

**Health Insurance Rate Request Summary
Part 1 – To Be Completed By Company**

Company Name and NAIC Number:

SERFF Tracking Number:

Effective Date:

(Projected) Number of Insureds

Affected:

New Rates

Average Annual Premium Per Member:

Revised Rates

Average Annual Premium Per Member:

Average Requested Percentage Rate Change Per Member:

Minimum Requested Percentage Rate Change Per Member:

Maximum Requested Percentage Rate Change Per Member:

Plans Affected

(The Form Number and "Product Name")

Form#

"Product Name"(if applicable)

Attach a brief narrative to summarize the key information used to develop the rates including the main drivers for new or revised rates.

This document is intended to help explain the rate filing and it is only a summary of the company's request. It is not intended to describe or include all factors or information considered in the review process. For more detailed information, please refer to the complete filing.

Premium rates on your policy are being raised as a result of morbidity, which include both the incidence of illness in the population and the duration of the illness. Both the incidence and duration of illness in the population have been higher than initially anticipated. The higher morbidity combined with the cost of care continuing to increase means that premium rates must be adjusted to ensure current and future claims are adequately funded.