

## 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

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Line Description	SHCE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
		Health Insurance INDIVIDUAL Total as of 12/31/22	Health Insurance INDIVIDUAL Total as of 3/31/23	Health Insurance INDIVIDUAL Dual Contracts (Included in Total as of 3/31/23)	Health Insurance INDIVIDUAL Deferred PY1 (Add)	Health Insurance INDIVIDUAL Deferred CY (Subtract)	Health Insurance SMALL GROUP Total as of 12/31/22	Health Insurance SMALL GROUP Total as of 3/31/23	Health Insurance SMALL GROUP Dual Contracts (Included in Total as of 3/31/23)	Health Insurance SMALL GROUP Deferred PY1 (Add)	Health Insurance SMALL GROUP Deferred CY (Subtract)	Health Insurance LARGE GROUP Total as of 12/31/22	Health Insurance LARGE GROUP Total as of 3/31/23	Health Insurance LARGE GROUP Dual Contracts (Included in Total as of 3/31/23)	Health Insurance LARGE GROUP Deferred PY1 (Add)	Health Insurance LARGE GROUP Deferred CY (Subtract)	Mini-Med INDIVIDUAL Total as of 12/31/22	Mini-Med INDIVIDUAL Total as of 3/31/23	Mini-Med INDIVIDUAL Dual Contracts (Included in Total as of 3/31/23)	Mini-Med SMALL GROUP Total as of 12/31/22	Mini-Med SMALL GROUP Total as of 3/31/23	Mini-Med SMALL GROUP Dual Contracts (Included in Total as of 3/31/23)	Mini-Med LARGE GROUP Total as of 12/31/22
<b>1. Premium</b>																							
1.1 Direct premium written																							
1.2 Unearned premium prior year	PT 2, Ln 1.2																						
1.3 Unearned premium MLR Reporting year	PT 2, Ln 1.3																						
<b>1.4 Experience rating refunds (rate credits) paid</b>																							
1.4a 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	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																						
1.9 Federal Transitional Reinsurance Program payments																							
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 Reserved																							
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 1.1-1.13)																							
<b>2. Claims</b>																							
<b>2.1 Claims Paid</b>																							
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																							
<b>2.2 Direct claim liability</b>																							
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																						
<b>2.4 Direct claim reserves</b>																							
2.4a Reserves as of 12/31 of MLR reporting year for all claims regardless of incurred date	PT 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																						
<b>2.6 Direct contract reserves</b>																							
2.6a Direct contract reserves 12/31 column	PT 2, Ln 2.6																						
2.6b Direct contract reserves 3/31, dual contract, deferred columns	PT 2, Ln 2.7																						
2.7 Direct contract reserves prior year																							
<b>2.8 Experience rating refunds (rate credits) paid</b>																							
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 reporting year and paid through 3/31 of the following year																							
<b>2.9 Reserve for experience rating refunds (rate credits)</b>																							
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	PT 2, Ln 2.10																						
2.10 Reserve for experience rating refunds (rate credits) prior year																							
<b>2.11 Incurred medical incentive pool and bonuses</b>																							
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	PT 2, Ln 2.11c																						
<b>2.12 Net healthcare receivables</b>																							
2.12a Healthcare receivables MLR Reporting year	PT 2, Ln 2.12a																						
2.12b Healthcare receivables prior year	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	PT 2, Ln 2.14																						
2.16 State Reinsurance Program payments																							
2.17 Total incurred claims	PT 2, Ln 2.15																						
<b>2.18 Allowable claims recovered through fraud reduction efforts (the smaller of Lines 2.18a or 2.18b)</b>	PT 1, Ln 4																						
2.18a Total fraud reduction expense	PT 3, Col 7, Ln																						
2.18b Total fraud recoveries that reduced paid claims in Line 2.1	PT 2, Ln 3																						
2.19 Reconciled payments of cost-sharing reductions																							

Line Description	SHCE	23 Mini-Med LARGE GROUP Total as of 3/31/23	24 Mini-Med LARGE GROUP Dual Contracts (Included in Total as of 3/31/23)	25 Expat SMALL GROUP Total as of 12/31/22	26 Expat SMALL GROUP Total as of 3/31/23	27 Expat SMALL GROUP Dual Contracts (Included in Total as of 3/31/23)	28 Expat SMALL GROUP Deferred PY1 (Add)	29 Expat SMALL GROUP Deferred CY (Subtract)	30 Expat LARGE GROUP Total as of 12/31/22	31 Expat LARGE GROUP Total as of 3/31/23	32 Expat LARGE GROUP Dual Contracts (Included in Total as of 3/31/23)	33 Expat LARGE GROUP Deferred PY1 (Add)	34 Expat LARGE GROUP Deferred CY (Subtract)	35 Student Health INDIVIDUAL Total as of 12/31/22	36 Student Health INDIVIDUAL Total as of 3/31/23	37 Student Health INDIVIDUAL Dual Contracts (Included in Total as of 3/31/23)	38 Student Health INDIVIDUAL Deferred PY1 (Add)	39 Student Health INDIVIDUAL Deferred CY (Subtract)	40 Government Program Plans Total as of 12/31/22	41 Other Health Business Total as of 12/31/22	42 Medicare MLR Business Total as of 12/31/22	43 Uninsured Plans Total as of 12/31/22
<b>1. Premium</b>																						
1.1 Direct premium written																						
1.2 Unearned premium prior year	PT 2, Ln 1.2																					
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1.4a Experience rating refunds, with all incurred dates, paid in the MLR reporting year	PT 2, Ln 1.5																					
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2.2b Liability for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year																						
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2.7 Direct contract reserves prior year																						
<b>2.8 Experience rating refunds (rate credits) paid</b>																						
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 reporting year and paid through 3/31 of the following year																						
<b>2.9 Reserve for experience rating refunds (rate credits)</b>																						
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																						
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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	PT 2, Ln 2.11c																					
<b>2.12 Net healthcare receivables</b>																						
2.12a Healthcare receivables MLR Reporting year	PT 2, Ln 2.12a																					
2.12b Healthcare receivables prior year	PT 2, Ln 2.12b																					
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2.15 Blended rate adjustment	PT 2, Ln 2.14																					
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2.17 Total incurred claims	PT 2, Ln 2.15																					
<b>2.18 Allowable claims recovered through fraud reduction efforts (the smaller of Lines 2.18a or 2.18b)</b>	PT 1, Ln 4																					
2.18a Total fraud reduction expense	PT 3, Col 7, Ln																					
2.18b Total fraud recoveries that reduced paid claims in Line 2.1	PT 2, Ln 3																					
2.19 Reconciled 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	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	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	18 Mini-Med Plans SMALL GROUP PY1
<b>1. Medical Loss Ratio Numerator</b>																		
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 Reconciled payments of cost-sharing reductions																		
1.5 Federal Transitional Reinsurance Program payments from HHS																		
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 Reserved																		
1.8 Shared Savings payments to enrollees																		
<b>1.9 MLR numerator</b>																		
<b>2. Medical Loss Ratio Denominator</b>																		
2.1 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																		
<b>2.3 MLR Denominator (Lines 2.1 - 2.2)</b>																		
<b>3. Credibility Adjustment</b>																		
3.1 Life-years																		
3.2 Base credibility factor																		
3.3 Average deductible																		
3.4 Deductible factor																		
3.5 Credibility adjustment (Lines 3.2 x 3.4 (do not round))																		
<b>4. MLR Calculation (for issuers with at least 1,000 life years in the Total column of Line 3.1)</b>																		
4.1 Preliminary MLR (Lines 1.9 / 2.3)																		
4.2 Credibility adjustment (Line 3.5, if applicable)																		
<b>4.3 Credibility-adjusted MLR (Lines 4.1 + 4.2)</b>																		
<b>5. Rebate Calculation</b>																		
5.1 MLR standard																		
5.2 Credibility-adjusted MLR (Line 4.3)																		
5.3 Adjusted earned premium (Lines 2.1 - 2.2 CY)																		
<b>5.4 Rebate amount if credibility-adjusted MLR is less than MLR standard (Lines 5.1 - 5.2) x 5.3)</b>																		
5.5 Optional: single-year rebate liability (Line 2.3 x [(Line 5.1 - (Lines 4.1 + 4.2))])																		
5.6 Optional: paid rebate liability (see instructions)																		
5.7 Optional: unpaid rebate liability (Lines 5.5 - 5.6)																		
<b>5.8 Limited payable rebate amount (see instructions)</b>																		
<b>6. Temporary Adjustments</b>																		
6.1 Reserved for future use																		
6.1a Reserved for future use																		
6.1b Reserved for future use																		
6.2 Reserved for future use																		
6.2a Reserved for future use																		
6.2b Reserved for future use																		
6.2c Reserved for future use																		
6.2d Reserved for future use																		
6.2e Reserved for future use																		
6.2f Reserved for future use																		

Line Description	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
<b>1. Medical Loss Ratio Numerator</b>																		
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 Reconciled payments of cost-sharing reductions																		
1.5 Federal Transitional Reinsurance Program payments from HHS																		
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 Reserved																		
1.8 Shared Savings payments to enrollees																		
<b>1.9 MLR numerator</b>																		
<b>2. Medical Loss Ratio Denominator</b>																		
2.1 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																		
<b>2.3 MLR Denominator (Lines 2.1 - 2.2)</b>																		
<b>3. Credibility Adjustment</b>																		
3.1 Life-years																		
3.2 Base credibility factor																		
3.3 Average deductible																		
3.4 Deductible factor																		
3.5 Credibility adjustment (Lines 3.2 x 3.4 (do not round))																		
<b>4. MLR Calculation (for issuers with at least 1,000 life years in the Total column of Line 3.1)</b>																		
4.1 Preliminary MLR (Lines 1.9 / 2.3)																		
4.2 Credibility adjustment (Line 3.5, if applicable)																		
<b>4.3 Credibility-adjusted MLR (Lines 4.1 + 4.2)</b>																		
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5.1 MLR standard																		
5.2 Credibility-adjusted MLR (Line 4.3)																		
5.3 Adjusted earned premium (Lines 2.1 - 2.2 CY)																		
<b>5.4 Rebate amount if credibility-adjusted MLR is less than MLR standard (Lines 5.1 - 5.2) x 5.3)</b>																		
5.5 Optional: single-year rebate liability (Line 2.3 x [(Line 5.1 - (Lines 4.1 + 4.2))])																		
5.6 Optional: paid rebate liability (see instructions)																		
5.7 Optional: unpaid rebate liability (Lines 5.5 - 5.6)																		
<b>5.8 Limited payable rebate amount (see instructions)</b>																		
<b>6. Temporary Adjustments</b>																		
6.1 Reserved for future use																		
6.1a Reserved for future use																		
6.1b Reserved for future use																		
<b>6.2 Reserved for future use</b>																		
6.2a Reserved for future use																		
6.2b Reserved for future use																		
6.2c Reserved for future use																		
6.2d Reserved for future use																		
6.2e Reserved for future use																		
6.2f 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
<b>1. Number of policies / certificates (from Part 1, Line 7.1)</b>									
<b>2. Number of policyholders/subscribers owed rebates</b>									
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									
<b>3. Total amount of rebates</b>									
3.a Total amount of rebates (from Part 3, Line 5.4 or 5.8)									
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									
3.e Amount of rebates prepaid in advance of filing the MLR Form									
<b>4. Prior MLR year rebates</b>									
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									
4.e 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:									



	Tax Rate
<b>1. If an amount is reported in Part 1 Line 3.2c, Community benefit expenditures, provide the state premium tax rate used to determine the reported amount:</b>	
<b>2. 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.</b>	
Name of Affiliate	
<b>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.</b>	
Name of Affiliate	
<b>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.</b>	
Name of Entity with whom Agreement was made	Effective Date of Novation
<b>5. If the issuer sold any business in the MLR reporting year, and the novation was effective during the MLR reporting year, provide the name(s) of the entity(ies) to which the business was sold and the date of the sale or transfer.</b>	
Name of Entity to whom business was sold or transferred	Effective Date of sale or transfer
<b>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.</b>	

<b>1. Incurred Claims</b>		
1	2	3
Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods

<b>2.a Federal taxes and assessments</b>		
1	2	3
Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods

<b>2.b State insurance, premium and other taxes</b>		
1	2	3
Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods

<b>2.c Community benefit expenditures</b>		
1	2	3
Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods

<b>2.d Regulatory authority licenses and fees</b>		
1	2	3
Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods

<b>3.a Improve health outcomes</b>		
1	2	3
Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods

<b>3.b Activities to prevent hospital readmission</b>		
1	2	3
Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods

1. Incurred Claims		

3.c Improve patient safety and reduce medical errors		
1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods

3.d Wellness and health promotion activities		
1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods

3.e Health Information Technology expenses related to healthcare quality		
1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods

4.a Cost containment expenses not included in quality improvement expenses		
1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods

4.b All other claims adjustment expenses		
1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods

1. Incurred Claims	

4.c Direct sales salaries and benefits		
1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods

4.d Agents and brokers fees and commissions		
1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods

4.e Other taxes		
1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods

4.f Other general and administrative expenses		
1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods

4.g Community benefit expenditures		
1 Description of Expense Element (by Type)	2 NEW	3 Detailed Description of Expense Allocation Methods

**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, 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 and which are required by Department of Health and Human Services under section 2718 of the Public Health Service Act and implementing regulation.

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Chief Executive Officer/President

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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 - 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

**Table 4 - Reporting Years**

2011  
2012  
2013  
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2060

**Table 5 - Yes/No**

Yes  
No

Washington
Wisconsin
West Virginia
Wyoming
Grand Total