

SERFF Tracking #:	HGHM-132831326	State Tracking #:	HGHM-132831326	Company Tracking #:	1A-SG-HCC-2021
State:	Pennsylvania	Filing Company:	Highmark Choice Company		
TOI/Sub-TOI:	H15G Group Health - Hospital/Surgical/Medical Expense/H15G.003 Small Group Only				
Product Name:	HCC Small Group 2022 ACA Rate Filing				
Project Name/Number:	HCC SG ACA Rate Filing 2022/1A-SG-HCC-2021				

Supporting Document Schedules

Satisfied - Item:	ACA Public Rate Filing PDF
Comments:	
Attachment(s):	2022 PID Public PDF - HCC - 071321.pdf
Item Status:	
Status Date:	



May 18, 2021

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

Re: Highmark Choice Company (HCC) 2022 ACA Rate Filing (Small Group Market)
HCC Filing # 1A-SG-HCC-2021 (SERFF Filing # HGHM-132831326)

This constitutes Notice pursuant to Section 707 of the Pennsylvania Right-to-Know Law that the attached Highmark Choice Company 2022 Small Group Market Rates Filing contains Trade Secret and Confidential Proprietary Information. Therefore, Highmark Choice Company must, prior to the release of any portion of this Filing, be notified of any request by a third party for access to this Filing, and the Trade Secret and/or Confidential Proprietary Information identified by Highmark Choice Company should be redacted before release.

Dear Ms. Gray:

This Filing includes Highmark Choice Company (HCC) (NAIC # 95048; HIOS Issuer ID # 38949) Small Group Market Off Exchange ACA rates and the supporting rate development for policies with effective dates on or after **January 1, 2022**.

In the event the Department decides to publish this Filing in the PA Bulletin, the company information requested as per the Department's 2022 ACA-Compliant Health Insurance Rate Filing Guidance, Section B, is provided below:

1. Company Name & NAIC #: **Highmark Choice Company, NAIC # 95048 ("Company")**
2. Market: **Small Group ("Market")**
3. On or Off Exchange: This Company's products are offered **Off Exchange only**
4. Effective date of coverage: **January 1, 2022**
5. Average rate change requested: **5.34%**

6. Range of rate change requested: **5.34% to 5.34%**
7. Total additional annual revenue generated from the proposed rate change: **\$2,000**
8. Product(s): **HMO**
9. Rating Areas and the change from 2021: **Regions 1, 2, 4, 5, 6** (Western, PA only)

There are no changes in our covered Rating Areas from the 2021 rate filing.

10. Metal Levels and Catastrophic Plans: This filing reflects that the Company anticipates selling the following Metal Levels of coverage in the indicated Market: **Bronze**
11. Current number of covered lives and of policyholders as of February 1, 2021: **0 covered lives; 0 policyholders**
12. Number of plans offered in 2022 and the change this represents from 2021: **1**

For 2022, there is no change from 2021.

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

13. Corresponding contract form number, SERFF and Binder ID numbers: The corresponding SERFF binder number is **HGHM-PA22-125107734** affecting the following Company products and forms:

Product Name / Type	Contract Form & SERFF #
HCC HMO	HMO-SM/WG-9, HMO/GA-SM/WG-1; HGHM-132793182

14. HIOS Issuer ID # and submission tracking number: **HIOS Issuer ID # 38949, Company Filing # 1A-SG-HCC-2021 (SERFF Filing # HGHM-132831326)**

Additional Filing Disclosures

The Company has submitted all Required Documents stipulated by the Department, including the federal documents related to this filing, in its SERFF submission. In addition to the Required

Documents, the Company has submitted a Supplemental Exhibits file containing additional detailed exhibits on items referenced in the PA Actuarial Memorandum. All tables, exhibits, and detail in support of this filing and the PA Actuarial Memorandum have been included in Excel format. For the Department's benefit, the Excel files have retained their formulas to the extent possible.

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

Potential for Material Unforeseen Impacts: This filing assumes that there will be no significant changes in legislation, regulations or otherwise (i.e. rules, regulatory guidance, etc.) impacting the ACA market, and that there are no significant changes in the participation of QHP issuers that would materially change risk adjustment transfer amounts. This filing also assumes that transitional plan coverage will be available in the Pennsylvania Small Group market through 2022. Modifications to the rate development may be necessary if significant unforeseen events occur. Examples include, but are not limited to, repeal or invalidation of the ACA or material developments in the course of the COVID-19 pandemic. As a result, Highmark Choice Company reserves the right to submit a revised filing.

Request for Confidentiality

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

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

It is our understanding that the Department does not intend to publish the confidential and proprietary information contained in this Filing or to otherwise permit this Filing and its confidential information, other than the redacted information and final approved rates, to be disclosed or released.

Furthermore and pursuant to the Pennsylvania Right-to-Know Law ("RTKL"), Highmark Choice Company must be notified prior to release of information contained in this Filing and be given the opportunity to respond to requests for such information. Should the Department receive such request or require the release of information contained in this Filing for its own purposes, Highmark Choice Company asserts its right to release a redacted version of the Filing. In

accordance with the RTKL, please contact the Highmark Choice Company RTKL representative identified below prior to release of any information contained in this Filing:

Lisa Martinelli, Esq.
RTKL Representative
VP Chief Privacy Officer
120 Fifth Avenue, FAP Suite 2114
Pittsburgh, PA 15222

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

Should you have any questions regarding the attached Filing, please feel free to contact me at (412) 544-3845 or via e-mail at: Cory.Orzak@highmark.com.

Sincerely,

A handwritten signature in black ink, appearing to read 'Cory Orzak', with a long horizontal flourish extending to the right.

Cory Orzak, FSA, MAAA
Vice President, Actuarial Services
Highmark Inc.

cc: Tija Hilton-Phillips, Esq.
Nicholas Sarneso
William Sarniak
Daryl Veach
Ryan Slean

Pennsylvania Actuarial Memorandum

1. Basic Information and Data

A. Company Information (Table 0)

Table 0 has been completed as per the instructions. Please refer to the Excel file “2022_SmGrp_HCC_PAAMExhibits_051821” submitted with this filing containing the department’s required tables. General information pertaining to this rate filing is summarized below:

- Company Name: Highmark Choice Company (“HCC”, “Company”)
- NAIC #: 95048
- HIOS Issuer ID: 38949
- State: Pennsylvania
- Market: Small Group
- Rating Area: Pennsylvania Rating Regions 1,2,4,5, and 6
- Effective Date: 1/1/2022
- SERFF Rate Filing #: HGHM-132831326

This filing assumes that there will be no significant changes in legislation, regulations or otherwise (i.e. rules, regulatory guidance, etc.) impacting the ACA market subsequent to the filing date, and that there are no significant changes in the participation of QHP issuers that would materially change the company’s expected liabilities. This filing also assumes that transitional plan coverage will be available in the Pennsylvania Small Group market through 2022. Modifications to the rate development may be necessary if significant unforeseen events occur. Examples include, but are not limited to, repeal or invalidation of the ACA or material developments in the course of the COVID pandemic. As a result, HCC reserves the right to submit a revised filing.

B. Rate History and Proposed Variations in Rate Changes

The most recent three years of historical rate changes in the Pennsylvania Small Group Market for the Company are as follows:

Period	Avg. Increase	SERFF ID#
2021 (Initial Rate Change)	0.0%	HGHM-132381009
2020 (Initial Rate Change)	-5.2%	HGHM-131937197
2019 (Initial Rate Change)	33.4%	HGHM-131496326

The rate changes vary by plan due to changes in the allowable plan level base rate components (pricing actuarial factors, geographic rating factors, network discounts, and administrative charges). These components are re-evaluated each year to keep pace with market changes and changes in health care costs. The rate changes also vary by plan due to mappings between discontinued and new plans. For

2022, the Company's proposed rate revisions vary by plan according to the detail presented in the URRT, Worksheet 2, and the PA Rate Template Table 10.

C. Average Rate Change

The average rate change from Table 10, Cell AC15 show no reported rate change. There is no membership in the renewing plans.

For comparison, the change in 21-year-old non-tobacco premium PMPM calculated in Table 11, Cell AN13, is 0.0%. However, as there is no enrollment currently in the renewal product, a rate increase amount is not calculated in Table 11.

D. Membership Count (Table 1)

Table 1 has been completed according to the instructions with the average age, age breakdown and total number of members or member months, as indicated in the table. For the 2/1/2021 data, this table reflects all of the Company's Small Group ACA enrollment, including enrollment from 2020 and 2021 plan year plans.

E. Benefit Changes

There are no plan design changes from the Company's currently approved plan designs.

For the 2022 plan year, there were no benefit changes necessary to the Company's plans to cover the benefits contained in the state's Essential Health Benefit (EHB) benchmark plan.

F. Experience Period Claims and Premium (Table 2)

Please see Table 2 for the experience period data for the most recent calendar year, for the Company and Market. The experience period paid claims data represents the 2020 calendar year results for all Affordable Care Act compliant policies in the single risk pool, with run out through February, 2021 (2 months). This data is consistent with the data reported in Section I of Worksheet I of the URRT (see below commentary). As per the 2022 ACA-Compliant Health Insurance Rate Filing Guidance, transitional policy experience was not included in either the Table 2 or Table 4 data.

The components of this exhibit were developed as follows:

- The Earned Premium represents actual revenues earned in the experience period.
- The Allowed Claims represent the Company's best estimate of the total claims prior to member cost sharing incurred during the experience period. The Allowed Claims include:
 - Two months of run out from the end of the experience period,
 - Claims processed outside of the Company's claims system (e.g., settlements), and
 - The Company's best estimate of claims incurred but not paid as of the end of the run out period.

Note that the Incurred Claims and Allowed Claims presented in the URRT are net of the Prescription Drug Rebates on their appropriate basis, while Table 2 has the Prescription Drug Rebates separately identified. As per the URR instructions, Allowed Claims do not include reinsurance recoveries or pooling charges, nor do they include quality incentive payments.

- Prescription Drug Rebates are used to reduce the level of Incurred Claims in the experience period. However for entry into Table 2, the Prescription Drug Rebates are grossed up by the experience period paid to allowed ratio since they are ultimately used to reduce allowed claims. This allows for the Table 2 results to feed into Table 5 without adjustment, but it does cause the calculated loss ratio in Table 2 to be slightly mis-stated.
- There are no non-EHB benefits or costs in the experience period.
- The EHB coverage for pediatric vision benefits are provided by the Company's vision coverage vendor under a capitation arrangement. These costs are \$0.48 PMPM uniform across each member in the experience period, and are reflected in Table 2 under the Total EHB Capitation section, where the capitation rate that the Company actually paid is grossed up by the experience period paid to allowed ratio, to get the capitations on an allowed claims basis. This further causes the calculated loss ratio in Table 2 to be slightly mis-stated.
- The Estimated Risk Adjustment represents the Company's best estimate of the year end risk adjustment transfer payment that the Company will incur based on the results in the experience period.
- The calculated loss ratio is 241.0%. This number is slightly below the actual loss ratio due to the adjustment to prescription drug rebates and capitations described above.

G. Credibility of Data (Tables 2b, 3b, 4b)

The Company has employed a credibility methodology consistent with ASOP #25 to determine the appropriate level of credibility to be assigned to the base experience period data. The assigned credibility level has been determined by referencing published studies from the Society of Actuaries (SOA), most notably "A Practical Approach to Assigning Credibility for Group Medical Insurance Pricing (December 2015)¹," as well as utilizing actuarial judgment in consideration of the Company's base experience period and projection period computations. Employing the conclusions confirmed in the referenced SOA study, the Company has established a full credibility threshold of 2,000 average members for the experience period.

As the Company has no active membership in its ACA products, the Company has assigned zero credibility to the Company's base experience data, and has utilized the appropriate combined regional experience of several companies within the Highmark corporate family to establish the credibility manual rate. These companies are Highmark Inc., Highmark Health Insurance Company, and Highmark Coverage Advantage. This experience was chosen because it is large and reasonably represents the population expected to buy HCC products. Utilizing this combined company experience established a manual rate basis that would be fully credible according to the criteria discussed above. The Company believes that utilizing this combined experience in its rate development establishes a more appropriate rate level when giving consideration to the market-wide rate relativities established by Highmark's corporate family of companies.

Since the experience period data for the Company is not 100% credible, Tables 2b, 3b, and 4b have been populated with the combined experience discussed above used to establish the manual rate basis.

H. Trend Identification (Table 3)

Table 3 identifies the annual medical and prescription drug allowed claims cost and utilization trends, as requested by the Pennsylvania Insurance Department. The definitions of service categories, cost, and utilization in Table 3 are consistent with the URRT instructions. The numbers entered in the Cost and Utilization columns are consistent with those entered in Worksheet I, Section 2 of the URRT, except as noted below.

To arrive at the trend assumption, the experience period cost and utilization data were pulled from the Company's claims systems by the defined benefit categories. For the trend component development, the Company uses results from the combined experience of the following companies within the Highmark corporate family: Highmark Inc., Highmark Choice Company, Highmark Health Insurance Company, and Highmark Coverage Advantage. The combined experience used is limited to the Company's Rating Area and Market and provides a more material base to analyze the trend components impacting the business in the Company's Market. The trend development uses a projection of allowed claim PMPMs by service category that takes into account many factors, including the Company's expectations of changes in in-network provider contracting levels, changes in out-of-network costs, changes in utilization from medical management programs, and changes in drug costs from impacts such as generic drug development and new drug treatments. To reflect the impact of provider contracting on trend, changes in in-network provider contracting levels, either known or anticipated, are factored into the cost component of trend using detailed analysis of the impact on claim levels from each material provider arrangement.

The allowed claims used for the development of the trend are adjusted and normalized to obtain a claim basis appropriate for trend development. These adjustments include changes for in-network provider contracting levels, changes for out-of-network costs, changes in utilization from medical management programs, and changes in drug costs from impacts such as generic drug development and new drug treatments. In addition, the trend estimates normalize for benefit leveraging, population aging, changes in fee schedules, and external trend drivers. The projection of claim costs into the rating period utilizes the same categories of adjustment factors, adjusts for seasonality, and uses a statistical regression of historical trend levels to project monthly claim levels. This normalized and adjusted claim progression is then used to provide the basis for the Company's trend regression model, which will be used to establish the Company's rating trend.

The regression trend model is used to smooth out noise in the historical claim levels and to provide an appropriate jumping off point for projected claim levels. Using the factors discussed above to adjust projected claim levels, an appropriate assumption for trend was established using the experience period claim levels as the starting point. Since historical experience would encompass the expected coverage and demographic makeup of the membership, historical claim levels, adjusted for these factors and projected forward, would represent the best estimates of trend for this block of business.

For the rate development, the Company uses the aggregate claim trend for all types of service, applied to the experience period. This is done so that the combined trend is reasonable in consideration of the

various pricing trend components and the overall anticipated trend level. Based on a review of the projected normalized annual trends for 2021 and 2022, an overall claim trend of 7.3% (2.7% cost; 4.5% utilization) was selected for the 2022 rate development. Please refer to the “Trend Support” exhibit in the “2022 Supplemental Exhibits – HCC_051821.xlsx” file showing the historical and projected normalized claim values for the Company’s trend determination, along with the Company’s proposed base medical and drug claim trends.

In addition to the base medical and drug claims trend discussed above, the trend illustrated in Table 3 reflects changes in anticipated costs for claims processed outside of the Company’s claims system, including Rx rebates and settlements. After the trends for the claims processed outside the Company’s claims system are weighted in with the base medical and drug claim trend, we arrive at a trend of 8.27% (3.1% cost; 5.0% utilization), as seen entered in for the Year 2 trend on URRT Worksheet 1. This trend, combined with the BEP adjustment for COVID claim suppression, is the trend entered into Table 3 for non-capitated services.

Capitation rates are provided by the Company’s vision provider, and as such, their trend is handled separately from the other benefits. The capitation trend rate is 7.77%. This trend is different than the capitation trend in the URRT because it includes the impact of induced utilization changes that get averaged across all service categories in the URRT. This allows for a consistent change in induced demand to be applied in Table 3 as gets applied on the URRT.

The Company performed a separate analysis to identify the impact of COVID on the base experience trend data and adjusted the historical claims data accordingly. See the Impact of COVID section below for the magnitude of this adjustment, along with additional detail. This COVID adjustment to the base period data impacts the Utilization section of the Trend Components to arrive at an appropriate Projected Allowed EHB Claims level in Table 5, but is removed from the Annual Trend used to develop the Small Group quarterly rates in Table 5A.

I. Historical Experience (Table 4)

Table 4 presents the most recent 48 months (4 calendar years) of Company data with run-out through February, 2021. Paid and allowed claims are sourced from detailed claim records. The data in table 4 excludes capitations, settlements, and other claims paid outside of the system since that data is not considered in developing trend assumptions. The claim add-ons excluded are projected independently. The Table 4 data matches the data in Table 2 if the claim add-ons are added in. This data, combined with the data from other companies within Highmark's corporate family, was used to develop the trend in Table 3. Please see Section 1.H above for further details.

2. Rate Development & Change

A. Projected Index Rate, Market-Adjusted Index Rate, & Total Allowed Claims (Table 5)

The development of the Projected Index Rate, Projected Market-Adjusted Index Rate, and Projected Total Allowed Claims, shown in Table 5, closely follows that utilized in the development presented in Worksheet 1 of the URRT, a discussion of which can be found in the Part III Actuarial Memorandum submitted in the Rate Filing Justification.

Since the Company's small group experience is not credible on its own, the rate development uses the combined company experience data discussed in Section 1.G above. Since the Company's Actual Experience Data is not used in the rate development, the discussion below on the Single Risk Pool Adjustment Factors refers to the Manual Data column (Column D) of Table 5. Some of the items separately identified in Table 5 include:

- The Change in Morbidity represents an adjustment from the experience period claims to the projection period. The Company has included a morbidity adjustment factor due to the impact of COVID on projected 2022 claim costs (see commentary below).
- The Change in Demographics adjustment factor of 1.005 reflects the change in age and geography factors the Company expects from the experience period to the projection period.
- The Change in Network adjustment reflects the change in the allowed claims the Company anticipates due to changes in in-network discount levels between the experience period and the projection period.
- The Change in Benefits adjustment reflects the change in the EHB benefits from the experience period and the projection period: None.

Please see the worksheet named "Table 5 Support" in the "2022 Supplemental Exhibits – HCC_051821.xlsx" file for the calculation of these factors from the Company's experience period data and projected rate results.

The Company's initial step in developing the index rates is to determine the expected covered membership for the rating period. The Company estimates the covered member base by adjusting for those groups known to have lapsed during the experience period, and those that are expected to lapse prior to the projection period. Then expected new business is added with current transitional coverage moving to ACA plans, and groups currently with another carrier.

As the Company has seen through the transitional coverage availability period, many of the Small Group market customers have retained their pre-ACA coverage, and have yet to join the ACA risk pool. With the transitional coverage provisions proposed extension through the end of 2022 for groups that renew on or prior to October 1, 2022, the Company continues to believe that many groups, especially lower-risk groups, will continue to retain their current transitional coverage until required to transfer coverage. The Company is expecting that enrollment drops slightly and that some of the better risk groups lapse. Also,

with the continued availability of transitional coverage, the Company expects any new groups moving into ACA products from transitional coverage will be of higher morbidity

The development of the Projected Paid to Allowed Ratio shown in Table 5 is presented in the “2022 Supplemental Exhibits - HCC.xlsx” file in the “Table 5 Paid-to-Allowed” worksheet. This value is consistent with the paid-to-allowed ratio in the URRT Worksheet 2, line 4.15 Incurred Claims, divided by line 4.11 Allowed Claims.

Table 5 reflects that the Company is assuming a Projected Risk Adjustment receivable in the projection period of \$6.40 PMPM. To arrive at the anticipated risk transfer for 2022, the Company determines the risk adjustment calculation components for the projected 2022 Company portfolio and uses its current knowledge of the Pennsylvania Small Group market profile to estimate the risk adjustment components for the entire state Market. This Market-wide profile is developed from available Market data, including the Interim Summary Report on Risk Adjustment for the 2020 Benefit Year published by CMS, the PA Insurance Department’s calculation of 2020 risk adjustment transfer amounts using the final RATEE files, prior years’ risk adjustment transfer results, publicly available data (such as MLR reports and rate filings), and outside expertise from actuarial consultants. For 2022, the Company is projecting a risk adjustment transfer amount of \$7.88 PMPM.

Given the limited ACA experience for this Company, the risk adjustment transfer assumptions are developed from a regional analysis of Highmark business. As several companies within the Pennsylvania Small Group market have stopped offering transitional relief, the Company has noticed that the risk profile based on the regional analysis of Highmark business has become higher than market averages. Thus the Company is anticipating that the Company will be in receipt of funds from the risk adjustment transfer program for 2022.

The \$6.40 PMPM value in cell C31 of Table 5 equals the \$7.88 PMPM risk adjustment transfer value discussed above, along with a charge of \$1.49 PMPM for the projected net impact of the High Cost Risk Pool program. Please note that the risk adjustment user fee is captured in the taxes and fees portion of administrative costs.

The Projected Paid Exchange User Fees are developed from the Exchange user fees to be charged by CMS in 2022, multiplied by the percentage of business the Company expects to purchase Market coverage through the Exchange for this Company. For this Company, all business will be offered Off Exchange in 2022, so there are no Exchange User Fees charged in the rate development.

Impact of COVID

To account for the impact of COVID, the Company made the following adjustments to its base experience period claims and its projected costs:

- a. The claims in the base experience period were adjusted to a non-COVID baseline environment (discussed in the Trend Identification section above). This was done to provide a more stable base from which to project future claims. Claims in the base experience period were adjusted upward

by 8.0%, representing the estimated degree of claims suppression in the experience period. This adjustment is applied to the underlying medical and drug claims incurred in the experience period, excluding prescription drug rebates and other claims paid outside the system. This adjustment is reflected in the Utilization Trend of Table 3.

To determine the appropriate adjustment factor for the base experience period, the Company analyzed historical normalized allowed medical claim trends combined at the state and market level. Then the Company selected an appropriate medical trend amount for 2020 within the range of historical trend results. This trend was applied to the 2019 normalized allowed medical claims to project the non-COVID baseline medical claims for 2020, which were then compared to the actual 2020 experience normalized allowed medical claims to determine the adjustment factor indicated above. The overall impact of the pandemic on drug claims in 2020 is assumed to be negligible, and so were not adjusted. The adjustment factors for medical and drug were then weighted together to develop an overall BEP allowed claim adjustment factor. Please see the exhibit titled "PA BEP COVID Adj Support" in the supplemental exhibits file "2022 Supplemental Exhibits – HCC_051821.xlsx" submitted with this filing for a demonstration of this adjustment factor development.

- b. The projection period claims were first established using trend projections under non-COVID baseline assumptions, effectively removing the noise introduced by COVID. Using a non-COVID baseline experience environment, claims were projected into the rating period using traditional methods of claim trend projections, as discussed in the Trend Identification section above.
- c. The projected non-COVID baseline claims were then further adjusted by applying the anticipated impacts of COVID costs expected in the projection period. There are four components of this adjustment determined by the Company:
 - 1) **COVID Treatment (\$0.07 PMPM)** – COVID treatment utilization in 2022 is expected to follow a similar utilization pattern as flu treatment from 2018 and 2019 (roughly 0.003 admits per 1000 members per month), with COVID-specific admission costs based on recent admission costs for COVID (roughly \$26,000 cost per admit).
 - 2) **COVID Testing (\$1.01 PMPM)** – COVID testing utilization in 2022 is expected to follow a similar utilization pattern as flu testing from 2018 and 2019 (roughly 9 tests per 1000 members per month), with COVID specific testing costs based on recent testing costs for COVID (roughly \$112.87 cost per test).
 - 3) **COVID Vaccine (\$2.05 PMPM)** – The Company is expecting that a total of 43% of members will receive a COVID vaccine. This assumes that 60% of members 18-64 utilize a vaccine and 40% of members under 18 utilize a vaccine. In addition to this, some vaccines are not reported in the billing system so expected utilization is further reduced by 25%.

The cost of the vaccine is assumed to be \$115 per dose. This is a combination of a \$40 cost for administering the vaccine and \$75 cost for the vaccine itself.

Finally, the average number of doses per member is assumed to be 0.5. This reflects the assumption that members will need a COVID vaccine every other year. This results in a cost of \$2.05 PMPM, which represents the expected cost that the Company will incur during the 2022-2023 coverage period stemming from 2022 policy year contracts.

- 4) ***Additional morbidity (0.50% claims impact)*** – Due to insureds missing preventative care (maintenance care and testing services) and quarantine rules leading to a more sedentary lifestyle, the Company expects a general trend towards worsening member morbidity. The following categories of care are expected to be impacted: Cardiology, Joint Degeneration, Diabetes, Mood Disorder & Depression, and Alcohol Treatment. The range of possible cost increases in these categories is assumed to be between 1% and 5%, which equates to 0.2% to 1.1% of total claims. Pricing assumes an overall claims impact of 0.5%, which is applied to the underlying medical and drug claims expected in the projection period.

The application of the above COVID claim adjustments to the rating period results in a COVID adjustment factor of 1.5%. Please see the exhibit titled “COVID Projection Support” in the supplemental exhibits file “2022 Supplemental Exhibits – HCC_051821.xlsx” submitted with this filing for a demonstration of the development of the adjustment factors referenced above. The combined impact of these adjustment factors is a component of the Change in Morbidity Factor in Table 5. Please refer to the exhibit titled “Table 5 Support” in the supplemental exhibits file “2022 Supplemental Exhibits – HCC_051821.xlsx” submitted with this filing for a demonstration of how these adjustment factors are combined and translated into the Change in Morbidity Factor.

Small Group Quarterly Rates

For this Small Group Market filing, Table 5A has been completed, showing the number of member months renewing by quarter, and the quarterly Single Risk Pool Projected Allowed Claims. For this filing, quarterly rates are proposed, with rates adjusted each quarter as shown in the quarterly Annual Trends presented in Table 5A. Note that several adjustments are made to the Total Annual Trend from Table 3 to arrive at the quarterly Annual Trends shown in Table 5A. These adjustments include:

- a. The COVID adjustment to the base experience data (discussed above) is removed, as that adjustment will not have an ongoing impact in the projection period;
- b. The Induced Utilization trend is excluded from the quarterly rate trends;
- c. The quarterly rate trends are further adjusted to remove the impact of the Company’s cost saving initiatives that produce one-time savings;
- d. The timing of the renewals within the quarter are more appropriately considered; and

- e. The quarterly rate trends more appropriately reflect that administrative costs do not increase at the same rate as claims.

b. Retention Items (Table 6)

Table 6 has been completed with the requested retention elements for the proposed rates for the rating period. The administrative expenses and taxes and fees presented in the rate development in Table 6 cell C53 equal the Taxes and Fees in Table 10.

Administrative costs reflect internal costs that the Company is projected to incur in the projected experience period, and are developed from standard expense allocation methods. Agent/broker fees and commissions reflect the Company's anticipated costs for these items in the experience period.

The development of internal administrative costs utilizes an allocation of Company costs back to lines of business. The allocation method uses measurable stats such as claims worked, inquiries worked, contracts, and members to allocate the majority of expenses. When possible, expenses are direct charged if they can be identified by product instead of going through an allocation method. For corporate allocations, a TCI (total costs incurred) methodology is generally used to allocate by product.

Administrative expense loads vary by plan in order to more appropriately capture the costs associated with plan administration. The total administrative costs anticipated by the Company have been split such that each plan receives a PMPM administrative load, along with a percent of premium administrative load. This methodology results in percent of premium expense loads that vary by plan.

The following Taxes and Fees were included in the rate development:

- \$0.24 PMPM for the PCORI Fee;
- \$0.25 PMPM for the Risk Adjustment User Fee

Note the following regarding plan level retention items:

- The rate development reflects a 0% profit and risk load for all products and plans. The Company has voluntarily refrained from including a profit and risk load in this filing. By this voluntary action, the Company is not waiving any right to include a profit and risk load which the Company believes is consistent with historical and legal interpretations of the Company and the Department.
- Expenses for Quality Improvement Initiatives are estimated to be 7% of internal Company expenses, based upon historical analysis of these costs.

c. Normalized Market-Adjusted Projected Allowed Total Claims (Table 7)

The normalization factors presented in Table 7 are each determined from the underlying membership demographics expected in the projected rating period. The 2021 values are pulled from the prior year's filing, while the 2022 values represent the Company's projection for 2022 assumed in the 2022 rate development.

The Age Factor is the weighted average of the Average Age Factors for the Current ACA Book of Business as of February 2021 and for the Membership Moving to the ACA Book (from transitional and new business)

The Geographic Calibration Factor is the weighted average of the Area Factors, weighted by the projected membership in each rating area.

The Tobacco Surcharge is not applicable since the Company does not use one.

d. Components of Rate Change (Tables 8 and 9)

Table 8 presents the components of change in the proposed 2022 Calibrated Plan Adjusted Index Rate (PMPM). The 2021 base period allowed claims is carried over from the 2021 rate filing. Row H of Table 8 may differ from Row A due to the detailed breakdown of all the components of the increases in rows B through G not calculating exactly to the change in the calibrated plan adjusted index rate in Row A, which is the more accurate percentage change based on the rate development.

Table 9 presents the data elements supporting the calculations in Table 8. The amounts shown in the 2021 Column match those entered in the 2021 Column in the plan year 2021 rate filing.

3. Plan Rate Development (Table 10)

Table 10 showing the plan rate development has been completed following the instructions in the 2022 ACA-Compliant Health Insurance Rate Filing Guidance. This table shows the single plan that the Company intends to offer in 2022, as well as plans discontinued from the 2021 portfolio for 2022. Since many Small Group market enrollees as of 2/1/2021 are still in plan year 2020 plans, the enrollees in plan year 2020 plans were mapped to the plan year 2021 plan that the Company anticipates they will renew into in 2021. The calibrated plan adjusted index rates for 2022 and 2021, and all of the supporting factors, are calculated according to the instructions.

Each plan takes the Market Adjusted Index Rate and multiplies by the Pricing AV, Benefit Richness Factor, Benefits in Addition to EHB Factor, Provider Network Factor, Catastrophic Eligibility Factor, and Non-Funding of CSR Adjustment Factor (not applicable to Small Group) in order to calculate the Pure Premium. The Pure Premium is then grossed up to account for expenses (Admin Costs, Taxes & Fees, and Profit or Contingency) in order to calculate the Calibrated Plan Adjusted Index Rate.

Note that the HHS Actuarial Value Calculator was unable to accommodate all of the Company's benefit designs. Plans needing certification are marked in column I of Table 10. Screen shots of all of the AV calculations and the appropriate certifications are included as a separate attachment within the *Supporting Documentation* section in SERFF.

The requested Induced Utilization Exhibit was completed and is presented within the "2022 Supplemental Exhibits - HCC.xlsx" file submitted with this filing (worksheet named "Induced Utilization"). Note that the calculated Induced Utilization factor in Column (8) is a component of the Actuarial Value Allowable Modifier. As such, it is adjusted by the Average Benefit Richness normalization factor of 1.025. In multiplying the Induced Utilization column (8) result by the Average Benefit Richness normalization factor, the result is the Induced Utilization factor appropriate for the plan's metal level (before normalization). These induced demand factors are consistent with the methodology described in the Department's rate

filing guidance, which utilizes each plan's actuarial value to establish the appropriate induced demand factor for the plan.

The member and network-weighted average of the pure plan-level Induced Utilization factors in the last column of the induced utilization exhibit against the projected membership does match the 1.000 expectation of the Department. This calculation can be seen at the bottom of the Induced Utilization Exhibit, where the formulas used in the calculation have been retained.

The Child Capping Adjustment is applied to the Age Calibration Factor in Table 10 to reflect the limitation on the number of children allowed in rating. This factor is determined by estimating the amount of lost revenue due to this restriction, and applying the resulting factor to the normalized age factor in the base rate development.

Support for the calibration factors is shown in the "2022 Supplemental Exhibits - HCC.xlsx" file on the worksheet named "Table 10 Calibration Factors".

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

Table 11 presents the Company's 21-year-old non-tobacco premium in the Market for each rating quarter in 2022. As mentioned in Section 1.C above, the change in 21-year-old non-tobacco premium PMPM calculated in this table is a 0.0% increase, while the "percent rate change requested" from the SERFF Rate Review Detail Screen (and Table 10) is 0.0%. There is no membership in the renewing plans.

5. Plan Factors

A. Age and Tobacco Factors (Table 12)

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

B. Geographic Factors (Table 13)

Please see Table 13 for the Company's geographic factors. The Company's geographic factors for the rating period were updated as a component of this rate filing submission. The proposed geographic factors were developed based on a review of the average facility costs for PPO products by region, using a market basket approach to procedures by facility. Similar levels of professional and pharmaceutical costs were added to each region to get an appropriate allowed claim basis for the geographic factors. Note that since this analysis is based only upon PPO costs and based only upon facility schedules, these factors do not reflect morbidity differences among regions, nor do they reflect differences based upon network discount levels. Please see the exhibit "Geo Factors" in the "2022 Supplemental Exhibits - HCC.xlsx" file for the development of these factors.

As mentioned in the Cover Letter, the Company is not changing its product offerings by Rating Area.

C. Network Factors (Table 14)

Please see Table 14 for the Company's network rating factors. The Company's network factors for the rating period were updated as a component of this rate filing submission. The proposed network factors were developed based on a review of the average facility costs by network, using a market basket approach to procedures by facility/network. Similar levels of professional and pharmaceutical costs were added to each network to get an appropriate allowed claim basis for the network factors. The network costs were combined across rating regions as appropriate to establish the average network cost for the Company. Using the PPO network as the benchmark, relativities for other networks were established. Note that since this analysis is based only upon network costs by facility, these factors do not reflect morbidity differences among networks, and these factors are independent of the geographic factors discussed above. Please see the exhibit "Network Factors" in the "2022 Supplemental Exhibits – HCC_051821.xlsx" file for the development of these factors.

D. Service Area Composition

The Company follows the Rating Area designations created by the state. All counties within a Rating Area are serviced by the Company, according to the Rating Areas specified in Table 14. The Company has submitted its current 2021 service area and its proposed 2022 service area in the file "Pennsylvania Counties Map - 2022 Filings – HCC.pdf" submitted with this filing. There are no proposed changes to the Company's service area from 2021 to 2022.

E. Composite Rating

The Company is currently not planning to use CMS's composite rating method for any of its off-SHOP plans offered during the rating period.

6. MLR Exhibit

The table below summarizes the requested three year MLR information:

Calendar Year	MLR		Member Months	
	Actual	Pricing	Actual	Pricing
2017	36.3%	92.4%	25	1812
2018	0.0%	92.0%	0	167
2019	52.5%	83.1%	482	12,001

Please note that the values in the Pricing columns above come from the Pennsylvania Actuarial Memorandum exhibits for the referenced pricing year (Tables 1, 5 and 6). The Actual results shown are from the URRT Worksheet 2 values for ACA plans from the pricing year in which the referenced calendar year is the base experience period. Since the URRT Worksheet 2 Actual values represent calendar year results, while the Pricing values represents policy year estimates, variations between these two amounts are expected.

7. Actuarial Certifications

I am a member of the American Academy of Actuaries and meet its qualification standards for actuaries issuing statements of actuarial opinions in the United States. This filing is prepared on behalf of the Company to accompany its rate filing (for calendar year 2022) for the Small Group Market off the Pennsylvania Exchange.

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

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

I certify that the Index Rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates.

I certify that all factor, benefit and other changes from the prior approved filing have been disclosed in the actuarial memorandum.

I certify that any new plan is not a modification of an existing plan (per the uniform modification standards in 45 CFR 147.106).

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

I certify that the AV Calculator was used to determine the AV Metal Values shown in Part I of Worksheet 2 in the URRT for all plans.

The Unified Rate Review Template does not demonstrate the process used by the Company to develop the rates. Rather, it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of Qualified Health Plans for Federally-facilitated Exchanges, and for certification that the Index Rate is developed in accordance with Federal regulation and used consistently and only adjusted by the allowable modifiers.

I certify that the information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2022 Rate Filing Justification.

[Signed: [Redacted]]

Date: 05/18/2021

Attachment I

Rate Change Summary

Highmark Choice Company – Small Group Plans

Rate request filing ID # HGHM-132831326 - This document is prepared by the insurance company submitting the rate filing as a consumer tool to help explain the rate filing. It is not intended to describe or include all factors or information considered in the review process. For more information, see the filing at <https://www.insurance.pa.gov/Consumers/Pages/ACA-Rate-Filings.aspx>

Overview

Initial requested average rate change:	5.34% ¹
Revised requested average rate change:	N/A ¹
Range of requested rate change:	5.34% - 5.34%
Effective date:	January 1, 2022
Mapped Members:	0
Available in:	Rating Areas 1,2,4,5, and 6

Key information

Jan. 2020-Dec. 2020 financial experience

Premiums	\$10,755
Claims	\$25,965
Administrative expenses	\$2,239
Taxes & fees	\$8
Company made (after taxes)	-\$17,457

How it plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2022:

Claims:	82.7%
Administrative:	17.1%
Taxes & fees:	0.2%
Profit:	0.0%

The company expects its annual medical costs to increase **8.27%**.

Explanation of requested rate change

The proposed increases are being driven by rising medical care costs, which are expected to continue through the remainder of 2021 and throughout 2022 as a result of both higher utilization and the increasing cost of healthcare services.

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

PA Rate Template Part I
Data Relevant to the Rate Filing

Table 0. Identifying Information

Carrier Name:	Highmark Choice Company (HCC)		
Product(s):	HMO		
Market Segment:	Small Group		
Rate Effective Date:	01/01/2022	to	12/31/2022
Base Period Start Date:	01/01/2020	to	12/31/2020
Date of Most Recent Membership:	02/01/2021		

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of 02-01-2021)	Projected Rating Period
Average Age	43.0		43.0
Total	91	0	120
<18	6	0	0
18-24	10	0	24
25-29	12	0	0
30-34	5	0	0
35-39	3	0	0
40-44	8	0	0
45-49	6	0	84
50-54	14	0	0
55-59	15	0	0
60-63	3	0	0
64+	9	0	12

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
\$26,155.26	\$26,101.19	\$26,155.26	91	\$6,927.70	\$33,082.97	\$0.00	(\$284.21)	\$43.74	\$0.00	(\$15,400.58)	
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$
Loss Ratio											360.91

*Express Prescription Drug Rebates as a negative number

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	3.08%	9.06%	-3.19%	8.83%	26.43%
Outpatient Hospital	3.08%	9.06%	-3.19%	8.83%	19.14%
Professional	3.08%	9.06%	-3.19%	8.83%	34.15%
Other Medical	3.08%	9.06%	-3.19%	8.83%	5.51%
Capitation				7.77%	0.13%
Prescription Drugs	3.08%	9.06%	-3.19%	8.83%	14.63%
Total Annual Trend				8.83%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.184	

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

** Should equal URRT Trend

Table 4. Historical Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-17		\$1,820.38	1.0000	\$ 1,820.38	9	\$ 364.08		(\$99.40)	\$2,418.96	\$ 483.79
Feb-17		\$612.14	1.0000	\$ 612.14	9	\$ 122.43		(\$99.40)	\$727.18	\$ 145.44
Mar-17		\$341.43	1.0000	\$ 341.43	9	\$ 68.29		(\$99.40)	\$287.26	\$ 57.45
Apr-17		\$2,087.32	1.0000	\$ 2,087.32	9	\$ 417.46		(\$99.40)	\$2,472.08	\$ 494.42
May-17		\$583.07	1.0000	\$ 583.07	9	\$ 116.61		(\$99.40)	\$654.96	\$ 130.99
Jun-17		\$0.00	1.0000	\$ -	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Jul-17		\$0.00	1.0000	\$ -	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Aug-17		\$0.00	1.0000	\$ -	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Sep-17		\$0.00	1.0000	\$ -	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Oct-17		\$0.00	1.0000	\$ -	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Nov-17		\$0.00	1.0000	\$ -	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Dec-17	\$21,003.02	\$0.00	1.0000	\$ -	-	#DIV/0!	\$1,613.10	\$0.00	\$0.00	#DIV/0!
Jan-18		\$4,404.13	1.0000	\$ 4,404.13	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Feb-18		\$2,046.52	1.0000	\$ 2,046.54	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Mar-18		\$3,189.54	1.0000	\$ 3,189.59	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Apr-18		\$11,424.74	1.0000	\$ 11,425.07	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
May-18		\$4,631.54	1.0000	\$ 4,631.54	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Jun-18		\$3,937.78	1.0000	\$ 3,937.87	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Jul-18		\$6,100.11	1.0000	\$ 6,100.25	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Aug-18		\$6,925.05	0.9999	\$ 6,925.43	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Sep-18		\$1,419.10	0.9999	\$ 1,419.22	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Oct-18		\$8,438.67	0.9999	\$ 8,439.23	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Nov-18		\$5,845.42	0.9999	\$ 5,846.01	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Dec-18	\$0.00	\$6,505.92	0.9999	\$ 6,506.37	-	#DIV/0!	(\$64,871.26)	\$0.00	\$0.00	#DIV/0!
Jan-19		\$6,915.62	0.9997	\$ 6,917.54	28	\$ 247.06		(\$137.32)	\$11,185.70	\$ 399.49
Feb-19		\$18,952.03	0.9999	\$ 18,953.56	27	\$ 701.98		(\$1,349.26)	\$21,083.76	\$ 780.88
Mar-19		\$6,107.17	0.9997	\$ 6,109.06	26	\$ 234.96		(\$705.37)	\$8,680.94	\$ 333.88
Apr-19		\$10,590.25	0.9996	\$ 10,594.10	45	\$ 235.42		(\$136.75)	\$13,196.87	\$ 293.26
May-19		\$11,806.35	0.9998	\$ 11,808.27	44	\$ 268.37		(\$1,104.41)	\$15,591.12	\$ 354.34
Jun-19		\$5,340.83	0.9999	\$ 5,341.46	42	\$ 127.18		(\$565.99)	\$6,487.72	\$ 154.47
Jul-19		\$23,771.33	0.9996	\$ 23,780.54	48	\$ 495.43		(\$519.81)	\$29,470.08	\$ 613.96
Aug-19		\$8,321.88	0.9997	\$ 8,324.21	46	\$ 180.96		(\$1,589.98)	\$10,511.45	\$ 228.51
Sep-19		\$7,246.51	0.9996	\$ 7,249.71	43	\$ 168.60		(\$470.99)	\$10,022.16	\$ 233.07
Oct-19		\$9,426.44	0.9996	\$ 9,430.35	43	\$ 219.31		(\$437.07)	\$11,943.02	\$ 277.74
Nov-19		\$15,332.62	0.9992	\$ 15,345.49	44	\$ 348.76		(\$1,740.50)	\$17,877.23	\$ 406.30
Dec-19	\$213,941.74	\$13,688.30	0.9986	\$ 13,707.38	46	\$ 297.99	\$52,707.19	(\$244.64)	\$25,216.75	\$ 548.19
Jan-20		\$5,528.28	0.9986	\$ 5,536.19	25	\$ 221.45		(\$21.20)	\$6,866.56	\$ 274.66
Feb-20		\$5,654.32	0.9991	\$ 5,659.59	25	\$ 226.38		(\$149.12)	\$7,943.02	\$ 317.72
Mar-20		\$13,229.15	0.9977	\$ 13,259.07	23	\$ 576.48		(\$44.58)	\$14,455.46	\$ 628.50
Apr-20		\$170.55	0.9950	\$ 171.41	9	\$ 34.28		(\$1.33)	\$432.07	\$ 86.41
May-20		\$0.00	1.0000	\$ -	5	\$ -		(\$1.88)	\$0.00	\$ -
Jun-20		\$1,194.54	0.9916	\$ 1,204.65	9	\$ 240.93		(\$5.09)	\$1,657.84	\$ 331.57
Jul-20		\$0.00	1.0000	\$ -	1	\$ -		(\$0.03)	\$0.00	\$ -
Aug-20		\$0.00	1.0000	\$ -	1	\$ -		(\$1.48)	\$0.00	\$ -
Sep-20		\$0.00	1.0000	\$ -	1	\$ -		\$0.00	\$0.00	\$ -
Oct-20		\$0.00	1.0000	\$ -	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Nov-20		\$0.00	1.0000	\$ -	-	#DIV/0!		\$0.00	\$0.00	#DIV/0!
Dec-20	\$36,421.79	\$0.00	1.0000	\$ -	-	#DIV/0!	\$5,748.72	\$0.00	\$0.00	#DIV/0!

* Express Completion Factor as a percentage

**Express Prescription Drug Rebates as a negative number

Carrier Name: Highmark Choice Company (HCC)
Product(s): HMO
Market Segment: Small Group
Rate Effective Date: 01/01/2022

Table 2b. Manual Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member & HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
\$63,116,341.53	\$51,382,717.81	\$52,215,173.88	107,914	\$6,540,668.26	\$58,755,842.14	\$0.00	(\$3,924,326.74)	\$56,677.04	\$0.00	\$15,400.58	
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$ 508.63
Loss Ratio											76.58%

*Express Prescription Drug Rebates as a negative number

Table 3b. Manual Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	1.83%	7.41%	-4.89%	4.03%	18.38%
Outpatient Hospital	1.83%	7.41%	-4.89%	4.03%	30.87%
Professional	1.83%	7.41%	-4.89%	4.03%	27.12%
Other Medical	1.83%	7.41%	-4.89%	4.03%	3.62%
Capitation				1.29%	0.10%
Prescription Drugs	1.83%	7.41%	-4.89%	4.03%	19.91%
Total Annual Trend				4.03%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.082	

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

Table 4b. Historical Manual Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-17		\$6,047,117.26	1.0000	\$ 6,047,117.26	14,078	\$ 429.54		(\$279,870.64)	\$6,673,694.76	\$ 474.05
Feb-17		\$5,684,712.57	1.0000	\$ 5,684,712.57	14,002	\$ 405.99		(\$278,359.76)	\$6,229,752.55	\$ 444.92
Mar-17		\$6,299,230.76	1.0000	\$ 6,299,230.76	13,884	\$ 453.70		(\$276,013.92)	\$6,904,253.68	\$ 497.28
Apr-17		\$5,676,262.38	1.0000	\$ 5,676,262.38	13,750	\$ 412.82		(\$273,350.00)	\$6,156,360.34	\$ 447.74
May-17		\$6,534,336.81	1.0000	\$ 6,534,336.81	13,537	\$ 482.70		(\$269,115.56)	\$7,068,226.16	\$ 522.14
Jun-17		\$7,084,510.03	1.0000	\$ 7,084,510.03	13,524	\$ 523.85		(\$268,857.12)	\$7,547,602.80	\$ 558.09
Jul-17		\$5,724,599.11	1.0000	\$ 5,724,599.11	13,355	\$ 428.65		(\$265,497.40)	\$6,218,785.63	\$ 465.65
Aug-17		\$5,758,980.41	1.0000	\$ 5,758,980.41	13,379	\$ 430.45		(\$265,974.52)	\$6,256,135.81	\$ 467.61
Sep-17		\$5,773,641.11	1.0000	\$ 5,773,641.11	13,235	\$ 436.24		(\$263,111.80)	\$6,230,022.31	\$ 470.72
Oct-17		\$6,685,945.94	1.0000	\$ 6,685,945.94	13,211	\$ 506.09		(\$262,634.68)	\$7,154,284.30	\$ 541.54
Nov-17		\$6,038,773.58	1.0000	\$ 6,038,773.58	13,196	\$ 457.62		(\$262,336.48)	\$6,480,015.63	\$ 491.06
Dec-17	\$76,608,329.91	\$5,685,309.85	1.0000	\$ 5,685,309.85	12,923	\$ 439.94	\$9,303,213.51	(\$256,909.24)	\$6,155,468.22	\$ 476.32
Jan-18		\$9,623,904.78	1.0000	\$ 9,623,904.78	13,246	\$ 726.55		(\$314,689.01)	\$10,309,838.09	\$ 778.34
Feb-18		\$5,248,884.53	1.0000	\$ 5,248,884.53	13,317	\$ 394.15		(\$316,375.77)	\$5,792,872.42	\$ 435.00
Mar-18		\$6,676,276.51	1.0000	\$ 6,676,276.51	13,304	\$ 498.07		(\$316,066.93)	\$7,229,868.92	\$ 543.44
Apr-18		\$6,158,486.70	1.0000	\$ 6,158,486.70	13,235	\$ 465.33		(\$314,427.68)	\$6,705,906.31	\$ 506.68
May-18		\$5,899,979.72	1.0000	\$ 5,900,096.87	13,562	\$ 435.05		(\$322,196.31)	\$6,451,727.89	\$ 475.72
Jun-18		\$6,512,505.69	1.0000	\$ 6,512,658.44	13,604	\$ 478.73		(\$323,194.12)	\$7,018,609.19	\$ 515.92
Jul-18		\$6,102,514.33	1.0000	\$ 6,102,649.95	13,599	\$ 448.76		(\$323,075.33)	\$6,658,642.91	\$ 489.64
Aug-18		\$6,740,874.83	0.9999	\$ 6,741,248.35	13,622	\$ 494.88		(\$323,621.75)	\$7,338,455.50	\$ 538.72
Sep-18		\$5,775,604.99	0.9999	\$ 5,776,078.24	13,541	\$ 426.56		(\$321,697.41)	\$6,216,136.44	\$ 459.06
Oct-18		\$6,503,617.73	0.9999	\$ 6,504,051.70	13,754	\$ 472.88		(\$326,757.71)	\$7,113,422.18	\$ 517.19
Nov-18		\$6,644,109.74	0.9999	\$ 6,644,823.51	13,712	\$ 484.60		(\$325,759.90)	\$7,183,348.12	\$ 523.87
Dec-18	\$79,203,441.57	\$5,939,673.10	0.9998	\$ 5,940,635.53	13,819	\$ 429.89	\$10,575,097.42	(\$328,301.93)	\$6,480,236.62	\$ 468.94
Jan-19		\$5,573,348.40	0.9998	\$ 5,574,733.36	12,487	\$ 446.44		(\$364,237.63)	\$6,176,105.21	\$ 494.60
Feb-19		\$5,740,394.56	0.9998	\$ 5,741,486.46	12,238	\$ 469.15		(\$382,019.10)	\$6,206,070.84	\$ 507.11
Mar-19		\$5,015,928.97	0.9998	\$ 5,016,745.43	12,081	\$ 415.26		(\$372,334.57)	\$5,452,201.63	\$ 451.30
Apr-19		\$5,643,676.90	0.9997	\$ 5,645,455.87	11,682	\$ 483.26		(\$370,549.12)	\$6,100,996.18	\$ 522.26
May-19		\$5,441,168.83	0.9997	\$ 5,442,544.54	11,425	\$ 476.37		(\$343,719.14)	\$5,882,900.98	\$ 514.91
Jun-19		\$5,217,367.16	0.9995	\$ 5,220,083.61	11,268	\$ 463.27		(\$336,714.37)	\$5,568,401.13	\$ 494.18
Jul-19		\$4,514,100.24	0.9996	\$ 4,515,761.59	10,942	\$ 412.70		(\$329,303.75)	\$4,934,912.42	\$ 451.01
Aug-19		\$4,722,015.48	0.9997	\$ 4,725,583.12	10,854	\$ 435.38		(\$334,064.23)	\$5,113,771.74	\$ 471.14
Sep-19		\$4,337,208.48	0.9993	\$ 4,340,090.64	10,653	\$ 407.41		(\$306,064.88)	\$4,671,334.62	\$ 438.50
Oct-19		\$4,783,282.61	0.9993	\$ 4,786,845.76	10,451	\$ 458.03		(\$301,657.11)	\$5,179,186.02	\$ 495.57
Nov-19		\$4,832,389.36	0.9990	\$ 4,837,351.60	10,402	\$ 465.04		(\$291,974.49)	\$5,200,211.92	\$ 499.92
Dec-19	\$70,070,660.16	\$4,604,965.02	0.9989	\$ 4,609,958.12	9,171	\$ 502.67	\$8,991,958.45	(\$266,333.32)	\$4,963,534.09	\$ 541.22
Jan-20		\$4,500,848.37	0.9988	\$ 4,506,434.68	9,161	\$ 491.92		(\$280,446.13)	\$4,945,503.76	\$ 539.84
Feb-20		\$3,860,606.98	0.9987	\$ 3,865,506.70	9,119	\$ 423.90		(\$271,202.83)	\$4,222,805.58	\$ 463.08
Mar-20		\$3,946,304.97	0.9978	\$ 3,954,896.27	9,274	\$ 426.45		(\$329,576.70)	\$4,201,607.48	\$ 453.05
Apr-20		\$2,941,019.66	0.9966	\$ 2,950,927.31	9,155	\$ 322.33		(\$294,562.25)	\$2,997,610.09	\$ 327.43
May-20		\$3,925,905.12	0.9960	\$ 3,941,509.40	9,081	\$ 434.04		(\$272,352.54)	\$4,110,678.36	\$ 452.67
Jun-20		\$3,892,157.11	0.9948	\$ 3,952,833.39	8,953	\$ 441.51		(\$280,935.22)	\$4,160,813.81	\$ 464.74
Jul-20		\$5,835,262.11	0.9912	\$ 5,887,133.67	8,883	\$ 662.74		(\$291,570.10)	\$6,158,305.11	\$ 693.27
Aug-20		\$3,869,991.96	0.9898	\$ 3,910,001.85	8,850	\$ 441.81		(\$278,868.84)	\$4,156,860.24	\$ 469.70
Sep-20		\$4,870,644.24	0.9818	\$ 4,961,032.66	8,917	\$ 556.36		(\$300,857.64)	\$5,204,428.89	\$ 583.65
Oct-20		\$4,255,973.74	0.9700	\$ 4,387,658.24	8,865	\$ 494.94		(\$307,208.63)	\$4,604,827.46	\$ 519.44
Nov-20		\$4,138,111.83	0.9599	\$ 4,311,052.13	8,871	\$ 485.97		(\$264,947.97)	\$4,529,327.01	\$ 510.58
Dec-20	\$63,116,341.53	\$4,104,689.31	0.9363	\$ 4,385,039.23	8,785	\$ 499.15	\$6,333,791.20	(\$283,229.17)	\$4,599,290.92	\$ 523.54

* Express Completion Factor as a percentage

**Express Prescription Drug Rebates as a negative number

Continuance Table for Calculating Reinsurance Impact - Individual Market Only, Experience Period Information

Carrier Name:	Highmark Choice Company (HCC)	Attachment Point:	\$60,000
Product(s):	HMO	Reinsurance Cap:	\$100,000
Market Segment:	Small Group	Coinsurance Rate:	60%
Rate Effective Date:	01/01/2022		
Incurred Dates:	1/1/2020 to 12/31/2020	Proj. Incurred Claim Impact:	0.0%

Individual ACA Compliant Policies Only: Incurred Dates 1/1/2020 to 12/31/2020					
Annual Incurred Claims Range		Unique Members	Member Months	Total Incurred Claims	Total Incurred Claims with Reinsurance
\$0	\$29,999				\$0
\$30,000	\$34,999				\$0
\$35,000	\$39,999				\$0
\$40,000	\$44,999				\$0
\$45,000	\$49,999				\$0
\$50,000	\$54,999				\$0
\$55,000	\$59,999				\$0
\$60,000	\$64,999				\$0
\$65,000	\$69,999				\$0
\$70,000	\$74,999				\$0
\$75,000	\$79,999				\$0
\$80,000	\$84,999				\$0
\$85,000	\$89,999				\$0
\$90,000	\$94,999				\$0
\$95,000	\$99,999				\$0
\$100,000	\$109,999				\$0
\$110,000	\$119,999				\$0
\$120,000	\$129,999				\$0
\$130,000	\$139,999				\$0
\$140,000	\$149,999				\$0
\$150,000	\$159,999				\$0
\$160,000	\$169,999				\$0
\$170,000	\$179,999				\$0
\$180,000	\$189,999				\$0
\$190,000	\$199,999				\$0
\$200,000	\$209,999				\$0
\$210,000	\$219,999				\$0
\$220,000	\$229,999				\$0
\$230,000	\$239,999				\$0
\$240,000	\$249,999				\$0
\$250,000	\$259,999				\$0
\$260,000	\$269,999				\$0
\$270,000	\$279,999				\$0
\$280,000	\$289,999				\$0
\$290,000	\$299,999				\$0
\$300,000	\$324,999				\$0
\$325,000	\$349,999				\$0
\$350,000	\$374,999				\$0
\$375,000	\$399,999				\$0
\$400,000	\$424,999				\$0
\$425,000	\$449,999				\$0
\$450,000	\$474,999				\$0
\$475,000	\$499,999				\$0
\$500,000	\$599,999				\$0
\$600,000	\$699,999				\$0
\$700,000	\$799,999				\$0
\$800,000	\$899,999				\$0
\$900,000	\$999,999				\$0
\$1,000,000+					\$0
Total		0	0	\$0	\$0

Continuance Table for Calculating Reinsurance Impact - Individual Market Only, Projection Period Information

Carrier Name:	Highmark Choice Company (HCC)	Attachment Point:	\$60,000
Product(s):	HMO	Reinsurance Cap:	\$100,000
Market Segment:	Small Group	Coinsurance Rate:	60%
Rate Effective Date:	01/01/2022		
		Proj. Incurred Claim Impact:	0.0%
		Proj. Morbidity Impact:	-0.1%

Reinsurance Program Impact Continuance Table Development - Plan Year 2022					
Annual Incurred Claims Range		Unique Members	Member Months	Total Incurred Claims	Total Incurred Claims with Reinsurance
\$0	\$29,999				\$0
\$30,000	\$34,999				\$0
\$35,000	\$39,999				\$0
\$40,000	\$44,999				\$0
\$45,000	\$49,999				\$0
\$50,000	\$54,999				\$0
\$55,000	\$59,999				\$0
\$60,000	\$64,999				\$0
\$65,000	\$69,999				\$0
\$70,000	\$74,999				\$0
\$75,000	\$79,999				\$0
\$80,000	\$84,999				\$0
\$85,000	\$89,999				\$0
\$90,000	\$94,999				\$0
\$95,000	\$99,999				\$0
\$100,000	\$109,999				\$0
\$110,000	\$119,999				\$0
\$120,000	\$129,999				\$0
\$130,000	\$139,999				\$0
\$140,000	\$149,999				\$0
\$150,000	\$159,999				\$0
\$160,000	\$169,999				\$0
\$170,000	\$179,999				\$0
\$180,000	\$189,999				\$0
\$190,000	\$199,999				\$0
\$200,000	\$209,999				\$0
\$210,000	\$219,999				\$0
\$220,000	\$229,999				\$0
\$230,000	\$239,999				\$0
\$240,000	\$249,999				\$0
\$250,000	\$259,999				\$0
\$260,000	\$269,999				\$0
\$270,000	\$279,999				\$0
\$280,000	\$289,999				\$0
\$290,000	\$299,999				\$0
\$300,000	\$324,999				\$0
\$325,000	\$349,999				\$0
\$350,000	\$374,999				\$0
\$375,000	\$399,999				\$0
\$400,000	\$424,999				\$0
\$425,000	\$449,999				\$0
\$450,000	\$474,999				\$0
\$475,000	\$499,999				\$0
\$500,000	\$599,999				\$0
\$600,000	\$699,999				\$0
\$700,000	\$799,999				\$0
\$800,000	\$899,999				\$0
\$900,000	\$999,999				\$0
\$1,000,000+					\$0
Total		0	0	\$0	\$0

PA Rate Template Part II

Rate Development and Change

Carrier Name:	Highmark Choice Company (HCC)
Product(s):	HMO
Market Segment:	Small Group
Rate Effective Date:	01/01/2022

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

Development of the Projected Index Rate		Actual Experience Data	Manual Data	
Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates) PMPM		\$ 360.91	\$ 508.63	< Actual Experience PMPM should be consistent with the Index Rate for Experience Period on URRT
Two year trend projection factor		1.184	1.082	
Unadjusted Projected Allowed EHB Claims PMPM		\$ 427.44	\$ 550.41	
<u>Single Risk Pool Adjustment Factors</u>				
Change in Morbidity - Impact of Reinsurance Program		1.000	1.000	
Change in Morbidity - All Other		0.934	1.032	< See URRT Instructions
Total Non-Morbidity Changes		0.945	0.712	
Change in Demographics		0.945	1.005	< See URRT Instructions
Change in Network		1.000	0.709	
Change in Benefits		1.000	1.000	< See URRT Instructions
Change in Other		1.000	1.000	
Total Adjusted Projected Allowed EHB Claims PMPM		\$ 337.10	\$ 404.32	
Credibility factors		0%	100%	< See Instructions
Blended Projected EHB Claims PMPM			\$ 404.32	
<u>Development of the Market-Adjusted Index Rate and Total Allowed Claims</u>				
Adjusted Projected Allowed EHB Claims PMPM		\$ 404.32		< Index Rate for Projection Period on URRT
Projected Paid to Allowed Ratio		0.688		
Projected Incurred EHB Claims PMPM		\$ 278.31		
<u>Market-wide Adjustments</u>				
Projected Incurred Risk Adjustment PMPM		\$ 56.40		
Projected Incurred Exchange User Fees PMPM		\$ 50.00		
Market-Adjusted Projected Incurred EHB Claims PMPM		\$ 271.91		
Market-Adjusted Projected Allowed EHB Claims PMPM		\$ 395.03		< Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM		\$ 50.00		
Market-Adjusted Projected Incurred Total Claims PMPM		\$ 271.91		
Market-Adjusted Projected Allowed Total Claims PMPM		\$ 395.03		

Table 6. Retention

Retention Items - Express in percentages	Percentages	PMPM Amounts
Administrative Expenses	17.14%	\$56.38
General and Claims	12.50%	\$37.50
Agent/Broker Fees and Commissions	4.77%	\$15.68
Quality Improvement Initiatives	0.87%	\$2.85
Taxes and Fees	0.15%	\$0.49
Risk Adjustment User Fee	0.08%	\$0.25
PCORI Fee	0.07%	\$0.24
RA Premium & Other Taxes (if applicable)	0.00%	\$0.00
Federal Income Tax		\$0.00
Health Insurance Providers Fee (Prorated for Small Groups only)		\$0.00
Profit/Contingency (after tax)	0.00%	\$0.00
Total Retention	17.28%	\$56.82
Projected Required Revenue PMPM		\$ 328.73

Table 8. Components of Rate Change

Rate Components	2021	2022	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
B. Base period allowed claims before normalization	\$452.13	\$508.63	\$ 56.50	#DIV/0!
C. Normalization factor component of change	\$ (152.48)	\$ (63.02)	\$ 189.46	#DIV/0!
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 299.65	\$ 465.61	\$ 165.95	#DIV/0!
D2. URRT Trend	\$ 23.47	\$ 38.25	\$ 14.78	#DIV/0!
D3. URRT Morbidity	\$ (61.63)	\$ 26.14	\$ 77.75	#DIV/0!
D4. URRT Other	\$ (8.60)	\$ (149.88)	\$ (141.28)	#DIV/0!
D5. Normalized URRT Risk Adjustment on an allowed basis	\$ (12.88)	\$ (8.51)	\$ 4.37	#DIV/0!
D6. Normalized Exchange User Fee on an allowed basis	\$ -	\$ -	\$ -	#DIV/0!
D7. Normalized Reinsurance Recoveries on an allowed basis	\$ -	\$ -	\$ -	#DIV/0!
D8. Subtotal - Sum(D1-E4)	\$ 240.04	\$ 361.62	\$ 121.58	#DIV/0!
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ 5.23	\$ (108.49)	\$ (113.72)	#DIV/0!
E2. Pricing AV	\$ (78.90)	\$ (78.89)	\$ 0.00	#DIV/0!
E3. Benefit Richness	\$ -	\$ 4.44	\$ 4.44	#DIV/0!
E4. Catastrophic Eligibility	\$ -	\$ -	\$ -	#DIV/0!
E5. Subtotal - Sum(E1-E4)	\$ (73.66)	\$ (182.94)	\$ (109.28)	#DIV/0!
F. Change in Retention Components				
F1. Administrative Expenses	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
F2. Taxes and Fees	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
F3. Profit and/or Contingency	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
F4. Subtotal - Sum(F1-F3)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
G. Change in Miscellaneous Items			\$ -	#DIV/0!
H. Sum of Components of Rate Change (should approximate the change shown in line A)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 508.63	< Index Rate of Experience Period on URRT
Blended Earned Premium	\$ 63,116,341.53	
Blended Loss Ratio	76.58%	

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

Effective Date	01/01/2022	04/01/2022	07/01/2022	10/01/2022	Total Single Risk Pool
# of Member Months Renewing in Quarter	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Adjusted Projected Allowed EHB Claims PMPM	\$ 404.32	\$ 404.32	\$ 404.32	\$ 404.32	\$ 404.32
Months of Trend	3	6	9	12	
Annual Trend	7.33%	0.12%	0.12%	0.12%	
Single Risk Pool Projected Allowed Claims	\$ 404.32	\$ 404.44	\$ 404.55	\$ 404.69	#DIV/0!
Quarterly Trend Factor	1.000	1.000	1.001	1.001	#DIV/0!

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2021	2022
Average Age Factor	1.521	1.520
Average Geographic Factor	0.971	1.001
Average Tobacco Factor	1.000	1.000
Average Benefit Richness (induced demand)	1.022	1.025
Average Network Factor	1.000	0.706
Market-Adjusted Projected Allowed Total Claims PMPM	\$362.18	\$ 395.03
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 240.04	\$ 361.62

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

	2021	2022	
Paid-to-Allowed	0.678	0.688	
URRT Trend (Total Applied Trend Factor)	1.078	1.082	< URRT W1, S2
URRT Morbidity	0.808	1.032	< URRT W1, S2
URRT "Other"	0.967	0.712	< URRT W1, S2
Risk Adjustment	\$ (13.18)	\$ (6.40)	< URRT W1, S3
Exchange User Fee	\$ -	\$ -	< URRT W1, S3
Reinsurance Recoveries	\$ -	\$ -	< URRT W1, S3
Capitation	\$ 0.66	\$ 50.60	< URRT W1, S2
Network	1.022	0.706	
Pricing AV	0.678	0.688	< For 2021 in cell J81, please include a factor equal to the product of the average Pricing AV and the Non-Funding of CSR Adjustment
Benefit Richness	1.000	1.025	
Catastrophic Eligibility	1.000	1.000	
Administrative Expenses	18.61%	17.14%	
Taxes and Fees	0.16%	0.15%	
Profit and/or Contingency	0.00%	0.00%	

PA Rate Template Part III
Table 10. Plan Rates

Carrier Name: Highmark Choice Company (HCC)
Product(s): HMO
Market Segment: Small Group
Rate Effective Date: 01/01/2022
Base Period Start Date: 01/01/2020
Date of Most Recent Membership: 02/01/2021
Market Adjusted Index Rate: \$ 395.03

Calibration	
Age Calibration Factor	1.515
Geographic Calibration Factor	1.001
Tobacco Calibration Factor	1.000
Aggregate Calibration Factor	1.516

45 CFR Part 156.8 (d) (2) Allowable Factors																			
Plan Number	HIOS Plan ID (Standard Component)	Product Type (HMO, POS, PPO, EPO, Indemnity, Other)	1/1/2021 Plan Marketing Name	Existing, Modified, New, Discontinued & Mapped, Discontinued & Not Mapped (E,M,N,DM, DNM) for 2022	1/1/2022 HIOS Plan ID (If 1/1/2021 Plan Discontinued & Mapped)	Metallic Tier	Metallic Tier Actuarial Value	Standard AV, Approach (1), Approach (2)	Exchange On/Off or Off	Pricing AV (company-determined AV)	Benefit Richness (induced demand)	Benefits in addition to EHB	Provider Network	Catastrophic Eligibility	Non-Funding of CSR Adjustment	Pure Premium	Admin Costs	Taxes & Fees (not including Exchange fees)	Profit or Contingency
Totals - Current Membership							0.649			0.688	1.000	1.000	1.000	1.000	1.000	\$ 0.91	17.1%	0.1%	0.0%
Total - Projected Membership							0.649			0.688	1.000	1.000	1.000	1.000	1.000	\$ 271.91	17.1%	0.1%	0.0%
Transitional Plans	TRANSITIONAL	N/A	TRANSITIONAL	DNM	TRANSITIONAL	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Plan 1	38949PA0050003	HMO	Keystone HMO \$7000	M	38949PA0050003	Bronze	0.64887912	Approach 1	Off	0.688	1.000	1.000	1.000	1.000	1.000	\$271.91	17.1%	0.1%	0.0%
Plan 2	38949PA0120002	HMO	Keystone HMO Embedded Q\$6000	DNM												\$0.00			
Plan 3	38949PA0130002	HMO	Keystone HMO \$500	DNM												\$0.00			
Plan 4	38949PA0130004	HMO	Keystone HMO \$1500	DNM												\$0.00			
Plan 5	38949PA0130005	HMO	Keystone HMO \$2500	DNM												\$0.00			
Plan 6	38949PA0130006	HMO	Keystone HMO \$5000 1x	DNM												\$0.00			
Plan 7																\$0.00			
Plan 8																\$0.00			
Plan 9																\$0.00			
Plan 10																\$0.00			
Plan 11																\$0.00			

Table 10. Plan Rates

Carrier Name:	Highmark Choice Company (HCC)
Product(s):	HMO
Market Segment:	Small Group
Rate Effective Date:	01/01/2022
Base Period Start Date	01/01/2020
Date of Most Recent Membership:	02/01/2021
Market Adjusted Index Rate:	\$ 395.03

2021 Calibrated Plan Adjusted Index Rate PMPM	2022 Calibrated Plan Adjusted Index Rate PMPM	Proposed Rate Change Compared to Prior 12 months	% of Total Covered Lives
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Table 10. Plan Rates

Carrier Name:	Highmark Choice Company (HCC)
Product(s):	HMO
Market Segment:	Small Group
Rate Effective Date:	01/01/2022
Base Period Start Date	01/01/2020
Date of Most Recent Membership:	02/01/2021
Market Adjusted Index Rate:	\$ 395.03

[illegible]

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

Carrier Name:	Highmark Choice Company (HCC)
Product(s):	HMO
Market Segment:	Small Group
Rate Effective Date:	01/01/2022

Plan Number	HDS Plan ID (Standard Component)	1/1/2021 Plan Marketing Name	Discontinuing, New, Modified, Existing (D.N.A.s for 2022)		1/1/2021 HDS Plan ID (Discontinuing & Mapped)	Exchange On/Off or Off
			Discontinuing, New, Modified, Existing (D.N.A.s for 2022)	1/1/2021 HDS Plan ID (Discontinuing & Mapped)		
Totals						
These calls auto-fill using the data entered in Table 10.						
Plan 1	38949PA0105003	Keystone HMO \$7000	M	38949PA005003	Bronze	Off
Plan 2	38949PA0120002	Keystone HMO Embedded Q6600	DNM	0	0	Off
Plan 3	38949PA0130002	Keystone HMO \$1500	DNM	0	0	Off
Plan 4	38949PA0130004	Keystone HMO \$1500	DNM	0	0	Off
Plan 5	38949PA0130005	Keystone HMO \$2000	DNM	0	0	Off
Plan 6	38949PA0130006	Keystone HMO \$5000 1x	DNM	0	0	Off
Plan 7	0	0	0	0	0	Off
Plan 8	0	0	0	0	0	Off
Plan 9	0	0	0	0	0	Off
Plan 10	0	0	0	0	0	Off
Plan 11	0	0	0	0	0	Off
Plan 12	0	0	0	0	0	Off

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

Carrier Name:	Highmark Choice Company (HCC)
Product(s):	HMO
Market Segment:	Small Group
Rate Effective Date:	01/01/2022

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PA Rate Template Part IV B - Small Group Annual
Table 11. Plan Premium Development for 21-Year-Old Non-Tobacco User

Carrier Name:	Highmark Choice Company (HCC)
Product(s):	HMO
Market Segment:	Small Group
Rate Effective Date:	01/01/2022

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PA Rate Quarterly Template Part V Consumer Factors

Carrier Name:	Highmark Choice Company (HCC)
Product(s):	HMO
Market Segment:	Small Group
Rate Effective Date:	01/01/2022

Table 12. Age and Tobacco Factors

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

*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, Forest, McKean, Venango, Warren	0.970	0.955
Rating Area 2	Cameron, Elk, Potter	0.970	1.006
Rating Area 3			
Rating Area 4	Armstrong	0.970	1.006
Rating Area 5	Clearfield, Huntingdon, Jefferson, Somerset	0.970	1.020
Rating Area 6	Centre	1.040	1.080
Rating Area 7			
Rating Area 8			
Rating Area 9			

Table 14. Network Factors

[illegible]

Company Name: **Highmark Choice Company (HCC)**
 Market: **Small Group**
 Product: **HMO**
 Effective Date of Rates: **January 1, 2022**

Ending date of Rates: **March 31, 2022**

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	38949PA0050003		38949PA0050003		38949PA0050003		38949PA0050003	
Plan Marketing Name =>	Keystone HMO \$7000		Keystone HMO \$7000		Keystone HMO \$7000		Keystone HMO \$7000	
Form # =>	HMO-SM/WG-9		HMO-SM/WG-9		HMO-SM/WG-9		HMO-SM/WG-9	
Rating Area =>	Area 1		Area 2,4		Area 5		Area 6	
Network =>	AB		AB		AB		AB	
Metal =>	Bronze		Bronze		Bronze		Bronze	
Deductible =>	7000		7000		7000		7000	
Coinurance =>	0.5		0.5		0.5		0.5	
Copays =>	115		115		115		115	
OOP Maximum =>	8550		8550		8550		8550	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$158.37	\$158.37	\$166.88	\$166.88	\$169.22	\$169.22	\$179.10	\$179.10
15	\$172.45	\$172.45	\$181.72	\$181.72	\$184.26	\$184.26	\$195.02	\$195.02
16	\$177.83	\$177.83	\$187.39	\$187.39	\$190.01	\$190.01	\$201.11	\$201.11
17	\$183.21	\$183.21	\$193.06	\$193.06	\$195.76	\$195.76	\$207.20	\$207.20
18	\$189.01	\$189.01	\$199.17	\$199.17	\$201.96	\$201.96	\$213.75	\$213.75
19	\$194.81	\$194.81	\$205.28	\$205.28	\$208.15	\$208.15	\$220.31	\$220.31
20	\$200.81	\$200.81	\$211.61	\$211.61	\$214.56	\$214.56	\$227.10	\$227.10
21	\$207.02	\$207.02	\$218.15	\$218.15	\$221.20	\$221.20	\$234.12	\$234.12
22	\$207.02	\$207.02	\$218.15	\$218.15	\$221.20	\$221.20	\$234.12	\$234.12
23	\$207.02	\$207.02	\$218.15	\$218.15	\$221.20	\$221.20	\$234.12	\$234.12
24	\$207.02	\$207.02	\$218.15	\$218.15	\$221.20	\$221.20	\$234.12	\$234.12
25	\$207.85	\$207.85	\$219.02	\$219.02	\$222.08	\$222.08	\$235.06	\$235.06
26	\$211.99	\$211.99	\$223.39	\$223.39	\$226.51	\$226.51	\$239.74	\$239.74
27	\$216.96	\$216.96	\$228.62	\$228.62	\$231.82	\$231.82	\$245.36	\$245.36
28	\$225.03	\$225.03	\$237.13	\$237.13	\$240.44	\$240.44	\$254.49	\$254.49
29	\$231.66	\$231.66	\$244.11	\$244.11	\$247.52	\$247.52	\$261.98	\$261.98
30	\$234.97	\$234.97	\$247.60	\$247.60	\$251.06	\$251.06	\$265.73	\$265.73
31	\$239.94	\$239.94	\$252.84	\$252.84	\$256.37	\$256.37	\$271.35	\$271.35
32	\$244.90	\$244.90	\$258.07	\$258.07	\$261.68	\$261.68	\$276.96	\$276.96
33	\$248.01	\$248.01	\$261.34	\$261.34	\$265.00	\$265.00	\$280.48	\$280.48
34	\$251.32	\$251.32	\$264.83	\$264.83	\$268.54	\$268.54	\$284.22	\$284.22
35	\$252.98	\$252.98	\$266.58	\$266.58	\$270.31	\$270.31	\$286.09	\$286.09
36	\$254.63	\$254.63	\$268.32	\$268.32	\$272.08	\$272.08	\$287.97	\$287.97
37	\$256.29	\$256.29	\$270.07	\$270.07	\$273.85	\$273.85	\$289.84	\$289.84
38	\$257.95	\$257.95	\$271.81	\$271.81	\$275.62	\$275.62	\$291.71	\$291.71
39	\$261.26	\$261.26	\$275.31	\$275.31	\$279.15	\$279.15	\$295.46	\$295.46
40	\$264.57	\$264.57	\$278.80	\$278.80	\$282.69	\$282.69	\$299.21	\$299.21
41	\$269.54	\$269.54	\$284.03	\$284.03	\$288.00	\$288.00	\$304.82	\$304.82
42	\$274.30	\$274.30	\$289.05	\$289.05	\$293.09	\$293.09	\$310.21	\$310.21
43	\$280.93	\$280.93	\$296.03	\$296.03	\$300.17	\$300.17	\$317.70	\$317.70
44	\$289.21	\$289.21	\$304.76	\$304.76	\$309.02	\$309.02	\$327.07	\$327.07
45	\$298.94	\$298.94	\$315.01	\$315.01	\$319.41	\$319.41	\$338.07	\$338.07
46	\$310.53	\$310.53	\$327.23	\$327.23	\$331.80	\$331.80	\$351.18	\$351.18
47	\$323.57	\$323.57	\$340.97	\$340.97	\$345.74	\$345.74	\$365.93	\$365.93
48	\$338.48	\$338.48	\$356.68	\$356.68	\$361.66	\$361.66	\$382.79	\$382.79
49	\$353.18	\$353.18	\$372.16	\$372.16	\$377.37	\$377.37	\$399.41	\$399.41
50	\$369.74	\$369.74	\$389.62	\$389.62	\$395.06	\$395.06	\$418.14	\$418.14
51	\$386.09	\$386.09	\$406.85	\$406.85	\$412.54	\$412.54	\$436.63	\$436.63
52	\$404.10	\$404.10	\$425.83	\$425.83	\$431.78	\$431.78	\$457.00	\$457.00
53	\$422.32	\$422.32	\$445.03	\$445.03	\$451.25	\$451.25	\$477.60	\$477.60
54	\$441.99	\$441.99	\$465.75	\$465.75	\$472.26	\$472.26	\$499.85	\$499.85
55	\$461.65	\$461.65	\$486.47	\$486.47	\$493.28	\$493.28	\$522.09	\$522.09
56	\$482.98	\$482.98	\$508.94	\$508.94	\$516.06	\$516.06	\$546.20	\$546.20
57	\$504.51	\$504.51	\$531.63	\$531.63	\$539.06	\$539.06	\$570.55	\$570.55
58	\$527.49	\$527.49	\$555.85	\$555.85	\$563.62	\$563.62	\$596.54	\$596.54
59	\$538.87	\$538.87	\$567.84	\$567.84	\$575.78	\$575.78	\$609.41	\$609.41
60	\$561.85	\$561.85	\$592.06	\$592.06	\$600.34	\$600.34	\$635.40	\$635.40
61	\$581.73	\$581.73	\$613.00	\$613.00	\$621.57	\$621.57	\$657.88	\$657.88
62	\$594.77	\$594.77	\$626.74	\$626.74	\$635.51	\$635.51	\$672.63	\$672.63
63	\$611.12	\$611.12	\$643.98	\$643.98	\$652.98	\$652.98	\$691.12	\$691.12
64+	\$621.06	\$621.06	\$654.45	\$654.45	\$663.60	\$663.60	\$702.36	\$702.36

Company Name: **Highmark Choice Company (HCC)**
 Market: **Small Group**
 Product: **HMO**
 Effective Date of Rates: **April 1, 2022**

Ending date of Rates: **June 30, 2022**

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	38949PA0050003		38949PA0050003		38949PA0050003		38949PA0050003	
Plan Marketing Name =>	Keystone HMO \$7000		Keystone HMO \$7000		Keystone HMO \$7000		Keystone HMO \$7000	
Form # =>	HMO-SM/WG-9		HMO-SM/WG-9		HMO-SM/WG-9		HMO-SM/WG-9	
Rating Area =>	Area 1		Area 2,4		Area 5		Area 6	
Network =>	AB		AB		AB		AB	
Metal =>	Bronze		Bronze		Bronze		Bronze	
Deductible =>	7000		7000		7000		7000	
Coinurance =>	0.5		0.5		0.5		0.5	
Copays =>	115		115		115		115	
OOP Maximum =>	8550		8550		8550		8550	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$158.42	\$158.42	\$166.93	\$166.93	\$169.27	\$169.27	\$179.16	\$179.16
15	\$172.50	\$172.50	\$181.77	\$181.77	\$184.32	\$184.32	\$195.08	\$195.08
16	\$177.88	\$177.88	\$187.44	\$187.44	\$190.07	\$190.07	\$201.17	\$201.17
17	\$183.27	\$183.27	\$193.12	\$193.12	\$195.82	\$195.82	\$207.26	\$207.26
18	\$189.06	\$189.06	\$199.23	\$199.23	\$202.02	\$202.02	\$213.82	\$213.82
19	\$194.86	\$194.86	\$205.34	\$205.34	\$208.22	\$208.22	\$220.37	\$220.37
20	\$200.87	\$200.87	\$211.66	\$211.66	\$214.63	\$214.63	\$227.16	\$227.16
21	\$207.08	\$207.08	\$218.21	\$218.21	\$221.27	\$221.27	\$234.19	\$234.19
22	\$207.08	\$207.08	\$218.21	\$218.21	\$221.27	\$221.27	\$234.19	\$234.19
23	\$207.08	\$207.08	\$218.21	\$218.21	\$221.27	\$221.27	\$234.19	\$234.19
24	\$207.08	\$207.08	\$218.21	\$218.21	\$221.27	\$221.27	\$234.19	\$234.19
25	\$207.91	\$207.91	\$219.08	\$219.08	\$222.16	\$222.16	\$235.13	\$235.13
26	\$212.05	\$212.05	\$223.45	\$223.45	\$226.58	\$226.58	\$239.81	\$239.81
27	\$217.02	\$217.02	\$228.68	\$228.68	\$231.89	\$231.89	\$245.43	\$245.43
28	\$225.10	\$225.10	\$237.19	\$237.19	\$240.52	\$240.52	\$254.56	\$254.56
29	\$231.72	\$231.72	\$244.18	\$244.18	\$247.60	\$247.60	\$262.06	\$262.06
30	\$235.04	\$235.04	\$247.67	\$247.67	\$251.14	\$251.14	\$265.81	\$265.81
31	\$240.01	\$240.01	\$252.91	\$252.91	\$256.45	\$256.45	\$271.43	\$271.43
32	\$244.98	\$244.98	\$258.14	\$258.14	\$261.76	\$261.76	\$277.05	\$277.05
33	\$248.08	\$248.08	\$261.42	\$261.42	\$265.08	\$265.08	\$280.56	\$280.56
34	\$251.40	\$251.40	\$264.91	\$264.91	\$268.62	\$268.62	\$284.31	\$284.31
35	\$253.05	\$253.05	\$266.65	\$266.65	\$270.39	\$270.39	\$286.18	\$286.18
36	\$254.71	\$254.71	\$268.40	\$268.40	\$272.16	\$272.16	\$288.05	\$288.05
37	\$256.37	\$256.37	\$270.14	\$270.14	\$273.93	\$273.93	\$289.93	\$289.93
38	\$258.02	\$258.02	\$271.89	\$271.89	\$275.70	\$275.70	\$291.80	\$291.80
39	\$261.33	\$261.33	\$275.38	\$275.38	\$279.24	\$279.24	\$295.55	\$295.55
40	\$264.65	\$264.65	\$278.87	\$278.87	\$282.78	\$282.78	\$299.29	\$299.29
41	\$269.62	\$269.62	\$284.11	\$284.11	\$288.09	\$288.09	\$304.92	\$304.92
42	\$274.38	\$274.38	\$289.13	\$289.13	\$293.18	\$293.18	\$310.30	\$310.30
43	\$281.01	\$281.01	\$296.11	\$296.11	\$300.26	\$300.26	\$317.80	\$317.80
44	\$289.29	\$289.29	\$304.84	\$304.84	\$309.11	\$309.11	\$327.16	\$327.16
45	\$299.02	\$299.02	\$315.10	\$315.10	\$319.51	\$319.51	\$338.17	\$338.17
46	\$310.62	\$310.62	\$327.32	\$327.32	\$331.91	\$331.91	\$351.29	\$351.29
47	\$323.67	\$323.67	\$341.06	\$341.06	\$345.85	\$345.85	\$366.04	\$366.04
48	\$338.58	\$338.58	\$356.77	\$356.77	\$361.78	\$361.78	\$382.90	\$382.90
49	\$353.28	\$353.28	\$372.27	\$372.27	\$377.49	\$377.49	\$399.53	\$399.53
50	\$369.84	\$369.84	\$389.72	\$389.72	\$395.19	\$395.19	\$418.26	\$418.26
51	\$386.20	\$386.20	\$406.96	\$406.96	\$412.67	\$412.67	\$436.76	\$436.76
52	\$404.22	\$404.22	\$425.95	\$425.95	\$431.92	\$431.92	\$457.14	\$457.14
53	\$422.44	\$422.44	\$445.15	\$445.15	\$451.39	\$451.39	\$477.75	\$477.75
54	\$442.12	\$442.12	\$465.88	\$465.88	\$472.41	\$472.41	\$500.00	\$500.00
55	\$461.79	\$461.79	\$486.61	\$486.61	\$493.43	\$493.43	\$522.24	\$522.24
56	\$483.12	\$483.12	\$509.08	\$509.08	\$516.22	\$516.22	\$546.37	\$546.37
57	\$504.65	\$504.65	\$531.78	\$531.78	\$539.23	\$539.23	\$570.72	\$570.72
58	\$527.64	\$527.64	\$556.00	\$556.00	\$563.80	\$563.80	\$596.72	\$596.72
59	\$539.03	\$539.03	\$568.00	\$568.00	\$575.97	\$575.97	\$609.60	\$609.60
60	\$562.02	\$562.02	\$592.22	\$592.22	\$600.53	\$600.53	\$635.59	\$635.59
61	\$581.89	\$581.89	\$613.17	\$613.17	\$621.77	\$621.77	\$658.07	\$658.07
62	\$594.94	\$594.94	\$626.92	\$626.92	\$635.71	\$635.71	\$672.83	\$672.83
63	\$611.30	\$611.30	\$644.16	\$644.16	\$653.19	\$653.19	\$691.33	\$691.33
64+	\$621.24	\$621.24	\$654.63	\$654.63	\$663.81	\$663.81	\$702.57	\$702.57

Company Name: **Highmark Choice Company (HCC)**
 Market: **Small Group**
 Product: **HMO**
 Effective Date of Rates: **July 1, 2022**

Ending date of Rates: **September 30, 2022**

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	38949PA0050003		38949PA0050003		38949PA0050003		38949PA0050003	
Plan Marketing Name =>	Keystone HMO \$7000		Keystone HMO \$7000		Keystone HMO \$7000		Keystone HMO \$7000	
Form # =>	HMO-SM/WG-9		HMO-SM/WG-9		HMO-SM/WG-9		HMO-SM/WG-9	
Rating Area =>	Area 1		Area 2,4		Area 5		Area 6	
Network =>	AB		AB		AB		AB	
Metal =>	Bronze		Bronze		Bronze		Bronze	
Deductible =>	7000		7000		7000		7000	
Coinurance =>	0.5		0.5		0.5		0.5	
Copays =>	115		115		115		115	
OOP Maximum =>	8550		8550		8550		8550	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$158.46	\$158.46	\$166.98	\$166.98	\$169.31	\$169.31	\$179.20	\$179.20
15	\$172.55	\$172.55	\$181.82	\$181.82	\$184.36	\$184.36	\$195.13	\$195.13
16	\$177.93	\$177.93	\$187.49	\$187.49	\$190.11	\$190.11	\$201.22	\$201.22
17	\$183.32	\$183.32	\$193.17	\$193.17	\$195.87	\$195.87	\$207.31	\$207.31
18	\$189.12	\$189.12	\$199.28	\$199.28	\$202.07	\$202.07	\$213.87	\$213.87
19	\$194.92	\$194.92	\$205.39	\$205.39	\$208.26	\$208.26	\$220.43	\$220.43
20	\$200.93	\$200.93	\$211.72	\$211.72	\$214.68	\$214.68	\$227.22	\$227.22
21	\$207.14	\$207.14	\$218.27	\$218.27	\$221.32	\$221.32	\$234.25	\$234.25
22	\$207.14	\$207.14	\$218.27	\$218.27	\$221.32	\$221.32	\$234.25	\$234.25
23	\$207.14	\$207.14	\$218.27	\$218.27	\$221.32	\$221.32	\$234.25	\$234.25
24	\$207.14	\$207.14	\$218.27	\$218.27	\$221.32	\$221.32	\$234.25	\$234.25
25	\$207.97	\$207.97	\$219.14	\$219.14	\$222.21	\$222.21	\$235.19	\$235.19
26	\$212.11	\$212.11	\$223.51	\$223.51	\$226.63	\$226.63	\$239.87	\$239.87
27	\$217.08	\$217.08	\$228.75	\$228.75	\$231.94	\$231.94	\$245.49	\$245.49
28	\$225.16	\$225.16	\$237.26	\$237.26	\$240.57	\$240.57	\$254.63	\$254.63
29	\$231.79	\$231.79	\$244.24	\$244.24	\$247.66	\$247.66	\$262.13	\$262.13
30	\$235.10	\$235.10	\$247.74	\$247.74	\$251.20	\$251.20	\$265.87	\$265.87
31	\$240.08	\$240.08	\$252.97	\$252.97	\$256.51	\$256.51	\$271.50	\$271.50
32	\$245.05	\$245.05	\$258.21	\$258.21	\$261.82	\$261.82	\$277.12	\$277.12
33	\$248.15	\$248.15	\$261.49	\$261.49	\$265.14	\$265.14	\$280.63	\$280.63
34	\$251.47	\$251.47	\$264.98	\$264.98	\$268.68	\$268.68	\$284.38	\$284.38
35	\$253.13	\$253.13	\$266.73	\$266.73	\$270.45	\$270.45	\$286.25	\$286.25
36	\$254.78	\$254.78	\$268.47	\$268.47	\$272.22	\$272.22	\$288.13	\$288.13
37	\$256.44	\$256.44	\$270.22	\$270.22	\$273.99	\$273.99	\$290.00	\$290.00
38	\$258.10	\$258.10	\$271.96	\$271.96	\$275.76	\$275.76	\$291.88	\$291.88
39	\$261.41	\$261.41	\$275.46	\$275.46	\$279.31	\$279.31	\$295.62	\$295.62
40	\$264.72	\$264.72	\$278.95	\$278.95	\$282.85	\$282.85	\$299.37	\$299.37
41	\$269.70	\$269.70	\$284.19	\$284.19	\$288.16	\$288.16	\$304.99	\$304.99
42	\$274.46	\$274.46	\$289.21	\$289.21	\$293.25	\$293.25	\$310.38	\$310.38
43	\$281.09	\$281.09	\$296.19	\$296.19	\$300.33	\$300.33	\$317.88	\$317.88
44	\$289.37	\$289.37	\$304.92	\$304.92	\$309.18	\$309.18	\$327.25	\$327.25
45	\$299.11	\$299.11	\$315.18	\$315.18	\$319.59	\$319.59	\$338.26	\$338.26
46	\$310.71	\$310.71	\$327.41	\$327.41	\$331.98	\$331.98	\$351.38	\$351.38
47	\$323.76	\$323.76	\$341.16	\$341.16	\$345.92	\$345.92	\$366.13	\$366.13
48	\$338.67	\$338.67	\$356.87	\$356.87	\$361.86	\$361.86	\$383.00	\$383.00
49	\$353.38	\$353.38	\$372.37	\$372.37	\$377.57	\$377.57	\$399.63	\$399.63
50	\$369.95	\$369.95	\$389.83	\$389.83	\$395.28	\$395.28	\$418.37	\$418.37
51	\$386.32	\$386.32	\$407.07	\$407.07	\$412.76	\$412.76	\$436.88	\$436.88
52	\$404.34	\$404.34	\$426.06	\$426.06	\$432.02	\$432.02	\$457.26	\$457.26
53	\$422.57	\$422.57	\$445.27	\$445.27	\$451.49	\$451.49	\$477.87	\$477.87
54	\$442.24	\$442.24	\$466.01	\$466.01	\$472.52	\$472.52	\$500.12	\$500.12
55	\$461.92	\$461.92	\$486.74	\$486.74	\$493.54	\$493.54	\$522.38	\$522.38
56	\$483.26	\$483.26	\$509.22	\$509.22	\$516.34	\$516.34	\$546.51	\$546.51
57	\$504.80	\$504.80	\$531.92	\$531.92	\$539.36	\$539.36	\$570.87	\$570.87
58	\$527.79	\$527.79	\$556.15	\$556.15	\$563.92	\$563.92	\$596.87	\$596.87
59	\$539.19	\$539.19	\$568.16	\$568.16	\$576.10	\$576.10	\$609.75	\$609.75
60	\$562.18	\$562.18	\$592.38	\$592.38	\$600.66	\$600.66	\$635.75	\$635.75
61	\$582.06	\$582.06	\$613.34	\$613.34	\$621.91	\$621.91	\$658.24	\$658.24
62	\$595.11	\$595.11	\$627.09	\$627.09	\$635.85	\$635.85	\$673.00	\$673.00
63	\$611.48	\$611.48	\$644.33	\$644.33	\$653.34	\$653.34	\$691.51	\$691.51
64+	\$621.42	\$621.42	\$654.81	\$654.81	\$663.96	\$663.96	\$702.75	\$702.75

Company Name: **Highmark Choice Company (HCC)**
 Market: **Small Group**
 Product: **HMO**
 Effective Date of Rates: **October 1, 2022**

Ending date of Rates: **December 31, 2022**

HIOS Plan ID (On Exchange)=>	N/A		N/A		N/A		N/A	
HIOS Plan ID (Off Exchange)=>	38949PA0050003		38949PA0050003		38949PA0050003		38949PA0050003	
Plan Marketing Name =>	Keystone HMO \$7000		Keystone HMO \$7000		Keystone HMO \$7000		Keystone HMO \$7000	
Form # =>	HMO-SM/WG-9		HMO-SM/WG-9		HMO-SM/WG-9		HMO-SM/WG-9	
Rating Area =>	Area 1		Area 2,4		Area 5		Area 6	
Network =>	AB		AB		AB		AB	
Metal =>	Bronze		Bronze		Bronze		Bronze	
Deductible =>	7000		7000		7000		7000	
Coinsurance =>	0.5		0.5		0.5		0.5	
Copays =>	115		115		115		115	
OOP Maximum =>	8550		8550		8550		8550	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$158.52	\$158.52	\$167.04	\$167.04	\$169.37	\$169.37	\$179.27	\$179.27
15	\$172.61	\$172.61	\$181.89	\$181.89	\$184.43	\$184.43	\$195.21	\$195.21
16	\$177.99	\$177.99	\$187.56	\$187.56	\$190.18	\$190.18	\$201.30	\$201.30
17	\$183.38	\$183.38	\$193.24	\$193.24	\$195.94	\$195.94	\$207.39	\$207.39
18	\$189.18	\$189.18	\$199.35	\$199.35	\$202.14	\$202.14	\$213.95	\$213.95
19	\$194.98	\$194.98	\$205.47	\$205.47	\$208.34	\$208.34	\$220.51	\$220.51
20	\$200.99	\$200.99	\$211.80	\$211.80	\$214.76	\$214.76	\$227.31	\$227.31
21	\$207.21	\$207.21	\$218.35	\$218.35	\$221.40	\$221.40	\$234.34	\$234.34
22	\$207.21	\$207.21	\$218.35	\$218.35	\$221.40	\$221.40	\$234.34	\$234.34
23	\$207.21	\$207.21	\$218.35	\$218.35	\$221.40	\$221.40	\$234.34	\$234.34
24	\$207.21	\$207.21	\$218.35	\$218.35	\$221.40	\$221.40	\$234.34	\$234.34
25	\$208.04	\$208.04	\$219.22	\$219.22	\$222.29	\$222.29	\$235.28	\$235.28
26	\$212.18	\$212.18	\$223.59	\$223.59	\$226.71	\$226.71	\$239.96	\$239.96
27	\$217.16	\$217.16	\$228.83	\$228.83	\$232.03	\$232.03	\$245.59	\$245.59
28	\$225.24	\$225.24	\$237.35	\$237.35	\$240.66	\$240.66	\$254.73	\$254.73
29	\$231.87	\$231.87	\$244.33	\$244.33	\$247.75	\$247.75	\$262.23	\$262.23
30	\$235.18	\$235.18	\$247.83	\$247.83	\$251.29	\$251.29	\$265.98	\$265.98
31	\$240.16	\$240.16	\$253.07	\$253.07	\$256.60	\$256.60	\$271.60	\$271.60
32	\$245.13	\$245.13	\$258.31	\$258.31	\$261.92	\$261.92	\$277.22	\$277.22
33	\$248.24	\$248.24	\$261.58	\$261.58	\$265.24	\$265.24	\$280.74	\$280.74
34	\$251.55	\$251.55	\$265.08	\$265.08	\$268.78	\$268.78	\$284.49	\$284.49
35	\$253.21	\$253.21	\$266.82	\$266.82	\$270.55	\$270.55	\$286.36	\$286.36
36	\$254.87	\$254.87	\$268.57	\$268.57	\$272.32	\$272.32	\$288.24	\$288.24
37	\$256.53	\$256.53	\$270.32	\$270.32	\$274.09	\$274.09	\$290.11	\$290.11
38	\$258.18	\$258.18	\$272.06	\$272.06	\$275.86	\$275.86	\$291.99	\$291.99
39	\$261.50	\$261.50	\$275.56	\$275.56	\$279.41	\$279.41	\$295.74	\$295.74
40	\$264.81	\$264.81	\$279.05	\$279.05	\$282.95	\$282.95	\$299.49	\$299.49
41	\$269.79	\$269.79	\$284.29	\$284.29	\$288.26	\$288.26	\$305.11	\$305.11
42	\$274.55	\$274.55	\$289.31	\$289.31	\$293.36	\$293.36	\$310.50	\$310.50
43	\$281.18	\$281.18	\$296.30	\$296.30	\$300.44	\$300.44	\$318.00	\$318.00
44	\$289.47	\$289.47	\$305.03	\$305.03	\$309.30	\$309.30	\$327.37	\$327.37
45	\$299.21	\$299.21	\$315.30	\$315.30	\$319.70	\$319.70	\$338.39	\$338.39
46	\$310.82	\$310.82	\$327.53	\$327.53	\$332.10	\$332.10	\$351.51	\$351.51
47	\$323.87	\$323.87	\$341.28	\$341.28	\$346.05	\$346.05	\$366.27	\$366.27
48	\$338.79	\$338.79	\$357.00	\$357.00	\$361.99	\$361.99	\$383.15	\$383.15
49	\$353.50	\$353.50	\$372.51	\$372.51	\$377.71	\$377.71	\$399.78	\$399.78
50	\$370.08	\$370.08	\$389.97	\$389.97	\$395.42	\$395.42	\$418.53	\$418.53
51	\$386.45	\$386.45	\$407.22	\$407.22	\$412.91	\$412.91	\$437.04	\$437.04
52	\$404.47	\$404.47	\$426.22	\$426.22	\$432.17	\$432.17	\$457.43	\$457.43
53	\$422.71	\$422.71	\$445.43	\$445.43	\$451.66	\$451.66	\$478.05	\$478.05
54	\$442.39	\$442.39	\$466.18	\$466.18	\$472.69	\$472.69	\$500.32	\$500.32
55	\$462.08	\$462.08	\$486.92	\$486.92	\$493.72	\$493.72	\$522.58	\$522.58
56	\$483.42	\$483.42	\$509.41	\$509.41	\$516.53	\$516.53	\$546.72	\$546.72
57	\$504.97	\$504.97	\$532.12	\$532.12	\$539.55	\$539.55	\$571.09	\$571.09
58	\$527.97	\$527.97	\$556.36	\$556.36	\$564.13	\$564.13	\$597.10	\$597.10
59	\$539.37	\$539.37	\$568.37	\$568.37	\$576.30	\$576.30	\$609.99	\$609.99
60	\$562.37	\$562.37	\$592.60	\$592.60	\$600.88	\$600.88	\$636.00	\$636.00
61	\$582.26	\$582.26	\$613.56	\$613.56	\$622.13	\$622.13	\$658.50	\$658.50
62	\$595.31	\$595.31	\$627.32	\$627.32	\$636.08	\$636.08	\$673.26	\$673.26
63	\$611.68	\$611.68	\$644.57	\$644.57	\$653.57	\$653.57	\$691.77	\$691.77
64+	\$621.63	\$621.63	\$655.05	\$655.05	\$664.20	\$664.20	\$703.02	\$703.02

Highmark Choice Company (HCC)
Small Group
Plan Design Summary

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	AB	1,2,4,5,6	Clarion, Crawford, Forest, McKean, Venango, Warren, Cameron, Elk, Potter, Armstrong, Clearfield, Huntingdon, Jefferson, Somerset, Centre

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County					RATING AREA 1							
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0	0	0	0	0	0
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	Crawford	Clarion	Erie	Forest	Mckean	Mercer	Venango	Warren
					\$207.02	\$207.02		\$207.02	\$207.02		\$207.02	\$207.02

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County					RATING AREA 2		
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0
					Elk	Cameron	Potter
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	\$218.15	\$218.15	\$218.15

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

					RATING AREA 4									
02-01-2021 Number of Covered Lives by Rating County					0	0	0	0	0	0	0	0	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	\$218.15									

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off

RATING AREA 5						
0	0	0	0	0	0	0
Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
		\$221.20			\$221.20	\$221.20

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off

RATING AREA 6									
0	0	0	0	0	0	0	0	0	0
Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union
\$234.12									

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County					RATING AREA 1							
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0	0	0	0	0	0
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	Crawford	Clarion	Erie	Forest	Mckean	Mercer	Venango	Warren
					\$207.08	\$207.08		\$207.08	\$207.08		\$207.08	\$207.08

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County					RATING AREA 2			RATING AREA 4									
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0	0	0	0	0	0	0	0	0	0	0
38949PA0050003	Keystone HMO S7000	HMO	Bronze	Off	Elk	Cameron	Potter	Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland
					\$218.21	\$218.21	\$218.21	\$218.21									

Company Name Highmark Choice Company (HCC)
 Market Small Group
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off

RATING AREA 5

0	0	0	0	0	0	0
Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
\$221.27		\$221.27		\$221.27		\$221.27

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County					RATING AREA 6									
					0	0	0	0	0	0	0	0	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	\$234.19									

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County					RATING AREA 1							
					0	0	0	0	0	0	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Crawford	Clarion	Erie	Forest	McKean	Mercer	Venango	Warren
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	\$207.14	\$207.14		\$207.14	\$207.14		\$207.14	\$207.14

Company Name Highmark Choice Company (HCC)
 Market Small Group
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County					RATING AREA 2		
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0
					Elk	Cameron	Potter
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	\$218.27	\$218.27	\$218.27

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

					RATING AREA 4									
02-01-2021 Number of Covered Lives by Rating County					0	0	0	0	0	0	0	0	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	\$218.27									

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off

RATING AREA 5						
0	0	0	0	0	0	0
Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
		\$221.32			\$221.32	\$221.32

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

					RATING AREA 6									
02-01-2021 Number of Covered Lives by Rating County					0	0	0	0	0	0	0	0	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	\$234.25									

Company Name Highmark Choice Company (HCC)
 Market Small Group
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County					RATING AREA 1							
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0	0	0	0	0	0
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	Crawford	Clarion	Erie	Forest	McKean	Mercer	Venango	Warren
					\$207.21	\$207.21	\$207.21	\$207.21	\$207.21	\$207.21	\$207.21	\$207.21

Company Name Highmark Choice Company (HCC)
 Market Small Group
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County					RATING AREA 2		
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0
					Elk	Cameron	Potter
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	\$218.35	\$218.35	\$218.35

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off

RATING AREA 4									
0	0	0	0	0	0	0	0	0	0
Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland
\$218.35									

Company Name Highmark Choice Company (HCC)
 Market Small Group
 RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2021 Number of Covered Lives by Rating County					RATING AREA 5						
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0	0	0	0	0
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
					\$221.40		\$221.40		\$221.40		\$221.40

Company Name Highmark Choice Company (HCC)
Market Small Group
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

					RATING AREA 6									
02-01-2021 Number of Covered Lives by Rating County					0	0	0	0	0	0	0	0	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union
38949PA0050003	Keystone HMO \$7000	HMO	Bronze	Off	\$234.34									

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Unified Rate Review v5.3

Company Legal Name:Highmark Choice Company (HCC)

HIOS Issuer ID:38949

Effective Date of Rate Change(s):01/01/2022

State:PA

Market:Small Group

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

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

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

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

Market Level Calculations (Same for all Plans)

Section I: Experience Period Data

Experience Period:01/01/2020to12/31/2020

TotalPMPM

Allowed Claims	\$32,842.50	\$360.91
Reinsurance	\$0.00	\$0.00
Incurred Claims in Experience Period	\$25,965.15	\$285.33
Risk Adjustment	-\$15,400.58	-\$169.24
Experience Period Premium	\$36,421.79	\$400.24
Experience Period Member Months	91	

Section II: Projections

Benefit Category	Experience Period Index Rate PMPM	Year 1 Trend		Year 2 Trend		Trended EHB Allowed Claims PMPM
		Cost	Utilization	Cost	Utilization	
Inpatient Hospital	\$95.39	1.031	1.132	1.031	1.050	\$120.52
Outpatient Hospital	\$69.06	1.031	1.132	1.031	1.050	\$87.25
Professional	\$123.26	1.031	1.132	1.031	1.050	\$155.73
Other Medical	\$19.90	1.031	1.132	1.031	1.050	\$25.14
Capitation	\$0.48	1.113	1.000	1.113	1.000	\$0.59
Prescription Drug	\$52.81	1.031	1.132	1.031	1.050	\$66.72
Total	\$360.90					\$455.96

Morbidity Adjustment	0.834
Demographic Shift	0.945
Plan Design Changes	0.937
Other	1.000
Adjusted Trended EHB Allowed Claims PMPM for01/01/2022	\$336.72

Manual EHB Allowed Claims PMPM	\$404.32
Applied Credibility %	0.00%

Projected Period Totals

Projected Index Rate for01/01/2022	\$404.32	\$48,518.40
Reinsurance	\$0.00	\$0.00
Risk Adjustment Payment/Charge	\$9.29	\$1,114.80
Exchange User Fees	0.00%	\$0.00
Market Adjusted Index Rate	\$395.03	\$47,403.60

Projected Member Months	120
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Information Not Releasable to the Public Unless Authorized by Law:

This information has not been publically disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.

Product-Plan Data Collection

Company Legal Name: Highmark Choice Company (HCC)
HIOS Issuer ID: 38949
Effective Date of Rate Change(s): 01/01/2022

State: PA
Market: Small Group

To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + P.
To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L.
To validate, select the Validate button or Ctrl + Shift + I.
To finalize, select the Finalize button or Ctrl + Shift + F.
To remove a product, navigate to the corresponding Product Name/Product ID field and select the Remove Product button or Ctrl + Shift + Q.
To remove a plan, navigate to the corresponding Plan Name/Plan ID field and select the Remove Plan button or Ctrl + Shift + A.

Product/Plan Level Calculations

Section I: General Product and Plan Information

1.1 Product Name	Terminated Product	Keystone HMO	Keystone HMO Embedded	Keystone HMO			
1.2 Product ID	38949PA004	38949PA005	38949PA012	38949PA013			
1.3 Plan Name	2020 Experience	Keystone HMO \$700	Keystone HMO Embedded	Keystone HMO 500	Keystone HMO 1500	Keystone HMO 2500	Keystone HMO 5000
1.4 Plan ID (Standard Component ID)	38949PA0040001	38949PA0050003	38949PA0120002	38949PA0130002	38949PA0130004	38949PA0130005	38949PA0130006
1.5 Metal	Not Applicable	Bronze	Bronze	Gold	Gold	Gold	Gold
1.6 AV Metal Value	0	0.649	0.621	0.818	0.794	0.774	0.765
1.7 Plan Category	Terminated	Renewing	Terminated	Terminated	Terminated	Terminated	Terminated
1.8 Plan Type	HMO	HMO	HMO	HMO	HMO	HMO	HMO
1.9 Exchange Plan?	No	No	No	No	No	No	No
1.10 Effective Date of Proposed Rates	01/01/2020	01/01/2022	01/01/2020	01/01/2020	01/01/2020	01/01/2020	01/01/2020
1.11 Cumulative Rate Change % (over 12 mos prior)	0	0	0	0	0	0	0
1.12 Product Rate Increase %	0.00%	#DIV/0!	0.00%	0.00%			
1.13 Submission Level Rate Increase %	#DIV/0!						

Worksheet 1 Totals		Section II: Experience Period and Current Plan Level Information								
	2.1 Plan ID (Standard Component ID)	Total	38949PA0040001	38949PA0050003	38949PA0120002	38949PA0130002	38949PA0130004	38949PA0130005	38949PA0130006	
\$32,843	2.2 Allowed Claims	\$32,843	\$0	\$0	\$648	\$20,402	\$3,658	\$15	\$8,119	
\$0	2.3 Reinsurance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
	2.4 Member Cost Sharing	\$6,877	\$0	\$0	\$615	\$2,414	\$677	\$3	\$3,169	
	2.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
\$25,965	2.6 Incurred Claims	\$25,965	\$0	\$0	\$34	\$17,988	\$2,981	\$12	\$4,950	
-\$15,401	2.7 Risk Adjustment Transfer Amount	-\$15,401	\$0	\$0	-\$2,752	-\$4,712	-\$1,677	-\$731	-\$5,528	
\$36,422	2.8 Premium	\$36,422	\$0	\$0	\$3,872	\$18,028	\$4,188	\$1,138	\$9,197	
91	2.9 Experience Period Member Months	91	0	0	9	49	6	3	24	
	2.10 Current Enrollment	0	0	0	0	0	0	0	0	
	2.11 Current Premium PMPM	#DIV/0!	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	2.12 Loss Ratio	123.52%	#DIV/0!	#DIV/0!	3.00%	135.09%	118.76%	2.91%	134.93%	
	Per Member Per Month									
	2.13 Allowed Claims	\$360.91	#DIV/0!	#DIV/0!	\$72.03	\$416.37	\$609.72	\$4.99	\$338.28	
	2.14 Reinsurance	\$0.00	#DIV/0!	#DIV/0!	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	2.15 Member Cost Sharing	\$75.58	#DIV/0!	#DIV/0!	\$68.29	\$49.27	\$112.81	\$1.04	\$132.03	
	2.16 Cost Sharing Reduction	\$0.00	#DIV/0!	#DIV/0!	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	2.17 Incurred Claims	\$285.33	#DIV/0!	#DIV/0!	\$3.74	\$367.10	\$496.91	\$3.95	\$206.25	
	2.18 Risk Adjustment Transfer Amount	-\$169.24	#DIV/0!	#DIV/0!	-\$305.73	-\$96.17	-\$279.55	-\$243.83	-\$230.33	
	2.19 Premium	\$400.24	#DIV/0!	#DIV/0!	\$430.18	\$367.92	\$697.95	\$379.30	\$383.19	

Section III: Plan Adjustment Factors								
3.1 Plan ID (Standard Component ID)		38949PA0040001	38949PA0050003	38949PA0120002	38949PA0130002	38949PA0130004	38949PA0130005	38949PA0130006
3.2 Market Adjusted Index Rate		\$395.03						
3.3 AV and Cost Sharing Design of Plan		0.0000	0.6883	0.0000	0.0000	0.0000	0.0000	0.0000
3.4 Provider Network Adjustment		0.0000	1.0000	0.0000	0.0000	0.0000	0.0000	0.0000
3.5 Benefits in Addition to EHB		0.0000	1.0000	0.0000	0.0000	0.0000	0.0000	0.0000
Administrative Costs								
3.6 Administrative Expense		0.00%	17.14%	0.00%	0.00%	0.00%	0.00%	0.00%
3.7 Taxes and Fees		0.00%	0.15%	0.00%	0.00%	0.00%	0.00%	0.00%
3.8 Profit & Risk Load		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
3.9 Catastrophic Adjustment		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
3.10 Plan Adjusted Index Rate		\$0.00	\$328.74	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

3.11 Age Calibration Factor	0.6601	0.6601						
3.12 Geographic Calibration Factor	0.9990	0.9990						
3.13 Tobacco Calibration Factor	1.0000	1.0000						
3.14 Calibrated Plan Adjusted Index Rate		\$0.00	\$216.78	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Section IV: Projected Plan Level Information								
4.1 Plan ID (Standard Component ID)	Total	38949PA0040001	38949PA0050003	38949PA0120002	38949PA0130002	38949PA0130004	38949PA0130005	38949PA0130006
4.2 Allowed Claims	\$48,519	\$0	\$48,519	\$0	\$0	\$0	\$0	\$0
4.3 Reinsurance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4.4 Member Cost Sharing	\$15,122	\$0	\$15,122	\$0	\$0	\$0	\$0	\$0
4.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4.6 Incurred Claims	\$33,397	\$0	\$33,397	\$0	\$0	\$0	\$0	\$0
4.7 Risk Adjustment Transfer Amount	\$767	\$0	\$767	\$0	\$0	\$0	\$0	\$0
4.8 Premium	\$39,448	\$0	\$39,448	\$0	\$0	\$0	\$0	\$0
4.9 Projected Member Months	120	0	120	0	0	0	0	0
4.10 Loss Ratio	83.04%	#DIV/0!	83.04%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Per Member Per Month								
4.11 Allowed Claims	\$404.32	#DIV/0!	\$404.32	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.12 Reinsurance	\$0.00	#DIV/0!	\$0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.13 Member Cost Sharing	\$126.01	#DIV/0!	\$126.01	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.14 Cost Sharing Reduction	\$0.00	#DIV/0!	\$0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.15 Incurred Claims	\$278.31	#DIV/0!	\$278.31	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.16 Risk Adjustment Transfer Amount	\$6.40	#DIV/0!	\$6.40	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.17 Premium	\$328.73	#DIV/0!	\$328.73	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Rating Area Data Collection

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

Rating Area	Rating Factor
Rating Area 1	0.9550
Rating Area 2	1.0063
Rating Area 4	1.0063
Rating Area 5	1.0204
Rating Area 6	1.0800

Part II of the Preliminary Justification

Highmark Choice Company – Small Group Market

Scope and Range:

Highmark Choice Company is requesting a weighted average rate change of 5.34% weighted on the current premium for renewing plans shown in the Unified Rate Review Template for its 2022 ACA qualifying small group products with effective dates from January 1, 2022 to December 31, 2022. This will impact 0 individuals.

The proposed rate changes are being driven by medical care costs and the underlying morbidity of the population within Highmark Choice Company's ACA products.

Lower cost small groups are expected to remain outside the ACA single-risk pool for most of 2022 due to more favorable premium rates afforded to them in the pre-ACA rating formula. The remaining population expected to enroll in the ACA qualifying products represents a small portion of the pool, and those groups generally have unfavorable demographics and higher than average claim costs.

Historical Financial Experience:

Highmark Choice Company reported a financial loss in 2020.

Change in Medical Service Costs:

The projected average cost of medical care for the projected population is expected to increase. The increase will emerge in utilization and average cost per service, and is spread across all types of services.

Change in Benefits:

There are no plan design changes from the Company's currently approved plan designs.

Administrative Costs, Anticipated Operating Results, and Medical Loss Ratio:

Relative to the 2021 rate filing, administrative expenses have decreased 1.5% for the 2022 rate filing. The anticipated operating results are not excessive or unreasonable. In accordance with regulations, the projected medical loss ratio is over 80%.

Part III Actuarial Memorandum

Redacted Version

Highmark Choice Company (HCC)

Small Group Rate Filing

Effective January 1, 2022

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I. General Information

Document Overview

This document contains the Part III Actuarial Memorandum for Highmark Choice Company's ("HCC", "Company") Small Group block of business rate filing ("Filing"), for products with effective dates in calendar year 2022. This actuarial memorandum is submitted in conjunction with the Part I Unified Rate Review Template.

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

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

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

I.1 Company Identifying Information:

- Company Legal Name: Highmark Choice Company
- State: The Commonwealth of Pennsylvania has regulatory authority over these policies
- HIOS Issuer ID: 38949
- Market: Small Group
- Effective Date: January 1, 2022

II. Proposed Rate Changes

Please refer to the Pennsylvania Actuarial Memorandum and Exhibits submitted with this filing for a breakdown of the component items driving this rate change for first quarter renewals.

For all rate increases by plan, see the 'Cumulative Rate Change % (over 12 mos prior)' found in line Worksheet 2, 1.11 of the URRT. The rate changes vary by plan due to changes in the allowable plan level base rate components (pricing actuarial factors, geographic rating factors, network discounts, and administrative charges). These components are re-evaluated each year

to keep pace with market changes and changes in health care costs. For 2022, the Company's proposed rate revisions vary by plan according to the detail presented in the URRT, Worksheet 2.

This filing assumes that there will be no significant changes in legislation, regulations or otherwise (i.e. rules, regulatory guidance, etc.) impacting the ACA market subsequent to the filing date, and that there are no significant changes in the participation of QHP issuers that would materially change the company's expected liabilities. This filing also assumes that transitional plan coverage will be available in the Pennsylvania Small Group market through 2022. Modifications to the rate development may be necessary if significant unforeseen events occur. Examples include, but are not limited to, repeal or invalidation of the ACA or material developments in the course of the COVID pandemic. As a result, HCC reserves the right to submit a revised filing

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

III.1 Paid through Date:

Experience period claims were based on incurred calendar year 2020, paid through February 2021. This experience includes 2020 experience in Affordable Care Act compliant plans. HCC's transitional plan experience for 2020 has not been included in the experience period data.

III.2 Current Date:

The current date used for enrollment and premium is February 2021.

III.3 Allowed and Incurred Claims Incurred During the Experience Period:

- Historical Experience: The URRT historical experience section was completed with HCC's current experience for the small group block of business for the period January 1, 2020 through December 31, 2020, with claims paid through February 2021.
- Claims Incurred During the 12-month experience period: Worksheet 1, Section I shows the Company's best estimate of the amount of claims that were incurred during the 12-month experience period for HCC's small group book-of-business. This section includes:
 - The amount of claims which were processed through the Company's claims system,
 - Claims processed outside of the Company's claims system (Rx rebates, settlements, capitated benefits), and
 - The Company's best estimate of claims incurred but not paid as of the Paid through Date stated above.

- **Method for Determining Allowed Claims:** For non-capitated claims, the allowed charges are summarized from HCC's detailed claim-level historical data. This experience includes 2020 claims in Affordable Care Act compliant plans. HCC's transitional plan experience for 2020 has not been included in the experience period data. For capitated and other off-system claims, historical capitations and experience were tabulated and added to the claims.
- **Paid Claims:** Paid claims were summarized from detailed member records. The paid-to-allowed ratio for the experience period reflects the underlying benefit plan designs chosen by each member.
- **Incurred but Not Paid (IBNR) Claims Estimate:** HCC's estimate of the remaining incurred but not recorded (IBNR) claims reflects the anticipated IBNR as of the end of the paid claim run out period. The IBNR completion factor of 0.998 was developed for HCC's total small group ACA business through analysis of historical claim completion factors. The completion factor was applied equally to both paid and allowed total claims (as a change in utilization) to complete the experience.

IV. Benefit Categories

Experience period claims data were pulled from the Company's claims systems, and categorized into benefit category components according to types of services associated with each claim. The resulting categories closely adhere to the preferred definitions of the Benefit Categories included in the URRT instructions, including the "Other Medical" category. The "Other Medical" category units reflect visits for PDN/home health, trips for ambulance and procedures for DME/prosthetics. The "Capitation" category represents the monthly charge paid to the Company's Vision benefit provider for covering pediatric vision benefits.

V. Projection Factors

V.1 Trend Factors (cost/utilization)

This development of the CY 2022 rates reflects an annual trend rate of 8.27% (3.10% cost, 5.00% utilization). To arrive at the trend assumption, the experience period cost and utilization data were pulled from the Company's claims systems by the defined benefit categories. For the trend component development, the Company uses results from the combined experience of the following companies within the Highmark corporate family: Highmark Inc., Highmark Choice Company, Highmark Health Insurance Company, and Highmark Coverage Advantage. The combined experience used is limited to the Company's Rating Area and Market and provides a more material base to analyze the trend components impacting the business in the Company's Market. The trend development uses a projection of allowed claim PMPMs by service category that takes into account many factors, including the Company's expectations of changes in in-network provider contracting levels, changes in out-of-network costs, changes in utilization from medical management programs, and changes in drug costs from impacts such as generic drug development and new drug treatments. To reflect the impact of provider

contracting on trend, changes in in-network provider contracting levels, either known or anticipated, are factored into the cost component of trend using detailed analysis of the impact on claim levels from each material provider arrangement.

The allowed claims used for the development of the trend are adjusted and normalized to obtain a claim basis appropriate for trend development. These adjustments include changes for in-network provider contracting levels, changes for out-of-network costs, changes in utilization from medical management programs, and changes in drug costs from impacts such as generic drug development and new drug treatments. In addition, the trend estimates normalize for benefit leveraging, population aging, changes in fee schedules, and external trend drivers. The projection of claim costs into the rating period utilizes the same categories of adjustment factors, adjusts for seasonality, and uses a statistical regression of historical trend levels to project monthly claim levels. This normalized and adjusted claim progression is then used to provide the basis for the trend regression model, which will be used to establish the Company's rating trend.

The regression trend model is used to smooth out noise in the historical claim levels and to provide an appropriate jumping off point for projected claim levels. Using the factors discussed above to adjust projected claim levels, an appropriate assumption for trend was established using the experience period claim levels as the starting point. Since historical experience would encompass the expected coverage and demographic makeup of the membership, historical claim levels, adjusted for these factors and projected forward, would represent the best estimates of trend for this block of business.

For the rate development, the Company uses the aggregate claim trend for all types of service, applied to the experience period. This is done so that the combined trend is reasonable in consideration of the various pricing trend components and the overall anticipated trend level. Claim variations due to the specific projected enrolled population in this single risk pool are reflected in the morbidity adjustment.

In addition to the trend in medical and drug claims discussed above, the trend reflects changes in anticipated costs for claims processed outside of the Company's claims system, including Rx rebates and settlements. The trend for capitated benefits is determined from the anticipated change in the per member costs from the experience period to the projection period. Projected capitation rates are provided by our vision provider.

The Company performed a separate analysis to identify the impact of COVID on the base experience trend data and adjusted the historical claims data accordingly. See the Impact of COVID section below for the magnitude of this adjustment, along with additional detail. This COVID adjustment to the base period data impacts the Year 1 Utilization Trend in the URRT, Worksheet 1.

V.2 Morbidity Adjustment

The morbidity adjustment reflects the anticipated changes in the average morbidity of the covered population (beyond allowable rating factors) from the experience period to the rating period. As the Company has seen through the transitional coverage availability period, many

of the Small Group market customers have retained their pre-ACA coverage, and have yet to join the ACA risk pool. With the transitional coverage provisions proposed extension through the end of 2022 for groups that renew on or prior to October 1, 2022, the Company continues to believe that many groups, especially lower-risk groups, will continue to retain their current transitional coverage until required to transfer coverage.

Impact of COVID

To account for the impact of COVID, the Company made the following adjustments to its base experience period claims and its projected costs:

- a. The claims in the base experience period were adjusted to a non-COVID baseline environment (discussed in the Trend Factors section above). This was done to provide a more stable base from which to project future claims. Claims in the base experience period were adjusted upward by 7.98%, representing the estimated degree of claims suppression in the experience period. This adjustment is applied to the underlying medical and drug claims incurred in the experience period, excluding prescription drug rebates and other claims paid outside of the system. This adjustment is reflected in the Year 1 Utilization Trend in the URRT, Worksheet 1, where it is applied to claims net of Prescription Drug Rebates and other claims paid outside the system, which results in an additional load to the Year 1 Utilization Trend in the URRT of 1.86%

To determine the appropriate adjustment factor for the base experience period, the Company analyzed historical normalized allowed claim trends for medical and drug costs combined at the state and market level. Then the Company selected an appropriate trend amount for 2020 within the range of historical trend results. This trend was applied to the 2019 normalized allowed claims to establish the non-COVID baseline claims, which were then compared to the actual 2020 experience normalized allowed claims to determine the adjustment factor indicated above.

To determine the appropriate adjustment factor for the base experience period, the Company analyzed historical normalized allowed medical claim trends combined at the state and market level. Then the Company selected an appropriate medical trend amount for 2020 within the range of historical trend results. This trend was applied to the 2019 normalized allowed medical claims to project the non-COVID baseline medical claims for 2020, which were then compared to the actual 2020 experience normalized allowed medical claims to determine the adjustment factor indicated above. The overall impact of the pandemic on drug claims in 2020 is assumed to be negligible, and so were not adjusted. The adjustment factors for medical and drug were then weighted together to develop an overall BEP allowed claim adjustment factor.

- b. The projection period claims were first established using trend projections under non-COVID baseline assumptions, effectively removing the noise introduced by COVID. Using a non-COVID baseline experience environment, claims were projected into the rating period using traditional methods of claim trend projections, as discussed in the Trend Identification section above.

- c. The projected non-COVID baseline claims were then further adjusted by applying the anticipated impacts of COVID costs expected in the projection period. There are four components of this adjustment determined by the Company:

- 1) ***COVID Treatment (\$0.07 PMPM)*** – COVID treatment utilization in 2022 is expected to follow a similar utilization pattern as flu treatment from 2018 and 2019 (roughly 0.003 admits per 1000 members per month), with COVID-specific admission costs based on recent admission costs for COVID (roughly \$26,000 cost per admit).
- 2) ***COVID Testing (\$1.01 PMPM)*** – COVID testing utilization in 2022 is expected to follow a similar utilization pattern as flu testing from 2018 and 2019 (roughly 9 tests per 1000 members per month), with COVID specific testing costs based on recent testing costs for COVID (roughly \$112.87 cost per test).
- 3) ***COVID Vaccine (\$2.05 PMPM)*** – The Company is expecting that a total of 43% of members will receive a COVID vaccine. This assumes that 60% of members 18-64 utilize a vaccine and 40% of members under 18 utilize a vaccine. In addition to this, some vaccines are not reported in the billing system so expected utilization is further reduced by 25%.

The cost of the vaccine is assumed to be \$115 per dose. This is a combination of a \$40 cost for administering the vaccine and \$75 cost for the vaccine itself.

Finally, the average number of doses per member is assumed to be 0.5. This reflects the assumption that members will need a COVID vaccine every other year. This results in a cost of \$2.05 PMPM, which represents the expected cost that the Company will incur during the 2022-2023 coverage period stemming from 2022 policy year contracts.

- 4) ***Additional morbidity (0.50% claims impact)*** – Due to insureds missing preventative care (maintenance care and testing services) and quarantine rules leading to a more sedentary lifestyle, the Company expects a general trend towards worsening member morbidity. The following categories of care are expected to be impacted: Cardiology, Joint Degeneration, Diabetes, Mood Disorder & Depression, and Alcohol Treatment. The range of possible cost increases in these categories is assumed to be between 1% and 5%, which equates to 0.2% to 1.1% of total claims. Pricing assumes an overall claims

impact of 0.5%, which is applied to the underlying medical and drug claims expected in the projection period.

Total Morbidity Adjustment

In total, the Company expects that morbidity will improve from the experience period. For the development of the CY 2022 rates, this is reflected with a 0.834 Morbidity Adjustment factor in the URRT Worksheet 1.

V.3 Demographic Shifts

The Company is expecting a slight decrease in the average age from the experience period to the projection period as the average age factor of our current business is lower than that in the experience period. For the development of the CY 2022 rates, this is reflected with a 0.945 Demographic Shift factor in the URRT Worksheet 1.

The average area factor is expected to increase slightly, so changes in average area factors are impacting the demographic shift factor.

V.4 Plan Design Changes

The following adjustments were made to reflect the expected differences in benefits between the experience period and projection period:

- Anticipated changes in the average utilization of services due to differences in average cost sharing requirements during the experience period and average cost sharing requirements in the projection period: -6.28%
- Change in network benefits: 0.00%
- Newly mandated benefits required under state law, which are not reflected in the experience period claims: None.
- New benefits that are not part of the essential health benefit package or required under state law that did not exist in the experience period claims: None.
- The removal of benefits covered in the experience period claims that will not be covered in the projection period: None.

For the development of the CY 2022 rates, the combination of the above factors produces a 0.937 Plan Design Changes factor in the URRT Worksheet 1.

V.5 Other Adjustments

The Company's rate development for 2022 does not utilize any additional adjustment factors other than those discussed above. For the development of the CY 2022 rates, a 1.000 factor is shown for the Other adjustment factor in the URRT Worksheet 1.

VI. Manual Rate Adjustments

HCC's small group experience is not fully credible on its own. See Credibility of Experience section below for a discussion of the assigned credibility level, the source and appropriateness of the manual rate data used, and any adjustments made to the manual data.

VII. Credibility of Experience

The Company has employed a credibility methodology consistent with ASOP #25 to determine the appropriate level of credibility to be assigned to the base experience period data. The assigned credibility level has been determined by referencing published studies from the Society of Actuaries (SOA), most notably "A Practical Approach to Assigning Credibility for Group Medical Insurance Pricing," as well as utilizing actuarial judgment in consideration of the Company's base experience period and projection period computations. Employing the conclusions confirmed in the referenced SOA study, the Company has established a full credibility threshold of 2,000 average member months for the experience period. As the Company has no active membership in its ACA products, the Company has assigned zero credibility to the Company's base experience data, and has utilized the appropriate combined regional experience of several companies within the Highmark corporate family to establish the credibility manual rate. These companies are Highmark Inc., Highmark Health Insurance Company, and Highmark Coverage Advantage. Utilizing this combined company experience established a manual rate basis that would be fully credible according to the criteria discussed above. The Company believes that utilizing this combined experience in its rate development establishes a more appropriate rate level when giving consideration to the market-wide rate relativities established by Highmark's corporate family of companies.

VIII. Establishing the Index Rate

The index rates as shown on Worksheet 1 of the URRT are simply the average allowed claims for the Essential Health benefits for the experience and projected populations, respectively, for HCC. It is not adjusted for the risk adjustment program or any other fee. For the projection period, it is the member-weighted average of the quarterly rate indices (Jan 1, Apr 1, Jul 1, and Oct 1) based on the assumed membership distribution effective in each quarter, as shown in the table below.

2022	% of Members	Projected Quarterly Index Rate PMPM
1Q	0.0%	\$404.32
2Q	0.0%	\$404.44
3Q	0.0%	\$404.55
4Q	0.0%	\$404.69
Composite	0.0%	N/A

See the sections below for a description of how the projected index rate is adjusted to arrive at each plan adjusted index rate.

IX. Development of the Market-wide Adjusted Index Rate

The limitations imposed by verifications and rounding in the URRT v5.3 workbook produce a Market-wide Adjusted Index Rate that is slightly different from the one ultimately used in the rate development. Please see Exhibit I for a numerical demonstration of the Market-wide Adjusted Index Rate development that removes these limitations, including the Reinsurance, Risk Adjustment Payment/Charge, and Exchange User Fees discussed below.

IX.1 Reinsurance

HCC does not have any reinsurance contracts in effect that would impact this rate development. The consideration for the federal high-cost risk pooling program is discussed in the following Risk Adjustment Payment/Charge section.

IX.2 Risk Adjustment Payment/Charge

To arrive at the anticipated risk transfer for 2022, the Company determines the risk adjustment calculation components for the projected 2022 Company portfolio and uses its current knowledge of the Pennsylvania Small Group market profile to estimate the risk adjustment components for the entire state Market. This Market-wide profile is developed from available Market data, including the Interim Summary Report on Risk Adjustment for the 2020 Benefit Year published by CMS, the PA Insurance Department's calculation of 2020 risk adjustment transfer amounts using the final RATEE files, prior years' risk adjustment transfer results, publicly available data (such as MLR reports and rate filings), and outside expertise from actuarial consultants. For 2022, the Company is projecting a risk adjustment transfer amount of \$7.88 PMPM.

Given the limited ACA experience for this Company, the risk adjustment transfer assumptions are developed from a regional analysis of Highmark business. As several companies within the Pennsylvania Small Group market have stopped offering transitional relief, the Company has noticed that the risk profile based on the regional analysis of Highmark business has become higher than market averages. Thus the Company is anticipating that it will be in receipt of funds from the risk adjustment transfer program for 2022.

The \$9.29 PMPM value in Worksheet 1 of the URRT equals the \$7.88 PMPM risk adjustment transfer value discussed above, along with a charge of \$1.49 PMPM for the projected net impact of the High Cost Risk Pool program. This total risk adjustment transfer amount of \$6.40 is then grossed up by the average paid to allowed ratio of 0.688 to arrive at the appropriate value for the URRT.

IX.3 Exchange User Fees

The projected Exchange User Fees are developed from the Exchange user fees to be charged by CMS in 2022, multiplied by the percentage of business the Company expects to purchase Market coverage through the Exchange for the Company. For the Company, all business will be offered Off Exchange in 2022, so there are no Exchange User Fees charged in the rate development.

X. Plan Adjusted Index Rates

The Plan Adjusted Index Rates can be found on line 3.10, Worksheet 2 of the URRT. The Plan Adjusted Index Rates are calculated by applying the allowable rating factors as described below to the Market-wide Adjusted Index Rate. Please see Exhibit II for the development of the Plan Adjusted Index Rate for each plan.

X.1 AV and Cost Sharing Design of Plan

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

- The utilization due to differences in cost sharing is based on the factors calculated using a methodology prescribed in the Department's guidance relative to the weighted average. No differences due to health status are in these adjustments.
- The pricing AV for the benefits and cost sharing of the plan.

X.2 Provider Network Adjustment

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

X.3 Benefits in Addition to EHB

Only the expected costs of essential health benefits (EHB) are included in each of the Company's plans.

X.4 Administrative Expense

The proposed rates reflect internal administrative costs, including commissions and quality improvement admin. This cost was developed based on standard expense allocation methods, as follows:

- Administrative expenses are recorded in the general ledger. Indirect operating expenses are then grouped based upon like functions, responsibilities or cost drivers and allocated to final cost objects via an appropriate cost driver.

Administrative expense loads vary by plan to more appropriately capture the costs associated with plan administration. The total administrative costs anticipated by the Company have been split such that each plan receives a PMPM administrative load, along with a percent of premium administrative load. This methodology results in percent of premium expense loads that vary by plan.

X.5 Taxes and Fees

The following taxes and fees were included in the 2022 rate development:

- \$0.24 PMPM for the PCORI Fee;

- \$0.25 PMPM for the Risk Adjustment User Fee

In total, these taxes and fees amount to 0.15% of the anticipated premium collected in 2022.

X.6 Profit & Risk Load

The proposed rates reflect 0% of premium as a profit and risk load. The Company has voluntarily refrained from including a profit and risk load in this filing. By this voluntary action, the Company is not waiving any right to include a profit and risk load which the Company believes is consistent with historical and legal interpretations of the Company and the Department.

XI. Calibration

XI.1 Age Curve Calibration (to age 21, non-smoker, area with 1.0 geographic factor, January 1 effective date)

The projected weighted average age factor is 1.515. Each Plan Adjusted Index Rate represents the rate for an average member (i.e., a member with an age factor is 1.515). Please note that no member will pay these rates because the age factor of 1.515 is not found on the HHS Age Curve. It only represents the average age factor of the projected population. Please see Exhibit I for the development of the calibration factor, which calibrates the index rate to an Age 21 age factor. The Age Calibration Factor shown in URRT Worksheet 2 is the inverse of weighted average age factor, which for HCC is 0.660.

XI.2 Geographic Factor Calibration

The projected weighted average geographic factor is 1.001. Each Plan Adjusted Index Rate represents the rate for an average member with a geographic factor of 1.001. Please note that no member will pay these rates because 1.001 is not using a geographic factor of 1.001 for any of the Pennsylvania rating areas. It only represents the average geographic factor of the projected population. Please see Exhibit I for the development of the calibration factor. The Geographic Calibration Factor shown in URRT Worksheet 2 is the inverse of weighted average geographic factor, which for HCC is 0.999.

XI.3 Tobacco Use Rating Factor Calibration

The Company does not currently utilize tobacco rating factors.

XII. Consumer Adjusted Premium Rate Development

The Calibrated Plan Adjusted Index Rate shown in URRT Worksheet 2 represents the rate for a non-smoker member with a 1.0 age factor and 1.0 geographic factor for a 1/1/2022 renewal. The appropriate value to calibrate the Plan Adjusted Index Rate by is located at the bottom of Exhibit I. By applying the 'Combined Calibration Factor' found in Exhibit I or the calibration factors in 3.11, 3.12 and 3.13 of URRT Worksheet II Section III to the Plan Adjusted Index Rates, the resulting value will represent the plan premium for a 21 year old in a 1.0 area on 1/1/2021. The standard HHS Age Curve and area factors of 0.955 for regions 1; 1.006 for

regions 2 and 4; 1.02 for region 5; and 1.08 for region 6 can be used to calculate any rate found in the QHP rate template.

The Company is filing quarterly Index Rate trends that vary by quarter. Subsequent quarterly rates can be developed by multiplying the first quarter rates by 1.0003 for second quarter rates; 1.0006 for third quarter rates; and 1.0009 for fourth quarter rates. Please refer to the Pennsylvania Actuarial Memorandum submitted with this filing for additional commentary related to the development of these quarterly Index Rate trends.

XIII. Projected Loss Ratio

The anticipated medical loss ratio reflected in this annual rate change filing is 86.9% relative to total premium less taxes and fees. This loss ratio is calculated consistent with the federally prescribed MLR methodology.

XIV. AV Metal Values

The AV Metal Values included in Worksheet 2 of the Part I Unified Rate Review Template were based entirely on the Federal AV Calculator. No adjustments were needed for any benefits from those values produced by the AV calculator.

XV. Membership Projections

Since transitional policy relief has been proposed to extend through 2022 for groups that renew on or prior to October 1, 2022, the Company projects that the bulk of the members in the small group market will remain outside of the ACA-compliant products, and remain outside the ACA single-risk pool. As such, HCC is projected to have very little membership in its ACA products in 2022. See line 4.9 of the URRT Worksheet 2 to see projected membership by plan.

XVI. Terminated Plans and Products

HCC is terminating 5 plans that were active in the 2020 experience period. These plans are being terminated due to a re-evaluation of benefit design options and marketing considerations. These plans will not be mapped.

Exhibit III lists all terminating QHP plans.

XVII. Plan Type

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

XVIII. Actuarial Certification

I am a member of the American Academy of Actuaries and meet its qualification standards for actuaries issuing statements of actuarial opinions in the United States. This filing is prepared

on behalf of HCC its rate filing (for calendar year 2022) for the Small Group Market off the Pennsylvania Exchange.

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

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

I certify that the Index Rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates.

I certify that the AV Calculator was used to determine the AV Metal Values shown in Part I of Worksheet 2 in the Unified Rate Review Template for all plans. If any adjustments were required outside of the AV Calculator, appropriate certification has been provided to CMS through the QHP application process.

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

The Part I Unified Rate Review Template does not demonstrate the process used by HCC to develop the rates. Rather, it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of Qualified Health Plans for Federally-facilitated Exchanges and for certification that the Index Rate is developed in accordance with Federal regulation and used consistently and only adjusted by the allowable modifiers.

Signed: [Redacted]

Date: 05/18/2021

Exhibit I
Highmark Choice Company (HCC)
2022

Pennsylvania Small Group Market Base Rate

	1/1/2022 Values
CY2022 Projected Period Average Members	10
CY2022 Allowed Claims	\$404.32
Projected Non-EHBs	
None	\$0.00
CY2022 Allowed Claims for EHB Only (Index Rate)	\$404.32
Market Index Rate Adjustments	
Risk Adjustment (Includes Risk Adjuster Fee)	0.977
Federal Reinsurance Program (Includes Reinsurance Premium)	1.000
Exchange User Fee Adjustment	1.000
CY2022 Market Adjusted Index Rate	\$395.03
Calibration	
Calibration from Plan Adjusted Index Rate to Age 46, 1.0 Area, Non-Smoker, January 1, 2022 Rate	
(a) Average Age Factor	1.5149
(b) Age 46 (Nearest Age on HHS Age Curve) Age Factor	1.5000
(c) Average Geographic Factor	1.0010
Combined Calibration Factor $1/((a/b)*c)$	0.9892

*Quarterly Index Rate trends are being set at 0.03% for 2Q, 0.06% for 3Q, and 0.09% for 4Q.

Highmark Choice Company (HCC)

Western PA Regions

Unified Rate Review Template (URRT) AV Pricing Value Development

Plan Design Summary							Plan Level						
Product	HIOS Plan ID	Metallic Level	Plan Design Marketing Name	Service Zone	Regions Offered	On or Off Exchange	Base Rate PMPM	URRT AV Pricing Value	Portion of URRT AV Pricing Value Attributable to each Allowable Modifier ^[1]				
									(i)	(ii)	(iii)	(iv)	(v)
HMO	38949PA0050003	Bronze	Keystone HMO \$7000	AB	1,2,4,5,6	Off	\$328.73	0.8322	0.688	1.000	1.000	1.209	1.000

^[1] Permitted Plan-Level Adjustments to the Index Rate as prescribed in 45 CFR Part 156, §156.80(d)(2):

- (i) The actuarial value and cost-sharing design of the plan.
- (ii) The plan's provider network, delivery system characteristics, and utilization management practices.
- (iii) The benefits provided under the plan that are in addition to the essential health benefits.
- (iv) Administrative costs, excluding Exchange user fees.
- (v) With respect to catastrophic plans, the expected impact of the specific eligibility categories for those plans.

Exhibit III

Highmark Choice Company

Small Group Market

Terminated ACA Plans

Exchange	Service Zone	Regions	Terminated Plans		Mapping to...	
			HIOS ID	Plan Design Name	HIOS ID	Plan Design Name
Off	AA	1	38949PA0130005	Keystone HMO \$2500		Not Mapped
Off	AA	1	38949PA0130002	Keystone HMO \$500		Not Mapped
Off	AA	1	38949PA0130004	Keystone HMO \$1500		Not Mapped
Off	AA	1	38949PA0130006	Keystone HMO \$5000 1x		Not Mapped
Off	AA	1	38949PA0120002	Keystone HMO Embedded Q\$6000		Not Mapped

2022 Rates Table Template v11.0	All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
	If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
	If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
	If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
	To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID*	38949			
Rate Effective Date*	01/01/2022			
Rate Expiration Date*	03/31/2022			
Rating Method*	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
38949PA0050003	Rating Area 1	No Preference	0-14	158.37
38949PA0050003	Rating Area 1	No Preference	15	172.45
38949PA0050003	Rating Area 1	No Preference	16	177.83
38949PA0050003	Rating Area 1	No Preference	17	183.21
38949PA0050003	Rating Area 1	No Preference	18	189.01
38949PA0050003	Rating Area 1	No Preference	19	194.81
38949PA0050003	Rating Area 1	No Preference	20	200.81
38949PA0050003	Rating Area 1	No Preference	21	207.02
38949PA0050003	Rating Area 1	No Preference	22	207.02
38949PA0050003	Rating Area 1	No Preference	23	207.02
38949PA0050003	Rating Area 1	No Preference	24	207.02
38949PA0050003	Rating Area 1	No Preference	25	207.85
38949PA0050003	Rating Area 1	No Preference	26	211.99
38949PA0050003	Rating Area 1	No Preference	27	216.96
38949PA0050003	Rating Area 1	No Preference	28	225.03
38949PA0050003	Rating Area 1	No Preference	29	231.66
38949PA0050003	Rating Area 1	No Preference	30	234.97
38949PA0050003	Rating Area 1	No Preference	31	239.94
38949PA0050003	Rating Area 1	No Preference	32	244.90
38949PA0050003	Rating Area 1	No Preference	33	248.01
38949PA0050003	Rating Area 1	No Preference	34	251.32
38949PA0050003	Rating Area 1	No Preference	35	252.98
38949PA0050003	Rating Area 1	No Preference	36	254.63
38949PA0050003	Rating Area 1	No Preference	37	256.29
38949PA0050003	Rating Area 1	No Preference	38	257.95
38949PA0050003	Rating Area 1	No Preference	39	261.26
38949PA0050003	Rating Area 1	No Preference	40	264.57
38949PA0050003	Rating Area 1	No Preference	41	269.54
38949PA0050003	Rating Area 1	No Preference	42	274.30
38949PA0050003	Rating Area 1	No Preference	43	280.93
38949PA0050003	Rating Area 1	No Preference	44	289.21
38949PA0050003	Rating Area 1	No Preference	45	298.94
38949PA0050003	Rating Area 1	No Preference	46	310.53
38949PA0050003	Rating Area 1	No Preference	47	323.57
38949PA0050003	Rating Area 1	No Preference	48	338.48
38949PA0050003	Rating Area 1	No Preference	49	353.18
38949PA0050003	Rating Area 1	No Preference	50	369.74
38949PA0050003	Rating Area 1	No Preference	51	386.09
38949PA0050003	Rating Area 1	No Preference	52	404.10
38949PA0050003	Rating Area 1	No Preference	53	422.32
38949PA0050003	Rating Area 1	No Preference	54	441.99
38949PA0050003	Rating Area 1	No Preference	55	461.65
38949PA0050003	Rating Area 1	No Preference	56	482.98
38949PA0050003	Rating Area 1	No Preference	57	504.51
38949PA0050003	Rating Area 1	No Preference	58	527.49
38949PA0050003	Rating Area 1	No Preference	59	538.87
38949PA0050003	Rating Area 1	No Preference	60	561.85
38949PA0050003	Rating Area 1	No Preference	61	581.73
38949PA0050003	Rating Area 1	No Preference	62	594.77
38949PA0050003	Rating Area 1	No Preference	63	611.12
38949PA0050003	Rating Area 1	No Preference	64 and over	621.06

	38949PA0050003	Rating Area 2	No Preference	0-14	166.88
	38949PA0050003	Rating Area 2	No Preference	15	181.72
	38949PA0050003	Rating Area 2	No Preference	16	187.39
	38949PA0050003	Rating Area 2	No Preference	17	193.06
	38949PA0050003	Rating Area 2	No Preference	18	199.17
	38949PA0050003	Rating Area 2	No Preference	19	205.28
	38949PA0050003	Rating Area 2	No Preference	20	211.61
	38949PA0050003	Rating Area 2	No Preference	21	218.15
	38949PA0050003	Rating Area 2	No Preference	22	218.15
	38949PA0050003	Rating Area 2	No Preference	23	218.15
	38949PA0050003	Rating Area 2	No Preference	24	218.15
	38949PA0050003	Rating Area 2	No Preference	25	219.02
	38949PA0050003	Rating Area 2	No Preference	26	223.39
	38949PA0050003	Rating Area 2	No Preference	27	228.62
	38949PA0050003	Rating Area 2	No Preference	28	237.13
	38949PA0050003	Rating Area 2	No Preference	29	244.11
	38949PA0050003	Rating Area 2	No Preference	30	247.60
	38949PA0050003	Rating Area 2	No Preference	31	252.84
	38949PA0050003	Rating Area 2	No Preference	32	258.07
	38949PA0050003	Rating Area 2	No Preference	33	261.34
	38949PA0050003	Rating Area 2	No Preference	34	264.83
	38949PA0050003	Rating Area 2	No Preference	35	266.58
	38949PA0050003	Rating Area 2	No Preference	36	268.32
	38949PA0050003	Rating Area 2	No Preference	37	270.07
	38949PA0050003	Rating Area 2	No Preference	38	271.81
	38949PA0050003	Rating Area 2	No Preference	39	275.31
	38949PA0050003	Rating Area 2	No Preference	40	278.80
	38949PA0050003	Rating Area 2	No Preference	41	284.03
	38949PA0050003	Rating Area 2	No Preference	42	289.05
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	38949PA0050003	Rating Area 2	No Preference	44	304.76
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	38949PA0050003	Rating Area 2	No Preference	46	327.23
	38949PA0050003	Rating Area 2	No Preference	47	340.97
	38949PA0050003	Rating Area 2	No Preference	48	356.68
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	38949PA0050003	Rating Area 2	No Preference	50	389.62
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	38949PA0050003	Rating Area 2	No Preference	52	425.83
	38949PA0050003	Rating Area 2	No Preference	53	445.03
	38949PA0050003	Rating Area 2	No Preference	54	465.75
	38949PA0050003	Rating Area 2	No Preference	55	486.47
	38949PA0050003	Rating Area 2	No Preference	56	508.94
	38949PA0050003	Rating Area 2	No Preference	57	531.63
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	38949PA0050003	Rating Area 2	No Preference	59	567.84
	38949PA0050003	Rating Area 2	No Preference	60	592.06
	38949PA0050003	Rating Area 2	No Preference	61	613.00
	38949PA0050003	Rating Area 2	No Preference	62	626.74
	38949PA0050003	Rating Area 2	No Preference	63	643.98
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	38949PA0050003	Rating Area 4	No Preference	62	626.74
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	38949PA0050003	Rating Area 5	No Preference	62	635.51
	38949PA0050003	Rating Area 5	No Preference	63	652.98
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	38949PA0050003	Rating Area 6	No Preference	21	234.12
	38949PA0050003	Rating Area 6	No Preference	22	234.12
	38949PA0050003	Rating Area 6	No Preference	23	234.12
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	38949PA0050003	Rating Area 6	No Preference	25	235.06
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	38949PA0050003	Rating Area 6	No Preference	27	245.36
	38949PA0050003	Rating Area 6	No Preference	28	254.49
	38949PA0050003	Rating Area 6	No Preference	29	261.98
	38949PA0050003	Rating Area 6	No Preference	30	265.73
	38949PA0050003	Rating Area 6	No Preference	31	271.35
	38949PA0050003	Rating Area 6	No Preference	32	276.96
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	38949PA0050003	Rating Area 6	No Preference	36	287.97
	38949PA0050003	Rating Area 6	No Preference	37	289.84
	38949PA0050003	Rating Area 6	No Preference	38	291.71
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	38949PA0050003	Rating Area 6	No Preference	40	299.21
	38949PA0050003	Rating Area 6	No Preference	41	304.82
	38949PA0050003	Rating Area 6	No Preference	42	310.21
	38949PA0050003	Rating Area 6	No Preference	43	317.70
	38949PA0050003	Rating Area 6	No Preference	44	327.07
	38949PA0050003	Rating Area 6	No Preference	45	338.07
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	38949PA0050003	Rating Area 6	No Preference	49	399.41
	38949PA0050003	Rating Area 6	No Preference	50	418.14
	38949PA0050003	Rating Area 6	No Preference	51	436.63
	38949PA0050003	Rating Area 6	No Preference	52	457.00
	38949PA0050003	Rating Area 6	No Preference	53	477.60
	38949PA0050003	Rating Area 6	No Preference	54	499.85
	38949PA0050003	Rating Area 6	No Preference	55	522.09
	38949PA0050003	Rating Area 6	No Preference	56	546.20
	38949PA0050003	Rating Area 6	No Preference	57	570.55
	38949PA0050003	Rating Area 6	No Preference	58	596.54
	38949PA0050003	Rating Area 6	No Preference	59	609.41
	38949PA0050003	Rating Area 6	No Preference	60	635.40
	38949PA0050003	Rating Area 6	No Preference	61	657.88
	38949PA0050003	Rating Area 6	No Preference	62	672.63
	38949PA0050003	Rating Area 6	No Preference	63	691.12
	38949PA0050003	Rating Area 6	No Preference	64 and over	702.36

2022 Rates Table Template v11.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.		
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.		
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.		
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.		
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.		
HIOS Issuer ID*		38949		
Rate Effective Date*		04/01/2022		
Rate Expiration Date*		06/30/2022		
Rating Method*		Age-Based Rates		
Plan ID*		Rating Area ID*	Tobacco*	Age*
Individual Rate*				
Required: Enter the 14-character Plan ID		Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate
Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan				
38949PA0050003		Rating Area 1	No Preference	0-14
38949PA0050003		Rating Area 1	No Preference	15
38949PA0050003		Rating Area 1	No Preference	16
38949PA0050003		Rating Area 1	No Preference	17
38949PA0050003		Rating Area 1	No Preference	18
38949PA0050003		Rating Area 1	No Preference	19
38949PA0050003		Rating Area 1	No Preference	20
38949PA0050003		Rating Area 1	No Preference	21
38949PA0050003		Rating Area 1	No Preference	22
38949PA0050003		Rating Area 1	No Preference	23
38949PA0050003		Rating Area 1	No Preference	24
38949PA0050003		Rating Area 1	No Preference	25
38949PA0050003		Rating Area 1	No Preference	26
38949PA0050003		Rating Area 1	No Preference	27
38949PA0050003		Rating Area 1	No Preference	28
38949PA0050003		Rating Area 1	No Preference	29
38949PA0050003		Rating Area 1	No Preference	30
38949PA0050003		Rating Area 1	No Preference	31
38949PA0050003		Rating Area 1	No Preference	32
38949PA0050003		Rating Area 1	No Preference	33
38949PA0050003		Rating Area 1	No Preference	34
38949PA0050003		Rating Area 1	No Preference	35
38949PA0050003		Rating Area 1	No Preference	36
38949PA0050003		Rating Area 1	No Preference	37
38949PA0050003		Rating Area 1	No Preference	38
38949PA0050003		Rating Area 1	No Preference	39
38949PA0050003		Rating Area 1	No Preference	40
38949PA0050003		Rating Area 1	No Preference	41
38949PA0050003		Rating Area 1	No Preference	42
38949PA0050003		Rating Area 1	No Preference	43
38949PA0050003		Rating Area 1	No Preference	44
38949PA0050003		Rating Area 1	No Preference	45
38949PA0050003		Rating Area 1	No Preference	46
38949PA0050003		Rating Area 1	No Preference	47
38949PA0050003		Rating Area 1	No Preference	48
38949PA0050003		Rating Area 1	No Preference	49
38949PA0050003		Rating Area 1	No Preference	50
38949PA0050003		Rating Area 1	No Preference	51
38949PA0050003		Rating Area 1	No Preference	52
38949PA0050003		Rating Area 1	No Preference	53
38949PA0050003		Rating Area 1	No Preference	54
38949PA0050003		Rating Area 1	No Preference	55
38949PA0050003		Rating Area 1	No Preference	56
38949PA0050003		Rating Area 1	No Preference	57
38949PA0050003		Rating Area 1	No Preference	58
38949PA0050003		Rating Area 1	No Preference	59
38949PA0050003		Rating Area 1	No Preference	60
38949PA0050003		Rating Area 1	No Preference	61
38949PA0050003		Rating Area 1	No Preference	62
38949PA0050003		Rating Area 1	No Preference	63
38949PA0050003		Rating Area 1	No Preference	64 and over

	38949PA0050003	Rating Area 2	No Preference	0-14	166.93
	38949PA0050003	Rating Area 2	No Preference	15	181.77
	38949PA0050003	Rating Area 2	No Preference	16	187.44
	38949PA0050003	Rating Area 2	No Preference	17	193.12
	38949PA0050003	Rating Area 2	No Preference	18	199.23
	38949PA0050003	Rating Area 2	No Preference	19	205.34
	38949PA0050003	Rating Area 2	No Preference	20	211.66
	38949PA0050003	Rating Area 2	No Preference	21	218.21
	38949PA0050003	Rating Area 2	No Preference	22	218.21
	38949PA0050003	Rating Area 2	No Preference	23	218.21
	38949PA0050003	Rating Area 2	No Preference	24	218.21
	38949PA0050003	Rating Area 2	No Preference	25	219.08
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	38949PA0050003	Rating Area 2	No Preference	27	228.68
	38949PA0050003	Rating Area 2	No Preference	28	237.19
	38949PA0050003	Rating Area 2	No Preference	29	244.18
	38949PA0050003	Rating Area 2	No Preference	30	247.67
	38949PA0050003	Rating Area 2	No Preference	31	252.91
	38949PA0050003	Rating Area 2	No Preference	32	258.14
	38949PA0050003	Rating Area 2	No Preference	33	261.42
	38949PA0050003	Rating Area 2	No Preference	34	264.91
	38949PA0050003	Rating Area 2	No Preference	35	266.65
	38949PA0050003	Rating Area 2	No Preference	36	268.40
	38949PA0050003	Rating Area 2	No Preference	37	270.14
	38949PA0050003	Rating Area 2	No Preference	38	271.89
	38949PA0050003	Rating Area 2	No Preference	39	275.38
	38949PA0050003	Rating Area 2	No Preference	40	278.87
	38949PA0050003	Rating Area 2	No Preference	41	284.11
	38949PA0050003	Rating Area 2	No Preference	42	289.13
	38949PA0050003	Rating Area 2	No Preference	43	296.11
	38949PA0050003	Rating Area 2	No Preference	44	304.84
	38949PA0050003	Rating Area 2	No Preference	45	315.10
	38949PA0050003	Rating Area 2	No Preference	46	327.32
	38949PA0050003	Rating Area 2	No Preference	47	341.06
	38949PA0050003	Rating Area 2	No Preference	48	356.77
	38949PA0050003	Rating Area 2	No Preference	49	372.27
	38949PA0050003	Rating Area 2	No Preference	50	389.72
	38949PA0050003	Rating Area 2	No Preference	51	406.96
	38949PA0050003	Rating Area 2	No Preference	52	425.95
	38949PA0050003	Rating Area 2	No Preference	53	445.15
	38949PA0050003	Rating Area 2	No Preference	54	465.88
	38949PA0050003	Rating Area 2	No Preference	55	486.61
	38949PA0050003	Rating Area 2	No Preference	56	509.08
	38949PA0050003	Rating Area 2	No Preference	57	531.78
	38949PA0050003	Rating Area 2	No Preference	58	556.00
	38949PA0050003	Rating Area 2	No Preference	59	568.00
	38949PA0050003	Rating Area 2	No Preference	60	592.22
	38949PA0050003	Rating Area 2	No Preference	61	613.17
	38949PA0050003	Rating Area 2	No Preference	62	626.92
	38949PA0050003	Rating Area 2	No Preference	63	644.16
	38949PA0050003	Rating Area 2	No Preference	64 and over	654.63

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	38949PA0050003	Rating Area 4	No Preference	15	181.77
	38949PA0050003	Rating Area 4	No Preference	16	187.44
	38949PA0050003	Rating Area 4	No Preference	17	193.12
	38949PA0050003	Rating Area 4	No Preference	18	199.23
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	38949PA0050003	Rating Area 4	No Preference	20	211.66
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	38949PA0050003	Rating Area 4	No Preference	24	218.21
	38949PA0050003	Rating Area 4	No Preference	25	219.08
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	38949PA0050003	Rating Area 4	No Preference	27	228.68
	38949PA0050003	Rating Area 4	No Preference	28	237.19
	38949PA0050003	Rating Area 4	No Preference	29	244.18
	38949PA0050003	Rating Area 4	No Preference	30	247.67
	38949PA0050003	Rating Area 4	No Preference	31	252.91
	38949PA0050003	Rating Area 4	No Preference	32	258.14
	38949PA0050003	Rating Area 4	No Preference	33	261.42
	38949PA0050003	Rating Area 4	No Preference	34	264.91
	38949PA0050003	Rating Area 4	No Preference	35	266.65
	38949PA0050003	Rating Area 4	No Preference	36	268.40
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	38949PA0050003	Rating Area 4	No Preference	38	271.89
	38949PA0050003	Rating Area 4	No Preference	39	275.38
	38949PA0050003	Rating Area 4	No Preference	40	278.87
	38949PA0050003	Rating Area 4	No Preference	41	284.11
	38949PA0050003	Rating Area 4	No Preference	42	289.13
	38949PA0050003	Rating Area 4	No Preference	43	296.11
	38949PA0050003	Rating Area 4	No Preference	44	304.84
	38949PA0050003	Rating Area 4	No Preference	45	315.10
	38949PA0050003	Rating Area 4	No Preference	46	327.32
	38949PA0050003	Rating Area 4	No Preference	47	341.06
	38949PA0050003	Rating Area 4	No Preference	48	356.77
	38949PA0050003	Rating Area 4	No Preference	49	372.27
	38949PA0050003	Rating Area 4	No Preference	50	389.72
	38949PA0050003	Rating Area 4	No Preference	51	406.96
	38949PA0050003	Rating Area 4	No Preference	52	425.95
	38949PA0050003	Rating Area 4	No Preference	53	445.15
	38949PA0050003	Rating Area 4	No Preference	54	465.88
	38949PA0050003	Rating Area 4	No Preference	55	486.61
	38949PA0050003	Rating Area 4	No Preference	56	509.08
	38949PA0050003	Rating Area 4	No Preference	57	531.78
	38949PA0050003	Rating Area 4	No Preference	58	556.00
	38949PA0050003	Rating Area 4	No Preference	59	568.00
	38949PA0050003	Rating Area 4	No Preference	60	592.22
	38949PA0050003	Rating Area 4	No Preference	61	613.17
	38949PA0050003	Rating Area 4	No Preference	62	626.92
	38949PA0050003	Rating Area 4	No Preference	63	644.16
	38949PA0050003	Rating Area 4	No Preference	64 and over	654.63

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	38949PA0050003	Rating Area 5	No Preference	23	221.27
	38949PA0050003	Rating Area 5	No Preference	24	221.27
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	38949PA0050003	Rating Area 5	No Preference	27	231.89
	38949PA0050003	Rating Area 5	No Preference	28	240.52
	38949PA0050003	Rating Area 5	No Preference	29	247.60
	38949PA0050003	Rating Area 5	No Preference	30	251.14
	38949PA0050003	Rating Area 5	No Preference	31	256.45
	38949PA0050003	Rating Area 5	No Preference	32	261.76
	38949PA0050003	Rating Area 5	No Preference	33	265.08
	38949PA0050003	Rating Area 5	No Preference	34	268.62
	38949PA0050003	Rating Area 5	No Preference	35	270.39
	38949PA0050003	Rating Area 5	No Preference	36	272.16
	38949PA0050003	Rating Area 5	No Preference	37	273.93
	38949PA0050003	Rating Area 5	No Preference	38	275.70
	38949PA0050003	Rating Area 5	No Preference	39	279.24
	38949PA0050003	Rating Area 5	No Preference	40	282.78
	38949PA0050003	Rating Area 5	No Preference	41	288.09
	38949PA0050003	Rating Area 5	No Preference	42	293.18
	38949PA0050003	Rating Area 5	No Preference	43	300.26
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	38949PA0050003	Rating Area 5	No Preference	45	319.51
	38949PA0050003	Rating Area 5	No Preference	46	331.91
	38949PA0050003	Rating Area 5	No Preference	47	345.85
	38949PA0050003	Rating Area 5	No Preference	48	361.78
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	38949PA0050003	Rating Area 5	No Preference	50	395.19
	38949PA0050003	Rating Area 5	No Preference	51	412.67
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	38949PA0050003	Rating Area 5	No Preference	53	451.39
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	38949PA0050003	Rating Area 5	No Preference	55	493.43
	38949PA0050003	Rating Area 5	No Preference	56	516.22
	38949PA0050003	Rating Area 5	No Preference	57	539.23
	38949PA0050003	Rating Area 5	No Preference	58	563.80
	38949PA0050003	Rating Area 5	No Preference	59	575.97
	38949PA0050003	Rating Area 5	No Preference	60	600.53
	38949PA0050003	Rating Area 5	No Preference	61	621.77
	38949PA0050003	Rating Area 5	No Preference	62	635.71
	38949PA0050003	Rating Area 5	No Preference	63	653.19
	38949PA0050003	Rating Area 5	No Preference	64 and over	663.81

	38949PA0050003	Rating Area 6	No Preference	0-14	179.16
	38949PA0050003	Rating Area 6	No Preference	15	195.08
	38949PA0050003	Rating Area 6	No Preference	16	201.17
	38949PA0050003	Rating Area 6	No Preference	17	207.26
	38949PA0050003	Rating Area 6	No Preference	18	213.82
	38949PA0050003	Rating Area 6	No Preference	19	220.37
	38949PA0050003	Rating Area 6	No Preference	20	227.16
	38949PA0050003	Rating Area 6	No Preference	21	234.19
	38949PA0050003	Rating Area 6	No Preference	22	234.19
	38949PA0050003	Rating Area 6	No Preference	23	234.19
	38949PA0050003	Rating Area 6	No Preference	24	234.19
	38949PA0050003	Rating Area 6	No Preference	25	235.13
	38949PA0050003	Rating Area 6	No Preference	26	239.81
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	38949PA0050003	Rating Area 6	No Preference	29	262.06
	38949PA0050003	Rating Area 6	No Preference	30	265.81
	38949PA0050003	Rating Area 6	No Preference	31	271.43
	38949PA0050003	Rating Area 6	No Preference	32	277.05
	38949PA0050003	Rating Area 6	No Preference	33	280.56
	38949PA0050003	Rating Area 6	No Preference	34	284.31
	38949PA0050003	Rating Area 6	No Preference	35	286.18
	38949PA0050003	Rating Area 6	No Preference	36	288.05
	38949PA0050003	Rating Area 6	No Preference	37	289.93
	38949PA0050003	Rating Area 6	No Preference	38	291.80
	38949PA0050003	Rating Area 6	No Preference	39	295.55
	38949PA0050003	Rating Area 6	No Preference	40	299.29
	38949PA0050003	Rating Area 6	No Preference	41	304.92
	38949PA0050003	Rating Area 6	No Preference	42	310.30
	38949PA0050003	Rating Area 6	No Preference	43	317.80
	38949PA0050003	Rating Area 6	No Preference	44	327.16
	38949PA0050003	Rating Area 6	No Preference	45	338.17
	38949PA0050003	Rating Area 6	No Preference	46	351.29
	38949PA0050003	Rating Area 6	No Preference	47	366.04
	38949PA0050003	Rating Area 6	No Preference	48	382.90
	38949PA0050003	Rating Area 6	No Preference	49	399.53
	38949PA0050003	Rating Area 6	No Preference	50	418.26
	38949PA0050003	Rating Area 6	No Preference	51	436.76
	38949PA0050003	Rating Area 6	No Preference	52	457.14
	38949PA0050003	Rating Area 6	No Preference	53	477.75
	38949PA0050003	Rating Area 6	No Preference	54	500.00
	38949PA0050003	Rating Area 6	No Preference	55	522.24
	38949PA0050003	Rating Area 6	No Preference	56	546.37
	38949PA0050003	Rating Area 6	No Preference	57	570.72
	38949PA0050003	Rating Area 6	No Preference	58	596.72
	38949PA0050003	Rating Area 6	No Preference	59	609.60
	38949PA0050003	Rating Area 6	No Preference	60	635.59
	38949PA0050003	Rating Area 6	No Preference	61	658.07
	38949PA0050003	Rating Area 6	No Preference	62	672.83
	38949PA0050003	Rating Area 6	No Preference	63	691.33
	38949PA0050003	Rating Area 6	No Preference	64 and over	702.57

2022 Rates Table Template v11.0	All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
	If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
	If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
	If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
	To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID*	38949			
Rate Effective Date*	07/01/2022			
Rate Expiration Date*	09/30/2022			
Rating Method*	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
38949PA0050003	Rating Area 1	No Preference	0-14	158.46
38949PA0050003	Rating Area 1	No Preference	15	172.55
38949PA0050003	Rating Area 1	No Preference	16	177.93
38949PA0050003	Rating Area 1	No Preference	17	183.32
38949PA0050003	Rating Area 1	No Preference	18	189.12
38949PA0050003	Rating Area 1	No Preference	19	194.92
38949PA0050003	Rating Area 1	No Preference	20	200.93
38949PA0050003	Rating Area 1	No Preference	21	207.14
38949PA0050003	Rating Area 1	No Preference	22	207.14
38949PA0050003	Rating Area 1	No Preference	23	207.14
38949PA0050003	Rating Area 1	No Preference	24	207.14
38949PA0050003	Rating Area 1	No Preference	25	207.97
38949PA0050003	Rating Area 1	No Preference	26	212.11
38949PA0050003	Rating Area 1	No Preference	27	217.08
38949PA0050003	Rating Area 1	No Preference	28	225.16
38949PA0050003	Rating Area 1	No Preference	29	231.79
38949PA0050003	Rating Area 1	No Preference	30	235.10
38949PA0050003	Rating Area 1	No Preference	31	240.08
38949PA0050003	Rating Area 1	No Preference	32	245.05
38949PA0050003	Rating Area 1	No Preference	33	248.15
38949PA0050003	Rating Area 1	No Preference	34	251.47
38949PA0050003	Rating Area 1	No Preference	35	253.13
38949PA0050003	Rating Area 1	No Preference	36	254.78
38949PA0050003	Rating Area 1	No Preference	37	256.44
38949PA0050003	Rating Area 1	No Preference	38	258.10
38949PA0050003	Rating Area 1	No Preference	39	261.41
38949PA0050003	Rating Area 1	No Preference	40	264.72
38949PA0050003	Rating Area 1	No Preference	41	269.70
38949PA0050003	Rating Area 1	No Preference	42	274.46
38949PA0050003	Rating Area 1	No Preference	43	281.09
38949PA0050003	Rating Area 1	No Preference	44	289.37
38949PA0050003	Rating Area 1	No Preference	45	299.11
38949PA0050003	Rating Area 1	No Preference	46	310.71
38949PA0050003	Rating Area 1	No Preference	47	323.76
38949PA0050003	Rating Area 1	No Preference	48	338.67
38949PA0050003	Rating Area 1	No Preference	49	353.38
38949PA0050003	Rating Area 1	No Preference	50	369.95
38949PA0050003	Rating Area 1	No Preference	51	386.32
38949PA0050003	Rating Area 1	No Preference	52	404.34
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38949PA0050003	Rating Area 1	No Preference	54	442.24
38949PA0050003	Rating Area 1	No Preference	55	461.92
38949PA0050003	Rating Area 1	No Preference	56	483.26
38949PA0050003	Rating Area 1	No Preference	57	504.80
38949PA0050003	Rating Area 1	No Preference	58	527.79
38949PA0050003	Rating Area 1	No Preference	59	539.19
38949PA0050003	Rating Area 1	No Preference	60	562.18
38949PA0050003	Rating Area 1	No Preference	61	582.06
38949PA0050003	Rating Area 1	No Preference	62	595.11
38949PA0050003	Rating Area 1	No Preference	63	611.48
38949PA0050003	Rating Area 1	No Preference	64 and over	621.42

	38949PA0050003	Rating Area 2	No Preference	0-14	166.98
	38949PA0050003	Rating Area 2	No Preference	15	181.82
	38949PA0050003	Rating Area 2	No Preference	16	187.49
	38949PA0050003	Rating Area 2	No Preference	17	193.17
	38949PA0050003	Rating Area 2	No Preference	18	199.28
	38949PA0050003	Rating Area 2	No Preference	19	205.39
	38949PA0050003	Rating Area 2	No Preference	20	211.72
	38949PA0050003	Rating Area 2	No Preference	21	218.27
	38949PA0050003	Rating Area 2	No Preference	22	218.27
	38949PA0050003	Rating Area 2	No Preference	23	218.27
	38949PA0050003	Rating Area 2	No Preference	24	218.27
	38949PA0050003	Rating Area 2	No Preference	25	219.14
	38949PA0050003	Rating Area 2	No Preference	26	223.51
	38949PA0050003	Rating Area 2	No Preference	27	228.75
	38949PA0050003	Rating Area 2	No Preference	28	237.26
	38949PA0050003	Rating Area 2	No Preference	29	244.24
	38949PA0050003	Rating Area 2	No Preference	30	247.74
	38949PA0050003	Rating Area 2	No Preference	31	252.97
	38949PA0050003	Rating Area 2	No Preference	32	258.21
	38949PA0050003	Rating Area 2	No Preference	33	261.49
	38949PA0050003	Rating Area 2	No Preference	34	264.98
	38949PA0050003	Rating Area 2	No Preference	35	266.73
	38949PA0050003	Rating Area 2	No Preference	36	268.47
	38949PA0050003	Rating Area 2	No Preference	37	270.22
	38949PA0050003	Rating Area 2	No Preference	38	271.96
	38949PA0050003	Rating Area 2	No Preference	39	275.46
	38949PA0050003	Rating Area 2	No Preference	40	278.95
	38949PA0050003	Rating Area 2	No Preference	41	284.19
	38949PA0050003	Rating Area 2	No Preference	42	289.21
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	38949PA0050003	Rating Area 2	No Preference	45	315.18
	38949PA0050003	Rating Area 2	No Preference	46	327.41
	38949PA0050003	Rating Area 2	No Preference	47	341.16
	38949PA0050003	Rating Area 2	No Preference	48	356.87
	38949PA0050003	Rating Area 2	No Preference	49	372.37
	38949PA0050003	Rating Area 2	No Preference	50	389.83
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	38949PA0050003	Rating Area 2	No Preference	52	426.06
	38949PA0050003	Rating Area 2	No Preference	53	445.27
	38949PA0050003	Rating Area 2	No Preference	54	466.01
	38949PA0050003	Rating Area 2	No Preference	55	486.74
	38949PA0050003	Rating Area 2	No Preference	56	509.22
	38949PA0050003	Rating Area 2	No Preference	57	531.92
	38949PA0050003	Rating Area 2	No Preference	58	556.15
	38949PA0050003	Rating Area 2	No Preference	59	568.16
	38949PA0050003	Rating Area 2	No Preference	60	592.38
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	38949PA0050003	Rating Area 2	No Preference	62	627.09
	38949PA0050003	Rating Area 2	No Preference	63	644.33
	38949PA0050003	Rating Area 2	No Preference	64 and over	654.81

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	38949PA0050003	Rating Area 4	No Preference	15	181.82
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	38949PA0050003	Rating Area 4	No Preference	17	193.17
	38949PA0050003	Rating Area 4	No Preference	18	199.28
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	38949PA0050003	Rating Area 4	No Preference	34	264.98
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	38949PA0050003	Rating Area 4	No Preference	51	407.07
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	38949PA0050003	Rating Area 5	No Preference	30	251.20
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	38949PA0050003	Rating Area 5	No Preference	33	265.14
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	38949PA0050003	Rating Area 5	No Preference	62	635.85
	38949PA0050003	Rating Area 5	No Preference	63	653.34
	38949PA0050003	Rating Area 5	No Preference	64 and over	663.96

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38949PA0050003	Rating Area 6	No Preference	16	201.22
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38949PA0050003	Rating Area 6	No Preference	58	596.87
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38949PA0050003	Rating Area 6	No Preference	60	635.75
38949PA0050003	Rating Area 6	No Preference	61	658.24
38949PA0050003	Rating Area 6	No Preference	62	673.00
38949PA0050003	Rating Area 6	No Preference	63	691.51
38949PA0050003	Rating Area 6	No Preference	64 and over	702.75

2022 Rates Table Template v11.0	All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
	If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
	If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
	If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
	To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID*	38949			
Rate Effective Date*	10/01/2022			
Rate Expiration Date*	12/31/2022			
Rating Method*	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
38949PA0050003	Rating Area 1	No Preference	0-14	158.52
38949PA0050003	Rating Area 1	No Preference	15	172.61
38949PA0050003	Rating Area 1	No Preference	16	177.99
38949PA0050003	Rating Area 1	No Preference	17	183.38
38949PA0050003	Rating Area 1	No Preference	18	189.18
38949PA0050003	Rating Area 1	No Preference	19	194.98
38949PA0050003	Rating Area 1	No Preference	20	200.99
38949PA0050003	Rating Area 1	No Preference	21	207.21
38949PA0050003	Rating Area 1	No Preference	22	207.21
38949PA0050003	Rating Area 1	No Preference	23	207.21
38949PA0050003	Rating Area 1	No Preference	24	207.21
38949PA0050003	Rating Area 1	No Preference	25	208.04
38949PA0050003	Rating Area 1	No Preference	26	212.18
38949PA0050003	Rating Area 1	No Preference	27	217.16
38949PA0050003	Rating Area 1	No Preference	28	225.24
38949PA0050003	Rating Area 1	No Preference	29	231.87
38949PA0050003	Rating Area 1	No Preference	30	235.18
38949PA0050003	Rating Area 1	No Preference	31	240.16
38949PA0050003	Rating Area 1	No Preference	32	245.13
38949PA0050003	Rating Area 1	No Preference	33	248.24
38949PA0050003	Rating Area 1	No Preference	34	251.55
38949PA0050003	Rating Area 1	No Preference	35	253.21
38949PA0050003	Rating Area 1	No Preference	36	254.87
38949PA0050003	Rating Area 1	No Preference	37	256.53
38949PA0050003	Rating Area 1	No Preference	38	258.18
38949PA0050003	Rating Area 1	No Preference	39	261.50
38949PA0050003	Rating Area 1	No Preference	40	264.81
38949PA0050003	Rating Area 1	No Preference	41	269.79
38949PA0050003	Rating Area 1	No Preference	42	274.55
38949PA0050003	Rating Area 1	No Preference	43	281.18
38949PA0050003	Rating Area 1	No Preference	44	289.47
38949PA0050003	Rating Area 1	No Preference	45	299.21
38949PA0050003	Rating Area 1	No Preference	46	310.82
38949PA0050003	Rating Area 1	No Preference	47	323.87
38949PA0050003	Rating Area 1	No Preference	48	338.79
38949PA0050003	Rating Area 1	No Preference	49	353.50
38949PA0050003	Rating Area 1	No Preference	50	370.08
38949PA0050003	Rating Area 1	No Preference	51	386.45
38949PA0050003	Rating Area 1	No Preference	52	404.47
38949PA0050003	Rating Area 1	No Preference	53	422.71
38949PA0050003	Rating Area 1	No Preference	54	442.39
38949PA0050003	Rating Area 1	No Preference	55	462.08
38949PA0050003	Rating Area 1	No Preference	56	483.42
38949PA0050003	Rating Area 1	No Preference	57	504.97
38949PA0050003	Rating Area 1	No Preference	58	527.97
38949PA0050003	Rating Area 1	No Preference	59	539.37
38949PA0050003	Rating Area 1	No Preference	60	562.37
38949PA0050003	Rating Area 1	No Preference	61	582.26
38949PA0050003	Rating Area 1	No Preference	62	595.31
38949PA0050003	Rating Area 1	No Preference	63	611.68
38949PA0050003	Rating Area 1	No Preference	64 and over	621.63

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	38949PA0050003	Rating Area 2	No Preference	16	187.56
	38949PA0050003	Rating Area 2	No Preference	17	193.24
	38949PA0050003	Rating Area 2	No Preference	18	199.35
	38949PA0050003	Rating Area 2	No Preference	19	205.47
	38949PA0050003	Rating Area 2	No Preference	20	211.80
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	38949PA0050003	Rating Area 2	No Preference	28	237.35
	38949PA0050003	Rating Area 2	No Preference	29	244.33
	38949PA0050003	Rating Area 2	No Preference	30	247.83
	38949PA0050003	Rating Area 2	No Preference	31	253.07
	38949PA0050003	Rating Area 2	No Preference	32	258.31
	38949PA0050003	Rating Area 2	No Preference	33	261.58
	38949PA0050003	Rating Area 2	No Preference	34	265.08
	38949PA0050003	Rating Area 2	No Preference	35	266.82
	38949PA0050003	Rating Area 2	No Preference	36	268.57
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	38949PA0050003	Rating Area 2	No Preference	38	272.06
	38949PA0050003	Rating Area 2	No Preference	39	275.56
	38949PA0050003	Rating Area 2	No Preference	40	279.05
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	38949PA0050003	Rating Area 2	No Preference	42	289.31
	38949PA0050003	Rating Area 2	No Preference	43	296.30
	38949PA0050003	Rating Area 2	No Preference	44	305.03
	38949PA0050003	Rating Area 2	No Preference	45	315.30
	38949PA0050003	Rating Area 2	No Preference	46	327.53
	38949PA0050003	Rating Area 2	No Preference	47	341.28
	38949PA0050003	Rating Area 2	No Preference	48	357.00
	38949PA0050003	Rating Area 2	No Preference	49	372.51
	38949PA0050003	Rating Area 2	No Preference	50	389.97
	38949PA0050003	Rating Area 2	No Preference	51	407.22
	38949PA0050003	Rating Area 2	No Preference	52	426.22
	38949PA0050003	Rating Area 2	No Preference	53	445.43
	38949PA0050003	Rating Area 2	No Preference	54	466.18
	38949PA0050003	Rating Area 2	No Preference	55	486.92
	38949PA0050003	Rating Area 2	No Preference	56	509.41
	38949PA0050003	Rating Area 2	No Preference	57	532.12
	38949PA0050003	Rating Area 2	No Preference	58	556.36
	38949PA0050003	Rating Area 2	No Preference	59	568.37
	38949PA0050003	Rating Area 2	No Preference	60	592.60
	38949PA0050003	Rating Area 2	No Preference	61	613.56
	38949PA0050003	Rating Area 2	No Preference	62	627.32
	38949PA0050003	Rating Area 2	No Preference	63	644.57
	38949PA0050003	Rating Area 2	No Preference	64 and over	655.05

	38949PA0050003	Rating Area 4	No Preference	0-14	167.04
	38949PA0050003	Rating Area 4	No Preference	15	181.89
	38949PA0050003	Rating Area 4	No Preference	16	187.56
	38949PA0050003	Rating Area 4	No Preference	17	193.24
	38949PA0050003	Rating Area 4	No Preference	18	199.35
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	38949PA0050003	Rating Area 5	No Preference	42	293.36
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	38949PA0050003	Rating Area 5	No Preference	44	309.30
	38949PA0050003	Rating Area 5	No Preference	45	319.70
	38949PA0050003	Rating Area 5	No Preference	46	332.10
	38949PA0050003	Rating Area 5	No Preference	47	346.05
	38949PA0050003	Rating Area 5	No Preference	48	361.99
	38949PA0050003	Rating Area 5	No Preference	49	377.71
	38949PA0050003	Rating Area 5	No Preference	50	395.42
	38949PA0050003	Rating Area 5	No Preference	51	412.91
	38949PA0050003	Rating Area 5	No Preference	52	432.17
	38949PA0050003	Rating Area 5	No Preference	53	451.66
	38949PA0050003	Rating Area 5	No Preference	54	472.69
	38949PA0050003	Rating Area 5	No Preference	55	493.72
	38949PA0050003	Rating Area 5	No Preference	56	516.53
	38949PA0050003	Rating Area 5	No Preference	57	539.55
	38949PA0050003	Rating Area 5	No Preference	58	564.13
	38949PA0050003	Rating Area 5	No Preference	59	576.30
	38949PA0050003	Rating Area 5	No Preference	60	600.88
	38949PA0050003	Rating Area 5	No Preference	61	622.13
	38949PA0050003	Rating Area 5	No Preference	62	636.08
	38949PA0050003	Rating Area 5	No Preference	63	653.57
	38949PA0050003	Rating Area 5	No Preference	64 and over	664.20

	38949PA0050003	Rating Area 6	No Preference	0-14	179.27
	38949PA0050003	Rating Area 6	No Preference	15	195.21
	38949PA0050003	Rating Area 6	No Preference	16	201.30
	38949PA0050003	Rating Area 6	No Preference	17	207.39
	38949PA0050003	Rating Area 6	No Preference	18	213.95
	38949PA0050003	Rating Area 6	No Preference	19	220.51
	38949PA0050003	Rating Area 6	No Preference	20	227.31
	38949PA0050003	Rating Area 6	No Preference	21	234.34
	38949PA0050003	Rating Area 6	No Preference	22	234.34
	38949PA0050003	Rating Area 6	No Preference	23	234.34
	38949PA0050003	Rating Area 6	No Preference	24	234.34
	38949PA0050003	Rating Area 6	No Preference	25	235.28
	38949PA0050003	Rating Area 6	No Preference	26	239.96
	38949PA0050003	Rating Area 6	No Preference	27	245.59
	38949PA0050003	Rating Area 6	No Preference	28	254.73
	38949PA0050003	Rating Area 6	No Preference	29	262.23
	38949PA0050003	Rating Area 6	No Preference	30	265.98
	38949PA0050003	Rating Area 6	No Preference	31	271.60
	38949PA0050003	Rating Area 6	No Preference	32	277.22
	38949PA0050003	Rating Area 6	No Preference	33	280.74
	38949PA0050003	Rating Area 6	No Preference	34	284.49
	38949PA0050003	Rating Area 6	No Preference	35	286.36
	38949PA0050003	Rating Area 6	No Preference	36	288.24
	38949PA0050003	Rating Area 6	No Preference	37	290.11
	38949PA0050003	Rating Area 6	No Preference	38	291.99
	38949PA0050003	Rating Area 6	No Preference	39	295.74
	38949PA0050003	Rating Area 6	No Preference	40	299.49
	38949PA0050003	Rating Area 6	No Preference	41	305.11
	38949PA0050003	Rating Area 6	No Preference	42	310.50
	38949PA0050003	Rating Area 6	No Preference	43	318.00
	38949PA0050003	Rating Area 6	No Preference	44	327.37
	38949PA0050003	Rating Area 6	No Preference	45	338.39
	38949PA0050003	Rating Area 6	No Preference	46	351.51
	38949PA0050003	Rating Area 6	No Preference	47	366.27
	38949PA0050003	Rating Area 6	No Preference	48	383.15
	38949PA0050003	Rating Area 6	No Preference	49	399.78
	38949PA0050003	Rating Area 6	No Preference	50	418.53
	38949PA0050003	Rating Area 6	No Preference	51	437.04
	38949PA0050003	Rating Area 6	No Preference	52	457.43
	38949PA0050003	Rating Area 6	No Preference	53	478.05
	38949PA0050003	Rating Area 6	No Preference	54	500.32
	38949PA0050003	Rating Area 6	No Preference	55	522.58
	38949PA0050003	Rating Area 6	No Preference	56	546.72
	38949PA0050003	Rating Area 6	No Preference	57	571.09
	38949PA0050003	Rating Area 6	No Preference	58	597.10
	38949PA0050003	Rating Area 6	No Preference	59	609.99
	38949PA0050003	Rating Area 6	No Preference	60	636.00
	38949PA0050003	Rating Area 6	No Preference	61	658.50
	38949PA0050003	Rating Area 6	No Preference	62	673.26
	38949PA0050003	Rating Area 6	No Preference	63	691.77
	38949PA0050003	Rating Area 6	No Preference	64 and over	703.02

Highmark Choice Company (HCC)
2022 Small Group Rate Filing
Trend Exhibit
Central, PA Region

Incurring Month	Members	Normalized Allowed PMPM	12 Month Moving Average PMPM	Annual Trend
Jan-16	17,720	\$ 417.27		
Feb-16	17,782	\$ 486.31		
Mar-16	17,481	\$ 490.28		
Apr-16	16,940	\$ 462.43		
May-16	16,715	\$ 437.71		
Jun-16	16,674	\$ 451.21		
Jul-16	16,417	\$ 438.77		
Aug-16	16,243	\$ 475.88		
Sep-16	16,199	\$ 480.13		
Oct-16	16,025	\$ 456.12		
Nov-16	15,945	\$ 479.71		
Dec-16	13,952	\$ 465.17	\$ 461.62	
Jan-17	14,078	\$ 503.78	\$ 468.72	
Feb-17	14,002	\$ 466.80	\$ 466.94	
Mar-17	13,884	\$ 516.18	\$ 468.41	
Apr-17	13,750	\$ 473.31	\$ 469.33	
May-17	13,537	\$ 545.90	\$ 477.99	
Jun-17	13,524	\$ 583.55	\$ 488.54	
Jul-17	13,355	\$ 499.40	\$ 494.06	
Aug-17	13,379	\$ 500.55	\$ 496.28	
Sep-17	13,235	\$ 500.36	\$ 498.16	
Oct-17	13,211	\$ 565.03	\$ 507.54	
Nov-17	13,196	\$ 512.72	\$ 510.68	
Dec-17	12,923	\$ 503.93	\$ 514.06	11.4%
Jan-18	13,246	\$ 812.54	\$ 539.48	15.1%
Feb-18	13,317	\$ 475.22	\$ 540.49	15.8%
Mar-18	13,304	\$ 589.41	\$ 546.67	16.7%
Apr-18	13,235	\$ 546.72	\$ 553.00	17.8%
May-18	13,562	\$ 518.52	\$ 550.67	15.2%
Jun-18	13,604	\$ 564.24	\$ 549.04	12.4%
Jul-18	13,599	\$ 536.65	\$ 552.13	11.8%
Aug-18	13,622	\$ 583.76	\$ 559.13	12.7%
Sep-18	13,541	\$ 499.06	\$ 558.91	12.2%
Oct-18	13,754	\$ 552.31	\$ 557.85	9.9%
Nov-18	13,712	\$ 560.52	\$ 561.76	10.0%
Dec-18	13,819	\$ 508.33	\$ 561.82	9.3%
Jan-19	12,487	\$ 571.89	\$ 542.04	0.5%
Feb-19	12,238	\$ 565.61	\$ 549.38	1.6%
Mar-19	12,081	\$ 501.55	\$ 542.41	-0.8%
Apr-19	11,682	\$ 583.48	\$ 545.09	-1.4%
May-19	11,425	\$ 564.65	\$ 548.84	-0.3%
Jun-19	11,268	\$ 537.30	\$ 546.63	-0.4%
Jul-19	10,942	\$ 505.07	\$ 544.51	-1.4%
Aug-19	10,854	\$ 523.48	\$ 539.35	-3.5%
Sep-19	10,653	\$ 488.86	\$ 539.40	-3.5%
Oct-19	10,451	\$ 548.49	\$ 538.82	-3.4%
Nov-19	10,402	\$ 548.36	\$ 537.38	-4.3%
Dec-19	9,171	\$ 570.34	\$ 542.65	-3.4%
Jan-20	9,161	\$ 569.95	\$ 541.77	-0.1%
Feb-20	9,119	\$ 492.40	\$ 535.93	-2.4%
Mar-20	9,274	\$ 575.56	\$ 542.23	0.0%
Apr-20	9,155	\$ 550.47	\$ 538.89	-1.1%
May-20	9,081	\$ 568.43	\$ 538.67	-1.9%
Jun-20	8,953	\$ 515.69	\$ 537.05	-1.8%
Jul-20	8,883	\$ 767.39	\$ 557.85	2.5%
Aug-20	8,850	\$ 521.78	\$ 558.33	3.5%
Sep-20	8,917	\$ 633.07	\$ 570.95	5.8%
Oct-20	8,866	\$ 571.97	\$ 573.17	6.4%
Nov-20	8,871	\$ 570.99	\$ 575.38	7.1%
Dec-20	8,789	\$ 573.63	\$ 575.66	6.1%
Jan-21	8,956	\$ 529.26	\$ 572.29	5.6%
Feb-21	8,956	\$ 566.38	\$ 578.57	8.0%
Mar-21	8,956	\$ 665.09	\$ 586.06	8.1%
Apr-21	8,956	\$ 635.68	\$ 593.26	10.1%
May-21	8,956	\$ 590.03	\$ 595.10	10.5%
Jun-21	8,956	\$ 619.57	\$ 603.80	12.4%
Jul-21	8,956	\$ 630.47	\$ 592.45	6.2%
Aug-21	8,956	\$ 608.03	\$ 599.59	7.4%
Sep-21	8,956	\$ 628.78	\$ 599.24	5.0%
Oct-21	8,956	\$ 618.81	\$ 603.13	5.2%
Nov-21	8,956	\$ 652.41	\$ 609.90	6.0%
Dec-21	8,956	\$ 627.08	\$ 614.30	6.7%
Jan-22	8,956	\$ 656.81	\$ 624.93	9.2%
Feb-22	8,956	\$ 610.42	\$ 628.60	8.6%
Mar-22	8,956	\$ 707.10	\$ 632.10	7.9%
Apr-22	8,956	\$ 656.79	\$ 633.86	6.8%
May-22	8,956	\$ 649.74	\$ 638.83	7.3%
Jun-22	8,956	\$ 659.45	\$ 642.16	6.4%
Jul-22	8,956	\$ 649.53	\$ 643.75	8.7%
Aug-22	8,956	\$ 668.87	\$ 648.82	8.2%
Sep-22	8,956	\$ 668.17	\$ 652.10	8.8%
Oct-22	8,956	\$ 665.77	\$ 656.01	8.8%
Nov-22	8,956	\$ 696.72	\$ 659.70	8.2%
Dec-22	8,956	\$ 665.31	\$ 662.89	7.9%

Proposed Annual Trend (Cost & Utilization) **7.3%**

Highmark
Small Group ACA
BEP COVID-19 Adjustment Factor Development

Please note:

- The BEP COVID-19 Adjustment is calculated using experience for the entire PA Small Group Market
- The BEP COVID-19 Adjustment is on an allowed basis
- The BEP COVID-19 Adjustment is for medical claims only; COVID-19 impact to drug claims is negligible
- Total BEP COVID-19 Adjustment uses CY 2019 medical/drug distribution to blend adjustment factors

Normalized Allowed Medical Claims PMPM - (CY 2019)	\$	347.33
Range of Historical Medical Trends - (2017 - 2019)		5.2% - 14.5%
Anticipated Medical Trend - Entire PA Small Group Market		7.2%
Anticipated Normalized Allowed Medical Claims PMPM - (CY 2020)	\$	372.21
Actual Normalized Allowed Medical Claims PMPM - (CY 2020)	\$	335.98
Medical BEP Adjustment Factor - (CY 2020)		0.9027
Drug BEP Adjustment Factor - (CY 2020)		1.0000
Total BEP Adjustment Factor - (CY 2020)		0.9261
Total BEP Adjustment Factor Reciprocal - (CY 2020)		1.0798

In this exhibit, Allowed Medical Claims PMPMs exclude high dollar claims and are normalized only for work days and demographics.

Highmark
2022 Small Group Rate Filing
COVID Projection Support

1. Covid Treatment:

Admits per 1000 per Month	0.003
Cost per Admit	\$ 26,014.13
PMPM Cost	\$ 0.07

2. Covid Testing:

Tests per 1000 per Month	8.935
Cost per Test	\$ 112.87
PMPM Cost	\$ 1.01

3. Covid Vaccine:

Percent of Population Receiving Vaccine per Year	42.8%
Vaccine Cost	\$ 75.00
Administrative Cost	\$ 40.00
Expected Annual Dose	0.5
Cost per Vaccine	\$ 57.50
PMPM Cost	\$ 2.05

4. Covid Induced Morbidity Change:

		% of Claims
ETG Category	Sub-Category	Small Group
Cardiology	Total	9.3%
Orthopedics & Rheumatology	Joint Degeneration	6.1%
Endocrinology	Diabetes	4.5%
Psychiatry	Mood disorder, depressed	1.6%
Chemical Dependency	Alcohol Treatment	0.5%
Total Impacted Claims		22.0%

Minimum expected % claims increase in these categories	1%
Minimum % Impact to Claims	0.2%

Maximum expected % claims increase in these categories	5%
Maximum % Impact to Claims	1.1%

COVID Induced Morbidity Change:	0.5%
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Derivation of Geographic Factors (Table 13)

WPA:									

Highmark Choice Company (HCC)
2022 Small Group Rate Filing
Derivation of Change in Morbidity, Demographics, Benefits, and Average Network Factor - Manual Rate Factors

Average Rating Factors by Cohort:	Age Factor	Area Factor	Network Factor	Induced Demand Factor (Based on Metal Levels)
Calendar Year 2020 Average	1.5139	1.0010	0.9594	1.0941
Calendar Year 2020 Average for Members Active at end of BEP	1.5202	1.0011	0.9599	1.0950
2022 Projected	1.5202	1.0010	0.7000	1.0000

Support for Single Risk Pool Adjustment Factors:	Claims Paid through Claims System	Rx Rebates, Capitation, Settlements, and Other Claims Paid Outside of System	Total
Calendar Year 2020 Allowed Claims PMPM	\$ 531.57	\$ (22.94)	\$ 508.63
Calendar Year 2020 Allowed Claims PMPM for Members Active at end of BEP	\$ 541.80	\$ (23.95)	\$ 517.85
BEP Adjustment (for COVID)	7.98%	0.00%	
Adj Calendar Year 2020 Allowed Claims PMPM	\$ 573.97	\$ (22.94)	\$ 551.03
Adj Calendar Year 2020 Allowed Claims PMPM for Members Active at end of BEP	\$ 585.02	\$ (23.95)	\$ 561.07
Trend	6.97%	Projections Done Independently	
Projected 2022 Allowed Claims PMPM for BEP Members	\$ 656.79	\$ (48.31)	\$ 608.49
Projected 2022 Allowed Claims PMPM for Projected Membership	\$ 669.44	\$ (48.31)	\$ 621.14
Change in Morbidity (Excluding Projected COVID Impacts)	1.0137	1.0000	1.0147
Change in Age	1.0042	1.0000	1.0045
Change in Area	1.0000	1.0000	1.0000
Change in Network	0.7296	1.0000	0.7085
Change in Benefit Richness	0.9140	1.0000	0.9046
Change in Morbidity - Projected COVID Impacts	1.0152	1.0000	1.0170

Development of Single Risk Pool Adjustment Factors:	
Change in Morbidity - All Other	1.0320
Change in Demographics	1.0046
Change in Network	0.7085

Table 3 Induced Demand Trend	-4.89%
------------------------------	--------

COVID Projection Support:	Incurred PMPM	%
Treatment Costs	\$0.07	
COVID Testing	\$1.01	
COVID Vaccine	\$2.05	
Additional Morbidity		0.50%
Paid to Allowed Factor:	0.688	

Highmark Choice Company (HCC)
2022 Small Group Rate Filing
Paid-to-Allowed Ratio in the Projection Period

Sum of Projected Claims by Plan	\$	48,519	\$	33,397
Calculated Paid to Allowed Ratio				68.83%
URRT Worksheet I Value				68.83%

Plan ID	Metal Level	Projected Member Months	Projected Allowed Claims URRT Wkst II	Projected Paid Claims URRT Wkst II
38949PA0050003	Bronze	120	\$ 48,519	\$ 33,397

Highmark Choice Company (HCC)
2022 Small Group Rate Filing
Induced Utilization Exhibit

Plan ID (1)	Metal Level (2)	Projected Membership (3)	Projected Allowed Claims (4)	Projected Paid Claims (5)	Paid-To- Allowed Factor (6)	AV & Cost Sharing Factor (7)	Network Factor (8)	(7)/(6) (9)
38949PA0050003	Bronze	10	48,519	33,397	0.6883	0.6883	0.7000	1.0000
								1.0000

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Highmark Choice Company (HCC)
2022 Small Group Rate Filing
Derivation of the Age, Geographic, and Tobacco Calibration Factors

Age Factor

Type	Average Age Factor	% of Members	Allowed
Current ACA Book - February 2021	1.520	0.0%	\$517.85
New Business (Assumed to be same as current block)	1.520	100.0%	\$517.85
Overall	1.520	100.0%	

Child Capping Adjustment1.004

Average Age Factor1.515

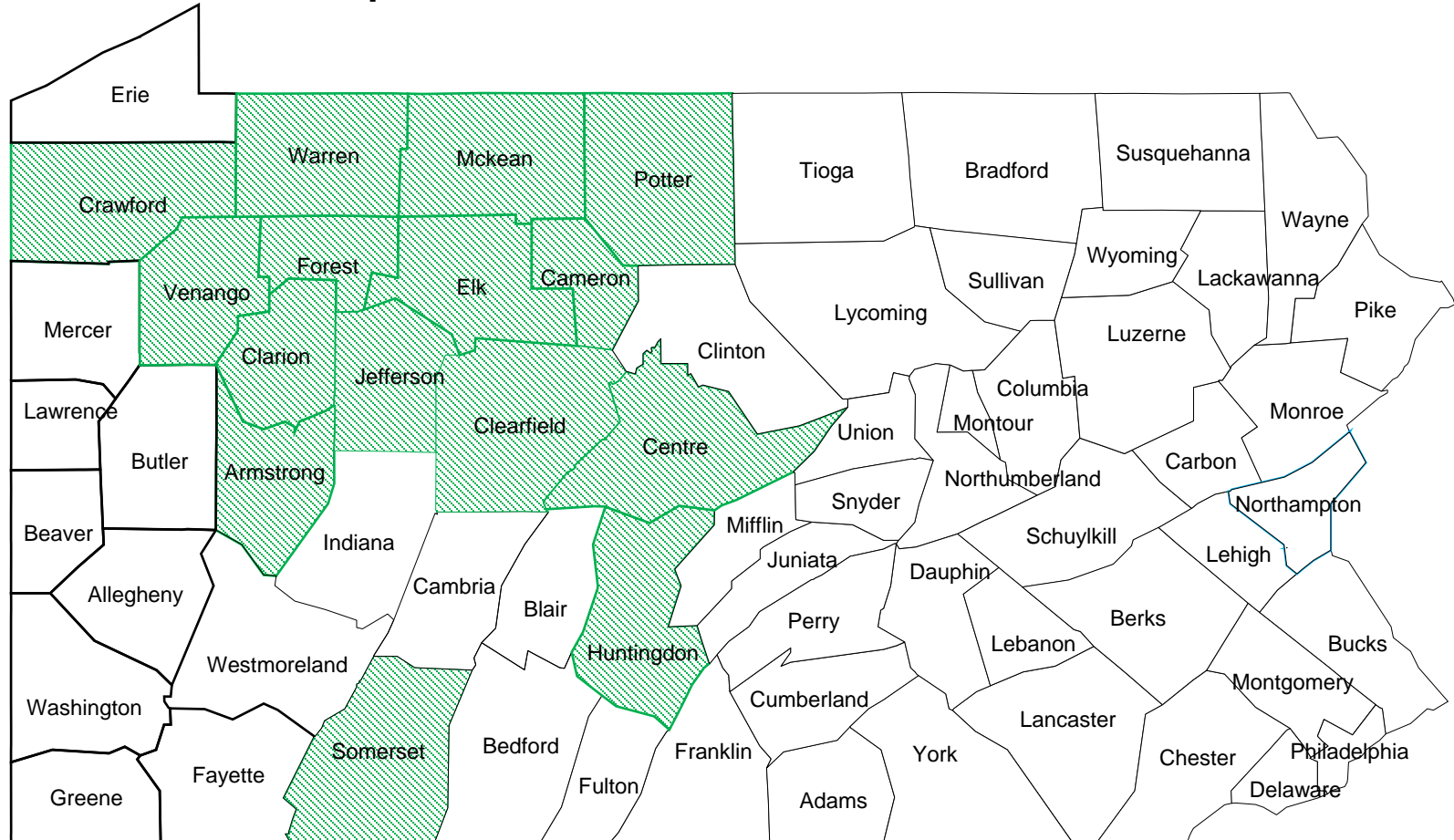
Geographic Factor1.001

Tobacco Surcharge (Not Applicable)1.000


2021 Service Area


Issuer: Highmark Choice Company

Market: Small Group



Key *(modify as needed)*

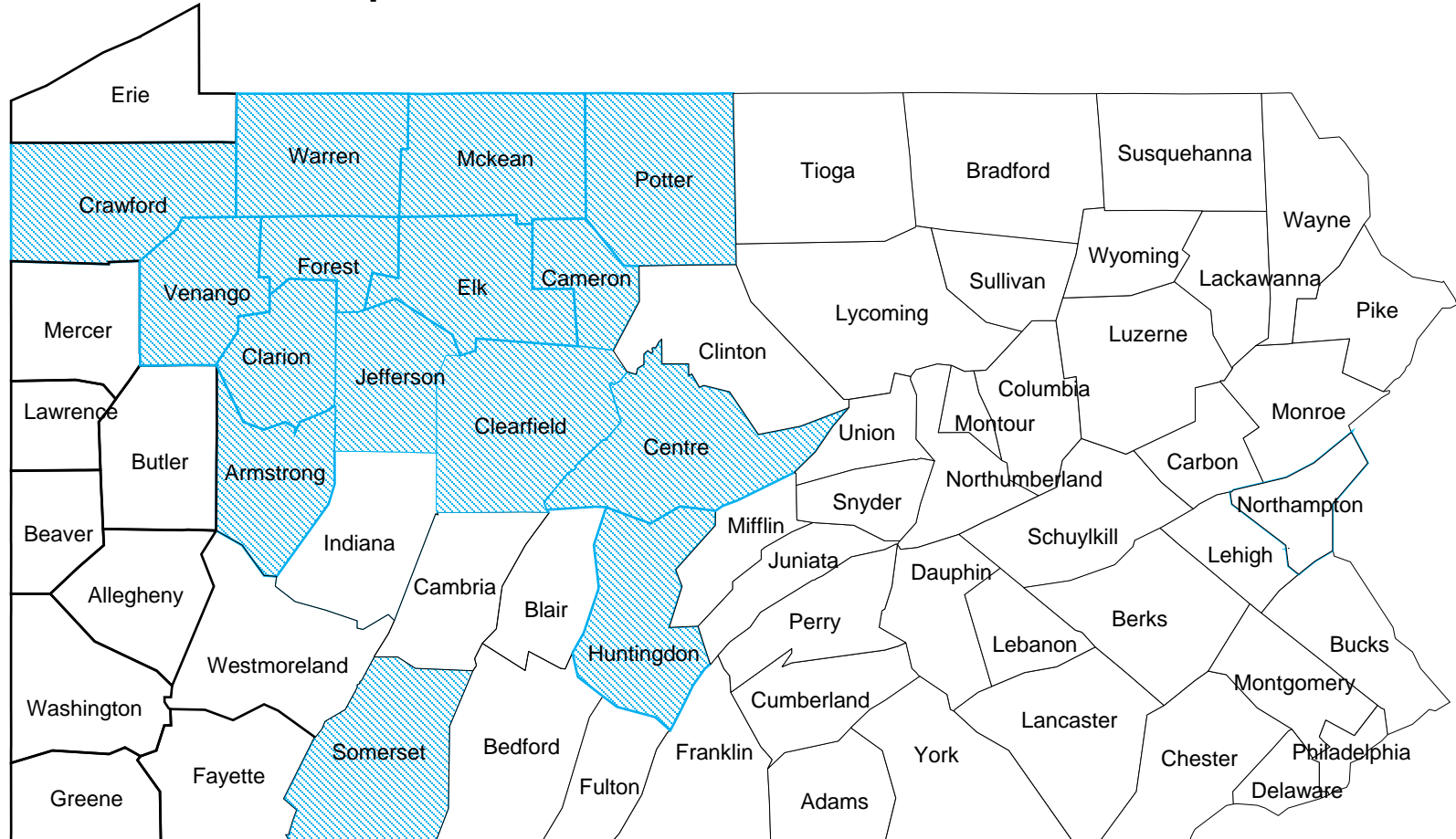
 : 2021 on-exchange service area

 : 2021 off-exchange only service area


2022 Service Area


Issuer: Highmark Choice Company

Market: Small Group



Key *(modify as needed)*

 : 2022 on-exchange service area

 : 2022 off-exchange only service area



June 22, 2021

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

Re: Highmark Choice Company (HCC) 2022 ACA Rate Filing (Small Group Market)
HCC Filing # 1A-SG-HCC-2021 (SERFF Filing # HGHM-132831326)

Dear Ms. Gray:

This letter accompanies the Company's response to the Department's data call request from June 11, 2021 to identify any changes made to the original Highmark Choice Company (HCC) (NAIC # 95048; HIOS Issuer ID # 38949) Small Group Market Off Exchange ACA rate filing and the supporting rate development for policies with effective dates on or after **January 1, 2022**. In response to the Department's data call, the Company proposes no revisions to its original 2022 Small Group ACA Filing.

Should you have any questions regarding this Filing or these revisions, please feel free to contact me at (412) 544-3845 or via e-mail at: Cory.Orzak@highmark.com.

Sincerely,

A handwritten signature in dark ink, appearing to read "Cory Orzak", written over a light blue horizontal line.

Cory Orzak, FSA, MAAA
Vice President, Actuarial Services
Highmark Inc.

Highmark Choice Company's Response to Objection Letter Dated 06/11/2021

Product Name: HCC Small Group 2022 ACA Rate Filing

RE: Highmark Choice Company, Small Group HMO, ACA Filing for PY2022

Pennsylvania Insurance Department ID #: HGHM-132831326

Objection Letter Status: Data Request Sent

Objection Letter Date: 06/11/2021

Respond By Date: 06/22/2021

Response Date: 06/22/2021

Below please find our responses to the Highmark Choice Company ("HCC", "Company") Small Group 2022 ACA Rate Filing Objection Letter dated 06/11/2021. For convenience, the questions have been reproduced below, with our responses immediately following each question.

A supplemental exhibits file has been submitted along with this response. Please see the file named "PID Response Exhibits HCC 06222021.xlsx," which contains additional exhibits and supplemental detail, as referenced in the below responses.

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

Response:

The Company confirms that they thoroughly test the rates of each rate filing submission to ensure that the rates in Table 11 of the Actuarial Memorandum Exhibits, PA Plan Design Summary and Rate Tables, Federal Rates Template, and binder are identical.

2. Please provide an exhibit that quantitatively shows a comparison of the actual to projected claim cost PMPMs for calendar years 2017-2020, as applicable.

Response:

The requested exhibit has been included in the "PID Response Exhibits HCC 06222021.xlsx" file included in this response in a worksheet labeled "Q#2".

3. The requested administrative expense figure for this filing was above average among PA small group issuers. Please provide a short list of bullet points that explain the main issues causing this higher-than-average administrative expense request.

Response:

As discussed in the Pennsylvania Actuarial Memorandum, the administrative expense charges are determined from corporate allocation methods that assign administration charges based upon measurable statistics (such as claims worked, inquiries worked, contracts, and members). This allocation method produces a projected PMPM administrative load that is applied to regional business within the corporate family of Highmark companies.

The reasons that the administrative expense figure appears above average is as follows:

- The PMPM Retention shown in Table 6 is in line with other Small Group issuers within Highmark's corporate family. HCC's PMPM retention amount is \$56.33, while other Western PA regional Highmark corporate entities show retention PMPM amounts in the range of \$56.40 to \$62.64.
- The Projected Required Revenue PMPM in Table 6 is much lower than other issuers within Highmark's corporate family. HCC's Projected Required Revenue PMPM is \$328.73, while other Western regional Highmark corporate entities show Projected Required Revenue PMPM amounts in the range of \$561.06 to \$658.47.
- Thus the resulting administrative expense percentage as shown in Table 6 appears high when compared to the other regional entities.

4. Please provide an exhibit which demonstrates that the criteria for the expanded bronze plan(s) have been met.

Response:

The Company has filed the following expanded bronze plans. The appropriate requirement for using the expanded bronze plan *de minimus* range is listed after the plan.

HIOS ID	Plan Name	Criteria for Qualifying as Expanded Bronze Plan
38949PA0050003	Keystone HMO \$7000	Covers and pays for at least one major service before the deductible: PCP

Highmark Choice Company (HCC)

2022 Small Group Rate Filing

Question #2

Year	Projected Claims*	Actual Claims**
2017	\$582.27	\$197.89
2018	\$557.21	n/a
2019	\$318.32	\$266.72
2020	\$266.11	\$281.39

*Projected Claims are the incurred claims from URRT Worksheet 1 (prior to 2020) or URRT Worksheet 2 (2020) prior to risk reimbursement programs

**Actual Claims are calculated as ultimate Incurred Claims + Prescription Drug Rebates in Table 4 from the 2022 filing

Note that since the Projected Claims reflect policy year expectations for Q1 effective dates, while the Actual Claims are calendar year, variations are expected. In addition, actual results, including differences in demographic mix and population risk profiles, will have differed from expectations.



July 13, 2021

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

Re: Highmark Choice Company (HCC) 2022 ACA Rate Filing (Small Group Market)
HCC Filing # 1A-SG-HCC-2021 (SERFF Filing # HGHM-132831326)

Dear Ms. Gray:

This letter accompanies the Company's response to the Department's data call request from July 6, 2021 to identify any changes made to the original Highmark Choice Company (HCC) (NAIC # 95048; HIOS Issuer ID # 38949) Small Group Market Off Exchange ACA rate filing and the supporting rate development for policies with effective dates on or after **January 1, 2022**. In response to the Department's data call, the Company proposes no revisions to its original 2022 Small Group ACA Filing.

Should you have any questions regarding this Filing or these revisions, please feel free to contact me at (412) 544-3845 or via e-mail at: Cory.Orzak@highmark.com.

Sincerely,

A handwritten signature in dark ink, appearing to read "Cory Orzak", written in a cursive style.

Cory Orzak, FSA, MAAA
Vice President, Actuarial Services
Highmark Inc.

Highmark Choice Company's Response to Objection Letter Dated 07/06/2021

Product Name: HCC Small Group 2022 ACA Rate Filing

RE: Highmark Choice Company, Small Group HMO, ACA Filing for PY2022

Pennsylvania Insurance Department ID #: HGHM-132831326

Objection Letter Status: Data Request Sent

Objection Letter Date: 07/06/2021

Respond By Date: 07/13/2021

Response Date: 07/13/2021

Below please find our responses to the Highmark Choice Company ("HCC", "Company") Small Group 2022 ACA Rate Filing Objection Letter dated 07/06/2021. For convenience, the questions have been reproduced below, with our responses immediately following each question.

A supplemental exhibits file has been submitted along with this response. Please see the file named "PID Response Exhibits HCC 07132021.xlsx," which contains additional exhibits and supplemental detail, as referenced in the below responses.

1. Please provide an exhibit showing the actual experience for calendar years 2016-2020 and the projection experience for 2021 and 2022 for the following categories: Member Months, Total Administrative Expenses, Total Incurred Claims, Total Premium, Total Actual Paid Taxes and Fees, Profit, Total Underwriting Gain/Loss and Underwriting Gain/Loss PMPM

Response:

Please see the exhibit in the "PID-1" tab in the file "PID Response Exhibits HCC 07132021.xlsx" that shows these data and projections.

2. Does this company have any transitional membership? If so, has there recently been a significant drop in transitional membership? Do you anticipate a drop in 2022?

Response:

Yes, this company has approximately 10 transitional members. Historically, the transitional membership has been stable. The company's 2022 projections are heavily dependent on whether transitional coverage is extended again in early 2022.

3. If the projected risk adjustment transfer amount in Table 5 will be modified, due to the final CMS transfer amount published on June 30th, please provide narrative and detailed supporting data to justify the proposed changes.

Response:

As discussed in the Pennsylvania Actuarial Memorandum, the Company used the results provided by the PA Insurance Department in its calculation of 2020 risk adjustment transfer amounts using the final RATEE files as the basis for its projected risk adjustment transfer assumptions. Since these results were identical to the results published by CMS on June 30th, 2021, in the Summary Report on Permanent Risk Adjustment Transfers for the 2020 Benefit Year, the Company does not intend to change the projected risk adjustment transfer assumptions underlying this rate filing.

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

Response:

The Company confirms that they thoroughly test the rates of each rate filing submission to ensure that the rates in Table 11 of the Actuarial Memorandum Exhibits, PA Plan Design Summary and Rate Tables, Federal Rates Template, and binder are identical.

5. Please ensure that the 7/13/21 versions of the following items are posted in SERFF with your July 13th response to this data call.

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

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

Response:

No changes have been made to the Company's rate filing since its initial submission on 5/18/2021. Therefore, only the public PDF has been posted with a 7/13/2021 date to appropriately capture the Company's responses to the objection letters.

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Highmark Choice Company (HCC)
2022 Small Group Rate Filing
PID-1

	Actuals					Projections from PAAMEs	
	2016	2017	2018	2019	2020	2021	2022
Member Months	61	25	0	482	91	108	120
Revenue (Premium + Risk Adj)	\$30,271	\$14,561	\$0	\$161,012	\$21,021	\$34,087	\$40,216
Incurred Claims	\$8,062	\$5,548	\$0	\$86,627	\$25,965	\$27,957	\$33,397
Admin Expense	\$3,661	\$848	\$0	\$35,844	\$2,239	\$6,078	\$6,760
Taxes and Fees	\$158	\$9	\$0	\$163	\$8	\$52	\$59
Profit	\$ 18,390	\$ 8,157	\$ -	\$ 38,377	\$ (7,191)	\$ (0)	\$ 0
UW Gain/Loss	\$ 22,209	\$ 9,014	\$ -	\$ 74,385	\$ (4,944)	\$ 6,130	\$ 6,819
UW Gain Loss PMPM	\$ 364.09	\$ 360.54	#DIV/0!	\$ 154.32	\$ (54.33)	\$ 56.76	\$ 56.82