## **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:	
Marketplace:	
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

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1164. The time required to complete this information collection is estimated to average 63.6 hours or 3,816 minutes per response, including the time to review instructions, search existing data resources, gather the data needed and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

																13					18			21
		1	2	Health Insurance	4 Health Insurance	5 Health Insurance	2A Health Insurance	6	7	Health Insurance	9 Health Insurance	10 Health Insurance	7A Health Insurance	11	12	Health Insurance	14 Health Insurance	15 Health Insurance	16	17	Mini-Med	19 Mini-Med	20	Mini-Med
Line Description	SHCE	INDIVIDUAL	Health Insurance INDIVIDUAL	INDIVIDUAL Dual Contracts	INDIVIDUAL	INDIVIDUAL Deferred CY	INDIVIDUAL [Risk Corridors]	SMALL GROUP	Health Insurance SMALL GROUP	SMALL GROUP Dual Contracts	SMALL GROUP Deferred PY1	SMALL GROUP Deferred CY	SMALL GROUP [Risk Corridors]	LARGE GROUP	LARGE GROUP	LARGE GROUP Dual Contracts		Health Insurance LARGE GROUP Deferred CY	Mini-Med INDIVIDUAL	Mini-Med INDIVIDUAL	INDIVIDUAL Dual Contracts	SMALL GROUP	Mini-Med SMALL GROUP	SMALL GROUP Dual Contracts
		Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)	(Add)	(Subtract)	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	of 3/31/16)	(Add)	(Subtract)	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)	(Add)	(Subtract)	Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)	Total as of 12/31/15	Total as of 3/31/16	Included in Total as of 3/31/16)
1. Premium																								
1.1 Total direct premium earned	1																							
1.2 Federal high risk pools     1.3 State high risk pools	Pt 1, Ln 1.2 Pt 1, Ln 1.3																							
State might his boots     A Net assumed less ceded reinsurance premium earned (exclude amounts already reported in Line 1.1)	Pt 1, Ln 1.9																							
1.5 Other adjustments due to MLR calculations - premium	Pt 1, Ln 1.10																							
1.6 Risk revenue  2. Claims	Pt 1, Ln 1.11																							
2.1 Total incurred claims (MLR Form Part 2, Line 2.16)	1																							
<ol> <li>2.2 Prescription drugs (informational only; already included in total incurred claims above)</li> </ol>	s Pt 1, Ln 2.2																							
Pharmaceutical rebates (informational only; already excluded from total incurred claims above)	Pt 1, Ln 2.3																							
2.4 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 Line 2.1)																								
2.6 Other adjustments due to MLR calculations – claims incurred 2.7 Rebates paid	Pt 1, Ln 5.2 Pt 1, Ln 5.3																							
2.8 Estimated rebates unpaid at the end of the previous MLR reporting year 2.9 Estimated rebates unpaid at the end of the MLR reporting year	Pt 1, Ln 5.4 Pt 1, Ln 5.5																							
2.10 Fee-for-service and co-pay revenue (net of expenses)	Pt 1, Ln 5.6																							
<ol> <li>2.11 Allowable claims recovered through fraud reduction efforts (MLR Form Part Line 2.17)</li> </ol>																								
3. Federal and State Taxes and Licensing or Regulatory Fee	S																							
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	Pt 1, Ln 1.6																							
3.2 State insurance, premium and other taxes incurred by the reporting issuer during the MLR reporting year (deductible from premium in MLR calculation)	111, 2.11																							
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	ns Pt 1. Ln 1.6a																							
3.3 Regulatory authority licenses and fees 3.3a Federal Transitional Reinsurance Program contributions	Pt 1, Ln 1.7																							
3.3b Other Federal and State regulatory authority licenses and fees																								
Health Care Quality Improvement Expenses Incurred     4.1 Improve health outcomes	Pt 1, Ln 6.1																							
4.2 Activities to prevent hospital readmission	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  E.1 Cest containment evenesse not included in quality improvement evenesse in	los 1 to 0.1																							
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																								
Line 3.3) 5.6 Other general and administrative expenses							-												-					
5.7 Community benefit expenditures (informational only; include amounts reporte in Lines 3.2c and 5.6)	d Pt 1, Ln 10.4a																							
5.8 ICD-10 implementation expenses (informational only; include amounts reporte in Lines 4.6 and 5.6)																								
6. Income from fees of uninsured plans	Pt 1, Ln 12																							
7. Other Indicators or information 7.1 Number of policies/certificates	Pt 1 Other, Ln 1																							
7.2 Number of covered lives	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	Pt 1, Ln 13																							
<ol> <li>Net investment income and other gain / (loss)</li> <li>Other Federal income taxes (exclude taxes on Lines 3.1a-d</li> </ol>																								
2. 2 122. ar moome taxes (excutate taxes on Lines 3.14-0	,																							

Page 2 of 14 [P1 1 Summary of Data

Line Description	SHCE	22 Mini-Med LARGE GROUP Total as of 12/31/15	23 Mini-Med LARGE GROUP Total as of 3/31/16	24 Mini-Med LARGE GROUP Dual Contracts (Included in Total as of 3/31/16)	25 Expat SMALL GROUP Total as of 12/31/15	26 Expat SMALL GROUP Total as of 3/31/16	27 Expat SMALL GROUP Dual Contracts (Included in Total as of 3/31/16)	28 Expat SMALL GROUP Deferred PY1 (Add)	29 Expat SMALL GROUP Deferred CY (Subtract)	30 Expat LARGE GROUP Total as of 12/31/15	31 Expat LARGE GROUP Total as of 3/31/16	32 Expat LARGE GROUP Dual Contracts Included in Total as of 3/31/16)	33 Expat LARGE GROUP Deferred PY1 (Add)	34 Expat LARGE GROUP Deferred CY (Subtract)	35 Student Health INDIVIDUAL Total as of 12/31/15	36 Student Health INDIVIDUAL Total as of 3/31/16	37 Student Health INDIVIDUAL Dual Contracts (Included in Total as of 3/31/16)	38 Student Health INDIVIDUAL Deferred PY1 (Add)	39 Student Health INDIVIDUAL Deferred CY (Subtract)	40 Government Program Plans Total as of 12/31/15	41 Other Health Business Total as of 12/31/15	42 Medicare MLR Business Total as of 12/31/15	43 Uninsured Plans Total as of 12/31/15
1. Premium																							
1.1 Total direct premium earned     1.2 Federa high risk pools     1.3 Sake high risk pools     1.3 Sake high risk pools     1.4 Net assumed less coded reinsurance premium earned (exclude amounts     1.5 Other adjustments due to MLR calculations – premium     1.6 Risk revene	Pt 1, Ln 1.2 Pt 1, Ln 1.3 Pt 1, Ln 1.9 Pt 1, Ln 1.10 Pt 1, Ln 1.11																						
2. Claims																							
Total incurred claims (MLR Form Part 2, Line 2.16)     Prescription drugs (informational only, already included in total incurred claims	Pt 1. Ln 2.2																						
above)  2.3 Pharmaceutical rebates (informational only, already excluded from total incurred claims above)	Pt 1, Ln 2.3																						
2.4 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 Line 2.1)	Pt 1, Ln 5.1																						
2.6 Other adjustments due to MLR calculations – claims incurred 2.7 Rebates paid	Pt 1, Ln 5.2 Pt 1, Ln 5.3																						
2.8 Estimated rebates unpaid at the end of the previous MLR reporting year	Pt 1, Ln 5.4																						
2.10 Fee-for-service and co-pay revenue (net of expenses) 2.11 Allowable claims recovered through fraud reduction efforts (MLR Form Part 2,	Pt 1, Ln 5.5 Pt 1, Ln 5.6 Pt 1, Ln 4																						
Line 2.17)  3. Federal and State Taxes and Licensing or Regulatory Fees																							
3.1 Federal taxes and assessments incurred by the reporting issuer during	Pt 1, Ln 1.5							<del></del>															
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 Alfordable Care Act section 9010 Fee  3.1d Other Federal Taxes and assessments deductible from premium																							
<ol> <li>State insurance, premium and other taxes incurred by the reporting issuer during the MLR reporting year (deductible from premium in MLR calculation)</li> </ol>	Pt 1, Ln 1.6																						
3.2a State income, excise, business, and other taxes     3.2b State premium taxes																							
3.2c Community benefit expenditures deductible from premium in MLR calculations																							
Regulatory authority licenses and fees     Regulatory authority licenses and ress     Bernard Transitional Reinsurance Program contributions     Sub Other Federal and State regulatory authority licenses and fees	Pt 1, Ln 1.7																						
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	Pt 1, Ln 6.3																						
4.4 Wellness and health promotion activities 4.5 Health information technology expenses related to improving health care	Pt 1, Ln 6.4 Pt 1, Ln 6.5																						
quality 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	Pt 1, Ln 8.1																						
5.2 All other claims adjustment expenses	Pt 1, Ln 8.2																						
5.3 Direct sales salaries and benefits 5.4 Agents and brokers fees and commissions	Pt 1, Ln 10.1 Pt 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)																							
5.6 Other general and administrative expenses 5.7 Community benefit expenditures (informational only; include amounts reported	Pt 1, Ln 10.4a																						
in Lines 3.2c and 5.6) 5.8 ICD-10 implementation expenses (informational only; include amounts reported in Lines 4.6 and 5.6)	dPt 1, Ln 16																						
6. Income from fees of uninsured plans	Pt 1, Ln 12		<u> </u>																				
7. Other Indicators or information	L																						
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	Pt 1 Other, Ln 3																						
7.4 Member months 7.5 Number of life-years	Pt 1 Other, Ln 4																						
8. Net investment income and other gain / (loss)	Pt 1, Ln 13																						
<ol><li>Other Federal income taxes (exclude taxes on Lines 3.1a-d)</li></ol>	Pt 1, Ln 14																						

Page 3 of 14 [P1 5 summary of Data

		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	Health Insurance INDIVIDUAL	INDIVIDUAL	INDIVIDUAL Dual Contracts	Health Insurance INDIVIDUAL Deferred PY1	Health Insurance INDIVIDUAL Deferred CY	Health Insurance INDIVIDUAL [Risk Corridors]	SMALL GROUP	Health Insurance SMALL GROUP	SMALL GROUP Dual Contracts	Health Insurance SMALL GROUP Deferred PY1	Health Insurance SMALL GROUP Deferred CY	Health Insurance SMALL GROUP [Risk Corridors]	Health Insurance	Health Insurance	LARGE GROUP	Health Insurance LARGE GROUP Deferred PY1	Health Insurance LARGE GROUP	Mini-Med INDIVIDUAL	Mini-Med INDIVIDUAL	INDIVIDUAL Dual Contracts	Mini-Med SMALL GROUP	Mini-Med SMALL GROUP	SMALL GROUP Dual Contracts
		Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)	(Add)	(Subtract)	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)	(Add)	(Subtract)	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16 (	(Included in Total as of 3/31/16)	(Add)	Deferred CY (Subtract)	Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)	Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)
1. Premium	I																							
1.1 Direct premium written																								
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	Pt 2, LH 1.3																							
1.4a Experience rating refunds, with all incurred dates, paid in the MLR reporting	Pt 2, Ln 1.5																							
year																								
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	Pt 2, Ln 1.7																							
1.7 Premium balances written off	Pt 2, Ln 1.9																							
1.8 Group conversion charges	Pt 2, Ln 1.10																							
<ol> <li>1.9 Federal Transitional Reinsurance Program payments expected from HHS (as indicated by HHS as of 6/30)</li> </ol>																								
1.10 Federal Risk Adjustment Program net payments expected from HHS /			i -																					
(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																					!			
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	Pt 2, Ln 2.2																							
date  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																							
incurred date	F12, LI12.4																							
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																		ļ			į			
2.6a Direct contract reserves 12/31 column 2.6b Direct contract reserves 3/31, dual contract, deferred columns	Pt 2, Ln 2.6																					_		
2.7 Direct contract reserves prior year	Pt 2, Ln 2.7																							
2.8 Experience rating refunds (rate credits) paid	L																							
<ol> <li>8a Experience rating refunds, with all incurred dates, paid in the MLR reporting year</li> </ol>	Pt 2, Ln 2.8																							
2.8b Experience rating refunds associated with premium earned only in the reporting year and paid through 3/31 of the following year																								
2.9 Reserve for experience rating refunds (rate credits)																								
2.9a Reserved in MLR reporting year regardless of incurred date 2.9b Reserves specific to the MLR reporting year through 3/31 of the following	Pt 2, Ln 2.9																							
2.90 Reserves specific to the MLR reporting year through 3/31 of the following year																								
2.10 Reserve for experience rating refunds (rate credits) prior year	Pt 2, Ln 2.10																							_
2.11 Incurred medical incentive pool and bonuses	L																							
2.11a Paid medical incentive pools and bonuses MLR Reporting year 2.11b Accrued medical incentive pools and bonuses MLR Reporting year	Pt 2, Ln 2.11a Pt 2, Ln 2.11b																							
2.11c Accrued medical incentive pools and bonuses prior year	Pt 2, Ln 2.11c																							_
2.12 Net healthcare receivables	L																							
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	Pt 2, Ln 2.13																							
2.15 Blended rate adjustment 2.16 Total incurred claims	Pt 2, Ln 2.14 Pt 2, Ln 2.15																							_
2.17 Allowable claims recovered through fraud reduction efforts (the smaller																								
of Lines 2.17a or 2.17b)																								
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		1																					
2.18 Reconciled payments of cost-sharing reductions	1		<u> </u>																					
		•																						

				24			27	28	29			32	33	3.4			37	38	39				
		22 Mini-Med	23 Mini-Med	Mini-Med LARGE GROUP	25 Expat	26 Expat	Expat SMALL GROUP	Expat	Expat	30 Expat	31 Expat	Expat LARGE GROUP	Expat	Expat	35 Student Health	36 Student Health	Student Health INDIVIDUAL	Student Health	Student Health	40 Government	41 Other Health	42 Medicare MLR	43
Line Description	SHCE	LARGE GROUP	LARGE GROUP	Dual Contracts	SMALL GROUP	SMALL GROUP	Dual Contracts	SMALL GROUP Deferred PY1	SMALL GROUP Deferred CY	LARGE GROUP	LARGE GROUP	Dual Contracts	LARGE GROUP Deferred PY1	LARGE GROUP Deferred CY	INDIVIDUAL	INDIVIDUAL	Dual Contracts	INDIVIDUAL Deferred PY1	INDIVIDUAL Deferred CY	Program Plans	Business	Business	Uninsured Plans Total as of 12/31/15
		Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)	s Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)	(Add)	(Subtract)	Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)	(Add)	(Subtract)	Total as of 12/31/15	Total as of 3/31/16	(Included in Total as of 3/31/16)	(Add)	(Subtract)	Total as of 12/31/15	Total as of 12/31/15	Total as of 12/31/15	Total as of 12,02725
												0.0000,											
1. Premium																							
Direct premium written     Unearned premium prior year	Pt 2, Ln 1.2																						
1.3 Unearned premium MLR Reporting year	Pt 2, Ln 1.3																						
1.4 Experience rating refunds (rate credits) paid 1.4a Experience rating refunds, with all incurred dates, paid in the MLR reporting	Pt 2 In 15																						
year	12, 2, 2, 3																						
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	Pt 2, Ln 1.7																						
1.7 Premium balances written off 1.8 Group conversion charges	Pt 2, Ln 1.9 Pt 2, Ln 1.10																						
1.9 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																							
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	d Dt 2 In 2 2																						
date																							
2.2b Liability for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year	1																						
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																						
incurred date 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 2.6 Direct contract reserves	Pt 2, Ln 2.5																						
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																							
2.8a Experience rating refunds, with all incurred dates, paid in the MLR reporting year	Pt 2, Ln 2.8	1																					
2.8b Experience rating refunds associated with premium earned only in the																							
reporting year and paid through 3/31 of the following year  2.9 Reserve for experience rating refunds (rate credits)																							
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																							
2.10 Reserve for experience rating refunds (rate credits) prior year	Pt 2, Ln 2.10																						
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	Pt 2, Ln 2.11b																						
2.11c Accrued medical incentive pools and bonuses prior year 2.12 Net healthcare receivables	Pt 2, Ln 2.11c																						
2.12a Healthcare receivables MLR Reporting year	Pt 2, Ln 2.12a																						
2.12b Healthcare receivables prior year 2.13 Contingent benefit and lawsuit reserves	Pt 2, Ln 2.12b																						
2.14 Group conversion charges	Pt 2, Ln 2.13																						
2.15 Blended rate adjustment 2.16 Total incurred claims	Pt 2, Ln 2.14 Pt 2, Ln 2.15																						
2.17 Allowable claims recovered through fraud reduction efforts (the smaller of Lines 2.17a or 2.17b)	r Pt 1, Ln 4																						
2.17a Total fraud reduction expense	Pt 3, Col 7, Ln																						
2.17b Total fraud recoveries that reduced paid claims in Line 2.1 2.18 Reconciled payments of cost-sharing reductions	Pt 2, Ln 3																						
2.20 reconcise payments or cost sharing reductions																							

Page 5 of 14

Line Description  The property of the property
1 A A CARLON CONTROL OF THE CONTROL
1 A A CARLON CONTROL OF THE CONTROL
The control of the co
Suppose process from State of Control of Con
A Photography agreement of concept agreement and Edge agreement and Ed
1.5 Part of the Association (Control of the Association
A Florar (in A Authorn Charge on order principal compress (1998)
1   Table
1   Table
1.0   1.0
New Control Rose   Sale Decrementation   S
2. Throaten and the state of th
2.7 Facility and states uses not incompt on payment (see )  2.8 Contributed Confidence (See 12.1.3.2.1.4.2.1.8.2.7.2.2.2.1.3.1.3.1.4.3.1.8.2.1.8.2.2.3.2.2.2.2.2.2.3.3.2.3.2.2.2.2.2.3.3.2.3.2.2.2.2.2.3.3.3.2.2.2.2.2.3.3.3.2.2.2.2.2.3.3.3.2.2.2.2.2.3.3.3.2.2.2.2.2.3.3.3.2.2.2.2.2.3.3.3.2.2.2.2.2.3.3.3.2.2.2.2.2.3.3.3.2.2.2.2.2.3.3.3.2.2.2.2.2.3.3.3.2.2.2.2.2.2.3.3.3.2.2.2.2.2.3.3.3.2.2.2.2.2.2.3.3.3.2.2.2.2.2.2.3.3.3.2.2.2.2.2.2.2.3.3.3.2.2.2.2.2.2.3.3.3.2.2.2.2.2.2.2.3.3.3.2.2.2.2.2.2.2.2.2.2.2.3.3.3.2
2.7 Facility and those more including or symptom to the control of
Risk Controllation (1994) 24-13-14-17-12  Advantage to the most analysis upin (1994) 1-13-15-15-15-15-15-15-15-15-15-15-15-15-15-
13 All Analyses demanders control (tree 1.2 * 1.2 * 1.4 * 1.4 * 1.2 * 1.
12 Administration costs enclosely to the PTAL Limit 51 - 52 - 53 - 54 - 55 de 13 Profest for fact control contained from the section of the pass of the section of the pass of the section
1-12.0 - 12.0 -
3.0 Expend print (1972 3. 3. 3. 2. 2. 3.) 3.0 Copped print (1970 4. (1972 3. 1. 2. 2.) 3.0 Copped print (1970 4. (1972 3. 1. 2. 2.) 3.0 Copped print (1970 4. (1972 3. 1. 2. 2.) 3.0 Copped print (1970 4. (1972 3. 1. 2. 2.) 3.0 Copped print (1970 4. (1972 3. 1. 2.) 3.0 Copped print (1970 4. (1972 3. 1. 3. 2.) 3.0 Copped print (1970 4. (1972 3. 3. 3. 2.) 3.0 Copped print (1970 4. (1972 3. 3. 3. 2.) 3.0 Copped print (1970 4. (1972 3. 3. 3. 2.) 3.0 Copped print (1970 4. (1972 3. 3. 3. 2.) 3.0 Copped print (1970 4. (1972 3. 3. 3. 2.) 3.0 Copped print (1970 4. (1972 3. 3. 3. 2.) 3.0 Copped print (1970 4. (1972 3. 3. 3. 2.) 3.0 Copped print (1970 4. (1972 3. 3. 3. 2.) 3.0 Copped print (1970 4. (1972 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.
3.30 Capped print (2fth - 750) x (Lmr 21 - 231) x (Lmr 21
3.30 Capped print (CRiv - 2%) x (Lower 2.1 - 2.2) 3.40 Port of an administrative cost (the lesser 2.2 - 3.1 - 2.2) 3.40 Port of an administrative cost (the lesser 2.2 - 3.1 - 2.2) 3.41 Port of a administrative cost (the lesser 2.2 - 3.1 - 2.2) 3.42 Port of a administrative cost (the less 2.2 - 3.1 - 2.2) 3.43 Port of an administrative cost without adjustment (the sal 2.2 - 3.1 - 2.2) 3.45 Port of an administrative cost without adjustment (the sal 2.2 - 3.6 - 2.2) 3.40 Port of an administrative cost without adjustment (the sal 2.2 - 3.6 - 2.2) 3.40 Port of an administrative cost without adjustment (the sal 2.2 - 3.6 - 2.2) 3.40 Port of a administrative cost without adjustment (the sal 2.2 - 3.6 - 2.2) 3.40 Port of a administrative cost without adjustment (the sal 2.2 - 3.6 - 2.2) 3.40 Port of a administrative cost without adjustment (the sal 2.2 - 3.6 - 2.2) 3.40 Port of a administrative cost without adjustment (the sal 2.2 - 3.6 - 2.2) 3.40 Port of a administrative cost without adjustment (the sal 2.2 - 3.6 - 2.2) 3.40 Port of a administrative cost without adjustment (the sal 2.2 - 3.6 - 2.2) 3.40 Port of a administrative cost without adjustment (from 12.2 - 1.2) 3.50 Port of a administrative cost without adjustment (from 12.2 - 1.2) 3.50 Port of adjustment (the sal 2.2 - 4.0 point country) 4.50 Port of adjustment (the sal 2.2 - 4.0 point country) 4.50 Port of adjustment (the sal 2.2 - 4.0 point country) 4.50 Port of a sal 2.2 port of a adjustment (the sal 2.2 - 4.0 point country) 5.50 Port of a sal 2.2 port of a adjustment (the sal 2.2 - 4.0 point country) 5.50 Port of adjustment (the sal 2.2 - 4.0 point country) 5.50 Port of a sal 2.2 port of a adjustment (the sal 2.2 - 4.0 point country) 5.50 Port of a sal 2.2 port of a adjustment (the sal 2.2 - 4.0 point country) 5.50 Port of a sal 2.2 port of a adjustment (the sal 2.2 - 4.0 point country) 5.50 Port of a sal 2.2 port of a adjustment (the sal 2.2 - 4.0 point country) 5.50 Port of a sal 2.2 port of a adjustment (the sal 2.2 - 4.0 point country) 5.50 Port of a
3.8. Capped priorit without displatment ((i) % 4 (i) we 2.1 - 2.20) and 4.00 and 4.0
3.4 a Profit and administrative costs (10th - 20th 10th 221 - 221
3.40 Capped aimmentative costs (70% - 20%) (Lines 2.1 - 2.2) + 12.2 + 12
3.5 Rick corridors adjusted target amount (Lines 2.1-3.4) 3.1 All houseles destinative costs without adjustment (Lines 3.2 + 5.6 + 2.2) 3.6a Print without adjustment (Lines 3.2 + 5.6 + 2.2) 3.b Print and administrative costs without adjustment (Lines 3.2 + 5.6 + 2.2) 3.c Capped administrative costs without adjustment (Lines 2.1 + 2.0 + 2.2) 3.c Capped administrative costs without adjustment (Lines 2.1 + 2.0 + 2.2) 3.c Capped administrative costs without adjustment (Lines 2.1 + 2.0 + 2.2) 3.c Capped administrative costs without adjustment (Lines 2.1 + 2.0 + 2.2) 3.c Capped administrative costs without adjustment (Lines 2.1 + 2.0 + 2.2) 3.c Capped administrative costs without adjustment (Inne 18.4 + 2.0 + 2.2 + 2
(the leaser of Lines 2.6 to 2.6 to 7.6 to 7.
3.0a Profit without adjustment (the greater of Lines 3.0a vs. 3.2 vs. 5.6a vs. 2.2) 3.0c. Capped administrative costs without adjustment (20% x (Lines 2.1 vs. 2.2) + Line 2.2) 3.0c. Capped administrative costs without adjustment (Line 3.1 vs. 2.1 vs. 3.2) 3.0c. Capped administrative costs without adjustment (Line 3.1 vs. 3.2) 3.0c. Caroridors unadjusted target amount (Line 3.1 vs. 3.2) 3.0c. Caroridors and question (Line 3.2) 3.0c. Caroridors and quest
3.0b Profit and administrative costs without adjustment (Lines 2.1 - 2.2) 3.0b Profit and administrative costs without adjustment (Lines 2.1 - 2.2) 1.0b 2.2
The 2.29 3.8 Risk corridors unadjusted target amount (Lines 2.1 -3.6) 3.8 Unadjusted risk corridors and (Lines 3.1 / 3.0) 3.8 Unadjusted risk corridors and (Lines 3.1 / 3.0) 3.8 Unadjusted risk corridors and (Lines 3.1 / 3.0) 3.8 Unadjusted risk corridors and (Lines 3.1 / 3.0) 3.9 Unadjusted risk corridors and (Lines 3.1 / 3.0) 3.10 Risk corridors batal payment or charge amount used for MLR calculation (from Risk Corridors Plan Data Form, Part 3 Line 10) 4.2 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Plan Data Form, Part 3 Line 10) 4.2 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Plan Data Form, Part 3 Line 10) 4.2 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Plan Data Form, Part 3 Line 10) 4.2 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Plan Data Form, Part 3 Line 10) 4.2 Risk corridors total payment (from Risk Corridors Plan Data Form, Part 3 Line 10) 4.3 Risk corridors total payment (from Risk Corridors Plan Data Form, Part 3 Line 10) 4.4 Risk corridors total payment (from Risk 2 x 4.4 (do not count)) 4.5 Risk corridors total payment (from Risk 2 x 4.4 (do not count)) 5.6 Risk corridors total payment (from Risk 2 x 4.4 (do not count)) 5.7 Risk corridors total payment (from Risk 2 x 4.4 (do not count)) 5.8 Risk corridors total payment (from Risk 2 x 4.4 (do not count)) 5.9 Preliminary MLR count (from Risk Corridors Plan Data Form, Part 3 Line 10) 5.0 Credibility adjustment (Line 4.5, 4 applicable) 5.1 Risk corridors total payment (Line 5.1 payment 2 Line State Plan Data Form, Part 3 L
The 2.29 3.8 Risk corridors unadjusted target amount (Lines 2.1 -3.6) 3.8 Unadjusted risk corridors and (Lines 3.1 / 3.0) 3.8 Unadjusted risk corridors and (Lines 3.1 / 3.0) 3.8 Unadjusted risk corridors and (Lines 3.1 / 3.0) 3.8 Unadjusted risk corridors and (Lines 3.1 / 3.0) 3.9 Unadjusted risk corridors and (Lines 3.1 / 3.0) 3.10 Risk corridors fall payment or charge amount used for MLR calculation (from Risk Corridors Plan Lines (1.0) 4.2 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Plan Lines (1.0) 4.2 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Plan Lines (1.0) 4.2 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Plan Lines (1.0) 4.2 Risk corridors total payment (Lines 4.2 x 4.4 (do not nound)) 4.3 Risk corridors (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 4.4 Deductable factor 4.5 Cordidity adjustment (Lines 4.2 x 4.4 (do not nound)) 4.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 4.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 4.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 4.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk Corridors Plan Lines 4.2 x 4.4 (do not nound)) 5.5 Lines (from Risk
3.8 Unadjusted risk corridors ratio (Lines 3.1 / 3.7) 3.9 Risk corridors agregate amount to primare without adjustment (From Risk Corridors Plan Data Form, Part 3 Line 9) 3.0 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Plan Data Form, Part 3 Line 10) 4.1 Life-yeas 4.1 Life-yeas 4.2 Base credibility factor 4.3 Average deductible 4.4 Deductible factor (Lines 4.2 x 4.4 (do not round)) 4.1 Calculation (for issuers with at least 1,000 life years in the Total Column of Line 4.1) 5.1 Preliminary MLR (Lines 1.19 / 2.3) 5.2 Credibility adjustment (Lines 4.5) fi applicable) 5.3 Credibility adjustment (Lines 4.5) fi applicable) 5.4 Credibility adjustment (Lines 4.5) fi applicable) 5.5 Credibility adjustment (Lines 4.5) fi applicable) 5.6 Credibility adjustment (Lines 4.5) fi applicable) 5.7 Credibility adjustment (Lines 4.5) fi applicable) 5.8 Credibility adjustment (Lines 4.5) fi applicable) 5.9 Credibility adjustment (Lines 4.5) fi applicable) 5.1 Credibility adjustment (Lines 4.5) fi applicable) 5.2 Credibility adjustment (Line 4.5) fi applicable) 5.3 Credibility adjustment (Line 4.5) fi applicable)
3.9 Risk corridors aggregate amount by market without adjustment (from Risk Corridors Para Date Form, Part 3 Line 9) 3.10 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Para Date Form, Part 3 Line 10)  Credibility Adjustment 4.1 Life-years 4.2 Base credibility adjustment 4.3 Average reductible 4.5 Credibility adjustment (lines 4.2 x 4.4 (so not round)) MLR Calculation (for insurers with at least 1,000 life years in the Total Column of Line 4.1) 5.1 Perliminary MLR (lines 18.8 / 2.3) 5.1 Perliminary MLR (lines 18.8 / 2.3) 5.2 Credibility adjustment (line 4.5) fi applicable) 5.2 Credibility adjustment (line 4.5) fi applicable) 5.3 Credibility adjustment (line 4.5) fi applicable) 5.4 Credibility adjustment (line 4.5) fi applicable) 5.5 Credibility adjustment (line 4.5) fi applicable) 5.6 Credibility adjustment (line 4.5) fi applicable) 5.7 Credibility adjustment (line 4.5) fi applicable)
3.10 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Part Sure 1,000 life years in
3.10 Risk corridors total payment or charge amount used for MLR calculation (from Risk Corridors Part Sure 1,000 life years in
Credibility Adjustment
4.1 Life years 4.2 Base credibility factor 4.3 Average deducible 4.5 Credibility adjustment (Lines 4.2 x 4.4 (do not round)) 4.5 Credibility adjustment (Lines 4.2 x 4.4 (do not round))  MLR Calculation (for issuers with at least 1,000 life years in rotate column of Line 4.1)  5.1 Preliminary MLR (Lines 1.8 / 2.3) 5.1 Preliminary MLR. Min-Med and Student Health (Lines 1.9 / 2.3) 5.2 Credibility adjustment (Line 4.5, if applicable) 5.3 Credibility adjustment (Line 5.1 a 7.5 Lines 5.1 a 7.5 L
4.2 Base redibility factor 4.3 Average debuctible 4.4 Deductible factor 4.5 Cerdibility adjustment (Lines 4.2 x 4.4 (do not round))  MLR Calculation (for issuers with at least 1,000 life years in the Total column of Line 4.1) 5.1 Preliminary MLR 5.1 Preliminary MLR. Min-Med and Student Health (Lines 1.9 / 2.3) 5.2 Preliminary MLR. Min-Med and Student Health (Lines 1.9 / 2.3) 5.2 Cerdibility adjustment (Line 4.5, if applicable) 5.3 Cerdibility adjustment (Line 5.1 at 5.1 bt 5.2)
4.4 Deductible factor 4.5 Credibility adjustment (Lines 4.2 x 4.4 (do not round))  MLR Calculation (for issuers with at least 1,000 life years in the Total column of Line 4.1)  5.1 Preliminary MLR  5.1. Preliminary MLR: Min-Med and Student Health (Lines 1.9 / 2.3)  5.2 Credibility adjustment (Line 4.5, if applicable)  5.3 Credibility adjustment (Line 5.1 at 5.1 bt - 5.2)
4.5 Credibility adjustment (Lines 4.2 x 4.4 (do not round))  MLR Calculation (for issuers with at least 1,000 life years in the Total column of Line 4.1)  5.1 Preliminary MLR  5.1 Preliminary MLR (Lines 1.8 / 2.3)  5.2 Credibility adjustment (Line 4.5, if applicable)  5.3 Credibility adjustment (Line 5.1 of 5.1 br 5.2)
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: Min-Med and Student Health (Lines 1.9 / 2.3)  5.1b Preliminary MLR: Min-Med and Student Health (Lines 1.9 / 2.3)  5.2 Credibility adjustment (Line 4.5, if applicable)  5.3 Credibility adjustment (Line 5.1 at 5.1 bt 5.2)
Re Total column of Line 4.1)   St. Preliminary M.R.   St. Prelimin
5.1a Preliminary MLR (Lines 1.8 / 2.3) 5.1b Preliminary MLR: Min-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)
5.10 Preliminary M.R. 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)
5.2 Credibility adjustment (Line 4.5, if applicable) 5.3 Credibility-adjusted MLR (Lines 5.1a or 5.1b + 5.2)
Rehate Calculation
6.1 MLR standard 6.2 Credibility-adjusted MLR (Line 5.3)
6.3 Adjusted earned premium (Lines 21 - 22 CY)
6.4 Rebate amount if credibility-adjusted MLR is less than MLR standard
(Lines (s.1 - s.2) x s.3)
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 7.1.a. 7.2 Risk Corridors claims liabilities/reserves true-up (Lines 7.2b - 7.2a)
7.2a. Adjusted incurred claims as reported on MLR Form for the prior benefit year
7.2b. Adjusted incurred claims from the prior year, restated as of 3/31 of the year
following the benefit year
7.2c Reserved for future use 7.2d Reserved for future use
7.2e Reserved for future use 7.2e Reserved for future use

66202601 Page 6 of 14 [Pt 3 MLR and Rebate Calculation]

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																			
I.3 Improving Health Care Quality Expenses     1.4 Reconciled payments of cost-sharing reductions     1.5 Federal Transitional Reinsurance Program payments expected from HHS (as indicated by HHS as of 6/3).																			
1.6 Federal Risk Adjustment 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     1. 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 + 7.2) 3.2 Administrative costs excluding taxes (Part 1 Lines 5.1 + 5.2 + 5.3 + 5.4 + 5.5a + 5.5b + 5.6) 3.3 Profit for risk corridors calculation (the greater of Lines 3.3a or 3.3b)																			
3.3a Earned profit (Lines 2.1 - 3.1 - 2.2 - 3.2) 3.3b Capped profit ((3% + 2%) x (Lines 2.1 - 2.2))																			
3.3c Capped profit without adjustment (3% x (Lines 2.1 - 2.2)) 3.4 Allowable administrative costs (the lesser of Lines 3.4a or 3.4b) 3.4a Profit and administrative costs (Lines 3.2 + 3.3 + 2.2) 3.4b Capped administrative costs (20% + 2%) x (Lines 2.1 - 2.2) + Line 2.2) 3.5 Risk corridors adjusted target amount (Lines 2.1 - 3.4)																			
3.6 Allowable administrative costs without adjustment (the lesser of Lines 3.6b or 3.6c) 3.6a Profit without adjustment (the greater of Lines 3.3a or 3.3c) 3.6b Profit and administrative costs without adjustment (Lines 3.2 + 3.6a + 2.2)																			
3.6c Capped administrative costs without adjustment (20% x (Lines 2.1 - 2.2) + Line 2.2) 3.7 Risk corridors unadjusted target amount (Lines 2.1 - 3.6) 3.8 Unadjusted risk corridors ratio (Lines 3.1 - 3.7) 3.9 Risk corridors aggregate amount by market without adjustment (from Risk Corridors Plan Data Form, Part 3 Line 9)																			
3.10 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 (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. 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 Risk Corridors claims liabilities/reserves true-up (Lines 7.2b - 7.2a)																			
7.2a Adjusted incurred claims as reported on MLR Form for the prior benefit year 7.2b Adjusted incurred claims from the prior year, restated as of 3/31 of the year following the benefit year 7.2c 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																			

66202601 Page 7 of 14 [Pt 3 MLR and Rebate Calculation]

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									
<ol> <li>4.c Percentage of notices sent timely to individual policy subscribers or group policyholders owed a rebate</li> </ol>									
4.d Percentage of notices sent timely to subscribers of group policies owed a rebate									
<ol> <li>4.e Percentage of rebates paid timely to individual policy subscribers or group policyholders owed a rebate</li> </ol>									
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:									

If the issuer reported amounts in Part 2 Line 2.15 Blended rate adjustment provide the affiliate(s) name(s) with whom blended rate adjustments were made.  Name of Affiliate	
name of Affiliate	-
	-
	_
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	
	_
	-
If the issuer entered into any 100% assumptive reinsurance agreements with a novation during the MLR reporting year, provide the name(s) of the entity(ies) with whom the agreemen was (were) made and the effective date of the novation.	t
was (were) made and the effective date of the novation.	Effective Date of Novation
was (were) made and the effective date of the novation.	
was (were) made and the effective date of the novation.	
was (were) made and the effective date of the novation.	
was (were) made and the effective date of the novation.	
was (were) made and the effective date of the novation.	
was (were) made and the effective date of the novation.  Name of Entity with whom Agreement was made	
Name of Entity with whom Agreement was made  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.	Effective Date of Novation
Name of Entity with whom Agreement was made  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.	Effective Date of Novation
Name of Entity with whom Agreement was made  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.	Effective Date of Novation
Name of Entity with whom Agreement was made  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.	Effective Date of Novation
Name of Entity with whom Agreement was made  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.	Effective Date of Novation
Name of Entity with whom Agreement was made  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.	Effective Date of Novation
Name of Entity with whom Agreement was made  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.	Effective Date of Novation
4. If the issuer entered into any 100% assumptive reinsurance agreements with a novation 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  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  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.	Effective Date of Novation
Name of Entity with whom Agreement was made  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  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	Effective Date of Novation

Tax Rate

1	2	3
Description of Expense Element (by Type)  1. Incurred Claims	NEW	Detailed Description of Expense Allocation Methods
	-	
Federal and State Taxes and Licensing or Regulatory     A Federal taxes and assessments	rees	
2.b State insurance, premium and other taxes		
	_	
	-	
	-	
2.c Community benefit expenditures		
2.d Regulatory authority licenses and fees		
3. Quality Improvement Expenses		
3. Quality Improvement Expenses 3.a Improve health outcomes		
3.b Activities to prevent hospital readmission		
	1	

1	2	3
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 qu	ality	
3.f Allowable ICD-10 Expenses		
4. Non-Claims costs		
4.a Cost containment expenses not included in quality improvement	expenses	
4.b All other claims adjustment expenses		
4.c Direct sales salaries and benefits		
		Page 11 of 14

1	2	3 Detailed Description of Expense Allocation Methods
Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods
	-	
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 b ICD 40 implomentation areas		
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 Adjustment 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 - Names	State and Territory
Alaska	
Alabama	
Arkansas	
American S	amoa
Arizona	
California	
Canada	
Colorado	
Connecticut	
District of C	olumbia
Delaware	
Florida	
Georgia	
Guam	
Hawaii	
Iowa	
Idaho	
Illinois	
Indiana	
Kansas	
Kentucky	
Louisiana	
Massachus	etts
Maryland	
Maine	
Michigan	
Minnesota	
Missouri	
MP	
Mississippi	
Montana North Carol	ino
North Dako	
Nebraska	la
New Hamps	chiro
New Jersey	
New Mexico	
Nevada	•
New York	
Ohio	
Oklahoma	
Oregon	
Other Territ	ories
Pennsylvan	
Puerto Rico	
Rhode Islar	
South Caro	lina
South Dako	
Tennessee	
Texas	
Utah	
Virginia	
Virgin Island	ds
Vermont	
Washington	ı
Wisconsin	
West Virgin	ia
Wyoming	
Grand Total	l

able 4 - eporting Y	ears
	2011
	2012
	2013
	2014
	2015
	2016
	2017
	2018
	2019
	2020
	2021 2022
	2023
	2024
	2025
	2026
	2027
	2028
	2029
	2030
	2031 2032
	2032
	2033
	2035
	2036
	2037
	2038
	2039
	2040
	2041
	2042
	2043
	2044
	2045
	2046
	2047
	2048 2049
	2049
	2050
	2051
	2053
	2054
	2055
	2056
	2057
	2058
	2059
	2060

Table 5 -
Yes/No
Yes
No