

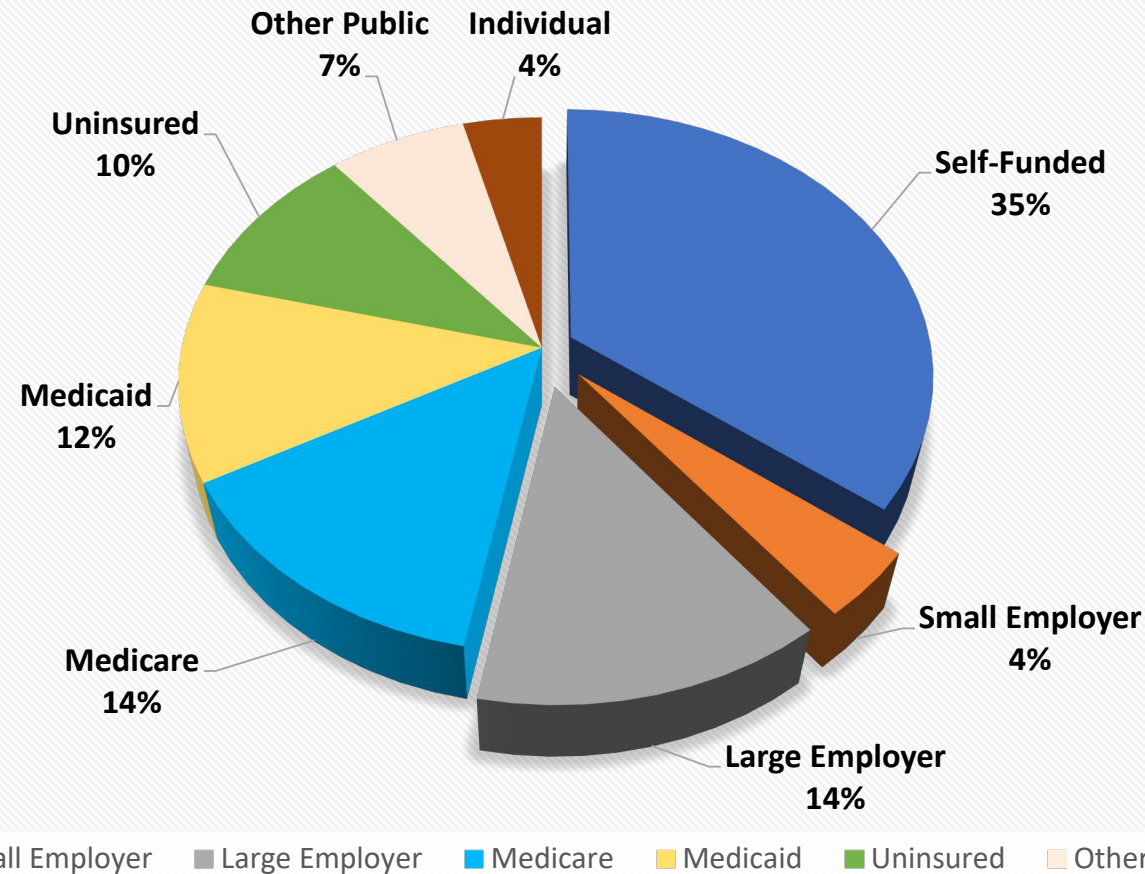
The background image shows a city street scene. On the left, there are green trees. In the center, a modern building with a curved glass facade is visible. On the right, a multi-story brick building with arched windows is prominent. The overall scene is bright and clear.

State Corporation Commission Bureau of Insurance

Rate Presentations

July 18, 2019

Health Care Coverage of the Virginia Population - 2018



Source: U.S. Census Bureau - Current Population Survey - Annual Social and Economic Supplements

Definitions

Medicaid: Includes those covered by Medicaid, the Children's Health Insurance Program (CHIP), and those who have both Medicaid and another type of coverage, such as dual eligibles who are also covered by Medicare.

Medicare: Includes those covered by Medicare, Medicare Advantage, and those who have Medicare and another type of non-Medicaid coverage where Medicare is the primary payer. Excludes those with Medicare Part A coverage only and those covered by Medicare and Medicaid (dual eligibles).

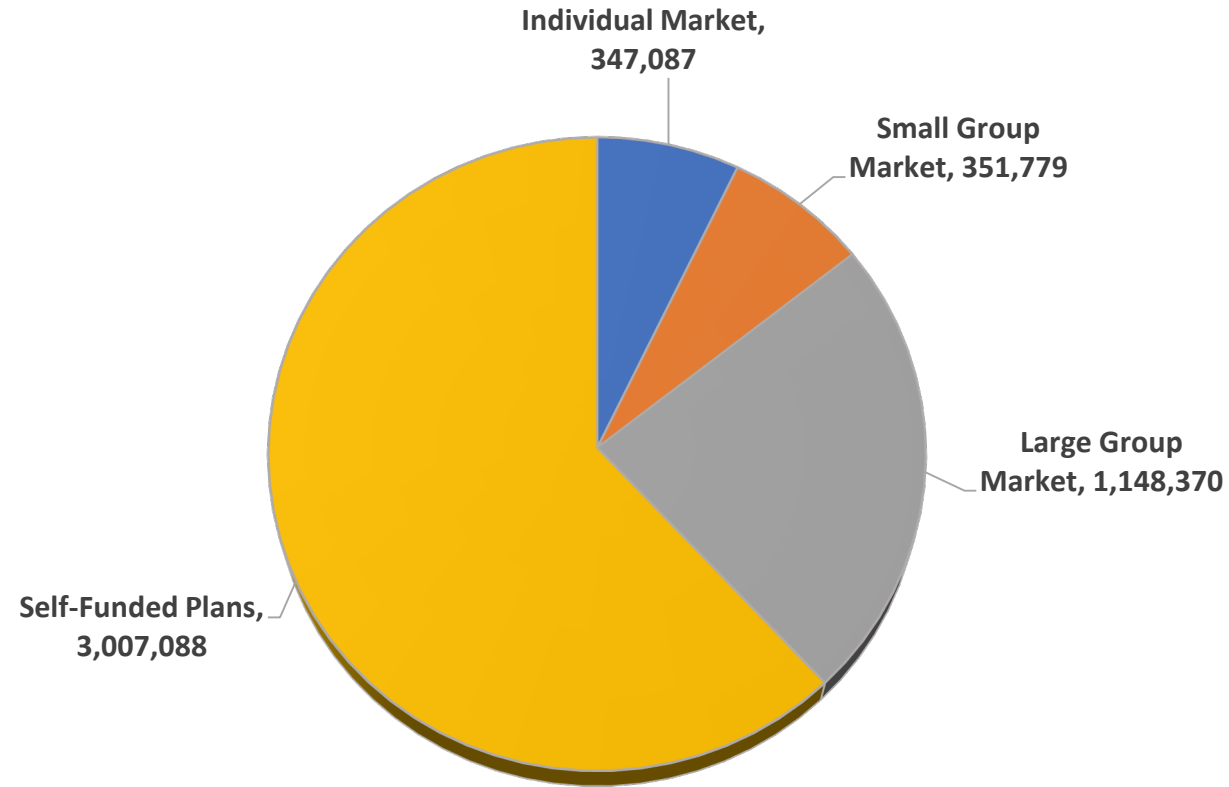
Employer: Includes those covered by employer-sponsored coverage either through their own job or as a dependent in the same household.

Other Public: Includes those covered under the military or Veterans Administration.

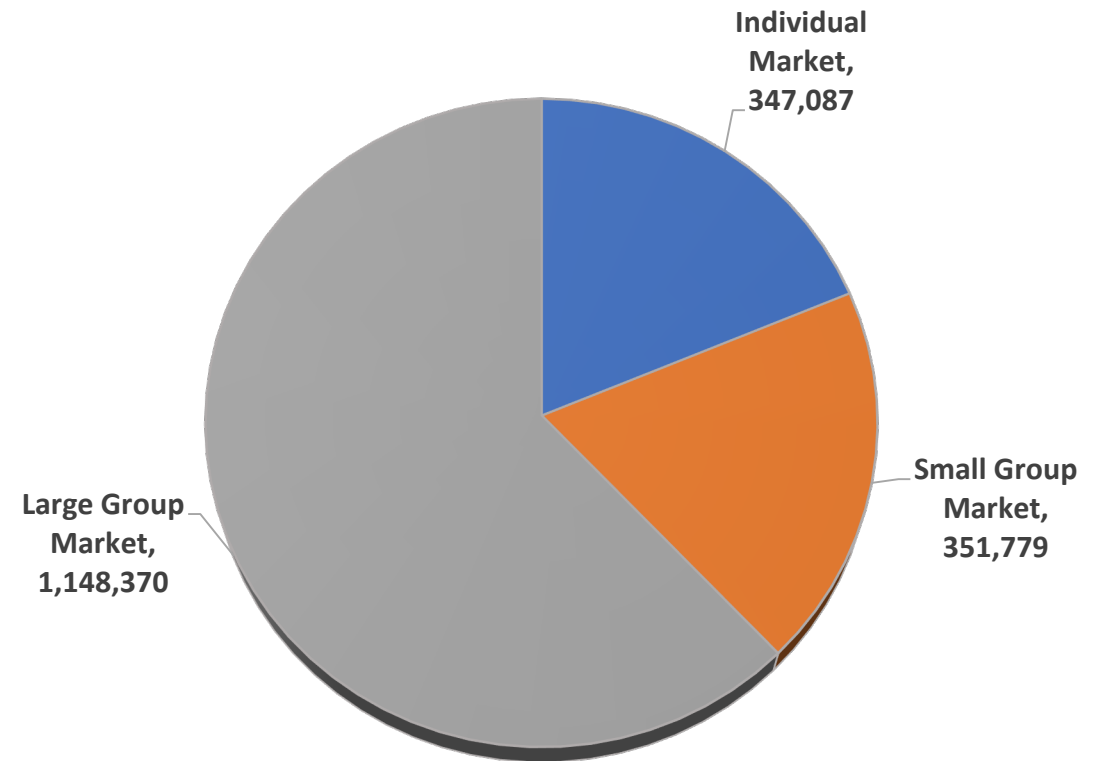
Non-Group: Includes individuals and families that purchased or are covered as a dependent by non-group insurance.

Uninsured: Includes those without health insurance and those who have coverage under the Indian Health Service only.

Enrollment in Self-Funded Plans and the Individual, Small Group, and Large Group Comprehensive Markets - 2018



Enrollment in the Fully-Insured Market – Individual, Small Group, and Large Group Comprehensive - 2018



Health Care Coverage of the Virginia Population

	<u>Employer</u>	<u>Non-Group</u>	<u>Medicaid</u>	<u>Medicare</u>	<u>Other Public</u>	<u>Uninsured</u>
2018	53%	4%	12%	14%	7%	10%
2017	55%	5%	11%	14%	5%	9%
2016	55%	5%	12%	14%	5%	10%
2015	53%	8%	11%	14%	5%	9%
2014	55%	7%	9%	13%	6%	10%
2013	57%	4%	9%	12%	6%	12%
2012	55%	5%	11%	12%	5%	13%
2011	55%	5%	11%	12%	5%	13%
2010	55%	5%	10%	12%	5%	13%
2009	57%	5%	10%	11%	5%	12%
2008	59%	5%	9%	11%	4%	12%

Source: U.S. Census Bureau - Current Population Survey - Annual Social and Economic Supplements

Definitions

Medicaid: Includes those covered by Medicaid, the Children’s Health Insurance Program (CHIP), and those who have both Medicaid and another type of coverage, such as dual eligibles who are also covered by Medicare.

Medicare: Includes those covered by Medicare, Medicare Advantage, and those who have Medicare and another type of non-Medicaid coverage where Medicare is the primary payer. Excludes those with Medicare Part A coverage only and those covered by Medicare and Medicaid (dual eligibles).

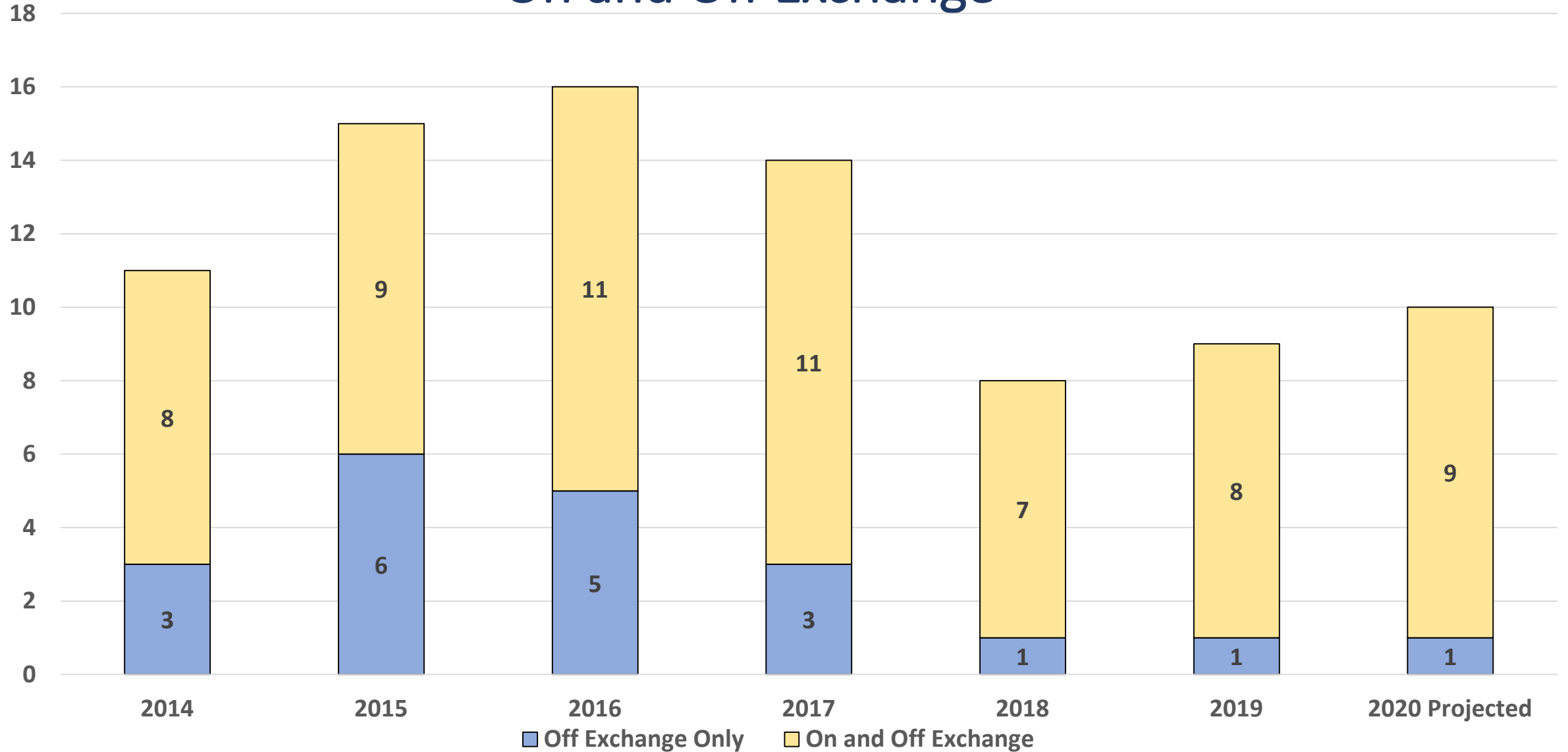
Employer: Includes those covered by employer-sponsored coverage either through their own job or as a dependent in the same household.

Other Public: Includes those covered under the military or Veterans Administration.

Non-Group: Includes individuals and families that purchased or are covered as a dependent by non-group insurance.

Uninsured: Includes those without health insurance and those who have coverage under the Indian Health Service only.

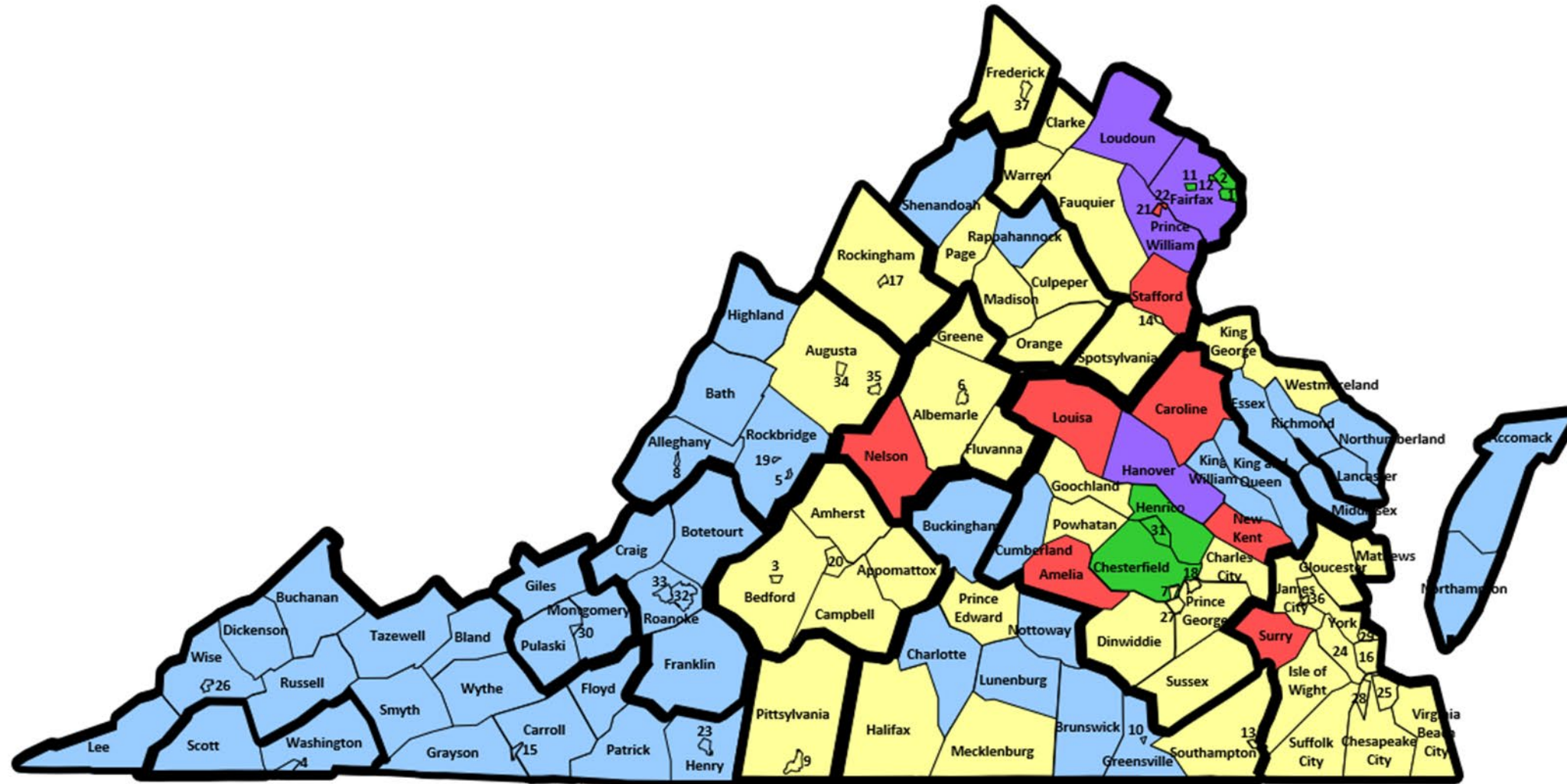
Number of Carriers in the Individual Market On and Off Exchange



2020 Individual Market - Carrier Service Area Applications

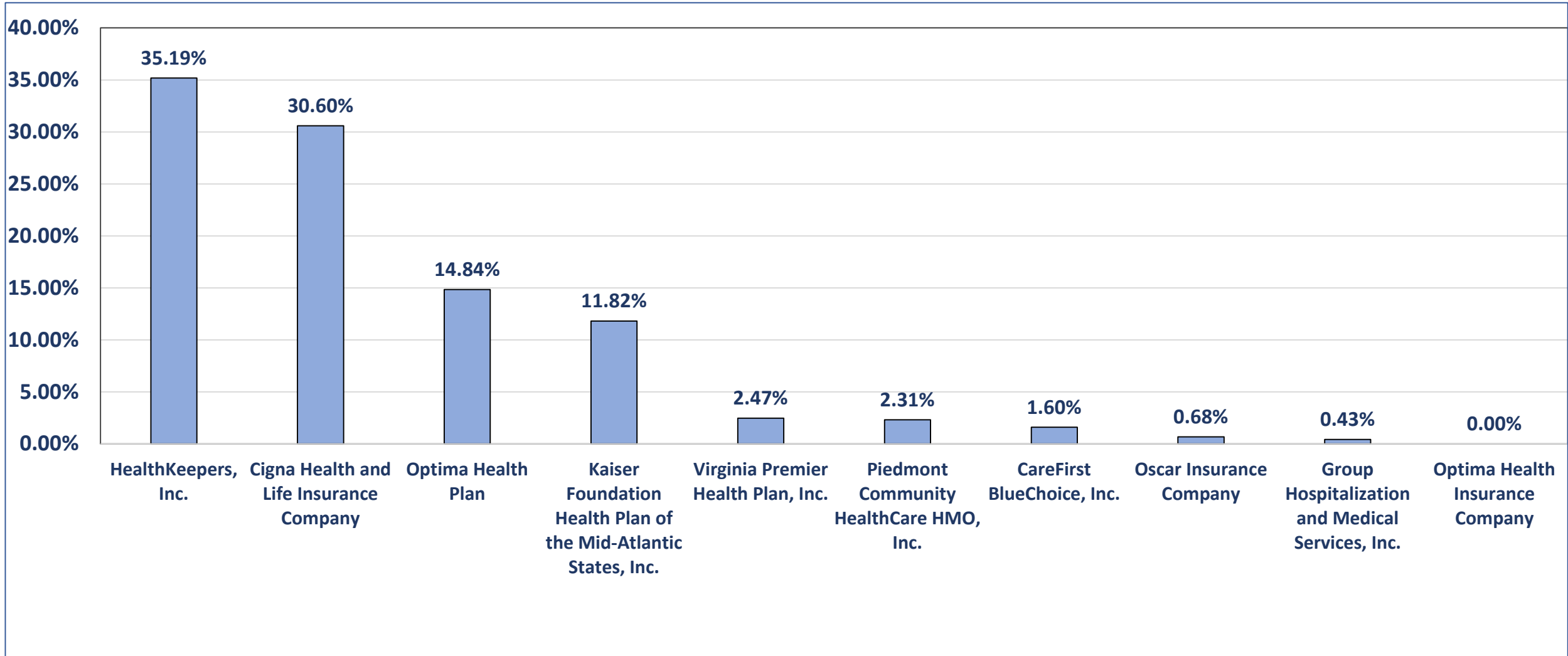
As of 7/11/19

Number of Carriers in County/City	Percentage of Counties/Cities
0	0%
1	42%
2	43.30%
3	6.70%
4	5.20%
5+	3.00%

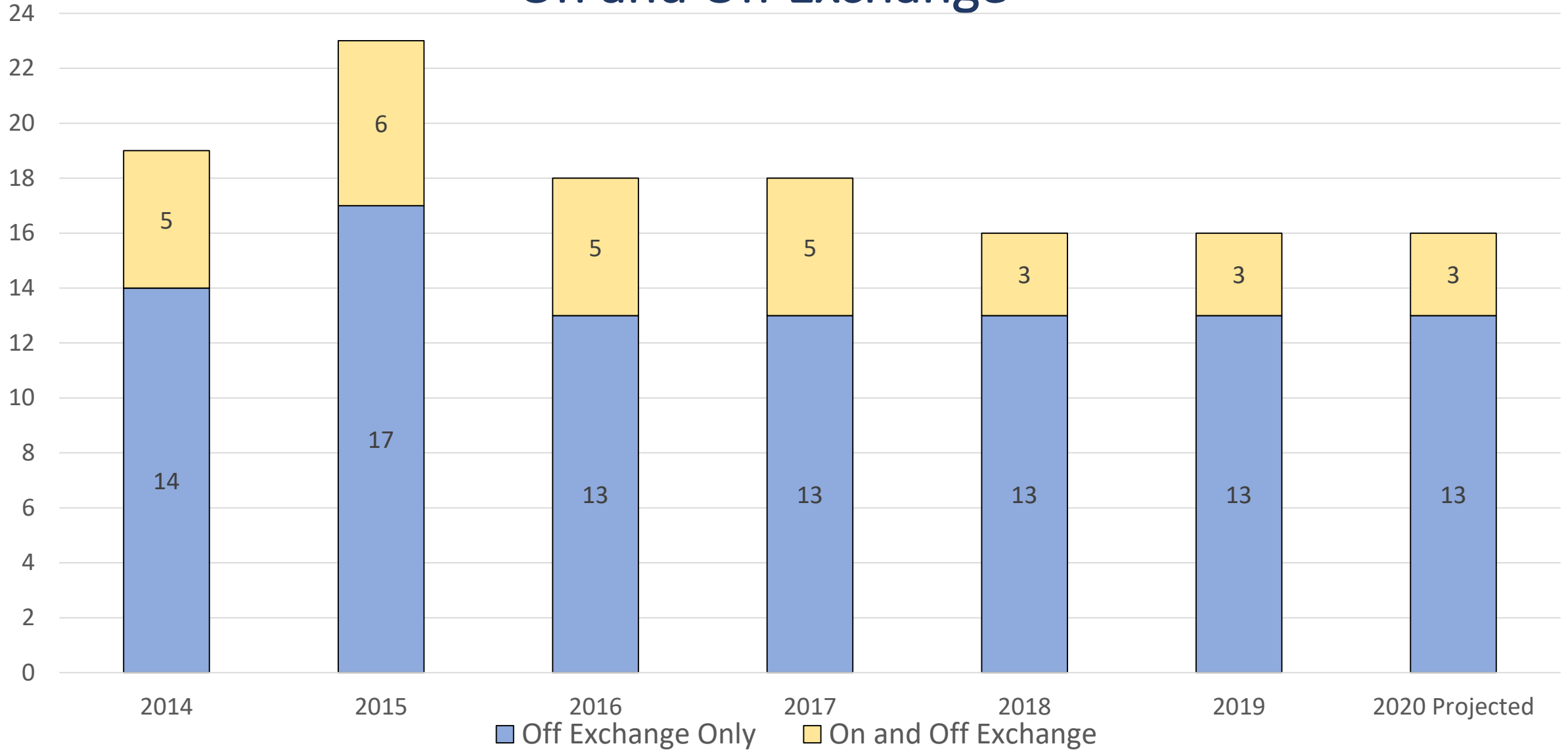


1) Alexandria City	5) Buena Vista City	9) Danville City	13) Franklin City	17) Harrisonburg City	21) Manassas City	25) Norfolk City	29) Poquoson City	33) Salem City	37) Winchester City
2) Arlington	6) Charlottesville City	10) Emporia City	14) Fredericksburg City	18) Hopewell City	22) Manassas Park City	26) Norton City	30) Radford City	34) Staunton City	
3) Bedford City	7) Colonial Heights City	11) Fairfax City	15) Galax City	19) Lexington City	23) Martinsville City	27) Petersburg City	31) Richmond City	35) Waynesboro City	
4) Bristol City	8) Covington City	12) Falls Church City	16) Hampton City	20) Lynchburg City	24) Newport News City	28) Portsmouth City	32) Roanoke City	36) Williamsburg City	

Individual Market Share – by 2020 Projected Covered Lives



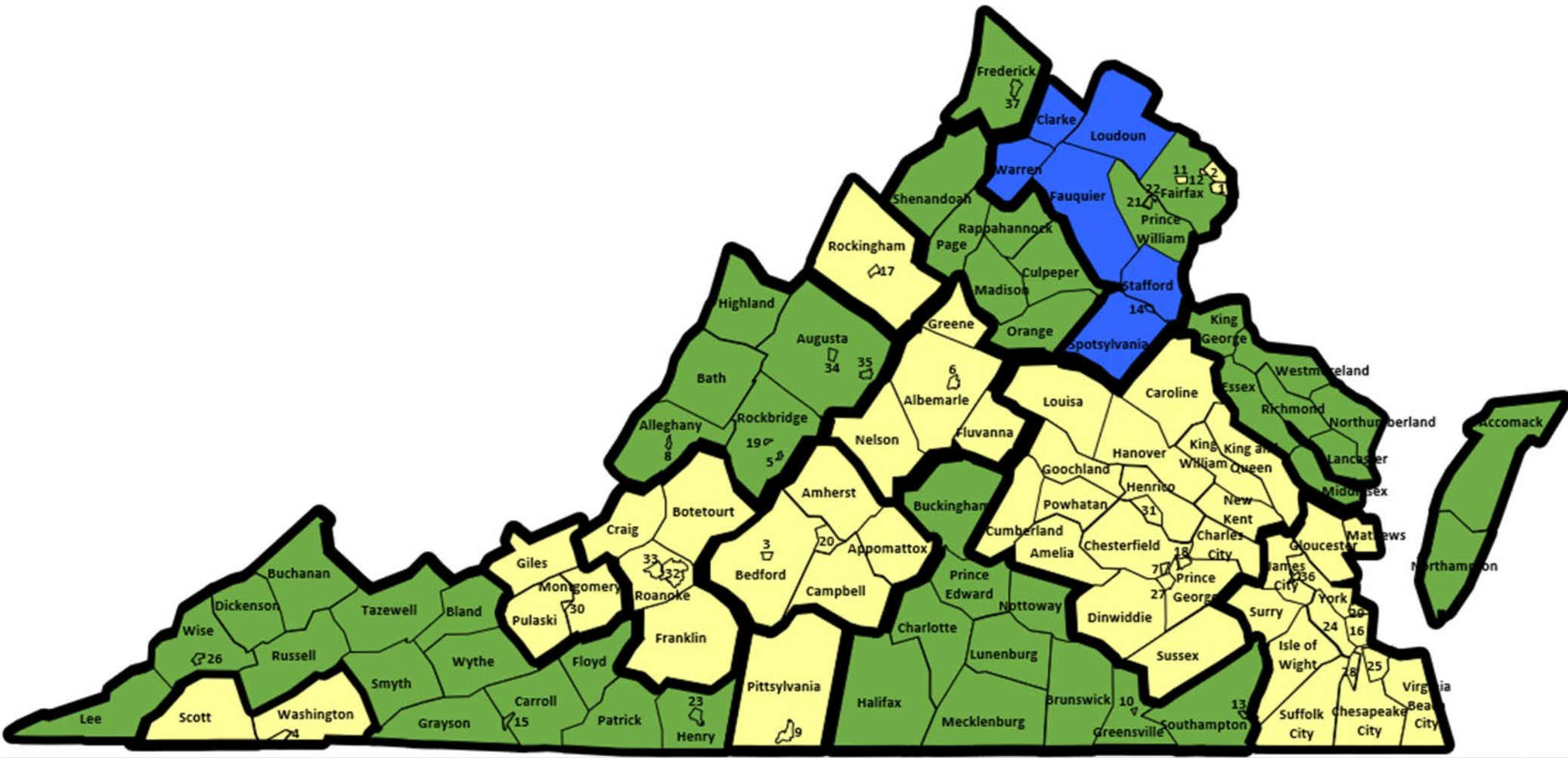
Number of Carriers in the Small Group Market On and Off Exchange



2020 Small Group Market - Carrier Service Area Applications

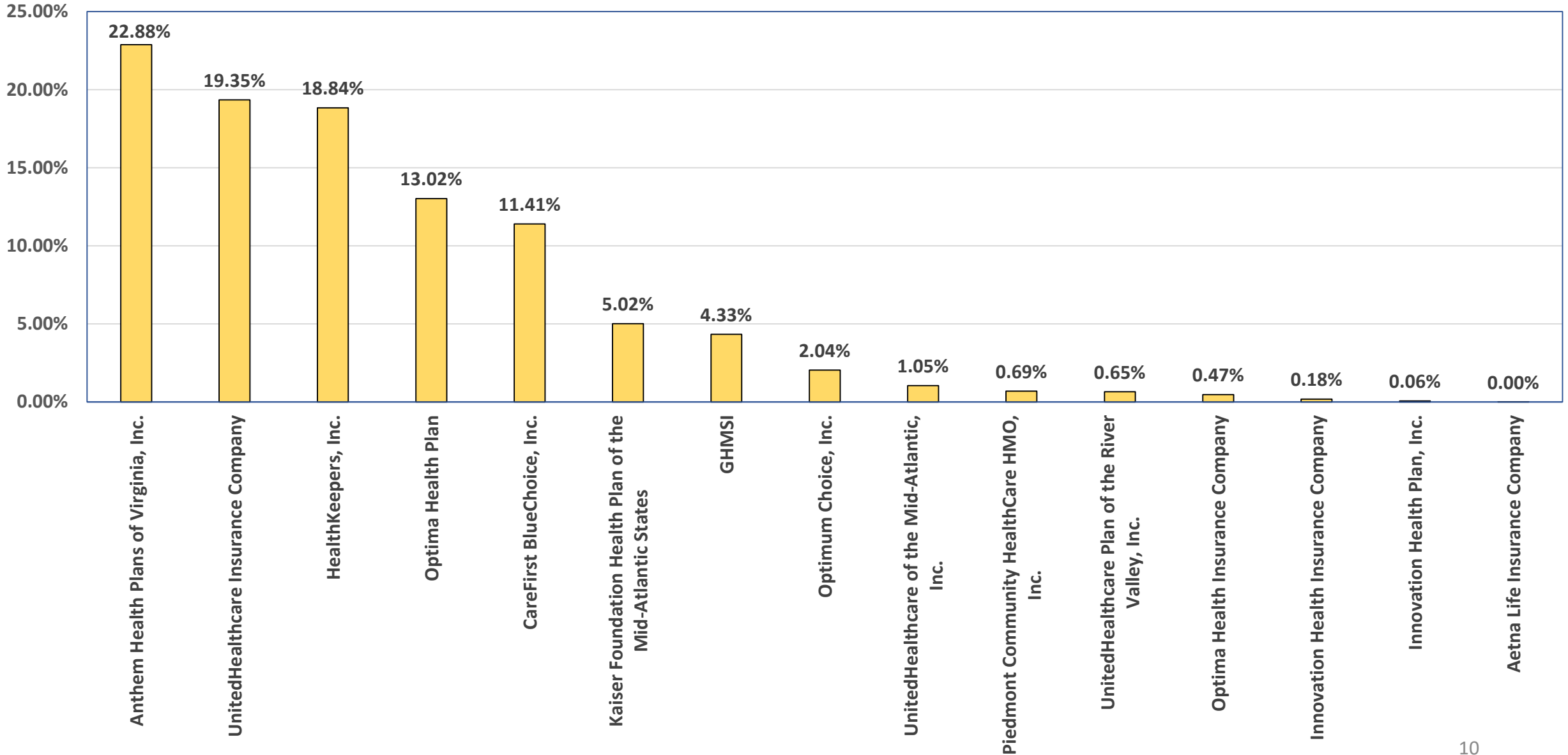
As of 7/11/19

Number of Carriers in County/City	Percentage of Counties/Cities
0	0%
1 - 9	0%
10 - 11	50%
12 - 13	44.80%
14 - 15	5.20%
16+	0%

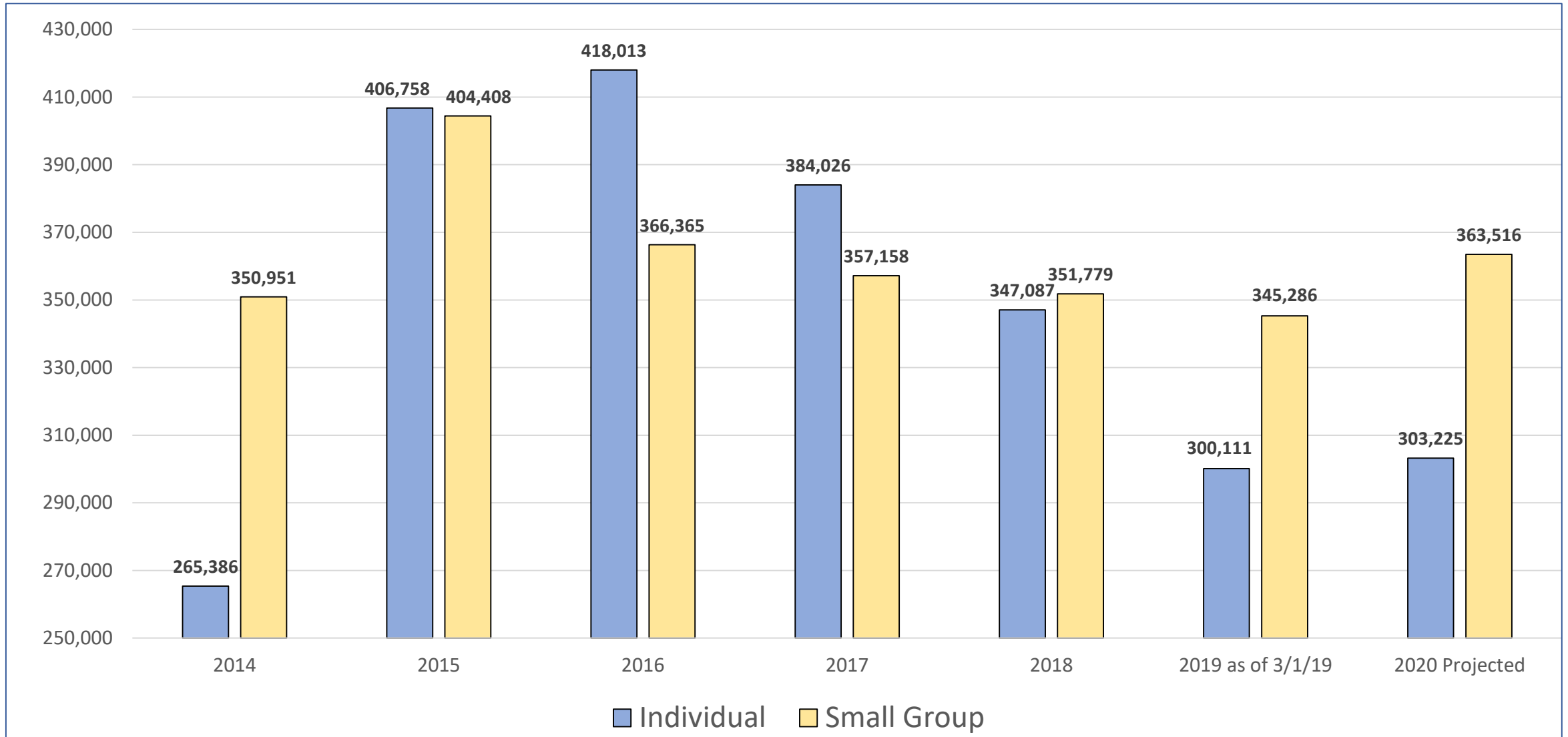


1) Alexandria City	5) Buena Vista City	9) Danville City	13) Franklin City	17) Harrisonburg City	21) Manassas City	25) Norfolk City	29) Poquoson City	33) Salem City	37) Winchester City
2) Arlington	6) Charlottesville City	10) Emporia City	14) Fredericksburg City	18) Hopewell City	22) Manassas Park City	26) Norton City	30) Radford City	34) Staunton City	
3) Bedford City	7) Colonial Heights City	11) Fairfax City	15) Galax City	19) Lexington City	23) Martinsville City	27) Petersburg City	31) Richmond City	35) Waynesboro City	
4) Bristol City	8) Covington City	12) Falls Church City	16) Hampton City	20) Lynchburg City	24) Newport News City	28) Portsmouth City	32) Roanoke City	36) Williamsburg City	

Small Group Market Share – by 2020 Projected Covered Lives

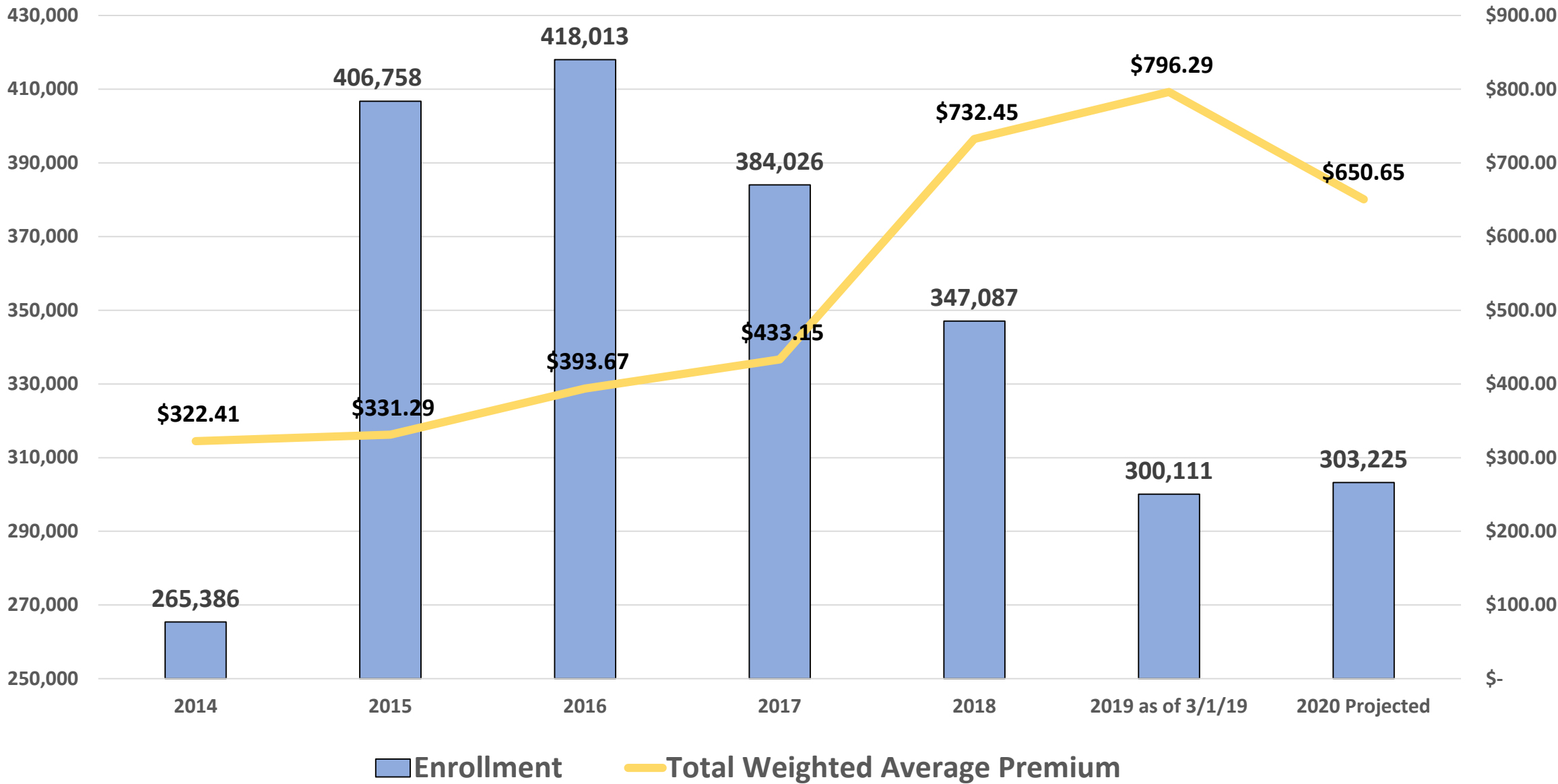


Individual and Small Group On and Off Exchange Total Enrollment 2014 - 2020

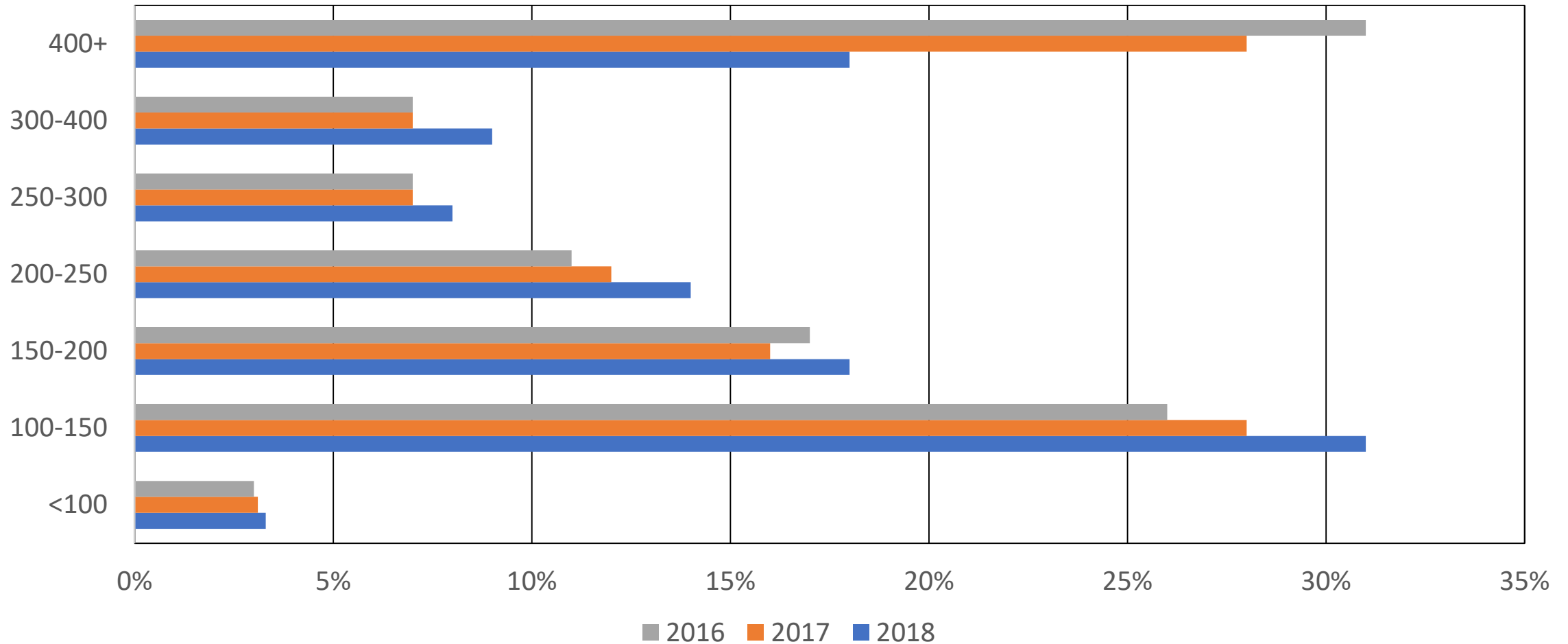


Source: Annual Supplemental Health Care Report – Number of covered lives by market for 2014-2018. 2019 and 2020 data derived from the 2020 rate filings.

Individual On and Off Exchange Total Enrollment and Total Weighted Average Premium 2014 - 2020



Estimated Distribution of the On-Exchange Individual Market Enrollment by Federal Poverty Level

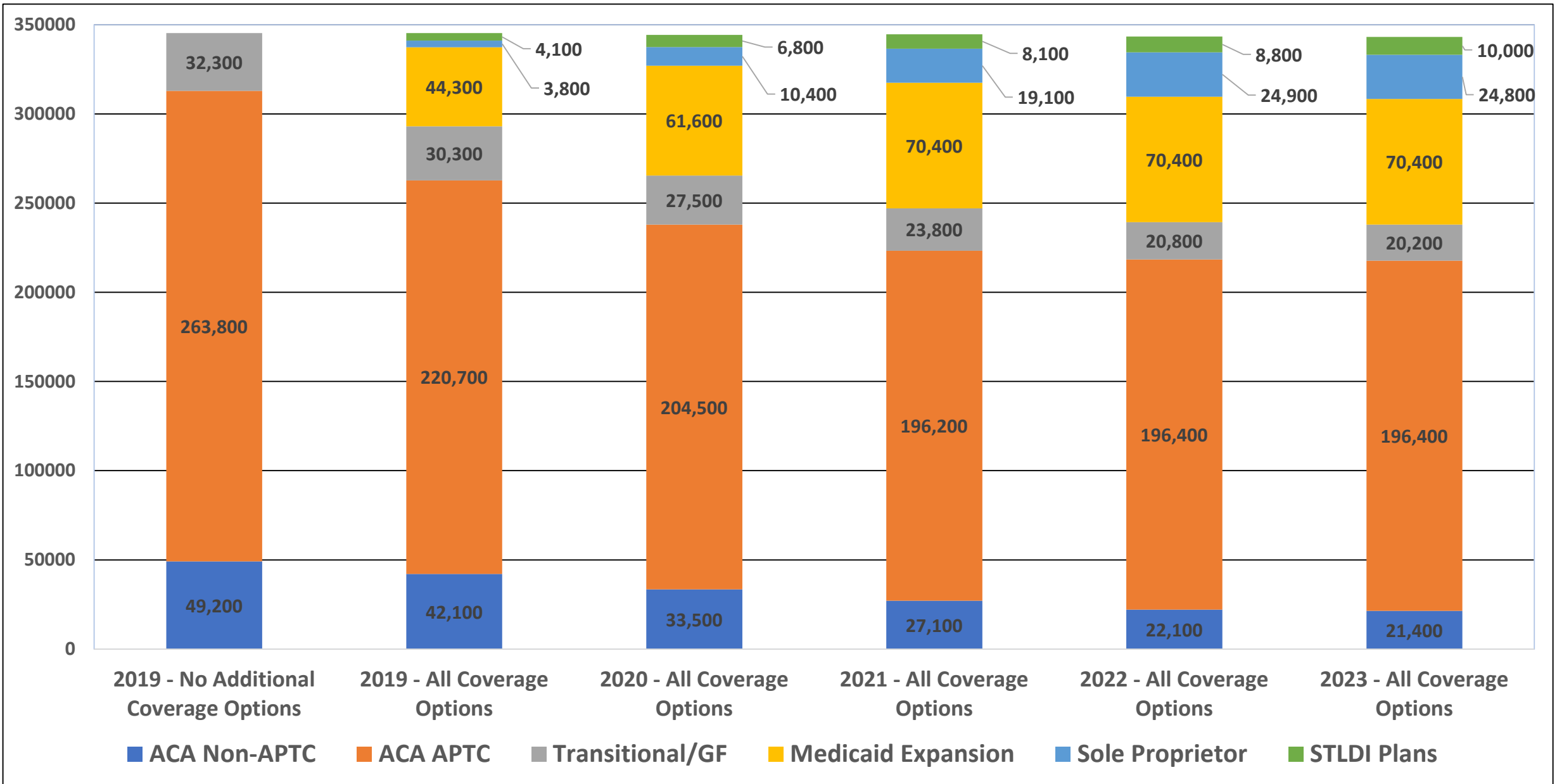


Source: Carrier data call and Marketplace Open Enrollment Period Public Use files. Virginia – Individual Market Summary and Modeling Results – January 4, 2019. Oliver Wyman. Funds for the study provided to the State Corporation Commission by the Federal Market Stabilization Grant.

Effects on Individual Market Rates due to Medicaid Expansion

- Medicaid expansion estimated impact on the individual market rates ranged from 0% to -2.3%
- Actuarial study estimated 44,300-70,400 will move from Individual Market to Medicaid over the next one to three years.
- Transition – agencies worked together

Estimated Impact of New Coverage Options on Projected Individual Market Enrollees



Source: Carrier data call and Marketplace Open Enrollment Period Public Use files. Virginia – Individual Market Summary and Modeling Results – January 4, 2019. Oliver Wyman. Funds for the study provided to the State Corporation Commission by the Federal Market Stabilization Grant.

General Approach to Rate Reviews

- Initial rate submissions were due May 24; the Bureau's deadline to submit QHP recommendations is August 21 (non-QHP reviews are completed by this date as well)
- SERFF public access suspended for any individual and small group market form, rate, and binder revisions made on or after May 31
- Deadline of July 10th for carriers to submit voluntary service area revisions and voluntary rate filing revisions. Plans may be withdrawn following this date if such withdrawal does not cause a change in service area. SERFF public access will be fully enabled following this date.
- Bureau staff review the contents of each rate filing for completeness, accuracy and compliance with Federal and state filing requirements
- Companies are requested to make any necessary changes before the filing is sent to the consulting actuaries for their review

Virginia Rate Filing Template

- Introduced for 2019 ACA rate filings
- Standardized format for carrier experience data, projections, source of rate changes, etc.
- New template includes some prior required exhibits
- Consistent with URRT definitions
- Summary tools allow for state-wide analysis of ACA markets, including any outliers, in addition to changes from 2019 approved rates

2020 Pricing Challenges

- Population morbidity
 - Carrier entrances/exits
 - Member movement
 - High cost claimants
- Medical and drug trend

2020 ACA Pricing Trends

Individual

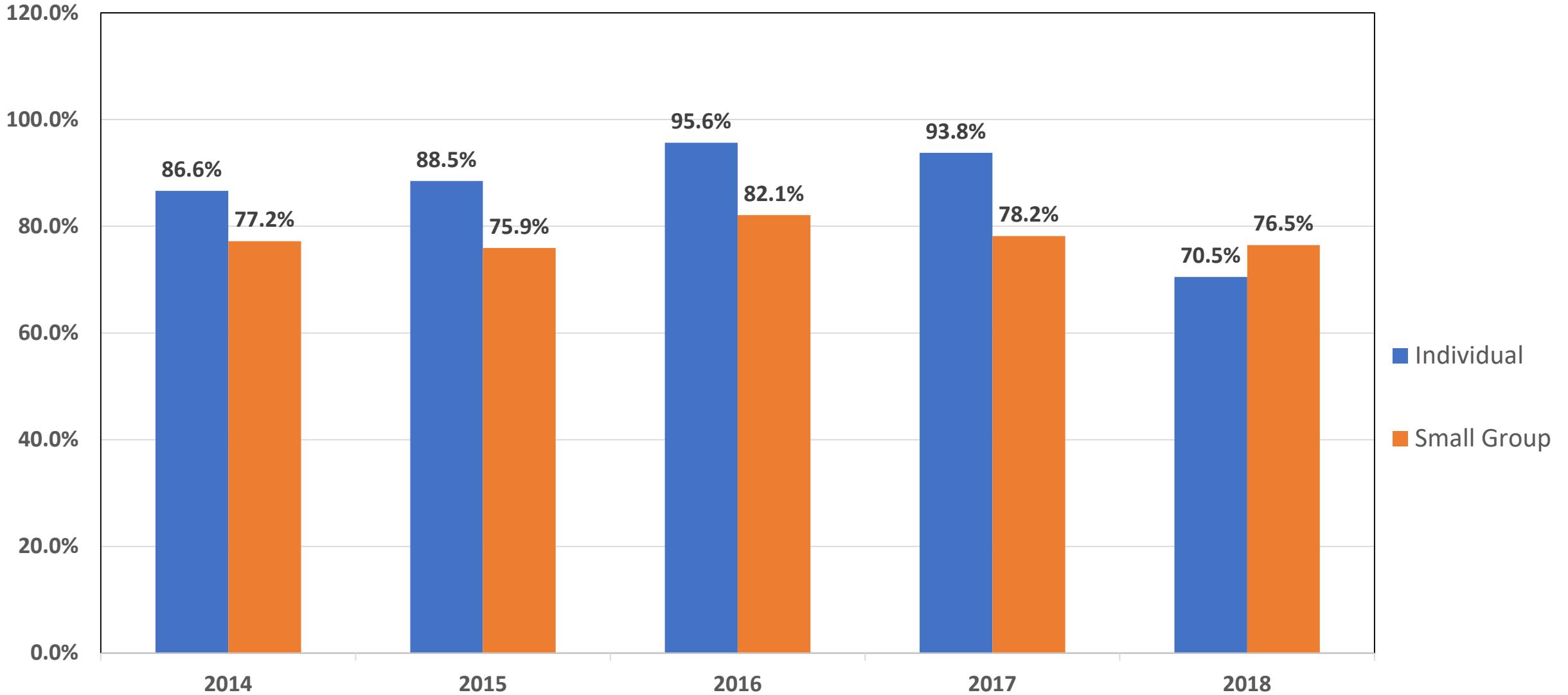
Carrier	INPATIENT			-	OUTPATIENT			-	PHYSICIAN			-	Rx			-	TOTAL
	Cost	Util	Total		Cost	Util	Total		Cost	Util	Total		Cost	Util	Total		
Cigna	3.0%	1.8%	4.9%	-	3.0%	1.8%	4.9%	-	1.8%	1.8%	3.6%	-	4.5%	0.7%	5.2%	-	4.9%
HealthKeepers	7.0%	3.0%	10.0%	-	6.0%	3.2%	9.4%	-	2.7%	3.6%	6.4%	-	8.0%	2.5%	10.7%	-	8.9%
Kaiser	3.5%	2.0%	5.6%	-	1.0%	2.1%	3.1%	-	2.1%	2.3%	4.5%	-	4.3%	2.0%	6.4%	-	4.8%
Optima HP	7.6%	1.0%	8.7%	-	7.4%	1.0%	8.5%	-	5.4%	1.0%	6.5%	-	8.6%	0.1%	8.7%	-	7.5%

Small Group

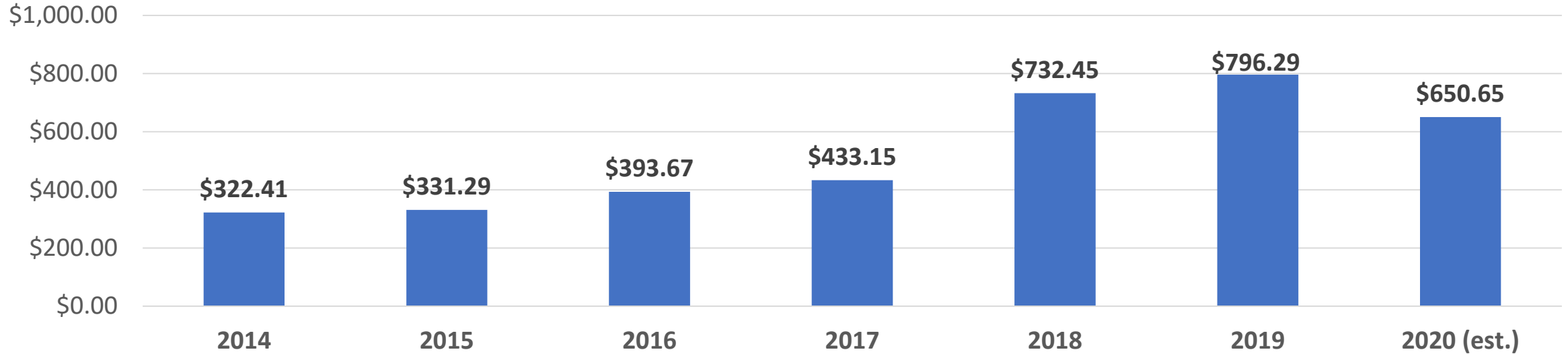
Carrier	INPATIENT			-	OUTPATIENT			-	PHYSICIAN			-	Rx			-	TOTAL
	Cost	Util	Total		Cost	Util	Total		Cost	Util	Total		Cost	Util	Total		
CareFirst	-2.0%	4.0%	1.9%	-	5.0%	3.0%	8.1%	-	1.0%	5.0%	6.1%	-	6.0%	2.0%	8.1%	-	7.7%
Anthem/HK	6.0%	1.9%	8.0%	-	5.2%	2.4%	7.7%	-	2.7%	3.6%	6.4%	-	7.1%	1.5%	8.7%	-	7.7%
Optima HP	5.4%	1.0%	6.5%	-	7.4%	1.0%	8.5%	-	5.4%	1.0%	6.5%	-	8.6%	0.1%	8.7%	-	7.3%
United	4.0%	3.7%	7.8%	-	4.0%	3.7%	7.8%	-	4.0%	3.7%	7.8%	-	4.0%	3.7%	7.8%	-	7.8%

ACA Loss Ratio Experience

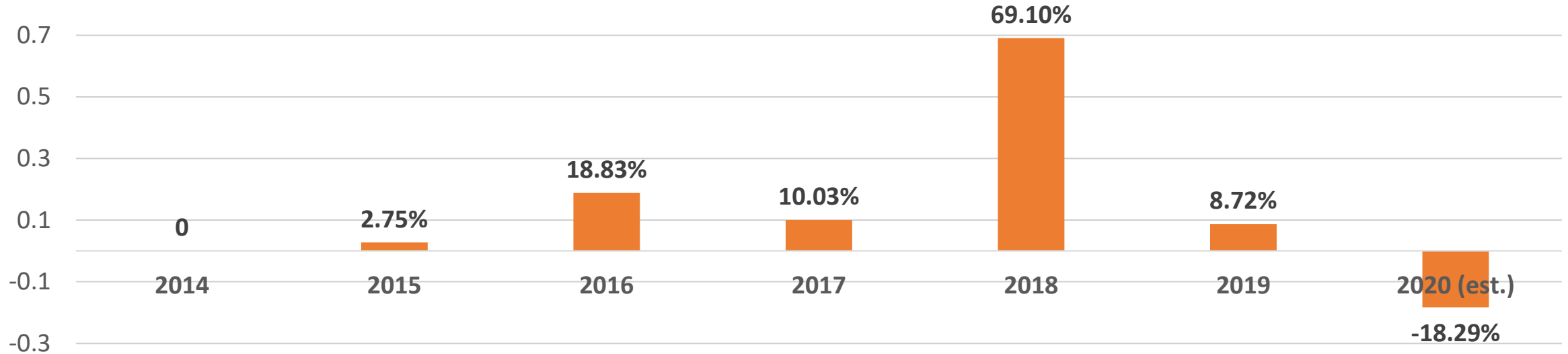
ACA Historical Loss Ratios in Virginia



Individual Market – Total Weighted Average Premium

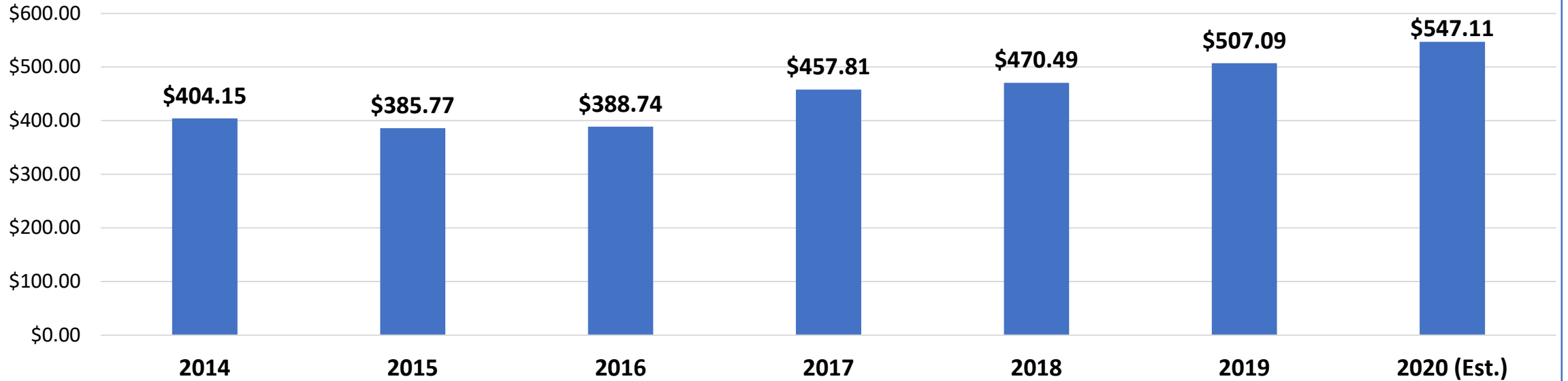


Total Weighted Average Premium Percentage Change Over Prior Year

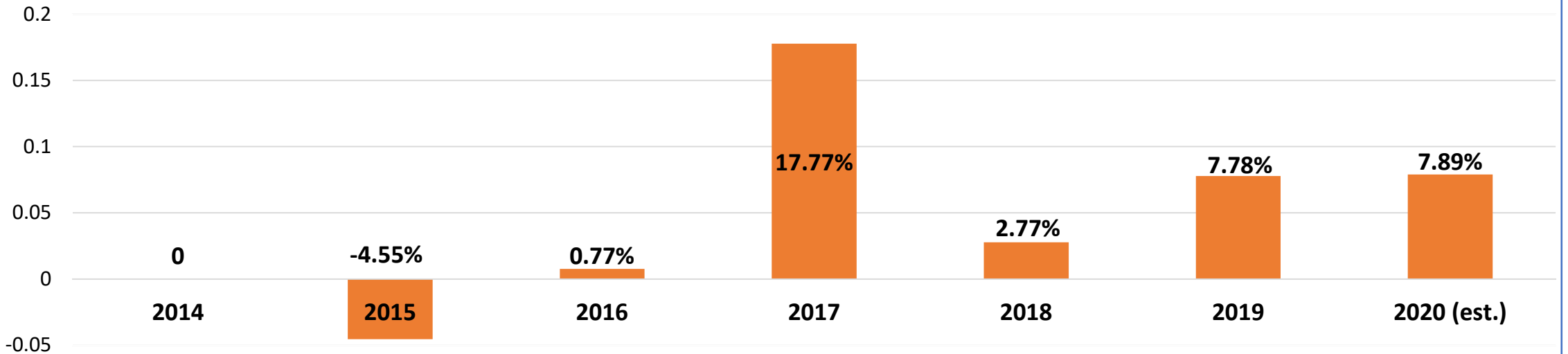


Percentage increase of weighted average premium – individual market from 2014 to 2020: 96%.

Small Group Market Total Weighted Average Premium



Total Weighted Average Premium Percentage Change Over Prior Year



Percentage increase of weighted average premium – small group market from 2014 to 2020: 35.4%.

Presenting Companies

- HealthKeepers, Inc. (Ind/SG) /Anthem Health Plans of Virginia, Inc. (SG only)
- Cigna Health and Life Insurance Company (Ind only)
- Optima Health Plan (Ind/SG)
- Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. (Ind/SG)
- UnitedHealthcare Insurance Company (SG only)
- CareFirst BlueChoice, Inc./Group Hospitalization and Medical Services, Inc (SG only)

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-14.5%
Carrier Calculated Avg Total Rate Change	-15.7%
Carrier Calculated Avg Adult Rate Change	-15.7%
Carrier Calculated Avg Child Rate Change	-15.7%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	BlueChoice HMO Gold \$1,750 Gold		BlueChoice HMO Young Adult \$8,150 Catastrophic		BlueChoice HMO HSA Silver \$3,000 Silver	
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$1,750	\$1,750	\$8,150	\$7,900	\$3,000	\$3,000
In-Network Member Coinsurance	0%	0%	0%	0%	0%	0%
In-Network Individual OOP	\$6,650	\$6,650	\$8,150	\$7,900	\$6,650	\$6,650
In-Network PCP OV Copay	\$0	\$0	\$0	\$0	\$30	\$30
Members as of 3/1/2019	2396		368		1209	
Pct of Statewide Membership	42.9%		6.6%		21.7%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 10 (Northern VA)		Area 10 (Northern VA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$750.51		\$363.58		\$672.32	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$241.33	32.2%	\$116.91	32.2%	\$216.19	32.2%
Trend	\$83.02	11.1%	\$40.22	11.1%	\$74.37	11.1%
Risk Adjustment	-\$241.30	-32.2%	-\$49.09	-13.5%	-\$220.85	-32.8%
HIT Moratorium	\$24.86	3.3%	\$9.07	2.5%	\$22.55	3.4%
Other Non-Benefit Expenses	-\$5.94	-0.8%	-\$22.48	-6.2%	-\$3.60	-0.5%
Benefit Changes	\$0.00	0.0%	-\$2.93	-0.8%	\$0.00	0.0%
Base Period Index Rate	-\$218.89	-29.2%	-\$230.31	-63.3%	-\$198.51	-29.5%
Benefit Leveraging	\$5.83	0.8%	-\$0.72	-0.2%	\$17.82	2.7%
Age Calibration	-\$4.36	-0.6%	-\$1.59	-0.4%	-\$3.95	-0.6%
"Other"	\$17.55	2.3%	\$15.46	4.3%	\$14.47	2.2%
	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Rate on 1/1/2020	\$652.60	-13.0%	\$238.12	-34.5%	\$590.81	-12.1%
Calculated Rate on 1/1/2020	\$652.60	-13.0%	\$238.12	-34.5%	\$590.81	-12.1%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	CareFirst BlueChoice, Inc.		
NAIC Number	96202		
Product(s)	HMO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	N/A	N/A	N/A
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	N/A	N/A	N/A
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	1.000	1.000	0.0%
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	N/A	N/A	N/A

Cigna Health and Life Insurance Company - Individual Market

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	4.3%
Carrier Calculated Avg Total Rate Change	1.3%
Carrier Calculated Avg Adult Rate Change	1.3%
Carrier Calculated Avg Child Rate Change	1.7%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	Cigna Connect 6500 Silver		Cigna Connect 1500 Gold		Cigna Connect 6500 Silver	
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$6,500	\$6,500	\$1,500	\$1,500	\$6,500	\$6,500
In-Network Member Coinsurance	30%	30%	15%	15%	30%	30%
In-Network Individual OOP	\$8,150	\$7,900	\$8,150	\$7,900	\$8,150	\$7,900
In-Network PCP OV Copay	\$20	\$20	\$25	\$25	\$20	\$20
Members as of 3/1/2019	31307		6747		31307	
Pct of Statewide Membership	29.8%		6.4%		29.8%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 10 (Northern VA)		Area 10 (Northern VA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$507.85		\$520.17		\$507.85	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	-\$83.53	-16.4%	-\$85.55	-16.4%	-\$83.53	-16.4%
Trend	\$24.80	4.9%	\$25.40	4.9%	\$24.80	4.9%
Risk Adjustment	\$2.63	0.5%	\$2.69	0.5%	\$2.63	0.5%
HIT Moratorium	\$8.38	1.7%	\$8.58	1.7%	\$8.38	1.7%
Other Non-Benefit Expenses	-\$2.29	-0.4%	-\$2.34	-0.4%	-\$2.29	-0.4%
Benefit Changes	\$4.12	0.8%	\$19.73	3.8%	\$4.12	0.8%
Other Change 1	\$10.03	2.0%	\$0.00	0.0%	\$10.03	2.0%
Other Change 2	\$54.91	10.8%	\$30.57	5.9%	\$54.91	10.8%
Other Change 3		0.0%		0.0%		0.0%
Other Change 4		0.0%		0.0%		0.0%
Other Change 5		0.0%		0.0%		0.0%
Rate on 1/1/2020	\$526.90	3.8%	\$519.25	-0.2%	\$526.90	3.8%
Calculated Rate on 1/1/2020	\$526.90	3.8%	\$519.25	-0.2%	\$526.90	3.8%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

Cigna Health and Life Insurance Company - Individual Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Cigna Health and Life Insurance Company		
NAIC Number	67369		
Product(s)	EPO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.250	-20.0%
19	0.941	1.000	1.250	-20.0%
20	0.970	1.000	1.250	-20.0%
21	1.000	1.000	1.250	-20.0%
22	1.000	1.000	1.250	-20.0%
23	1.000	1.000	1.250	-20.0%
24	1.000	1.000	1.250	-20.0%
25	1.004	1.000	1.250	-20.0%
26	1.024	1.000	1.250	-20.0%
27	1.048	1.000	1.250	-20.0%
28	1.087	1.000	1.250	-20.0%
29	1.119	1.000	1.250	-20.0%
30	1.135	1.000	1.250	-20.0%
31	1.159	1.000	1.250	-20.0%
32	1.183	1.000	1.250	-20.0%
33	1.198	1.000	1.250	-20.0%
34	1.214	1.000	1.250	-20.0%
35	1.222	1.000	1.250	-20.0%
36	1.230	1.000	1.250	-20.0%
37	1.238	1.000	1.250	-20.0%
38	1.246	1.000	1.250	-20.0%
39	1.262	1.000	1.250	-20.0%
40	1.278	1.000	1.250	-20.0%
41	1.302	1.000	1.250	-20.0%
42	1.325	1.000	1.250	-20.0%
43	1.357	1.000	1.250	-20.0%
44	1.397	1.000	1.250	-20.0%
45	1.444	1.000	1.250	-20.0%
46	1.500	1.000	1.250	-20.0%
47	1.563	1.000	1.250	-20.0%
48	1.635	1.000	1.250	-20.0%
49	1.706	1.000	1.250	-20.0%
50	1.786	1.000	1.250	-20.0%
51	1.865	1.000	1.250	-20.0%
52	1.952	1.000	1.250	-20.0%
53	2.040	1.000	1.250	-20.0%
54	2.135	1.000	1.250	-20.0%
55	2.230	1.000	1.250	-20.0%
56	2.333	1.000	1.250	-20.0%
57	2.437	1.000	1.250	-20.0%
58	2.548	1.000	1.250	-20.0%
59	2.603	1.000	1.250	-20.0%
60	2.714	1.000	1.250	-20.0%
61	2.810	1.000	1.250	-20.0%
62	2.873	1.000	1.250	-20.0%
63	2.952	1.000	1.250	-20.0%
64+	3.000	1.000	1.250	-20.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans are

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)			N/A
Area 2 (Charlottesville)			N/A
Area 3 (Danville)			N/A
Area 4 (Harrisonburg)			N/A
Area 5 (Bristol)			N/A
Area 6 (Lynchburg)			N/A
Area 7 (Richmond)	0.978	1.000	-2.2%
Area 8 (Roanoke)			N/A
Area 9 (Tidewater)			N/A
Area 10 (Northern VA)	1.011	1.034	-2.2%
Area 11 (Winchester)	1.060		N/A
Area 12 (Non-MSA)			N/A

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	11.9%
Carrier Calculated Avg Total Rate Change	11.9%
Carrier Calculated Avg Adult Rate Change	11.9%
Carrier Calculated Avg Child Rate Change	11.9%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	BluePreferred PPO Gold \$1,750 Gold		BluePreferred PPO HSA Silver \$3,000 Silver		BluePreferred PPO HSA Silver \$3,000 Silver	
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$1,750	\$1,750	\$3,000	\$3,000	\$3,000	\$3,000
In-Network Member Coinsurance	0%	0%	0%	0%	0%	0%
In-Network Individual OOP	\$6,650	\$6,650	\$6,650	\$6,650	\$6,650	\$6,650
In-Network PCP OV Copay	\$0	\$0	\$30	\$30	\$30	\$30
Members as of 3/1/2019	606		233		312	
Pct of Statewide Membership	34.6%		13.3%		17.8%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 10 (Northern VA)		Area 10 (Northern VA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$1,168.53		\$1,210.27		\$1,084.78	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$944.31	80.8%	\$978.04	80.8%	\$876.64	80.8%
Trend	\$156.90	13.4%	\$162.50	13.4%	\$145.65	13.4%
Risk Adjustment	-\$1,401.94	-120.0%	-\$1,405.00	-116.1%	-\$1,364.89	-125.8%
HIT Moratorium	\$49.31	4.22%	\$49.90	4.1%	\$47.20	4.4%
Other Non-Benefit Expenses	\$15.21	1.3%	\$11.00	0.9%	\$20.07	1.9%
Benefit Changes	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Base Period Index Rate	\$225.12	19.3%	\$237.09	19.6%	\$208.64	19.2%
Benefit Leveraging	\$81.23	7.0%	-\$5.88	-0.5%	\$192.21	17.7%
Age Calibration	-\$44.64	-3.8%	-\$45.25	-3.7%	-\$42.72	-3.9%
"Other"	\$110.72	9.5%	\$129.81	10.7%	\$81.29	7.5%
		0.0%		0.0%		0.0%
Rate on 1/1/2020	\$1,304.75	11.7%	\$1,322.47	9.3%	\$1,248.86	15.1%
Calculated Rate on 1/1/2020	\$1,304.75	11.7%	\$1,322.47	9.3%	\$1,248.86	15.1%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Group Hospitalization & Medical Services, Inc.		
NAIC Number	53007		
Product(s)	PPO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	N/A	N/A	N/A
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	N/A	N/A	N/A
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	1.000	1.000	0.0%
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	N/A	N/A	N/A

HealthKeepers, Inc. - Individual Market

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-6.1%
Carrier Calculated Avg Total Rate Change	-5.6%
Carrier Calculated Avg Adult Rate Change	-5.6%
Carrier Calculated Avg Child Rate Change	-5.7%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
Plan Design Information	Anthem HealthKeepers Silver X 62 Silver		Anthem HealthKeepers Bronze X 7 Bronze		Anthem HealthKeepers Gold X 160 Gold	
In-Network Individual Deductible	\$6,250	\$6,100	\$7,500	\$6,500	\$1,600	\$1,350
In-Network Member Coinsurance	35%	35%	40%	40%	20%	20%
In-Network Individual OOP	\$8,150	\$7,900	\$8,150	\$7,900	\$8,150	\$7,900
In-Network PCP OV Copay	\$35	\$35	NA	NA	\$25	\$25
Members as of 3/1/2019	52,934		5,360		20,212	
Pct of Statewide Membership	48.6%		4.9%		18.6%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 12 (Non-MSA)		Area 12 (Non-MSA)		Area 12 (Non-MSA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$540.58		\$417.10		\$540.36	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$18.60	3.4%	\$14.35	3.4%	\$18.59	3.4%
Trend	\$46.04	8.5%	\$35.52	8.5%	\$46.02	8.5%
Risk Adjustment	-\$5.75	-1.1%	-\$4.47	-1.1%	-\$5.74	-1.1%
HIT Moratorium	\$16.00	3.0%	\$12.35	3.0%	\$15.99	3.0%
Other Non-Benefit Expenses	\$7.49	1.4%	\$7.49	1.8%	\$7.49	1.4%
Benefit Changes	-\$4.56	-0.8%	-\$4.32	-1.0%	-\$5.86	-1.1%
Other Change 1	-\$105.05	-19.4%	-\$94.70	-22.7%	-\$100.45	-18.6%
Other Change 2	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 3	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 4	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 5	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$513.35	-5.0%	\$383.32	-8.1%	\$516.41	-4.4%
Calculated Rate on 1/1/2020	\$513.35	-5.0%	\$383.32	-8.1%	\$516.41	-4.4%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

HealthKeepers, Inc. - Individual Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	HealthKeepers, Inc.		
NAIC Number	95169		
Product(s)	HMO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.050	1.050	0.0%
19	0.941	1.050	1.050	0.0%
20	0.970	1.050	1.050	0.0%
21	1.000	1.050	1.050	0.0%
22	1.000	1.050	1.050	0.0%
23	1.000	1.050	1.050	0.0%
24	1.000	1.050	1.050	0.0%
25	1.004	1.100	1.100	0.0%
26	1.024	1.100	1.100	0.0%
27	1.048	1.100	1.100	0.0%
28	1.087	1.100	1.100	0.0%
29	1.119	1.100	1.100	0.0%
30	1.135	1.150	1.150	0.0%
31	1.159	1.150	1.150	0.0%
32	1.183	1.150	1.150	0.0%
33	1.198	1.150	1.150	0.0%
34	1.214	1.150	1.150	0.0%
35	1.222	1.150	1.150	0.0%
36	1.230	1.150	1.150	0.0%
37	1.238	1.150	1.150	0.0%
38	1.246	1.150	1.150	0.0%
39	1.262	1.150	1.150	0.0%
40	1.278	1.200	1.200	0.0%
41	1.302	1.200	1.200	0.0%
42	1.325	1.200	1.200	0.0%
43	1.357	1.200	1.200	0.0%
44	1.397	1.200	1.200	0.0%
45	1.444	1.200	1.200	0.0%
46	1.500	1.200	1.200	0.0%
47	1.563	1.200	1.200	0.0%
48	1.635	1.200	1.200	0.0%
49	1.706	1.200	1.200	0.0%
50	1.786	1.250	1.250	0.0%
51	1.865	1.250	1.250	0.0%
52	1.952	1.250	1.250	0.0%
53	2.040	1.250	1.250	0.0%
54	2.135	1.250	1.250	0.0%
55	2.230	1.250	1.250	0.0%
56	2.333	1.250	1.250	0.0%
57	2.437	1.250	1.250	0.0%
58	2.548	1.250	1.250	0.0%
59	2.603	1.250	1.250	0.0%
60	2.714	1.300	1.300	0.0%
61	2.810	1.300	1.300	0.0%
62	2.873	1.300	1.300	0.0%
63	2.952	1.300	1.300	0.0%
64+	3.000	1.300	1.300	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans ar

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	1.120	1.112	0.8%
Area 2 (Charlottesville)	1.042	1.034	0.8%
Area 3 (Danville)	0.989	0.981	0.8%
Area 4 (Harrisonburg)	1.049	1.041	0.8%
Area 5 (Bristol)	0.988	0.981	0.8%
Area 6 (Lynchburg)	1.042	1.035	0.8%
Area 7 (Richmond)	0.941	0.964	-2.4%
Area 8 (Roanoke)	1.043	1.035	0.8%
Area 9 (Tidewater)	0.992	0.984	0.8%
Area 10 (Northern VA)	0.990	1.003	-1.3%
Area 11 (Winchester)	1.015	1.008	0.8%
Area 12 (Non-MSA)	0.989	0.981	0.8%

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. - Individual Market

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-5.5%
Carrier Calculated Avg Total Rate Change	-5.5%
Carrier Calculated Avg Adult Rate Change	-5.5%
Carrier Calculated Avg Child Rate Change	-5.5%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
Plan Design Information	\$5500/\$50/Dental Bronze		\$3200/20%/HSA/Dental Silver		\$6000/\$40/Dental Silver	
In-Network Individual Deductible	\$5,500	\$5,500	\$3,200	\$3,200	\$6,000	\$6,000
In-Network Member Coinsurance	35%	35%	20%	20%	35%	35%
In-Network Individual OOP	\$8,200	\$7,900	\$6,650	\$6,000	\$8,200	\$7,900
In-Network PCP OV Copay	before ded), \$0	before ded), \$0	20% after ded	20% after ded	\$40	\$35
Members as of 3/1/2019	15752		613		735	
Pct of Statewide Membership	36.8%		1.4%		1.7%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 7 (Richmond)		Area 10 (Northern VA)		Area 12 (Non-MSA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$517.40		\$674.87		\$525.85	
Individual Mandate	\$20.70	4.0%	\$26.99	4.0%	\$21.03	4.0%
Other Morbidity	-\$73.12	-14.1%	-\$95.38	-14.1%	-\$74.31	-14.1%
Trend	\$24.88	4.8%	\$32.45	4.8%	\$25.28	4.8%
Risk Adjustment	\$19.90	3.8%	\$25.96	3.8%	\$20.22	3.8%
HIT Moratorium	\$5.66	1.1%	\$7.38	1.1%	\$5.75	1.1%
Other Non-Benefit Expenses	-\$5.77	-1.1%	-\$7.52	-1.1%	-\$5.86	-1.1%
Benefit Changes	-\$2.35	-0.5%	-\$4.18	-0.6%	-\$5.42	-1.0%
Other Change 1	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 2	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 3	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 4	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
All Other	-\$12.84	-2.5%	-\$68.80	-10.2%	\$2.47	0.5%
Rate on 1/1/2020	\$494.45	-4.4%	\$591.76	-12.3%	\$515.01	-2.1%
Calculated Rate on 1/1/2020	\$494.45	-4.4%	\$591.76	-12.3%	\$515.01	-2.1%
Rate Check	OK	OK	OK	OK	OK	OK

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. - Individual Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.		
NAIC Number	95639		
Product(s)	HMO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.200	1.200	0.0%
19	0.941	1.200	1.200	0.0%
20	0.970	1.200	1.200	0.0%
21	1.000	1.200	1.200	0.0%
22	1.000	1.200	1.200	0.0%
23	1.000	1.200	1.200	0.0%
24	1.000	1.200	1.200	0.0%
25	1.004	1.200	1.200	0.0%
26	1.024	1.200	1.200	0.0%
27	1.048	1.200	1.200	0.0%
28	1.087	1.200	1.200	0.0%
29	1.119	1.200	1.200	0.0%
30	1.135	1.200	1.200	0.0%
31	1.159	1.200	1.200	0.0%
32	1.183	1.200	1.200	0.0%
33	1.198	1.200	1.200	0.0%
34	1.214	1.200	1.200	0.0%
35	1.222	1.200	1.200	0.0%
36	1.230	1.200	1.200	0.0%
37	1.238	1.200	1.200	0.0%
38	1.246	1.200	1.200	0.0%
39	1.262	1.200	1.200	0.0%
40	1.278	1.200	1.200	0.0%
41	1.302	1.200	1.200	0.0%
42	1.325	1.200	1.200	0.0%
43	1.357	1.200	1.200	0.0%
44	1.397	1.200	1.200	0.0%
45	1.444	1.200	1.200	0.0%
46	1.500	1.200	1.200	0.0%
47	1.563	1.200	1.200	0.0%
48	1.635	1.200	1.200	0.0%
49	1.706	1.200	1.200	0.0%
50	1.786	1.200	1.200	0.0%
51	1.865	1.200	1.200	0.0%
52	1.952	1.200	1.200	0.0%
53	2.040	1.200	1.200	0.0%
54	2.135	1.200	1.200	0.0%
55	2.230	1.200	1.200	0.0%
56	2.333	1.200	1.200	0.0%
57	2.437	1.200	1.200	0.0%
58	2.548	1.200	1.200	0.0%
59	2.603	1.200	1.200	0.0%
60	2.714	1.200	1.200	0.0%
61	2.810	1.200	1.200	0.0%
62	2.873	1.200	1.200	0.0%
63	2.952	1.200	1.200	0.0%
64+	3.000	1.200	1.200	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans ar

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	N/A	N/A	N/A
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	1.000	1.000	0.0%
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	1.000	1.000	0.0%
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	1.000	1.000	0.0%

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	N/A
Carrier Calculated Avg Total Rate Change	-4.6%
Carrier Calculated Avg Adult Rate Change	-4.6%
Carrier Calculated Avg Child Rate Change	-4.6%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	OptimaFit Bronze 6000 30% Plus Bronze		OptimaFit Bronze 6000 30% Plus Bronze		OptimaFit Bronze 6000 30% Plus Bronze	
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$6,000	\$5,500	\$6,000	\$5,500	\$6,000	\$5,500
In-Network Member Coinsurance	30%	30%	30%	30%	30%	30%
In-Network Individual OOP	\$8,150	\$6,650	\$8,150	\$6,650	\$8,150	\$6,650
In-Network PCP OV Copay	\$0	\$0	\$0	\$0	\$0	\$0
Members as of 3/1/2019	0		0		0	
Pct of Statewide Membership	N/A		N/A		N/A	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 9 (Tidewater)		Area 9 (Tidewater)		Area 9 (Tidewater)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$651.56		\$651.56		\$651.56	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Trend	\$66.90	10.3%	\$66.90	10.3%	\$66.90	10.3%
Risk Adjustment	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
HIT Moratorium	\$16.03	2.5%	\$16.03	2.5%	\$16.03	2.5%
Other Non-Benefit Expenses	\$20.07	3.1%	\$20.07	3.1%	\$20.07	3.1%
Benefit Changes	-\$50.79	-7.8%	-\$50.79	-7.8%	-\$50.79	-7.8%
Capitation Change	\$3.93	0.6%	\$3.93	0.6%	\$3.93	0.6%
OHP Experience	-\$86.21	-13.2%	-\$86.21	-13.2%	-\$86.21	-13.2%
		0.0%		0.0%		0.0%
		0.0%		0.0%		0.0%
		0.0%		0.0%		0.0%
Rate on 1/1/2020	\$621.50	-4.6%	\$621.50	-4.6%	\$621.50	-4.6%
Calculated Rate on 1/1/2020	\$621.50	-4.6%	\$621.50	-4.6%	\$621.50	-4.6%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

Optima Health Insurance Company - Individual Market (Off exchange only)

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Optima Health Insurance Company		
NAIC Number	70715		
Product(s)	PPO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.200	1.200	0.0%
19	0.941	1.200	1.200	0.0%
20	0.970	1.200	1.200	0.0%
21	1.000	1.200	1.200	0.0%
22	1.000	1.200	1.200	0.0%
23	1.000	1.200	1.200	0.0%
24	1.000	1.200	1.200	0.0%
25	1.004	1.200	1.200	0.0%
26	1.024	1.200	1.200	0.0%
27	1.048	1.200	1.200	0.0%
28	1.087	1.200	1.200	0.0%
29	1.119	1.200	1.200	0.0%
30	1.135	1.200	1.200	0.0%
31	1.159	1.200	1.200	0.0%
32	1.183	1.200	1.200	0.0%
33	1.198	1.200	1.200	0.0%
34	1.214	1.200	1.200	0.0%
35	1.222	1.200	1.200	0.0%
36	1.230	1.200	1.200	0.0%
37	1.238	1.200	1.200	0.0%
38	1.246	1.200	1.200	0.0%
39	1.262	1.200	1.200	0.0%
40	1.278	1.200	1.200	0.0%
41	1.302	1.200	1.200	0.0%
42	1.325	1.200	1.200	0.0%
43	1.357	1.200	1.200	0.0%
44	1.397	1.200	1.200	0.0%
45	1.444	1.200	1.200	0.0%
46	1.500	1.200	1.200	0.0%
47	1.563	1.200	1.200	0.0%
48	1.635	1.200	1.200	0.0%
49	1.706	1.200	1.200	0.0%
50	1.786	1.200	1.200	0.0%
51	1.865	1.200	1.200	0.0%
52	1.952	1.200	1.200	0.0%
53	2.040	1.200	1.200	0.0%
54	2.135	1.200	1.200	0.0%
55	2.230	1.200	1.200	0.0%
56	2.333	1.200	1.200	0.0%
57	2.437	1.200	1.200	0.0%
58	2.548	1.200	1.200	0.0%
59	2.603	1.200	1.200	0.0%
60	2.714	1.200	1.200	0.0%
61	2.810	1.200	1.200	0.0%
62	2.873	1.200	1.200	0.0%
63	2.952	1.200	1.200	0.0%
64+	3.000	1.200	1.200	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	N/A	N/A	N/A
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	N/A	N/A	N/A
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	1.000	1.000	0.0%
Area 10 (Northern VA)	N/A	N/A	N/A
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	N/A	N/A	N/A

Optima Health Plan - Individual Market

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-10.9%
Carrier Calculated Avg Total Rate Change	-11.3%
Carrier Calculated Avg Adult Rate Change	-11.3%
Carrier Calculated Avg Child Rate Change	-11.3%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	OptimaFit Silver 6600 30% Direct Silver	OptimaFit Silver 3000 25% Direct Silver	OptimaFit Silver 7500 40% Select Bronze	OptimaFit Silver 3000 25% Direct Silver	OptimaFit Silver 3000 25% Direct Silver	OptimaFit Bronze 7500 40% Select Bronze
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$6,600	\$6,600	\$3,000	\$1,800	\$7,500	\$7,200
In-Network Member Coinsurance	30%	30%	25%	25%	40%	20%
In-Network Individual OOP	\$8,150	\$7,900	\$8,150	\$7,900	\$8,150	\$7,900
In-Network PCP OV Copay	\$25	\$25	\$40	\$40	\$0	\$40
Members as of 3/1/2019	12018		186		175	
Pct of Statewide Membership	50.6%		0.8%		0.7%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 9 (Tidewater)		Area 2 (Charlottesville)		Area 4 (Harrisonburg)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$601.63		\$893.90		\$444.38	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$43.94	7.3%	\$65.29	7.3%	\$32.46	7.3%
Trend	\$64.72	10.8%	\$90.82	10.2%	\$49.59	11.2%
Risk Adjustment	-\$144.91	-24.1%	-\$214.22	-24.0%	-\$107.40	-24.2%
HIT Moratorium	\$5.49	0.9%	\$8.12	0.9%	\$4.07	0.9%
Other Non-Benefit Expenses	\$10.58	1.8%	\$15.64	1.7%	\$7.84	1.8%
Benefit Changes	-\$11.39	-1.9%	-\$44.06	-4.9%	-\$2.52	-0.6%
Network Changes	-\$21.34	-3.5%	-\$30.53	-3.4%	-\$8.41	-1.9%
CSR Shortfall	-\$13.02	-2.2%	-\$18.63	-2.1%	\$0.00	0.0%
Area Factor Revisions & Mix Change	-\$1.53	-0.3%	-\$102.48	-11.5%	\$27.35	6.2%
Capitation Adjustment	\$7.43	1.2%	\$9.24	1.0%	\$6.23	1.4%
Profit & Risk Margin	-\$12.64	-2.1%	-\$15.70	-1.8%	-\$10.58	-2.4%
Rate on 1/1/2020	\$528.97	-12.1%	\$657.39	-26.5%	\$443.00	-0.3%
Calculated Rate on 1/1/2020	\$528.97	-12.1%	\$657.39	-26.5%	\$443.00	-0.3%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

Optima Health Plan - Individual Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Optima Health Plan		
NAIC Number	95281		
Product(s)	HMO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.200	1.200	0.0%
19	0.941	1.200	1.200	0.0%
20	0.970	1.200	1.200	0.0%
21	1.000	1.200	1.200	0.0%
22	1.000	1.200	1.200	0.0%
23	1.000	1.200	1.200	0.0%
24	1.000	1.200	1.200	0.0%
25	1.004	1.200	1.200	0.0%
26	1.024	1.200	1.200	0.0%
27	1.048	1.200	1.200	0.0%
28	1.087	1.200	1.200	0.0%
29	1.119	1.200	1.200	0.0%
30	1.135	1.200	1.200	0.0%
31	1.159	1.200	1.200	0.0%
32	1.183	1.200	1.200	0.0%
33	1.198	1.200	1.200	0.0%
34	1.214	1.200	1.200	0.0%
35	1.222	1.200	1.200	0.0%
36	1.230	1.200	1.200	0.0%
37	1.238	1.200	1.200	0.0%
38	1.246	1.200	1.200	0.0%
39	1.262	1.200	1.200	0.0%
40	1.278	1.200	1.200	0.0%
41	1.302	1.200	1.200	0.0%
42	1.325	1.200	1.200	0.0%
43	1.357	1.200	1.200	0.0%
44	1.397	1.200	1.200	0.0%
45	1.444	1.200	1.200	0.0%
46	1.500	1.200	1.200	0.0%
47	1.563	1.200	1.200	0.0%
48	1.635	1.200	1.200	0.0%
49	1.706	1.200	1.200	0.0%
50	1.786	1.200	1.200	0.0%
51	1.865	1.200	1.200	0.0%
52	1.952	1.200	1.200	0.0%
53	2.040	1.200	1.200	0.0%
54	2.135	1.200	1.200	0.0%
55	2.230	1.200	1.200	0.0%
56	2.333	1.200	1.200	0.0%
57	2.437	1.200	1.200	0.0%
58	2.548	1.200	1.200	0.0%
59	2.603	1.200	1.200	0.0%
60	2.714	1.200	1.200	0.0%
61	2.810	1.200	1.200	0.0%
62	2.873	1.200	1.200	0.0%
63	2.952	1.200	1.200	0.0%
64+	3.000	1.200	1.200	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	1.170	1.347	-13.1%
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	1.170	1.095	6.9%
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	1.170	1.331	-12.1%
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	1.000	1.000	0.0%
Area 10 (Northern VA)	N/A	N/A	N/A
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	1.170	1.310	-10.7%

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	N/A
Carrier Calculated Avg Total Rate Change	N/A
Carrier Calculated Avg Adult Rate Change	N/A
Carrier Calculated Avg Child Rate Change	N/A

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
Plan Design Information						
In-Network Individual Deductible						
In-Network Member Coinsurance						
In-Network Individual OOP						
In-Network PCP OV Copay						
Members as of 3/1/2019	N/A		N/A		N/A	
Pct of Statewide Membership	40		40		40	
Age Used in Comparison	Rating Area 7					
Rating Area Used in Comparison	Rating Area 7					
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019						
Individual Mandate		N/A		N/A		N/A
Other Morbidity		N/A		N/A		N/A
Trend		N/A		N/A		N/A
Risk Adjustment		N/A		N/A		N/A
HIT Moratorium		N/A		N/A		N/A
Other Non-Benefit Expenses		N/A		N/A		N/A
Benefit Changes		N/A		N/A		N/A
Other Change 1		N/A		N/A		N/A
Other Change 2		N/A		N/A		N/A
Other Change 3		N/A		N/A		N/A
Other Change 4		N/A		N/A		N/A
Other Change 5		N/A		N/A		N/A
Rate on 1/1/2020		N/A		N/A		N/A
Calculated Rate on 1/1/2020	\$0.00	N/A	\$0.00	N/A	\$0.00	N/A
Rate Check	OK	N/A	OK	N/A	OK	N/A

*Rates are for a non-tobacco user

Oscar Insurance Company - Individual Market (new)

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Oscar Insurance Company		
NAIC Number	15777		
Product(s)	EPO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000		N/A
19	0.941	1.000		N/A
20	0.970	1.000		N/A
21	1.000	1.000		N/A
22	1.000	1.000		N/A
23	1.000	1.000		N/A
24	1.000	1.000		N/A
25	1.004	1.050		N/A
26	1.024	1.050		N/A
27	1.048	1.050		N/A
28	1.087	1.050		N/A
29	1.119	1.050		N/A
30	1.135	1.050		N/A
31	1.159	1.050		N/A
32	1.183	1.050		N/A
33	1.198	1.050		N/A
34	1.214	1.050		N/A
35	1.222	1.090		N/A
36	1.230	1.090		N/A
37	1.238	1.090		N/A
38	1.246	1.090		N/A
39	1.262	1.090		N/A
40	1.278	1.090		N/A
41	1.302	1.090		N/A
42	1.325	1.090		N/A
43	1.357	1.090		N/A
44	1.397	1.090		N/A
45	1.444	1.090		N/A
46	1.500	1.090		N/A
47	1.563	1.090		N/A
48	1.635	1.090		N/A
49	1.706	1.090		N/A
50	1.786	1.090		N/A
51	1.865	1.090		N/A
52	1.952	1.090		N/A
53	2.040	1.090		N/A
54	2.135	1.090		N/A
55	2.230	1.125		N/A
56	2.333	1.125		N/A
57	2.437	1.125		N/A
58	2.548	1.125		N/A
59	2.603	1.125		N/A
60	2.714	1.125		N/A
61	2.810	1.125		N/A
62	2.873	1.125		N/A
63	2.952	1.125		N/A
64+	3.000	1.125		N/A

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A		N/A
Area 2 (Charlottesville)	N/A		N/A
Area 3 (Danville)	N/A		N/A
Area 4 (Harrisonburg)	N/A		N/A
Area 5 (Bristol)	N/A		N/A
Area 6 (Lynchburg)	N/A		N/A
Area 7 (Richmond)	1.000		N/A
Area 8 (Roanoke)	N/A		N/A
Area 9 (Tidewater)	N/A		N/A
Area 10 (Northern VA)	N/A		N/A
Area 11 (Winchester)	N/A		N/A
Area 12 (Non-MSA)	N/A		N/A

Piedmont Community HealthCare HMO, Inc. - Individual Market

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-8.5%
Carrier Calculated Avg Total Rate Change	-9.7%
Carrier Calculated Avg Adult Rate Change	-9.7%
Carrier Calculated Avg Child Rate Change	-9.7%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
Piedmont Bronze 6500 Bronze	Piedmont Silver 6500 Silver		Piedmont Bronze 6500 Bronze			
In-Network Individual Deductible	\$6,500	\$6,800	\$6,500	\$6,600	\$6,500	\$6,800
In-Network Member Coinsurance	30%	40%	30%	20%	30%	40%
In-Network Individual OOP	\$8,150	\$7,900	\$8,150	\$7,600	\$8,150	\$7,900
In-Network PCP OV Copay	\$40	\$35	\$40	\$45	\$40	\$35
Members as of 3/1/2019	2,973		2,696		2,973	
Pct of Statewide Membership	42.2%		38.2%		42.2%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 6 (Lynchburg)		Area 6 (Lynchburg)		Area 6 (Lynchburg)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$468.66		\$640.75		\$468.66	
Individual Mandate	\$11.04	2.4%	\$15.09	2.4%	\$11.04	2.4%
Other Morbidity	\$17.35	3.7%	\$23.72	3.7%	\$17.35	3.7%
Trend	-\$11.40	-2.4%	-\$15.58	-2.4%	-\$11.40	-2.4%
Risk Adjustment	-\$55.02	-11.7%	-\$75.22	-11.7%	-\$55.02	-11.7%
HIT Moratorium	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Non-Benefit Expenses	\$24.59	5.2%	\$33.61	5.2%	\$24.59	5.2%
Benefit Changes	\$16.52	3.5%	\$16.52	2.6%	\$16.52	3.5%
Network Expansion	-\$7.77	-1.7%	-\$10.62	-1.7%	-\$7.77	-1.7%
Geographic	-\$19.22	-4.1%	-\$26.27	-4.1%	-\$19.22	-4.1%
Other Change 3	-\$1.89	-0.4%	-\$28.71	-4.5%	-\$1.89	-0.4%
Other Change 4		0.0%		0.0%		0.0%
Other Change 5		0.0%		0.0%		0.0%
Rate on 1/1/2020	\$442.86	-5.5%	\$573.29	-10.5%	\$442.86	-5.5%
Calculated Rate on 1/1/2020	\$442.86	-5.5%	\$573.29	-10.5%	\$442.86	-5.5%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

Piedmont Community HealthCare HMO, Inc. - Individual Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Piedmont Community Healthcare HMO, Inc		
NAIC Number	15791		
Product(s)	HMO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.050	1.050	0.0%
20	0.970	1.050	1.050	0.0%
21	1.000	1.050	1.050	0.0%
22	1.000	1.050	1.050	0.0%
23	1.000	1.050	1.050	0.0%
24	1.000	1.050	1.050	0.0%
25	1.004	1.100	1.100	0.0%
26	1.024	1.100	1.100	0.0%
27	1.048	1.100	1.100	0.0%
28	1.087	1.100	1.100	0.0%
29	1.119	1.100	1.100	0.0%
30	1.135	1.150	1.150	0.0%
31	1.159	1.150	1.150	0.0%
32	1.183	1.150	1.150	0.0%
33	1.198	1.150	1.150	0.0%
34	1.214	1.150	1.150	0.0%
35	1.222	1.200	1.200	0.0%
36	1.230	1.200	1.200	0.0%
37	1.238	1.200	1.200	0.0%
38	1.246	1.200	1.200	0.0%
39	1.262	1.200	1.200	0.0%
40	1.278	1.250	1.250	0.0%
41	1.302	1.250	1.250	0.0%
42	1.325	1.250	1.250	0.0%
43	1.357	1.250	1.250	0.0%
44	1.397	1.250	1.250	0.0%
45	1.444	1.300	1.300	0.0%
46	1.500	1.300	1.300	0.0%
47	1.563	1.300	1.300	0.0%
48	1.635	1.300	1.300	0.0%
49	1.706	1.300	1.300	0.0%
50	1.786	1.400	1.400	0.0%
51	1.865	1.400	1.400	0.0%
52	1.952	1.400	1.400	0.0%
53	2.040	1.400	1.400	0.0%
54	2.135	1.400	1.400	0.0%
55	2.230	1.500	1.500	0.0%
56	2.333	1.500	1.500	0.0%
57	2.437	1.500	1.500	0.0%
58	2.548	1.500	1.500	0.0%
59	2.603	1.500	1.500	0.0%
60	2.714	1.500	1.500	0.0%
61	2.810	1.500	1.500	0.0%
62	2.873	1.500	1.500	0.0%
63	2.952	1.500	1.500	0.0%
64+	3.000	1.500	1.500	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans are in the area)

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	1.000	1.018	-1.8%
Area 3 (Danville)	1.000	1.020	-2.0%
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	1.000	1.000	0.0%
Area 7 (Richmond)	N/A	1.053	N/A
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	N/A	N/A	N/A
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	1.000	1.053	-5.0%

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Virginia Premier Health Plan, Inc.		
NAIC Number	95612		
Product(s)	HMO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	5.8%
Carrier Calculated Avg Total Rate Change	5.7%
Carrier Calculated Avg Adult Rate Change	5.7%
Carrier Calculated Avg Child Rate Change	5.7%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	Virginia Premier Preferred Bronze 7 Bronze		Virginia Premier Preferred Silver 50 Silver		Virginia Premier Preferred Bronze 7 Bronze	
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$7,200	\$6,600	\$5,000	\$4,500	\$7,200	\$6,600
In-Network Member Coinsurance	50%	50%	20%	20%	50%	50%
In-Network Individual OOP	\$8,150	\$7,900	\$8,150	\$7,900	\$8,150	\$7,900
In-Network PCP OV Copay	N/A	N/A	\$15	\$20	N/A	N/A
Members as of 3/1/2019	2,568		189		2,568	
Pct of Statewide Membership	49.5%		3.6%		49.5%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 7 (Richmond)		Area 7 (Richmond)		Area 7 (Richmond)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$379.00		\$518.61		\$379.00	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$18.95	5.0%	\$25.93	5.0%	\$18.95	5.0%
Trend	\$27.84	7.3%	\$38.09	7.3%	\$27.84	7.3%
Risk Adjustment	-\$1.80	-0.5%	-\$2.46	-0.5%	-\$1.80	-0.5%
HIT Moratorium	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Non-Benefit Expenses	-\$13.27	-3.5%	-\$18.15	-3.5%	-\$13.27	-3.5%
Benefit Changes	\$3.63	1.0%	-\$0.79	-0.2%	\$3.63	1.0%
CSR Non-funding	\$0.00	0.0%	-\$29.77	-5.7%	\$0.00	0.0%
CSR IU Load	-\$6.60	-1.7%	-\$8.47	-1.6%	-\$6.60	-1.7%
Age	\$1.96	0.5%	\$2.52	0.5%	\$1.96	0.5%
Other Change 4	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 5	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$409.71	8.1%	\$525.51	1.3%	\$409.71	8.1%
Calculated Rate on 1/1/2020	\$409.71	8.1%	\$525.51	1.3%	\$409.71	8.1%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

Virginia Premier Health Plan, Inc. - Individual Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Virginia Premier Health Plan, Inc.		
NAIC Number	95612		
Product(s)	HMO		
Market Segment	Individual		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.150	1.150	0.0%
19	0.941	1.150	1.150	0.0%
20	0.970	1.150	1.150	0.0%
21	1.000	1.150	1.150	0.0%
22	1.000	1.150	1.150	0.0%
23	1.000	1.150	1.150	0.0%
24	1.000	1.150	1.150	0.0%
25	1.004	1.150	1.150	0.0%
26	1.024	1.150	1.150	0.0%
27	1.048	1.150	1.150	0.0%
28	1.087	1.150	1.150	0.0%
29	1.119	1.150	1.150	0.0%
30	1.135	1.150	1.150	0.0%
31	1.159	1.150	1.150	0.0%
32	1.183	1.150	1.150	0.0%
33	1.198	1.150	1.150	0.0%
34	1.214	1.150	1.150	0.0%
35	1.222	1.150	1.150	0.0%
36	1.230	1.150	1.150	0.0%
37	1.238	1.150	1.150	0.0%
38	1.246	1.150	1.150	0.0%
39	1.262	1.150	1.150	0.0%
40	1.278	1.150	1.150	0.0%
41	1.302	1.150	1.150	0.0%
42	1.325	1.150	1.150	0.0%
43	1.357	1.150	1.150	0.0%
44	1.397	1.150	1.150	0.0%
45	1.444	1.150	1.150	0.0%
46	1.500	1.150	1.150	0.0%
47	1.563	1.150	1.150	0.0%
48	1.635	1.150	1.150	0.0%
49	1.706	1.150	1.150	0.0%
50	1.786	1.150	1.150	0.0%
51	1.865	1.150	1.150	0.0%
52	1.952	1.150	1.150	0.0%
53	2.040	1.150	1.150	0.0%
54	2.135	1.150	1.150	0.0%
55	2.230	1.150	1.150	0.0%
56	2.333	1.150	1.150	0.0%
57	2.437	1.150	1.150	0.0%
58	2.548	1.150	1.150	0.0%
59	2.603	1.150	1.150	0.0%
60	2.714	1.150	1.150	0.0%
61	2.810	1.150	1.150	0.0%
62	2.873	1.150	1.150	0.0%
63	2.952	1.150	1.150	0.0%
64+	3.000	1.150	1.150	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	N/A	N/A	N/A
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	1.000	1.000	0.0%
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	N/A	N/A	N/A
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	N/A	N/A	N/A

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Aetna Health Inc. (a PA corp.)		
NAIC Number	95109		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	5.0%
Carrier Calculated Avg Total Rate Change	5.0%
Carrier Calculated Avg Adult Rate Change	5.0%
Carrier Calculated Avg Child Rate Change	5.0%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	VA Silver HMO 6000 80% Silver		VA Silver HMO 6000 80% Silver		VA Silver HMO 6000 80% Silver	
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$6,000	\$6,000	\$6,000	\$6,000	\$6,000	\$6,000
In-Network Member Coinsurance	80%	80%	80%	80%	80%	80%
In-Network Individual OOP	\$8,150	\$7,900	\$8,150	\$7,900	\$8,150	\$7,900
In-Network PCP OV Copay	\$30	\$30	\$30	\$30	\$30	\$30
Members as of 3/1/2019	181		42		4	
Pct of Statewide Membership	85.9%		19.9%		1.9%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 7 (Richmond)		Area 8 (Roanoke)		Area 4 (Harrisonburg)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$479.32		\$453.81		\$515.97	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$15.47	3.2%	\$14.65	3.2%	\$16.66	3.2%
Trend	\$59.05	12.3%	\$55.91	12.3%	\$63.57	12.3%
Risk Adjustment	-\$9.03	-1.9%	-\$9.03	-2.0%	-\$9.03	-1.7%
HIT Moratorium	\$12.46	2.6%	\$11.80	2.6%	\$13.42	2.6%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	-\$18.16	-3.8%	-\$17.19	-3.8%	-\$19.55	-3.8%
Area	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Demo	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Network	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other	-\$30.87	-6.4%	-\$28.74	-6.3%	-\$33.92	-6.6%
	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$508.26	6.0%	\$481.21	6.0%	\$547.12	6.0%
Calculated Rate on 1/1/2020	\$508.26	6.0%	\$481.21	6.0%	\$547.12	6.0%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Aetna Health Inc. (a PA corp.)		
NAIC Number	95109		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans are offer

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	0.914	0.914	0.0%
Area 2 (Charlottesville)	0.929	0.929	0.0%
Area 3 (Danville)	0.970	0.970	0.0%
Area 4 (Harrisonburg)	1.020	1.020	0.0%
Area 5 (Bristol)	0.980	0.980	0.0%
Area 6 (Lynchburg)	0.970	0.970	0.0%
Area 7 (Richmond)	0.948	0.948	0.0%
Area 8 (Roanoke)	0.897	0.897	0.0%
Area 9 (Tidewater)	0.991	0.991	0.0%
Area 10 (Northern VA)	0.960	0.960	0.0%
Area 11 (Winchester)	0.960	0.960	0.0%
Area 12 (Non-MSA)	0.979	0.979	0.0%

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Aetna Life Insurance Company		
NAIC Number	60054		
Product(s)	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	3.3%
Carrier Calculated Avg Total Rate Change	3.3%
Carrier Calculated Avg Adult Rate Change	3.3%
Carrier Calculated Avg Child Rate Change	3.3%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
VA Silver PPO 6000 80/50 Silver						
In-Network Individual Deductible	\$6,000	\$6,000	\$6,000	\$6,000	\$6,000	\$6,000
In-Network Member Coinsurance	80%	80%	80%	80%	80%	80%
In-Network Individual OOP	\$8,150	\$7,900	\$8,150	\$7,900	\$8,150	\$7,900
In-Network PCP OV Copay	\$30	\$30	\$30	\$30	\$30	\$30
Members as of 3/1/2019	194		39		6	
Pct of Statewide Membership	76.3%		15.3%		2.4%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 8 (Roanoke)		Area 4 (Harrisonburg)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$528.85		\$494.21		\$561.90	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$17.07	3.2%	\$15.95	3.2%	\$18.14	3.2%
Trend	\$65.16	12.3%	\$60.89	12.3%	\$69.23	12.3%
Risk Adjustment	-\$23.48	-4.4%	-\$23.48	-4.8%	-\$23.48	-4.2%
HIT Moratorium	\$13.75	2.6%	\$12.85	2.6%	\$14.61	2.6%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	-\$19.77	-3.7%	-\$18.48	-3.7%	-\$21.01	-3.7%
Area	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Demo	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Network	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other	-\$29.56	-5.6%	-\$26.08	-5.3%	-\$32.87	-5.8%
	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$552.02	4.4%	\$515.87	4.4%	\$586.52	4.4%
Calculated Rate on 1/1/2020	\$552.02	4.4%	\$515.87	4.4%	\$586.52	4.4%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Aetna Life Insurance Company		
NAIC Number	60054		
Product(s)	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans are offer

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	0.914	0.914	0.0%
Area 2 (Charlottesville)	0.929	0.929	0.0%
Area 3 (Danville)	0.970	0.970	0.0%
Area 4 (Harrisonburg)	1.020	1.020	0.0%
Area 5 (Bristol)	0.980	0.980	0.0%
Area 6 (Lynchburg)	0.970	0.970	0.0%
Area 7 (Richmond)	0.948	0.948	0.0%
Area 8 (Roanoke)	0.897	0.897	0.0%
Area 9 (Tidewater)	0.991	0.991	0.0%
Area 10 (Northern VA)	0.960	0.960	0.0%
Area 11 (Winchester)	0.960	0.960	0.0%
Area 12 (Non-MSA)	0.979	0.979	0.0%

Anthem Health Plans of Virginia, Inc. - Small Group Market

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	4.5%
Carrier Calculated Avg Total Rate Change	5.7%
Carrier Calculated Avg Adult Rate Change	5.7%
Carrier Calculated Avg Child Rate Change	5.8%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	Anthem Platinum PPO 10/0%/3500 Platinum		Anthem Gold OAEPO 2000/20%/70 Gold		Anthem Gold PPO 1000/20%/5500 Gold	
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$0	\$0	\$2,000	\$1,500	\$1,000	\$1,000
In-Network Member Coinsurance	0%	0%	20%	20%	20%	20%
In-Network Individual OOP	\$3,500	\$3,000	\$7,000	\$5,500	\$5,500	\$5,000
In-Network PCP OV Copay	\$10	\$10	\$30	\$30	NA	NA
Members as of 3/1/2019	17,622		8		525	
Pct of Statewide Membership	22.9%		0.0%		0.7%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 7 (Richmond)		Area 7 (Richmond)		Area 7 (Richmond)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$629.93		\$517.66		\$516.09	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$9.38	1.5%	\$7.71	1.5%	\$7.68	1.5%
Trend	\$47.79	7.6%	\$39.27	7.6%	\$39.15	7.6%
Risk Adjustment	-\$2.42	-0.4%	-\$1.47	-0.3%	-\$2.24	-0.4%
HIT Moratorium	\$16.50	2.6%	\$13.56	2.6%	\$13.52	2.6%
Other Non-Benefit Expenses	\$1.15	0.2%	\$1.15	0.2%	\$1.15	0.2%
Benefit Changes	-\$3.37	-0.5%	-\$13.76	-2.7%	\$7.92	1.5%
Other Change 1	-\$29.94	-4.8%	-\$35.42	-6.8%	-\$24.76	-4.8%
Other Change 2	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 3	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 4	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 5	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$669.01	6.2%	\$528.69	2.1%	\$558.51	8.2%
Calculated Rate on 1/1/2020	\$669.01	6.2%	\$528.69	2.1%	\$558.51	8.2%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

Anthem Health Plans of Virginia, Inc. - Small Group Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Anthem Health Plans of Virginia, Inc.		
NAIC Number	71835		
Product(s)	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans are in the area)

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	1.037	1.037	0.1%
Area 2 (Charlottesville)	0.933	0.932	0.1%
Area 3 (Danville)	0.992	0.991	0.1%
Area 4 (Harrisonburg)	0.977	0.976	0.1%
Area 5 (Bristol)	0.997	0.996	0.1%
Area 6 (Lynchburg)	0.942	0.941	0.1%
Area 7 (Richmond)	1.046	1.046	0.1%
Area 8 (Roanoke)	1.017	1.016	0.1%
Area 9 (Tidewater)	1.047	1.046	0.1%
Area 10 (Northern VA)	0.994	0.994	0.1%
Area 11 (Winchester)	0.948	0.948	0.1%
Area 12 (Non-MSA)	1.017	1.017	0.1%

CareFirst BlueChoice, Inc. - Small Group

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	8.0%
Carrier Calculated Avg Total Rate Change	8.0%
Carrier Calculated Avg Adult Rate Change	8.0%
Carrier Calculated Avg Child Rate Change	8.0%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	BlueChoice Plus Opt-Out Platinum 0 Platinum		BlueChoice HMO Gold 1500 Gold		BlueChoice HMO HSA/HRA Silver 2000 Silver	
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$0.00	\$0.00	\$1,500.00	\$1,500.00	\$2,000.00	\$2,000.00
In-Network Member Coinsurance	100%	100%	100%	100%	100%	100%
In-Network Individual OOP	\$1,550.00	\$1,500.00	\$3,900.00	\$7,650.00	\$5,550.00	\$7,750.00
In-Network PCP OV Copay	\$10.00	\$10.00	\$15.00	\$0.00	\$25.00	\$40.00
Members as of 3/1/2019	3,524		1,100		285	
Pct of Statewide Membership	9.2%		2.9%		0.7%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Rating Area 10		Rating Area 10		Rating Area 10	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$491.22		\$407.23		\$290.64	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$2.74	0.6%	\$2.27	0.6%	\$1.62	0.6%
Trend	\$38.85	7.9%	\$32.21	7.9%	\$22.99	7.9%
Risk Adjustment	\$14.13	2.9%	\$10.47	2.6%	\$10.08	3.5%
HIT Moratorium	\$17.73	3.6%	\$13.90	3.4%	\$11.61	4.0%
Other Non-Benefit Expenses	\$9.18	1.9%	\$0.84	0.2%	\$14.83	5.1%
Benefit Changes	-\$0.54	-0.1%	-\$21.86	-5.4%	\$8.58	3.0%
Base Period Index Rate	-\$11.09	-2.3%	-\$9.19	-2.3%	-\$6.56	-2.3%
Benefit Leveraging	\$2.23	0.5%	-\$23.47	-5.8%	\$36.48	12.6%
Age Calibration	-\$7.14	-1.5%	-\$5.59	-1.4%	-\$4.66	-1.6%
"Other"	-\$10.18	-2.1%	\$22.00	5.4%	-\$27.47	-9.5%
		0.0%		0.0%		0.0%
Rate on 1/1/2020	\$547.14	11.4%	\$428.82	5.3%	\$358.15	23.2%
Calculated Rate on 1/1/2020	\$547.14	11.4%	\$428.82	5.3%	\$358.15	23.2%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

CareFirst BlueChoice, Inc. - Small Group Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	CareFirst BlueChoice, Inc.		
NAIC Number	96202		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

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

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	N/A	N/A	N/A
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	N/A	N/A	N/A
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	1.000	1.000	0.0%
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	N/A	N/A	N/A

GHMSI, Inc. - Small Group Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Group Hospitalization & Medical Services, Inc.		
NAIC Number	53007		
Product(s)	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

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

Table 14. Geographic Factors (enter "N/A" if no plans are)

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	N/A	N/A	N/A
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	N/A	N/A	N/A
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	1.000	1.000	0.0%
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	N/A	N/A	N/A

HealthKeepers, Inc. - Small Group Market

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	3.6%
Carrier Calculated Avg Total Rate Change	4.8%
Carrier Calculated Avg Adult Rate Change	4.8%
Carrier Calculated Avg Child Rate Change	4.9%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
Plan Design Information	Anthem HealthKeepers Platinum Platinum		Anthem HealthKeepers Gold Path Gold		Anthem HealthKeepers Bronze OA Bronze	
In-Network Individual Deductible	\$0	\$0	\$2,000	\$2,000	\$6,700	\$6,550
In-Network Member Coinsurance	0%	0%	20%	20%	0%	0%
In-Network Individual OOP	\$3,500	\$3,000	\$5,500	\$5,000	\$6,850	\$6,550
In-Network PCP OV Copay	\$10	\$10	\$20	\$20	NA	NA
Members as of 3/1/2019	7,703		3		5,712	
Pct of Statewide Membership	11.7%		0.0%		8.7%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 7 (Richmond)		Area 7 (Richmond)		Area 7 (Richmond)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$547.97		\$458.01		\$335.18	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$8.16	1.5%	\$6.82	1.5%	\$4.99	1.5%
Trend	\$41.57	7.6%	\$34.75	7.6%	\$25.43	7.6%
Risk Adjustment	-\$1.23	-0.2%	-\$0.54	-0.1%	-\$0.91	-0.3%
HIT Moratorium	\$15.28	2.8%	\$12.77	2.8%	\$9.35	2.8%
Other Non-Benefit Expenses	\$1.38	0.3%	\$1.38	0.3%	\$1.38	0.4%
Benefit Changes	-\$2.95	-0.5%	-\$2.52	-0.6%	-\$0.42	-0.1%
Other Change 1	-\$33.54	-6.1%	-\$46.26	-10.1%	-\$16.71	-5.0%
Other Change 2	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 3	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 4	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 5	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$576.63	5.2%	\$464.41	1.4%	\$358.29	6.9%
Calculated Rate on 1/1/2020	\$576.63	5.2%	\$464.41	1.4%	\$358.29	6.9%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

HealthKeepers, Inc. - Small Group Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	HealthKeepers, Inc.		
NAIC Number	95169		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	1.046	1.046	0.0%
Area 2 (Charlottesville)	0.946	0.946	0.0%
Area 3 (Danville)	1.003	1.002	0.0%
Area 4 (Harrisonburg)	0.983	0.983	0.0%
Area 5 (Bristol)	0.999	0.999	0.0%
Area 6 (Lynchburg)	0.958	0.958	0.0%
Area 7 (Richmond)	1.013	1.012	0.0%
Area 8 (Roanoke)	1.025	1.025	0.0%
Area 9 (Tidewater)	0.978	0.978	0.0%
Area 10 (Northern VA)	1.051	1.051	0.0%
Area 11 (Winchester)	0.979	0.979	0.0%
Area 12 (Non-MSA)	0.999	0.999	0.0%

Innovation Health Insurance Company - Small Group

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Innovation Health Insurance Company		
NAIC Number	15097		
Product(s)	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	2.5%
Carrier Calculated Avg Total Rate Change	2.5%
Carrier Calculated Avg Adult Rate Change	2.5%
Carrier Calculated Avg Child Rate Change	2.5%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	VA IH Gold Designated PCP PPO 10 Gold	VA IH Bronze PPO 6000 80/50 E Bronze	VA IH Gold Designated PCP PPO 10 Gold	VA IH Bronze PPO 6000 80/50 E Bronze	VA IH Gold Designated PCP PPO 10 Gold	VA IH Bronze PPO 6000 80/50 E Bronze
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$1,000	\$0	\$6,000	\$4,250	\$1,000	\$0
In-Network Member Coinsurance	80%	100%	80%	80%	80%	100%
In-Network Individual OOP	\$7,500	\$5,600	\$7,900	\$6,550	\$7,500	\$5,600
In-Network PCP OV Copay	\$35; Non-Designated	\$35	\$0	\$0	\$35; Non-Designated	\$35
Members as of 3/1/2019	488		364		488	
Pct of Statewide Membership	31.3%		23.3%		31.3%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 10 (Northern VA)		Area 10 (Northern VA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$540.90		\$416.92		\$540.90	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$17.46	3.2%	\$13.46	3.2%	\$17.46	3.2%
Trend	\$61.74	11.4%	\$47.59	11.4%	\$61.74	11.4%
Risk Adjustment	-\$0.82	-0.2%	-\$0.82	-0.2%	-\$0.82	-0.2%
HIT Moratorium	\$14.06	2.6%	\$10.84	2.6%	\$14.06	2.6%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	-\$24.36	-4.5%	-\$22.80	-5.5%	-\$24.36	-4.5%
Area	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Demo	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Network	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other	-\$4.94	-0.9%	-\$75.63	-18.1%	-\$4.94	-0.9%
	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$604.05	11.7%	\$389.55	-6.6%	\$604.05	11.7%
Calculated Rate on 1/1/2020	\$604.05	11.7%	\$389.55	-6.6%	\$604.05	11.7%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Innovation Health Insurance Company		
NAIC Number	15097		
Product(s)	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	N/A	N/A	N/A
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	N/A	N/A	N/A
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	1.000	1.000	0.0%
Area 11 (Winchester)	1.000	1.000	0.0%
Area 12 (Non-MSA)	1.000	1.000	0.0%

Innovation Health Plan - Small Group

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Innovation Health Plan, Inc.		
NAIC Number	15098		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	8.1%
Carrier Calculated Avg Total Rate Change	8.1%
Carrier Calculated Avg Adult Rate Change	8.1%
Carrier Calculated Avg Child Rate Change	8.1%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
Plan Design Information	VA IH Silver Open HMO 4000 80% Silver		VA IH Silver Open HMO 4000 80% Silver		VA IH Gold Open HMO 100% 500A Gold	
In-Network Individual Deductible	\$4,000	\$3,000	\$4,000	\$3,000	\$0	\$0
In-Network Member Coinsurance	80%	80%	80%	80%	100%	100%
In-Network Individual OOP	\$7,900	\$7,750	\$7,900	\$7,750	\$5,600	\$5,600
In-Network PCP OV Copay	\$35	\$35	\$35	\$35	\$35	\$35
Members as of 3/1/2019	377		377		26	
Pct of Statewide Membership	73.7%		73.7%		5.1%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 10 (Northern VA)		Area 10 (Northern VA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$442.95		\$442.95		\$495.53	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$14.30	3.2%	\$14.30	3.2%	\$16.00	3.2%
Trend	\$50.56	11.4%	\$50.56	11.4%	\$56.56	11.4%
Risk Adjustment	-\$43.71	-9.9%	-\$43.71	-9.9%	-\$43.71	-8.8%
HIT Moratorium	\$11.52	2.6%	\$11.52	2.6%	\$12.88	2.6%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	-\$12.04	-2.7%	-\$12.04	-2.7%	-\$3.24	-0.7%
Area	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Demo	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Network	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other	\$0.80	0.2%	\$0.80	0.2%	\$59.51	12.0%
	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$464.39	4.8%	\$464.39	4.8%	\$593.53	19.8%
Calculated Rate on 1/1/2020	\$464.39	4.8%	\$464.39	4.8%	\$593.53	19.8%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Innovation Health Plan, Inc.		
NAIC Number	15098		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	N/A	N/A	N/A
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	N/A	N/A	N/A
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	1.000	1.000	0.0%
Area 11 (Winchester)	1.000	1.000	0.0%
Area 12 (Non-MSA)	1.000	1.000	0.0%

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. - Small Group

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-5.5%
Carrier Calculated Avg Total Rate Change	-5.5%
Carrier Calculated Avg Adult Rate Change	-5.5%
Carrier Calculated Avg Child Rate Change	-5.5%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
Plan Design Information	\$5500/\$50/Dental Bronze		\$3200/20%/HSA/Dental Silver		\$6000/\$40/Dental Silver	
In-Network Individual Deductible	\$5,500	\$5,500	\$3,200	\$3,200	\$6,000	\$6,000
In-Network Member Coinsurance	35%	35%	20%	20%	35%	35%
In-Network Individual OOP	\$8,200	\$7,900	\$6,650	\$6,000	\$8,200	\$7,900
In-Network PCP OV Copay	before ded), \$0	before ded), \$0	20% after ded	20% after ded	\$40	\$35
Members as of 3/1/2019	15752		613		735	
Pct of Statewide Membership	36.8%		1.4%		1.7%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 7 (Richmond)		Area 10 (Northern VA)		Area 12 (Non-MSA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$517.40		\$674.87		\$525.85	
Individual Mandate	\$20.70	4.0%	\$26.99	4.0%	\$21.03	4.0%
Other Morbidity	-\$73.12	-14.1%	-\$95.38	-14.1%	-\$74.31	-14.1%
Trend	\$24.88	4.8%	\$32.45	4.8%	\$25.28	4.8%
Risk Adjustment	\$19.90	3.8%	\$25.96	3.8%	\$20.22	3.8%
HIT Moratorium	\$5.66	1.1%	\$7.38	1.1%	\$5.75	1.1%
Other Non-Benefit Expenses	-\$5.77	-1.1%	-\$7.52	-1.1%	-\$5.86	-1.1%
Benefit Changes	-\$2.35	-0.5%	-\$4.18	-0.6%	-\$5.42	-1.0%
Other Change 1	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 2	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 3	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Change 4	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
All Other	-\$12.84	-2.5%	-\$68.80	-10.2%	\$2.47	0.5%
Rate on 1/1/2020	\$494.45	-4.4%	\$591.76	-12.3%	\$515.01	-2.1%
Calculated Rate on 1/1/2020	\$494.45	-4.4%	\$591.76	-12.3%	\$515.01	-2.1%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. - Small Group Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.		
NAIC Number	95639		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	N/A	N/A	N/A
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	1.000	1.000	0.0%
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	1.000	1.000	0.0%
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	1.000	1.000	0.0%

Optima Health Insurance Company - Small Group

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	3.1%
Carrier Calculated Avg Total Rate Change	3.1%
Carrier Calculated Avg Adult Rate Change	3.1%
Carrier Calculated Avg Child Rate Change	3.1%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
Optima Plus Gold 2000/25/30% Rx Gold			Optima Plus Gold 2000/30/0% Rx Gold		Optima Plus Equity Bronze 6500/0 Bronze	
In-Network Individual Deductible	\$2,000	\$2,000	\$2,000	\$1,500	\$6,500	\$6,700
In-Network Member Coinsurance	30%/50%	30%/50%	0%/20%	0%/20%	0%/20%	0%/20%
In-Network Individual OOP	\$4,500	\$4,000	\$7,400	\$7,150	\$6,650	\$7,400
In-Network PCP OV Copay	\$25/50	\$25/50	\$30/\$60	\$30/\$60	0%/20%	0%/20%
Members as of 3/1/2019	213		0		0	
Pct of Statewide Membership	14.5%		0.0%		0.0%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 9 (Tidewater)		Area 5 (Bristol)		Area 12 (Non-MSA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$515.50		\$831.36		\$459.43	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Trend	\$37.82	7.3%	\$61.00	7.3%	\$33.71	7.3%
Risk Adjustment	-\$26.73	-5.2%	-\$30.58	-3.7%	-\$24.40	-5.3%
HIT Moratorium	\$14.62	2.8%	\$16.72	2.0%	\$13.35	2.9%
Other Non-Benefit Expenses	-\$25.59	-5.0%	-\$29.28	-3.5%	-\$23.37	-5.1%
Benefit Changes	\$4.48	0.9%	-\$3.06	-0.4%	\$4.13	0.9%
Region Factor	\$9.08	1.8%	-\$222.88	-26.8%	\$19.49	4.2%
Demographics	-\$5.17	-1.0%	-\$8.41	-1.0%	-\$6.71	-1.5%
Claims Experience	-\$28.72	-5.6%	-\$32.85	-4.0%	-\$26.22	-5.7%
Change in Manual Rate	\$13.73	2.7%	\$15.71	1.9%	\$12.54	2.7%
Other	\$5.76	1.1%	-\$8.88	-1.1%	\$8.08	1.8%
Rate on 1/1/2020	\$514.78	-0.1%	\$588.86	-29.2%	\$470.02	2.3%
Calculated Rate on 1/1/2020	\$514.78	-0.1%	\$588.86	-29.2%	\$470.02	2.3%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

Optima Health Insurance Company - Small Group

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Optima Health Insurance Company		
NAIC Number	70715		
Product(s)	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	1.032	1.167	-11.6%
Area 2 (Charlottesville)	0.920	1.011	-9.0%
Area 3 (Danville)	1.032	1.406	-26.6%
Area 4 (Harrisonburg)	0.986	1.092	-9.7%
Area 5 (Bristol)	1.032	1.410	-26.8%
Area 6 (Lynchburg)	0.930	0.958	-2.9%
Area 7 (Richmond)	1.035	0.994	4.1%
Area 8 (Roanoke)	1.032	1.042	-1.0%
Area 9 (Tidewater)	0.924	0.908	1.8%
Area 10 (Northern VA)	1.036	1.042	-0.6%
Area 11 (Winchester)	1.032	1.012	2.0%
Area 12 (Non-MSA)	1.032	0.990	4.2%

Optima Health Plan - Small Group Market

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Optima Health Plan		
NAIC Number	95281		
Product(s)	HMO, POS		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	8.8%
Carrier Calculated Avg Total Rate Change	8.8%
Carrier Calculated Avg Adult Rate Change	8.8%
Carrier Calculated Avg Child Rate Change	8.8%

Table 16. Plan Specific Rate Change Information

Plan Name	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
Optima Vantage Gold 2000/25/30% Rx Ded Direct			Optima Vantage Bronze 6600/30% Direct		Optima Vantage Platinum 20/20% Rx Ded Select CH	
Metallic Tier	Gold		Bronze		Platinum	
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$2,000	\$2,000	\$6,600	\$6,600	\$0	\$0
In-Network Member Coinsurance	30%/50%	30%/50%	30%/50%	30%/50%	20%	20%
In-Network Individual OOP	\$4,500	\$4,000	\$7,800	\$7,800	\$3,500	\$3,500
In-Network PCP OV Copay	\$25/50	\$25/50	30%/50%	\$45/90	\$20	\$20
Members as of 3/1/2019	7465		0		0	
Pct of Statewide Membership	18.1%		0.0%		0.0%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 9 (Tidewater)		Area 5 (Bristol)		Area 2 (Charlottesville)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$392.91		\$485.23		\$464.42	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity Trend	\$28.48	7.2%	\$35.18	7.2%	\$33.67	7.2%
Risk Adjustment	-\$7.18	-1.8%	-\$5.82	-1.2%	-\$8.99	-1.9%
HIT Moratorium	\$5.08	1.3%	\$4.12	0.8%	\$6.36	1.4%
Other Non-Benefit Expenses	-\$0.61	-0.2%	-\$0.50	-0.1%	-\$0.77	-0.2%
Benefit Changes	\$3.07	0.8%	-\$26.69	-5.5%	\$86.10	18.5%
Region Factor	\$6.48	1.7%	-\$134.35	-27.7%	-\$40.52	-8.7%
Demographics	-\$3.82	-1.0%	-\$3.10	-0.6%	-\$4.78	-1.0%
Claims Experience	\$9.02	2.3%	\$7.32	1.5%	\$11.29	2.4%
Change in Trend	\$3.26	0.8%	\$2.65	0.5%	\$4.08	0.9%
Other	-\$1.04	-0.3%	-\$10.68	-2.2%	-\$5.64	-1.2%
Rate on 1/1/2020	\$435.65	10.9%	\$353.34	-27.2%	\$545.23	17.4%
Calculated Rate on 1/1/2020	\$435.65	10.9%	\$353.34	-27.2%	\$545.23	17.4%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

Optima Health Plan - Small Group Market

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Optima Health Plan		
NAIC Number	95281		
Product(s)	HMO, POS		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

Table 14. Geographic Factors (en

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1	1.075	1.231	-12.7%
Area 2	0.973	1.066	-8.7%
Area 3	1.075	1.483	-27.5%
Area 4	1.044	1.152	-9.4%
Area 5	1.076	1.488	-27.7%
Area 6	0.986	1.011	-2.5%
Area 7	1.096	1.049	4.5%
Area 8	1.076	1.099	-2.1%
Area 9	0.924	0.909	1.7%
Area 10	1.097	1.099	-0.2%
Area 11	1.075	1.068	0.7%
Area 12	1.075	1.044	3.0%

*VA follows the federal default age curve.

Optimum Choice, Inc. - Small Group

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	13.6%
Carrier Calculated Avg Total Rate Change	10.0%
Carrier Calculated Avg Adult Rate Change	10.0%
Carrier Calculated Avg Child Rate Change	10.0%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	Bronze 4 HMO		Silver 14 HMO		Platinum 4 HMO	
Plan Design Information	Bronze		Silver		Platinum	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$6,700	\$6,700	\$4,000	\$3,000	\$0	\$0
In-Network Member Coinsurance	100%	100%	100%	100%	100%	100%
In-Network Individual OOP	\$6,700	\$6,700	\$6,700	\$6,700	\$5,000	\$5,000
In-Network PCP OV Copay	D&C	D&C	\$25 after ded	\$25 after ded	\$15	\$15
Members as of 3/1/2019	896		6		26	
Pct of Statewide Membership	11.6%		0.1%		0.3%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 10 (Northern VA)		Area 10 (Northern VA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$265.14		\$367.62		\$535.16	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$6.81	2.6%	\$0.50	0.1%	\$17.74	3.3%
Trend	\$20.95	7.9%	\$29.04	7.9%	\$42.28	7.9%
Risk Adjustment	-\$2.39	-0.9%	-\$3.31	-0.9%	-\$4.82	-0.9%
HIT Moratorium	\$6.69	2.5%	\$9.28	2.5%	\$13.51	2.5%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	-\$11.79	-4.4%	-\$62.22	-16.9%	-\$3.19	-0.6%
July 2019 Increase	\$5.30	2.0%	\$7.35	2.0%	\$10.70	2.0%
Resloping Offset	\$11.14	4.2%	\$15.44	4.2%	\$22.48	4.2%
Area Offset	\$0.80	0.3%	\$1.10	0.3%	\$1.61	0.3%
	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$302.63	14.1%	\$364.81	-0.8%	\$635.47	18.7%
Calculated Rate on 1/1/2020	\$302.63	14.1%	\$364.81	-0.8%	\$635.47	18.7%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Optimum Choice Inc.		
NAIC Number	96940		
Product(s)	HMO_POS		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	1.070	1.070	0.0%
Area 2 (Charlottesville)	1.027	1.070	-4.0%
Area 3 (Danville)	1.070	1.070	0.0%
Area 4 (Harrisonburg)	1.070	1.070	0.0%
Area 5 (Bristol)	1.070	1.070	0.0%
Area 6 (Lynchburg)	1.091	1.091	0.0%
Area 7 (Richmond)	0.987	0.987	0.0%
Area 8 (Roanoke)	1.047	1.091	-4.0%
Area 9 (Tidewater)	0.983	1.057	-7.0%
Area 10 (Northern VA)	0.893	0.893	0.0%
Area 11 (Winchester)	0.940	0.940	0.0%
Area 12 (Non-MSA)	0.995	1.070	-7.0%

Piedmont Community HealthCare HMO, Inc. - Small Group

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	2.3%
Carrier Calculated Avg Total Rate Change	4.9%
Carrier Calculated Avg Adult Rate Change	4.9%
Carrier Calculated Avg Child Rate Change	4.9%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	Piedmont Choice POS Gold 1500/3 Gold		Piedmont Choice POS Gold 4500/4 Gold		Partners Choice POS Silver 6500/5 Silver	
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$1,500	\$1,500	\$4,500	\$4,000	\$6,500	\$6,500
In-Network Member Coinsurance	30%	30%	0%	0%	50%	30%
In-Network Individual OOP	\$6,000	\$5,000	\$4,500	\$4,000	\$8,150	\$7,350
In-Network PCP OV Copay	\$30	\$30	\$40	\$30	\$50	\$40
Members as of 3/1/2019	286		50		0	
Pct of Statewide Membership	25.2%		4.4%		0.0%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 6 (Lynchburg)		Area 6 (Lynchburg)		Area 6 (Lynchburg)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$426.61		\$444.26		\$300.01	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Trend	-\$4.43	-1.0%	-\$4.62	-1.0%	-\$3.12	-1.0%
Risk Adjustment	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
HIT Moratorium	\$7.38	1.7%	\$7.69	1.7%	\$5.19	1.7%
Other Non-Benefit Expenses	\$23.73	5.6%	\$24.72	5.6%	\$16.69	5.6%
Benefit Changes	-\$11.31	-2.7%	-\$6.20	-1.4%	-\$4.19	-1.4%
Geographic	\$7.36	1.7%	\$7.67	1.7%	\$5.18	1.7%
Other Change 2	-\$16.30	-3.8%	-\$36.36	-8.2%	\$30.06	10.0%
Other Change 3		0.0%		0.0%		0.0%
Other Change 4		0.0%		0.0%		0.0%
Other Change 5		0.0%		0.0%		0.0%
Rate on 1/1/2020	\$433.03	1.5%	\$437.15	-1.6%	\$349.83	16.6%
Calculated Rate on 1/1/2020	\$433.03	1.5%	\$437.15	-1.6%	\$349.83	16.6%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

Piedmont Community HealthCare HMO, Inc. - Small Group

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	Piedmont Community Healthcare HMO, Inc		
NAIC Number	15791		
Product(s)	PDS, HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans ar

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	1.135	1.018	11.5%
Area 3 (Danville)	1.172	1.020	14.8%
Area 4 (Harrisonburg)	N/A	N/A	N/A
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	1.000	1.000	0.0%
Area 7 (Richmond)	N/A	1.053	N/A
Area 8 (Roanoke)	N/A	N/A	N/A
Area 9 (Tidewater)	N/A	N/A	N/A
Area 10 (Northern VA)	N/A	N/A	N/A
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	1.109	1.053	5.3%

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	13.3%
Carrier Calculated Avg Total Rate Change	10.3%
Carrier Calculated Avg Adult Rate Change	10.3%
Carrier Calculated Avg Child Rate Change	10.3%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	Gold 10 POS		Silver 14		Platinum 14	
Plan Design Information	Gold		Silver		Platinum	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$750	\$750	\$4,000	\$3,000	\$0	\$0
In-Network Member Coinsurance	20%	20%	0%	0%	0%	0%
In-Network Individual OOP	\$7,500	\$6,500	\$6,700	\$6,700	\$3,000	\$3,000
In-Network PCP OV Copay	\$20	\$20	\$25 After Ded	\$25 After Ded	\$10	\$10
Members as of 3/1/2019	5413		84		1132	
Pct of Statewide Membership	7.6%		0.1%		1.6%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 10 (Northern VA)		Area 10 (Northern VA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$425.51		\$400.17		\$592.95	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$8.42	2.0%	\$0.52	0.1%	\$19.06	3.2%
Trend	\$33.61	7.9%	\$31.61	7.9%	\$46.84	7.9%
Risk Adjustment	-\$3.83	-0.9%	-\$3.60	-0.9%	-\$5.34	-0.9%
HIT Moratorium	\$10.74	2.5%	\$10.10	2.5%	\$14.97	2.5%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	-\$29.40	-6.9%	-\$67.93	-17.0%	-\$6.57	-1.1%
July 2019 Increase	\$8.51	2.0%	\$8.00	2.0%	\$11.86	2.0%
Resloping Offset	\$17.87	4.2%	\$16.81	4.2%	\$24.90	4.2%
Area Offset	\$1.28	0.3%	\$1.20	0.3%	\$1.78	0.3%
	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$472.71	11.1%	\$396.88	-0.8%	\$700.46	18.1%
Calculated Rate on 1/1/2020	\$472.71	11.1%	\$396.88	-0.8%	\$700.46	18.1%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

UnitedHealthcare Insurance Company - Small Group Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	UnitedHealthcare Insurance Company		
NAIC Number	79413		
Product(s)	EPO, PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	1.070	1.070	0.0%
Area 2 (Charlottesville)	1.027	1.070	-4.0%
Area 3 (Danville)	1.070	1.070	0.0%
Area 4 (Harrisonburg)	1.070	1.070	0.0%
Area 5 (Bristol)	1.070	1.070	0.0%
Area 6 (Lynchburg)	1.091	1.091	0.0%
Area 7 (Richmond)	0.987	0.987	0.0%
Area 8 (Roanoke)	1.047	1.091	-4.0%
Area 9 (Tidewater)	0.983	1.057	-7.0%
Area 10 (Northern VA)	0.893	0.893	0.0%
Area 11 (Winchester)	0.940	0.940	0.0%
Area 12 (Non-MSA)	0.995	1.070	-7.0%

UnitedHealthcare of the Mid-Atlantic, Inc. - Small Group Market

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	11.7%
Carrier Calculated Avg Total Rate Change	6.7%
Carrier Calculated Avg Adult Rate Change	6.7%
Carrier Calculated Avg Child Rate Change	6.7%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
Gold 8 HMO Plus Gold			Gold 25 Core Primary Advantage Gold		Platinum 4 HMO Platinum	
In-Network Individual Deductible	\$1,250	\$1,250	\$2,000	\$1,750	\$0	\$0
In-Network Member Coinsurance	20%	20%	20%	20%	0%	0%
In-Network Individual OOP	\$5,000	\$4,200	\$7,900	\$7,900	\$5,000	\$5,000
In-Network PCP OV Copay	\$30	\$30	\$0	\$0	\$15	\$15
Members as of 3/1/2019	631		0		45	
Pct of Statewide Membership	8.5%		0.0%		0.6%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 10 (Northern VA)		Area 10 (Northern VA)	
Rate on 1/1/2019	\$412.15		\$365.19		\$553.52	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$8.88	2.2%	\$2.83	0.8%	\$17.15	3.1%
Trend	\$32.56	7.9%	\$28.85	7.9%	\$43.73	7.9%
Risk Adjustment	-\$3.71	-0.9%	-\$3.29	-0.9%	-\$4.98	-0.9%
HIT Moratorium	\$10.40	2.5%	\$9.22	2.5%	\$13.97	2.5%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	-\$27.07	-6.6%	-\$49.89	-13.7%	-\$9.46	-1.7%
July 2019 Increase	\$8.24	2.0%	\$7.30	2.0%	\$11.07	2.0%
Resloping Offset	\$17.31	4.2%	\$15.34	4.2%	\$23.25	4.2%
Area Offset	\$1.24	0.3%	\$1.10	0.3%	\$1.66	0.3%
	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Rate on 1/1/2020	\$460.00	11.6%	\$376.65	3.1%	\$649.91	17.4%
Calculated Rate on 1/1/2020	\$460.00	11.6%	\$376.65	3.1%	\$649.91	17.4%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	UnitedHealthcare of the Mid-Atlantic, Inc.		
NAIC Number	95025		
Product(s)	HMO_POS		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	1.070	1.070	0.0%
Area 2 (Charlottesville)	1.027	1.070	-4.0%
Area 3 (Danville)	1.070	1.070	0.0%
Area 4 (Harrisonburg)	1.070	1.070	0.0%
Area 5 (Bristol)	1.070	1.070	0.0%
Area 6 (Lynchburg)	1.091	1.091	0.0%
Area 7 (Richmond)	0.987	0.987	0.0%
Area 8 (Roanoke)	1.047	1.091	-4.0%
Area 9 (Tidewater)	0.983	1.057	-7.0%
Area 10 (Northern VA)	0.893	0.893	0.0%
Area 11 (Winchester)	0.940	0.940	0.0%
Area 12 (Non-MSA)	0.995	1.070	-7.0%

UnitedHealthcare Plan of the River Valley, Inc. - Small Group Market

Table 15. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	3.4%
Carrier Calculated Avg Total Rate Change	3.2%
Carrier Calculated Avg Adult Rate Change	3.2%
Carrier Calculated Avg Child Rate Change	3.2%

Table 16. Plan Specific Rate Change Information

Plan Name Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	BP-3W	Silver	BP-28	Silver	BP-2P	Platinum
Plan Design Information	2020 Design	2019 Design	2020 Design	2019 Design	2020 Design	2019 Design
In-Network Individual Deductible	\$3,000	\$2,500	\$4,500	\$4,000	\$2,000	\$2,000
In-Network Member Coinsurance	20%	20%	0%	0%	0%	0%
In-Network Individual OOP	\$8,000	\$7,900	\$4,500	\$4,000	\$2,000	\$2,000
In-Network PCP OV Copay	\$50	\$50	\$0	\$0	\$15	\$15
Members as of 3/1/2019	383		4		123	
Pct of Statewide Membership	15.8%		0.2%		5.1%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 5 (Bristol)		Area 5 (Bristol)		Area 5 (Bristol)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2019	\$355.19		\$377.80		\$511.08	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Trend	\$26.28	7.4%	\$27.96	7.4%	\$37.82	7.4%
Risk Adjustment	-\$37.88	-10.7%	-\$40.29	-10.7%	-\$54.50	-10.7%
HIT Moratorium	\$8.56	2.4%	\$9.10	2.4%	\$12.32	2.4%
Other Non-Benefit Expenses	\$4.08	1.2%	\$4.34	1.2%	\$5.88	1.2%
Benefit Changes	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Resloping	\$22.73	6.4%	\$24.18	6.4%	\$32.71	6.4%
Model Relativity Change	-\$31.00	-8.7%	-\$46.67	-12.4%	-\$2.70	-0.5%
Reduction - impact to RA 12 Only	\$12.79	3.6%	\$13.60	3.6%	\$18.40	3.6%
Net Other Items	\$11.05	3.1%	\$9.73	2.6%	\$22.02	4.3%
Other Change 5		0.0%		0.0%		0.0%
Rate on 1/1/2020	\$371.80	4.7%	\$379.75	0.5%	\$583.03	14.1%
Calculated Rate on 1/1/2020	\$371.80	4.7%	\$379.75	0.5%	\$583.03	14.1%
Rate Check	OK	OK	OK	OK	OK	OK

*Rates are for a non-tobacco user

UnitedHealthcare Plan of the River Valley, Inc. - Small Group Market

VA ACA Rate Filing Template

Color Coding Key	Manual Input - Free Form	Manual Input - Dropdown List	Calculation - Do Not Change
Carrier Name	UnitedHealthcare Plan of the River Valley, Inc.		
NAIC Number	95378		
Product(s)	POS, HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2020		

Table 13. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.765			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.000	0.0%
19	0.941	1.000	1.000	0.0%
20	0.970	1.000	1.000	0.0%
21	1.000	1.000	1.000	0.0%
22	1.000	1.000	1.000	0.0%
23	1.000	1.000	1.000	0.0%
24	1.000	1.000	1.000	0.0%
25	1.004	1.000	1.000	0.0%
26	1.024	1.000	1.000	0.0%
27	1.048	1.000	1.000	0.0%
28	1.087	1.000	1.000	0.0%
29	1.119	1.000	1.000	0.0%
30	1.135	1.000	1.000	0.0%
31	1.159	1.000	1.000	0.0%
32	1.183	1.000	1.000	0.0%
33	1.198	1.000	1.000	0.0%
34	1.214	1.000	1.000	0.0%
35	1.222	1.000	1.000	0.0%
36	1.230	1.000	1.000	0.0%
37	1.238	1.000	1.000	0.0%
38	1.246	1.000	1.000	0.0%
39	1.262	1.000	1.000	0.0%
40	1.278	1.000	1.000	0.0%
41	1.302	1.000	1.000	0.0%
42	1.325	1.000	1.000	0.0%
43	1.357	1.000	1.000	0.0%
44	1.397	1.000	1.000	0.0%
45	1.444	1.000	1.000	0.0%
46	1.500	1.000	1.000	0.0%
47	1.563	1.000	1.000	0.0%
48	1.635	1.000	1.000	0.0%
49	1.706	1.000	1.000	0.0%
50	1.786	1.000	1.000	0.0%
51	1.865	1.000	1.000	0.0%
52	1.952	1.000	1.000	0.0%
53	2.040	1.000	1.000	0.0%
54	2.135	1.000	1.000	0.0%
55	2.230	1.000	1.000	0.0%
56	2.333	1.000	1.000	0.0%
57	2.437	1.000	1.000	0.0%
58	2.548	1.000	1.000	0.0%
59	2.603	1.000	1.000	0.0%
60	2.714	1.000	1.000	0.0%
61	2.810	1.000	1.000	0.0%
62	2.873	1.000	1.000	0.0%
63	2.952	1.000	1.000	0.0%
64+	3.000	1.000	1.000	0.0%

*VA follows the federal default age curve.

Table 14. Geographic Factors (enter "N/A" if no plans a

Rating Area	Proposed Area Factor	Current Area Factor	Factor Change
Area 1 (Blacksburg)	0.877	0.943	-7.0%
Area 2 (Charlottesville)	0.877	0.943	-7.0%
Area 3 (Danville)	0.877	0.943	-7.0%
Area 4 (Harrisonburg)	0.877	0.943	-7.0%
Area 5 (Bristol)	0.782	0.782	0.0%
Area 6 (Lynchburg)	0.877	0.943	-7.0%
Area 7 (Richmond)	0.877	0.943	-7.0%
Area 8 (Roanoke)	0.877	0.943	-7.0%
Area 9 (Tidewater)	0.877	0.943	-7.0%
Area 10 (Northern VA)	0.877	0.943	-7.0%
Area 11 (Winchester)	0.877	0.943	-7.0%
Area 12 (Non-MSA)	0.877	0.943	-7.0%