

State: Pennsylvania **Filing Company:** Capital Advantage Insurance Company
TOI/Sub-TOI: H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only
Product Name: Rates - CAIC Small Group PPO
Project Name/Number: /

Supporting Document Schedules

Satisfied - Item:	ACA Public Rate Filing PDF
Comments:	
Attachment(s):	SG_20-40_Initial_CAIC_PPO_PublicFiling01_Supporting_20200720.pdf SG_20-40_Initial_CAIC_PPO_PublicFiling02_Supporting_20200720.pdf SG_20-40_Initial_CAIC_PPO_PublicFiling03_Supporting_20200720.pdf SG_20-40_Initial_CAIC_PPO_PublicFiling04_Supporting_20200720.pdf
Item Status:	
Status Date:	



May 19, 2020

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

**Re: Capital Advantage Insurance Company
Small Group Rates
Filing No 20-40
TOI Code: H15G Group Health – Hospital/Surgical/Medical Expense
Sub-TOI Code: H15G.003 Small Group Only
Filing Type: Rate**

Dear Ms. Gray:

By this filing Capital BlueCross, on behalf of its wholly owned subsidiary Capital Advantage Insurance Company, submits to the Department Small Group Rates effective January 1, 2021.

The following is a summary of the rate filing:

- Company Name: Capital Advantage Insurance Company (CAIC)
- NAIC: 41203
- Market: Small Group
- On/Off Exchange: Off Exchange
- Effective Date: 1/1/2021
- Average Rate Change: -1.1%
- Range of Requested Rate Change: -1.1% to -1.1%
- Total additional annual revenue generated from the proposed rate change: \$(6,415)
- Product: PPO
- Rating Areas: 6,7,9
- Metal Levels: Gold
- Current Covered Lives and Policyholders: 70/49
- 2021 Number of Plans: 1
- 2020 Number of Plans and Change: 1/No Plan Changes
- Contract Form #: C21-CAIC-SPG
- Form Filing SERFF #: CABC-132352669
- Binder SERFF #: CABC-PA21-125097622
- HIOS Issuer ID: 82795
- HIOS Submission Tracking Number: 82795-1735063902116677639

Harrisburg, PA 17177 | capbluecross.com

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

If you have any questions regarding this filing, please call me at [REDACTED] (or via email at [REDACTED]) or [REDACTED] at [REDACTED] ([REDACTED]). Thank you for your assistance in this matter.

Sincerely,

[REDACTED]

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

Enclosures

cc: [REDACTED], FSA, MAAA, Senior Director, Actuarial Services
[REDACTED], ASA, MAAA, Vice President and Chief Actuary, Actuarial Services
[REDACTED], Associate General Counsel

Attachment I

Rate Change Summary

Capital Advantage Insurance Company (CAIC) – Small Group Plans

Rate request filing ID # CABC-132352732 - This document is prepared by the insurance company submitting the rate filing as a consumer tool to help explain the rate filing. It is not intended to describe or include all factors or information considered in the review process. For more information, see the filing at

<http://www.insurance.pa.gov/Consumers/ACARelatedFilings/>

Overview

Initial requested average rate change:	-6.0% ¹
Revised requested average rate change:	N/A ¹
Range of requested rate change:	-6.0% to -6.0%
Effective date:	1/1/2021
Mapped Members:	70
Available in:	Rating Areas 6, Rating Area 7, and Rating Area 9

Key information

Jan. 2019-Dec. 2019 financial experience

Premiums	\$658,354
Claims	\$375,336
Administrative expenses	\$51,140
Taxes & fees	\$38,573
Company made (after taxes)	\$193,305

How it plans to spend your premium

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

Claims:	85.17%
Administrative:	10.35%
Taxes & fees:	2.48%
Profit:	2.00%

The company expects its annual medical costs to increase **6.65%**.

Explanation of requested rate change

Favorable Experience Net Risk Adjustment: -10%
Changes to Induced Demand Calculation: 2%
Less migration of groups from ACA to ASO arrangements: -3%
Suspension of the Health Insurer Fee: -2%
Future Cost and Utilization: 7%

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



July 20, 2020

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

**Re: Capital Advantage Insurance Company
Small Group Rates
Filing No 20-40
TOI Code: H15G Group Health – Hospital/Surgical/Medical Expense
Sub-TOI Code: H15G.003 Small Group Only
Filing Type: Rate**

Dear Ms. Gray:

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The following is a summary of the rate filing:

- Company Name: Capital Advantage Insurance Company (CAIC)
- NAIC: 41203
- Market: Small Group
- On/Off Exchange: Off Exchange
- Effective Date: 1/1/2021
- Average Rate Change: -6.0%
- Range of Requested Rate Change: -6.0% to -6.0%
- Total additional annual revenue generated from the proposed rate change: \$(35,180)
- Product: PPO
- Rating Areas: 6,7,9
- Metal Levels: Gold
- Current Covered Lives and Policyholders: 70/49
- 2021 Number of Plans: 1
- 2020 Number of Plans and Change: 1/No Plan Changes
- Contract Form #: C21-CAIC-SPG
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Sincerely,

[REDACTED]

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

Enclosures

cc: [REDACTED], FSA, MAAA, Senior Director, Actuarial Services
[REDACTED], ASA, MAAA, Vice President and Chief Actuary, Actuarial Services
[REDACTED], Associate General Counsel

CAPITAL ADVANTAGE INSURANCE COMPANY, INC.

ACTUARIAL MEMORANDUM

Small Group Rates Effective January 1, 2021

General Information

Company Information

- Company Legal Name: Capital Advantage Insurance Company – CAIC
- State: PA
- HIOS Issuer ID: 82795
- Market: Small Group
- Effective Date: 1/1/2021

PID Company Information

- Company Name: Capital Advantage Insurance Company (CAIC)
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Company Contact Information

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

Scope and Purpose

By this filing, Capital Advantage Insurance Company (CAIC), a subsidiary of Capital BlueCross (CBC), submits rates for products to be made available to all small groups effective January 1, 2021.

Rate History and Proposed Variations in Rate Changes

Market	Company	Effective Date	SERFF #	Annual Increase
Small Group	CAIC	1/1/2017	CABC-130539615	2.3%
Small Group	CAIC	7/1/2017	CABC-130954665	6.1%
Small Group	CAIC	1/1/2018	CABC-131022120	4.7%
Small Group	CAIC	1/1/2019	CABC-131455106	16.2%
Small Group	CAIC	1/1/2020	CABC-131921812	13.2%
Small Group	CAIC	7/1/2020	CABC-132294744	8.6%

Average Rate Change

CAIC is proposing an aggregate annual -6.0% rate change. The rate change is calculated in PA Rate Exhibits Part III, Table 10, cell AC15.

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

- Favorable Experience Net Risk Adjustment: -10%
- Changes to Induced Demand Calculation: 2%
- Less migration of groups from ACA to ASO arrangements: -3%
- Suspension of the Health Insurer Fee: -2%
- Future Cost and Utilization: 7%

Please note the filing contains a COVID-19 adjustment of 1.0.

Rate Change Disclosure

As discussed with the Department on 4/3/2020, CBC inadvertently released Q2 2020 Small Group renewals and sold new groups using Q1 2020 rates. This administrative error does not impact the rate change calculation, as the 2021 calculation is Q1 2021 over Q1 2020. But please note that Q2 2021 groups would receive a -2.5% aggregate rate change without the

administrative error, but instead will see -1.1% on average. The average is calculated across all CBC subsidiaries – CAAC, CAIC and KHPC.

Membership

Membership is shown in PA Rate Exhibits Part I, Table 1. The average age is 39.

Benefit Changes 2020-2021

A summary of proposed 2021 benefits is included in Exhibit A.

There are several benefit changes being implemented in 2021. All benefit changes comply with the uniform modification of coverage standards described in 45 CFR 147.106(e). Any plan with a benefit change that did not meet the uniform modification of coverage standard was terminated, and a new plan was created in its place. Benefit changes by plan are listed in Exhibit B, highlighted in yellow.

Experience Period Premium and Claims

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

Base Experience Period: The base experience period (BEP) includes completed fee-for-service paid and incurred claims for dates of service between January 1, 2019 and December 31, 2019.

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

Paid Through Date: Claims in the BEP are paid through February 29, 2020

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

Allowed and Incurred Claims in BEP:

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

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

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

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

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

Risk Adjustment in BEP: Risk adjustment amounts in the BEP are equal to corporate 2019 budgeted amounts and will be updated once finalized transfer payments are available.

Loss Ratio in BEP: Loss ratio is 57.01%

Credibility of Data

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

1. The demographics of members buying PPO and other products are similar.
2. Cost and utilization between PPO and other products are similar.

3. Medical policy between PPO and other products are almost identical, with the exception of referrals and no out-of-network benefit on HMO.

The credibility manual is the combination of CAIC, Capital Advantage Assurance Company (CAAC), and Keystone Health Plan Central (KHPC) HMO data. The credibility manual BEP includes completed fee-for-service paid and incurred claims and capitation for dates of service between January 1, 2019 and December 31, 2019. All data is trended and benefit-adjusted in the same manner as the experience data (same projection factors and trend).

Trend Identification

Trend: 6.65%

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

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

1. Base Cost/ Change in hospital and physician contracting: The contracted increase in reimbursements to hospitals and physicians is the basis of cost trends. CBC uses the following to project future costs:
 - a. Vendor Physician Cost Model and Internal Hospital Contracting Model
 - i. The medical cost models use best estimates of Capital BlueCross (CBC)'s future contracting increases with physicians and hospitals. The models use cost estimates based on varying contract effective dates by physician and hospital. All facilities and providers are considered in this modeling effort (i.e. acute and non-acute, network and non-network, inpatient and outpatient, in- area and out-of-area). From there, a monthly anticipated cost (assuming static utilization) summary is produced which can be used in projecting future claims costs. Cost trends are determined at the CBC book of business level for all commercial business.
 - b. Internal Prescription Drug Trend Model
 - i. Price Inflation
 - ii. Contract Pricing
 - iii. Member Cost-Sharing
 - iv. Units per Script
 - v. Brand/Generic Mix
 - vi. Therapeutic Mix
 - vii. Cost per Script
 - viii. Pipeline (new drugs)
2. Utilization Considerations:
 - a. Intensity of medical services rendered

- b. Changes in place of service (e.g. continued migration of inpatient stays to outpatient setting)
 - c. Further migration from brand prescription drugs to generic prescription drugs
 - d. Favorable impacts of value based benefits designs
 - e. Medical utilization estimates reviewed by CBC's Chief Medical Officer
3. Leveraging: The trend model is based on allowed cost increases. Paid claims trend at a higher rate than allowed due to leveraging. Leveraging is the impact of static cost-share, such as deductibles and copays, to the paid trend.
 4. Intensity: Measure of cost increase due to change in treatment sophistication. An example is migration from x-rays to MRIs at significantly higher cost.
 5. Underwriting Cycle: The underwriting cycle is defined as the tendency to swing between profitable and unprofitable periods over time. The underwriting cycle is exacerbated partly by pricing performed with incomplete information as to the level of current experience trends. A reaction delay occurs, as carriers tend to rely on measurements of past experience in developing current pricing assumptions. As a result, carriers are often increasing their pricing trends when actual experience trends have begun to decline, and decreasing their pricing trends actual trends are increasing. CBC strives to mitigate the underwriting cycle by keeping trends consistent through times of increasing and decreasing claim cost and utilization.

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

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

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

Rate Development & Change

Projection Factors

Changes in Morbidity: Found in URRT Worksheet 1, "Morbidity Adjustment", and PA Rate Exhibits, Table 5. There are 2 components to the morbidity factor: 1. Movement to ASO and 2. CAIC morbidity compared to CAAC (majority of BEP).

1. CBC projects 1.6% change in morbidity due to the presumed statewide movement of small group PPACA business to ASO. The morbidity factor is based on the following analysis:

1. Gather BEP medical and Rx claims, membership and premium for all PPACA groups active during the period.
2. Develop Loss Ratio A using data from (1)

3. Gather BEP medical and Rx claims, membership and premium for only PPACA groups still active in a PPACA product as of 3/31/2020
4. Develop Loss Ratio B using data from (2)
5. Loss Ratio B/Loss Ratio A – 1 = 1.6%
6. 1.6% is applied in rating

Because CBC is competing against statewide carriers in the SG ASO market, we assume this transition is occurring statewide and will continue 2020-2021. Further, the statewide transition translates to a worsening PPACA risk pool, not unique to CBC. Therefore, we project no explicit change to CBC risk adjustment transfer amounts from this migration.

2. In addition to the 1.6% morbidity change, CAIC is also applying a factor of 1.07 to reflect the difference is projected Plan Liability Risk Score (PLRS) between CAIC and its subsidiary, CAAC, which underwrites the vast majority of the BEP experience. This assumption will need to be updated once 2019 risk adjustments are finalized.

Changes in Benefits: Benefit changes are not applied to allowed claims as allowed should stay consistent from 2019 to 2021. Benefit changes are applied in the development of future incurred claims, due to changes in member cost-share. This calculation is shown in Exhibit D, and applied in Exhibit G. The manual cost PMPMs are developed from CBC’s internal benefit relativity model, discussed in the Plan Adjusted Index Rate section below. The benefit change is equal to member-month weighted average projected manual PMPM divided by member-month weighted average manual PMPM in the BEP. This process is further discussed in the Paid-to-Allowed section below.

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

Changes in Network: No Network change is applied.

Other Adjustments: An additional adjustment is applied to reflect pharmacy contracting savings in the projection period. Capital BlueCross (CBC) has contracted a new Pharmacy Benefit Manager (PBM) effective 1/1/2020, with calculated savings (combined price and Rx rebate savings) of 5% over CBC’s current contract. The other adjustment factor is calculated as:

Other Adjustment

$$= ([Rx Savings Factor] - 1) \times [BEP Allowed Prescription Drug PMPM] \div [BEP Allowed Total PMPM] + 1$$

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

Index Rate

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

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

To calculate the projected index rate:

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

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

Paid to Allowed Ratio

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

Projected Paid and Incurred Claims are calculated as follows:

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

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

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

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

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

Projected Paid and Incurred Claims PMPM

$$= [\text{Trended Claim PMPM}] \times [\text{Benefit Adjustment}] \\ \times [\text{Morbidity Adjustment}] \times [\text{Other Adjustment}]$$

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

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

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

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

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

- 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 PPO 2000 and PPO 1000 must be less than \$1000.
 - ii. Adjustments for plan designs that fall outside of the actuarial cost model.

- a. So the *Projected Claims PMPM by Benefit* is:

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

- b. And to arrive at the *Total Projected Claims PMPM*, CAIC assumes a distribution of members across the benefit plans being offered in 2020. 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*. And see Exhibit L for the plan-level projected incurred amount development.

Market Adjusted Index Rate

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

$$\begin{aligned} & [\textit{Market Adjusted Index Rate}] \\ & = ([\textit{Index Rate}] \times [\textit{Paid to Allowed Ratio}] \\ & \quad - [\textit{Projected Incurred Reinsurance Recoveries}] \\ & \quad - [\textit{Projected Incurred Risk Adjustment PMPM}] \\ & \quad + [\textit{Exchange Fees PMPM}]) \div [\textit{Paid to Allowed Ratio}] \end{aligned}$$

Projected Incurred Risk Adjustments PMPM:

Relevant to 2021 pricing is the impact of Commercial Risk Adjustment (CRA) payment transfers that are expected to be earned in 2021. 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. 2018-2019 risk adjustment results
5. Market improvement in coding risk: CBC's ACA book of business has had a churn rate that makes a multi-year perspective of member diagnosis and risk very challenging. Because closing gaps in care and coding, and a myriad of other risk adjustment functions require more than a single year of data to facilitate an accurate depiction of risk, it is believed that CBC is disadvantaged in the market. This will drive CBC's relative risk to the market down over time.

Please note that corporate budgeted amounts are used in the BEP. While CBC has done additional work to project 2020/2021 CRA expectations, those calculations will be finalized once 2019 CRA results are released, and a detailed calculation will be provided at that time. At the time of the initial filing, a placeholder is being used, reflecting best estimates to date.

Projected Incurred Reinsurance Recoveries:

Reinsurance does not apply to the small group market.

Exchange Fee PMPM:

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

The exchange fee PMPM is calculated as:

$$\begin{aligned} \text{Exchange Fee PMPM} \\ &= [\text{Avg 2021 On - Exchange Premium PMPM}] \times [\% \text{ Members On} \\ &\quad - \text{Exchange}] \end{aligned}$$

Where

$$\begin{aligned} [\text{Avg 2021 On - Exchange Premium PMPM}] \\ &= [\text{Avg 2020 On - Exchange Premium PMPM}] \times (1 \\ &\quad + [\text{Avg Proposed Rate Change}]) \end{aligned}$$

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

Retention Items

Administrative Expense Load:

1. Risk Adjustment User Fee: To fund the HHS-risk adjustment program, issuers will remit to HHS a fee of \$0.19 PMPM. The Risk Adjustment Fee PMPM is included in URRT Worksheet 1, URRT Worksheet 2, “Administrative Expense”, and PA Rate Exhibits Table 6.
2. Administrative Expense: Calculated using an allocation method from CBC’s Finance department, and trended to the rating period. Costs are allocated according to results reported through a company-wide questionnaire. On an annual basis, each cost center within the company completes a questionnaire listing the distribution of costs (in percentage terms) by product as well as by market segment. For example, the questionnaire will ask what percentage of time is spent on PPO versus HMO versus Drug versus Medicare. And separately will ask what percentage of time is spent on large group, small group, individual, and government programs. Using those distributions, all costs needed to perform the business are allocated to the proper market segments and lines of business. The administrative expense applied in the rate development is the total expense allocated to CBC small group products. Administrative expenses are included in URRT Worksheet 2, “Administrative Expense”, and PA Rate Exhibits Table 6. Expense as a percentage of premium vary by plan because a fixed dollar admin PMPM is applied to each plan.
 - a. Value-Based Benefits (VBB): Standard with each plan, Capital BlueCross includes wellness incentives to maximize the likelihood that consumers make positive behavioral changes, which lead to better health, and curbed health care costs for employers and employees alike. The incentive is as follows:
 - i. Complete biometric screening and receive a gift card.
 - ii. Meeting biometric measure or finish online coaching program and receive a gift card reward.
 - iii. The wellness program is administered through a vendor and costs are based on vendor fees, anticipated participation, and reward card amounts.
 - iv. Fees are included in overall administrative expense fee discussed above.
 - v. Included in URRT Worksheet 2, “Administrative Expense”, and PA Rate Exhibits Table 6.
3. Broker Expense: Calculated based on CBC’s explicit per contract broker fee. Broker Expense is included in URRT Worksheet 2, “Administrative Expense”, and PA Rate

Exhibits Table 6. Brokers are paid on new business and renewals the same commission rate for all geographic locations, enrollment dates, and metal levels. The 2020 broker commission schedule is yet to be finalized. Attached please find the 1/1/2019 copy of the broker agreement – redacted version. Files are as follows:

- a. Redacted Standard Producer Master Agreement: “SG_20-40_Initial_CAIC_PPO_SPMABrokerGroupRedacted_Supporting_20200519.pdf”
 - b. Redacted Preferred Producer Master Agreement: “SG_20-40_Initial_CAIC_PPO_PPMABrokerGroupRedacted_Supporting_20200519.pdf”
4. Additional Quality Improvement: The Final Notice of Benefit and Payment Parameters (NBPP) for 2020 finalized the rule to allow issuers to apply a standard 0.8% of premium for quality improvement (QI) measures in the MLR calculation. Additional QI amounts applied in rating equal 0.4%. Included in URRT Worksheet 2, “Administrative Expense”, and PA Rate Exhibits Table 6.

Profit (or Contribution to Surplus) & Risk Margin:

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

Taxes and Fees:

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

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

Plan Adjusted Index Rates

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

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

1. Actuarial Value and Cost Sharing adjustment: The Actuarial Value and Cost Sharing Adjustment is determined using CAIC’s actuarial cost model. CAIC uses an actuarial cost model to measure the impact of cost-sharing designs on cost and utilization amounts by service category. The cost model shows frequency per 1,000 per year by type of service (IP, OP, Professional), and allowed cost per service for each of the same types of service, normalized to a \$0 office visit copayment and a \$25 ER copayment. Given a particular benefit design (for example, \$20 office visit copayment), utilization is adjusted from the benchmark based on assumed utilization change factors, and cost per service is reduced by the copayment or coinsurance per service. Cost and utilization are multiplied together to derive a claim PMPM by service, summed for all services. The impact of global deductible,

coinsurance, and out-of-pocket max is then measured based on CPDs, where the value of services that apply to the CPDs adjusts the level of the curve, as well as global utilization adjustments.

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

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

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

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

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

Calibrated Plan Adjusted Index Rates

Age Curve Calibration: The average age factor is calculated by taking the member-weighted average of current small group enrollment by age in CBC. Age factors are applied in accordance with CMS's Standard Age Curve. The age calibration factor is adjusted for contracts with greater than three children under the age of 21. Please see file *SG_20-40_Initial_CAIC_PPO_List-Billed_Supporting_20200519.xlsx* for the calculation.

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

Geographic factors are unchanged from 2020.

Tobacco Factor Calibration: Tobacco factor not applied.

The calibration is:

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

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

The calibration factors and development are found on Exhibit N.

Consumer Adjusted Premium Rate Development

The Consumer Adjusted Premium Rate is developed as follows:

1. Member-Level Consumer Adjusted Premium Rate:

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

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

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

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

AV Metal Values

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

See AV Screenshots included with the submission.

AV Pricing Values

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

Projected Loss Ratio

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

Membership Projection

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

Attachments and Examples

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

PA Rate Exhibits Part I through Part V

Table 8

Exhibit A – Benefit Summary

Exhibit B – Benefit Change Summary
Exhibit C – Benefit Categories
Exhibit D – Benefit Mix
Exhibit E – Trend
Exhibit F – URRT
Exhibit G – Paid-to-Allowed Development
Exhibit H – Retention
Exhibit I – Projected Loss Ratio
Exhibit J – Index Rate
Exhibit K – Market Adjusted Index Rate
Exhibit L – Rate Development by Plan
Exhibit M – Plan Adjusted Index Rates
Exhibit N – Calibration
Exhibit O – Rating Factors
Exhibit P – Quarterly Base Rates
Exhibit Q – Morbidity Factor

Broker Contracts
Actuarial Value Screenshots
List-Billed Data
Extended OEP and Covid-19 Estimates

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 were calculated in accordance with actuarial standards of practice.
4. The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans, and in accordance with CFR 156.135(b)(2) as necessary. For any plan requiring an alternative method, the development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for benefits that deviate substantially from the parameters of the AVC and have a material impact on the actuarial value.
 - a. The analysis was
 - i. conducted by a member of the American Academy of Actuaries, and
 - ii. performed in accordance with generally accepted actuarial principles and methods.
5. Geographic area rating factors reflect only differences in the costs of delivery and not differences due to population morbidity.
6. All factor, benefit and other changes from the prior approved filing have been disclosed in the actuarial memorandum.
7. New plans are not considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106.
8. The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2021 Rate Filing Justification.



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

PA Rate Template Part I
Data Relevant to the Rate Filing

Table D. Identify/Define Information

Carrier Name:	Capital Advantage Insurance Company	
Product(s):	PPD	
Market Segment:	Small Group	
Rate Effective Date:	1/1/2021	to 12/31/2021
Base Period Start Date:	1/1/2019	to 12/31/2019
Date of Most Recent Membership:	1/1/2020	

Table 1. Number of Members

Average Age	Members	
	Experience Period	Current Period (as of 01-01-2020)
Total	218	211
18-24	131	15
25-29	20	28
30-34	43	33
35-39	10	28
40-44	23	17
45-49	10	35
50-54	117	122
55-59	26	122
60-64	17	11
65+	28	11

Table 2. Experience Period Claims and Premiums

Member Months	Estimated Cost Sharing (Member & HHS)	Allowed Claims (Non-Capitated)	Non-ERB portion of Allowed Claims	Total Prescription Drug Rebates*	Total ERB Capitation	Total Non-ERB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
218	\$61,433.47	\$58,429.47	\$1,004.00	\$2,200.00	\$0.00	\$0.00	\$1,000.00	\$
Loss Ratio								
*Prescription Drug Rebates as a percentage								

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	1.53%	0.00%	0.00%	1.53%	18.27%
Outpatient Hospital	1.00%	0.00%	0.00%	1.00%	14.13%
Professional	1.00%	0.00%	0.00%	1.00%	12.50%
Other Medical	1.00%	0.00%	0.00%	1.00%	12.50%
Capitation	1.00%	0.00%	0.00%	1.00%	0.00%
Prescription Drugs	1.00%	0.00%	0.00%	1.00%	10.00%
Total Annual Trend	1.00%	0.00%	0.00%	1.00%	100.00%
Months of Trend	24				
Total Annual Trend Projection Factor	1.00%				

*Express Cost, Utilization, Induced Demand and Weight as percentages
**Should equal 100% Trend

Table 4. Historical Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factor*	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-10	55,481.67	5,937.77	0.9377	5,348.27	41	129.44		\$627,317	\$1,378.17	\$35.08
Feb-10	54,817.21	1,000.00	1.0000	14,817.01	42	352.79		\$1,000.00	\$1,378.17	\$40.00
Mar-10	53,152.61	1,000.00	1.0000	3,152.60	46	68.53		\$1,000.00	\$5,518.31	\$120.83
Apr-10	50,151.11	1,000.00	1.0000	6,151.10	50	123.02		\$1,000.00	\$1,378.17	\$41.13
May-10	510,205.15	1,000.00	1.0000	10,205.14	48	212.61		\$1,000.00	\$1,378.17	\$45.17
Jun-10	504,409.68	1,000.00	1.0000	4,409.67	50	88.19		\$1,000.00	\$1,779.01	\$54.58
Jul-10	222,284.24	1,000.00	1.0000	22,284.23	48	464.31		\$1,000.00	\$2,174.42	\$54.84
Aug-10	524,113.51	1,000.00	1.0000	24,113.50	49	492.13		\$1,000.00	\$2,475.17	\$60.52
Sep-10	28,222.82	0.0000	0.0000	8,222.81	49	167.80		\$1,000.00	\$1,378.17	\$34.47
Oct-10	551,655.91	1,000.00	1.0000	5,655.90	49	115.22		\$1,000.00	\$1,378.17	\$56.11
Nov-10	1,181,827.24	5,655.90	1.0000	18,827.23	53	355.25	\$49,037.84	\$449,434	\$4,826.73	\$92.62
Dec-10	514,035.05	1,000.00	1.0000	14,035.04	117	119.86		\$49,037.84	\$2,738.38	\$77.88
Jan-11	504,409.68	1,000.00	1.0000	14,409.67	83	173.00		\$1,000.00	\$4,826.73	\$54.12
Feb-11	224,269.27	1,000.00	1.0000	24,269.26	83	292.43		\$1,000.00	\$1,378.17	\$66.57
Mar-11	501,465.21	1,000.00	1.0000	6,465.20	83	77.24		\$1,000.00	\$1,378.17	\$49.06
Apr-11	511,272.42	1,000.00	1.0000	11,272.41	92	122.02		\$1,000.00	\$1,378.17	\$68.44
May-11	504,409.68	1,000.00	1.0000	4,409.67	114	38.63		\$1,000.00	\$1,378.17	\$60.84
Jun-11	514,855.90	0.0000	0.0000	14,855.89	114	129.44		\$1,000.00	\$1,378.17	\$69.62
Jul-11	514,413.24	1,000.00	1.0000	4,413.23	113	38.63		\$1,000.00	\$1,378.17	\$66.65
Aug-11	504,409.68	0.0000	0.0000	4,409.67	114	38.63		\$1,000.00	\$1,378.17	\$66.81
Sep-11	222,284.24	0.0000	0.0000	22,284.23	114	195.43		\$1,000.00	\$1,378.17	\$67.58
Oct-11	524,113.51	0.0000	0.0000	24,113.50	114	211.43		\$1,000.00	\$1,378.17	\$74.52
Nov-11	222,284.24	0.0000	0.0000	22,284.23	114	195.43	\$101,406.44	\$1,000.00	\$1,378.17	\$68.46
Dec-11	514,855.90	0.0000	0.0000	14,855.89	117	126.79		\$1,000.00	\$1,378.17	\$67.43
Jan-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Feb-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Mar-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Apr-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
May-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jun-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jul-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Aug-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Sep-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Oct-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Nov-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Dec-12	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jan-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Feb-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Mar-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Apr-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
May-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jun-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jul-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Aug-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Sep-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Oct-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Nov-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Dec-13	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jan-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Feb-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Mar-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Apr-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
May-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jun-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jul-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Aug-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Sep-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Oct-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Nov-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Dec-14	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jan-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Feb-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Mar-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Apr-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
May-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jun-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jul-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Aug-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Sep-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Oct-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Nov-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Dec-15	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Jan-16	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00
Feb-16	517,286.51	0.0000	0.0000	17,286.50	117	147.92		\$1,000.00	\$1,378.17	\$72.00

Carrier Name: Capital Advantage Insurance Company
 Product(s): PPO
 Market Segment: Small Group
 Rate Effective Date: 1/1/2021

Table 2b. Manual Experience Period Claims and Premiums

Unpaid Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Number x Rate)	Allowed Claims (Non-Capitated)	Non-ERB portion of Allowed Claims	Total Prescription Drug Rebates**	Total ERB Capitation	Total Non-ERB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
\$375,438,122.74	\$364,333,531.49	\$295,606,101.85	505,643	\$10,000	\$375,705,162.13		\$14,513,272.71	\$11,448,110	\$0.00	\$16,258,847.00	\$
Experience Period Total Allowed ERB Claims + ERB Capitation PMPM (net of prescription drug rebates)											
Total Rate											

**Express Prescription Drug Rebates as a negative number

Table 3b. Manual Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	5.00%	0.00%	0.00%	5.00%	18.97%
Outpatient Hospital	5.00%	0.00%	0.00%	5.00%	37.54%
Professional	5.00%	0.00%	0.00%	5.00%	31.90%
Other Medical	5.00%	0.00%	0.00%	5.00%	2.60%
Prescription Drug	16.00%	1.10%	0.00%	13.37%	18.23%
Total Annual Trend				6.65%	100.00%
Months of Trend				24	
Equal Applied Trend/Projection Factor				1.137	

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

Table 4b. Historical Manual Utilization

Month-Year	Total Annual Premium	Incurred Claims	Completion Factor*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member x Rate)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM	
Jan-15		\$14,622,126.11	0.9383	\$15,585,780.41	19,380	\$799.50		\$601,067.63	\$15,012,672.77	\$	483.21
Feb-15		\$16,176,962.67	1.0000	\$16,177,969.28	19,899	\$813.46		\$680,373.92	\$15,497,595.36	\$	480.62
Mar-15		\$20,539,991.57	1.0000	\$20,540,927.89	24,843	\$826.77		\$719,796.01	\$19,821,131.88	\$	578.14
Apr-15		\$17,668,196.11	1.0000	\$17,668,665.92	21,407	\$825.69		\$749,037.49	\$16,919,628.43	\$	485.67
May-15		\$18,709,000.21	1.0000	\$18,709,000.21	22,648	\$826.54		\$773,788.13	\$17,935,212.08	\$	492.29
Jun-15		\$20,445,948.81	1.0000	\$20,445,948.81	24,501	\$834.92		\$833,488.65	\$19,612,460.15	\$	506.45
Jul-15		\$20,224,481.16	1.0000	\$20,224,481.16	24,181	\$836.00		\$834,093.50	\$19,390,387.65	\$	512.00
Aug-15		\$24,431,466.44	1.0000	\$24,431,466.44	28,161	\$867.25		\$946,061.64	\$23,485,405.00	\$	546.03
Sep-15		\$22,979,185.11	1.0000	\$22,980,185.59	23,300	\$983.74		\$891,214.92	\$22,088,970.67	\$	485.71
Oct-15		\$23,793,933.71	0.9948	\$24,046,917.45	24,129	\$992.15		\$877,479.44	\$23,169,438.01	\$	505.93
Nov-15		\$24,471,728.11	1.0000	\$24,474,418.35	23,743	\$1,032.38		\$911,831.80	\$23,562,586.55	\$	482.61
Dec-15	\$290,137,413.43	\$27,151,483.84	1.0000	\$27,153,413.17	30,813	\$881.93	\$47,894,934.38	\$61,072.36	\$26,542,341.78	\$	485.73
Jan-16		\$29,406,468.18	1.0000	\$29,407,238.49	36,211	\$810.95		\$1,051,846.05	\$28,355,392.43	\$	474.48
Feb-16		\$29,102,948.12	1.0000	\$29,103,948.12	37,114	\$784.38		\$1,030,412.11	\$28,073,536.01	\$	466.94
Mar-16		\$35,173,449.18	1.0000	\$35,173,449.18	43,742	\$803.24		\$1,207,000.00	\$33,966,449.18	\$	511.44
Apr-16		\$31,464,651.26	1.0000	\$31,465,651.26	37,961	\$828.61		\$1,130,899.03	\$30,334,752.23	\$	469.98
May-16		\$36,176,176.11	1.0000	\$36,177,658.89	43,115	\$840.72		\$1,303,728.41	\$34,873,930.48	\$	530.12
Jun-16		\$33,029,510.22	1.0000	\$33,030,492.94	38,148	\$867.25		\$1,144,713.22	\$31,885,779.72	\$	488.69
Jul-16		\$33,715,715.44	0.9979	\$33,806,070.99	38,108	\$892.48		\$1,205,302.41	\$32,600,768.58	\$	484.63
Aug-16		\$37,499,515.16	0.9999	\$37,601,497.01	42,822	\$879.00		\$1,290,120.41	\$36,311,376.60	\$	543.18
Sep-16		\$39,164,623.26	0.9999	\$39,168,613.99	43,868	\$892.99		\$1,312,021.63	\$37,856,592.36	\$	491.88
Oct-16		\$36,545,785.18	0.9998	\$36,549,226.31	42,988	\$868.69		\$1,421,830.88	\$35,127,395.43	\$	531.81
Nov-16		\$37,839,429.48	0.9999	\$37,871,197.84	42,788	\$887.57		\$1,406,138.03	\$36,465,059.81	\$	544.41
Dec-16	\$414,644,914.24	\$39,492,014.61	0.9999	\$39,493,929.22	47,428	\$832.95	\$77,436,351.46	\$5,949,765.44	\$33,544,163.78	\$	502.84
Jan-17		\$33,356,993.50	0.9996	\$33,369,937.99	42,908	\$862.95		\$1,411,832.89	\$31,958,165.10	\$	549.69
Feb-17		\$33,668,831.24	0.9996	\$33,673,616.66	41,603	\$808.00		\$1,484,226.44	\$32,189,390.22	\$	514.03
Mar-17		\$34,121,722.27	0.9995	\$34,187,948.48	39,423	\$868.00		\$1,420,128.12	\$32,767,820.36	\$	556.21
Apr-17		\$32,771,888.24	0.9994	\$32,786,469.78	40,903	\$793.92		\$1,544,466.36	\$31,242,403.42	\$	536.41
May-17		\$33,793,983.22	0.9994	\$33,813,924.88	44,527	\$803.30		\$1,511,135.94	\$32,302,788.94	\$	559.79
Jun-17		\$33,473,788.11	0.9993	\$33,478,781.76	42,822	\$808.74		\$1,499,218.44	\$31,979,563.32	\$	524.64
Jul-17		\$31,763,095.05	0.9999	\$31,764,551.87	45,701	\$683.53		\$1,444,752.88	\$30,319,348.99	\$	539.78
Aug-17		\$33,120,613.57	0.9999	\$33,121,601.04	44,440	\$743.00		\$1,501,132.58	\$31,620,478.46	\$	517.62
Sep-17		\$38,141,979.11	0.9999	\$38,143,661.95	41,316	\$920.94		\$1,512,876.12	\$36,630,785.83	\$	561.23
Oct-17		\$32,438,457.67	0.9995	\$32,446,177.71	40,888	\$788.84		\$1,481,375.23	\$30,964,802.48	\$	507.03
Nov-17		\$29,071,114.82	0.9941	\$29,074,814.84	35,403	\$820.15		\$1,377,071.12	\$27,697,743.72	\$	548.00
Dec-17	\$489,904,172.44	\$23,995,000.10	0.9972	\$24,017,998.06	48,423	\$502.17	\$47,181,114.44	\$1,807,700.16	\$22,210,297.90	\$	469.07
Jan-18		\$26,011,648.91	0.9984	\$26,018,487.47	40,608	\$640.86		\$1,008,421.21	\$25,010,066.26	\$	586.89
Feb-18		\$22,674,613.01	0.9975	\$22,719,513.09	44,411	\$511.41		\$1,121,130.16	\$21,598,382.93	\$	581.44
Mar-18		\$23,071,013.87	0.9981	\$23,081,493.86	41,702	\$539.23		\$1,099,847.80	\$21,981,646.06	\$	615.90
Apr-18		\$21,909,788.84	0.9984	\$21,910,822.84	41,111	\$530.45		\$1,001,031.44	\$20,908,797.40	\$	577.12
May-18		\$23,183,610.22	0.9948	\$23,209,913.82	42,837	\$540.13		\$1,124,189.18	\$22,085,724.64	\$	603.40
Jun-18		\$19,795,100.10	0.9921	\$19,811,285.26	41,443	\$470.49		\$1,204,500.00	\$18,606,785.26	\$	524.68
Jul-18		\$24,124,441.24	0.9929	\$24,146,881.21	41,607	\$580.20		\$1,120,888.67	\$23,025,992.54	\$	642.51
Aug-18		\$22,400,001.21	0.9989	\$22,405,884.41	40,463	\$549.34		\$1,001,020.13	\$21,404,864.28	\$	602.74
Sep-18		\$20,654,863.01	0.9982	\$20,668,888.28	41,011	\$511.15		\$1,004,430.43	\$19,664,457.85	\$	566.67
Oct-18		\$22,771,884.18	0.9994	\$22,776,728.28	42,933	\$523.49		\$1,123,171.22	\$21,653,557.06	\$	592.99
Nov-18		\$19,406,151.24	0.9100	\$19,410,391.88	36,181	\$527.38		\$1,105,180.70	\$18,305,211.18	\$	581.84
Dec-18	\$344,444,724.24	\$19,877,855.41	0.9424	\$19,884,644.44	39,582	\$338.26	\$47,894,934.38	\$1,874,202.80	\$18,010,441.64	\$	603.32

*Express Completion Factor as percentage

**Express Prescription Drug Rebates as a negative number

PA Rate Template Part II
Rate Development and Change

Client Name: Capital Advisors Insurance Company
 Product#: PPO Small Group
 Market Segment: Small Group
 Rate Effective Date: 1/1/2023

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

Development of the Projected Index Rate	Actual Experience	Manual Data	
Total Allowed EDB Claims - EDB Cession (PMPM) Foot of unconsolidated related PMPM	\$ 475.48	\$ 507.30	- Actual Experience PMPM should be consistent with the Index Rate for Experience Period on UBRP
Two year trend inflation factor	1.137	1.137	
Unweighted Projected Allowed EDB Claims PMPM	\$ 545.91	\$ 579.63	
Single Risk Foot Adjustment Factors			
Process in Motion - Incurred in Reinsurance Reserve	1 year	1 year	
Change in Mortality - All Other	1.028	1.028	- See UBRP Instructions
Total Non-Mortality Changes	0.991	0.991	
Change in Catastrophes	1.000	1.000	- See UBRP Instructions
Change in Network	0.991	0.991	
Change in Benefits	1.000	1.000	- See UBRP Instructions
Change in Other	1.000	1.000	- See UBRP Instructions
Total Adjusted Projected Allowed EDB Claims PMPM	\$ 546.96	\$ 603.96	
Credibility Factors	0%	000%	- See Instructions
Blended Projected EDB Claims (PMPM)	\$	\$	- Projected Index Rate
Development of the Market Adjusted Index Rate and Total Allowed Claims			
Adjusted Projected Allowed EDB Claims PMPM	\$ 682.36	\$ 682.36	- Index Rate for Experience Period on UBRP
Projected Total Allowed Claims	\$ 597.85	\$ 597.85	
Market-Adjusted Risk Adjustment Impact	\$ 50.00	\$ 50.00	
Projected Incurred Exchange User Fees PMPM	\$ 50.00	\$ 50.00	
Projected Incurred Reinsurance Premiums PMPM	\$ 597.85	\$ 597.85	
Market-Adjusted Projected Incurred EDB Claims PMPM	\$ 597.85	\$ 597.85	
Market-Adjusted Projected Allowed EDB Claims PMPM	\$ 682.35	\$ 682.35	- Market Adjusted Index Rate
Projected Allowed Non-EDB Claims PMPM	\$ 50.00	\$ 50.00	
Market-Adjusted Projected Incurred Total Claims PMPM	\$ 597.85	\$ 597.85	
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 682.35	\$ 682.35	

Table 6. Retention

Retention Items - Expense in percentage	Percentage	PMPM Amount
Administrative Expenses	2.13%	17.25
General and Claims	7.13%	58.09
Agent/Broker Fees and Commissions	0.24%	19.84
Quality Improvement Initiatives	0.40%	32.81
Risk and Fees	0.00%	0.00
Risk Adjustment User Fee	0.00%	0.00
ROB Fee	0.00%	0.00
PA Premium & Other Taxes (if applicable)	2.00%	164.63
Federal Income Tax	0.42%	34.26
Health Insurance Provider Fee (Provided for Small Group only)	0.00%	0.00
Profit/Contingency (after tax)	2.00%	164.63
Total Retention	14.81%	504.04
Projected Residual Revenue PMPM		\$ 702.46

Table 8. Components of Rate Change

Rate Components	2022	2023	Difference	Percent Change
A. Unweighted Foot-Adjusted Index Rate (PMPM)	\$ 545.91	\$ 579.63	\$ 33.72	6.18%
B. Base and/or allowed claims before normalization	\$ 545.91	\$ 579.63	\$ 33.72	6.18%
C. Normalization factor component of change	\$ (204.11)	\$ (225.68)	\$ (21.57)	-4.6%
D. Change in Normalized Allowed Claims Adjustment Components	\$ 343.38	\$ 371.64	\$ 28.26	8.23%
D1. Base and/or allowed claims after normalization	\$ 15.41	\$ 31.08	\$ 15.67	101.0%
D2. UBRP Trend	\$ 171.79	\$ 171.79	\$ 0.00	0.0%
D3. UBRP Mortality	\$ 171.79	\$ 171.79	\$ 0.00	0.0%
D4. UBRP Other	\$ 171.79	\$ 171.79	\$ 0.00	0.0%
D5. Normalized UBRP Risk Adjustment on an allowed basis	\$ 171.79	\$ 171.79	\$ 0.00	0.0%
D6. Normalized Exchange User Fee on an allowed basis	\$ -	\$ -	\$ -	0.0%
D7. Normalized Reinsurance Reserves on an allowed basis	\$ -	\$ -	\$ -	0.0%
D8. Subtotal - Sum(D1-D7)	\$ 448.77	\$ 475.48	\$ 26.71	5.95%
E. Change in Allowable Non-Adjusted Level Components	\$ -	\$ -	\$ -	0.0%
E1. Network	\$ -	\$ -	\$ -	0.0%
E2. Pricing Act	\$ (54.77)	\$ (54.77)	\$ 0.00	0.0%
E3. Catastrophic Eligibility	\$ -	\$ (0.00)	\$ (0.00)	0.0%
E4. Catastrophic Eligibility	\$ -	\$ (0.00)	\$ (0.00)	0.0%
E5. Subtotal - Sum(E1-E4)	\$ (54.77)	\$ (54.77)	\$ 0.00	0.0%
F. Change in Retention Components	\$ 42.22	\$ 45.24	\$ 3.02	7.15%
F1. Administrative Expenses	\$ 24.12	\$ 24.12	\$ 0.00	0.0%
F2. Taxes and Fees	\$ 9.26	\$ 9.26	\$ 0.00	0.0%
F3. Profit and/or Contingency	\$ 8.84	\$ 9.86	\$ 1.02	11.5%
F4. Subtotal - Sum(F1-F3)	\$ 36.18	\$ 44.24	\$ 8.06	22.3%
G. Process in Miscellaneous Items	\$ 0.00	\$ -	\$ -	0.0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 488.16	\$ 488.45	\$ (0.27)	-0.05%

For Informational Purposes only - No input required.

Blended Res. Based Incurred/Total Claims Before Normalization	\$ 311,438,722.71
Blended Earned Premium	\$ 77,826.71

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

Relative Date	1/1/2023	3/1/2023	5/1/2023	7/1/2023	9/1/2023	11/1/2023	1/1/2024
Full Member Monthly Revenue in Quarter	\$ 483.98	\$ 483.98	\$ 483.98	\$ 483.98	\$ 483.98	\$ 483.98	\$ 483.98
Adjusted Projected Allowed EDB Claims PMPM	\$ 682.35	\$ 682.35	\$ 682.35	\$ 682.35	\$ 682.35	\$ 682.35	\$ 682.35
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 682.35	\$ 682.35	\$ 682.35	\$ 682.35	\$ 682.35	\$ 682.35	\$ 682.35

Table 7. Normalized Market Adjusted Projected Allowed Total Claims

Normalization Factors	2022	2023
Revenue Adj Factor	1.037	1.037
Expense Generalized Factor	1.037	1.037
Revenue Risk-Adjusted Factor	1.000	1.000
Revenue Benefits Business (Included demand)	1.000	1.000
Revenue Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 682.35	\$ 682.35
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 682.35	\$ 682.35

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

	2022	2023	
Foot-Adjusted	1.137	1.137	- UBRP W1, S2
UBRP Trend (Foot-Adjusted Trend Factor)	1.137	1.137	- UBRP W1, S2
UBRP Mortality	0.991	0.991	- UBRP W1, S2
UBRP Other	1.000	1.000	- UBRP W1, S2
Risk Adjustment	0.991	0.991	- UBRP W1, S2
Exchange User Fee	0.00	0.00	- UBRP W1, S2
Reinsurance Reserves	0.00	0.00	- UBRP W1, S2
Catastrophes	0.00	0.00	- UBRP W1, S2
Network Adj	1.000	1.000	
Price Act	0.991	0.991	
Benefit Business	1.000	1.000	
Catastrophic Eligibility	1.000	1.000	
Administrative Expenses	9.26%	10.35%	
Taxes and Fees	2.46%	2.46%	
Profit and/or Contingency	2.46%	2.46%	

Capital Advantage Insurance Company
Small Group Rates
Effective 1/1/2021
Table B

<u>Plan ID</u>	<u>Plan Name</u>	<u>Metal Level</u>	<u>Projected Membership</u>	<u>Projected Allowed Claims</u>	<u>Projected Paid Claims</u>	<u>Paid to Allowed Factor</u>	<u>Average Tobacco Factor</u>	<u>AV and Cost Sharing Factor</u>	<u>(8)/(6*7) Induced Utilization</u>	<u>Induced Demand Table 10</u>
(1)		(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
82795PA0130001	Gold PPO 0/0/20 Rx 500	Gold	777	\$531,273	\$464,201	0.87	1.000	0.87	1.00	1.00
Total			777	531,273	464,201	0.87	1.00	0.87	1.00	1.00
PMPM				683.75	597.43					
Rate Dev II				683.75	597.43					

Company Name: Capital Advantage Insurance
Market: Company (CAIC)
Product: Small Group
Product: PPO
Effective Date of Rates: January 1, 2021
Ending date of Rates: March 31, 2021

HIOS Plan ID (On Exchange)=>	82795PA0130001		82795PA0130001		82795PA0130001	
HIOS Plan ID (Off Exchange)=>	82795PA0130001		82795PA0130001		82795PA0130001	
Plan Marketing Name =>	Gold PPO 0/0/20 Rx 500		Gold PPO 0/0/20 Rx 500		Gold PPO 0/0/20 Rx 500	
Form # =>	C21-CAIC-SPG		C21-CAIC-SPG		C21-CAIC-SPG	
Rating Area =>	6		7		9	
Network =>	PPO		PPO		PPO	
Metal =>	Gold		Gold		Gold	
Deductible =>	\$0 /\$500 Med/Rx		\$0 /\$500 Med/Rx		\$0 /\$500 Med/Rx	
Coinsurance =>	0%		0%		0%	
Copays =>	\$20/\$40/\$300 PCP/SPC/ER		\$20/\$40/\$300 PCP/SPC/ER		\$20/\$40/\$300 PCP/SPC/ER	
OOP Maximum =>	\$8550 Med/Rx Combined		\$8550 Med/Rx Combined		\$8550 Med/Rx Combined	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$333.88	\$333.88	\$360.59	\$360.59	\$340.56	\$340.56
15	\$363.56	\$363.56	\$392.65	\$392.65	\$370.83	\$370.83
16	\$374.91	\$374.91	\$404.90	\$404.90	\$382.41	\$382.41
17	\$386.26	\$386.26	\$417.16	\$417.16	\$393.98	\$393.98
18	\$398.48	\$398.48	\$430.36	\$430.36	\$406.45	\$406.45
19	\$410.70	\$410.70	\$443.56	\$443.56	\$418.91	\$418.91
20	\$423.36	\$423.36	\$457.23	\$457.23	\$431.82	\$431.82
21	\$436.45	\$436.45	\$471.37	\$471.37	\$445.18	\$445.18
22	\$436.45	\$436.45	\$471.37	\$471.37	\$445.18	\$445.18
23	\$436.45	\$436.45	\$471.37	\$471.37	\$445.18	\$445.18
24	\$436.45	\$436.45	\$471.37	\$471.37	\$445.18	\$445.18
25	\$438.20	\$438.20	\$473.25	\$473.25	\$446.96	\$446.96
26	\$446.92	\$446.92	\$482.68	\$482.68	\$455.86	\$455.86
27	\$457.40	\$457.40	\$493.99	\$493.99	\$466.55	\$466.55
28	\$474.42	\$474.42	\$512.37	\$512.37	\$483.91	\$483.91
29	\$488.39	\$488.39	\$527.46	\$527.46	\$498.16	\$498.16
30	\$495.37	\$495.37	\$535.00	\$535.00	\$505.28	\$505.28
31	\$505.85	\$505.85	\$546.31	\$546.31	\$515.96	\$515.96
32	\$516.32	\$516.32	\$557.63	\$557.63	\$526.65	\$526.65
33	\$522.87	\$522.87	\$564.70	\$564.70	\$533.32	\$533.32
34	\$529.85	\$529.85	\$572.24	\$572.24	\$540.45	\$540.45
35	\$533.34	\$533.34	\$576.01	\$576.01	\$544.01	\$544.01
36	\$536.83	\$536.83	\$579.78	\$579.78	\$547.57	\$547.57
37	\$540.33	\$540.33	\$583.55	\$583.55	\$551.13	\$551.13
38	\$543.82	\$543.82	\$587.32	\$587.32	\$554.69	\$554.69
39	\$550.80	\$550.80	\$594.86	\$594.86	\$561.82	\$561.82
40	\$557.78	\$557.78	\$602.41	\$602.41	\$568.94	\$568.94
41	\$568.26	\$568.26	\$613.72	\$613.72	\$579.62	\$579.62
42	\$578.30	\$578.30	\$624.56	\$624.56	\$589.86	\$589.86
43	\$592.26	\$592.26	\$639.64	\$639.64	\$604.11	\$604.11
44	\$609.72	\$609.72	\$658.50	\$658.50	\$621.92	\$621.92
45	\$630.23	\$630.23	\$680.65	\$680.65	\$642.84	\$642.84
46	\$654.67	\$654.67	\$707.05	\$707.05	\$667.77	\$667.77
47	\$682.17	\$682.17	\$736.75	\$736.75	\$695.81	\$695.81
48	\$713.60	\$713.60	\$770.68	\$770.68	\$727.87	\$727.87
49	\$744.58	\$744.58	\$804.15	\$804.15	\$759.48	\$759.48
50	\$779.50	\$779.50	\$841.86	\$841.86	\$795.09	\$795.09
51	\$813.98	\$813.98	\$879.10	\$879.10	\$830.26	\$830.26
52	\$851.95	\$851.95	\$920.11	\$920.11	\$868.99	\$868.99
53	\$890.36	\$890.36	\$961.59	\$961.59	\$908.17	\$908.17
54	\$931.82	\$931.82	\$1,006.37	\$1,006.37	\$950.46	\$950.46
55	\$973.28	\$973.28	\$1,051.15	\$1,051.15	\$992.75	\$992.75
56	\$1,018.24	\$1,018.24	\$1,099.70	\$1,099.70	\$1,038.60	\$1,038.60
57	\$1,063.63	\$1,063.63	\$1,148.72	\$1,148.72	\$1,084.90	\$1,084.90
58	\$1,112.07	\$1,112.07	\$1,201.04	\$1,201.04	\$1,134.32	\$1,134.32
59	\$1,136.08	\$1,136.08	\$1,226.97	\$1,226.97	\$1,158.80	\$1,158.80
60	\$1,184.53	\$1,184.53	\$1,279.29	\$1,279.29	\$1,208.22	\$1,208.22
61	\$1,226.42	\$1,226.42	\$1,324.54	\$1,324.54	\$1,250.95	\$1,250.95
62	\$1,253.92	\$1,253.92	\$1,354.23	\$1,354.23	\$1,279.00	\$1,279.00
63	\$1,288.40	\$1,288.40	\$1,391.47	\$1,391.47	\$1,314.17	\$1,314.17
64+	\$1,309.34	\$1,309.34	\$1,414.10	\$1,414.10	\$1,335.53	\$1,335.53

Company Name: Capital Advantage Insurance
Company (CAIC): Company (CAIC)
Market: Small Group
Product: PPO
Effective Date of Rates: April 1, 2021
Ending date of Rates: June 30, 2021

HIOS Plan ID (On Exchange)=>	82795PA0130001		82795PA0130001		82795PA0130001	
HIOS Plan ID (Off Exchange)=>	82795PA0130001		82795PA0130001		82795PA0130001	
Plan Marketing Name =>	Gold PPO 0/0/20 Rx 500		Gold PPO 0/0/20 Rx 500		Gold PPO 0/0/20 Rx 500	
Form # =>	C21-CAIC-SPG		C21-CAIC-SPG		C21-CAIC-SPG	
Rating Area =>	6		7		9	
Network =>	PPO		PPO		PPO	
Metal =>	Gold		Gold		Gold	
Deductible =>	\$0 /\$500 Med/Rx		\$0 /\$500 Med/Rx		\$0 /\$500 Med/Rx	
Coinsurance =>	0%		0%		0%	
Copays =>	\$20/\$40/\$300 PCP/SPC/ER		\$20/\$40/\$300 PCP/SPC/ER		\$20/\$40/\$300 PCP/SPC/ER	
OOP Maximum =>	\$8550 Med/Rx Combined		\$8550 Med/Rx Combined		\$8550 Med/Rx Combined	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$339.30	\$339.30	\$366.44	\$366.44	\$346.09	\$346.09
15	\$369.46	\$369.46	\$399.02	\$399.02	\$376.85	\$376.85
16	\$380.99	\$380.99	\$411.47	\$411.47	\$388.61	\$388.61
17	\$392.52	\$392.52	\$423.93	\$423.93	\$400.37	\$400.37
18	\$404.94	\$404.94	\$437.34	\$437.34	\$413.04	\$413.04
19	\$417.36	\$417.36	\$450.75	\$450.75	\$425.71	\$425.71
20	\$430.22	\$430.22	\$464.64	\$464.64	\$438.83	\$438.83
21	\$443.53	\$443.53	\$479.01	\$479.01	\$452.40	\$452.40
22	\$443.53	\$443.53	\$479.01	\$479.01	\$452.40	\$452.40
23	\$443.53	\$443.53	\$479.01	\$479.01	\$452.40	\$452.40
24	\$443.53	\$443.53	\$479.01	\$479.01	\$452.40	\$452.40
25	\$445.30	\$445.30	\$480.93	\$480.93	\$454.21	\$454.21
26	\$454.17	\$454.17	\$490.51	\$490.51	\$463.26	\$463.26
27	\$464.82	\$464.82	\$502.00	\$502.00	\$474.12	\$474.12
28	\$482.12	\$482.12	\$520.69	\$520.69	\$491.76	\$491.76
29	\$496.31	\$496.31	\$536.01	\$536.01	\$506.24	\$506.24
30	\$503.41	\$503.41	\$543.68	\$543.68	\$513.47	\$513.47
31	\$514.05	\$514.05	\$555.18	\$555.18	\$524.33	\$524.33
32	\$524.70	\$524.70	\$566.67	\$566.67	\$535.19	\$535.19
33	\$531.35	\$531.35	\$573.86	\$573.86	\$541.98	\$541.98
34	\$538.45	\$538.45	\$581.52	\$581.52	\$549.21	\$549.21
35	\$541.99	\$541.99	\$585.35	\$585.35	\$552.83	\$552.83
36	\$545.54	\$545.54	\$589.19	\$589.19	\$556.45	\$556.45
37	\$549.09	\$549.09	\$593.02	\$593.02	\$560.07	\$560.07
38	\$552.64	\$552.64	\$596.85	\$596.85	\$563.69	\$563.69
39	\$559.73	\$559.73	\$604.51	\$604.51	\$570.93	\$570.93
40	\$566.83	\$566.83	\$612.18	\$612.18	\$578.17	\$578.17
41	\$577.48	\$577.48	\$623.67	\$623.67	\$589.03	\$589.03
42	\$587.68	\$587.68	\$634.69	\$634.69	\$599.43	\$599.43
43	\$601.87	\$601.87	\$650.02	\$650.02	\$613.91	\$613.91
44	\$619.61	\$619.61	\$669.18	\$669.18	\$632.00	\$632.00
45	\$640.46	\$640.46	\$691.69	\$691.69	\$653.27	\$653.27
46	\$665.30	\$665.30	\$718.52	\$718.52	\$678.60	\$678.60
47	\$693.24	\$693.24	\$748.70	\$748.70	\$707.10	\$707.10
48	\$725.17	\$725.17	\$783.19	\$783.19	\$739.67	\$739.67
49	\$756.66	\$756.66	\$817.20	\$817.20	\$771.80	\$771.80
50	\$792.14	\$792.14	\$855.52	\$855.52	\$807.99	\$807.99
51	\$827.18	\$827.18	\$893.36	\$893.36	\$843.73	\$843.73
52	\$865.77	\$865.77	\$935.03	\$935.03	\$883.09	\$883.09
53	\$904.80	\$904.80	\$977.19	\$977.19	\$922.90	\$922.90
54	\$946.94	\$946.94	\$1,022.69	\$1,022.69	\$965.88	\$965.88
55	\$989.07	\$989.07	\$1,068.20	\$1,068.20	\$1,008.85	\$1,008.85
56	\$1,034.76	\$1,034.76	\$1,117.54	\$1,117.54	\$1,055.45	\$1,055.45
57	\$1,080.88	\$1,080.88	\$1,167.35	\$1,167.35	\$1,102.50	\$1,102.50
58	\$1,130.11	\$1,130.11	\$1,220.52	\$1,220.52	\$1,152.72	\$1,152.72
59	\$1,154.51	\$1,154.51	\$1,246.87	\$1,246.87	\$1,177.60	\$1,177.60
60	\$1,203.74	\$1,203.74	\$1,300.04	\$1,300.04	\$1,227.82	\$1,227.82
61	\$1,246.32	\$1,246.32	\$1,346.02	\$1,346.02	\$1,271.25	\$1,271.25
62	\$1,274.26	\$1,274.26	\$1,376.20	\$1,376.20	\$1,299.75	\$1,299.75
63	\$1,309.30	\$1,309.30	\$1,414.04	\$1,414.04	\$1,335.49	\$1,335.49
64+	\$1,330.58	\$1,330.58	\$1,437.03	\$1,437.03	\$1,357.19	\$1,357.19

Company Name:	Capital Advantage Insurance	Ending date of Rates:	September 30, 2021
Market:	Small Group		
Product:	PPO		
Effective Date of Rates:	July 1, 2021		

HIOS Plan ID (On Exchange)=>	82795PA0130001		82795PA0130001		82795PA0130001	
HIOS Plan ID (Off Exchange)=>	82795PA0130001		82795PA0130001		82795PA0130001	
Plan Marketing Name =>	Gold PPO 0/0/20 Rx 500		Gold PPO 0/0/20 Rx 500		Gold PPO 0/0/20 Rx 500	
Form # =>	C21-CAIC-SPG		C21-CAIC-SPG		C21-CAIC-SPG	
Rating Area =>	6		7		9	
Network =>	PPO		PPO		PPO	
Metal =>	Gold		Gold		Gold	
Deductible =>	\$0 /\$500 Med/Rx		\$0 /\$500 Med/Rx		\$0 /\$500 Med/Rx	
Coinsurance =>	0%		0%		0%	
Copays =>	\$20/\$40/\$300 PCP/SPC/ER		\$20/\$40/\$300 PCP/SPC/ER		\$20/\$40/\$300 PCP/SPC/ER	
OOP Maximum =>	\$8550 Med/Rx Combined		\$8550 Med/Rx Combined		\$8550 Med/Rx Combined	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$344.81	\$344.81	\$372.39	\$372.39	\$351.70	\$351.70
15	\$375.46	\$375.46	\$405.49	\$405.49	\$382.97	\$382.97
16	\$387.18	\$387.18	\$418.15	\$418.15	\$394.92	\$394.92
17	\$398.90	\$398.90	\$430.81	\$430.81	\$406.87	\$406.87
18	\$411.52	\$411.52	\$444.44	\$444.44	\$419.75	\$419.75
19	\$424.14	\$424.14	\$458.07	\$458.07	\$432.62	\$432.62
20	\$437.21	\$437.21	\$472.18	\$472.18	\$445.95	\$445.95
21	\$450.73	\$450.73	\$486.79	\$486.79	\$459.74	\$459.74
22	\$450.73	\$450.73	\$486.79	\$486.79	\$459.74	\$459.74
23	\$450.73	\$450.73	\$486.79	\$486.79	\$459.74	\$459.74
24	\$450.73	\$450.73	\$486.79	\$486.79	\$459.74	\$459.74
25	\$452.53	\$452.53	\$488.74	\$488.74	\$461.58	\$461.58
26	\$461.55	\$461.55	\$498.47	\$498.47	\$470.78	\$470.78
27	\$472.37	\$472.37	\$510.15	\$510.15	\$481.81	\$481.81
28	\$489.94	\$489.94	\$529.14	\$529.14	\$499.74	\$499.74
29	\$504.37	\$504.37	\$544.72	\$544.72	\$514.45	\$514.45
30	\$511.58	\$511.58	\$552.50	\$552.50	\$521.81	\$521.81
31	\$522.40	\$522.40	\$564.19	\$564.19	\$532.84	\$532.84
32	\$533.21	\$533.21	\$575.87	\$575.87	\$543.88	\$543.88
33	\$539.97	\$539.97	\$583.17	\$583.17	\$550.77	\$550.77
34	\$547.19	\$547.19	\$590.96	\$590.96	\$558.13	\$558.13
35	\$550.79	\$550.79	\$594.86	\$594.86	\$561.81	\$561.81
36	\$554.40	\$554.40	\$598.75	\$598.75	\$565.49	\$565.49
37	\$558.00	\$558.00	\$602.64	\$602.64	\$569.16	\$569.16
38	\$561.61	\$561.61	\$606.54	\$606.54	\$572.84	\$572.84
39	\$568.82	\$568.82	\$614.33	\$614.33	\$580.20	\$580.20
40	\$576.03	\$576.03	\$622.12	\$622.12	\$587.55	\$587.55
41	\$586.85	\$586.85	\$633.80	\$633.80	\$598.59	\$598.59
42	\$597.22	\$597.22	\$644.99	\$644.99	\$609.16	\$609.16
43	\$611.64	\$611.64	\$660.57	\$660.57	\$623.87	\$623.87
44	\$629.67	\$629.67	\$680.04	\$680.04	\$642.26	\$642.26
45	\$650.85	\$650.85	\$702.92	\$702.92	\$663.87	\$663.87
46	\$676.10	\$676.10	\$730.18	\$730.18	\$689.62	\$689.62
47	\$704.49	\$704.49	\$760.85	\$760.85	\$718.58	\$718.58
48	\$736.94	\$736.94	\$795.90	\$795.90	\$751.68	\$751.68
49	\$768.95	\$768.95	\$830.46	\$830.46	\$784.32	\$784.32
50	\$805.00	\$805.00	\$869.40	\$869.40	\$821.10	\$821.10
51	\$840.61	\$840.61	\$907.86	\$907.86	\$857.42	\$857.42
52	\$879.82	\$879.82	\$950.21	\$950.21	\$897.42	\$897.42
53	\$919.49	\$919.49	\$993.05	\$993.05	\$937.88	\$937.88
54	\$962.31	\$962.31	\$1,039.29	\$1,039.29	\$981.55	\$981.55
55	\$1,005.13	\$1,005.13	\$1,085.54	\$1,085.54	\$1,025.23	\$1,025.23
56	\$1,051.55	\$1,051.55	\$1,135.68	\$1,135.68	\$1,072.58	\$1,072.58
57	\$1,098.43	\$1,098.43	\$1,186.30	\$1,186.30	\$1,120.40	\$1,120.40
58	\$1,148.46	\$1,148.46	\$1,240.34	\$1,240.34	\$1,171.43	\$1,171.43
59	\$1,173.25	\$1,173.25	\$1,267.11	\$1,267.11	\$1,196.72	\$1,196.72
60	\$1,223.28	\$1,223.28	\$1,321.14	\$1,321.14	\$1,247.75	\$1,247.75
61	\$1,266.55	\$1,266.55	\$1,367.88	\$1,367.88	\$1,291.88	\$1,291.88
62	\$1,294.95	\$1,294.95	\$1,398.54	\$1,398.54	\$1,320.85	\$1,320.85
63	\$1,330.55	\$1,330.55	\$1,437.00	\$1,437.00	\$1,357.17	\$1,357.17
64+	\$1,352.18	\$1,352.18	\$1,460.36	\$1,460.36	\$1,379.22	\$1,379.22

Company Name: Capital Advantage Insurance
Market: Company (CAIC)
Product: Small Group
Product: PPO
Effective Date of Rates: October 1, 2021
Ending date of Rates: December 31, 2021

HIOS Plan ID (On Exchange)=>	82795PA0130001		82795PA0130001		82795PA0130001	
HIOS Plan ID (Off Exchange)=>	82795PA0130001		82795PA0130001		82795PA0130001	
Plan Marketing Name =>	Gold PPO 0/0/20 Rx 500		Gold PPO 0/0/20 Rx 500		Gold PPO 0/0/20 Rx 500	
Form # =>	C21-CAIC-SPG		C21-CAIC-SPG		C21-CAIC-SPG	
Rating Area =>	6		7		9	
Network =>	PPO		PPO		PPO	
Metal =>	Gold		Gold		Gold	
Deductible =>	\$0 /\$500 Med/Rx		\$0 /\$500 Med/Rx		\$0 /\$500 Med/Rx	
Coinsurance =>	0%		0%		0%	
Copays =>	\$20/\$40/\$300 PCP/SPC/ER		\$20/\$40/\$300 PCP/SPC/ER		\$20/\$40/\$300 PCP/SPC/ER	
OOP Maximum =>	\$8550 Med/Rx Combined		\$8550 Med/Rx Combined		\$8550 Med/Rx Combined	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$350.41	\$350.41	\$378.44	\$378.44	\$357.42	\$357.42
15	\$381.56	\$381.56	\$412.08	\$412.08	\$389.19	\$389.19
16	\$393.46	\$393.46	\$424.94	\$424.94	\$401.33	\$401.33
17	\$405.37	\$405.37	\$437.80	\$437.80	\$413.48	\$413.48
18	\$418.20	\$418.20	\$451.66	\$451.66	\$426.56	\$426.56
19	\$431.03	\$431.03	\$465.51	\$465.51	\$439.65	\$439.65
20	\$444.31	\$444.31	\$479.85	\$479.85	\$453.19	\$453.19
21	\$458.05	\$458.05	\$494.69	\$494.69	\$467.21	\$467.21
22	\$458.05	\$458.05	\$494.69	\$494.69	\$467.21	\$467.21
23	\$458.05	\$458.05	\$494.69	\$494.69	\$467.21	\$467.21
24	\$458.05	\$458.05	\$494.69	\$494.69	\$467.21	\$467.21
25	\$459.88	\$459.88	\$496.67	\$496.67	\$469.08	\$469.08
26	\$469.04	\$469.04	\$506.57	\$506.57	\$478.42	\$478.42
27	\$480.04	\$480.04	\$518.44	\$518.44	\$489.64	\$489.64
28	\$497.90	\$497.90	\$537.73	\$537.73	\$507.86	\$507.86
29	\$512.56	\$512.56	\$553.56	\$553.56	\$522.81	\$522.81
30	\$519.89	\$519.89	\$561.48	\$561.48	\$530.28	\$530.28
31	\$530.88	\$530.88	\$573.35	\$573.35	\$541.50	\$541.50
32	\$541.87	\$541.87	\$585.22	\$585.22	\$552.71	\$552.71
33	\$548.74	\$548.74	\$592.64	\$592.64	\$559.72	\$559.72
34	\$556.07	\$556.07	\$600.56	\$600.56	\$567.19	\$567.19
35	\$559.74	\$559.74	\$604.52	\$604.52	\$570.93	\$570.93
36	\$563.40	\$563.40	\$608.47	\$608.47	\$574.67	\$574.67
37	\$567.07	\$567.07	\$612.43	\$612.43	\$578.41	\$578.41
38	\$570.73	\$570.73	\$616.39	\$616.39	\$582.14	\$582.14
39	\$578.06	\$578.06	\$624.30	\$624.30	\$589.62	\$589.62
40	\$585.39	\$585.39	\$632.22	\$632.22	\$597.10	\$597.10
41	\$596.38	\$596.38	\$644.09	\$644.09	\$608.31	\$608.31
42	\$606.92	\$606.92	\$655.47	\$655.47	\$619.05	\$619.05
43	\$621.57	\$621.57	\$671.30	\$671.30	\$634.01	\$634.01
44	\$639.90	\$639.90	\$691.09	\$691.09	\$652.69	\$652.69
45	\$661.42	\$661.42	\$714.34	\$714.34	\$674.65	\$674.65
46	\$687.08	\$687.08	\$742.04	\$742.04	\$700.82	\$700.82
47	\$715.93	\$715.93	\$773.21	\$773.21	\$730.25	\$730.25
48	\$748.91	\$748.91	\$808.82	\$808.82	\$763.89	\$763.89
49	\$781.43	\$781.43	\$843.95	\$843.95	\$797.06	\$797.06
50	\$818.08	\$818.08	\$883.52	\$883.52	\$834.44	\$834.44
51	\$854.26	\$854.26	\$922.60	\$922.60	\$871.35	\$871.35
52	\$894.11	\$894.11	\$965.64	\$965.64	\$912.00	\$912.00
53	\$934.42	\$934.42	\$1,009.18	\$1,009.18	\$953.11	\$953.11
54	\$977.94	\$977.94	\$1,056.17	\$1,056.17	\$997.50	\$997.50
55	\$1,021.45	\$1,021.45	\$1,103.17	\$1,103.17	\$1,041.88	\$1,041.88
56	\$1,068.63	\$1,068.63	\$1,154.12	\$1,154.12	\$1,090.00	\$1,090.00
57	\$1,116.27	\$1,116.27	\$1,205.57	\$1,205.57	\$1,138.59	\$1,138.59
58	\$1,167.11	\$1,167.11	\$1,260.48	\$1,260.48	\$1,190.45	\$1,190.45
59	\$1,192.30	\$1,192.30	\$1,287.69	\$1,287.69	\$1,216.15	\$1,216.15
60	\$1,243.15	\$1,243.15	\$1,342.60	\$1,342.60	\$1,268.01	\$1,268.01
61	\$1,287.12	\$1,287.12	\$1,390.09	\$1,390.09	\$1,312.86	\$1,312.86
62	\$1,315.98	\$1,315.98	\$1,421.26	\$1,421.26	\$1,342.30	\$1,342.30
63	\$1,352.16	\$1,352.16	\$1,460.34	\$1,460.34	\$1,379.21	\$1,379.21
64+	\$1,374.14	\$1,374.14	\$1,484.07	\$1,484.07	\$1,401.62	\$1,401.62

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

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
82795PA0130001	Gold PPO 0/0/25	PPO	Gold	Off	PPO	6,7,9	All

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

02-01-2020 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
82795PA0130001	Gold PPO 0/0/25	PPO	Gold	Off

RATING AREA 6

0	0	6	1	0	10	0	0	1	0
Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union
\$436.45	\$436.45	\$436.45	\$436.45	\$436.45	\$436.45	\$436.45	\$436.45	\$436.45	\$436.45

RATING AREA 7

6	1	24	9
Adams	Berks	Lancaster	York
\$471.37	\$471.37	\$471.37	\$471.37

RATING AREA 9

0	12	0	0	0	0	0
Cumberland	Dauphin	Franklin	Fulton	Juniata	Lebanon	Perry
\$445.18	\$445.18	\$445.18	\$445.18	\$445.18	\$445.18	\$445.18

Unified Rate Review v5.1										To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + P. To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L. To validate, select the Validate button or Ctrl + Shift + I. To finalize, select the Finalize button or Ctrl + Shift + F.									
Company Legal Name: Capital Advantage Insurance Company										State: PA									
HIOS Issuer ID: 82795										Market: Small Group									
Effective Date of Rate Change(s): 1/1/2021																			
Market Level Calculations (Same for all Plans)																			
Section I: Experience Period Data																			
Experience Period: 1/1/2019 to 12/31/2019										Total PMPM									
Allowed Claims										\$436,489.42					\$475.48				
Reinsurance										\$0.00					\$0.00				
Incurred Claims in Experience Period										\$375,335.95					\$408.86				
Risk Adjustment										\$57,595.00					\$62.74				
Experience Period Premium										\$600,758.78					\$654.42				
Experience Period Member Months										918									
Section II: Projections																			
Benefit Category		Experience Period Index Rate PMPM		Year 1 Trend				Year 2 Trend				Trended EHB Allowed Claims PMPM							
				Cost		Utilization		Cost		Utilization									
Inpatient Hospital		\$94.52		1.054		1.000		1.057		1.000		\$105.30							
Outpatient Hospital		\$129.62		1.057		1.000		1.059		1.000		\$145.09							
Professional		\$131.93		1.053		1.000		1.052		1.000		\$146.15							
Other Medical		\$20.65		1.057		1.000		1.059		1.000		\$23.11							
Capitation		\$0.00		1.030		1.000		1.030		1.000		\$0.00							
Prescription Drug		\$98.76		1.096		1.010		1.104		1.013		\$122.26							
Total		\$475.48										\$541.92							
Morbidity Adjustment										1.016									
Demographic Shift										1.000									
Plan Design Changes										1.000									
Other										0.991									
Adjusted Trended EHB Allowed Claims PMPM for 1/1/2021										\$545.63									
Manual EHB Allowed Claims PMPM										\$683.96									
Applied Credibility %										0.00%									
Projected Period Totals																			
Projected Index Rate for 1/1/2021										\$683.96					\$531,436.92				
Reinsurance										\$0.00					\$0.00				
Risk Adjustment Payment/Charge										\$0.21					\$163.17				
Exchange User Fees										0.00%					\$0.00				
Market Adjusted Index Rate										\$683.75					\$531,273.75				
Projected Member Months										777									
<p>Information Not Releasable to the Public Unless Authorized by Law: This information has not been publically disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.</p>																			

Product-Plan Data Collection

Company Legal Name: Capital Advantage Insurance Company
 HIOS Issuer ID: 82795
 Effective Date of Rate Change(s): 1/1/2021

State: PA
 Market: Small Group

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

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

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

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

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

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

Product/Plan Level Calculations

Field #	Section I: General Product and Plan Information	PPO	Gatekeeper PPO
1.1	Product Name		
1.2	Product ID	82795PA013	82795PA011
1.3	Plan Name	Rx 500	CareConnect
1.4	Plan ID (Standard Component ID)	82795PA0130001	82795PA0110007
1.5	Metal	Gold	Silver
1.6	AV Metal Value	0.803	0.716
1.7	Plan Category	Renewable	Terminated
1.8	Plan Type	PPO	PPO
1.9	Exchange Plan?	No	No
1.10	Effective Date of Proposed Rates	1/1/2021	1/1/2021
1.11	Cumulative Rate Change % (over 12 mos prior)	-5.95%	0.00%
1.12	Product Rate Increase %	-5.96%	0.00%
1.13	Submission Level Rate Increase %	-5.96%	-5.96%

Worksheet 1 Totals	Section II: Experience Period and Current Plan Level Information	Total	82795PA0130001	82795PA0110007
436,489	2.1 Plan ID (Standard Component ID)			
50	2.2 Allowed Claims	\$436,489	\$390,655	\$45,835
	2.3 Reinsurance	\$0	\$0	\$0
	2.4 Member Cost Sharing	\$61,153	\$48,170	\$12,984
	2.5 Cost Sharing Reduction	\$0	\$0	\$0
375,336	2.6 Incurred Claims	\$375,336	\$342,485	\$32,851
57,595	2.7 Risk Adjustment Transfer Amount	\$57,595	\$4,971	\$52,624
600,799	2.8 Premium	\$600,799	\$525,111	\$75,688
918	2.9 Experience Period Member Months	918	801	117
	2.10 Current Enrollment	70	70	0
	2.11 Current Premium PMPM	\$730.07	\$730.07	\$0.00
	2.12 Loss Ratio	57.01%	64.61%	25.61%
	Per Member Per Month			
	2.13 Allowed Claims	\$475.48	\$487.71	\$391.75
	2.14 Reinsurance	\$0.00	\$0.00	\$0.00
	2.15 Member Cost Sharing	\$66.62	\$60.14	\$110.97
	2.16 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00
	2.17 Incurred Claims	\$408.86	\$427.57	\$280.79
	2.18 Risk Adjustment Transfer Amount	\$62.74	\$6.21	\$449.77
	2.19 Premium	\$654.42	\$655.57	\$646.56

Section III: Plan Adjustment Factors	82795PA0130001	82795PA0110007
3.1 Plan ID (Standard Component ID)		
3.2 Market Adjusted Index Rate	\$683.75	
3.3 AV and Cost Sharing Design of Plan	0.8738	1.0000
3.4 Provider Network Adjustment	1.0000	1.0000
3.5 Benefits in Addition to FHB	1.0000	1.0000
	Administrative Costs	
3.6 Administrative Expense	10.35%	0.00%
3.7 Taxes and Fees	2.48%	0.00%
3.8 Profit & Risk Load	2.00%	0.00%
3.9 Catastrophic Adjustment	1.0000	1.0000
3.10 Plan Adjusted Index Rate	\$701.46	\$683.75
3.11 Age Calibration Factor	0.6437	0.6437
3.12 Geographic Calibration Factor	0.9667	0.9667
3.13 Tobacco Calibration Factor	1.0000	1.0000
3.14 Calibrated Plan Adjusted Index Rate	\$436.51	\$425.47

Section IV: Projected Plan Level Information	Total	82795PA0130001	82795PA0110007
4.1 Plan ID (Standard Component ID)			
4.2 Allowed Claims	\$531,434	\$531,434	\$0
4.3 Reinsurance	\$0	\$0	\$0
4.4 Member Cost Sharing	\$67,093	\$67,093	\$0
4.5 Cost Sharing Reduction	\$0	\$0	\$0
4.6 Incurred Claims	\$464,341	\$464,341	\$0
4.7 Risk Adjustment Transfer Amount	\$140	\$140	\$0
4.8 Premium	\$545,037	\$545,037	\$0
4.9 Projected Member Months	777	777	0
4.10 Loss Ratio	85.17%	85.17%	#DIV/0!
	Per Member Per Month		
4.11 Allowed Claims	\$683.96	\$683.96	#DIV/0!
4.12 Reinsurance	\$0.00	\$0.00	#DIV/0!
4.13 Member Cost Sharing	\$86.35	\$86.35	#DIV/0!
4.14 Cost Sharing Reduction	\$0.00	\$0.00	#DIV/0!
4.15 Incurred Claims	\$597.61	\$597.61	#DIV/0!
4.16 Risk Adjustment Transfer Amount	\$0.18	\$0.18	#DIV/0!
4.17 Premium	\$701.46	\$701.46	#DIV/0!

Rating Area Data Collection

*Specify the total number of Rating Areas in your State by selecting the Create Rating Areas button or Ctrl + Shift + R.
Select only the Rating Areas you are offering plans within and add a factor for each area.
To validate, select the Validate button or Ctrl + Shift + I.
To finalize, select the Finalize button or Ctrl + Shift + F.*

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

CAPITAL ADVANTAGE INSURANCE COMPANY, INC.

ACTUARIAL MEMORANDUM

Small Group Rates Effective January 1, 2021

General Information

Company Information

- Company Legal Name: Capital Advantage Insurance Company – CAIC
- State: PA
- HIOS Issuer ID: 82795
- Market: Small Group
- Effective Date: 1/1/2021

PID Company Information

- Company Name: Capital Advantage Insurance Company (CAIC)
- NAIC: 41203
- Market: Small Group
- On/Off Exchange: Off Exchange
- Effective Date: 1/1/2021
- Average Rate Change: -6.0%
- Range of Requested Rate Change: -6.0% to -6.0%
- Total additional annual revenue generated from the proposed rate change: \$(35,180)
- Product: PPO
- Rating Areas: 6,7,9
- Metal Levels: Gold
- Current Covered Lives and Policyholders: 70/49
- 2021 Number of Plans: 1
- 2020 Number of Plans and Change: 1/No Plan Changes
- Contract Form #: C21-CAIC-SPG
- Form Filing SERFF #: CABC-132352669
- Binder SERFF #: CABC-PA21-125097622
- HIOS Issuer ID: 82795
- HIOS Submission Tracking Number: 82795-1735063902116677639

Company Contact Information

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

Scope and Purpose

By this filing, Capital Advantage Insurance Company (CAIC), a subsidiary of Capital BlueCross (CBC), submits rates for products to be made available to all small groups effective January 1, 2021.

Rate History and Proposed Variations in Rate Changes

Market	Company	Effective Date	SERFF #	Annual Increase
Small Group	CAIC	1/1/2017	CABC-130539615	2.3%
Small Group	CAIC	7/1/2017	CABC-130954665	6.1%
Small Group	CAIC	1/1/2018	CABC-131022120	4.7%
Small Group	CAIC	1/1/2019	CABC-131455106	16.2%
Small Group	CAIC	1/1/2020	CABC-131921812	13.2%
Small Group	CAIC	7/1/2020	CABC-132294744	8.6%

Average Rate Change

CAIC is proposing an aggregate annual -6.0% rate change. The rate change is calculated in PA Rate Exhibits Part III, Table 10, cell AC15.

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

Favorable Experience Net Risk Adjustment: -10%
Changes to Induced Demand Calculation: 2%
Less migration of groups from ACA to ASO arrangements: -3%
Suspension of the Health Insurer Fee: -2%
Future Cost and Utilization: 7%

Please note the filing contains a COVID-19 adjustment of 1.0.

Rate Change Disclosure

As discussed with the Department on 4/3/2020, CBC inadvertently released Q2 2020 Small Group renewals and sold new groups using Q1 2020 rates. This administrative error does not impact the rate change calculation, as the 2021 calculation is Q1 2021 over Q1 2020. But please note that Q2 2021 groups would receive a -2.5% aggregate rate change without the

administrative error, but instead will see -1.1% on average. The average is calculated across all CBC subsidiaries – CAAC, CAIC and KHPC.

Membership

Membership is shown in PA Rate Exhibits Part I, Table 1. The average age is 39.

Benefit Changes 2020-2021

A summary of proposed 2021 benefits is included in Exhibit A.

There are several benefit changes being implemented in 2021. All benefit changes comply with the uniform modification of coverage standards described in 45 CFR 147.106(e). Any plan with a benefit change that did not meet the uniform modification of coverage standard was terminated, and a new plan was created in its place. Benefit changes by plan are listed in Exhibit B, highlighted in yellow.

Experience Period Premium and Claims

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

Base Experience Period: The base experience period (BEP) includes completed fee-for-service paid and incurred claims for dates of service between January 1, 2019 and December 31, 2019.

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

Paid Through Date: Claims in the BEP are paid through February 29, 2020

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

Allowed and Incurred Claims in BEP:

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

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

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

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

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

Risk Adjustment in BEP: Risk adjustment amounts in the BEP are equal to corporate 2019 budgeted amounts and will be updated once finalized transfer payments are available.

Loss Ratio in BEP: Loss ratio is 57.01%

Credibility of Data

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

1. The demographics of members buying PPO and other products are similar.
2. Cost and utilization between PPO and other products are similar.

3. Medical policy between PPO and other products are almost identical, with the exception of referrals and no out-of-network benefit on HMO.

The credibility manual is the combination of CAIC, Capital Advantage Assurance Company (CAAC), and Keystone Health Plan Central (KHPC) HMO data. The credibility manual BEP includes completed fee-for-service paid and incurred claims and capitation for dates of service between January 1, 2019 and December 31, 2019. All data is trended and benefit-adjusted in the same manner as the experience data (same projection factors and trend).

Trend Identification

Trend: 6.65%

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

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

1. Base Cost/ Change in hospital and physician contracting: The contracted increase in reimbursements to hospitals and physicians is the basis of cost trends. CBC uses the following to project future costs:
 - a. Vendor Physician Cost Model and Internal Hospital Contracting Model
 - i. The medical cost models use best estimates of Capital BlueCross (CBC)'s future contracting increases with physicians and hospitals. The models use cost estimates based on varying contract effective dates by physician and hospital. All facilities and providers are considered in this modeling effort (i.e. acute and non-acute, network and non-network, inpatient and outpatient, in- area and out-of-area). From there, a monthly anticipated cost (assuming static utilization) summary is produced which can be used in projecting future claims costs. Cost trends are determined at the CBC book of business level for all commercial business.
 - b. Internal Prescription Drug Trend Model
 - i. Price Inflation
 - ii. Contract Pricing
 - iii. Member Cost-Sharing
 - iv. Units per Script
 - v. Brand/Generic Mix
 - vi. Therapeutic Mix
 - vii. Cost per Script
 - viii. Pipeline (new drugs)
2. Utilization Considerations:
 - a. Intensity of medical services rendered

- b. Changes in place of service (e.g. continued migration of inpatient stays to outpatient setting)
 - c. Further migration from brand prescription drugs to generic prescription drugs
 - d. Favorable impacts of value based benefits designs
 - e. Medical utilization estimates reviewed by CBC's Chief Medical Officer
3. Leveraging: The trend model is based on allowed cost increases. Paid claims trend at a higher rate than allowed due to leveraging. Leveraging is the impact of static cost-share, such as deductibles and copays, to the paid trend.
 4. Intensity: Measure of cost increase due to change in treatment sophistication. An example is migration from x-rays to MRIs at significantly higher cost.
 5. Underwriting Cycle: The underwriting cycle is defined as the tendency to swing between profitable and unprofitable periods over time. The underwriting cycle is exacerbated partly by pricing performed with incomplete information as to the level of current experience trends. A reaction delay occurs, as carriers tend to rely on measurements of past experience in developing current pricing assumptions. As a result, carriers are often increasing their pricing trends when actual experience trends have begun to decline, and decreasing their pricing trends actual trends are increasing. CBC strives to mitigate the underwriting cycle by keeping trends consistent through times of increasing and decreasing claim cost and utilization.

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

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

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

Rate Development & Change

Projection Factors

Changes in Morbidity: Found in URRT Worksheet 1, "Morbidity Adjustment", and PA Rate Exhibits, Table 5. There are 2 components to the morbidity factor: 1. Movement to ASO and 2. CAIC morbidity compared to CAAC (majority of BEP).

1. CBC projects 1.6% change in morbidity due to the presumed statewide movement of small group PPACA business to ASO. The morbidity factor is based on the following analysis:

1. Gather BEP medical and Rx claims, membership and premium for all PPACA groups active during the period.
2. Develop Loss Ratio A using data from (1)

3. Gather BEP medical and Rx claims, membership and premium for only PPACA groups still active in a PPACA product as of 3/31/2020
4. Develop Loss Ratio B using data from (2)
5. Loss Ratio B/Loss Ratio A – 1 = 1.6%
6. 1.6% is applied in rating

Because CBC is competing against statewide carriers in the SG ASO market, we assume this transition is occurring statewide and will continue 2020-2021. Further, the statewide transition translates to a worsening PPACA risk pool, not unique to CBC. Therefore, we project no explicit change to CBC risk adjustment transfer amounts from this migration.

2. In addition to the 1.6% morbidity change, CAIC is also applying a factor of 1.07 to reflect the difference is projected Plan Liability Risk Score (PLRS) between CAIC and its subsidiary, CAAC, which underwrites the vast majority of the BEP experience. This assumption will need to be updated once 2019 risk adjustments are finalized.

Changes in Benefits: Benefit changes are not applied to allowed claims as allowed should stay consistent from 2019 to 2021. Benefit changes are applied in the development of future incurred claims, due to changes in member cost-share. This calculation is shown in Exhibit D, and applied in Exhibit G. The manual cost PMPMs are developed from CBC’s internal benefit relativity model, discussed in the Plan Adjusted Index Rate section below. The benefit change is equal to member-month weighted average projected manual PMPM divided by member-month weighted average manual PMPM in the BEP. This process is further discussed in the Paid-to-Allowed section below.

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

Changes in Network: No Network change is applied.

Other Adjustments: An additional adjustment is applied to reflect pharmacy contracting savings in the projection period. Capital BlueCross (CBC) has contracted a new Pharmacy Benefit Manager (PBM) effective 1/1/2020, with calculated savings (combined price and Rx rebate savings) of 5% over CBC’s current contract. The other adjustment factor is calculated as:

Other Adjustment

$$= ([Rx Savings Factor] - 1) \times [BEP Allowed Prescription Drug PMPM] \div [BEP Allowed Total PMPM] + 1$$

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

Index Rate

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

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

To calculate the projected index rate:

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

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

Paid to Allowed Ratio

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

Projected Paid and Incurred Claims are calculated as follows:

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

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

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

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

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

Projected Paid and Incurred Claims PMPM

$$= [\text{Trended Claim PMPM}] \times [\text{Benefit Adjustment}] \\ \times [\text{Morbidity Adjustment}] \times [\text{Other Adjustment}]$$

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

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

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

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

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

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

- 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 PPO 2000 and PPO 1000 must be less than \$1000.
 - ii. Adjustments for plan designs that fall outside of the actuarial cost model.
- a. So the *Projected Claims PMPM by Benefit* is:

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

- b. And to arrive at the *Total Projected Claims PMPM*, CAIC assumes a distribution of members across the benefit plans being offered in 2020. 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*. And see Exhibit L for the plan-level projected incurred amount development.

Market Adjusted Index Rate

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

$$\begin{aligned} & [\textit{Market Adjusted Index Rate}] \\ & = ([\textit{Index Rate}] \times [\textit{Paid to Allowed Ratio}] \\ & \quad - [\textit{Projected Incurred Reinsurance Recoveries}] \\ & \quad - [\textit{Projected Incurred Risk Adjustment PMPM}] \\ & \quad + [\textit{Exchange Fees PMPM}]) \div [\textit{Paid to Allowed Ratio}] \end{aligned}$$

Projected Incurred Risk Adjustments PMPM:

Relevant to 2021 pricing is the impact of Commercial Risk Adjustment (CRA) payment transfers that are expected to be earned in 2021. 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. 2018-2019 risk adjustment results
5. Market improvement in coding risk: CBC's ACA book of business has had a churn rate that makes a multi-year perspective of member diagnosis and risk very challenging. Because closing gaps in care and coding, and a myriad of other risk adjustment functions require more than a single year of data to facilitate an accurate depiction of risk, it is believed that CBC is disadvantaged in the market. This will drive CBC's relative risk to the market down over time.

Please note that corporate budgeted amounts are used in the BEP. While CBC has done additional work to project 2020/2021 CRA expectations, those calculations will be finalized once 2019 CRA results are released, and a detailed calculation will be provided at that time. At the time of the initial filing, a placeholder is being used, reflecting best estimates to date.

Projected Incurred Reinsurance Recoveries:

Reinsurance does not apply to the small group market.

Exchange Fee PMPM:

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

The exchange fee PMPM is calculated as:

$$\begin{aligned} \text{Exchange Fee PMPM} \\ &= [\text{Avg 2021 On - Exchange Premium PMPM}] \times [\% \text{ Members On} \\ &\quad - \text{Exchange}] \end{aligned}$$

Where

$$\begin{aligned} [\text{Avg 2021 On - Exchange Premium PMPM}] \\ &= [\text{Avg 2020 On - Exchange Premium PMPM}] \times (1 \\ &\quad + [\text{Avg Proposed Rate Change}]) \end{aligned}$$

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

Retention Items

Administrative Expense Load:

1. Risk Adjustment User Fee: To fund the HHS-risk adjustment program, issuers will remit to HHS a fee of \$0.19 PMPM. The Risk Adjustment Fee PMPM is included in URRT Worksheet 1, URRT Worksheet 2, “Administrative Expense”, and PA Rate Exhibits Table 6.
2. Administrative Expense: Calculated using an allocation method from CBC’s Finance department, and trended to the rating period. Costs are allocated according to results reported through a company-wide questionnaire. On an annual basis, each cost center within the company completes a questionnaire listing the distribution of costs (in percentage terms) by product as well as by market segment. For example, the questionnaire will ask what percentage of time is spent on PPO versus HMO versus Drug versus Medicare. And separately will ask what percentage of time is spent on large group, small group, individual, and government programs. Using those distributions, all costs needed to perform the business are allocated to the proper market segments and lines of business. The administrative expense applied in the rate development is the total expense allocated to CBC small group products. Administrative expenses are included in URRT Worksheet 2, “Administrative Expense”, and PA Rate Exhibits Table 6. Expense as a percentage of premium vary by plan because a fixed dollar admin PMPM is applied to each plan.
 - a. Value-Based Benefits (VBB): Standard with each plan, Capital BlueCross includes wellness incentives to maximize the likelihood that consumers make positive behavioral changes, which lead to better health, and curbed health care costs for employers and employees alike. The incentive is as follows:
 - i. Complete biometric screening and receive a gift card.
 - ii. Meeting biometric measure or finish online coaching program and receive a gift card reward.
 - iii. The wellness program is administered through a vendor and costs are based on vendor fees, anticipated participation, and reward card amounts.
 - iv. Fees are included in overall administrative expense fee discussed above.
 - v. Included in URRT Worksheet 2, “Administrative Expense”, and PA Rate Exhibits Table 6.
3. Broker Expense: Calculated based on CBC’s explicit per contract broker fee. Broker Expense is included in URRT Worksheet 2, “Administrative Expense”, and PA Rate

Exhibits Table 6. Brokers are paid on new business and renewals the same commission rate for all geographic locations, enrollment dates, and metal levels. The 2020 broker commission schedule is yet to be finalized. Attached please find the 1/1/2019 copy of the broker agreement – redacted version. Files are as follows:

- a. Redacted Standard Producer Master Agreement: “SG_20-40_Initial_CAIC_PPO_SPMABrokerGroupRedacted_Supporting_20200519.pdf”
 - b. Redacted Preferred Producer Master Agreement: “SG_20-40_Initial_CAIC_PPO_PPMABrokerGroupRedacted_Supporting_20200519.pdf”
4. Additional Quality Improvement: The Final Notice of Benefit and Payment Parameters (NBPP) for 2020 finalized the rule to allow issuers to apply a standard 0.8% of premium for quality improvement (QI) measures in the MLR calculation. Additional QI amounts applied in rating equal 0.4%. Included in URRT Worksheet 2, “Administrative Expense”, and PA Rate Exhibits Table 6.

Profit (or Contribution to Surplus) & Risk Margin:

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

Taxes and Fees:

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

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

Plan Adjusted Index Rates

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

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

1. Actuarial Value and Cost Sharing adjustment: The Actuarial Value and Cost Sharing Adjustment is determined using CAIC’s actuarial cost model. CAIC uses an actuarial cost model to measure the impact of cost-sharing designs on cost and utilization amounts by service category. The cost model shows frequency per 1,000 per year by type of service (IP, OP, Professional), and allowed cost per service for each of the same types of service, normalized to a \$0 office visit copayment and a \$25 ER copayment. Given a particular benefit design (for example, \$20 office visit copayment), utilization is adjusted from the benchmark based on assumed utilization change factors, and cost per service is reduced by the copayment or coinsurance per service. Cost and utilization are multiplied together to derive a claim PMPM by service, summed for all services. The impact of global deductible,

coinsurance, and out-of-pocket max is then measured based on CPDs, where the value of services that apply to the CPDs adjusts the level of the curve, as well as global utilization adjustments.

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

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

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

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

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

Calibrated Plan Adjusted Index Rates

Age Curve Calibration: The average age factor is calculated by taking the member-weighted average of current small group enrollment by age in CBC. Age factors are applied in accordance with CMS's Standard Age Curve. The age calibration factor is adjusted for contracts with greater than three children under the age of 21. Please see file SG_20-40_Initial_CAIC_PPO_List-Billed_Supporting_20200519.xlsx for the calculation.

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

Geographic factors are unchanged from 2020.

Tobacco Factor Calibration: Tobacco factor not applied.

The calibration is:

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

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

The calibration factors and development are found on Exhibit N.

Consumer Adjusted Premium Rate Development

The Consumer Adjusted Premium Rate is developed as follows:

1. Member-Level Consumer Adjusted Premium Rate:

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

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

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

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

AV Metal Values

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

See AV Screenshots included with the submission.

AV Pricing Values

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

Projected Loss Ratio

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

Membership Projection

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

Attachments and Examples

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

PA Rate Exhibits Part I through Part V

Table 8

Exhibit A – Benefit Summary

Exhibit B – Benefit Change Summary
Exhibit C – Benefit Categories
Exhibit D – Benefit Mix
Exhibit E – Trend
Exhibit F – URRT
Exhibit G – Paid-to-Allowed Development
Exhibit H – Retention
Exhibit I – Projected Loss Ratio
Exhibit J – Index Rate
Exhibit K – Market Adjusted Index Rate
Exhibit L – Rate Development by Plan
Exhibit M – Plan Adjusted Index Rates
Exhibit N – Calibration
Exhibit O – Rating Factors
Exhibit P – Quarterly Base Rates
Exhibit Q – Morbidity Factor

Broker Contracts
Actuarial Value Screenshots
List-Billed Data
Extended OEP and Covid-19 Estimates

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 were calculated in accordance with actuarial standards of practice.
4. The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans, and in accordance with CFR 156.135(b)(2) as necessary. For any plan requiring an alternative method, the development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for benefits that deviate substantially from the parameters of the AVC and have a material impact on the actuarial value.
 - a. The analysis was
 - i. conducted by a member of the American Academy of Actuaries, and
 - ii. performed in accordance with generally accepted actuarial principles and methods.
5. Geographic area rating factors reflect only differences in the costs of delivery and not differences due to population morbidity.
6. All factor, benefit and other changes from the prior approved filing have been disclosed in the actuarial memorandum.
7. New plans are not considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106.
8. The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2021 Rate Filing Justification.



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



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

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

- Slowing migration to non-ACA group coverage options
- Suspension of the Health Insurer Fee in 2021
- Anticipated increase in facility and physician unit costs
- Anticipated changes in prescription drug unit costs
- Continuing change in utilization such as
 - Intensity of medical services rendered
 - Changes in place of service (e.g. continued migration of inpatient stays to outpatient setting)
 - Further migration from brand prescription drugs to generic prescription drugs
 - Favorable impacts of value based benefits designs
- 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

2021 Rates Table Template v10.0				
All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.				
If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.				
If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.				
If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.				
To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.				
HIOS Issuer ID*	82795			
Rate Effective Date*	1/1/2021			
Rate Expiration Date*	3/31/2021			
Rating Method*	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
82795PA0130001	Rating Area 6	No Preference	0-14	333.88
82795PA0130001	Rating Area 6	No Preference	15	363.56
82795PA0130001	Rating Area 6	No Preference	16	374.91
82795PA0130001	Rating Area 6	No Preference	17	386.26
82795PA0130001	Rating Area 6	No Preference	18	398.48
82795PA0130001	Rating Area 6	No Preference	19	410.70
82795PA0130001	Rating Area 6	No Preference	20	423.36
82795PA0130001	Rating Area 6	No Preference	21	436.45
82795PA0130001	Rating Area 6	No Preference	22	436.45
82795PA0130001	Rating Area 6	No Preference	23	436.45
82795PA0130001	Rating Area 6	No Preference	24	436.45
82795PA0130001	Rating Area 6	No Preference	25	438.20
82795PA0130001	Rating Area 6	No Preference	26	446.92
82795PA0130001	Rating Area 6	No Preference	27	457.40
82795PA0130001	Rating Area 6	No Preference	28	474.42
82795PA0130001	Rating Area 6	No Preference	29	488.39
82795PA0130001	Rating Area 6	No Preference	30	495.37
82795PA0130001	Rating Area 6	No Preference	31	505.85
82795PA0130001	Rating Area 6	No Preference	32	516.32
82795PA0130001	Rating Area 6	No Preference	33	522.87
82795PA0130001	Rating Area 6	No Preference	34	529.85
82795PA0130001	Rating Area 6	No Preference	35	533.34
82795PA0130001	Rating Area 6	No Preference	36	536.83
82795PA0130001	Rating Area 6	No Preference	37	540.33
82795PA0130001	Rating Area 6	No Preference	38	543.82
82795PA0130001	Rating Area 6	No Preference	39	550.80
82795PA0130001	Rating Area 6	No Preference	40	557.78
82795PA0130001	Rating Area 6	No Preference	41	568.26
82795PA0130001	Rating Area 6	No Preference	42	578.30
82795PA0130001	Rating Area 6	No Preference	43	592.26
82795PA0130001	Rating Area 6	No Preference	44	609.72
82795PA0130001	Rating Area 6	No Preference	45	630.23
82795PA0130001	Rating Area 6	No Preference	46	654.67
82795PA0130001	Rating Area 6	No Preference	47	682.17
82795PA0130001	Rating Area 6	No Preference	48	713.60
82795PA0130001	Rating Area 6	No Preference	49	744.58
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82795PA0130001	Rating Area 6	No Preference	51	813.98
82795PA0130001	Rating Area 6	No Preference	52	851.95
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82795PA0130001	Rating Area 6	No Preference	54	931.82
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82795PA0130001	Rating Area 6	No Preference	61	1226.42
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
82795PA0130001	Rating Area 6	No Preference	0-14	333.88
82795PA0130001	Rating Area 6	No Preference	15	363.56
82795PA0130001	Rating Area 6	No Preference	16	374.91
82795PA0130001	Rating Area 6	No Preference	17	386.26
82795PA0130001	Rating Area 6	No Preference	18	398.48
82795PA0130001	Rating Area 6	No Preference	19	410.70
82795PA0130001	Rating Area 6	No Preference	20	423.36
82795PA0130001	Rating Area 6	No Preference	21	436.45
82795PA0130001	Rating Area 6	No Preference	22	436.45
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82795PA0130001	Rating Area 6	No Preference	24	436.45
82795PA0130001	Rating Area 6	No Preference	25	438.20
82795PA0130001	Rating Area 6	No Preference	26	446.92
82795PA0130001	Rating Area 6	No Preference	27	457.40
82795PA0130001	Rating Area 6	No Preference	28	474.42
82795PA0130001	Rating Area 6	No Preference	29	488.39
82795PA0130001	Rating Area 6	No Preference	30	495.37
82795PA0130001	Rating Area 6	No Preference	31	505.85
82795PA0130001	Rating Area 6	No Preference	32	516.32
82795PA0130001	Rating Area 6	No Preference	33	522.87
82795PA0130001	Rating Area 6	No Preference	34	529.85
82795PA0130001	Rating Area 6	No Preference	35	533.34
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82795PA0130001	Rating Area 6	No Preference	38	543.82
82795PA0130001	Rating Area 6	No Preference	39	550.80
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82795PA0130001	Rating Area 6	No Preference	42	578.30
82795PA0130001	Rating Area 6	No Preference	43	592.26
82795PA0130001	Rating Area 6	No Preference	44	609.72
82795PA0130001	Rating Area 6	No Preference	45	630.23
82795PA0130001	Rating Area 6	No Preference	46	654.67
82795PA0130001	Rating Area 6	No Preference	47	682.17

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82795PA0130001	Rating Area 7	No Preference	60	1279.29
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82795PA0130001	Rating Area 9	No Preference	22	445.18
82795PA0130001	Rating Area 9	No Preference	23	445.18
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82795PA0130001	Rating Area 9	No Preference	25	446.96
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82795PA0130001	Rating Area 9	No Preference	63	1314.17
82795PA0130001	Rating Area 9	No Preference	64 and over	1335.53

2021 Rates Table Template v10.0				
<i>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.</i>				
<i>If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.</i>				
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HIOS Issuer ID*	82795			
Rate Effective Date*	4/1/2021			
Rate Expiration Date*	6/30/2021			
Rating Method*	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
82795PA0130001	Rating Area 6	No Preference	0-14	339.30
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82795PA0130001	Rating Area 6	No Preference	23	443.53
82795PA0130001	Rating Area 6	No Preference	24	443.53
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82795PA0130001	Rating Area 6	No Preference	44	619.61
82795PA0130001	Rating Area 6	No Preference	45	640.46
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82795PA0130001	Rating Area 6	No Preference	47	693.24
82795PA0130001	Rating Area 6	No Preference	48	725.17
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82795PA0130001	Rating Area 6	No Preference	50	792.14
82795PA0130001	Rating Area 6	No Preference	51	827.18
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82795PA0130001	Rating Area 6	No Preference	53	904.80
82795PA0130001	Rating Area 6	No Preference	54	946.94
82795PA0130001	Rating Area 6	No Preference	55	989.07
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82795PA0130001	Rating Area 6	No Preference	57	1080.88
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82795PA0130001	Rating Area 6	No Preference	60	1203.74
82795PA0130001	Rating Area 6	No Preference	61	1246.32
82795PA0130001	Rating Area 6	No Preference	62	1274.26
82795PA0130001	Rating Area 6	No Preference	63	1309.30
82795PA0130001	Rating Area 6	No Preference	64 and over	1330.58
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82795PA0130001	Rating Area 7	No Preference	16	411.47
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82795PA0130001	Rating Area 7	No Preference	18	437.34
82795PA0130001	Rating Area 7	No Preference	19	450.75
82795PA0130001	Rating Area 7	No Preference	20	464.64
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82795PA0130001	Rating Area 7	No Preference	22	479.01
82795PA0130001	Rating Area 7	No Preference	23	479.01
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82795PA0130001	Rating Area 7	No Preference	25	480.93
82795PA0130001	Rating Area 7	No Preference	26	490.51
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82795PA0130001	Rating Area 7	No Preference	28	520.69
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82795PA0130001	Rating Area 7	No Preference	31	555.18
82795PA0130001	Rating Area 7	No Preference	32	566.67
82795PA0130001	Rating Area 7	No Preference	33	573.86
82795PA0130001	Rating Area 7	No Preference	34	581.52
82795PA0130001	Rating Area 7	No Preference	35	585.35
82795PA0130001	Rating Area 7	No Preference	36	589.19
82795PA0130001	Rating Area 7	No Preference	37	593.02
82795PA0130001	Rating Area 7	No Preference	38	596.85
82795PA0130001	Rating Area 7	No Preference	39	604.51
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82795PA0130001	Rating Area 7	No Preference	53	977.19
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82795PA0130001	Rating Area 7	No Preference	55	1068.20
82795PA0130001	Rating Area 7	No Preference	56	1117.54
82795PA0130001	Rating Area 7	No Preference	57	1167.35
82795PA0130001	Rating Area 7	No Preference	58	1220.52
82795PA0130001	Rating Area 7	No Preference	59	1246.87
82795PA0130001	Rating Area 7	No Preference	60	1300.04
82795PA0130001	Rating Area 7	No Preference	61	1346.02
82795PA0130001	Rating Area 7	No Preference	62	1376.20
82795PA0130001	Rating Area 7	No Preference	63	1414.04
82795PA0130001	Rating Area 7	No Preference	64 and over	1437.03
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82795PA0130001	Rating Area 9	No Preference	16	388.61
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82795PA0130001	Rating Area 9	No Preference	18	413.04
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82795PA0130001	Rating Area 9	No Preference	24	452.40
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82795PA0130001	Rating Area 9	No Preference	26	463.26
82795PA0130001	Rating Area 9	No Preference	27	474.12
82795PA0130001	Rating Area 9	No Preference	28	491.76
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82795PA0130001	Rating Area 9	No Preference	30	513.47
82795PA0130001	Rating Area 9	No Preference	31	524.33
82795PA0130001	Rating Area 9	No Preference	32	535.19
82795PA0130001	Rating Area 9	No Preference	33	541.98
82795PA0130001	Rating Area 9	No Preference	34	549.21
82795PA0130001	Rating Area 9	No Preference	35	552.83
82795PA0130001	Rating Area 9	No Preference	36	556.45
82795PA0130001	Rating Area 9	No Preference	37	560.07
82795PA0130001	Rating Area 9	No Preference	38	563.69
82795PA0130001	Rating Area 9	No Preference	39	570.93
82795PA0130001	Rating Area 9	No Preference	40	578.17
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
82795PA0130001	Rating Area 6	No Preference	0-14	339.30
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82795PA0130001	Rating Area 6	No Preference	17	392.52
82795PA0130001	Rating Area 6	No Preference	18	404.94
82795PA0130001	Rating Area 6	No Preference	19	417.36
82795PA0130001	Rating Area 6	No Preference	20	430.22
82795PA0130001	Rating Area 6	No Preference	21	443.53
82795PA0130001	Rating Area 6	No Preference	22	443.53
82795PA0130001	Rating Area 6	No Preference	23	443.53
82795PA0130001	Rating Area 6	No Preference	24	443.53
82795PA0130001	Rating Area 6	No Preference	25	445.30
82795PA0130001	Rating Area 6	No Preference	26	454.17
82795PA0130001	Rating Area 6	No Preference	27	464.82
82795PA0130001	Rating Area 6	No Preference	28	482.12
82795PA0130001	Rating Area 6	No Preference	29	496.31

2021 Rates Table Template v10.0				
<i>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.</i>				
<i>If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.</i>				
<i>If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.</i>				
<i>If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.</i>				
<i>To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.</i>				
HIOS Issuer ID*	82795			
Rate Effective Date*	7/1/2021			
Rate Expiration Date*	9/30/2021			
Rating Method*	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
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82795PA0130001	Rating Area 6	No Preference	20	437.21
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82795PA0130001	Rating Area 6	No Preference	28	489.94
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82795PA0130001	Rating Area 6	No Preference	31	522.40
82795PA0130001	Rating Area 6	No Preference	32	533.21
82795PA0130001	Rating Area 6	No Preference	33	539.97
82795PA0130001	Rating Area 6	No Preference	34	547.19
82795PA0130001	Rating Area 6	No Preference	35	550.79
82795PA0130001	Rating Area 6	No Preference	36	554.40
82795PA0130001	Rating Area 6	No Preference	37	558.00
82795PA0130001	Rating Area 6	No Preference	38	561.61
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82795PA0130001	Rating Area 6	No Preference	40	576.03
82795PA0130001	Rating Area 6	No Preference	41	586.85
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82795PA0130001	Rating Area 6	No Preference	62	1294.95
82795PA0130001	Rating Area 6	No Preference	63	1330.55
82795PA0130001	Rating Area 6	No Preference	64 and over	1352.18
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82795PA0130001	Rating Area 7	No Preference	17	430.81
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82795PA0130001	Rating Area 7	No Preference	24	486.79
82795PA0130001	Rating Area 7	No Preference	25	488.74
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82795PA0130001	Rating Area 7	No Preference	30	552.50
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82795PA0130001	Rating Area 7	No Preference	32	575.87
82795PA0130001	Rating Area 7	No Preference	33	583.17
82795PA0130001	Rating Area 7	No Preference	34	590.96
82795PA0130001	Rating Area 7	No Preference	35	594.86
82795PA0130001	Rating Area 7	No Preference	36	598.75
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82795PA0130001	Rating Area 7	No Preference	39	614.33
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82795PA0130001	Rating Area 7	No Preference	41	633.80
82795PA0130001	Rating Area 7	No Preference	42	644.99
82795PA0130001	Rating Area 7	No Preference	43	660.57
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82795PA0130001	Rating Area 7	No Preference	45	702.92
82795PA0130001	Rating Area 7	No Preference	46	730.18
82795PA0130001	Rating Area 7	No Preference	47	760.85
82795PA0130001	Rating Area 7	No Preference	48	795.90
82795PA0130001	Rating Area 7	No Preference	49	830.46
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82795PA0130001	Rating Area 7	No Preference	59	1267.11
82795PA0130001	Rating Area 7	No Preference	60	1321.14
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82795PA0130001	Rating Area 7	No Preference	62	1398.54
82795PA0130001	Rating Area 7	No Preference	63	1437.00
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82795PA0130001	Rating Area 9	No Preference	24	459.74
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82795PA0130001	Rating Area 9	No Preference	36	565.49
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82795PA0130001	Rating Area 9	No Preference	38	572.84
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82795PA0130001	Rating Area 9	No Preference	40	587.55
82795PA0130001	Rating Area 9	No Preference	41	598.59
82795PA0130001	Rating Area 9	No Preference	42	609.16
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82795PA0130001	Rating Area 9	No Preference	64 and over	1379.22

2021 Rates Table Template v10.0				
<i>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.</i>				
<i>If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.</i>				
<i>If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.</i>				
<i>If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.</i>				
<i>To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.</i>				
HIOS Issuer ID*	82795			
Rate Effective Date*	10/1/2021			
Rate Expiration Date*	12/31/2021			
Rating Method*	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
82795PA0130001	Rating Area 6	No Preference	0-14	350.41
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82795PA0130001	Rating Area 6	No Preference	17	405.37
82795PA0130001	Rating Area 6	No Preference	18	418.20
82795PA0130001	Rating Area 6	No Preference	19	431.03
82795PA0130001	Rating Area 6	No Preference	20	444.31
82795PA0130001	Rating Area 6	No Preference	21	458.05
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82795PA0130001	Rating Area 6	No Preference	25	459.88
82795PA0130001	Rating Area 6	No Preference	26	469.04
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82795PA0130001	Rating Area 6	No Preference	28	497.90
82795PA0130001	Rating Area 6	No Preference	29	512.56
82795PA0130001	Rating Area 6	No Preference	30	519.89
82795PA0130001	Rating Area 6	No Preference	31	530.88
82795PA0130001	Rating Area 6	No Preference	32	541.87
82795PA0130001	Rating Area 6	No Preference	33	548.74
82795PA0130001	Rating Area 6	No Preference	34	556.07
82795PA0130001	Rating Area 6	No Preference	35	559.74
82795PA0130001	Rating Area 6	No Preference	36	563.40
82795PA0130001	Rating Area 6	No Preference	37	567.07
82795PA0130001	Rating Area 6	No Preference	38	570.73
82795PA0130001	Rating Area 6	No Preference	39	578.06
82795PA0130001	Rating Area 6	No Preference	40	585.39
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82795PA0130001	Rating Area 6	No Preference	42	606.92
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82795PA0130001	Rating Area 6	No Preference	47	715.93
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82795PA0130001	Rating Area 6	No Preference	49	781.43
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82795PA0130001	Rating Area 6	No Preference	63	1352.16
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82795PA0130001	Rating Area 7	No Preference	16	424.94
82795PA0130001	Rating Area 7	No Preference	17	437.80
82795PA0130001	Rating Area 7	No Preference	18	451.66
82795PA0130001	Rating Area 7	No Preference	19	465.51
82795PA0130001	Rating Area 7	No Preference	20	479.85
82795PA0130001	Rating Area 7	No Preference	21	494.69
82795PA0130001	Rating Area 7	No Preference	22	494.69
82795PA0130001	Rating Area 7	No Preference	23	494.69
82795PA0130001	Rating Area 7	No Preference	24	494.69
82795PA0130001	Rating Area 7	No Preference	25	496.67
82795PA0130001	Rating Area 7	No Preference	26	506.57
82795PA0130001	Rating Area 7	No Preference	27	518.44
82795PA0130001	Rating Area 7	No Preference	28	537.73
82795PA0130001	Rating Area 7	No Preference	29	553.56
82795PA0130001	Rating Area 7	No Preference	30	561.48
82795PA0130001	Rating Area 7	No Preference	31	573.35
82795PA0130001	Rating Area 7	No Preference	32	585.22
82795PA0130001	Rating Area 7	No Preference	33	592.64
82795PA0130001	Rating Area 7	No Preference	34	600.56
82795PA0130001	Rating Area 7	No Preference	35	604.52
82795PA0130001	Rating Area 7	No Preference	36	608.47
82795PA0130001	Rating Area 7	No Preference	37	612.43
82795PA0130001	Rating Area 7	No Preference	38	616.39
82795PA0130001	Rating Area 7	No Preference	39	624.30
82795PA0130001	Rating Area 7	No Preference	40	632.22
82795PA0130001	Rating Area 7	No Preference	41	644.09
82795PA0130001	Rating Area 7	No Preference	42	655.47
82795PA0130001	Rating Area 7	No Preference	43	671.30
82795PA0130001	Rating Area 7	No Preference	44	691.09
82795PA0130001	Rating Area 7	No Preference	45	714.34
82795PA0130001	Rating Area 7	No Preference	46	742.04
82795PA0130001	Rating Area 7	No Preference	47	773.21
82795PA0130001	Rating Area 7	No Preference	48	808.82
82795PA0130001	Rating Area 7	No Preference	49	843.95
82795PA0130001	Rating Area 7	No Preference	50	883.52
82795PA0130001	Rating Area 7	No Preference	51	922.60
82795PA0130001	Rating Area 7	No Preference	52	965.64

82795PA0130001	Rating Area 7	No Preference	53	1009.18
82795PA0130001	Rating Area 7	No Preference	54	1056.17
82795PA0130001	Rating Area 7	No Preference	55	1103.17
82795PA0130001	Rating Area 7	No Preference	56	1154.12
82795PA0130001	Rating Area 7	No Preference	57	1205.57
82795PA0130001	Rating Area 7	No Preference	58	1260.48
82795PA0130001	Rating Area 7	No Preference	59	1287.69
82795PA0130001	Rating Area 7	No Preference	60	1342.60
82795PA0130001	Rating Area 7	No Preference	61	1390.09
82795PA0130001	Rating Area 7	No Preference	62	1421.26
82795PA0130001	Rating Area 7	No Preference	63	1460.34
82795PA0130001	Rating Area 7	No Preference	64 and over	1484.07
82795PA0130001	Rating Area 9	No Preference	0-14	357.42
82795PA0130001	Rating Area 9	No Preference	15	389.19
82795PA0130001	Rating Area 9	No Preference	16	401.33
82795PA0130001	Rating Area 9	No Preference	17	413.48
82795PA0130001	Rating Area 9	No Preference	18	426.56
82795PA0130001	Rating Area 9	No Preference	19	439.65
82795PA0130001	Rating Area 9	No Preference	20	453.19
82795PA0130001	Rating Area 9	No Preference	21	467.21
82795PA0130001	Rating Area 9	No Preference	22	467.21
82795PA0130001	Rating Area 9	No Preference	23	467.21
82795PA0130001	Rating Area 9	No Preference	24	467.21
82795PA0130001	Rating Area 9	No Preference	25	469.08
82795PA0130001	Rating Area 9	No Preference	26	478.42
82795PA0130001	Rating Area 9	No Preference	27	489.64
82795PA0130001	Rating Area 9	No Preference	28	507.86
82795PA0130001	Rating Area 9	No Preference	29	522.81
82795PA0130001	Rating Area 9	No Preference	30	530.28
82795PA0130001	Rating Area 9	No Preference	31	541.50
82795PA0130001	Rating Area 9	No Preference	32	552.71
82795PA0130001	Rating Area 9	No Preference	33	559.72
82795PA0130001	Rating Area 9	No Preference	34	567.19
82795PA0130001	Rating Area 9	No Preference	35	570.93
82795PA0130001	Rating Area 9	No Preference	36	574.67
82795PA0130001	Rating Area 9	No Preference	37	578.41
82795PA0130001	Rating Area 9	No Preference	38	582.14
82795PA0130001	Rating Area 9	No Preference	39	589.62
82795PA0130001	Rating Area 9	No Preference	40	597.10
82795PA0130001	Rating Area 9	No Preference	41	608.31
82795PA0130001	Rating Area 9	No Preference	42	619.05
82795PA0130001	Rating Area 9	No Preference	43	634.01
82795PA0130001	Rating Area 9	No Preference	44	652.69
82795PA0130001	Rating Area 9	No Preference	45	674.65
82795PA0130001	Rating Area 9	No Preference	46	700.82
82795PA0130001	Rating Area 9	No Preference	47	730.25
82795PA0130001	Rating Area 9	No Preference	48	763.89
82795PA0130001	Rating Area 9	No Preference	49	797.06
82795PA0130001	Rating Area 9	No Preference	50	834.44
82795PA0130001	Rating Area 9	No Preference	51	871.35
82795PA0130001	Rating Area 9	No Preference	52	912.00
82795PA0130001	Rating Area 9	No Preference	53	953.11
82795PA0130001	Rating Area 9	No Preference	54	997.50
82795PA0130001	Rating Area 9	No Preference	55	1041.88
82795PA0130001	Rating Area 9	No Preference	56	1090.00
82795PA0130001	Rating Area 9	No Preference	57	1138.59
82795PA0130001	Rating Area 9	No Preference	58	1190.45
82795PA0130001	Rating Area 9	No Preference	59	1216.15
82795PA0130001	Rating Area 9	No Preference	60	1268.01
82795PA0130001	Rating Area 9	No Preference	61	1312.86
82795PA0130001	Rating Area 9	No Preference	62	1342.30
82795PA0130001	Rating Area 9	No Preference	63	1379.21
82795PA0130001	Rating Area 9	No Preference	64 and over	1401.62

Capital Advantage Insurance Company
Small Group Rates
Effective 1/1/2021
Benefit Summary

SMALL GROUP 1-50 PORTFOLIO

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

1 Drug copays listed are Preferred Generic/Non-Preferred Generic/Preferred Brand/Non-Preferred Brand
2 Speciality drug coverage = 20% up to \$250 per fill/20% up to \$350 per fill/20% up to \$450 per fill
3 Tiered Lab benefits. Independent labs | Hospital based labs
4 D = Deductible D/\$ = Deductible applies first then a copay
5 Plan naming convention = Metal level, Plan type, Deductible/Coinsurance/Office Visit Copay - HRA funding

**Capital Advantage Insurance Company
Small Group Rates
Effective 1/1/2021
Benefit Change Summary**

Line	On/Off Exchange	New/Existing	HIOS	Med Description	Rx Description	AV		Pricing AV		Metal Level		HRA Amount		Deductible(2x Family)		Coinsurance		MOOP	
						2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021
1	Off Exchange	Existing	45127PA0010055	Platinum PPO 0/0/15	Rx 0	91.1%	91.3%	101.2%		Platinum	Platinum	0	0	0	0	0%	0%	6,650	6,900
2	Off Exchange	Existing	45127PA0010054	Platinum PPO 0/0/15	Rx 250	90.1%	88.4%	99.6%		Platinum	Platinum	0	0	0	0	0%	0%	6,650	6,900
3	Off Exchange	Existing	45127PA0010058	Platinum PPO 250/0/15	Rx 0	89.6%	89.4%	97.5%		Platinum	Platinum	0	0	250	250	0%	0%	6,650	6,900
4	Off Exchange	Existing	45127PA0010057	Platinum PPO 250/0/15	Rx 250	88.5%	86.9%	95.9%		Platinum	Platinum	0	0	250	250	0%	0%	6,650	6,900
5	Off Exchange	Existing	45127PA0010117	Gold PPO 500/0/25	Rx 0	81.9%	79.7%	96.7%		Gold	Gold	0	0	500	500	0%	0%	6,650	8,550
6	Off Exchange	Existing	45127PA0010116	Gold PPO 500/0/25	Rx 250	81.2%	78.0%	95.0%		Gold	Gold	0	0	500	500	0%	0%	6,650	8,550
7	Off Exchange	Existing	45127PA0010085	Gold PPO 1000/0/25	Rx 0	79.3%	79.0%	90.9%		Gold	Gold	0	0	1,000	1,000	0%	0%	7,900	8,550
8	Off Exchange	Existing	45127PA0010084	Gold PPO 1000/0/25	Rx 250	78.5%	77.4%	89.2%		Gold	Gold	0	0	1,000	1,000	0%	0%	7,900	8,550
9	Off Exchange	Existing	45127PA00130002	Gold Valley Advantage EPO 2000/0/20	Rx 0	80.8%	77.6%	90.8%		Gold	Gold	0	0	1,000	2,000	0%	0%	7,900	8,550
10	Off Exchange	Existing	45127PA00130001	Gold Valley Advantage EPO 2000/0/20	Rx 250	80.0%	76.2%	89.1%		Gold	Gold	0	0	1,000	2,000	0%	0%	7,900	8,550
11	Off Exchange	Existing	45127PA0010161	Gold QHDHP PPO 1500/0/10	Combined	78.6%	76.1%	86.8%		Gold	Gold	0	0	1,500	1,500	0%	0%	6,650	6,900
12	Off Exchange	Existing	45127PA0010090	Gold PPO 2000/0/20	Rx 0	78.3%	77.7%	83.6%		Gold	Gold	0	0	2,000	2,000	0%	0%	7,900	8,550
13	Off Exchange	Existing	45127PA0010089	Gold PPO 2000/0/20	Rx 250	77.5%	76.2%	81.9%		Gold	Gold	0	0	2,000	2,000	0%	0%	7,900	8,550
14	Off Exchange	Existing	45127PA0010191	Gold PPO 2000/20/20	Rx 0	78.1%	79.8%	79.1%		Gold	Gold	0	0	2,000	2,000	20%	20%	7,900	8,550
15	Off Exchange	Existing	45127PA0010190	Gold PPO 2000/20/20	Rx 250	77.2%	78.2%	77.4%		Gold	Gold	0	0	2,000	2,000	20%	20%	7,900	8,550
16	Off Exchange	Existing	45127PA0010189	Gold Shared Deductible PPO 3000/0/25 - 500	Rx 0	80.0%	79.9%	84.0%		Gold	Gold	500	500	3,000	3,000	0%	0%	7,900	8,550
17	Off Exchange	Existing	45127PA0010188	Gold Shared Deductible PPO 3000/0/25 - 500	Rx 250	79.3%	78.6%	82.2%		Gold	Gold	500	500	3,000	3,000	0%	0%	7,900	8,550
18	Off Exchange	Existing	45127PA0010195	Gold PPO 3000/0/15	Rx 0	77.1%	78.1%	80.6%		Gold	Gold	0	0	3,000	3,000	0%	0%	7,900	8,550
19	Off Exchange	Existing	45127PA0010194	Gold PPO 3000/0/15	Rx 250	76.2%	76.6%	78.9%		Gold	Gold	0	0	3,000	3,000	0%	0%	7,900	8,550
20	Off Exchange	New	45127PA0010196	Gold Easy Blue PPO 0/0/25	Rx 0		80.2%				Gold		0						8,550
21	Off Exchange	New	45127PA0010197	Gold PPO Choice 3000/0/30	Rx \$250		77.2%				Gold								
22	Off Exchange	New	45127PA0010198	Gold PPO Choice 3000/0/30	Rx \$0		79.0%				Gold								
23	Off Exchange	New	45127PA0010199	Silver QHDHP-E PPO 4500/0/10	Combined		66.1%				Silver								6,900
24	Off Exchange	Existing	45127PA0010132	Silver PPO 4000/0/45	Rx 0	72.0%	70.4%	76.9%		Silver	Silver	0	0	4,000	4,000	0%	0%	7,900	8,550
25	Off Exchange	Existing	45127PA0010131	Silver PPO 4000/0/45	Rx 250	71.3%	69.1%	75.1%		Silver	Silver	0	0	4,000	4,000	0%	0%	7,900	8,550
26	Off Exchange	Existing	45127PA0010185	Silver PPO 5000/0/40	Rx 0	71.2%	70.3%	72.6%		Silver	Silver	0	0	5,000	5,000	0%	0%	7,900	8,550
27	Off Exchange	Existing	45127PA0010184	Silver PPO 5000/0/40	Rx 250	70.5%	69.0%	70.8%		Silver	Silver	0	0	5,000	5,000	0%	0%	7,900	8,550
28	Off Exchange	Existing	45127PA00130004	Silver Valley Advantage EPO 5000/0/35	Rx 0	70.9%	70.2%	73.8%		Silver	Silver	0	0	5,000	5,000	0%	0%	7,900	8,550
29	Off Exchange	Existing	45127PA00130003	Silver Valley Advantage EPO 5000/0/35	Rx 250	70.2%	68.9%	71.9%		Silver	Silver	0	0	5,000	5,000	0%	0%	7,900	8,550
30	Off Exchange	Existing	45127PA0010187	Silver PPO 6000/0/35	Rx 0	70.2%	69.5%	71.1%		Silver	Silver	0	0	6,000	6,000	0%	0%	7,900	8,550
31	Off Exchange	Existing	45127PA0010186	Silver PPO 6000/0/35	Rx 250	69.5%	68.4%	69.2%		Silver	Silver	0	0	6,000	6,000	0%	0%	7,900	8,550
32	Off Exchange	Existing	45127PA0010124	Silver QHDHP PPO 2750/0/25	Combined	71.2%	68.8%	78.9%		Silver	Silver	0	0	2,750	2,750	0%	0%	6,650	6,900
33	Off Exchange	Existing	45127PA0010170	Silver QHDHP PPO 3500/0/25	Combined	69.0%	67.3%	72.5%		Silver	Silver	0	0	3,500	3,500	0%	0%	6,650	6,900
34	Off Exchange	Existing	45127PA0010135	Bronze QHDHP-E PPO 6900/0/0	Combined	62.7%	64.8%	60.0%		Bronze	Bronze	0	0	6,650	6,900	0%	0%	6,650	6,900
35	Off Exchange	Existing	82795PA00130001	Gold PPO 0/0/20	Rx 500	80.7%	80.3%	87.7%	87.4%	Gold	Gold	0	0	0	0	0%	0%	6,650	8,550
36	Off Exchange	Existing	53789PA0090004	Bronze HMO 8000/0/50	Combined	63.0%	63.5%	54.0%		Bronze	Bronze	0	0	7,000	8,000	0%	0%	7,900	8,550

**Capital Advantage Insurance Company
Small Group Rates
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Line	On/Off Exchange	New/Existing	HIOS	Med Description	Rx Description	ACA PCP		Non-ACA PCP		SPC		ER		UC		IP Hosp Copay Per Day		Hi-Tech Imaging		Low End Imaging		Lab Independent		Lab Hospital-Based		OP Surg ASC	
						2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021
1	Off Exchange	Existing	45127PA0010055	Platinum PPO 0/0/15	Rx 0	15	15	15	15	30	30	150	150	50	50	N/A	N/A	0	0	0	0	15	15	30	30	0	0
2	Off Exchange	Existing	45127PA0010054	Platinum PPO 0/0/15	Rx 250	15	15	15	15	30	30	150	150	50	50	N/A	N/A	0	0	0	0	15	15	30	30	0	0
3	Off Exchange	Existing	45127PA0010058	Platinum PPO 250/0/15	Rx 0	15	15	15	15	30	30	D/200	D/200	50	50	N/A	N/A	D/0	D/0	D/0	D/0	15	15	D/30	D/30	D/0	D/0
4	Off Exchange	Existing	45127PA0010057	Platinum PPO 250/0/15	Rx 250	15	15	15	15	30	30	D/200	D/200	50	50	N/A	N/A	D/0	D/0	D/0	D/0	15	15	D/30	D/30	D/0	D/0
5	Off Exchange	Existing	45127PA0010117	Gold PPO 500/0/25	Rx 0	20	25	20	25	40	55	D/250	D/350	75	75	N/A	N/A	D/125	D/125	D/0	D/0	20	25	D/40	D/55	125	D/350
6	Off Exchange	Existing	45127PA0010116	Gold PPO 500/0/25	Rx 250	20	25	20	25	40	55	D/250	D/350	75	75	N/A	N/A	D/125	D/125	D/0	D/0	20	25	D/40	D/55	125	D/350
7	Off Exchange	Existing	45127PA0010085	Gold PPO 1000/0/25	Rx 0	25	25	25	25	50	50	D/250	D/250	75	75	N/A	N/A	D/0	D/0	D/0	D/0	25	25	D/50	D/50	150	D/250
8	Off Exchange	Existing	45127PA0010084	Gold PPO 1000/0/25	Rx 250	25	25	25	25	50	50	D/250	D/250	75	75	N/A	N/A	D/0	D/0	D/0	D/0	25	25	D/50	D/50	150	D/250
9	Off Exchange	Existing	45127PA00130002	Gold Valley Advantage EPO 2000/0/20	Rx 0	25	20	25	20	50	40	D/250	D/250	75	75	N/A	N/A	D/125	D/125	D/0	D/0	D/25	D/20	D/25	D/20	D/125	D/250
10	Off Exchange	Existing	45127PA0130001	Gold Valley Advantage EPO 2000/0/20	Rx 250	25	20	25	20	50	40	D/250	D/250	75	75	N/A	N/A	D/125	D/125	D/0	D/0	D/25	D/20	D/25	D/20	D/125	D/250
11	Off Exchange	Existing	45127PA0010161	Gold QHDHP PPO 1500/0/10	Combined	D/15	D/10	D/15	D/10	D/30	D/30	D/250	D/250	D/75	D/75	N/A	N/A	D/0	D/0	D/0	D/0	D/15	D/10	D/30	D/30	D/0	D/250
12	Off Exchange	Existing	45127PA0010090	Gold PPO 2000/0/20	Rx 0	20	20	20	20	40	40	D/250	D/250	75	75	N/A	N/A	D/0	D/0	D/0	D/0	20	20	D/40	D/40	100	D/250
13	Off Exchange	Existing	45127PA0010089	Gold PPO 2000/0/20	Rx 250	20	20	20	20	40	40	D/250	D/250	75	75	N/A	N/A	D/0	D/0	D/0	D/0	20	20	D/40	D/40	100	D/250
14	Off Exchange	Existing	45127PA0010191	Gold PPO 2000/20/20	Rx 0	20	20	20	20	40	40	D/250	D/250	75	75	N/A	N/A	D/20%	D/20%	D/20%	D/20%	D/20%	D/20%	D/40%	D/40%	D/20%	D/20%
15	Off Exchange	Existing	45127PA0010190	Gold PPO 2000/20/20	Rx 250	20	20	20	20	40	40	D/250	D/250	75	75	N/A	N/A	D/20%	D/20%	D/20%	D/20%	D/20%	D/20%	D/40%	D/40%	D/20%	D/20%
16	Off Exchange	Existing	45127PA0010189	Gold Shared Deductible PPO 3000/0/25 - 500	Rx 0	25	25	25	25	50	60	D/250	D/250	75	75	N/A	N/A	D/0	D/0	D/0	D/0	25	25	D/50	D/60	250	D/250
17	Off Exchange	Existing	45127PA0010188	Gold Shared Deductible PPO 3000/0/25 - 500	Rx 250	25	25	25	25	50	60	D/250	D/250	75	75	N/A	N/A	D/0	D/0	D/0	D/0	25	25	D/50	D/60	250	D/250
18	Off Exchange	Existing	45127PA0010195	Gold PPO 3000/0/15	Rx 0	15	15	15	15	30	30	D/150	D/150	100	100	N/A	N/A	D/0	D/0	D/0	D/0	15	15	D/30	D/30	125	D/150
19	Off Exchange	Existing	45127PA0010194	Gold PPO 3000/0/15	Rx 250	15	15	15	15	30	30	D/150	D/150	100	100	N/A	N/A	D/0	D/0	D/0	D/0	15	15	D/30	D/30	125	D/150
20	Off Exchange	New	45127PA0010196	Gold Easy Blue PPO 0/0/25	Rx 0		25		25		50		200				4,000		200		25			50		2,000	
21	Off Exchange	New	45127PA0010197	Gold PPO Choice 3000/0/30	Rx \$250																						
22	Off Exchange	New	45127PA0010198	Gold PPO Choice 3000/0/30	Rx \$0																						
23	Off Exchange	New	45127PA0010199	Silver QHDHP-E PPO 4500/0/10	Combined		D/10		D/10		D/20		D/350		100								D/10		D/20		D/350
24	Off Exchange	Existing	45127PA0010132	Silver PPO 4000/0/45	Rx 0	35	45	35	45	65	75	D/350	D/400	100	100	D/125	D/125	D/300	D/300	D/0	D/0	35	45	D/65	D/75	250	D/400
25	Off Exchange	Existing	45127PA0010131	Silver PPO 4000/0/45	Rx 250	35	45	35	45	65	75	D/350	D/400	100	100	D/125	D/125	D/300	D/300	D/0	D/0	35	45	D/65	D/75	250	D/400
26	Off Exchange	Existing	45127PA0010185	Silver PPO 5000/0/40	Rx 0	35	40	35	40	65	65	D/350	D/350	100	100	N/A	N/A	D/0	D/0	D/0	D/0	35	40	D/65	D/65	500	D/350
27	Off Exchange	Existing	45127PA0010184	Silver PPO 5000/0/40	Rx 250	35	40	35	40	65	65	D/350	D/350	100	100	N/A	N/A	D/0	D/0	D/0	D/0	35	40	D/65	D/65	500	D/350
28	Off Exchange	Existing	45127PA0130004	Silver Valley Advantage EPO 5000/0/35	Rx 0	35	35	35	35	65	65	D/350	D/350	100	100	N/A	N/A	D/325	D/325	D/0	D/0	D/35	D/35	D/35	D/35	D/250	D/350
29	Off Exchange	Existing	45127PA0130003	Silver Valley Advantage EPO 5000/0/35	Rx 250	35	35	35	35	65	65	D/350	D/350	100	100	N/A	N/A	D/325	D/325	D/0	D/0	D/35	D/35	D/35	D/35	D/250	D/350
30	Off Exchange	Existing	45127PA0010187	Silver PPO 6000/0/35	Rx 0	35	35	35	35	65	65	D/350	D/350	100	100	N/A	N/A	D/0	D/0	D/0	D/0	35	35	D/65	D/65	500	D/350
31	Off Exchange	Existing	45127PA0010186	Silver PPO 6000/0/35	Rx 250	35	35	35	35	65	65	D/350	D/350	100	100	N/A	N/A	D/0	D/0	D/0	D/0	35	35	D/65	D/65	500	D/350
32	Off Exchange	Existing	45127PA0010124	Silver QHDHP PPO 2750/0/25	Combined	D/25	D/25	D/25	D/25	D/50	D/50	D/350	D/350	D/100	D/100	N/A	N/A	D/200	D/200	D/0	D/0	D/25	D/25	D/50	D/50	D/0	D/350
33	Off Exchange	Existing	45127PA0010170	Silver QHDHP PPO 3500/0/25	Combined	D/25	D/25	D/25	D/25	D/50	D/50	D/350	D/350	D/100	D/100	N/A	N/A	D/0	D/0	D/0	D/0	D/25	D/25	D/50	D/50	D/0	D/350
34	Off Exchange	Existing	45127PA0010135	Bronze QHDHP-E PPO 6900/0/0	Combined	D/0	D/0	D/0	D/0	D/0	D/0	D/0	D/0	D/0	D/0	N/A	N/A	D/0	D/0	D/0	D/0	D/0	D/0	D/0	D/0	D/0	D/0
35	Off Exchange	Existing	82795PA0130001	Gold PPO 0/0/20	Rx 500	25	20	25	20	50	40	300	300	75	75	500	500	250	250	0	0	25	20	50	40	125	300
36	Off Exchange	Existing	53789PA0090004	Bronze HMO 8000/0/50	Combined	50	50	50	50	D/0	D/0	D/0	D/0	D/0	D/0	N/A	N/A	D/0	D/0	D/0	D/0	D/50	D/50	D/100	D/100	D/0	D/0

Capital Advantage Insurance Company
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 Benefit Change Summary

Line	On/Off Exchange	New/Existing	HIOS	Med Description	Rx Description	OP Surg AHC		Rx Ded		Rx Gen - Ded Applies?		Rx Gen Pref		Rx Gen Non-Pref		Rx Brand Pref		Rx Brand Non-Pref		Rx Specialty Coin Tier 1		Rx Specialty Max Tier 1		Rx Specialty Coin Tier 2		Rx Specialty Max Tier 2		Rx Gen P
						2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020
1	Off Exchange	Existing	45127PA0010055	Platinum PPO 0/0/15	Rx 0	0	0	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
2	Off Exchange	Existing	45127PA0010054	Platinum PPO 0/0/15	Rx 250	0	0	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
3	Off Exchange	Existing	45127PA0010058	Platinum PPO 250/0/15	Rx 0	D/0	D/0	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
4	Off Exchange	Existing	45127PA0010057	Platinum PPO 250/0/15	Rx 250	D/0	D/0	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
5	Off Exchange	Existing	45127PA0010117	Gold PPO 500/0/25	Rx 0	D/250	D/350	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
6	Off Exchange	Existing	45127PA0010116	Gold PPO 500/0/25	Rx 250	D/250	D/350	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
7	Off Exchange	Existing	45127PA0010085	Gold PPO 1000/0/25	Rx 0	D/300	D/250	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
8	Off Exchange	Existing	45127PA0010084	Gold PPO 1000/0/25	Rx 250	D/300	D/250	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
9	Off Exchange	Existing	45127PA0130002	Gold Valley Advantage EPO 2000/0/20	Rx 0	D/125	D/250	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
10	Off Exchange	Existing	45127PA0130001	Gold Valley Advantage EPO 2000/0/20	Rx 250	D/125	D/250	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
11	Off Exchange	Existing	45127PA0010161	Gold QHDHP PPO 1500/0/10	Combined	D/0	D/250	Combined	Combined	Y	Y	7	7	25	25	55	55	80	80	20%	20%	250	250	20%	20%	350	350	0%
12	Off Exchange	Existing	45127PA0010090	Gold PPO 2000/0/20	Rx 0	D/200	D/250	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
13	Off Exchange	Existing	45127PA0010089	Gold PPO 2000/0/20	Rx 250	D/200	D/250	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
14	Off Exchange	Existing	45127PA0010191	Gold PPO 2000/20/20	Rx 0	D/40%	D/20%	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
15	Off Exchange	Existing	45127PA0010190	Gold PPO 2000/20/20	Rx 250	D/40%	D/20%	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
16	Off Exchange	Existing	45127PA0010189	Gold Shared Deductible PPO 3000/0/25 - 500	Rx 0	D/500	D/250	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
17	Off Exchange	Existing	45127PA0010188	Gold Shared Deductible PPO 3000/0/25 - 500	Rx 250	D/500	D/250	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
18	Off Exchange	Existing	45127PA0010195	Gold PPO 3000/0/15	Rx 0	D/250	D/150	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
19	Off Exchange	Existing	45127PA0010194	Gold PPO 3000/0/15	Rx 250	D/250	D/150	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
20	Off Exchange	New	45127PA0010196	Gold Easy Blue PPO 0/0/25	Rx 0		2,000	0	0	N	N		4	15	15	45	45	70	70	20%	20%		250	20%	20%	350	350	0%
21	Off Exchange	New	45127PA0010197	Gold PPO Choice 3000/0/30	Rx \$250			250	250	Y	Y		7	25	25	55	55	80	80	20%	20%		250	20%	20%	350	350	0%
22	Off Exchange	New	45127PA0010198	Gold PPO Choice 3000/0/30	Rx \$0			0	0	N	N		4	15	15	45	45	70	70	20%	20%		250	20%	20%	350	350	0%
23	Off Exchange	New	45127PA0010199	Silver QHDHP-E PPO 4500/0/10	Combined			Combined	Combined	Y	Y		7	25	25	55	55	80	80	20%	20%		250	20%	20%	350	350	0%
24	Off Exchange	Existing	45127PA0010132	Silver PPO 4000/0/45	Rx 0	D/500	D/400	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
25	Off Exchange	Existing	45127PA0010131	Silver PPO 4000/0/45	Rx 250	D/500	D/400	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
26	Off Exchange	Existing	45127PA0010185	Silver PPO 5000/0/40	Rx 0	D/1000	D/350	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
27	Off Exchange	Existing	45127PA0010184	Silver PPO 5000/0/40	Rx 250	D/1000	D/350	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
28	Off Exchange	Existing	45127PA0130004	Silver Valley Advantage EPO 5000/0/35	Rx 0	D/250	D/350	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
29	Off Exchange	Existing	45127PA0130003	Silver Valley Advantage EPO 5000/0/35	Rx 250	D/250	D/350	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
30	Off Exchange	Existing	45127PA0010187	Silver PPO 6000/0/35	Rx 0	D/1000	D/350	0	0	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
31	Off Exchange	Existing	45127PA0010186	Silver PPO 6000/0/35	Rx 250	D/1000	D/350	250	250	N	N	4	7	15	25	45	55	70	80	20%	20%	250	250	20%	20%	350	350	0%
32	Off Exchange	Existing	45127PA0010124	Silver QHDHP PPO 2750/0/25	Combined	D/0	D/350	Combined	Combined	Y	Y	7	7	25	25	55	55	80	80	20%	20%	250	250	20%	20%	350	350	0%
33	Off Exchange	Existing	45127PA0010170	Silver QHDHP PPO 3500/0/25	Combined	D/0	D/350	Combined	Combined	Y	Y	7	7	25	25	55	55	80	80	20%	20%	250	250	20%	20%	350	350	0%
34	Off Exchange	Existing	45127PA0010135	Bronze QHDHP-E PPO 6900/0/0	Combined	D/0	D/0	Combined	Combined	Y	Y	0	0	0	0	0	0	0	0	0%	0%	0	0	0%	0%	0	0	0%
35	Off Exchange	Existing	82795PA0130001	Gold PPO 0/0/20	Rx 500	250	300	500	500	N	N	4	4	15	15	45	45	70	70	20%	20%	250	250	20%	20%	350	350	0%
36	Off Exchange	Existing	53789PA0090004	Bronze HMO 8000/0/50	Combined	D/0	D/0	Combined	Combined	Y	Y	0	0	0	0	0	0	0	0	0%	0%	0	0	0%	0%	0	0	0%

**Capital Advantage Insurance Company
Small Group Rates
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Benefit Change Summary**

Line	On/Off Exchange	New/Existing	HIOS	Med Description	Rx Description	ref Coins 2021	Rx Gen Non-Pref Coins		Rx Brand Pref Coin		Rx Brand Non-Pref Coins		Rx Gen Pref Mail Copay		Rx Gen Non-Pref Mail Copay		Rx Brand Pref Mail Copay		Rx Brand Non-Pref Mail Copay	
							2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021
1	Off Exchange	Existing	45127PA0010055	Platinum PPO 0/0/15	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
2	Off Exchange	Existing	45127PA0010054	Platinum PPO 0/0/15	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
3	Off Exchange	Existing	45127PA0010058	Platinum PPO 250/0/15	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
4	Off Exchange	Existing	45127PA0010057	Platinum PPO 250/0/15	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
5	Off Exchange	Existing	45127PA0010117	Gold PPO 500/0/25	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
6	Off Exchange	Existing	45127PA0010116	Gold PPO 500/0/25	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
7	Off Exchange	Existing	45127PA0010085	Gold PPO 1000/0/25	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
8	Off Exchange	Existing	45127PA0010084	Gold PPO 1000/0/25	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
9	Off Exchange	Existing	45127PA0130002	Gold Valley Advantage EPO 2000/0/20	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
10	Off Exchange	Existing	45127PA0130001	Gold Valley Advantage EPO 2000/0/20	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
11	Off Exchange	Existing	45127PA0010161	Gold QHDHP PPO 1500/0/10	Combined	0%	0%	0%	0%	0%	0%	14	14	50	50	110	110	160	160	
12	Off Exchange	Existing	45127PA0010090	Gold PPO 2000/0/20	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
13	Off Exchange	Existing	45127PA0010089	Gold PPO 2000/0/20	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
14	Off Exchange	Existing	45127PA0010191	Gold PPO 2000/20/20	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
15	Off Exchange	Existing	45127PA0010190	Gold PPO 2000/20/20	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
16	Off Exchange	Existing	45127PA0010189	Gold Shared Deductible PPO 3000/0/25 - 500	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
17	Off Exchange	Existing	45127PA0010188	Gold Shared Deductible PPO 3000/0/25 - 500	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
18	Off Exchange	Existing	45127PA0010195	Gold PPO 3000/0/15	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
19	Off Exchange	Existing	45127PA0010194	Gold PPO 3000/0/15	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
20	Off Exchange	New	45127PA0010196	Gold Easy Blue PPO 0/0/25	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
21	Off Exchange	New	45127PA0010197	Gold PPO Choice 3000/0/30	Rx \$250	0%	0%	0%	0%	0%	0%	14	14	50	50	110	110	160	160	
22	Off Exchange	New	45127PA0010198	Gold PPO Choice 3000/0/30	Rx \$0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
23	Off Exchange	New	45127PA0010199	Silver QHDHP-E PPO 4500/0/10	Combined	0%	0%	0%	0%	0%	0%	14	14	50	50	110	110	160	160	
24	Off Exchange	Existing	45127PA0010132	Silver PPO 4000/0/45	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
25	Off Exchange	Existing	45127PA0010131	Silver PPO 4000/0/45	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
26	Off Exchange	Existing	45127PA0010185	Silver PPO 5000/0/40	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
27	Off Exchange	Existing	45127PA0010184	Silver PPO 5000/0/40	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
28	Off Exchange	Existing	45127PA0130004	Silver Valley Advantage EPO 5000/0/35	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
29	Off Exchange	Existing	45127PA0130003	Silver Valley Advantage EPO 5000/0/35	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
30	Off Exchange	Existing	45127PA0010187	Silver PPO 6000/0/35	Rx 0	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
31	Off Exchange	Existing	45127PA0010186	Silver PPO 6000/0/35	Rx 250	0%	0%	0%	0%	0%	0%	8	14	30	50	90	110	140	160	
32	Off Exchange	Existing	45127PA0010124	Silver QHDHP PPO 2750/0/25	Combined	0%	0%	0%	0%	0%	0%	14	14	50	50	110	110	160	160	
33	Off Exchange	Existing	45127PA0010170	Silver QHDHP PPO 3500/0/25	Combined	0%	0%	0%	0%	0%	0%	14	14	50	50	110	110	160	160	
34	Off Exchange	Existing	45127PA0010135	Bronze QHDHP-E PPO 6900/0/0	Combined	0%	0%	0%	0%	0%	0%	0	0	0	0	0	0	0	0	
35	Off Exchange	Existing	82795PA0130001	Gold PPO 0/0/20	Rx 500	0%	0%	0%	0%	0%	0%	8	8	30	30	90	90	140	140	
36	Off Exchange	Existing	53789PA0090004	Bronze HMO 8000/0/50	Combined	0%	0%	0%	0%	0%	0%	0	0	0	0	0	0	0	0	

Capital Advantage Insurance Company
 Small Group Rates
 Effective 1/1/2021
 Benefit Categories

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

Capital Advantage Insurance Company

Small Group Rates

Effective 1/1/2021

Benefit Mix Changes

Benefit Mix Calculation

	<u>Manual Cost PMPM</u>
Average in Experience Period	335.86
Average in Rating Period	344.64
Benefit Mix Adjustment	1.026

<u>BEP Manual Cost Calcul</u>	335.86	506,640
	<u>Manual Cost</u>	
<u>HIOS 14 Digit</u>	<u>PMPM</u>	<u>BEP MM</u>
45127PA0010054	397.86	14,139
45127PA0010055	406.45	29,116
45127PA0010057	382.86	8,623
45127PA0010058	391.70	20,320
45127PA0010084	353.16	14,066
45127PA0010085	363.50	44,922
45127PA0010089	324.26	28,616
45127PA0010090	335.07	92,025
45127PA0010116	374.00	10,253
45127PA0010117	384.00	31,332
45127PA0010161	341.50	6,529
45127PA0010188	325.11	0
45127PA0010189	335.92	48
45127PA0010190	305.58	267
45127PA0010191	316.81	200
45127PA0010194	312.38	0
45127PA0010195	323.39	0
45127PA0010124	303.29	23,397
45127PA0010131	295.32	18,500
45127PA0010132	307.48	34,841
45127PA0010170	278.56	17,399
45127PA0010184	278.61	5,746
45127PA0010185	291.03	9,555
45127PA0010186	272.87	2,764
45127PA0010187	285.41	3,233
45127PA0010135	238.46	16,010
45127PA0010069	308.63	1,042
45127PA0010070	317.78	4,739
45127PA0010100	376.35	969
45127PA0010101	385.38	1,085
45127PA0010143	310.59	15,029
45127PA0010144	319.72	49,082
45127PA0010192	311.49	100
45127PA0010193	317.72	80
45127PA0020008	315.96	0
45127PA0130001	322.80	121
45127PA0130002	333.65	81
45127PA0130003	282.87	292
45127PA0130004	295.24	56
53789PA0090004	248.69	1,145
82795PA0130001	328.90	801
82795PA0110007	316.61	117

<u>Projected 2021 Manual C</u>	344.64	777
	<u>Total</u>	<u>Proj Member</u>
<u>HIOS 14 Digit</u>		<u>Dist</u>
82795PA0130001	344.64	777

Capital Advantage Insurance Company

Small Group Rates

Effective 1/1/2021

Trend

Trend by Service Category

Category	Year 1			Year 2			Total Year 1	Total Year 2	Weights	Total Weights
	Cost	Util	Induced Demand	Cost	Util	Induced Demand				
Inpatient Hospital	5.40%	0.00%	0.00%	5.70%	0.00%	0.0%	5.4%	5.7%	23%	19%
Outpatient Hospital	5.70%	0.00%	0.00%	5.90%	0.00%	0.0%	5.7%	5.9%	46%	38%
Professional	5.30%	0.00%	0.00%	5.20%	0.00%	0.0%	5.3%	5.2%	28%	23%
Other Medical	5.70%	0.00%	0.00%	5.90%	0.00%	0.0%	5.7%	5.9%	3%	3%
Capitation	3.00%	0.00%	0.00%	3.00%	0.00%	0.0%	3.0%	3.0%	0%	0%
Prescription Drug	9.60%	1.00%	0.00%	10.40%	1.30%	0.0%	10.7%	11.8%	100%	18%
Dental & Vision	1.00%	1.00%	0.00%	1.00%	1.00%	0.0%	2.0%	2.0%	100%	100%

<u>Aggregate Pricing Trend Year 1</u>	
Total	6.5%
Medical	5.5%
Drug	10.7%
Agg Med + Rx Trend	6.5%
Dental and Vision	2.0%

<u>Aggregate Pricing Trend Year 2</u>	
Total	6.8%
Medical	5.7%
Drug	11.8%
Agg Med + Rx Trend	6.8%
Dental and Vision	2.0%

URRT Categories	<u>Year 1 Raw Trends*</u>				<u>Year 2 Raw Trends*</u>			
	Cost	Utilization	Induced Demand	Composite	Cost	Utilization	Induced Demand	Composite
Inpatient Hospital	4.8%	0.0%	0.0%	4.8%	5.1%	0.0%	0.0%	5.1%
Outpatient Hospital	5.1%	0.0%	0.0%	5.1%	5.3%	0.0%	0.0%	5.3%
Professional	4.7%	0.0%	0.0%	4.7%	4.6%	0.0%	0.0%	4.6%
Other Medical	5.1%	0.0%	0.0%	5.1%	5.3%	0.0%	0.0%	5.3%
Capitation	3.0%	0.0%	0.0%	3.0%	3.0%	0.0%	0.0%	3.0%
Prescription Drugs	9.0%	1.0%	0.0%	11.2%	9.8%	1.3%	0.0%	12.2%
Dental & Vision	1.0%	1.0%	0.0%	2.0%	1.0%	1.0%	0.0%	2.0%

*From Hospital and Physician Trend Models

<u>Adjustments to Pricing Trend</u>			
<u>Medical</u>		<u>Drug</u>	
Intensity	0.0%	Contracting	0.0%
Leveraging	0.6%	Leveraging	0.6%
Demographics	0.0%	Demographics	0.0%
Buy-Downs	0.0%	Buy-Downs	0.0%
Other	0.0%	Pipeline	0.0%
Total	0.6%	Total	0.6%

**Capital Advantage Insurance Company
Small Group Rates
Effective 1/1/2021
Credibility Manual Development for URRT**

Experience Period Member Months 506,640

Section II: Projections

Benefit Category	Experience Period Index Rate PMPM	Year 1 Trend		Year 2 Trend		Trended EHB Allowed Claims PMPM	Trended EHB Allowed Claims		
		Cost	Utilization	Cost	Utilization		Incurred	Allowed	PMPM
Inpatient Hospital	\$ 113.02	1.054	1.000	1.057	1.000	125.91	\$ 56,134,773	\$ 57,260,190	\$ 113.02
Outpatient Hospital	\$ 224.22	1.057	1.000	1.059	1.000	250.98	\$ 94,271,696	\$ 113,600,449	\$ 224.22
Professional	\$ 134.75	1.053	1.000	1.052	1.000	149.27	\$ 51,248,521	\$ 68,271,307	\$ 134.75
Other Medical	\$ 16.05	1.057	1.000	1.059	1.000	17.97	\$ 6,689,556	\$ 8,132,115	\$ 16.05
Capitation	\$ 0.02	1.030	1.000	1.030	1.000	0.02	\$ 11,449	\$ 11,449	\$ 0.02
Prescription Drug	\$ 109.24	1.096	1.010	1.104	1.013	135.24	\$ 47,198,883	\$ 55,342,828	\$ 109.24
Total	\$ 597.30					679.39			\$ 597.30

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

Morbidity	1.016
Other	
Change in Demographics	1.0000
Change in Network	0.9909
Change in Benefits	1.0000
Change in Other	1.0000
Projected Index Rate	683.95

**Capital Advantage Insurance Company
Small Group Rates
Effective 1/1/2021
Paid to Allowed Ratio Development**

Medical Rate Development

Base Experience Period:	1/1/2018-12/31/2018
Data as of:	3/31/2019
Rating Period:	1/1/2020 - 12/31/2020
Trend Months:	24
Trend:	5.5%

Drug Rate Development

Base Experience Period:	1/1/2018-12/31/2018
Data as of:	3/31/2019
Rating Period:	1/1/2020 - 12/31/2020
Trend Months:	24
Trend:	10.7%

Pediatric Dental Rate Development

Base Experience Period:	1/1/2018-12/31/2018
Data as of:	3/31/2019
Rating Period:	1/1/2020 - 12/31/2020
Trend Months:	24
Trend:	2.0%

Pediatric Vision Rate Development

Base Experience Period:	1/1/2018-12/31/2018
Data as of:	3/31/2019
Rating Period:	1/1/2020 - 12/31/2020
Trend Months:	24
Trend:	2.0%

1	Medical Paid and Incurred Claims + ACA Payments	202,009,296
2	Completion Factor	0.97
3	BEP Completed Claims (1) / (2)	207,351,865
4	BEP Member Months	506,640
5	BEP Completed Claim PMPM (3) / (4)	409.27
6	Trend Factor	1.11
7	Trended Claim PMPM (5) x (6)	455.70
8	Benefit Change Factor	1.026
9	Morbidity	1.016
10	Capitation	11,449
11	Capitation PMPM	0.02
12	Other Adjustment	1.000
13	Total Benefit Adjusted Claim PMPM [(7) x (8) x (9) x (10) + (11)] x (12)	475.11

1	BEP Paid and Incurred Claims	61,352,156
2	Completion Factor	1.000
3	BEP Completed Claims (1) / (2)	61,352,156
4	BEP Member Months	506,640
5	BEP Completed Claim PMPM (3) / (4)	121.10
6	Trend Factor	1.23
7	Trended Claim PMPM (5) x (6)	148.39
8	Benefit Change Factor	1.026
9	Morbidity	1.016
10	Rx Rebates	14,153,273
11	Rx Rebates PMPM	27.94
12	Other Adjustment (Rx Contracting Savings)	0.950
13	Total Benefit Adjusted Claim PMPM [(7) x (8) x (9) x (10) + (11)] x (12)	120.43

1	BEP Paid and Incurred Claims	870,303
2	Completion Factor	0.955
3	BEP Completed Claims (1) / (2)	911,502
4	BEP Member Months	506,640
5	BEP Completed Claim PMPM (3) / (4)	1.80
6	Trend Factor	1.04
7	Trended Claim PMPM (5) x (6)	1.87
8	Benefit Change Factor	1.00
9	Morbidity	1.016
10		
11		
12	Other Adjustment	1.000
13	Total Benefit Adjusted Claim PMPM [(7) x (8) x (9) x (10) + (11)] x (12)	1.90

1	BEP Paid and Incurred Claims	80,330
2	Completion Factor	0.990
3	BEP Completed Claims (1) / (2)	81,178
4	BEP Member Months	506,640
5	BEP Completed Claim PMPM (3) / (4)	0.16
6	Trend Factor	1.04
7	Trended Claim PMPM (5) x (6)	0.17
8	Benefit Change Factor	1.00
9	Morbidity	1.016
10		
11		
12	Other Adjustment	1.000
13	Total Benefit Adjusted Claim PMPM [(7) x (8) x (9) x (10) + (11)] x (12)	0.17

Expected Claim PMPM in

	<u>Rating Period</u>
Medical	475.11
Drug	120.43
Pediatric Dental	1.90
Pediatric Vision	0.17
Expected Distribution of Embedded Dental Benefit	100%
Total Expected Incurred in Rating Period	597.61
Total Expected Incurred in Rating Period Net RA	597.43

*Other Adjustment is for Rx Contracting

Projected Allowed	683.96
Paid to Allowed Ratio	0.874

**Capital Advantage Insurance Company
Small Group Rates
Effective 1/1/2021
Retention**

	<u>Medical + Rx</u>	<u>Dental</u>	<u>Vision</u>	<u>Total</u>	<u>% of Premium</u>
Reinsurance Contribution	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
Risk Adjustment Fee	\$0.25	\$0.00	\$0.00	\$0.25	0.0%
Admin PMPM	\$49.18	\$0.60	\$0.09	\$49.87	7.1%
Broker PMPM	\$19.91	\$0.00	\$0.00	\$19.91	2.8%
Placeholder 1	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
Placeholder 2	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
Placeholder 3	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
Quality Improvement	0.4%	0.4%	0.4%	0.4%	0.4%
Contingency	2.0%	2.0%	2.0%	2.0%	2.0%
Patient-Centered Outcomes Research Trust Fund:	\$0.20	\$0.00	\$0.00	\$0.20	0.0%
Insurer Tax	0.0%	0.0%	0.0%	0.0%	0.0%
Exchange Fee	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
Federal Income Tax	0.4%	0.4%	0.4%	0.4%	0.4%
Premium Tax	2.0%	2.0%	2.0%	2.0%	2.0%

Insurer Tax and Admin Fee Calc

Applied HIF to All Quarters 0.00%

<u>Quarter</u>	<u>% of Enrollees</u>	<u>HIF</u>		<u>2021 assessment</u>	<u>2022 assessment</u>
1	26%	0.00%	0	0.00%	0.00%
2	16%	0.00%	3	0.00%	0.00%
3	15%	0.00%	6	0.00%	0.00%
4	43%	0.00%	9	0.00%	0.00%

	<u>Admin</u>	<u>Profit</u>	<u>Taxes</u>
	10.3%	2.0%	2.5%
Claims	7.1%		
Broker	2.8%		
Quality Improvement	0.4%		

HIOS	82795PA0130001
Med Plan	Gold PPO 0/0/20
Rx Plan	Rx 500
Deductible	0
Expected Claim Cost	597.43
Expected Premium PMPM *	\$701.46
<u>Allowed Adjustments to Premium for MLR</u>	
Reinsurance Contribution	0.00
Patient-Centered Outcomes Research Trust Fund:	0.20
Risk Adjustment Fee	0.25
Premium Tax	14.03
Insurer Tax	0.00
Exchange Fee	0.00
Quality Improvement	2.81
Federal Income Tax**	2.95
MLR Adjusted Claims	\$600.24
MLR Adjusted Premium	\$684.04
Expected Member Distribution	100.0%

Unadjusted Premium	\$701.46
Expected MLR Adjusted Claims	\$600.24
Expected MLR Adjusted Premium	\$684.04

MLR	87.7%
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* From Exhibit L

**21% of profit or contingency (assumed to be 2%)

**Capital Advantage Insurance Company
 Small Group Rates
 Effective 1/1/2021
 Projected Index Rate**

Projected Index Rate	\$683.96
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<u>Effective Date</u>	<u>Total Index Rate</u>	<u>Trend</u>	<u>Distribution of Members</u>	<u>Projected Allowed</u>	<u>Market Adjusted Index Rate</u>
January - March (Index 1)	\$683.96		26%	\$683.96	\$683.75
April - June (Index 2)	\$694.76	6.5%	16%	\$695.05	\$694.85
July - September (Index 3)	\$705.73	6.5%	15%	\$706.33	\$706.13
October - December (Index 4)	\$716.87	6.5%	43%	\$717.80	\$717.59
Average for Projection Period	\$703.25			\$703.79	\$703.59

* From URRT and Exhibit B

Small Group Rates

Effective 1/1/2021

Market Adjusted Index Rate

Development of Market Adjusted Index Rate

Q1 Index Rate	683.96
Paid to Allowed	0.87
Q1 Projected Claims	597.61
Net Projected ACA Reinsurace Recoveries	0.00
Net Projected Risk Adjustments PMPM	0.18
Exchange User Fee Adjustment	0.00
Q1 Market-Adjusted Projected Paid EHB Claims PMPM	597.43
Q1 Market Adjusted Index Rate	683.75

Development of Exchange User Fee

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

Development of Risk Adjustment Projection

Projected 2021 Risk Adjustment Transfer	\$0.18
Projected 2019 Risk Adjustment Payment Payable	\$57,595
2019 MemberMonths	918
Projected 2019 Risk Adjustment Payment PMPM	\$62.74

Show Normalization

Adjustment for Network	1.000
Adjustment for Induced Demand	1.000

Rate Development by Benefit Option

Off Exchange

Level of Coverage	Gold
HIOS	82795PA0130001
Med Plan Name:	Gold PPO 0/0/20
Rx:	Rx 500
Network:	PPO
HRA	N
Q1 Market Adjusted Index Rate	683.75

AV and Cost Sharing Adjustment	0.87
Network	1.000
Induced Demand	1.000

Total Projected Claims PMPM + Market Level Adjustments:	597.43
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Retention

Admin PMPM	\$49.87
Broker PMPM	\$19.91
Risk Adjustment User Fee	\$0.25
PCORTF	\$0.20
Placeholder1	\$0.00
Placeholder2	\$0.00
Premium Tax	2.0%
Federal Income Tax	0.4%
Insurer Tax	0.0%
Contingency	2.0%
Quality Improvement	0.4%

Premium Neutrality	1.61
Total Premium Single Rate:	\$436.45
Plan Adjusted Index Rates	\$701.46
Expected Member Distribution	100.0%

	\$69.78
Admin	10.3%
Taxes	2.5%

Benefit Plans

#	Combo Description	100%	777	New or Existing	Product ID	Plan ID	On/Off Exchange	Metal Level	Metal Value	Pricing Value	Network	Induced Demand	Product	Med Plan Description	Deductible	Drug Plan	Pediatric Dental	Pediatric Vision	Average Plan Adj	Q1 Plan Adj Index	Q2 Plan Adj Index	Q3 Plan Adj Index	Q4 Plan Adj Index	Annual Trend
		Projected Membership	Proj MM																Index Rate	Rate	Rate	Rate	Rate	Medical & Rx
1	Gold PPO 0/0/20 Rx 500	100.0%	777	Existing	82795PA013	82795PA0130001	Off Exchange	Gold	80.3%	87.4%	1.00	1.00	PPO	Gold PPO 0/0/20	0	Rx 500	Embedded	Embedded	\$701.46	\$701.46	\$712.54	\$723.79	\$735.22	6.47%

**Capital Advantage Insurance Company
Small Group Rates
Effective 1/1/2021
Calibration**

Expected Average Age Factor:	1.564
List-Billed Adjustment for Max 3 Children	1.007
Adjusted Average Age Factor	1.554
Expected Average Region Factor:	1.03
Expected Average Tobacco Factor	1.00
Cumulative Rating Factors (Premium Neutrality):	1.607

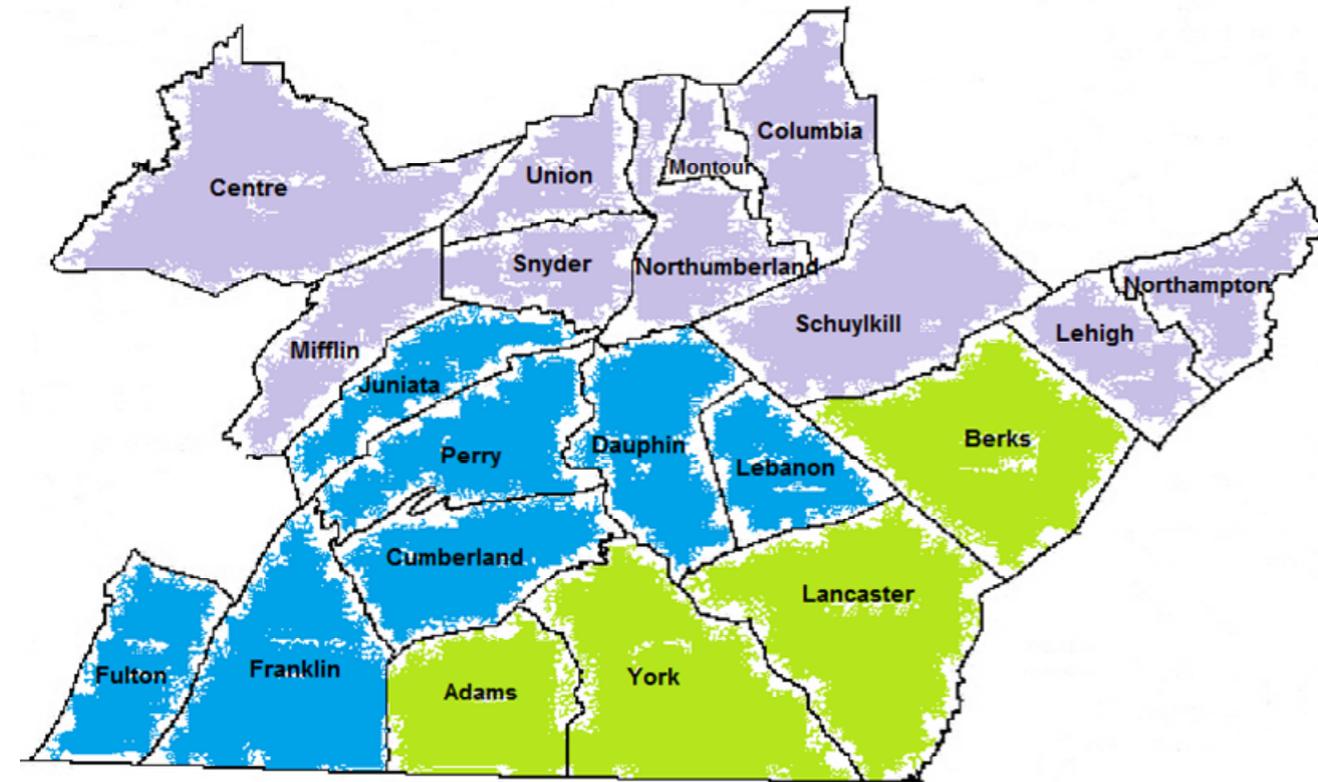
Age Factors			Region Factors		
<u>Age</u>	<u>Distribution of Population</u>	<u>Age Factor</u>	<u>Region</u>	<u>Distribution of Population</u>	<u>Factor</u>
0-14	12.9%	0.7650	6	43.0%	1.0000
15	0.9%	0.8330	7	38.5%	1.0800
16	1.1%	0.8590	9	18.5%	1.0200
17	1.0%	0.8850			
18	1.0%	0.9130			
19	1.1%	0.9410			
20	1.2%	0.9700			
21	1.3%	1.0000			
22	1.3%	1.0000			
23	1.3%	1.0000			
24	1.4%	1.0000			
25	1.6%	1.0040			
26	1.6%	1.0240			
27	1.6%	1.0480			
28	1.7%	1.0870			
29	1.7%	1.1190			
30	1.7%	1.1350			
31	1.6%	1.1590			
32	1.7%	1.1830			
33	1.6%	1.1980			
34	1.6%	1.2140			
35	1.6%	1.2220			
36	1.7%	1.2300			
37	1.6%	1.2380			
38	1.8%	1.2460			
39	1.6%	1.2620			
40	1.8%	1.2780			
41	1.6%	1.3020			
42	1.6%	1.3250			
43	1.7%	1.3570			
44	1.5%	1.3970			
45	1.6%	1.4440			
46	1.8%	1.5000			
47	1.8%	1.5630			
48	1.8%	1.6350			
49	2.1%	1.7060			
50	2.0%	1.7860			
51	2.0%	1.8650			
52	2.1%	1.9520			
53	2.1%	2.0400			
54	2.1%	2.1350			
55	2.2%	2.2300			
56	2.2%	2.3330			
57	2.1%	2.4370			
58	2.3%	2.5480			
59	2.3%	2.6030			
60	2.2%	2.7140			
61	2.3%	2.8100			
62	2.2%	2.8730			
63	1.9%	2.9520			
64+	3.3%	3.0000			

Capital Advantage Insurance Company
 Small Group Rates
 Effective 1/1/2021
 Rating Factors

Age Factors

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

Region



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

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

**Capital Advantage Insurance Company
Small Group Rates
Effective 1/1/2021
Morbidity Factor Calculation**

From Ib Manual Data Table 2

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

Premium PMPM	Incurred Clm PMPM	Loss Ratio*
\$ 622.61	\$ 504.41	81.0%

*Loss Ratio gross of risk adjustment

For Small Groups still in PPACA Insured Market as of 202003

Earned Premium	Ultimate Incurred Claims	Member Months	Total Prescription Drug Rebates*	Total EHB Capitation
\$ 238,870,979.77	\$ 209,254,862.68	380,074	\$ (12,678,614.93)	\$ 99,207.90

Premium PMPM	Incurred Clm PMPM	Loss Ratio*
\$ 628.49	\$ 517.47	82.3%

*Loss Ratio gross of risk adjustment

Change in Incurred Claims	Change in LR	Morbidity Factor Applied	Addl Factor*	Total Morbidity
2.6%	1.6%	1.016	1.000	1.016

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

June 23, 2020

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

**Re: Capital Advantage Insurance Company
Small Group Rates
Filing No 20-40
TOI Code: H15G Group Health – Hospital/Surgical/Medical Expense
Sub-TOI Code: H15G.003 Small Group Only
Filing Type: Rate**

Dear Ms. Gray:

CAIC received an objection letter from the Department dated June 16, 2020. CAIC is providing the following in response to the objection letter:

- Q&A written response
- Q&A exhibits
- Risk adjustment calculation workbook
- Trend leveraging calculation workbook
- Completeness and Redaction Justification Checklist
- Broker commission schedules
- Revised Rate Development workbook
- Revised PAAM Exhibits
- Revised URRT
- Revised Rates (PA and Federal Templates)
- Revised Memos – Actuarial, Cover Letter

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

- Question 1: Update to Table 2 BEP risk adjustment
- Question 4: Change to trend
- Question 5: Change to Table 5, Projected Index Rate, Market-Adjusted Index Rate, and Total Allowed Claims, Projected Incurred Risk Adjustment PMPM
- Question 7: Change to projected risk adjustment
- Question 8: Change to risk adjustment fee amount

- Questions 9: Change to Table 7, 2020 amounts
- Question 10: Change to Table 9, 2020 amounts
- Question 11: Change to induced demand - change is to show formula only, values are the same
- Question 18: Correct formula in Exhibit L to include PCORTF. This flows to Table 10, taxes and fees
- Question 19: Change to projected loss ratio formula
- Question 20: Change to morbidity factor
- Question 21: Correction to URRT Worksheet 2 formula

If you have any questions regarding this filing, please call me at [REDACTED] (or via email at [REDACTED]) or [REDACTED] at [REDACTED] ([REDACTED]). Thank you for your assistance in this matter.

Sincerely,

[REDACTED]

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

Enclosures

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

CAPITAL ADVANTAGE INSURANCE COMPANY, INC.

Question and Answer Small Group Rates Effective January 1, 2021

With this response, please find corresponding Q&A Exhibits in SG_20-40_Initial_CAIC_PPO_Q&AExhibits1_Supporting_20200623.xlsx

Question 1. Per Table 2: Experience Period Claims and Premiums, please update the Estimated Risk Adjustment, in cell L36, to reflect the amount provided in the Department issued RATEE files.

Answer 1. Estimate Risk Adjustment has been updated with the amount provided by the Department.

Question 2. Regarding Trend:

- a. Is the data in Table 4 or 4b utilized in developing the proposed trend?
- b. Is the data in Table 4 or 4b raw unadjusted data or has it been normalized or otherwise adjusted? If the data has been adjusted, please provide an exhibit that quantitatively shows the unadjusted allowed monthly data for the 48 months. Also include the following monthly data:
 - i. The average age factor;
 - ii. The average geographic factor;
 - iii. The average tobacco factor;
 - iv. The average benefit factor;
 - v. The normalized average PMPM (should match the allowed PMPMs in Column L of Table 4b).

Answer 2.

- a. The data in Table 4/4b is not utilized to develop trend.
- b. The data in Table 4/4b is raw unadjusted data.

Question 3. Please provide support for not including any utilization trend in the Medical trend amounts.

Answer 3. Annually, the actuarial team meets with our Chief Medical Officer to discuss utilization trends by market segment based on provider conversations and emerging trends in the medical community. Based on those conversations, her best estimate is no change in utilization from 2019 to 2021. Please note this is pre-Covid-19, as Covid-19 factors will be applied separately.

Question 4. Please demonstrate the development of the leveraging and intensity adjustments utilized on the Exhibit E_Trend tab.

Answer 4. Please see SG_20-39_Initial_CAAC_PPO_Leveraging_Supporting_20200623.xlsx , tab: LeveragingSGAllData. In order to determine the future impact of leveraging, including the impact of increasing cost sharing due to allowed costs rising, the exhibit shows a claim probability distribution with allowed amounts by range. The data is 2019 CBC ACA single risk pool population. The average AV in the Small Group market is approximately 0.85. From the data, I can infer that a deductible (applying to all services) of \$1,296 is equal to 85% AV for this population. Using that deductible amount, I can measure incurred claims and member cost-sharing trend, given an allowed trend of 6.5%. Claims are trended in a database in order to move claims into the correct buckets. You can see that the total allowed amounts are increasing at 6.5% annually (columns P and Z). Given the deductible and allowed trend, incurred claims trend at 7.1%, member cost-share at 1.4% and leveraging is $7.1\% - 6.5\% = 0.6\%$. The leveraging factor has been updated from 0.5% to 0.6% to match the calculation.

The intensity factor of 0.5% is being revised to 0% with this submission. While intensity of OP services continues to grow, that has been offset by reductions in IP services.

Question 5. Per Table 5: Development of the Projected Index Rate, Market-Adjusted Index Rate, and Total Allowed Claims, Projected Incurred Risk Adjustment PMPM, please update the amount, as necessary. Please remember to update the URRT as well.

Answer 5. All identified amounts and templates have been updated.

Question 6. Please provide quantitative and qualitative support for not applying any adjustment for a change in demographics or geography.

Answer 6. We utilize the assumption that new membership will resemble existing membership, making changes to demographics or region negligible.

Question 7. Please provide quantitative development of the projected incurred risk adjustment PMPM included in Table 5 of the PA Rate Template. Specifically, provide the necessary quantitative and qualitative support, as well as the source and any adjustments to the source information, for each item included in the risk adjustment calculation (i.e., carrier and statewide PLRS, IDF, GCF, ARF, AV, premium).

Answer 7. The projected risk adjustment PMPM has been updated to reflect 2019 risk adjustment amounts provided by the Department as the baseline. The baseline is then adjusted for changes in risk between 2019 and May 2020. Please see SG_20-40_Initial_CAIC_PPO_RiskCalc_Supporting_CONF_20200623.xlsx for the RA calculation and assumptions including all values requested above. Please note that the 2019 amounts do not exactly match the Department's values, but are reasonably close. These will be updated once CMS releases their final report.

The Summary tab contains the final projected incurred risk adjustment PMPM, highlighted in yellow.

Question 8. Per Table 6: Retention:

- a. Please provide the proposed commission schedules for 2021.
- b. Using the proposed commission schedules, quantitatively show the development of the percent and PMPM amounts in cells C51 and D51.
- c. Using the 2019 SCHE in the Annual Statement, please quantitatively show the development of the Quality Improvements initiatives percent and PMPM amount.
- d. Please update the risk adjustment user fee to \$0.25, per the 2021 Final Benefit Notice and Payment Parameters.

Answer 8.

- a. Please see SG_20-40_Initial_CAIC_PPO_PPMABrokerGroup_Supporting_CONF_20200623 and SG_20-40_Initial_CAIC_PPO_SPMABrokerGroup_Supporting_CONF_20200623 for the unredacted commission schedules.
- b. The commission amounts for 2021 are the same as 2020, so past and current financial line of business reports are used to determine the PMPM amount. \$19.91 on Exhibit H - Retention is the 2020 budgeted CBC Small Group broker fee amount. (Note that 2019 also utilized the same commission schedule and actual broker commissions paid in the year were \$20.66 PMPM.) \$19.91 is then calculated as a percent of premium using average premium PMPM calculated in Exhibit I – Projected Loss Ratio. That premium is slightly higher than that shown in Table 6 due to using projected membership, while Table 6 relies on current membership averages to calculate retention PMPMs. This causes slight differences in the values between Exhibit H and Table 6.
- c. According to MLR rebate rules, 0.4% is the maximum allowable Quality Improvement (QI) amount to include in the MLR rebate calculations without providing extensive documentation. For that reason, the same amount is used in pricing. But please note the 2019 SHCE shows a QI amount greater than 0.4%.
- d. The risk adjustment fee amount has been updated to \$0.25.

Question 9. Per Table 7: Normalized Market-Adjusted Projected Allowed Total Claims, the data in column J, 2020, appears to be inconsistent with the 2020 approved annual filing. Please update or explain.

Answer 9. The values have been corrected to reflect the 2020 approved annual filing. The original submission reflected values from the Q3/Q4 quarterly filing.

Question 10. Per Table 9: Year-over-Year Data to Support Table 8, the data listed in Column J, 2020, appears to be inconsistent with the 2020 annual approved filing. Please update or explain.

Answer 10. The values have been corrected to reflect the 2020 approved annual filing. The original submission reflected values from the Q3/Q4 quarterly filing.

Question 11. Per the Department’s published guidance, the Benefit Richness factors in Table 10 Column L should be developed based upon the following formula: $(\text{Plan Pricing AV in column K} * \text{CSR Defunding Adjustment in column P})^2 - (\text{Plan Pricing AV in column K} * \text{CSR Defunding Adjustment in column P}) + 1.24$. Further, the value developed by the quadratic formula must then be multiplied by a normalization constant such that the value in Cell L15 or

L16 balances back to 1.000. Please modify the cells in Column L to explicitly show the quadratic formula and normalizing constant to demonstrate compliance with our guidance.

Answer 11. The requested formula has been added. The values are the same as originally filed.

Question 12. Please provide quantitative support for the development of the area factors. This should include a demonstration of how morbidity differences were excluded from the area factor development.

Answer 12. Capital's Small Group area factors were approved in the 2020 filing, and we are continuing to rely on the data provided at that time. We are proposing no changes to the factors in 2021 in order to offer stable pricing in the market.

Question 13. Per Table 14. Network Factors, PPO Choice is a new network being offered this year. Has this network been approved by the Pennsylvania Department of Health? If not, when is the expected approval date? If it has been approved, please add the DOH Approval Date in Cell O29.

Answer 13. PPO Choice is not being offered under CAIC and has been removed from Table 14.

Question 14. Is the network, PPO Choice, a narrow network?

Answer 14. PPO Choice is not being offered under CAIC and has been removed from Table 14.

Question 15. Per Exhibit B_BenChange, please update the Pricing AV column to represent the years 2020 and 2021.

Answer 15. Exhibit B has been corrected.

Question 16. Please provide support for not applying an induced utilization adjustment to the experience period allowed claims due to an increase in benefit mix as noted on Exhibit D_BenMix.

Answer 16. The changes in benefit mix are small enough that we did not deem an induced demand factor greater than 1.0 necessary. We believe induced demand changes to allowed claims in this market segment are negligible. Exhibit D – Benefit Change shows the expected changes to incurred claims due to differences in cost sharing between the BEP and the projection period, which is used to develop the Paid-to-Allowed ratio in Exhibit G.

Question 17. The Federal Income Tax in Exhibit H_Ret is calculated as a subset of the Contingency amount (21% of the 2% Contingency). However, it is included in the rate development as an amount in addition to the 2% Contingency amount. Please provide an explanation as to why this approach is appropriate and does not double count the impact of Federal Income Tax (i.e., 2.0% is stated as the Contingency amount in the actuarial memorandum but 2.42% is actually included into the rate development).

Answer 17. . Federal income tax is estimated using 2% contingency and included as an allowable retention item. While federal income tax is tied to UW gain/loss, and that amount can only be estimated by considering contingency pricing, it is its own retention line item separate from contingency.

Question 18. Please validate that the Patient-Centered Outcomes Research Trust Fund fee from the Exhibit H_Ret tab flows through to the appropriate exhibits (i.e., Exhibit I_Proj_LR).

Answer 18. Exhibit I – Projected Loss Ratio has been corrected to display the same PCORTF amount found in Exhibit H. PCORTF was also missing from Exhibit L – Rate Development, which feeds retention percentages to Table 10. This has been corrected.

Question 19. Per Exhibit I_ProjLR, Quality Improvements is being subtracted from the denominator in calculating the federal medical loss ratio. Per my understanding, the federal medical loss ratio equation is (Incurred Claims + Quality Improvements) / (Premiums + Taxes & Fees). Please explain why it is appropriate to subtract Quality Improvements from the denominator instead of adding it to the numerator.

Answer 19. Exhibit I – Projected Loss Ratio has been corrected to use the formula described above.

Question 20. We have the following questions related to the morbidity adjustment on the ExhibitQ_Morbidity tab:

- a. Please provide additional support to demonstrate that the higher loss ratio is not due to a shift in plan and/or rating area distribution (i.e., provide the information for all members and those active as of 202003 by metal level and rating area).
- b. Please provide the average risk score for each grouping from item a.
- c. Please provide quantitative and qualitative support for how the impact of new members as of 202003 were accounted for in the morbidity calculation. Also provide the distribution of new and continuing members as of 202003.
- d. Please provide qualitative and quantitative support for the 1.070 additional factor used in the morbidity calculation in cell D18.

Answer 20.

- a. Please see Q&A Exhibit 1 for the requested data.
- b. Please see Q&A Exhibit 1 for the requested data. The risk score utilized here is CBC's internal risk score, which is useful in comparison of two populations.
- c. Please see Q&A Exhibit 1 for the requested data. Renewing members are any members active in 2019 with enrollment in 202003. New members make up an insignificant percentage of the pool and are assumed to have characteristics similar to the renewing members.
- d. The additional morbidity factor has been adjusted from 1.07 to 1.0. The additional morbidity factor is used to adjust CAAC (vast majority of the BEP) to CAIC morbidity levels. Please see SG_20-40_Initial_CAIC_PPO_RiskCalc_Supporting_CONF_20200623.xlsx, Summary tab for difference between CAAC and CAIC PLRS (HHS risk score). While CAIC's risk score is about 6.5% higher than CAAC's, 1.0 is applied in order to achieve rate parity (rates that differ by benefits and network), which is especially important in the Group market where groups are comparing CAAC's PPO gold plan to the CAIC PPO gold plan.

Question 21. Per URRT, WKsh. 2 "C Plan Product Info, Section IV: Projected Plan Level Information, it appears that the information has not been correctly inputted. Please update, as necessary.

Answer 21. URRT WS 2 has been corrected.

Question 22. Please provide an exhibit showing the average quarterly rate change (Q1 2021/Q1 2020 "C approved, etc.) groups will see if the proposed rates are approved.

Answer 22. Please see Q&A Exhibit 2 for the requested data.

Question 23. Please provide by service category the emerging claims data for this policy for the calendar y-t-d as of the end of May and discuss how this data may impact the resulting trend.

Answer 23. Please see Q&A Exhibit 3 for the requested data. While 2020 has seen a dip in claims due to Covid-19, we expected claims to rebound in the fall continuing to 2021. Therefore it is reasonable to use typical trends from 2019 (no Covid impact) to 2021 (limited to no Covid impact).

Question 24. Please confirm that you have tested the rates in Table 11 of the PA AM Exhibits, PA Plan Design Summary and Rate Tables, Federal Rate Template, and the binder to ensure that rates are identical.

Answer 24. I confirm that the exhibits above have been tested to ensure that rates are identical.

Question 25. Please provide an exhibit that quantitatively shows a comparison of the actual to projected claim cost PMPMs for calendar years 2015-2019, as applicable.

Answer 25. Please see Q&A Exhibit 4 for the requested data.

Question 26. Please provide an exhibit showing the financial gains and losses for calendar years 2015-2019 for the following categories: Member Months, Total Administrative Expenses, Total Incurred Claims, Total Premium, Total Actual Paid Taxes and Fees, Profit, Annual Underwriting gain/loss and Underwriting gain/loss PMPY.

Answer 26. Please see Q&A Exhibit 5 for the requested data.

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

Average Risk Score by Metal Level		
Metal Level	Average 2019 Risk Score	Currently Enrolled Risk Score
Platinum	1.515	1.582
Gold	1.443	1.508
Silver	1.378	1.446
Bronze	1.319	1.423
Total	1.424	1.494

Enrollment Distribution by Metal Level		
Metal Level	2019	Currently Enrolled
Platinum	14%	15%
Gold	46%	47%
Silver	36%	35%
Bronze	4%	4%

Average Risk Score by Region		
Region	Average 2019 Risk Score	Currently Enrolled Risk Score
6	1.495	1.531
7	1.350	1.448
9	1.450	1.502
Average	1.424	1.494

Enrollment Distribution by Region		
Region	2019	Currently Enrolled
6	39%	44%
7	43%	38%
9	18%	18%

Distribution of Renewing/New Members as of 202003	
Renewed	98.9%
New	1.1%

Capital Advantage Insurance Company
Small Group Rates
Q&A Exhibit 2
Rate Change by Quarter

Summary

<u>Quarter</u>	<u>% Change</u>	<u>Enrollment Distribution</u>
Q1 over Q1	-6.8%	26%
Q2 over Q2	-5.3%	16%
Q3 over Q3	-0.5%	15%
Q4 over Q4	-0.8%	43%
Average	-3.0%	

Note that Q2 2020 Rates were loaded incorrectly, so Q2 groups received Q1 rates
This was discussed with the Department and is noted in the Actuarial Memorandum

Capital Advantage Insurance Company
Small Group Rates
Q&A Exhibit 4
Projected vs. Actual

Year	Paid		Risk Adjustment		Exchange User Fees		Market Adjusted Paid	
	Projected	Actual	Projected	Actual	Projected	Actual	Projected	Actual
2015	\$373.95	\$507.36	-\$0.08	\$505.52	\$0.00	\$12.82	\$374.03	\$14.65
2016	\$362.59	\$279.12	-\$0.15	-\$246.35	\$0.00	\$0.00	\$362.74	\$525.47
2017	\$442.62	\$227.11	-\$0.13	-\$192.63	\$0.00	\$0.00	\$442.75	\$419.74
2018	\$401.81	\$139.31	-\$42.86	-\$185.08	\$0.00	\$0.00	\$444.68	\$324.39
2019	\$539.89	\$408.86	-\$10.13	\$68.57	\$0.00	\$0.00	\$550.02	\$340.29

**Capital Advantage Insurance Company
Small Group Rates
Q&A Exhibit 5
Financial History and Projection**

Year	Member Months	Total Premium	Total Incurred	Total Admin	Total Taxes & Fees	Total Profit	Annual Underwriting gain/loss	Annual Underwriting gain/loss PMPY
2015	5,872	\$2,537,913	\$1,672,314	\$393,799	\$371,980	\$99,820	\$99,820	\$203.99
2016	1,024	\$250,983	-\$46,957	\$99,509	\$88,545	\$109,886	\$109,886	\$1,287.73
2017	1,270	\$388,024	\$263,522	\$96,865	\$46,180	-\$18,543	-\$18,543	-\$175.21
2018	1,271	\$432,263	\$173,026	\$73,149	\$4,345	\$181,743	\$181,743	\$1,715.91
2019	919	\$547,640	\$298,774	\$51,140	\$38,573	\$159,153	\$159,153	\$2,078.17
Projected 2020	52	\$103,287	\$46,853	\$3,659	\$2,077	\$50,698	\$50,698	\$11,666.09
Projected 2021	777	\$540,193	\$459,592	\$56,375	\$13,422	\$10,804	\$10,804	\$166.85



July 20, 2020

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

**Re: Capital Advantage Insurance Company
Small Group Rates
Filing No 20-40
TOI Code: H15G Group Health – Hospital/Surgical/Medical Expense
Sub-TOI Code: H15G.003 Small Group Only
Filing Type: Rate**

Dear Ms. Gray:

CAIC received an objection letter from the Department dated July 7, 2020. CAIC is providing the following in response to the objection letter:

- Q&A written response
- Q&A exhibits
- Revised risk adjustment calculation workbook
- Revised Rate Development workbook
- Revised PAAM Exhibits
- Revised URRT
- Revised Rates (PA and Federal Templates)
- Revised Memos – Actuarial, Cover Letter
- Rate Change Summary (Attachment 1)
- Public Filing

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

- Question 1: The COVID Factor is applied to Table 5, cells C16 and D16, and reflects the issuer's morbidity assumption * Individual Adjustment (individual market only) * COVID factor.
- Question 2: Update to Table 2 BEP risk adjustment
- Question 3: Update to Table 5 Projected Incurred Risk Adjustment PMPM

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If you have any questions regarding this filing, please call me at [REDACTED] (or via email at [REDACTED]) or [REDACTED] at [REDACTED] ([REDACTED]). Thank you for your assistance in this matter.

Sincerely,

[REDACTED]

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

Enclosures

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

CAPITAL ADVANTAGE INSURANCE COMPANY, INC.

Question and Answer Small Group Rates Effective January 1, 2021

With this response, please find corresponding Q&A Exhibits in SG_20-40_Initial_CAIC_PPO_Q&AExhibits2_Supporting_20200720.xlsx

Question 1. On July 13th, the Department will communicate our guidance based upon updated survey information from the issuers on their best estimate of the COVID-19 impact on 2021 rates. Responses to the round two questions are due on July 16th. Please be sure that all documents in SERFF, after that date, reflect the impact of COVID-19 and are consistent with the Department's July 13th guidance.

Answer 1. The documents in SERFF reflect the impact of COVID-19 and are consistent with the Department's July 13th guidance.

Question 2. Please update the 2019 experience period risk adjustment amount, in Table 2, to reflect the Department calculated revised risk adjustment transfer amount sent to your company on June 30th, 2020, or the final CMS transfer amount published on or before July 16th, if it differs from the Department calculation.

Answer 2. Table 2 BEP risk adjustment is updated to reflect the Department's calculated revised risk adjustment transfer amount sent on June 30, 2020.

Question 3. If the projected risk adjustment transfer amount in Table 5 will be modified, due to the June 30th revisions, or the final CMS transfer amount published on or before July 16th, if it differs from the Department calculation, please provide narrative and detailed supporting data to justify the proposed changes.

Answer 3. Projected risk adjustment in Table 5 has been modified to reflect the June 30th revisions. Please see SG_20-40_Revised_CAIC_PPO_RiskCalc_Supporting_CONF_20200720.xls. The calculation is the same as that submitted in June with changes only for the revised statewide average PLRS. Additionally, the "Comparison" tab shows the change to projected RA in comparison to the change in 2019 amounts provided by the Department. The change in projection is consistent with the change in 2019 results.

Question 4. As a follow-up to question 6, please provide support for the assumption that projected membership distributions will resemble the experience membership distributions.

Answer 4. Please see Q&A Exhibit 1 for historical enrollment by age and region. The data is all Capital Individual ACA members enrolled between 201701 and 202006. The average age is consistent, although it does increase slightly each year. Regional distributions have moved some

between 2017 and 2020. Using filed regional rating factors, the average factor moved from 1.039 in 2017 to 1.034 in 2020. For both age and region, this slight variation from year to year provides assurance that a factor of 1.0 is reasonable.

Question 5. As a follow-up to question 7, please provide support for the following assumptions:

- a. The 1.050 adjustment to the statewide average premium
- b. The 1.030 adjustment to the statewide PLRS
- c. The 0.980 adjustment to the statewide membership
 - i. Please note this adjustment should be updated to be applied as a multiplicative adjustment instead of an additive adjustment
- d. The values listed as “202004 CBC Estimates”, the support for these values should include the following:
 - i. Source of the data used
 - ii. The time-frame of the data used (e.g., 202001 – 202004 data)
 - iii. The development of any completion factors which were applied if a full year of data was not utilized
 - iv. Any adjustments which were applied to reflect any decrease in utilization which has occurred in 2020 as a result of COVID-19
 - v. Any other adjustments which were applied to change the calculation from a 2020 estimate to a 2021 estimate

Answer 5.

- a. 1.05 is the approximate SG premium change between 2019 and 2021. This accounts for rate increases as well as new lower-cost product entries in the market.
- b. 1.03 is the approximate PLRS change in the SG market due to the continual availability of ASO plan options in this market. The estimated CBC PLRS as of 202005 is about 4% higher than 2019. 3% statewide is assumed to reflect CBC’s own population while acknowledging that movement to ASO may be less in other areas of PA.
- c. 0.98 is the approximate change in statewide membership due to movement to ASO. Please note that the calculation is performed on a PMPM basis, so changing the factor to 1.0 has no impact of the final result.
 - i. The formula has been corrected.
- d. Documentation of 202005 CBC Estimates is included on the “Documentation” tab of SG_20-40_Revised_CAIC_PPO_RiskCalc_Supporting_CONF_20200720. Please note that the title of “202004 CBC Estimates” is corrected to “202005 CBC Estimates” with this submission.
 - i. CBC collects and tracks member risk score information using the HHS risk model. This is referred to as Care Modeler data in the documentation.
 - ii. Timeframe used: 202001-202005
 - iii. Completion factors are developed by comparing PLRS as of 201905 to final PLRS as of 201912, but final PLRS derivation does vary by company/market. Actual PLRS as of 201905, factor applied, and notes are found on the “PLRSCompletion” tab.

- iv. No utilization adjustments are made for COVID-19.
- v. The only adjustment to move from 2020 to 2021 is noted in a. above – statewide average premium assumed to increase 2.5% annually.

Question 6. Per Q&A Exhibit 5. Financial History and Projection, please explain the negative Total Incurred value for year 2016.

Answer 6. CAIC Small Group membership dropped between 2015 and 2016 from approximately 500 members to 85 members on average. The membership drop coupled with prior year restatement resulted in negative incurred amount booked in 2016.

Question 7. Please confirm that you have tested to ensure that the rates in Table 11 of the Actuarial Memorandum Exhibits, PA Plan Design Summary and Rate Tables, and Federal Rates Template are identical.

Answer 7. I confirm that I have tested to ensure that the rates in Table 11 of the Actuarial Memorandum Exhibits, PA Plan Design Summary and Rate Tables, and Federal Rates Template are identical.

Question 8. Please ensure that the 7/16/20 versions of the following items are posted in SERFF with your July 16th response to this data call:

- a. Cover letter identifying all changes made and the reason for the change. Also, show the revised rate change
- b. PA Actuarial Memorandum
- c. PA Actuarial Memorandum Exhibits
- d. Department's Plan Design Summary and Rate Template Exhibits (please ensure that the rate template by county is populated with only numeric values – no "NA")
- e. URRT
- f. Federal Rate Template
- g. Part III: Actuarial Memorandum
- h. Updated Rate Change Request Summary (Attachment 1)
- i. Public filing PDF with limited redactions as previously directed in the Guidance (includes all correspondence and supporting exhibits subsequent to the initial submission, in addition to all the above items).

Answer 8. The following is included with this data call as of 7/16/2020:

- a. Cover letter identifying all changes made, the reason for the change, and revised rate change.
- b. PA Actuarial Memorandum
- c. PA Actuarial Memorandum Exhibits
- d. Department's Plan Design Summary and Rate Template Exhibits (rate template by county is populated with only numeric values – no "NA")
- e. URRT
- f. Federal Rate Template
- g. Part III: Actuarial Memorandum
- h. Updated Rate Change Request Summary (Attachment 1)

- i. Public filing PDF with limited redactions as previously directed in the Guidance (includes all correspondence and supporting exhibits subsequent to the initial submission, in addition to all the above items).

Capital Advantage Insurance Company
Q&A Exhibit 1
Age and Region Supporting Data

Individual	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
Age	43.0	44.8	45.3	45.8
Region Factor	1.051	1.062	1.060	1.055

Small Group	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
Age	37.6	37.8	38.4	38.8
Region Factor	1.039	1.039	1.037	1.034

2021 Service Area

Issuer: 82795

Market: Small Group



Key (*modify as needed*)

 : 2021 on-exchange service area

 : 2021 off-exchange only service area