PA Rate Template Part I
Data Relevant to the Rate Filing

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of Feb. 1, 2016)	Projected Rating Period
Total	328,554	29,298	192,001
<18	47,307	3,780	24,787
18-24	28,199	2,335	15,302
25-29	22,547	1,834	11,932
30-34	20,766	1,753	11421
35-39	20,536	1,748	11440
40-44	26,348	2,002	13113
45-49	30,099	2,511	16440
50-54	38,153	3,238	21222
55-59	43,551	3,900	25582
60-63	43,211	4,598	30241
64+	7,837	1,598	10521

Table 2. Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member & HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
$ 144,152,154.23	$ 252,573,100.80	$ 260,097,516.54	328,554	$ 36,870,637.36	$ 296,968,154	$ -	$ (3,698,399.18)	$ 413,978.04	$ 164,277.00	$ 50,054,280.59	$ 33,739,084.55
2015 Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											**$ 893.87**
Loss Ratio											**114.95%**

**Express Prescription Drug Rebates as a negative number*

Table 3. Trend Components

Service Category	Cost*	Utilization*	Composite	Weight*
Inpatient Hospital	4.99%	4.06%	9.25%	19.26%
Outpatient Hospital	4.99%	4.06%	9.25%	30.06%
Professional	4.99%	4.06%	9.25%	24.43%
Other Medical	4.99%	4.06%	9.25%	2.71%
Capitation			-31.09%	0.14%
Prescription Drugs	4.99%	4.06%	9.25%	23.40%
Total Annual Trend			9.19%	100.00%
2 Year Trend Projection Factor			1.192	

<- Annualized Trend Factors on URRT

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

Table 4. Historical Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-13				#DIV/0!		#DIV/0!				#DIV/0!
Feb-13				#DIV/0!		#DIV/0!				#DIV/0!
Mar-13				#DIV/0!		#DIV/0!				#DIV/0!
Apr-13				#DIV/0!		#DIV/0!				#DIV/0!
May-13				#DIV/0!		#DIV/0!				#DIV/0!
Jun-13				#DIV/0!		#DIV/0!				#DIV/0!
Jul-13				#DIV/0!		#DIV/0!				#DIV/0!
Aug-13				#DIV/0!		#DIV/0!				#DIV/0!
Sep-13				#DIV/0!		#DIV/0!				#DIV/0!
Oct-13				#DIV/0!		#DIV/0!				#DIV/0!
Nov-13				#DIV/0!		#DIV/0!				#DIV/0!
Dec-13				#DIV/0!		#DIV/0!				#DIV/0!
Jan-14		$ 12,742,090.30	0.9994	$ 12,749,815.17	15,664	$ 813.96		$ (157,305.64)	$ 15,576,369.90	$ 994.41
Feb-14		$ 13,390,130.74	0.9993	$ 13,400,127.06	18,261	$ 733.81		$ (159,868.96)	$ 15,827,946.87	$ 866.76
Mar-14		$ 15,894,695.71	0.9992	$ 15,906,992.66	21,147	$ 752.21		$ (187,991.27)	$ 18,611,708.00	$ 880.11
Apr-14		$ 19,822,725.20	0.9992	$ 19,838,966.71	26,032	$ 762.10		$ (230,720.74)	$ 22,841,003.23	$ 877.42
May-14		$ 29,566,900.31	0.9993	$ 29,588,960.09	30,064	$ 984.20		$ (329,068.30)	$ 32,579,669.91	$ 1,083.68
Jun-14		$ 21,908,559.75	0.9988	$ 21,934,780.35	30,600	$ 716.82		$ (249,197.65)	$ 24,660,793.30	$ 805.91
Jul-14		$ 24,489,283.80	0.9987	$ 24,522,030.31	32,507	$ 754.36		$ (275,092.57)	$ 27,219,520.43	$ 837.34
Aug-14		$ 24,404,617.44	0.9986	$ 24,439,200.28	32,936	$ 742.02		$ (271,243.47)	$ 26,836,501.69	$ 814.81
Sep-14		$ 26,260,201.11	0.9971	$ 26,335,782.40	33,518	$ 785.72		$ (292,370.02)	$ 28,884,167.69	$ 861.75
Oct-14		$ 27,190,579.09	0.9971	$ 27,269,946.10	33,717	$ 808.79		$ (301,195.69)	$ 29,754,862.16	$ 882.49
Nov-14		$ 24,886,222.23	0.9967	$ 24,968,480.33	33,786	$ 739.02		$ (273,673.58)	$ 27,025,458.23	$ 799.90
Dec-14	$ 141,360,441.30	$ 30,295,836.53	0.9970	$ 30,388,190.96	34,442	$ 882.30	$ 41,449,048.05	$ (329,987.22)	$ 32,594,901.55	$ 946.37
Jan-15		$ 20,654,257.38	0.9961	$ 20,735,105.38	30,227	$ 685.98		$ (336,265.17)	$ 26,598,206.66	$ 879.95
Feb-15		$ 21,570,358.31	0.9953	$ 21,671,843.31	29,021	$ 746.76		$ (326,540.73)	$ 25,829,013.47	$ 890.01
Mar-15		$ 23,355,891.63	0.9938	$ 23,502,730.63	28,303	$ 830.40		$ (342,399.90)	$ 27,083,456.52	$ 956.91
Apr-15		$ 23,333,019.63	0.9933	$ 23,490,362.63	27,987	$ 839.33		$ (337,721.65)	$ 26,713,412.67	$ 954.49
May-15		$ 21,564,429.61	0.9917	$ 21,744,073.61	27,718	$ 784.47		$ (309,898.32)	$ 24,512,617.23	$ 884.36
Jun-15		$ 23,360,242.82	0.9893	$ 23,614,033.82	27,429	$ 860.91		$ (330,774.39)	$ 26,163,891.90	$ 953.88
Jul-15		$ 21,820,778.13	0.9851	$ 22,151,353.13	27,155	$ 815.74		$ (307,720.99)	$ 24,340,392.72	$ 896.35
Aug-15		$ 20,021,687.30	0.9797	$ 20,436,007.31	26,815	$ 762.11		$ (280,223.30)	$ 22,165,355.75	$ 826.60
Sep-15		$ 21,509,081.45	0.9727	$ 22,113,166.46	26,472	$ 835.34		$ (297,500.39)	$ 23,531,954.76	$ 888.94
Oct-15		$ 20,584,712.60	0.9606	$ 21,429,767.58	26,115	$ 820.59		$ (284,795.12)	$ 22,526,981.91	$ 862.61
Nov-15		$ 18,798,932.75	0.9308	$ 20,196,679.73	25,817	$ 782.30		$ (260,725.57)	$ 20,623,106.59	$ 798.82
Dec-15	$ 144,152,154.23	$ 20,634,027.26	0.8726	$ 23,646,711.30	25,494	$ 927.54	$ 36,870,637.08	$ (283,833.65)	$ 22,450,930.70	$ 880.64

** Express Completion Factor as a percentage*

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

Table 2b. Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member & HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
2015 Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											**#DIV/0!**
Loss Ratio											**#DIV/0!**

**Express Prescription Drug Rebates as a negative number*

Table 3b. Trend Components

Service Category	Cost*	Utilization*	Composite	Weight*
Inpatient Hospital			0.00%	
Outpatient Hospital			0.00%	
Professional			0.00%	
Other Medical			0.00%	
Capitation				
Prescription Drugs			0.00%	
Total Annual Trend			0.00%	0.00%
2 Year Trend Projection			1.000	

<- Annualized Trend Factors on URRT

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

Table 4b. Historical Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-13				#DIV/0!		#DIV/0!				#DIV/0!
Feb-13				#DIV/0!		#DIV/0!				#DIV/0!
Mar-13				#DIV/0!		#DIV/0!				#DIV/0!
Apr-13				#DIV/0!		#DIV/0!				#DIV/0!
May-13				#DIV/0!		#DIV/0!				#DIV/0!
Jun-13				#DIV/0!		#DIV/0!				#DIV/0!
Jul-13				#DIV/0!		#DIV/0!				#DIV/0!
Aug-13				#DIV/0!		#DIV/0!				#DIV/0!
Sep-13				#DIV/0!		#DIV/0!				#DIV/0!
Oct-13				#DIV/0!		#DIV/0!				#DIV/0!
Nov-13				#DIV/0!		#DIV/0!				#DIV/0!
Dec-13				#DIV/0!		#DIV/0!				#DIV/0!
Jan-14				#DIV/0!		#DIV/0!				#DIV/0!
Feb-14				#DIV/0!		#DIV/0!				#DIV/0!
Mar-14				#DIV/0!		#DIV/0!				#DIV/0!
Apr-14				#DIV/0!		#DIV/0!				#DIV/0!
May-14				#DIV/0!		#DIV/0!				#DIV/0!
Jun-14				#DIV/0!		#DIV/0!				#DIV/0!
Jul-14				#DIV/0!		#DIV/0!				#DIV/0!
Aug-14				#DIV/0!		#DIV/0!				#DIV/0!
Sep-14				#DIV/0!		#DIV/0!				#DIV/0!
Oct-14				#DIV/0!		#DIV/0!				#DIV/0!
Nov-14				#DIV/0!		#DIV/0!				#DIV/0!
Dec-14				#DIV/0!		#DIV/0!				#DIV/0!
Jan-15				#DIV/0!		#DIV/0!				#DIV/0!
Feb-15				#DIV/0!		#DIV/0!				#DIV/0!
Mar-15				#DIV/0!		#DIV/0!				#DIV/0!
Apr-15				#DIV/0!		#DIV/0!				#DIV/0!
May-15				#DIV/0!		#DIV/0!				#DIV/0!
Jun-15				#DIV/0!		#DIV/0!				#DIV/0!
Jul-15				#DIV/0!		#DIV/0!				#DIV/0!
Aug-15				#DIV/0!		#DIV/0!				#DIV/0!
Sep-15				#DIV/0!		#DIV/0!				#DIV/0!
Oct-15				#DIV/0!		#DIV/0!				#DIV/0!
Nov-15				#DIV/0!		#DIV/0!				#DIV/0!
Dec-15				#DIV/0!		#DIV/0!				#DIV/0!

** Express Completion Factor as a percentage*

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

Table 2c. Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member & HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
2015 Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											#DIV/0!
Loss Ratio											#DIV/0!

**Express Prescription Drug Rebates as a negative number*

PA Rate Template Part II
Rate Development and Change

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

2015 Total Allowed EHB Claims PMPM + EHB Capitation PMPM (net of prescription drug rebates)	$ 893.87	<- Index Rate of Experience Period on URRT
2 Year Trend Projection Factor	1.192	
Unadjusted Projected Allowed EHB Claims PMPM	$ 1,065.81	
Single Risk Pool Adjustment Factors		<- Adj't. from Experience to Projection Period - Pop'l risk Morbidity on URRT
Change in Morbidity	0.852	<- Adj't. from Experience to Projection Period - Other on URRT
Change in Other	1.014	
Change in Demographics	1.076	
Change in Network	0.952	
Change in Benefits	1.000	
Change in Other	0.990	
Adjusted Projected Allowed EHB Claims PMPM	$ 921.07	<- Index Rate for Projection Period on URRT - Individual (Small Group 1rst Qtr)
Adjusted Projected Allowed EHB Claims PMPM [will only populate for small group filings]	$ -	<- Index Rate for Projection Period on URRT - Small Group
Projected Paid to Allowed Ratio	0.746434173	<- Paid to Allowed Average Factor in Projection Period on URRT
Projected Paid EHB Claims PMPM	687.5174226	
Market-wide Adjustments		
Projected Paid Net Risk Adjustment PMPM	$ (77.60)	
Projected Paid Exchange User Fees PMPM	$ 14.29	
Market-Adjusted Projected Paid EHB Claims PMPM	$ 624.20	
Market-Adjusted Projected Allowed EHB Claims PMPM	$ 836.25	<- Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM	$ -	
Market-Adjusted Projected Paid Total Claims PMPM	$ 624.20	
Market-Adjusted Projected Allowed Total Claims PMPM	$ 836.25	

Table 6. Retention

Retention Items - *Express in percentages*		
Administrative Expenses	7%	
General and Claims	6.74%	
Agent/Broker Fees and Commissions	0.55%	
Quality Improvement Initiatives	0.00%	
Taxes and Fees	2.03%	
PCORI Fees (Enter $ amount here: $_____)	0.03%	
Pa Premium Tax (if applicable)	2.00%	
Federal Income Tax	0.00%	
Health Insurance Providers Fee (only for small group market, prorated for coverage in 2018)	0.00%	
Profit/Contingency	3%	
Total Retention	12%	
		<- Single Pool Gross Premium Avg. Rate, PMPM on URRT
Projected Required Revenue PMPM	$ 711.94	

Table 8. Components of Rate Change

Rate Components	2016	2017	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	277.1469902	410.5764222	$133.43	48.1%
B. Base period allowed claims before normalization	$ 868.91	$ 893.87	$24.96	9%
C. Normalization factor component of change	$ (380.75)	-383.3451929	-$2.59	-$0.01
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	$ 488.16	$ 510.52	$ 22.37	8%
D2. URRT Trend	$ 77.28	$ 98.20	$ 20.92	8%
D3. URRT Morbidity	$ (21.30)	$ (90.09)	$ (68.79)	-25%
D4. URRT Other	$ (33.56)	$ 7.42	$ 40.99	15%
D5. Normalized URRT RA/RI on an allowed basis	$ (162.91)	$ (59.38)	$ 103.53	37%
D6. Normalized Exchange User Fee on an allowed basis	$ 5.42	$ 10.93	$ 5.51	2%
D7. Subtotal - Sum(D1:D6)	$ 353.09	$ 477.61	$ 124.53	45%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	$ (4.74)	-26.74962665	$ (22.01)	-8%
E2. Pricing AV	$ (110.29)	$ (109.86)	$ 0.43	0%
E3. Benefit Richness	$ 9.22	$ 15.67	$ 6.46	2%
E4. Catastrophic Eligibility	$ -	$ -	$ -	0%
E5. Subtotal - Sum(E1:E4)	$ (105.81)	$ (120.93)	$ (15.12)	-5%
F. Change in Retention Components				
F1. Administrative Expenses	$ 24.56	$ 29.95	$ 5.39	2%
F2. Taxes and Fees	$ 14.38	$ 8.32	$ (6.06)	-2%
F3. Profit and/or Contingency	$ (10.92)	$ 12.32	$ 23.24	8%
F4. Subtotal - Sum(F1:F3)	$ 28.02	$ 50.60	$ 22.57	8%
G. Change in Miscellaneous Items			$ -	0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	$ 275.30	$ 407.28	$ 131.97	48%

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

	January	April	July	October	Total Single Risk Pool
# of Member Months Renewing in Quarter					-
Percent of Members Months Renewing in Quarter	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Base Allowed Claims	$ 921.07	$ 921.07	$ 921.07	$ 921.07	$ 921.07
Months of Trend	-	3	6	9	#DIV/0!
Annual Trend	9.19%	9.19%	9.19%	9.19%	9.19%
Single Risk Pool Projected Allowed Claims	$ 921.07	$ 941.55	$ 962.48	$ 983.88	$ -

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2016	2017
Average Age Factor	1.646	1.730
Average Geographic Factor	1.005	1.017
Average Tobacco Factor	1.014	1.014
Average Benefit Richness (induced demand)	1.083	1.041
Average Network Factor	0.980	0.942
Market-Adjusted Projected Allowed Total Claims PMPM	$ 628.63	$ 836.25
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	$ 353.17	$ 477.61

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

	2016	2017	
Paid-to-Allowed	0.795119238	0.746434173	
URRT Trend (2-Year Trend Factor)	1.158303255	1.19	<- URRT W1, S2
URRT Morbidity	0.962336996	0.852	<- URRT W1, S2
URRT "Other"	0.938318316	1.014	<- URRT W1, S2
Risk Adjustment	$ (184.48)	$ (77.60)	<- URRT W1, S3
Reinsurance	$ (46.09)	$ -	<- URRT W1, S3
Exchange User Fee	$ 7.68	$ 14.29	<- URRT W1, S3
Capitation	$ 0.48	$ -	<- URRT W1, S2
Network	0.987	0.943993148	
Pricing AV	0.683	0.756343325	
Benefit Richness	1.039	1.045962513	
Catastrophic Eligibility	1.000	1	
Administrative Expenses	8.86%	7.30%	
Taxes and Fees	5.19%	2.03%	
Profit and/or Contingency	-3.94%	3.00%	

PA Rate Template Part III

Table 10. Plan Rates

Carrier Name:	HHIC
Plan Type(s):	PPO
Market Segment:	Individual ACA
Rate Effective Date:	1/1/2017
Market Adjusted Index Rate	$ 836.25

Plan Number	HIOS Plan ID (Standard Component)	Plan Type (HMO, POS, PPO, EPO, Indemnity, Other)	1/1/16 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2017	1/1/17 Plan Marketing Name (If 1/1/16 Plan Discontinued)	Metallic Tier	Metallic Tier Actuarial Value	Standard AV, Approach (1), Approach (2)
Totals							**0.706**	
Plan 1	70194PA0160003	PPO	Comprehensive Care Flex Blu	M	Comprehensive Care Flex B	Platinum	0.8813	Standard AV
Plan 2	70194PA0280002	PPO	Comprehensive Care Flex Blu	M	Comprehensive Care Flex B	Platinum	0.8813	Standard AV
Plan 3	70194PA0150005	PPO	Health Savings Blue PPO 140	M	Health Savings Blue PPO 17	Gold	0.791	Standard AV
Plan 4	70194PA0270003	PPO	Health Savings Blue PPO 140	M	Health Savings Blue PPO 17	Gold	0.791	Standard AV
Plan 5	70194PA0150003	PPO	Health Savings Blue PPO 270	M	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 6	70194PA0270002	PPO	Health Savings Blue PPO 270	M	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 7	70194PA0260001	PPO	Shared Cost Blue PPO 6000	M	Shared Cost Blue PPO 6800	Bronze	0.6112	Approach (1)
Plan 8	70194PA0300001	PPO	Shared Cost Blue PPO 6000	M	Shared Cost Blue PPO 6800	Bronze	0.6112	Approach (1)
Plan 9	70194PA0500001	PPO		N	Alliance Flex Blue PPO 1000	Gold	0.7807	Approach (1)
Plan 10	70194PA0500002	PPO		N	Alliance Flex Blue PPO 2300	Silver	0.6804	Approach (1)
Plan 11	70194PA0510001	PPO		N	my Premier Blue Flex PPO 1	Gold	0.7878	Standard AV
Plan 12	70194PA0510002	PPO		N	my Premier Blue Flex PPO 2	Silver	0.6818	Standard AV
Plan 13	70194PA0510003	PPO		N	my Premier Blue Flex PPO 3	Silver	0.6821	Approach (1)
Plan 14	70194PA0510004	PPO		N	my Premier Blue Flex PPO 6	Bronze	0.6157	Standard AV
Plan 15	70194PA0520001	PPO		N	my Lehigh Valley Flex Blue I	Gold	0.7806	Approach (1)
Plan 16	70194PA0520002	PPO		N	my Lehigh Valley Flex Blue I	Silver	0.6806	Approach (1)
Plan 17	70194PA0160001	PPO	Comprehensive Care Blue PP	D	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 18	70194PA0160001	PPO	Comprehensive Care Blue PP	D	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 19	70194PA0280001	PPO	Comprehensive Care Blue PP	D	Comprehensive Care Flex B	Platinum	0.8813	Standard AV
Plan 20	70194PA0280001	PPO	Comprehensive Care Blue PP	D	Comprehensive Care Flex B	Platinum	0.8813	Standard AV
Plan 21	70194PA0150001	PPO	Health Savings Blue PPO Em	D	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 22	70194PA0150001	PPO	Health Savings Blue PPO Em	D	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 23	70194PA0270001	PPO	Health Savings Blue PPO Em	D	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 24	70194PA0270001	PPO	Health Savings Blue PPO Em	D	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 25	70194PA0140001	PPO	Shared Cost Blue PPO 6000 -	D	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 26	70194PA0140001	PPO	Shared Cost Blue PPO 6000 -	D	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 27	70194PA0130002	PPO	Blue Cross Blue Shield Share	D	Health Savings Blue PPO 17	Gold	0.791	Standard AV
Plan 28	70194PA0130002	PPO	Blue Cross Blue Shield Share	D	Health Savings Blue PPO 17	Gold	0.791	Standard AV
Plan 29	70194PA0130001	PPO	Blue Cross Blue Shield Share	D	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 30	70194PA0130001	PPO	Blue Cross Blue Shield Share	D	Health Savings Blue PPO En	Silver	0.6814	Standard AV
Plan 31	70194PA0180005	PPO	Health Savings Blue PPO 140	D	Alliance Flex Blue PPO 1000	Gold	0.7807	Approach (1)
Plan 32	70194PA0180005	PPO	Health Savings Blue PPO 140	D	my Premier Blue Flex PPO 1	Gold	0.7878	Standard AV
Plan 33	70194PA0180005	PPO	Health Savings Blue PPO 140	D	my Lehigh Valley Flex Blue I	Gold	0.7806	Approach (1)
Plan 34	70194PA0310003	PPO	Health Savings Blue PPO 140	D	Alliance Flex Blue PPO 1000	Gold	0.7807	Approach (1)
Plan 35	70194PA0310003	PPO	Health Savings Blue PPO 140	D	my Premier Blue Flex PPO 1	Gold	0.7878	Standard AV
Plan 36	70194PA0310003	PPO	Health Savings Blue PPO 140	D	my Lehigh Valley Flex Blue I	Gold	0.7806	Approach (1)
Plan 37	70194PA0180003	PPO	Health Savings Blue PPO Em	D	Alliance Flex Blue PPO 2300	Silver	0.6804	Approach (1)
Plan 38	70194PA0180003	PPO	Health Savings Blue PPO Em	D	my Premier Blue Flex PPO 2	Silver	0.6818	Standard AV
Plan 39	70194PA0180003	PPO	Health Savings Blue PPO Em	D	my Lehigh Valley Flex Blue I	Silver	0.6806	Approach (1)
Plan 40	70194PA0310002	PPO	Health Savings Blue PPO Em	D	Alliance Flex Blue PPO 2300	Silver	0.6804	Approach (1)
Plan 41	70194PA0310002	PPO	Health Savings Blue PPO Em	D	my Premier Blue Flex PPO 2	Silver	0.6818	Standard AV
Plan 42	70194PA0310002	PPO	Health Savings Blue PPO Em	D	my Lehigh Valley Flex Blue I	Silver	0.6806	Approach (1)
Plan 43	70194PA0170001	PPO	Shared Cost Blue PPO 6000 -	D	Alliance Flex Blue PPO 2300	Silver	0.6804	Approach (1)
Plan 44	70194PA0170001	PPO	Shared Cost Blue PPO 6000 -	D	my Premier Blue Flex PPO 6	Bronze	0.6157	Standard AV
Plan 45	70194PA0170001	PPO	Shared Cost Blue PPO 6000 -	D	my Lehigh Valley Flex Blue I	Silver	0.6806	Approach (1)
Plan 46	70194PA0180001	PPO	Health Savings Blue PPO Em	D	Alliance Flex Blue PPO 2300	Silver	0.6804	Approach (1)
Plan 47	70194PA0180001	PPO	Health Savings Blue PPO Em	D	my Premier Blue Flex PPO 6	Bronze	0.6157	Standard AV
Plan 48	70194PA0180001	PPO	Health Savings Blue PPO Em	D	my Lehigh Valley Flex Blue I	Silver	0.6806	Approach (1)
Plan 49	70194PA0310001	PPO	Health Savings Blue PPO Em	D	Shared Cost Blue PPO 6800	Bronze	0.6112	Approach (1)
Plan 50	70194PA0310001	PPO	Health Savings Blue PPO Em	D	my Premier Blue Flex PPO 6	Bronze	0.6157	Standard AV
Plan 51	70194PA0310001	PPO	Health Savings Blue PPO Em	D	Shared Cost Blue PPO 6800	Bronze	0.6112	Approach (1)
Plan 52	70194PA0130004	PPO	Blue Shield Shared Cost 1500	D	Alliance Flex Blue PPO 1000	Gold	0.7807	Approach (1)
Plan 53	70194PA0130004	PPO	Blue Shield Shared Cost 1500	D	my Premier Blue Flex PPO 1	Gold	0.7878	Standard AV
Plan 54	70194PA0130004	PPO	Blue Shield Shared Cost 1500	D	my Lehigh Valley Flex Blue I	Gold	0.7806	Approach (1)
Plan 55	70194PA0130003	PPO	Blue Shield Shared Cost 3200	D	Alliance Flex Blue PPO 2300	Silver	0.6804	Approach (1)
Plan 56	70194PA0130003	PPO	Blue Shield Shared Cost 3200	D	my Premier Blue Flex PPO 2	Silver	0.6818	Standard AV
Plan 57	70194PA0130003	PPO	Blue Shield Shared Cost 3200	D	my Lehigh Valley Flex Blue I	Silver	0.6806	Approach (1)

PA Rate T

Table 10. Pla

Calibration	
Age Calibration Factor	1.729610101
Geographic Calibration Factor	1.017
Aggregate Calibration Factor	1.760

Carrier Name:
Plan Type(s):
Market Segment:
Rate Effective Da
Market Adjusted

Plan Number	Exchange On/Off or Off	Pricing AV (company-determined AV)	Benefit Richness (induced demand)	Benefits in addition to EHB	Provider Network	Catastrophic Eligibility	Tobacco Surcharge Adjustment	Pure Premium	Admin Costs	Taxes & Fees (not including Exchange fees)	Profit or Contingency
		45 CFR Part 156.8 (d) (2) Allowable Factors									
Totals		**0.756**	**1.004**	**1.000**	**1.002**	**1.000**	**0.986**	**$ 633.47**	**7.3%**	**2.0%**	**3.0%**
Plan 1	On/Off	0.938	1.104	1.000	1.061	1.000	0.986	$906.40	7.3%	2.0%	3.0%
Plan 2	Off	0.938	1.104	1.000	1.061	1.000	0.986	$906.40	7.3%	2.0%	3.0%
Plan 3	On/Off	0.838	1.037	1.000	1.051	1.000	0.986	$753.37	7.3%	2.0%	3.0%
Plan 4	Off	0.838	1.037	1.000	1.051	1.000	0.986	$753.37	7.3%	2.0%	3.0%
Plan 5	On/Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 6	Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 7	Off	0.611	0.960	1.000	1.024	1.000	0.986	$495.52	7.3%	2.0%	3.0%
Plan 8	Off	0.649	0.960	1.000	0.971	1.000	0.986	$499.12	7.3%	2.0%	3.0%
Plan 9	On/Off	0.846	1.037	1.000	0.971	1.000	0.986	$702.71	7.3%	2.0%	3.0%
Plan 10	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 11	On/Off	0.852	1.037	1.000	0.998	1.000	0.986	$727.23	7.3%	2.0%	3.0%
Plan 12	On/Off	0.754	0.989	1.000	0.998	1.000	0.986	$613.52	7.3%	2.0%	3.0%
Plan 13	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 14	On/Off	0.632	0.960	1.000	0.998	1.000	0.986	$499.66	7.3%	2.0%	3.0%
Plan 15	On/Off	0.835	1.037	1.000	0.971	1.000	0.986	$694.07	7.3%	2.0%	3.0%
Plan 16	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 17	On/Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 18	On/Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 19	Off	0.938	1.104	1.000	1.061	1.000	0.986	$906.40	7.3%	2.0%	3.0%
Plan 20	Off	0.938	1.104	1.000	1.061	1.000	0.986	$906.40	7.3%	2.0%	3.0%
Plan 21	On/Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 22	On/Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 23	Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 24	Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 25	On/Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 26	On/Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 27	On/Off	0.838	1.037	1.000	1.051	1.000	0.986	$753.37	7.3%	2.0%	3.0%
Plan 28	On/Off	0.838	1.037	1.000	1.051	1.000	0.986	$753.37	7.3%	2.0%	3.0%
Plan 29	On/Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 30	On/Off	0.724	0.989	1.000	1.051	1.000	0.986	$620.71	7.3%	2.0%	3.0%
Plan 31	On/Off	0.846	1.037	1.000	0.971	1.000	0.986	$702.71	7.3%	2.0%	3.0%
Plan 32	On/Off	0.852	1.037	1.000	0.998	1.000	0.986	$727.23	7.3%	2.0%	3.0%
Plan 33	On/Off	0.835	1.037	1.000	0.971	1.000	0.986	$694.07	7.3%	2.0%	3.0%
Plan 34	On/Off	0.846	1.037	1.000	0.971	1.000	0.986	$702.71	7.3%	2.0%	3.0%
Plan 35	On/Off	0.852	1.037	1.000	0.998	1.000	0.986	$727.23	7.3%	2.0%	3.0%
Plan 36	On/Off	0.835	1.037	1.000	0.971	1.000	0.986	$694.07	7.3%	2.0%	3.0%
Plan 37	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 38	On/Off	0.754	0.989	1.000	0.998	1.000	0.986	$613.52	7.3%	2.0%	3.0%
Plan 39	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 40	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 41	On/Off	0.754	0.989	1.000	0.998	1.000	0.986	$613.52	7.3%	2.0%	3.0%
Plan 42	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 43	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 44	On/Off	0.632	0.960	1.000	0.998	1.000	0.986	$499.66	7.3%	2.0%	3.0%
Plan 45	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 46	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 47	On/Off	0.632	0.960	1.000	0.998	1.000	0.986	$499.66	7.3%	2.0%	3.0%
Plan 48	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 49	Off	0.649	0.960	1.000	0.971	1.000	0.986	$499.12	7.3%	2.0%	3.0%
Plan 50	On/Off	0.632	0.960	1.000	0.998	1.000	0.986	$499.66	7.3%	2.0%	3.0%
Plan 51	Off	0.649	0.960	1.000	0.971	1.000	0.986	$499.12	7.3%	2.0%	3.0%
Plan 52	On/Off	0.846	1.037	1.000	0.971	1.000	0.986	$702.71	7.3%	2.0%	3.0%
Plan 53	On/Off	0.852	1.037	1.000	0.998	1.000	0.986	$727.23	7.3%	2.0%	3.0%
Plan 54	On/Off	0.835	1.037	1.000	0.971	1.000	0.986	$694.07	7.3%	2.0%	3.0%
Plan 55	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%
Plan 56	On/Off	0.754	0.989	1.000	0.998	1.000	0.986	$613.52	7.3%	2.0%	3.0%
Plan 57	On/Off	0.744	0.989	1.000	0.971	1.000	0.986	$590.00	7.3%	2.0%	3.0%

PA Rate T

Table 10. Pla

Carrier Name:
Plan Type(s):
Market Segment:
Rate Effective Da
Market Adjusted

Plan Number	Total Covered Lives @ 2/1/2016	Total Policyholders @ 2/1/2016	2016 Calibrated Plan Adjusted Index Rate PMPM	2017 Calibrated Plan Adjusted Index Rate PMPM	Change Compared to Prior 12 months	% of Total Covered Lives
Totals	**20,327**	**13,253**	**$ 277.15**	**$ 410.58**	**48.14%**	
Plan 1	440	327	$ 411.69	$587.47	42.7%	2.2%
Plan 2	1,539	1,038	$ 411.69	$587.47	42.7%	7.6%
Plan 3	127	80	$ 334.81	$488.29	45.8%	0.6%
Plan 4	376	220	$ 334.81	$488.29	45.8%	1.8%
Plan 5	96	71	$ 272.66	$402.31	47.5%	0.5%
Plan 6	248	161	$ 272.66	$402.31	47.5%	1.2%
Plan 7	452	315	$ 223.70	$321.17	43.6%	2.2%
Plan 8	1,516	960	$ 226.94	$323.50	42.5%	7.5%
Plan 9	-	-	$ -	$455.45	#DIV/0!	0.0%
Plan 10	-	-	$ -	$382.40	#DIV/0!	0.0%
Plan 11	-	-	$ -	$471.34	#DIV/0!	0.0%
Plan 12	-	-	$ -	$397.64	#DIV/0!	0.0%
Plan 13	-	-	$ -	$382.40	#DIV/0!	0.0%
Plan 14	-	-	$ -	$323.85	#DIV/0!	0.0%
Plan 15	-	-	$ -	$449.85	#DIV/0!	0.0%
Plan 16	-	-	$ -	$382.40	#DIV/0!	0.0%
Plan 17	343	266	$ 274.39	$402.31	46.6%	1.7%
Plan 18	160	104	$ 274.39	$402.31	46.6%	0.8%
Plan 19	579	375	$ 274.39	$587.47	114.1%	2.8%
Plan 20	157	113	$ 274.39	$587.47	114.1%	0.8%
Plan 21	40	33	$ 212.48	$402.31	89.3%	0.2%
Plan 22	46	39	$ 212.48	$402.31	89.3%	0.2%
Plan 23	73	47	$ 212.48	$402.31	89.3%	0.4%
Plan 24	58	30	$ 212.48	$402.31	89.3%	0.3%
Plan 25	201	158	$ 223.70	$402.31	79.8%	1.0%
Plan 26	94	76	$ 223.70	$402.31	79.8%	0.5%
Plan 27	194	135	$ 324.74	$488.29	50.4%	1.0%
Plan 28	70	46	$ 324.74	$488.29	50.4%	0.3%
Plan 29	391	303	$ 268.96	$402.31	49.6%	1.9%
Plan 30	229	160	$ 268.96	$402.31	49.6%	1.1%
Plan 31	185	120	$ 340.25	$455.45	33.9%	0.9%
Plan 32	133	78	$ 340.25	$471.34	38.5%	0.7%
Plan 33	134	85	$ 340.25	$449.85	32.2%	0.7%
Plan 34	508	304	$ 340.25	$455.45	33.9%	2.5%
Plan 35	258	154	$ 340.25	$471.34	38.5%	1.3%
Plan 36	379	247	$ 340.25	$449.85	32.2%	1.9%
Plan 37	124	81	$ 277.50	$382.40	37.8%	0.6%
Plan 38	169	102	$ 277.50	$397.64	43.3%	0.8%
Plan 39	136	89	$ 277.50	$382.40	37.8%	0.7%
Plan 40	383	213	$ 277.50	$382.40	37.8%	1.9%
Plan 41	314	178	$ 277.50	$397.64	43.3%	1.5%
Plan 42	347	209	$ 277.50	$382.40	37.8%	1.7%
Plan 43	113	83	$ 226.94	$382.40	68.5%	0.6%
Plan 44	171	115	$ 226.94	$323.85	42.7%	0.8%
Plan 45	213	140	$ 226.94	$382.40	68.5%	1.0%
Plan 46	514	350	$ 215.92	$382.40	77.1%	2.5%
Plan 47	866	568	$ 215.92	$323.85	50.0%	4.3%
Plan 48	616	409	$ 215.92	$382.40	77.1%	3.0%
Plan 49	811	453	$ 215.92	$323.50	49.8%	4.0%
Plan 50	1,087	597	$ 215.92	$323.85	50.0%	5.3%
Plan 51	713	470	$ 215.92	$323.50	49.8%	3.5%
Plan 52	246	141	$ 330.15	$455.45	38.0%	1.2%
Plan 53	371	218	$ 330.15	$471.34	42.8%	1.8%
Plan 54	362	247	$ 330.15	$449.85	36.3%	1.8%
Plan 55	526	373	$ 273.44	$382.40	39.8%	2.6%
Plan 56	1,555	1,020	$ 273.44	$397.64	45.4%	7.6%
Plan 57	1,664	1,152	$ 273.44	$382.40	39.8%	8.2%

PA Rate Template Part IV

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

Carrier Name:	HHIC
Plan Type(s):	PPO
Market Segment:	Individual ACA
Rate Effective Date:	1/1/2017

Plan Number	HIOS Plan ID (Standard Component)	1/1/16 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2017	1/1/17 Plan Marketing Name (If 1/1/16 Plan Discontinued)	Metallic Tier	Exchange On/Off or Off
Totals	**These cells auto-fill using the data entered in Table 9.**					
Plan 1	70194PA0160003	Comprehensive Care Flex	M	Comprehensive Care Flex B	Platinum	On/Off
Plan 2	70194PA0280002	Comprehensive Care Flex	M	Comprehensive Care Flex B	Platinum	Off
Plan 3	70194PA0150005	Health Savings Blue PPO	M	Health Savings Blue PPO 17	Gold	On/Off
Plan 4	70194PA0270003	Health Savings Blue PPO	M	Health Savings Blue PPO 17	Gold	Off
Plan 5	70194PA0150003	Health Savings Blue PPO	M	Health Savings Blue PPO Em	Silver	On/Off
Plan 6	70194PA0270002	Health Savings Blue PPO	M	Health Savings Blue PPO Em	Silver	Off
Plan 7	70194PA0260001	Shared Cost Blue PPO 60	M	Shared Cost Blue PPO 6800	Bronze	Off
Plan 8	70194PA0300001	Shared Cost Blue PPO 60	M	Shared Cost Blue PPO 6800	Bronze	Off
Plan 9	70194PA0500001	0	N	Alliance Flex Blue PPO 1000	Gold	On/Off
Plan 10	70194PA0500002	0	N	Alliance Flex Blue PPO 2300	Silver	On/Off
Plan 11	70194PA0510001	0	N	my Premier Blue Flex PPO 1	Gold	On/Off
Plan 12	70194PA0510002	0	N	my Premier Blue Flex PPO 2	Silver	On/Off
Plan 13	70194PA0510003	0	N	my Premier Blue Flex PPO 3	Silver	On/Off
Plan 14	70194PA0510004	0	N	my Premier Blue Flex PPO 6	Bronze	On/Off
Plan 15	70194PA0520001	0	N	my Lehigh Valley Flex Blue I	Gold	On/Off
Plan 16	70194PA0520002	0	N	my Lehigh Valley Flex Blue I	Silver	On/Off
Plan 17	70194PA0160001	Comprehensive Care Blu	D	Health Savings Blue PPO Em	Silver	On/Off
Plan 18	70194PA0160001	Comprehensive Care Blu	D	Health Savings Blue PPO Em	Silver	On/Off
Plan 19	70194PA0280001	Comprehensive Care Blu	D	Comprehensive Care Flex B	Platinum	Off
Plan 20	70194PA0280001	Comprehensive Care Blu	D	Comprehensive Care Flex B	Platinum	Off
Plan 21	70194PA0150001	Health Savings Blue PPO	D	Health Savings Blue PPO Em	Silver	On/Off
Plan 22	70194PA0150001	Health Savings Blue PPO	D	Health Savings Blue PPO Em	Silver	On/Off
Plan 23	70194PA0270001	Health Savings Blue PPO	D	Health Savings Blue PPO Em	Silver	Off
Plan 24	70194PA0270001	Health Savings Blue PPO	D	Health Savings Blue PPO Em	Silver	Off
Plan 25	70194PA0140001	Shared Cost Blue PPO 60	D	Health Savings Blue PPO Em	Silver	On/Off
Plan 26	70194PA0140001	Shared Cost Blue PPO 60	D	Health Savings Blue PPO Em	Silver	On/Off
Plan 27	70194PA0130002	Blue Cross Blue Shield Sh	D	Health Savings Blue PPO 17	Gold	On/Off
Plan 28	70194PA0130002	Blue Cross Blue Shield Sh	D	Health Savings Blue PPO 17	Gold	On/Off
Plan 29	70194PA0130001	Blue Cross Blue Shield Sh	D	Health Savings Blue PPO Em	Silver	On/Off
Plan 30	70194PA0130001	Blue Cross Blue Shield Sh	D	Health Savings Blue PPO Em	Silver	On/Off
Plan 31	70194PA0180005	Health Savings Blue PPO	D	Alliance Flex Blue PPO 1000	Gold	On/Off
Plan 32	70194PA0180005	Health Savings Blue PPO	D	my Premier Blue Flex PPO 1	Gold	On/Off
Plan 33	70194PA0180005	Health Savings Blue PPO	D	my Lehigh Valley Flex Blue I	Gold	On/Off
Plan 34	70194PA0310003	Health Savings Blue PPO	D	Alliance Flex Blue PPO 1000	Gold	On/Off
Plan 35	70194PA0310003	Health Savings Blue PPO	D	my Premier Blue Flex PPO 1	Gold	On/Off
Plan 36	70194PA0310003	Health Savings Blue PPO	D	my Lehigh Valley Flex Blue I	Gold	On/Off
Plan 37	70194PA0180003	Health Savings Blue PPO	D	Alliance Flex Blue PPO 2300	Silver	On/Off
Plan 38	70194PA0180003	Health Savings Blue PPO	D	my Premier Blue Flex PPO 2	Silver	On/Off
Plan 39	70194PA0180003	Health Savings Blue PPO	D	my Lehigh Valley Flex Blue I	Silver	On/Off
Plan 40	70194PA0310002	Health Savings Blue PPO	D	Alliance Flex Blue PPO 2300	Silver	On/Off
Plan 41	70194PA0310002	Health Savings Blue PPO	D	my Premier Blue Flex PPO 2	Silver	On/Off
Plan 42	70194PA0310002	Health Savings Blue PPO	D	my Lehigh Valley Flex Blue I	Silver	On/Off
Plan 43	70194PA0170001	Shared Cost Blue PPO 60	D	Alliance Flex Blue PPO 2300	Silver	On/Off
Plan 44	70194PA0170001	Shared Cost Blue PPO 60	D	my Premier Blue Flex PPO 6	Bronze	On/Off
Plan 45	70194PA0170001	Shared Cost Blue PPO 60	D	my Lehigh Valley Flex Blue I	Silver	On/Off
Plan 46	70194PA0180001	Health Savings Blue PPO	D	Alliance Flex Blue PPO 2300	Silver	On/Off
Plan 47	70194PA0180001	Health Savings Blue PPO	D	my Premier Blue Flex PPO 6	Bronze	On/Off
Plan 48	70194PA0180001	Health Savings Blue PPO	D	my Lehigh Valley Flex Blue I	Silver	On/Off
Plan 49	70194PA0310001	Health Savings Blue PPO	D	Shared Cost Blue PPO 6800	Bronze	Off
Plan 50	70194PA0310001	Health Savings Blue PPO	D	my Premier Blue Flex PPO 6	Bronze	On/Off
Plan 51	70194PA0310001	Health Savings Blue PPO	D	Shared Cost Blue PPO 6800	Bronze	Off
Plan 52	70194PA0130004	Blue Shield Shared Cost 1	D	Alliance Flex Blue PPO 1000	Gold	On/Off
Plan 53	70194PA0130004	Blue Shield Shared Cost 1	D	my Premier Blue Flex PPO 1	Gold	On/Off
Plan 54	70194PA0130004	Blue Shield Shared Cost 1	D	my Lehigh Valley Flex Blue I	Gold	On/Off
Plan 55	70194PA0130003	Blue Shield Shared Cost 3	D	Alliance Flex Blue PPO 2300	Silver	On/Off
Plan 56	70194PA0130003	Blue Shield Shared Cost 3	D	my Premier Blue Flex PPO 2	Silver	On/Off
Plan 57	70194PA0130003	Blue Shield Shared Cost 3	D	my Lehigh Valley Flex Blue I	Silver	On/Off

PA Rate T

Table 11. Pla

Carrier Name:
Plan Type(s):
Market Segment:
Rate Effective Da

Plan Number	2/1/16 Number of Covered Lives									
	1	2	3	4	5	6	7	8	9	Total
Totals	712	6	-	4,089	1,105	4,996	5,628	-	3,791	**20,327**
Plan 1	51	-	-	356	33	-	-	-	-	440
Plan 2	171	-	-	1,184	184	-	-	-	-	1,539
Plan 3	7	-	-	101	19	-	-	-	-	127
Plan 4	41	-	-	291	44	-	-	-	-	376
Plan 5	9	-	-	59	28	-	-	-	-	96
Plan 6	23	-	-	183	42	-	-	-	-	248
Plan 7	78	6	-	297	70	1	-	-	-	452
Plan 8	-	-	-	-	-	431	660	-	425	1,516
Plan 9	-	-	-	-	-	-	-	-	-	-
Plan 10	-	-	-	-	-	-	-	-	-	-
Plan 11	-	-	-	-	-	-	-	-	-	-
Plan 12	-	-	-	-	-	-	-	-	-	-
Plan 13	-	-	-	-	-	-	-	-	-	-
Plan 14	-	-	-	-	-	-	-	-	-	-
Plan 15	-	-	-	-	-	-	-	-	-	-
Plan 16	-	-	-	-	-	-	-	-	-	-
Plan 17	35	-	-	308	-	-	-	-	-	343
Plan 18	19	-	-	-	141	-	-	-	-	160
Plan 19	68	-	-	511	-	-	-	-	-	579
Plan 20	22	-	-	-	135	-	-	-	-	157
Plan 21	3	-	-	37	-	-	-	-	-	40
Plan 22	7	-	-	-	39	-	-	-	-	46
Plan 23	26	-	-	47	-	-	-	-	-	73
Plan 24	2	-	-	-	56	-	-	-	-	58
Plan 25	15	-	-	186	-	-	-	-	-	201
Plan 26	19	-	-	-	75	-	-	-	-	94
Plan 27	10	-	-	184	-	-	-	-	-	194
Plan 28	10	-	-	-	60	-	-	-	-	70
Plan 29	46	-	-	345	-	-	-	-	-	391
Plan 30	50	-	-	-	179	-	-	-	-	229
Plan 31	-	-	-	-	-	-	68	-	117	185
Plan 32	-	-	-	-	-	-	110	-	23	133
Plan 33	-	-	-	-	-	134	-	-	-	134
Plan 34	-	-	-	-	-	-	179	-	329	508
Plan 35	-	-	-	-	-	-	193	-	65	258
Plan 36	-	-	-	-	-	379	-	-	-	379
Plan 37	-	-	-	-	-	-	32	-	92	124
Plan 38	-	-	-	-	-	-	128	-	41	169
Plan 39	-	-	-	-	-	136	-	-	-	136
Plan 40	-	-	-	-	-	-	149	-	234	383
Plan 41	-	-	-	-	-	-	269	-	45	314
Plan 42	-	-	-	-	-	347	-	-	-	347
Plan 43	-	-	-	-	-	-	33	-	80	113
Plan 44	-	-	-	-	-	-	119	-	52	171
Plan 45	-	-	-	-	-	213	-	-	-	213
Plan 46	-	-	-	-	-	-	197	-	317	514
Plan 47	-	-	-	-	-	-	690	-	176	866
Plan 48	-	-	-	-	-	616	-	-	-	616
Plan 49	-	-	-	-	-	-	288	-	523	811
Plan 50	-	-	-	-	-	-	931	-	156	1,087
Plan 51	-	-	-	-	-	713	-	-	-	713
Plan 52	-	-	-	-	-	-	103	-	143	246
Plan 53	-	-	-	-	-	-	248	-	123	371
Plan 54	-	-	-	-	-	362	-	-	-	362
Plan 55	-	-	-	-	-	-	215	-	311	526
Plan 56	-	-	-	-	-	-	1,016	-	539	1,555
Plan 57	-	-	-	-	-	1,664	-	-	-	1,664

PA Rate T

Table 11. Pla

Carrier Name:
Plan Type(s):
Market Segment:
Rate Effective Da

	2016 21-year-old Non-Tobacco Premium PMPM *(in small group market, average monthly premium weighted for quarterly trend)*									
Plan Number	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**Average (weighted by enrollment by rating area)**
Totals	$ 301.28	$ 216.99	$ -	$ 316.55	$ 285.73	$ 274.04	$ 265.92	$ -	$ 267.91	**$ 280.77**
Plan 1	$ 399.34	$ -	$ -	$ 399.34	$ 399.34	$ -	$ -	$ -	$ -	$ 399.34
Plan 2	$ 399.34	$ -	$ -	$ 399.34	$ 399.34	$ -	$ -	$ -	$ -	$ 399.34
Plan 3	$ 324.77	$ -	$ -	$ 324.77	$ 324.77	$ -	$ -	$ -	$ -	$ 324.77
Plan 4	$ 324.77	$ -	$ -	$ 324.77	$ 324.77	$ -	$ -	$ -	$ -	$ 324.77
Plan 5	$ 264.48	$ -	$ -	$ 264.48	$ 264.48	$ -	$ -	$ -	$ -	$ 264.48
Plan 6	$ 264.48	$ -	$ -	$ 264.48	$ 264.48	$ -	$ -	$ -	$ -	$ 264.48
Plan 7	$ 216.99	$ 216.99	$ -	$ 216.99	$ 216.99	$ 232.65	$ -	$ -	$ -	$ 217.02
Plan 8	$ -	$ -	$ -	$ -	$ -	$ 236.02	$ 236.02	$ -	$ 231.48	$ 234.75
Plan 9	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 10	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 11	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 12	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 13	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 14	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 15	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 16	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 17	$ 266.16	$ -	$ -	$ 266.16	$ -	$ -	$ -	$ -	$ -	$ 266.16
Plan 18	$ 266.16	$ -	$ -	$ -	$ 266.16	$ -	$ -	$ -	$ -	$ 266.16
Plan 19	$ 266.16	$ -	$ -	$ 266.16	$ -	$ -	$ -	$ -	$ -	$ 266.16
Plan 20	$ 266.16	$ -	$ -	$ -	$ 266.16	$ -	$ -	$ -	$ -	$ 266.16
Plan 21	$ 206.11	$ -	$ -	$ 206.11	$ -	$ -	$ -	$ -	$ -	$ 206.11
Plan 22	$ 206.11	$ -	$ -	$ -	$ 206.11	$ -	$ -	$ -	$ -	$ 206.11
Plan 23	$ 206.11	$ -	$ -	$ 206.11	$ -	$ -	$ -	$ -	$ -	$ 206.11
Plan 24	$ 206.11	$ -	$ -	$ -	$ 206.11	$ -	$ -	$ -	$ -	$ 206.11
Plan 25	$ 216.99	$ -	$ -	$ 216.99	$ -	$ -	$ -	$ -	$ -	$ 216.99
Plan 26	$ 216.99	$ -	$ -	$ -	$ 216.99	$ -	$ -	$ -	$ -	$ 216.99
Plan 27	$ 315.00	$ -	$ -	$ 315.00	$ -	$ -	$ -	$ -	$ -	$ 315.00
Plan 28	$ 315.00	$ -	$ -	$ -	$ 315.00	$ -	$ -	$ -	$ -	$ 315.00
Plan 29	$ 260.89	$ -	$ -	$ 260.89	$ -	$ -	$ -	$ -	$ -	$ 260.89
Plan 30	$ 260.89	$ -	$ -	$ -	$ 260.89	$ -	$ -	$ -	$ -	$ 260.89
Plan 31	$ -	$ -	$ -	$ -	$ -	$ -	$ 353.86	$ -	$ 347.06	$ 349.56
Plan 32	$ -	$ -	$ -	$ -	$ -	$ -	$ 353.86	$ -	$ 347.06	$ 352.68
Plan 33	$ -	$ -	$ -	$ -	$ -	$ 353.86	$ -	$ -	$ -	$ 353.86
Plan 34	$ -	$ -	$ -	$ -	$ -	$ -	$ 353.86	$ -	$ 347.06	$ 349.45
Plan 35	$ -	$ -	$ -	$ -	$ -	$ -	$ 353.86	$ -	$ 347.06	$ 352.15
Plan 36	$ -	$ -	$ -	$ -	$ -	$ 353.86	$ -	$ -	$ -	$ 353.86
Plan 37	$ -	$ -	$ -	$ -	$ -	$ -	$ 288.60	$ -	$ 283.05	$ 284.48
Plan 38	$ -	$ -	$ -	$ -	$ -	$ -	$ 288.60	$ -	$ 283.05	$ 287.25
Plan 39	$ -	$ -	$ -	$ -	$ -	$ 288.60	$ -	$ -	$ -	$ 288.60
Plan 40	$ -	$ -	$ -	$ -	$ -	$ -	$ 288.60	$ -	$ 283.05	$ 285.21
Plan 41	$ -	$ -	$ -	$ -	$ -	$ -	$ 288.60	$ -	$ 283.05	$ 287.80
Plan 42	$ -	$ -	$ -	$ -	$ -	$ 288.60	$ -	$ -	$ -	$ 288.60
Plan 43	$ -	$ -	$ -	$ -	$ -	$ -	$ 236.02	$ -	$ 231.48	$ 232.80
Plan 44	$ -	$ -	$ -	$ -	$ -	$ -	$ 236.02	$ -	$ 231.48	$ 234.64
Plan 45	$ -	$ -	$ -	$ -	$ -	$ 236.02	$ -	$ -	$ -	$ 236.02
Plan 46	$ -	$ -	$ -	$ -	$ -	$ -	$ 224.56	$ -	$ 220.24	$ 221.89
Plan 47	$ -	$ -	$ -	$ -	$ -	$ -	$ 224.56	$ -	$ 220.24	$ 223.68
Plan 48	$ -	$ -	$ -	$ -	$ -	$ 224.56	$ -	$ -	$ -	$ 224.56
Plan 49	$ -	$ -	$ -	$ -	$ -	$ -	$ 224.56	$ -	$ 220.24	$ 221.77
Plan 50	$ -	$ -	$ -	$ -	$ -	$ -	$ 224.56	$ -	$ 220.24	$ 223.94
Plan 51	$ -	$ -	$ -	$ -	$ -	$ 224.56	$ -	$ -	$ -	$ 224.56
Plan 52	$ -	$ -	$ -	$ -	$ -	$ -	$ 343.36	$ -	$ 336.75	$ 339.52
Plan 53	$ -	$ -	$ -	$ -	$ -	$ -	$ 343.36	$ -	$ 336.75	$ 341.17
Plan 54	$ -	$ -	$ -	$ -	$ -	$ 343.36	$ -	$ -	$ -	$ 343.36
Plan 55	$ -	$ -	$ -	$ -	$ -	$ -	$ 284.38	$ -	$ 278.91	$ 281.14
Plan 56	$ -	$ -	$ -	$ -	$ -	$ -	$ 284.38	$ -	$ 278.91	$ 282.48
Plan 57	$ -	$ -	$ -	$ -	$ -	$ 284.38	$ -	$ -	$ -	$ 284.38

PA Rate T

Table 11. Pla

Carrier Name:
Plan Type(s):
Market Segment:
Rate Effective Da

	2017 21-year-old Non-Tobacco Premium PMPM *(in small group market, average monthly premium weighted for quarterly trend)*									
Plan Number	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**Average (weighted by enrollment by rating area)**
Totals	$ 468.29	$ 311.53	$ -	$ 486.36	$ 451.75	$ 395.94	$ 386.31	$ -	$ 388.17	**$ 415.56**
Plan 1	$ 569.85	$ -	$ -	$ 569.85	$ 569.85	$ -	$ -	$ -	$ -	$ 569.85
Plan 2	$ 569.85	$ -	$ -	$ 569.85	$ 569.85	$ -	$ -	$ -	$ -	$ 569.85
Plan 3	$ 473.64	$ -	$ -	$ 473.64	$ 473.64	$ -	$ -	$ -	$ -	$ 473.64
Plan 4	$ 473.64	$ -	$ -	$ 473.64	$ 473.64	$ -	$ -	$ -	$ -	$ 473.64
Plan 5	$ 390.24	$ -	$ -	$ 390.24	$ 390.24	$ -	$ -	$ -	$ -	$ 390.24
Plan 6	$ 390.24	$ -	$ -	$ 390.24	$ 390.24	$ -	$ -	$ -	$ -	$ 390.24
Plan 7	$ 311.53	$ 311.53	$ -	$ 311.53	$ 311.53	$ 334.01	$ -	$ -	$ -	$ 311.58
Plan 8	$ -	$ -	$ -	$ -	$ -	$ 336.44	$ 336.44	$ -	$ 329.97	$ 334.62
Plan 9	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 10	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 11	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 12	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 13	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 14	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 15	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 16	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Plan 17	$ 390.24	$ -	$ -	$ 390.24	$ -	$ -	$ -	$ -	$ -	$ 390.24
Plan 18	$ 390.24	$ -	$ -	$ -	$ 390.24	$ -	$ -	$ -	$ -	$ 390.24
Plan 19	$ 569.85	$ -	$ -	$ 569.85	$ -	$ -	$ -	$ -	$ -	$ 569.85
Plan 20	$ 569.85	$ -	$ -	$ -	$ 569.85	$ -	$ -	$ -	$ -	$ 569.85
Plan 21	$ 390.24	$ -	$ -	$ 390.24	$ -	$ -	$ -	$ -	$ -	$ 390.24
Plan 22	$ 390.24	$ -	$ -	$ -	$ 390.24	$ -	$ -	$ -	$ -	$ 390.24
Plan 23	$ 390.24	$ -	$ -	$ 390.24	$ -	$ -	$ -	$ -	$ -	$ 390.24
Plan 24	$ 390.24	$ -	$ -	$ -	$ 390.24	$ -	$ -	$ -	$ -	$ 390.24
Plan 25	$ 390.24	$ -	$ -	$ 390.24	$ -	$ -	$ -	$ -	$ -	$ 390.24
Plan 26	$ 390.24	$ -	$ -	$ -	$ 390.24	$ -	$ -	$ -	$ -	$ 390.24
Plan 27	$ 473.64	$ -	$ -	$ 473.64	$ -	$ -	$ -	$ -	$ -	$ 473.64
Plan 28	$ 473.64	$ -	$ -	$ -	$ 473.64	$ -	$ -	$ -	$ -	$ 473.64
Plan 29	$ 390.24	$ -	$ -	$ 390.24	$ -	$ -	$ -	$ -	$ -	$ 390.24
Plan 30	$ 390.24	$ -	$ -	$ -	$ 390.24	$ -	$ -	$ -	$ -	$ 390.24
Plan 31	$ -	$ -	$ -	$ -	$ -	$ -	$ 473.67	$ -	$ 464.56	$ 467.91
Plan 32	$ -	$ -	$ -	$ -	$ -	$ -	$ 490.20	$ -	$ 480.77	$ 488.57
Plan 33	$ -	$ -	$ -	$ -	$ -	$ 467.84	$ -	$ -	$ -	$ 467.84
Plan 34	$ -	$ -	$ -	$ -	$ -	$ -	$ 473.67	$ -	$ 464.56	$ 467.77
Plan 35	$ -	$ -	$ -	$ -	$ -	$ -	$ 490.20	$ -	$ 480.77	$ 487.82
Plan 36	$ -	$ -	$ -	$ -	$ -	$ 467.84	$ -	$ -	$ -	$ 467.84
Plan 37	$ -	$ -	$ -	$ -	$ -	$ -	$ 397.70	$ -	$ 390.05	$ 392.02
Plan 38	$ -	$ -	$ -	$ -	$ -	$ -	$ 413.55	$ -	$ 405.60	$ 411.62
Plan 39	$ -	$ -	$ -	$ -	$ -	$ 397.70	$ -	$ -	$ -	$ 397.70
Plan 40	$ -	$ -	$ -	$ -	$ -	$ -	$ 397.70	$ -	$ 390.05	$ 393.03
Plan 41	$ -	$ -	$ -	$ -	$ -	$ -	$ 413.55	$ -	$ 405.60	$ 412.41
Plan 42	$ -	$ -	$ -	$ -	$ -	$ 397.70	$ -	$ -	$ -	$ 397.70
Plan 43	$ -	$ -	$ -	$ -	$ -	$ -	$ 397.70	$ -	$ 390.05	$ 392.28
Plan 44	$ -	$ -	$ -	$ -	$ -	$ -	$ 336.80	$ -	$ 330.32	$ 334.83
Plan 45	$ -	$ -	$ -	$ -	$ -	$ 397.70	$ -	$ -	$ -	$ 397.70
Plan 46	$ -	$ -	$ -	$ -	$ -	$ -	$ 397.70	$ -	$ 390.05	$ 392.98
Plan 47	$ -	$ -	$ -	$ -	$ -	$ -	$ 336.80	$ -	$ 330.32	$ 335.49
Plan 48	$ -	$ -	$ -	$ -	$ -	$ 397.70	$ -	$ -	$ -	$ 397.70
Plan 49	$ -	$ -	$ -	$ -	$ -	$ -	$ 336.44	$ -	$ 329.97	$ 332.27
Plan 50	$ -	$ -	$ -	$ -	$ -	$ -	$ 336.80	$ -	$ 330.32	$ 335.87
Plan 51	$ -	$ -	$ -	$ -	$ -	$ 336.44	$ -	$ -	$ -	$ 336.44
Plan 52	$ -	$ -	$ -	$ -	$ -	$ -	$ 473.67	$ -	$ 464.56	$ 468.38
Plan 53	$ -	$ -	$ -	$ -	$ -	$ -	$ 490.20	$ -	$ 480.77	$ 487.07
Plan 54	$ -	$ -	$ -	$ -	$ -	$ 467.84	$ -	$ -	$ -	$ 467.84
Plan 55	$ -	$ -	$ -	$ -	$ -	$ -	$ 397.70	$ -	$ 390.05	$ 393.18
Plan 56	$ -	$ -	$ -	$ -	$ -	$ -	$ 413.55	$ -	$ 405.60	$ 410.79
Plan 57	$ -	$ -	$ -	$ -	$ -	$ 397.70	$ -	$ -	$ -	$ 397.70

PA Rate T

Table 11. Pla

Carrier Name:
Plan Type(s):
Market Segment:
Rate Effective Da

	Change in 21-year-old Non-Tobacco Premium PMPM									
Plan Number	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**Average (weighted by enrollment by rating area)**
Totals	58.0%	43.6%	0.0%	56.1%	60.5%	46.1%	46.1%	0.0%	46.2%	**49.3%**
Plan 1	42.7%	0.0%	0.0%	42.7%	42.7%	0.0%	0.0%	0.0%	0.0%	42.7%
Plan 2	42.7%	0.0%	0.0%	42.7%	42.7%	0.0%	0.0%	0.0%	0.0%	42.7%
Plan 3	45.8%	0.0%	0.0%	45.8%	45.8%	0.0%	0.0%	0.0%	0.0%	45.8%
Plan 4	45.8%	0.0%	0.0%	45.8%	45.8%	0.0%	0.0%	0.0%	0.0%	45.8%
Plan 5	47.5%	0.0%	0.0%	47.5%	47.5%	0.0%	0.0%	0.0%	0.0%	47.5%
Plan 6	47.5%	0.0%	0.0%	47.5%	47.5%	0.0%	0.0%	0.0%	0.0%	47.5%
Plan 7	43.6%	43.6%	0.0%	43.6%	43.6%	43.6%	0.0%	0.0%	0.0%	43.6%
Plan 8	0.0%	0.0%	0.0%	0.0%	0.0%	42.5%	42.5%	0.0%	42.5%	42.5%
Plan 9	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plan 10	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plan 11	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plan 12	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plan 13	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plan 14	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plan 15	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plan 16	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plan 17	46.6%	0.0%	0.0%	46.6%	0.0%	0.0%	0.0%	0.0%	0.0%	46.6%
Plan 18	46.6%	0.0%	0.0%	0.0%	46.6%	0.0%	0.0%	0.0%	0.0%	46.6%
Plan 19	114.1%	0.0%	0.0%	114.1%	0.0%	0.0%	0.0%	0.0%	0.0%	114.1%
Plan 20	114.1%	0.0%	0.0%	0.0%	114.1%	0.0%	0.0%	0.0%	0.0%	114.1%
Plan 21	89.3%	0.0%	0.0%	89.3%	0.0%	0.0%	0.0%	0.0%	0.0%	89.3%
Plan 22	89.3%	0.0%	0.0%	0.0%	89.3%	0.0%	0.0%	0.0%	0.0%	89.3%
Plan 23	89.3%	0.0%	0.0%	89.3%	0.0%	0.0%	0.0%	0.0%	0.0%	89.3%
Plan 24	89.3%	0.0%	0.0%	0.0%	89.3%	0.0%	0.0%	0.0%	0.0%	89.3%
Plan 25	79.8%	0.0%	0.0%	79.8%	0.0%	0.0%	0.0%	0.0%	0.0%	79.8%
Plan 26	79.8%	0.0%	0.0%	0.0%	79.8%	0.0%	0.0%	0.0%	0.0%	79.8%
Plan 27	50.4%	0.0%	0.0%	50.4%	0.0%	0.0%	0.0%	0.0%	0.0%	50.4%
Plan 28	50.4%	0.0%	0.0%	0.0%	50.4%	0.0%	0.0%	0.0%	0.0%	50.4%
Plan 29	49.6%	0.0%	0.0%	49.6%	0.0%	0.0%	0.0%	0.0%	0.0%	49.6%
Plan 30	49.6%	0.0%	0.0%	0.0%	49.6%	0.0%	0.0%	0.0%	0.0%	49.6%
Plan 31	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	33.9%	0.0%	33.9%	33.9%
Plan 32	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	38.5%	0.0%	38.5%	38.5%
Plan 33	0.0%	0.0%	0.0%	0.0%	0.0%	32.2%	0.0%	0.0%	0.0%	32.2%
Plan 34	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	33.9%	0.0%	33.9%	33.9%
Plan 35	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	38.5%	0.0%	38.5%	38.5%
Plan 36	0.0%	0.0%	0.0%	0.0%	0.0%	32.2%	0.0%	0.0%	0.0%	32.2%
Plan 37	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	37.8%	0.0%	37.8%	37.8%
Plan 38	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	43.3%	0.0%	43.3%	43.3%
Plan 39	0.0%	0.0%	0.0%	0.0%	0.0%	37.8%	0.0%	0.0%	0.0%	37.8%
Plan 40	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	37.8%	0.0%	37.8%	37.8%
Plan 41	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	43.3%	0.0%	43.3%	43.3%
Plan 42	0.0%	0.0%	0.0%	0.0%	0.0%	37.8%	0.0%	0.0%	0.0%	37.8%
Plan 43	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	68.5%	0.0%	68.5%	68.5%
Plan 44	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	42.7%	0.0%	42.7%	42.7%
Plan 45	0.0%	0.0%	0.0%	0.0%	0.0%	68.5%	0.0%	0.0%	0.0%	68.5%
Plan 46	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	77.1%	0.0%	77.1%	77.1%
Plan 47	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	50.0%	0.0%	50.0%	50.0%
Plan 48	0.0%	0.0%	0.0%	0.0%	0.0%	77.1%	0.0%	0.0%	0.0%	77.1%
Plan 49	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	49.8%	0.0%	49.8%	49.8%
Plan 50	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	50.0%	0.0%	50.0%	50.0%
Plan 51	0.0%	0.0%	0.0%	0.0%	0.0%	49.8%	0.0%	0.0%	0.0%	49.8%
Plan 52	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	38.0%	0.0%	38.0%	38.0%
Plan 53	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	42.8%	0.0%	42.8%	42.8%
Plan 54	0.0%	0.0%	0.0%	0.0%	0.0%	36.3%	0.0%	0.0%	0.0%	36.3%
Plan 55	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	39.8%	0.0%	39.8%	39.8%
Plan 56	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	45.4%	0.0%	45.4%	45.4%
Plan 57	0.0%	0.0%	0.0%	0.0%	0.0%	39.8%	0.0%	0.0%	0.0%	39.8%

PA Rate Template Part V
Consumer Factors

Table 12. Age and Tobacco Factors

2017 Age and Tobacco Factors						
Age Band	Age Factor	Tobacco Factor		Age Band	Age Factor	Tobacco Factor
0-20	0.635			43	1.357	1.121
21	1.000	1.025		44	1.397	1.132
22	1.000	1.025		45	1.444	1.145
23	1.000	1.025		46	1.500	1.16
24	1.000	1.025		47	1.563	1.177
25	1.004	1.025		48	1.635	1.196
26	1.024	1.025		49	1.706	1.217
27	1.048	1.025		50	1.786	1.225
28	1.087	1.025		51	1.865	1.225
29	1.119	1.025		52	1.952	1.225
30	1.135	1.025		53	2.040	1.225
31	1.159	1.025		54	2.135	1.225
32	1.183	1.025		55	2.230	1.225
33	1.198	1.025		56	2.333	1.225
34	1.214	1.025		57	2.437	1.225
35	1.222	1.025		58	2.548	1.225
36	1.230	1.025		59	2.603	1.225
37	1.238	1.025		60	2.714	1.225
38	1.246	1.025		61	2.810	1.225
39	1.262	1.025		62	2.873	1.225
40	1.278	1.1		63	2.952	1.225
41	1.302	1.105		64+	3.000	1.225
42	1.325	1.112				

*PA follows the federal default age curve.

Table 13. Geographic Factors

Geographic Area Factors			
Area	Counties	Current Factor	Proposed Factor
Rating Area 1	Clarion, Crawford, Erie, Forest, McKean, Mercer, Venango, Warren	0.970	0.970
Rating Area 2	Cameron, Elk, Potter	0.970	0.970
Rating Area 3			
Rating Area 4	Allegheny, Armstrong, Beaver, Butler, Fayette, Greene, Indiana, Lawrence, Washington, Westmoreland	0.970	0.970
Rating Area 5	Bedford, Blair, Cambria, Clearfield, Huntingdon, Jefferson, Somerset	0.970	0.970
Rating Area 6	Centre, Columbia, Lehigh, Mifflin, Montour, Northampton, Northumberland, Schuylkill, Snyder, Union	1.040	1.040
Rating Area 7	Adams, Berks, Lancaster, York	1.040	1.040
Rating Area 8			
Rating Area 9	Cumberland, Dauphin, Franklin, Fulton, Juniata, Lebanon, Perry	1.020	1.020

Table 14. Network Factors

2017 Network Factors				
Network Name	Rating Area	Current Factor	Proposed Factor	DOH Approval Date
KHPW - Closed Rx, Non-HSA	Zone C (see attached memo)	0.984	0.965	11/5/1982
KHPW - Closed Rx, HSA	Zone L (see attached memo)	N/A	0.990	11/5/1982
KHPW - Comprehensive Rx	Zone L (see attached memo)	N/A	1.000	11/5/1982
PremierBlue Shield Preferred (	Zone F (see attached memo)	1.000	0.915	12/1993 & 8/31/2001
PremierBlue Shield Preferred (	Zone K (see attached memo)	0.914	0.915	12/1993 & 8/31/2001
PremierBlue Shield Preferred (	Zone O (see attached memo)	N/A	0.91548	12/1993 & 8/31/2001
PremierBlue Shield Preferred (	Zone O (see attached memo)	N/A	0.94048	12/1993 & 8/31/2001
PremierBlue Shield Preferred (	Zone N (see attached memo)	N/A	0.91548	12/1993 & 8/31/2001