Filing at a Glance

Company:	Geisinger Quality Options
Product Name:	PPO
State:	Pennsylvania
TOI:	H16I Individual Health - Major Medical
Sub-TOI:	H16I.005A Individual - Preferred Provider (PPO)
Filing Type:	Rate - Other (Not M.U. or G.I. Product)
Date Submitted:	05/15/2015
SERFF Tr Num:	GSHP-130072442
SERFF Status:	Assigned
State Tr Num:	GSHP-130072442
State Status:	Received Review in Progress
Co Tr Num:	INDIV PPO
Implementation Date Requested:	01/01/2016
Author(s):	Vicki Bardsley, Diana Ginitz, Rahmaire Brooks
Reviewer(s):	Jim Laverty (AH) (primary)
Disposition Date:	
Disposition Status:	
Implementation Date:	

State Filing Description:

Proposed 58.4% increase on 2016 on & off exchange individual PPO rates.
Binders ID#: GSHP-PA16-125046951

State: *Pennsylvania* **Filing Company:** *Geisinger Quality Options*
TOI/Sub-TOI: *H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)*
Product Name: *PPO*
Project Name/Number: *Individual PPO Exchange Rate Filing-eff Jan2016/Indiv PPO*

General Information

Project Name: Individual PPO Exchange Rate Filing-eff Jan2016
Status of Filing in Domicile: Not Filed
Project Number: Indiv PPO
Date Approved in Domicile:
Requested Filing Mode: Review & Approval
Domicile Status Comments:
Explanation for Combination/Other:
Market Type: Individual
Submission Type: New Submission
Individual Market Type: Individual
Overall Rate Impact: 58.4%
Filing Status Changed: 05/15/2015
State Status Changed: 05/15/2015
Deemer Date:
Created By: Vicki Bardsley
Submitted By: Vicki Bardsley
Corresponding Filing Tracking Number: GSHP-130073940,GSHP-130077813
PPACA: Non-Grandfathered Immed Mkt Reforms
PPACA Notes: null
Exchange Intentions: It is GHP's intent to offer these benefit plans on the Exchange.
Additional Benefits: No

Filing Description:
Individual PPO-2016 Exchange Rate Filing

Company and Contact

Filing Contact Information

Vicki Bardsley, Manager Actuarial Services
vbardsley@thehealthplan.com
100 North Academy Ave.
570-271-7842 [Phone]
Danville, PA 17822-3225
570-271-5474 [FAX]

Filing Company Information

Geisinger Quality Options
CoCode:
State of Domicile:
100 North Academy Avenue
Group Code:
Pennsylvania
Danville, PA 17822
Group Name:
Company Type:
(570) 271-7842 ext. [Phone]
FEIN Number: 20-4275139
State ID Number:

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:

State: Pennsylvania **Filing Company:** Geisinger Quality Options
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)
Product Name: PPO
Project Name/Number: Individual PPO Exchange Rate Filing-eff Jan2016/Indiv PPO

Supporting Document Schedules

Satisfied - Item:	Redacted Actuarial Memorandum
Comments:	
Attachment(s):	Redacted_ActuarialMemorandum_2016 Filings_IndivPPO_05132015.pdf Individual PPO 2016 Filing-Cover Letter.pdf HIOS Part 2 Consumer Justification Narrative-Individual PPO-2016 Exchange Filing.pdf
Item Status:	
Status Date:	

Actuarial Memorandum—Individual PPO

General Information

Company Identifying Information

Company Legal Name: Geisinger Quality Options
State: Pennsylvania
HIOS Issuer ID: 75729
Market: Individual
Effective Date: 1/1/2016

Company Contact Information

Primary Contact Name: Sarah MacDerment
Primary Contact Phone: 570-214-2348
Primary Contact email address: smmacderment@thehealthplan.com

Proposed Rate Increase

Reason for Rate Increase

The proposed overall rate increase is **58.36%.** The components of this rate increase are:

- Single Risk Pool experience which is more adverse than assumed in current rates;
- Cost trend;
- Utilization trend;
- Changes in administrative expenses;
- Changes in ACA fees (including Reinsurance Program);
- Changes in population demographic;
- Changes in plan selection;
- Changes in morbidity load;
- Changes in Transitional Reinsurance coverage;
- Changes in Risk Adjustment.

Each of these components is discussed in detail under the "Projection Factors" section of this document.

Experience Period Premium and Claims

Paid Through Date

The Experience Period data provided in the URRT Worksheet 1, Section I is incurred in calendar year 2014 and paid through 2/20/2015.

Premiums (net of MLR Rebate) in Experience Period

Premiums include earned premiums for calendar year 2014 for the Single Risk Pool. Premiums are not reduced by taxes and/or assessments.

MLR rebates are not expected to be paid for this block of business. Initial estimates of rebates have been completed utilizing the methodology required for the CY 2014 rebate filing. Estimates suggest that the individual market MLR will be above the minimum MLR target of 80%.

Allowed and Incurred Claims Incurred During the Experience Period

The Experience Period Claims are based on individual non-grandfathered business incurred and paid claims with IBNR added for the tail of claims incurred but not paid. Allowed claims are directly from claim records. For both paid and allowed claims the same IBNR factors were used. The IBNR factors were based on legal-entity level claims completion tables which include individual and group commercial experience. This method is appropriate in order to assure proper credibility and because timing of claims payment to providers does not vary by market or product.

Benefit Categories

Benefit Category	Description
Inpatient Hospital	Determined by place of service (Hospital—IP)
Outpatient Hospital	Determined by place of service (Hospital—OP)
Professional	Determined by place of service (Physician's office)
Other Medical	Determined by place of service (any provider not Hospital or Physician's office)
Capitation	Claims per Financial Department
Prescription Drug	Claims per contracted PBM

Projection Factors

To best estimate the Projected Allowed Experience Claims for this Single Risk Pool the population was segmented into different cohorts that have different population demographics, experience and morbidity.

Credibility Manual Rate Development

Source and Appropriateness of Experience Data Used

The Credibility Manual Rate is developed using the individual non-grandfathered business combined with the individual grandfathered business. Experience data for each segment of this population are incurred and paid in calendar year 2014 and paid through 2/20/15 with IBNR added for the remaining tail of claims incurred but not paid. IBNR is determined as described above in the Experience Period Premium and Claims section. This population is appropriate because each segment of this population is anticipated to make up a portion of the Projection Period based on renewals and transitioning to the ACA market.

Adjustments Made to the Data

The following segments are included in the development of the Credibility Manual Rate and adjusted to represent the expected experience in the projection period.

Changes in Benefits

Additional benefits due to Essential Health Benefits requirements are included in both of the non-ACA Compliant Experience segments:

+ Autism benefit (aka "Habilitative" Services): 1.7% of claims
+ Pediatric/Adult Eye Exam: $1.09 PMPM
+ Pediatric Eyewear: $2.54 PMPM
+ 100% coverage of adult physicals: 0.75% of claims
+ Chiropractic Coverage: $1.85 PMPM
+ Extraction of Wisdom Teeth: $0.80 PMPM
+ Mental Health Benefits: $4.04

Trend Factors

Trend factors are projected for unit cost and utilization components:

- Unit cost trend factors are based on recorded anticipated increases in facility and professional fees from the Experience to Projection Period. These increases are composited across all facilities and provider groups.
- Utilization trend projections are based on least-square regression modeling, taking into account historical claims patterns, anticipated economic activity and changes in care patterns.
- Seasonality adjustments are made to the claims to account for changes in work days.
- Prescription drug trends are adjusted to account for expired patents for the blockbuster drugs as well as adjustments for other less significant changes in brand and generic utilization.
- Further adjustments have been made to the trends to reflect expected changes due to new medical management initiatives that are expected to yield savings in the projection period.

Inclusion of Capitation Payments

All of the benefits provided under a capitated arrangement that are in the Projection Period are represented in the Experience Period.

Credibility of Experience

The existing non-grandfathered business shown in the Experience Period section does not reflect the anticipated risk and composition of the Projection Period. The Credibility Manual Rate is developed using population segments that are in the Experience Period blended with population segments that are not in the Experience Period. In order to avoid double counting the Experience Period and avoid complicated adjustments to reflect the expected distribution of enrollment in each segment, the credibility of the Experience Period is set to 0.0%. This approach is consistent with the Actuarial Standard of Practice #25.

The Credibility Manual Rate is developed based on the expected enrollment in each of these segments. Each segment's allowed claims are weighted on projected member months to determine a Projected Allowed Experience Claims PMPM.

Paid to Allowed Ratio

The Paid to Allowed Average Factor is determined for the Projection Period based on the member weighted average AV Metal Value for each metallic level and the member months in each metallic level for January and February 2015 enrollment. There are variations between the AV Pricing Values and the AV Calculator values because of different cost structures and management approaches than what is reflected in the national average data used in the AV Calculator.

Risk Adjustment and Reinsurance

Experience Period Risk Adjustment and Reinsurance Adjustments PMPM

There is not enough market information available for this Single Risk Pool to confidently estimate the Risk Adjustment transfer payment. We will receive notice of payment transfer amounts at the end of June 2015. Until that time we are relying on an external analysis performed by an outside consulting firm. Calendar year 2014 individual market experience was provided to the consultants. They estimated the Risk Adjustment transfer payment based on the population risk scores relative to an assumed market average risk score and market average premium.

The Experience Period Reinsurance amount was estimated using the 2014 attachment point of $45k after which reinsurance payments begin, with a cap of $250k where after payments stop for high cost enrollees. Reimbursement is set at 80% of a member's claims in that range. These threshold amounts are applied to each member in the Experience Period and a total reinsurance receivable amount is calculated.

Risk Adjustments PMPM

The Projected Period Risk Adjustment transfer payment was determined by an external analysis performed by an outside consulting firm. This estimate relies upon the state average risk score and state average premium provided in the consultant's estimate based on 2014 ACA individual market experience. There is not enough information to confidently project a Risk Adjustment payment transfer estimate at this time. The Risk Adjustment PMPM amount used to adjust the Index Rate to the Market Adjusted Index Rate is determined by dividing by the Paid to Allowed Average Factor in the Projection Period. This converts the PMPM estimate from a paid to an allowed basis.

Projected ACA Reinsurance Recoveries Net of Reinsurance Premium

A reinsurance estimate model was developed based on our commercial book of business that included individual and small group experience to attain a credible population base. We ran the 2016 Reinsurance Program parameters through the model consisting of an attachment point of $90K, cap of $250K and 50% coinsurance. This amount is then reduced by the $2.25 PMPM contribution amount from the HHS Notice of Benefit and Payment Parameters for 2016 to determine the Reinsurance payments net of Reinsurance contributions amount. The Reinsurance PMPM amount used to adjust the Index Rate to the Market Adjusted Index Rate is determined by dividing by the Paid to Allowed Average Factor in the Projection Period. This converts the PMPM estimate from a paid to an allowed basis.

Non-Benefit Expenses and Profit & Risk

Administration Expense Load

Administration expenses are based on activity-based allocation by product for calendar year 2016. This methodology applies for all variable costs and all fixed costs. An adjustment was made to the individual administration load to take into account additional broker commissions that are expected to result from shifting business from small group market to the individual market.

Profit & Risk Margin

Profit was set at 5% of premium.

Taxes, Fees, and Subsidies

The following taxes, fees, and subsidies are added to the rates:

Tax/Fee	Unit	Amount
Annual Fee on Health Insurance Providers	% of Premium	3.00%
Federally Facilitated Exchange User Fee	% of Premium	2.10%
Patient-Centered Outcomes Research Fee	PMPM	0.20
State Premium Tax	% of Premium	3.30%
Federal Income Tax	% of Premium	2.69%

The Federally Facilitated Exchange (FFE) User Fee for the individual market is **60%** of the 3.5% exchange user fee stated in the final HHS Notice of Benefit and Payment Parameters for 2016. This is the expected enrollment in the Federally Facilitated Marketplace as a percentage of total enrollments in this Single Risk Pool.

Projected Loss Ratio

The anticipated loss ratio is **90.3%** in aggregate.

Single Risk Pool

The Single Risk Pool has been established in accordance with the requirements in 45 CFR 156.80(d) as was discussed previously in the Experience Period Premium and Claims section. The Experience Period includes transitional policies and the Projection Period includes transitional policies only to the extent that we anticipate members will transition into the ACA Compliant products.

Index Rate

The Experience Period Index Rate for this Single Risk Pool is the Allowed Claims PMPM. This represents the total combined EHB allowed claims for the Single Risk Pool divided by all covered lives in the Single Risk Pool. There are no benefits covered in addition to Essential Health benefits in the policies being offered.

The Projected Index Rate for this Single Risk Pool is the Projected Allowed Experience Claims PMPM (w/applied credibility if applicable). The projected claims reflect the changes in morbidity, trend and benefits described earlier in this memorandum. This represents the Projection Period's total combined EHB allowed claims for the Single Risk Pool divided by all covered lives in the Single Risk Pool. There are no benefits covered in addition to Essential Health benefits in the policies being offered.

Market Adjusted Index Rate

The Market Adjusted Index Rate is developed by adjusting the Index Rate for allowable market-wide modifiers. This includes the Federal Reinsurance Program, the Risk Adjustment Program and the Exchange User Fees. The Reinsurance and Risk Adjustment payments are determined on a PMPM basis and as described above under the Risk Adjustment and Reinsurance section these amounts are converted to an allowed basis. The Exchange User Fee is determined on a percentage basis and does not need to be converted to an allowed basis at this time.

Plan Adjusted Index Rates

The Plan Adjusted Index Rates are developed by adjusting the Market Adjusted Index Rate by the allowable plan level modifiers. The Actuarial Pricing Values are described in detail in the AV Pricing Value section below. The following adjustments were applied in the development of these rates:
Plan Adjusted Index Rate = ((Market Adjusted Index Rate X Tobacco Adjustment X Actuarial Pricing Value) + Administrative Expenses + PCORI PMPM) / (1 - Risk Load - Taxes and Fees)
Per the Instructions, these rates have ***not*** been calibrated for either age or area. These will be discussed in the Calibration section.

Experience Period Plan Adjusted Index Rates

The Experience Period Plan Adjusted Index Rates were not calculated or filed during the 2014 rate filing. In order to enter this figure in the current URRT we reviewed the 2014 URRT and performed the following calculations. The Projected Allowed Experience Claims PMPM is the Projected Index Rate. The Market Adjusted Index Rate is adjusted for allowable market-wide modifiers as follows.

The Plan Adjusted Index Rates are then calculated as follows.
Plan Adjusted Index Rate = ((Market Adjusted Index Rate X Tobacco Adjustment X Actuarial Pricing Value) + Administrative Expenses + PCORI PMPM) / (1 - Risk Load - Taxes and Fees)

Calibration

Age Curve Calibration

The federal age curve is used to determine a normalization factor to account for the age mix of business used in generating the Index Rate (as demonstrated in the supporting file "Calibration for Age"). The approximate weighted average age in the projection period is 48 years. The Plan Adjusted Index Rates are then divided by the overall normalization factor in order to preserve revenue-neutrality when applying the age-specific factors to the Plan Adjusted Index Rate.

Geographic Factor Calibration

The geographic rating area factors used to determine premium rates are shown below. These rating area factors are generated from a credibility-weighted average of base claim experience by region and relative provider contract factors. The normalization factor is determined using these factors weighted using membership by area. Since the overall factor is not equal to 1.0, the Plan Adjusted Index Rates are then divided by the normalization factor.

The calibration adjustments are applied uniformly to all benefit plans.

Consumer Adjusted Premium Rates

The Consumer Adjusted Premium Rates are developed by applying the following allowable rating factors to the ***calibrated*** Plan Adjusted Index Rates:

1. Age – reflecting the HHS defined age curve
2. Geographic – as displayed on the previous page
3. Tobacco status – as discussed below.

The final Premium rates for ***all*** filed benefit plans are displayed in the QHP Rating Template.

Tobacco Factor

A standard load is applied for applicants who indicate tobacco usage by affirmatively answering the question—"Have you used tobacco at least four times a week for the past six months?" This load assumption was validated using the study "*Impact of height, weight, and smoking on medical claims costs*", a research report done by Milliman to update their Medical Underwriting Guidelines in April 2009.

The base rate is adjusted to account for the load on tobacco users. We utilized the 2014 ACA compliant population to determine the percentage of members that admit to the use of tobacco and pay the increased premium for their entire contract in 2014.

AV Metal Values

The actuarial values generated from the AV Calculator are shown in the table below.

Plan ID	Per AV Calculator
75729PA0012596	79.55%
75729PA0012603	71.02%
75729PA0012607	61.13%
75729PA0012611	79.55%
75729PA0012612	71.02%
75729PA0012613	79.55%
75729PA0012614	71.02%
75729PA0012615	79.55%
75729PA0012616	71.02%
75729PA0012617	61.13%
75729PA0012618	61.13%
75729PA0012619	61.13%

The AV Metal Values included in worksheet 2 of the Unified Rate Review Template were based on the federal AV Calculator. The pharmacy benefit was modified in order to fit the 3 tier drug structure of the calculator. Our products have three generic tiers that were entered into the AV Calculator's generic category by combining the three copays based on utilization.

AV Pricing Values

The AV Pricing Values used to develop the Plan Adjust Index Rates include the following allowable modifiers described in 45 CFR 156.80(d)(2).

Actuarial Value and Cost-Sharing design of the plan

An internal pricing model was used to develop the Pricing AV based on the cost-sharing design of the plan.

Plan's provider network, delivery system characteristics and utilization management practices

The plans listed below have specific adjustments to their Plan Adjusted Index Rate based on county specific provider network contracts and coverage networks that require unique consideration.

Plan ID
75729PA0012611
75729PA0012612
75729PA0012617

Administrative costs, excluding Exchange user fees

All of the benefit plans have the same administrative cost PMPM amount added to the Plan Adjusted Index Rate.

Catastrophic plans only are adjusted for eligibility requirements for that plan

Enrollment in the catastrophic plan is limited to individuals who have not attained the age of 30 by the effective date or are certified exempt from buying coverage by the Federally Facilitated Marketplace.

Membership Projections

Membership projections are based on expectations of sales and renewals for each segment of the projected Single Risk Pool.

Terminated Plans and Products

No products are to be terminated in 2016. The following ACA Compliant plans are included in the Experience Period data and are identified as terminated in the Unified Rate Review Template. These plans were not offered starting in calendar year 2015.

Terminated Plans
75729PA0012592
75729PA0012594

75729PA0012597
75729PA0012599
75729PA0012602
75729PA0012604
75729PA0012605
75729PA0012606
75729PA0012608

Plan Type

All plan offerings meet the plan type definitions available in the URRT Worksheet 2, Section I.

Warning Alerts

The following Warning Alerts are noted in Worksheet 2 as described below.

- **Plan Adjusted Index Rate row 54**: The Plan Adjusted Index Rate in the Experience Period for ACA Compliant plans would have been $289.00 if it were required to be calculated in the 2014 rate filing. This does not reflect the premiums collected in the Experience Period due to non-ACA Compliant experience and does not represent differences in the distribution of ages, geography and benefits from when the rates were developing versus what actually emerged.
- **Total Premium row 56**: The total premium calculated here does not represent the Experience Period data since non-ACA Compliant experience does not have a Plan Adjusted Index Rate in row 54 and the ACA Compliant Plan Adjusted Index Rate does not represent differences in the distribution of ages, geography and benefits from when the rates were developing versus what actually emerged.
- **Total Incurred claims, payable with issuer funds row 67**: Worksheet 2 calculates total incurred claims by subtracting row 64 from row 60. Row 60 is the total allowed claims in the experience period and matches the amounts from worksheet 1. Row 64 is the portion of allowed claims which are not the issuer's obligation, which includes the Transitional Reinsurance and Risk Adjustment estimates for the experience period. These two amounts are not reflected in the base period experience in worksheet 1 and account for the difference shown here.
- **Worksheet 2 Row 65**: When the file is validated there is a warning indicating that the values in row 65 should be 0 for plans in 2014 and 2015. The instructions state that this row is where we enter the cost sharing reduction amount payable to the insurer by HHS. Since there are advance payments for CSR and an estimated reconciliation amount for calendar year 2014 we are not entering 0 here.

Reliance

An outside consulting firm was relied upon to provide the Experience Period Risk Adjustment PMPM estimates.

Actuarial Certification

I certify that:

1. I am a member of the American Academy of Actuaries.
2. The projected Index Rate is:
    a. In compliance with all applicable state and Federal regulations including 45 CFR 156.80(d)(1)
    b. Developed in compliance with the applicable Actuarial Standards of Practice,
    c. Is reasonable in relation to the benefits provided and the population anticipated to be covered,
    d. Is neither excessive nor deficient based on available information.
3. The Index Rate is used to develop the plan level rates using only the allowable modifiers in accordance with 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2).
4. The essential health benefits are determined in accordance with 45 CFR Part 156 and that the percentage of total premium (in Worksheet 2, Sections III and IV of the URRT) that represents the essential health benefits is calculated in accordance with actuarial standards of practice.
5. The geographic rating factors reflect only differences in the costs of delivery and do not include differences for population morbidity by geographic area.
6. The Federal AV Calculator was utilized, with an acceptable alternative methodology when appropriate, to determine the AV Metal Values shown above and in Worksheet 2, Section I of the URRT.

I confirm that the rates submitted comply with the ACA rating requirements and with the Single Risk Pool per market requirement. The URRT does not demonstrate the process used to develop the rates. Rather it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of Qualified Health Plans for Federally-facilitated Marketplaces, and for certification that the Index Rate is developed in accordance with Federal regulation and used consistently and only adjusted by the allowable modifiers.

I certify that rating factors are limited to:

(i) Age (ratio of highest age rate to lowest age rate does not exceed 3:1, and federally approved age rating curve).
(ii) Tobacco (ratio does not exceed 1.5:1).
(iii) Family size (will limit charge to first three dependent children under 19 and cost-sharing requirements for families will be equal to two-times the individual cost-sharing requirements, per federal law).
(iv) Geography (with federally approved regions).

_____

Sarah MacDerment
FSA, MAAA
Attesting Actuary

May 15, 2015

Mr. Peter Camacci
HMO/PPO Review Division
Bureau of Accident and Health Insurance
Office of Rate Policy and Regulation
Commonwealth of Pennsylvania
Department of Insurance
1311 Strawberry Square
Harrisburg, PA 17120

re: Geisinger Choice -NAIC #12743
Individual PPO Rate Filing-for Non-Grandfathered Policyholders
Effective January 1, 2016

Dear Mr. Camacci:

Enclosed for your review and approval is a copy of Geisinger Choice's proposed Individual PPO rate filing. The projected effective date is January 1, 2016.

The main purpose of this filing is to establish the required revenue for our Individual PPO non-grandfathered single risk pool based on all applicable market reforms of the Affordable Care Act (ACA).

As you are aware, the federal government established risk corridors, reinsurance and risk adjustment to protect insurance providers in the first three years of the Marketplace from unpredictable losses associated with caring for members with complex medical needs. Working with an outside actuarial firm, Geisinger Choice has projected a proposed increase that could be up to 58 percent. This increase was determined by following the federally prescribed rating formula and takes into account the estimated payment transfer as part of risk adjustment. Due to the possible variation, we are unable to determine the specific amount of additional revenue. This filing is expected to affect approximately 3,520 non-grandfathered members.

Unfortunately, the risk adjustment payment transfer amount will not be provided until late June. This payment transfer could have a significant impact on our 2016 rates. Once we are made aware of the payment transfer, we would revise our 2016 individual PPO rate filing.

Geisinger Choice is committed to offering Marketplace plans and is working to make sure our proposed rates have minimal impact on our members. We support a Pennsylvania Department of Insurance request of all insurance providers to reevaluate their 2016 rate filings upon receipt of the risk adjustment payment information in late June.

Search Geisinger Health Plan

100 North Academy Avenue • Danville, PA 17822-3220
Tel. 800-447-4000 • Fax 570-271-5475 • TTY/TDD 711

Please refer to the "Actuarial Memorandum & Attestation" uploaded in SERFF under the "Supporting Documentation" tab for a detailed explanation of our rate development.

Thank you for your consideration. Please contact me if you have any additional questions.

Sincerely,

Kurt J. Wrobel, FSA, MAAA
Chief Actuary
Geisinger Health Plan

cc. Sarah MacDerment, FSA, MAAA, Manager, Actuarial Services
Victoria Bardsley, Manager Product & Pricing, FAHM
Everard Riley, Actuarial Consultant II

*Geisinger Choice is offered through Geisinger Quality Options, Inc., an affiliate of Geisinger Health Plan (GHP).

HPACT02
C:/My Documents/Individual HMO-January 2016 Filing-for NonGrandfathered Subscribers-Cover Letter.doc
Dev: 5/15/15

HIOS Part 2 Consumer Justification Narrative

Individual PPO

Geisinger Quality Options has proposed an overall base rate increase of up to 58.4% for Individual PPO members renewing in the Marketplace effective January 1, 2016 through December 1, 2016. The overall increase is largely due to the claims experience in ACA compliant individual market plans being much higher than what was assumed in current rates. Other contributing factors include annual claims trend, federally-prescribed ACA fees and reduced benefits in the Transitional Reinsurance Program.

June 19, 2015

Vicki Bardsley, Manager Actuarial Services
Geisinger Quality Options
100 North Academy Ave.
Danville, PA 17822-3225

RE: Proposed 58.4% increase for 2016 on and off exchange individual PPO rates;
Pennsylvania Insurance Department ID #: GSHP-130072442

Dear Ms. Bardsley:

The Pennsylvania Insurance Department has received and conducted a review of the above captioned filing. In order to complete the review, we are requesting the following information. To facilitate a timely review, we request this information be provided within 14 days of the date of this letter. If you have any questions or difficulties in providing the information within this time frame, please call me.

1. Please certify that you are in compliance with 2016 Unified Rate Review Instructions (Rate Filing Justification: Parts I, II, and III version 2/21/15).

2. Please be advised that any time the URRT is changed in SERFF, the URRT in HIOS must also be updated. Please acknowledge your understanding of this requirement.

3. Please provide an actuarial narrative regarding the rate impact on this filing of a court decision that ends federal subsidies in Pennsylvania during 2016.

4. Page 2 of the actuarial memorandum describes the credibility manual rate development. Please confirm that the benefit categorization used to develop the credibility manual rate is materially consistent with the category definitions provided in the HHS Unified Rate Review Template instructions.

5. Page 2 of the actuarial memorandum indicates that the credibility manual rate is developed using experience from both grandfathered and non-grandfathered individual experience. Using this data, please show the development of the "utilization per 1000" and "average cost/service" figures, as shown in URRT Worksheet 1, Section II, by the six prescribed benefit categories. The requested development should follow the methodology of the URRT. Please provide an explanatory narrative for any adjustments from the experience period to the projection period. What was the total number of member months for this experience period?

6. What is the basis for the trend selection of 7.1% as shown on page 3 of the actuarial memo? Please provide support.

7. Page 4 of the actuarial memorandum mentions that new medical management initiatives are expected to yield savings in the projection period. Please discuss these initiatives.

8. Please show the derivation of the Projected Member Months of 42,246. Please comment on the drop in expected membership from the experience period (115,826 member months) to the projection period (42,246 member months).

9. The proposed overall rate increase is 58.4%. Page 1 of your actuarial memo lists the following factors contributing to this rate change:
(a) Single Risk Pool experience which is more adverse than assumed in current rates (morbidity);
(b) Cost trend;
(c) Utilization trend;
(d) Changes in administrative expenses;
(e) Changes in ACA fees (including the Reinsurance Program);
(f) Changes in population demographics;
(g) Changes in plan selection;
(h) Changes in morbidity load;
(i) Changes in Transitional Reinsurance coverage;
(j) Changes in Risk Adjustment.
Please show the proportions that each factor contributes to the 58.4% rate change.

10. Page 4 of the actuarial memorandum indicates that early 2015 enrollment was roughly 52% in gold plans. Was the proportion of sales in gold plans higher than expected? If so, can you explain the result?

11. Worksheet 2 of the URRT seems to indicate that the rate change is a consistent 58.4% over all plans offered. The Rate/Rule Schedule tab in SERFF indicates that the rate change varies from 59.8% to 52.0%. Please explain.

12. Worksheet 1 of the URRT shows a projected membership of 3,521 (i.e. 42,246/12). The Rate/Rule Schedule tab shows the number of policyholders as 2,386. Please explain the differing results.

13. In order to verify that only allowed adjustments were made to the index rate we need you to translate your process into the one described in the 2016 URRT Instructions. Each element should be as accurate as possible without any element being a balancing adjustment. If a balancing adjustment is needed please show it as a separate item. Please provide the development (in Excel, with formulas) of the age 21 non-tobacco rate in the SERFF Rates Table Template for all plans, starting with the index rate on the URRT Worksheet 1 and reflecting all applicable factors, including the following (as appropriate):

a. Risk Adjustment;
b. Reinsurance;
c. Exchange User Fee;
d. AV and cost sharing;
e. Utilization changes due to benefit richness;
f. Adjustment for tobacco load;

g. Provider network adjustment;
h. Benefits in addition to EHBs;
i. Non-benefit expenses including administrative costs, margin, taxes and fees;
j. Adjustment for eligibility for catastrophic plans (on catastrophic plans only);
k. Age calibration; and
l. Geographic calibration.

14. The Rate Justification Part II is a brief, non-technical, consumer-oriented explanation of the rate increase. As suggested in the HHS Part II instructions, the justification should address: (a) the scope and range of the rate increase, (b) the financial experience of the product, (c) changes in medical service costs, (d) changes in benefits, and (e) changes in administrative costs and anticipated profits. Please provide a comprehensive Part II Rate Justification to the Department.

Please be advised that there may be additional questions based on the responses to the above. Should you have any questions regarding this correspondence, please contact me at jlaverty@pa.gov or by telephone at (717) 787-2117.

Sincerely,

James Laverty ASA, MAAA
Actuarial Review Division
Bureau of Accident & Health Insurance

The following is in response to your 6/19/15 request for additional information:

1. We are certifying that the subject filing is in compliance with 2016 Unified Rate Review Instructions (Rate Filing Justification: Parts I, II, and III version 2/21/15).

2. We understand that any time the URRT is changed in SERFF, the URRT in HIOS must also be updated.

3. The King vs Burwell court decision of June 25th, 2015 effectively ruled in favor of federal subsidies continuing for 2016 and beyond. Therefore, this has no impact on our proposed rate filings.

4. As noted, page 2 of our actuarial memorandum describes the credibility manual rate development. We are in confirmation that the benefit categorization used to develop the credibility manual rate is consistent with the category definitions provided in the HHS Unified Rate Review Template instructions.

5. Page 2 of the actuarial memorandum indicates that the credibility manual rate is developed using experience from both grandfathered and non-grandfathered individual experience. Using this data, an Excel file ("URRT Development") has been uploaded to the SERFF "Supporting Documentation" tab showing the development of the "utilization per 1000" and "average cost/service" figures, as shown in URRT Worksheet 1, Section II, by the six prescribed benefit categories. All adjustments from the experience period to the projection period are explained. The total number of member months for this experience period is 115,826.

6. The cost and utilization components of the 7.1% annual trend (shown on page 3 of the actuarial memo) used to develop the 2016 rates is shown on the "Medical Trends Narrative" file (uploaded in SERFF).

7. Page 4 of the actuarial memorandum mentions that new medical management initiatives are expected to yield savings in the projection period. These initiatives are discussed in the "Medical Management Initiatives" document uploaded in SERFF.

8. The Projected Member Months shown in the URRT (i.e. 42,246) were developed by the GHP actuarial team, in conjunction with our Sales team. We estimated the number of members from our

transitional and grandfathered blocks which we expected to move to the Exchange in 2016, along with the existing Exchange members. These projected members will thus differ from the experience period enrollment (i.e. 115,826 member months) since the latter includes 84,050 member months from our current transitional (non-Exchange) block.

9. Based on our original submitted filing, the proposed overall rate increase is 58.4% (but we are still reviewing our final 2016 rate filing position). Page 1 of your actuarial memo lists the factors which contribute to this rate change. The proportions that each factor contributes to the 58.4% rate change are shown on the uploaded Excel file "Proj Rate Increase Allocation".

10. Page 4 of the actuarial memorandum indicates that early 2015 enrollment was roughly 52% in gold plans. This proportion of sales in gold plans was not higher than expected.

11. Worksheet 2 of the URRT shows the OVERALL rate increase (i.e. 58.4%) for each of the benefit plans offered since the CMS-developed macros supporting the URRT automatically populate each cell following the percentage input for the initial plan. The Rate/Rule Schedule tab in SERFF shows the actual range of rate increases (i.e. minimum 52.0% to a maximum 59.8%).

12. Worksheet 1 of the URRT shows the average projected members to be 3,521 (i.e. 42,246/12). The Rate/Rule Schedule tab shows the number of policyholders (or subscribers) as 2,386. The difference in these figures is accounted for by the fact that we have rolled up all members from the same family unit in our 2,386 policyholder figure.
13. In order to demonstrate that only allowed adjustments were made to our index rate, we have uploaded an Excel file ("Rate Calculation Examples") demonstrating the process used to develop our rates (consistent with the 2016 URRT Instructions). This file shows the development for an age 21 non-tobacco rate in the SERFF Rates Table Template for all plans, starting with the index rate on the URRT Worksheet 1 and reflecting all applicable factors.

14. The Rate Justification Part II has been expanded to address: (a) the scope and range of the rate increase, (b) the financial experience of the product, (c) changes in medical service costs, (d) changes in benefits, and (e) changes in administrative costs and anticipated profits. This revised document has been uploaded in SERFF.

Company Name:
Product:
Effective Date of Rates: January 1, 2016

Plan ID (On Exchange)=>	75729PA0012596		75729PA0012596		75729PA0012596		75729PA0012596		75729PA0012603		75729PA0012603		75729PA0012603		75729PA0012603	
Plan ID (Off Exchange)=>	75729PA0012596		75729PA0012596		75729PA0012596		75729PA0012596		75729PA0012603		75729PA0012603		75729PA0012603		75729PA0012603	
Form # =>	M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16	
Rating Area =>	Rating Area 2		Rating Area 3		Rating Area 5		Rating Area 6		Rating Area 2		Rating Area 3		Rating Area 5		Rating Area 6	
Network =>	One universal network		One universal network		One universal network		One universal network		One universal network		One universal network		One universal network		One universal network	
Metal =>	Gold		Gold		Gold		Gold		Silver		Silver		Silver		Silver	
Plan Name =>	Geisinger Choice Marketplace PPO 25/50/1000		Geisinger Choice Marketplace PPO 25/50/1000		Geisinger Choice Marketplace PPO 25/50/1000		Geisinger Choice Marketplace PPO 25/50/1000		Geisinger Choice Marketplace PPO 30/50/5000		Geisinger Choice Marketplace PPO 30/50/5000		Geisinger Choice Marketplace PPO 30/50/5000		Geisinger Choice Marketplace PPO 30/50/5000	
Deductible =>	$1,000.00		$1,000.00		$1,000.00		$1,000.00		$5,000.00		$5,000.00		$5,000.00		$5,000.00	
Coinsurance =>	0.2		0.2		0.2		0.2		0.3		0.3		0.3		0.3	
Copays =>	$25.00	$50.00	$25.00	$50.00	$25.00	$50.00	$25.00	$50.00	$30.00	$50.00	$30.00	$50.00	$30.00	$50.00	$30.00	$50.00
OOP Maximum =>	$4,000.00		$4,000.00		$4,000.00		$4,000.00		$6,000.00		$6,000.00		$6,000.00		$6,000.00	
Dental (Yes/No)	No		No		No		No		No		No		No		No	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 20	$177.69	$177.69	$190.87	$190.87	$181.69	$181.69	$191.47	$191.47	$143.90	$143.90	$154.57	$154.57	$147.13	$147.13	$155.05	$155.05
21	$279.84	$307.82	$300.59	$330.65	$286.13	$314.74	$301.53	$331.69	$226.61	$249.27	$243.42	$267.76	$231.70	$254.87	$244.18	$268.60
22	$279.84	$307.82	$300.59	$330.65	$286.13	$314.74	$301.53	$331.69	$226.61	$249.27	$243.42	$267.76	$231.70	$254.87	$244.18	$268.60
23	$279.84	$307.82	$300.59	$330.65	$286.13	$314.74	$301.53	$331.69	$226.61	$249.27	$243.42	$267.76	$231.70	$254.87	$244.18	$268.60
24	$279.84	$307.82	$300.59	$330.65	$286.13	$314.74	$301.53	$331.69	$226.61	$249.27	$243.42	$267.76	$231.70	$254.87	$244.18	$268.60
25	$280.95	$309.05	$301.79	$331.97	$287.27	$315.99	$302.74	$333.01	$227.51	$250.26	$244.39	$268.82	$232.63	$255.89	$245.15	$269.67
26	$286.55	$315.21	$307.80	$338.58	$292.99	$322.29	$308.77	$339.64	$232.05	$255.25	$249.25	$274.18	$237.26	$260.99	$250.04	$275.04
27	$293.27	$322.59	$315.01	$346.52	$299.86	$329.84	$316.00	$347.60	$237.48	$261.23	$255.10	$280.60	$242.82	$267.10	$255.90	$281.49
28	$304.18	$334.60	$326.74	$359.41	$311.02	$342.12	$327.76	$360.54	$246.32	$270.95	$264.59	$291.05	$251.86	$277.04	$265.42	$291.96
29	$313.13	$344.45	$336.36	$369.99	$320.17	$352.19	$337.41	$371.15	$253.57	$278.93	$272.38	$299.62	$259.27	$285.20	$273.23	$300.56
30	$317.61	$349.37	$341.16	$375.28	$324.75	$357.22	$342.24	$376.46	$257.20	$282.92	$276.27	$303.90	$262.98	$289.28	$277.14	$304.85
31	$324.33	$356.76	$348.38	$383.22	$331.62	$364.78	$349.47	$384.42	$262.64	$288.90	$282.11	$310.33	$268.54	$295.39	$283.00	$311.30
32	$331.04	$364.15	$355.59	$391.15	$338.48	$372.33	$356.71	$392.38	$268.08	$294.88	$287.96	$316.75	$274.10	$301.51	$288.86	$317.75
33	$335.24	$368.77	$360.10	$396.11	$342.77	$377.05	$361.23	$397.36	$271.48	$298.62	$291.61	$320.77	$277.58	$305.33	$292.52	$321.77
34	$339.72	$373.69	$364.91	$401.40	$347.35	$382.09	$366.06	$402.66	$275.10	$302.61	$295.50	$325.05	$281.28	$309.41	$296.43	$326.07
35	$341.96	$376.15	$367.32	$404.05	$349.64	$384.61	$368.47	$405.32	$276.91	$304.60	$297.45	$327.19	$283.14	$311.45	$298.38	$328.22
36	$344.20	$378.62	$369.72	$406.69	$351.93	$387.12	$370.88	$407.97	$278.73	$306.60	$299.40	$329.34	$284.99	$313.49	$300.34	$330.37
37	$346.43	$381.08	$372.13	$409.34	$354.22	$389.64	$373.29	$410.62	$280.54	$308.59	$301.34	$331.48	$286.84	$315.53	$302.29	$332.52
38	$348.67	$383.54	$374.53	$411.98	$356.51	$392.16	$375.71	$413.28	$282.35	$310.59	$303.29	$333.62	$288.70	$317.57	$304.24	$334.67
39	$353.15	$388.47	$379.34	$417.27	$361.09	$397.20	$380.53	$418.58	$285.98	$314.58	$307.19	$337.90	$292.40	$321.64	$308.15	$338.96
40	$357.63	$393.39	$384.15	$422.56	$365.66	$402.23	$385.35	$423.89	$289.60	$318.56	$311.08	$342.19	$296.11	$325.72	$312.06	$343.26
41	$364.34	$400.78	$391.36	$430.50	$372.53	$409.78	$392.59	$431.85	$295.04	$324.55	$316.92	$348.61	$301.67	$331.84	$317.92	$349.71
42	$370.78	$407.86	$398.28	$438.10	$379.11	$417.02	$399.53	$439.48	$300.25	$330.28	$322.52	$354.77	$307.00	$337.70	$323.53	$355.89
43	$379.73	$417.71	$407.90	$448.68	$388.27	$427.10	$409.18	$450.09	$307.51	$338.26	$330.31	$363.34	$314.42	$345.86	$331.35	$364.48
44	$390.93	$430.02	$419.92	$461.91	$399.71	$439.68	$421.24	$463.36	$316.57	$348.23	$340.05	$374.05	$323.68	$356.05	$341.11	$375.22
45	$404.08	$444.49	$434.05	$477.45	$413.16	$454.48	$435.41	$478.95	$327.22	$359.94	$351.49	$386.63	$334.57	$368.03	$352.59	$387.85
46	$419.75	$461.73	$450.88	$495.97	$429.18	$472.10	$452.29	$497.52	$339.91	$373.90	$365.12	$401.63	$347.55	$382.30	$366.26	$402.89
47	$437.38	$481.12	$469.82	$516.80	$447.21	$491.93	$471.29	$518.42	$354.19	$389.61	$380.45	$418.50	$362.15	$398.36	$381.65	$419.81
48	$457.53	$503.28	$491.46	$540.60	$467.81	$514.59	$493.00	$542.30	$370.50	$407.55	$397.98	$437.78	$378.83	$416.71	$399.23	$439.15
49	$477.40	$525.14	$512.80	$564.08	$488.13	$536.94	$514.41	$565.85	$386.59	$425.25	$415.26	$456.79	$395.28	$434.81	$416.56	$458.22
50	$499.78	$549.76	$536.85	$590.53	$511.01	$562.12	$538.53	$592.38	$404.72	$445.19	$434.73	$478.21	$413.81	$455.20	$436.10	$479.71
51	$521.89	$574.08	$560.59	$616.65	$533.62	$586.98	$562.35	$618.59	$422.62	$464.88	$453.96	$499.36	$432.12	$475.33	$455.39	$500.93
52	$546.24	$600.86	$586.74	$645.42	$558.51	$614.36	$588.58	$647.44	$442.34	$486.57	$475.14	$522.65	$452.28	$497.50	$476.63	$524.29
53	$570.86	$627.95	$613.20	$674.51	$583.69	$642.06	$615.12	$676.63	$462.28	$508.51	$496.56	$546.22	$472.67	$519.93	$498.12	$547.93
54	$597.45	$657.19	$641.75	$705.93	$610.87	$671.96	$643.76	$708.14	$483.81	$532.19	$519.68	$571.65	$494.68	$544.15	$521.31	$573.45
55	$624.03	$686.43	$670.31	$737.34	$638.05	$701.86	$672.41	$739.65	$505.33	$555.87	$542.81	$597.09	$516.69	$568.36	$544.51	$598.96
56	$652.85	$718.14	$701.27	$771.39	$667.52	$734.28	$703.47	$773.81	$528.67	$581.54	$567.88	$624.67	$540.55	$594.61	$569.66	$626.63
57	$681.96	$750.15	$732.53	$805.78	$697.28	$767.01	$734.83	$808.31	$552.24	$607.47	$593.19	$652.51	$564.65	$621.12	$595.06	$654.56
58	$713.02	$784.32	$765.89	$842.48	$729.04	$801.94	$768.30	$845.13	$577.39	$635.13	$620.21	$682.23	$590.37	$649.41	$622.16	$684.37
59	$728.41	$801.25	$782.42	$860.67	$744.78	$819.25	$784.88	$863.37	$589.86	$648.84	$633.60	$696.96	$603.11	$663.42	$635.59	$699.15
60	$759.47	$835.42	$815.79	$897.37	$776.54	$854.19	$818.35	$900.19	$615.01	$676.51	$660.62	$726.68	$628.83	$691.71	$662.69	$728.96
61	$786.33	$864.97	$844.65	$929.11	$804.00	$884.40	$847.30	$932.03	$636.77	$700.44	$683.99	$752.38	$651.07	$716.18	$686.13	$754.75
62	$803.96	$884.36	$863.58	$949.94	$822.03	$904.23	$866.29	$952.92	$651.04	$716.15	$699.32	$769.25	$665.67	$732.24	$701.52	$771.67
63	$826.07	$908.68	$887.33	$976.06	$844.63	$929.10	$890.11	$979.13	$668.94	$735.84	$718.55	$790.41	$683.98	$752.37	$720.81	$792.89
64	$839.50	$923.45	$901.76	$991.93	$858.37	$944.20	$904.59	$995.05	$679.82	$747.80	$730.23	$803.26	$695.10	$764.61	$732.53	$805.78
65+	$839.50	$923.45	$901.76	$991.93	$858.37	$944.20	$904.59	$995.05	$679.82	$747.80	$730.23	$803.26	$695.10	$764.61	$732.53	$805.78

Company Name:
Product:
Effective Date of Rates:

Plan ID (On Exchange)=>	75729PA0012607		75729PA0012607		75729PA0012607		75729PA0012607		75729PA0012611		75729PA0012612		75729PA0012613		75729PA0012614	
Plan ID (Off Exchange)=>	75729PA0012607		75729PA0012607		75729PA0012607		75729PA0012607		75729PA0012611		75729PA0012612		75729PA0012613		75729PA0012614	
Form # =>	M-152-116-F Rev. 1/16		M-152-116-F Rev. 1/16		M-152-116-F Rev. 1/16		M-152-116-F Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16	
Rating Area =>	Rating Area 2		Rating Area 3		Rating Area 5		Rating Area 6		Rating Area 9		Rating Area 9		Rating Area 6		Rating Area 6	
Network =>	One universal network		One universal network		One universal network		One universal network		One universal network		One universal network		One universal network		One universal network	
Metal =>	Bronze		Bronze		Bronze		Bronze		Gold		Silver		Gold		Silver	
Plan Name =>	Geisinger Choice Marketplace PPO HDHP 0%/0%/6000		Geisinger Choice Marketplace PPO HDHP 0%/0%/6000		Geisinger Choice Marketplace PPO HDHP 0%/0%/6000		Geisinger Choice Marketplace PPO HDHP 0%/0%/6000		Geisinger Choice Marketplace PPO 25/50/1000		Geisinger Choice Marketplace PPO 30/50/5000		Geisinger Choice Marketplace PPO 25/50/1000		Geisinger Choice Marketplace PPO 30/50/5000	
Deductible =>	$6,000.00		$6,000.00		$6,000.00		$6,000.00		$1,000.00		$5,000.00		$1,000.00		$5,000.00	
Coinsurance =>	0		0		0		0		0.2		0.3		0.2		0.3	
Copays =>									$25.00	$50.00	$30.00	$50.00	$25.00	$50.00	$30.00	$50.00
OOP Maximum =>	$6,250.00		$6,250.00		$6,250.00		$6,250.00		$4,000.00		$6,000.00		$4,000.00		$6,000.00	
Dental (Yes/No)	No		No		No		No		No		No		No		No	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 20	$123.69	$123.69	$132.86	$132.86	$126.47	$126.47	$133.28	$133.28	$160.21	$160.21	$130.26	$130.26	$191.47	$191.47	$155.05	$155.05
21	$194.79	$214.27	$209.24	$230.16	$199.17	$219.09	$209.90	$230.89	$252.30	$277.53	$205.14	$225.66	$301.53	$331.69	$244.18	$268.60
22	$194.79	$214.27	$209.24	$230.16	$199.17	$219.09	$209.90	$230.89	$252.30	$277.53	$205.14	$225.66	$301.53	$331.69	$244.18	$268.60
23	$194.79	$214.27	$209.24	$230.16	$199.17	$219.09	$209.90	$230.89	$252.30	$277.53	$205.14	$225.66	$301.53	$331.69	$244.18	$268.60
24	$194.79	$214.27	$209.24	$230.16	$199.17	$219.09	$209.90	$230.89	$252.30	$277.53	$205.14	$225.66	$301.53	$331.69	$244.18	$268.60
25	$195.57	$215.13	$210.07	$231.08	$199.96	$219.96	$210.73	$231.80	$253.30	$278.63	$205.96	$226.55	$302.74	$333.01	$245.15	$269.67
26	$199.46	$219.41	$214.26	$235.68	$203.95	$224.34	$214.93	$236.42	$258.35	$284.18	$210.06	$231.07	$308.77	$339.64	$250.04	$275.04
27	$204.14	$224.55	$219.28	$241.21	$208.73	$229.60	$219.97	$241.96	$264.40	$290.84	$214.98	$236.48	$316.00	$347.60	$255.90	$281.49
28	$211.74	$232.91	$227.44	$250.18	$216.49	$238.14	$228.15	$250.97	$274.24	$301.67	$222.98	$245.28	$327.76	$360.54	$265.42	$291.96
29	$217.97	$239.77	$234.13	$257.55	$222.87	$245.15	$234.87	$258.35	$282.32	$310.55	$229.55	$252.50	$337.41	$371.15	$273.23	$300.56
30	$221.09	$243.19	$237.48	$261.23	$226.05	$248.66	$238.23	$262.05	$286.35	$314.99	$232.83	$256.11	$342.24	$376.46	$277.14	$304.85
31	$225.76	$248.34	$242.50	$266.75	$230.83	$253.92	$243.26	$267.59	$292.41	$321.65	$237.75	$261.53	$349.47	$384.42	$283.00	$311.30
32	$230.44	$253.48	$247.52	$272.28	$235.61	$259.18	$248.30	$273.13	$298.46	$328.31	$242.68	$266.94	$356.71	$392.38	$288.86	$317.75
33	$233.36	$256.69	$250.66	$275.73	$238.60	$262.46	$251.45	$276.59	$302.25	$332.47	$245.75	$270.33	$361.23	$397.36	$292.52	$321.77
34	$236.47	$260.12	$254.01	$279.41	$241.79	$265.97	$254.81	$280.29	$306.28	$336.91	$249.04	$273.94	$366.06	$402.66	$296.43	$326.07
35	$238.03	$261.84	$255.68	$281.25	$243.38	$267.72	$256.49	$282.14	$308.30	$339.13	$250.68	$275.75	$368.47	$405.32	$298.38	$328.22
36	$239.59	$263.55	$257.36	$283.09	$244.98	$269.47	$258.17	$283.98	$310.32	$341.35	$252.32	$277.55	$370.88	$407.97	$300.34	$330.37
37	$241.15	$265.26	$259.03	$284.94	$246.57	$271.23	$259.85	$285.83	$312.34	$343.57	$253.96	$279.36	$373.29	$410.62	$302.29	$332.52
38	$242.71	$266.98	$260.71	$286.78	$248.16	$272.98	$261.52	$287.68	$314.36	$345.79	$255.60	$281.16	$375.71	$413.28	$304.24	$334.67
39	$245.82	$270.41	$264.05	$290.46	$251.35	$276.48	$264.88	$291.37	$318.39	$350.23	$258.88	$284.77	$380.53	$418.58	$308.15	$338.96
40	$248.94	$273.84	$267.40	$294.14	$254.54	$279.99	$268.24	$295.06	$322.43	$354.67	$262.17	$288.38	$385.35	$423.89	$312.06	$343.26
41	$253.62	$278.98	$272.42	$299.67	$259.32	$285.25	$273.28	$300.61	$328.49	$361.34	$267.09	$293.80	$392.59	$431.85	$317.92	$349.71
42	$258.10	$283.91	$277.24	$304.96	$263.90	$290.29	$278.11	$305.92	$334.29	$367.72	$271.81	$298.99	$399.53	$439.48	$323.53	$355.89
43	$264.33	$290.76	$283.93	$312.32	$270.27	$297.30	$284.82	$313.30	$342.36	$376.60	$278.37	$306.21	$409.18	$450.09	$331.35	$364.48
44	$272.12	$299.33	$292.30	$321.53	$278.24	$306.06	$293.22	$322.54	$352.45	$387.70	$286.58	$315.23	$421.24	$463.36	$341.11	$375.22
45	$281.28	$309.40	$302.13	$332.35	$287.60	$316.36	$303.08	$333.39	$364.31	$400.74	$296.22	$325.84	$435.41	$478.95	$352.59	$387.85
46	$292.18	$321.40	$313.85	$345.24	$298.75	$328.63	$314.84	$346.32	$378.44	$416.28	$307.71	$338.48	$452.29	$497.52	$366.26	$402.89
47	$304.46	$334.90	$327.03	$359.74	$311.30	$342.43	$328.06	$360.87	$394.34	$433.77	$320.63	$352.69	$471.29	$518.42	$381.65	$419.81
48	$318.48	$350.33	$342.10	$376.31	$325.64	$358.20	$343.17	$377.49	$412.50	$453.75	$335.40	$368.94	$493.00	$542.30	$399.23	$439.15
49	$332.31	$365.54	$356.95	$392.65	$339.78	$373.76	$358.07	$393.88	$430.41	$473.45	$349.96	$384.96	$514.41	$565.85	$416.56	$458.22
50	$347.89	$382.68	$373.69	$411.06	$355.71	$391.28	$374.87	$412.35	$450.60	$495.66	$366.37	$403.01	$538.53	$592.38	$436.10	$479.71
51	$363.28	$399.61	$390.22	$429.24	$371.45	$408.59	$391.45	$430.59	$470.53	$517.58	$382.58	$420.84	$562.35	$618.59	$455.39	$500.93
52	$380.23	$418.25	$408.43	$449.27	$388.77	$427.65	$409.71	$450.68	$492.48	$541.73	$400.43	$440.47	$588.58	$647.44	$476.63	$524.29
53	$397.37	$437.11	$426.84	$469.52	$406.30	$446.93	$428.18	$471.00	$514.68	$566.15	$418.48	$460.33	$615.12	$676.63	$498.12	$547.93
54	$415.88	$457.46	$446.72	$491.39	$425.22	$467.74	$448.12	$492.93	$538.65	$592.51	$437.97	$481.76	$643.76	$708.14	$521.31	$573.45
55	$434.38	$477.82	$466.59	$513.25	$444.14	$488.56	$468.06	$514.86	$562.62	$618.88	$457.46	$503.20	$672.41	$739.65	$544.51	$598.96
56	$454.44	$499.89	$488.14	$536.96	$464.66	$511.12	$489.68	$538.64	$588.60	$647.46	$478.58	$526.44	$703.47	$773.81	$569.66	$626.63
57	$474.70	$522.17	$509.90	$560.89	$485.37	$533.91	$511.50	$562.66	$614.84	$676.32	$499.92	$549.91	$734.83	$808.31	$595.06	$654.56
58	$496.32	$545.96	$533.13	$586.44	$507.48	$558.22	$534.80	$588.28	$642.84	$707.13	$522.69	$574.96	$768.30	$845.13	$622.16	$684.37
59	$507.04	$557.74	$544.64	$599.10	$518.43	$570.27	$546.35	$600.98	$656.72	$722.39	$533.97	$587.37	$784.88	$863.37	$635.59	$699.15
60	$528.66	$581.52	$567.86	$624.65	$540.54	$594.59	$569.64	$626.61	$684.73	$753.20	$556.74	$612.42	$818.35	$900.19	$662.69	$728.96
61	$547.36	$602.09	$587.95	$646.74	$559.66	$615.62	$589.79	$648.77	$708.95	$779.84	$576.43	$634.08	$847.30	$932.03	$686.13	$754.75
62	$559.63	$615.59	$601.13	$661.24	$572.21	$629.43	$603.02	$663.32	$724.84	$797.32	$589.36	$648.29	$866.29	$952.92	$701.52	$771.67
63	$575.02	$632.52	$617.66	$679.43	$587.94	$646.73	$619.60	$681.56	$744.77	$819.25	$605.56	$666.12	$890.11	$979.13	$720.81	$792.89
64	$584.37	$642.81	$627.70	$690.47	$597.50	$657.25	$629.67	$692.64	$756.88	$832.57	$615.41	$676.95	$904.59	$995.05	$732.53	$805.78
65+	$584.37	$642.81	$627.70	$690.47	$597.50	$657.25	$629.67	$692.64	$756.88	$832.57	$615.41	$676.95	$904.59	$995.05	$732.53	$805.78

Company Name:
Product:
Effective Date of Rates:

Plan ID (On Exchange)=>	75729PA0012615		75729PA0012615		75729PA0012616		75729PA0012616		75729PA0012617		75729PA0012618		75729PA0012619		75729PA0012619	
Plan ID (Off Exchange)=>	75729PA0012615		75729PA0012615		75729PA0012616		75729PA0012616		75729PA0012617		75729PA0012618		75729PA0012619		75729PA0012619	
Form # =>	M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-115- Rev. 1/16		M-152-116-F Rev. 1/16		M-152-116-F Rev. 1/16		M-152-116-F Rev. 1/16		M-152-116-F Rev. 1/16	
Rating Area =>	Rating Area 7		Rating Area 9		Rating Area 7		Rating Area 9		Rating Area 9		Rating Area 6		Rating Area 7		Rating Area 9	
Network =>	One universal network		One universal network		One universal network		One universal network		One universal network		One universal network		One universal network		One universal network	
Metal =>	Gold		Gold		Silver		Silver		Bronze		Bronze		Bronze		Bronze	
Plan Name =>	Geisinger Choice Marketplace PPO 25/50/1000		Geisinger Choice Marketplace PPO 25/50/1000		Geisinger Choice Marketplace PPO 30/50/5000		Geisinger Choice Marketplace PPO 30/50/5000		Geisinger Choice Marketplace PPO HDHP 0%/0%/6000		Geisinger Choice Marketplace PPO HDHP 0%/0%/6000		Geisinger Choice Marketplace PPO HDHP 0%/0%/6000		Geisinger Choice Marketplace PPO HDHP 0%/0%/6000	
Deductible =>	$1,000.00		$1,000.00		$5,000.00		$5,000.00		$6,000.00		$6,000.00		$6,000.00		$6,000.00	
Coinsurance =>	0.2		0.2		0.3		0.3		0		0		0		0	
Copays =>	$25.00	$50.00	$25.00	$50.00	$30.00	$50.00	$30.00	$50.00								
OOP Maximum =>	$4,000.00		$4,000.00		$6,000.00		$6,000.00		$6,250.00		$6,250.00		$6,250.00		$6,250.00	
Dental (Yes/No)	No		No		No		No		No		No		No		No	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 20	$232.00	$232.00	$197.06	$197.06	$187.87	$187.87	$159.58	$159.58	$112.25	$112.25	$133.28	$133.28	$161.49	$161.49	$137.17	$137.17
21	$365.36	$401.90	$310.34	$341.37	$295.87	$325.45	$251.31	$276.44	$176.78	$194.46	$209.90	$230.89	$254.33	$279.76	$216.02	$237.63
22	$365.36	$401.90	$310.34	$341.37	$295.87	$325.45	$251.31	$276.44	$176.78	$194.46	$209.90	$230.89	$254.33	$279.76	$216.02	$237.63
23	$365.36	$401.90	$310.34	$341.37	$295.87	$325.45	$251.31	$276.44	$176.78	$194.46	$209.90	$230.89	$254.33	$279.76	$216.02	$237.63
24	$365.36	$401.90	$310.34	$341.37	$295.87	$325.45	$251.31	$276.44	$176.78	$194.46	$209.90	$230.89	$254.33	$279.76	$216.02	$237.63
25	$366.82	$403.50	$311.57	$342.73	$297.05	$326.75	$252.31	$277.54	$177.48	$195.23	$210.73	$231.80	$255.34	$280.87	$216.88	$238.57
26	$374.13	$411.54	$317.78	$349.56	$302.96	$333.26	$257.34	$283.07	$181.02	$199.12	$214.93	$236.42	$260.42	$286.47	$221.20	$243.32
27	$382.89	$421.18	$325.23	$357.75	$310.06	$341.07	$263.37	$289.70	$185.26	$203.79	$219.97	$241.96	$266.53	$293.18	$226.39	$249.03
28	$397.14	$436.86	$337.33	$371.07	$321.60	$353.76	$273.17	$300.48	$192.16	$211.37	$228.15	$250.97	$276.45	$304.09	$234.81	$258.29
29	$408.83	$449.72	$347.26	$381.99	$331.07	$364.18	$281.21	$309.33	$197.81	$217.59	$234.87	$258.35	$284.58	$313.04	$241.73	$265.90
30	$414.68	$456.15	$352.23	$387.45	$335.80	$369.38	$285.23	$313.75	$200.64	$220.71	$238.23	$262.05	$288.65	$317.52	$245.18	$269.70
31	$423.45	$465.79	$359.68	$395.64	$342.90	$377.19	$291.26	$320.39	$204.88	$225.37	$243.26	$267.59	$294.76	$324.23	$250.37	$275.40
32	$432.22	$475.44	$367.12	$403.84	$350.00	$385.01	$297.29	$327.02	$209.13	$230.04	$248.30	$273.13	$300.86	$330.95	$255.55	$281.11
33	$437.70	$481.47	$371.78	$408.96	$354.44	$389.89	$301.06	$331.17	$211.78	$232.96	$251.45	$276.59	$304.68	$335.14	$258.79	$284.67
34	$443.54	$487.90	$376.74	$414.42	$359.18	$395.09	$305.08	$335.59	$214.61	$236.07	$254.81	$280.29	$308.75	$339.62	$262.25	$288.47
35	$446.47	$491.11	$379.23	$417.15	$361.54	$397.70	$307.09	$337.80	$216.02	$237.62	$256.49	$282.14	$310.78	$341.86	$263.98	$290.37
36	$449.39	$494.33	$381.71	$419.88	$363.91	$400.30	$309.10	$340.01	$217.44	$239.18	$258.17	$283.98	$312.81	$344.10	$265.70	$292.27
37	$452.31	$497.54	$384.19	$422.61	$366.28	$402.90	$311.11	$342.23	$218.85	$240.73	$259.85	$285.83	$314.85	$346.33	$267.43	$294.18
38	$455.23	$500.76	$386.67	$425.34	$368.64	$405.51	$313.13	$344.44	$220.26	$242.29	$261.52	$287.68	$316.88	$348.57	$269.16	$296.08
39	$461.08	$507.19	$391.64	$430.80	$373.38	$410.72	$317.15	$348.86	$223.09	$245.40	$264.88	$291.37	$320.95	$353.05	$272.62	$299.88
40	$466.93	$513.62	$396.61	$436.27	$378.11	$415.92	$321.17	$353.28	$225.92	$248.51	$268.24	$295.06	$325.02	$357.52	$276.07	$303.68
41	$475.69	$523.26	$404.05	$444.46	$385.21	$423.73	$327.20	$359.92	$230.16	$253.18	$273.28	$300.61	$331.13	$364.24	$281.26	$309.38
42	$484.10	$532.51	$411.19	$452.31	$392.02	$431.22	$332.98	$366.28	$234.23	$257.65	$278.11	$305.92	$336.97	$370.67	$286.23	$314.85
43	$495.79	$545.37	$421.12	$463.23	$401.48	$441.63	$341.02	$375.12	$239.89	$263.87	$284.82	$313.30	$345.11	$379.62	$293.14	$322.45
44	$510.40	$561.44	$433.54	$476.89	$413.32	$454.65	$351.07	$386.18	$246.96	$271.65	$293.22	$322.54	$355.29	$390.81	$301.78	$331.96
45	$527.57	$580.33	$448.12	$492.93	$427.22	$469.95	$362.88	$399.17	$255.27	$280.79	$303.08	$333.39	$367.24	$403.96	$311.93	$343.13
46	$548.03	$602.84	$465.50	$512.05	$443.79	$488.17	$376.96	$414.65	$265.17	$291.68	$314.84	$346.32	$381.48	$419.63	$324.03	$356.43
47	$571.05	$628.16	$485.05	$533.56	$462.43	$508.68	$392.79	$432.07	$276.30	$303.93	$328.06	$360.87	$397.50	$437.25	$337.64	$371.40
48	$597.36	$657.09	$507.39	$558.13	$483.73	$532.11	$410.88	$451.97	$289.03	$317.93	$343.17	$377.49	$415.81	$457.40	$353.19	$388.51
49	$623.30	$685.63	$529.43	$582.37	$504.74	$555.21	$428.73	$471.60	$301.58	$331.74	$358.07	$393.88	$433.87	$477.26	$368.53	$405.38
50	$652.53	$717.78	$554.25	$609.68	$528.41	$581.25	$448.83	$493.71	$315.72	$347.30	$374.87	$412.35	$454.22	$499.64	$385.81	$424.39
51	$681.39	$749.53	$578.77	$636.65	$551.78	$606.96	$468.68	$515.55	$329.69	$362.66	$391.45	$430.59	$474.31	$521.74	$402.88	$443.16
52	$713.18	$784.49	$605.77	$666.35	$577.52	$635.27	$490.55	$539.60	$345.07	$379.58	$409.71	$450.68	$496.43	$546.08	$421.67	$463.84
53	$745.33	$819.86	$633.08	$696.39	$603.56	$663.91	$512.66	$563.93	$360.62	$396.69	$428.18	$471.00	$518.81	$570.70	$440.68	$484.75
54	$780.04	$858.04	$662.56	$728.82	$631.67	$694.83	$536.54	$590.19	$377.42	$415.16	$448.12	$492.93	$542.97	$597.27	$461.20	$507.32
55	$814.74	$896.22	$692.04	$761.25	$659.77	$725.75	$560.41	$616.45	$394.21	$433.63	$468.06	$514.86	$567.13	$623.85	$481.72	$529.90
56	$852.38	$937.61	$724.01	$796.41	$690.25	$759.27	$586.29	$644.92	$412.42	$453.66	$489.68	$538.64	$593.33	$652.66	$503.97	$554.37
57	$890.37	$979.41	$756.28	$831.91	$721.02	$793.12	$612.43	$673.67	$430.81	$473.89	$511.50	$562.66	$619.78	$681.76	$526.44	$579.08
58	$930.93	$1,024.02	$790.73	$869.80	$753.86	$829.24	$640.32	$704.36	$450.43	$495.47	$534.80	$588.28	$648.01	$712.81	$550.42	$605.46
59	$951.02	$1,046.13	$807.80	$888.58	$770.13	$847.14	$654.15	$719.56	$460.15	$506.17	$546.35	$600.98	$662.00	$728.20	$562.30	$618.53
60	$991.58	$1,090.74	$842.24	$926.47	$802.97	$883.27	$682.04	$750.24	$479.77	$527.75	$569.64	$626.61	$690.23	$759.25	$586.28	$644.90
61	$1,026.65	$1,129.32	$872.04	$959.24	$831.37	$914.51	$706.17	$776.78	$496.74	$546.42	$589.79	$648.77	$714.64	$786.11	$607.01	$667.72
62	$1,049.67	$1,154.64	$891.59	$980.75	$850.01	$935.01	$722.00	$794.20	$507.88	$558.67	$603.02	$663.32	$730.66	$803.73	$620.62	$682.69
63	$1,078.53	$1,186.39	$916.10	$1,007.71	$873.38	$960.72	$741.85	$816.04	$521.85	$574.03	$619.60	$681.56	$750.75	$825.83	$637.69	$701.46
64	$1,096.07	$1,205.68	$931.00	$1,024.10	$887.59	$976.34	$753.91	$829.30	$530.33	$583.36	$629.67	$692.64	$762.96	$839.26	$648.06	$712.86
65+	$1,096.07	$1,205.68	$931.00	$1,024.10	$887.59	$976.34	$753.91	$829.30	$530.33	$583.36	$629.67	$692.64	$762.96	$839.26	$648.06	$712.86

Company Name:
Product:
Effective Date of Rates:

Plan ID (On Exchange)=>				
Plan ID (Off Exchange)=>				
Form # =>				
Rating Area =>				
Network =>				
Metal =>				
Plan Name =>				
Deductible =>				
Coinsurance =>				
Copays =>				
OOP Maximum =>				
Dental (Yes/No)				
Age Band	**Non-Tobacco**	**Tobacco**	**Non-Tobacco**	**Tobacco**
0 - 20				
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