.82	45,538	\$ 380.75		#####	#####	\$ 436.82
Jun-15		#####	0.9936	\$ 17,784,054.66	44,988	\$ 395.31		#####	#####	\$ 453.52
Jul-15		#####	0.9917	\$ 17,743,115.12	44,561	\$ 398.18		#####	#####	\$ 459.00
Aug-15		#####	0.9898	\$ 17,633,140.16	44,111	\$ 399.74		#####	#####	\$ 458.60
Sep-15		#####	0.9865	\$ 17,671,216.80	43,905	\$ 402.49		#####	#####	\$ 459.71
Oct-15		#####	0.9817	\$ 18,504,411.13	44,876	\$ 412.35		#####	#####	\$ 480.53
Nov-15		#####	0.9666	\$ 18,157,797.67	45,528	\$ 398.83		#####	#####	\$ 458.48
Dec-15	#####	#####	0.9612	\$ 20,119,244.17	52,966	\$ 379.85	#####	#####	#####	\$ 458.58

* Express Completion Factor as a percentage

**Express Prescription Drug Rebates as a negative number

PA Rate Template Part II
Rate Development and Change

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

2015 Total Allowed EHB Claims PMPM + EHB Capitation PMPM (net of prescription drug rebates)	\$449.13	<- Index Rate of Experience Period on URRT
2 Year Trend Projection Factor	1.173	
Unadjusted Projected Allowed EHB Claims PMPM	\$ 526.64	
Single Risk Pool Adjustment Factors		<- Adj't. from Experience to Projection Period - Pop'l risk Morbidity on URRT
Change in Morbidity	1.000	
Change in Other	0.981	<- Adj't. from Experience to Projection Period - Other on URRT
Change in Demographics	1.000	
Change in Network	0.969	
Change in Benefits	1.007	
Change in Other	1.005	
Adjusted Projected Allowed EHB Claims PMPM	\$ 516.61	<- Index Rate for Projection Period on URRT - Individual (Small Group 1st Qtr)
Adjusted Projected Allowed EHB Claims PMPM [will only populate for small group filings]	\$ 538.61	<- Index Rate for Projection Period on URRT - Small Group
Projected Paid to Allowed Ratio	0.749647065	<- Paid to Allowed Average Factor in Projection Period on URRT
Projected Paid EHB Claims PMPM	403.7639406	
Market-wide Adjustments		
Projected Paid Net Risk Adjustment PMPM	\$ 5.93	
Projected Paid Exchange User Fees PMPM	\$ -	
Market-Adjusted Projected Paid EHB Claims PMPM	\$ 409.70	
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 546.52	<- Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM	\$ -	
Market-Adjusted Projected Paid Total Claims PMPM	\$ 409.70	
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 546.52	

Table 6. Retention

Retention Items - Express in percentages		
Administrative Expenses	13%	
General and Claims	8.59%	
Agent/Broker Fees and Commissions	4.29%	
Quality Improvement Initiatives	0.34%	
Taxes and Fees	4.76%	
PCORI Fees (Enter \$ amount here: \$_____)	0.04%	
Pa Premium Tax (if applicable)	0.14%	
Federal Income Tax	0.70%	
Health Insurance Providers Fee (only for small group market, prorated for coverage in 2018)	1.88%	
Profit/Contingency	2%	
Total Retention	20%	
Projected Required Revenue PMPM	\$ 510.86	<- Single Pool Gross Premium Avg. Rate, PMPM on URRT

Table 8. Components of Rate Change

Rate Components	2016	2017	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	302.7681247	331.1430323	\$28.37	9.4%
B. Base period allowed claims before normalization	\$ 437.83	\$ 449.13	\$11.30	4%
C. Normalization factor component of change	\$ (98.31)	-136.4836897	-\$38.18	-\$0.13
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 339.52	\$ 312.65	\$ (26.87)	-9%
D2. URRT Trend	\$ 55.89	\$ 53.95	\$ (1.94)	-1%
D3. URRT Morbidity	\$ 10.98	\$ -	\$ (10.98)	-4%
D4. URRT Other	\$ (22.47)	\$ (6.98)	\$ 15.49	5%
D5. Normalized URRT RA/RI on an allowed basis	\$ 2.45	\$ 5.51	\$ 3.06	1%
D6. Normalized Exchange User Fee on an allowed basis	\$ 4.49	\$ -	\$ (4.49)	-1%
D7. Subtotal - Sum(D1:D6)	\$ 390.87	\$ 365.13	\$ (25.73)	-8%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ (66.45)	-10.95397921	\$ 55.49	18%
E2. Pricing AV	\$ (78.21)	\$ (99.11)	\$ (20.89)	-7%
E3. Benefit Richness	\$ (14.77)	\$ -	\$ 14.77	5%
E4. Catastrophic Eligibility	\$ -	\$ -	\$ -	0%
E5. Subtotal - Sum(E1:E4)	\$ (159.43)	\$ (110.06)	\$ 49.37	16%
F. Change in Retention Components				
F1. Administrative Expenses	\$ 39.36	\$ 43.75	\$ 4.39	1%
F2. Taxes and Fees	\$ 11.32	\$ 9.15	\$ (2.18)	-1%
F3. Profit and/or Contingency	\$ 6.06	\$ 6.62	\$ 0.57	0%
F4. Subtotal - Sum(F1:F3)	\$ 56.74	\$ 59.52	\$ 2.78	1%
G. Change in Miscellaneous Items	\$ -	\$ -	\$ -	0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 288.17	\$ 314.59	\$ 26.42	9%

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

	January	April	July	October	Total Single Risk Pool
# of Member Months Renewing in Quarter	145,949	53,966	87,531	401,210	688,656.00
Percent of Members Months Renewing in Quarter	21%	8%	13%	58%	100%
Base Allowed Claims	\$ 516.61	\$ 516.61	\$ 516.61	\$ 516.61	\$ 516.61
Months of Trend	-	3	6	9	6
Annual Trend	8.29%	8.29%	8.29%	8.29%	8.29%
Single Risk Pool Projected Allowed Claims	\$ 516.61	\$ 526.99	\$ 537.59	\$ 548.39	\$ 538.61

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2016	2017
Average Age Factor	1.463	1.479
Average Geographic Factor	1.002	1.001
Average Tobacco Factor	1.000	1.000
Average Benefit Richness (induced demand)	1.000	1.000
Average Network Factor	0.880	0.970
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 468.96	\$ 546.52
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 363.66	\$ 380.44

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

	2016	2017
Paid-to-Allowed	0.758918424	0.749647065
URRT Trend (2-Year Trend Factor)	1.164619088	1.17
URRT Morbidity	1.027777778	1.000
URRT "Other"	0.9447	0.981
Risk Adjustment	\$ 0.15	\$ 5.93
Reinsurance	\$ 2.25	\$ -
Exchange User Fee	\$ 4.39	\$ -
Capitation	\$ 0.60	\$ 0.54
Network	0.830	0.97
Pricing AV	0.759	0.720179022
Benefit Richness	0.940	1
Catastrophic Eligibility	1.000	1
Administrative Expenses	13.00%	13.21%
Taxes and Fees	3.74%	2.76%
Profit and/or Contingency	2.00%	2.00%

PA Rate Template Part III
Table 10. Plan Rates

Carrier Name: Keystone Health Plan Central
Plan Type(s): HMO
Market Segment: Small Group
Rate Effective Date: 1/1/2017
Market Adjusted Index Rate: \$ 546.52

Calibration	
Age Calibration Factor	1.47934739
Geographic Calibration Factor	1.001
Aggregate Calibration Factor	1.481

		1/1/2017				45 CFR Part 156.8 (d) (2) Allowable Factors																		2016		2017 Calibrated		Change																			
		Market Adjusted Index Rate		\$ 546.52																				Calibrated Plan Adjusted Index Rate PMPM		Plan Adjusted Index Rate PMPM		Compared to Prior 12 months		% of Total Covered Lives																	
		Plan Type (HMO, POS, PPO, EPO, Indemnity, Other)		1/1/16 Plan Marketing Name		Discontinued, New, Modified, Existing (D,N,M,E) for 2017		1/1/17 Plan Marketing Name (If 1/1/16 Plan Discontinued)		Metallic Tier		Metallic Tier Actual 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		Tobacco Surcharge Adjustment		Pure Premium		Admin Costs		Taxes & Fees (not including Exchange fees)		Profit or Contingency		Total Covered Lives @ 2/1/2016		Total Policyholders @ 2/1/2016							
Plan Number		HIOS Plan ID (Standard Component)																																													
Totals												0.720						0.720		1.000		1.000		1.000		1.000		1.000		1.000		\$ 393.59		13.0%		4.8%		2.0%		304		214		\$ 302.77 \$ 331.14		9.37%	
Plan 1	53789PA0090007	HMO	Healthy Benefits HMO 2000	M	Gold HMO 2000/0/30 Rx \$	Gold	0.79142442	Standard	Off	0.798	1.000	1.000	1.000	1.000	1.000	1.000	\$435.90	11.9%	4.8%	2.0%																											
Plan 2	53789PA0090008	HMO	Healthy Benefits HMO 2000	M	Gold HMO 2000/0/30 Rx \$	Gold	0.79011382	Standard	Off	0.814	1.000	1.000	1.000	1.000	1.000	1.000	\$444.64	11.7%	4.8%	2.0%																											
Plan 3	53789PA0090011	HMO	Healthy Benefits HMO 4000	M	Silver HMO 4000/0/35 Rx	Silver	0.70046462	Standard	Off	0.694	1.000	1.000	1.000	1.000	1.000	1.000	\$379.53	13.4%	4.8%	2.0%																											
Plan 4	53789PA0090012	HMO	Healthy Benefits HMO 4000	M	Silver HMO 4000/0/35 Rx	Silver	0.70564246	Standard	Off	0.710	1.000	1.000	1.000	1.000	1.000	1.000	\$388.28	13.1%	4.8%	2.0%																											
Plan 5	53789PA0090004	HMO	Healthy Benefits HMO 6350	M	Bronze HMO 7000/0/60	Bronze	0.61940294	Standard	Off	0.545	1.000	1.000	1.000	1.000	1.000	1.000	\$297.81	16.4%	4.8%	2.0%																											
Plan 6	53789PA0070001	HMO	Healthy Benefits HMO 4750	D	Bronze HMO 7000/0/60	Bronze	0.61940294	Standard	Off	0.545	1.000	1.000	1.000	1.000	1.000	1.000	\$297.81	16.4%	4.8%	2.0%																											
Plan 7	53789PA0070002	HMO	Healthy Benefits HMO 0.50	D	Silver HMO 4000/0/35 Rx	Silver	0.70046462	Standard	Off	0.694	1.000	1.000	1.000	1.000	1.000	1.000	\$379.53	13.4%	4.8%	2.0%																											
Plan 8	53789PA0070003	HMO	Healthy Benefits HMO 5000	D	Gold HMO 2000/0/30 Rx \$	Gold	0.79142442	Standard	Off	0.798	1.000	1.000	1.000	1.000	1.000	1.000	\$435.90	11.9%	4.8%	2.0%																											
Plan 9	53789PA0070004	HMO	Healthy Benefits HMO 2000	D	Gold HMO 2000/0/30 Rx \$	Gold	0.79142442	Standard	Off	0.798	1.000	1.000	1.000	1.000	1.000	1.000	\$435.90	11.9%	4.8%	2.0%																											
Plan 10	53789PA0080001	HMO	Healthy Benefits Value HMO	D	Bronze HMO 7000/0/60	Bronze	0.61940294	Standard	Off	0.545	1.000	1.000	1.000	1.000	1.000	1.000	\$297.81	16.4%	4.8%	2.0%																											
Plan 11	53789PA0080002	HMO	Healthy Benefits Value HMO	D	Silver HMO 4000/0/35 Rx	Silver	0.70046462	Standard	Off	0.694	1.000	1.000	1.000	1.000	1.000	1.000	\$379.53	13.4%	4.8%	2.0%																											
Plan 12	53789PA0080003	HMO	Healthy Benefits Value HMO	D	Silver HMO 4000/0/35 Rx	Silver	0.70046462	Standard	Off	0.694	1.000	1.000	1.000	1.000	1.000	1.000	\$379.53	13.4%	4.8%	2.0%																											
Plan 13	53789PA0080004	HMO	Healthy Benefits Value HMO	D	Bronze HMO 7000/0/60	Bronze	0.61940294	Standard	Off	0.545	1.000	1.000	1.000	1.000	1.000	1.000	\$297.81	16.4%	4.8%	2.0%																											
Plan 14	53789PA0080005	HMO	Healthy Benefits Value HMO	D	Silver HMO 4000/0/35 Rx	Silver	0.70046462	Standard	Off	0.694	1.000	1.000	1.000	1.000	1.000	1.000	\$379.53	13.4%	4.8%	2.0%																											
Plan 15	53789PA0080006	HMO	Healthy Benefits Value HMO	D	Silver HMO 4000/0/35 Rx	Silver	0.70046462	Standard	Off	0.694	1.000	1.000	1.000	1.000	1.000	1.000	\$379.53	13.4%	4.8%	2.0%																											
Plan 16	53789PA0080007	HMO	Healthy Benefits Value HMO	D	Bronze HMO 7000/0/60	Bronze	0.61940294	Standard	Off	0.545	1.000	1.000	1.000	1.000	1.000	1.000	\$297.81	16.4%	4.8%	2.0%																											
Plan 17	53789PA0080008	HMO	Healthy Benefits Value HMO	D	Silver HMO 4000/0/35 Rx	Silver	0.70046462	Standard	Off	0.694	1.000	1.000	1.000	1.000	1.000	1.000	\$379.53	13.4%	4.8%	2.0%																											
Plan 18	53789PA0080009	HMO	Healthy Benefits Value HMO	D	Silver HMO 4000/0/35 Rx	Silver	0.70046462	Standard	Off	0.694	1.000	1.000	1.000	1.000	1.000	1.000	\$379.53	13.4%	4.8%	2.0%																											
Plan 19	53789PA0080010	HMO	Healthy Benefits Value HMO	D	Silver HMO 4000/0/35 Rx	Silver	0.70564246	Standard	Off	0.710	1.000	1.000	1.000	1.000	1.000	1.000	\$388.28	13.1%	4.8%	2.0%																											
Plan 20	53789PA0080011	HMO	Healthy Benefits Value HMO	D	Silver HMO 4000/0/35 Rx	Silver	0.70564246	Standard	Off	0.710	1.000	1.000	1.000	1.000	1.000	1.000	\$388.28	13.1%	4.8%	2.0%																											
Plan 21	53789PA0080012	HMO	Healthy Benefits Value HMO	D	Silver HMO 4000/0/35 Rx	Silver	0.70564246	Standard	Off	0.710	1.000	1.000	1.000	1.000	1.000	1.000	\$388.28	13.1%	4.8%	2.0%																											
Plan 22	53789PA0090003	HMO	Healthy Benefits HMO 0.0	PHD	Silver HMO 4000/0/35 Rx	Silver	0.70564246	Standard	Off	0.710	1.000	1.000	1.000	1.000	1.000	1.000	\$388.28	13.1%	4.8%	2.0%																											
Plan 23	53789PA0090005	HMO	Healthy Benefits HMO 1000	D	Gold HMO 2000/0/30 Rx \$	Gold	0.79142442	Standard	Off	0.798	1.000	1.000	1.000	1.000	1.000	1.000	\$435.90	11.9%	4.8%	2.0%																											
Plan 24	53789PA0090006	HMO	Healthy Benefits HMO 1000	D	Gold HMO 2000/0/30 Rx \$	Gold	0.79011382	Standard	Off	0.814	1.000	1.000	1.000	1.000	1.000	1.000	\$444.64	11.7%	4.8%	2.0%																											
Plan 25	53789PA0090009	HMO	Healthy Benefits HMO 3000	D	Silver HMO 4000/0/35 Rx	Silver	0.70046462	Standard	Off	0.694	1.000	1.000	1.000	1.000	1.000	1.000	\$379.53	13.4%	4.8%	2.0%																											
Plan 26	53789PA0090010	HMO	Healthy Benefits HMO 3000	D	Silver HMO 4000/0/35 Rx	Silver	0.70564246	Standard	Off	0.710	1.000	1.000	1.000	1.000	1.000	1.000	\$388.28	13.1%	4.8%	2.0%																											
Plan 27																	\$0.00							</																							

Table 11. Plan Premium Development for 21-Year-Old Non-Tobacco User

Plan Number	HIOS Plan ID (Standard Component)	1/1/16 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2017	1/1/17 Plan Marketing Name (If 1/1/16 Plan Discontinued)	Metallic Tier	Exchange On/Off or Off
Totals						
These cells auto-fill using the data entered in Table 9.						

			Discontinued, New, Modified, Existing (D,N,M,E) for 2017	1/1/17 Plan Marketing Name (if 1/1/16 Plan Discontinued)		Metallic Tier	Exchange On/Off or Off
Plan Number	HIOS Plan ID (Standard Component)	1/1/16 Plan Marketing Name					
Totals	These cells auto-fill using the data entered in Table 9.						
Plan 1	53789PA0090007	Healthy Benefits HMO 2	M	Gold HMO 2000/0/30	Bx	Gold	Off
Plan 2	53789PA0090008	Healthy Benefits HMO 2	M	Gold HMO 2000/0/30	Bx	Gold	Off
Plan 3	53789PA0090011	Healthy Benefits HMO 4	M	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 4	53789PA0090012	Healthy Benefits HMO 4	M	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 5	53789PA0090004	Healthy Benefits HMO 6	M	Silver HMO 7000/0/60	Bronze	Off	Off
Plan 6	53789PA0070001	Healthy Benefits HMO 4	D	Bronze HMO 7000/0/60	Bronze	Off	Off
Plan 7	53789PA0070002	Healthy Benefits HMO 0	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 8	53789PA0070003	Healthy Benefits HMO 14	D	Gold HMO 2000/0/30	Bx	Gold	Off
Plan 9	53789PA0070004	Healthy Benefits HMO 2	D	Gold HMO 2000/0/30	Bx	Gold	Off
Plan 10	53789PA0080001	Healthy Benefits Value H	D	Bronze HMO 7000/0/60	Bronze	Off	Off
Plan 11	53789PA0080002	Healthy Benefits Value H	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 12	53789PA0080003	Healthy Benefits Value H	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 13	53789PA0080004	Healthy Benefits Value H	D	Bronze HMO 7000/0/60	Bronze	Off	Off
Plan 14	53789PA0080005	Healthy Benefits Value H	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 15	53789PA0080006	Healthy Benefits Value H	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 16	53789PA0080007	Healthy Benefits Value H	D	Bronze HMO 7000/0/60	Bronze	Off	Off
Plan 17	53789PA0080008	Healthy Benefits Value H	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 18	53789PA0080009	Healthy Benefits Value H	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 19	53789PA0080010	Healthy Benefits Value H	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 20	53789PA0080011	Healthy Benefits Value H	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 21	53789PA0080012	Healthy Benefits Value H	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 22	53789PA0090003	Healthy Benefits HMO 0	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 23	53789PA0090005	Healthy Benefits HMO 1	D	Gold HMO 2000/0/30	Bx	Gold	Off
Plan 24	53789PA0090006	Healthy Benefits HMO 1	D	Gold HMO 2000/0/30	Bx	Gold	Off
Plan 25	53789PA0090009	Healthy Benefits HMO 3	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 26	53789PA0090010	Healthy Benefits HMO 3	D	Silver HMO 4000/0/35	Bx	Silver	Off
Plan 27	0	0	0	0	0	0	0
Plan 28	0	0	0	0	0	0	0
Plan 29	0	0	0	0	0	0	0
Plan 30	0	0	0	0	0	0	0
Plan 31	0	0	0	0	0	0	0
Plan 32	0	0	0	0	0	0	0
Plan 33	0	0	0	0	0	0	0
Plan 34	0	0	0	0	0	0	0
Plan 35	0	0	0	0	0	0	0
Plan 36	0	0	0	0	0	0	0
Plan 37	0	0	0	0	0	0	0
Plan 38	0	0	0	0	0	0	0
Plan 39	0	0	0	0	0	0	0
Plan 40	0	0	0	0	0	0	0
Plan 41	0	0	0	0	0	0	0
Plan 42	0	0	0	0	0	0	0
Plan 43	0	0	0	0	0	0	0
Plan 44	0	0	0	0	0	0	0
Plan 45	0	0	0	0	0	0	0
Plan 46	0	0	0	0	0	0	0
Plan 47	0	0	0	0	0	0	0
Plan 48	0	0	0	0	0	0	0
Plan 49	0	0	0	0	0	0	0
Plan 50	0	0	0	0	0	0	0
Plan 51	0	0	0	0	0	0	0
Plan 52	0	0	0	0	0	0	0
Plan 53	0	0	0	0	0	0	0
Plan 54	0	0	0	0	0	0	0
Plan 55	0	0	0	0	0	0	0
Plan 56	0	0	0	0	0	0	0
Plan 57	0	0	0	0	0	0	0
Plan 58	0	0	0	0	0	0	0
Plan 59	0	0	0	0	0	0	0
Plan 60	0	0	0	0	0	0	0
Plan 61	0	0	0	0	0	0	0
Plan 62	0	0	0	0	0	0	0
Plan 63	0	0	0	0	0	0	0
Plan 64	0	0	0	0	0	0	0
Plan 65	0	0	0	0	0	0	0
Plan 66	0	0	0	0	0	0	0
Plan 67	0	0	0	0	0	0	0
Plan 68	0	0	0	0	0	0	0
Plan 69	0	0	0	0	0	0	0
Plan 70	0	0	0	0	0	0	0
Plan 71	0	0	0	0	0	0	0
Plan 72	0	0	0	0	0	0	0
Plan 73	0	0	0	0	0	0	0
Plan 74	0	0	0	0	0	0	0
Plan 75	0	0	0	0	0	0	0
Plan 76	0	0	0	0	0	0	0
Plan 77	0	0	0	0	0	0	0
Plan 78	0	0	0	0	0	0	0
Plan 79	0	0	0	0	0	0	0
Plan 80	0	0	0	0	0	0	0
Plan 81	0	0	0	0	0	0	0
Plan 82	0	0	0	0	0	0	0
Plan 83	0	0	0	0	0	0	0
Plan 84	0	0	0	0	0	0	0
Plan 85	0	0	0	0	0	0	0
Plan 86	0	0	0	0	0	0	0
Plan 87	0	0	0	0	0	0	0
Plan 88	0	0	0	0	0	0	0
Plan 89	0	0	0	0	0	0	0
Plan 90	0	0	0	0	0	0	0
Plan 91	0	0	0	0	0	0	0
Plan 92	0	0	0	0	0	0	0
Plan 93	0	0	0	0	0	0	0
Plan 94	0	0	0	0	0	0	0
Plan 95	0	0	0	0	0	0	0
Plan 96	0	0	0	0	0	0	0
Plan 97	0	0	0	0	0	0	0
Plan 98	0	0	0	0	0	0	0
Plan 99	0	0	0	0	0	0	0
Plan 100	0	0	0	0	0	0	0

[illegible][illegible][illegible][illegible]

PA Rate Template Part V Consumer Factors

Table 12. Age and Tobacco Factors

2017 Age and Tobacco Factors						
Age Band	Age Factor	Tobacco Factor		Age Band	Age Factor	Tobacco Factor
0-20	0.635			43	1.357	1
21	1.000	1		44	1.397	1
22	1.000	1		45	1.444	1
23	1.000	1		46	1.500	1
24	1.000	1		47	1.563	1
25	1.004	1		48	1.635	1
26	1.024	1		49	1.706	1
27	1.048	1		50	1.786	1
28	1.087	1		51	1.865	1
29	1.119	1		52	1.952	1
30	1.135	1		53	2.040	1
31	1.159	1		54	2.135	1
32	1.183	1		55	2.230	1
33	1.198	1		56	2.333	1
34	1.214	1		57	2.437	1
35	1.222	1		58	2.548	1
36	1.230	1		59	2.603	1
37	1.238	1		60	2.714	1
38	1.246	1		61	2.810	1
39	1.262	1		62	2.873	1
40	1.278	1		63	2.952	1
41	1.302	1		64+	3.000	1
42	1.325	1				

*PA follows the federal default age curve.

Table 13. Geographic Factors

Geographic Area Factors			
Area	Counties	Current Factor	Proposed Factor
Rating Area 1		1.000	1.000
Rating Area 2		1.000	1.000
Rating Area 3		1.000	1.000
Rating Area 4		1.000	1.000
Rating Area 5		1.000	1.000
Rating Area 6	Centre, Columbia, Lehigh, Mifflin, Montour, Northampton, Northumberland, Schuttkill, Snyder, Union	1.000	1.000
Rating Area 7	Adams, Berks, Lancaster, York	1.010	1.010
Rating Area 8		1.000	1.000
Rating Area 9	Cumberland, Dauphin, Franklin, Fulton, Juniata, Lebanon, Perry	0.990	0.990

Table 14. Network Factors

[illegible]

KEYSTONE HEALTH PLAN CENTRAL, INC.

ACTUARIAL MEMORANDUM

Small Group Rates

Effective January 1, 2017

General Information

Company Information

- Company Legal Name: Keystone Health Plan Central
- State: PA
- HIOS Issuer ID: 53789
- Market: Small Group
- Effective Date: 1/1/2017

PID Company Information

- Company Name: Keystone Health Plan Central (KHPC)
- NAIC: 95199
- Market: Small Group
- On/Off Exchange: Off Exchange
- Effective Date: 1/1/2017
- Average Rate Change: 8.0%
- Range of Requested Rate Change: -4.6% to 39.1%
- Product: HMO
- Rating Areas: 6,7,9
- Metal Levels: Gold, Silver, Bronze
- Current Covered Lives and Policyholders: 901/600
- Number of Plans: 5
- Contract Form #: C17-KHPC-SPG
- Form Filing SERFF #: CABC-130534767
- Binder SERFF #: CABC-PA17-125060075
- HIOS Issuer ID: 53789
- HIOS Submission Tracking Number: 53789-687360061172921375

Company Contact Information

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

Scope and Purpose

By this filing, Keystone Health Plan Central (KHPC), a subsidiary of Capital BlueCross (CBC), submits rates for products to be made available to all small groups effective January 1, 2017. KHPC will offer small group products off the federally-facilitated exchange.

Proposed Rate Increases

KHPC is proposing an aggregate annual increase of 8.0%. The rate change does vary by plan. The rate change is calculated in PA Rate Template Part IV, Table 11, cell AZ13.

Rate Change Summary

The Rate Change Summary submitted with this filing contains 2015 small group (1-50 employees) financial information. Please note this exhibit does not match KHPC's Supplemental Health Care Exhibit (SHCE), as the SHCE submitted for 2015 applies to employer size of 1-100 employees.

Please note that prior to the enactment of the Protecting Affordable Coverage for Employees ("PACE") Act, H.R. 1624, which was signed into law on October 7, 2015, a small employer was defined using a "1-100 employees" test, with an available state election to use a "1-50 employees" test for plan years beginning before January 1, 2016. PHSA §2791(e)(2)(4)(2014), ACA § 1304(b)(1)-(3) (2014).

Based on the absence of an explicit election on the part of the Commonwealth to use the "1-50 employees" test, as well as other factors, CBC received confirmation from the Pennsylvania Insurance Department that CBC and its subsidiaries could use the "1-100 employees" test until January 1, 2016. Accordingly, CBC and its subsidiaries used a small group size of "1-100 employees" for MLR and related financial reporting for years ending on or before December 31, 2015. Beginning with January 1, 2016, in accordance with the PACE Act, CBC and its subsidiaries began using the "1-50 employees" test for all purposes. For these reasons, certain information including the premiums, claims and administrative expense amounts used in this filing, and which appear in the Rate Change Request Summary (Attachment 1), do not match amounts shown in the Supplemental Health Care Reporting Exhibit included in the 2015 Annual Financial Statement for the market.

It is important to note, that to the best of our knowledge, the use of the "1-100 employees" test as opposed to the "1-50 employees" test did not affect the requirement that KHPC provide a rebate to customers based upon its MLR for the year 2015.

Rate History and Proposed Variations in Rate Changes

Market	Company	Effective Date	SERFF #	Annual Increase
Small Group	KHPC	1/1/2014	CABC-129033971	0.00%
Small Group	KHPC	1/1/2015	CABC-129636213	7.00%
Small Group	KHPC	1/1/2016	CABC-130076082	-2.00%

Benefit Changes 2016-2017

There are several benefit changes being implemented in 2017. All benefit changes comply with the uniform modification of coverage standards described in 45 CFR 147.106(e). Any plan with a benefit change that did not meet the uniform modification of coverage standard was terminated, and a new plan was created in its place. All terminated plans are listed in Exhibit R, and a summary of proposed 2017 benefits is included in Exhibit A.

Benefit changes by plan are listed in Exhibit A1, highlighted in yellow.

KHPC is discontinuing its on-exchange narrow network product. KHPC will offer a broad network product off-exchange.

Experience Period Premium and Claims

Base Experience Period: The base experience period (BEP) includes completed fee-for-service paid and incurred claims for dates of service between January 1, 2015 and December 31, 2015.

Paid Through Date: Claims in the BEP are paid through March 31, 2016

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

Allowed and Incurred Claims during the Experience Period:

	Incurred	Allowed
Amount of claims processed through the issuer's claim system:	\$5,277,075	\$5,914,354
Amount of claims processed outside of the issuer's claim system:	0	0
Amount of claims that represent best estimate of incurred but not paid:	\$119,095	\$278,114

Allowed claims are developed by combining paid claims with member cost-sharing.

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

1. Historical fee-for-service claims are viewed by date of service and date of payment in a claims triangle.
2. The claims triangle payments are then accumulated by date of service to develop factors that represent the rate of accumulation or rate of “completion”.
3. Historical rates of completion by duration are used to derive projected rates of completion. Some of the methods used to develop projected completion factors are averages (e.g. harmonic averages, time weighted averages, geometric averages) and regression methods. Numerous items are considered when viewing these averages or regression statistics, such as the impact of high claims on perceived completion patterns.
4. For durations that exhibit a projected completion factor greater than the Valuation Actuary’s chosen threshold (e.g. 80% complete), cumulative paid and incurred claims are divided by the projected completion factor to arrive at ultimate incurred claims. For durations that are less than the chosen threshold, a projection methodology is used. Similar to completion factor development, projection methodologies are worthy of a lengthy discussion. In general, an ultimate incurred claims PMPM is derived by projecting a recent 12-month period to the current month(s) and seasonally adjusting.
5. With all months having both a cumulative paid amount and an estimated ultimate incurred amount, the completion factors used in pricing are calculated by taking the quotient of the two. Allowed completion and incurred completion are assumed to be identical.
6. Both allowed and paid claims in the BEP are completed by applying completion factors by incurred month developed in Step 6.

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

$$\begin{aligned} &BEP\ Allowed\ Claims \\ &= \sum \frac{BEP\ Paid\ Claims + BEP\ Member\ Cost\ Share\ by\ Incurred\ Month}{Completion\ by\ Incurred\ Month} \end{aligned}$$

Benefit Categories

Claims in the benefit categories displayed in the URRT come directly from CBC’s data warehouse. See Exhibit C for a description of benefits by benefit category.

Projection Factors

Changes in Benefits:

1. Pediatric Dental and Pediatric Vision: The following PMPM allowed charges are added to the projection period allowed claims PMPM:

- Pediatric dental coverage: 5.01
- Pediatric vision coverage 0.46

This was added to the projected allowed claims in Exhibit B by applying a factor to the experience period, “Other Medical” claims. The development of pediatric dental and vision projected claims is described below.

See Exhibit C for the pediatric dental and vision rate development.

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

Other Adjustments: Found in URRT, Worksheet 1, “Other”.

1. List-Billed Adjustment: KHPC is adjusting the claim experience for the impact of the list-billing rating methodology required under CFR Part 147.102. This section requires that family rates are calculated by summing the premiums for each individual family member, provided at most three child dependents under age 21 are taken into account. This rating rule requires an adjustment to premium.
2. Network Adjustment: KHPC is adjusting the claim experience for the impact of the HMO network. HMO is a managed care arrangement product with savings over a PPO network.

Trend Factors: Trend levels reflect our best estimate of changes in utilization, provider reimbursement contracts, the network of facilities and providers, disease management initiatives and the impact of utilization management.

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

1. Base Cost/ Change in hospital and physician contracting: The contracted increase in reimbursements to hospitals and physicians is the basis of cost trends. KHPC uses a hospital and physician contracting model to determine future trends. This model contains all known contracted payment increases, as well as estimated increases in provider payments.
2. Utilization Considerations:
 - a. Intensity of medical services rendered
 - b. Changes in place of service (e.g. continued migration of inpatient stays to outpatient setting)
 - c. Further migration from brand prescription drugs to generic prescription drugs
 - d. Favorable impacts of value based benefits designs
3. Intensity: Intensity is defined as the amount of inputs used to provide each unit of service. This can best be seen in an example:

Year 2015

<u>Type of Service</u>	<u>Units</u>	<u>Cost per Unit</u>
X-Ray	1	\$200
MRI	1	\$5,000
Total	2	\$5,200

Year 2016

<u>Type of Service</u>	<u>Units</u>	<u>Cost per Unit</u>
X-Ray	0	\$200
MRI	2	\$5,000
Total	2	\$10,000

Total Annual Trend	92%
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2. **Underwriting Cycle:** The underwriting cycle is defined as the tendency to swing between profitable and unprofitable periods over time. The underwriting cycle is exacerbated partly by pricing performed with incomplete information as to the level of current experience trends. A reaction delay occurs, as carriers tend to rely on measurements of past experience in developing current pricing assumptions. As a result, carriers are often increasing their pricing trends when actual experience trends have begun to decline, and decreasing their pricing trends actual trends are increasing. KHPC strives to mitigate the underwriting cycle by keeping trends consistent through times of increasing and decreasing claim cost and utilization.

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

Credibility Manual Rate Development

For the purpose of rate development, KHPC small group HMO products are combined with other product offerings (PPO, Traditional, Comprehensive, Drug) from CBC subsidiaries. KHPC has approximately 900 members, while CBC's total small group block is close to 60,000 members, making the combination of experience necessary according to credibility standards. Combining the experience is actuarially justifiable for several reasons:

1. The demographics of members buying HMO and other products are similar.
2. Cost and utilization between HMO and other products are similar.
3. Medical policy between HMO and other products are almost identical, with the exception of referrals and no out-of-network benefit on HMO. These two cost-saving features of HMO are valued in the projected claim costs (Paid-to-Allowed Ratio section below.)

The credibility manual PMPMs are the combination of Capital Advantage Insurance Company (CAIC) and Capital Advantage Assurance Company (CAAC) medical and drug claim experience, KHPC HMO data, and vendor pediatric vision data. All data is trended and benefit-adjusted in the same manner as the experience data (same projection factors and trend).

Credibility of Experience

Credibility Manual Rate Development: The credibility manual was given 100% credibility for reasons described in the section above.

Paid to Allowed Ratio

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

Projected Paid and Incurred Claims are calculated as follows:

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

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

The development of completion factors is described in Experience Period Premium and Claims above.

3. Develop the *BEP Paid and Incurred Claim PMPM*:

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

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

Trended Claim PMPM

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

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

Projected Paid and Incurred Claims PMPM

$$= [\text{Trended Claim PMPM}] \times [\text{Benefit Network Adjustment}] \\ \times [\text{Network Adjustment}] \times [\text{Morbidity Adjustment}] \times [\text{List} \\ - \text{Billed Adjustment}]$$

The *Benefit Adjustment*, *Network Adjustment*, *Morbidity Adjustment*, and *List-Billed Adjustment* are discussed in the Projections Factors section above.

6. Develop *Projected Claims PMPM* by *Benefit* as follows:

- a. KHPC uses an actuarial cost model to measure the impact of cost-sharing designs on cost and utilization amounts by service category. The cost model shows frequency per 1,000 per year by type of service (IP, OP, Professional), and allowed cost per service for each of the same types of service, normalized to a \$0 office visit copayment and a \$25 ER copayment. Given a particular benefit design (for example, \$20 office visit copayment), utilization is adjusted from the benchmark based on assumed utilization change factors, and cost per service is reduced by the copayment or coinsurance per service. Cost and utilization are multiplied together to derive a PMPM by service, summed for all services. The impact of global deductible, coinsurance, and out-of-pocket max is then measured based on cumulative probability distributions (CPDs), where the value of services that apply to the CPDs adjusts the level of the curve, as well as global utilization adjustments.
- b. This actuarial cost model derives a Manual Cost for each benefit design in the experience period, as well as plans being offered in the projection period. The average Manual Cost of the experience is compared to the Manual Cost of the base plan (Healthy Benefits HMO 500.0 EX). The projected experience period data is then adjusted to the base plan:

$$\text{Benefit Level Adjustment} = \frac{\text{Average Manual Cost in Experience Period}}{\text{Manual Cost of Base Plan}}$$

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

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

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

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

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

$$\begin{aligned} & \text{Projected Claims PMPM Benefit A} \\ &= \text{Projected Claims PMPM Base Plan} \\ & \times \text{Pricing Relativity A} \end{aligned}$$

- b. And to arrive at the *Total Projected Claims PMPM*, KHPC assumes a distribution of members across the benefit plans being offered in 2016. The *Total Projected Claims PMPM* :

$$\begin{aligned} &= \text{Projected Claims PMPM Benefit A} \times \text{Expected Member Dist of Benefit A} \\ &+ \text{Projected Claims PMPM Benefit B} \\ & \times \text{Expected Member Dis of Benefit B} + \dots \end{aligned}$$

- 7. The Paid-To-Allowed Ratio is then:

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

See Exhibit G for the development of the *Paid-to-Allowed Ratio*.

Risk Adjustment and Reinsurance

Projected Risk Adjustments PMPM:

Relevant to 2017 pricing is the impact of Commercial Risk Adjustment (CRA) payment transfers that are expected to be earned in 2017. The 2017 pricing impact is:

$$\begin{aligned} & [\text{Net Projected Risk Adjustments PMPM}] \\ &= [\text{Projected CRA Transfer PMPM}] - [\text{Risk Adjustment Fee PMPM}] \end{aligned}$$

The following items are those that we deem important in generating a CRA payment transfer adjustment:

1. Risk profile of the those enrolled in CRA eligible plans for the market or state (i.e. competitors) relative to risk profile of CRA eligible membership enrolled in our plans
2. Statewide average premiums
3. Current market penetration of this company and competitors in the market and in the state
4. The impact of transitional policies throughout the remainder of 2016 and 2017

Given the uncertainty of the five bullets above, it is difficult to determine whether the impact of 2016 earned CRA payment transfers will be positive or negative. Therefore, an appropriate estimate of [Projected CRA Transfer PMPM] is \$0.

To fund the HHS-risk adjustment program, issuers will remit to HHS a fee of \$0.13 PMPM. The Risk Adjustment Fee PMPM is included in the URRT Worksheet 1, “Projected Risk Adjustments PMPM”.

$$[Net\ Projected\ Risk\ Adjustments\ PMPM] = 0 - 0.13 = -0.13\ PMPM$$

Projected ACA Reinsurance Recoveries:

$$\begin{aligned} [Net\ Projected\ ACA\ Reinsurance\ Recoveries\ PMPM] \\ = [Projected\ ACA\ Reinsurance\ Recoveries\ PMPM] \\ - [Reinsurance\ Contribution\ PMPM] \end{aligned}$$

Reinsurance recoveries are equal to \$0 in the small group market, as shown in the URRT Worksheet 1, “Projected ACA reinsurance recoveries, net of rein prem, PMPM”.

Non-Benefit Expenses and Profit & Risk

Administrative Expense Load:

1. Administrative Expense: Calculated using an allocation method from KHPC’s finance department, and trended to the rating period. Costs are allocated according to results reported through a company-wide questionnaire. On an annual basis, each cost center within the company completes a questionnaire listing the distribution of costs (in percentage terms) by product as well as by market segment. For example, the questionnaire will ask what percentage of time is spent on PPO versus HMO versus Drug versus Medicare. And separately will ask what percentage of time is spent on large group, small group, individual, and government programs. Using those distributions, all costs needed to perform the business are allocated to the proper market segments and lines of business. The administrative expense applied in the rate development is the total expense allocated to KHPC small group products. Administrative expenses are included in the URRT Worksheet 1, “Administrative Load”.
2. Broker Expense: Calculated based on KHPC’s explicit per contract broker fee. See Exhibit E for historical CBC broker PMPMs in the small group market. Broker Expense is included in the URRT Worksheet 1, “Administrative Load”.
3. Member Out-Of-Pocket (OOP) and Ways to Save:

- a. Description: These products offer enhanced transparency to cost savings potential both prospectively and retrospectively. These are new services included in each of KHPC's small group plans that work to decrease costs by engaging members in their health care decisions. The Member OOP program will show a member, prospectively, the value of a service and the impact of member cost-sharing when that service is incurred. It allows a member to shop for the best price while introducing transparency related to the member's expected cost share at the time of service. The "Ways to Save" program allows members to receive alerts, retrospectively, informing them of cost savings that could have been incurred had they have known about competing medical providers in the area. The alerts are retrospective and offer transparency around member's healthcare options.
 - b. Costs: The vendor of these products charge both per contract per year (PCPY) user fees as well as initial implementation fees and annual subscription fees. The PCPY user fees are \$0.115 and \$1.7955 for "Member Out of Pocket" and "Way to Save" respectively. The vendor also charges a 25% administrative load, annual subscription fee, and a \$100,000 implementation fee. The implementation fee is amortized over 5 years across several hundred thousand members. Using book of business member-to-contract ratios and converting to a per member per month (PMPM), in conjunction with the administrative load and implementation fee yields a PMPM charge of \$0.0128 and \$.20 for Member Out of Pocket and Ways to Save respectively. Annual subscription fees charged yields another \$0.04 PMPM. All of these items combined allow us to arrive at a requested \$0.25 PMPM. These programs are included in the URRT Worksheet 1, "Administrative Load".
4. Value-Based Benefits (VBB): Standard with each plan, Capital BlueCross includes wellness incentives to maximize the likelihood that consumers make positive behavioral changes, which lead to better health, and curbed health care costs for employers and employees alike. The incentive is as follows:
 - a. Complete CBC Personal Profile and receive a gift card reward.
 - b. Complete one online coaching program and receive a gift card reward.
 - c. The wellness program is administered through a vendor and costs are based on vendor fees.
5. Identity Theft Coverage: Identity protection offering will include the following components:
 - a. Credit monitoring – Monitors activity that may affect credit
 - b. Fraud detection – Identifies potentially fraudulent use of identity or credit
 - c. Fraud resolution support – Assists members in addressing issues that arise in relation to credit monitoring and fraud detection

Profit (or Contribution to Surplus) & Risk Margin:

6. Contingency: Contingency is included in the URRT Worksheet 1, "Profit and Risk".

Taxes and Fees:

1. Fee for Patient-Centered Outcomes Research Trust Fund (PCOR): As per the Notice of Proposed Rulemaking for Fees on Health Insurance Policies and Self-Insured Plans for the Patient-Centered Outcomes Research Trust Fund (REG-136008-11), 77 Fed. Reg. 22691: For policy years ending on or after October 1, 2013, and before October 1, 2014, the applicable dollar amount is \$2 per member per year (\$0.17 PMPM), trended annually. At an estimated trend of 4%, the 2016 projected fee is \$0.18 PMPM. PCOR is included in the URRT Worksheet 1, "Taxes and Fees".
2. Health Insurer Fee (HIF) – Section 9010 of PPACA and Section 1406 of the Reconciliation Act (which modified PPACA) refer to HIF. The fee is a fixed-dollar amount distributed across health insurance providers: \$8 billion in 2014, \$11.3 billion in 2015-2016, suspended in 2017, and \$14.3 billion in 2018. After 2018, HIF rises according to an index based on net premium growth. In 2017, CBC subsidiaries will pay an estimated 1.9% of insured premium as a result of HIF. 1.9% is calculated by averaging enrollment and expected HIF by rating quarter. See Exhibit H. The HIF is included in the URRT Worksheet 1, "Taxes and Fees".
3. Exchange Fee – KHPC is not offering any plans of the federally-facilitated exchange.
4. Federal Income Tax: Projected that Federal Income Tax will be collected on the 2% contingency built into the premium. The projected Federal Income Tax is included in the URRT Worksheet 1, "Taxes and Fees".
5. State Income Tax: Projected that State Income Tax will be collected on the 2% contingency built into the premium. The projected State Income Tax is included in the URRT Worksheet 1, "Taxes and Fees".

See Exhibit H for all KHPC small group retention values.

Projected Loss Ratio

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

Single Risk Pool

The data used to develop rates and shown in the URRT abides by 45 CFR part 156.80(d) single risk pool requirements. The single risk pool reflects all covered lives for every non-grandfathered product/plan combination for KHPC in the small group market segment. The single risk pool includes transitional products/plans for purposes of base rate experience. The projection period reflects experience of transitional policies to the extent that KHPC anticipates the members in those policies to be enrolled in fully ACA-complaint plans during the projection period. The impact of transitional policies is discussed in Projection Factors section above.

Index Rate

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

EHB categories are not included in the experience period: pediatric dental and pediatric vision. Pediatric dental and pediatric vision claim PMPMs are added to the projected index rate as described in the Projection Factors section above.

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

To calculate the projected index rate:

1. Start with *Projected Allowed Claims at Current Benefits*
2. The *Projected Allowed Claims at Current Benefits* reflect EHBs 100 percent, so no adjustment needs to be made to add EHBs and remove non-EHB claim cost. This is the index rate for groups renewing January – March (Index 1).
3. Trend Index 1 quarterly for the remainder of 2017. This results in Index 2 (April – June), Index 3 (July – September), and Index 4 (October – December).
4. The final projected index rate is the member weighted average of Index 1, Index 2, Index 3, and Index 4. Member distribution is based on KHPC’s current enrollment by renewal month.

See Exhibit J for the calculation of the Index Rate.

Market Adjusted Index Rate

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

$$\begin{aligned} [\text{Market Adjusted Index Rate}] \\ &= [\text{Index Rate}] - [\text{Net Projected ACA Reinsurance Recoveries}] \\ &\quad - [\text{Net Projected Risk Adjustments PMPM}] + [\text{Exchange Fees PMPM}] \end{aligned}$$

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

Plan Adjusted Index Rate

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

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

1. Actuarial Value and Cost Sharing adjustment: The Actuarial Value and Cost Sharing Adjustment is determined using KHPC’s actuarial cost model. KHPC uses an actuarial cost model to measure the impact of cost-sharing designs on cost and utilization amounts by service category. The cost model shows frequency per 1,000 per year by type of service (IP, OP, Professional), and allowed cost per service for each of the same types of

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

2. **Provider Network:** The Provider network varies across plans. All “Narrow Network” plans have a smaller provider network than “Broad Network” plans. The provider network factor for those plans is shown in Exhibit L. Development of provider network factors is discussed in Geographic Rating Factors and Network Analysis
3. **Adjustment for benefits in addition to EHBs:** No benefits other than EHBs are included in the plans, so no adjustment is necessary.
4. **Catastrophic Plans:** Does not apply to the small group market.
5. **Adjustment for distribution and administrative costs:** Described in Non-Benefit Expenses and Profit & Risk section above.
6. **Tobacco Adjustment:** No tobacco factor is applied, so no adjustment is necessary.

The development of the Plan Adjusted Index rate is found in Exhibit L. The average projected 2017 Plan Adjusted Index Rate is found in Exhibit M.

Calibration

A calibration must be performed in order to apply the allowable rating factors (age and geography) to the Plan Adjusted Rate in order to calculate the Consumer Adjusted Premium Rates.

Age Curve Calibration: The projected average age factor is 1.48. This is calculated by taking the member-weighted average of current small group enrollment by age in KHPC, CAIC, and KHPC combined. Age factors are applied in accordance with CMS’s Standard Age Curve.

Geographic Factor Calibration: The projected average geographic factor is 1.001. This is calculated by taking the member-weighted average of current small group enrollment by employer geographic location in KHPC, CAIC, and KHPC combined.

The calibration is:

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

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

Geographic Rating Factors and Network Analysis

Geographic Factors: CMS has approved nine geographical rating areas (GRA) in the state of Pennsylvania. KHPC operates in a 21-county area of Pennsylvania, encompassing three of the nine defined regions.

KHPC performed regional analysis to quantify the cost difference between the three regions in our service area. The analysis gathered allowed claims in a 12-month period by region, normalized for demographics. We then compared the claim cost for each of the three regions, and found cost differentials between the regions, mostly due to differences in hospital contracting between regions. The data from the analysis is found in Exhibit Q.

Consumer Adjusted Premium Rate Development

The Consumer Adjusted Premium Rate is developed as follows:

1. Member-Level Consumer Adjusted Premium Rate:

$$\begin{aligned} & [\textit{Member} - \textit{Level Consumer Adjusted Premium Rate}] \\ &= [\textit{Calibrated Plan Adjusted Index Rate}] \times [\textit{Age Factor}] \\ &\times [\textit{Geographic Factor}] \end{aligned}$$

2. $[\textit{Family Consumer Adjusted Premium Rate}] = \sum [\textit{Member} - \textit{Level Consumer Adjusted Premium Rate}]$
With no more than three child dependents under age 21 taken into account

Small Group Plan Premium Rates: KHPC is filing quarterly small group rates with trend. Therefore, the Index Rate, Market Adjusted Index Rate, and Plan Adjusted Index Rate reflect the member-weighted average premium of the calendar year. The trend used to develop the quarterly rates is shown in Exhibit M.

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

AV Metal Values

The AV Metal Values included in Worksheet 2 of the URRT were entirely based on the federally issued AV Calculator.

AV Pricing Values

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

Membership Projection

The membership projections found in Worksheet 2 of the URRT were developed by assuming that 100 percent of current small group KHPC members will purchase coverage through KHPC. KHPC expects the remainder of small group members to obtain coverage through other CBC subsidiaries.

Terminated Products

See Exhibit R for a list of terminated products.

Attachments and Examples

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

Exhibit A – Benefit Summary
Exhibit A1 – Benefit Change Summary
Exhibit B – Benefit Categories
Exhibit C – Pediatric Dental and Vision Rate Development
Exhibit D – Benefit Changes
Exhibit E – Trend
Exhibit F – Credibility Manual Development
Exhibit G – Paid-to-Allowed Development
Exhibit H – Retention
Exhibit I – Projected Loss Ratio
Exhibit J – Index Rate
Exhibit K – Market Adjusted Index Rate
Exhibit L – Rate Development by Plan
Exhibit M – Plan Adjusted Index Rates
Exhibit N – Calibration
Exhibit O – Rating Factors
Exhibit P – Quarterly Base Rates
Exhibit Q – Regional Analysis
Exhibit Q1 – Network Analysis
Exhibit Q2 – Region and Network Analysis
Exhibit R – Terminated Products

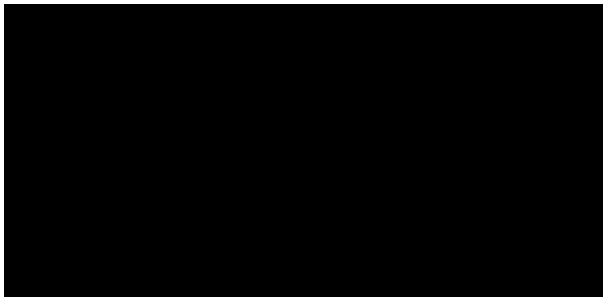
PA Rate Template Part I through Part V

Actuarial Statement

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

I, [REDACTED], ASA, MAAA, do hereby certify that:

1. This filing has been prepared in accordance with the following:
 - a. Actuarial Standard of Practice No. 5, "Health and Disability Claims"
 - b. Actuarial Standard of Practice No. 8, "Regulatory Filings for Rates and Financial Projections for Health Plans"
 - c. Actuarial Standard of Practice No. 12, "Risk Classification"
 - d. Actuarial Standard of Practice No. 23, "Data Quality"
 - e. Actuarial Standard of Practice No. 25, "Credibility Procedures Applicable to Accident and Health, Group Term Life, and Property/Casualty Coverage"
 - f. Actuarial Standard of Practice No. 26, "Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans"
 - g. Actuarial Standard of Practice No. 41, "Actuarial Communications".
2. The index rate is:
 - a. Projected in compliance with all applicable state and federal statutes and regulations (45 CFR 156.80(d) (1)).
 - b. Developed in compliance with the applicable Actuarial Standards of Practice.
 - c. Reasonable in relation to the benefits provided and the population anticipated to be covered.
 - d. Neither excessive nor deficient.
 - e. Adjusted by only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) to generate plan level rates.
3. The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice.
4. The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans.



KEYSTONE HEALTH PLAN CENTRAL, INC.

ACTUARIAL MEMORANDUM

Small Group Rates

Effective January 1, 2017

General Information

Company Information

- Company Legal Name: Keystone Health Plan Central
- State: PA
- HIOS Issuer ID: 53789
- Market: Small Group
- Effective Date: 1/1/2017

PID Company Information

- Company Name: Keystone Health Plan Central (KHPC)
- NAIC: 95199
- Market: Small Group
- On/Off Exchange: Off Exchange
- Effective Date: 1/1/2017
- Average Rate Change: 9.4%
- Range of Requested Rate Change: -3.6% to 41.4%
- Product: HMO
- Rating Areas: 6,7,9
- Metal Levels: Gold, Silver, Bronze
- Current Covered Lives and Policyholders: 901/600
- Number of Plans: 5
- Contract Form #: C17-KHPC-SPG
- Form Filing SERFF #: CABC-130534767
- Binder SERFF #: CABC-PA17-125060075
- HIOS Issuer ID: 53789
- HIOS Submission Tracking Number: 53789-687360061172921375

Company Contact Information

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

Scope and Purpose

By this filing, Keystone Health Plan Central (KHPC), a subsidiary of Capital BlueCross (CBC), submits rates for products to be made available to all small groups effective January 1, 2017. KHPC will offer small group products off the federally-facilitated exchange.

Proposed Rate Increases

KHPC is proposing an aggregate annual increase of 9.4%. The rate change does vary by plan. The rate change is calculated in PA Rate Template Part IV, Table 11, cell AZ13.

Rate Change Summary

The Rate Change Summary submitted with this filing contains 2015 small group (1-50 employees) financial information. Please note this exhibit does not match KHPC's Supplemental Health Care Exhibit (SHCE), as the SHCE submitted for 2015 applies to employer size of 1-100 employees.

Please note that prior to the enactment of the Protecting Affordable Coverage for Employees ("PACE") Act, H.R. 1624, which was signed into law on October 7, 2015, a small employer was defined using a "1-100 employees" test, with an available state election to use a "1-50 employees" test for plan years beginning before January 1, 2016. PHSA §2791(e)(2)(4)(2014), ACA § 1304(b)(1)-(3) (2014).

Based on the absence of an explicit election on the part of the Commonwealth to use the "1-50 employees" test, as well as other factors, CBC received confirmation from the Pennsylvania Insurance Department that CBC and its subsidiaries could use the "1-100 employees" test until January 1, 2016. Accordingly, CBC and its subsidiaries used a small group size of "1-100 employees" for MLR and related financial reporting for years ending on or before December 31, 2015. Beginning with January 1, 2016, in accordance with the PACE Act, CBC and its subsidiaries began using the "1-50 employees" test for all purposes. For these reasons, certain information including the premiums, claims and administrative expense amounts used in this filing, and which appear in the Rate Change Request Summary (Attachment 1), do not match amounts shown in the Supplemental Health Care Reporting Exhibit included in the 2015 Annual Financial Statement for the market.

It is important to note, that to the best of our knowledge, the use of the "1-100 employees" test as opposed to the "1-50 employees" test did not affect the requirement that KHPC provide a rebate to customers based upon its MLR for the year 2015.

Rate History and Proposed Variations in Rate Changes

Market	Company	Effective Date	SERFF #	Annual Increase
Small Group	KHPC	1/1/2014	CABC-129033971	0.00%
Small Group	KHPC	1/1/2015	CABC-129636213	7.00%
Small Group	KHPC	1/1/2016	CABC-130076082	-2.00%

Benefit Changes 2016-2017

There are several benefit changes being implemented in 2017. All benefit changes comply with the uniform modification of coverage standards described in 45 CFR 147.106(e). Any plan with a benefit change that did not meet the uniform modification of coverage standard was terminated, and a new plan was created in its place. All terminated plans are listed in Exhibit R, and a summary of proposed 2017 benefits is included in Exhibit A.

Benefit changes by plan are listed in Exhibit A1, highlighted in yellow.

KHPC is discontinuing its on-exchange narrow network product. KHPC will offer a broad network product off-exchange.

Experience Period Premium and Claims

Base Experience Period: The base experience period (BEP) includes completed fee-for-service paid and incurred claims for dates of service between January 1, 2015 and December 31, 2015.

Paid Through Date: Claims in the BEP are paid through March 31, 2016

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

Allowed and Incurred Claims during the Experience Period:

	Incurred	Allowed
Amount of claims processed through the issuer's claim system:	\$5,277,075	\$5,914,354
Amount of claims processed outside of the issuer's claim system:	0	0
Amount of claims that represent best estimate of incurred but not paid:	\$119,095	\$278,114

Allowed claims are developed by combining paid claims with member cost-sharing.

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

1. Historical fee-for-service claims are viewed by date of service and date of payment in a claims triangle.
2. The claims triangle payments are then accumulated by date of service to develop factors that represent the rate of accumulation or rate of “completion”.
3. Historical rates of completion by duration are used to derive projected rates of completion. Some of the methods used to develop projected completion factors are averages (e.g. harmonic averages, time weighted averages, geometric averages) and regression methods. Numerous items are considered when viewing these averages or regression statistics, such as the impact of high claims on perceived completion patterns.
4. For durations that exhibit a projected completion factor greater than the Valuation Actuary’s chosen threshold (e.g. 80% complete), cumulative paid and incurred claims are divided by the projected completion factor to arrive at ultimate incurred claims. For durations that are less than the chosen threshold, a projection methodology is used. Similar to completion factor development, projection methodologies are worthy of a lengthy discussion. In general, an ultimate incurred claims PMPM is derived by projecting a recent 12-month period to the current month(s) and seasonally adjusting.
5. With all months having both a cumulative paid amount and an estimated ultimate incurred amount, the completion factors used in pricing are calculated by taking the quotient of the two. Allowed completion and incurred completion are assumed to be identical.
6. Both allowed and paid claims in the BEP are completed by applying completion factors by incurred month developed in Step 6.

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

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

Benefit Categories

Claims in the benefit categories displayed in the URRT come directly from CBC’s data warehouse. See Exhibit C for a description of benefits by benefit category.

Projection Factors

Changes in Benefits:

1. Pediatric Dental and Pediatric Vision: The following PMPM allowed charges are added to the projection period allowed claims PMPM:

- Pediatric dental coverage: 5.01
- Pediatric vision coverage 0.46

This was added to the projected allowed claims in Exhibit B by applying a factor to the experience period, “Other Medical” claims. The development of pediatric dental and vision projected claims is described below.

See Exhibit C for the pediatric dental and vision rate development.

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

Other Adjustments: Found in URRT, Worksheet 1, “Other”.

1. List-Billed Adjustment: KHPC is adjusting the claim experience for the impact of the list-billing rating methodology required under CFR Part 147.102. This section requires that family rates are calculated by summing the premiums for each individual family member, provided at most three child dependents under age 21 are taken into account. This rating rule requires an adjustment to premium.
2. Network Adjustment: KHPC is adjusting the claim experience for the impact of the HMO network. HMO is a managed care arrangement product with savings over a PPO network.

Trend Factors: Trend levels reflect our best estimate of changes in utilization, provider reimbursement contracts, the network of facilities and providers, disease management initiatives and the impact of utilization management.

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

1. Base Cost/ Change in hospital and physician contracting: The contracted increase in reimbursements to hospitals and physicians is the basis of cost trends. KHPC uses a hospital and physician contracting model to determine future trends. This model contains all known contracted payment increases, as well as estimated increases in provider payments.
2. Utilization Considerations:
 - a. Intensity of medical services rendered
 - b. Changes in place of service (e.g. continued migration of inpatient stays to outpatient setting)
 - c. Further migration from brand prescription drugs to generic prescription drugs
 - d. Favorable impacts of value based benefits designs
3. Intensity: Intensity is defined as the amount of inputs used to provide each unit of service. This can best be seen in an example:

Year 2015

<u>Type of Service</u>	<u>Units</u>	<u>Cost per Unit</u>
X-Ray	1	\$200
MRI	1	\$5,000
Total	2	\$5,200

Year 2016

<u>Type of Service</u>	<u>Units</u>	<u>Cost per Unit</u>
X-Ray	0	\$200
MRI	2	\$5,000
Total	2	\$10,000

Total Annual Trend	92%
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2. **Underwriting Cycle:** The underwriting cycle is defined as the tendency to swing between profitable and unprofitable periods over time. The underwriting cycle is exacerbated partly by pricing performed with incomplete information as to the level of current experience trends. A reaction delay occurs, as carriers tend to rely on measurements of past experience in developing current pricing assumptions. As a result, carriers are often increasing their pricing trends when actual experience trends have begun to decline, and decreasing their pricing trends actual trends are increasing. KHPC strives to mitigate the underwriting cycle by keeping trends consistent through times of increasing and decreasing claim cost and utilization.

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

Credibility Manual Rate Development

For the purpose of rate development, KHPC small group HMO products are combined with other product offerings (PPO, Traditional, Comprehensive, Drug) from CBC subsidiaries. KHPC has approximately 900 members, while CBC's total small group block is close to 60,000 members, making the combination of experience necessary according to credibility standards. Combining the experience is actuarially justifiable for several reasons:

1. The demographics of members buying HMO and other products are similar.
2. Cost and utilization between HMO and other products are similar.
3. Medical policy between HMO and other products are almost identical, with the exception of referrals and no out-of-network benefit on HMO. These two cost-saving features of HMO are valued in the projected claim costs (Paid-to-Allowed Ratio section below.)

The credibility manual PMPMs are the combination of Capital Advantage Insurance Company (CAIC) and Capital Advantage Assurance Company (CAAC) medical and drug claim experience, KHPC HMO data, and vendor pediatric vision data. All data is trended and benefit-adjusted in the same manner as the experience data (same projection factors and trend).

Credibility of Experience

Credibility Manual Rate Development: The credibility manual was given 100% credibility for reasons described in the section above.

Paid to Allowed Ratio

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

Projected Paid and Incurred Claims are calculated as follows:

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

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

The development of completion factors is described in Experience Period Premium and Claims above.

3. Develop the *BEP Paid and Incurred Claim PMPM*:

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

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

Trended Claim PMPM

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

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

Projected Paid and Incurred Claims PMPM

$$= [\text{Trended Claim PMPM}] \times [\text{Benefit Network Adjustment}] \\ \times [\text{Network Adjustment}] \times [\text{Morbidity Adjustment}] \times [\text{List} \\ - \text{Billed Adjustment}]$$

The *Benefit Adjustment*, *Network Adjustment*, *Morbidity Adjustment*, and *List-Billed Adjustment* are discussed in the Projections Factors section above.

6. Develop *Projected Claims PMPM by Benefit* as follows:

- a. KHPC uses an actuarial cost model to measure the impact of cost-sharing designs on cost and utilization amounts by service category. The cost model shows frequency per 1,000 per year by type of service (IP, OP, Professional), and allowed cost per service for each of the same types of service, normalized to a \$0 office visit copayment and a \$25 ER copayment. Given a particular benefit design (for example, \$20 office visit copayment), utilization is adjusted from the benchmark based on assumed utilization change factors, and cost per service is reduced by the copayment or coinsurance per service. Cost and utilization are multiplied together to derive a PMPM by service, summed for all services. The impact of global deductible, coinsurance, and out-of-pocket max is then measured based on cumulative probability distributions (CPDs), where the value of services that apply to the CPDs adjusts the level of the curve, as well as global utilization adjustments.
- b. This actuarial cost model derives a Manual Cost for each benefit design in the experience period, as well as plans being offered in the projection period. The average Manual Cost of the experience is compared to the Manual Cost of the base plan (Healthy Benefits HMO 500.0 EX). The projected experience period data is then adjusted to the base plan:

$$\text{Benefit Level Adjustment} = \frac{\text{Average Manual Cost in Experience Period}}{\text{Manual Cost of Base Plan}}$$

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

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

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

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

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

$$\begin{aligned} & \text{Projected Claims PMPM Benefit A} \\ &= \text{Projected Claims PMPM Base Plan} \\ & \times \text{Pricing Relativity A} \end{aligned}$$

- b. And to arrive at the *Total Projected Claims PMPM*, KHPC assumes a distribution of members across the benefit plans being offered in 2016. The *Total Projected Claims PMPM* :

$$\begin{aligned} &= \text{Projected Claims PMPM Benefit A} \times \text{Expected Member Dist of Benefit A} \\ &+ \text{Projected Claims PMPM Benefit B} \\ & \times \text{Expected Member Dis of Benefit B} + \dots \end{aligned}$$

- 7. The Paid-To-Allowed Ratio is then:

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

See Exhibit G for the development of the *Paid-to-Allowed Ratio*.

Risk Adjustment and Reinsurance

Projected Risk Adjustments PMPM:

Relevant to 2017 pricing is the impact of Commercial Risk Adjustment (CRA) payment transfers that are expected to be earned. The pricing impact is:

$$\begin{aligned} & [\text{Net Projected Risk Adjustments PMPM}] \\ &= [\text{Projected CRA Transfer PMPM}] - [\text{Risk Adjustment Fee PMPM}] \end{aligned}$$

The following items are those that we deem important in generating a CRA payment transfer adjustment:

1. Risk profile of the those enrolled in CRA eligible plans for the market or state (i.e. competitors) relative to risk profile of CRA eligible membership enrolled in our plans
2. Statewide average premiums
3. Current market penetration of this company and competitors in the market and in the state
4. The impact of transitional policies throughout the remainder of 2016 and 2017
5. 2015 risk adjustment results

Given the uncertainty of the five bullets above, it was difficult to determine whether the impact of 2017 earned CRA payment transfers will be positive or negative. So the original estimate submitted with this filing was \$0. But given 2015 results received June 30, 2016, we are able to more accurately project 2017. KHPC does not expect large risk and/or enrollment changes between 2015 and 2017, so a projection equal to 2015 actual (on a PMPM basis) is reasonable.

KHPC is using a credibility manual to derive premiums, as described in the Credibility Manual Rate Development section above. Likewise, KHPC is using combined risk adjustment results from CAAC, CAIC, and KHPC to project 2017. 2015 risk adjustment results by company can be found on Exhibit K.

To fund the HHS-risk adjustment program, issuers will remit to HHS a fee of \$0.13 PMPM. The Risk Adjustment Fee PMPM is included in the URRT Worksheet 1, “Projected Risk Adjustments PMPM”.

$$[Net Projected Risk Adjustments PMPM] = -5.80 - 0.13 = -5.93 PMPM$$

Projected ACA Reinsurance Recoveries:

$$\begin{aligned} [Net Projected ACA Reinsurance Recoveries PMPM] \\ &= [Projected ACA Reinsurance Recoveries PMPM] \\ &- [Reinsurance Contribution PMPM] \end{aligned}$$

Reinsurance recoveries are equal to \$0 in the small group market, as shown in the URRT Worksheet 1, “Projected ACA reinsurance recoveries, net of rein prem, PMPM”.

Non-Benefit Expenses and Profit & Risk

Administrative Expense Load:

1. Administrative Expense: Calculated using an allocation method from KHPC’s finance department, and trended to the rating period. Costs are allocated according to results reported through a company-wide questionnaire. On an annual basis, each cost center within the company completes a questionnaire listing the distribution of costs (in percentage terms) by product as well as by market segment. For example, the questionnaire will ask what percentage of time is spent on PPO versus HMO versus Drug versus Medicare. And separately will ask what percentage of time is spent on large group, small group, individual, and government programs. Using those distributions, all

costs needed to perform the business are allocated to the proper market segments and lines of business. The administrative expense applied in the rate development is the total expense allocated to KHPC small group products. Administrative expenses are included in the URRT Worksheet 1, "Administrative Load".

2. Broker Expense: Calculated based on KHPC's explicit per contract broker fee. Broker Expense is included in the URRT Worksheet 1, "Administrative Load".
3. Member Out-Of-Pocket (OOP) and Ways to Save:
 - a. Description: These products offer enhanced transparency to cost savings potential both prospectively and retrospectively. These are new services included in each of KHPC's small group plans that work to decrease costs by engaging members in their health care decisions. The Member OOP program will show a member, prospectively, the value of a service and the impact of member cost-sharing when that service is incurred. It allows a member to shop for the best price while introducing transparency related to the member's expected cost share at the time of service. The "Ways to Save" program allows members to receive alerts, retrospectively, informing them of cost savings that could have been incurred had they have known about competing medical providers in the area. The alerts are retrospective and offer transparency around member's healthcare options.
 - b. Costs: The vendor of these products charge both per contract per year (PCPY) user fees as well as initial implementation fees and annual subscription fees. The PCPY user fees are \$0.115 and \$1.7955 for "Member Out of Pocket" and "Way to Save" respectively. The vendor also charges a 25% administrative load, annual subscription fee, and a \$100,000 implementation fee. The implementation fee is amortized over 5 years across several hundred thousand members. Using book of business member-to-contract ratios and converting to a per member per month (PMPM), in conjunction with the administrative load and implementation fee yields a PMPM charge of \$0.0128 and \$.20 for Member Out of Pocket and Ways to Save respectively. Annual subscription fees charged yields another \$0.04 PMPM. All of these items combined allow us to arrive at a requested \$0.25 PMPM. These programs are included in the URRT Worksheet 1, "Administrative Load".
4. Value-Based Benefits (VBB): Standard with each plan, Capital BlueCross includes wellness incentives to maximize the likelihood that consumers make positive behavioral changes, which lead to better health, and curbed health care costs for employers and employees alike. The incentive is as follows:
 - a. Complete CBC Personal Profile and receive a gift card reward.
 - b. Complete one online coaching program and receive a gift card reward.
 - c. The wellness program is administered through a vendor and costs are based on vendor fees.
5. Identity Theft Coverage: Identity protection offering will include the following components:
 - a. Credit monitoring – Monitors activity that may affect credit
 - b. Fraud detection – Identifies potentially fraudulent use of identity or credit
 - c. Fraud resolution support – Assists members in addressing issues that arise in relation to credit monitoring and fraud detection

Profit (or Contribution to Surplus) & Risk Margin:

6. Contingency: Contingency is included in the URRT Worksheet 1, “Profit and Risk”.

Taxes and Fees:

1. Fee for Patient-Centered Outcomes Research Trust Fund (PCOR): As per the Notice of Proposed Rulemaking for Fees on Health Insurance Policies and Self-Insured Plans for the Patient-Centered Outcomes Research Trust Fund (REG-136008-11), 77 Fed. Reg. 22691: For policy years ending on or after October 1, 2013, and before October 1, 2014, the applicable dollar amount is \$2 per member per year (\$0.17 PMPM), trended annually. At an estimated trend of 4%, the 2016 projected fee is \$0.18 PMPM. PCOR is included in the URRT Worksheet 1, “Taxes and Fees”.
2. Health Insurer Fee (HIF) – Section 9010 of PPACA and Section 1406 of the Reconciliation Act (which modified PPACA) refer to HIF. The fee is a fixed-dollar amount distributed across health insurance providers: \$8 billion in 2014, \$11.3 billion in 2015-2016, suspended in 2017, and \$14.3 billion in 2018. After 2018, HIF rises according to an index based on net premium growth. In 2017, CBC subsidiaries will pay an estimated 1.9% of insured premium as a result of HIF. 1.9% is calculated by averaging enrollment and expected HIF by rating quarter. See Exhibit H. The HIF is included in the URRT Worksheet 1, “Taxes and Fees”.
3. Exchange Fee – KHPC is not offering any plans of the federally-facilitated exchange.
4. Federal Income Tax: Projected that Federal Income Tax will be collected on the 2% contingency built into the premium. The projected Federal Income Tax is included in the URRT Worksheet 1, “Taxes and Fees”.
5. State Income Tax: Projected that State Income Tax will be collected on the 2% contingency built into the premium. The projected State Income Tax is included in the URRT Worksheet 1, “Taxes and Fees”.

See Exhibit H for all KHPC small group retention values.

Projected Loss Ratio

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

Single Risk Pool

The data used to develop rates and shown in the URRT abides by 45 CFR part 156.80(d) single risk pool requirements. The single risk pool reflects all covered lives for every non-grandfathered product/plan combination for KHPC in the small group market segment. The single risk pool includes transitional products/plans for purposes of base rate experience. The projection period reflects experience of transitional policies to the extent that KHPC anticipates the members in those policies to be enrolled in fully ACA-complaint plans during the projection period. The impact of transitional policies is discussed in Projection Factors section above.

Index Rate

The experience period index rate is KHPC's allowed claims PMPM, set in accordance with the single risk pool provision. All KHPC covered benefits are categorized as Essential Health Benefits (EHBs), therefore no adjustment was made to the experience period index. Only two EHB categories are not included in the experience period: pediatric dental and pediatric vision. Pediatric dental and pediatric vision claim PMPMs are added to the projected index rate as described in the Projection Factors section above.

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

To calculate the projected index rate:

1. Start with *Projected Allowed Claims at Current Benefits*
2. The *Projected Allowed Claims at Current Benefits* reflect EHBs 100 percent, so no adjustment needs to be made to add EHBs and remove non-EHB claim cost. This is the index rate for groups renewing January – March (Index 1).
3. Trend Index 1 quarterly for the remainder of 2017. This results in Index 2 (April – June), Index 3 (July – September), and Index 4 (October – December).
4. The final projected index rate is the member weighted average of Index 1, Index 2, Index 3, and Index 4. Member distribution is based on KHPC's current enrollment by renewal month.

See Exhibit J for the calculation of the Index Rate.

Market Adjusted Index Rate

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

$$\begin{aligned} [\text{Market Adjusted Index Rate}] &= [\text{Index Rate}] - [\text{Net Projected ACA Reinsurance Recoveries}] \\ &\quad - [\text{Net Projected Risk Adjustments PMPM}] + [\text{Exchange Fees PMPM}] \end{aligned}$$

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

Plan Adjusted Index Rate

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

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

1. Actuarial Value and Cost Sharing adjustment: The Actuarial Value and Cost Sharing Adjustment is determined using KHPC's actuarial cost model. KHPC uses an actuarial cost model to measure the impact of cost-sharing designs on cost and utilization amounts by service category. The cost model shows frequency per 1,000 per year by type of service (IP, OP, Professional), and allowed cost per service for each of the same types of service, normalized to a \$0 office visit copayment and a \$25 ER copayment. Given a particular benefit design (for example, \$20 office visit copayment), utilization is adjusted from the benchmark based on assumed utilization change factors, and cost per service is reduced by the copayment or coinsurance per service. Cost and utilization are multiplied together to derive a claim PMPM by service, summed for all services. The impact of global deductible, coinsurance, and out-of-pocket max is then measured based on CPDs, where the value of services that apply to the CPDs adjusts the level of the curve, as well as global utilization adjustments.
2. Provider Network: The Provider network varies across plans. All "Narrow Network" plans have a smaller provider network than "Broad Network" plans. The provider network factor for those plans is shown in Exhibit L. Development of provider network factors is discussed in Geographic Rating Factors and Network Analysis
3. Adjustment for benefits in addition to EHBs: No benefits other than EHBs are included in the plans, so no adjustment is necessary.
4. Catastrophic Plans: Does not apply to the small group market.
5. Adjustment for distribution and administrative costs: Described in Non-Benefit Expenses and Profit & Risk section above.
6. Tobacco Adjustment: No tobacco factor is applied, so no adjustment is necessary.

The development of the Plan Adjusted Index rate is found in Exhibit L. The average projected 2017 Plan Adjusted Index Rate is found in Exhibit M.

Calibration

A calibration must be performed in order to apply the allowable rating factors (age and geography) to the Plan Adjusted Rate in order to calculate the Consumer Adjusted Premium Rates.

Age Curve Calibration: The projected average age factor is 1.48. This is calculated by taking the member-weighted average of current small group enrollment by age in KHPC, CAIC, and KHPC combined. Age factors are applied in accordance with CMS's Standard Age Curve.

Geographic Factor Calibration: The projected average geographic factor is 1.001. This is calculated by taking the member-weighted average of current small group enrollment by employer geographic location in KHPC, CAIC, and KHPC combined.

The calibration is:

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

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

Geographic Rating Factors and Network Analysis

Geographic Factors: CMS has approved nine geographical rating areas (GRA) in the state of Pennsylvania. KHPC operates in a 21-county area of Pennsylvania, encompassing three of the nine defined regions.

KHPC performed regional analysis to quantify the cost difference between the three regions in our service area. The analysis gathered allowed claims in a 12-month period by region, normalized for demographics. We then compared the claim cost for each of the three regions, and found cost differentials between the regions, mostly due to differences in hospital contracting between regions. The data from the analysis is found in Exhibit Q.

Consumer Adjusted Premium Rate Development

The Consumer Adjusted Premium Rate is developed as follows:

1. Member-Level Consumer Adjusted Premium Rate:

$$\begin{aligned} & [\textit{Member} - \textit{Level Consumer Adjusted Premium Rate}] \\ & = [\textit{Calibrated Plan Adjusted Index Rate}] \times [\textit{Age Factor}] \\ & \times [\textit{Geographic Factor}] \end{aligned}$$

2. $[\textit{Family Consumer Adjusted Premium Rate}] = \sum [\textit{Member} - \textit{Level Consumer Adjusted Premium Rate}]$
With no more than three child dependents under age 21 taken into account

Small Group Plan Premium Rates: KHPC is filing quarterly small group rates with trend. Therefore, the Index Rate, Market Adjusted Index Rate, and Plan Adjusted Index Rate reflect the member-weighted average premium of the calendar year. The trend used to develop the quarterly rates is shown in Exhibit M.

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

AV Metal Values

The AV Metal Values included in Worksheet 2 of the URRT were entirely based on the federally issued AV Calculator.

AV Pricing Values

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

Membership Projection

The membership projections found in Worksheet 2 of the URRT were developed by assuming that 100 percent of current small group KHPC members will purchase coverage through KHPC. KHPC expects the remainder of small group members to obtain coverage through other CBC subsidiaries.

Terminated Products

See Exhibit R for a list of terminated products.

Attachments and Examples

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

- Exhibit A – Benefit Summary
- Exhibit A1 – Benefit Change Summary
- Exhibit B – Benefit Categories
- Exhibit C – Pediatric Dental and Vision Rate Development
- Exhibit D – Benefit Changes
- Exhibit E – Trend
- Exhibit F – Credibility Manual Development
- Exhibit G – Paid-to-Allowed Development
- Exhibit H – Retention
- Exhibit I – Projected Loss Ratio
- Exhibit J – Index Rate
- Exhibit K – Market Adjusted Index Rate
- Exhibit L – Rate Development by Plan
- Exhibit M – Plan Adjusted Index Rates
- Exhibit N – Calibration
- Exhibit O – Rating Factors
- Exhibit P – Quarterly Base Rates
- Exhibit Q – Regional Analysis
- Exhibit Q1 – Network Analysis
- Exhibit Q2 – Region and Network Analysis
- Exhibit R – Terminated Products

PA Rate Template Part I through Part V

Actuarial Statement

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

I, [REDACTED], ASA, MAAA, do hereby certify that:

1. This filing has been prepared in accordance with the following:
 - a. Actuarial Standard of Practice No. 5, "Health and Disability Claims"
 - b. Actuarial Standard of Practice No. 8, "Regulatory Filings for Rates and Financial Projections for Health Plans"
 - c. Actuarial Standard of Practice No. 12, "Risk Classification"
 - d. Actuarial Standard of Practice No. 23, "Data Quality"
 - e. Actuarial Standard of Practice No. 25, "Credibility Procedures Applicable to Accident and Health, Group Term Life, and Property/Casualty Coverage"
 - f. Actuarial Standard of Practice No. 26, "Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans"
 - g. Actuarial Standard of Practice No. 41, "Actuarial Communications".
2. The index rate is:
 - a. Projected in compliance with all applicable state and federal statutes and regulations (45 CFR 156.80(d) (1)).
 - b. Developed in compliance with the applicable Actuarial Standards of Practice.
 - c. Reasonable in relation to the benefits provided and the population anticipated to be covered.
 - d. Neither excessive nor deficient.
 - e. Adjusted by only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) to generate plan level rates.
3. The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice.
4. The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans. For any plan requiring an alternative method, the development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for benefits that deviate substantially from the parameters of the AVC and have a material impact on the actuarial value.
 - a. The analysis was
 - i. conducted by a member of the American Academy of Actuaries, and
 - ii. performed in accordance with generally accepted actuarial principles and methods.

5. All factor, benefit and other changes from the prior approved filing have been disclosed in the actuarial memorandum.
6. New plans cannot be considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106.
7. The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2017 Rate Filing Justification.
8. With the July 21, 2016 rate filing update, only the items listed in the Insurance Department instructions have been changed.



██████████, ASA, MAAA
Actuarial Associate
Capital BlueCross

2017 Rates Table Template v6.0		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 a community rating state, select Family Option under Age and fill in all columns.		
		If you are not community rating state, select 0-20 under Age and provide an Individual Rate for every age band.		
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.		
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.		
HIOS Issuer ID* Federal TIN* Rate Effective Date* Rate Expiration Date*	53789			
	23-2399845			
	1/1/2017			
	3/31/2017			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 6	No Preference	0-20	152.79
53789PA0090004	Rating Area 6	No Preference	21	240.62
53789PA0090004	Rating Area 6	No Preference	22	240.62
53789PA0090004	Rating Area 6	No Preference	23	240.62
53789PA0090004	Rating Area 6	No Preference	24	240.62
53789PA0090004	Rating Area 6	No Preference	25	241.58
53789PA0090004	Rating Area 6	No Preference	26	246.39
53789PA0090004	Rating Area 6	No Preference	27	252.17
53789PA0090004	Rating Area 6	No Preference	28	261.55
53789PA0090004	Rating Area 6	No Preference	29	269.25
53789PA0090004	Rating Area 6	No Preference	30	273.10
53789PA0090004	Rating Area 6	No Preference	31	278.87
53789PA0090004	Rating Area 6	No Preference	32	284.65
53789PA0090004	Rating Area 6	No Preference	33	288.26
53789PA0090004	Rating Area 6	No Preference	34	292.11
53789PA0090004	Rating Area 6	No Preference	35	294.03
53789PA0090004	Rating Area 6	No Preference	36	295.96
53789PA0090004	Rating Area 6	No Preference	37	297.88
53789PA0090004	Rating Area 6	No Preference	38	299.81
53789PA0090004	Rating Area 6	No Preference	39	303.66
53789PA0090004	Rating Area 6	No Preference	40	307.51
53789PA0090004	Rating Area 6	No Preference	41	313.28
53789PA0090004	Rating Area 6	No Preference	42	318.82
53789PA0090004	Rating Area 6	No Preference	43	326.52
53789PA0090004	Rating Area 6	No Preference	44	336.14
53789PA0090004	Rating Area 6	No Preference	45	347.45
53789PA0090004	Rating Area 6	No Preference	46	360.92
53789PA0090004	Rating Area 6	No Preference	47	376.08
53789PA0090004	Rating Area 6	No Preference	48	393.41
53789PA0090004	Rating Area 6	No Preference	49	410.49
53789PA0090004	Rating Area 6	No Preference	50	429.74
53789PA0090004	Rating Area 6	No Preference	51	448.75
53789PA0090004	Rating Area 6	No Preference	52	469.68
53789PA0090004	Rating Area 6	No Preference	53	490.86
53789PA0090004	Rating Area 6	No Preference	54	513.72
53789PA0090004	Rating Area 6	No Preference	55	536.58
53789PA0090004	Rating Area 6	No Preference	56	561.36

HIOS Issuer ID*	53789			
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	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 6	No Preference	57	586.38
53789PA0090004	Rating Area 6	No Preference	58	613.09
53789PA0090004	Rating Area 6	No Preference	59	626.33
53789PA0090004	Rating Area 6	No Preference	60	653.03
53789PA0090004	Rating Area 6	No Preference	61	676.13
53789PA0090004	Rating Area 6	No Preference	62	691.29
53789PA0090004	Rating Area 6	No Preference	63	710.30
53789PA0090004	Rating Area 6	No Preference	64	721.85
53789PA0090004	Rating Area 6	No Preference	65 and over	721.85
53789PA0090004	Rating Area 7	No Preference	0-20	154.32
53789PA0090004	Rating Area 7	No Preference	21	243.02
53789PA0090004	Rating Area 7	No Preference	22	243.02
53789PA0090004	Rating Area 7	No Preference	23	243.02
53789PA0090004	Rating Area 7	No Preference	24	243.02
53789PA0090004	Rating Area 7	No Preference	25	243.99
53789PA0090004	Rating Area 7	No Preference	26	248.86
53789PA0090004	Rating Area 7	No Preference	27	254.69
53789PA0090004	Rating Area 7	No Preference	28	264.17
53789PA0090004	Rating Area 7	No Preference	29	271.94
53789PA0090004	Rating Area 7	No Preference	30	275.83
53789PA0090004	Rating Area 7	No Preference	31	281.66
53789PA0090004	Rating Area 7	No Preference	32	287.50
53789PA0090004	Rating Area 7	No Preference	33	291.14
53789PA0090004	Rating Area 7	No Preference	34	295.03
53789PA0090004	Rating Area 7	No Preference	35	296.97
53789PA0090004	Rating Area 7	No Preference	36	298.92
53789PA0090004	Rating Area 7	No Preference	37	300.86
53789PA0090004	Rating Area 7	No Preference	38	302.81
53789PA0090004	Rating Area 7	No Preference	39	306.69
53789PA0090004	Rating Area 7	No Preference	40	310.58
53789PA0090004	Rating Area 7	No Preference	41	316.42
53789PA0090004	Rating Area 7	No Preference	42	322.01
53789PA0090004	Rating Area 7	No Preference	43	329.78
53789PA0090004	Rating Area 7	No Preference	44	339.50
53789PA0090004	Rating Area 7	No Preference	45	350.92
53789PA0090004	Rating Area 7	No Preference	46	364.53
53789PA0090004	Rating Area 7	No Preference	47	379.84
53789PA0090004	Rating Area 7	No Preference	48	397.34
53789PA0090004	Rating Area 7	No Preference	49	414.60
53789PA0090004	Rating Area 7	No Preference	50	434.04
53789PA0090004	Rating Area 7	No Preference	51	453.24
53789PA0090004	Rating Area 7	No Preference	52	474.38

HIOS Issuer ID*	53789			
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	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 7	No Preference	53	495.77
	Rating Area 7	No Preference	54	518.85
	Rating Area 7	No Preference	55	541.94
	Rating Area 7	No Preference	56	566.97
	Rating Area 7	No Preference	57	592.25
	Rating Area 7	No Preference	58	619.22
	Rating Area 7	No Preference	59	632.59
	Rating Area 7	No Preference	60	659.56
	Rating Area 7	No Preference	61	682.89
	Rating Area 7	No Preference	62	698.20
	Rating Area 7	No Preference	63	717.40
	Rating Area 7	No Preference	64	729.06
	Rating Area 7	No Preference	65 and over	729.06
53789PA0090004	Rating Area 9	No Preference	0-20	151.26
53789PA0090004	Rating Area 9	No Preference	21	238.21
	Rating Area 9	No Preference	22	238.21
	Rating Area 9	No Preference	23	238.21
	Rating Area 9	No Preference	24	238.21
	Rating Area 9	No Preference	25	239.16
	Rating Area 9	No Preference	26	243.93
	Rating Area 9	No Preference	27	249.64
	Rating Area 9	No Preference	28	258.93
	Rating Area 9	No Preference	29	266.56
	Rating Area 9	No Preference	30	270.37
	Rating Area 9	No Preference	31	276.09
	Rating Area 9	No Preference	32	281.80
	Rating Area 9	No Preference	33	285.38
	Rating Area 9	No Preference	34	289.19
	Rating Area 9	No Preference	35	291.09
	Rating Area 9	No Preference	36	293.00
	Rating Area 9	No Preference	37	294.90
	Rating Area 9	No Preference	38	296.81
	Rating Area 9	No Preference	39	300.62
	Rating Area 9	No Preference	40	304.43
	Rating Area 9	No Preference	41	310.15
	Rating Area 9	No Preference	42	315.63
	Rating Area 9	No Preference	43	323.25
	Rating Area 9	No Preference	44	332.78
	Rating Area 9	No Preference	45	343.98
	Rating Area 9	No Preference	46	357.32
	Rating Area 9	No Preference	47	372.32
	Rating Area 9	No Preference	48	389.47

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 9	No Preference	49	406.39
	Rating Area 9	No Preference	50	425.44
	Rating Area 9	No Preference	51	444.26
	Rating Area 9	No Preference	52	464.99
	Rating Area 9	No Preference	53	485.95
	Rating Area 9	No Preference	54	508.58
	Rating Area 9	No Preference	55	531.21
	Rating Area 9	No Preference	56	555.74
	Rating Area 9	No Preference	57	580.52
	Rating Area 9	No Preference	58	606.96
	Rating Area 9	No Preference	59	620.06
	Rating Area 9	No Preference	60	646.50
	Rating Area 9	No Preference	61	669.37
	Rating Area 9	No Preference	62	684.38
	Rating Area 9	No Preference	63	703.20
	Rating Area 9	No Preference	64	714.62
	Rating Area 9	No Preference	65 and over	714.62
53789PA0090007	Rating Area 6	No Preference	0-20	212.43
53789PA0090007	Rating Area 6	No Preference	21	334.54
	Rating Area 6	No Preference	22	334.54
	Rating Area 6	No Preference	23	334.54
	Rating Area 6	No Preference	24	334.54
	Rating Area 6	No Preference	25	335.88
	Rating Area 6	No Preference	26	342.57
	Rating Area 6	No Preference	27	350.60
	Rating Area 6	No Preference	28	363.65
	Rating Area 6	No Preference	29	374.35
	Rating Area 6	No Preference	30	379.70
	Rating Area 6	No Preference	31	387.73
	Rating Area 6	No Preference	32	395.76
	Rating Area 6	No Preference	33	400.78
	Rating Area 6	No Preference	34	406.13
	Rating Area 6	No Preference	35	408.81
	Rating Area 6	No Preference	36	411.49
	Rating Area 6	No Preference	37	414.16
	Rating Area 6	No Preference	38	416.84
	Rating Area 6	No Preference	39	422.19
	Rating Area 6	No Preference	40	427.54
	Rating Area 6	No Preference	41	435.57
	Rating Area 6	No Preference	42	443.27
	Rating Area 6	No Preference	43	453.97
	Rating Area 6	No Preference	44	467.35

HIOS Issuer ID*	53789			
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	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 6	No Preference	45	483.08
	Rating Area 6	No Preference	46	501.81
	Rating Area 6	No Preference	47	522.89
	Rating Area 6	No Preference	48	546.98
	Rating Area 6	No Preference	49	570.73
	Rating Area 6	No Preference	50	597.49
	Rating Area 6	No Preference	51	623.92
	Rating Area 6	No Preference	52	653.02
	Rating Area 6	No Preference	53	682.46
	Rating Area 6	No Preference	54	714.25
	Rating Area 6	No Preference	55	746.03
	Rating Area 6	No Preference	56	780.49
	Rating Area 6	No Preference	57	815.28
	Rating Area 6	No Preference	58	852.41
	Rating Area 6	No Preference	59	870.81
	Rating Area 6	No Preference	60	907.95
	Rating Area 6	No Preference	61	940.06
	Rating Area 6	No Preference	62	961.14
	Rating Area 6	No Preference	63	987.57
	Rating Area 6	No Preference	64	1003.61
	Rating Area 6	No Preference	65 and over	1003.61
53789PA0090007	Rating Area 7	No Preference	0-20	214.56
53789PA0090007	Rating Area 7	No Preference	21	337.89
	Rating Area 7	No Preference	22	337.89
	Rating Area 7	No Preference	23	337.89
	Rating Area 7	No Preference	24	337.89
	Rating Area 7	No Preference	25	339.24
	Rating Area 7	No Preference	26	346.00
	Rating Area 7	No Preference	27	354.11
	Rating Area 7	No Preference	28	367.28
	Rating Area 7	No Preference	29	378.10
	Rating Area 7	No Preference	30	383.50
	Rating Area 7	No Preference	31	391.61
	Rating Area 7	No Preference	32	399.72
	Rating Area 7	No Preference	33	404.79
	Rating Area 7	No Preference	34	410.19
	Rating Area 7	No Preference	35	412.90
	Rating Area 7	No Preference	36	415.60
	Rating Area 7	No Preference	37	418.30
	Rating Area 7	No Preference	38	421.01
	Rating Area 7	No Preference	39	426.41
	Rating Area 7	No Preference	40	431.82

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 7	No Preference	41	439.93
	Rating Area 7	No Preference	42	447.70
	Rating Area 7	No Preference	43	458.51
	Rating Area 7	No Preference	44	472.03
	Rating Area 7	No Preference	45	487.91
	Rating Area 7	No Preference	46	506.83
	Rating Area 7	No Preference	47	528.12
	Rating Area 7	No Preference	48	552.44
	Rating Area 7	No Preference	49	576.43
	Rating Area 7	No Preference	50	603.47
	Rating Area 7	No Preference	51	630.16
	Rating Area 7	No Preference	52	659.56
	Rating Area 7	No Preference	53	689.29
	Rating Area 7	No Preference	54	721.39
	Rating Area 7	No Preference	55	753.49
	Rating Area 7	No Preference	56	788.29
	Rating Area 7	No Preference	57	823.43
	Rating Area 7	No Preference	58	860.94
	Rating Area 7	No Preference	59	879.52
	Rating Area 7	No Preference	60	917.02
	Rating Area 7	No Preference	61	949.46
	Rating Area 7	No Preference	62	970.75
	Rating Area 7	No Preference	63	997.44
	Rating Area 7	No Preference	64	1013.66
	Rating Area 7	No Preference	65 and over	1013.66
53789PA0090007	Rating Area 9	No Preference	0-20	210.31
53789PA0090007	Rating Area 9	No Preference	21	331.20
	Rating Area 9	No Preference	22	331.20
	Rating Area 9	No Preference	23	331.20
	Rating Area 9	No Preference	24	331.20
	Rating Area 9	No Preference	25	332.52
	Rating Area 9	No Preference	26	339.14
	Rating Area 9	No Preference	27	347.09
	Rating Area 9	No Preference	28	360.01
	Rating Area 9	No Preference	29	370.61
	Rating Area 9	No Preference	30	375.91
	Rating Area 9	No Preference	31	383.86
	Rating Area 9	No Preference	32	391.80
	Rating Area 9	No Preference	33	396.77
	Rating Area 9	No Preference	34	402.07
	Rating Area 9	No Preference	35	404.72
	Rating Area 9	No Preference	36	407.37

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 9	No Preference	37	410.02
	Rating Area 9	No Preference	38	412.67
	Rating Area 9	No Preference	39	417.97
	Rating Area 9	No Preference	40	423.27
	Rating Area 9	No Preference	41	431.22
	Rating Area 9	No Preference	42	438.83
	Rating Area 9	No Preference	43	449.43
	Rating Area 9	No Preference	44	462.68
	Rating Area 9	No Preference	45	478.25
	Rating Area 9	No Preference	46	496.79
	Rating Area 9	No Preference	47	517.66
	Rating Area 9	No Preference	48	541.51
	Rating Area 9	No Preference	49	565.02
	Rating Area 9	No Preference	50	591.52
	Rating Area 9	No Preference	51	617.68
	Rating Area 9	No Preference	52	646.49
	Rating Area 9	No Preference	53	675.64
	Rating Area 9	No Preference	54	707.10
	Rating Area 9	No Preference	55	738.57
	Rating Area 9	No Preference	56	772.68
	Rating Area 9	No Preference	57	807.12
	Rating Area 9	No Preference	58	843.89
	Rating Area 9	No Preference	59	862.10
	Rating Area 9	No Preference	60	898.87
	Rating Area 9	No Preference	61	930.66
	Rating Area 9	No Preference	62	951.53
	Rating Area 9	No Preference	63	977.69
	Rating Area 9	No Preference	64	993.59
	Rating Area 9	No Preference	65 and over	993.59
53789PA0090008	Rating Area 6	No Preference	0-20	216.21
53789PA0090008	Rating Area 6	No Preference	21	340.49
	Rating Area 6	No Preference	22	340.49
	Rating Area 6	No Preference	23	340.49
	Rating Area 6	No Preference	24	340.49
	Rating Area 6	No Preference	25	341.85
	Rating Area 6	No Preference	26	348.66
	Rating Area 6	No Preference	27	356.83
	Rating Area 6	No Preference	28	370.11
	Rating Area 6	No Preference	29	381.01
	Rating Area 6	No Preference	30	386.46
	Rating Area 6	No Preference	31	394.63
	Rating Area 6	No Preference	32	402.80

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 6	No Preference	33	407.91
	Rating Area 6	No Preference	34	413.35
	Rating Area 6	No Preference	35	416.08
	Rating Area 6	No Preference	36	418.80
	Rating Area 6	No Preference	37	421.53
	Rating Area 6	No Preference	38	424.25
	Rating Area 6	No Preference	39	429.70
	Rating Area 6	No Preference	40	435.15
	Rating Area 6	No Preference	41	443.32
	Rating Area 6	No Preference	42	451.15
	Rating Area 6	No Preference	43	462.04
	Rating Area 6	No Preference	44	475.66
	Rating Area 6	No Preference	45	491.67
	Rating Area 6	No Preference	46	510.73
	Rating Area 6	No Preference	47	532.18
	Rating Area 6	No Preference	48	556.70
	Rating Area 6	No Preference	49	580.87
	Rating Area 6	No Preference	50	608.11
	Rating Area 6	No Preference	51	635.01
	Rating Area 6	No Preference	52	664.63
	Rating Area 6	No Preference	53	694.60
	Rating Area 6	No Preference	54	726.94
	Rating Area 6	No Preference	55	759.29
	Rating Area 6	No Preference	56	794.36
	Rating Area 6	No Preference	57	829.77
	Rating Area 6	No Preference	58	867.57
	Rating Area 6	No Preference	59	886.29
	Rating Area 6	No Preference	60	924.09
	Rating Area 6	No Preference	61	956.77
	Rating Area 6	No Preference	62	978.23
	Rating Area 6	No Preference	63	1005.12
	Rating Area 6	No Preference	64	1021.46
	Rating Area 6	No Preference	65 and over	1021.46
53789PA0090008	Rating Area 7	No Preference	0-20	218.37
53789PA0090008	Rating Area 7	No Preference	21	343.89
	Rating Area 7	No Preference	22	343.89
	Rating Area 7	No Preference	23	343.89
	Rating Area 7	No Preference	24	343.89
	Rating Area 7	No Preference	25	345.27
	Rating Area 7	No Preference	26	352.15
	Rating Area 7	No Preference	27	360.40
	Rating Area 7	No Preference	28	373.81

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 7	No Preference	29	384.82
	Rating Area 7	No Preference	30	390.32
	Rating Area 7	No Preference	31	398.57
	Rating Area 7	No Preference	32	406.83
	Rating Area 7	No Preference	33	411.99
	Rating Area 7	No Preference	34	417.49
	Rating Area 7	No Preference	35	420.24
	Rating Area 7	No Preference	36	422.99
	Rating Area 7	No Preference	37	425.74
	Rating Area 7	No Preference	38	428.49
	Rating Area 7	No Preference	39	433.99
	Rating Area 7	No Preference	40	439.50
	Rating Area 7	No Preference	41	447.75
	Rating Area 7	No Preference	42	455.66
	Rating Area 7	No Preference	43	466.66
	Rating Area 7	No Preference	44	480.42
	Rating Area 7	No Preference	45	496.58
	Rating Area 7	No Preference	46	515.84
	Rating Area 7	No Preference	47	537.51
	Rating Area 7	No Preference	48	562.27
	Rating Area 7	No Preference	49	586.68
	Rating Area 7	No Preference	50	614.19
	Rating Area 7	No Preference	51	641.36
	Rating Area 7	No Preference	52	671.28
	Rating Area 7	No Preference	53	701.54
	Rating Area 7	No Preference	54	734.21
	Rating Area 7	No Preference	55	766.88
	Rating Area 7	No Preference	56	802.30
	Rating Area 7	No Preference	57	838.07
	Rating Area 7	No Preference	58	876.24
	Rating Area 7	No Preference	59	895.16
	Rating Area 7	No Preference	60	933.33
	Rating Area 7	No Preference	61	966.34
	Rating Area 7	No Preference	62	988.01
	Rating Area 7	No Preference	63	1015.18
	Rating Area 7	No Preference	64	1031.67
	Rating Area 7	No Preference	65 and over	1031.67
53789PA0090008	Rating Area 9	No Preference	0-20	214.05
53789PA0090008	Rating Area 9	No Preference	21	337.08
	Rating Area 9	No Preference	22	337.08
	Rating Area 9	No Preference	23	337.08
	Rating Area 9	No Preference	24	337.08

HIOS Issuer ID*		53789			
Federal TIN*		23-2399845			
Rate Effective Date*		1/1/2017			
Rate Expiration Date*		3/31/2017			
Plan ID*		Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID		Required: Select the Rating Area ID	Require: 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
	53789PA0090008	Rating Area 9	No Preference	25	338.43
	53789PA0090008	Rating Area 9	No Preference	26	345.17
	53789PA0090008	Rating Area 9	No Preference	27	353.26
	53789PA0090008	Rating Area 9	No Preference	28	366.41
	53789PA0090008	Rating Area 9	No Preference	29	377.20
	53789PA0090008	Rating Area 9	No Preference	30	382.59
	53789PA0090008	Rating Area 9	No Preference	31	390.68
	53789PA0090008	Rating Area 9	No Preference	32	398.77
	53789PA0090008	Rating Area 9	No Preference	33	403.83
	53789PA0090008	Rating Area 9	No Preference	34	409.22
	53789PA0090008	Rating Area 9	No Preference	35	411.92
	53789PA0090008	Rating Area 9	No Preference	36	414.61
	53789PA0090008	Rating Area 9	No Preference	37	417.31
	53789PA0090008	Rating Area 9	No Preference	38	420.01
	53789PA0090008	Rating Area 9	No Preference	39	425.40
	53789PA0090008	Rating Area 9	No Preference	40	430.79
	53789PA0090008	Rating Area 9	No Preference	41	438.88
	53789PA0090008	Rating Area 9	No Preference	42	446.64
	53789PA0090008	Rating Area 9	No Preference	43	457.42
	53789PA0090008	Rating Area 9	No Preference	44	470.91
	53789PA0090008	Rating Area 9	No Preference	45	486.75
	53789PA0090008	Rating Area 9	No Preference	46	505.63
	53789PA0090008	Rating Area 9	No Preference	47	526.86
	53789PA0090008	Rating Area 9	No Preference	48	551.13
	53789PA0090008	Rating Area 9	No Preference	49	575.07
	53789PA0090008	Rating Area 9	No Preference	50	602.03
	53789PA0090008	Rating Area 9	No Preference	51	628.66
	53789PA0090008	Rating Area 9	No Preference	52	657.99
	53789PA0090008	Rating Area 9	No Preference	53	687.65
	53789PA0090008	Rating Area 9	No Preference	54	719.67
	53789PA0090008	Rating Area 9	No Preference	55	751.70
	53789PA0090008	Rating Area 9	No Preference	56	786.42
	53789PA0090008	Rating Area 9	No Preference	57	821.47
	53789PA0090008	Rating Area 9	No Preference	58	858.89
	53789PA0090008	Rating Area 9	No Preference	59	877.43
	53789PA0090008	Rating Area 9	No Preference	60	914.85
	53789PA0090008	Rating Area 9	No Preference	61	947.21
	53789PA0090008	Rating Area 9	No Preference	62	968.44
	53789PA0090008	Rating Area 9	No Preference	63	995.07
	53789PA0090008	Rating Area 9	No Preference	64	1011.24
	53789PA0090008	Rating Area 9	No Preference	65 and over	1011.24
	53789PA0090011	Rating Area 6	No Preference	0-20	188.09

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*				
Required:Required:Require:Required:Required: Enter the 14-character Plan IDSelect the Rating Area IDSelect if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planSelect the age of a subscriber eligible for the rateEnter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan				
53789PA0090011	Rating Area 6	No Preference	21	296.20
	Rating Area 6	No Preference	22	296.20
	Rating Area 6	No Preference	23	296.20
	Rating Area 6	No Preference	24	296.20
	Rating Area 6	No Preference	25	297.39
	Rating Area 6	No Preference	26	303.31
	Rating Area 6	No Preference	27	310.42
	Rating Area 6	No Preference	28	321.97
	Rating Area 6	No Preference	29	331.45
	Rating Area 6	No Preference	30	336.19
	Rating Area 6	No Preference	31	343.30
	Rating Area 6	No Preference	32	350.41
	Rating Area 6	No Preference	33	354.85
	Rating Area 6	No Preference	34	359.59
	Rating Area 6	No Preference	35	361.96
	Rating Area 6	No Preference	36	364.33
	Rating Area 6	No Preference	37	366.70
	Rating Area 6	No Preference	38	369.07
	Rating Area 6	No Preference	39	373.81
	Rating Area 6	No Preference	40	378.55
	Rating Area 6	No Preference	41	385.66
	Rating Area 6	No Preference	42	392.47
	Rating Area 6	No Preference	43	401.95
	Rating Area 6	No Preference	44	413.80
	Rating Area 6	No Preference	45	427.72
	Rating Area 6	No Preference	46	444.30
	Rating Area 6	No Preference	47	462.97
	Rating Area 6	No Preference	48	484.29
	Rating Area 6	No Preference	49	505.32
	Rating Area 6	No Preference	50	529.02
	Rating Area 6	No Preference	51	552.42
	Rating Area 6	No Preference	52	578.19
	Rating Area 6	No Preference	53	604.25
	Rating Area 6	No Preference	54	632.39
	Rating Area 6	No Preference	55	660.53
	Rating Area 6	No Preference	56	691.04
	Rating Area 6	No Preference	57	721.85
	Rating Area 6	No Preference	58	754.73
	Rating Area 6	No Preference	59	771.02
	Rating Area 6	No Preference	60	803.90
	Rating Area 6	No Preference	61	832.33
	Rating Area 6	No Preference	62	850.99

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 6	No Preference	63	874.39
53789PA0090011	Rating Area 6	No Preference	64	888.60
53789PA0090011	Rating Area 6	No Preference	65 and over	888.60
53789PA0090011	Rating Area 7	No Preference	0-20	189.97
53789PA0090011	Rating Area 7	No Preference	21	299.17
53789PA0090011	Rating Area 7	No Preference	22	299.17
53789PA0090011	Rating Area 7	No Preference	23	299.17
53789PA0090011	Rating Area 7	No Preference	24	299.17
53789PA0090011	Rating Area 7	No Preference	25	300.36
53789PA0090011	Rating Area 7	No Preference	26	306.35
53789PA0090011	Rating Area 7	No Preference	27	313.53
53789PA0090011	Rating Area 7	No Preference	28	325.19
53789PA0090011	Rating Area 7	No Preference	29	334.77
53789PA0090011	Rating Area 7	No Preference	30	339.55
53789PA0090011	Rating Area 7	No Preference	31	346.73
53789PA0090011	Rating Area 7	No Preference	32	353.91
53789PA0090011	Rating Area 7	No Preference	33	358.40
53789PA0090011	Rating Area 7	No Preference	34	363.19
53789PA0090011	Rating Area 7	No Preference	35	365.58
53789PA0090011	Rating Area 7	No Preference	36	367.97
53789PA0090011	Rating Area 7	No Preference	37	370.37
53789PA0090011	Rating Area 7	No Preference	38	372.76
53789PA0090011	Rating Area 7	No Preference	39	377.55
53789PA0090011	Rating Area 7	No Preference	40	382.33
53789PA0090011	Rating Area 7	No Preference	41	389.51
53789PA0090011	Rating Area 7	No Preference	42	396.39
53789PA0090011	Rating Area 7	No Preference	43	405.97
53789PA0090011	Rating Area 7	No Preference	44	417.93
53789PA0090011	Rating Area 7	No Preference	45	431.99
53789PA0090011	Rating Area 7	No Preference	46	448.75
53789PA0090011	Rating Area 7	No Preference	47	467.60
53789PA0090011	Rating Area 7	No Preference	48	489.14
53789PA0090011	Rating Area 7	No Preference	49	510.38
53789PA0090011	Rating Area 7	No Preference	50	534.31
53789PA0090011	Rating Area 7	No Preference	51	557.94
53789PA0090011	Rating Area 7	No Preference	52	583.97
53789PA0090011	Rating Area 7	No Preference	53	610.30
53789PA0090011	Rating Area 7	No Preference	54	638.72
53789PA0090011	Rating Area 7	No Preference	55	667.14
53789PA0090011	Rating Area 7	No Preference	56	697.95
53789PA0090011	Rating Area 7	No Preference	57	729.07
53789PA0090011	Rating Area 7	No Preference	58	762.27

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 7	No Preference	59	778.73
	Rating Area 7	No Preference	60	811.93
	Rating Area 7	No Preference	61	840.65
	Rating Area 7	No Preference	62	859.50
	Rating Area 7	No Preference	63	883.14
	Rating Area 7	No Preference	64	897.50
	Rating Area 7	No Preference	65 and over	897.50
53789PA0090011	Rating Area 9	No Preference	0-20	186.21
53789PA0090011	Rating Area 9	No Preference	21	293.24
	Rating Area 9	No Preference	22	293.24
	Rating Area 9	No Preference	23	293.24
	Rating Area 9	No Preference	24	293.24
	Rating Area 9	No Preference	25	294.41
	Rating Area 9	No Preference	26	300.28
	Rating Area 9	No Preference	27	307.32
	Rating Area 9	No Preference	28	318.75
	Rating Area 9	No Preference	29	328.14
	Rating Area 9	No Preference	30	332.83
	Rating Area 9	No Preference	31	339.87
	Rating Area 9	No Preference	32	346.90
	Rating Area 9	No Preference	33	351.30
	Rating Area 9	No Preference	34	355.99
	Rating Area 9	No Preference	35	358.34
	Rating Area 9	No Preference	36	360.69
	Rating Area 9	No Preference	37	363.03
	Rating Area 9	No Preference	38	365.38
	Rating Area 9	No Preference	39	370.07
	Rating Area 9	No Preference	40	374.76
	Rating Area 9	No Preference	41	381.80
	Rating Area 9	No Preference	42	388.54
	Rating Area 9	No Preference	43	397.93
	Rating Area 9	No Preference	44	409.66
	Rating Area 9	No Preference	45	423.44
	Rating Area 9	No Preference	46	439.86
	Rating Area 9	No Preference	47	458.34
	Rating Area 9	No Preference	48	479.45
	Rating Area 9	No Preference	49	500.27
	Rating Area 9	No Preference	50	523.73
	Rating Area 9	No Preference	51	546.89
	Rating Area 9	No Preference	52	572.41
	Rating Area 9	No Preference	53	598.21
	Rating Area 9	No Preference	54	626.07

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 9	No Preference	55	653.93
	Rating Area 9	No Preference	56	684.13
	Rating Area 9	No Preference	57	714.63
	Rating Area 9	No Preference	58	747.18
	Rating Area 9	No Preference	59	763.31
	Rating Area 9	No Preference	60	795.86
	Rating Area 9	No Preference	61	824.01
	Rating Area 9	No Preference	62	842.48
	Rating Area 9	No Preference	63	865.65
	Rating Area 9	No Preference	64	879.71
	Rating Area 9	No Preference	65 and over	879.71
53789PA0090012	Rating Area 6	No Preference	0-20	191.87
53789PA0090012	Rating Area 6	No Preference	21	302.15
	Rating Area 6	No Preference	22	302.15
	Rating Area 6	No Preference	23	302.15
	Rating Area 6	No Preference	24	302.15
	Rating Area 6	No Preference	25	303.36
	Rating Area 6	No Preference	26	309.40
	Rating Area 6	No Preference	27	316.65
	Rating Area 6	No Preference	28	328.44
	Rating Area 6	No Preference	29	338.11
	Rating Area 6	No Preference	30	342.94
	Rating Area 6	No Preference	31	350.19
	Rating Area 6	No Preference	32	357.44
	Rating Area 6	No Preference	33	361.98
	Rating Area 6	No Preference	34	366.81
	Rating Area 6	No Preference	35	369.23
	Rating Area 6	No Preference	36	371.65
	Rating Area 6	No Preference	37	374.06
	Rating Area 6	No Preference	38	376.48
	Rating Area 6	No Preference	39	381.31
	Rating Area 6	No Preference	40	386.15
	Rating Area 6	No Preference	41	393.40
	Rating Area 6	No Preference	42	400.35
	Rating Area 6	No Preference	43	410.02
	Rating Area 6	No Preference	44	422.11
	Rating Area 6	No Preference	45	436.31
	Rating Area 6	No Preference	46	453.23
	Rating Area 6	No Preference	47	472.26
	Rating Area 6	No Preference	48	494.02
	Rating Area 6	No Preference	49	515.47
	Rating Area 6	No Preference	50	539.64

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090012	Rating Area 6	No Preference	51	563.51
	Rating Area 6	No Preference	52	589.80
	Rating Area 6	No Preference	53	616.39
	Rating Area 6	No Preference	54	645.09
	Rating Area 6	No Preference	55	673.80
	Rating Area 6	No Preference	56	704.92
	Rating Area 6	No Preference	57	736.34
	Rating Area 6	No Preference	58	769.88
	Rating Area 6	No Preference	59	786.50
	Rating Area 6	No Preference	60	820.04
	Rating Area 6	No Preference	61	849.04
	Rating Area 6	No Preference	62	868.08
	Rating Area 6	No Preference	63	891.95
	Rating Area 6	No Preference	64	906.44
	Rating Area 6	No Preference	65 and over	906.44
53789PA0090012	Rating Area 7	No Preference	0-20	193.78
53789PA0090012	Rating Area 7	No Preference	21	305.17
	Rating Area 7	No Preference	22	305.17
	Rating Area 7	No Preference	23	305.17
	Rating Area 7	No Preference	24	305.17
	Rating Area 7	No Preference	25	306.39
	Rating Area 7	No Preference	26	312.50
	Rating Area 7	No Preference	27	319.82
	Rating Area 7	No Preference	28	331.72
	Rating Area 7	No Preference	29	341.49
	Rating Area 7	No Preference	30	346.37
	Rating Area 7	No Preference	31	353.70
	Rating Area 7	No Preference	32	361.02
	Rating Area 7	No Preference	33	365.60
	Rating Area 7	No Preference	34	370.48
	Rating Area 7	No Preference	35	372.92
	Rating Area 7	No Preference	36	375.36
	Rating Area 7	No Preference	37	377.80
	Rating Area 7	No Preference	38	380.25
	Rating Area 7	No Preference	39	385.13
	Rating Area 7	No Preference	40	390.01
	Rating Area 7	No Preference	41	397.33
	Rating Area 7	No Preference	42	404.35
	Rating Area 7	No Preference	43	414.12
	Rating Area 7	No Preference	44	426.33
	Rating Area 7	No Preference	45	440.67
	Rating Area 7	No Preference	46	457.76

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	1/1/2017		
	Rate Expiration Date*	3/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090012	Rating Area 7	No Preference	47	476.98
	Rating Area 7	No Preference	48	498.96
	Rating Area 7	No Preference	49	520.62
	Rating Area 7	No Preference	50	545.04
	Rating Area 7	No Preference	51	569.15
	Rating Area 7	No Preference	52	595.70
	Rating Area 7	No Preference	53	622.55
	Rating Area 7	No Preference	54	651.54
	Rating Area 7	No Preference	55	680.53
	Rating Area 7	No Preference	56	711.97
	Rating Area 7	No Preference	57	743.71
	Rating Area 7	No Preference	58	777.58
	Rating Area 7	No Preference	59	794.36
	Rating Area 7	No Preference	60	828.24
	Rating Area 7	No Preference	61	857.54
	Rating Area 7	No Preference	62	876.76
	Rating Area 7	No Preference	63	900.87
	Rating Area 7	No Preference	64	915.51
	Rating Area 7	No Preference	65 and over	915.51
53789PA0090012	Rating Area 9	No Preference	0-20	189.95
53789PA0090012	Rating Area 9	No Preference	21	299.13
	Rating Area 9	No Preference	22	299.13
	Rating Area 9	No Preference	23	299.13
	Rating Area 9	No Preference	24	299.13
	Rating Area 9	No Preference	25	300.33
	Rating Area 9	No Preference	26	306.31
	Rating Area 9	No Preference	27	313.49
	Rating Area 9	No Preference	28	325.15
	Rating Area 9	No Preference	29	334.73
	Rating Area 9	No Preference	30	339.51
	Rating Area 9	No Preference	31	346.69
	Rating Area 9	No Preference	32	353.87
	Rating Area 9	No Preference	33	358.36
	Rating Area 9	No Preference	34	363.14
	Rating Area 9	No Preference	35	365.54
	Rating Area 9	No Preference	36	367.93
	Rating Area 9	No Preference	37	370.32
	Rating Area 9	No Preference	38	372.72
	Rating Area 9	No Preference	39	377.50
	Rating Area 9	No Preference	40	382.29
	Rating Area 9	No Preference	41	389.47
53789PA0090012	Rating Area 9	No Preference	42	396.35

HIOS Issuer ID*		53789			
Federal TIN*		23-2399845			
Rate Effective Date*		1/1/2017			
Rate Expiration Date*		3/31/2017			
Plan ID*		Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID		Required: Select the Rating Area ID	Require: 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
	53789PA0090012	Rating Area 9	No Preference	43	405.92
	53789PA0090012	Rating Area 9	No Preference	44	417.88
	53789PA0090012	Rating Area 9	No Preference	45	431.94
	53789PA0090012	Rating Area 9	No Preference	46	448.69
	53789PA0090012	Rating Area 9	No Preference	47	467.54
	53789PA0090012	Rating Area 9	No Preference	48	489.08
	53789PA0090012	Rating Area 9	No Preference	49	510.32
	53789PA0090012	Rating Area 9	No Preference	50	534.25
	53789PA0090012	Rating Area 9	No Preference	51	557.88
	53789PA0090012	Rating Area 9	No Preference	52	583.90
	53789PA0090012	Rating Area 9	No Preference	53	610.22
	53789PA0090012	Rating Area 9	No Preference	54	638.64
	53789PA0090012	Rating Area 9	No Preference	55	667.06
	53789PA0090012	Rating Area 9	No Preference	56	697.87
	53789PA0090012	Rating Area 9	No Preference	57	728.98
	53789PA0090012	Rating Area 9	No Preference	58	762.18
	53789PA0090012	Rating Area 9	No Preference	59	778.63
	53789PA0090012	Rating Area 9	No Preference	60	811.84
	53789PA0090012	Rating Area 9	No Preference	61	840.55
	53789PA0090012	Rating Area 9	No Preference	62	859.40
	53789PA0090012	Rating Area 9	No Preference	63	883.03
	53789PA0090012	Rating Area 9	No Preference	64	897.38
	53789PA0090012	Rating Area 9	No Preference	65 and over	897.38

2017 Rates Table Template v6.0	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 a community rating state, select Family Option under Age and fill in all columns.			
	If you are not community rating state, select 0-20 under Age and provide an Individual Rate for every age band.			
	If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
	To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID* Federal TIN* Rate Effective Date* Rate Expiration Date*	53789			
	23-2399845			
	4/1/2017			
	6/30/2017			
<div><div>Plan ID*</div><div>Required: Enter the 14-character Plan ID</div></div> <div><div>Rating Area ID*</div><div>Required: Select the Rating Area ID</div></div> <div><div>Tobacco*</div><div>Require: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan</div></div> <div><div>Age*</div><div>Required: Select the age of a subscriber eligible for the rate</div></div> <div><div>Individual Rate*</div><div>Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan</div></div>				
53789PA0090004	Rating Area 6	No Preference	0-20	155.72
53789PA0090004	Rating Area 6	No Preference	21	245.23
53789PA0090004	Rating Area 6	No Preference	22	245.23
53789PA0090004	Rating Area 6	No Preference	23	245.23
53789PA0090004	Rating Area 6	No Preference	24	245.23
53789PA0090004	Rating Area 6	No Preference	25	246.21
53789PA0090004	Rating Area 6	No Preference	26	251.12
53789PA0090004	Rating Area 6	No Preference	27	257.00
53789PA0090004	Rating Area 6	No Preference	28	266.57
53789PA0090004	Rating Area 6	No Preference	29	274.41
53789PA0090004	Rating Area 6	No Preference	30	278.34
53789PA0090004	Rating Area 6	No Preference	31	284.22
53789PA0090004	Rating Area 6	No Preference	32	290.11
53789PA0090004	Rating Area 6	No Preference	33	293.79
53789PA0090004	Rating Area 6	No Preference	34	297.71
53789PA0090004	Rating Area 6	No Preference	35	299.67
53789PA0090004	Rating Area 6	No Preference	36	301.63
53789PA0090004	Rating Area 6	No Preference	37	303.59
53789PA0090004	Rating Area 6	No Preference	38	305.56
53789PA0090004	Rating Area 6	No Preference	39	309.48
53789PA0090004	Rating Area 6	No Preference	40	313.40
53789PA0090004	Rating Area 6	No Preference	41	319.29
53789PA0090004	Rating Area 6	No Preference	42	324.93
53789PA0090004	Rating Area 6	No Preference	43	332.78
53789PA0090004	Rating Area 6	No Preference	44	342.59
53789PA0090004	Rating Area 6	No Preference	45	354.11
53789PA0090004	Rating Area 6	No Preference	46	367.84
53789PA0090004	Rating Area 6	No Preference	47	383.29
53789PA0090004	Rating Area 6	No Preference	48	400.95
53789PA0090004	Rating Area 6	No Preference	49	418.36
53789PA0090004	Rating Area 6	No Preference	50	437.98
53789PA0090004	Rating Area 6	No Preference	51	457.35
53789PA0090004	Rating Area 6	No Preference	52	478.69
53789PA0090004	Rating Area 6	No Preference	53	500.27
53789PA0090004	Rating Area 6	No Preference	54	523.57
53789PA0090004	Rating Area 6	No Preference	55	546.86
53789PA0090004	Rating Area 6	No Preference	56	572.12

HIOS Issuer ID*	53789			
Federal TIN*	23-2399845			
Rate Effective Date*	4/1/2017			
Rate Expiration Date*	6/30/2017			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 6	No Preference	57	597.63
53789PA0090004	Rating Area 6	No Preference	58	624.85
53789PA0090004	Rating Area 6	No Preference	59	638.33
53789PA0090004	Rating Area 6	No Preference	60	665.55
53789PA0090004	Rating Area 6	No Preference	61	689.10
53789PA0090004	Rating Area 6	No Preference	62	704.55
53789PA0090004	Rating Area 6	No Preference	63	723.92
53789PA0090004	Rating Area 6	No Preference	64	735.68
53789PA0090004	Rating Area 6	No Preference	65 and over	735.68
53789PA0090004	Rating Area 7	No Preference	0-20	157.28
53789PA0090004	Rating Area 7	No Preference	21	247.68
53789PA0090004	Rating Area 7	No Preference	22	247.68
53789PA0090004	Rating Area 7	No Preference	23	247.68
53789PA0090004	Rating Area 7	No Preference	24	247.68
53789PA0090004	Rating Area 7	No Preference	25	248.67
53789PA0090004	Rating Area 7	No Preference	26	253.63
53789PA0090004	Rating Area 7	No Preference	27	259.57
53789PA0090004	Rating Area 7	No Preference	28	269.23
53789PA0090004	Rating Area 7	No Preference	29	277.16
53789PA0090004	Rating Area 7	No Preference	30	281.12
53789PA0090004	Rating Area 7	No Preference	31	287.06
53789PA0090004	Rating Area 7	No Preference	32	293.01
53789PA0090004	Rating Area 7	No Preference	33	296.72
53789PA0090004	Rating Area 7	No Preference	34	300.69
53789PA0090004	Rating Area 7	No Preference	35	302.67
53789PA0090004	Rating Area 7	No Preference	36	304.65
53789PA0090004	Rating Area 7	No Preference	37	306.63
53789PA0090004	Rating Area 7	No Preference	38	308.61
53789PA0090004	Rating Area 7	No Preference	39	312.58
53789PA0090004	Rating Area 7	No Preference	40	316.54
53789PA0090004	Rating Area 7	No Preference	41	322.48
53789PA0090004	Rating Area 7	No Preference	42	328.18
53789PA0090004	Rating Area 7	No Preference	43	336.10
53789PA0090004	Rating Area 7	No Preference	44	346.01
53789PA0090004	Rating Area 7	No Preference	45	357.65
53789PA0090004	Rating Area 7	No Preference	46	371.52
53789PA0090004	Rating Area 7	No Preference	47	387.13
53789PA0090004	Rating Area 7	No Preference	48	404.96
53789PA0090004	Rating Area 7	No Preference	49	422.55
53789PA0090004	Rating Area 7	No Preference	50	442.36
53789PA0090004	Rating Area 7	No Preference	51	461.93
53789PA0090004	Rating Area 7	No Preference	52	483.48

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 7	No Preference	53	505.27
	Rating Area 7	No Preference	54	528.80
	Rating Area 7	No Preference	55	552.33
	Rating Area 7	No Preference	56	577.84
	Rating Area 7	No Preference	57	603.60
	Rating Area 7	No Preference	58	631.09
	Rating Area 7	No Preference	59	644.72
	Rating Area 7	No Preference	60	672.21
	Rating Area 7	No Preference	61	695.99
	Rating Area 7	No Preference	62	711.59
	Rating Area 7	No Preference	63	731.16
	Rating Area 7	No Preference	64	743.04
	Rating Area 7	No Preference	65 and over	743.04
53789PA0090004	Rating Area 9	No Preference	0-20	154.16
53789PA0090004	Rating Area 9	No Preference	21	242.78
	Rating Area 9	No Preference	22	242.78
	Rating Area 9	No Preference	23	242.78
	Rating Area 9	No Preference	24	242.78
	Rating Area 9	No Preference	25	243.75
	Rating Area 9	No Preference	26	248.60
	Rating Area 9	No Preference	27	254.43
	Rating Area 9	No Preference	28	263.90
	Rating Area 9	No Preference	29	271.67
	Rating Area 9	No Preference	30	275.55
	Rating Area 9	No Preference	31	281.38
	Rating Area 9	No Preference	32	287.21
	Rating Area 9	No Preference	33	290.85
	Rating Area 9	No Preference	34	294.73
	Rating Area 9	No Preference	35	296.67
	Rating Area 9	No Preference	36	298.62
	Rating Area 9	No Preference	37	300.56
	Rating Area 9	No Preference	38	302.50
	Rating Area 9	No Preference	39	306.39
	Rating Area 9	No Preference	40	310.27
	Rating Area 9	No Preference	41	316.10
	Rating Area 9	No Preference	42	321.68
	Rating Area 9	No Preference	43	329.45
	Rating Area 9	No Preference	44	339.16
	Rating Area 9	No Preference	45	350.57
	Rating Area 9	No Preference	46	364.17
	Rating Area 9	No Preference	47	379.46
	Rating Area 9	No Preference	48	396.94

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 9	No Preference	49	414.18
	Rating Area 9	No Preference	50	433.60
	Rating Area 9	No Preference	51	452.78
	Rating Area 9	No Preference	52	473.90
	Rating Area 9	No Preference	53	495.27
	Rating Area 9	No Preference	54	518.33
	Rating Area 9	No Preference	55	541.39
	Rating Area 9	No Preference	56	566.40
	Rating Area 9	No Preference	57	591.65
	Rating Area 9	No Preference	58	618.60
	Rating Area 9	No Preference	59	631.95
	Rating Area 9	No Preference	60	658.90
	Rating Area 9	No Preference	61	682.21
	Rating Area 9	No Preference	62	697.50
	Rating Area 9	No Preference	63	716.68
	Rating Area 9	No Preference	64	728.33
	Rating Area 9	No Preference	65 and over	728.33
53789PA0090007	Rating Area 6	No Preference	0-20	216.52
53789PA0090007	Rating Area 6	No Preference	21	340.98
	Rating Area 6	No Preference	22	340.98
	Rating Area 6	No Preference	23	340.98
	Rating Area 6	No Preference	24	340.98
	Rating Area 6	No Preference	25	342.34
	Rating Area 6	No Preference	26	349.16
	Rating Area 6	No Preference	27	357.35
	Rating Area 6	No Preference	28	370.65
	Rating Area 6	No Preference	29	381.56
	Rating Area 6	No Preference	30	387.01
	Rating Area 6	No Preference	31	395.20
	Rating Area 6	No Preference	32	403.38
	Rating Area 6	No Preference	33	408.49
	Rating Area 6	No Preference	34	413.95
	Rating Area 6	No Preference	35	416.68
	Rating Area 6	No Preference	36	419.41
	Rating Area 6	No Preference	37	422.13
	Rating Area 6	No Preference	38	424.86
	Rating Area 6	No Preference	39	430.32
	Rating Area 6	No Preference	40	435.77
	Rating Area 6	No Preference	41	443.96
	Rating Area 6	No Preference	42	451.80
	Rating Area 6	No Preference	43	462.71
	Rating Area 6	No Preference	44	476.35

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 6	No Preference	45	492.38
	Rating Area 6	No Preference	46	511.47
	Rating Area 6	No Preference	47	532.95
	Rating Area 6	No Preference	48	557.50
	Rating Area 6	No Preference	49	581.71
	Rating Area 6	No Preference	50	608.99
	Rating Area 6	No Preference	51	635.93
	Rating Area 6	No Preference	52	665.59
	Rating Area 6	No Preference	53	695.60
	Rating Area 6	No Preference	54	727.99
	Rating Area 6	No Preference	55	760.39
	Rating Area 6	No Preference	56	795.51
	Rating Area 6	No Preference	57	830.97
	Rating Area 6	No Preference	58	868.82
	Rating Area 6	No Preference	59	887.57
	Rating Area 6	No Preference	60	925.42
	Rating Area 6	No Preference	61	958.15
	Rating Area 6	No Preference	62	979.64
	Rating Area 6	No Preference	63	1006.57
	Rating Area 6	No Preference	64	1022.93
	Rating Area 6	No Preference	65 and over	1022.93
53789PA0090007	Rating Area 7	No Preference	0-20	218.69
53789PA0090007	Rating Area 7	No Preference	21	344.39
	Rating Area 7	No Preference	22	344.39
	Rating Area 7	No Preference	23	344.39
	Rating Area 7	No Preference	24	344.39
	Rating Area 7	No Preference	25	345.77
	Rating Area 7	No Preference	26	352.66
	Rating Area 7	No Preference	27	360.92
	Rating Area 7	No Preference	28	374.35
	Rating Area 7	No Preference	29	385.37
	Rating Area 7	No Preference	30	390.88
	Rating Area 7	No Preference	31	399.15
	Rating Area 7	No Preference	32	407.41
	Rating Area 7	No Preference	33	412.58
	Rating Area 7	No Preference	34	418.09
	Rating Area 7	No Preference	35	420.84
	Rating Area 7	No Preference	36	423.60
	Rating Area 7	No Preference	37	426.35
	Rating Area 7	No Preference	38	429.11
	Rating Area 7	No Preference	39	434.62
	Rating Area 7	No Preference	40	440.13

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 7	No Preference	41	448.40
	Rating Area 7	No Preference	42	456.32
	Rating Area 7	No Preference	43	467.34
	Rating Area 7	No Preference	44	481.11
	Rating Area 7	No Preference	45	497.30
	Rating Area 7	No Preference	46	516.58
	Rating Area 7	No Preference	47	538.28
	Rating Area 7	No Preference	48	563.08
	Rating Area 7	No Preference	49	587.53
	Rating Area 7	No Preference	50	615.08
	Rating Area 7	No Preference	51	642.29
	Rating Area 7	No Preference	52	672.25
	Rating Area 7	No Preference	53	702.56
	Rating Area 7	No Preference	54	735.27
	Rating Area 7	No Preference	55	767.99
	Rating Area 7	No Preference	56	803.46
	Rating Area 7	No Preference	57	839.28
	Rating Area 7	No Preference	58	877.51
	Rating Area 7	No Preference	59	896.45
	Rating Area 7	No Preference	60	934.67
	Rating Area 7	No Preference	61	967.74
	Rating Area 7	No Preference	62	989.43
	Rating Area 7	No Preference	63	1016.64
	Rating Area 7	No Preference	64	1033.16
	Rating Area 7	No Preference	65 and over	1033.16
53789PA0090007	Rating Area 9	No Preference	0-20	214.36
53789PA0090007	Rating Area 9	No Preference	21	337.57
	Rating Area 9	No Preference	22	337.57
	Rating Area 9	No Preference	23	337.57
	Rating Area 9	No Preference	24	337.57
	Rating Area 9	No Preference	25	338.92
	Rating Area 9	No Preference	26	345.67
	Rating Area 9	No Preference	27	353.77
	Rating Area 9	No Preference	28	366.94
	Rating Area 9	No Preference	29	377.74
	Rating Area 9	No Preference	30	383.14
	Rating Area 9	No Preference	31	391.24
	Rating Area 9	No Preference	32	399.35
	Rating Area 9	No Preference	33	404.41
	Rating Area 9	No Preference	34	409.81
	Rating Area 9	No Preference	35	412.51
	Rating Area 9	No Preference	36	415.21

HIOS Issuer ID*		53789			
Federal TIN*		23-2399845			
Rate Effective Date*		4/1/2017			
Rate Expiration Date*		6/30/2017			
Plan ID*		Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID		Required: Select the Rating Area ID	Require: 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
	53789PA0090007	Rating Area 9	No Preference	37	417.91
	53789PA0090007	Rating Area 9	No Preference	38	420.61
	53789PA0090007	Rating Area 9	No Preference	39	426.01
	53789PA0090007	Rating Area 9	No Preference	40	431.41
	53789PA0090007	Rating Area 9	No Preference	41	439.52
	53789PA0090007	Rating Area 9	No Preference	42	447.28
	53789PA0090007	Rating Area 9	No Preference	43	458.08
	53789PA0090007	Rating Area 9	No Preference	44	471.59
	53789PA0090007	Rating Area 9	No Preference	45	487.45
	53789PA0090007	Rating Area 9	No Preference	46	506.36
	53789PA0090007	Rating Area 9	No Preference	47	527.62
	53789PA0090007	Rating Area 9	No Preference	48	551.93
	53789PA0090007	Rating Area 9	No Preference	49	575.89
	53789PA0090007	Rating Area 9	No Preference	50	602.90
	53789PA0090007	Rating Area 9	No Preference	51	629.57
	53789PA0090007	Rating Area 9	No Preference	52	658.94
	53789PA0090007	Rating Area 9	No Preference	53	688.64
	53789PA0090007	Rating Area 9	No Preference	54	720.71
	53789PA0090007	Rating Area 9	No Preference	55	752.78
	53789PA0090007	Rating Area 9	No Preference	56	787.55
	53789PA0090007	Rating Area 9	No Preference	57	822.66
	53789PA0090007	Rating Area 9	No Preference	58	860.13
	53789PA0090007	Rating Area 9	No Preference	59	878.70
	53789PA0090007	Rating Area 9	No Preference	60	916.17
	53789PA0090007	Rating Area 9	No Preference	61	948.57
	53789PA0090007	Rating Area 9	No Preference	62	969.84
	53789PA0090007	Rating Area 9	No Preference	63	996.51
	53789PA0090007	Rating Area 9	No Preference	64	1012.70
	53789PA0090007	Rating Area 9	No Preference	65 and over	1012.70
	53789PA0090008	Rating Area 6	No Preference	0-20	220.37
	53789PA0090008	Rating Area 6	No Preference	21	347.04
	53789PA0090008	Rating Area 6	No Preference	22	347.04
	53789PA0090008	Rating Area 6	No Preference	23	347.04
	53789PA0090008	Rating Area 6	No Preference	24	347.04
	53789PA0090008	Rating Area 6	No Preference	25	348.43
	53789PA0090008	Rating Area 6	No Preference	26	355.37
	53789PA0090008	Rating Area 6	No Preference	27	363.70
	53789PA0090008	Rating Area 6	No Preference	28	377.23
	53789PA0090008	Rating Area 6	No Preference	29	388.34
	53789PA0090008	Rating Area 6	No Preference	30	393.89
	53789PA0090008	Rating Area 6	No Preference	31	402.22
	53789PA0090008	Rating Area 6	No Preference	32	410.55

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 6	No Preference	33	415.75
	Rating Area 6	No Preference	34	421.31
	Rating Area 6	No Preference	35	424.08
	Rating Area 6	No Preference	36	426.86
	Rating Area 6	No Preference	37	429.64
	Rating Area 6	No Preference	38	432.41
	Rating Area 6	No Preference	39	437.96
	Rating Area 6	No Preference	40	443.52
	Rating Area 6	No Preference	41	451.85
	Rating Area 6	No Preference	42	459.83
	Rating Area 6	No Preference	43	470.93
	Rating Area 6	No Preference	44	484.81
	Rating Area 6	No Preference	45	501.13
	Rating Area 6	No Preference	46	520.56
	Rating Area 6	No Preference	47	542.42
	Rating Area 6	No Preference	48	567.41
	Rating Area 6	No Preference	49	592.05
	Rating Area 6	No Preference	50	619.81
	Rating Area 6	No Preference	51	647.23
	Rating Area 6	No Preference	52	677.42
	Rating Area 6	No Preference	53	707.96
	Rating Area 6	No Preference	54	740.93
	Rating Area 6	No Preference	55	773.90
	Rating Area 6	No Preference	56	809.64
	Rating Area 6	No Preference	57	845.74
	Rating Area 6	No Preference	58	884.26
	Rating Area 6	No Preference	59	903.35
	Rating Area 6	No Preference	60	941.87
	Rating Area 6	No Preference	61	975.18
	Rating Area 6	No Preference	62	997.05
	Rating Area 6	No Preference	63	1024.46
	Rating Area 6	No Preference	64	1041.11
	Rating Area 6	No Preference	65 and over	1041.11
53789PA0090008	Rating Area 7	No Preference	0-20	222.57
53789PA0090008	Rating Area 7	No Preference	21	350.51
	Rating Area 7	No Preference	22	350.51
	Rating Area 7	No Preference	23	350.51
	Rating Area 7	No Preference	24	350.51
	Rating Area 7	No Preference	25	351.91
	Rating Area 7	No Preference	26	358.92
	Rating Area 7	No Preference	27	367.33
	Rating Area 7	No Preference	28	381.00

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 7	No Preference	29	392.22
	Rating Area 7	No Preference	30	397.83
	Rating Area 7	No Preference	31	406.24
	Rating Area 7	No Preference	32	414.65
	Rating Area 7	No Preference	33	419.91
	Rating Area 7	No Preference	34	425.52
	Rating Area 7	No Preference	35	428.32
	Rating Area 7	No Preference	36	431.13
	Rating Area 7	No Preference	37	433.93
	Rating Area 7	No Preference	38	436.74
	Rating Area 7	No Preference	39	442.34
	Rating Area 7	No Preference	40	447.95
	Rating Area 7	No Preference	41	456.36
	Rating Area 7	No Preference	42	464.43
	Rating Area 7	No Preference	43	475.64
	Rating Area 7	No Preference	44	489.66
	Rating Area 7	No Preference	45	506.14
	Rating Area 7	No Preference	46	525.77
	Rating Area 7	No Preference	47	547.85
	Rating Area 7	No Preference	48	573.08
	Rating Area 7	No Preference	49	597.97
	Rating Area 7	No Preference	50	626.01
	Rating Area 7	No Preference	51	653.70
	Rating Area 7	No Preference	52	684.20
	Rating Area 7	No Preference	53	715.04
	Rating Area 7	No Preference	54	748.34
	Rating Area 7	No Preference	55	781.64
	Rating Area 7	No Preference	56	817.74
	Rating Area 7	No Preference	57	854.19
	Rating Area 7	No Preference	58	893.10
	Rating Area 7	No Preference	59	912.38
	Rating Area 7	No Preference	60	951.29
	Rating Area 7	No Preference	61	984.93
	Rating Area 7	No Preference	62	1007.02
	Rating Area 7	No Preference	63	1034.71
	Rating Area 7	No Preference	64	1051.52
	Rating Area 7	No Preference	65 and over	1051.52
53789PA0090008	Rating Area 9	No Preference	0-20	218.17
53789PA0090008	Rating Area 9	No Preference	21	343.57
	Rating Area 9	No Preference	22	343.57
	Rating Area 9	No Preference	23	343.57
	Rating Area 9	No Preference	24	343.57

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 9	No Preference	25	344.94
	Rating Area 9	No Preference	26	351.82
	Rating Area 9	No Preference	27	360.06
	Rating Area 9	No Preference	28	373.46
	Rating Area 9	No Preference	29	384.45
	Rating Area 9	No Preference	30	389.95
	Rating Area 9	No Preference	31	398.20
	Rating Area 9	No Preference	32	406.44
	Rating Area 9	No Preference	33	411.60
	Rating Area 9	No Preference	34	417.09
	Rating Area 9	No Preference	35	419.84
	Rating Area 9	No Preference	36	422.59
	Rating Area 9	No Preference	37	425.34
	Rating Area 9	No Preference	38	428.09
	Rating Area 9	No Preference	39	433.58
	Rating Area 9	No Preference	40	439.08
	Rating Area 9	No Preference	41	447.33
	Rating Area 9	No Preference	42	455.23
	Rating Area 9	No Preference	43	466.22
	Rating Area 9	No Preference	44	479.97
	Rating Area 9	No Preference	45	496.11
	Rating Area 9	No Preference	46	515.35
	Rating Area 9	No Preference	47	537.00
	Rating Area 9	No Preference	48	561.74
	Rating Area 9	No Preference	49	586.13
	Rating Area 9	No Preference	50	613.62
	Rating Area 9	No Preference	51	640.76
	Rating Area 9	No Preference	52	670.65
	Rating Area 9	No Preference	53	700.88
	Rating Area 9	No Preference	54	733.52
	Rating Area 9	No Preference	55	766.16
	Rating Area 9	No Preference	56	801.55
	Rating Area 9	No Preference	57	837.28
	Rating Area 9	No Preference	58	875.42
	Rating Area 9	No Preference	59	894.31
	Rating Area 9	No Preference	60	932.45
	Rating Area 9	No Preference	61	965.43
	Rating Area 9	No Preference	62	987.08
	Rating Area 9	No Preference	63	1014.22
	Rating Area 9	No Preference	64	1030.70
	Rating Area 9	No Preference	65 and over	1030.70
53789PA0090011	Rating Area 6	No Preference	0-20	191.71

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 6	No Preference	21	301.90
	Rating Area 6	No Preference	22	301.90
	Rating Area 6	No Preference	23	301.90
	Rating Area 6	No Preference	24	301.90
	Rating Area 6	No Preference	25	303.11
	Rating Area 6	No Preference	26	309.15
	Rating Area 6	No Preference	27	316.39
	Rating Area 6	No Preference	28	328.17
	Rating Area 6	No Preference	29	337.83
	Rating Area 6	No Preference	30	342.66
	Rating Area 6	No Preference	31	349.90
	Rating Area 6	No Preference	32	357.15
	Rating Area 6	No Preference	33	361.68
	Rating Area 6	No Preference	34	366.51
	Rating Area 6	No Preference	35	368.92
	Rating Area 6	No Preference	36	371.34
	Rating Area 6	No Preference	37	373.75
	Rating Area 6	No Preference	38	376.17
	Rating Area 6	No Preference	39	381.00
	Rating Area 6	No Preference	40	385.83
	Rating Area 6	No Preference	41	393.07
	Rating Area 6	No Preference	42	400.02
	Rating Area 6	No Preference	43	409.68
	Rating Area 6	No Preference	44	421.75
	Rating Area 6	No Preference	45	435.94
	Rating Area 6	No Preference	46	452.85
	Rating Area 6	No Preference	47	471.87
	Rating Area 6	No Preference	48	493.61
	Rating Area 6	No Preference	49	515.04
	Rating Area 6	No Preference	50	539.19
	Rating Area 6	No Preference	51	563.04
	Rating Area 6	No Preference	52	589.31
	Rating Area 6	No Preference	53	615.88
	Rating Area 6	No Preference	54	644.56
	Rating Area 6	No Preference	55	673.24
	Rating Area 6	No Preference	56	704.33
	Rating Area 6	No Preference	57	735.73
	Rating Area 6	No Preference	58	769.24
	Rating Area 6	No Preference	59	785.85
	Rating Area 6	No Preference	60	819.36
	Rating Area 6	No Preference	61	848.34
	Rating Area 6	No Preference	62	867.36

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 6	No Preference	63	891.21
53789PA0090011	Rating Area 6	No Preference	64	905.69
53789PA0090011	Rating Area 6	No Preference	65 and over	905.69
53789PA0090011	Rating Area 7	No Preference	0-20	193.62
53789PA0090011	Rating Area 7	No Preference	21	304.92
53789PA0090011	Rating Area 7	No Preference	22	304.92
53789PA0090011	Rating Area 7	No Preference	23	304.92
53789PA0090011	Rating Area 7	No Preference	24	304.92
53789PA0090011	Rating Area 7	No Preference	25	306.14
53789PA0090011	Rating Area 7	No Preference	26	312.24
53789PA0090011	Rating Area 7	No Preference	27	319.56
53789PA0090011	Rating Area 7	No Preference	28	331.45
53789PA0090011	Rating Area 7	No Preference	29	341.20
53789PA0090011	Rating Area 7	No Preference	30	346.08
53789PA0090011	Rating Area 7	No Preference	31	353.40
53789PA0090011	Rating Area 7	No Preference	32	360.72
53789PA0090011	Rating Area 7	No Preference	33	365.29
53789PA0090011	Rating Area 7	No Preference	34	370.17
53789PA0090011	Rating Area 7	No Preference	35	372.61
53789PA0090011	Rating Area 7	No Preference	36	375.05
53789PA0090011	Rating Area 7	No Preference	37	377.49
53789PA0090011	Rating Area 7	No Preference	38	379.93
53789PA0090011	Rating Area 7	No Preference	39	384.81
53789PA0090011	Rating Area 7	No Preference	40	389.69
53789PA0090011	Rating Area 7	No Preference	41	397.00
53789PA0090011	Rating Area 7	No Preference	42	404.02
53789PA0090011	Rating Area 7	No Preference	43	413.78
53789PA0090011	Rating Area 7	No Preference	44	425.97
53789PA0090011	Rating Area 7	No Preference	45	440.30
53789PA0090011	Rating Area 7	No Preference	46	457.38
53789PA0090011	Rating Area 7	No Preference	47	476.59
53789PA0090011	Rating Area 7	No Preference	48	498.54
53789PA0090011	Rating Area 7	No Preference	49	520.19
53789PA0090011	Rating Area 7	No Preference	50	544.59
53789PA0090011	Rating Area 7	No Preference	51	568.67
53789PA0090011	Rating Area 7	No Preference	52	595.20
53789PA0090011	Rating Area 7	No Preference	53	622.03
53789PA0090011	Rating Area 7	No Preference	54	651.00
53789PA0090011	Rating Area 7	No Preference	55	679.97
53789PA0090011	Rating Area 7	No Preference	56	711.38
53789PA0090011	Rating Area 7	No Preference	57	743.09
53789PA0090011	Rating Area 7	No Preference	58	776.93

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 7	No Preference	59	793.70
	Rating Area 7	No Preference	60	827.55
	Rating Area 7	No Preference	61	856.82
	Rating Area 7	No Preference	62	876.03
	Rating Area 7	No Preference	63	900.12
	Rating Area 7	No Preference	64	914.75
	Rating Area 7	No Preference	65 and over	914.75
53789PA0090011	Rating Area 9	No Preference	0-20	189.79
53789PA0090011	Rating Area 9	No Preference	21	298.88
	Rating Area 9	No Preference	22	298.88
	Rating Area 9	No Preference	23	298.88
	Rating Area 9	No Preference	24	298.88
	Rating Area 9	No Preference	25	300.08
	Rating Area 9	No Preference	26	306.05
	Rating Area 9	No Preference	27	313.23
	Rating Area 9	No Preference	28	324.88
	Rating Area 9	No Preference	29	334.45
	Rating Area 9	No Preference	30	339.23
	Rating Area 9	No Preference	31	346.40
	Rating Area 9	No Preference	32	353.58
	Rating Area 9	No Preference	33	358.06
	Rating Area 9	No Preference	34	362.84
	Rating Area 9	No Preference	35	365.23
	Rating Area 9	No Preference	36	367.62
	Rating Area 9	No Preference	37	370.01
	Rating Area 9	No Preference	38	372.41
	Rating Area 9	No Preference	39	377.19
	Rating Area 9	No Preference	40	381.97
	Rating Area 9	No Preference	41	389.14
	Rating Area 9	No Preference	42	396.02
	Rating Area 9	No Preference	43	405.58
	Rating Area 9	No Preference	44	417.54
	Rating Area 9	No Preference	45	431.58
	Rating Area 9	No Preference	46	448.32
	Rating Area 9	No Preference	47	467.15
	Rating Area 9	No Preference	48	488.67
	Rating Area 9	No Preference	49	509.89
	Rating Area 9	No Preference	50	533.80
	Rating Area 9	No Preference	51	557.41
	Rating Area 9	No Preference	52	583.42
	Rating Area 9	No Preference	53	609.72
	Rating Area 9	No Preference	54	638.11

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 9	No Preference	55	666.50
	Rating Area 9	No Preference	56	697.29
	Rating Area 9	No Preference	57	728.37
	Rating Area 9	No Preference	58	761.55
	Rating Area 9	No Preference	59	777.99
	Rating Area 9	No Preference	60	811.16
	Rating Area 9	No Preference	61	839.86
	Rating Area 9	No Preference	62	858.69
	Rating Area 9	No Preference	63	882.30
	Rating Area 9	No Preference	64	896.63
	Rating Area 9	No Preference	65 and over	896.63
53789PA0090012	Rating Area 6	No Preference	0-20	195.55
53789PA0090012	Rating Area 6	No Preference	21	307.96
	Rating Area 6	No Preference	22	307.96
	Rating Area 6	No Preference	23	307.96
	Rating Area 6	No Preference	24	307.96
	Rating Area 6	No Preference	25	309.19
	Rating Area 6	No Preference	26	315.35
	Rating Area 6	No Preference	27	322.74
	Rating Area 6	No Preference	28	334.75
	Rating Area 6	No Preference	29	344.61
	Rating Area 6	No Preference	30	349.53
	Rating Area 6	No Preference	31	356.93
	Rating Area 6	No Preference	32	364.32
	Rating Area 6	No Preference	33	368.94
	Rating Area 6	No Preference	34	373.86
	Rating Area 6	No Preference	35	376.33
	Rating Area 6	No Preference	36	378.79
	Rating Area 6	No Preference	37	381.25
	Rating Area 6	No Preference	38	383.72
	Rating Area 6	No Preference	39	388.65
	Rating Area 6	No Preference	40	393.57
	Rating Area 6	No Preference	41	400.96
	Rating Area 6	No Preference	42	408.05
	Rating Area 6	No Preference	43	417.90
	Rating Area 6	No Preference	44	430.22
	Rating Area 6	No Preference	45	444.69
	Rating Area 6	No Preference	46	461.94
	Rating Area 6	No Preference	47	481.34
	Rating Area 6	No Preference	48	503.51
	Rating Area 6	No Preference	49	525.38
	Rating Area 6	No Preference	50	550.02

HIOS Issuer ID*	53789			
	Federal TIN* 23-2399845			
	Rate Effective Date* 4/1/2017			
	Rate Expiration Date* 6/30/2017			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090012	Rating Area 6	No Preference	51	574.35
	Rating Area 6	No Preference	52	601.14
	Rating Area 6	No Preference	53	628.24
	Rating Area 6	No Preference	54	657.49
	Rating Area 6	No Preference	55	686.75
	Rating Area 6	No Preference	56	718.47
	Rating Area 6	No Preference	57	750.50
	Rating Area 6	No Preference	58	784.68
	Rating Area 6	No Preference	59	801.62
	Rating Area 6	No Preference	60	835.80
	Rating Area 6	No Preference	61	865.37
	Rating Area 6	No Preference	62	884.77
	Rating Area 6	No Preference	63	909.10
	Rating Area 6	No Preference	64	923.87
	Rating Area 6	No Preference	65 and over	923.87
53789PA0090012	Rating Area 7	No Preference	0-20	197.51
53789PA0090012	Rating Area 7	No Preference	21	311.04
	Rating Area 7	No Preference	22	311.04
	Rating Area 7	No Preference	23	311.04
	Rating Area 7	No Preference	24	311.04
	Rating Area 7	No Preference	25	312.28
	Rating Area 7	No Preference	26	318.50
	Rating Area 7	No Preference	27	325.97
	Rating Area 7	No Preference	28	338.10
	Rating Area 7	No Preference	29	348.05
	Rating Area 7	No Preference	30	353.03
	Rating Area 7	No Preference	31	360.49
	Rating Area 7	No Preference	32	367.96
	Rating Area 7	No Preference	33	372.63
	Rating Area 7	No Preference	34	377.60
	Rating Area 7	No Preference	35	380.09
	Rating Area 7	No Preference	36	382.58
	Rating Area 7	No Preference	37	385.07
	Rating Area 7	No Preference	38	387.56
	Rating Area 7	No Preference	39	392.53
	Rating Area 7	No Preference	40	397.51
	Rating Area 7	No Preference	41	404.97
	Rating Area 7	No Preference	42	412.13
	Rating Area 7	No Preference	43	422.08
	Rating Area 7	No Preference	44	434.52
	Rating Area 7	No Preference	45	449.14
	Rating Area 7	No Preference	46	466.56

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	4/1/2017		
	Rate Expiration Date*	6/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090012	Rating Area 7	No Preference	47	486.15
	Rating Area 7	No Preference	48	508.55
	Rating Area 7	No Preference	49	530.63
	Rating Area 7	No Preference	50	555.52
	Rating Area 7	No Preference	51	580.09
	Rating Area 7	No Preference	52	607.15
	Rating Area 7	No Preference	53	634.52
	Rating Area 7	No Preference	54	664.07
	Rating Area 7	No Preference	55	693.62
	Rating Area 7	No Preference	56	725.66
	Rating Area 7	No Preference	57	758.00
	Rating Area 7	No Preference	58	792.53
	Rating Area 7	No Preference	59	809.64
	Rating Area 7	No Preference	60	844.16
	Rating Area 7	No Preference	61	874.02
	Rating Area 7	No Preference	62	893.62
	Rating Area 7	No Preference	63	918.19
	Rating Area 7	No Preference	64	933.11
	Rating Area 7	No Preference	65 and over	933.11
53789PA0090012	Rating Area 9	No Preference	0-20	193.60
53789PA0090012	Rating Area 9	No Preference	21	304.88
	Rating Area 9	No Preference	22	304.88
	Rating Area 9	No Preference	23	304.88
	Rating Area 9	No Preference	24	304.88
	Rating Area 9	No Preference	25	306.10
	Rating Area 9	No Preference	26	312.20
	Rating Area 9	No Preference	27	319.51
	Rating Area 9	No Preference	28	331.40
	Rating Area 9	No Preference	29	341.16
	Rating Area 9	No Preference	30	346.04
	Rating Area 9	No Preference	31	353.36
	Rating Area 9	No Preference	32	360.67
	Rating Area 9	No Preference	33	365.25
	Rating Area 9	No Preference	34	370.12
	Rating Area 9	No Preference	35	372.56
	Rating Area 9	No Preference	36	375.00
	Rating Area 9	No Preference	37	377.44
	Rating Area 9	No Preference	38	379.88
	Rating Area 9	No Preference	39	384.76
	Rating Area 9	No Preference	40	389.64
53789PA0090012	Rating Area 9	No Preference	41	396.95
53789PA0090012	Rating Area 9	No Preference	42	403.97

HIOS Issuer ID*		53789			
Federal TIN*		23-2399845			
Rate Effective Date*		4/1/2017			
Rate Expiration Date*		6/30/2017			
Plan ID*		Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID		Required: Select the Rating Area ID	Require: 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
	53789PA0090012	Rating Area 9	No Preference	43	413.72
	53789PA0090012	Rating Area 9	No Preference	44	425.92
	53789PA0090012	Rating Area 9	No Preference	45	440.25
	53789PA0090012	Rating Area 9	No Preference	46	457.32
	53789PA0090012	Rating Area 9	No Preference	47	476.53
	53789PA0090012	Rating Area 9	No Preference	48	498.48
	53789PA0090012	Rating Area 9	No Preference	49	520.13
	53789PA0090012	Rating Area 9	No Preference	50	544.52
	53789PA0090012	Rating Area 9	No Preference	51	568.60
	53789PA0090012	Rating Area 9	No Preference	52	595.13
	53789PA0090012	Rating Area 9	No Preference	53	621.96
	53789PA0090012	Rating Area 9	No Preference	54	650.92
	53789PA0090012	Rating Area 9	No Preference	55	679.88
	53789PA0090012	Rating Area 9	No Preference	56	711.29
	53789PA0090012	Rating Area 9	No Preference	57	742.99
	53789PA0090012	Rating Area 9	No Preference	58	776.84
	53789PA0090012	Rating Area 9	No Preference	59	793.60
	53789PA0090012	Rating Area 9	No Preference	60	827.45
	53789PA0090012	Rating Area 9	No Preference	61	856.71
	53789PA0090012	Rating Area 9	No Preference	62	875.92
	53789PA0090012	Rating Area 9	No Preference	63	900.01
	53789PA0090012	Rating Area 9	No Preference	64	914.63
	53789PA0090012	Rating Area 9	No Preference	65 and over	914.63

2017 Rates Table Template v6.0		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 a community rating state, select Family Option under Age and fill in all columns.		
		If you are not community rating state, select 0-20 under Age and provide an Individual Rate for every age band.		
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.		
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.		
HIOS Issuer ID* Federal TIN* Rate Effective Date* Rate Expiration Date*	53789			
	23-2399845			
	7/1/2017			
	9/30/2017			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 6	No Preference	0-20	158.71
53789PA0090004	Rating Area 6	No Preference	21	249.93
53789PA0090004	Rating Area 6	No Preference	22	249.93
53789PA0090004	Rating Area 6	No Preference	23	249.93
53789PA0090004	Rating Area 6	No Preference	24	249.93
53789PA0090004	Rating Area 6	No Preference	25	250.93
53789PA0090004	Rating Area 6	No Preference	26	255.93
53789PA0090004	Rating Area 6	No Preference	27	261.93
53789PA0090004	Rating Area 6	No Preference	28	271.67
53789PA0090004	Rating Area 6	No Preference	29	279.67
53789PA0090004	Rating Area 6	No Preference	30	283.67
53789PA0090004	Rating Area 6	No Preference	31	289.67
53789PA0090004	Rating Area 6	No Preference	32	295.67
53789PA0090004	Rating Area 6	No Preference	33	299.42
53789PA0090004	Rating Area 6	No Preference	34	303.42
53789PA0090004	Rating Area 6	No Preference	35	305.41
53789PA0090004	Rating Area 6	No Preference	36	307.41
53789PA0090004	Rating Area 6	No Preference	37	309.41
53789PA0090004	Rating Area 6	No Preference	38	311.41
53789PA0090004	Rating Area 6	No Preference	39	315.41
53789PA0090004	Rating Area 6	No Preference	40	319.41
53789PA0090004	Rating Area 6	No Preference	41	325.41
53789PA0090004	Rating Area 6	No Preference	42	331.16
53789PA0090004	Rating Area 6	No Preference	43	339.16
53789PA0090004	Rating Area 6	No Preference	44	349.15
53789PA0090004	Rating Area 6	No Preference	45	360.90
53789PA0090004	Rating Area 6	No Preference	46	374.90
53789PA0090004	Rating Area 6	No Preference	47	390.64
53789PA0090004	Rating Area 6	No Preference	48	408.64
53789PA0090004	Rating Area 6	No Preference	49	426.38
53789PA0090004	Rating Area 6	No Preference	50	446.37
53789PA0090004	Rating Area 6	No Preference	51	466.12
53789PA0090004	Rating Area 6	No Preference	52	487.86
53789PA0090004	Rating Area 6	No Preference	53	509.86
53789PA0090004	Rating Area 6	No Preference	54	533.60
53789PA0090004	Rating Area 6	No Preference	55	557.34
53789PA0090004	Rating Area 6	No Preference	56	583.09

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 6	No Preference	57	609.08
53789PA0090004	Rating Area 6	No Preference	58	636.82
53789PA0090004	Rating Area 6	No Preference	59	650.57
53789PA0090004	Rating Area 6	No Preference	60	678.31
53789PA0090004	Rating Area 6	No Preference	61	702.30
53789PA0090004	Rating Area 6	No Preference	62	718.05
53789PA0090004	Rating Area 6	No Preference	63	737.79
53789PA0090004	Rating Area 6	No Preference	64	749.78
53789PA0090004	Rating Area 6	No Preference	65 and over	749.78
53789PA0090004	Rating Area 7	No Preference	0-20	160.29
53789PA0090004	Rating Area 7	No Preference	21	252.43
53789PA0090004	Rating Area 7	No Preference	22	252.43
53789PA0090004	Rating Area 7	No Preference	23	252.43
53789PA0090004	Rating Area 7	No Preference	24	252.43
53789PA0090004	Rating Area 7	No Preference	25	253.44
53789PA0090004	Rating Area 7	No Preference	26	258.49
53789PA0090004	Rating Area 7	No Preference	27	264.55
53789PA0090004	Rating Area 7	No Preference	28	274.39
53789PA0090004	Rating Area 7	No Preference	29	282.47
53789PA0090004	Rating Area 7	No Preference	30	286.51
53789PA0090004	Rating Area 7	No Preference	31	292.57
53789PA0090004	Rating Area 7	No Preference	32	298.62
53789PA0090004	Rating Area 7	No Preference	33	302.41
53789PA0090004	Rating Area 7	No Preference	34	306.45
53789PA0090004	Rating Area 7	No Preference	35	308.47
53789PA0090004	Rating Area 7	No Preference	36	310.49
53789PA0090004	Rating Area 7	No Preference	37	312.51
53789PA0090004	Rating Area 7	No Preference	38	314.53
53789PA0090004	Rating Area 7	No Preference	39	318.57
53789PA0090004	Rating Area 7	No Preference	40	322.60
53789PA0090004	Rating Area 7	No Preference	41	328.66
53789PA0090004	Rating Area 7	No Preference	42	334.47
53789PA0090004	Rating Area 7	No Preference	43	342.55
53789PA0090004	Rating Area 7	No Preference	44	352.64
53789PA0090004	Rating Area 7	No Preference	45	364.51
53789PA0090004	Rating Area 7	No Preference	46	378.64
53789PA0090004	Rating Area 7	No Preference	47	394.55
53789PA0090004	Rating Area 7	No Preference	48	412.72
53789PA0090004	Rating Area 7	No Preference	49	430.64
53789PA0090004	Rating Area 7	No Preference	50	450.84
53789PA0090004	Rating Area 7	No Preference	51	470.78
53789PA0090004	Rating Area 7	No Preference	52	492.74

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 7	No Preference	53	514.96
	Rating Area 7	No Preference	54	538.94
	Rating Area 7	No Preference	55	562.92
	Rating Area 7	No Preference	56	588.92
	Rating Area 7	No Preference	57	615.17
	Rating Area 7	No Preference	58	643.19
	Rating Area 7	No Preference	59	657.07
	Rating Area 7	No Preference	60	685.09
	Rating Area 7	No Preference	61	709.33
	Rating Area 7	No Preference	62	725.23
	Rating Area 7	No Preference	63	745.17
	Rating Area 7	No Preference	64	757.28
	Rating Area 7	No Preference	65 and over	757.28
	Rating Area 9	No Preference	0-20	157.12
	Rating Area 9	No Preference	21	247.43
53789PA0090004	Rating Area 9	No Preference	22	247.43
	Rating Area 9	No Preference	23	247.43
	Rating Area 9	No Preference	24	247.43
	Rating Area 9	No Preference	25	248.42
	Rating Area 9	No Preference	26	253.37
	Rating Area 9	No Preference	27	259.31
	Rating Area 9	No Preference	28	268.96
	Rating Area 9	No Preference	29	276.87
	Rating Area 9	No Preference	30	280.83
	Rating Area 9	No Preference	31	286.77
	Rating Area 9	No Preference	32	292.71
	Rating Area 9	No Preference	33	296.42
	Rating Area 9	No Preference	34	300.38
	Rating Area 9	No Preference	35	302.36
	Rating Area 9	No Preference	36	304.34
	Rating Area 9	No Preference	37	306.32
	Rating Area 9	No Preference	38	308.30
	Rating Area 9	No Preference	39	312.26
	Rating Area 9	No Preference	40	316.22
	Rating Area 9	No Preference	41	322.15
	Rating Area 9	No Preference	42	327.85
	Rating Area 9	No Preference	43	335.76
	Rating Area 9	No Preference	44	345.66
	Rating Area 9	No Preference	45	357.29
	Rating Area 9	No Preference	46	371.15
	Rating Area 9	No Preference	47	386.73
	Rating Area 9	No Preference	48	404.55

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 9	No Preference	49	422.12
	Rating Area 9	No Preference	50	441.91
	Rating Area 9	No Preference	51	461.46
	Rating Area 9	No Preference	52	482.98
	Rating Area 9	No Preference	53	504.76
	Rating Area 9	No Preference	54	528.26
	Rating Area 9	No Preference	55	551.77
	Rating Area 9	No Preference	56	577.26
	Rating Area 9	No Preference	57	602.99
	Rating Area 9	No Preference	58	630.45
	Rating Area 9	No Preference	59	644.06
	Rating Area 9	No Preference	60	671.53
	Rating Area 9	No Preference	61	695.28
	Rating Area 9	No Preference	62	710.87
	Rating Area 9	No Preference	63	730.42
	Rating Area 9	No Preference	64	742.28
	Rating Area 9	No Preference	65 and over	742.28
53789PA0090007	Rating Area 6	No Preference	0-20	220.69
53789PA0090007	Rating Area 6	No Preference	21	347.54
	Rating Area 6	No Preference	22	347.54
	Rating Area 6	No Preference	23	347.54
	Rating Area 6	No Preference	24	347.54
	Rating Area 6	No Preference	25	348.93
	Rating Area 6	No Preference	26	355.88
	Rating Area 6	No Preference	27	364.22
	Rating Area 6	No Preference	28	377.78
	Rating Area 6	No Preference	29	388.90
	Rating Area 6	No Preference	30	394.46
	Rating Area 6	No Preference	31	402.80
	Rating Area 6	No Preference	32	411.14
	Rating Area 6	No Preference	33	416.35
	Rating Area 6	No Preference	34	421.91
	Rating Area 6	No Preference	35	424.69
	Rating Area 6	No Preference	36	427.47
	Rating Area 6	No Preference	37	430.25
	Rating Area 6	No Preference	38	433.03
	Rating Area 6	No Preference	39	438.60
	Rating Area 6	No Preference	40	444.16
	Rating Area 6	No Preference	41	452.50
	Rating Area 6	No Preference	42	460.49
	Rating Area 6	No Preference	43	471.61
	Rating Area 6	No Preference	44	485.51

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 6	No Preference	45	501.85
	Rating Area 6	No Preference	46	521.31
	Rating Area 6	No Preference	47	543.21
	Rating Area 6	No Preference	48	568.23
	Rating Area 6	No Preference	49	592.90
	Rating Area 6	No Preference	50	620.71
	Rating Area 6	No Preference	51	648.16
	Rating Area 6	No Preference	52	678.40
	Rating Area 6	No Preference	53	708.98
	Rating Area 6	No Preference	54	742.00
	Rating Area 6	No Preference	55	775.01
	Rating Area 6	No Preference	56	810.81
	Rating Area 6	No Preference	57	846.95
	Rating Area 6	No Preference	58	885.53
	Rating Area 6	No Preference	59	904.65
	Rating Area 6	No Preference	60	943.22
	Rating Area 6	No Preference	61	976.59
	Rating Area 6	No Preference	62	998.48
	Rating Area 6	No Preference	63	1025.94
	Rating Area 6	No Preference	64	1042.61
	Rating Area 6	No Preference	65 and over	1042.61
53789PA0090007	Rating Area 7	No Preference	0-20	222.89
53789PA0090007	Rating Area 7	No Preference	21	351.02
	Rating Area 7	No Preference	22	351.02
	Rating Area 7	No Preference	23	351.02
	Rating Area 7	No Preference	24	351.02
	Rating Area 7	No Preference	25	352.42
	Rating Area 7	No Preference	26	359.44
	Rating Area 7	No Preference	27	367.86
	Rating Area 7	No Preference	28	381.55
	Rating Area 7	No Preference	29	392.79
	Rating Area 7	No Preference	30	398.40
	Rating Area 7	No Preference	31	406.83
	Rating Area 7	No Preference	32	415.25
	Rating Area 7	No Preference	33	420.52
	Rating Area 7	No Preference	34	426.13
	Rating Area 7	No Preference	35	428.94
	Rating Area 7	No Preference	36	431.75
	Rating Area 7	No Preference	37	434.56
	Rating Area 7	No Preference	38	437.37
	Rating Area 7	No Preference	39	442.98
	Rating Area 7	No Preference	40	448.60

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 7	No Preference	41	457.02
	Rating Area 7	No Preference	42	465.10
	Rating Area 7	No Preference	43	476.33
	Rating Area 7	No Preference	44	490.37
	Rating Area 7	No Preference	45	506.87
	Rating Area 7	No Preference	46	526.52
	Rating Area 7	No Preference	47	548.64
	Rating Area 7	No Preference	48	573.91
	Rating Area 7	No Preference	49	598.83
	Rating Area 7	No Preference	50	626.91
	Rating Area 7	No Preference	51	654.64
	Rating Area 7	No Preference	52	685.18
	Rating Area 7	No Preference	53	716.07
	Rating Area 7	No Preference	54	749.42
	Rating Area 7	No Preference	55	782.76
	Rating Area 7	No Preference	56	818.92
	Rating Area 7	No Preference	57	855.42
	Rating Area 7	No Preference	58	894.39
	Rating Area 7	No Preference	59	913.69
	Rating Area 7	No Preference	60	952.66
	Rating Area 7	No Preference	61	986.35
	Rating Area 7	No Preference	62	1008.47
	Rating Area 7	No Preference	63	1036.20
	Rating Area 7	No Preference	64	1053.05
	Rating Area 7	No Preference	65 and over	1053.05
53789PA0090007	Rating Area 9	No Preference	0-20	218.48
53789PA0090007	Rating Area 9	No Preference	21	344.06
	Rating Area 9	No Preference	22	344.06
	Rating Area 9	No Preference	23	344.06
	Rating Area 9	No Preference	24	344.06
	Rating Area 9	No Preference	25	345.44
	Rating Area 9	No Preference	26	352.32
	Rating Area 9	No Preference	27	360.58
	Rating Area 9	No Preference	28	374.00
	Rating Area 9	No Preference	29	385.01
	Rating Area 9	No Preference	30	390.51
	Rating Area 9	No Preference	31	398.77
	Rating Area 9	No Preference	32	407.03
	Rating Area 9	No Preference	33	412.19
	Rating Area 9	No Preference	34	417.69
	Rating Area 9	No Preference	35	420.45
	Rating Area 9	No Preference	36	423.20

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 9	No Preference	37	425.95
	Rating Area 9	No Preference	38	428.70
	Rating Area 9	No Preference	39	434.21
	Rating Area 9	No Preference	40	439.71
	Rating Area 9	No Preference	41	447.97
	Rating Area 9	No Preference	42	455.89
	Rating Area 9	No Preference	43	466.90
	Rating Area 9	No Preference	44	480.66
	Rating Area 9	No Preference	45	496.83
	Rating Area 9	No Preference	46	516.10
	Rating Area 9	No Preference	47	537.77
	Rating Area 9	No Preference	48	562.55
	Rating Area 9	No Preference	49	586.97
	Rating Area 9	No Preference	50	614.50
	Rating Area 9	No Preference	51	641.68
	Rating Area 9	No Preference	52	671.61
	Rating Area 9	No Preference	53	701.89
	Rating Area 9	No Preference	54	734.58
	Rating Area 9	No Preference	55	767.26
	Rating Area 9	No Preference	56	802.70
	Rating Area 9	No Preference	57	838.49
	Rating Area 9	No Preference	58	876.68
	Rating Area 9	No Preference	59	895.60
	Rating Area 9	No Preference	60	933.79
	Rating Area 9	No Preference	61	966.82
	Rating Area 9	No Preference	62	988.50
	Rating Area 9	No Preference	63	1015.68
	Rating Area 9	No Preference	64	1032.18
	Rating Area 9	No Preference	65 and over	1032.18
53789PA0090008	Rating Area 6	No Preference	0-20	224.61
53789PA0090008	Rating Area 6	No Preference	21	353.72
	Rating Area 6	No Preference	22	353.72
	Rating Area 6	No Preference	23	353.72
	Rating Area 6	No Preference	24	353.72
	Rating Area 6	No Preference	25	355.13
	Rating Area 6	No Preference	26	362.21
	Rating Area 6	No Preference	27	370.70
	Rating Area 6	No Preference	28	384.49
	Rating Area 6	No Preference	29	395.81
	Rating Area 6	No Preference	30	401.47
	Rating Area 6	No Preference	31	409.96
	Rating Area 6	No Preference	32	418.45

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 6	No Preference	33	423.76
	Rating Area 6	No Preference	34	429.42
	Rating Area 6	No Preference	35	432.25
	Rating Area 6	No Preference	36	435.08
	Rating Area 6	No Preference	37	437.91
	Rating Area 6	No Preference	38	440.74
	Rating Area 6	No Preference	39	446.39
	Rating Area 6	No Preference	40	452.05
	Rating Area 6	No Preference	41	460.54
	Rating Area 6	No Preference	42	468.68
	Rating Area 6	No Preference	43	480.00
	Rating Area 6	No Preference	44	494.15
	Rating Area 6	No Preference	45	510.77
	Rating Area 6	No Preference	46	530.58
	Rating Area 6	No Preference	47	552.86
	Rating Area 6	No Preference	48	578.33
	Rating Area 6	No Preference	49	603.45
	Rating Area 6	No Preference	50	631.74
	Rating Area 6	No Preference	51	659.69
	Rating Area 6	No Preference	52	690.46
	Rating Area 6	No Preference	53	721.59
	Rating Area 6	No Preference	54	755.19
	Rating Area 6	No Preference	55	788.80
	Rating Area 6	No Preference	56	825.23
	Rating Area 6	No Preference	57	862.02
	Rating Area 6	No Preference	58	901.28
	Rating Area 6	No Preference	59	920.73
	Rating Area 6	No Preference	60	960.00
	Rating Area 6	No Preference	61	993.95
	Rating Area 6	No Preference	62	1016.24
	Rating Area 6	No Preference	63	1044.18
	Rating Area 6	No Preference	64	1061.15
	Rating Area 6	No Preference	65 and over	1061.15
53789PA0090008	Rating Area 7	No Preference	0-20	226.86
53789PA0090008	Rating Area 7	No Preference	21	357.26
	Rating Area 7	No Preference	22	357.26
	Rating Area 7	No Preference	23	357.26
	Rating Area 7	No Preference	24	357.26
	Rating Area 7	No Preference	25	358.69
	Rating Area 7	No Preference	26	365.83
	Rating Area 7	No Preference	27	374.41
	Rating Area 7	No Preference	28	388.34

HIOS Issuer ID*	53789			
Federal TIN*	23-2399845			
Rate Effective Date*	7/1/2017			
Rate Expiration Date*	9/30/2017			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 7	No Preference	29	399.77
53789PA0090008	Rating Area 7	No Preference	30	405.49
53789PA0090008	Rating Area 7	No Preference	31	414.06
53789PA0090008	Rating Area 7	No Preference	32	422.64
53789PA0090008	Rating Area 7	No Preference	33	427.99
53789PA0090008	Rating Area 7	No Preference	34	433.71
53789PA0090008	Rating Area 7	No Preference	35	436.57
53789PA0090008	Rating Area 7	No Preference	36	439.43
53789PA0090008	Rating Area 7	No Preference	37	442.28
53789PA0090008	Rating Area 7	No Preference	38	445.14
53789PA0090008	Rating Area 7	No Preference	39	450.86
53789PA0090008	Rating Area 7	No Preference	40	456.57
53789PA0090008	Rating Area 7	No Preference	41	465.15
53789PA0090008	Rating Area 7	No Preference	42	473.37
53789PA0090008	Rating Area 7	No Preference	43	484.80
53789PA0090008	Rating Area 7	No Preference	44	499.09
53789PA0090008	Rating Area 7	No Preference	45	515.88
53789PA0090008	Rating Area 7	No Preference	46	535.89
53789PA0090008	Rating Area 7	No Preference	47	558.39
53789PA0090008	Rating Area 7	No Preference	48	584.12
53789PA0090008	Rating Area 7	No Preference	49	609.48
53789PA0090008	Rating Area 7	No Preference	50	638.06
53789PA0090008	Rating Area 7	No Preference	51	666.28
53789PA0090008	Rating Area 7	No Preference	52	697.37
53789PA0090008	Rating Area 7	No Preference	53	728.80
53789PA0090008	Rating Area 7	No Preference	54	762.74
53789PA0090008	Rating Area 7	No Preference	55	796.68
53789PA0090008	Rating Area 7	No Preference	56	833.48
53789PA0090008	Rating Area 7	No Preference	57	870.64
53789PA0090008	Rating Area 7	No Preference	58	910.29
53789PA0090008	Rating Area 7	No Preference	59	929.94
53789PA0090008	Rating Area 7	No Preference	60	969.60
53789PA0090008	Rating Area 7	No Preference	61	1003.89
53789PA0090008	Rating Area 7	No Preference	62	1026.40
53789PA0090008	Rating Area 7	No Preference	63	1054.62
53789PA0090008	Rating Area 7	No Preference	64	1071.77
53789PA0090008	Rating Area 7	No Preference	65 and over	1071.77
53789PA0090008	Rating Area 9	No Preference	0-20	222.37
53789PA0090008	Rating Area 9	No Preference	21	350.18
53789PA0090008	Rating Area 9	No Preference	22	350.18
53789PA0090008	Rating Area 9	No Preference	23	350.18
53789PA0090008	Rating Area 9	No Preference	24	350.18

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 9	No Preference	25	351.58
	Rating Area 9	No Preference	26	358.59
	Rating Area 9	No Preference	27	366.99
	Rating Area 9	No Preference	28	380.65
	Rating Area 9	No Preference	29	391.85
	Rating Area 9	No Preference	30	397.46
	Rating Area 9	No Preference	31	405.86
	Rating Area 9	No Preference	32	414.27
	Rating Area 9	No Preference	33	419.52
	Rating Area 9	No Preference	34	425.12
	Rating Area 9	No Preference	35	427.92
	Rating Area 9	No Preference	36	430.72
	Rating Area 9	No Preference	37	433.53
	Rating Area 9	No Preference	38	436.33
	Rating Area 9	No Preference	39	441.93
	Rating Area 9	No Preference	40	447.53
	Rating Area 9	No Preference	41	455.94
	Rating Area 9	No Preference	42	463.99
	Rating Area 9	No Preference	43	475.20
	Rating Area 9	No Preference	44	489.21
	Rating Area 9	No Preference	45	505.66
	Rating Area 9	No Preference	46	525.27
	Rating Area 9	No Preference	47	547.34
	Rating Area 9	No Preference	48	572.55
	Rating Area 9	No Preference	49	597.41
	Rating Area 9	No Preference	50	625.43
	Rating Area 9	No Preference	51	653.09
	Rating Area 9	No Preference	52	683.56
	Rating Area 9	No Preference	53	714.37
	Rating Area 9	No Preference	54	747.64
	Rating Area 9	No Preference	55	780.91
	Rating Area 9	No Preference	56	816.98
	Rating Area 9	No Preference	57	853.40
	Rating Area 9	No Preference	58	892.27
	Rating Area 9	No Preference	59	911.53
	Rating Area 9	No Preference	60	950.40
	Rating Area 9	No Preference	61	984.01
	Rating Area 9	No Preference	62	1006.08
	Rating Area 9	No Preference	63	1033.74
	Rating Area 9	No Preference	64	1050.54
	Rating Area 9	No Preference	65 and over	1050.54
53789PA0090011	Rating Area 6	No Preference	0-20	195.39

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 6	No Preference	21	307.70
	Rating Area 6	No Preference	22	307.70
	Rating Area 6	No Preference	23	307.70
	Rating Area 6	No Preference	24	307.70
	Rating Area 6	No Preference	25	308.93
	Rating Area 6	No Preference	26	315.08
	Rating Area 6	No Preference	27	322.47
	Rating Area 6	No Preference	28	334.47
	Rating Area 6	No Preference	29	344.32
	Rating Area 6	No Preference	30	349.24
	Rating Area 6	No Preference	31	356.62
	Rating Area 6	No Preference	32	364.01
	Rating Area 6	No Preference	33	368.62
	Rating Area 6	No Preference	34	373.55
	Rating Area 6	No Preference	35	376.01
	Rating Area 6	No Preference	36	378.47
	Rating Area 6	No Preference	37	380.93
	Rating Area 6	No Preference	38	383.39
	Rating Area 6	No Preference	39	388.32
	Rating Area 6	No Preference	40	393.24
	Rating Area 6	No Preference	41	400.63
	Rating Area 6	No Preference	42	407.70
	Rating Area 6	No Preference	43	417.55
	Rating Area 6	No Preference	44	429.86
	Rating Area 6	No Preference	45	444.32
	Rating Area 6	No Preference	46	461.55
	Rating Area 6	No Preference	47	480.94
	Rating Area 6	No Preference	48	503.09
	Rating Area 6	No Preference	49	524.94
	Rating Area 6	No Preference	50	549.55
	Rating Area 6	No Preference	51	573.86
	Rating Area 6	No Preference	52	600.63
	Rating Area 6	No Preference	53	627.71
	Rating Area 6	No Preference	54	656.94
	Rating Area 6	No Preference	55	686.17
	Rating Area 6	No Preference	56	717.86
	Rating Area 6	No Preference	57	749.86
	Rating Area 6	No Preference	58	784.02
	Rating Area 6	No Preference	59	800.94
	Rating Area 6	No Preference	60	835.10
	Rating Area 6	No Preference	61	864.64
	Rating Area 6	No Preference	62	884.02

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 6	No Preference	63	908.33
	Rating Area 6	No Preference	64	923.09
	Rating Area 6	No Preference	65 and over	923.09
53789PA0090011	Rating Area 7	No Preference	0-20	197.34
53789PA0090011	Rating Area 7	No Preference	21	310.78
	Rating Area 7	No Preference	22	310.78
	Rating Area 7	No Preference	23	310.78
	Rating Area 7	No Preference	24	310.78
	Rating Area 7	No Preference	25	312.02
	Rating Area 7	No Preference	26	318.24
	Rating Area 7	No Preference	27	325.69
	Rating Area 7	No Preference	28	337.81
	Rating Area 7	No Preference	29	347.76
	Rating Area 7	No Preference	30	352.73
	Rating Area 7	No Preference	31	360.19
	Rating Area 7	No Preference	32	367.65
	Rating Area 7	No Preference	33	372.31
	Rating Area 7	No Preference	34	377.28
	Rating Area 7	No Preference	35	379.77
	Rating Area 7	No Preference	36	382.26
	Rating Area 7	No Preference	37	384.74
	Rating Area 7	No Preference	38	387.23
	Rating Area 7	No Preference	39	392.20
	Rating Area 7	No Preference	40	397.17
	Rating Area 7	No Preference	41	404.63
	Rating Area 7	No Preference	42	411.78
	Rating Area 7	No Preference	43	421.72
	Rating Area 7	No Preference	44	434.16
	Rating Area 7	No Preference	45	448.76
	Rating Area 7	No Preference	46	466.17
	Rating Area 7	No Preference	47	485.74
	Rating Area 7	No Preference	48	508.12
	Rating Area 7	No Preference	49	530.19
	Rating Area 7	No Preference	50	555.05
	Rating Area 7	No Preference	51	579.60
	Rating Area 7	No Preference	52	606.64
	Rating Area 7	No Preference	53	633.99
	Rating Area 7	No Preference	54	663.51
	Rating Area 7	No Preference	55	693.03
	Rating Area 7	No Preference	56	725.04
	Rating Area 7	No Preference	57	757.36
	Rating Area 7	No Preference	58	791.86

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 7	No Preference	59	808.95
	Rating Area 7	No Preference	60	843.45
	Rating Area 7	No Preference	61	873.28
	Rating Area 7	No Preference	62	892.86
	Rating Area 7	No Preference	63	917.41
	Rating Area 7	No Preference	64	932.33
	Rating Area 7	No Preference	65 and over	932.33
53789PA0090011	Rating Area 9	No Preference	0-20	193.44
53789PA0090011	Rating Area 9	No Preference	21	304.62
	Rating Area 9	No Preference	22	304.62
	Rating Area 9	No Preference	23	304.62
	Rating Area 9	No Preference	24	304.62
	Rating Area 9	No Preference	25	305.84
	Rating Area 9	No Preference	26	311.93
	Rating Area 9	No Preference	27	319.24
	Rating Area 9	No Preference	28	331.13
	Rating Area 9	No Preference	29	340.87
	Rating Area 9	No Preference	30	345.75
	Rating Area 9	No Preference	31	353.06
	Rating Area 9	No Preference	32	360.37
	Rating Area 9	No Preference	33	364.94
	Rating Area 9	No Preference	34	369.81
	Rating Area 9	No Preference	35	372.25
	Rating Area 9	No Preference	36	374.69
	Rating Area 9	No Preference	37	377.12
	Rating Area 9	No Preference	38	379.56
	Rating Area 9	No Preference	39	384.43
	Rating Area 9	No Preference	40	389.31
	Rating Area 9	No Preference	41	396.62
	Rating Area 9	No Preference	42	403.63
	Rating Area 9	No Preference	43	413.37
	Rating Area 9	No Preference	44	425.56
	Rating Area 9	No Preference	45	439.88
	Rating Area 9	No Preference	46	456.93
	Rating Area 9	No Preference	47	476.13
	Rating Area 9	No Preference	48	498.06
	Rating Area 9	No Preference	49	519.69
	Rating Area 9	No Preference	50	544.06
	Rating Area 9	No Preference	51	568.12
	Rating Area 9	No Preference	52	594.62
	Rating Area 9	No Preference	53	621.43
	Rating Area 9	No Preference	54	650.37

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 9	No Preference	55	679.31
	Rating Area 9	No Preference	56	710.69
	Rating Area 9	No Preference	57	742.37
	Rating Area 9	No Preference	58	776.18
	Rating Area 9	No Preference	59	792.93
	Rating Area 9	No Preference	60	826.75
	Rating Area 9	No Preference	61	855.99
	Rating Area 9	No Preference	62	875.18
	Rating Area 9	No Preference	63	899.25
	Rating Area 9	No Preference	64	913.86
	Rating Area 9	No Preference	65 and over	913.86
53789PA0090012	Rating Area 6	No Preference	0-20	199.31
53789PA0090012	Rating Area 6	No Preference	21	313.88
	Rating Area 6	No Preference	22	313.88
	Rating Area 6	No Preference	23	313.88
	Rating Area 6	No Preference	24	313.88
	Rating Area 6	No Preference	25	315.14
	Rating Area 6	No Preference	26	321.41
	Rating Area 6	No Preference	27	328.95
	Rating Area 6	No Preference	28	341.19
	Rating Area 6	No Preference	29	351.23
	Rating Area 6	No Preference	30	356.25
	Rating Area 6	No Preference	31	363.79
	Rating Area 6	No Preference	32	371.32
	Rating Area 6	No Preference	33	376.03
	Rating Area 6	No Preference	34	381.05
	Rating Area 6	No Preference	35	383.56
	Rating Area 6	No Preference	36	386.07
	Rating Area 6	No Preference	37	388.58
	Rating Area 6	No Preference	38	391.09
	Rating Area 6	No Preference	39	396.12
	Rating Area 6	No Preference	40	401.14
	Rating Area 6	No Preference	41	408.67
	Rating Area 6	No Preference	42	415.89
	Rating Area 6	No Preference	43	425.94
	Rating Area 6	No Preference	44	438.49
	Rating Area 6	No Preference	45	453.24
	Rating Area 6	No Preference	46	470.82
	Rating Area 6	No Preference	47	490.59
	Rating Area 6	No Preference	48	513.19
	Rating Area 6	No Preference	49	535.48
	Rating Area 6	No Preference	50	560.59

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090012	Rating Area 6	No Preference	51	585.39
	Rating Area 6	No Preference	52	612.69
	Rating Area 6	No Preference	53	640.32
	Rating Area 6	No Preference	54	670.13
	Rating Area 6	No Preference	55	699.95
	Rating Area 6	No Preference	56	732.28
	Rating Area 6	No Preference	57	764.93
	Rating Area 6	No Preference	58	799.77
	Rating Area 6	No Preference	59	817.03
	Rating Area 6	No Preference	60	851.87
	Rating Area 6	No Preference	61	882.00
	Rating Area 6	No Preference	62	901.78
	Rating Area 6	No Preference	63	926.57
	Rating Area 6	No Preference	64	941.63
	Rating Area 6	No Preference	65 and over	941.63
53789PA0090012	Rating Area 7	No Preference	0-20	201.31
53789PA0090012	Rating Area 7	No Preference	21	317.02
	Rating Area 7	No Preference	22	317.02
	Rating Area 7	No Preference	23	317.02
	Rating Area 7	No Preference	24	317.02
	Rating Area 7	No Preference	25	318.29
	Rating Area 7	No Preference	26	324.63
	Rating Area 7	No Preference	27	332.24
	Rating Area 7	No Preference	28	344.60
	Rating Area 7	No Preference	29	354.74
	Rating Area 7	No Preference	30	359.82
	Rating Area 7	No Preference	31	367.42
	Rating Area 7	No Preference	32	375.03
	Rating Area 7	No Preference	33	379.79
	Rating Area 7	No Preference	34	384.86
	Rating Area 7	No Preference	35	387.40
	Rating Area 7	No Preference	36	389.93
	Rating Area 7	No Preference	37	392.47
	Rating Area 7	No Preference	38	395.01
	Rating Area 7	No Preference	39	400.08
	Rating Area 7	No Preference	40	405.15
	Rating Area 7	No Preference	41	412.76
	Rating Area 7	No Preference	42	420.05
	Rating Area 7	No Preference	43	430.19
	Rating Area 7	No Preference	44	442.88
	Rating Area 7	No Preference	45	457.78
	Rating Area 7	No Preference	46	475.53

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	7/1/2017		
	Rate Expiration Date*	9/30/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090012	Rating Area 7	No Preference	47	495.50
	Rating Area 7	No Preference	48	518.33
	Rating Area 7	No Preference	49	540.83
	Rating Area 7	No Preference	50	566.20
	Rating Area 7	No Preference	51	591.24
	Rating Area 7	No Preference	52	618.82
	Rating Area 7	No Preference	53	646.72
	Rating Area 7	No Preference	54	676.84
	Rating Area 7	No Preference	55	706.95
	Rating Area 7	No Preference	56	739.60
	Rating Area 7	No Preference	57	772.57
	Rating Area 7	No Preference	58	807.76
	Rating Area 7	No Preference	59	825.20
	Rating Area 7	No Preference	60	860.39
	Rating Area 7	No Preference	61	890.82
	Rating Area 7	No Preference	62	910.80
	Rating Area 7	No Preference	63	935.84
	Rating Area 7	No Preference	64	951.05
	Rating Area 7	No Preference	65 and over	951.05
53789PA0090012	Rating Area 9	No Preference	0-20	197.32
53789PA0090012	Rating Area 9	No Preference	21	310.74
	Rating Area 9	No Preference	22	310.74
	Rating Area 9	No Preference	23	310.74
	Rating Area 9	No Preference	24	310.74
	Rating Area 9	No Preference	25	311.98
	Rating Area 9	No Preference	26	318.20
	Rating Area 9	No Preference	27	325.66
	Rating Area 9	No Preference	28	337.78
	Rating Area 9	No Preference	29	347.72
	Rating Area 9	No Preference	30	352.69
	Rating Area 9	No Preference	31	360.15
	Rating Area 9	No Preference	32	367.61
	Rating Area 9	No Preference	33	372.27
	Rating Area 9	No Preference	34	377.24
	Rating Area 9	No Preference	35	379.73
	Rating Area 9	No Preference	36	382.21
	Rating Area 9	No Preference	37	384.70
	Rating Area 9	No Preference	38	387.18
	Rating Area 9	No Preference	39	392.16
	Rating Area 9	No Preference	40	397.13
53789PA0090012	Rating Area 9	No Preference	41	404.59
53789PA0090012	Rating Area 9	No Preference	42	411.73

HIOS Issuer ID*		53789			
Federal TIN*		23-2399845			
Rate Effective Date*		7/1/2017			
Rate Expiration Date*		9/30/2017			
Plan ID*		Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID		Required: Select the Rating Area ID	Require: 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
	53789PA0090012	Rating Area 9	No Preference	43	421.68
	53789PA0090012	Rating Area 9	No Preference	44	434.11
	53789PA0090012	Rating Area 9	No Preference	45	448.71
	53789PA0090012	Rating Area 9	No Preference	46	466.11
	53789PA0090012	Rating Area 9	No Preference	47	485.69
	53789PA0090012	Rating Area 9	No Preference	48	508.06
	53789PA0090012	Rating Area 9	No Preference	49	530.12
	53789PA0090012	Rating Area 9	No Preference	50	554.98
	53789PA0090012	Rating Area 9	No Preference	51	579.53
	53789PA0090012	Rating Area 9	No Preference	52	606.57
	53789PA0090012	Rating Area 9	No Preference	53	633.91
	53789PA0090012	Rating Area 9	No Preference	54	663.43
	53789PA0090012	Rating Area 9	No Preference	55	692.95
	53789PA0090012	Rating Area 9	No Preference	56	724.96
	53789PA0090012	Rating Area 9	No Preference	57	757.28
	53789PA0090012	Rating Area 9	No Preference	58	791.77
	53789PA0090012	Rating Area 9	No Preference	59	808.86
	53789PA0090012	Rating Area 9	No Preference	60	843.35
	53789PA0090012	Rating Area 9	No Preference	61	873.18
	53789PA0090012	Rating Area 9	No Preference	62	892.76
	53789PA0090012	Rating Area 9	No Preference	63	917.31
	53789PA0090012	Rating Area 9	No Preference	64	932.21
	53789PA0090012	Rating Area 9	No Preference	65 and over	932.21

2017 Rates Table Template v6.0	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 a community rating state, select Family Option under Age and fill in all columns.			
	If you are not community rating state, select 0-20 under Age and provide an Individual Rate for every age band.			
	If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
	To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID* Federal TIN* Rate Effective Date* Rate Expiration Date*	53789			
	23-2399845			
	10/1/2017			
	12/31/2017			
<div><div>Plan ID*</div><div>Required: Enter the 14-character Plan ID</div></div> <div><div>Rating Area ID*</div><div>Required: Select the Rating Area ID</div></div> <div><div>Tobacco*</div><div>Require: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan</div></div> <div><div>Age*</div><div>Required: Select the age of a subscriber eligible for the rate</div></div> <div><div>Individual Rate*</div><div>Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan</div></div>				
53789PA0090004	Rating Area 6	No Preference	0-20	161.75
53789PA0090004	Rating Area 6	No Preference	21	254.73
53789PA0090004	Rating Area 6	No Preference	22	254.73
53789PA0090004	Rating Area 6	No Preference	23	254.73
53789PA0090004	Rating Area 6	No Preference	24	254.73
53789PA0090004	Rating Area 6	No Preference	25	255.75
53789PA0090004	Rating Area 6	No Preference	26	260.84
53789PA0090004	Rating Area 6	No Preference	27	266.96
53789PA0090004	Rating Area 6	No Preference	28	276.89
53789PA0090004	Rating Area 6	No Preference	29	285.04
53789PA0090004	Rating Area 6	No Preference	30	289.12
53789PA0090004	Rating Area 6	No Preference	31	295.23
53789PA0090004	Rating Area 6	No Preference	32	301.35
53789PA0090004	Rating Area 6	No Preference	33	305.17
53789PA0090004	Rating Area 6	No Preference	34	309.24
53789PA0090004	Rating Area 6	No Preference	35	311.28
53789PA0090004	Rating Area 6	No Preference	36	313.32
53789PA0090004	Rating Area 6	No Preference	37	315.36
53789PA0090004	Rating Area 6	No Preference	38	317.39
53789PA0090004	Rating Area 6	No Preference	39	321.47
53789PA0090004	Rating Area 6	No Preference	40	325.54
53789PA0090004	Rating Area 6	No Preference	41	331.66
53789PA0090004	Rating Area 6	No Preference	42	337.52
53789PA0090004	Rating Area 6	No Preference	43	345.67
53789PA0090004	Rating Area 6	No Preference	44	355.86
53789PA0090004	Rating Area 6	No Preference	45	367.83
53789PA0090004	Rating Area 6	No Preference	46	382.10
53789PA0090004	Rating Area 6	No Preference	47	398.14
53789PA0090004	Rating Area 6	No Preference	48	416.48
53789PA0090004	Rating Area 6	No Preference	49	434.57
53789PA0090004	Rating Area 6	No Preference	50	454.95
53789PA0090004	Rating Area 6	No Preference	51	475.07
53789PA0090004	Rating Area 6	No Preference	52	497.23
53789PA0090004	Rating Area 6	No Preference	53	519.65
53789PA0090004	Rating Area 6	No Preference	54	543.85
53789PA0090004	Rating Area 6	No Preference	55	568.05
53789PA0090004	Rating Area 6	No Preference	56	594.29

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	10/1/2017		
	Rate Expiration Date*	12/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 6	No Preference	57	620.78
53789PA0090004	Rating Area 6	No Preference	58	649.05
53789PA0090004	Rating Area 6	No Preference	59	663.06
53789PA0090004	Rating Area 6	No Preference	60	691.34
53789PA0090004	Rating Area 6	No Preference	61	715.79
53789PA0090004	Rating Area 6	No Preference	62	731.84
53789PA0090004	Rating Area 6	No Preference	63	751.96
53789PA0090004	Rating Area 6	No Preference	64	764.18
53789PA0090004	Rating Area 6	No Preference	65 and over	764.18
53789PA0090004	Rating Area 7	No Preference	0-20	163.37
53789PA0090004	Rating Area 7	No Preference	21	257.28
53789PA0090004	Rating Area 7	No Preference	22	257.28
53789PA0090004	Rating Area 7	No Preference	23	257.28
53789PA0090004	Rating Area 7	No Preference	24	257.28
53789PA0090004	Rating Area 7	No Preference	25	258.31
53789PA0090004	Rating Area 7	No Preference	26	263.45
53789PA0090004	Rating Area 7	No Preference	27	269.63
53789PA0090004	Rating Area 7	No Preference	28	279.66
53789PA0090004	Rating Area 7	No Preference	29	287.89
53789PA0090004	Rating Area 7	No Preference	30	292.01
53789PA0090004	Rating Area 7	No Preference	31	298.18
53789PA0090004	Rating Area 7	No Preference	32	304.36
53789PA0090004	Rating Area 7	No Preference	33	308.22
53789PA0090004	Rating Area 7	No Preference	34	312.33
53789PA0090004	Rating Area 7	No Preference	35	314.39
53789PA0090004	Rating Area 7	No Preference	36	316.45
53789PA0090004	Rating Area 7	No Preference	37	318.51
53789PA0090004	Rating Area 7	No Preference	38	320.57
53789PA0090004	Rating Area 7	No Preference	39	324.68
53789PA0090004	Rating Area 7	No Preference	40	328.80
53789PA0090004	Rating Area 7	No Preference	41	334.98
53789PA0090004	Rating Area 7	No Preference	42	340.89
53789PA0090004	Rating Area 7	No Preference	43	349.13
53789PA0090004	Rating Area 7	No Preference	44	359.42
53789PA0090004	Rating Area 7	No Preference	45	371.51
53789PA0090004	Rating Area 7	No Preference	46	385.92
53789PA0090004	Rating Area 7	No Preference	47	402.12
53789PA0090004	Rating Area 7	No Preference	48	420.65
53789PA0090004	Rating Area 7	No Preference	49	438.92
53789PA0090004	Rating Area 7	No Preference	50	459.50
53789PA0090004	Rating Area 7	No Preference	51	479.82
53789PA0090004	Rating Area 7	No Preference	52	502.21

HIOS Issuer ID*	53789			
	Federal TIN* 23-2399845			
	Rate Effective Date* 10/1/2017			
	Rate Expiration Date* 12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*				
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 7	No Preference	53	524.85
	Rating Area 7	No Preference	54	549.29
	Rating Area 7	No Preference	55	573.73
	Rating Area 7	No Preference	56	600.23
	Rating Area 7	No Preference	57	626.98
	Rating Area 7	No Preference	58	655.54
	Rating Area 7	No Preference	59	669.69
	Rating Area 7	No Preference	60	698.25
	Rating Area 7	No Preference	61	722.95
	Rating Area 7	No Preference	62	739.16
	Rating Area 7	No Preference	63	759.48
	Rating Area 7	No Preference	64	771.83
	Rating Area 7	No Preference	65 and over	771.83
	Rating Area 9	No Preference	0-20	160.14
	Rating Area 9	No Preference	21	252.18
53789PA0090004	Rating Area 9	No Preference	22	252.18
	Rating Area 9	No Preference	23	252.18
	Rating Area 9	No Preference	24	252.18
	Rating Area 9	No Preference	25	252.18
	Rating Area 9	No Preference	26	253.19
	Rating Area 9	No Preference	27	258.24
	Rating Area 9	No Preference	28	264.29
	Rating Area 9	No Preference	29	274.12
	Rating Area 9	No Preference	30	282.19
	Rating Area 9	No Preference	31	286.23
	Rating Area 9	No Preference	32	292.28
	Rating Area 9	No Preference	33	298.33
	Rating Area 9	No Preference	34	302.11
	Rating Area 9	No Preference	35	306.15
	Rating Area 9	No Preference	36	308.17
	Rating Area 9	No Preference	37	310.18
	Rating Area 9	No Preference	38	312.20
	Rating Area 9	No Preference	39	314.22
	Rating Area 9	No Preference	40	318.25
	Rating Area 9	No Preference	41	322.29
	Rating Area 9	No Preference	42	328.34
	Rating Area 9	No Preference	43	334.14
	Rating Area 9	No Preference	44	342.21
	Rating Area 9	No Preference	45	352.30
	Rating Area 9	No Preference	46	364.15
	Rating Area 9	No Preference	47	378.27
	Rating Area 9	No Preference	48	394.16
	Rating Area 9	No Preference		412.32

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	10/1/2017		
	Rate Expiration Date*	12/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090004	Rating Area 9	No Preference	49	430.22
	Rating Area 9	No Preference	50	450.40
	Rating Area 9	No Preference	51	470.32
	Rating Area 9	No Preference	52	492.26
	Rating Area 9	No Preference	53	514.45
	Rating Area 9	No Preference	54	538.41
	Rating Area 9	No Preference	55	562.37
	Rating Area 9	No Preference	56	588.34
	Rating Area 9	No Preference	57	614.57
	Rating Area 9	No Preference	58	642.56
	Rating Area 9	No Preference	59	656.43
	Rating Area 9	No Preference	60	684.42
	Rating Area 9	No Preference	61	708.63
	Rating Area 9	No Preference	62	724.52
	Rating Area 9	No Preference	63	744.44
	Rating Area 9	No Preference	64	756.54
	Rating Area 9	No Preference	65 and over	756.54
53789PA0090007	Rating Area 6	No Preference	0-20	224.94
53789PA0090007	Rating Area 6	No Preference	21	354.23
	Rating Area 6	No Preference	22	354.23
	Rating Area 6	No Preference	23	354.23
	Rating Area 6	No Preference	24	354.23
	Rating Area 6	No Preference	25	355.65
	Rating Area 6	No Preference	26	362.73
	Rating Area 6	No Preference	27	371.23
	Rating Area 6	No Preference	28	385.05
	Rating Area 6	No Preference	29	396.38
	Rating Area 6	No Preference	30	402.05
	Rating Area 6	No Preference	31	410.55
	Rating Area 6	No Preference	32	419.05
	Rating Area 6	No Preference	33	424.37
	Rating Area 6	No Preference	34	430.04
	Rating Area 6	No Preference	35	432.87
	Rating Area 6	No Preference	36	435.70
	Rating Area 6	No Preference	37	438.54
	Rating Area 6	No Preference	38	441.37
	Rating Area 6	No Preference	39	447.04
	Rating Area 6	No Preference	40	452.71
	Rating Area 6	No Preference	41	461.21
	Rating Area 6	No Preference	42	469.35
	Rating Area 6	No Preference	43	480.69
	Rating Area 6	No Preference	44	494.86

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	10/1/2017		
	Rate Expiration Date*	12/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 6	No Preference	45	511.51
	Rating Area 6	No Preference	46	531.34
	Rating Area 6	No Preference	47	553.66
	Rating Area 6	No Preference	48	579.17
	Rating Area 6	No Preference	49	604.32
	Rating Area 6	No Preference	50	632.65
	Rating Area 6	No Preference	51	660.64
	Rating Area 6	No Preference	52	691.46
	Rating Area 6	No Preference	53	722.63
	Rating Area 6	No Preference	54	756.28
	Rating Area 6	No Preference	55	789.93
	Rating Area 6	No Preference	56	826.42
	Rating Area 6	No Preference	57	863.26
	Rating Area 6	No Preference	58	902.58
	Rating Area 6	No Preference	59	922.06
	Rating Area 6	No Preference	60	961.38
	Rating Area 6	No Preference	61	995.39
	Rating Area 6	No Preference	62	1017.70
	Rating Area 6	No Preference	63	1045.69
	Rating Area 6	No Preference	64	1062.68
	Rating Area 6	No Preference	65 and over	1062.68
53789PA0090007	Rating Area 7	No Preference	0-20	227.19
53789PA0090007	Rating Area 7	No Preference	21	357.77
	Rating Area 7	No Preference	22	357.77
	Rating Area 7	No Preference	23	357.77
	Rating Area 7	No Preference	24	357.77
	Rating Area 7	No Preference	25	359.20
	Rating Area 7	No Preference	26	366.36
	Rating Area 7	No Preference	27	374.95
	Rating Area 7	No Preference	28	388.90
	Rating Area 7	No Preference	29	400.35
	Rating Area 7	No Preference	30	406.07
	Rating Area 7	No Preference	31	414.66
	Rating Area 7	No Preference	32	423.24
	Rating Area 7	No Preference	33	428.61
	Rating Area 7	No Preference	34	434.34
	Rating Area 7	No Preference	35	437.20
	Rating Area 7	No Preference	36	440.06
	Rating Area 7	No Preference	37	442.92
	Rating Area 7	No Preference	38	445.78
	Rating Area 7	No Preference	39	451.51
	Rating Area 7	No Preference	40	457.23

HIOS Issuer ID*	53789			
	Federal TIN* 23-2399845			
	Rate Effective Date* 10/1/2017			
	Rate Expiration Date* 12/31/2017			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 7	No Preference	41	465.82
	Rating Area 7	No Preference	42	474.05
	Rating Area 7	No Preference	43	485.50
	Rating Area 7	No Preference	44	499.81
	Rating Area 7	No Preference	45	516.62
	Rating Area 7	No Preference	46	536.66
	Rating Area 7	No Preference	47	559.20
	Rating Area 7	No Preference	48	584.96
	Rating Area 7	No Preference	49	610.36
	Rating Area 7	No Preference	50	638.98
	Rating Area 7	No Preference	51	667.25
	Rating Area 7	No Preference	52	698.37
	Rating Area 7	No Preference	53	729.86
	Rating Area 7	No Preference	54	763.84
	Rating Area 7	No Preference	55	797.83
	Rating Area 7	No Preference	56	834.68
	Rating Area 7	No Preference	57	871.89
	Rating Area 7	No Preference	58	911.60
	Rating Area 7	No Preference	59	931.28
	Rating Area 7	No Preference	60	970.99
	Rating Area 7	No Preference	61	1005.34
	Rating Area 7	No Preference	62	1027.88
	Rating Area 7	No Preference	63	1056.14
	Rating Area 7	No Preference	64	1073.31
	Rating Area 7	No Preference	65 and over	1073.31
53789PA0090007	Rating Area 9	No Preference	0-20	222.69
53789PA0090007	Rating Area 9	No Preference	21	350.69
	Rating Area 9	No Preference	22	350.69
	Rating Area 9	No Preference	23	350.69
	Rating Area 9	No Preference	24	350.69
	Rating Area 9	No Preference	25	352.09
	Rating Area 9	No Preference	26	359.10
	Rating Area 9	No Preference	27	367.52
	Rating Area 9	No Preference	28	381.20
	Rating Area 9	No Preference	29	392.42
	Rating Area 9	No Preference	30	398.03
	Rating Area 9	No Preference	31	406.45
	Rating Area 9	No Preference	32	414.86
	Rating Area 9	No Preference	33	420.12
	Rating Area 9	No Preference	34	425.73
	Rating Area 9	No Preference	35	428.54
	Rating Area 9	No Preference	36	431.35

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	10/1/2017		
	Rate Expiration Date*	12/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090007	Rating Area 9	No Preference	37	434.15
	Rating Area 9	No Preference	38	436.96
	Rating Area 9	No Preference	39	442.57
	Rating Area 9	No Preference	40	448.18
	Rating Area 9	No Preference	41	456.60
	Rating Area 9	No Preference	42	464.66
	Rating Area 9	No Preference	43	475.88
	Rating Area 9	No Preference	44	489.91
	Rating Area 9	No Preference	45	506.39
	Rating Area 9	No Preference	46	526.03
	Rating Area 9	No Preference	47	548.12
	Rating Area 9	No Preference	48	573.37
	Rating Area 9	No Preference	49	598.27
	Rating Area 9	No Preference	50	626.33
	Rating Area 9	No Preference	51	654.03
	Rating Area 9	No Preference	52	684.54
	Rating Area 9	No Preference	53	715.40
	Rating Area 9	No Preference	54	748.72
	Rating Area 9	No Preference	55	782.03
	Rating Area 9	No Preference	56	818.15
	Rating Area 9	No Preference	57	854.63
	Rating Area 9	No Preference	58	893.55
	Rating Area 9	No Preference	59	912.84
	Rating Area 9	No Preference	60	951.77
	Rating Area 9	No Preference	61	985.43
	Rating Area 9	No Preference	62	1007.53
	Rating Area 9	No Preference	63	1035.23
	Rating Area 9	No Preference	64	1052.06
	Rating Area 9	No Preference	65 and over	1052.06
53789PA0090008	Rating Area 6	No Preference	0-20	228.94
53789PA0090008	Rating Area 6	No Preference	21	360.53
	Rating Area 6	No Preference	22	360.53
	Rating Area 6	No Preference	23	360.53
	Rating Area 6	No Preference	24	360.53
	Rating Area 6	No Preference	25	361.97
	Rating Area 6	No Preference	26	369.18
	Rating Area 6	No Preference	27	377.84
	Rating Area 6	No Preference	28	391.90
	Rating Area 6	No Preference	29	403.43
	Rating Area 6	No Preference	30	409.20
	Rating Area 6	No Preference	31	417.85
	Rating Area 6	No Preference	32	426.51

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	10/1/2017		
	Rate Expiration Date*	12/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 6	No Preference	33	431.91
	Rating Area 6	No Preference	34	437.68
	Rating Area 6	No Preference	35	440.57
	Rating Area 6	No Preference	36	443.45
	Rating Area 6	No Preference	37	446.34
	Rating Area 6	No Preference	38	449.22
	Rating Area 6	No Preference	39	454.99
	Rating Area 6	No Preference	40	460.76
	Rating Area 6	No Preference	41	469.41
	Rating Area 6	No Preference	42	477.70
	Rating Area 6	No Preference	43	489.24
	Rating Area 6	No Preference	44	503.66
	Rating Area 6	No Preference	45	520.61
	Rating Area 6	No Preference	46	540.79
	Rating Area 6	No Preference	47	563.51
	Rating Area 6	No Preference	48	589.47
	Rating Area 6	No Preference	49	615.06
	Rating Area 6	No Preference	50	643.91
	Rating Area 6	No Preference	51	672.39
	Rating Area 6	No Preference	52	703.75
	Rating Area 6	No Preference	53	735.48
	Rating Area 6	No Preference	54	769.73
	Rating Area 6	No Preference	55	803.98
	Rating Area 6	No Preference	56	841.12
	Rating Area 6	No Preference	57	878.61
	Rating Area 6	No Preference	58	918.63
	Rating Area 6	No Preference	59	938.46
	Rating Area 6	No Preference	60	978.48
	Rating Area 6	No Preference	61	1013.09
	Rating Area 6	No Preference	62	1035.80
	Rating Area 6	No Preference	63	1064.28
	Rating Area 6	No Preference	64	1081.58
	Rating Area 6	No Preference	65 and over	1081.58
53789PA0090008	Rating Area 7	No Preference	0-20	231.23
53789PA0090008	Rating Area 7	No Preference	21	364.14
	Rating Area 7	No Preference	22	364.14
	Rating Area 7	No Preference	23	364.14
	Rating Area 7	No Preference	24	364.14
	Rating Area 7	No Preference	25	365.59
	Rating Area 7	No Preference	26	372.87
	Rating Area 7	No Preference	27	381.61
	Rating Area 7	No Preference	28	395.82

HIOS Issuer ID*	53789			
	Federal TIN* 23-2399845			
	Rate Effective Date* 10/1/2017			
	Rate Expiration Date* 12/31/2017			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 7	No Preference	29	407.47
	Rating Area 7	No Preference	30	413.29
	Rating Area 7	No Preference	31	422.03
	Rating Area 7	No Preference	32	430.77
	Rating Area 7	No Preference	33	436.23
	Rating Area 7	No Preference	34	442.06
	Rating Area 7	No Preference	35	444.97
	Rating Area 7	No Preference	36	447.89
	Rating Area 7	No Preference	37	450.80
	Rating Area 7	No Preference	38	453.71
	Rating Area 7	No Preference	39	459.54
	Rating Area 7	No Preference	40	465.36
	Rating Area 7	No Preference	41	474.10
	Rating Area 7	No Preference	42	482.48
	Rating Area 7	No Preference	43	494.13
	Rating Area 7	No Preference	44	508.70
	Rating Area 7	No Preference	45	525.81
	Rating Area 7	No Preference	46	546.20
	Rating Area 7	No Preference	47	569.14
	Rating Area 7	No Preference	48	595.36
	Rating Area 7	No Preference	49	621.21
	Rating Area 7	No Preference	50	650.35
	Rating Area 7	No Preference	51	679.11
	Rating Area 7	No Preference	52	710.79
	Rating Area 7	No Preference	53	742.84
	Rating Area 7	No Preference	54	777.43
	Rating Area 7	No Preference	55	812.02
	Rating Area 7	No Preference	56	849.53
	Rating Area 7	No Preference	57	887.40
	Rating Area 7	No Preference	58	927.82
	Rating Area 7	No Preference	59	947.84
	Rating Area 7	No Preference	60	988.26
	Rating Area 7	No Preference	61	1023.22
	Rating Area 7	No Preference	62	1046.16
	Rating Area 7	No Preference	63	1074.93
	Rating Area 7	No Preference	64	1092.41
	Rating Area 7	No Preference	65 and over	1092.41
53789PA0090008	Rating Area 9	No Preference	0-20	226.65
53789PA0090008	Rating Area 9	No Preference	21	356.92
	Rating Area 9	No Preference	22	356.92
	Rating Area 9	No Preference	23	356.92
	Rating Area 9	No Preference	24	356.92

HIOS Issuer ID*	53789			
Federal TIN*	23-2399845			
Rate Effective Date*	10/1/2017			
Rate Expiration Date*	12/31/2017			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090008	Rating Area 9	No Preference	25	358.35
53789PA0090008	Rating Area 9	No Preference	26	365.49
53789PA0090008	Rating Area 9	No Preference	27	374.06
53789PA0090008	Rating Area 9	No Preference	28	387.98
53789PA0090008	Rating Area 9	No Preference	29	399.40
53789PA0090008	Rating Area 9	No Preference	30	405.11
53789PA0090008	Rating Area 9	No Preference	31	413.68
53789PA0090008	Rating Area 9	No Preference	32	422.24
53789PA0090008	Rating Area 9	No Preference	33	427.60
53789PA0090008	Rating Area 9	No Preference	34	433.31
53789PA0090008	Rating Area 9	No Preference	35	436.16
53789PA0090008	Rating Area 9	No Preference	36	439.02
53789PA0090008	Rating Area 9	No Preference	37	441.87
53789PA0090008	Rating Area 9	No Preference	38	444.73
53789PA0090008	Rating Area 9	No Preference	39	450.44
53789PA0090008	Rating Area 9	No Preference	40	456.15
53789PA0090008	Rating Area 9	No Preference	41	464.72
53789PA0090008	Rating Area 9	No Preference	42	472.93
53789PA0090008	Rating Area 9	No Preference	43	484.35
53789PA0090008	Rating Area 9	No Preference	44	498.62
53789PA0090008	Rating Area 9	No Preference	45	515.40
53789PA0090008	Rating Area 9	No Preference	46	535.39
53789PA0090008	Rating Area 9	No Preference	47	557.87
53789PA0090008	Rating Area 9	No Preference	48	583.57
53789PA0090008	Rating Area 9	No Preference	49	608.91
53789PA0090008	Rating Area 9	No Preference	50	637.47
53789PA0090008	Rating Area 9	No Preference	51	665.66
53789PA0090008	Rating Area 9	No Preference	52	696.72
53789PA0090008	Rating Area 9	No Preference	53	728.13
53789PA0090008	Rating Area 9	No Preference	54	762.03
53789PA0090008	Rating Area 9	No Preference	55	795.94
53789PA0090008	Rating Area 9	No Preference	56	832.71
53789PA0090008	Rating Area 9	No Preference	57	869.83
53789PA0090008	Rating Area 9	No Preference	58	909.44
53789PA0090008	Rating Area 9	No Preference	59	929.07
53789PA0090008	Rating Area 9	No Preference	60	968.69
53789PA0090008	Rating Area 9	No Preference	61	1002.96
53789PA0090008	Rating Area 9	No Preference	62	1025.44
53789PA0090008	Rating Area 9	No Preference	63	1053.64
53789PA0090008	Rating Area 9	No Preference	64	1070.76
53789PA0090008	Rating Area 9	No Preference	65 and over	1070.76
53789PA0090011	Rating Area 6	No Preference	0-20	199.14

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	10/1/2017		
	Rate Expiration Date*	12/31/2017		
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*				
Required:Required:Required:Required:Required: Enter the 14-character Plan IDSelect the Rating Area IDSelect if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planSelect the age of a subscriber eligible for the rateEnter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan				
53789PA0090011	Rating Area 6	No Preference	21	313.61
	Rating Area 6	No Preference	22	313.61
	Rating Area 6	No Preference	23	313.61
	Rating Area 6	No Preference	24	313.61
	Rating Area 6	No Preference	25	314.86
	Rating Area 6	No Preference	26	321.14
	Rating Area 6	No Preference	27	328.66
	Rating Area 6	No Preference	28	340.89
	Rating Area 6	No Preference	29	350.93
	Rating Area 6	No Preference	30	355.95
	Rating Area 6	No Preference	31	363.47
	Rating Area 6	No Preference	32	371.00
	Rating Area 6	No Preference	33	375.70
	Rating Area 6	No Preference	34	380.72
	Rating Area 6	No Preference	35	383.23
	Rating Area 6	No Preference	36	385.74
	Rating Area 6	No Preference	37	388.25
	Rating Area 6	No Preference	38	390.76
	Rating Area 6	No Preference	39	395.78
	Rating Area 6	No Preference	40	400.79
	Rating Area 6	No Preference	41	408.32
	Rating Area 6	No Preference	42	415.53
	Rating Area 6	No Preference	43	425.57
	Rating Area 6	No Preference	44	438.11
	Rating Area 6	No Preference	45	452.85
	Rating Area 6	No Preference	46	470.42
	Rating Area 6	No Preference	47	490.17
	Rating Area 6	No Preference	48	512.75
	Rating Area 6	No Preference	49	535.02
	Rating Area 6	No Preference	50	560.11
	Rating Area 6	No Preference	51	584.88
	Rating Area 6	No Preference	52	612.17
	Rating Area 6	No Preference	53	639.76
	Rating Area 6	No Preference	54	669.56
	Rating Area 6	No Preference	55	699.35
	Rating Area 6	No Preference	56	731.65
	Rating Area 6	No Preference	57	764.27
	Rating Area 6	No Preference	58	799.08
	Rating Area 6	No Preference	59	816.33
	Rating Area 6	No Preference	60	851.14
	Rating Area 6	No Preference	61	881.24
	Rating Area 6	No Preference	62	901.00

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	10/1/2017		
	Rate Expiration Date*	12/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 6	No Preference	63	925.78
53789PA0090011	Rating Area 6	No Preference	64	940.82
53789PA0090011	Rating Area 6	No Preference	65 and over	940.82
53789PA0090011	Rating Area 7	No Preference	0-20	201.13
53789PA0090011	Rating Area 7	No Preference	21	316.75
53789PA0090011	Rating Area 7	No Preference	22	316.75
53789PA0090011	Rating Area 7	No Preference	23	316.75
53789PA0090011	Rating Area 7	No Preference	24	316.75
53789PA0090011	Rating Area 7	No Preference	25	318.01
53789PA0090011	Rating Area 7	No Preference	26	324.35
53789PA0090011	Rating Area 7	No Preference	27	331.95
53789PA0090011	Rating Area 7	No Preference	28	344.30
53789PA0090011	Rating Area 7	No Preference	29	354.44
53789PA0090011	Rating Area 7	No Preference	30	359.51
53789PA0090011	Rating Area 7	No Preference	31	367.11
53789PA0090011	Rating Area 7	No Preference	32	374.71
53789PA0090011	Rating Area 7	No Preference	33	379.46
53789PA0090011	Rating Area 7	No Preference	34	384.53
53789PA0090011	Rating Area 7	No Preference	35	387.06
53789PA0090011	Rating Area 7	No Preference	36	389.60
53789PA0090011	Rating Area 7	No Preference	37	392.13
53789PA0090011	Rating Area 7	No Preference	38	394.67
53789PA0090011	Rating Area 7	No Preference	39	399.73
53789PA0090011	Rating Area 7	No Preference	40	404.80
53789PA0090011	Rating Area 7	No Preference	41	412.40
53789PA0090011	Rating Area 7	No Preference	42	419.69
53789PA0090011	Rating Area 7	No Preference	43	429.82
53789PA0090011	Rating Area 7	No Preference	44	442.49
53789PA0090011	Rating Area 7	No Preference	45	457.38
53789PA0090011	Rating Area 7	No Preference	46	475.12
53789PA0090011	Rating Area 7	No Preference	47	495.07
53789PA0090011	Rating Area 7	No Preference	48	517.88
53789PA0090011	Rating Area 7	No Preference	49	540.37
53789PA0090011	Rating Area 7	No Preference	50	565.71
53789PA0090011	Rating Area 7	No Preference	51	590.73
53789PA0090011	Rating Area 7	No Preference	52	618.29
53789PA0090011	Rating Area 7	No Preference	53	646.16
53789PA0090011	Rating Area 7	No Preference	54	676.25
53789PA0090011	Rating Area 7	No Preference	55	706.34
53789PA0090011	Rating Area 7	No Preference	56	738.97
53789PA0090011	Rating Area 7	No Preference	57	771.91
53789PA0090011	Rating Area 7	No Preference	58	807.07

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	10/1/2017		
	Rate Expiration Date*	12/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 7	No Preference	59	824.49
	Rating Area 7	No Preference	60	859.65
	Rating Area 7	No Preference	61	890.06
	Rating Area 7	No Preference	62	910.01
	Rating Area 7	No Preference	63	935.03
	Rating Area 7	No Preference	64	950.24
	Rating Area 7	No Preference	65 and over	950.24
53789PA0090011	Rating Area 9	No Preference	0-20	197.15
53789PA0090011	Rating Area 9	No Preference	21	310.47
	Rating Area 9	No Preference	22	310.47
	Rating Area 9	No Preference	23	310.47
	Rating Area 9	No Preference	24	310.47
	Rating Area 9	No Preference	25	311.72
	Rating Area 9	No Preference	26	317.93
	Rating Area 9	No Preference	27	325.38
	Rating Area 9	No Preference	28	337.49
	Rating Area 9	No Preference	29	347.42
	Rating Area 9	No Preference	30	352.39
	Rating Area 9	No Preference	31	359.84
	Rating Area 9	No Preference	32	367.29
	Rating Area 9	No Preference	33	371.95
	Rating Area 9	No Preference	34	376.92
	Rating Area 9	No Preference	35	379.40
	Rating Area 9	No Preference	36	381.88
	Rating Area 9	No Preference	37	384.37
	Rating Area 9	No Preference	38	386.85
	Rating Area 9	No Preference	39	391.82
	Rating Area 9	No Preference	40	396.79
	Rating Area 9	No Preference	41	404.24
	Rating Area 9	No Preference	42	411.38
	Rating Area 9	No Preference	43	421.31
	Rating Area 9	No Preference	44	433.73
	Rating Area 9	No Preference	45	448.32
	Rating Area 9	No Preference	46	465.71
	Rating Area 9	No Preference	47	485.27
	Rating Area 9	No Preference	48	507.62
	Rating Area 9	No Preference	49	529.67
	Rating Area 9	No Preference	50	554.51
	Rating Area 9	No Preference	51	579.03
	Rating Area 9	No Preference	52	606.05
	Rating Area 9	No Preference	53	633.37
	Rating Area 9	No Preference	54	662.86

HIOS Issuer ID*	53789			
	Federal TIN*	23-2399845		
	Rate Effective Date*	10/1/2017		
	Rate Expiration Date*	12/31/2017		
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090011	Rating Area 9	No Preference	55	692.36
	Rating Area 9	No Preference	56	724.34
	Rating Area 9	No Preference	57	756.62
	Rating Area 9	No Preference	58	791.09
	Rating Area 9	No Preference	59	808.16
	Rating Area 9	No Preference	60	842.63
	Rating Area 9	No Preference	61	872.43
	Rating Area 9	No Preference	62	891.99
	Rating Area 9	No Preference	63	916.52
	Rating Area 9	No Preference	64	931.41
	Rating Area 9	No Preference	65 and over	931.41
53789PA0090012	Rating Area 6	No Preference	0-20	203.14
53789PA0090012	Rating Area 6	No Preference	21	319.91
	Rating Area 6	No Preference	22	319.91
	Rating Area 6	No Preference	23	319.91
	Rating Area 6	No Preference	24	319.91
	Rating Area 6	No Preference	25	321.19
	Rating Area 6	No Preference	26	327.59
	Rating Area 6	No Preference	27	335.27
	Rating Area 6	No Preference	28	347.74
	Rating Area 6	No Preference	29	357.98
	Rating Area 6	No Preference	30	363.10
	Rating Area 6	No Preference	31	370.78
	Rating Area 6	No Preference	32	378.45
	Rating Area 6	No Preference	33	383.25
	Rating Area 6	No Preference	34	388.37
	Rating Area 6	No Preference	35	390.93
	Rating Area 6	No Preference	36	393.49
	Rating Area 6	No Preference	37	396.05
	Rating Area 6	No Preference	38	398.61
	Rating Area 6	No Preference	39	403.73
	Rating Area 6	No Preference	40	408.84
	Rating Area 6	No Preference	41	416.52
	Rating Area 6	No Preference	42	423.88
	Rating Area 6	No Preference	43	434.12
	Rating Area 6	No Preference	44	446.91
	Rating Area 6	No Preference	45	461.95
	Rating Area 6	No Preference	46	479.86
	Rating Area 6	No Preference	47	500.02
	Rating Area 6	No Preference	48	523.05
	Rating Area 6	No Preference	49	545.77
	Rating Area 6	No Preference	50	571.36

HIOS Issuer ID*	53789			
	Federal TIN* 23-2399845			
	Rate Effective Date* 10/1/2017			
	Rate Expiration Date* 12/31/2017			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090012	Rating Area 6	No Preference	51	596.63
	Rating Area 6	No Preference	52	624.46
	Rating Area 6	No Preference	53	652.62
	Rating Area 6	No Preference	54	683.01
	Rating Area 6	No Preference	55	713.40
	Rating Area 6	No Preference	56	746.35
	Rating Area 6	No Preference	57	779.62
	Rating Area 6	No Preference	58	815.13
	Rating Area 6	No Preference	59	832.73
	Rating Area 6	No Preference	60	868.24
	Rating Area 6	No Preference	61	898.95
	Rating Area 6	No Preference	62	919.10
	Rating Area 6	No Preference	63	944.37
	Rating Area 6	No Preference	64	959.72
	Rating Area 6	No Preference	65 and over	959.72
53789PA0090012	Rating Area 7	No Preference	0-20	205.17
53789PA0090012	Rating Area 7	No Preference	21	323.11
	Rating Area 7	No Preference	22	323.11
	Rating Area 7	No Preference	23	323.11
	Rating Area 7	No Preference	24	323.11
	Rating Area 7	No Preference	25	324.40
	Rating Area 7	No Preference	26	330.86
	Rating Area 7	No Preference	27	338.62
	Rating Area 7	No Preference	28	351.22
	Rating Area 7	No Preference	29	361.56
	Rating Area 7	No Preference	30	366.73
	Rating Area 7	No Preference	31	374.48
	Rating Area 7	No Preference	32	382.24
	Rating Area 7	No Preference	33	387.08
	Rating Area 7	No Preference	34	392.25
	Rating Area 7	No Preference	35	394.84
	Rating Area 7	No Preference	36	397.42
	Rating Area 7	No Preference	37	400.01
	Rating Area 7	No Preference	38	402.59
	Rating Area 7	No Preference	39	407.76
	Rating Area 7	No Preference	40	412.93
	Rating Area 7	No Preference	41	420.69
	Rating Area 7	No Preference	42	428.12
	Rating Area 7	No Preference	43	438.46
	Rating Area 7	No Preference	44	451.38
	Rating Area 7	No Preference	45	466.57
	Rating Area 7	No Preference	46	484.66

HIOS Issuer ID*	53789			
	Federal TIN* 23-2399845			
	Rate Effective Date* 10/1/2017			
	Rate Expiration Date* 12/31/2017			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Require: 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
53789PA0090012	Rating Area 7	No Preference	47	505.02
	Rating Area 7	No Preference	48	528.28
	Rating Area 7	No Preference	49	551.22
	Rating Area 7	No Preference	50	577.07
	Rating Area 7	No Preference	51	602.60
	Rating Area 7	No Preference	52	630.71
	Rating Area 7	No Preference	53	659.14
	Rating Area 7	No Preference	54	689.84
	Rating Area 7	No Preference	55	720.53
	Rating Area 7	No Preference	56	753.81
	Rating Area 7	No Preference	57	787.42
	Rating Area 7	No Preference	58	823.28
	Rating Area 7	No Preference	59	841.05
	Rating Area 7	No Preference	60	876.92
	Rating Area 7	No Preference	61	907.94
	Rating Area 7	No Preference	62	928.29
	Rating Area 7	No Preference	63	953.82
	Rating Area 7	No Preference	64	969.32
	Rating Area 7	No Preference	65 and over	969.32
53789PA0090012	Rating Area 9	No Preference	0-20	201.11
53789PA0090012	Rating Area 9	No Preference	21	316.71
	Rating Area 9	No Preference	22	316.71
	Rating Area 9	No Preference	23	316.71
	Rating Area 9	No Preference	24	316.71
	Rating Area 9	No Preference	25	317.98
	Rating Area 9	No Preference	26	324.31
	Rating Area 9	No Preference	27	331.91
	Rating Area 9	No Preference	28	344.26
	Rating Area 9	No Preference	29	354.40
	Rating Area 9	No Preference	30	359.47
	Rating Area 9	No Preference	31	367.07
	Rating Area 9	No Preference	32	374.67
	Rating Area 9	No Preference	33	379.42
	Rating Area 9	No Preference	34	384.49
	Rating Area 9	No Preference	35	387.02
	Rating Area 9	No Preference	36	389.55
	Rating Area 9	No Preference	37	392.09
	Rating Area 9	No Preference	38	394.62
	Rating Area 9	No Preference	39	399.69
	Rating Area 9	No Preference	40	404.76
53789PA0090012	Rating Area 9	No Preference	41	412.36
53789PA0090012	Rating Area 9	No Preference	42	419.64

HIOS Issuer ID*		53789			
Federal TIN*		23-2399845			
Rate Effective Date*		10/1/2017			
Rate Expiration Date*		12/31/2017			
Plan ID*		Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID		Required: Select the Rating Area ID	Require: 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
	53789PA0090012	Rating Area 9	No Preference	43	429.78
	53789PA0090012	Rating Area 9	No Preference	44	442.45
	53789PA0090012	Rating Area 9	No Preference	45	457.33
	53789PA0090012	Rating Area 9	No Preference	46	475.07
	53789PA0090012	Rating Area 9	No Preference	47	495.02
	53789PA0090012	Rating Area 9	No Preference	48	517.82
	53789PA0090012	Rating Area 9	No Preference	49	540.31
	53789PA0090012	Rating Area 9	No Preference	50	565.65
	53789PA0090012	Rating Area 9	No Preference	51	590.67
	53789PA0090012	Rating Area 9	No Preference	52	618.22
	53789PA0090012	Rating Area 9	No Preference	53	646.09
	53789PA0090012	Rating Area 9	No Preference	54	676.18
	53789PA0090012	Rating Area 9	No Preference	55	706.27
	53789PA0090012	Rating Area 9	No Preference	56	738.89
	53789PA0090012	Rating Area 9	No Preference	57	771.82
	53789PA0090012	Rating Area 9	No Preference	58	806.98
	53789PA0090012	Rating Area 9	No Preference	59	824.40
	53789PA0090012	Rating Area 9	No Preference	60	859.55
	53789PA0090012	Rating Area 9	No Preference	61	889.96
	53789PA0090012	Rating Area 9	No Preference	62	909.91
	53789PA0090012	Rating Area 9	No Preference	63	934.93
	53789PA0090012	Rating Area 9	No Preference	64	950.12
	53789PA0090012	Rating Area 9	No Preference	65 and over	950.12

2017 Rates Table Template v6.0	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 a community rating state, select Family Option under Age and fill in all columns.																
	If you are not community rating state, select 0-20 under Age and provide an Individual Rate for every age band.																
	If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.																
	To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.																
HIOS Issuer ID* Federal TIN* Rate Effective Date* Rate Expiration Date*	53789																
	23-2399845																
	1/1/2017																
	12/31/2017																
<table><tr><td>Plan ID*</td><td>Rating Area ID*</td><td>Tobacco*</td><td>Age*</td><td>Individual Rate*</td><td>Individual Tobacco Rate*</td></tr><tr><td>Required: Enter the 14-character Plan ID</td><td>Required: Select the Rating Area ID</td><td>Require: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan</td><td>Required: Select the age of a subscriber eligible for the rate</td><td>Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan</td><td>Required: Enter the rate of an Individual tobacco enrollee on a plan</td></tr></table>						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	Require: 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
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	Require: 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												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	195.75	195.75												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	21	308.27	315.98												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	22	308.27	315.98												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	23	308.27	315.98												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	24	308.27	315.98												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	25	309.50	317.24												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	26	315.67	323.56												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	27	323.07	331.14												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	28	335.09	343.47												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	29	344.95	353.58												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	30	349.89	358.63												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	31	357.28	366.22												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	32	364.68	373.80												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	33	369.31	378.54												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	34	374.24	383.60												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	35	376.71	386.12												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	36	379.17	388.65												
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	37	381.64	391.18												

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	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required: Required: Require: Required: Required: Required: Enter the 14-character Plan IDSelect the Rating Area IDSelect if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planSelect the age of a subscriber eligible for the rateEnter the rate of an Individual Non-Tobacco or No Preference enrollee on a planEnter the rate of an Individual tobacco enrollee on a plan					
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	38	384.10	393.71
	Rating Area 6	Tobacco User/Non-Tobacco User	39	389.04	398.76
	Rating Area 6	Tobacco User/Non-Tobacco User	40	393.97	423.52
	Rating Area 6	Tobacco User/Non-Tobacco User	41	401.37	431.47
	Rating Area 6	Tobacco User/Non-Tobacco User	42	408.46	439.09
	Rating Area 6	Tobacco User/Non-Tobacco User	43	418.32	449.70
	Rating Area 6	Tobacco User/Non-Tobacco User	44	430.65	462.95
	Rating Area 6	Tobacco User/Non-Tobacco User	45	445.14	489.66
	Rating Area 6	Tobacco User/Non-Tobacco User	46	462.40	508.65
	Rating Area 6	Tobacco User/Non-Tobacco User	47	481.83	530.01
	Rating Area 6	Tobacco User/Non-Tobacco User	48	504.02	554.42
	Rating Area 6	Tobacco User/Non-Tobacco User	49	525.91	578.50
	Rating Area 6	Tobacco User/Non-Tobacco User	50	550.57	633.16
	Rating Area 6	Tobacco User/Non-Tobacco User	51	574.92	661.16
	Rating Area 6	Tobacco User/Non-Tobacco User	52	601.74	692.00
	Rating Area 6	Tobacco User/Non-Tobacco User	53	628.87	723.20
	Rating Area 6	Tobacco User/Non-Tobacco User	54	658.16	756.88
	Rating Area 6	Tobacco User/Non-Tobacco User	55	687.44	824.93
	Rating Area 6	Tobacco User/Non-Tobacco User	56	719.19	863.03
	Rating Area 6	Tobacco User/Non-Tobacco User	57	751.25	901.50
	Rating Area 6	Tobacco User/Non-Tobacco User	58	785.47	942.57

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
<div><div>Plan ID*</div><div>Rating Area ID*</div><div>Tobacco*</div><div>Age*</div><div>Individual Rate*</div><div>Individual Tobacco Rate*</div></div>					
<div><div>Required: Enter the 14-character Plan ID</div><div>Required: Select the Rating Area ID</div><div>Require: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan</div><div>Required: Select the age of a subscriber eligible for the rate</div><div>Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan</div><div>Required: Enter the rate of an Individual tobacco enrollee on a plan</div></div>					
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	59	802.43	962.91
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	60	836.64	1045.81
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	61	866.24	1082.80
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	62	885.66	1107.07
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	63	910.01	1137.52
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	64	924.80	1156.01
53789PA0030002	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	924.80	1156.01
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	198.79	198.79
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	21	313.05	320.88
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	22	313.05	320.88
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	23	313.05	320.88
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	24	313.05	320.88
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	25	314.30	322.16
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	26	320.56	328.58
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	27	328.08	336.28
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	28	340.28	348.79
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	29	350.30	359.06
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	30	355.31	364.19
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	31	362.82	371.89
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	32	370.34	379.60
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	33	375.03	384.41

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	34	380.04	389.54
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	35	382.55	392.11
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	36	385.05	394.68
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	37	387.56	397.24
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	38	390.06	399.81
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	39	395.07	404.95
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	40	400.08	430.08
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	41	407.59	438.16
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	42	414.79	445.90
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	43	424.81	456.67
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	44	437.33	470.13
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	45	452.04	497.25
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	46	469.57	516.53
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	47	489.30	538.23
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	48	511.84	563.02
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	49	534.06	587.47
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	50	559.11	642.97
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	51	583.84	671.41
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	52	611.07	702.73
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	53	638.62	734.41
53789PA0030003 Rating Area 7		Tobacco User/Non-Tobacco User	54	668.36	768.61

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0030003	Rating Area 7	Tobacco User/Non-Tobacco User	55	698.10	837.72
	Rating Area 7	Tobacco User/Non-Tobacco User	56	730.34	876.41
	Rating Area 7	Tobacco User/Non-Tobacco User	57	762.90	915.48
	Rating Area 7	Tobacco User/Non-Tobacco User	58	797.65	957.18
	Rating Area 7	Tobacco User/Non-Tobacco User	59	814.87	977.84
	Rating Area 7	Tobacco User/Non-Tobacco User	60	849.62	1062.02
	Rating Area 7	Tobacco User/Non-Tobacco User	61	879.67	1099.59
	Rating Area 7	Tobacco User/Non-Tobacco User	62	899.39	1124.24
	Rating Area 7	Tobacco User/Non-Tobacco User	63	924.12	1155.15
	Rating Area 7	Tobacco User/Non-Tobacco User	64	939.14	1173.94
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	939.14	1173.94
53789PA0030004	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	217.24	217.24
53789PA0030004	Rating Area 9	Tobacco User/Non-Tobacco User	21	342.11	350.67
	Rating Area 9	Tobacco User/Non-Tobacco User	22	342.11	350.67
	Rating Area 9	Tobacco User/Non-Tobacco User	23	342.11	350.67
	Rating Area 9	Tobacco User/Non-Tobacco User	24	342.11	350.67
	Rating Area 9	Tobacco User/Non-Tobacco User	25	343.48	352.07
	Rating Area 9	Tobacco User/Non-Tobacco User	26	350.33	359.08
	Rating Area 9	Tobacco User/Non-Tobacco User	27	358.54	367.50
	Rating Area 9	Tobacco User/Non-Tobacco User	28	371.88	381.18
	Rating Area 9	Tobacco User/Non-Tobacco User	29	382.83	392.40

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	30	388.30	398.01
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	31	396.51	406.42
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	32	404.72	414.84
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	33	409.85	420.10
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	34	415.33	425.71
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	35	418.06	428.52
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	36	420.80	431.32
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	37	423.54	434.13
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	38	426.27	436.93
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	39	431.75	442.54
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	40	437.22	470.01
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	41	445.43	478.84
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	42	453.30	487.30
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	43	464.25	499.07
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	44	477.93	513.78
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	45	494.01	543.41
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	46	513.17	564.49
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	47	534.72	588.20
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	48	559.36	615.29
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	49	583.65	642.01
53789PA0030004 Rating Area 9		Tobacco User/Non-Tobacco User	50	611.02	702.67

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0030004	Rating Area 9	Tobacco User/Non-Tobacco User	51	638.04	733.75
	Rating Area 9	Tobacco User/Non-Tobacco User	52	667.81	767.98
	Rating Area 9	Tobacco User/Non-Tobacco User	53	697.91	802.60
	Rating Area 9	Tobacco User/Non-Tobacco User	54	730.41	839.98
	Rating Area 9	Tobacco User/Non-Tobacco User	55	762.91	915.50
	Rating Area 9	Tobacco User/Non-Tobacco User	56	798.15	957.78
	Rating Area 9	Tobacco User/Non-Tobacco User	57	833.73	1000.48
	Rating Area 9	Tobacco User/Non-Tobacco User	58	871.71	1046.05
	Rating Area 9	Tobacco User/Non-Tobacco User	59	890.52	1068.63
	Rating Area 9	Tobacco User/Non-Tobacco User	60	928.50	1160.62
	Rating Area 9	Tobacco User/Non-Tobacco User	61	961.34	1201.68
	Rating Area 9	Tobacco User/Non-Tobacco User	62	982.89	1228.62
	Rating Area 9	Tobacco User/Non-Tobacco User	63	1009.92	1262.40
	Rating Area 9	Tobacco User/Non-Tobacco User	64	1026.33	1282.93
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	1026.33	1282.93
53789PA0040001	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	160.34	160.34
53789PA0040001	Rating Area 6	Tobacco User/Non-Tobacco User	21	252.50	258.81
	Rating Area 6	Tobacco User/Non-Tobacco User	22	252.50	258.81
	Rating Area 6	Tobacco User/Non-Tobacco User	23	252.50	258.81
	Rating Area 6	Tobacco User/Non-Tobacco User	24	252.50	258.81
	Rating Area 6	Tobacco User/Non-Tobacco User	25	253.51	259.85

HIOS Issuer ID*	53789				
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	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0040001	Rating Area 6	Tobacco User/Non-Tobacco User	26	258.56	265.02
	Rating Area 6	Tobacco User/Non-Tobacco User	27	264.62	271.24
	Rating Area 6	Tobacco User/Non-Tobacco User	28	274.47	281.33
	Rating Area 6	Tobacco User/Non-Tobacco User	29	282.55	289.61
	Rating Area 6	Tobacco User/Non-Tobacco User	30	286.59	293.75
	Rating Area 6	Tobacco User/Non-Tobacco User	31	292.65	299.96
	Rating Area 6	Tobacco User/Non-Tobacco User	32	298.71	306.18
	Rating Area 6	Tobacco User/Non-Tobacco User	33	302.50	310.06
	Rating Area 6	Tobacco User/Non-Tobacco User	34	306.53	314.20
	Rating Area 6	Tobacco User/Non-Tobacco User	35	308.56	316.27
	Rating Area 6	Tobacco User/Non-Tobacco User	36	310.58	318.34
	Rating Area 6	Tobacco User/Non-Tobacco User	37	312.59	320.41
	Rating Area 6	Tobacco User/Non-Tobacco User	38	314.62	322.48
	Rating Area 6	Tobacco User/Non-Tobacco User	39	318.66	326.62
	Rating Area 6	Tobacco User/Non-Tobacco User	40	322.70	346.90
	Rating Area 6	Tobacco User/Non-Tobacco User	41	328.76	353.41
	Rating Area 6	Tobacco User/Non-Tobacco User	42	334.56	359.65
	Rating Area 6	Tobacco User/Non-Tobacco User	43	342.64	368.34
	Rating Area 6	Tobacco User/Non-Tobacco User	44	352.74	379.20
	Rating Area 6	Tobacco User/Non-Tobacco User	45	364.61	401.07
	Rating Area 6	Tobacco User/Non-Tobacco User	46	378.75	416.63

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0040001	Rating Area 6	Tobacco User/Non-Tobacco User	47	394.66	434.12
	Rating Area 6	Tobacco User/Non-Tobacco User	48	412.84	454.12
	Rating Area 6	Tobacco User/Non-Tobacco User	49	430.76	473.84
	Rating Area 6	Tobacco User/Non-Tobacco User	50	450.96	518.61
	Rating Area 6	Tobacco User/Non-Tobacco User	51	470.91	541.55
	Rating Area 6	Tobacco User/Non-Tobacco User	52	492.88	566.81
	Rating Area 6	Tobacco User/Non-Tobacco User	53	515.10	592.36
	Rating Area 6	Tobacco User/Non-Tobacco User	54	539.09	619.95
	Rating Area 6	Tobacco User/Non-Tobacco User	55	563.08	675.69
	Rating Area 6	Tobacco User/Non-Tobacco User	56	589.08	706.90
	Rating Area 6	Tobacco User/Non-Tobacco User	57	615.34	738.41
	Rating Area 6	Tobacco User/Non-Tobacco User	58	643.37	772.04
	Rating Area 6	Tobacco User/Non-Tobacco User	59	657.26	788.71
	Rating Area 6	Tobacco User/Non-Tobacco User	60	685.28	856.61
	Rating Area 6	Tobacco User/Non-Tobacco User	61	709.52	886.91
	Rating Area 6	Tobacco User/Non-Tobacco User	62	725.43	906.79
	Rating Area 6	Tobacco User/Non-Tobacco User	63	745.38	931.72
	Rating Area 6	Tobacco User/Non-Tobacco User	64	757.49	946.88
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	757.49	946.88
53789PA0040002	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	162.79	162.79
53789PA0040002	Rating Area 7	Tobacco User/Non-Tobacco User	21	256.37	262.78

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0040002	Rating Area 7	Tobacco User/Non-Tobacco User	22	256.37	262.78
	Rating Area 7	Tobacco User/Non-Tobacco User	23	256.37	262.78
	Rating Area 7	Tobacco User/Non-Tobacco User	24	256.37	262.78
	Rating Area 7	Tobacco User/Non-Tobacco User	25	257.39	263.83
	Rating Area 7	Tobacco User/Non-Tobacco User	26	262.52	269.08
	Rating Area 7	Tobacco User/Non-Tobacco User	27	268.67	275.39
	Rating Area 7	Tobacco User/Non-Tobacco User	28	278.67	285.64
	Rating Area 7	Tobacco User/Non-Tobacco User	29	286.88	294.05
	Rating Area 7	Tobacco User/Non-Tobacco User	30	290.98	298.25
	Rating Area 7	Tobacco User/Non-Tobacco User	31	297.13	304.56
	Rating Area 7	Tobacco User/Non-Tobacco User	32	303.28	310.87
	Rating Area 7	Tobacco User/Non-Tobacco User	33	307.13	314.81
	Rating Area 7	Tobacco User/Non-Tobacco User	34	311.23	319.01
	Rating Area 7	Tobacco User/Non-Tobacco User	35	313.28	321.11
	Rating Area 7	Tobacco User/Non-Tobacco User	36	315.33	323.22
	Rating Area 7	Tobacco User/Non-Tobacco User	37	317.38	325.32
	Rating Area 7	Tobacco User/Non-Tobacco User	38	319.43	327.42
	Rating Area 7	Tobacco User/Non-Tobacco User	39	323.54	331.63
	Rating Area 7	Tobacco User/Non-Tobacco User	40	327.64	352.21
	Rating Area 7	Tobacco User/Non-Tobacco User	41	333.79	358.83
	Rating Area 7	Tobacco User/Non-Tobacco User	42	339.69	365.16

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	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	43	347.89	373.98
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	44	358.15	385.01
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	45	370.20	407.22
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	46	384.55	423.01
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	47	400.70	440.77
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	48	419.16	461.08
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	49	437.36	481.10
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	50	457.87	526.55
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	51	478.13	549.85
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	52	500.43	575.50
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	53	522.99	601.44
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	54	547.35	629.45
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	55	571.70	686.04
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	56	598.11	717.73
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	57	624.77	749.72
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	58	653.23	783.87
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	59	667.33	800.79
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	60	695.78	869.73
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	61	720.39	900.49
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	62	736.55	920.68
53789PA0040002 Rating Area 7		Tobacco User/Non-Tobacco User	63	756.80	946.00

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0040002	Rating Area 7	Tobacco User/Non-Tobacco User	64	769.10	961.38
			65 and over	769.10	961.38
53789PA0040003	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	177.21	177.21
53789PA0040003	Rating Area 9	Tobacco User/Non-Tobacco User	21	279.07	286.05
			22	279.07	286.05
			23	279.07	286.05
			24	279.07	286.05
			25	280.19	287.19
			26	285.77	292.91
			27	292.47	299.78
			28	303.35	310.93
			29	312.28	320.09
			30	316.75	324.66
			31	323.44	331.53
			32	330.14	338.39
			33	334.33	342.69
			34	338.79	347.26
			35	341.02	349.55
			36	343.26	351.84
			37	345.49	354.13
			38	347.72	356.42

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0040003	Rating Area 9	Tobacco User/Non-Tobacco User	39	352.19	360.99
	Rating Area 9	Tobacco User/Non-Tobacco User	40	356.65	383.40
	Rating Area 9	Tobacco User/Non-Tobacco User	41	363.35	390.60
	Rating Area 9	Tobacco User/Non-Tobacco User	42	369.77	397.50
	Rating Area 9	Tobacco User/Non-Tobacco User	43	378.70	407.10
	Rating Area 9	Tobacco User/Non-Tobacco User	44	389.86	419.10
	Rating Area 9	Tobacco User/Non-Tobacco User	45	402.98	443.28
	Rating Area 9	Tobacco User/Non-Tobacco User	46	418.61	460.47
	Rating Area 9	Tobacco User/Non-Tobacco User	47	436.19	479.81
	Rating Area 9	Tobacco User/Non-Tobacco User	48	456.28	501.91
	Rating Area 9	Tobacco User/Non-Tobacco User	49	476.10	523.70
	Rating Area 9	Tobacco User/Non-Tobacco User	50	498.42	573.18
	Rating Area 9	Tobacco User/Non-Tobacco User	51	520.47	598.54
	Rating Area 9	Tobacco User/Non-Tobacco User	52	544.75	626.46
	Rating Area 9	Tobacco User/Non-Tobacco User	53	569.31	654.70
	Rating Area 9	Tobacco User/Non-Tobacco User	54	595.82	685.19
	Rating Area 9	Tobacco User/Non-Tobacco User	55	622.33	746.79
	Rating Area 9	Tobacco User/Non-Tobacco User	56	651.07	781.29
	Rating Area 9	Tobacco User/Non-Tobacco User	57	680.10	816.12
	Rating Area 9	Tobacco User/Non-Tobacco User	58	711.07	853.29
	Rating Area 9	Tobacco User/Non-Tobacco User	59	726.42	871.71

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0040003	Rating Area 9	Tobacco User/Non-Tobacco User	60	757.40	946.75
	Rating Area 9	Tobacco User/Non-Tobacco User	61	784.19	980.24
	Rating Area 9	Tobacco User/Non-Tobacco User	62	801.77	1002.21
	Rating Area 9	Tobacco User/Non-Tobacco User	63	823.82	1029.77
	Rating Area 9	Tobacco User/Non-Tobacco User	64	837.20	1046.52
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	837.20	1046.52
53789PA0050002	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	257.75	257.75
53789PA0050002	Rating Area 6	Tobacco User/Non-Tobacco User	21	405.91	416.06
	Rating Area 6	Tobacco User/Non-Tobacco User	22	405.91	416.06
	Rating Area 6	Tobacco User/Non-Tobacco User	23	405.91	416.06
	Rating Area 6	Tobacco User/Non-Tobacco User	24	405.91	416.06
	Rating Area 6	Tobacco User/Non-Tobacco User	25	407.53	417.72
	Rating Area 6	Tobacco User/Non-Tobacco User	26	415.65	426.04
	Rating Area 6	Tobacco User/Non-Tobacco User	27	425.39	436.03
	Rating Area 6	Tobacco User/Non-Tobacco User	28	441.22	452.25
	Rating Area 6	Tobacco User/Non-Tobacco User	29	454.21	465.57
	Rating Area 6	Tobacco User/Non-Tobacco User	30	460.71	472.23
	Rating Area 6	Tobacco User/Non-Tobacco User	31	470.45	482.21
	Rating Area 6	Tobacco User/Non-Tobacco User	32	480.19	492.20
	Rating Area 6	Tobacco User/Non-Tobacco User	33	486.28	498.44
	Rating Area 6	Tobacco User/Non-Tobacco User	34	492.77	505.09

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required: Enter the 14-character Plan IDRequired: Select the Rating Area IDRequire: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired: Select the age of a subscriber eligible for the rateRequired: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired: Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0050002	Rating Area 6	Tobacco User/Non-Tobacco User	35	496.02	508.42
	Rating Area 6	Tobacco User/Non-Tobacco User	36	499.27	511.75
	Rating Area 6	Tobacco User/Non-Tobacco User	37	502.52	515.08
	Rating Area 6	Tobacco User/Non-Tobacco User	38	505.76	518.41
	Rating Area 6	Tobacco User/Non-Tobacco User	39	512.26	525.06
	Rating Area 6	Tobacco User/Non-Tobacco User	40	518.75	557.66
	Rating Area 6	Tobacco User/Non-Tobacco User	41	528.49	568.13
	Rating Area 6	Tobacco User/Non-Tobacco User	42	537.83	578.17
	Rating Area 6	Tobacco User/Non-Tobacco User	43	550.82	592.13
	Rating Area 6	Tobacco User/Non-Tobacco User	44	567.06	609.59
	Rating Area 6	Tobacco User/Non-Tobacco User	45	586.13	644.75
	Rating Area 6	Tobacco User/Non-Tobacco User	46	608.86	669.75
	Rating Area 6	Tobacco User/Non-Tobacco User	47	634.44	697.88
	Rating Area 6	Tobacco User/Non-Tobacco User	48	663.66	730.03
	Rating Area 6	Tobacco User/Non-Tobacco User	49	692.48	761.73
	Rating Area 6	Tobacco User/Non-Tobacco User	50	724.96	833.70
	Rating Area 6	Tobacco User/Non-Tobacco User	51	757.02	870.58
	Rating Area 6	Tobacco User/Non-Tobacco User	52	792.34	911.19
	Rating Area 6	Tobacco User/Non-Tobacco User	53	828.06	952.26
	Rating Area 6	Tobacco User/Non-Tobacco User	54	866.62	996.61
	Rating Area 6	Tobacco User/Non-Tobacco User	55	905.18	1086.22

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0050002	Rating Area 6	Tobacco User/Non-Tobacco User	56	946.99	1136.39
	Rating Area 6	Tobacco User/Non-Tobacco User	57	989.20	1187.04
	Rating Area 6	Tobacco User/Non-Tobacco User	58	1034.26	1241.11
	Rating Area 6	Tobacco User/Non-Tobacco User	59	1056.58	1267.90
	Rating Area 6	Tobacco User/Non-Tobacco User	60	1101.64	1377.05
	Rating Area 6	Tobacco User/Non-Tobacco User	61	1140.61	1425.76
	Rating Area 6	Tobacco User/Non-Tobacco User	62	1166.18	1457.72
	Rating Area 6	Tobacco User/Non-Tobacco User	63	1198.25	1497.81
	Rating Area 6	Tobacco User/Non-Tobacco User	64	1217.72	1522.16
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	1217.72	1522.16
53789PA0050002	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	260.33	260.33
53789PA0050002	Rating Area 7	Tobacco User/Non-Tobacco User	21	409.97	420.22
	Rating Area 7	Tobacco User/Non-Tobacco User	22	409.97	420.22
	Rating Area 7	Tobacco User/Non-Tobacco User	23	409.97	420.22
	Rating Area 7	Tobacco User/Non-Tobacco User	24	409.97	420.22
	Rating Area 7	Tobacco User/Non-Tobacco User	25	411.61	421.90
	Rating Area 7	Tobacco User/Non-Tobacco User	26	419.81	430.30
	Rating Area 7	Tobacco User/Non-Tobacco User	27	429.65	440.39
	Rating Area 7	Tobacco User/Non-Tobacco User	28	445.64	456.78
	Rating Area 7	Tobacco User/Non-Tobacco User	29	458.76	470.22
	Rating Area 7	Tobacco User/Non-Tobacco User	30	465.31	476.95

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	31	475.15	487.03
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	32	484.99	497.12
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	33	491.14	503.42
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	34	497.70	510.15
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	35	500.98	513.51
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	36	504.26	516.87
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	37	507.54	520.23
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	38	510.82	523.59
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	39	517.38	530.32
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	40	523.94	563.24
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	41	533.78	573.81
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	42	543.21	583.95
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	43	556.33	598.05
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	44	572.73	615.68
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	45	592.00	651.19
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	46	614.95	676.45
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	47	640.78	704.86
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	48	670.30	737.33
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	49	699.41	769.35
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	50	732.20	842.04
53789PA0050002 Rating Area 7		Tobacco User/Non-Tobacco User	51	764.59	879.28

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0050002	Rating Area 7	Tobacco User/Non-Tobacco User	52	800.26	920.30
	Rating Area 7	Tobacco User/Non-Tobacco User	53	836.34	961.79
	Rating Area 7	Tobacco User/Non-Tobacco User	54	875.28	1006.58
	Rating Area 7	Tobacco User/Non-Tobacco User	55	914.23	1097.08
	Rating Area 7	Tobacco User/Non-Tobacco User	56	956.46	1147.75
	Rating Area 7	Tobacco User/Non-Tobacco User	57	999.09	1198.91
	Rating Area 7	Tobacco User/Non-Tobacco User	58	1044.60	1253.52
	Rating Area 7	Tobacco User/Non-Tobacco User	59	1067.15	1280.58
	Rating Area 7	Tobacco User/Non-Tobacco User	60	1112.66	1390.82
	Rating Area 7	Tobacco User/Non-Tobacco User	61	1152.01	1440.02
	Rating Area 7	Tobacco User/Non-Tobacco User	62	1177.84	1472.30
	Rating Area 7	Tobacco User/Non-Tobacco User	63	1210.23	1512.79
	Rating Area 7	Tobacco User/Non-Tobacco User	64	1229.90	1537.38
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	1229.90	1537.38
53789PA0050002	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	255.18	255.18
53789PA0050002	Rating Area 9	Tobacco User/Non-Tobacco User	21	401.85	411.90
	Rating Area 9	Tobacco User/Non-Tobacco User	22	401.85	411.90
	Rating Area 9	Tobacco User/Non-Tobacco User	23	401.85	411.90
	Rating Area 9	Tobacco User/Non-Tobacco User	24	401.85	411.90
	Rating Area 9	Tobacco User/Non-Tobacco User	25	403.46	413.54
	Rating Area 9	Tobacco User/Non-Tobacco User	26	411.50	421.78

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0050002	Rating Area 9	Tobacco User/Non-Tobacco User	27	421.14	431.67
	Rating Area 9	Tobacco User/Non-Tobacco User	28	436.81	447.73
	Rating Area 9	Tobacco User/Non-Tobacco User	29	449.67	460.91
	Rating Area 9	Tobacco User/Non-Tobacco User	30	456.10	467.50
	Rating Area 9	Tobacco User/Non-Tobacco User	31	465.75	477.39
	Rating Area 9	Tobacco User/Non-Tobacco User	32	475.39	487.27
	Rating Area 9	Tobacco User/Non-Tobacco User	33	481.42	493.45
	Rating Area 9	Tobacco User/Non-Tobacco User	34	487.85	500.04
	Rating Area 9	Tobacco User/Non-Tobacco User	35	491.06	503.34
	Rating Area 9	Tobacco User/Non-Tobacco User	36	494.28	506.63
	Rating Area 9	Tobacco User/Non-Tobacco User	37	497.49	509.93
	Rating Area 9	Tobacco User/Non-Tobacco User	38	500.71	513.22
	Rating Area 9	Tobacco User/Non-Tobacco User	39	507.14	519.81
	Rating Area 9	Tobacco User/Non-Tobacco User	40	513.57	552.08
	Rating Area 9	Tobacco User/Non-Tobacco User	41	523.21	562.45
	Rating Area 9	Tobacco User/Non-Tobacco User	42	532.45	572.39
	Rating Area 9	Tobacco User/Non-Tobacco User	43	545.31	586.21
	Rating Area 9	Tobacco User/Non-Tobacco User	44	561.39	603.49
	Rating Area 9	Tobacco User/Non-Tobacco User	45	580.27	638.30
	Rating Area 9	Tobacco User/Non-Tobacco User	46	602.78	663.05
	Rating Area 9	Tobacco User/Non-Tobacco User	47	628.09	690.90

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0050002	Rating Area 9	Tobacco User/Non-Tobacco User	48	657.03	722.73
	Rating Area 9	Tobacco User/Non-Tobacco User	49	685.56	754.11
	Rating Area 9	Tobacco User/Non-Tobacco User	50	717.71	825.36
	Rating Area 9	Tobacco User/Non-Tobacco User	51	749.45	861.87
	Rating Area 9	Tobacco User/Non-Tobacco User	52	784.41	902.07
	Rating Area 9	Tobacco User/Non-Tobacco User	53	819.78	942.74
	Rating Area 9	Tobacco User/Non-Tobacco User	54	857.95	986.64
	Rating Area 9	Tobacco User/Non-Tobacco User	55	896.13	1075.35
	Rating Area 9	Tobacco User/Non-Tobacco User	56	937.52	1125.02
	Rating Area 9	Tobacco User/Non-Tobacco User	57	979.31	1175.17
	Rating Area 9	Tobacco User/Non-Tobacco User	58	1023.92	1228.70
	Rating Area 9	Tobacco User/Non-Tobacco User	59	1046.02	1255.22
	Rating Area 9	Tobacco User/Non-Tobacco User	60	1090.62	1363.28
	Rating Area 9	Tobacco User/Non-Tobacco User	61	1129.20	1411.50
	Rating Area 9	Tobacco User/Non-Tobacco User	62	1154.52	1443.15
	Rating Area 9	Tobacco User/Non-Tobacco User	63	1186.26	1482.83
	Rating Area 9	Tobacco User/Non-Tobacco User	64	1205.54	1506.94
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	1205.54	1506.94
53789PA0060001	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	209.19	209.19
53789PA0060001	Rating Area 6	Tobacco User/Non-Tobacco User	21	329.43	337.67
53789PA0060001	Rating Area 6	Tobacco User/Non-Tobacco User	22	329.43	337.67

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0060001	Rating Area 6	Tobacco User/Non-Tobacco User	23	329.43	337.67
	Rating Area 6	Tobacco User/Non-Tobacco User	24	329.43	337.67
	Rating Area 6	Tobacco User/Non-Tobacco User	25	330.75	339.02
	Rating Area 6	Tobacco User/Non-Tobacco User	26	337.34	345.77
	Rating Area 6	Tobacco User/Non-Tobacco User	27	345.24	353.87
	Rating Area 6	Tobacco User/Non-Tobacco User	28	358.09	367.04
	Rating Area 6	Tobacco User/Non-Tobacco User	29	368.63	377.85
	Rating Area 6	Tobacco User/Non-Tobacco User	30	373.90	383.25
	Rating Area 6	Tobacco User/Non-Tobacco User	31	381.81	391.35
	Rating Area 6	Tobacco User/Non-Tobacco User	32	389.72	399.46
	Rating Area 6	Tobacco User/Non-Tobacco User	33	394.66	404.52
	Rating Area 6	Tobacco User/Non-Tobacco User	34	399.93	409.93
	Rating Area 6	Tobacco User/Non-Tobacco User	35	402.56	412.63
	Rating Area 6	Tobacco User/Non-Tobacco User	36	405.20	415.33
	Rating Area 6	Tobacco User/Non-Tobacco User	37	407.83	418.03
	Rating Area 6	Tobacco User/Non-Tobacco User	38	410.47	420.73
	Rating Area 6	Tobacco User/Non-Tobacco User	39	415.74	426.13
	Rating Area 6	Tobacco User/Non-Tobacco User	40	421.01	452.59
	Rating Area 6	Tobacco User/Non-Tobacco User	41	428.92	461.09
	Rating Area 6	Tobacco User/Non-Tobacco User	42	436.49	469.23
53789PA0060001	Rating Area 6	Tobacco User/Non-Tobacco User	43	447.04	480.56

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0060001	Rating Area 6	Tobacco User/Non-Tobacco User	44	460.21	494.73
	Rating Area 6	Tobacco User/Non-Tobacco User	45	475.70	523.27
	Rating Area 6	Tobacco User/Non-Tobacco User	46	494.14	543.56
	Rating Area 6	Tobacco User/Non-Tobacco User	47	514.90	566.39
	Rating Area 6	Tobacco User/Non-Tobacco User	48	538.62	592.48
	Rating Area 6	Tobacco User/Non-Tobacco User	49	562.01	618.21
	Rating Area 6	Tobacco User/Non-Tobacco User	50	588.36	676.62
	Rating Area 6	Tobacco User/Non-Tobacco User	51	614.39	706.54
	Rating Area 6	Tobacco User/Non-Tobacco User	52	643.05	739.50
	Rating Area 6	Tobacco User/Non-Tobacco User	53	672.04	772.84
	Rating Area 6	Tobacco User/Non-Tobacco User	54	703.33	808.83
	Rating Area 6	Tobacco User/Non-Tobacco User	55	734.63	881.55
	Rating Area 6	Tobacco User/Non-Tobacco User	56	768.56	922.27
	Rating Area 6	Tobacco User/Non-Tobacco User	57	802.82	963.39
	Rating Area 6	Tobacco User/Non-Tobacco User	58	839.39	1007.27
	Rating Area 6	Tobacco User/Non-Tobacco User	59	857.51	1029.01
	Rating Area 6	Tobacco User/Non-Tobacco User	60	894.07	1117.59
	Rating Area 6	Tobacco User/Non-Tobacco User	61	925.70	1157.12
	Rating Area 6	Tobacco User/Non-Tobacco User	62	946.45	1183.07
	Rating Area 6	Tobacco User/Non-Tobacco User	63	972.48	1215.60
	Rating Area 6	Tobacco User/Non-Tobacco User	64	988.28	1235.36

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
<div><div>Plan ID*</div><div>Required: Enter the 14-character Plan ID</div></div> <div><div>Rating Area ID*</div><div>Required: Select the Rating Area ID</div></div> <div><div>Tobacco*</div><div>Require: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan</div></div> <div><div>Age*</div><div>Required: Select the age of a subscriber eligible for the rate</div></div> <div><div>Individual Rate*</div><div>Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan</div></div> <div><div>Individual Tobacco Rate*</div><div>Required: Enter the rate of an Individual tobacco enrollee on a plan</div></div>					
53789PA0060001	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	988.28	1235.36
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	211.28	211.28
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	21	332.72	341.04
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	22	332.72	341.04
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	23	332.72	341.04
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	24	332.72	341.04
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	25	334.06	342.41
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	26	340.71	349.23
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	27	348.70	357.41
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	28	361.67	370.71
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	29	372.32	381.63
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	30	377.64	387.08
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	31	385.63	395.27
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	32	393.61	403.45
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	33	398.60	408.57
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	34	403.93	414.03
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	35	406.59	416.75
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	36	409.25	419.48
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	37	411.91	422.21
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	38	414.57	424.94
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	39	419.90	430.40

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	40	425.22	457.11
	Rating Area 7	Tobacco User/Non-Tobacco User	41	433.21	465.70
	Rating Area 7	Tobacco User/Non-Tobacco User	42	440.86	473.92
	Rating Area 7	Tobacco User/Non-Tobacco User	43	451.51	485.37
	Rating Area 7	Tobacco User/Non-Tobacco User	44	464.82	499.68
	Rating Area 7	Tobacco User/Non-Tobacco User	45	480.45	528.50
	Rating Area 7	Tobacco User/Non-Tobacco User	46	499.09	549.00
	Rating Area 7	Tobacco User/Non-Tobacco User	47	520.05	572.05
	Rating Area 7	Tobacco User/Non-Tobacco User	48	544.00	598.40
	Rating Area 7	Tobacco User/Non-Tobacco User	49	567.63	624.39
	Rating Area 7	Tobacco User/Non-Tobacco User	50	594.25	683.38
	Rating Area 7	Tobacco User/Non-Tobacco User	51	620.53	713.61
	Rating Area 7	Tobacco User/Non-Tobacco User	52	649.48	746.90
	Rating Area 7	Tobacco User/Non-Tobacco User	53	678.76	780.57
	Rating Area 7	Tobacco User/Non-Tobacco User	54	710.37	816.92
	Rating Area 7	Tobacco User/Non-Tobacco User	55	741.98	890.37
	Rating Area 7	Tobacco User/Non-Tobacco User	56	776.25	931.49
	Rating Area 7	Tobacco User/Non-Tobacco User	57	810.85	973.02
	Rating Area 7	Tobacco User/Non-Tobacco User	58	847.78	1017.34
	Rating Area 7	Tobacco User/Non-Tobacco User	59	866.08	1039.30
	Rating Area 7	Tobacco User/Non-Tobacco User	60	903.01	1128.77

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0060001	Rating Area 7	Tobacco User/Non-Tobacco User	61	934.96	1168.69
	Rating Area 7	Tobacco User/Non-Tobacco User	62	955.92	1194.90
	Rating Area 7	Tobacco User/Non-Tobacco User	63	982.20	1227.75
	Rating Area 7	Tobacco User/Non-Tobacco User	64	998.16	1247.72
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	998.16	1247.72
53789PA0060001	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	207.10	207.10
53789PA0060001	Rating Area 9	Tobacco User/Non-Tobacco User	21	326.14	334.29
	Rating Area 9	Tobacco User/Non-Tobacco User	22	326.14	334.29
	Rating Area 9	Tobacco User/Non-Tobacco User	23	326.14	334.29
	Rating Area 9	Tobacco User/Non-Tobacco User	24	326.14	334.29
	Rating Area 9	Tobacco User/Non-Tobacco User	25	327.44	335.63
	Rating Area 9	Tobacco User/Non-Tobacco User	26	333.96	342.31
	Rating Area 9	Tobacco User/Non-Tobacco User	27	341.79	350.33
	Rating Area 9	Tobacco User/Non-Tobacco User	28	354.51	363.37
	Rating Area 9	Tobacco User/Non-Tobacco User	29	364.95	374.07
	Rating Area 9	Tobacco User/Non-Tobacco User	30	370.16	379.42
	Rating Area 9	Tobacco User/Non-Tobacco User	31	377.99	387.44
	Rating Area 9	Tobacco User/Non-Tobacco User	32	385.82	395.46
	Rating Area 9	Tobacco User/Non-Tobacco User	33	390.71	400.48
	Rating Area 9	Tobacco User/Non-Tobacco User	34	395.93	405.83
	Rating Area 9	Tobacco User/Non-Tobacco User	35	398.54	408.50

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0060001	Rating Area 9	Tobacco User/Non-Tobacco User	36	401.15	411.18
	Rating Area 9	Tobacco User/Non-Tobacco User	37	403.76	413.85
	Rating Area 9	Tobacco User/Non-Tobacco User	38	406.37	416.52
	Rating Area 9	Tobacco User/Non-Tobacco User	39	411.58	421.87
	Rating Area 9	Tobacco User/Non-Tobacco User	40	416.80	448.06
	Rating Area 9	Tobacco User/Non-Tobacco User	41	424.63	456.48
	Rating Area 9	Tobacco User/Non-Tobacco User	42	432.13	464.54
	Rating Area 9	Tobacco User/Non-Tobacco User	43	442.57	475.76
	Rating Area 9	Tobacco User/Non-Tobacco User	44	455.61	489.78
	Rating Area 9	Tobacco User/Non-Tobacco User	45	470.94	518.03
	Rating Area 9	Tobacco User/Non-Tobacco User	46	489.20	538.12
	Rating Area 9	Tobacco User/Non-Tobacco User	47	509.75	560.73
	Rating Area 9	Tobacco User/Non-Tobacco User	48	533.23	586.56
	Rating Area 9	Tobacco User/Non-Tobacco User	49	556.39	612.03
	Rating Area 9	Tobacco User/Non-Tobacco User	50	582.48	669.85
	Rating Area 9	Tobacco User/Non-Tobacco User	51	608.24	699.48
	Rating Area 9	Tobacco User/Non-Tobacco User	52	636.62	732.11
	Rating Area 9	Tobacco User/Non-Tobacco User	53	665.32	765.11
	Rating Area 9	Tobacco User/Non-Tobacco User	54	696.30	800.74
	Rating Area 9	Tobacco User/Non-Tobacco User	55	727.28	872.74
	Rating Area 9	Tobacco User/Non-Tobacco User	56	760.87	913.05

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0060001	Rating Area 9	Tobacco User/Non-Tobacco User	57	794.79	953.75
	Rating Area 9	Tobacco User/Non-Tobacco User	58	830.99	997.19
	Rating Area 9	Tobacco User/Non-Tobacco User	59	848.93	1018.72
	Rating Area 9	Tobacco User/Non-Tobacco User	60	885.13	1106.42
	Rating Area 9	Tobacco User/Non-Tobacco User	61	916.44	1145.55
	Rating Area 9	Tobacco User/Non-Tobacco User	62	936.99	1171.23
	Rating Area 9	Tobacco User/Non-Tobacco User	63	962.75	1203.44
	Rating Area 9	Tobacco User/Non-Tobacco User	64	978.41	1223.01
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	978.41	1223.01
53789PA0100004	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	103.32	103.32
53789PA0100004	Rating Area 6	Tobacco User/Non-Tobacco User	21	162.71	166.78
	Rating Area 6	Tobacco User/Non-Tobacco User	22	162.71	166.78
	Rating Area 6	Tobacco User/Non-Tobacco User	23	162.71	166.78
	Rating Area 6	Tobacco User/Non-Tobacco User	24	162.71	166.78
	Rating Area 6	Tobacco User/Non-Tobacco User	25	163.36	167.44
	Rating Area 6	Tobacco User/Non-Tobacco User	26	166.62	170.78
	Rating Area 6	Tobacco User/Non-Tobacco User	27	170.52	174.78
	Rating Area 6	Tobacco User/Non-Tobacco User	28	176.87	181.29
	Rating Area 6	Tobacco User/Non-Tobacco User	29	182.07	186.62
	Rating Area 6	Tobacco User/Non-Tobacco User	30	184.68	189.29
	Rating Area 6	Tobacco User/Non-Tobacco User	31	188.58	193.30

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Required:Require:Required:Required:Required: Enter the 14-character Plan IDSelect the Rating Area IDSelect if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planSelect the age of a subscriber eligible for the rateEnter the rate of an Individual Non-Tobacco or No Preference enrollee on a planEnter the rate of an Individual tobacco enrollee on a plan					
53789PA0100004	Rating Area 6	Tobacco User/Non-Tobacco User	32	192.49	197.30
	Rating Area 6	Tobacco User/Non-Tobacco User	33	194.93	199.80
	Rating Area 6	Tobacco User/Non-Tobacco User	34	197.53	202.47
	Rating Area 6	Tobacco User/Non-Tobacco User	35	198.83	203.80
	Rating Area 6	Tobacco User/Non-Tobacco User	36	200.13	205.14
	Rating Area 6	Tobacco User/Non-Tobacco User	37	201.43	206.47
	Rating Area 6	Tobacco User/Non-Tobacco User	38	202.74	207.81
	Rating Area 6	Tobacco User/Non-Tobacco User	39	205.34	210.47
	Rating Area 6	Tobacco User/Non-Tobacco User	40	207.94	223.54
	Rating Area 6	Tobacco User/Non-Tobacco User	41	211.85	227.74
	Rating Area 6	Tobacco User/Non-Tobacco User	42	215.59	231.76
	Rating Area 6	Tobacco User/Non-Tobacco User	43	220.80	237.36
	Rating Area 6	Tobacco User/Non-Tobacco User	44	227.31	244.35
	Rating Area 6	Tobacco User/Non-Tobacco User	45	234.95	258.45
	Rating Area 6	Tobacco User/Non-Tobacco User	46	244.06	268.47
	Rating Area 6	Tobacco User/Non-Tobacco User	47	254.32	279.75
	Rating Area 6	Tobacco User/Non-Tobacco User	48	266.03	292.63
	Rating Area 6	Tobacco User/Non-Tobacco User	49	277.58	305.34
	Rating Area 6	Tobacco User/Non-Tobacco User	50	290.60	334.19
	Rating Area 6	Tobacco User/Non-Tobacco User	51	303.45	348.97
	Rating Area 6	Tobacco User/Non-Tobacco User	52	317.61	365.25

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100004	Rating Area 6	Tobacco User/Non-Tobacco User	53	331.93	381.72
	Rating Area 6	Tobacco User/Non-Tobacco User	54	347.39	399.49
	Rating Area 6	Tobacco User/Non-Tobacco User	55	362.84	435.41
	Rating Area 6	Tobacco User/Non-Tobacco User	56	379.60	455.52
	Rating Area 6	Tobacco User/Non-Tobacco User	57	396.52	475.83
	Rating Area 6	Tobacco User/Non-Tobacco User	58	414.59	497.50
	Rating Area 6	Tobacco User/Non-Tobacco User	59	423.53	508.24
	Rating Area 6	Tobacco User/Non-Tobacco User	60	441.59	551.99
	Rating Area 6	Tobacco User/Non-Tobacco User	61	457.22	571.52
	Rating Area 6	Tobacco User/Non-Tobacco User	62	467.47	584.33
	Rating Area 6	Tobacco User/Non-Tobacco User	63	480.32	600.40
	Rating Area 6	Tobacco User/Non-Tobacco User	64	488.12	610.16
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	488.12	610.16
53789PA0100004	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	104.35	104.35
53789PA0100004	Rating Area 7	Tobacco User/Non-Tobacco User	21	164.34	168.45
	Rating Area 7	Tobacco User/Non-Tobacco User	22	164.34	168.45
	Rating Area 7	Tobacco User/Non-Tobacco User	23	164.34	168.45
	Rating Area 7	Tobacco User/Non-Tobacco User	24	164.34	168.45
	Rating Area 7	Tobacco User/Non-Tobacco User	25	164.99	169.12
	Rating Area 7	Tobacco User/Non-Tobacco User	26	168.28	172.49
	Rating Area 7	Tobacco User/Non-Tobacco User	27	172.23	176.53

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	28	178.63	183.10
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	29	183.89	188.49
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	30	186.52	191.19
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	31	190.47	195.23
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	32	194.41	199.27
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	33	196.88	201.80
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	34	199.51	204.49
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	35	200.82	205.84
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	36	202.13	207.19
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	37	203.45	208.54
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	38	204.76	209.88
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	39	207.39	212.58
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	40	210.02	225.77
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	41	213.97	230.01
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	42	217.75	234.08
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	43	223.01	239.73
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	44	229.58	246.80
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	45	237.30	261.03
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	46	246.51	271.16
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	47	256.86	282.54
53789PA0100004 Rating Area 7		Tobacco User/Non-Tobacco User	48	268.69	295.56

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100004	Rating Area 7	Tobacco User/Non-Tobacco User	49	280.36	308.40
	Rating Area 7	Tobacco User/Non-Tobacco User	50	293.51	337.53
	Rating Area 7	Tobacco User/Non-Tobacco User	51	306.49	352.46
	Rating Area 7	Tobacco User/Non-Tobacco User	52	320.79	368.90
	Rating Area 7	Tobacco User/Non-Tobacco User	53	335.25	385.53
	Rating Area 7	Tobacco User/Non-Tobacco User	54	350.86	403.49
	Rating Area 7	Tobacco User/Non-Tobacco User	55	366.47	439.77
	Rating Area 7	Tobacco User/Non-Tobacco User	56	383.40	460.08
	Rating Area 7	Tobacco User/Non-Tobacco User	57	400.49	480.59
	Rating Area 7	Tobacco User/Non-Tobacco User	58	418.73	502.48
	Rating Area 7	Tobacco User/Non-Tobacco User	59	427.77	513.32
	Rating Area 7	Tobacco User/Non-Tobacco User	60	446.01	557.51
	Rating Area 7	Tobacco User/Non-Tobacco User	61	461.79	577.23
	Rating Area 7	Tobacco User/Non-Tobacco User	62	472.14	590.18
	Rating Area 7	Tobacco User/Non-Tobacco User	63	485.12	606.40
	Rating Area 7	Tobacco User/Non-Tobacco User	64	493.01	616.26
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	493.01	616.26
53789PA0100004	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	102.29	102.29
53789PA0100004	Rating Area 9	Tobacco User/Non-Tobacco User	21	161.08	165.11
	Rating Area 9	Tobacco User/Non-Tobacco User	22	161.08	165.11
	Rating Area 9	Tobacco User/Non-Tobacco User	23	161.08	165.11

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100004	Rating Area 9	Tobacco User/Non-Tobacco User	24	161.08	165.11
	Rating Area 9	Tobacco User/Non-Tobacco User	25	161.73	165.77
	Rating Area 9	Tobacco User/Non-Tobacco User	26	164.95	169.07
	Rating Area 9	Tobacco User/Non-Tobacco User	27	168.81	173.04
	Rating Area 9	Tobacco User/Non-Tobacco User	28	175.10	179.47
	Rating Area 9	Tobacco User/Non-Tobacco User	29	180.25	184.76
	Rating Area 9	Tobacco User/Non-Tobacco User	30	182.83	187.40
	Rating Area 9	Tobacco User/Non-Tobacco User	31	186.70	191.36
	Rating Area 9	Tobacco User/Non-Tobacco User	32	190.56	195.33
	Rating Area 9	Tobacco User/Non-Tobacco User	33	192.98	197.80
	Rating Area 9	Tobacco User/Non-Tobacco User	34	195.55	200.44
	Rating Area 9	Tobacco User/Non-Tobacco User	35	196.84	201.76
	Rating Area 9	Tobacco User/Non-Tobacco User	36	198.13	203.09
	Rating Area 9	Tobacco User/Non-Tobacco User	37	199.42	204.41
	Rating Area 9	Tobacco User/Non-Tobacco User	38	200.71	205.73
	Rating Area 9	Tobacco User/Non-Tobacco User	39	203.29	208.37
	Rating Area 9	Tobacco User/Non-Tobacco User	40	205.86	221.30
	Rating Area 9	Tobacco User/Non-Tobacco User	41	209.73	225.46
	Rating Area 9	Tobacco User/Non-Tobacco User	42	213.43	229.44
	Rating Area 9	Tobacco User/Non-Tobacco User	43	218.59	234.98
	Rating Area 9	Tobacco User/Non-Tobacco User	44	225.03	241.91

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100004	Rating Area 9	Tobacco User/Non-Tobacco User	45	232.60	255.86
	Rating Area 9	Tobacco User/Non-Tobacco User	46	241.62	265.79
	Rating Area 9	Tobacco User/Non-Tobacco User	47	251.77	276.95
	Rating Area 9	Tobacco User/Non-Tobacco User	48	263.37	289.71
	Rating Area 9	Tobacco User/Non-Tobacco User	49	274.81	302.29
	Rating Area 9	Tobacco User/Non-Tobacco User	50	287.69	330.85
	Rating Area 9	Tobacco User/Non-Tobacco User	51	300.42	345.48
	Rating Area 9	Tobacco User/Non-Tobacco User	52	314.43	361.60
	Rating Area 9	Tobacco User/Non-Tobacco User	53	328.61	377.90
	Rating Area 9	Tobacco User/Non-Tobacco User	54	343.91	395.50
	Rating Area 9	Tobacco User/Non-Tobacco User	55	359.21	431.06
	Rating Area 9	Tobacco User/Non-Tobacco User	56	375.81	450.97
	Rating Area 9	Tobacco User/Non-Tobacco User	57	392.56	471.07
	Rating Area 9	Tobacco User/Non-Tobacco User	58	410.44	492.53
	Rating Area 9	Tobacco User/Non-Tobacco User	59	419.30	503.16
	Rating Area 9	Tobacco User/Non-Tobacco User	60	437.18	546.47
	Rating Area 9	Tobacco User/Non-Tobacco User	61	452.64	565.80
	Rating Area 9	Tobacco User/Non-Tobacco User	62	462.79	578.49
	Rating Area 9	Tobacco User/Non-Tobacco User	63	475.52	594.40
	Rating Area 9	Tobacco User/Non-Tobacco User	64	483.24	604.06
53789PA0100004	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	483.24	604.06

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	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
<div><div>Plan ID*</div><div>Rating Area ID*</div><div>Tobacco*</div><div>Age*</div><div>Individual Rate*</div><div>Individual Tobacco Rate*</div></div>					
<div><div>Required: Enter the 14-character Plan ID</div><div>Required: Select the Rating Area ID</div><div>Require: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan</div><div>Required: Select the age of a subscriber eligible for the rate</div><div>Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan</div><div>Required: Enter the rate of an Individual tobacco enrollee on a plan</div></div>					
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	203.83	203.83
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	21	320.99	329.01
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	22	320.99	329.01
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	23	320.99	329.01
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	24	320.99	329.01
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	25	322.27	330.33
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	26	328.69	336.91
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	27	336.40	344.81
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	28	348.92	357.64
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	29	359.19	368.17
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	30	364.32	373.43
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	31	372.03	381.33
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	32	379.73	389.22
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	33	384.55	394.16
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	34	389.68	399.42
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	35	392.25	402.06
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	36	394.82	404.69
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	37	397.39	407.32
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	38	399.95	409.95
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	39	405.09	415.22
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	40	410.23	440.99

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	41	417.93	449.27
	Rating Area 6	Tobacco User/Non-Tobacco User	42	425.31	457.21
	Rating Area 6	Tobacco User/Non-Tobacco User	43	435.58	468.25
	Rating Area 6	Tobacco User/Non-Tobacco User	44	448.42	482.05
	Rating Area 6	Tobacco User/Non-Tobacco User	45	463.51	509.86
	Rating Area 6	Tobacco User/Non-Tobacco User	46	481.48	529.63
	Rating Area 6	Tobacco User/Non-Tobacco User	47	501.71	551.88
	Rating Area 6	Tobacco User/Non-Tobacco User	48	524.82	577.30
	Rating Area 6	Tobacco User/Non-Tobacco User	49	547.61	602.37
	Rating Area 6	Tobacco User/Non-Tobacco User	50	573.29	659.28
	Rating Area 6	Tobacco User/Non-Tobacco User	51	598.65	688.44
	Rating Area 6	Tobacco User/Non-Tobacco User	52	626.57	720.56
	Rating Area 6	Tobacco User/Non-Tobacco User	53	654.82	753.04
	Rating Area 6	Tobacco User/Non-Tobacco User	54	685.31	788.11
	Rating Area 6	Tobacco User/Non-Tobacco User	55	715.81	858.97
	Rating Area 6	Tobacco User/Non-Tobacco User	56	748.87	898.64
	Rating Area 6	Tobacco User/Non-Tobacco User	57	782.25	938.70
	Rating Area 6	Tobacco User/Non-Tobacco User	58	817.88	981.46
	Rating Area 6	Tobacco User/Non-Tobacco User	59	835.54	1002.64
	Rating Area 6	Tobacco User/Non-Tobacco User	60	871.17	1088.96
	Rating Area 6	Tobacco User/Non-Tobacco User	61	901.98	1127.48

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100006	Rating Area 6	Tobacco User/Non-Tobacco User	62	922.20	1152.76
	Rating Area 6	Tobacco User/Non-Tobacco User	63	947.56	1184.45
	Rating Area 6	Tobacco User/Non-Tobacco User	64	962.96	1203.71
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	962.96	1203.71
53789PA0100006	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	205.87	205.87
53789PA0100006	Rating Area 7	Tobacco User/Non-Tobacco User	21	324.20	332.30
	Rating Area 7	Tobacco User/Non-Tobacco User	22	324.20	332.30
	Rating Area 7	Tobacco User/Non-Tobacco User	23	324.20	332.30
	Rating Area 7	Tobacco User/Non-Tobacco User	24	324.20	332.30
	Rating Area 7	Tobacco User/Non-Tobacco User	25	325.50	333.63
	Rating Area 7	Tobacco User/Non-Tobacco User	26	331.98	340.28
	Rating Area 7	Tobacco User/Non-Tobacco User	27	339.76	348.26
	Rating Area 7	Tobacco User/Non-Tobacco User	28	352.41	361.22
	Rating Area 7	Tobacco User/Non-Tobacco User	29	362.78	371.85
	Rating Area 7	Tobacco User/Non-Tobacco User	30	367.97	377.17
	Rating Area 7	Tobacco User/Non-Tobacco User	31	375.75	385.14
	Rating Area 7	Tobacco User/Non-Tobacco User	32	383.53	393.12
	Rating Area 7	Tobacco User/Non-Tobacco User	33	388.39	398.10
	Rating Area 7	Tobacco User/Non-Tobacco User	34	393.58	403.42
	Rating Area 7	Tobacco User/Non-Tobacco User	35	396.17	406.08
	Rating Area 7	Tobacco User/Non-Tobacco User	36	398.77	408.74

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	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0100006	Rating Area 7	Tobacco User/Non-Tobacco User	37	401.36	411.39
	Rating Area 7	Tobacco User/Non-Tobacco User	38	403.95	414.05
	Rating Area 7	Tobacco User/Non-Tobacco User	39	409.14	419.37
	Rating Area 7	Tobacco User/Non-Tobacco User	40	414.33	445.40
	Rating Area 7	Tobacco User/Non-Tobacco User	41	422.11	453.77
	Rating Area 7	Tobacco User/Non-Tobacco User	42	429.56	461.78
	Rating Area 7	Tobacco User/Non-Tobacco User	43	439.94	472.93
	Rating Area 7	Tobacco User/Non-Tobacco User	44	452.91	486.88
	Rating Area 7	Tobacco User/Non-Tobacco User	45	468.14	514.96
	Rating Area 7	Tobacco User/Non-Tobacco User	46	486.30	534.93
	Rating Area 7	Tobacco User/Non-Tobacco User	47	506.72	557.40
	Rating Area 7	Tobacco User/Non-Tobacco User	48	530.07	583.07
	Rating Area 7	Tobacco User/Non-Tobacco User	49	553.09	608.39
	Rating Area 7	Tobacco User/Non-Tobacco User	50	579.02	665.87
	Rating Area 7	Tobacco User/Non-Tobacco User	51	604.63	695.33
	Rating Area 7	Tobacco User/Non-Tobacco User	52	632.84	727.76
	Rating Area 7	Tobacco User/Non-Tobacco User	53	661.37	760.57
	Rating Area 7	Tobacco User/Non-Tobacco User	54	692.17	795.99
	Rating Area 7	Tobacco User/Non-Tobacco User	55	722.97	867.56
	Rating Area 7	Tobacco User/Non-Tobacco User	56	756.36	907.63
	Rating Area 7	Tobacco User/Non-Tobacco User	57	790.08	948.09

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0100006	Rating Area 7	Tobacco User/Non-Tobacco User	58	826.06	991.27
	Rating Area 7	Tobacco User/Non-Tobacco User	59	843.89	1012.67
	Rating Area 7	Tobacco User/Non-Tobacco User	60	879.88	1099.85
	Rating Area 7	Tobacco User/Non-Tobacco User	61	911.00	1138.75
	Rating Area 7	Tobacco User/Non-Tobacco User	62	931.43	1164.28
	Rating Area 7	Tobacco User/Non-Tobacco User	63	957.04	1196.30
	Rating Area 7	Tobacco User/Non-Tobacco User	64	972.59	1215.75
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	972.59	1215.75
53789PA0100006	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	201.79	201.79
53789PA0100006	Rating Area 9	Tobacco User/Non-Tobacco User	21	317.78	325.72
	Rating Area 9	Tobacco User/Non-Tobacco User	22	317.78	325.72
	Rating Area 9	Tobacco User/Non-Tobacco User	23	317.78	325.72
	Rating Area 9	Tobacco User/Non-Tobacco User	24	317.78	325.72
	Rating Area 9	Tobacco User/Non-Tobacco User	25	319.05	327.03
	Rating Area 9	Tobacco User/Non-Tobacco User	26	325.41	333.54
	Rating Area 9	Tobacco User/Non-Tobacco User	27	333.03	341.36
	Rating Area 9	Tobacco User/Non-Tobacco User	28	345.43	354.06
	Rating Area 9	Tobacco User/Non-Tobacco User	29	355.60	364.49
	Rating Area 9	Tobacco User/Non-Tobacco User	30	360.68	369.70
	Rating Area 9	Tobacco User/Non-Tobacco User	31	368.31	377.51
	Rating Area 9	Tobacco User/Non-Tobacco User	32	375.93	385.33

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100006	Rating Area 9	Tobacco User/Non-Tobacco User	33	380.70	390.22
	Rating Area 9	Tobacco User/Non-Tobacco User	34	385.79	395.43
	Rating Area 9	Tobacco User/Non-Tobacco User	35	388.33	398.04
	Rating Area 9	Tobacco User/Non-Tobacco User	36	390.87	400.64
	Rating Area 9	Tobacco User/Non-Tobacco User	37	393.41	403.25
	Rating Area 9	Tobacco User/Non-Tobacco User	38	395.95	405.85
	Rating Area 9	Tobacco User/Non-Tobacco User	39	401.04	411.06
	Rating Area 9	Tobacco User/Non-Tobacco User	40	406.12	436.58
	Rating Area 9	Tobacco User/Non-Tobacco User	41	413.75	444.78
	Rating Area 9	Tobacco User/Non-Tobacco User	42	421.06	452.64
	Rating Area 9	Tobacco User/Non-Tobacco User	43	431.23	463.57
	Rating Area 9	Tobacco User/Non-Tobacco User	44	443.94	477.23
	Rating Area 9	Tobacco User/Non-Tobacco User	45	458.87	504.76
	Rating Area 9	Tobacco User/Non-Tobacco User	46	476.67	524.34
	Rating Area 9	Tobacco User/Non-Tobacco User	47	496.69	546.36
	Rating Area 9	Tobacco User/Non-Tobacco User	48	519.57	571.53
	Rating Area 9	Tobacco User/Non-Tobacco User	49	542.13	596.35
	Rating Area 9	Tobacco User/Non-Tobacco User	50	567.56	652.69
	Rating Area 9	Tobacco User/Non-Tobacco User	51	592.66	681.56
	Rating Area 9	Tobacco User/Non-Tobacco User	52	620.31	713.35
	Rating Area 9	Tobacco User/Non-Tobacco User	53	648.27	745.51

HIOS Issuer ID*	53789				
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	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100006	Rating Area 9	Tobacco User/Non-Tobacco User	54	678.46	780.23
	Rating Area 9	Tobacco User/Non-Tobacco User	55	708.65	850.38
	Rating Area 9	Tobacco User/Non-Tobacco User	56	741.38	889.66
	Rating Area 9	Tobacco User/Non-Tobacco User	57	774.43	929.32
	Rating Area 9	Tobacco User/Non-Tobacco User	58	809.70	971.64
	Rating Area 9	Tobacco User/Non-Tobacco User	59	827.18	992.62
	Rating Area 9	Tobacco User/Non-Tobacco User	60	862.46	1078.07
	Rating Area 9	Tobacco User/Non-Tobacco User	61	892.96	1116.20
	Rating Area 9	Tobacco User/Non-Tobacco User	62	912.98	1141.23
	Rating Area 9	Tobacco User/Non-Tobacco User	63	938.09	1172.61
	Rating Area 9	Tobacco User/Non-Tobacco User	64	953.33	1191.68
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	953.33	1191.68
53789PA0100008	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	165.91	165.91
53789PA0100008	Rating Area 6	Tobacco User/Non-Tobacco User	21	261.27	267.80
	Rating Area 6	Tobacco User/Non-Tobacco User	22	261.27	267.80
	Rating Area 6	Tobacco User/Non-Tobacco User	23	261.27	267.80
	Rating Area 6	Tobacco User/Non-Tobacco User	24	261.27	267.80
	Rating Area 6	Tobacco User/Non-Tobacco User	25	262.32	268.87
	Rating Area 6	Tobacco User/Non-Tobacco User	26	267.54	274.23
	Rating Area 6	Tobacco User/Non-Tobacco User	27	273.81	280.66
	Rating Area 6	Tobacco User/Non-Tobacco User	28	284.00	291.10

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100008	Rating Area 6	Tobacco User/Non-Tobacco User	29	292.36	299.67
	Rating Area 6	Tobacco User/Non-Tobacco User	30	296.54	303.95
	Rating Area 6	Tobacco User/Non-Tobacco User	31	302.81	310.38
	Rating Area 6	Tobacco User/Non-Tobacco User	32	309.08	316.81
	Rating Area 6	Tobacco User/Non-Tobacco User	33	313.00	320.83
	Rating Area 6	Tobacco User/Non-Tobacco User	34	317.18	325.11
	Rating Area 6	Tobacco User/Non-Tobacco User	35	319.27	327.25
	Rating Area 6	Tobacco User/Non-Tobacco User	36	321.36	329.40
	Rating Area 6	Tobacco User/Non-Tobacco User	37	323.45	331.54
	Rating Area 6	Tobacco User/Non-Tobacco User	38	325.54	333.68
	Rating Area 6	Tobacco User/Non-Tobacco User	39	329.72	337.97
	Rating Area 6	Tobacco User/Non-Tobacco User	40	333.90	358.95
	Rating Area 6	Tobacco User/Non-Tobacco User	41	340.17	365.69
	Rating Area 6	Tobacco User/Non-Tobacco User	42	346.18	372.15
	Rating Area 6	Tobacco User/Non-Tobacco User	43	354.54	381.13
	Rating Area 6	Tobacco User/Non-Tobacco User	44	364.99	392.37
	Rating Area 6	Tobacco User/Non-Tobacco User	45	377.27	415.00
	Rating Area 6	Tobacco User/Non-Tobacco User	46	391.90	431.10
	Rating Area 6	Tobacco User/Non-Tobacco User	47	408.37	449.20
	Rating Area 6	Tobacco User/Non-Tobacco User	48	427.18	469.89
	Rating Area 6	Tobacco User/Non-Tobacco User	49	445.73	490.30

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100008	Rating Area 6	Tobacco User/Non-Tobacco User	50	466.63	536.62
	Rating Area 6	Tobacco User/Non-Tobacco User	51	487.27	560.36
	Rating Area 6	Tobacco User/Non-Tobacco User	52	510.00	586.50
	Rating Area 6	Tobacco User/Non-Tobacco User	53	532.99	612.94
	Rating Area 6	Tobacco User/Non-Tobacco User	54	557.81	641.48
	Rating Area 6	Tobacco User/Non-Tobacco User	55	582.63	699.16
	Rating Area 6	Tobacco User/Non-Tobacco User	56	609.54	731.45
	Rating Area 6	Tobacco User/Non-Tobacco User	57	636.71	764.06
	Rating Area 6	Tobacco User/Non-Tobacco User	58	665.72	798.86
	Rating Area 6	Tobacco User/Non-Tobacco User	59	680.09	816.10
	Rating Area 6	Tobacco User/Non-Tobacco User	60	709.09	886.36
	Rating Area 6	Tobacco User/Non-Tobacco User	61	734.17	917.71
	Rating Area 6	Tobacco User/Non-Tobacco User	62	750.63	938.29
	Rating Area 6	Tobacco User/Non-Tobacco User	63	771.27	964.09
	Rating Area 6	Tobacco User/Non-Tobacco User	64	783.80	979.76
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	783.80	979.76
53789PA0100008	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	167.57	167.57
53789PA0100008	Rating Area 7	Tobacco User/Non-Tobacco User	21	263.88	270.48
	Rating Area 7	Tobacco User/Non-Tobacco User	22	263.88	270.48
	Rating Area 7	Tobacco User/Non-Tobacco User	23	263.88	270.48
	Rating Area 7	Tobacco User/Non-Tobacco User	24	263.88	270.48

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0100008	Rating Area 7	Tobacco User/Non-Tobacco User	25	264.94	271.56
	Rating Area 7	Tobacco User/Non-Tobacco User	26	270.22	276.97
	Rating Area 7	Tobacco User/Non-Tobacco User	27	276.55	283.46
	Rating Area 7	Tobacco User/Non-Tobacco User	28	286.84	294.01
	Rating Area 7	Tobacco User/Non-Tobacco User	29	295.28	302.67
	Rating Area 7	Tobacco User/Non-Tobacco User	30	299.51	306.99
	Rating Area 7	Tobacco User/Non-Tobacco User	31	305.84	313.49
	Rating Area 7	Tobacco User/Non-Tobacco User	32	312.17	319.98
	Rating Area 7	Tobacco User/Non-Tobacco User	33	316.13	324.03
	Rating Area 7	Tobacco User/Non-Tobacco User	34	320.35	328.36
	Rating Area 7	Tobacco User/Non-Tobacco User	35	322.46	330.53
	Rating Area 7	Tobacco User/Non-Tobacco User	36	324.58	332.69
	Rating Area 7	Tobacco User/Non-Tobacco User	37	326.69	334.85
	Rating Area 7	Tobacco User/Non-Tobacco User	38	328.80	337.02
	Rating Area 7	Tobacco User/Non-Tobacco User	39	333.02	341.35
	Rating Area 7	Tobacco User/Non-Tobacco User	40	337.24	362.54
	Rating Area 7	Tobacco User/Non-Tobacco User	41	343.58	369.34
	Rating Area 7	Tobacco User/Non-Tobacco User	42	349.64	375.87
	Rating Area 7	Tobacco User/Non-Tobacco User	43	358.09	384.95
	Rating Area 7	Tobacco User/Non-Tobacco User	44	368.64	396.29
	Rating Area 7	Tobacco User/Non-Tobacco User	45	381.05	419.15

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100008	Rating Area 7	Tobacco User/Non-Tobacco User	46	395.82	435.41
	Rating Area 7	Tobacco User/Non-Tobacco User	47	412.45	453.69
	Rating Area 7	Tobacco User/Non-Tobacco User	48	431.45	474.59
	Rating Area 7	Tobacco User/Non-Tobacco User	49	450.18	495.20
	Rating Area 7	Tobacco User/Non-Tobacco User	50	471.29	541.99
	Rating Area 7	Tobacco User/Non-Tobacco User	51	492.14	565.96
	Rating Area 7	Tobacco User/Non-Tobacco User	52	515.10	592.36
	Rating Area 7	Tobacco User/Non-Tobacco User	53	538.32	619.07
	Rating Area 7	Tobacco User/Non-Tobacco User	54	563.39	647.90
	Rating Area 7	Tobacco User/Non-Tobacco User	55	588.46	706.15
	Rating Area 7	Tobacco User/Non-Tobacco User	56	615.64	738.77
	Rating Area 7	Tobacco User/Non-Tobacco User	57	643.08	771.70
	Rating Area 7	Tobacco User/Non-Tobacco User	58	672.37	806.85
	Rating Area 7	Tobacco User/Non-Tobacco User	59	686.89	824.26
	Rating Area 7	Tobacco User/Non-Tobacco User	60	716.18	895.22
	Rating Area 7	Tobacco User/Non-Tobacco User	61	741.51	926.89
	Rating Area 7	Tobacco User/Non-Tobacco User	62	758.13	947.67
	Rating Area 7	Tobacco User/Non-Tobacco User	63	778.98	973.73
	Rating Area 7	Tobacco User/Non-Tobacco User	64	791.64	989.56
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	791.64	989.56
53789PA0100008	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	164.25	164.25

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	21	258.66	265.12
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	22	258.66	265.12
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	23	258.66	265.12
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	24	258.66	265.12
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	25	259.69	266.18
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	26	264.87	271.49
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	27	271.07	277.85
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	28	281.16	288.19
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	29	289.44	296.67
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	30	293.58	300.92
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	31	299.78	307.28
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	32	305.99	313.64
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	33	309.87	317.62
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	34	314.01	321.86
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	35	316.08	323.98
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	36	318.15	326.10
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	37	320.22	328.22
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	38	322.29	330.34
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	39	326.43	334.59
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	40	330.56	355.36
53789PA0100008 Rating Area 9		Tobacco User/Non-Tobacco User	41	336.77	362.03

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100008	Rating Area 9	Tobacco User/Non-Tobacco User	42	342.72	368.42
	Rating Area 9	Tobacco User/Non-Tobacco User	43	351.00	377.32
	Rating Area 9	Tobacco User/Non-Tobacco User	44	361.34	388.45
	Rating Area 9	Tobacco User/Non-Tobacco User	45	373.50	410.85
	Rating Area 9	Tobacco User/Non-Tobacco User	46	387.99	426.78
	Rating Area 9	Tobacco User/Non-Tobacco User	47	404.28	444.71
	Rating Area 9	Tobacco User/Non-Tobacco User	48	422.90	465.20
	Rating Area 9	Tobacco User/Non-Tobacco User	49	441.27	485.40
	Rating Area 9	Tobacco User/Non-Tobacco User	50	461.96	531.26
	Rating Area 9	Tobacco User/Non-Tobacco User	51	482.40	554.76
	Rating Area 9	Tobacco User/Non-Tobacco User	52	504.90	580.63
	Rating Area 9	Tobacco User/Non-Tobacco User	53	527.66	606.81
	Rating Area 9	Tobacco User/Non-Tobacco User	54	552.23	635.07
	Rating Area 9	Tobacco User/Non-Tobacco User	55	576.81	692.17
	Rating Area 9	Tobacco User/Non-Tobacco User	56	603.45	724.14
	Rating Area 9	Tobacco User/Non-Tobacco User	57	630.35	756.42
	Rating Area 9	Tobacco User/Non-Tobacco User	58	659.06	790.87
	Rating Area 9	Tobacco User/Non-Tobacco User	59	673.28	807.94
	Rating Area 9	Tobacco User/Non-Tobacco User	60	702.00	877.49
	Rating Area 9	Tobacco User/Non-Tobacco User	61	726.83	908.53
	Rating Area 9	Tobacco User/Non-Tobacco User	62	743.12	928.90

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100008	Rating Area 9	Tobacco User/Non-Tobacco User	63	763.56	954.45
	Rating Area 9	Tobacco User/Non-Tobacco User	64	775.97	969.96
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	775.97	969.96
53789PA0100009	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	196.75	196.75
53789PA0100009	Rating Area 6	Tobacco User/Non-Tobacco User	21	309.84	317.59
	Rating Area 6	Tobacco User/Non-Tobacco User	22	309.84	317.59
	Rating Area 6	Tobacco User/Non-Tobacco User	23	309.84	317.59
	Rating Area 6	Tobacco User/Non-Tobacco User	24	309.84	317.59
	Rating Area 6	Tobacco User/Non-Tobacco User	25	311.08	318.86
	Rating Area 6	Tobacco User/Non-Tobacco User	26	317.28	325.21
	Rating Area 6	Tobacco User/Non-Tobacco User	27	324.71	332.83
	Rating Area 6	Tobacco User/Non-Tobacco User	28	336.80	345.22
	Rating Area 6	Tobacco User/Non-Tobacco User	29	346.71	355.38
	Rating Area 6	Tobacco User/Non-Tobacco User	30	351.67	360.46
	Rating Area 6	Tobacco User/Non-Tobacco User	31	359.10	368.08
	Rating Area 6	Tobacco User/Non-Tobacco User	32	366.54	375.70
	Rating Area 6	Tobacco User/Non-Tobacco User	33	371.19	380.47
	Rating Area 6	Tobacco User/Non-Tobacco User	34	376.15	385.55
	Rating Area 6	Tobacco User/Non-Tobacco User	35	378.62	388.09
	Rating Area 6	Tobacco User/Non-Tobacco User	36	381.10	390.63
	Rating Area 6	Tobacco User/Non-Tobacco User	37	383.58	393.17

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0100009	Rating Area 6	Tobacco User/Non-Tobacco User	38	386.06	395.71
	Rating Area 6	Tobacco User/Non-Tobacco User	39	391.02	400.79
	Rating Area 6	Tobacco User/Non-Tobacco User	40	395.98	425.67
	Rating Area 6	Tobacco User/Non-Tobacco User	41	403.41	433.67
	Rating Area 6	Tobacco User/Non-Tobacco User	42	410.54	441.33
	Rating Area 6	Tobacco User/Non-Tobacco User	43	420.45	451.99
	Rating Area 6	Tobacco User/Non-Tobacco User	44	432.85	465.31
	Rating Area 6	Tobacco User/Non-Tobacco User	45	447.41	492.15
	Rating Area 6	Tobacco User/Non-Tobacco User	46	464.76	511.24
	Rating Area 6	Tobacco User/Non-Tobacco User	47	484.28	532.71
	Rating Area 6	Tobacco User/Non-Tobacco User	48	506.59	557.25
	Rating Area 6	Tobacco User/Non-Tobacco User	49	528.59	581.45
	Rating Area 6	Tobacco User/Non-Tobacco User	50	553.37	636.38
	Rating Area 6	Tobacco User/Non-Tobacco User	51	577.85	664.53
	Rating Area 6	Tobacco User/Non-Tobacco User	52	604.81	695.53
	Rating Area 6	Tobacco User/Non-Tobacco User	53	632.07	726.88
	Rating Area 6	Tobacco User/Non-Tobacco User	54	661.51	760.73
	Rating Area 6	Tobacco User/Non-Tobacco User	55	690.94	829.13
	Rating Area 6	Tobacco User/Non-Tobacco User	56	722.86	867.43
	Rating Area 6	Tobacco User/Non-Tobacco User	57	755.08	906.10
	Rating Area 6	Tobacco User/Non-Tobacco User	58	789.47	947.37

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100009	Rating Area 6	Tobacco User/Non-Tobacco User	59	806.51	967.82
	Rating Area 6	Tobacco User/Non-Tobacco User	60	840.91	1051.13
	Rating Area 6	Tobacco User/Non-Tobacco User	61	870.65	1088.31
	Rating Area 6	Tobacco User/Non-Tobacco User	62	890.17	1112.71
	Rating Area 6	Tobacco User/Non-Tobacco User	63	914.65	1143.31
	Rating Area 6	Tobacco User/Non-Tobacco User	64	929.51	1161.90
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	929.51	1161.90
53789PA0100009	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	198.72	198.72
53789PA0100009	Rating Area 7	Tobacco User/Non-Tobacco User	21	312.94	320.76
	Rating Area 7	Tobacco User/Non-Tobacco User	22	312.94	320.76
	Rating Area 7	Tobacco User/Non-Tobacco User	23	312.94	320.76
	Rating Area 7	Tobacco User/Non-Tobacco User	24	312.94	320.76
	Rating Area 7	Tobacco User/Non-Tobacco User	25	314.19	322.04
	Rating Area 7	Tobacco User/Non-Tobacco User	26	320.45	328.46
	Rating Area 7	Tobacco User/Non-Tobacco User	27	327.96	336.16
	Rating Area 7	Tobacco User/Non-Tobacco User	28	340.16	348.67
	Rating Area 7	Tobacco User/Non-Tobacco User	29	350.18	358.93
	Rating Area 7	Tobacco User/Non-Tobacco User	30	355.19	364.06
	Rating Area 7	Tobacco User/Non-Tobacco User	31	362.70	371.76
	Rating Area 7	Tobacco User/Non-Tobacco User	32	370.21	379.46
	Rating Area 7	Tobacco User/Non-Tobacco User	33	374.90	384.27

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0100009	Rating Area 7	Tobacco User/Non-Tobacco User	34	379.91	389.40
	Rating Area 7	Tobacco User/Non-Tobacco User	35	382.41	391.97
	Rating Area 7	Tobacco User/Non-Tobacco User	36	384.91	394.54
	Rating Area 7	Tobacco User/Non-Tobacco User	37	387.42	397.10
	Rating Area 7	Tobacco User/Non-Tobacco User	38	389.92	399.67
	Rating Area 7	Tobacco User/Non-Tobacco User	39	394.93	404.80
	Rating Area 7	Tobacco User/Non-Tobacco User	40	399.94	429.93
	Rating Area 7	Tobacco User/Non-Tobacco User	41	407.45	438.00
	Rating Area 7	Tobacco User/Non-Tobacco User	42	414.64	445.74
	Rating Area 7	Tobacco User/Non-Tobacco User	43	424.66	456.51
	Rating Area 7	Tobacco User/Non-Tobacco User	44	437.17	469.96
	Rating Area 7	Tobacco User/Non-Tobacco User	45	451.88	497.07
	Rating Area 7	Tobacco User/Non-Tobacco User	46	469.41	516.35
	Rating Area 7	Tobacco User/Non-Tobacco User	47	489.12	538.03
	Rating Area 7	Tobacco User/Non-Tobacco User	48	511.65	562.82
	Rating Area 7	Tobacco User/Non-Tobacco User	49	533.87	587.26
	Rating Area 7	Tobacco User/Non-Tobacco User	50	558.91	642.74
	Rating Area 7	Tobacco User/Non-Tobacco User	51	583.63	671.17
	Rating Area 7	Tobacco User/Non-Tobacco User	52	610.86	702.48
	Rating Area 7	Tobacco User/Non-Tobacco User	53	638.39	734.15
	Rating Area 7	Tobacco User/Non-Tobacco User	54	668.12	768.34

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100009	Rating Area 7	Tobacco User/Non-Tobacco User	55	697.85	837.42
	Rating Area 7	Tobacco User/Non-Tobacco User	56	730.09	876.10
	Rating Area 7	Tobacco User/Non-Tobacco User	57	762.63	915.16
	Rating Area 7	Tobacco User/Non-Tobacco User	58	797.37	956.84
	Rating Area 7	Tobacco User/Non-Tobacco User	59	814.58	977.49
	Rating Area 7	Tobacco User/Non-Tobacco User	60	849.31	1061.64
	Rating Area 7	Tobacco User/Non-Tobacco User	61	879.36	1099.20
	Rating Area 7	Tobacco User/Non-Tobacco User	62	899.07	1123.84
	Rating Area 7	Tobacco User/Non-Tobacco User	63	923.79	1154.74
	Rating Area 7	Tobacco User/Non-Tobacco User	64	938.81	1173.52
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	938.81	1173.52
53789PA0100009	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	194.78	194.78
53789PA0100009	Rating Area 9	Tobacco User/Non-Tobacco User	21	306.74	314.41
	Rating Area 9	Tobacco User/Non-Tobacco User	22	306.74	314.41
	Rating Area 9	Tobacco User/Non-Tobacco User	23	306.74	314.41
	Rating Area 9	Tobacco User/Non-Tobacco User	24	306.74	314.41
	Rating Area 9	Tobacco User/Non-Tobacco User	25	307.97	315.67
	Rating Area 9	Tobacco User/Non-Tobacco User	26	314.10	321.96
	Rating Area 9	Tobacco User/Non-Tobacco User	27	321.47	329.50
	Rating Area 9	Tobacco User/Non-Tobacco User	28	333.43	341.76
	Rating Area 9	Tobacco User/Non-Tobacco User	29	343.24	351.82

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0100009	Rating Area 9	Tobacco User/Non-Tobacco User	30	348.15	356.86
	Rating Area 9	Tobacco User/Non-Tobacco User	31	355.51	364.40
	Rating Area 9	Tobacco User/Non-Tobacco User	32	362.88	371.95
	Rating Area 9	Tobacco User/Non-Tobacco User	33	367.48	376.66
	Rating Area 9	Tobacco User/Non-Tobacco User	34	372.38	381.69
	Rating Area 9	Tobacco User/Non-Tobacco User	35	374.84	384.21
	Rating Area 9	Tobacco User/Non-Tobacco User	36	377.29	386.72
	Rating Area 9	Tobacco User/Non-Tobacco User	37	379.75	389.24
	Rating Area 9	Tobacco User/Non-Tobacco User	38	382.20	391.76
	Rating Area 9	Tobacco User/Non-Tobacco User	39	387.11	396.79
	Rating Area 9	Tobacco User/Non-Tobacco User	40	392.02	421.42
	Rating Area 9	Tobacco User/Non-Tobacco User	41	399.38	429.33
	Rating Area 9	Tobacco User/Non-Tobacco User	42	406.43	436.92
	Rating Area 9	Tobacco User/Non-Tobacco User	43	416.25	447.47
	Rating Area 9	Tobacco User/Non-Tobacco User	44	428.52	460.66
	Rating Area 9	Tobacco User/Non-Tobacco User	45	442.93	487.23
	Rating Area 9	Tobacco User/Non-Tobacco User	46	460.11	506.12
	Rating Area 9	Tobacco User/Non-Tobacco User	47	479.44	527.38
	Rating Area 9	Tobacco User/Non-Tobacco User	48	501.52	551.67
	Rating Area 9	Tobacco User/Non-Tobacco User	49	523.30	575.63
	Rating Area 9	Tobacco User/Non-Tobacco User	50	547.84	630.02

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100009	Rating Area 9	Tobacco User/Non-Tobacco User	51	572.07	657.88
	Rating Area 9	Tobacco User/Non-Tobacco User	52	598.76	688.57
	Rating Area 9	Tobacco User/Non-Tobacco User	53	625.75	719.62
	Rating Area 9	Tobacco User/Non-Tobacco User	54	654.89	753.13
	Rating Area 9	Tobacco User/Non-Tobacco User	55	684.03	820.84
	Rating Area 9	Tobacco User/Non-Tobacco User	56	715.63	858.75
	Rating Area 9	Tobacco User/Non-Tobacco User	57	747.53	897.04
	Rating Area 9	Tobacco User/Non-Tobacco User	58	781.58	937.89
	Rating Area 9	Tobacco User/Non-Tobacco User	59	798.45	958.14
	Rating Area 9	Tobacco User/Non-Tobacco User	60	832.50	1040.62
	Rating Area 9	Tobacco User/Non-Tobacco User	61	861.94	1077.43
	Rating Area 9	Tobacco User/Non-Tobacco User	62	881.27	1101.59
	Rating Area 9	Tobacco User/Non-Tobacco User	63	905.50	1131.88
	Rating Area 9	Tobacco User/Non-Tobacco User	64	920.21	1150.28
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	920.21	1150.28
53789PA0100013	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	252.46	252.46
53789PA0100013	Rating Area 6	Tobacco User/Non-Tobacco User	21	397.57	407.51
	Rating Area 6	Tobacco User/Non-Tobacco User	22	397.57	407.51
	Rating Area 6	Tobacco User/Non-Tobacco User	23	397.57	407.51
	Rating Area 6	Tobacco User/Non-Tobacco User	24	397.57	407.51
	Rating Area 6	Tobacco User/Non-Tobacco User	25	399.16	409.14

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100013	Rating Area 6	Tobacco User/Non-Tobacco User	26	407.11	417.29
	Rating Area 6	Tobacco User/Non-Tobacco User	27	416.65	427.07
	Rating Area 6	Tobacco User/Non-Tobacco User	28	432.16	442.96
	Rating Area 6	Tobacco User/Non-Tobacco User	29	444.88	456.00
	Rating Area 6	Tobacco User/Non-Tobacco User	30	451.24	462.52
	Rating Area 6	Tobacco User/Non-Tobacco User	31	460.78	472.30
	Rating Area 6	Tobacco User/Non-Tobacco User	32	470.33	482.08
	Rating Area 6	Tobacco User/Non-Tobacco User	33	476.29	488.20
	Rating Area 6	Tobacco User/Non-Tobacco User	34	482.65	494.72
	Rating Area 6	Tobacco User/Non-Tobacco User	35	485.83	497.98
	Rating Area 6	Tobacco User/Non-Tobacco User	36	489.01	501.24
	Rating Area 6	Tobacco User/Non-Tobacco User	37	492.19	504.50
	Rating Area 6	Tobacco User/Non-Tobacco User	38	495.37	507.76
	Rating Area 6	Tobacco User/Non-Tobacco User	39	501.73	514.28
	Rating Area 6	Tobacco User/Non-Tobacco User	40	508.09	546.20
	Rating Area 6	Tobacco User/Non-Tobacco User	41	517.64	556.46
	Rating Area 6	Tobacco User/Non-Tobacco User	42	526.78	566.29
	Rating Area 6	Tobacco User/Non-Tobacco User	43	539.50	579.97
	Rating Area 6	Tobacco User/Non-Tobacco User	44	555.41	597.06
	Rating Area 6	Tobacco User/Non-Tobacco User	45	574.09	631.50
	Rating Area 6	Tobacco User/Non-Tobacco User	46	596.36	655.99

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100013	Rating Area 6	Tobacco User/Non-Tobacco User	47	621.40	683.54
	Rating Area 6	Tobacco User/Non-Tobacco User	48	650.03	715.03
	Rating Area 6	Tobacco User/Non-Tobacco User	49	678.25	746.08
	Rating Area 6	Tobacco User/Non-Tobacco User	50	710.06	816.57
	Rating Area 6	Tobacco User/Non-Tobacco User	51	741.47	852.69
	Rating Area 6	Tobacco User/Non-Tobacco User	52	776.06	892.47
	Rating Area 6	Tobacco User/Non-Tobacco User	53	811.04	932.70
	Rating Area 6	Tobacco User/Non-Tobacco User	54	848.81	976.13
	Rating Area 6	Tobacco User/Non-Tobacco User	55	886.58	1063.90
	Rating Area 6	Tobacco User/Non-Tobacco User	56	927.53	1113.04
	Rating Area 6	Tobacco User/Non-Tobacco User	57	968.88	1162.65
	Rating Area 6	Tobacco User/Non-Tobacco User	58	1013.01	1215.61
	Rating Area 6	Tobacco User/Non-Tobacco User	59	1034.87	1241.85
	Rating Area 6	Tobacco User/Non-Tobacco User	60	1079.00	1348.76
	Rating Area 6	Tobacco User/Non-Tobacco User	61	1117.17	1396.46
	Rating Area 6	Tobacco User/Non-Tobacco User	62	1142.22	1427.77
	Rating Area 6	Tobacco User/Non-Tobacco User	63	1173.63	1467.03
	Rating Area 6	Tobacco User/Non-Tobacco User	64	1192.70	1490.89
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	1192.70	1490.89
53789PA0100013	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	254.98	254.98
53789PA0100013	Rating Area 7	Tobacco User/Non-Tobacco User	21	401.55	411.58

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0100013	Rating Area 7	Tobacco User/Non-Tobacco User	22	401.55	411.58
	Rating Area 7	Tobacco User/Non-Tobacco User	23	401.55	411.58
	Rating Area 7	Tobacco User/Non-Tobacco User	24	401.55	411.58
	Rating Area 7	Tobacco User/Non-Tobacco User	25	403.15	413.23
	Rating Area 7	Tobacco User/Non-Tobacco User	26	411.18	421.46
	Rating Area 7	Tobacco User/Non-Tobacco User	27	420.82	431.34
	Rating Area 7	Tobacco User/Non-Tobacco User	28	436.48	447.39
	Rating Area 7	Tobacco User/Non-Tobacco User	29	449.33	460.56
	Rating Area 7	Tobacco User/Non-Tobacco User	30	455.75	467.15
	Rating Area 7	Tobacco User/Non-Tobacco User	31	465.39	477.03
	Rating Area 7	Tobacco User/Non-Tobacco User	32	475.03	486.90
	Rating Area 7	Tobacco User/Non-Tobacco User	33	481.05	493.08
	Rating Area 7	Tobacco User/Non-Tobacco User	34	487.48	499.66
	Rating Area 7	Tobacco User/Non-Tobacco User	35	490.69	502.96
	Rating Area 7	Tobacco User/Non-Tobacco User	36	493.90	506.25
	Rating Area 7	Tobacco User/Non-Tobacco User	37	497.11	509.54
	Rating Area 7	Tobacco User/Non-Tobacco User	38	500.33	512.83
	Rating Area 7	Tobacco User/Non-Tobacco User	39	506.75	519.42
	Rating Area 7	Tobacco User/Non-Tobacco User	40	513.18	551.66
	Rating Area 7	Tobacco User/Non-Tobacco User	41	522.81	562.02
	Rating Area 7	Tobacco User/Non-Tobacco User	42	532.05	571.95

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0100013	Rating Area 7	Tobacco User/Non-Tobacco User	43	544.90	585.76
	Rating Area 7	Tobacco User/Non-Tobacco User	44	560.96	603.03
	Rating Area 7	Tobacco User/Non-Tobacco User	45	579.83	637.82
	Rating Area 7	Tobacco User/Non-Tobacco User	46	602.32	662.55
	Rating Area 7	Tobacco User/Non-Tobacco User	47	627.62	690.38
	Rating Area 7	Tobacco User/Non-Tobacco User	48	656.53	722.18
	Rating Area 7	Tobacco User/Non-Tobacco User	49	685.04	753.54
	Rating Area 7	Tobacco User/Non-Tobacco User	50	717.16	824.73
	Rating Area 7	Tobacco User/Non-Tobacco User	51	748.88	861.22
	Rating Area 7	Tobacco User/Non-Tobacco User	52	783.82	901.39
	Rating Area 7	Tobacco User/Non-Tobacco User	53	819.15	942.03
	Rating Area 7	Tobacco User/Non-Tobacco User	54	857.30	985.90
	Rating Area 7	Tobacco User/Non-Tobacco User	55	895.45	1074.54
	Rating Area 7	Tobacco User/Non-Tobacco User	56	936.81	1124.17
	Rating Area 7	Tobacco User/Non-Tobacco User	57	978.57	1174.28
	Rating Area 7	Tobacco User/Non-Tobacco User	58	1023.14	1227.77
	Rating Area 7	Tobacco User/Non-Tobacco User	59	1045.22	1254.27
	Rating Area 7	Tobacco User/Non-Tobacco User	60	1089.80	1362.24
	Rating Area 7	Tobacco User/Non-Tobacco User	61	1128.34	1410.43
	Rating Area 7	Tobacco User/Non-Tobacco User	62	1153.64	1442.05
	Rating Area 7	Tobacco User/Non-Tobacco User	63	1185.36	1481.70

HIOS Issuer ID*	53789				
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	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100013	Rating Area 7	Tobacco User/Non-Tobacco User	64	1204.64	1505.80
			65 and over	1204.64	1505.80
53789PA0100013	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	249.93	249.93
53789PA0100013	Rating Area 9	Tobacco User/Non-Tobacco User	21	393.59	403.43
			22	393.59	403.43
			23	393.59	403.43
			24	393.59	403.43
			25	395.17	405.05
			26	403.04	413.12
			27	412.49	422.80
			28	427.84	438.53
			29	440.43	451.44
			30	446.73	457.90
			31	456.18	467.58
			32	465.62	477.26
			33	471.53	483.31
			34	477.82	489.77
			35	480.97	493.00
			36	484.12	496.22
			37	487.27	499.45
			38	490.42	502.68

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required: Enter the 14-character Plan IDRequired: Select the Rating Area IDRequire: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired: Select the age of a subscriber eligible for the rateRequired: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired: Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0100013	Rating Area 9	Tobacco User/Non-Tobacco User	39	496.72	509.13
	Rating Area 9	Tobacco User/Non-Tobacco User	40	503.01	540.74
	Rating Area 9	Tobacco User/Non-Tobacco User	41	512.46	550.89
	Rating Area 9	Tobacco User/Non-Tobacco User	42	521.51	560.63
	Rating Area 9	Tobacco User/Non-Tobacco User	43	534.11	574.17
	Rating Area 9	Tobacco User/Non-Tobacco User	44	549.85	591.09
	Rating Area 9	Tobacco User/Non-Tobacco User	45	568.35	625.19
	Rating Area 9	Tobacco User/Non-Tobacco User	46	590.39	649.43
	Rating Area 9	Tobacco User/Non-Tobacco User	47	615.19	676.71
	Rating Area 9	Tobacco User/Non-Tobacco User	48	643.53	707.88
	Rating Area 9	Tobacco User/Non-Tobacco User	49	671.47	738.62
	Rating Area 9	Tobacco User/Non-Tobacco User	50	702.96	808.40
	Rating Area 9	Tobacco User/Non-Tobacco User	51	734.05	844.16
	Rating Area 9	Tobacco User/Non-Tobacco User	52	768.30	883.54
	Rating Area 9	Tobacco User/Non-Tobacco User	53	802.93	923.37
	Rating Area 9	Tobacco User/Non-Tobacco User	54	840.32	966.37
	Rating Area 9	Tobacco User/Non-Tobacco User	55	877.72	1053.26
	Rating Area 9	Tobacco User/Non-Tobacco User	56	918.26	1101.91
	Rating Area 9	Tobacco User/Non-Tobacco User	57	959.19	1151.03
	Rating Area 9	Tobacco User/Non-Tobacco User	58	1002.88	1203.45
	Rating Area 9	Tobacco User/Non-Tobacco User	59	1024.53	1229.43

HIOS Issuer ID*	53789				
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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	Require: 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
53789PA0100013	Rating Area 9	Tobacco User/Non-Tobacco User	60	1068.21	1335.27
	Rating Area 9	Tobacco User/Non-Tobacco User	61	1106.00	1382.50
	Rating Area 9	Tobacco User/Non-Tobacco User	62	1130.80	1413.50
	Rating Area 9	Tobacco User/Non-Tobacco User	63	1161.89	1452.36
	Rating Area 9	Tobacco User/Non-Tobacco User	64	1180.77	1475.98
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	1180.77	1475.98
53789PA0100015	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	215.19	215.19
53789PA0100015	Rating Area 6	Tobacco User/Non-Tobacco User	21	338.88	347.35
	Rating Area 6	Tobacco User/Non-Tobacco User	22	338.88	347.35
	Rating Area 6	Tobacco User/Non-Tobacco User	23	338.88	347.35
	Rating Area 6	Tobacco User/Non-Tobacco User	24	338.88	347.35
	Rating Area 6	Tobacco User/Non-Tobacco User	25	340.24	348.74
	Rating Area 6	Tobacco User/Non-Tobacco User	26	347.01	355.69
	Rating Area 6	Tobacco User/Non-Tobacco User	27	355.15	364.02
	Rating Area 6	Tobacco User/Non-Tobacco User	28	368.36	377.57
	Rating Area 6	Tobacco User/Non-Tobacco User	29	379.21	388.69
	Rating Area 6	Tobacco User/Non-Tobacco User	30	384.63	394.24
	Rating Area 6	Tobacco User/Non-Tobacco User	31	392.76	402.58
	Rating Area 6	Tobacco User/Non-Tobacco User	32	400.90	410.92
	Rating Area 6	Tobacco User/Non-Tobacco User	33	405.98	416.13
	Rating Area 6	Tobacco User/Non-Tobacco User	34	411.40	421.69

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100015	Rating Area 6	Tobacco User/Non-Tobacco User	35	414.11	424.46
	Rating Area 6	Tobacco User/Non-Tobacco User	36	416.82	427.24
	Rating Area 6	Tobacco User/Non-Tobacco User	37	419.53	430.02
	Rating Area 6	Tobacco User/Non-Tobacco User	38	422.24	432.80
	Rating Area 6	Tobacco User/Non-Tobacco User	39	427.67	438.36
	Rating Area 6	Tobacco User/Non-Tobacco User	40	433.09	465.57
	Rating Area 6	Tobacco User/Non-Tobacco User	41	441.22	474.31
	Rating Area 6	Tobacco User/Non-Tobacco User	42	449.02	482.69
	Rating Area 6	Tobacco User/Non-Tobacco User	43	459.86	494.35
	Rating Area 6	Tobacco User/Non-Tobacco User	44	473.42	508.92
	Rating Area 6	Tobacco User/Non-Tobacco User	45	489.34	538.28
	Rating Area 6	Tobacco User/Non-Tobacco User	46	508.32	559.15
	Rating Area 6	Tobacco User/Non-Tobacco User	47	529.67	582.64
	Rating Area 6	Tobacco User/Non-Tobacco User	48	554.07	609.48
	Rating Area 6	Tobacco User/Non-Tobacco User	49	578.13	635.94
	Rating Area 6	Tobacco User/Non-Tobacco User	50	605.24	696.03
	Rating Area 6	Tobacco User/Non-Tobacco User	51	632.01	726.81
	Rating Area 6	Tobacco User/Non-Tobacco User	52	661.49	760.72
	Rating Area 6	Tobacco User/Non-Tobacco User	53	691.32	795.01
	Rating Area 6	Tobacco User/Non-Tobacco User	54	723.51	832.04
	Rating Area 6	Tobacco User/Non-Tobacco User	55	755.70	906.84

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100015	Rating Area 6	Tobacco User/Non-Tobacco User	56	790.61	948.73
	Rating Area 6	Tobacco User/Non-Tobacco User	57	825.85	991.02
	Rating Area 6	Tobacco User/Non-Tobacco User	58	863.47	1036.16
	Rating Area 6	Tobacco User/Non-Tobacco User	59	882.10	1058.53
	Rating Area 6	Tobacco User/Non-Tobacco User	60	919.72	1149.65
	Rating Area 6	Tobacco User/Non-Tobacco User	61	952.25	1190.32
	Rating Area 6	Tobacco User/Non-Tobacco User	62	973.60	1217.00
	Rating Area 6	Tobacco User/Non-Tobacco User	63	1000.37	1250.47
	Rating Area 6	Tobacco User/Non-Tobacco User	64	1016.63	1270.80
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	1016.63	1270.80
53789PA0100015	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	217.34	217.34
53789PA0100015	Rating Area 7	Tobacco User/Non-Tobacco User	21	342.27	350.83
	Rating Area 7	Tobacco User/Non-Tobacco User	22	342.27	350.83
	Rating Area 7	Tobacco User/Non-Tobacco User	23	342.27	350.83
	Rating Area 7	Tobacco User/Non-Tobacco User	24	342.27	350.83
	Rating Area 7	Tobacco User/Non-Tobacco User	25	343.64	352.23
	Rating Area 7	Tobacco User/Non-Tobacco User	26	350.48	359.25
	Rating Area 7	Tobacco User/Non-Tobacco User	27	358.70	367.67
	Rating Area 7	Tobacco User/Non-Tobacco User	28	372.05	381.35
	Rating Area 7	Tobacco User/Non-Tobacco User	29	383.00	392.57
	Rating Area 7	Tobacco User/Non-Tobacco User	30	388.48	398.19

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	31	396.69	406.61
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	32	404.90	415.03
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	33	410.04	420.29
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	34	415.51	425.90
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	35	418.25	428.71
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	36	420.99	431.52
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	37	423.73	434.32
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	38	426.47	437.13
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	39	431.94	442.74
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	40	437.42	470.23
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	41	445.63	479.06
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	42	453.51	487.52
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	43	464.46	499.29
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	44	478.15	514.01
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	45	494.24	543.66
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	46	513.40	564.74
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	47	534.97	588.46
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	48	559.61	615.57
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	49	583.91	642.30
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	50	611.29	702.99
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	51	638.33	734.08

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	52	668.11	768.33
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	53	698.23	802.96
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	54	730.74	840.36
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	55	763.26	915.91
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	56	798.51	958.22
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	57	834.11	1000.93
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	58	872.10	1046.52
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	59	890.93	1069.11
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	60	928.92	1161.15
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	61	961.78	1202.22
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	62	983.34	1229.17
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	63	1010.38	1262.97
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	64	1026.80	1283.51
53789PA0100015 Rating Area 7		Tobacco User/Non-Tobacco User	65 and over	1026.80	1283.51
53789PA0100015	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	213.04	213.04
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	21	335.49	343.88
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	22	335.49	343.88
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	23	335.49	343.88
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	24	335.49	343.88
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	25	336.83	345.25
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	26	343.54	352.13

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	27	351.59	360.38
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	28	364.68	373.80
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	29	375.41	384.80
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	30	380.78	390.30
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	31	388.83	398.56
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	32	396.89	406.81
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	33	401.92	411.97
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	34	407.29	417.47
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	35	409.97	420.22
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	36	412.65	422.97
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	37	415.34	425.72
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	38	418.02	428.47
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	39	423.39	433.97
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	40	428.76	460.91
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	41	436.81	469.57
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	42	444.53	477.87
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	43	455.26	489.41
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	44	468.68	503.83
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	45	484.45	532.89
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	46	503.24	553.56
53789PA0100015 Rating Area 9		Tobacco User/Non-Tobacco User	47	524.37	576.81

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100015	Rating Area 9	Tobacco User/Non-Tobacco User	48	548.53	603.38
	Rating Area 9	Tobacco User/Non-Tobacco User	49	572.35	629.58
	Rating Area 9	Tobacco User/Non-Tobacco User	50	599.19	689.07
	Rating Area 9	Tobacco User/Non-Tobacco User	51	625.69	719.54
	Rating Area 9	Tobacco User/Non-Tobacco User	52	654.88	753.11
	Rating Area 9	Tobacco User/Non-Tobacco User	53	684.40	787.06
	Rating Area 9	Tobacco User/Non-Tobacco User	54	716.27	823.71
	Rating Area 9	Tobacco User/Non-Tobacco User	55	748.15	897.77
	Rating Area 9	Tobacco User/Non-Tobacco User	56	782.70	939.24
	Rating Area 9	Tobacco User/Non-Tobacco User	57	817.59	981.11
	Rating Area 9	Tobacco User/Non-Tobacco User	58	854.83	1025.80
	Rating Area 9	Tobacco User/Non-Tobacco User	59	873.28	1047.94
	Rating Area 9	Tobacco User/Non-Tobacco User	60	910.52	1138.15
	Rating Area 9	Tobacco User/Non-Tobacco User	61	942.73	1178.41
	Rating Area 9	Tobacco User/Non-Tobacco User	62	963.87	1204.83
	Rating Area 9	Tobacco User/Non-Tobacco User	63	990.37	1237.96
	Rating Area 9	Tobacco User/Non-Tobacco User	64	1006.46	1258.09
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	1006.46	1258.09
53789PA0100017	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	211.33	211.33
53789PA0100017	Rating Area 6	Tobacco User/Non-Tobacco User	21	332.80	341.12
53789PA0100017	Rating Area 6	Tobacco User/Non-Tobacco User	22	332.80	341.12

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100017	Rating Area 6	Tobacco User/Non-Tobacco User	23	332.80	341.12
	Rating Area 6	Tobacco User/Non-Tobacco User	24	332.80	341.12
	Rating Area 6	Tobacco User/Non-Tobacco User	25	334.13	342.48
	Rating Area 6	Tobacco User/Non-Tobacco User	26	340.79	349.31
	Rating Area 6	Tobacco User/Non-Tobacco User	27	348.77	357.49
	Rating Area 6	Tobacco User/Non-Tobacco User	28	361.75	370.80
	Rating Area 6	Tobacco User/Non-Tobacco User	29	372.40	381.71
	Rating Area 6	Tobacco User/Non-Tobacco User	30	377.73	387.17
	Rating Area 6	Tobacco User/Non-Tobacco User	31	385.72	395.36
	Rating Area 6	Tobacco User/Non-Tobacco User	32	393.70	403.54
	Rating Area 6	Tobacco User/Non-Tobacco User	33	398.69	408.66
	Rating Area 6	Tobacco User/Non-Tobacco User	34	404.02	414.12
	Rating Area 6	Tobacco User/Non-Tobacco User	35	406.68	416.85
	Rating Area 6	Tobacco User/Non-Tobacco User	36	409.34	419.58
	Rating Area 6	Tobacco User/Non-Tobacco User	37	412.01	422.31
	Rating Area 6	Tobacco User/Non-Tobacco User	38	414.67	425.04
	Rating Area 6	Tobacco User/Non-Tobacco User	39	419.99	430.49
	Rating Area 6	Tobacco User/Non-Tobacco User	40	425.32	457.22
	Rating Area 6	Tobacco User/Non-Tobacco User	41	433.31	465.80
	Rating Area 6	Tobacco User/Non-Tobacco User	42	440.96	474.03
	Rating Area 6	Tobacco User/Non-Tobacco User	43	451.61	485.48

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	44	464.92	499.79
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	45	480.56	528.62
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	46	499.20	549.12
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	47	520.17	572.18
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	48	544.13	598.54
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	49	567.76	624.53
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	50	594.38	683.54
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	51	620.67	713.77
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	52	649.63	747.07
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	53	678.91	780.75
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	54	710.53	817.11
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	55	742.14	890.57
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	56	776.42	931.71
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	57	811.03	973.24
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	58	847.97	1017.57
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	59	866.28	1039.53
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	60	903.22	1129.02
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	61	935.17	1168.96
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	62	956.13	1195.17
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	63	982.43	1228.03
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	64	998.39	1248.00

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
<div><div>Plan ID*</div><div>Required: Enter the 14-character Plan ID</div></div> <div><div>Rating Area ID*</div><div>Required: Select the Rating Area ID</div></div> <div><div>Tobacco*</div><div>Require: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan</div></div> <div><div>Age*</div><div>Required: Select the age of a subscriber eligible for the rate</div></div> <div><div>Individual Rate*</div><div>Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan</div></div> <div><div>Individual Tobacco Rate*</div><div>Required: Enter the rate of an Individual tobacco enrollee on a plan</div></div>					
53789PA0100017 Rating Area 6		Tobacco User/Non-Tobacco User	65 and over	998.39	1248.00
53789PA0100017	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	213.44	213.44
53789PA0100017	Rating Area 7	Tobacco User/Non-Tobacco User	21	336.13	344.53
	Rating Area 7	Tobacco User/Non-Tobacco User	22	336.13	344.53
	Rating Area 7	Tobacco User/Non-Tobacco User	23	336.13	344.53
	Rating Area 7	Tobacco User/Non-Tobacco User	24	336.13	344.53
	Rating Area 7	Tobacco User/Non-Tobacco User	25	337.47	345.91
	Rating Area 7	Tobacco User/Non-Tobacco User	26	344.20	352.80
	Rating Area 7	Tobacco User/Non-Tobacco User	27	352.26	361.07
	Rating Area 7	Tobacco User/Non-Tobacco User	28	365.37	374.51
	Rating Area 7	Tobacco User/Non-Tobacco User	29	376.13	385.53
	Rating Area 7	Tobacco User/Non-Tobacco User	30	381.51	391.04
	Rating Area 7	Tobacco User/Non-Tobacco User	31	389.57	399.31
	Rating Area 7	Tobacco User/Non-Tobacco User	32	397.64	407.58
	Rating Area 7	Tobacco User/Non-Tobacco User	33	402.68	412.75
	Rating Area 7	Tobacco User/Non-Tobacco User	34	408.06	418.26
	Rating Area 7	Tobacco User/Non-Tobacco User	35	410.75	421.02
	Rating Area 7	Tobacco User/Non-Tobacco User	36	413.44	423.77
	Rating Area 7	Tobacco User/Non-Tobacco User	37	416.13	426.53
	Rating Area 7	Tobacco User/Non-Tobacco User	38	418.82	429.29
	Rating Area 7	Tobacco User/Non-Tobacco User	39	424.19	434.80

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	40	429.57	461.79
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	41	437.64	470.46
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	42	445.37	478.77
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	43	456.13	490.34
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	44	469.57	504.79
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	45	485.37	533.91
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	46	504.19	554.61
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	47	525.37	577.90
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	48	549.57	604.53
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	49	573.43	630.78
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	50	600.32	690.37
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	51	626.88	720.91
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	52	656.12	754.54
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	53	685.70	788.56
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	54	717.63	825.28
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	55	749.57	899.48
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	56	784.19	941.02
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	57	819.14	982.97
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	58	856.45	1027.74
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	59	874.94	1049.93
53789PA0100017 Rating Area 7		Tobacco User/Non-Tobacco User	60	912.25	1140.31

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100017	Rating Area 7	Tobacco User/Non-Tobacco User	61	944.52	1180.65
	Rating Area 7	Tobacco User/Non-Tobacco User	62	965.70	1207.12
	Rating Area 7	Tobacco User/Non-Tobacco User	63	992.25	1240.31
	Rating Area 7	Tobacco User/Non-Tobacco User	64	1008.38	1260.48
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	1008.38	1260.48
53789PA0100017	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	209.21	209.21
53789PA0100017	Rating Area 9	Tobacco User/Non-Tobacco User	21	329.47	337.71
	Rating Area 9	Tobacco User/Non-Tobacco User	22	329.47	337.71
	Rating Area 9	Tobacco User/Non-Tobacco User	23	329.47	337.71
	Rating Area 9	Tobacco User/Non-Tobacco User	24	329.47	337.71
	Rating Area 9	Tobacco User/Non-Tobacco User	25	330.79	339.06
	Rating Area 9	Tobacco User/Non-Tobacco User	26	337.38	345.81
	Rating Area 9	Tobacco User/Non-Tobacco User	27	345.29	353.92
	Rating Area 9	Tobacco User/Non-Tobacco User	28	358.14	367.09
	Rating Area 9	Tobacco User/Non-Tobacco User	29	368.68	377.90
	Rating Area 9	Tobacco User/Non-Tobacco User	30	373.95	383.30
	Rating Area 9	Tobacco User/Non-Tobacco User	31	381.86	391.40
	Rating Area 9	Tobacco User/Non-Tobacco User	32	389.77	399.51
	Rating Area 9	Tobacco User/Non-Tobacco User	33	394.71	404.58
	Rating Area 9	Tobacco User/Non-Tobacco User	34	399.98	409.98
	Rating Area 9	Tobacco User/Non-Tobacco User	35	402.61	412.68

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0100017	Rating Area 9	Tobacco User/Non-Tobacco User	36	405.25	415.38
	Rating Area 9	Tobacco User/Non-Tobacco User	37	407.89	418.08
	Rating Area 9	Tobacco User/Non-Tobacco User	38	410.52	420.79
	Rating Area 9	Tobacco User/Non-Tobacco User	39	415.79	426.19
	Rating Area 9	Tobacco User/Non-Tobacco User	40	421.07	452.65
	Rating Area 9	Tobacco User/Non-Tobacco User	41	428.97	461.15
	Rating Area 9	Tobacco User/Non-Tobacco User	42	436.55	469.29
	Rating Area 9	Tobacco User/Non-Tobacco User	43	447.09	480.63
	Rating Area 9	Tobacco User/Non-Tobacco User	44	460.27	494.79
	Rating Area 9	Tobacco User/Non-Tobacco User	45	475.76	523.33
	Rating Area 9	Tobacco User/Non-Tobacco User	46	494.21	543.63
	Rating Area 9	Tobacco User/Non-Tobacco User	47	514.96	566.46
	Rating Area 9	Tobacco User/Non-Tobacco User	48	538.69	592.56
	Rating Area 9	Tobacco User/Non-Tobacco User	49	562.08	618.29
	Rating Area 9	Tobacco User/Non-Tobacco User	50	588.44	676.70
	Rating Area 9	Tobacco User/Non-Tobacco User	51	614.47	706.64
	Rating Area 9	Tobacco User/Non-Tobacco User	52	643.13	739.60
	Rating Area 9	Tobacco User/Non-Tobacco User	53	672.12	772.94
	Rating Area 9	Tobacco User/Non-Tobacco User	54	703.42	808.94
	Rating Area 9	Tobacco User/Non-Tobacco User	55	734.72	881.67
	Rating Area 9	Tobacco User/Non-Tobacco User	56	768.66	922.39

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0100017	Rating Area 9	Tobacco User/Non-Tobacco User	57	802.92	963.51
	Rating Area 9	Tobacco User/Non-Tobacco User	58	839.49	1007.39
	Rating Area 9	Tobacco User/Non-Tobacco User	59	857.62	1029.14
	Rating Area 9	Tobacco User/Non-Tobacco User	60	894.19	1117.73
	Rating Area 9	Tobacco User/Non-Tobacco User	61	925.82	1157.27
	Rating Area 9	Tobacco User/Non-Tobacco User	62	946.57	1183.22
	Rating Area 9	Tobacco User/Non-Tobacco User	63	972.60	1215.75
	Rating Area 9	Tobacco User/Non-Tobacco User	64	988.41	1235.52
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	988.41	1235.52
53789PA0110004	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	83.15	83.15
53789PA0110004	Rating Area 6	Tobacco User/Non-Tobacco User	21	130.95	134.22
	Rating Area 6	Tobacco User/Non-Tobacco User	22	130.95	134.22
	Rating Area 6	Tobacco User/Non-Tobacco User	23	130.95	134.22
	Rating Area 6	Tobacco User/Non-Tobacco User	24	130.95	134.22
	Rating Area 6	Tobacco User/Non-Tobacco User	25	131.47	134.76
	Rating Area 6	Tobacco User/Non-Tobacco User	26	134.09	137.45
	Rating Area 6	Tobacco User/Non-Tobacco User	27	137.24	140.67
	Rating Area 6	Tobacco User/Non-Tobacco User	28	142.34	145.90
	Rating Area 6	Tobacco User/Non-Tobacco User	29	146.53	150.20
	Rating Area 6	Tobacco User/Non-Tobacco User	30	148.63	152.34
	Rating Area 6	Tobacco User/Non-Tobacco User	31	151.77	155.57

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110004	Rating Area 6	Tobacco User/Non-Tobacco User	32	154.91	158.79
	Rating Area 6	Tobacco User/Non-Tobacco User	33	156.88	160.80
	Rating Area 6	Tobacco User/Non-Tobacco User	34	158.97	162.95
	Rating Area 6	Tobacco User/Non-Tobacco User	35	160.02	164.02
	Rating Area 6	Tobacco User/Non-Tobacco User	36	161.07	165.10
	Rating Area 6	Tobacco User/Non-Tobacco User	37	162.12	166.17
	Rating Area 6	Tobacco User/Non-Tobacco User	38	163.16	167.24
	Rating Area 6	Tobacco User/Non-Tobacco User	39	165.26	169.39
	Rating Area 6	Tobacco User/Non-Tobacco User	40	167.35	179.91
	Rating Area 6	Tobacco User/Non-Tobacco User	41	170.50	183.28
	Rating Area 6	Tobacco User/Non-Tobacco User	42	173.51	186.52
	Rating Area 6	Tobacco User/Non-Tobacco User	43	177.70	191.03
	Rating Area 6	Tobacco User/Non-Tobacco User	44	182.94	196.66
	Rating Area 6	Tobacco User/Non-Tobacco User	45	189.09	208.00
	Rating Area 6	Tobacco User/Non-Tobacco User	46	196.42	216.07
	Rating Area 6	Tobacco User/Non-Tobacco User	47	204.67	225.14
	Rating Area 6	Tobacco User/Non-Tobacco User	48	214.10	235.51
	Rating Area 6	Tobacco User/Non-Tobacco User	49	223.40	245.74
	Rating Area 6	Tobacco User/Non-Tobacco User	50	233.88	268.96
	Rating Area 6	Tobacco User/Non-Tobacco User	51	244.22	280.86
	Rating Area 6	Tobacco User/Non-Tobacco User	52	255.61	293.96

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110004	Rating Area 6	Tobacco User/Non-Tobacco User	53	267.14	307.21
	Rating Area 6	Tobacco User/Non-Tobacco User	54	279.58	321.51
	Rating Area 6	Tobacco User/Non-Tobacco User	55	292.02	350.42
	Rating Area 6	Tobacco User/Non-Tobacco User	56	305.51	366.61
	Rating Area 6	Tobacco User/Non-Tobacco User	57	319.13	382.95
	Rating Area 6	Tobacco User/Non-Tobacco User	58	333.66	400.39
	Rating Area 6	Tobacco User/Non-Tobacco User	59	340.86	409.04
	Rating Area 6	Tobacco User/Non-Tobacco User	60	355.40	444.25
	Rating Area 6	Tobacco User/Non-Tobacco User	61	367.97	459.96
	Rating Area 6	Tobacco User/Non-Tobacco User	62	376.22	470.27
	Rating Area 6	Tobacco User/Non-Tobacco User	63	386.56	483.21
	Rating Area 6	Tobacco User/Non-Tobacco User	64	392.84	491.06
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	392.84	491.06
53789PA0110006	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	156.43	156.43
53789PA0110006	Rating Area 6	Tobacco User/Non-Tobacco User	21	246.35	252.51
	Rating Area 6	Tobacco User/Non-Tobacco User	22	246.35	252.51
	Rating Area 6	Tobacco User/Non-Tobacco User	23	246.35	252.51
	Rating Area 6	Tobacco User/Non-Tobacco User	24	246.35	252.51
	Rating Area 6	Tobacco User/Non-Tobacco User	25	247.34	253.52
	Rating Area 6	Tobacco User/Non-Tobacco User	26	252.26	258.57
	Rating Area 6	Tobacco User/Non-Tobacco User	27	258.17	264.63

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0110006	Rating Area 6	Tobacco User/Non-Tobacco User	28	267.78	274.48
	Rating Area 6	Tobacco User/Non-Tobacco User	29	275.67	282.56
	Rating Area 6	Tobacco User/Non-Tobacco User	30	279.61	286.60
	Rating Area 6	Tobacco User/Non-Tobacco User	31	285.52	292.66
	Rating Area 6	Tobacco User/Non-Tobacco User	32	291.43	298.72
	Rating Area 6	Tobacco User/Non-Tobacco User	33	295.13	302.51
	Rating Area 6	Tobacco User/Non-Tobacco User	34	299.07	306.55
	Rating Area 6	Tobacco User/Non-Tobacco User	35	301.04	308.57
	Rating Area 6	Tobacco User/Non-Tobacco User	36	303.01	310.59
	Rating Area 6	Tobacco User/Non-Tobacco User	37	304.98	312.61
	Rating Area 6	Tobacco User/Non-Tobacco User	38	306.95	314.63
	Rating Area 6	Tobacco User/Non-Tobacco User	39	310.89	318.67
	Rating Area 6	Tobacco User/Non-Tobacco User	40	314.84	338.45
	Rating Area 6	Tobacco User/Non-Tobacco User	41	320.75	344.80
	Rating Area 6	Tobacco User/Non-Tobacco User	42	326.41	350.89
	Rating Area 6	Tobacco User/Non-Tobacco User	43	334.30	359.37
	Rating Area 6	Tobacco User/Non-Tobacco User	44	344.15	369.96
	Rating Area 6	Tobacco User/Non-Tobacco User	45	355.73	391.30
	Rating Area 6	Tobacco User/Non-Tobacco User	46	369.52	406.48
	Rating Area 6	Tobacco User/Non-Tobacco User	47	385.05	423.55
	Rating Area 6	Tobacco User/Non-Tobacco User	48	402.78	443.06

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110006	Rating Area 6	Tobacco User/Non-Tobacco User	49	420.27	462.30
	Rating Area 6	Tobacco User/Non-Tobacco User	50	439.98	505.98
	Rating Area 6	Tobacco User/Non-Tobacco User	51	459.44	528.36
	Rating Area 6	Tobacco User/Non-Tobacco User	52	480.88	553.01
	Rating Area 6	Tobacco User/Non-Tobacco User	53	502.55	577.94
	Rating Area 6	Tobacco User/Non-Tobacco User	54	525.96	604.85
	Rating Area 6	Tobacco User/Non-Tobacco User	55	549.36	659.23
	Rating Area 6	Tobacco User/Non-Tobacco User	56	574.73	689.68
	Rating Area 6	Tobacco User/Non-Tobacco User	57	600.35	720.43
	Rating Area 6	Tobacco User/Non-Tobacco User	58	627.70	753.24
	Rating Area 6	Tobacco User/Non-Tobacco User	59	641.25	769.50
	Rating Area 6	Tobacco User/Non-Tobacco User	60	668.59	835.74
	Rating Area 6	Tobacco User/Non-Tobacco User	61	692.24	865.30
	Rating Area 6	Tobacco User/Non-Tobacco User	62	707.76	884.70
	Rating Area 6	Tobacco User/Non-Tobacco User	63	727.23	909.03
	Rating Area 6	Tobacco User/Non-Tobacco User	64	739.04	923.81
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	739.04	923.81
53789PA0110008	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	128.78	128.78
53789PA0110008	Rating Area 6	Tobacco User/Non-Tobacco User	21	202.81	207.88
	Rating Area 6	Tobacco User/Non-Tobacco User	22	202.81	207.88
	Rating Area 6	Tobacco User/Non-Tobacco User	23	202.81	207.88

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110008	Rating Area 6	Tobacco User/Non-Tobacco User	24	202.81	207.88
	Rating Area 6	Tobacco User/Non-Tobacco User	25	203.62	208.71
	Rating Area 6	Tobacco User/Non-Tobacco User	26	207.68	212.87
	Rating Area 6	Tobacco User/Non-Tobacco User	27	212.54	217.86
	Rating Area 6	Tobacco User/Non-Tobacco User	28	220.45	225.97
	Rating Area 6	Tobacco User/Non-Tobacco User	29	226.94	232.62
	Rating Area 6	Tobacco User/Non-Tobacco User	30	230.19	235.94
	Rating Area 6	Tobacco User/Non-Tobacco User	31	235.06	240.93
	Rating Area 6	Tobacco User/Non-Tobacco User	32	239.92	245.92
	Rating Area 6	Tobacco User/Non-Tobacco User	33	242.97	249.04
	Rating Area 6	Tobacco User/Non-Tobacco User	34	246.21	252.37
	Rating Area 6	Tobacco User/Non-Tobacco User	35	247.83	254.03
	Rating Area 6	Tobacco User/Non-Tobacco User	36	249.46	255.69
	Rating Area 6	Tobacco User/Non-Tobacco User	37	251.08	257.36
	Rating Area 6	Tobacco User/Non-Tobacco User	38	252.70	259.02
	Rating Area 6	Tobacco User/Non-Tobacco User	39	255.95	262.34
	Rating Area 6	Tobacco User/Non-Tobacco User	40	259.19	278.63
	Rating Area 6	Tobacco User/Non-Tobacco User	41	264.06	283.86
	Rating Area 6	Tobacco User/Non-Tobacco User	42	268.72	288.88
	Rating Area 6	Tobacco User/Non-Tobacco User	43	275.21	295.85
	Rating Area 6	Tobacco User/Non-Tobacco User	44	283.33	304.57

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	45	292.86	322.14
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	46	304.21	334.64
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	47	316.99	348.69
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	48	331.59	364.75
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	49	345.99	380.59
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	50	362.22	416.55
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	51	378.24	434.98
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	52	395.89	455.27
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	53	413.73	475.79
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	54	433.00	497.95
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	55	452.27	542.72
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	56	473.16	567.79
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	57	494.25	593.10
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	58	516.76	620.11
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	59	527.91	633.50
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	60	550.43	688.03
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	61	569.90	712.37
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	62	582.67	728.34
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	63	598.70	748.37
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	64	608.42	760.54
53789PA0110008 Rating Area 6		Tobacco User/Non-Tobacco User	65 and over	608.42	760.54

HIOS Issuer ID*	53789				
Federal TIN*	23-2399845				
Rate Effective Date*	1/1/2017				
Rate Expiration Date*	12/31/2017				
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	Require: 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
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	151.27	151.27
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	21	238.22	244.18
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	22	238.22	244.18
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	23	238.22	244.18
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	24	238.22	244.18
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	25	239.17	245.15
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	26	243.94	250.04
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	27	249.65	255.90
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	28	258.95	265.42
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	29	266.57	273.23
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	30	270.38	277.14
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	31	276.10	283.00
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	32	281.81	288.86
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	33	285.39	292.52
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	34	289.20	296.43
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	35	291.10	298.38
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	36	293.01	300.34
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	37	294.92	302.29
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	38	296.82	304.24
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	39	300.63	308.15
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	40	304.45	327.28

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	41	310.16	333.42
	Rating Area 6	Tobacco User/Non-Tobacco User	42	315.64	339.31
	Rating Area 6	Tobacco User/Non-Tobacco User	43	323.26	347.51
	Rating Area 6	Tobacco User/Non-Tobacco User	44	332.79	357.75
	Rating Area 6	Tobacco User/Non-Tobacco User	45	343.99	378.39
	Rating Area 6	Tobacco User/Non-Tobacco User	46	357.33	393.06
	Rating Area 6	Tobacco User/Non-Tobacco User	47	372.34	409.57
	Rating Area 6	Tobacco User/Non-Tobacco User	48	389.49	428.44
	Rating Area 6	Tobacco User/Non-Tobacco User	49	406.40	447.04
	Rating Area 6	Tobacco User/Non-Tobacco User	50	425.46	489.28
	Rating Area 6	Tobacco User/Non-Tobacco User	51	444.28	510.92
	Rating Area 6	Tobacco User/Non-Tobacco User	52	465.01	534.76
	Rating Area 6	Tobacco User/Non-Tobacco User	53	485.97	558.86
	Rating Area 6	Tobacco User/Non-Tobacco User	54	508.60	584.89
	Rating Area 6	Tobacco User/Non-Tobacco User	55	531.23	637.48
	Rating Area 6	Tobacco User/Non-Tobacco User	56	555.77	666.92
	Rating Area 6	Tobacco User/Non-Tobacco User	57	580.54	696.65
	Rating Area 6	Tobacco User/Non-Tobacco User	58	606.98	728.38
	Rating Area 6	Tobacco User/Non-Tobacco User	59	620.09	744.10
	Rating Area 6	Tobacco User/Non-Tobacco User	60	646.53	808.16
	Rating Area 6	Tobacco User/Non-Tobacco User	61	669.40	836.75

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110009	Rating Area 6	Tobacco User/Non-Tobacco User	62	684.41	855.51
	Rating Area 6	Tobacco User/Non-Tobacco User	63	703.23	879.03
	Rating Area 6	Tobacco User/Non-Tobacco User	64	714.65	893.33
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	714.65	893.33
53789PA0110013	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	191.88	191.88
53789PA0110013	Rating Area 6	Tobacco User/Non-Tobacco User	21	302.18	309.73
	Rating Area 6	Tobacco User/Non-Tobacco User	22	302.18	309.73
	Rating Area 6	Tobacco User/Non-Tobacco User	23	302.18	309.73
	Rating Area 6	Tobacco User/Non-Tobacco User	24	302.18	309.73
	Rating Area 6	Tobacco User/Non-Tobacco User	25	303.39	310.97
	Rating Area 6	Tobacco User/Non-Tobacco User	26	309.43	317.17
	Rating Area 6	Tobacco User/Non-Tobacco User	27	316.68	324.60
	Rating Area 6	Tobacco User/Non-Tobacco User	28	328.47	336.68
	Rating Area 6	Tobacco User/Non-Tobacco User	29	338.14	346.59
	Rating Area 6	Tobacco User/Non-Tobacco User	30	342.97	351.55
	Rating Area 6	Tobacco User/Non-Tobacco User	31	350.23	358.98
	Rating Area 6	Tobacco User/Non-Tobacco User	32	357.48	366.42
	Rating Area 6	Tobacco User/Non-Tobacco User	33	362.01	371.06
	Rating Area 6	Tobacco User/Non-Tobacco User	34	366.85	376.02
	Rating Area 6	Tobacco User/Non-Tobacco User	35	369.26	378.50
	Rating Area 6	Tobacco User/Non-Tobacco User	36	371.68	380.97

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110013	Rating Area 6	Tobacco User/Non-Tobacco User	37	374.10	383.45
	Rating Area 6	Tobacco User/Non-Tobacco User	38	376.52	385.93
	Rating Area 6	Tobacco User/Non-Tobacco User	39	381.35	390.88
	Rating Area 6	Tobacco User/Non-Tobacco User	40	386.19	415.15
	Rating Area 6	Tobacco User/Non-Tobacco User	41	393.44	422.95
	Rating Area 6	Tobacco User/Non-Tobacco User	42	400.39	430.42
	Rating Area 6	Tobacco User/Non-Tobacco User	43	410.06	440.81
	Rating Area 6	Tobacco User/Non-Tobacco User	44	422.15	453.81
	Rating Area 6	Tobacco User/Non-Tobacco User	45	436.35	479.98
	Rating Area 6	Tobacco User/Non-Tobacco User	46	453.27	498.60
	Rating Area 6	Tobacco User/Non-Tobacco User	47	472.31	519.54
	Rating Area 6	Tobacco User/Non-Tobacco User	48	494.06	543.47
	Rating Area 6	Tobacco User/Non-Tobacco User	49	515.52	567.07
	Rating Area 6	Tobacco User/Non-Tobacco User	50	539.69	620.65
	Rating Area 6	Tobacco User/Non-Tobacco User	51	563.57	648.10
	Rating Area 6	Tobacco User/Non-Tobacco User	52	589.86	678.33
	Rating Area 6	Tobacco User/Non-Tobacco User	53	616.45	708.91
	Rating Area 6	Tobacco User/Non-Tobacco User	54	645.15	741.93
	Rating Area 6	Tobacco User/Non-Tobacco User	55	673.86	808.63
	Rating Area 6	Tobacco User/Non-Tobacco User	56	704.99	845.98
	Rating Area 6	Tobacco User/Non-Tobacco User	57	736.41	883.70

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110013	Rating Area 6	Tobacco User/Non-Tobacco User	58	769.95	923.95
	Rating Area 6	Tobacco User/Non-Tobacco User	59	786.57	943.89
	Rating Area 6	Tobacco User/Non-Tobacco User	60	820.12	1025.15
	Rating Area 6	Tobacco User/Non-Tobacco User	61	849.13	1061.41
	Rating Area 6	Tobacco User/Non-Tobacco User	62	868.16	1085.20
	Rating Area 6	Tobacco User/Non-Tobacco User	63	892.04	1115.04
	Rating Area 6	Tobacco User/Non-Tobacco User	64	906.53	1133.18
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	906.53	1133.18
53789PA0110015	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	164.71	164.71
53789PA0110015	Rating Area 6	Tobacco User/Non-Tobacco User	21	259.39	265.87
	Rating Area 6	Tobacco User/Non-Tobacco User	22	259.39	265.87
	Rating Area 6	Tobacco User/Non-Tobacco User	23	259.39	265.87
	Rating Area 6	Tobacco User/Non-Tobacco User	24	259.39	265.87
	Rating Area 6	Tobacco User/Non-Tobacco User	25	260.43	266.94
	Rating Area 6	Tobacco User/Non-Tobacco User	26	265.62	272.26
	Rating Area 6	Tobacco User/Non-Tobacco User	27	271.84	278.64
	Rating Area 6	Tobacco User/Non-Tobacco User	28	281.96	289.01
	Rating Area 6	Tobacco User/Non-Tobacco User	29	290.26	297.51
	Rating Area 6	Tobacco User/Non-Tobacco User	30	294.41	301.77
	Rating Area 6	Tobacco User/Non-Tobacco User	31	300.63	308.15
	Rating Area 6	Tobacco User/Non-Tobacco User	32	306.86	314.53

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0110015	Rating Area 6	Tobacco User/Non-Tobacco User	33	310.75	318.52
	Rating Area 6	Tobacco User/Non-Tobacco User	34	314.90	322.77
	Rating Area 6	Tobacco User/Non-Tobacco User	35	316.97	324.90
	Rating Area 6	Tobacco User/Non-Tobacco User	36	319.05	327.03
	Rating Area 6	Tobacco User/Non-Tobacco User	37	321.12	329.15
	Rating Area 6	Tobacco User/Non-Tobacco User	38	323.20	331.28
	Rating Area 6	Tobacco User/Non-Tobacco User	39	327.35	335.53
	Rating Area 6	Tobacco User/Non-Tobacco User	40	331.50	356.36
	Rating Area 6	Tobacco User/Non-Tobacco User	41	337.73	363.06
	Rating Area 6	Tobacco User/Non-Tobacco User	42	343.69	369.47
	Rating Area 6	Tobacco User/Non-Tobacco User	43	351.99	378.39
	Rating Area 6	Tobacco User/Non-Tobacco User	44	362.37	389.55
	Rating Area 6	Tobacco User/Non-Tobacco User	45	374.56	412.02
	Rating Area 6	Tobacco User/Non-Tobacco User	46	389.08	427.99
	Rating Area 6	Tobacco User/Non-Tobacco User	47	405.43	445.97
	Rating Area 6	Tobacco User/Non-Tobacco User	48	424.10	466.51
	Rating Area 6	Tobacco User/Non-Tobacco User	49	442.52	486.77
	Rating Area 6	Tobacco User/Non-Tobacco User	50	463.27	532.76
	Rating Area 6	Tobacco User/Non-Tobacco User	51	483.76	556.33
	Rating Area 6	Tobacco User/Non-Tobacco User	52	506.33	582.28
	Rating Area 6	Tobacco User/Non-Tobacco User	53	529.16	608.53

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110015	Rating Area 6	Tobacco User/Non-Tobacco User	54	553.80	636.87
	Rating Area 6	Tobacco User/Non-Tobacco User	55	578.44	694.13
	Rating Area 6	Tobacco User/Non-Tobacco User	56	605.16	726.19
	Rating Area 6	Tobacco User/Non-Tobacco User	57	632.13	758.56
	Rating Area 6	Tobacco User/Non-Tobacco User	58	660.93	793.11
	Rating Area 6	Tobacco User/Non-Tobacco User	59	675.19	810.23
	Rating Area 6	Tobacco User/Non-Tobacco User	60	703.98	879.98
	Rating Area 6	Tobacco User/Non-Tobacco User	61	728.89	911.11
	Rating Area 6	Tobacco User/Non-Tobacco User	62	745.23	931.53
	Rating Area 6	Tobacco User/Non-Tobacco User	63	765.72	957.15
	Rating Area 6	Tobacco User/Non-Tobacco User	64	778.16	972.71
	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	778.16	972.71
53789PA0110017	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	84.34	84.34
53789PA0110017	Rating Area 7	Tobacco User/Non-Tobacco User	21	132.82	136.14
	Rating Area 7	Tobacco User/Non-Tobacco User	22	132.82	136.14
	Rating Area 7	Tobacco User/Non-Tobacco User	23	132.82	136.14
	Rating Area 7	Tobacco User/Non-Tobacco User	24	132.82	136.14
	Rating Area 7	Tobacco User/Non-Tobacco User	25	133.35	136.68
	Rating Area 7	Tobacco User/Non-Tobacco User	26	136.00	139.40
	Rating Area 7	Tobacco User/Non-Tobacco User	27	139.19	142.67
	Rating Area 7	Tobacco User/Non-Tobacco User	28	144.37	147.98

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0110017	Rating Area 7	Tobacco User/Non-Tobacco User	29	148.62	152.34
	Rating Area 7	Tobacco User/Non-Tobacco User	30	150.75	154.51
	Rating Area 7	Tobacco User/Non-Tobacco User	31	153.93	157.78
	Rating Area 7	Tobacco User/Non-Tobacco User	32	157.12	161.05
	Rating Area 7	Tobacco User/Non-Tobacco User	33	159.11	163.09
	Rating Area 7	Tobacco User/Non-Tobacco User	34	161.24	165.27
	Rating Area 7	Tobacco User/Non-Tobacco User	35	162.30	166.36
	Rating Area 7	Tobacco User/Non-Tobacco User	36	163.36	167.45
	Rating Area 7	Tobacco User/Non-Tobacco User	37	164.42	168.54
	Rating Area 7	Tobacco User/Non-Tobacco User	38	165.49	169.62
	Rating Area 7	Tobacco User/Non-Tobacco User	39	167.61	171.80
	Rating Area 7	Tobacco User/Non-Tobacco User	40	169.74	182.47
	Rating Area 7	Tobacco User/Non-Tobacco User	41	172.93	185.89
	Rating Area 7	Tobacco User/Non-Tobacco User	42	175.98	189.18
	Rating Area 7	Tobacco User/Non-Tobacco User	43	180.23	193.75
	Rating Area 7	Tobacco User/Non-Tobacco User	44	185.54	199.46
	Rating Area 7	Tobacco User/Non-Tobacco User	45	191.78	210.96
	Rating Area 7	Tobacco User/Non-Tobacco User	46	199.22	219.14
	Rating Area 7	Tobacco User/Non-Tobacco User	47	207.59	228.35
	Rating Area 7	Tobacco User/Non-Tobacco User	48	217.15	238.87
	Rating Area 7	Tobacco User/Non-Tobacco User	49	226.58	249.24

HIOS Issuer ID*	53789				
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	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110017	Rating Area 7	Tobacco User/Non-Tobacco User	50	237.21	272.79
	Rating Area 7	Tobacco User/Non-Tobacco User	51	247.70	284.85
	Rating Area 7	Tobacco User/Non-Tobacco User	52	259.25	298.14
	Rating Area 7	Tobacco User/Non-Tobacco User	53	270.94	311.58
	Rating Area 7	Tobacco User/Non-Tobacco User	54	283.56	326.09
	Rating Area 7	Tobacco User/Non-Tobacco User	55	296.18	355.41
	Rating Area 7	Tobacco User/Non-Tobacco User	56	309.86	371.83
	Rating Area 7	Tobacco User/Non-Tobacco User	57	323.67	388.40
	Rating Area 7	Tobacco User/Non-Tobacco User	58	338.41	406.10
	Rating Area 7	Tobacco User/Non-Tobacco User	59	345.72	414.86
	Rating Area 7	Tobacco User/Non-Tobacco User	60	360.46	450.57
	Rating Area 7	Tobacco User/Non-Tobacco User	61	373.21	466.51
	Rating Area 7	Tobacco User/Non-Tobacco User	62	381.58	476.97
	Rating Area 7	Tobacco User/Non-Tobacco User	63	392.07	490.09
	Rating Area 7	Tobacco User/Non-Tobacco User	64	398.45	498.06
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	398.45	498.06
53789PA0110018	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	89.95	89.95
53789PA0110018	Rating Area 9	Tobacco User/Non-Tobacco User	21	141.65	145.19
	Rating Area 9	Tobacco User/Non-Tobacco User	22	141.65	145.19
	Rating Area 9	Tobacco User/Non-Tobacco User	23	141.65	145.19
	Rating Area 9	Tobacco User/Non-Tobacco User	24	141.65	145.19

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	25	142.22	145.77
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	26	145.05	148.68
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	27	148.45	152.16
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	28	153.97	157.82
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	29	158.51	162.47
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	30	160.77	164.79
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	31	164.17	168.28
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	32	167.57	171.76
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	33	169.70	173.94
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	34	171.96	176.26
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	35	173.10	177.42
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	36	174.23	178.58
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	37	175.36	179.75
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	38	176.49	180.91
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	39	178.76	183.23
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	40	181.03	194.60
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	41	184.43	198.26
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	42	187.69	201.76
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	43	192.22	206.63
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	44	197.88	212.73
53789PA0110018 Rating Area 9		Tobacco User/Non-Tobacco User	45	204.54	225.00

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required: Required: Require: Required: Required: Required: Enter the 14-character Plan IDSelect the Rating Area IDSelect if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planSelect the age of a subscriber eligible for the rateEnter the rate of an Individual Non-Tobacco or No Preference enrollee on a planEnter the rate of an Individual tobacco enrollee on a plan					
53789PA0110018	Rating Area 9	Tobacco User/Non-Tobacco User	46	212.47	233.72
	Rating Area 9	Tobacco User/Non-Tobacco User	47	221.40	243.54
	Rating Area 9	Tobacco User/Non-Tobacco User	48	231.60	254.76
	Rating Area 9	Tobacco User/Non-Tobacco User	49	241.65	265.82
	Rating Area 9	Tobacco User/Non-Tobacco User	50	252.99	290.93
	Rating Area 9	Tobacco User/Non-Tobacco User	51	264.18	303.80
	Rating Area 9	Tobacco User/Non-Tobacco User	52	276.50	317.97
	Rating Area 9	Tobacco User/Non-Tobacco User	53	288.96	332.31
	Rating Area 9	Tobacco User/Non-Tobacco User	54	302.42	347.78
	Rating Area 9	Tobacco User/Non-Tobacco User	55	315.88	379.05
	Rating Area 9	Tobacco User/Non-Tobacco User	56	330.47	396.56
	Rating Area 9	Tobacco User/Non-Tobacco User	57	345.20	414.24
	Rating Area 9	Tobacco User/Non-Tobacco User	58	360.92	433.11
	Rating Area 9	Tobacco User/Non-Tobacco User	59	368.71	442.46
	Rating Area 9	Tobacco User/Non-Tobacco User	60	384.44	480.54
	Rating Area 9	Tobacco User/Non-Tobacco User	61	398.03	497.54
	Rating Area 9	Tobacco User/Non-Tobacco User	62	406.96	508.70
	Rating Area 9	Tobacco User/Non-Tobacco User	63	418.15	522.69
	Rating Area 9	Tobacco User/Non-Tobacco User	64	424.94	531.18
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	424.94	531.18
53789PA0110019	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	130.72	130.72

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110019	Rating Area 7	Tobacco User/Non-Tobacco User	21	205.86	211.00
	Rating Area 7	Tobacco User/Non-Tobacco User	22	205.86	211.00
	Rating Area 7	Tobacco User/Non-Tobacco User	23	205.86	211.00
	Rating Area 7	Tobacco User/Non-Tobacco User	24	205.86	211.00
	Rating Area 7	Tobacco User/Non-Tobacco User	25	206.68	211.85
	Rating Area 7	Tobacco User/Non-Tobacco User	26	210.80	216.07
	Rating Area 7	Tobacco User/Non-Tobacco User	27	215.74	221.13
	Rating Area 7	Tobacco User/Non-Tobacco User	28	223.77	229.36
	Rating Area 7	Tobacco User/Non-Tobacco User	29	230.36	236.11
	Rating Area 7	Tobacco User/Non-Tobacco User	30	233.65	239.49
	Rating Area 7	Tobacco User/Non-Tobacco User	31	238.59	244.55
	Rating Area 7	Tobacco User/Non-Tobacco User	32	243.53	249.62
	Rating Area 7	Tobacco User/Non-Tobacco User	33	246.62	252.78
	Rating Area 7	Tobacco User/Non-Tobacco User	34	249.91	256.16
	Rating Area 7	Tobacco User/Non-Tobacco User	35	251.56	257.85
	Rating Area 7	Tobacco User/Non-Tobacco User	36	253.21	259.54
	Rating Area 7	Tobacco User/Non-Tobacco User	37	254.85	261.22
	Rating Area 7	Tobacco User/Non-Tobacco User	38	256.50	262.91
	Rating Area 7	Tobacco User/Non-Tobacco User	39	259.79	266.29
	Rating Area 7	Tobacco User/Non-Tobacco User	40	263.09	282.82
	Rating Area 7	Tobacco User/Non-Tobacco User	41	268.03	288.13

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required: Required: Require: Required: Required: Required: Enter the 14-character Plan IDSelect the Rating Area IDSelect if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planSelect the age of a subscriber eligible for the rateEnter the rate of an Individual Non-Tobacco or No Preference enrollee on a planEnter the rate of an Individual tobacco enrollee on a plan					
53789PA0110019	Rating Area 7	Tobacco User/Non-Tobacco User	42	272.76	293.22
	Rating Area 7	Tobacco User/Non-Tobacco User	43	279.35	300.30
	Rating Area 7	Tobacco User/Non-Tobacco User	44	287.58	309.15
	Rating Area 7	Tobacco User/Non-Tobacco User	45	297.26	326.99
	Rating Area 7	Tobacco User/Non-Tobacco User	46	308.79	339.67
	Rating Area 7	Tobacco User/Non-Tobacco User	47	321.76	353.93
	Rating Area 7	Tobacco User/Non-Tobacco User	48	336.58	370.24
	Rating Area 7	Tobacco User/Non-Tobacco User	49	351.19	386.31
	Rating Area 7	Tobacco User/Non-Tobacco User	50	367.66	422.81
	Rating Area 7	Tobacco User/Non-Tobacco User	51	383.93	441.51
	Rating Area 7	Tobacco User/Non-Tobacco User	52	401.84	462.11
	Rating Area 7	Tobacco User/Non-Tobacco User	53	419.95	482.94
	Rating Area 7	Tobacco User/Non-Tobacco User	54	439.51	505.43
	Rating Area 7	Tobacco User/Non-Tobacco User	55	459.06	550.88
	Rating Area 7	Tobacco User/Non-Tobacco User	56	480.27	576.32
	Rating Area 7	Tobacco User/Non-Tobacco User	57	501.68	602.01
	Rating Area 7	Tobacco User/Non-Tobacco User	58	524.53	629.43
	Rating Area 7	Tobacco User/Non-Tobacco User	59	535.85	643.02
	Rating Area 7	Tobacco User/Non-Tobacco User	60	558.70	698.37
	Rating Area 7	Tobacco User/Non-Tobacco User	61	578.46	723.08
	Rating Area 7	Tobacco User/Non-Tobacco User	62	591.43	739.29

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0110019	Rating Area 7	Tobacco User/Non-Tobacco User	63	607.69	759.62
	Rating Area 7	Tobacco User/Non-Tobacco User	64	617.57	771.97
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	617.57	771.97
53789PA0110020	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	141.54	141.54
53789PA0110020	Rating Area 9	Tobacco User/Non-Tobacco User	21	222.90	228.47
	Rating Area 9	Tobacco User/Non-Tobacco User	22	222.90	228.47
	Rating Area 9	Tobacco User/Non-Tobacco User	23	222.90	228.47
	Rating Area 9	Tobacco User/Non-Tobacco User	24	222.90	228.47
	Rating Area 9	Tobacco User/Non-Tobacco User	25	223.79	229.38
	Rating Area 9	Tobacco User/Non-Tobacco User	26	228.25	233.95
	Rating Area 9	Tobacco User/Non-Tobacco User	27	233.60	239.44
	Rating Area 9	Tobacco User/Non-Tobacco User	28	242.29	248.35
	Rating Area 9	Tobacco User/Non-Tobacco User	29	249.42	255.66
	Rating Area 9	Tobacco User/Non-Tobacco User	30	252.99	259.31
	Rating Area 9	Tobacco User/Non-Tobacco User	31	258.34	264.80
	Rating Area 9	Tobacco User/Non-Tobacco User	32	263.69	270.28
	Rating Area 9	Tobacco User/Non-Tobacco User	33	267.03	273.71
	Rating Area 9	Tobacco User/Non-Tobacco User	34	270.60	277.36
	Rating Area 9	Tobacco User/Non-Tobacco User	35	272.38	279.19
	Rating Area 9	Tobacco User/Non-Tobacco User	36	274.17	281.02
	Rating Area 9	Tobacco User/Non-Tobacco User	37	275.95	282.85

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0110020	Rating Area 9	Tobacco User/Non-Tobacco User	38	277.73	284.67
	Rating Area 9	Tobacco User/Non-Tobacco User	39	281.30	288.33
	Rating Area 9	Tobacco User/Non-Tobacco User	40	284.86	306.23
	Rating Area 9	Tobacco User/Non-Tobacco User	41	290.21	311.98
	Rating Area 9	Tobacco User/Non-Tobacco User	42	295.34	317.49
	Rating Area 9	Tobacco User/Non-Tobacco User	43	302.47	325.16
	Rating Area 9	Tobacco User/Non-Tobacco User	44	311.39	334.74
	Rating Area 9	Tobacco User/Non-Tobacco User	45	321.87	354.05
	Rating Area 9	Tobacco User/Non-Tobacco User	46	334.35	367.78
	Rating Area 9	Tobacco User/Non-Tobacco User	47	348.39	383.23
	Rating Area 9	Tobacco User/Non-Tobacco User	48	364.44	400.88
	Rating Area 9	Tobacco User/Non-Tobacco User	49	380.26	418.29
	Rating Area 9	Tobacco User/Non-Tobacco User	50	398.10	457.81
	Rating Area 9	Tobacco User/Non-Tobacco User	51	415.71	478.06
	Rating Area 9	Tobacco User/Non-Tobacco User	52	435.10	500.36
	Rating Area 9	Tobacco User/Non-Tobacco User	53	454.71	522.92
	Rating Area 9	Tobacco User/Non-Tobacco User	54	475.89	547.27
	Rating Area 9	Tobacco User/Non-Tobacco User	55	497.06	596.48
	Rating Area 9	Tobacco User/Non-Tobacco User	56	520.02	624.03
	Rating Area 9	Tobacco User/Non-Tobacco User	57	543.20	651.84
	Rating Area 9	Tobacco User/Non-Tobacco User	58	567.95	681.53

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110020	Rating Area 9	Tobacco User/Non-Tobacco User	59	580.20	696.25
	Rating Area 9	Tobacco User/Non-Tobacco User	60	604.95	756.18
	Rating Area 9	Tobacco User/Non-Tobacco User	61	626.34	782.93
	Rating Area 9	Tobacco User/Non-Tobacco User	62	640.39	800.48
	Rating Area 9	Tobacco User/Non-Tobacco User	63	658.00	822.50
	Rating Area 9	Tobacco User/Non-Tobacco User	64	668.69	835.87
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	668.69	835.87
53789PA0110021	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	153.58	153.58
53789PA0110021	Rating Area 7	Tobacco User/Non-Tobacco User	21	241.85	247.90
	Rating Area 7	Tobacco User/Non-Tobacco User	22	241.85	247.90
	Rating Area 7	Tobacco User/Non-Tobacco User	23	241.85	247.90
	Rating Area 7	Tobacco User/Non-Tobacco User	24	241.85	247.90
	Rating Area 7	Tobacco User/Non-Tobacco User	25	242.82	248.89
	Rating Area 7	Tobacco User/Non-Tobacco User	26	247.66	253.85
	Rating Area 7	Tobacco User/Non-Tobacco User	27	253.46	259.80
	Rating Area 7	Tobacco User/Non-Tobacco User	28	262.90	269.47
	Rating Area 7	Tobacco User/Non-Tobacco User	29	270.64	277.40
	Rating Area 7	Tobacco User/Non-Tobacco User	30	274.50	281.37
	Rating Area 7	Tobacco User/Non-Tobacco User	31	280.31	287.32
	Rating Area 7	Tobacco User/Non-Tobacco User	32	286.11	293.27
	Rating Area 7	Tobacco User/Non-Tobacco User	33	289.74	296.99

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110021	Rating Area 7	Tobacco User/Non-Tobacco User	34	293.61	300.95
	Rating Area 7	Tobacco User/Non-Tobacco User	35	295.55	302.93
	Rating Area 7	Tobacco User/Non-Tobacco User	36	297.48	304.92
	Rating Area 7	Tobacco User/Non-Tobacco User	37	299.42	306.90
	Rating Area 7	Tobacco User/Non-Tobacco User	38	301.35	308.88
	Rating Area 7	Tobacco User/Non-Tobacco User	39	305.22	312.85
	Rating Area 7	Tobacco User/Non-Tobacco User	40	309.09	332.27
	Rating Area 7	Tobacco User/Non-Tobacco User	41	314.89	338.51
	Rating Area 7	Tobacco User/Non-Tobacco User	42	320.46	344.49
	Rating Area 7	Tobacco User/Non-Tobacco User	43	328.20	352.81
	Rating Area 7	Tobacco User/Non-Tobacco User	44	337.87	363.21
	Rating Area 7	Tobacco User/Non-Tobacco User	45	349.24	384.16
	Rating Area 7	Tobacco User/Non-Tobacco User	46	362.78	399.06
	Rating Area 7	Tobacco User/Non-Tobacco User	47	378.02	415.82
	Rating Area 7	Tobacco User/Non-Tobacco User	48	395.43	434.98
	Rating Area 7	Tobacco User/Non-Tobacco User	49	412.60	453.86
	Rating Area 7	Tobacco User/Non-Tobacco User	50	431.95	496.75
	Rating Area 7	Tobacco User/Non-Tobacco User	51	451.06	518.72
	Rating Area 7	Tobacco User/Non-Tobacco User	52	472.10	542.92
	Rating Area 7	Tobacco User/Non-Tobacco User	53	493.38	567.39
	Rating Area 7	Tobacco User/Non-Tobacco User	54	516.36	593.81

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110021	Rating Area 7	Tobacco User/Non-Tobacco User	55	539.34	647.20
	Rating Area 7	Tobacco User/Non-Tobacco User	56	564.25	677.10
	Rating Area 7	Tobacco User/Non-Tobacco User	57	589.40	707.28
	Rating Area 7	Tobacco User/Non-Tobacco User	58	616.25	739.49
	Rating Area 7	Tobacco User/Non-Tobacco User	59	629.55	755.46
	Rating Area 7	Tobacco User/Non-Tobacco User	60	656.39	820.49
	Rating Area 7	Tobacco User/Non-Tobacco User	61	679.61	849.51
	Rating Area 7	Tobacco User/Non-Tobacco User	62	694.85	868.56
	Rating Area 7	Tobacco User/Non-Tobacco User	63	713.95	892.44
	Rating Area 7	Tobacco User/Non-Tobacco User	64	725.55	906.95
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	725.55	906.95
53789PA0110022	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	166.96	166.96
53789PA0110022	Rating Area 9	Tobacco User/Non-Tobacco User	21	262.93	269.51
	Rating Area 9	Tobacco User/Non-Tobacco User	22	262.93	269.51
	Rating Area 9	Tobacco User/Non-Tobacco User	23	262.93	269.51
	Rating Area 9	Tobacco User/Non-Tobacco User	24	262.93	269.51
	Rating Area 9	Tobacco User/Non-Tobacco User	25	263.99	270.59
	Rating Area 9	Tobacco User/Non-Tobacco User	26	269.24	275.98
	Rating Area 9	Tobacco User/Non-Tobacco User	27	275.55	282.44
	Rating Area 9	Tobacco User/Non-Tobacco User	28	285.81	292.95
	Rating Area 9	Tobacco User/Non-Tobacco User	29	294.22	301.58

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0110022	Rating Area 9	Tobacco User/Non-Tobacco User	30	298.43	305.89
	Rating Area 9	Tobacco User/Non-Tobacco User	31	304.74	312.36
	Rating Area 9	Tobacco User/Non-Tobacco User	32	311.05	318.83
	Rating Area 9	Tobacco User/Non-Tobacco User	33	315.00	322.87
	Rating Area 9	Tobacco User/Non-Tobacco User	34	319.20	327.18
	Rating Area 9	Tobacco User/Non-Tobacco User	35	321.31	329.34
	Rating Area 9	Tobacco User/Non-Tobacco User	36	323.41	331.49
	Rating Area 9	Tobacco User/Non-Tobacco User	37	325.51	333.65
	Rating Area 9	Tobacco User/Non-Tobacco User	38	327.62	335.81
	Rating Area 9	Tobacco User/Non-Tobacco User	39	331.82	340.12
	Rating Area 9	Tobacco User/Non-Tobacco User	40	336.03	361.23
	Rating Area 9	Tobacco User/Non-Tobacco User	41	342.34	368.02
	Rating Area 9	Tobacco User/Non-Tobacco User	42	348.39	374.52
	Rating Area 9	Tobacco User/Non-Tobacco User	43	356.80	383.56
	Rating Area 9	Tobacco User/Non-Tobacco User	44	367.32	394.87
	Rating Area 9	Tobacco User/Non-Tobacco User	45	379.68	417.64
	Rating Area 9	Tobacco User/Non-Tobacco User	46	394.40	433.84
	Rating Area 9	Tobacco User/Non-Tobacco User	47	410.97	452.06
	Rating Area 9	Tobacco User/Non-Tobacco User	48	429.90	472.89
	Rating Area 9	Tobacco User/Non-Tobacco User	49	448.57	493.42
	Rating Area 9	Tobacco User/Non-Tobacco User	50	469.60	540.04

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110022	Rating Area 9	Tobacco User/Non-Tobacco User	51	490.37	563.93
	Rating Area 9	Tobacco User/Non-Tobacco User	52	513.25	590.23
	Rating Area 9	Tobacco User/Non-Tobacco User	53	536.39	616.84
	Rating Area 9	Tobacco User/Non-Tobacco User	54	561.36	645.57
	Rating Area 9	Tobacco User/Non-Tobacco User	55	586.34	703.61
	Rating Area 9	Tobacco User/Non-Tobacco User	56	613.43	736.11
	Rating Area 9	Tobacco User/Non-Tobacco User	57	640.77	768.92
	Rating Area 9	Tobacco User/Non-Tobacco User	58	669.96	803.95
	Rating Area 9	Tobacco User/Non-Tobacco User	59	684.42	821.30
	Rating Area 9	Tobacco User/Non-Tobacco User	60	713.60	892.00
	Rating Area 9	Tobacco User/Non-Tobacco User	61	738.84	923.56
	Rating Area 9	Tobacco User/Non-Tobacco User	62	755.41	944.26
	Rating Area 9	Tobacco User/Non-Tobacco User	63	776.18	970.23
	Rating Area 9	Tobacco User/Non-Tobacco User	64	788.79	986.00
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	788.79	986.00
53789PA0110027	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	158.82	158.82
53789PA0110027	Rating Area 7	Tobacco User/Non-Tobacco User	21	250.12	256.37
	Rating Area 7	Tobacco User/Non-Tobacco User	22	250.12	256.37
	Rating Area 7	Tobacco User/Non-Tobacco User	23	250.12	256.37
	Rating Area 7	Tobacco User/Non-Tobacco User	24	250.12	256.37
	Rating Area 7	Tobacco User/Non-Tobacco User	25	251.12	257.39

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110027	Rating Area 7	Tobacco User/Non-Tobacco User	26	256.12	262.52
	Rating Area 7	Tobacco User/Non-Tobacco User	27	262.12	268.68
	Rating Area 7	Tobacco User/Non-Tobacco User	28	271.88	278.67
	Rating Area 7	Tobacco User/Non-Tobacco User	29	279.88	286.88
	Rating Area 7	Tobacco User/Non-Tobacco User	30	283.88	290.98
	Rating Area 7	Tobacco User/Non-Tobacco User	31	289.88	297.13
	Rating Area 7	Tobacco User/Non-Tobacco User	32	295.89	303.28
	Rating Area 7	Tobacco User/Non-Tobacco User	33	299.64	307.13
	Rating Area 7	Tobacco User/Non-Tobacco User	34	303.64	311.23
	Rating Area 7	Tobacco User/Non-Tobacco User	35	305.64	313.28
	Rating Area 7	Tobacco User/Non-Tobacco User	36	307.64	315.33
	Rating Area 7	Tobacco User/Non-Tobacco User	37	309.64	317.39
	Rating Area 7	Tobacco User/Non-Tobacco User	38	311.65	319.44
	Rating Area 7	Tobacco User/Non-Tobacco User	39	315.65	323.54
	Rating Area 7	Tobacco User/Non-Tobacco User	40	319.65	343.62
	Rating Area 7	Tobacco User/Non-Tobacco User	41	325.65	350.08
	Rating Area 7	Tobacco User/Non-Tobacco User	42	331.40	356.26
	Rating Area 7	Tobacco User/Non-Tobacco User	43	339.41	364.86
	Rating Area 7	Tobacco User/Non-Tobacco User	44	349.41	375.62
	Rating Area 7	Tobacco User/Non-Tobacco User	45	361.17	397.28
	Rating Area 7	Tobacco User/Non-Tobacco User	46	375.17	412.69

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110027	Rating Area 7	Tobacco User/Non-Tobacco User	47	390.93	430.03
	Rating Area 7	Tobacco User/Non-Tobacco User	48	408.94	449.83
	Rating Area 7	Tobacco User/Non-Tobacco User	49	426.70	469.37
	Rating Area 7	Tobacco User/Non-Tobacco User	50	446.71	513.71
	Rating Area 7	Tobacco User/Non-Tobacco User	51	466.47	536.44
	Rating Area 7	Tobacco User/Non-Tobacco User	52	488.23	561.46
	Rating Area 7	Tobacco User/Non-Tobacco User	53	510.24	586.77
	Rating Area 7	Tobacco User/Non-Tobacco User	54	534.00	614.10
	Rating Area 7	Tobacco User/Non-Tobacco User	55	557.76	669.31
	Rating Area 7	Tobacco User/Non-Tobacco User	56	583.52	700.23
	Rating Area 7	Tobacco User/Non-Tobacco User	57	609.53	731.44
	Rating Area 7	Tobacco User/Non-Tobacco User	58	637.30	764.76
	Rating Area 7	Tobacco User/Non-Tobacco User	59	651.05	781.26
	Rating Area 7	Tobacco User/Non-Tobacco User	60	678.82	848.52
	Rating Area 7	Tobacco User/Non-Tobacco User	61	702.83	878.53
	Rating Area 7	Tobacco User/Non-Tobacco User	62	718.58	898.23
	Rating Area 7	Tobacco User/Non-Tobacco User	63	738.34	922.93
	Rating Area 7	Tobacco User/Non-Tobacco User	64	750.35	937.94
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	750.35	937.94
53789PA0110028	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	172.80	172.80
53789PA0110028	Rating Area 9	Tobacco User/Non-Tobacco User	21	272.12	278.92

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	22	272.12	278.92
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	23	272.12	278.92
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	24	272.12	278.92
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	25	273.21	280.04
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	26	278.65	285.62
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	27	285.18	292.31
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	28	295.80	303.19
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	29	304.50	312.12
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	30	308.86	316.58
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	31	315.39	323.27
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	32	321.92	329.97
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	33	326.00	334.15
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	34	330.36	338.61
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	35	332.53	340.85
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	36	334.71	343.08
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	37	336.89	345.31
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	38	339.06	347.54
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	39	343.42	352.00
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	40	347.77	373.85
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	41	354.30	380.87
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	42	360.56	387.60

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	43	369.27	396.96
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	44	380.15	408.66
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	45	392.94	432.24
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	46	408.18	449.00
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	47	425.33	467.86
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	48	444.92	489.41
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	49	464.24	510.66
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	50	486.01	558.91
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	51	507.51	583.63
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	52	531.18	610.86
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	53	555.13	638.40
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	54	580.98	668.13
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	55	606.83	728.20
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	56	634.86	761.83
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	57	663.16	795.79
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	58	693.37	832.04
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	59	708.33	850.00
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	60	738.54	923.17
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	61	764.66	955.83
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	62	781.80	977.26
53789PA0110028 Rating Area 9		Tobacco User/Non-Tobacco User	63	803.30	1004.13

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110028	Rating Area 9	Tobacco User/Non-Tobacco User	64	816.35	1020.45
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	816.35	1020.45
53789PA0110031	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	194.86	194.86
53789PA0110031	Rating Area 7	Tobacco User/Non-Tobacco User	21	306.87	314.54
	Rating Area 7	Tobacco User/Non-Tobacco User	22	306.87	314.54
	Rating Area 7	Tobacco User/Non-Tobacco User	23	306.87	314.54
	Rating Area 7	Tobacco User/Non-Tobacco User	24	306.87	314.54
	Rating Area 7	Tobacco User/Non-Tobacco User	25	308.10	315.80
	Rating Area 7	Tobacco User/Non-Tobacco User	26	314.23	322.09
	Rating Area 7	Tobacco User/Non-Tobacco User	27	321.60	329.64
	Rating Area 7	Tobacco User/Non-Tobacco User	28	333.57	341.90
	Rating Area 7	Tobacco User/Non-Tobacco User	29	343.39	351.97
	Rating Area 7	Tobacco User/Non-Tobacco User	30	348.30	357.00
	Rating Area 7	Tobacco User/Non-Tobacco User	31	355.66	364.55
	Rating Area 7	Tobacco User/Non-Tobacco User	32	363.03	372.10
	Rating Area 7	Tobacco User/Non-Tobacco User	33	367.63	376.82
	Rating Area 7	Tobacco User/Non-Tobacco User	34	372.54	381.85
	Rating Area 7	Tobacco User/Non-Tobacco User	35	374.99	384.37
	Rating Area 7	Tobacco User/Non-Tobacco User	36	377.45	386.88
	Rating Area 7	Tobacco User/Non-Tobacco User	37	379.90	389.40
	Rating Area 7	Tobacco User/Non-Tobacco User	38	382.36	391.92

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0110031	Rating Area 7	Tobacco User/Non-Tobacco User	39	387.27	396.95
	Rating Area 7	Tobacco User/Non-Tobacco User	40	392.18	421.59
	Rating Area 7	Tobacco User/Non-Tobacco User	41	399.54	429.51
	Rating Area 7	Tobacco User/Non-Tobacco User	42	406.60	437.10
	Rating Area 7	Tobacco User/Non-Tobacco User	43	416.42	447.65
	Rating Area 7	Tobacco User/Non-Tobacco User	44	428.70	460.85
	Rating Area 7	Tobacco User/Non-Tobacco User	45	443.12	487.43
	Rating Area 7	Tobacco User/Non-Tobacco User	46	460.30	506.33
	Rating Area 7	Tobacco User/Non-Tobacco User	47	479.64	527.60
	Rating Area 7	Tobacco User/Non-Tobacco User	48	501.73	551.90
	Rating Area 7	Tobacco User/Non-Tobacco User	49	523.52	575.87
	Rating Area 7	Tobacco User/Non-Tobacco User	50	548.07	630.28
	Rating Area 7	Tobacco User/Non-Tobacco User	51	572.31	658.16
	Rating Area 7	Tobacco User/Non-Tobacco User	52	599.01	688.86
	Rating Area 7	Tobacco User/Non-Tobacco User	53	626.01	719.91
	Rating Area 7	Tobacco User/Non-Tobacco User	54	655.16	753.44
	Rating Area 7	Tobacco User/Non-Tobacco User	55	684.32	821.18
	Rating Area 7	Tobacco User/Non-Tobacco User	56	715.92	859.11
	Rating Area 7	Tobacco User/Non-Tobacco User	57	747.84	897.41
	Rating Area 7	Tobacco User/Non-Tobacco User	58	781.90	938.28
	Rating Area 7	Tobacco User/Non-Tobacco User	59	798.78	958.53

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110031	Rating Area 7	Tobacco User/Non-Tobacco User	60	832.84	1041.05
	Rating Area 7	Tobacco User/Non-Tobacco User	61	862.30	1077.87
	Rating Area 7	Tobacco User/Non-Tobacco User	62	881.63	1102.04
	Rating Area 7	Tobacco User/Non-Tobacco User	63	905.88	1132.34
	Rating Area 7	Tobacco User/Non-Tobacco User	64	920.60	1150.76
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	920.60	1150.76
53789PA0110032	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	212.88	212.88
53789PA0110032	Rating Area 9	Tobacco User/Non-Tobacco User	21	335.24	343.62
	Rating Area 9	Tobacco User/Non-Tobacco User	22	335.24	343.62
	Rating Area 9	Tobacco User/Non-Tobacco User	23	335.24	343.62
	Rating Area 9	Tobacco User/Non-Tobacco User	24	335.24	343.62
	Rating Area 9	Tobacco User/Non-Tobacco User	25	336.58	345.00
	Rating Area 9	Tobacco User/Non-Tobacco User	26	343.29	351.87
	Rating Area 9	Tobacco User/Non-Tobacco User	27	351.34	360.12
	Rating Area 9	Tobacco User/Non-Tobacco User	28	364.41	373.52
	Rating Area 9	Tobacco User/Non-Tobacco User	29	375.14	384.52
	Rating Area 9	Tobacco User/Non-Tobacco User	30	380.50	390.01
	Rating Area 9	Tobacco User/Non-Tobacco User	31	388.55	398.26
	Rating Area 9	Tobacco User/Non-Tobacco User	32	396.59	406.51
	Rating Area 9	Tobacco User/Non-Tobacco User	33	401.62	411.66
	Rating Area 9	Tobacco User/Non-Tobacco User	34	406.99	417.16

HIOS Issuer ID*	53789				
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	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	35	409.67	419.91
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	36	412.35	422.66
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	37	415.03	425.41
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	38	417.71	428.16
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	39	423.08	433.65
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	40	428.44	460.57
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	41	436.49	469.22
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	42	444.20	477.51
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	43	454.93	489.05
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	44	468.34	503.46
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	45	484.09	532.50
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	46	502.87	553.15
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	47	523.99	576.38
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	48	548.12	602.94
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	49	571.93	629.12
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	50	598.75	688.56
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	51	625.23	719.01
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	52	654.40	752.56
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	53	683.90	786.48
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	54	715.75	823.11
53789PA0110032 Rating Area 9		Tobacco User/Non-Tobacco User	55	747.59	897.11

HIOS Issuer ID*	53789				
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	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110032	Rating Area 9	Tobacco User/Non-Tobacco User	56	782.12	938.55
	Rating Area 9	Tobacco User/Non-Tobacco User	57	816.99	980.39
	Rating Area 9	Tobacco User/Non-Tobacco User	58	854.20	1025.04
	Rating Area 9	Tobacco User/Non-Tobacco User	59	872.64	1047.17
	Rating Area 9	Tobacco User/Non-Tobacco User	60	909.85	1137.31
	Rating Area 9	Tobacco User/Non-Tobacco User	61	942.03	1177.54
	Rating Area 9	Tobacco User/Non-Tobacco User	62	963.16	1203.94
	Rating Area 9	Tobacco User/Non-Tobacco User	63	989.64	1237.05
	Rating Area 9	Tobacco User/Non-Tobacco User	64	1005.72	1257.16
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	1005.72	1257.16
53789PA0110035	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	167.24	167.24
53789PA0110035	Rating Area 7	Tobacco User/Non-Tobacco User	21	263.38	269.96
	Rating Area 7	Tobacco User/Non-Tobacco User	22	263.38	269.96
	Rating Area 7	Tobacco User/Non-Tobacco User	23	263.38	269.96
	Rating Area 7	Tobacco User/Non-Tobacco User	24	263.38	269.96
	Rating Area 7	Tobacco User/Non-Tobacco User	25	264.43	271.04
	Rating Area 7	Tobacco User/Non-Tobacco User	26	269.70	276.44
	Rating Area 7	Tobacco User/Non-Tobacco User	27	276.02	282.92
	Rating Area 7	Tobacco User/Non-Tobacco User	28	286.29	293.45
	Rating Area 7	Tobacco User/Non-Tobacco User	29	294.72	302.09
	Rating Area 7	Tobacco User/Non-Tobacco User	30	298.93	306.41

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	31	305.25	312.89
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	32	311.58	319.37
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	33	315.53	323.41
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	34	319.74	327.73
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	35	321.85	329.89
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	36	323.95	332.05
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	37	326.06	334.21
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	38	328.17	336.37
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	39	332.38	340.69
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	40	336.60	361.84
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	41	342.92	368.64
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	42	348.98	375.15
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	43	357.40	384.21
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	44	367.94	395.53
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	45	380.32	418.35
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	46	395.07	434.57
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	47	411.66	452.83
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	48	430.62	473.68
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	49	449.32	494.25
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	50	470.39	540.95
53789PA0110035 Rating Area 7		Tobacco User/Non-Tobacco User	51	491.20	564.88

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110035	Rating Area 7	Tobacco User/Non-Tobacco User	52	514.11	591.23
	Rating Area 7	Tobacco User/Non-Tobacco User	53	537.29	617.88
	Rating Area 7	Tobacco User/Non-Tobacco User	54	562.31	646.66
	Rating Area 7	Tobacco User/Non-Tobacco User	55	587.33	704.80
	Rating Area 7	Tobacco User/Non-Tobacco User	56	614.46	737.35
	Rating Area 7	Tobacco User/Non-Tobacco User	57	641.85	770.22
	Rating Area 7	Tobacco User/Non-Tobacco User	58	671.09	805.30
	Rating Area 7	Tobacco User/Non-Tobacco User	59	685.57	822.69
	Rating Area 7	Tobacco User/Non-Tobacco User	60	714.81	893.51
	Rating Area 7	Tobacco User/Non-Tobacco User	61	740.09	925.11
	Rating Area 7	Tobacco User/Non-Tobacco User	62	756.68	945.86
	Rating Area 7	Tobacco User/Non-Tobacco User	63	777.49	971.86
	Rating Area 7	Tobacco User/Non-Tobacco User	64	790.13	987.67
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	790.13	987.67
53789PA0110036	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	182.16	182.16
53789PA0110036	Rating Area 9	Tobacco User/Non-Tobacco User	21	286.87	294.04
	Rating Area 9	Tobacco User/Non-Tobacco User	22	286.87	294.04
	Rating Area 9	Tobacco User/Non-Tobacco User	23	286.87	294.04
	Rating Area 9	Tobacco User/Non-Tobacco User	24	286.87	294.04
	Rating Area 9	Tobacco User/Non-Tobacco User	25	288.02	295.22
	Rating Area 9	Tobacco User/Non-Tobacco User	26	293.76	301.10

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0110036	Rating Area 9	Tobacco User/Non-Tobacco User	27	300.64	308.16
	Rating Area 9	Tobacco User/Non-Tobacco User	28	311.83	319.63
	Rating Area 9	Tobacco User/Non-Tobacco User	29	321.01	329.04
	Rating Area 9	Tobacco User/Non-Tobacco User	30	325.60	333.74
	Rating Area 9	Tobacco User/Non-Tobacco User	31	332.48	340.80
	Rating Area 9	Tobacco User/Non-Tobacco User	32	339.37	347.85
	Rating Area 9	Tobacco User/Non-Tobacco User	33	343.67	352.26
	Rating Area 9	Tobacco User/Non-Tobacco User	34	348.26	356.97
	Rating Area 9	Tobacco User/Non-Tobacco User	35	350.56	359.32
	Rating Area 9	Tobacco User/Non-Tobacco User	36	352.85	361.67
	Rating Area 9	Tobacco User/Non-Tobacco User	37	355.15	364.03
	Rating Area 9	Tobacco User/Non-Tobacco User	38	357.44	366.38
	Rating Area 9	Tobacco User/Non-Tobacco User	39	362.03	371.08
	Rating Area 9	Tobacco User/Non-Tobacco User	40	366.62	394.12
	Rating Area 9	Tobacco User/Non-Tobacco User	41	373.51	401.52
	Rating Area 9	Tobacco User/Non-Tobacco User	42	380.11	408.61
	Rating Area 9	Tobacco User/Non-Tobacco User	43	389.29	418.48
	Rating Area 9	Tobacco User/Non-Tobacco User	44	400.76	430.82
	Rating Area 9	Tobacco User/Non-Tobacco User	45	414.24	455.67
	Rating Area 9	Tobacco User/Non-Tobacco User	46	430.31	473.34
	Rating Area 9	Tobacco User/Non-Tobacco User	47	448.38	493.22

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required: Required: Require: Required: Required: Required: Enter the 14-character Plan IDSelect the Rating Area IDSelect if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planSelect the age of a subscriber eligible for the rateEnter the rate of an Individual Non-Tobacco or No Preference enrollee on a planEnter the rate of an Individual tobacco enrollee on a plan					
53789PA0110036	Rating Area 9	Tobacco User/Non-Tobacco User	48	469.04	515.94
	Rating Area 9	Tobacco User/Non-Tobacco User	49	489.40	538.34
	Rating Area 9	Tobacco User/Non-Tobacco User	50	512.35	589.21
	Rating Area 9	Tobacco User/Non-Tobacco User	51	535.02	615.27
	Rating Area 9	Tobacco User/Non-Tobacco User	52	559.97	643.97
	Rating Area 9	Tobacco User/Non-Tobacco User	53	585.22	673.00
	Rating Area 9	Tobacco User/Non-Tobacco User	54	612.47	704.34
	Rating Area 9	Tobacco User/Non-Tobacco User	55	639.73	767.67
	Rating Area 9	Tobacco User/Non-Tobacco User	56	669.27	803.13
	Rating Area 9	Tobacco User/Non-Tobacco User	57	699.11	838.93
	Rating Area 9	Tobacco User/Non-Tobacco User	58	730.95	877.14
	Rating Area 9	Tobacco User/Non-Tobacco User	59	746.73	896.07
	Rating Area 9	Tobacco User/Non-Tobacco User	60	778.57	973.21
	Rating Area 9	Tobacco User/Non-Tobacco User	61	806.11	1007.64
	Rating Area 9	Tobacco User/Non-Tobacco User	62	824.18	1030.23
	Rating Area 9	Tobacco User/Non-Tobacco User	63	846.85	1058.56
	Rating Area 9	Tobacco User/Non-Tobacco User	64	860.61	1075.77
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	860.61	1075.77
53789PA0110041	Rating Area 6	Tobacco User/Non-Tobacco User	0-20	161.90	161.90
53789PA0110041	Rating Area 6	Tobacco User/Non-Tobacco User	21	254.96	261.33
53789PA0110041	Rating Area 6	Tobacco User/Non-Tobacco User	22	254.96	261.33

HIOS Issuer ID*	53789				
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	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110041	Rating Area 6	Tobacco User/Non-Tobacco User	23	254.96	261.33
	Rating Area 6	Tobacco User/Non-Tobacco User	24	254.96	261.33
	Rating Area 6	Tobacco User/Non-Tobacco User	25	255.98	262.38
	Rating Area 6	Tobacco User/Non-Tobacco User	26	261.08	267.61
	Rating Area 6	Tobacco User/Non-Tobacco User	27	267.20	273.88
	Rating Area 6	Tobacco User/Non-Tobacco User	28	277.14	284.07
	Rating Area 6	Tobacco User/Non-Tobacco User	29	285.30	292.43
	Rating Area 6	Tobacco User/Non-Tobacco User	30	289.38	296.61
	Rating Area 6	Tobacco User/Non-Tobacco User	31	295.50	302.89
	Rating Area 6	Tobacco User/Non-Tobacco User	32	301.62	309.16
	Rating Area 6	Tobacco User/Non-Tobacco User	33	305.44	313.08
	Rating Area 6	Tobacco User/Non-Tobacco User	34	309.52	317.26
	Rating Area 6	Tobacco User/Non-Tobacco User	35	311.56	319.35
	Rating Area 6	Tobacco User/Non-Tobacco User	36	313.60	321.44
	Rating Area 6	Tobacco User/Non-Tobacco User	37	315.64	323.53
	Rating Area 6	Tobacco User/Non-Tobacco User	38	317.68	325.62
	Rating Area 6	Tobacco User/Non-Tobacco User	39	321.76	329.80
	Rating Area 6	Tobacco User/Non-Tobacco User	40	325.84	350.28
	Rating Area 6	Tobacco User/Non-Tobacco User	41	331.96	356.85
	Rating Area 6	Tobacco User/Non-Tobacco User	42	337.82	363.16
	Rating Area 6	Tobacco User/Non-Tobacco User	43	345.98	371.93

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	44	356.18	382.89
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	45	368.16	404.98
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	46	382.44	420.68
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	47	398.50	438.35
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	48	416.86	458.55
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	49	434.96	478.46
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	50	455.36	523.66
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	51	475.50	546.83
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	52	497.68	572.33
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	53	520.12	598.14
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	54	544.34	625.99
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	55	568.56	682.27
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	56	594.82	713.79
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	57	621.34	745.61
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	58	649.64	779.57
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	59	663.66	796.39
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	60	691.96	864.95
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	61	716.44	895.55
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	62	732.50	915.63
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	63	752.64	940.80
53789PA0110041 Rating Area 6		Tobacco User/Non-Tobacco User	64	764.87	956.10

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
<div><div>Plan ID*</div><div>Required: Enter the 14-character Plan ID</div></div> <div><div>Rating Area ID*</div><div>Required: Select the Rating Area ID</div></div> <div><div>Tobacco*</div><div>Require: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan</div></div> <div><div>Age*</div><div>Required: Select the age of a subscriber eligible for the rate</div></div> <div><div>Individual Rate*</div><div>Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan</div></div> <div><div>Individual Tobacco Rate*</div><div>Required: Enter the rate of an Individual tobacco enrollee on a plan</div></div>					
53789PA0110041	Rating Area 6	Tobacco User/Non-Tobacco User	65 and over	764.87	956.10
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	0-20	164.38	164.38
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	21	258.87	265.34
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	22	258.87	265.34
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	23	258.87	265.34
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	24	258.87	265.34
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	25	259.91	266.41
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	26	265.09	271.71
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	27	271.30	278.08
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	28	281.40	288.43
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	29	289.68	296.92
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	30	293.82	301.17
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	31	300.03	307.53
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	32	306.25	313.90
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	33	310.13	317.88
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	34	314.27	322.13
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	35	316.34	324.25
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	36	318.41	326.37
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	37	320.48	328.50
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	38	322.56	330.62
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	39	326.70	334.87

HIOS Issuer ID*	53789				
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	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	40	330.84	355.65
	Rating Area 7	Tobacco User/Non-Tobacco User	41	337.05	362.33
	Rating Area 7	Tobacco User/Non-Tobacco User	42	343.01	368.73
	Rating Area 7	Tobacco User/Non-Tobacco User	43	351.29	377.64
	Rating Area 7	Tobacco User/Non-Tobacco User	44	361.65	388.77
	Rating Area 7	Tobacco User/Non-Tobacco User	45	373.81	411.19
	Rating Area 7	Tobacco User/Non-Tobacco User	46	388.31	427.14
	Rating Area 7	Tobacco User/Non-Tobacco User	47	404.62	445.08
	Rating Area 7	Tobacco User/Non-Tobacco User	48	423.26	465.58
	Rating Area 7	Tobacco User/Non-Tobacco User	49	441.64	485.80
	Rating Area 7	Tobacco User/Non-Tobacco User	50	462.35	531.70
	Rating Area 7	Tobacco User/Non-Tobacco User	51	482.80	555.22
	Rating Area 7	Tobacco User/Non-Tobacco User	52	505.32	581.12
	Rating Area 7	Tobacco User/Non-Tobacco User	53	528.10	607.32
	Rating Area 7	Tobacco User/Non-Tobacco User	54	552.69	635.60
	Rating Area 7	Tobacco User/Non-Tobacco User	55	577.29	692.74
	Rating Area 7	Tobacco User/Non-Tobacco User	56	603.95	724.74
	Rating Area 7	Tobacco User/Non-Tobacco User	57	630.87	757.05
	Rating Area 7	Tobacco User/Non-Tobacco User	58	659.61	791.53
	Rating Area 7	Tobacco User/Non-Tobacco User	59	673.85	808.62
	Rating Area 7	Tobacco User/Non-Tobacco User	60	702.58	878.23

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
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	Require: 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
53789PA0110042	Rating Area 7	Tobacco User/Non-Tobacco User	61	727.43	909.29
	Rating Area 7	Tobacco User/Non-Tobacco User	62	743.74	929.68
	Rating Area 7	Tobacco User/Non-Tobacco User	63	764.19	955.24
	Rating Area 7	Tobacco User/Non-Tobacco User	64	776.61	970.77
	Rating Area 7	Tobacco User/Non-Tobacco User	65 and over	776.61	970.77
53789PA0110043	Rating Area 9	Tobacco User/Non-Tobacco User	0-20	178.98	178.98
53789PA0110043	Rating Area 9	Tobacco User/Non-Tobacco User	21	281.85	288.90
	Rating Area 9	Tobacco User/Non-Tobacco User	22	281.85	288.90
	Rating Area 9	Tobacco User/Non-Tobacco User	23	281.85	288.90
	Rating Area 9	Tobacco User/Non-Tobacco User	24	281.85	288.90
	Rating Area 9	Tobacco User/Non-Tobacco User	25	282.98	290.05
	Rating Area 9	Tobacco User/Non-Tobacco User	26	288.62	295.83
	Rating Area 9	Tobacco User/Non-Tobacco User	27	295.38	302.77
	Rating Area 9	Tobacco User/Non-Tobacco User	28	306.37	314.03
	Rating Area 9	Tobacco User/Non-Tobacco User	29	315.39	323.28
	Rating Area 9	Tobacco User/Non-Tobacco User	30	319.90	327.90
	Rating Area 9	Tobacco User/Non-Tobacco User	31	326.67	334.83
	Rating Area 9	Tobacco User/Non-Tobacco User	32	333.43	341.77
	Rating Area 9	Tobacco User/Non-Tobacco User	33	337.66	346.10
	Rating Area 9	Tobacco User/Non-Tobacco User	34	342.17	350.72
	Rating Area 9	Tobacco User/Non-Tobacco User	35	344.42	353.03

HIOS Issuer ID*	53789				
	Federal TIN*	23-2399845			
	Rate Effective Date*	1/1/2017			
	Rate Expiration Date*	12/31/2017			
Plan ID*Rating Area ID*Tobacco*Age*Individual Rate*Individual Tobacco Rate*					
Required:Enter the 14-character Plan IDRequired:Select the Rating Area IDRequire:Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a planRequired:Select the age of a subscriber eligible for the rateRequired:Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a planRequired:Enter the rate of an Individual tobacco enrollee on a plan					
53789PA0110043	Rating Area 9	Tobacco User/Non-Tobacco User	36	346.68	355.35
	Rating Area 9	Tobacco User/Non-Tobacco User	37	348.93	357.66
	Rating Area 9	Tobacco User/Non-Tobacco User	38	351.19	359.97
	Rating Area 9	Tobacco User/Non-Tobacco User	39	355.70	364.59
	Rating Area 9	Tobacco User/Non-Tobacco User	40	360.21	387.22
	Rating Area 9	Tobacco User/Non-Tobacco User	41	366.97	394.50
	Rating Area 9	Tobacco User/Non-Tobacco User	42	373.46	401.46
	Rating Area 9	Tobacco User/Non-Tobacco User	43	382.47	411.16
	Rating Area 9	Tobacco User/Non-Tobacco User	44	393.75	423.28
	Rating Area 9	Tobacco User/Non-Tobacco User	45	407.00	447.70
	Rating Area 9	Tobacco User/Non-Tobacco User	46	422.78	465.06
	Rating Area 9	Tobacco User/Non-Tobacco User	47	440.54	484.59
	Rating Area 9	Tobacco User/Non-Tobacco User	48	460.83	506.91
	Rating Area 9	Tobacco User/Non-Tobacco User	49	480.84	528.93
	Rating Area 9	Tobacco User/Non-Tobacco User	50	503.39	578.90
	Rating Area 9	Tobacco User/Non-Tobacco User	51	525.66	604.50
	Rating Area 9	Tobacco User/Non-Tobacco User	52	550.18	632.70
	Rating Area 9	Tobacco User/Non-Tobacco User	53	574.98	661.23
	Rating Area 9	Tobacco User/Non-Tobacco User	54	601.76	692.02
	Rating Area 9	Tobacco User/Non-Tobacco User	55	628.53	754.24
	Rating Area 9	Tobacco User/Non-Tobacco User	56	657.56	789.08

HIOS Issuer ID* Federal TIN* Rate Effective Date* Rate Expiration Date*	53789				
	23-2399845				
	1/1/2017				
	12/31/2017				
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	Require: 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
53789PA0110043	Rating Area 9	Tobacco User/Non-Tobacco User	57	686.88	824.25
	Rating Area 9	Tobacco User/Non-Tobacco User	58	718.16	861.79
	Rating Area 9	Tobacco User/Non-Tobacco User	59	733.66	880.40
	Rating Area 9	Tobacco User/Non-Tobacco User	60	764.95	956.19
	Rating Area 9	Tobacco User/Non-Tobacco User	61	792.01	990.01
	Rating Area 9	Tobacco User/Non-Tobacco User	62	809.76	1012.20
	Rating Area 9	Tobacco User/Non-Tobacco User	63	832.03	1040.04
	Rating Area 9	Tobacco User/Non-Tobacco User	64	845.55	1056.95
	Rating Area 9	Tobacco User/Non-Tobacco User	65 and over	845.55	1056.95

AGENT AGREEMENT

Under this Agreement (the "Agreement"), effective _____, 20____, and subject to all terms thereof, _____, (hereinafter referred to as "WBE"), a _____ corporation, with an office located at _____ is authorized to market and solicit insurance applications from members of the general public residing in twenty-one specific counties in the Commonwealth of Pennsylvania listed on Attachment A to this Agreement, for only those products specified herein written or sold by Capital BlueCross, a Pennsylvania non-profit hospital plan corporation, and its Affiliates and Subsidiaries listed on Attachment B to this Agreement, with an office located at 2500 Elmerton Avenue, Harrisburg, PA, 17111 (hereinafter collectively referred to as "Company").

To the extent any activities of WBE in any way relate to an affiliate of Company or a program of such affiliate –

- Each and every duty or obligation owed by WBE to Company under the Agreement shall be owed to such affiliate.
- Each and every duty or obligation owed to WBE by Company under the Agreement shall be owed by each affiliate; and
- Any right or claim accruing in favor of WBE under the Agreement shall be enforceable against the affiliates, jointly or severally.
- Company as used in this Agreement refers jointly and severally to Capital BlueCross and its affiliates and subsidiaries listed on Attachment B.

ARTICLE I - GENERAL PROVISIONS

- 1.1 Appointment. The Company hereby appoints WBE, including any applicable subagents, to conduct producer-related activities on its behalf. Company and WBE shall comply with all laws and regulations applicable to their businesses, their licenses and the transactions into which they enter in connection with this Agreement.
- 1.2 Assignment. This Agreement or the right to receive money under this Agreement may not be assigned by WBE without the prior written consent of Company provided that such consent shall not be unreasonably withheld. WBE may use properly licensed subagents in connection with this Agreement in accordance with Section 1.3 below.
- 1.3 Subagents. Subject to the following, WBE may use subagents in WBE's performance under this Agreement:
 - 1.3.1 WBE may utilize, at its sole discretion, the services of any person or entity (hereinafter "Representative") as a subagent.
 - 1.3.2 As necessary, WBE will ensure that any Representative used by WBE as a subagent in performance under this Agreement is properly licensed to act in such capacity. WBE shall, at WBE's sole cost and expense, file whatever documents with the respective Department of Insurance as are necessary for any Representative to

lawfully act in that capacity. WBE will promptly notify the Company of any termination, suspension, or expiration of WBE's license, or of any termination, suspension, or expiration of a Representative's license. WBE will promptly notify Capital in the event WBE, or any Representative, is charged with any wrongdoing for which the penalty of suspension or revocation is possible under Pennsylvania law. A designated licensee of WBE will complete and submit Form A Appointment Disclosure Form (Agency), as amended or supplemented from time to time by Company. Each Representative that will provide services under this Agreement will complete and submit Form B, Appointment Disclosure Form (Individual), as amended or supplemented from time to time by Company. Attachment F contains the current Form A and Form B.

- 1.3.3 If required by law, WBE shall submit to Company and Company shall promptly execute and file with the applicable state insurance regulatory authorities a Representative's application for appointment form. WBE shall be responsible for the accuracy and completeness of such application submitted and shall ensure that each person for whom such application is submitted shall have read and understood such application. Any costs associated with the appointment shall be directly paid to the applicable state insurance regulatory authorities by Company. Redacted
- 1.3.4 WBE shall be responsible for the payment of any and all compensation, of whatever kind, including, but not limited to, commissions, service fees or expense allowances due to or claimed by any Representative of WBE. WBE agrees to indemnify, defend and save Company harmless from and against any claim for reimbursement, compensation or other payment made by a Representative of WBE.
- 1.3.5 WBE shall be responsible for the appropriate training and guidance of its Representatives to the extent that Representatives are used in the marketing of Company products. WBE will be responsible to Company for the acts or omissions of Representatives.
- 1.3.6 WBE agrees that the same requirements under this Agreement for WBE to procure and maintain a certain level of Errors and Omissions Insurance in a form reasonably satisfactory to Company shall apply to Representatives. WBE shall ensure that each Representative used in the marketing of Company products procures and maintains any required Errors and Omissions Insurance, or WBE shall include each Representative as an additional named insured under WBE's coverage or otherwise ensure that this requirement is satisfied by each Representative used in the marketing of Company products.
- 1.3.7 WBE agrees that it shall require Representatives to be bound by the terms and conditions of this Agreement.
- 1.4 Notice. Any notice required from Company under this Agreement shall be deemed given on the day such notice is deposited in the United States mail first class postage pre-paid and addressed to:

[WBE Address]

Any notice required from WBE shall be deemed given on the day after such notice is deposited in the United States mail with first class postage pre-paid and addressed to:

Capital BlueCross Legal Department
2500 Elmerton Avenue
Harrisburg, PA, 17111
Attn: Vice President & General Counsel

- 1.5 Entire Agreement. This Agreement is the entire contract between the parties on this subject matter and supersedes any and all prior understandings or agreements between the parties whether oral or in writing on this subject matter. Subject to Company's right of modification set out in Section 6.3, no modification or amendment to this Agreement shall be effective unless it is in writing, attached to and made a part of this Agreement, and is executed by a duly authorized representative of WBE and by an officer of Company.
- 1.6 Terminology. In this Agreement the words "shall" and "will" are used in the mandatory sense. Unless the context otherwise clearly requires, any one gender includes all others, the singular includes the plural, and the plural includes the singular.
- 1.7 Waiver. No forbearance or neglect on the part of Company to insist upon compliance with the terms of this Agreement shall be construed as or constitute a waiver of any provision of this Agreement or a grant of authority under this Agreement.

ARTICLE II – OBLIGATIONS OF WBE

- 2.1 Solicitation. WBE shall use commercially reasonable efforts to solicit from members of the general public residing in the twenty-one Pennsylvania counties listed in Attachment A in which Company, as applicable, is authorized to transact insurance and in which Company has authorized WBE to solicit on Company's behalf applications for Company's individual and family health insurance products identified in the commission schedules attached hereto as Attachment C and made part of this Agreement. WBE is not authorized to solicit on behalf of Company, nor will WBE earn commissions for any other products that Company shall decline to offer through WBE. WBE shall generally perform under this Agreement as described in such administrative guidelines, bulletins, directives, manuals or the like as Company may publish for its agents and has delivered to WBE from time to time, which do not conflict with any term or provision of this Agreement.
- 2.2 Service. WBE will service Company members enrolled through applications submitted by WBE or assigned by Company. Such service will include the following:
- 2.2.1 Acting as liaison between the member and Company if requested by Company or the member.
- 2.2.2 Maintaining a working and current knowledge of Company products and the ability to explain benefits and/or coverage.

For any members assigned to WBE by Company, WBE shall receive compensation from Company in accordance with the provisions of this Agreement.

- 2.3 Licensure. WBE agrees to maintain such licenses as are necessary to transact business on

behalf of Company. WBE further agrees to notify Company immediately of any expiration, termination, suspension or other action of any Department of Insurance or insurance regulator, or any other government agency against or affecting said license in any of the states in which WBE is marketing Company products.

2.4 Applications. WBE agrees to comply with the reasonable rules of Company relating to the completion and submission of applications, and to make no representation with respect to the benefits of any product offered by Company not in conformity with the material prepared and furnished to WBE for that purpose by Company. WBE shall use commercially reasonable efforts to ensure that, prior to forwarding to Company for processing, each application is fully and truthfully completed by the applicant and the completed application fully and accurately reflects and discloses the circumstances of persons for whom coverage is sought in the application. Nonetheless, Company understands and acknowledges that WBE's business practice is to have applicants submit applications via the internet and therefore, WBE may not directly speak with any applicant to verify the veracity of the information.

2.5 Right to Reject Applications. WBE agrees that Company reserves the right to reject any and all applications submitted by WBE. Company will not treat applications from WBE differently from applications submitted by other agents.

2.6 Forms and Advertising.

2.6.1 WBE agrees to use only such material as provided by Company or approved in writing by Company before use (including billing forms, all advertising, promotional materials, reprints and enrollment forms). WBE shall not make use of any advertisement or any other material in which the name or logo of the Company, or any service mark of Company is used without the Company's prior written consent.

2.6.2 Company will have approval rights over any Internet marketing materials that use the name, logo or other identifier of Company ("Company Marks"). Company will approve any such material within ten (10) business days of receipt of a request for approval from WBE. Company approves use of the Company Marks on WBE's ecommerce website, www._____ and _____ (or any URLs that it uses to replace these sites (the "WBE Site"), provided that such use:

2.6.2.1 Is substantially similar to the example attached hereto as Attachment E; and

2.6.2.2 Is displayed only to users who are seeking information concerning health insurance available in the Company's Service Area; and


2.6.2.3 Clearly and prominently include a statement when Company Marks are used as follows: "Serving Central Pennsylvania and the Lehigh Valley," and

2.6.2.4 Except in the cases of Advertising Sponsorships, the Company Marks must be the same size as the marks of other insurers listed on the same webpage. WBE will provide the Company with copies of any internet pages using the company Marks within ten (10) business days after the Company Marks first appear. Company may also find examples of how information is presented by viewing the WBE Site. Company may have Company Logos removed from any specific landing page within the site by providing written notice to

WBE, who will remove it within a reasonable business time. Specific text related to Company or products offered by Company will require Company's prior written approval. Notwithstanding the foregoing, WBE may make changes to a previously approved internet site if such changes do not affect (i) the name, logo or other identifier of the Company, (ii) text related to Company products, or (iii) the relative size, placement or dominance of either (i) or (ii) above.

- 2.6.3 This agreement constitutes a contract between WBE and the Company. The Company is an independent corporation operating under a license from the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans, permitting Company to use the Blue Cross Mark in a portion of the Commonwealth of Pennsylvania. WBE acknowledges that it is not licensed the use the Blue Cross Service Mark and any reference or use of the Blue Cross Service Mark made by WBE in connection with the Company Marks (in a portion of the Commonwealth of Pennsylvania) in its own materials are subject to prior review and approval by Company.
- 2.7 Application Records. WBE agrees to maintain complete records (i) of all transactions pertaining to applications submitted to and accepted by Company, (ii) as may be required by any respective Department of Insurance or any other governmental entity, and (iii) in connection with WBE's relationship with Company. Any and all records described above or as may otherwise relate to WBE's activities in connection with Company business shall be accessible and available to representatives of Company who may audit them from time to time while this Agreement is in effect or within one (1) year after termination reasonably thereof. However, as to completed applications, which must be kept by WBE for six (6) years pursuant to Pennsylvania law, Company may have access to all such documents during the time WBE is required to keep the documents. WBE also agrees to keep any other applicable documents or records for the period required by applicable law, including, but not limited to, applicable Document Retention requirements issued by the Pennsylvania Insurance Department. Company shall notify WBE of its intention to conduct an audit no less than two weeks prior to the date of the audit. Any audit shall take place at WBE's office during normal business hours. Company or its agents shall have access to any records or staff necessary to complete its audit; however, Company may not copy or duplicate any records without the prior written consent of WBE.
- 2.8 Insurance. Within thirty (30) days of a request by Company, but not later than the effective date of this Agreement WBE agrees to obtain and maintain Errors and Omissions Insurance in force in the amount of \$1,000,000.00 for each occurrence and \$1,000,000.00 general aggregate. Once Company has requested that WBE obtain and maintain such insurance, the obtaining and maintenance of such insurance shall be a material requirement of this Agreement.
- 2.9 Benefit Changes. WBE agrees that Company has the right to reasonably discontinue, to modify, or exercise all lawful rights in connection with, any of its benefit contracts, or programs without liability to WBE by providing WBE prior written notice within the timeframe(s) required by applicable law. WBE may sell only those products specifically authorized by Company.
- 2.10 Compensation. WBE shall seek compensation for performing under this Agreement only from Company. WBE is an independent contractor and shall have no claim to

compensation except as provided in this Agreement and shall not be entitled to reimbursement from Company for any expenses incurred in performing this Agreement. WBE further agrees that to the extent of any indebtedness of WBE to Company, Company shall have a first lien against any commissions due WBE from Company, and such indebtedness may be deducted, at the Company's option, from commissions due to WBE.

- 2.11 Confidentiality. WBE agrees to maintain the confidentiality of any trade secret or proprietary information of Company. WBE may not divulge or use any confidential and/or proprietary information about Company's business, except as authorized by Company in writing. Confidential and proprietary information about the business of Company includes, but is not limited to, policies, procedures, underwriting guidelines, and/or group specific proposals of Company, in any form whatsoever, and the terms of this Agreement. WBE shall ensure that its Representatives abide by the terms and conditions of this confidentiality provision. WBE and its Representatives shall be jointly and severally responsible to Company for any acts or omissions by Representatives which result in the unauthorized disclosure or use of any confidential or proprietary information. WBE's obligations under this Section 2.11 shall survive termination of this Agreement.
- 2.12 Records Related to Agreement. WBE will keep regular and accurate records of all transactions related to this Agreement which records shall be reserved for the longer of three (3) years or any period required by applicable law, including, but not limited to, applicable document retention requirements issued by the Pennsylvania Insurance Department and, upon request, shall be open to examination by Company. Any manuals, applications, and all supplies furnished by Company shall remain the property of Company and at the request of Company, said property shall be immediately returned to Company or destroyed upon termination of this Agreement.
- 2.13 Business Associate Agreement. WBE shall comply with the terms of the HIPAA Business Associate Agreement attached hereto as Attachment D and incorporated herein by reference.
- 2.14 Fees. WBE will waive any start-up and/or maintenance fees for Company for the placement of Company products on the WBE website (www._____).
- 2.15 Customer Data. **Redacted**

- 2.16 Other Party Marketing Agreements. As part of WBE's activities to market and sell health insurance products, including Company's products, WBE may enter into marketing agreements with other parties (e.g., associations, employers and other "affinity groups"). Such agreements may include the placement or syndication of WBE's website within another party's site, or the placement of links from another party's site to WBE's website. Any such activities or agreements in any way related to or in connection with the Company, this Agreement, or WBE's performance hereof shall be in strict compliance with this Agreement; provided, however, that any such activity must receive prior written approval from the Company if such activity includes use of the name, logo or other identifier of the Company in any manner that has not been previously approved by Company.

2.17 Prohibited Acts. WBE will not perform any of the following acts:

- 2.17.1 Waive, modify, or change any terms, conditions, rates, proposals, or limitations of any benefit contract issued by Company.
- 2.17.2 Bind or commit Company in any manner.
- 2.17.3 Extend the time for any premium payment.
- 2.17.4 Reinstate any coverage terminated by Company.
- 2.17.5 As applicable, use any forms not authorized by Company.
- 2.17.6 Extend credit or incur any indebtedness, liability, or obligation on behalf of Company.
- 2.17.7 Sign an application on behalf of an applicant.
- 2.17.8 Enter into any legal proceeding pertaining to Company as a representative of Company, including the acceptance of legal process on behalf of Company.

2.18 Portable Document Format (.PDF) of Company's Health Insurance Application.

- 2.18.1 WBE shall enable an applicant to electronically sign the .PDF version of the Company's health insurance application in a manner consistent with the federal Electronic Signatures in Global and National Commerce Act and other applicable laws. WBE and the Company shall mutually agree on a commercially reasonable process to evidence an applicant's intent (i) to warrant that the information provided by the applicant is true, accurate and complete, (ii) to authorize the obtaining of or release of medical information, (iii) to agree to the terms and conditions within the insurance application, (iv) to authorize the initial premium payment by credit card (if permissible by the Company) or electronic funds transfer and subsequent premium payments by the method the applicant selects on the insurance application, and (v) to bind themselves to other terms and conditions required by the Company in its standard insurance application. WBE warrants that it submits, and shall allow applicants to submit, electronically signed applications to Company only when the above processes have been followed.
- 2.18.2 WBE shall use a methodology which will not permit an applicant who chooses to electronically sign his application to change any data entered by the applicant once the applicant takes the appropriate action to submit the data to WBE. Any subsequent changes to the data shall be completed in writing by the applicant on a paper medium. WBE shall enable the use of 128 bit Secure Sockets Layer (SSL) encryption technology or better to ensure data integrity and security during the electronic transmission of the data from the applicant to WBE. WBE shall archive the applicant's data and the HTML screens seen by the applicant when entering the data.
- 2.18.3 WBE shall not modify or in any way alter the data received from an applicant, although WBE personnel may review the applicant's data for completeness. WBE

shall promptly make available to Company, in a form and manner satisfactory to Company, the applicant's insurance application in .PDF format utilizing 128 bit Secure Sockets Layer (SSL) encryption technology or better to ensure data integrity and security.

- 2.18.3 WBE shall archive a copy of each Applicant's electronically signed .PDF version of the applicant's application for a period of no less than six (6) years from the date the application is submitted to the Company, or otherwise in accordance with the retention periods under applicable law. Such archived .PDF shall be accessible to the Company via Carrier Underwriting Extranet, if Company elects to use the Extranet, or via written request to WBE. WBE shall fulfill any request to receive an archived application within ten (10) business days. Prior to permanently removing an archived application from WBE's database, WBE shall offer a copy of the archived application and any associated records to the Company. All copies shall be offered to Company first in an electronic format readable to Company, and if no such format exists, then in paper copy.
- 2.18.4 WBE shall archive the code creating the HTML screens viewed by an applicant for a period of no less than six (6) years, or otherwise in accordance with the retention periods under applicable law. Each time an HTML screen is changed, WBE shall archive the version of the code prior to making any change. WBE shall provide an archived version of an HTML screen to the Company within thirty (30) days of receiving a written request from the Company. WBE shall offer a copy of an archived HTML screen and any associated records to the Company prior to permanently removing the archived code from WBE's database. All copies shall be offered to Company first in an electronic format readable to Company, and if no such format exists, then in paper copy.
- 2.23 Health Insurance Portability and Accountability Act of 1996 (HIPAA). Agent acknowledges that pursuant to HIPAA the United States Department of Health and Human Services has promulgated some, and is in the process of promulgating other, regulations, becoming effective in the future, relating to the privacy of individually identifiable health information and the security of such information when transmitted by electronic means and further that such regulations may require that contracts contemplating the collection of individually identifiable health information and/or the transmission of such information electronically include certain provisions. Therefore, WBE agrees that its activities shall comply with all such applicable regulations, when and as they become effective, and this compliance shall be interpreted as meeting at least the minimum requirements of such regulations when and as they become effective.
- 2.24 Web-broker.
 - 2.24.1 Under regulations and written guidance promulgated by the United States Department of Health and Human Services ("HHS") pursuant to the Patient Protection and Affordable Care Act (as amended, "PPACA" and the "Regulations"), WBE is a Web-broker, and the Company is certified as a Qualified Health Plan Issuer to offer Qualified Health Plans on the Health Insurance Marketplace ("Marketplace"). As a Web-broker, WBE acknowledges that it is solely responsible to comply with all applicable privacy and security standards imposed for Web-brokers as required under the Regulations.

2.24.2 WBE further agrees that all of the Company's Qualified Health Plans that are displayed on WBE's website, including all benefit and rate information, and any other information required by HHS to be displayed by Web-brokers, will (i) be displayed in the exact manner as WBE receives such Qualified Health Plan information from the Marketplace or the Company to the extent required by applicable standards under the Regulations; and (ii) comply with all other applicable standards under the Regulations. If WBE or the Company discovers any error in the Qualified Health Plan information displayed on WBE's website, WBE agrees to promptly correct such information and notify the Company regarding the same, but in no event later than a commercially reasonable time after the discovery of such error.

2.24.3 As a Delegated Entity, and in Company's authority and responsibility to oversee and monitor all delegated activities, WBE agrees to the requirements set forth in Attachment G (the "Marketplace Required Provisions"), which are hereby incorporated into the Agreement. The Marketplace Required Provisions will apply only to services provided to Company relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as any covered dependents, and will to the extent inconsistent with any other terms of the Agreement, supersede such inconsistent terms solely as they relate to services rendered to such Contract Holders. WBE shall comply with the Marketplace Required Provisions, as applicable.

ARTICLE III – OBLIGATIONS OF COMPANY

3.1 Applications and Rates. Company shall provide WBE with applications and basic rates for individual and family health insurance products; provided that WBE acknowledges that such basic rates are subject to change upon completion of the Company's processing of an application. Company shall provide WBE with such information in a mutually agreed upon electronic format.

3.2 Preliminary Approval. Company shall use the private extranet capability provided by WBE to review and offer preliminary approval for individual and family insurance applications not requiring additional information.

3.3 Minimum Service Levels. Redacted

3.4 Commission. Company will pay WBE first year and renewal commissions at the rates set out in Attachment C on premiums generated from applications obtained by WBE and accepted by Company for which WBE has been designated Agent of Record. Such products and associated commissions shall be set forth in the Products and Commission as Attachment C.

3.5 Renewal Commission Conditions. Renewal commissions, as set forth in Attachment C, for all products sold by WBE in connection with this Agreement shall be payable to WBE by Company as long as (i) the Company retains the enrollment produced by WBE for each policy of health insurance issued by the Company; and (ii) this Agreement is not terminated for

cause under Section 6.4 herein. If this Agreement is terminated for cause under Section 6.4, the Company shall have no obligation to remit any commission payments to WBE, and any rights by WBE to commission payments shall immediately cease.

3.6 Assignment Rights.

3.6.1 If all the following conditions are satisfied, WBE may assign any or all business written under this Agreement to an independent licensed agent or entity:

3.6.1.1 Redacted

Redacted

3.6.1.3 Redacted

3.6.1.3.1 Redacted

Redacted

Redacted

Redacted

Redacted

Redacted

3.9 Compensation Payment. Company will pay to WBE compensation due within Redacted days following the end of each calendar month based on premium payments actually received and reconciled by Company, and either due or received and reconciled by Company, whichever is later, during the calendar month on WBE generated business, except Redacted

If a return of premium charge is due on WBE generated business by reason a cancelled policy of health insurance, Company will charge back to WBE the amount of commission previously paid to WBE on the amount of returned premium, which shall be offset on future premium payments due to WBE.

Compensation payments by Company will be accompanied by sufficient detail to permit WBE

to identify the name and address of each insured for which compensation is being paid, as well as the amount of premium paid by such insured on which the payment is based, the commission earned, the policy or certificate number, and other information as WBE may reasonably require. Such accompanying information shall be submitted to WBE in an electronic format mutually agreed to by the parties. Neither Company nor WBE shall dispute or otherwise request an adjustment in the compensation payments made to WBE after ninety (90) days from the date that such compensation was paid to WBE by Company unless a compensation payment was made, in whole or in part, based on fraud by WBE or a Company member.

3.10 Records. Company agrees to maintain complete records (i) of all transactions pertaining to applications submitted to and accepted by Company, (ii) as may be required by any respective Department of Insurance or any other governmental entity, and (iii) in connection with Company's relationship with WBE. Any and all records described above or as may otherwise relate to Company's activities in connection with WBE business shall be accessible and available to representatives of WBE who may audit them from time to time while this Agreement is in effect or within one (1) year after termination reasonably thereof. WBE shall notify Company of its intention to conduct an audit no less than two weeks prior to the date of the audit. Any audit shall take place at Company's office during normal business hours. WBE or its agents shall not copy or duplicate any records without the prior written consent of the Company. Any audit shall be conducted at WBE's sole expense unless the audit reveals an act of fraud by the Company.

3.11 Product Responsibilities. Except to the extent responsibility is expressly and explicitly delegated under this Agreement, Company shall be responsible for, and may exercise its discretion in connection with, all aspects of the underwriting and administration of any Company products including, but not limited to, the following:

Redacted

3.12 Electronic Marketing. Subject to the Company's prior written approval for each proposed use of the Company Marks not otherwise approved in this Agreement, WBE may use electronic means, such as but not limited to, the internet and email as well as traditional mediums such as, but not limited to, radio, television, telephone, direct mail and print mediums to market, sell and service Company's products.

3.13 Health Plan Information. For maintenance purposes, Company shall provide WBE with updated health plan information including, but not limited to, health plan applications, basic rates unrelated to medical underwriting, benefit summaries, exclusions and limitations information, provider directories and other content which WBE may require to comply with Company's general updates for all agents. Company, at Company's expense, shall provide WBE said information in an industry standard electronic format mutually agreed upon by

both parties. WBE recognizes that such health plan information may be preliminary and shall be subject to final approval by the relevant regulatory agencies in the states where the Company will offer updated health plan products. Such health plan information shall be provided to WBE no less than thirty (30) days prior to their effective date. Subject to the Company's prior written approval, Company shall permit WBE to link the WBE website to Company's web pages as necessary to provide potential applicants with health plan information.

3.13.1 Notwithstanding anything to the contrary within this Agreement, Company agrees to provide WBE and WBE agrees to make available on its website Summary of Benefits and Coverage (SBC) information that meets the minimum requirements under applicable law for all applicable Company health plans. The information provided by Company and presented by WBE on its website will be in a form mutually agreed to by the parties. Company will have no further obligation to provide WBE website users with any SBC information.

3.14 Company's Confidentiality Responsibilities. Company agrees to keep all trade secrets, proprietary information, agreements, financial arrangements, and technology activities of WBE strictly confidential. Company's obligations under this Section 3.14 shall survive termination of this Agreement.

3.15 HIPAA Cooperation. Company agrees to cooperate with WBE to implement the processes described in Sections 2.18 in a commercially reasonable time period.

ARTICLE IV – DISPUTE RESOLUTION

4.1 Dispute Resolution. Company and WBE agree to meet and confer in good faith on all matters affecting this Agreement. The parties agree that any unresolved dispute will be resolved by binding arbitration in accordance with the Commercial Rules of the American Arbitration Association.

ARTICLE V – INDEMNITY

5.1 Third Party Liability. Neither Company nor WBE shall be liable to any third party for any act or failure to act of the other party to this Agreement.

5.2 WBE Indemnification. WBE agrees to indemnify and save Company, including directors, officers, corporate affiliates, shareholders and employees of Company, harmless from any and all liability, losses, damages, costs or expenses arising out of any and every claim, demand, lawsuit or cause of action asserted against Company by a third party, which claim, demand, lawsuit or cause of action results from or arises in connection with any negligence or otherwise intentional wrongful act or omission of WBE or of any director, officer, or employee of WBE, including any breach of this Agreement. Such indemnity shall include reasonable attorney fees.

5.3 Company Indemnification. Company agrees to indemnify and save WBE, including partners, directors, officers, corporate affiliates, shareholders and employees of WBE harmless from any and all liability, losses, damages, costs or expenses arising out of any and every claim, demand, lawsuit or cause of action asserted against WBE by a third party, which claim, demand, lawsuit or cause of action results from or arises in connection with any negligent or otherwise wrongful act or omission of Company or of any director, officer or employee of


Company, including any breach of this Agreement. Such indemnity shall include reasonable attorney fees.

- 5.4 Comparative Fault. Should Company and WBE each claim indemnity from the other under Sections 5.2 and 5.3 of this ARTICLE V and should it be determined that each is entitled to some indemnity from the other under the terms of said sections, then the amount of indemnity due from each to the other shall be determined according to comparative fault principles.
- 5.5 Indemnification Survival. The obligations of this ARTICLE V will survive termination of this Agreement as to acts or omissions committed during the term of this Agreement.

ARTICLE VI – TERM, TERMINATION & EXCLUSIVITY

- 6.1 Effective Date. This Agreement shall become effective following execution by duly authorized representatives of both parties.
- 6.2 Term. Subject to Section 6.4, this Agreement will remain in force for a period of one (1) year from the date signed on the contract marked by Company, and shall thereafter be automatically renewed for successive one (1) year periods unless either party gives written notice of nonrenewal at least ninety (90) days prior to the expiration of the then current term. Thereafter, either party may elect to terminate this Agreement, without cause, by giving the other party ninety (90) days written notice.
- 6.3 Modification. Modifications to this Agreement shall be in writing and agreed to by both parties, excluding such modifications that are identified in other sections of this agreement; provided, however, that the Agreement may be amended automatically, without the consent of WBE, in order to meet applicable local, state or federal statutory or regulatory requirements. Company shall provide WBE with written notice of such amendments for statutory or regulatory compliance. **Redacted**
- 6.4 For Cause Termination. A party to this Agreement may terminate this Agreement for the other party's material failure to comply with any provision of this Agreement (including any amendments) if the failing party does not cure the material failure upon ten (10) days prior receipt of written notice of a failure to comply. A party's failure to comply with any provision of this Agreement shall, unless otherwise specifically provided, be material if such failure affects the party's ability to perform under this Agreement or if the other party could reasonably be expected to be materially prejudiced or injured by the particular failure. A party may immediately, upon written notice to the other party, terminate this Agreement upon the other party's commission of any act of fraud or dishonesty, or breach of any fiduciary duty. The right to terminate this Agreement for cause shall not be exclusive, but shall be cumulative with all other remedies available by law or in equity. A failure to terminate this Agreement for cause shall not be a waiver of the right to do so with respect to any future defaults.

ARTICLE VII– MISCELLANEOUS

- 7.1 Severability. The invalidity of any one or more of the words, phrases, sentences, clauses, sections, or subsections contained in this Agreement shall not affect the enforceability of the remaining portions of this Agreement.
- 7.2 No Third Party Beneficiaries. Except as expressly set forth in this Agreement, there are no third party beneficiaries of this Agreement.
- 7.3 Governing Law. This Agreement shall be governed by and construed and enforced in accordance with the laws of the Commonwealth of Pennsylvania.
- 7.4 Compliance With Law. The parties shall comply with all relevant state, federal and local laws, rules, statutes, ordinances, orders and regulations that are relevant to the terms and conditions of this Agreement.
- 7.5 Section Headings. The section headings contained in this Agreement are for reference purposes only and shall not affect the meaning or interpretation of any provisions of this Agreement.
- 7.6 Exhibits Incorporated. All exhibits, attachments, tables or schedules referenced herein, attached or incorporated by reference are incorporated herein to the same extent as if set forth in full herein.
- 7.7 Counterparts. This Agreement may be executed in one or more counterparts, which when taken together shall constitute one agreement.
- 7.8 Redacted
- 
- 7.9 Complaints or Inquiries. WBE shall forward to Company immediately upon receipt any and all governmental or other communications, complaints, and/or inquiries, written or oral, regarding or pertaining to the subject matter of this Agreement or any Representative.
- 7.10 Discrimination. Company does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation, or health status in the administration of the plan, including enrollment and benefit determinations.

[Signature page follows]

IN WITNESS WHEREOF, this Agent Agreement has been duly executed by the authorized representatives of the Company and WBE on this _____ day of _____, 20__.

Capital BlueCross:

[LEGAL NAME OF WBE:]

By: _____

By: _____

Name: _____

Name: _____

Title: _____

Title: _____

List of Counties in Company's 21-County Service Area

Adams
Berk
Centre
Columbia
Cumberland
Dauphin
Franklin
Fulton
Juniata
Lancaster
Lebanon
Lehigh
Mifflin
Montour
Northampton
Northumberland
Perry
Schuylkill
Snyder
Union
York

AFFILIATES & SUBSIDIARIES

Capital BlueCross

Capital Advantage Insurance Company

Capital Advantage Assurance Company

Keystone Health Plan Central

Dominion Dental USA, Inc.

Dominion Dental Services, Inc.

Dominion Dental Services USA, Inc.

Dominion Dental Services of New Jersey, Inc.

PRODUCTS & COMMISSIONS

The commission rates set forth in this Attachment C (the "Commission Rates") shall be effective as of the date set forth on the signature page of this Agreement (the "Agreement Effective Date"). Company shall pay to WBE the applicable commission payments and provide the related commission statements with respect to every sale of the Company products. For the avoidance of doubt, the Commission Rates shall be applicable only prospectively to New Business, so commissions with respect to Existing Business shall continue to be calculated and paid in accordance with the compensation schedule that was in effect as of the date WBE first became producer of record for the applicable policy. For purposes of this provision, "New Business" means any policy issued after the Agreement Effective Date, and "Existing Business" means any policy issued before the Agreement Effective Date. Subject to Section 3.7 of the Agreement, this provision shall survive expiration or termination of this Agreement.

Healthy Benefits PPO

For all contract types (Single Contract, Parent/Child Contract, Parent/Children Contract, Husband/Wife Contract, Family Contract), WBE will earn [REDACTED] of the monthly premium on Healthy Benefits PPO products.

Healthy Benefits HMO

For all contract types (Single Contract, Parent/Child Contract, Parent/Children Contract, Husband/Wife Contract, Family Contract), WBE will earn [REDACTED] of the monthly premium on Healthy Benefits HMO products, with the exception of the Catastrophic Plan. WBE will earn [REDACTED] of the monthly premium on the Catastrophic Plan.

Healthy Dental PPO

For all contract types (Single Contract, Parent/Child Contract, Parent/Children Contract, Husband/Wife Contract, Family Contract), WBE will earn [REDACTED] of the monthly premium on Healthy Dental PPO products.

Select Dental HMO

For all contract types (Single Contract, Parent/Child Contract, Parent/Children Contract, Husband/Wife Contract, Family Contract), WBE will earn [REDACTED] of the monthly premium on Healthy Dental HMO products.

Healthy Vision Plan 1

For all contract types (Single Contract, Parent/Child Contract, Parent/Children Contract, Husband/Wife Contract, Family Contract), WBE will earn [REDACTED] of the monthly premium on Healthy Vision Plan 1 products.

Attachment D

Business Associate Agreement

Sample Logos

Samples of how logos appear on WBE website

Attachment F

**Sample Form A, Appointment Disclosure Form (Agency) and
Form B, Appointment Disclosure Form (Individual)**

MARKETPLACE REQUIRED PROVISIONS

Definitions

For purposes of these Marketplace Required Provisions and Section 2.24.3, the following capitalized terms will have the meanings set forth below. All other capitalized terms will have the meaning set forth in the Agreement.

“Breach” has the meaning contained in the Office of Management and Budget (OMB) Memoranda M-07-16 (May 22, 2007), and means the compromise, unauthorized disclosure, unauthorized acquisition, unauthorized access, loss of control, or any similar term or phrase that refers to situations where persons other than authorized users or for an other than authorized purpose have access or potential access to Personally Identifiable information (PII), whether physical or electronic.

“Centers for Medicare and Medicaid Services (CMS) Data Services Hub Web Services (Hub Web Services)” means business and technical services made available by CMS to enable the determination of certain eligibility and enrollment or Federal financial payment data through the Federally-facilitated Exchange web site, including the collection of personal and financial information necessary for Consumer, applicant, Qualified Individual, Qualified Employer, Qualified Employee, or Enrollee account creations; Qualified Health Plan (QHP) application submissions; and Insurance Affordability Program eligibility determinations.

“Delegated Entity” has the meaning set forth in 45 C.F.R. §156.20.

“Downstream Entity” has the meaning set forth in 45 C.F.R. §156.20.

“Enrollee” has the meaning set forth in 45 C.F.R. §155.20

“Federally-facilitated Exchange” means an Exchange (or Marketplace) established by HHS and operated by the Centers for Medicare and Medicaid Services under §1321(c)(1) of PPACA for individual or small group market coverage, including the Federally-facilitated Small Business Health Options Program (FF-SHOP).

“Incident” means the act of violating an explicit or implied security policy, which includes attempts (either failed or successful) to gain unauthorized access to a system or its data, unwanted disruption or denial of service, system hardware, firmware, or software characteristics without the owner’s knowledge, instruction, or consent.

“Qualified Employee” has the meaning set forth in 45 C.F.R. §155.20

“Qualified Health Plan” has the meaning set forth in 45 C.F.R. §155.20

“Qualified Health Plan Issuer” has the meaning set forth in 45 C.F.R. §155.20

“Qualified Individual” has the meaning set forth in 45 CFR 155.20

Provisions

- 1.1 In the course of performing its duties and obligations set forth in the Agreement, WBE constitutes a Delegated Entity, and may contract with other individuals or entities that constitute Downstream Entities to assist in performing such duties and obligations. WBE is obligated to make all necessary reports to Company that (i) are specified in the Agreement; or (ii) required under applicable federal or state law.
- 1.2 If the Department of Health and Human Services (HHS) or Company determines that WBE, or any Downstream Entity that WBE contracts with as described herein, has not performed satisfactorily the duties and obligations set forth in the Agreement relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as their dependents, Company may terminate the Agreement in accordance with the procedures for termination within the Agreement.
- 1.3 WBE must comply with all of the laws and regulations relating to the following standards, if applicable to WBE, in performing its duties and obligations set forth in the Agreement relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as any covered dependents: (i) 45 C.F.R. Part 156, Subpart C with respect to each Qualified Health Plan on an ongoing basis; (ii) Marketplace processes, procedures and standards pertaining to Qualified Health Plan certification under 45 C.F.R. Part 155, Subparts H and K; (iii) 45 C.F.R. §155.220 with respect to assisting with enrollment in Qualified Health Plans; and (iv) 45 C.F.R. §156.705 and §156.715 for maintenance of records and compliance reviews for Company operating in a Federally-facilitated Exchange or FF-SHOP.
- 1.4 If WBE receives personally identifiable information (PII) directly from Exchange applicants or from Hub Web Services, WBE agrees to the following:
 - 1.4.1 WBE shall create, collect, disclose, access, maintain, use, or store PII that it receives directly from Exchange applicants or from Hub Web Services only in accordance with all laws as applicable, including HIPAA and Section 11411(g) of the Patient Protection and Affordable Care Act.
 - 1.4.2 WBE agrees to monitor, periodically assess, and update its security controls and related system risks to ensure the continued effectiveness of those controls in accordance with 45 C.F.R. 155.260(a)(5); and to inform Company of any material change in its administrative, technical, or operational environments, that would require an alteration of the privacy and security standards required by this Agreement or applicable law.
 - 1.4.3 WBE agrees to enter into written agreements with any downstream entity which receives PII directly from Exchange applicants or from Hub Web Services whereby the downstream entity agrees the requirements set forth in this section 1.4.
 - 1.4.4 WBE agrees to the following standards for communication with the Hub:
 - 1.4.4.1 WBE must complete and pass testing with CMS for each type of transaction that it will implement.

1.4.4.2 As applicable, all transactions must be formatted in accordance with the Accredited Standards Committee Implementation Guides.

1.4.4.3 WBE agrees to enter into written agreements with any entity for submitting or receiving FFE data, such entity must agree in writing to be bound by the terms set forth in this section 1.4, test software, and receive Company's approval of software as being the proper format and compatible with the FFE system.

1.4.4.4 WBE agrees to report any Incident or Breach of PII to Company within seventy-two (72) hours after discovery of the Incident or breach.

- 1.5 WBE must permit access by HHS and the Office of the Inspector General ("OIG"), or their designees, through audit, inspection, or other means as determined by HHS or the OIG, or their designees, to WBE's books, contracts, computers, or other electronic systems, including medical records and documentation, in connection with its duties and obligations set forth in the Agreement relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as any covered dependents for the duration of the period in which the Agreement is effective, and until ten (10) years from the effective date that the Agreement expires or is terminated.
- 1.6 Compliance by Downstream Entities. WBE shall include in its contract(s) with any Downstream Entities, and require such Downstream Entities to include in their contract(s) with any Downstream Entities, language that is the same or substantially similar to that contained in these Marketplace Required Provisions, which expressly requires each Downstream Entity to: (i) comply with all applicable laws and regulations, including but not limited to the provisions in Section 1.3 above, to the extent relevant, in performing or assisting in the performance of the duties and obligations set forth in the contract(s) relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as any covered dependents, and (ii) grant access to its books, contracts, computers, or other electronic systems (including medical records and documentation), relating to such Downstream Entity's compliance with applicable provisions Section 1.3 above in connection with the duties and obligations set forth in the contract(s) relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as any covered dependents, to HHS and or the OIG, or their designees, for the duration of the period in which the contract(s) is effective, and for a minimum of ten (10) years from the date the contract(s) expires or is terminated.
- 1.7 No later than ten (10) days following any written request by Company, WBE shall provide Company with a copy of the pertinent contract language (including any amendments thereto) between WBE and any Downstream Entities, and among two or more Downstream Entities, as applicable, to demonstrate compliance with Section 1.6.
- 1.8 The provisions of these Marketplace Required Provisions shall in no way be interpreted as an assumption by Company of legal liability for the actions of WBE or any Downstream Entities, including but not limited to malpractice liability.

PREFERRED PRODUCER MASTER AGREEMENT (Group)

THIS PREFERRED PRODUCER MASTER AGREEMENT among _____ (the "Preferred Producer") and Capital BlueCross and its wholly-owned subsidiaries, Capital Advantage Insurance Company, Capital Advantage Assurance Company, and Keystone Health Plan Central (collectively "Capital") is effective as of _____.

Intending to be legally bound, the Preferred Producer and Capital agree as follows:

SECTION 1. DEFINITIONS

- 1.1 "Agreement" means this Preferred Producer Master Agreement.
- 1.2 "Capital" means Capital BlueCross and its wholly owned subsidiaries, Capital Advantage Insurance Company, Capital Advantage Assurance Company and Keystone Health Plan Central, and their respective directors, officers, and employees. Capital BlueCross, Capital Advantage Insurance Company, Capital Advantage Assurance Company and Keystone Health Plan Central are independent licensees of the Blue Cross and Blue Shield Association.
- 1.3 "Change in Control" means a transaction that results in either (i) holding **Redacted** or more of the outstanding voting securities of an entity; (ii) if an organized corporate entity, having the contractual power to designate a majority of the directors of the entity, or, if not an organized corporate entity, of individuals exercising similar functions; or (iii) in the case of an entity without outstanding voting securities, having the right to **Redacted** or more of the entity's assets, or the right, in the event of dissolution, to **Redacted** or more of the entity's assets.
- 1.4 "Group" means the entity entering into a contract with Capital for a Health Benefits Program. A group must have two or more eligible members. As used herein, "Group" does not include an entity that purchased Capital health benefits coverage through an association.
- 1.5 "Health Benefits Programs" means any one or a combination of the group health benefits plans insured or administered by Capital, as well as the prescription drug, dental, and vision group plans offered by or through Capital. "Health Benefits Programs" does not include Medicare Advantage products; SeniorBlue HMO and SeniorBlue PPO.
- 1.6 "Preferred Producer" means the entity (and its directors, officers, employees, and agents) entering into this Agreement with Capital.
- 1.7 "Producer of Record" means a Standard Producer or a Preferred Producer as designated by a Group, using the appropriate Producer of Record Letter.

- 1.8 “Producer of Record Letter” means the appropriate form letter attached hereto and marked as Schedule “C” which has been executed by a Group and which designates the Producer of Record.
- 1.9 “Replacement Preferred Producer” means the entity (and its directors, officers, employees and agents) which enters into a Preferred Producer Master Agreement with Capital and which enters into a contract with a Standard Producer if (i) the contract between Preferred Producer and the Standard Producer terminates, or (ii) the contract between Capital and Preferred Producer terminates pursuant to Section 21.2.
- 1.10 “Service Area” means the following twenty-one counties within the Commonwealth of Pennsylvania: Adams, Berks, Centre, Columbia, Cumberland, Dauphin, Franklin, Fulton, Juniata, Lancaster, Lebanon, Lehigh, Mifflin, Montour, Northampton, Northumberland, Perry, Schuylkill, Snyder, Union and York.
- 1.11 “Standard Producer” means any licensed agent, agency, or broker who has executed a Standard Producer Acknowledgment Form and entered into a contractual relationship with the Preferred Producer, as well as the individual licensed producers who have completed the Appointment Disclosure Form pursuant to Section 5.3.2 of the Standard Producer Acknowledgment Form.

SECTION 2. APPOINTMENT OF THE PREFERRED PRODUCER

- 2.1 Capital hereby appoints the Preferred Producer to represent it in accordance with this Agreement.

SECTION 3. RELATIONSHIP BETWEEN THE PREFERRED PRODUCER AND CAPITAL

- 3.1 The Preferred Producer’s relationship to Capital is that of an independent contractor, and nothing contained in this Agreement may be construed to make either the Preferred Producer or a Standard Producer employees of Capital. The Preferred Producer has no authority except that which is expressly set forth in this Agreement. No authority may be implied from the authority expressly granted.
- 3.2 The Preferred Producer shall not represent that it is an employee of Capital.
- 3.3 The Preferred Producer will not conduct itself in any manner that may adversely affect the business, good standing and reputation of Capital.
- 3.4 As a Delegated Entity, and in Capital’s authority and responsibility to oversee and monitor all delegated activities, Preferred Producer agrees to the requirements set forth in Schedule “H” (the “Marketplace Required Provisions”), which are hereby incorporated into the Agreement. The Marketplace Required Provisions will apply only to services provided to Capital relating to contract holders or prospective contract holders who are or who may be Enrollees, as well as any covered dependents, and will to the extent inconsistent with any other terms of the Agreement, supersede such inconsistent terms solely as they relate to services rendered to such contract holders. Preferred Producer shall comply with the Marketplace Required Provisions, as applicable.

SECTION 4. AUTHORIZATION OF PREFERRED PRODUCER AND STANDARD PRODUCER

- 4.1 Capital authorizes the Preferred Producer, along with those Standard Producers who are contracted with Preferred Producer, as applicable as determined by Capital, to do the following:
- 4.1.1 To represent Capital to Groups in the Service Area, provided that the appropriate Producer of Record Letter has been executed designating the Preferred Producer or the Standard Producer as Producer of Record.
 - 4.1.2 To obtain and present premium rate quotations for coverage under the Health Benefits Programs.
 - 4.1.3 To solicit applications, enrollment cards, and similar or related documents required by Capital (the "Application Materials") prior to effectuating coverage under contracts for Health Benefits Programs.
 - 4.1.4 Unless authorized in writing by the Group and by Capital to perform premium remittance duties as described more fully in Section 6, to collect only the initial premium (initial premium does not include reserves, fees, retention payments, payment from bank Letters of Credit) from Groups and to remit to Capital all initial premiums collected within a reasonable amount of time as determined by Capital.
 - 4.1.5 To be governed strictly by all Capital underwriting and participation rules, regulations, and instructions contained in manuals, proposals or otherwise in effect from time to time. In the event of any dispute between the parties as to the interpretation of underwriting rules, regulations and instructions of Capital, Capital shall make the final determination of all such disputes.
 - 4.1.6 To ensure that all underwriting, participation, and marketing guidelines of Capital applicable to the Health Benefits Programs are communicated to and adhered to by the Standard Producers.
 - 4.1.7 **Redacted**
 - 4.1.8 To observe and comply with all applicable insurance laws and Pennsylvania Insurance Department regulations, and any federal requirements, including those relating to employee benefit plans.
 - 4.1.9 To keep such records and forms as may be reasonably required by Capital and/or required under applicable laws and regulations. Such records together with all manuals and all supplies furnished to the Preferred Producer by Capital shall remain the property of Capital and shall be subject to examination by and/or surrender to Capital at any time.

SECTION 5. LIMITATIONS ON AUTHORITY OF PREFERRED AND STANDARD PRODUCERS

- 5.1 The Preferred Producer's authority does not permit the Preferred Producer, or any Standard Producer, to perform any of the following acts:
- 5.1.1 To waive, modify, or change any terms, conditions, rates, proposals, or limitations of any contract issued for Health Benefits Programs.
 - 5.1.2 To bind or commit Capital in any manner.

- 5.1.3 To receive any money for Capital, except the initial premium as specified in Section 4.1.4, unless authorized in writing by the Group and by Capital to perform the premium remittance duties described in Section 6.
- 5.1.4 To extend the time for any premium payment.
- 5.1.5 To reinstate any coverage terminated.
- 5.1.6 To adjust, settle, or admit liability on any claim.
- 5.1.7 To solicit applications or enrollment forms outside the Service Area.
- 5.1.8 To effect any verbal contracts for Health Benefits Programs.
- 5.1.9 To effect any contracts for Health Benefits Programs except by means of authorized forms duly executed by authorized Capital representatives.
- 5.1.10 To publish or cause to be published, circulate or cause to be circulated, or utilize in the marketing effort contemplated under this Agreement any advertising material other than that approved in writing by or furnished by Capital.

For purposes of this section “advertising material” includes, but is not limited to: (i) printed and published material, audiovisual material, or descriptive literature used in direct mail, newspaper, magazines, radio and television scripts, electronic commerce, billboards and similar displays; (ii) descriptive literature and sales aids of all kinds but not limited to circulars, leaflets, booklets, illustrations, computer proposals, and form letters; and (iii) all materials containing service marks owned by Capital, any Capital affiliate or the Blue Cross and Blue Shield Association.

- 5.1.11 To extend credit or incur any indebtedness, liability, or obligation on behalf of Capital.
- 5.1.12 To sign an application on behalf of an applicant.
- 5.1.13 To pay, allow, or offer to pay or allow as an inducement to any person or Group, any rebate of premium or other form of consideration.

5.1.14 Redacted



- 5.1.15 To enter into any legal proceeding pertaining to Capital as a representative of Capital, including the acceptance of legal process on behalf of Capital.

5.1.16 To act in a manner contrary to any laws, rules, or regulations of any governmental or other regulatory authority having jurisdiction over the subject matter of this Agreement.

5.1.17 Redacted

SECTION 6. PREMIUM REMITTANCE

- 6.1 All premium payments due and owing to Capital shall remain the property of Capital. If the Group and Capital authorize the Preferred Producer to serve as the premium billing and collection agent, all such payments shall be held in trust by the Preferred Producer. The Preferred Producer shall remit all premium payments immediately in full to Capital. Furthermore, the Preferred Producer has no interest in premium payments remitted by Groups and shall make no deductions from the premiums for any reason. Nothing contained herein shall be construed to give the Preferred Producer any interest, ownership, or proprietary control over any premiums received.
- 6.2 All premium payments, including the initial payment, must be made payable to Capital.
- 6.3 Demand is hereby made on the Preferred Producer for the payment of any and all premium payments received. Such demand is hereby accepted by the Preferred Producer in lieu of any further demand for such payment(s).

SECTION 7. ELIGIBLE GROUPS

- 7.1 In order to be eligible for the Health Benefits Programs offered by Capital, a Group must comply with current eligibility and underwriting standards/guidelines of Capital. These standards/guidelines are subject to change without notice.
- 7.2 All necessary enrollment materials and premium rate quotation requests must be received by Capital within any deadlines set by Capital before a Group will be considered for coverage.
- 7.3 A Group must execute the required documentation established by Capital from time to time and be formally accepted by Capital in order to be enrolled.

SECTION 8. RESERVATION OF RIGHTS

- 8.1 Capital reserves the right to reject any application for enrollment in Health Benefits Programs.
- 8.2 Capital reserves the right to discontinue or withdraw from sale any Health Benefits Programs, amendment, or endorsement.
- 8.3 Capital reserves the right to amend or cancel any Health Benefits Programs.
- 8.4 Capital reserves the right to determine all terms, conditions, and limitations on any Health Benefits Programs contracts.
- 8.5 Capital reserves the right to amend, delete, or add any Capital procedure.

8.6

Redacted

8.7 Capital reserves the right to audit Groups in accordance with the terms and conditions of the Health Benefits Programs. Capital may conduct such audits to determine, for example, whether the Groups are in compliance with the underwriting and enrollment guidelines and minimum participation requirements. Preferred Producer shall assist and cooperate with Capital as necessary in order for Capital to conduct such audits, including production of all Group documentation in Preferred Producer's possession.

8.8 If Capital does not extend coverage under a contract for Health Benefits Programs for one of the reasons listed above, no commission shall be paid.

SECTION 9. SERVICE MARKS

9.1 The Preferred Producer may not use in any form any registered or unregistered trademark, trade name, or service mark owned by Capital, any Capital affiliate or by the Blue Cross and Blue Shield Association, nor may the Preferred Producer place any advertisement pertaining to Capital in any medium, or issue or distribute any circular, letter, or publication referring to Capital without Capital's prior written approval. (See Section 5.1.10 for additional limitations on the Preferred Producer's authority to conduct marketing efforts under this Agreement.)

SECTION 10. COMMISSIONS AND ADMINISTRATIVE FEES

10.1 As a condition precedent to the receipt of commission payments, the Preferred Producer or Standard Producer, as applicable, must submit a Producer of Record Letter using the appropriate form set forth in Schedule "C" and executed by a Group.

10.2 Redacted

10.3 Capital shall pay commissions to Preferred Producer and Standard Producer, as applicable, according to the standard commission schedule in effect from time to time, which is attached hereto as Schedule "A-1". Capital may modify the standard commission schedule upon written notice to Preferred Producer. Preferred Producer will notify its affiliated Standard Producers in writing of such standard commission modifications, which must be approved by Capital.

10.4 The commission payment level to be used to determine the commission payment for the Preferred Producer will remain in effect until revised by the execution of a new Producer of Record Letter.

10.5 Redacted

Redacted

SECTION 11. COMMISSION PAYMENT RULES

11.1 Capital will remit commissions as set forth on Schedule "A" and Redacted

11.2 Capital will remit commissions to the Preferred Producer.

11.3 Redacted

11.4 If a Group's contract is terminated for any reason by Capital or the Group, all rights to commissions shall cease upon the effective date of the Group's contract termination, provided that all premiums have been paid.

11.5 Commissions shall be payable monthly Redacted Redacted

SECTION 12. COMMISSIONS AND THE STANDARD PRODUCER

12.1 Redacted

12.2 Redacted

12.3 Redacted

12.4 Redacted

12.5 Reserved.

12.6 Redacted

SECTION 13. BONUS AND INCENTIVE PROGRAMS

13.1 Redacted

SECTION 14. ACCOUNTING

- 14.1 Each month Capital shall provide to the Preferred Producer a written commission detail statement, showing all Group business activity represented by the Preferred Producer during the preceding month. Capital shall then credit all commissions and administrative fees earned to the Preferred Producer. Any commissions or administrative fees to be repaid by the Preferred Producer, and any debts or debts due or to become due Capital by the Preferred Producer including, but not limited to, obligations which arise under Section 17, shall be debited to the Preferred Producer's account as an offset against payable credits. The amount of any remaining credit shall be remitted to the Preferred Producer, with a copy of such accounting.
- 14.2 Upon receipt from Capital of any written commission detail statement, the Preferred Producer agrees to examine the same immediately and to notify Capital at once of any difference between said statement and the Preferred Producer's records. Failure of the Preferred Producer to notify Capital within sixty (60) days of any difference shall be an admission of the correctness of such statement. After the sixty-day period, the Preferred Producer shall not be permitted to present a claim for additional monies.

SECTION 15. RECORDS RETENTION

- 15.1 The Preferred Producer shall maintain complete records of all transactions pertaining to Groups and correspondence to and from Groups for the longer of (i) the current year plus the six preceding calendar years or (ii) any period required by applicable law.

SECTION 16. LICENSES AND COMPLIANCE WITH REGULATIONS

- 16.1 The Preferred Producer hereby represents and warrants that it is properly licensed to conduct all insurance business required pursuant to this Agreement.

16.2 Redacted

16.3 The Preferred Producer shall immediately notify Capital of any suspension, revocation or expiration of the Preferred Producer's license or of any termination, suspension, or expiration of a Standard Producer's license. The Preferred Producer shall immediately notify Capital in the event the Preferred Producer is alleged to have committed any action or omission for which the penalty of suspension, revocation or expiration is possible. Upon receiving such notice, Capital shall have the right, in its sole discretion, to terminate the Agreement. The failure on the part of Capital to elect to terminate this Agreement immediately shall not be construed as a waiver of the right to do so subsequently.

SECTION 17. PREFERRED PRODUCER RESPONSIBLE FOR ACTIONS OF STANDARD PRODUCERS; TRANSFER OF STANDARD PRODUCER

17.1 The Standard Producer shall be permitted to submit applications for enrollment only after:

17.1.1 The Standard Producer executes the Standard Producer Acknowledgment Form (a copy is attached as Schedule "E"), as amended or supplemented from time to time by Capital.

17.1.2 The Standard Producer executes the appropriate Producer/Applicant Disclosure Form (copies of Form C-7 and Form C-8 are attached as Schedule "F"), as amended or supplemented from time to time by Capital.

17.1.3 The Standard Producer has been appointed by Capital.

17.2 The Preferred Producer shall be responsible for the completion and submission to Capital of all forms required for appointing the Standard Producers. The responsibilities of the Preferred Producer are not satisfied or dismissed by the Standard Producer completing the Standard Producer Acknowledgment Form.

17.3 Redacted

17.4 The Standard Producer shall not misrepresent itself in any way, as determined by Capital, including, but not limited to, that it is an employee of Capital.

17.5 Redacted

17.6 Redacted

17.6.1 Redacted

intention to contract with a Replacement Preferred Producer at the conclusion of the 180-day period; provided, however, that in the event of extenuating circumstances (as determined by Capital), Capital may consent to a transfer before the 180-day period ends upon receipt of a written request by the Standard Producer.

SECTION 18. CONFIDENTIALITY

18.1 During the term of this Agreement and any extension thereof, or at any time after termination of the Agreement, the Preferred Producer shall not divulge or use any confidential and/or proprietary information about the business of Capital, except as authorized by Capital in writing. Confidential and proprietary information about the business of Capital includes, but is not limited to, policies, procedures, underwriting guidelines, and/or group specific proposals of Capital, in any form whatsoever, which the Preferred Producer obtained by reason of this Agreement.

18.2 Redacted

18.3 Redacted

SECTION 19. INDEMNIFICATION

19.1 Indemnification by the Preferred Producer. The Preferred Producer agrees to indemnify and save Capital, its affiliates and subsidiaries and its officers, directors, and employees harmless from any damage and against any liability for loss, cost, expenses, fines, penalties, including punitive or exemplary damages and all costs of defense; (i) resulting from any act, error or omission, whether intentional or unintentional, by the Preferred Producer and its officers, directors, employees and its Standard Producers, related to or which arise out of the business covered by this Agreement, or (ii) resulting from any obligation, act or transaction created or performed by the Preferred Producer in violation of, in excess of, or in contravention of the power and authority of the Preferred Producer set forth in this Agreement.

19.1.1 In cases in which the Preferred Producer's errors and omissions liability insurer does not tender a defense for a lawsuit hereunder, (i) Capital shall select its own defense counsel, (ii) the Preferred Producer shall pay all expenses incurred by Capital relating to its defense, and (iii) Capital shall decide in its sole opinion whether claims or suits may be settled.

19.1.2 In cases in which the Preferred Producer's errors and omissions liability insurer tenders a defense for a lawsuit hereunder, (i) the Preferred Producer shall submit a written request to its errors and omissions liability insurer to retain counsel recommended by Capital, and (ii) the Preferred Producer shall obtain the consent of Capital before agreeing to any settlement, which consent shall not be unreasonably withheld.

19.1.3 The Preferred Producer expressly authorizes Capital, without precluding Capital from exercising any other remedy it may have, to charge against all compensation due or to become due to the Preferred Producer under this Agreement any monies paid or liabilities incurred by Capital by reason of any occurrence described herein.

- 19.2 Indemnification by Capital. Capital agrees to indemnify and save the Preferred Producer and the Standard Producer, their respective officers, directors, partners, and employees harmless from any damage and against any liability for loss, cost, expenses, fines, penalties, including punitive or exemplary damages and all costs of defense resulting from any act, error or omission, whether intentional or unintentional, by Capital and its officers, directors, and employees related to or which arise out of the business covered by this Agreement.

SECTION 20. ERRORS AND OMISSIONS INSURANCE

- 20.1 During the entire term of this Agreement, the Preferred Producer and the Standard Producer are required to maintain errors and omissions insurance coverage with an insurance company have an A.M. Best rating of "A" or higher. Preferred Producer shall maintain coverage with an aggregate limit of liability of at least Three Million (\$3,000,000) Dollars. Standard Producer shall maintain coverage with an aggregate limit of liability of at least One Million (\$1,000,000) Dollars.
- 20.2 The Preferred Producer is further required to provide Capital, at its request, with a copy of such errors and omissions insurance policy.
- 20.3 The Preferred Producer shall notify Capital within five (5) days if the Preferred Producer receives notice that the errors and omissions insurance carrier intends to terminate, cancel, non-renew, or rescind the errors and omissions insurance coverage.

SECTION 21. TERM AND TERMINATION

- 21.1 This Agreement shall be effective from the date first above written and shall continue in full force and effect for twelve (12) consecutive months, at which time, unless terminated as set forth below, this Agreement shall automatically renew for a further period of twelve (12) consecutive months and thereafter from year to year.
- 21.2 This Agreement may be terminated at any time by any party hereto upon thirty (30) days written notice to the other parties.
- 21.3 The Agreement may be terminated immediately upon the occurrence of any of the following:
- 21.3.1 Such termination is required by state or federal law or regulation, or by an order of any state or federal agency or court with authority to issue such an order.
 - 21.3.2 Enforcement of any disciplinary regulatory action against, or suspension or termination of the Preferred Producer's license.
 - 21.3.3 The Preferred Producer withholds, converts for its own use, or otherwise misappropriates funds of Capital or a Group.
 - 21.3.4 The Preferred Producer commits any illegal act or fraud in the performance of its duties under this Agreement.
 - 21.3.5 The Preferred Producer fails to maintain errors and omissions coverage as set forth in Section 20 above.

- 21.3.6 Upon the Preferred Producer's death or dissolution, bankruptcy or insolvency.
- 21.3.7 Upon the assignment of the Agreement by the Preferred Producer for the benefit of creditors.
- 21.3.8 Upon the Preferred Producer's breach of any of the terms of this Agreement or of Capital underwriting rules, regulations and instructions.
- 21.3.9 Upon the Preferred Producer's conviction, entry of a plea of *nolo contendere*, or the imposition of probation without verdict for any felony, or a misdemeanor related to the business of insurance, including but not limited to fraud, theft, embezzlement, or any other offense related to the misuse or taking of funds.
- 21.3.10 Upon the Preferred Producer's breach of any provision of the HIPAA Business Associate Addendum to which Section 30 refers.

21.4 Redacted

21.5 Redacted

SECTION 22. EFFECT OF TERMINATION UPON COMMISSIONS AND ADMINISTRATIVE FEES

22.1 Upon termination of this Agreement by the Preferred Producer, without cause, pursuant to Section 21.2, the Preferred Producer shall have no right to receive the commissions and administrative fees described in Schedule "A".

22.2 Upon termination of the Agreement by Capital, without cause, pursuant to Section 21.2, Redacted
Section 21.4:

22.2.1 Redacted

22.2.2 Redacted

Redacted

22.3. Reserved.

22.4 Upon termination of this Agreement for any one of the reasons enumerated at Section 21.3 ("the Terminating Event"), the Preferred Producer shall have no right to receive commissions or administrative fees. Commission and administrative fee payment shall cease as of the last day of the month in which the Terminating Event occurred.

22.5 This Section 22 shall survive any termination of this Agreement.

SECTION 23. JOINT AND SEVERAL LIABILITY

23.1 In the event of a transfer of ownership of the Preferred Producer's business, the Preferred Producer shall remain jointly and severally liable with the purchaser/transferee for all premium remittances received and all debts and obligations incurred under this Agreement, unless otherwise agreed to in writing by Capital.

SECTION 24. ASSIGNMENT OF COMMISSIONS

24.1 Any assignment of commissions payable under this Agreement shall be valid only with Capital's prior written approval, which approval will not be unreasonably withheld. Any assignment will be subject also to the terms of Section 10.5 above.

SECTION 25. ASSIGNMENT OF THE AGREEMENT

25.1 This Agreement shall not be sold, pledged, or assigned by the Preferred Producer without Capital's prior written approval.

SECTION 26. NON-SOLICITATION OF EMPLOYEES

26.1 Redacted

SECTION 27. NOTICES

27.1 All notices required or permitted to be given hereunder shall be in writing and shall be delivered (i) by prepaid certified or registered mail or a nationally recognized overnight courier or (ii) by any electronic method for which receipt is documented, addressed to the party to whom it is directed at its address set forth below, or to such other address as may

from time to time be specified by one party to the other. All notices shall be effective upon the earlier of (i) receipt, or (ii) with respect to notices that are sent by certified or registered mail, three (3) business days after mailing, and with respect to notices sent by overnight courier one (1) business day after sending.

TO: CAPITAL TO: PREFERRED PRODUCER

Senior Director, Producer Relations
Capital BlueCross
2500 Elmerton Avenue
Harrisburg, PA 17110

Any party may at any time change or amend its address for notification purposes, by mailing a notice as required hereinabove, stating the change and setting forth the new address. The new address shall be effective on the date specified in such notice, or if no date is specified, on the tenth (10th) day following the date such notice is received.

SECTION 28. AMENDMENT OR MODIFICATION

- 28.1 The terms of this Agreement, including but not limited to Schedule "A-1" and Schedule "A-2", may be waived, amended, modified or supplemented in writing as agreed to by the parties; provided, however that the Agreement may be amended automatically, without the consent of Preferred Producer, in order to meet applicable local, state or federal statutory or regulatory requirements. Capital shall provide Preferred Producer with written notice of such amendments for statutory or regulatory compliance. **Redacted**

[Redacted]

- 28.2 **Redacted**

[Redacted]

SECTION 29. NOTIFICATION OF COMPLAINTS OR INQUIRIES

- 29.1 The Preferred Producer shall forward to Capital immediately upon receipt any and all governmental or other communications, complaints, and/or inquiries, written or oral, regarding or pertaining to the subject matter of this Agreement.

SECTION 30. HIPAA COMPLIANCE

- 30.1 The Preferred Producer shall comply with the terms of the HIPAA Business Associate Addendum attached hereto, marked as Schedule "G," and incorporated herein by reference.

SECTION 31. WAIVER

- 31.1 No forbearance or neglect on the part of Capital to insist upon compliance with the terms of this Agreement shall be construed as or constitute a waiver of any provision of this Agreement or a grant of authority under this Agreement.

SECTION 32. SEVERABILITY

- 32.1 The invalidity of any one or more of the words, phrases, sentences, clauses, sections, or subsections contained in this Agreement shall not affect the enforceability of the remaining portions of this Agreement.
- 32.2 The parties agree that their reciprocal rights and obligations under this Agreement constitute good and valuable consideration for the several obligations imposed upon each party hereunder. To the extent required by law, each individual provision in this Agreement shall be deemed adequately supported by separate and independent consideration.

SECTION 33. SECTION HEADINGS

- 33.1 The section headings contained in this Agreement are for reference purposes only and shall not affect the meaning or interpretation of any provisions of this Agreement.

SECTION 34. GOVERNING LAW

- 34.1 This Agreement shall be governed by and construed and enforced in accordance with the laws of the Commonwealth of Pennsylvania.
- 34.2 If the parties are unable to informally resolve any controversy or claim arising out of or relating to this Agreement, or the breach thereof as alleged by Standard Producer, such claim or breach shall be settled by binding arbitration administered by the American Arbitration Association ("AAA") and conducted by a panel of three (3) Arbitrators, one selected by Capital, one selected by the Preferred Producer, and the third selected by the other two (2) Arbitrators (collectively, the "Arbitrators") in accordance with the AAA's Commercial Arbitration Rules ("Rules"). The Arbitrators' decision shall be in satisfaction of all claims by all parties. Arbitrators' fees and expenses shall be borne equally by the parties unless otherwise awarded by the Arbitrators. Each party shall bear all other fees and expenses it incurs, including all filing, witness, expert witness, transcript, and attorneys' fees. . Such arbitration proceeding shall take place in Dauphin County, Pennsylvania.
- 34.3 Notwithstanding the provisions of Section 34.2 above, nothing shall preclude Capital from seeking relief against the Preferred Producer in a Court of Law or in Equity under appropriate circumstances, including but not limited to, a request for injunctive relief. The Preferred Producer acknowledges that its obligations under this Agreement are unique and that monetary redress may be inadequate to compensate Capital for the breach thereof. The parties hereby agree that the venue for any such equity proceedings shall be the Court of Common Pleas of Dauphin County. The Preferred Producer, wherever it may be located, hereby consents to personal jurisdiction and venue before the Court of Common Pleas of Dauphin County.

SECTION 35. EXHIBITS INCORPORATED

- 35.1 All exhibits, attachments, tables or schedules referenced herein, attached or incorporated by reference are incorporated herein to the same extent as if set forth in full herein.

SECTION 36. ENTIRE AGREEMENT

- 36.1 This Agreement, together with the Schedules attached hereto, constitutes the entire agreement between the parties with respect to the matters contained herein. This

Agreement supersedes all prior agreements, understandings, negotiations, and discussions among the parties pertaining to the Preferred Producer program.

SECTION 37. DISCRIMINATION

37.1 Capital does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation, or health status in the administration of Health Benefit Programs, including enrollment and benefit determinations.

The parties hereto, each acting under due and proper authority and intending to legally bound, have executed this Agreement.

PREFERRED PRODUCER

**CAPITAL BLUE CROSS
CAPITAL ADVANTAGE INSURANCE COMPANY
CAPITAL ADVANTAGE ASSURANCE COMPANY
KEYSTONE HEALTH PLAN CENTRAL**

Signature

Tracy Onorofsky
Senior Vice President Commercial Group
Sales

Name

Date

Title

Date

COMMISSION SCHEDULE

In consideration of and as full compensation for services performed as a Capital-appointed producer, Capital will remit payment of monthly commissions and administrative fees, as applicable, according to its then-current standard commission schedule as follows:

1. **Preferred Producer**

1.1 Small Groups (2 to 99 enrolled employees). Commissions on all Small Groups for which the Preferred Producer or any Standard Producer associated with the Preferred Producer serves as Producer of Record shall be paid as follows: Preferred Producer will earn up to **Redacted** per contract per month. Commissions are incorporated into the rates in effect for all Small Groups.

1.2 Large Groups (100+ enrolled employees, experienced rated). **Redacted**

Redacted

500 or more enrolled employees

10.0% of Producer of Record's Commission

1.3 BlueCross Vision.

Redacted

1.3.2 **Redacted**

Redacted

1.4 BlueCross Dental.

1.4.1 **Redacted**

1.4.2 **Redacted**

Redacted

Confidential & Proprietary Information

2. **Producer of Record**

2.1 Small Groups (2 to 99 enrolled employees). For commissions earned associated with an October 1, 2009 coverage date and thereafter, the Preferred Producer or Standard Producer will earn Redacted per contract per month on all Small Groups for which the Preferred Producer or Standard Producer serves as Producer of Record. Commissions are incorporated into the rates in effect for all Small Groups.

2.2 Large Groups (100+ enrolled employees, experienced rated). Redacted

Redacted

2.3 BlueCross Vision.

Redacted

2.4 BlueCross Dental.

Redacted

BONUS AND INCENTIVE PROGRAMS

Redacted

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Redacted

PRODUCTION STANDARDS AND ADMINISTRATIVE REQUIREMENTS

Subject to the terms of the Preferred Producer Master Agreement to which this schedule is attached, the Preferred Producer shall comply with Capital's then-current production standards and administrative requirements:

1. **Production Standards**

1.1

Redacted

1.2

1.3

2. **Administrative Requirements**

2.1

Redacted

■

Redacted

PRODUCER OF RECORD LETTER FOR SMALL GROUPS: Form A
(Preferred Producer is Producer of Record)

The Producer of Record Letter must:

1. be on the Group's letterhead;
2. be dated and signed by an authorized representative of the Group (e.g. an owner, officer, or partner, indicating the title of the authorized representative); and
3. disclose the Preferred Producer's receipt of commission.



Redacted

PRODUCER OF RECORD LETTER FOR SMALL GROUPS: Form B
(Standard Producer is Producer of Record)

The Producer of Record Letter must:

1. be on the Group's letterhead;
2. be dated and signed by an authorized representative of the Group (e.g. an owner, officer, or partner, indicating the title of the authorized representative); and
3. disclose the receipt of commission by the Standard Producer and the Preferred Producer.

Redacted

PRODUCER OF RECORD LETTER (PERCENTAGE OF PAYMENT DUE EACH MONTH): Form C

The Producer of Record Letter must:

1. be on the Group's letterhead;
2. be dated and signed by an authorized representative of the Group (e.g. an owner, officer, or partner, indicating the title of the authorized representative); and
3. disclose the Producer of Record's receipt of commission and the commission percentage that will be factored into the Group's payment due each month.

Redacted

PRODUCER OF RECORD LETTER (PER CONTRACT PER MONTH): Form D

The Producer of Record Letter must:

1. be on the Group's letterhead;
2. be dated and signed by an authorized representative of the Group (e.g. an owner, officer, or partner, indicating the title of the authorized representative); and
3. disclose the Producer of Record's receipt of commission and the cost per contract commission percentage that will be factored into the Group's payment due each month.

Redacted

PRODUCER OF RECORD LETTER (PERCENTAGE OF PREMIUM): Form E

The Producer of Record Letter must:

1. be on the Group's letterhead;
2. be dated and signed by an authorized representative of the Group (e.g. an owner, officer, or partner, indicating the title of the authorized representative); and
3. disclose the Producer of Record's receipt of commission and the commission percentage that will be factored into the Group's payment due each month.

Redacted

PRODUCER OF RECORD RESCIND LETTER

The Producer of Record Rescind Letter must:

1. be on the Group's letterhead; and
2. be dated and signed by an authorized representative of the Group (e.g. an owner, officer, or partner, indicating the title of the authorized representative).

PLEASE NOTE: *If the Group intends to designate a new Producer of Record, the Rescind Letter must be accompanied by a Producer of Record Letter naming the new Producer of Record.*

Redacted

BUSINESS ASSOCIATE AGREEMENT

MARKETPLACE REQUIRED PROVISIONS

Definitions

For purposes of these Marketplace Required Provisions and Section 3.4, the following capitalized terms will have the meanings set forth below. All other capitalized terms will have the meaning set forth in the Agreement.

“Delegated Entity” has the meaning set forth in 45 C.F.R. §156.20.

“Downstream Entity” has the meaning set forth in 45 C.F.R. §156.20.

“Enrollee” has the meaning set forth in 45 C.F.R. §155.20

“Federally-facilitated Exchange” means an Exchange (or Marketplace) established by HHS and operated by the Centers for Medicare and Medicaid Services under §1321(c)(1) of PPACA for individual or small group market coverage, including the Federally-facilitated Small Business Health Options Program (FF-SHOP)

“Qualified Employee” has the meaning set forth in 45 C.F.R. §155.20

“Qualified Health Plan” has the meaning set forth in 45 C.F.R. §155.20

“Qualified Health Plan Issuer” has the meaning set forth in 45 C.F.R. §155.20

“Qualified Individual” has the meaning set forth in 45 CFR 155.20

Provisions

1.1 In the course of performing its duties and obligations set forth in the Agreement, Preferred Producer constitutes a Delegated Entity, and may contract with other individuals or entities that constitute Downstream Entities to assist in performing such duties and obligations. Preferred Producer is obligated to make all necessary reports to Capital that (i) are specified in the Agreement; or (ii) required under applicable federal or state law.

1.2 If HHS or Capital determines that Preferred Producer, or any Downstream Entity that Preferred Producer contracts with as described herein, has not performed satisfactorily the duties and obligations set forth in the Agreement relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as their dependents, Capital may terminate the Agreement in accordance with the procedures for termination within the Agreement.

1.3 Preferred Producer must comply with all of the laws and regulations relating to the following standards, if applicable to Preferred Producer, in performing its duties and obligations set forth in the Agreement relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as any covered dependents: (i) 45 C.F.R. Part 156, Subpart C with respect to each Qualified Health Plan on an ongoing basis; (ii) Marketplace processes, procedures and standards pertaining to Qualified Health Plan certification under 45 C.F.R. Part 155, Subparts H and K; (iii) 45 C.F.R. §155.220 with respect to assisting with enrollment in

Qualified Health Plans; and (iv) 45 C.F.R. §156.705 and §156.715 for maintenance of records and compliance reviews for Capital operating in a Federally-facilitated Exchange or FF-SHOP.

1.4 Preferred Producer must permit access by HHS and the Office of the Inspector General ("OIG"), or their designees, through audit, inspection, or other means as determined by HHS or the OIG, or their designees, to Preferred Producer's books, contracts, computers, or other electronic systems, including medical records and documentation, in connection with its duties and obligations set forth in the Agreement relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as any covered dependents for the duration of the period in which the Agreement is effective, and until ten (10) years from the effective date that the Agreement expires or is terminated.

1.5 Preferred Producer shall include in its contract(s) with any Downstream Entities, and require such Downstream Entities to include in their contract(s) with any Downstream Entities, language that is the same or substantially similar to that contained in these Marketplace Required Provisions, which expressly requires each Downstream Entity to: (i) comply with all applicable laws and regulations, including but not limited to the provisions in Section 1.3 above, to the extent relevant, in performing or assisting in the performance of the duties and obligations set forth in the contract(s) relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as any covered dependents, and (ii) grant access to its books, contracts, computers, or other electronic systems (including medical records and documentation), relating to such Downstream Entity's compliance with applicable provisions Section 1.3 above in connection with the duties and obligations set forth in the contract(s) relating to Contract Holders or prospective Contract Holders who are or who may be Enrollees, as well as any covered dependents, to HHS and or the OIG, or their designees, for the duration of the period in which the contract(s) is effective, and for a minimum of ten (10) years from the date the contract(s) expires or is terminated.

1.6 No later than ten (10) days following any written request by Capital, Preferred Producer shall provide Capital with a copy of the pertinent contract language (including any amendments thereto) between Preferred Producer and any Downstream Entities, and among two or more Downstream Entities, as applicable, to demonstrate compliance with Section 1.5.

1.7 The provisions of these Marketplace Required Provisions shall in no way be interpreted as an assumption by Capital of legal liability for the actions of Preferred Producer or any Downstream Entities, including but not limited to malpractice liability.

Keystone Health Plan Central
Small Group Rates
Effective 1/1/2017
Q&A Exhibit 1

Broker Commission Calculation

<u>Current</u>	
	<u>All Plans</u>
Broker Commission (PCPM)	[REDACTED]
Average Members Per Contract	[REDACTED]
Broker Commission (PMPM)	\$19.44
Calculated Broker Commission in Rate Development	\$19.68

<u>2017</u>	
	<u>All Plans</u>
Broker Commission (PCPM)	[REDACTED]
Average Members Per Contract	[REDACTED]
Broker Commission (PMPM)	\$19.44
Calculated Broker Commission in Rate Development	\$19.35

Keystone Health Plan Central
Small Group Rates
Effective 1/1/2017
Q&A Exhibit 2

Commerical Medical Trend

		<u>2016</u>	<u>2017</u>	<u>Average</u>
Total		7.5%	7.2%	7.3%
Cost	Total	5.4%	5.1%	5.2%
	Facility	6.4%	6.2%	6.3%
	Professional	3.3%	2.6%	3.0%
Utilization		2.0%	2.0%	2.0%

Commercial Drug Trend

		<u>2016</u>	<u>2017</u>	<u>Average</u>
Total		13.8%	16.3%	15.1%
Cost		13.3%	15.7%	14.5%
Utilization		0.5%	0.5%	0.5%

Aggregate Pricing Trend

Medical	7.0%
Drug	13.6%

Keystone Health Plan Central
Small Group Rates
Effective 1/1/2017
Q&A Exhibit 2a

Product HMO
Market Segment COMM

Total																																	
Incurred Claims										Allowed Amount						Utilization						Days						Allowed Cost/Service					
Date	Members	DemoFactor	Incurred Claims	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Allowed Amount	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Stays	Stays/1,000	3-Month Avg Stay/1,000	12-Month Avg Stay/1,000	3 Month Trend	12 Month Trend	Days	Days/1,000	3-Month Avg Days/1,000	12-Month Avg Days/1000	3 Month Trend	12 Month Trend	Monthly Allowed Cost/Svc	3-Month Allowed Cost/Svc	12-Month Avg Allowed Cost/Svc	3 Month Trend	12 Month Trend		
201306	4,701	1.2281	1,264,790	\$ 269.05	\$ 286.43	\$ 326.79	-0.3%	11.8%	1,413,371	\$ 300.65	\$ 321.17	\$ 357.90	1.4%	10.6%	4,359	11,127	12,003	12,221	2.8%	2.5%	102	260	297	370	-10.3%	5.4%	\$ 324.24	\$ 321.08	\$ 351.44	-1.3%	7.9%		
201307	4,777	1.2236	1,288,947	\$ 269.82	\$ 270.60	\$ 324.53	-5.9%	10.7%	1,446,178	\$ 302.74	\$ 303.13	\$ 356.00	-4.1%	9.7%	4,653	11,689	11,582	12,226	-0.8%	1.6%	93	234	278	356	-17.2%	0.4%	\$ 310.81	\$ 314.08	\$ 349.42	-3.4%	8.0%		
201308	4,553	1.2359	1,524,335	\$ 334.80	\$ 290.65	\$ 310.76	-16.1%	2.3%	1,689,137	\$ 370.99	\$ 324.19	\$ 342.79	-13.4%	2.5%	4,446	11,718	11,510	12,120	-3.3%	0.4%	77	203	233	308	-50.4%	-17.6%	\$ 379.92	\$ 337.99	\$ 339.39	-10.5%	2.0%		
201309	4,664	1.2365	1,251,768	\$ 268.39	\$ 290.49	\$ 304.61	-21.9%	-0.6%	1,419,345	\$ 304.32	\$ 325.47	\$ 337.26	-18.8%	0.0%	4,585	11,797	11,734	12,066	-5.1%	-0.2%	109	280	239	303	-51.4%	-18.5%	\$ 309.56	\$ 332.85	\$ 335.41	-14.4%	0.2%		
201310	4,819	1.2445	1,651,560	\$ 342.72	\$ 315.45	\$ 307.14	-15.4%	-0.7%	1,830,723	\$ 379.90	\$ 351.90	\$ 340.39	-12.6%	0.1%	5,310	13,223	12,261	12,057	-4.1%	-0.5%	159	396	295	318	-31.6%	-13.2%	\$ 344.77	\$ 344.41	\$ 338.78	-8.8%	0.6%		
201311	4,801	1.2442	1,464,454	\$ 305.03	\$ 305.78	\$ 297.01	-12.8%	-6.7%	1,630,016	\$ 339.52	\$ 341.65	\$ 330.93	-10.0%	-5.2%	4,611	11,525	12,187	11,983	-3.3%	-1.3%	79	197	292	280	-23.8%	-28.7%	\$ 353.51	\$ 336.42	\$ 331.39	-6.9%	-3.9%		
201312	4,933	1.2531	1,681,191	\$ 340.80	\$ 329.64	\$ 294.87	-7.2%	-9.1%	1,828,248	\$ 370.62	\$ 363.43	\$ 329.26	-5.2%	-7.2%	4,559	11,090	11,940	11,922	-3.9%	-2.4%	159	387	327	284	-14.1%	-29.0%	\$ 401.02	\$ 365.26	\$ 331.40	-1.4%	-5.0%		
201401	4,538	1.2421	1,226,573	\$ 270.29	\$ 306.35	\$ 296.40	-10.5%	-7.5%	1,417,548	\$ 312.37	\$ 341.63	\$ 331.02	-8.4%	-5.6%	4,649	12,292	11,619	11,853	-6.1%	-2.8%	85	225	272	288	-28.2%	-26.4%	\$ 304.95	\$ 352.85	\$ 335.12	-2.4%	-2.8%		
201402	4,472	1.2422	1,246,364	\$ 278.70	\$ 297.94	\$ 297.21	0.3%	-7.3%	1,402,726	\$ 313.67	\$ 333.39	\$ 332.19	1.5%	-5.2%	3,814	10,233	11,207	11,787	-6.6%	-3.1%	114	306	308	297	25.3%	-20.4%	\$ 367.83	\$ 357.00	\$ 338.19	8.7%	-2.2%		
201403	4,374	1.2489	1,485,733	\$ 339.67	\$ 295.78	\$ 300.82	8.3%	-7.0%	1,675,712	\$ 339.67	\$ 335.92	\$ 336.66	9.4%	-4.7%	4,607	12,638	11,717	11,852	-2.4%	-2.1%	207	568	364	306	33.9%	-18.0%	\$ 363.77	\$ 344.03	\$ 340.86	12.1%	-2.7%		
201404	4,071	1.2582	1,071,501	\$ 263.20	\$ 294.46	\$ 296.66	0.3%	-8.7%	1,209,234	\$ 297.04	\$ 331.94	\$ 332.04	1.2%	-6.6%	3,939	11,612	11,482	11,740	-4.0%	-3.8%	78	230	371	302	20.2%	-17.4%	\$ 306.97	\$ 346.92	\$ 339.40	5.4%	-2.9%		
201405	3,958	1.2632	1,223,786	\$ 309.19	\$ 304.85	\$ 299.68	3.5%	-7.8%	1,366,260	\$ 345.19	\$ 342.76	\$ 335.31	4.0%	-5.7%	4,039	12,246	12,176	11,761	-0.3%	-3.5%	74	224	347	293	-1.5%	-20.6%	\$ 338.24	\$ 337.80	\$ 342.14	4.4%	-2.3%		
201406	3,632	1.2615	1,077,289	\$ 296.61	\$ 289.22	\$ 302.16	1.0%	-7.5%	1,197,363	\$ 329.67	\$ 323.54	\$ 337.97	0.7%	-5.6%	3,418	11,292	11,728	11,784	-2.3%	-3.6%	63	208	221	290	-25.4%	-21.6%	\$ 350.34	\$ 331.06	\$ 344.16	3.1%	-2.1%		
201407	3,296	1.2529	871,483	\$ 264.41	\$ 291.43	\$ 302.74	7.7%	-6.7%	980,005	\$ 297.33	\$ 325.52	\$ 338.63	7.4%	-4.9%	3,025	11,015	11,555	11,744	-0.2%	-3.9%	46	167	202	288	-27.4%	-19.1%	\$ 323.92	\$ 338.05	\$ 346.00	7.6%	-1.0%		
201408	3,079	1.2640	1,121,062	\$ 364.10	\$ 306.77	\$ 303.59	5.5%	-2.3%	1,227,805	\$ 398.77	\$ 340.28	\$ 339.38	5.0%	-1.0%	2,884	11,238	11,184	11,716	-2.8%	-3.3%	137	534	295	310	26.8%	0.8%	\$ 425.80	\$ 365.10	\$ 347.60	8.0%	2.4%		
201409	2,873	1.2738	905,184	\$ 315.07	\$ 313.34	\$ 307.62	7.9%	1.0%	995,981	\$ 346.67	\$ 346.43	\$ 343.15	6.4%	1.7%	2,913	12,167	11,447	11,735	-2.4%	-2.7%	63	263	319	311	33.4%	2.6%	\$ 341.92	\$ 363.17	\$ 350.91	9.1%	4.6%		
201410	2,573	1.2615	813,885	\$ 316.32	\$ 333.15	\$ 304.47	5.6%	-0.9%	899,149	\$ 349.46	\$ 366.33	\$ 339.70	4.1%	-0.2%	2,994	13,964	12,374	11,704	0.9%	-2.9%	91	424	410	308	38.9%	-3.1%	\$ 300.30	\$ 355.26	\$ 348.29	3.2%	2.8%		
201411	2,558	1.2672	728,601	\$ 284.83	\$ 305.81	\$ 303.28	0.0%	2.1%	811,604	\$ 317.28	\$ 338.17	\$ 338.43	-1.0%	2.3%	2,541	11,919	12,665	11,736	3.9%	-2.1%	21	99	262	308	-10.0%	9.8%	\$ 319.43	\$ 320.41	\$ 346.05	-4.8%	4.4%		
201412	2,130	1.2285	623,987	\$ 292.95	\$ 298.37	\$ 298.30	-9.5%	1.2%	694,185	\$ 325.91	\$ 331.21	\$ 333.96	-8.9%	1.4%	2,234	12,588	12,840	11,856	7.5%	-0.6%	18	101	215	288	-34.4%	1.3%	\$ 310.67	\$ 309.54	\$ 338.02	-15.3%	2.0%		
201501	2,117	1.2147	675,351	\$ 319.01	\$ 298.01	\$ 302.67	-2.7%	2.1%	758,360	\$ 358.22	\$ 332.72	\$ 337.78	-2.6%	2.0%	2,097	11,885	12,118	11,807	4.3%	-0.4%	38	215	136	291	-50.0%	1.1%	\$ 361.70	\$ 329.48	\$ 343.30	-6.6%	2.4%		
201502	2,098	1.2200	532,415	\$ 253.77	\$ 288.69	\$ 302.79	-3.1%	1.9%	598,135	\$ 253.77	\$ 323.20	\$ 337.71	-3.1%	1.7%	1,933	11,057	11,847	11,956	5.7%	1.4%	29	166	161	282	-47.8%	-4.8%	\$ 309.42	\$ 327.37	\$ 338.96	-8.3%	0.2%		
201503	2,081	1.2241	813,304	\$ 390.82	\$ 321.01	\$ 303.43	8.5%	0.9%	894,166	\$ 429.68	\$ 357.47	\$ 337.50	6.4%	0.2%	2,217	12,787	11,907	11,919	1.6%	0.6%	42	242	208	244	-42.9%	-20.4%	\$ 403.23	\$ 360.27	\$ 339.78	4.7%	-0.3%		
201504	2,086	1.2216	692,223	\$ 331.84	\$ 325.29	\$ 310.29	10.5%	4.6%	775,793	\$ 371.90	\$ 362.03	\$ 344.78	9.1%	3.8%	2,096	12,056	11,964	11,967	4.2%	1.9%	67	385	264	255	-28.7%	-15.8%	\$ 370.18	\$ 363.11	\$ 345.74	4.7%	1.9%		
201505	2,036	1.2212	479,371	\$ 235.45	\$ 319.99	\$ 305.45	5.0%	1.9%	543,210	\$ 266.80	\$ 356.79	\$ 339.53	4.1%	1.3%	1,846	10,882	11,916	11,858	-2.1%	0.8%	22	130	253	250	-27.0%	-14.7%	\$ 294.21	\$ 359.31	\$ 343.59	6.4%	0.4%		
201506	2,017	1.2199	918,573	\$ 455.42	\$ 340.47	\$ 317.01	17.7%	4.9%	987,773	\$ 489.72	\$ 375.76	\$ 351.24	16.1%	3.9%	2,098	12,481	11,806	11,973	0.7%	1.6%	43	256	258	256	16.6%	-11.9%	\$ 470.87	\$ 381.93	\$ 352.04	15.4%	2.3%		
201507	1,966	1.2171	673,134	\$ 342.39	\$ 344.09	\$ 325.09	18.1%	7.4%	745,958	\$ 379.43	\$ 378.29	\$ 359.68	16.2%	6.2%	1,924	11,746	11,700	12,071	1.3%	2.8%	68	415	265	278	31.4%	-3.5%	\$ 387.63	\$ 387.99	\$ 357.56	14.8%	3.3%		
201508	1,942	1.2203	532,847	\$ 274.38	\$ 358.57	\$ 316.84	16.9%	4.4%	584,295	\$ 300.87	\$ 391.23	\$ 350.82	15.0%	3.4%	1,777	10,980	11,745	12,088	5.0%	3.2%	55	340	336	252	14.0%	-18.7%	\$ 328.81	\$ 399.71	\$ 348.27	9.5%	0.2%		
201509	1,849	1.2092	992,798	\$ 536.94	\$ 381.93	\$ 333.03	21.9%	8.3%	1,041,419	\$ 563.23	\$ 411.96	\$ 366.72	18.9%	6.9%	1,678	10,893	11,214	11,992	-2.0%	2.2%	82	532	427	272	33.9%	-12.5%	\$ 620.47	\$ 440.84	\$ 366.96	21.4%	4.6%		
201510	1,657	1.1925	638,520	\$ 385.35	\$ 397.24	\$ 338.31	19.2%	11.1%	681,585	\$ 411.34	\$ 423.51	\$ 371.54	15.6%	9.4%	1,754	12,702	11,474	11,833	-7.3%	1.1%	83	601	485	278	18.3%	-9.8%	\$ 388.61	\$ 442.92	\$ 376.78	24.7%	8.2%		
201511	1,667	1.1829	935,063	\$ 560.93	\$ 496.11	\$ 359.79	62.2%	18.6%	995,257	\$ 597.04	\$ 525.47	\$ 393																					

Inpatient																																	
Incurred Claims										Allowed Amount						Utilization						Days						Allowed Cost/Service					
Date	Members	DemoFactor	Incurred Claims	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend		Allowed Amount	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Stays	Stays/1,000	3-Month Avg Stays/1,000	12-Month Avg Stays/1,000	3 Month Trend	12 Month Trend	Days	Days/1,000	3-Month Avg Days/1,000	12-Month Avg Days/1,000	3 Month Trend	12 Month Trend	Monthly Allowed Cost/Svc	3-Month Avg Allowed Cost/Svc	12-Month Avg Allowed Cost/Svc	3 Month Trend	12 Month Trend	
201306	4,701	1.2281	335,864	\$ 71.45	\$ 84.69	\$ 101.54	22.9%	26.7%		347,308	\$ 73.88	\$ 87.09	\$ 103.40	23.3%	26.2%	23	59	83	85	2.4%	-1.9%	102	260	297	370	-10.3%	5.4%	\$ 15,100.36	\$ 12,664.30	\$ 14,592.78	20.3%	28.6%	
201307	4,777	1.2236	366,678	\$ 76.76	\$ 82.07	\$ 100.44	9.9%	28.0%		374,593	\$ 78.42	\$ 83.91	\$ 102.21	9.6%	27.3%	24	60	69	83	-10.9%	-2.6%	93	234	278	356	-17.2%	0.4%	\$ 15,608.04	\$ 14,495.18	\$ 14,741.53	23.1%	30.6%	
201308	4,553	1.2359	583,593	\$ 128.18	\$ 91.66	\$ 90.25	-25.6%	4.2%		595,589	\$ 130.81	\$ 93.90	\$ 92.07	-25.0%	4.1%	31	82	67	81	-24.5%	-5.6%	77	203	233	308	-50.4%	-17.6%	\$ 19,212.55	\$ 16,890.90	\$ 13,723.19	-0.6%	10.3%	
201309	4,664	1.2365	343,965	\$ 73.75	\$ 92.49	\$ 87.79	-33.6%	0.1%		348,262	\$ 74.67	\$ 94.21	\$ 89.57	-33.3%	0.0%	35	90	77	80	-20.0%	-6.0%	109	280	239	303	-51.4%	-18.5%	\$ 9,950.36	\$ 14,649.39	\$ 13,488.11	-16.6%	6.3%	
201310	4,819	1.2445	511,929	\$ 106.23	\$ 102.56	\$ 91.22	-21.9%	3.4%		518,948	\$ 107.69	\$ 104.22	\$ 93.00	-21.6%	3.3%	29	72	81	80	-10.6%	-4.7%	159	396	295	318	-31.6%	-13.2%	\$ 17,894.76	\$ 15,397.90	\$ 13,891.89	-12.3%	8.4%	
201311	4,801	1.2442	265,440	\$ 55.29	\$ 78.50	\$ 84.15	-21.9%	-9.6%		272,701	\$ 56.80	\$ 79.80	\$ 85.92	-21.8%	-9.5%	31	77	80	79	-5.8%	-6.1%	79	197	292	280	-23.8%	-28.7%	\$ 8,796.81	\$ 11,999.08	\$ 13,049.00	-17.0%	-3.6%	
201312	4,933	1.2531	603,958	\$ 122.43	\$ 94.92	\$ 85.61	-5.4%	-10.7%		608,172	\$ 123.29	\$ 96.19	\$ 87.32	-5.6%	-10.7%	44	107	86	79	0.4%	-6.2%	159	387	327	284	-14.1%	-29.0%	\$ 13,822.10	\$ 13,459.83	\$ 13,197.47	-6.0%	-4.8%	
201401	4,538	1.2421	235,903	\$ 51.98	\$ 77.45	\$ 86.73	-18.3%	-7.0%		244,147	\$ 53.80	\$ 78.83	\$ 88.46	-18.2%	-6.9%	31	82	89	82	6.6%	-2.4%	85	225	272	288	-28.2%	-26.4%	\$ 7,875.75	\$ 10,613.42	\$ 13,017.49	-23.3%	-4.6%	
201402	4,472	1.2422	331,407	\$ 74.11	\$ 84.00	\$ 86.63	11.8%	-5.8%		335,718	\$ 75.07	\$ 85.21	\$ 88.34	11.2%	-5.7%	28	75	89	82	14.9%	-1.8%	114	306	308	297	25.3%	-20.4%	\$ 11,989.96	\$ 11,534.37	\$ 12,945.73	-3.2%	-4.0%	
201403	4,374	1.2489	442,886	\$ 101.25	\$ 75.48	\$ 87.08	6.6%	-8.9%		454,538	\$ 103.92	\$ 77.29	\$ 88.88	6.9%	-8.6%	47	129	95	85	31.6%	0.9%	207	568	364	306	33.9%	-18.0%	\$ 9,671.03	\$ 9,758.54	\$ 12,547.46	-18.8%	-9.4%	
201404	4,071	1.2582	243,731	\$ 59.87	\$ 78.81	\$ 85.30	-7.4%	-11.9%		255,236	\$ 62.70	\$ 80.94	\$ 87.04	-7.2%	-11.7%	26	77	94	83	8.7%	-1.6%	78	230	371	302	20.2%	-17.4%	\$ 9,816.78	\$ 10,351.42	\$ 12,562.12	-14.6%	-10.3%	
201405	3,958	1.2632	294,418	\$ 74.39	\$ 79.10	\$ 83.42	-14.2%	-16.1%		301,471	\$ 76.17	\$ 81.53	\$ 85.19	-13.6%	-15.8%	22	67	92	81	-0.1%	-4.8%	74	224	347	293	-1.5%	-20.6%	\$ 13,703.23	\$ 10,644.69	\$ 12,551.72	-13.5%	-11.5%	
201406	3,632	1.2615	355,961	\$ 98.01	\$ 76.68	\$ 85.46	-9.5%	-15.8%		361,380	\$ 99.50	\$ 78.73	\$ 87.15	-9.6%	-15.7%	23	76	73	83	-11.5%	-2.3%	63	208	221	290	-25.4%	-21.6%	\$ 15,712.20	\$ 12,930.81	\$ 12,589.65	2.1%	-13.7%	
201407	3,296	1.2529	214,364	\$ 65.04	\$ 79.44	\$ 84.96	-3.2%	-15.4%		223,614	\$ 67.84	\$ 81.43	\$ 86.73	-3.0%	-15.1%	21	76	73	85	4.7%	1.9%	46	167	202	288	-27.4%	-19.1%	\$ 10,648.28	\$ 13,431.30	\$ 12,282.01	-7.3%	-16.7%	
201408	3,079	1.2640	495,664	\$ 160.98	\$ 106.52	\$ 85.70	16.2%	-5.0%		502,889	\$ 163.33	\$ 108.71	\$ 87.43	15.8%	-5.0%	25	97	83	86	24.0%	6.6%	137	534	295	310	26.8%	0.8%	\$ 20,115.59	\$ 15,766.44	\$ 12,229.51	-6.7%	-10.9%	
201409	2,873	1.2738	263,187	\$ 91.61	\$ 105.24	\$ 87.19	13.8%	-0.7%		265,616	\$ 92.45	\$ 107.28	\$ 88.94	13.9%	-0.7%	20	84	86	85	11.0%	7.0%	63	263	319	311	33.4%	2.6%	\$ 13,280.76	\$ 15,032.10	\$ 12,519.98	2.6%	-7.2%	
201410	2,573	1.2615	200,421	\$ 77.89	\$ 112.52	\$ 84.71	9.7%	-7.1%		203,026	\$ 78.91	\$ 113.96	\$ 86.45	9.4%	-7.0%	16	75	86	86	5.7%	7.1%	91	424	410	308	38.9%	-3.1%	\$ 12,689.14	\$ 15,926.74	\$ 12,061.41	3.4%	-13.2%	
201411	2,558	1.2672	161,332	\$ 63.07	\$ 78.08	\$ 86.64	-0.5%	3.0%		168,085	\$ 65.71	\$ 79.55	\$ 88.46	-0.3%	3.0%	11	52	70	85	-11.7%	7.5%	21	99	262	308	-10.0%	9.8%	\$ 15,280.38	\$ 13,547.35	\$ 12,496.48	12.9%	-4.2%	
201412	2,130	1.2285	114,340	\$ 53.68	\$ 65.57	\$ 80.70	-30.9%	-5.7%		117,137	\$ 54.99	\$ 67.24	\$ 82.61	-30.1%	-5.4%	10	56	61	81	-28.7%	1.8%	18	101	215	288	-34.4%	1.3%	\$ 11,713.78	\$ 13,195.90	\$ 12,260.22	-2.0%	-7.1%	
201501	2,117	1.2147	272,214	\$ 128.58	\$ 80.51	\$ 86.63	4.0%	-0.1%		274,114	\$ 129.48	\$ 82.19	\$ 88.49	4.3%	0.0%	17	96	67	82	-24.8%	0.0%	38	215	136	291	-50.0%	1.1%	\$ 16,124.34	\$ 14,719.36	\$ 13,018.14	38.7%	0.0%	
201502	2,098	1.2200	178,841	\$ 85.24	\$ 89.11	\$ 88.07	6.1%	1.7%		180,427	\$ 86.00	\$ 90.10	\$ 89.98	5.7%	1.9%	9	51	68	81	-23.2%	-1.5%	29	166	161	282	-47.8%	-4.8%	\$ 20,047.37	\$ 15,879.94	\$ 13,390.82	37.7%	3.4%	
201503	2,081	1.2241	239,271	\$ 114.98	\$ 109.65	\$ 88.02	45.3%	1.1%		240,122	\$ 115.39	\$ 110.33	\$ 89.74	42.8%	1.0%	19	110	86	76	-9.8%	-10.3%	42	242	208	244	-42.9%	-20.4%	\$ 12,638.01	\$ 15,436.94	\$ 14,123.82	58.2%	12.6%	
201504	2,086	1.2216	232,916	\$ 111.66	\$ 103.92	\$ 93.07	31.9%	9.1%		236,276	\$ 113.27	\$ 104.84	\$ 94.64	29.5%	8.7%	15	86	82	77	-12.2%	-7.6%	67	385	264	255	-28.7%	-15.8%	\$ 15,751.76	\$ 15,275.00	\$ 14,779.60	47.6%	17.7%	
201505	2,036	1.2212	98,311	\$ 48.29	\$ 91.97	\$ 92.50	16.3%	10.9%		99,600	\$ 48.92	\$ 92.86	\$ 93.99	13.9%	10.3%	9	53	83	77	-9.5%	-6.0%	22	130	253	250	-27.0%	-14.7%	\$ 11,066.65	\$ 13,395.31	\$ 14,729.67	25.8%	17.4%	
201506	2,017	1.2199	310,003	\$ 153.70	\$ 104.45	\$ 96.08	36.2%	12.4%		316,135	\$ 156.74	\$ 106.21	\$ 97.67	34.9%	12.1%	16	95	78	78	7.0%	-6.2%	43	256	258	256	16.6%	-11.9%	\$ 19,758.45	\$ 16,300.28	\$ 15,037.45	26.1%	19.4%	
201507	1,966	1.2171	211,442	\$ 107.55	\$ 102.97	\$ 100.60	29.6%	18.4%		215,126	\$ 109.42	\$ 104.81	\$ 102.07	28.7%	17.7%	14	85	78	79	6.9%	-7.2%	68	415	265	278	31.4%	-3.5%	\$ 15,366.14	\$ 16,175.92	\$ 15,572.11	20.4%	26.8%	
201508	1,942	1.2203	158,898	\$ 81.82	\$ 114.83	\$ 92.20	7.8%	7.6%		160,046	\$ 82.41	\$ 116.68	\$ 93.50	7.3%	7.0%	12	74	85	76	2.8%	-11.2%	55	340	336	252	14.0%	-18.7%	\$ 13,337.21	\$ 16,459.70	\$ 14,736.36	4.4%	20.5%	
201509	1,849	1.2092	593,312	\$ 320.88	\$ 167.39	\$ 108.88	59.1%	24.9%		595,629	\$ 322.14	\$ 168.63	\$ 110.23	57.2%	23.9%	11	71	77	75	-9.9%	-12.1%	82	532	427	272	33.9%	-12.5%	\$ 54,148.12	\$ 26,237.88	\$ 17,646.06	74.5%	40.9%	
201510	1,657	1.1925	231,101	\$ 139.47	\$ 180.49	\$ 114.19	60.4%	34.8%		232,805	\$ 140.50	\$ 181.44	\$ 115.56	59.2%	33.7%	21	152	97	80	12.9%	-6.7%	83	601	485	278	18.3%	-9.8%	\$ 11,085.95	\$ 22,465.48	\$ 17,289.65	41.1%	43.3%	
201511	1,667	1.1829	444,608	\$ 266.71	\$ 245.32	\$ 130.48	214.2%	50.6%		448,963	\$ 269.32	\$ 246.94	\$ 131.79	210.4%	49.0%	16	115	111	86	58.0%	1.0%	173	1,245	784	365	198.8%	18.7%	\$ 28,060.17	\$ 26,612.44	\$ 18,440.12	96.4%	47.6%	
201512	1,450	1.1515	384,020	\$ 264.84	\$ 221.98	\$ 146.08	238.5%	81.0%		389,939																							

Outpatient																														
Incurred Claims										Allowed Amount						Utilization						Allowed Cost/Service								
Date	Members	DemoFactor	Incurred Claims	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend		Allowed Amount	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Stays	Stays/1,000	3-Month Avg Stays/1,000	12-Month Avg Stays/1,000	3 Month Trend	12 Month Trend	Monthly Allowed Cost/Svc	3-Month Avg Allowed Cost/Svc	12-Month Avg Allowed Cost/Svc	3 Month Trend	12 Month Trend				
201306	4,701	1.2281	543,079	\$ 115.52	\$ 113.25	\$ 127.99	-9.6%	9.0%		600,638	\$ 127.77	\$ 127.40	\$ 140.91	-6.7%	8.9%	900	2,297	2,520	2,581	-0.9%	5.9%	\$ 667.38	\$ 606.73	\$ 655.04	-5.9%	2.8%				
201307	4,777	1.2236	536,795	\$ 112.37	\$ 106.67	\$ 127.77	-10.2%	7.1%		600,272	\$ 125.66	\$ 119.61	\$ 140.94	-7.9%	7.5%	977	2,454	2,429	2,566	-6.5%	3.7%	\$ 614.40	\$ 590.95	\$ 659.02	-1.5%	3.7%				
201308	4,553	1.2359	525,600	\$ 115.44	\$ 114.42	\$ 126.01	-8.6%	4.2%		587,696	\$ 129.08	\$ 127.48	\$ 139.44	-6.2%	5.2%	865	2,280	2,345	2,541	-9.5%	2.4%	\$ 679.42	\$ 652.30	\$ 658.57	3.7%	2.8%				
201309	4,664	1.2365	542,662	\$ 116.35	\$ 114.70	\$ 125.39	-9.4%	2.8%		617,663	\$ 132.43	\$ 129.03	\$ 139.14	-6.4%	4.1%	989	2,545	2,428	2,539	-6.8%	1.7%	\$ 624.53	\$ 637.81	\$ 657.54	0.4%	2.4%				
201310	4,819	1.2445	660,644	\$ 137.09	\$ 123.18	\$ 124.73	-8.1%	0.5%		741,829	\$ 153.94	\$ 138.73	\$ 138.89	-4.9%	2.3%	1,079	2,687	2,508	2,544	-3.3%	1.3%	\$ 687.51	\$ 663.89	\$ 655.19	-1.6%	1.0%				
201311	4,801	1.2442	805,565	\$ 167.79	\$ 140.64	\$ 123.79	-2.5%	-3.1%		878,204	\$ 182.92	\$ 156.66	\$ 138.34	0.3%	-0.7%	984	2,459	2,564	2,531	-1.0%	-0.2%	\$ 892.48	\$ 733.19	\$ 655.85	1.3%	-0.5%				
201312	4,933	1.2531	644,408	\$ 130.63	\$ 145.03	\$ 121.68	-5.1%	-6.5%		712,120	\$ 144.36	\$ 160.25	\$ 136.55	-2.4%	-3.6%	960	2,335	2,493	2,516	-3.3%	-1.3%	\$ 741.79	\$ 771.47	\$ 651.33	0.9%	-2.3%				
201401	4,538	1.2421	590,319	\$ 130.08	\$ 142.96	\$ 122.08	-3.9%	-5.6%		672,610	\$ 148.22	\$ 158.56	\$ 136.90	-2.1%	-3.0%	913	2,414	2,402	2,474	-9.7%	-4.2%	\$ 736.70	\$ 792.07	\$ 664.11	8.4%	1.2%				
201402	4,472	1.2422	579,062	\$ 129.49	\$ 130.09	\$ 123.94	1.0%	-5.4%		639,308	\$ 142.96	\$ 145.17	\$ 138.75	1.6%	-2.8%	789	2,117	2,291	2,450	-12.3%	-5.3%	\$ 810.28	\$ 760.34	\$ 679.60	15.8%	2.6%				
201403	4,374	1.2489	677,860	\$ 154.97	\$ 138.02	\$ 127.70	21.6%	-1.9%		757,704	\$ 173.23	\$ 154.63	\$ 142.76	19.7%	0.3%	965	2,647	2,391	2,459	-8.7%	-4.8%	\$ 785.19	\$ 776.01	\$ 696.60	31.0%	5.3%				
201404	4,071	1.2582	483,194	\$ 118.69	\$ 134.72	\$ 126.68	16.4%	-2.2%		534,940	\$ 131.40	\$ 149.57	\$ 141.41	14.2%	-0.5%	821	2,420	2,392	2,433	-6.4%	-6.5%	\$ 651.57	\$ 750.27	\$ 697.35	22.0%	6.5%				
201405	3,958	1.2632	570,175	\$ 144.06	\$ 139.58	\$ 130.98	25.9%	2.2%		638,161	\$ 161.23	\$ 155.67	\$ 146.01	23.6%	3.7%	836	2,535	2,537	2,432	-2.1%	-6.3%	\$ 763.35	\$ 736.39	\$ 720.45	26.2%	10.6%				
201406	3,632	1.2615	413,380	\$ 113.82	\$ 125.78	\$ 131.17	11.1%	2.5%		468,034	\$ 128.86	\$ 140.74	\$ 146.45	10.5%	3.9%	682	2,253	2,407	2,432	-4.5%	-5.8%	\$ 686.27	\$ 701.64	\$ 722.70	15.6%	10.3%				
201407	3,296	1.2529	375,555	\$ 113.94	\$ 124.85	\$ 131.80	17.0%	3.2%		425,104	\$ 128.98	\$ 140.67	\$ 147.25	17.6%	4.5%	612	2,228	2,348	2,417	-3.3%	-5.8%	\$ 694.62	\$ 718.92	\$ 731.15	21.7%	10.9%				
201408	3,079	1.2640	342,494	\$ 111.24	\$ 113.06	\$ 132.02	-1.2%	4.8%		392,323	\$ 127.42	\$ 128.46	\$ 147.68	0.8%	5.9%	556	2,169	2,219	2,414	-5.4%	-5.0%	\$ 705.01	\$ 694.66	\$ 734.11	6.5%	11.5%				
201409	2,873	1.2738	376,447	\$ 131.03	\$ 118.35	\$ 133.46	3.2%	6.4%		416,544	\$ 144.99	\$ 133.43	\$ 148.98	3.4%	7.1%	552	2,307	2,233	2,395	-8.0%	-5.7%	\$ 754.00	\$ 717.04	\$ 746.35	12.4%	13.5%				
201410	2,573	1.2615	367,908	\$ 142.99	\$ 127.49	\$ 133.61	3.5%	7.1%		396,995	\$ 154.29	\$ 141.45	\$ 148.76	2.0%	7.1%	568	2,651	2,361	2,379	-5.8%	-6.5%	\$ 698.38	\$ 718.90	\$ 750.27	8.3%	14.5%				
201411	2,558	1.2672	378,428	\$ 147.94	\$ 140.28	\$ 130.74	-0.3%	5.6%		413,494	\$ 161.65	\$ 153.30	\$ 145.80	-2.1%	5.4%	471	2,211	2,387	2,361	-6.9%	-6.7%	\$ 877.27	\$ 770.64	\$ 741.10	5.1%	13.0%				
201412	2,130	1.2285	331,296	\$ 155.54	\$ 148.41	\$ 132.02	2.3%	8.5%		366,149	\$ 171.90	\$ 162.05	\$ 147.31	1.1%	7.9%	507	2,858	2,557	2,389	2.6%	-5.0%	\$ 721.70	\$ 760.53	\$ 739.83	-1.4%	13.6%				
201501	2,117	1.2147	255,352	\$ 120.62	\$ 141.82	\$ 131.63	-0.8%	7.8%		294,975	\$ 139.34	\$ 157.92	\$ 146.77	-0.4%	7.2%	438	2,480	2,497	2,391	4.0%	-3.3%	\$ 674.20	\$ 758.80	\$ 736.51	-4.2%	10.9%				
201502	2,098	1.2200	214,074	\$ 102.04	\$ 126.20	\$ 130.20	-3.0%	5.1%		245,065	\$ 116.81	\$ 142.82	\$ 145.53	-1.6%	4.9%	438	2,504	2,615	2,431	14.1%	-0.8%	\$ 559.83	\$ 655.42	\$ 718.31	-13.8%	5.7%				
201503	2,081	1.2241	393,353	\$ 189.02	\$ 137.04	\$ 130.61	-0.7%	2.3%		428,620	\$ 205.97	\$ 153.85	\$ 145.66	-0.5%	2.0%	494	2,846	2,609	2,429	9.1%	-1.2%	\$ 868.41	\$ 707.65	\$ 719.68	-8.8%	3.3%				
201504	2,086	1.2216	283,150	\$ 135.74	\$ 142.15	\$ 132.43	5.5%	4.5%		323,134	\$ 154.91	\$ 159.11	\$ 148.04	6.4%	4.7%	456	2,621	2,657	2,442	11.1%	0.4%	\$ 709.13	\$ 718.69	\$ 727.41	-4.2%	4.3%				
201505	2,036	1.2212	237,138	\$ 116.47	\$ 147.29	\$ 129.87	5.5%	-0.8%		266,211	\$ 130.75	\$ 164.11	\$ 145.18	5.4%	-0.6%	431	2,541	2,670	2,437	5.3%	0.2%	\$ 617.41	\$ 737.43	\$ 714.93	0.1%	-0.8%				
201506	2,017	1.2199	427,807	\$ 212.10	\$ 154.44	\$ 137.61	22.8%	4.9%		458,435	\$ 227.29	\$ 170.68	\$ 152.95	21.3%	4.4%	470	2,798	2,653	2,485	10.2%	2.2%	\$ 974.93	\$ 772.09	\$ 738.58	10.0%	2.2%				
201507	1,966	1.2171	282,951	\$ 143.92	\$ 157.48	\$ 140.88	26.1%	6.9%		319,919	\$ 162.73	\$ 173.54	\$ 156.51	23.4%	6.3%	441	2,691	2,676	2,530	14.0%	4.7%	\$ 725.61	\$ 778.19	\$ 742.22	8.2%	1.5%				
201508	1,942	1.2203	230,683	\$ 118.79	\$ 158.89	\$ 142.71	40.5%	8.1%		253,085	\$ 130.32	\$ 174.08	\$ 157.97	35.5%	7.0%	400	2,474	2,656	2,568	19.7%	6.4%	\$ 632.01	\$ 786.42	\$ 738.09	13.2%	0.5%				
201509	1,849	1.2092	233,247	\$ 126.15	\$ 129.73	\$ 142.83	9.6%	7.0%		256,315	\$ 138.62	\$ 144.05	\$ 158.03	8.0%	6.1%	343	2,228	2,469	2,573	10.6%	7.4%	\$ 746.49	\$ 700.02	\$ 737.01	-2.4%	-1.3%				
201510	1,657	1.1925	244,493	\$ 147.55	\$ 130.03	\$ 143.13	2.0%	7.1%		261,445	\$ 157.78	\$ 141.49	\$ 158.41	0.0%	6.5%	310	2,243	2,321	2,543	-1.7%	6.9%	\$ 844.17	\$ 731.69	\$ 747.61	1.8%	-0.4%				
201511	1,667	1.1829	308,249	\$ 184.91	\$ 151.94	\$ 145.55	8.3%	11.3%		338,410	\$ 203.01	\$ 165.51	\$ 161.20	8.0%	10.6%	331	2,385	2,284	2,567	-4.3%	8.7%	\$ 1,021.42	\$ 869.76	\$ 753.47	12.9%	1.7%				
201512	1,450	1.1515	233,089	\$ 160.75	\$ 164.61	\$ 145.59	10.9%	10.3%		249,482	\$ 172.06	\$ 177.91	\$ 160.89	9.8%	9.2%	288	2,387	2,336	2,529	-8.6%	5.8%	\$ 864.81	\$ 913.76	\$ 763.43	20.1%	3.2%				
201601	1,541	1.1296	108,890	\$ 70.66	\$ 139.59	\$ 142.79	-1.6%	8.5%		131,858	\$ 85.57	\$ 154.52	\$ 157.75	-2.2%	7.5%	235	1,829	2,202	2,485	-11.8%	3.9%	\$ 561.54	\$ 842.20	\$ 761.63	11.0%	3.4%				
201602	1,453	1.1382	159,013	\$ 109.44	\$ 112.73	\$ 144.50	-10.7%	11.0%		181,741	\$ 125.08	\$ 126.71	\$ 159.52	-11.3%	9.6%	228	1,883	2,029	2,443	-22.4%	0.5%	\$ 797.19	\$ 749.50	\$ 783.41	14.4%	9.1%				
201603	1,480	1.1350	252,446	\$ 170.57	\$ 116.31	\$ 141.94	-15.1%	8.7%		304,373	\$ 205.66	\$ 138.13	\$ 158.17	-10.2%	8.6%	315	2,557	2,087	2,412	-20.0%	-0.7%	\$ 965.01	\$ 794.10	\$ 787.02	12.2%	9.4%				
201604	1,511	1.1386	299,722	\$ 198.36	\$ 160.03	\$ 146.71	12.6%	10.8%		332,797	\$ 220.25	\$ 184.27	\$ 163.06	15.8%	10.1%	292	2,319	2,256	2,384	-15.1%	-2.4%	\$ 1,139.88	\$ 980.33	\$ 820.92	36.4%	12.9%				
201605	1,546	1.1390	221,773	\$ 143.45	\$ 170.58	\$ 149.53	15.8%	15.1%		263,253	\$ 170.28	\$ 198.46	\$ 166.90	20.9%	15.0%	378	2,937	2,607	2,410	-2.4%	-1.1%	\$ 695.70	\$ 913.43	\$ 830.93	23.9%	16.2%				
6-month average							2.0%	10.7%							3.8%	10.0%						-13.4%	1.0%						19.7%	9.0%
12-month average							10.1%	9.1%							9.9%	8.4%						-2.7%	3.5%						13.5%	4.9%
6-month average (excl last 3 months)							3.1%	9.2%							2.1%	8.2%						-6.4%	5.6%						9.6%	2.6%
12-month average (excl last 1 or 3 months)							9.9%	7.8%							8.6%	7.1%						2.6%	3.6%						6.4%	3.5%
6-month average (excl last 3 months, drop high and low)							4.6%	9.2%							3.5%	8.2%						-6.6%	6.0%						10.0%	2.0%
12-month average (excl last 1 or 3 months, drop high and low)							8.9%	8.3%							8.0%	7.5%						3.4%	3.7%						6.5%	3.0%

Professional																												
Incurred Claims										Allowed Amount						Utilization						Allowed Cost/Service						
Date	Members	DemoFactor	Incurred Claims	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Allowed Amount	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Stays	Stays/1,000	3-Month Avg Stays/1,000	12-Month Avg Stays/1,000	3 Month Trend	12 Month Trend	Monthly Allowed Cost/Svc	3-Month Avg Allowed Cost/Svc	12-Month Avg Allowed Cost/Svc	3 Month Trend	12 Month Trend			
201306	4,701	1.2281	385,847	\$ 82.08	\$ 88.49	\$ 97.26	-5.0%	2.7%	465,424	\$ 99.01	\$ 106.69	\$ 113.59	-2.6%	1.1%	3,436	8,771	9,401	9,554	3.8%	1.6%	\$ 135.46	\$ 136.18	\$ 142.67	-6.2%	-0.5%			
201307	4,777	1.2236	385,474	\$ 80.69	\$ 81.86	\$ 96.33	-13.0%	0.9%	471,313	\$ 98.66	\$ 99.61	\$ 112.85	-9.3%	-0.4%	3,652	9,174	9,083	9,576	0.9%	1.1%	\$ 129.06	\$ 131.60	\$ 141.41	-10.2%	-1.4%			
201308	4,553	1.2359	415,142	\$ 91.18	\$ 84.56	\$ 94.50	-13.7%	-1.7%	505,852	\$ 111.10	\$ 102.81	\$ 111.28	-9.3%	-2.0%	3,550	9,356	9,098	9,499	-1.3%	0.0%	\$ 142.49	\$ 135.61	\$ 140.59	-8.1%	-2.0%			
201309	4,664	1.2365	365,141	\$ 78.29	\$ 83.30	\$ 91.43	-21.3%	-5.4%	453,421	\$ 97.22	\$ 102.23	\$ 108.55	-15.9%	-4.8%	3,561	9,162	9,229	9,447	-4.5%	-0.7%	\$ 127.33	\$ 132.92	\$ 137.88	-11.9%	-4.1%			
201310	4,819	1.2445	478,987	\$ 99.40	\$ 89.72	\$ 91.19	-16.7%	-5.9%	569,945	\$ 118.27	\$ 108.95	\$ 108.50	-12.0%	-5.0%	4,202	10,464	9,672	9,433	-4.3%	-0.9%	\$ 135.64	\$ 135.17	\$ 138.02	-8.1%	-4.1%			
201311	4,801	1.2442	393,449	\$ 81.95	\$ 86.64	\$ 89.07	-18.0%	-8.8%	479,111	\$ 99.79	\$ 105.19	\$ 106.68	-13.2%	-7.0%	3,596	8,988	9,543	9,373	-3.9%	-1.6%	\$ 133.23	\$ 132.27	\$ 136.57	-9.7%	-5.5%			
201312	4,933	1.2531	432,825	\$ 87.74	\$ 89.69	\$ 87.58	-12.2%	-11.1%	507,957	\$ 102.97	\$ 106.99	\$ 105.39	-8.8%	-8.7%	3,555	8,648	9,361	9,327	-4.1%	-2.6%	\$ 142.89	\$ 137.15	\$ 135.59	-4.9%	-6.3%			
201401	4,538	1.2421	400,351	\$ 88.22	\$ 85.95	\$ 87.59	-13.1%	-10.5%	500,791	\$ 110.35	\$ 104.25	\$ 105.65	-8.9%	-7.7%	3,705	9,796	9,127	9,298	-5.2%	-2.5%	\$ 135.18	\$ 137.06	\$ 136.36	-3.9%	-5.3%			
201402	4,472	1.2422	335,895	\$ 75.11	\$ 83.85	\$ 86.65	-10.0%	-11.3%	427,700	\$ 95.64	\$ 103.02	\$ 105.11	-5.6%	-7.7%	2,997	8,041	8,827	9,255	-5.3%	-2.5%	\$ 142.73	\$ 140.06	\$ 136.28	-0.3%	-5.3%			
201403	4,374	1.2489	364,987	\$ 83.44	\$ 82.28	\$ 86.04	-7.2%	-12.0%	463,469	\$ 105.96	\$ 104.00	\$ 105.02	-1.5%	-7.7%	3,595	9,861	9,231	9,308	-0.9%	-1.4%	\$ 128.94	\$ 135.20	\$ 135.40	-0.6%	-6.4%			
201404	4,071	1.2582	344,576	\$ 84.64	\$ 80.94	\$ 84.68	-12.8%	-14.1%	419,058	\$ 102.94	\$ 101.43	\$ 103.59	-7.6%	-9.7%	3,092	9,115	8,996	9,223	-3.4%	-3.0%	\$ 135.52	\$ 135.31	\$ 134.78	-4.3%	-6.8%			
201405	3,958	1.2632	359,193	\$ 90.75	\$ 86.17	\$ 85.29	-5.7%	-12.5%	426,628	\$ 107.79	\$ 105.55	\$ 104.11	-3.4%	-8.4%	3,181	9,645	9,547	9,247	0.1%	-2.7%	\$ 134.11	\$ 132.67	\$ 135.10	-3.5%	-5.9%			
201406	3,632	1.2615	307,948	\$ 84.79	\$ 86.76	\$ 85.53	-2.0%	-12.1%	367,949	\$ 101.31	\$ 104.08	\$ 104.37	-2.4%	-8.1%	2,713	8,963	9,247	9,270	-1.6%	-3.0%	\$ 135.64	\$ 135.05	\$ 135.11	-0.8%	-5.3%			
201407	3,296	1.2529	281,564	\$ 85.43	\$ 87.15	\$ 85.97	6.5%	-10.7%	331,287	\$ 100.51	\$ 103.42	\$ 104.65	3.8%	-7.3%	2,392	8,710	9,134	9,243	0.6%	-3.5%	\$ 138.47	\$ 135.87	\$ 135.86	3.2%	-3.9%			
201408	3,079	1.2640	282,904	\$ 91.88	\$ 87.18	\$ 85.86	3.1%	-9.1%	332,592	\$ 108.02	\$ 103.11	\$ 104.27	0.3%	-6.3%	2,302	8,972	8,882	9,216	-2.4%	-3.0%	\$ 144.48	\$ 139.30	\$ 135.76	2.7%	-3.4%			
201409	2,873	1.2738	265,550	\$ 92.43	\$ 89.75	\$ 86.97	7.7%	-4.9%	313,821	\$ 109.23	\$ 105.72	\$ 105.23	3.4%	-3.1%	2,340	9,776	9,128	9,254	-1.1%	-2.0%	\$ 134.09	\$ 138.98	\$ 136.46	4.6%	-1.0%			
201410	2,573	1.2615	245,556	\$ 95.44	\$ 93.14	\$ 86.15	3.8%	-5.5%	299,128	\$ 116.26	\$ 110.91	\$ 104.50	1.8%	-3.7%	2,410	11,238	9,927	9,239	2.6%	-2.1%	\$ 124.14	\$ 134.08	\$ 135.73	-0.8%	-1.7%			
201411	2,558	1.2672	188,841	\$ 73.82	\$ 87.45	\$ 85.90	0.9%	-3.6%	230,025	\$ 89.92	\$ 105.32	\$ 104.16	0.1%	-2.4%	2,058	9,656	10,208	9,290	7.0%	-0.9%	\$ 111.75	\$ 123.81	\$ 134.55	-6.4%	-1.5%			
201412	2,130	1.2285	178,351	\$ 83.73	\$ 84.39	\$ 85.57	-5.9%	-2.3%	210,898	\$ 99.01	\$ 101.92	\$ 104.04	-4.7%	-1.3%	1,717	9,674	10,222	9,386	9.2%	0.6%	\$ 122.82	\$ 119.65	\$ 133.02	-12.8%	-1.9%			
201501	2,117	1.2147	147,785	\$ 69.81	\$ 75.68	\$ 84.41	-11.9%	-3.6%	189,271	\$ 89.41	\$ 92.61	\$ 102.52	-11.2%	-3.0%	1,642	9,308	9,554	9,334	4.7%	0.4%	\$ 115.26	\$ 116.32	\$ 131.80	-15.1%	-3.3%			
201502	2,098	1.2200	139,500	\$ 66.49	\$ 73.39	\$ 84.52	-12.5%	-2.5%	172,644	\$ 82.29	\$ 90.28	\$ 102.20	-12.4%	-2.8%	1,486	8,502	9,164	9,444	3.8%	2.0%	\$ 116.15	\$ 118.21	\$ 129.86	-15.6%	-4.7%			
201503	2,081	1.2241	180,680	\$ 86.82	\$ 74.33	\$ 84.79	-9.7%	-1.4%	225,423	\$ 108.32	\$ 93.29	\$ 102.09	-10.3%	-2.8%	1,705	9,831	9,212	9,414	-0.2%	1.1%	\$ 132.22	\$ 121.52	\$ 130.13	-10.1%	-3.9%			
201504	2,086	1.2216	176,157	\$ 84.45	\$ 79.22	\$ 84.79	-2.1%	0.1%	216,384	\$ 103.73	\$ 98.08	\$ 102.09	-3.3%	-1.4%	1,625	9,348	9,225	9,448	2.5%	2.4%	\$ 133.16	\$ 127.58	\$ 129.67	-5.7%	-3.8%			
201505	2,036	1.2212	143,922	\$ 70.69	\$ 80.73	\$ 83.08	-6.3%	-2.6%	177,399	\$ 87.13	\$ 99.82	\$ 100.36	-5.4%	-3.6%	1,406	8,288	9,162	9,345	-4.0%	1.1%	\$ 126.16	\$ 130.74	\$ 128.87	-1.5%	-4.6%			
201506	2,017	1.2199	180,763	\$ 89.62	\$ 81.58	\$ 83.32	-6.0%	-2.6%	213,204	\$ 105.70	\$ 98.87	\$ 100.61	-5.0%	-3.6%	1,612	9,588	9,075	9,410	-1.9%	1.5%	\$ 132.30	\$ 130.74	\$ 128.31	-3.2%	-5.0%			
201507	1,966	1.2171	178,741	\$ 90.92	\$ 83.64	\$ 83.61	-4.0%	-2.7%	210,912	\$ 107.28	\$ 99.94	\$ 101.10	-3.4%	-3.4%	1,470	8,970	8,946	9,462	-2.1%	2.4%	\$ 143.52	\$ 134.05	\$ 128.22	-1.3%	-5.6%			
201508	1,942	1.2203	143,266	\$ 73.77	\$ 84.86	\$ 81.92	-2.7%	-4.6%	171,163	\$ 88.14	\$ 100.47	\$ 99.34	-2.6%	-4.7%	1,365	8,432	9,004	9,443	1.4%	2.5%	\$ 125.44	\$ 133.90	\$ 126.24	-3.9%	-7.0%			
201509	1,849	1.2092	166,239	\$ 89.91	\$ 84.81	\$ 81.32	-5.5%	-6.5%	189,474	\$ 102.47	\$ 99.28	\$ 98.45	-6.1%	-6.4%	1,324	8,593	8,667	9,344	-5.1%	1.0%	\$ 143.10	\$ 137.45	\$ 126.44	-1.1%	-7.3%			
201510	1,657	1.1925	162,926	\$ 98.33	\$ 86.72	\$ 80.99	-6.9%	-6.0%	187,335	\$ 113.06	\$ 100.58	\$ 97.57	-9.3%	-6.6%	1,423	10,307	9,057	9,210	-8.8%	-0.3%	\$ 131.63	\$ 133.27	\$ 127.12	-0.6%	-6.3%			
201511	1,667	1.1829	182,206	\$ 109.30	\$ 98.85	\$ 83.76	13.0%	-2.5%	207,884	\$ 124.71	\$ 113.03	\$ 100.31	7.3%	-3.7%	1,275	9,175	9,330	9,160	-8.6%	-1.4%	\$ 163.11	\$ 145.38	\$ 131.42	17.4%	-2.3%			
201512	1,450	1.1515	178,557	\$ 123.14	\$ 109.70	\$ 86.25	30.0%	0.8%	198,616	\$ 136.98	\$ 124.39	\$ 102.75	22.0%	-1.2%	1,131	9,361	9,624	9,125	-5.8%	-2.8%	\$ 175.59	\$ 155.09	\$ 135.13	29.6%	1.6%			
201601	1,541	1.1296	93,308	\$ 60.55	\$ 97.48	\$ 86.03	28.8%	1.9%	118,676	\$ 77.01	\$ 112.75	\$ 102.24	21.7%	-0.3%	916	7,136	8,558	8,970	-10.4%	-3.9%	\$ 129.50	\$ 158.09	\$ 136.77	35.9%	3.8%			
201602	1,453	1.1382	105,646	\$ 72.71	\$ 84.95	\$ 87.03	15.8%	3.0%	130,670	\$ 89.93	\$ 100.80	\$ 103.34	11.7%	1.1%	953	7,869	8,102	8,942	-11.6%	-5.3%	\$ 137.15	\$ 149.30	\$ 138.68	26.3%	6.8%			
201603	1,480	1.1350	129,639	\$ 87.59	\$ 73.45	\$ 87.09	-1.2%	2.7%	163,974	\$ 110.79	\$ 92.38	\$ 103.37	-1.0%	1.3%	1,359	11,021	8,659	9,000	-6.0%	-4.4%	\$ 120.64	\$ 128.03	\$ 137.83	5.4%	5.9%			
201604	1,511	1.1386	118,312	\$ 78.30	\$ 79.57	\$ 86.71	0.4%	2.3%	145,596	\$ 96.36	\$ 99.06	\$ 102.82	1.0%	0.7%	1,171	9,296	9,404	8,987	1.9%	-4.9%	\$ 124.38	\$ 126.41	\$ 137.30	-0.9%	5.9%			
201605	1,546	1.1390	142,864	\$ 92.41	\$ 86.14	\$ 88.77	6.7%	6.9%	166,301	\$ 107.57	\$ 104.89	\$ 104.78	5.1%	4.4%	1,036	8,038	9,430	8,984	2.9%	-3.9%	\$ 160.60	\$ 133.47	\$ 139.95	2.1%	8.6%			
6-month average							13.4%	2.9%							10.1%	1.0%							-4.8%	-4.2%				
12-month average							5.7%	-0.6%							3.5%	-1.9%							-4.5%	-1.6%				
6-month average (excl last 3 months)							12.5%	-1.6%							7.9%	-2.9%							-8.4%	-2.1%				
12-month average (excl last 1 or 3 months)							3.7%	-1.4%							1.4%	-2.5%							-4.5%	-1.2%				
6-month average (excl last 3 months, drop high and low)							13.0%	-1.4%							8.7%	-2.9%							-8.4%	-2.1%				
12-month average (excl last 1 or 3 months, drop high and low)							2.4%	-1.3%							0.6%	-2.5%							-4.5%	-1.2%				

Keystone Health Plan Central
Small Group Rates
Effective 1/1/2017
Q&A Exhibit 2b

Product
Market Segment

DRUG
COMM

Total

Incurred Claims										Allowed Amount						Utilization						Allowed Cost/Rx (Excl. Disp. Fee)						Avg Dispensing Fee						Avg Copay						Avg Discount					
Date	Members	DemoFactor	Incurred Claims	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend		Allowed Amount	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Rx Count	Util/1,000	3-Month Avg Util/1,000	12-Month Avg Util/1,000	3 Month Trend	12 Month Trend	Monthly Allowed Cost/Rx	3-Month Avg Cost/Svc	12-Month Avg Cost/Svc	3 Month Trend	12 Month Trend	Monthly Fee/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend	Monthly Copay/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend	Monthly Discount/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend				
201306	96,418	1.2497	5,491,388	\$ 56.95	\$ 60.37	\$ 58.48	4.9%	2.7%		6,925,895	\$ 71.83	\$ 75.70	\$ 73.19	5.0%	1.4%	87,061	10,835	11,359	11,270	2.3%	-29.0%	\$ 78.63	\$ 79.05	\$ 77.55	1.4%	43.9%	\$ 0.92	\$ 0.93	\$ 0.37	0.0%	-49.0%	\$ 15.38	\$ 14.98	\$ 14.31	2.9%	37.0%	\$ 78.48	\$ 77.55	\$ 71.87	72.1%	-39.2%				
201307	94,640	1.2524	5,630,292	\$ 59.49	\$ 59.56	\$ 58.80	4.5%	2.9%		7,142,773	\$ 75.47	\$ 75.09	\$ 73.64	5.0%	1.8%	90,132	11,428	11,306	11,309	2.2%	-24.5%	\$ 78.55	\$ 78.85	\$ 77.71	1.7%	35.7%	\$ 0.69	\$ 0.85	\$ 0.43	0.0%	-37.5%	\$ 15.55	\$ 15.28	\$ 14.40	5.5%	30.3%	\$ 79.58	\$ 78.05	\$ 72.72	15.6%	-37.5%				
201308	93,781	1.2514	5,446,284	\$ 58.07	\$ 58.17	\$ 58.75	2.4%	2.6%		6,928,493	\$ 73.88	\$ 73.72	\$ 73.69	3.7%	1.9%	87,864	11,243	11,167	11,305	1.3%	-19.7%	\$ 78.15	\$ 78.45	\$ 77.74	1.4%	27.3%	\$ 0.70	\$ 0.77	\$ 0.49	0.0%	-23.2%	\$ 15.75	\$ 15.56	\$ 14.51	8.3%	24.2%	\$ 80.06	\$ 79.38	\$ 73.61	16.2%	-35.5%				
201309	93,020	1.2510	5,170,917	\$ 55.59	\$ 57.73	\$ 59.00	3.4%	3.3%		6,623,524	\$ 71.21	\$ 73.53	\$ 74.13	5.2%	2.9%	84,141	10,855	11,177	11,340	2.4%	-14.0%	\$ 78.02	\$ 78.25	\$ 77.91	1.9%	19.9%	\$ 0.70	\$ 0.70	\$ 0.54	0.0%	-6.9%	\$ 16.12	\$ 15.80	\$ 14.66	10.9%	18.6%	\$ 79.72	\$ 79.79	\$ 74.47	16.0%	-33.5%				
201310	92,418	1.2543	5,384,117	\$ 58.26	\$ 57.31	\$ 59.09	1.6%	3.2%		6,972,027	\$ 75.44	\$ 73.51	\$ 74.46	4.3%	3.3%	88,868	11,539	11,212	11,352	1.4%	-7.2%	\$ 77.75	\$ 77.97	\$ 78.10	2.0%	11.3%	\$ 0.70	\$ 0.70	\$ 0.60	0.0%	16.3%	\$ 16.65	\$ 16.18	\$ 14.88	14.6%	12.2%	\$ 79.90	\$ 79.90	\$ 75.26	15.2%	-31.1%				
201311	92,764	1.2544	4,981,469	\$ 53.70	\$ 55.85	\$ 58.71	-0.9%	2.2%		6,464,239	\$ 69.68	\$ 72.11	\$ 74.25	2.7%	2.9%	84,133	10,883	11,092	11,334	0.7%	0.9%	\$ 76.13	\$ 77.31	\$ 77.95	1.0%	1.8%	\$ 0.70	\$ 0.70	\$ 0.66	0.0%	48.4%	\$ 16.55	\$ 16.44	\$ 15.10	17.6%	5.5%	\$ 81.26	\$ 80.29	\$ 76.22	15.4%	-28.3%				
201312	94,443	1.2549	5,524,918	\$ 58.50	\$ 56.83	\$ 58.70	-2.3%	2.0%		7,019,948	\$ 74.33	\$ 73.16	\$ 74.38	1.1%	3.1%	88,954	11,303	11,242	11,316	-0.9%	0.8%	\$ 78.20	\$ 77.38	\$ 78.15	1.1%	1.7%	\$ 0.71	\$ 0.71	\$ 0.73	0.0%	118.5%	\$ 15.81	\$ 16.33	\$ 15.27	17.6%	7.3%	\$ 84.41	\$ 81.87	\$ 77.52	17.3%	-17.9%				
201401	96,337	1.2491	5,854,095	\$ 60.77	\$ 57.70	\$ 58.52	-3.7%	0.8%		7,411,967	\$ 76.94	\$ 73.70	\$ 74.17	-1.5%	2.0%	94,282	11,744	11,315	11,280	-2.3%	0.1%	\$ 77.90	\$ 77.44	\$ 78.10	-0.1%	1.2%	\$ 0.71	\$ 0.71	\$ 0.80	0.0%	269.0%	\$ 15.15	\$ 15.81	\$ 15.39	13.9%	8.0%	\$ 84.68	\$ 83.52	\$ 78.90	20.1%	-3.7%				
201402	97,384	1.2505	5,513,540	\$ 56.62	\$ 58.62	\$ 59.49	-1.4%	0.8%		6,875,851	\$ 70.61	\$ 73.94	\$ 74.09	-0.8%	2.1%	85,129	10,490	11,176	11,257	-2.8%	0.3%	\$ 80.06	\$ 78.69	\$ 78.20	1.3%	1.0%	\$ 0.71	\$ 0.71	\$ 0.78	153.3%	329.2%	\$ 15.19	\$ 15.38	\$ 15.47	9.8%	8.6%	\$ 84.99	\$ 84.69	\$ 80.05	21.0%	13.9%				
201403	96,469	1.2536	6,322,213	\$ 65.54	\$ 60.96	\$ 59.01	2.1%	2.1%		7,813,436	\$ 80.99	\$ 76.16	\$ 74.66	1.6%	3.2%	93,711	11,657	11,294	11,269	-1.5%	0.5%	\$ 82.66	\$ 80.21	\$ 78.74	3.0%	1.9%	\$ 0.72	\$ 0.71	\$ 0.76	21.0%	411.2%	\$ 15.46	\$ 15.27	\$ 15.58	8.0%	9.7%	\$ 85.84	\$ 85.18	\$ 81.08	19.0%	26.5%				
201404	94,693	1.2578	6,112,863	\$ 64.55	\$ 62.20	\$ 59.22	4.7%	1.8%		7,561,787	\$ 79.86	\$ 77.11	\$ 74.87	3.7%	2.9%	89,540	11,347	11,161	11,249	-1.1%	0.0%	\$ 83.73	\$ 82.19	\$ 79.12	5.2%	2.2%	\$ 0.72	\$ 0.72	\$ 0.75	-22.2%	230.4%	\$ 15.81	\$ 15.49	\$ 15.68	7.7%	10.4%	\$ 87.06	\$ 85.98	\$ 81.86	15.4%	16.6%				
201405	92,502	1.2582	6,217,576	\$ 67.22	\$ 65.76	\$ 59.61	7.6%	2.1%		7,594,303	\$ 82.10	\$ 80.97	\$ 75.19	5.9%	2.9%	86,629	11,238	11,417	11,213	-1.4%	-0.5%	\$ 86.95	\$ 84.39	\$ 79.74	7.8%	2.9%	\$ 0.72	\$ 0.72	\$ 0.73	-22.5%	140.7%	\$ 15.82	\$ 15.69	\$ 15.76	7.5%	10.7%	\$ 89.69	\$ 87.48	\$ 83.01	14.9%	16.9%				
201406	90,873	1.2590	5,998,718	\$ 66.01	\$ 65.92	\$ 60.35	9.2%	3.2%		7,284,293	\$ 80.16	\$ 80.70	\$ 75.88	6.6%	3.7%	82,579	10,905	11,166	11,220	-1.7%	-0.4%	\$ 87.50	\$ 86.01	\$ 80.44	8.8%	3.7%	\$ 0.71	\$ 0.72	\$ 0.71	-22.6%	90.6%	\$ 15.79	\$ 15.81	\$ 15.80	5.6%	10.4%	\$ 90.86	\$ 89.15	\$ 83.99	15.0%	16.9%				
201407	88,771	1.2583	6,283,829	\$ 70.79	\$ 67.98	\$ 61.25	14.1%	4.2%		7,632,422	\$ 85.98	\$ 82.72	\$ 76.71	10.2%	4.2%	84,066	11,364	11,168	11,214	-1.2%	-0.8%	\$ 90.09	\$ 88.17	\$ 81.38	11.8%	4.7%	\$ 0.70	\$ 0.71	\$ 0.71	-16.2%	65.9%	\$ 15.48	\$ 15.70	\$ 15.79	2.7%	9.7%	\$ 92.71	\$ 91.07	\$ 85.07	16.7%	17.0%				
201408	88,820	1.2579	5,863,401	\$ 66.01	\$ 67.59	\$ 61.89	16.2%	5.4%		7,177,997	\$ 80.82	\$ 82.30	\$ 77.28	11.6%	4.9%	81,918	11,068	11,110	11,200	-0.5%	-0.9%	\$ 86.93	\$ 88.19	\$ 82.08	12.4%	5.6%	\$ 0.69	\$ 0.70	\$ 0.71	-9.0%	45.9%	\$ 15.59	\$ 15.62	\$ 15.78	0.4%	8.7%	\$ 93.30	\$ 92.29	\$ 86.14	16.3%	17.0%				
201409	87,063	1.2602	6,007,056	\$ 69.00	\$ 68.60	\$ 62.98	18.8%	6.7%		7,306,943	\$ 83.93	\$ 83.57	\$ 78.30	13.7%	5.6%	81,353	11,213	11,215	11,230	0.3%	-1.0%	\$ 89.12	\$ 88.73	\$ 82.96	13.4%	6.5%	\$ 0.70	\$ 0.70	\$ 0.71	-0.4%	30.9%	\$ 15.50	\$ 15.53	\$ 15.73	-1.8%	7.3%	\$ 93.90	\$ 93.30	\$ 87.26	16.9%	17.2%				
201410	84,393	1.2561	6,111,122	\$ 72.41	\$ 69.09	\$ 64.09	20.8%	8.5%		7,420,402	\$ 87.93	\$ 84.16	\$ 79.28	14.5%	6.5%	81,415	11,577	11,281	11,231	0.8%	-1.1%	\$ 90.45	\$ 88.83	\$ 84.00	13.9%	7.5%	\$ 0.70	\$ 0.69	\$ 0.71	-1.1%	17.4%	\$ 15.59	\$ 15.56	\$ 15.64	-3.8%	5.1%	\$ 94.34	\$ 93.85	\$ 88.45	17.5%	17.5%				
201411	83,933	1.2553	5,845,708	\$ 69.65	\$ 70.34	\$ 65.40	26.0%	11.4%		7,050,327	\$ 84.00	\$ 85.27	\$ 80.45	18.3%	8.4%	75,566	10,804	11,199	11,227	1.0%	-0.9%	\$ 92.61	\$ 90.68	\$ 85.28	17.3%	9.4%	\$ 0.69	\$ 0.69	\$ 0.71	-1.2%	6.5%	\$ 15.37	\$ 15.49	\$ 15.55	-5.8%	3.0%	\$ 93.54	\$ 93.94	\$ 89.42	17.0%	17.3%				
201412	80,143	1.2529	6,487,022	\$ 80.94	\$ 74.23	\$ 67.15	30.6%	14.4%		7,830,957	\$ 97.71	\$ 89.76	\$ 82.27	22.7%	10.6%	80,479	12,050	11,468	11,282	2.0%	-0.3%	\$ 96.61	\$ 93.22	\$ 88.20	20.5%	11.1%	\$ 0.69	\$ 0.69	\$ 0.71	-1.8%	-3.3%	\$ 15.57	\$ 15.51	\$ 15.53	-5.0%	1.6%	\$ 95.94	\$ 94.63	\$ 90.37	15.6%	16.6%				
201501	79,355	1.2589	6,050,597	\$ 76.25	\$ 75.52	\$ 68.41	30.9%	16.9%		7,376,256	\$ 92.95	\$ 91.43	\$ 83.54	24.1%	12.6%	77,765	11,760	11,526	11,276	1.9%	0.0%	\$ 94.17	\$ 94.50	\$ 88.21	22.0%	12.9%	\$ 0.68	\$ 0.69	\$ 0.70	-2.9%	-11.9%	\$ 15.34	\$ 15.43	\$ 15.55	-2.4%	1.0%	\$ 95.00	\$ 94.85	\$ 91.27	13.6%	15.7%				
201502	78,577	1.2600	5,445,697	\$ 69.30	\$ 75.54	\$ 69.57	28.9%	19.0%		6,629,842	\$ 84.37	\$ 91.72	\$ 84.81	24.0%	14.5%	70,686	10,795	11,539	11,313	3.3%	0.5%	\$ 93.11	\$ 94.70	\$ 89.26	20.4%	14.1%	\$ 0.69	\$ 0.69	\$ 0.70	-3.4%	-10.3%	\$ 15.30	\$ 15.41	\$ 15.56	0.2%	0.6%	\$ 94.70	\$ 95.24	\$ 92.06	12.5%	15.0%				
201503	78,661	1.2611	6,324,713	\$ 80.40	\$ 75.32	\$ 70.78	23.8%	20.0%		7,579,705	\$ 96.36	\$ 91.24	\$ 86.05	19.8%	15.3%	77,703	11,854	11,471	11,322	1.6%	0.5%	\$ 96.87	\$ 94.76	\$ 90.51	18.1%	14.9%	\$ 0.68	\$ 0.68	\$ 0.70	-4.3%	-8.6%	\$ 15.24	\$ 15.29	\$ 15.54	0.2%	-0.2%	\$ 97.51	\$ 95.77	\$ 93.09	12.4%	14.8%				
201504	78,184	1.2617	6,888,084	\$ 88.10	\$ 79.26	\$ 72.70	27.4%	22.8%		8,120,412	\$ 103.86	\$ 94.85	\$ 88.01	23.0%	17.6%	75,136	11,532	11,394	11,336	2.1%	0.8%	\$ 107.39	\$ 99.21	\$ 92.47	20.7%	16.9%	\$ 0.69	\$ 0.68	\$ 0.70	-4.3%	-6.6%	\$ 15.38	\$ 15.31	\$ 15.51	-1.2%	-1.1%	\$ 99.48	\$ 97.29	\$ 94.16	13.2%	15.0%				
201505	78,225	1.2616	6,228,186	\$ 79.62	\$ 82.70	\$ 73.76	25.8%	23.7%		7,409,923	\$ 94.73	\$ 98.31	\$ 89.09	21.4%	18.5%	73,398	11,260	11,549	11,339	1.2%	1.1%	\$ 100.28	\$ 101.47	\$ 93.59	20.2%	17.4%	\$ 0.68	\$ 0.68	\$ 0.69	-5.1%	-4.7%	\$ 15.33	\$ 15.32	\$ 15.											

RetailGeneric

Incurred Claims										Allowed Amount										Utilization										Allowed Cost/Rx (Excl. Disp. Fee)										Avg Dispensing Fee										Avg Copay										Avg Discount									
Date	Members	Demo/Factor	Incurred Claims	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Allowed Amount	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Rx Count	Util/1,000	3-Month Avg Util/1,000	12-Month Avg Util/1,000	3 Month Trend	12 Month Trend	Monthly Allowed Cost/Rx	3-Month Avg Cost/Svc	12-Month Avg Cost/Svc	3 Month Trend	12 Month Trend	Monthly Fee/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend	Monthly Copay/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend	Monthly Discount/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend																													
201306	96,418	1,2497	932,557	\$ 9.67	\$ 10.23	\$ 10.54	8.9%	26.6%	1,467,038	\$	15.22	\$ 16.00	\$ 16.22	9.2%	20.3%	66,453	8,271	8,687	8,542	6.8%	4.8%	\$ 21.11	\$ 22.11	\$ 22.78	2.5%	14.8%	\$ 0.97	\$ 0.97	\$ 0.71	1.4%	-26.5%	\$ 7.83	\$ 7.70	\$ 7.52	5.6%	8.2%	\$ 63.83	\$ 64.13	\$ 59.51	14.1%	10.9%																												
201307	94,640	1,2524	931,716	\$ 9.84	\$ 10.01	\$ 10.61	7.4%	24.5%	1,481,328	\$	15.65	\$ 15.77	\$ 16.34	8.2%	19.0%	68,833	8,721	8,648	8,595	6.3%	5.0%	\$ 20.80	\$ 21.89	\$ 22.81	1.8%	13.3%	\$ 0.72	\$ 0.89	\$ 0.69	-7.3%	-28.4%	\$ 7.82	\$ 7.78	\$ 7.55	6.1%	7.8%	\$ 65.17	\$ 63.89	\$ 60.11	12.1%	10.4%																												
201308	93,781	1,2514	926,316	\$ 9.88	\$ 9.80	\$ 10.59	3.3%	20.7%	1,470,746	\$	15.68	\$ 15.51	\$ 16.35	5.2%	16.5%	67,289	8,610	8,534	8,611	4.6%	4.7%	\$ 21.13	\$ 21.81	\$ 22.78	0.6%	11.3%	\$ 0.73	\$ 0.81	\$ 0.67	-15.8%	-30.3%	\$ 7.95	\$ 7.86	\$ 7.60	6.9%	7.5%	\$ 65.16	\$ 64.73	\$ 60.69	12.6%	10.0%																												
201309	93,020	1,2510	845,625	\$ 9.09	\$ 9.61	\$ 10.50	-2.5%	16.6%	1,385,944	\$	14.90	\$ 15.41	\$ 16.31	1.8%	14.1%	64,699	8,346	8,563	8,651	5.2%	5.2%	\$ 20.69	\$ 21.60	\$ 22.62	-3.2%	8.4%	\$ 0.73	\$ 0.73	\$ 0.65	-23.8%	-32.1%	\$ 8.23	\$ 7.99	\$ 7.65	7.7%	7.3%	\$ 64.71	\$ 65.02	\$ 61.23	12.6%	9.7%																												
201310	92,418	1,2543	892,302	\$ 9.66	\$ 9.54	\$ 10.37	-9.6%	11.3%	1,482,060	\$	16.04	\$ 15.54	\$ 16.24	-2.8%	10.7%	68,659	8,915	8,623	8,678	3.8%	4.9%	\$ 20.85	\$ 21.62	\$ 22.46	-6.3%	5.5%	\$ 0.73	\$ 0.73	\$ 0.63	-23.3%	-34.1%	\$ 8.52	\$ 8.23	\$ 7.74	10.5%	7.7%	\$ 64.85	\$ 64.91	\$ 61.84	12.5%	10.2%																												
201311	92,764	1,2544	891,571	\$ 9.61	\$ 9.45	\$ 10.26	-12.5%	7.5%	1,442,871	\$	15.55	\$ 15.50	\$ 16.17	-4.7%	8.3%	65,398	8,460	8,573	8,681	3.1%	4.6%	\$ 21.33	\$ 21.69	\$ 22.35	-7.5%	3.5%	\$ 0.73	\$ 0.73	\$ 0.70	16.3%	-20.2%	\$ 8.37	\$ 8.37	\$ 7.81	12.0%	8.2%	\$ 65.40	\$ 64.98	\$ 62.47	12.6%	10.8%																												
201312	94,443	1,2549	1,025,562	\$ 10.86	\$ 10.05	\$ 10.20	-10.5%	4.3%	1,565,408	\$	16.58	\$ 16.06	\$ 16.10	-4.7%	6.0%	69,385	8,816	8,731	8,686	1.6%	4.4%	\$ 21.83	\$ 22.07	\$ 22.25	-6.2%	1.6%	\$ 0.73	\$ 0.73	\$ 0.76	130.3%	-2.8%	\$ 7.74	\$ 8.20	\$ 7.83	9.8%	8.0%	\$ 66.93	\$ 65.73	\$ 63.29	14.0%	11.8%																												
201401	96,337	1,2491	1,069,311	\$ 11.10	\$ 10.53	\$ 10.14	-7.3%	0.7%	1,621,788	\$	16.83	\$ 16.33	\$ 15.97	-5.7%	2.6%	74,010	9,219	8,836	8,684	0.4%	3.6%	\$ 21.18	\$ 22.18	\$ 22.07	-6.1%	-0.9%	\$ 0.74	\$ 0.74	\$ 0.83	0.0%	19.2%	\$ 7.29	\$ 7.78	\$ 7.83	4.4%	6.7%	\$ 66.63	\$ 66.34	\$ 64.18	15.5%	13.0%																												
201402	97,384	1,2505	997,225	\$ 10.24	\$ 10.73	\$ 10.12	-4.5%	-1.3%	1,484,807	\$	15.25	\$ 16.21	\$ 15.89	-5.9%	0.7%	66,897	8,243	8,757	8,685	0.2%	3.5%	\$ 21.46	\$ 22.22	\$ 21.96	-6.1%	-2.7%	\$ 0.73	\$ 0.73	\$ 0.81	147.9%	16.3%	\$ 7.16	\$ 7.40	\$ 7.79	-1.3%	5.4%	\$ 68.24	\$ 67.24	\$ 64.99	16.6%	13.8%																												
201403	96,469	1,2536	1,092,044	\$ 11.32	\$ 10.88	\$ 10.20	0.3%	-1.4%	1,652,710	\$	17.13	\$ 16.40	\$ 15.97	-2.8%	0.5%	73,997	9,205	8,887	8,718	1.5%	3.6%	\$ 21.60	\$ 22.15	\$ 21.99	-4.2%	-3.0%	\$ 0.73	\$ 0.73	\$ 0.79	18.0%	12.6%	\$ 7.58	\$ 7.35	\$ 7.81	-1.7%	5.2%	\$ 67.67	\$ 67.49	\$ 65.60	15.0%	13.9%																												
201404	94,693	1,2578	1,071,527	\$ 11.32	\$ 10.95	\$ 10.27	4.8%	-1.6%	1,624,236	\$	17.15	\$ 16.50	\$ 16.04	1.7%	0.0%	70,613	8,948	8,796	8,726	1.9%	3.0%	\$ 22.27	\$ 22.51	\$ 22.06	-0.2%	-2.9%	\$ 0.73	\$ 0.73	\$ 0.77	-24.3%	9.3%	\$ 7.93	\$ 7.57	\$ 7.83	0.1%	5.2%	\$ 68.71	\$ 68.20	\$ 65.85	10.5%	12.6%																												
201405	92,502	1,2582	1,001,204	\$ 10.82	\$ 11.16	\$ 10.29	6.7%	-1.9%	1,515,439	\$	16.38	\$ 16.89	\$ 16.03	3.6%	-0.6%	68,016	8,824	8,995	8,716	1.5%	2.3%	\$ 21.55	\$ 22.54	\$ 22.07	2.0%	-2.9%	\$ 0.73	\$ 0.73	\$ 0.75	-24.9%	5.9%	\$ 7.78	\$ 7.76	\$ 7.84	2.3%	4.8%	\$ 70.63	\$ 68.96	\$ 66.52	9.3%	12.8%																												
201406	90,873	1,2590	964,549	\$ 10.61	\$ 10.92	\$ 10.37	6.8%	-1.6%	1,449,895	\$	15.96	\$ 16.51	\$ 16.10	3.1%	-0.8%	65,102	8,597	8,792	8,744	1.2%	2.4%	\$ 21.55	\$ 22.53	\$ 22.09	1.9%	-3.1%	\$ 0.73	\$ 0.73	\$ 0.73	-25.1%	3.1%	\$ 7.77	\$ 7.83	\$ 7.84	1.6%	4.3%	\$ 71.35	\$ 70.19	\$ 67.12	9.5%	12.8%																												
201407	88,771	1,2583	977,252	\$ 11.01	\$ 10.81	\$ 10.46	8.0%	-1.4%	1,485,587	\$	16.74	\$ 16.35	\$ 16.18	3.7%	-0.9%	66,473	8,986	8,801	8,764	1.8%	2.0%	\$ 21.63	\$ 22.30	\$ 22.16	1.9%	-2.9%	\$ 0.72	\$ 0.73	\$ 0.73	-18.5%	5.8%	\$ 7.62	\$ 7.72	\$ 7.82	-0.7%	3.5%	\$ 71.73	\$ 71.23	\$ 67.66	11.5%	12.6%																												
201408	88,820	1,2579	1,003,635	\$ 11.30	\$ 10.97	\$ 10.58	12.0%	0.1%	1,501,900	\$	16.91	\$ 16.53	\$ 16.28	6.5%	-0.4%	64,456	8,708	8,762	8,773	2.7%	1.9%	\$ 22.58	\$ 22.64	\$ 22.27	3.8%	-2.2%	\$ 0.72	\$ 0.72	\$ 0.73	-10.6%	8.8%	\$ 7.68	\$ 7.69	\$ 7.80	-2.2%	2.7%	\$ 73.94	\$ 72.33	\$ 68.96	11.7%	12.6%																												
201409	87,063	1,2602	1,003,128	\$ 11.52	\$ 11.28	\$ 10.78	17.4%	2.8%	1,504,339	\$	17.28	\$ 16.97	\$ 16.48	10.1%	1.0%	64,424	8,880	8,858	8,817	3.4%	1.9%	\$ 22.63	\$ 22.99	\$ 22.43	6.4%	-0.9%	\$ 0.72	\$ 0.72	\$ 0.73	-1.3%	11.6%	\$ 7.75	\$ 7.68	\$ 7.76	-3.9%	1.4%	\$ 73.77	\$ 73.13	\$ 69.08	12.5%	12.8%																												
201410	84,393	1,2561	1,018,718	\$ 12.07	\$ 11.62	\$ 10.97	21.8%	5.7%	1,523,025	\$	18.05	\$ 17.40	\$ 16.63	12.0%	2.4%	64,347	9,150	8,909	8,834	3.3%	1.8%	\$ 22.95	\$ 23.44	\$ 22.59	8.4%	0.6%	\$ 0.72	\$ 0.72	\$ 0.73	-2.0%	15.0%	\$ 7.79	\$ 7.74	\$ 7.70	-6.0%	-0.5%	\$ 74.27	\$ 73.99	\$ 69.84	14.0%	12.9%																												
201411	83,933	1,2553	947,575	\$ 11.29	\$ 11.63	\$ 11.11	23.0%	8.2%	1,419,727	\$	16.92	\$ 17.41	\$ 16.75	12.4%	3.6%	59,894	8,563	8,865	8,845	3.4%	1.9%	\$ 22.99	\$ 23.57	\$ 22.72	8.7%	1.7%	\$ 0.72	\$ 0.72	\$ 0.73	-2.3%	4.3%	\$ 7.76	\$ 7.77	\$ 7.65	-7.3%	-2.1%	\$ 74.13	\$ 74.06	\$ 70.52	14.0%	12.9%																												
201412	80,143	1,2529	1,038,236	\$ 12.95	\$ 12.09	\$ 11.27	20.4%	10.5%	1,557,067	\$	19.43	\$ 18.11	\$ 16.96	12.8%	5.3%	63,528	9,512	9,068	8,897	3.9%	2.4%	\$ 23.79	\$ 23.96	\$ 22.88	8.6%	2.8%	\$ 0.72	\$ 0.72	\$ 0.72	-2.3%	-5.0%	\$ 7.91	\$ 7.82	\$ 7.66	-4.7%	-2.2%	\$ 76.19	\$ 74.88	\$ 71.28	13.9%	12.6%																												
201501	79,355	1,2589	992,921	\$ 12.51	\$ 12.24	\$ 11.38	16.2%	12.2%	1,515,315	\$	19.10	\$ 18.45	\$ 17.13	13.0%	7.3%	61,865	9,355	9,134	8,902	3.4%	2.5%	\$ 23.78	\$ 24.24	\$ 23.09	9.3%	4.6%	\$ 0.72	\$ 0.72	\$ 0.72	-2.6%	-13.3%	\$ 7.88	\$ 7.85	\$ 7.72	0.9%	-1.5%	\$ 77.35	\$ 75.91	\$ 72.19	14.4%	12.5%																												
201502	78,577	1,2600	917,340	\$ 11.67	\$ 12.38	\$ 11.50	15.4%	13.7%	1,383,323	\$	17.60	\$ 18.72	\$ 17.34	15.4%	4.1%	56,553	8,337	9,171	8,943	4.7%	3.0%	\$ 23.74	\$ 24.49	\$ 23.27	10.2%	6.9%	\$ 0.72	\$ 0.72	\$ 0.72	-2.5%	-11.5%	\$ 8.00	\$ 7.93	\$ 7.78	7.2%	-0.1%	\$ 78.68	\$ 77.36	\$ 73.00	15.0%	12.3%																												
201503	78,661	1,2611	1,048,603	\$ 13.33	\$ 12.51	\$ 11.66	14.9%	14.4%	1,562,031	\$	19.86	\$ 18.85	\$ 17.55	15.0%	9.9%	62,314	9,506	9,167	8,962	3.2%	2.8%	\$ 24.35	\$ 24.68	\$ 23.50	14.9%	6.9%	\$ 0.71	\$ 0.71	\$ 0.72	-2.6%	-9.3%	\$ 8.06	\$ 7.98	\$ 7.83	8.5%	0.3%	\$ 80.36	\$ 78.80	\$ 74.11	16.8%	13.0%																												
201504	78,184	1,2617	992,304	\$ 12.69	\$ 12.57	\$ 11.77	14.7%	14.7%	1,491,177	\$	19.07	\$ 18.85	\$ 17.71	14.2%	10.4%	60,257	9,248	9,130	8,985	3.8%	3.0%	\$ 24.03	\$ 24.77	\$ 23.65	10.0%	7.2%	\$ 0.72	\$ 0.71	\$ 0.72	-2.2%	-6.9%	\$ 8.13	\$ 8.06	\$ 7.84	6.6%	0.1%	\$ 80.15	\$ 79.76	\$ 75.10	16.9%	14.0%																												
201505	78,225	1,2616	1,052,225	\$ 13.45	\$ 13.16	\$ 11.99	17.9%	16.6%	1,539,582	\$	19.68	\$ 19.54	\$ 17.99	15.6%	12.2%	58,822	9,024	9,260	9,003	2.9%	3.3%	\$ 25.46	\$ 25.32	\$ 23.97	12.3%	8.6%	\$ 0.71	\$ 0.71	\$ 0.72	-2.1%	-4.5%	\$ 81.10																																					

Retail Brand Non-Formulary

Incurred Claims										Allowed Amount										Utilization										Allowed Cost/Rx										Avg Dispensing Fee										Avg Copay										Avg Discount									
Date	Members	Demo/Factor	Incurred Claims	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend		Allowed Amount	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Rx Count	Util/1,000	3-Month Avg Util/1,000	12-Month Avg Util/1,000	3 Month Trend	12 Month Trend	Monthly Allowed Cost/Rx	3-Month Avg Cost/Svc	12-Month Avg Cost/Svc	3 Month Trend	12 Month Trend	Monthly Fee/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend	Monthly Copay/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend	Monthly Discount/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend																												
201306	96,418	1.2497	899,274	\$ 9.33	\$ 9.58	\$ 9.37	5.8%	1.0%		1,211,825	\$ 12.57	\$ 12.93	\$ 12.58	5.0%	-1.1%	5,852	728	764	779	-8.4%	-11.2%	\$ 205.78	\$ 203.09	\$ 193.93	14.7%	11.3%	\$ 1.30	\$ 1.27	\$ 1.22	7.8%	13.9%	\$ 45.69	\$ 44.96	\$ 41.83	10.7%	3.0%	\$ 53.97	\$ 52.43	\$ 43.85	45.5%	30.7%																												
201307	94,640	1.2524	906,138	\$ 9.57	\$ 9.55	\$ 9.41	4.8%	1.3%		1,232,449	\$ 13.02	\$ 12.93	\$ 12.64	4.6%	-0.6%	5,829	739	752	773	-9.1%	-11.1%	\$ 210.43	\$ 206.38	\$ 196.14	15.1%	11.8%	\$ 1.01	\$ 1.19	\$ 1.21	0.5%	10.4%	\$ 47.01	\$ 45.92	\$ 42.35	13.6%	4.4%	\$ 56.92	\$ 53.87	\$ 45.28	45.2%	32.4%																												
201308	93,781	1.2514	892,727	\$ 9.52	\$ 9.47	\$ 9.41	4.0%	1.3%		1,214,832	\$ 12.95	\$ 12.85	\$ 12.65	4.2%	-0.4%	5,670	726	731	764	-10.6%	-11.5%	\$ 213.23	\$ 210.89	\$ 198.58	16.5%	12.5%	\$ 1.02	\$ 1.11	\$ 1.19	-9.1%	6.4%	\$ 47.56	\$ 46.75	\$ 42.92	15.9%	5.8%	\$ 45.50	\$ 52.19	\$ 45.02	27.4%	26.3%																												
201309	93,020	1.2510	832,420	\$ 8.95	\$ 9.35	\$ 9.42	1.9%	2.2%		1,141,757	\$ 12.27	\$ 12.75	\$ 12.69	3.3%	0.8%	5,306	684	717	758	-10.6%	-10.9%	\$ 214.19	\$ 213.57	\$ 200.81	15.6%	13.2%	\$ 1.00	\$ 1.01	\$ 1.17	-18.0%	3.6%	\$ 49.13	\$ 47.87	\$ 43.60	18.8%	7.7%	\$ 44.83	\$ 49.25	\$ 45.58	17.5%	26.1%																												
201310	92,418	1.2543	865,385	\$ 9.36	\$ 9.28	\$ 9.39	-1.0%	1.4%		1,205,409	\$ 13.04	\$ 12.76	\$ 12.69	1.7%	0.8%	5,525	717	709	749	-12.0%	-11.3%	\$ 217.18	\$ 215.87	\$ 203.18	15.5%	13.6%	\$ 0.99	\$ 1.00	\$ 1.15	-18.9%	-0.1%	\$ 51.28	\$ 49.31	\$ 44.49	22.3%	10.0%	\$ 47.34	\$ 45.90	\$ 46.34	9.0%	26.0%																												
201311	92,764	1.2544	824,866	\$ 8.89	\$ 9.07	\$ 9.34	-3.1%	0.9%		1,144,361	\$ 12.34	\$ 12.55	\$ 12.67	0.7%	1.0%	5,213	674	692	740	-12.4%	-11.4%	\$ 218.56	\$ 217.62	\$ 205.49	15.0%	14.0%	\$ 0.96	\$ 0.98	\$ 1.14	-17.8%	-2.1%	\$ 52.12	\$ 50.84	\$ 45.44	26.3%	12.5%	\$ 47.08	\$ 46.43	\$ 47.23	20.1%	26.3%																												
201312	94,443	1.2549	831,963	\$ 8.81	\$ 9.02	\$ 9.29	-5.5%	0.5%		1,149,219	\$ 12.17	\$ 12.51	\$ 12.64	-1.4%	1.2%	5,162	656	682	728	-14.9%	-11.9%	\$ 221.54	\$ 220.06	\$ 208.44	15.9%	14.8%	\$ 1.09	\$ 1.02	\$ 1.14	-14.4%	-3.7%	\$ 52.01	\$ 51.79	\$ 46.44	28.5%	15.2%	\$ 49.33	\$ 47.90	\$ 48.32	25.3%	28.2%																												
201401	96,337	1.2491	850,026	\$ 8.82	\$ 8.84	\$ 9.22	-6.9%	0.0%		1,159,280	\$ 12.03	\$ 12.18	\$ 12.56	-4.1%	0.1%	5,053	629	653	715	-17.4%	-12.7%	\$ 228.38	\$ 223.80	\$ 210.92	16.1%	14.6%	\$ 1.04	\$ 1.03	\$ 1.12	-12.0%	-5.8%	\$ 51.31	\$ 51.82	\$ 47.31	27.7%	16.8%	\$ 49.17	\$ 48.52	\$ 49.27	26.4%	29.4%																												
201402	97,384	1.2505	813,240	\$ 8.35	\$ 8.66	\$ 9.19	-6.8%	-1.0%		1,085,672	\$ 11.15	\$ 11.78	\$ 12.51	-5.5%	0.1%	4,503	555	613	702	-19.7%	-12.9%	\$ 240.07	\$ 230.61	\$ 213.81	17.7%	15.0%	\$ 1.03	\$ 1.06	\$ 1.10	-12.2%	-7.9%	\$ 52.72	\$ 51.99	\$ 48.13	26.3%	18.5%	\$ 54.29	\$ 50.79	\$ 50.37	30.2%	30.6%																												
201403	96,469	1.2536	901,358	\$ 9.34	\$ 8.84	\$ 9.20	-4.0%	-0.5%		1,192,525	\$ 12.36	\$ 11.85	\$ 12.51	-4.4%	0.6%	4,921	612	599	691	-19.7%	-13.2%	\$ 241.16	\$ 237.44	\$ 217.39	19.0%	15.9%	\$ 1.17	\$ 1.08	\$ 1.10	-10.8%	-5.4%	\$ 53.00	\$ 52.32	\$ 48.96	24.0%	20.0%	\$ 53.94	\$ 52.38	\$ 50.52	19.6%	26.6%																												
201404	94,693	1.2578	876,862	\$ 9.26	\$ 8.98	\$ 9.16	-2.5%	-1.5%		1,165,678	\$ 12.31	\$ 11.94	\$ 12.45	-3.6%	-0.4%	4,816	610	592	676	-20.1%	-14.5%	\$ 240.87	\$ 241.85	\$ 220.85	20.3%	16.5%	\$ 1.18	\$ 1.13	\$ 1.09	-7.8%	-9.4%	\$ 53.12	\$ 52.95	\$ 49.76	22.6%	21.2%	\$ 58.51	\$ 55.59	\$ 50.92	15.2%	23.4%																												
201405	92,502	1.2582	859,108	\$ 9.29	\$ 9.30	\$ 9.12	-2.4%	-2.1%		1,135,382	\$ 12.27	\$ 12.32	\$ 12.37	-4.1%	-1.2%	4,749	616	613	662	-20.3%	-15.7%	\$ 237.87	\$ 241.17	\$ 224.26	20.7%	17.2%	\$ 1.20	\$ 1.18	\$ 1.08	-4.3%	-10.9%	\$ 54.32	\$ 53.47	\$ 50.58	21.1%	22.1%	\$ 53.16	\$ 55.20	\$ 51.08	6.8%	20.4%																												
201406	90,873	1.2590	838,144	\$ 9.22	\$ 9.26	\$ 9.11	-3.4%	-2.8%		1,105,625	\$ 12.17	\$ 12.25	\$ 12.34	-5.3%	-2.0%	4,543	600	609	651	-20.3%	-16.4%	\$ 242.27	\$ 241.47	\$ 227.32	18.9%	17.2%	\$ 1.10	\$ 1.16	\$ 1.06	-8.5%	-13.1%	\$ 55.07	\$ 54.15	\$ 51.38	20.4%	22.8%	\$ 56.36	\$ 56.02	\$ 51.20	6.8%	16.8%																												
201407	88,771	1.2593	868,235	\$ 9.78	\$ 9.43	\$ 9.13	-1.3%	-3.0%		1,143,214	\$ 12.88	\$ 12.44	\$ 12.32	-3.8%	-2.5%	4,527	612	609	641	-18.9%	-17.1%	\$ 251.52	\$ 244.90	\$ 230.76	18.7%	17.7%	\$ 1.01	\$ 1.11	\$ 1.06	-7.4%	-11.9%	\$ 54.33	\$ 54.57	\$ 52.03	18.8%	22.8%	\$ 57.84	\$ 55.75	\$ 51.14	3.5%	12.8%																												
201408	88,820	1.2579	912,601	\$ 10.27	\$ 9.76	\$ 9.19	3.0%	-2.4%		1,184,315	\$ 13.33	\$ 12.79	\$ 12.35	-0.5%	-2.4%	4,519	611	607	631	-16.9%	-17.4%	\$ 261.07	\$ 252.64	\$ 234.76	19.8%	18.2%	\$ 1.01	\$ 1.04	\$ 1.06	-6.5%	-10.5%	\$ 54.18	\$ 54.53	\$ 52.63	16.8%	22.6%	\$ 56.58	\$ 56.93	\$ 52.10	9.1%	15.7%																												
201409	87,063	1.2602	908,363	\$ 10.43	\$ 10.16	\$ 9.30	8.7%	-1.3%		1,176,613	\$ 13.51	\$ 13.24	\$ 12.45	3.8%	-1.9%	4,394	606	609	625	-15.9%	-17.6%	\$ 266.79	\$ 260.72	\$ 239.06	22.1%	19.0%	\$ 0.99	\$ 1.00	\$ 1.06	-0.9%	-9.4%	\$ 54.86	\$ 54.45	\$ 53.12	13.8%	21.8%	\$ 57.56	\$ 57.32	\$ 53.18	16.4%	16.7%																												
201410	84,393	1.2561	882,319	\$ 10.45	\$ 10.39	\$ 9.39	11.9%	0.0%		1,146,619	\$ 13.59	\$ 13.48	\$ 12.48	5.6%	-1.6%	4,348	618	611	617	-13.8%	-17.7%	\$ 262.60	\$ 264.50	\$ 242.98	22.5%	19.6%	\$ 1.11	\$ 1.03	\$ 1.07	3.1%	-6.8%	\$ 54.86	\$ 54.63	\$ 53.43	10.8%	20.0%	\$ 57.81	\$ 57.31	\$ 54.11	24.9%	16.8%																												
201411	83,933	1.2553	826,105	\$ 9.84	\$ 10.25	\$ 9.46	13.0%	1.3%		1,059,823	\$ 12.63	\$ 13.25	\$ 12.51	5.5%	-1.3%	3,956	566	597	608	-13.8%	-17.9%	\$ 266.81	\$ 266.42	\$ 246.96	22.4%	20.2%	\$ 1.10	\$ 1.06	\$ 1.09	8.1%	-4.7%	\$ 53.87	\$ 54.55	\$ 53.58	7.3%	17.9%	\$ 58.36	\$ 57.89	\$ 55.07	24.7%	16.7%																												
201412	80,143	1.2529	855,429	\$ 10.67	\$ 10.32	\$ 9.61	14.4%	3.4%		1,105,872	\$ 13.80	\$ 13.33	\$ 12.63	6.5%	-0.1%	4,133	619	601	604	-12.0%	-17.0%	\$ 266.48	\$ 266.33	\$ 250.83	21.0%	20.3%	\$ 1.09	\$ 1.10	\$ 1.09	8.3%	-4.3%	\$ 53.52	\$ 54.10	\$ 53.73	4.5%	15.7%	\$ 61.82	\$ 59.32	\$ 56.13	23.8%	16.7%																												
201501	79,355	1.2589	804,946	\$ 10.14	\$ 10.21	\$ 9.72	15.5%	5.4%		1,048,746	\$ 13.22	\$ 13.20	\$ 12.73	8.4%	1.4%	3,732	564	583	599	-10.8%	-16.2%	\$ 280.06	\$ 271.93	\$ 254.98	21.5%	20.9%	\$ 0.96	\$ 1.05	\$ 1.08	1.5%	-3.5%	\$ 54.47	\$ 53.94	\$ 54.01	4.1%	14.2%	\$ 67.17	\$ 62.35	\$ 57.57	28.5%	16.9%																												
201502	78,577	1.2600	793,200	\$ 10.09	\$ 10.31	\$ 9.88	19.0%	7.5%		1,016,269	\$ 12.93	\$ 13.32	\$ 12.89	13.1%	1.1%	3,520	538	574	599	-6.4%	-14.2%	\$ 287.69	\$ 278.51	\$ 258.46	20.8%	20.9%	\$ 1.02	\$ 1.02	\$ 1.08	-3.1%	-2.0%	\$ 53.87	\$ 53.94	\$ 54.11	3.8%	12.4%	\$ 63.78	\$ 64.18	\$ 58.27	26.4%	15.7%																												
201503	78,661	1.2611	884,529	\$ 11.24	\$ 10.49	\$ 10.03	18.7%	9.0%		1,118,823	\$ 14.22	\$ 13.46	\$ 13.04	13.6%	4.3%	3,798	579	560	596	-6.4%	-13.7%	\$ 293.66	\$ 288.13	\$ 262.70	21.3%	20.8%	\$ 0.92	\$ 0.97	\$ 1.06	-10.7%	-3.6%	\$ 53.72	\$ 54.02	\$ 54.19	3.2%	10.7%	\$ 65.63	\$ 65.56	\$ 59.23	25.2%	17.3%																												
201504	78,184	1.2617	972,035	\$ 12.43	\$ 11.26	\$ 10.29	25.3%	12.3%		1,208,394	\$ 15.46	\$ 14.20	\$ 13.30	19.0%	6.8%	3,741	574	564	593	-4.8%	-12.4%	\$ 322.05	\$ 302.33	\$ 269.21	25.0%	21.9%	\$ 0.97	\$ 0.97	\$ 1.04	-14.0%	-4.5%	\$ 54.70	\$ 54.10	\$ 54.33	2.2%	9.2%	\$ 71.84	\$ 67.14	\$ 60.25	20.8%	18.3%																												
201505	78,225	1.2616	820,950	\$ 10.48	\$ 11.39	\$ 10.40	22.5%	14.0%		1,045,008	\$ 13.36	\$ 14.35	\$ 13.40	16.5%	8.3%	3,680	565	573	588	-6.5%	-11.1%	\$ 283.06	\$ 300.58	\$ 273.25	24.6%	21.8%	\$ 0.91	\$ 0.93	\$ 1.02	-21.1%	-6.0%	\$ 54.40	\$ 54.27	\$ 54.34	1.5%	7.4%	\$ 63.47	\$ 60.99	\$ 61.18	21.4%	19.8%																												

MailGeneric

Incurred Claims										Allowed Amount										Utilization										Allowed Cost/Rx (Excl. Disp. Fee)										Avg Dispensing Fee										Avg Copay										Avg Discount									
Date	Members	DemoFactor	Incurred Claims	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend		Allowed Amount	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Rx Count	Util/1,000	3-Month Avg Util/1,000	12-Month Avg Util/1,000	3 Month Trend	12 Month Trend	Monthly Allowed Cost/Rx	3-Month Avg Cost/Svc	12-Month Avg Cost/Svc	3 Month Trend	12 Month Trend	Monthly Fee/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend	Monthly Copay/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend	Monthly Discount/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend																												
201306	96,418	1,2497	205,883	\$ 2.14	\$ 2.12	\$ 2.45	-12.4%	12.4%		316,755	\$ 3.29	\$ 3.25	\$ 3.55	-7.6%	7.7%	5,277	657	647	653	-1.4%	-4.5%	60.03	\$ 60.19	\$ 65.23	-6.3%	12.8%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 20.74	\$ 20.37	\$ 19.59	5.1%	4.7%	\$ 240.06	\$ 240.17	\$ 229.23	15.6%	12.1%																												
201307	94,640	1,2524	192,512	\$ 2.03	\$ 2.05	\$ 2.45	-12.7%	11.6%		304,910	\$ 3.22	\$ 3.20	\$ 3.56	-7.0%	7.6%	5,466	692	660	655	-0.3%	-3.8%	55.89	\$ 58.10	\$ 65.23	-6.7%	11.8%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 20.48	\$ 20.58	\$ 19.73	6.7%	5.1%	\$ 240.17	\$ 241.62	\$ 230.78	12.6%	11.6%																												
201308	93,781	1,2514	195,621	\$ 2.09	\$ 2.09	\$ 2.43	-10.1%	8.9%		306,287	\$ 3.27	\$ 3.26	\$ 3.55	-4.1%	6.4%	5,189	664	671	656	1.8%	-2.7%	59.03	\$ 58.28	\$ 64.82	-5.8%	9.4%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 21.11	\$ 20.78	\$ 19.87	8.2%	5.6%	\$ 244.99	\$ 241.70	\$ 232.67	11.3%	11.5%																												
201309	93,020	1,2510	175,390	\$ 1.89	\$ 2.00	\$ 2.37	-15.1%	4.0%		283,233	\$ 3.04	\$ 3.18	\$ 3.50	-6.8%	3.7%	5,018	647	668	659	3.3%	-1.4%	56.44	\$ 57.10	\$ 63.80	-9.8%	5.2%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 21.37	\$ 20.98	\$ 20.04	9.7%	6.1%	\$ 248.66	\$ 244.49	\$ 235.01	10.7%	12.0%																												
201310	92,418	1,2543	175,796	\$ 1.90	\$ 1.96	\$ 2.31	-23.4%	-1.3%		289,608	\$ 3.13	\$ 3.15	\$ 3.45	-12.8%	0.6%	5,191	674	662	659	2.3%	-1.0%	55.79	\$ 57.09	\$ 62.84	-14.8%	1.6%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 21.79	\$ 21.42	\$ 20.27	11.7%	7.0%	\$ 245.34	\$ 246.30	\$ 236.78	11.0%	11.8%																												
201311	92,764	1,2544	187,109	\$ 2.02	\$ 1.93	\$ 2.26	-26.1%	-5.0%		297,917	\$ 3.21	\$ 3.13	\$ 3.41	-14.6%	-1.5%	4,961	642	654	659	1.5%	-0.5%	60.05	\$ 57.40	\$ 62.16	-15.9%	-1.1%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 22.28	\$ 21.81	\$ 20.54	14.2%	8.1%	\$ 244.24	\$ 246.08	\$ 238.29	10.2%	11.6%																												
201312	94,443	1,2549	196,268	\$ 2.08	\$ 2.00	\$ 2.20	-25.1%	-9.2%		297,188	\$ 3.15	\$ 3.16	\$ 3.35	-15.7%	-4.5%	5,059	643	653	657	-1.2%	-0.5%	58.74	\$ 58.16	\$ 61.27	-14.6%	-4.0%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 19.91	\$ 21.32	\$ 20.59	11.4%	8.2%	\$ 247.59	\$ 245.73	\$ 240.18	8.9%	11.5%																												
201401	96,337	1,2491	267,013	\$ 2.77	\$ 2.29	\$ 2.18	-16.5%	-12.1%		374,432	\$ 3.89	\$ 3.42	\$ 3.33	-11.7%	-7.1%	5,288	659	648	653	-3.4%	-1.4%	70.81	\$ 63.34	\$ 61.14	-8.6%	-5.8%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 22.65	\$ 20.59	\$ 20.63	6.9%	7.6%	\$ 241.75	\$ 244.49	\$ 241.28	7.5%	11.0%																												
201402	97,384	1,2505	224,042	\$ 2.30	\$ 2.39	\$ 2.16	-13.4%	-14.3%		319,266	\$ 3.28	\$ 3.44	\$ 3.29	-11.7%	-8.8%	4,707	580	627	651	-5.1%	-1.1%	67.83	\$ 65.82	\$ 60.69	-6.9%	-7.8%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 19.93	\$ 19.83	\$ 20.63	1.3%	7.1%	\$ 240.78	\$ 243.41	\$ 241.92	6.0%	10.4%																												
201403	96,469	1,2536	254,496	\$ 2.64	\$ 2.57	\$ 2.18	-2.5%	-13.7%		361,475	\$ 3.75	\$ 3.64	\$ 3.31	-4.0%	-8.5%	5,174	644	627	649	-4.8%	-1.1%	69.86	\$ 69.56	\$ 61.21	0.9%	-7.5%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 20.86	\$ 20.15	\$ 20.70	1.8%	7.0%	\$ 244.25	\$ 242.30	\$ 243.15	4.8%	9.8%																												
201404	94,693	1,2578	242,007	\$ 2.56	\$ 2.50	\$ 2.20	3.2%	-12.6%		349,981	\$ 3.70	\$ 3.57	\$ 3.34	1.1%	-7.8%	4,990	632	618	647	-3.9%	-1.3%	70.14	\$ 69.31	\$ 61.86	5.2%	-6.5%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 21.78	\$ 20.87	\$ 20.87	4.5%	7.5%	\$ 237.59	\$ 240.92	\$ 244.33	3.3%	8.5%																												
201405	92,502	1,2582	176,390	\$ 1.91	\$ 2.37	\$ 2.20	7.5%	-11.4%		272,755	\$ 3.95	\$ 3.47	\$ 3.33	4.2%	-7.0%	4,990	647	641	648	-1.5%	-0.8%	54.66	\$ 64.95	\$ 61.56	5.8%	-6.2%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 19.79	\$ 20.81	\$ 20.81	3.3%	6.7%	\$ 255.21	\$ 245.67	\$ 244.18	3.7%	7.7%																												
201406	90,873	1,2590	181,922	\$ 2.00	\$ 2.16	\$ 2.19	1.6%	-10.8%		267,386	\$ 2.94	\$ 3.20	\$ 3.30	-1.4%	-7.1%	4,621	610	630	644	-2.6%	-1.4%	57.86	\$ 60.96	\$ 61.41	1.3%	-5.9%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 19.62	\$ 20.41	\$ 20.72	0.2%	5.8%	\$ 270.84	\$ 254.14	\$ 246.57	5.8%	7.6%																												
201407	88,771	1,2583	162,159	\$ 1.83	\$ 1.91	\$ 2.17	-6.8%	-11.5%		251,012	\$ 2.83	\$ 2.91	\$ 3.27	-9.1%	-8.3%	4,726	619	632	640	-4.3%	-2.3%	53.11	\$ 55.18	\$ 61.26	-5.0%	-6.1%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 19.02	\$ 19.48	\$ 20.61	-5.3%	4.5%	\$ 259.62	\$ 261.70	\$ 248.19	8.3%	7.5%																												
201408	88,820	1,2579	185,116	\$ 2.08	\$ 1.97	\$ 2.17	-5.5%	-10.6%		275,519	\$ 3.10	\$ 2.96	\$ 3.25	-9.2%	-8.2%	4,691	634	627	637	-6.5%	-2.9%	58.73	\$ 56.55	\$ 61.09	-3.0%	-5.5%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 19.29	\$ 19.31	\$ 20.46	-7.0%	3.0%	\$ 263.74	\$ 264.69	\$ 249.69	9.5%	7.3%																												
201409	87,063	1,2602	154,299	\$ 1.77	\$ 1.90	\$ 2.16	-5.3%	-8.8%		239,253	\$ 2.75	\$ 2.89	\$ 3.23	-9.0%	-7.7%	4,467	616	630	635	-5.7%	-3.6%	53.56	\$ 55.16	\$ 61.26	-3.4%	-4.3%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 19.25	\$ 19.19	\$ 20.29	-8.5%	1.3%	\$ 261.49	\$ 261.62	\$ 250.68	7.0%	6.7%																												
201410	84,393	1,2561	157,323	\$ 1.86	\$ 1.91	\$ 2.16	-2.5%	-6.3%		246,141	\$ 2.92	\$ 2.92	\$ 3.22	-7.1%	-6.8%	4,632	659	636	633	-3.9%	-3.9%	53.14	\$ 55.18	\$ 60.93	-3.4%	-3.0%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 19.28	\$ 19.28	\$ 20.08	-10.0%	-1.0%	\$ 261.36	\$ 262.21	\$ 252.00	6.5%	6.4%																												
201411	83,933	1,2553	164,702	\$ 1.96	\$ 1.87	\$ 2.16	-3.6%	-4.4%		248,146	\$ 2.96	\$ 2.87	\$ 3.20	-8.2%	-6.4%	4,274	611	628	631	-4.0%	-4.3%	58.06	\$ 54.85	\$ 60.79	-4.4%	-2.2%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 19.45	\$ 19.33	\$ 19.84	-11.4%	-3.4%	\$ 260.73	\$ 261.20	\$ 253.32	6.1%	6.3%																												
201412	80,143	1,2529	203,739	\$ 2.54	\$ 2.12	\$ 2.19	5.8%	-0.2%		295,681	\$ 3.69	\$ 3.18	\$ 3.24	0.5%	-3.4%	4,418	662	643	632	-1.4%	-3.7%	66.93	\$ 59.29	\$ 61.45	1.9%	0.3%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 20.58	\$ 19.77	\$ 19.89	-7.3%	-3.4%	\$ 270.66	\$ 264.24	\$ 255.17	7.5%	6.2%																												
201501	79,355	1,2589	151,419	\$ 1.91	\$ 2.14	\$ 2.12	-6.9%	-2.9%		240,997	\$ 3.04	\$ 3.22	\$ 3.16	-5.7%	-4.9%	4,277	647	639	631	-1.3%	-3.4%	56.35	\$ 60.52	\$ 60.17	-4.5%	-1.6%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 20.31	\$ 20.02	\$ 19.93	-2.8%	-3.4%	\$ 256.13	\$ 262.59	\$ 256.51	7.4%	6.3%																												
201502	78,577	1,2600	140,111	\$ 1.78	\$ 2.08	\$ 2.08	-3.6%	-12.8%		217,703	\$ 3.77	\$ 3.17	\$ 3.12	-7.9%	-5.1%	3,722	568	626	631	-0.2%	-3.0%	58.49	\$ 60.75	\$ 59.40	-7.7%	-2.1%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 20.05	\$ 20.31	\$ 19.95	2.5%	-3.3%	\$ 265.65	\$ 264.15	\$ 258.48	8.5%	6.8%																												
201503	78,661	1,2611	169,675	\$ 2.16	\$ 1.95	\$ 2.03	-24.1%	-6.6%		257,350	\$ 3.27	\$ 3.03	\$ 3.08	-16.8%	-7.0%	4,242	647	621	631	-1.0%	-2.7%	60.67	\$ 58.50	\$ 58.50	-15.9%	-4.4%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 20.36	\$ 20.23	\$ 19.90	0.4%	-3.9%	\$ 270.84	\$ 264.12	\$ 260.81	9.0%	7.3%																												
201504	78,184	1,2617	140,987	\$ 1.80	\$ 1.91	\$ 1.97	-23.3%	-10.7%		220,148	\$ 2.82	\$ 2.95	\$ 3.00	-17.3%	-10.1%	3,914	601	605	629	-2.1%	-2.8%	56.25	\$ 58.53	\$ 57.24	-15.6%	-7.5%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 19.98	\$ 20.23	\$ 19.73	-3.1%	-5.5%	\$ 262.31	\$ 266.40	\$ 263.11	10.6%	8.1%																												
201505	78,225	1,2616	161,941	\$ 2.07	\$ 2.01	\$ 1.98	-15.2%	-9.9%		242,004	\$ 3.10	\$ 3.06	\$ 3.01	-11.7%	-9.5%	3,952	606	618	625	-3.6%	-3.6%	61.39	\$ 59.47	\$ 57.80	-8.4%	-6.1%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 20.22	\$ 20.19	\$ 19.76	-3.0%	-5.0%	\$ 274.96	\$ 269.23	\$ 264.72	9.6%	8.4%																												
201506	78,937	1,2632	169,653	\$ 2.15	\$ 2.01	\$ 1.99	-7.0%	-8.9%		250,920	\$ 3.18	\$ 3.03	\$ 3.03	-5.3%	-8.1%	3,943	599	602	624	-4.4%	-3.1%	63.64	\$ 60.43	\$ 58.24	-0.9%	-5.2%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 20.53	\$ 20.24	\$ 19.83	-0.8%	-4.3%	\$ 265.26	\$ 267.33	\$ 264.21	5.2%	7.2%																												
201507	78,688	1,2633	156,660	\$ 1.99	\$ 2.07	\$ 2.01	8.2%	-7.6%		239,049	\$ 3.04	\$ 3.11	\$ 3.05	</																																																							

Mail\Brand Non-Formulary

Incurred Claims										Allowed Amount										Utilization										Allowed Cost/Rx (Excl. Disp. Fee)										Avg Dispensing Fee										Avg Copay										Avg Discount									
Date		Members	Demo/Factor	Incurred Claims	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Allowed Amount	Monthly PMPM	3-Month Avg PMPM	12-Month Avg PMPM	3 Month Trend	12 Month Trend	Rx Count	Util/1,000	3-Month Avg Util/1,000	12-Month Avg Util/1,000	3 Month Trend	12 Month Trend	Monthly Allowed Cost/Rx	3-Month Avg Cost/Svc	12-Month Avg Cost/Svc	3 Month Trend	12 Month Trend	Monthly Fee/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend	Monthly Copay/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend	Monthly Discount/Rx	3-Month Avg	12-Month Avg	3 Month Trend	12 Month Trend																												
201306		96,418	1.2497	193,380	\$ 2.01	\$ 2.00	\$ 1.98	0.6%	-12.8%	261,475	\$ 2.71	\$ 2.69	\$ 2.66	-0.1%	-16.0%	501	62	64	68	-15.3%	-28.0%	\$ 521.91	\$ 503.81	\$ 466.74	18.0%	16.6%	\$ -	\$ -	\$ 0.00	-100.0%	-55.2%	\$ 127.69	\$ 121.61	\$ 111.53	12.8%	3.6%	\$ 200.36	\$ 194.47	\$ 181.08	17.1%	14.5%																												
201307		94,640	1.2524	165,314	\$ 1.75	\$ 1.97	\$ 1.97	-1.7%	-11.4%	230,585	\$ 2.44	\$ 2.68	\$ 2.64	-1.0%	-14.2%	484	61	64	67	-14.7%	-26.1%	\$ 476.42	\$ 503.02	\$ 470.23	16.0%	16.2%	\$ -	\$ -	\$ 0.00	-100.0%	-96.2%	\$ 128.72	\$ 125.10	\$ 113.27	16.8%	5.3%	\$ 184.76	\$ 193.37	\$ 182.21	14.1%	14.1%																												
201308		93,781	1.2514	172,777	\$ 1.84	\$ 1.87	\$ 1.95	-7.7%	-10.3%	240,978	\$ 2.57	\$ 2.57	\$ 2.62	-5.1%	-12.4%	513	66	63	67	-14.6%	-24.2%	\$ 469.74	\$ 489.34	\$ 472.79	11.1%	15.6%	\$ -	\$ -	\$ 0.00	-100.0%	-96.2%	\$ 124.02	\$ 126.77	\$ 114.64	18.4%	6.7%	\$ 186.23	\$ 190.48	\$ 183.42	10.4%	13.9%																												
201309		93,020	1.2510	161,117	\$ 1.73	\$ 1.77	\$ 1.93	-11.2%	-9.5%	217,645	\$ 2.34	\$ 2.45	\$ 2.60	-8.7%	-11.1%	419	54	60	65	-16.9%	-22.7%	\$ 519.44	\$ 486.73	\$ 477.97	9.9%	15.1%	\$ -	\$ -	\$ 0.00	-100.0%	-96.1%	\$ 129.62	\$ 127.28	\$ 116.33	19.2%	8.5%	\$ 202.96	\$ 190.68	\$ 185.39	9.9%	13.5%																												
201310		92,418	1.2543	151,197	\$ 1.64	\$ 1.74	\$ 1.90	-13.6%	-9.6%	216,947	\$ 2.35	\$ 2.42	\$ 2.58	-10.1%	-10.3%	455	59	60	64	-17.9%	-21.5%	\$ 476.81	\$ 487.07	\$ 481.61	9.5%	14.2%	\$ -	\$ -	\$ 0.00	0.0%	-96.0%	\$ 136.51	\$ 129.81	\$ 118.91	21.8%	11.1%	\$ 182.63	\$ 190.10	\$ 186.74	9.9%	12.9%																												
201311		92,764	1.2544	160,974	\$ 1.74	\$ 1.70	\$ 1.86	-16.3%	-10.6%	225,163	\$ 2.43	\$ 2.37	\$ 2.54	-12.3%	-10.1%	419	54	56	63	-22.3%	-20.5%	\$ 537.38	\$ 510.25	\$ 487.13	12.9%	13.1%	\$ -	\$ -	\$ 0.00	0.0%	-96.0%	\$ 144.89	\$ 136.99	\$ 122.04	29.2%	14.2%	\$ 208.64	\$ 197.64	\$ 188.60	12.1%	11.8%																												
201312		94,443	1.2549	148,254	\$ 1.57	\$ 1.65	\$ 1.83	-18.4%	-10.6%	206,521	\$ 2.19	\$ 2.32	\$ 2.51	-14.0%	-9.6%	408	52	55	61	-23.5%	-20.4%	\$ 506.18	\$ 505.95	\$ 493.05	12.4%	13.6%	\$ -	\$ -	\$ -	-100.0%	-100.0%	\$ 134.81	\$ 138.71	\$ 124.69	31.5%	17.1%	\$ 198.49	\$ 196.18	\$ 191.16	12.3%	12.6%																												
201401		96,337	1.2491	138,638	\$ 1.44	\$ 1.58	\$ 1.80	-20.2%	-11.2%	194,949	\$ 2.02	\$ 2.21	\$ 2.47	-16.5%	-9.6%	382	48	51	60	-25.9%	-19.7%	\$ 510.34	\$ 518.31	\$ 496.33	12.8%	12.6%	\$ -	\$ -	\$ -	-100.0%	-100.0%	\$ 127.87	\$ 136.11	\$ 126.06	26.3%	17.6%	\$ 202.89	\$ 203.40	\$ 192.75	13.8%	12.3%																												
201402		97,483	1.2505	134,078	\$ 1.38	\$ 1.46	\$ 1.74	-24.8%	-13.7%	187,950	\$ 1.93	\$ 2.05	\$ 2.40	-21.3%	-11.4%	380	47	49	58	-26.4%	-19.9%	\$ 494.61	\$ 503.78	\$ 495.52	6.9%	10.7%	\$ -	\$ -	\$ -	-100.0%	-100.0%	\$ 133.74	\$ 132.20	\$ 127.70	19.5%	18.5%	\$ 197.43	\$ 199.58	\$ 193.16	10.1%	10.9%																												
201403		96,469	1.2536	164,270	\$ 1.70	\$ 1.51	\$ 1.73	-20.9%	-12.3%	219,614	\$ 2.28	\$ 2.08	\$ 2.39	-18.7%	-10.2%	382	48	47	57	-26.2%	-20.2%	\$ 574.91	\$ 526.67	\$ 504.68	10.2%	12.5%	\$ -	\$ -	\$ -	0.0%	-100.0%	\$ 139.51	\$ 133.71	\$ 129.69	16.8%	19.6%	\$ 224.10	\$ 208.16	\$ 196.77	12.8%	12.9%																												
201404		94,693	1.2578	129,621	\$ 1.37	\$ 1.48	\$ 1.69	-21.9%	-14.3%	179,796	\$ 1.90	\$ 2.04	\$ 2.34	-20.2%	-11.8%	363	46	47	55	-26.4%	-21.0%	\$ 495.31	\$ 522.10	\$ 506.41	8.5%	11.6%	\$ -	\$ -	\$ -	0.0%	-100.0%	\$ 134.59	\$ 135.97	\$ 131.20	17.0%	20.2%	\$ 199.60	\$ 207.18	\$ 197.76	11.1%	12.1%																												
201405		92,502	1.2582	132,663	\$ 1.43	\$ 1.50	\$ 1.63	-17.7%	-22.2%	179,950	\$ 1.95	\$ 2.04	\$ 2.26	-21.8%	-15.1%	339	44	46	53	-29.2%	-22.9%	\$ 530.83	\$ 534.47	\$ 507.75	10.5%	10.2%	\$ -	\$ -	\$ -	0.0%	-100.0%	\$ 138.76	\$ 137.63	\$ 132.98	16.7%	20.8%	\$ 207.28	\$ 210.63	\$ 198.76	12.4%	11.0%																												
201406		90,873	1.2590	132,852	\$ 1.46	\$ 1.42	\$ 1.59	-28.9%	-19.9%	180,316	\$ 1.98	\$ 1.94	\$ 2.20	-27.8%	-17.3%	324	43	44	52	-30.9%	-24.2%	\$ 556.53	\$ 526.38	\$ 509.53	4.5%	9.2%	\$ -	\$ -	\$ -	0.0%	-100.0%	\$ 137.79	\$ 136.98	\$ 133.84	12.6%	20.0%	\$ 216.31	\$ 207.41	\$ 199.76	6.7%	10.3%																												
201407		88,771	1.2583	137,047	\$ 1.54	\$ 1.48	\$ 1.57	-24.9%	-20.1%	186,446	\$ 2.10	\$ 2.01	\$ 2.17	-25.0%	-17.9%	342	46	44	50	-30.7%	-25.1%	\$ 545.16	\$ 543.99	\$ 515.50	8.1%	9.6%	\$ -	\$ -	\$ -	0.0%	-100.0%	\$ 139.29	\$ 138.63	\$ 134.76	10.8%	19.0%	\$ 217.09	\$ 213.53	\$ 202.55	10.4%	11.2%																												
201408		88,820	1.2579	147,099	\$ 1.66	\$ 1.55	\$ 1.55	-16.8%	-20.1%	195,415	\$ 2.20	\$ 2.09	\$ 2.14	-18.6%	-18.5%	341	46	45	49	-28.7%	-26.6%	\$ 573.06	\$ 558.27	\$ 524.97	14.1%	11.0%	\$ -	\$ -	\$ -	0.0%	-100.0%	\$ 136.74	\$ 137.94	\$ 136.12	8.8%	18.7%	\$ 221.30	\$ 218.26	\$ 205.79	14.6%	12.2%																												
201409		87,063	1.2602	134,807	\$ 1.55	\$ 1.58	\$ 1.54	-10.8%	-20.2%	179,869	\$ 2.07	\$ 2.12	\$ 2.11	-13.3%	-18.7%	308	42	45	48	-25.8%	-26.6%	\$ 583.99	\$ 566.83	\$ 529.58	16.5%	10.8%	\$ -	\$ -	\$ -	0.0%	-100.0%	\$ 141.07	\$ 138.96	\$ 137.08	9.2%	17.8%	\$ 222.08	\$ 220.09	\$ 207.19	15.4%	11.8%																												
201410		84,393	1.2561	122,947	\$ 1.46	\$ 1.56	\$ 1.52	-10.5%	-19.8%	162,297	\$ 1.92	\$ 2.07	\$ 2.08	-14.6%	-19.2%	281	40	43	46	-28.1%	-27.7%	\$ 577.57	\$ 578.04	\$ 538.37	18.7%	11.8%	\$ -	\$ -	\$ -	0.0%	-100.0%	\$ 140.58	\$ 139.34	\$ 137.37	7.3%	15.5%	\$ 228.10	\$ 223.61	\$ 211.18	17.6%	13.1%																												
201411		83,933	1.2553	102,736	\$ 1.22	\$ 1.41	\$ 1.48	-17.0%	-20.5%	142,536	\$ 1.70	\$ 1.90	\$ 2.02	-20.0%	-20.4%	282	40	41	45	-26.6%	-27.7%	\$ 505.45	\$ 556.49	\$ 536.22	9.1%	10.1%	\$ -	\$ -	\$ -	0.0%	-100.0%	\$ 134.80	\$ 138.88	\$ 136.43	1.4%	11.8%	\$ 197.20	\$ 215.97	\$ 210.49	9.3%	11.6%																												
201412		80,143	1.2529	135,039	\$ 1.68	\$ 1.45	\$ 1.49	-18.7%	-18.7%	174,730	\$ 2.18	\$ 1.93	\$ 2.02	-16.8%	-19.4%	295	44	41	45	-24.7%	-26.9%	\$ 592.31	\$ 558.93	\$ 543.39	10.5%	10.2%	\$ -	\$ -	\$ -	0.0%	-100.0%	\$ 129.13	\$ 134.75	\$ 136.06	-2.9%	9.1%	\$ 232.41	\$ 219.43	\$ 213.31	11.9%	11.6%																												
201501		79,355	1.2589	89,607	\$ 1.13	\$ 1.34	\$ 1.47	-14.9%	-18.4%	120,693	\$ 1.52	\$ 1.80	\$ 1.98	-18.6%	-19.7%	222	34	39	44	-23.0%	-27.1%	\$ 543.66	\$ 548.13	\$ 546.67	5.8%	10.1%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 128.93	\$ 131.08	\$ 136.46	-3.7%	8.3%	\$ 210.64	\$ 213.93	\$ 214.19	5.2%	11.1%																												
201502		78,577	1.2600	79,778	\$ 1.02	\$ 1.28	\$ 1.44	-12.5%	-17.2%	107,448	\$ 1.37	\$ 1.69	\$ 1.94	-17.3%	-19.2%	199	30	36	42	-25.9%	-27.4%	\$ 539.94	\$ 562.67	\$ 551.69	11.7%	11.3%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 128.58	\$ 128.91	\$ 136.32	-2.5%	6.7%	\$ 208.98	\$ 219.15	\$ 215.64	9.8%	11.6%																												
201503		78,661	1.2611	71,384	\$ 0.91	\$ 1.02	\$ 1.38	-32.4%	-20.5%	96,480	\$ 1.23	\$ 1.37	\$ 1.85	-33.9%	-22.3%	196	30	31	41	-33.8%	-28.1%	\$ 492.25	\$ 526.13	\$ 545.81	-0.1%	8.2%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 122.44	\$ 126.76	\$ 135.19	-5.2%	4.2%	\$ 195.00	\$ 205.14	\$ 213.56	-1.5%	8.5%																												
201504		78,184	1.2617	80,028	\$ 1.02	\$ 0.98	\$ 1.35	-33.8%	-20.2%	105,555	\$ 1.35	\$ 1.31	\$ 1.81	-35.4%	-22.5%	191	29	30	39	-36.2%	-28.8%	\$ 552.65	\$ 528.13	\$ 551.73	1.2%	8.9%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 118.55	\$ 123.26	\$ 134.30	-9.4%	2.4%	\$ 229.93	\$ 211.13	\$ 216.03	1.9%	9.2%																												
201505		78,225	1.2616	70,707	\$ 0.90	\$ 0.94	\$ 1.31	-37.2%	-19.9%	96,177	\$ 1.23	\$ 1.27	\$ 1.75	-37.9%	-22.3%	190	29	29	38	-35.8%	-28.5%	\$ 506.20	\$ 516.83	\$ 551.23	-3.3%	8.6%	\$ -	\$ -	\$ -	0.0%	0.0%	\$ 118.39	\$ 119.82	\$ 132.87	-12.9%	-0.1%	\$ 206.56	\$ 210.37	\$ 216.40	-0.1%	8.9%																												
201506		78,937	1.2632	64,509	\$ 0.82	\$ 0.91	\$ 1.25	-35.6%	-20.9%	87,967	\$ 1.11	\$ 1.23	\$ 1.68	-36.6%	-23.5%	191	29	29	37	-34.1%	-28.5%	\$ 460.56	\$ 506.47	\$ 544.97	-3.8%																																												

KEYSTONE HEALTH PLAN CENTRAL, INC.

Question and Answer Small Group Rates Effective January 1, 2017

Please note that all Q&A exhibits referenced below are found in
“SG_16-45_Initial_KHP_HMO_Q&AExhibits_Supporting_20160629.xlsx”

Questions from Insurance Department:

Question 1. Regarding broker commissions:

- (a) Under what circumstances and in what geographic locations will commissions be paid?,
- (b) Are commissions paid for SEP?,
- (c) Provide a copy of the broker agreement - current and 2017,
- (d) Show the calculation of the average commission - current and 2017.

When responding to this data call, you may provide a redacted version of this response as it contains proprietary information. Please place the redacted and non-redacted responses in separate sections of the Supporting Documentation tab in SERFF.

Answer 1.

- (a) KHPC pays commissions for enrollment received in all geographic areas.
- (b) KHPC does currently pay commission for SEP. But KHPC will not participate in SHOP in 2017.
- (c) Attached please find the 1/1/2016 copy of the broker agreement – both redacted and un-redacted versions. The 2016 agreement will continue for 2017. Files are as follows:
 - a. Agent Agreement: “Ind_16-45_Initial_KHP_HMO_AgentAgreement_Supporting_CONF_20160629.pdf”
 - b. Redacted Agent Agreement: “Ind_16-45_Initial_KHP_HMO_AgentAgreementRedacted_Supporting_20160629.pdf”
 - c. Preferred Producer Master Agreement: “Ind_16-45_Initial_KHP_HMO_PPMA_Supporting_CONF_20160629.pdf”
 - d. Redacted Preferred Producer Master Agreement: “Ind_16-45_Initial_KHP_HMO_PPMARedacted_Supporting_20160629.pdf”
- (d) Please see Q&A Exhibit 1 for the calculation of the average broker commission.

Question 2. Please be advised that each time the URRT is changed in SERFF, the URRT in HIOS must also be updated. Please acknowledge your understanding and certify that you are in compliance.

Answer 2. I acknowledge the requirement to change the URRT in HIOS each time a change is made in SERFF. KHPC is in compliance.

Question 3. Does this filing propose Service Area changes relative to the last approved filing? If so, please discuss.

Answer 3. No service area changes are being proposed with this filing.

Question 4. Please show quantitatively the derivation of the trend assumptions for each benefit category as shown in Table 3. Please include the sources and source claims data.

Answer 4. Trend is calculated using:

- Vendor Physician Cost Model
- Internal Hospital Contracting Model
- Internal Prescription Drug Trend Model
- Medical utilization estimates reviewed by CBC's Chief Medical Officer

The medical cost models use best estimates of Capital BlueCross (CBC)'s future contracting increases with physicians and hospitals. The models use cost estimates based on varying contract effective dates by physician and hospital. All facilities and providers are considered in this modeling effort (i.e. acute and non-acute, network and non-network, inpatient and outpatient, in- area and out-of-area). From there, a monthly anticipated cost (assuming static utilization) summary is produced which can be used in projecting future claims costs. Cost trends are determined at the CBC book of business level for all commercial business.

Utilization trend takes into account the following considerations:

- Historical Data: Please refer to Q&A Exhibit 2a for KHPC Group Commercial (groups with less than 100 contracts) historical trends.
- Changes in place of service (e.g. continued migration of inpatient stays to outpatient setting).
- Impact of Transitional policies: With the continuation of transitional policies into 2017, CBC expects lower-than-average utilizers to remain in transitional policies, causing single-risk-pool utilization trends to be positive.

Other Trend Considerations:

- Intensity of medical services rendered: Intensity is defined as the amount of inputs used to provide each unit of service. This can best be seen in an example:

Year 2015		
<u>Type of Service</u>	<u>Units</u>	<u>Cost per Unit</u>
X-Ray	1	\$200
MRI	1	\$5,000
Total	2	\$5,200

Year 2016		
<u>Type of Service</u>	<u>Units</u>	<u>Cost per Unit</u>
X-Ray	0	\$200
MRI	2	\$5,000
Total	2	\$10,000

Total Annual Trend	92%
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- **Benefit Buydowns:** Benefit buydowns, i.e. movement to leaner benefits, consistently accounts for -1 to -2 percent of overall claims trend. Buydowns must be removed from pricing trend because they are factored into rate development by the Benefit Change Factor. See Rate Development Exhibit G.

The Prescription Drug model considers the following trend components:

- Price Inflation
- Contract Pricing
- Member Cost-Sharing
- Units per Script
- Brand/Generic Mix
- Therapeutic Mix
- Cost per Script
- Utilization

Please refer to Q&A Exhibit 2b for Group Commercial (groups with less than 100 contracts, KHPC and CBC subsidiaries) historical prescription drug trends.

Q&A Exhibit 2 shows KHPC's best estimate on future trends based on the factors listed above. The pricing trend proposed in this filing is slightly less.

[REDACTED]

Sincerely,

[REDACTED]

[REDACTED], ASA, MAAA
 Manager, Actuarial Services
 Capital BlueCross

