

UPMC HEALTH PLAN

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May 17, 2023

Ms. Lindsi Swartz
Commonwealth of Pennsylvania Insurance Department
Insurance Product Regulation & Market Enforcement
Actuarial Review Division
Bureau of Life, Accident & Health Insurance
1311 Strawberry Square
Harrisburg, PA 17120

Dear Ms. Swartz,

UPMC Health Coverage, Inc. respectfully requests approval of a rate filing for Individual On and Off Exchange HMO products. The rates are proposed for effective dates of 1/1/2024 through 12/31/2024.

Company Name/NAIC #: UPMC Health Coverage, Inc./15451
Market: Individual
On or Off Exchange: On and Off
Effective Date of Coverage: 1/1/2024
Average Rate Change Requested (Table 11): 11.34% (\$40.62)
Range of Rate Change Requested (Table 11): 4.50% to 16.45% (\$16.11 to \$58.93)
Products Offered: HMO
Rating Areas Where Plans are Offered: 1, 5 (no change from 2023)
Metal Levels Offered: Catastrophic, Bronze, Silver, Gold
Currently Enrolled Lives Affected by the Rate Change: 2,202
Currently Enrolled Policyholders Affected by the Rate Change: 1,587
Number of Plans Offered in 2024: 8 (1 less than 2023)
Total additional annual revenue generated from the proposed rate change: \$2,205,947
Corresponding Contract Form #: 660, 676
Binder ID#: UPMC-PA24-125116425
HIOS Issuer ID #: 62560
Submission Tracking #: UPMC-133641900

If you have any questions or require additional information, please call me at 978-420-6794 or email me at killamm@upmc.edu.

Sincerely,



Matthew Killam, FSA, MAAA

UPMC HEALTH PLAN

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July 14, 2023

Ms. Lindsi Swartz
Commonwealth of Pennsylvania Insurance Department
Insurance Product Regulation & Market Enforcement
Actuarial Review Division
Bureau of Life, Accident & Health Insurance
1311 Strawberry Square
Harrisburg, PA 17120

Dear Ms. Swartz,

UPMC Health Coverage, Inc. respectfully requests approval of a rate filing for Individual On and Off Exchange HMO products. The rates are proposed for effective dates of 1/1/2024 through 12/31/2024.

Company Name/NAIC #: UPMC Health Coverage, Inc./15451
Market: Individual
On or Off Exchange: On and Off
Effective Date of Coverage: 1/1/2024
Average Rate Change Requested (Table 11): 7.61% (\$27.78)
Range of Rate Change Requested (Table 11): 0.81% to 12.35% (\$2.97 to \$45.09)
Products Offered: HMO
Rating Areas Where Plans are Offered: 1, 5 (no change from 2023)
Metal Levels Offered: Catastrophic, Bronze, Silver, Gold
Currently Enrolled Lives Affected by the Rate Change: 2,202
Currently Enrolled Policyholders Affected by the Rate Change: 1,587
Number of Plans Offered in 2024: 8 (1 less than 2023)
Total additional annual revenue generated from the proposed rate change: \$1,479,418
Corresponding Contract Form #: 660, 676
Binder ID#: UPMC-PA24-125116425
HIOS Issuer ID #: 62560
Submission Tracking #: UPMC-133641900

If you have any questions or require additional information, please call me at 978-420-6794 or email me at killamm@upmc.edu.

Sincerely,



Matthew Killam, FSA, MAAA

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July 14, 2023

Ms. Valerie Romig
Commonwealth of Pennsylvania Insurance Department
Insurance Product Regulation & Market Enforcement
Actuarial Review Division
Bureau of Life, Accident & Health Insurance
1311 Strawberry Square
Harrisburg, PA 17120

Dear Ms. Romig,

UPMC Health Coverage, Inc. has made revisions to its rate filing initially submitted May 17, 2023. As requested in the PID Final Rate Filing Guidance, and in accordance with data requests issued by the Department, the enclosed filing has been updated to reflect:

- An assumed 1332 State Reinsurance program with parameters of \$60,000 attachment point, \$100,000 cap, and 50% coinsurance (a maximum of \$20,000 recovery) per enrollee.
- Revised rate increases as a result of
 - updating the 1332 Reinsurance program assumption as described above
 - including the claim impact of Act 1 of 2023 with an effective date of January 1, 2024.
- Final 2022 risk adjustment as published in the CMS PY 2022 Final Risk Adjustment Report released on June 30, 2023.
- A revision to the RADV component of the projected period Risk Adjustment assumption.
- Updated allocation of members by county of residence in the Plan and Summary Design template to reflect the county of residence a member selected during enrollment, for instances where members live in cross-county ZIP codes.

If you have any questions or require additional information, please call me at 978-420-6794 or email me at killamm@upmc.edu.

Sincerely,



Matthew Killam, FSA, MAAA

HIOS Issuer ID #: 62560
Submission Tracking #: UPMC-133641900

PA Actuarial Memorandum

Section 1 - Basic Information and Data

The purpose of this actuarial memorandum is to provide certain information related to a rate submission for the company identified below. The relevant index rate is developed in accordance with federal regulations, and plan specific premiums are generated using the allowable modifiers in accordance with the single risk pool rule.

1A. Company Information

The following section provides information related to the identification of the company that is submitting this rate filing. Much of this information is also displayed in Table 0 of the PA Actuarial Memorandum Exhibits.

Company Legal Name: UPMC Health Coverage, Inc.
NAIC #: 15451
HIOS Issuer ID: 62560
Market: Individual
Exchange: On and Off Exchange
Products: HMO
Effective Date: 1/1/2024

Company Contact Information:



Filing Information:

Rate Filing SERFF Tracking #: UPMC-133641900
Form Filing SERFF Tracking #: UPMC-133666167, UPMC-133666186
Binder SERFF Tracking #: UPMC-PA24-125116425

1B. Rate History and Proposed Variations in Rate Changes

Historical and proposed rate changes vary by plan due to various changes made to meet AV requirements on a plan-by-plan basis. The values listed below and overall proposed rate change for 2023 are weighted averages of the increase for each plan based on projected enrollment. Please see Table 10 of the PA Actuarial Memorandum Exhibits for a breakdown of plan-by-plan rate increases.

SERFF Tracking #	Year	Rate Change*
UPMC-132364646	2021	N/A**
UPMC-132801380	2022	2.5%
UPMC-133257300	2023	4.4%

* Historical increases in this table are from Table 10

** Structure of Table 10 leads to DIV/0 error in cell AC15 for 2021 filing

1C. Average Rate Change

- Average rate change in Table 10, column AC of the PA Actuarial Memorandum Exhibits: 6.1%
- Change in 21-year-old non-tobacco premium PMPM in Table 11, cell AN13 of the PA Actuarial Memorandum Exhibits: 7.6%

1D. Membership Count

Various breakdowns of the membership count for the captioned company and market are displayed in Table 1 of the PA Actuarial Memorandum Exhibits.

1E. Benefit Changes

A table with these changes has been included in Appendix I. All plans have metal level actuarial values in accordance with the latest HHS requirements.

1F. Experience Period Claims and Premium

The single risk pool consists of members that are anticipated to enroll in ACA-compliant policies offered under the captioned market. Claims and premium data for all non-grandfathered policies in the single risk pool for the captioned company and market from the experience period (January 2022 - December 2022) with two months of run-out are displayed in Table 2 of the PA Actuarial Memorandum Exhibits. This section provides a discussion of each field in the table and its relation to the corresponding fields on the URRT. Please note that no data for Transitional (Grandmothered) policies is included in this table.

Earned Premium:

This represents the revenue accumulated by the captioned company during the experience period. No adjustments were made for MLR rebates as we do not anticipate owing them. HHS cost-sharing is not included in the premium data. Please note that the earned premium listed in Table 2 does match the total premium listed in section I, worksheet 1 of the URRT.

Paid Claims:

This field includes uncompleted paid medical, pharmacy, and pediatric vision experience period claims for the captioned company and market.

Ultimate Incurred Claims:

This field includes completed paid medical and pharmacy experience period claims for the captioned company and market. We used the standard Development/Completion Factor Method to calculate IBNR. The completion factors used in Table 4b are displayed in the table below. Factors were calculated using our entire ACA-related Individual block of business and no unexpected factors were observed. Because two months run-out is available, the impact of IBNR is minimal. Please note that the ultimate incurred claims shown in Table 2 do not match the total incurred claims displayed in section I, worksheet 1 of the URRT because the value in the URRT equals the ultimate incurred claims less total prescription drug rebates listed in Table 2 and HHS cost-sharing.

Month	Completion Factor
1/1/2022	0.9998
2/1/2022	0.9996
3/1/2022	0.9982
4/1/2022	0.9972
5/1/2022	0.9960
6/1/2022	0.9932
7/1/2022	0.9912
8/1/2022	0.9883
9/1/2022	0.9854
10/1/2022	0.9812
11/1/2022	0.9675
12/1/2022	0.9432

The following table shows the ultimate paid claims for the experience period distinguished between claims paid and fully adjudicated and claims estimated by IBNR:

Incurred Claims Processed by Claim System:	\$ 21,654,697
Claims Processed Outside Claim System:	\$ -
Claims Estimated by IBNR:	\$ 339,776
Ultimate Incurred Claims:	\$ 21,994,474

Member Months:

The sum of the experience period member months shown in Table 1 is also displayed in Table 2.

Estimated Cost Sharing:

This field represents the difference between allowed claims and ultimate incurred claims in Table 2.

Allowed Claims:

This field includes allowed medical and pharmacy claims as well as pediatric dental and vision claims from the experience period for the captioned company and market, which are pulled directly from our data warehouse. Please note that the allowed claims shown in Table 2 do not match the total allowed claims displayed in section I, worksheet 1 of the URRT because the value in the URRT equals the allowed claims less total prescription drug rebates listed in Table 2.

Non-EHB portion of Allowed Claims:

This field displays the amount of allowed experience period claims that can be attributed to non-EHBs for the captioned market and company.

Total Prescription Drug Rebates:

This field shows the amount of prescription drug rebates received for the captioned company and market during the experience period. Pharmacy rebates have been removed from the total incurred and allowed claims displayed in section I, worksheet 1 of the URRT.

Total EHB Capitation:

EHB benefits were not paid for via capitation during the experience period.

Total Non-EHB Capitation:

Non-EHB benefits were not paid for via capitation during the experience period.

Estimated Risk Adjustment:

Experience period Risk Adjustment for the captioned company is estimated to be a receipt of \$496,079 per the [Summary Report on Permanent Risk Adjustment Transfers for the 2022 Benefit Year published by CMS on June 30, 2022](#). The receipt translates to a PMPM of \$18.07.

Estimated Reinsurance Recoveries:

Experience period recoveries from the state-based reinsurance program are estimated to be a receivable of \$1,310,743 aligning with the estimate from the Pennsylvania Insurance Department based on data through May 2, 2023, which translates to a PMPM of \$47.75.

Loss Ratio:

The loss ratio calculated in Table 2 is 94.78%.

1G. Credibility of Data

The manual data for this filing was developed using the entirety of ACA-compliant experience period data from each of UPMC's subsidiary companies in the Individual market, which is displayed in tables 2b, 3b, and 4b in the PA Actuarial Memorandum Exhibits. The manual data consists of 1,245,888 member months of experience.

The experience period data for this company consists of 27,450 member months from ACA-compliant policies. Because the manual data encompasses the single risk pool of all UPMC Individual market companies, we believe it most appropriately represents the claim experience for use in calculating projected rates. Therefore, we assign 100% credibility to the manual data and 0% credibility is used for each company-specific single risk pool. Adjustments to the data include the trend and network adjustments discussed in the "Index Rate" section below.

1H. Trend Identification

The overall annual trend used in rate development is 4.64%. Historical allowed claims from our Individual block of ACA-compliant business across all of UPMC's subsidiary companies were used to develop year-over-year trend factors for use in the projected rates, and the basis for this trend is the three-year annualized change between 2019 and 2022. This approach omits the substantial impact that the COVID-19 pandemic had on calendar year 2020 claims.

The large enrollment count and consistent makeup of this population make it appropriate for use in trend development for this filing. Service categories were defined to be consistent with the URRT instructions. Please see Tables 3 and 3b of the PA Actuarial Memorandum Exhibits for trend development calculations. Please note that the minor changes made to benefit designs in order to keep plan actuarial values within the allowed ranges were not significant enough to warrant an adjustment for induced demand with regard to trend, so the induced

demand column has been populated with zeroes in Tables 3 and 3b. No changes in provider contracting are expected between the experience and projection periods, and therefore, no adjustments have been applied.

Please see Exhibit 5 of the Supporting Exhibits for trend development.

11. Historical Experience

Historical data from the four most recent calendar years for the captioned company and market with two months of run-out is provided in Table 4. Allowed claims were developed using the same manner described above for Table 2. The historical data listed in Table 4b consists of a blend of ACA-compliant experience data from each of UPMC's subsidiary companies in the Individual market and was used in the development of manual trend.

Section 2 - Rate Development & Change

2A. Projected Index Rate, Market-Adjusted Index Rate, & Total Allowed Claims

Table 5 of the PA Actuarial Memorandum Exhibits shows the development of the projected index rate, Market-Adjusted Index Rate, and projected total allowed claims. Detailed discussions on the development of each quantity are provided below.

Index Rate:

For this filing, the Index Rate of the Experience Period is set equal to the manual rate as outlined above in Section 1G of this memorandum. The calculation of the manual rate is shown in Table 2b of the PA Actuarial Memorandum Exhibits. The Index Rate of the Projection Period is then calculated in Table 5 by first applying two years of 4.64% annual trend to the Index Rate of Experience Period.

For 2024, the Pennsylvania Insurance Department has mandated that an adjustment factor of 1.0 is applied to the index rate to reflect the morbidity impact of the state-based reinsurance program in the Individual market. In line with that guidance, no adjustment for changes in morbidity as a result of the state-based reinsurance program has been applied.

UPMC is including a morbidity adjustment factor of 1.015 as a result of the end of the Public Health Emergency and the anticipated enrollment of members who will lose Medicaid coverage. This adjustment is based on UPMC experience for members who left the fully-insured ACA Individual market during the PHE and enrolled immediately in UPMC Medicaid coverage, as well as the estimated proportion of total 2024 ACA Individual enrollment that is comprised of these newly ineligible Medicaid members. Please see Exhibit 13 of the Supporting Exhibits for additional support of this adjustment.

An adjustment factor of 1.340 has been applied to the index rate to account for differences in expected allowed claims costs between the manual data and that of the captioned company. This adjustment factor brings the

captioned company index rate in line with the current characteristics of the provider networks. Please see Exhibit 8 of the Supporting Exhibits for the derivation of this factor.

An adjustment factor of **0.970** has been applied to the index rate in the Change in Other category. This adjustment accounts for medical and pharmacy cost savings initiatives that UPMC has actively engaged in, and represents the impact of those savings in 2024 relative to the 2022 experience period. Please see Exhibit 9 of the Supporting Exhibits for the derivation of the Change in Other factor applied in Table 5.

Please note that the Change in Other factor has been revised relative to the factor used in the initial rate filing submission on May 17, 2023, to reflect the cost impact of Act 1 of 2023. The schedule of benefits for 2024 ACA policies will align with the provisions of this legislation, and the additional cost in the projection period is estimated to be \$1.14 PMPM, as illustrated in Exhibit 9 of the Supporting Exhibits.

No other adjustments have been applied to the index rate. The average age for our experience period Individual risk pool was 45.1 with an average premium factor of 1.88. This is nearly identical to our 2023 experience so far with age 45.3 and premium factor 1.89. Due to the stability of the population, no demographic adjustment has been made to the rates. Please note that the Index Rate of Projection Period of **\$810.63** shown in Table 5 matches the corresponding value shown in Section II, Worksheet 1 of the URRT.

Market-Adjusted Index Rate:

The Projected Index Rate is adjusted by adding estimates for risk adjustment and marketplace fees (with impacts and costs spread across the whole risk pool) to obtain the Projected Market Adjusted Index Rate.

Projection period Risk Adjustment PMPM has been estimated to be a payment of **\$21.80**, which is displayed in Table 5. The value was derived by first using a blend of the estimated experience period Risk Adjustment PMPM from each of UPMC's subsidiary companies in the Individual market. The projection period Risk Adjustment PMPM then accounts for the impact of known changes to HHS model weights for the 2024 Benefit Period. Finally, the transfer amount is adjusted to reflect the estimated impact of the Risk Adjustment Data Validation (RADV) program. UPMC relies on analysis by Wakely Consulting in estimating the impacts of both the 2024 model changes and the RADV program.

Please see Exhibit 10 of the Supporting Exhibits for the derivation of this estimate.

The value entered in Section II, Worksheet 1 of the URRT was **\$28.07** since the calculation of the Market Adjusted Index Rate is done on an allowed claims basis in the URRT. The updated PMPM was derived by taking the original paid PMPM divided by the Paid to Allowed Average Factor. The net amount after accounting for the fee is subtracted from the Index Rate of the Projection Period as part of the calculation of the Market Adjusted Index Rate. For the URRT and Table 5 of the PA Actuarial Memorandum Rate Exhibits, it was entered as a negative number because the calculation subtracts this value. The effect is an increase in premium as additional revenue will be required to cover the anticipated payment.

The member-weighted average of a 3.0% Marketplace User Fee for Marketplace enrollees combined with 0% for non-Marketplace enrollees calculates to 2.3%. This load is developed based on fees from on-exchange policies, but is spread over all policies uniformly. This translates to a PMPM of **\$13.15**, which was entered as a positive value in Table 5 since the calculation adds this value. The effect for this adjustment is an increase in premium as additional revenue will be required to cover the anticipated payment. Since the URRT requires the exchange user fee to be listed on an "allowed" basis, the final value included in the URRT was calculated by first taking

exchange user fee PMPM of \$13.15 divided by the paid-to-allowed ratio to derive the "allowed" exchange user fee PMPM. This value was then divided by the market adjusted index rate to arrive at the final value of 2.6%.

The index rate was further adjusted by accounting for estimated recoveries from the state-based reinsurance program. Estimated recoveries applied in Table 5 and Section II, Worksheet 1 of the URRT were \$27.65 PMPM and \$35.60 PMPM, respectively. The value entered in the URRT was derived by taking the Table 5 recovery PMPM and dividing by the Paid to Allowed Average Factor, as the calculation of the Market Adjusted Index Rate is done on an allowed claims basis. These values were entered as positive values in Table 5 and the URRT since both calculations subtract these values. The result of this adjustment is a decrease in projected period premium as less revenue will be required due to the anticipated recovery.

The estimated recovery of \$27.65 PMPM was derived using data entered into worksheets II.a and II.b of the PA Actuarial Memorandum exhibits. Data entered into worksheet II.a matches the experience period data described in the sections above. Worksheet II.b was populated by referencing the same source of experience captured in worksheet II.a, but with member-level incurred claims trended forward two years to the projection period before allocating the data to each range within the continuance table. An annualized claims trend of 4.64% was applied to estimate the projected member-level claims used to populate worksheet II.b. The projected recovery is calculated using a per-member attachment of \$60,000, a cap of \$100,000, and a coinsurance rate of 50%, as communicated by the Pennsylvania Insurance Department on June 13, 2023 by email.

Total Allowed Claims:

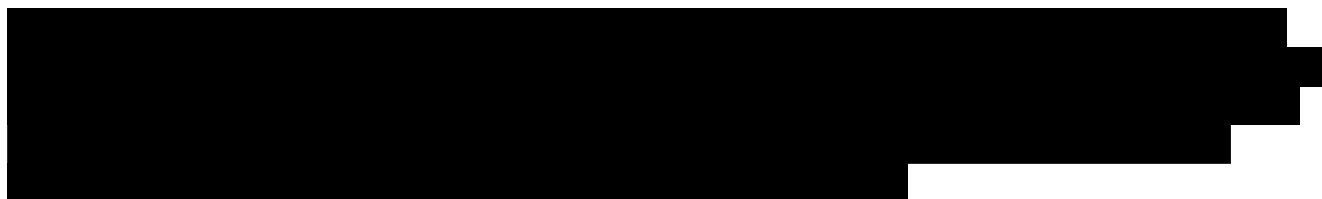
The Market-Adjusted Index Rate is further modified to develop the projected total allowed claims PMPM by adding the projected allowed non-EHB claims PMPM. Benefits that were offered outside EHB include routine foot care, acupuncture, dental anesthesia, diabetes care management, and inherited metabolic disorder. The projected allowed claims for these benefits is \$1.47 PMPM.

2B. Retention Items

Retention items related to this filing are shown in Table 6 of the PA Actuarial Memorandum Exhibits. Detailed discussions on each item are provided below.

Administrative Expenses:

Administrative costs of 11.2% of premium have been displayed in Table 6 and the URRT. This value has been derived from projected administrative costs for the projection period. These expenses are assumed to be uniform for all plan designs.



Taxes and Fees:

Taxes and Fees are expected to be 0.4% of premium in 2024. This accounts for the projected Federal Income Tax in 2024. Please note that the Risk Adjustment Administration Fee of \$0.21 PMPM and the projected PCORI Fee of \$0.25 PMPM were included in the Taxes and Fees field in Table 6 and the URRT.

Profit/Contingency:

The projected surplus and risk margin for this company is 1.5% for 2024. This value is listed in both Table 6 and the URRT. The same level of margin is expected for each plan included in this filing.

Projected Loss Ratio

The projected period loss ratio, using the federally-prescribed MLR methodology without the credibility adjustment, is 84.8%, as shown in Exhibit 1 of the Supporting Exhibits.

An exhibit displaying historical MLR information is provided in Exhibit 2 of the Supporting Exhibits. Loss ratios in the 'Actual' column have been calculated from data submitted in the most recent three-year MLR filing using the federally-prescribed MLR methodology without the credibility adjustment. Enrollment data in the 'Actual' column ties directly to the historical data included in Table 4 of the PA Actuarial Memorandum Exhibits. Loss ratios and enrollment data in the 'Pricing' columns are projected values taken from each calendar year's approved ACA rate filing.

2C. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization factors for 2023 and 2024 are provided in Table 7 of the PA Actuarial Memorandum Exhibits. 2023 factors have been taken from the prior annual rate filing of the captioned company and market. Detailed discussion on each of the 2024 factors are provided below as well as in Section 5 of this memorandum.

Average Age Factor:

The average age factor was calculated using our projected ACA-related Individual population with the prescribed HHS Age Factors for 2024. It was assumed this represents the age distribution of the entire single risk-pool. The number of members under each age bracket was multiplied by the corresponding HHS Age Factor. These were then summed and divided by the total number of members to obtain the average age factor. For UPMC's entire block of ACA-compliant Individual business, the average age factor is 1.888 and average age was 45.1 during the experience period. This preliminary age factor is then multiplied by an adjustment factor of 0.997, which accounts for the regulation that prohibits charging for more than three children per family, resulting in a final age calibration factor of 1.882. Please see Exhibit 3 in the Supporting Exhibits for the calculation of this factor.

Average Geographic Factor:

The calibration factor of 0.980 was calculated as the weighted average of the geographical factors using projected enrollment for the single risk pool, as shown in Exhibit 4 of the Supporting Exhibits. Please see the Geographic Factors section below for a discussion on the development of factors applied for each rating area.

Average Tobacco Factor:

The average tobacco factor was calculated using projected membership, which is assumed to have the same split for tobacco status as current membership. The member-weighted average of a 2.5% load applied for enrollees who qualify as tobacco users combined with a 0% load for non-tobacco users yields an average tobacco factor of 1.002. The derivation of this factor is shown below.

Tobacco Status	Feb 2023 Enrollment Split	Tobacco Factor	Calibration Factor
Non-User	92.5%	1.000	0.925
User	7.5%	1.025	0.077
Total	100.0%		1.002

Average Benefit Richness:

Benefit richness factors were calculated so that the average value is 1.0 when weighted with projected membership as demonstrated in Table 10 of the PA Actuarial Memorandum Exhibits.

Average Network Factor:

Network factors were calculated so that the average value is 1.0 when weighted with projected membership as demonstrated in Table 10 of the PA Actuarial Memorandum Exhibits. Please see the Network Factors section below for a discussion on the factors applied for each network.

2D. Components of Rate Change

Data to support the calculation of the components of the rate change is presented in Tables 8 and 9 of the PA Actuarial Memorandum Exhibits. Values presented in the 2023 columns have been taken from this company's 2023 annual rate filing.

Section 3 - Plan Rate Development

Table 10 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance to develop 2024 Plan Adjusted Index Rates. The allowable modifiers that are used in rate development are described below.

Plan Actuarial Value:

The AV for each plan was determined by the issuer's own pricing model based on experience from UPMC's fully-insured commercial block of business. This model calculates an AV for a given plan by first trending 2022 allowed claims data forward two years to the projection period, calculating paid amounts for each benefit category based on the benefit design of a given plan and projected allowed claims data, and taking the ratio of the total projected paid claims to projected allowed claims. Since the same tool was used for all plans, this eliminates any impact from morbidity at the plan level, and differing rate increases by product type are purely based on differences in benefit design for all plans within a given product.

Benefit Richness (induced demand)

Benefit richness factors were calculated using the formula $(\text{Plan AV})^2 - (\text{Plan AV}) + 1.24$, where (Plan AV) is equal to the product of the Plan AV described above and, when applicable, the Non-Funding of CSR Adjustment described below on a plan-by-plan basis. This formula was prescribed by the Pennsylvania Insurance Department and has been developed to produce induced demand factors that mimic those determined by HHS. The initial factors calculated using this formula were then normalized against projected membership by plan.

Benefits in addition to EHBs

Benefits that will be offered outside EHB include routine foot care, acupuncture, dental anesthesia, diabetes care management, and inherited metabolic disorder. The projected allowed claims for these benefits is \$1.47 PMPM. The adjustment factor of 1.002 included in Table 10 has been derived by adding the aforementioned PMPM to the projected index rate for 2024 and dividing this total by the same index rate, causing the adjustment to be applied uniformly to all plans.

Provider Network

Please see the Network Factors section below for a discussion on the development of the provider network factors applied in Table 10.

Catastrophic Eligibility

No adjustments were made for catastrophic plans. Current enrollment is minimal and not credible.

Non-Funding of CSR Adjustment

To account for the elimination of funding for cost-share reduction subsidies, the Pennsylvania Insurance Department has mandated the rates for all silver plans offered both on and off the exchange be increased via the CSR Defunding Adjustment in Table 10 of the Actuarial Memorandum Rate Exhibits. The captioned company will apply a factor of 1.22 as the CSR Defunding Adjustment for 2024. Several off-exchange only silver plans continue to be included for 2024 to minimize disruption to non-subsidized members enrolled in silver plans.

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

Table 11 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance. 2024 rates calculated in this tables were tested to ensure that they match those included in the PA Plan Design Summary and Rate Tables, Federal Rates Template, and the binder.

Section 5 - Plan Factors

5A. Age and Tobacco Factors

As indicated in Table 12 of the PA Actuarial Memorandum Exhibits, the default federal standard age curve for 2024 is used in the development of the Consumer Adjusted Premium Rates. A tobacco load of 2.5% will be used

for all 21-and-over age bands in the Individual market in 2024. This load has not changed from 2023.

5B. Geographic Factors

The geographic rating areas used within this filing are the same as those defined by the state. For 2024, the proposed geographic factors are identical to the 2023 filing for this company with the exception of Rating Area 5. The table below displays the current and proposed factors:

Region	2023	2024
1	0.966	0.966
5	0.966	0.993

The proposed factor for Rating Area 5 acknowledges the elevated costs observed in that region relative to Rating Area 1 (which factor Rating Area 5 had previously aligned with) after accounting for age, benefit level, and morbidity. Please see Exhibit 14 of the Supporting Exhibits for an illustration of this change.

5C. Network Factors

Since only one network is included in this filing, no network adjustments were deemed necessary for 2023.

5D. Rate Change Summary

Table 15 of the PA Actuarial Memorandum Exhibits has been populated as described in state guidance.

5E. Service Area Composition

Table 13 of the PA Actuarial Memorandum Exhibits shows the areas in which plans will be offered in 2024. Service area maps for 2023 and 2024 have been uploaded in the Supporting Documentation section in SERFF.

5F. Composite Rating

No composite rating is used with these plans.

5G. Connectivity Factors

Connectivity features are not available under these plans.

Section 6 - Reference Information and Certification

URRT Warning Alerts

Several warning messages appear after clicking the validate button in the URRT. These messages highlight the fact that several terminated plans have entries of zero in the current enrollment and premium PMPM fields on worksheet 2 of the URRT. These particular Catastrophic plans are offered in 2023 but have no current enrollment. Similar error messages appeared in the prior year's version of the URRT for the captioned company.

SERFF Rate / Rule Schedule Tables

In accordance with PID guidance, the SERFF Rate/Rule Schedule Tab of this rate filing contains the proposed premium rates for all proposed plans, and Excel versions of the Federal Rates Template and the PA Plan Design Summary and Rate Tables.

The Company Rate Information and Rate Review Detail is complete and accurate. Current premiums are consistent with our enrollment as of February 15, 2023. The rate change data presented is consistent with Table 11 and the number of policyholders affected is populated using the total covered lives shown in Table 10 cell V15. The total requested rate change entered is consistent with Cell AN13 of Table 11.

Standard Questions

Per PID ACA Rate Filing Final Guidance issued on March 21, 2023, the Standard Questions to be included with the initial filing are enclosed with this rate filing in a separate document under the Supporting Documentation tab in SERFF.

List of Supporting Exhibits

Supporting exhibits have been included with the rate filing to assist with the review process. Below is a list summarizing the contents of each exhibit.

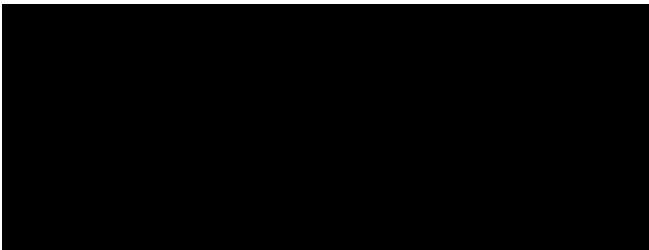
- Exhibit 1: Derivation of Projection Period MLR
- Exhibit 2: Actual vs Pricing MLR & Member Months
- Exhibit 3: Derivation of Age Calibration Factor
- Exhibit 4: Derivation of Geographical Calibration Factor
- Exhibit 5: Derivation of Annual Trend
- Exhibit 6: Current/Projected Commissions by OEP and SEP
- Exhibit 7: Derivation of 3-child Cap Adjustment Factor
- Exhibit 8: Derivation of Change in Network Factor
- Exhibit 9: Derivation of Change in Other Factor
- Exhibit 10: Derivation of Projected Risk Adjustment PMPM
- Exhibit 11: Projected Administrative Expense Load Development

- Exhibit 12: Derivation of Projected Taxes and Fees
- Exhibit 13: Derivation of PHE Morbidity Adjustment
- Exhibit 14: Derivation of Change in Geographic Rating Factors
- Exhibit 15: Exchange User Fee Development
- Exhibit 16: Support for Change in Network Rating Factors

Actuarial Certification

I, [REDACTED], am a Member of the American Academy of Actuaries in good standing. I am currently Manager for ACA products in the Actuarial Services department for UPMC Health Plan. I certify that:

- All factor, benefit and other changes from the prior approved filing have been disclosed in this actuarial memorandum.
- 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 2024 Rate Filing Justification.
- The projected Index Rate is:
 - a. In compliance with all applicable state and Federal statutes and regulations (45 CFR § 156.80 and § 147.102)
 - b. Developed in compliance with the applicable Actuarial Standards of Practice
 - c. Reasonable in relation to the benefits provided and the population anticipated to be covered
 - d. Neither excessive nor deficient
- The Index Rate and only the allowable modifiers as described in 45 CFR § 156.80(d)(1) and § 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 URRT for all plans except those specified in the certification.



7/14/2023
Date

PA Rate Template Part I
Data Relevant to the Rate Filing

Table 0. Identifying Information

Carrier Name:	UPMC HEALTH COVERAGE INC.		
Product(s):	HMCO		
Market Segment:	Individual		
Rate Effective Date:	1/1/2024	to	12/31/2024
Base Period Start Date:	1/1/2022	to	12/31/2022
Date of Most Recent Membership:	2/1/2023		

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of 02-01-2023)	Projected Rating Period
Average Age	48.4	47.6	47.6
Total	27,450	2,202	27,660
<18	3,337	346	1,836
18-24	1,250	93	1,164
25-29	1,187	89	1,224
30-34	1,456	124	1,560
35-39	1,735	143	1,800
40-44	2,078	149	1,872
45-49	2,212	167	2,100
50-54	1,120	237	2,016
55-59	5,104	375	4,716
60-63	2,203	488	6,132
64+	1,236	386	2,340

Table 2. Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member + HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
\$ 19,766,951.46	\$ 21,054,007.48	\$ 21,994,473.88	27,450	\$ 3,588,587.56	\$ 25,583,063.46	\$ 13,175.36	\$ (1,475,063.86)	\$	\$	\$ 496,079.33	\$ 1,310,742.66
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$ 877.83
Loss Ratio:											94.78%

*Express Prescription Drug Rebates as a negative number

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	4.91%	-6.24%	0.00%	1.63%	18.20%
Outpatient Hospital	1.12%	0.47%	0.00%	1.59%	25.30%
Professional	0.84%	1.83%	0.00%	2.53%	17.23%
Other Medical	8.35%	-0.22%	0.00%	8.12%	14.71%
Capitation				0.00%	0.00%
Prescription Drugs	11.20%	0.10%	0.00%	11.38%	24.52%
Total Annual Trend				4.84%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.09%	

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

** Should equal UBR7 Trend

Table 4. Historical Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-19		26.13	1.0000	\$ 26.13	1	\$ 8.21		\$ 26.13	\$ 8.21	
Feb-19		26.13	1.0000	\$ 26.13	1	\$ 8.21		\$ 26.13	\$ 8.21	
Mar-19		26.13	1.0000	\$ 26.13	1	\$ 8.21		\$ 26.13	\$ 8.21	
Apr-19		501.21	1.0000	\$ 501.21	1	\$ 167.07		\$ 1,276.87	\$ 452.62	
May-19		2,329.59	1.0000	\$ 2,329.59	1	\$ 776.53		\$ 3,379.72	\$ 1,126.57	
Jun-19		151.61	1.0000	\$ 151.61	1	\$ 50.54		\$ 353.10	\$ 117.70	
Jul-19		26.13	1.0000	\$ 26.13	1	\$ 8.21		\$ 26.13	\$ 8.21	
Aug-19		26.13	1.0000	\$ 26.13	1	\$ 8.21		\$ 26.13	\$ 8.21	
Sep-19		26.13	1.0000	\$ 26.13	1	\$ 8.21		\$ 26.13	\$ 8.21	
Oct-19		26.13	1.0000	\$ 26.13	1	\$ 8.21		\$ 26.13	\$ 8.21	
Nov-19		26.13	1.0000	\$ 26.13	1	\$ 8.21		\$ 26.13	\$ 8.21	
Dec-19	\$ 10,745.52	26.13	1.0000	\$ 26.13	1	\$ 8.21	\$ 2,797.03	\$ 26.13	\$ 8.21	
Jan-20		-	1.0000	\$ -	1	\$ -		\$ -	\$ -	
Feb-20		-	1.0000	\$ -	1	\$ -		\$ -	\$ -	
Mar-20		-	1.0000	\$ -	1	\$ -		\$ -	\$ -	
Apr-20		-	1.0000	\$ -	1	\$ -		\$ -	\$ -	
May-20		-	1.0000	\$ -	1	\$ -		\$ -	\$ -	
Jun-20		-	1.0000	\$ -	1	\$ -		\$ -	\$ -	
Jul-20		-	1.0000	\$ -	1	\$ -		\$ -	\$ -	
Aug-20		-	1.0000	\$ -	1	\$ -		\$ -	\$ -	
Sep-20		160.60	1.0000	\$ 160.60	1	\$ 53.53		\$ 160.60	\$ 53.53	
Oct-20		-	1.0000	\$ -	1	\$ -		\$ 153.10	\$ 51.03	
Nov-20		-	1.0000	\$ -	1	\$ -		\$ 155.09	\$ 51.70	
Dec-20	\$ 10,914.84	-	1.0000	\$ -	1	\$ -	\$ 436.60	\$ 128.60	\$ 42.83	
Jan-21		1,559,193.17	1.0000	\$ 1,559,193.17	2,913	\$ 531.60		\$ (133,325.79)	\$ 1,812,284.73	\$ 617.89
Feb-21		1,741,129.98	1.0000	\$ 1,741,129.98	2,928	\$ 594.65		\$ (140,173.31)	\$ 1,971,224.08	\$ 673.23
Mar-21		2,162,809.84	1.0000	\$ 2,162,809.84	2,881	\$ 750.93		\$ (132,547.28)	\$ 2,475,848.74	\$ 858.61
Apr-21		2,145,924.90	1.0000	\$ 2,145,924.90	2,869	\$ 747.97		\$ (145,501.80)	\$ 2,370,201.39	\$ 826.14
May-21		2,130,859.77	1.0000	\$ 2,130,859.77	2,859	\$ 745.32		\$ (124,734.36)	\$ 2,784,835.02	\$ 802.87
Jun-21		2,027,848.54	1.0000	\$ 2,027,848.54	2,849	\$ 711.78		\$ (142,227.63)	\$ 2,185,161.58	\$ 766.99
Jul-21		1,634,104.07	1.0000	\$ 1,634,104.07	2,875	\$ 568.38		\$ (143,677.63)	\$ 1,775,722.60	\$ 617.64
Aug-21		2,205,194.23	1.0000	\$ 2,205,194.23	2,509	\$ 758.06		\$ (185,251.63)	\$ 2,041,600.83	\$ 804.95
Sep-21		2,034,184.47	1.0000	\$ 2,034,184.47	2,917	\$ 697.25		\$ (144,058.84)	\$ 2,152,142.73	\$ 737.79
Oct-21		2,178,855.96	1.0000	\$ 2,178,855.96	2,922	\$ 745.67		\$ (122,609.64)	\$ 2,329,003.32	\$ 797.06
Nov-21		2,319,755.55	1.0000	\$ 2,319,755.55	2,913	\$ 796.35		\$ (140,390.29)	\$ 2,428,642.25	\$ 833.73
Dec-21	\$ 24,397,026.75	3,209,426.69	1.0000	\$ 3,209,426.69	2,870	\$ 1,117.92	\$ 1,698,808.06	\$ (146,659.04)	\$ 3,275,091.82	\$ 1,141.15
Jan-22		1,575,317.25	0.9988	\$ 1,575,302.39	2,486	\$ 633.79		\$ (115,402.53)	\$ 1,658,762.11	\$ 671.23
Feb-22		1,613,863.78	0.9995	\$ 1,614,659.28	2,437	\$ 662.56		\$ (69,513.22)	\$ 1,878,271.10	\$ 770.73
Mar-22		2,056,095.42	0.9980	\$ 2,060,275.28	2,136	\$ 863.40		\$ (143,139.34)	\$ 2,273,836.13	\$ 952.99
Apr-22		2,489,841.81	0.9964	\$ 2,498,957.27	2,136	\$ 1,069.76		\$ (112,752.04)	\$ 2,681,391.94	\$ 1,147.86
May-22		1,616,735.21	0.9954	\$ 1,624,137.55	2,311	\$ 702.79		\$ (122,713.75)	\$ 1,778,203.91	\$ 769.43
Jun-22		1,739,810.02	0.9921	\$ 1,753,579.83	2,289	\$ 766.69		\$ (133,593.96)	\$ 1,922,047.28	\$ 839.69
Jul-22		1,545,654.46	0.9901	\$ 1,561,048.36	2,262	\$ 690.17		\$ (115,289.36)	\$ 1,717,233.95	\$ 759.17
Aug-22		1,761,464.98	0.9872	\$ 1,784,951.14	2,249	\$ 793.97		\$ (145,164.31)	\$ 1,906,038.40	\$ 847.60
Sep-22		1,718,302.92	0.9837	\$ 1,746,694.15	2,114	\$ 788.53		\$ (128,266.01)	\$ 1,852,508.03	\$ 836.72
Oct-22		1,801,551.66	0.9779	\$ 1,842,888.80	2,190	\$ 841.18		\$ (125,698.43)	\$ 1,964,675.48	\$ 897.13
Nov-22		2,284,671.34	0.9683	\$ 2,337,027.66	2,156	\$ 1,086.21		\$ (121,570.10)	\$ 2,448,911.83	\$ 1,138.36
Dec-22	\$ 19,766,051.46	1,491,382.63	0.9348	\$ 1,956,228.77	2,134	\$ 917.58	\$ 3,588,587.56	\$ (106,000.76)	\$ 1,722,118.95	\$ 806.99

* Express Completion Factor as a percentage

** Express Prescription Drug Rebates as a negative number

Carrier Name: UPMC HEALTH COVERAGE INC.
 Product(s): HMO
 Market Segment: Individual
 Rate Effective Date: 1/1/2024

Table 2b. Manual Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member & HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
\$ 662,693,697.12	\$ 613,215,412.31	\$ 622,169,690.93	1,245,888	\$ 139,730,568.22	\$ 761,900,258.75	\$ 1,269,287.10	\$ (61,533,828.41)	\$ -	\$ -	\$ (29,731,127.09)	\$ 32,301,230.60
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$ 561.12
Loss Ratio											83.47%

* Express Prescription Drug Rebates as a negative number

Table 3b. Manual Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	4.91%	-6.24%	0.00%	-1.63%	18.20%
Outpatient Hospital	1.12%	0.47%	0.00%	1.59%	25.30%
Professional	0.64%	1.88%	0.00%	2.53%	17.35%
Other Medical	8.35%	-0.22%	0.00%	8.12%	14.71%
Capitation				0.00%	0.00%
Prescription Drugs	11.20%	0.16%	0.00%	11.38%	24.53%
Total Annual Trend				4.64%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.095	

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

Table 4b. Historical Manual Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-19	\$ 54,288,939.01	\$ 54,288,939.01	1.0000	\$ 54,288,939.01	139,133	\$ 390.19	\$ -	\$ (4,020,061.29)	\$ 68,129,674.19	\$ 489.67
Feb-19	\$ 51,943,687.18	\$ 51,943,687.18	1.0000	\$ 51,943,687.18	137,535	\$ 377.68	\$ -	\$ (3,806,003.22)	\$ 62,489,313.23	\$ 454.35
Mar-19	\$ 56,144,800.54	\$ 56,144,800.54	1.0000	\$ 56,144,800.54	135,516	\$ 414.30	\$ -	\$ (4,565,467.59)	\$ 65,815,439.77	\$ 485.67
Apr-19	\$ 59,987,204.93	\$ 59,987,204.93	1.0000	\$ 59,987,204.93	134,153	\$ 447.16	\$ -	\$ (4,683,850.83)	\$ 68,798,297.83	\$ 512.83
May-19	\$ 58,559,029.99	\$ 58,559,029.99	1.0000	\$ 58,559,029.99	132,383	\$ 442.35	\$ -	\$ (4,778,812.03)	\$ 66,513,104.55	\$ 502.43
Jun-19	\$ 54,270,338.50	\$ 54,270,338.50	1.0000	\$ 54,270,338.50	130,873	\$ 414.68	\$ -	\$ (4,565,928.93)	\$ 60,776,507.63	\$ 464.39
Jul-19	\$ 59,636,678.18	\$ 59,636,678.18	1.0000	\$ 59,636,678.18	128,158	\$ 461.73	\$ -	\$ (4,937,387.43)	\$ 65,842,551.51	\$ 509.78
Aug-19	\$ 58,347,544.67	\$ 58,347,544.67	1.0000	\$ 58,347,544.67	127,735	\$ 456.79	\$ -	\$ (4,883,475.07)	\$ 64,155,086.49	\$ 502.28
Sep-19	\$ 56,749,552.87	\$ 56,749,552.87	1.0000	\$ 56,749,552.87	126,195	\$ 449.70	\$ -	\$ (4,678,840.35)	\$ 62,116,212.48	\$ 492.22
Oct-19	\$ 63,348,039.84	\$ 63,348,039.84	1.0000	\$ 63,348,039.84	124,834	\$ 507.46	\$ -	\$ (5,016,718.35)	\$ 68,822,844.73	\$ 551.31
Nov-19	\$ 56,445,797.56	\$ 56,445,797.56	1.0000	\$ 56,445,797.56	123,296	\$ 457.81	\$ -	\$ (4,585,163.32)	\$ 61,293,800.03	\$ 497.13
Dec-19	\$ 49,718,968.18	\$ 49,718,968.18	1.0000	\$ 49,718,968.18	121,156	\$ 492.07	\$ -	\$ (5,192,693.05)	\$ 63,742,042.99	\$ 526.12
Jan-20	\$ 51,275,850.42	\$ 51,275,850.42	1.0000	\$ 51,275,850.42	126,196	\$ 406.32	\$ 144,813,665.08	\$ (4,469,467.53)	\$ 64,300,925.29	\$ 509.53
Feb-20	\$ 51,163,214.19	\$ 51,163,214.19	1.0000	\$ 51,163,214.19	124,445	\$ 411.13	\$ -	\$ (4,257,503.64)	\$ 60,994,671.20	\$ 490.13
Mar-20	\$ 51,005,452.24	\$ 51,005,452.24	1.0000	\$ 51,005,452.24	122,901	\$ 415.01	\$ -	\$ (5,108,393.25)	\$ 57,678,029.87	\$ 469.30
Apr-20	\$ 42,001,831.38	\$ 42,001,831.38	1.0000	\$ 42,001,831.38	122,296	\$ 343.44	\$ -	\$ (4,777,017.66)	\$ 45,731,433.31	\$ 357.59
May-20	\$ 45,650,678.48	\$ 45,650,678.48	1.0000	\$ 45,650,678.48	121,291	\$ 376.37	\$ -	\$ (4,568,923.56)	\$ 49,857,760.65	\$ 411.08
Jun-20	\$ 56,077,098.09	\$ 56,077,098.09	1.0000	\$ 56,077,098.09	120,437	\$ 465.61	\$ -	\$ (4,931,957.09)	\$ 61,661,123.43	\$ 511.98
Jul-20	\$ 57,958,870.28	\$ 57,958,870.28	1.0000	\$ 57,958,870.28	119,817	\$ 483.73	\$ -	\$ (4,898,687.00)	\$ 63,080,815.46	\$ 526.48
Aug-20	\$ 57,870,588.09	\$ 57,870,588.09	1.0000	\$ 57,870,588.09	119,004	\$ 486.29	\$ -	\$ (4,937,549.29)	\$ 62,457,150.97	\$ 524.83
Sep-20	\$ 57,205,413.01	\$ 57,205,413.01	1.0000	\$ 57,205,413.01	118,124	\$ 484.28	\$ -	\$ (4,951,567.28)	\$ 61,709,328.19	\$ 522.41
Oct-20	\$ 58,348,775.32	\$ 58,348,775.32	1.0000	\$ 58,348,775.32	117,060	\$ 498.45	\$ -	\$ (4,977,328.59)	\$ 62,662,336.05	\$ 535.30
Nov-20	\$ 56,110,975.62	\$ 56,110,975.62	1.0000	\$ 56,110,975.62	115,695	\$ 484.99	\$ -	\$ (4,706,912.66)	\$ 59,488,372.04	\$ 514.18
Dec-20	\$ 60,198,128.95	\$ 60,198,128.95	1.0000	\$ 60,198,128.95	113,750	\$ 529.21	\$ 121,315,966.72	\$ (5,222,649.23)	\$ 62,752,909.55	\$ 551.67
Jan-21	\$ 47,267,407.14	\$ 47,267,407.14	1.0000	\$ 47,267,407.14	111,636	\$ 423.41	\$ -	\$ (4,161,418.56)	\$ 56,461,706.15	\$ 505.77
Feb-21	\$ 49,312,656.49	\$ 49,312,656.49	1.0000	\$ 49,312,656.49	112,298	\$ 439.57	\$ -	\$ (4,296,788.13)	\$ 57,005,644.16	\$ 507.63
Mar-21	\$ 57,886,131.37	\$ 57,886,131.37	1.0000	\$ 57,886,131.37	111,437	\$ 519.45	\$ -	\$ (5,113,576.21)	\$ 65,983,768.57	\$ 592.12
Apr-21	\$ 56,205,156.04	\$ 56,205,156.04	1.0000	\$ 56,205,156.04	111,285	\$ 505.06	\$ -	\$ (5,029,185.93)	\$ 62,889,183.74	\$ 562.42
May-21	\$ 55,971,915.37	\$ 55,971,915.37	1.0000	\$ 55,971,915.37	111,463	\$ 502.16	\$ -	\$ (4,784,242.05)	\$ 62,022,751.38	\$ 556.44
Jun-21	\$ 57,886,890.04	\$ 57,886,890.04	1.0000	\$ 57,886,890.04	111,681	\$ 518.32	\$ -	\$ (5,243,204.65)	\$ 63,494,600.46	\$ 568.54
Jul-21	\$ 55,425,000.85	\$ 55,425,000.85	1.0000	\$ 55,425,000.85	112,086	\$ 484.48	\$ -	\$ (5,067,386.93)	\$ 60,993,279.29	\$ 540.60
Aug-21	\$ 59,036,317.50	\$ 59,036,317.50	1.0000	\$ 59,036,317.50	112,716	\$ 523.76	\$ -	\$ (5,257,405.04)	\$ 63,758,834.82	\$ 565.66
Sep-21	\$ 61,981,586.80	\$ 61,981,586.80	1.0000	\$ 61,981,586.80	113,006	\$ 548.48	\$ -	\$ (5,175,308.74)	\$ 66,603,219.02	\$ 589.38
Oct-21	\$ 59,701,612.03	\$ 59,701,612.03	1.0000	\$ 59,701,612.03	112,680	\$ 529.83	\$ -	\$ (5,154,071.54)	\$ 64,169,508.86	\$ 569.48
Nov-21	\$ 61,645,544.14	\$ 61,645,544.14	1.0000	\$ 61,645,544.14	111,743	\$ 551.68	\$ -	\$ (5,563,092.22)	\$ 64,855,044.14	\$ 580.40
Dec-21	\$ 64,039,632.47	\$ 64,039,632.47	1.0000	\$ 64,039,632.47	110,464	\$ 579.73	\$ 128,382,226.30	\$ (5,704,697.75)	\$ 66,686,108.15	\$ 603.69
Jan-22	\$ 49,458,571.35	\$ 49,458,571.35	0.9998	\$ 49,458,571.35	107,785	\$ 458.93	\$ -	\$ (4,841,156.59)	\$ 60,074,233.67	\$ 557.35
Feb-22	\$ 49,256,814.79	\$ 49,256,814.79	0.9996	\$ 49,256,814.79	108,657	\$ 453.52	\$ -	\$ (4,830,377.17)	\$ 57,767,646.45	\$ 531.05
Mar-22	\$ 56,453,043.10	\$ 56,453,043.10	0.9992	\$ 56,453,043.10	107,497	\$ 526.10	\$ -	\$ (5,311,662.62)	\$ 64,705,194.53	\$ 601.93
Apr-22	\$ 60,752,755.90	\$ 60,752,755.90	0.9972	\$ 60,752,755.90	106,355	\$ 578.98	\$ -	\$ (5,135,878.98)	\$ 67,447,083.99	\$ 640.15
May-22	\$ 51,439,923.81	\$ 51,439,923.81	0.9960	\$ 51,439,923.81	105,202	\$ 490.95	\$ -	\$ (5,209,980.41)	\$ 57,322,260.78	\$ 544.88
Jun-22	\$ 52,808,230.76	\$ 52,808,230.76	0.9912	\$ 52,808,230.76	104,269	\$ 509.94	\$ -	\$ (5,572,414.47)	\$ 58,362,427.33	\$ 559.73
Jul-22	\$ 47,521,992.85	\$ 47,521,992.85	0.9912	\$ 47,521,992.85	103,413	\$ 463.63	\$ -	\$ (4,655,379.60)	\$ 54,210,892.11	\$ 524.22
Aug-22	\$ 53,217,085.25	\$ 53,217,085.25	0.9983	\$ 53,217,085.25	102,625	\$ 524.91	\$ -	\$ (5,334,021.80)	\$ 60,561,505.39	\$ 590.13
Sep-22	\$ 50,296,354.67	\$ 50,296,354.67	0.9854	\$ 50,296,354.67	101,562	\$ 502.55	\$ -	\$ (4,922,956.12)	\$ 56,838,113.03	\$ 559.64
Oct-22	\$ 49,863,385.32	\$ 49,863,385.32	0.9812	\$ 49,863,385.32	100,638	\$ 504.98	\$ -	\$ (5,164,168.66)	\$ 56,004,476.73	\$ 556.49
Nov-22	\$ 51,556,611.94	\$ 51,556,611.94	0.9675	\$ 51,556,611.94	99,499	\$ 535.56	\$ -	\$ (5,144,785.38)	\$ 58,287,398.77	\$ 585.81
Dec-22	\$ 51,067,842.61	\$ 51,067,842.61	0.9432	\$ 51,067,842.61	98,386	\$ 550.29	\$ 139,730,568.22	\$ (5,211,045.54)	\$ 58,784,219.64	\$ 597.48

* Express Completion Factor as a percentage

** Express Prescription Drug Rebates as a negative number

PA Rate Template Part II
Rate Development and Change

Carrier Name: UPMC HEALTH COVERAGE INC.
 Product(s): HMO
 Market Segment: Individual
 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 Capitation PMPM (net of prescription drug rebates) PMPM	\$ 877.63	\$ 561.12	< Actual Experience PMPM should be consistent with the index Rate for Experience Period on URRT
Two year trend projection factor	1.05%	1.05%	
Unadjusted Projected Allowed EHB Claims PMPM	\$ 960.99	\$ 614.43	
Single Risk Pool Adjustment Factors			
Change in Morbidity - Impact of Reinsurance Program	1.000	1.000	
Change in Morbidity - All Other	1.015	1.015	< See URRT Instructions
Total Non-Morbidity Changes	1.000	1.300	
Change in Demographics	1.000	1.000	< See URRT Instructions
Change in Network	1.000	1.340	
Change in Benefits	1.000	1.000	< See URRT Instructions
Change in Other	1.000	0.970	< See URRT Instructions
Total Adjusted Projected Allowed EHB Claims PMPM	\$ 975.41	\$ 810.63	
Credibility Factors	0%	100%	< See Instructions
Blended Projected EHB Claims PMPM		\$ 810.63	< Projected Index Rate
Development of the Market-Adjusted Index Rate and Total Allowed Claims			
Adjusted Projected Allowed EHB Claims PMPM	\$ 810.63		< Index Rate for Projection Period on URRT
Projected Paid to Allowed Ratio	0.777		
Projected Incurred EHB Claims PMPM	\$ 629.61		
Market-wide Adjustments			
Projected Incurred Risk Adjustment PMPM	\$ -521.80		
Projected Incurred Exchange User Fees PMPM	\$ 518.84		
Projected Incurred Reinsurance Recoveries PMPM	\$ 527.65		
Market-Adjusted Projected Incurred EHB Claims PMPM	\$ 640.50		
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 824.78		< Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM	\$ 1.47		
Market-Adjusted Projected Incurred Total Claims PMPM	\$ 641.75		
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 826.25		

Table 6. Retention

Retention Items - Express in percentages	Percentages	PMPM Amounts
Administrative Expenses	11.18%	\$82.64
General and Claims	8.28%	\$61.15
Agent/Broker Fees and Commissions	0.83%	\$6.16
Quality Improvement Initiatives	1.50%	\$11.23
Taxes and Fees	0.98%	\$7.79
Risk Adjustment User Fee	0.03%	\$0.21
PCORI Fee	0.03%	\$0.23
PA Premium & Other Taxes (if applicable)	0.00%	\$0.00
Federal Income Tax	0.27%	\$2.33
Health Insurance Providers Fee (Prorated for Small Groups only)	0.00%	\$0.00
Profit/Contingency (after tax)	1.50%	\$11.07
Total Retention	13.06%	\$96.40
Projected Required Revenue PMPM		\$ 738.15

Table 8. Components of Rate Change

Rate Components	2023	2024	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$ 578.06	\$ 401.09	\$ -176.97	-30.6%
B. Base period allowed claims before normalization	\$ 560.08	\$ 561.12	\$ 1.04	0.3%
C. Normalization factor component of change	\$ (253.14)	\$ (257.39)	\$ (4.25)	-1.3%
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 306.94	\$ 303.73	\$ (3.21)	-0.8%
D2. URRT Trend	\$ 38.90	\$ 28.85	\$ (10.05)	-2.7%
D3. URRT Morbidity	\$ -	\$ 4.99	\$ 4.99	1.3%
D4. URRT Other	\$ 88.80	\$ 101.22	\$ 12.42	3.3%
D5. Normalized URRT Risk Adjustment on an allowed basis	\$ 10.89	\$ 15.19	\$ 4.30	1.1%
D6. Normalized Exchange User Fee on an allowed basis	\$ 10.99	\$ 11.74	\$ 0.75	0.2%
D7. Normalized Reinsurance Recoveries on an allowed basis	\$ (18.90)	\$ (19.27)	\$ (0.46)	0.3%
D8. Subtotal - Sum(D1-D7)	\$ 436.61	\$ 446.45	\$ 9.84	2.6%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ -	\$ -	\$ -	0.0%
E2. Pricing AV	\$ (70.98)	\$ (99.68)	\$ (28.70)	-7.6%
E3. Benefit Richness	\$ (0.00)	\$ 0.01	\$ 0.01	0.0%
E4. Catastrophic Eligibility	\$ -	\$ -	\$ -	0.0%
E5. Subtotal - Sum(E1-E4)	\$ (70.98)	\$ (99.68)	\$ (28.69)	-7.6%
F. Change in Retention Components				
F1. Administrative Expenses	\$ 33.89	\$ 44.85	\$ 10.96	2.9%
F2. Taxes and Fees	\$ 0.26	\$ 1.51	\$ 1.27	0.3%
F3. Profit and/or Contingency	\$ -	\$ 6.02	\$ 6.02	1.6%
F4. Subtotal - Sum(F1-F3)	\$ 34.14	\$ 52.38	\$ 18.24	4.8%
G. Change in Miscellaneous Items	\$ -	\$ -	\$ -	0.0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 399.77	\$ 399.15	\$ (0.61)	-0.2%

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 561.12	< Index Rate of Experience Period on URRT
Blended Earned Premium	\$ 662,693,697.12	
Blended Loss Ratio	83.47%	

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	1	1	1	1	1
Adjusted Projected Allowed EHB Claims PMPM	\$ 810.63	\$ 810.63	\$ 810.63	\$ 810.63	\$ 810.63
Months of Trend	-	3	6	9	
Annual Trend	0.00%	0.00%	0.00%	0.00%	
Single Risk Pool Projected Allowed Claims	\$ 810.63	\$ 810.63	\$ 810.63	\$ 810.63	\$ 810.63
Quarterly Trend Factor	1.000	1.000	1.000	1.000	1.000

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2023	2024
Average Age Factor	1.886	1.883
Average Geographic Factor	0.966	0.980
Average Tobacco Factor	1.002	1.002
Average Benefit Richness (induced demand)	1.000	1.000
Average Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 798.50	\$ 826.25
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 437.59	\$ 447.24

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

	2023	2024	
Paid to Allowed	0.777	0.777	
URRT Trend (Total Applied Trend Factors)	1.127	1.095	< URRT W1, S2
URRT Morbidity	1.000	1.015	< URRT W1, S2
URRT "Other"	1.217	1.300	< URRT W1, S2
Risk Adjustment	\$ 15.64	\$ 21.80	< URRT W1, S3
Exchange User Fee	\$ 15.81	\$ 16.84	< URRT W1, S3
Reinsurance Recoveries	\$ 28.68	\$ 27.65	< URRT W1, S3
Capitation			< URRT W1, S2
Network	1.000	1.000	
Pricing AV	0.847	0.777	
Benefit Richness	1.000	1.000	
Catastrophic Eligibility	1.000	1.000	
Administrative Expenses	8.97%	11.18%	
Taxes and Fees	0.06%	0.38%	
Profit and/or Contingency	0.00%	1.50%	

< For 2023 in cell B1, please include a factor equal to the product of the average Pricing AV and the Non-Funding of CSR Adjustment

PA Rate Template Part IV A - Individual

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

Carrier Name: UPMC HEALTH COVERAGE INC.
 Product(s): HMO
 Market Segment: Individual
 Rate Effective Date: 1/1/2024

Plan Number	HIOS Plan ID (Standard Component)	1/1/2023 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2024	1/1/2024 Plan HIOS Plan ID (If 1/1/2023 Plan Discontinued & Mapped)	Metallic Tier	Exchange On/Off or Off
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Totals These cells auto-fill using the data entered in Table 10.

Plan 1	62560PA0010116	UPMC Advantage Gold \$1,000/\$20 - Standard Network	M		Gold	On/Off
Plan 2	62560PA0010117	UPMC Advantage Silver \$3,900/\$50 - Standard Network	M		Silver	On/Off
Plan 3	62560PA0010118	UPMC Advantage Silver \$3,500/\$50 - Standard Network	M		Silver	Off
Plan 4	62560PA0010120	UPMC Advantage Silver HSA \$4,000/\$0 - Standard Network	M		Silver	Off
Plan 5	62560PA0010122	UPMC Advantage Bronze \$6,700/\$0 - Standard Network	M		Bronze	On/Off
Plan 6	62560PA0010123	UPMC Advantage Catastrophic \$9,450/\$0 - Standard Network	M		Catastrophic	On/Off
Plan 7	62560PA0010124	UPMC Advantage Gold HSA \$2,500/10% - Standard Network	M		Gold	On/Off
Plan 8	62560PA0010125	UPMC Advantage Silver \$2,600/\$50 - Standard Network	M		Silver	On/Off
Plan 9	62560PA0010126	UPMC Advantage Silver \$6,800/\$25 - Standard Network	DM	62560PA0010117	Silver	On/Off
Plan 10	0	0	0	0	0	0
Plan 11	0	0	0	0	0	0
Plan 12	0	0	0	0	0	0
Plan 13	0	0	0	0	0	0
Plan 14	0	0	0	0	0	0
Plan 15	0	0	0	0	0	0
Plan 16	0	0	0	0	0	0
Plan 17	0	0	0	0	0	0
Plan 18	0	0	0	0	0	0
Plan 19	0	0	0	0	0	0
Plan 20	0	0	0	0	0	0
Plan 21	0	0	0	0	0	0
Plan 22	0	0	0	0	0	0
Plan 23	0	0	0	0	0	0
Plan 24	0	0	0	0	0	0
Plan 25	0	0	0	0	0	0

PA Rate Template Part VI - Rate Change Summary

Table 15. Rate Change Summary Information

Overview

Initial Requested Average Rate Change:	0.113409644
Revised Requested Average Rate Change:	7.61%
Minimum Requested Rate Change:	0.81%
Maximum Requested Rate Change:	12.35%
Mapped Members:	2,202
Available in Rating Areas:	Rating Areas 1 and 5

Key Information

Jan. 2022 - Dec. 2022 Financial Experience

Premium	\$	20,262,130.79
Claims	\$	19,204,667.36
Administrative Expenses	\$	1,742,716.38
Taxes & Fees	\$	12,901.50
Company Made After Taxes	\$	(698,154.45)

Carrier Name:	UPMC HEALTH COVERAGE INC.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2024

How It Plans to Spend Your Premium

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

Claims:	87%
Administrative Expenses:	11%
Taxes & Fees:	0%
Profit:	2%

Rating Area	Active Rating Areas	Count of Remaining Active Rating Areas	Text
1		1	2 1
2			1
3			1
4			1
5	5		1 and 5
6			0
7			0
8			0
9			0

The company expects its annual medical costs to increase: **4.64%**

Explanation of requested rate change: **Increases in medical and pharmacy costs and utilization.**

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

HIOS Plan ID (On Exchange)=>	0010122	62560PA0010123	62560PA0010123	62560PA0010124	62560PA0010124	62560PA0010125	62560PA0010125						
HIOS Plan ID (Off Exchange)=>	0010122	62560PA0010123	62560PA0010123	62560PA0010124	62560PA0010124	62560PA0010125	62560PA0010125						
Plan Marketing Name =>	Gold HSA \$2,500/\$50 - Stand	Gold HSA \$2,500/\$50 - Stand	Gold HSA \$2,500/\$50 - Stand	Gold HSA \$2,500/\$50 - Stand	Gold HSA \$2,500/\$50 - Stand	Gold HSA \$2,500/\$50 - Stand	Gold HSA \$2,500/\$50 - Stand						
Form # =>	660	660	660	676	676	660	660						
Rating Area =>	1	1	1	5	5	1	1						
Network =>	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental						
Metal =>	Gold	Catastrophic	Catastrophic	Gold	Gold	Silver	Silver						
Deductible =>	\$13,400	\$9,450 / \$18,900	\$9,450 / \$18,900	\$2,500 / \$5,000	\$2,500 / \$5,000	\$2,600 / \$5,200	\$2,600 / \$5,200						
Coinurance =>	%	100%	100%	90%	90%	60%	60%						
Copays =>	40%	\$0 / \$0	\$0 / \$0	10% / 10%	10% / 10%	\$50 / \$80	\$50 / \$80						
OOP Maximum =>	\$18,900	\$9,450 / \$18,900	\$9,450 / \$18,900	\$6,000 / \$12,000	\$6,000 / \$12,000	\$9,450 / \$18,900	\$9,450 / \$18,900						
Pediatric Dental (Yes/No) =>	Yes	Yes	Yes	Yes	Yes	Yes	Yes						
Age Band	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$223.56	\$204.70	\$204.70	\$210.33	\$210.33	\$266.53	\$266.53	\$273.86	\$273.86	\$358.78	\$358.78	\$368.65	\$368.65
15	\$243.44	\$222.89	\$222.89	\$229.03	\$229.03	\$290.22	\$290.22	\$298.21	\$298.21	\$390.67	\$390.67	\$401.42	\$401.42
16	\$251.03	\$229.85	\$229.85	\$236.17	\$236.17	\$299.28	\$299.28	\$307.51	\$307.51	\$402.86	\$402.86	\$413.95	\$413.95
17	\$258.63	\$236.81	\$236.81	\$243.32	\$243.32	\$308.33	\$308.33	\$316.82	\$316.82	\$415.06	\$415.06	\$426.48	\$426.48
18	\$266.82	\$244.30	\$244.30	\$251.02	\$251.02	\$318.09	\$318.09	\$326.84	\$326.84	\$428.19	\$428.19	\$439.97	\$439.97
19	\$275.00	\$251.79	\$251.79	\$258.72	\$258.72	\$327.84	\$327.84	\$336.87	\$336.87	\$441.32	\$441.32	\$453.47	\$453.47
20	\$283.47	\$259.55	\$259.55	\$266.69	\$266.69	\$337.95	\$337.95	\$347.25	\$347.25	\$454.92	\$454.92	\$467.44	\$467.44
21	\$299.55	\$267.58	\$267.58	\$274.94	\$274.94	\$348.40	\$348.40	\$357.99	\$357.99	\$468.99	\$468.99	\$481.90	\$481.90
22	\$299.55	\$267.58	\$267.58	\$274.94	\$274.94	\$348.40	\$348.40	\$357.99	\$357.99	\$468.99	\$468.99	\$481.90	\$481.90
23	\$299.55	\$267.58	\$267.58	\$274.94	\$274.94	\$348.40	\$348.40	\$357.99	\$357.99	\$468.99	\$468.99	\$481.90	\$481.90
24	\$299.55	\$267.58	\$267.58	\$274.94	\$274.94	\$348.40	\$348.40	\$357.99	\$357.99	\$468.99	\$468.99	\$481.90	\$481.90
25	\$300.74	\$268.65	\$268.65	\$275.37	\$275.37	\$349.79	\$349.79	\$359.42	\$359.42	\$470.87	\$470.87	\$483.83	\$483.83
26	\$306.74	\$274.00	\$274.00	\$281.54	\$281.54	\$356.76	\$356.76	\$366.58	\$366.58	\$480.25	\$480.25	\$493.47	\$493.47
27	\$313.92	\$280.42	\$280.42	\$287.43	\$287.43	\$365.12	\$365.12	\$375.17	\$375.17	\$491.50	\$491.50	\$505.80	\$505.80
28	\$325.61	\$290.86	\$290.86	\$298.86	\$298.86	\$378.71	\$378.71	\$389.14	\$389.14	\$509.79	\$509.79	\$523.83	\$523.83
29	\$335.19	\$299.42	\$299.42	\$306.91	\$306.91	\$389.86	\$389.86	\$400.59	\$400.59	\$524.80	\$524.80	\$539.25	\$539.25
30	\$339.98	\$303.70	\$303.70	\$311.30	\$311.30	\$395.43	\$395.43	\$406.32	\$406.32	\$532.30	\$532.30	\$546.63	\$546.63
31	\$347.17	\$310.13	\$310.13	\$318.66	\$318.66	\$403.80	\$403.80	\$414.91	\$414.91	\$543.56	\$543.56	\$558.52	\$558.52
32	\$354.36	\$316.55	\$316.55	\$324.46	\$324.46	\$412.16	\$412.16	\$423.50	\$423.50	\$554.82	\$554.82	\$570.09	\$570.09
33	\$358.86	\$320.56	\$320.56	\$329.38	\$329.38	\$417.38	\$417.38	\$428.87	\$428.87	\$561.85	\$561.85	\$577.32	\$577.32
34	\$363.65	\$324.84	\$324.84	\$333.78	\$333.78	\$422.96	\$422.96	\$434.60	\$434.60	\$569.35	\$569.35	\$585.03	\$585.03
35	\$366.05	\$326.98	\$326.98	\$335.16	\$335.16	\$425.74	\$425.74	\$437.46	\$437.46	\$573.11	\$573.11	\$588.88	\$588.88
36	\$368.44	\$329.12	\$329.12	\$337.35	\$337.35	\$428.53	\$428.53	\$440.33	\$440.33	\$576.86	\$576.86	\$592.74	\$592.74
37	\$370.84	\$331.26	\$331.26	\$339.55	\$339.55	\$431.32	\$431.32	\$443.19	\$443.19	\$580.61	\$580.61	\$611.51	\$611.51
38	\$373.23	\$333.40	\$333.40	\$341.74	\$341.74	\$434.11	\$434.11	\$446.06	\$446.06	\$584.36	\$584.36	\$600.45	\$600.45
39	\$378.03	\$337.69	\$337.69	\$346.13	\$346.13	\$439.68	\$439.68	\$451.78	\$451.78	\$591.87	\$591.87	\$606.16	\$606.16
40	\$382.82	\$341.97	\$341.97	\$350.52	\$350.52	\$445.26	\$445.26	\$457.51	\$457.51	\$599.37	\$599.37	\$614.35	\$614.35
41	\$390.01	\$348.39	\$348.39	\$357.10	\$357.10	\$453.62	\$453.62	\$466.10	\$466.10	\$610.62	\$610.62	\$625.89	\$625.89
42	\$396.90	\$354.54	\$354.54	\$363.41	\$363.41	\$461.63	\$461.63	\$474.34	\$474.34	\$621.41	\$621.41	\$636.95	\$636.95
43	\$406.48	\$363.11	\$363.11	\$372.18	\$372.18	\$472.78	\$472.78	\$485.79	\$485.79	\$636.42	\$636.42	\$653.33	\$653.33
44	\$418.47	\$373.81	\$373.81	\$383.15	\$383.15	\$486.71	\$486.71	\$498.88	\$498.88	\$651.61	\$651.61	\$671.56	\$671.56
45	\$432.54	\$386.39	\$386.39	\$396.05	\$396.05	\$503.09	\$503.09	\$516.94	\$516.94	\$677.22	\$677.22	\$694.15	\$694.15
46	\$449.32	\$401.37	\$401.37	\$411.40	\$411.40	\$522.60	\$522.60	\$536.99	\$536.99	\$703.49	\$703.49	\$722.85	\$722.85
47	\$468.19	\$418.23	\$418.23	\$428.68	\$428.68	\$544.55	\$544.55	\$559.54	\$559.54	\$733.03	\$733.03	\$753.21	\$753.21
48	\$489.76	\$437.49	\$437.49	\$448.43	\$448.43	\$569.63	\$569.63	\$585.31	\$585.31	\$766.80	\$766.80	\$787.91	\$787.91
49	\$511.03	\$456.49	\$456.49	\$467.90	\$467.90	\$594.37	\$594.37	\$610.73	\$610.73	\$800.10	\$800.10	\$822.12	\$822.12
50	\$534.99	\$477.90	\$477.90	\$489.85	\$489.85	\$622.24	\$622.24	\$639.37	\$639.37	\$837.62	\$837.62	\$860.67	\$860.67
51	\$558.65	\$499.04	\$499.04	\$511.51	\$511.51	\$649.77	\$649.77	\$667.65	\$667.65	\$874.67	\$874.67	\$898.74	\$898.74
52	\$584.71	\$522.32	\$522.32	\$535.37	\$535.37	\$680.08	\$680.08	\$698.80	\$698.80	\$915.47	\$915.47	\$938.19	\$938.19
53	\$611.07	\$545.86	\$545.86	\$559.51	\$559.51	\$710.74	\$710.74	\$730.30	\$730.30	\$956.74	\$956.74	\$983.08	\$983.08
54	\$639.53	\$571.28	\$571.28	\$585.57	\$585.57	\$743.83	\$743.83	\$764.31	\$764.31	\$1,001.29	\$1,001.29	\$1,028.86	\$1,028.86
55	\$667.99	\$596.70	\$596.70	\$611.62	\$611.62	\$776.93	\$776.93	\$798.32	\$798.32	\$1,045.85	\$1,045.85	\$1,074.64	\$1,074.64
56	\$698.84	\$624.26	\$624.26	\$639.87	\$639.87	\$812.82	\$812.82	\$835.19	\$835.19	\$1,094.15	\$1,094.15	\$1,121.27	\$1,121.27
57	\$729.99	\$652.09	\$652.09	\$668.39	\$668.39	\$849.05	\$849.05	\$872.42	\$872.42	\$1,142.93	\$1,142.93	\$1,171.50	\$1,171.50
58	\$763.24	\$681.79	\$681.79	\$700.55	\$700.55	\$887.72	\$887.72	\$912.16	\$912.16	\$1,194.99	\$1,194.99	\$1,224.86	\$1,224.86
59	\$779.72	\$696.51	\$696.51	\$713.92	\$713.92	\$906.89	\$906.89	\$931.85	\$931.85	\$1,220.78	\$1,220.78	\$1,251.30	\$1,251.30
60	\$812.97	\$726.21	\$726.21	\$746.19	\$746.19	\$945.56	\$945.56	\$971.58	\$971.58	\$1,272.84	\$1,272.84	\$1,304.66	\$1,304.66
61	\$841.72	\$751.90	\$751.90	\$772.58	\$772.58	\$979.00	\$979.00	\$1,003.48	\$1,003.48	\$1,317.86	\$1,317.86	\$1,350.81	\$1,350.81
62	\$860.60	\$768.76	\$768.76	\$789.90	\$789.90	\$1,000.95	\$1,000.95	\$1,025.98	\$1,025.98	\$1,347.41	\$1,347.41	\$1,381.09	\$1,381.09
63	\$884.26	\$789.90	\$789.90	\$809.64	\$809.64	\$1,028.48	\$1,028.48	\$1,054.19	\$1,054.19	\$1,384.46	\$1,384.46	\$1,419.07	\$1,419.07
64+	\$898.64	\$802.74	\$802.74	\$824.82	\$824.82	\$1,045.20	\$1,045.20	\$1,071.33	\$1,071.33	\$1,406.97	\$1,406.97	\$1,442.14	\$1,442.14

UPMC Health Coverage, Inc.
Individual
Plan Design Summary

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
62560PA0010116	UPMC Advantage Gold \$1,000/\$20 - Standard Network	HMO	Gold	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2024	1, 5	Clearfield, Crawford
62560PA0010117	UPMC Advantage Silver \$3,900/\$50 - Standard Network	HMO	Silver	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2024	1, 5	Clearfield, Crawford
62560PA0010118	UPMC Advantage Silver \$3,500/\$50 - Standard Network	HMO	Silver	Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2024	1, 5	Clearfield, Crawford
62560PA0010120	UPMC Advantage Silver HSA \$4,000/\$0 - Standard Network	HMO	Silver	Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2024	1, 5	Clearfield, Crawford
62560PA0010122	UPMC Advantage Bronze \$6,700/\$0 - Standard Network	HMO	Bronze	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2024	1, 5	Clearfield, Crawford
62560PA0010123	UPMC Advantage Catastrophic \$9,450/\$0 - Standard Network	HMO	Catastrophic	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2024	1, 5	Clearfield, Crawford
62560PA0010124	UPMC Advantage Gold HSA \$2,500/10% - Standard Network	HMO	Gold	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2024	1, 5	Clearfield, Crawford
62560PA0010125	UPMC Advantage Silver \$2,600/\$50 - Standard Network	HMO	Silver	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2024	1, 5	Clearfield, Crawford

Company Name UPMC Health Coverage, Inc.

Market Individual

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

02-01-2023 Number of Covered Lives by Rating County					RATING AREA 1	
					1,059	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Crawford	Clarion
62560PA0010116	UPMC Advantage Gold \$1,000/\$20 - Standard Network	HMO	Gold	On/Off	\$392.99	
62560PA0010117	UPMC Advantage Silver \$3,900/\$50 - Standard Network	HMO	Silver	On/Off	\$456.70	
62560PA0010118	UPMC Advantage Silver \$3,500/\$50 - Standard Network	HMO	Silver	Off	\$348.44	
62560PA0010120	UPMC Advantage Silver HSA \$4,000/\$0 - Standard Network	HMO	Silver	Off	\$323.47	
62560PA0010122	UPMC Advantage Bronze \$6,700/\$0 - Standard Network	HMO	Bronze	On/Off	\$284.41	
62560PA0010123	UPMC Advantage Catastrophic \$9,450/\$0 - Standard Network	HMO	Catastrophic	On/Off	\$267.58	
62560PA0010124	UPMC Advantage Gold HSA \$2,500/10% - Standard Network	HMO	Gold	On/Off	\$348.40	
62560PA0010125	UPMC Advantage Silver \$2,600/\$50 - Standard Network	HMO	Silver	On/Off	\$468.99	

0	0	0	0	0	0
Erie	Forest	Mckean	Mercer	Venango	Warren

RATING AREA 2

0	0	0
Elk	Cameron	Potter

RATING AREA 3

0	0	0	0	0
Bradford	Carbon	Clinton	Lackawanna	Luzerne

0	0	0	0	0	0	0	0
Lycoming	Monroe	Pike	Sullivan	Susquehanna	Tioga	Wayne	Wyoming

RATING AREA 4

0	0	0	0	0	0
Allegheny	Armstrong	Beaver	Butler	Fayette	Greene

0	0	0	0
Indiana	Lawrence	Washington	Westmoreland

RATING AREA 5

0	0	1,143	0	0	0	0
Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset

RATING AR

0
Centre

\$403.81
 \$469.27
 \$358.03
 \$332.37
 \$292.24
 \$274.94
 \$357.99
 \$481.90

EA 6

0	0	0	0	0	0	0	0	0
Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union

RATING AREA 7

0	0	0	0
Adams	Berks	Lancaster	York

RATING AREA 8

0	0	0	0	0
Bucks	Chester	Delaware	Montgomery	Philadelphia

RATING AREA 9

0	0	0	0	0	0	0
Cumberland	Dauphin	Franklin	Fulton	Juniata	Lebanon	Perry

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																		<i>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.</i>
2																			
3	Company Legal Name:	UPMC HEALTH COVERAGE INC.																	
4	HIOS Issuer ID:	62560	State:	PA															
5	Effective Date of Rate Change(s):	1/1/2024	Market:	Individual															
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		\$24,103,997.58		\$878.11														
15	Reinsurance		\$1,310,742.66		\$47.75														
16	Incurred Claims in Experience Period		\$19,204,667.36		\$699.62														
17	Risk Adjustment		\$496,079.33		\$18.07														
18	Experience Period Premium		\$19,766,051.46		\$720.07														
19	Experience Period Member Months		27,450																
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	\$194.37	1.049	0.938	1.049	0.938	\$188.19												
25	Outpatient Hospital	\$281.70	1.011	1.005	1.011	1.005	\$290.82												
26	Professional	\$106.26	1.006	1.019	1.006	1.019	\$111.66												
27	Other Medical	\$148.90	1.084	0.998	1.084	0.998	\$174.27												
28	Capitation	\$0.00	1.000	1.000	1.000	1.000	\$0.00												
29	Prescription Drug	\$146.39	1.112	1.002	1.112	1.002	\$181.74												
30	Total	\$877.62					\$946.68												
31																			
32	Morbidity Adjustment					1.015													
33	Demographic Shift					1.000													
34	Plan Design Changes					1.000													
35	Other					1.000													
36	Adjusted Trended EHB Allowed Claims PMPM for	1/1/2024				\$960.88													
37																			
38	Manual EHB Allowed Claims PMPM					\$810.63													
39	Applied Credibility %					0.00%													
40																			
41	Projected Period Totals																		
42	Projected Index Rate for	1/1/2024				\$810.63		\$22,422,025.80											
43	Reinsurance					\$35.60		\$984,696.00											
44	Risk Adjustment Payment/Charge					-\$28.07		-\$776,416.20											
45	Exchange User Fees					2.63%		\$600,001.56											
46	Market Adjusted Index Rate					\$824.79		\$22,813,747.56											
47																			
48	Projected Member Months					27,660													
49																			
50	Information Not Releasable to the Public Unless Authorized by Law: This information has not been publically disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.																		
51																			

Product-Plan Data Collection

Company Legal Name: UPMC HEALTH COVERAGE INC.
 HIOS Issuer ID: 62560 State: PA
 Effective Date of Rate Change(s): 1/1/2024 Market: Individual

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 + O.

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									
Field #	Individual HMO								
1.1 Product Name	62560PA001								
1.2 Product ID	62560PA001								
1.3 Plan Name	Gold \$1,000/\$20	Silver \$3,900/\$50	Silver \$3,500/\$50	Silver HSA	Bronze \$6,700/\$0	Catastrophic	Gold HSA	Silver \$2,600/\$50	Silver \$6,800/\$25
1.4 Plan ID (Standard Component ID)	62560PA0010116	62560PA0010117	62560PA0010118	62560PA0010120	62560PA0010122	62560PA0010123	62560PA0010124	62560PA0010125	62560PA0010126
1.5 Metal	Gold	Silver	Silver	Silver	Bronze	Catastrophic	Gold	Silver	Silver
1.6 AV Metal Value	0.800	0.708	0.715	0.702	0.606	0.602	0.782	0.718	0.717
1.7 Plan Category	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Terminated
1.8 Plan Type	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO
1.9 Exchange Plan?	Yes	Yes	No	No	Yes	Yes	Yes	Yes	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)	7.45%	9.90%	10.90%	4.54%	7.76%	0.00%	1.50%	10.99%	0.00%
1.12 Product Rate Increase %	7.80%								
1.13 Submission Level Rate Increase %	7.80%								

Worksheet 1 Totals										
Section II: Experience Period and Current Plan Level Information										
2.1 Plan ID (Standard Component ID)	Total	62560PA0010116	62560PA0010117	62560PA0010118	62560PA0010120	62560PA0010122	62560PA0010123	62560PA0010124	62560PA0010125	62560PA0010126
2.2 Allowed Claims	\$24,103,998	\$12,221,253	\$2,496,531	\$1,441,816	\$120,692	\$1,235,959	\$9,602	\$1,054,959	\$5,443,757	\$79,428
2.3 Reinsurance	\$1,310,743	\$594,991	\$185,767	\$95,092	\$0	\$26,026	\$0	\$56,336	\$347,687	\$4,244
2.4 Member Cost Sharing	\$3,588,588	\$1,816,484	\$292,208	\$348,450	\$32,834	\$489,567	\$9,441	\$194,449	\$397,937	\$7,217
2.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2.6 Incurred Claims	\$19,204,667	\$9,809,778	\$2,018,557	\$997,674	\$87,857	\$720,366	\$161	\$804,174	\$4,698,134	\$67,967
2.7 Risk Adjustment Transfer Amount	\$496,079	\$232,064	\$49,843	\$38,241	\$6,470	\$59,674	\$416	\$27,217	\$81,324	\$831
2.8 Premium	\$19,766,051	\$9,526,721	\$2,417,317	\$1,114,220	\$189,238	\$1,646,686	\$5,521	\$945,242	\$3,897,754	\$34,366
2.9 Experience Period Member Months	27,450	12,841	2,758	2,116	58	3,302	23	1,506	4,500	46
2.10 Current Enrollment	2,202	992	207	139	16	236	0	323	285	4
2.11 Current Premium PMPM	\$737.75	\$779.49	\$905.70	\$546.99	\$593.22	\$557.10	\$0.00	\$565.80	\$914.36	\$860.71
2.12 Loss Ratio	84.78%	100.52%	81.82%	86.57%	44.89%	42.24%	2.70%	82.69%	118.37%	193.11%
Per Member Per Month										
2.13 Allowed Claims	\$878.11	\$951.74	\$995.20	\$681.39	\$337.13	\$374.31	\$417.48	\$700.50	\$1,209.72	\$1,726.69
2.14 Reinsurance	\$47.75	\$46.34	\$67.36	\$45.22	\$0.00	\$7.88	\$0.00	\$37.41	\$77.26	\$92.26
2.15 Member Cost Sharing	\$130.73	\$141.46	\$105.95	\$164.67	\$91.72	\$148.26	\$410.50	\$129.12	\$88.43	\$156.89
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	\$699.62	\$763.94	\$731.89	\$471.49	\$345.41	\$218.16	\$6.98	\$531.98	\$1,044.03	\$1,477.54
2.18 Risk Adjustment Transfer Amount	\$18.07	\$18.07	\$18.07	\$18.07	\$18.07	\$18.07	\$18.07	\$18.07	\$18.07	\$18.07
2.19 Premium	\$720.07	\$741.90	\$876.47	\$526.57	\$528.57	\$498.39	\$240.02	\$627.65	\$863.95	\$747.04

Section III: Plan Adjustment Factors									
3.1 Plan ID (Standard Component ID)	62560PA0010116	62560PA0010117	62560PA0010118	62560PA0010120	62560PA0010122	62560PA0010123	62560PA0010124	62560PA0010125	62560PA0010126
3.2 Market Adjusted Index Rate	\$824.79								
3.3 AV and Cost Sharing Design of Plan	0.7908	0.9190	0.7012	0.6509	0.5723	0.5385	0.7011	0.9438	0.9190
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	1.0018	1.0018	1.0018	1.0018	1.0018	1.0018	1.0018	1.0018	1.0018
Noninsurance Costs									
3.6 Administrative Expense	11.18%	11.18%	11.18%	11.18%	11.18%	11.18%	11.18%	11.18%	11.18%
3.7 Taxes and Fees	0.38%	0.38%	0.38%	0.38%	0.38%	0.38%	0.38%	0.38%	0.38%
3.8 Profit & Risk Load	1.50%	1.50%	1.50%	1.50%	1.50%	1.50%	1.50%	1.50%	1.50%
3.9 Catastrophic Adjustment	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
3.10 Plan Adjusted Index Rate	\$751.58	\$873.42	\$666.42	\$618.61	\$543.91	\$511.79	\$666.32	\$896.99	\$873.42
3.11 Age Calibration Factor	0.5313	0.5313							
3.12 Geographic Calibration Factor	1.0207	1.0207							
3.13 Tobacco Calibration Factor	0.9981	0.9981							
3.14 Calibrated Plan Adjusted Index Rate	\$406.80	\$472.75	\$360.71	\$334.84	\$294.40	\$277.02	\$360.66	\$485.51	\$472.75

Section IV: Projected Plan Level Information										
4.1 Plan ID (Standard Component ID)	Total	62560PA0010116	62560PA0010117	62560PA0010118	62560PA0010120	62560PA0010122	62560PA0010123	62560PA0010124	62560PA0010125	62560PA0010126
4.2 Allowed Claims	\$22,462,753	\$10,128,135	\$2,267,113	\$1,379,281	\$158,036	\$2,249,849	\$0	\$3,193,043	\$3,087,296	\$0
4.3 Reinsurance	\$748,850	\$344,421	\$73,333	\$46,446	\$5,641	\$81,980	\$0	\$132,156	\$98,883	\$0
4.4 Member Cost Sharing	\$5,801,494	\$2,128,345	\$644,719	\$381,624	\$50,197	\$872,192	\$0	\$883,663	\$840,755	\$0
4.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4.6 Incurred Claims	\$15,896,410	\$7,655,358	\$1,549,062	\$949,211	\$102,198	\$1,295,697	\$0	\$2,197,224	\$2,147,659	\$0
4.7 Risk Adjustment Transfer Amount	-\$602,394	-\$271,544	-\$57,814	-\$38,194	-\$4,447	-\$64,616	\$0	-\$88,422	-\$77,958	\$0
4.8 Premium	\$20,494,640	\$9,360,085	\$2,316,382	\$1,167,550	\$136,203	\$1,612,281	\$0	\$2,702,648	\$3,207,512	\$0
4.9 Projected Member Months	27,660	12,456	2,652	1,752	204	2,964	0	4,056	3,576	0
4.10 Loss Ratio	79.92%	84.21%	68.59%	84.05%	83.94%	83.72%	#DIV/0!	84.05%	68.63%	#DIV/0!
Per Member Per Month										
4.11 Allowed Claims	\$812.10	\$813.11	\$854.87	\$787.26	\$774.69	\$759.06	#DIV/0!	\$787.24	\$863.34	#DIV/0!
4.12 Reinsurance	\$27.65	\$27.65	\$27.65	\$27.65	\$27.65	\$27.65	#DIV/0!	\$27.65	\$27.65	#DIV/0!
4.13 Member Cost Sharing	\$209.74	\$170.87	\$243.11	\$217.82	\$246.06	\$294.26	#DIV/0!	\$217.87	\$235.11	#DIV/0!
4.14 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	\$0.00	\$0.00	#DIV/0!
4.15 Incurred Claims	\$574.71	\$614.59	\$584.11	\$541.79	\$500.97	\$437.14	#DIV/0!	\$541.72	\$600.58	#DIV/0!
4.16 Risk Adjustment Transfer Amount	-\$21.80	-\$21.80	-\$21.80	-\$21.80	-\$21.80	-\$21.80	#DIV/0!	-\$21.80	-\$21.80	#DIV/0!
4.17 Premium	\$740.95	\$751.61	\$873.45	\$666.41	\$618.64	\$543.95	#DIV/0!	\$666.33	\$896.96	#DIV/0!

Rating Area Data Collection

Specify the total number of Rating Areas in your State by selecting the Create Rating Areas button or Ctrl + Shift + R.

Select only the Rating Areas you are offering plans within and add a factor for each area.

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

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

Rating Area	Rating Factor
Rating Area 1	0.9660
Rating Area 5	0.9925

RFJ Part III: Actuarial Memorandum

General Information

The purpose of this actuarial memorandum is to provide certain information related to a rate submission for the company identified below. The relevant index rate is developed in accordance with federal regulations, and plan specific premiums are generated using the allowable modifiers in accordance with the single risk pool rule.

The following section provides information related to the identification of the company that is submitting this rate filing. Much of this information is also displayed in Table 0 of the PA Actuarial Memorandum Exhibits.

Company Identifying Information:

Company Legal Name: UPMC Health Coverage, Inc.

NAIC #: 15451

State: PA

HIOS Issuer ID: 62560

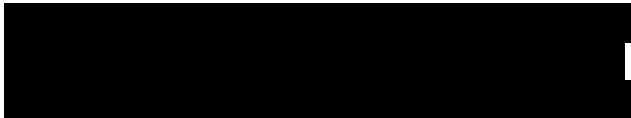
Market: Individual

Exchange: On and Off Exchange

Products: HMO

Effective Date: 1/1/2024

Company Contact Information:



Filing Information:

Rate Filing SERFF Tracking #: UPMC-133641900

Form Filing SERFF Tracking #: UPMC-133666167, UPMC-133666186

Binder SERFF Tracking #: UPMC-PA24-125116425

Rate History:

Historical and proposed rate changes vary by plan due to various changes made to meet AV requirements on a plan-by-plan basis. The values listed below and overall proposed rate change for 2023 are weighted averages of the increase for each plan based on projected enrollment. Please see Table 10 of the PA Actuarial Memorandum Exhibits for a breakdown of plan-by-plan rate increases.

SERFF Tracking #	Year	Rate Change*
UPMC-129629050	2014	0.0%
UPMC-129640573	2015	0.0%
UPMC-130072609	2016	0.0%
UPMC-130536761	2017	9.3%
UPMC-131034852	2018	-8.3%
UPMC-131496004	2019	12.1%

UPMC-131943282	2020	2.2%
UPMC-132364646	2021	N/A**
UPMC-132801380	2022	2.5%
UPMC-133257300	2023	4.4%

* Historical increases in this table are from PAAM Exhibits Table 10

** Structure of Table 10 leads to DIV/0 error in cell AC15 for 2021 filing

Proposed Rate Increase(s)

Reasons for Rate Increase(s):

The proposed rate increase calculated for HMO products in section I, worksheet 2 of the URRT is 7.8%

The largest drivers of the rate increase include the following:

- Increases in medical and pharmacy cost and utilization

Increases may vary by product due to annual changes in cost sharing, the impact of which may vary from plan to plan.

Market Experience

Single Risk Pool

The single risk pool consists of members that are anticipated to enroll in ACA-compliant policies offered under the captioned market.

Experience Period Premium and Claims

Paid Through Date:

The reported claims during the experience period have a paid through date of February 2023.

Current Date:

Current enrollment and premium data is reported as of February 15, 2023.

Premiums (net of MLR Rebate) in Experience Period:

Section I, worksheet 1 of the URRT contains calendar year 2022 premium for all non-grandfathered policies in the single risk pool for the captioned company and market. No adjustments were made for MLR rebates as we do not anticipate owing them. HHS cost-sharing is not included in the premium data. Please note that the earned premium is also listed in Table 2 of the PA Actuarial Memorandum Exhibits.

Allowed and Incurred Claims Incurred During the Experience Period:

Section I, worksheet 1 of the URRT contains calendar year 2022 claims experience for all non-grandfathered policies in the single risk pool for the captioned company and market, paid through February 2023. Allowed medical, pharmacy, pediatric dental, and pediatric vision claims are pulled directly from our data warehouse. We

used the standard Development/Completion Factor Method to calculate IBNR. Factors were calculated using our entire block of ACA-related Individual business and no unexpected factors were observed. Because two months run-out is available the impact of IBNR is minimal.

Month	Completion Factor
1/1/2022	0.9998
2/1/2022	0.9996
3/1/2022	0.9982
4/1/2022	0.9972
5/1/2022	0.9960
6/1/2022	0.9932
7/1/2022	0.9912
8/1/2022	0.9883
9/1/2022	0.9854
10/1/2022	0.9812
11/1/2022	0.9675
12/1/2022	0.9432

The following table shows the ultimate paid claims for the experience period distinguished between claims paid and fully adjudicated and claims estimated by IBNR:

Incurred Claims Processed by Claim System:	\$ 21,654,697
Claims Processed Outside Claim System:	\$ -
Claims Estimated by IBNR:	\$ 339,776
Ultimate Incurred Claims:	\$ 21,994,474

Benefit Categories

Medical claims are split into nine categories in our data warehouse. They, along with pediatric dental & vision claims, are mapped into the categories in the URRT as follows:

UPMC Benefit Category	URRT Benefit Category
Inpatient	Inpatient Hospital
Catastrophic	Inpatient Hospital
Outpatient	Outpatient Hospital
Behavioral	Outpatient Hospital
PCP	Professional
Specialist	Professional
Diagnostic	Other Medical
ER	Other Medical
Other	Other Medical
Pediatric Dental	Other Medical
Pediatric Vision	Other Medical

Drug claims are in separate tables and directly mapped into the Prescription Drugs category. Note that services are the unit of measurement used for the Other Medical category.

Projection Factors

Trend Factors (cost/utilization):

The overall annual trend used in rate development is 4.64%. Historical allowed claims from our Individual block of ACA-compliant business across all of UPMC's subsidiary companies were used to develop year-over-year trend factors for use in the projected rates, and the basis for this trend is the three-year annualized change between 2019 and 2022. This approach omits the substantial impact that the COVID-19 pandemic had on calendar year 2020 claims.

The large enrollment count and consistent makeup of this population make it appropriate for use in trend development for this filing. Service categories were defined to be consistent with the URRT instructions. Please see Tables 3 and 3b of the PA Actuarial Memorandum Exhibits for trend development calculations. Please note that the minor changes made to benefit designs in order to keep plan actuarial values within the allowed ranges were not significant enough to warrant an adjustment for induced demand with regard to trend, so the induced demand column has been populated with zeroes in Tables 3 and 3b. No changes in provider contracting are expected between the experience and projection periods, and therefore, no adjustments have been applied.

Please see Exhibit 5 of the Supporting Exhibits for trend development.

Adjustments to Trended EHB Allowed Claims PMPM

Changes in the Morbidity of the Population Insured:

For 2024, the Pennsylvania Insurance Department has mandated that an adjustment factor of 1.0 is applied to the index rate to reflect the morbidity impact of the state-based reinsurance program in the Individual market. In line with that guidance, no adjustment for changes in morbidity as a result of the state-based reinsurance program has been applied.

UPMC is including a morbidity adjustment factor of 1.015 as a result of the end of the Public Health Emergency and the anticipated enrollment of members who will lose Medicaid coverage. This adjustment is based on UPMC experience for members who left the fully-insured ACA Individual market during the PHE and enrolled immediately in UPMC Medicaid coverage, as well as the estimated proportion of total 2024 ACA Individual enrollment that is comprised of these newly ineligible Medicaid members. Please see Exhibit 13 of the Supporting Exhibits for additional support of this adjustment.

Changes in Benefits:

No changes were made to the PA EHB Benchmark plan for 2024, so no adjustments were necessary.

Changes in Demographics:

No other adjustments have been applied to the index rate. The average age for our experience period Individual risk pool was 45.1 with an average premium factor of 1.88. This is nearly identical to our 2023 experience so far with age 45.3 and premium factor 1.89. Due to the stability of the population, no demographic adjustment has

been made to the rates.

Other Adjustments:

An adjustment factor of 1.340 has been applied to the index rate to account for differences in expected allowed claims costs between the manual data and that of the captioned company. This adjustment factor brings the captioned company index rate in line with the current characteristics of the provider networks. Please see Exhibit 8 of the Supporting Exhibits for the derivation of this factor.

An adjustment factor of 0.970 has been applied to the index rate in the Change in Other category. This adjustment accounts for medical and pharmacy cost savings initiatives that UPMC has actively engaged in, and represents the impact of those savings in 2024 relative to the 2022 experience period. Please see Exhibit 9 of the Supporting Exhibits for the derivation of the Change in Other factor applied in Table 5.

Please note that the Change in Other factor has been revised relative to the factor used in the initial rate filing submission on May 17, 2023, to reflect the cost impact of Act 1 of 2023. The schedule of benefits for 2024 ACA policies will align with the provisions of this legislation, and the additional cost in the projection period is estimated to be \$1.14 PMPM, as illustrated in Exhibit 9 of the Supporting Exhibits.

Credibility Manual Rate Development

Source and Appropriateness of Manual Rate Used:

The manual data for this filing was developed using the entirety of ACA-compliant experience period data from each of UPMC's subsidiary companies in the Individual market, which is displayed in tables 2b, 3b, and 4b in the PA Actuarial Memorandum Exhibits. The manual data consists of 1,245,888 member months of experience.

Adjustments Made to the Data:

Adjustments made to the manual data are discussed in the "Projection Factors" section above.

Inclusion of Capitation Payments:

No benefits are projected to be paid for via capitation.

Credibility of Experience

The experience period data for this company consists of 27,450 member months from ACA-compliant policies. Because the manual data encompasses the single risk pool of all UPMC Individual market companies, we believe it most appropriately represents the claim experience for use in calculating projected rates. Therefore, we assign 100% credibility to the manual data and 0% credibility is used for each company-specific single risk pool.

Establishing the Index Rate

For this filing, the Index Rate of the Experience Period is set equal to the manual rate due to align with the single risk pool Index Rate. The calculation of the manual rate is shown in Table 2b of the PA Actuarial Memorandum Exhibits. The Index Rate of the Projection Period is then calculated in Table 5 by first applying two years of 4.64% annual trend to the Index Rate of Experience Period. The adjustments described in the Projection Factors section

above were then applied to the trended manual rate to generate the Index Rate of the Projection Period. Please note that the Index Rate of Projection Period of **\$810.63** shown in Table 5 matches the corresponding value shown in section II, worksheet 1 of the URRT. Please also note that claims corresponding to non-EHBs were not included in the calculation of the index rates despite being covered during the experience period.

Paid to Allowed Ratio

The Paid to Allowed Average Factor was calculated by taking the weighted average of the company-determined Actuarial Values for all plans using projected membership as demonstrated in Table 10 of the PA Actuarial Memorandum Exhibits.

Development of the Market Adjusted Index Rate

The Projected Index Rate is adjusted by adding estimates for Risk Adjustment and Marketplace Fees (with impacts and costs spread across the whole risk pool) to obtain the projected Market Adjusted Index Rate. Derivation of the PMPM values used for the Risk Adjustment, Marketplace Fees adjustments, and projected Reinsurance recoveries are described in the following sections.

Experience Period Risk Adjustment and Reinsurance Adjustments PMPM:

Experience period Risk Adjustment for the captioned company is estimated to be a receipt of \$496,079 **per the Summary Report on Permanent Risk Adjustment Transfers for the 2022 Benefit Year published by CMS on June 30, 2022**. The receipt translates to a PMPM of \$18.07.

Experience period recoveries from the state-based reinsurance program are estimated to be a receivable of \$1,310,743 aligning with the estimate from the Pennsylvania Insurance Department based on data through May 2, 2023, which translates to a PMPM of \$47.75.

Projected Risk Adjustments PMPM:

Projection period Risk Adjustment PMPM has been estimated to be a payment of **\$21.80**, which is displayed in Table 5. The value was derived by first using a blend of the estimated experience period Risk Adjustment PMPM from each of UPMC's subsidiary companies in the Individual market. The projection period Risk Adjustment PMPM then accounts for the impact of known changes to HHS model weights for the 2024 Benefit Period. Finally, the transfer amount is adjusted to reflect the estimated impact of the Risk Adjustment Data Validation (RADV) program. UPMC relies on analysis by Wakely Consulting in estimating the impacts of both the 2024 model changes and the RADV program.

Please see Exhibit 10 of the Supporting Exhibits for the derivation of this estimate.

The value entered in Section II, Worksheet 1 of the URRT was **\$28.00** since the calculation of the Market Adjusted Index Rate is done on an allowed claims basis in the URRT. The updated PMPM was derived by taking the original paid PMPM divided by the Paid to Allowed Average Factor. The net amount after accounting for the fee is subtracted from the Index Rate of the Projection Period as part of the calculation of the Market Adjusted Index Rate. For the URRT and Table 5 of the PA Actuarial Memorandum Rate Exhibits, it was entered as a negative number because the calculation subtracts this value. The effect is an increase in premium as additional

revenue will be required to cover the anticipated payment.

Exchange User Fees:

The member-weighted average of a 3.0% Marketplace User Fee for Marketplace enrollees combined with 0% for non-Marketplace enrollees calculates to 2.3%. This load is developed based on fees from on-exchange policies, but is spread over all policies uniformly. This translates to a PMPM of \$13.15, which was entered as a positive value in Table 5 since the calculation adds this value. The effect for this adjustment is an increase in premium as additional revenue will be required to cover the anticipated payment. Since the URRT requires the exchange user fee to be listed on an "allowed" basis, the final value included in the URRT was calculated by first taking exchange user fee PMPM of \$13.15 divided by the paid-to-allowed ratio to derive the "allowed" exchange user fee PMPM. This value was then divided by the market adjusted index rate to arrive at the final value of 2.6%.

Estimated Reinsurance Recoveries PMPM:

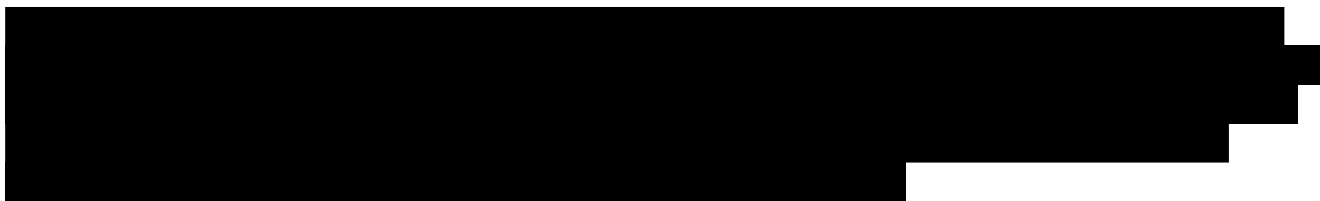
The index rate was further adjusted by accounting for estimated recoveries from the state-based reinsurance program. Estimated recoveries applied in Table 5 and Section II, Worksheet 1 of the URRT were \$27.65 PMPM and \$35.60 PMPM, respectively. The value entered in the URRT was derived by taking the Table 5 recovery PMPM and dividing by the Paid to Allowed Average Factor, as the calculation of the Market Adjusted Index Rate is done on an allowed claims basis. These values were entered as positive values in Table 5 and the URRT since both calculations subtract these values. The result of this adjustment is a decrease in projected period premium as less revenue will be required due to the anticipated recovery.

The estimated recovery of \$27.65 PMPM was derived using data entered into worksheets II.a and II.b of the PA Actuarial Memorandum exhibits. Data entered into worksheet II.a matches the experience period data described in the sections above. Worksheet II.b was populated by referencing the same source of experience captured in worksheet II.a, but with member-level incurred claims trended forward two years to the projection period before allocating the data to each range within the continuance table. An annualized claims trend of 4.64% was applied to estimate the projected member-level claims used to populate worksheet II.b. The projected recovery is calculated using a per-member attachment of \$60,000, a cap of \$100,000, and a coinsurance rate of 50%, as communicated by the Pennsylvania Insurance Department on June 13, 2023 by email.

Non-Benefit Expenses and Profit & Risk

Administrative Expense Load:

Administrative costs of 11.2% of premium have been displayed in Table 6 and the URRT. This value has been derived from projected administrative costs for the projection period. These expenses are assumed to be uniform for all plan designs.



Profit & Risk Margin:

The projected profit margin for this company is 1.5% for 2024. This value is listed in both Table 6 and the URRT. The same level of profit margin is expected for each plan included in this filing.

Taxes and Fees:

Taxes and Fees are expected to be 0.4% of premium in 2024. This accounts for the projected Federal Income Tax in 2024. Please note that the Risk Adjustment Administration Fee of \$0.21 PMPM and the projected PCORI Fee of \$0.25 PMPM were included in the Taxes and Fees field in Table 6 and the URRT.

Plan Adjusted Index Rates

Table 10 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance to develop 2024 Plan Adjusted Index Rates. The allowable modifiers that are used in rate development are described below.

Plan Actuarial Value:

The AV for each plan was determined by the issuer's own pricing model based on experience from UPMC's fully-insured commercial block of business. This model calculates an AV for a given plan by first trending 2022 allowed claims data forward two years to the projection period, calculating paid amounts for each benefit category based on the benefit design of a given plan and projected allowed claims data, and taking the ratio of the total projected paid claims to projected allowed claims. Since the same tool was used for all plans, this eliminates any impact from morbidity at the plan level, and differing rate increases by product type are purely based on differences in benefit design for all plans within a given product.

Benefit Richness (induced demand)

Benefit richness factors were calculated using the formula $(\text{Plan AV})^2 - (\text{Plan AV}) + 1.24$, where (Plan AV) is equal to the product of the Plan AV described above and, when applicable, the Non-Funding of CSR Adjustment described below on a plan-by-plan basis. This formula was prescribed by the Pennsylvania Insurance Department and has been developed to produce induced demand factors that mimic those determined by HHS. The initial factors calculated using this formula were then normalized against projected membership by plan.

Benefits in addition to EHBs

Benefits that will be offered outside EHB include routine foot care, acupuncture, dental anesthesia, diabetes care management, and inherited metabolic disorder. The projected allowed claims for these benefits is \$1.47 PMPM. The adjustment factor of 1.002 included in Table 10 has been derived by adding the aforementioned PMPM to the projected index rate for 2024 and dividing this total by the same index rate, causing the adjustment to be applied uniformly to all plans.

Provider Network

Since only one network is included in this filing, no network adjustments were deemed necessary for 2023.

Catastrophic Eligibility

No adjustments were made for catastrophic plans. Current enrollment is minimal and not credible.

Non-Funding of CSR Adjustment

To account for the elimination of funding for cost-share reduction subsidies, the Pennsylvania Insurance Department has mandated the rates for all silver plans offered both on and off the exchange be increased via the CSR Defunding Adjustment in Table 10 of the Actuarial Memorandum Rate Exhibits. The captioned company will apply a factor of 1.22 as the CSR Defunding Adjustment for 2024. Several off-exchange only silver plans continue to be included for 2024 to minimize disruption to non-subsidized members enrolled in silver plans.

Calibration

Age Curve Calibration:

The average age factor was calculated using our projected ACA-related Individual population with the prescribed HHS Age Factors for 2024. It was assumed this represents the age distribution of the entire single risk-pool. The number of members under each age bracket was multiplied by the corresponding HHS Age Factor. These were then summed and divided by the total number of members to obtain the average age factor. For UPMC's entire block of ACA-compliant Individual business, the average age factor is 1.888 and average age was 45.1 during the experience period. This preliminary age factor is then multiplied by an adjustment factor of 0.997, which accounts for the regulation that prohibits charging for more than three children per family, resulting in a final age calibration factor of 1.882. Please see Exhibit 3 in the Supporting Exhibits for the calculation of this factor.

Geographic Factor Calibration:

The geographic rating areas used within this filing are the same as those defined by the state. For 2024, the proposed geographic factors are identical to the 2023 filing for this company with the exception of Rating Area 5. The table below displays the current and proposed factors:

Region	2023	2024
1	0.966	0.966
5	0.966	0.993

The proposed factor for Rating Area 5 acknowledges the elevated costs observed in that region relative to Rating Area 1 (which factor Rating Area 5 had previously aligned with) after accounting for age, benefit level, and morbidity. Please see Exhibit 14 of the Supporting Exhibits for an illustration of this change.

The calibration factor of 0.980 was calculated as the weighted average of the geographical factors using projected enrollment for the single risk pool, as shown in Exhibit 4 of the Supporting Exhibits.

Tobacco Use Rating Factor Calibration:

The average tobacco factor was calculated using projected membership, which is assumed to have the same split for tobacco status as current membership. The member-weighted average of a 2.5% load applied for enrollees who qualify as tobacco users combined with a 0% load for non-tobacco users yields an average tobacco factor of 1.002. The derivation of this factor is shown below.

Tobacco Status	Feb 2023 Enrollment Split	Tobacco Factor	Calibration Factor
Non-User	92.5%	1.000	0.925
User	7.5%	1.025	0.077
Total	100.0%		1.002

Consumer Adjusted Premium Rate Development

Table 11 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance. 2024 rates calculated in this tables were tested to ensure that they match those included in the PA Plan Design Summary and Rate Tables, Federal Rates Template, and the binder. The Plan Adjusted Index Rates are divided by the age calibration factor then multiplied by the specific age, geographic, and tobacco factors shown in Tables 12, 13, and 14 of the PA Actuarial Memorandum Exhibits, respectively, to develop the Consumer Adjusted Premium Rates.

Projected Loss Ratio

The projected period loss ratio, using the federally-prescribed MLR methodology without the credibility adjustment, is 84.8%, as shown in Exhibit 1 of the Supporting Exhibits.

An exhibit displaying historical MLR information is provided in Exhibit 2 of the Supporting Exhibits. Loss ratios in the 'Actual' column have been calculated from data submitted in the most recent three-year MLR filing using the federally-prescribed MLR methodology without the credibility adjustment. Enrollment data in the 'Actual' column ties directly to the historical data included in Table 4 of the PA Actuarial Memorandum Exhibits. Loss ratios and enrollment data in the 'Pricing' columns are projected values taken from each calendar year's approved ACA rate filing.

Plan Product Info

AV Metal Values

Metal values were determined using the final 2024 HHS AV Calculator. For plans with designs that were incompatible with the AV Calculator, a Supporting Documentation and Justification narrative has been included with the AV Screenshots.

Membership Projections

Membership projections for renewing plans were developed based on our anticipated competitive positioning in the market combined with our current enrollment distribution by plan. Colleagues with market expertise provided enrollment estimates for new plans. Additional membership is also expected as a result of the end of the Medicaid continuous coverage requirement and the resulting redetermination of Medicaid eligibility.

Terminated Plans and Products

Please see Table 10 of the PA Actuarial Memorandum Exhibits for a mapping of all terminated SCIDs to a 2024 plan, where applicable.

Warning Alerts

Several warning messages appear after clicking the validate button in the URRT. These messages highlight the fact that several terminated plans have entries of zero in the current enrollment and premium PMPM fields on worksheet 2 of the URRT. These particular Catastrophic plans are offered in 2023 but have no current enrollment. Similar error messages appeared in the prior year's version of the URRT for the captioned company.

Effective Rate Review Information

The Pennsylvania Insurance Department is responsible for conducting effective rate review for all submitted rates.

Reliance

Below is a summary of the information that we have relied on as part of rate development.

Source	Type of Information	Comments
Jeffrey A. Bees, CFO, Commercial Products and WorkPartners	Projected administrative expenses	I have not performed any independent audit or otherwise verified the accuracy of this data/information.
Joseph Bayura, Director, Product Development & Small Group Sales	Projected membership for new plans	I have not performed any independent audit or otherwise verified the accuracy of this data/information.
Rachel Oaks, Sr. Director, Medical Economics	Anticipated savings from medical savings initiatives	I have not performed any independent audit or otherwise verified the accuracy of this data/information.

List of Supporting Exhibits

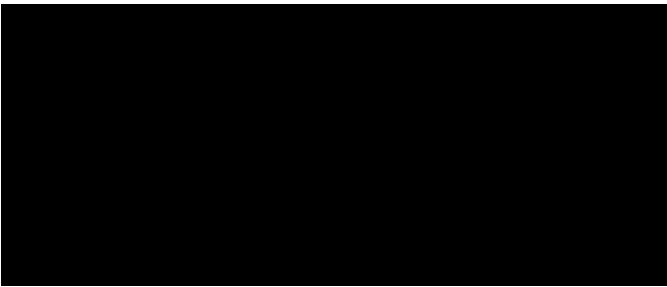
Supporting exhibits have been included with the rate filing to assist with the review process. Below is a list summarizing the contents of each exhibit.

- Exhibit 1: Derivation of Projection Period MLR
- Exhibit 2: Actual vs Pricing MLR & Member Months
- Exhibit 3: Derivation of Age Calibration Factor
- Exhibit 4: Derivation of Geographical Calibration Factor
- Exhibit 5: Derivation of Annual Trend
- Exhibit 6: Current/Projected Commissions by OEP and SEP
- Exhibit 7: Derivation of 3-child Cap Adjustment Factor
- Exhibit 8: Derivation of Change in Network Factor
- Exhibit 9: Derivation of Change in Other Factor
- Exhibit 10: Derivation of Projected Risk Adjustment PMPM
- Exhibit 11: Projected Administrative Expense Load Development
- Exhibit 12: Derivation of Projected Taxes and Fees
- Exhibit 13: Derivation of PHE Morbidity Adjustment
- Exhibit 14: Derivation of Change in Geographic Rating Factors
- Exhibit 15: Exchange User Fee Development
- Exhibit 16: Support for Change in Network Rating Factors

Actuarial Certification

I, [REDACTED], am a Member of the American Academy of Actuaries in good standing. I am currently Manager for ACA products in the Actuarial Services department for UPMC Health Plan. I certify that:

- All factor, benefit and other changes from the prior approved filing have been disclosed in this actuarial memorandum.
- 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 2024 Rate Filing Justification.
- The projected Index Rate is:
 - a. In compliance with all applicable state and Federal statutes and regulations (45 CFR § 156.80 and § 147.102)
 - b. Developed in compliance with the applicable Actuarial Standards of Practice
 - c. Reasonable in relation to the benefits provided and the population anticipated to be covered
 - d. Neither excessive nor deficient
- The Index Rate and only the allowable modifiers as described in 45 CFR § 156.80(d)(1) and § 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 URRT for all plans except those specified in the certification.



7/14/2023
Date

2024 Rates Table Template v13.0		<i>All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.</i>				
		<i>If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.</i>				
		<i>If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.</i>				
		<i>If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.</i>				
		<i>To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.</i>				
HIOS Issuer ID*	62560					
Rate Effective Date*	1/1/2024					
Rate Expiration Date*	12/31/2024					
Rating Method*	Age-Based Rates					
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco 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	Required: Enter the rate of an Individual tobacco enrollee on a plan	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	300.64	300.64	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	15	327.36	327.36	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	16	337.58	337.58	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	17	347.80	347.80	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	18	358.80	358.80	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	19	369.80	369.80	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	20	381.20	381.20	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	21	392.99	402.81	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	22	392.99	402.81	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	23	392.99	402.81	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	24	392.99	402.81	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	25	394.56	404.43	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	26	402.42	412.48	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	27	411.85	422.15	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	28	427.18	437.86	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	29	439.76	450.75	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	30	446.04	457.19	
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62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	34	477.09	489.02	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	35	480.23	492.24	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	36	483.38	495.46	
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62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	39	495.95	508.35	
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62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	41	511.67	524.46	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	42	520.71	533.73	
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	43	533.29	546.62	

62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	44	549.01	562.73
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	45	567.48	581.66
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	46	589.49	604.22
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	47	614.24	629.60
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	48	642.54	658.60
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	49	670.44	687.20
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	50	701.88	719.43
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	51	732.93	751.25
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	52	767.12	786.29
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	53	801.70	821.74
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	54	839.03	860.01
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	55	876.37	898.28
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	56	916.85	939.77
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	57	957.72	981.66
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	58	1001.34	1026.37
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	59	1022.95	1048.53
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	60	1066.57	1093.24
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	61	1104.30	1131.91
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	62	1129.06	1157.29
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	63	1160.11	1189.11
62560PA0010116	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1178.97	1208.44
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	0-14	308.91	308.91
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	15	336.37	336.37
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	16	346.87	346.87
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	17	357.37	357.37
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	18	368.68	368.68
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	19	379.99	379.99
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	20	391.70	391.70
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	21	403.81	413.91
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	22	403.81	413.91
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	23	403.81	413.91
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	24	403.81	413.91
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	25	405.43	415.56
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	26	413.50	423.84
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	27	423.19	433.77
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	28	438.94	449.92
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	29	451.86	463.16
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	30	458.32	469.78
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	31	468.02	479.72
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	32	477.71	489.65
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	33	483.76	495.86
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	34	490.23	502.48
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	35	493.46	505.79
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	36	496.69	509.10
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	37	499.92	512.41
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	38	503.15	515.73
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	39	509.61	522.35
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	40	516.07	528.97
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	41	525.76	538.90

62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	42	535.05	548.42
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	43	547.97	561.67
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	44	564.12	578.23
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	45	583.10	597.68
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	46	605.72	620.86
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	47	631.16	646.93
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	48	660.23	676.74
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	49	688.90	706.12
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	50	721.20	739.23
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	51	753.11	771.93
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	52	788.24	807.94
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	53	823.77	844.37
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	54	862.13	883.69
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	55	900.50	923.01
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	56	942.09	965.64
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	57	984.08	1008.69
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	58	1028.91	1054.63
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	59	1051.12	1077.40
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	60	1095.94	1123.34
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	61	1134.71	1163.07
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	62	1160.15	1189.15
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	63	1192.05	1221.85
62560PA0010116	Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1211.43	1241.72
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	349.38	349.38
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	15	380.43	380.43
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	16	392.31	392.31
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	17	404.18	404.18
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	18	416.97	416.97
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	19	429.75	429.75
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	20	443.00	443.00
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	21	456.70	468.12
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	22	456.70	468.12
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	23	456.70	468.12
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	24	456.70	468.12
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	25	458.53	469.99
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	26	467.66	479.35
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	27	478.62	490.59
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	28	496.43	508.84
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	29	511.05	523.82
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	30	518.35	531.31
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	31	529.32	542.55
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	32	540.28	553.78
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	33	547.13	560.80
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	34	554.43	568.29
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	35	558.09	572.04
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	36	561.74	575.78
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	37	565.39	579.53
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	38	569.05	583.27
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	39	576.36	590.76

62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	40	583.66	598.25
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	41	594.62	609.49
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	42	605.13	620.26
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	43	619.74	635.24
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	44	638.01	653.96
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	45	659.47	675.96
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	46	685.05	702.18
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	47	713.82	731.67
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	48	746.70	765.37
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	49	779.13	798.61
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	50	815.67	836.06
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	51	851.75	873.04
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	52	891.48	913.77
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	53	931.67	954.96
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	54	975.05	999.43
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	55	1018.44	1043.90
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	56	1065.48	1092.12
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	57	1112.98	1140.80
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	58	1163.67	1192.76
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	59	1188.79	1218.51
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	60	1239.48	1270.47
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	61	1283.33	1315.41
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	62	1312.10	1344.90
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	63	1348.18	1381.88
62560PA0010117	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1370.10	1404.35
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	0-14	358.99	358.99
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	15	390.90	390.90
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	16	403.10	403.10
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	17	415.30	415.30
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	18	428.44	428.44
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	19	441.58	441.58
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	20	455.19	455.19
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	21	469.27	481.00
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	22	469.27	481.00
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	23	469.27	481.00
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	24	469.27	481.00
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	25	471.15	482.93
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	26	480.53	492.55
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	27	491.79	504.09
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	28	510.10	522.85
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	29	525.11	538.24
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	30	532.62	545.94
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	31	543.88	557.48
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	32	555.15	569.03
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	33	562.19	576.24
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	34	569.69	583.94
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	35	573.45	587.78
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	36	577.20	591.63
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	37	580.96	595.48

62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	38	584.71	599.33
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	39	592.22	607.02
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	40	599.73	614.72
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	41	610.99	626.26
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	42	621.78	637.33
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	43	636.80	652.72
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	44	655.57	671.96
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	45	677.63	694.57
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	46	703.91	721.50
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	47	733.47	751.81
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	48	767.26	786.44
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	49	800.57	820.59
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	50	838.12	859.07
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	51	875.19	897.07
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	52	916.02	938.92
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	53	957.31	981.24
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	54	1001.89	1026.94
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	55	1046.47	1072.63
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	56	1094.81	1122.18
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	57	1143.61	1172.20
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	58	1195.70	1225.59
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	59	1221.51	1252.05
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	60	1273.60	1305.44
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	61	1318.65	1351.61
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	62	1348.21	1381.92
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	63	1385.29	1419.92
62560PA0010117	Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1407.81	1443.01
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	266.56	266.56
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	15	290.25	290.25
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	16	299.31	299.31
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	17	308.37	308.37
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	18	318.13	318.13
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	19	327.88	327.88
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	20	337.99	337.99
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	21	348.44	357.15
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	22	348.44	357.15
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	23	348.44	357.15
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	24	348.44	357.15
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	25	349.83	358.58
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	26	356.80	365.72
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	27	365.17	374.29
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	28	378.75	388.22
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	29	389.90	399.65
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	30	395.48	405.37
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	31	403.84	413.94
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	32	412.20	422.51
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	33	417.43	427.87
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	34	423.01	433.58
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	35	425.79	436.44

62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	36	428.58	439.30
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	37	431.37	442.15
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	38	434.16	445.01
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	39	439.73	450.72
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	40	445.31	456.44
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	41	453.67	465.01
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	42	461.68	473.23
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	43	472.83	484.65
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	44	486.77	498.94
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	45	503.15	515.73
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	46	522.66	535.73
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	47	544.61	558.23
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	48	569.70	583.94
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	49	594.44	609.30
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	50	622.31	637.87
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	51	649.84	666.09
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	52	680.15	697.16
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	53	710.82	728.59
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	54	743.92	762.52
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	55	777.02	796.45
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	56	812.91	833.23
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	57	849.15	870.38
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	58	887.83	910.02
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	59	906.99	929.66
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	60	945.67	969.31
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	61	979.12	1003.59
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	62	1001.07	1026.09
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	63	1028.59	1054.31
62560PA0010118	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1045.32	1071.45
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	0-14	273.89	273.89
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	15	298.24	298.24
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	16	307.55	307.55
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	17	316.86	316.86
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	18	326.88	326.88
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	19	336.91	336.91
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	20	347.29	347.29
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	21	358.03	366.98
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	22	358.03	366.98
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	23	358.03	366.98
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	24	358.03	366.98
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	25	359.46	368.45
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	26	366.62	375.79
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	27	375.22	384.60
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	28	389.18	398.91
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	29	400.64	410.65
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	30	406.36	416.52
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	31	414.96	425.33
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	32	423.55	434.14
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	33	428.92	439.64

62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	34	434.65	445.51
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	35	437.51	448.45
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	36	440.38	451.39
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	37	443.24	454.32
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	38	446.11	457.26
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	39	451.83	463.13
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	40	457.56	469.00
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	41	466.16	477.81
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	42	474.39	486.25
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	43	485.85	497.99
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	44	500.17	512.67
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	45	517.00	529.92
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	46	537.05	550.47
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	47	559.60	573.59
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	48	585.38	600.01
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	49	610.80	626.07
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	50	639.44	655.43
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	51	667.73	684.42
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	52	698.87	716.35
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	53	730.38	748.64
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	54	764.39	783.50
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	55	798.41	818.37
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	56	835.28	856.17
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	57	872.52	894.33
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	58	912.26	935.07
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	59	931.95	955.25
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	60	971.69	995.99
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	61	1006.06	1031.22
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	62	1028.62	1054.34
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	63	1056.90	1083.33
62560PA0010118	Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1074.09	1100.94
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	247.45	247.45
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	15	269.45	269.45
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	16	277.86	277.86
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	17	286.27	286.27
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	18	295.33	295.33
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	19	304.39	304.39
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	20	313.77	313.77
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	21	323.47	331.56
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	22	323.47	331.56
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	23	323.47	331.56
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	24	323.47	331.56
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	25	324.76	332.88
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	26	331.23	339.51
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	27	339.00	347.47
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	28	351.61	360.40
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	29	361.96	371.01
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	30	367.14	376.32
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	31	374.90	384.27

62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	32	382.67	392.23
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	33	387.52	397.20
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	34	392.69	402.51
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	35	395.28	405.16
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	36	397.87	407.81
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	37	400.46	410.47
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	38	403.04	413.12
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	39	408.22	418.42
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	40	413.39	423.73
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	41	421.16	431.69
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	42	428.60	439.31
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	43	438.95	449.92
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	44	451.89	463.18
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	45	467.09	478.77
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	46	485.21	497.34
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	47	505.58	518.22
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	48	528.87	542.10
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	49	551.84	565.64
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	50	577.72	592.16
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	51	603.27	618.35
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	52	631.41	647.20
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	53	659.88	676.38
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	54	690.61	707.87
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	55	721.34	739.37
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	56	754.66	773.52
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	57	788.30	808.00
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	58	824.20	844.81
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	59	841.99	863.04
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	60	877.90	899.85
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	61	908.95	931.67
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	62	929.33	952.56
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	63	954.88	978.76
62560PA0010120	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	970.41	994.67
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	0-14	254.26	254.26
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	15	276.86	276.86
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	16	285.51	285.51
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	17	294.15	294.15
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	18	303.45	303.45
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	19	312.76	312.76
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	20	322.40	322.40
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	21	332.37	340.68
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	22	332.37	340.68
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	23	332.37	340.68
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	24	332.37	340.68
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	25	333.70	342.04
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	26	340.35	348.86
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	27	348.32	357.03
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	28	361.29	370.32
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	29	371.92	381.22

62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	30	377.24	386.67
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	31	385.22	394.85
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	32	393.19	403.02
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	33	398.18	408.13
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	34	403.50	413.58
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	35	406.16	416.31
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	36	408.82	419.04
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	37	411.47	421.76
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	38	414.13	424.49
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	39	419.45	429.94
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	40	424.77	435.39
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	41	432.75	443.56
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	42	440.39	451.40
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	43	451.03	462.30
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	44	464.32	475.93
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	45	479.94	491.94
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	46	498.56	511.02
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	47	519.49	532.48
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	48	543.42	557.01
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	49	567.02	581.20
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	50	593.61	608.45
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	51	619.87	635.37
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	52	648.79	665.01
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	53	678.03	694.99
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	54	709.61	727.35
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	55	741.19	759.71
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	56	775.42	794.80
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	57	809.99	830.24
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	58	846.88	868.05
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	59	865.16	886.79
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	60	902.05	924.60
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	61	933.96	957.31
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	62	954.90	978.77
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	63	981.16	1005.69
62560PA0010120	Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	997.11	1022.04
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	217.57	217.57
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	15	236.91	236.91
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	16	244.31	244.31
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	17	251.70	251.70
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	18	259.67	259.67
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	19	267.63	267.63
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	20	275.88	275.88
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	21	284.41	291.52
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	22	284.41	291.52
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	23	284.41	291.52
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	24	284.41	291.52
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	25	285.55	292.69
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	26	291.24	298.52
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	27	298.06	305.51

62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	28	309.15	316.88
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	29	318.25	326.21
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	30	322.81	330.88
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	31	329.63	337.87
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	32	336.46	344.87
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	33	340.72	349.24
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	34	345.27	353.91
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	35	347.55	356.24
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	36	349.82	358.57
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	37	352.10	360.90
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	38	354.37	363.23
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	39	358.93	367.90
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	40	363.48	372.56
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	41	370.30	379.56
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	42	376.84	386.26
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	43	385.94	395.59
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	44	397.32	407.25
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	45	410.69	420.96
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	46	426.62	437.28
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	47	444.53	455.65
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	48	465.01	476.64
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	49	485.20	497.33
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	50	507.96	520.66
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	51	530.42	543.69
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	52	555.17	569.05
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	53	580.20	594.70
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	54	607.22	622.40
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	55	634.23	650.09
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	56	663.53	680.12
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	57	693.11	710.43
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	58	724.68	742.79
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	59	740.32	758.83
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	60	771.89	791.19
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	61	799.19	819.17
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	62	817.11	837.54
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	63	839.58	860.57
62560PA0010122	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	853.23	874.56
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	0-14	223.56	223.56
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	15	243.44	243.44
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	16	251.03	251.03
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	17	258.63	258.63
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	18	266.82	266.82
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	19	275.00	275.00
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	20	283.47	283.47
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	21	292.24	299.55
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	22	292.24	299.55
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	23	292.24	299.55
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	24	292.24	299.55
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	25	293.41	300.74

62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	26	299.25	306.74
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	27	306.27	313.92
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	28	317.66	325.61
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	29	327.02	335.19
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	30	331.69	339.98
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	31	338.71	347.17
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	32	345.72	354.36
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	33	350.10	358.86
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	34	354.78	363.65
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	35	357.12	366.05
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	36	359.46	368.44
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	37	361.79	370.84
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	38	364.13	373.23
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	39	368.81	378.03
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	40	373.48	382.82
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	41	380.50	390.01
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	42	387.22	396.90
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	43	396.57	406.48
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	44	408.26	418.47
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	45	421.99	432.54
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	46	438.36	449.32
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	47	456.77	468.19
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	48	477.81	489.76
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	49	498.56	511.03
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	50	521.94	534.99
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	51	545.03	558.65
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	52	570.45	584.71
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	53	596.17	611.07
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	54	623.93	639.53
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	55	651.70	667.99
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	56	681.80	698.84
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	57	712.19	729.99
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	58	744.63	763.24
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	59	760.70	779.72
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	60	793.14	812.97
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	61	821.19	841.72
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	62	839.61	860.60
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	63	862.69	884.26
62560PA0010122	Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	876.72	898.64
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	204.70	204.70
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	15	222.89	222.89
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	16	229.85	229.85
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	17	236.81	236.81
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	18	244.30	244.30
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	19	251.79	251.79
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	20	259.55	259.55
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	21	267.58	274.27
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	22	267.58	274.27
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	23	267.58	274.27

62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	24	267.58	274.27
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	25	268.65	275.37
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	26	274.00	280.85
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	27	280.42	287.43
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	28	290.86	298.13
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	29	299.42	306.91
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	30	303.70	311.30
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	31	310.13	317.88
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	32	316.55	324.46
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	33	320.56	328.57
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	34	324.84	332.96
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	35	326.98	335.16
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	36	329.12	337.35
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	37	331.26	339.55
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	38	333.40	341.74
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	39	337.69	346.13
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	40	341.97	350.52
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	41	348.39	357.10
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	42	354.54	363.41
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	43	363.11	372.18
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	44	373.81	383.15
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	45	386.39	396.05
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	46	401.37	411.40
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	47	418.23	428.68
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	48	437.49	448.43
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	49	456.49	467.90
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	50	477.90	489.85
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	51	499.04	511.51
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	52	522.32	535.37
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	53	545.86	559.51
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	54	571.28	585.57
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	55	596.70	611.62
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	56	624.26	639.87
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	57	652.09	668.39
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	58	681.79	698.84
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	59	696.51	713.92
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	60	726.21	744.37
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	61	751.90	770.70
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	62	768.76	787.98
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	63	789.90	809.64
62560PA0010123	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	802.74	822.81
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	0-14	210.33	210.33
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	15	229.03	229.03
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	16	236.17	236.17
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	17	243.32	243.32
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	18	251.02	251.02
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	19	258.72	258.72
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	20	266.69	266.69
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	21	274.94	281.81

62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	22	274.94	281.81
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	23	274.94	281.81
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	24	274.94	281.81
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	25	276.04	282.94
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	26	281.54	288.58
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	27	288.14	295.34
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	28	298.86	306.33
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	29	307.66	315.35
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	30	312.06	319.86
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	31	318.66	326.62
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	32	325.25	333.39
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	33	329.38	337.61
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	34	333.78	342.12
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	35	335.98	344.38
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	36	338.18	346.63
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	37	340.38	348.89
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	38	342.58	351.14
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	39	346.97	355.65
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	40	351.37	360.16
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	41	357.97	366.92
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	42	364.30	373.40
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	43	373.09	382.42
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	44	384.09	393.69
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	45	397.01	406.94
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	46	412.41	422.72
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	47	429.73	440.47
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	48	449.53	460.77
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	49	469.05	480.77
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	50	491.04	503.32
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	51	512.76	525.58
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	52	536.68	550.10
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	53	560.88	574.90
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	54	587.00	601.67
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	55	613.12	628.44
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	56	641.44	657.47
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	57	670.03	686.78
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	58	700.55	718.06
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	59	715.67	733.56
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	60	746.19	764.84
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	61	772.58	791.90
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	62	789.90	809.65
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	63	811.62	831.91
62560PA0010123	Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	824.82	845.44
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	266.53	266.53
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	15	290.22	290.22
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	16	299.28	299.28
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	17	308.33	308.33
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	18	318.09	318.09
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	19	327.84	327.84

62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	20	337.95	337.95
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	21	348.40	357.11
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	22	348.40	357.11
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	23	348.40	357.11
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	24	348.40	357.11
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	25	349.79	358.54
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	26	356.76	365.68
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	27	365.12	374.25
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	28	378.71	388.18
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	29	389.86	399.61
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	30	395.43	405.32
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	31	403.80	413.89
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	32	412.16	422.46
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	33	417.38	427.82
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	34	422.96	433.53
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	35	425.74	436.39
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	36	428.53	439.25
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	37	431.32	442.10
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	38	434.11	444.96
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	39	439.68	450.67
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	40	445.26	456.39
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	41	453.62	464.96
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	42	461.63	473.17
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	43	472.78	484.60
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	44	486.71	498.88
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	45	503.09	515.67
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	46	522.60	535.67
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	47	544.55	558.16
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	48	569.63	583.87
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	49	594.37	609.23
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	50	622.24	637.80
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	51	649.77	666.01
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	52	680.08	697.08
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	53	710.74	728.50
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	54	743.83	762.43
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	55	776.93	796.36
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	56	812.82	833.14
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	57	849.05	870.28
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	58	887.72	909.92
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	59	906.89	929.56
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	60	945.56	969.20
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	61	979.00	1003.48
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	62	1000.95	1025.98
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	63	1028.48	1054.19
62560PA0010124	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1045.20	1071.33
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	0-14	273.86	273.86
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	15	298.21	298.21
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	16	307.51	307.51
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	17	316.82	316.82

62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	18	326.84	326.84
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	19	336.87	336.87
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	20	347.25	347.25
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	21	357.99	366.94
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	22	357.99	366.94
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	23	357.99	366.94
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	24	357.99	366.94
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	25	359.42	368.41
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	26	366.58	375.75
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	27	375.17	384.55
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	28	389.14	398.86
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	29	400.59	410.61
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	30	406.32	416.48
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	31	414.91	425.28
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	32	423.50	434.09
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	33	428.87	439.59
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	34	434.60	445.46
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	35	437.46	448.40
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	36	440.33	451.34
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	37	443.19	454.27
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	38	446.06	457.21
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	39	451.78	463.08
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	40	457.51	468.95
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	41	466.10	477.76
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	42	474.34	486.20
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	43	485.79	497.94
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	44	500.11	512.61
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	45	516.94	529.86
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	46	536.99	550.41
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	47	559.54	573.53
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	48	585.31	599.95
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	49	610.73	626.00
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	50	639.37	655.35
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	51	667.65	684.34
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	52	698.80	716.27
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	53	730.30	748.56
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	54	764.31	783.42
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	55	798.32	818.28
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	56	835.19	856.07
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	57	872.42	894.23
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	58	912.16	934.96
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	59	931.85	955.14
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	60	971.58	995.87
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	61	1005.95	1031.10
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	62	1028.51	1054.22
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	63	1056.79	1083.21
62560PA0010124	Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1073.97	1100.82
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	358.78	358.78
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	15	390.67	390.67

62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	16	402.86	402.86
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	17	415.06	415.06
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	18	428.19	428.19
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	19	441.32	441.32
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	20	454.92	454.92
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	21	468.99	480.71
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	22	468.99	480.71
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	23	468.99	480.71
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	24	468.99	480.71
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	25	470.87	482.64
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	26	480.25	492.25
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	27	491.50	503.79
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	28	509.79	522.54
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	29	524.80	537.92
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	30	532.30	545.61
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	31	543.56	557.15
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	32	554.82	568.69
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	33	561.85	575.90
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	34	569.35	583.59
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	35	573.11	587.43
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	36	576.86	591.28
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	37	580.61	595.12
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	38	584.36	598.97
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	39	591.87	606.66
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	40	599.37	614.35
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	41	610.62	625.89
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	42	621.41	636.95
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	43	636.42	652.33
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	44	655.18	671.56
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	45	677.22	694.15
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	46	703.49	721.07
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	47	733.03	751.36
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	48	766.80	785.97
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	49	800.10	820.10
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	50	837.62	858.56
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	51	874.67	896.53
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	52	915.47	938.36
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	53	956.74	980.66
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	54	1001.29	1026.33
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	55	1045.85	1071.99
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	56	1094.15	1121.51
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	57	1142.93	1171.50
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	58	1194.99	1224.86
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	59	1220.78	1251.30
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	60	1272.84	1304.66
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	61	1317.86	1350.81
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	62	1347.41	1381.09
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	63	1384.46	1419.07
62560PA0010125	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1406.97	1442.14

62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	0-14	368.65	368.65
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	15	401.42	401.42
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	16	413.95	413.95
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	17	426.48	426.48
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	18	439.97	439.97
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	19	453.47	453.47
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	20	467.44	467.44
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	21	481.90	493.95
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	22	481.90	493.95
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	23	481.90	493.95
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	24	481.90	493.95
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	25	483.83	495.92
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	26	493.47	505.80
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	27	505.03	517.66
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	28	523.83	536.92
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	29	539.25	552.73
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	30	546.96	560.63
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	31	558.52	572.49
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	32	570.09	584.34
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	33	577.32	591.75
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	34	585.03	599.65
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	35	588.88	603.60
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	36	592.74	607.56
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	37	596.59	611.51
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	38	600.45	615.46
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	39	608.16	623.36
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	40	615.87	631.26
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	41	627.43	643.12
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	42	638.52	654.48
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	43	653.94	670.29
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	44	673.21	690.04
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	45	695.86	713.26
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	46	722.85	740.92
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	47	753.21	772.04
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	48	787.91	807.60
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	49	822.12	842.67
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	50	860.67	882.19
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	51	898.74	921.21
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	52	940.67	964.19
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	53	983.08	1007.65
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	54	1028.86	1054.58
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	55	1074.64	1101.50
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	56	1124.27	1152.38
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	57	1174.39	1203.75
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	58	1227.88	1258.58
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	59	1254.39	1285.75
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	60	1307.88	1340.57
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	61	1354.14	1387.99
62560PA0010125	Rating Area 5	Tobacco User/Non-Tobacco User	62	1384.50	1419.11

62560PA0010125 Rating Area 5	Tobacco User/Non-Tobacco User	63	1422.57	1458.13
62560PA0010125 Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1445.70	1481.84

Exhibit 1: Derivation of Projection Period MLR

Projected Paid Claims	Projected Net Amount of Risk Adjustment	Projected Quality Improvement Initiatives	Projected Exchange User Fees	Projected Taxes & Fees	Projected Premium	Loss Ratio
\$ 15,896,410	\$ (602,994)	\$ 421,378	\$ 465,842	\$ 77,037	\$ 20,494,640	84.8%

Exhibit 2: Actual vs Pricing MLR & Member Months

Calendar Year	MLR		Member Months	
	Actual	Pricing	Actual	Pricing
2019	108.9%	86.8%	36	36
2020	68.3%	87.9%	36	36
2021	101.0%	82.8%	34,728	41,460

Exhibit 3: Derivation of Age Calibration Factor

Age Band	Age Factor	Current/Projected Enrollment Distribution
0-14	0.765	6.18%
15	0.833	0.52%
16	0.859	0.50%
17	0.885	0.58%
18	0.913	0.57%
19	0.941	0.75%
20	0.970	0.86%
21	1.000	0.90%
22	1.000	0.94%
23	1.000	0.83%
24	1.000	0.85%
25	1.004	0.81%
26	1.024	1.10%
27	1.048	1.26%
28	1.087	1.31%
29	1.119	1.27%
30	1.135	1.37%
31	1.159	1.38%
32	1.183	1.49%
33	1.198	1.51%
34	1.214	1.55%
35	1.222	1.50%
36	1.230	1.45%
37	1.238	1.44%
38	1.246	1.57%
39	1.262	1.42%
40	1.278	1.48%
41	1.302	1.46%
42	1.325	1.54%
43	1.357	1.53%
44	1.397	1.51%
45	1.444	1.55%
46	1.500	1.44%
47	1.563	1.54%
48	1.635	1.59%
49	1.706	1.63%
50	1.786	1.75%
51	1.865	1.92%
52	1.952	2.15%
53	2.040	2.16%
54	2.135	2.24%
55	2.230	2.38%
56	2.333	2.62%
57	2.437	2.86%
58	2.548	3.24%
59	2.603	3.44%
60	2.714	3.69%
61	2.810	4.35%
62	2.873	5.28%
63	2.952	6.11%
64 and over	3.000	6.64%

Initial Age Factor:	1.88774
3-child cap Adjustment:	0.99699
Final Age Factor used:	1.88206

Exhibit 4: Derivation of Geographical Calibration Factor

Rating Areas	Portion of Projected Enrl	Proposed Factor
1	48.09%	0.966
2	0.00%	1.165
3	0.00%	1.280
4	0.00%	0.966
5	51.91%	0.993
6	0.00%	1.431
7	0.00%	1.455
9	0.00%	1.274

Calibration Factor
0.980

Exhibit 5: Derivation of Annual Trend

Entire ACA-compliant Individual Block

Base Data

Inpatient Hospital

YEAR	ALLOWED AMT	ADMIT CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2019	\$167,542,399	9,049	1,561,967	\$18,515.02	69.5
2022	\$127,217,639	5,950	1,245,888	\$21,381.12	57.3

Outpatient Hospital

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2019	\$211,485,560	527,069	1,561,967	\$401.25	4,049.3
2022	\$176,886,593	426,412	1,245,888	\$414.83	4,107.1

Professional

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION ADMIT PTPM
2019	\$140,269,799	1,016,813	1,561,967	\$137.95	7,811.8
2022	\$120,609,957	857,760	1,245,888	\$140.61	8,261.7

Other Medical

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2019	\$100,460,483	88,462	1,561,967	\$1,135.63	679.6
2022	\$101,267,914	70,095	1,245,888	\$1,444.72	675.1

Prescription Drugs

YEAR	ALLOWED AMT	Prescriptions	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2019	\$155,609,709	1,583,425	1,561,967	\$98.27	12,164.9
2022	\$171,516,844	1,269,172	1,245,888	\$135.14	12,224.3

Pediatric Dental

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2019	\$1,155,856		1,561,967		
2022	\$1,230,756		1,245,888		

Pediatric Vision

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2019	\$422,008		1,561,967		
2022	\$367,440		1,245,888		

2019 to 2022 Trend Output (3 Year Compounded)

Service Category	2021 Allowed Amt	Weight	Cost	Utilization	Overall
Inpatient Hospital	\$127,217,639	18.2%	4.91%	-6.24%	-1.63%
Outpatient Hospital	\$176,886,593	25.3%	1.12%	0.47%	1.59%
Professional	\$120,609,957	17.3%	0.64%	1.88%	2.53%
Other Medical	\$102,866,110	14.7%	8.35%	-0.22%	8.12%
Capitation	\$0	0.0%	0.00%	0.00%	0.00%
Prescription Drugs	\$171,516,844	24.5%	11.20%	0.16%	11.38%

Historical Annual Trend **4.64%**

Exhibit 7: Derivation of 3-child Cap Adjustment Factor

Total Members	Dependents under the age of 21 in excess of 3 per contract	% of Total	3-child Cap Adjustment
100,652	303	0.3010%	0.99699

UPMC February 2023 Individual Population including all legal entities

Exhibit 8: Derivation of Change in Network Factor

Legal Entity	Average Network Factor	Induced Demand Factor	Average Geographic Factor	Normalization Factor	Normalized Product / Service Area / Induced Demand Factor	Portion of Projected Enrollment	Change in Network Factor
Health Coverage	1.155	1.073	0.980	1.104	1.340	2.2%	1.340
Health Options	0.842	1.074	0.994	1.104	0.993	97.8%	0.993

Normalization Check:

1.00

Exhibit 9: Derivation of Change in Other Factor

Legal Entity	Unadjusted Projected Allowed EHB Claims PMPM	Change in Morbidity	Change in Network	Total Adjusted Projected Allowed EHB Claims PMPM	Projected Paid to Allowed Ratio	Projected Incurred EHB Claims PMPM	Projected Savings from Initiatives	Projected Cost Impact from Act 1 of 2023	Adjusted Projected Incurred EHB Claims PMPM	Adjusted Projected Allowed EHB Claims PMPM	Portion of Projected Enrollment
Health Coverage	\$ 614.43	1.015	1.340	\$ 835.52	0.777	\$ 648.94	\$ 15.61	\$ 1.14	\$ 634.47	\$ 816.89	2.2%
Health Options	\$ 614.43	1.015	0.993	\$ 619.17	0.779	\$ 482.11	\$ 15.61	\$ 1.14	\$ 467.64	\$ 600.59	97.8%

Average \$ 623.90 \$ 485.76 \$ 471.29 \$ 605.32

Change in Benefits/Other Factor to Apply: **0.9702**

Exhibit 10: Derivation of Projected Risk Adjustment PMPM

Step 1:

2022 Estimate

Market / Legal Entity	Transfer	Member Months	Transfer PMPM
IND / UPMC Health Options, Inc.	-\$30,227,206	1,218,438	-\$24.81
IND / UPMC Health Coverage, Inc.	\$496,079	27,450	\$18.07
Total	-\$29,731,127	1,245,888	-\$23.86

Step 2:

2022 Estimate Adjusted for 2024 HHS Risk Model

Market	Transfer PMPM
IND	-\$22.79

Change in Transfer PMPM:

Step 3:

2024 Projection As Implemented in Filing

Market	Transfer PMPM
IND	-\$21.80

The 2024 projected risk adjustment transfer PMPM (**-\$21.80**; cell C29) used in the filing reflects the 2024 projected RADV adjustment PMPM (\$0.99; cell C36)

Projected RADV Adjustment PMPM:

Exhibit 10a: HHS Risk Model Adjustment Support

HHS Risk Model Adjustment

Market	Total Change in Transfer PMPM
IND	\$1.07

The 2024 HHS Risk Model Adjustment (**\$1.07**; cell C7) reflects two components: 1. The change in transfer PMPM from using 2022 final HHS Risk Model to 2024 proposed HHS Risk Model (\$1.29; cell E19), sourced from Wakely 202212 run results; 2. The change in transfer PMPM that reflects the 2024 proposed to final model change using Wakely's 2024 Final HHS Risk Weight conversion tool (-\$0.21; cell E21).

Wakely 202212 Run Version	Transfer	Member Months	Transfer PMPM
2022 HHS Risk Model	-\$15,388,491	1,259,581	-\$12.22
2024 Proposed HHS Risk Model	-\$13,767,156	1,259,581	-\$10.93

Change in Transfer PMPM (2022 Final to 2024 Proposed):

Change in Transfer PMPM (2024 Proposed to 2024 Final):

Exhibit 10b: Projected RADV Adjustment Support

Taken from Exhibit 10 Step 2:

2022 Estimate Adjusted for 2024 HHS Risk Model

Market	Transfer PMPM
IND	-\$22.79

Projected RADV Risk Transfer Adjustment Calculation (based on the same calculation included in Wakely's 2021 RADV IVA Study):

Market / Legal Entity	IND / UPMC Health Options, Inc.	IND / UPMC Health Coverage, Inc.		
Issuer Error Rate	(0.0050)	(0.0034)		
Market Error Rate	(0.0029)	(0.0029)		
	pre-RADV Results	post-RADV Adjusted	pre-RADV Results	post-RADV Adjusted
Statewide Average RA Adjusted Premium	\$507.99	\$507.99	\$507.99	\$507.99
Billable Member Months	1,310,376	1,310,376	27,660	27,660
Relative Risk	0.9551	0.9571	0.9551	0.9555
Transfer	-\$29,864,366	-\$28,544,688	-\$630,390	-\$624,807
Projected RADV Adjustment	\$1,319,679		\$5,584	

Projected RADV Adjustment PMPM:

Market / Legal Entity	Proj. RADV Adjustment	Member Months	Proj. RADV PMPM
IND / Total	\$1,325,262	1,338,036	\$0.99

Exhibit 11: Projected Administrative Expense Load Development

General and Claims PMPM	Agent/Broker Fees and Commissions PMPM	Quality Improvement Initiatives PMPM	Projected Required Revenue PMPM	General and Claims % of Projected Revenue	Agent/Broker Fees and Commissions % of Projected Revenue	Quality Improvement Initiatives % of Projected Revenue	Admin Expense % of Projected Revenue
\$ 61.15	\$ 6.16	\$ 15.23	\$ 738.15	8.3%	0.8%	2.1%	11.18%

Exhibit 12: Derivation of Projected Taxes and Fees

Risk Adjustment User Fee PMPM	PCORI Fee PMPM	PA Premium Tax (if applicable) PMPM	Federal Income Tax PMPM	Total Taxes & Fees PMPM	2023 Projected Lives (from Table 10)	2023 Projected Member Months	Projected Taxes & Fees
\$0.21	\$0.25	\$0.00	\$2.33	\$2.79	2,305	27,660	\$77,037

Projected Taxes & Fees from Exhibit 1:	\$77,037
Check:	TRUE

Exhibit 14: Derivation of Change in Geographic Rating Factors

Rating Area	Current Factor	Proposed Factor
Rating Area 1	0.966	0.966
Rating Area 2		
Rating Area 3		
Rating Area 4		
Rating Area 5	0.966	0.993
Rating Area 6		
Rating Area 7		
Rating Area 9		

	Rating Area 5	Total Market	Differential
Claims PMPM	\$ 690.05	\$ 605.24	1.140
Avg PLRS	1.714	1.573	1.090
Total			1.046

Exhibit 15: Exchange User Fee Development

Exchange Status	Current/Projected Premium Distribution	Exchange Fee	Weighted Exch Fee
Off Exchange	23.9%	0.0%	0.0%
On Exchange	76.1%	3.0%	2.3%
Total	100.0%		2.3%

Projected Required Revenue PMPM:	\$ 738.15
Projected Paid Exchange User Fees PMPM:	\$ 16.84

Exhibit 16: CY2020-2022 Monthly Incurred Claims Detail

MONTH	MBR_MTH	MED		PHARMACY	
		NET CLAIMS (PMPM)	ALLOWED CLAIMS (PMPM)	NET CLAIMS (PMPM)	ALLOWED CLAIMS (PMPM)
2022/12	98,383	\$ 433.85	\$ 363.88	\$ 144.20	\$ 117.87
2022/11	99,496	\$ 433.16	\$ 360.83	\$ 144.43	\$ 117.34
2022/10	100,633	\$ 408.07	\$ 334.45	\$ 144.63	\$ 116.39
2022/09	101,562	\$ 416.31	\$ 341.60	\$ 139.90	\$ 109.94
2022/08	102,626	\$ 432.65	\$ 351.07	\$ 151.98	\$ 117.89
2022/07	103,413	\$ 390.46	\$ 316.18	\$ 132.48	\$ 102.11
2022/06	104,272	\$ 415.20	\$ 332.79	\$ 140.95	\$ 121.21
2022/05	105,201	\$ 410.33	\$ 327.54	\$ 132.12	\$ 112.34
2022/04	106,352	\$ 410.14	\$ 321.35	\$ 129.96	\$ 109.55
2022/03	107,494	\$ 461.43	\$ 358.06	\$ 139.04	\$ 116.31
2022/02	108,647	\$ 406.89	\$ 307.40	\$ 123.37	\$ 100.85
2022/01	107,778	\$ 427.60	\$ 312.04	\$ 129.17	\$ 101.89
2021/12	110,466	\$ 467.27	\$ 408.81	\$ 134.25	\$ 117.13
2021/11	111,744	\$ 448.48	\$ 387.70	\$ 130.56	\$ 112.91
2021/10	112,682	\$ 446.97	\$ 379.07	\$ 121.27	\$ 103.74
2021/09	113,009	\$ 466.67	\$ 397.86	\$ 121.77	\$ 103.86
2021/08	112,719	\$ 439.29	\$ 369.95	\$ 125.03	\$ 105.78
2021/07	112,089	\$ 417.22	\$ 345.53	\$ 122.20	\$ 102.53
2021/06	111,684	\$ 439.73	\$ 363.36	\$ 127.33	\$ 106.48
2021/05	111,466	\$ 437.07	\$ 360.56	\$ 118.04	\$ 97.34
2021/04	111,285	\$ 435.68	\$ 355.95	\$ 125.32	\$ 102.49
2021/03	111,437	\$ 461.18	\$ 367.78	\$ 129.74	\$ 104.44
2021/02	112,298	\$ 396.77	\$ 313.22	\$ 109.54	\$ 86.78
2021/01	111,636	\$ 393.16	\$ 300.19	\$ 111.10	\$ 84.54
2020/12	113,750	\$ 431.02	\$ 377.93	\$ 119.41	\$ 104.13
2020/11	115,695	\$ 405.83	\$ 350.85	\$ 107.16	\$ 92.27
2020/10	117,060	\$ 421.60	\$ 358.29	\$ 112.49	\$ 96.43
2020/09	118,124	\$ 409.71	\$ 346.15	\$ 111.56	\$ 95.07
2020/08	119,004	\$ 412.08	\$ 349.51	\$ 111.55	\$ 94.10
2020/07	119,817	\$ 415.03	\$ 348.93	\$ 110.25	\$ 92.73
2020/06	120,437	\$ 398.82	\$ 330.60	\$ 111.97	\$ 92.87
2020/05	121,291	\$ 306.64	\$ 252.09	\$ 103.23	\$ 85.43
2020/04	122,296	\$ 248.65	\$ 214.61	\$ 107.76	\$ 88.59
2020/03	122,901	\$ 349.46	\$ 277.99	\$ 118.66	\$ 94.27
2020/02	124,445	\$ 388.90	\$ 298.14	\$ 100.05	\$ 77.59
2020/01	126,196	\$ 401.37	\$ 289.40	\$ 106.99	\$ 80.32

2024 Business Rules Template v13.0

All fields with an asterisk (*) are required. To validate the template, press Validate button or Ctrl + Shift + I. To finalize the template, press Finalize button or Ctrl + Shift + F.

Enter the Issuer Rule on the first row (no Product ID or Plan ID).

For each Product rule, enter only the Product ID and the business rules that differ from the Issuer Rule.

For each Plan rule, enter only the Plan ID and the business rules that differ from the Product or Issuer Rule.

Issuer level rule will apply only to plan type indicated in cell C10.

HIOS Issuer ID* 62560
Medical, Dental, or Both?* Medical

Product ID	Plan ID (Standard Component)	Medical or Dental Rule?*	What is the maximum number of rated underage dependents on this policy?	Is there a maximum age for a dependent?	How is age determined for rating and eligibility purposes?	How is tobacco status determined for subscribers and dependents?	What relationships between primary and dependent are allowed, and is the dependent required to live in the same household as the primary subscriber?
		Medical	3	25	Age on effective date	6	Self, Yes; Spouse, No; Child, No; Stepson or Stepdaughter, No; Life Partner, No; Foster Child, No; Ward, No

Standard Questions – IND Health Coverage

1. Membership

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

For renewing plans, the basis of our projected membership for plan year 2024 is our current membership as of 2/1/2023. Because we expect the market to expand in 2024 as a direct result of the end of Medicaid eligibility redeterminations, we included approximately 4,700 additional enrollees in our projections across all subsidiaries, and allocated this enrollment across plans in our portfolio proportionally to the enrollment as of 2/1/2023. For new plans to be introduced in 2024, we relied on internal modelling and colleagues familiar with market dynamics to estimate enrollment. Please refer to the projected membership in Table 10 of the PAAM Exhibits.

2. Experience Period Claims:

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

[REDACTED]

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

We can confirm that all non-EHB claims have been removed from the experience period claims.

- 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?

[REDACTED]

[REDACTED]

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.

We can confirm that Tables 2-4 of the PAAM Exhibits are not adjusting for COVID. We are not including a COVID adjustment factor in our filing, thus no associated factor is reflected in Table 5 of the PAAM Exhibits.

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

The COVID adjustment factor in the filing is 1.0 (no adjustment).

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.

N/A

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

N/A

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.

UPMC is filing a 1.5% surplus and risk load for the 2024 rating period, including consideration of the 21% federal income tax rate. The surplus and tax are both reflected in Table 6, and cell C57 does not reflect any additional adjustments.

- 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.

We can confirm that the Risk Adjustment User Fee of \$0.21 PMPM is consistent with HHS Final Notice of Benefit and Payment Parameters 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.



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).

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

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

Unlike the AV Calculator (AVC), which relies on a national data set, UPMC models actuarial value of benefit based on its own allowed claims experience. The UPMC benefit valuation calculator is updated annually and is used to determine the actuarial value of a plan design by readjudicating an experience period claim by claim to calculate the plan liability for each policyholder. The ratio of the total plan liability to the total allowed claims is the plan AV. This simulation ensures that UPMC has the ability to calculate factors that account for embedded versus aggregate deductibles or out-of-pocket maximums, and that claim types align with our schedule of benefits.

Table 10 of the PAAM Exhibits illustrates the AV results from both the AVC and our pricing process for each plan.

7. Expanded Bronze Plans:

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

All Bronze Plans offered under UPMC Health Coverage (Issuer ID 62560) in the Individual market are within standard Bronze de minimus range.

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 see Supporting Exhibit 14 for support for the proposed change in geographic rating factors.

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

Please see Supporting Exhibit 16 for support for the proposed change in network rating factors.

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.

[REDACTED]

[REDACTED]

- 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?

A morbidity factor of 1.015 is being applied to the 2024 ACA Individual index rate. When

[REDACTED]

[REDACTED]

- 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%.

For Plan Year 2024, UPMC Health Plan will apply cost share for COVID-19 diagnostic and antibody testing and prescription antiviral and monoclonal antibody treatment in accordance with the cost share set forth in a member's plan documents. COVID-19 vaccines will continue to be covered at no-cost to members as a preventive service. Over-the-counter COVID-19 tests will no longer be eligible for reimbursement under a member's medical benefit.

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	Pricing	Actual	Pricing
2019	108.9%	86.8%	36	36
2020	68.3%	87.9%	36	36
2021	101.0%	82.8%	34,728	41,460

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

Because the policies issued in the Individual market align with the calendar year, these MLRs are fairly comparable. MLR differences observed by plan year can be attributed to claims experience emerging differently than expected as well as Risk Adjustment transfers generally materializing less favorable than projected at the time of pricing.

The actual and pricing member months are comparable. Variances are generally driven by relative rate position among other carriers, which are not known at the time of rating, as well as any holistic changes to the market.

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

UPMC does not expect to pay MLR rebates for the 3-year period above.

11. Plan of Withdrawal:

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

UPMC does not intend to discontinue the issuance of any plan, product, or book of business at the end of the policy term for current policyholders without offering alternative coverage.

Objection Letter Status:Data Request Sent

Objection Letter Date:06/09/2023

Respond By Date:06/21/2023

Submitted Date:06/09/2023 07:11 AM

Dear Matthew Killam,

Introduction:

June 9, 2023

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

Please note, each response to a Department data call must contain a cover letter that details the changes made to the Actuarial Memorandums and PA Actuarial Memorandum Exhibits and the reasons why the changes were made.

1. Please provide additional qualitative support pertaining to the drivers of the rate increase as discussed on page 2 of the Actuarial Memorandum.

The most substantial drivers of rate increase include annual increases in the cost of medical care, the impact of the 1332 reinsurance program's change in coinsurance, and administrative cost increases. Quantitative detail is included in Question 11 below.

2. As it pertains to the impact of COVID-19 in the rate development:

a. Please provide justification for not applying a COVID-19 adjustment in the development of the 2024 index rate. State whether any analysis has been performed to compare COVID-related claims in 2022 versus expected 2024.

Based on the information UPMC Health Plan has at the time of filing, we do not expect a material difference in COVID-related medical expense between 2022 experience and 2024 projected.

b. How are the costs of over-the-counter COVID-19 tests and COVID-19 treatments being considered with regard to coverage in the base period and coverage in the projection period due to the end of the Public Health Emergency?

UPMC Health Plan covered COVID-19 diagnostic testing, antibody testing, and monoclonal antibody treatment at no cost share in the experience period. As noted in the Standard Questions submitted with the rate filing on 5/17/23, for Plan Year 2024, UPMC Health Plan will apply cost share for COVID-19 diagnostic and antibody testing and prescription antiviral and monoclonal antibody treatment in accordance with the cost share set forth in a member's plan documents. Over-the-counter COVID-19 tests will no longer be eligible for reimbursement under a member's medical benefit.

3. What is driving the -8.7% change in the "Pricing AV" plan-level component from 2023 to 2024 as presented in Table 8 of the PAAM Exhibits?

The primary driver of the -8.7% change in "Pricing AV" in Table 8 of the PAAM exhibits is the Average Non-Funding CSR adjustment in 2023. Per the instructions, the 2023 average AV in Table 9, which the Table 8 calculation references, includes the product of average 2023 AV and Non-Funding of CSR Adjustment. However, the 2024 value in Table 9 does not include the 2024 Non-Funding of CSR Adjustment.

Benefit changes for PY 2024 also contribute to the change for the ACA Individual market, but to a lesser extent.

4. Provide justification on development of the projection period retention expenses (general administrative expense, claims, broker fees and commissions, quality improvement non-benefit expense, and profit & contingency) and drivers of the year over year changes as presented in Tables 8 and 9 of the PAAM Exhibits.

Projected general administrative expense year over year changes are driven by increased overall allocated administrative expenses across UPMC Health Plan due to increases in the cost of day-to-day administrative practices (e.g., Salaries, Marketing, etc.). Brokers fees / commission and quality improvement non-benefit expense projections assume a consistent allocation based on percentage of revenue.

The following questions are related to the data presented in the 'UPMC Health Coverage Inc. Individual Supporting Exhibits UPMC-133641900' file:

5. What are the drivers of the variance between the actual vs. pricing MLRs as indicated in Exhibit 2? How are any of these factors considered in the 2024 pricing and if not, why?

Prior to 2021, this entity had very little membership, which caused the actual MLRs to be volatile. With increased enrollment, the MLRs for Health Coverage have since become more stable. For 2021, we believe that there was an abundance of pent-up demand due to the COVID-19 pandemic causing members to push back elective surgeries and other services. The COVID-19 pandemic most heavily affected our claims experience during 2020 and 2021, which confounds prospective trend analyses that rely on those time periods. Our 2024 rate buildup does not use 2020 or 2021 experience to avoid the uncertainty surrounding those experience periods.

Variance between past actual and pricing MLRs is not explicitly considered in the rate development. The experience data, trend, and pricing assumptions used in the 2024 rate development result in the projected loss ratio of 85.3% as noted in the state memorandum.

6. Please provide quantitative and qualitative support for the \$15.61 of projected savings from initiatives in Exhibit 9. Please describe each unique initiative and the development of its PMPM impact.

The projected savings is outlined in greater detail in the table below. Initiatives are typically itemized and quantified by UPMC Health Plan's Department of Health Economics. This department is comprised of actuaries and analysts who work closely with clinical and contracting staff to identify, measure, and project savings associated with efforts to reduce medical and pharmacy expenditure without adversely impacting member care or experiences. Examples of such efforts include contracting changes not captured in historical trend, intervention services to connect members with the appropriate level of care, or improving accuracy and efficiencies in coding and billing practices. The cost impacts are quantified as per member per month savings for 2024 relative to the 2022 calendar year experience period.

Initiative	PMPM Impact	Brief Description
SaveOn Pharmacy	\$ 2.44	Cost share program that offers copay assistance and reduces member and health plan liability for specialty drugs.
Pharmacy Narrow Network	\$ 2.11	Pharmacy network for ACA products is limited to cost efficient pharmacies.
Additional Pharmacy Initiatives	\$ 6.46	PBM contract updates, UPMC facility pharmacy efficiencies.
Contracting / Care Model Efficiencies	\$ 2.78	Reflects initiatives aimed to reduce spending through contracting reductions or other care model efficiencies by implementing measures like reductions in post-acute care or readmissions, DME and medical supply rate reductions, or favorably negotiated lab contracts.
Reduce Inappropriate Services	\$ 1.82	Reflects initiatives aimed to reduce the utilization of inappropriate or unnecessary services by implementing measures to enhance PCP coordination of care, care management benefit scaling, and changes to payment integrity and coding practices.
Total	\$ 15.61	

7. The following questions relate to the development of the projected risk adjustment transfer amount as shown in Exhibit 10.

a. Please provide a numerical development of the 2022 estimated transfer amount in Excel and with working formulas. Please include an explanation of each of the components of the risk transfer calculation (e.g., PLRS, ARF, etc.).

We rely on the 2022 estimated risk adjustment transfer amount provided by the Department on May 8th as the experience period assumption, for which the components of the risk transfer are not provided.

b. Explanation of how changes in demographic, plan (i.e., metal), and geographic mix are accounted for between the base period and projection period. These adjustments should be consistent with the adjustments used in the development of the index rate.

We do not anticipate any significant changes in demographic, plan, or geographic mix across our ACA individual market. This is consistent with the development of the index rate.

c. Demonstration of how the statewide average premium is expected to change between the base and projection periods, and support for the assumption used.

In applying adjustments to the 2022 estimated transfer to project the 2024 transfer amount, we did not include an adjustment for change in the statewide average premium. The statewide average premium has fluctuated substantially in prior years, including decreases in some years,

as shown in the table below. Given both the uncertainty in projecting statewide average premium as well as the overall volatility of risk adjustment transfers from year to year, we did not feel that assuming a non-zero change to the statewide average premium would materially improve the accuracy of our 2024 risk adjustment projection.

Year / Market	IND
2015	\$347.47
2016	\$379.91
2017	\$518.61
2018	\$565.66
2019	\$538.19
2020	\$531.19
2021	\$514.75
2022	\$509.34

8. Please provide an exhibit that includes the following information for the company's 'entire ACA compliant block' (consistent with population supporting the data presented in Exhibit 5 by incurred month for the time period of January 2020 through December 2022, and paid through the latest month the company has available:

- a. Actual net claim PMPMs, split by medical and pharmacy
- b. Actual allowed claim PMPMs, split by medical and pharmacy
- c. Member months

Please see Exhibit 16 of the updated Supporting Exhibits for claims and membership detail broken out by incurred month for January 2020 to December 2022.

d. For each of calendar years 2020, 2021, and 2022 please provide the company's PLRS, ARF, and AV consistent with the factors utilized in the risk adjustment transfer calculation for each respective plan year. For 2022, please provide the company's best estimate of these items based on the available claims and membership and most recent risk adjustment reporting tools (e.g., May RATEE file).

Year	Market	PLRS	ARF	AV
2020	IND	0.1580	1.3340	0.6000
2021	CAT	1.5653	1.0030	0.5700
	IND	1.6645	2.0571	0.7268
2022	CAT	1.3678	1.0251	0.5700
	IND	1.8141	2.0375	0.7403

9. Please provide additional quantitative support and a qualitative explanation for the 1.015 morbidity adjustment due to the end of the Public Health Emergency and disenrollment of individuals from Medicaid. Particularly, we would like to understand how the relative morbidity factor (1.546) and the selected morbidity (2.500) was developed in supporting Exhibit 13.

The relativity factor of 1.546 is calculated based on studying historical claims costs for members who left the ACA commercial risk pool during the Public Health Emergency (PHE) and enrolled in UPMC Medicaid plans, relative to the costs for members who remained in the ACA risk pool. Under several comparisons, across multiple time periods and after considering differences in age, benefit level, and product, members who exited the ACA market for Medicaid exhibited significantly higher costs. The majority of these members were still enrolled in UPMC Medicaid products as of the start of Medicaid redeterminations on April 1, 2023.

The calculated morbidity factor of 1.023, shown as 2.3% in Exhibit 13, is the weighted average of 1.546 and 1.000, the relative morbidity factors for the two cohorts described above, weighted by proportion of projected enrollment in each cohort.

The implemented morbidity of 1.5% was chosen based on professional judgement in consideration of the following uncertainties that may mitigate the calculated impact:

- UPMC Health Plan has no line of sight into the relative risk of members who will leave Medicaid from other insurers to enroll in UPMC ACA products.**
- While the results of the claims study were conclusive, the study is based on claims data that occurred three to five years ago.**
- The uncertain timing of redeterminations may mean that the process is not complete as of 12/31/23, resulting in partial year 2024 impacts for any members who have yet to undergo redetermination by that date.**

10. Please explain how projected enrollment was developed and provide support for anticipated differences between the population underlying the experience period and the projection period. Discuss how you anticipate UPMC's market share to change resulting from potential Medicaid redeterminations.

The differences between the population underlying the experience period and the population expected in the projection period is additional enrollment from potential Medicaid redeterminations.

We anticipate additional enrollment in 2024 as a direct result of Medicaid eligibility redeterminations. By using industry resources produced by organizations such as the US Government Accountability Office, the Kaiser Family Foundation, and the American Academy of Actuaries, as well as examining our current membership distribution across various lines of business, we are projecting a modest percentage of the disenrolled Medicaid population to enroll in our ACA Individual market plans. We do not anticipate UPMC market share to change as a result of potential Medicaid redeterminations.

11. 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?

As displayed in Table 8 of the PAAM Exhibits, the impacts of major drivers of the rate increase are as follows:

Trend -2.7%

Morbidity 1.3%

Risk Adjustment 1.1%

Reinsurance 5.3%

Pricing AV -3.1%

Administrative Expenses 2.9%

Profit 1.6%

To calculate the impact of annual changes in Pricing AV above, we compared against the average AV for 2023 rather than the average 2023 AV multiplied by the average 2023 CSR defunding load.

12. Extrapolating from 2022 and prior to 2024, what changes does UPMC expect to see when it comes to

unit cost, provider mix, services mix, advances in technology, provider contracting arrangements, etc. that would not be captured solely with a historical viewpoint? How are these changes reflected in the current trend development?

We've taken into consideration each of these factors with our trend development and understand the importance of assessing potential changes in each. When developing our trend for 2024 using historical data, we felt that potential changes to each of these factors had been appropriately reflected in the data and that no changes to the trend were required.

As noted in Question 6 above, any adjustment due to changes in care delivery that are not reflected in trend are captured in the Change in Other factor in Table 5 of the PA Actuarial Memorandum Exhibits.

13. 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.

Confirming that we have tested all templates to ensure that the rates match.

14. It appears the SaveOnSP program will lower plan costs overall. Please provide a detailed quantitative exhibit showing the favorable adjustments to the rate development as a result of this program. If there are no favorable adjustments applied to the rate development as a result of this program, please provide a detailed qualitative narrative that explains why that is reasonable.

The SaveOn pharmacy program does lower health plan costs, and that savings is reflected in 2024 rating in the form of lower premium through the initiatives adjustment in the rate buildup. The relative impact of the program between the 2022 experience period and the 2024 projected period is captured as part of Exhibit 9. Of the \$15.61 PMPM initiatives savings outlined in Exhibit 9, the SaveOn program accounts for \$2.44 PMPM.

15. Page 8 of the Department's guidance states the following: "Consistent with the guidance provided during the Plan Year 2023 annual rate review cycle, the Department does not anticipate redactions other than the following items: 1. AV screenshots 2. Statements specifying a company's anticipated risk level in relation to the state average risk level (e.g., the underlined portion could be redacted in the following statement: "we expect the risk level of membership to be X% higher/lower than the state average risk level"). 3. Opining actuary's name. 4. Specific provider contracting. 5. Commission schedules. 6. Column C through E in Tabs "II.a. Reis Table - Exp" and II.b. Reis Table - Proj"" The Department noticed that UPMC has redacted items

in their Public PDF that are not listed above. Please remove these redactions and provide confirmation that only the items listed above are redacted.

We have removed redactions that are not conclusively aligned with the Department's guidance.

16. In reviewing premium rates for individual coverage in rating areas 1 and 5, the Department is concerned with the differential for Crawford county in rating area 1 and Clearfield county in rating area 5. UPMC's Health Coverage legal entity only offers products in these two counties. The rest of the counties in rating areas 1 and 5 are covered by UPMC Health Options. Our review indicates that the same products are offered by both legal entities which, combined, completely cover both rating areas. Based on our review, the Department has identified that the premium rates for the products offered by UPMC Health Coverage in Crawford and Clearfield counties are 6.2% – 6.9% higher (with one exception) than in the counties with the same products offered by UPMC Health Options. We have put together a premium comparison for both Crawford and Clearfield counties using a county in close proximity in each respective rating area, which is included in the attached Excel file for your reference. Given this information, the Department would appreciate answers to the following questions:

a. What is the actuarial justification for the 6.2% – 6.9% increase in rates in Crawford and Clearfield counties?

In 2019, prior to application of the identified rate differential, the MLR in Crawford and Clearfield counties was an average of 11.9% above the MLR for the parent Rating Areas (1 and 5). Beginning in PY2021, we adopted our current approach to phase in an appropriate rate differential that would address the actuarial insufficiency of the historical rates in these counties, while still permitting us to continue offering products in these counties at a market competitive rate.

The differential of 6.2% - 6.9% is actuarially justified in that it addresses the outlier negative financial performance observed in Crawford and Clearfield counties as the Health Coverage book of business relative to other counties in the combined UPMC Health Coverage / Health Options service area. As illustrated in Table 3, the financial performance of Crawford County has improved relative to Rating Area 1, while Clearfield County is still under-performing relative to Rating Area 5 even following implementation of the current rating differential.

b. Was any weight given to the actual experience in these counties?

Yes. As mentioned in Question A, the differential of 6.2% - 6.9% reflects the combined, risk adjusted experience of Crawford and Clearfield counties. Because UPMC Health Coverage only offers Marketplace plans in these two counties, they represent the entire book of business for the licensed entity. Additionally, membership for Crawford and Clearfield counties has been below 2,000 every year from 2019-2022. We have considered the argument for a county-specific differential given the lack of uniformity in financial impact from the current, uniform differential, but we do not believe that trying to pull additional credibility from the limited population data is likely to produce a more accurate projection today. While still speculative at this time, we are also hopeful that presently ongoing provider network negotiations will result in improved contracting terms that, in future years, will provide credible support for the reduction or elimination of the current rate differential (based on improved network financial performance in one or both counties).

c. Since only Crawford and Clearfield counties are subject to this higher premium, please explain how this rate is not unfairly discriminatory toward the consumers in Clearfield and Crawford counties.

We believe that the differential performance in these counties is attributable to provider unit cost, which in this case is a function of limited provider availability and unwillingness of key providers in each county to contract at a rate that is more consistent with other rate structures across the combined UPMC Health Plan service area. Although there is a negative performance impact resulting from overall limitations on provider reimbursement strategies in each county, as well as a correspondingly lower willingness of providers in each of these counties to actively engage in value-enhancing utilization management behaviors, our rate development in these counties has focused on (a) removing morbidity from the development of the rate differential and (b) applying the differential in a phased-in approach with the goal of delivering financial performance in each county that is comparable to other counties in their respective rating areas. As to the removal of morbidity, our MLR analysis during development of the differential used risk-adjusted values. To further promote alignment of our methodology and limit the basis of the current differential, Health Coverage also employed the same manual rate, geographic factor, and plan-level factor applied to each Rating Area by Health Options. As such, only the Product/Service Area factor was used to establish the rate differential and, as noted in Table 3, ongoing performance suggests that the factor is working as intended to bring the financial performance of these counties more in line with their Rating Area. As noted in Question B, we are engaged in ongoing provider contract negotiations and are hopeful that overall financial network performance in these counties will improve in future years – because the terms of these

anticipated agreements are still under development, they are not incorporated into our filed rates at this time.

d. Please explain why the premium is only 2.8% higher for the plan named "UPMC Advantage Silver \$2,600/\$50," compared to the 6.2% – 6.9% higher premium for other plans.

The driver of the Health Coverage UPMC Advantage Silver \$2,600/\$50 Standard Network plan having a smaller differential to the Health Options UPMC Advantage Silver \$2,600/\$50 Premium Network offered in surrounding areas is a higher rate increase for the Premium Network plan relative to the Standard Network plan. Upon review, the Health Options UPMC Advantage Silver \$2,600/\$50 Premium Network, HIOS SCID 16322PA0040048, was priced using a \$7,550 MOOP rather than the \$9,450 MOOP indicated in the plan and benefits template. We propose revising the pricing of this plan to reflect the \$9,450 MOOP for consistency with the plan and benefits template. This would result in a Pricing AV of 0.745 rather than 0.759 as initially filed (AVs not including IDF). The area-weighted increase that Table 11 will show for this plan would be 15.3% instead of 19.0%, and the 2.8% premium differential between the two referenced plans will increase to 6.0%. We propose revising this with the July 14 submission and have also audited the pricing of all other plans to ensure that the benefits used in pricing are consistent with the benefits reflected in the plan and benefits template.

e. Please fill out Tables 1 – 4 in the attached Excel file and return the completed file to the Department as part of your response to this objection letter.

Tables 1 – 4 have been completed and uploaded to the Supporting Documentation tab in SERFF, "Responses to objections due 06-21-2023" section.

17. The following was stated in an email from Matthew Killam on June 2, 2023: "With respect to reported membership from adjacent counties, we suspect that there may be some reporting anomalies primarily due to zip codes that span multiple counties and a possible dataset mismatch between member-reported residence vs. derived county of residence within our data warehouse. We have initiated an internal effort to better understand areas of possible discrepancy and, where possible, improve residency reporting for member records that may be impacted by these types of issues. Because this product is and will be offered only in Clearfield and Crawford counties, we believe that the content of the filing is correct as submitted."

a. Please provide a few examples where zip codes span multiple counties that have reported membership in this filing.

A non-exhaustive sample of cross-county ZIP codes includes:

16401, 16412, 16438, 16441

b. Please provide an update on UPMC's internal effort to improve reporting and amend the filing accordingly.

UPMC Actuarial is working closely with marketplace operational staff and IT to determine the true residence of members coded as living outside of Crawford and Clearfield counties and possible sources of discrepancy. We will amend this reporting for the July 14 submission and provide the Department with updates accordingly.

Please be advised that there may be additional questions based on the responses to the above.

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

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

Sincerely,

Valerie Romig

Actuary

Bureau of Life, Accident and Health Insurance

Objection Letter Status: Data Request Sent

Objection Letter Date: 07/07/2023

Respond By Date: 07/14/2023

Submitted Date: 07/07/2023 07:45 AM

Dear Matthew Killam,

Introduction:

July 7, 2023

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

Please note, each response to a Department data call must contain a cover letter that details the changes made to the Actuarial Memorandums and PA Actuarial Memorandum Exhibits and the reasons why the changes were made.

1. In follow-up to the response to question 3 of the prior round of objection questions, please provide the quantitative impact on the -8.7% change in "Pricing AV" for each of the following:

- a. Non-Funding CSR Adjustment included in 2023 but not in 2024
- b. Benefit changes for Plan Year 2024

a. -5.6%

b. -1.5%

Note: per the initial round filing guidelines, 2024 rates were calculated under the assumption that there would be no reinsurance recoveries which also contributed to the Pricing AV change.

2. The following questions relate to risk adjustment:

a. The response to question 7c of the prior round confirms that changes in the statewide average premium were not considered when projecting the 2024 risk transfer amount. Do you expect the statewide average premium to be significantly impacted by the end of the Public Health Emergency (PHE)?

UPMC does not anticipate the statewide average premium in either Individual or Small Group market to be significantly impacted by the end of the PHE.

b. Given a 1.5% morbidity load is being applied, please describe how the current risk transfer assumption (i.e., \$21.76 payable to the program) considers this assumption of a less healthy population in 2024.

We expect all carriers will be impacted similarly by the end of the PHE, and therefore Risk Adjustment would not materially change as a result.

c. Does the actual risk transfer experience from CMS' BY 2022 Final Risk Adjustment Report differ from the 2022 initial risk adjustment transfer estimated by the Department on May 8th? Please explain how the company expects to address any material differences in this experience period assumption in the projection period assumption.

The actual 2022 risk adjustment transfer as published in the CMS PY 2022 Final Risk Adjustment Report, rounded to the nearest dollar, is identical to the initial transfer estimated by the Department on May 8.

3. As it pertains to the 1.5% PHE morbidity adjustment found in Exhibit 13 and the objection response to question 9 of the prior round of objection questions:

a. Please provide a quantitative demonstration in Excel showing how the relative morbidity factor of 1.546 was developed. With this exhibit, please include an explanation for how historical claim costs for members who enrolled in UPMC Medicaid plans were normalized for utilization and unit cost differences relative to the ACA market.

We have updated Supporting Exhibit 13 to reflect the derivation of our relative morbidity factor.

We employed a retrospective approach in our analysis, focusing on UPMC members and experience in our ACA block historically, from a pre-pandemic perspective. Our approach sampled historical experience from the following cohorts:

- 1. Individual ACA members who would later migrate to our Medicaid block during the PHE**
- 2. Individual ACA block in total**

We then developed a ratio comparing the PHE cohort vs the ACA total cohort to arrive at our relative morbidity factor. This ratio demonstrates a higher average morbidity for members who exited our Individual ACA market for UPMC Medicaid coverage.

Our analysis does not focus on Medicaid experience for members after having exited our ACA block for reasons outlined in the objection question above, namely the uncertainty around adequately valuing differences in utilization and unit cost between ACA and Medicaid markets. By focusing solely on historical disenrollee claims experience from the same market (ACA-only), we were able to circumvent normalization for differences in fee schedule/utilization/unit cost between markets, thus giving us stronger confidence that our morbidity factor is indicative of the relative cost of members likely to migrate back to ACA as part of the PHE unwinding period.

We also considered differences in age, benefit level, and product between the two cohorts listed above to ensure our results were not skewed for reasons outside of morbidity.

b. Has any emerging 2023 data analysis been done with respect to new UPMC ACA enrollees due to the ending of the Public Health Emergency? If so, please explain how this was considered in the development of the morbidity adjustment (e.g., enrollment projections, risk profile relative to existing block, etc.).

Due to the timing of the beginning of Medicaid redeterminations, no analysis had been done on new UPMC ACA enrollees in 2023 due to the end of the PHE.

4. Worksheet 2 of the URRT shows an average rate increase of 11.78% whereas the PA actuarial memorandum and PAAM exhibits cite an average rate change of 10.0%. Please explain why these two percentages are different and revise as necessary to ensure consistency between the filing materials.

In accordance with PID final rate filing guidance, the memorandum references Table 11 increases, and the increase in the URRT align with Table 11 increases by plan. The aggregate increase in Table 11 does not match the aggregate increase in the URRT due to each template having slightly different aggregation methods to calculate total rate increase. The increase in Table 8 of the PAAM exhibits references the Table 10 increase.

5. Please provide support for cell C21 (\$1.07) and cell C36 (\$1.03) in Exhibit 10.

Please see Exhibits 10a and 10b of the updated Supporting Exhibits for further support on the requested cell values in Exhibit 10. Note that we updated the projected RADV adjustment PMPM from the initial submission to appropriately compare with the projected transfer PMPM. Cell C36 in Exhibit 10 is now updated to (\$0.99).

6. Regarding the response to Question 14, please provide a detailed quantitative exhibit that shows how the \$2.44 PMPM was calculated. Please indicate whether this amount is reflective of the entire savings or if UPMC is holding some back as margin.

The development of the \$2.44 PMPM as net projected incremental savings for the SaveOn Pharmacy initiative is illustrated in the table below.

	ACA SG	ACA IND	
2022 Gross Savings PMPM	\$6.23	\$5.24	(1)
<u>2023 Gross Projected Savings PMPM</u>	<u>\$9.41</u>	<u>\$8.50</u>	(2)
Gross Projected Incremental Savings PMPM	\$3.18	\$3.25	(3) = (2) - (1)
<u>Vendor Savings Share</u>	<u>\$0.80</u>	<u>\$0.81</u>	(4)
Net Projected Incremental Savings PMPM	\$2.39	\$2.44	(5) = (3) - (4)

The SaveOn Pharmacy initiative was effective beginning in July 2022. The 2022 Gross Savings PMPM was provided by SaveOnSP for the period between July 2022 and December 2022. The 2023 Gross Projected Savings PMPM was derived based on emerging savings provided by SaveOnSP through February 2023 and anticipated program utilization through December 2023. The Net Projected Incremental Savings PMPM reflects the change in savings between 2022 and 2023, adjusted for the assumed savings shared with the program vendor.

Given that there are no anticipated changes to program efficiencies or utilization between 2023 and 2024, no incremental savings are expected in 2024. The assumptions used to project the 2023 Gross Projected Savings PMPM reflect implicit conservatism to account for unexpected variability from historical results.

7. Please confirm that the pricing of all plans is aligned with the benefits reflected in the Plan & Benefits Template (PBT) or amend the filing accordingly.

As discussed, the pricing of all plans is now aligned with the benefits reflected in the PBT as of the July 14, 2023 submission.

8. Please fill out Tables 1 – 4 in the attached Excel file and return the completed file to the Department as part of your response to this objection letter.

Enclosed.

9. 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 can confirm that we have updated the 2022 experience period risk adjustment amount in Table 2 to reflect the final risk adjustment results from CMS. The result of this change was a restatement of \$0.02 from the estimated experience period risk adjustment transfer in the initial filing.

10. 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.

The projected risk adjustment transfer amount illustrated in Table 5 has been modified relative to the initial filing on May 17, 2023 as a result of refining the projected RADV assumption as noted in Question 5. The modification to the projected risk adjustment assumption is not due to the final CMS transfer amounts being published.

11. Please update your filing to reflect the reinsurance coinsurance percentage of 50 percent.

We can confirm that this filing has been updated to reflect the 50% reinsurance coinsurance parameter.

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

We can confirm that we have tested to ensure that the rates match.

13. 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.

- 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. URRT
- 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).

We can confirm that all items are included with our responses, including the cover letter outlining changes made as requested. Additionally, all material changes within each memorandum relative to the initial submission on May 17, 2023 have been authored in red text.

Please be advised that there may be additional questions based on the responses to the above.

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

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

Sincerely,

Valerie Romig
Actuary
Bureau of Life, Accident and Health Insurance

Objection Letter Status: Data Request Sent

Objection Letter Date: 07/19/2023

Respond By Date: 07/21/2023

Submitted Date: 07/19/2023 12:25 PM

Dear Matthew Killam,

Introduction:

July 19, 2023

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

Please note, each response to a Department data call must contain a cover letter that details the changes made to the Actuarial Memorandums and PA Actuarial Memorandum Exhibits and the reasons why the changes were made.

1. Page 2 of the Actuarial Memorandum still states that changes to the state reinsurance program for the individual health market are driving the rate increase in 2024. Please confirm that this is still accurate after the inclusion of reinsurance in the revised projections. If this is not still a key driver of the rate increase, or additional factors are significantly impacting the rate change per question 11 of the objection response dated 7/14/2023, please revise the Actuarial Memorandum as needed.

The Actuarial Memorandum has been revised, and the revision is now included in SERFF.

2. Please clarify how many member months are required in the experience data, or the manual data, to be granted full credibility in the rate development.

As noted in the State Memorandum, full credibility is assigned to the combined risk pool of the entire market (e.g. Small Group, Individual) without using a rigorous mathematical model. The total experience

member months of 1,245,888 for the combined market satisfies all industry standard credibility thresholds. The selected approach follows the guidance of ASOP 25, while not subjecting any one legal entity to incidental entity-specific variance in year-to-year required rate increase.

3. Please confirm whether the company is expanding, reducing, or maintaining its 2023 service area in 2024.

The company is maintaining its service area by county, with no changes between 2023 and 2024.

In terms of network offerings within each county, Centre county will now be part of "IND Premium East" service area in 2024, but was in "IND Premium West" service area in 2023.

4. Please provide quantitative support for the development of the network factors as presented in the 'V Consumer Factors' tab in the PAAM Exhibits file.

UPMC Health Coverage, Inc., only offers products on the Standard network. Therefore, the network factor presented in the 'V Consumer Factors' tab in the PAAM Exhibits file is equal to 1.0.

5. The pricing AV is listed as 0.837 in 2023 and 0.777 in 2024 per Table 9 of the PAAM Exhibits. What is driving the change in the pricing AV year over year?

The primary driver of the change in the pricing AV in Table 9 of the PAAM exhibits is the Average Non-Funding CSR adjustment. Per the instructions, the 2023 average AV in Table 9 includes the product of average 2023 AV and Non-Funding of CSR Adjustment, while the 2024 value in Table 9 does not account for the 2024 Non-Funding of CSR Adjustment.

Benefit changes also contribute to the change for the ACA Individual market, but to a lesser extent, as noted in response to Question 1b of the Data Request we received on 7/7/23.

6. Administrative expense is reported as 8.97% in 2023 and 11.18% in 2024 in

Table 9 of the PAAM Exhibits. What is driving the change of administrative expense year over year?

The primary drivers of the change in administrative expense year over year are increases in general operating expense, and an increase in expected provider risk sharing and quality payment liability.

7. The data request cover letter dated 7/14/23 states that the above captioned filing has been updated to reflect:

a. An assumed 1332 State Reinsurance program with parameters of \$60,000 attachment point, \$100,000 cap, and 50% coinsurance (a maximum of \$20,000 recovery) per enrollee.

b. Revised rate increases as a result of

i. updating the 1332 Reinsurance program assumption as described above

ii. including the claim impact of Act 1 of 2023 with an effective date of January 1, 2024.

c. Final 2022 risk adjustment as published in the CMS PY 2022 Final Risk Adjustment Report released on June 30, 2023.

d. A revision to the RADV component of the projected period Risk Adjustment assumption.

e. Updated allocation of members by county of residence in the Plan and Summary Design template to reflect the county of residence a member selected during enrollment, for instances where members live in cross-county ZIP codes.

Please quantify the impact each of the above had on the -3.73% rate change from 11.34% to 7.61%. Please include the impact each of the above had on a PMPM basis.

See below for approximate derivation of revised rate change, totaling -3.74% and -\$6.58 PMPM as defined in Table 11:

1332 Reinsurance Program: -4.27%, -\$7.52 PMPM

Act 1 of 2023: +0.65%, +\$1.14 PMPM

Final 2022 Risk Adjustment: no impact

**Revision of RADV Component of Projected Risk Adjustment: +0.01%,
+\$0.02 PMPM**

**Updated Allocation of Members by County of Residence: -0.13%, -\$0.22
PMPM**

**Note that the Final 2022 Risk Adjustment transfers did not have an impact
on our revised rates and are only used for reporting purposes in Table 2.**

Please be advised that there may be additional questions based on the responses to the above.

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

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

Sincerely,

Valerie Romig
Actuary
Bureau of Life, Accident and Health Insurance

Conclusion:

Sincerely, Valerie Romig

Objection Letter Status: Data Request Sent

Objection Letter Date: 08/01/2023

Respond By Date: 08/07/2023

Submitted Date: 08/01/2023 10:18 AM

Dear Matthew Killam,

Introduction:

August 1, 2023

The Pennsylvania Insurance Department has received and conducted a review of the above captioned filing. In order to complete the review, we are requesting the following information.

Please note, each response to a Department data call must contain a cover letter that details the changes made to the Actuarial Memorandums and PA Actuarial Memorandum Exhibits and the reasons why the changes were made.

1. In UPMC's response to number 6 of the objection letter responded to on July 14, 2023, UPMC stated that "the assumptions used to project the 2023 Gross Projected Savings PMPM reflect implicit conservatism to account for unexpected variability from historical results." Please quantify the amount of implicit conservatism accounted for.

In the development of the savings estimate for the SaveOn Pharmacy initiative, we relied on several assumptions that produced a savings estimate within a range of reasonable outcomes based on projected experience as of February 2023. While that estimate included some implicit conservatism, recent savings results provided by SaveOnSP through June 2023 support the original assumptions used in the calculation of the savings estimates applied in the premium development.

Please be advised that there may be additional questions based on the responses to the above.

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

Sincerely,

Valerie Romig

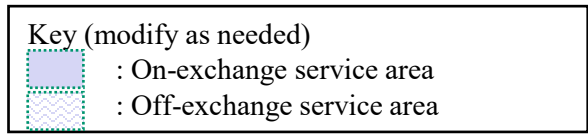
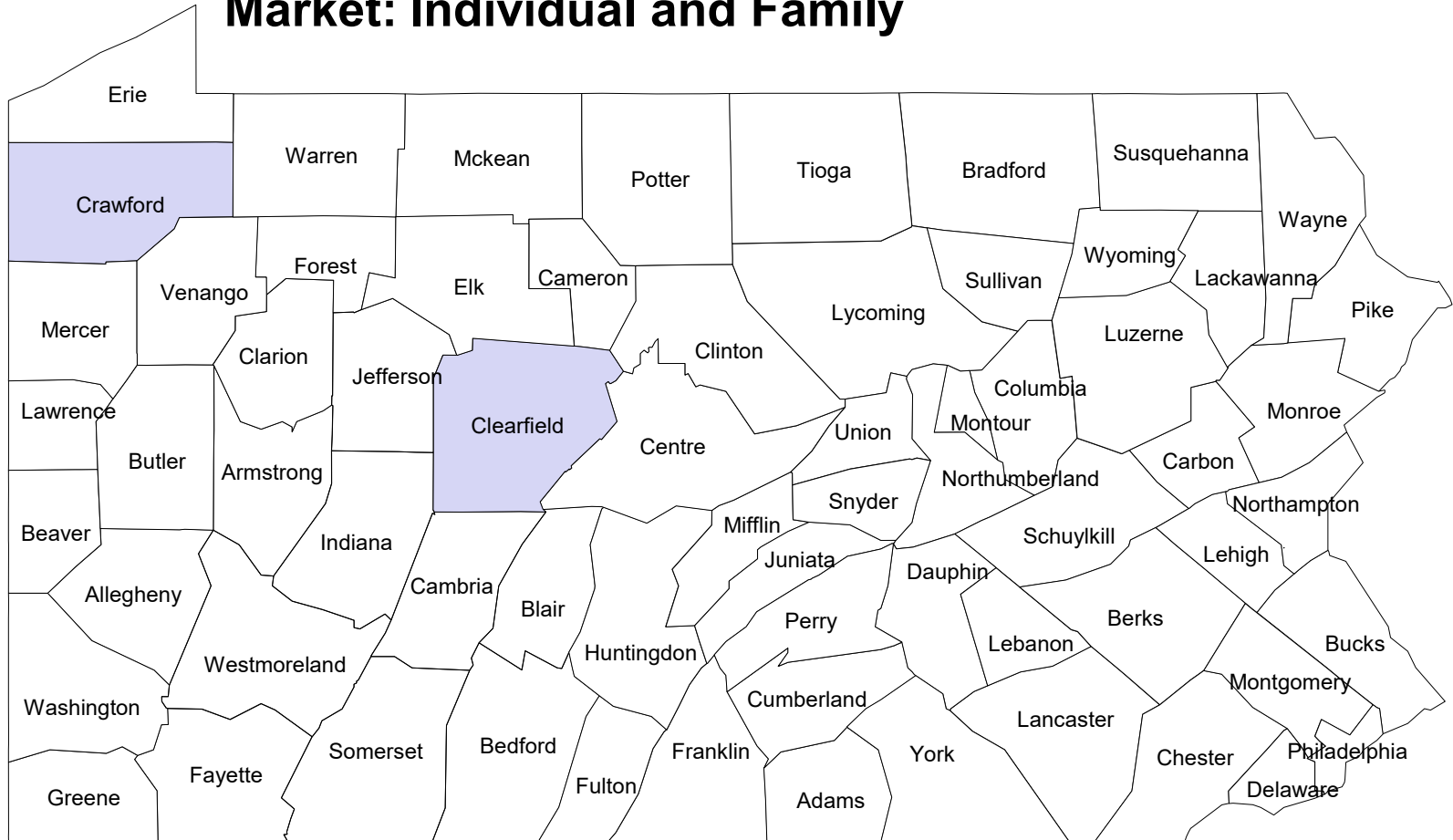
Actuary

Bureau of Life, Accident and Health Insurance

2023 Service Area

Issuer: UPMC Health Coverage

Market: Individual and Family



2024 Service Area

Issuer: UPMC Health Coverage

Market: Individual and Family

