

A photograph of a city street scene. In the background, a modern glass skyscraper with a curved facade rises. To the right, a historic brick building with arched windows is visible. The foreground shows a street with trees and a sidewalk. The text is overlaid on the image.

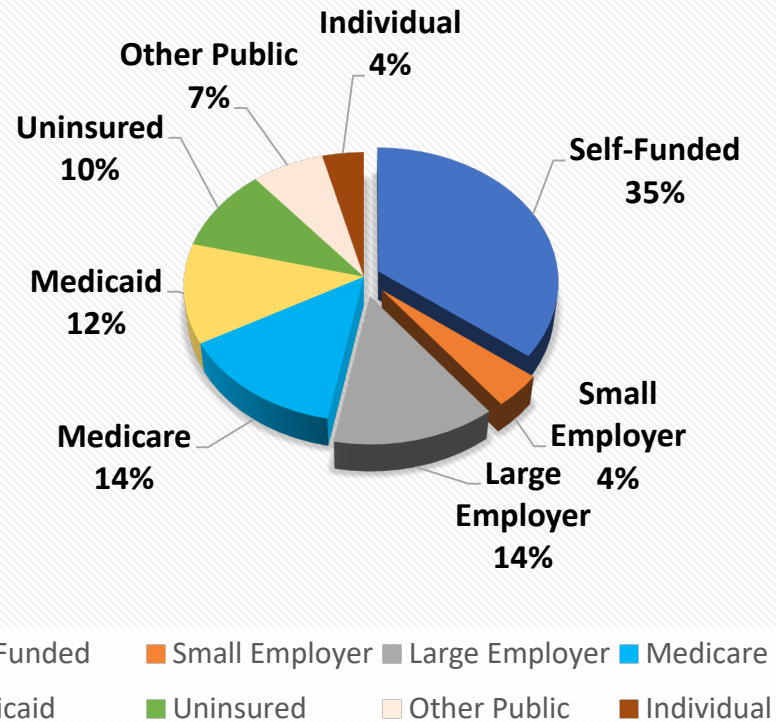
State Corporation Commission Bureau of Insurance

Rate Presentations

August 17, 2020

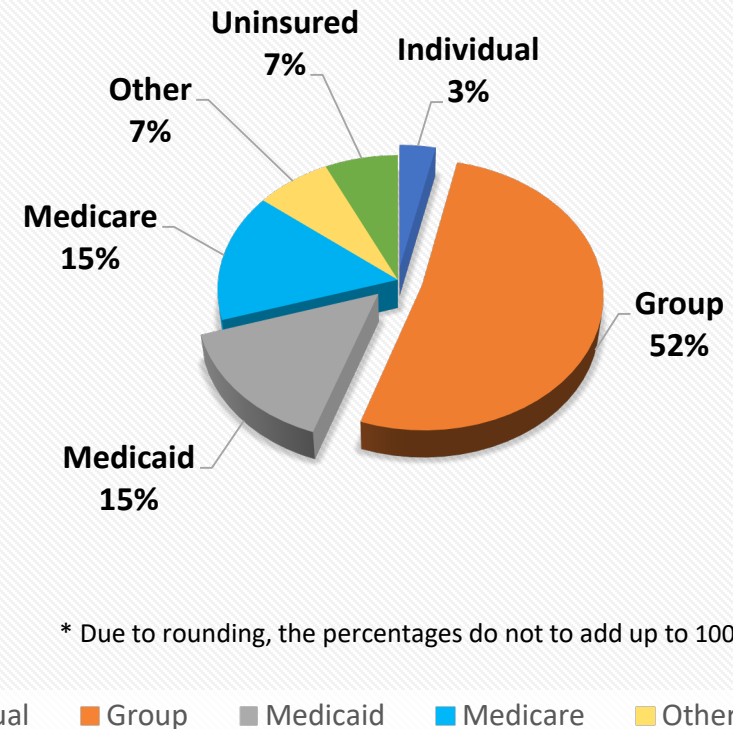
Health Care Coverage of the Virginia Population

2018



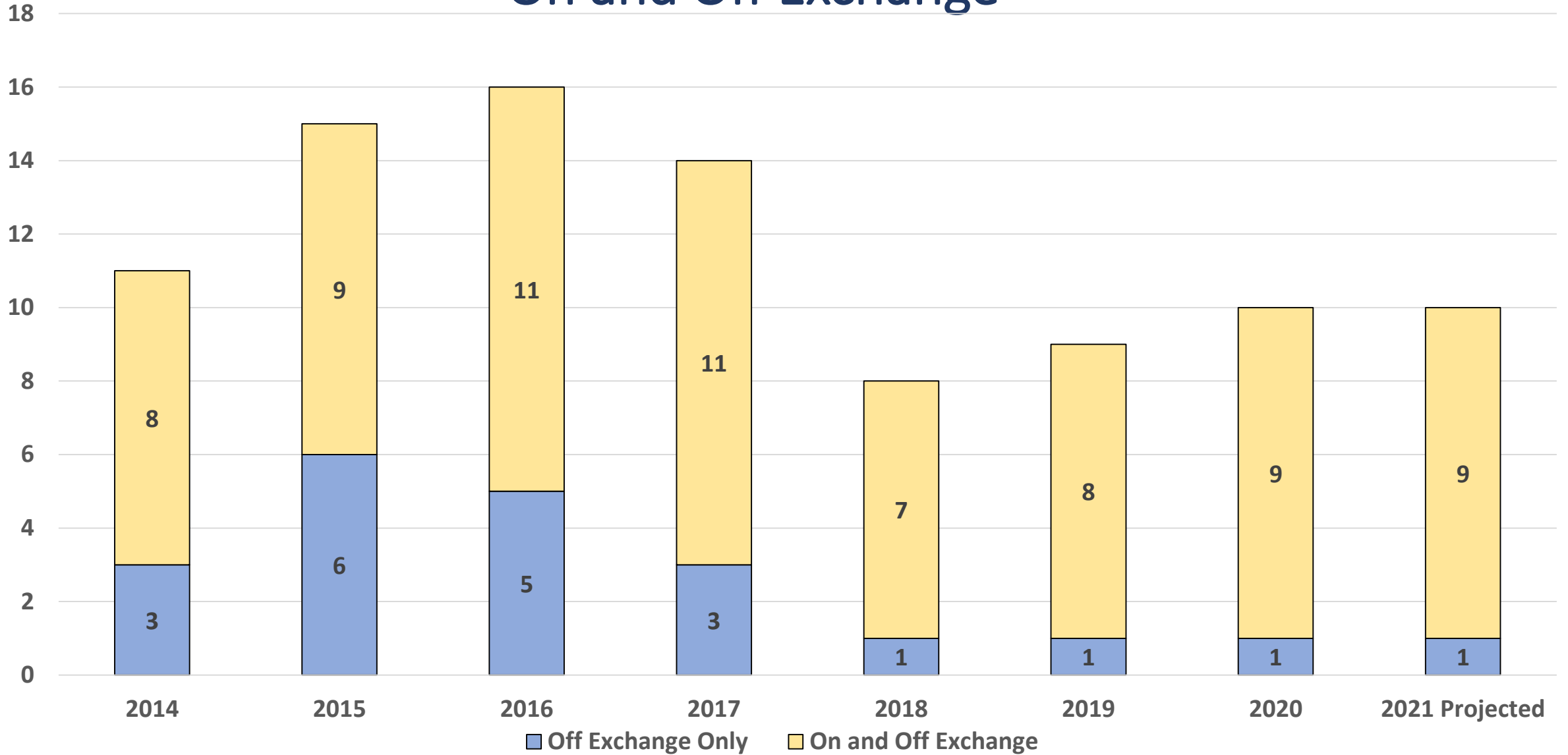
Source: U.S. Census Bureau - Current Population Survey - Annual Social and Economic Supplements

2019

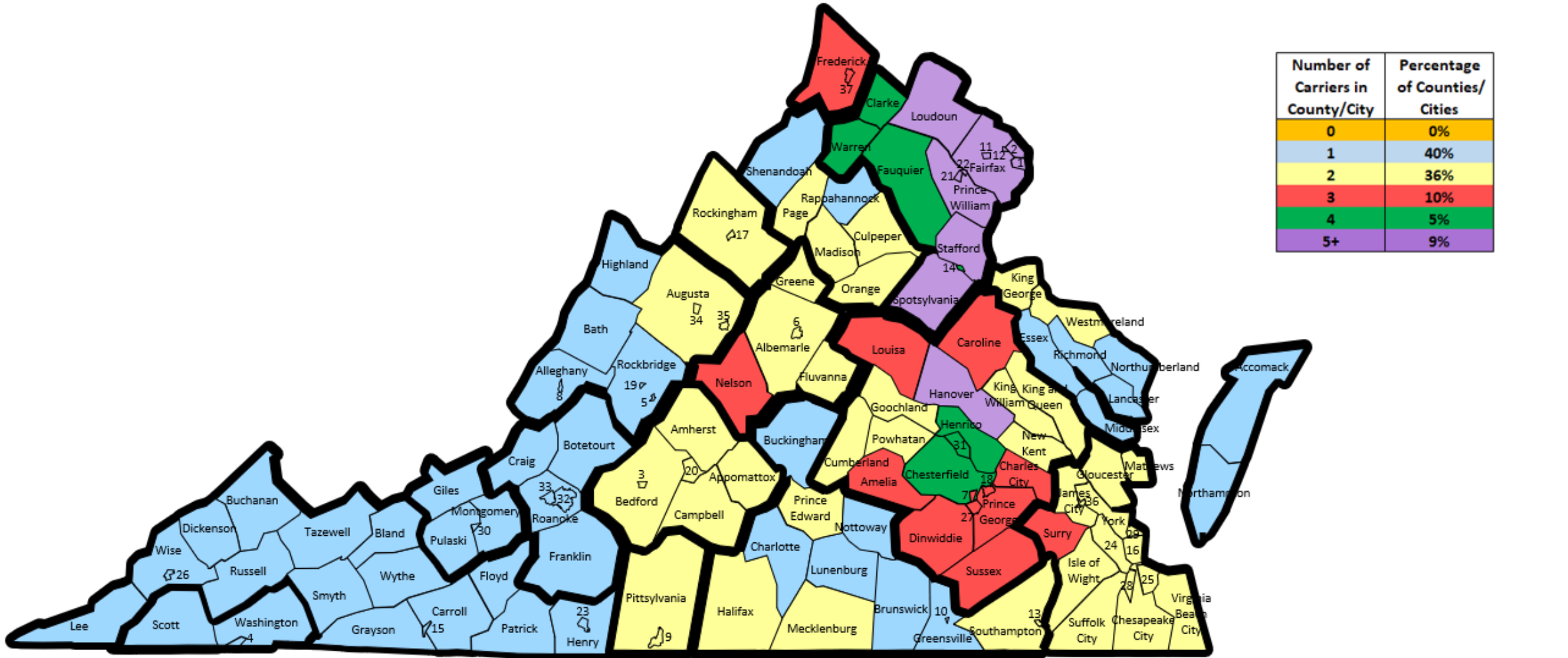


Source: Oliver Wyman Virginia – Individual Market Summary and Reinsurance Modeling Results; Funds for the study provided to the State Corporation Commission by the Federal Market Stabilization Grant.

Number of Carriers in Virginia in the Individual Market On and Off Exchange

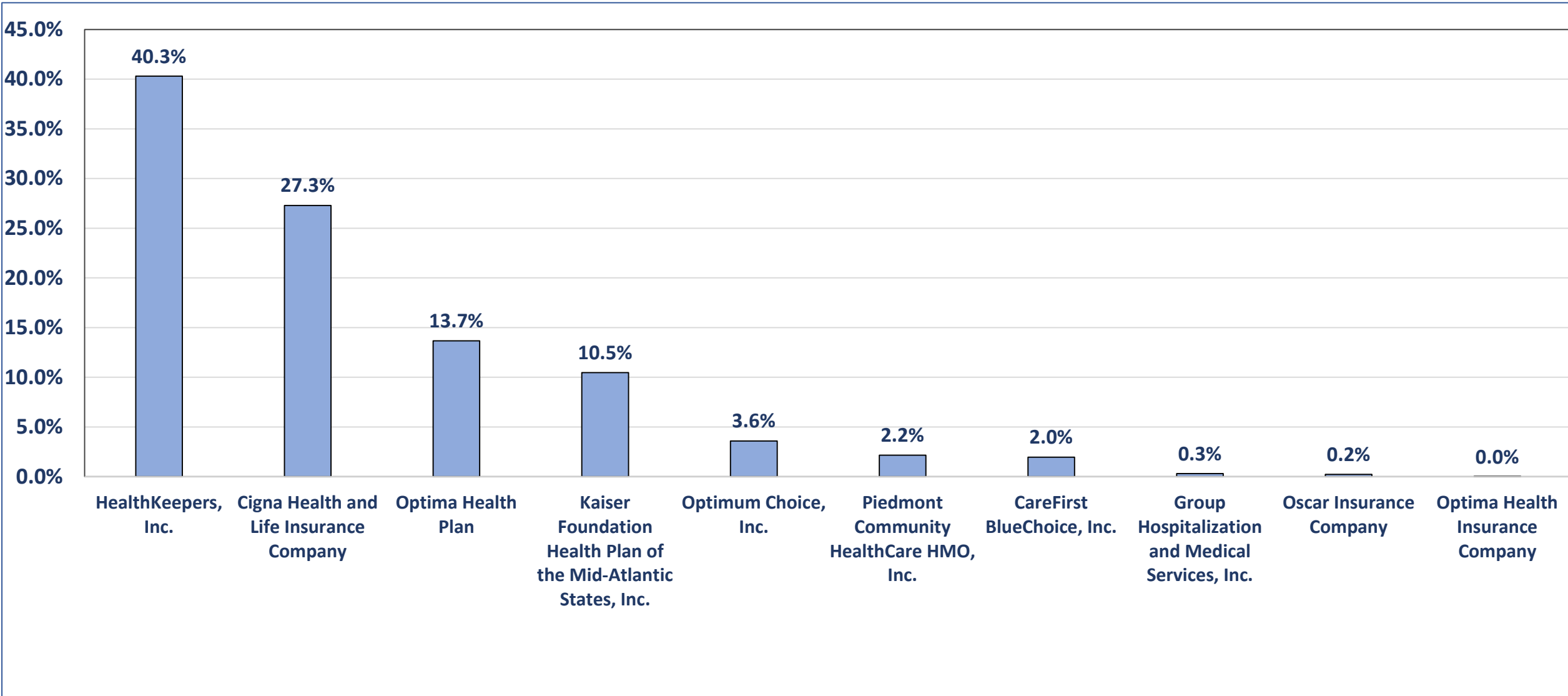


2021 Individual Market - Carrier Service Area Applications As of 8/10/2020

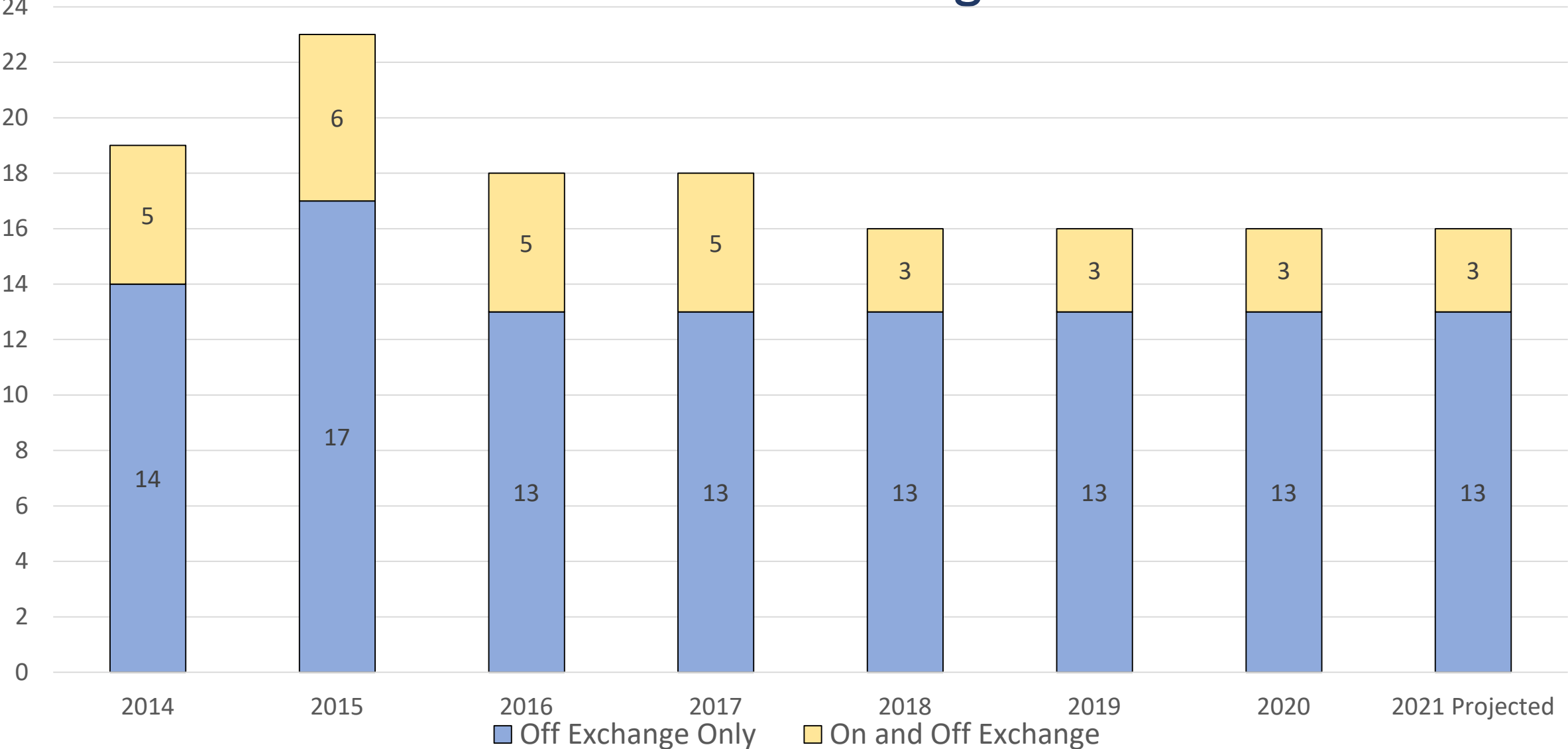


1) Alexandria City	5) Buena Vista City	9) Danville City	13) Franklin City	17) Harrisonburg City	21) Manassas City	25) Norfolk City	29) Poquoson City	33) Salem City	37) Winchester City
2) Arlington	6) Charlottesville City	10) Emporia City	14) Fredericksburg City	18) Hopewell City	22) Manassas Park City	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	

Virginia Individual Market Share – by 2021 Projected Covered Lives



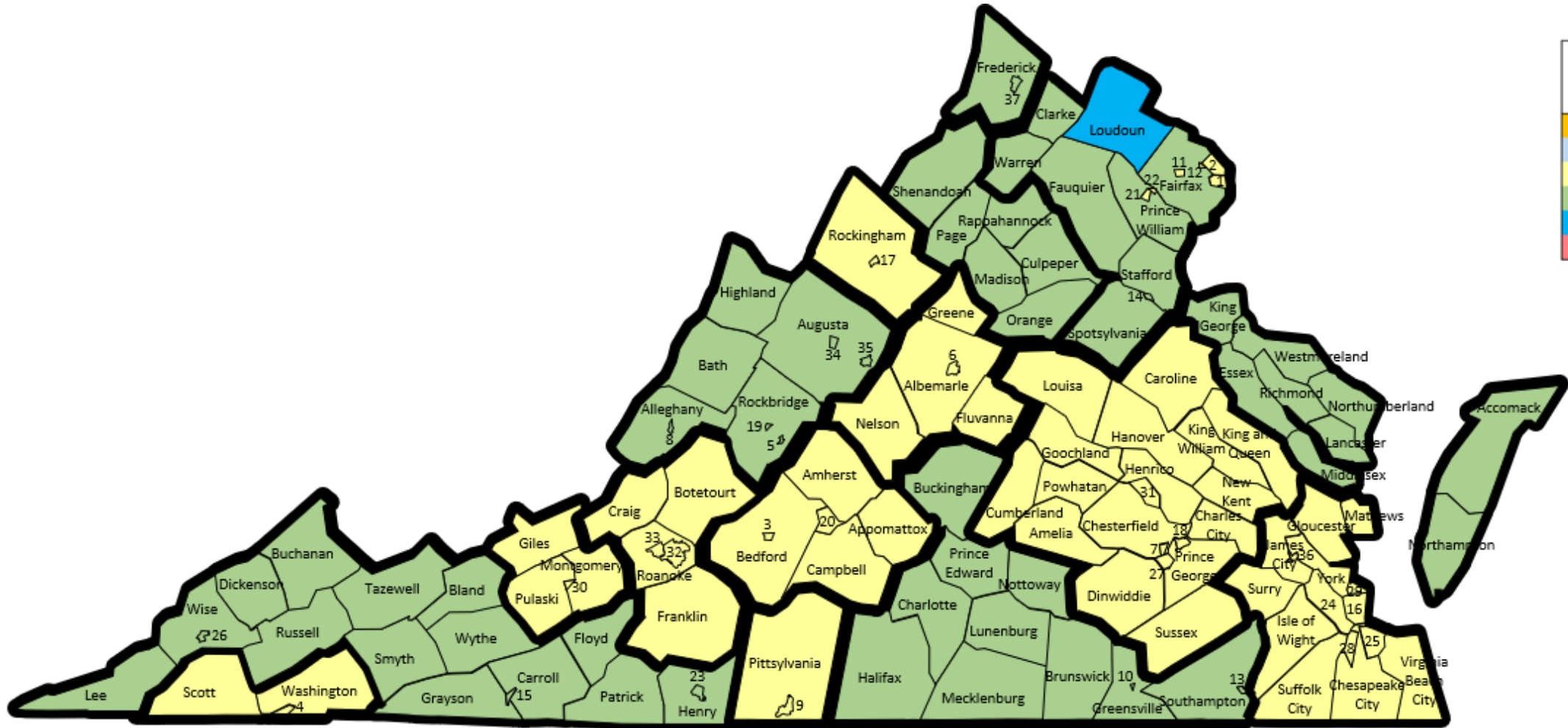
Number of Carriers in Virginia in the Small Group Market On and Off Exchange



2021 Small Group Market - Carrier Service Area Applications

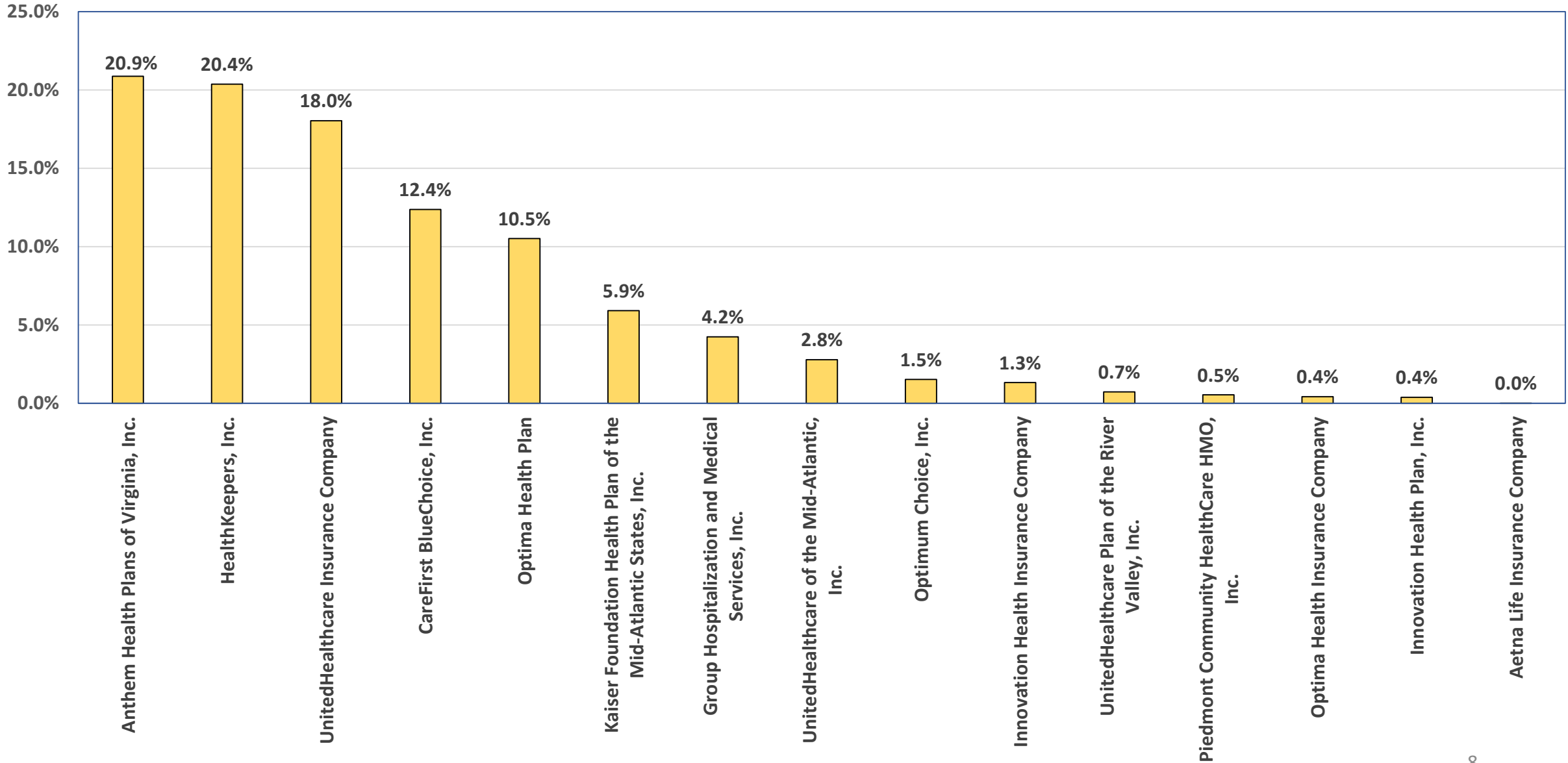
As of 8/10/2020

Number of Carriers in County/City	Percentage of Counties/Cities
0	0%
1 - 9	0%
10 - 11	51%
12 - 13	48%
14 - 15	1%
16+	0%

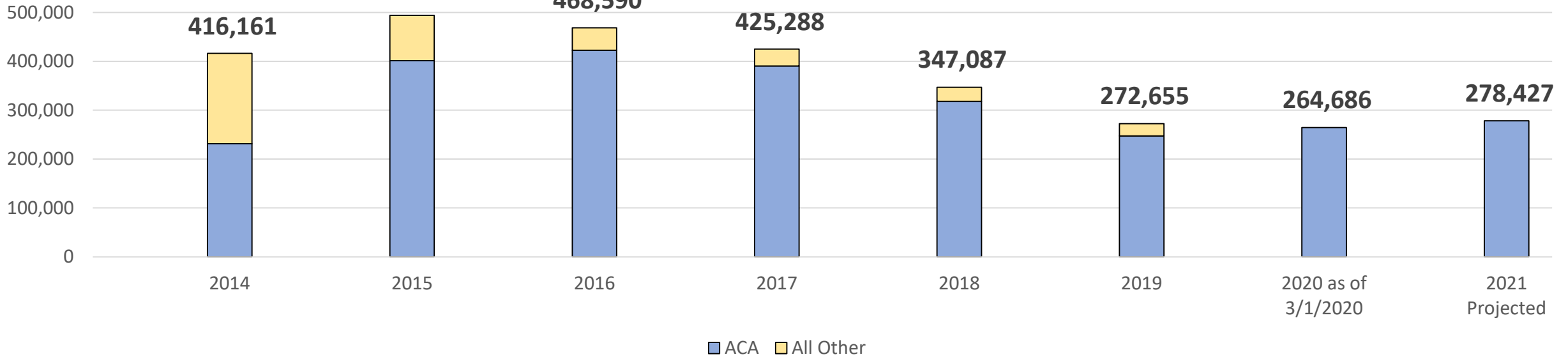


1) Alexandria City	5) Buena Vista City	9) Danville City	13) Franklin City	17) Harrisonburg City	21) Manassas City	25) Norfolk City	29) Poquoson City	33) Salem City	37) Winchester City
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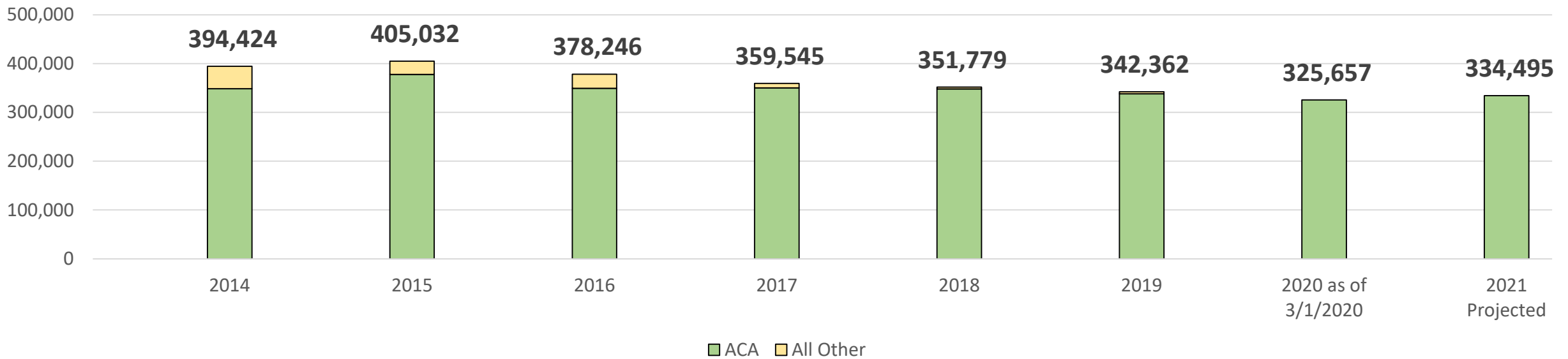
Virginia Small Group Market Share – by 2021 Projected Covered Lives



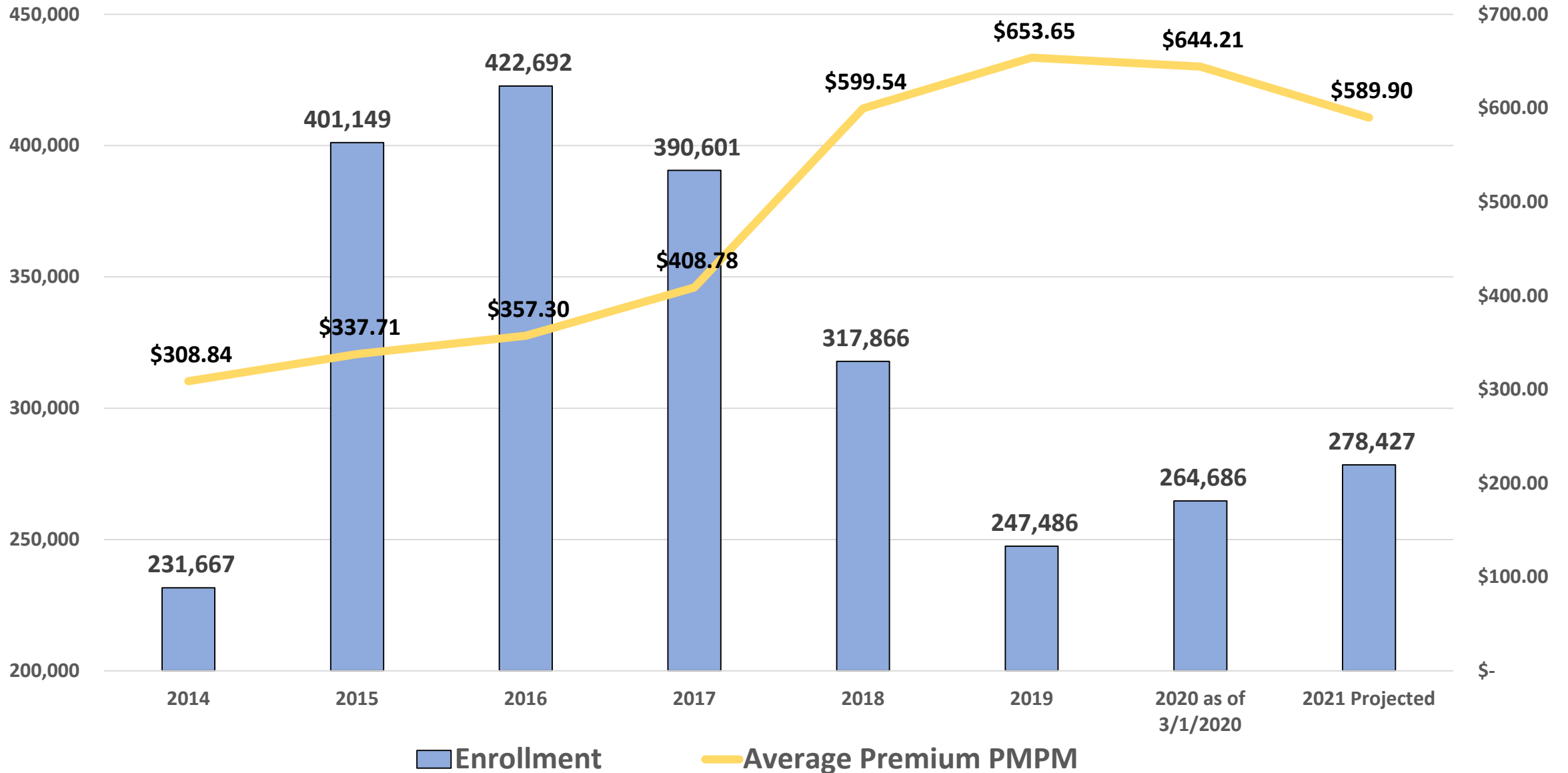
Virginia Individual Total Enrollment 2014-2021



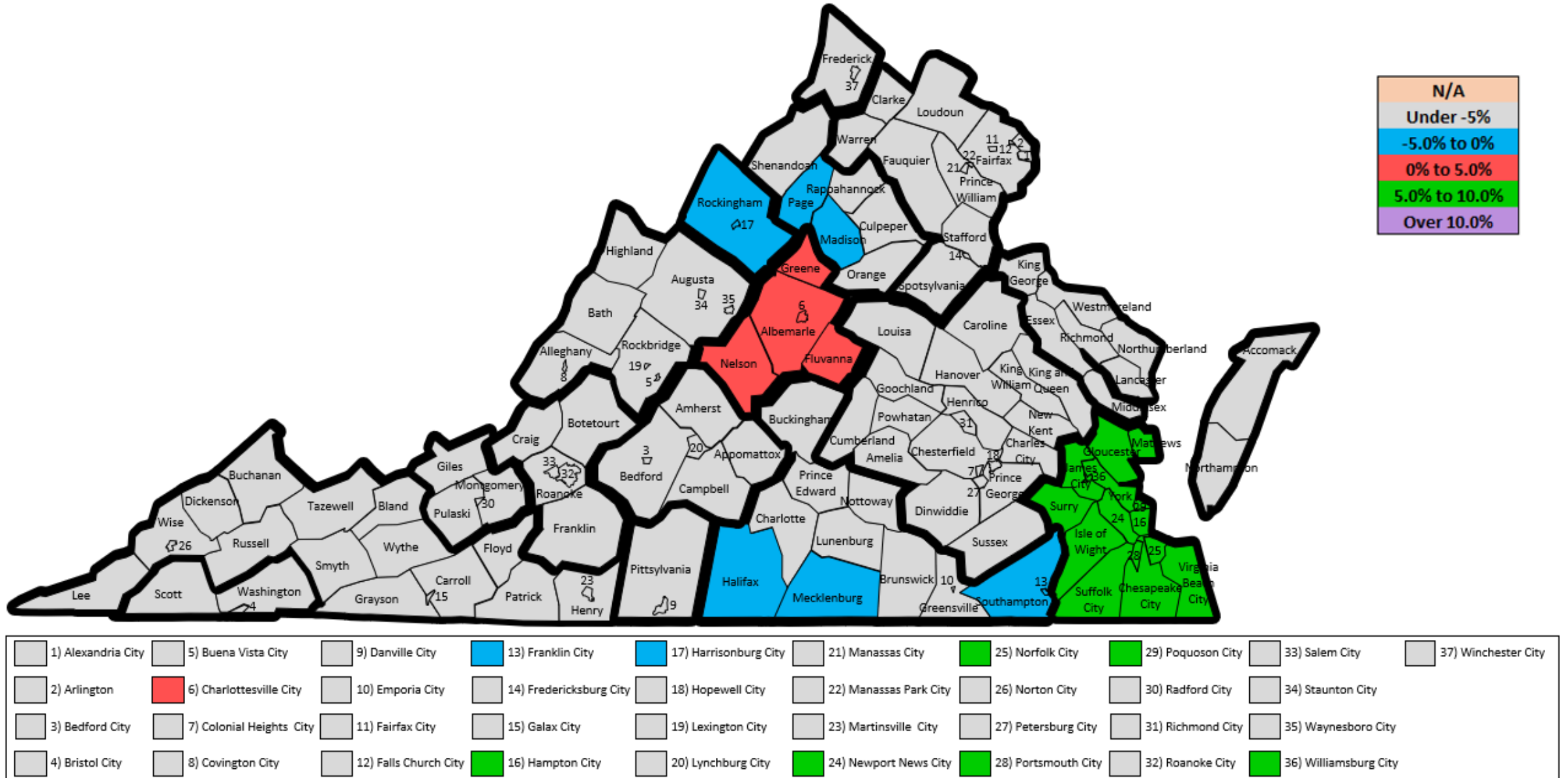
Virginia Small Group Total Enrollment 2014-2021



Virginia Individual ACA Total Enrollment and Average Premium PMPM 2014 – 2021

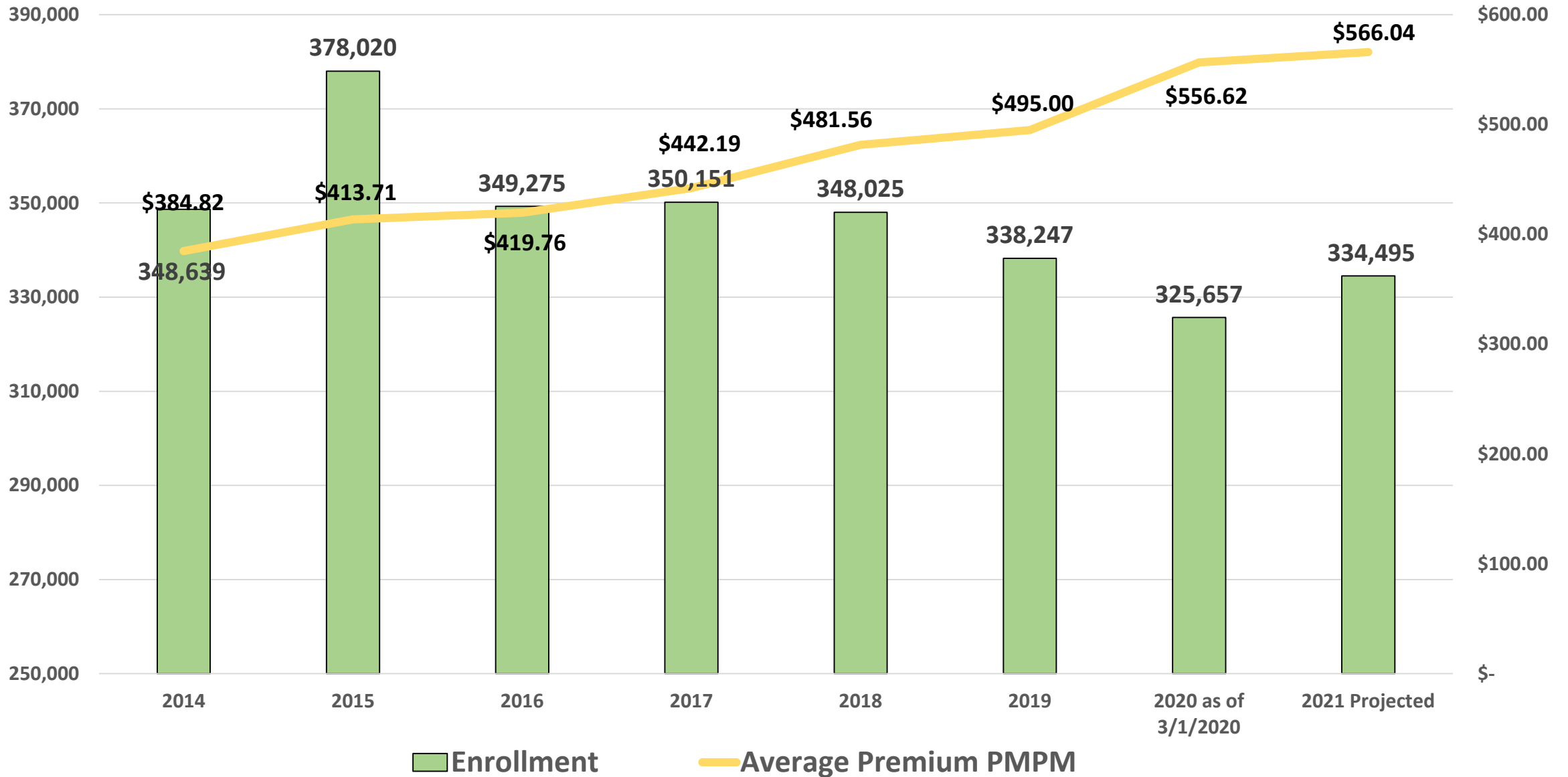


2021 Individual Market – Change in 2nd Lowest Silver Plan As of 8/10/2020



Source: 2021 SERFF Rate Filing

Virginia Small Group ACA Total Enrollment and Average Premium PMPM 2014 – 2021



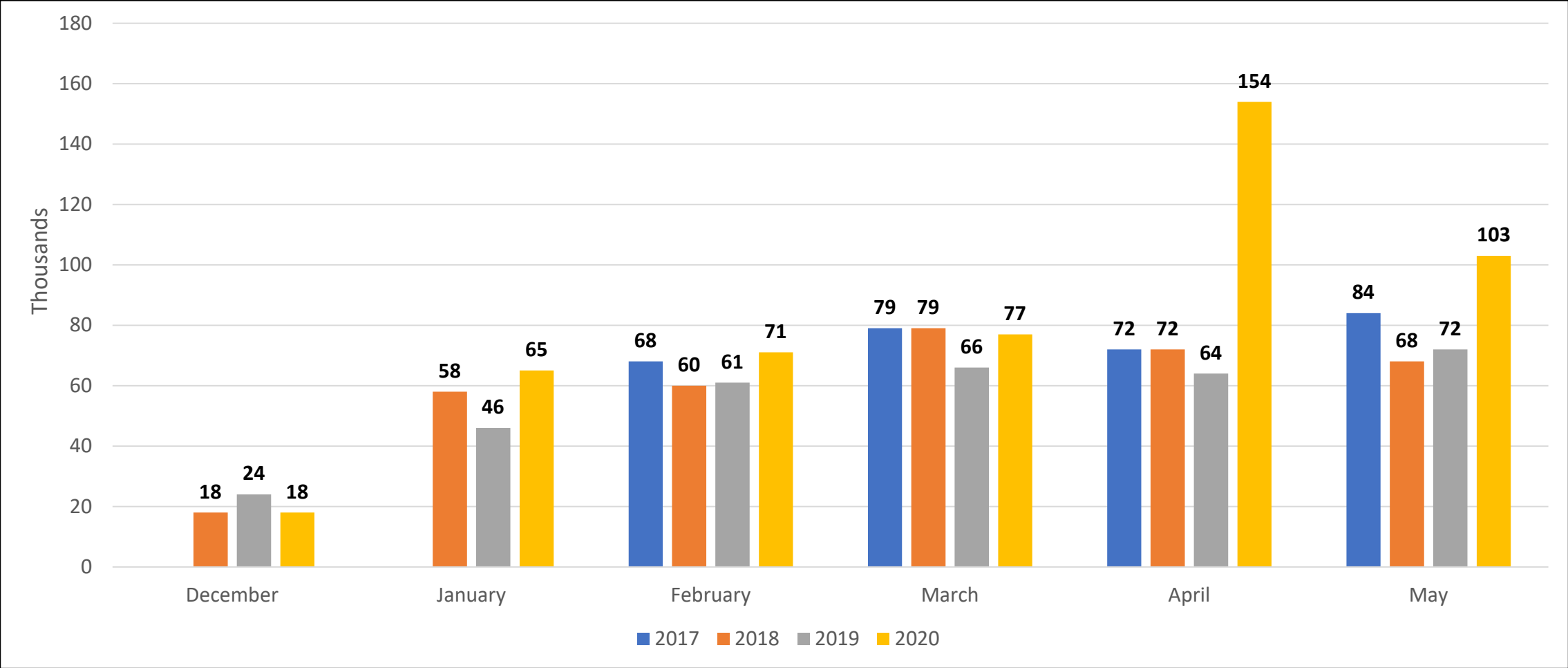
Anticipated Effects of COVID-19

- Nationally, 5.4 million workers became uninsured between February and May, 2020.
- As of May 2020, 14% of nonelderly adults in Virginia were uninsured.*
- Insurers have provided flexibility for employer groups in the form of premium assistance.
- Medicaid enrollment is increasing quicker than individual marketplace enrollment for many insurers, and that pattern is expected to continue. **

*Source: Families USA: THE COVID-19 PANDEMIC AND RESULTING ECONOMIC CRASH HAVE CAUSED THE GREATEST HEALTH INSURANCE LOSSES IN AMERICAN HISTORY – 7/13/20

**Source: Insurer Insights – Urban Institute – June 2020

Loss of MEC SEP Enrollments from the End of Open Enrollment through May, 2017-2020 Coverage Years (HealthCare.gov states)



Note: 2017 has approximately 1.5 fewer months in the reporting period due to a longer Open Enrollment Period
 Data provided is from states using the HealthCare.gov platform.
 Source: CMS Special Trends Report June 2020

Summary of Changes

- The percentage of uninsured in Virginia is at its lowest in at least 10 years
- In the early years of the ACA, the fully-insured market as a whole was at its highest enrollment overall in 10 years. Now all fully-insured markets are at or near their lowest enrollment in 10 years.
- Medicaid expansion, along with other options, such as sole proprietor legislation, has drawn a large number of people out of the individual market, but that market shows signs of stabilizing.
 - The market is highly subsidized, but we could see unsubsidized persons reenter the market if premiums continue to stabilize
 - Even with good carrier participation, approximately one in five persons in this market has a choice of only one carrier
- The fully-insured small group market has had a steady decrease over the last several years as premiums rise.
 - New challenges lie ahead for this market due to increasing premium and the effects of COVID-19 on businesses

2021 ACA Rate Filing Key Dates

Initial rate submissions were due May 22; the Bureau's deadline to submit QHP recommendations is August 26 (non-QHP reviews are completed by this date as well)

SERFF public access suspended on April 1, restored today (August 17)

Deadline of July 22 for carriers to submit voluntary service area revisions and voluntary rate filing revisions.

2021 Pricing Challenges

COVID-19

COVID-19 Assumptions

Out of 26 rate filings submitted for the 2021 plan year, only 9 made an adjustment to their rates for COVID-19

The final adjustments ranged from 0.2% to 3.7%

Adjustments in initial rate filings ranged from 2.4% to 8.4%

COVID-19 Assumptions for Presenting Companies

Individual

- Cigna: 1.0%
- HealthKeepers: 2.9%
- Optima Health Plan: 0.9%

Small Group

- Anthem: 3.4%
- CareFirst: 0.0%
- HealthKeepers: 3.7%
- Optima Health Plan 1.0%
- UnitedHealthcare: 0.0%

2020 ACA Premium Relief Programs (small group only)

Anthem/HealthKeepers: 15% reduction to April premium

CareFirst/GHMSI: 10% reduction to August premium

UnitedHealthcare: 10% reduction to May premium

Virginia 2021 ACA Pricing Trends

Individual

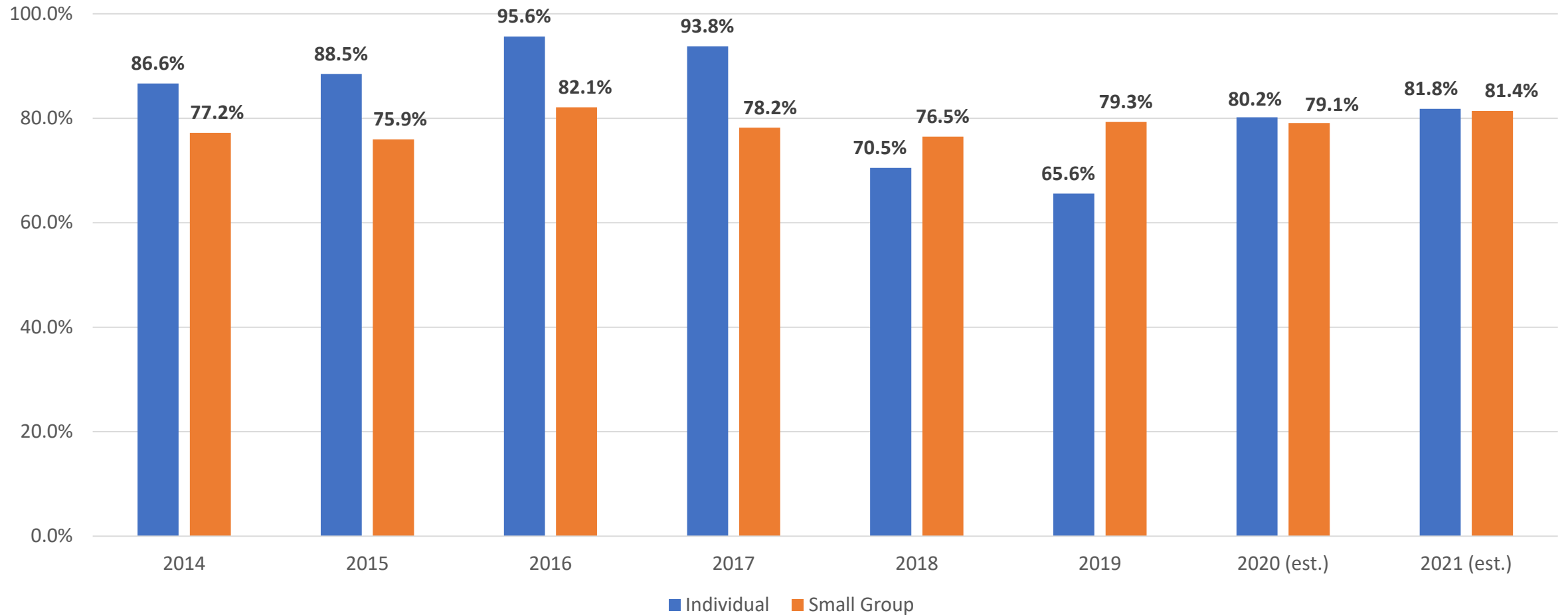
Carrier	INPATIENT			-	OUTPATIENT			-	PHYSICIAN			-	Rx			-	TOTAL
	Cost	Util	Total		Cost	Util	Total		Cost	Util	Total		Cost	Util	Total		
Cigna	2.7%	2.1%	4.9%	-	2.5%	2.1%	4.7%	-	0.9%	2.1%	3.0%	-	3.9%	0.3%	4.2%	-	4.4%
HealthKeepers	5.6%	2.3%	8.0%	-	5.2%	2.5%	7.8%	-	2.7%	2.5%	5.3%	-	7.4%	2.3%	9.9%	-	7.8%
Optima HP	6.6%	1.0%	7.7%	-	8.5%	1.0%	9.5%	-	6.6%	1.0%	7.7%	-	11.5%	0.1%	11.6%	-	8.7%

Small Group

Carrier	INPATIENT			-	OUTPATIENT			-	PHYSICIAN			-	Rx			-	TOTAL
	Cost	Util	Total		Cost	Util	Total		Cost	Util	Total		Cost	Util	Total		
Anthem	5.6%	2.3%	8.0%	-	5.2%	2.6%	7.9%	-	2.7%	3.7%	6.4%	-	7.1%	1.5%	8.7%	-	7.8%
CareFirst	0.0%	-1.0%	-1.0%	-	3.5%	5.5%	9.2%	-	2.5%	2.5%	5.1%	-	7.0%	-2.0%	4.9%	-	6.1%
HealthKeepers	5.6%	2.3%	8.0%	-	5.2%	3.0%	8.4%	-	2.7%	3.9%	6.7%	-	7.1%	1.5%	8.7%	-	8.0%
Optima HP	4.8%	1.0%	5.8%	-	6.6%	1.0%	7.7%	-	4.8%	1.0%	5.8%	-	11.5%	0.1%	11.6%	-	7.2%
United	3.6%	3.9%	7.6%	-	3.6%	3.9%	7.6%	-	3.6%	3.9%	7.6%	-	3.6%	3.9%	7.6%	-	7.6%

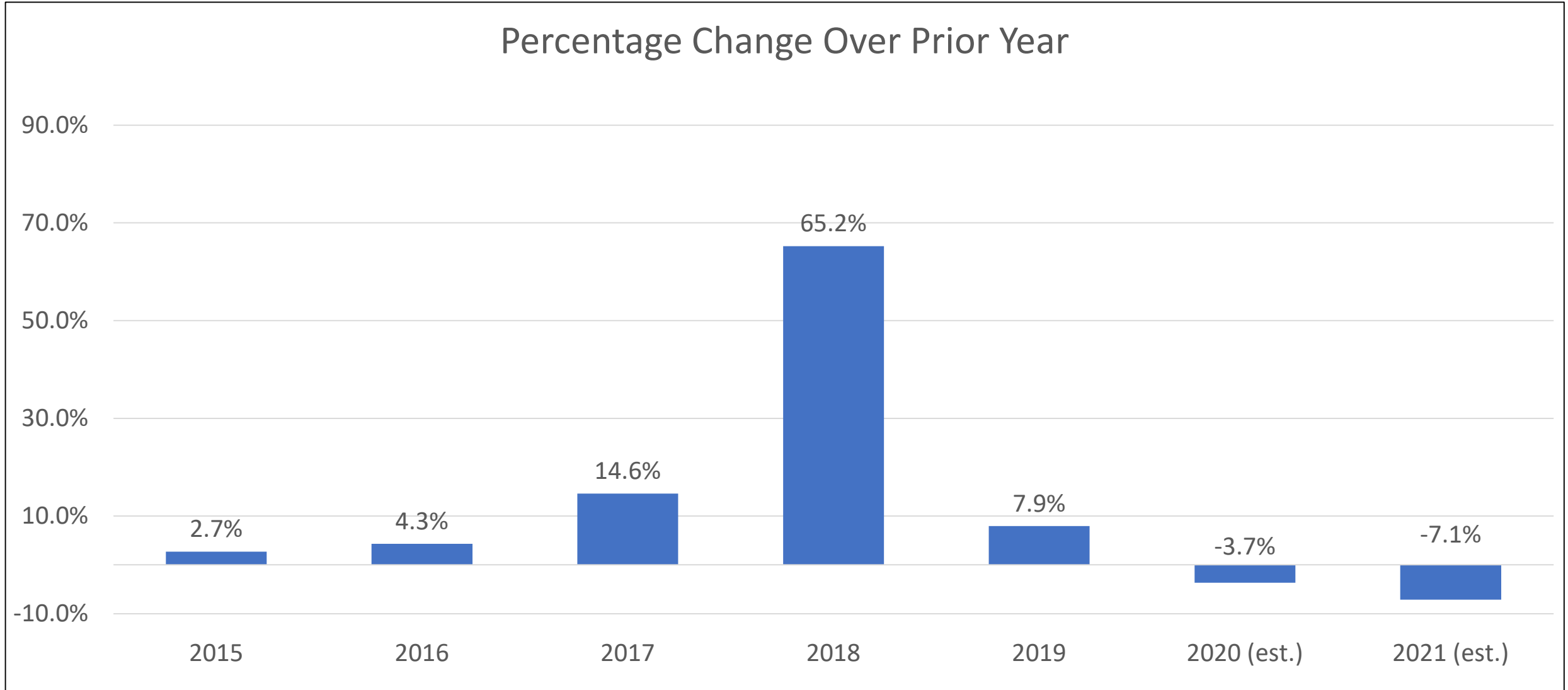
ACA Loss Ratio Experience

ACA Historical Data in Virginia

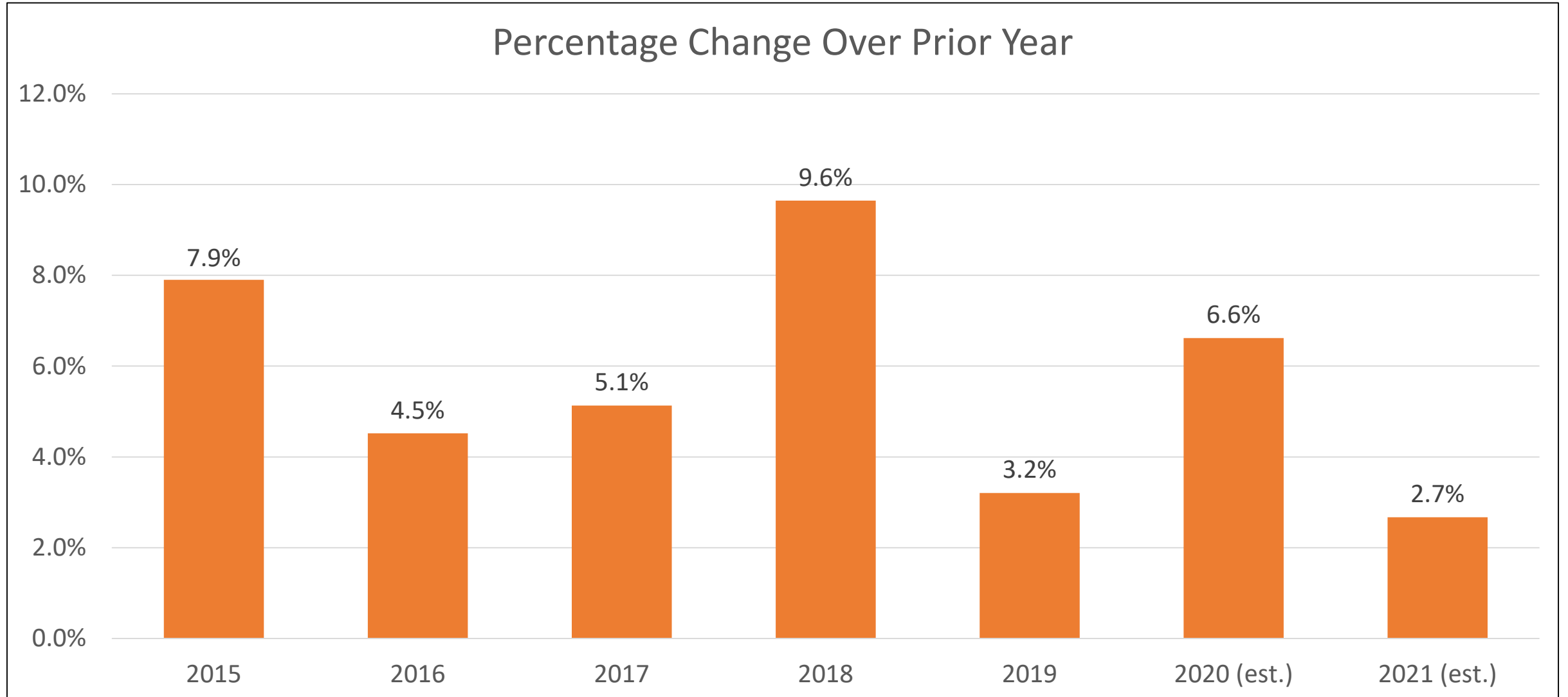


Virginia Individual Member Weighted Rate Change

Percentage Change Over Prior Year



Virginia Small Group Member Weighted Rate Change



Presenting Companies

- Anthem Health Plans of Virginia, Inc./HealthKeepers, Inc.
- CareFirst BlueChoice, Inc.
- Cigna Health and Life Insurance Co.
- Optima Health Plan
- UnitedHealthcare Insurance Co.

HealthKeepers Individual

Presenter: Tim Connell

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
Anthem HealthKeepers Silver X 625 88380VA0720036 Silver			Anthem HealthKeepers Silver X 220 88380VA0720035 Silver		Anthem HealthKeepers Bronze X 82 88380VA0720031 Bronze	
In-Network Individual Deductible	\$6,250	\$6,250	\$2,200	\$2,000	\$8,200	\$7,500
In-Network Member Coinsurance	35%	35%	30%	30%	40%	40%
In-Network Individual OOP	\$8,550	\$8,150	\$8,550	\$8,150	\$8,550	\$8,150
In-Network PCP OV Copay	\$35	\$35	\$35	\$35	NA	NA
Members as of 3/1/2020	43,660		2,124		8,602	
Pct of Statewide Membership	37.4%		1.8%		7.4%	
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 1/1/2020	\$513.35		\$556.36		\$383.32	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	-\$12.83	-2.5%	-\$13.91	-2.5%	-\$9.58	-2.5%
Trend	\$38.00	7.4%	\$41.18	7.4%	\$28.37	7.4%
Risk Adjustment	\$17.45	3.4%	\$18.92	3.4%	\$13.03	3.4%
HIT Removal	-\$15.20	-3.0%	-\$16.47	-3.0%	-\$11.35	-3.0%
Other Non-Benefit Expenses	\$2.14	0.4%	\$2.14	0.4%	\$2.14	0.6%
Benefit Changes	-\$3.57	-0.7%	-\$8.54	-1.5%	-\$5.81	-1.5%
Other / Favorable Experience	-\$69.03	-13.4%	-\$75.35	-13.5%	-\$40.33	-10.5%
Other Change 2		0.0%		0.0%		0.0%
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%
Above Calculated Rate on 1/1/2021	\$470.31	-8.4%	\$504.32	-9.4%	\$359.79	-6.1%

*Rates are for a non-tobacco user

Table 14. 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	1.050	-4.8%
19	0.941	1.000	1.050	-4.8%
20	0.970	1.000	1.050	-4.8%
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.

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	1/1/2021		

Table 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	1.124	1.120	0.4%
Area 2 (Charlottesville)	1.046	1.042	0.4%
Area 3 (Danville)	0.993	0.989	0.4%
Area 4 (Harrisonburg)	1.053	1.049	0.4%
Area 5 (Bristol)	0.992	0.988	0.4%
Area 6 (Lynchburg)	1.046	1.042	0.4%
Area 7 (Richmond)	0.945	0.941	0.4%
Area 8 (Roanoke)	1.047	1.043	0.4%
Area 9 (Tidewater)	0.996	0.992	0.4%
Area 10 (Northern VA)	0.994	0.990	0.4%
Area 11 (Winchester)	1.019	1.015	0.4%
Area 12 (Non-MSA)	0.993	0.989	0.4%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-8.0%
Carrier Calculated Avg Total Rate Change	-7.7%
Carrier Calculated Avg Adult Rate Change	-7.7%
Carrier Calculated Avg Child Rate Change	-7.5%

HealthKeepers Small Group

Presenter: Tim Connell

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	Anthem HealthKeepers Gold OAPO 88380VA0740128 Gold		Anthem HealthKeepers Gold OAPO 88380VA0740141 Gold		Anthem HealthKeepers Silver OAPO 88380VA0740267 Silver	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$750	\$750	\$1,000	\$1,000	\$6,000	\$6,000
In-Network Member Coinsurance	20%	20%	20%	20%	20%	20%
In-Network Individual OOP	\$7,700	\$6,500	\$5,500	\$5,500	\$7,000	\$8,150
In-Network PCP OV Copay	\$25	\$25	NA	NA	NA	NA
Members as of 3/1/2020	9,648		409		19	
Pct of Statewide Membership	14.4%		0.6%		0.0%	
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 1/1/2020	\$486.59		\$481.19		\$352.14	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$6.91	1.4%	\$6.83	1.4%	\$5.00	1.4%
Trend	\$37.52	7.7%	\$37.10	7.7%	\$27.15	7.7%
Risk Adjustment	-\$12.40	-2.5%	-\$11.94	-2.5%	-\$10.39	-2.9%
HIT Removal	-\$14.40	-3.0%	-\$14.24	-3.0%	-\$10.42	-3.0%
Other Non-Benefit Expenses	\$1.76	0.4%	\$1.76	0.4%	\$1.76	0.5%
Benefit Changes	-\$20.02	-4.1%	-\$26.35	-5.5%	\$13.35	3.8%
Area Factor Change	\$9.73	2.0%	\$9.62	2.0%	\$7.04	2.0%
Other Change 2		0.0%		0.0%		0.0%
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%
Above Calculated Rate on 1/1/2021	\$495.68	1.9%	\$483.98	0.6%	\$385.64	9.5%

*Rates are for a non-tobacco user

Table 14. 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.

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	1/1/2021		

Table 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	1.060	1.046	1.3%
Area 2 (Charlottesville)	0.939	0.946	-0.7%
Area 3 (Danville)	0.981	1.003	-2.2%
Area 4 (Harrisonburg)	0.988	0.983	0.5%
Area 5 (Bristol)	0.992	0.999	-0.7%
Area 6 (Lynchburg)	0.970	0.958	1.3%
Area 7 (Richmond)	1.025	1.013	1.3%
Area 8 (Roanoke)	1.033	1.025	0.7%
Area 9 (Tidewater)	0.971	0.978	-0.7%
Area 10 (Northern VA)	1.023	1.051	-2.7%
Area 11 (Winchester)	0.954	0.979	-2.5%
Area 12 (Non-MSA)	0.972	0.999	-2.7%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	0.3%
Carrier Calculated Avg Total Rate Change	2.7%
Carrier Calculated Avg Adult Rate Change	2.7%
Carrier Calculated Avg Child Rate Change	2.7%

Anthem Health Plans of Virginia Small Group

Presenter: Tim Connell

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	Anthem Platinum PPO 10/0%/3500 16064VA1210060 Platinum		Anthem Gold PPO 1000/20%/5500 16064VA1210076 Gold		Anthem Silver PPO 6000/20%/7000 16064VA1210110 Silver	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$0	\$0	\$1,000	\$1,000	\$6,000	\$6,000
In-Network Member Coinsurance	0%	0%	20%	20%	20%	20%
In-Network Individual OOP	\$3,500	\$3,500	\$5,500	\$5,500	\$7,000	\$8,150
In-Network PCP OV Copay	\$10	\$10	NA	NA	NA	NA
Members as of 3/1/2020	14,171		611		14	
Pct of Statewide Membership	20.7%		0.9%		0.0%	
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 1/1/2020	\$669.02		\$558.52		\$409.13	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$9.50	1.4%	\$7.93	1.4%	\$5.81	1.4%
Trend	\$50.35	7.5%	\$42.03	7.5%	\$30.79	7.5%
Risk Adjustment	-\$18.38	-2.7%	-\$14.81	-2.7%	-\$12.69	-3.1%
HIT Removal	-\$18.60	-2.8%	-\$15.53	-2.8%	-\$11.37	-2.8%
Other Non-Benefit Expenses	\$0.80	0.1%	\$0.80	0.1%	\$0.80	0.2%
Benefit Changes	-\$24.21	-3.6%	-\$31.24	-5.6%	\$14.85	3.6%
Area Factor Change	\$13.38	2.0%	\$11.17	2.0%	\$8.18	2.0%
Other Change 2		0.0%		0.0%		0.0%
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%
Above Calculated Rate on 1/1/2021	\$681.87	1.9%	\$558.88	0.1%	\$445.50	8.9%

*Rates are for a non-tobacco user

Table 14. 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.

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	1/1/2021		

Table 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	1.068	1.037	2.9%
Area 2 (Charlottesville)	0.941	0.933	0.9%
Area 3 (Danville)	0.986	0.992	-0.6%
Area 4 (Harrisonburg)	0.998	0.977	2.1%
Area 5 (Bristol)	1.006	0.997	0.9%
Area 6 (Lynchburg)	0.969	0.942	2.9%
Area 7 (Richmond)	1.076	1.046	2.8%
Area 8 (Roanoke)	1.041	1.017	2.4%
Area 9 (Tidewater)	1.056	1.047	0.9%
Area 10 (Northern VA)	0.982	0.994	-1.2%
Area 11 (Winchester)	0.939	0.948	-0.9%
Area 12 (Non-MSA)	1.006	1.017	-1.1%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-2.0%
Carrier Calculated Avg Total Rate Change	1.0%
Carrier Calculated Avg Adult Rate Change	1.0%
Carrier Calculated Avg Child Rate Change	0.9%

CareFirst BlueChoice Small Group

Presenter: Peter Berry

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
BlueChoice Advantage Gold 1000 10207VA0440006 Gold			BlueChoice HMO HSA/HRA Silver 21 10207VA0430026 Silver		BlueChoice HMO Value Bronze 600 10207VA0430028 Bronze	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$1,000	\$1,000	\$2,100	\$2,000	\$6,000	\$6,000
In-Network Member Coinsurance	100%	100%	70%	70%	60%	100%
In-Network Individual OOP	\$5,750	\$4,400	\$6,900	\$6,750	\$8,300	\$8,400
In-Network PCP OV Copay	\$15	\$15	\$0	\$0	\$40	\$40
Members as of 3/1/2020	3,754		0		465	
Pct of Statewide Membership	8.7%		0.0%		1.1%	
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 1/1/2020	\$475.98		\$366.67		\$260.92	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$1.02	0.2%	\$0.79	0.2%	\$0.56	0.2%
Trend	\$28.94	6.1%	\$22.30	6.1%	\$15.87	6.1%
Risk Adjustment	\$24.22	5.1%	\$16.86	4.6%	\$16.89	6.5%
HIT Removal	-\$16.62	-3.5%	-\$12.81	-3.5%	-\$9.11	-3.5%
Other Non-Benefit Expenses	-\$0.48	-0.1%	-\$4.79	-1.3%	\$8.64	3.3%
Benefit Changes	\$0.76	0.2%	\$15.53	4.2%	\$18.23	7.0%
Base Period Index Rate	-\$25.35	-5.3%	-\$19.53	-5.3%	-\$13.90	-5.3%
Benefit Leveraging	-\$3.53	-0.7%	-\$19.58	-5.3%	\$32.04	12.3%
Age Calibration	-\$13.59	-2.9%	-\$10.00	-2.7%	-\$8.38	-3.2%
"Other"	\$7.19	1.5%	-\$3.04	-0.8%	-\$26.72	-10.2%
		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$478.53	0.5%	\$352.41	-3.9%	\$295.04	13.1%

*Rates are for a non-tobacco user

Table 14. 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			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

*VA follows the federal default age curve.

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	1/1/2021		

Table 15. Geographic Factors

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

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	1.5%
Carrier Calculated Avg Total Rate Change	1.5%
Carrier Calculated Avg Adult Rate Change	1.5%
Carrier Calculated Avg Child Rate Change	1.5%

Cigna Health and Life Insurance Company Individual

Presenter: Steven Giori

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
Cigna Connect 6500 41921VA0020030 Silver			Cigna Connect 1500 41921VA0020009 Gold		Cigna Connect 4500 +Acupuncture 41921VA0020015 Silver	
Plan Design Information						
In-Network Individual Deductible	\$6,500	\$6,500	\$1,500	\$1,500	\$4,500	\$4,500
In-Network Member Coinsurance	40%	30%	25%	15%	20%	20%
In-Network Individual OOP	\$8,550	\$8,150	\$8,550	\$8,150	\$8,550	\$8,150
In-Network PCP OV Copay	\$20	\$20	\$25	\$25	\$15	\$15
Members as of 3/1/2020	15,765		2,466		8,523	
Pct of Statewide Membership	23.7%		3.7%		12.8%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 7 (Richmond)		Area 10 (Northern VA)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2020	\$526.90		\$502.56		\$533.28	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity Trend	-\$52.46	-10.0%	-\$50.04	-10.0%	-\$53.10	-10.0%
Risk Adjustment	\$21.23	4.0%	\$20.25	4.0%	\$21.49	4.0%
HIT Removal	\$50.72	9.6%	\$48.37	9.6%	\$51.33	9.6%
Other Non-Benefit Expenses	-\$10.85	-2.1%	-\$10.35	-2.1%	-\$10.99	-2.1%
Benefit Changes	-\$6.29	-1.2%	\$2.26	0.4%	\$2.40	0.4%
CSR Load	-\$0.39	-0.1%	-\$17.45	-3.5%	-\$0.06	0.0%
Experience Period	-\$6.79	-1.3%	\$0.00	0.0%	-\$6.87	-1.3%
Demo Change	-\$36.46	-6.9%	-\$34.78	-6.9%	-\$36.90	-6.9%
Other	-\$3.50	-0.7%	-\$3.34	-0.7%	-\$3.54	-0.7%
	-\$11.73	-2.2%	-\$21.38	-4.3%	-\$21.46	-4.0%
		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$470.37	-10.7%	\$436.12	-13.2%	\$475.59	-10.8%

*Rates are for a non-tobacco user

Table 14. 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.

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	1/1/2021		

Table 15. Geographic Factors

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	0.978	0.0%
Area 8 (Roanoke)			N/A
Area 9 (Tidewater)			N/A
Area 10 (Northern VA)	1.011	1.011	0.0%
Area 11 (Winchester)	1.027	1.060	-3.2%
Area 12 (Non-MSA)			N/A

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-11.7%
Carrier Calculated Avg Total Rate Change	-11.7%
Carrier Calculated Avg Adult Rate Change	-11.6%
Carrier Calculated Avg Child Rate Change	-11.9%

Optima Health Plan Individual

Presenter: Margaret Chance

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
OptimaFit Silver 6600 30% Direct 20507VA1410026 Silver			OptimaFit Gold 1300 20% Direct 20507VA1410015 Gold		OptimaFit Bronze 6250 20% HSA Di 20507VA1410008 Bronze	
Plan Design Information						
In-Network Individual Deductible	\$6,600	\$6,600	\$1,300	\$1,300	\$6,250	\$6,000
In-Network Member Coinsurance	30%	30%	20%	20%	20%	20%
In-Network Individual OOP	\$8,550	\$8,150	\$8,550	\$8,150	\$6,900	\$6,750
In-Network PCP OV Copay	\$25	\$25	\$35	\$35	\$0	\$0
Members as of 3/1/2020	13,126		4,715		3,834	
Pct of Statewide Membership	38.8%		13.9%		11.3%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 9 (Tidewater)		Area 2 (Charlottesville)		Area 9 (Tidewater)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2020	\$477.56		\$543.70		\$378.72	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	-\$6.92	-1.4%	-\$7.88	-1.4%	-\$5.49	-1.4%
Trend	\$42.43	8.9%	\$48.31	8.9%	\$33.65	8.9%
Risk Adjustment	\$25.73	5.4%	\$29.30	5.4%	\$20.41	5.4%
HIT Removal	-\$5.19	-1.1%	-\$5.90	-1.1%	-\$4.11	-1.1%
Other Non-Benefit Expenses	\$2.96	0.6%	\$2.75	0.5%	\$9.05	2.4%
Benefit Changes	-\$6.07	-1.3%	-\$2.79	-0.5%	-\$3.11	-0.8%
Area Factor Revisions	\$8.72	1.8%	-\$35.57	-6.5%	\$7.06	1.9%
COVID-19 Adjustment	\$4.83	1.0%	\$5.12	0.9%	\$3.90	1.0%
Other Changes	-\$28.46	-6.0%	-\$45.43	-8.4%	-\$12.16	-3.2%
		0.0%		0.0%		0.0%
		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$515.61	8.0%	\$531.59	-2.2%	\$427.91	13.0%

*Rates are for a non-tobacco user

Table 14. 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	1.200	-16.7%
19	0.941	1.000	1.200	-16.7%
20	0.970	1.000	1.200	-16.7%
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.

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	1/1/2021		

Table 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	1.023	1.105	-7.4%
Area 3 (Danville)	N/A	N/A	N/A
Area 4 (Harrisonburg)	1.023	1.105	-7.4%
Area 5 (Bristol)	N/A	N/A	N/A
Area 6 (Lynchburg)	N/A	N/A	N/A
Area 7 (Richmond)	1.023	1.105	-7.4%
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)	1.023	1.105	-7.4%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	9.3%
Carrier Calculated Avg Total Rate Change	7.5%
Carrier Calculated Avg Adult Rate Change	7.5%
Carrier Calculated Avg Child Rate Change	7.5%

Optima Health Plan Small Group

Presenter: Graham Sutherlin

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, POS		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
Optima Vantage Gold 2000/25/30% 20507VA1250020 Gold			Optima POS Platinum 15/30 Direct 20507VA1280076 Platinum		Optima Vantage Bronze 6600/30% 20507VA1250065 Bronze	
Plan Design Information						
In-Network Individual Deductible	\$2,000	\$2,000	\$0	\$0	\$6,600	\$6,600
In-Network Member Coinsurance	30%/50%	30%/50%	0%/20%	0%/20%	30%/50%	30%/50%
In-Network Individual OOP	\$4,500	\$4,500	\$4,500	\$4,500	\$7,800	\$7,800
In-Network PCP OV Copay	\$25/50	\$25/50	\$15/30	\$15/30	30%/50%	30%/50%
Members as of 3/1/2020	7,799		0		701	
Pct of Statewide Membership	22.2%		0.0%		2.0%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 9 (Tidewater)		Area 6 (Lynchburg)		Area 9 (Tidewater)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2020	\$410.24		\$655.34		\$285.73	
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	\$29.58	7.2%	\$47.25	7.2%	\$20.60	7.2%
Risk Adjustment	\$21.99	5.4%	\$28.74	4.4%	\$16.33	5.7%
HIT Removal	-\$5.64	-1.4%	-\$7.46	-1.1%	-\$4.39	-1.5%
Other Non-Benefit Expenses	-\$29.20	-7.1%	-\$30.47	-4.6%	-\$4.16	-1.5%
Benefit Changes	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Region Factor	\$6.10	1.5%	-\$55.18	-8.4%	\$4.25	1.5%
Demographics	\$8.96	2.2%	\$11.71	1.8%	\$6.65	2.3%
Benefit Relativity Model Update	\$26.96	6.6%	-\$29.05	-4.4%	\$24.31	8.5%
COVID 19	\$4.10	1.0%	\$6.55	1.0%	\$2.86	1.0%
Other	\$11.08	2.7%	\$5.53	0.8%	\$7.33	2.6%
Above Calculated Rate on 1/1/2021	\$484.16	18.0%	\$632.97	-3.4%	\$359.49	25.8%

*Rates are for a non-tobacco user

Table 14. 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.

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, POS		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	1.036	1.079	-3.9%
Area 2 (Charlottesville)	0.979	1.007	-2.8%
Area 3 (Danville)	1.036	1.079	-3.9%
Area 4 (Harrisonburg)	1.038	1.070	-3.0%
Area 5 (Bristol)	1.036	1.079	-3.9%
Area 6 (Lynchburg)	0.931	1.017	-8.4%
Area 7 (Richmond)	1.058	1.098	-3.7%
Area 8 (Roanoke)	1.036	1.079	-3.9%
Area 9 (Tidewater)	0.930	0.916	1.5%
Area 10 (Northern VA)	1.036	1.087	-4.6%
Area 11 (Winchester)	1.036	1.079	-3.9%
Area 12 (Non-MSA)	1.036	1.079	-3.9%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

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

UnitedHealthcare Insurance Company Small Group

Presenter: Ryan Morgan

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
UHC Choice Plus Gold 1500-1 25978VA0010050 Gold			UHC Choice Platinum 0-3 25978VA0030089 Platinum		UHC Choice Gold 3000 25978VA0030101 Gold	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$1,500	\$1,250	\$0	\$0	\$3,000	\$2,750
In-Network Member Coinsurance	80%	80%	100%	100%	100%	80%
In-Network Individual OOP	\$5,000	\$4,250	\$3,500	\$5,000	\$8,550	\$7,900
In-Network PCP OV Copay	\$30	\$30	\$15	\$15	\$0	\$0
Members as of 3/1/2020	6,596		21		74	
Pct of Statewide Membership	10.9%		0.0%		0.1%	
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 1/1/2020	\$472.62		\$664.52		\$405.39	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	-\$0.47	-0.1%	-\$0.66	-0.1%	-\$0.40	-0.1%
Trend	\$38.28	8.1%	\$53.83	8.1%	\$32.84	8.1%
Risk Adjustment	-\$4.88	-1.0%	-\$6.86	-1.0%	-\$4.18	-1.0%
HIT Removal	-\$11.17	-2.4%	-\$15.70	-2.4%	-\$9.58	-2.4%
Other Non-Benefit Expenses	-\$0.27	-0.1%	-\$0.38	-0.1%	-\$0.23	-0.1%
Benefit Changes	\$26.49	5.6%	-\$4.47	-0.7%	\$68.48	16.9%
Resloping offset	-\$30.72	-6.5%	-\$43.19	-6.5%	-\$26.35	-6.5%
		0.0%		0.0%		0.0%
		0.0%		0.0%		0.0%
		0.0%		0.0%		0.0%
		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$489.88	3.7%	\$647.09	-2.6%	\$465.97	14.9%

*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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
VA Silver HMO 6000 80%	VA Silver HMO 6000 80%		VA Silver HMO 6000 80%		VA Silver HMO 6000 80%	
93187VA0040120	93187VA0040120		93187VA0040120		93187VA0040120	
Silver	Silver		Silver		Silver	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 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	\$8,550	\$8,150	\$8,550	\$8,150	\$8,550	\$8,150
In-Network PCP OV Copay	\$30	\$30	\$30	\$30	\$30	\$30
Members as of 3/1/2020	16		10		0	
Pct of Statewide Membership	14.1%		8.8%		0.0%	
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 1/1/2020	\$514.94		\$481.21		\$547.12	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$2.45	0.5%	\$2.29	0.5%	\$2.60	0.5%
Trend	\$62.22	12.1%	\$58.14	12.1%	\$66.11	12.1%
Risk Adjustment	-\$65.04	-12.6%	-\$65.04	-13.5%	-\$65.04	-11.9%
HIT Removal	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	\$17.20	3.3%	\$16.07	3.3%	\$18.28	3.3%
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	-\$28.44	-5.5%	-\$22.32	-4.6%	-\$34.29	-6.3%
Other Change 5		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$503.32	-2.3%	\$470.36	-2.3%	\$534.77	-2.3%

*Rates are for a non-tobacco user

Aetna Health, 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	Aetna Health Inc. (a PA corp.)		
NAIC Number	95109		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 14. 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 15. Geographic Factors

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%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

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

Aetna Life 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	Aetna Life Insurance Company		
NAIC Number	60054		
Product(s)	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
VA Silver PPO 6000 80/50 38234VA0090117 Silver	VA Silver PPO 6000 80/50 38234VA0090117 Silver	VA Silver PPO 6000 80/50 38234VA0090117 Silver	VA Silver PPO 6000 80/50 38234VA0090117 Silver	VA Silver PPO 6000 80/50 38234VA0090117 Silver	VA Silver PPO 6000 80/50 38234VA0090117 Silver	VA Silver PPO 6000 80/50 38234VA0090117 Silver
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 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	\$8,550	\$8,150	\$8,550	\$8,150	\$8,550	\$8,150
In-Network PCP OV Copay	\$30	\$30	\$30	\$30	\$30	\$30
Members as of 3/1/2020	89		0		3	
Pct of Statewide Membership	56.6%		0.0%		1.9%	
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 1/1/2020	\$552.02		\$515.87		\$586.52	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$2.62	0.5%	\$2.45	0.5%	\$2.79	0.5%
Trend	\$66.70	12.1%	\$62.33	12.1%	\$70.87	12.1%
Risk Adjustment	\$54.16	9.8%	\$54.16	10.5%	\$54.16	9.2%
HIT Removal	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	\$6.84	1.2%	\$6.39	1.2%	\$7.27	1.2%
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	-\$35.63	-6.5%	-\$36.85	-7.1%	-\$34.47	-5.9%
Other Change 5		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$646.71	17.2%	\$604.36	17.2%	\$687.13	17.2%

*Rates are for a non-tobacco user

Aetna Life 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	Aetna Life Insurance Company		
NAIC Number	60054		
Product(s)	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 14. 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 15. Geographic Factors

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%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	17.0%
Carrier Calculated Avg Total Rate Change	17.1%
Carrier Calculated Avg Adult Rate Change	17.1%
Carrier Calculated Avg Child Rate Change	17.1%

CareFirst BlueChoice – Individual

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	BlueChoice HMO Gold \$1,750		BlueChoice HMO HSA Silver \$3,000		BlueChoice HMO Young Adult \$8,550	
HIOS Plan ID	10207VA0380003		10207VA0380005		10207VA0380007	
Metallic Tier	Gold		Silver		Catastrophic	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$1,750	\$1,750	\$3,000	\$3,000	\$8,550	\$8,150
In-Network Member Coinsurance	0%	0%	0%	0%	0%	0%
In-Network Individual OOP	\$6,650	\$6,650	\$6,650	\$6,650	\$8,550	\$8,150
In-Network PCP OV Copay	\$0	\$0	\$30	\$30	\$0	\$0
Members as of 3/1/2020	2,403		926		248	
Pct of Statewide Membership	43.7%		16.8%		4.5%	
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 1/1/2020	\$646.78		\$585.58		\$237.66	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$146.03	22.6%	\$132.21	22.6%	\$53.66	22.6%
Trend	\$88.34	13.7%	\$79.98	13.7%	\$32.46	13.7%
Risk Adjustment	-\$18.18	-2.8%	-\$11.71	-2.0%	-\$36.06	-15.2%
HIT Removal	-\$24.52	-3.8%	-\$22.25	-3.8%	-\$9.06	-3.8%
Other Non-Benefit Expenses	-\$4.11	-0.6%	-\$4.85	-0.8%	\$6.47	2.7%
Benefit Changes	\$0.00	0.0%	\$0.00	0.0%	-\$5.52	-2.3%
Base Period Index Rate	-\$262.07	-40.5%	-\$240.12	-41.0%	-\$40.03	-16.8%
Benefit Leveraging	\$2.02	0.3%	-\$8.48	-1.4%	-\$5.16	-2.2%
Age Calibration	-\$5.07	-0.8%	-\$4.54	-0.8%	-\$2.11	-0.9%
"Other"	\$4.54	0.7%	\$9.32	1.6%	\$6.97	2.9%
		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$573.76	-11.3%	\$515.14	-12.0%	\$239.28	0.7%

*Rates are for a non-tobacco user

CareFirst BlueChoice – Individual

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	1/1/2021		

Table 14. 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	1.067	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 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	1.000	1.000	0.0%
Area 2 (Charlottesville)	1.000	1.000	0.0%
Area 3 (Danville)	1.000	1.000	0.0%
Area 4 (Harrisonburg)	1.000	1.000	0.0%
Area 5 (Bristol)	1.000	1.000	0.0%
Area 6 (Lynchburg)	1.000	1.000	0.0%
Area 7 (Richmond)	1.000	1.000	0.0%
Area 8 (Roanoke)	1.000	1.000	0.0%
Area 9 (Tidewater)	1.000	1.000	0.0%
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%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-10.7%
Carrier Calculated Avg Total Rate Change	-9.7%
Carrier Calculated Avg Adult Rate Change	-9.7%
Carrier Calculated Avg Child Rate Change	-9.7%

GHMSI – Individual

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	BluePreferred PPO Gold \$1,750 40308VA0240005 Gold		BluePreferred PPO HSA Silver \$3,000 40308VA0240008 Silver		BluePreferred PPO HSA Silver \$3,000 40308VA0240006 Silver	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 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 3/1/2020	451		139		135	
Pct of Statewide Membership	39.9%		12.3%		12.0%	
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 1/1/2020	\$1,283.84		\$1,301.26		\$1,228.85	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$901.97	70.3%	\$914.21	70.3%	\$863.34	70.3%
Trend	\$262.32	20.4%	\$265.88	20.4%	\$251.09	20.4%
Risk Adjustment	-\$325.51	-25.4%	-\$326.66	-25.1%	-\$316.62	-25.8%
HIT Removal	-\$48.47	-3.8%	-\$49.04	-3.8%	-\$46.39	-3.8%
Other Non-Benefit Expenses	\$8.55	0.7%	\$8.37	0.6%	\$8.60	0.7%
Benefit Changes	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Base Period Index Rate	-\$642.32	-50.0%	-\$646.54	-49.7%	-\$615.01	-50.0%
Benefit Leveraging	\$35.87	2.8%	\$29.75	2.3%	\$43.41	3.5%
Age Calibration	-\$31.66	-2.5%	-\$32.05	-2.5%	-\$30.36	-2.5%
"Other"	-\$93.58	-7.3%	-\$97.69	-7.5%	-\$91.09	-7.4%
		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$1,351.00	5.2%	\$1,367.49	5.1%	\$1,295.82	5.4%

*Rates are for a non-tobacco user

GHMSI – Individual

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	1/1/2021		

Table 14. 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 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	1.000	1.000	0.0%
Area 2 (Charlottesville)	1.000	1.000	0.0%
Area 3 (Danville)	1.000	1.000	0.0%
Area 4 (Harrisonburg)	1.000	1.000	0.0%
Area 5 (Bristol)	1.000	1.000	0.0%
Area 6 (Lynchburg)	1.000	1.000	0.0%
Area 7 (Richmond)	1.000	1.000	0.0%
Area 8 (Roanoke)	1.000	1.000	0.0%
Area 9 (Tidewater)	1.000	1.000	0.0%
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%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	5.2%
Carrier Calculated Avg Total Rate Change	5.2%
Carrier Calculated Avg Adult Rate Change	5.2%
Carrier Calculated Avg Child Rate Change	5.2%

GHMSI – Small Group

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	BluePreferred PPO Platinum 0 40308VA0270009 Platinum		BluePreferred PPO Platinum 0 40308VA0270009 Platinum		BluePreferred PPO HSA/HRA Silver 40308VA0270029 Platinum	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$0	\$0	\$0	\$0	\$2,100	\$2,000
In-Network Member Coinsurance	100%	100%	100%	100%	70%	70%
In-Network Individual OOP	\$1,600	\$1,550	\$1,600	\$1,550	\$6,900	\$6,750
In-Network PCP OV Copay	\$10	\$10	\$10	\$10	\$0	\$0
Members as of 3/1/2020	2,580		2,580		0	
Pct of Statewide Membership	18.1%		18.1%		0.0%	
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 1/1/2020	\$643.83		\$643.83		\$423.72	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	-\$1.34	-0.2%	-\$1.34	-0.2%	-\$0.88	-0.2%
Trend	\$64.18	10.0%	\$64.18	10.0%	\$42.24	10.0%
Risk Adjustment	-\$1.87	-0.3%	-\$1.87	-0.3%	-\$4.67	-1.1%
HIT Removal	-\$21.47	-3.3%	-\$21.47	-3.3%	-\$14.13	-3.3%
Other Non-Benefit Expenses	\$1.02	0.2%	\$1.02	0.2%	\$7.55	1.8%
Benefit Changes	\$4.37	0.7%	\$4.37	0.7%	\$27.45	6.5%
Base Period Index Rate	-\$19.83	-3.1%	-\$19.83	-3.1%	-\$13.05	-3.1%
Benefit Leveraging	\$1.75	0.3%	\$1.75	0.3%	\$34.62	8.2%
Age Calibration	-\$14.59	-2.3%	-\$14.59	-2.3%	-\$10.16	-2.4%
"Other"	\$8.66	1.3%	\$8.66	1.3%	-\$29.78	-7.0%
		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$664.71	3.2%	\$664.71	3.2%	\$462.90	9.2%

*Rates are for a non-tobacco user

GHMSI – Small Group

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	1/1/2021		

Table 14. 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	0.000	N/A
19	0.941	1.000	0.000	N/A
20	0.970	1.000	0.000	N/A
21	1.000	0.000	0.000	N/A
22	1.000	0.000	0.000	N/A
23	1.000	0.000	0.000	N/A
24	1.000	0.000	0.000	N/A
25	1.004	0.000	0.000	N/A
26	1.024	0.000	0.000	N/A
27	1.048	0.000	0.000	N/A
28	1.087	0.000	0.000	N/A
29	1.119	0.000	0.000	N/A
30	1.135	0.000	0.000	N/A
31	1.159	0.000	0.000	N/A
32	1.183	0.000	0.000	N/A
33	1.198	0.000	0.000	N/A
34	1.214	0.000	0.000	N/A
35	1.222	0.000	0.000	N/A
36	1.230	0.000	0.000	N/A
37	1.238	0.000	0.000	N/A
38	1.246	0.000	0.000	N/A
39	1.262	0.000	0.000	N/A
40	1.278	0.000	0.000	N/A
41	1.302	0.000	0.000	N/A
42	1.325	0.000	0.000	N/A
43	1.357	0.000	0.000	N/A
44	1.397	0.000	0.000	N/A
45	1.444	0.000	0.000	N/A
46	1.500	0.000	0.000	N/A
47	1.563	0.000	0.000	N/A
48	1.635	0.000	0.000	N/A
49	1.706	0.000	0.000	N/A
50	1.786	0.000	0.000	N/A
51	1.865	0.000	0.000	N/A
52	1.952	0.000	0.000	N/A
53	2.040	0.000	0.000	N/A
54	2.135	0.000	0.000	N/A
55	2.230	0.000	0.000	N/A
56	2.333	0.000	0.000	N/A
57	2.437	0.000	0.000	N/A
58	2.548	0.000	0.000	N/A
59	2.603	0.000	0.000	N/A
60	2.714	0.000	0.000	N/A
61	2.810	0.000	0.000	N/A
62	2.873	0.000	0.000	N/A
63	2.952	0.000	0.000	N/A
64+	3.000	0.000	0.000	N/A

*VA follows the federal default age curve.

Table 15. Geographic Factors

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

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	4.1%
Carrier Calculated Avg Total Rate Change	4.1%
Carrier Calculated Avg Adult Rate Change	4.1%
Carrier Calculated Avg Child Rate Change	4.1%

Innovation Health 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	Innovation Health Insurance Company		
NAIC Number	15097		
Product(s)	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
VA IH Gold Designated PCP PPO 1000 12028VA0040075 Gold	VA IH Bronze PPO 6000 80/50 E 12028VA0040073 Bronze	VA IH Gold Designated PCP PPO 2000 12028VA0040076 Gold				
Plan Design Information						
In-Network Individual Deductible	\$1,000	\$1,000	\$6,000	\$6,000	\$2,000	\$2,500
In-Network Member Coinsurance	80%	80%	80%	80%	90%	90%
In-Network Individual OOP	\$7,500	\$7,500	\$8,550	\$7,900	\$3,500	\$3,500
In-Network PCP OV Copay	id: \$5; Non-Designid: \$5; Non-Designid: \$5; Non-Designid: \$5	id: \$5; Non-Designid: \$5; Non-Designid: \$5	\$25	\$0	id: \$15; Non-Designid: \$30; Non-Designid: \$30	id: \$15; Non-Designid: \$30; Non-Designid: \$30
Members as of 3/1/2020	311		135		203	
Pct of Statewide Membership	28.4%		12.3%		18.5%	
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 1/1/2020	\$604.05		\$389.55		\$500.87	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$2.87	0.5%	\$1.85	0.5%	\$2.38	0.5%
Trend	\$60.80	10.1%	\$39.21	10.1%	\$50.41	10.1%
Risk Adjustment	-\$26.06	-4.3%	-\$26.06	-6.7%	-\$26.06	-5.2%
HIT Removal	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	\$13.80	2.3%	-\$15.03	-3.9%	\$33.22	6.6%
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	-\$90.66	-15.0%	-\$55.55	-14.3%	-\$57.40	-11.5%
Other Change 5		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$564.80	-6.5%	\$333.97	-14.3%	\$503.42	0.5%

*Rates are for a non-tobacco user

Innovation Health 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	Innovation Health Insurance Company		
NAIC Number	15097		
Product[s]	PPO		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 14. 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 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	0.000	0.000	N/A
Area 2 (Charlottesville)	0.000	0.000	N/A
Area 3 (Danville)	0.000	0.000	N/A
Area 4 (Harrisonburg)	0.000	0.000	N/A
Area 5 (Bristol)	0.000	0.000	N/A
Area 6 (Lynchburg)	0.000	0.000	N/A
Area 7 (Richmond)	0.000	0.000	N/A
Area 8 (Roanoke)	0.000	0.000	N/A
Area 9 (Tidewater)	0.000	0.000	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%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

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

Innovation Health Plan – 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	Innovation Health Plan, Inc.		
NAIC Number	15098		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	VA IH Silver Open HMO 4000 80% E	VA IH Silver Open HMO 4000 80% E	VA IH Gold Open HMO 1000 100% E	VA IH Gold Open HMO 1000 100% E	VA IH Silver Open HMO 4000 80% E	VA IH Silver Open HMO 4000 80% E
	86443VA0010131 Silver		86443VA0010136 Gold		86443VA0010131 Silver	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$4,000	\$4,000	\$1,000	\$0	\$4,000	\$4,000
In-Network Member Coinsurance	80%	80%	100%	100%	80%	80%
In-Network Individual OOP	\$7,900	\$7,900	\$7,350	\$5,600	\$7,900	\$7,900
In-Network PCP OV Copay	\$35	\$35	\$30	\$35	\$35	\$35
Members as of 3/1/2020	245		29		245	
Pct of Statewide Membership	78.6%		9.2%		78.6%	
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 1/1/2020	\$464.39		\$593.52		\$464.39	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$2.21	0.5%	\$2.82	0.5%	\$2.21	0.5%
Trend	\$46.74	10.1%	\$59.74	10.1%	\$46.74	10.1%
Risk Adjustment	\$1.45	0.3%	\$1.45	0.2%	\$1.45	0.3%
HIT Removal	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Non-Benefit Expenses	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Benefit Changes	\$4.81	1.0%	-\$2.14	-0.4%	\$4.81	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	-\$55.30	-11.9%	-\$103.50	-17.4%	-\$55.30	-11.9%
Other Change 5		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$464.31	0.0%	\$551.89	-7.0%	\$464.31	0.0%

*Rates are for a non-tobacco user

Innovation Health Plan – 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	Innovation Health Plan, Inc.		
NAIC Number	15098		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 14. 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 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	0.000	0.000	N/A
Area 2 (Charlottesville)	0.000	0.000	N/A
Area 3 (Danville)	0.000	0.000	N/A
Area 4 (Harrisonburg)	0.000	0.000	N/A
Area 5 (Bristol)	0.000	0.000	N/A
Area 6 (Lynchburg)	0.000	0.000	N/A
Area 7 (Richmond)	0.000	0.000	N/A
Area 8 (Roanoke)	0.000	0.000	N/A
Area 9 (Tidewater)	0.000	0.000	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%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-2.1%
Carrier Calculated Avg Total Rate Change	-2.1%
Carrier Calculated Avg Adult Rate Change	-2.1%
Carrier Calculated Avg Child Rate Change	-2.1%

Kaiser Foundation – Individual

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
Plan Name	KP VA Bronze 6000/55/Vision		KP VA Catastrophic 8550/0/Vision		KP VA Silver 5000/40/Vision	
HIOS Plan ID	95185VA0530006		95185VA0530009		95185VA0530013	
Metallic Tier	Bronze		Catastrophic		Silver	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$6,000	\$5,500	\$8,550	\$8,150	\$5,000	\$6,000
In-Network Member Coinsurance	35%	35%	0%	0%	35%	35%
In-Network Individual OOP	\$8,500	\$8,150	\$8,550	\$8,150	\$8,500	\$8,150
In-Network POP OOP Copay	The \$956 after deductible visits, then no copay for ages 18-64		The \$956 after deductible visits, then no copay for ages 18-64		No copay for ages 18-64	
Members as of 3/1/2020	10,899		289		5,823	
Pct of Statewide Membership	36.1%		1.0%		19.3%	
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 1/1/2020	\$494.48		\$359.27		\$594.77	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$13.81	2.8%	\$10.04	2.8%	\$16.62	2.8%
Trend	\$11.89	2.4%	\$8.64	2.4%	\$14.30	2.4%
Risk Adjustment	-\$91.15	-18.4%	-\$66.23	-18.4%	-\$109.64	-18.4%
HIT Removal	-\$5.35	-1.1%	-\$3.88	-1.1%	-\$6.43	-1.1%
Other Non-Benefit Expenses	\$8.98	1.8%	\$6.52	1.8%	\$10.80	1.8%
Benefit Changes	-\$14.86	-3.0%	-\$3.95	-1.1%	\$16.11	2.7%
Other Change 1		0.0%	-\$20.11	-5.6%		0.0%
Other Change 2		0.0%		0.0%		0.0%
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%
Above Calculated Rate on 1/1/2021	\$417.81	-15.5%	\$290.30	-19.2%	\$536.52	-9.8%

*Rates are for a non-tobacco user

Kaiser Foundation – Individual

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	1/1/2021		

Table 14. 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	1.200	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 15. Geographic Factors

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%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-13.0%
Carrier Calculated Avg Total Rate Change	-13.0%
Carrier Calculated Avg Adult Rate Change	-13.0%
Carrier Calculated Avg Child Rate Change	-13.0%

Kaiser Foundation – 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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	KP VA Gold 0/20/Vision		KP VA Bronze 7000/50/Vision		KP VA Silver 4000/0%/HSA/Vision	
HIOS Plan ID	95185VA0500004		95185VA0500012		95185VA0500016	
Metallic Tier	Gold		Bronze		Silver	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$0	\$0	\$7,000	\$6,000	\$4,000	\$4,000
In-Network Member Coinsurance	0%	0%	0%	0%	0%	0%
In-Network Individual OOP	\$6,000	\$6,000	\$8,550	\$8,150	\$5,250	\$5,000
In-Network PCP OV Copay	20(\$0 for ages < 5	20(\$0 for ages < 5	50(\$0 for ages < 5	50(\$0 for ages < 5	charge after deduct	charge after deductibl
Members as of 3/1/2020	2,663		174		235	
Pct of Statewide Membership	16.6%		1.1%		1.5%	
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 1/1/2020	\$391.62		\$316.83		\$304.64	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$14.81	3.8%	\$11.99	3.8%	\$11.52	3.8%
Trend	\$8.94	2.3%	\$7.23	2.3%	\$6.96	2.3%
Risk Adjustment	-\$28.04	-7.2%	-\$22.69	-7.2%	-\$21.82	-7.2%
HIT Removal	-\$3.90	-1.0%	-\$3.15	-1.0%	-\$3.03	-1.0%
Other Non-Benefit Expenses	-\$7.80	-2.0%	-\$6.31	-2.0%	-\$6.07	-2.0%
Benefit Changes	\$0.00	0.0%	-\$3.54	-1.1%	-\$0.80	-0.3%
Other Change 1	\$25.68	6.6%	\$11.21	3.5%	\$28.13	9.2%
Other Change 2		0.0%		0.0%		0.0%
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%
Above Calculated Rate on 1/1/2021	\$401.32	2.5%	\$311.57	-1.7%	\$319.53	4.9%

*Rates are for a non-tobacco user

Kaiser Foundation – 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	93639		
Product(s)	HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 14. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.763			
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	1.323	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	1.633	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	2.133	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 15. Geographic Factors

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%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	1.0%
Carrier Calculated Avg Total Rate Change	1.0%
Carrier Calculated Avg Adult Rate Change	1.0%
Carrier Calculated Avg Child Rate Change	1.0%

Optima Health Insurance Company. – Individual

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	Individual		
Rate Effective Date	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
OptimaFit Bronze 7200 30% Plus 89242VA0790005 Bronze	OptimaFit Bronze 7200 30% Plus 89242VA0790005 Bronze		OptimaFit Bronze 7200 30% Plus 89242VA0790005 Bronze		OptimaFit Bronze 7200 30% Plus 89242VA0790005 Bronze	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$7,200	\$6,000	\$7,200	\$6,000	\$7,200	\$6,000
In-Network Member Coinsurance	30%	30%	30%	30%	30%	30%
In-Network Individual OOP	\$8,550	\$8,150	\$8,550	\$8,150	\$8,550	\$8,150
In-Network PCP OV Copay	\$0	\$0	\$0	\$0	\$0	\$0
Members as of 3/1/2020	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 1/1/2020	\$523.80		\$523.80		\$523.80	
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	\$47.22	9.0%	\$47.22	9.0%	\$47.22	9.0%
Risk Adjustment	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
HIT Removal	-\$12.89	-2.5%	-\$12.89	-2.5%	-\$12.89	-2.5%
Other Non-Benefit Expenses	-\$4.40	-0.8%	-\$4.40	-0.8%	-\$4.40	-0.8%
Benefit Changes	-\$16.60	-3.2%	-\$16.60	-3.2%	-\$16.60	-3.2%
Area Factor Revisions	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
COVID-19 Adjustment	\$4.69	0.9%	\$4.69	0.9%	\$4.69	0.9%
Other Changes	-\$29.68	-5.7%	-\$29.68	-5.7%	-\$29.68	-5.7%
		0.0%		0.0%		0.0%
		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$512.14	-2.2%	\$512.14	-2.2%	\$512.14	-2.2%

*Rates are for a non-tobacco user

Optima Health Insurance Company. – Individual

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	70713		
Product[s]	PFO		
Market Segment	Individual		
Rate Effective Date	1/1/2021		

Table 14. Age and Tobacco Factors

Age Band	Age Factor	Proposed Tobacco Factor	Current Tobacco Factor	Factor Change
0-14	0.763			
15	0.833			
16	0.859			
17	0.885			
18	0.913	1.000	1.200	-16.7%
19	0.941	1.000	1.200	-16.7%
20	0.970	1.000	1.200	-16.7%
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	1.133	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	1.633	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	2.133	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 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*
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)	N/A	N/A
Area 8 (Roanoke)	N/A	N/A
Area 9 (Tidewater)	1.000	1.000
Area 10 (Northern VA)	N/A	N/A
Area 11 (Winchester)	N/A	N/A
Area 12 (Non-MSA)	N/A	N/A

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	N/A
Carrier Calculated Avg Total Rate Change	-2.2%
Carrier Calculated Avg Adult Rate Change	-2.2%
Carrier Calculated Avg Child Rate Change	-2.2%

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
Optima Plus Gold 2000/25/30% Rx 89242VA0800010 Gold			Optima Plus Platinum 15/30 Direct 89242VA0800042 Gold		Optima Plus Equity Silver 3000/20% 89242VA0800036 Bronze	
Plan Design Information						
In-Network Individual Deductible	\$2,000	\$2,000	\$0	\$0	\$3,000	\$3,000
In-Network Member Coinsurance	30%/50%	30%/50%	\$15/30	\$15/30	20%/40%	20%/40%
In-Network Individual OOP	\$4,500	\$4,500	\$4,500	\$4,500	\$6,500	\$6,500
In-Network PCP OV Copay	\$25/50	\$25/50	\$15/30	\$15/30	20%/40%	20%/40%
Members as of 3/1/2020	308		0		37	
Pct of Statewide Membership	21.7%		0.0%		2.6%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 9 (Tidewater)		Area 6 (Lynchburg)		Area 9 (Tidewater)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2020	\$481.46		\$668.85		\$419.51	
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	\$33.38	6.9%	\$46.37	6.9%	\$29.08	6.9%
Risk Adjustment	-\$26.04	-5.4%	-\$29.61	-4.4%	-\$23.08	-5.5%
HIT Removal	-\$18.05	-3.7%	-\$20.05	-3.0%	-\$16.30	-3.9%
Other Non-Benefit Expenses	\$9.13	1.9%	-\$5.20	-0.8%	\$17.37	4.1%
Benefit Changes	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Region Factor	\$6.55	1.4%	-\$56.82	-8.5%	\$5.71	1.4%
Network Effect	\$11.37	2.4%	\$12.93	1.9%	\$10.08	2.4%
Benefit Relativity Model Update	\$52.86	11.0%	\$19.56	2.9%	\$45.81	10.9%
COVID 19	\$4.81	1.0%	\$6.69	1.0%	\$4.20	1.0%
Other	\$14.52	3.0%	\$5.38	0.8%	\$12.85	3.1%
Above Calculated Rate on 1/1/2021	\$570.00	18.4%	\$648.09	-3.1%	\$505.24	20.4%

*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	1/1/2021		

Table 14. 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	1.067	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 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	0.979	1.036	-5.5%
Area 2 (Charlottesville)	0.924	0.953	-3.0%
Area 3 (Danville)	0.979	1.036	-5.5%
Area 4 (Harrisonburg)	0.980	1.012	-3.1%
Area 5 (Bristol)	0.979	1.036	-5.5%
Area 6 (Lynchburg)	0.879	0.961	-8.5%
Area 7 (Richmond)	0.999	1.039	-3.9%
Area 8 (Roanoke)	0.979	1.036	-5.5%
Area 9 (Tidewater)	0.929	0.917	1.4%
Area 10 (Northern VA)	0.979	1.028	-4.8%
Area 11 (Winchester)	0.979	1.036	-5.5%
Area 12 (Non-MSA)	0.979	1.036	-5.5%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	9.6%
Carrier Calculated Avg Total Rate Change	9.6%
Carrier Calculated Avg Adult Rate Change	9.6%
Carrier Calculated Avg Child Rate Change	9.6%

Optimum Choice – Individual

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		
Market Segment	Individual		
Rate Effective Date	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
Plan Design Information						
In-Network Individual Deductible						
In-Network Member Coinsurance						
In-Network Individual OOP						
In-Network PCP OV Copay						
Members as of 3/1/2020						
Pct of Statewide Membership	N/A		N/A		N/A	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison						
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2020						
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 Removal		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
Above Calculated Rate on 1/1/2021	\$0.00	N/A	\$0.00	N/A	\$0.00	N/A

*Rates are for a non-tobacco user

Optimum Choice – Individual

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		
Market Segment	Individual		
Rate Effective Date	1/1/2021		

Table 14. 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	N/A
19	0.941	1.000	N/A	N/A
20	0.970	1.000	N/A	N/A
21	1.000	1.050	N/A	N/A
22	1.000	1.050	N/A	N/A
23	1.000	1.050	N/A	N/A
24	1.000	1.050	N/A	N/A
25	1.004	1.050	N/A	N/A
26	1.024	1.050	N/A	N/A
27	1.048	1.050	N/A	N/A
28	1.087	1.050	N/A	N/A
29	1.119	1.050	N/A	N/A
30	1.135	1.100	N/A	N/A
31	1.159	1.100	N/A	N/A
32	1.183	1.100	N/A	N/A
33	1.198	1.100	N/A	N/A
34	1.214	1.100	N/A	N/A
35	1.222	1.100	N/A	N/A
36	1.230	1.100	N/A	N/A
37	1.238	1.100	N/A	N/A
38	1.246	1.100	N/A	N/A
39	1.262	1.100	N/A	N/A
40	1.278	1.100	N/A	N/A
41	1.302	1.100	N/A	N/A
42	1.325	1.100	N/A	N/A
43	1.357	1.100	N/A	N/A
44	1.397	1.100	N/A	N/A
45	1.444	1.100	N/A	N/A
46	1.500	1.100	N/A	N/A
47	1.563	1.100	N/A	N/A
48	1.635	1.100	N/A	N/A
49	1.706	1.100	N/A	N/A
50	1.786	1.200	N/A	N/A
51	1.865	1.200	N/A	N/A
52	1.952	1.200	N/A	N/A
53	2.040	1.200	N/A	N/A
54	2.135	1.200	N/A	N/A
55	2.230	1.200	N/A	N/A
56	2.333	1.200	N/A	N/A
57	2.437	1.200	N/A	N/A
58	2.548	1.200	N/A	N/A
59	2.603	1.200	N/A	N/A
60	2.714	1.200	N/A	N/A
61	2.810	1.200	N/A	N/A
62	2.873	1.200	N/A	N/A
63	2.952	1.200	N/A	N/A
64+	3.000	1.200	N/A	N/A

*VA follows the federal default age curve.

Table 15. Geographic Factors

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)	0.859	N/A	N/A
Area 11 (Winchester)	0.938	N/A	N/A
Area 12 (Non-MSA)	N/A	N/A	N/A

*Enter "N/A" if no plans are offered in the rating area

Table 16. 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

Optimum Choice – 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	Optimum Choice Inc.		
NAIC Number	96940		
Product(s)	HMO, POS		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	UHC OCI Gold 2000 24251VA0010084 Gold		UHC OCI Preferred Platinum 0 24251VA0020061 Platinum		UHC OCI Silver 5000-2 24251VA0010089 Silver	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$2,000	\$1,750	\$0	\$0	\$5,000	\$5,000
In-Network Member Coinsurance	80%	80%	100%	100%	100%	100%
In-Network Individual OOP	\$6,000	\$5,000	\$3,500	\$5,000	\$8,550	\$7,900
In-Network PCP OV Copay	\$30	\$30	\$15	\$15	\$45	\$45
Members as of 3/1/2020	924		344		277	
Pct of Statewide Membership	18.1%		6.7%		5.4%	
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 1/1/2020	\$434.28		\$635.47		\$336.23	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	-\$0.43	-0.1%	-\$0.63	-0.1%	-\$0.34	-0.1%
Trend	\$35.18	8.1%	\$51.47	8.1%	\$27.23	8.1%
Risk Adjustment	-\$5.99	-1.4%	-\$8.76	-1.4%	-\$4.63	-1.4%
HIT Removal	-\$10.26	-2.4%	-\$15.02	-2.4%	-\$7.94	-2.4%
Other Non-Benefit Expenses	-\$0.25	-0.1%	-\$0.37	-0.1%	-\$0.19	-0.1%
Benefit Changes	\$24.94	5.7%	-\$2.81	-0.4%	\$42.54	12.7%
Resloping Offset	-\$28.23	-6.5%	-\$41.31	-6.5%	-\$21.85	-6.5%
Other Change 2		0.0%		0.0%		0.0%
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%
Above Calculated Rate on 1/1/2021	\$449.23	3.4%	\$618.05	-2.7%	\$371.04	10.4%

*Rates are for a non-tobacco user

Optimum Choice – 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	Optimum Choice Inc.		
NAIC Number	96940		
Product(s)	HMO, POS		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 14. 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	1.067	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 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	1.040	1.070	-2.8%
Area 2 (Charlottesville)	0.945	1.027	-8.0%
Area 3 (Danville)	1.040	1.070	-2.8%
Area 4 (Harrisonburg)	1.040	1.070	-2.8%
Area 5 (Bristol)	1.040	1.070	-2.8%
Area 6 (Lynchburg)	1.040	1.091	-4.7%
Area 7 (Richmond)	1.017	0.987	3.0%
Area 8 (Roanoke)	1.010	1.047	-3.5%
Area 9 (Tidewater)	0.954	0.983	-3.0%
Area 10 (Northern VA)	0.893	0.893	0.0%
Area 11 (Winchester)	0.918	0.940	-2.3%
Area 12 (Non-MSA)	0.975	0.995	-2.0%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	5.4%
Carrier Calculated Avg Total Rate Change	5.8%
Carrier Calculated Avg Adult Rate Change	5.8%
Carrier Calculated Avg Child Rate Change	5.8%

Oscar Insurance Company - Individual

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
Oscar Bronze Classic Next 25922VA0010005 Bronze			Oscar Gold Classic 25922VA0010013 Gold		Oscar Silver Classic Next 25922VA0010009 Silver	
In-Network Individual Deductible	\$0	\$0	\$2,500	\$1,700	\$6,000	\$7,000
In-Network Member Coinsurance	50%	50%	30%	20%	40%	40%
In-Network Individual OOP	\$8,550	\$8,150	\$6,000	\$8,150	\$8,000	\$8,150
In-Network PCP OV Copay	\$35	\$50	\$30	\$25	\$30	\$25
Members as of 3/1/2020	554		24		92	
Pct of Statewide Membership	72.7%		3.1%		12.1%	
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 1/1/2020	\$456.15		\$533.76		\$520.31	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	\$0.91	0.2%	\$1.07	0.2%	\$1.04	0.2%
Trend	\$19.43	4.3%	\$22.73	4.3%	\$22.16	4.3%
Risk Adjustment	\$2.74	0.6%	\$3.20	0.6%	\$3.12	0.6%
HIT Removal	-\$4.11	-0.9%	-\$4.80	-0.9%	-\$4.68	-0.9%
Other Non-Benefit Expenses	-\$2.74	-0.6%	-\$3.20	-0.6%	-\$3.12	-0.6%
Benefit Changes	-\$1.82	-0.4%	-\$8.01	-1.5%	\$14.57	2.8%
Methodological/AV Development	-\$4.47	-1.0%	-\$37.36	-7.0%	\$3.81	0.7%
Other Change 2		0.0%		0.0%		0.0%
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%
Above Calculated Rate on 1/1/2021	\$466.09	2.2%	\$507.39	-4.9%	\$557.20	7.1%

*Rates are for a non-tobacco user

Oscar Insurance Company - Individual

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	1/1/2021		

Table 14. 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	1.050	1.050	0.0%
26	1.024	1.050	1.050	0.0%
27	1.048	1.050	1.050	0.0%
28	1.087	1.050	1.050	0.0%
29	1.119	1.050	1.050	0.0%
30	1.135	1.050	1.050	0.0%
31	1.159	1.050	1.050	0.0%
32	1.183	1.050	1.050	0.0%
33	1.198	1.050	1.050	0.0%
34	1.214	1.050	1.050	0.0%
35	1.222	1.090	1.090	0.0%
36	1.230	1.090	1.090	0.0%
37	1.238	1.090	1.090	0.0%
38	1.246	1.090	1.090	0.0%
39	1.262	1.090	1.090	0.0%
40	1.278	1.090	1.090	0.0%
41	1.302	1.090	1.090	0.0%
42	1.325	1.090	1.090	0.0%
43	1.357	1.090	1.090	0.0%
44	1.397	1.090	1.090	0.0%
45	1.444	1.090	1.090	0.0%
46	1.500	1.090	1.090	0.0%
47	1.563	1.090	1.090	0.0%
48	1.635	1.090	1.090	0.0%
49	1.706	1.090	1.090	0.0%
50	1.786	1.090	1.090	0.0%
51	1.865	1.090	1.090	0.0%
52	1.952	1.090	1.090	0.0%
53	2.040	1.090	1.090	0.0%
54	2.135	1.090	1.090	0.0%
55	2.230	1.125	1.125	0.0%
56	2.333	1.125	1.125	0.0%
57	2.437	1.125	1.125	0.0%
58	2.548	1.125	1.125	0.0%
59	2.603	1.125	1.125	0.0%
60	2.714	1.125	1.125	0.0%
61	2.810	1.125	1.125	0.0%
62	2.873	1.125	1.125	0.0%
63	2.952	1.125	1.125	0.0%
64+	3.000	1.125	1.125	0.0%

*VA follows the federal default age curve.

Table 15. Geographic Factors

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

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	2.2%
Carrier Calculated Avg Total Rate Change	9.9%
Carrier Calculated Avg Adult Rate Change	9.9%
Carrier Calculated Avg Child Rate Change	9.9%

Piedmont Community Healthcare HMO – Individual

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	Piedmont Bronze 6000		Piedmont Bronze 6000		Piedmont Bronze 8300	
HIOS Plan ID	37204VA0080003		37204VA0080003		37204VA0080004	
Metallic Tier	Bronze		Bronze		Bronze	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$6,000	\$6,500	\$6,000	\$6,500	\$8,300	\$7,900
In-Network Member Coinsurance	30%	30%	30%	30%	30%	30%
In-Network Individual OOP	\$8,550	\$8,150	\$8,550	\$8,150	\$8,550	\$8,150
In-Network PCP OV Copay	\$35	\$40	\$35	\$40	N/A	N/A
Members as of 3/1/2020	2,141		2,141		206	
Pct of Statewide Membership	43.2%		43.2%		4.2%	
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 1/1/2020	\$417.38		\$417.38		\$402.75	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	-\$29.95	-7.2%	-\$29.95	-7.2%	-\$28.90	-7.2%
Trend	\$7.83	1.9%	\$7.83	1.9%	\$7.56	1.9%
Risk Adjustment	\$42.06	10.1%	\$42.06	10.1%	\$40.58	10.1%
HIT Removal	-\$10.86	-2.6%	-\$10.86	-2.6%	-\$10.48	-2.6%
Other Non-Benefit Expenses	\$24.79	5.9%	\$24.79	5.9%	\$23.92	5.9%
Benefit Changes	-\$5.24	-1.3%	-\$5.24	-1.3%	\$10.79	2.7%
Network Change	\$1.27	0.3%	\$1.27	0.3%	\$1.23	0.3%
Geographic Mix	-\$22.09	-5.3%	-\$22.09	-5.3%	-\$21.32	-5.3%
Change in Profit	-\$10.45	-2.5%	-\$10.45	-2.5%	-\$10.08	-2.5%
Other Change 4	-\$16.02	-3.8%	-\$16.02	-3.8%	-\$7.71	-1.9%
Other Change 5		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$398.73	-4.5%	\$398.73	-4.5%	\$408.33	1.4%

*Rates are for a non-tobacco user

Piedmont Community Healthcare HMO – Individual

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	1/1/2021		

Table 14. 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	1.050	-4.8%
20	0.970	1.000	1.050	-4.8%
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	1.067	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	1.200	-4.2%
36	1.230	1.150	1.200	-4.2%
37	1.238	1.150	1.200	-4.2%
38	1.246	1.150	1.200	-4.2%
39	1.262	1.150	1.200	-4.2%
40	1.278	1.200	1.250	-4.0%
41	1.302	1.200	1.250	-4.0%
42	1.325	1.200	1.250	-4.0%
43	1.357	1.200	1.250	-4.0%
44	1.397	1.200	1.250	-4.0%
45	1.444	1.200	1.300	-7.7%
46	1.500	1.200	1.300	-7.7%
47	1.563	1.200	1.300	-7.7%
48	1.635	1.200	1.300	-7.7%
49	1.706	1.200	1.300	-7.7%
50	1.786	1.250	1.400	-10.7%
51	1.865	1.250	1.400	-10.7%
52	1.952	1.250	1.400	-10.7%
53	2.040	1.250	1.400	-10.7%
54	2.135	1.250	1.400	-10.7%
55	2.230	1.250	1.500	-16.7%
56	2.333	1.250	1.500	-16.7%
57	2.437	1.250	1.500	-16.7%
58	2.548	1.250	1.500	-16.7%
59	2.603	1.250	1.500	-16.7%
60	2.714	1.300	1.500	-13.3%
61	2.810	1.300	1.500	-13.3%
62	2.873	1.300	1.500	-13.3%
63	2.952	1.300	1.500	-13.3%
64+	3.000	1.300	1.500	-13.3%

*VA follows the federal default age curve.

Table 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	1.060	1.000	6.0%
Area 3 (Danville)	1.158	1.000	15.8%
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	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)	N/A	N/A	N/A
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	1.092	1.000	9.2%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

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

Piedmont Community Healthcare HMO – 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)	POS, HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 13. Plan Specific Rate Change Information

	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
Plan Name	Piedmont Choice POS Bronze HSA 6		Piedmont Silver 6500/50/75/250 HI		Piedmont Choice POS Silver HSA 45	
HIOS Plan ID	37204VA0040019		37204VA0090027		37204VA0040016	
Metallic Tier	Bronze		Silver		Silver	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$6,900	\$6,750	\$6,500	\$6,500	\$4,500	\$4,500
In-Network Member Coinsurance	0%	0%	50%	50%	0%	0%
In-Network Individual OOP	\$6,900	\$6,750	\$8,550	\$7,500	\$6,000	\$5,500
In-Network PCP OV Copay	\$0	\$0	\$50	\$50	\$0	\$0
Members as of 3/1/2020	186		23		24	
Pct of Statewide Membership	13.9%		1.7%		1.8%	
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 1/1/2020	\$341.17		\$330.07		\$376.80	
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	\$10.93	3.2%	\$10.57	3.2%	\$12.07	3.2%
Risk Adjustment	-\$11.18	-3.3%	-\$10.82	-3.3%	-\$12.35	-3.3%
HIT Removal	-\$8.04	-2.4%	-\$7.78	-2.4%	-\$8.88	-2.4%
Other Non-Benefit Expenses	\$42.95	12.6%	\$41.55	12.6%	\$47.43	12.6%
Benefit Changes	\$2.02	0.6%	-\$28.87	-8.7%	\$3.96	1.1%
Change in Profit	-\$15.15	-4.4%	-\$14.65	-4.4%	-\$16.73	-4.4%
Other Change 2	\$2.81	0.8%	-\$12.99	-3.9%	\$3.22	0.9%
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%
Above Calculated Rate on 1/1/2021	\$365.51	7.1%	\$307.07	-7.0%	\$405.52	7.6%

*Rates are for a non-tobacco user

Piedmont Community Healthcare HMO – 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)	POS, HMO		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 14. 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 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	N/A	N/A	N/A
Area 2 (Charlottesville)	1.060	1.135	-6.6%
Area 3 (Danville)	1.150	1.172	-1.2%
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	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)	N/A	N/A	N/A
Area 11 (Winchester)	N/A	N/A	N/A
Area 12 (Non-MSA)	1.092	1.109	-1.5%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	3.3%
Carrier Calculated Avg Total Rate Change	3.0%
Carrier Calculated Avg Adult Rate Change	3.0%
Carrier Calculated Avg Child Rate Change	3.0%

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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
UHC Choice Plus Silver 3500-4 38599VA0020014 Silver			UHC Choice Platinum 0-4 38599VA0010043 Platinum		UHC Core Essential Silver 5000-2 38599VA0070007 Silver	
Plan Design Information	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
In-Network Individual Deductible	\$3,500	\$3,250	\$0	\$0	\$5,000	\$5,000
In-Network Member Coinsurance	70%	70%	100%	100%	100%	100%
In-Network Individual OOP	\$8,550	\$8,150	\$3,500	\$5,000	\$8,550	\$7,900
In-Network PCP OV Copay	\$25	\$40	\$15	\$15	\$50	\$45
Members as of 3/1/2020	1,516		115		49	
Pct of Statewide Membership	16.3%		1.2%		0.5%	
Age Used in Comparison	40		40		40	
Rating Area Used in Comparison	Area 10 (Northern VA)		Area 10 (Northern VA)		Area 7 (Richmond)	
	PMPM \$	% Change	PMPM \$	% Change	PMPM \$	% Change
Rate on 1/1/2020	\$371.57		\$649.91		\$330.27	
Individual Mandate	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
Other Morbidity	-\$0.37	-0.1%	-\$0.65	-0.1%	-\$0.33	-0.1%
Trend	\$30.10	8.1%	\$52.64	8.1%	\$26.75	8.1%
Risk Adjustment	-\$4.38	-1.2%	-\$7.67	-1.2%	-\$3.90	-1.2%
HIT Removal	-\$8.78	-2.4%	-\$15.36	-2.4%	-\$7.80	-2.4%
Other Non-Benefit Expenses	-\$0.21	-0.1%	-\$0.37	-0.1%	-\$0.19	-0.1%
Benefit Changes	\$41.20	11.1%	-\$3.40	-0.5%	\$49.50	15.0%
Reslopping Offset	-\$24.15	-6.5%	-\$42.24	-6.5%	-\$21.47	-6.5%
Area Factor Change		0.0%		0.0%	\$9.91	3.0%
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%
Above Calculated Rate on 1/1/2021	\$404.97	9.0%	\$632.86	-2.6%	\$382.75	15.9%

*Rates are for a non-tobacco user

UnitedHealthcare of the Mid-Atlantic. – 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 of the Mid-Atlantic, Inc.		
NAIC Number	95025		
Product(s)	HMO, POS		
Market Segment	Small Group		
Rate Effective Date	1/1/2021		

Table 14. 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 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	1.040	1.070	-2.8%
Area 2 (Charlottesville)	0.945	1.027	-8.0%
Area 3 (Danville)	1.040	1.070	-2.8%
Area 4 (Harrisonburg)	1.040	1.070	-2.8%
Area 5 (Bristol)	1.040	1.070	-2.8%
Area 6 (Lynchburg)	1.040	1.091	-4.7%
Area 7 (Richmond)	1.017	0.987	3.0%
Area 8 (Roanoke)	1.010	1.047	-3.5%
Area 9 (Tidewater)	0.954	0.983	-3.0%
Area 10 (Northern VA)	0.893	0.893	0.0%
Area 11 (Winchester)	0.918	0.940	-2.3%
Area 12 (Non-MSA)	0.975	0.995	-2.0%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	6.6%
Carrier Calculated Avg Total Rate Change	8.6%
Carrier Calculated Avg Adult Rate Change	8.6%
Carrier Calculated Avg Child Rate Change	8.6%

UnitedHealthcare Plan of the River Valley – 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	1/1/2021		

Table 13. Plan Specific Rate Change Information

Plan Name HIOS Plan ID Metallic Tier	Most Popular Plan		Min Rate Change Plan		Max Rate Change Plan	
	2021 Design	2020 Design	2021 Design	2020 Design	2021 Design	2020 Design
CC-AW 89498VA0020024 Silver			CB-90 89498VA0020051 Gold		CC-AV 89498VA0020291 Silver	
Plan Design Information						
In-Network Individual Deductible	\$3,500	\$3,500	\$3,500	\$2,000	\$3,000	\$3,000
In-Network Member Coinsurance	20%	20%	30%	30%	50%	50%
In-Network Individual OOP	\$8,000	\$8,000	\$5,000	\$5,000	\$7,900	\$7,900
In-Network PCP OV Copay	\$50	\$50	\$40	\$35	\$35	\$35
Members as of 3/1/2020	263		180		65	
Pct of Statewide Membership	11.4%		7.8%		2.8%	
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 1/1/2020	\$356.76		\$460.70		\$361.17	
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	\$29.61	8.3%	\$38.24	8.3%	\$29.98	8.3%
Risk Adjustment	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%
HIT Removal	-\$9.45	-2.7%	-\$12.21	-2.7%	-\$9.57	-2.7%
Other Non-Benefit Expenses	\$2.09	0.6%	\$2.70	0.6%	\$2.12	0.6%
Benefit Changes	\$0.00	0.0%	-\$24.33	-5.3%	\$0.00	0.0%
Benefit Resloping	-\$29.07	-8.1%	-\$37.55	-8.1%	-\$29.43	-8.1%
Model Relativity Change	\$43.20	12.1%	\$0.47	0.1%	\$56.81	15.7%
Other Changes	-\$10.61	-3.0%	\$13.04	2.8%	-\$11.31	-3.1%
		0.0%		0.0%		0.0%
		0.0%		0.0%		0.0%
Above Calculated Rate on 1/1/2021	\$382.52	7.2%	\$441.07	-4.3%	\$399.76	10.7%

*Rates are for a non-tobacco user

UnitedHealthcare Plan of the River Valley – 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	1/1/2021		

Table 14. 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 15. Geographic Factors

Rating Area	Proposed Area Factor*	Current Area Factor*	Factor Change
Area 1 (Blacksburg)	0.868	0.868	0.0%
Area 2 (Charlottesville)	0.868	0.868	0.0%
Area 3 (Danville)	0.868	0.868	0.0%
Area 4 (Harrisonburg)	0.868	0.868	0.0%
Area 5 (Bristol)	0.790	0.790	0.0%
Area 6 (Lynchburg)	0.868	0.868	0.0%
Area 7 (Richmond)	0.868	0.868	0.0%
Area 8 (Roanoke)	0.868	0.868	0.0%
Area 9 (Tidewater)	0.868	0.868	0.0%
Area 10 (Northern VA)	0.868	0.868	0.0%
Area 11 (Winchester)	0.868	0.868	0.0%
Area 12 (Non-MSA)	0.868	0.868	0.0%

*Enter "N/A" if no plans are offered in the rating area

Table 16. Overall Rate Change Information

Exhibit Calculated Avg Total Rate Change	-1.1%
Carrier Calculated Avg Total Rate Change	2.3%
Carrier Calculated Avg Adult Rate Change	2.3%
Carrier Calculated Avg Child Rate Change	2.3%