State: *Pennsylvania* **Filing Company:** *UPMC Health Coverage, Inc.*
TOI/Sub-TOI: *H15I Individual Health - Hospital/Surgical/Medical Expense/H15I.001 Health - Hospital/Surgical/Medical Expense*
Product Name: *2020 IND Health Coverage*
Project Name/Number: */*

Supporting Document Schedules

Satisfied - Item:	ACA Public Rate Filing PDF
Comments:	
Attachment(s):	UPMC Health Coverage, Inc. Individual Public PDF UPMC-131943282.pdf
Item Status:	
Status Date:	

UPMC HEALTH PLAN

U.S. Steel Tower
600 Grant Street
Pittsburgh, PA 15219
T 412-454-7500
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www.upmchealthplan.com

May 21, 2019

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

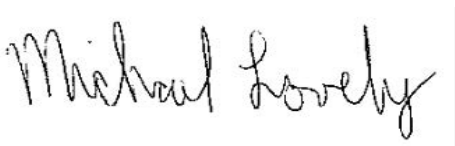
Dear Ms. Gray,

UPMC Health Coverage, Inc. respectfully requests approval of a rate filing for Individual Off Exchange HMO products. The rates are proposed for effective dates of 1/1/2020 through 12/31/2020.

Company Name/NAIC #: UPMC Health Coverage, Inc./15451
Market: Individual
On or Off Exchange: Off Exchange Only
Effective Date of Coverage: 1/1/2020
Average Rate Change Requested: 1.93% ($4.46)
Range of Rate Change Requested: 1.93% to 1.93% ($4.46 to $4.46)
Products Offered: HMO
Rating Areas Where Plans are Offered: 1, 2, 4, 5 (no change from 2019)
Metal Levels Offered: Bronze
Currently Enrolled Lives: 3
Currently Enrolled Policyholders: 2
Number of Plans Offered in 2020: 1 (no change from 2019)
Total additional annual revenue generated from the proposed rate change: $4,535
Corresponding Contract Form #: 660
Binder ID#: UPMC-PA20-125092189
HIOS Issuer ID #: 62560
Submission Tracking #: UPMC-131943282

If you have any questions or require additional information, please call me at 412-454-7849 or email me at lovelymt@upmc.edu.

Sincerely,



Michael Lovely, FSA, CERA, MAAA

Attachment I

Rate Change Summary

UPMC Health Coverage, Inc. – Individual Plans

Rate request filing ID # UPMC-131943282 - 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:	1.93%[1]
Revised requested average rate change:	2.21[1]
Range of requested rate change:	2.21% to 2.21%
Effective date:	1/1/2020
Mapped Members:	3
Available in:	Rating Areas 1, 2, 4, 5

Key information

Jan. 2018-Dec. 2018 financial experience

Premiums	$9,179
Claims	$604
Administrative expenses	$1,892
Taxes & fees	$370
Company made (after taxes)	**$6,314**

How it plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2020:

Claims:	83.16**%**
Administrative:	12.38**%**
Taxes & fees:	2.46%
Profit:	2.00**%**

The company expects its annual medical costs to increase **6.01%**.

Explanation of requested rate change

Additional premium is needed to account for the higher cost and utilization of medical services each year. The proposed rate change also accounts for an increase in anticipated Risk Adjustment payable relative to the prior year and projected increases in taxes and fees for 2020.

[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.

UPMC HEALTH PLAN

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July 12, 2019

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

Dear Ms. Gray,

UPMC Health Coverage, Inc. respectfully requests approval of a rate filing for Individual Off Exchange HMO products. The rates are proposed for effective dates of 1/1/2020 through 12/31/2020. The revised filing includes the following changes:

1.) *In response to Department question 1, the change in morbidity factor and projected risk adjustment PMPM in Table 5 of the PA Actuarial Memorandum Exhibits have been updated along with the corresponding explanations in the actuarial memoranda.*

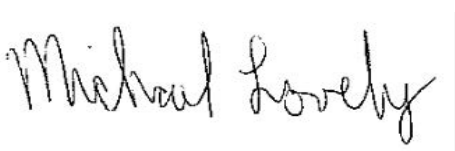
2.) *In response to Department question 2, tables 2, 2b, 3, and 3b of the PA Actuarial Memoranum Exhibits as well as the actuarial memoranda have been updated to account for the capitation of pediatric dental claims.*

3.) *In response to Department question 10, an adjustment factor accounting for the 3-child maximum has been incorporated in the age calibration factor, which has been updated in table 10 of the PA Actuarial Memorandum Exhibits.*

Company Name/NAIC #: UPMC Health Coverage, Inc./15451
Market: Individual
On or Off Exchange: Off Exchange Only
Effective Date of Coverage: 1/1/2020
Average Rate Change Requested: 2.21% ($5.10)
Range of Rate Change Requested: 2.21% to 2.21% ($5.10 to $5.10)
Products Offered: HMO
Rating Areas Where Plans are Offered: 1, 2, 4, 5 (no change from 2019)
Metal Levels Offered: Bronze
Currently Enrolled Lives: 3
Currently Enrolled Policyholders: 2
Number of Plans Offered in 2020: 1 (no change from 2019)
Total additional annual revenue generated from the proposed rate change: $4,538
Corresponding Contract Form #: 660
Binder ID#: UPMC-PA20-125092189
HIOS Issuer ID #: 62560
Submission Tracking #: UPMC-131943282

If you have any questions or require additional information, please call me at 412-454-7849 or email me at lovelymt@upmc.edu.

Sincerely,



Michael Lovely, FSA, CERA, MAAA

PA Actuarial Memorandum

Basic Information and Data

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

Company Information

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

Company Legal Name: UPMC Health Coverage, Inc.
NAIC #: 15451
HIOS Issuer ID: 62560
Market: Individual
Exchange: Off Exchange
Products: HMO
Effective Date: 1/1/2020

Company Contact Information:
[This information redacted for publication.]

Filing Information:
Rate Filing SERFF Tracking #: UPMC-131943282
Form Filing SERFF Tracking #: UPMC-131919548
Binder SERFF Tracking #: UPMC-PA20-125092189

Rate History and Proposed Variations in Rate Changes

The proposed rate change does not vary by plan since only one plan is offered under this filing. Historical rate increases for the captioned company and market are presented in the table below.

SERFF Tracking #	Year	Rate Change
UPMC-130536761	2017	9.3%
UPMC-131034852	2018	-8.3%
UPMC-131496004	2019	12.1%

Average Rate Change

- Average rate change in Table 10, column AC of the PA Actuarial Memorandum Exhibits: 2.2%

- Change in 21-year-old non-tobacco premium PMPM in Table 11, cell AN13 of the PA Actuarial Memorandum Exhibits: -1.5%

Membership Count

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

Benefit Changes

A table with these changes has been included in Appendix I. No plans have actuarial values that fall in the expanded de minimis range.

Single Risk Pool

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

Experience Period Claims and Premium

Claims and premium data for all non-grandfathered policies in the single risk pool for the captioned company and market from the experience period (January 2018 - December 2018) with three months of run-out are displayed in Table 2 of the PA Actuarial Memorandum Exhibits. This section provides a discussion of each field in the table and its relation to the corresponding fields on the URRT. Please note that no data for transitional policies is included in this table.

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

<u>Paid Claims:</u>
This field includes uncompleted paid medical, pharmacy, and pediatric vision experience period claims for the captioned company and market.

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

Month	Completion Factor
1/1/2018	1.0000
2/1/2018	1.0000
3/1/2018	0.9999
4/1/2018	0.9997
5/1/2018	0.9994
6/1/2018	0.9987
7/1/2018	0.9970
8/1/2018	0.9933
9/1/2018	0.9887
10/1/2018	0.9866
11/1/2018	0.9786
12/1/2018	0.9715

Member Months:
The sum of the experience period member months shown in Table 1 is also displayed in Table 2 and matches the value shown in section I, worksheet 1 of the URRT.

Estimated Cost Sharing:
This field represents the difference between allowed claims and ultimate incurred claims in Table 2.

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

Non-EHB portion of Allowed Claims:
No non-EHB claims were allowed during the experience period.

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

Total EHB Capitation:

Pediatric dental benefits were paid for via capitation during the experience period. Pediatric dental claims are administered and paid by Dominion Dental. We receive a separate report from Dominion with the claim detail.

Total Non-EHB Capitation:
No non-EHB benefits were paid for via capitation during the experience period.

Estimated Risk Adjustment:
Experience period Risk Adjustment was estimated to be a payment of $6,318 per suggestion from the Pennsylvania Insurance Department based on data accrued through April 2019, which translates to a PMPM of $175.50. Based on this estimate and past experience, we believe this value is a reasonable estimate until the actual values are released later this year.

Loss Ratio:
The loss ratio calculated in Table 2 is 15.71%.

Credibility of Data

The very limited experience period enrollment of 36 member months requires 0% credibility to be used for the experience period data, as was implemented in prior filings by this company. The rate manual was developed using equivalent experience period data for UPMC Health Options, Inc. Individual single risk pool product, which is displayed in tables 2b, 3b, and 4b in the PA Actuarial Memorandum Exhibits. This data represents the same risk pool as UPMC Health Coverage, Inc. and has a large member month count of over 1,627,833. Therefore, it has been deemed credible to use. Adjustments made to the rate manual are discussed in the "Index Rate" section below.

Trend Identification

The overall annual trend used in rate development is 6.01%. Historical allowed claims for our Individual block of ACA-compliant business were used to develop year over year trend factors for use in the projected rates. The large enrollment count and consistent makeup of this population make it appropriate for use in trend development for this filing. Service categories were defined to be consistent with the URRT instructions. Please see Tables 3 and 3b of the PA Actuarial Memorandum Exhibits for trend development calculations. Please note that the minor changes made to benefit designs in order to keep plan actuarial values within the allowed ranges were not significant enough to warrant an adjustment for induced demand with regard to trend, so the induced demand column has been populated with zeroes in Tables 3 and 3b. Please see Exhibit 7 of the Supporting Exhibits for trend development. We believe that trends will be lower than what is implied by the historical data, which is why a value of 6.01% was used in rate development.

Historical Experience

Historical data from the four most recent calendar years for the captioned company and market with three months of run-out are provided in Table 4. Allowed claims were developed using the same manner described above for Table 2. The historical data listed in Table 4b belongs to ACA-related Individual business under the UPMC Health Options legal entity and was used in the development of manual trend.

Rate Development & Change

Projected Index Rate, Market-Adjusted Index Rate, & Total Allowed Claims

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

Index Rate:
For this filing, the Index Rate of the Experience Period is set equal to the manual rate due to the lack of credibility. As discussed above, the manual rate is developed using fully-credible experience period EHB claims data from ACA-related Individual business under the UPMC Health Options legal entity. The calculation of the manual rate is shown in Table 2b of the PA Actuarial Memorandum Exhibits. The Index Rate of the Projection Period is then calculated in Table 5 by applying two years of 6.01% annual trend to the experience period manual rate. Due to current uncertainty surrounding the market in 2020 due to the repeal of the Individual Mandate, it has been required by the Pennsylvania Insurance Department that an assumption for increased morbidity of the single risk pool be implemented for the projection period. A 6% increase in morbidity has been applied in the filing to account for this. An additional adjustment factor of 0.9 was applied, resulting in a total factor of 0.954. Compared to a population enrolled across all metal levels, a population with only a bronze plan will attract a much healthier than average block of membership. The 0.9 adjustment factor accounts for this healthier population.

No other adjustments have been applied to the index rate. The average age for our 2018 experience period Individual risk pool was 44.4 with an average premium factor of 1.85. This is comparable to our 2019 experience so far with age 44.9 and premium factor 1.87. This change in factors is small enough that the insured population is considered to be stable, and no additional adjustment for demographics was deemed necessary. Please note that the Index Rate of Projection Period of $505.94 shown in Table 5 matches the corresponding value shown in section III, worksheet 1 of the URRT.

Market-Adjusted Index Rate:
The Projected Index Rate is adjusted by adding estimates for risk adjustment and marketplace fees (with impacts and costs spread across the whole risk pool) to obtain the Projected Market Adjusted Index Rate. Projection period Risk Adjustment PMPM has been estimated to be a payment of $58.72, which is displayed in Table 5. Please see Exhibit 1 of the Supporting Exhibits for the derivation of this value. In attracting a healthier population, as discussed in the morbidity section above, the risk adjustment experienced by this block would shift to a higher payable relative to the Individual population in UPMC Health Options, Inc. The value entered in section II, worksheet 1 of the URRT was $101.19 since the calculation of the Marketed Adjusted Index Rate is done on an allowed claims basis in the URRT. The updated PMPM was derived by taking the original paid PMPM divided by the Paid to Allowed Average Factor. The net amount after accounting for the fee is subtracted from the Index Rate of the Projection Period as part of the calculation of the Market Adjusted Index Rate. For the URRT and Table 5 of the PA Actuarial Memorandum Rate Exhibits, it was entered as a negative number because the calculation subtracts this value. The effect is an increase in premium as additional revenue will be required to cover the anticipated payment. No adjustment was made for the Marketplace User Fee since the only plan included in this filing is only offered off exchange.

Total Allowed Claims:
The Market-Adjusted Index Rate is further modified to develop the projected total allowed claims PMPM by adding the projected allowed non-EHB claims PMPM. Benefits that were offered outside EHB include routine foot care and acupuncture. The projected allowed claims for these benefits is $1.07 PMPM.

Retention Items

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

Administrative Expenses:
Administrative costs of 12.38% of premium have been displayed in Table 6 and the URRT. This value has been derived from projected administrative costs for the projection period. These expenses are assumed to be uniform for all plan designs.

[This information redacted for publication.]

Taxes and Fees:
Taxes and Fees increased from 0% in 2019 to 2.46% in 2020 to account for the return of the Health Insurance Providers Fee in 2020. This load also accounts for the projected Federal Income Tax in 2020. Please note that the Risk Adjustment Administration Fee was included in the Taxes and Fees field in Table 6 and the URRT.

Profit/Contingency:
The projected profit margin for this company will remain at 2% for 2020. This value is listed in both Table 6 and the URRT.

Projected Loss Ratio
The projected period loss ratio, using the federally-prescribed MLR methodology without the credibility adjustment, is 87.9%, as shown in Exhibit 6 of the Supporting Exhibits.

Normalized Market-Adjusted Projected Allowed Total Claims

Normalization factors for 2019 and 2020 are provided in Table 7 of the PA Actuarial Memorandum Exhibits. 2019 factors have been taken from the prior annual rate filing of the captioned company and market. Detailed discussion on each of the 2020 factors are provided below.

Average Age Factor:
The average age factor was calculated using our projected ACA-related Individual population with the prescribed HHS Age Factors for 2020. It was assumed this represents the age distribution of the entire single risk-pool. The number of members under each age bracket was multiplied by the corresponding HHS Age Factor. These were then summed and divided by the total number of members to obtain the average age factor. For UPMC's entire

block of ACA-compliant Individual business, the average age factor is 1.87 and average age was 44.4 during the experience period. This preliminary age factor is then multiplied by an adjustment factor of 0.998, which accounts for the regulation that prohibits charging for more than three children per family, resulting in a final age calibration factor of 1.86. Please see Exhibit 4 in the Supporting Exhibits for the calculation of this factor.

Average Geographic Factor:
The calibration factor of 0.964 was calculated as the weighted average of the geographical factors using projected enrollment for the single risk pool, as shown in Exhibit 2 of the Supporting Exhibits. Please see the Geographic Factors section below for a discussion on the development of factors applied for each rating area.

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

Tobacco Status	Feb 2019 Members	Split	Tobacco Factor	Calibration Factor
Non-User	126,079	91.3%	1.000	0.913
User	11,995	8.7%	1.025	0.089
Total	138,074	100.0%		**1.002**

Average Benefit Richness:
The benefit richness factor applied to the lone plan in this filing is 1.0 to ensure that normalization is not necessary.

Average Network Factor:
The network factor applied for the lone network included in this filing is 1.0.

Components of Rate Change

Data to support the calculation of the components of the rate change is presented in Tables 8 and 9 of the PA Actuarial Memorandum Exhibits. Values presented in the 2019 columns have been taken from this company's 2019 annual rate filing.

Plan Rate Development

Table 10 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance to develop 2020 Plan Adjusted Index Rates. The allowable modifiers that are used in rate development are described below.

Plan Actuarial Value:
The AV for each plan was determined by the issuer's own pricing model based on experience from UPMC's fully-

insured commercial block of business. This model calculates an AV for a given plan by first trending the allowed claims forward two years to the projection period, calculating paid amounts for each benefit category based on the benefit design of a given plan and projected allowed claims data, and taking the ratio of the total projected paid claims to projected allowed claims.

Benefit Richness (induced demand)

Please see Exhibit 3 in the Supporting Exhibits for the induced utilization exhibit. Since there is only one plan in this filing, an induced demand factor of 1.0 was selected to ensure normalization and that the induced demand factor does not exceed the federal factors used in the risk adjustment program.

Benefits in addition to EHBs

Benefits that will be offered outside EHB include routine foot care and acupuncture. The projected allowed claims for these benefits is $1.07 PMPM. The adjustment factor of 1.002 included in Table 10 has been derived by adding the aforementioned PMPM to the projected index rate for 2020 and dividing this total by the same index rate, causing the adjustment to be applied uniformly to all plans. This load has not changed from the prior filing.

Provider Network

Since only one network is included in this filing, no network adjustments were deemed necessary for 2020.

Catastrophic Eligibility

Catastrophic plans will not be offered under this company and market in 2020, so no adjustment is necessary.

Non-Funding of CSR Adjustment

No On Exchange silver plans are included in this filing, so no adjustment is necessary.

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

Table 11 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance. Please see Exhibit 5 of the Supporting Exhibits for historical rate changes for this company and market for a 21-year-old non-tobacco user.

Plan Factors

Age and Tobacco Factors

As indicated in Table 12 of the PA Actuarial Memorandum Exhibits, the default federal standard age curve for 2020 is used in the development of the Consumer Adjusted Premium Rates. A tobacco load of 2.5% will be used for all age bands in the Individual market in 2020. This load has not changed from 2019.

Geographic Factors

The geographic rating areas used within this filing are the same as those defined by the state. To better reflect the varying costs of delivery between each geographical region in which coverage is offered, rating area factors have been updated for 2020. The table below summarizes changes in these factors:

Region	2019	2020
1	1.00	0.96
2	1.00	1.06
4	1.00	0.96
5	1.00	0.96

Network Factors

Since only one network is included in this filing, no network adjustments were deemed necessary for 2020.

Service Area Composition

Table 13 of the PA Actuarial Memorandum Exhibits shows the areas in which plans will be offered in 2020. Service area maps for 2019 and 2020 have been uploaded in the Supporting Documentation section in SERFF.

Composite Rating

No composite rating is used with these plans.

Warning Alerts

No validation errors appear in the URRT.

List of Supporting Exhibits

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

- Exhibit 1: Development of Risk Adjustment PMPM for Projection Period
- Exhibit 2: Derivation of Geographical Calibration Factor
- Exhibit 3: Induced Utilization Derivation
- Exhibit 4: Derivation of Age Calibration Factor
- Exhibit 5: Historical Changes in Consumer Adjusted Premium Rate for Age 21, Non-tobacco User
- Exhibit 6: Derivation of Projection Period MLR
- Exhibit 7: Derivation of Annual Trend

Actuarial Certification

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

- All factor, benefit and other changes from the prior approved filing have been disclosed in this actuarial memorandum.
- New plans cannot be considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106.
- The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2020 Rate Filing Justification.
- The projected Index Rate is:

a. In compliance with all applicable state and Federal statutes and regulations (45 CFR 156.80 and 147.102)
b. Developed in compliance with the applicable Actuarial Standards of Practice
c. Reasonable in relation to the benefits provided and the population anticipated to be covered
d. Neither excessive nor deficient

- The Index Rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 156.80(d)(2) were used to generate plan level rates.
- The geographic rating factors reflect only differences in the costs of delivery and do not include differences for population morbidity by geographic area.
- The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I URRT for all plans except those specified in the certification.

[redacted]

7/12/2019
Date

PA Rate Template Part I
Data Relevant to the Rate Filing

Table 0. Identifying Information

Carrier Name:	UPMC Health Coverage, Inc.		
Product(s):	HMO		
Market Segment:	Individual		
Rate Effective Date:	1/1/2020	to	12/31/2020
Base Period Start Date	1/1/2018	to	12/31/2018
Date of Most Recent Membership	2/1/2019		

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	**Current Period (as of 02-01-2019)**	**Projected Rating Period**
Average Age	34.3	34.7	34.7
Total	36	3	36
<18	12	1	12
18-24	0	0	0
25-29	0	0	0
30-34	0	0	0
35-39	12	1	12
40-44	0	0	0
45-49	3	0	0
50-54	9	1	12
55-59	0	0	0
60-63	0	0	0
64+	0	0	0

*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-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment
$ 9,178.56	$ 601.89	$ 581.57	36	$ 1,015.96	$ 1,597.52	$ -	$ (154.26)	$ 21.96	$ -	$ (6,318.00)
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)										**$ 40.70**
Loss Ratio										**15.71%**

**Express Prescription Drug Rebates as a negative number*

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	19.72%	-2.83%	0.00%	16.33%	0.00%
Outpatient Hospital	2.41%	-2.23%	0.00%	0.12%	40.02%
Professional	-0.75%	-1.60%	0.00%	-2.34%	36.04%
Other Medical	17.64%	1.16%	0.00%	19.01%	20.23%
Capitation				0.00%	1.50%
Prescription Drugs	3.96%	-2.08%	0.00%	1.80%	2.21%
Total Annual Trend				3.41%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.069	

** Express Cost, Utilization, Induced Utilization and Weight as percentages*
*** Should = URRT Trend*

Table 4. Historical Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-15		$ 3,366.84	1.0000	$ 3,366.84	17	$ 198.05		$ -	$ 3,605.29	$ 212.08
Feb-15		$ -	1.0000	$ -	16	$ -		$ -	$ -	$ -
Mar-15		$ -	1.0000	$ -	15	$ -		$ -	$ -	$ -
Apr-15		$ -	1.0000	$ -	14	$ -		$ -	$ -	$ -
May-15		$ -	1.0000	$ -	13	$ -		$ -	$ -	$ -
Jun-15		$ -	1.0000	$ -	13	$ -		$ -	$ -	$ -
Jul-15		$ 37.98	1.0000	$ 37.98	13	$ 2.92		$ -	$ 45.98	$ 3.54
Aug-15		$ -	1.0000	$ -	12	$ -		$ -	$ -	$ -
Sep-15		$ 417.65	1.0000	$ 417.65	12	$ 34.80		$ -	$ 437.56	$ 36.46
Oct-15		$ -	1.0000	$ -	13	$ -		$ -	$ -	$ -
Nov-15		$ -	1.0000	$ -	9	$ -		$ -	$ -	$ -
Dec-15	$ -	$ -	1.0000	$ -	8	$ -	$ 266.36	$ -	$ -	$ -
Jan-16		$ 0.01	1.0000	$ 0.01	8	$ 0.00		$ -	$ 187.53	$ 23.44
Feb-16		$ -	1.0000	$ -	7	$ -		$ -	$ 16.83	$ 2.40
Mar-16		$ -	1.0000	$ -	6	$ -		$ -	$ 45.48	$ 7.58
Apr-16		$ -	1.0000	$ -	6	$ -		$ -	$ 164.86	$ 27.48
May-16		$ 122.18	1.0000	$ 122.18	6	$ 20.36		$ -	$ 261.10	$ 43.52
Jun-16		$ -	1.0000	$ -	6	$ -		$ -	$ 79.64	$ 13.27
Jul-16		$ -	1.0000	$ -	6	$ -		$ -	$ -	$ -
Aug-16		$ 314.24	1.0000	$ 314.24	6	$ 52.37		$ -	$ 314.24	$ 52.37
Sep-16		$ 33.50	1.0000	$ 33.50	6	$ 5.58		$ -	$ 183.84	$ 30.64
Oct-16		$ -	1.0000	$ -	6	$ -		$ -	$ 536.79	$ 89.47
Nov-16		$ -	1.0000	$ -	6	$ -		$ -	$ 224.84	$ 37.47
Dec-16	$ 18,322.07	$ -	1.0000	$ -	6	$ -	$ 4,826.48	$ -	$ 3,281.26	$ 546.88
Jan-17		$ -	1.0000	$ -	4	$ -		$ -	$ -	$ -
Feb-17		$ -	1.0000	$ -	3	$ -		$ -	$ 215.31	$ 71.77
Mar-17		$ -	1.0000	$ -	3	$ -		$ -	$ -	$ -
Apr-17		$ -	1.0000	$ -	3	$ -		$ -	$ 4.00	$ 1.33
May-17		$ -	1.0000	$ -	3	$ -		$ -	$ -	$ -
Jun-17		$ -	1.0000	$ -	3	$ -		$ -	$ -	$ -
Jul-17		$ -	1.0000	$ -	3	$ -		$ -	$ -	$ -
Aug-17		$ -	1.0000	$ -	3	$ -		$ -	$ -	$ -
Sep-17		$ 105.00	1.0000	$ 105.00	3	$ 35.00		$ -	$ 105.00	$ 35.00
Oct-17		$ -	1.0000	$ -	3	$ -		$ -	$ -	$ -
Nov-17		$ 512.55	1.0000	$ 512.55	3	$ 170.85		$ -	$ 628.00	$ 209.33
Dec-17	$ 9,808.68	$ -	1.0000	$ -	3	$ -	$ 334.76	$ -	$ -	$ -
Jan-18		$ 372.20	1.0000	$ 372.20	3	$ 124.07		$ (77.13)	$ 639.44	$ 213.15
Feb-18		$ 36.11	1.0000	$ 36.11	3	$ 12.04		$ -	$ 48.35	$ 16.12
Mar-18		$ 13.92	1.0000	$ 13.92	3	$ 4.64		$ -	$ 26.16	$ 8.72
Apr-18		$ 13.92	1.0000	$ 13.92	3	$ 4.64		$ -	$ 26.16	$ 8.72
May-18		$ 13.92	1.0000	$ 13.92	3	$ 4.64		$ -	$ 26.16	$ 8.72
Jun-18		$ 13.92	1.0000	$ 13.92	3	$ 4.64		$ -	$ 263.63	$ 87.88
Jul-18		$ 13.92	1.0000	$ 13.92	3	$ 4.64		$ (77.13)	$ 171.93	$ 57.31
Aug-18		$ 13.92	1.0000	$ 13.92	3	$ 4.64		$ -	$ 26.16	$ 8.72
Sep-18		$ 13.92	1.0000	$ 13.92	3	$ 4.64		$ -	$ 26.16	$ 8.72
Oct-18		$ 13.92	1.0000	$ 13.92	3	$ 4.64		$ -	$ 26.16	$ 8.72
Nov-18		$ 68.30	0.9766	$ 69.94	3	$ 23.31		$ -	$ 158.75	$ 52.92
Dec-18	$ 9,178.56	$ 13.92	1.0000	$ 13.92	3	$ 4.64	$ 1,015.96	$ -	$ 26.16	$ 8.72

** Express Completion Factor as a percentage*
***Express Prescription Drug Rebates as a negative number*

Carrier Name:	**UPMC Health Coverage, Inc.**
Product(s):	**HMO**
Market Segment:	**Individual**
Rate Effective Date:	**1/1/2020**

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
$ 842,415,260.13	$ 665,621,634.09	$ 669,638,797.25	1,627,833	$ 140,963,261.47	$ 810,602,058.73	$ 1,618,965.56	$ (41,851,586.43)	$ 992,978.13	$ -	$ (42,491,928.00)
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)										**$ 471.87**
Loss Ratio										**78.61%**

**Express Prescription Drug Rebates as a negative number*

Table 3b. Manual Trend Components

Service Category	Cost*	Utilization*	Induced Utilization*	Composite Trend	Weight*
Inpatient Hospital	19.72%	-2.83%	0.00%	16.33%	20.66%
Outpatient Hospital	2.41%	-2.23%	0.00%	0.12%	26.90%
Professional	-0.75%	-1.60%	0.00%	-2.34%	18.75%
Other Medical	17.64%	1.16%	0.00%	19.01%	12.30%
Capitation				0.00%	0.13%
Prescription Drugs	3.96%	-2.08%	0.00%	1.80%	21.26%
Total Annual Trend				6.01%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.124	

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

Table 4b. Historical Manual Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-15		$ 10,896,603.78	1.0000	$ 10,896,603.78	38,102	$ 285.99		$ (541,810.44)	$ 13,394,291.76	$ 351.54
Feb-15		$ 12,394,399.95	1.0000	$ 12,394,399.95	44,106	$ 281.01		$ (627,187.32)	$ 15,074,741.23	$ 341.78
Mar-15		$ 16,933,009.71	1.0000	$ 16,933,009.71	53,545	$ 316.24		$ (761,409.90)	$ 20,366,518.48	$ 380.36
Apr-15		$ 17,923,177.62	1.0000	$ 17,923,177.62	54,073	$ 331.46		$ (768,918.06)	$ 21,017,626.41	$ 388.69
May-15		$ 18,227,371.09	1.0000	$ 18,227,371.09	54,241	$ 336.04		$ (771,307.02)	$ 21,193,658.38	$ 390.73
Jun-15		$ 19,801,507.80	1.0000	$ 19,801,507.80	54,303	$ 364.65		$ (772,188.66)	$ 22,792,001.82	$ 419.72
Jul-15		$ 19,403,930.56	1.0000	$ 19,403,930.56	54,518	$ 355.92		$ (775,245.96)	$ 22,281,389.02	$ 408.70
Aug-15		$ 20,747,339.00	1.0000	$ 20,747,339.00	54,894	$ 377.95		$ (780,592.68)	$ 23,263,199.42	$ 423.78
Sep-15		$ 18,753,945.77	1.0000	$ 18,753,945.77	55,151	$ 340.05		$ (784,247.22)	$ 21,336,242.46	$ 386.87
Oct-15		$ 20,365,810.02	1.0000	$ 20,365,810.02	55,302	$ 368.27		$ (786,394.44)	$ 23,280,541.32	$ 420.97
Nov-15		$ 20,049,283.57	1.0000	$ 20,049,283.57	55,356	$ 362.19		$ (787,162.32)	$ 23,235,111.94	$ 419.74
Dec-15	$ 170,035,700.46	$ 20,918,447.43	1.0000	$ 20,918,447.43	55,852	$ 374.53	$ 43,464,137.16	$ (794,215.44)	$ 23,692,961.76	$ 424.21
Jan-16		$ 29,393,195.58	1.0000	$ 29,393,195.58	104,623	$ 280.94		$ (1,487,739.06)	$ 37,616,511.22	$ 359.54
Feb-16		$ 36,456,963.48	1.0000	$ 36,456,963.48	110,722	$ 329.27		$ (1,574,466.84)	$ 45,047,635.33	$ 406.85
Mar-16		$ 41,078,168.29	1.0000	$ 41,078,168.29	114,417	$ 359.02		$ (1,627,009.74)	$ 50,644,607.90	$ 442.63
Apr-16		$ 39,096,237.31	1.0000	$ 39,096,237.31	113,957	$ 343.08		$ (1,620,468.54)	$ 46,173,333.20	$ 405.18
May-16		$ 40,142,039.18	1.0000	$ 40,142,039.18	112,966	$ 355.35		$ (1,606,376.52)	$ 46,840,074.33	$ 414.64
Jun-16		$ 40,051,075.16	1.0000	$ 40,051,075.16	112,090	$ 357.31		$ (1,593,919.80)	$ 46,328,848.58	$ 413.32
Jul-16		$ 39,851,706.10	1.0000	$ 39,851,706.10	111,448	$ 357.58		$ (1,584,790.56)	$ 45,587,846.47	$ 409.05
Aug-16		$ 43,265,530.38	1.0000	$ 43,265,530.38	110,687	$ 390.88		$ (1,573,969.14)	$ 49,229,019.75	$ 444.76
Sep-16		$ 42,550,411.86	1.0000	$ 42,550,411.86	109,833	$ 387.41		$ (1,561,825.26)	$ 48,306,529.56	$ 439.82
Oct-16		$ 43,360,408.29	1.0000	$ 43,360,408.29	108,954	$ 397.97		$ (1,549,325.88)	$ 48,974,431.52	$ 449.50
Nov-16		$ 42,245,629.28	1.0000	$ 42,245,629.28	107,587	$ 392.66		$ (1,529,887.14)	$ 47,360,352.53	$ 440.21
Dec-16	$ 409,585,471.50	$ 43,330,877.89	1.0000	$ 43,330,877.89	105,394	$ 411.13	$ 98,444,793.44	$ (1,498,702.68)	$ 48,349,364.69	$ 458.75
Jan-17		$ 40,645,419.75	1.0000	$ 40,645,419.75	139,589	$ 291.18		$ (2,715,006.05)	$ 55,914,658.99	$ 400.57
Feb-17		$ 41,700,222.58	1.0000	$ 41,700,222.58	142,743	$ 292.13		$ (2,776,351.35)	$ 55,318,357.79	$ 387.54
Mar-17		$ 48,158,615.68	1.0000	$ 48,158,615.68	143,966	$ 334.51		$ (2,800,138.70)	$ 62,418,231.03	$ 433.56
Apr-17		$ 44,343,381.27	1.0000	$ 44,343,381.27	142,331	$ 311.55		$ (2,768,337.95)	$ 56,608,721.77	$ 397.73
May-17		$ 47,772,985.81	1.0000	$ 47,772,985.81	140,211	$ 340.72		$ (2,727,103.95)	$ 60,388,406.05	$ 430.70
Jun-17		$ 46,886,815.77	1.0000	$ 46,886,815.77	138,685	$ 338.08		$ (2,697,423.25)	$ 58,427,986.35	$ 421.30
Jul-17		$ 45,866,811.73	1.0000	$ 45,866,811.73	137,198	$ 334.31		$ (2,668,501.10)	$ 56,086,109.40	$ 408.80
Aug-17		$ 51,783,922.41	1.0000	$ 51,783,922.41	135,756	$ 381.45		$ (2,640,454.20)	$ 62,427,900.23	$ 459.85
Sep-17		$ 46,200,530.05	1.0000	$ 46,200,530.05	134,099	$ 344.53		$ (2,608,225.55)	$ 55,966,687.39	$ 417.35
Oct-17		$ 54,151,344.46	1.0000	$ 54,151,344.46	132,473	$ 408.77		$ (2,576,599.85)	$ 60,901,507.36	$ 459.73
Nov-17		$ 53,221,421.57	1.0000	$ 53,221,421.57	130,290	$ 408.48		$ (2,534,140.50)	$ 59,246,382.80	$ 454.73
Dec-17	$ 621,597,643.21	$ 50,538,072.17	1.0000	$ 50,538,072.17	126,851	$ 398.40	$ 160,310,669.17	$ (2,467,251.95)	$ 55,895,728.86	$ 440.64
Jan-18		$ 51,448,502.63	1.0000	$ 51,448,502.63	145,009	$ 354.80		$ (3,728,181.39)	$ 64,085,756.68	$ 441.94
Feb-18		$ 51,098,205.36	1.0000	$ 51,098,205.36	142,772	$ 357.90		$ (3,670,668.12)	$ 61,108,577.61	$ 428.02
Mar-18		$ 53,220,037.00	0.9999	$ 53,224,145.55	140,595	$ 378.56		$ (3,614,697.45)	$ 63,496,068.18	$ 451.62
Apr-18		$ 58,722,317.73	0.9997	$ 58,742,797.18	139,104	$ 422.29		$ (3,576,363.84)	$ 68,025,894.81	$ 489.03
May-18		$ 56,716,543.69	0.9994	$ 56,747,898.60	137,488	$ 412.75		$ (3,534,816.48)	$ 65,909,492.92	$ 479.38
Jun-18		$ 54,096,144.65	0.9987	$ 54,166,689.16	136,012	$ 398.25		$ (3,496,868.52)	$ 61,882,490.94	$ 454.98
Jul-18		$ 54,068,924.38	0.9970	$ 54,232,809.88	134,803	$ 402.31		$ (3,465,785.13)	$ 61,739,838.92	$ 458.00
Aug-18		$ 58,621,345.09	0.9933	$ 59,015,986.78	133,423	$ 442.32		$ (3,430,305.33)	$ 66,541,601.23	$ 498.73
Sep-18		$ 53,625,707.88	0.9887	$ 54,235,951.78	132,009	$ 410.85		$ (3,393,951.39)	$ 60,628,839.87	$ 459.28
Oct-18		$ 61,469,390.64	0.9866	$ 62,302,142.17	130,643	$ 476.89		$ (3,358,831.53)	$ 69,399,162.37	$ 531.21
Nov-18		$ 56,404,058.49	0.9786	$ 57,637,625.26	129,059	$ 446.60		$ (3,318,106.89)	$ 63,646,503.02	$ 493.16
Dec-18	$ 842,415,260.13	$ 56,130,456.55	0.9715	$ 57,779,021.03	126,916	$ 455.25	$ 140,963,261.47	$ (3,263,010.36)	$ 63,279,223.88	$ 498.59

** Express Completion Factor as a percentage*

***Express Prescription Drug Rebates as a negative number*

PA Rate Template Part II

Rate Development and Change

Carrier Name:	**UPMC Health Coverage, Inc.**
Product(s):	**HMO**
Market Segment:	**Individual**
Rate Effective Date:	**1/1/2020**

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	$ 40.70	$ 471.87	<- Actual Experience PMPM should be consistent with the Index Rate for Experience Period on URRT
Two year trend projection Factor	1.069	1.124	
Unadjusted Projected Allowed EHB Claims PMPM	$ 43.52	$ 530.33	
Single Risk Pool Adjustment Factors			
Change in Morbidity	1.000	0.954	<- See URRT Instructions
Change in Other	1.000	1.000	
Change in Demographics	1.000	1.000	<- See URRT Instructions
Change in Network	1.000	1.000	
Change in Benefits	1.000	1.000	<- See URRT Instructions
Change in Other	1.000	1.000	<- See URRT Instructions
Total Adjusted Projected Allowed EHB Claims PMPM	$ 43.52	$ 505.94	
Credibidility Factors	0%	100%	<- See Instructions
Blended Projected EHB Claims PMPM		**$ 505.94**	**<- Projected Index Rate**
Development of the Market-Adjusted Index Rate and Total Allowed Claims			
Adjusted Projected Allowed EHB Claims PMPM	$ 505.94	<- 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]	$ 505.94		
Projected Paid to Allowed Ratio	0.580		
Projected Paid EHB Claims PMPM	$ 293.59		
Market-wide Adjustments			
Projected Risk Adjustment PMPM	$ (58.72)		
Projected Paid Exchange User Fees PMPM	$ -		
Market-Adjusted Projected Paid EHB Claims PMPM	$ 352.30		
Market-Adjusted Projected Allowed EHB Claims PMPM	$ 607.13	<- Market-Adjusted Index Rate	
Projected Allowed Non-EHB Claims PMPM	$ 1.07		
Market-Adjusted Projected Paid Total Claims PMPM	$ 352.92		
Market-Adjusted Projected Allowed Total Claims PMPM	$ 608.19		

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	$ 471.87	**<- Index Rate of Experience Period on URRT**
Blended Earned Premium	**$ 842,415,260.13**	
Blended Loss Ratio	**78.61%**	

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

Effective Date	1/1/2020	4/1/2020	7/1/2020	10/1/2020	Total Single Risk Pool
# of Member Months Renewing in Quarter	36	-	-	-	36
Adjusted Projected Allowed EHB Claims PMPM Q1	$ 505.94	$ 505.94	$ 505.94	$ 505.94	$ 505.94
Months of Trend	-	3	6	9	
Annual Trend	0.00%	0.00%	0.00%	0.00%	
Single Risk Pool Projected Allowed Claims	$ 505.94	$ 505.94	$ 505.94	$ 505.94	$ 505.94
Quarterly Trend Factor	100.0%	100.0%	100.0%	100.0%	100.0%
2020 Trend Factors by Quarter	1.0000	1.0000	1.0000	1.0000	

Table 6. Retention

Retention Items - *Express in percentages*	Percentages	PMPM Amounts
Administrative Expenses	12.38%	$52.54
General and Claims	9.44%	$40.08
Agent/Broker Fees and Commissions	0.35%	$1.48
Quality Improvement Initiatives	2.59%	$10.99
Taxes and Fees	2.46%	$10.45
RA User Fee	0.04%	$0.18
PA Premium Tax (if applicable)	0.00%	$0.00
Federal Income Tax	0.42%	$1.78
Health Insurance Providers Fee (Prorated for Small Groups only)	2.00%	$8.49
Profit/Contingency (after tax)	2.00%	$8.49
Total Retention	16.84%	$71.48
Projected Required Revenue PMPM	$ 424.41	

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2019	2020
Average Age Factor	1.837	1.864
Average Geographic Factor	1.000	0.964
Average Tobacco Factor	1.002	1.002
Average Benefit Richness (induced demand)	1.000	1.000
Average Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	$ 583.41	$ 608.19
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	$ 316.88	$ 337.84

Table 8. Components of Rate Change

Rate Components	2019	2020	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	$ 230.73	$ 235.83	$5.10	2.2%
B. Base period allowed claims before normalization	$ 429.37	$ 471.87	$42.50	18.4%
C. Normalization factor component of change	$ (196.16)	$ (209.76)	-$13.60	-5.9%
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	$ 233.21	$ 262.11	$ 28.90	12.5%
D2. URRT Trend	$ 34.82	$ 32.47	$ (2.34)	-1.0%
D3. URRT Morbidity	$ 16.08	$ (13.55)	$ (29.63)	-12.8%
D4. URRT Other	$ 5.25	$ -	$ (5.25)	-2.3%
D5. Normalized URRT RA/RI on an allowed basis	$ 26.88	$ 56.21	$ 29.33	12.7%
D6. Normalized Exchange User Fee on an allowed basis	$ -	$ -	$ -	0.0%
D7. Subtotal - Sum(D1:D6)	$ 316.24	$ 337.25	$ 21.01	9.1%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	$ -	$ -	$ -	0.0%
E2. Pricing AV	-124.7082826	$ (141.55)	$ (16.84)	-7.3%
E3. Benefit Richness	$ -	$ -	$ -	0.0%
E4. Catastrophic Eligibility	$ -	$ -	$ -	0.0%
E5. Subtotal - Sum(E1:E4)	$ (124.71)	$ (141.55)	$ (16.84)	-7.3%
F. Change in Retention Components				
F1. Administrative Expenses	$ 33.20	$ 29.20	$ (4.00)	-1.7%
F2. Taxes and Fees	$ 0.97	$ 5.81	$ 4.84	2.1%
F3. Profit and/or Contingency	$ 4.61	$ 4.72	$ 0.10	0.0%
F4. Subtotal - Sum(F1:F3)	$ 38.78	$ 39.72	$ 0.94	0.4%
G. Change in Miscellaneous Items	$ -	$ -	$ -	0.0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	$ 230.31	$ 235.42	$ 5.11	2.2%

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

	2019	2020	
Paid-to-Allowed	0.606	0.580	
URRT Trend (Total Applied Trend Factor)	1.149	1.124	<- URRT W1, S2
URRT Morbidity	1.060	0.954	<- URRT W1, S2
URRT "Other"	1.018	1.000	<- URRT W1, S2
Risk Adjustment	$ 29.97	$ 58.72	<- URRT W1, S3
Exchange User Fee	$ -	$ -	<- URRT W1, S3
Capitation	$ -	$ -	<- URRT W1, S2
Network	1.000	1.000	
Pricing AV	0.606	0.580	<- For 2019 in cell J81, please include a factor equal to the product of the average Pricing AV and the Non-Funding of CSR Adjustment
Benefit Richness	1.000	1.000	
Catastrophic Eligibility	1.000	1.000	
Administrative Expenses	14.39%	12.38%	
Taxes and Fees	0.42%	2.46%	
Profit and/or Contingency	2.00%	2.00%	

PA Rate Template Part III

Table 10. Plan Rates

Carrier Name:	UPMC Health Coverage, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2020
Base Period Start Date	1/1/2018
Date of Most Recent Membership	2/1/2019
Market Adjusted Index Rate	$ 607.13

Calibration	
Age Calibration Factor	1.364
Geographic Calibration Factor	0.964
Tobacco Calibration Factor	1.000
Aggregate Calibration Factor	1.800

Total Covered Lives @ 02-01-2019
-

Plan Number	HIOS Plan ID (Standard Component)	Plan Type (HMO, POS, PPO, EPO, Indemnity, Other)	1/1/2019 Plan Marketing Name	Existing, Modified, New, Discontinued & Mapped, Discontinued & Not Mapped [E,M,N,D/M, DNM] for 2020	1/1/2020 Plan HIOS Plan ID [if 1/1/2019 Plan Discontinued & Mapped]	Metallic Tier	Metallic Tier Actuarial Value	Standard AV, Approach (1), Approach (2)	Exchange On/Off or Off	45 CFR Part 156.8 (d) (2) Allowable Factors: Pricing AV (company-determined AV)	Benefit Richness (induced demand)	Benefits in addition to EHB	Provider Network	Catastrophic Eligibility	Non-Funding of CSR Adjustment	Pure Premium	Admin Costs	Taxes & Fees (not including Exchange fees)	Profit or Contingency	Total Covered Lives Mapped into 2020 Plans @ 02-01-2019	Total Policyholders @ 02-01-2019	2019 Calibrated Plan Adjusted Index Rate PMPM	2020 Calibrated Plan Adjusted Index Rate PMPM	Proposed Rate Change Compared to Prior 12 months	% of Total Covered Lives	02-01-2019 Number of Covered Lives by Rating Area: 1	2	3	4	5	6	7	8	9	Total	2020 Continued/ Discontinued Plans Indicator
Totals							0.620			0.580	1.000	1.002	1.000	1.000	1.000	$ 353.05	12.4%	2.5%	2.0%	3	2	$ 230.73	$ 235.83	2.2%		1	-	-	2	-	-	-	-	-	3	
Transitional Plans	TRANSITIONAL	N/A	TRANSITIONAL	DNM	TRANSITIONAL	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	-		N/A	N/A	N/A	N/A										0
Plan 1	62560PA0030003	HMO	UPMC Advantage Essential Bronze	M		Bronze	0.6199	Standard AV	Off	0.580	1.000	1.000	1.000	1.000	1.000	$953.05	12.4%	2.5%	2.0%	3	2	$ 230.73	$ 235.83	2.2%	100.0%	1	-	-	2	-	-	-	-	-	3	1
Plan 2																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 3																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 4																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 5																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 6																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 7																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 8																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 9																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 10																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 11																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 12																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 13																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 14																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 15																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 16																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 17																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 18																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 19																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 20																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 21																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 22																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 23																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 24																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 25																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 26																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 27																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 28																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 29																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 30																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 31																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 32																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 33																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 34																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 35																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 36																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 37																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 38																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 39																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 40																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 41																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 42																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 43																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 44																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 45																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 46																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 47																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 48																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 49																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 50																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 51																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 52																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 53																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 54																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 55																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 56																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 57																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 58																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 59																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 60																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 61																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 62																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 63																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 64																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 65																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 66																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 67																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 68																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 69																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 70																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 71																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 72																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 73																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 74																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 75																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 76																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 77																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 78																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 79																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 80																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 81																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 82																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 83																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 84																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 85																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 86																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 87																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 88																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 89																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 90																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 91																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 92																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 93																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 94																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 95																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 96																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 97																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 98																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 99																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 100																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 101																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 102																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 103																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 104																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 105																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 106																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 107																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 108																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 109																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 110																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 111																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 112																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 113																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 114																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 115																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 116																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 117																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 118																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 119																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 120																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 121																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 122																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 123																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 124																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 125																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 126																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 127																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 128																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 129																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 130																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 131																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 132																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 133																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 134																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 135																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 136																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 137																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 138																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 139																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 140																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 141																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 142																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 143																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 144																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 145																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 146																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 147																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 148																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 149																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 150																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 151																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 152																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 153																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 154																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 155																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 156																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 157																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 158																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 159																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 160																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 161																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 162																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 163																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 164																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 165																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 166																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 167																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 168																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 169																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 170																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 171																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 172																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 173																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 174																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 175																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 176																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 177																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 178																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 179																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 180																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 181																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 182																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 183																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 184																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 185																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 186																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 187																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 188																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 189																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 190																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 191																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 192																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 193																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 194																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 195																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 196																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 197																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 198																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 199																$0.00				-			$ -	0.0%	0.0%										-	0
Plan 200																$0.00				-			$ -	0.0%	0.0%										-	0

PA Rate Template Part IV A - Individual

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

Carrier Name: UPMC Health Coverage, Inc.
Product(s): HMO
Market Segment: Individual
Rate Effective Date: 1/1/2020

Plan Number	HIOS Plan ID (Standard Component)	1/1/2019 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2020	1/1/2020 Plan HIOS Plan ID (If 1/1/2019 Plan Discontinued & Mapped)	Metallic Tier	Exchange On/Off or Off	2019 21-year-old, Non-Tobacco Premium PMPM										2020 21-year-old, Non-Tobacco Premium PMPM										Change in 21-year-old Non-Tobacco Premium PMPM									
							1	2	3	4	5	6	7	8	9	Average (weighted by enrollment by rating area)	1	2	3	4	5	6	7	8	9	Average (weighted by enrollment by rating area)	1	2	3	4	5	6	7	8	9	Average (weighted by enrollment by rating area)
Totals	These cells auto-fill using the data entered in Table 10.						$ 230.73	$ -	$ -	$ 230.73	$ -	$ -	$ -	$ -	$ -	$ 230.73	$ 227.28	$ -	$ -	$ 227.28	$ -	$ -	$ -	$ -	$ -	$ 227.28	-1.5%	0.0%	0.0%	-1.5%	0.0%	0.0%	0.0%	0.0%	0.0%	-1.5%
Plan 1	62560PA0030003	K Advantage Essential Br	M	0	Bronze	Off	$ 230.73	$ 230.73	$ -	$ 230.73	$ 230.73	$ -	$ -	$ -	$ -	$ 230.73	$ 227.28	$ 249.19	$ -	$ 227.28	$ 227.28	$ -	$ -	$ -	$ -	$ 227.28	-1.5%	8.0%		-1.5%	-1.5%					-1.5%
Plan 2	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 3	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 4	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 5	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 6	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 7	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 8	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 9	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 10	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 11	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 12	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 13	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 14	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 15	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 16	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 17	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 18	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 19	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 20	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 21	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 22	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 23	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 24	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 25	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 26	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 27	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 28	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 29	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 30	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 31	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 32	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 33	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 34	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 35	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 36	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 37	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 38	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 39	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 40	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 41	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 42	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 43	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 44	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 45	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 46	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 47	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 48	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 49	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 50	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 51	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 52	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 53	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 54	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 55	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 56	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 57	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 58	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 59	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 60	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 61	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 62	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 63	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 64	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 65	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 66	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 67	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 68	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 69	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 70	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 71	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 72	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 73	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 74	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 75	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 76	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 77	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 78	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 79	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 80	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 81	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 82	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 83	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 84	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 85	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 86	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 87	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 88	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 89	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 90	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 91	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 92	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 93	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 94	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 95	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 96	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 97	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 98	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 99	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 100	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 101	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 102	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 103	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 104	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 105	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 106	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 107	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 108	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 109	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 110	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 111	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 112	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 113	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 114	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 115	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 116	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 117	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 118	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 119	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 120	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 121	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 122	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan 123	0	0	0	0	0	0	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -										
Plan

PA Rate Quarterly Template Part V
Consumer Factors

Carrier Name:	**UPMC Health Coverage, Inc.**
Product(s):	**HMO**
Market Segment:	**Individual**
Rate Effective Date:	**1/1/2020**

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	1.025
15	0.833			41	1.302	1.025
16	0.859			42	1.325	1.025
17	0.885			43	1.357	1.025
18	0.913	1.025		44	1.397	1.025
19	0.941	1.025		45	1.444	1.025
20	0.970	1.025		46	1.500	1.025
21	1.000	1.025		47	1.563	1.025
22	1.000	1.025		48	1.635	1.025
23	1.000	1.025		49	1.706	1.025
24	1.000	1.025		50	1.786	1.025
25	1.004	1.025		51	1.865	1.025
26	1.024	1.025		52	1.952	1.025
27	1.048	1.025		53	2.040	1.025
28	1.087	1.025		54	2.135	1.025
29	1.119	1.025		55	2.230	1.025
30	1.135	1.025		56	2.333	1.025
31	1.159	1.025		57	2.437	1.025
32	1.183	1.025		58	2.548	1.025
33	1.198	1.025		59	2.603	1.025
34	1.214	1.025		60	2.714	1.025
35	1.222	1.025		61	2.810	1.025
36	1.230	1.025		62	2.873	1.025
37	1.238	1.025		63	2.952	1.025
38	1.246	1.025		64+	3.000	1.025
39	1.262	1.025				

*PA follows the federal default age curve.

Table 13. Geographic Factors

Geographic Area Factors			
Area	Counties	Current Factor	Proposed Factor
Rating Area 1	Erie, Crawford, Warren, Venango, Forest, Clarion, Mckean	1.000	0.964
Rating Area 2	Elk, Cameron, Potter	1.000	1.057
Rating Area 3			
Rating Area 4	Allegheny, Armstrong, Beaver, Butler, Fayette, Greene, Indiana, Lawrence, Washington, Westmoreland	1.000	0.964
Rating Area 5	Cambria, Blair, Clearfield, Bedford, Somerset, Jefferson, Huntingdon	1.000	0.964
Rating Area 6			
Rating Area 7			
Rating Area 8			
Rating Area 9			

Table 14. Network Factors

Projecion Period Network Factors				
Network Name	Rating Area	Current Factor	Proposed Factor	DOH Approval Date
Standard	1, 2, 4, 5	1.000	1	5/2/2018

Company Name:	UPMC Health Coverage, Inc.
Market:	Individual
Product:	HMO
Effective Date of Rates:	January 1, 2020

Ending date of Rates: December 31, 2020

HIOS Plan ID (On Exchange)=>								
HIOS Plan ID (Off Exchange)=>	**62560PA0030003**		**62560PA0030003**		**62560PA0030003**		**62560PA0030003**	
Plan Marketing Name =>	**PMC Advantage Essential Bron**		**PMC Advantage Essential Bron**		**PMC Advantage Essential Bron**		**PMC Advantage Essential Bron**	
Form # =>	**660**		**660**		**660**		**660**	
Rating Area =>	**1**		**2**		**4**		**5**	
Network =>	**ndard Referral w/Dominion PE**		**ndard Referral w/Dominion PE**		**ndard Referral w/Dominion PE**		**ndard Referral w/Dominion PE**	
Metal =>	**Bronze**		**Bronze**		**Bronze**		**Bronze**	
Deductible =>	**$6450/ $12900**		**$6450/ $12900**		**$6450/ $12900**		**$6450/ $12900**	
Coinsurance =>	**80%**		**80%**		**80%**		**80%**	
Copays =>	**20% / 20%**		**20% / 20%**		**20% / 20%**		**20% / 20%**	
OOP Maximum =>	**$8150/ $16300**		**$8150/ $16300**		**$8150/ $16300**		**$8150/ $16300**	
Pediatric Dental (Yes/No) =>	**Yes**		**Yes**		**Yes**		**Yes**	
Age Band	**Non-Tobacco**	**Tobacco**	**Non-Tobacco**	**Tobacco**	**Non-Tobacco**	**Tobacco**	**Non-Tobacco**	**Tobacco**
0 - 14	$173.87	$173.87	$190.63	$190.63	$173.87	$173.87	$173.87	$173.87
15	$189.32	$189.32	$207.58	$207.58	$189.32	$189.32	$189.32	$189.32
16	$195.23	$195.23	$214.05	$214.05	$195.23	$195.23	$195.23	$195.23
17	$201.14	$201.14	$220.53	$220.53	$201.14	$201.14	$201.14	$201.14
18	$207.51	$212.69	$227.51	$233.20	$207.51	$212.69	$207.51	$212.69
19	$213.87	$219.22	$234.49	$240.35	$213.87	$219.22	$213.87	$219.22
20	$220.46	$225.97	$241.71	$247.76	$220.46	$225.97	$220.46	$225.97
21	$227.28	$232.96	$249.19	$255.42	$227.28	$232.96	$227.28	$232.96
22	$227.28	$232.96	$249.19	$255.42	$227.28	$232.96	$227.28	$232.96
23	$227.28	$232.96	$249.19	$255.42	$227.28	$232.96	$227.28	$232.96
24	$227.28	$232.96	$249.19	$255.42	$227.28	$232.96	$227.28	$232.96
25	$228.19	$233.89	$250.19	$256.44	$228.19	$233.89	$228.19	$233.89
26	$232.73	$238.55	$255.17	$261.55	$232.73	$238.55	$232.73	$238.55
27	$238.19	$244.14	$261.15	$267.68	$238.19	$244.14	$238.19	$244.14
28	$247.05	$253.23	$270.87	$277.64	$247.05	$253.23	$247.05	$253.23
29	$254.33	$260.68	$278.84	$285.81	$254.33	$260.68	$254.33	$260.68
30	$257.96	$264.41	$282.83	$289.90	$257.96	$264.41	$257.96	$264.41
31	$263.42	$270.00	$288.81	$296.03	$263.42	$270.00	$263.42	$270.00
32	$268.87	$275.59	$294.79	$302.16	$268.87	$275.59	$268.87	$275.59
33	$272.28	$279.09	$298.53	$305.99	$272.28	$279.09	$272.28	$279.09
34	$275.92	$282.82	$302.52	$310.08	$275.92	$282.82	$275.92	$282.82
35	$277.74	$284.68	$304.51	$312.12	$277.74	$284.68	$277.74	$284.68
36	$279.55	$286.54	$306.50	$314.17	$279.55	$286.54	$279.55	$286.54
37	$281.37	$288.41	$308.50	$316.21	$281.37	$288.41	$281.37	$288.41
38	$283.19	$290.27	$310.49	$318.25	$283.19	$290.27	$283.19	$290.27
39	$286.83	$294.00	$314.48	$322.34	$286.83	$294.00	$286.83	$294.00
40	$290.46	$297.73	$318.46	$326.43	$290.46	$297.73	$290.46	$297.73
41	$295.92	$303.32	$324.45	$332.56	$295.92	$303.32	$295.92	$303.32
42	$301.15	$308.67	$330.18	$338.43	$301.15	$308.67	$301.15	$308.67
43	$308.42	$316.13	$338.15	$346.60	$308.42	$316.13	$308.42	$316.13
44	$317.51	$325.45	$348.12	$356.82	$317.51	$325.45	$317.51	$325.45
45	$328.19	$336.40	$359.83	$368.83	$328.19	$336.40	$328.19	$336.40
46	$340.92	$349.44	$373.79	$383.13	$340.92	$349.44	$340.92	$349.44
47	$355.24	$364.12	$389.48	$399.22	$355.24	$364.12	$355.24	$364.12
48	$371.60	$380.89	$407.43	$417.61	$371.60	$380.89	$371.60	$380.89
49	$387.74	$397.43	$425.12	$435.75	$387.74	$397.43	$387.74	$397.43
50	$405.92	$416.07	$445.05	$456.18	$405.92	$416.07	$405.92	$416.07
51	$423.88	$434.47	$464.74	$476.36	$423.88	$434.47	$423.88	$434.47
52	$443.65	$454.74	$486.42	$498.58	$443.65	$454.74	$443.65	$454.74
53	$463.65	$475.24	$508.35	$521.06	$463.65	$475.24	$463.65	$475.24
54	$485.24	$497.37	$532.02	$545.32	$485.24	$497.37	$485.24	$497.37
55	$506.83	$519.51	$555.69	$569.59	$506.83	$519.51	$506.83	$519.51
56	$530.24	$543.50	$581.36	$595.89	$530.24	$543.50	$530.24	$543.50
57	$553.88	$567.73	$607.28	$622.46	$553.88	$567.73	$553.88	$567.73
58	$579.11	$593.59	$634.94	$650.81	$579.11	$593.59	$579.11	$593.59
59	$591.61	$606.40	$648.64	$664.86	$591.61	$606.40	$591.61	$606.40
60	$616.84	$632.26	$676.30	$693.21	$616.84	$632.26	$616.84	$632.26
61	$638.66	$654.62	$700.22	$717.73	$638.66	$654.62	$638.66	$654.62
62	$652.98	$669.30	$715.92	$733.82	$652.98	$669.30	$652.98	$669.30
63	$670.93	$687.70	$735.61	$754.00	$670.93	$687.70	$670.93	$687.70
64+	$681.84	$698.89	$747.57	$766.26	$681.84	$698.89	$681.84	$698.89

UPMC Health Coverage, Inc.
Individual
Plan Design Summary

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
62560PA0030003	UPMC Advantage Essential Bronze	HMO	Bronze	Off	IND HMO Standard Referral w/Dominion PEDS PPO-2020	1, 2, 4, 5	Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Fayette, Forest, Greene, Huntingdon, Indiana, Jefferson, Lawrence, Mckean, Mercer, Potter, Somerset, Venango, Warren, Washington, Westmoreland

Company Name UPMC Health Coverage, Inc.
Market Individual
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

	02-01-2019 Number of Covered Lives by Rating County				RATING AREA 1		
					1	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Crawford	Clarion	Erie
62560PA0030003	UPMC Advantage Essential Bronze	HMO	Bronze	Off	$227.28	$227.28	$227.28

					RATING AREA 2			RATING AREA 3				
0	0	0	0	0	0	0	0	0	0	0	0	0
Forest	**Mckean**	**Mercer**	**Venango**	**Warren**	**Elk**	**Cameron**	**Potter**	**Bradford**	**Carbon**	**Clinton**	**Lackawanna**	**Luzerne**
$227.28	$227.28	$227.28	$227.28	$227.28	$249.19	$249.19	$249.19					

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

RATING AREA 4

2	0	0	0	0	0
Allegheny	**Armstrong**	**Beaver**	**Butler**	**Fayette**	**Greene**
$227.28	$227.28	$227.28	######	$227.28	$227.28

				RATING AREA 5							RATING AR
0	0	0	0	0	0	0	0	0	0	0	0
Indiana	**Lawrence**	**Washington**	**Westmoreland**	**Bedford**	**Blair**	**Clearfield**	**Cambria**	**Huntingdon**	**Jefferson**	**Somerset**	**Centre**
$227.28	$227.28	$227.28	$227.28	$227.28	$227.28	$227.28	$227.28	$227.28	$227.28	$227.28	

EA 6

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

RATING AREA 7

0	0	0	0
Adams	**Berks**	**Lancaster**	**York**

RATING AREA 8

0	0	0	0	0
Bucks	**Chester**	**Delaware**	**Montgomery**	**Philadelphia**

RATING AREA 9

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

Unified Rate Review v5.0

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

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

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

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

Company Legal Name:	**UPMC HEALTH COVERAGE INC.**	State:	**PA**
HIOS Issuer ID:	**62560**	Market:	**Individual**
Effective Date of Rate Change(s):	**1/1/2020**		

Market Level Calculations (Same for all Plans)

Section I: Experience Period Data

Experience Period: 1/1/2018 to 12/31/2018

	Total	PMPM
Allowed Claims	$1,465.22	$40.70
Reinsurance	$0.00	$0.00
Incurred Claims in Experience Period	$449.27	$12.48
Risk Adjustment	-$6,318.00	-$175.50
Experience Period Premium	$9,178.56	$254.96
Experience Period Member Months	36	

Section II: Projections

Benefit Category	Experience Period Index Rate PMPM	Year 1 Trend		Year 2 Trend		Trended EHB Allowed Claims PMPM
		Cost	Utilization	Cost	Utilization	
Inpatient Hospital	$0.00	1.197	0.972	1.197	0.972	$0.00
Outpatient Hospital	$16.29	1.024	0.978	1.024	0.978	$16.34
Professional	$14.67	0.993	0.984	0.993	0.984	$14.01
Other Medical	$8.23	1.176	1.012	1.176	1.012	$11.66
Capitation	$0.61	1.000	1.000	1.000	1.000	$0.61
Prescription Drug	$0.90	1.040	0.979	1.040	0.979	$0.93
Total	$40.70					**$43.54**

Morbidity Adjustment	0.954
Demographic Shift	1.000
Plan Design Changes	1.000
Other	1.000
Adjusted Trended EHB Allowed Claims PMPM for **1/1/2020**	**$41.54**

Manual EHB Allowed Claims PMPM	$505.94
Applied Credibility %	0.00%

		Projected Period Totals
Projected Index Rate for **1/1/2020**	**$505.94**	$18,213.84
Reinsurance	$0.00	$0.00
Risk Adjustment Payment/Charge	-$101.19	-$3,642.84
Exchange User Fees	0.00%	$0.00
Market Adjusted Index Rate	**$607.13**	**$21,856.68**

Projected Member Months	**36**

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Product-Plan Data Collection

To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + P.
To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L.
To validate, select the Validate button or Ctrl + Shift + I.
To finalize, select the Finalize button or Ctrl + Shift + F.

Company Legal Name:	**UPMC HEALTH COVERAGE INC.**
HIOS Issuer ID:	**62560**
Effective Date of Rate Change(s):	**1/1/2020**

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

Product/Plan Level Calculations

Field #	**Section I: General Product and Plan Information**	
1.1	Product Name	Individual HMO
1.2	Product ID	62560PA003
1.3	Plan Name	UPMC Advantage Essential Bronze
1.4	Plan ID (Standard Component ID)	62560PA0030003
1.5	Metal	Bronze
1.6	AV Metal Value	0.620
1.7	Plan Category	Renewing
1.8	Plan Type	HMO
1.9	Exchange Plan?	No
1.10	Effective Date of Proposed Rates	1/1/2020
1.11	Cumulative Rate Change % (over 12 mos prior)	-1.50%
1.12	Product Rate Increase %	-1.50%
1.13	Submission Level Rate Increase %	-1.50%

Worksheet 1 Totals		**Section II: Experience Period and Current Plan Level Information**		
	2.1	Plan ID (Standard Component ID)	Total	62560PA0030003
$1,465	2.2	Allowed Claims	$694	$694
$0	2.3	Reinsurance	$0	$0
	2.4	Member Cost Sharing	$1,016	$1,016
	2.5	Cost Sharing Reduction	$0	$0
$449	2.6	Incurred Claims	-$322	-$322
-$6,318	2.7	Risk Adjustment Transfer Amount	-$6,318	-$6,318
$9,179	2.8	Premium	$9,179	$9,179
36	2.9	Experience Period Member Months	36	36
	2.10	Current Enrollment	3	3
	2.11	Current Premium PMPM	$298.49	$298.49
	2.12	Loss Ratio	-11.26%	-11.26%
		Per Member Per Month		
	2.13	Allowed Claims	$19.28	$19.28
	2.14	Reinsurance	$0.00	$0.00
	2.15	Member Cost Sharing	$28.22	$28.22
	2.16	Cost Sharing Reduction	$0.00	$0.00
	2.17	Incurred Claims	-$8.95	-$8.95
	2.18	Risk Adjustment Transfer Amount	-$175.50	-$175.50
	2.19	Premium	$254.96	$254.96

	Section III: Plan Adjustment Factors	
3.1	Plan ID (Standard Component ID)	62560PA0030003
3.2	Market Adjusted Index Rate	$607.13
3.3	AV and Cost Sharing Design of Plan	0.5803
3.4	Provider Network Adjustment	1.0000
3.5	Benefits in Addition to EHB	1.0021
	Administrative Costs	
3.6	Administrative Expense	12.38%
3.7	Taxes and Fees	2.46%
3.8	Profit & Risk Load	2.00%
3.9	Catastrophic Adjustment	1.0000
3.10	**Plan Adjusted Index Rate**	$424.55

3.11	Age Calibration Factor	0.5365	0.5365
3.12	Geographic Calibration Factor	1.0376	1.0376
3.13	Tobacco Calibration Factor	0.9978	0.9978
3.14	**Calibrated Plan Adjusted Index Rate**		$235.82

	Section IV: Projected Plan Level Information		
4.1	Plan ID (Standard Component ID)	Total	62560PA0030003
4.2	Allowed Claims	$18,252	$18,252
4.3	Reinsurance	$0	$0
4.4	Member Cost Sharing	$7,661	$7,661
4.5	Cost Sharing Reduction	$0	$0
4.6	Incurred Claims	$10,591	$10,591
4.7	Risk Adjustment Transfer Amount	-$2,114	-$2,114
4.8	Premium	$15,284	$15,284
4.9	Projected Member Months	36	36
4.10	Loss Ratio	80.42%	80.42%
	Per Member Per Month		
4.11	Allowed Claims	$507.00	$507.00
4.12	Reinsurance	$0.00	$0.00
4.13	Member Cost Sharing	$212.80	$212.80
4.14	Cost Sharing Reduction	$0.00	$0.00
4.15	Incurred Claims	$294.20	$294.20
4.16	Risk Adjustment Transfer Amount	-$58.72	-$58.72
4.17	Premium	$424.56	$424.56

Rating Area Data Collection

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

Rating Area	Rating Factor
Rating Area 1	0.9637
Rating Area 2	1.0566
Rating Area 4	0.9637
Rating Area 5	0.9637

RFJ Part II – Consumer Friendly Justification

Individual Off Exchange HMO Rate Filing

The rate change for UPMC Health Coverage Individual plans is 2.21% for 2020. Additional premium is needed to account for the higher cost and utilization of medical services each year. The proposed rate change also accounts for an increase in anticipated Risk Adjustment payable relative to the prior year and projected increases in taxes and fees for 2020.

Scope and Range of the Rate Increase

The number of individuals affected by this rate increase is 3. There will be no variation in the increase among affected members since only one plan is included in this filing.

Financial Experience of the Product

Premiums	$	9,179
Claims	$	604
Administrative expenses	$	1,892
Taxes & fees	$	370
Company made (after taxes)	**$**	**6,314**

Changes in Medical Service Costs

Cost and utilization increases are expected to increase by approximately 6.01% for 2020.

Changes in Benefits

No changes in benefits contributed significantly to the increase.

Administrative Costs and Anticipated Profits

No major changes in administrative costs are anticipated. A profit margin of 2% is anticipated for 2020.

RFJ Part III: Actuarial Memorandum

General Information

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

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

Company Identifying Information:
Company Legal Name: UPMC Health Coverage, Inc.
NAIC #: 15451
State: PA
HIOS Issuer ID: 62560
Market: Individual
Exchange: Off Exchange
Products: HMO
Effective Date: 1/1/2020

Company Contact Information:
[This information redacted for publication.]

Filing Information:
Rate Filing SERFF Tracking #: UPMC-131943282
Form Filing SERFF Tracking #: UPMC-131919548
Binder SERFF Tracking #: UPMC-PA20-125092189

Rate History:
The proposed rate change does not vary by plan since only one plan is offered under this filing. Historical rate increases for the captioned company and market are presented in the table below.

SERFF Tracking #	Year	Rate Change
UPMC-129629050	2014	0.0%
UPMC-129640573	2015	0.0%
UPMC-130072609	2016	0.0%
UPMC-130536761	2017	9.3%

UPMC-131034852	2018	-8.3%
UPMC-131496004	2019	12.1%

Proposed Rate Increase(s)

Reasons for Rate Increase(s):
The proposed rate increase for HMO products in 2020 is -1.5%

The major reasons for the increase include the following:

• No increase is proposed for 2020

Market Experience

Single Risk Pool

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

Experience Period Premium and Claims

Paid Through Date:
The reported claims during the experience period have a paid through date of March 2019.

Current Date:
Current enrollment and premium data is reported as of February 2019.

Premiums (net of MLR Rebate) in Experience Period:
Section I, worksheet 1 of the URRT contains calendar year 2018 premium for all non-grandfathered policies in the single risk pool for the captioned company and market. No adjustments were made for MLR rebates as we do not anticipate owing them. HHS cost-sharing is not included in the premium data. Please note that the earned premium is also listed in Table 2 of the PA Actuarial Memorandum Exhibits.

Allowed and Incurred Claims Incurred During the Experience Period:
Section I, worksheet 1 of the URRT contains calendar year 2018 claims experience for all non-grandfathered policies in the single risk pool for the captioned company and market, paid through March 2019. Allowed medical claims and pediatric vision claims are pulled directly from our data warehouse. Pediatric dental claims are administered and paid by Dominion Dental. We receive a separate report from Dominion with the claim detail. We used the standard Development/Completion Factor Method to calculate IBNR. Factors were calculated using our entire block of ACA-related Individual business and no unexpected factors were observed. Because three months run-out is available the impact of IBNR is minimal.

Month	Completion Factor
1/1/2018	1.0000
2/1/2018	1.0000
3/1/2018	0.9999
4/1/2018	0.9997
5/1/2018	0.9994
6/1/2018	0.9987
7/1/2018	0.9970
8/1/2018	0.9933
9/1/2018	0.9887
10/1/2018	0.9866
11/1/2018	0.9786
12/1/2018	0.9715

Benefit Categories

Medical claims are split into nine categories in our data warehouse. They are mapped into the categories in the URRT as follows:

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

Drug claims are in separate tables and directly mapped into the Prescription Drugs category.

Projection Factors

Trend Factors (cost/utilization):
The overall annual trend used in rate development is 6.01%. Historical allowed claims for our Individual block of ACA-compliant business were used to develop year over year trend factors for use in the projected rates. The large enrollment count and consistent makeup of this population make it appropriate for use in trend development for this filing. Service categories were defined to be consistent with the URRT instructions. Please see Tables 3 and 3b of the PA Actuarial Memorandum Exhibits for trend development calculations. Please note that the minor changes made to benefit designs in order to keep plan actuarial values within the allowed ranges were not significant enough to warrant an adjustment for induced demand with regard to trend, so the induced demand column has been populated with zeroes in Tables 3 and 3b. Please see Exhibit 7 of the Supporting

Exhibits for trend development. We believe that trends will be lower than what is implied by the historical data, which is why a value of 6.01% was used in rate development.

Adjustments to Trended EHB Allowed Claims PMPM

Changes in the Morbidity of the Population Insured:
Due to current uncertainty surrounding the market in 2020 due to the repeal of the Individual Mandate, it has been required by the Pennsylvania Insurance Department that an assumption for increased morbidity of the single risk pool be implemented for the projection period. A 6% increase in morbidity has been applied in the filing to account for this. An additional adjustment factor of 0.9 was applied, resulting in a total factor of 0.954. Compared to a population enrolled across all metal levels, a population with only a bronze plan will attract a much healthier than average block of membership. The 0.9 adjustment factor accounts for this healthier population.

Changes in Benefits:
No changes were made to the PA EHB Benchmark plan for 2020, so no adjustments were necessary.

Changes in Demographics:
The average age for our 2018 experience period Individual risk pool was 44.4 with an average premium factor of 1.85. This is comparable to our 2019 experience so far with age 44.9 and premium factor 1.87. This change in factors is small enough that the insured population is considered to be stable, and no additional adjustment for demographics was deemed necessary.

Other Adjustments:
No other adjustments have been applied to the index rate.

Credibility Manual Rate Development

Source and Appropriateness of Manual Rate Used:
The equivalent experience period data for UPMC Health Options, Inc. Individual single risk pool product was used. It represents the same risk pool as UPMC Health Coverage, Inc. and has a large member month count of over 1,627,833. Therefore, it has been deemed credible to use.

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

Inclusion of Capitation Payments:
Pediatric dental benefits are projected to be paid for via capitation.

Credibility of Experience

The very limited experience period enrollment of 36 member months requires 0% credibility to be used for the experience period data, as was implemented in prior filings by this company.

Establishing the Index Rate

For this filing, the Index Rate of the Experience Period is set equal to the manual rate due to the lack of credibility. As discussed above, the manual rate is developed using fully-credible experience period EHB claims data from ACA-related Individual business under the UPMC Health Options legal entity. The calculation of the manual rate is shown in Table 2b of the PA Actuarial Memorandum Exhibits. The Index Rate of the Projection Period is then calculated in Table 5 by applying two years of 6.01% annual trend to the experience period manual rate. The adjustments described in the Projection Factors section above were then applied to the trended manual rate to generate the Index Rate of the Projection Period. Please note that the Index Rate of Projection Period of $505.94 shown in Table 5 matches the corresponding value shown in section II, worksheet 1 of the URRT. Claims for routine foot care and acupuncture were not included in the calculation of the index rates despite being covered during the experience period since they are classified as non-EHBs.

Paid to Allowed Ratio

The Paid to Allowed Average Factor is set equal to the company-determined Actuarial Value for the lone plan in this filing.

Development of the Market Adjusted Index Rate

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

<u>Experience Period Risk Adjustment and Reinsurance Adjustments PMPM:</u>
Experience period Risk Adjustment was estimated to be a payment of $6,318 per suggestion from the Pennsylvania Insurance Department based on data accrued through April 2019, which translates to a PMPM of $175.50. Based on this estimate and past experience, we believe this value is a reasonable estimate until the actual values are released later this year. No data for the Transitional Reinsurance Program under PPACA has been included as this program expired at the end of 2016.

<u>Projected Risk Adjustments PMPM:</u>
The Projected Index Rate is adjusted by adding estimates for risk adjustment and marketplace fees (with impacts and costs spread across the whole risk pool) to obtain the Projected Market Adjusted Index Rate. Projection period Risk Adjustment PMPM has been estimated to be a payment of $58.72, which is displayed in Table 5. Please see Exhibit 1 of the Supporting Exhibits for the derivation of this value. In attracting a healthier population, as discussed in the morbidity section above, the risk adjustment experienced by this block would shift to a higher payable relative to the Individual population in UPMC Health Options, Inc. The value entered in section II, worksheet 1 of the URRT was $101.19 since the calculation of the Marketed Adjusted Index Rate is done on an allowed claims basis in the URRT. The updated PMPM was derived by taking the original paid PMPM divided by the Paid to Allowed Average Factor. The net amount after accounting for the fee is subtracted from the Index Rate of the Projection Period as part of the calculation of the Market Adjusted Index Rate. For the URRT and Table 5 of the PA Actuarial Memorandum Rate Exhibits, it was entered as a negative number because the calculation subtracts this value. The effect is an increase in premium as additional revenue will be required

to cover the anticipated payment.

Exchange User Fees:
No adjustment was made for the Marketplace User Fee since the lone plan included in this filing is only offered off exchange.

Non-Benefit Expenses and Profit & Risk

Administrative Expense Load:
Administrative costs of 12.38% of premium have been displayed in Table 6 and the URRT. This value has been derived from projected administrative costs for the projection period. These expenses are assumed to be uniform for all plan designs.

[This information redacted for publication.]

Profit & Risk Margin:
The projected profit margin for this company will remain at 2% for 2020. This value is listed in both Table 6 and the URRT.

Taxes and Fees:
Taxes and Fees increased from 0% in 2019 to 2.46% in 2020 to account for the return of the Health Insurance Providers Fee in 2020. This load also accounts for the projected Federal Income Tax in 2020. Please note that the Risk Adjustment Administration Fee was included in the Taxes and Fees field in Table 6 and the URRT.

Plan Adjusted Index Rates

Table 10 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance to develop 2020 Plan Adjusted Index Rates. The allowable modifiers that are used in rate development are described below.

Plan Actuarial Value:
The AV for each plan was determined by the issuer's own pricing model based on experience from UPMC's fully-insured commercial block of business. This model calculates an AV for a given plan by first trending the allowed claims forward two years to the projection period, calculating paid amounts for each benefit category based on the benefit design of a given plan and projected allowed claims data, and taking the ratio of the total projected paid claims to projected allowed claims.

Benefit Richness (induced demand)
Please see Exhibit 3 in the Supporting Exhibits for the induced utilization exhibit. Since there is only one plan in this filing, an induced demand factor of 1.0 was selected to ensure normalization and that the induced demand factor does not exceed the federal factors used in the risk adjustment program.

Benefits in addition to EHBs

Benefits that will be offered outside EHB include routine foot care and acupuncture. The projected allowed claims for these benefits is $1.07 PMPM. The adjustment factor of 1.002 included in Table 10 has been derived by adding the aforementioned PMPM to the projected index rate for 2020 and dividing this total by the same index rate, causing the adjustment to be applied uniformly to all plans. This load has not changed from the prior filing.

Provider Network

Since only one network is included in this filing, no network adjustments were deemed necessary for 2020.

Catastrophic Eligibility

Catasrophic plans will not be offered under this company and market in 2020, so no adjustment is necessary.

Non-Funding of CSR Adjustment

No On Exchange silver plans are included in this filing, so no adjustment is necessary.

Calibration

Age Curve Calibration:

The average age factor was calculated using our projected ACA-related Individual population with the prescribed HHS Age Factors for 2020. It was assumed this represents the age distribution of the entire single risk-pool. The number of members under each age bracket was multiplied by the corresponding HHS Age Factor. These were then summed and divided by the total number of members to obtain the average age factor. For UPMC's entire block of ACA-compliant Individual business, the average age factor is 1.87 and average age was 44.4 during the experience period. This preliminary age factor is then multiplied by an adjustment factor of 0.998, which accounts for the regulation that prohibits charging for more than three children per family, resulting in a final age calibration factor of 1.86. Please see Exhibit 4 in the Supporting Exhibits for the calculation of this factor.

Geographic Factor Calibration:

The geographic rating areas used within this filing are the same as those defined by the state. To better reflect the varying costs of delivery between each geographical region in which coverage is offered, rating area factors have been updated for 2020. The table below summarizes changes in these factors:

Region	2019	2020
1	1.00	0.96
2	1.00	1.06
4	1.00	0.96
5	1.00	0.96

The calibration factor of 0.964 was calculated as the weighted average of the geographical factors using projected enrollment for the single risk pool, as shown in Exhibit 2 of the Supporting Exhibits.

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

Tobacco Status	Feb 2019 Members	Split	Tobacco Factor	Calibration Factor
Non-User	126,079	91.3%	1.000	0.913
User	11,995	8.7%	1.025	0.089
Total	138,074	100.0%		**1.002**

Consumer Adjusted Premium Rate Development

The Plan Adjusted Index Rates are divided by the age calibration factor then multiplied by the specific age, geographic, and tobacco factors shown in Tables 12, 13, and 14 of the PA Actuarial Memorandum Exhibits, respectively, to develop the Consumer Adjusted Premium Rates. Please see Exhibit 5 of the Supporting Exhibits for historical Consumer Adjusted Premium Rate changes for this company and market for a 21-year-old non-tobacco user.

Projected Loss Ratio

The projected period loss ratio, using the federally-prescribed MLR methodology without the credibility adjustment, is 87.9%, as shown in Exhibit 6 of the Supporting Exhibits.

Plan Product Info

AV Metal Values

Metal values were determined using the final 2020 HHS AV Calculator.

Membership Projections

Membership projections were developed based on our anticipated competitive positioning in the market combined with our current enrollment distribution by plan.

Terminated Plans and Products

No plans were terminated for 2020.

Warning Alerts

No validation errors appear in the URRT.

Effective Rate Review Information

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

List of Supporting Exhibits

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

- Exhibit 1: Development of Risk Adjustment PMPM for Projection Period
- Exhibit 2: Derivation of Geographical Calibration Factor
- Exhibit 3: Induced Utilization Derivation
- Exhibit 4: Derivation of Age Calibration Factor
- Exhibit 5: Historical Changes in Consumer Adjusted Premium Rate for Age 21, Non-tobacco User
- Exhibit 6: Derivation of Projection Period MLR
- Exhibit 7: Derivation of Annual Trend

Actuarial Certification

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

- All factor, benefit and other changes from the prior approved filing have been disclosed in this actuarial memorandum.
- New plans cannot be considered modifications of existing plans under the uniform modification standards in 45 CFR 147.106.
- The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2020 Rate Filing Justification.
- The projected Index Rate is:

a. In compliance with all applicable state and Federal statutes and regulations (45 CFR 156.80 and 147.102)
b. Developed in compliance with the applicable Actuarial Standards of Practice
c. Reasonable in relation to the benefits provided and the population anticipated to be covered
d. Neither excessive nor deficient

- The Index Rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 156.80(d)(2) were used to generate plan level rates.
- The geographic rating factors reflect only differences in the costs of delivery and do not include differences for population morbidity by geographic area.
- The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I URRT for all plans except those specified in the certification.

[redacted]

7/12/2019
Date

2020 Rates Table Template v9.0

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

If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.

If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.

If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.

To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.

HIOS Issuer ID*	62560
Federal TIN*	46-2824537
Rate Effective Date*	1/1/2020
Rate Expiration Date*	12/31/2020
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
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	173.87	173.87
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	15	189.32	189.32
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	16	195.23	195.23
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	17	201.14	201.14
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	18	207.51	212.69
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	19	213.87	219.22
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	20	220.46	225.97
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	21	227.28	232.96
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	22	227.28	232.96
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	23	227.28	232.96
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	24	227.28	232.96
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	25	228.19	233.89
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	26	232.73	238.55
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	27	238.19	244.14
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	28	247.05	253.23
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	29	254.33	260.68
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	30	257.96	264.41
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	31	263.42	270.00
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	32	268.87	275.59
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	33	272.28	279.09
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	34	275.92	282.82
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	35	277.74	284.68
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	36	279.55	286.54
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	37	281.37	288.41
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	38	283.19	290.27
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	39	286.83	294.00
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	40	290.46	297.73
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	41	295.92	303.32
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	42	301.15	308.67
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	43	308.42	316.13
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	44	317.51	325.45
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	45	328.19	336.40
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	46	340.92	349.44
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	47	355.24	364.12
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	48	371.60	380.89
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	49	387.74	397.43
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	50	405.92	416.07
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	51	423.88	434.47
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	52	443.65	454.74
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	53	463.65	475.24
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	54	485.24	497.37
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	55	506.83	519.51
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	56	530.24	543.50
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	57	553.88	567.73
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	58	579.11	593.59
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	59	591.61	606.40
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	60	616.84	632.26
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	61	638.66	654.62
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	62	652.98	669.30
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	63	670.93	687.70
62560PA0030003	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	681.84	698.89
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	0-14	190.63	190.63
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	15	207.58	207.58
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	16	214.05	214.05
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	17	220.53	220.53
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	18	227.51	233.20
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	19	234.49	240.35
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	20	241.71	247.76
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	21	249.19	255.42
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	22	249.19	255.42
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	23	249.19	255.42
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	24	249.19	255.42
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	25	250.19	256.44
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	26	255.17	261.55
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	27	261.15	267.68
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	28	270.87	277.64
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	29	278.84	285.81
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	30	282.83	289.90
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	31	288.81	296.03
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	32	294.79	302.16
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	33	298.53	305.99
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	34	302.52	310.08
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	35	304.51	312.12
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	36	306.50	314.17
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	37	308.50	316.21
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	38	310.49	318.25
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	39	314.48	322.34
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	40	318.46	326.43
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	41	324.45	332.56
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	42	330.18	338.43
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	43	338.15	346.60
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	44	348.12	356.82
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	45	359.83	368.83
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	46	373.79	383.13
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	47	389.48	399.22
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	48	407.43	417.61
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	49	425.12	435.75
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	50	445.05	456.18
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	51	464.74	476.36
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	52	486.42	498.58
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	53	508.35	521.06
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	54	532.02	545.32
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	55	555.69	569.59
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	56	581.36	595.89
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	57	607.28	622.46
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	58	634.94	650.81
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	59	648.64	664.86
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	60	676.30	693.21
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	61	700.22	717.73
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	62	715.92	733.82
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	63	735.61	754.00
62560PA0030003	Rating Area 2	Tobacco User/Non-Tobacco User	64 and over	747.57	766.26
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	0-14	173.87	173.87
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	15	189.32	189.32
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	16	195.23	195.23
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	17	201.14	201.14
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	18	207.51	212.69
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	19	213.87	219.22
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	20	220.46	225.97
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	21	227.28	232.96
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	22	227.28	232.96
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	23	227.28	232.96

62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	24	227.28	232.96
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	25	228.19	233.89
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	26	232.73	238.55
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	27	238.19	244.14
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	28	247.05	253.23
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	29	254.33	260.68
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	30	257.96	264.41
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	31	263.42	270.00
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	32	268.87	275.59
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	33	272.28	279.09
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	34	275.92	282.82
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	35	277.74	284.68
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	36	279.55	286.54
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	37	281.37	288.41
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	38	283.19	290.27
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	39	286.83	294.00
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	40	290.46	297.73
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	41	295.92	303.32
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	42	301.15	308.67
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	43	308.42	316.13
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	44	317.51	325.45
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	45	328.19	336.40
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	46	340.92	349.44
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	47	355.24	364.12
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	48	371.60	380.89
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	49	387.74	397.43
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	50	405.92	416.07
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	51	423.88	434.47
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	52	443.65	454.74
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	53	463.65	475.24
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	54	485.24	497.37
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	55	506.83	519.51
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	56	530.24	543.50
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	57	553.88	567.73
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	58	579.11	593.59
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	59	591.61	606.40
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	60	616.84	632.26
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	61	638.66	654.62
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	62	652.98	669.30
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	63	670.93	687.70
62560PA0030003	Rating Area 4	Tobacco User/Non-Tobacco User	64 and over	681.84	698.89
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	0-14	173.87	173.87
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	15	189.32	189.32
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	16	195.23	195.23
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	17	201.14	201.14
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	18	207.51	212.69
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	19	213.87	219.22
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	20	220.46	225.97
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	21	227.28	232.96
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	22	227.28	232.96
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	23	227.28	232.96
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	24	227.28	232.96
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	25	228.19	233.89
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	26	232.73	238.55
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	27	238.19	244.14
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	28	247.05	253.23
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	29	254.33	260.68
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	30	257.96	264.41
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	31	263.42	270.00
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	32	268.87	275.59
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	33	272.28	279.09
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	34	275.92	282.82
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	35	277.74	284.68
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	36	279.55	286.54
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	37	281.37	288.41
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	38	283.19	290.27
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	39	286.83	294.00
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	40	290.46	297.73
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	41	295.92	303.32
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	42	301.15	308.67
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	43	308.42	316.13
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	44	317.51	325.45
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	45	328.19	336.40
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	46	340.92	349.44
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	47	355.24	364.12
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	48	371.60	380.89
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	49	387.74	397.43
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	50	405.92	416.07
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	51	423.88	434.47
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	52	443.65	454.74
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	53	463.65	475.24
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	54	485.24	497.37
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	55	506.83	519.51
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	56	530.24	543.50
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	57	553.88	567.73
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	58	579.11	593.59
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	59	591.61	606.40
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	60	616.84	632.26
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	61	638.66	654.62
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	62	652.98	669.30
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	63	670.93	687.70
62560PA0030003	Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	681.84	698.89

Exhibit 1: Development of Risk Adjustment PMPM for Projection Period

2018 Total Received Risk Adjustment Estimate	2018 ACA Individual Member Months	Estimated 2018 Received Risk Adjustment PMPM	Impact of Lower Morbidity Members	2020 Projected Received Risk Adjustment PMPM for Table 10	Projected Paid to Allowed Ratio	2020 Projected Received Risk Adjustment PMPM for URRT
$ (42,498,246.00)	1,627,714	$ (26.11)	$ 32.61	**$ (58.72)**	0.580	**$ (101.19)**

Exhibit 2: Derivation of Geographical Calibration Factor

Rating Areas	Projected Enrollment	Proposed Factor
1	1	0.964
2	0	1.057
3	0	1.216
4	2	0.964
5	0	0.964
6	0	1.298
7	0	1.316
9	0	1.153

Calibration Factor
0.964

Exhibit 3: Induced Utilization Derivation

Plan ID (1)	Metal Level (2)	Projected Membership (3)	Projected Allowed EHB Claims (4)	Projected Paid EHB Claims (5)	Paid to Allowed Factor (6)	Average Tobacco Factor (7)	AV & Cost Sharing Factor (8)	(8)/(6*7)
62560PA0030003	Bronze	36	$ 18,252	$ 10,591	0.580	1.000	0.580	**1.000**

Exhibit 4: Derivation of Age Calibration Factor

Age Band	Age Factor	Current/Projected Enrollment Distribution
0-14	0.765	5.69%
15	0.833	0.49%
16	0.859	0.49%
17	0.885	0.53%
18	0.913	0.57%
19	0.941	0.81%
20	0.970	1.00%
21	1.000	1.06%
22	1.000	1.00%
23	1.000	0.93%
24	1.000	0.86%
25	1.004	0.82%
26	1.024	1.60%
27	1.048	1.64%
28	1.087	1.70%
29	1.119	1.64%
30	1.135	1.58%
31	1.159	1.49%
32	1.183	1.39%
33	1.198	1.43%
34	1.214	1.43%
35	1.222	1.32%
36	1.23	1.38%
37	1.238	1.41%
38	1.246	1.36%
39	1.262	1.41%
40	1.278	1.36%
41	1.302	1.39%
42	1.325	1.25%
43	1.357	1.34%
44	1.397	1.37%
45	1.444	1.41%
46	1.5	1.50%
47	1.563	1.58%
48	1.635	1.85%
49	1.706	1.78%
50	1.786	1.87%
51	1.865	1.98%
52	1.952	2.05%
53	2.04	2.29%
54	2.135	2.48%
55	2.23	2.57%
56	2.333	2.74%
57	2.437	3.01%
58	2.548	3.22%
59	2.603	3.33%
60	2.714	3.78%
61	2.81	4.07%
62	2.873	4.89%
63	2.952	5.47%
64 and over	3	6.35%

Initial Age Factor:	1.869
3-child cap Adjustment:	0.998
Final Age Factor used:	**1.864**

Exhibit 5: Historical Changes in Consumer Adjusted Premium Rate for Age 21, Non-tobacco User

Geographic Area 1					2014	2015	2015	2016	2016	2017	2017	2018	2018	2019	2019	2020	2020
Plan ID	Metal Level	Product Name	Plan Name	Exchange Plan (Y/N)	Age 21, NT Prem	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change
62560PA0030003	Bronze	Individual HMO	UPMC Advantage Essential Bronze	N	$ 210.48	$ 210.48	0.0%	$ 210.48	0.0%	$ 224.29	6.6%	$ 205.78	-8.3%	$ 230.73	12.1%	$ 227.28	-1.5%

Geographic Area 2					2014	2015	2015	2016	2016	2017	2017	2018	2018	2019	2019	2020	2020
Plan ID	Metal Level	Product Name	Plan Name	Exchange Plan (Y/N)	Age 21, NT Prem	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change
62560PA0030003	Bronze	Individual HMO	UPMC Advantage Essential Bronze	N	$ 210.48	$ 210.48	0.0%	$ 210.48	0.0%	$ 224.29	6.6%	$ 205.78	-8.3%	$ 230.73	12.1%	$ 227.28	-1.5%

Geographic Area 4					2014	2015	2015	2016	2016	2017	2017	2018	2018	2019	2019	2020	2020
Plan ID	Metal Level	Product Name	Plan Name	Exchange Plan (Y/N)	Age 21, NT Prem	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change
62560PA0030003	Bronze	Individual HMO	UPMC Advantage Essential Bronze	N	$ 205.20	$ 205.20	0.0%	$ 205.20	0.0%	$ 224.29	9.3%	$205.78	-8.3%	$ 230.73	12.1%	$ 227.28	-1.5%

Geographic Area 5					2014	2015	2015	2016	2016	2017	2017	2018	2018	2019	2019	2020	2020
Plan ID	Metal Level	Product Name	Plan Name	Exchange Plan (Y/N)	Age 21, NT Prem	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change	Age 21, NT Prem	% Change
62560PA0030003	Bronze	Individual HMO	UPMC Advantage Essential Bronze	N	$ 211.64	$ 211.64	0.0%	$ 211.64	0.0%	$ 224.29	6.0%	$ 205.78	-8.3%	$ 230.73	12.1%	$ 227.28	-1.5%

Exhibit 6: Derivation of Projection Period MLR

Projected Paid Claims	Projected Net Amount of Risk Adjustment	Projected Quality Improvement Initiatives	Projected Taxes & Fees	Projected Premium	Loss Ratio
$ 10,591.34	$ (2,113.89)	$ 395.72	$ 376.22	$ 15,283.98	**87.9%**

Exhibit 7: Derivation of Annual Trend

Entire ACA-compliant Individual Block

Base Data

Inpatient Hospital

YEAR	ALLOWED AMT	ADMIT CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2017	$130,089,654	9,402	1,644,192	$13,836.38	68.6
2018	$158,672,808	9,308	1,627,833	$17,046.93	68.6

Outpatient Hospital

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2017	$196,838,173	535,797	1,644,192	$367.37	3,910.5
2018	$206,633,932	533,720	1,627,833	$387.16	3,934.5

Professional

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION ADMIT PTPM
2017	$140,642,186	1,664,656	1,644,192	$84.49	12,149.4
2018	$144,018,327	1,668,869	1,627,833	$86.30	12,302.5

Other Medical

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2017	$75,343,777	51,104	1,644,192	$1,474.32	373.0
2018	$94,012,048	52,674	1,627,833	$1,784.79	388.3

Prescription Drugs

YEAR	ALLOWED AMT	Prescriptions	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2017	$152,986,803	1,683,584	1,644,192	$90.87	12,287.5
2018	$163,290,915	1,679,723	1,627,833	$97.21	12,382.5

Pediatric Dental

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2017	$1,660,634	0	0	#DIV/0!	#DIV/0!
2018	$993,000	0	0	#DIV/0!	#DIV/0!

Pediatric Vision

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2017	$509,700	0	0	#DIV/0!	#DIV/0!
2018	$504,920	0	0	#DIV/0!	#DIV/0!

Trend Output

Trend Adjustment Factor: 0.94

Service Category	2018 Allowed Amt	Weight	Cost	Utilization	Overall	Adj Cost	Util	Overall
Inpatient Hospital	$158,672,808	20.7%	23.20%	0.00%	23.20%	19.72%	-2.83%	16.33%
Outpatient Hospital	$206,633,932	26.9%	5.39%	0.61%	6.03%	2.41%	-2.23%	0.12%
Professional	$144,018,327	18.7%	2.14%	1.26%	3.43%	-0.75%	-1.60%	-2.34%
Other Medical	$94,516,968	12.3%	21.06%	4.11%	26.03%	17.64%	1.16%	19.01%
Captiation	$993,000	0.1%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Prescription Drugs	$163,290,915	21.3%	6.98%	0.77%	7.81%	3.96%	-2.08%	1.80%

Historical Annual Trend: **12.27%**

Annual Trend Applied: **6.01%**

Check: **6.01%**

2020 Business Rules Template v9.0

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

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

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

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

HIOS Issuer ID*	62560
TIN*	46-2824537

Product ID	Plan ID (Standard Component)	How are rates for contracts covering two or more enrollees calculated?	What are the maximum number of under age (under 21) dependents used to quote a two parent family?	What are the maximum number of under age (under 21) dependents used to quote a single parent family?	Is there a maximum age for a dependent?	What are the maximum number of children used to quote a children-only contract?	Are domestic partners treated the same as secondary subscribers?	Are same-sex partners treated the same as secondary subscribers?	How is age determined for rating and eligibility purposes?	How is tobacco status determined for subscribers and dependents?	What relationships between primary and dependent are allowed, and is the dependent required to live in the same household as the primary subscriber?
		A different rate (specifically for parties of two or more)for each enrollee is added together	3 or more	3 or more	25	1	Yes	Yes	Age on effective date	6	Spouse, No; Adopted Child, No; Foster Child, No; Ward, No; Stepson or Stepdaughter, No; Self, Yes; Child, No; Life Partner, No

Dear Mr. Lovely:

The Pennsylvania Insurance Department has received and conducted a review of the above captioned filing. In order to complete the review, we are requesting the following information. To facilitate a timely review, we request this information be provided within 7 days of the date of this letter. If you have any questions or difficulties in providing the information within this time frame, please call me.

Please note, each response to a Department data call must contain a cover letter that details the changes made to the Actuarial Memorandums and PA Actuarial Memorandum Exhibits and the reasons why the changes were made, e.g., in response to Department question number 5.

1. We see the rate decrease in Table 11 of the PAAM is driven by the changes in the geographic factors, however, what is driving the rate increase in Table 10 of 1.9% and what is the magnitude of each driver.

Table 11 reflects enrollment by rating area, whereas table 10 does not. Meanwhile, table 8 quantifies all of the components of the rate increase shown in table 10.

2. Please explain why the completion factors in Table 4 and Table 4b of the PAAM do not match the completion factors presented in both the federal and PA memorandums.

This was an error, and the completion factors in the memoranda were not correct. This error has been corrected in the memoranda so that the factors match those in Table 4b.

3. What are the measurement units used for the "Other Medical" category?

Services are the measurement unit for the Other Medical category.

4. Please explain why the trends provided in Exhibit 7 of the Supporting Exhibits file do not match the PAAM.

There was an error with the calculations in exhibit 7, which has been corrected as part of this correspondence. Please note that the trends displayed in exhibit 7 now match those shown in the PA Exhibits and the URRT. Also, this correction has not affected the magnitude of the applied annual trend.

5. Since the trends were not developed from Exhibit 7, please provide support for the trends used in the PA Exhibits and the URRT. We also note that the URRT trends do not match exactly the ones in the PA Exhibits please explain.
a. Please explain the high cost trends for the inpatient hospital and other medical benefit categories.
b. Please explain why a trend of 6% was chosen.
c. Please explain the low trends for prescription drug.

The slight difference in trends shown in the PA Exhibits relative to those in the URRT stems from rounding error that arises from the requirements of the re-formatted URRT.

a. The raw data used in trend calculations suggest very large increases in unit cost for the inpatient hospital and other medical benefit categories as indicated in column L of exhibit 7 of the Supporting Exhibits. We believe actual trends for these categories will be lower than what is implied by the historical data, which is why an adjustment factor was introduced to lower the trend as shown in exhibit 7.

b. The raw historical data implies an annual trend of 12.3% as shown in exhibit 7. We do not believe that this value accurately represents future trends that will be observed in this market, leading to the decision to lower the trend applied in rate development. This was done by introducing an adjustment factor that uniformly decreases the historical trends for each benefit category so that an overall annual trend of 6.0% is applied in rate development.

c. The low trend observed for prescription drug can be attributed to utilization of brand drugs shifting over to generic drugs, leading to lower unit costs for pharmacy and ultimately a lower than expected unit cost trend. It can also be attributed to an increase in pharmacy rebates in recent years.

6. Please explain why the adjustment method for trend was changed from Plan Year 2019 to Plan Year 2020. Please recalculate and provide the adjustment factors needed to produce the original requested trends using a consistent method for both Plan Years so that a comparison may be made.

We feel that the adjustment method used in the current filing makes more sense than the approach used in the prior filing. The old approach adjusts the trends for each benefit category by applying a scalar multiplier. The new approach adjusts the trends in a more additive manner. Despite the fact that this change in adjustment methods results in different annual trends for each benefit category and noticeably different adjustment factors, the overall annual trend factor applied in rate development remains the same. The goal of this adjustment process is bring the trend implied by historical data to a level more reflective of anticipated future trends in the market, regardless of the adjustment method implemented. Please see exhibit 6 of the response exhibits Excel file for the derivation of the prior filing's applied trend using the approach employed in the current filing.

7. Did trend assumptions consider changes in provider contracting? If not, why? If so, what impact did they have on trend assumptions?

Observed rate increases in experience data are higher than those observed in the projected data. This is a contributing factor to our decision to decrease the annual trend from 12.3% as implied by the raw data to the applied annual trend of 6.0% as discussed in the responses to questions 4, 5, and the second version of question 3.

8. Were trends adjustment for unexpected large claims? If so, what was the impact?

No unexpectedly large claims were observed in terms of frequency and severity. Therefore, no adjustment was made.

9. If adjustments are made for large claim pooling, was the federal risk adjustment program considered?

We considered the impact of UPMC's expected large claims versus the nation's large claims and assumed a neutral impact.

10. Please explain why the projected paid-to-allowed ratio of 0.58 is so much different than the metal value of the plan 0.62.

0.58 reflects the actuarial value calculated with our internal tool using UPMC data, while 0.62 reflects the corresponding value using the HHS tool with national data.

11. Please explain why it is appropriate to assume the same relative risk between UPMC Health Coverage and UPMC Health Options for the purpose of risk adjustment considering the product offerings and the populations are much different.

Accounting for differences in risk between these legal entities would require an assumption to account for a less favorable projected risk adjustment transfer for this filing. If this assumption is made, it follows that an additional assumption accounting for lower induced utilization would also be required. These two adjustments would have an offsetting effect and were ultimately excluded from rate development.

12. The premiums, claims, and risk adjustment provided in the MLR demonstration in Exhibit 6 do not reconcile to the projected values on the URRT. Please correct.

This was an error in exhibit 6 and has been corrected as part of this correspondence.

13. Regarding Adjustment Data Validation process (RADV):
a. Please describe any adjustments or considerations made due to the Risk Adjustment Data Validation process (RADV).
b. As you know CMS is performing a risk adjustment validation starting with 2017 risk adjustment data. We are considering allowing an estimate of the impact of risk adjustment modifications in rate filings as an adjustment to the projected risk adjustment. Before implementation, we are soliciting feedback from our issuers on the pros and cons of the inclusion of this adjustment. If allowed, all issuers would be required to submit an estimate. The estimate may be $0. Please provide any feedback that you would like us to consider.

a. We considered our position to be in line with other issuers and thus a neutral final impact.

b. Our internal estimates indicate that we will not receive a material adjustment as a result of RADV, and would not want to make adjustments to risk adjustment to account for this.

14. Please provide an actuarial certification that includes the list and title of all applicable of ASOPs the actuary is certifying work conformity.

Many ASOPs apply to our work. Per URRT instructions, we place particular emphasis on the following ASOPS:

- **ASOP No. 5, Incurred Health and Disability Claims**
- **ASOP No. 8, Regulatory Filings for Health Plan Entities**
- **ASOP No. 12, Risk Classification**
- **ASOP No. 23, Data Quality**
- **ASOP No. 25, Credibility Procedures Applicable to Accident and Health, Group Term Life, and Property/Casualty Coverages**
- **ASOP No. 26, Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans**
- **ASOP No. 41, Actuarial Communications**
- **ASOP No. 50, Determining Minimum Value and Actuarial Value under the Affordable Care Act**

15. Pediatric Dental is administered and paid by Dominion Dental. Please identify the fees paid to Dominion Dental on a PMPM basis. Is this fee paid on a capitation basis or on a fee for service basis? By how much PMPM is this fee projected to increase from 2019 to 2020?

The fees paid to Dominion Dental are $14.01 PMPM for catastrophic pediatric PPO plans and $15.93 PMPM for all other deductible levels of pediatric PPO plans. These fees are paid on a capitation basis and are not projected to change from 2019 to 2020.

16. Did the certifying actuary rely on any information or assumptions provided by another individual? If so, please specify and provide reliance statements.

We did not rely on any external consultants. Data and other information was sourced internally, and there were no circumstances which warranted specific mention of reliance.

17. The Actuarial certification in the Federal Actuarial Memorandum appears to be based on last year's URRT and instructions. For example, it refers to "The percent of total premium that represents EHB included in Worksheet 2, Sections III and IV," which is not part of the current URRT. Please revise the certification consistent with this year's URR instructions.

The line referenced above was carryover from actuarial memoranda used in prior filings. This line has been removed from the memoranda as part of this update.

18. Please identify any rating factors for medical management along with any change in factors from Plan Year 2019.

No rating factors for medical management have been implemented.

19. For Table 7 of the PAAM, per the 2020 ACA Compliant Health Insurance Rate Filing Guidance, "An Excel exhibit must be provided to show the development of the normalization factors, experience period and the projected period distributions. Additionally, the narrative must discuss any differences between the experience period and projected period distributions." Please provide an Excel exhibit for the manual rate experience period for average factors for age and tobacco. Please enhance your narrative in the PA Actuarial Memorandum to discuss differences between the manual rate experience period and projected period distributions.

Please see the Normalized Market-Adjusted Projected Allowed Total Claims section of the PA actuarial memorandum for a discussion on the factors contained in Table 7. As mentioned in the memorandum, the 2019 factors were taken from the approved 2019 rate filing for this company and market per the guidance. The Normalized Market-Adjusted Projected Allowed Total Claims section provides a discussion on the derivation of the 2020 factors and also references the relevant supporting Excel exhibits.

1. Page 3 of the PA AM indicates there were no prescription drug rebates for this company during the experience period, yet Table 2 show prescription drug rebates. Please review and revise accordingly.

This was an error in the PA actuarial memorandum and has been corrected as part of this correspondence.

2. The PA AM indicates that data representing UPMC's entire block of ACA-compliant individual business was the basis for the manual rate. Please identify each entity contributing to this aggregate data. Also, discuss what, if any, adjustments were made to the data to reflect product and regional differences for this entity and the manual data pool.

For the individual market, the manual data consists solely of experience period data under the UPMC Health Options, Inc. legal entity. The lone adjustment applied to the manual data was the inclusion of the 1.06 load mandated by the Department due to current uncertainty surrounding the market in 2020 due to the repeal of the Individual Mandate.

3. Regarding Trend:
a. Is the data in Table 4b raw unadjusted data or has it been normalized of otherwise adjusted? If the data has been adjusted, please provide the unadjusted allowed monthly data for the 48 months. Also include the following monthly data:
i. The average age factor;

ii. The average geographic factor;
iii. The average tobacco factor;
iv. The average benefit factor; and
v. The normalized average pmpm (which should match the allowed pmpms in column L of table 4b.).
b. Exhibit 7 of the supporting exhibit applies a "Trend Adjustment Factor" of .94 to adjust the developed cost and utilization assumptions.
i. Please explain what this factor is adjusting for and how it was developed.
ii. Please provide a numerical development of the factor .94.
iii. Please include the trends based on historical experience for each benefit category for years 2016, 2017, 2018, and 2019 (year to date). We realize 2019 trends will be partially based on estimated claim costs.

a. The data in Table 4b is raw unadjusted data.

b. i. This factor is used to adjust the annual trend factor implied by the raw historical data (1.123) to the applied annual trend factor (1.06). As shown in exhibit 7, this factor is simply the ratio of the latter factor relative to the former factor.

ii. As mentioned above and shown in exhibit 7, this factor is the ratio of the applied annual trend factor relative to the trend factor implied by the raw historical data.

iii. Please see exhibit 3biii of the response exhibits Excel file for this data.

20. Regarding Table 6:
c. Using the submitted commission schedules, quantitatively show the development of the percent and pmpm amounts in cells C51 and D51.
d. Using the 2018 SHCE in the Annual Statement, please quantitatively show the development of the Quality Improvement Initiatives percent and pmpm amount and provide support.
e. We have repurposed row 54 to capture RA User Fees. Please provide the RA User Fee percentage and pmpm amount in cells C54 and D54.
f. Please provide quantitative support for the health insurer fee assumption of 2%.
g. Provide the actual paid HIT fees on a pmpm and percent of premium for calendar years 2018 and 2016.

c. The commission amounts from the financial statements were adjusted in correspondence with Finance department to more accurately reflect the projection period operational environment

d. The QI amounts from the financial statements were adjusted in correspondence with Finance department to more accurately reflect the projection period operational environment.

e. This change has been made as part of this correspondence.

f & g. From our internal financial records, 2018 HIT Tax / Revenue eligible = 40.6M/2.06B = 2% (and so 2% was used for 2020 pricing).

2016 Tax Paid = $23.9M on $1.37B eligible = 1.68%

4. URRT – Worksheet 1, Section II – The experience period data in section II, column C of the URRT should be for the filing entity. Please review the URR Instructions and revise accordingly. If no revisions are made, please explain.

This data was mistakenly entered into the URRT and has been fixed as part of this correspondence.

5. Regarding Table 10:
a. In the URRT Memorandum, you indicate that no adjustment was made to the demographics for the 3-child max. Please explain why.
b. Please provide a supporting exhibit, in Excel, showing the development of the average tobacco factor. Please show the projected and the current 2/1/19 member distribution.

a. Per the guidance, an adjustment accounting for the 3-child max is permitted but not required. Such an adjustment was considered but ultimately determined to have negligible impact and was not included in rate development. This approach is consistent with our approach in prior rate filings.

b. Please see exhibit 5b of the response exhibits Excel file for this calculation. Please note that the projected and current member distribution are assumed to be identical.

6. 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.

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

7. Please provide an exhibit that quantitatively shows a comparison of the actual to projected claim cost pmpms for calendar years 2015 – 2018, as applicable.

Please see exhibit 7 of the response exhibits Excel file for this data.

8. Please provide an exhibit showing the financial gains and losses for calendar years 2014 – 2018 for the following categories: Member months, total administrative expenses, total incurred claims, total premium, total actual paid taxes and fees, profit, annual underwriting gain/loss and underwriting gain/loss pmpy.

Please see exhibit 8 of the response exhibits Excel file for this data. Due to our financial partners finalizing restatement in these numbers, the total administrative expense and taxes and fees section are not completed. We would like to apologize and provide an updated exhibit and notify the Department by EOD Thursday.

9. The Department notes that the membership in this entity has not changed over last year and is not projected to increase during the rating period. Is UPMC actively marketing this product and entity?

We are not actively marketing this product.

Regarding Table 13 - Geographic Rating Area Factor Support you have revised all of the geographic factors contained in this table but have not provided any supporting documentation or data.

10. Please explain how updated geographic rating factors were determined and how the impact of morbidity was eliminated.

Geographic factors were updated to better reflect cost differences by area. Points of consideration included differences in fee schedules, anticipated shifts in utilization between providers, and less favorable contracting terms in areas with few facilities (including those without UPMC facilities).

11. Please provide your quantitative analysis of the development of the geographic area rating factors. This data must minimally include county level claims data for calendar years 2016, 2017 and 2018, based on the residence of the enrollee. For each period, this data should show the following county level data: total ultimate incurred claims, estimated cost sharing, allowed claims, total number of days/visits/procedures, as appropriate, the number of member months, average age, average tobacco factor, average benefit factor and capitations. Separate tabs should be provided to show the development of the average age factor, average tobacco factor and average benefit factor by county. Within each county, show the estimated impact of favorable provider contracting. Ensure that all data and your in-depth analysis is submitted to support the current and proposed factors.

Proposed geographic pricing was developed consistent with prior pricing. We looked at each rating area as a whole rather than specific county-level data in determining the factors.

12. For calendar years 2016, 2017 and 2018, please provide the actual unit cost experience data by county by benefit category (inpatient, outpatient, physician surgery, physician radiology, etc.) to support the proposed changes. UPMC must provide data and discussion at the level of detail necessary for the department or its consultant, to independently calculate and verify all proposed adjustments.

Proposed geographic pricing was developed consistent with prior pricing. We looked at each rating area as a whole rather than specific category-level data in determining the factors.

13. Please fully demonstrate how new data and recent provider contracting has developed the proposed factors, whether changes are proposed for the geographic factors or not. Please provide the full details of the providers that were renegotiated and their total percent of claims in each county.
Please be advised that there may be additional questions based on the responses to the above.

Provider contract negotiations happen at all different timeframes and not all are finalized for 2020 at this point. The factors we used represent our best estimate for when they are finalized.

Response to this request should be provided via SERFF in Microsoft Excel spreadsheets (version 2013 or less). Please retain all formulas.

Should you have any questions regarding this correspondence, please contact me at (717) 787-5172.

Sincerely,

Cherri Sanders-Jones
Actuarial Review Division
Bureau of Accident & Health Insurance

Exhibit 3biii: Historical Data for Trend Development

***2019 data has been extrapolated to cover 12 months*

Service Category	Year	Member_Months	Allowed Amt	Service Cnt	Unit Cost	Utilization PTPM	Cost	Utilization	Overall
Inpatient Hospital	2016	1,322,678	$ 109,384,049	7,994	$ 13,683.27	72.53			
Inpatient Hospital	2017	1,644,192	$ 130,089,654	9,402	$ 13,836.38	68.62	1.12%	-5.39%	-4.33%
Inpatient Hospital	2018	1,627,833	$ 158,672,808	9,308	$ 17,046.93	68.62	23.20%	0.00%	23.20%
Inpatient Hospital	2019	1,562,528	$ 139,663,949	8,768	$ 15,928.83	67.34	-6.56%	-1.86%	-8.30%
Outpatient Hospital	2016	1,322,678	$ 160,265,260	433,329	$ 369.85	3931.38			
Outpatient Hospital	2017	1,644,192	$ 196,838,173	535,797	$ 367.37	3910.47	-0.67%	-0.53%	-1.20%
Outpatient Hospital	2018	1,627,833	$ 206,633,932	533,720	$ 387.16	3934.46	5.39%	0.61%	6.03%
Outpatient Hospital	2019	1,562,528	$ 194,988,385	498,056	$ 391.50	3825.00	1.12%	-2.78%	-1.69%
Professional	2016	1,322,678	$ 115,155,031	1,364,599	$ 84.39	12380.33			
Professional	2017	1,644,192	$ 140,642,186	1,664,656	$ 84.49	12149.35	0.12%	-1.87%	-1.75%
Professional	2018	1,627,833	$ 144,018,327	1,668,869	$ 86.30	12302.51	2.14%	1.26%	3.43%
Professional	2019	1,562,528	$ 136,950,990	1,606,664	$ 85.24	12338.96	-1.23%	0.30%	-0.93%
Other Medical	2016	1,322,678	$ 59,932,376	43,153	$ 1,388.83	391.51			
Other Medical	2017	1,644,192	$ 75,343,777	51,104	$ 1,474.32	372.98	6.16%	-4.73%	1.13%
Other Medical	2018	1,627,833	$ 94,012,048	52,674	$ 1,784.79	388.30	21.06%	4.11%	26.03%
Other Medical	2019	1,562,528	$ 91,261,148	50,408	$ 1,810.45	387.13	1.44%	-0.30%	1.13%
Prescription Drugs	2016	1,322,678	$ 112,943,039	1,333,058	$ 84.72	12094.17			
Prescription Drugs	2017	1,644,192	$ 152,986,803	1,683,584	$ 90.87	12287.50	7.25%	1.60%	8.97%
Prescription Drugs	2018	1,627,833	$ 163,290,915	1,679,723	$ 97.21	12382.52	6.98%	0.77%	7.81%
Prescription Drugs	2019	1,562,528	$ 147,859,571	1,553,912	$ 95.15	11933.83	-2.12%	-3.62%	-5.67%

Exhibit 5b: Derivation of Tobacco Calibration Factor

Tobacco Status	Current/Projected Enrollment Distribution	Tobacco Factor	Calibration Factor
Non-User	91.3%	1.000	0.913
User	8.7%	1.025	0.089
Total	100.0%		**1.002**

Exhibit 6: Derivation of Trend from Prior Filing using New Method

Entire Fully Insured Block

Base Data

Inpatient Hospital

YEAR	ALLOWED AMT	ADMIT CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2016	$211,225,400	15,964	3,135,102	$13,231.36	61.1
2017	$247,133,090	17,384	3,407,249	$14,216.12	61.2

Outpatient Hospital

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2016	$397,104,676	991,599	3,135,102	$400.47	3,795.5
2017	$443,527,177	1,082,739	3,407,249	$409.63	3,813.3

Professional

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION ADMIT PTPM
2016	$277,361,249	3,324,528	3,135,102	$83.43	12,725.1
2017	$303,594,056	3,581,067	3,407,249	$84.78	12,612.2

Other Medical

YEAR	ALLOWED AMT	SERVICE CNT	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2016	$119,774,806	72,156	3,135,102	$1,659.94	276.2
2017	$149,327,660	83,603	3,407,249	$1,786.15	294.4

Prescription Drugs

YEAR	ALLOWED AMT	Prescriptions	ENROLLMENT	Unit Cost	UTILIZATION PTPM
2016	$289,944,004	2,755,880	3,135,102	$105.21	10,548.5
2017	$341,169,952	2,989,831	3,407,249	$114.11	10,529.9

Trend Output

Trend Adjustment Factor 1.01

Service Category	2017 Allowed Amt	Weight	Cost	Utilization	Overall	Adj Cost	Adj Util	Overall
Inpatient Hospital	$247,133,090	18.4%	7.44%	0.20%	7.65%	8.12%	0.82%	9.01%
Outpatient Hospital	$443,527,177	28.1%	2.29%	0.47%	2.77%	2.93%	1.10%	4.06%
Professional	$303,594,056	20.3%	1.62%	-0.89%	0.72%	2.25%	-0.27%	1.98%
Other Medical	$149,327,660	11.0%	7.60%	6.61%	14.72%	8.28%	7.28%	16.16%
Prescription Drugs	$341,169,952	22.3%	8.46%	-0.18%	8.27%	9.14%	0.45%	9.63%

Historical Annual Trend **5.88%**

Annual Trend Applied **7.21%**

Check **7.21%**

Exhibit 7: Actual and Projected Claims Costs

Year	Projected Paid Claims PMPM	Actual Paid Claims PMPM
2015	$ 242.79	$ 24.66
2016	$ 306.01	$ 6.27
2017	$ 294.39	$ 16.69
2018	$ 312.90	$ 16.76

Exhibit 8: Historical Financial Data

Year	Total Member Months	Total Administrative Expenses	Total Incurred Claims	Total Paid Taxes and Fees	Total Premium	Profit	Annual Underwriting Gain/Loss	Underwriting Gain/Loss PMPY
2014	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
2015	156	$313,803	-$2,534,344	-$7,286	$2,917,105	$5,144,932	$5,451,449	$419,342
2016	36	-$917	-$28,400	$6,086	$16,730	$39,962	$45,130	$15,043
2017	36	-$97	$0	$0	-$1,900	-$1,803	-$1,900	-$633
2018	36	$749	$458	$276	$18,481	$16,998	$18,023	$6,008

Dear Mr. Lovely:

The Pennsylvania Insurance Department has received and conducted a review of the above captioned filing. In order to complete the review, we are requesting the following information. To facilitate a timely review, we request this information be provided within 7 days of the date of this letter. If you have any questions or difficulties in providing the information within this time frame, please call me.

Please note, each response to a Department data call must contain a cover letter that details the changes made to the Actuarial Memorandums and PA Actuarial Memorandum Exhibits and the reasons why the changes were made, e.g., in response to Department question number 5.

1. From the June 25 Response to Question 11 regarding risk adjustment, you have only briefly explained your position and you seem to be suggesting that both risk adjustment and induced demand factors will need recalculated. Please speak to both of these items separately.
a. What is a more appropriate risk adjustment transfer assumption? Provide a quantified justification.
b. Explain why you believe a different risk adjustment transfer assumption would require a different induced demand. We question why induced demand would change since the benefit and cost sharing would not change. Induced demand is only for the impact of cost sharing on utilization. Provide data that supports your position with a quantified justification.

In thinking through this further, it would be most appropriate to update the morbidity of the expected population rather than induced demand. Compared to a population enrolled across all metal levels, a population with only a bronze plan will attract a much healthier than average block of membership. The morbidity factor has been lowered to account for this. In attracting a healthier population, the risk adjustment experienced by this block would shift to a higher payable. We have increased the estimated payable to account for this as well.

2. From the June 25 Response to Question 15: "Pediatric Dental is administered and paid by Dominion Dental. Please identify the fees paid to Dominion Dental on a PMPM basis. Is this fee paid on a capitation basis or on a fee for service basis?" Your response indicates that Pediatric Dental is provided via a capitation. Please correct rate filing materials and templates to reflect the capitation.

Rate filing materials and templates have been updated to reflect the capitation.

3. From the June 25 Responses to Questions 16 and 20: "Did the certifying actuary rely on any information or assumptions provided by another individual? If so, please specify and provide reliance statements." Your responses to these questions demonstrate that you may be relying upon material information from the Finance department and that you are aware of the ASOP 41 requirements regarding Reliance. Please provide the required disclosures for this rate filing per ASOP 41.

The reliance statement has been uploaded in the Supporting Documentation section in SERFF.

4. From the June 25 Responses to Question 20: "Regarding Table 6: c) Using the submitted commission schedules, quantitatively show the development of the percent and PMPM amounts in cells C51 and D51. d) Using the 2018 SHCE in the Annual Statement, please quantitatively show the development of the Quality Improvement Initiatives percent and pmpm amount." Provide quantitative justification for these amounts and fully explain the adjustments decided upon based upon Finance department correspondence.

The values for both the Quality Improvement Initiatives and Commissions are directly based on Finance Department estimates. A reliance statement to this effect has been submitted.

5. From the June 25 Responses to the second Questions 11, 12 and 13: Please provide a comprehensive explanation of how changes in provider contracting impacted (or why it did not impact) trend, network factors, and geographic factors.

While early estimates from our Reimbursement team have included a guarded estimate of stability, we note that a number of our 2020 provider contracts are not final. As such, while we do not currently anticipate a material deviation from the trend in prior year contract rates, we cannot yet rule this out. In the absence of evidence to the contrary, we have initially incorporated provider contracting as a stable element of factor development.

6. In response to question 5, you indicate that UPMC believes that the actual trends will be lower than what is implied by the historical data. Please discuss why you believe this to be so. Additionally, provide your quantitative analysis support for this assumption.

We looked at more than one year of historical trend. For the 2019 filing, we had recently experienced a trend that was much below average. We anticipated that was an anomaly and would be followed by a year with higher trend, which is what we saw for this year's filing. For future projections, we feel that the best projection would be roughly an average of these two years. Averaging a year of almost flat trend with one that breached double digits got us to our estimate of 6%.

7. From the June 25 response to questions 11 and 12, you indicated that UPMC reviewed each rating area as a whole rather than specific county-level data in determining the geographic factors. Please provide the requested data by rating area. Please be aware that the proposed factors cannot be approved without detailed quantitative support.

The 2016-2018 data by rating area available in our data warehouse has been uploaded.

8. As requested, you have added the RA User Fees in Table 6. Please confirm that there was no offsetting adjustments made elsewhere, as this fee was not included in the initial submission.

The RA User Fee was included in the original submission, in the Risk Adjustment row, Table 5, "Projected Risk Adjustment PMPM" (so the PMPM was a net value, consistent with our interpretation at the time). Now: the $0.18 user fee PMPM is reflected in Table 6 as requested, and the table 5 PMPM is $0.18 higher because it no longer subtracts that fee. So, the revised submission includes the fee, accounted for as requested; but the original submission also included the fee, so there is no rate impact.

9. In response to the Department's RADV survey, issuers indicated that they did not include an adjustment in the initial submission, as there was no supportable reason for a RADV adjustment in the 2020 rate submission. Therefore, the Department has determined that there should be no RADV adjustments in the 2020 rate filings; please modify the filing accordingly, if necessary.

No adjustments were made for RADV as part of this filing.

10. In that the Department's review authority requires rates to be adequate, not excessive or unfairly discriminatory, please explain why you believe the rates to be adequate without an adjustment for the 3-child maximum.

As part of this update, an adjustment accounting for the 3-child maximum has been incorporated into the derivation of the age calibration factor as shown in exhibit 4 of the supporting exhibits.

11. If the risk adjustment results released on June 28, 2019 are inconsistent with your projected assumptions, you may modify the risk adjustment transfer amount in Table 5. Supporting documentation must be provided for all modification. If such a modification is made, revise all the documents and exhibits impacted and the PA Actuarial Memorandum to discuss this change. This change must be made with your responses due by July 12, 2019.

No modifications were made to risk adjustment due to the projections being different than final results.

12. Concerning your network and geographic factors, please provide in Excel your base period member months, current membership, and projected member months for each network and geographic area. Also please provide your non-normalized network and geographic factors for 2018, 2019 and 2020.

Please see exhibit 12 of the response exhibits for the requested data. Please note that provider network factors are not applied for this legal entity in the Individual market.

<Redacted>

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

Response to this request should be provided via SERFF in Microsoft Excel spreadsheets (version 2013 or less). Please retain all formulas.

Should you have any questions regarding this correspondence, please contact me at (717) 787-5172.
Sincerely,

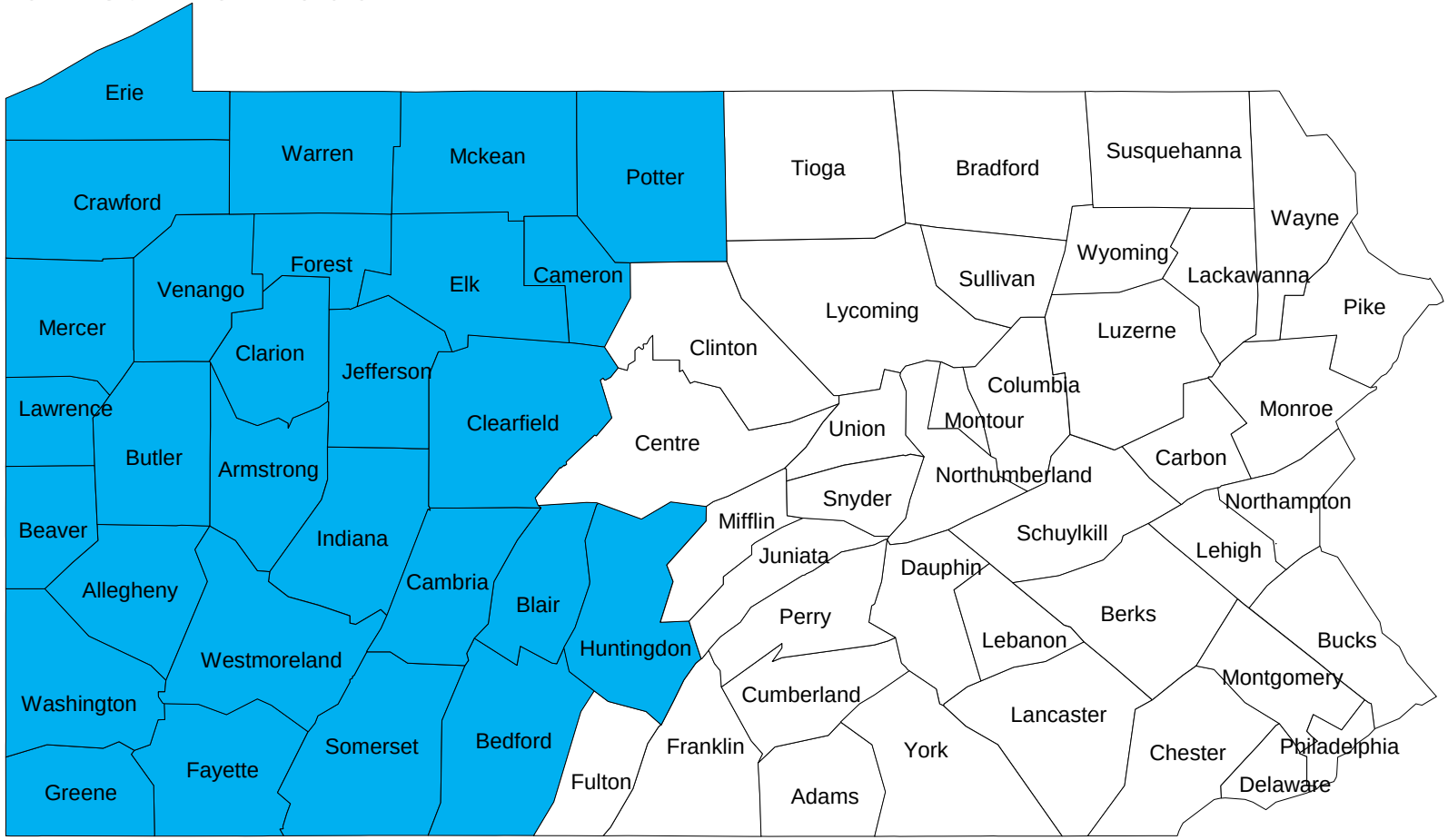
Cherri Sanders-Jones
Actuarial Review Division
Bureau of Accident & Health Insurance

Exhibit 12: Data by Geographical Area and Network

Rating Area	2018 Member Months	Feb 2019 Members	2020 Projected Member Months	2018 Non-calibrated Factor	2019 Non-calibrated Factor	2020 Non-calibrated Factor
Rating Area 1	216,369	16,495	197,940	1.0000	1.0000	1.0000
Rating Area 2	19,578	1,565	18,780	1.0000	1.0000	1.0964
Rating Area 3	26,221	2,937	35,244	1.2633	1.2619	1.2619
Rating Area 4	1,094,384	88,135	1,057,620	1.0000	1.0000	1.0000
Rating Area 5	189,038	14,912	178,944	1.0000	1.0000	1.0000
Rating Area 6	37,452	2,684	32,208	1.0000	1.3468	1.3468
Rating Area 7	44,847	6,656	79,872	1.3659	1.3659	1.3659
Rating Area 8	-	-	-	N/A	N/A	N/A
Rating Area 9	-	4,145	49,740	N/A	1.1960	1.1960

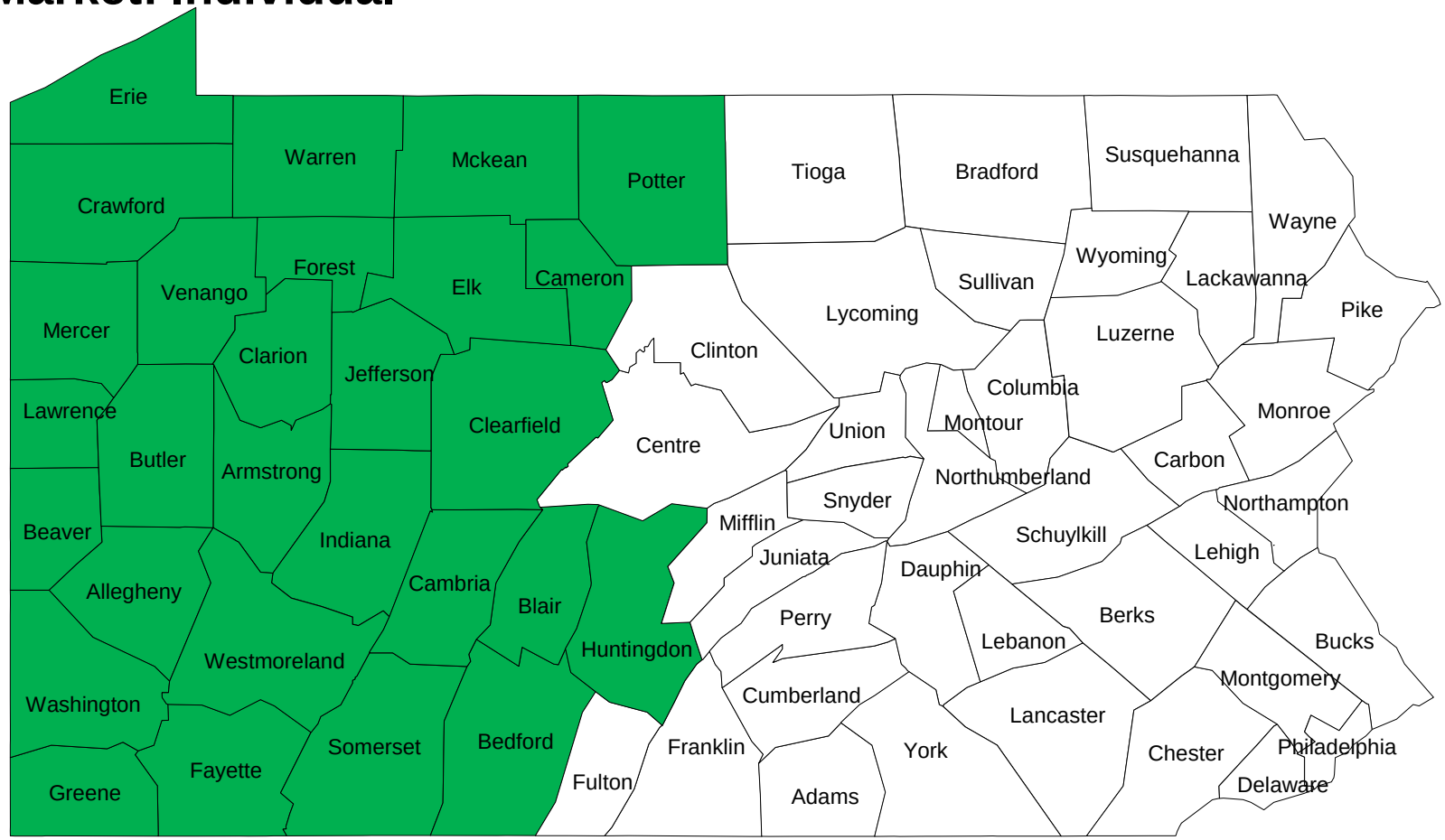
Network	2018 Member Months	Feb 2019 Members	2020 Projected Member Months
Standard Network	36	3	36

2019 Service Area
Issuer: UPMC Health Coverage, Inc.
Market: Individual



Key *(modify as needed)*
: 2019 On-exchange service area
: 2019 Off-exchange service area

2020 Service Area
Issuer: UPMC Health Coverage, Inc.
Market: Individual



Key *(modify as needed)*
: 2020 On-exchange service area
: 2020 Off-exchange service area