



August 26, 2022

Ms. Lindsy Swartz, MBA, MCM, Director
Bureau of Life, Accident & Health Insurance
Commonwealth of Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

Re: Highmark Benefits Group 2023 ACA Rate Filing (Individual Market)
Filing # 1A-DP-22-HBG (SERFF# HGHM-133249727)

This constitutes Notice pursuant to Section 707 of the Pennsylvania Right-to-Know Law that the attached Highmark Benefits Group (HBG) 2023 Individual Market Rate Filing contains Trade Secret and Confidential Proprietary Information. Therefore, HBG must, prior to the release of any portion of this Filing, be notified of any request by a third party for access to this Filing, and the Trade Secret and/or Confidential Proprietary Information identified by HBG should be redacted before release.

Dear Ms. Swartz:

This Filing includes the Highmark Benefits Group (“HBG”, “Company”) Individual Market rates and the supporting rate development for policies with effective dates on or after January 1, 2023.

As a result of the Department’s review of this filing thus far, the following change has been made to the prior version of the filing:

- Pursuant to the Department’s August 23, 2022 guidance, the impact of the state 1332 Reinsurance program is captured using the prescribed parameters of \$60,000 attachment point, 53% coinsurance rate, and \$100,000 reinsurance cap.

The remainder of this cover letter and all of the supporting filing documents have been revised to reflect the changes described above.

In the event the Department decides to publish this Filing in the PA Bulletin, the company information requested in the Department’s 2023 ACA-Compliant Health Insurance Rate Filing Guidance, Section B, is provided below:

Requested Company Information

1. Company Name & NAIC #: **Highmark Benefits Group, NAIC # 15508**

2. Market: **Individual**
3. On or Off Exchange: **The Company anticipates selling plans on and off of the exchange.**
4. Effective date of coverage: **January 1, 2023**
5. Average rate change requested: **13.2% increase**
6. Range of rate change requested: **11.0% to 18.1%**
7. Total additional annual revenue generated from the proposed rate change: **\$14,863,118**
8. Product(s): **PPO**
9. Rating Areas and the change from 2022: **Rating Area 3**

There are no changes in our covered Rating Areas from the 2022 rate filing.

10. Metal Levels and Catastrophic Plans: **The Company anticipates selling Gold, Silver, Bronze, and Catastrophic plans in 2023**
11. Current number of covered lives as of February 1, 2022: **18,098 covered lives**
12. Number of plans offered in 2023 and the change this represents from 2022: **15**

The Company offered 14 plans in 2022. For 2023, the Company is transitioning all plans from EPO designs to PPO designs. Therefore, the Company is offering 15 new plans in the Market and removing 14 plans from the Market.

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

13. Corresponding contract form #, SERFF and Binder ID#s: **The corresponding SERFF binder number is HGHM-PA23-125113133 affecting the following Company products and forms:**

Product Name / Type	Contract Form & SERFF#
my Priority Blue PPO	PPO/HBG/DP HGHM-133214469
my Priority Blue PPO Premier	PPO/Premier/HBG/DP HGHM-133214539
my Priority Blue PPO HDHP	PPO/HDHP/HBG/DP HGHM-133214543

my Priority Blue Major Events PPO	CAT/PPO/HBG/DP HGHM-133214547
my Priority Blue PPO Adult Dental and Vision	PPO/ADV/HBG/DP HGHM-133214551
my Priority Blue PPO Premier Adult Dental and Vision	PPO/Premier/ADV/HBG/DP HGHM-133214556

14. HIOS Issuer ID # and submission tracking number: **HIOS Issuer ID #79962, Company Filing #1A-DP-22-HBG (SERFF Filing # HGHM-133249727)**

Additional Filing Disclosures

The Company has submitted all Required Documents stipulated by the Department, including the federal documents related to this filing, in its SERFF submission. In addition to the Required Documents, the Company has submitted a Supplemental Exhibits file containing additional detailed exhibits on items referenced in the PA Actuarial Memorandum. All tables, exhibits, and detail in support of this filing and the PA Actuarial Memorandum have been included in Excel format. To assist in the Department's review, the Excel files have retained their formulas to the extent possible.

Potential Changes to Federal Regulations

Per the Department's guidance, the impact of the state 1332 Reinsurance program is captured using the prescribed parameters. If the final parameters should change from those described in this filing, a revised submission would be required.

Other assumptions in the filing account for the ongoing impact of the COVID-19 pandemic and the lack of Federal CSR funding. The continuation of American Rescue Plan Act (ARPA) level enhanced subsidies in the Inflation Reduction Act was considered in the rate development but no adjustment was included at this time. Finally, modifications to the rate development may be necessary if significant unforeseen events occur. Examples include, but are not limited to, changes in legislation/regulations (including rules, regulatory guidance, etc.), changes in the participation of QHP issuers that would materially impact risk adjustment transfer amounts, Medicaid redetermination policy impacts, or material developments in the course of the COVID-19 pandemic. As a result, HBG reserves the right to submit a revised filing.

Request for Confidentiality

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

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

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

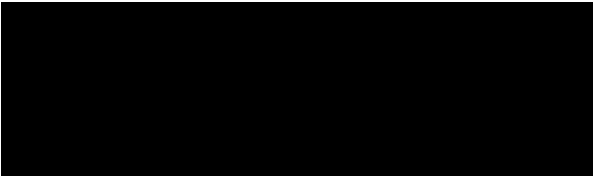
Furthermore and pursuant to the Pennsylvania Right-to-Know Law ("RTKL"), HBG must be notified prior to release of information contained in this Filing and be given the opportunity to respond to requests for such information. Should the Department receive such request or require the release of information contained in this Filing for its own purposes, HBG asserts its right to release a redacted version of the Filing. In accordance with the RTKL, please contact the HBG RTKL representative identified below prior to release of any information contained in this Filing:


RTKL Representative
Director Privacy & Data Ethics
Highmark Health
120 Fifth Avenue, Suite 2114
Pittsburgh, PA 15222

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

Should you have any questions regarding the attached Filing, please feel free to contact me at  or via e-mail at: 

Sincerely,


Vice President, Actuarial Services
Highmark Inc.

Rate Change Summary

Highmark Benefits Group – Individual Plans

Rate request filing ID # 1A-DP-22-HBG (SERFF # HGHM-133249727) - This document is prepared by the insurance company submitting the rate filing as a consumer tool to help explain the rate filing. It is not intended to describe or include all factors or information considered in the review process. For more information, see the filing at <https://www.insurance.pa.gov/Companies/ProductAndRateRequire/Pages/default.aspx>

Overview

Initial requested average rate change:	14.4%
Revised requested average rate change:	13.2% ¹
Range of requested rate change:	11.0% to 18.1%
Effective date:	January 1, 2023
People impacted:	18,098
Available in:	Rating Area 3

Key information

Jan. 2021-Dec. 2021 financial experience

Premiums	\$137,748,708
Claims	\$119,182,719
Administrative expenses	\$12,558,490
Taxes & fees	\$3,732,820
Company made (after taxes)	\$2,274,679

How it plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2023:

Claims:	89%
Administrative:	8%
Taxes & fees:	3%
Profit:	0%

The company expects its annual medical costs to increase **9.2%**.

Explanation of requested rate change

The proposed average rate change is being driven by cost and utilization trend as well as changes to the reinsurance parameters.

¹ Rates revised to correct any inadvertent errors and/or Department recommended changes.

Actuarial Memorandum

1. Basic Information and Data

A. Company Information

The appropriate company information has been provided in Table 0. General information pertaining to this rate filing is summarized below:

- Company Name: Highmark Benefits Group (“HBG”, “Company”)
- NAIC #: 15508
- HIOS Issuer ID: 79962
- State: Pennsylvania
- Market: Individual
- Effective Date: 1/1/2023
- SERFF Rate Filing #: HGHM-133249727

In accordance with the Department’s August 23, 2022 guidance, the impact of the state 1332 Reinsurance program is captured using the prescribed parameters of \$60,000 attachment point, 53% coinsurance rate, and \$100,000 reinsurance cap. If the final parameters should change from those described in this filing, a revised submission would be required.

Other assumptions in the filing account for the ongoing impact of the COVID-19 pandemic and the lack of Federal CSR funding. The continuation of American Rescue Plan Act (ARPA) level enhanced subsidies in the Inflation Reduction Act was considered in the rate development but no adjustment was included at this time. Finally, modifications to the rate development may be necessary if significant unforeseen events occur. Examples include, but are not limited to, changes in legislation/regulations (including rules, regulatory guidance, etc.), changes in the participation of QHP issuers that would materially impact risk adjustment transfer amounts, Medicaid redetermination policy impacts, or material developments in the course of the COVID-19 pandemic. As a result, HBG reserves the right to submit a revised filing.

B. Rate History and Proposed Variations in Rate Changes

The three most recent rate changes in Pennsylvania for HBG are as follows:

Year	Avg. Increase	SERFF ID#
2022	2.0%	HGHM-132820371
2021	-4.0%	HGHM-132324173
2020	Initial Filing	HGHM-131904542

Historical rate changes varied by plan due to updated cost sharing levels to meet federal AV requirements as well as updates to AV and other pricing factors.

The proposed 2023 rate changes vary by plan. This is primarily due to updates in the pricing AV factors and benefit richness factors. The plan level rate changes can be found in Table 10.

As requested by the Department, a historical MLR Exhibit is included as Attachment H. MLR results reflect any amounts attributed to the applicable benefit year. As an example, Risk Adjustment paid in mid-2019 for the 2018 benefit year is attributed to the 2018 benefit year.

C. Average Rate Change

The average rate changes as presented in the filing are:

- Table 10: 13.2%
- Table 11: 13.2%

Table 10 calculates the percentage change in the member weighted average rate for 2022 and the member weighted average rate for 2023. Table 11 calculates the percentage increase for each plan and then member weights the percentage increases.

Worksheet 2 of the URRT also shows a submission level rate change. This value is used in the development of the average rate change shown in the Federal Part II justification. A demonstration of this calculation is included in Attachment F.

D. Membership Count

Please see Table 1 for the average age, age breakdown, and total membership for the periods shown.

E. Benefit/Cost Sharing Changes

The majority of Highmark Benefits Group's renewing 2023 plans contain cost sharing that differs from the 2022 offering.

The screenshots from the HHS AV calculator, showing the plan benefits and the resulting actuarial values, can be found as a separate attachment within the *Supporting Documentation* section in SERFF. Also, the PA Plan Design Summary and Rate Tables along with the HIOS Plan IDs can be found within the *Rate/Rule Schedule* section in SERFF.

F. Experience Period Claims and Premium

Please see Table 2 for the experience period data for the most recent calendar year. The experience period paid claims data represents the 2021 calendar year results for all policies in the single risk pool, with run out through February 2022. This data is consistent with the data reported in Section I of Worksheet I of the URRT.

Table 2 is populated with the experience period data as follows:

- The Earned Premium represents actual revenues earned in the experience period.
- Incurred Claims represent claims paid by HBG. Note that the URRT includes capitated services and is net of Rx Rebates. Those values are not included here as they are listed as separate items.

- The Allowed Claims represent our best estimate of the total claims prior to member cost sharing incurred during the experience period. The Allowed Claims include:
 - Two months of run out from the end of the experience period,
 - Claims processed outside of the Company's claims system (e.g., claim settlement costs), and
 - Our best estimate of claims incurred but not paid as of the end of the run out period.
 Note that allowed claims in the URRT include capitation and are net of drug rebates. They are not included here as they are called out separately in the exhibit.
- Allowed Charges for non EHB services are included in column G. The amount of non EHB included is shown in column H.
- Prescription Drug Rebates are used to reduce the level of Incurred Claims in the experience period.
- Total EHB capitation includes \$0.20 PMPM for the pediatric vision benefit.
- Estimated Risk Adjustment includes the transfer dollars and an estimate for the High Cost Risk Pool for the experience period. The Risk Adjustment transfer portion of the total is consistent with the results of the Department's RATEE analysis using the files dated May 2, 2022.

G. Credibility of Data

The experience period data for HBG is large enough to be fully credible. The results are based 100% on the experience period data.

H. Trend Identification

Table 3 identifies the annual medical and prescription drug allowed claims cost and utilization trends. The underlying total annual trend is 8.75%. Additionally, there is an induced utilization adjustment of 0.46% per year applied to reach the overall trend of 9.24% shown in Table 3 column G. The definitions of service categories, cost, and utilization in Table 3 are consistent with the URRT instructions. The numbers entered in the Cost and Utilization columns are consistent with those entered in Worksheet I, Section 2 of the URRT, except as noted below.

The cost trends presented in Table 3 reflect the Company's expectations regarding increases in in-network contractual reimbursement, as well as projected out-of-network costs. The significant changes observed in the volume, demographics and morbidity of the ACA population from 2018 to 2021 yield component trends that are generally not directly applicable for trend analysis. The trend components in Table 3 therefore represent the same blended average for all types of service and are applied to the aggregate experience for pricing.

A multi-year regression analysis was developed by the Company's valuation team to analyze the ACA individual population trend levels. The analysis was completed at the medical and pharmacy level, then combined to develop a total trend assumption. The regression tool removes components of trend that are more explainable from the observed trend rates and then uses regression analysis to isolate the underlying trend rate. Some of the more explainable variables include high dollar claims, workdays, provider contracting, demographics, and seasonality. The total trend is the sum of the explainable

components and the estimated underlying trend rate. The valuation regression tool primarily informed the trend selection with the final requested trend also based on actuarial judgment.

I. Historical Experience

Table 4 presents the most recent 48 months (4 calendar years) of HBG data with run-out through February 2022. This data was not used to develop the trend in Table 3. Please see Section H for further details.

2. Rate Development & Change

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

The development of the Projected Index Rate, Projected Market-Adjusted Index Rate, and Projected Total Allowed Claims, shown in Table 5, closely follows the methodologies discussed in the Part III Actuarial Memorandum submitted in the Rate Filing Justification. Please refer to the Part III Memorandum for further details.

Some of the items separately identified in Table 5 include:

- The Change in Morbidity adjustment of 0.977 is comprised of the following: the morbidity impact from claims experience and an adjustment to account for the impact of Covid-19. In accordance with the Department's guidance, the morbidity change related to the Reinsurance program is set to 1.000. Each of the components is described in more detail below.

The Morbidity Impact from Claims Experience

This adjustment reflects the change in the population mix/claim levels from the experience period to the projection period. We continue to observe a high degree of membership churn from year-to-year, which impacts the morbidity. This factor also takes into consideration the effects of adverse selection inherent to guaranteed issue markets. The Individual ACA risk pool continues to have a significantly higher proportion of older members with a high prevalence of chronic conditions compared to group business, which adds to the uncertainty of any future claim projections.

Covid-19 Impact

In order to account for the impact of COVID-19 on projected claim costs, the Company took the following steps:

1. Adjusted the claims in the base experience period to a non-COVID-19 baseline. This was done to stabilize the base from which claims are being projected. The base period adjustment accounts for the impacts of testing, treatment, vaccines, and deferred/rescheduled/induced care. Claims in the base experience period were decreased by a factor of 0.968 to remove the impact of COVID-19.

2. Projected claims to the projection period using trends with the impact of COVID-19 excluded. Again, this provides for a more stable projection of future claims, before applying the anticipated impact of COVID-19 in the projection period. This was accomplished by applying a trend of 8.75% (which excludes any impact from COVID-19) to our adjusted BEP claims.
3. The projected claims were then further adjusted by applying the anticipated impacts of COVID costs expected in the projection period. The following components were accounted for:
 - a. COVID Testing (0.1% claims impact) – Proportional to new cases, which are assumed to diminish over time and be lower in the projection period than in previous years.
 - b. COVID Treatment/Care (0.7% claims impact) – Proportional to new cases, which are assumed to diminish over time and be lower in the projection period than in previous years. Additionally, new variants are expected to be less severe.
 - c. Vaccines (0.4% claims impact) – Assumes insurers will cover vial cost and administration cost; however, booster utilization is expected to diminish.
 - d. Deferred/Rescheduled/Induced Care (-0.1% claims impact) – Includes care that didn't happen because it wasn't necessary (like ER visits), because it couldn't get scheduled (like inpatient stays when the beds are filled with COVID patients), and care that patients chose to defer (like elective procedures). For the projection period, the primary driver of avoided care is displaced non-COVID care.
 - e. Actuarial Judgement (-0.5% claims impact) – The Company reviewed the composite CY2023 COVID impact resulting from the components outlined above and elected to temper the adjustment in light of the inherent unpredictability of items such as deferred care and treatment costs.

The application of the above COVID claim adjustments to the rating period results in a COVID adjustment factor of 0.973. Please see Attachment G for a more detailed calculation of the of these factors.

- The Change in Demographics adjustment of 1.012 reflects the change in age and geography factors we expect from the experience period to the projection period.
- There is a Change in Network adjustment of 1.01.
- There is no Change in Benefits adjustment.
- The Change in Other adjustment of 0.994 reflects changes in pharmacy rebates and expected changes in hospital/physician settlements.

Please see Attachments A and E for a more detailed calculation of these factors. These factors can also be found in the accompanying spreadsheet.

The projected paid-to-allowed ratio is 0.837. The formula found in Table 5 cell C28 was overwritten because, unlike the average factors found in Table 10 cells K15 and K16, the Company's paid-to-allowed factor is weighted on projected allowed charges and is also dampened by items such as capitation.

The quantitative development of the projected risk adjustment transfer amount for the Company is shown in Attachment B and included in the accompanying spreadsheet. The transfer amount is developed based on an analysis of the claims data underlying the rate development for this filing (risk scores as defined in the HHS Notice of Benefit and Payment Parameters, as well as other risk transfer formula components) and an estimate as to the market-wide risk profile. This market-wide risk profile is developed from available market data, including prior years' risk adjustment transfer results, publicly available data (such as MLR reports), and outside expertise from actuarial consultants. Applying the federally prescribed transfer formula at the level of granularity available in Attachment B yields a projected gross risk adjustment transfer of (\$9.78) PMPM on a *billable* member month basis. This amount is then converted to a *total* member month basis of (\$9.76) PMPM in order to be used in the rate development. The expected risk adjustment payable reflects that the Company anticipates its average risk score (net of allowable rating factors) to be lower than the statewide average.

The (\$12.55) PMPM value in cell C31 of Table 5 equals the (\$9.76) PMPM value from Attachment B, a charge of (\$2.87) PMPM for the projected net impact of the High Cost Risk Pool program, and a further adjustment for the composite effect of catastrophic eligibility and benefits in addition to EHB. Please note that the risk adjustment user fee is captured in the taxes and fees portion of administrative costs.

The exchange user fee in cell C32 of Table 5 is developed by taking the required user fee percentage of 3.0% and multiplying by the percentage of total members expected to be on exchange of 89%. This results in a percentage of 2.7%. The PMPM of \$19.06 is calculated as 2.7% of the total required premium adjusted further for the composite effect of catastrophic eligibility and benefits in addition to EHB.

The projected incurred reinsurance recoveries of \$31.25 PMPM is found in cell C33 of Table 5. The reinsurance recoveries PMPM was developed by trending Highmark PA individual ACA CY2021 incurred claims by member to the CY2023 rating period, applying the parameters defined in Tab II.b, and calculating the amount of incurred claims expected to be reimbursed by the program. Highmark PA individual ACA business was considered due to its level of credibility. The modeling produced an estimated incurred claims savings of 4.8%. This percentage was converted to a PMPM and adjusted further for the composite effect of catastrophic eligibility and benefits in addition to EHB.

The Company intends to offer several plans that include benefits in addition to EHB. Five plans have an adult dental and vision benefit, and four plans have a hearing, OTC, and personal assistance (i.e. Papa Pals) benefit. The Company relied on cost estimates from other departments for the following non-EHB benefits:

- **Adult dental benefit** – United Concordia Dental (UCD) estimated this benefit to be worth \$39.97 PMPM on a paid basis.
- **Adult vision benefit** – Davis Vision estimated this benefit to be worth \$2.45 PMPM on a paid basis.
- **Hearing benefit** – TruHearing estimated this benefit to be worth \$0.03 PMPM on a paid basis.
- **OTC Benefit** – Fieldtex estimated this benefit to be worth \$1.93 PMPM on a paid basis.
- **Personal assistance (i.e. Papa Pals) benefit** – Papa (the external vendor) estimated this benefit to be worth \$2.70 PMPM on a paid basis.

B. Retention Items

Table 6 has been completed with the requested retention elements for the proposed rates for the rating period. The amounts presented separately sum to the total administrative expenses and taxes and fees presented in the rate development.

Administrative costs reflect internal costs that the Company is projected to incur in the rating period and are developed from standard expense allocation methods. Administrative expenses do not vary by plan.

The proposed rate development assumes an average broker commission of \$6.00 PMPM for 2023. The assumed broker commission schedule and the development of the average value are included in Attachment D.

Expenses for Quality Improvement initiatives are assumed to be 0.76%.

The following is a summary of the Taxes and Fees included in the rate development:

- Pennsylvania Premium Tax is not applicable to this issuer and thus is set to 0.0%.
- Federal Income Tax is set to 0.0%.
- Health Insurance Provider Fee is set to 0.0%.
- Risk Adjustment User Fee is set to \$0.22 PMPM consistent with Federal regulations.
- Patient-Centered Outcomes Research Institute (PCORI) fee is set to \$0.26 PMPM.

The Profit/Contingency for all plans is set to 0%. HBG has voluntarily refrained from adding a risk and contingency factor in this filing. By this voluntary action, HBG is not waving any right to include a risk and contingency factor which HBG believes is consistent with historical and legal interpretations of HBG and the Pennsylvania Insurance Department.

C. Normalized Market-Adjusted Projected Allowed Total Claims

The normalization factors presented in Table 7 are each determined from the underlying membership demographics expected in the projected rating period. The 2022 values are pulled from the prior year's filing, while the 2023 values represent our projection for 2023 assumed in the 2023 rate development.

D. Components of Rate Change

Table 8 presents the components of change in the proposed 2023 Calibrated Plan Adjusted Index Rate (PMPM). Cell C73 is populated with the base period allowed charges found in the 2022 plan year rate filing (\$512.06).

Table 9 presents the data elements supporting the calculations in Table 8. The 2022 values are populated using the 2022 filed factors adjusted for the membership mix as of February 1, 2022.

3. Plan Rate Development

Table 10 shows the plan rate development for 2023. This table shows the plans that the Company intends to offer in 2023, as well as all plans offered in the 2022 portfolio. The calibrated plan adjusted index rates

for 2022 are calculated according to the instructions. The 2023 rating factors are consistent with the factors found on Worksheet 2 of the URRT. The pricing effect on Table 10 is further broken out into Pricing AV, Benefit Richness, and Non-Funding of CSR Adjustment. Similar to the URRT, the admin effect on Table 10 is broken out into Admin Costs, Taxes and Fees, and Profit or Contingency.

The benefit richness factors in column L are populated with the factors found in Attachment C and the corresponding supporting spreadsheet included with this rate filing. The derivation of the AV and Cost Sharing factors can also be found in Attachment C. The values in column 8 of the attachment represent the pure induced utilization for each plan. The Company's induced utilization factors are based on the following state-defined formula: $(\text{Plan AV})^2 - (\text{Plan AV}) + 1.24$. The "Plan AV" is the product of the "Pricing AV" and "Non-Funding of CSR Adjustment." Each plan's factor was then normalized by the average utilization factor. The average is a weighted average using projected membership as the weight. After normalization the average factor as shown in Attachment C is 1.000.

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

For discontinuing plans where members are being mapped into a new plan, an effective rate increase is calculated by comparing the 2022 rate of the discontinuing plan to the 2023 rate of the plan to which the member is being mapped.

Columns AG through AP are populated with the February 1, 2022 enrollment by 2023 plan and rating area.

Impact of Non-Payment of Cost Sharing Reduction Subsidies

In accordance with the Department's guidance, we have applied an additional adjustment to our AV pricing values for those Silver plans not offered exclusively off-exchange. This adjustment factor was 1.22 and represents the non-payment of Cost Sharing Reduction subsidies. Consistent with the Department's guidance, this adjustment was reflected in Table 10 in Column P.

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

Table 11 presents the Company's 21-year-old non-tobacco premium in the Individual Market. As mentioned in Section 1.C above, the change in 21-year-old non-tobacco premium PMPM calculated in this table is 13.2%.

5. Plan Factors

A. Age and Tobacco Factors

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

B. Geographic Factors

Please see Table 13 for the Company's geographic factors. The Company's factors for the rating period are unchanged from the currently approved factors.

C. Network Factors

Please see Table 14 for a summary of the Company's network rating factors. The factors presented here represent the medical network factors from the prior approved rate filing (if applicable) and the projected medical network factors for the rating period.

The Company is also transitioning all plans from EPO designs to PPO designs. The anticipated additional cost of this change was estimated to be a 1.25% increase to the medical network factor. The impact was determined based on the following calculation: Net Paid Claims Impact on Facility x Facility as % of Total Medical = 1.92% x 65% = 1.25%.

D. Service Area Composition

The Plan Design Summary exhibit uploaded as a separate document contains the service areas related to this filing. As requested, service area maps are included.

6. Actuarial Certifications

I, [REDACTED], am a member of the American Academy of Actuaries and meet its qualification standards for actuaries issuing statements of actuarial opinions in the United States. All statements in this actuarial certification are accurate to the best of my knowledge and understanding. This filing is prepared in compliance with applicable Actuarial Standards of Practice. In completing this filing, I relied on data/information from other sources which was reviewed for reasonableness. This filing is prepared on behalf of HBG to accompany its rate filing (for calendar year 2023) for the Individual Market on and off the Pennsylvania Exchange.

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

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

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

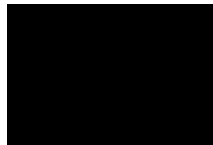
I certify that all factors, benefit and other changes from the prior approved filing have been disclosed in the 2023 PA Actuarial Memorandum Rate Exhibits.

I certify that new plans are not considered modifications of existing plans (per the uniform modification standards in 45 CFR 147.106).

I certify that the AV Metal Values included in Table 10 were based entirely on the Federal AV Calculator or one of the approved alternative approaches.

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

I certify that the information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2023 Rate Filing Justification.



Title: Actuarial Director, Individual Markets

Date: 08/26/2022

Highmark Benefits Group
Individual Market Product Portfolio
Supplemental Exhibits

Attachment A	Change in Morbidity & Non-Morbidity Changes Calculations
Attachment B	Risk Adjustment Calculation
Attachment C	Induced Demand Calculation
Attachment D	Broker Commission Calculation
Attachment E	Change in Demographics Calculation
Attachment F	URRT Average Increase
Attachment G	COVID Adjustment Calculation
Attachment H	MLR Exhibit

Highmark Benefits Group

Individual Market

Attachment A - 'Change in Morbidity' & 'Non-Morbidity Changes' Calculations

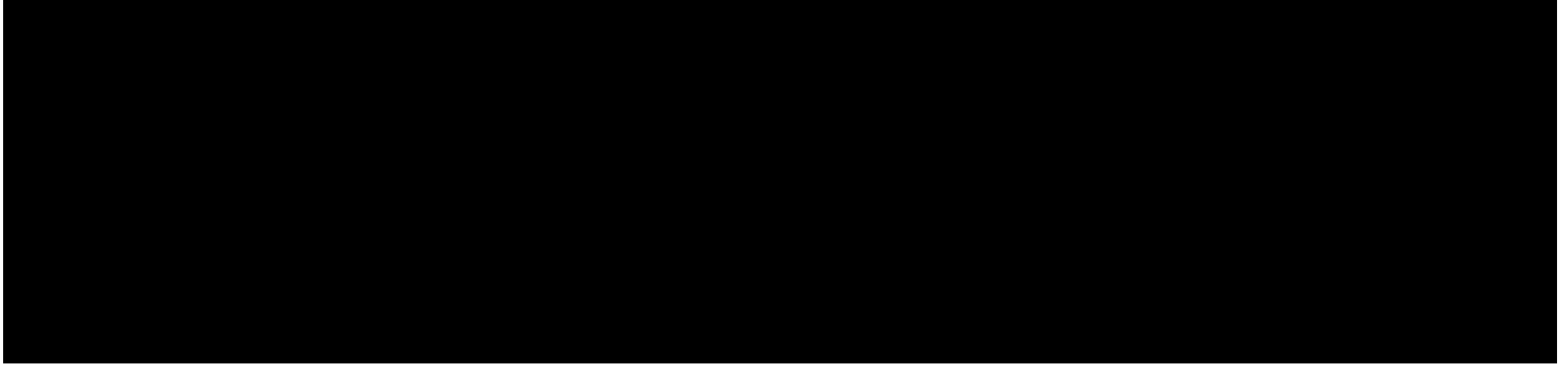
Components of 'Change in Morbidity'	2021 Member Distribution	2021 Normalized Allowed PMPM	2023 Member Distribution	2021 Normalized Allowed PMPM	Morbidity Change Relative to Total
<u>Population Source</u>					
HBG ACA	100.0%	\$337.05	85.0%	\$337.62	1.002
Other Highmark			2.5%	\$414.48	1.230
Prior ACA			0.5%	\$129.00	0.383
New-to-Blue			12.0%	\$337.62	1.002
Morbidity Factor	100.0%	\$337.05	100.0%	\$338.50	1.004
Capitation and Dental Dampening Factor					1.000
Dampened Morbidity Factor					1.004
COVID-19 Adjustment Factor					0.973
Table 5 'Change in Morbidity' Factor					0.977

Components of 'Non-Morbidity Changes'	Factor
CY2021 Demographic Factor	1.939
<u>CY2023 Demographic Factor</u>	<u>1.963</u>
Change in Demographics	1.012
CY2021 Network Factor	0.973
<u>CY2023 Network Factor</u>	<u>0.983</u>
Change in Network	1.010
Change in Benefits	1.000
Change in Other	0.994
Table 5 'Non-Morbidity Changes' Factor	1.016

Highmark Benefits Group

Individual Market

Attachment B - Risk Adjustment Calculation



Highmark Benefits Group

Individual Market

Attachment C - Induced Demand Calculations

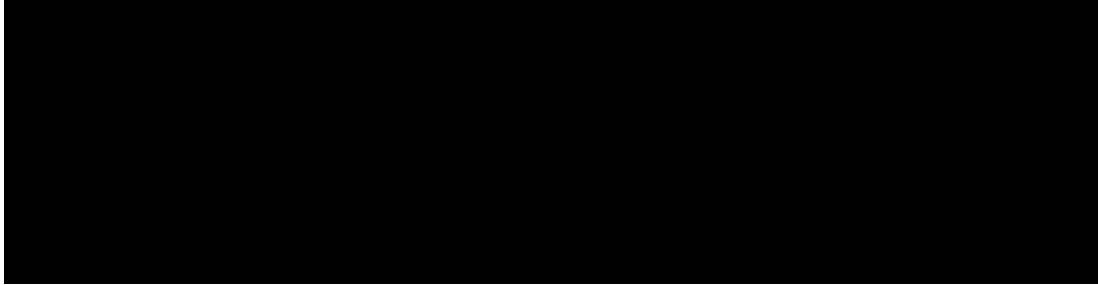
Induced Utilization Exhibit							
Plan ID (1)	Metal Level (2)	Projected Membership (3)	Projected Allowed Claims (4)	Projected Paid Claims (5)	Paid to Allowed Factor (6)	AV & Cost Sharing Factor (7)	(7)/(6) (8)
79962PA0270005	Gold	40,380	\$31,965,348	\$27,482,583	0.860	0.869	1.011
79962PA0280003	Gold	2,904	\$2,442,126	\$2,099,647	0.860	0.869	1.011
79962PA0300002	Gold	28,452	\$23,126,159	\$20,579,378	0.890	0.918	1.031
79962PA0310002	Gold	7,584	\$6,525,901	\$5,807,233	0.890	0.918	1.031
79962PA0290002	Gold	3,840	\$2,978,896	\$2,463,878	0.827	0.819	0.990
79962PA0270004	Silver	1,416	\$1,062,623	\$814,864	0.767	0.735	0.958
79962PA0280002	Silver	432	\$348,087	\$266,928	0.767	0.735	0.958
79962PA0300001	Silver	5,640	\$4,751,681	\$4,470,785	0.941	1.006	1.069
79962PA0310001	Silver	960	\$852,079	\$801,708	0.941	1.006	1.069
79962PA0270003	Silver	39,540	\$31,954,795	\$28,469,744	0.891	0.919	1.032
79962PA0270001	Bronze	29,892	\$21,825,948	\$15,413,917	0.706	0.658	0.932
79962PA0280001	Bronze	3,324	\$2,626,713	\$1,855,037	0.706	0.658	0.932
79962PA0290001	Bronze	8,868	\$6,527,524	\$4,736,333	0.726	0.682	0.940
79962PA0270002	Bronze	3,240	\$2,316,022	\$1,492,323	0.644	0.588	0.913
79962PA0320001	Catastrophic	1,260	\$819,121	\$488,328	0.596	0.538	0.902
Total		177,732	\$140,123,025	\$117,242,685	0.837	0.837	1.000

Components of AV & Cost Sharing Factor					
HIOS Plan ID	Metal Level	Paid-to- Allowed Ratio	Induced Utilization Factor	Avg. Benefit Richness	AV & Cost Sharing Factor
79962PA0270005	Gold	0.860	1.119	1.108	0.869
79962PA0280003	Gold	0.860	1.119	1.108	0.869
79962PA0300002	Gold	0.890	1.142	1.108	0.918
79962PA0310002	Gold	0.890	1.142	1.108	0.918
79962PA0290002	Gold	0.827	1.097	1.108	0.819
79962PA0270004	Silver	0.767	1.061	1.108	0.735
79962PA0280002	Silver	0.767	1.061	1.108	0.735
79962PA0300001	Silver	0.941	1.184	1.108	1.006
79962PA0310001	Silver	0.941	1.184	1.108	1.006
79962PA0270003	Silver	0.891	1.143	1.108	0.919
79962PA0270001	Bronze	0.706	1.033	1.108	0.658
79962PA0280001	Bronze	0.706	1.033	1.108	0.658
79962PA0290001	Bronze	0.726	1.041	1.108	0.682
79962PA0270002	Bronze	0.644	1.011	1.108	0.588
79962PA0320001	Catastrophic	0.596	0.999	1.108	0.538

Highmark Benefits Group

Individual Market

Attachment D - Broker Commission Schedule



Highmark Benefits Group

Individual Market

Attachment E - 'Change in Demographics' Calculation

Table E.1 - Age & Tobacco Factors

Age Band	HHS Age Factor	Tobacco Factor
0	0.765	1.000
1	0.765	1.000
2	0.765	1.000
3	0.765	1.000
4	0.765	1.000
5	0.765	1.000
6	0.765	1.000
7	0.765	1.000
8	0.765	1.000
9	0.765	1.000
10	0.765	1.000
11	0.765	1.000
12	0.765	1.000
13	0.765	1.000
14	0.765	1.000
15	0.833	1.000
16	0.859	1.000
17	0.885	1.000
18	0.913	1.000
19	0.941	1.000
20	0.970	1.000
21	1.000	1.025
22	1.000	1.025
23	1.000	1.025
24	1.000	1.025
25	1.004	1.025
26	1.024	1.025
27	1.048	1.025
28	1.087	1.025
29	1.119	1.025
30	1.135	1.025
31	1.159	1.025
32	1.183	1.025
33	1.198	1.025
34	1.214	1.025
35	1.222	1.025
36	1.230	1.025
37	1.238	1.025
38	1.246	1.025
39	1.262	1.025
40	1.278	1.100
41	1.302	1.105
42	1.325	1.112
43	1.357	1.121
44	1.397	1.132
45	1.444	1.145
46	1.500	1.160
47	1.563	1.177
48	1.635	1.196
49	1.706	1.217
50	1.786	1.225
51	1.865	1.225
52	1.952	1.225
53	2.040	1.225
54	2.135	1.225
55	2.230	1.225
56	2.333	1.225
57	2.437	1.225
58	2.548	1.225
59	2.603	1.225
60	2.714	1.225
61	2.810	1.225
62	2.873	1.225
63	2.952	1.225
64	3.000	1.225

Table E.2 - Experience Period Membership

Membership Mix		
Non-Tobacco	Tobacco	Total
0.32%	0.00%	0.32%
0.26%	0.00%	0.26%
0.20%	0.00%	0.20%
0.17%	0.00%	0.17%
0.20%	0.00%	0.20%
0.30%	0.00%	0.30%
0.29%	0.00%	0.29%
0.24%	0.00%	0.24%
0.25%	0.00%	0.25%
0.28%	0.00%	0.28%
0.26%	0.00%	0.26%
0.29%	0.00%	0.29%
0.29%	0.00%	0.29%
0.37%	0.00%	0.37%
0.33%	0.00%	0.33%
0.42%	0.00%	0.42%
0.54%	0.00%	0.54%
0.54%	0.00%	0.54%
0.46%	0.00%	0.46%
0.90%	0.00%	0.90%
0.89%	0.00%	0.89%
1.01%	0.00%	1.01%
0.90%	0.01%	0.90%
0.89%	0.02%	0.91%
0.81%	0.03%	0.85%
0.78%	0.05%	0.83%
1.65%	0.10%	1.75%
1.39%	0.10%	1.49%
1.21%	0.08%	1.29%
1.21%	0.09%	1.29%
1.26%	0.09%	1.34%
1.27%	0.07%	1.35%
1.10%	0.13%	1.22%
1.23%	0.08%	1.31%
1.21%	0.10%	1.31%
0.97%	0.09%	1.06%
1.13%	0.09%	1.22%
1.08%	0.11%	1.20%
1.09%	0.07%	1.16%
1.09%	0.14%	1.23%
1.20%	0.10%	1.29%
1.24%	0.12%	1.36%
1.24%	0.10%	1.33%
1.18%	0.12%	1.31%
1.19%	0.14%	1.33%
1.39%	0.13%	1.52%
1.40%	0.10%	1.51%
1.63%	0.10%	1.73%
1.60%	0.09%	1.69%
1.80%	0.13%	1.94%
2.14%	0.17%	2.30%
2.17%	0.18%	2.35%
2.28%	0.09%	2.37%
2.41%	0.16%	2.58%
2.61%	0.26%	2.86%
2.49%	0.15%	2.64%
3.10%	0.18%	3.29%
3.26%	0.16%	3.43%
3.51%	0.21%	3.72%
3.42%	0.19%	3.61%
4.36%	0.25%	4.61%
4.42%	0.27%	4.70%
5.34%	0.30%	5.64%
5.82%	0.22%	6.04%
4.17%	0.17%	4.34%
94.45%	5.55%	100.00%

Table E.3 - Projection Period Membership

Membership Mix		
Non-Tobacco	Tobacco	Total
0.19%	0.00%	0.19%
0.27%	0.00%	0.27%
0.27%	0.00%	0.27%
0.22%	0.00%	0.22%
0.20%	0.00%	0.20%
0.23%	0.00%	0.23%
0.30%	0.00%	0.30%
0.31%	0.00%	0.31%
0.32%	0.00%	0.32%
0.30%	0.00%	0.30%
0.34%	0.00%	0.34%
0.28%	0.00%	0.28%
0.34%	0.00%	0.34%
0.29%	0.00%	0.29%
0.43%	0.00%	0.43%
0.38%	0.00%	0.38%
0.51%	0.00%	0.51%
0.51%	0.00%	0.51%
0.62%	0.00%	0.62%
0.64%	0.00%	0.64%
0.84%	0.00%	0.84%
0.95%	0.01%	0.96%
0.94%	0.01%	0.95%
0.84%	0.01%	0.85%
0.86%	0.02%	0.88%
0.74%	0.03%	0.77%
1.16%	0.03%	1.19%
1.46%	0.09%	1.54%
1.29%	0.08%	1.36%
1.16%	0.08%	1.24%
1.17%	0.09%	1.26%
1.21%	0.08%	1.29%
1.38%	0.09%	1.47%
1.02%	0.11%	1.13%
1.22%	0.05%	1.27%
1.29%	0.07%	1.36%
1.12%	0.07%	1.19%
1.07%	0.09%	1.16%
1.13%	0.10%	1.23%
1.12%	0.08%	1.19%
1.08%	0.12%	1.20%
1.21%	0.10%	1.31%
1.32%	0.10%	1.42%
1.30%	0.12%	1.41%
1.13%	0.14%	1.26%
1.22%	0.13%	1.36%
1.38%	0.13%	1.51%
1.51%	0.12%	1.63%
1.67%	0.10%	1.76%
1.60%	0.08%	1.68%
1.90%	0.13%	2.03%
2.12%	0.14%	2.26%
2.21%	0.15%	2.36%
2.48%	0.10%	2.58%
2.48%	0.16%	2.64%
2.69%	0.25%	2.94%
2.76%	0.17%	2.93%
3.11%	0.17%	3.29%
3.36%	0.16%	3.52%
3.65%	0.19%	3.84%
3.82%	0.19%	4.01%
4.70%	0.26%	4.97%
4.95%	0.27%	5.22%
5.87%	0.30%	6.17%
6.35%	0.24%	6.59%
94.76%	5.24%	100.00%

Table E.4 - Area Factors

Rating Area	Experience Period		Projection Period	
	Enrollment	Area Factor	Enrollment	Area Factor
3	100.0%	1.000	100.0%	1.000
Total	100.0%	1.000	100.0%	1.000

Table E.5 - 'Change in Demographics' Calculation

	Experience Period	Projection Period	Change in Demographics
Average Age Factor	1.923	1.947	
Average Tobacco Factor	1.009	1.008	
Average Area Factor	1.000	1.000	
Average Demographic Factor	1.939	1.963	
Capitation Dampening	1.000	1.000	
Final Demographic Factor	1.939	1.963	1.012

Highmark Benefits Group

Individual Market

Attachment F - URRT Average Increase

HIOS Plan ID	URRT Plan Category	URRT Current Enrollment	Current Enrollment in Renewing Plans	Current Avg Rate	Projected Avg Rate	Cumulative Rate Change %
79962PA0190001	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0190005	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0190006	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0190007	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0190009	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0200001	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0200002	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0200003	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0210001	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0220001	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0220002	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0220003	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0220004	Terminated	0	0	\$ -	\$ -	0.00%
79962PA0270001	Renewing	3,680	3,680	\$ 496.41	\$ 561.79	13.17%
79962PA0270002	New	0	0	\$ -	\$ -	0.00%
79962PA0270003	Renewing	3,466	3,466	\$ 695.20	\$ 784.46	12.84%
79962PA0270004	Renewing	117	117	\$ 561.62	\$ 626.94	11.63%
79962PA0270005	Renewing	4,433	4,433	\$ 654.99	\$ 741.51	13.21%
79962PA0280001	Renewing	292	292	\$ 541.24	\$ 608.03	12.34%
79962PA0280002	Renewing	31	31	\$ 606.45	\$ 673.16	11.00%
79962PA0280003	Renewing	300	300	\$ 699.82	\$ 787.72	12.56%
79962PA0290001	Renewing	820	820	\$ 492.57	\$ 581.87	18.13%
79962PA0290002	Renewing	256	256	\$ 617.03	\$ 699.03	13.29%
79962PA0300001	Renewing	622	622	\$ 756.13	\$ 863.65	14.22%
79962PA0300002	Renewing	3,103	3,103	\$ 698.82	\$ 787.99	12.76%
79962PA0310001	Renewing	94	94	\$ 800.96	\$ 909.81	13.59%
79962PA0310002	Renewing	777	777	\$ 743.65	\$ 834.23	12.18%
79962PA0320001	Renewing	107	107	\$ 370.80	\$ 422.23	13.87%
Total		18,098	18,098	\$ 634.65	\$ 718.25	13.17%

Highmark Benefits Group

Individual Market

Attachment G - COVID Adjustment Calculation

	COVID-19 Impact
<u>CY2021 Adjustment</u>	
<u>Category</u>	
Testing	1.2%
COVID Treatment/Care	3.6%
Vaccines	0.7%
<u>Deferred/Rescheduled/Induced Care</u>	<u>(1.6%)</u>
Total Medical Impact	4.0%
<u>Medical Spend as % of Total Spend</u>	<u>82.5%</u>
Total Impact	3.3%
CY2021 Adjustment Factor	0.968
<u>CY2023 Adjustment</u>	
<u>Category</u>	
Testing	0.1%
COVID Treatment/Care	0.7%
Vaccines	0.4%
<u>Deferred/Rescheduled/Induced Care</u>	<u>(0.1%)</u>
Total Medical Impact	1.2%
<u>Medical Spend as % of Total Spend</u>	<u>82.5%</u>
Total Impact	1.0%
<u>Actuarial Judgement - Deferred Care/Treatment</u>	<u>(0.5%)</u>
Total Impact after Actuarial Judgement	0.5%
CY2023 Adjustment Factor	1.005
Total COVID-19 Adjustment Factor	0.973

Highmark Benefits Group

Individual Market

Attachment H - MLR Exhibit

Calendar Year	MLR		Member Months	
	Actual	Pricing	Actual	Pricing
2018	N/A	N/A	0	0
2019	N/A	N/A	0	0
2020	74.0%	85.7%	207,326	230,148
3-yr Total	74.0%	85.7%	207,326	230,148

PA Rate Template Part I
Data Relevant to the Rate Filing

Table 0. Identifying Information

Carrier Name:	HBG		
Product(s):	PPO		
Market Segment:	Individual		
Rate Effective Date:	01/01/2023	to	12/31/2023
Base Period Start Date:	01/01/2021	to	12/31/2021
Date of Most Recent Membership:	02/01/2022		

Table 1. Number of Members

	Member-months	Members	Member-months
	Experience Period	Current Period (as of 02-01-2022)	Projected Rating Period
Average Age	46.4	46.5	46.7
Total	222,999	18,098	177,732
<18	12,370	1,050	10,115
18-24	13,201	1,049	10,183
25-29	14,823	1,192	10,866
30-34	14,590	1,178	11,415
35-39	13,102	1,117	10,917
40-44	14,770	1,187	11,739
45-49	16,704	1,427	14,104
50-54	27,778	2,120	21,110
55-59	37,186	2,955	29,362
60-63	46,796	3,659	36,210
64+	9,679	1,164	11,711

Table 2. Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member & WWS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
\$ 136,684,162.62	\$ 131,357,831.55	\$ 135,948,974.96	222,999	\$ 21,660,482.90	\$ 157,609,457.85	\$ 202,467.59	\$ (10,028,265.03)	\$ 44,599.80	\$ -	\$ 1,064,545.00	\$ 6,782,590.31
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$ 661.09
Loss Ratio											86.52%

*Express Prescription Drug Rebates as a negative number

Table 3. Trend Components

Service Category	Cost*	Utilization*	Induced Demand*	Composite Trend	Weight*
Inpatient Hospital	4.00%	4.57%	0.46%	9.25%	21.94%
Outpatient Hospital	4.00%	4.57%	0.46%	9.25%	36.30%
Professional	4.00%	4.57%	0.46%	9.25%	21.62%
Other Medical	4.00%	4.57%	0.46%	9.25%	2.62%
Capitation				-12.20%	0.03%
Prescription Drugs	4.00%	4.57%	0.46%	9.25%	12.49%
Total Annual Trend				9.24%	100.00%
Months of Trend				24	
Total Applied Trend Projection Factor				1.193	

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

** Should equal URRT Trend

Table 4. Historical Experience

Month-Year	Total Annual Premium	Incurred Claims	Completion Factors*	Ultimate Incurred Claims	Members	Ultimate Incurred PMPM	Estimated Annual Cost Sharing (Member + HHS)	Prescription Drug Rebates**	Allowed Claims (Net of Prescription Drug Rebates)	Allowed PMPM
Jan-18				#DIV/0!		#DIV/0!				#DIV/0!
Feb-18				#DIV/0!		#DIV/0!				#DIV/0!
Mar-18				#DIV/0!		#DIV/0!				#DIV/0!
Apr-18				#DIV/0!		#DIV/0!				#DIV/0!
May-18				#DIV/0!		#DIV/0!				#DIV/0!
Jun-18				#DIV/0!		#DIV/0!				#DIV/0!
Jul-18				#DIV/0!		#DIV/0!				#DIV/0!
Aug-18				#DIV/0!		#DIV/0!				#DIV/0!
Sep-18				#DIV/0!		#DIV/0!				#DIV/0!
Oct-18				#DIV/0!		#DIV/0!				#DIV/0!
Nov-18				#DIV/0!		#DIV/0!				#DIV/0!
Dec-18				#DIV/0!		#DIV/0!				#DIV/0!
Jan-19				#DIV/0!		#DIV/0!				#DIV/0!
Feb-19				#DIV/0!		#DIV/0!				#DIV/0!
Mar-19				#DIV/0!		#DIV/0!				#DIV/0!
Apr-19				#DIV/0!		#DIV/0!				#DIV/0!
May-19				#DIV/0!		#DIV/0!				#DIV/0!
Jun-19				#DIV/0!		#DIV/0!				#DIV/0!
Jul-19				#DIV/0!		#DIV/0!				#DIV/0!
Aug-19				#DIV/0!		#DIV/0!				#DIV/0!
Sep-19				#DIV/0!		#DIV/0!				#DIV/0!
Oct-19				#DIV/0!		#DIV/0!				#DIV/0!
Nov-19				#DIV/0!		#DIV/0!				#DIV/0!
Dec-19				#DIV/0!		#DIV/0!				#DIV/0!
Jan-20		\$ 6,852,003.17	0.9991	\$ 6,857,989.67	17,143	\$ 400.05		\$ (493,077.24)	\$ 8,783,291.83	\$ 512.35
Feb-20		\$ 7,374,533.71	0.9978	\$ 7,391,049.21	17,299	\$ 427.25		\$ (530,188.67)	\$ 9,036,746.78	\$ 522.39
Mar-20		\$ 6,636,279.13	0.9974	\$ 6,653,481.27	17,452	\$ 381.24		\$ (674,443.40)	\$ 7,611,854.42	\$ 436.16
Apr-20		\$ 5,916,571.24	0.9973	\$ 5,932,343.03	17,582	\$ 337.41		\$ (596,372.87)	\$ 6,542,110.65	\$ 372.09
May-20		\$ 6,826,374.63	0.9972	\$ 6,845,639.62	17,638	\$ 388.12		\$ (638,166.51)	\$ 7,449,551.78	\$ 422.36
Jun-20		\$ 8,051,046.09	0.9973	\$ 8,072,981.96	17,663	\$ 457.06		\$ (600,271.38)	\$ 9,011,308.84	\$ 510.18
Jul-20		\$ 8,085,218.90	0.9974	\$ 8,106,139.32	17,522	\$ 462.63		\$ (627,646.30)	\$ 9,058,048.06	\$ 516.95
Aug-20		\$ 7,923,647.76	0.9968	\$ 7,948,961.94	17,149	\$ 463.52		\$ (660,129.19)	\$ 8,729,882.98	\$ 509.06
Sep-20		\$ 7,539,042.02	0.9964	\$ 7,566,384.37	17,154	\$ 441.09		\$ (713,299.71)	\$ 8,228,360.35	\$ 479.68
Oct-20		\$ 9,529,919.66	0.9972	\$ 9,556,652.99	17,048	\$ 560.57		\$ (713,641.99)	\$ 10,285,929.85	\$ 603.35
Nov-20		\$ 8,296,912.88	0.9970	\$ 8,321,787.28	16,942	\$ 493.19		\$ (704,235.72)	\$ 8,898,604.88	\$ 525.24
Dec-20	\$ 127,232,741.89	\$ 9,076,600.78	0.9962	\$ 9,110,986.33	16,734	\$ 544.46	\$ 18,533,354.95	\$ (740,977.95)	\$ 9,569,610.64	\$ 573.87
Jan-21		\$ 7,833,762.76	0.9963	\$ 7,862,639.42	17,666	\$ 445.07		\$ (626,417.67)	\$ 9,436,116.17	\$ 534.14
Feb-21		\$ 8,515,185.05	0.9964	\$ 8,546,247.83	17,864	\$ 478.41		\$ (696,781.67)	\$ 9,766,258.68	\$ 546.70
Mar-21		\$ 11,542,198.01	0.9969	\$ 11,578,361.36	17,796	\$ 650.62		\$ (785,178.98)	\$ 12,889,439.69	\$ 724.29
Apr-21		\$ 10,651,767.99	0.9963	\$ 10,691,127.25	17,942	\$ 595.87		\$ (808,417.76)	\$ 11,763,404.83	\$ 653.52
May-21		\$ 9,607,740.43	0.9971	\$ 9,635,647.17	18,152	\$ 530.83		\$ (761,257.89)	\$ 10,600,329.40	\$ 583.98
Jun-21		\$ 10,492,330.75	0.9965	\$ 10,529,209.00	18,425	\$ 571.46		\$ (838,820.90)	\$ 11,543,272.49	\$ 626.50
Jul-21		\$ 10,571,812.56	0.9951	\$ 10,623,575.31	18,813	\$ 564.69		\$ (823,603.40)	\$ 11,599,287.43	\$ 616.56
Aug-21		\$ 12,097,565.36	0.9927	\$ 12,186,118.75	19,131	\$ 636.98		\$ (912,606.89)	\$ 12,933,068.17	\$ 676.03
Sep-21		\$ 12,704,700.47	0.9898	\$ 12,886,122.26	19,400	\$ 664.23		\$ (865,816.50)	\$ 13,621,084.71	\$ 702.12
Oct-21		\$ 13,421,600.47	0.9593	\$ 13,991,422.41	19,417	\$ 720.58		\$ (913,204.60)	\$ 14,709,245.52	\$ 757.54
Nov-21		\$ 12,202,776.16	0.8898	\$ 13,714,433.17	19,314	\$ 710.08		\$ (956,136.16)	\$ 14,408,954.37	\$ 746.04
Dec-21	\$ 136,684,162.62	\$ 11,716,391.55	0.8550	\$ 13,704,071.02	19,079	\$ 718.28	\$ 21,660,482.90	\$ (1,040,022.63)	\$ 14,312,731.38	\$ 750.18

* Express Completion Factor as a percentage

**Express Prescription Drug Rebates as a negative number

Carrier Name:	HBG
Product(s):	PPO
Market Segment:	Individual
Rate Effective Date:	01/01/2023

Table 2b. Manual Experience Period Claims and Premiums

Earned Premium	Paid Claims	Ultimate Incurred Claims	Member Months	Estimated Cost Sharing (Member + HHS)	Allowed Claims (Non-Capitated)	Non-EHB portion of Allowed Claims	Total Prescription Drug Rebates*	Total EHB Capitation	Total Non-EHB Capitation	Estimated Risk Adjustment	Estimated Reinsurance Recoveries
Experience Period Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates)											\$ -
Loss Ratio											0.00%

*Express Prescription Drug Rebates as a negative number

Table 3b. Manual Trend Components

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

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

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-18				#DIV/0!		#DIV/0!				#DIV/0!
Feb-18				#DIV/0!		#DIV/0!				#DIV/0!
Mar-18				#DIV/0!		#DIV/0!				#DIV/0!
Apr-18				#DIV/0!		#DIV/0!				#DIV/0!
May-18				#DIV/0!		#DIV/0!				#DIV/0!
Jun-18				#DIV/0!		#DIV/0!				#DIV/0!
Jul-18				#DIV/0!		#DIV/0!				#DIV/0!
Aug-18				#DIV/0!		#DIV/0!				#DIV/0!
Sep-18				#DIV/0!		#DIV/0!				#DIV/0!
Oct-18				#DIV/0!		#DIV/0!				#DIV/0!
Nov-18				#DIV/0!		#DIV/0!				#DIV/0!
Dec-18				#DIV/0!		#DIV/0!				#DIV/0!
Jan-19				#DIV/0!		#DIV/0!				#DIV/0!
Feb-19				#DIV/0!		#DIV/0!				#DIV/0!
Mar-19				#DIV/0!		#DIV/0!				#DIV/0!
Apr-19				#DIV/0!		#DIV/0!				#DIV/0!
May-19				#DIV/0!		#DIV/0!				#DIV/0!
Jun-19				#DIV/0!		#DIV/0!				#DIV/0!
Jul-19				#DIV/0!		#DIV/0!				#DIV/0!
Aug-19				#DIV/0!		#DIV/0!				#DIV/0!
Sep-19				#DIV/0!		#DIV/0!				#DIV/0!
Oct-19				#DIV/0!		#DIV/0!				#DIV/0!
Nov-19				#DIV/0!		#DIV/0!				#DIV/0!
Dec-19				#DIV/0!		#DIV/0!				#DIV/0!
Jan-20				#DIV/0!		#DIV/0!				#DIV/0!
Feb-20				#DIV/0!		#DIV/0!				#DIV/0!
Mar-20				#DIV/0!		#DIV/0!				#DIV/0!
Apr-20				#DIV/0!		#DIV/0!				#DIV/0!
May-20				#DIV/0!		#DIV/0!				#DIV/0!
Jun-20				#DIV/0!		#DIV/0!				#DIV/0!
Jul-20				#DIV/0!		#DIV/0!				#DIV/0!
Aug-20				#DIV/0!		#DIV/0!				#DIV/0!
Sep-20				#DIV/0!		#DIV/0!				#DIV/0!
Oct-20				#DIV/0!		#DIV/0!				#DIV/0!
Nov-20				#DIV/0!		#DIV/0!				#DIV/0!
Dec-20				#DIV/0!		#DIV/0!				#DIV/0!
Jan-21				#DIV/0!		#DIV/0!				#DIV/0!
Feb-21				#DIV/0!		#DIV/0!				#DIV/0!
Mar-21				#DIV/0!		#DIV/0!				#DIV/0!
Apr-21				#DIV/0!		#DIV/0!				#DIV/0!
May-21				#DIV/0!		#DIV/0!				#DIV/0!
Jun-21				#DIV/0!		#DIV/0!				#DIV/0!
Jul-21				#DIV/0!		#DIV/0!				#DIV/0!
Aug-21				#DIV/0!		#DIV/0!				#DIV/0!
Sep-21				#DIV/0!		#DIV/0!				#DIV/0!
Oct-21				#DIV/0!		#DIV/0!				#DIV/0!
Nov-21				#DIV/0!		#DIV/0!				#DIV/0!
Dec-21				#DIV/0!		#DIV/0!				#DIV/0!

* Express Completion Factor as a percentage

**Express Prescription Drug Rebates as a negative number

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

Carrier Name:	HBG	Attachment Point:	\$60,000
Product(s):	PPO	Reinsurance Cap:	\$100,000
Market Segment:	Individual	Coinsurance Rate:	53%
Rate Effective Date:	01/01/2023		
Incurred Dates:	1/1/2021 to 12/31/2021	Proj. Incurred Claim Impact:	-4.7%

Individual ACA Compliant Policies Only: Incurred Dates 1/1/2021 to 12/31/2021				
Annual Incurred Claims Range		Unique Members	Member Months	Total Incurred Claims
\$0	\$29,999			\$54,831,819
\$30,000	\$34,999			\$5,035,065
\$35,000	\$39,999			\$4,150,367
\$40,000	\$44,999			\$4,178,136
\$45,000	\$49,999			\$3,405,006
\$50,000	\$54,999			\$3,090,571
\$55,000	\$59,999			\$2,912,152
\$60,000	\$64,999			\$1,836,670
\$65,000	\$69,999			\$2,282,063
\$70,000	\$74,999			\$2,036,778
\$75,000	\$79,999			\$1,771,598
\$80,000	\$84,999			\$1,968,539
\$85,000	\$89,999			\$1,170,635
\$90,000	\$94,999			\$1,659,670
\$95,000	\$99,999			\$1,162,208
\$100,000	\$109,999			\$2,759,996
\$110,000	\$119,999			\$2,441,112
\$120,000	\$129,999			\$1,978,297
\$130,000	\$139,999			\$1,927,340
\$140,000	\$149,999			\$2,206,057
\$150,000	\$159,999			\$1,205,383
\$160,000	\$169,999			\$998,533
\$170,000	\$179,999			\$923,805
\$180,000	\$189,999			\$1,637,973
\$190,000	\$199,999			\$693,263
\$200,000	\$209,999			\$733,391
\$210,000	\$219,999			\$773,396
\$220,000	\$229,999			\$1,016,391
\$230,000	\$239,999			\$1,285,969
\$240,000	\$249,999			\$1,343,556
\$250,000	\$259,999			\$231,273
\$260,000	\$269,999			\$730,281
\$270,000	\$279,999			\$258,237
\$280,000	\$289,999			\$532,683
\$290,000	\$299,999			\$1,094,939
\$300,000	\$324,999			\$590,838
\$325,000	\$349,999			\$971,452
\$350,000	\$374,999			\$681,311
\$375,000	\$399,999			\$1,089,334
\$400,000	\$424,999			\$1,165,223
\$425,000	\$449,999			\$418,131
\$450,000	\$474,999			\$888,704
\$475,000	\$499,999			\$939,078
\$500,000	\$599,999			\$3,137,783
\$600,000	\$699,999			\$0
\$700,000	\$799,999			\$0
\$800,000	\$899,999			\$797,913
\$900,000	\$999,999			\$0
\$1,000,000+				\$1,147,932
Total		23,860	222,999	\$134,422,618
				\$128,090,852

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

Carrier Name:	HBG	Attachment Point:	\$60,000
Product(s):	PPO	Reinsurance Cap:	\$100,000
Market Segment:	Individual	Coinsurance Rate:	53%
Rate Effective Date:	01/01/2023	Proj. Incurred Claim Impact:	-4.8%
		Proj. Morbidity Impact:	0.0%

Reinsurance Program Impact Continuance Table Development - Plan Year 2023				
Annual Incurred Claims Range		Unique Members	Member Months	Total Incurred Claims with Reinsurance
\$0	\$29,999			\$207,213,846
\$30,000	\$34,999			\$16,548,908
\$35,000	\$39,999			\$16,180,752
\$40,000	\$44,999			\$15,006,250
\$45,000	\$49,999			\$12,663,374
\$50,000	\$54,999			\$11,241,777
\$55,000	\$59,999			\$10,767,662
\$60,000	\$64,999			\$9,679,184
\$65,000	\$69,999			\$8,881,265
\$70,000	\$74,999			\$7,973,524
\$75,000	\$79,999			\$9,132,570
\$80,000	\$84,999			\$6,139,517
\$85,000	\$89,999			\$6,124,064
\$90,000	\$94,999			\$5,939,107
\$95,000	\$99,999			\$4,580,410
\$100,000	\$109,999			\$9,699,423
\$110,000	\$119,999			\$7,256,323
\$120,000	\$129,999			\$8,408,241
\$130,000	\$139,999			\$7,607,129
\$140,000	\$149,999			\$6,829,233
\$150,000	\$159,999			\$6,288,434
\$160,000	\$169,999			\$5,725,715
\$170,000	\$179,999			\$4,914,691
\$180,000	\$189,999			\$3,618,958
\$190,000	\$199,999			\$4,346,153
\$200,000	\$209,999			\$4,994,347
\$210,000	\$219,999			\$4,229,354
\$220,000	\$229,999			\$2,865,480
\$230,000	\$239,999			\$3,856,041
\$240,000	\$249,999			\$3,572,337
\$250,000	\$259,999			\$2,799,626
\$260,000	\$269,999			\$3,899,552
\$270,000	\$279,999			\$5,077,477
\$280,000	\$289,999			\$2,378,920
\$290,000	\$299,999			\$1,370,593
\$300,000	\$324,999			\$4,360,225
\$325,000	\$349,999			\$4,800,341
\$350,000	\$374,999			\$6,101,500
\$375,000	\$399,999			\$2,568,296
\$400,000	\$424,999			\$4,639,809
\$425,000	\$449,999			\$5,847,939
\$450,000	\$474,999			\$3,524,417
\$475,000	\$499,999			\$2,780,677
\$500,000	\$599,999			\$7,769,891
\$600,000	\$699,999			\$8,765,860
\$700,000	\$799,999			\$1,442,639
\$800,000	\$899,999			\$0
\$900,000	\$999,999			\$925,387
\$1,000,000+				\$13,031,772
Total		92,098	812,515	\$540,126,138
				\$514,368,992

PA Rate Template Part II

Rate Development and Change

Carrier Name:
Product(s):
Market Segment:
Rate Effective Date:

HBG
PPO
Individual
01/01/2023

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	\$ 661.09	\$ -	<- Actual Experience PMPM should be consistent with the Index Rate for Experien
Two year trend projection Factor	1.193	1.000	
Unadjusted Projected Allowed EHB Claims PMPM	\$ 788.95	\$ -	
<u>Single Risk Pool Adjustment Factors</u>			
Change in Morbidity - Impact of Reinsurance Program	1.000	1.000	
Change in Morbidity - All Other	0.977		<- See URRT Instructions
Total Non-Morbidity Changes	1.016	0.000	
Change in Demographics	1.012		<- See URRT Instructions
Change in Network	1.010		
Change in Benefits	1.000		<- See URRT Instructions
Change in Other	0.994		<- See URRT Instructions
Total Adjusted Projected Allowed EHB Claims PMPM	\$ 783.21	\$ -	
Credibility Factors	100%	0%	<- See Instructions
Blended Projected EHB Claims PMPM		\$ 783.21	<- Projected Index Rate
Development of the Market-Adjusted Index Rate and Total Allowed Claims			
Adjusted Projected Allowed EHB Claims PMPM	\$ 783.21		<- Index Rate for Projection Period on URRT
Projected Paid to Allowed Ratio	0.837		
Projected Incurred EHB Claims PMPM	\$ 655.32		
<u>Market-wide Adjustments</u>			
Projected Incurred Risk Adjustment PMPM	\$ -12.55		<- Market-Adjusted Index Rate
Projected Incurred Exchange User Fees PMPM	\$ 19.06		
Projected Incurred Reinsurance Recoveries PMPM	\$ 31.25		
Market-Adjusted Projected Incurred EHB Claims PMPM	\$ 655.68		
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 783.63		
Projected Allowed Non-EHB Claims PMPM	\$ 5.59		
Market-Adjusted Projected Incurred Total Claims PMPM	\$ 660.36		
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 789.23		

Table 6. Retention

Retention Items - Express in percentages	Percentages	PMPM Amounts
Administrative Expenses	8.07%	\$58.02
General and Claims	6.48%	\$46.55
Agent/Broker Fees and Commissions	0.84%	\$6.00
Quality Improvement Initiatives	0.76%	\$5.46
Taxes and Fees	0.07%	\$0.48
Risk Adjustment User Fee	0.03%	\$0.22
PCORI Fee	0.04%	\$0.26
PA Premium & Other Taxes (if applicable)	0.00%	\$0.00
Federal Income Tax	0.00%	\$0.00
Health Insurance Providers Fee (Prorated for Small Groups only)	0.00%	\$0.00
Profit/Contingency (after tax)	0.00%	\$0.00
Total Retention	8.14%	\$58.50
Projected Required Revenue PMPM	\$ 718.85	

Table 8. Components of Rate Change

Rate Components	2022	2023	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$ 322.94	\$ 365.47	\$ 42.54	13.2%
B. Base period allowed claims before normalization	\$ 512.06	\$ 661.09	\$ 149.03	46.1%
C. Normalization factor component of change	\$ (273.42)	\$ (352.15)	\$ (78.73)	-24.4%
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 238.64	\$ 308.94	\$ 70.30	21.8%
D2. URRT Trend	\$ 44.17	\$ 59.75	\$ 15.58	4.8%
D3. URRT Morbidity	\$ 31.48	\$ (8.46)	\$ (39.94)	-12.4%
D4. URRT Other	\$ 12.65	\$ 5.78	\$ (6.87)	-2.1%
D5. Normalized URRT Risk Adjustment on an allowed basis	\$ 6.73	\$ 7.01	\$ 0.28	0.1%
D6. Normalized Exchange User Fee on an allowed basis	\$ 9.55	\$ 10.64	\$ 1.09	0.3%
D7. Normalized Reinsurance Recoveries on an allowed basis	\$ (22.23)	\$ (17.45)	\$ 4.78	1.5%
D8. Subtotal - Sum(D1:D7)	\$ 320.99	\$ 366.21	\$ 45.22	14.0%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ (8.46)	\$ (6.08)	\$ 2.38	0.7%
E2. Pricing AV	\$ (48.44)	\$ (60.20)	\$ (11.76)	-3.6%
E3. Benefit Richness	\$ 30.04	\$ 32.15	\$ 2.11	0.7%
E4. Catastrophic Eligibility	\$ (0.14)	\$ (0.16)	\$ (0.02)	0.0%
E5. Subtotal - Sum(E1:E4)	\$ (27.00)	\$ (34.29)	\$ (7.29)	-2.3%
F. Change in Retention Components				
F1. Administrative Expenses	\$ 26.35	\$ 29.50	\$ 3.15	1.0%
F2. Taxes and Fees	\$ 0.25	\$ 0.24	\$ (0.01)	0.0%
F3. Profit and/or Contingency	\$ -	\$ -	\$ -	0.0%
F4. Subtotal - Sum(F1:F3)	\$ 26.60	\$ 29.74	\$ 3.14	1.0%
G. Change in Miscellaneous Items	\$ 2.35	\$ 3.81	\$ 1.46	0.5%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 322.94	\$ 365.47	\$ 42.54	13.2%

ice Period on URR1

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 661.09	<- Index Rate of Experience Period on URRT
Blended Earned Premium	\$ 136,684,162.62	
Blended Loss Ratio	86.52%	

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

Effective Date	01/01/2023	04/01/2023	07/01/2023	10/01/2023	Total Single Risk Pool
# of Member Months Renewing in Quarter					-
Adjusted Projected Allowed EHB Claims PMPM	\$ 783.21	\$ 783.21	\$ 783.21	\$ 783.21	\$ 783.21
Months of Trend	-	3	6	9	
Annual Trend	9.24%	9.24%	9.24%	9.24%	
Single Risk Pool Projected Allowed Claims	\$ 783.21	\$ 800.71	\$ 818.60	\$ 836.90	\$ -
Quarterly Trend Factor	1.000	1.022	1.045	1.069	0.000

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2022	2023
Average Age Factor	1.960	1.948
Average Geographic Factor	1.000	1.000
Average Tobacco Factor	1.009	1.008
Average Benefit Richness (induced demand)	1.115	1.108
Average Network Factor	0.974	0.983
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 694.08	\$ 789.23
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 323.46	\$ 368.82

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

	2022	2023	
Paid-to-Allowed	0.847	0.837	
URRT Trend (Total Applied Trend Factor)	1.185	1.193	<- URRT W1, S2
URRT Morbidity	1.111	0.977	<- URRT W1, S2
URRT "Other"	1.040	1.016	<- URRT W1, S2
Risk Adjustment	\$ 12.24	\$ 12.55	<- URRT W1, S3
Exchange User Fee	\$ 17.35	\$ 19.06	<- URRT W1, S3
Reinsurance Recoveries	\$ 40.40	\$ 31.25	<- URRT W1, S3
Capitation	\$ 0.15	\$ 0.15	<- URRT W1, S2
Network	0.974	0.983	
Pricing AV	0.845	0.833	<- For 2022 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	1.114	1.107	
Catastrophic Eligibility	1.000	1.000	
Administrative Expenses	8.16%	8.07%	
Taxes and Fees	0.08%	0.07%	
Profit and/or Contingency	0.00%	0.00%	

PA Rate Template Part III
Table 10. Plan Rates

Carrier Name: HBG
Product(s): PPO
Market Segment: Individual
Rate Effective Date: 01/01/2023
Base Period Start Date: 01/01/2021
Date of Most Recent Membership: 02/01/2022
Market Adjusted Index Rate: \$ 783.63

Date of Most Recent Membership: Market Adjusted Index Rate:											45 CFR Part 156.8 (d) (2) Allowable Factors						
02/01/2022 \$ 783.63																	
Plan Number	HIOS Plan ID (Standard Component)	Product Type (HMO, POS, PPO, EPO, Indemnity, Other)	1/1/2022 Plan Marketing Name	Existing, Modified, New, Discontinued & Mapped, Discontinued & Not Mapped (E,M,N,DM, DNM) for 2023	1/1/2023 HIOS Plan ID (If 1/1/2022 Plan Discontinued & Mapped)	Metallic Tier	Metallic Tier Actuarial Value	Standard AV, Approach (1), Approach (2)	Exchange On/Off or Off	Pricing AV (company-determined AV)	Benefit Richness (induced demand)	Benefits in addition to EHB	Provider Network	Catastrophic Eligibility	Non-Funding of CSR Adjustment	Pure Premium	
Totals - Current Membership							0.733			0.833	1.000	1.007	1.000	1.000	1.051	\$ 659.62	
Total - Projected Membership							0.731			0.833	1.000	1.007	1.000	0.999	1.057	\$ 660.02	
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		
Plan 1	79962PA0190001	EPO	my Priority Blue Flex EPO Bronze 3800	DM	79962PA0270001	Bronze	0.647	Approach (2)	On/Off	0.706	0.932	1.000	1.000	1.000	1.000	\$515.93	
Plan 2	79962PA0190005	EPO	my Priority Blue Flex EPO Silver 2900	DM	79962PA0300001	Silver	0.716	Approach (1)	On/Off	0.771	1.069	1.006	1.000	1.000	1.220	\$793.12	
Plan 3	79962PA0190007	EPO	my Priority Blue Flex EPO Gold 0	DM	79962PA0270005	Gold	0.786	Approach (1)	On/Off	0.860	1.011	1.000	1.000	1.000	1.000	\$680.97	
Plan 4	79962PA0190009	EPO	my Priority Blue Flex EPO Silver 2600	DM	79962PA0270004	Silver	0.718	Approach (1)	Off	0.767	0.958	1.000	1.000	1.000	1.000	\$575.78	
Plan 5	79962PA0200001	EPO	my Priority Blue Flex EPO Bronze 6900 HSA	DM	79962PA0290001	Bronze	0.644	Standard AV	On/Off	0.726	0.940	1.000	1.000	1.000	1.000	\$534.38	
Plan 6	79962PA0200002	EPO	my Priority Blue Flex EPO Silver 3250 HSA	DM	79962PA0270003	Silver	0.701	Approach (1)	On/Off	0.730	1.032	1.000	1.000	1.000	1.220	\$720.42	
Plan 7	79962PA0200004	EPO	my Priority Blue Flex EPO Gold 1400 HSA	DM	79962PA0290002	Gold	0.781	Approach (1)	On/Off	0.827	0.990	1.000	1.000	1.000	1.000	\$641.98	
Plan 8	79962PA0210001	EPO	my Priority Blue Major Events EPO 8700 - 3 Free PCP Visits	DM	79962PA0320001	Catastrophic	0.575	Standard AV	On/Off	0.596	0.902	1.000	1.000	0.920	1.000	\$387.77	
Plan 9	79962PA0220001	EPO	my Priority Blue Flex EPO Bronze 3800 + Adult Dental and Vision	DM	79962PA0280001	Bronze	0.647	Approach (2)	On/Off	0.706	0.932	1.082	1.000	1.000	1.000	\$558.38	
Plan 10	79962PA0220002	EPO	my Priority Blue Flex EPO Silver 2900 + Adult Dental and Vision	DM	79962PA0310001	Silver	0.716	Approach (1)	On/Off	0.771	1.069	1.060	1.000	1.000	1.220	\$835.57	
Plan 11	79962PA0220003	EPO	my Priority Blue Flex EPO Silver 2600 + Adult Dental and Vision	DM	79962PA0280002	Silver	0.718	Approach (1)	Off	0.767	0.958	1.074	1.000	1.000	1.000	\$618.23	
Plan 12	79962PA0220005	EPO	my Priority Blue Flex EPO Gold 0 + Adult Dental and Vision	DM	79962PA0280003	Gold	0.786	Approach (1)	On/Off	0.860	1.011	1.062	1.000	1.000	1.000	\$723.41	
Plan 13	79962PA0230001	EPO	my Priority Blue Flex EPO Premier Gold 0	DM	79962PA0300002	Gold	0.81	Approach (1)	On/Off	0.890	1.031	1.006	1.000	1.000	1.000	\$723.70	
Plan 14	79962PA0240001	EPO	my Priority Blue Flex EPO Premier Gold 0 + Adult Dental and Vision	DM	79962PA0310002	Gold	0.81	Approach (1)	On/Off	0.890	1.031	1.066	1.000	1.000	1.000	\$766.14	
Plan 15	79962PA0270002	PPO		N		Bronze	0.599	Approach (2)	On/Off	0.644	0.913	1.000	1.000	1.000	1.000	\$460.84	

Total Covered Lives @ 02-01-2022	18,098
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Total Covered Lives Mapped into 2023 Plans @ 02-01- 2022	Total Projected Lives
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18,098	14,811
-	-
3,680	2,491
622	470
4,433	3,365
117	118
820	739
3,466	3,295
256	320
107	105
292	277
94	80
31	36
300	242
3,103	2,371
777	632
-	270

Proposed Rate Change Compared to Prior 12 months
13.2%
N/A
13.2%
14.2%
13.2%
11.6%
18.1%
12.8%
13.3%
13.9%
12.3%
13.6%
11.0%
12.6%
12.8%
12.2%
0.0%

% of Total Covered Lives
N/A
20.3%
3.4%
24.5%
0.6%
4.5%
19.2%
1.4%
0.6%
1.6%
0.5%
0.2%
1.7%
17.1%
4.3%
0.0%

[illegible]

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

HBG
PPO
Individual
01/01/2023

Totals	These cells auto-fill using the data entered in Table 10.
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[illegible]

PA Rate Quarterly Template Part V Consumer Factors

Carrier Name:	HBG
Product(s):	PPO
Market Segment:	Individual
Rate Effective Date:	01/01/2023

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	1.100
15	0.833			41	1.302	1.105
16	0.859			42	1.325	1.112
17	0.885			43	1.357	1.121
18	0.913			44	1.397	1.132
19	0.941			45	1.444	1.145
20	0.970			46	1.500	1.160
21	1.000	1.025		47	1.563	1.177
22	1.000	1.025		48	1.635	1.196
23	1.000	1.025		49	1.706	1.217
24	1.000	1.025		50	1.786	1.225
25	1.004	1.025		51	1.865	1.225
26	1.024	1.025		52	1.952	1.225
27	1.048	1.025		53	2.040	1.225
28	1.087	1.025		54	2.135	1.225
29	1.119	1.025		55	2.230	1.225
30	1.135	1.025		56	2.333	1.225
31	1.159	1.025		57	2.437	1.225
32	1.183	1.025		58	2.548	1.225
33	1.198	1.025		59	2.603	1.225
34	1.214	1.025		60	2.714	1.225
35	1.222	1.025		61	2.810	1.225
36	1.230	1.025		62	2.873	1.225
37	1.238	1.025		63	2.952	1.225
38	1.246	1.025		64+	3.000	1.225
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		0.000	0.000
Rating Area 2		0.000	0.000
Rating Area 3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming	1.000	1.000
Rating Area 4		0.000	0.000
Rating Area 5		0.000	0.000
Rating Area 6		0.000	0.000
Rating Area 7		0.000	0.000
Rating Area 8		0.000	0.000
Rating Area 9		0.000	0.000

Table 14. Network Factors

[illegible]

Company Name: Highmark Benefits Group
 Market: Individual
 Product: PPO
 Effective Date of Rates: January 1, 2023

Ending date of Rates: December 31, 2023

HIOS Plan ID (On Exchange)=>	79962PA0270005	79962PA0280003	79962PA0300002	79962PA0310002	79962PA0290002	N/A
HIOS Plan ID (Off Exchange)=>	79962PA0270005	79962PA0280003	79962PA0300002	79962PA0310002	79962PA0290002	79962PA0270004
Plan Marketing Name =>	my Priority Blue Flex PPO Gold 0	my Priority Blue Flex PPO Gold 0 + Adult Dental and Vision	my Priority Blue Flex PPO Premier Gold 0	my Priority Blue Flex PPO Premier Gold 0 + Adult Dental and Vision	my Priority Blue Flex PPO Gold 1700 HSA	my Priority Blue Flex PPO Silver 3500
Form # =>	PPO/HBG/DP	PPO/ADV/HBG/DP	PPO/ADV/HBG/DP	PPO/Premier/ADV/HBG/DP	PPO/HDHP/HBG/DP	PPO/HBG/DP
Rating Area =>	Area 3	Area 3	Area 3	Area 3	Area 3	Area 3
Network =>	U	U	U	U	U	U
Metal =>	Gold	Gold	Gold	Gold	Gold	Silver
Deductible =>	\$0	\$0	\$0	\$0	\$1,700	\$3,500
Coinsurance =>	70%	70%	80%	80%	80%	70%
Copays =>	\$20 PCP	\$20 PCP	\$15 PCP	\$15 PCP	\$520 A/D PCP	\$40 PCP
OOP Maximum =>	\$7,500	\$7,500	\$6,500	\$6,500	\$5,700	\$9,100
Pediatric Dental (Yes/No) =>	Yes	Yes	Yes	Yes	Yes	Yes
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$288.63	\$288.63	\$306.63	\$306.63	\$324.73	\$324.73
15	\$314.29	\$314.29	\$333.88	\$333.88	\$353.60	\$353.60
16	\$324.10	\$324.10	\$344.30	\$344.30	\$364.64	\$364.64
17	\$333.91	\$333.91	\$354.73	\$354.73	\$375.67	\$375.67
18	\$344.47	\$344.47	\$365.95	\$365.95	\$387.56	\$387.56
19	\$355.04	\$355.04	\$377.17	\$377.17	\$399.45	\$399.45
20	\$365.98	\$365.98	\$388.80	\$388.80	\$411.76	\$411.76
21	\$377.30	\$377.30	\$400.82	\$400.82	\$424.49	\$424.49
22	\$377.30	\$377.30	\$400.82	\$400.82	\$435.10	\$435.10
23	\$377.30	\$377.30	\$400.82	\$400.82	\$446.14	\$446.14
24	\$377.30	\$377.30	\$400.82	\$400.82	\$457.19	\$457.19
25	\$378.81	\$378.81	\$402.42	\$402.42	\$468.24	\$468.24
26	\$386.36	\$386.36	\$410.44	\$410.44	\$479.29	\$479.29
27	\$395.41	\$395.41	\$420.60	\$420.60	\$490.34	\$490.34
28	\$410.13	\$410.13	\$435.69	\$435.69	\$501.39	\$501.39
29	\$422.20	\$422.20	\$448.52	\$448.52	\$512.44	\$512.44
30	\$428.24	\$428.24	\$454.93	\$454.93	\$523.49	\$523.49
31	\$437.29	\$437.29	\$464.55	\$464.55	\$534.54	\$534.54
32	\$446.35	\$446.35	\$474.17	\$474.17	\$545.59	\$545.59
33	\$452.01	\$452.01	\$480.18	\$480.18	\$556.64	\$556.64
34	\$458.04	\$458.04	\$486.60	\$486.60	\$567.69	\$567.69
35	\$461.06	\$461.06	\$489.80	\$489.80	\$578.74	\$578.74
36	\$464.08	\$464.08	\$493.01	\$493.01	\$589.79	\$589.79
37	\$467.10	\$467.10	\$496.22	\$496.22	\$600.84	\$600.84
38	\$470.12	\$470.12	\$499.42	\$499.42	\$611.89	\$611.89
39	\$476.15	\$476.15	\$505.83	\$505.83	\$622.94	\$622.94
40	\$482.19	\$482.19	\$512.25	\$512.25	\$633.99	\$633.99
41	\$491.24	\$491.24	\$521.87	\$521.87	\$645.04	\$645.04
42	\$499.92	\$499.92	\$531.09	\$531.09	\$656.09	\$656.09
43	\$512.00	\$512.00	\$543.91	\$543.91	\$667.14	\$667.14
44	\$527.09	\$527.09	\$559.67	\$559.67	\$678.19	\$678.19
45	\$544.82	\$544.82	\$578.78	\$578.78	\$689.24	\$689.24
46	\$565.95	\$565.95	\$601.23	\$601.23	\$700.29	\$700.29
47	\$589.72	\$589.72	\$626.48	\$626.48	\$711.34	\$711.34
48	\$616.89	\$616.89	\$655.34	\$655.34	\$722.39	\$722.39
49	\$643.67	\$643.67	\$683.80	\$683.80	\$733.44	\$733.44
50	\$673.86	\$673.86	\$715.86	\$715.86	\$744.49	\$744.49
51	\$703.66	\$703.66	\$747.53	\$747.53	\$755.54	\$755.54
52	\$736.49	\$736.49	\$782.40	\$782.40	\$766.59	\$766.59
53	\$769.69	\$769.69	\$817.67	\$817.67	\$777.64	\$777.64
54	\$805.54	\$805.54	\$855.75	\$855.75	\$788.69	\$788.69
55	\$841.38	\$841.38	\$893.83	\$893.83	\$799.74	\$799.74
56	\$880.24	\$880.24	\$935.11	\$935.11	\$810.79	\$810.79
57	\$919.48	\$919.48	\$976.80	\$976.80	\$821.84	\$821.84
58	\$961.36	\$961.36	\$1,021.29	\$1,021.29	\$832.89	\$832.89
59	\$982.11	\$982.11	\$1,043.33	\$1,043.33	\$843.94	\$843.94
60	\$1,023.99	\$1,023.99	\$1,087.83	\$1,087.83	\$854.99	\$854.99
61	\$1,060.21	\$1,060.21	\$1,126.30	\$1,126.30	\$866.04	\$866.04
62	\$1,083.98	\$1,083.98	\$1,151.56	\$1,151.56	\$877.09	\$877.09
63	\$1,113.79	\$1,113.79	\$1,183.22	\$1,183.22	\$888.14	\$888.14
64+	\$1,131.90	\$1,131.90	\$1,202.46	\$1,202.46	\$899.19	\$899.19

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

HIOS Plan ID (On Exchange)=>	N/A		79962PA0300001		79962PA0310001		79962PA0270003		79962PA0270001		79962PA0280001		79962PA0290001		79962PA0270002		79962PA0320001	
HIOS Plan ID (Off Exchange)=>	79962PA0280002		79962PA0300001		79962PA0310001		79962PA0270003		79962PA0270001		79962PA0280001		79962PA0290001		79962PA0270002		79962PA0320001	
Plan Marketing Name =>	my Priority Blue Flex PPO Silver 3500 + Adult Dental and Vision		my Priority Blue Flex PPO Premier Silver 2900		my Priority Blue Flex PPO Premier Silver 2900 + Adult Dental and Vision		my Priority Blue Flex PPO Silver 5900		my Priority Blue Flex PPO Bronze 3800		my Priority Blue Flex PPO Bronze 3800 + Adult Dental and Vision		my Priority Blue Flex PPO Bronze 6900 HSA - Custom Drug Benefit		my Priority Blue Flex PPO Bronze 8900		my Priority Blue Major Events PPO Catastrophic 9100 - 3 Free PCP Visits	
Form # =>	PPO/ADV/HBG/DP		PPO/Premier/HBG/DP		PPO/Premier/ADV/HBG/DP		PPO/HBG/DP		PPO/HBG/DP		PPO/ADV/HBG/DP		PPO/HDHP/HBG/DP		PPO/HBG/DP		CAT/PPO/HBG/DP	
Rating Area =>	Area 3		Area 3		Area 3		Area 3		Area 3		Area 3		Area 3		Area 3		Area 3	
Network =>	U		U		U		U		U		U		U		U		U	
Metal =>	Silver		Silver		Silver		Silver		Bronze		Bronze		Bronze		Bronze		Catastrophic	
Deductible =>	\$3,500		\$2,900		\$2,900		\$5,900		\$3,800		\$3,800		\$6,900		\$8,900		\$9,100	
Coinsurance =>	70%		70%		70%		70%		50%		50%		100%		100%		100%	
Copays =>	\$40 PCP		\$75 PCP		\$75 PCP		\$55 PCP		\$65 PCP		\$65 PCP		N/A		N/A		\$0 (Visits 1-3); then subject to	
OOP Maximum =>	\$9,100		\$7,800		\$7,800		\$9,100		\$9,100		\$9,100		\$6,900		\$8,900		\$9,100	
Pediatric Dental (Yes/No) =>	Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes	
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$262.04	\$262.04	\$336.18	\$336.18	\$354.16	\$354.16	\$305.36	\$305.36	\$218.68	\$218.68	\$236.68	\$236.68	\$226.51	\$226.51	\$195.34	\$195.34	\$164.36	\$164.36
15	\$285.34	\$285.34	\$366.06	\$366.06	\$385.65	\$385.65	\$332.50	\$332.50	\$238.12	\$238.12	\$257.71	\$257.71	\$246.64	\$246.64	\$212.70	\$212.70	\$178.97	\$178.97
16	\$294.24	\$294.24	\$377.49	\$377.49	\$397.68	\$397.68	\$342.88	\$342.88	\$245.55	\$245.55	\$265.76	\$265.76	\$254.34	\$254.34	\$219.34	\$219.34	\$184.56	\$184.56
17	\$303.15	\$303.15	\$388.91	\$388.91	\$409.72	\$409.72	\$353.26	\$353.26	\$252.99	\$252.99	\$273.80	\$273.80	\$262.04	\$262.04	\$225.98	\$225.98	\$190.14	\$190.14
18	\$312.74	\$312.74	\$401.22	\$401.22	\$422.68	\$422.68	\$364.43	\$364.43	\$260.99	\$260.99	\$282.46	\$282.46	\$270.33	\$270.33	\$233.13	\$233.13	\$196.16	\$196.16
19	\$322.33	\$322.33	\$413.52	\$413.52	\$435.65	\$435.65	\$375.61	\$375.61	\$268.99	\$268.99	\$291.13	\$291.13	\$278.62	\$278.62	\$240.27	\$240.27	\$202.17	\$202.17
20	\$332.26	\$332.26	\$426.27	\$426.27	\$449.07	\$449.07	\$387.19	\$387.19	\$277.28	\$277.28	\$300.10	\$300.10	\$287.21	\$287.21	\$247.68	\$247.68	\$208.40	\$208.40
21	\$342.54	\$351.10	\$439.45	\$450.44	\$462.96	\$474.53	\$399.16	\$409.14	\$285.86	\$293.01	\$309.38	\$317.11	\$296.09	\$303.49	\$255.34	\$261.72	\$214.85	\$220.22
22	\$342.54	\$351.10	\$439.45	\$450.44	\$462.96	\$474.53	\$399.16	\$409.14	\$285.86	\$293.01	\$309.38	\$317.11	\$296.09	\$303.49	\$255.34	\$261.72	\$214.85	\$220.22
23	\$342.54	\$351.10	\$439.45	\$450.44	\$462.96	\$474.53	\$399.16	\$409.14	\$285.86	\$293.01	\$309.38	\$317.11	\$296.09	\$303.49	\$255.34	\$261.72	\$214.85	\$220.22
24	\$342.54	\$351.10	\$439.45	\$450.44	\$462.96	\$474.53	\$399.16	\$409.14	\$285.86	\$293.01	\$309.38	\$317.11	\$296.09	\$303.49	\$255.34	\$261.72	\$214.85	\$220.22
25	\$343.91	\$352.51	\$441.21	\$452.24	\$464.81	\$476.43	\$400.76	\$410.78	\$287.00	\$294.18	\$310.62	\$318.39	\$297.27	\$304.70	\$256.36	\$262.77	\$215.71	\$221.10
26	\$350.76	\$359.53	\$450.00	\$461.25	\$474.07	\$485.92	\$408.74	\$418.96	\$292.72	\$300.04	\$316.81	\$324.73	\$303.20	\$310.78	\$261.47	\$268.01	\$220.01	\$225.51
27	\$358.98	\$367.95	\$460.54	\$472.05	\$485.18	\$497.31	\$418.32	\$428.78	\$299.58	\$307.07	\$324.23	\$332.34	\$310.30	\$318.06	\$267.60	\$274.29	\$225.16	\$230.79
28	\$372.34	\$381.65	\$477.68	\$489.62	\$503.24	\$515.82	\$433.89	\$444.74	\$310.73	\$318.50	\$336.30	\$344.71	\$321.85	\$329.90	\$277.55	\$284.49	\$233.54	\$239.38
29	\$383.30	\$392.88	\$491.74	\$504.03	\$518.05	\$531.00	\$446.66	\$457.83	\$319.88	\$327.88	\$346.20	\$354.86	\$331.32	\$339.60	\$285.73	\$292.87	\$240.42	\$246.43
30	\$388.78	\$398.50	\$498.78	\$511.25	\$525.46	\$538.60	\$453.05	\$464.38	\$324.45	\$332.56	\$351.15	\$359.93	\$336.06	\$344.46	\$289.81	\$297.06	\$243.85	\$249.95
31	\$397.00	\$406.93	\$509.32	\$522.05	\$536.57	\$549.98	\$462.63	\$474.20	\$331.31	\$339.59	\$358.57	\$367.53	\$343.17	\$351.75	\$295.94	\$303.34	\$249.01	\$255.24
32	\$405.22	\$415.35	\$519.87	\$532.87	\$547.68	\$561.37	\$472.21	\$484.02	\$338.17	\$346.62	\$366.00	\$375.15	\$350.27	\$359.03	\$302.07	\$309.62	\$254.17	\$260.52
33	\$410.36	\$420.62	\$526.46	\$539.62	\$554.63	\$568.50	\$478.19	\$490.14	\$342.46	\$351.02	\$370.64	\$379.91	\$354.72	\$363.59	\$305.90	\$313.55	\$257.39	\$263.82
34	\$415.84	\$426.24	\$533.49	\$546.83	\$562.03	\$576.08	\$484.58	\$496.69	\$347.03	\$355.71	\$375.59	\$384.98	\$359.45	\$368.44	\$309.98	\$317.73	\$260.83	\$267.35
35	\$418.58	\$429.04	\$537.01	\$550.44	\$565.74	\$579.88	\$487.77	\$499.96	\$349.32	\$358.05	\$378.06	\$387.51	\$361.82	\$370.87	\$312.03	\$319.83	\$262.55	\$269.11
36	\$421.32	\$431.85	\$540.52	\$554.03	\$569.44	\$583.68	\$490.97	\$503.24	\$351.61	\$360.40	\$380.54	\$390.05	\$364.19	\$373.29	\$314.07	\$321.92	\$264.27	\$270.88
37	\$424.06	\$434.66	\$544.04	\$557.64	\$573.14	\$587.47	\$494.16	\$506.51	\$353.89	\$362.74	\$383.01	\$392.59	\$366.56	\$375.72	\$316.11	\$324.01	\$265.98	\$272.63
38	\$426.80	\$437.47	\$547.55	\$561.24	\$576.85	\$591.27	\$497.35	\$509.78	\$356.18	\$365.08	\$385.49	\$395.13	\$368.93	\$378.15	\$318.15	\$326.10	\$267.70	\$274.39
39	\$432.29	\$443.10	\$554.59	\$568.45	\$584.26	\$598.87	\$503.74	\$516.33	\$360.76	\$369.78	\$390.44	\$400.20	\$373.67	\$383.01	\$322.24	\$330.30	\$271.14	\$277.92
40	\$437.77	\$448.55	\$561.62	\$575.78	\$591.66	\$605.83	\$510.13	\$522.71	\$365.33	\$374.06	\$401.86	\$412.61	\$385.93	\$396.24	\$326.32	\$334.45	\$274.58	\$281.30
41	\$445.99	\$457.82	\$572.16	\$586.24	\$602.77	\$617.06	\$519.71	\$532.29	\$372.19	\$380.92	\$411.27	\$402.81	\$385.51	\$395.92	\$332.45	\$340.61	\$279.73	\$286.51
42	\$453.87	\$465.80	\$582.27	\$596.33	\$612.42	\$626.61	\$528.89	\$542.08	\$378.76	\$387.51	\$413.18	\$409.93	\$392.32	\$396.29	\$338.33	\$346.22	\$284.68	\$291.46
43	\$464.83	\$476.86	\$596.33	\$608.49	\$626.24	\$642.76	\$541.66	\$556.03	\$387.91	\$394.85	\$419.83	\$407.63	\$391.79	\$396.51	\$346.50	\$354.66	\$291.55	\$300.73
44	\$478.53	\$491.70	\$613.91	\$628.08	\$644.25	\$660.52	\$557.63	\$572.00	\$399.35	\$408.10	\$429.05	\$437.80	\$404.63	\$413.38	\$356.71	\$365.87	\$300.15	\$309.37
45	\$494.63	\$508.96	\$634.57	\$649.92	\$666.19	\$682.66	\$576.44	\$592.00	\$412.78	\$421.53	\$442.63	\$446.74	\$418.13	\$426.88	\$368.71	\$377.46	\$310.24	\$319.49
46	\$513.81	\$529.24	\$659.18	\$674.65	\$694.44	\$710.05	\$598.74	\$614.54	\$428.79	\$437.54	\$458.07	\$466.82	\$433.52	\$442.27	\$383.01	\$391.76	\$322.28	\$331.03
47	\$535.39	\$551.92	\$686.86	\$703.49	\$723.61	\$739.22	\$623.89	\$639.74	\$446.80	\$455.55	\$476.07	\$484.82	\$451.52	\$460.27	\$399.10	\$407.85	\$335.81	\$344.56
48	\$560.05	\$577.68	\$718.50	\$736.13	\$756.94	\$773.57	\$652.63	\$669.56	\$467.38	\$476.13	\$496.40	\$505.15	\$471.85	\$480.60	\$417.48	\$426.23	\$351.28	\$360.03
49	\$584.37	\$602.00	\$749.70	\$767.33	\$789.81	\$807.62	\$680.97	\$698.74	\$487.68	\$496.43	\$516.45	\$525.20	\$491.95	\$500.70	\$435.61	\$444.36	\$366.53	\$375.28
50	\$611.78	\$630.41	\$784.86	\$803.49	\$818.12	\$836.75	\$712.90	\$731.53	\$510.55	\$520.18	\$539.80	\$549.43	\$515.13	\$524.76	\$456.04	\$465.67	\$383.72	\$393.35
51	\$638.84	\$658.47	\$819.57	\$839.20	\$858.83	\$878.46	\$744.43	\$764.06	\$533.13	\$542.76	\$562.39	\$572.02	\$537.72	\$547.35	\$476.21	\$485.84	\$400.70	\$410.33
52	\$668.64	\$689.27	\$857.81	\$878.44	\$899.07	\$919.70	\$779.16	\$799.79	\$558.00	\$568.63	\$588.26	\$598.89	\$563.59	\$574.22	\$498.42	\$508.05	\$419.39	\$429.02
53	\$698.78	\$719.41	\$886.48	\$907.11	\$927.74	\$948.37	\$804.29	\$824.92	\$583.15	\$593.78	\$613.41	\$624.04	\$588.13	\$598.76	\$520.89	\$531.52	\$438.29	\$448.92
54	\$731.32	\$752.95	\$938.23	\$958.86	\$979.49	\$999.12	\$832.21	\$852.84	\$610.31	\$620.94	\$640.57	\$651.20	\$615.29	\$625.92	\$545.15	\$555.78	\$458.70	\$468.33
55	\$763.86	\$785.49	\$979.77	\$999.40	\$1,019.03	\$1,038.66	\$863.75	\$883.38	\$637.47	\$647.10	\$666.73	\$676.36	\$641.45	\$651.08	\$569.15	\$579.78	\$479.12	\$488.75
56	\$799.15	\$821.78	\$1,025.24	\$1,045.87	\$1,066.50	\$1,087.13	\$899.38	\$919.01	\$666.91	\$676.54	\$696.17	\$705.80	\$670.89	\$680.52	\$598.59	\$608.22	\$507.25	\$516.88
57	\$834.77	\$1,022.59	\$1,070.94	\$1,111.90	\$1,128.23	\$1,182.08	\$972.75	\$1,019.62	\$696.64	\$706.37	\$726.00	\$735.73	\$700.82	\$710.55	\$628.59	\$638.32	\$536.99	\$546.72
58	\$872.79	\$1,069.17	\$1,119.72	\$1,171.66	\$1,179.62	\$1,245.03	\$1,017.06	\$1,064.90	\$728.37	\$738.10	\$757.73	\$767.46	\$732.55	\$742.28	\$650.61	\$660.34	\$559.25	\$568.98
59	\$891.63	\$1,092.25	\$1,143.89	\$1,207.27	\$1,205.08	\$1,276.47	\$1,039.01	\$1,087.91	\$744.09	\$753.82	\$773.45	\$783.18	\$748.27	\$757.99	\$669.71	\$679.44	\$579.95	\$589.68
60	\$929.65	\$1,138.82	\$1,192.67	\$1,267.02	\$1,256.47	\$1,339.18	\$1,083.32	\$1,132.07	\$774.02	\$783.75	\$803.38	\$813.11	\$778.20	\$787.93	\$698.82	\$708.55	\$609.36	\$619.09
61	\$962.54	\$1,179.11	\$1,234.85	\$1,319.20	\$1,308.65	\$1												

**Highmark Benefits Group
Individual
Plan Design Summary**

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
79962PA0270005	my Priority Blue Flex PPO Gold 0	PPO	Gold	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0280003	my Priority Blue Flex PPO Gold 0 + Adult Dental and Vision	PPO	Gold	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0300002	my Priority Blue Flex PPO Premier Gold 0	PPO	Gold	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0310002	my Priority Blue Flex PPO Premier Gold 0 + Adult Dental and Vision	PPO	Gold	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0290002	my Priority Blue Flex PPO Gold 1700 HSA	PPO	Gold	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0270004	my Priority Blue Flex PPO Silver 3500	PPO	Silver	Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0280002	my Priority Blue Flex PPO Silver 3500 + Adult Dental and Vision	PPO	Silver	Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0300001	my Priority Blue Flex PPO Premier Silver 2900	PPO	Silver	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0310001	my Priority Blue Flex PPO Premier Silver 2900 + Adult Dental and Vision	PPO	Silver	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0270003	my Priority Blue Flex PPO Silver 5900	PPO	Silver	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0270001	my Priority Blue Flex PPO Bronze 3800	PPO	Bronze	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0280001	my Priority Blue Flex PPO Bronze 3800 + Adult Dental and Vision	PPO	Bronze	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0290001	my Priority Blue Flex PPO Bronze 6900 HSA - Custom Drug Benefit	PPO	Bronze	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0270002	my Priority Blue Flex PPO Bronze 8900	PPO	Bronze	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming
79962PA0320001	my Priority Blue Major Events PPO Catastrophic 9100 - 3 Free PCP Visits	PPO	Catastrophic	On/Off	U	3	Bradford, Carbon, Clinton, Lackawanna, Luzerne, Lycoming, Monroe, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming

Company Name Highmark Benefits Group
Market Individual
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2022 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
79962PA0270005	my Priority Blue Flex PPO Gold 0	PPO	Gold	On/Off
79962PA0280003	Priority Blue Flex PPO Gold 0 + Adult Dental and Vis	PPO	Gold	On/Off
79962PA0300002	my Priority Blue Flex PPO Premier Gold 0	PPO	Gold	On/Off
79962PA0310002	my Priority Blue Flex PPO Premier Gold 0 + Adult Dental and	PPO	Gold	On/Off
79962PA0290002	my Priority Blue Flex PPO Gold 1700 HSA	PPO	Gold	On/Off
79962PA0270004	my Priority Blue Flex PPO Silver 3500	PPO	Silver	Off
79962PA0280002	my Priority Blue Flex PPO Silver 3500 + Adult Dental and	PPO	Silver	Off
79962PA0300001	my Priority Blue Flex PPO Premier Silver 2900	PPO	Silver	On/Off
79962PA0310001	my Priority Blue Flex PPO Premier Silver 2900 + Adult Dental and	PPO	Silver	On/Off
79962PA0270003	my Priority Blue Flex PPO Silver 5900	PPO	Silver	On/Off
79962PA0270001	my Priority Blue Flex PPO Bronze 3800	PPO	Bronze	On/Off
79962PA0280001	my Priority Blue Flex PPO Bronze 3800 + Adult Dental and	PPO	Bronze	On/Off
79962PA0290001	my Priority Blue Flex PPO Bronze 6900 HSA - Custom Drug	PPO	Bronze	On/Off
79962PA0270002	my Priority Blue Flex PPO Bronze 8900	PPO	Bronze	On/Off
79962PA0320001	my Priority Blue Flex PPO Catastrophic 9100 - 3 Free	PPO	Catastrophic	On/Off

RATING AREA 1

0	0	0	0	0	0	0	0
Crawford	Clarion	Erie	Forest	McKean	Mercer	Venango	Warren

RATING AREA 2

0	0	0
Elk	Cameron	Potter

Company Name Highmark Benefits Group
Market Individual
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

					RATING AREA 3												
02-01-2022 Number of Covered Lives by Rating County					1,431	1,206	320	2,987	3,741	743	2,803	1,797	109	831	604	1,060	466
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Bradford	Carbon	Clinton	Lackawanna	Luzerne	Lycoming	Monroe	Pike	Sullivan	Susquehanna	Tioga	Wayne	Wyoming
79962PA0270005	my Priority Blue Flex PPO Gold 0	PPO	Gold	On/Off	\$377.30	\$377.30	\$377.30	\$377.30	\$377.30	\$377.30	\$377.30	\$377.30	\$377.30	\$377.30	\$377.30	\$377.30	\$377.30
79962PA0280003	Priority Blue Flex PPO Gold 0 + Adult Dental and Vis	PPO	Gold	On/Off	\$400.82	\$400.82	\$400.82	\$400.82	\$400.82	\$400.82	\$400.82	\$400.82	\$400.82	\$400.82	\$400.82	\$400.82	\$400.82
79962PA0300002	my Priority Blue Flex PPO Premier Gold 0	PPO	Gold	On/Off	\$400.98	\$400.98	\$400.98	\$400.98	\$400.98	\$400.98	\$400.98	\$400.98	\$400.98	\$400.98	\$400.98	\$400.98	\$400.98
79962PA0310002	Priority Blue Flex PPO Premier Gold 0 + Adult Dental and	PPO	Gold	On/Off	\$424.49	\$424.49	\$424.49	\$424.49	\$424.49	\$424.49	\$424.49	\$424.49	\$424.49	\$424.49	\$424.49	\$424.49	\$424.49
79962PA0290002	my Priority Blue Flex PPO Gold 1700 HSA	PPO	Gold	On/Off	\$355.70	\$355.70	\$355.70	\$355.70	\$355.70	\$355.70	\$355.70	\$355.70	\$355.70	\$355.70	\$355.70	\$355.70	\$355.70
79962PA0270004	my Priority Blue Flex PPO Silver 3500	PPO	Silver	Off	\$319.02	\$319.02	\$319.02	\$319.02	\$319.02	\$319.02	\$319.02	\$319.02	\$319.02	\$319.02	\$319.02	\$319.02	\$319.02
79962PA0280002	Priority Blue Flex PPO Silver 3500 + Adult Dental and	PPO	Silver	Off	\$342.54	\$342.54	\$342.54	\$342.54	\$342.54	\$342.54	\$342.54	\$342.54	\$342.54	\$342.54	\$342.54	\$342.54	\$342.54
79962PA0300001	my Priority Blue Flex PPO Premier Silver 2900	PPO	Silver	On/Off	\$439.45	\$439.45	\$439.45	\$439.45	\$439.45	\$439.45	\$439.45	\$439.45	\$439.45	\$439.45	\$439.45	\$439.45	\$439.45
79962PA0310001	Priority Blue Flex PPO Premier Silver 2900 + Adult Dental and	PPO	Silver	On/Off	\$462.96	\$462.96	\$462.96	\$462.96	\$462.96	\$462.96	\$462.96	\$462.96	\$462.96	\$462.96	\$462.96	\$462.96	\$462.96
79962PA0270003	my Priority Blue Flex PPO Silver 5900	PPO	Silver	On/Off	\$399.16	\$399.16	\$399.16	\$399.16	\$399.16	\$399.16	\$399.16	\$399.16	\$399.16	\$399.16	\$399.16	\$399.16	\$399.16
79962PA0270001	my Priority Blue Flex PPO Bronze 3800	PPO	Bronze	On/Off	\$285.86	\$285.86	\$285.86	\$285.86	\$285.86	\$285.86	\$285.86	\$285.86	\$285.86	\$285.86	\$285.86	\$285.86	\$285.86
79962PA0280001	Priority Blue Flex PPO Bronze 3800 + Adult Dental and	PPO	Bronze	On/Off	\$309.38	\$309.38	\$309.38	\$309.38	\$309.38	\$309.38	\$309.38	\$309.38	\$309.38	\$309.38	\$309.38	\$309.38	\$309.38
79962PA0290001	Priority Blue Flex PPO Bronze 6900 HSA - Custom Drug	PPO	Bronze	On/Off	\$296.09	\$296.09	\$296.09	\$296.09	\$296.09	\$296.09	\$296.09	\$296.09	\$296.09	\$296.09	\$296.09	\$296.09	\$296.09
79962PA0270002	my Priority Blue Flex PPO Bronze 8900	PPO	Bronze	On/Off	\$255.34	\$255.34	\$255.34	\$255.34	\$255.34	\$255.34	\$255.34	\$255.34	\$255.34	\$255.34	\$255.34	\$255.34	\$255.34
79962PA0320001	my Blue Major Events PPO Catastrophic 9100 - 3 Free	PPO	Catastrophic	On/Off	\$214.85	\$214.85	\$214.85	\$214.85	\$214.85	\$214.85	\$214.85	\$214.85	\$214.85	\$214.85	\$214.85	\$214.85	\$214.85

Company Name Highmark Benefits Group

Market Individual

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

RATING AREA 4

02-01-2022 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
79962PA0270005	my Priority Blue Flex PPO Gold 0	PPO	Gold	On/Off
79962PA0280003	Priority Blue Flex PPO Gold 0 + Adult Dental and Vis	PPO	Gold	On/Off
79962PA0300002	my Priority Blue Flex PPO Premier Gold 0	PPO	Gold	On/Off
79962PA0310002	riority Blue Flex PPO Premier Gold 0 + Adult Dental an	PPO	Gold	On/Off
79962PA0290002	my Priority Blue Flex PPO Gold 1700 HSA	PPO	Gold	On/Off
79962PA0270004	my Priority Blue Flex PPO Silver 3500	PPO	Silver	Off
79962PA0280002	riority Blue Flex PPO Silver 3500 + Adult Dental and	PPO	Silver	Off
79962PA0300001	my Priority Blue Flex PPO Premier Silver 2900	PPO	Silver	On/Off
79962PA0310001	y Blue Flex PPO Premier Silver 2900 + Adult Dental a	PPO	Silver	On/Off
79962PA0270003	my Priority Blue Flex PPO Silver 5900	PPO	Silver	On/Off
79962PA0270001	my Priority Blue Flex PPO Bronze 3800	PPO	Bronze	On/Off
79962PA0280001	ority Blue Flex PPO Bronze 3800 + Adult Dental and	PPO	Bronze	On/Off
79962PA0290001	riority Blue Flex PPO Bronze 6900 HSA - Custom Drug	PPO	Bronze	On/Off
79962PA0270002	my Priority Blue Flex PPO Bronze 8900	PPO	Bronze	On/Off
79962PA0320001	y Blue Major Events PPO Catastrophic 9100 - 3 Free	PPO	Catastrophic	On/Off

0	0	0	0	0	0	0	0	0	0
Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland

Company Name Highmark Benefits Group
Market Individual
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2022 Number of Covered Lives by Rating County					RATING AREA 5						
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0	0	0	0	0
79962PA0270005	my Priority Blue Flex PPO Gold 0	PPO	Gold	On/Off	Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset
79962PA0280003	Priority Blue Flex PPO Gold 0 + Adult Dental and Vis	PPO	Gold	On/Off							
79962PA0300002	my Priority Blue Flex PPO Premier Gold 0	PPO	Gold	On/Off							
79962PA0310002	riority Blue Flex PPO Premier Gold 0 + Adult Dental and	PPO	Gold	On/Off							
79962PA0290002	my Priority Blue Flex PPO Gold 1700 HSA	PPO	Gold	On/Off							
79962PA0270004	my Priority Blue Flex PPO Silver 3500	PPO	Silver	Off							
79962PA0280002	riority Blue Flex PPO Silver 3500 + Adult Dental and Y	PPO	Silver	Off							
79962PA0300001	my Priority Blue Flex PPO Premier Silver 2900	PPO	Silver	On/Off							
79962PA0310001	y Blue Flex PPO Premier Silver 2900 + Adult Dental a	PPO	Silver	On/Off							
79962PA0270003	my Priority Blue Flex PPO Silver 5900	PPO	Silver	On/Off							
79962PA0270001	my Priority Blue Flex PPO Bronze 3800	PPO	Bronze	On/Off							
79962PA0280001	ority Blue Flex PPO Bronze 3800 + Adult Dental and	PPO	Bronze	On/Off							
79962PA0290001	riority Blue Flex PPO Bronze 6900 HSA - Custom Drug	PPO	Bronze	On/Off							
79962PA0270002	my Priority Blue Flex PPO Bronze 8900	PPO	Bronze	On/Off							
79962PA0320001	y Blue Major Events PPO Catastrophic 9100 - 3 Free	PPO	Catastrophic	On/Off							

Company Name Highmark Benefits Group
Market Individual
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2022 Number of Covered Lives by Rating County				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange
79962PA0270005	my Priority Blue Flex PPO Gold 0	PPO	Gold	On/Off
79962PA0280003	Priority Blue Flex PPO Gold 0 + Adult Dental and Vis	PPO	Gold	On/Off
79962PA0300002	my Priority Blue Flex PPO Premier Gold 0	PPO	Gold	On/Off
79962PA0310002	my Priority Blue Flex PPO Premier Gold 0 + Adult Dental and	PPO	Gold	On/Off
79962PA0290002	my Priority Blue Flex PPO Gold 1700 HSA	PPO	Gold	On/Off
79962PA0270004	my Priority Blue Flex PPO Silver 3500	PPO	Silver	Off
79962PA0280002	Priority Blue Flex PPO Silver 3500 + Adult Dental and	PPO	Silver	Off
79962PA0300001	my Priority Blue Flex PPO Premier Silver 2900	PPO	Silver	On/Off
79962PA0310001	my Priority Blue Flex PPO Premier Silver 2900 + Adult Dental and	PPO	Silver	On/Off
79962PA0270003	my Priority Blue Flex PPO Silver 5900	PPO	Silver	On/Off
79962PA0270001	my Priority Blue Flex PPO Bronze 3800	PPO	Bronze	On/Off
79962PA0280001	Priority Blue Flex PPO Bronze 3800 + Adult Dental and	PPO	Bronze	On/Off
79962PA0290001	Priority Blue Flex PPO Bronze 6900 HSA - Custom Drug	PPO	Bronze	On/Off
79962PA0270002	my Priority Blue Flex PPO Bronze 8900	PPO	Bronze	On/Off
79962PA0320001	my Blue Major Events PPO Catastrophic 9100 - 3 Free	PPO	Catastrophic	On/Off

RATING AREA 6

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

Company Name Highmark Benefits Group

Market Individual

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

02-01-2022 Number of Covered Lives by Rating County					RATING AREA 7				RATING AREA 8				
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	0	0	0	0	0	0	0	0	0
79962PA0270005	my Priority Blue Flex PPO Gold 0	PPO	Gold	On/Off	Adams	Berks	Lancaster	York	Bucks	Chester	Delaware	Montgomery	Philadelphia
79962PA0280003	Priority Blue Flex PPO Gold 0 + Adult Dental and Vis	PPO	Gold	On/Off									
79962PA0300002	my Priority Blue Flex PPO Premier Gold 0	PPO	Gold	On/Off									
79962PA0310002	my Priority Blue Flex PPO Premier Gold 0 + Adult Dental and	PPO	Gold	On/Off									
79962PA0290002	my Priority Blue Flex PPO Gold 1700 HSA	PPO	Gold	On/Off									
79962PA0270004	my Priority Blue Flex PPO Silver 3500	PPO	Silver	Off									
79962PA0280002	Priority Blue Flex PPO Silver 3500 + Adult Dental and	PPO	Silver	Off									
79962PA0300001	my Priority Blue Flex PPO Premier Silver 2900	PPO	Silver	On/Off									
79962PA0310001	my Priority Blue Flex PPO Premier Silver 2900 + Adult Dental and	PPO	Silver	On/Off									
79962PA0270003	my Priority Blue Flex PPO Silver 5900	PPO	Silver	On/Off									
79962PA0270001	my Priority Blue Flex PPO Bronze 3800	PPO	Bronze	On/Off									
79962PA0280001	Priority Blue Flex PPO Bronze 3800 + Adult Dental and	PPO	Bronze	On/Off									
79962PA0290001	Priority Blue Flex PPO Bronze 6900 HSA - Custom Drug	PPO	Bronze	On/Off									
79962PA0270002	my Priority Blue Flex PPO Bronze 8900	PPO	Bronze	On/Off									
79962PA0320001	my Blue Major Events PPO Catastrophic 9100 - 3 Free	PPO	Catastrophic	On/Off									

Company Name Highmark Benefits Group
Market Individual
RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

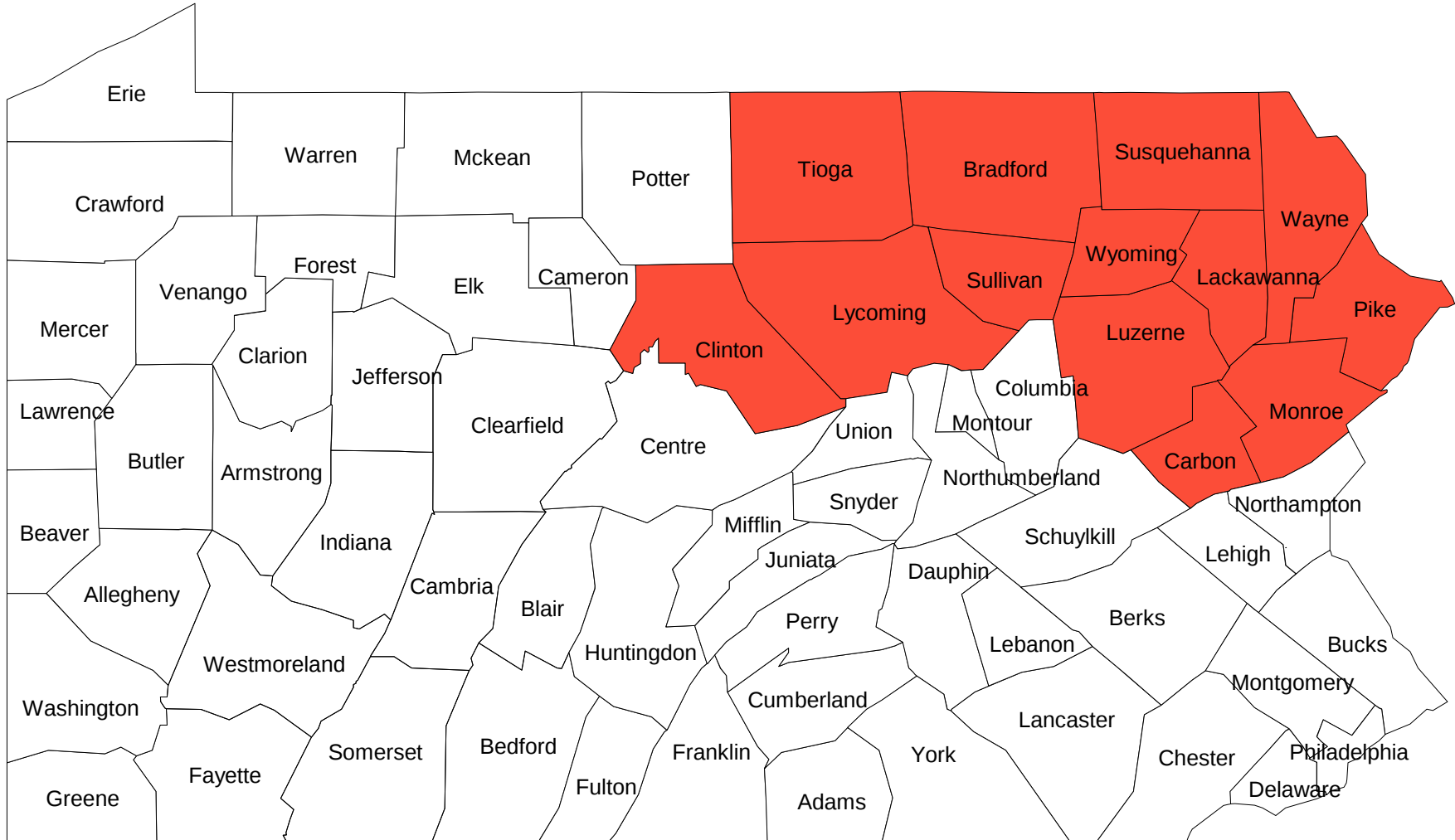
RATING AREA 9

02-01-2022 Number of Covered Lives by Rating County					0	0	0	0	0	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Cumberland	Dauphin	Franklin	Fulton	Juniata	Lebanon	Perry
79962PA0270005	my Priority Blue Flex PPO Gold 0	PPO	Gold	On/Off							
79962PA0280003	Priority Blue Flex PPO Gold 0 + Adult Dental and Vis	PPO	Gold	On/Off							
79962PA0300002	my Priority Blue Flex PPO Premier Gold 0	PPO	Gold	On/Off							
79962PA0310002	my Priority Blue Flex PPO Premier Gold 0 + Adult Dental and	PPO	Gold	On/Off							
79962PA0290002	my Priority Blue Flex PPO Gold 1700 HSA	PPO	Gold	On/Off							
79962PA0270004	my Priority Blue Flex PPO Silver 3500	PPO	Silver	Off							
79962PA0280002	my Priority Blue Flex PPO Silver 3500 + Adult Dental and V	PPO	Silver	Off							
79962PA0300001	my Priority Blue Flex PPO Premier Silver 2900	PPO	Silver	On/Off							
79962PA0310001	my Priority Blue Flex PPO Premier Silver 2900 + Adult Dental and	PPO	Silver	On/Off							
79962PA0270003	my Priority Blue Flex PPO Silver 5900	PPO	Silver	On/Off							
79962PA0270001	my Priority Blue Flex PPO Bronze 3800	PPO	Bronze	On/Off							
79962PA0280001	my Priority Blue Flex PPO Bronze 3800 + Adult Dental and	PPO	Bronze	On/Off							
79962PA0290001	my Priority Blue Flex PPO Bronze 6900 HSA - Custom Drug	PPO	Bronze	On/Off							
79962PA0270002	my Priority Blue Flex PPO Bronze 8900	PPO	Bronze	On/Off							
79962PA0320001	my Priority Blue Flex PPO Catastrophic 9100 - 3 Free	PPO	Catastrophic	On/Off							

2022 Service Area

Issuer: Highmark Benefits Group (HBG)

Market: Individual



Key *(modify as needed)*

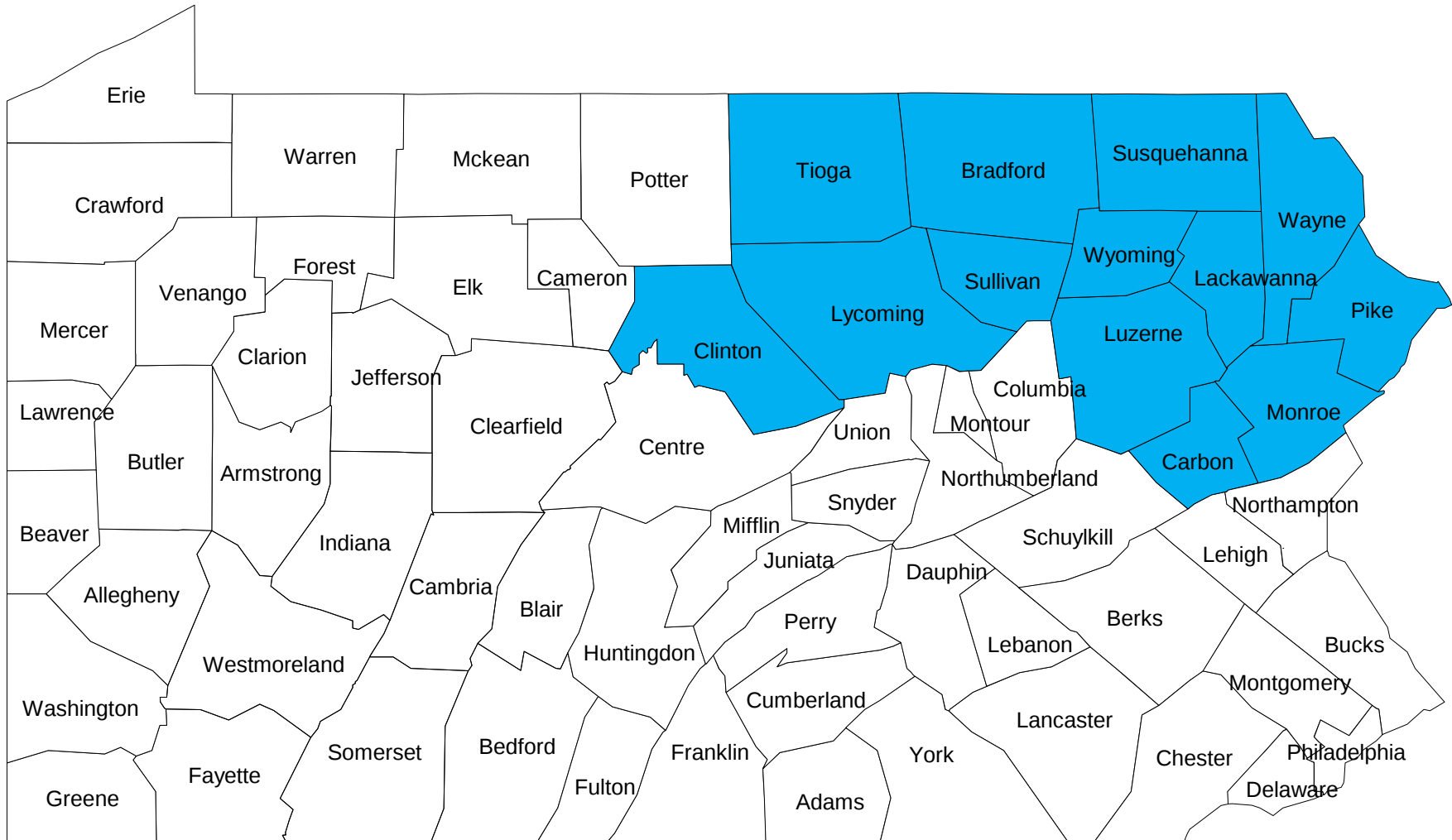
 : 2022 on-exchange service area

 : 2022 off-exchange only service area

2023 Service Area

Issuer: Highmark Benefits Group (HBG)

Market: Individual



Key *(modify as needed)*

 : 2023 on-exchange service area

 : 2023 off-exchange only service area



June 24, 2022

Mr. James Lavery, Actuary
Bureau of Life, Accident & Health Insurance
Commonwealth of Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

Re: Highmark Benefits Group 2023 ACA Rate Filing (Individual Market)
Highmark Filing # 1A-DP-22-HBG (SERFF Filing # HGHM-133249727)

Dear Mr. Lavery:

Enclosed are responses to your June 15, 2022 questions regarding SERFF Filing # HGHM-133249727. We have included your questions along with our responses for your convenience. In conjunction with these responses, we are also submitting revisions to the following documents in SERFF:

- PAAM Attachments – This file is being revised in response to additional question 3.

Should you have any further questions regarding this Filing, please feel free to contact me at [REDACTED] or via e-mail at: [REDACTED].

Sincerely,

[REDACTED]

Actuarial Director, Individual Markets
Highmark Inc.

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

Response:

We have tested and confirmed that the rates in Table 11 of the Actuarial Memorandum Exhibits, the PA Plan Design Summary and Rate Tables, the Federal Rates Template, and in the binder are identical.

2. With the assumption of the expanded subsidies not being extended into plan year 2023, has any adjustment been made in the assumption of on-exchange membership for plan year 2023? Have you made any adjustment to morbidity?

Response:

Yes, after accounting for members we expect to passively enroll, we assumed that the split of members actively enrolling in On- vs. Off-exchange coverage would match the experience we saw during the 2021 OEP (Nov 2020 – Jan 2021), which was the last OEP prior to ARPA.

No adjustment was made to the morbidity due to the expanded subsidies not being extended into 2023. This is consistent with our filing approach from last year which assumed no morbidity change due to expanded subsidies in 2022.

3. Per HHS Final Notice of Benefit and Payment Parameters, the federal medical rebate loss ratio is prohibited from including indirect quality improvement activity (QIA) expenses. Please confirm that in the calculation of the rebate MLR that indirect quality improvement activity (QIA) expenses have been excluded.

Response:

The quality improvement activity (QIA) expenses that are used to calculate the projected 2023 medical loss ratio (MLR) cited in the Part III Actuarial Memorandum are developed from the most recent actual QIA data that we have available. Our internal subject matter experts have been reviewing the QIA-related expenses in light of the changes outlined by CMS in the 2023 Notice of Benefit and Payment Parameters. Based on an initial review, we do not expect this requirement of excluding indirect QIA expenses to have a material impact on the results.

4. In the PAAM Exhibits, Table 6, the commission is listed as \$6.00 PMPM. Please provide the quantitative development for determining the commission PMPM.

Response:

The development of the projected commission PMPM is shown in Attachment D. The projected commission expense is estimated to be worth \$6.00 PMPM or 0.83% of premium as shown in Table 6.

5. Please provide an exhibit showing the commission PMPM amount to be paid to brokers in the following situations: OpenEnrollment Enrollee – Renewing, Open Enrollment Enrollee – New, Special Enrollment Period Enrollee – New, Special Enrollment Enrollee – Renewing. If the commission PMPM is not consistent between the four options above, please explain in detail the reason for the difference. Note that federal law prohibits different compensation to agents and brokers for coverage in the same benefit year based on whether the enrollment is during an SEP or during OEP.

Response:

Please see the attached exhibit labeled Q5 Response for the commission PMPMs for the requested categories of members. The commission PMPMs are consistent between the categories.

6. If available, please provide a current copy of the broker contract agreements for plan year 2023.

Response:

The broker contract agreements for plan year 2023 are not yet available.

7. Currently, the expanded subsidies from the American Rescue Plan are expected to discontinue for plan year 2023. Please confirm that the current rate filing assumptions are reflective of the expanded subsidies being removed for plan year 2023 and please provide a brief narrative on how rates were impacted.

Response:

Our rate filing assumed that the expanded subsidies implemented under ARPA are discontinued for the 2023 plan year. Our expectation in last year's filing was that enhanced ARPA subsidies would not impact the rates. Consistent with that assumption, we are assuming no rate impact in 2023 for the discontinuation of the ARPA enhanced subsidies.

8. With the Public Health Emergency scheduled to end on July 15th, how has the rate development been affected? Please provide support for any adjustments. Specifically, has any adjustments been made to your assumption of on-exchange membership for PY2023?

Response:

No adjustment has been made for the Public Health Emergency (PHE) potentially ending since current regulation/law has not changed and the PHE continues to be extended. Depending on changes to laws/regulations related to the PHE ending, Highmark Benefits Group reserves the right to modify the filing due to any substantial changes.

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

Response:

Our expanded bronze plans satisfy the requirements as defined by 45 CFR 156.140(c) by either covering at least one major service, other than preventive services, before the deductible or meeting the requirements to be a high deductible health plan within the meaning of 26 U.S.C. 223(c)(2). For plans satisfying the requirement by covering at least one major service before the deductible, several major services are covered prior to the deductible including primary care and specialty care. The coinsurance percentages and certifications of the values corresponding to these categories can be found in the AV screenshots and Certifications document provided as a separate attachment with the initial SERFF submission.

10. Per the Pennsylvania Final Rate Filing Guidance, Table 5, the Change in Morbidity – All Other should have an individual adjustment factor of 1.0. Please confirm that no individual adjustment factor was used.

Response:

We confirm that the rate development did not include any adjustment for the individual mandate factor.

11. Per the PAAM Exhibits, Table 6, the cost of Quality Improvement Initiatives is \$5.52. Please qualitatively and quantitatively show the development of the quality improvement initiative amount.

Response:

The Quality Improvement Initiatives PMPM is calculated by multiplying our internal estimate of Quality Improvement Initiatives percentage by the Projected Required Revenue PMPM. It was calculated as follows: $0.76\% \times \$726.82 = \5.52 . As mentioned in the response to Question 3 above, the quality improvement activity (QIA) expense percentage is developed from the most recent actual QIA data that we have available.

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

Response:

Projected drug rebates account for expected changes in cost, utilization, and contracting associated with rebatable drugs. The change in drug rebates is included in the "Change in Other" factor found on Table 5. The specific impact of the change in drug rebates is provided in the response to Add'l Question 5 below.

13. Please explain how a change in member behavior to use service types such as telehealth more frequently than in the past and how a reversion back to more traditional service types is considered in your trend development.

Response:

Our trend development does not include an adjustment related to changes in telehealth services compared to traditional service types. Our cost/service for telehealth and non-telehealth services are at parity. Our assumption is that changes in telehealth vs. non-telehealth utilization of service patterns (visit and other associated services) will not materially impact the overall trend.

Please answer these additional questions.

1. The following questions relate to the trend assumption:

- a. Section 1H of the PA Actuarial Memorandum indicates that the regression analysis primarily informed the trend selection with the final requested trend also based on actuarial judgement. Please provide a detailed exhibit displaying the quantitative development of the trend estimates produced by the regression analysis and the results produced by the regression analysis performed, separately for medical and pharmacy services. Additionally, please explain why the particular trend assumption was chosen over another. For example, if the regression analysis suggested that the annual trend assumption should equal 6%, but the Company ultimately selected 7%, please explain how it was determined that the 7% assumption is more appropriate than 6%.
- b. Please provide an exhibit displaying what explicit adjustments, if any, were made to the results of the regression analysis to arrive at the final proposed trend assumptions (e.g., an adjustment was applied to the results of the regression analysis to capture anticipated changes in the pharmacy formulary).
- c. Section 1H of the PA Actuarial Memorandum states that the regression analysis was completed at the medical and pharmacy level, then combined to develop a total trend assumption. Please provide a detailed quantitative exhibit displaying how the medical and pharmacy results of the regression analysis were combined. Additionally, please provide

support for the approach of assuming that the medical and pharmacy trends should be equal to one another (i.e., instead of assuming separate medical and pharmacy trends).

- d. Please explain what adjustments, if any, were made to account for the impact of COVID- 19 when developing the annual trend assumption utilized in the rate development.
- e. Please provide a detailed quantitative exhibit displaying the development of the induced utilization assumption that is included in the trend assumptions and shown in Table 3 of the PA Rate Template file. In providing your response, please provide an exhibit displaying the development of the average induced demand factors underlying the 2021 experience and projected 2023 populations.

Response:

- a. Please see exhibit labeled Add'l Q1a Response for the development of the trend estimates produced by the regression analysis. Shaded in gray is the time period used for the regressions.
- b. The only adjustment made to the regression trend output was the actuarial judgment described in the exhibit labeled Add'l Q1b Response.
- c. Please see the attached exhibit labeled Add'l Q1b Response. The medical and pharmacy trends were set equal in the filing submission because the final trend developed was a total trend.
- d. The trend in the filing submission was developed excluding Covid-19. Please see the response to Additional Question 3 below for more details on Covid-19 factor development.
- e. Please see the attached exhibit labeled Add'l Q1e Response for the development of the induced utilization assumption that is included in Table 3 of the PA Rate Template file.

2. The following questions relate to the morbidity adjustment:

- a. Please provide a quantitative exhibit displaying the development of the 2021 Normalized Allowed PMPM shown in column D in Attachment A. Please demonstrate all calculations.
- b. Please provide support for and include a quantitative exhibit displaying the development of the assumed 2023 Member Distribution shown in Attachment A.
- c. Please provide a detailed quantitative exhibit displaying the development of the 2021 Normalized Allowed PMPM shown in column F in Attachment A. Please demonstrate all calculations.

Response:

- a. Please see the attached exhibit labeled Add'l Q2a Response for the development of the 2021 normalized allowed PMPM (column D) in Attachment A.
- b. Please see the attached exhibit labeled Add'l Q2b Response for the development of the assumed 2023 member distribution shown in Attachment A. A definition of each category is described in the response to Question 2c. The development starts with the actual member distribution by region and population source as of the 2022 snapshot date. The assumed values that were incorporated into Attachment A reflect very minor adjustments in order to use more rounded assumptions.
- c. Please see the attached exhibit labeled Add'l Q2c Response for the development of the 2021 normalized allowed PMPMs (column F) in Attachment A. The composite PMPM is derived using the 2/1/2022 enrollment profile which is categorized into the following sources:

Renewal

- This represents our 2021 ACA members that re-enrolled in HBG. The normalized allowed PMPM was calculated by normalizing the allowed PMPM for demographic, network, and benefit richness factors.

Other Highmark

- This represents the 2021 members from other Highmark markets such as group markets that enrolled in HBG. The normalized PMPM was calculated by reviewing its allowed claims, adjusted for benefit differential if needed and then normalized for demographic, network, and benefit richness factors.

Prior ACA

- This represents our 2020 ACA members that lapsed in 2021 and now reenrolled in HBG. We reviewed its 2020 ACA claims, trended to 2021, and used this as starting point to approximate the 2021 allowed claims. The normalized allowed PMPM was then calculated by normalizing the allowed PMPM for demographic, network, and benefit richness factors.

New

- This represents the catch-all category of the remaining members that enrolled in HBG. The adjusted allowed claims PMPM for the “New” segment is set such that its normalized allowed PMPM was set equal to the “Renewal” segment.

Since the underlying claims only reflected the claims experience of the 2/1/2022 active enrollment, we added a death load adjustment to the underlying allowed PMPMs to capture the incremental claims of terminated members due to death as developed from historical experience. In conjunction with the claim adjustment, we also adjusted the risk scores as discussed further in the response to Add'l Question 6c below. These adjustments are necessary to account for the fact that the underlying claim projection is based on the active enrollment snapshot as of 2/1/2022. Absent this adjustment, the claim projection and risk scores would be artificially low because they would exclude the experience associated with members who lapse due to death each year.

3. The following questions pertain to the COVID-19 adjustment factor:

- a. Please provide a detailed quantitative exhibit displaying the development of the Company's adjustments to reflect the impact of COVID-19 on claims in 2021 due to testing, COVID-19 treatment, vaccines, and deferred care. In providing your response, please include the actual 2021 monthly claims experience that was considered, the estimated claims experience that was developed to estimate a 2021 non-COVID-19 baseline, and the detailed figures/adjustments that were utilized to develop the estimated claims experience for the 2021 non-COVID-19 baseline.**
- b. Please provide a detailed quantitative exhibit displaying the development of the Company's adjustments to reflect the impact of COVID-19 on claims in 2023 due to testing, COVID-19 treatment, vaccines, and deferred care.**

Response:

Please note that during the course of compiling our responses for this question, we confirmed that our 2021 and 2023 total COVID impacts are being calculated correctly; however, we did notice that the split between testing, treatment, vaccines, and deferred/rescheduled/induced care was calculated incorrectly on Attachment G. In the original submission, testing, treatment, and vaccine impacts were unintentionally being calculated as a percent of incurred claims, instead of allowed claims. This resulted in the testing, treatment, and vaccine percentages being overstated. Since the impact of deferred/rescheduled/induced care was calculated as the difference between actual spend/all-in projected spend less COVID costs less

the non-COVID baseline, the impact of deferred/rescheduled/induced care was understated, but the overall COVID impact is unaffected. We are submitting an updated version of the PAAM Attachments file in order to correct Attachment G.

- a. Please see the attached exhibit labeled Add'l Q3a Response for the development of the Company's 2021 adjustment to claims for COVID-19. The non-COVID baseline is projected by using linear regression based on pre-COVID data, projecting through 2021. The pre-COVID experience is adjusted for historical and projected changes in provider contracting, membership mix including the impact of new/cancelled member, impact of care management programs, and emerging treatments/technology. Testing claims are identified using testing procedure codes (CPT/HCSPCS). Treatment claims are defined as inpatient claims with a confirmed COVID diagnosis code. Vaccine claims are identified using vaccine procedure codes (CPT/HCSPCS) for medical claims and NDCs for pharmacy claims.
- b. Please see the attached exhibit labeled Add'l Q3b Response for the development of the Company's 2023 adjustment to claims for COVID-19. The development of the non-COVID baseline projection and the testing/treatment/vaccine costs followed the approach outlined in the response to Add'l Question 3a above.

4. Please provide a quantitative exhibit displaying the development of the average 2021 and 2023 network factors used in the development of the "Changes in Network" Index Rate Adjustment shown in Attachment A.

Response:

Please see the attached exhibit labeled Add'l Q4 Response for the development of the average 2021 and 2023 network factors. As demonstrated in Attachment A of the rate filing, these two factors are used to develop the "change in network" factor shown in Table 5 of the PA Rate Template file.

5. Please provide a detailed quantitative exhibit displaying the 0.994 "Change in Other" Index Rate adjustment shown in Table 5 of the PA Rate Template file. In providing your response, please break out the estimated impact due to changes in pharmacy rebates and expected changes in hospital/physician settlements separately.

Response:

Please see the attached exhibit labeled Add'l Q5 Response for the development of the "Change in Other" factor.

6. The following questions relate to the risk transfer assumption:

- a. Please provide a detailed quantitative exhibit displaying the development of the Company-specific average PLRS, ARF, GCF, ID, AV, and premium PMPM assumptions underlying the projected 2023 risk adjustment transfer, as shown in Attachment B. In providing your response, please include the average PLRS, ARF, GCF, ID, AV, and premium PMPM underlying the RATEE file that will be used by CMS to calculate risk transfers for 2021. Additionally, please provide a comparison of the 2023 factors being projected vs. the 2021 factors underlying the RATEE file and provide justification to the extent the projected 2023 factors are different than the 2021 factors.
- b. Please provide a detailed quantitative exhibit displaying the development of the market wide average PLRS, ARF, GCF, ID, AV, and premium PMPM assumptions underlying the projected 2023 risk adjustment transfer, as shown in Attachment B. Additionally, please provide a comparison of the 2023 factors being projected vs. the 2021 factors shown in the

Interim 2021 risk adjustment transfer report and provide justification to the extent the projected 2023 factors are different than the 2021 interim factors.

- c. To the extent that a portion of the Company's morbidity adjustment reflects anticipated changes in morbidity specific to the Company's internal book of business (i.e., in addition to, or rather than, any changes in the morbidity of the overall PA Individual ACA market), please explain how the morbidity adjustment was considered in the development of the Company's risk adjustment transfer assumption.**
- d. Please provide a detailed quantitative exhibit displaying the anticipated receipt and assessment associated with the high cost risk pool component of the projected risk transfer results**

Response:

- a. Please see the attached exhibit labeled Add'l Q6a Response for the development of the Company-specific assumptions underlying the projected 2023 risk transfer. The Company-specific PLRS, ARF, GCF, IDF, and AV assumptions shown in Attachment B and used to develop the projected 2023 risk transfer were developed for the population of members that comprised the normalized allowed PMPM development discussed in the response to Add'l Question 2c above.

The exhibit labeled Add'l Q6a Response also includes the relevant factors underlying the RATEE file that CMS will use to calculate risk transfers for 2021. Please note that the GCF value is listed as "unknown" because this factor cannot be derived without access to all of the other issuer RATEE files in the market.

The 2023 factors are similar to the 2021 factors. Small differences exist because the 2023 population is anticipated to be slightly different than the 2021 population. The 2023 population was developed using the 2/1/2022 enrollment profile as discussed in the response to Add'l Question 2c above. Each of the components of the risk transfer calculation were developed based on this population rather than the 2021 experience period population. This ensures that the risk scores are aligned to the claims for each of the four sources shown in the development of the morbidity adjustment.

- b. The statewide factors included in rows 13 and 18 of Attachment B for the 2023 projection were developed by starting with information from the following sources: (1) the PID's 2021 RATEE study released on May 10, 2022, (2) the PID's 1Q2022 Enrollment Survey released on May 5, 2022, and (3) the CMS Interim Summary Report for 2021 released on March 22, 2022. The attached exhibit labeled Add'l Q6b Response demonstrates how we used the information from these sources to derive the 2023 statewide average estimates shown in Attachment B. Most of the assumed 2023 statewide factors are identical to our best estimates of the 2021 or 2022 statewide factors. The only exceptions are the statewide average premium and risk score assumptions. We anticipate that the statewide average premium will be 8% higher in 2023 compared to 2021 primarily due to rate increase requests for the 2023 benefit year. We also anticipate a slight increase in the overall morbidity of the non-catastrophic market and have adjusted the statewide average risk score accordingly.

Table 3 shows a comparison of the 2023 factors being projected vs. the 2021 factors shown in the CMS Interim Report. In general, the factors being used for 2023 are similar to the factors from the Interim Report. Where differences exist, it is because we are using more accurate and/or more recent data to develop our estimates. For example, using results from the PID RATEE analysis is preferable to the CMS Interim Report because they are based on actual EDGE Server submissions by all plans with run-out through the April 2022 deadline.

- c. The Company-specific PLRS factors shown in the attached exhibit labeled Add'l Q6a Response were developed using the 2021 HHS-HCC risk adjustment model. The risk scores were increased by 4.5% in conjunction with the death load claim adjustment discussed in the response to Add'l Question 2c above. We selected a 4.5% risk score load based on a review of the data.
- d. Please see the attached exhibit labeled Add'l Q6d Response for the development of the high cost risk pool component of the projected risk transfer results. We relied upon estimates from an external actuarial consulting company's study to inform our selection of an appropriate percentage of premium charge for 2023. The external study was based upon data collected by issuers across the country and included over 142 million submitted member months. Given the extremely volatile and unpredictable nature of claims in excess of the \$1 million attachment point, as a simplifying assumption we assumed there would be no anticipated reimbursements in 2023. Instead, we selected a percentage of premium charge that was lower than what could have been reasonably supported by the external study.

Highmark Benefits Group

Individual Market

Response to Objection 1 - Question 5

Enrollee Type	Commission PMPM					
Open Enrollment - Renewing						
Open Enrollment - New						
Special Enrollment Period - Renewing						
Special Enrollment Period - New						

Highmark Benefits Group

Individual Market

Response to Objection 1 - Add'l Question 1a

Incurred Month	Medical								Rx							
	Members	Allowed PMPM	AGING	Cumul Factor	Monthly Factor	Pricing PMPM	12 Mo. PMPM	Annual Trend	Members	Allowed PMPM	AGING	Cumul Factor	Monthly Factor	Pricing PMPM	12 Mo. PMPM	Annual Trend
1/16	34,729	\$430.61	1.000	1.157	0.864	\$372.08			34,729	\$78.03	1.000	1.147	0.872	\$68.01		
2/16	35,915	\$441.47	1.000	1.157	0.864	\$381.61			35,915	\$93.23	1.000	1.132	0.883	\$82.33		
3/16	36,861	\$444.17	1.000	1.143	0.875	\$388.51			36,861	\$97.81	1.000	1.108	0.903	\$88.30		
4/16	36,543	\$423.55	1.000	1.139	0.878	\$371.74			36,543	\$92.85	1.000	1.099	0.910	\$84.47		
5/16	36,064	\$481.29	1.000	1.145	0.874	\$420.45			36,064	\$99.27	1.000	1.104	0.906	\$89.96		
6/16	35,629	\$440.63	1.000	1.153	0.868	\$382.24			35,629	\$109.46	1.000	1.109	0.902	\$98.72		
7/16	35,240	\$439.47	1.000	1.151	0.869	\$381.91			35,240	\$101.03	1.000	1.112	0.899	\$90.82		
8/16	34,837	\$456.21	1.000	1.136	0.880	\$401.43			34,837	\$108.97	1.000	1.115	0.897	\$97.74		
9/16	34,512	\$426.42	1.000	1.127	0.887	\$378.33			34,512	\$106.10	1.000	1.113	0.898	\$95.32		
10/16	34,036	\$424.03	1.000	1.124	0.889	\$377.17			34,036	\$112.61	1.000	1.110	0.901	\$101.46		
11/16	33,390	\$470.45	1.000	1.127	0.887	\$417.30			33,390	\$122.20	1.000	1.108	0.902	\$110.25		
12/16	31,854	\$463.43	1.000	1.132	0.884	\$409.54	\$389.96		31,854	\$140.77	1.000	1.129	0.886	\$124.71	\$93.95	
1/17	21,091	\$354.79	1.000	1.186	0.843	\$299.12	\$386.77		21,091	\$81.58	1.000	1.127	0.887	\$72.37	\$95.05	
2/17	22,405	\$359.08	1.000	1.174	0.852	\$305.85	\$382.62		22,405	\$75.66	1.000	1.104	0.906	\$68.52	\$94.70	
3/17	22,996	\$401.30	1.000	1.158	0.864	\$346.65	\$379.87		22,996	\$99.37	1.000	1.077	0.928	\$92.26	\$95.18	
4/17	22,721	\$417.75	1.000	1.147	0.872	\$364.24	\$379.71		22,721	\$91.82	1.000	1.072	0.933	\$85.68	\$95.66	
5/17	22,283	\$447.95	1.000	1.139	0.878	\$393.38	\$376.39		22,283	\$102.04	1.000	1.077	0.929	\$94.77	\$96.19	
6/17	21,945	\$417.74	1.000	1.143	0.875	\$365.59	\$375.07		21,945	\$101.76	1.000	1.083	0.924	\$93.99	\$95.78	
7/17	21,584	\$332.34	1.000	1.148	0.871	\$289.40	\$368.61		21,584	\$101.28	1.000	1.085	0.922	\$93.37	\$96.16	
8/17	21,283	\$404.62	1.000	1.146	0.873	\$353.06	\$363.85		21,283	\$108.15	1.000	1.095	0.913	\$98.75	\$96.16	
9/17	20,950	\$396.35	1.000	1.139	0.878	\$348.11	\$361.06		20,950	\$105.65	1.000	1.099	0.910	\$96.15	\$96.25	
10/17	20,630	\$376.94	1.000	1.128	0.886	\$334.03	\$357.15		20,630	\$115.65	1.000	1.106	0.904	\$104.58	\$96.23	
11/17	20,157	\$376.95	1.000	1.122	0.892	\$336.07	\$348.14		20,157	\$108.45	1.000	1.098	0.911	\$98.78	\$94.69	
12/17	19,530	\$348.19	1.000	1.116	0.896	\$312.03	\$337.80	(13.4%)	19,530	\$121.64	1.000	1.116	0.896	\$108.96	\$92.06	(2.0%)
1/18	14,803	\$355.90	1.000	1.206	0.829	\$295.16	\$338.54	(12.5%)	14,803	\$101.47	1.000	1.133	0.883	\$89.56	\$93.56	(1.6%)
2/18	14,346	\$362.47	1.000	1.205	0.830	\$300.78	\$339.32	(11.3%)	14,346	\$106.39	1.000	1.126	0.888	\$94.49	\$95.93	1.3%
3/18	14,130	\$403.42	1.000	1.210	0.827	\$333.49	\$338.25	(11.0%)	14,130	\$114.87	1.000	1.124	0.890	\$102.18	\$96.66	1.6%
4/18	13,957	\$406.70	1.000	1.199	0.834	\$339.28	\$335.70	(11.6%)	13,957	\$118.05	1.000	1.125	0.889	\$104.95	\$98.28	2.7%
5/18	13,643	\$436.33	1.000	1.197	0.835	\$364.48	\$331.59	(11.9%)	13,643	\$126.12	1.000	1.126	0.888	\$111.97	\$99.50	3.4%
6/18	13,491	\$372.35	1.000	1.191	0.840	\$312.73	\$326.79	(12.9%)	13,491	\$123.42	1.000	1.129	0.886	\$109.32	\$100.72	5.2%
7/18	13,325	\$467.98	1.000	1.190	0.840	\$393.14	\$335.23	(9.1%)	13,325	\$122.63	1.000	1.123	0.891	\$109.25	\$102.08	6.2%
8/18	13,091	\$439.47	1.000	1.187	0.842	\$370.09	\$335.63	(7.8%)	13,091	\$125.69	1.000	1.137	0.880	\$110.56	\$103.02	7.1%
9/18	12,946	\$415.72	1.000	1.193	0.838	\$348.34	\$335.11	(7.2%)	12,946	\$116.58	1.000	1.135	0.881	\$102.75	\$103.79	7.8%
10/18	12,785	\$514.75	1.000	1.189	0.841	\$432.88	\$342.33	(4.2%)	12,785	\$128.15	1.000	1.145	0.874	\$111.95	\$104.29	8.4%
11/18	12,595	\$440.96	1.000	1.192	0.839	\$369.88	\$345.13	(0.9%)	12,595	\$135.26	1.000	1.144	0.874	\$118.26	\$105.99	11.9%
12/18	12,382	\$421.85	1.000	1.190	0.840	\$354.37	\$349.84	3.6%	12,382	\$142.77	1.000	1.131	0.884	\$126.19	\$107.18	16.4%
1/19	12,206	\$412.99	1.000	1.201	0.832	\$343.77	\$354.47	4.7%	12,206	\$114.63	1.000	1.056	0.947	\$108.56	\$108.93	16.4%
2/19	11,962	\$444.02	1.000	1.192	0.839	\$372.38	\$360.76	6.3%	11,962	\$105.31	1.000	1.055	0.948	\$99.81	\$109.55	14.2%
3/19	11,757	\$367.30	1.000	1.189	0.841	\$308.85	\$359.30	6.2%	11,757	\$120.41	1.000	1.048	0.955	\$114.94	\$110.64	14.5%
4/19	11,669	\$428.39	1.000	1.184	0.845	\$361.89	\$361.34	7.6%	11,669	\$126.18	1.000	1.036	0.965	\$121.81	\$112.02	14.0%
5/19	11,480	\$491.87	1.000	1.165	0.858	\$422.18	\$365.72	10.3%	11,480	\$131.77	1.000	1.032	0.969	\$127.72	\$113.23	13.8%
6/19	11,300	\$394.06	1.000	1.155	0.866	\$341.15	\$368.68	12.8%	11,300	\$122.48	1.000	1.022	0.979	\$119.85	\$114.09	13.3%
7/19	11,061	\$437.01	1.000	1.148	0.871	\$380.70	\$367.36	9.6%	11,061	\$135.37	1.000	1.039	0.962	\$130.24	\$115.77	13.4%
8/19	10,960	\$472.49	1.000	1.148	0.871	\$411.69	\$370.50	10.4%	10,960	\$131.44	1.000	1.034	0.967	\$127.15	\$117.12	13.7%
9/19	10,871	\$433.66	1.000	1.169	0.856	\$371.00	\$372.57	11.2%	10,871	\$125.52	1.000	1.045	0.957	\$120.17	\$118.67	14.3%
10/19	10,788	\$505.89	1.000	1.164	0.859	\$434.73	\$371.85	8.6%	10,788	\$144.90	1.000	1.043	0.959	\$138.99	\$120.87	15.9%
11/19	10,709	\$578.67	1.000	1.141	0.876	\$507.10	\$382.59	10.9%	10,709	\$137.11	1.000	1.033	0.968	\$132.70	\$122.03	15.1%
12/19	10,494	\$488.84	1.000	1.140	0.877	\$428.75	\$388.76	11.1%	10,494	\$152.94	1.000	1.025	0.976	\$149.20	\$123.76	15.5%
1/20	17,174	\$441.79	1.000	1.066	0.938	\$414.27	\$395.80	11.7%	17,174	\$93.98	1.000	0.822	1.216	\$114.28	\$123.92	13.8%
2/20	17,330	\$446.85	1.000	1.073	0.932	\$416.47	\$400.18	10.9%	17,330	\$100.01	1.000	0.812	1.232	\$123.19	\$125.81	14.8%
3/20	17,483	\$343.88	1.000	1.067	0.937	\$322.15	\$398.26	10.8%	17,483	\$126.10	1.000	0.816	1.225	\$154.49	\$129.97	17.5%
4/20	17,613	\$292.07	1.000	1.061	0.942	\$275.25	\$387.18	7.2%	17,613	\$110.60	1.000	0.810	1.234	\$136.49	\$131.31	17.2%
5/20	17,669	\$335.73	1.000	1.056	0.947	\$318.04	\$377.25	3.2%	17,669	\$118.10	1.000	0.806	1.241	\$146.50	\$133.20	17.6%
6/20	17,694	\$426.98	1.000	1.041	0.960	\$410.00	\$383.07	3.9%	17,694	\$110.97	1.000	0.807	1.239	\$137.53	\$134.54	17.9%
7/20	17,552	\$429.63	1.000	1.058	0.946	\$406.23	\$385.52	4.9%	17,552	\$117.13	1.000	0.828	1.207	\$141.39	\$135.49	17.0%
8/20	17,177	\$415.89	1.000	1.052	0.950	\$395.15	\$384.85	3.9%	17,177	\$125.87	1.000	0.835	1.198	\$150.81	\$137.43	17.3%
9/20	17,182	\$380.03	1.000	1.046	0.956	\$363.39	\$383.70	3.0%	17,182	\$135.91	1.000	0.837	1.195	\$162.40	\$140.70	18.6%
10/20	17,075	\$501.79	1.000	1.050	0.953	\$478.03	\$389.13	4.6%	17,075	\$136.54	1.000	0.833	1.200	\$163.85	\$142.82	18.2%
11/20	16,969	\$427.24	1.000	1.051	0.951	\$406.34	\$384.31	0.4%	16,969	\$135.63	1.000	0.834	1.199	\$162.56	\$145.02	18.8%
12/20	16,761	\$468.00	1.000	1.052	0.951	\$444.87	\$386.95	(0.5%)	16,761	\$144.46	1.000	0.843	1.186	\$171.40	\$146.94	18.7%
1/21	17,695	\$439.30	1.000	1.092	0.916	\$402.34										

Highmark Benefits Group

Individual Market

Response to Objection 1 - Add'l Question 1b

Description	Medical	Rx	Total	Notes
2021 Allowed 12-Month PMPM With Covid	\$ 500.46	\$ 184.10	\$ 684.55	Source is supporting monthly PMPMs streams with Covid included.
2023 Allowed 12-Month PMPM With Covid	\$ 562.72	\$ 235.73	\$ 798.45	Source is supporting monthly PMPMs streams with Covid included.
2021 Covid Adjustment			0.968	Please see Attachment G from filing submission
2023 Covid Adjustment			1.010	Please see Attachment G from filing submission (prior to actuarial judgment)
2021 Allowed 12-Month PMPM Without Covid			\$ 662.69	Increase Claims to Remove Covid in 2021
2023 Allowed 12-Month PMPM Without Covid			\$ 790.54	Decrease Claims to Remove Covid in 2023
Allowed Annual Trend 2021 to 2023			9.2%	
Actuarial Judgment			-0.4%	Reasonable range around deterministic estimate applied including consideration for enrollment changes
Required Annual Trend Before Induced Demand Factor			8.75%	
Induced Demand Factor	0.46%	0.46%	0.46%	Difference in average metal AV from current benefits to 2023 benefits.
Required Annual Trend w/Induced Demand*			9.25%	

* Trends are then applied to the relevant mix for the entity and adjusted for Capitation to produce the resulting 9.24% as shown in Table 3.

Highmark Benefits Group

Individual Market

Response to Objection 1 - Add'l Question 1e

Table 1 - 2021 Development

HIOS Plan ID	2021 Member Months	2021 Induced Utilization Factor
79962PA0190007	38,586	1.112
79962PA0190006	38,244	1.126
79962PA0220004	6,327	1.126
79962PA0200003	3,147	1.055
79962PA0190009	1,166	1.063
79962PA0220003	378	1.063
79962PA0190005	10,875	1.175
79962PA0220002	966	1.175
79962PA0200002	58,515	1.138
79962PA0190001	52,911	1.021
79962PA0220001	2,547	1.021
79962PA0200001	7,883	1.024
79962PA0210001	1,454	0.999
Total	222,999	1.097

Table 2 - 2023 Development

HIOS Plan ID	2023 Projected Member Months	2023 Induced Utilization Factor
79962PA0270005	40,380	1.119
79962PA0280003	2,904	1.119
79962PA0300002	28,452	1.142
79962PA0310002	7,584	1.142
79962PA0290002	3,840	1.097
79962PA0270004	1,416	1.061
79962PA0280002	432	1.061
79962PA0300001	5,640	1.184
79962PA0310001	960	1.184
79962PA0270003	39,540	1.143
79962PA0270001	29,892	1.033
79962PA0280001	3,324	1.033
79962PA0290001	8,868	1.041
79962PA0270002	3,240	1.011
79962PA0320001	1,260	0.999
Total	177,732	1.108

Table 3 - Development of Change in Induced Utilization

2021 Induced Utilization Factor	1.097
<u>2023 Induced Utilization Factor</u>	<u>1.108</u>
Change in Induced Utilization	1.009
Annual Change	<u>1.005</u>
Table 3 Value	0.46%

Highmark Benefits Group**Individual Market****Response to Objection 1 - Add'l Question 2a**

	HBG
2021 Allowed PMPM	\$699.53
Demographic Factor	1.939
Network Factor	0.975
Benefit Richness Factor	1.097
Normalized Allowed PMPM	\$337.05

Highmark Benefits Group

Individual Market

Response to Objection 1 - Add'l Question 2b

Population Source	2023 Member Distribution	
	Actual	Assumed
HBG ACA	84.8%	85.0%
Other Highmark	2.6%	2.5%
Prior ACA	0.6%	0.5%
<u>New-to-Blue</u>	<u>12.0%</u>	<u>12.0%</u>
Total	100.0%	100.0%

Highmark Benefits Group

Individual Market

Response to Objection 1 - Add'l Question 2c

	HBG				Combined
	Renewal	Other Highmark	Prior ACA	New	Total
2023 Member Months	151,072	4,443	889	21,328	177,732
2023 Member Months %	85.0%	2.5%	0.5%	12.0%	100.0%
2021 or 2020 Allowed PMPM*	\$682.67	\$777.05	\$230.49	N/A	
Trend from 2020 to 2021	N/A	N/A	1.071	N/A	
Death Load Adjustment	1.055	1.055	1.055	N/A	
Adjusted Allowed PMPM	\$720.21	\$819.78	\$260.44	\$658.50	\$713.00
Demographic Factor	1.990	1.831	1.869	1.806	1.963
Network Factor	0.976	1.000	1.000	1.000	0.979
Benefit Richness Factor	1.099	1.080	1.080	1.080	1.096
Normalized Allowed PMPM	\$337.62	\$414.48	\$129.00	\$337.62	\$338.50

*The 'Renewal' & 'Other Highmark' sources start with 2021 experience. The 'Prior ACA' source starts with 2020 experience.

Highmark Benefits Group

Individual Market

Response to Objection 1 - Add'l Question 3a

Month	Actual 2021 Member Months	Actual 2021 Medical Allowed PMPM	PMPM	%
202101	17,695	\$346.26		
202102	17,894	\$366.03		
202103	17,826	\$513.23		
202104	17,972	\$455.64		
202105	18,182	\$402.22		
202106	18,450	\$430.63		
202107	18,837	\$435.34		
202108	19,155	\$486.98		
202109	19,445	\$523.50		
202110	19,504	\$571.64		
202111	19,479	\$507.78		
<u>202112</u>	<u>19,407</u>	<u>\$483.23</u>		
Total	223,846	\$461.92		
Estimated 2021 Medical Allowed Baseline			\$444.34	
Actual 2021 COVID-19 Costs				
Testing			\$5.53	1.2%
Treatment/Care			\$15.82	3.6%
Vaccines			<u>\$3.18</u>	0.7%
Actual 2021 Medical Allowed w/o COVID-19 Costs			\$437.40	
Impact of Deferred/Rescheduled/Induced Care			<u>(\$6.95)</u>	<u>(1.6%)</u>
Total Medical Impact of COVID-19			\$17.58	4.0%

Highmark Benefits Group

Individual Market

Response to Objection 1 - Add'l Question 3b

CY2023 COVID-19 Adjustment Development	PMPM	%
Estimated 2023 Medical Allowed Baseline	\$461.10	
Estimated 2023 COVID-19 Costs		
Testing	\$0.65	0.1%
Treatment/Care	\$3.01	0.7%
Vaccines	\$2.05	0.4%
Deferred/Rescheduled/Induced Care	<u>(\$0.29)</u>	<u>(0.1%)</u>
Total Medical Impact of COVID-19	\$5.41	1.2%

Highmark Benefits Group

Individual Market

Response to Objection 1 - Add'l Question 4

Table 1 - 2021 Development

HIOS Plan ID	2021 Member Months	2021 Network Factors				
		Medical	Rx	Capitation	Dental	Total
79962PA0190007	38,586	0.968	1.000	1.000	1.000	
79962PA0190006	38,244	0.968	1.000	1.000	1.000	
79962PA0220004	6,327	0.968	1.000	1.000	1.000	
79962PA0200003	3,147	0.968	1.000	1.000	1.000	
79962PA0190009	1,166	0.968	1.000	1.000	1.000	
79962PA0220003	378	0.968	1.000	1.000	1.000	
79962PA0190005	10,875	0.968	1.000	1.000	1.000	
79962PA0220002	966	0.968	1.000	1.000	1.000	
79962PA0200002	58,515	0.968	1.000	1.000	1.000	
79962PA0190001	52,911	0.968	1.000	1.000	1.000	
79962PA0220001	2,547	0.968	1.000	1.000	1.000	
79962PA0200001	7,883	0.968	1.000	1.000	1.000	
79962PA0210001	1,454	0.968	1.000	1.000	1.000	
Total	222,999	0.968	1.000	1.000	1.000	0.973
Weight		82.92%	17.02%	0.02%	0.03%	100.0%

Table 2 - 2023 Development

HIOS Plan ID	2023 Projected Member Months	Induced Utilization Factor	2023 Network Factors				
			Medical	Rx	Capitation	Dental	Total
79962PA0270005	40,380	1.119	0.980	1.000	1.000	1.000	
79962PA0280003	2,904	1.119	0.980	1.000	1.000	1.000	
79962PA0300002	28,452	1.142	0.980	1.000	1.000	1.000	
79962PA0310002	7,584	1.142	0.980	1.000	1.000	1.000	
79962PA0290002	3,840	1.097	0.980	1.000	1.000	1.000	
79962PA0270004	1,416	1.061	0.980	1.000	1.000	1.000	
79962PA0280002	432	1.061	0.980	1.000	1.000	1.000	
79962PA0300001	5,640	1.184	0.980	1.000	1.000	1.000	
79962PA0310001	960	1.184	0.980	1.000	1.000	1.000	
79962PA0270003	39,540	1.143	0.980	1.000	1.000	1.000	
79962PA0270001	29,892	1.033	0.980	1.000	1.000	1.000	
79962PA0280001	3,324	1.033	0.980	1.000	1.000	1.000	
79962PA0290001	8,868	1.041	0.980	1.000	1.000	1.000	
79962PA0270002	3,240	1.011	0.980	1.000	1.000	1.000	
79962PA0320001	1,260	0.999	0.980	1.000	1.000	1.000	
Total	177,732		0.980	1.000	1.000	1.000	0.983
Weight			82.92%	17.02%	0.02%	0.03%	100.0%

Table 3 - Development of Change in Network Factor

2021 Network Factor	0.973
2023 Network Factor	0.983
Change in Network Factor	1.010

Highmark Benefits Group**Individual Market****Response to Objection 1 - Add'l Question 5**

Description	Factor
Change in Rx Rebates	0.993
<u>Change in Hospital/Physician Settlements</u>	<u>1.001</u>
Change in Other	0.994

Highmark Benefits Group

Individual Market

Response to Objection 1 - Add'l Question 6a

	HBG				Combined
	Renewal	Other Highmark	Prior ACA	New	Total
2023 Billable Member Months	150,755	4,434	887	21,283	177,359
2023 Billable Member Months %	85.0%	2.5%	0.5%	12.0%	100.0%
2023 Company-specific Factors					
PLRS					
ARF					
GCF					
IDF					
AV					
2021 RATEE Factors					
PLRS					
ARF					
GCF					
IDF					
AV					

Highmark Benefits Group

Individual Market

Response to Objection 1 - Add'l Question 6b

Table 1

Statewide Assumptions	Starting Value for 2023 Projection	Source of Starting Value	Adjustment for 2023	2023 Factor on Attachment B
Non-Catastrophic Pool				
Average Premium		2021 Estimate based on PID RATEE Analysis		
HHS Risk Score		2021 Estimate based on PID RATEE Analysis		
Allowable Rating Factor		2021 Estimate based on PID RATEE Analysis		
Geographic Cost Factor		2021 Estimate based on CMS Interim Report		
Induced Demand Factor		1Q 2022 PID Enrollment Survey (see Table 2 below)		
Actuarial Value		1Q 2022 PID Enrollment Survey (see Table 2 below)		
Catastrophic Pool				
State Avg Premium		2021 Estimate based on PID RATEE Analysis		
HHS Risk Score		2021 Estimate based on PID RATEE Analysis		
Allowable Rating Factor		2021 Estimate based on PID RATEE Analysis		
Geographic Cost Factor		2021 Estimate based on CMS Interim Report		
Induced Demand Factor		1Q 2022 PID Enrollment Survey (see Table 2 below)		
Actuarial Value		1Q 2022 PID Enrollment Survey (see Table 2 below)		

Table 2

Metal	1Q 2022 Enrollment*		AV Factors	ID Factors
	Member Mths	%		
Gold			0.80	1.08
Silver			0.70	1.03
Bronze			0.60	1.00
Catastrophic			0.57	1.00
Total				

*Source: May 5, 2022 email from PID

Table 3

Statewide Assumptions	2023 Factor on Attachment B	2021 Factor from CMS Interim Report
Non-Catastrophic Pool		
Average Premium		
HHS Risk Score		
Allowable Rating Factor		
Geographic Cost Factor		
Induced Demand Factor		
Actuarial Value		
Catastrophic Pool		
State Avg Premium		
HHS Risk Score		
Allowable Rating Factor		
Geographic Cost Factor		
Induced Demand Factor		
Actuarial Value		

Highmark Benefits Group**Individual Market****Response to Objection 1 - Add'l Question 6e**

Description	Value
Assumed HCRP % of Premium Charge	0.40%
Projected Required Revenue PMPM	\$726.44
Projected HCRP Charge PMPM	(\$2.91)



July 14, 2022

Mr. James Lavery, Actuary
Bureau of Life, Accident & Health Insurance
Commonwealth of Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

Re: Highmark Benefits Group 2023 ACA Rate Filing (Individual Market)
Highmark Filing # 1A-DP-22-HBG (SERFF Filing # HGHM-133249727)

Dear Mr. Lavery:

Enclosed are responses to your July 6, 2022 questions regarding SERFF Filing # HGHM-133249727. We have included your questions along with our responses for your convenience. In conjunction with these responses, we are also submitting revisions to the following documents in SERFF:

- In response to Question 1, the 2021 experience period risk adjustment amount found in Table 2 of the PAAM Exhibits has been updated to reflect the final amount released by CMS on June 30, 2022.

Should you have any further questions regarding this Filing, please feel free to contact me at [REDACTED] or via e-mail at: [REDACTED]

Sincerely,

[REDACTED]

Actuarial Director, Individual Markets
Highmark Inc.

1. Please update the 2021 experience period risk adjustment amount, in Table 2, to reflect the final CMS risk adjustment amount released on June 30th.

Response:

The 2021 experience period risk adjustment amount in Table 2 has been updated to reflect the final amount released by CMS on June 30, 2022.

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

Response:

The Company does not intend to modify its projected 2023 risk adjustment transfer amounts based on the 2021 results.

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

Response:

We have tested and confirmed that the rates in Table 11 of the Actuarial Memorandum Exhibits, the PA Plan Design Summary and Rate Tables, and the Federal Rates Template are identical.

4. Please ensure that the 7/14/22 versions of the following items are posted in SERFF with your July 14th response to this data call.

- a. Cover Letter identifying all changes made and the reasons for the change. Also, show the revised rate change.
- b. PA Actuarial Memorandum
- c. PA Actuarial Memorandum Exhibits
- d. Department's Plan Design Summary and Rate Template Exhibits (please ensure that the rate template by county is populated with only numeric values – no "NA")
- e. URRT
- f. Federal Rate Template
- g. Part III: Actuarial Memorandum
- h. Updated Rate Change Request Summary (Attachment I)
- i. Public PDF with limited redactions as previously directed in the Guidance (includes all correspondence and supporting exhibits after the initial submission, in addition to all the above items).

Response:

All of the relevant rate filing documents are being updated and submitted in SERFF in conjunction with these responses.

Please answer these additional questions.

1. The following questions relate to the MLR used in pricing:

- a. Historically, the pricing MLR was higher than the actual MLR in the past. Please explain the cause of this relationship and whether this relationship was considered in the development of this rate filing.

b. Please confirm if a MLR rebate has been paid or if the company anticipates doing so.

Response:

- a. As represented in the historical MLR exhibit, the Company was a new entrant to the Individual market in 2020. The actual-to-expected MLR variances in 2020 was largely driven by the impact that the COVID-19 pandemic had on the claim experience for this year. We view the COVID-19 pandemic as a unique item that impacted the 2020 results but would not have a direct bearing on the 2023 rate development.
- b. A MLR rebate was paid by the Company for the 2020 rebate year (based upon experience from 2018-2020). Although not yet finalized, the Company does not anticipate paying a MLR rebate for the 2021 rebate year (based upon experience from 2019-2021). Covid deferred care impacts were a contributing factor in the requirement to pay MLR rebates.

2. The following plans have rate increases higher than 15%, thus requiring a Part II justification:

- a. 79962PA0290001
- b. 79962PA0300001
- c. 79962PA0320001

Response:

The Part II Justification was submitted under of the URRT section in SERFF.

3. Please indicate if the risk adjustment assumption will be modified or not based on the most recent receipt of CMS 2021 Benefit Year Transfer Payment Report.

Response:

The Company does not intend to modify its projected 2023 risk adjustment transfer amounts based on the 2021 results.



An Independent Licensee of the Blue Cross and Blue Shield Association

July 20, 2022

Mr. James Lavery, Actuary
Bureau of Life, Accident & Health Insurance
Commonwealth of Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

Re: Highmark Benefits Group 2023 ACA Rate Filing (Individual Market)
Highmark Filing # 1A-DP-22-HBG (SERFF Filing # HGHM-133249727)

Dear Mr. Lavery:

Enclosed are responses to your July 18, 2022 questions regarding SERFF Filing # HGHM-133249727. We have included your questions along with our responses for your convenience.

Should you have any further questions regarding this Filing, please feel free to contact me at [REDACTED] or via e-mail at: [REDACTED]

Sincerely,

[REDACTED]

Actuarial Director, Individual Markets
Highmark Inc.

1. Have you implemented any incentives for providers and enrollees to continue managing health care cost and claims for individuals eligible for reinsurance (individual ACA compliant enrollees)? If yes, please provide a high-level description of the incentive.

Response:

The Company's utilization management programs and any provider incentives apply consistently to members regardless of whether or not they reach eligibility for claims reinsurance.

2. It was noted in the PY23 rate filing that the CSR Defunding Adjustment factor would be 1.22 if ARPA subsidies were extended.

At this point are you still comfortable keeping the CSR factor at 1.22 if subsidies are extended? In addition, please explain if any other favorable adjustments should be made (due to increased membership, improving morbidity, etc.) if subsidies are extended. If so, please provide a range on what any such adjustment would be (i.e. 0.98 to 1.0).

Response:

The Company is comfortable with applying a 1.22 CSR Defunding Adjustment factor if ARPA subsidies are extended for 2023. We would expect membership to increase if ARPA subsidies are extended, but not materially impact rates.

3. Please explain why the company anticipates the projected membership to decline by approximately 20%.

Response:

Due to expected continuation of competitive rate pressures in the HBG footprint and ARPA enhanced subsidies discontinuation, we are expecting a significant enrollment decrease.

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Unified Rate Review v5.4

Company Legal Name:Highmark Benefits Group

HIOS Issuer ID:79962

Effective Date of Rate Change(s):01/01/2023

State:PA

Market:Individual

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

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

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

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

Market Level Calculations (Same for all Plans)

Section I: Experience Period Data

Experience Period:01/01/2021to12/31/2021

TotalPMPM

Allowed Claims	\$147,625,792.62	\$662.00
Reinsurance	\$6,782,590.31	\$30.42
Incurred Claims in Experience Period	\$119,182,719.42	\$534.45
Risk Adjustment	\$1,064,545.00	\$4.77
Experience Period Premium	\$136,684,162.62	\$612.94
Experience Period Member Months	222,999	

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	\$145.07	1.040	1.046	1.040	1.046	\$171.68
Outpatient Hospital	\$239.96	1.040	1.046	1.040	1.046	\$283.97
Professional	\$142.93	1.040	1.046	1.040	1.046	\$169.14
Other Medical	\$17.33	1.040	1.046	1.040	1.046	\$20.51
Capitation	\$0.20	0.771	1.000	1.000	1.000	\$0.15
Prescription Drug	\$115.60	1.040	1.046	1.040	1.046	\$136.80
Total	\$661.09					\$782.25

Morbidity Adjustment	0.977
Demographic Shift	1.012
Plan Design Changes	1.000
Other	1.013
Adjusted Trended EHB Allowed Claims PMPM for01/01/2023	\$783.48
Manual EHB Allowed Claims PMPM	\$0.00
Applied Credibility %	100.00%

Projected Period Totals

Projected Index Rate for01/01/2023	\$783.48	\$139,249,467.36
Reinsurance	\$37.35	\$6,638,290.20
Risk Adjustment Payment/Charge	-\$15.00	-\$2,665,980.00
Exchange User Fees	2.91%	\$4,054,552.76
Market Adjusted Index Rate	\$783.94	\$139,331,709.92

Projected Member Months	177,732
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Information Not Releasable to the Public Unless Authorized by Law: This information has not been publically disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.

Company Legal Name:	Highmark Benefits Group
HIOS Issuer ID:	79962
Effective Date of Rate Change(s):	01/01/2023

PA
individual

To remove a plan, navigate to the corresponding Plan Name/Plan ID field and select the Remove Plan button or Ctrl + Shift + A.

2 Product ID
3 Plan Name

[illegible]

\$147,625,793	2.2 Allowed Claims	\$147,625,793
\$6,782,500	2.3 Reinsurance	\$6,782,500

[illegible]

3.3 AV and Cost Sharing Design of Plan

[illegible]

3.14 Calibrated Plan Adjusted Index Rate

4.2 Allowed Claims
4.3 Reinsurance

[illegible]

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 3	1.0000

Part II of the Preliminary Justification

Highmark Benefits Group – Individual Market

Scope and Range:

Highmark Benefits Group is requesting an average ACA individual market rate change of 13.2%, ranging from 11.0% to 18.1%. Products submitted with this filing will have effective dates from January 1, 2023 to December 31, 2023. This rate change is projected to affect 18,098 members.

Historical Financial Experience:

Highmark Benefits Group incurred an underwriting gain in its ACA individual market programs in 2021.

Change in Medical Service Costs:

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

Change in Benefits and Cost Sharing:

Some cost sharing parameters were changed in order to maintain compliance with Federal AV requirements. Additionally, some out of pocket maximum parameters were changed to keep up with the rising cost of health care. These out of pocket maximum changes also aided in mitigating the rate increase.

Administrative Costs and Anticipated Operating Results:

The anticipated administrative costs and operating results are not excessive or unreasonable. In accordance with regulations, the projected medical loss ratio is over 80%.

Part III Actuarial Memorandum

Highmark Benefits Group

Individual Rate Filing

Effective January 1, 2023

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I. General Information

Document Overview

This document contains the Part III Actuarial Memorandum for Highmark Benefits Group's (HBG) individual block of business rate filing, for products with an effective date of January 1, 2023. This actuarial memorandum is submitted in conjunction with the Part I Unified Rate Review Template.

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

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

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

I.1 Company Identifying Information:

- Company Legal Name: Highmark Benefits Group
- State: The Commonwealth of Pennsylvania has regulatory authority over these policies.
- HIOS Issuer ID: 79962
- Market: Individual
- Effective Date: January 1, 2023

I.2 Company Contact Information:

- Primary Contact Name: [REDACTED]
- Primary Contact Telephone Number: [REDACTED]
- Primary Contact Email Address: [REDACTED]

II. Proposed Rate Changes

For all rate increases by plan, see the ‘Cumulative Rate Change % (over 12 mos prior)’ found in Worksheet 2, line 1.11 of the URRT. The rate increase varies by plan due to an update in several of our pricing factors and changes in cost sharing required to meet Actuarial Value and other cost sharing restrictions under the Affordable Care Act as well as mappings between discontinued and new plans.

The primary drivers of the rate increase are cost and utilization trend and changes to the reinsurance parameters.

In accordance with the Department’s August 23, 2022 guidance, the impact of the state 1332 Reinsurance program is captured using the prescribed parameters of \$60,000 attachment point, 53% coinsurance rate, and \$100,000 reinsurance cap. If the final parameters should change from those described in this filing, a revised submission would be required.

Other assumptions in the filing account for the ongoing impact of the COVID-19 pandemic and the lack of Federal CSR funding. The continuation of American Rescue Plan Act (ARPA) level enhanced subsidies in the Inflation Reduction Act was considered in the rate development but no adjustment was included at this time. Finally, modifications to the rate development may be necessary if significant unforeseen events occur. Examples include, but are not limited to, changes in legislation/regulations (including rules, regulatory guidance, etc.), changes in the participation of QHP issuers that would materially impact risk adjustment transfer amounts, Medicaid redetermination policy impacts, or material developments in the course of the COVID-19 pandemic. As a result, HBG reserves the right to submit a revised filing.

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

III.1 Paid through Date:

Experience Period claims were based on incurred calendar year 2021, paid through February 2022. This includes 2021 experience in Affordable Care Act compliant plans. HBG did not offer any transitional plans in 2021.

III.2 Current Date:

The current date shown represents a snapshot of February 1, 2022.

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

- Historical Experience: We chose HBG’s current experience for the individual block of business for the period January 1, 2021 through December 31, 2021, with claims paid through February, 2022 as the basis for the 2023 projected individual market pricing.
- Claims Incurred During the 12-month Experience Period: Worksheet 1, Section I shows our best estimate of the amount of claims that were incurred during the 12-

month experience period for HBG's individual book-of-business. This section includes:

- The amount of claims which were processed through Company's claims system,
 - Claims processed outside of the Company's claims system, and
 - Our best estimate of claims incurred but not paid as of the paid through date stated above.
- Method for Determining Allowed Claims: For non-capitated claims, the allowed charges are summarized from The Company's detailed claim-level historical data. This experience includes 2021 claims for Affordable Care Act compliant business. For capitated and other off-system claims, historical capitations and experience were tabulated and added to the claims.
 - Paid Claims: We also summarized the paid claims from detailed member records. The paid-to-allowed ratio for the experience period reflects the 2021 plan designs chosen by each member.
 - Incurred but Not Paid (IBNR) Claims Estimate: The Company is using a completion factor of 0.9659 to include IBNR claims in allowed charges. The IBNR completion factor was developed using our corporate reserving system for The Company's individual business. We applied it equally to both paid and allowed total claims (as a change to utilization) to complete the experience.

IV. Benefit Categories

The index rate of the experience period was summarized at the defined benefit categories included in Worksheet 1, Section II of the URRT.

The data provided in this section closely adheres to the preferred definitions of the Benefit Categories included in the URRT instructions, including the "Other Medical" category. The "Other Medical" category units reflect visits for PDN/home health, trips for ambulance and procedures for DME/prosthetics. Prescription drugs utilization were converted to a "per 30-day" script count.

V. Projection Factors

V.1 Trend Factors

This development of the CY2023 rates reflects an annual trend rate of 8.75% (4.0% cost, 4.6% utilization). These trends reflect HBG's expectations regarding increases in in-network contractual reimbursement and out-of-network costs. These estimates measure and normalize for some of the more explainable variables such as high dollar claims, work days, provider contracting, demographics, and seasonality.

The trend represents a blended average for all types of service and is applied to the aggregate experience for pricing. These trends represent assumed community-wide expectations. Claim variations due to the specific projected enrolled population in this single risk pool are reflected in the morbidity adjustment.

V.2 Changes in the Morbidity of the Population Insured

The Change in Morbidity adjustment of 0.977 is comprised of the following: the morbidity impact from claims experience and an adjustment to account for the impact of Covid-19. In accordance with the Department's guidance, the morbidity change related to the Reinsurance program is set to 1.000. Each of the components is described in more detail below.

The Morbidity Impact from Claims Experience

This adjustment reflects the change in the population mix/claim levels from the experience period to the projection period. We continue to observe a high degree of membership churn from year-to-year, which impacts the morbidity. This factor also takes into consideration the effects of adverse selection inherent to guaranteed issue markets. The Individual ACA risk pool continues to have a significantly higher proportion of older members with a high prevalence of chronic conditions compared to group business, which adds to the uncertainty of any future claim projections.

Covid-19 Impact

In order to account for the impact of COVID-19 on projected claim costs, the Company took the following steps:

1. Adjusted the claims in the base experience period to a non-COVID-19 baseline. This was done to stabilize the base from which claims are being projected. The base period adjustment accounts for the impacts of testing, treatment, vaccines, and deferred/rescheduled/induced care. Claims in the base experience period were decreased by a factor of 0.968 to remove the impact of COVID-19.
2. Projected claims to the projection period using trends with the impact of COVID-19 excluded. Again, this provides for a more stable projection of future claims, before applying the anticipated impact of COVID-19 in the projection period. This was

accomplished by applying a trend of 8.75% (which excludes any impact from COVID-19) to our adjusted BEP claims.

3. The projected claims were then further adjusted by applying the anticipated impacts of COVID costs expected in the projection period. The following components were accounted for:
 - a. COVID Testing (0.1% claims impact) – Proportional to new cases, which are assumed to diminish over time and be lower in the projection period than in previous years.
 - b. COVID Treatment/Care (0.7% claims impact) – Proportional to new cases, which are assumed to diminish over time and be lower in the projection period than in previous years. Additionally, new variants are expected to be less severe.
 - c. Vaccines (0.4% claims impact) – Assumes insurers will cover vial cost and administration cost; however, booster utilization is expected to diminish.
 - d. Deferred/Rescheduled/Induced Care (-0.1% claims impact) – Includes care that didn't happen because it wasn't necessary (like ER visits), because it couldn't get scheduled (like inpatient stays when the beds are filled with COVID patients), and care that patients chose to defer (like elective procedures). For the projection period, the primary driver of avoided care is displaced non-COVID care.
 - e. Actuarial Judgement (-0.5% claims impact) – The Company reviewed the composite CY2023 COVID impact resulting from the components outlined above and elected to temper the adjustment in light of the inherent unpredictability of items such as deferred care and treatment costs

The application of the above COVID claim adjustments to the rating period results in a COVID adjustment factor of 0.973.

V.3 Changes in Demographics

We project that the average rating factor (age, tobacco load and area combined) will increase by about 1.2% due to the change in the population. This is primarily due to the expectation that the new members from the group and/or uninsured populations to be slightly older than the population in the underlying experience. This increases the projected allowed claims (utilization) by the same amount.

V.4 Changes in Benefits

There is no change in benefits related to the essential health benefit (EHB) categories so the factor is set to 1.0. The cost sharing changes for the EHBs are captured in the paid to allowed ratio factors discussed in the AV and Cost Sharing Design of Plan section X.1.

V.5 Changes in Other

The 1.013 factor represents the combined impact of changes in network, induced demand, pharmacy rebates, hospital/physician settlements, and state mandates/laws (when applicable).

VI. Manual Rate Adjustments

HBG's individual experience is fully credible. No manual rate is developed or used in this projection.

VII. Credibility of Experience

The experience is from HBG's individual book of business in 2021. It is large enough to be fully credible. Our results are based 100% on the experience rate, as adjusted.

VIII. Index Rate

The index rates as shown on Worksheet 1 of the URRT are simply the single risk pool average allowed claims for the Essential Health Benefits for the experience and projected populations, respectively, for HBG. For the experience period, only non-grandfathered plans are included. The projection period Index Rate is not adjusted for reinsurance or risk adjustment programs or any other fee.

IX. Market Adjusted Index Rate [MAIR]

The Market Adjusted Index Rate is the Projected Index Rate further adjusted for risk adjustment and the exchange fee.

IX.1 Projected Reinsurance PMPM

As outlined in the waiver application, the State is anticipating the Reinsurance Program will have the following parameters for 2023: an attachment point of \$60,000, a coinsurance rate of 53%, and a cap of \$100,000. HBG estimated the impact of the reinsurance program under these tentative parameters by trending Highmark PA individual ACA CY2021 incurred claims by member to the CY2023 rating period, applying the parameters, and calculating the amount of incurred claims expected to be reimbursed by the program. The modeling produced an estimated incurred claims savings of 4.8%. This percentage was converted to a PMPM and adjusted to an equivalent allowed claim basis by dividing the PMPM by the paid-to-allowed factor and the composite effect of catastrophic eligibility. This amount is reflected in worksheet 1 of the URRT.

IX.2 Projected Risk Adjustment PMPM:

The estimated average risk score for HBG's projected 2023 population was developed by using HBG's 2021 claim diagnoses and the risk adjustment coefficients as finalized in the Notice of Benefit and Payment Parameters. Similarly, actuarial value factors and induced demand factors were estimated for HBG based upon its projected 2023 population.

We estimated the statewide average risk transfer factors based on current market assumptions. We estimated the statewide average premium using current market premium assumptions with adjustments for anticipated rate changes for 2023.

The actual calculation of the risk transfer followed the risk transfer methodology as prescribed.

The analysis resulted in HBG paying to the risk adjustment pool. The (\$15.00) PMPM value shown in worksheet 1 of the URRT is developed by taking the expected risk transfer amount plus the projected High Cost Risk Pool charge and adjusting it to an equivalent allowed claims basis by dividing it by the paid-to-allowed factor and the composite effect of catastrophic eligibility and benefits in addition to EHB.

For the purposes of this rate filing, HBG has assumed no adjustment to the projected risk adjustment transfer for the Risk Adjustment Data Validation (RADV) program.

IX.3 Exchange User Fee %

The 2.91% value shown in worksheet 1 of the URRT is developed by multiplying the 3% exchange user fee by the assumed percentage of on exchange membership. This calculated amount is then divided by the paid-to-allowed factor to bring it to an equivalent allowed claims basis and adjusted further for the composite effect of catastrophic eligibility and benefits in addition to EHB.

X. Plan Adjusted Index Rates [PAIR]

The Plan Adjusted Index Rates can be found on line 3.10, Worksheet 2 of the URRT. The PAIR rates are calculated by applying the allowable rating factors as described below to the Market Adjusted Index Rate.

X.1 AV and Cost Sharing Design of Plan

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

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

Impact of Non-Payment of Cost Sharing Reduction Subsidies

In accordance with the Department's guidance, we have applied an additional adjustment to our AV pricing values for those Silver plans not offered exclusively off-exchange. This adjustment factor was 1.22 and represents the non-payment of Cost Sharing Reduction subsidies.

X.2 Provider Network Adjustment

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

X.3 Benefits in Addition to EHB

Non-EHB benefits have been added to several plans. Five plans have an adult dental and vision benefit and four plans have a hearing, OTC, and personal assistance (i.e. Papa Pals) benefit.

X.4 Administrative Expense

The proposed rates reflect internal administrative costs including quality improvement administrative expenses. This cost was developed based on standard expense allocation methods.

X.5 Taxes and Fees:

The following fees were added:

- \$0.22 PMPM for Risk Transfer User Fee
- \$0.26 PMPM for Patient Centered Outcomes Research Institute (PCORI) Fee
- 0.0% for the Health Insurance Provider Fee
- 0.0% for the PA Premium Tax

X.6 Profit (or Contribution to Surplus) & Risk Margin:

HBG has voluntarily refrained from including a risk and contingency factor in this filing. By this voluntary restraint, HBG is not waiving any right to include a risk and contingency factor which HBG believes is consistent with historical and legal interpretations of HBG and the Pennsylvania Insurance Department.

X.7 Catastrophic Adjustment

For catastrophic plans, we use a 0.92 factor for the specific eligibility adjustment.

XI. Calibration

XI.1 Age Curve Calibration:

The projected weighted average age factor for billable members is 1.948. This factor is calculated by dividing the all members age factor of 1.946 by the ratio of billable members to total members 0.9991. The age curve calibration factor is $1/1.948 = 0.5133$.

XI.2 Geographic Calibration Factor:

The projected weighted average geographic factor is 1.000. Each Plan Adjusted Index Rate represents the rate for an average member with a geographic factor of 1.000. The geographic calibration factor is $1/1.000 = 1.000$.

XI.3 Tobacco Calibration Factor:

The projected weighted average tobacco factor is 1.008. Each Plan Adjusted Index Rate represents the rate for an average member with a tobacco factor of 1.008. The tobacco calibration factor is $1/1.008 = 0.9916$.

XI.4 Consumer Adjusted Premium Rate Development:

The calibrated plan adjusted index rate represents the base rate for an age factor of 1.0, geographic rating factor of 1.0 and tobacco rating factor of 1.0. Thus, the approximate premium for a specific member can be derived by multiplying this rate by the HHS age curve factor, the rating area factor on Worksheet 3 of the URRT, and the appropriate tobacco factor. Please note that this method will only produce approximate rates due to URRT rounding constraints.

XII. Projected Loss Ratio

The projected loss ratio for 2023 using the federally-prescribed MLR methodology is 92.5%.

XIII. AV Metal Values

The AV Metal Values included in Worksheet 2 of the Part I Unified Rate Review Template were based the Federal AV Calculator. Some plans did require an adjustment to the inputs entered into the AV calculator. Screen shots and certifications for these plans were submitted as part of HBG's QHP application. Per CMS's guidance, a dummy AV Metal Value was applied to any terminated plans that fell out of the new de minimis range.

XIV. Membership Projections

Membership projections reflect HBG's expectations for 2023. These projections reflect expected changes in market share due to market competition, relative price levels, and changes in plan offerings (where applicable).

HBG expects membership in 2023 to follow a similar metal level distribution as the Individual ACA experience period in the markets where plans will continue to be offered.

For the Silver level plans, the projected membership by cost sharing subsidy levels is based on the observed distribution of ACA members that were eligible under the federal poverty levels as determined by the federal health insurance exchange. The projected enrollment by plan and subsidy level is as follows:

CSR Silver Plan Membership Distribution			
FPL	Subsidy Level	% of Silver Membership	% of Total Membership
<150%	94%	32.9%	8.9%
150%-200%	87%	49.4%	13.3%
200%-250%	73%	6.7%	1.8%
<u>>250%</u>	<u>70%</u>	<u>11.0%</u>	<u>3.0%</u>
Total		100.0%	27.0%

XV. Terminated Plans and Products

Plans in the 2021 experience period that will no longer be available in 2023 can be found in Exhibit I. All 2022 EPO plans are being terminated and the similar PPO products will be offered in 2023. Members will be cross walked based on their 2022 plan selection into similar plans for 2023. Therefore, most of the 2023 plans are being marked as renewing so they are subjected to rate review.

XVI. Plan Type

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

XVII. Actuarial Certification

I, [REDACTED], am a member of the American Academy of Actuaries and meet its qualification standards for actuaries issuing statements of actuarial opinions in the United States. All statements in this actuarial certification are accurate to the best of my knowledge and understanding. This filing is prepared in compliance with applicable Actuarial Standards of Practice. In completing this filing, I relied on data/information from other sources which was reviewed for reasonableness. This filing is prepared on behalf of HBG to accompany its rate filing (for calendar year 2023) for the Individual Market on and off the Pennsylvania Exchange.

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

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

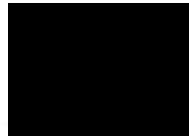
I certify that the index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates.

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

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

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

Signed:

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Title:

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Date: August 26, 2022

XVIII.**Exhibit I****Highmark Benefits Group****Terminated Experience Period Plans**

HIOS ID	Metal	Plan Name	2023 Mapping
79962PA0190001	Bronze	my Priority Blue Flex EPO Bronze 3800	79962PA0270001
79962PA0190005	Silver	my Priority Blue Flex EPO Silver 2900	79962PA0300001
79962PA0190006	Gold	my Priority Blue Flex EPO Gold 800	79962PA0300002
79962PA0190007	Gold	my Priority Blue Flex EPO Gold 0	79962PA0270005
79962PA0190009	Silver	my Priority Blue Flex EPO Silver 2600	79962PA0270004
79962PA0200001	Bronze	my Priority Blue Flex EPO Bronze 6900 HSA	79962PA0290001
79962PA0200002	Silver	my Priority Blue Flex EPO Silver 3450 HSA	79962PA0270003
79962PA0200003	Silver	my Priority Blue Flex EPO Silver 1850 HSA	79962PA0290002
79962PA0210001	Catastrophic	my Priority Blue Major Events EPO 8550 - 3 Free PCP Visits	79962PA0320001
79962PA0220001	Bronze	my Priority Blue Flex EPO Bronze 3800 + Adult Dental and Vision	79962PA0280001
79962PA0220002	Silver	my Priority Blue Flex EPO Silver 2900 + Adult Dental and Vision	79962PA0310001
79962PA0220003	Silver	my Priority Blue Flex EPO Silver 2600 + Adult Dental and Vision	79962PA0280002
79962PA0220004	Gold	my Priority Blue Flex EPO Gold 800 + Adult Dental and Vision	79962PA0310002

Terminated Plans Offered in 2022 Only

HIOS ID	Metal	Plan Name	2023 Mapping
79962PA0230001	Gold	my Priority Blue Flex EPO Premier Gold 0	79962PA0300002
79962PA0200004	Gold	my Priority Blue Flex EPO Gold 1400 HSA	79962PA0290002
79962PA0240001	Gold	my Priority Blue Flex EPO Premier Gold 0 + Adult Dental and Vision	79962PA0310002
79962PA0220005	Gold	my Priority Blue Flex EPO Gold 0 + Adult Dental and Vision	79962PA0280003

2023 Rates Table Template v12.0		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*		79962			
Rate Effective Date*		01/01/2023			
Rate Expiration Date*		12/31/2023			
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
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	288.63	288.63
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	15	314.29	314.29
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	16	324.10	324.10
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	17	333.91	333.91
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	18	344.47	344.47
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	19	355.04	355.04
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	20	365.98	365.98
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	21	377.30	386.73
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	22	377.30	386.73
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	23	377.30	386.73
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	24	377.30	386.73
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	25	378.81	388.28
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	26	386.36	396.02
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	27	395.41	405.30
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	28	410.13	420.38
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	29	422.20	432.76
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	30	428.24	438.95
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	31	437.29	448.22
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	32	446.35	457.51
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	33	452.01	463.31
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	34	458.04	469.49
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	35	461.06	472.59
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	36	464.08	475.68
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	37	467.10	478.78
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	38	470.12	481.87
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	39	476.15	488.05
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	40	482.19	530.41
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	41	491.24	542.82
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	42	499.92	555.91
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	43	512.00	573.95
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	44	527.09	596.67
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	45	544.82	623.82
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	46	565.95	656.50
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	47	589.72	694.10
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	48	616.89	737.80
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	49	643.67	783.35
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	50	673.86	825.48
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	51	703.66	861.98
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	52	736.49	902.20
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	53	769.69	942.87
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	54	805.54	986.79
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	55	841.38	1030.69
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	56	880.24	1078.29
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	57	919.48	1126.36
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	58	961.36	1177.67
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	59	982.11	1203.08
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	60	1023.99	1254.39
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	61	1060.21	1298.76
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	62	1083.98	1327.88
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	63	1113.79	1364.39
79962PA0270005	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1131.90	1386.58
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	306.63	306.63
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	15	333.88	333.88
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	16	344.30	344.30
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	17	354.73	354.73
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	18	365.95	365.95
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	19	377.17	377.17
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	20	388.80	388.80
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	21	400.82	410.84
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	22	400.82	410.84
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	23	400.82	410.84
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	24	400.82	410.84
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	25	402.42	412.48
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	26	410.44	420.70
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	27	420.06	430.56
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	28	435.69	446.58
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	29	448.52	459.73
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	30	454.93	466.30
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	31	464.55	476.16
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	32	474.17	486.02
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	33	480.18	492.18
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	34	486.60	498.77
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	35	489.80	502.05
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	36	493.01	505.34
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	37	496.22	508.63
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	38	499.42	511.91
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	39	505.83	518.48
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	40	512.25	563.48
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	41	521.87	576.67
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	42	531.09	590.57
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	43	543.91	609.72
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	44	559.95	633.86
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	45	578.78	662.70
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	46	601.23	697.43
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	47	626.48	737.37
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	48	655.34	783.79
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	49	683.80	832.18
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	50	715.86	876.93
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	51	747.53	915.72
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	52	782.40	958.44
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	53	817.67	1001.65
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	54	855.75	1048.29
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	55	893.83	1094.94
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	56	935.11	1145.51
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	57	976.80	1196.58
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	58	1021.29	1251.08
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	59	1043.33	1278.08
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	60	1087.83	1332.59
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	61	1126.30	1379.72
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	62	1151.56	1410.66
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	63	1183.22	1449.44
79962PA0280003	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1202.46	1473.01
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	306.75	306.75
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	15	334.02	334.02
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	16	344.44	344.44
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	17	354.87	354.87
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	18	366.09	366.09
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	19	377.32	377.32
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	20	388.95	388.95
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	21	400.98	411.00
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	22	400.98	411.00
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	23	400.98	411.00
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	24	400.98	411.00
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	25	402.58	412.64
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	26	410.60	420.87
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	27	420.23	430.74
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	28	435.87	446.77
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	29	448.70	459.92
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	30	455.11	466.49
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	31	464.74	476.36
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	32	474.36	486.22
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	33	480.37	492.38
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	34	486.79	498.96
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	35	490.00	502.25
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	36	493.21	505.54
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	37	496.41	508.82
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	38	499.62	512.11
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	39	506.04	518.69
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	40	512.45	563.70
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	41	522.08	576.90
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	42	531.30	590.81
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	43	544.13	609.97
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	44	560.17	634.11
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	45	579.02	662.98
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	46	601.47	697.71
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	47	626.73	737.66
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	48	655.60	784.10
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	49	684.07	832.51
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	50	716.15	877.28
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	51	747.09	916.09
79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	52	782.71	958.88

	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	53	818.00	1002.05
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	54	856.09	1048.71
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	55	894.19	1095.38
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	56	935.49	1145.98
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	57	977.19	1197.06
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	58	1021.70	1251.58
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	59	1043.75	1278.59
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	60	1088.26	1333.12
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	61	1126.75	1380.27
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	62	1152.02	1411.22
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	63	1183.69	1450.02
	79962PA0300002	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1202.94	1473.60
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	324.73	324.73
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	15	353.60	353.60
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	16	364.64	364.64
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	17	375.67	375.67
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	18	387.56	387.56
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	19	399.45	399.45
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	20	411.76	411.76
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	21	424.49	435.10
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	22	424.49	435.10
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	23	424.49	435.10
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	24	424.49	435.10
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	25	426.19	436.84
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	26	434.68	445.55
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	27	444.87	455.99
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	28	461.42	472.96
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	29	475.00	486.88
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	30	481.80	493.85
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	31	491.98	504.28
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	32	502.17	514.72
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	33	508.54	521.25
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	34	515.33	528.21
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	35	518.73	531.70
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	36	522.12	535.17
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	37	525.52	538.66
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	38	528.91	542.13
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	39	535.71	549.10
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	40	542.50	556.75
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	41	552.69	610.72
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	42	562.45	625.44
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	43	576.03	645.73
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	44	593.01	671.29
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	45	612.96	701.84
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	46	636.74	738.62
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	47	663.48	780.92
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	48	694.04	830.07
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	49	724.18	881.33
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	50	758.14	928.72
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	51	791.67	969.80
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	52	828.60	1015.04
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	53	865.96	1060.80
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	54	906.29	1110.21
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	55	946.61	1159.60
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	56	990.34	1213.17
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	57	1034.48	1267.24
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	58	1081.60	1324.96
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	59	1104.95	1353.56
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	60	1152.07	1411.29
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	61	1192.82	1461.20
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	62	1219.56	1493.96
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	63	1253.09	1535.04
	79962PA0310002	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1273.47	1560.00
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	272.11	272.11
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	15	296.30	296.30
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	16	305.55	305.55
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	17	314.79	314.79
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	18	324.75	324.75
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	19	334.71	334.71
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	20	345.03	345.03
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	21	355.70	364.59
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	22	355.70	364.59
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	23	355.70	364.59
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	24	355.70	364.59
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	25	357.12	366.05
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	26	364.24	373.35
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	27	372.77	382.09
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	28	386.65	396.32
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	29	398.03	407.98
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	30	403.72	413.81
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	31	412.26	422.57
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	32	420.79	431.31
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	33	426.13	436.78
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	34	431.82	442.62
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	35	434.67	445.54
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	36	437.51	448.45
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	37	440.36	451.37
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	38	443.20	454.28
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	39	448.89	460.11
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	40	454.58	500.04
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	41	463.12	511.75
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	42	471.30	524.09
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	43	482.68	541.08
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	44	496.91	562.50
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	45	513.63	588.11
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	46	533.55	618.92
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	47	555.96	654.36
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	48	581.57	695.56
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	49	606.82	738.50
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	50	635.28	778.22
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	51	663.38	812.64
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	52	694.33	850.55
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	53	725.63	888.90
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	54	759.42	930.29
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	55	793.21	971.68
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	56	829.85	1016.57
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	57	866.84	1061.88
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	58	906.32	1110.24
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	59	925.89	1134.22
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	60	965.37	1182.58
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	61	999.52	1224.41
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	62	1021.93	1251.86
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	63	1050.03	1286.29
	79962PA0290002	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1067.10	1307.20
	79962PA0270004	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	244.05	244.05
	79962PA0270004	Rating Area 3	Tobacco User/Non-Tobacco User	15	265.74	265.74
	79962PA0270004	Rating Area 3	Tobacco User/Non-Tobacco User	16	274.04	274.04
	79962PA0270004	Rating Area 3	Tobacco User/Non-Tobacco User	17	282.3	

	79962PA0270004	Rating Area 3	Tobacco User/Non-Tobacco User	60	865.82	1060.63
	79962PA0270004	Rating Area 3	Tobacco User/Non-Tobacco User	61	896.45	1098.15
	79962PA0270004	Rating Area 3	Tobacco User/Non-Tobacco User	62	916.54	1122.76
	79962PA0270004	Rating Area 3	Tobacco User/Non-Tobacco User	63	941.75	1153.64
	79962PA0270004	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	957.06	1172.40
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	262.04	262.04
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	15	285.34	285.34
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	16	294.24	294.24
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	17	303.15	303.15
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	18	312.74	312.74
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	19	322.33	322.33
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	20	332.26	332.26
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	21	342.54	351.10
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	22	342.54	351.10
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	23	342.54	351.10
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	24	342.54	351.10
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	25	343.91	352.51
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	26	350.76	359.53
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	27	358.98	367.95
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	28	372.34	381.65
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	29	383.30	392.88
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	30	388.78	398.50
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	31	397.00	406.93
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	32	405.22	415.35
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	33	410.36	420.62
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	34	415.84	426.24
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	35	418.58	429.04
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	36	421.32	431.85
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	37	424.06	434.66
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	38	426.80	437.47
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	39	432.29	443.10
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	40	437.77	441.55
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	41	445.99	492.82
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	42	453.87	504.70
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	43	464.83	521.07
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	44	478.53	541.70
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	45	494.63	566.35
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	46	513.81	596.02
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	47	535.39	630.15
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	48	560.05	669.82
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	49	584.37	711.18
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	50	611.78	749.43
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	51	638.84	782.58
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	52	668.64	819.08
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	53	698.78	856.01
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	54	731.32	895.87
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	55	763.86	935.73
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	56	799.15	978.96
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	57	834.77	1022.59
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	58	872.79	1069.17
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	59	891.63	1092.25
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	60	929.65	1138.82
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	61	962.54	1179.11
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	62	984.12	1205.55
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	63	1011.18	1238.70
	79962PA0280002	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1027.62	1258.83
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	336.18	336.18
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	15	366.06	366.06
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	16	377.49	377.49
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	17	388.91	388.91
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	18	401.22	401.22
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	19	413.52	413.52
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	20	426.27	426.27
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	21	439.45	450.44
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	22	439.45	450.44
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	23	439.45	450.44
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	24	439.45	450.44
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	25	441.21	452.24
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	26	450.00	461.25
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	27	460.54	472.05
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	28	477.68	489.62
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	29	491.74	504.03
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	30	498.78	511.25
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	31	509.32	522.05
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	32	519.87	532.87
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	33	526.46	539.62
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	34	533.49	546.83
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	35	537.01	550.44
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	36	540.52	554.03
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	37	544.04	557.64
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	38	547.55	561.24
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	39	554.59	568.45
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	40	561.62	617.78
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	41	572.16	632.24
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	42	582.27	647.48
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	43	596.33	668.49
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	44	613.91	694.95
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	45	634.57	726.58
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	46	659.18	764.65
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	47	686.86	808.43
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	48	718.50	859.33
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	49	749.70	912.38
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	50	784.86	961.45
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	51	819.57	1003.97
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	52	857.81	1050.82
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	53	896.48	1098.19
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	54	938.23	1149.33
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	55	979.97	1200.46
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	56	1025.24	1255.92
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	57	1070.94	1311.90
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	58	1119.72	1371.66
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	59	1143.89	1401.27
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	60	1192.67	1461.02
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	61	1234.85	1512.69
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	62	1262.54	1546.61
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	63	1297.26	1589.14
	79962PA0300001	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1318.35	1614.98
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	354.16	354.16
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	15	385.65	385.65
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	16	397.68	397.68
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	17	409.72	409.72
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	18	422.68	422.68
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	19	435.65	435.65
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	20	449.07	449.07
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	21	462.96	474.53
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	22	462.96	474.53
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	23	462.96	474.53
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	24	462.96	474.53
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	25	464.81	476.43
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	26	474.07	485.92
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	27	485.18	497.31
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	28	503.24	515.82
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	29	518.05	531.00
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	30	525.46	538.60
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	31	536.57	549.98
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	32	547.68	561.37
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	33	554.63	568.50
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	34	562.03	576.08
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	35	565.74	579.88
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	36	569.44	583.68
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	37	573.14	587.47
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	38	576.85	591.27
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	39	584.26	598.87
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	40	591.66	600.83
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	41	602.77	606.06
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	42	613.42	608.12
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	43	628.24	704.26
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	44	646.76	732.13
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	45	668.51	765.44
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	46	694.44	805.55
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	47	723.61	851.69
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	48	756.94	905.30
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	49	789.81	961.20
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	50	826.85	1012.89
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	51	863.42	1057.69
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	52	903.70	1107.03
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	53	944.44	1156.94
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	54	988.42	1210.81
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	55	1032.40	1264.69
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	56	1080.09	1323.11
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	57	1128.23	1382.08
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	58	1179.62	1445.03
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	59	1205.08	1476.22
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	60	1256.47	1539.18
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	61	1300.92	1593.63
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	62	1330.08	1629.35
	79962PA0310001	Rating Area 3	Tobacco User/Non-Tobacco User	63	1366.66	1674.16
	79962PA0310001	Rating Area 3	Tobacco User/			

	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	16	342.88	342.88
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	17	353.26	353.26
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	18	364.43	364.43
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	19	375.61	375.61
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	20	387.19	387.19
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	21	399.16	409.14
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	22	399.16	409.14
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	23	399.16	409.14
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	24	399.16	409.14
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	25	400.76	410.78
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	26	408.74	418.96
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	27	418.32	428.78
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	28	433.89	444.74
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	29	446.66	457.83
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	30	453.05	464.38
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	31	462.63	474.20
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	32	472.21	484.02
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	33	478.19	490.14
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	34	484.58	496.69
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	35	487.77	499.96
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	36	490.97	503.24
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	37	494.16	506.51
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	38	497.35	509.78
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	39	503.74	516.33
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	40	510.13	561.14
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	41	519.71	574.28
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	42	528.89	588.13
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	43	541.66	607.20
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	44	557.63	631.24
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	45	576.39	659.97
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	46	598.74	694.54
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	47	623.89	734.32
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	48	652.63	780.55
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	49	680.97	828.74
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	50	712.90	873.30
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	51	744.43	911.93
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	52	779.16	954.47
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	53	814.29	997.51
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	54	852.21	1043.96
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	55	890.13	1090.41
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	56	931.24	1140.77
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	57	972.75	1191.62
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	58	1017.06	1245.90
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	59	1039.01	1272.79
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	60	1083.32	1327.07
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	61	1121.64	1374.01
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	62	1146.79	1404.82
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	63	1178.32	1443.44
	79962PA0270003	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	1197.48	1466.91
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	218.68	218.68
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	15	238.12	238.12
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	16	245.55	245.55
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	17	252.99	252.99
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	18	260.99	260.99
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	19	268.99	268.99
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	20	277.28	277.28
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	21	285.86	293.01
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	22	285.86	293.01
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	23	285.86	293.01
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	24	285.86	293.01
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	25	287.00	294.18
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	26	292.72	300.04
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	27	299.58	307.07
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	28	310.73	318.50
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	29	319.88	327.88
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	30	324.45	332.56
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	31	331.31	339.59
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	32	338.17	346.62
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	33	342.46	351.02
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	34	347.03	355.71
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	35	349.32	358.05
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	36	351.61	360.40
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	37	353.89	362.74
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	38	356.18	365.08
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	39	360.76	369.78
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	40	365.33	401.86
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	41	372.19	411.27
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	42	378.76	421.18
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	43	387.91	434.85
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	44	399.35	452.06
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	45	412.78	472.63
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	46	428.79	497.40
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	47	446.80	525.88
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	48	467.38	558.99
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	49	487.68	593.51
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	50	510.55	625.42
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	51	533.13	653.08
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	52	558.00	683.55
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	53	583.15	714.36
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	54	610.31	747.63
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	55	637.47	780.90
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	56	666.91	816.96
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	57	696.64	853.38
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	58	728.37	892.25
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	59	744.09	911.51
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	60	775.82	950.38
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	61	803.27	984.01
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	62	821.28	1006.07
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	63	843.86	1033.73
	79962PA0270001	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	857.58	1050.54
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	236.68	236.68
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	15	257.71	257.71
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	16	265.76	265.76
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	17	273.80	273.80
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	18	282.46	282.46
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	19	291.13	291.13
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	20	300.10	300.10
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	21	309.38	317.11
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	22	309.38	317.11
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	23	309.38	317.11
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	24	309.38	317.11
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	25	310.62	318.39
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	26	316.81	324.73
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	27	324.23	332.34
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	28	336.30	344.71
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	29	346.20	354.86
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	30	351.15	359.93
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	31	358.57	367.53
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	32	366.00	375.15
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	33	370.64	379.91
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	34	375.59	384.98
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	35	378.06	387.51
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	36	380.54	390.05
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	37	383.01	392.59
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	38	385.49	395.13
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	39	390.44	400.20
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	40	395.39	434.93
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	41	402.81	445.11
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	42	409.93	455.84
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	43	419.83	470.63
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	44	432.20	489.25
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	45	446.74	511.52
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	46	464.07	538.32
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	47	483.56	569.15
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	48	505.84	604.98
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	49	527.80	642.33
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	50	552.55	676.87
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	51	576.99	706.81
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	52	603.91	739.79
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	53	631.14	773.15
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	54	660.53	809.15
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	55	689.92	845.15
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	56	721.78	884.18
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	57	753.96	923.60
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	58	788.30	965.67
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	59	805.32	986.52
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	60	839.66	1028.58
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	61	869.36	1064.97
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	62	888.85	1088.84
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	63	913.29	1118.78
	79962PA0280001	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	928.14	1136.97
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	226.51	226.51
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	15	246.64	246.64
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	16	254.34	254.34
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	17	262.04	262.04
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	18	270.33	270.33
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	19	278.62	278.62
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	20	287.21	287.21</

	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	23	296.09	303.49
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	24	296.09	303.49
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	25	297.27	304.70
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	26	303.20	310.78
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	27	310.30	318.06
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	28	321.85	329.90
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	29	331.32	339.60
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	30	336.06	344.46
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	31	343.17	351.75
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	32	350.27	359.03
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	33	354.72	363.59
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	34	359.45	368.44
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	35	361.82	370.87
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	36	364.19	373.29
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	37	366.56	375.72
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	38	368.93	378.15
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	39	373.67	383.01
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	40	378.40	416.24
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	41	385.51	425.99
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	42	392.32	436.26
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	43	401.79	450.41
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	44	413.64	468.24
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	45	427.55	489.54
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	46	444.14	515.20
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	47	462.79	544.70
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	48	484.11	579.00
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	49	505.13	614.74
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	50	528.82	647.80
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	51	552.21	676.46
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	52	577.97	708.01
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	53	604.02	739.92
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	54	632.15	774.38
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	55	660.28	808.84
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	56	690.78	846.21
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	57	721.57	883.92
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	58	754.44	924.19
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	59	770.72	944.13
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	60	803.59	984.40
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	61	832.01	1019.21
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	62	850.67	1042.07
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	63	874.06	1070.72
	79962PA0290001	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	888.27	1088.13
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	195.34	195.34
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	15	212.70	212.70
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	16	219.34	219.34
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	17	225.98	225.98
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	18	233.13	233.13
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	19	240.27	240.27
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	20	247.68	247.68
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	21	255.34	261.72
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	22	255.34	261.72
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	23	255.34	261.72
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	24	255.34	261.72
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	25	256.36	262.77
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	26	261.47	268.01
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	27	267.60	274.29
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	28	277.55	284.49
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	29	285.73	292.87
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	30	289.81	297.06
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	31	295.94	303.34
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	32	302.07	309.62
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	33	305.90	313.55
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	34	309.98	317.73
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	35	312.03	319.83
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	36	314.07	321.92
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	37	316.11	324.01
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	38	318.15	326.10
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	39	322.24	330.30
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	40	326.32	358.95
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	41	332.45	367.36
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	42	338.33	376.22
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	43	346.50	388.43
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	44	356.71	403.80
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	45	368.71	422.17
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	46	383.01	444.29
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	47	399.10	469.74
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	48	417.48	499.31
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	49	435.61	530.14
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	50	456.04	558.65
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	51	476.21	583.36
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	52	498.42	610.56
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	53	520.89	638.09
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	54	545.15	667.81
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	55	569.41	697.53
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	56	595.71	729.74
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	57	622.26	762.27
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	58	650.61	797.00
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	59	664.65	814.20
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	60	692.99	848.91
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	61	717.51	878.95
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	62	733.59	898.65
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	63	753.76	923.36
	79962PA0270002	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	766.02	938.37
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	0-14	164.36	164.36
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	15	178.97	178.97
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	16	184.56	184.56
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	17	190.14	190.14
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	18	196.16	196.16
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	19	202.17	202.17
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	20	208.40	208.40
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	21	214.85	220.22
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	22	214.85	220.22
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	23	214.85	220.22
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	24	214.85	220.22
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	25	215.71	221.10
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	26	220.01	225.51
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	27	225.16	230.79
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	28	233.54	239.38
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	29	240.42	246.43
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	30	243.85	249.95
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	31	249.01	255.24
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	32	254.17	260.52
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	33	257.39	263.82
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	34	260.83	267.35
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	35	262.55	269.11
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	36	264.27	270.88
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	37	265.98	272.63
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	38	267.70	274.39
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	39	271.14	277.92
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	40	274.58	302.04
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	41	279.73	309.10
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	42	284.68	316.56
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	43	291.55	326.83
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	44	300.15	339.77
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	45	310.24	355.22
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	46	322.28	373.84
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	47	335.81	395.25
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	48	351.28	420.13
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	49	366.53	446.07
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	50	383.72	470.06
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	51	400.70	490.86
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	52	419.39	513.75
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	53	438.29	536.91
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	54	458.70	561.91
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	55	479.12	586.92
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	56	501.25	614.03
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	57	523.59	641.40
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	58	547.44	670.61
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	59	559.25	685.08
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	60	583.10	714.30
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	61	603.73	739.57
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	62	617.26	756.14
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	63	634.24	776.94
	79962PA0320001	Rating Area 3	Tobacco User/Non-Tobacco User	64 and over	644.55	789.57