



July 14th, 2023

Mr. James Lavery | Actuary
Pennsylvania Insurance Department

Pennsylvania Insurance Department ID # UHLC-133662663

Dear Mr. Lavery,

This rate filing presents proposed premium rates effective January 1, 2024 through December 31, 2024 for medical and Rx benefit plans to be sold by UnitedHealthcare of Pennsylvania, Inc to small group employers. The benefit plans and rates are for non-grandfathered employers.

1. Company Name: UnitedHealthcare of Pennsylvania, Inc. NAIC Company Code **95220**
2. Market: Small group, employers with 50 or fewer eligible employees
3. On or Off Exchange: Off Exchange Only
4. Effective date of coverage: 1/1/2024
5. Average rate change requested: 9.9%
6. Range of rate change requested: 4.9 to 10.9%
7. Total additional annual revenue generated from the proposed rate change: \$772,774.
8. Products: HMO
9. Rating Areas: All rating areas have at least one plan available, but no plans are available in all rating areas.
10. Metal levels: Gold, Silver, Bronze
11. Current number of covered lives and policyholders: 1,257 members and 253 policyholders
12. Number of plans offered in 2024: 5 plans.

13. Corresponding contract form #, SERFF and Binder ID#s

- Policy- POL24.H.2018.SG.PA
- Certificate of Coverage- COC24.HMO.2018.SG.PA
- Navigate Schedule of Benefits- SBN24.NAV.H.2018.SG.PA
- Outpatient Prescription Drug Attachment (Network)- ATT24.RX.NET.H.2018.SG.PA
- Outpatient Prescription Drug Attachment (Network/Out-of-Network)- ATT24.RX.NET-OON.H.2018.SG.PA
- Outpatient Prescription Drug Schedule of Benefits (Network)- SBN24.RX.NET.H.2018.SG.PA
- Outpatient Prescription Drug Schedule of Benefits (Network/Out-of-Network)- SBN24.RX.NET-OON.H.2018.SG.PA
- Pediatric Vision Care Services Attachment (Network)- ATT24.PVCS.NET.H.2018.SG.PA
- Pediatric Vision Care Services Attachment (Network/Out-of-Network)- ATT24.PVCS.NET-OON.H.2018.SG.PA
- Pediatric Dental Services Attachment (Network)- ATT24.PDS.NET.H.2018.SG.PA
- Pediatric Dental Services Attachment (Network/Out-of-Network)- ATT24.PDS.NET-OON.H.2018.SG.PA
- Care Cash Attachment - ATT.23.CARECASH.HMO.2018. SG.PA
- UnitedHealthcare Rewards Attachment - ATT23.UHCREWARDS.HMO.2018.SG.PA
- Travel and Lodger - ATT23.TVL.H.2018.SG.PA

SERFF Form Number: **UHLC-133641039**

SERFF Binder Number: **UHLC-PA24-125116411**

14. HIOS Issuer ID # **24872** and submission tracking # **UHLC-133662663**

Should you have any questions or need any additional information, please contact me at [REDACTED]

Sincerely,

[REDACTED]

Actuarial Memorandum
UnitedHealthcare of Pennsylvania, Inc., NAIC #95220
PA Small Group Rate Filing

July 14th, 2023

This rate filing presents proposed premium rates effective January 1st, 2024 through December 31st, 2024 for medical and Rx benefit plans to be sold by the UnitedHealthcare of Pennsylvania, Inc. to small group employers.

The filing has been prepared as required by the “2024 ACA Rate Filing Guidance 03.21.23”, as well as current ACA rules. This rate filing should not be used for any other purposes. Within that context, there are no limitations or constraints on the use or applicability of the rating items discussed herein. The intended user of this filing is the PA Department of Insurance.

1. Basic Information and Data

A. Company Information

UnitedHealthcare of Pennsylvania, Inc. NAIC Company Code **952209**
Small Group Rate Filing Off Exchange only

B. Rate History and Proposed Variations in Rate Changes

UHLC-131482151 submitted 5/21/2018 for effective date 1/1/2019-12/31/2019, new product filing.

UHLC-131757493 submitted 2/8/2019 for effective date 7/1/2019-12/31/2019 base rate reduction of 2.7%. All rate revisions were applied uniformly.

UHLC-131919215 submitted 7/18/2019 for effective date 1/1/2020-12/31/2020 base rate reduction of 0.99%. Entire portfolio was resloped. All rate revisions were applied uniformly.

UHLC-132211682 submitted 01/10/2020 for effective date 7/1/2020-12/31/2020 base rate increase of 4.4%. All rate revisions were applied uniformly.

UHLC-132374427 submitted 05/19/2020 for effective date 1/1/2021-12/31/2021 base rate reduction of 3.9%, area factors were updated, trend was updated to 8.7% annual applied quarterly, and the entire portfolio was resloped. All rate revisions were applied uniformly.

UHLC-132751120 submitted 03/09/2021 for effective date 7/1/2021-12/31/2021 base rate decrease of 3.8%. All rate revisions were applied uniformly.

UHLC-132831666 submitted 05/18/2021 for effective date 1/1/2022-12/31/2022 base rate decrease of 1.8%, trend was updated to 9.0% annual applied quarterly, and the entire portfolio was resloped. All rate revisions were applied uniformly.

UHLC-133185995 submitted 3/16/2022 for effective date 10/1/2022-12/31/2022 base rate decrease of 2.1%. All rate revisions were applied uniformly.

UHLC-133267509 submitted 5/18/2022 for effective date 1/1/2023-12/31/2023 base rate decrease of 0.05%, trend was updated to 8.1% annual applied quarterly, and the entire portfolio was resloped. All rate revisions were applied uniformly.

<u>Rating Area</u>	<u>Change</u>
Rating Area 1	3.6%

Rating Area 2	-10.5%
Rating Area 3	-5.9%
Rating Area 4	7.3%
Rating Area 5	15.7%
Rating Area 6	-6.0%
Rating Area 7	-7.3%
Rating Area 8	-1.2%
Rating Area 9	0.2%

C. Average Rate Change

In Table 11, the change in 21-year-old non-tobacco premium PMPM for 1Q2024 (Cell AN13) is 9.9%. The minimum requested rate change is 4.9% and the maximum requested rate change is 10.9%.

D. Membership Count

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of 02-01-2023)	Projected Rating Period
Average Age	34.9	35.3	35.3
Total	15,605	1,257	17,228
<18	2,256	173	2,371
18-24	1,434	124	1,700
25-29	2,022	151	2,070
30-34	2,222	176	2,412
35-39	1,521	132	1,809
40-44	1,476	108	1,480
45-49	1,282	107	1,467
50-54	1,320	105	1,439
55-59	1,167	101	1,384
60-63	701	56	768
64+	204	24	329

Our projected membership is based on our Finance department estimates.

E. Benefit Changes

Changes to member cost sharing were required for certain benefit plans due to the de minimus change for 2024. Use of the new federal Actuarial Value (AV) Calculator led to some benefit plans falling outside the allowed AV metal ranges.

We refined the medical and pharmacy plan price relativities to reflect the most recent pricing methodology and pricing models. The methodology is based on UnitedHealthcare nationwide experience data, which contains utilization frequencies and unit costs by service category, in addition to claim distributions and adjustment factors for a large number of plan design variables. Benefit design parameters such as deductibles, coinsurance, copays, out-of-pocket maximums, etc. were input for each plan. The expected paid-to-allowed relativities and expected utilization differences due to differences in cost sharing for each plan are then used to develop the plan factors for each benefit plan. All benefit plans are priced consistently with each other, with the rates differing by the estimated value of the benefits and the expected utilization differences due to differences in cost sharing. The utilization differences do not reflect differences due to health status.

All the changes are revenue neutral and the Plan Relativity Factors are listed in Exhibit 3. Also, the revenue neutrality factor development is shown in Exhibit 13.

F. Experience Period Claims and Premium

The experience period includes ACA business for legal entity UHC of PA.

Premiums (net of MLR Rebate) in Experience Period

Earned premium for our small group market business in Pennsylvania for January 2022 thru December 2022 was approximately \$7,373,689,70. MLR rebates are not expected for 2022 calendar year.

Paid Through Date

The experience period is January 1, 2022 to December 31, 2022, with claims paid through February 28, 2023.

Support for estimate of incurred but not paid claims

The UnitedHealthcare Reserving process utilizes the Reserve Production System (RPS) to record reserves into the PeopleSoft general ledger. Fee for service and paid claim data is loaded into RPS and becomes the basis for the monthly reserve calculations at the various business unit, location, and line of business levels. The assignment of the paid claims into RPS packages is based on the mapping rules maintained by the Corporate Actuarial department. RPS calculates a preliminary best estimate Incurred But Not Reported (IBNR) for each reserving model (package) primarily using standard completion factors based on historical claim experience. The Claims Reserving Team adjusts the preliminary IBNR based on specific knowledge of the entity (i.e. catastrophic claims, pended claims, etc.) to calculate the final IBNR. In months where adjudicated claims experience is not complete enough for an estimate using completion factors, a seasonally adjusted PMPM is used to estimate incurred claims.

A description of the Sarbanes Oxley controls, audited by Deloitte & Touche, in place regarding the reserving process includes:

- 1) Market Paid claim Tie-outs: To verify completeness and accuracy of financial data in RPS, paid claim data is tied out between source system (RPS) and PeopleSoft general ledger.
- 2) Market Expense Tie-outs: RPS reserve changes on the income statement are tied to the PeopleSoft general ledger to ensure that information is accurate subsequent to computing the reserve.

Allowed claims by benefit category were obtained from UnitedHealthcare claim paying system reports. The same completion factors are applied to both incurred and allowed claims amounts.

Non-EHB benefits and the experience period cost

The non-EHB claims account for 0.1% of the total claims in the experience period. The non-EHB services are exclusively for physician and outpatient claims. We expect the same benefits to be covered during the rating period.

Capitation

Capitation includes all services provided under one or more capitated agreements and it is applied uniformly across all membership during the experience period. For this experience period, the capitated amount is \$13.75 PMPM.

Pharmacy Rebates

The prescription drug cost is net of rebates received from drug manufacturers. For this experience period the average pharmacy rebate is -\$31.97 PMPM.

Risk Adjustment

The final 2022 CMS risk adjustment transfer payment is \$-1,479,471.02. Risk adjustment percentage applied to the experience period premium is -20.1%.

Reinsurance

Since this is a small group filing and the state of Pennsylvania chose not to combine its individual and small group markets, reinsurance recoveries are not applicable to this rate filing. As such, no adjustments were made to the experience.

G. Credibility of Data

We are using United Healthcare small group UHC ACA experience and United Healthcare Pennsylvania Inc small group UHCPA ACA experience with credibility applied. UHC ACA experience has 93% credibility assigned and UHCPA ACA experience has 7% credibility assigned. The assigned credibility is determined by membership weighting in experience period. As ASOP 25, section 3.4 states: “Professional Judgment - The actuary should use professional judgment when selecting, developing, or using a credibility procedure. The use of credibility procedures is not always a precise mathematical process.”

H. Trend Identification

In the credibility manual, two years of annual trend were applied to the experience to project it to the rating period. The table below details the components of each trend factor.

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	4.13%	3.07%		7.33%	21.98%
Outpatient Hospital	4.16%	5.82%		10.22%	28.32%
Professional	1.41%	4.84%		6.32%	18.99%
Other Medical	1.91%	2.21%		4.16%	6.87%
Capitation				9.86%	2.50%
Prescription Drugs	4.70%	5.03%		9.97%	21.34%
Total Annual Trend				8.38%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.175	

Weight is based on the ratio of experience period index rate PMPM of different service categories over total PMPM, shown in URRT Worksheet 1 Section II Projections.

Please see Exhibit “15 - Claims Trend Summary” included in this filing for details on the trend components.

We are proposing the annual pricing trend to be at 9.6% applied quarterly, and the quarterly trend is 2.3%. The details of the proposed 9.6% trend are in Exhibit “6 – Pricing Trend” included in this filing.

The 9.6% pricing trend included in the input in Table 5A represents future quarterly pricing trends that will be used to increase 1Q24 premium rates to determine 2Q24, 3Q24, and 4Q24 premium rates.

Our trend setting process is outlined by the following narrative and exhibits. In general, recent/emerging claims experience is reviewed at the market level for several broad medical expense categories (inpatient, professional, pharmacy, etc.), with utilization, unit cost, benefit leveraging, and business mix identified for each category. Depending on the amount of underlying experience, additional markets may be added together to limit the variability of small blocks of experience. Historical patterns will produce highly variable results with limited credibility. National utilization/mix assumptions along with local contract assessment will be used to produce a more stable and reliable trend estimate.

I. Historical Experience

Table 4 below describes the most recent 48 months of experience data with 2 months of runout for the experience period which includes ACA business for legal entity UHC of PA, with 7% credibility assigned.

Market-level unit cost projections are developed based on evaluations of current and anticipated provider contract economics, as well as consideration to both current and expected changes in non-contracted provider cost exposure. Unit cost projections also consider the estimated cost impact of new technologies, service availability/mandates, or other factors that might influence mix of procedures. Unit cost is based on our contractual changes with providers.

In addition, market-level healthcare affordability activities that are expected to impact forward-looking medical costs are recognized. Depending on the nature of individual initiatives, the impact may be recognized in one or more of the component cost items discussed above. Only incremental activities are recognized for this purpose in the expected trend impact for any particular period.

This rate filing proposes quarterly rates.

2. Rate Development & Change

A. Development of Projected Index Rate, Market-Adjusted Index Rate, & Total Allowed Claims

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	\$ 513.00	\$ 527.57
Two year trend projection Factor	1.175	1.175
Unadjusted Projected Allowed EHB Claims PMPM	\$ 602.62	\$ 619.74
<u>Single Risk Pool Adjustment Factors</u>		
Change in Morbidity - Impact of Reinsurance Program	1.000	1.000
Change in Morbidity - All Other	1.000	1.000
Total Non-Morbidity Changes	0.762	0.864
Change in Demographics	0.999	1.001
Change in Network	1.000	1.000
Change in Benefits	1.000	0.971
Change in Other	0.763	0.888
Total Adjusted Projected Allowed EHB Claims PMPM	\$ 459.34	\$ 535.31
Credibility Factors	7%	93%
Blended Projected EHB Claims PMPM		\$ 529.99
<u>Development of the Market-Adjusted Index Rate and Total Allowed Claims</u>		
Adjusted Projected Allowed EHB Claims PMPM	\$ 529.99	<- Index Rate for Proje
Projected Paid to Allowed Ratio	0.761	
Projected Incurred EHB Claims PMPM	\$ 403.32	
<u>Market-wide Adjustments</u>		
Projected Incurred Risk Adjustment PMPM	-\$41.80	
Projected Incurred Exchange User Fees PMPM	\$0.00	
Projected Incurred Reinsurance Recoveries PMPM	\$0.00	
Market-Adjusted Projected Incurred EHB Claims PMPM	\$ 445.12	
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 584.92	<- Market-Adjusted Inc
Projected Allowed Non-EHB Claims PMPM	\$ 0.45	
Market-Adjusted Projected Incurred Total Claims PMPM	\$ 445.46	
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 585.36	

Projected risk adjustment PMPM is -\$41.80 in URRT Worksheet 1 section II. We applied an adjustment for the paid-to-allowed ratio. The resulting PMPM is $-\$41.80 = -\54.93×0.761 .

The Index Rate for the experience period is approximately 99.9% of allowed claims due to benefits in excess of EHBs.

The Index rate calculation is demonstrated in Table 5A below:

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

Effective Date	1/1/2024	4/1/2024	7/1/2024	10/1/2024	Total Single Risk Pool
# of Member Months Renewing in Quarter	17,228				17,228
Adjusted Projected Allowed EHB Claims PMPM	\$ 529.99	\$ 529.99	\$ 529.99	\$ 529.99	\$ 529.99
Months of Trend	-	3	6	9	
Annual Trend	9.60%	9.60%	9.60%	9.60%	
Single Risk Pool Projected Allowed Claims	\$ 529.99	\$ 542.27	\$ 554.84	\$ 567.71	\$ 529.99
Quarterly Trend Factor	1.000	1.023	1.047	1.071	1.000

Actuarial Value and Cost Sharing Adjustment

UnitedHealthcare has a proprietary pricing model that was used in developing the actuarial value and cost sharing adjustment for each plan. The model calculates plan relativity factors for medical and pharmacy benefits. Also included under the actuarial value and cost sharing adjustment are adjustments for leveraging and the difference between the average plan relativity factor and the projected paid to allowed ratio. Historical affiliated carrier experience was used to develop the actuarial value and cost sharing adjustment for each plan as well as the distribution and administrative costs adjustment.

Provider network, deliver system and utilization management adjustment

Any adjustments for these items are included in the plan relativity factors.

Benefits in Addition to EHBs

Benefit Extra EHB is the percentage of claims that are covered and are not included in EHB. The projected non- EHB impact is 0.1%.

Distribution and Administrative Costs

Distribution and Administrative Costs include premium tax, SG&A, quality improvements, federal income tax, and after-tax income. These items are discussed in the section Non-Benefit Expenses and Profit of this memorandum. Risk adjustment transfers and user fees and exchange fees are excluded because they are accounted for in the market adjusted index rate.

Tobacco Factors

Tobacco factors are not used in rating. As such, no adjustment is made for costs that are expected to be recouped through the tobacco surcharge.

Index Rate Calibration

Plan Adjusted Index Rates need to be calibrated to apply the allowable rating factors of age and geography in order to calculate the Consumer Adjusted Premium Rates. Calibration factors are applied uniformly to all plans.

Age Calibration

The calculated age curve calibration is 1.3915, which equals the average age factor of the expected member distribution by age in the ACA enrollment. This corresponds with an approximate age of 44 years. The age factors used in this calculation are the HHS-specified age curve. Exhibit “7 - Age Calibration” shows the Average Age calibration factor development.

Geographic Calibration

The geographic factor calibration is 0.8821, which equals the expected average area factor. A table of the geographic rating factors is below.

Table 13. Geographic Factors

Geographic Area Factors			
Area	Counties	Current Factor	Proposed Factor
Rating Area 1	Erie, Crawford, Mercer, Venango, Clarion, Forest, Warren, McKean	0.783	0.783
Rating Area 2	Elk, Cameron, Potter	0.767	0.767
Rating Area 3	Clinton, Lycoming, Sullivan, Bradford, Susquehanna, Wyoming, Lackawanna, Wayne, Pike, Monroe, Carbon, Luzerne, Tioga	0.938	0.920
Rating Area 4	Lawrence, Beaver, Washington, Greene, Butler, Allegheny, Westmoreland, Armstrong, Indiana, Fayette	0.867	0.867
Rating Area 5	Jefferson, Clearfield, Cambria, Somerset, Bedford, Blair, Huntingdon	0.869	0.869
Rating Area 6	Centre, Mifflin, Snyder, Northumberland, Columbia, Schuylkill, Lehigh, Northampton, Montour	0.916	0.898
Rating Area 7	Adams, York, Lancaster, Berks	0.928	0.928
Rating Area 8	Chester, Delaware, Montgomery, Bucks, Philadelphia	0.872	0.872
Rating Area 9	Fulton, Franklin, Cumberland, Perry, Juniata, Dauphin, Lebanon	0.911	0.911

Exhibit “8 - Area Calibration” shows the Average Area calibration factor development.

The proposed area factor changes are indicated in Exhibit “18 Area Factors Change”.

Population morbidity by area was not considered when determining geographic area factors changes.

Calibrating the plan adjusted index rate to the age curve and geographic distribution results in the calibrated premium rate for each plan. The calibrated premium rate represents the preliminary premium rate charged to an individual before applying the consumer specific rating adjustments for age, area, and tobacco status.

Consumer Adjusted Premium Rate Development

The consumer adjusted premium rate is the final premium rate that is charged to an individual. It is developed by calibrating the plan adjusted index rate by the average age and geographic rating factors, and applying the consumer specific age, geographic, and tobacco status rating factors. The calculation is provided below.

$$\begin{aligned}
 & \text{Plan Adjusted Index Rate} \\
 / & \text{Age Calibration Factor} \\
 / & \text{Geographic Calibration Factor} \\
 \times & \text{Consumer Specific Age Rating Factor} \\
 \times & \text{Consumer Specific Geographic Rating Factor} \\
 \times & \text{Tobacco Status Factor} \\
 \times & \text{Small Group Trend Adjustment} \\
 = & \text{Consumer Adjusted Premium Rate}
 \end{aligned}$$

Small Group Trend Adjustment

Since this is a small group filing that includes rates with schedule trend increases by quarter, the Index Rate, Market Adjusted Index Rate and Plan Adjusted Index Rate reflect the member weighted average premium over the calendar year. As such, the Consumer Adjusted Premium Rate includes the trend adjustments in calculated quarterly rates.

B. Retention Items

Administrative Expense Load

The expense formula is similar to the United Healthcare Insurance Company except for the Premium Tax component that doesn't apply to the HMO product.

The administrative expense load is a long-term estimate of administrative expenses, including selling expenses and general administrative expenses. This load varies by plan. These assumptions are based on the general ledger actual results for 2022 with known adjustments. Known adjustments include, but are not limited to, pay increases/raises for employees and administrative expenses as a result of Healthcare Reform and compliance requirements.

The administrative expense allocation methodology used in pricing is appropriate because it is consistent with how UnitedHealthcare runs its business and how it allocates administrative costs for Statutory Filings and the Healthcare Reform Exhibits.

For this filing, this is calculated at 16.3%.

<u>1/1/2024 Filing</u>		
Administrative Expenses Allocation	Estimated % of Premium	Estimated PMPM
Selling Expenses (Commissions, Broker Bonus)	4.6%	\$25.29
General Admin Expenses	11.7%	\$64.32
Total	16.3%	\$89.62

Profit and Risk Margin

The Profit and Risk Margin is 2%. This target does not vary by product or plan.

Taxes and Fees

Taxes and fees are expected to be 0.67% and include federal income tax. The following is a breakdown of the taxes and fees.

1/1/2024 Filing		
Premium Taxes and Fees Allocation	Estimated % of Premium	Estimated PMPM
Federal / State Income Tax on Profit & Risk Load	0.53%	\$2.92
Premium Tax	0.00%	\$0.00
ACA Taxes: PCORI Fee	0.05%	\$0.30
ACA Taxes: Risk Adjustment User Fee	0.05%	\$0.21
ACA Taxes: Exchange User Fee	0.00%	\$0.00
All Other Taxes & Fees	0.04%	\$0.19
Total	0.67%	\$3.62

C. Normalized Market-Adjusted Projected Allowed Total Claims

The 2024 average age factor is 1.3915. The age factors used in this calculation are the HHS-specified age curve. The 2024 average geographic factor is 0.8821.

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

<u>Normalization Factors</u>	2023	2024
Average Age Factor	1.376	1.392
Average Geographic Factor	0.886	0.882
Average Tobacco Factor	1.000	1.000
Average Benefit Richness (induced demand)	1.000	1.000
Average Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 556.51	\$ 585.36
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 456.74	\$ 476.90

D. Components of Rate Change

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

	2023	2024
Paid-to-Allowed	0.740	0.761
URRT Trend (Total Applied Trend Factor)	1.161	1.175
URRT Morbidity	1.000	1.000
URRT "Other"	0.885	0.857
Risk Adjustment	\$ 34.88	\$ 41.80
Exchange User Fee	\$ -	\$ -
Reinsurance Recoveries	\$ -	\$ -
Capitation	\$ 3.82	\$ 16.15
Network	1.000	1.000
Pricing AV	0.739	0.760
Benefit Richness	1.000	1.000
Catastrophic Eligibility	1.000	1.000
Administrative Expenses	14.93%	16.30%
Taxes and Fees	0.66%	0.67%
Profit and/or Contingency	2.00%	2.00%

Changes in "Other" include the changes in the catastrophic claims adjustment impact, PPACA fee, trend adjustment. The capitation arrangements for 2023 resulted in a projection of \$3.82 PMPM and for 2024 is \$16.15 PMPM.

3. Plan Rate Development

Table 10 has been populated as instructed.

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

Table 11 has been populated as instructed.

5. Plan Factors

A. Age and Tobacco Factors

Table 12 has been populated as instructed using the default federal standard age curve.

B. Geographic Factors

Table 13 has been populated as instructed

C. Network Factors

Table 14 has been populated as instructed

D. Service Area Composition

For the 2024 plan year we have two distinct service areas, varying by plan. Please reference Exhibit 2 – Plan Designs along with 2024 service area map which detail the markets and counties where each plan will be available. In summary, counties in WPA markets 560, 561 and 562 will have one plan option available. Counties in EPA markets 556 and 558 will have four plan options available to them. Counties in market 557 will have all five plan options available.

E. Composite Rating

No composite rating is offered for this product.

6. Actuarial Certifications

I, [REDACTED], an Actuary at UnitedHealthcare, I am a member of the American Academy of Actuaries, and I meet the Academy's qualification standards for rendering statements of actuarial opinion with respect to the filing of rates for health insurance products. I have reviewed applicable ASOPs during the preparation of this rate filing.

To the best of my knowledge and judgment, I certify that:

- The projected index rate is:
 - 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 population anticipated to be covered,
 - Neither excessive, deficient, nor unfairly discriminatory.
- 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.
- The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice.
- The geographic rating factors reflect only differences in the costs of delivery and do not include differences for population morbidity by geographic area.
- New plans cannot be considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106.
- The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2023 Rate Filing Justification
- The AV calculator was used to determine the AV metal values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans. Some of our plan designs are not directly compatible with the AV calculator. The values were developed in accordance with generally accepted actuarial principles and methodologies. The unique plan design actuarial certification required by 45 CFR Part 156.135 has been separately attached.
- The Part I Unified Rate Review Template does not demonstrate the process used by the issuer to develop their 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.
- All factor, benefit and other changes from the prior approved filing have been disclosed in the actuarial memorandum.

I certify that the anticipated loss ratio meets the minimum requirement, the rates are reasonable in relation to benefits, the filing complies with the laws and regulations of PA and all applicable Actuarial Standards of Practice, including ASOP No. 8 and the rates are not unfairly discriminatory.

[REDACTED]

[REDACTED]

Date: 7/14/2023

**PA Rate Template Part II
Rate Development and Change**

Carrier Name: UnitedHealthcare of Pennsylvania, Inc
 Product(s): HMO
 Market Segment: Small Group
 Rate Effective Date: 1/1/2024

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 Cancellation PMPM (net of prescription drug rebates) PMPM	\$ 513.00	\$ 527.52	- Actual Experience PMPM should be consistent with the Index Rate for Experience Period on UBR7
Two year trend orientation factor	1.175	1.175	
Unadjusted Projected Allowed EHB Claims PMPM	\$ 602.62	\$ 619.74	
Market Risk-Related Adjustment Factors			
Change in Morbidity - Impact of Reinsurance Program	1.000	1.000	
Change in Morbidity - All Other	0.762	0.864	- See UBR7 Instructions
Total Non-Morbidity Changes	0.999	1.001	- See UBR7 Instructions
Change in Demographics	1.000	1.000	- See UBR7 Instructions
Change in Network	1.000	0.971	- See UBR7 Instructions
Change in Benefits	0.769	0.868	- See UBR7 Instructions
Change in Other			
Total Adjusted Projected Allowed EHB Claims PMPM	\$ 459.34	\$ 535.31	
Credibility Factors	7%	93%	- See Instructions
Revised Projected EHB Claims PMPM	\$ -	\$ 529.99	- Projected Index Rate
Development of the Market-Adjusted Index Rate and Total Allowed Claims			
Adjusted Projected Allowed EHB Claims PMPM	\$ 529.99		- Index Rate for Projection Period on UBR7
Projected Paid-to-Allowed Ratio	\$ 97.96		
Projected Incurred EHB Claims PMPM	\$ 493.32		
Market-wide Adjustments	\$ -541.80		
Projected Incurred Risk-Adjustment PMPM	\$ -50.00		
Projected Incurred Exchange User Fees PMPM	\$ 50.00		
Projected Incurred Reinsurance Recoveries PMPM	\$ 445.12		
Market-Adjusted Projected Incurred EHB Claims PMPM	\$ 584.92		- Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM	\$ 0.45		
Market-Adjusted Projected Incurred Total Claims PMPM	\$ 445.46		
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 585.36		

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 526.55	- Index Rate of Experience Period on UBR7
Blended Earned Premium	\$ 113,498,088.92	
Blended Loss Ratio	81.78%	

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

Effective Date	1/1/2024	4/1/2024	7/1/2024	10/1/2024	Total Simple Risk Pool
# of Member Months Remains in Quarter	17,228				17,228
Adjusted Projected Allowed EHB Claims PMPM	\$ 529.99	\$ 529.99	\$ 529.99	\$ 529.99	\$ 529.99
Months of Trend					
Annual Trend	9.60%	9.60%	9.60%	9.60%	9.60%
Single Risk Pool Projected Allowed Claims	\$ 529.99	\$ 542.27	\$ 554.84	\$ 567.71	\$ 529.99
Quarterly Trend Factor	1.000	1.021	1.041	1.061	1.000

Table 6. Retention

Retention Item - Express in percentages	Percentage	PMPM Amounts
Administrative Expenses	11.70%	\$69.69
General and Claims	4.40%	\$25.30
Agent/Broker Fees and Commissions	6.40%	\$37.00
Quality Improvement Initiatives	-0.57%	\$3.09
Taxes and Fees	0.49%	\$2.91
Risk-Adjustment User Fee	0.05%	\$0.30
PCORI Fee	0.04%	\$2.00
ACA Premium & Other Taxes (if applicable)	0.53%	\$2.30
Federal Income Tax	0.06%	\$0.00
Health Insurance Providers Fee (Provided for Small Groups only)		\$0.00
Profit/Contingency (after tax)	2.00%	\$10.99
Total Retention	18.97%	\$104.30
Projected Required Revenue PMPM		\$ 549.76

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factor	2023	2024
Average Age Factor	1.115	1.100
Average Geographic Factor	0.886	0.882
Average Tobacco Factor	1.000	1.000
Average Benefit Richness (induced demand)	1.000	1.000
Average Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 556.51	\$ 585.36
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 456.74	\$ 476.90

Table 8. Components of Rate Change

Rate Components	2023	2024	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$ 420.11	\$ 447.94	\$ 27.83	6.6%
B. Base period allowed claims before normalization	\$ 495.30	\$ 526.55	\$ 31.16	7.9%
C. Normalization factor component of change	\$ 188.81	\$ 197.56	\$ 8.75	4.6%
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 408.38	\$ 428.99	\$ 20.61	5.1%
D2. UBR7 Trend	\$ 65.50	\$ 74.95	\$ 9.45	14.4%
D3. UBR7 Morbidity	\$ -	\$ -	\$ -	0.0%
D4. UBR7 Other	\$ 154.44	\$ 172.24	\$ 17.80	11.5%
D5. Normalized UBR7 Risk Adjustment on an allowed basis	\$ 38.69	\$ 44.75	\$ 6.06	15.7%
D6. Normalized Exchange User Fee on an allowed basis	\$ -	\$ -	\$ -	0.0%
D7. Normalized Reinsurance Recoveries on an allowed basis	\$ -	\$ -	\$ -	0.0%
D8. Subtotal - Sum(D1-D7)	\$ 408.34	\$ 476.46	\$ 68.12	16.7%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ -	\$ -	\$ -	0.0%
E2. Pricing AV	\$ 119.13	\$ 114.31	\$ -4.82	-4.0%
E3. Benefit Richness	\$ 10.01	\$ -	\$ -10.01	-100.0%
E4. Catastrophic Eligibility	\$ 50.00	\$ -	\$ -50.00	-100.0%
E5. Subtotal - Sum(E1-E4)	\$ 119.13	\$ 114.31	\$ -4.82	-4.0%
F. Change in Retention Components				
F1. Administrative Expenses	\$ 61.24	\$ 73.02	\$ 11.78	19.2%
F2. Taxes and Fees	\$ 2.75	\$ 3.00	\$ 0.25	9.1%
F3. Profit and/or Contingency	\$ 8.20	\$ 8.95	\$ 0.75	9.1%
F4. Subtotal - Sum(F1-F3)	\$ 72.15	\$ 84.98	\$ 12.83	17.8%
G. Change in Miscellaneous Items	\$ 1.27	\$ 0.41	\$ -0.86	-67.3%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 420.63	\$ 447.93	\$ 27.30	6.5%

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

	2023	2024
Paid-to-Allowed	97.96	97.96
UBR7 Trend (Total Assisted Trend Factor)	1.115	1.175
UBR7 Morbidity	1.000	1.000
UBR7 "Other"	0.886	0.883
Risk Adjustment	\$ 34.88	\$ 41.80
Exchange User Fee	\$ -	\$ -
Reinsurance Recoveries	\$ -	\$ -
Catastrophic Eligibility	\$ 1.82	\$ 16.15
Network	1.000	1.000
Price AV	0.739	0.760
Benefit Richness	1.000	1.000
Catastrophic Eligibility	1.000	1.000
Administrative Expenses	14.91%	16.30%
Taxes and Fees	0.66%	0.67%
Profit and/or Contingency	2.00%	2.00%

The image shows a horizontal bar chart with a blue header and a yellow body. The bar is divided into several segments by vertical lines. The segments are colored as follows: a blue header, followed by a series of light gray segments, a series of yellow segments, and a final series of light gray segments. The yellow segments are the most prominent and are arranged in a repeating pattern of approximately 10 segments each, separated by thin gray lines. The overall structure is a long, thin horizontal bar.

PA Rate Template Part VI - Rate Change Summary

Table 15. Rate Change Summary Information

Overview

Initial Requested Average Rate Change:	9.88%
Revised Requested Average Rate Change:	9.88%
Minimum Requested Rate Change:	4.93%
Maximum Requested Rate Change:	10.86%
Mapped Members:	1,257
Available in Rating Areas:	Rating Areas 1, 2, 3, 4, 5, 6, 7, 8, and 9

Carrier Name:	UnitedHealthcare of Pennsylvania, Inc
Product(s):	HMO
Market Segment:	Small Group
Rate Effective Date:	1/1/2024

Key Information

Jan. 2022 - Dec. 2022 Financial Experience

Premium	\$	5,894,218.69
Claims	\$	6,591,864.55
Administrative Expenses	\$	1,273,800.40
Taxes & Fees	\$	(1,321,756.35)
Company Made After Taxes	\$	(649,689.91)

How It Plans to Spend Your Premium

This is how the company plans to spend the premium it collects in 2024:

Claims:	81%
Administrative Expenses:	16%
Taxes & Fees:	1%
Profit:	2%

The company expects its annual medical costs to increase:

8.38%

Explanation of requested rate change:

UnitedHealthcare of Pennsylvania, Inc. is requesting the rate increase because of the increase in medical costs and utilization of health care services.

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

HIOS Plan ID (On Exchange)=>	24872PA0030005		24872PA0030009		24872PA0030002		24872PA0030003		24872PA0030005		24872PA0030009	
HIOS Plan ID (Off Exchange)=>	24872PA0030005		24872PA0030009		24872PA0030002		24872PA0030003		24872PA0030005		24872PA0030009	
Plan Marketing Name =>	UHC Navigate Silver 3500		UHC Navigate HSA Silver 3500		UHC Navigate Gold 1500		UHC Navigate Gold 1000		UHC Navigate Silver 3500		UHC Navigate HSA Silver 3500	
Form # =>	COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA	
Rating Area =>	Rating Area 8		Rating Area 8		Rating Area 9		Rating Area 9		Rating Area 9		Rating Area 9	
Network =>	UHC		UHC		UHC		UHC		UHC		UHC	
Metal =>	Silver		Silver		Gold		Gold		Silver		Silver	
Deductible =>	\$3,500		\$3,500		\$1,500		\$1,000		\$3,500		\$3,500	
Coinsurance =>	20%		0%		20%		0%		20%		0%	
Copays =>	\$40-\$80/\$120		\$30-\$60/\$100		\$30-\$60/\$100		\$30-\$60/\$100		\$40-\$80/\$120		\$30-\$60/\$100	
OOP Maximum =>	\$9,450		\$6,500		\$7,500		\$9,100		\$9,450		\$6,500	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$285.05	\$285.05	\$278.77	\$278.77	\$328.67	\$328.67	\$350.23	\$350.23	\$297.88	\$297.88	\$291.31	\$291.31
15	\$310.39	\$310.39	\$303.55	\$303.55	\$357.89	\$357.89	\$381.36	\$381.36	\$324.35	\$324.35	\$317.21	\$317.21
16	\$320.08	\$320.08	\$313.03	\$313.03	\$369.06	\$369.06	\$393.27	\$393.27	\$334.48	\$334.48	\$327.11	\$327.11
17	\$329.77	\$329.77	\$322.50	\$322.50	\$380.23	\$380.23	\$405.17	\$405.17	\$344.60	\$344.60	\$337.01	\$337.01
18	\$340.20	\$340.20	\$332.71	\$332.71	\$392.26	\$392.26	\$417.99	\$417.99	\$355.50	\$355.50	\$347.67	\$347.67
19	\$350.64	\$350.64	\$342.91	\$342.91	\$404.29	\$404.29	\$430.81	\$430.81	\$366.41	\$366.41	\$358.33	\$358.33
20	\$361.44	\$361.44	\$353.48	\$353.48	\$416.75	\$416.75	\$444.09	\$444.09	\$377.70	\$377.70	\$369.38	\$369.38
21	\$372.62	\$372.62	\$364.41	\$364.41	\$429.64	\$429.64	\$457.82	\$457.82	\$389.38	\$389.38	\$380.80	\$380.80
22	\$372.62	\$372.62	\$364.41	\$364.41	\$429.64	\$429.64	\$457.82	\$457.82	\$389.38	\$389.38	\$380.80	\$380.80
23	\$372.62	\$372.62	\$364.41	\$364.41	\$429.64	\$429.64	\$457.82	\$457.82	\$389.38	\$389.38	\$380.80	\$380.80
24	\$372.62	\$372.62	\$364.41	\$364.41	\$429.64	\$429.64	\$457.82	\$457.82	\$389.38	\$389.38	\$380.80	\$380.80
25	\$374.11	\$374.11	\$365.87	\$365.87	\$431.36	\$431.36	\$459.65	\$459.65	\$390.94	\$390.94	\$382.32	\$382.32
26	\$381.56	\$381.56	\$373.16	\$373.16	\$439.95	\$439.95	\$468.81	\$468.81	\$398.73	\$398.73	\$389.94	\$389.94
27	\$390.51	\$390.51	\$381.90	\$381.90	\$450.26	\$450.26	\$479.80	\$479.80	\$408.07	\$408.07	\$399.08	\$399.08
28	\$405.04	\$405.04	\$396.11	\$396.11	\$467.02	\$467.02	\$497.65	\$497.65	\$423.26	\$423.26	\$413.93	\$413.93
29	\$416.96	\$416.96	\$407.77	\$407.77	\$480.77	\$480.77	\$512.30	\$512.30	\$435.72	\$435.72	\$426.12	\$426.12
30	\$422.92	\$422.92	\$413.61	\$413.61	\$487.64	\$487.64	\$519.63	\$519.63	\$441.95	\$441.95	\$432.21	\$432.21
31	\$431.87	\$431.87	\$422.35	\$422.35	\$497.95	\$497.95	\$530.61	\$530.61	\$451.29	\$451.29	\$441.35	\$441.35
32	\$440.81	\$440.81	\$431.10	\$431.10	\$508.26	\$508.26	\$541.60	\$541.60	\$460.64	\$460.64	\$450.49	\$450.49
33	\$446.40	\$446.40	\$436.56	\$436.56	\$514.71	\$514.71	\$548.47	\$548.47	\$466.48	\$466.48	\$456.20	\$456.20
34	\$452.36	\$452.36	\$442.39	\$442.39	\$521.58	\$521.58	\$555.79	\$555.79	\$472.71	\$472.71	\$462.29	\$462.29
35	\$455.34	\$455.34	\$445.31	\$445.31	\$525.02	\$525.02	\$559.46	\$559.46	\$475.82	\$475.82	\$465.34	\$465.34
36	\$458.32	\$458.32	\$448.22	\$448.22	\$528.46	\$528.46	\$563.12	\$563.12	\$478.94	\$478.94	\$468.38	\$468.38
37	\$461.30	\$461.30	\$451.14	\$451.14	\$531.89	\$531.89	\$566.78	\$566.78	\$482.05	\$482.05	\$471.43	\$471.43
38	\$464.28	\$464.28	\$454.05	\$454.05	\$535.33	\$535.33	\$570.44	\$570.44	\$485.17	\$485.17	\$474.48	\$474.48
39	\$470.25	\$470.25	\$459.89	\$459.89	\$542.21	\$542.21	\$577.77	\$577.77	\$491.40	\$491.40	\$480.57	\$480.57
40	\$476.21	\$476.21	\$465.72	\$465.72	\$549.08	\$549.08	\$585.09	\$585.09	\$497.63	\$497.63	\$486.66	\$486.66
41	\$485.15	\$485.15	\$474.46	\$474.46	\$559.39	\$559.39	\$596.08	\$596.08	\$506.97	\$506.97	\$495.80	\$495.80
42	\$493.72	\$493.72	\$482.84	\$482.84	\$569.27	\$569.27	\$606.61	\$606.61	\$515.93	\$515.93	\$504.56	\$504.56
43	\$505.65	\$505.65	\$494.50	\$494.50	\$583.02	\$583.02	\$621.26	\$621.26	\$528.39	\$528.39	\$516.75	\$516.75
44	\$520.55	\$520.55	\$509.08	\$509.08	\$600.21	\$600.21	\$639.57	\$639.57	\$543.96	\$543.96	\$531.98	\$531.98
45	\$538.06	\$538.06	\$526.21	\$526.21	\$620.40	\$620.40	\$661.09	\$661.09	\$562.26	\$562.26	\$549.88	\$549.88
46	\$558.93	\$558.93	\$546.62	\$546.62	\$644.46	\$644.46	\$686.73	\$686.73	\$584.07	\$584.07	\$571.20	\$571.20
47	\$582.41	\$582.41	\$569.57	\$569.57	\$671.53	\$671.53	\$715.57	\$715.57	\$608.60	\$608.60	\$595.19	\$595.19
48	\$609.23	\$609.23	\$595.81	\$595.81	\$702.46	\$702.46	\$748.54	\$748.54	\$636.64	\$636.64	\$622.61	\$622.61
49	\$635.69	\$635.69	\$621.68	\$621.68	\$732.97	\$732.97	\$781.04	\$781.04	\$664.28	\$664.28	\$649.64	\$649.64
50	\$665.50	\$665.50	\$650.84	\$650.84	\$767.34	\$767.34	\$817.67	\$817.67	\$695.43	\$695.43	\$680.11	\$680.11
51	\$694.94	\$694.94	\$679.62	\$679.62	\$801.28	\$801.28	\$853.83	\$853.83	\$726.19	\$726.19	\$710.19	\$710.19
52	\$727.35	\$727.35	\$711.33	\$711.33	\$838.66	\$838.66	\$893.66	\$893.66	\$760.07	\$760.07	\$743.32	\$743.32
53	\$760.14	\$760.14	\$743.40	\$743.40	\$876.47	\$876.47	\$933.95	\$933.95	\$794.34	\$794.34	\$776.83	\$776.83
54	\$795.54	\$795.54	\$778.02	\$778.02	\$917.28	\$917.28	\$977.45	\$977.45	\$831.33	\$831.33	\$813.01	\$813.01
55	\$830.94	\$830.94	\$812.63	\$812.63	\$958.10	\$958.10	\$1,020.94	\$1,020.94	\$868.32	\$868.32	\$849.18	\$849.18
56	\$869.32	\$869.32	\$850.17	\$850.17	\$1,002.35	\$1,002.35	\$1,068.09	\$1,068.09	\$908.42	\$908.42	\$888.41	\$888.41
57	\$908.07	\$908.07	\$888.07	\$888.07	\$1,047.03	\$1,047.03	\$1,115.71	\$1,115.71	\$948.92	\$948.92	\$928.01	\$928.01
58	\$949.44	\$949.44	\$928.52	\$928.52	\$1,094.72	\$1,094.72	\$1,166.53	\$1,166.53	\$992.14	\$992.14	\$970.28	\$970.28
59	\$969.93	\$969.93	\$948.56	\$948.56	\$1,118.35	\$1,118.35	\$1,191.71	\$1,191.71	\$1,013.56	\$1,013.56	\$991.22	\$991.22
60	\$1,011.29	\$1,011.29	\$989.01	\$989.01	\$1,166.04	\$1,166.04	\$1,242.52	\$1,242.52	\$1,056.78	\$1,056.78	\$1,033.49	\$1,033.49
61	\$1,047.06	\$1,047.06	\$1,023.99	\$1,023.99	\$1,207.29	\$1,207.29	\$1,286.47	\$1,286.47	\$1,094.16	\$1,094.16	\$1,070.05	\$1,070.05
62	\$1,070.54	\$1,070.54	\$1,046.95	\$1,046.95	\$1,234.36	\$1,234.36	\$1,315.32	\$1,315.32	\$1,118.69	\$1,118.69	\$1,094.04	\$1,094.04
63	\$1,099.97	\$1,099.97	\$1,075.74	\$1,075.74	\$1,268.30	\$1,268.30	\$1,351.48	\$1,351.48	\$1,149.45	\$1,149.45	\$1,124.12	\$1,124.12
64+	\$1,117.86	\$1,117.86	\$1,093.23	\$1,093.23	\$1,288.92	\$1,288.92	\$1,373.46	\$1,373.46	\$1,168.14	\$1,168.14	\$1,142.40	\$1,142.40

UnitedHealthcare of Pennsylvania, Inc.
 Small Group
 Plan Design Summary

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
24872PA0030001	UHC Navigate HSA Bronze 6850	HMO	Bronze	Off	UHCPA	1,2,3,4,5,6	RA 1-5 - All; RA 6 - Centre Only
24872PA0030002	UHC Navigate Gold 1500	HMO	Gold	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030003	UHC Navigate Gold 1000	HMO	Gold	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030005	UHC Navigate Silver 3500	HMO	Silver	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030009	UHC Navigate HSA Silver 3500	HMO	Silver	Off	UHCPA	3,6,7,8,9	All - Except Centre

Company Name UnitedHealthcare of Pennsylvania, Inc.

Market Small Group

RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2023 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
24872PA0030001	UHC Navigate HSA Bronze 6850	HMO	Bronze	Off
24872PA0030002	UHC Navigate Gold 1500	HMO	Gold	Off
24872PA0030003	UHC Navigate Gold 1000	HMO	Gold	Off
24872PA0030005	UHC Navigate Silver 3500	HMO	Silver	Off
24872PA0030009	UHC Navigate HSA Silver 3500	HMO	Silver	Off

RATING AREA 1

0	0	0	0
Crawford	Clarion	Erie	Forest
\$306.03	\$306.03	\$306.03	\$306.03

0	2
Washington	Westmoreland

\$339.11

\$339.11

RATING AREA 5

0	0	0	0	0	0	0
Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset

\$339.86

\$339.86

\$339.86

\$339.86

\$339.86

\$339.86

\$339.86

RATING AREA 6

8	0	39
Centre	Columbia	Lehigh

\$351.04

\$423.27 \$423.27
 \$451.03 \$451.03
 \$383.60 \$383.60
 \$375.15 \$375.15

7	0	40	0	21	0	0
Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union

RATING AREA 7

9	12	37	36
Adams	Berks	Lancaster	York

RATING AR

319
Bucks

\$423.27	\$423.27	\$423.27	\$423.27	\$423.27	\$423.27	\$423.27	\$437.80	\$437.80	\$437.80	\$437.80	\$411.16
\$451.03	\$451.03	\$451.03	\$451.03	\$451.03	\$451.03	\$451.03	\$466.51	\$466.51	\$466.51	\$466.51	\$438.12
\$383.60	\$383.60	\$383.60	\$383.60	\$383.60	\$383.60	\$383.60	\$396.77	\$396.77	\$396.77	\$396.77	\$372.62
\$375.15	\$375.15	\$375.15	\$375.15	\$375.15	\$375.15	\$375.15	\$388.03	\$388.03	\$388.03	\$388.03	\$364.41

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

HIOS Plan ID (On Exchange)=>	24872PA0030005		24872PA0030009		24872PA0030002		24872PA0030003		24872PA0030005		24872PA0030009	
HIOS Plan ID (Off Exchange)=>	24872PA0030005		24872PA0030009		24872PA0030002		24872PA0030003		24872PA0030005		24872PA0030009	
Plan Marketing Name =>	UHC Navigate Silver 3500		UHC Navigate HSA Silver 3500		UHC Navigate Gold 1500		UHC Navigate Gold 1000		UHC Navigate Silver 3500		UHC Navigate HSA Silver 3500	
Form # =>	COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA	
Rating Area =>	Rating Area 8		Rating Area 8		Rating Area 9		Rating Area 9		Rating Area 9		Rating Area 9	
Network =>	UHC		UHC		UHC		UHC		UHC		UHC	
Metal =>	Silver		Silver		Gold		Gold		Silver		Silver	
Deductible =>	\$3,500		\$3,500		\$1,500		\$1,000		\$3,500		\$3,500	
Coinsurance =>	20%		0%		20%		0%		20%		0%	
Copays =>	\$40-\$80/\$120		\$30-\$60/\$100		\$30-\$60/\$100		\$30-\$60/\$100		\$40-\$80/\$120		\$30-\$60/\$100	
OOP Maximum =>	\$9,450		\$6,500		\$7,500		\$9,100		\$9,450		\$6,500	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$291.61	\$291.61	\$285.19	\$285.19	\$336.23	\$336.23	\$358.29	\$358.29	\$304.72	\$304.72	\$298.01	\$298.01
15	\$317.53	\$317.53	\$310.54	\$310.54	\$366.12	\$366.12	\$390.14	\$390.14	\$331.81	\$331.81	\$324.50	\$324.50
16	\$327.44	\$327.44	\$320.24	\$320.24	\$377.55	\$377.55	\$402.31	\$402.31	\$342.17	\$342.17	\$334.63	\$334.63
17	\$337.35	\$337.35	\$329.93	\$329.93	\$388.98	\$388.98	\$414.49	\$414.49	\$352.52	\$352.52	\$344.76	\$344.76
18	\$348.03	\$348.03	\$340.37	\$340.37	\$401.28	\$401.28	\$427.60	\$427.60	\$363.68	\$363.68	\$355.67	\$355.67
19	\$358.70	\$358.70	\$350.80	\$350.80	\$413.59	\$413.59	\$440.72	\$440.72	\$374.83	\$374.83	\$366.58	\$366.58
20	\$369.75	\$369.75	\$361.62	\$361.62	\$426.33	\$426.33	\$454.30	\$454.30	\$386.38	\$386.38	\$377.87	\$377.87
21	\$381.19	\$381.19	\$372.80	\$372.80	\$439.52	\$439.52	\$468.35	\$468.35	\$398.33	\$398.33	\$389.56	\$389.56
22	\$381.19	\$381.19	\$372.80	\$372.80	\$439.52	\$439.52	\$468.35	\$468.35	\$398.33	\$398.33	\$389.56	\$389.56
23	\$381.19	\$381.19	\$372.80	\$372.80	\$439.52	\$439.52	\$468.35	\$468.35	\$398.33	\$398.33	\$389.56	\$389.56
24	\$381.19	\$381.19	\$372.80	\$372.80	\$439.52	\$439.52	\$468.35	\$468.35	\$398.33	\$398.33	\$389.56	\$389.56
25	\$382.71	\$382.71	\$374.29	\$374.29	\$441.28	\$441.28	\$470.22	\$470.22	\$399.92	\$399.92	\$391.12	\$391.12
26	\$390.34	\$390.34	\$381.75	\$381.75	\$450.07	\$450.07	\$479.59	\$479.59	\$407.89	\$407.89	\$398.91	\$398.91
27	\$399.49	\$399.49	\$390.69	\$390.69	\$460.62	\$460.62	\$490.83	\$490.83	\$417.45	\$417.45	\$408.26	\$408.26
28	\$414.35	\$414.35	\$405.23	\$405.23	\$477.76	\$477.76	\$509.10	\$509.10	\$432.98	\$432.98	\$423.45	\$423.45
29	\$426.55	\$426.55	\$417.16	\$417.16	\$491.82	\$491.82	\$524.08	\$524.08	\$445.73	\$445.73	\$435.92	\$435.92
30	\$432.65	\$432.65	\$423.13	\$423.13	\$498.86	\$498.86	\$531.58	\$531.58	\$452.10	\$452.10	\$442.15	\$442.15
31	\$441.80	\$441.80	\$432.08	\$432.08	\$509.40	\$509.40	\$542.82	\$542.82	\$461.66	\$461.66	\$451.50	\$451.50
32	\$450.95	\$450.95	\$441.02	\$441.02	\$519.95	\$519.95	\$554.06	\$554.06	\$471.22	\$471.22	\$460.85	\$460.85
33	\$456.67	\$456.67	\$446.61	\$446.61	\$526.54	\$526.54	\$561.08	\$561.08	\$477.20	\$477.20	\$466.69	\$466.69
34	\$462.76	\$462.76	\$452.58	\$452.58	\$533.58	\$533.58	\$568.58	\$568.58	\$483.57	\$483.57	\$472.93	\$472.93
35	\$465.81	\$465.81	\$455.56	\$455.56	\$537.09	\$537.09	\$572.32	\$572.32	\$486.76	\$486.76	\$476.04	\$476.04
36	\$468.86	\$468.86	\$458.54	\$458.54	\$540.61	\$540.61	\$576.07	\$576.07	\$489.95	\$489.95	\$479.16	\$479.16
37	\$471.91	\$471.91	\$461.53	\$461.53	\$544.13	\$544.13	\$579.82	\$579.82	\$493.13	\$493.13	\$482.28	\$482.28
38	\$474.96	\$474.96	\$464.51	\$464.51	\$547.64	\$547.64	\$583.56	\$583.56	\$496.32	\$496.32	\$485.39	\$485.39
39	\$481.06	\$481.06	\$470.47	\$470.47	\$554.67	\$554.67	\$591.06	\$591.06	\$502.69	\$502.69	\$491.62	\$491.62
40	\$487.16	\$487.16	\$476.44	\$476.44	\$561.71	\$561.71	\$598.55	\$598.55	\$509.07	\$509.07	\$497.86	\$497.86
41	\$496.31	\$496.31	\$485.39	\$485.39	\$572.26	\$572.26	\$609.79	\$609.79	\$518.63	\$518.63	\$507.21	\$507.21
42	\$505.08	\$505.08	\$493.96	\$493.96	\$582.36	\$582.36	\$620.56	\$620.56	\$527.79	\$527.79	\$516.17	\$516.17
43	\$517.27	\$517.27	\$505.89	\$505.89	\$596.43	\$596.43	\$635.55	\$635.55	\$540.53	\$540.53	\$528.63	\$528.63
44	\$532.52	\$532.52	\$520.80	\$520.80	\$614.01	\$614.01	\$654.28	\$654.28	\$556.47	\$556.47	\$544.22	\$544.22
45	\$550.44	\$550.44	\$538.32	\$538.32	\$634.67	\$634.67	\$676.30	\$676.30	\$575.19	\$575.19	\$562.52	\$562.52
46	\$571.79	\$571.79	\$559.20	\$559.20	\$659.28	\$659.28	\$702.53	\$702.53	\$597.50	\$597.50	\$584.34	\$584.34
47	\$595.80	\$595.80	\$582.69	\$582.69	\$686.97	\$686.97	\$732.03	\$732.03	\$622.59	\$622.59	\$608.88	\$608.88
48	\$623.25	\$623.25	\$609.53	\$609.53	\$718.62	\$718.62	\$765.75	\$765.75	\$651.27	\$651.27	\$636.93	\$636.93
49	\$650.31	\$650.31	\$636.00	\$636.00	\$749.82	\$749.82	\$799.01	\$799.01	\$679.55	\$679.55	\$664.59	\$664.59
50	\$680.81	\$680.81	\$665.82	\$665.82	\$784.98	\$784.98	\$836.47	\$836.47	\$711.42	\$711.42	\$695.75	\$695.75
51	\$710.92	\$710.92	\$695.27	\$695.27	\$819.70	\$819.70	\$873.47	\$873.47	\$742.89	\$742.89	\$726.53	\$726.53
52	\$744.08	\$744.08	\$727.71	\$727.71	\$857.94	\$857.94	\$914.22	\$914.22	\$777.54	\$777.54	\$760.42	\$760.42
53	\$777.63	\$777.63	\$760.51	\$760.51	\$896.62	\$896.62	\$955.43	\$955.43	\$812.59	\$812.59	\$794.70	\$794.70
54	\$813.84	\$813.84	\$795.93	\$795.93	\$938.38	\$938.38	\$999.93	\$999.93	\$850.43	\$850.43	\$831.71	\$831.71
55	\$850.05	\$850.05	\$831.34	\$831.34	\$980.13	\$980.13	\$1,044.42	\$1,044.42	\$888.28	\$888.28	\$868.72	\$868.72
56	\$889.32	\$889.32	\$869.74	\$869.74	\$1,025.40	\$1,025.40	\$1,092.66	\$1,092.66	\$929.30	\$929.30	\$908.84	\$908.84
57	\$928.96	\$928.96	\$908.51	\$908.51	\$1,071.11	\$1,071.11	\$1,141.37	\$1,141.37	\$970.73	\$970.73	\$949.36	\$949.36
58	\$971.27	\$971.27	\$949.89	\$949.89	\$1,119.90	\$1,119.90	\$1,193.36	\$1,193.36	\$1,014.94	\$1,014.94	\$992.60	\$992.60
59	\$992.24	\$992.24	\$970.40	\$970.40	\$1,144.07	\$1,144.07	\$1,219.12	\$1,219.12	\$1,036.85	\$1,036.85	\$1,014.02	\$1,014.02
60	\$1,034.55	\$1,034.55	\$1,011.78	\$1,011.78	\$1,192.86	\$1,192.86	\$1,271.10	\$1,271.10	\$1,081.07	\$1,081.07	\$1,057.27	\$1,057.27
61	\$1,071.14	\$1,071.14	\$1,047.57	\$1,047.57	\$1,235.05	\$1,235.05	\$1,316.06	\$1,316.06	\$1,119.31	\$1,119.31	\$1,094.66	\$1,094.66
62	\$1,095.16	\$1,095.16	\$1,071.05	\$1,071.05	\$1,262.74	\$1,262.74	\$1,345.57	\$1,345.57	\$1,144.40	\$1,144.40	\$1,119.21	\$1,119.21
63	\$1,125.27	\$1,125.27	\$1,100.51	\$1,100.51	\$1,297.46	\$1,297.46	\$1,382.57	\$1,382.57	\$1,175.87	\$1,175.87	\$1,149.98	\$1,149.98
64+	\$1,143.57	\$1,143.57	\$1,118.40	\$1,118.40	\$1,318.56	\$1,318.56	\$1,405.05	\$1,405.05	\$1,194.99	\$1,194.99	\$1,168.68	\$1,168.68

UnitedHealthcare of Pennsylvania, Inc.
 Small Group
 Plan Design Summary

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
24872PA0030001	UHC Navigate HSA Bronze 6850	HMO	Bronze	Off	UHCPA	1,2,3,4,5,6	RA 1-5 - All; RA 6 - Centre Only
24872PA0030002	UHC Navigate Gold 1500	HMO	Gold	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030003	UHC Navigate Gold 1000	HMO	Gold	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030005	UHC Navigate Silver 3500	HMO	Silver	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030009	UHC Navigate HSA Silver 3500	HMO	Silver	Off	UHCPA	3,6,7,8,9	All - Except Centre

Company Name UnitedHealthcare of Pennsylvania, Inc.

Market Small Group

RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

05-01-2023 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
24872PA0030001	UHC Navigate HSA Bronze 6850	HMO	Bronze	Off
24872PA0030002	UHC Navigate Gold 1500	HMO	Gold	Off
24872PA0030003	UHC Navigate Gold 1000	HMO	Gold	Off
24872PA0030005	UHC Navigate Silver 3500	HMO	Silver	Off
24872PA0030009	UHC Navigate HSA Silver 3500	HMO	Silver	Off

RATING AREA 1

0	0	0	0
Crawford	Clarion	Erie	Forest
\$313.07	\$313.07	\$313.07	\$313.07

0	2
Washington	Westmoreland

\$346.91

\$346.91

RATING AREA 5

0	0	0	0	0	0	0
Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset

\$347.67

\$347.67

\$347.67

\$347.67

\$347.67

\$347.67

\$347.67

RATING AREA 6

8	0	39
Centre	Columbia	Lehigh

\$359.11

\$433.01 \$433.01

\$461.40 \$461.40

\$392.43 \$392.43

\$383.78 \$383.78

7	0	40	0	21	0	0
Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union

RATING AREA 7

9	12	37	36
Adams	Berks	Lancaster	York

RATING AR

319
Bucks

\$433.01	\$433.01	\$433.01	\$433.01	\$433.01	\$433.01	\$433.01	\$447.87	\$447.87	\$447.87	\$447.87	\$420.61
\$461.40	\$461.40	\$461.40	\$461.40	\$461.40	\$461.40	\$461.40	\$477.24	\$477.24	\$477.24	\$477.24	\$448.19
\$392.43	\$392.43	\$392.43	\$392.43	\$392.43	\$392.43	\$392.43	\$405.90	\$405.90	\$405.90	\$405.90	\$381.19
\$383.78	\$383.78	\$383.78	\$383.78	\$383.78	\$383.78	\$383.78	\$396.95	\$396.95	\$396.95	\$396.95	\$372.80

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

HIOS Plan ID (On Exchange)=>	24872PA0030005		24872PA0030009		24872PA0030002		24872PA0030003		24872PA0030005		24872PA0030009	
HIOS Plan ID (Off Exchange)=>	24872PA0030005		24872PA0030009		24872PA0030002		24872PA0030003		24872PA0030005		24872PA0030009	
Plan Marketing Name =>	UHC Navigate Silver 3500		UHC Navigate HSA Silver 3500		UHC Navigate Gold 1500		UHC Navigate Gold 1000		UHC Navigate Silver 3500		UHC Navigate HSA Silver 3500	
Form # =>	COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA	
Rating Area =>	Rating Area 8		Rating Area 8		Rating Area 9		Rating Area 9		Rating Area 9		Rating Area 9	
Network =>	UHC		UHC		UHC		UHC		UHC		UHC	
Metal =>	Silver		Silver		Gold		Gold		Silver		Silver	
Deductible =>	\$3,500		\$3,500		\$1,500		\$1,000		\$3,500		\$3,500	
Coinsurance =>	20%		0%		20%		0%		20%		0%	
Copays =>	\$40-\$80/\$120		\$30-\$60/\$100		\$30-\$60/\$100		\$30-\$60/\$100		\$40-\$80/\$120		\$30-\$60/\$100	
OOP Maximum =>	\$9,450		\$6,500		\$7,500		\$9,100		\$9,450		\$6,500	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$298.46	\$298.46	\$291.88	\$291.88	\$344.13	\$344.13	\$366.69	\$366.69	\$311.88	\$311.88	\$305.01	\$305.01
15	\$324.99	\$324.99	\$317.82	\$317.82	\$374.72	\$374.72	\$399.28	\$399.28	\$339.60	\$339.60	\$332.12	\$332.12
16	\$335.13	\$335.13	\$327.74	\$327.74	\$386.41	\$386.41	\$411.74	\$411.74	\$350.20	\$350.20	\$342.48	\$342.48
17	\$345.27	\$345.27	\$337.66	\$337.66	\$398.11	\$398.11	\$424.21	\$424.21	\$360.80	\$360.80	\$352.85	\$352.85
18	\$356.20	\$356.20	\$348.35	\$348.35	\$410.70	\$410.70	\$437.63	\$437.63	\$372.21	\$372.21	\$364.01	\$364.01
19	\$367.12	\$367.12	\$359.03	\$359.03	\$423.30	\$423.30	\$451.05	\$451.05	\$383.63	\$383.63	\$375.18	\$375.18
20	\$378.44	\$378.44	\$370.09	\$370.09	\$436.34	\$436.34	\$464.95	\$464.95	\$395.45	\$395.45	\$386.74	\$386.74
21	\$390.14	\$390.14	\$381.54	\$381.54	\$449.84	\$449.84	\$479.33	\$479.33	\$407.68	\$407.68	\$398.70	\$398.70
22	\$390.14	\$390.14	\$381.54	\$381.54	\$449.84	\$449.84	\$479.33	\$479.33	\$407.68	\$407.68	\$398.70	\$398.70
23	\$390.14	\$390.14	\$381.54	\$381.54	\$449.84	\$449.84	\$479.33	\$479.33	\$407.68	\$407.68	\$398.70	\$398.70
24	\$390.14	\$390.14	\$381.54	\$381.54	\$449.84	\$449.84	\$479.33	\$479.33	\$407.68	\$407.68	\$398.70	\$398.70
25	\$391.70	\$391.70	\$383.07	\$383.07	\$451.64	\$451.64	\$481.25	\$481.25	\$409.31	\$409.31	\$400.29	\$400.29
26	\$399.50	\$399.50	\$390.70	\$390.70	\$460.64	\$460.64	\$490.83	\$490.83	\$417.46	\$417.46	\$408.27	\$408.27
27	\$408.87	\$408.87	\$399.85	\$399.85	\$471.43	\$471.43	\$502.34	\$502.34	\$427.25	\$427.25	\$417.84	\$417.84
28	\$424.08	\$424.08	\$414.73	\$414.73	\$488.98	\$488.98	\$521.03	\$521.03	\$443.15	\$443.15	\$433.39	\$433.39
29	\$436.57	\$436.57	\$426.94	\$426.94	\$503.37	\$503.37	\$536.37	\$536.37	\$456.19	\$456.19	\$446.15	\$446.15
30	\$442.81	\$442.81	\$433.05	\$433.05	\$510.57	\$510.57	\$544.04	\$544.04	\$462.72	\$462.72	\$452.52	\$452.52
31	\$452.17	\$452.17	\$442.20	\$442.20	\$521.36	\$521.36	\$555.54	\$555.54	\$472.50	\$472.50	\$462.09	\$462.09
32	\$461.54	\$461.54	\$451.36	\$451.36	\$532.16	\$532.16	\$567.05	\$567.05	\$482.29	\$482.29	\$471.66	\$471.66
33	\$467.39	\$467.39	\$457.08	\$457.08	\$538.91	\$538.91	\$574.24	\$574.24	\$488.40	\$488.40	\$477.64	\$477.64
34	\$473.63	\$473.63	\$463.19	\$463.19	\$546.11	\$546.11	\$581.91	\$581.91	\$494.92	\$494.92	\$484.02	\$484.02
35	\$476.75	\$476.75	\$466.24	\$466.24	\$549.70	\$549.70	\$585.74	\$585.74	\$498.18	\$498.18	\$487.21	\$487.21
36	\$479.87	\$479.87	\$469.29	\$469.29	\$553.30	\$553.30	\$589.58	\$589.58	\$501.45	\$501.45	\$490.40	\$490.40
37	\$482.99	\$482.99	\$472.35	\$472.35	\$556.90	\$556.90	\$593.41	\$593.41	\$504.71	\$504.71	\$493.59	\$493.59
38	\$486.11	\$486.11	\$475.40	\$475.40	\$560.50	\$560.50	\$597.25	\$597.25	\$507.97	\$507.97	\$496.78	\$496.78
39	\$492.36	\$492.36	\$481.50	\$481.50	\$567.70	\$567.70	\$604.91	\$604.91	\$514.49	\$514.49	\$503.16	\$503.16
40	\$498.60	\$498.60	\$487.61	\$487.61	\$574.90	\$574.90	\$612.58	\$612.58	\$521.02	\$521.02	\$509.54	\$509.54
41	\$507.96	\$507.96	\$496.77	\$496.77	\$585.69	\$585.69	\$624.09	\$624.09	\$530.80	\$530.80	\$519.11	\$519.11
42	\$516.94	\$516.94	\$505.54	\$505.54	\$596.04	\$596.04	\$635.11	\$635.11	\$540.18	\$540.18	\$528.28	\$528.28
43	\$529.42	\$529.42	\$517.75	\$517.75	\$610.43	\$610.43	\$650.45	\$650.45	\$553.22	\$553.22	\$541.04	\$541.04
44	\$545.03	\$545.03	\$533.01	\$533.01	\$628.43	\$628.43	\$669.62	\$669.62	\$569.53	\$569.53	\$556.98	\$556.98
45	\$563.36	\$563.36	\$550.94	\$550.94	\$649.57	\$649.57	\$692.15	\$692.15	\$588.69	\$588.69	\$575.72	\$575.72
46	\$585.21	\$585.21	\$572.31	\$572.31	\$674.76	\$674.76	\$719.00	\$719.00	\$611.52	\$611.52	\$598.05	\$598.05
47	\$609.79	\$609.79	\$596.35	\$596.35	\$703.10	\$703.10	\$749.19	\$749.19	\$637.20	\$637.20	\$623.17	\$623.17
48	\$637.88	\$637.88	\$623.82	\$623.82	\$735.49	\$735.49	\$783.70	\$783.70	\$666.56	\$666.56	\$651.87	\$651.87
49	\$665.58	\$665.58	\$650.91	\$650.91	\$767.43	\$767.43	\$817.74	\$817.74	\$695.50	\$695.50	\$680.18	\$680.18
50	\$696.79	\$696.79	\$681.43	\$681.43	\$803.41	\$803.41	\$856.08	\$856.08	\$728.12	\$728.12	\$712.08	\$712.08
51	\$727.61	\$727.61	\$711.57	\$711.57	\$838.95	\$838.95	\$893.95	\$893.95	\$760.32	\$760.32	\$743.58	\$743.58
52	\$761.55	\$761.55	\$744.77	\$744.77	\$878.09	\$878.09	\$935.65	\$935.65	\$795.79	\$795.79	\$778.26	\$778.26
53	\$795.89	\$795.89	\$778.34	\$778.34	\$917.67	\$917.67	\$977.83	\$977.83	\$831.67	\$831.67	\$813.35	\$813.35
54	\$832.95	\$832.95	\$814.59	\$814.59	\$960.41	\$960.41	\$1,023.37	\$1,023.37	\$870.40	\$870.40	\$851.22	\$851.22
55	\$870.01	\$870.01	\$850.83	\$850.83	\$1,003.14	\$1,003.14	\$1,068.91	\$1,068.91	\$909.13	\$909.13	\$889.10	\$889.10
56	\$910.20	\$910.20	\$890.13	\$890.13	\$1,049.48	\$1,049.48	\$1,118.28	\$1,118.28	\$951.12	\$951.12	\$930.17	\$930.17
57	\$950.77	\$950.77	\$929.81	\$929.81	\$1,096.26	\$1,096.26	\$1,168.13	\$1,168.13	\$993.52	\$993.52	\$971.63	\$971.63
58	\$994.08	\$994.08	\$972.16	\$972.16	\$1,146.19	\$1,146.19	\$1,221.33	\$1,221.33	\$1,038.77	\$1,038.77	\$1,015.89	\$1,015.89
59	\$1,015.53	\$1,015.53	\$993.15	\$993.15	\$1,170.93	\$1,170.93	\$1,247.70	\$1,247.70	\$1,061.19	\$1,061.19	\$1,037.82	\$1,037.82
60	\$1,058.84	\$1,058.84	\$1,035.50	\$1,035.50	\$1,220.87	\$1,220.87	\$1,300.90	\$1,300.90	\$1,106.44	\$1,106.44	\$1,082.07	\$1,082.07
61	\$1,096.29	\$1,096.29	\$1,072.13	\$1,072.13	\$1,264.05	\$1,264.05	\$1,346.92	\$1,346.92	\$1,145.58	\$1,145.58	\$1,120.35	\$1,120.35
62	\$1,120.87	\$1,120.87	\$1,096.16	\$1,096.16	\$1,292.39	\$1,292.39	\$1,377.12	\$1,377.12	\$1,171.26	\$1,171.26	\$1,145.47	\$1,145.47
63	\$1,151.69	\$1,151.69	\$1,126.31	\$1,126.31	\$1,327.93	\$1,327.93	\$1,414.98	\$1,414.98	\$1,203.47	\$1,203.47	\$1,176.96	\$1,176.96
64+	\$1,170.42	\$1,170.42	\$1,144.62	\$1,144.62	\$1,349.52	\$1,349.52	\$1,437.99	\$1,437.99	\$1,223.04	\$1,223.04	\$1,196.10	\$1,196.10

UnitedHealthcare of Pennsylvania, Inc.
Small Group
Plan Design Summary

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
24872PA0030001	UHC Navigate HSA Bronze 6850	HMO	Bronze	Off	UHCPA	1,2,3,4,5,6	RA 1-5 - All; RA 6 - Centre Only
24872PA0030002	UHC Navigate Gold 1500	HMO	Gold	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030003	UHC Navigate Gold 1000	HMO	Gold	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030005	UHC Navigate Silver 3500	HMO	Silver	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030009	UHC Navigate HSA Silver 3500	HMO	Silver	Off	UHCPA	3,6,7,8,9	All - Except Centre

Company Name UnitedHealthcare of Pennsylvania, Inc.

Market Small Group

RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

08-01-2023 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
24872PA0030001	UHC Navigate HSA Bronze 6850	HMO	Bronze	Off
24872PA0030002	UHC Navigate Gold 1500	HMO	Gold	Off
24872PA0030003	UHC Navigate Gold 1000	HMO	Gold	Off
24872PA0030005	UHC Navigate Silver 3500	HMO	Silver	Off
24872PA0030009	UHC Navigate HSA Silver 3500	HMO	Silver	Off

RATING AREA 1

0	0	0	0
Crawford	Clarion	Erie	Forest
\$320.41	\$320.41	\$320.41	\$320.41

0	2
Washington	Westmoreland

\$355.05

\$355.05

RATING AREA 5

0	0	0	0	0	0	0
Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset

\$355.83

\$355.83

\$355.83

\$355.83

\$355.83

\$355.83

\$355.83

RATING AREA 6

8	0	39	7
Centre	Columbia	Lehigh	Mifflin

\$367.53

\$443.17 \$443.17 \$443.17

\$472.23 \$472.23 \$472.23

\$401.63 \$401.63 \$401.63

\$392.79 \$392.79 \$392.79

0	40	0	21	0	0
Montour	Northampton	Northumberland	Schuylkill	Snyder	Union

RATING AREA 7

9	12	37	36
Adams	Berks	Lancaster	York

RATING AREA 8

319	150	118
Bucks	Chester	Delaware

\$443.17	\$443.17	\$443.17	\$443.17	\$443.17	\$443.17	\$458.38	\$458.38	\$458.38	\$458.38	\$430.48	\$430.48	\$430.48
\$472.23	\$472.23	\$472.23	\$472.23	\$472.23	\$472.23	\$488.44	\$488.44	\$488.44	\$488.44	\$458.71	\$458.71	\$458.71
\$401.63	\$401.63	\$401.63	\$401.63	\$401.63	\$401.63	\$415.42	\$415.42	\$415.42	\$415.42	\$390.14	\$390.14	\$390.14
\$392.79	\$392.79	\$392.79	\$392.79	\$392.79	\$392.79	\$406.27	\$406.27	\$406.27	\$406.27	\$381.54	\$381.54	\$381.54

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

HIOS Plan ID (On Exchange)=>	24872PA0030005		24872PA0030009		24872PA0030002		24872PA0030003		24872PA0030005		24872PA0030009	
HIOS Plan ID (Off Exchange)=>	24872PA0030005		24872PA0030009		24872PA0030002		24872PA0030003		24872PA0030005		24872PA0030009	
Plan Marketing Name =>	UHC Navigate Silver 3500		UHC Navigate HSA Silver 3500		UHC Navigate Gold 1500		UHC Navigate Gold 1000		UHC Navigate Silver 3500		UHC Navigate HSA Silver 3500	
Form # =>	COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA		COC24.HMO.2018.SG.PA	
Rating Area =>	Rating Area 8		Rating Area 8		Rating Area 9		Rating Area 9		Rating Area 9		Rating Area 9	
Network =>	UHC		UHC		UHC		UHC		UHC		UHC	
Metal =>	Silver		Silver		Gold		Gold		Silver		Silver	
Deductible =>	\$3,500		\$3,500		\$1,500		\$1,000		\$3,500		\$3,500	
Coinsurance =>	20%		0%		20%		0%		20%		0%	
Copays =>	\$40-\$80/\$120		\$30-\$60/\$100		\$30-\$60/\$100		\$30-\$60/\$100		\$40-\$80/\$120		\$30-\$60/\$100	
OOP Maximum =>	\$9,450		\$6,500		\$7,500		\$9,100		\$9,450		\$6,500	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$305.30	\$305.30	\$298.57	\$298.57	\$352.01	\$352.01	\$375.09	\$375.09	\$319.02	\$319.02	\$312.00	\$312.00
15	\$332.43	\$332.43	\$325.11	\$325.11	\$383.30	\$383.30	\$408.44	\$408.44	\$347.38	\$347.38	\$339.73	\$339.73
16	\$342.81	\$342.81	\$335.26	\$335.26	\$395.27	\$395.27	\$421.18	\$421.18	\$358.22	\$358.22	\$350.33	\$350.33
17	\$353.19	\$353.19	\$345.41	\$345.41	\$407.23	\$407.23	\$433.93	\$433.93	\$369.06	\$369.06	\$360.94	\$360.94
18	\$364.36	\$364.36	\$356.33	\$356.33	\$420.12	\$420.12	\$447.66	\$447.66	\$380.74	\$380.74	\$372.36	\$372.36
19	\$375.53	\$375.53	\$367.26	\$367.26	\$433.00	\$433.00	\$461.39	\$461.39	\$392.42	\$392.42	\$383.78	\$383.78
20	\$387.11	\$387.11	\$378.58	\$378.58	\$446.35	\$446.35	\$475.61	\$475.61	\$404.51	\$404.51	\$395.60	\$395.60
21	\$399.08	\$399.08	\$390.29	\$390.29	\$460.15	\$460.15	\$490.32	\$490.32	\$417.02	\$417.02	\$407.84	\$407.84
22	\$399.08	\$399.08	\$390.29	\$390.29	\$460.15	\$460.15	\$490.32	\$490.32	\$417.02	\$417.02	\$407.84	\$407.84
23	\$399.08	\$399.08	\$390.29	\$390.29	\$460.15	\$460.15	\$490.32	\$490.32	\$417.02	\$417.02	\$407.84	\$407.84
24	\$399.08	\$399.08	\$390.29	\$390.29	\$460.15	\$460.15	\$490.32	\$490.32	\$417.02	\$417.02	\$407.84	\$407.84
25	\$400.68	\$400.68	\$391.85	\$391.85	\$461.99	\$461.99	\$492.28	\$492.28	\$418.69	\$418.69	\$409.47	\$409.47
26	\$408.66	\$408.66	\$399.66	\$399.66	\$471.19	\$471.19	\$502.09	\$502.09	\$427.03	\$427.03	\$417.63	\$417.63
27	\$418.24	\$418.24	\$409.02	\$409.02	\$482.24	\$482.24	\$513.86	\$513.86	\$437.04	\$437.04	\$427.42	\$427.42
28	\$433.80	\$433.80	\$424.25	\$424.25	\$500.18	\$500.18	\$532.98	\$532.98	\$453.30	\$453.30	\$443.32	\$443.32
29	\$446.57	\$446.57	\$436.73	\$436.73	\$514.91	\$514.91	\$548.67	\$548.67	\$466.65	\$466.65	\$456.37	\$456.37
30	\$452.96	\$452.96	\$442.98	\$442.98	\$522.27	\$522.27	\$556.51	\$556.51	\$473.32	\$473.32	\$462.90	\$462.90
31	\$462.53	\$462.53	\$452.35	\$452.35	\$533.31	\$533.31	\$568.28	\$568.28	\$483.33	\$483.33	\$472.69	\$472.69
32	\$472.11	\$472.11	\$461.71	\$461.71	\$544.36	\$544.36	\$580.05	\$580.05	\$493.33	\$493.33	\$482.47	\$482.47
33	\$478.10	\$478.10	\$467.57	\$467.57	\$551.26	\$551.26	\$587.40	\$587.40	\$499.59	\$499.59	\$488.59	\$488.59
34	\$484.48	\$484.48	\$473.81	\$473.81	\$558.62	\$558.62	\$595.25	\$595.25	\$506.26	\$506.26	\$495.12	\$495.12
35	\$487.68	\$487.68	\$476.93	\$476.93	\$562.30	\$562.30	\$599.17	\$599.17	\$509.60	\$509.60	\$498.38	\$498.38
36	\$490.87	\$490.87	\$480.06	\$480.06	\$565.98	\$565.98	\$603.09	\$603.09	\$512.93	\$512.93	\$501.64	\$501.64
37	\$494.06	\$494.06	\$483.18	\$483.18	\$569.67	\$569.67	\$607.02	\$607.02	\$516.27	\$516.27	\$504.91	\$504.91
38	\$497.25	\$497.25	\$486.30	\$486.30	\$573.35	\$573.35	\$610.94	\$610.94	\$519.61	\$519.61	\$508.17	\$508.17
39	\$503.64	\$503.64	\$492.55	\$492.55	\$580.71	\$580.71	\$618.78	\$618.78	\$526.28	\$526.28	\$514.69	\$514.69
40	\$510.02	\$510.02	\$498.79	\$498.79	\$588.07	\$588.07	\$626.63	\$626.63	\$532.95	\$532.95	\$521.22	\$521.22
41	\$519.60	\$519.60	\$508.16	\$508.16	\$599.12	\$599.12	\$638.40	\$638.40	\$542.96	\$542.96	\$531.01	\$531.01
42	\$528.78	\$528.78	\$517.13	\$517.13	\$609.70	\$609.70	\$649.67	\$649.67	\$552.55	\$552.55	\$540.39	\$540.39
43	\$541.55	\$541.55	\$529.62	\$529.62	\$624.42	\$624.42	\$665.36	\$665.36	\$565.90	\$565.90	\$553.44	\$553.44
44	\$557.51	\$557.51	\$545.24	\$545.24	\$642.83	\$642.83	\$684.98	\$684.98	\$582.58	\$582.58	\$569.75	\$569.75
45	\$576.27	\$576.27	\$563.58	\$563.58	\$664.46	\$664.46	\$708.02	\$708.02	\$602.18	\$602.18	\$588.92	\$588.92
46	\$598.62	\$598.62	\$585.44	\$585.44	\$690.23	\$690.23	\$735.48	\$735.48	\$625.53	\$625.53	\$611.76	\$611.76
47	\$623.76	\$623.76	\$610.02	\$610.02	\$719.21	\$719.21	\$766.37	\$766.37	\$651.80	\$651.80	\$637.45	\$637.45
48	\$652.50	\$652.50	\$638.12	\$638.12	\$752.35	\$752.35	\$801.67	\$801.67	\$681.83	\$681.83	\$666.82	\$666.82
49	\$680.83	\$680.83	\$665.83	\$665.83	\$785.02	\$785.02	\$836.49	\$836.49	\$711.44	\$711.44	\$695.78	\$695.78
50	\$712.76	\$712.76	\$697.06	\$697.06	\$821.83	\$821.83	\$875.71	\$875.71	\$744.80	\$744.80	\$728.40	\$728.40
51	\$744.28	\$744.28	\$727.89	\$727.89	\$858.18	\$858.18	\$914.45	\$914.45	\$777.74	\$777.74	\$760.62	\$760.62
52	\$779.00	\$779.00	\$761.85	\$761.85	\$898.21	\$898.21	\$957.10	\$957.10	\$814.02	\$814.02	\$796.10	\$796.10
53	\$814.12	\$814.12	\$796.19	\$796.19	\$938.71	\$938.71	\$1,000.25	\$1,000.25	\$850.72	\$850.72	\$831.99	\$831.99
54	\$852.04	\$852.04	\$833.27	\$833.27	\$982.42	\$982.42	\$1,046.83	\$1,046.83	\$890.34	\$890.34	\$870.74	\$870.74
55	\$889.95	\$889.95	\$870.35	\$870.35	\$1,026.13	\$1,026.13	\$1,093.41	\$1,093.41	\$929.95	\$929.95	\$909.48	\$909.48
56	\$931.05	\$931.05	\$910.55	\$910.55	\$1,073.53	\$1,073.53	\$1,143.92	\$1,143.92	\$972.91	\$972.91	\$951.49	\$951.49
57	\$972.56	\$972.56	\$951.14	\$951.14	\$1,121.39	\$1,121.39	\$1,194.91	\$1,194.91	\$1,016.28	\$1,016.28	\$993.91	\$993.91
58	\$1,016.86	\$1,016.86	\$994.46	\$994.46	\$1,172.46	\$1,172.46	\$1,249.34	\$1,249.34	\$1,062.57	\$1,062.57	\$1,039.18	\$1,039.18
59	\$1,038.81	\$1,038.81	\$1,015.92	\$1,015.92	\$1,197.77	\$1,197.77	\$1,276.30	\$1,276.30	\$1,085.50	\$1,085.50	\$1,061.61	\$1,061.61
60	\$1,083.10	\$1,083.10	\$1,059.25	\$1,059.25	\$1,248.85	\$1,248.85	\$1,330.73	\$1,330.73	\$1,131.79	\$1,131.79	\$1,106.88	\$1,106.88
61	\$1,121.41	\$1,121.41	\$1,096.71	\$1,096.71	\$1,293.02	\$1,293.02	\$1,377.80	\$1,377.80	\$1,171.83	\$1,171.83	\$1,146.03	\$1,146.03
62	\$1,146.56	\$1,146.56	\$1,121.30	\$1,121.30	\$1,322.01	\$1,322.01	\$1,408.69	\$1,408.69	\$1,198.10	\$1,198.10	\$1,171.72	\$1,171.72
63	\$1,178.08	\$1,178.08	\$1,152.14	\$1,152.14	\$1,358.36	\$1,358.36	\$1,447.42	\$1,447.42	\$1,231.04	\$1,231.04	\$1,203.94	\$1,203.94
64+	\$1,197.24	\$1,197.24	\$1,170.87	\$1,170.87	\$1,380.45	\$1,380.45	\$1,470.96	\$1,470.96	\$1,251.06	\$1,251.06	\$1,223.52	\$1,223.52

UnitedHealthcare of Pennsylvania, Inc.
 Small Group
 Plan Design Summary

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
24872PA0030001	UHC Navigate HSA Bronze 6850	HMO	Bronze	Off	UHCPA	1,2,3,4,5,6	RA 1-5 - All; RA 6 - Centre Only
24872PA0030002	UHC Navigate Gold 1500	HMO	Gold	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030003	UHC Navigate Gold 1000	HMO	Gold	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030005	UHC Navigate Silver 3500	HMO	Silver	Off	UHCPA	3,6,7,8,9	All - Except Centre
24872PA0030009	UHC Navigate HSA Silver 3500	HMO	Silver	Off	UHCPA	3,6,7,8,9	All - Except Centre

Company Name UnitedHealthcare of Pennsylvania, Inc.

Market Small Group

RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

11-01-2023 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
24872PA0030001	UHC Navigate HSA Bronze 6850	HMO	Bronze	Off
24872PA0030002	UHC Navigate Gold 1500	HMO	Gold	Off
24872PA0030003	UHC Navigate Gold 1000	HMO	Gold	Off
24872PA0030005	UHC Navigate Silver 3500	HMO	Silver	Off
24872PA0030009	UHC Navigate HSA Silver 3500	HMO	Silver	Off

RATING AREA 1

0	0	0	0
Crawford	Clarion	Erie	Forest
\$327.76	\$327.76	\$327.76	\$327.76

0	2
Washington	Westmoreland
\$363.18	\$363.18

RATING AREA 5

0	0	0	0	0	0	0
Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
\$363.99	\$363.99	\$363.99	\$363.99	\$363.99	\$363.99	\$363.99

RATING AREA 6

8	0	39	7
Centre	Columbia	Lehigh	Mifflin
\$375.96			

\$453.33 \$453.33 \$453.33
 \$483.05 \$483.05 \$483.05
 \$410.84 \$410.84 \$410.84
 \$401.79 \$401.79 \$401.79

0	40	0	21	0	0
Montour	Northampton	Northumberland	Schuylkill	Snyder	Union

RATING AREA 7

9	12	37	36
Adams	Berks	Lancaster	York

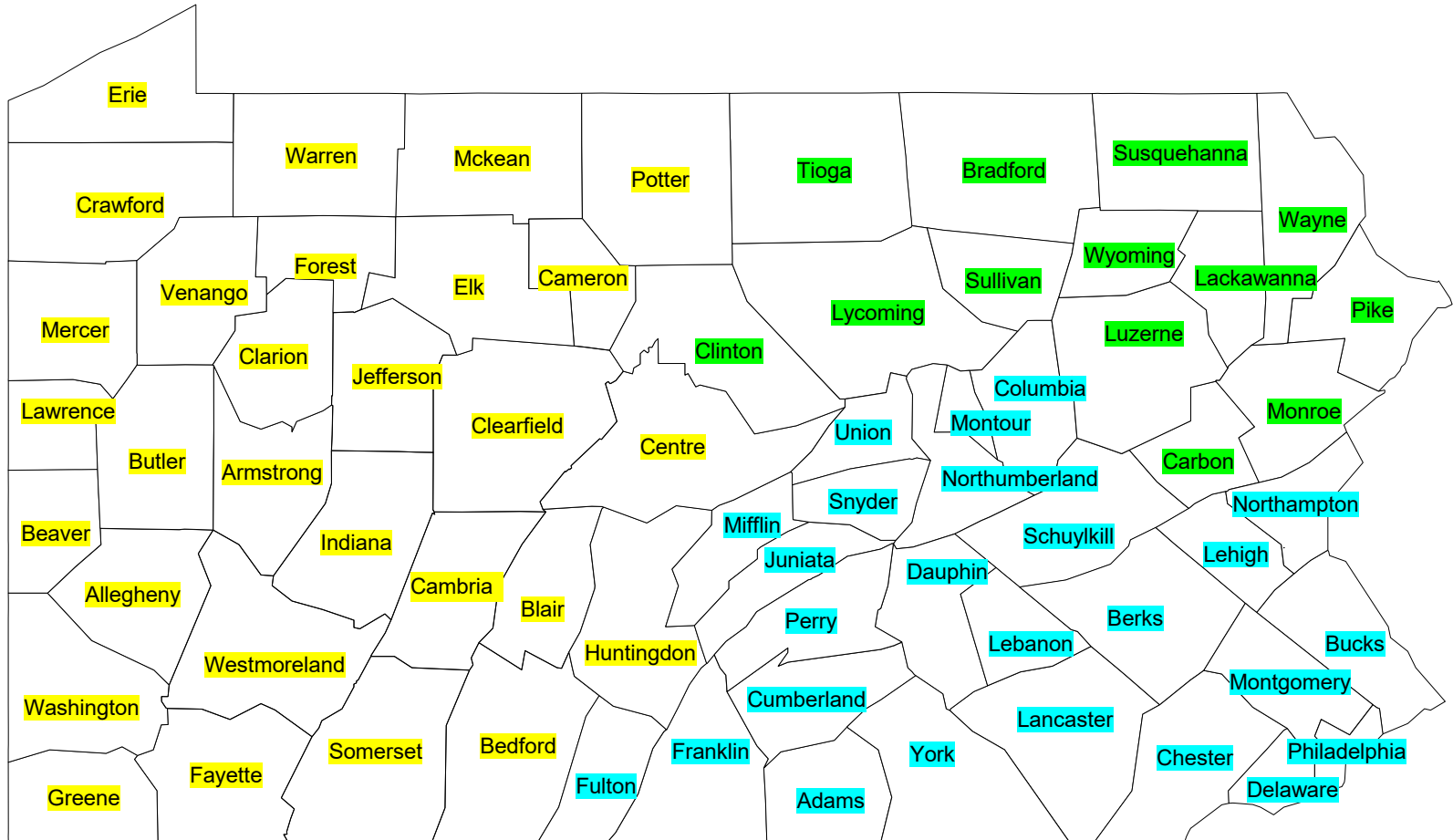
RATING AREA 8

319	150	118
Bucks	Chester	Delaware

\$453.33	\$453.33	\$453.33	\$453.33	\$453.33	\$453.33	\$468.88	\$468.88	\$468.88	\$468.88	\$440.35	\$440.35	\$440.35
\$483.05	\$483.05	\$483.05	\$483.05	\$483.05	\$483.05	\$499.63	\$499.63	\$499.63	\$499.63	\$469.22	\$469.22	\$469.22
\$410.84	\$410.84	\$410.84	\$410.84	\$410.84	\$410.84	\$424.94	\$424.94	\$424.94	\$424.94	\$399.08	\$399.08	\$399.08
\$401.79	\$401.79	\$401.79	\$401.79	\$401.79	\$401.79	\$415.58	\$415.58	\$415.58	\$415.58	\$390.29	\$390.29	\$390.29

Issuer: UHIC & UHCPA

Market: Market Numbers – Plan Availability



Key

[Cyan]: Markets 556 & 558

[Yellow]: Markets 560, 561 & 562

[Green]: Market 557

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T
1	Unified Rate Review v6.0																		
2																			
3	Company Legal Name:	UnitedHealthcare of Pennsylvania, Inc.																	
4	HIOS Issuer ID:	24872	State:	PA															
5	Effective Date of Rate Change(s):	1/1/2024	Market:	Small Group															
6																			
7																			
8	Market Level Calculations (Same for all Plans)																		
9																			
10																			
11	Section I: Experience Period Data																		
12	Experience Period:	1/1/2022	to	12/31/2022															
13			Total		PMPM														
14	Allowed Claims		\$8,013,602.39		\$513.53														
15	Reinsurance		\$0.00		\$0.00														
16	Incurred Claims in Experience Period		\$6,591,864.55		\$422.42														
17	Risk Adjustment		-\$1,479,471.02		-\$94.81														
18	Experience Period Premium		\$7,373,689.70		\$472.52														
19	Experience Period Member Months		15,605																
20																			
21	Section II: Projections																		
22			Year 1 Trend		Year 2 Trend		Trended EHB Allowed Claims												
23	Benefit Category	Experience Period Index Rate PMPM	Cost	Utilization	Cost	Utilization	PMPM												
24	Inpatient Hospital	\$175.29	1.037	1.045	1.037	1.045	\$205.85												
25	Outpatient Hospital	\$151.58	1.037	1.045	1.037	1.045	\$178.00												
26	Professional	\$111.28	1.037	1.045	1.037	1.045	\$130.68												
27	Other Medical	\$0.99	1.037	1.045	1.037	1.045	\$1.16												
28	Capitation	\$13.75	1.037	1.045	1.037	1.045	\$16.15												
29	Prescription Drug	\$60.11	1.037	1.045	1.037	1.045	\$70.59												
30	Total	\$513.00					\$602.43												
31																			
32	Morbidity Adjustment				1.000														
33	Demographic Shift				0.999														
34	Plan Design Changes				1.000														
35	Other				0.763														
36	Adjusted Trended EHB Allowed Claims PMPM for		1/1/2024		\$459.20														
37																			
38	Manual EHB Allowed Claims PMPM				\$535.13														
39	Applied Credibility %				7.00%														
40																			
41	Projected Period Totals																		
42	Projected Index Rate for	1/1/2024			\$529.82	\$9,127,738.96													
43	Reinsurance				\$0.00	\$0.00													
44	Risk Adjustment Payment/Charge				-\$54.93	-\$946,334.04													
45	Exchange User Fees				0.00%	\$0.00													
46	Market Adjusted Index Rate				\$584.75	\$10,074,073.00													
47																			
48	Projected Member Months				17,228														
49																			
50	Information Not Releasable to the Public Unless Authorized by Law: This information has not been publicly 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.																		
51																			

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.

Product-Plan Data Collection

Company Legal Name: UnitedHealthcare of Pennsylvania, Inc.
 HIOS Issuer ID: 24872 State: PA
 Effective Date of Rate Change(s): 1/1/2024 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									
24872PA003 Plans									
24872PA003									
1.1 Product Name									
1.2 Product ID									
1.3 Plan Name	DHRS	CVOJ	CVO2	DHRS	CVOJ	CVO2	CVO4	CVO5	CVO6
1.4 Plan ID (Standard Component ID)	24872PA0030001	24872PA0030002	24872PA0030003	24872PA0030005	24872PA0030009	24872PA0030004	24872PA0030006	24872PA0030007	24872PA0030008
1.5 Metal	Bronze	Gold	Gold	Silver	Silver	Gold	Silver	Silver	Silver
1.6 AV Metal Value	0.649	0.782	0.781	0.717	0.718	0.783	0.689	0.720	0.709
1.7 Plan Category	Renewing	Renewing	Renewing	Renewing	Renewing	Terminated	Terminated	Terminated	Terminated
1.8 Plan Type	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO
1.9 Exchange Plan?	No	No	No	No	No	No	No	No	No
1.10 Effective Date of Proposed Rates	1/1/2024	1/1/2024	1/1/2024	1/1/2024	1/1/2024	1/1/2024	1/1/2024	1/1/2024	1/1/2024
1.11 Cumulative Rate Change % (over 12 mos prior)	7.07%	10.63%	10.40%	11.05%	9.43%	0.00%	0.00%	0.00%	0.00%
1.12 Product Rate Increase %	10.30%								
1.13 Submission Level Rate Increase %	10.30%								

Worksheet 1 Totals Section II: Experience Period and Current Plan Level Information										
2.1 Plan ID (Standard Component ID)	Total	24872PA0030001	24872PA0030002	24872PA0030003	24872PA0030005	24872PA0030009	24872PA0030004	24872PA0030006	24872PA0030007	24872PA0030008
2.2 Allowed Claims	\$8,013,602	\$6,157,676	\$635,865	\$1,120,858	\$2,855,697	\$2,141,274	\$303,005	\$253,574	\$360,110	\$279,442
2.3 Reinsurance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2.4 Member Cost Sharing	\$1,421,738	\$1,507,507	\$172,338	\$210,836	\$294,482	\$380,971	\$54,762	\$79,339	\$138,484	\$99,017
2.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2.6 Incurred Claims	\$6,591,865	\$6,591,865	\$42,069	\$463,527	\$910,022	\$2,561,215	\$1,760,304	\$248,243	\$174,234	\$221,626
2.7 Risk Adjustment Transfer Amount	-\$1,479,471	-\$25,780	-\$25,780	-\$175,531	-\$335,578	-\$257,958	-\$295,654	-\$98,826	-\$104,067	-\$110,821
2.8 Premium	\$7,373,680	\$7,373,680	\$128,488	\$874,846	\$1,672,524	\$1,285,665	\$1,473,541	\$492,550	\$518,671	\$552,332
2.9 Experience Period Member Months	15,605	297	1,984	3,041	3,041	3,346	895	1,094	1,116	991
2.10 Current Enrollment	1,411	24	197	270	325	289	59	88	100	59
2.11 Current Premium PMPM	\$479.51	\$471.47	\$465.34	\$558.93	\$435.19	\$448.19	\$557.26	\$457.33	\$496.24	\$486.15
2.12 Loss Ratio	111.84%	40.96%	66.28%	68.07%	249.22%	149.45%	63.05%	42.02%	50.20%	70.25%
Per Member Per Month										
2.13 Allowed Claims	\$513.53	\$214.06	\$320.50	\$368.58	\$939.07	\$639.95	\$538.55	\$231.79	\$322.68	\$353.53
2.14 Reinsurance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2.15 Member Cost Sharing	\$91.11	\$72.41	\$86.86	\$69.33	\$96.84	\$113.86	\$61.19	\$72.52	\$124.09	\$87.25
2.16 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2.17 Incurred Claims	\$422.43	\$141.61	\$233.63	\$309.25	\$812.33	\$514.99	\$277.37	\$159.26	\$198.59	\$266.28
2.18 Risk Adjustment Transfer Amount	-\$94.81	-\$86.80	-\$88.47	-\$110.35	-\$84.83	-\$88.36	-\$110.42	-\$95.13	-\$99.30	-\$95.14
2.19 Premium	\$472.52	\$432.62	\$440.95	\$549.99	\$422.78	\$440.39	\$550.33	\$474.11	\$494.92	\$474.18

Section III: Plan Adjustment Factors										
3.1 Plan ID (Standard Component ID)										
3.2 Market Adjusted Index Rate										
3.3 AV and Cost Sharing Design of Plan	0.6644	0.8011	0.8537	0.7261	0.7101	0.0000	0.0000	0.0000	0.0000	
3.4 Provider Network Adjustment	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
3.5 Benefits in Addition to EHB	1.0010	1.0010	1.0010	1.0010	1.0010	1.0000	1.0000	1.0000	1.0000	
Administrative Costs										
3.6 Administrative Expense	16.30%	16.30%	16.30%	16.30%	16.30%	16.30%	0.00%	0.00%	0.00%	0.00%
3.7 Taxes and Fees	0.67%	0.67%	0.67%	0.67%	0.67%	0.67%	0.00%	0.00%	0.00%	0.00%
3.8 Profit & Risk Load	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	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	1.0000	1.0000	1.0000
3.10 Plan Adjusted Index Rate	\$479.94	\$578.69	\$616.69	\$524.51	\$512.95	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Calibrated Plan Adjusted Index Rate										
3.11 Age Calibration Factor	0.7186									
3.12 Geographic Calibration Factor	1.1337									
3.13 Tobacco Calibration Factor	1.0000									
3.14 Calibrated Plan Adjusted Index Rate	\$391.00	\$471.44	\$502.40	\$427.31	\$417.89	\$0.00	\$0.00	\$0.00	\$0.00	

Section IV: Projected Plan Level Information										
4.1 Plan ID (Standard Component ID)	Total	24872PA0030001	24872PA0030002	24872PA0030003	24872PA0030005	24872PA0030009	24872PA0030004	24872PA0030006	24872PA0030007	24872PA0030008
4.2 Allowed Claims	\$9,136,876	\$138,584	\$1,482,506	\$2,103,585	\$2,920,473	\$2,491,727	\$0	\$0	\$0	\$0
4.3 Reinsurance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4.4 Member Cost Sharing	\$2,183,713	\$42,033	\$329,355	\$360,036	\$761,775	\$690,513	\$0	\$0	\$0	\$0
4.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4.6 Incurred Claims	\$6,953,163	\$96,551	\$1,153,151	\$1,743,549	\$2,158,698	\$1,801,214	\$0	\$0	\$0	\$0
4.7 Risk Adjustment Transfer Amount	-\$720,130	-\$11,459	-\$113,445	-\$160,972	-\$234,331	-\$199,929	\$0	\$0	\$0	\$0
4.8 Premium	\$9,470,789	\$131,504	\$1,370,562	\$2,374,856	\$2,940,411	\$2,453,457	\$0	\$0	\$0	\$0
4.9 Projected Member Months	17,228	274	2,714	3,851	5,606	4,783	0	0	0	0
4.10 Loss Ratio	79.46%	80.43%	79.14%	78.76%	79.77%	79.93%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Per Member Per Month										
4.11 Allowed Claims	\$530.35	\$505.78	\$546.24	\$546.24	\$520.95	\$520.95	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.12 Reinsurance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.13 Member Cost Sharing	\$126.75	\$153.41	\$121.35	\$93.49	\$135.89	\$144.37	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.14 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.15 Incurred Claims	\$403.60	\$352.38	\$424.89	\$452.75	\$385.07	\$376.59	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.16 Risk Adjustment Transfer Amount	-\$41.80	-\$41.80	-\$41.80	-\$41.80	-\$41.80	-\$41.80	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
4.17 Premium	\$549.73	\$479.94	\$578.69	\$616.69	\$524.51	\$512.95	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Rating Area Data Collection

Rating Area	Rating Factor
Rating Area 1	0.7825
Rating Area 2	0.7673
Rating Area 3	0.9197
Rating Area 4	0.8671
Rating Area 5	0.8690
Rating Area 6	0.8976
Rating Area 7	0.9284
Rating Area 8	0.8719
Rating Area 9	0.9111

**Federal Rate Filing Justification Part III
Actuarial Memorandum and Certification**

UnitedHealthcare of Pennsylvania, Inc.

NAIC: 79413

FEIN: 36-2739571

State of Pennsylvania Rate Review

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Section 1: Purpose

The following is a rate filing prepared by UnitedHealthcare of Pennsylvania, Inc.. This filing has been prepared to provide the necessary information required by the Department of Health and Human Services and the state of Pennsylvania. The purpose of this memorandum is to provide information relevant to the Federal Part I Unified Rate Review Template (URRT).

This filing establishes rates intended to be used for non-grandfathered PPACA compliant small group health benefit plans sold off the Small Business Health Options Program in Pennsylvania for the 2024 plan year. A rate increase is being filed at this time. The rates and other information in this submission are based on the current regulations and guidance from HHS. Changes to this filing may be necessary if there are revisions to the regulations or updated guidance from HHS.

This memorandum is intended solely for the information of and use by the Department of Health and Human Services and the Pennsylvania Insurance Department (PID). It will demonstrate compliance with state and federal laws and regulations related to the development of the index rate and allowable rating factors and is not intended to be used for any other purpose.

The attached document contains confidential, proprietary information and trade secrets. This information is strictly confidential and protected from disclosure by 40 P.S. § 65.2-A . If the prohibition against disclosure by the Pennsylvania Insurance Department (PID) is reassessed at a later date, it may not be disclosed to any other state or federal regulatory agencies unless the recipient agrees in writing prior to receipt to maintain the confidentiality of the information.

Section 2: General Information

Company Identifying Information

Company Legal Name: UnitedHealthcare of Pennsylvania, Inc.
State: Pennsylvania
HIOS Issuer ID: 24872
Market: Small Business, 1-50
Proposed Effective Date: January, 1 2024

Primary Contact Information

Name: [REDACTED]
Telephone Number: [REDACTED]
Email Address: [REDACTED]

Section 3: Proposed Rate Changes

The proposed change in rates for this filing is 10.3% compared to the prior filing. The change in geographic rating factors ranges from -2% to 0% and averages to -0.22% based on the current inforce population. These changes are applied uniformly to all plans within a rating area. The proposed pricing trend is 9.6% annually.

The primary drivers of the proposed rate changes are the following:

- Changes in medical service costs
 - Increasing Cost of Medical Services – Annual increases in reimbursement rates to health care providers – such as hospitals, doctors and pharmaceutical companies.
 - Increased Utilization – The number of office visits and other services continues to grow. In addition, total health care spending will vary by the intensity of care and/or use of different types of health services. Patients who are sicker generally have a higher intensity of health care utilization. The price of care can be affected by the use of expensive procedures such as surgery vs. simply monitoring or providing medications.
 - Higher Costs from Deductible Leveraging – Health care costs continue to rise every year. If deductibles and copayments remain the same, a greater percentage of health care costs need to be covered by health insurance premiums each year.
 - Cost shifting from the public to the private sector – Reimbursements from the Center for Medicare and Medicaid Services (CMS) to hospitals do not generally cover all of the cost of care. The cost difference is being shifted to private health plans. Hospitals typically make up this reimbursement shortfall by charging private health plans more.

-
- Impact of New Technology – Improvements to medical technology and clinical practice often result in the use of more expensive services, leading to increased health care spending and utilization.
 - Administrative costs and anticipated profit
 - UnitedHealthcare works to directly control administrative expenses by adopting better processes and technology and through the development of programs and innovations that make health care more affordable. We have led the marketplace by introducing key innovations that make health care services more accessible and affordable for customers, improve the quality and coordination of health care services, and help individuals and their physicians make more informed health care decisions.
 - Additionally, UnitedHealthcare indirectly controls medical cost payments by using appropriate payment structures with providers and facilities. UnitedHealthcare’s goal is to control costs, maximize efficiency, and work closely with physicians and providers to obtain the best value and coverage.
 - State and/or Federal government imposed taxation and fees are additional significant factors that impact health care spending. These fees include ACA taxes and fees which have increased health insurance costs and need to be reflected in premium.
 - Changes that vary by plan
 - All plan relativity factors have been updated to reflect UnitedHealthcare’s most recent pricing model.
 - The impact of any changes to plans that have occurred due to uniform modification are also reflected in the updated plan relativity factors. Please see the “Plan Adjusted Index Rate” section of the memorandum for more detail on these changes.

We refined the medical and pharmacy plan price relativities to reflect the most recent pricing methodology and pricing models. The methodology is based on UnitedHealthcare nationwide experience data, which contains utilization frequencies and unit costs by service category, in addition to claim distributions and adjustment factors for a large number of plan design variables. Benefit design parameters such as deductibles, coinsurance, copays, out-of-pocket maximums, etc. were input for each plan. The expected paid-to-allowed relativities and expected utilization differences due to differences in cost sharing for each plan are then used to develop the plan factors for each benefit plan. All benefit plans are priced consistently with each other, with the rates differing only by the estimated value of the benefits and the expected utilization differences due to differences in cost sharing. The utilization differences do not reflect differences due to health status. The net impact of all changes by plan can be found in Worksheet 2, Section I of the Unified Rate Review Template.

Significant factors driving the proposed rate changes are discussed in further detail in Section 6 (*Projection Factors*) and Section 7 (*Credibility Manual Rate Development*) of this memorandum.

Section 4: Experience and Current Period Premium, Claims and Enrollment

Paid Through Date

The experience period is January 1, 2022 to December 31, 2022, with claims paid through February 28, 2023.

Current Date

The current enrollment and premium is reported as of December, 31 2022.

Allowed and Incurred Claims Incurred During the Experience Period

Claims Description	Allowed Claims	Incurred Claims
Claims Paid as of February 28, 2023	\$7,428,911	\$6,110,906
Claims Incurred but Not Reported as of February 28, 2023	\$584,691	\$480,958

The claims data was available directly from company claims records.

Support for estimate of incurred but not reported claims

Historical claims are categorized both by the month in which they were incurred and the month in which they were adjudicated. For incurral months with sufficient adjudicated claims experience, incurred claims are estimated by applying completion factors derived from the historical claims. Adjustments are made based on specific knowledge of the entity (e.g. catastrophic claims, pended claims, etc.). For incurral months where adjudicated claim experience is not sufficient to rely on completion factors, a PMPM is used to estimate incurred claims. PMPM estimates are based on expected claim seasonality patterns, monthly calendar days and work days, emerging claim trends, and other factors. The same completion factors are applied to both incurred and allowed claims amounts.

Experience Period Risk Adjustment and Reinsurance Adjustments (PMPMs)

We are using the final 2022 CMS risk adjustment results released on June 30, 2023. Based on that information our 2022 risk adjustment transfer PMPM is -\$94.81.

Experience Period Index Rates

Experience Period Index Rates are defined as the allowed claims PMPM for Essential Health Benefits during the Experience Period. With the breakout of the service level EHB claims, the information provided reflects a reasonable estimate of the EHBs.

Section 5: Benefit Categories

Claims were assigned to each of the benefit categories based on where services were administered and the types of medical services rendered. The benefit categories were defined by our claims department using standard industry definitions.

Inpatient Hospital

Includes non-capitated facility services for medical, surgical, maternity, mental health and substance abuse, skilled nursing, and other services provided in an inpatient facility setting and billed by the facility.

Outpatient Hospital

Includes non-capitated facility services for surgical, emergency room, laboratory, radiology, therapeutic, observation, and other services provided in an outpatient facility setting and billed by the facility.

Professional

Includes non-capitated primary care, specialist care, therapeutic, the professional component of laboratory and radiology, and other professional services, other than hospital based professionals whose payments are included in facility fees.

Other Medical

Includes non-capitated ambulatory, home health care, durable medical equipment, prosthetics, supplies, vision exams, dental services and other services.

Capitation

Includes all services provided under one or more capitated agreements.

Prescription Drug

Includes drugs dispensed by a pharmacy. This amount is net of rebates received from drug manufacturers.

Section 6: Projection Factors

Trend

Two years of annual trend were applied to our 2022 experience to project it to the 2024 rating period. Our most recent analysis indicates annual trend in the state of Pennsylvania for the 2023 and 2024 calendar years will be 8.4% and 8.4%, respectively. The table below details the components of each trend factor.

Trend Component	2023	2024
Unit Cost	3.7%	3.7%
Utilization	4.5%	4.5%
Total	8.4%	8.4%

UnitedHealthcare develops forward-looking medical expense estimates based on a number of considerations. In general, recent/emerging claims experience is reviewed at the market level for several broad medical expense categories (inpatient, professional, pharmacy, etc.), with utilization, unit cost, and benefit leveraging identified for each category. Future trends are developed based on a projection of each component.

Utilization rates by category are measured and projected. Forward looking utilization levels are developed based on emerging market level data, supplemented by regional and/or national level utilization data. Macro-economic data is often used to develop assumptions regarding directional changes in national health care consumption rates. UnitedHealthcare uses same store analysis to reflect utilization.

Market-level unit cost projections are developed based on evaluations of current and anticipated provider contract economics, as well as consideration to both current and expected changes in non-contracted provider cost exposure. Unit cost projections also consider the estimated cost impact of new technologies, service availability/mandates, or other factors that might influence the mix of procedures. Unit cost is based on our contractual changes with providers.

In addition, market-level healthcare affordability activities that are expected to impact forward-looking medical costs are recognized. Depending on the nature of individual initiatives, the impact may be recognized in one or more of the component cost items discussed above. Only incremental activities are recognized for this purpose in the expected trend impact for any particular period.

Demographic Shift

The total Demographic Shift Adjustment is -0.1%. It is comprised of the following factors:

Geographic Shift:

An adjustment of -0.1% was made to account for the shift in the distribution of members by rating area between the experience period and the rating period. The factor reflects the change in the average geographic rating area factor from the experience period to the rating period, weighted by the respective membership distributions, using the proposed geographic rating area factors. The formula is calculated as: Avg. Geographic Rating Area Factor projected / Avg. Geographic Rating Area Factor experience – 1.

Other Adjustments

Catastrophic Claims Adjustment:

An adjustment was made to account for catastrophic claims experience in the experience period. The claims were adjusted by -16.4% to align with expected catastrophic claim levels in the rating period.

Trend Adjustment:

An additional trend adjustment of 0.7% is applied to trend our rates to the mid-point of the quarter rather than the beginning of the quarter.

All Other Adjustments:

All other adjustments resulted in an adjustment of -9.4%.

Section 7: Credibility Manual Rate Development

Source and Appropriateness of Data Used

Combined experience of UHC of PA in Pennsylvania and UnitedHealthcare Insurance Company was used for rate development.

Adjustments Made to the Data

Adjustments similar to the ones described in Section 6 were applied to the experience of the credibility manual to project it to the projection period. In addition, the credibility manual was adjusted to reflect the average age, geography, plan design and morbidity of the adjusted experience period claims.

An adjustment to the credibility manual was made to account for catastrophic claims experience in the experience period.

Inclusion of Capitation Payments

Capitation payments are included in both the experience and projections.

Section 8: Credibility of Experience

The experience for this legal entity contains 15,605 member months. We have assigned 7.0% credibility to the data based on the ratio of UHCPA experience member months to our total UHIC plus UHC of PA experience period member months. We set our rate using the blended experience of both entities weighted by the membership in both entities.

Consideration was given to ASOP #25 when determining the credibility and appropriateness of the experience and the manual rate. The manual rate is sufficiently independent from the experience and can be blended with it for purposes of rate development.

Section 9: Development of Projected Index Rate

The experience period index rate is \$513.00 PMPM.

The Index Rate For the experience period is approximately 99.9% of allowed claims due to benefits in excess of EHBs. The reported percentage amount is based on experience data. The index rate of the experience period has been reported accordingly. The Index Rate in the projection period represents 99.9% of allowed claims due to the benefits in excess of EHBs.

The projected index rate of \$529.82 was calculated by trending and adjusting the experience period index rate to the projection period, including blending the experience with a manual rate if the experience was not fully credible. It is established in accordance with the requirements of 45 CFR §156.80(d). See sections 6, 7, and 8 of this memo for more details.

Section 10: Development of the Market-wide Adjusted Index Rate

Reinsurance

There is no reinsurance program in force for this business, and as a result there are no reinsurance recoveries to report.

Risk Adjustment Payment/Charge

UnitedHealthcare of Pennsylvania, Inc. anticipates paying an average of \$41.80 PMPM for risk adjustment transfers in the state of Pennsylvania for the 2024 plan year, which has been grossed up to \$54.93 for purpose of calculating the Market-wide Adjusted Index Rate. We are assuming the risk level of our business relative to that of our competitors for the 2024 plan year will be similar to what it was in the 2022 plan year. Since risk adjustment transfer payments are a function of the market level premium, our 2024 risk adjustment transfer PMPM amount is calculated by adjusting our estimated 2022 risk adjustment transfer PMPM amount for the projected market level trend, changes in reinsurance fees and recoveries, and other adjustments based on the overall financial performance of the market.

Exchange User Fees

There are no plans included in this filing that are offered on the exchange. Therefore there are no exchange user fees.

The market adjusted index rate includes market-wide adjustments for reinsurance, risk adjustment transfers, and exchange user fees (if any).

Index Rate	Net Federal or State Reinsurance (allowed basis)	Risk Adjustment Payment/Charge (allowed basis)	Exchange Fee Adjustment (allowed basis)	Market Adjusted Index Rate
\$529.82	\$0.00	-\$54.93	0.00%	\$584.75

The figures above may not tally exactly due to rounding of the display.

Section 11: Plan Adjusted Index Rate

Actuarial Value and Cost Sharing Adjustment

UnitedHealthcare has a proprietary pricing model that was used in developing the actuarial value and cost sharing adjustment for each plan. The model calculates plan relativity factors for medical and pharmacy benefits. Also included under the actuarial value and cost sharing adjustment are adjustments for leveraging and the difference between the average plan relativity factor and the projected paid to allowed ratio.

UnitedHealthcare does not utilize Induced Demand factors in our rate development. Instead, our plan-specific pricing factors are based on an analysis of UnitedHealthcare's nationwide block of Small Group health insurance, which reflects over 10 million member months of experience. Our approach complies with the prohibition of rating for morbidity differences by normalizing out the cost differences attributable to morbidity as measured by HHS's risk adjustment mechanism.

Historical UnitedHealthcare experience was used to develop the actuarial value and cost sharing adjustment.

Provider network, delivery system and utilization management adjustment

Any adjustments for these items are included in the plan relativity factors.

Distribution and Administrative Costs

Distribution and administrative costs include premium tax, risk adjustment user fees, SG&A, quality improvements, federal income tax, and after-tax income. Risk adjustment transfers, net reinsurance recoveries, and exchange fees are excluded because they are accounted for in the market adjusted index rate.

Administrative Expense Load

The administrative expense load is a long-term estimate of administrative expenses, including selling expenses and general administrative expenses. This load does not vary by product or plan. These assumptions are based on the general ledger actual results for 2022 with known adjustments. Known adjustments include, but are not limited to, pay increases/raises for employees and administrative expenses as a result of Healthcare Reform and compliance requirements. The administrative expense allocation methodology used in pricing is appropriate because it is consistent with how UnitedHealthcare runs its business and how it allocates administrative costs for Statutory Filings and the Healthcare Reform Exhibits.

Profit and Risk Margin

The profit and risk margin is shown in Worksheet 2, Section 3 of the URRT. This target does not vary by product or plan.

The profit and risk margin is derived from the difference between the administrative expenses, taxes and fees, and 1 minus the target loss ratio and the administrative expenses, taxes and fees.

The profit and risk margin results in an anticipated MLR that is above the minimum requirements as described in the Projected Loss Ratio section.

Taxes and Fees

Taxes and fees are expected to be 0.67% and include premium tax, exchange fees (if any), risk adjustment user fees, and federal income tax. The following is a breakdown of the taxes and fees.

Premium Taxes and Fee Allocation	Estimated % of Premium
Premium/Retaliatory Tax	0.00%
Exchange User Fee	0.00%
Risk Adjustment User Fee	0.05%
PCORI Fees	0.05%
Federal/State Income Tax	0.53%
All Other Taxes & Fees	0.04%

Section 12: Calibration

Plan Adjusted Index Rates need to be calibrated to apply the allowable rating factors of age and geography in order to calculate the Consumer Adjusted Premium Rates. Calibration factors are applied uniformly to all plans.

Age Calibration

The calculated age curve calibration is 0.7186, which equals the one divided by the average age factor of the expected member distribution by age. The age factors used in this calculation are the HHS-specified age curve.

Geographic Calibration

The geographic factor calibration is 1.1337, which equals the one divided by the expected average area factor. A table of the geographic rating factors is below.

Rating Area	Area Factor
1	0.7825
2	0.7673
3	0.9197
4	0.8671
5	0.8690
6	0.8976
7	0.9284
8	0.8719
9	0.9111

Geographic rating factors are reviewed periodically versus UnitedHealthcare claims data that reflects unit cost differences by county. Such a review was conducted as part of our January 1, 2024 rate development. Our analysis did not indicate that there were credible, material differences indicated by the comparison of currently approved area factors and the UHC data reflecting unit cost differences.

New Provider Contracts

Based on new provider contracts in rating areas 3 and 6, the geographic rating factors are being adjusted by -2% in both rating areas.

Population morbidity by area was not considered when determining geographic area factors.

Tobacco Calibration

Tobacco factors are not used in the rating of these products, and no calibration is needed.

Calibrating the plan adjusted index rate to the age curve and geographic distribution results in the calibrated plan adjusted index rate for each plan. The calibrated plan adjusted index rate represents the preliminary premium rate charged to an individual before applying the consumer specific rating adjustments for age and area.

Section 13: Consumer Adjusted Premium Rate Development

The consumer adjusted premium rate is the final premium rate that is charged to an individual. It is developed by calibrating the plan adjusted index rate, and applying the consumer specific age, and geographic rating factors. The calculation is provided below.

$$\begin{array}{r} \text{Plan Adjusted Index Rate} \\ X \text{ Age Calibration Factor} \\ X \text{ Geographic Calibration Factor} \\ X \text{ Consumer Specific Age Rating Factor} \\ X \text{ Consumer Specific Geographic Rating Factor} \\ X \text{ Small Group Trend Adjustment} \\ \hline = \text{Consumer Adjusted Premium Rate} \end{array}$$

Section 14: Projected Loss Ratio

The projected loss ratio using the federally prescribed MLR methodology for calendar year 2024 is 82.1%. UnitedHealthcare of Pennsylvania, Inc. agrees to comply with the rebate requirements of 45 CFR Part 158 should the actual market MLR fall below the 80.0% requirement.

Section 15: AV Metal Values

The AV calculator used to calculate the AV metal values is based on a prescribed methodology and, therefore, does not necessarily reflect a reasonable estimate of the portion of allowed costs covered by the associated plan.

Some plans within this portfolio have cost sharing features that differ between individual and family coverage (i.e., when two or more people are covered by the plan). For all plans, consistent with the Actuarial Value Calculator inputs, we have used only the cost sharing provisions applicable for individuals in the actuarial value calculation.

The AV calculator was used to determine the AV metal values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans. Some of our plan designs are not directly compatible with the AV calculator. The values were developed in accordance with generally accepted actuarial principles and methodologies. Additional details are provided below to describe the types of adjustments that were made for plan designs that are not directly compatible with the AV calculator.

Benefits that Vary Based on Place of Service

For some types of services, our plan designs include different benefit levels based on the place of service (i.e. physician's office, free standing facility, or outpatient hospital facility). To incorporate this differentiation in benefits, the Tiered Network Option was selected within the AV calculator, and utilization was assigned to each tier based on historical experience of affiliated carriers.

Physician Tiering

Select plan designs include lower cost sharing when members utilize providers we designate as meeting cost and efficiency standards. The tiered network functionality of the AV calculator was utilized to account for the cost sharing differences. The utilization of providers was based on a UnitedHealthcare study of differences in cost sharing and their effectiveness at driving utilization patterns.

Laboratory and X-Ray Services

Some plan designs include a copay for minor lab and x-ray services. These copays are applied on a per visit basis. The AV Calculator assumes that the copays are on a per procedure basis. Therefore, the copay amounts are adjusted to reflect the equivalent per procedure amount.

Employer Contributions to HSAs and HRAs

The following plans are offered in conjunction with HSAs or HRAs. The table shows the metal level of each plan and the range of annual employer contribution amounts, as well as the resulting range of AV Metal Values, that allow the plan to achieve the stated metal level. Note that because URRT Worksheet 2 allows only a single AV Metal Value for each plan, the AV Metal Values displayed on Worksheet 2 for these HSA/HRA plans correspond to the upper bound of the AV Metal Value range in the table below.

HIOS Plan ID	Metal Level	Employer Contribution Range	AV Metal Value Range
24872PA0030001	Bronze	[\$0, \$0]	[64.9%, 64.9%]
24872PA0030009	Silver	[\$0, \$150]	[70.1%, 71.8%]

AV Calculator Workaround for UnitedHealthcare Rewards

Plans include UnitedHealthcare Rewards, a program that rewards enrollees completing certain wellness criteria with various financial incentives. These incentives are expected to impact member cost-sharing in a manner similar to employer contributions to a participant's Health Savings Account (HSA) or Health Reimbursement Arrangement (HRA) Account. To account for the impact on AV, the employer HRA/HSA contribution field in the AV Calculator was increased by the expected incentive, estimated using UHC historical experience.

Section 16: Membership Projections

The total membership projection for the 2024 plan year was provided by UnitedHealthcare's Finance department.

Member distribution by plan was then based on current enrollment, taking into consideration changes in the portfolio of plans to be offered in 2024. Strictly for purposes of the URRT, we have projected membership by plan.

Section 17: Terminated Plans and Products

There are no products being terminated in this rate filing. Terminated plans will be mapped to another plan in the projection period for purposes of completing the URRT.

Section 18: Plan Type

A plan type of HMO has been selected, which describes the plans exactly.

Section 19: Reliance

In my professional judgment, the assumptions or methods described in the memorandum do not conflict with what I believe to be reasonable. Therefore, I have not included any reliances.

Section 20: Actuarial Certification

I, [REDACTED], am a Associate Director Actuarial Services for UnitedHealthcare and a member of the American Academy of Actuaries. I meet the Academy's qualification standards for rendering statements of actuarial opinion with respect to the filing of rates for health insurance products.

To the best of my knowledge and judgment, I certify that:

- The projected index rate is:
 - In compliance with state and federal statutes and regulations related to the development of the index rate and allowable rating factors (such as 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 population anticipated to be covered,
 - Neither excessive, deficient, nor unfairly discriminatory.
- The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CRF 156.80(d)(2) were used to generate plan level rates.
- The geographic rating factors reflect only differences in the costs of delivery and do not include differences for population morbidity by geographic area.
- The AV calculator was used to determine the AV metal values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans. Some of our plan designs are not directly compatible with the AV calculator. The values were developed in accordance with generally accepted actuarial principles and methodologies. The unique plan design actuarial certification required by 45 CFR Part 156.135 has been separately attached.
- The Part I Unified Rate Review Template does not demonstrate the process used by the issuer to develop their 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.

[REDACTED]

[REDACTED]
Associate Director Actuarial Services

07/14/2023

Date

2-50 Rating Factors

START RATES

Medical Product	Base Rate January 1, 2024
HMO	\$653.77

Age Rating: Member Rating using HHS Proposed Age Factors

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

EFFECTIVE DATE ADJUSTMENTS (TREND) - EPA = regions 556, 557, & 558

Effective Date	IND Med	PPO Med	EPO Med	IND Rx	PPO Rx	EPO Rx
Jan-24	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Feb-24	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Mar-24	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Apr-24	1.0230	1.0230	1.0230	1.0230	1.0230	1.0230
May-24	1.0230	1.0230	1.0230	1.0230	1.0230	1.0230
Jun-24	1.0230	1.0230	1.0230	1.0230	1.0230	1.0230
Jul-24	1.0470	1.0470	1.0470	1.0470	1.0470	1.0470
Aug-24	1.0470	1.0470	1.0470	1.0470	1.0470	1.0470
Sep-24	1.0470	1.0470	1.0470	1.0470	1.0470	1.0470
Oct-24	1.0710	1.0710	1.0710	1.0710	1.0710	1.0710
Nov-24	1.0710	1.0710	1.0710	1.0710	1.0710	1.0710
Dec-24	1.0710	1.0710	1.0710	1.0710	1.0710	1.0710

EFFECTIVE DATE ADJUSTMENTS (TREND) - WPA = regions 560, 561, & 562

Effective Date	IND Med	PPO Med	EPO Med	IND Rx	PPO Rx	EPO Rx
Jan-24	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Feb-24	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Mar-24	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Apr-24	1.0230	1.0230	1.0230	1.0230	1.0230	1.0230
May-24	1.0230	1.0230	1.0230	1.0230	1.0230	1.0230
Jun-24	1.0230	1.0230	1.0230	1.0230	1.0230	1.0230
Jul-24	1.0470	1.0470	1.0470	1.0470	1.0470	1.0470
Aug-24	1.0470	1.0470	1.0470	1.0470	1.0470	1.0470
Sep-24	1.0470	1.0470	1.0470	1.0470	1.0470	1.0470
Oct-24	1.0710	1.0710	1.0710	1.0710	1.0710	1.0710
Nov-24	1.0710	1.0710	1.0710	1.0710	1.0710	1.0710
Dec-24	1.0710	1.0710	1.0710	1.0710	1.0710	1.0710

AREA FACTORS

Rating Area	County	Area Factor
Rating Area 1	Erie	0.7825
Rating Area 1	Crawford	0.7825
Rating Area 1	Mercer	0.7825
Rating Area 1	Venango	0.7825
Rating Area 1	Clarion	0.7825
Rating Area 1	Forest	0.7825
Rating Area 1	Warren	0.7825
Rating Area 1	McKean	0.7825
Rating Area 2	Elk	0.7673
Rating Area 2	Cameron	0.7673
Rating Area 2	Potter	0.7673
Rating Area 3	Clinton	0.9197
Rating Area 3	Lycoming	0.9197
Rating Area 3	Sullivan	0.9197
Rating Area 3	Bradford	0.9197
Rating Area 3	Susquehanna	0.9197
Rating Area 3	Wyoming	0.9197
Rating Area 3	Lackawanna	0.9197
Rating Area 3	Wayne	0.9197
Rating Area 3	Pike	0.9197
Rating Area 3	Monroe	0.9197
Rating Area 3	Carbon	0.9197
Rating Area 3	Luzerne	0.9197
Rating Area 4	Lawrence	0.8671
Rating Area 4	Beaver	0.8671
Rating Area 4	Washington	0.8671
Rating Area 4	Greene	0.8671
Rating Area 4	Butler	0.8671
Rating Area 4	Allegheny	0.8671
Rating Area 4	Westmoreland	0.8671
Rating Area 4	Armstrong	0.8671
Rating Area 4	Indiana	0.8671
Rating Area 4	Fayette	0.8671
Rating Area 5	Jefferson	0.8690
Rating Area 5	Clearfield	0.8690
Rating Area 5	Cambria	0.8690
Rating Area 5	Somerset	0.8690
Rating Area 5	Bedford	0.8690
Rating Area 5	Blair	0.8690
Rating Area 5	Huntingdon	0.8690
Rating Area 6	Centre	0.8976
Rating Area 6	Mifflin	0.8976
Rating Area 6	Snyder	0.8976
Rating Area 6	Northumberland	0.8976
Rating Area 6	Columbia	0.8976
Rating Area 6	Schuykill	0.8976
Rating Area 6	Lehigh	0.8976
Rating Area 6	Northampton	0.8976
Rating Area 7	Adams	0.9284
Rating Area 7	York	0.9284
Rating Area 7	Lancaster	0.9284
Rating Area 7	Berks	0.9284
Rating Area 8	Chester	0.8719
Rating Area 8	Delaware	0.8719
Rating Area 8	Montgomery	0.8719
Rating Area 8	Bucks	0.8719
Rating Area 8	Philadelphia	0.8719
Rating Area 9	Fulton	0.9111
Rating Area 9	Franklin	0.9111
Rating Area 9	Cumberland	0.9111
Rating Area 9	Perry	0.9111
Rating Area 9	Juniata	0.9111
Rating Area 9	Dauphin	0.9111

Pennsylvania Small Group - UHCPA - 2024 Portfolio																																					
Plan Name				Market Numbers				In-Network				Out-of-Network						Physician				Emergency				Hospital				Medical				Rx			
Product	Medical	Rx	Level	SCID	Market Numbers	AV*	AV*	HSA Max	Deductible		OOP Maximum		Deductible		OOP Maximum		PCP	SPEC	UC	ER	Free-St	Hospital	IP	Deduct		Deduct		Tier 1	Tier 2	Tier 3	Tier 4						
					Available	Min	Max	Contribution	Indiv	Family	Coins	Indiv	Family	Indiv	Family	Coins	Indiv	Family							Type	Type											
HMO	DH-BS	K955	Bronze	24872PA0030001	557, 560, 561, 562	63.9%	62.0%	\$0	\$7,100	\$14,200	0%	\$7,100	\$14,200					\$30	\$60/\$100	\$60	50%				Emb	Comb	\$15	\$60	\$250	50%/8500	\$500	50%/11,000					
HMO	CV-OY	K955	Gold	24872PA0030002	556, 557, 558	78.2%	78.2%	\$0	\$1,500	\$3,000	20%	\$7,500	\$15,000					\$30	\$60/\$100	\$60	50%				Emb	Comb	\$15	\$60	\$250	50%/8500	\$500	50%/11,000					
HMO	CV-GZ	K955	Gold	24872PA0030003	556, 557, 558	78.2%	78.2%	\$0	\$1,000	\$2,000	0%	\$9,100	\$18,200					\$30	\$60/\$100	\$60	50%				Emb	Comb	\$15	\$60	\$250	50%/8500	\$500	50%/11,000					
HMO	DH-GL	K955	Silver	24872PA0030005	556, 557, 558	71.7%	71.7%	\$150	\$3,500	\$7,000	25%	\$9,450	\$18,900					\$30	\$60/\$100	\$60	50%	20%	40%	20%	Ded NonEmb/OOPM Emb	Comb	\$15	\$60	\$250	50%/8500	\$500	50%/11,000					
HMO	DH-9M	K955	Silver	24872PA0030009	556, 557, 558	71.8%	71.8%	\$150	\$3,500	\$7,000	0%	\$6,500	\$13,000					\$30	\$60/\$100	\$60	50%	\$250	\$500	\$750	Ded NonEmb/OOPM Emb	Comb	\$15	\$60	\$250	50%/8500	\$500	50%/11,000					

* All ranges based off of maximum HSA contribution
 ** Reference 2024 Service Area Map for county availability

Plan Relativity Factors		
HMO		
Medical Code	Rx Code	Total Relativity
DH-85	E83	0.5982
CV-OY	K95S	0.7213
CV-OZ	K95S	0.7686
DH-9L	K95S	0.6537
DH-9M	K95S	0.6393

Rate Calculation

Step	Rating Variable	Sample Attributes	Sample Values
A	Base Rate	Network 556 HMO	\$653.77
B	Area Adjustment	Adams County (Rating Area 7)	0.9284
C		Area Adjusted Base Rate (A x B)	\$606.96
D	EDA	January 2024 Effective Date	1.000
E	Benefit Relativity	CV-OY/K95S	0.7213
F		Subtotal of Med & Rx Benefit Adjustment (C x D x E)	\$437.80
G	Age/Gender Factors		

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

H Rates

Age	Rate	Age	Rate	Age	Rate
0-14	\$334.92	31	\$507.41	48	\$715.80
15	\$364.69	32	\$517.92	49	\$746.89
16	\$376.07	33	\$524.48	50	\$781.91
17	\$387.45	34	\$531.49	51	\$816.50
18	\$399.71	35	\$534.99	52	\$854.59
19	\$411.97	36	\$538.49	53	\$893.11
20	\$424.67	37	\$542.00	54	\$934.70
21	\$437.80	38	\$545.50	55	\$976.29
22	\$437.80	39	\$552.50	56	\$1,021.39
23	\$437.80	40	\$559.51	57	\$1,066.92
24	\$437.80	41	\$570.02	58	\$1,115.51
25	\$439.55	42	\$580.09	59	\$1,139.59
26	\$448.31	43	\$594.09	60	\$1,188.19
27	\$458.81	44	\$611.61	61	\$1,230.22
28	\$475.89	45	\$632.18	62	\$1,257.80
29	\$489.90	46	\$656.70	63	\$1,292.39
30	\$496.90	47	\$684.28	64 & older	\$1,313.40

Pennsylvania Small Group - Modified and Existing Plans - UHCPA								
2023 Terminated Plans								
			Metal	2023 Plan Name		2024 Plan Mapping		
	SCID	Product	Level	Medical	Rx	SCID	Medical	Rx
	24872PA0030004	HMO	Gold	CVO2	K95Y	24872PA0030003	CVOZ	K95S
	24872PA0030006	HMO	Silver	CVO4	K95Y	24872PA0030005	DH9L	K95S
	24872PA0030007	HMO	Silver	CVO5	K95Y	24872PA0030009	DH9M	K95S
	24872PA0030008	HMO	Silver	CVO6	K95Y	24872PA0030005	DH9L	K95S
2023 Benefit Plans with Plan Changes (Uniform Modification)3								
			Metal	2023 Plan Name		2024 Plan Name		
	SCID	Product	Level	Medical	Rx	Medical	Rx	
	24872PA0030001	HMO	Bronze	CD3Z	E83L	DH85	E85	
	24872PA0030002	HMO	Gold	CVOY	K95Y	CVOY	K95S	
	24872PA0030003	HMO	Gold	CVOZ	K95Y	CVOZ	K95S	
	24872PA0030005	HMO	Silver	CVO3	K95Y	DH9L	K95S	
	24872PA0030009	HMO	Silver	CVO7	K95Y	DH9M	K95S	


										
Healthcare Economics										
PENNSYLVANIA SMALL GROUP PRICING TREND DEVELOPMENT										
APRIL 2023 RATE FILING SUPPORT										
PENNSYLVANIA SMALL GROUP PRICING TREND BY COMPONENT										
		Notes:	<u>Inpatient</u>	<u>Outpatient</u>	<u>Professional</u>	<u>Other</u>	<u>Capitation</u>	<u>Total Medical</u>	<u>Retail Pharmacy</u>	<u>Weighted Aggregate</u>
Component Summary										
	Utilization / Service Mix	[1], [2]	3.5%	6.3%	5.3%	2.7%	0.0%	4.8%	5.5%	4.9%
	Unit Cost	[3]	3.6%	3.9%	1.5%	2.9%	6.3%	3.2%	4.7%	3.5%
	Demographic Change	[5]	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Benefit Leveraging	[4]	0.1%	1.4%	1.3%	0.6%	0.0%	0.9%	0.8%	0.9%
	<u>Margin</u>		<u>0.0%</u>	<u>0.0%</u>	<u>0.0%</u>	<u>0.0%</u>	<u>0.0%</u>	<u>0.0%</u>	<u>0.0%</u>	<u>0.0%</u>
	Total Proposed Pricing Trend	[6]	7.3%	11.9%	8.3%	6.3%	6.3%	9.1%	11.3%	9.6%
	Service Weight - Pennsylvania		22.0%	28.3%	19.0%	6.9%	2.5%	78.7%	21.3%	100.0%
	Notes:									
	[1]	Represents core utilization only, exclusive of demographic change impacts; includes expected impact of changes in business day content.								
	[2]	Represents expected changes in intensity of services provided.								
	[3]	Represents core unit pricing increases, exclusive of service mix / intensity of services impact;								
	[4]	Impact of member cost-share leveraging on net claims cost trend.								
	[5]	Represents trend impact of age and gender changes; No provision included for Small Group business (age/gender community rating variable).								
	[6]	Pricing models do not distinguish between Primary and Specialty medical care; same trends shown for both.								

Exhibit - Age Curve Calibration

State: PA || Market Segment: Small Group
 Company: UnitedHealthcare of Pennsylvania, Inc. || HIOS Issuer ID: 24872
 Proposed Effective Date: 1/1/2024

Age	Proposed Factor	Membership Distribution	Age	Proposed Factor	Membership Distribution
0	0.7650	0.99%	33	1.1980	2.40%
1	0.7650	0.94%	34	1.2140	2.10%
2	0.7650	0.57%	35	1.2220	2.87%
3	0.7650	0.58%	36	1.2300	1.73%
4	0.7650	0.65%	37	1.2380	1.51%
5	0.7650	0.87%	38	1.2460	2.21%
6	0.7650	0.90%	39	1.2620	1.43%
7	0.7650	0.69%	40	1.2780	2.42%
8	0.7650	0.62%	41	1.3020	1.24%
9	0.7650	0.45%	42	1.3250	2.12%
10	0.7650	0.53%	43	1.3570	1.53%
11	0.7650	0.92%	44	1.3970	2.14%
12	0.7650	0.91%	45	1.4440	1.53%
13	0.7650	0.86%	46	1.5000	1.81%
14	0.7650	0.95%	47	1.5630	1.79%
15	0.8330	0.56%	48	1.6350	1.45%
16	0.8590	0.99%	49	1.7060	1.63%
17	0.8850	0.65%	50	1.7860	1.80%
18	0.9130	1.12%	51	1.8650	1.21%
19	0.9410	0.93%	52	1.9520	1.79%
20	0.9700	0.94%	53	2.0400	1.79%
21	1.0000	0.83%	54	2.1350	1.86%
22	1.0000	1.55%	55	2.2300	1.56%
23	1.0000	1.96%	56	2.3330	1.18%
24	1.0000	1.87%	57	2.4370	1.34%
25	1.0040	1.78%	58	2.5480	1.36%
26	1.0240	2.54%	59	2.6030	2.04%
27	1.0480	2.67%	60	2.7140	1.33%
28	1.0870	2.97%	61	2.8100	1.06%
29	1.1190	2.99%	62	2.8730	1.12%
30	1.1350	3.93%	63	2.9520	0.98%
31	1.1590	2.80%	64+	3.0000	1.31%
32	1.1830	3.01%			
Weighted Average Factor	1.3915				

Exhibit - Geographic Factor Calibration State: PA Market Segment: Small Group Company: UnitedHealthcare of Pennsylvania, Inc. HIOS Issuer ID: 24872 Proposed Effective Date: 1/1/2024		
Rating Area	Proposed Factor	Membership Distribution
1	0.7825	0.00%
2	0.7673	0.00%
3	0.9197	1.83%
4	0.8671	0.95%
5	0.8690	0.00%
6	0.8976	9.15%
7	0.9284	7.48%
8	0.8719	73.51%
9	0.9111	7.08%
Weighted Average Factor	0.8821	

Single Risk Pool Adjustment Factors

Legal Entity (Credibility: 7%)

Other Adjustment	
Catastrophic Claim Adjustment	-0.164
Trend (24 vs 25 months)	0.007
Balancing Item	-0.094
TOTAL Other Adj't	0.763

Site Specific Cat Claim Level	\$101.98
Expected Cat Claims, PMPM	\$32.86
Net Cat Claim Override	100%
Cat Claim Adjustment	(\$69.13)
Total Experience Period Claim Cost, PMPM	\$422.42
Catastrophic Claim Adjustment	-0.164

Trend to Rating Period

Annualized Unit Cost Trend	3.74%
Annualized Utilization Trend	4.47%
Trended to 25 months	1.182
Annualized Cost Trend Year 1	3.70%
Annualized Utilization Trend Year 1	4.50%
Annualized Cost Trend Year 2	3.70%
Annualized Utilization Trend Year 2	4.50%
Trended to 24 months	1.174
Trend (24 vs 25 months)	0.007

Credibility Manual (Credibility: 93%)

Other Adjustment	
Catastrophic Claim Adjustment	-0.026
Trend (24 vs 25 months)	0.007
Balancing Item	-0.094
TOTAL Other Adj't	0.888

Site Specific Cat Claim Level	\$50.63
Expected Cat Claims, PMPM	\$39.41
Net Cat Claim Override	100%
Cat Claim Adjustment	(\$11.23)
Total Experience Period Claim Cost, PMPM	\$423.75
Catastrophic Claim Adjustment	-0.026

Trend to Rating Period

Annualized Unit Cost Trend	3.74%
Annualized Utilization Trend	4.47%
Trended to 25 months	1.182
Annualized Cost Trend Year 1	3.70%
Annualized Utilization Trend Year 1	4.50%
Annualized Cost Trend Year 2	3.70%
Annualized Utilization Trend Year 2	4.50%
Trended to 24 months	1.174
Trend (24 vs 25 months)	0.007

2024 AV Pricing Value Calculation												Table 10	
												Column K	Column L
0.684												0.760	1.000
1.000												0.760	1.000
0.760												0.760	1.000
1.059												0.760	1.000
0.944												0.760	1.000
1.000												0.760	1.000
0.685												0.760	1.000
1,257												0.760	1.000
HIOS ID	Relativity	Paid-to-Allowed Adjustment	Cost Sharing (relative to average)	Total (AV)	PID Formula	Normalize Factor	PID Formula x Normalize Factor	Final Plan Relativity	Projected Membership	Metal Level		Pricing AV (company-determined AV)	Benefit Richness (induced demand)
24872PA0030001	0.6183	0.760	0.9035	0.687	1.025	0.944	0.967	0.5982	20	Bronze		0.687	0.967
24872PA0030002	0.7114	0.760	1.0395	0.790	1.074	0.944	1.014	0.7213	198	Gold		0.790	1.014
24872PA0030003	0.7431	0.760	1.0858	0.825	1.096	0.944	1.034	0.7686	281	Gold		0.825	1.034
24872PA0030005	0.6624	0.760	0.9679	0.736	1.046	0.944	0.987	0.6537	409	Silver		0.736	0.987
24872PA0030009	0.6513	0.760	0.9517	0.723	1.040	0.944	0.982	0.6393	349	Silver		0.723	0.982

Plan Adjusted Index Rate (PAIR) Exhibit					
<i>Market: Pennsylvania Small Group License: UnitedHealthcare of Pennsylvania, Inc.</i>					
	Bronze	Gold	Gold	Silver	Silver
	UHCPA	UHCPA	UHCPA	UHCPA	UHCPA
Plan Name	DH-85	CV-OY	CV-OZ	DH-9L	DH-9M
Effective Date	1Q24	1Q24	1Q24	1Q24	1Q24
Index Rate	\$529.82	\$529.82	\$529.82	\$529.82	\$529.82
Risk Adjustment	-10.37%	-10.37%	-10.37%	-10.37%	-10.37%
Reinsurance Assessment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Market Adjusted Index Rate	\$584.75	\$584.75	\$584.75	\$584.75	\$584.75
Provider Network Savings	1.0000	1.0000	1.0000	1.0000	1.0000
Benefit Extra EHB	1.001	1.001	1.001	1.001	1.001
Actuarial Value and Cost Sharing	0.687	0.790	0.825	0.736	0.723
Benefit Richness (Induced Demand)	0.967	1.014	1.034	0.987	0.982
Distribution And Administrative cost	19.0%	19.0%	19.0%	19.0%	19.0%
Plan Adjusted Index Rate	\$479.88	\$578.63	\$616.63	\$524.45	\$512.89
Calibration					
Age Factor Calibration	1.3915	1.3915	1.3915	1.3915	1.3915
Area Factor Calibration	0.8821	0.8821	0.8821	0.8821	0.8821
Tobacco Factor Calibration	0.0000	0.0000	0.0000	0.0000	0.0000
Calibrated PAIR without Normalization	\$390.97	\$471.40	\$502.35	\$427.26	\$417.84
Trend Normalization					
Calibrated Plan Adjusted Index Rate	\$390.97	\$471.40	\$502.35	\$427.26	\$417.84
Consumer Adjusted Prem Rates - Area 1 (Age 21)	\$305.93				
Consumer Adjusted Prem Rates - Area 2 (Age 21)	\$299.99				
Consumer Adjusted Prem Rates - Area 3 (Age 21)	\$359.57	\$433.54	\$462.02	\$392.95	\$384.29
Consumer Adjusted Prem Rates - Area 4 (Age 21)	\$339.01				
Consumer Adjusted Prem Rates - Area 5 (Age 21)	\$339.75				
Consumer Adjusted Prem Rates - Area 6 (Age 21)		\$423.13	\$450.91	\$383.51	\$375.05
Consumer Adjusted Prem Rates - Area 7 (Age 21)		\$437.64	\$466.39	\$396.67	\$387.92
Consumer Adjusted Prem Rates - Area 8 (Age 21)		\$411.01	\$438.00	\$372.53	\$364.31
Consumer Adjusted Prem Rates - Area 9 (Age 21)		\$429.49	\$457.69	\$389.27	\$380.69
Rate Tables Template Rates - Area 1 (Age 21)	\$306.03				
Rate Tables Template Rates - Area 2 (Age 21)	\$300.08				
Rate Tables Template Rates - Area 3 (Age 21)	\$359.68	\$433.70	\$462.14	\$393.05	\$384.39
Rate Tables Template Rates - Area 4 (Age 21)	\$339.11				
Rate Tables Template Rates - Area 5 (Age 21)	\$339.86				
Rate Tables Template Rates - Area 6 (Age 21)		\$423.27	\$451.03	\$383.60	\$375.15
Rate Tables Template Rates - Area 7 (Age 21)		\$437.80	\$466.51	\$396.77	\$388.03
Rate Tables Template Rates - Area 8 (Age 21)		\$411.16	\$438.12	\$372.62	\$364.41
Rate Tables Template Rates - Area 9 (Age 21)		\$429.64	\$457.82	\$389.38	\$380.80

Projected Risk Adjustment PMPM

a	Billable Member Months	223,956
b	Plan Liability Risk Score	1.1078
c	Allowable Rating Factor	1.4003
d	Geographic Cost Factor	1.0233
e	Induced Demand Factor	1.0773
f	Actuarial Value	0.7849
g	PA UHC Total – Product for All Plans with Risk	1.2140
h	PA UHC Total – Product for All Plans without Risk	1.2115
i	State Avg – Product for All Plans with Risk	1.3379
j	State Avg – Product for All Plans without Risk	1.2134
k	State Average Premium	\$565.80
l	Administrative Cost Adjustment to State Average Premium	86%
m	Transfer PMPM	(\$44.31)
n	PA UHC Average Premium	\$583.06
o	Transfer as a Percent of PA UHC Average Premium	-7.6%
p	Proj Inc Claims, before ACA rein & Risk Adj't, PMPM (URRT Wksht 1)	\$529.82
q	Risk Adjustment User Fee	\$0.21
r	Projected Risk Adjustments PMPM	(\$41.80)


$$T_i = \left[\frac{PLRS_i \times IDF_i \times GCF_i}{\sum_i (s_i \times PLRS_i \times IDF_i \times GCF_i)} - \frac{AV_i \times ARF_i \times IDF_i \times GCF_i}{\sum_i (s_i \times AV_i \times ARF_i \times IDF_i \times GCF_i)} \right] \bar{P}_s$$

$$m = \left[\frac{g}{i} - \frac{h}{j} \right] k \times l$$

- T_i = Plan *i* Transfer PMPM
- $PLRS_i$ = Plan *i* Plan Liability Risk Score
- AV_i = Plan *i* Actuarial Value
- ARF_i = Plan *i* Average Rating Factor
- IDF_i = Plan *i* Induced Demand Factor
- GCF_i = Plan *i* Geographic Cost Factor
- s_i = Plan *i* Share of State Enrollment

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- Notes:
- Values are estimated based on 2022 RATEE files as of 05/03/2023, RATEE survey results from PID, and WNRAR 202212
 - Values do not include any estimated model change for 2023 or 2024
 - UHIC and UHCPA combined

											
Healthcare Economics											
PENNSYLVANIA SMALL GROUP PRICING TREND DEVELOPMENT											
MAY 2023 RATE FILING SUPPORT											
PENNSYLVANIA SMALL GROUP PRICING TREND BY COMPONENT											
		Notes:	<u>Inpatient</u>	<u>Outpatient</u>	<u>Professional</u>	<u>Other</u>	<u>Capitation</u>		<u>Total Medical</u>	<u>Retail Pharmacy</u>	<u>Weighted Aggregate</u>
Component Summary											
	Utilization / Service Mix	[1], [2]	3.1%	5.8%	4.8%	2.2%	0.0%		4.3%	5.0%	4.5%
	Unit Cost	[3]	4.1%	4.2%	1.4%	1.9%	9.9%		3.5%	4.7%	3.7%
	Demographic Change	[5]	0.0%	0.0%	0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
	Benefit Leveraging	[4]	0.1%	1.5%	1.2%	0.5%	0.0%		0.9%	0.8%	0.9%
	<u>Margin</u>		<u>0.0%</u>	<u>0.0%</u>	<u>0.0%</u>	<u>0.0%</u>	<u>0.0%</u>		<u>0.0%</u>	<u>0.0%</u>	<u>0.0%</u>
	Total Proposed Pricing Trend	[6]	7.4%	11.9%	7.6%	4.7%	9.9%		8.9%	10.8%	9.3%
	Service Weight - Pennsylvania		22.0%	28.3%	19.0%	6.9%	2.5%		78.7%	21.3%	100.0%
Notes:											
[1]	Represents core utilization only, exclusive of demographic change impacts; includes expected impact of changes in business day content.										
[2]	Represents expected changes in intensity of services provided.										
[3]	Represents core unit pricing increases, exclusive of service mix / intensity of services impact;										
[4]	Impact of member cost-share leveraging on net claims cost trend.										
[5]	Represents trend impact of age and gender changes; No provision included for Small Group business (age/gender community rating variable).										
[6]	Pricing models do not distinguish between Primary and Specialty medical care; same trends shown for both.										

Federal MLR Development			
Estimated Federal MLR Calculation			
Claims			
(A)	Projected Claims		\$445.40
(B)	<u>QI-IT Initiatives, Fraud, Medical Management</u>		<u>\$2.70</u>
(C)	Total Projected Claims for MLR (A + B)		\$448.10
Premium			
(D)	Avg Single Risk Pool Gross Premium		\$549.73
(E)	<u>Total Taxes and Fees</u>		<u>\$3.62</u>
(F)	Total Premium for MLR (D - E)		\$546.11
MLR (C / F)			82.1%
Premium Taxes and Fees Allocation			Estimated % of Premium
	Federal / State Income Tax on Profit & Risk Load		0.53%
	Premium Tax		0.00%
	ACA Taxes: PCORI Fee		0.05%
	ACA Taxes: Risk Adjustment User Fee		0.05%
	ACA Taxes: Exchange User Fee		0.00%
	All Other Taxes & Fees		0.04%
	Total		0.67%

Paid to Allowed Ratio Calculation		
Projected Paid to Allowed Ratio - Projection Period	76.1%	
Blended Experience Period Paid to Allowed Ratio	74.6%	
Legal Entity:		
Experience Period Incurred Claim, PMPM	\$ 422.42	
Experience Period Allowed Claim, PMPM	\$ 513.53	
Experience Period Paid to Allowed Ratio	82.3%	
Allowed Claims (Non-Capitated)	\$ 8,297,830	
Total Prescription Drug Rebates*	\$ (498,829)	
Total EHB Capitation	\$ 214,601	
Experience Period Allowed Claim	\$ 8,013,602	
Member Months	15,605	
Experience Period Allowed Claim, PMPM	\$ 513.53	
Credibility Manual:		
Experience Period Incurred Claim, PMPM	\$ 434.97	
Experience Period Allowed Claim, PMPM	\$ 529.73	
Experience Period Paid to Allowed Ratio	82.1%	
Experience Period Adjusted Paid to Allowed Ratio	74.0%	
Staring Point - Relativity Differential	0.8757	
Normalized for Induced Demand and Network Differentials		
Induced Demand	0.9712	
Needed P/A adj't to Cred Man. to Match Filing Entity	0.9017	
Leveraging Impact	1.0183	
Re-Sloping/Revenue Neutrality Adjustment	0.9920	
Cost Sharing Distr. Shift (Includes Re-Sloping/Revenue Neutrality Adj't)	1.0101	
Leveraging Impact Calculation:		
Leveraging Trend	0.9%	
Months of Trend Applied	25	
Leveraging Impact	1.0183	
Cost Sharing Distr. Shift		
<i>Filed 1/1/2024</i>		
Current Medical Manual Rate	\$ 653.77	
Average Med & Rx Rel	0.6852	
<i>Approved 1/1/2023</i>		
Current Medical Manual Rate	\$ 599.74	
Average Med Rel	0.6782	
Cost Sharing Distr. Shift	1.0101	
Metal Tier	Avg Sloping Adj	Projected Mbr Months
Bronze	1.000	274
Silver	1.030	10,389
Gold	1.080	6,565
Platinum	1.150	0
Projected Avg IDF:	1.049	
Metal Tier	Avg Sloping Adj	Experience Mbr Months
Bronze	1.000	297
Silver	1.030	9,388
Gold	1.080	5,920
Platinum	1.150	0
Legal Entity Avg IDF:	1.048	
Metal Tier	Avg Sloping Adj	Experience Mbr Months
Bronze	1.000	7,829
Silver	1.030	53,310
Gold	1.080	100,542
Platinum	1.150	45,534
Credibility Manual Avg IDF:	1.079	
Legal Entity Med Rel:	0.6782	
Credibility Manual Med Rel:	0.7745	
Staring Point - Relativity Differential	0.8757	

PA Area Factor Analysis

Rating Area	Total (UHIC + UHCPA) Member Months CY 2022	A. Current Pricing Area Factors	HCE Area Factors 202201 - 202212	UCRT Adjustment	UCRT Adjusted HCE Area Factors 202201 - 202212	B. Indicated Area Factors	C. Indicated Change C = (B/A)-1	D. Proposed Area Factors	E. Proposed Change E = (D/A)-1
1	396	0.7825	0.8611	1.0003	0.8960	0.7982	2.0%	0.7825	0.0%
2	30	0.7673	0.8015	0.9934	0.8472	0.7547	-1.6%	0.7673	0.0%
3	8,609	0.9384	1.0447	0.9759	1.0147	0.9039	-3.7%	0.9197	-2.0%
4	10,967	0.8671	0.9192	1.0083	0.9451	0.8420	-2.9%	0.8671	0.0%
5	758	0.8690	0.9811	1.0023	0.9875	0.8798	1.2%	0.8690	0.0%
6	16,563	0.9159	1.0452	0.9799	1.0181	0.9070	-1.0%	0.8976	-2.0%
7	13,058	0.9284	1.0601	1.0033	1.0477	0.9333	0.5%	0.9284	0.0%
8	156,302	0.8719	0.9837	0.9929	0.9825	0.8753	0.4%	0.8719	0.0%
9	16,137	0.9111	1.0349	1.0053	1.0303	0.9179	0.7%	0.9111	0.0%
Totals	222,820	0.8835	0.9954	0.9936	0.9917	0.8835	0.0%	0.8814	-0.2%

Blending of Area Factors in Rating Areas 3 and 6

Rating Area	Total (UHIC + UHCPA) Member Months CY 2022	A. Current Pricing Area Factors	HCE Area Factors 202201 - 202212	UCRT Adjustment	UCRT Adjusted HCE Area Factors 202201 - 202212	B. Indicated Area Factors	C. Indicated Change C = (B/A)-1	D. Proposed Area Factors	E. Proposed Change E = (D/A)-1
3	8,609	0.9384	1.0447	0.9759	1.0147	0.9039	-3.7%	0.9197	-2.0%
6	16,563	0.9159	1.0452	0.9799	1.0181	0.9070	-1.0%	0.8976	-2.0%
Totals	25,172	0.9236	1.0450	0.9785	1.0169	0.9059	-1.9%	0.9052	-2.0%

2024 Rates Table Template v13.0				
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*	24872			
Rate Effective Date*	1/1/2024			
Rate Expiration Date*	3/31/2024			
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
24872PA0030001	Rating Area 1	No Preference	0-14	234.11
24872PA0030001	Rating Area 1	No Preference	15	254.92
24872PA0030001	Rating Area 1	No Preference	16	262.88
24872PA0030001	Rating Area 1	No Preference	17	270.84
24872PA0030001	Rating Area 1	No Preference	18	279.41
24872PA0030001	Rating Area 1	No Preference	19	287.97
24872PA0030001	Rating Area 1	No Preference	20	296.85
24872PA0030001	Rating Area 1	No Preference	21	306.03
24872PA0030001	Rating Area 1	No Preference	22	306.03
24872PA0030001	Rating Area 1	No Preference	23	306.03
24872PA0030001	Rating Area 1	No Preference	24	306.03
24872PA0030001	Rating Area 1	No Preference	25	307.25
24872PA0030001	Rating Area 1	No Preference	26	313.37
24872PA0030001	Rating Area 1	No Preference	27	320.72
24872PA0030001	Rating Area 1	No Preference	28	332.65
24872PA0030001	Rating Area 1	No Preference	29	342.45
24872PA0030001	Rating Area 1	No Preference	30	347.34
24872PA0030001	Rating Area 1	No Preference	31	354.69
24872PA0030001	Rating Area 1	No Preference	32	362.03
24872PA0030001	Rating Area 1	No Preference	33	366.62
24872PA0030001	Rating Area 1	No Preference	34	371.52
24872PA0030001	Rating Area 1	No Preference	35	373.97
24872PA0030001	Rating Area 1	No Preference	36	376.42
24872PA0030001	Rating Area 1	No Preference	37	378.87
24872PA0030001	Rating Area 1	No Preference	38	381.31
24872PA0030001	Rating Area 1	No Preference	39	386.21
24872PA0030001	Rating Area 1	No Preference	40	391.11
24872PA0030001	Rating Area 1	No Preference	41	398.45
24872PA0030001	Rating Area 1	No Preference	42	405.49
24872PA0030001	Rating Area 1	No Preference	43	415.28
24872PA0030001	Rating Area 1	No Preference	44	427.52
24872PA0030001	Rating Area 1	No Preference	45	441.91
24872PA0030001	Rating Area 1	No Preference	46	459.05
24872PA0030001	Rating Area 1	No Preference	47	478.32
24872PA0030001	Rating Area 1	No Preference	48	500.36
24872PA0030001	Rating Area 1	No Preference	49	522.09
24872PA0030001	Rating Area 1	No Preference	50	546.57
24872PA0030001	Rating Area 1	No Preference	51	570.75
24872PA0030001	Rating Area 1	No Preference	52	597.37
24872PA0030001	Rating Area 1	No Preference	53	624.30
24872PA0030001	Rating Area 1	No Preference	54	653.37
24872PA0030001	Rating Area 1	No Preference	55	682.45
24872PA0030001	Rating Area 1	No Preference	56	713.97
24872PA0030001	Rating Area 1	No Preference	57	745.80
24872PA0030001	Rating Area 1	No Preference	58	779.76
24872PA0030001	Rating Area 1	No Preference	59	796.60
24872PA0030001	Rating Area 1	No Preference	60	830.57
24872PA0030001	Rating Area 1	No Preference	61	859.94
24872PA0030001	Rating Area 1	No Preference	62	879.22
24872PA0030001	Rating Area 1	No Preference	63	903.40
24872PA0030001	Rating Area 1	No Preference	64 and over	918.09
24872PA0030001	Rating Area 2	No Preference	0-14	229.56
24872PA0030001	Rating Area 2	No Preference	15	249.97
24872PA0030001	Rating Area 2	No Preference	16	257.77
24872PA0030001	Rating Area 2	No Preference	17	265.57
24872PA0030001	Rating Area 2	No Preference	18	273.97
24872PA0030001	Rating Area 2	No Preference	19	282.38
24872PA0030001	Rating Area 2	No Preference	20	291.08
24872PA0030001	Rating Area 2	No Preference	21	300.08
24872PA0030001	Rating Area 2	No Preference	22	300.08
24872PA0030001	Rating Area 2	No Preference	23	300.08
24872PA0030001	Rating Area 2	No Preference	24	300.08
24872PA0030001	Rating Area 2	No Preference	25	301.28
24872PA0030001	Rating Area 2	No Preference	26	307.28
24872PA0030001	Rating Area 2	No Preference	27	314.48
24872PA0030001	Rating Area 2	No Preference	28	326.19
24872PA0030001	Rating Area 2	No Preference	29	335.79
24872PA0030001	Rating Area 2	No Preference	30	340.59
24872PA0030001	Rating Area 2	No Preference	31	347.79
24872PA0030001	Rating Area 2	No Preference	32	354.99
24872PA0030001	Rating Area 2	No Preference	33	359.50
24872PA0030001	Rating Area 2	No Preference	34	364.30
24872PA0030001	Rating Area 2	No Preference	35	366.70
24872PA0030001	Rating Area 2	No Preference	36	369.10
24872PA0030001	Rating Area 2	No Preference	37	371.50
24872PA0030001	Rating Area 2	No Preference	38	373.90
24872PA0030001	Rating Area 2	No Preference	39	378.70
24872PA0030001	Rating Area 2	No Preference	40	383.50
24872PA0030001	Rating Area 2	No Preference	41	390.70
24872PA0030001	Rating Area 2	No Preference	42	397.61
24872PA0030001	Rating Area 2	No Preference	43	407.21
24872PA0030001	Rating Area 2	No Preference	44	419.21
24872PA0030001	Rating Area 2	No Preference	45	433.32
24872PA0030001	Rating Area 2	No Preference	46	450.12
24872PA0030001	Rating Area 2	No Preference	47	469.03
24872PA0030001	Rating Area 2	No Preference	48	490.63
24872PA0030001	Rating Area 2	No Preference	49	511.94
24872PA0030001	Rating Area 2	No Preference	50	535.94
24872PA0030001	Rating Area 2	No Preference	51	559.65
24872PA0030001	Rating Area 2	No Preference	52	585.76
24872PA0030001	Rating Area 2	No Preference	53	612.16

24872PA0030001	Rating Area 2	No Preference	54	640.67
24872PA0030001	Rating Area 2	No Preference	55	669.18
24872PA0030001	Rating Area 2	No Preference	56	700.09
24872PA0030001	Rating Area 2	No Preference	57	731.29
24872PA0030001	Rating Area 2	No Preference	58	764.60
24872PA0030001	Rating Area 2	No Preference	59	781.11
24872PA0030001	Rating Area 2	No Preference	60	814.42
24872PA0030001	Rating Area 2	No Preference	61	843.22
24872PA0030001	Rating Area 2	No Preference	62	862.13
24872PA0030001	Rating Area 2	No Preference	63	885.84
24872PA0030001	Rating Area 2	No Preference	64 and over	900.24
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24872PA0030002	Rating Area 7	No Preference	62	1257.80
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24872PA0030002	Rating Area 8	No Preference	62	1181.26
24872PA0030002	Rating Area 8	No Preference	63	1213.74
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24872PA0030002	Rating Area 9	No Preference	36	528.46
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24872PA0030002	Rating Area 9	No Preference	49	732.97
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24872PA0030002	Rating Area 9	No Preference	63	1268.30
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24872PA0030009	Rating Area 9	No Preference	41	495.80
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24872PA0030009	Rating Area 9	No Preference	51	710.19
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24872PA0030009	Rating Area 9	No Preference	53	776.83
24872PA0030009	Rating Area 9	No Preference	54	813.01
24872PA0030009	Rating Area 9	No Preference	55	849.18
24872PA0030009	Rating Area 9	No Preference	56	888.41
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24872PA0030009	Rating Area 9	No Preference	58	970.28
24872PA0030009	Rating Area 9	No Preference	59	991.22
24872PA0030009	Rating Area 9	No Preference	60	1033.49
24872PA0030009	Rating Area 9	No Preference	61	1070.05
24872PA0030009	Rating Area 9	No Preference	62	1094.04
24872PA0030009	Rating Area 9	No Preference	63	1124.12
24872PA0030009	Rating Area 9	No Preference	64 and over	1142.40

2024 Rates Table Template v13.0				
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*	24872			
Rate Effective Date*	4/1/2024			
Rate Expiration Date*	6/30/2024			
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
24872PA0030001	Rating Area 1	No Preference	0-14	239.50
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24872PA0030001	Rating Area 1	No Preference	16	268.93
24872PA0030001	Rating Area 1	No Preference	17	277.07
24872PA0030001	Rating Area 1	No Preference	18	285.83
24872PA0030001	Rating Area 1	No Preference	19	294.60
24872PA0030001	Rating Area 1	No Preference	20	303.68
24872PA0030001	Rating Area 1	No Preference	21	313.07
24872PA0030001	Rating Area 1	No Preference	22	313.07
24872PA0030001	Rating Area 1	No Preference	23	313.07
24872PA0030001	Rating Area 1	No Preference	24	313.07
24872PA0030001	Rating Area 1	No Preference	25	314.32
24872PA0030001	Rating Area 1	No Preference	26	320.58
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24872PA0030001	Rating Area 1	No Preference	28	340.31
24872PA0030001	Rating Area 1	No Preference	29	350.33
24872PA0030001	Rating Area 1	No Preference	30	355.33
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24872PA0030001	Rating Area 1	No Preference	32	370.36
24872PA0030001	Rating Area 1	No Preference	33	375.06
24872PA0030001	Rating Area 1	No Preference	34	380.07
24872PA0030001	Rating Area 1	No Preference	35	382.57
24872PA0030001	Rating Area 1	No Preference	36	385.08
24872PA0030001	Rating Area 1	No Preference	37	387.58
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24872PA0030001	Rating Area 1	No Preference	45	452.07
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24872PA0030001	Rating Area 1	No Preference	47	489.33
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24872PA0030001	Rating Area 1	No Preference	63	924.18
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24872PA0030001	Rating Area 2	No Preference	36	377.59
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24872PA0030001	Rating Area 4	No Preference	60	941.51
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24872PA0030002	Rating Area 3	No Preference	63	1309.71
24872PA0030002	Rating Area 3	No Preference	64 and over	1331.01
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24872PA0030002	Rating Area 6	No Preference	16	371.96
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24872PA0030009	Rating Area 6	No Preference	52	749.14
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24872PA0030009	Rating Area 6	No Preference	56	895.36
24872PA0030009	Rating Area 6	No Preference	57	935.27
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24872PA0030009	Rating Area 6	No Preference	63	1132.92
24872PA0030009	Rating Area 6	No Preference	64 and over	1151.34
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24872PA0030009	Rating Area 7	No Preference	17	351.30
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24872PA0030009	Rating Area 8	No Preference	57	908.51
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24872PA0030009	Rating Area 8	No Preference	61	1047.57
24872PA0030009	Rating Area 8	No Preference	62	1071.05
24872PA0030009	Rating Area 8	No Preference	63	1100.51
24872PA0030009	Rating Area 8	No Preference	64 and over	1118.40
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24872PA0030009	Rating Area 9	No Preference	43	528.63
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24872PA0030009	Rating Area 9	No Preference	57	949.36
24872PA0030009	Rating Area 9	No Preference	58	992.60
24872PA0030009	Rating Area 9	No Preference	59	1014.02
24872PA0030009	Rating Area 9	No Preference	60	1057.27
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24872PA0030009	Rating Area 9	No Preference	62	1119.21
24872PA0030009	Rating Area 9	No Preference	63	1149.98
24872PA0030009	Rating Area 9	No Preference	64 and over	1168.68

2024 Rates Table Template v13.0				
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*	24872			
Rate Effective Date*	7/1/2024			
Rate Expiration Date*	9/30/2024			
Rating Method*	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
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24872PA0030001	Rating Area 1	No Preference	16	275.23
24872PA0030001	Rating Area 1	No Preference	17	283.56
24872PA0030001	Rating Area 1	No Preference	18	292.53
24872PA0030001	Rating Area 1	No Preference	19	301.51
24872PA0030001	Rating Area 1	No Preference	20	310.80
24872PA0030001	Rating Area 1	No Preference	21	320.41
24872PA0030001	Rating Area 1	No Preference	22	320.41
24872PA0030001	Rating Area 1	No Preference	23	320.41
24872PA0030001	Rating Area 1	No Preference	24	320.41
24872PA0030001	Rating Area 1	No Preference	25	321.69
24872PA0030001	Rating Area 1	No Preference	26	328.10
24872PA0030001	Rating Area 1	No Preference	27	335.79
24872PA0030001	Rating Area 1	No Preference	28	348.29
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24872PA0030001	Rating Area 1	No Preference	30	363.67
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24872PA0030001	Rating Area 1	No Preference	32	379.05
24872PA0030001	Rating Area 1	No Preference	33	383.85
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24872PA0030001	Rating Area 1	No Preference	62	920.54
24872PA0030001	Rating Area 1	No Preference	63	945.85
24872PA0030001	Rating Area 1	No Preference	64 and over	961.23
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24872PA0030001	Rating Area 2	No Preference	30	356.59
24872PA0030001	Rating Area 2	No Preference	31	364.13
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24872PA0030001	Rating Area 2	No Preference	35	383.93
24872PA0030001	Rating Area 2	No Preference	36	386.44
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24872PA0030001	Rating Area 4	No Preference	61	997.69

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24872PA0030001	Rating Area 5	No Preference	19	334.84
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24872PA0030001	Rating Area 5	No Preference	25	357.25
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24872PA0030001	Rating Area 5	No Preference	30	403.87
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24872PA0030001	Rating Area 5	No Preference	36	437.67
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24872PA0030001	Rating Area 5	No Preference	63	1050.41
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24872PA0030003	Rating Area 3	No Preference	63	1428.35
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24872PA0030009	Rating Area 9	No Preference	62	1145.47
24872PA0030009	Rating Area 9	No Preference	63	1176.96
24872PA0030009	Rating Area 9	No Preference	64 and over	1196.10

2024 Rates Table Template v13.0				
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*	24872			
Rate Effective Date*	10/1/2024			
Rate Expiration Date*	12/31/2024			
Rating Method*	Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
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24872PA0030001	Rating Area 1	No Preference	16	281.55
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24872PA0030001	Rating Area 1	No Preference	18	299.24
24872PA0030001	Rating Area 1	No Preference	19	308.42
24872PA0030001	Rating Area 1	No Preference	20	317.93
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24872PA0030001	Rating Area 1	No Preference	24	327.76
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24872PA0030009	Rating Area 8	No Preference	40	498.79
24872PA0030009	Rating Area 8	No Preference	41	508.16
24872PA0030009	Rating Area 8	No Preference	42	517.13
24872PA0030009	Rating Area 8	No Preference	43	529.62
24872PA0030009	Rating Area 8	No Preference	44	545.24
24872PA0030009	Rating Area 8	No Preference	45	563.58
24872PA0030009	Rating Area 8	No Preference	46	585.44
24872PA0030009	Rating Area 8	No Preference	47	610.02
24872PA0030009	Rating Area 8	No Preference	48	638.12
24872PA0030009	Rating Area 8	No Preference	49	665.83
24872PA0030009	Rating Area 8	No Preference	50	697.06
24872PA0030009	Rating Area 8	No Preference	51	727.89
24872PA0030009	Rating Area 8	No Preference	52	761.85
24872PA0030009	Rating Area 8	No Preference	53	796.19
24872PA0030009	Rating Area 8	No Preference	54	833.27
24872PA0030009	Rating Area 8	No Preference	55	870.35
24872PA0030009	Rating Area 8	No Preference	56	910.55
24872PA0030009	Rating Area 8	No Preference	57	951.14
24872PA0030009	Rating Area 8	No Preference	58	994.46
24872PA0030009	Rating Area 8	No Preference	59	1015.92
24872PA0030009	Rating Area 8	No Preference	60	1059.25
24872PA0030009	Rating Area 8	No Preference	61	1096.71
24872PA0030009	Rating Area 8	No Preference	62	1121.30
24872PA0030009	Rating Area 8	No Preference	63	1152.14
24872PA0030009	Rating Area 8	No Preference	64 and over	1170.87
24872PA0030009	Rating Area 9	No Preference	0-14	312.00
24872PA0030009	Rating Area 9	No Preference	15	339.73
24872PA0030009	Rating Area 9	No Preference	16	350.33
24872PA0030009	Rating Area 9	No Preference	17	360.94
24872PA0030009	Rating Area 9	No Preference	18	372.36
24872PA0030009	Rating Area 9	No Preference	19	383.78
24872PA0030009	Rating Area 9	No Preference	20	395.60
24872PA0030009	Rating Area 9	No Preference	21	407.84
24872PA0030009	Rating Area 9	No Preference	22	407.84
24872PA0030009	Rating Area 9	No Preference	23	407.84
24872PA0030009	Rating Area 9	No Preference	24	407.84
24872PA0030009	Rating Area 9	No Preference	25	409.47
24872PA0030009	Rating Area 9	No Preference	26	417.63
24872PA0030009	Rating Area 9	No Preference	27	427.42
24872PA0030009	Rating Area 9	No Preference	28	443.32
24872PA0030009	Rating Area 9	No Preference	29	456.37
24872PA0030009	Rating Area 9	No Preference	30	462.90
24872PA0030009	Rating Area 9	No Preference	31	472.69
24872PA0030009	Rating Area 9	No Preference	32	482.47
24872PA0030009	Rating Area 9	No Preference	33	488.59
24872PA0030009	Rating Area 9	No Preference	34	495.12
24872PA0030009	Rating Area 9	No Preference	35	498.38
24872PA0030009	Rating Area 9	No Preference	36	501.64
24872PA0030009	Rating Area 9	No Preference	37	504.91
24872PA0030009	Rating Area 9	No Preference	38	508.17
24872PA0030009	Rating Area 9	No Preference	39	514.69
24872PA0030009	Rating Area 9	No Preference	40	521.22
24872PA0030009	Rating Area 9	No Preference	41	531.01
24872PA0030009	Rating Area 9	No Preference	42	540.39
24872PA0030009	Rating Area 9	No Preference	43	553.44
24872PA0030009	Rating Area 9	No Preference	44	569.75
24872PA0030009	Rating Area 9	No Preference	45	588.92
24872PA0030009	Rating Area 9	No Preference	46	611.76
24872PA0030009	Rating Area 9	No Preference	47	637.45
24872PA0030009	Rating Area 9	No Preference	48	666.82
24872PA0030009	Rating Area 9	No Preference	49	695.78
24872PA0030009	Rating Area 9	No Preference	50	728.40
24872PA0030009	Rating Area 9	No Preference	51	760.62
24872PA0030009	Rating Area 9	No Preference	52	796.10
24872PA0030009	Rating Area 9	No Preference	53	831.99
24872PA0030009	Rating Area 9	No Preference	54	870.74
24872PA0030009	Rating Area 9	No Preference	55	909.48
24872PA0030009	Rating Area 9	No Preference	56	951.49
24872PA0030009	Rating Area 9	No Preference	57	993.91
24872PA0030009	Rating Area 9	No Preference	58	1039.18
24872PA0030009	Rating Area 9	No Preference	59	1061.61
24872PA0030009	Rating Area 9	No Preference	60	1106.88
24872PA0030009	Rating Area 9	No Preference	61	1146.03
24872PA0030009	Rating Area 9	No Preference	62	1171.72
24872PA0030009	Rating Area 9	No Preference	63	1203.94
24872PA0030009	Rating Area 9	No Preference	64 and over	1223.52

Our trend setting process is outlined by the following narrative and exhibits. In general, recent/emerging claims experience is reviewed at the market level for several broad medical expense categories (inpatient, professional, pharmacy, etc.), with utilization, unit cost, benefit leveraging, and business mix identified for each category. Depending on the amount of underlying experience, additional markets may be added together to limit the variability of small blocks of experience. Historical patterns will produce highly variable results with limited credibility. National utilization/mix assumptions along with local contract assessment will be used to produce a more stable and reliable trend estimate.

Unit cost projections are developed based on evaluations of current and anticipated provider contract economics, as well as consideration to both current and expected changes in non-contracted provider cost exposure. **Schedule A1** summarizes our PA and non-PA market contract assessment by service category for PA residents. Regional provider assignments are an internal process only and do not correspond to allowable rating areas.

In determining our projected utilization/mix assumption, we first examine our national historical experience for medical and pharmacy. In order to eliminate business mix issues, our national experience is limited to accounts that exist in both the prior and current period of experience. We call this a "Same Store" assessment. **Schedule B1** compares "Same Store" allowed claim cost between the most complete years. The change in allowed cost is adjusted for demographics, working day differences, COVID abatement, and other minor changes. **Schedule F** compares our normal expected paid trends against the actual experience from 2020. The difference between our actual and estimated 2020 paid trend is our national COVID adjustment factor. Our estimated national unit cost (**Schedule A2**) is subtracted from this total to determine a national historic utilization/mix trend. In order to develop our forward looking utilization/mix component, we must now assess the expected changes that will occur from administrative initiatives, provider contracting, economic conditions, environmental impact, policy provisions, regulatory change, and technological advancements. (**Schedule B2**) Given the complexity of some of these estimates, many of the expected changes are applied uniformly across all service categories. The aggregate utilization mix change is determined and then applied at the service level to create our service level splits. (**Schedule B3**) Given the variation in service level trends, aggregate medical and pharmacy projected trends are developed and service level splits are based on proportional historical experience.

Our final step is to determine a trend estimate for benefit leveraging. Since our analysis is based on allowed cost differences, we must also include a component for which recognizes the benefit leveraging impact from fixed deductibles, copays, and stop loss limits. **Schedule D** includes a process that simulates a net trend calculation assuming the impact of various cost sharing components at the service level.

In general, we're seeing our contract costs or unit cost percentage increase slightly due to financial requirements by various facilities. Since we fix our pharmacy unit cost pricing at 4.7%, a majority of the new pricing schedules both for existing and new drugs flow through into our mix of service category. Pharmacy trends have been high and are expected to stay that way.



Healthcare Economics

PENNSYLVANIA SMALL GROUP PRICING TREND DEVELOPMENT
MAY 2023 RATE FILING SUPPORT

PENNSYLVANIA SMALL GROUP PRICING TREND BY COMPONENT									
Component Summary	Notes:	Inpatient	Outpatient	Professional	Other	Capitation	Total Medical	Retail Pharmacy	Weighted Aggregate
Utilization / Service Mix	[1], [2]	3.1%	5.8%	4.8%	2.2%	0.0%	4.3%	5.0%	4.5%
Unit Cost	[3]	4.1%	4.2%	1.4%	1.9%	9.9%	3.5%	4.7%	3.7%
Demographic Change	[5]	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Benefit Leveraging	[4]	0.1%	1.5%	1.2%	0.5%	0.0%	0.9%	0.8%	0.9%
Margin		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Total Proposed Pricing Trend	[6]	7.4%	11.9%	7.6%	4.7%	9.9%	8.9%	10.8%	9.3%
Service Weight - Pennsylvania		22.0%	28.3%	19.0%	6.9%	2.5%	78.7%	21.3%	100.0%

Notes:

- [1] Represents core utilization only, exclusive of demographic change impacts; includes expected impact of changes in business day content.
- [2] Represents expected changes in intensity of services provided.
- [3] Represents core unit pricing increases, exclusive of service mix / intensity of services impact;
- [4] Impact of member cost-share leveraging on net claims cost trend.
- [5] Represents trend impact of age and gender changes; No provision included for Small Group business (age/gender community rating variable).
- [6] Pricing models do not distinguish between Primary and Specialty medical care; same trends shown for both.

UNITED HEALTHCARE
HEALTHCARE ECONOMICS
PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE A1 – UNIT COST DEVELOPMENT - PENNSYLVANIA

INPATIENT			Region	Service	
Facility	Contract % Chg	Weight	Weight	Weight	<= Pennsylvania service weights(Schedule E)
Region A	4.9%	28.7%			
Region B	6.9%	1.8%			
Region C	3.1%	38.1%			
Region D	4.7%	26.2%			
Region E	2.1%	2.0%			
Region F	4.1%	3.3%			
Total	4.1%	100%	22.0%		<= Summary Exhibit - Inpatient Unit Cost
OUTPATIENT			Region	Service	
Facility	Contract % Chg	Weight	Weight	Weight	<= Pennsylvania service weights(Schedule E)
Region A	3.9%	28.8%			
Region B	5.2%	3.7%			
Region C	3.2%	29.2%			
Region D	5.5%	30.0%			
Region E	2.0%	3.5%			
Region F	3.8%	4.8%			
Total	4.2%	100%	28.3%		<= Summary Exhibit - Outpatient Unit Cost
PROFESSIONAL			Region	Service	
Provider	Contract % Chg	Weight	Weight	Weight	
Region A	2.0%	20.8%			
Region B	1.3%	2.3%			
Region C	0.6%	44.8%			
Region D	2.4%	27.5%			
Region E	0.8%	2.0%			
Region F	0.9%	2.6%			
Total	1.4%	100%	19.0%		<= Summary Exhibit - Professional Unit Cost
OTHER/ANCILLARY			Region	Service	
Provider	Contract % Chg	Weight	Weight	Weight	
Region A	1.9%	16.7%			
Region B	1.9%	1.7%			
Region C	1.2%	44.8%			
Region D	2.2%	28.7%			
Region E	3.0%	3.7%			
Region F	1.0%	4.4%			
Total	1.7%	100%	6.9%		<= Summary Exhibit - Other Unit Cost
CAPITATION			Weight	Service	
Contracts	Contract % Chg	Weight	Weight	Weight	
Group A	9.9%	100%	2.5%		
PHARMACY			Weight	Service	
Total	4.7%		21.3%		<= Summary Exhibit - Pharmacy Unit Cost
	3.7%				<= "Unit Cost estimates are Fixed"
ALL SERVICES			Weight	Service	
			100.0%		<= Summary Exhibit - All Services Unit Cost
MEDICAL WO PHARMACY			Weight	Service	
	3.5%		78.7%		<= Summary Exhibit - Total Medical

Regional information includes all in-state and out-of-state facilities and providers with contract changes weighted by claim dollars.
The contract % change represents all provider changes both in-state and out-of-state over the projection period.
Regional provider assignments are an internal process only and do not correspond to allowable rating areas.

UNITED HEALTHCARE
HEALTHCARE ECONOMICS

PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE A2 -- 2022 UNIT COST DEVELOPMENT - NATIONAL NON-CAPITATED SERVICES

	National Unit Cost	National Weight	<= Weights - Schedule E - National Non-Capitated Services
Inpatient	3.6%	20.6%	
Outpatient	3.1%	27.6%	
Professional	1.3%	20.6%	
Other/Ancillary	1.3%	5.3%	
Pharmacy	4.7%	25.9%	
Total	3.1%	100.0%	
Medical Only	2.6%	74.1%	

Nationwide contract summaries by Service category for Non-Capitated Services only.

SCHEDULE B1 – UTILIZATION / SERVICE MIX COST DEVELOPMENT - NATIONAL HISTORIC

	Medical			Pharmacy		
	Year 1/2021 - 12/2021	Year 1/2022 - 12/2022	Annual Trend	Year 1/2021 - 12/2021	Year 1/2022 - 12/2022	Annual Trend
Baseline Medical Expense						
Member Months	33,523,605	33,426,608	-0.3%	33,523,605	33,426,608	-0.3%
Average Demo Factor	1.101	1.107	0.5%	1.101	1.107	0.5%
Allowed Claim Costs	14,038,284,746	14,287,803,389		4,079,474,966	4,560,741,232	
Allowed Claim Costs PMPM	\$ 418.76	\$ 427.44	2.1%	\$ 121.69	\$ 136.44	12.1%
Adjusted Baseline Medical Expense						
Allowed Claim Costs PMPM			2.1%			12.1%
Certificate of Coverage Changes	/	/	0.0%	/	/	0.0%
Impact of COVID on Utilization	/	/	-0.5%	/	/	0.0%
Demographic change	/	/	0.5%	/	/	0.5%
Impact of Work Day Changes	/	/	0.1%	/	/	0.1%
National Historic Unit Cost	/	/	<u>2.6%</u>	/	/	<u>4.7%</u>
National Historic Utilization/Mix Trend - 2022			-0.7%			6.4%

<== Combined Medical/Pharmacy Demo Factor

<== Represents national certificate of coverage changes on 2022 utilization.

<== Represents an adjustment for COVID abatement.(Schedule F)

<== Based on fixed age/sex table applied to the common experience base.

<== Represents the difference in work days between 2021 and 2022.

<==Nationwide Contract Averages(Schedule A2)

Baseline experience represents a national fixed exposure base which is in-force for both experience periods.
Baseline experience does not include any capitated expenses.

UNITED HEALTHCARE
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PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE B2 -- UTILIZATION COST DEVELOPMENT - NATIONAL PROJECTED

Projected Utilization Trend	Medical		Pharmacy		
	2021	2022	2021	2022	
Utilization Trend	-0.7%	4.1%	6.4%	4.6%	<== The starting 2022 Utilization Trend is taken from Schedule B1
	2022 - 2023 Run Rate Adj.	2023 - 2024 Run Rate Adj.	2022 - 2023 Run Rate Adj.	2024 - 2025 Run Rate Adj.	
Administrative Initiatives	0.17%	-0.05%	0.17%	-0.05%	<== Includes impact from any administrative or procedural changes
Contracting	0.82%	0.25%	0.82%	0.25%	<== Includes impact from changes in mix of providers and services provided
Economic	3.80%	0.00%	-3.20%	0.00%	<== Includes expected utilization changes due to changes in economic conditions
Environmental	-0.17%	0.37%	-0.17%	0.37%	<== Includes impact from flu, storms, etc..
Policy	0.00%	-0.10%	0.00%	-0.10%	<== Includes impact for any policy provision changes except for mandates
Regulatory	0.45%	-0.06%	0.45%	-0.06%	<== Includes impact from mandate changes
Technology	0.01%	-0.01%	0.57%	-0.03%	<== Includes impact from any new medical technologies including new drugs
Workdays	<u>-0.32%</u>	<u>0.47%</u>	<u>-0.32%</u>	<u>0.47%</u>	<== Includes impact from Work day differences between years
Subtotal	4.79%	0.88%	-1.73%	0.86%	<== The total run rate adjustment from year to year (This total is applied the to previous year utilization to project next year's utilization trend)
	2023	2024	2023	2024	
Projected Utilization Trend	4.1%	5.0%	4.6%	5.5%	<== Projected Utilization uses 2022 and adjusts for any anticipated changes in run rate
50/50 Blended Utilization/Service Mix Trend		4.6%		5.0%	<== Blending occurs to match the experience period with the projected date of rate change

Run Rate adjustments represent differences in trend changes from year to year.

PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE B3 -- UTILIZATION COST DEVELOPMENT - NATIONAL SERVICE LEVEL SPLIT

	Medical									
	Year 1/2021 - 12/2021	Year 1/2022 - 12/2022	Annual Trend	COC Chgs on Util	Impact of COVID on Util	Demo	Impact of Working Days	2022 Unit Cost	2022 Utilization/ Mix Trend	
Baseline Medical Expense										
Allowed Claim Costs PMPM			(F)	(G)	(H)	(I)	(J)	(K)	(L)	
Inpatient	\$ 106.75	\$ 102.66	-3.8%	0.0%	-5.8%	0.5%	0.1%	3.6%	-2.1%	<==(F)/(G)/(H)/(I)/(J)/(K) = (L)
Outpatient	\$ 150.66	\$ 162.58	7.9%	0.0%	3.5%	0.5%	0.1%	3.1%	0.5%	
Professional	\$ 126.63	\$ 129.88	2.6%	0.0%	1.0%	0.5%	0.1%	1.3%	-0.4%	<== 2022 Unit Cost - Schedule A2
<u>Ancillary/Other</u>	<u>\$ 34.72</u>	<u>\$ 32.31</u>	<u>-6.9%</u>	<u>0.0%</u>	<u>-6.0%</u>	<u>0.5%</u>	<u>0.1%</u>	<u>1.3%</u>	<u>-2.9%</u>	
Medical	\$ 418.76	\$ 427.44	2.1%	0.0%	-0.5%	0.5%	0.1%	2.6%	-0.7%	<== Schedule B1
50/50 Blended Utilization/Service Mix Trend			4.6%							<== Schedule B2
Historic 2022 Utilization/Service Mix Trend			-0.7%							
Historic to Projected Blend Adjustment			5.2%							
Service Level	2022 Utilization/ Mix Trend	Historic to Projected Adjustment	Projected Utilization/ Service Mix							
Inpatient	-2.1%	5.2%	3.1%							
Outpatient	0.5%	5.2%	5.8%							
Professional	-0.4%	5.2%	4.8%							
<u>Ancillary/Other</u>	<u>-2.9%</u>	<u>5.2%</u>	<u>2.2%</u>							
Medical	-0.7%	5.2%	4.6%							
Capitation			0.0%							
Pharmacy			5.0%							<== Schedule B2

Baseline experience represents a national fixed exposure base which is in-force for both experience periods.
Baseline experience does not include any capitated expenses.

PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE D -- BENEFIT LEVERAGING DEVELOPMENT - PENNSYLVANIA SMALL GROUP

A. Baseline Claims --- Year 1/2021 - 12/2021							
	Inpatient	Outpatient	Professional	Other	Capitation	Rx	
Allowed \$	\$28,461,352	\$43,749,620	\$31,036,626	\$9,846,484	\$0	\$30,435,597	<== Baseline Allowed claims for Pennsylvania Small Group
Deductible \$	\$425,886	\$5,436,122	\$4,352,416	\$920,799	\$0	\$750,299	
Copay \$	\$296,078	\$1,053,984	\$2,510,817	\$224,461	\$0	\$3,311,615	
Coins \$	<u>\$569,856</u>	<u>\$2,253,608</u>	<u>\$703,662</u>	<u>\$204,332</u>	<u>\$0</u>	<u>\$0</u>	
Net \$	\$27,169,532	\$35,005,907	\$23,469,732	\$8,496,892	\$0	\$26,373,683	
B. Estimated Trend CY 2022 --- Same Exposure Membership							
Core Util / Mix	3.1%	5.8%	4.8%	2.2%		5.0%	<-- Estimated Same Exposure Membership Util / Srve Mix Trend
Core Network Unit \$	4.1%	4.1%	1.4%	1.9%		4.7%	<-- Normalized Unit \$ Trend, Sched A1
Demographic Trend	0.0%	0.0%	0.0%	0.0%		0.0%	<-- Estimated Same Exposure Membership Demographic Trend, Sched C
Allowed Claims Trend	7.3%	10.2%	6.3%	4.2%		10.0%	
Copay Util Trend	3.1%	5.8%	4.8%	2.2%		5.0%	<-- Estimated Util Trend on Services w/ Copay
C. Simulated Net Trend CY 2022 With Common Membership @ Same Benefit Design							
Allowed \$	\$30,546,385	\$48,207,990	\$32,999,330	\$10,256,557	\$0	\$33,469,483	
Deductible \$	\$425,886	\$5,436,122	\$4,352,416	\$920,799	\$0	\$750,299	
Copay \$	\$305,163	\$1,115,319	\$2,632,376	\$229,431	\$0	\$3,478,246	
Coins \$	\$612,503	\$2,519,558	\$757,255	\$213,845	\$0	\$0	
Net \$	\$29,202,833	\$39,136,991	\$25,257,283	\$8,892,482	\$0	\$29,240,938	
Net Trend	7.5%	11.8%	7.6%	4.7%	0.0%	10.9%	
Implied Benefit Leveraging	0.10%	1.50%	1.20%	0.50%	0.00%	0.80%	<-- Net Trend v Allowed Trend, Common Membership @ Same Benefit Design
Projected Leverage Change	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	<-- Includes any anticipated changes including ACA requirements (Higher pharmacy trend through high cost drugs requires leverage reduction)
Projected Benefit Leveraging	<u>0.1%</u>	<u>1.5%</u>	<u>1.2%</u>	<u>0.5%</u>	<u>0.0%</u>	<u>0.8%</u>	<-- Final Projected Benefit Leveraging by Service Category

Using the Cost sharing component percentage from a completed experience period, the appropriate trend factors are applied to the various components in order to simulate the benefit leveraging component under no change in benefits.

PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE E -- SERVICE TYPE WEIGHTING

	<u>National</u>	<u>National Non-Capitated</u>	<u>Pennsylvania Small Group</u>
Inpatient	20.5%	21.1%	22.0%
Outpatient	27.0%	27.7%	28.3%
Professional	20.1%	20.6%	19.0%
Ancillary	5.2%	5.3%	6.9%
Capitation	2.5%	0%	2.5%
Pharmacy	<u>24.7%</u>	<u>25.3%</u>	<u>21.3%</u>
Total	100.0%	100.0%	100.0%



Healthcare Economics

PENNSYLVANIA SMALL GROUP PRICING TREND DEVELOPMENT
APRIL 2023 RATE FILING SUPPORT

PENNSYLVANIA SMALL GROUP PRICING TREND BY COMPONENT									
Component Summary	Notes:	Inpatient	Outpatient	Professional	Other	Capitation	Total Medical	Retail Pharmacy	Weighted Aggregate
Utilization / Service Mix	[1], [2]	3.5%	6.3%	5.3%	2.7%	0.0%	4.8%	5.5%	4.9%
Unit Cost	[3]	3.6%	3.9%	1.5%	2.9%	6.3%	3.2%	4.7%	3.5%
Demographic Change	[5]	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Benefit Leveraging	[4]	0.1%	1.4%	1.3%	0.6%	0.0%	0.9%	0.8%	0.9%
Margin		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Total Proposed Pricing Trend	[6]	7.3%	11.9%	8.3%	6.3%	6.3%	9.1%	11.3%	9.6%
Service Weight - Pennsylvania		22.0%	28.3%	19.0%	6.9%	2.5%	78.7%	21.3%	100.0%

Notes:

- [1] Represents core utilization only, exclusive of demographic change impacts; includes expected impact of changes in business day content.
- [2] Represents expected changes in intensity of services provided.
- [3] Represents core unit pricing increases, exclusive of service mix / intensity of services impact;
- [4] Impact of member cost-share leveraging on net claims cost trend.
- [5] Represents trend impact of age and gender changes; No provision included for Small Group business (age/gender community rating variable).
- [6] Pricing models do not distinguish between Primary and Specialty medical care; same trends shown for both.

UNITED HEALTHCARE
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SCHEDULE A1 – UNIT COST DEVELOPMENT - PENNSYLVANIA

INPATIENT			Region	Service	
Facility	Contract % Chg	Weight	Weight	Weight	<= Pennsylvania service weights(Schedule E)
Region A	4.4%	28.7%			
Region B	6.0%	1.8%			
Region C	2.4%	37.9%			
Region D	4.3%	26.3%			
Region E	1.7%	2.0%			
Region F	3.6%	3.3%			
Total	3.6%	100%		22.0%	<= Summary Exhibit - Inpatient Unit Cost
OUTPATIENT			Region	Service	
Facility	Contract % Chg	Weight	Weight	Weight	<= Pennsylvania service weights(Schedule E)
Region A	3.8%	28.7%			
Region B	4.9%	3.7%			
Region C	2.6%	29.1%			
Region D	5.3%	30.3%			
Region E	1.6%	3.5%			
Region F	3.4%	4.8%			
Total	3.9%	100%		28.3%	<= Summary Exhibit - Outpatient Unit Cost
PROFESSIONAL			Region	Service	
Provider	Contract % Chg	Weight	Weight	Weight	
Region A	2.2%	20.8%			
Region B	1.4%	2.3%			
Region C	0.7%	44.6%			
Region D	2.3%	27.7%			
Region E	1.3%	2.0%			
Region F	1.3%	2.6%			
Total	1.5%	100%		19.0%	<= Summary Exhibit - Professional Unit Cost
OTHER/ANCILLARY			Region	Service	
Provider	Contract % Chg	Weight	Weight	Weight	
Region A	2.5%	16.7%			
Region B	2.6%	1.7%			
Region C	2.9%	44.6%			
Region D	3.1%	28.9%			
Region E	4.0%	3.7%			
Region F	1.9%	4.4%			
Total	2.9%	100%		6.9%	<= Summary Exhibit - Other Unit Cost
CAPITATION			Weight	Service	
Contracts	Contract % Chg	Weight	Weight	Weight	
Group A	6.3%	100%		2.5%	
PHARMACY			Weight	Service	
Total	4.7%			21.3%	<= Summary Exhibit - Pharmacy Unit Cost <= "Unit Cost estimates are Fixed"
ALL SERVICES			Weight	Service	
Total	3.5%			100.0%	<= Summary Exhibit - All Services Unit Cost
MEDICAL WO PHARMACY			Weight	Service	
Total	3.2%			78.7%	<= Summary Exhibit - Total Medical

Regional information includes all in-state and out-of-state facilities and providers with contract changes weighted by claim dollars.
The contract % change represents all provider changes both in-state and out-of-state over the projection period.
Regional provider assignments are an internal process only and do not correspond to allowable rating areas.

**UNITED HEALTHCARE
HEALTHCARE ECONOMICS**

PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE A2 -- 2022 UNIT COST DEVELOPMENT - NATIONAL NON-CAPITATED SERVICES

	National Unit Cost	National Weight	<== Weights - Schedule E - National Non-Capitated Services
Inpatient	3.6%	20.6%	
Outpatient	3.1%	27.6%	
Professional	1.3%	20.6%	
Other/Ancillary	1.3%	5.3%	
Pharmacy	4.7%	25.9%	
Total	<input type="text" value="3.1%"/>	100.0%	
Medical Only	<input type="text" value="2.6%"/>	74.1%	

Nationwide contract summaries by Service category for Non-Capitated Services only.

UNITED HEALTHCARE
HEALTHCARE ECONOMICS
PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE B1 – UTILIZATION / SERVICE MIX COST DEVELOPMENT - NATIONAL HISTORIC

	Medical			Pharmacy			
	Year 1/2021 - 12/2021	Year 1/2022 - 12/2022	Annual Trend	Year 1/2021 - 12/2021	Year 1/2022 - 12/2022	Annual Trend	
Baseline Medical Expense							
Member Months	33,523,605	33,426,608	-0.3%	33,523,605	33,426,608	-0.3%	
Average Demo Factor	1.101	1.107	0.5%	1.101	1.107	0.5%	<== Combined Medical/Pharmacy Demo Factor
Allowed Claim Costs	14,038,284,746	14,287,803,389		4,079,474,966	4,560,741,232		
Allowed Claim Costs PMPM	\$ 418.76	\$ 427.44	2.1%	\$ 121.69	\$ 136.44	12.1%	
Adjusted Baseline Medical Expense							
Allowed Claim Costs PMPM			2.1%			12.1%	
Certificate of Coverage Changes		/	0.0%	/		0.0%	<== Represents national certificate of coverage changes on 2021 utilization.
Impact of COVID on Utilization		/	-0.5%	/		0.0%	<== Represents an adjustment for COVID abatement.(Schedule F)
Demographic change		/	0.5%	/		0.5%	<== Based on fixed age/sex table applied to the common experience base.
Impact of Work Day Changes		/	0.1%	/		0.1%	<== Represents the difference in work days between 2020 and 2021.
National Historic Unit Cost		/	<u>2.6%</u>	/		<u>4.7%</u>	<==Nationwide Contract Averages(Schedule A2)
National Historic Utilization/Mix Trend - 2022			-0.7%			6.4%	

Baseline experience represents a national fixed exposure base which is in-force for both experience periods.
Baseline experience does not include any capitated expenses.

UNITED HEALTHCARE
HEALTHCARE ECONOMICS

PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE B2 -- UTILIZATION COST DEVELOPMENT - NATIONAL PROJECTED

Projected Utilization Trend	Medical		Pharmacy		
	2021	2022	2021	2022	
Utilization Trend	-0.7%	4.1%	6.4%	4.6%	<== The starting 2022 Utilization Trend is taken from Schedule B1
	2021 - 2022 Run Rate Adj.	2022 - 2023 Run Rate Adj.	2021 - 2022 Run Rate Adj.	2023 - 2024 Run Rate Adj.	
Administrative Initiatives	0.17%	-0.05%	0.17%	-0.05%	<== Includes impact from any administrative or procedural changes
Contracting	0.82%	0.25%	0.82%	0.25%	<== Includes impact from changes in mix of providers and services provided
Economic	3.80%	0.00%	-3.20%	0.00%	<== Includes expected utilization changes due to changes in economic conditions
Environmental	-0.17%	0.37%	-0.17%	0.37%	<== Includes impact from flu, storms, etc..
Policy	0.00%	-0.10%	0.00%	-0.10%	<== Includes impact for any policy provision changes except for mandates
Regulatory	0.45%	-0.06%	0.45%	-0.06%	<== Includes impact from mandate changes
Technology	0.01%	-0.01%	0.57%	-0.03%	<== Includes impact from any new medical technologies including new drugs
Workdays	<u>-0.32%</u>	<u>0.47%</u>	<u>-0.32%</u>	<u>0.47%</u>	<== Includes impact from Work day differences between years
Subtotal	4.79%	0.88%	-1.73%	0.86%	<== The total run rate adjustment from year to year (This total is applied the to previous year utilization to project next year's utilization trend)
	2022	2023	2022	2023	
Projected Utilization Trend	4.1%	5.0%	4.6%	5.5%	<== Projected Utilization uses 2022 and adjusts for any anticipated changes in run rate
0/100 Blended Utilization/Service Mix Trend		5.0%		5.5%	<== Blending occurs to match the experience period with the projected date of rate change

Run Rate adjustments represent differences in trend changes from year to year.

UNITED HEALTHCARE
 HEALTHCARE ECONOMICS
 PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE B3 -- UTILIZATION COST DEVELOPMENT - NATIONAL SERVICE LEVEL SPLIT

Baseline Medical Expense	Medical										
	Year 1/2021 - 12/2021	Year 1/2022 - 12/2022	Annual Trend	COC Chgs on Util	Impact of COVID on Util	Demo	Impact of Working Days	2022 Unit Cost	2022 Utilization/ Mix Trend		
Allowed Claim Costs PMPM			(F)	(G)	(H)	(I)	(J)	(K)	(L)		<==(F)/(G)/(H)/(I)/(J)/(K) = (L)
Inpatient	\$ 106.75	\$ 102.66	-3.8%	0.0%	-5.8%	0.5%	0.1%	3.6%	-2.1%		
Outpatient	\$ 150.66	\$ 162.58	7.9%	0.0%	3.5%	0.5%	0.1%	3.1%	0.5%		
Professional	\$ 126.63	\$ 129.88	2.6%	0.0%	1.0%	0.5%	0.1%	1.3%	-0.4%		<== 2022 Unit Cost - Schedule A2
<u>Ancillary/Other</u>	<u>\$ 34.72</u>	<u>\$ 32.31</u>	<u>-6.9%</u>	<u>0.0%</u>	<u>-6.0%</u>	<u>0.5%</u>	<u>0.1%</u>	<u>1.3%</u>	<u>-2.9%</u>		
Medical	\$ 418.76	\$ 427.44	2.1%	0.0%	-0.5%	0.5%	0.1%	2.6%	-0.7%		<== Schedule B1
0/100 Blended Utilization/Service Mix Trend			5.0%								<== Schedule B2
Historic 2021 Utilization/Service Mix Trend			-0.7%								
Historic to Projected Blend Adjustment			5.7%								
Service Level	2021 Utilization/ Mix Trend	Historic to Projected Adjustment	Projected Utilization/ Service Mix								
Inpatient	-2.1%	5.7%	3.5%								
Outpatient	0.5%	5.7%	6.3%								
Professional	-0.4%	5.7%	5.3%								
<u>Ancillary/Other</u>	<u>-2.9%</u>	<u>5.7%</u>	<u>2.7%</u>								
Medical	-0.7%	5.7%	5.0%								
Capitation			0.0%								
Pharmacy			5.5%								<== Schedule B2

Baseline experience represents a national fixed exposure base which is in-force for both experience periods.
 Baseline experience does not include any capitated expenses.

PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE D -- BENEFIT LEVERAGING DEVELOPMENT - PENNSYLVANIA SMALL GROUP

A. Baseline Claims --- Year 1/2021 - 12/2021

	Inpatient	Outpatient	Professional	Other	Capitation	Rx	
Allowed \$	\$28,461,352	\$43,749,620	\$31,036,626	\$9,846,484	\$0	\$30,435,597	<== Baseline Allowed claims for Pennsylvania Small Group
Deductible \$	\$425,886	\$5,436,122	\$4,352,416	\$920,799	\$0	\$750,299	
Copay \$	\$296,078	\$1,053,984	\$2,510,817	\$224,461	\$0	\$3,311,615	
Coins \$	<u>\$569,856</u>	<u>\$2,253,608</u>	<u>\$703,662</u>	<u>\$204,332</u>	<u>\$0</u>	<u>\$0</u>	
Net \$	\$27,169,532	\$35,005,907	\$23,469,732	\$8,496,892	\$0	\$26,373,683	

B. Estimated Trend CY 2022 --- Same Exposure Membership

Core Util / Mix	3.5%	6.3%	5.3%	2.7%		5.5%	<-- Estimated Same Exposure Membership Util / Srve Mix Trend
Core Network Unit \$	3.4%	3.4%	1.5%	2.9%		4.7%	<-- Normalized Unit \$ Trend, Sched A1
Demographic Trend	0.0%	0.0%	0.0%	0.0%		0.0%	<-- Estimated Same Exposure Membership Demographic Trend, Sched C
Allowed Claims Trend	7.2%	10.1%	6.9%	5.6%		10.4%	
Copay Util Trend	3.5%	6.3%	5.3%	2.7%		5.5%	<-- Estimated Util Trend on Services w/ Copay

C. Simulated Net Trend CY 2021 With Common Membership @ Same Benefit Design

Allowed \$	\$30,512,616	\$48,154,696	\$33,168,390	\$10,399,785	\$0	\$33,612,951	
Deductible \$	\$425,886	\$5,436,122	\$4,352,416	\$920,799	\$0	\$750,299	
Copay \$	\$306,496	\$1,120,193	\$2,643,880	\$230,433	\$0	\$3,493,156	
Coins \$	\$611,782	\$2,516,040	\$761,842	\$217,185	\$0	\$0	
Net \$	\$29,168,452	\$39,082,342	\$25,410,253	\$9,031,367	\$0	\$29,369,496	
Net Trend	7.4%	11.6%	8.3%	6.3%	0.0%	11.4%	
Implied Benefit Leveraging	0.10%	1.40%	1.30%	0.60%	0.00%	0.80%	<-- Net Trend v Allowed Trend, Common Membership @ Same Benefit Design
Projected Leverage Change	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	<-- Includes any anticipated changes including ACA requirements (Higher pharmacy trend through high cost drugs requires leverage reduction)
Projected Benefit Leveraging	<u>0.1%</u>	<u>1.4%</u>	<u>1.3%</u>	<u>0.6%</u>	<u>0.0%</u>	<u>0.8%</u>	<-- Final Projected Benefit Leveraging by Service Category

Using the Cost sharing component percentage from a completed experience period, the appropriate trend factors are applied to the various components in order to simulate the benefit leveraging component under no change in benefits.

PENNSYLVANIA SMALL GROUP RATE FILING

SCHEDULE E -- SERVICE TYPE WEIGHTING

	<u>National</u>	<u>National Non-Capitated</u>	<u>Pennsylvania Small Group</u>
Inpatient	20.5%	21.1%	22.0%
Outpatient	27.0%	27.7%	28.3%
Professional	20.1%	20.6%	19.0%
Ancillary	5.2%	5.3%	6.9%
Capitation	2.5%	0%	2.5%
Pharmacy	<u>24.7%</u>	<u>25.3%</u>	<u>21.3%</u>
Total	100.0%	100.0%	100.0%

Standard Questions (UHCPA)

1. Membership:

a. If the projected membership for plan year 2024 significantly differs from the current 2/1/2023 membership, please explain why.

We are using Finance projections which incorporate sales and persistency targets for calendar year 2024. For UHCPA Finance is projecting approximately 17.2K member months whereas Feb-2023 membership annualized would be 15.1K member months. We are using the Feb-2023 membership distribution by plan and projected that membership weighting into our 2024 calendar year total membership projections by plan.

2. Experience Period Claims:

a. Please confirm that all claims which are capitated have been removed from the experience period claims.

Confirmed

b. Please confirm that all non-EHB claims have been removed from the experience period claims.

Confirmed

c. How are drug rebates projected to change from the base period to the rating period? How has this change been reflected in the rate development?

We anticipate drug rebates to slightly increase in relationship to pre-rebate cost. The slight increase in incorporated in the trend development.

3. COVID:

a. Please confirm that Tables 2-4 of the PAAM Exhibits do not have any COVID adjustment. Additionally, please confirm that any COVID adjustment factor in the filing is reflected in Table 5 of the PAAM Exhibits.

Table 3. Trend Components is slightly impacted as there is a small aggregate downward adjustment for Covid in the trend schedules (B3). Separate adjustments were made at the service level to create normal trend assumptions going forward. In 2022, we experienced some unusual service level trends. The adjustments were made at the service level to create a more normal (5 year average) service level trends.

b. If there is a COVID adjustment factor other than 1.0, please provide a quantitative exhibit supporting the factor.

N/A

4. Trend:

a. [SG. Only] If the Total Annual Trend in Table 3 (weighted by credibility) and the Annual Trend used to calculate quarterly rates in Table 5A differ, please provide an explanation and exhibit in support of the variation.

The forward pricing trend uses a 0%/100%(2023/2024) blend versus the 50%/50% experience trends in the exhibits. There will be differences in utilization and unit cost when looking at 2024 only.

b. [SG. Only] In Table 5A, if cells K32:M32 are left to equal J32, please explain why that is a reasonable assumption.

We apply the same annual trend to our quarterly adjustments in the calendar year we are filing for.

5. Table 6 – Retention:

a. Please confirm that the federal income tax is calculated using a Federal Income Tax Rate of 21%. If other adjustments were made in Table 6, cell C57, please provide a demonstration of how this number was calculated and an explanation of the other adjustments included in the calculation.

Confirmed.

b. Please confirm that the Risk Adjustment User Fee PMPM is consistent with HHS Final Notice of Benefit and Payment Parameters for plan year 2024.

Confirmed we updated to \$0.21 as published in the Final NBPP for plan year 2024.

c. Please provide an exhibit showing the commission PMPM amount to be paid to brokers in the following situations: Open-Enrollment Enrollee – Renewing, Open Enrollment Enrollee – New, Special Enrollment Period Enrollee – New, Special Enrollment Enrollee – Renewing. If the commission PMPM is not consistent between the four options above, please provide a detailed explanation as to the reason for the difference.

We are not on the Exchange in PA so these enrollment situations do not apply.

6. Pricing AVs:

a. Please confirm that the Pricing AVs were calculated using a single risk pool (i.e., claims experience is **not** separated by metal level).

Confirmed

b. Please identify and support any differences between the company's metallic AV calculator results and the corresponding Pricing AVs.

Please reference tab labeled '11 – AVCS Calc' in the Rate Filing Exhibits for support on calculations of the Pricing AVs. Our Pricing AVs by plan line up with metal levels of the plans. For example, silver plans do not have Pricing AVs lower than Bronze plans, nor have Pricing AVs higher than Gold plans.

7. Expanded Bronze Plans:

a. Please provide an exhibit which demonstrates that the criteria for expanded bronze plans have been met.

Our three filed bronze plans for 2024 [2 UHIC Plans (DH8Z & DH82) & 1 UHCPA Plan (DH85)] are all HSA plans so they all qualify as High Deductible Health Plans (HDHPs).

8. PAAM Exhibits – Consumer Factors:

a. Please provide quantitative and qualitative support for the proposed geographic rating area factors, if different from the previous year.

Please reference tab labeled '18 – Area Factors Changes' in our Rate Filing Exhibits file. Based on new provider contracts in rating areas 3 and 6 we are only updating area factors in these two rating areas. All other area factors are unchanged from plan year 2023. We also decided to take the blended indicated decrease in both rating area 3 and 6.

b. Please provide quantitative and qualitative support for the proposed network factors, if different from the previous year.

N/A

9. Public Health Emergency:

a. With the Public Health Emergency expected to end on May 11th, how has the rate development been affected? Please provide support for any adjustments, or support for making no adjustments, if applicable.

Yes, the additional vaccine costs have been built into the trends. Overall Impact to trends is minimal.

b. Furthermore, with the Public Health Emergency scheduled to end on May 11th, has any adjustment been made specifically to the morbidity assumption for Plan Year 2024?

Please see 9a.

c. Please provide commentary on how the Company believes services such as COVID vaccinations and COVID testing will be handled in PY24. Within your response please clarify if these services will be considered preventative and covered at 100%.

We believe the Company will cover COVID vaccines at 100% but that member cost sharing will be in place for COVID testing.

10. MLR Exhibit:

a. Please complete table below which summarizes the most recent three years of complete MLR information.

i. Actual is the final information which was filed for the specified calendar year

ii. Pricing is the information which was projected in the final annual filing for the given year (i.e., 2020 pricing information is from the plan year 2020 annual filing submitted in 2019)

Calendar Year	MLR		Member Months	
	Actual	Projected	Actual	Projected
2019	85.2%	86.8%	7,149	16,380
2020	96.8%	85.9%	16,762	70,042
2021	91.7%	87.1%	16,250	14,712

b. Are the MLRs and Member Months between Actual and Pricing comparable? If not, explain.

Overall for the size of the block we are comparable. 2020 projected membership we overshoot as our Finance and Sales teams were predicting larger growth than actually occurred in the block.

c. Does the insurer expect to pay MLR rebates for the 3-year period above?

No

11. Plan of Withdrawal:

a. Please confirm that a Plan of Withdrawal has been submitted if any plans are being discontinued.

We have made a business decision to more streamline our portfolio of plan offerings by reducing the number of plans we offer in plan year 2024 (5 plans) versus plan year 2023 (9 plans). 2023 plans that are no longer available in 2024 have been mapped to an available 2024 plan option. The tab labeled ‘5 – Plan Changes’ in the Rate Filing Exhibits file has the plan mapping information. We are still offering plans in all our filed products and metal levels. We are not withdrawing any products from the market.

b. For further information regarding the Plan of Withdrawal process, click here. Please send all Plan of Withdrawals to Jeffery Rohaly, wrohaly@pa.gov.

N/A

Objection Letter Status: Data Request Sent

Objection Letter Date:06/09/2023

Respond By Date:06/21/2023

Dear Daniel Akier,

Introduction:

June 9, 2023

Daniel Akier

United Healthcare Insurance Company

185 Asylum Street

Hartford, CT 06103

RE: United Healthcare Insurance Company of PA, Small Group PPO, ACA Filing for PY2024

Pennsylvania Insurance Department ID # UHLC-133662663

Dear Daniel Akier:

The Pennsylvania Insurance Department has received and conducted a preliminary review of the above captioned filing. In order to complete the review, we are requesting the following information. To facilitate a timely review, we request this information be provided June 21, 2023. If you have any questions or difficulties in providing the data within this time frame, please contact me.

1. The figures in Column W of Table 10 in the PAAM Exhibits should represent members but actually represent member months. Please correct this problem.

[Column W in Table 10 has been updated to be members. The new PAAM file is named "PA SG UHCPA 202401 PAAM Rate Exhibits - v2 06.21.23".](#)

2. The following questions concern your proposed area factor changes for PY2024:

(a) Please describe how the proposed area factors were derived.

[We are using our Healthcare Economic \(HCE\) data for calendar year 2022. The data represents Unit Costs by geographic split. The data from HCE is normalized for utilization levels and service mix - resulting in one rate per rating area that is intended to reflect relative charge levels only. We have updated Exhibit 18 with additional underlying data. As shown in Column G "UCRT Adjusted HCE Area Factors 202201 - 202212", we weight this number by 75% and add in a flat 25% \(1.00 x 25%\) to represent Rx costs, resulting in a relative cost index for each area. The data is then aggregated at the state level and compared to current pricing factors. This compares the emerging experience to the current pricing factors to possibly recalibrate the area factors.](#)

[As noted in our "Standard Questions" responses we have new provider contracts that directly impact rating areas 3 and 6. Based on our HCE analysis rating areas 3 and 6 both indicated a decrease of 3.7% and 1.0% respectively. A business decision was made to only take the member weighted change in rating areas 3 and](#)

6. We propose no changes to the other rating area factors. In Exhibit 18 we have also added a table showing the calculation of the blended 2% decrease we are filing for in rating areas 3 and 6 (we rounded 1.9% up to 2.0%).

(b) Further describe how differences in morbidity between rating areas did not affect the derivation of the proposed factors.

Morbidity by rating area was not considered. The process of developing Rating Area Factors starts by analyzing normalized cost metrics within each rating area. Allowed claims were first gathered by rating area and then normalized for the risk profile in each rating area. This normalizes the impact of morbidity between rating areas to gain a true view of unit cost differentials between rating area. Please note that there is no explicit adjustment for normalization of the risk profile. The methodology is set to a "basket of health services" and then price out in different regions. By pricing the same representative mix of inpatient, outpatient, and professional services in all counties, we can derive estimates of the relative cost of different areas in a way that clearly does not invoke concerns about normalizing out population morbidity.

(c) Did you derive the area factor relativities by comparing the risk-adjusted loss ratios between the different geographic areas to remove morbidity differences between areas?

No. Please reference response (b) above.

Did you also normalize the loss ratios to remove demographic differences?

No. Please reference response (b) above.

3. The Department is interested in the issuer's estimate of the drivers of the rate change, In particular, what portion of the indicated rate change from Table 11 is due to changes in various components such as reinsurance (individual market only), utilization trend, unit cost trend, expenses, morbidity, benefits, risk adjustment, or other relevant factors?

Please reference Exhibit 3 in the objection response workbook.

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

We confirm we have tested to ensure that the rates between the PA Plan Design Summary and Rate Table, Federal Rates Templates, and binder are identical. Due to rounding, rates in the PAAM Exhibits have immaterial differences of a few cents.

5. The Risk Adjustment user fee used in Table 6 of the PAAM is 19 cents PMPM . Please change this to 21 cents PMPM.

The risk adjustment user fee has been updated to \$0.21. The new PAAM file is named "PA SG UHCPA 202401 PAAM Rate Exhibits – v2 06.21.23".

6. Please create a new version of the public PDF that includes the "standard questions and answers" (i.e. Standard Questions_2024 PID_UHICPA - v1 05_17_23).

We have updated the public PDF to include the Standard Questions file. The new public PDF is named "PA UHCPA Public PDF 06.21.2023".

Please be advised that there may be additional questions based on the responses to the above. Towards this end, please provide complete detailed and thorough responses including supporting data and narrative.

Response to this request should be provided via SERFF in Microsoft Excel spreadsheets. Please retain all

formulas.

Upon receipt of your responses to the above requested data, the Department will continue to review your filing. Please note that there may be additional questions and/or requirements as the Department conducts a more in-depth review.

Should you have any questions regarding this correspondence, please contact me at jlaverty@pa.gov.

Sincerely,

James Laverty, FSA, MAAA

Actuary

Bureau of Accident & Health Insurance

Cell (860) 729-8522

Exhibit - 3

State: PA | Market Segment: Small Group | Company: UnitedHealthcare of Pennsylvania, Inc | HIOS Issuer ID: 24872 | Proposed Effective Date: 1/1/2024

SCID	Benefit Plan Factor Δ	Base Rate Δ *	1/1/24 Base Rate Δ	Trend Impact	Revenue Neutrality (Benefit Plan Factor)	UHC Rewards	Other	Average Area Factor Δ **	Total Plan Δ ***
24872PA0030001	-1.8%	9.01%	1.5%	8.1%	-0.8%	0.1%	0.02%	-0.83%	6.19%
24872PA0030002	1.4%	9.01%	1.5%	8.1%	-0.8%	0.1%	0.02%	-0.42%	10.11%
24872PA0030003	0.9%	9.01%	1.5%	8.1%	-0.8%	0.1%	0.02%	0.00%	10.00%
24872PA0030004	0.9%	9.01%	1.5%	8.1%	-0.8%	0.1%	0.02%	0.00%	10.00%
24872PA0030005	1.7%	9.01%	1.5%	8.1%	-0.8%	0.1%	0.02%	-0.28%	10.55%
24872PA0030006	1.7%	9.01%	1.5%	8.1%	-0.8%	0.1%	0.02%	-0.38%	10.43%
24872PA0030007	0.2%	9.01%	1.5%	8.1%	-0.8%	0.1%	0.02%	-0.22%	9.01%
24872PA0030008	1.7%	9.01%	1.5%	8.1%	-0.8%	0.1%	0.02%	0.00%	10.86%
24872PA0030009	0.2%	9.01%	1.5%	8.1%	-0.8%	0.1%	0.02%	-0.23%	9.00%

* This includes any base rate changes, the impact from pricing trend, and revenue neutrality adjustments.

** Area is based on February 2023 membership distribution so this reflects the total impact of area changes.

*** Matches Table 11 (column AN) by plan

Objection Letter Status:Data Request Sent

Objection Letter Date:07/07/2023

Respond By Date:

Submitted Date:07/07/2023 11:49 AM

Dear Daniel Akier,

Introduction:

July 7, 2023

Daniel Akier
United Healthcare Insurance Company
185 Asylum Street
Hartford, CT 06103

RE: United Healthcare Insurance Company of PA, Small Group PPO, ACA Filing for PY2024
Pennsylvania Insurance Department ID # UHLC-133662663

Dear Daniel Akier:

The Pennsylvania Insurance Department has received and conducted a preliminary review of the above captioned filing. In order to complete the review, we are requesting the following information. To facilitate a timely review, we request this information be provided July 14, 2023. If you have any questions or difficulties in providing the data within this time frame, please contact me.

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

[We confirm we have tested to ensure that the rates between the PA Plan Design Summary and Rate Table, Federal Rates Templates, and binder are identical. Due to rounding, rates in the PAAM Exhibits have immaterial differences of a few cents.](#)

2. Please update the 2022 experience period risk adjustment amount in Table 2 to reflect the final CMS risk adjustment amount released on June 30th.

[We have updated Table 2 to reflect the final CMS risk adjustment amount. Please note that the amount we previously had in Table 2 was only off by \\$0.01](#)

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.

[No change to projected risk adjustment transfer amount.](#)

4. Please ensure that the 7/14/23 versions of the following items are posted in SERFF with your July 14th response to this data call.

[All updated files have been loaded to SERFF.](#)

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 (don't forget to update the "VI Rate Change Summary" tab, if necessary)

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. URRRT
- f. Federal Rate Template
- g. Part III: Actuarial Memorandum
- h. 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).

5. The Department is interested in the issuer’s estimate of the drivers of the rate change, In particular, what portion of the indicated rate change from Table 11 is due to changes in various components such as reinsurance (individual market only), utilization trend, unit cost trend, expenses, morbidity, benefits, risk adjustment, or other relevant factors?

The drivers of the 9.9% rate change are as follows: benefit changes add 1.0%, base rate adds 1.5%, trend adds 8.1% (utilization = 3.6%, unit cost = 3.5%, leveraging = 0.8%), area factor changes subtract 0.2%, the revenue neutrality adjustment subtracts 0.8%, and other changes add 0.2%.

Drivers	Rate Change
Benefit Changes	1.0%
Base Rate Increase	1.5%
Utilization	3.6%
Unit Cost	3.5%
Leveraging	0.8%
Area Factor Change	-0.2%
Rev Neutrality Adj	-0.8%
Other	0.2%
Total	9.9%

Further, the Department appreciates your response to this question (it was Q3) from our Round 1 letter sent on June 9th. Your earlier response gave detailed changes at the plan level, but we were hoping to see a more general answer at the legal entity level that could be presented to management. This would allow management to compare the “drivers of change” by company on a more “apples-to-apples” basis. For example, many companies answered this question as follows ... trend added x% to the premium increase, risk adjustment subtracted y%, benefit changes added z%, and “other” changes subtracted w%. Please reformulate your answer to this Round 1 question.

Please be advised that there may be additional questions based on the responses to the above. Towards this end, please provide complete detailed and thorough responses including supporting data and narrative.

Response to this request should be provided via SERFF in Microsoft Excel spreadsheets. Please retain all formulas.

Upon receipt of your responses to the above requested data, the Department will continue to review your filing. Please note that there may be additional questions and/or requirements as the Department conducts a more in-depth review.

Should you have any questions regarding this correspondence, please contact me at jlaverty@pa.gov.

Sincerely,

James Lavery, FSA, MAAA

Actuary

Bureau of Accident & Health Insurance

Cell (860) 729-8522

Conclusion:

Sincerely, Jim Lavery



July 14th, 2023


Mr. James Lavery | Actuary
Pennsylvania Insurance Department

Pennsylvania Insurance Department ID # UHLC-133662663

Dear Mr. Lavery,

This cover letter details the changes made to 1/1/2024 PA UHCPA SG Filing.

1. On June 9th, 2023, we received our first round of objections. The items listed below were updated as requested by the PID.
 - Column W of Table 10 in the PA Actuarial Memorandum Exhibits was updated to represent members.
 - The Risk Adjustment User Fee was updated to \$0.21 PMPM in Table 6 of PA Actuarial Memorandum Exhibits.
 - The Standard Questions were added to the Public PDF.
2. On June 30th, 2023, CMS released the final risk adjustment transfer amounts. We updated our risk adjustment transfer amount from -\$1,479,471.01 to -\$1,479,471.02. The following have been impacted as well due to this change.
 - Tables 2 of the PA Actuarial Memorandum Exhibits
 - Section F of the Act Memo
 - Section 4 of the Part III Memo
 - URRT – (Wksh 1 – Market Experience ; Section I: Experience Period Data)

Should you have any questions or need any additional information, please contact me at 



Sincerely,



