

SERFF Tracking #:	INAC-131478475	State Tracking #:	INAC-131478475	Company Tracking #:	QCC INDIV 1-1-2019
State:	Pennsylvania	Filing Company:	QCC Insurance Company		
TOI/Sub-TOI:	H15I Individual Health - Hospital/Surgical/Medical Expense/H15I.001 Health - Hospital/Surgical/Medical Expense				
Product Name:	QCC Individual PPO effective 1-1-2019				
Project Name/Number:	/				

Supporting Document Schedules

Satisfied - Item:	ACA Public Rate Filing PDF
Comments:	
Attachment(s):	Public Rate Filing QCC Consumer 08022018 (pages 1 to 58).pdf Public Rate Filing QCC Consumer 08022018 (pages 59 to 90).pdf
Item Status:	
Status Date:	



May 21, 2018

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

SUBMITTED VIA SERFF

**RE: QCC Insurance Company, Inc.
Individual PPO Rate Filing effective 1/1/2019
INAC-131478475**

Dear Ms. Gray:

Attached is a revised 2019 annual rate filing for PPO plans of QCC Insurance Company, Inc. (QCC) in the Individual (non-group) marketplace in the Commonwealth of Pennsylvania. Rates for new and renewing plans are being filed and satisfy market reform requirements of the Affordable Care Act (ACA).

This rate filing includes rates for these plans and specifies compliance with rating requirements of the ACA. The enclosed is for rating periods effective from January 1, 2019 through December 31, 2019.

Per the guidance provided by the Pennsylvania Insurance Department, we adjusted the morbidity factor in consideration of changes to the individual mandate penalties. We also included a component for the impact of non-payment of CSR costs per our discussions with the department.

The proposed rates represent a 6.7% increase over the previously approved 2018 rates. This increase incorporates the state's estimate for the value of the individual mandate and CSRs not being funded. If we were to use our own estimates for these factors, the resulting increase would be 3.3%. We intend to request the ability to refile using our own factors to achieve the lower increase.

Information for the Pennsylvania Bulletin:

1.	Company Name and NAIC Number:	QCC Insurance Company, Inc. 93688
2.	Market	Individual
3.	On or Off Exchange	On and Off
4.	Effective Date of Coverage	January 1, 2019
5.	Average Rate Change Requested	6.7%
6.	Range of Rate Changes Requested	1.9% - 14.6%
7.	Total Annual Revenue Generated from the Proposed Rate Change	\$24,141,219
8.	Products	PPO
9.	Rating Areas and Change from 2018	Rating Area 8; No Change
10.	Metal Levels and Catastrophic Plans	Platinum, Gold, Silver, Bronze
11.	Current covered lives and policyholders as of February 1, 2018	41,006 lives 27,993 policyholders
12.	Number of plans offered in 2019 and change from 2018	16 plans in 2019; 16 plans in 2018
13.	Corresponding contract form number, SERFF, and binder numbers	INLG-131482535, INLG-131482578, INLG-131482560 See appendix for form numbers
14.	HIOS Issuer ID # and submission tracking Number	HIOS Issuer ID # 31609; Tracking # 31609-1224466136146424835

Please contact [REDACTED] at [REDACTED] or [REDACTED] with any questions regarding this filing.

Sincerely,

[REDACTED]

Director and Actuary, Commercial Pricing

cc: [REDACTED]
[REDACTED]



APPENDIX

Form Numbers

08535.ON Rev. 1.19, 08535-OC.ON Rev. 1.19, 08535.OFF Rev. 1.19, 08535-OC.OFF
Rev. 1.19, 08537.ON.PDEN Rev. 1.19, 08537-OC.ON.PDEN Rev. 1.19, 08537.OFF Rev.
1.19, 08537-OC.OFF Rev. 1.19, 08537.ON.PDEN.HSA Rev. 1.19, 08537-
OC.ON.PDEN.HSA Rev. 1.19, 08537.OFF.PDEN.HSA Rev 1.19, 08537-
OC.OFF.PDEN.HSA Rev 1.19, PREV/SCH-II Rev. 1.19

Rate Change Summary

QCC Insurance Company, Inc. – Individual Plans

Rate request filing ID INAC-131478475 - This document is prepared by the insurance company submitting the rate filing as a consumer tool to help explain the rate filing. It is not intended to describe or include all factors or information considered in the review process. For more information, see the filing at <http://www.insurance.pa.gov/Consumers/ACARelatedFilings/>

Overview

Initial requested average rate change:	-6.4% ¹
Revised requested average rate change:	N/A ¹
Range of requested rate change:	-8.3% - -3.4%
Effective date:	January 1, 2019
People impacted:	41,006
Available in:	Area 8

Key information

Jan. 2017-Dec. 2017 financial experience

Premiums	\$383,683,425
Claims	\$308,586,596
Administrative expenses	\$33,867,160
Taxes & fees	\$23,107,930
Company made (after taxes)	\$18,121,739

How it plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2019:

Claims:	85%
Administrative:	11%
Taxes & fees:	2%
Profit:	2%

The company expects its annual medical costs to increase **8.8%**.

Explanation of requested rate change

QCC Insurance Company ("QCC") is revising premium rates for the Pennsylvania Consumer ACA compliant products, effective from January 1, 2019.

About 41,000 members will be affected.

Changes in Medical Service Costs:

Premium rates for health care insurance are increasing as the cost of health care service rise. Health care service costs increase as health care providers increase their fees, members use more health care services and supplies, and the types of health care services and supplies change, among other factors.

Changes include updates for individual mandate penalties and non-funding of CSR payments as well as

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

changes in health care service costs driven by changes to health care provider fees.

Financial Experience of the Product:

QCC is required by federal law to pay out a minimum of 80% percent of premium dollars for medical claims—this is referred to as the minimum Medical Loss Ratio (MLR). The rate action proposed in this filing is expected to achieve a Medical Loss Ratio of greater than 80% using the state's estimates for individual mandate and CSRs not being funded.

Changes in Benefits:

Some plan benefits are mandated by federal and state law. Benefit changes for some plans were also made. All changes in benefits are in compliance with the uniform modifications rules stipulated by the Federal government.

Administrative Costs:

In addition, the Affordable Care Act (ACA) imposes taxes and other levies.



August 7, 2018

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

SUBMITTED VIA SERFF

**RE: QCC Insurance Company, Inc.
Individual PPO Rate Filing effective 1/1/2019 - REVISED
INAC-131478475**

Dear Ms. Gray:

Attached is a revised 2019 annual rate filing for PPO plans of QCC Insurance Company, Inc. (QCC) in the Individual (non-group) marketplace in the Commonwealth of Pennsylvania. Rates for new and renewing plans are being filed and satisfy market reform requirements of the Affordable Care Act (ACA).

This rate filing includes rates for these plans and specifies compliance with rating requirements of the ACA. The enclosed is for rating periods effective from January 1, 2019 through December 31, 2019.

Per the guidance provided by the Pennsylvania Insurance Department, we adjusted the morbidity factor in consideration of changes to the individual mandate penalties. We also included a component for the impact of non-payment of CSR costs per our discussions with the department.

The proposed rates represent a -6.4% increase over the previously approved 2018 rates. This increase incorporates the state's estimate for the value of the individual mandate and CSRs not being funded.



Information for the Pennsylvania Bulletin:

1. Company Name and NAIC Number:	QCC Insurance Company, Inc. 93688
2. Market	Individual
3. On or Off Exchange	On and Off
4. Effective Date of Coverage	January 1, 2019
5. Average Rate Change Requested	-6.4%
6. Range of Rate Changes Requested	-8.3% to -3.4%
7. Total Annual Revenue Generated from the Proposed Rate Change	-\$23,421,870
8. Products	PPO
9. Rating Areas and Change from 2018	Rating Area 8; No Change
10. Metal Levels and Catastrophic Plans	Platinum, Gold, Silver, Bronze
11. Current covered lives and policyholders as of February 1, 2018	41,006 lives 27,993 policyholders
12. Number of plans offered in 2019 and change from 2018	16 plans in 2019; 16 plans in 2018
13. Corresponding contract form number, SERFF, and binder numbers	INLG-131482535, INLG-131482578, INLG-131482560 See appendix for form numbers
14. HIOS Issuer ID # and submission tracking Number	HIOS Issuer ID # 31609; Tracking # 31609-1224466136146424835

Please contact [REDACTED] at [REDACTED] or [REDACTED] with any questions regarding this filing.

Sincerely,

[REDACTED]
Director and Actuary, Commercial Pricing

cc: [REDACTED]
[REDACTED]



APPENDIX

Form Numbers

08535.ON Rev. 1.19, 08535-OC.ON Rev. 1.19, 08535.OFF Rev. 1.19, 08535-OC.OFF
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OC.OFF.PDEN.HSA Rev 1.19, PREV/SCH-II Rev. 1.19

PENNSYLVANIA ACTUARIAL MEMORANDUM

PURPOSES

This Actuarial Memorandum is provided along with the Unified Rate Review Template (URRT) and PA Actuarial Memorandum Rate Exhibits to provide certain information to support the gross premium for the single risk pool for individual market health care insurance underwritten by QCC Insurance Co., Inc. in the Commonwealth of Pennsylvania. It is provided as a component of a state rate filing. This submission may not be appropriate for other purposes.

1. BASIC INFORMATION AND DATA

A. COMPANY INFORMATION

Company Legal Name:	QCC Insurance Co., Inc. ("QCC")
State:	Pennsylvania
NAIC #:	93688
Market:	Individual
Marketplace:	On and Off Exchange
Effective Date(s):	1/1/2019 – 12/31/2019
Average Rate Change:	-6.4%
Range of Rate Changes:	-8.3% to -3.4%
Products:	PPO
Rating Areas:	Rating Area 8
Metal Levels:	Platinum, Gold, Silver, Bronze, Catastrophic
Current Members:	41,006
Current Policyholders:	27,993
Number of 2019 Plans:	16
HIOS Issuer ID (5-digit):	31609

Worksheet 1 of the accompanying URRT contains experience period data and development of the projected Single Risk Pool Gross Premium Average Rate PMPM for the individual market for QCC. Worksheet 2 contains experience period data and projections by product for the single risk pool for the same entities. This memorandum pertains only to plans denoted in Worksheet 2 by Plan IDs starting with the sequence 31609.

COMPANY CONTACT INFORMATION

Primary Contact Name:	
Primary Contact Telephone Number:	
Primary Contact Email Address:	

B. RATE HISTORY AND PROPOSED VARIATIONS IN RATE CHANGES

January 1, 2015	14.90%	INAC- 129626643
January 1, 2016	4.53%	INAC- 129938930
January 1, 2017	28.38%	INAC- 130539917
January 1, 2018	28.80%	INAC- 131146005

The historical rate changes varied by metallic tier based on plan benefits as illustrated via the Pricing AV.

Proposed rate changes may vary by metallic tier and plan based on plan benefit changes.

C. AVERAGE RATE CHANGE

The average proposed rate change shown in Cell AC15 of Table 10 is -6.4%. The changes to the single risk pool gross premium average rate per member per month (PMPM) from calendar year 2017 to calendar year 2019 are incorporated into the pricing and reflected in the Unified Rate Review Template.

The change in 21-year-old Non-Tobacco Premium PMPM calculated in Table 11, Cell AN13 is -6.7%. The change shown in Cell V45 of Worksheet 1 of URRT Part I is 22.78%. The change shown in Cell V46 of Worksheet 1 of URRT Part I is 10.81%.

D. MEMBERSHIP COUNT

Table 1 illustrates the Experience Period member-months, Current Period members as of February 1, 2018, and Projected Rating Period Member-months by ages.

E. BENEFIT CHANGES

Benefit changes were made to the following plans to assure compliance with Actuarial Value Requirements, including differences that resulted from changes to the AV Calculator. The basis for pricing changes was our internal pricing model.

F. EXPERIENCE PERIOD CLAIMS AND PREMIUMS

Table 2 illustrates the experience period claims and premiums using calendar year data. The data is consistent with the data reported in Section 1 of Worksheet I of the URRT.

Experience period premium, claims, and member months are obtained from the company's internal data warehouse. The claims data is collected for incurred dates from January through December 2017 and paid through February 2018. Earned premiums and member months are for January through December 2017. The data are for all direct-written individual business of QCC in the Commonwealth of

Pennsylvania, including out-of-network claims written by QCC but paid by QCC for POS plans. No private reinsurance was applicable.

Projected Risk Adjustment PMPM

Non-EHB benefits are illustrated separately in cell H36 of Table 2. Capitation is uniform by age for the experience period. Net pharmacy rebates are illustrated in cell I36 of Table 2.

Projected Risk Adjustment is accounted for in Projected Incurred Claims before ACA Reinsurance and Risk Adjustment to reflect anticipated risk adjustment transfer amounts for the projection period. The amount reflects the projected morbidity for the single risk pool for IBCFOC in the projection period.

The estimated risk adjustment revenue for all of the plans in the risk pool is developed using the following methodology. We recognize that the HHS payment transfer formula implies that the projected incurred claims based solely on the experience period single risk pool claims need to be adjusted by the ratio of the current statewide market's risk relative to allowable rating factor (ARF) for age compared to the single risk pool's risk relative to ARF presented during the experience period. This adjustment, together with the assumed future changes in population risk morbidity, results in the issuer's pricing being consistent with the anticipated morbidity level of the future statewide market.

The anticipated risk adjustment transfer revenue is allocated proportionally based on plan premium. The Projected Risk Adjustment is subtracted from Projected Incurred Claims before ACA Risk Adjustment to reflect anticipated receipt of risk adjustment transfer amounts for the projection period.

When the projected risk adjustment amounts for QCC and Independence Blue Cross (QCC) are combined, the result is consistent with the projection made in our submission. We also considered preliminary 2017 risk transfer results.

The risk adjustment included in the URRT matches the risk adjustment that was included in the URRT from the annual QHP filing.

G. CREDIBILITY OF DATA

The experience period data is considered 100% credible.

H. TREND IDENTIFICATION

Table 3 identifies the proposed annual medical and prescription drug allowed claims cost and utilization trends. These data match the data illustrated in Section 2 of Worksheet I of the URRT. Additional discussion is provided in Section I, Historical Experience.

I. HISTORICAL EXPERIENCE

Table 4 illustrates historical experience from 2014 through 2017 for the product line.

a. Annualized Cost Trend

Annual cost trend reflects changes in costs of medical treatment due to medical inflation and changes in the distribution of services across network providers. The trend value is developed by reviewing historical medical costs for the single risk pool and adjusting them for anticipated future provider contracting reimbursement levels. The data is normalized for changes in age, benefit changes during the experience period, changes to provider contracts, and prescription drug formulary, and new drugs brought to market.

b. Annualized Utilization Trend

Annual utilization trend reflects the change in the number of units per 1,000 members for a fixed level of illness burden and includes changes due to the mix and intensity of services provided and changes related to shifts in product mix. It also includes effects of selection, if any, since this cannot be reflected in the relative cost of the various products and plans offered.

J. TERMINATED PLANS

No plans are being terminated during 2019.

2. RATE DEVELOPMENT AND CHANGE

A. DEVELOPMENT OF PROJECTED INDEX RATE, MARKET-ADJUSTED INDEX RATE, & TOTAL ALLOWED CLAIMS

Table 5 illustrates the development of the Projected Index Rate and Market-Adjusted Index Rate beginning with the Experience Period Index Rate. Exhibit A provides additional information about the adjustment factors.

Changes in Population Risk Morbidity

Experience period allowed claims are adjusted to account for differences in the average morbidity of the single risk pool population underlying the experience and the anticipated population in the projection period. This adjustment reflects changes in the individual market-wide morbidity.

Changes in Other Factors

Experience period allowed claims are adjusted to account for differences in the single risk pool population underlying the experience and the anticipated population in the projection period pertaining to several factors not due to changes in morbidity or the costs and utilization of medical care. This adjustment reflects: additional benefits required to be covered as essential health benefits; recently mandated benefits required by state law that are not reflected in the experience period data; benefits in the experience that are removed for the projection period; anticipated changes in the average

utilization of services due to differences in average cost sharing requirements during the experience period and average cost sharing requirements in the projection period; changes in demographic characteristics of the single risk pool experience period population and the projection period population (including age, gender, region, and tobacco use); changes in the provider network (adding or removing a provider system or introducing a limited network option); and anticipated changes in pharmacy rebates.

Table 5 of the Actuarial Memorandum Rate Exhibit shows the components used in calculating change in other. The calculations of the components are based on the changes in values shown in Table 7.

CSR payments are funded through premiums in this filing. The additional cost to provide the CSRs is recognized in Column P of Table 10 of the Actuarial Memorandum Rate Exhibit. In URRT Part I, the cost is reflected in the Paid to Allowed factor. The Paid to Allowed factor in the URRT Part 1 is equal to the Paid to Allowed factor in Table 5 multiplied by the value in cell P15 of Table 10 of the Actuarial Memorandum Rate Exhibit.

B. RETENTION ITEMS

Table 6 illustrates the retention items, expressed as percentages of premium. Consistent with conversations with our State regulator, no Pricing load was applied for the Managed Care Assessment levied pursuant to Article VIII-I of the Pennsylvania Code, as it will be separately reimbursed.

Administrative Expenses		11.00%
General and Claims	8.20%	
Agent/Broker Fees and Commissions	2.00%	
Quality Improvement Initiatives	0.80%	
Taxes and Fees		2.42%
PCORI Fees	0.00%	
PA Premium Tax	2.00%	
Federal Income Tax	0.42%	
Health Insurance Providers Fee	0.00%	
Profit/Contingency		2.00%
Total Retention		15.42%

C. NORMALIZED MARKET-ADJUSTED PROJECTED ALLOWED TOTAL CLAIMS

Table 7 compares the normalization factors used in this filing to those used in the 2017 filing. The changes in the factors reflect small differences from the projected populations in 2018 and 2019.

D. COMPONENTS OF RATE CHANGE

Table 8 illustrates the components of rate change, based on inputs from other sections of the Rate Exhibits. The results in Row H are similar to the values in Row A of Table 8.

Data in Table 9 was taken from the 2018 URRT with the exceptions of Risk Adjustment and Reinsurance which were revised to project company-specific values.

3. PLAN RATE DEVELOPMENT

Table 10 is populated with plan information consistent with entries in the 2019 URRT. Plan mappings, where applicable, are illustrated in Column F of Table 10.

Attached to this actuarial memorandum are exhibits providing actuarial certifications for the use of alternate methods of calculating the Actuarial Value, where applicable, as well as required support for the calculations.

4. PLAN PREMIUM DEVELOPMENT FOR 21-YEAR OLD NON-TOBACCO USER

Table 11 is populated from other sections of the Rate Exhibits, along with the population by age and rating area for the Projection Period.

5. PLAN FACTORS

Tables 12, 13, and 14 illustrate the factors used in pricing for age, tobacco, geographic rating area, and network. The tobacco factors match the previously approved tobacco factors from the 2018 filing.

6. ACTUARIAL CERTIFICATION

I, [REDACTED], am Director & Actuary of Commercial Markets for the Independence Blue Cross Family of Companies. I am a member of the Society of Actuaries and the American Academy of Actuaries with the education and experience necessary to perform the work necessary and meet the Qualification Standards of the American Academy of Actuaries to render the qualified actuarial opinion contained herein. The developed rates and memorandum have been prepared in conformity with appropriate Actuarial Standards of Practice and the Academy's Code of Professional Conduct.

The Part I Unified Rate Review Template does not demonstrate the process used by the issuer to develop the premium rates and allowable rating factors. Rather, it represents information required by Federal regulation to be provided in support of the review of gross premium rate increases, for certification of qualified health plans for Federally facilitated exchanges, and for certification that the index rate is developed in accordance with Federal regulation and used consistently and only adjusted by the allowable modifiers.

I hereby certify that, to the best of my knowledge and judgment, the following:

- The projected index rate is:
 - In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.08(d)(1) and 147.106);
 - Developed in compliance with applicable Actuarial Standards of Practice;

—Reasonable in relation to the benefits provided and the population anticipated to be covered;
and

—Neither excessive nor deficient.

- The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates.
- The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice.
- The AV Calculator was used to determine the AV Metal Values illustrated in Worksheet 2 of the Part I Unified Rate Review Template for all plans, unless an alternate methodology was required. If an alternate methodology was used to calculate the AV Metal Value for at least one plan offered, a copy of the actuarial certification required by 45 CFR Part 156, §156.135 will be included.
- All factor, benefit, and other changes from the prior approved filing have been disclosed in the 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 2019 Rate Filing Justification.

May 20, 2018

PA Rate Template Part I
Data Relevant to the Rate Filing

Table D. Identifying Information

Carrier Name:	QOC Insurance Company, Inc.
Products(s):	Individual
Market Segment:	Individual
Rate Effective Date:	1/1/2019
Base Period Start Date:	1/1/2017
Date of Most Recent Membership:	2/1/2018

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of 02-01-2018)	Projected Rating Period
Average Age	40.2	40.9	40.9
Total	591,685	41,006	492,072
<18	75,341	4,573	54,876
18-24	53,843	3,316	42,527
25-29	57,961	4,212	50,544
30-34	46,151	3,351	40,212
35-39	38,124	2,756	33,072
40-44	37,592	2,663	31,906
45-49	49,353	3,335	40,020
50-54	59,619	4,057	48,684
55-59	75,406	5,320	63,948
60-63	73,922	5,427	65,124
64+	24,773	1,787	21,444

*Tables 1, 2 and 4 must include data for all non-grandfathered business (ACA compliant and transitional)

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-ENB portion of Allowed Claims	Total Prescription Drug Rebates*	Total ENB Capitalization	Total Non-ENB Capitalization	Estimated Risk Adjustment
\$ 332,977,299.81	\$ 301,653,332.20	\$ 287,260,738.70	391,685	\$ 78,555,125.18	\$ 385,921,860.88	\$ 1,352,835.12	\$ 156,391,222	\$ 7,610,887.98	\$ -	\$ 90,706,120.19
Experience Period Total Allowed ENB Claims + ENB Capitalization PMPM (net of prescription drug rebates)										\$ 652.02
Loss Ratio										\$ 80.43%

*Express Prescription Drug Rebates as a negative number

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite URRY Trend **	Weight*
Inpatient Hospital	3.86%	4.70%	0.00%	8.73%	20.81%
Outpatient Hospital	3.81%	4.70%	0.00%	8.68%	24.67%
Professional	1.72%	4.70%	0.00%	6.49%	28.20%
Other Medical	1.72%	4.70%	0.00%	6.49%	0.00%
Capitalization				2.70%	1.64%
Prescription Drugs	6.30%	5.30%	0.00%	11.93%	24.68%
Total Annual Trend				8.80%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.184	

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

** Should = URRY 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-14	\$ 364,741,086.00	\$ 13,599,268.23	1.0000	\$ 13,599,268.23	29,877	\$ 455.18	\$ 58,392,956.51			\$ -
Feb-14		\$ 14,415,254.54	1.0000	\$ 14,415,254.54	34,258	\$ 420.79				\$ -
Mar-14		\$ 21,056,033.26	1.0000	\$ 21,056,033.26	35,438	\$ 533.90				\$ -
Apr-14		\$ 24,112,932.89	1.0000	\$ 24,112,932.89	47,540	\$ 507.17				\$ -
May-14		\$ 26,637,574.01	1.0000	\$ 26,637,574.01	57,587	\$ 462.56				\$ -
Jun-14		\$ 27,086,559.43	1.0000	\$ 27,086,559.43	58,377	\$ 463.99				\$ -
Jul-14		\$ 29,476,342.65	1.0000	\$ 29,476,342.65	59,017	\$ 499.46				\$ -
Aug-14		\$ 27,844,661.34	1.0000	\$ 27,844,661.34	59,943	\$ 464.52				\$ -
Sep-14		\$ 31,204,546.73	1.0000	\$ 31,204,546.73	60,666	\$ 514.37				\$ -
Oct-14		\$ 32,557,743.25	1.0000	\$ 32,557,743.25	60,994	\$ 541.78				\$ -
Nov-14		\$ 29,424,988.54	1.0000	\$ 29,424,988.54	60,648	\$ 488.69				\$ -
Dec-14		\$ 32,939,176.14	1.0000	\$ 32,939,176.14	60,924	\$ 540.66				\$ -
Jan-15	\$ 312,279,650.00	\$ 26,933,145.73	1.0000	\$ 26,933,145.73	48,070	\$ 560.29	\$ 57,483,597.00			\$ -
Feb-15		\$ 29,828,911.71	1.0000	\$ 29,828,911.71	45,266	\$ 548.51				\$ -
Mar-15		\$ 28,377,535.65	1.0000	\$ 28,377,535.65	45,390	\$ 625.19				\$ -
Apr-15		\$ 26,991,152.68	1.0000	\$ 26,991,152.68	44,562	\$ 605.70				\$ -
May-15		\$ 26,111,484.45	1.0000	\$ 26,111,484.45	43,904	\$ 594.74				\$ -
Jun-15		\$ 28,981,801.20	1.0000	\$ 28,981,801.20	43,346	\$ 668.64				\$ -
Jul-15		\$ 27,856,129.77	1.0000	\$ 27,856,129.77	42,819	\$ 649.04				\$ -
Aug-15		\$ 24,892,140.60	1.0000	\$ 24,892,140.60	42,608	\$ 584.21				\$ -
Sep-15		\$ 29,713,490.15	1.0000	\$ 29,713,490.15	42,266	\$ 695.10				\$ -
Oct-15		\$ 27,637,594.48	1.0000	\$ 27,637,594.48	41,881	\$ 659.91				\$ -
Nov-15		\$ 26,734,393.11	1.0000	\$ 26,734,393.11	41,506	\$ 644.11				\$ -
Dec-15		\$ 26,499,800.10	1.0000	\$ 26,499,800.10	41,158	\$ 643.86				\$ -
Jan-16	\$ 248,873,272.63	\$ 23,339,730.86	1.0000	\$ 23,339,730.86	42,061	\$ 554.90	\$ 58,359,587.74			\$ -
Feb-16		\$ 25,653,659.53	1.0000	\$ 25,653,659.53	41,820	\$ 613.43				\$ -
Mar-16		\$ 29,655,336.17	1.0000	\$ 29,655,336.17	41,981	\$ 706.40				\$ -
Apr-16		\$ 26,796,453.58	1.0000	\$ 26,796,453.58	41,799	\$ 641.08				\$ -
May-16		\$ 28,354,285.08	1.0000	\$ 28,354,285.08	41,479	\$ 683.58				\$ -
Jun-16		\$ 28,664,177.47	1.0000	\$ 28,664,177.47	41,254	\$ 694.82				\$ -
Jul-16		\$ 27,250,367.49	1.0000	\$ 27,250,367.49	40,991	\$ 663.17				\$ -
Aug-16		\$ 31,352,661.23	1.0000	\$ 31,352,661.23	40,925	\$ 766.10				\$ -
Sep-16		\$ 29,428,429.51	1.0000	\$ 29,428,429.51	40,746	\$ 722.24				\$ -
Oct-16		\$ 27,512,940.36	1.0000	\$ 27,512,940.36	40,444	\$ 680.27				\$ -
Nov-16		\$ 28,116,702.10	1.0000	\$ 28,116,702.10	40,164	\$ 700.05				\$ -
Dec-16		\$ 29,001,414.80	1.0000	\$ 29,001,414.80	39,854	\$ 727.69				\$ -
Jan-17	\$ 332,977,299.81	\$ 22,593,620.93	0.9903	\$ 22,813,890.89	50,206	\$ 454.41	\$ 78,555,125.18			\$ -
Feb-17		\$ 23,506,097.72	0.9899	\$ 23,756,006.52	51,011	\$ 465.70				\$ -
Mar-17		\$ 28,354,824.78	0.9872	\$ 28,721,715.41	52,034	\$ 511.98				\$ -
Apr-17		\$ 23,800,285.45	0.9883	\$ 24,112,575.29	51,421	\$ 468.92				\$ -
May-17		\$ 26,919,291.79	0.9832	\$ 27,380,509.88	50,508	\$ 542.10				\$ -
Jun-17		\$ 25,227,321.29	0.9825	\$ 26,194,856.58	49,847	\$ 525.53				\$ -
Jul-17		\$ 24,334,009.09	0.9863	\$ 24,676,059.21	49,275	\$ 500.78				\$ -
Aug-17		\$ 26,512,426.67	0.9858	\$ 26,894,824.98	48,723	\$ 551.99				\$ -
Sep-17		\$ 24,817,196.71	0.9819	\$ 25,277,903.50	48,257	\$ 523.82				\$ -
Oct-17		\$ 25,441,114.37	0.9876	\$ 26,076,512.30	47,646	\$ 547.26				\$ -
Nov-17		\$ 25,166,821.28	0.9868	\$ 25,977,273.21	47,037	\$ 552.27				\$ -
Dec-17		\$ 24,450,319.22	0.9599	\$ 25,485,614.02	45,721	\$ 557.42				\$ -

* Express Completion Factor as a percentage

** Express Prescription Drug Rebates as a negative number

Carrier Name: QCC Insurance Company, Inc.
Product(s): PPO
Market Segment: Individual
Rate Effective Date: 1/1/2019

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
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)										\$ -
Loss Ratio										0.00%

*Express Prescription Drug Rebates as a negative number

Table 3b. Manual Trend Components

Service Category	Cost*	Utilization*	Induced Utilization*	Composite URRT Trend**	Weight*
Inpatient Hospital				0.00%	
Outpatient Hospital				0.00%	
Professional				0.00%	
Other Medical				0.00%	
Capitation					
Prescription Drugs				0.00%	
Total Annual Trend				0.00%	0.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.000	

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

** Should = URRT Trend

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-14				#DIV/0!		#DIV/0!				#DIV/0!
Feb-14				#DIV/0!		#DIV/0!				#DIV/0!
Mar-14				#DIV/0!		#DIV/0!				#DIV/0!
Apr-14				#DIV/0!		#DIV/0!				#DIV/0!
May-14				#DIV/0!		#DIV/0!				#DIV/0!
Jun-14				#DIV/0!		#DIV/0!				#DIV/0!
Jul-14				#DIV/0!		#DIV/0!				#DIV/0!
Aug-14				#DIV/0!		#DIV/0!				#DIV/0!
Sep-14				#DIV/0!		#DIV/0!				#DIV/0!
Oct-14				#DIV/0!		#DIV/0!				#DIV/0!
Nov-14				#DIV/0!		#DIV/0!				#DIV/0!
Dec-14				#DIV/0!		#DIV/0!				#DIV/0!
Jan-15				#DIV/0!		#DIV/0!				#DIV/0!
Feb-15				#DIV/0!		#DIV/0!				#DIV/0!
Mar-15				#DIV/0!		#DIV/0!				#DIV/0!
Apr-15				#DIV/0!		#DIV/0!				#DIV/0!
May-15				#DIV/0!		#DIV/0!				#DIV/0!
Jun-15				#DIV/0!		#DIV/0!				#DIV/0!
Jul-15				#DIV/0!		#DIV/0!				#DIV/0!
Aug-15				#DIV/0!		#DIV/0!				#DIV/0!
Sep-15				#DIV/0!		#DIV/0!				#DIV/0!
Oct-15				#DIV/0!		#DIV/0!				#DIV/0!
Nov-15				#DIV/0!		#DIV/0!				#DIV/0!
Dec-15				#DIV/0!		#DIV/0!				#DIV/0!
Jan-16				#DIV/0!		#DIV/0!				#DIV/0!
Feb-16				#DIV/0!		#DIV/0!				#DIV/0!
Mar-16				#DIV/0!		#DIV/0!				#DIV/0!
Apr-16				#DIV/0!		#DIV/0!				#DIV/0!
May-16				#DIV/0!		#DIV/0!				#DIV/0!
Jun-16				#DIV/0!		#DIV/0!				#DIV/0!
Jul-16				#DIV/0!		#DIV/0!				#DIV/0!
Aug-16				#DIV/0!		#DIV/0!				#DIV/0!
Sep-16				#DIV/0!		#DIV/0!				#DIV/0!
Oct-16				#DIV/0!		#DIV/0!				#DIV/0!
Nov-16				#DIV/0!		#DIV/0!				#DIV/0!
Dec-16				#DIV/0!		#DIV/0!				#DIV/0!
Jan-17				#DIV/0!		#DIV/0!				#DIV/0!
Feb-17				#DIV/0!		#DIV/0!				#DIV/0!
Mar-17				#DIV/0!		#DIV/0!				#DIV/0!
Apr-17				#DIV/0!		#DIV/0!				#DIV/0!
May-17				#DIV/0!		#DIV/0!				#DIV/0!
Jun-17				#DIV/0!		#DIV/0!				#DIV/0!
Jul-17				#DIV/0!		#DIV/0!				#DIV/0!
Aug-17				#DIV/0!		#DIV/0!				#DIV/0!
Sep-17				#DIV/0!		#DIV/0!				#DIV/0!
Oct-17				#DIV/0!		#DIV/0!				#DIV/0!
Nov-17				#DIV/0!		#DIV/0!				#DIV/0!
Dec-17				#DIV/0!		#DIV/0!				#DIV/0!

* 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:	QCC Insurance Company, Inc.
Product(s):	PPO
Market Segment:	Individual
Rate Effective Date:	1/1/2019

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	\$ 652.02	\$ -	
Two year trend projection factor	1.184	1.000	< Actual Experience PMPM should be consistent with the index Rate for Experience Period on URRT
Unadjusted Projected Allowed EHB Claims PMPM	\$ 771.83	\$ -	
Single Risk Pool Adjustment Factors			
Change in Morbidity	1.060	0.000	< See URRT Instructions
Change in Other	1.017	0.000	
Change in Demographics	1.016	0.000	< See URRT Instructions
Change in Network	1.003	0.000	< See URRT Instructions
Change in Benefits	0.998	0.000	< See URRT Instructions
Change in Other	1.000	0.000	< See URRT Instructions
Total Adjusted Projected Allowed EHB Claims PMPM	\$ 832.25	\$ -	
Credibility Factors	100%	0%	< See Instructions
Blended Projected EHB Claims PMPM	\$ -	\$ 832.25	< Projected Index Rate
Development of the Market-Adjusted Index Rate and Total Allowed Claims			
Adjusted Projected Allowed EHB Claims PMPM	\$ 832.25		< Index Rate for Projection Period on URRT - Individual or First Quarter Small Group
Adjusted Projected Allowed EHB Claims PMPM [will only populate for small group filings]	\$ -		
Projected Paid to Allowed Ratio	0.717		< Paid to Allowed Average Factor in Projection Period on URRT
Projected Paid EHB Claims PMPM	\$ 596.98		
Market-wide Adjustments:			
Projected Risk Adjustment PMPM	\$ 570.26		
Projected Paid Exchange User Fees PMPM	\$ 18.64		
Market-Adjusted Projected Paid EHB Claims PMPM	\$ 545.36		
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 760.28		< Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM	\$ 0.25		
Market-Adjusted Projected Paid Total Claims PMPM	\$ 545.53		
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 760.53		

Table 6. Retention

Retention Items - Express in percentages	Percentages	PMPM Amounts	
Administrative Expenses	11.00%	\$70.95	
General and Claims	8.20%	\$52.89	
Agent/Broker Fees and Commissions	2.00%	\$12.90	
Quality Improvement Initiatives	0.80%	\$5.16	
Taxes and Fees	2.42%	\$15.61	
PCORI Fees	0.00%	\$0.00	
PA Premium Tax (if applicable)	2.00%	\$12.90	
Federal Income Tax	0.42%	\$2.71	
Health Insurance Providers Fee (Prorated for Small Groups only)	0.00%	\$0.00	
Profit/Contingency (after tax)	2.00%	\$12.90	
Total Retention	15.42%	\$99.46	
Projected Required Revenue PMPM	\$ 644.99		< Single Pool Gross Premium Avg. Rate, PMPM on URRT

Table 8. Components of Rate Change

Rate Components	2018	2019	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$ 436.87	\$ 408.72	-\$28.16	-6.4%
B. Base period allowed claims before normalization	\$ 768.13	\$ 652.02	-\$116.12	-26.6%
C. Normalization factor component of change	\$ (311.73)	\$ (267.61)	\$44.12	10.1%
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 456.40	\$ 384.41	\$ (72.00)	-16.5%
D2. URRT Trend	\$ 65.09	\$ 70.64	\$ 5.55	1.3%
D3. URRT Morbidity	\$ -	\$ 27.30	\$ 27.30	6.2%
D4. URRT Other	\$ (10.06)	\$ 8.32	\$ 18.38	4.2%
D5. Normalized URRT RA/Rt on an allowed basis	\$ (129.10)	\$ (57.75)	\$ 71.35	16.3%
D6. Normalized Exchange User Fee on an allowed basis	\$ 10.68	\$ 4.64	\$ 6.04	1.1%
D7. Subtotal - Sum(D1-D6)	\$ 393.01	\$ 448.24	\$ 55.23	12.6%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ (0.00)	\$ 0.00	\$ 0.00	0.0%
E2. Pricing AV	\$ (103.07)	\$ (126.71)	\$ (23.64)	-9.4%
E3. Benefit Richness	\$ -	\$ (2.57)	\$ (2.57)	-0.6%
E4. Catastrophic Eligibility	\$ (0.00)	\$ -	\$ 0.00	0.0%
E5. Subtotal - Sum(E1-E4)	\$ (103.07)	\$ (129.28)	\$ (26.21)	-6.0%
F. Change in Retention Components				
F1. Administrative Expenses	\$ 43.69	\$ 44.96	\$ 1.27	0.3%
F2. Taxes and Fees	\$ 24.86	\$ 9.89	\$ (14.97)	-3.4%
F3. Profit and/or Contingency	\$ 4.37	\$ 8.17	\$ 3.81	0.9%
F4. Subtotal - Sum(F1-F3)	\$ 72.91	\$ 63.02	\$ (9.89)	-2.3%
G. Change in Miscellaneous Items	\$ -	\$ -	\$ -	0.0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 362.85	\$ 381.98	\$ 19.12	4.4%

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 652.02	< Index Rate of Experience Period on URRT
Blended Earned Premium	\$ 332,977,299.81	
Blended Loss Ratio	80.43%	

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

Effective Date	1/1/2019	4/1/2019	7/1/2019	10/1/2019	Total Single Risk Pool
# of Member Months Renewing in Quarter	-	-	-	-	-
Adjusted Projected Allowed EHB Claims PMPM Q1	\$ 832.25	\$ 832.25	\$ 832.25	\$ 832.25	\$ 832.25
Months of Trend	3	6	9	9	9
Annual Trend	8.80%	8.80%	8.80%	8.80%	8.80%
Single Risk Pool Projected Allowed Claims	\$ 832.25	\$ 849.98	\$ 868.10	\$ 886.60	\$ -
Quarterly Trend Factor	100.0%	102.1%	104.3%	106.5%	0.0%
2019 Trend Factors by Quarter	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2018	2019
Average Age Factor	1.661	1.688
Average Geographic Factor	1.000	1.000
Average Tobacco Factor	1.013	1.013
Average Benefit Richness (induced demand)	1.000	0.992
Average Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 461.73	\$ 760.53
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 393.18	\$ 448.38

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

	2018	2019
Paid-to-Allowed	0.738	0.717
URRT Trend (Total Applied Trend Factor)	1.144	1.184
URRT Morbidity	1.000	1.060
URRT "Other"	0.981	1.017
Risk Adjustment	\$ (160.34)	\$ (70.26)
Exchange User Fee	\$ 13.26	\$ 18.64
Capitation	\$ -	\$ -
Network	1.000	1.000
Pricing AV	0.738	0.717
Benefit Richness	1.000	0.992
Catastrophic Eligibility	1.000	1.000
Administrative Expenses	10.00%	11.00%
Taxes and Fees	5.69%	2.42%
Profit and/or Contingency	1.00%	2.00%

PA Rate Template Part III
Table 10. Plan Rates

Carrier Name:	QCC Insurance Company, Inc.	
Product(s):	PPO	
Market Segment:	Individual	
Rate Effective Date:	1/1/2019	
Base Period Start Date	1/1/2017	
Date of Most Recent Membership	2/1/2018	
Market Adjusted Index Rate	\$	760.28

Calibration		Total Covered Lives @ 02-01-2018
Age Calibration Factor	1.688	41,006
Geographic Calibration Factor	1.000	
Tobacco Calibration Factor	1.013	
Aggregate Calibration Factor	1.710	

[illegible]

PA Rate Quarterly Template Part V Consumer Factors

Carrier Name:	QCC Insurance Company, Inc.
Product(s):	PPO
Market Segment:	Individual
Rate Effective Date:	1/1/2019

Table 12. Age and Tobacco Factors

Projection Period Age and Tobacco Factors						
Age Band	Age Factor	Tobacco Factor		Age Band	Age Factor	Tobacco Factor
0-14	0.765			40	1.278	1.225
15	0.833			41	1.302	1.225
16	0.859			42	1.325	1.225
17	0.885			43	1.357	1.225
18	0.913	1.000		44	1.397	1.225
19	0.941	1.000		45	1.444	1.225
20	0.970	1.000		46	1.500	1.225
21	1.000	1.125		47	1.563	1.225
22	1.000	1.125		48	1.635	1.225
23	1.000	1.125		49	1.706	1.225
24	1.000	1.125		50	1.786	1.375
25	1.004	1.125		51	1.865	1.375
26	1.024	1.125		52	1.952	1.375
27	1.048	1.125		53	2.040	1.375
28	1.087	1.125		54	2.135	1.375
29	1.119	1.125		55	2.230	1.375
30	1.135	1.175		56	2.333	1.375
31	1.159	1.175		57	2.437	1.375
32	1.183	1.175		58	2.548	1.375
33	1.198	1.175		59	2.603	1.375
34	1.214	1.175		60	2.714	1.375
35	1.222	1.175		61	2.810	1.375
36	1.230	1.175		62	2.873	1.375
37	1.238	1.175		63	2.952	1.375
38	1.246	1.175		64+	3.000	1.375
39	1.262	1.175				

*PA follows the federal default age curve.

Table 13. Geographic Factors

Geographic Area Factors			
Area	Counties	Current Factor	Proposed Factor
Rating Area 1			
Rating Area 2			
Rating Area 3			
Rating Area 4			
Rating Area 5			
Rating Area 6			
Rating Area 7			
Rating Area 8	Bucks, Chester, Delaware, Philadelphia, Montgomery	1.000	1.000
Rating Area 9			

Table 14. Network Factors

[illegible]

Company Name: QCC Insurance Company
 Market: Individual
 Product: PPO
 Effective Date of Rates: January 1, 2019

Ending date of Rates:

December 31, 2019

HIOS Plan ID (On Exchange)=>	31609PA0070002		31609PA0070003		31609PA0070004		31609PA0160001	
HIOS Plan ID (Off Exchange)=>	Personal Choice PPO Gold		Personal Choice PPO Silver		Personal Choice PPO Bronze		Personal Choice EPO Catastrophic	
Form # =>	08535 Rev. 1.16		08535 Rev. 1.16		08535 Rev. 1.16		08537 Rev. 1.16	
Rating Area =>	8		8		8		8	
Network =>	Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network	
Metal =>	Gold		Silver		Bronze		Catastrophic	
Deductible =>	\$0		\$2,500		\$5,500		\$7,900	
Coinurance =>	20%		30%		50%		0%	
Copays =>	\$30/\$65		\$30/\$70 no ded		\$50 no ded/50% after ded		50 visits 1-3 no ded (0% after ded)/0% after de	
OOP Maximum =>	\$6,500		\$7,000		\$7,900		\$7,900	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0-14	\$406.31	\$406.31	\$368.40	\$368.40	\$240.61	\$240.61	\$199.53	\$199.53
15	\$442.42	\$442.42	\$401.15	\$401.15	\$261.99	\$261.99	\$217.26	\$217.26
16	\$456.23	\$456.23	\$413.67	\$413.67	\$270.17	\$270.17	\$224.04	\$224.04
17	\$470.04	\$470.04	\$426.19	\$426.19	\$278.35	\$278.35	\$230.83	\$230.83
18	\$484.91	\$484.91	\$439.68	\$439.68	\$287.15	\$287.15	\$238.13	\$238.13
19	\$499.78	\$499.78	\$453.16	\$453.16	\$295.96	\$295.96	\$245.43	\$245.43
20	\$515.19	\$515.19	\$467.13	\$467.13	\$305.08	\$305.08	\$253.00	\$253.00
21	\$531.12	\$597.51	\$481.58	\$541.77	\$314.52	\$353.83	\$260.82	\$293.42
22	\$531.12	\$597.51	\$481.58	\$541.77	\$314.52	\$353.83	\$260.82	\$293.42
23	\$531.12	\$597.51	\$481.58	\$541.77	\$314.52	\$353.83	\$260.82	\$293.42
24	\$531.12	\$597.51	\$481.58	\$541.77	\$314.52	\$353.83	\$260.82	\$293.42
25	\$533.25	\$599.90	\$483.50	\$543.94	\$315.77	\$355.25	\$261.86	\$294.60
26	\$543.87	\$611.85	\$493.13	\$554.77	\$322.06	\$362.32	\$267.08	\$300.47
27	\$556.61	\$626.19	\$504.69	\$567.78	\$329.61	\$370.81	\$273.34	\$307.51
28	\$577.33	\$649.49	\$523.47	\$588.91	\$341.88	\$384.61	\$283.51	\$318.95
29	\$594.32	\$668.61	\$538.88	\$606.24	\$351.94	\$395.94	\$291.86	\$328.34
30	\$602.82	\$708.32	\$546.59	\$642.24	\$356.98	\$419.45	\$296.03	\$347.84
31	\$615.57	\$723.29	\$558.15	\$655.82	\$364.52	\$428.32	\$302.29	\$355.19
32	\$628.32	\$738.27	\$569.70	\$669.40	\$372.07	\$437.19	\$308.55	\$362.55
33	\$636.28	\$747.63	\$576.93	\$677.89	\$376.79	\$442.73	\$312.46	\$367.14
34	\$644.78	\$757.62	\$584.63	\$686.94	\$381.82	\$448.64	\$316.64	\$372.05
35	\$649.03	\$762.61	\$588.48	\$691.47	\$384.34	\$451.60	\$318.72	\$374.50
36	\$653.28	\$767.60	\$592.34	\$696.00	\$386.86	\$454.55	\$320.81	\$376.95
37	\$657.53	\$772.59	\$596.19	\$700.52	\$389.37	\$457.51	\$322.90	\$379.40
38	\$661.78	\$777.59	\$600.04	\$705.05	\$391.89	\$460.47	\$324.98	\$381.85
39	\$670.27	\$787.57	\$607.75	\$714.10	\$396.92	\$466.38	\$329.16	\$386.76
40	\$678.77	\$831.50	\$615.45	\$753.93	\$401.95	\$492.39	\$333.33	\$408.33
41	\$691.52	\$847.11	\$627.01	\$768.09	\$409.50	\$501.64	\$339.59	\$416.00
42	\$703.73	\$862.08	\$638.09	\$781.66	\$416.73	\$510.50	\$345.59	\$423.34
43	\$720.73	\$882.90	\$653.50	\$800.53	\$426.80	\$522.83	\$353.93	\$433.57
44	\$741.98	\$908.92	\$672.76	\$824.13	\$439.38	\$538.24	\$364.37	\$446.35
45	\$766.94	\$939.50	\$695.39	\$851.86	\$454.16	\$556.35	\$376.63	\$461.37
46	\$796.68	\$975.93	\$722.36	\$884.89	\$471.77	\$577.92	\$391.23	\$479.26
47	\$830.14	\$1,016.92	\$752.70	\$922.06	\$491.59	\$602.20	\$407.66	\$499.39
48	\$868.38	\$1,063.77	\$787.38	\$964.53	\$514.23	\$629.94	\$426.44	\$522.39
49	\$906.09	\$1,109.96	\$821.57	\$1,006.42	\$536.57	\$657.29	\$444.96	\$545.08
50	\$948.58	\$1,304.30	\$860.09	\$1,182.63	\$561.73	\$772.37	\$465.83	\$640.51
51	\$990.54	\$1,361.99	\$898.14	\$1,234.94	\$586.57	\$806.54	\$486.43	\$668.84
52	\$1,036.75	\$1,425.53	\$940.03	\$1,292.55	\$613.94	\$844.16	\$509.12	\$700.04
53	\$1,083.49	\$1,489.79	\$982.41	\$1,350.82	\$641.61	\$882.22	\$532.07	\$731.60
54	\$1,133.94	\$1,559.17	\$1,028.16	\$1,413.72	\$671.49	\$923.30	\$556.85	\$765.67
55	\$1,184.40	\$1,628.55	\$1,073.91	\$1,476.63	\$701.37	\$964.39	\$581.63	\$799.74
56	\$1,239.10	\$1,703.77	\$1,123.51	\$1,544.83	\$733.77	\$1,008.93	\$608.49	\$836.68
57	\$1,294.34	\$1,779.72	\$1,173.60	\$1,613.70	\$766.48	\$1,053.91	\$635.62	\$873.98
58	\$1,353.30	\$1,860.78	\$1,227.05	\$1,687.20	\$801.39	\$1,101.91	\$664.57	\$913.79
59	\$1,382.51	\$1,900.95	\$1,253.54	\$1,723.62	\$818.69	\$1,125.69	\$678.92	\$933.51
60	\$1,441.46	\$1,982.01	\$1,306.99	\$1,797.12	\$853.60	\$1,173.70	\$707.87	\$973.32
61	\$1,492.45	\$2,052.12	\$1,353.23	\$1,860.69	\$883.79	\$1,215.21	\$732.91	\$1,007.75
62	\$1,525.91	\$2,098.13	\$1,383.57	\$1,902.40	\$903.61	\$1,242.46	\$749.34	\$1,030.34
63	\$1,567.87	\$2,155.82	\$1,421.61	\$1,954.71	\$928.45	\$1,276.62	\$769.94	\$1,058.67
64+	\$1,593.36	\$2,190.87	\$1,444.73	\$1,986.50	\$943.55	\$1,297.38	\$782.46	\$1,075.89

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

HIOS Plan ID (On Exchange)=>	31609PA0160003		31609PA0160004		31609PA0160005		31609PA0180001	
HIOS Plan ID (Off Exchange)=>	Personal Choice EPO Silver Reserve		Personal Choice EPO Platinum		Personal Choice EPO Bronze Reserve		Personal Choice EPO Catastrophic	
Plan Marketing Name =>	8538 Rev. 1.16		08535 Rev. 1.16		08536 Rev. 1.16		08536 Rev. 1.16	
Form # =>	8		8		8		8	
Rating Area =>	Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network	
Metal =>	Silver		Platinum		Bronze		Catastrophic	
Deductible =>	\$2,700		\$0		\$6,750		\$7,900	
Coinsurance =>	30%		0%		0%		0%	
Copays =>	30% no ded/30% no ded		\$15/\$50		0% no ded/0% no ded		50 visits 1-3 no ded (0% after ded)/0% after ded	
OOP Maximum =>	\$6,750		\$4,500		\$6,750		\$7,900	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0-14	\$367.62	\$367.62	\$543.19	\$543.19	\$221.43	\$221.43	\$199.53	\$199.53
15	\$400.30	\$400.30	\$591.47	\$591.47	\$241.12	\$241.12	\$217.26	\$217.26
16	\$412.79	\$412.79	\$609.93	\$609.93	\$248.64	\$248.64	\$224.04	\$224.04
17	\$425.29	\$425.29	\$628.39	\$628.39	\$256.17	\$256.17	\$230.83	\$230.83
18	\$438.74	\$438.74	\$648.28	\$648.28	\$264.27	\$264.27	\$238.13	\$238.13
19	\$452.20	\$452.20	\$668.16	\$668.16	\$272.38	\$272.38	\$245.43	\$245.43
20	\$466.13	\$466.13	\$688.75	\$688.75	\$280.77	\$280.77	\$253.00	\$253.00
21	\$480.55	\$540.62	\$710.05	\$798.81	\$289.45	\$325.64	\$260.82	\$293.42
22	\$480.55	\$540.62	\$710.05	\$798.81	\$289.45	\$325.64	\$260.82	\$293.42
23	\$480.55	\$540.62	\$710.05	\$798.81	\$289.45	\$325.64	\$260.82	\$293.42
24	\$480.55	\$540.62	\$710.05	\$798.81	\$289.45	\$325.64	\$260.82	\$293.42
25	\$482.47	\$542.78	\$712.89	\$802.00	\$290.61	\$326.94	\$261.86	\$294.60
26	\$492.08	\$553.59	\$727.09	\$817.98	\$296.40	\$333.45	\$267.08	\$300.47
27	\$503.62	\$566.57	\$744.13	\$837.15	\$303.35	\$341.27	\$273.34	\$307.51
28	\$522.36	\$587.65	\$771.82	\$868.30	\$314.64	\$353.97	\$283.51	\$318.95
29	\$537.73	\$604.95	\$794.55	\$893.86	\$323.90	\$364.39	\$291.86	\$328.34
30	\$545.42	\$640.87	\$805.91	\$946.94	\$328.53	\$386.02	\$296.03	\$347.84
31	\$556.96	\$654.42	\$822.95	\$966.96	\$335.48	\$394.19	\$302.29	\$355.19
32	\$568.49	\$667.98	\$839.99	\$986.99	\$342.42	\$402.35	\$308.55	\$362.55
33	\$575.70	\$676.44	\$850.64	\$999.50	\$346.77	\$407.45	\$312.46	\$367.14
34	\$583.39	\$685.48	\$862.00	\$1,012.85	\$351.40	\$412.89	\$316.64	\$372.05
35	\$587.23	\$690.00	\$867.68	\$1,019.52	\$353.71	\$415.61	\$318.72	\$374.50
36	\$591.08	\$694.51	\$873.36	\$1,026.20	\$356.03	\$418.33	\$320.81	\$376.95
37	\$594.92	\$699.03	\$879.04	\$1,032.87	\$358.34	\$421.05	\$322.90	\$379.40
38	\$598.76	\$703.55	\$884.72	\$1,039.55	\$360.66	\$423.78	\$324.98	\$381.85
39	\$606.45	\$712.58	\$896.08	\$1,052.90	\$365.29	\$429.22	\$329.16	\$386.76
40	\$614.14	\$752.32	\$907.44	\$1,111.62	\$369.92	\$453.16	\$333.33	\$408.33
41	\$625.67	\$766.45	\$924.48	\$1,132.49	\$376.87	\$461.67	\$339.59	\$416.00
42	\$636.73	\$779.99	\$940.82	\$1,152.50	\$383.53	\$469.82	\$345.59	\$423.34
43	\$652.11	\$798.83	\$963.54	\$1,180.33	\$392.79	\$481.17	\$353.93	\$433.57
44	\$671.33	\$822.38	\$991.94	\$1,215.13	\$404.37	\$495.35	\$364.37	\$446.35
45	\$693.91	\$850.04	\$1,025.31	\$1,256.01	\$417.97	\$512.02	\$376.63	\$461.37
46	\$720.82	\$883.01	\$1,065.07	\$1,304.72	\$434.18	\$531.87	\$391.23	\$479.26
47	\$751.10	\$920.10	\$1,109.81	\$1,359.51	\$452.42	\$554.21	\$407.66	\$499.39
48	\$785.70	\$962.48	\$1,160.93	\$1,422.14	\$473.26	\$579.74	\$426.44	\$522.39
49	\$819.82	\$1,004.28	\$1,211.34	\$1,483.90	\$493.81	\$604.92	\$444.96	\$545.08
50	\$858.26	\$1,180.11	\$1,268.15	\$1,743.70	\$516.97	\$710.83	\$465.83	\$640.51
51	\$896.22	\$1,232.31	\$1,324.24	\$1,820.83	\$539.83	\$742.27	\$486.43	\$668.84
52	\$938.03	\$1,289.79	\$1,386.02	\$1,905.77	\$565.02	\$776.90	\$509.12	\$700.04
53	\$980.32	\$1,347.94	\$1,448.50	\$1,991.69	\$590.49	\$811.92	\$532.07	\$731.60
54	\$1,025.97	\$1,410.71	\$1,515.96	\$2,084.44	\$617.99	\$849.73	\$556.85	\$765.67
55	\$1,071.62	\$1,473.48	\$1,583.41	\$2,177.19	\$645.48	\$887.54	\$581.63	\$799.74
56	\$1,121.12	\$1,541.54	\$1,656.55	\$2,277.75	\$675.30	\$928.53	\$608.49	\$836.68
57	\$1,171.10	\$1,610.26	\$1,730.39	\$2,379.29	\$705.40	\$969.93	\$635.62	\$873.98
58	\$1,224.44	\$1,683.60	\$1,809.21	\$2,487.66	\$737.53	\$1,014.10	\$664.57	\$913.79
59	\$1,250.87	\$1,719.95	\$1,848.26	\$2,541.36	\$753.45	\$1,035.99	\$678.92	\$933.51
60	\$1,304.21	\$1,793.29	\$1,927.07	\$2,649.73	\$785.58	\$1,080.17	\$707.87	\$973.32
61	\$1,350.34	\$1,856.72	\$1,995.24	\$2,743.45	\$813.37	\$1,118.38	\$732.91	\$1,007.75
62	\$1,380.62	\$1,898.35	\$2,039.97	\$2,804.96	\$831.60	\$1,143.45	\$749.34	\$1,030.34
63	\$1,418.58	\$1,950.55	\$2,096.07	\$2,882.09	\$854.47	\$1,174.90	\$769.94	\$1,058.67
64+	\$1,441.65	\$1,982.27	\$2,130.15	\$2,928.95	\$868.35	\$1,194.00	\$782.46	\$1,075.89

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

HIOS Plan ID (On Exchange)=>	31609PA0180002		31609PA0180003		31609PA0180004		31609PA0180005	
HIOS Plan ID (Off Exchange)=>	31609PA0180002		31609PA0180003		31609PA0180004		31609PA0180005	
Plan Marketing Name =>	Personal Choice EPO Silver Reserve		Personal Choice EPO Platinum		Personal Choice EPO Bronze Reserve		Personal Choice EPO Bronze Basic	
Form # =>	08536 Rev. 1.16		08535 Rev. 1.16		08537 Rev. 1.16		08536 Rev. 1.16	
Rating Area =>	8		8		8		8	
Network =>	Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network	
Metal =>	Silver		Platinum		Bronze		Bronze	
Deductible =>	\$2,700		\$0		\$6,750		\$7,900	
Coinsurance =>	30%		0%		0%		0%	
Copays =>	30% after ded/30% after ded		\$15/\$50		0% after ded/0% after ded		40 visits 1-3 no ded (0% after ded)/0% after ded	
OOP Maximum =>	\$6,750		\$4,500		\$6,750		\$7,900	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0-14	\$367.62	\$367.62	\$543.19	\$543.19	\$221.43	\$221.43	\$204.28	\$204.28
15	\$400.30	\$400.30	\$591.47	\$591.47	\$241.12	\$241.12	\$222.44	\$222.44
16	\$412.79	\$412.79	\$609.93	\$609.93	\$248.64	\$248.64	\$229.38	\$229.38
17	\$425.29	\$425.29	\$628.39	\$628.39	\$256.17	\$256.17	\$236.32	\$236.32
18	\$438.74	\$438.74	\$648.28	\$648.28	\$264.27	\$264.27	\$243.80	\$243.80
19	\$452.20	\$452.20	\$668.16	\$668.16	\$272.38	\$272.38	\$251.28	\$251.28
20	\$466.13	\$466.13	\$688.75	\$688.75	\$280.77	\$280.77	\$259.02	\$259.02
21	\$480.55	\$540.62	\$710.05	\$798.81	\$289.45	\$325.64	\$267.03	\$300.41
22	\$480.55	\$540.62	\$710.05	\$798.81	\$289.45	\$325.64	\$267.03	\$300.41
23	\$480.55	\$540.62	\$710.05	\$798.81	\$289.45	\$325.64	\$267.03	\$300.41
24	\$480.55	\$540.62	\$710.05	\$798.81	\$289.45	\$325.64	\$267.03	\$300.41
25	\$482.47	\$542.78	\$712.89	\$802.00	\$290.61	\$326.94	\$268.10	\$301.61
26	\$492.08	\$553.59	\$727.09	\$817.98	\$296.40	\$333.45	\$273.44	\$307.62
27	\$503.62	\$566.57	\$744.13	\$837.15	\$303.35	\$341.27	\$279.85	\$314.83
28	\$522.36	\$587.65	\$771.82	\$868.30	\$314.64	\$353.97	\$290.26	\$326.55
29	\$537.73	\$604.95	\$794.55	\$893.86	\$323.90	\$364.39	\$298.81	\$336.16
30	\$545.42	\$640.87	\$805.91	\$946.94	\$328.53	\$386.02	\$303.08	\$356.12
31	\$556.96	\$654.42	\$822.95	\$966.96	\$335.48	\$394.19	\$309.49	\$363.65
32	\$568.49	\$667.98	\$839.99	\$986.99	\$342.42	\$402.35	\$315.90	\$371.18
33	\$575.70	\$676.44	\$850.64	\$999.50	\$346.77	\$407.45	\$319.90	\$375.89
34	\$583.39	\$685.48	\$862.00	\$1,012.85	\$351.40	\$412.89	\$324.18	\$380.91
35	\$587.23	\$690.00	\$867.68	\$1,019.52	\$353.71	\$415.61	\$326.31	\$383.42
36	\$591.08	\$694.51	\$873.36	\$1,026.20	\$356.03	\$418.33	\$328.45	\$385.93
37	\$594.92	\$699.03	\$879.04	\$1,032.87	\$358.34	\$421.05	\$330.58	\$388.44
38	\$598.76	\$703.55	\$884.72	\$1,039.55	\$360.66	\$423.78	\$332.72	\$390.95
39	\$606.45	\$712.58	\$896.08	\$1,052.90	\$365.29	\$429.22	\$336.99	\$395.97
40	\$614.14	\$752.32	\$907.44	\$1,111.62	\$369.92	\$453.16	\$341.27	\$418.05
41	\$625.67	\$766.45	\$924.48	\$1,132.49	\$376.87	\$461.67	\$347.67	\$425.90
42	\$636.73	\$779.99	\$940.82	\$1,152.50	\$383.53	\$469.82	\$353.82	\$433.42
43	\$652.11	\$798.83	\$963.54	\$1,180.33	\$392.79	\$481.17	\$362.36	\$443.89
44	\$671.33	\$822.38	\$991.94	\$1,215.13	\$404.37	\$495.35	\$373.04	\$456.98
45	\$693.91	\$850.04	\$1,025.31	\$1,256.01	\$417.97	\$512.02	\$385.59	\$472.35
46	\$720.82	\$883.01	\$1,065.07	\$1,304.72	\$434.18	\$531.87	\$400.55	\$490.67
47	\$751.10	\$920.10	\$1,109.81	\$1,359.51	\$452.42	\$554.21	\$417.37	\$511.28
48	\$785.70	\$962.48	\$1,160.93	\$1,422.14	\$473.26	\$579.74	\$436.60	\$534.83
49	\$819.82	\$1,004.28	\$1,211.34	\$1,483.90	\$493.81	\$604.92	\$455.55	\$558.05
50	\$858.26	\$1,180.11	\$1,268.15	\$1,743.70	\$516.97	\$710.83	\$476.92	\$655.76
51	\$896.22	\$1,232.31	\$1,324.24	\$1,820.83	\$539.83	\$742.27	\$498.01	\$684.77
52	\$938.03	\$1,289.79	\$1,386.02	\$1,905.77	\$565.02	\$776.90	\$521.24	\$716.71
53	\$980.32	\$1,347.94	\$1,448.50	\$1,991.69	\$590.49	\$811.92	\$544.74	\$749.02
54	\$1,025.97	\$1,410.71	\$1,515.96	\$2,084.44	\$617.99	\$849.73	\$570.11	\$783.90
55	\$1,071.62	\$1,473.48	\$1,583.41	\$2,177.19	\$645.48	\$887.54	\$595.48	\$818.78
56	\$1,121.12	\$1,541.54	\$1,656.55	\$2,277.75	\$675.30	\$928.53	\$622.98	\$856.60
57	\$1,171.10	\$1,610.26	\$1,730.39	\$2,379.29	\$705.40	\$969.93	\$650.75	\$894.79
58	\$1,224.44	\$1,683.60	\$1,809.21	\$2,487.66	\$737.53	\$1,014.10	\$680.39	\$935.54
59	\$1,250.87	\$1,719.95	\$1,848.26	\$2,541.36	\$753.45	\$1,035.99	\$695.08	\$955.74
60	\$1,304.21	\$1,793.29	\$1,927.07	\$2,649.73	\$785.58	\$1,080.17	\$724.72	\$996.49
61	\$1,350.34	\$1,856.72	\$1,995.24	\$2,743.45	\$813.37	\$1,118.38	\$750.36	\$1,031.74
62	\$1,380.62	\$1,898.35	\$2,039.97	\$2,804.96	\$831.60	\$1,143.45	\$767.18	\$1,054.87
63	\$1,418.58	\$1,950.55	\$2,096.07	\$2,882.09	\$854.47	\$1,174.90	\$788.28	\$1,083.88
64+	\$1,441.65	\$1,982.27	\$2,130.15	\$2,928.95	\$868.35	\$1,194.00	\$801.09	\$1,101.50

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

HIOS Plan ID (On Exchange)=>	31609PA0180006		31609PA0190002		31609PA0190003		31609PA0190004	
HIOS Plan ID (Off Exchange)=>	31609PA0180006		31609PA0190002		31609PA0190003		31609PA0190004	
Plan Marketing Name =>	Personal Choice Silver EPO Reserve Select		Personal Choice PPO Gold		Personal Choice PPO Silver		Personal Choice PPO Bronze	
Form # =>	08536 Rev. 1.16		08535 Rev. 1.16		08535 Rev. 1.16		08535 Rev. 1.16	
Rating Area =>	8		8		8		8	
Network =>	Personal Choice Network		Personal Choice Network		Personal Choice Network		Personal Choice Network	
Metal =>	Silver		Gold		Silver		Bronze	
Deductible =>	\$2,700		\$0		\$2,500		\$5,500	
Coinsurance =>	30%		20%		30%		50%	
Copays =>	30% after ded/30% after ded		\$30/\$65		\$30/\$70 no ded		\$50 no ded/50% after ded	
OOP Maximum =>	\$6,700		\$6,500		\$7,000		\$7,900	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0-14	\$306.88	\$306.88	\$406.31	\$406.31	\$368.40	\$368.40	\$240.61	\$240.61
15	\$334.15	\$334.15	\$442.42	\$442.42	\$401.15	\$401.15	\$261.99	\$261.99
16	\$344.58	\$344.58	\$456.23	\$456.23	\$413.67	\$413.67	\$270.17	\$270.17
17	\$355.01	\$355.01	\$470.04	\$470.04	\$426.19	\$426.19	\$278.35	\$278.35
18	\$366.24	\$366.24	\$484.91	\$484.91	\$439.68	\$439.68	\$287.15	\$287.15
19	\$377.48	\$377.48	\$499.78	\$499.78	\$453.16	\$453.16	\$295.96	\$295.96
20	\$389.11	\$389.11	\$515.19	\$515.19	\$467.13	\$467.13	\$305.08	\$305.08
21	\$401.14	\$451.29	\$531.12	\$597.51	\$481.58	\$541.77	\$314.52	\$353.83
22	\$401.14	\$451.29	\$531.12	\$597.51	\$481.58	\$541.77	\$314.52	\$353.83
23	\$401.14	\$451.29	\$531.12	\$597.51	\$481.58	\$541.77	\$314.52	\$353.83
24	\$401.14	\$451.29	\$531.12	\$597.51	\$481.58	\$541.77	\$314.52	\$353.83
25	\$402.75	\$453.09	\$533.25	\$599.90	\$483.50	\$543.94	\$315.77	\$355.25
26	\$410.77	\$462.12	\$543.87	\$611.85	\$493.13	\$554.77	\$322.06	\$362.32
27	\$420.40	\$472.95	\$556.61	\$626.19	\$504.69	\$567.78	\$329.61	\$370.81
28	\$436.04	\$490.55	\$577.33	\$649.49	\$523.47	\$588.91	\$341.88	\$384.61
29	\$448.88	\$504.99	\$594.32	\$668.61	\$538.88	\$606.24	\$351.94	\$395.94
30	\$455.30	\$534.98	\$602.82	\$708.32	\$546.59	\$642.24	\$356.98	\$419.45
31	\$464.93	\$546.29	\$615.57	\$723.29	\$558.15	\$655.82	\$364.52	\$428.32
32	\$474.55	\$557.60	\$628.32	\$738.27	\$569.70	\$669.40	\$372.07	\$437.19
33	\$480.57	\$564.67	\$636.28	\$747.63	\$576.93	\$677.89	\$376.79	\$442.73
34	\$486.99	\$572.21	\$644.78	\$757.62	\$584.63	\$686.94	\$381.82	\$448.64
35	\$490.20	\$575.98	\$649.03	\$762.61	\$588.48	\$691.47	\$384.34	\$451.60
36	\$493.41	\$579.75	\$653.28	\$767.60	\$592.34	\$696.00	\$386.86	\$454.55
37	\$496.62	\$583.52	\$657.53	\$772.59	\$596.19	\$700.52	\$389.37	\$457.51
38	\$499.83	\$587.30	\$661.78	\$777.59	\$600.04	\$705.05	\$391.89	\$460.47
39	\$506.24	\$594.84	\$670.27	\$787.57	\$607.75	\$714.10	\$396.92	\$466.38
40	\$512.66	\$628.01	\$678.77	\$831.50	\$615.45	\$753.93	\$401.95	\$492.39
41	\$522.29	\$639.81	\$691.52	\$847.11	\$627.01	\$768.09	\$409.50	\$501.64
42	\$531.52	\$651.11	\$703.73	\$862.08	\$638.09	\$781.66	\$416.73	\$510.50
43	\$544.35	\$666.83	\$720.73	\$882.90	\$653.50	\$800.53	\$426.80	\$522.83
44	\$560.40	\$686.49	\$741.98	\$908.92	\$672.76	\$824.13	\$439.38	\$538.24
45	\$579.25	\$709.58	\$766.94	\$939.50	\$695.39	\$851.86	\$454.16	\$556.35
46	\$601.72	\$737.10	\$796.68	\$975.93	\$722.36	\$884.89	\$471.77	\$577.92
47	\$626.99	\$768.06	\$830.14	\$1,016.92	\$752.70	\$922.06	\$491.59	\$602.20
48	\$655.87	\$803.44	\$868.38	\$1,063.77	\$787.38	\$964.53	\$514.23	\$629.94
49	\$684.35	\$838.33	\$906.09	\$1,109.96	\$821.57	\$1,006.42	\$536.57	\$657.29
50	\$716.44	\$985.11	\$948.58	\$1,304.30	\$860.09	\$1,182.63	\$561.73	\$772.37
51	\$748.13	\$1,028.68	\$990.54	\$1,361.99	\$898.14	\$1,234.94	\$586.57	\$806.54
52	\$783.03	\$1,076.67	\$1,036.75	\$1,425.53	\$940.03	\$1,292.55	\$613.94	\$844.16
53	\$818.33	\$1,125.21	\$1,083.49	\$1,489.79	\$982.41	\$1,350.82	\$641.61	\$882.22
54	\$856.44	\$1,177.61	\$1,133.94	\$1,559.17	\$1,028.16	\$1,413.72	\$671.49	\$923.30
55	\$894.55	\$1,230.01	\$1,184.40	\$1,628.55	\$1,073.91	\$1,476.63	\$701.37	\$964.39
56	\$935.87	\$1,286.82	\$1,239.10	\$1,703.77	\$1,123.51	\$1,544.83	\$733.77	\$1,008.93
57	\$977.59	\$1,344.18	\$1,294.34	\$1,779.72	\$1,173.60	\$1,613.70	\$766.48	\$1,053.91
58	\$1,022.12	\$1,405.41	\$1,353.30	\$1,860.78	\$1,227.05	\$1,687.20	\$801.39	\$1,101.91
59	\$1,044.18	\$1,435.75	\$1,382.51	\$1,900.95	\$1,253.54	\$1,723.62	\$818.69	\$1,125.69
60	\$1,088.71	\$1,496.97	\$1,441.46	\$1,982.01	\$1,306.99	\$1,797.12	\$853.60	\$1,173.70
61	\$1,127.22	\$1,549.92	\$1,492.45	\$2,052.12	\$1,353.23	\$1,860.69	\$883.79	\$1,215.21
62	\$1,152.49	\$1,584.67	\$1,525.91	\$2,098.13	\$1,383.57	\$1,902.40	\$903.61	\$1,242.46
63	\$1,184.18	\$1,628.25	\$1,567.87	\$2,155.82	\$1,421.61	\$1,954.71	\$928.45	\$1,276.62
64+	\$1,203.42	\$1,654.72	\$1,593.36	\$2,190.87	\$1,444.73	\$1,986.50	\$943.55	\$1,297.38

**QCC Insurance Company
Individual
Plan Design Summary**

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
31609PA0070002	Personal Choice PPO Gold	PPO	Gold	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0070003	Personal Choice PPO Silver	PPO	Silver	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0070004	Personal Choice PPO Bronze	PPO	Bronze	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0160001	Personal Choice EPO Catastrophic	EPO	Catastrophic	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0160003	Personal Choice EPO Silver Reserve	EPO	Silver	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0160004	Personal Choice EPO Platinum	EPO	Platinum	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0160005	Personal Choice EPO Bronze Reserve	EPO	Bronze	On	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180001	Personal Choice EPO Catastrophic	EPO	Catastrophic	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180002	Personal Choice EPO Silver Reserve	EPO	Silver	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180003	Personal Choice EPO Platinum	EPO	Platinum	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180004	Personal Choice EPO Bronze Reserve	EPO	Bronze	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180005	Personal Choice EPO Bronze Basic	EPO	Bronze	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0180006	Personal Choice EPO Silver Reserve Select	EPO	Silver	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0190002	Personal Choice PPO Gold	PPO	Gold	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0190003	Personal Choice PPO Silver	PPO	Silver	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia
31609PA0190004	Personal Choice PPO Bronze	PPO	Bronze	Off	Personal Choice	8	Bucks, Chester, Delaware, Montgomery, Philadelphia

Company Name QCC Insurance Company
Market Individual

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

02-01-2018 Number of Covered Lives by Rating County					RATING AREA 8				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	7,243	7,560	6,532	10,394	9,277
					Bucks	Chester	Delaware	Montgomery	Philadelphia
31609PA0070002	Personal Choice PPO Gold	PPO	Gold	On	\$531.12	\$531.12	\$531.12	\$531.12	\$531.12
31609PA0070003	Personal Choice PPO Silver	PPO	Silver	On	\$481.58	\$481.58	\$481.58	\$481.58	\$481.58
31609PA0070004	Personal Choice PPO Bronze	PPO	Bronze	On	\$314.52	\$314.52	\$314.52	\$314.52	\$314.52
31609PA0160001	Personal Choice EPO Catastrophic	EPO	Catastrophic	On	\$260.82	\$260.82	\$260.82	\$260.82	\$260.82
31609PA0160003	Personal Choice EPO Silver Reserve	EPO	Silver	On	\$480.55	\$480.55	\$480.55	\$480.55	\$480.55
31609PA0160004	Personal Choice EPO Platinum	EPO	Platinum	On	\$710.05	\$710.05	\$710.05	\$710.05	\$710.05
31609PA0160005	Personal Choice EPO Bronze Reserve	EPO	Bronze	On	\$289.45	\$289.45	\$289.45	\$289.45	\$289.45
31609PA0180001	Personal Choice EPO Catastrophic	EPO	Catastrophic	Off	\$260.82	\$260.82	\$260.82	\$260.82	\$260.82
31609PA0180002	Personal Choice EPO Silver Reserve	EPO	Silver	Off	\$480.55	\$480.55	\$480.55	\$480.55	\$480.55
31609PA0180003	Personal Choice EPO Platinum	EPO	Platinum	Off	\$710.05	\$710.05	\$710.05	\$710.05	\$710.05
31609PA0180004	Personal Choice EPO Bronze Reserve	EPO	Bronze	Off	\$289.45	\$289.45	\$289.45	\$289.45	\$289.45
31609PA0180005	Personal Choice EPO Bronze Basic	EPO	Bronze	Off	\$267.03	\$267.03	\$267.03	\$267.03	\$267.03
31609PA0180006	Personal Choice EPO Silver Reserve Select	EPO	Silver	Off	\$401.14	\$401.14	\$401.14	\$401.14	\$401.14
31609PA0190002	Personal Choice PPO Gold	PPO	Gold	Off	\$531.12	\$531.12	\$531.12	\$531.12	\$531.12
31609PA0190003	Personal Choice PPO Silver	PPO	Silver	Off	\$481.58	\$481.58	\$481.58	\$481.58	\$481.58
31609PA0190004	Personal Choice PPO Bronze	PPO	Bronze	Off	\$314.52	\$314.52	\$314.52	\$314.52	\$314.52

1	Unified Rate Review v4.3																												
2																													
3	Company Legal Name:				QCC				State:				PA																
4	HIOS Issuer ID:				31609				Market:				Individual																
5	Effective Date of Rate Change(s):				1/1/2019																								
6																													
7																													
8	Market Level Calculations (Same for all Plans)																												
9																													
10																													
11	Section I: Experience period data																												
12	Experience Period:				1/1/2017			to			12/31/2017																		
13					Experience Period			Aggregate Amount			PMPM			% of Prem															
14	Premiums (net of MLR Rebate) in Experience Period:				\$ 332,977,300.00			\$562.76			100.00%																		
15	Incurred Claims in Experience Period				\$ 308,586,596.00			521.54			92.67%																		
16	Allowed Claims:				\$ 385,788,886.00			652.02			115.86%																		
17	Index Rate of Experience Period							\$ 652.02																					
18	Experience Period Member Months				591,685																								
19																													
20	Section II: Allowed Claims, PMPM basis																												
21					Experience Period			Projection Period:			1/1/2019 to			12/31/2019			Mid-point to Mid-point, Experience to Projection:								24 months				
22					on Actual Experience Allowed			Adj't. from Experience to			Annualized Trend			Projections, before credibility Adjustment			Credibility Manual												
23	Benefit Category				Utilization per			Average			PMPM			Pop'l risk			Utilization per			Average			PMPM						
24					Description			1,000			Cost/Service			Morbidity			Other			Cost			Util						
25	Inpatient Hospital				Admits			139.57			\$11,665.23			\$135.68			1.060			1.017			1.039			1.047			
26	Outpatient Hospital				Services			5,149.11			374.90			160.87			1.060			1.017			1.038			1.047			
27	Professional				Services			24,421.61			90.35			183.87			1.060			1.017			1.017			1.047			
28	Other Medical				Services			0.59			0.00			0.00			1.060			1.017			1.017			1.047			
29	Capitation				Services			12,000.00			10.68			10.68			1.060			1.017			1.027			1.000			
30	Prescription Drug				Prescriptions			17,567.21			109.93			160.93			1.060			1.017			1.063			1.053			
31	Total										\$652.02																		
32	Section III: Projected Experience:				Projected Allowed Claims PMPM (w/applied credibility if applicable)												100.00%			0.00%			After Credibility			Projected Period Totals			
33					Paid to Allowed Average Factor in Projection Period																		0.764			\$409,524,829			
34					Projected Incurred Claims, before ACA rein & Risk Adj't, PMPM																		\$636.04			312,976,042			
35					Projected Risk Adjustments PMPM																		51.62			25,400,757			
36					Projected Incurred Claims, before reinsurance recoveries, net of rein prem, PMPM																		\$584.42			287,575,286			
37					Projected ACA reinsurance recoveries, net of rein prem, PMPM																		0.00			0			
38					Projected Incurred Claims																		\$584.42			287,575,286			
39					Administrative Expense Load																		11.00%			76.01		37,400,427	
40					Profit & Risk Load																		2.00%			13.82		6,800,078	
41					Taxes & Fees																		2.42%			16.72		8,228,094	
42					Single Risk Pool Gross Premium Avg. Rate, PMPM																					\$690.96		340,003,885	
43					Index Rate for Projection Period																		\$			832.25			
44					% Increase over Experience Period																					22.78%			
45					% Increase, annualized:																					10.81%			
46					Projected Member Months																							492,072	
47																													
48																													
49	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.																												
50																													

Product-Plan Data Collection

Company Legal Name:
HIOS Issuer ID:
Effective Date of Rate Change(s):

QCC
31609
1/1/2019

State: **PA**
Market: **Individual**

Product/Plan Level Calculations

Section I: General Product and Plan Information

Product	Personal Choice ON Exchange PPO Indiv			Personal Choice ON Exchange EPO				Personal Choice OFF Exchange EPO						Personal Choice OFF Exchange PPO Indiv		
Product ID:	31609PA007			31609PA016				31609PA018						31609PA019		
Metal:	Gold	Silver	Bronze	Catastrophic	Silver	Platinum	Bronze	Catastrophic	Silver	Platinum	Bronze	Bronze	Silver	Gold	Silver	Bronze
AV Metal Value	0.801	0.716	0.618	0.604	0.678	0.879	0.612	0.604	0.678	0.879	0.612	0.606	0.678	0.801	0.716	0.618
AV Pricing Value	1.010	0.916	0.598	0.496	0.914	1.351	0.551	0.496	0.914	1.351	0.551	0.508	0.763	1.010	0.916	0.598
Plan Category	Renewing PPO	Renewing PPO	Renewing PPO	Renewing EPO	Renewing EPO	Renewing EPO	Renewing EPO	Renewing EPO	Renewing EPO	Renewing EPO	Renewing EPO	Renewing EPO	Renewing EPO	Renewing PPO	Renewing PPO	Renewing PPO
Plan Type:																
Plan Name	Personal Choice PPO Gold	Personal Choice PPO Silver	Personal Choice PPO Bronze	Personal Choice EPO Catastrophic	Personal Choice EPO Silver Reserve	Personal Choice EPO Platinum Reserve	Personal Choice EPO Bronze Reserve	Personal Choice EPO Catastrophic	Personal Choice EPO Silver Reserve	Personal Choice EPO Platinum Reserve	Personal Choice EPO Bronze Reserve	Personal Choice EPO Bronze Basic Reserve	Personal Choice EPO Silver Reserve Select	Personal Choice PPO Gold	Personal Choice PPO Silver	Personal Choice PPO Bronze
Plan ID (Standard Component ID):	31609PA0070002	31609PA0070003	31609PA0070004	31609PA0160001	31609PA0160003	31609PA0160004	31609PA0160005	31609PA0180001	31609PA0180002	31609PA0180003	31609PA0180004	31609PA0180005	31609PA0180006	31609PA0190002	31609PA0190003	31609PA0190004
Exchange Plan?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No	No	No	No	No
Historical Rate Increase - Calendar Year - 2	4.42%			4.42%				4.42%						4.42%		
Historical Rate Increase - Calendar Year - 1	14.11%			14.11%				14.11%						14.11%		
Historical Rate Increase - Calendar Year 0	-6.44%			-6.44%				-6.44%						-6.44%		
Effective Date of Proposed Rates	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019	1/1/2019
Rate Change % (over prior filing)	-7.31%	-4.54%	-8.33%	-8.19%	-3.37%	-7.32%	-7.66%	-8.19%	-3.37%	-7.32%	-7.66%	-8.19%	-7.42%	-7.31%	-4.54%	-8.33%
Cumulative Rate Change % (over 12 mos prior)	-7.31%	-4.54%	-8.33%	-8.19%	-3.37%	-7.32%	-7.66%	-8.19%	-3.37%	-7.32%	-7.66%	-8.19%	-7.42%	-7.31%	-4.54%	-8.33%
Proj'd Per Rate Change % (over Exper. Period)	19.49%	36.82%	13.56%	87.94%	#DIV/0!	24.66%	10.13%	88.25%	#DIV/0!	33.76%	5.94%	15.79%	#DIV/0!	25.99%	46.86%	17.10%
Product Rate Increase %	-5.62%			-7.05%				-7.64%						-6.68%		

Section II: Components of Premium Increase (PMPM Dollar Amount above Current Average Rate PMPM)

Plan ID (Standard Component ID):	Total	31609PA0070002	31609PA0070003	31609PA0070004	31609PA0160001	31609PA0160003	31609PA0160004	31609PA0160005	31609PA0180001	31609PA0180002	31609PA0180003	31609PA0180004	31609PA0180005	31609PA0180006	31609PA0190002	31609PA0190003	31609PA0190004
Inpatient	-\$8.74	-\$12.45	-\$7.20	-\$8.25	-\$4.26	-\$5.47	-\$16.67	-\$6.96	-\$4.24	-\$4.50	-\$15.50	-\$7.99	-\$7.58	-\$9.76	-\$12.13	-\$6.83	-\$8.70
Outpatient	-\$10.36	-\$14.75	-\$8.53	-\$9.77	-\$5.04	-\$6.48	-\$19.75	-\$8.24	-\$5.02	-\$5.33	-\$18.36	-\$9.46	-\$8.98	-\$11.57	-\$14.36	-\$8.09	-\$10.30
Professional	-\$11.36	-\$16.19	-\$9.36	-\$10.72	-\$5.53	-\$7.11	-\$21.67	-\$9.05	-\$5.51	-\$5.85	-\$20.15	-\$10.39	-\$9.86	-\$12.69	-\$15.76	-\$8.88	-\$11.31
Prescription Drug	-\$11.00	-\$15.67	-\$9.06	-\$10.38	-\$5.36	-\$6.88	-\$20.97	-\$8.76	-\$5.33	-\$5.66	-\$19.50	-\$10.05	-\$9.54	-\$12.29	-\$15.26	-\$8.60	-\$10.94
Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Capitation	-\$0.61	-\$0.88	-\$0.51	-\$0.58	-\$0.30	-\$0.38	-\$1.17	-\$0.49	-\$0.30	-\$0.32	-\$1.09	-\$0.56	-\$0.53	-\$0.69	-\$0.85	-\$0.48	-\$0.61
Administration	-\$5.47	-\$7.80	-\$4.51	-\$5.16	-\$2.66	-\$3.42	-\$10.43	-\$4.36	-\$2.65	-\$2.82	-\$9.70	-\$5.00	-\$4.75	-\$6.11	-\$7.59	-\$4.28	-\$5.44
Taxes & Fees	-\$1.20	-\$1.72	-\$0.99	-\$1.14	-\$0.59	-\$0.75	-\$2.30	-\$0.96	-\$0.58	-\$0.62	-\$2.13	-\$1.10	-\$1.04	-\$1.34	-\$1.67	-\$0.94	-\$1.20
Risk & Profit Charge	-\$0.99	-\$1.42	-\$0.82	-\$0.94	-\$0.48	-\$0.62	-\$1.90	-\$0.79	-\$0.48	-\$0.51	-\$1.76	-\$0.91	-\$0.86	-\$1.11	-\$1.38	-\$0.78	-\$0.99
Total Rate Increase	-\$49.75	-\$70.87	-\$40.97	-\$46.95	-\$24.22	-\$31.12	-\$94.86	-\$39.60	-\$24.12	-\$25.59	-\$88.20	-\$45.47	-\$43.16	-\$55.56	-\$69.00	-\$38.87	-\$49.49
Member Cost Share Increase	\$4.48	\$0.00	\$9.66	\$4.74	\$2.26	\$1.41	\$0.00	\$1.58	\$2.25	\$1.16	\$0.00	\$1.81	\$4.03	\$1.14	\$0.00	\$9.17	\$5.00
Average Current Rate PMPM	\$750.51	\$969.12	\$903.04	\$563.75	\$295.83	\$923.84	\$1,295.12	\$516.79	\$294.60	\$759.80	\$1,204.17	\$593.29	\$526.77	\$748.69	\$943.49	\$856.77	\$594.34
Projected Member Months	492,072	35,148	123,960	41,616	5,796	9,468	2,712	90,564	1,272	144	13,356	54,096	15,396	2,124	46,404	27,420	22,596

Section III: Experience Period Information

Plan ID (Standard Component ID):	Total	31609PA0070002	31609PA0070003	31609PA0070004	31609PA0160001	31609PA0160003	31609PA0160004	31609PA0160005	31609PA0180001	31609PA0180002	31609PA0180003	31609PA0180004	31609PA0180005	31609PA0180006	31609PA0190002	31609PA0190003	31609PA0190004
Plan Adjusted Index Rate	\$562.76	\$760.00	\$601.84	\$473.57	\$237.29	\$0.00	\$973.89	\$449.39	\$236.90	\$0.00	\$907.65	\$467.15	\$394.31	\$0.00	\$720.82	\$560.70	\$459.24
Member Months	591,685	27,452	130,141	14,347	5,132	0	11,470	42,823	1,605	0	33,654	72,287	115,435	0	59,989	62,944	14,406
Total Premium (TP)	\$332,977,300	\$20,863,626	\$78,324,454	\$6,794,330	\$1,217,788	\$0	\$11,170,481	\$19,244,432	\$380,218	\$0	\$30,546,188	\$33,768,832	\$45,517,140	\$0	\$43,241,159	\$35,292,810	\$6,615,840
EHB Percent of TP, [see instructions]	99.68%	100.00%	99.12%	100.00%	100.00%	100.00%	100.00%	100.00%	99.86%	100.00%	100.00%	100.00%	100.00%	100.00%	99.86%	99.12%	99.86%
state mandated benefits portion of TP that are other than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TP	0.32%	0.00%	0.88%	0.00%	0.00%	0.00%	0.00%	0.00%	0.14%	0.00%	0.00%	0.00%	0.00%	0.00%	0.14%	0.88%	0.14%
Total Allowed Claims (TAC)	\$384,205,634	\$29,248,736	\$94,927,995	\$5,106,056	\$820,962	\$0	\$26,390,619	\$21,633,473	\$193,220	\$0	\$54,315,199	\$39,304,632	\$28,429,973	\$0	\$46,281,207	\$33,281,182	\$4,272,380
EHB Percent of TAC, [see instructions]	99.69%	100.00%	99.12%	100.00%	100.00%	100.00%	100.00%	100.00%	99.86%	100.00%	100.00%	100.00%	100.00%	100.00%	99.86%	99.12%	99.86%
state mandated benefits portion of TAC that are other than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TAC	0.31%	0.00%	0.88%	0.00%	0.00%	0.00%	0.00%	0.00%	0.14%	0.00%	0.00%	0.00%	0.00%	0.00%	0.14%	0.88%	0.14%
Allowed Claims which are not the issuer's obligation:	\$79,361,017	\$4,001,564	\$12,046,183	\$1,402,225	\$325,185	\$0	\$1,815,267	\$4,839,113	\$133,294	\$0	\$4,741,268	\$12,066,366	\$10,325,957	\$0	\$8,108,261	\$17,669,881	\$1,886,455
Portion of above payable by HHS's funds on behalf of insured person, in dollars	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Portion of above payable by HHS on behalf of insured person, as %	0.00%	0.00%	0.00%	0.00%	0.00%	#DIV/0!	0.00%	0.00%									
Total Incurred claims, payable with issuer funds	\$304,844,617	\$25,247,172	\$82,881,812	\$3,703,831	\$495,777	\$0	\$24,575,352	\$16,794,360	\$59,927	\$0	\$49,573,931	\$27,238,266	\$18,104,016	\$0	\$38,172,947	\$15,611,301	\$2,385,925
Net Amt of Rein	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Risk Adjustment Transfer Amount	\$50,705,443.77	\$6,504,798.69	\$16,011,742.78	-\$1,520,257.37	-\$429,214.55	\$0.00	\$12,483,532.48	-\$977,858.27	-\$266,849.51	\$0.00	\$21,116,639.85	-\$2,245,870.90	-\$6,092,040.38	\$0.00	\$8,402,258.19	-\$483,261.96	-\$1,798,175.28
Incurred Claims PMPM	\$515.21	\$919.68	\$636.86	\$258.16	\$96.61	#DIV/0!	\$2,142.58	\$392.18	\$37.34	#DIV/0!	\$1,473.05	\$376.81	\$156.83	#DIV/0!	\$636.33	\$248.02	\$165.62
Allowed Claims PMPM	\$649.34	\$1,065.45	\$729.42	\$355.90	\$159.97	#DIV/0!	\$2,300.84	\$505.18	\$120.39	#DIV/0!	\$1,613.93	\$543.73	\$246.29	#DIV/0!	\$771.49	\$528.74	\$296.57
EHB portion of Allowed Claims, PMPM	\$647.31	\$1,065.45	\$723.01	\$355.90	\$159.97	#DIV/0!	\$2,300.84	\$505.18	\$120.22	#DIV/0!	\$1,613.93	\$543.73	\$246.29	#DIV/0!	\$770.41	\$524.09	\$296.15

Section IV: Projected (12 months following effective date)

Plan ID (Standard Component ID):	Total	31609PA0070002	31609PA0070003	31609PA0070004	31609PA0160001	31609PA0160003	31609PA0160004	31609PA0160005	31609PA0180001	31609PA0180002	31609PA0180003	31609PA0180004	31609PA0180005	31609PA0180006	31609PA0190002	31609PA0190003	31609PA0190004
Plan Adjusted Index Rate	\$698.84	\$908.14	\$823.42	\$537.78	\$445.96	\$821.67	\$1,214.08	\$494.92	\$445.96	\$821.67	\$1,214.08	\$494.92	\$456.58	\$685.90	\$908.14	\$823.42	\$537.78
Member Months	492,072	35,148	123,960	41,616	5,796	9,468	2,712	90,564	1,272	144	13,356	54,096	15,396	2,124	46,404	27,420	22,596
Total Premium (TP)	\$343,881,141	\$31,919,305	\$102,071,143	\$22,380,252	\$2,584,784	\$7,779,572	\$3,292,585	\$44,821,935	\$567,261	\$118,320	\$16,215,252	\$26,773,192	\$7,029,506	\$1,456,852	\$42,141,329	\$22,578,176	\$12,151,677
EHB Percent of TP, [see instructions]	99.96%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%
state mandated benefits portion of TP that are other than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TP	0.04%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.10%	0.10%	0.10%	0.10%	0.10%	0.10%	0.10%	0.10%	0.10%
Total Allowed Claims (TAC)	\$409,615,961	\$32,482,698	\$101,846,434	\$33,599,418	\$4,138,362	\$7,916,016	\$3,082,611	\$71,600,882	\$908,212	\$120,396	\$15,181,176	\$42,768,885	\$10,538,136	\$1,775,836	\$42,885,146	\$22,528,471	\$18,243,283
EHB Percent of TAC, [see instructions]	99.96%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%
state mandated benefits portion of TAC that are other than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TAC	0.04%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.10%	0.10%	0.10%	0.10%	0.10%	0.10%	0.10%	0.10%	0.10%
Allowed Claims which are not the issuer's obligation:	\$81,437,535	\$1,954,916	\$4,996,159	\$12,138,257	\$1,688,552	\$522,205	-\$90,500	\$28,620,234	\$370,573	\$7,942	-\$445,694	\$17,095,537	\$3,918,537	\$384,057	\$2,580,970	\$1,105,152	\$6,590,639
Portion of above payable by HHS's funds on behalf of insured person, in dollars	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Portion of above payable by HHS on behalf of insured person, as %	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%									
Total Incurred claims, payable with issuer funds	\$328,178,427	\$30,527,782	\$96,850,276	\$21,461,162	\$2,449,809	\$7,393,811	\$3,173,111	\$42,980,648	\$537,639	\$112,453	\$15,626,870	\$25,673,349	\$6,619,599	\$1,391,779	\$40,304,177	\$21,423,318	\$11,652,643
Net Amt of Rein	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Risk Adjustment Transfer Amount	\$25,400,757	\$1,814,340	\$6,398,815	\$2,148,218	\$299,190	\$488,738	\$139,993	\$4,674,914	\$65,661	\$7,433	\$689,437	\$2,792,436	\$794,742	\$109,641	\$2,395,374	\$1,415,420	\$1,166,406
Incurred Claims PMPM	\$666.93	\$868.55	\$781.30	\$515.69	\$422.67	\$780.93	\$1,170.03	\$474.59	\$422.67	\$780.93	\$1,170.03	\$474.59	\$429.96	\$655.26	\$868.55	\$781.30	\$515.69
Allowed Claims PMPM	\$832.43	\$924.17	\$821.61	\$807.37	\$714.00	\$836.08	\$1,136.66	\$790.61	\$714.00	\$836.08	\$1,136.66	\$790.61	\$684.47	\$836.08	\$924.17	\$821.61	\$807.37
EHB portion of Allowed Claims, PMPM	\$832.12	\$924.17	\$821.61	\$807.37	\$714.00	\$836.08	\$1,136.66	\$790.61	\$713.29	\$835.25	\$1,135.52	\$789.82	\$683.79	\$835.25	\$923.25	\$820.79	\$806.56

URRT Part II – Consumer Friendly Justification

Scope and Range of the Rate Increase:

QCC Insurance Company ("QCC") is revising premium rates for the Pennsylvania Consumer ACA compliant products, effective from January 1, 2019. The proposed revisions to each plan are shown on the second page of this exhibit.

About 41,000 members will be affected.

Financial Experience of the Product:

QCC is required by federal law to pay out a minimum of 80% percent of premium dollars for medical claims—this is referred to as the minimum Medical Loss Ratio (MLR). The rate action proposed in this filing is expected to achieve a Medical Loss Ratio of greater than 80% using the state's estimates for individual mandate and CSRs not being funded.

Changes in Medical Service Costs:

Premium rates for health care insurance are increasing as the cost of health care service rise. Health care service costs increase as health care providers increase their fees, members use more health care services and supplies, and the types of health care services and supplies change, among other factors.

Changes include updates for individual mandate penalties and non-funding of CSR payments as well as changes in health care service costs driven by changes to health care provider fees.

Changes in Benefits:

Some plan benefits are mandated by federal and state law. Benefit changes for some plans were also made. All changes in benefits are in compliance with the uniform modifications rules stipulated by the Federal government.

Administrative Costs:

The premium rates presented in this filing include a 2% contribution to reserves. Furthermore, the Affordable Care Act (ACA) imposes taxes and other levies.

URRT Part II – Consumer Friendly Justification

HIOS Plan ID	Plan Name	2019 % Change
31609PA0160004	Personal Choice EPO Platinum	-7.3%
31609PA0070002	Personal Choice PPO Gold	-7.3%
31609PA0070003	Personal Choice PPO Silver	-4.5%
31609PA0070004	Personal Choice PPO Bronze	-8.3%
31609PA0160005	Personal Choice Bronze Reserve	-7.7%
31609PA0160001	Personal Choice Catastrophic	-8.2%
31609PA0180005	Personal Choice Bronze Basic	-8.2%
31609PA0180003	Personal Choice Platinum	-7.3%
31609PA0190002	Personal Choice PPO Gold	-7.3%
31609PA0190003	Personal Choice PPO Silver	-4.5%
31609PA0190004	Personal Choice PPO Bronze	-8.3%
31609PA0180001	Personal Choice Catastrophic	-8.2%
31609PA0180004	Personal Choice Bronze Reserve	-7.7%
31609PA0180006	Personal Choice EPO Silver Reserve Select	-7.4%
31609PA0160003	Personal Choice EPO Silver Reserve	-3.4%
31609PA0180002	Personal Choice EPO Silver Reserve	-3.4%

GENERAL OVERVIEW

PURPOSES

This Actuarial Memorandum is provided along with the Unified Rate Review Template (URRT) to provide certain information to support the gross premium for the single risk pool for individual market health care insurance underwritten by QCC Insurance Company, Inc. in the Commonwealth of Pennsylvania. It is provided as a component of an application for certification as a Qualified Health Plan and a state rate filing. This submission may not be appropriate for other purposes.

GENERAL INFORMATION

COMPANY IDENTIFYING INFORMATION

Company Legal Name: QCC Insurance Company, Inc. ("QCC")

State: Pennsylvania

HIOS Issuer ID (5-digit): 31609

Market: Individual

Effective Date(s): 1/1/2019

Worksheet 1 of the accompanying URRT contains experience period data and development of the projected Single Risk Pool Gross Premium Average Rate PMPM for the individual market for QCC. Worksheet 2 contains experience period data and projections by product for the single risk pool for the same entities.

COMPANY CONTACT INFORMATION

Primary Contact Name:

Primary Contact Telephone Number:

Primary Contact Email Address:

PROPOSED RATE INCREASE

The changes to the single risk pool gross premium average rate per member per month (PMPM) from calendar year 2017 to calendar year 2019 were incorporated into the pricing and reflected in the Unified Rate Review Template. The changes are driven by factors including: changes in market-wide population risk morbidity and covered services, increasing unit costs for medical services, increasing utilization of medical services, increasing fees and taxes imposed by the federal government, anticipated costs to administer the plan, and anticipated revenue or payments due to market-wide risk adjustment.

The weighted average increase across QCC plans based on projected membership, inclusive of the impact of benefit and cost sharing changes, is -6.4%. The minimum increase is -8.3% and the maximum increase is -3.4%.

WORKSHEET 1: DATA COLLECTION TEMPLATE

SECTION I: EXPERIENCE PERIOD PREMIUM AND CLAIMS

PAID THROUGH DATE

Experience period premium, claims, and member months are obtained from the company's internal data warehouse. The claims data is collected for incurred dates from January through December 2017 and paid through February 2018. Earned premiums and member months are for January through December 2017. The data are for all direct-written individual business of QCC in the Commonwealth of Pennsylvania.

PREMIUMS (NET OF MLR REBATE) IN EXPERIENCE PERIOD

Earned Premiums (net of MLR Rebate) in Experience Period are developed by summing the earned premium reported in the company's internal data warehouse and adjusting for MLR rebates, if any, for the period. Although 2017 federal MLR rebate calculations are not final as of the writing of this memorandum, no federal MLR rebates are expected for calendar year 2017, so no adjustment to earned premium for MLR rebates is needed.

The calculation for federal minimum loss ratio rebates is based on 2015, 2016, and 2017 experience of earned premium, incurred claims, quality improvement expenses, and taxes. The three years of experience is blended for all segments.

ALLOWED AND INCURRED CLAIMS INCURRED DURING THE EXPERIENCE PERIOD

Paid-to-Date and Incurred Claims, and Member Months

Insurer fee-for-service claims expenses and member liabilities for dates of service in January 2017 through December 2017 and paid through February 2018 are sourced from the IBCFOC's internal data warehouse. The claims and member liabilities are completed with incurred but not reported (IBNR) adjustments to develop ultimate incurred insurer fee-for-service claims expenses and member liabilities for the January through December 2017 period. Capitation amounts are also sourced from the internal data warehouse for the January through December 2017 period but they are not adjusted for IBNR.

Allowed Claims

Allowed claims are determined by separately obtaining paid-to-date fee-for-service claims and member cost-sharing amounts, applying claim lag factors to those amounts to estimate ultimate incurred fee-for-service claims and member-sharing amounts and adding them together with capitation amounts.

Allowed claims do not include ineligible claims, payments for services other than medical care provided, recovery payments related to internal large claim pooling mechanisms, or active live reserves.

IBNR Development

Medical fee for service incurred but not reported (IBNR) claims are modeled through the use of standard claim lag methodologies. A range of results is developed, and a provision for adverse deviation is applied. The provision for adverse deviation is dependent on many factors such as stability, size, product mix, etc.

The completion factors are developed annually in the 2Q – 3Q period. We do not believe our IBNR is unusually high or unusually low for incurred 2017 paid through February 2018.

Experience Period Index Rate

The Index Rate of Experience Period is estimated by removing cost and utilization trend from the Index Rate for Projection Period.

SECTION II: ALLOWED CLAIMS, PMPM BASIS**BENEFIT CATEGORIES**

Utilization and Unit Cost data for allowed claims in the experience period are provided in Section II. The data is provided by benefit category using a standardized indicator from the internal data warehouse that assigns each claim line to a category based on the type of provider and the location of the service. The utilization and unit cost data are provided for the following categories: Inpatient Hospital admits, Outpatient Hospital visits, Professional visits, Other Medical visits, Capitation per member per month (PMPM), and Prescription Drug scripts.

Experience Period capitation is reported as a per member per month (PMPM) value. In order to complete the URRT, the Utilization per 1,000 statistics for capitated services only is reported as 1,000 so that the appropriate capitation PMPM is reported.

PROJECTION FACTORS

The estimated incurred claims experience on an allowed basis for January 2017 through December 2017 is projected to the future rating period by several factors. Factors were calculated from the combined experience of QCC and KHPE.

Changes in Population Risk Morbidity

Experience period allowed claims are adjusted to account for differences in the average morbidity of the single risk pool population underlying the experience and the anticipated population in the projection period. This adjustment reflects changes in the individual market-wide morbidity.

Changes in Other Factors

Experience period allowed claims are adjusted to account for differences in the single risk pool population underlying the experience and the anticipated population in the projection period pertaining to several factors not due to changes in morbidity or the costs and utilization of medical care. This adjustment reflects: additional benefits required to be covered as essential health benefits; recently mandated benefits required by state law that are not reflected in the experience period data; benefits in the experience that are removed for the projection period; anticipated changes in the average utilization of services due to differences in average cost sharing requirements during the experience period and average cost sharing requirements in the projection period; changes in demographic characteristics of the single risk pool experience period population and the projection period population (including age, gender, region, and tobacco use); changes in the provider network (adding or removing a provider system or introducing a limited network option); and anticipated changes in pharmacy rebates.

Trend Factors

a. Annualized Cost Trend

Annual cost trend reflects changes in costs of medical treatment due to medical inflation and changes in the distribution of services across network providers. The trend value is developed by reviewing historical medical costs for the single risk pool and adjusting them for anticipated future provider contracting reimbursement levels. The data is normalized for changes in age, benefit changes during the experience period, changes to provider contracts, and prescription drug formulary, and new drugs brought to market.

b. Annualized Utilization Trend

Annual utilization trend reflects the change in the number of units per 1,000 members for a fixed level of illness burden and includes changes due to the mix and intensity of services provided and changes related to shifts in product mix. It also includes effects of selection, if any, since this cannot be reflected in the relative cost of the various products and plans offered.

CREDIBILITY MANUAL RATE DEVELOPMENT

The experience period claims for the single risk pool are determined to be fully credible; therefore no credibility adjustment is required.

SECTION III: PROJECTED EXPERIENCE

PAID TO ALLOWED RATIO

The Projected Allowed Experience Claims PMPM shown in Worksheet 1 represents projected allowed claims experience PMPM for the projected portfolio of plans. The Paid to Allowed Average Factor in Projection Period adjusts the allowed down to Projected Incurred Claims before ACA reinsurance and risk adjustment for the population anticipated to be covered in the projection period. The Projected

Incurred Claims before ACA reinsurance and risk adjustment represents the net amount of incurred insurer claim liability expected in the projection period, net of member cost sharing and cost sharing paid by HHS on behalf of low-income members. It reflects the average benefit level anticipated during the projection period. The ratio was calculated using incurred (before ACA reinsurance and risk adjustment) and allowed PMPMs from worksheet two of the URRT.

RISK ADJUSTMENT AND REINSURANCE

Projected Risk Adjustment PMPM

Projected Risk Adjustment is accounted for in Projected Incurred Claims before ACA Reinsurance and Risk Adjustment to reflect anticipated risk adjustment transfer amounts for the projection period. The amount reflects the projected morbidity for the single risk pool for IBCFOC in the projection period.

The estimated risk adjustment revenue for all of the plans in the risk pool is developed using the following methodology. We recognize that the HHS payment transfer formula implies that the projected incurred claims based solely on the experience period single risk pool claims need to be adjusted by the ratio of the current statewide market's risk relative to allowable rating factor (ARF) for age compared to the single risk pool's risk relative to ARF presented during the experience period. This adjustment, together with the assumed future changes in population risk morbidity, results in the issuer's pricing being consistent with the anticipated morbidity level of the future statewide market.

The anticipated risk adjustment transfer revenue is allocated proportionally based on plan premium. The Projected Risk Adjustment is subtracted from Projected Incurred Claims before ACA Risk Adjustment to reflect anticipated receipt of risk adjustment transfer amounts for the projection period.

When the projected risk adjustment amounts for KHPE and QCC are combined, the result is consistent with the projection made in our submission. We also considered preliminary 2017 risk transfer results.

Projected ACA Reinsurance Recoveries Net of Reinsurance Premium (Individual Market Only)

With the expiration of the reinsurance program at the end of the 2016 benefit year, there are no projected reinsurance recoveries or reinsurance premium assumed in the rates.

NON-BENEFIT EXPENSES AND PROFIT & RISK

Administrative Expense Load

An Administrative Expense Load is applied to Projected Incurred Claims to reflect expenses related to quality improvement and fraud detection/recovery and other expenses of operating a business, broker commissions, and premium payment processing fees.

Profit & Risk Load/Contribution to Surplus

A Profit & Risk Load/Contribution to Surplus for the single risk pool is applied to Projected Incurred Claims for the projection period, if applicable.

Taxes and Fees

A Taxes & Fees load is applied to Projected Incurred Claims to pass through fees and taxes levied by the federal and state governments.

PROJECTED LOSS RATIO

The projected loss ratio for the single risk pool is estimated to exceed 80% reflecting premium adjustments permitted by the federal MLR calculation.

SINGLE RISK POOL

The single risk pool reflects all covered lives for every individual non-grandfathered product and plan combination for QCC in the state of Pennsylvania. It is established according to the Single Risk Pool requirements in 45 CFR § 156.80(d).

INDEX RATE

The Index Rate is defined as the EHB portion of projected allowed claims divided by all projected single risk pool lives. The Index Rate is the same value for all non-grandfathered plans for QCC Individual Plans in Pennsylvania. The Index Rate reflects the twelve month projection for calendar year 2018. It has been developed following the specifications of 45 CFR § 156.80(d)(1).

MARKET ADJUSTED INDEX RATE

The Market Adjusted Index rate is calculated as the Index Rate adjusted for all allowable market-wide modifiers defined in the market rating rules: federal reinsurance program adjustment, risk adjustment and exchange user fees. The Market Adjusted Index Rate reflects the average demographic characteristics of the single risk pool.

PLAN ADJUSTED INDEX RATE

The Plan Adjusted Index Rate is calculated as the issuer Market Adjusted Index Rate adjusted for all allowable plan level modifiers defined in the market rating rule. These include actuarial value and cost sharing adjustment, provider network, delivery system and utilization management adjustment, adjustment for benefits in addition to the EHBs, impact of specific eligibility categories for the catastrophic plan and administrative costs.

CALIBRATION

The plan adjusted index rate is projected for all products using the same anticipated age distribution and the mandated age curve. Therefore the consumer adjusted premium rate is the plan adjusted index rate divided by the average age, geographic and tobacco factors for the expected distribution. The average age of the combined individual risk pool population is 41.

The Average Age factor is the weighted average age factor based on the projected membership. The Tobacco Factor is calculated as the projected average factor for tobacco users multiplied by the projected tobacco use prevalence.

There is only one geographic rating area for this filing. The geographic rating area factor for this filing is 1.0.

WORKSHEET 2: PRODUCT-PLAN DATA COLLECTION

AV METAL VALUES

The AV Metal Values included in Worksheet 2 of the URRT were valued using the AV Calculator, where possible, otherwise the AV Metal Values were developed under an alternate methodology. Actuarial certifications required by 45 CFR Part 156, §156.135 are provided in a separate document.

AV PRICING VALUES

The AV Pricing Value represents the cumulative effect of adjustments made by plan to move from the Market Adjusted Index Rate to the Plan Adjusted Index Rate.

MEMBERSHIP PROJECTIONS

Enrollment is projected based on current and anticipated enrollment by plan. Items impacting these projections include changes in the size of the market due to introduction of guarantee issue requirements, the individual mandate, and the introduction of a Basic Health Program.

TERMINATED PLANS

No plans are being terminated during 2019.

WARNING ALERTS

There are no warning alerts in URRT Part 1.

ACTUARIAL CERTIFICATION

I, [REDACTED], am Director & Actuary of Commercial Markets for the Independence Blue Cross Family of Companies. I am a member of the Society of Actuaries and the American Academy of Actuaries with the education and experience necessary to perform the work necessary and meet the Qualification Standards of the American Academy of Actuaries to render the qualified actuarial opinion contained herein. The developed rates and memorandum have been prepared in conformity with appropriate Actuarial Standards of Practice and the Academy's Code of Professional Conduct.

The Part I Unified Rate Review Template does not demonstrate the process used by the issuer to develop the premium rates and allowable rating factors. Rather, it represents information required by Federal regulation to be provided in support of the review of gross premium rate increases, for certification of qualified health plans for Federally facilitated exchanges, and for certification that the index rate is developed in accordance with Federal regulation and used consistently and only adjusted by the allowable modifiers.

I hereby certify that, to the best of my knowledge and judgment, the following:

- The projected index rate is:
 - In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.08(d)(1) and 147.102);
 - Developed in compliance with applicable Actuarial Standards of Practice;
 - Reasonable in relation to the benefits provided and the population anticipated to be covered; and
 - Neither excessive nor deficient.
- The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates.
- The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice.
- Geographic rating factors reflect only differences in the costs of delivery of and do not include differences for population morbidity by geographic area.
- The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans, unless an alternate methodology was required. If an alternate methodology was used to calculate the AV Metal Value for at least one plan offered, a copy of the actuarial certification required by 45 CFR Part 156, §156.135 will be included.

[REDACTED]
May 20, 2018

2019 Rates Table Template v8.1		<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*	31609				
Federal TIN*	23-2184623				
Rate Effective Date*	1/1/2019				
Rate Expiration Date*	12/31/2019				
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
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	406.31	406.31
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	15	442.42	442.42
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	16	456.23	456.23
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	17	470.04	470.04
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	18	484.91	484.91
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	19	499.78	499.78
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	20	515.19	515.19
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	21	531.12	597.51
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	22	531.12	597.51
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	23	531.12	597.51
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	24	531.12	597.51
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	25	533.25	599.90
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	26	543.87	611.85
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	27	556.61	626.19
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	28	577.33	649.49
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	29	594.32	668.61
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	30	602.82	708.32
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	31	615.57	723.29
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	32	628.32	738.27
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	33	636.28	747.63
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	34	644.78	757.62
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	35	649.03	762.61
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	36	653.28	767.60
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	37	657.53	772.59
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	38	661.78	777.59
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	39	670.27	787.57
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	40	678.77	831.50
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	41	691.52	847.11
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	42	703.73	862.08
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	43	720.73	882.90
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	44	741.98	908.92
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	45	766.94	939.50
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	46	796.68	975.93
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	47	830.14	1016.92
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	48	868.38	1063.77
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	49	906.09	1109.96
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	50	948.58	1304.30
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	51	990.54	1361.99
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	52	1036.75	1425.53
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	53	1083.49	1489.79
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	54	1133.94	1559.17
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	55	1184.40	1628.55
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	56	1239.10	1703.77
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	57	1294.34	1779.72
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	58	1353.30	1860.78
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	59	1382.51	1900.95
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	60	1441.46	1982.01
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	61	1492.45	2052.12
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	62	1525.91	2098.13
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	63	1567.87	2155.82
31609PA0070002	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1593.36	2190.87
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	368.40	368.40
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	15	401.15	401.15
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	16	413.67	413.67
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	17	426.19	426.19
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	18	439.68	439.68
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	19	453.16	453.16
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	20	467.13	467.13
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	21	481.58	541.77
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	22	481.58	541.77
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	23	481.58	541.77
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	24	481.58	541.77
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	25	483.50	543.94
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	26	493.13	554.77
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	27	504.69	567.78
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	28	523.47	588.91
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	29	538.88	606.24
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	30	546.59	642.24
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	31	558.15	655.82
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	32	569.70	669.40
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	33	576.93	677.89
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	34	584.63	686.94
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	35	588.48	691.47
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	36	592.34	696.00
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	37	596.19	700.52
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	38	600.04	705.05
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	39	607.75	714.10
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	40	615.45	753.93
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	41	627.01	768.09
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	42	638.09	781.66
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	43	653.50	800.53
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	44	672.76	824.13
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	45	695.39	851.86
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	46	722.36	884.89
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	47	752.70	922.06
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	48	787.38	964.53
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	49	821.57	1006.42
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	50	860.09	1182.63
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	51	898.14	1234.94
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	52	940.03	1292.55
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	53	982.41	1350.82

31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	54	1028.16	1413.72
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	55	1073.91	1476.63
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	56	1123.51	1544.83
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	57	1173.60	1613.70
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	58	1227.05	1687.20
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	59	1253.54	1723.62
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	60	1306.99	1797.12
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	61	1353.23	1860.69
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	62	1383.57	1902.40
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	63	1421.61	1954.71
31609PA0070003	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1444.73	1986.50
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	240.61	240.61
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	15	261.99	261.99
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	16	270.17	270.17
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	17	278.35	278.35
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	18	287.15	287.15
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	19	295.96	295.96
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	20	305.08	305.08
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	21	314.52	353.83
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	22	314.52	353.83
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	23	314.52	353.83
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	24	314.52	353.83
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	25	315.77	355.25
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	26	322.06	362.32
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	27	329.61	370.81
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	28	341.88	384.61
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	29	351.94	395.94
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	30	356.98	419.45
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	31	364.52	428.32
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	32	372.07	437.19
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	33	376.79	442.73
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	34	381.82	448.64
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	35	384.34	451.60
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	36	386.86	454.55
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	37	389.37	457.51
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	38	391.89	460.47
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	39	396.92	466.38
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	40	401.95	492.39
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	41	409.50	501.64
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	42	416.73	510.50
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	43	426.80	522.83
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	44	439.38	538.24
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	45	454.16	556.35
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	46	471.77	577.92
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	47	491.59	602.20
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	48	514.23	629.94
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	49	536.57	657.29
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	50	561.73	772.37
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	51	586.57	806.54
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	52	613.94	844.16
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	53	641.61	882.22
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	54	671.49	923.30
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	55	701.37	964.39
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	56	733.77	1008.93
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	57	766.48	1053.91
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	58	801.39	1101.91
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	59	818.69	1125.69
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	60	853.60	1173.70
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	61	883.79	1215.21
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	62	903.61	1242.46
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	63	928.45	1276.62
31609PA0070004	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	943.55	1297.38
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	199.53	199.53
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	15	217.26	217.26
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	16	224.04	224.04
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	17	230.83	230.83
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	18	238.13	238.13
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	19	245.43	245.43
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	20	253.00	253.00
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	21	260.82	293.42
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	22	260.82	293.42
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	23	260.82	293.42
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	24	260.82	293.42
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	25	261.86	294.60
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	26	267.08	300.47
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	27	273.34	307.51
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	28	283.51	318.95
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	29	291.86	326.34
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	30	296.03	347.84
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	31	302.29	355.19
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	32	308.55	362.55
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	33	312.46	367.14
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	34	316.64	372.05
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	35	318.72	374.50
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	36	320.81	376.95
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	37	322.90	379.40
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	38	324.98	381.85
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	39	329.16	386.76
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	40	333.33	408.33
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	41	339.59	416.00
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	42	345.59	423.34
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	43	353.93	433.57
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	44	364.37	446.35
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	45	376.63	461.37
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	46	391.23	479.26
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	47	407.66	499.39
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	48	426.44	522.39
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	49	444.96	545.08
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	50	465.83	640.51
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	51	486.43	668.84
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	52	509.12	700.04
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	53	532.07	731.60
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	54	556.85	765.67
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	55	581.63	799.74
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	56	608.49	836.68
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	57	635.62	873.98
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	58	664.57	913.79
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	59	678.92	933.51
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	60	707.87	973.32
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	61	732.91	1007.75
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	62	749.34	1030.34

31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	63	769.94	1058.67
31609PA0160001	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	782.46	1075.89
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	367.62	367.62
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	15	400.30	400.30
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	16	412.79	412.79
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	17	425.29	425.29
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	18	438.74	438.74
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	19	452.20	452.20
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	20	466.13	466.13
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	21	480.55	540.62
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	22	480.55	540.62
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	23	480.55	540.62
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	24	480.55	540.62
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	25	482.47	542.78
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	26	492.08	553.59
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	27	503.62	566.57
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	28	522.36	587.65
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	29	537.73	604.95
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	30	545.42	640.87
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	31	556.96	654.42
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	32	568.49	667.98
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	33	575.70	676.44
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	34	583.39	685.48
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	35	587.23	690.00
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	36	591.08	694.51
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	37	594.92	699.03
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	38	598.76	703.55
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	39	606.45	712.58
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	40	614.14	752.32
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	41	625.67	766.45
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	42	636.73	779.99
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	43	652.11	798.83
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	44	671.33	822.38
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	45	693.91	850.04
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	46	720.82	883.01
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	47	751.10	920.10
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	48	785.70	962.48
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	49	819.82	1004.28
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	50	858.26	1180.11
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	51	896.22	1232.31
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	52	938.03	1289.79
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	53	980.32	1347.94
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	54	1025.97	1410.71
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	55	1071.62	1473.48
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	56	1121.12	1541.54
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	57	1171.10	1610.26
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	58	1224.44	1683.60
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	59	1250.87	1719.95
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	60	1304.21	1793.29
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	61	1350.34	1856.72
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	62	1380.62	1898.35
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	63	1418.58	1950.55
31609PA0160003	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1441.65	1982.27
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	543.19	543.19
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	15	591.47	591.47
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	16	609.93	609.93

31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	17	628.39	628.39
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	18	648.28	648.28
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	19	668.16	668.16
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	20	688.75	688.75
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	21	710.05	798.81
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	22	710.05	798.81
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	23	710.05	798.81
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	24	710.05	798.81
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	25	712.89	802.00
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	26	727.09	817.98
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	27	744.13	837.15
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	28	771.82	868.30
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	29	794.55	893.86
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	30	805.91	946.94
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	31	822.95	966.96
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	32	839.99	986.99
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	33	850.64	999.50
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	34	862.00	1012.85
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	35	867.68	1019.52
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	36	873.36	1026.20
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	37	879.04	1032.87
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	38	884.72	1039.55
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	39	896.08	1052.90
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	40	907.44	1111.62
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	41	924.48	1132.49
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	42	940.82	1152.50
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	43	963.54	1180.33
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	44	991.94	1215.13
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	45	1025.31	1256.01
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	46	1065.07	1304.72
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	47	1109.81	1359.51
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	48	1160.93	1422.14
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	49	1211.34	1483.90
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	50	1268.15	1743.70
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	51	1324.24	1820.83
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	52	1386.02	1905.77
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	53	1448.50	1991.69
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	54	1515.96	2084.44
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	55	1583.41	2177.19
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	56	1656.55	2277.75
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	57	1730.39	2379.29
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	58	1809.21	2487.66
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	59	1848.26	2541.36
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	60	1927.07	2649.73
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	61	1995.24	2743.45
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	62	2039.97	2804.96
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	63	2096.07	2882.09
31609PA0160004	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	2130.15	2928.95
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	221.43	221.43
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	15	241.12	241.12
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	16	248.64	248.64
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	17	256.17	256.17
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	18	264.27	264.27
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	19	272.38	272.38
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	20	280.77	280.77

31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	21	289.45	325.64
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	22	289.45	325.64
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	23	289.45	325.64
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	24	289.45	325.64
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	25	290.61	326.94
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	26	296.40	333.45
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	27	303.35	341.27
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	28	314.64	353.97
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	29	323.90	364.39
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	30	328.53	386.02
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	31	335.48	394.19
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	32	342.42	402.35
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	33	346.77	407.45
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	34	351.40	412.89
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	35	353.71	415.61
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	36	356.03	418.33
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	37	358.34	421.05
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	38	360.66	423.78
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	39	365.29	429.22
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	40	369.92	453.16
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	41	376.87	461.67
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	42	383.53	469.82
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	43	392.79	481.17
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	44	404.37	495.35
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	45	417.97	512.02
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	46	434.18	531.87
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	47	452.42	554.21
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	48	473.26	579.74
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	49	493.81	604.92
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	50	516.97	710.83
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	51	539.83	742.27
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	52	565.02	776.90
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	53	590.49	811.92
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	54	617.99	849.73
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	55	645.48	887.54
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	56	675.30	928.53
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	57	705.40	969.93
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	58	737.53	1014.10
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	59	753.45	1035.99
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	60	785.58	1080.17
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	61	813.37	1118.38
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	62	831.60	1143.45
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	63	854.47	1174.90
31609PA0160005	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	868.35	1194.00
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	199.53	199.53
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	15	217.26	217.26
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	16	224.04	224.04
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	17	230.83	230.83
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	18	238.13	238.13
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	19	245.43	245.43
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	20	253.00	253.00
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	21	260.82	293.42
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	22	260.82	293.42
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	23	260.82	293.42
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	24	260.82	293.42

31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	25	261.86	294.60
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	26	267.08	300.47
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	27	273.34	307.51
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	28	283.51	318.95
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	29	291.86	328.34
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	30	296.03	347.84
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	31	302.29	355.19
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	32	308.55	362.55
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	33	312.46	367.14
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	34	316.64	372.05
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	35	318.72	374.50
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	36	320.81	376.95
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	37	322.90	379.40
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	38	324.98	381.85
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	39	329.16	386.76
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	40	333.33	408.33
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	41	339.59	416.00
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	42	345.59	423.34
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	43	353.93	433.57
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	44	364.37	446.35
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	45	376.63	461.37
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	46	391.23	479.26
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	47	407.66	499.39
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	48	426.44	522.39
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	49	444.96	545.08
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	50	465.83	640.51
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	51	486.43	668.84
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	52	509.12	700.04
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	53	532.07	731.60
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	54	556.85	765.67
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	55	581.63	799.74
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	56	608.49	836.68
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	57	635.62	873.98
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	58	664.57	913.79
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	59	678.92	933.51
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	60	707.87	973.32
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	61	732.91	1007.75
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	62	749.34	1030.34
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	63	769.94	1058.67
31609PA0180001	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	782.46	1075.89
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	367.62	367.62
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	15	400.30	400.30
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	16	412.79	412.79
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	17	425.29	425.29
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	18	438.74	438.74
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	19	452.20	452.20
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	20	466.13	466.13
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	21	480.55	540.62
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	22	480.55	540.62
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	23	480.55	540.62
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	24	480.55	540.62
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	25	482.47	542.78
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	26	492.08	553.59
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	27	503.62	566.57
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	28	522.36	587.65

31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	29	537.73	604.95
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	30	545.42	640.87
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	31	556.96	654.42
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	32	568.49	667.98
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	33	575.70	676.44
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	34	583.39	685.48
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	35	587.23	690.00
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	36	591.08	694.51
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	37	594.92	699.03
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	38	598.76	703.55
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	39	606.45	712.58
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	40	614.14	752.32
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	41	625.67	766.45
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	42	636.73	779.99
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	43	652.11	798.83
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	44	671.33	822.38
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	45	693.91	850.04
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	46	720.82	883.01
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	47	751.10	920.10
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	48	785.70	962.48
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	49	819.82	1004.28
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	50	858.26	1180.11
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	51	896.22	1232.31
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	52	938.03	1289.79
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	53	980.32	1347.94
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	54	1025.97	1410.71
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	55	1071.62	1473.48
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	56	1121.12	1541.54
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	57	1171.10	1610.26
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	58	1224.44	1683.60
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	59	1250.87	1719.95
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	60	1304.21	1793.29
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	61	1350.34	1856.72
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	62	1380.62	1898.35
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	63	1418.58	1950.55
31609PA0180002	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1441.65	1982.27
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	543.19	543.19
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	15	591.47	591.47
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	16	609.93	609.93
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	17	628.39	628.39
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	18	648.28	648.28
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	19	668.16	668.16
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	20	688.75	688.75
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	21	710.05	798.81
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	22	710.05	798.81
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	23	710.05	798.81
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	24	710.05	798.81
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	25	712.89	802.00
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	26	727.09	817.98
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	27	744.13	837.15
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	28	771.82	868.30
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	29	794.55	893.86
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	30	805.91	946.94
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	31	822.95	966.96
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	32	839.99	986.99

31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	33	850.64	999.50
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	34	862.00	1012.85
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	35	867.68	1019.52
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	36	873.36	1026.20
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	37	879.04	1032.87
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	38	884.72	1039.55
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	39	896.08	1052.90
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	40	907.44	1111.62
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	41	924.48	1132.49
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	42	940.82	1152.50
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	43	963.54	1180.33
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	44	991.94	1215.13
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	45	1025.31	1256.01
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	46	1065.07	1304.72
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	47	1109.81	1359.51
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	48	1160.93	1422.14
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	49	1211.34	1483.90
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	50	1268.15	1743.70
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	51	1324.24	1820.83
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	52	1386.02	1905.77
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	53	1448.50	1991.69
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	54	1515.96	2084.44
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	55	1583.41	2177.19
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	56	1656.55	2277.75
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	57	1730.39	2379.29
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	58	1809.21	2487.66
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	59	1848.26	2541.36
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	60	1927.07	2649.73
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	61	1995.24	2743.45
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	62	2039.97	2804.96
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	63	2096.07	2882.09
31609PA0180003	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	2130.15	2928.95
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	221.43	221.43
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	15	241.12	241.12
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	16	248.64	248.64
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	17	256.17	256.17
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	18	264.27	264.27
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	19	272.38	272.38
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	20	280.77	280.77
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	21	289.45	325.64
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	22	289.45	325.64
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	23	289.45	325.64
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	24	289.45	325.64
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	25	290.61	326.94
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	26	296.40	333.45
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	27	303.35	341.27
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	28	314.64	353.97
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	29	323.90	364.39
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	30	328.53	386.02
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	31	335.48	394.19
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	32	342.42	402.35
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	33	346.77	407.45
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	34	351.40	412.89
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	35	353.71	415.61
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	36	356.03	418.33

31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	37	358.34	421.05
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	38	360.66	423.78
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	39	365.29	429.22
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	40	369.92	453.16
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	41	376.87	461.67
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	42	383.53	469.82
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	43	392.79	481.17
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	44	404.37	495.35
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	45	417.97	512.02
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	46	434.18	531.87
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	47	452.42	554.21
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	48	473.26	579.74
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	49	493.81	604.92
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	50	516.97	710.83
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	51	539.83	742.27
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	52	565.02	776.90
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	53	590.49	811.92
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	54	617.99	849.73
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	55	645.48	887.54
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	56	675.30	928.53
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	57	705.40	969.93
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	58	737.53	1014.10
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	59	753.45	1035.99
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	60	785.58	1080.17
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	61	813.37	1118.38
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	62	831.60	1143.45
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	63	854.47	1174.90
31609PA0180004	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	868.35	1194.00
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	204.28	204.28
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	15	222.44	222.44
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	16	229.38	229.38
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	17	236.32	236.32
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	18	243.80	243.80
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	19	251.28	251.28
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	20	259.02	259.02
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	21	267.03	300.41
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	22	267.03	300.41
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	23	267.03	300.41
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	24	267.03	300.41
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	25	268.10	301.61
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	26	273.44	307.62
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	27	279.85	314.83
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	28	290.26	326.55
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	29	298.81	336.16
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	30	303.08	356.12
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	31	309.49	363.65
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	32	315.90	371.18
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	33	319.90	375.89
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	34	324.18	380.91
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	35	326.31	383.42
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	36	328.45	385.93
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	37	330.58	388.44
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	38	332.72	390.95
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	39	336.99	395.97
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	40	341.27	418.05

31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	41	347.67	425.90
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	42	353.82	433.42
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	43	362.36	443.89
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	44	373.04	456.98
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	45	385.59	472.35
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	46	400.55	490.67
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	47	417.37	511.28
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	48	436.60	534.83
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	49	455.55	558.05
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	50	476.92	655.76
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	51	498.01	684.77
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	52	521.24	716.71
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	53	544.74	749.02
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	54	570.11	783.90
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	55	595.48	818.78
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	56	622.98	856.60
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	57	650.75	894.79
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	58	680.39	935.54
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	59	695.08	955.74
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	60	724.72	996.49
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	61	750.36	1031.74
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	62	767.18	1054.87
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	63	788.28	1083.88
31609PA0180005	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	801.09	1101.50
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	306.88	306.88
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	15	334.15	334.15
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	16	344.58	344.58
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	17	355.01	355.01
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	18	366.24	366.24
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	19	377.48	377.48
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	20	389.11	389.11
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	21	401.14	451.29
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	22	401.14	451.29
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	23	401.14	451.29
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	24	401.14	451.29
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	25	402.75	453.09
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	26	410.77	462.12
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	27	420.40	472.95
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	28	436.04	490.55
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	29	448.88	504.99
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	30	455.30	534.98
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	31	464.93	546.29
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	32	474.55	557.60
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	33	480.57	564.67
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	34	486.99	572.21
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	35	490.20	575.98
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	36	493.41	579.75
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	37	496.62	583.52
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	38	499.83	587.30
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	39	506.24	594.84
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	40	512.66	628.01
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	41	522.29	639.81
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	42	531.52	651.11
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	43	544.35	666.83
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	44	560.40	686.49

31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	45	579.25	709.58
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	46	601.72	737.10
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	47	626.99	768.06
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	48	655.87	803.44
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	49	684.35	838.33
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	50	716.44	985.11
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	51	748.13	1028.68
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	52	783.03	1076.67
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	53	818.33	1125.21
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	54	856.44	1177.61
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	55	894.55	1230.01
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	56	935.87	1286.82
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	57	977.59	1344.18
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	58	1022.12	1405.41
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	59	1044.18	1435.75
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	60	1088.71	1496.97
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	61	1127.22	1549.92
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	62	1152.49	1584.67
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	63	1184.18	1628.25
31609PA0180006	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1203.42	1654.72
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	406.31	406.31
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	15	442.42	442.42
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	16	456.23	456.23
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	17	470.04	470.04
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	18	484.91	484.91
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	19	499.78	499.78
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	20	515.19	515.19
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	21	531.12	597.51
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	22	531.12	597.51
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	23	531.12	597.51
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	24	531.12	597.51
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	25	533.25	599.90
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	26	543.87	611.85
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	27	556.61	626.19
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	28	577.33	649.49
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	29	594.32	668.61
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	30	602.82	708.32
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	31	615.57	723.29
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	32	628.32	738.27
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	33	636.28	747.63
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	34	644.78	757.62
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	35	649.03	762.61
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	36	653.28	767.60
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	37	657.53	772.59
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	38	661.78	777.59
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	39	670.27	787.57
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	40	678.77	831.50
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	41	691.52	847.11
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	42	703.73	862.08
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	43	720.73	882.90
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	44	741.98	908.92
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	45	766.94	939.50
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	46	796.68	975.93
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	47	830.14	1016.92
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	48	868.38	1063.77

31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	49	906.09	1109.96
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	50	948.58	1304.30
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	51	990.54	1361.99
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	52	1036.75	1425.53
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	53	1083.49	1489.79
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	54	1133.94	1559.17
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	55	1184.40	1628.55
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	56	1239.10	1703.77
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	57	1294.34	1779.72
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	58	1353.30	1860.78
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	59	1382.51	1900.95
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	60	1441.46	1982.01
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	61	1492.45	2052.12
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	62	1525.91	2098.13
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	63	1567.87	2155.82
31609PA0190002	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1593.36	2190.87
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	368.40	368.40
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	15	401.15	401.15
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	16	413.67	413.67
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	17	426.19	426.19
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	18	439.68	439.68
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	19	453.16	453.16
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	20	467.13	467.13
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	21	481.58	541.77
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	22	481.58	541.77
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	23	481.58	541.77
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	24	481.58	541.77
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	25	483.50	543.94
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	26	493.13	554.77
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	27	504.69	567.78
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	28	523.47	588.91
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	29	538.88	606.24
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	30	546.59	642.24
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	31	558.15	655.82
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	32	569.70	669.40
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	33	576.93	677.89
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	34	584.63	686.94
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	35	588.48	691.47
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	36	592.34	696.00
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	37	596.19	700.52
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	38	600.04	705.05
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	39	607.75	714.10
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	40	615.45	753.93
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	41	627.01	768.09
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	42	638.09	781.66
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	43	653.50	800.53
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	44	672.76	824.13
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	45	695.39	851.86
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	46	722.36	884.89
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	47	752.70	922.06
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	48	787.38	964.53
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	49	821.57	1006.42
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	50	860.09	1182.63
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	51	898.14	1234.94
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	52	940.03	1292.55

31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	53	982.41	1350.82
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	54	1028.16	1413.72
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	55	1073.91	1476.63
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	56	1123.51	1544.83
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	57	1173.60	1613.70
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	58	1227.05	1687.20
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	59	1253.54	1723.62
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	60	1306.99	1797.12
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	61	1353.23	1860.69
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	62	1383.57	1902.40
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	63	1421.61	1954.71
31609PA0190003	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	1444.73	1986.50
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	0-14	240.61	240.61
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	15	261.99	261.99
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	16	270.17	270.17
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	17	278.35	278.35
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	18	287.15	287.15
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	19	295.96	295.96
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	20	305.08	305.08
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	21	314.52	353.83
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	22	314.52	353.83
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	23	314.52	353.83
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	24	314.52	353.83
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	25	315.77	355.25
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	26	322.06	362.32
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	27	329.61	370.81
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	28	341.88	384.61
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	29	351.94	395.94
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	30	356.98	419.45
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	31	364.52	428.32
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	32	372.07	437.19
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	33	376.79	442.73
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	34	381.82	448.64
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	35	384.34	451.60
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	36	386.86	454.55
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	37	389.37	457.51
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	38	391.89	460.47
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	39	396.92	466.38
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	40	401.95	492.39
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	41	409.50	501.64
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	42	416.73	510.50
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	43	426.80	522.83
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	44	439.38	538.24
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	45	454.16	556.35
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	46	471.77	577.92
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	47	491.59	602.20
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	48	514.23	629.94
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	49	536.57	657.29
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	50	561.73	772.37
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	51	586.57	806.54
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	52	613.94	844.16
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	53	641.61	882.22
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	54	671.49	923.30
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	55	701.37	964.39
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	56	733.77	1008.93

31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	57	766.48	1053.91
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	58	801.39	1101.91
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	59	818.69	1125.69
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	60	853.60	1173.70
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	61	883.79	1215.21
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	62	903.61	1242.46
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	63	928.45	1276.62
31609PA0190004	Rating Area 8	Tobacco User/Non-Tobacco User	64 and over	943.55	1297.38

The 1.06 factor is the uniform adjustment stated in the 2019 Filing Guidance from the change to the individual mandate.

The change in demographics was calculated considering changes to age, geography, and tobacco use.

The change in the average age was measured by comparing the average age factor calculated in this filing, based on February 2018 enrollments, to the average age factor calculated in the prior filing, based on February 2017 enrollments.

	2018 Filing	2019 Filing	Change
Age Factor	1.661	1.688	1.016
Change from geography: No change			1.000
Change from tobacco use: No change			1.000
Total change			1.016

No changes were assumed for this filing.

The network factors used in Table 10 are based on the network differentials from the prior filing.

The network factor used for PPO was 1.000.

The network factor used for EPO was 0.95.

The factors used in Table 10 recalibrate the values so that the differentials between the factors remains constant, and the composite factor equals 1.000.

Table 10 factors:	PPO	1.019
	EPO	0.967

Cover Page

HIOS Issuer ID: 31609

HIOS Product IDs: 31609PA007, 31609PA019, 31609PA016, 31609PA018

This single PDF file contains three separate actuarial certifications for the unique plan designs under Issuer ID 31609. Please refer to all of the pages contained herein.

Unique Plan Design Supporting Documentation and Justification

ACTUARIAL MEMORANDUM

HIOS Issuer ID: 31609

HIOS Product IDs: 31609PA016, 31609PA018

Applicable HIOS Plan IDs (Standard Component): 31609PA0160004, 31609PA0180003

Purpose of document:

The purpose of this document is to provide CMS with a justification of the methods used in calculating the actuarial value for unique plan designs offered in the individual or small group market for the plan year beginning 1/1/2019. As prescribed by law, the AV calculation was based on the AV calculator to the full extent possible. The AV is meant to represent the average percent of costs paid by the insurer for a standard population, and may vary from actual member experience. The resulting AV was based on prescribed methodology and, therefore, may not reasonably reflect the actuary's estimate of the portion of allowed costs covered by the health insurance plan. The AV was determined based on the plan's benefits and coverage data, the standard population, and utilization and continuance tables published by HHS for purposes of the valuation of AV. This actuarial analysis is not appropriate for any other purposes.

Reasons the plan design is unique (benefits that are not compatible with the parameters of the AV calculator and the materiality of those benefits):

The cost-sharing for laboratory outpatient and professional services varies by site of service. Lab work done at the office or a free standing facility has zero cost-sharing, and lab work done by a hospital has 50% coinsurance. Laboratory outpatient and professional services account for roughly 3% of allowed costs in the AV calculation.

Acceptable alternate method used per 156.135(b)(2) or 156.135(b)(3):

Method 156.135(b)(2) was used for both the outpatient facility copays and the laboratory site of service cost-sharing.

Confirmation that only in-network cost-sharing, including multitier networks, was considered:

I confirm that only in-network cost-sharing was considered.

Description of the standardized plan population data used:

For the freestanding and hospital utilization data for laboratory services, we used our commercial PPO data incurred between August 2014 and July 2015.

If the method described in 156.135(b)(2) was used, a description of how the benefits were modified to fit the parameters of the AV calculator:

For the lab site of service cost-sharing, our recent data suggested that 20% of units are at a hospital setting with an average unit cost of \$58.46, while 80% of units are at a freestanding setting with an average unit cost of \$25.43. Taking a weighted average of a 50% issuer coinsurance applied to \$58.46 and a 100% issuer coinsurance applied to \$25.43 produced an average issuer paid amount of \$26.19 out of an average cost of \$32.04, giving an effective issuer coinsurance of 81.75% which was entered into the AV calculator.

If the method described in 156.135(b)(3) was used, a description of the data and method used to develop the adjustments:

Not applicable.

Certification Language:

The development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for those benefits that deviate substantially from the parameters of the AV Calculator and have a material impact on the AV.

The analysis was

- (i) conducted by a member of the American Academy of Actuaries; and
- (ii) performed in accordance with generally accepted actuarial principles and methodologies.

I am an employee of the issuer, I meet the *Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States* promulgated by the American Academy of Actuaries, and I have the education and experience necessary to perform this work. All AVs herein were determined in accordance with the ASOPs established by the Actuarial Standards Board and comply with applicable laws and regulations; furthermore, all metal levels herein were appropriately assigned based on applicable law.

Actuary signature: _____

Actuary Printed Name: _____

Date: _____ 5/21/2018

AV screenshots redacted.

Unique Plan Design Supporting Documentation and Justification

ACTUARIAL MEMORANDUM

HIOS Issuer ID: 31609

HIOS Product IDs: 31609PA007, 31609PA019

Applicable HIOS Plan IDs (Standard Component): 31609PA0070002, 31609PA0190002, 31609PA0070003, 31609PA0190003, 31609PA0070004, 31609PA0190004

Purpose of document:

The purpose of this document is to provide CMS with a justification of the methods used in calculating the actuarial value for unique plan designs offered in the individual or small group market for the plan year beginning 1/1/2019. As prescribed by law, the AV calculation was based on the AV calculator to the full extent possible. The AV is meant to represent the average percent of costs paid by the insurer for a standard population, and may vary from actual member experience. The resulting AV was based on prescribed methodology and, therefore, may not reasonably reflect the actuary's estimate of the portion of allowed costs covered by the health insurance plan. The AV was determined based on the plan's benefits and coverage data, the standard population, and utilization and continuance tables published by HHS for purposes of the valuation of AV. This actuarial analysis is not appropriate for any other purposes.

Reasons the plan design is unique (benefits that are not compatible with the parameters of the AV calculator and the materiality of those benefits):

The cost-sharing of inpatient hospital services for these plans differs by facility and professional claims. Inpatient hospital services account for about 21% of allowed costs in the AV calculation.

The cost-sharing for laboratory outpatient and professional services varies by site of service. Laboratory outpatient and professional services account for roughly 3% of allowed costs in the AV calculation.

The outpatient facility fee cost-sharing for 31609PA0070003 and 31609PA0190003 varies by site of service. Services have different coinsurances for a free-standing facility setting and a hospital setting. Outpatient facility fee accounts for roughly 12% of allowed costs in the AV calculation.

Acceptable alternate method used per 156.135(b)(2) or 156.135(b)(3):

Method 156.135(b)(2) was used for the inpatient hospital cost-sharing, the laboratory site of service cost-sharing, and the outpatient facility cost-sharing.

Confirmation that only in-network cost-sharing, including multitier networks, was considered:

I confirm that only in-network cost-sharing was considered.

Description of the standardized plan population data used:

For the freestanding and hospital utilization data for outpatient facility, we used our commercial PPO and HMO data incurred between August 2014 and July 2015.

For the freestanding and hospital utilization data for laboratory services, we used our commercial PPO data incurred between August 2014 and July 2015.

If the method described in 156.135(b)(2) was used, a description of how the benefits were modified to fit the parameters of the AV calculator:

Combination of Copays and Coinsurance for IP Hospital

The copays for inpatient hospital facility claims were combined with the coinsurance on professional claims to calculate equivalent copays for inpatient claims.

First we took the allowed PMPY inpatient costs and divided that by the utilization by admit PMPY to calculate the average cost per admit. We also took the utilization by day PMPY and divided that by the utilization by admit PMPY to calculate the average length of stay.

The average cost per admit was divided by the average length of stay to calculate the average cost per day. Based on our data, we assumed that 84% of the cost was from facility claims and the remaining 16% was from professional claims.

The professional coinsurance was multiplied by the professional portion of the daily inpatient cost to calculate equivalent daily copay for that piece. Because there is a 5-day maximum on our plans' inpatient copays, an effective copay factor was calculated by dividing the PMPY cost-sharing from a \$100 per day inpatient copay with a 5-day maximum by the PMPY cost-sharing from a \$100 per day inpatient copay without any maximum. The equivalent daily professional copay amount was then divided by this factor in order to determine the final professional copay reflecting a 5-day maximum.

The final professional copay was then added onto the facility copay in order to determine the equivalent overall IP hospital copay amount. The exhibit below details this calculation.

HIOS IDs	31609PA0070002, 31609PA0190002
IP Cost Sharing	
Facility	\$750
Professional	20%

AVC Continuance Table	Gold
PMPY for IP	\$1,201
Admit PMPY	0.06
Claim per Admit	\$20,773
Average LOS (days)	4.5
Effective Copay Factor for 5-days	0.46

Assumption from Data	
% Facility Cost	84%
% Professional Cost	16%

Calculations	
Professional Claim per Admit	\$3,324
Professional Claim per Day	\$743
Equiv. Copay per Day no max	\$149
Equiv. Copay per Day, 5-day max	\$321
Total Copay per Day, 5-day max	\$1,071

Combination of Coinsurance for IP Hospital

The coinsurance for inpatient hospital facility claims were blended with the coinsurance on professional claims to calculate equivalent coinsurance for inpatient claims. Based on our data, we assumed that 84% of the cost was from facility claims and the remaining 16% was from professional claims.

HIOS IDs	31609PA0070003, 31609PA0190003	31609PA0070004, 31609PA0190004
Facility	25%	25%
Professional	30%	50%
Blend	74.2%	71.0%

The silver variations, 31609PA0070003-04, 31609PA0070003-05 and 31609PA0070003-06, do not require blending of the facility and professional inpatient coinsurances. They are included in this justification solely because their standard component is a unique plan design, and the Plans and Benefits template required indicating the same for these cost sharing variations. In fact, the actual benefit coinsurance amounts were entered directly into the AV calculator.

Combination of Coinsurance for Laboratory Services

For the lab site of service cost-sharing, our recent data suggested that 20% of units are at a hospital setting with an average unit cost of \$58.46, while 80% of units are at a freestanding setting with an average unit cost of \$25.43. Taking a weighted average of a 50% issuer coinsurance applied to \$58.46 and a 100% issuer coinsurance applied to \$25.43 produced an average issuer paid amount of \$26.19 out of an average cost of \$32.04, giving an effective issuer coinsurance of 81.75% which was entered into the AV calculator.

Combination of Coinsurance for Outpatient Facility Fee

For the outpatient facility site of service cost-sharing, our recent data indicated that 80% of outpatient facility claims came from the hospital setting. The cost-sharing entered into the AV calculator is a blend of the coinsurance in a hospital setting and the coinsurance in an ambulatory surgery center.

	31609PA0070003, 31609PA0190003
Hospital	50.0%
ASC	70.0%
Blend	54.0%

The silver variations, 31609PA0070003-04, 31609PA0070003-05 and 31609PA0070003-06, do not require blending of the hospital and ambulatory surgery center coinsurances. They are included in this justification solely because their standard component is a unique plan design, and the Plans and Benefits template required indicating the same for these cost-sharing variations. In fact, the actual benefit coinsurance amounts were entered directly into the AV calculator.

If the method described in 156.135(b)(3) was used, a description of the data and method used to develop the adjustments:

Not applicable.

Certification Language:

The development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for those benefits that deviate substantially from the parameters of the AV Calculator and have a material impact on the AV.

The analysis was

- (i) conducted by a member of the American Academy of Actuaries; and
- (ii) performed in accordance with generally accepted actuarial principles and methodologies.

I am an employee of the issuer, I meet the *Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States* promulgated by the American Academy of Actuaries, and I have the education and experience necessary to perform this work. All AVs herein were determined in accordance with the ASOPs established by the Actuarial Standards Board and comply with applicable laws and regulations; furthermore, all metal levels herein were appropriately assigned based on applicable law.

Actuary signature: _____

Actuary Printed Name: _____

Date: _____ 5/21/2018

AV screenshots redacted.

Unique Plan Design Supporting Documentation and Justification

ACTUARIAL MEMORANDUM

HIOS Issuer ID: 31609

HIOS Product IDs: 31609PA018

Applicable HIOS Plan IDs (Standard Component): 31609PA0180005

Purpose of document:

The purpose of this document is to provide CMS with a justification of the methods used in calculating the actuarial value for unique plan designs offered in the individual or small group market for the plan year beginning 1/1/2019. As prescribed by law, the AV calculation was based on the AV calculator to the full extent possible. The AV is meant to represent the average percent of costs paid by the insurer for a standard population, and may vary from actual member experience. The resulting AV was based on prescribed methodology and, therefore, may not reasonably reflect the actuary's estimate of the portion of allowed costs covered by the health insurance plan. The AV was determined based on the plan's benefits and coverage data, the standard population, and utilization and continuance tables published by HHS for purposes of the valuation of AV. This actuarial analysis is not appropriate for any other purposes.

Reasons the plan design is unique (benefits that are not compatible with the parameters of the AV calculator and the materiality of those benefits):

This plan exempts the first three outpatient mental health visits from the deductible. It has an outpatient mental health copay of \$40 for the first three visits without applying the copays to the deductible. Beyond three visits, outpatient mental health is covered 100% after the deductible. Outpatient mental health accounts for about 1% of allowed costs in the AV calculation.

Acceptable alternate method used per 156.135(b)(2) or 156.135(b)(3):

Method 156.135(b)(2) was used for the outpatient mental health cost-sharing.

Confirmation that only in-network cost-sharing, including multitier networks, was considered:

I confirm that only in-network cost-sharing was considered.

Description of the standardized plan population data used:

OP Surgery Copay/Coinsurance:

For the outpatient mental health utilization data, we used our commercial PPO data incurred between January 2015 and December 2015.

If the method described in 156.135(b)(2) was used, a description of how the benefits were modified to fit the parameters of the AV calculator:

Using the bronze continuance table in the Final 2019 AV Calculator, we calculated the average cost per visit for outpatient mental health before the out-of-pocket maximum. This average cost was used as a point estimate of the allowed cost per visit for services before satisfying the out-of-pocket maximum. An effective member copay is calculated by taking a weighted average of \$40 for the first three visits times the proportion of visits within the first three visits, which according to our 2015 commercial PPO experience is 14.15%, and the average cost per service from the AV Calculator times the remaining proportion of visits.

	31609PA0160002
Cost per Visit	\$98.50
Copay for Visits 1-3:	\$40.00
Visits 1-3 Proportion:	14.15%
Eff. Member Copay	\$90.22

If the method described in 156.135(b)(3) was used, a description of the data and method used to develop the adjustments:

Not applicable.

Certification Language:

The development of the actuarial value is based on one of the acceptable alternative methods outlined in 156.135(b)(2) or 156.135(b)(3) for those benefits that deviate substantially from the parameters of the AV Calculator and have a material impact on the AV.

The analysis was

- (i) conducted by a member of the American Academy of Actuaries; and
- (ii) performed in accordance with generally accepted actuarial principles and methodologies.

I am an employee of the issuer, I meet the *Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States* promulgated by the American Academy of Actuaries, and I have the education and experience necessary to perform this work. All AVs herein were determined in accordance with the ASOPs established by the Actuarial Standards Board and comply with applicable laws and regulations; furthermore, all metal levels herein were appropriately assigned based on applicable law.

Actuary signature: _____

Actuary Printed Name: _____

Date: _____ 5/21/2018

AV screenshots redacted.

REDACTION JUSTIFICATION

DOCUMENT

URRT Part III – Federal Actuarial Memorandum

Redacted Name of opining actuary (page 8)

Redacted Company Contact Information (page 1) – name, telephone number, email address

PA Actuarial Memorandum

Redacted Name of opining actuary (pages 6 and 7)

Redacted Company Contact Information (page 1) – name, telephone number, email address

Cover Letter

Redacted names and contact information (page 2)

AV Screenshots

Entire File Redacted

Unique AV Justification file

Redacted name of opining actuary (pages 4, 11, and 23)

Redacted AV Screenshots (pages 5-6, 12-20, and 24)

COVER LETTER
QCC INDIVIDUAL
JUNE 14 RESPONSES

Below are responses to the questions from the June 14, 2018 objection letter. Included with this cover letter is a workbook that contains additional requested information. Changes made to documents in this rate filing are listed in a separate worksheet included with this letter. Information on Items 18 (a) and (b) will be forthcoming.

We also removed the PCORI fee from the calculations.

- 1. In Wksh 2 of the URRT, the AV Pricing Values should be equal to the total adjustment from the Market Adjusted Index Rate (MAIR) to the Plan Adjusted Index Rate (PAIR) for each plan (e.g. $MAIR \times AV \text{ Pricing Value} = PAIR$). However, this does not appear to be the case. Please explain why this is not the case or correct the issue to follow the Part III URRT Instructions Section 2.2.3.**

We entered the AV Pricing Values from the Actuarial Memorandum Rate Exhibit. The attached worksheet shows a calculation by plan of the product of all of the factors used in the calculation of the plan-specific rates. Should PID prefer that those value be entered, we will revise them in the URRT.

- 2. We are unable to replicate the rates on the Rate Data template using the Plan Adjusted Index Rates (PAIRs) entered in the URRT Wksh II section IV. It appears the PAIRs entered in the URRT do not match the Pure Premium values in column AA on tab [III Plan Rates] when removing the aggregate calibration factor. Please explain why these values would be different. If this was done in error, please correct the rate filing documents to be consistent.**

We found that our formula for Plan Adjusted Index Rates was referencing the Age Calibration Factor from the Actuarial Memo Rate Exhibit instead of the Aggregate Calibration Factor; the difference is the Tobacco Calibration Factor. After this correction is made, the Plan Adjusted Index Rates in Section IV are correct.

For example, for Plan 31609PA0160004, the value shown in the filed URRT was \$1,332.17, which is the 2019 Calibrated Plan Adjusted Index Rate (Column AA) multiplied by 1.688. Adjusting by the Aggregate Calibration Factor provides the correct values.

- 3. Please provide the numerical development of the Exchange User Fee of \$18.64 applied to the Market Adjusted Index Rate shown in Table 5 of the file [2019_Indiv_QCC_PAAMExhibits_052118.xlsm].**

We projected that the same proportion of premium would come from On-Exchange enrollments that we used in our prior 2018 pricing, which was 74.3%. The Exchange user fee is 3.5% of Premium for on exchange plans. Therefore about 2.6% of overall premium would be for exchange use fees. This is about \$18.64 PMPM. (i.e. $\$716.57 \text{ Required Premium in cell C63 on Table 6} \times 0.026$).

4. The following questions are related to the proposed annual trend rate equal to 12.1%: a) Please show a numerical development of the assumed annual trend rate being used to project the experience period claims to the projected 2019 coverage year. b) Please provide the trends based on historical allowed claims experience for each benefit category for years 2015, 2016, 2017, and 2018 (year to date). We realize 2018 trends will be partially based on estimated claim costs.

Please see below for information on the projected unit cost trends.

	PA Individual				
PPO	Inpatient	Outpatient	Professional	Capitation	RX
2016	5.0%	3.0%	2.4%	3.5%	4.5%
2017	3.7%	2.4%	1.3%	1.5%	4.5%
2018	3.1%	3.0%	1.6%	2.7%	4.5%
2019	3.9%	3.8%	1.7%	2.7%	6.3%
Utilization	8.0%	8.0%	8.0%	0.0%	8.4%
Composite	12.1%	12.1%	9.8%	2.7%	15.3%
Weights	20.8%	24.7%	28.2%	1.6%	24.7%

Annual
Trend 12.09%

5. The following questions are related to the Demographics factors (1.661 and 1.688) shown in the file [ACA QCC Ind Supporting.xlsx]: a) Please show the quantitative development of the above-referenced factors, making sure to include the membership by age that is used in calculating them. b) Please specify what age curve is being used to determine these factors (e.g. 2019 federal default age curve, internal age curve)? .

(a) The calculation of the 2019 demographic factor is shown in the attached worksheet. This was compared to the factor used in the 2018 rate filing to measure the change in the demographic factor used to calculate 2019 rates.

(b) We used the 2019 federal default age curve per the PID instructions.

Est. 2019	QCC	Demo	2018	members	2018 Demo Factors
0-20	6,076	0.825	0-20	8,441	0.824
21-29	6,540	1.041	21-29	7,801	1.040
30-39	6,310	1.204	30-39	7,294	1.204
40-49	6,134	1.466	40-49	7,581	1.469
50-59	9,526	2.234	50-59	11,553	2.226
60-63	5,454	2.844	60-63	7,999	2.878
64+	1,815	3.000	64+	342	3.000
Total	41,855	1.688	Total	51,011	1.661

6. The following questions are in regards to the Single Risk Pool Adjustment factors entered in Table 5 of the PA Actuarial Memorandum Exhibits a) Please explain and provide the numerical development of the Change in Network Factor of 1.003. b) Please explain and provide the numerical development of the Change in Benefits factor of 0.998.

- (a) Please see the calculation in the attached worksheet (Network Factor tab)
- (b) Please see the calculation in the attached worksheet (Change in Benefits tab)

7. We have the following questions regarding the Benefit Richness (induced demand) column in Table 10: a) Please provide numerical support for the Benefit Richness (induced demand) factors shown in Table 10. b) Please confirm and demonstrate in your support that health status was not taken into account when developing these factors. c) Please explain why these values vary so significantly within a given metal level if health status is not taken into account; specifically for Bronze plans where the factors range from 0.850 to 0.982 and for Silver plans where they range from 0.970 to 1.039.

- (a) The PID-required calculation is shown in the attached worksheet.
- (b) Our induced demand factors do not take into account health status.
- (c) We utilized this approach because we are trying to preserve the rate relationship we currently have in the market.

8. We have the following questions regarding the provider network adjustment (column N) of Table 10. a) Please describe the methodology used to determine the provider network factors. Be sure to support (numerically) the underlying network factor values which are provided in Table 14 of the PA Actuarial Memorandum Exhibits b) Please explain why the Platinum plans (Personal Choice EPO Platinum) which is indicated as an EPO network applies the PPO network factor of 1.019 versus the EPO factor of 0.967. c) Although the differences are small, we did notice the network factor for the Bronze and Silver Reserve plans (0.967) are slightly different than the EPO Catastrophic plan (0.968) based on the values in Table 10 for Plan 5 and Plan 12. Was this intentional or was this done in error? Please explain why this would be different if this was in fact intentional.

- (a) The provider network factor is calculated based on the expected unit cost differences between the PPO and EPO networks.

We expect the EPO network to be 5% less expensive than the PPO network. We then normalized so that the weighted average of the factors equals 1.00.

This results in a factor of 0.968 for EPO and 1.019 for PPO. (I.e. $0.968/1.019 = 0.95$ or a 5% difference).

- (b) In the Experience Period the plan was a PPO; it was converted to an EPO plan effective in 2018. We will incorporate the EPO factor in 2020 pricing reflecting the 2018 experience.
- (c) We priced the Catastrophic Plan separately because it is not considered the same risk pool for pricing.

9. It appears the CSR load of 1.28 is being applied to Plan 31609PA0190003 and Plan 31609PA0180002 in Table 10 of the PA Actuarial Memorandum Exhibits even though column J specifies that these plans will only be available off-Exchange.

Plans 31609PA0190003 and Plan 31609PA0180002 are off-exchange versions of Plan 31609PA0070003 and 31609PA0180002 and are rated consistently with them. The benefits in the on and off-exchange versions of these plans are identical with the exception of an elective abortion benefit contained in the off-exchange versions.

10. Please provide the numerical development of the tobacco calibration factor of 1.013 shown in cell T6 of Table 10.

Please see the table below. The calculation uses the expected age distribution and expected % tobacco use by age, as well as our previously approved tobacco factors to determine the impact of tobacco rating.

	2018 Expected Age distribution	Expected % tobacco use	Approved Tobacco Factors
0-20	17%	5.0%	-
21-29	16%	5.0%	0.125
30-39	15%	5.0%	0.175
40-49	15%	6.0%	0.225
50-59	23%	6.0%	0.375
60-63	12%	6.0%	0.375
64+	2%	6.0%	0.375
Total			1.3%

11. Please provide the numerical development of the projected 2019 MLR that shows compliance with the 80% minimum MLR.

Projected Premium from Table 6 = \$716.57

Projected Paid Claims from Table 5 = \$633.88

Projected Risk Adjustment from Table 5 = \$47.34

QI = 0.80%; Taxes and fees = 2.52% (From table 6)

$$\text{MLR} = (633.88 + (716.57 \times 0.008)) / (716.57 + 47.34 - (716.57 \times 0.0252)) = 85.8\% > 80\%$$

12. Please explain and provide the quantitative development of the projected risk adjustment payment PMPM equal to \$46.15.

Please see the calculation in the attached worksheet (Risk Adjustment tab).

- 13. It is stated in the cover letter that the overall rate increase using the state's estimate for the value of the individual mandate and CSRs non being funded is 6.7%, however if you used your internal estimates for these items, the overall rate increase would be 3.3%. Please provide your estimates for these items as well as the quantitative development of those estimates.**

The 3.3% estimate was calculated by replacing the 6% morbidity factor with 7%, and the 1.28 CSR factor with 1.15. This value is our projection based on our 2016 CSR reimbursements; 2016 was the last year where we received reimbursement for the entire calendar year. Substituting those values in the Actuarial Memorandum Rate Exhibit produced an overall rate increase of 3.3%.

- 14. Rate Increase components shown in Table 8 line H does not approximate line A as indicated by the label. Please explain why this value is so different from the change in Calibrated Plan Adjusted Index Rate.**

We overestimated the Risk Adjustment receivable when we did our prior 2018 pricing. We overestimated the factor due to our projection of the distribution of membership in the Bronze plans. This overstatement was due to a change in the configuration of Bronze plans. Bronze enrollment in QCC was higher in 2017 than 2016. The higher 2017 Bronze enrollment is reflected in 2019 pricing. If the value in Cell J76 were changed to a \$76 receivable, line H is much closer to line A.

The following additional questions or comments are from PID.

- 15. Table 2 – Please correct the Estimated Cost Sharing formula as per our telephone discussion.**

We corrected the Cost Sharing formula in Table 2 as requested. This did not impact any of the calculations later on in the Exhibit and therefore had no rate impact.

- 16. Rate Change Summary - The medical costs increase should be the same as the annual trend in Table 3. Please correct it.**

We updated the Rate Change Summary to show the medical costs increase equal to the annual trend.

- 17. URRT – The capitation trend shows a factor of 1.0. Table 3 shows a trend of 2.7% Please correct.**

We revised the URRT to include the 2.7% trend for capitation.

- 18. Table 5: Please support the calculations of following factors: a) Change in Network of 1.003 b) Change in Benefits of 0.998 c) Projected Paid Exchange User Fees Rate PMPM of \$18.64. (Please input formula in Cell C32 as per Page 12 of PID Filing Guidelines).**

(a) Working on calculation; will submit.

(b) Working on calculation; will submit.

(c) Please see our response to Item 3 above.

19. Table 10: Please provide the workbook with support data and calculations for the following: a) Age calibration factor of 1.688 b) Tobacco calibration factor of 1.013 c) Pricing Actuarial Value in Column K d) Benefit Richness Factors in Column L – please provide table to support as directed on page 16 of PID Rate Filing Guidance. e) Network factors in Column N.

- (d) We based the age calibration factor on the age distribution shown in the workbook attached to this response. When we submitted the filing, we updated the membership in Tables 1 and 10 to be consistent with the updated data we provided the department for membership by metal tiers but did not recalculate the age calibration factor at that time.
- (e) The tobacco calibration factor is based on the same assumptions used in last year's filing. Please refer to Item 10 above.
- (f) The pricing actuarial values in Column K were taken from our proprietary internal pricing models.
- (g) The table supporting Benefit Richness Factors is included in the attached workbook.
- (h) The provider network factor is calculated based on the expected unit cost differences between the PPO and EPO networks.

We expect the EPO network to be 5% less expensive than the PPO network. We then normalized so that the weighted average of the factors equals 1.00.

This results in a factor of 0.968 for EPO and 1.019 for PPO. (I.e. $0.968/1.019 = 0.95$ or a 5% difference).

20. 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, Federal Rates Template and the binder are identical.

Confirmed that we made those checks prior to submitting the rate filing.

21. In the 2019 Guidance published on the Department's website, the Department required that all issuers file uniform factors for the Individual Adjustment of 1.06 and the CSR Defunding Adjustment of 1.28. In addition, the Department indicated that as the rate review process moves forward and federal healthcare reform efforts are clarified, the Department would consider issuer specific requests. We can now advise that the aforementioned factors of 1.06 for the Individual Adjustment and 1.28 for CSR Defunding Adjustment constitute ceilings. If your company desires lower adjustments than those stated in the Department's 2019 Guidance, you may provide updated materials (PA Actuarial Memorandum and Exhibits, Part III Actuarial Memorandum, Part I URRT and corresponding rate tables – State and Federal) and justification for the lower Adjustment factor(s) with your first round response due June 21, 2018. The Department will not consider adjustment factors greater than those stated in the 2019 Guidance.

We have submitted revised exhibits with this response that use a factor of 1.15 for the CSR Defunding Adjustment. This value is our projection based on our 2016 CSR reimbursements; 2016 was the last year where we received reimbursement for the entire calendar year.

We did not revise the Adjustment for the Individual Mandate; it remains at 1.06.

Please note: we reserve the right to revise these proposed rates based on the final risk adjustment information.

COVER LETTER

QCC INDIVIDUAL

JULY 13 RESPONSES

1. **Based on the changes noted in the file: 'June 22 PA Revisions List.xlsx' an updated URRT should have been provided. However, the URRT '31609qccurrt1_ind_2019pid_06012018_RV.xlsm' does not appear to include all of these changes. Please upload the June 22nd version of the URRT which we believe should include the changes outlined.**

As discussed in our previous response, we would make the revision should PID prefer that we enter those values instead of the Pricing AV values shown in their exhibit. Nevertheless, we revised the URRT with this response as you requested.

2. **Please provide the following related to the proposed annual trend rate equal to 12.1%:**
 - a. **Please show the historical utilization trends for years 2016, 2017, 2018, and projected 2019 which support the 8.0% projected utilization assumption shown in row 7 of tab [Unit Cost Trends] in the file 'Table For Objection QCC Ind RV.xlsx'. Note: We realize 2018 trends will be partially based on estimated claim costs.**

The chart below shows the utilization used in rating for 2016, 2017, and 2018.

2016		3.65%
2017		2.94%
2018		3.89%

3. **In regards to your response to the first round question 5, demographic factors, you show a significant increase in projected 2019 membership for ages 64+ of 1,815 from 2018 membership of 342. Please explain why such a large increase in enrollment in this age bucket is being assumed and provide justification demonstrating that the assumption is appropriate.**

For measurement of the change due to demography, we compare the result of the 2019 projection to the result of the 2018 projection. The member counts shown in the "Demo Summary" compare the projection used in the 2019 rate filing to the projection used in the 2018 filing. What was used in the 2018 filing was the basis for the factor used then. This year's projection is more consistent with the membership shown in Table 1 of the Actuarial Memorandum Rate Exhibit.

4. **In regards to your response to the first round question 6a) and 6b) provided in file 'Table For Objection QCC Ind RV.xlsx', there does not appear to be a "Network Factor" tab or "Change in Benefits" tab as referenced in your response:**
 - a. **Please explain and provide the numerical development of the Change in Network Factor of 1.003.**

The attached “Table for Objection QCC Ind July 13” shows the calculations of the Network Factor in the “Q18a Network Factor Tab”. It compared the weighted average of the 2018 factors using 2017 and 2018 members. The ratio of 2018 to 2017 is the change.

b. Please explain and provide the numerical development of the Change in Benefits factor of 0.998.

The attached “Table for Objection QCC Ind July 13” shows the calculations of the Benefit Factor in the “Q18b Benefit Factor Tab”. It compared the weighted average of the 2017 and 2018 factors using 2018 members. The ratio of 2018 to 2017 is the change.

- 5. In regards to your response to the first round question 7c) Benefit Richness factors, you state “We utilized this approach because we are trying to preserve the rate relationship we currently have in the market.” Please explain the “approach” you are referring to.**

Consistent with last year, our induced demand factors do not take into account health status. For 2019 we did not update the induced demand factors, rather we first solved for the induced demand factors that would generate the 2018 rates slope in 2019 before benefit changes.

We utilized this approach because we are trying to preserve the rate relationship we currently have in the market. The approach refers to the relationship of these factors across the plans. We maintained the same relationships used in the 2018 filing, and re-normalized them so that the composite factor would be 1.000.

- 6. In regards to your response to the first round question 8 you state “We expect the EPO network to be 5% less expensive than the PPO network”. Please explain how you determined the 5% assumption and provide any quantitative analysis that was performed in support of this expectation.**

Consistent with last year, the provider network factor is calculated based on the expected unit cost differences between the EPO and PPO networks. The difference is due to the fact that the PPO plan covers Out of Network benefits and the EPO plan does not. As a result, the EPO network factor is projected to be 5% lower than the PPO network.

- 7. In regards to your response to the first round question 12:**
a. Please explain in detail the methodology used in developing the “Risk Score PMPM” values provided in column F of the file ‘Table For Objection QCC Ind RV.xlsx’, tab [Risk Adjustment].

This is the risk adjustment calculation.

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

Where

PS = State average premium * 0.86; PLRS_i = plan i's plan liability risk score; AV_i = plan i's metal level AV; ARF_i = allowable rating factor; IDF_i = plan i's induced demand factor; GCF_i = plan i's geographic cost factor;

Metal	BMMO	PLRS		ARF	GCF	IDF	AV		Product w Risk	Product w/o Risk	PMPM
Plat	1,494	4.432		1.539	1.091	1.150	0.900		5.562	1.739	1,032.49
Gold	7,072	2.482		1.613	1.091	1.080	0.800		2.925	1.522	252.44
Silver	14,194	2.062		1.839	1.091	1.030	0.700		2.318	1.448	84.14
Bronze	20,058	1.229		1.676	1.091	1.000	0.600		1.342	1.097	(75.46)
Total	42,818	1.824		1.715	1.091	1.028	0.677		2.074	1.306	
Est. StateWide Average		1.76	\$ 710.49	1.76	1.00	1.034	0.703		1.822	1.277	
										Total	70.26

Note that this calculation is for the revised assumptions we have made with this filing.

b. Please confirm how the Membership assumptions in column C of the file 'Table For Objection QCC Ind RV.xlsx', tab [Risk Adjustment] were developed.

The membership assumption was membership as of January 2018.

c. Please provide the estimated risk adjustment transfer amount PMPM for calendar year 2017. To the extent the estimate for 2017 is significantly different than the projection for 2019, please reconcile by describing the specific reasons for those differences and by providing justification for any underlying changes being assumed relative to 2017 (e.g., statewide average premium, PLRS) being assumed.

The anticipated risk adjustment payment for 2017 based on the July 9, 2018 Report for QCC Consumer is a receivable of \$54.0M. This is an approximate PMPM impact of \$91.06.

It varies from the number we are projecting for 2019, \$70.26, as for 2019, we adjusted statewide and our block of business for the impact of Individual Mandate going away. We also adjusted our mix for changes developing in 2018. We also adjusted the statewide average premium used in the calculation.

PID's Issues:

- As was communicated in my email of July 3, 2018 the Department has determined that an Individual Adjustment Factor of 1.06 and a CSR Defunding Adjustment Factor of 1.20 will be used in the 2019 rate development for the Individual Market. Issuers overwhelmingly recommended**

standardization of these factors. As such, issuers may not deviate from these factors. Updated materials (PA Actuarial Memorandum and Exhibits and the Plan Design Summary worksheets, including the State rate tables) reflecting these factors, Risk Adjustment updates (based on the June 30th release of the Federal Risk Adjustment Report) and other Department requested changes must be provided with your second-round response due July 13, 2018. Other than these three preceding changes, no other modifications will be accepted.

Included with this response is a revised set of exhibits which incorporates the CSR factor of 1.20, the Individual mandate factor of 1.05, and updated Risk Adjustment.

COVER LETTER

QCC INDIVIDUAL

JULY 19 RESPONSES

- 1. In our opinion, adequate support has not yet been provided to justify the use of an annual utilization trend assumption equal to 8.0%. Please either provide adequate support for this assumption or revise the proposed trend rate to be more consistent with historically observed levels. The provision of any of the following would be considered acceptable in terms of providing support for this assumption:**
 - a. A quantitative demonstration that actual recent historical (e.g., over the most recent two or three year period) utilization trend rates for the company have been equal to approximately 8.0%**
 - b. References to applicable industry studies or analysis (including the location of the sources being referenced such that we may review them) that support the use of an annual utilization trend rate equal to 8.0%**
 - c. Some other quantitative demonstration showing that it is reasonable to expect that utilization rates will increase across all service categories at a rate equal to 8.0% over the two year period of 2017 to 2019**

We have elected to use option B of the three options provided. The attached exhibit demonstrates, using industry data which is cited in the link within the file, that the trend is reasonable given historic averages of 10 year trends. As can be seen from this data, periods of lower than average trends are usually followed by periods of higher than average trends due to the concept of mean reversion.

- 2. With respect to the proposed risk adjustment transfer assumption equal to \$70.26 PMPM it is noted in your response that this assumption is different from the actual anticipated 2017 receipt equal to \$91.06 PMPM due to adjustments which were applied statewide and “to our block of business” for the impact of the individual mandate going away, changes in the statewide average premium, and changes in the mix of enrollment developing in 2018. Please provide the following information related to these items:**
 - a. Based on our review, as long as the adjustments which were applied both statewide and on a company specific basis to reflect the impact of the individual mandate going away were equal,**

we would expect the impact on the 2019 risk adjustment results to be minimal (relative to the 2017 results). Please confirm that the adjustments which were applied on a statewide and company specific basis to reflect the impact of the individual mandate going away were equal, and whether you agree that the impact on risk adjustment was minimal. If they were not equal, please provide each of the adjustments which were applied and support for their use. If you disagree that the impact should be minimal, please clarify why this understanding is incorrect.

We do not feel the individual mandate going away had the same impact on our market as the statewide average. The statewide average reflects the Pennsylvania Insurance Department guidance of a 1.06 factor increase while our company's factor reflects our projected impact.

An additional notable change to account for variance between 2017 payment and projected 2019 payment is the methodology change which began in 2018; and therefore, not captured in the 2017 results but is present in 2019.

- b. In accounting for the changes in mix of enrollment developing in 2018, it appears that the company is assuming that the risk transfer components (e.g., the PLRS, ARF) for each metal level in 2019 will be equal to the values of those components for 2017 (excluding assumed changes in the statewide average premium and the impact of the individual mandate going away), but that the mix of enrollment by metal level will be different in 2019 than that which was observed for 2017. Please confirm whether this understanding is accurate. If it is not, please clarify.**

The PLRS and ARF in the buildup are reflective of the factors as projected for 2019. They are not the same as 2017 nor are they intended to be.

As stated in (a), part of variance between 2017 payment and projected 2019 payment would be the methodology change which began in 2018.

- c. The approach described in (b) appears to assume that the average risk level of the company's membership may be changing due to the change in the distribution of membership by metal level. If this is not correct, please clarify and demonstrate how the shift in membership by metal level is not reflecting a change in morbidity.**

The metal membership mix used in buildup is from January 2018 and not an additional morbidity adjustment. While morbidity is rising due to impact at company level for individual mandate, that only impacts the factors.

As pointed out in (a), the change in results between 2017 and 2019 can be attributed to the new formula and methodology change.

- d. **Depending on the response to (c), the projected risk transfer amount appears to imply that the average risk level of the company's membership is being assumed to decrease (i.e., because the projected 2019 receipt is less than the anticipated receipt for 2017). If the company agrees, please revise the proposed rates accordingly to either (1) modify the current "Change in Morbidity" assumption of 1.06 to better align with the lower average risk level being estimated for 2019 or (2) modify the risk transfer amount in 2019 to be equal to that anticipated for 2017, adjusted only to reflect expected changes in the statewide average premium and the impact of the individual mandate going away.**

As mentioned in (a), the Pennsylvania Insurance Department mandated the 1.06 "Change in Morbidity" factor used in the Memorandum Exhibits. We projected this impact to be slightly different in our market. That is why the numbers differ. But we do believe we are using appropriately as change in company's morbidity to statewide average will drive risk transfer payments for 2019.

Additionally, the projected risk payment change is not necessarily reflective of change in risk. As stated in (a), the new formula and methodology is used beginning 2018 and therefore 2017 results are not indicative of 2019 projections.

2018 and 2019 Service Area


Issuer: QCC Insurance Company

Market: Individual



Key (*modify as needed*)

 : On-exchange service area

 : Off-exchange only service area

Completeness and Redaction Justification Checklist

Issuer Name: QCC Insurance Company, Inc.

Market: Individual PPO

SERFF ID: INAC-131478475

TOC #	Description	Completed (Mark with "X")	Redaction Justification		
			Redacted (Y/N)	Page # in Public PDF	Justification submitted (Y/NA)
Federal Documents Required to Be Filed with PID					
A.2.	RFJ Part I - Unified Rate Review Template	X			
	RFJ Part II – Consumer Friendly Justification	X			
	RFJ Part III – Actuarial Memorandum	X	Y	33 to 40	Y
	Federal Rates Template	X			
Summary Documents/Confirmation of HIOS & SERFF Submissions					
A.2.B.	HIOS Submission	X			
A.2.C.	SERFF Submission	X			
A.2.D.	SERFF Rate/Rule Schedule Tab	X			
B.	Cover Letter & PA Bulletin Information	X			
C.	Rate Change Request Summary	X			
PA Actuarial Memorandum and Rate Exhibits					
D.1.A.	Company Information	X	Y	9	Y
D.1.B.	Rate History & Proposed Variation in Rate Changes	X	N	10	N/A
D.1.C.	Average Rate Change	X	N	10	N/A
D.1.D.	Membership Count	X	N	10	N/A
	PA Act. Exhibits Table 1	X	N	16	N/A
D.1.E.	Benefit Changes	X	N	10	N/A
D.1.F.	Experience Period Claims & Premium	X	N	10 to 11	N/A
	PA Act. Exhibits Table 2	X	N	16	N/A
D.1.G.	Credibility of Data	X	N	11	N/A
	PA Act. Exhibits Tables 2b, 3b, 4b (if applicable)	N/A	N	N/A	N/A
D.1.H.	Trend Identification	X	N	11	N/A
	PA Act. Exhibits Table 3	X	N	16	N/A
D.1.I.	Historical Experience	X	N	12	N/A
	PA Act. Exhibits Table 4	X	N	16	N/A
D.2.A.	Development of PAIR, MAIR and Total Allowed Claims	X	N	12 to 13	N/A
	PA Act. Exhibits Table 5	X	N	18	N/A
D.2.B.	Retention Items	X	N	13	N/A
	PA Act. Exhibits Table 6	X	N	18	N/A
D.2.C.	Normalized Market-Adjusted Projected Allowed Total Claims	X	N	13	N/A
	PA Act. Exhibits Table 7	X	N	18	N/A
D.2.D.	Components of Rate Change	X	N	13 to 14	N/A
	PA Act. Exhibits Table 8	X	N	18	N/A
	PA Act. Exhibits Table 9	X	N	18	N/A
D.3.	Plan Rate Development	X	N	14	N/A
	PA Act. Exhibits Table 10	X	N	19	N/A
D.4.	Plan Premium Development for 21-Year-Old Non-Tobacco User	X	N	14	N/A
	PA Act. Exhibits Table 11	X	N	20	N/A
D.5.A.	Age and Tobacco Factors	X	N	14	N/A
	PA Act. Exhibits Table 12	X	N	21	N/A
D.5.B.	Geographic Factors	X	N	14	N/A
	PA Act. Exhibits Table 13	X	N	21	N/A
D.5.C.	Network Factors	X	N	14	N/A
	PA Act. Exhibits Table 14	X	N	21	N/A
D.5.D.	Service Area Composition	N/A	N	N/A	N/A
D.5.E.	Composite Rating	N/A	N	N/A	N/A
D.6.	Actuarial Certifications	X	Y	14 to 15	Y
Additional Exhibits					
E.	Department Plan Design Summary & Rate Tables	X	N	22 to 27	N/A
	Service Area Map	X	N	89	N/A
Redaction Justification (must be submitted if any information is redacted)		X	N	74	Y