Company Information

	Value
Company Name:	
Group Affiliation:	
Federal EIN:	
A.M. Best Number:	
NAIC Group Code:	
NAIC Company Code:	
DBA / Marketing Name:	
HIOS Issuer ID:	
Business in the State of:	
Domiciliary State:	
Address:	
Federal Tax Exempt:	
Merge Markets - Ind/SmGrp:	
Not-For-Profit:	
MLR Reporting Year:	

Cell Keys for Parts 1 - 6:

White cells accept input from the issuer Grey cells require no data input – input will result in an upload failure Green cells require a calculation by the issuer

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		1	2	3 Health Insurance	4	5	2A	6	7	8 Health Insurance	9	10	7A	11	12	13 Health Insurance	14	15	16	17	18 Mini-Med	19	20	21 Mini-Med
Line Description	SHCE	INDIVIDUAL	Health Insurance INDIVIDUAL	INDIVIDUAL Dual Contracts	Health Insurance INDIVIDUAL Deferred PY1	Health Insurance INDIVIDUAL Deferred CY	Health Insurance INDIVIDUAL [Risk Corridors]	Health Insurance SMALL GROUP	SMALL GROUP	SMALL GROUP Dual Contracts	Health Insurance SMALL GROUP Deferred PY1	Health Insurance SMALL GROUP Deferred CY	Health Insurance SMALL GROUP	Health Insurance LARGE GROUP	LARGE GROUP	Dual Contracts	Health Insurance LARGE GROUP Deferred PY1	Health Insurance LARGE GROUP Deferred CY	Mini-Med INDIVIDUAL	Mini-Med INDIVIDUAL	INDIVIDUAL Dual Contracts	Mini-Med SMALL GROUP	Mini-Med SMALL GROUP	SMALL GROUP Dual Contracts
		Total as of 12/31/14	Total as of 3/31/15	(Included in Total as of 3/31/15)	(Add)	(Subtract)	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15	(Included in Total as of 3/31/15)	(Add)	(Subtract)	[Risk Corridors] Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15 (In	of 3/31/15)	(Add)	(Subtract)	Total as of 12/31/14	Total as of 3/31/15	(Included in Total as of 3/31/15)	Total as of 12/31/14	Total as of 3/31/15	(Included in Total as of 3/31/15)
1. Premium	1																							
1.1 Total direct premium earned 1.2 Federal high risk pools	Pt 1, Ln 1.2																							
1.3 State high risk pools	Pt 1, Ln 1.3																							
 1.4 Net assumed less ceded reinsurance premium earned (exclude amounts already reported in Line 1.1) 	Pt 1, Ln 1.9																							
 5 Other adjustments due to MLR calculations - premium 6 Risk revenue 	Pt 1, Ln 1.10 Pt 1, Ln 1.11																							
2. Claims	1																							
 2.1 Total incurred claims (MLR Form Part 2, Line 2.16) 2.2 Prescription drugs (informational only; already included in total incurred claims above) 	Pt 1, Ln 2.2																							
2.3 Pharmaceutical rebates (informational only; already excluded from total incurred claims above)	Pt 1, Ln 2.3																							
 A State stop loss, market stabilization and claim/census based assessments (informational only; already excluded from total incurred claims above) 	Pt 1, Ln 2.4																							
2.5 Net assumed less ceded claims incurred (exclude amounts already reported in	Pt 1, Ln 5.1																							
Line 2.1) 2.6 Other adjustments due to MLR calculations – claims incurred	Pt 1, Ln 5.2																							
 2.7 Rebates paid 2.8 Estimated rebates unpaid at the end of the previous MLR reporting year 	Pt 1, Ln 5.3 Pt 1, Ln 5.4																							
2.9 Estimated rebates unpaid at the end of the MLR reporting year 2.10 Fee-for-service and co-pay revenue (net of expenses)	Pt 1, Ln 5.5 Pt 1, Ln 5.6																	-						
2.11 Allowable fraud reduction expenses (MLR Form Part 2, Line 2.17) 3. Federal and State Taxes and Licensing or Regulatory Fees	Pt 1, Ln 4																					_		
3.1 Federal taxes and assessments incurred by the reporting issuer during the MLR reporting year	Pt 1, Ln 1.5																							
3.1a Federal income taxes deductible from premium in MLR calculations 3.1b Patient Centered Outcomes Research Institute (PCORI) Fee																								
3.1c Affordable Care Act section 9010 Fee 3.1d Other Federal Taxes and assessments deductible from premium																								
3.2 State insurance, premium and other taxes incurred by the reporting issuer during the MLR reporting year (deductible from premium in MLR)	Pt 1, Ln 1.6																							
calculation) 3.2a State income, excise, business, and other taxes																								
3.2b State premium taxes 3.2c Community benefit expenditures deductible from premium in MLR calculation	s Pt 1. Ln 1.6a																							
3.3 Regulatory authority licenses and fees	Pt 1, Ln 1.7																							
3.3a Federal Transitional Reinsurance Program contributions 3.3b Other Federal and State regulatory authority licenses and fees																								
4. Health Care Quality Improvement Expenses Incurred																								
4.1 Improve health outcomes 4.2 Activities to prevent hospital readmission	Pt 1, Ln 6.1 Pt 1, Ln 6.2																							
4.3 Improve patient safety and reduce medical errors 4.4 Wellness and health promotion activities	Pt 1, Ln 6.3 Pt 1, Ln 6.4																							
4.5 Health information technology expenses related to improving health care quality	Pt 1, Ln 6.5																							
4.6 Allowable Implementation ICD-10 expenses (not to exceed 0.3% of premium)	Pt 1, Ln 16a																							
5. Non-Claims Costs																								
5.1 Cost containment expenses not included in quality improvement expenses in Section 4																								
5.2 All other claims adjustment expenses 5.3 Direct sales salaries and benefits	Pt 1, Ln 8.2 Pt 1, Ln 10.1																							
5.4 Agents and brokers fees and commissions 5.5 Other taxes	Pt 1, Ln 10.2																							
5.5a Taxes and assessments (exclude amounts reported in Section 3 or Line 9) 5.5b Fines and penalties of regulatory authorities (exclude amounts reported in																								
 5.6 of the stand penalties of regulatory autointies (exclude amounts reported in Line 3.3) 5.6 Other general and administrative expenses 								<u> </u>																
 b Other general and administrative expenses 5.7 Community benefit expenditures (informational only; include amounts reported in Lines 3.2c and 5.6) 	Pt 1, Ln 10.4a																							
5.8 ICD-10 implementation expenses (informational only: include amounts reported	d Pt 1, Ln 16							<u> </u>																
in Lines 4.6 and 5.6) 6. Income from fees of uninsured plans	Pt 1, Ln 12																							
7. Other Indicators or information	la car																							
7.1 Number of policies/certificates 7.2 Number of covered lives	Pt 1 Other, Ln 1 Pt 1 Other, Ln 2																							
7.3 Number of groups 7.4 Member months	Pt 1 Other, Ln 3 Pt 1 Other, Ln 4																							
7.5 Number of life-years 8. Net investment income and other gain / (loss)	Pt 1, Ln 13																							
9. Other Federal income taxes (exclude taxes on Lines 3.1a-d)																								

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		22	23	24		27	28	29			32	33	34			37	38	39		41		
Line Description	SHCE	Mini-Med	Mini-Med	Mini-Med LARGE GROUP	25 Expat	26 Expat Expat SMALL GROUP		Expat SMALL GROUP	30 Expat	31 Expat	Expat LARGE GROUP	Expat LARGE GROUP	Expat LARGE GROUP	35 Student Health	36 Student Health	Student Health INDIVIDUAL	Student Health	Student Health	40 Government	Other Health	42 Aggregate 2% Rule	43 Jninsured Plans
Line becomption		LARGE GROUP Total as of 12/31/14	LARGE GROUP Total as of 3/31/15	Dual Contracts (Included in Total as	SMALL GROUP Total as of 12/31/14	SMALL GROUP Dual Contracts Total as of 3/31/15 (Included in Total a		Deferred CY (Subtract)	LARGE GROUP Total as of 12/31/14	LARGE GROUP Total as of 3/31/15 (Dual Contracts Included in Total as		Deferred CY (Subtract)	INDIVIDUAL Total as of 12/31/14	INDIVIDUAL Total as of 3/31/15	Dual Contracts (Included in Total as	Deferred PY1 (Add)	Deferred CY (Subtract)	Program Plans Total as of 12/31/14	Business Total as of 12/31/14	Total as of 12/31/14 To	
				of 3/31/15)		of 3/31/15)	(100)	(oublinely			of 3/31/15)	(100)	(oublied)			of 3/31/15)	(ruu)	(oublinely				
1. Premium																						
1.1 Total direct premium earned																						
1.2 Federal high risk pools Pt 1, 1.3 State high risk pools Pt 1	1, Ln 1.2 1, Ln 1.3																					
1.4 Net assumed less ceded reinsurance premium earned (exclude amounts Pt 1,	1, Ln 1.9																					
already reported in Line 1.1) 1.5 Other adjustments due to MLR calculations - premium Pt 1,	1, Ln 1.10																					
	1, Ln 1.11																					
2. Claims 2.1 Total incurred claims (MLR Form Part 2, Line 2.16)																						
2.2 Prescription drugs (informational only, already included in total incurred claims Pt 1,	1, Ln 2.2																					
above) 2.3 Pharmaceutical rebates (informational only; already excluded from total Pt 1,	1, Ln 2.3																					
incurred claims above) 2.4 State stop loss, market stabilization and claim/census based assessments Pt 1.	1, Ln 2.4																					
(informational only; already excluded from total incurred claims above)																						
 2.5 Net assumed less ceded claims incurred (exclude amounts already reported in Pt 1, Line 2.1) 	1, LN 5.1				I																	
2.6 Other adjustments due to MLR calculations - claims incurred Pt 1.	1, Ln 5.2 1, Ln 5.3																					
2.8 Estimated rebates unpaid at the end of the previous MLR reporting year Pt 1.	1, Ln 5.4																					
2.9 Estimated rebates unpaid at the end of the MLR reporting year Pt 1, 2.10 Fee-for-service and co-pay revenue (net of expenses) Pt 1,	1, Ln 5.5 1, Ln 5.6																					
2.11 Allowable fraud reduction expenses (MLR Form Part 2, Line 2.17) Pt 1,	1, Ln 4																					
3. Federal and State Taxes and Licensing or Regulatory Fees																						
3.1 Federal taxes and assessments incurred by the reporting issuer during Pt 1.	1, Ln 1.5						+	<u> </u>														
the MLR reporting year 3.1a Federal income taxes deductible from premium in MLR calculations																						
3.1b Patient Centered Outcomes Research Institute (PCORI) Fee 3.1c Affordable Care Act section 9010 Fee	F																					
3.1d Other Federal Taxes and assessments deductible from premium	t																					
3.2 State insurance, premium and other taxes incurred by the reporting issuer during the MLR reporting year (deductible from premium in MLR calculation)	1, Ln 1.6																					
3.2a State income, excise, business, and other taxes																						
 State premium taxes C community benefit expenditures deductible from premium in MLR calculations Pt 1. 	1. Ln 1.6a																					
	1, Ln 1.7																					
3.3a Federal Transitional Reinsurance Program contributions																						
3.3b Other Federal and State regulatory authority licenses and fees 4. Health Care Quality Improvement Expenses Incurred	_																					
4.1 Improve health outcomes Pt 1.	1, Ln 6.1																					
4.2 Activities to prevent hospital readmission Pt 1, 4.3 Improve patient safety and reduce medical errors Pt 1,	1, Ln 6.2 1. Ln 6.3																					
4.4 Wellness and health promotion activities Pt 1.	1, Ln 6.4																					
quality	1, Ln 6.5																					
4.6 Allowable Implementation ICD-10 expenses (not to exceed 0.3% of premium) Pt 1,	1, Ln 16a																					
5. Non-Claims Costs																						
5.1 Cost containment expenses not included in quality improvement expenses in Section 4	1, Ln 8.1																					
5.2 All other claims adjustment expenses Pt 1.	1, Ln 8.2 1, Ln 10.1																					
5.4 Agents and brokers fees and commissions Pt 1.	1, Ln 10.1 1, Ln 10.2																					
5.5 Other taxes 5.5a Taxes and assessments (exclude amounts reported in Section 3 or Line 9)																						
5.5b Fines and penalties of regulatory authorities (exclude amounts reported in Line 3.3)	L I																					
5.6 Other general and administrative expenses	E																					
 Community benefit expenditures (informational only; include amounts reported Pt 1, in Lines 3.2c and 5.6) 	1, Ln 10.4a																					
 5.8 ICD-10 implementation expenses (informational only; include amounts reported Pt 1, in Lines 4.6 and 5.6) 	1, Ln 16																					
6. Income from fees of uninsured plans Pt 1.	1, Ln 12																					
7. Other Indicators or information																						
7.1 Number of policies/certificates Pt 1 7.2 Number of covered lives Pt 1	1 Other, Ln 1 1 Other, Ln 2																					
7.3 Number of groups Pt 1	1 Other, Ln 3																					
7.5 Number of life-years	1 Other, Ln 4																					
8. Net investment income and other gain / (loss) Pt 1.	1, Ln 13																					
9. Other Federal income taxes (exclude taxes on Lines 3.1a-d) Pt 1.	1, Ln 14																					

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			2	3 Health Insurance	4	5	2A		7	8 Health Insurance	9	10	7A	11	12	13 Health Insurance	14	15	16	17	18 Mini-Med	10	20	21 Mini-Med
Line Description	SHCE	Health Insurance	Health Insurance	INDIVIDUAL	Health Insurance INDIVIDUAL	Health Insurance INDIVIDUAL	Health Insurance INDIVIDUAL		Health Insurance	SMALL GROUP	Health Insurance SMALL GROUP	Health Insurance SMALL GROUP	Health Insurance SMALL GROUP	Health Insurance	Health Insurance	LARGE GROUP	Health Insurance LARGE GROUP	Health Insurance LARGE GROUP	Mini-Med	Mini-Med	INDIVIDUAL	Mini-Med	Mini-Med	SMALL GROUP
		INDIVIDUAL Total as of 12/31/14	INDIVIDUAL Total as of 3/31/15	Dual Contracts (Included in Total as	Deferred PY1 (Add)	Deferred CY (Subtract)	[Risk Corridors] Total as of 3/31/15	SMALL GROUP Total as of 12/31/14	SMALL GROUP Total as of 3/31/15	Dual Contracts (Included in Total as	Deferred PY1 (Add)	Deferred CY (Subtract)	[Risk Corridors] Total as of 3/31/15		LARGE GROUP Total as of 3/31/15	Dual Contracts (Included in Total as	Deferred PY1 (Add)	Deferred CY (Subtract)	INDIVIDUAL Total as of 12/31/14	INDIVIDUAL Total as of 3/31/15	Dual Contracts (Included in Total as	SMALL GROUP Total as of 12/31/14	SMALL GROUP Total as of 3/31/15	Dual Contracts (Included in Total as
				of 3/31/15)	((,				of 3/31/15)	((,				of 3/31/15)	()	(,			of 3/31/15)			of 3/31/15)
1. Premium																								
1.1 Direct premium written	1																							
1.2 Unearned premium prior year 1.3 Unearned premium MLR Reporting year	Pt 2, Ln 1.2 Pt 2, Ln 1.3																							
1.4 Experience rating refunds (rate credits) paid)										l							l)	l			
 4a Experience rating refunds, with all incurred dates, paid in the MLR reporting year 	Pt 2, Ln 1.5																							
1.4b Experience rating refunds associated with premium earned only in the reporting year and paid through 3/31 of the following year																								
 1.5 Reserve for experience rating refunds (rate credits) MLR Reporting year 	Pt 2, Ln 1.6																							
1.6 Reserve for experience rating refunds (rate credits) prior year 1.7 Premium balances written off	Pt 2, Ln 1.7 Pt 2, Ln 1.9																							
1.8 Group conversion charges	Pt 2, Ln 1.10																							
 9 Federal Transitional Reinsurance Program payments expected from HHS (as indicated by HHS as of 6/30) 																								
 1.10 Federal Risk Adjustment Program net payments expected from HHS / (charges payable to HHS) (as indicated by HHS as of 6/30) 																								
1.11 Federal Risk Corridors Program net payments / (charges)																								
 1.12 Premium ceded under 100% reinsurance (informational only; already excluded from Lines 1.1-1.11) 																								
1.13 Premium assumed under 100% reinsurance (informational only; already included in Lines 1.1-1.11)																								
1.14 Advance payments of the premium tax credit received from HHS																								
(informational only; already included in Lines 1.1-1.11)																							//	
2. Claims 2.1 Claims Paid	1																							
2.1a Claims paid during the MLR reporting year regardless of incurred date																							//	
2.1b Claims incurred only during the MLR reporting year, paid through 3/31 of the following year																								
2.2 Direct claim liability																								
 2.2a Liability as of 12/31 of MLR reporting year for all claims regardless of incurred date 	Pt 2, Ln 2.2																							
2.2b Liability for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year																								
2.3 Direct claim liability prior year	Pt 2, Ln 2.3																							
2.4 Direct claim reserves 2.4a Reserves as of 12/31 of MLR reporting year for all claims regardless of	Pt 2, Ln 2.4								1				l I											
incurred date	PL 2, LN 2.4																							
2.4b Reserves for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year																								
2.5 Direct claim reserves prior year	Pt 2, Ln 2.5																							
2.6 Direct contract reserves 2.6a Direct contract reserves 12/31 column	Pt 2, Ln 2.6																							
2.6b Direct contract reserves 3/31, dual contract, deferred columns 2.7 Direct contract reserves prior year	Pt 2, Ln 2.7																							
2.8 Experience rating refunds (rate credits) paid																				i i i i i i i i i i i i i i i i i i i				
 2.8a Experience rating refunds, with all incurred dates, paid in the MLR reporting year 	Pt 2, Ln 2.8																							
2.8b Experience rating refunds associated with premium earned only in the	1																							
reporting year and paid through 3/31 of the following year 2.9 Reserve for experience rating refunds (rate credits)	1																							
2.9a Reserved in MLR reporting year regardless of incurred date	Pt 2, Ln 2.9																							
2.9b Reserves specific to the MLR reporting year through 3/31 of the following year	r																							
2.10 Reserve for experience rating refunds (rate credits) prior year	Pt 2, Ln 2.10			<u> </u>																				
2.11 Incurred medical incentive pool and bonuses 2.11a Paid medical incentive pools and bonuses MLR Reporting year	Pt 2, Ln 2.11a																							
2.11b Accrued medical incentive pools and bonuses MLR Reporting year 2.11c Accrued medical incentive pools and bonuses prior year	Pt 2, Ln 2.11b Pt 2, Ln 2.11c																							
2.12 Net healthcare receivables																								
2.12a Healthcare receivables MLR Reporting year 2.12b Healthcare receivables prior year	Pt 2, Ln 2.12a Pt 2, Ln 2.12b																							
2.13 Contingent benefit and lawsuit reserves																								
2.14 Group conversion charges 2.15 Blended rate adjustment	Pt 2, Ln 2.13 Pt 2, Ln 2.14																							
2.16 Total incurred claims	Pt 2, Ln 2.15																			-				
2.17 Allowable fraud reduction expense (the smaller of Lines 2.17a or 2.17b)	P1 1, LN 4																							
2.17a Total fraud reduction expense 2.17b Total fraud recoveries that reduced paid claims in Line 2.1	Pt 3, Col 7, Ln Pt 2, Ln 3																							
2.17b Total fraud recoveries that reduced paid claims in Line 2.1 2.18 Advance payments of cost-sharing reductions	rt 2, LH 3																							

Line Description Line Description Line Description Line Description Line Description Line Min-Med LaRGE GROUP Line Description Line Descriptio	38 39		
	Student Health Student Health	40 41 Government Other Health	42 43
Line Description SHCE Large group Large group balk contacts SMALL GROUP balk contacts SMALL GROUP SMALL GROUP SMALL GROUP SMALL GROUP Data Contracts Data Contacts Data Co	INDIVIDUAL INDIVIDUAL Pro Deferred PY1 Deferred CY Total	rogram Plans Business al as of 12/31/14 Total as of 12/31/1	Aggregate 2% Rule Uninsured Pla Total as of 12/31/14 Total as of 12/3
of 3/31/15) of 3/31/15) (Nuu) (Submatch) of 3/31/15) (Nuu) (Submatch) of 3/31/15)	(Add) (Subtract)		
11 Decempendamentation per version per ver			
1.3 Uneared premium MLR Reporting year P12. (p.1.3			
14 Experience rating refunds (rate credits) paid			
1.4a Experience rating refunds, with all incurred dates, paid in the MLR reporting P12, Ln 1.5			
1.4b Experience rating refunds associated with prevince and only in the reporting variant associated and house associated associate			
1.5 Reserve for excerience rating refunds (rate credits) MLR Reporting year			
1.6 Reserve for experience rating refunds (rate credits) prior year Pt 2, Ln 1.7			
1.7Perium babaices wither off 2.Ln 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
19 Federal Transitional Rensumer Program payments expected from HHS (as included by HHS and the second seco			
110 Federal Risk Adjustment Program net payments expected from HHS /			
(charge speakle to 145) (as indicated by 1465 as of 050) 11 Fejorel #18(x controls Porganne (page))			
1.12 Premium ceded under 100% reinsurance (informational only: already			
excluded from Lines 1:1-11]			
included in Lines 1.1-1.11)			
114 Advance payments of the premium tax credit received from HHS (informational only, index) included in the 11.11.11			
Learning and			
2.1 Claims Paid during the MLR reporting ware regardless of Incurred date			
2.1b Calms proceed only during the M.R. reporting year, paid through 3:31 of the following year			
22 Direct claim liability 22 Direct claim liability 22 Liability and 122 of MLR reporting year for all claims regardless of incurred P12, L12, 2			
date			
2.2b Liability for claims hoursed as of 22.2b Liability for claims hoursed as			
2.3 Direct claim liability prior year Pt 2, Ln 2.3			
2.4 Direct claim reserves			
incurred date			
2.4D Reserves for claims incurred only during the MLR reporting year, calculated as of 3315 of the following the MLR reporting year, calculated			
2.5 Dred claim reserves prior year P1 2, Ln 2.5			
2.6.Direct contract reserves 12/3 todam P 2.1.2.6 C C C C C C C C C C C C C C C C C C C			
2.6b Direct contract reserves 3/31, dual contract, deferred columns			
2.8 Experience rating refunds (rate credits) paid			
2.8a Experience rating refunds, with all incurred dates, paid in the MLR reporting P12, Ln 2.8			
2.8b Excelence ratio refunds essociated with overhum earred only in the			
reporting year and paid through 3/31 of the following year			
2.9 Reserve for experience ratios date P12, L0, 2.9 Construction of the P2, L0, 2.9 Constructi			
2.8 Reserves specific to the MLR reporting year through 3/31 of the following year			i
2.10 Reserve for experience rating refunds (rate credits) priory year P12, L12,10			
2.11 Incurred medical incentive pool and bonuses			
211a Pair medical incentive goods and bourses MLR Reporting year 4 2, in 211a 0 0 0 0 0 0 0 0 0			
2.12 Accurate metical network pools and bouxes prior year 7.2, Ln 2.12			
2.12a Healthcare receivables MLR Reporting year PL 2, Ln 2.12a			
2.12) Healthcar receivales privers P2, L0.212 [
2.14 Group conversion charges PP2, Ln 2.13 PP - C - C - C - C - C - C - C - C - C			
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2.14 Orain Incurred Caums PC, LL DS 2.17 Allowable Insult ordextion expense (the smaller of Lines 2.17a or 211) P (1, LL DS			
2.17a Total final reduction expense P13, Col 7, Ln			
2.17b Total fraud recoveries that reduced gaid claims in Line 2.1 P12. Ln 3			
2.13 Advance payments of cost-sharing reductions			

Line Description	1 Health Insurance Coverage INDIVIDUAL PY2	2 Health Insurance Coverage INDIVIDUAL PY1	3 Health Insurance Coverage INDIVIDUAL CY	4 Health Insurance Coverage INDIVIDUAL Total	4A Health Insurance Coverage INDIVIDUAL RC	5 Health Insurance Coverage SMALL GROUP PY2	6 Health Insurance Coverage SMALL GROUP PY1	7 Health Insurance Coverage SMALL GROUP CY	8 Health Insurance Coverage SMALL GROUP Total	8A Health Insurance Coverage SMALL GROUP RC	9 Health Insurance Coverage LARGE GROUP PY2	10 Health Insurance Coverage LARGE GROUP PY1	11 Health Insurance Coverage LARGE GROUP CY	12 Health Insurance Coverage LARGE GROUP Total	13 Mini-Med Plans INDIVIDUAL PY2	14 Mini-Med Plans INDIVIDUAL PY1	15 Mini-Med Plans INDIVIDUAL CY	16 Mini-Med Plans INDIVIDUAL Total	17 Mini-Med Plans SMALL GROUP PY2
1. Medical Loss Ratio Numerator																			
1.1 Adjusted incurred claims as reported on MLR Form for prior year(s) 1.2 Adjusted incurred claims as of 3/31 of the year following the MLR reporting																			
year 1.3 Improving Health Care Quality Expenses 1.4 Advance payments of cost-sharing reductions 1.5 Foderal Transitional Reinsurance Program payments expected from HHS (as indicated by HHS as of 6/30) 1.6 Foderal Risk Adjustment Program net payments expected from HHS / (charges payable to HHS) (as indicated by HHS as of 6/30) 1.7 Foderal Risk Cordioacts Program net payments / (charges)																			
1.8 MLR numerator 1.9 MLR numerator Mini-Med and Student Health (using adjustment factor)																			
 Medical Loss Ratio Denominator Premium earned including Federal and State high risk programs and adjusted for net premium stabilization program payments / (charges) 																			
2.2 Federal and State taxes and licensing or regulatory fees 2.3 MLR Denominator (Lines 2.1 - 2.2)																			
3. Risk Corridors Calculation																			
3.1 Allowable costs (Lines 1.2 + 1.3 - 1.4 - 1.5 - 1.6) 3.2 Administrative costs excluding taxes (MLR Form Part 1 Lines 5.1 + 5.2 + 5.3 + 5.4 + 5.5a + 5.5b + 5.6) 3.3 Ratio of allowable costs to after-tax premium (Lines 3.1 / (2.1 - 2.2))	+																		
 Straub of advance UoSis to derive A perfaminity (Let * 2.1) A Transitional Adjustment Percentage (if Line 3.2 a 80%) S Profit for risk corridors calculation (the greater of Lines 3.5a or 3.5b) Sa Earned profit (Lines 2.1 - 3.1 - 2.2 - 3.2) D Capped profit (3% + Line 3.4) x (Lines 2.1 - 2.2)) 																			
 3.6 Clapped Joint (395 ° Life 3.0) (Life 5.1 * 2.2)) 3.6 Allowable administrative costs (the lesser of Lines 3.6a or 3.6b) 3.6a Profit and administrative costs excluding taxes (Lines 3.2 + 3.5) 3.6b Capped administrative costs ((20% + Line 3.4) x (Lines 2.1 * 2.2) + Line 2.2) 																			
3.6c Capped administrative costs without adjustment (20% x (Lines 2.1 - 2.2) + Line 2.2)																			
 3.7 Risk corridors adjusted target amount (Lines 2.1 - 3.6) 3.8 Allowable administrative costs without adjustment (the lesser of Lines 3.6a or 3.6c) 3.9 Risk corridors unadjusted target amount (Lines 2.1 - 3.8) 																			
3.10 Unadjusted risk corridors ratio (Lines 3.1 / 3.9) 3.11 Risk corridors aggregate amount by market without adjustment (from Risk Corridors Plan Data Form, Part 3 Line 9) 3.12 Risk corridors total payment or charge amount used for MLR																			
calculation (from Risk Corridors Plan Data Form, Part 3 Line 10)																			
4. Credibility Adjustment 4.1 Life-years																			
4.2 Base credibility factor 4.3 Average deductible																			
4.4 Deductible factor 4.5 Credibility adjustment (Lines 4.2 x 4.4 (do not round))																			
5. MLR Calculation (for issuers with at least 1,000 life years in the Total column of Line 4.1) 5.1 Preliminary MLR																			
5.1a Preliminary MLR (Lines 1.8 / 2.3) 5.1b Preliminary MLR: Mini-Med and Student Health (Lines 1.9 / 2.3) 5.2 Credibility adjustment (Line 4.5, if applicable)																			
5.3 Credibility-adjusted MLR (Lines 5.1a or 5.1b + 5.2) 6. Rebate Calculation																			
6.1 MLR standard 6.2 Credibility-adjusted MLR (Line 5.3) 6.3 Adjusted earned premium (Lines 2.1 - 2.2 CY) 6.4 Rebate amount if credibility-adjusted MLR is less than MLR standard																			
(Lines (6.1 - 6.2) x 6.3)																			
7. Optional temporary adjustments 7.1 ACA assessments on non-calendar year policies (2013 only)																			
 7.1a Deferred portion of 2013 premium collected for 2014 ACA assessments or fees. 																			
7.1b Total Federal and State taxes associated with the deferred premium on Line 7.1a.																			
7.2 Reserved for future use 7.2a. Reserved for future use 7.2b. Reserved for future use																			
7.2c Reserved for future use 7.2d Reserved for future use																			
7.20 Reserved for future use 7.2e Reserved for future use 7.2f Reserved for future use																			

Line Description	18 Mini-Med Plans SMALL GROUP PY1	19 Mini-Med Plans SMALL GROUP CY	20 Mini-Med Plans SMALL GROUP Total	21 Mini-Med Plans LARGE GROUP PY2	22 Mini-Med Plans LARGE GROUP PY1	23 Mini-Med Plans LARGE GROUP CY	24 Mini-Med Plans LARGE GROUP Total	25 Expatriate Plans SMALL GROUP PY2	26 Expatriate Plans SMALL GROUP PY1	27 Expatriate Plans SMALL GROUP CY	28 Expatriate Plans SMALL GROUP Total	29 Expatriate Plans LARGE GROUP PY2	30 Expatriate Plans LARGE GROUP PY1	31 Expatriate Plans LARGE GROUP CY	32 Expatriate Plans LARGE GROUP Total	33 Student Health Plans INDIVIDUAL PY2	34 Student Health Plans INDIVIDUAL PY1	35 Student Health Plans INDIVIDUAL CY	36 Student Health Plans INDIVIDUAL Total
1. Medical Loss Ratio Numerator																			
 1.1 Adjusted incurred claims as reported on MLR Form for prior year(s) 1.2 Adjusted incurred claims as of 3/31 of the year following the MLR reporting year 																			
1.3 Improving Health Care Quality Expenses 1.4 Advance payments of cost-sharing reductions 1.5 Federal Transitional Reinsurance Program payments expected from HHS (as indicated by HHS as of 6/30) 1.6 Federal Risk Adultament Program net payments expected from HHS /																			
(charges payable to HHS) (as indicated by HHS as of 6/30) 1.7 Federal Risk Corridors Program net payments / (charges) 1.8 MLR numerator																			
1.9 MLR numerator Mini-Med and Student Health (using adjustment factor)																			
 Medical Loss Ratio Denominator Premium earned including Federal and State high risk programs and adjusted for net premium stabilization program payments / (charges) 																			
2.2 Federal and State taxes and licensing or regulatory fees 2.3 MLR Denominator (Lines 2.1 - 2.2)																			
3. Risk Corridors Calculation																			
3.1 Allowable costs (Lines 1.2 + 1.3 - 1.4 - 1.5 - 1.6) 3.2 Administrative costs excluding taxes (MLR Form Part 1 Lines 5.1 + 5.2 + 5.3 + 5.4 + 5.5 a + 5.5h - 5.6)																			
3.3 Ratio of allowable costs to after-tax premium (Lines 3.1 / (2.1 - 2.2)) 3.4 Transitional Adjustment Percentage (ff Line 3.3 a 80%) 3.5 Profit for risk corridors calculation (the greater of Lines 3.5a or 3.5b) 3.5a Eamed profit (Lines 2.1 - 3.1 - 2.2 - 3.2)																			
 3.5b Capped profit (126% + Line 3.4) x (Lines 2.1 - 2.2)) 3.6a Allowable administrative costs (the lesser of Lines 3.6a or 3.6b) 3.6a Profit and administrative costs excluding taxes (Lines 3.2 + 3.5) 3.6b Capped administrative costs ((20% + Line 3.4) x (Lines 2.1 - 2.2) + Line 2.2) 																			
3.6c Capped administrative costs ((20% + Line 3.4) x (Lines 2.1 - 2.2) + Line 2.2) Line 2.2)																			
Line 2.2) 3.7 Risk corridors adjusted target amount (Lines 2.1 - 3.6) 3.8 Allowable administrative costs without adjustment (the lesser of Lines 3.6 at 0.7 6.6) 3.9 Risk corridors unadjusted target amount (Lines 3.1 - 3.8) 3.10 IRisk corridors ratio (Lines 3.1 / 3.9) 3.11 Risk corridors gargetage amount by market without adjustment (from Risk																			
Corridors Plan Data Form, Part 3 Line 9) 3.12 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Plan Data Form, Part 3 Line 10)																			
4. Credibility Adjustment																			
4.1 Life-years 4.2 Base credibility factor 4.3 Average deductible																			
 4.4 Deductible factor 4.5 Credibility adjustment (Lines 4.2 x 4.4 (do not round)) 																			
5. MLR Calculation (for issuers with at least 1,000 life years in the Total column of Line 4.1)																			
5.1 Preliminary MLR 5.1a Preliminary MLR (Lines 1.8 / 2.3) 5.1b Preliminary MLR: Mini-Med and Student Health (Lines 1.9 / 2.3)																			
5.2 Credibility adjustment (Line 4.5, if applicable) 5.3 Credibility-adjusted MLR (Lines 5.1a or 5.1b + 5.2)																			
6. Rebate Calculation 6.1 MLR standard																			
 b. INLX standaro b.2 credibility-adjusted MLR (Line 5.3) b.3 Adjusted earned premium (Lines 2.1 - 2.2 CY) b.4 Rebate amount if credibility-adjusted MLR is less than MLR standard (Lines (b.1 - 6.2) x 6.3) 																			
7. Optional temporary adjustments																			
7.1 ACA assessments on non-calendar year policies (2013 only) 7.1a Deferred portion of 2013 premium collected for 2014 ACA assessments or fees.																			
7.1b Total Federal and State taxes associated with the deferred premium on Line 7.1a. 7.2 Reserved for future use																			
7.2a Reserved for future use 7.2b Reserved for future use																			
7.2c. Reserved for future use 7.2d. Reserved for future use 7.2e. Reserved for future use																			
7.2f Reserved for future use																			

Line Description	1 Health Insurance Coverage INDIVIDUAL	2 Health Insurance Coverage SMALL GROUP	3 Health Insurance Coverage LARGE GROUP	4 Mini-Med Plans INDIVIDUAL	5 Mini-Med Plans SMALL GROUP	6 Mini-Med Plans LARGE GROUP	7 Expatriate Plans SMALL GROUP	8 Expatriate Plans LARGE GROUP	9 Student Health Plans INDIVIDUAL
1. Number of policies / certificates (from Part 1, Line 7.1)									
2. Number of policyholders/subscribers owed rebates									
2.a Number of group policyholders being paid a rebate									
2.b Number of subscribers being paid a rebate									
2.c Number of group policyholders whose rebate is de minimis 2.d Number of subscribers whose rebate is de minimis									
3. Total amount of rebates									
3.a Total amount of rebates (from Part 3, Line 6.4)									
3.b Amount of de minimis rebates									
3.c Amount of rebates being paid by premium credit									
3.d Amount of rebates being paid by lump-sum reimbursement									
4. Prior MLR year rebates									
4.a Total amount of rebates paid for the previous MLR reporting year									
4.b Total amount of rebates still owed for the previous MLR reporting year									
4.c Percentage of notices sent timely to individual policy subscribers or group policyholders owed a rebate									
4.d Percentage of notices sent timely to subscribers of group policies owed a rebate									
 Percentage of rebates paid timely to individual policy subscribers or group policyholders owed a rebate 									
4.f Percentage of rebates paid timely to subscribers of group policies owed a rebate									
4.g Amount of unclaimed rebates from prior MLR reporting years									
4.h Describe methods used to locate policyholders/subscribers for prior MLR reporting year's unclaimed rebates:									
4.i Describe disbursement of prior MLR reporting year's unclaimed rebates:									

1. If an amount is reported in Part 1 Line 3.2c, Community benefit expenditures, provide the	Tax Rate
state premium tax rate used to determine the reported amount:	
2. If the issuer reported amounts in Part 2 Line 2.15 Blended rate adjustment provide the	1
affiliate(s) name(s) with whom blended rate adjustments were made.	
Name of Affiliate	
	1
3. If the issuer reported amounts in the Dual Contract 3/31 Columns provide the affiliate(s)	
name(s) with whom experience is being reported.	
Name of Affiliate	
during the MLR reporting year, provide the name(s) of the entity(ies) with whom the agreement was (were) made and the effective date of the novation. Name of Entity with whom Agreement was made	Effective Date of Novation
5. If the Issuer novated any business in the MLR reporting year effective during the reporting year provide the name of the entity to whom the business was sold or transferred and the date of the sale or transfer.	
Name of Entity to whom business was sold or transferred	Effective Date of sale or transfer
	1
6. If the incurrence and administrative administrative and administrative	
6. If the issuer has any 100% indemnity reinsurance and administrative agreements effective prior to March 23, 2010, for which the assuming entity is responsible for 100% of the ceding entity's financial risk and takes on all of the administration of the block, report the name(s) of the entity(ies) that is (are) reporting the experience related to such business.	

Description of Expense Elem	ent (by Type) 2 NEW	3 Detailed Description of Expense Allocation Methods
Description of Expense Elem 1. Incurred Claims		
2. Federal and State Taxes and Lice	ensing or Regulatory Fees	
2.a Federal taxes and assessments		
2.b State insurance, premium and other ta	axes	
cara analos, promun anu oner la		
2.c Community benefit expenditures		
2.d Regulatory authority licenses and fees	;	
3. Quality Improvement Expenses 3.a Improve health outcomes		
,		
3.b Activities to prevent hospital readmiss	sion	
		Page 10 of 14

1	2	3 Detailed Description of Expense Allocation Methods
Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods
3.c Improve patient safety and reduce medical errors		
3.d Wellness and health promotion activities		
3.e Health Information Technology expenses related to healthcare q	uality	
<u> </u>		
3.f Allowable ICD-10 Expenses		
4. Non-Claims costs 4.a Cost containment expenses not included in quality improvement		
4.a Cost containment expenses not included in quality improvement	expenses	
4.b All other claims adjustment expenses		

1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods
4.c Direct sales salaries and benefits		
	_	
	_	
	-	
	-	
	-	
4.d Agents and brokers fees and commissions		
	-	
	-	
4.e Other taxes		
	_	
	-	
	-	
	-	
	-	
4.f Other general and administrative expenses		
	-	
4.g Community benefit expenditures		
4.h ICD-10 implementation expenses		

Attestation Statement

The officers of this reporting issuer being duly sworn, each attest that he/she is the described officer of the reporting issuer, and that this MLR Reporting Form, the Company/Issuer Associations, and any supplemental submission that the issuer includes are full and true statements of all the elements included therein for the MLR reporting year stated above, and that the MLR Reporting Form has been completed in accordance with the Department of Health and Human Services' reporting instructions, according to the best of his/her information, knowledge and belief. Furthermore, the scope of this attestation by the described officer includes any related electronic filings and postings for the MLR reporting year stated above and which are required by Department of Health and Human Services under section 2718 of the Public Health Service Act and implementing regulation.

Chief Executive Officer/President

Chief Financial Officer

Table 1 - Base Credibility	Adjustme	ent Factors
Life Years		Base credibility factor
	-	0.0%
	1,000	8.3%
	2,500	5.2%
	5,000	3.7%
	10,000	2.6%
	25,000	1.6%
	50,000	1.2%
	75,000	0.0%

Table 2 - Deductible Factors	
Average Health Plan Deductible	Deductible factor
\$0	1.000
\$2,500	1.164
\$5,000	1.402
\$10,000	1.736

Table 3 - State and Territory
Names
Alaska
Alabama
Arkansas
American Samoa
Arizona California
Canada
Colorado
Connecticut
District of Columbia
Delaware
Florida
Georgia
-
Guam
Hawaii
Iowa
Idaho
Illinois
Indiana
Kansas
Kentucky
Louisiana
Massachusetts
Maryland
Maine
Michigan
Minnesota
Missouri
MP
Mississippi
Montana
North Carolina
North Dakota
Nebraska
New Hampshire
New Jersey
New Mexico
Nevada
New York
Ohio
Oklahoma
Oregon
Other Territories
Pennsylvania
Puerto Rico
Rhode Island
South Carolina
South Dakota
Tennessee
Texas
Utah
Virginia
Virgin Islands
Vermont
Washington
Wisconsin
West Virginia
Wyoming
Grand Total

Table 4 - Reporting `	Years
reporting	
	2011
	2012
	2013
	2014
	2015
	2016
	2017
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