

State: District of Columbia **Filing Company:** CareFirst BlueChoice, Inc.
TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004E Small Group Only
 - Other
Product Name: DC BC Small Group Eff 201501 - ACA
Project Name/Number: /1958

Filing at a Glance

Company: CareFirst BlueChoice, Inc.
 Product Name: DC BC Small Group Eff 201501 - ACA
 State: District of Columbia
 TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)
 Sub-TOI: HOrg02G.004E Small Group Only - Other
 Filing Type: Rate
 Date Submitted: 06/13/2014
 SERFF Tr Num: CFAP-129567877
 SERFF Status: Assigned
 State Tr Num:
 State Status:
 Co Tr Num: 1958
 Implementation: 01/01/2015
 Date Requested:
 Author(s): Dwayne Lucado, Anna Guloy, Todd Switzer, Katheryn Barron, Cory Bream, Patrick Getts, Britney Gladhill, Scott Cremens
 Reviewer(s): John Morgan (primary), Alula Selassie, Beichen Li
 Disposition Date:
 Disposition Status:
 Implementation Date:
 State Filing Description:

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 - Other
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General Information

Project Name:	Status of Filing in Domicile:
Project Number: 1958	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Group
Submission Type: New Submission	Group Market Size: Small
Group Market Type: Employer	Overall Rate Impact: 6.1%
Filing Status Changed: 06/16/2014	
State Status Changed:	Deemer Date:
Created By: Scott Cremens	Submitted By: Scott Cremens
Corresponding Filing Tracking Number:	

PPACA: Non-Grandfathered Immed Mkt Reforms

PPACA Notes: null

Include Exchange Intentions: No

Filing Description:

This filing contains the rate proposal for the portfolio of benefits to be offered by CareFirst BlueChoice, Inc. to Small Groups on the D.C. Exchange. We are submitting 36 benefit plans on the D.C. Exchange.

Company and Contact

Filing Contact Information

Britney Gladhill,	britney.gladhill@carefirst.com
10455 Mill Run Circle	410-998-7197 [Phone]
Mail Stop OM1-780	
Owings Mills, MD 21117	

Filing Company Information

CareFirst BlueChoice, Inc.	CoCode: 96202	State of Domicile: District of
840 First Street NE	Group Code:	Columbia
Washington, DC 20065	Group Name:	Company Type: Health
(410) 581-3000 ext. [Phone]	FEIN Number: 52-1358219	Maintenance Organization
		State ID Number:

Filing Fees

Fee Required?	No
Retaliatory?	No
Fee Explanation:	

SERFF Tracking #:

CFAP-129567877

State Tracking #:

Company Tracking #:

1958

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Rate Information

Rate data applies to filing.

Filing Method: Electronic (SERFF)

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 2.100%

Effective Date of Last Rate Revision: 10/01/2014

Filing Method of Last Filing: Electronic (SERFF)

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
CareFirst BlueChoice, Inc.	Increase	6.100%	6.100%	\$2,498,640	22,144	\$41,252,498	7.900%	3.300%

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Rate Review Detail

COMPANY:

Company Name: CareFirst BlueChoice, Inc.
 HHS Issuer Id: 86052

PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
BlueChoice HMO HSA/HRA, BlueChoice HMO Referral HSA/HRA, BlueChoice HMO, BlueChoice HMO Referral, BlueChoice Advantage, BlueChoice Advantage HSA/HRA, BlueChoice Plus, BlueChoice Plus HSA/HRA, HealthyBlue HMO, HealthyBlue HMO HSA/HRA, HealthyBlue Plus, HealthyBlue Plus HSA/HRA, HealthyBlue Advantage, HealthyBlue Advantage HSA/HRA			36865

Trend Factors:

FORMS:

New Policy Forms: DC/CFBC/SHOP/2015 GC AMEND (1/15), DC/CFBC/SHOP/2015 AMEND (1/15), DC/CF/SHOP/2015 GC AMEND (1/15), DC/CF/SHOP/2015 AMEND (1/15), DC/CFBC/BC+ OOOA/10080/SOB (R. 1/15), DC/CFBC/BC+ OOOA/10060/SOB (R. 1/15), DC/CFBC/HMO/INCEN (1/15), DC/CFBC/BCOA/GOLD SOB (R. 1/15), DC/CFBC/BCOA/SIL SOB (R. 1/15), DC/CFBC/HMO/BRZ SOB (R. 1/15), DC/CFBC/HMO/1020/SOB (R. 1/15), DC/CFBC/HMO/3040/SOB (R. 1/15), DC/CFBC/HMO/250/SOB (R. 1/15), DC/CFBC/HMO OA/3040/SOB (R. 1/15), DC/CFBC/HMO OA/500/SOB (R. 1/15), DC/CFBC/HMO OA HRA/1800/SOB (R. 1/15), DC/CFBC/HMO OA CDH/1500/SOB (R. 1/15), DC/CFBC/HMO OA CDH /2000/SOB (R. 1/15), DC/CFBC/HB HMO/300 SOB (R. 1/15), DC/CFBC/HB HMO/600 SOB (R. 1/15), DC/CFBC/HB HMO/1500 SOB (R. 1/15), DC/CFBC/HB HMO/2000 SOB (R. 1/15), DC/CFBC/ADV CDH IN/1500/SOB (R. 1/15), DC/CFBC/ADV IN/8050/SOB (R. 1/15), DC/CFBC/ADV IN/10070SOB (R. 1/15), DC/CFBC/ADV/1000/INN/SOB (R. 1/15), DC/CFBC/ADV/500/INN/SOB (1/15), DC/CFBC/ADV IN/INCEN (1/15), DC/CFBC/BC+ OOP IN/1500/ SOB (R. 1/15), DC/CFBC/BC+ OOP IN CDH/2000/ SOB (R. 1/15), DC/CFBC/BC+ OOP IN/3500/SOB (R. 1/15), DC/CFBC/BC+ OOP IN/2000/SOB (R. 1/15), DC/CFBC/BC+ OOP IN/10080/SOB (R. 1/15), DC/CFBC/POS IN/INCEN (1/15), DC/CFBC/HB PLUS 300 IN SOB (R. 1/15), DC/CFBC/HB PLUS 600 IN SOB (R. 1/15), DC/CFBC/HB PLUS 1500 IN SOB (R. 1/15), DC/CFBC/HB PLUS 2000 IN SOB (R. 1/15), DC/CFBC/HB ADV 300 IN SOB (R. 1/15), DC/CFBC/HB ADV 600 IN SOB (R. 1/15), DC/CFBC/HB ADV 1500 IN SOB (R. 1/15), DC/CFBC/HB ADV 2000 IN SOB (R. 1/15), DC/CF/ADV OON/PLAT SOB (R. 1/15), DC/CF/BC ADV CDH OON/1500/ SOB (R. 1/15), DC/CF/BC ADV OON/8050/ SOB (R. 1/15), DC/CF/BC ADV/1000/OON/SOB (R. 1/15), DC/CF/BC ADV OON/10070/SOB (R. 1/15), DC/CF/BC ADV/500/OON/SOB (1/15), DC/CF/BC+ OOP OON/1500/SOB (R. 1/15), DC/CF/BC+ OOP OON CDH/2000/SOB (R. 1/15) , DC/CF/BC+ OOP OON/3500/SOB (R. 1/15), DC/CF/BC+

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OOP OON/2000/SOB (R. 1/15), DC/CF/BC+OOP OON/10080/SOB (R. 1/15), DC/CF/HB PLUS 300 SOB (R. 1/15), DC/CF/HB PLUS 600 SOB (R. 1/15), DC/CF/HB PLUS 1500 SOB (R. 1/15), DC/CF/HB PLUS 2000 SOB (R. 1/15), DC/CF/HB ADV 300 SOB (R. 1/15), DC/CF/HB ADV 600 SOB (R. 1/15), DC/CF/HB ADV 1500 SOB (R. 1/15), DC/CF/HB ADV 2000 SOB (R. 1/15)

Affected Forms:

NA

Other Affected Forms:

DC/CFBC/SHOP/GC (1/14), DC/CFBC/DOL APPEAL (R. 7/11), DC/CFBC/SHOP/ELIG (1/14), DC/CFBC/FAM PLAN (8/12), DC/CFBC/PARTNER (R. 7/09), DC/CFBC/PT PROTECT (9/10), DC/CF/SHOP/GC (1/14), DC/CF/SHOP/ADV OON/EOC (1/14), DC/GHMSI/DOL APPEAL (R. 11/11), DC/CF/SHOP/EXC/DOCS (1/14), DC/GHMSI/FAM PLAN (8/12), DC/CF/PARTNER (R. 7/09), DC/CF/BLCRD (1/12), DC/CF/MEM/BLCRD (1/12), DC/CF/ANCILLARY AMEND (10/12), DC/CF/PT PROTECT (9/10), DC/GHMSI-HEALTH GUARANTEE 2/08, DC/CFBC/SHOP/EOC (1/14), DC/CFBC/BCOO/DOCS (1/14), DC/CFBC/BLCRD (1/12), DC/CFBC/MEM/BLCRD (1/12), DC/CFBC/SHOP/EXC/DOCS (1/14), DC/CFBC/HMO/DOCS (1/14), DC/CFBC/SHOP/ADV IN/EOC (1/14), DC/CFBC/HB/SHOP/EXC/DOCS (1/14), DC/CFBC/SHOP/ADV IN/PLAT SOB (1/14), DC/CFBC/ADV IN/IPP GRP (1/14), DC/CFBC/ADV IN/IPP MEM (1/14), DC/CFBC/ANCILLARY AMEND (10/12)

REQUESTED RATE CHANGE INFORMATION:

Change Period: Quarterly
 Member Months: 102,876
 Benefit Change: None
 Percent Change Requested: Min: 3.3 Max: 7.9 Avg: 6.1

PRIOR RATE:

Total Earned Premium: 41,252,498.00
 Total Incurred Claims: 31,729,377.00
 Annual \$: Min: 211.14 Max: 469.06 Avg: 382.10

REQUESTED RATE:

Projected Earned Premium: 43,863,806.00
 Projected Incurred Claims: 31,908,920.00
 Annual \$: Min: 219.06 Max: 494.85 Avg: 404.92

SERFF Tracking #:

CFAP-129567877

State Tracking #:

Company Tracking #:

1958

State:

District of Columbia

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CareFirst BlueChoice, Inc.

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Rate/Rule Schedule

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Product Name: DC BC Small Group Eff 201501 - ACA
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Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Rate Filing 1958	DC/CFBC/SHOP/GC (1/14), DC/CFBC/DOL APPEAL (R. 7/11), DC/CFBC/SHOP/ELIG (1/14), DC/CFBC/FAM PLAN (8/12), DC/CFBC/PARTNER (R. 7/09), DC/CFBC/PT PROTECT (9/10), DC/CFBC/SHOP/EOC (1/14), DC/CFBC/SHOP/EXC/DOCS (1/14), DC/CFBC/SHOP/BCOA/GOLD SOB (1/14), DC/CFBC/SHOP/BCOA/SIL SOB (1/14), DC/CFBC/SHOP/HMO/BRZ SOB (1/14), DC/CFBC/BLCRD (1/12), DC/CFBC/MEM/BLCRD (1/12), DC/CFBC/SHOP/HMO/1020/SOB (1/14), DC/CFBC/SHOP/HMO/3040/SOB (1/14), DC/CFBC/SHOP/HMO/250/SOB (1/14), DC/CFBC/SHOP/HMO OA/3040/SOB (1/14), DC/CFBC/SHOP/HMO OA/500/SOB (1/14), DC/CFBC/SHOP/HMO OA HRA/1800/SOB (1/14), DC/CFBC/SHOP/HMO OA CDH/1500/SOB (1/14), DC/CFBC/SHOP/HMO OA CDH /2000/SOB (1/14), DC/CFBC/SHOP/ADV IN/EOC (1/14), DC/CFBC/HB/SHOP/EXC/DOCS (1/14), DC/CFBC/SHOP/ADV IN/PLAT SOB (1/14), DC/CFBC/ADV IN/IPP GRP (1/14), DC/CFBC/ADV IN/IPP MEM (1/14),	Revised	Previous State Filing Number: CFAP-129047155 Percent Rate Change Request: 6.1	File_1958_DC_BC_SG_1.1.15_Rates.pdf,

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Project Name/Number: /1958

		DC/CFBC/ANCILLARY AMEND (10/12), DC/CFBC/SHOP/ADV CDH IN/1500/SOB (1/14), DC/CFBC/SHOP/ADV IN/8050/SOB (1/14), DC/CFBC/SHOP/ADV IN/10070SOB (1/14), DC/CFBC/SHOP/ADV/1000/INN/SOB (1/14), DC/CFBC/SHOP/ADV IN/IPP GRP (1/14), DC/CFBC/SHOP/ADV IN/IPP MEM (1/14), DC/CFBC/SHOP/BC+ OOP IN/1500/ SOB (1/14), DC/CFBC/SHOP/BC+ OOP IN CDH/2000/ SOB (1/14), DC/CFBC/SHOP/BC+ OOP IN/3500/SOB (1/14), DC/CFBC/SHOP/BC+ OOP IN/2000/SOB (1/14), DC/CFBC/SHOP/BC+ OOP IN/10080/SOB (1/14), DC/CFBC/SHOP/HB PLUS 300 IN SOB (1/14), DC/CFBC/SHOP/HB PLUS 600 IN SOB (1/14), DC/CFBC/SHOP/HB PLUS 1500 IN SOB (1/14), DC/CFBC/SHOP/HB PLUS 2000 IN SOB (1/14), DC/CFBC/SHOP/HB ADV 300 IN SOB (1/14), DC/CFBC/SHOP/HB ADV 600 IN SOB (1/14), DC/CFBC/SHOP/HB ADV 1500 IN SOB (1/14), DC/CFBC/SHOP/HB ADV 2000 IN SOB (1/14), DC/CFBC/SHOP/HB HMO/300 SOB (1/14), DC/CFBC/SHOP/HB HMO/600 SOB (1/14), DC/CFBC/SHOP/HB HMO/1500 SOB (1/14), DC/CFBC/SHOP/SHOP/HB HMO/2000 SOB (1/14), DC/CFBC/SHOP/BC+ OOOA/10080/SOB (1/14), DC/CFBC/SHOP/BC+		
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			OOOA/10060/SOB (1/14), DC/CF/SHOP/ADV OON/EOC (1/14), DC/CF/SHOP/ADV OON/PLAT SOB (1/14), DC/CF/ SHOP/BC ADV CDH OON/1500/ SOB (1/14), DC/CF/ SHOP/BC ADV OON/8050/ SOB (1/14), DC/CF/ SHOP/BC ADV/1000/OON/SOB (1/14), DC/CF/ SHOP/BC ADV OON/10070/SOB (1/14), DC/CF/ SHOP/BC+ OOP OON/1500/SOB (1/14), DC/CF/ SHOP/BC+ OOP OON CDH/2000/SOB (1/14), DC/CF/ SHOP/BC+ OOP OON/3500/SOB (1/14), DC/CF/ SHOP/BC+ OOP OON/2000/SOB (1/14), DC/CF/ SHOP/BC+OOP OON/10080/SOB (1/14), DC/CF/ SHOP/HB PLUS 300 SOB (1/14), DC/CF/ SHOP/HB PLUS 600 SOB (1/14), DC/CF/ SHOP/HB PLUS 1500 SOB (1/14), DC/CF/ SHOP/HB PLUS 2000 SOB (1/14), DC/CF/ SHOP/HB ADV 300/SOB (1/14), DC/CF/ SHOP/HB ADV 600 SOB (1/14), DC/CF/ SHOP/HB ADV 1500 SOB (1/14), DC/CF/ SHOP/HB ADV 2000 SOB (1/14), DC/CFBC/GC (1/14), DC/CFBC/ELIG (1/14), DC/CFBC/HMO/EOC (1/14), DC/CFBC/HMO/DOCS (1/14), DC/CFBC/HMO/BRZ SOB (1/14), DC/CFBC/HMO/1020/SOB (1/14), DC/CFBC/HMO/3040/SOB (1/14), DC/CFBC/HMO/250/SOB (1/14), DC/CFBC/BCOA/GOLD SOB (1/14),			
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TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004E Small Group Only - Other
Product Name: DC BC Small Group Eff 201501 - ACA
Project Name/Number: /1958

		DC/CFBC/BCOA/SIL SOB (1/14), DC/CFBC/HMO OA/3040/SOB (1/14), DC/CFBC/HMO OA/500/SOB (1/14), DC/CFBC/HMO OA HRA/1800/SOB (1/14), DC/CFBC/HMO OA CDH/1500/SOB (1/14), DC/CFBC/HMO OA CDH/2000/SOB (1/14), DC/CFBC/BCOO/DOCS (1/14), DC/CFBC/BC+ OOOA/10080/SOB (1/14), DC/CFBC/BC+ OOOA/10060/SOB (1/14), DC/CFBC/BC+ OOP IN/1500/SOB (1/14), DC/CFBC/BC+ OOP IN CDH/2000/SOB (1/14), DC/CFBC/BC+ OOP IN/3500/SOB (1/14), DC/CFBC/BC+ OOP IN/2000/SOB (1/14), DC/CFBC/BC+ OOP IN/10080/SOB (1/14), DC/CFBC/ADV IN/EOC (1/14), DC/CFBC/HB/ADV/DOCS (1/14), DC/CFBC/ADV IN/PLAT SOB (1/14), DC/CFBC/ADV CDH IN/1500/SOB (1/14), DC/CFBC/ADV IN/8050/SOB (1/14), DC/CFBC/ADV IN/10070SOB (1/14), DC/CFBC/ADV/1000/INN/SOB (1/14), DC/CFBC/HB HMO/300 SOB (1/14), DC/CFBC/HB HMO/600 SOB (1/14), DC/CFBC/HB HMO/1500 SOB (1/14), DC/CFBC/HB HMO/2000 SOB (1/14), DC/CF/OON/EOC (1/14), DC/CF/BC+ OOP OON/1500/SOB (1/14), DC/CF/BC+ OOP OON CDH/2000/SOB (1/14), DC/CF/BC+ OOP		
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		OON/3500/SOB (1/14), DC/CF/BC+ OOP OON/2000/SOB (1/14), DC/CF/BC+OOP OON/10080/SOB (1/14), DC/CF/ADV OON/PLAT SOB (1/14), DC/CF/BC ADV CDH OON/1500/ SOB (1/14), DC/CF/BC ADV OON/8050/ SOB (1/14), DC/CF/BC ADV/1000/OON/SOB (1/14), DC/CF/BC ADV OON/10070/SOB (1/14), DC/CFBC/HB PLUS 300 IN SOB (1/14), DC/CFBC/HB PLUS 600 IN SOB (1/14), DC/CFBC/HB PLUS 1500 IN SOB (1/14), DC/CFBC/HB PLUS 2000 IN SOB (1/14), DC/CFBC/HB ADV 300 IN SOB (1/14), DC/CFBC/HB ADV 600 IN SOB (1/14), DC/CFBC/HB ADV 1500 IN SOB (1/14), DC/CFBC/HB ADV 2000 IN SOB (1/14), DC/CF/HB PLUS 300 SOB (1/14), DC/CF/HB PLUS 600 SOB (1/14), DC/CF/HB PLUS 1500 SOB (1/14), DC/CF/HB PLUS 2000 SOB (1/14), DC/CF/HB ADV 300/SOB (1/14), DC/CF/HB ADV 600 SOB (1/14), DC/CF/HB ADV 1500 SOB (1/14), DC/CF/HB ADV 2000 SOB (1/14), and any amendments		
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**BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)**

**Rate Filing # 1958
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015**

Proposed Individual Base Rates

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Form Numbers

ON-Exchange

Forms Used for ALL ON-Exchange BlueChoice Group Products

DC/CFBC/SHOP/GC (1/14)
DC/CFBC/DOL APPEAL (R. 7/11)
DC/CFBC/SHOP/ELIG (1/14)
DC/CFBC/FAM PLAN (8/12)
DC/CFBC/PARTNER (R. 7/09)
DC/CFBC/PT PROTECT (9/10)
DC/CFBC/SHOP/2015 GC AMEND (1/15)
DC/CFBC/SHOP/2015 AMEND (1/15)

Forms Used for ALL ON-Exchange BlueChoice Group Products: Out-of-Network Forms (GHMSI)

DC/CF/SHOP/GC (1/14)
DC/CF/SHOP/ADV OON/EOC (1/14)
DC/GHMSI/DOL APPEAL (R. 11/11)
DC/CF/SHOP/EXC/DOCS (1/14)
DC/GHMSI/FAM PLAN (8/12)
DC/CF/PARTNER (R. 7/09)
DC/CF/BLCRD (1/12)
DC/CF/MEM/BLCRD (1/12)
DC/CF/ANCILLARY AMEND (10/12)
DC/CF/PT PROTECT (9/10)
DC/GHMSI-HEALTH GUARANTEE 2/08
DC/CF/SHOP/2015 GC AMEND (1/15)
DC/CF/SHOP/2015 AMEND (1/15)

Product: BlueChoice Plus (Plans: 100%/80%, \$20/\$30 and 100%/60%, \$20/\$30)

Network: Open Access

DC/CFBC/SHOP/EOC (1/14)
DC/CFBC/BCOO/DOCS (1/14)
DC/CFBC/BLCRD (1/12)
DC/CFBC/MEM/BLCRD (1/12)
DC/CFBC/BC+ OOOA/10080/SOB (R. 1/15)
DC/CFBC/BC+ OOOA/10060/SOB (R. 1/15)
DC/CFBC/HMO/INCENT (1/15)

Product: BlueChoice HMO and BlueChoice HMO Open Access

Network: Lock In / Referral (HMO), Open Access (HMO Open Access)

DC/CFBC/SHOP/EOC (1/14)
DC/CFBC/SHOP/EXC/DOCS (1/14)
DC/CFBC/BCOA/GOLD SOB (R. 1/15)
DC/CFBC/BCOA/SIL SOB (R. 1/15)
DC/CFBC/HMO/BRZ SOB (R. 1/15)
DC/CFBC/BLCRD (1/12)
DC/CFBC/MEM/BLCRD (1/12)
DC/CFBC/HMO/1020/SOB (R. 1/15)
DC/CFBC/HMO/3040/SOB (R. 1/15)
DC/CFBC/HMO/250/SOB (R. 1/15)
DC/CFBC/HMO OA/3040/SOB (R. 1/15)
DC/CFBC/HMO OA/500/SOB (R. 1/15)
DC/CFBC/HMO OA HRA/1800/SOB (R. 1/15)
DC/CFBC/HMO OA CDH/1500/SOB (R. 1/15)
DC/CFBC/HMO OA CDH /2000/SOB (R. 1/15)
DC/CFBC/HMO/INCENT (1/15)

Product: BlueChoice Advantage

In-Network

DC/CFBC/SHOP/ADV IN/EOC (1/14)
DC/CFBC/HB/SHOP/EXC/DOCS (1/14)
DC/CFBC/SHOP/ADV IN/PLAT SOB (1/14)
DC/CFBC/ADV IN/IPP GRP (1/14)
DC/CFBC/ADV IN/IPP MEM (1/14)
DC/CFBC/ANCILLARY AMEND (10/12)
DC/CFBC/ADV CDH IN/1500/SOB (R. 1/15)
DC/CFBC/ADV IN/8050/SOB (R. 1/15)
DC/CFBC/ADV IN/10070/SOB (R. 1/15)
DC/CFBC/ADV/1000/INN/SOB (R. 1/15)
DC/CFBC/ADV/500/INN/SOB (1/15)
DC/CFBC/ADV IN/INCENT (1/15)

Product: BlueChoice Plus (All Other Plans)

In-Network

DC/CFBC/SHOP/EOC (1/14)
DC/CFBC/SHOP/EXC/DOCS (1/14)
DC/CFBC/BLCRD (1/12)
DC/CFBC/MEM/BLCRD (1/12)
DC/CFBC/BC+ OOP IN/1500/ SOB (R. 1/15)
DC/CFBC/BC+ OOP IN CDH/2000/ SOB (R. 1/15)
DC/CFBC/BC+ OOP IN/3500/SOB (R. 1/15)
DC/CFBC/BC+ OOP IN/2000/SOB (R. 1/15)
DC/CFBC/BC+ OOP IN/10080/SOB (R. 1/15)
DC/CFBC/POS IN/INCENT (1/15)

Product: HealthyBlue Plus

In-Network

DC/CFBC/SHOP/ADV IN/EOC (1/14)
DC/CFBC/HB/SHOP/EXC/DOCS (1/14)
DC/CFBC/BLCRD (1/12)
DC/CFBC/MEM/BLCRD (1/12)
DC/CFBC/HB PLUS 300 IN SOB (R. 1/15)
DC/CFBC/HB PLUS 600 IN SOB (R. 1/15)
DC/CFBC/HB PLUS 1500 IN SOB (R. 1/15)
DC/CFBC/HB PLUS 2000 IN SOB (R. 1/15)
DC/CFBC/POS IN/INCENT (1/15)

Product: HealthyBlue Advantage

In-Network

DC/CFBC/SHOP/ADV IN/EOC (1/14)
DC/CFBC/HB/SHOP/EXC/DOCS (1/14)
DC/CFBC/ADV IN/IPP GRP (1/14)
DC/CFBC/ADV IN/IPP MEM (1/14)
DC/CFBC/ANCILLARY AMEND (10/12)
DC/CFBC/HB ADV 300 IN SOB (R. 1/15)
DC/CFBC/HB ADV 600 IN SOB (R. 1/15)
DC/CFBC/HB ADV 1500 IN SOB (R. 1/15)
DC/CFBC/HB ADV 2000 IN SOB (R. 1/15)
DC/CFBC/ADV IN/INCENT (1/15)

Product: BlueChoice Advantage

Out-of-Network (GHMSI)

DC/CF/ADV OON/PLAT SOB (R. 1/15)
DC/CF/BC ADV CDH OON/1500/ SOB (R. 1/15)
DC/CF/BC ADV OON/8050/ SOB (R. 1/15)
DC/CF/BC ADV/1000/OON/SOB (R. 1/15)
DC/CF/BC ADV OON/10070/SOB (R. 1/15)
DC/CF/BC ADV/500/OON/SOB (1/15)

Product: BlueChoice Plus (All Other Plans)

Out-of-Network (GHMSI)

DC/CF/BC+ OOP OON/1500/SOB (R. 1/15)
DC/CF/BC+ OOP OON CDH/2000/SOB (R. 1/15)
DC/CF/BC+ OOP OON/3500/SOB (R. 1/15)
DC/CF/BC+ OOP OON/2000/SOB (R. 1/15)
DC/CF/BC+OOP OON/10080/SOB (R. 1/15)

Product: HealthyBlue Plus

Out-of-Network (GHMSI)

DC/CF/HB PLUS 300 SOB (R. 1/15)
DC/CF/HB PLUS 600 SOB (R. 1/15)
DC/CF/HB PLUS 1500 SOB (R. 1/15)
DC/CF/HB PLUS 2000 SOB (R. 1/15)

Product: HealthyBlue Advantage

Out-of-Network (GHMSI)

DC/CF/HB ADV 300 SOB (R. 1/15)
DC/CF/HB ADV 600 SOB (R. 1/15)
DC/CF/HB ADV 1500 SOB (R. 1/15)
DC/CF/HB ADV 2000 SOB (R. 1/15)

Product: HealthyBlue HMO

Network: Open Access

DC/CFBC/SHOP/EOC (1/14)
DC/CFBC/HMO/DOCS (1/14)
DC/CFBC/BLCRD (1/12)
DC/CFBC/MEM/BLCRD (1/12)
DC/CFBC/HB HMO/300 SOB (R. 1/15)
DC/CFBC/HB HMO/600 SOB (R. 1/15)
DC/CFBC/HB HMO/1500 SOB (R. 1/15)
DC/CFBC/HB HMO/2000 SOB (R. 1/15)
DC/CFBC/HMO/INCENT (1/15)

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Premiums Effective 01/2015
BlueChoice Individual Base Rates - HMO - On Exchange

HIOS Plan ID	Product	Plan/Option	Rx Benefit*	In-Network							Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Estimated AV	01/2015 Individual Base Rate	10/2014 Individual Base Rate	Rate Change 01/2015 over 10/2014
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	Co-Ins	Ded	OOP Max					Total	Total	
86052DC0460003	HMO	BlueChoice HMO \$1,000	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$1,000	\$3,000	Y	Y	Gold	78.47%	\$352.70	\$341.29	3.3%
86052DC0480006	HMO Referral	BlueChoice HMO Referral \$30/\$40	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$200	\$250	NA	\$0	\$1,300	Y	Y	Platinum	88.31%	\$445.43	\$426.63	4.4%
86052DC0480005	HMO Referral	BlueChoice HMO Referral \$500	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$250	\$500	NA	\$500	\$3,000	Y	Y	Gold	78.77%	\$363.36	\$345.84	5.1%
86052DC0480004	HMO Referral	BlueChoice HMO Referral \$10/\$20	Non-Int: \$10/\$45/\$65/50%	\$10	\$20	\$50	\$0	NA	\$0	\$1,300	Y	Y	Platinum	90.60%	\$456.12	\$438.94	3.9%
86052DC0460007	HMO	BlueChoice HMO \$30/\$40	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$200	\$250	NA	\$0	\$1,300	Y	Y	Platinum	88.31%	\$467.94	\$447.54	4.6%
86052DC0460006	HMO	BlueChoice HMO \$250	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$250	\$500	NA	\$250	\$3,000	Y	Y	Gold	81.86%	\$398.30	\$375.19	6.2%
86052DC0460008	HMO	BlueChoice HMO \$1,800	Non-Int: \$10/\$45/\$65/50%	\$15	\$25	\$100	\$250	NA	\$1800	\$2,600	Y	Y	Gold	78.15%	\$347.61	\$334.63	3.9%
86052DC0490001	HMO Referral HSA/HRA	BlueChoice HMO Referral HSA/HRA \$4,000	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$4,000	\$6,350	Y	Y	Bronze	61.18%	\$219.06	\$211.14	3.8%
86052DC0470002	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$2,000, 80%	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$2,000	\$4,000	Y	Y	Silver	70.90%	\$285.43	\$275.83	3.5%
86052DC0470005	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$1,500	Int: \$10/\$45/\$65/50%	\$15	\$25	\$200	\$500	NA	\$1,500	\$2,000	Y	Y	Gold	79.69%	\$342.82	\$331.24	3.5%
86052DC0470006	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$2,000	Int: \$10/\$45/\$65/50%	\$0	\$0	\$225	\$300	NA	\$2,000	\$5,000	Y	Y	Silver	71.94%	\$293.94	\$277.97	5.7%

* Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Premiums Effective 01/2015
BlueChoice Individual Base Rates - BC Plus & BC Advantage - On Exchange

HIOS Plan ID	Product	Option	Rx Benefit**	In-Network							Out of Network			Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Est. AV	01/2015 Individual Base Rate	10/2014 Individual Base Rate	Rate Change 01/2015 over 10/2014
				PCP Copay	Specialist Copay	ER Copay	IP Copay	Co-Ins	Ded	OOP Max	Co-Ins*	Ded	OOP Max					Total	Total	
86052DC0500007	BC Plus	BlueChoice Plus 100%/60%, \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$100	\$250	NA	\$0	\$1,100	40%	\$300	\$2,200	Y	Y	Platinum	88.62%	\$462.62	\$443.25	4.4%
86052DC0500006	BC Plus	BlueChoice Plus 100%/80%, \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$100	\$250	NA	\$0	\$1,100	20%	\$300	\$2,200	Y	Y	Platinum	88.62%	\$474.10	\$454.70	4.3%
86052DC0500008	BC Plus	BlueChoice Plus 100%/80%, \$10/\$20	Non-Int: \$10/\$45/\$65/50%	\$10	\$20	\$100	\$250	NA	\$0	\$1,500	20%	\$300	\$3,000	Y	Y	Platinum	89.10%	\$487.90	\$468.23	4.2%
86052DC0500005	BC Plus	BlueChoice Plus \$2000	Non-Int: \$10/\$45/\$65/50%	\$0	\$0	\$200	\$300	NA	\$2,000	\$5,000	20%	\$4,000	\$7,500	Y	Y	Silver	71.88%	\$320.21	\$303.28	5.6%
86052DC0510004	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$1500	Int: \$10/\$45/\$65/50%	\$15	\$25	\$100	\$250	NA	\$1,500	\$4,000	20%	\$3,000	\$6,000	Y	Y	Silver	71.67%	\$315.17	\$301.54	4.5%
86052DC0510005	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$2000	Int: \$10/\$45/\$65/50%	\$0	\$0	\$100	\$250	NA	\$2,000	\$5,000	20%	\$4,000	\$7,500	Y	Y	Silver	68.90%	\$302.39	\$288.19	4.9%
86052DC0510006	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$3500	Int: \$10/\$45/\$65/50%	\$0	\$0	\$100	\$250	NA	\$3,500	\$5,250	20%	\$6,000	\$7,500	Y	Y	Bronze	61.62%	\$257.71	\$246.68	4.5%
86052DC0440004	BC Advantage	BlueChoice Advantage 90%/70%	Non-Int: \$10/20%/40%/50%	NA	NA	NA	NA	10%	\$0	IN: \$2500 OON: \$3500	30%	\$2,000	\$3,500	Y	Y	Platinum	90.26%	\$482.82	\$462.65	4.4%
86052DC0440006	BC Advantage	BlueChoice Advantage 80%/50%	Non-Int: \$10/\$45/\$65/50%	\$20	\$20	\$100	\$250	NA	\$0	\$1,500	50%	\$1,000	\$3,000	Y	Y	Platinum	88.76%	\$494.85	\$469.06	5.5%
86052DC0440007	BC Advantage	BlueChoice Advantage 100%/70%	Non-Int: \$10/\$45/\$65/50%	\$30	\$30	\$200	\$300	NA	\$0	\$1,100	30%	\$500	\$2,200	Y	Y	Platinum	88.37%	\$489.25	\$462.93	5.7%
86052DC0440009	BC Advantage	BlueChoice Advantage \$500 \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$300	\$500	NA	\$500	\$4,500	\$50 PCP/SPEC, \$750 IP	\$1,000	\$7,500	Y	Y	Gold	78.51%	\$404.97	n/a	n/a
86052DC0440008	BC Advantage	BlueChoice Advantage \$1000	Non-Int: \$10/\$45/\$65/50%	\$30	\$30	\$300	\$300	NA	\$1,000	\$2,500	30%	\$3,000	\$5,000	Y	Y	Gold	78.69%	\$383.24	\$363.75	5.4%
86052DC0450002	BC Advantage HSA/HRA	BlueChoice Advantage HSA/HRA \$1500	Int: \$10/\$45/\$65/50%	\$30	\$30	\$300	\$300	NA	\$1,500	\$4,000	30%	\$3,000	\$6,000	Y	Y	Silver	70.35%	\$317.85	\$298.49	6.5%

* Includes PCP, Specialist, and IP with ER same as In-Network

** Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
 Premiums Effective 01/2015
 BlueChoice Individual Base Rates - HealthyBlue - On Exchange

HIOS Plan ID	Product	Plan/Option	Rx Benefit*	In-Network							10/2014 Individual Base Rate Total	10/2014 Individual Base Rate Total	Rate Change 01/2015 over 10/2014				
				PCP Copay	Specialist Copay	ER Copay	IP Copay	Co-Ins	Ded	OOP Max				Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Estimated AV
86052DC0540005	HB HMO	HealthyBlue HMO \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	1500	Y	Y	Platinum	90.26%	\$457.55	\$434.63	5.3%
86052DC0540006	HB HMO	HealthyBlue HMO \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	1500	Y	Y	Platinum	89.81%	\$444.98	\$424.75	4.8%
86052DC0540004	HB HMO	HealthyBlue HMO \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1,500	5500	Y	Y	Gold	81.88%	\$374.54	\$349.79	7.1%
86052DC0550002	HB HMO HSA/HRA	HealthyBlue HMO HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	Y	Y	Silver	70.81%	\$290.51	\$271.77	6.9%

HIOS Plan ID	Product	Option	Rx Benefit*	In-Network							Out of Network				10/2014 Individual Base Rate Total	10/1/2014 Individual Base Rate Total	Rate Change 01/2015 over 10/2014						
				PCP Copay	Specialist Copay	ER Copay	IP Copay	Co-Ins	Ded	OOP Max	ER Copay	IP Copay	OP Surg Copay	Other Services Copay				OOP Max	Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Est. AV	
86052DC0560005	HB Plus	HealthyBlue Plus \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	\$1,500	\$200	\$500	\$500	\$50	\$1,000	\$3,000	Y	Y	Platinum	90.26%	\$470.66	\$448.46	5.0%
86052DC0560006	HB Plus	HealthyBlue Plus \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	\$1,500	\$200	\$500	\$500	\$50	\$1,500	\$3,000	Y	Y	Platinum	89.81%	\$457.74	\$438.26	4.4%
86052DC0560004	HB Plus	HealthyBlue Plus \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1,500	\$5,500	\$200	\$500	\$500	\$50	\$3,000	\$7,500	Y	Y	Gold	81.88%	\$385.28	\$360.91	6.8%
86052DC0570002	HB Plus HSA/HRA	HealthyBlue Plus HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	\$200	\$500	\$500	\$50	\$4,000	\$7,500	Y	Y	Silver	70.81%	\$298.84	\$280.42	6.6%
86052DC0520005	HB Advantage	HealthyBlue Advantage \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	\$1,500	\$200	\$500	\$500	\$50	\$1,000	\$3,000	Y	Y	Platinum	90.26%	\$480.96	\$453.21	6.1%
86052DC0520006	HB Advantage	HealthyBlue Advantage \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	\$1,500	\$200	\$500	\$500	\$50	\$1,500	\$3,000	Y	Y	Platinum	89.81%	\$467.76	\$442.90	5.6%
86052DC0520004	HB Advantage	HealthyBlue Advantage \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1,500	\$5,500	\$200	\$500	\$500	\$50	\$3,000	\$7,500	Y	Y	Gold	81.88%	\$393.71	\$364.74	7.9%
86052DC0530002	HB Advantage HSA/HRA	HealthyBlue Advantage HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	\$200	\$500	\$500	\$50	\$4,000	\$7,500	Y	Y	Silver	70.81%	\$305.38	\$283.39	7.8%

* Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
 Premiums Effective 04/2015
 BlueChoice Individual Base Rates - HMO - On Exchange

HIOS Plan ID	Product	Plan/Option	Rx Benefit*	In-Network							Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Estimated AV	04/2015 Individual Base Rate	01/2015 Individual Base Rate	Rate Change 04/2015 over 01/2015
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Ded	OOP Max					Total	Total	
86052DC0460003	HMO	BlueChoice HMO \$1,000	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$1,000	\$3,000	Y	Y	Gold	78.47%	\$357.35	\$352.70	1.3%
86052DC0480006	HMO Referral	BlueChoice HMO Referral \$30/\$40	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$200	\$250	NA	\$0	\$1,300	Y	Y	Platinum	88.31%	\$451.31	\$445.43	1.3%
86052DC0480005	HMO Referral	BlueChoice HMO Referral \$500	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$250	\$500	NA	\$500	\$3,000	Y	Y	Gold	78.77%	\$368.15	\$363.36	1.3%
86052DC0480004	HMO Referral	BlueChoice HMO Referral \$10/\$20	Non-Int: \$10/\$45/\$65/50%	\$10	\$20	\$50	\$0	NA	\$0	\$1,300	Y	Y	Platinum	90.60%	\$462.13	\$456.12	1.3%
86052DC0460007	HMO	BlueChoice HMO \$30/\$40	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$200	\$250	NA	\$0	\$1,300	Y	Y	Platinum	88.31%	\$474.11	\$467.94	1.3%
86052DC0460006	HMO	BlueChoice HMO \$250	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$250	\$500	NA	\$250	\$3,000	Y	Y	Gold	81.86%	\$403.55	\$398.30	1.3%
86052DC0460008	HMO	BlueChoice HMO \$1,800	Non-Int: \$10/\$45/\$65/50%	\$15	\$25	\$100	\$250	NA	\$1800	\$2,600	Y	Y	Gold	78.15%	\$352.19	\$347.61	1.3%
86052DC0490001	HMO Referral HSA/HRA	BlueChoice HMO Referral HSA/HRA \$4,000	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$4,000	\$6,350	Y	Y	Bronze	61.18%	\$221.94	\$219.06	1.3%
86052DC0470002	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$2,000, 80%	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$2,000	\$4,000	Y	Y	Silver	70.90%	\$289.17	\$285.43	1.3%
86052DC0470005	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$1,500	Int: \$10/\$45/\$65/50%	\$15	\$25	\$200	\$500	NA	\$1,500	\$2,000	Y	Y	Gold	79.69%	\$347.31	\$342.82	1.3%
86052DC0470006	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$2,000	Int: \$10/\$45/\$65/50%	\$0	\$0	\$225	\$300	NA	\$2,000	\$5,000	Y	Y	Silver	71.94%	\$297.79	\$293.94	1.3%

* Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Premiums Effective 04/2015
BlueChoice Individual Base Rates - BC Plus & BC Advantage - On Exchange

HIOS Plan ID	Product	Option	Rx Benefit**	In-Network							Out of Network			Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Est. AV	04/2015	01/2015	Rate Change 04/2015 over 01/2015
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co- Ins	Ded	OOP Max	Co-Ins*	Ded	OOP Max					Individual Base Rate Total	Individual Base Rate Total	
86052DC0500007	BC Plus	BlueChoice Plus 100%/60%, \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$100	\$250	NA	\$0	\$1,100	40%	\$300	\$2,200	Y	Y	Platinum	88.62%	\$468.71	\$462.62	1.3%
86052DC0500006	BC Plus	BlueChoice Plus 100%/80%, \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$100	\$250	NA	\$0	\$1,100	20%	\$300	\$2,200	Y	Y	Platinum	88.62%	\$480.35	\$474.10	1.3%
86052DC0500008	BC Plus	BlueChoice Plus 100%/80%, \$10/\$20	Non-Int: \$10/\$45/\$65/50%	\$10	\$20	\$100	\$250	NA	\$0	\$1,500	20%	\$300	\$3,000	Y	Y	Platinum	89.10%	\$494.33	\$487.90	1.3%
86052DC0500005	BC Plus	BlueChoice Plus \$2000	Non-Int: \$10/\$45/\$65/50%	\$0	\$0	\$200	\$300	NA	\$2,000	\$5,000	20%	\$4,000	\$7,500	Y	Y	Silver	71.88%	\$324.43	\$320.21	1.3%
86052DC0510004	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$1500	Int: \$10/\$45/\$65/50%	\$15	\$25	\$100	\$250	NA	\$1,500	\$4,000	20%	\$3,000	\$6,000	Y	Y	Silver	71.67%	\$319.30	\$315.17	1.3%
86052DC0510005	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$2000	Int: \$10/\$45/\$65/50%	\$0	\$0	\$100	\$250	NA	\$2,000	\$5,000	20%	\$4,000	\$7,500	Y	Y	Silver	68.90%	\$306.35	\$302.39	1.3%
86052DC0510006	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$3500	Int: \$10/\$45/\$65/50%	\$0	\$0	\$100	\$250	NA	\$3,500	\$5,250	20%	\$6,000	\$7,500	Y	Y	Bronze	61.62%	\$261.09	\$257.71	1.3%
86052DC0440004	BC Advantage	BlueChoice Advantage 90%/70%	Non-Int: \$10/20%/40%/50%	NA	NA	NA	NA	10%	\$0	IN: \$2500 OON: \$3500	30%	\$2,000	\$3,500	Y	Y	Platinum	90.26%	\$489.19	\$482.82	1.3%
86052DC0440006	BC Advantage	BlueChoice Advantage 80%/50%	Non-Int: \$10/\$45/\$65/50%	\$20	\$20	\$100	\$250	NA	\$0	\$1,500	50%	\$1,000	\$3,000	Y	Y	Platinum	88.76%	\$501.38	\$494.85	1.3%
86052DC0440007	BC Advantage	BlueChoice Advantage 100%/70%	Non-Int: \$10/\$45/\$65/50%	\$30	\$30	\$200	\$300	NA	\$0	\$1,100	30%	\$500	\$2,200	Y	Y	Platinum	88.37%	\$495.70	\$489.25	1.3%
86052DC0440009	BC Advantage	BlueChoice Advantage \$500 \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$300	\$500	NA	\$500	\$4,500	\$50 PCP/SPEC, \$750 IP	\$1,000	\$7,500	Y	Y	Gold	78.51%	\$410.31	\$404.97	1.3%
86052DC0440008	BC Advantage	BlueChoice Advantage \$1000	Non-Int: \$10/\$45/\$65/50%	\$30	\$30	\$300	\$300	NA	\$1,000	\$2,500	30%	\$3,000	\$5,000	Y	Y	Gold	78.69%	\$388.29	\$383.24	1.3%
86052DC0450002	BC Advantage HSA/HRA	BlueChoice Advantage HSA/HRA \$1500	Int: \$10/\$45/\$65/50%	\$30	\$30	\$300	\$300	NA	\$1,500	\$4,000	30%	\$3,000	\$6,000	Y	Y	Silver	70.35%	\$322.01	\$317.85	1.3%

* Includes PCP, Specialist, and IP with ER same as In-Network
** Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Premiums Effective 04/2015
BlueChoice Individual Base Rates - HealthyBlue - On Exchange

HIOS Plan ID	Product	Plan/Option	Rx Benefit*	In-Network							Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Estimated AV	04/2015 Individual Base Rate	01/2015 Individual Base Rate	Rate Change 04/2015 over 01/2015
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Ded	OOP Max					Total	Total	
86052DC0540005	HB HMO	HealthyBlue HMO \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	1500	Y	Y	Platinum	90.26%	\$463.58	\$457.55	1.3%
86052DC0540006	HB HMO	HealthyBlue HMO \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	1500	Y	Y	Platinum	89.81%	\$450.85	\$444.98	1.3%
86052DC0540004	HB HMO	HealthyBlue HMO \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1500	5500	Y	Y	Gold	81.88%	\$379.48	\$374.54	1.3%
86052DC0550002	HB HMO HSA/HRA	HealthyBlue HMO HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	Y	Y	Silver	70.81%	\$294.32	\$290.51	1.3%

HIOS ID	Product	Option	Rx Benefit*	In-Network							Out of Network				04/2015 Individual Base Rate	01/2015 Individual Base Rate	Rate Change 04/2015 over 01/2015						
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Ded	OOP Max	ER Copay	I/P Copay	OP Surg Copay	Other Services Copay				Ded	OOP Max	Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Est. AV
86052DC0560005	HB Plus	HealthyBlue Plus \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	\$1,500	\$200	\$500	\$500	\$50	\$1,000	\$3,000	Y	Y	Platinum	90.26%	\$476.87	\$470.66	1.3%
86052DC0560006	HB Plus	HealthyBlue Plus \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	\$1,500	\$200	\$500	\$500	\$50	\$1,500	\$3,000	Y	Y	Platinum	89.81%	\$463.77	\$457.74	1.3%
86052DC0560004	HB Plus	HealthyBlue Plus \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1,500	\$5,500	\$200	\$500	\$500	\$50	\$3,000	\$7,500	Y	Y	Gold	81.88%	\$390.36	\$385.28	1.3%
86052DC0570002	HB Plus HSA/HRA	HealthyBlue Plus HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	\$200	\$500	\$500	\$50	\$4,000	\$7,500	Y	Y	Silver	70.81%	\$302.75	\$298.84	1.3%
86052DC0520005	HB Advantage	HealthyBlue Advantage \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	\$1,500	\$200	\$500	\$500	\$50	\$1,000	\$3,000	Y	Y	Platinum	90.26%	\$487.30	\$480.96	1.3%
86052DC0520006	HB Advantage	HealthyBlue Advantage \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	\$1,500	\$200	\$500	\$500	\$50	\$1,500	\$3,000	Y	Y	Platinum	89.81%	\$473.92	\$467.76	1.3%
86052DC0520004	HB Advantage	HealthyBlue Advantage \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1,500	\$5,500	\$200	\$500	\$500	\$50	\$3,000	\$7,500	Y	Y	Gold	81.88%	\$398.90	\$393.71	1.3%
86052DC0530002	HB Advantage HSA/HRA	HealthyBlue Advantage HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	\$200	\$500	\$500	\$50	\$4,000	\$7,500	Y	Y	Silver	70.81%	\$309.38	\$305.38	1.3%

* Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Premiums Effective 07/2015
BlueChoice Individual Base Rates - HMO - On Exchange

HIOS Plan ID	Product	Plan/Option	Rx Benefit*	In-Network								Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Estimated AV	07/2015 Individual Base Rate	04/2015 Individual Base Rate	Rate Change 07/2015 over 04/2015
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Ded	OOP Max	Total					Total		
86052DC0460003	HMO	BlueChoice HMO \$1,000	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$1,000	\$3,000	Y	Y	Gold	78.47%	\$362.17	\$357.35	1.3%	
86052DC0480006	HMO Referral	BlueChoice HMO Referral \$30/\$40	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$200	\$250	NA	\$0	\$1,300	Y	Y	Platinum	88.31%	\$457.39	\$451.31	1.3%	
86052DC0480005	HMO Referral	BlueChoice HMO Referral \$500	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$250	\$500	NA	\$500	\$3,000	Y	Y	Gold	78.77%	\$373.11	\$368.15	1.3%	
86052DC0480004	HMO Referral	BlueChoice HMO Referral \$10/\$20	Non-Int: \$10/\$45/\$65/50%	\$10	\$20	\$50	\$0	NA	\$0	\$1,300	Y	Y	Platinum	90.60%	\$468.36	\$462.13	1.3%	
86052DC0460007	HMO	BlueChoice HMO \$30/\$40	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$200	\$250	NA	\$0	\$1,300	Y	Y	Platinum	88.31%	\$480.51	\$474.11	1.3%	
86052DC0460006	HMO	BlueChoice HMO \$250	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$250	\$500	NA	\$250	\$3,000	Y	Y	Gold	81.86%	\$408.99	\$403.55	1.3%	
86052DC0460008	HMO	BlueChoice HMO \$1,800	Non-Int: \$10/\$45/\$65/50%	\$15	\$25	\$100	\$250	NA	\$1800	\$2,600	Y	Y	Gold	78.15%	\$356.94	\$352.19	1.3%	
86052DC0490001	HMO Referral HSA/HRA	BlueChoice HMO Referral HSA/HRA \$4,000	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$4,000	\$6,350	Y	Y	Bronze	61.18%	\$224.91	\$221.94	1.3%	
86052DC0470002	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$2,000, 80%	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$2,000	\$4,000	Y	Y	Silver	70.90%	\$293.04	\$289.17	1.3%	
86052DC0470005	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$1,500	Int: \$10/\$45/\$65/50%	\$15	\$25	\$200	\$500	NA	\$1,500	\$2,000	Y	Y	Gold	79.69%	\$351.97	\$347.31	1.3%	
86052DC0470006	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$2,000	Int: \$10/\$45/\$65/50%	\$0	\$0	\$225	\$300	NA	\$2,000	\$5,000	Y	Y	Silver	71.94%	\$301.78	\$297.79	1.3%	

* Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Premiums Effective 07/2015
BlueChoice Individual Base Rates - BC Plus & BC Advantage - On Exchange

HIOS Plan ID	Product	Option	Rx Benefit**	In-Network								Out of Network			Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Est. AV	07/2015 Individual Base Rate	04/2015 Individual Base Rate	Rate Change 07/2015 over 04/2015
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Ded	OOP Max	Co-Ins*	Ded	OOP Max	Total					Total		
86052DC0500007	BC Plus	BlueChoice Plus 100%/60%, \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$100	\$250	NA	\$0	\$1,100	40%	\$300	\$2,200	Y	Y	Platinum	88.62%	\$475.03	\$468.71	1.3%	
86052DC0500006	BC Plus	BlueChoice Plus 100%/80%, \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$100	\$250	NA	\$0	\$1,100	20%	\$300	\$2,200	Y	Y	Platinum	88.62%	\$486.83	\$480.35	1.3%	
86052DC0500008	BC Plus	BlueChoice Plus 100%/80%, \$10/\$20	Non-Int: \$10/\$45/\$65/50%	\$10	\$20	\$100	\$250	NA	\$0	\$1,500	20%	\$300	\$3,000	Y	Y	Platinum	89.10%	\$500.99	\$494.33	1.3%	
86052DC0500005	BC Plus	BlueChoice Plus \$2000	Non-Int: \$10/\$45/\$65/50%	\$0	\$0	\$200	\$300	NA	\$2,000	\$5,000	20%	\$4,000	\$7,500	Y	Y	Silver	71.88%	\$328.81	\$324.43	1.4%	
86052DC0510004	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$1500	Int: \$10/\$45/\$65/50%	\$15	\$25	\$100	\$250	NA	\$1,500	\$4,000	20%	\$3,000	\$6,000	Y	Y	Silver	71.67%	\$323.58	\$319.30	1.3%	
86052DC0510005	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$2000	Int: \$10/\$45/\$65/50%	\$0	\$0	\$100	\$250	NA	\$2,000	\$5,000	20%	\$4,000	\$7,500	Y	Y	Silver	68.90%	\$310.46	\$306.35	1.3%	
86052DC0510006	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$3500	Int: \$10/\$45/\$65/50%	\$0	\$0	\$100	\$250	NA	\$3,500	\$5,250	20%	\$6,000	\$7,500	Y	Y	Bronze	61.62%	\$264.59	\$261.09	1.3%	
86052DC0440004	BC Advantage	BlueChoice Advantage 90%/70%	Non-Int: \$10/20%/40%/50%	NA	NA	NA	NA	10%	\$0	\$2,500	30%	\$2,000	\$3,500	Y	Y	Platinum	90.26%	\$495.78	\$489.19	1.3%	
86052DC0440006	BC Advantage	BlueChoice Advantage 80%/50%	Non-Int: \$10/\$45/\$65/50%	\$20	\$20	\$100	\$250	NA	\$0	\$1,500	50%	\$1,000	\$3,000	Y	Y	Platinum	88.76%	\$508.14	\$501.38	1.3%	
86052DC0440007	BC Advantage	BlueChoice Advantage 100%/70%	Non-Int: \$10/\$45/\$65/50%	\$30	\$30	\$200	\$300	NA	\$0	\$1,100	30%	\$500	\$2,200	Y	Y	Platinum	88.37%	\$502.38	\$495.70	1.3%	
86052DC0440009	BC Advantage	BlueChoice Advantage \$500 \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$300	\$500	NA	\$500	\$4,500	\$50 PCP/SPEC, \$750 IP	\$1,000	\$7,500	Y	Y	Gold	78.51%	\$415.84	\$410.31	1.3%	
86052DC0440008	BC Advantage	BlueChoice Advantage \$1000	Non-Int: \$10/\$45/\$65/50%	\$30	\$30	\$300	\$300	NA	\$1,000	\$2,500	30%	\$3,000	\$5,000	Y	Y	Gold	78.69%	\$393.53	\$388.29	1.3%	
86052DC0450002	BC Advantage HSA/HRA	BlueChoice Advantage HSA/HRA \$1500	Int: \$10/\$45/\$65/50%	\$30	\$30	\$300	\$300	NA	\$1,500	\$4,000	30%	\$3,000	\$6,000	Y	Y	Silver	70.35%	\$326.33	\$322.01	1.3%	

* Includes PCP, Specialist, and IP with ER same as In-Network
** Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Premiums Effective 07/2015
BlueChoice Individual Base Rates - HealthyBlue - On Exchange

HIOS Plan ID	Product	Plan/Option	Rx Benefit*	In-Network								Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Estimated AV	07/2015 Individual Base Rate	04/2015 Individual Base Rate	Rate Change 07/2015 over 04/2015
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Ded	OOP Max	Total					Total		
86052DC0540005	HB HMO	HealthyBlue HMO \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	1500	Y	Y	Platinum	90.26%	\$469.83	\$463.58	1.3%	
86052DC0540006	HB HMO	HealthyBlue HMO \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	1500	Y	Y	Platinum	89.81%	\$456.93	\$450.85	1.3%	
86052DC0540004	HB HMO	HealthyBlue HMO \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1500	5500	Y	Y	Gold	81.88%	\$384.60	\$379.48	1.3%	
86052DC0550002	HB HMO HSA/HRA	HealthyBlue HMO HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	Y	Y	Silver	70.81%	\$298.26	\$294.32	1.3%	

HIOS ID	Product	Option	Rx Benefit*	In-Network								Out of Network						07/2015 Individual Base Rate	04/2015 Individual Base Rate	Rate Change 07/2015 over 04/2015			
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Ded	OOP Max	ER Copay	I/P Copay	OP Surg Copay	Other Services Copay	Ded	OOP Max	Embedded Pediatric Vision				Embedded Pediatric Dental	Metal Tier	Est. AV
86052DC0560005	HB Plus	HealthyBlue Plus \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	\$1,500	\$200	\$500	\$500	\$50	\$1,000	\$3,000	Y	Y	Platinum	90.26%	\$483.29	\$476.87	1.3%
86052DC0560006	HB Plus	HealthyBlue Plus \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	\$1,500	\$200	\$500	\$500	\$50	\$1,500	\$3,000	Y	Y	Platinum	89.81%	\$470.02	\$463.77	1.3%
86052DC0560004	HB Plus	HealthyBlue Plus \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1,500	\$5,500	\$200	\$500	\$500	\$50	\$3,000	\$7,500	Y	Y	Gold	81.88%	\$395.62	\$390.36	1.3%
86052DC0570002	HB Plus HSA/HRA	HealthyBlue Plus HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	\$200	\$500	\$500	\$50	\$4,000	\$7,500	Y	Y	Silver	70.81%	\$306.81	\$302.75	1.3%
86052DC0520005	HB Advantage	HealthyBlue Advantage \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	\$1,500	\$200	\$500	\$500	\$50	\$1,000	\$3,000	Y	Y	Silver	90.26%	\$493.87	\$487.30	1.3%
86052DC0520006	HB Advantage	HealthyBlue Advantage \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	\$1,500	\$200	\$500	\$500	\$50	\$1,500	\$3,000	Y	Y	Silver	89.81%	\$480.31	\$473.92	1.3%
86052DC0520004	HB Advantage	HealthyBlue Advantage \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1,500	\$5,500	\$200	\$500	\$500	\$50	\$3,000	\$7,500	Y	Y	Silver	81.88%	\$404.28	\$398.90	1.3%
86052DC0530002	HB Advantage HSA/HRA	HealthyBlue Advantage HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	\$200	\$500	\$500	\$50	\$4,000	\$7,500	Y	Y	Silver	70.81%	\$313.53	\$309.38	1.3%

* Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Premiums Effective 10/2015
BlueChoice Individual Base Rates - HMO - On Exchange

HIOS Plan ID	Product	Plan/Option	Rx Benefit*	In-Network							Ded	OOP Max	Embedded Pediatric	Embedded Pediatric	Metal Tier	Estimated AV	10/2015 Individual Base Rate	07/2015 Individual Base Rate	Rate Change 10/2015 over 07/2015
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Vision	Dental			Total	Total					
86052DC0460003	HMO	BlueChoice HMO \$1,000	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$1,000	\$3,000	Y	Y	Gold	78.47%	\$367.03	\$362.17	1.3%		
86052DC0480006	HMO Referral	BlueChoice HMO Referral \$30/\$40	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$200	\$250	NA	\$0	\$1,300	Y	Y	Platinum	88.31%	\$463.53	\$457.39	1.3%		
86052DC0480005	HMO Referral	BlueChoice HMO Referral \$500	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$250	\$500	NA	\$500	\$3,000	Y	Y	Gold	78.77%	\$378.12	\$373.11	1.3%		
86052DC0480004	HMO Referral	BlueChoice HMO Referral \$10/\$20	Non-Int: \$10/\$45/\$65/50%	\$10	\$20	\$50	\$0	NA	\$0	\$1,300	Y	Y	Platinum	90.60%	\$474.65	\$468.36	1.3%		
86052DC0460007	HMO	BlueChoice HMO \$30/\$40	Non-Int: \$10/\$45/\$65/50%	\$30	\$40	\$200	\$250	NA	\$0	\$1,300	Y	Y	Platinum	88.31%	\$486.95	\$480.51	1.3%		
86052DC0460006	HMO	BlueChoice HMO \$250	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$250	\$500	NA	\$250	\$3,000	Y	Y	Gold	81.86%	\$414.48	\$408.99	1.3%		
86052DC0460008	HMO	BlueChoice HMO \$1,800	Non-Int: \$10/\$45/\$65/50%	\$15	\$25	\$100	\$250	NA	\$1800	\$2,600	Y	Y	Gold	78.15%	\$361.73	\$356.94	1.3%		
86052DC0490001	HMO Referral HSA/HRA	BlueChoice HMO Referral HSA/HRA \$4,000	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$4,000	\$6,350	Y	Y	Bronze	61.18%	\$227.91	\$224.91	1.3%		
86052DC0470002	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$2,000, 80%	Int: \$10/20%/40%/50%	NA	NA	NA	NA	20%	\$2,000	\$4,000	Y	Y	Silver	70.90%	\$296.95	\$293.04	1.3%		
86052DC0470005	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$1,500	Int: \$10/\$45/\$65/50%	\$15	\$25	\$200	\$500	NA	\$1,500	\$2,000	Y	Y	Gold	79.69%	\$356.66	\$351.97	1.3%		
86052DC0470006	HMO HSA/HRA	BlueChoice HMO HSA/HRA \$2,000	Int: \$10/\$45/\$65/50%	\$0	\$0	\$225	\$300	NA	\$2,000	\$5,000	Y	Y	Silver	71.94%	\$305.81	\$301.78	1.3%		

* Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Premiums Effective 10/2015
BlueChoice Individual Base Rates - BC Plus & BC Advantage - On Exchange

HIOS Plan ID	Product	Option	Rx Benefit**	In-Network							Out of Network			Embedded Pediatric		Metal Tier	Est. AV	10/2015 Individual Base Rate	07/2015 Individual Base Rate	Rate Change 10/2015 over 07/2015
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Ded	OOP Max	Co-Ins*	Ded	OOP Max	Vision	Dental			Total	Total	
86052DC0500007	BC Plus	BlueChoice Plus 100%/60%, \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$100	\$250	NA	\$0	\$1,100	40%	\$300	\$2,200	Y	Y	Platinum	88.62%	\$481.41	\$475.03	1.3%
86052DC0500006	BC Plus	BlueChoice Plus 100%/80%, \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$100	\$250	NA	\$0	\$1,100	20%	\$300	\$2,200	Y	Y	Platinum	88.62%	\$493.36	\$486.83	1.3%
86052DC0500008	BC Plus	BlueChoice Plus 100%/80%, \$10/\$20	Non-Int: \$10/\$45/\$65/50%	\$10	\$20	\$100	\$250	NA	\$0	\$1,500	20%	\$300	\$3,000	Y	Y	Platinum	89.10%	\$507.72	\$500.99	1.3%
86052DC0500005	BC Plus	BlueChoice Plus \$2000	Non-Int: \$10/\$45/\$65/50%	\$0	\$0	\$200	\$300	NA	\$2,000	\$5,000	20%	\$4,000	\$7,500	Y	Y	Silver	71.88%	\$333.22	\$328.81	1.3%
86052DC0510004	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$1500	Int: \$10/\$45/\$65/50%	\$15	\$25	\$100	\$250	NA	\$1,500	\$4,000	20%	\$3,000	\$6,000	Y	Y	Silver	71.67%	\$327.90	\$323.58	1.3%
86052DC0510005	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$2000	Int: \$10/\$45/\$65/50%	\$0	\$0	\$100	\$250	NA	\$2,000	\$5,000	20%	\$4,000	\$7,500	Y	Y	Silver	68.90%	\$314.60	\$310.46	1.3%
86052DC0510006	BC Plus HSA/HRA	BlueChoice Plus HSA/HRA \$3500	Int: \$10/\$45/\$65/50%	\$0	\$0	\$100	\$250	NA	\$3,500	\$5,250	20%	\$6,000	\$7,500	Y	Y	Bronze	61.62%	\$268.12	\$264.59	1.3%
86052DC0440004	BC Advantage	BlueChoice Advantage 90%/70%	Non-Int: \$10/20%/40%/50%	NA	NA	NA	NA	10%	\$0	IN: \$2500 OON: \$3500	30%	\$2,000	\$3,500	Y	Y	Platinum	90.26%	\$502.43	\$495.78	1.3%
86052DC0440006	BC Advantage	BlueChoice Advantage 80%/50%	Non-Int: \$10/\$45/\$65/50%	\$20	\$20	\$100	\$250	NA	\$0	\$1,500	50%	\$1,000	\$3,000	Y	Y	Platinum	88.76%	\$514.96	\$508.14	1.3%
86052DC0440007	BC Advantage	BlueChoice Advantage 100%/70%	Non-Int: \$10/\$45/\$65/50%	\$30	\$30	\$200	\$300	NA	\$0	\$1,100	30%	\$500	\$2,200	Y	Y	Platinum	88.37%	\$509.13	\$502.38	1.3%
86052DC0440009	BC Advantage	BlueChoice Advantage \$500 \$20/\$30	Non-Int: \$10/\$45/\$65/50%	\$20	\$30	\$300	\$500	NA	\$500	\$4,500	\$50 PCP/SPEC, \$750 IP	\$1,000	\$7,500	Y	Y	Gold	78.51%	\$421.42	\$415.84	1.3%
86052DC0440008	BC Advantage	BlueChoice Advantage \$1000	Non-Int: \$10/\$45/\$65/50%	\$30	\$30	\$300	\$300	NA	\$1,000	\$2,500	30%	\$3,000	\$5,000	Y	Y	Gold	78.69%	\$398.81	\$393.53	1.3%
86052DC0450002	BC Advantage HSA/HRA	BlueChoice Advantage HSA/HRA \$1500	Int: \$10/\$45/\$65/50%	\$30	\$30	\$300	\$300	NA	\$1,500	\$4,000	30%	\$3,000	\$6,000	Y	Y	Silver	70.35%	\$330.68	\$326.33	1.3%

* Includes PCP, Specialist, and IP with ER same as In-Network

** Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Premiums Effective 10/2015
BlueChoice Individual Base Rates - HealthyBlue - On Exchange

HIOS Plan ID	Product	Plan/Option	Rx Benefit*	In-Network								Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Estimated AV	10/2015 Individual Base Rate Total	07/2015 Individual Base Rate Total	Rate Change 10/2015 over 07/2015
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Ded	OOP Max								
86052DC0540005	HB HMO	HealthyBlue HMO \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	1500	Y	Y	Platinum	90.26%	\$476.13	\$469.83	1.3%	
86052DC0540006	HB HMO	HealthyBlue HMO \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	1500	Y	Y	Platinum	89.81%	\$463.06	\$456.93	1.3%	
86052DC0540004	HB HMO	HealthyBlue HMO \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1500	5500	Y	Y	Gold	81.88%	\$389.76	\$384.60	1.3%	
86052DC0550002	HB HMO HSA/HRA	HealthyBlue HMO HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	Y	Y	Silver	70.81%	\$302.24	\$298.26	1.3%	

HIOS ID	Product	Option	Rx Benefit*	In-Network								Out of Network				Embedded Pediatric Vision	Embedded Pediatric Dental	Metal Tier	Est. AV	10/2015 Individual Base Rate Total	07/2015 Individual Base Rate Total	Rate Change 10/2015 over 07/2015	
				PCP Copay	Specialist Copay	ER Copay	I/P Copay	I/P Co-Ins	Ded	OOP Max	ER Copay	I/P Copay	OP Surg Copay	Other Services Copay	Ded								OOP Max
86052DC0560005	HB Plus	HealthyBlue Plus \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	\$1,500	\$200	\$500	\$500	\$50	\$1,000	\$3,000	Y	Y	Platinum	90.26%	\$489.78	\$483.29	1.3%
86052DC0560006	HB Plus	HealthyBlue Plus \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	\$1,500	\$200	\$500	\$500	\$50	\$1,500	\$3,000	Y	Y	Platinum	89.81%	\$476.33	\$470.02	1.3%
86052DC0560004	HB Plus	HealthyBlue Plus \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1,500	\$5,500	\$200	\$500	\$500	\$50	\$3,000	\$7,500	Y	Y	Gold	81.88%	\$400.93	\$395.62	1.3%
86052DC0570002	HB Plus HSA/HRA	HealthyBlue Plus HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	\$200	\$500	\$500	\$50	\$4,000	\$7,500	Y	Y	Silver	70.81%	\$310.91	\$306.81	1.3%
86052DC0520005	HB Advantage	HealthyBlue Advantage \$300	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$300	\$1,500	\$200	\$500	\$500	\$50	\$1,000	\$3,000	Y	Y	Platinum	90.26%	\$500.50	\$493.87	1.3%
86052DC0520006	HB Advantage	HealthyBlue Advantage \$600	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$600	\$1,500	\$200	\$500	\$500	\$50	\$1,500	\$3,000	Y	Y	Platinum	89.81%	\$486.76	\$480.31	1.3%
86052DC0520004	HB Advantage	HealthyBlue Advantage \$1,500	Non-Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$1,500	\$5,500	\$200	\$500	\$500	\$50	\$3,000	\$7,500	Y	Y	Gold	81.88%	\$409.71	\$404.28	1.3%
86052DC0530002	HB Advantage HSA/HRA	HealthyBlue Advantage HSA/HRA \$2,000	Int: \$0/\$45/\$65/50%	\$0	\$30	\$200	\$300	NA	\$2,000	\$6,350	\$200	\$500	\$500	\$50	\$4,000	\$7,500	Y	Y	Silver	70.81%	\$317.71	\$313.53	1.3%

* Generic/Preferred Brand/Non-Preferred Brand/Specialty High Cost

State: District of Columbia **Filing Company:** CareFirst BlueChoice, Inc.
TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004E Small Group Only - Other
Product Name: DC BC Small Group Eff 201501 - ACA
Project Name/Number: /1958

Supporting Document Schedules

Satisfied - Item:	Actuarial Justification
Comments:	Please see Actuarial Memorandum for certification.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	File_1958_DC_BC_SG_1.1.15_Actuarial_Memorandum.pdf File_1958_DC_BC_SG_1.1.15_Actuarial_Cover_Letter.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum and Certifications
Comments:	
Attachment(s):	File_1958_DC_BC_SG_1.1.15_Actuarial_Memorandum.pdf File_1958_DC_BC_SG_1.1.15_Actuarial_Cover_Letter.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Certificate of Authority to File
Bypass Reason:	This filing is being submitted directly by the insurance company.
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Consumer Disclosure Form
Bypass Reason:	Since this is the initial filing submission, the required documentation is not yet available.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Cover Letter All Filings
Comments:	This information can be found in the Actuarial Memorandum.
Attachment(s):	

State: District of Columbia **Filing Company:** CareFirst BlueChoice, Inc.
TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004E Small Group Only - Other
Product Name: DC BC Small Group Eff 201501 - ACA
Project Name/Number: /1958

Item Status:	
Status Date:	
Satisfied - Item:	DISB Actuarial Memorandum Dataset
Comments:	
Attachment(s):	DISB Actuarial Memo Dataset - BC_1958_SENT.xlsx File_1958_DC_BC_SG_1.1.15_PartII.pdf
Item Status:	
Status Date:	
Bypassed - Item:	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
Bypass Reason:	This is not a P&C filing.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
Bypass Reason:	This is not a P&C filing.
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Unified Rate Review Template
Comments:	
Attachment(s):	URR_Template_DC_BC.xlsm DC_BC_URRT_201501.pdf DC_BC_URRT_201501_finalized_20140613163059.xml File_1958_DC_BC_SG_1.1.15_PartII.pdf
Item Status:	
Status Date:	

SERFF Tracking #:

CFAP-129567877

State Tracking #:

Company Tracking #:

1958

State:

District of Columbia

Filing Company:

CareFirst BlueChoice, Inc.

TOI/Sub-TOI:

HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004E Small Group Only - Other

Product Name:

DC BC Small Group Eff 201501 - ACA

Project Name/Number:

/1958

Attachment DISB Actuarial Memo Dataset - BC_1958_SENT.xlsx is not a PDF document and cannot be reproduced here.

Attachment URR_Template_DC_BC.xlsm is not a PDF document and cannot be reproduced here.

Attachment DC_BC_URRT_201501_finalized_20140613163059.xml is not a PDF document and cannot be reproduced here.

**BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)**

**Rate Filing # 1958
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015**

Actuarial Memorandum

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

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BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015

Form Numbers

Form Numbers Associated With This Filing:

This list contains the applicable forms for the new and renewing products. Some of these are also used with other products, which may be open or closed to new sales. These forms are used with products that are both grandfathered and non-grandfathered.

The SERFF Tracking # for the corresponding form filing On Exchange is as follows:
 CFBC-129539810

Forms Used for ALL ON-Exchange BlueChoice Group Products

DC/CFBC/SHOP/GC (1/14)
 DC/CFBC/DOL APPEAL (R. 7/11)
 DC/CFBC/SHOP/ELIG (1/14)
 DC/CFBC/FAM PLAN (8/12)
 DC/CFBC/PARTNER (R. 7/09)
 DC/CFBC/PT PROTECT (9/10)
 DC/CFBC/SHOP/2015 GC AMEND (1/15)
 DC/CFBC/SHOP/2015 AMEND (1/15)

Forms Used for ALL ON-Exchange BlueChoice Group Products: Out-of-Network Forms (GHMSI)

DC/CF/SHOP/GC (1/14)
 DC/CF/SHOP/ADV OON/EOC (1/14)
 DC/GHMSI/DOL APPEAL (R. 11/11)
 DC/CF/SHOP/EXC/DOCS (1/14)
 DC/GHMSI/FAM PLAN (8/12)
 DC/CF/PARTNER (R. 7/09)
 DC/CF/BLCRD (1/12)
 DC/CF/MEM/BLCRD (1/12)
 DC/CF/ANCILLARY AMEND (10/12)
 DC/CF/PT PROTECT (9/10)
 DC/GHMSI-HEALTH GUARANTEE 2/08
 DC/CF/SHOP/2015 GC AMEND (1/15)
 DC/CF/SHOP/2015 AMEND (1/15)

Product: BlueChoice Plus (Plans: 100%/80%, \$20/\$30 and 100%/60%, \$20/\$30)

Network: Open Access

DC/CFBC/SHOP/EOC (1/14)
 DC/CFBC/BCOO/DOCS (1/14)
 DC/CFBC/BLCRD (1/12)
 DC/CFBC/MEM/BLCRD (1/12)
 DC/CFBC/BC+ OOOA/10080/SOB (R. 1/15)
 DC/CFBC/BC+ OOOA/10060/SOB (R. 1/15)
 DC/CFBC/HMO/INCENT (1/15)

ON-Exchange

Product: BlueChoice Advantage

In-Network

DC/CFBC/SHOP/ADV IN/EOC (1/14)
 DC/CFBC/HB/SHOP/EXC/DOCS (1/14)
 DC/CFBC/SHOP/ADV IN/PLAT SOB (1/14)
 DC/CFBC/ADV IN/IPP GRP (1/14)
 DC/CFBC/ADV IN/IPP MEM (1/14)
 DC/CFBC/ANCILLARY AMEND (10/12)
 DC/CFBC/ADV CDH IN/1500/SOB (R. 1/15)
 DC/CFBC/ADV IN/8050/SOB (R. 1/15)
 DC/CFBC/ADV IN/10070/SOB (R. 1/15)
 DC/CFBC/ADV/1000/INN/SOB (R. 1/15)
 DC/CFBC/ADV/500/INN/SOB (1/15)
 DC/CFBC/ADV IN/INCENT (1/15)

Product: BlueChoice Plus (All Other Plans)

In-Network

DC/CFBC/SHOP/EOC (1/14)
 DC/CFBC/SHOP/EXC/DOCS (1/14)
 DC/CFBC/BLCRD (1/12)
 DC/CFBC/MEM/BLCRD (1/12)
 DC/CFBC/BC+ OOP IN/1500/ SOB (R. 1/15)
 DC/CFBC/BC+ OOP IN CDH/2000/ SOB (R. 1/15)
 DC/CFBC/BC+ OOP IN/3500/SOB (R. 1/15)
 DC/CFBC/BC+ OOP IN/2000/SOB (R. 1/15)
 DC/CFBC/BC+ OOP IN/10080/SOB (R. 1/15)
 DC/CFBC/POS IN/INCENT (1/15)

Product: HealthyBlue Plus

In-Network

DC/CFBC/SHOP/ADV IN/EOC (1/14)
 DC/CFBC/HB/SHOP/EXC/DOCS (1/14)
 DC/CFBC/BLCRD (1/12)
 DC/CFBC/MEM/BLCRD (1/12)
 DC/CFBC/HB PLUS 300 IN SOB (R. 1/15)
 DC/CFBC/HB PLUS 600 IN SOB (R. 1/15)
 DC/CFBC/HB PLUS 1500 IN SOB (R. 1/15)
 DC/CFBC/HB PLUS 2000 IN SOB (R. 1/15)
 DC/CFBC/POS IN/INCENT (1/15)

Product: BlueChoice Advantage

Out-of-Network (GHMSI)

DC/CF/ADV OON/PLAT SOB (R. 1/15)
 DC/CF/BC ADV CDH OON/1500/ SOB (R. 1/15)
 DC/CF/BC ADV OON/8050/ SOB (R. 1/15)
 DC/CF/BC ADV/1000/OON/SOB (R. 1/15)
 DC/CF/BC ADV OON/10070/SOB (R. 1/15)
 DC/CF/BC ADV/500/OON/SOB (1/15)

Product: BlueChoice Plus (All Other Plans)

Out-of-Network (GHMSI)

DC/CF/BC+ OOP OON/1500/SOB (R. 1/15)
 DC/CF/BC+ OOP OON CDH/2000/SOB (R. 1/15)
 DC/CF/BC+ OOP OON/3500/SOB (R. 1/15)
 DC/CF/BC+ OOP OON/2000/SOB (R. 1/15)
 DC/CF/BC+OOP OON/10080/SOB (R. 1/15)

Product: HealthyBlue Plus

Out-of-Network (GHMSI)

DC/CF/HB PLUS 300 SOB (R. 1/15)
 DC/CF/HB PLUS 600 SOB (R. 1/15)
 DC/CF/HB PLUS 1500 SOB (R. 1/15)
 DC/CF/HB PLUS 2000 SOB (R. 1/15)

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015

Form Numbers

Form Numbers Associated With This Filing:

This list contains the applicable forms for the new and renewing products. Some of these are also used with other products, which may be open or closed to new sales. These forms are used with products that are both grandfathered and non-grandfathered.

The SERFF Tracking # for the corresponding form filing On Exchange is as follows:
 CFBC-129539810

ON-Exchange (continued)

Product: BlueChoice HMO and BlueChoice HMO Open Access
Network: Lock In / Referral (HMO), Open Access (HMO Open Access)

DC/CFBC/SHOP/EOC (1/14)
 DC/CFBC/SHOP/EXC/DOCS (1/14)
 DC/CFBC/BCOA/GOLD SOB (R. 1/15)
 DC/CFBC/BCOA/SIL SOB (R. 1/15)
 DC/CFBC/HMO/BRZ SOB (R. 1/15)
 DC/CFBC/BLCRD (1/12)
 DC/CFBC/MEM/BLCRD (1/12)
 DC/CFBC/HMO/1020/SOB (R. 1/15)
 DC/CFBC/HMO/3040/SOB (R. 1/15)
 DC/CFBC/HMO/250/SOB (R. 1/15)
 DC/CFBC/HMO OA/3040/SOB (R. 1/15)
 DC/CFBC/HMO OA/500/SOB (R. 1/15)
 DC/CFBC/HMO OA HRA/1800/SOB (R. 1/15)
 DC/CFBC/HMO OA CDH/1500/SOB (R. 1/15)
 DC/CFBC/HMO OA CDH /2000/SOB (R. 1/15)
 DC/CFBC/HMO/INCENT (1/15)

Product: HealthyBlue HMO
Network: Open Access

DC/CFBC/SHOP/EOC (1/14)
 DC/CFBC/HMO/DOCS (1/14)
 DC/CFBC/BLCRD (1/12)
 DC/CFBC/MEM/BLCRD (1/12)
 DC/CFBC/HB HMO/300 SOB (R. 1/15)
 DC/CFBC/HB HMO/600 SOB (R. 1/15)
 DC/CFBC/HB HMO/1500 SOB (R. 1/15)
 DC/CFBC/HB HMO/2000 SOB (R. 1/15)
 DC/CFBC/HMO/INCENT (1/15)

Product: HealthyBlue Advantage
In-Network

DC/CFBC/SHOP/ADV IN/EOC (1/14)
 DC/CFBC/HB/SHOP/EXC/DOCS (1/14)
 DC/CFBC/ADV IN/IPP GRP (1/14)
 DC/CFBC/ADV IN/IPP MEM (1/14)
 DC/CFBC/ANCILLARY AMEND (10/12)
 DC/CFBC/HB ADV 300 IN SOB (R. 1/15)
 DC/CFBC/HB ADV 600 IN SOB (R. 1/15)
 DC/CFBC/HB ADV 1500 IN SOB (R. 1/15)
 DC/CFBC/HB ADV 2000 IN SOB (R. 1/15)
 DC/CFBC/ADV IN/INCENT (1/15)

Product: HealthyBlue Advantage
Out-of-Network (GHMSI)

DC/CF/HB ADV 300 SOB (R. 1/15)
 DC/CF/HB ADV 600 SOB (R. 1/15)
 DC/CF/HB ADV 1500 SOB (R. 1/15)
 DC/CF/HB ADV 2000 SOB (R. 1/15)

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Acronym	Definition
SHOP	Small Business Health Options Program
CF	CareFirst BlueCross BlueShield
BC	CareFirst BlueChoice, Inc.
GHMSI	Group Hospitalization and Medical Services, Inc.
SG	Small Group
IND64-, INM	Individual, Non-Medigap
CD	Consumer Direct (Individual, Non-Medigap)
AV	Actuarial Value
EHB	Essential Health Benefits
FPL	Federal Poverty Level
GF	Grandfathered
HIPAA	Health Insurance Portability and Accountability Act
RBC	Risk-based Capital
SRP	Single Risk Pool
UW	Underwritten
Med	Medical
Rx	Prescription Drugs
CDH	Consumer Driven Health
Non-CDH	Non-Consumer Driven Health
HSA	Health Savings Account
HRA	Health Reimbursement Account
HDHP	High Deductible Health Plan
HMO	Health Maintenance Organization
HMO OA	Health Maintenance Organization Open Access
OO OA	Opt Out Open Access
POS OA	Point of Service Open Access (aka Opt-Out Plus Open Access)
HB	HealthyBlue
EP	Experience Period
DICR	Desired Incurred Claims Ratio
MLR	Medical Loss Ratio (as defined by PPACA)
IBNR	Incurred But Not Reported
PCP	Primary Care Physician
ER	Emergency Room
In-Net	In-Network
OON	Out of Network
IP, In Pat	Inpatient
OP	Outpatient
Prof	Professional
OOP	Out of Pocket
Co-ins	Coinsurance
MHSA	Mental Health & Substance Abuse
RPN	Regional Preferred Network
ABA	Applied Behavioral Analysis

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015
Actuarial Certification

I, Dwayne Lucado, am the Director of Actuarial Pricing with CareFirst BlueCross BlueShield of which CareFirst BlueChoice, Incorporated is a subsidiary. I am a member of the American Academy of Actuaries. I have been involved in the development of these rates in accordance with applicable laws and regulations of the District of Columbia. Further, to the best of my knowledge and understanding, the rates in this filing have been developed in accordance with the available regulations and guidance for the small group employer market (On Exchange) in the District of Columbia for business effective post 1/1/2015. The actuarial values (AV) of the benefits proposed have been calculated with minimal necessary modifications to the HHS AV calculator. Further, the index rate has been developed based on my best understanding of the available regulations, guidance, and sound actuarial practice. I certify the following:

1. I am a member in good standing with the American Academy of Actuaries.
2. The projected index rate complies with applicable statutes based on my best understanding of the available guidance and sound actuarial practice and is in accordance with applicable actuarial standards including ASOP 8. The Actuarial Memorandum has been developed following the format and content prescribed in the CCIIO instructions for Part III - Actuarial Memorandum.
3. The projected index rate is reasonable in relation to the projected benefits and the projected population and is neither excessive nor deficient.
4. The plan level rates are developed based only on allowed index rate modifiers in accordance with 45 CFR 156.80(d)(1) and (2) and have been calibrated to account for prescribed rating factors.
5. The percent of total premiums related to Essential Health Benefits has been estimated based on sound actuarial practice.
6. The Actuarial Values have been calculated using the HHS calculator with minimal modification, which has been discussed in the Actuarial Memorandum included in this filing.

I further certify that the information in this filing represents the company's best understanding of the available guidance and regulations with regard to the rating of these products. This filing will be revised as applicable as any new guidance is released.

This filing has been prepared in accordance with the applicable Actuarial Standards of Practice.

Dwayne Lucado, FSA, MAAA
Director, Actuarial Pricing
CareFirst BlueCross BlueShield
Mail Drop-Point 01-780
10455 Mill Run Circle
Owings Mills, MD 21117

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015

Affected HIOS IDs*

HIOS Product ID	HIOS Product Name	HIOS Plan ID	HIOS Plan Name	On/Off Exchange	Product Type	Abortion Coverage	Actuarial Value 2014-2015	Metal Level	Unique Plan	Projected Contracts 12/31/15
86052DC049	BlueChoice HMO Referral HSA/HRA	86052DC0490001	BlueChoice HMO Referral HSA/HRA \$4,000	On	HMO	Yes	61.18%	Bronze	No	35
86052DC047	BlueChoice HMO HSA/HRA	86052DC0470002	BlueChoice HMO HSA/HRA \$2,000, 80%	On	HMO	Yes	70.90%	Silver	No	56
86052DC046	BlueChoice HMO	86052DC0460003	BlueChoice HMO \$1,000	On	HMO	Yes	78.47%	Gold	No	82
86052DC044	BlueChoice Advantage	86052DC0440004	BlueChoice Advantage 90%/70%	On	POS	Yes	90.26%	Platinum	No	28
86052DC047	BlueChoice HMO HSA/HRA	86052DC0470005	BlueChoice HMO HSA/HRA \$1,500	On	HMO	Yes	79.69%	Gold	No	391
86052DC047	BlueChoice HMO HSA/HRA	86052DC0470006	BlueChoice HMO HSA/HRA \$2,000	On	HMO	Yes	71.94%	Silver	No	292
86052DC046	BlueChoice HMO	86052DC0460008	BlueChoice HMO \$1,800	On	HMO	Yes	78.15%	Gold	No	56
86052DC048	BlueChoice HMO Referral	86052DC0480004	BlueChoice HMO Referral \$10/\$20	On	HMO	Yes	90.60%	Platinum	No	360
86052DC048	BlueChoice HMO Referral	86052DC0480006	BlueChoice HMO Referral \$30/\$40	On	HMO	Yes	88.31%	Platinum	No	906
86052DC048	BlueChoice HMO Referral	86052DC0480005	BlueChoice HMO Referral \$500	On	HMO	Yes	78.77%	Gold	No	278
86052DC046	BlueChoice HMO	86052DC0460006	BlueChoice HMO \$250	On	HMO	Yes	81.86%	Gold	No	1,480
86052DC046	BlueChoice HMO	86052DC0460007	BlueChoice HMO \$30/\$40	On	HMO	Yes	88.31%	Platinum	No	761
86052DC044	BlueChoice Advantage	86052DC0440006	BlueChoice Advantage 80%/50%	On	POS	Yes	88.76%	Platinum	No	13
86052DC044	BlueChoice Advantage	86052DC0440007	BlueChoice Advantage 100%/70%	On	POS	Yes	88.37%	Platinum	No	306
86052DC044	BlueChoice Advantage	86052DC0440008	BlueChoice Advantage \$1000	On	POS	Yes	78.69%	Gold	No	1,534
86052DC044	BlueChoice Advantage	86052DC0440009	BlueChoice Advantage \$500 \$20/\$30	On	POS	Yes	78.51%	Gold	No	62
86052DC045	BlueChoice Advantage HSA/HRA	86052DC0450002	BlueChoice Advantage HSA/HRA \$1500	On	POS	Yes	70.35%	Silver	No	278
86052DC050	BlueChoice Plus	86052DC0500005	BlueChoice Plus \$2000	On	POS	Yes	71.88%	Silver	No	23
86052DC050	BlueChoice Plus	86052DC0500008	BlueChoice Plus 100%/80%, \$10/\$20	On	POS	Yes	89.10%	Platinum	No	448
86052DC050	BlueChoice Plus	86052DC0500006	BlueChoice Plus 100%/80%, \$20/\$30	On	POS	Yes	88.62%	Platinum	No	1,531
86052DC050	BlueChoice Plus	86052DC0500007	BlueChoice Plus 100%/60%, \$20/\$30	On	POS	Yes	88.62%	Platinum	No	322
86052DC051	BlueChoice Plus HSA/HRA	86052DC0510004	BlueChoice Plus HSA/HRA \$1500	On	POS	Yes	71.67%	Silver	No	212
86052DC051	BlueChoice Plus HSA/HRA	86052DC0510005	BlueChoice Plus HSA/HRA \$2000	On	POS	Yes	68.90%	Silver	No	19
86052DC051	BlueChoice Plus HSA/HRA	86052DC0510006	BlueChoice Plus HSA/HRA \$3500	On	POS	Yes	61.62%	Bronze	No	219
86052DC054	HealthyBlue HMO	86052DC0540005	HealthyBlue HMO \$300	On	HMO	Yes	90.26%	Platinum	No	126
86052DC054	HealthyBlue HMO	86052DC0540006	HealthyBlue HMO \$600	On	HMO	Yes	89.81%	Platinum	No	2
86052DC054	HealthyBlue HMO	86052DC0540004	HealthyBlue HMO \$1,500	On	HMO	Yes	81.88%	Gold	No	378
86052DC055	HealthyBlue HMO HSA/HRA	86052DC0550002	HealthyBlue HMO HSA/HRA \$2,000	On	HMO	Yes	70.81%	Silver	Yes	240
86052DC056	HealthyBlue Plus	86052DC0560005	HealthyBlue Plus \$300	On	POS	Yes	90.26%	Platinum	No	584
86052DC056	HealthyBlue Plus	86052DC0560006	HealthyBlue Plus \$600	On	POS	Yes	89.81%	Platinum	No	142
86052DC056	HealthyBlue Plus	86052DC0560004	HealthyBlue Plus \$1,500	On	POS	Yes	81.88%	Gold	No	672
86052DC057	HealthyBlue Plus HSA/HRA	86052DC0570002	HealthyBlue Plus HSA/HRA \$2,000	On	POS	Yes	70.81%	Silver	Yes	93
86052DC052	HealthyBlue Advantage	86052DC0520005	HealthyBlue Advantage \$300	On	POS	Yes	90.26%	Platinum	No	249
86052DC052	HealthyBlue Advantage	86052DC0520006	HealthyBlue Advantage \$600	On	POS	Yes	89.81%	Platinum	No	5
86052DC052	HealthyBlue Advantage	86052DC0520004	HealthyBlue Advantage \$1,500	On	POS	Yes	81.88%	Gold	No	5,860
86052DC053	HealthyBlue Advantage HSA/HRA	86052DC0530002	HealthyBlue Advantage HSA/HRA \$2,000	On	POS	Yes	70.81%	Silver	Yes	70

*BlueChoice Advantage \$500 \$20/\$30 is a new plan effective 1/1/15. All other plans were new effective 1/1/14.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

2015 ACA – RATE CHANGES AT PRODUCT/METAL LEVEL
SMALL GROUP - DC BC

1	2	3	4			5	6	7	8	9-12				13	14-17				18	19	20	21	22
			Members							Projected 1Q15 EMMs	HHS 2014 AV	Base Premium				HHS 2015 AV	Base Premium						
Metal	Product	Actual 3/31/14	Projected 12/31/14	Projected 12/31/15	% of Actual Total	Projected 1Q15 EMMs	HHS 2014 AV	1Q14	2Q14			3Q14	4Q14	HHS 2015 AV	1Q15		RNL	2Q15	RNL	3Q15	RNL	4Q15	RNL
ON																							
1	Platinum	BlueChoice Advantage	133	868	561	2.2%	1,944	0.885	\$435	\$444	\$454	\$463	0.885	\$489	12.4%	\$495	11.5%	\$502	10.7%	\$509	9.9%	5.6%	
2	Platinum	BlueChoice HMO	268	3,160	1,230	4.4%	4,284	0.883	\$421	\$429	\$438	\$448	0.883	\$468	11.3%	\$474	10.4%	\$481	9.6%	\$487	8.8%	4.6%	
3	Platinum	BlueChoice HMO Referral	371	6,044	2,045	6.1%	7,116	0.890	\$404	\$413	\$421	\$430	0.890	\$448	11.0%	\$454	10.1%	\$461	9.3%	\$467	8.5%	4.3%	
4	Platinum	BlueChoice Plus	643	8,551	3,716	10.6%	12,936	0.887	\$428	\$437	\$446	\$456	0.887	\$475	11.0%	\$481	10.1%	\$488	9.3%	\$494	8.5%	4.3%	
5	Platinum	HealthyBlue HMO	7	343	208	0.1%	720	0.903	\$408	\$417	\$425	\$434	0.903	\$457	12.0%	\$463	11.2%	\$470	10.4%	\$476	9.5%	5.3%	
6	Platinum	HealthyBlue Plus	188	829	1,172	3.1%	4,068	0.902	\$420	\$428	\$437	\$446	0.902	\$468	11.6%	\$474	10.7%	\$481	9.9%	\$487	9.1%	4.9%	
7	Platinum	HealthyBlue Advantage	44	438	412	0.7%	1,428	0.903	\$426	\$435	\$444	\$453	0.903	\$481	12.9%	\$487	12.1%	\$494	11.3%	\$500	10.4%	6.1%	
PLATINUM SUBTOTAL			1,654	20,233	9,345	27.3%	32,496	0.890	\$421	\$430	\$439	\$448	0.890	\$468	11.3%	\$474	10.4%	\$481	9.6%	\$487	8.8%	4.6%	
8	Gold	BlueChoice Advantage	578	47	2,578	9.5%	8,964	0.787	\$342	\$349	\$356	\$364	0.787	\$384	12.1%	\$389	11.3%	\$394	10.5%	\$400	9.6%	9.6%	
9	Gold	BlueChoice HMO	502	1,015	2,615	8.3%	9,108	0.816	\$350	\$357	\$364	\$372	0.816	\$394	12.8%	\$399	11.9%	\$405	11.1%	\$410	10.3%	5.9%	
10	Gold	BlueChoice HMO Referral	98	467	449	1.6%	1,560	0.788	\$325	\$332	\$339	\$346	0.788	\$363	11.8%	\$368	11.0%	\$373	10.2%	\$378	9.3%	5.1%	
11	Gold	BlueChoice HMO HSA/HRA	186	1,516	698	3.1%	2,424	0.797	\$311	\$318	\$324	\$331	0.797	\$343	10.1%	\$347	9.3%	\$352	8.5%	\$357	7.7%	3.5%	
12	Gold	HealthyBlue HMO	150	31	611	2.5%	2,124	0.819	\$329	\$336	\$343	\$350	0.819	\$375	14.0%	\$379	13.1%	\$385	12.3%	\$390	11.4%	7.1%	
13	Gold	HealthyBlue Plus	255	31	1,085	4.2%	3,768	0.819	\$339	\$346	\$353	\$361	0.819	\$385	13.6%	\$390	12.7%	\$396	11.9%	\$401	11.1%	6.8%	
14	Gold	HealthyBlue Advantage	2,224	27	9,466	36.7%	32,916	0.819	\$343	\$350	\$357	\$365	0.819	\$394	14.9%	\$399	14.0%	\$404	13.2%	\$410	12.3%	7.9%	
GOLD SUBTOTAL			3,993	3,134	17,501	65.9%	60,864	0.812	\$341	\$348	\$356	\$363	0.812	\$388	13.8%	\$393	12.9%	\$399	12.1%	\$404	11.3%	7.5%	
15	Silver	BlueChoice HMO HSA/HRA	113	647	620	1.9%	2,160	0.718	\$261	\$266	\$272	\$278	0.718	\$293	12.2%	\$296	11.3%	\$300	10.5%	\$304	9.6%	5.4%	
16	Silver	BlueChoice Advantage HSA/HRA	40	66	495	0.7%	1,716	0.703	\$280	\$286	\$292	\$298	0.703	\$318	13.3%	\$322	12.5%	\$326	11.6%	\$331	10.8%	6.5%	
17	Silver	BlueChoice Plus	8	10	37	0.1%	132	0.719	\$285	\$291	\$297	\$303	0.719	\$320	12.4%	\$324	11.5%	\$329	10.7%	\$333	9.9%	5.6%	
18	Silver	BlueChoice Plus HSA/HRA	73	323	412	1.2%	1,440	0.714	\$282	\$288	\$294	\$300	0.714	\$314	11.3%	\$318	10.4%	\$322	9.6%	\$327	8.8%	4.5%	
19	Silver	HealthyBlue HMO HSA/HRA	91	34	428	1.5%	1,488	0.708	\$255	\$261	\$266	\$272	0.708	\$291	13.8%	\$294	12.9%	\$298	12.1%	\$302	11.2%	6.9%	
20	Silver	HealthyBlue Plus HSA/HRA	30	25	166	0.5%	576	0.708	\$263	\$269	\$275	\$280	0.708	\$299	13.4%	\$303	12.5%	\$307	11.7%	\$311	10.9%	6.6%	
21	Silver	HealthyBlue Advantage HSA/HRA	27	36	125	0.4%	432	0.708	\$266	\$272	\$278	\$283	0.708	\$305	14.7%	\$309	13.8%	\$314	13.0%	\$318	12.1%	7.8%	
SILVER SUBTOTAL			382	1,141	2,282	6.3%	7,944	0.711	\$269	\$274	\$280	\$286	0.711	\$303	12.8%	\$307	11.9%	\$311	11.1%	\$315	10.3%	6.0%	
22	Bronze	BlueChoice HMO Referral HSA/HRA	7	41	62	0.1%	216	0.612	\$198	\$203	\$207	\$211	0.612	\$219	10.4%	\$222	9.6%	\$225	8.8%	\$228	7.9%	3.8%	
23	Bronze	BlueChoice Plus HSA/HRA	27	30	391	0.4%	1,356	0.616	\$232	\$237	\$242	\$247	0.616	\$258	11.2%	\$261	10.3%	\$265	9.5%	\$268	8.7%	4.5%	
BRONZE SUBTOTAL			34	71	453	0.6%	1,572	0.616	\$227	\$232	\$237	\$242	0.616	\$252	11.1%	\$256	10.2%	\$259	9.4%	\$263	8.6%	4.4%	
BlueChoice Total			6,063	24,579	29,582	100%	102,876	0.826	\$359	\$367	\$374	\$382	0.826	\$405	12.9%	\$410	12.0%	\$416	11.2%	\$421	10.4%	6.4%	

LOW RENEWAL (Minimum): 10.1% 9.3% 8.5% 7.7%
HIGH RENEWAL (Maximum): 14.9% 14.0% 13.2% 12.3%

Note: The previous SERFF tracking number for BlueChoice DC Small Group (effective 1/1/2014) is CFAP-129047155 (On and Off Exchange).

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

2015 ACA – RATE CHANGES AT PRODUCT/METAL LEVEL
SMALL GROUP - DC

1	2	3	4	5	6	7	8	9				13	14				20	21	22			
								Members					Projected 1Q15 EMMs	HHS 2014 AV	Base Premium					HHS 2015 AV	Base Premium	
Metal	Product	Actual 1/31/14	Projected 12/31/14	Projected 12/31/15	% of Actual Total			1Q14	2Q14	3Q14	4Q14				1Q15	RNL	2Q15	RNL	3Q15		RNL	4Q15
ON																						
1	Platinum	BlueChoice Advantage	133	868	561	0.9%	1,944	0.885	\$435	\$444	\$454	\$463	0.885	\$489	12.4%	\$495	11.5%	\$502	10.7%	\$509	9.9%	5.6%
2	Platinum	BlueChoice HMO	268	3,160	1,230	1.7%	4,284	0.883	\$421	\$429	\$438	\$448	0.883	\$468	11.3%	\$474	10.4%	\$481	9.6%	\$487	8.8%	4.6%
3	Platinum	BlueChoice HMO Referral	371	6,044	2,045	2.4%	7,116	0.890	\$404	\$413	\$421	\$430	0.890	\$448	11.0%	\$454	10.1%	\$461	9.3%	\$467	8.5%	4.3%
4	Platinum	BlueChoice Plus	643	8,551	3,716	4.2%	12,936	0.887	\$428	\$437	\$446	\$456	0.887	\$475	11.0%	\$481	10.1%	\$488	9.3%	\$494	8.5%	4.3%
5	Platinum	HealthyBlue HMO	7	343	208	0.0%	720	0.903	\$408	\$417	\$425	\$434	0.903	\$457	12.0%	\$463	11.2%	\$470	10.4%	\$476	9.5%	5.3%
6	Platinum	HealthyBlue Plus	188	829	1,172	1.2%	4,068	0.902	\$420	\$428	\$437	\$446	0.902	\$468	11.6%	\$474	10.7%	\$481	9.9%	\$487	9.1%	4.9%
7	Platinum	HealthyBlue Advantage	44	438	412	0.3%	1,428	0.903	\$426	\$435	\$444	\$453	0.903	\$481	12.9%	\$487	12.1%	\$494	11.3%	\$500	10.4%	6.1%
8	Platinum	BluePreferred PPO	1,420	28,308	7,907	9.2%	28,272	0.888	\$511	\$517	\$523	\$530	0.888	\$565	10.7%	\$573	10.8%	\$581	11.0%	\$589	11.1%	6.7%
9	Platinum	HealthyBlue PPO	18	396	104	0.1%	372	0.901	\$493	\$499	\$505	\$512	0.901	\$547	11.1%	\$555	11.2%	\$562	11.3%	\$570	11.5%	7.0%
PLATINUM SUBTOTAL			3,092	48,937	17,356	20.1%	61,140	0.889	\$463	\$470	\$478	\$486	0.889	\$514	11.0%	\$520	10.6%	\$528	10.3%	\$535	9.9%	5.6%
10	Gold	BlueChoice Advantage	578	47	2,578	3.7%	8,964	0.787	\$342	\$349	\$356	\$364	0.787	\$384	12.1%	\$389	11.3%	\$394	10.5%	\$400	9.6%	9.6%
11	Gold	BlueChoice HMO	502	1,015	2,615	3.3%	9,108	0.816	\$350	\$357	\$364	\$372	0.816	\$394	12.8%	\$399	11.9%	\$405	11.1%	\$410	10.3%	5.9%
12	Gold	BlueChoice HMO Referral	98	467	449	0.6%	1,560	0.788	\$325	\$332	\$339	\$346	0.788	\$363	11.8%	\$368	11.0%	\$373	10.2%	\$378	9.3%	5.1%
13	Gold	BlueChoice HMO HSA/HRA	186	1,516	698	1.2%	2,424	0.797	\$311	\$318	\$324	\$331	0.797	\$343	10.1%	\$347	9.3%	\$352	8.5%	\$357	7.7%	3.5%
14	Gold	HealthyBlue HMO	150	31	611	1.0%	2,124	0.819	\$329	\$336	\$343	\$350	0.819	\$375	14.0%	\$379	13.1%	\$385	12.3%	\$390	11.4%	7.1%
15	Gold	HealthyBlue Plus	255	31	1,085	1.7%	3,768	0.819	\$339	\$346	\$353	\$361	0.819	\$385	13.6%	\$390	12.7%	\$396	11.9%	\$401	11.1%	6.8%
16	Gold	HealthyBlue Advantage	2,224	27	9,466	14.4%	32,916	0.819	\$343	\$350	\$357	\$365	0.819	\$394	14.9%	\$399	14.0%	\$404	13.2%	\$410	12.3%	7.9%
17	Gold	BluePreferred PPO	4,934	5,320	21,130	32.0%	75,564	0.814	\$399	\$404	\$409	\$414	0.814	\$448	12.3%	\$454	12.5%	\$460	12.6%	\$467	12.7%	12.7%
18	Gold	BluePreferred PPO HSA/HRA	638	2,686	2,569	4.1%	9,192	0.781	\$381	\$386	\$390	\$395	0.781	\$424	11.3%	\$429	11.4%	\$435	11.5%	\$441	11.6%	7.2%
19	Gold	BluePreferred Multi-State Plan	339	884	1,293	2.2%	4,620	0.799	\$401	\$406	\$411	\$416	0.799	\$443	10.5%	\$449	10.6%	\$455	10.7%	\$461	10.8%	6.4%
20	Gold	HealthyBlue PPO	1,748	35	7,267	11.3%	25,992	0.819	\$399	\$404	\$409	\$414	0.819	\$453	13.6%	\$460	13.8%	\$466	13.9%	\$472	14.0%	9.5%
GOLD SUBTOTAL			11,652	12,059	49,760	75.6%	176,232	0.812	\$378	\$384	\$390	\$396	0.812	\$427	12.9%	\$433	12.7%	\$438	12.5%	\$444	12.3%	10.0%
21	Silver	BlueChoice HMO HSA/HRA	113	647	620	0.7%	2,160	0.718	\$261	\$266	\$272	\$278	0.718	\$293	12.2%	\$296	11.3%	\$300	10.5%	\$304	9.6%	5.4%
22	Silver	BlueChoice Advantage HSA/HRA	40	66	495	0.3%	1,716	0.703	\$280	\$286	\$292	\$298	0.703	\$318	13.3%	\$322	12.5%	\$326	11.6%	\$331	10.8%	6.5%
23	Silver	BlueChoice Plus	8	10	37	0.1%	132	0.719	\$285	\$291	\$297	\$303	0.719	\$320	12.4%	\$324	11.5%	\$329	10.7%	\$333	9.9%	5.6%
24	Silver	BlueChoice Plus HSA/HRA	73	323	412	0.5%	1,440	0.714	\$282	\$288	\$294	\$300	0.714	\$314	11.3%	\$318	10.4%	\$322	9.6%	\$327	8.8%	4.5%
25	Silver	HealthyBlue HMO HSA/HRA	91	34	428	0.6%	1,488	0.708	\$255	\$261	\$266	\$272	0.708	\$291	13.8%	\$294	12.9%	\$298	12.1%	\$302	11.2%	6.9%
26	Silver	HealthyBlue Plus HSA/HRA	30	25	166	0.2%	576	0.708	\$263	\$269	\$275	\$280	0.708	\$299	13.4%	\$303	12.5%	\$307	11.7%	\$311	10.9%	6.6%
27	Silver	HealthyBlue Advantage HSA/HRA	27	36	125	0.2%	432	0.708	\$266	\$272	\$278	\$283	0.708	\$305	14.7%	\$309	13.8%	\$314	13.0%	\$318	12.1%	7.8%
28	Silver	BluePreferred PPO HSA/HRA	150	781	744	1.0%	2,664	0.718	\$327	\$331	\$335	\$339	0.718	\$368	12.6%	\$373	12.7%	\$378	12.8%	\$383	12.9%	8.4%
29	Silver	BluePreferred PPO	-	-	100	0.0%	360						0.720	\$409		\$415		\$421		\$426		
30	Silver	BluePreferred Multi-State Plan HSA/HRA	7	245	100	0.0%	360	0.709	\$320	\$324	\$328	\$332	0.709	\$355	11.0%	\$359	11.1%	\$364	11.2%	\$369	11.3%	6.9%
31	Silver	HealthyBlue PPO HSA/HRA	35	37	145	0.2%	516	0.708	\$321	\$325	\$329	\$333	0.708	\$364	13.2%	\$368	13.3%	\$373	13.4%	\$379	13.6%	9.1%
SILVER SUBTOTAL			574	2,204	3,372	3.7%	11,844	0.712	\$286	\$291	\$297	\$302	0.713	\$325	12.7%	\$329	12.1%	\$334	11.6%	\$338	11.1%	6.7%
32	Bronze	BlueChoice HMO Referral HSA/HRA	7	41	62	0.0%	216	0.612	\$198	\$203	\$207	\$211	0.612	\$219	10.4%	\$222	9.6%	\$225	8.8%	\$228	7.9%	3.8%
33	Bronze	BlueChoice Plus HSA/HRA	27	30	391	0.2%	1,356	0.616	\$232	\$237	\$242	\$247	0.616	\$258	11.2%	\$261	10.3%	\$265	9.5%	\$268	8.7%	4.5%
34	Bronze	BluePreferred PPO	5	256	25	0.0%	84	0.619	\$287	\$291	\$295	\$298	0.619	\$322	11.9%	\$326	12.0%	\$330	12.1%	\$335	12.3%	7.8%
35	Bronze	BluePreferred PPO HSA/HRA	61	74	37	0.4%	132	0.610	\$261	\$264	\$267	\$270	0.610	\$293	12.4%	\$296	12.5%	\$301	12.6%	\$305	12.8%	8.3%
BRONZE SUBTOTAL			100	401	515	0.6%	1,788	0.615	\$232	\$237	\$242	\$247	0.615	\$259	11.2%	\$262	10.5%	\$266	9.8%	\$269	9.1%	4.8%
BlueChoice Total			6,063	24,579	29,582	39%	102,876	0.826	\$359	\$367	\$374	\$382	0.826	\$405	12.9%	\$410	12.0%	\$416	11.2%	\$421	10.4%	6.4%
GHMSI Total			9,355	39,022	41,422	61%	148,128	0.824	\$417	\$423	\$428	\$433	0.824	\$468	12.1%	\$474	12.2%	\$481	12.4%	\$487	12.5%	10.3%
Grand Total			15,418	63,601	71,004	100%	251,004	0.825	\$393	\$400	\$406	\$412	0.825	\$442	12.4%	\$448	12.2%	\$454	11.9%	\$460	11.6%	8.7%

LOW RENEWAL (Minimum):														10.1%	9.3%	8.5%	7.7%
HIGH RENEWAL (Maximum):														14.9%	14.0%	13.9%	14.0%
PPO/HMO:								1.16	1.15	1.14	1.13			1.16	1.16	1.16	1.16

Note: The previous SERFF tracking number for BlueChoice DC Small Group (effective 1/1/2014) is CFAP-129047155 (On and Off Exchange).
The previous SERFF tracking number for GHMSI DC Small Group (effective 1/1/2014) is CFAP-129047320 (On and Off Exchange).

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual, Non-Medigap Allowed PMPM Projection (Includes EHB and Non-EHB Claims) & Derivation of Index Rate - Non-Grandfathered Business Only - 1/1/2015

Experience Period Rating Period	Begin	End	Mid-point	Months of Trend	pd through	3/31/2014
	1/1/2013 1/1/2015	12/31/2013 12/31/2015	7/2/2013 7/2/2015	24.0		
Experience Period Summary	Total					
Experience Period Premiums	\$	137,679,176				
MLR Rebates	\$	-				
Net Experience Period Premiums	\$	137,679,176				
Experience Period Paid Claims (Non-Capitated)	\$	123,160,041				
Completion Factor		0.99				
Experience Period Incurred Claims (Non-Capitated)	\$	123,866,461				
Capitations	\$	713,706				
Rx Rebates	\$	(2,892,799)				
Other Manual Claims	\$	-				
Total Experience Period Claims	\$	121,687,368				
Experience Period Loss Ratio (Before MLR Rebates)		88.4%				
Experience Period Loss Ratio (After MLR Rebates)		88.4%				
Experience Period Loss Ratio (System Claims Only)		90.0%				
Experience Period Member Months		438,476				
Average Members		36,540				
End of Experience Period Contract		25,258				
End of Experience Period Members		40,243				
Experience Period Allowed Claims (System Only)	\$	139,164,193				
Adjustments	\$	(2,179,093)				
Total Adjusted EP Allowed Claims	\$	136,985,100				
EP Paid / Allowed Ratio		88.8%				

Service Category Level Projection

Service Category Experience Period Allowed	Utilization Measure	EP Units	EP Allowed \$	Other	Rx Rebates	Net Allowed
Inpatient	Admits	1,968	\$ 27,068,642	\$ -	\$ -	\$ 27,068,642
Outpatient	Visits	19,978	\$ 24,411,199	\$ -	\$ -	\$ 24,411,199
Professional	Visits	321,550	\$ 46,066,170	\$ -	\$ -	\$ 46,066,170
Other	Services	22,097	\$ 5,659,419	\$ -	\$ -	\$ 5,659,419
Rx	Scripts	300,654	\$ 35,958,763	\$ -	\$ (2,892,799)	\$ 33,065,964
Capitation	Member Months	438,476	\$ 713,706	\$ -	\$ -	\$ 713,706
Total			\$ 139,877,899	\$ -	\$ (2,892,799)	\$ 136,985,100
PMPM			\$ 319.01	\$ -	\$ (6.60)	\$ 312.41

Annual Trend Inputs	
Cost Trend	Utilization Trend
7.0%	1.0%
9.5%	0.0%
0.0%	4.5%
0.0%	6.0%
7.0%	1.0%
2.0%	0.0%

Service Category Experience Period Allowed	Utilization Measure	Experience Period			Projection Factors			Projected				Effective Allowed PMPM	
		Util / 1000	Unit Cost	PMPM	Population Risk / Morbidity*	Other	Cost Factor	Utilization Factor	Total Factor	Util / 1000	Unit Cost	PMPM	Annual Trend
Inpatient	Admits	53.86	\$ 13,753.39	\$ 61.73	1.000	0.994	1.145	1.020	1.16	54.95	\$ 15,656.85	\$ 71.69	8.1%
Outpatient	Visits	546.75	\$ 1,221.89	\$ 55.67	1.000	0.994	1.199	1.000	1.19	546.75	\$ 1,456.76	\$ 66.37	9.5%
Professional	Visits	8,800.02	\$ 143.26	\$ 105.06	1.000	1.039	1.000	1.092	1.13	9,609.84	\$ 148.88	\$ 119.23	4.5%
Other	Services	604.74	\$ 256.12	\$ 12.91	1.000	1.294	1.000	1.124	1.45	679.49	\$ 331.50	\$ 18.77	6.0%
Rx	Scripts	8,228.15	\$ 109.98	\$ 75.41	1.000	0.961	1.145	1.020	1.12	8,393.54	\$ 120.96	\$ 84.61	8.1%
Capitation	Member Months	12,000.00	\$ 1.63	\$ 1.63	1.000	0.957	1.040	1.000	1.00	12,000.00	\$ 1.62	\$ 1.62	2.0%
Total				\$ 312.41									
											Projected Allowed Claims PMPM (EHB + Non-EHB)	\$ 362.29	7.0%
											Non-EHB Claims In Projected PMPM**	\$ 1.20	
											Index Rate for EHB	\$ 361.09	

* Please refer to page 74 for more information.

** Includes abortion claims and capitation for embedded adult vision benefit.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual, Non-Medigap Allowed PMPM Projection (Includes EHB and Non-EHB Claims) & Derivation of Index Rate - Non-Grandfathered Business Only - 4/1/2015

Experience Period	Begin	End	Mid-point	Months of Trend	
	1/1/2013	12/31/2013	7/2/2013		
Rating Period	4/1/2015	3/31/2016	9/30/2015	27.0	
pd through 3/31/2014					
Experience Period Summary	Total				
Experience Period Premiums	\$ 137,679,176				
MLR Rebates	\$ -				
Net Experience Period Premiums	\$ 137,679,176				
Experience Period Paid Claims (Non-Capitated)	\$ 123,160,041				
Completion Factor	0.99				
Experience Period Incurred Claims (Non-Capitated)	\$ 123,866,461				
Capitations	\$ 713,706				
Rx Rebates	\$ (2,892,799)				
Other Manual Claims	\$ -				
Total Experience Period Claims	\$ 121,687,368				
Experience Period Loss Ratio (Before MLR Rebates)	88.4%				
Experience Period Loss Ratio (After MLR Rebates)	88.4%				
Experience Period Loss Ratio (System Claims Only)	90.0%				
Experience Period Member Months	438,476				
Average Members	36,540				
End of Experience Period Contract	25,258				
End of Experience Period Members	40,243				
Experience Period Allowed Claims (System Only)	\$ 139,164,193				
Adjustments	\$ (2,179,093)				
Total Adjusted EP Allowed Claims	\$ 136,985,100				
EP Paid / Allowed Ratio	88.8%				

Service Category Level Projection

Service Category	Experience Period Allowed	Utilization Measure	EP Units	EP Allowed \$	Other	Rx Rebates	Net Allowed
Inpatient	Admits	1,968	\$ 27,068,642	\$ -	\$ -	\$ -	\$ 27,068,642
Outpatient	Visits	19,978	\$ 24,411,199	\$ -	\$ -	\$ -	\$ 24,411,199
Professional	Visits	321,550	\$ 46,066,170	\$ -	\$ -	\$ -	\$ 46,066,170
Other	Services	22,097	\$ 5,659,419	\$ -	\$ -	\$ -	\$ 5,659,419
Rx	Scripts	300,654	\$ 35,958,763	\$ -	\$ -	(2,892,799)	\$ 33,065,964
Capitation	Member Months	438,476	\$ 713,706	\$ -	\$ -	\$ -	\$ 713,706
Total			\$ 139,877,899	\$ -	\$ -	(2,892,799)	\$ 136,985,100
Check (excluding capitations)				\$ 4,659,447	\$ -	\$ -	\$ 0
PMPM			\$ 319.01	\$ -	\$ -	(6.60)	\$ 312.41

Annual Trend Inputs	
Cost Trend	Utilization Trend
7.0%	1.0%
9.5%	0.0%
0.0%	4.5%
0.0%	6.0%
7.0%	1.0%
2.0%	0.0%

Service Category	Experience Period Allowed	Utilization Measure	Experience Period			Projection Factors			Projected				Effective Allowed PMPM
			Util / 1000	Unit Cost	PMPM	Population Risk / Morbidity*	Other	Cost Factor	Utilization Factor	Total Factor	Util / 1000	Unit Cost	
Inpatient	Admits	53.86	\$ 13,753.39	\$ 61.73	1.000	0.994	1.164	1.023	1.18	55.08	\$ 15,923.93	\$ 73.09	8.1%
Outpatient	Visits	546.75	\$ 1,221.89	\$ 55.67	1.000	0.994	1.227	1.000	1.22	546.75	\$ 1,490.19	\$ 67.90	9.5%
Professional	Visits	8,800.02	\$ 143.26	\$ 105.06	1.000	1.039	1.000	1.104	1.15	9,716.17	\$ 148.88	\$ 120.54	4.5%
Other	Services	604.74	\$ 256.12	\$ 12.91	1.000	1.294	1.000	1.140	1.48	689.46	\$ 331.50	\$ 19.05	6.0%
Rx	Scripts	8,228.15	\$ 109.98	\$ 75.41	1.000	0.961	1.164	1.023	1.14	8,414.45	\$ 123.02	\$ 86.26	8.1%
Capitation	Member Months	12,000.00	\$ 1.63	\$ 1.63	1.000	0.957	1.046	1.000	1.00	12,000.00	\$ 1.63	\$ 1.63	2.0%
Total				\$ 312.41									
Projected Allowed Claims PMPM (EHB + Non-EHB)												\$ 368.48	7.0%
Non-EHB Claims In Projected PMPM**												\$ 1.22	
Index Rate for EHB												\$ 367.26	

* Please refer to page 74 for more information.

** Includes abortion claims and capitation for embedded adult vision benefit.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual, Non-Medigap Allowed PMPM Projection (Includes EHB and Non-EHB Claims) & Derivation of Index Rate - Non-Grandfathered Business Only - 7/1/2015

Experience Period Rating Period	Begin	End	Mid-point	Months of Trend	pd through	3/31/2014
	1/1/2013 7/1/2015	12/31/2013 6/30/2016	7/2/2013 12/30/2015	30.0		

Experience Period Summary	Total	
Experience Period Premiums	\$	137,679,176
MLR Rebates	\$	-
Net Experience Period Premiums	\$	137,679,176
Experience Period Paid Claims (Non-Capitated)	\$	123,160,041
Completion Factor		0.99
Experience Period Incurred Claims (Non-Capitated)	\$	123,866,461
Capitations	\$	713,706
Rx Rebates	\$	(2,892,799)
Other Manual Claims	\$	-
Total Experience Period Claims	\$	121,687,368
Experience Period Loss Ratio (Before MLR Rebates)		88.4%
Experience Period Loss Ratio (After MLR Rebates)		88.4%
Experience Period Loss Ratio (System Claims Only)		90.0%
Experience Period Member Months		438,476
Average Members		36,540
End of Experience Period Contract		25,258
End of Experience Period Members		40,243
Experience Period Allowed Claims (System Only)	\$	139,164,193
Adjustments	\$	(2,179,093)
Total Adjusted EP Allowed Claims	\$	136,985,100
EP Paid / Allowed Ratio		88.8%

Service Category Level Projection

Service Category Experience Period Allowed	Utilization Measure	EP Units	EP Allowed \$	Other	Rx Rebates	Net Allowed
Inpatient	Admits	1,968	\$ 27,068,642	\$ -	\$ -	\$ 27,068,642
Outpatient	Visits	19,978	\$ 24,411,199	\$ -	\$ -	\$ 24,411,199
Professional	Visits	321,550	\$ 46,066,170	\$ -	\$ -	\$ 46,066,170
Other	Services	22,097	\$ 5,659,419	\$ -	\$ -	\$ 5,659,419
Rx	Scripts	300,654	\$ 35,958,763	\$ -	(2,892,799)	\$ 33,065,964
Capitation	Member Months	438,476	\$ 713,706	\$ -	\$ -	\$ 713,706
Total			\$ 139,877,899	\$ -	(2,892,799)	\$ 136,985,100
PMPM			\$ 319.01	\$ -	(6.60)	\$ 312.41

Annual Trend Inputs	
Cost Trend	Utilization Trend
7.0%	1.0%
9.5%	0.0%
0.0%	4.5%
0.0%	6.0%
7.0%	1.0%
2.0%	0.0%

Service Category Experience Period Allowed	Utilization Measure	Experience Period			Projection Factors			Cost Factor	Utilization Factor	Total Factor	Projected			Effective Allowed PMPM Annual Trend
		Util / 1000	Unit Cost	PMPM	Population Risk / Morbidity*	Other	Util / 1000				Unit Cost	PMPM		
Inpatient	Admits	53.86	\$ 13,753.39	\$ 61.73	1.000	0.994	1.184	1.025	1.21	55.22	\$ 16,195.57	\$ 74.53	8.1%	
Outpatient	Visits	546.75	\$ 1,221.89	\$ 55.67	1.000	0.994	1.255	1.000	1.25	546.75	\$ 1,524.39	\$ 69.46	9.5%	
Professional	Visits	8,800.02	\$ 143.26	\$ 105.06	1.000	1.039	1.000	1.116	1.16	9,823.68	\$ 148.88	\$ 121.88	4.5%	
Other	Services	604.74	\$ 256.12	\$ 12.91	1.000	1.294	1.000	1.157	1.50	699.57	\$ 331.50	\$ 19.33	6.0%	
Rx	Scripts	8,228.15	\$ 109.98	\$ 75.41	1.000	0.961	1.184	1.025	1.17	8,435.40	\$ 125.12	\$ 87.95	8.1%	
Capitation	Member Months	12,000.00	\$ 1.63	\$ 1.63	1.000	0.957	1.051	1.000	1.01	12,000.00	\$ 1.64	\$ 1.64	2.0%	
Total				\$ 312.41								\$ 374.78	7.0%	
												Projected Allowed Claims PMPM (EHB + Non-EHB)	\$ 374.78	7.0%
												Non-EHB Claims In Projected PMPM**	\$ 1.25	
												Index Rate for EHB	\$ 373.53	

* Please refer to page 74 for more information.

** Includes abortion claims and capitation for embedded adult vision benefit.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual, Non-Medigap Allowed PMPM Projection (Includes EHB and Non-EHB Claims) & Derivation of Index Rate - Non-Grandfathered Business Only - 10/1/2015

Experience Period Rating Period	Begin	End	Mid-point	Months of Trend	pd through	3/31/2014
	1/1/2013	12/31/2013	7/2/2013			
	10/1/2015	9/30/2016	3/31/2016	33.0		

Experience Period Summary	Total	
Experience Period Premiums	\$	137,679,176
MLR Rebates	\$	-
Net Experience Period Premiums	\$	137,679,176
Experience Period Paid Claims (Non-Capitated)	\$	123,160,041
Completion Factor		0.99
Experience Period Incurred Claims (Non-Capitated)	\$	123,866,461
Capitations	\$	713,706
Rx Rebates	\$	(2,892,799)
Other Manual Claims	\$	-
Total Experience Period Claims	\$	121,687,368
Experience Period Loss Ratio (Before MLR Rebates)		88.4%
Experience Period Loss Ratio (After MLR Rebates)		88.4%
Experience Period Loss Ratio (System Claims Only)		90.0%
Experience Period Member Months		438,476
Average Members		36,540
End of Experience Period Contract		25,258
End of Experience Period Members		40,243
Experience Period Allowed Claims (System Only)	\$	139,164,193
Adjustments	\$	(2,179,093)
Total Adjusted EP Allowed Claims	\$	136,985,100
EP Paid / Allowed Ratio		88.8%

Service Category Level Projection

Service Category Experience Period Allowed	Utilization Measure	EP Units	EP Allowed \$	Other	Rx Rebates	Net Allowed
Inpatient	Admits	1,968	\$ 27,068,642	\$ -	\$ -	\$ 27,068,642
Outpatient	Visits	19,978	\$ 24,411,199	\$ -	\$ -	\$ 24,411,199
Professional	Visits	321,550	\$ 46,066,170	\$ -	\$ -	\$ 46,066,170
Other	Services	22,097	\$ 5,659,419	\$ -	\$ -	\$ 5,659,419
Rx	Scripts	300,654	\$ 35,958,763	\$ -	(2,892,799)	\$ 33,065,964
Capitation	Member Months	438,476	\$ 713,706	\$ -	\$ -	\$ 713,706
Total			\$ 139,877,899	\$ -	(2,892,799)	\$ 136,985,100
PMPM			\$ 319.01	\$ -	(6.60)	\$ 312.41

Annual Trend Inputs	
Cost Trend	Utilization Trend
7.0%	1.0%
9.5%	0.0%
0.0%	4.5%
0.0%	6.0%
7.0%	1.0%
2.0%	0.0%

Service Category Experience Period Allowed	Utilization Measure	Experience Period			Projection Factors		Cost Factor	Utilization Factor	Total Factor	Projected			Effective Allowed
		Util / 1000	Unit Cost	PMPM	Population Risk / Morbidity*	Other				Util / 1000	Unit Cost	PMPM	PMPM
Inpatient	Admits	53.86	\$ 13,753.39	\$ 61.73	1.000	0.994	1.204	1.028	1.23	55.36	\$ 16,471.85	\$ 75.99	8.1%
Outpatient	Visits	546.75	\$ 1,221.89	\$ 55.67	1.000	0.994	1.283	1.000	1.28	546.75	\$ 1,559.37	\$ 71.05	9.5%
Professional	Visits	8,800.02	\$ 143.26	\$ 105.06	1.000	1.039	1.000	1.129	1.17	9,932.38	\$ 148.88	\$ 123.23	4.5%
Other	Services	604.74	\$ 256.12	\$ 12.91	1.000	1.294	1.000	1.174	1.52	709.84	\$ 331.50	\$ 19.61	6.0%
Rx	Scripts	8,228.15	\$ 109.98	\$ 75.41	1.000	0.961	1.204	1.028	1.19	8,456.41	\$ 127.26	\$ 89.68	8.1%
Capitation	Member Months	12,000.00	\$ 1.63	\$ 1.63	1.000	0.957	1.056	1.000	1.01	12,000.00	\$ 1.64	\$ 1.64	2.0%
Total				\$ 312.41								\$ 381.19	7.0%
												Projected Allowed Claims PMPM (EHB + Non-EHB)	
												Non-EHB Claims In Projected PMPM**	\$ 1.27
												Index Rate for EHB	\$ 379.92

* Please refer to page 74 for more information.

** Includes abortion claims and capitation for embedded adult vision benefit.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Estimate of Non-EHB Claims - Individual, non-Medigap & Small Group Markets Combined

Abortion Coverage (Applies to Individual, Non-Medigap & Small Group Markets)

2013 Member

Total Abortion Related	Allowed Amount	Months	Exp Period PMPM
BlueChoice	\$446,872	475,831	\$0.94

Projected PMPM

1Q15	\$1.10
2Q15	\$1.12
3Q15	\$1.15
4Q15	\$1.17

Embedded Adult Vision Coverage (Applies to Individual, Non-Medigap Market Only)

Refer to page 54 for details.

Projected PMPM Spread Over Individual Market

Blended with Small Group

\$1.07

\$0.10

Projected PMPM

1Q15	\$0.10
2Q15	\$0.10
3Q15	\$0.10
4Q15	\$0.10

Projection Period Non-EHB

1Q15	\$1.20
2Q15	\$1.22
3Q15	\$1.25
4Q15	\$1.27

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Adjustments for Small Group Benefits in Excess of EHB

<u>1Q15</u>	Med	Rx	Total
Index Rate for EHB	\$ 276.48	\$ 84.61	\$ 361.09
<u>Benefits to be Covered in Excess of EHB On Exchange (PMPM)</u>			
Abortion*	\$ 1.13	\$ -	\$ 1.13
Total Adjustment to Index Rate	0.41%	0.00%	0.31%
<u>2Q15</u>	Med	Rx	Total
Index Rate for EHB	\$ 280.99	\$ 86.26	\$ 367.26
<u>Benefits to be Covered in Excess of EHB On Exchange (PMPM)</u>			
Abortion*	\$ 1.15	\$ -	\$ 1.15
Total Adjustment to Index Rate	0.41%	0.00%	0.31%
<u>3Q15</u>	Med	Rx	Total
Index Rate for EHB	\$ 285.57	\$ 87.95	\$ 373.53
<u>Benefits to be Covered in Excess of EHB On Exchange (PMPM)</u>			
Abortion*	\$ 1.17	\$ -	\$ 1.17
Total Adjustment to Index Rate	0.41%	0.00%	0.31%
<u>4Q15</u>	Med	Rx	Total
Index Rate for EHB	\$ 290.25	\$ 89.68	\$ 379.92
<u>Benefits to be Covered in Excess of EHB On Exchange (PMPM)</u>			
Abortion*	\$ 1.19	\$ -	\$ 1.19
Total Adjustment to Index Rate	0.41%	0.00%	0.31%

* Based on calendar year 2013 experience for DC BlueChoice Small Group business, trended to 2015.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
DC BC Index Rate History

Month	Index Rate	% Change	% Change Year to Year
201401	\$ 362.28		
201404	\$ 369.86	2.09%	
201407	\$ 377.62	2.10%	
201410	\$ 385.56	2.10%	
201501	\$ 361.09	-6.35%	-0.33%
201504	\$ 367.26	1.71%	-0.71%
201507	\$ 373.53	1.71%	-1.08%
201510	\$ 379.92	1.71%	-1.46%

CareFirst BlueCross BlueShield (GHMSI)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

2015 ACA - TREND ANALYSIS SUMMARY - DC BlueChoice

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
2014 FILING							2015 FILING									
BC-DC		Allowed	PROJECTED			Allowed	EXPERIENCE PERIOD			PROJECTED			vs 2014			
		Claims*	%	Cost	Utilization	Claims	Claims	%	Cost	Utilization	Claims	Cost	Utilization	Claims	Δ	
				Trend	Trend	Trend			Trend	Trend	Trend	Trend	Trend	Trend**		
1	Inpatient	Hospital	\$23,770,154	19%	4.1%	1.0%	5.1%	\$29,354,475	19%	9.9%	1.9%	12.0%	7.0%	1.0%	8.1%	2.9%
2	Outpatient	Hospital	\$21,965,415	17%	8.5%	3.5%	12.3%	\$26,666,931	17%	11.3%	-1.9%	9.2%	9.5%	0.0%	9.5%	-2.8%
3	Professional		\$44,298,737	35%	-5.4%	16.5%	10.2%	\$51,117,073	33%	0.8%	2.4%	3.2%	0.0%	4.5%	4.5%	-5.7%
4	Other Medical	Non-Capitated Ambulance	\$5,216,690	4%	5.5%	2.5%	8.1%	\$6,249,527	4%	-0.5%	7.0%	6.5%	0.0%	6.0%	6.0%	-2.1%
5		Home Health														
6		DME														
7		Prosthetics														
8		Supplies														
9		Vision Exams														
10		Dental Services														
11		Other Services														
12	Medical	Subtotal (Clms-Wgtd):	\$95,250,996	74%	0.8%	8.9%	9.3%	\$113,388,006	74%	5.6%	1.5%	7.1%	4.0%	2.6%	6.7%	-2.6%
13	RX	Claims-Weighted	\$32,757,088	26%	4.5%	2.0%	6.6%	\$39,738,141	26%	8.9%	-0.9%	8.0%	7.0%	1.0%	8.1%	1.5%
14	TOTAL	Claims-Weighted	\$128,008,084	100%	1.7%	7.1%	9.0%	\$153,126,148	100%	6.4%	0.9%	7.4%	4.8%	2.2%	7.1%	-1.8%

*Includes grandfathered Small Group business

**Note: The total trend shown is claims-weighted. The actual pricing trend utilized is 7.0%, calculated on a PMPM basis.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 1/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO \$250	BlueChoice HMO \$1,800	BlueChoice HMO \$1,000	BlueChoice HMO \$30/\$40	BlueChoice HMO HSA/HRA \$2,000	BlueChoice HMO HSA/HRA \$2,000, 80%	BlueChoice HMO HSA/HRA \$1,500	BlueChoice HMO Referral \$500	
HIOS Product ID	86052DC046	86052DC046	86052DC046	86052DC046	86052DC047	86052DC047	86052DC047	86052DC048	
HIOS Plan ID	86052DC0460006	86052DC0460008	86052DC0460003	86052DC0460007	86052DC0470006	86052DC0470002	86052DC0470005	86052DC0480005	
Metal Level	Gold	Gold	Gold	Platinum	Silver	Silver	Gold	Gold	
Metallic AV	81.86%	78.15%	78.47%	88.31%	71.94%	70.90%	79.69%	78.77%	
On / Off Exchange	On	On	On	On	On	On	On	On	
Network Type	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Lock In / Referral	
High Level Benefit Description									
Integrated	Y/N	N	N	Y	N	Y	Y	Y	N
Individual Deductible		\$250 Med/\$0 Rx	\$1800 Med/\$0 Rx	\$1,000	\$0 Med/\$0 Rx	\$2,000	\$2,000	\$1,500	\$500 Med/\$0 Rx
Individual OOP Max		\$3,000	\$2,600	\$3,000	\$1,300	\$5,000	\$4,000	\$2,000	\$3,000
Member Copay/Coinsurance		\$20 PCP/\$30 Spec/\$250 ER/\$500 IP/\$30 DXL	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL	20%	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$0 PCP/\$0 Spec/\$225 ER/\$300 IP/\$0 for DXL	20%	\$15 PCP/\$25 Spec/\$200 ER/\$500 IP/\$25 DXL	\$30 PCP/\$40 Spec/\$250 ER/\$500 IP/\$40 DXL
Rx Copays:									
Retail Generic		\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand		\$45	\$45	20%	\$45	\$45	20%	\$45	\$45
Retail NonPreferred Brand		\$65	\$65	40%	\$65	\$65	40%	\$65	\$65
Specialty		50%	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit									
Deductible (Class 2-4)		\$25	\$25	\$25	\$25	\$25	\$25	\$25	
Class 1		100%	100%	100%	100%	100%	100%	100%	
Class 2		80%	80%	80%	80%	80%	80%	80%	
Class 3		80%	80%	80%	80%	80%	80%	80%	
Class 4		50%	50%	50%	50%	50%	50%	50%	
Class 5		50%	50%	50%	50%	50%	50%	50%	
Out of Pocket Max		Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)		\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09
Market Level Adjustments:									
Reinsurance		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Risk Adjustment		1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	
Exchange User Fees		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Market Adjusted Index Rate (PMPM)		\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	
Plan Level Adjustments									
Cost Share Factor		0.8099	0.7068	0.7172	0.9515	0.5942	0.5770	0.6930	0.7762
Network &UM		0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	
Non-EHB*		1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	
Catastrophic Adj		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Distribution and Admin Cost		1.3737	1.3737	1.3737	1.3737	1.3819	1.3819	1.3819	1.3737
Plan Adjusted Index Rate (PMPM)		\$419.41	\$366.03	\$371.40	\$492.75	\$309.52	\$300.56	\$360.99	\$382.62
Calibrations to Consumer Level Rating Factors									
Age Calibration		0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	
Geo Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Tobacco Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Consumer Level Base Rate		\$398.30	\$347.61	\$352.70	\$467.94	\$293.94	\$285.43	\$342.82	\$363.36
Pricing AV		109.0%	95.2%	96.6%	128.1%	80.5%	78.1%	93.9%	99.5%
Estimated Plan DICR		71.8%	71.8%	71.8%	71.8%	71.4%	71.4%	71.4%	71.8%
Projected Member Months		8,316	324	468	4,284	1,812	348	2,424	1,560
Membership Distribution		8.1%	0.3%	0.5%	4.2%	1.8%	0.3%	2.4%	1.5%
2014 Plan Adjusted Index Rate (PMPM)		\$365.92	\$326.35	\$332.86	\$436.47	\$271.09	\$269.01	\$323.05	\$337.29
% Change		14.6%	12.2%	11.6%	12.9%	14.2%	11.7%	11.7%	13.4%
2014 Consumer Level Base Rate		\$352.54	\$314.42	\$320.69	\$420.51	\$261.18	\$259.17	\$311.24	\$324.96
% Change		13.0%	10.6%	10.0%	11.3%	12.5%	10.1%	10.1%	11.8%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 1/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO Referral \$30/\$40	BlueChoice HMO Referral \$10/\$20	BlueChoice HMO Referral HSA/HRA \$4,000	BlueChoice Plus \$2000	BlueChoice Plus 100%/80%, \$10/\$20	BlueChoice Plus 100%/60%, \$20/\$30	BlueChoice Plus 100%/80%, \$20/\$30
HIOS Product ID	86052DC048	86052DC048	86052DC049	86052DC050	86052DC050	86052DC050	86052DC050
HIOS Plan ID	86052DC0480006	86052DC0480004	86052DC0490001	86052DC0500005	86052DC0500008	86052DC0500007	86052DC0500006
Metal Level	Platinum	Platinum	Bronze	Silver	Platinum	Platinum	Platinum
Metallic AV	88.31%	90.60%	61.18%	71.88%	89.10%	88.62%	88.62%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Lock In / Referral	Lock In / Referral	Lock In / Referral	Open Access Plus	Open Access Plus	Open Access	Open Access
High Level Benefit Description							
Integrated	Y/N	N	N	Y	N	N	N
Individual Deductible	\$0 Med/\$0 Rx	\$0 Med/\$0 Rx	\$4,000	IN: \$2000 Med/\$0 Rx OON: \$4000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx
Individual OOP Max	\$1,300	\$1,300	\$6,350	IN: \$5000 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$10 PCP/\$20 Spec/\$50 ER/\$0 IP/\$20 DXL	20%	\$0 PCP/\$0 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/20%	\$10 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/20%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/40%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/20%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	20%	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	40%	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64
Plan Level Adjustments							
Cost Share Factor	0.9515	0.9744	0.4652	0.6330	0.9645	0.9407	0.9641
Network &UM	0.9300	0.9300	0.9300	1.0050	1.0050	0.9770	0.9770
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3737	1.3737	1.3819	1.3737	1.3737	1.3737	1.3737
Plan Adjusted Index Rate (PMPM)	\$469.04	\$480.29	\$230.67	\$337.18	\$513.75	\$487.13	\$499.23
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$445.43	\$456.12	\$219.06	\$320.21	\$487.90	\$462.62	\$474.10
Pricing AV	121.9%	124.9%	60.0%	87.7%	133.6%	126.6%	129.8%
Estimated Plan DICR	71.8%	71.8%	71.4%	71.8%	71.8%	71.8%	71.8%
Projected Member Months	5,088	2,028	216	132	2,520	1,812	8,604
Membership Distribution	4.9%	2.0%	0.2%	0.1%	2.4%	1.8%	8.4%
2014 Plan Adjusted Index Rate (PMPM)	\$416.09	\$428.08	\$205.92	\$295.79	\$456.66	\$432.30	\$443.46
% Change	12.7%	12.2%	12.0%	14.0%	12.5%	12.7%	12.6%
2014 Consumer Level Base Rate	\$400.87	\$412.43	\$198.39	\$284.97	\$439.96	\$416.49	\$427.24
% Change	11.1%	10.6%	10.4%	12.4%	10.9%	11.1%	11.0%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 1/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Plus HSA/HRA \$3500	BlueChoice Plus HSA/HRA \$1500	BlueChoice Plus HSA/HRA \$2000	BlueChoice Advantage \$1000	BlueChoice Advantage \$500 \$20/\$30	BlueChoice Advantage 80%/50%	BlueChoice Advantage 100%/70%
HIOS Product ID	86052DC051	86052DC051	86052DC051	86052DC044	86052DC044	86052DC044	86052DC044
HIOS Plan ID	86052DC0510006	86052DC0510004	86052DC0510005	86052DC0440008	86052DC0440009	86052DC0440006	86052DC0440007
Metal Level	Bronze	Silver	Silver	Gold	Gold	Platinum	Platinum
Metallic AV	61.62%	71.67%	68.90%	78.69%	78.51%	88.76%	88.37%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y	Y	Y	N	N	N	N
Individual Deductible	IN: \$3500 OON: \$6000	IN: \$1500 OON: \$3000	IN: \$2000 OON: \$4000	IN: \$1000 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN: \$500 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$500 Med/\$0 Rx
Individual OOP Max	IN: \$5250 OON: \$7500	IN: \$4000 OON: \$6000	IN: \$5000 OON: \$7500	IN: \$2500 OON: \$5000	IN: \$4500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL OON: \$100 ER/20%	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$30 PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 DXL OON: \$300 ER/30%	\$20 PCP/\$30 Spec/\$300 ER/\$500 IP/\$30-\$60 DXL OON: \$300 ER/\$750 IP/\$50	\$20 PCP/\$25 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/50%/30% OP Surg	\$30 PCP/\$30 Spec/\$200 ER/\$300 IP/\$30 DXL OON: \$200 ER/30%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64
Plan Level Adjustments							
Cost Share Factor	0.5064	0.6193	0.5942	0.7413	0.7834	0.9573	0.9464
Network & UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3819	1.3819	1.3819	1.3737	1.3737	1.3737	1.3737
Plan Adjusted Index Rate (PMPM)	\$271.37	\$331.87	\$318.42	\$403.55	\$426.44	\$521.08	\$515.18
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$257.71	\$315.17	\$302.39	\$383.24	\$404.97	\$494.85	\$489.25
Pricing AV	70.6%	86.3%	82.8%	104.9%	110.9%	135.5%	133.9%
Estimated Plan DICR	71.4%	71.4%	71.4%	71.8%	71.8%	71.8%	71.8%
Projected Member Months	1,356	1,320	120	8,616	348	72	1,716
Membership Distribution	1.3%	1.3%	0.1%	8.4%	0.3%	0.1%	1.7%
2014 Plan Adjusted Index Rate (PMPM)	\$240.59	\$294.08	\$281.07	\$354.76	n/a	\$457.47	\$451.49
% Change	12.8%	12.8%	13.3%	13.8%	n/a	13.9%	14.1%
2014 Consumer Level Base Rate	\$231.79	\$283.33	\$270.79	\$341.79	n/a	\$440.74	\$434.98
% Change	11.2%	11.2%	11.7%	12.1%	n/a	12.3%	12.5%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 1/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Advantage 90%/70%	BlueChoice Advantage HSA/HRA \$1500	HealthyBlue HMO \$1,500	HealthyBlue HMO \$300	HealthyBlue HMO \$600	HealthyBlue HMO HSA/HRA \$2,000	HealthyBlue Plus \$1,500
HIOS Product ID	86052DC044	86052DC045	86052DC054	86052DC054	86052DC054	86052DC055	86052DC056
HIOS Plan ID	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0540006	86052DC0550002	86052DC0560004
Metal Level	Platinum	Silver	Gold	Platinum	Platinum	Silver	Gold
Metallic AV	90.26%	70.35%	81.88%	90.26%	89.81%	70.81%	81.88%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Advantage	Open Access Advantage	Open Access	Open Access	Open Access	Open Access	Open Access Plus
High Level Benefit Description							
Integrated	Y/N						
Individual Deductible	N	Y	N	N	N	Y	N
Individual OOP Max	IN: \$0 Med/\$0 Rx OON: \$2000 Med/\$0 Rx	IN: \$1500 OON: \$3000	\$1500 Med/\$0 Rx	\$300 Med/\$0 Rx	\$600 Med/\$0 Rx	\$2,000	IN: \$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx
Member Copay/Coinsurance	IN: \$2500 OON: \$3500	IN: \$4000 OON: \$6000	\$5,500	\$1,500	\$1,500	\$6,350	IN: \$5500 OON: \$7500
Rx Copays:		\$30PCP/\$30 Spec/\$300	\$0 PCP/\$30 Spec/\$200	\$0 PCP/\$30 Spec/\$200	\$0 PCP/\$30 Spec/\$200	\$0 PCP/\$30 Spec/\$200	\$0 PCP/\$30 Spec/\$200
Retail Generic	10% IN / 30% OON	ER/\$300 IP/\$30 or \$0 DXL OON: \$300 ER/30%	ER/\$300 IP/\$0 for DXL	ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP			
Retail Preferred Brand	\$10	\$10	\$0	\$0	\$0	\$0	\$0
Retail NonPreferred Brand	20%	\$45	\$45	\$45	\$45	\$45	\$45
Specialty	40%	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64
Plan Level Adjustments							
Cost Share Factor	0.9340	0.6112	0.7616	0.9304	0.9048	0.5873	0.7616
Network & UM	1.0270	1.0270	0.9770	0.9770	0.9770	0.9770	1.0050
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3737	1.3819	1.3737	1.3737	1.3737	1.3819	1.3737
Plan Adjusted Index Rate (PMPM)	\$508.41	\$334.69	\$394.39	\$481.80	\$468.57	\$305.91	\$405.70
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$482.82	\$317.85	\$374.54	\$457.55	\$444.98	\$290.51	\$385.28
Pricing AV	132.2%	87.0%	102.5%	125.3%	121.8%	79.5%	105.5%
Estimated Plan DICR	71.8%	71.4%	71.8%	71.8%	71.8%	71.4%	71.8%
Projected Member Months	156	1,716	2,124	708	12	1,488	3,768
Membership Distribution	0.2%	1.7%	2.1%	0.7%	0.0%	1.4%	3.7%
2014 Plan Adjusted Index Rate (PMPM)	\$451.22	\$291.12	\$341.15	\$423.89	\$414.25	\$265.05	\$351.99
% Change	12.7%	15.0%	15.6%	13.7%	13.1%	15.4%	15.3%
2014 Consumer Level Base Rate	\$434.72	\$280.47	\$328.67	\$408.39	\$399.10	\$255.36	\$339.12
% Change	11.1%	13.3%	14.0%	12.0%	11.5%	13.8%	13.6%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 1/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	HealthyBlue Plus \$300	HealthyBlue Plus \$600	HealthyBlue Plus HSA/HRA \$2,000	HealthyBlue Advantage \$1,500	HealthyBlue Advantage \$300	HealthyBlue Advantage \$600	HealthyBlue Advantage HSA/HRA \$2,000
HIOS Product ID	86052DC056	86052DC056	86052DC057	86052DC052	86052DC052	86052DC052	86052DC053
HIOS Plan ID	86052DC0560005	86052DC0560006	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Metal Level	Platinum	Platinum	Silver	Gold	Platinum	Platinum	Silver
Metallic AV	90.26%	89.81%	70.81%	81.88%	90.26%	89.81%	70.81%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y/N						
Individual Deductible	N	N	Y	N	N	N	Y
Individual OOP Max	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000
Member Copay/Coinsurance	IN:\$1500 OON: \$3000	IN:\$1500 OON: \$3000	IN: \$6350 OON: \$7500	IN: \$5500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1500 OON: \$3000	IN: \$6350 OON: \$7500
Rx Copays:							
Retail Generic	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64
Plan Level Adjustments							
Cost Share Factor	0.9304	0.9048	0.5873	0.7616	0.9304	0.9048	0.5873
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3737	1.3737	1.3819	1.3737	1.3737	1.3737	1.3819
Plan Adjusted Index Rate (PMPM)	\$495.61	\$482.00	\$314.68	\$414.58	\$506.45	\$492.55	\$321.56
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$470.66	\$457.74	\$298.84	\$393.71	\$480.96	\$467.76	\$305.38
Pricing AV	128.9%	125.3%	81.8%	107.8%	131.7%	128.1%	83.6%
Estimated Plan DICR	71.8%	71.8%	71.4%	71.8%	71.8%	71.8%	71.4%
Projected Member Months	3,276	792	576	32,916	1,404	24	432
Membership Distribution	3.2%	0.8%	0.6%	32.0%	1.4%	0.0%	0.4%
2014 Plan Adjusted Index Rate (PMPM)	\$437.37	\$427.43	\$273.49	\$355.72	\$442.01	\$431.96	\$276.39
% Change	13.3%	12.8%	15.1%	16.5%	14.6%	14.0%	16.3%
2014 Consumer Level Base Rate	\$421.38	\$411.80	\$263.49	\$342.71	\$425.85	\$416.16	\$266.28
% Change	11.7%	11.2%	13.4%	14.9%	12.9%	12.4%	14.7%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 4/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO \$250	BlueChoice HMO \$1,800	BlueChoice HMO \$1,000	BlueChoice HMO \$30/\$40	BlueChoice HMO HSA/HRA \$2,000	BlueChoice HMO HSA/HRA \$2,000, 80%	BlueChoice HMO HSA/HRA \$1,500	BlueChoice HMO Referral \$500	
HIOS Product ID	86052DC046	86052DC046	86052DC046	86052DC046	86052DC047	86052DC047	86052DC047	86052DC048	
HIOS Plan ID	86052DC0460006	86052DC0460008	86052DC0460003	86052DC0460007	86052DC0470006	86052DC0470002	86052DC0470005	86052DC0480005	
Metal Level	Gold	Gold	Gold	Platinum	Silver	Silver	Gold	Gold	
Metallic AV	81.86%	78.15%	78.47%	88.31%	71.94%	70.90%	79.69%	78.77%	
On / Off Exchange	On	On	On	On	On	On	On	On	
Network Type	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Lock In / Referral	
High Level Benefit Description									
Integrated	Y/N	N	N	Y	N	Y	Y	Y	N
Individual Deductible		\$250 Med/\$0 Rx	\$1800 Med/\$0 Rx	\$1,000	\$0 Med/\$0 Rx	2000	\$2,000	1500	\$500 Med/\$0 Rx
Individual OOP Max		\$3,000	\$2,600	\$3,000	\$1,300	\$5,000	\$4,000	\$2,000	\$3,000
Member Copay/Coinsurance		\$20 PCP/\$30 Spec/\$250 ER/\$500 IP/\$30 DXL	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL	20%	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$0 PCP/\$0 Spec/\$225 ER/\$300 IP/\$0 for DXL	20%	\$15 PCP/\$25 Spec/\$200 ER/\$500 IP/\$25 DXL	\$30 PCP/\$40 Spec/\$250 ER/\$500 IP/\$40 DXL
Rx Copays:									
Retail Generic		\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand		\$45	\$45	20%	\$45	\$45	20%	\$45	\$45
Retail NonPreferred Brand		\$65	\$65	40%	\$65	\$65	40%	\$65	\$65
Specialty		50%	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit									
Deductible (Class 2-4)		\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1		100%	100%	100%	100%	100%	100%	100%	100%
Class 2		80%	80%	80%	80%	80%	80%	80%	80%
Class 3		80%	80%	80%	80%	80%	80%	80%	80%
Class 4		50%	50%	50%	50%	50%	50%	50%	50%
Class 5		50%	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max		Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)		\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26
Market Level Adjustments:									
Reinsurance		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Risk Adjustment		1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	
Exchange User Fees		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Market Adjusted Index Rate (PMPM)		\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	
Plan Level Adjustments									
Cost Share Factor		0.8099	0.7068	0.7172	0.9515	0.5942	0.5770	0.6930	0.7762
Network &UM		0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9300
Non-EHB*		1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost		1.3685	1.3685	1.3685	1.3685	1.3765	1.3765	1.3765	1.3685
Plan Adjusted Index Rate (PMPM)		\$424.94	\$370.86	\$376.29	\$499.24	\$313.57	\$304.49	\$365.72	\$387.66
Calibrations to Consumer Level Rating Factors									
Age Calibration		0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	
Geo Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Tobacco Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Consumer Level Base Rate		\$403.55	\$352.19	\$357.35	\$474.11	\$297.79	\$289.17	\$347.31	\$368.15
Pricing AV		108.6%	94.8%	96.2%	127.6%	80.2%	77.8%	93.5%	99.1%
Estimated Plan DICR		72.1%	72.1%	72.1%	72.1%	71.7%	71.7%	71.7%	72.1%
Projected Member Months		5,880	216	324	3,024	1,272	240	1,728	1,104
Membership Distribution		8.1%	0.3%	0.4%	4.2%	1.7%	0.3%	2.4%	1.5%
2014 Plan Adjusted Index Rate (PMPM)		\$373.57	\$333.18	\$339.83	\$445.61	\$276.77	\$274.64	\$329.82	\$344.35
% Change		13.8%	11.3%	10.7%	12.0%	13.3%	10.9%	10.9%	12.6%
2014 Consumer Level Base Rate		\$359.91	\$321.00	\$327.40	\$429.31	\$266.65	\$264.60	\$317.76	\$331.76
% Change		12.1%	9.7%	9.1%	10.4%	11.7%	9.3%	9.3%	11.0%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 4/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO Referral \$30/\$40	BlueChoice HMO Referral \$10/\$20	BlueChoice HMO Referral HSA/HRA \$4,000	BlueChoice Plus \$2000	BlueChoice Plus 100%/80%, \$10/\$20	BlueChoice Plus 100%/60%, \$20/\$30	BlueChoice Plus 100%/80%, \$20/\$30
HIOS Product ID	86052DC048	86052DC048	86052DC049	86052DC050	86052DC050	86052DC050	86052DC050
HIOS Plan ID	86052DC0480006	86052DC0480004	86052DC0490001	86052DC0500005	86052DC0500008	86052DC0500007	86052DC0500006
Metal Level	Platinum	Platinum	Bronze	Silver	Platinum	Platinum	Platinum
Metallic AV	88.31%	90.60%	61.18%	71.88%	89.10%	88.62%	88.62%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Lock In / Referral	Lock In / Referral	Lock In / Referral	Open Access Plus	Open Access Plus	Open Access	Open Access
High Level Benefit Description							
Integrated	Y/N	N	N	Y	N	N	N
Individual Deductible	\$0 Med/\$0 Rx	\$0 Med/\$0 Rx	\$4,000	IN: \$2000 Med/\$0 Rx OON: \$4000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx
Individual OOP Max	\$1,300	\$1,300	\$6,350	IN: \$5000 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$10 PCP/\$20 Spec/\$50 ER/\$0 IP/\$20 DXL	20%	\$0 PCP/\$0 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/20%	\$10 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/20%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/40%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/20%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	20%	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	40%	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21
Plan Level Adjustments							
Cost Share Factor	0.9515	0.9744	0.4652	0.6330	0.9645	0.9407	0.9641
Network &UM	0.9300	0.9300	0.9300	1.0050	1.0050	0.9770	0.9770
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3685	1.3685	1.3765	1.3685	1.3685	1.3685	1.3685
Plan Adjusted Index Rate (PMPM)	\$475.23	\$486.63	\$233.70	\$341.63	\$520.53	\$493.56	\$505.81
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$451.31	\$462.13	\$221.94	\$324.43	\$494.33	\$468.71	\$480.35
Pricing AV	121.5%	124.4%	59.7%	87.3%	133.1%	126.2%	129.3%
Estimated Plan DICR	72.1%	72.1%	71.7%	72.1%	72.1%	72.1%	72.1%
Projected Member Months	3,600	1,428	156	96	1,776	1,272	6,084
Membership Distribution	4.9%	2.0%	0.2%	0.1%	2.4%	1.7%	8.4%
2014 Plan Adjusted Index Rate (PMPM)	\$424.79	\$437.05	\$210.23	\$301.97	\$466.22	\$441.34	\$452.75
% Change	11.9%	11.3%	11.2%	13.1%	11.6%	11.8%	11.7%
2014 Consumer Level Base Rate	\$409.26	\$421.07	\$202.54	\$290.93	\$449.17	\$425.20	\$436.19
% Change	10.3%	9.8%	9.6%	11.5%	10.1%	10.2%	10.1%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 4/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Plus HSA/HRA \$3500	BlueChoice Plus HSA/HRA \$1500	BlueChoice Plus HSA/HRA \$2000	BlueChoice Advantage \$1000	BlueChoice Advantage \$500 \$20/\$30	BlueChoice Advantage 80%/50%	BlueChoice Advantage 100%/70%
HIOS Product ID	86052DC051	86052DC051	86052DC051	86052DC044	86052DC044	86052DC044	86052DC044
HIOS Plan ID	86052DC0510006	86052DC0510004	86052DC0510005	86052DC0440008	86052DC0440009	86052DC0440006	86052DC0440007
Metal Level	Bronze	Silver	Silver	Gold	Gold	Platinum	Platinum
Metallic AV	61.62%	71.67%	68.90%	78.69%	78.51%	88.76%	88.37%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y/N	Y	Y	Y	N	N	N
Individual Deductible	IN: \$3500 OON: \$6000	IN: \$1500 OON: \$3000	IN: \$2000 OON: \$4000	IN: \$1000 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN: \$500 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$500 Med/\$0 Rx
Individual OOP Max	IN: \$5250 OON: \$7500	IN: \$4000 OON: \$6000	IN: \$5000 OON: \$7500	IN: \$2500 OON: \$5000	IN: \$4500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL OON: \$100 ER/20%	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$30 PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 DXL OON: \$300 ER/30%	\$20 PCP/\$30 Spec/\$300 ER/\$500 IP/\$30-\$60 DXL OON: \$300 ER/\$750 IP/\$50	\$20 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/50%/30% OP Surg	\$30 PCP/\$30 Spec/\$200 ER/\$300 IP/\$30 DXL OON: \$200 ER/30%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21
Plan Level Adjustments							
Cost Share Factor	0.5064	0.6193	0.5942	0.7413	0.7834	0.9573	0.9464
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3765	1.3765	1.3765	1.3685	1.3685	1.3685	1.3685
Plan Adjusted Index Rate (PMPM)	\$274.92	\$336.22	\$322.59	\$408.87	\$432.06	\$527.95	\$521.97
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$261.09	\$319.30	\$306.35	\$388.29	\$410.31	\$501.38	\$495.70
Pricing AV	70.3%	85.9%	82.5%	104.5%	110.4%	135.0%	133.4%
Estimated Plan DICR	71.7%	71.7%	71.7%	72.1%	72.1%	72.1%	72.1%
Projected Member Months	960	924	72	6,096	240	48	1,224
Membership Distribution	1.3%	1.3%	0.1%	8.4%	0.3%	0.1%	1.7%
2014 Plan Adjusted Index Rate (PMPM)	\$245.62	\$300.24	\$286.94	\$362.18	n/a	\$467.05	\$460.94
% Change	11.9%	12.0%	12.4%	12.9%	n/a	13.0%	13.2%
2014 Consumer Level Base Rate	\$236.64	\$289.26	\$276.45	\$348.94	n/a	\$449.97	\$444.08
% Change	10.3%	10.4%	10.8%	11.3%	n/a	11.4%	11.6%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 4/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Advantage 90%/70%	BlueChoice Advantage HSA/HRA \$1500	HealthyBlue HMO \$1,500	HealthyBlue HMO \$300	HealthyBlue HMO \$600	HealthyBlue HMO HSA/HRA \$2,000	HealthyBlue Plus \$1,500	
HIOS Product ID	86052DC044	86052DC045	86052DC054	86052DC054	86052DC054	86052DC055	86052DC056	
HIOS Plan ID	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0540006	86052DC0550002	86052DC0560004	
Metal Level	Platinum	Silver	Gold	Platinum	Platinum	Silver	Gold	
Metallic AV	90.26%	70.35%	81.88%	90.26%	89.81%	70.81%	81.88%	
On / Off Exchange	On	On	On	On	On	On	On	
Network Type	Open Access Advantage	Open Access Advantage	Open Access	Open Access	Open Access	Open Access	Open Access Plus	
High Level Benefit Description	Integrated	Y/N	N	Y	N	N	Y	N
Individual Deductible	Med/\$0 Rx OON: \$2000 Me	IN: \$1500 OON: \$3000	\$1500 Med/\$0 Rx	\$300 Med/\$0 Rx	\$600 Med/\$0 Rx	2000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	
Individual OOP Max	IN: \$2500 OON: \$3500	IN: \$4000 OON: \$6000	\$5,500	\$1,500	\$1,500	\$6,350	IN:\$5500 OON: \$7500	
Member Copay/Coinsurance	10% IN / 30% OON	\$30PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 or \$0 DXL OON: \$300 ER/30%	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 for DXL	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/05 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP				
Rx Copays:								
Retail Generic	\$10	\$10	\$0	\$0	\$0	\$0	\$0	
Retail Preferred Brand	20%	\$45	\$45	\$45	\$45	\$45	\$45	
Retail NonPreferred Brand	40%	\$65	\$65	\$65	\$65	\$65	\$65	
Specialty	50%	50%	50%	50%	50%	50%	50%	
Embedded Pediatric Dental Benefit								
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25	
Class 1	100%	100%	100%	100%	100%	100%	100%	
Class 2	80%	80%	80%	80%	80%	80%	80%	
Class 3	80%	80%	80%	80%	80%	80%	80%	
Class 4	50%	50%	50%	50%	50%	50%	50%	
Class 5	50%	50%	50%	50%	50%	50%	50%	
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	
Index Rate (Projected EHB Allowed PMPM)	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	
Market Level Adjustments:								
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Market Adjusted Index Rate (PMPM)	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	
Plan Level Adjustments								
Cost Share Factor	0.9340	0.6112	0.7616	0.9304	0.9048	0.5873	0.7616	
Network &UM	1.0270	1.0270	0.9770	0.9770	0.9770	0.9770	1.0050	
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Distribution and Admin Cost	1.3685	1.3765	1.3685	1.3685	1.3685	1.3765	1.3685	
Plan Adjusted Index Rate (PMPM)	\$515.11	\$339.08	\$399.59	\$488.15	\$474.75	\$309.92	\$411.05	
Calibrations to Consumer Level Rating Factors								
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Consumer Level Base Rate	\$489.19	\$322.01	\$379.48	\$463.58	\$450.85	\$294.32	\$390.36	
Pricing AV	131.7%	86.7%	102.1%	124.8%	121.4%	79.2%	105.1%	
Estimated Plan DICR	72.1%	71.7%	72.1%	72.1%	72.1%	72.1%	72.1%	
Projected Member Months	120	1,224	1,500	504	12	1,056	2,676	
Membership Distribution	0.2%	1.7%	2.1%	0.7%	0.0%	1.5%	3.7%	
2014 Plan Adjusted Index Rate (PMPM)	\$460.67	\$297.21	\$348.28	\$432.77	\$422.92	\$270.61	\$359.36	
% Change	11.8%	14.1%	14.7%	12.8%	12.3%	14.5%	14.4%	
2014 Consumer Level Base Rate	\$443.82	\$286.34	\$335.54	\$416.94	\$407.45	\$260.71	\$346.22	
% Change	10.2%	12.5%	13.1%	11.2%	10.7%	12.9%	12.7%	

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 4/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	HealthyBlue Plus \$300	HealthyBlue Plus \$600	HealthyBlue Plus HSA/HRA \$2,000	HealthyBlue Advantage \$1,500	HealthyBlue Advantage \$300	HealthyBlue Advantage \$600	HealthyBlue Advantage HSA/HRA \$2,000
HIOS Product ID	86052DC056	86052DC056	86052DC057	86052DC052	86052DC052	86052DC052	86052DC053
HIOS Plan ID	86052DC0560005	86052DC0560006	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Metal Level	Platinum	Platinum	Silver	Gold	Platinum	Platinum	Silver
Metallic AV	90.26%	89.81%	70.81%	81.88%	90.26%	89.81%	70.81%
On / Off Exchange	On						
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y/N	N	N	Y	N	N	Y
Individual Deductible	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000
Individual OOP Max	IN:\$1500 OON: \$3000	IN:\$1500 OON: \$3000	IN: \$6350 OON: \$7500	IN: \$5500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1500 OON: \$3000	IN: \$6350 OON: \$7500
Member Copay/Coinsurance	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP
Rx Copays:							
Retail Generic	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx						
Index Rate (Projected EHB Allowed PMPM)	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21
Plan Level Adjustments							
Cost Share Factor	0.9304	0.9048	0.5873	0.7616	0.9304	0.9048	0.5873
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3685	1.3685	1.3765	1.3685	1.3685	1.3685	1.3765
Plan Adjusted Index Rate (PMPM)	\$502.14	\$488.35	\$318.80	\$420.04	\$513.13	\$499.04	\$325.78
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$476.87	\$463.77	\$302.75	\$398.90	\$487.30	\$473.92	\$309.38
Pricing AV	128.4%	124.8%	81.5%	107.4%	131.2%	127.6%	83.3%
Estimated Plan DICR	72.1%	72.1%	71.7%	72.1%	72.1%	72.1%	71.7%
Projected Member Months	2,328	564	408	23,292	996	24	312
Membership Distribution	3.2%	0.8%	0.6%	32.0%	1.4%	0.0%	0.4%
2014 Plan Adjusted Index Rate (PMPM)	\$446.53	\$436.37	\$279.21	\$363.17	\$451.26	\$441.00	\$282.17
% Change	12.5%	11.9%	14.2%	15.7%	13.7%	13.2%	15.5%
2014 Consumer Level Base Rate	\$430.20	\$420.41	\$269.00	\$349.89	\$434.76	\$424.87	\$271.85
% Change	10.8%	10.3%	12.5%	14.0%	12.1%	11.5%	13.8%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 7/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO \$250	BlueChoice HMO \$1,800	BlueChoice HMO \$1,000	BlueChoice HMO \$30/\$40	BlueChoice HMO HSA/HRA \$2,000	BlueChoice HMO HSA/HRA \$2,000, 80%	BlueChoice HMO HSA/HRA \$1,500	BlueChoice HMO Referral \$500	
HIOS Product ID	86052DC046	86052DC046	86052DC046	86052DC046	86052DC047	86052DC047	86052DC047	86052DC048	
HIOS Plan ID	86052DC0460006	86052DC0460008	86052DC0460003	86052DC0460007	86052DC0470006	86052DC0470002	86052DC0470005	86052DC0480005	
Metal Level	Gold	Gold	Gold	Platinum	Silver	Silver	Gold	Gold	
Metallic AV	81.86%	78.15%	78.47%	88.31%	71.94%	70.90%	79.69%	78.77%	
On / Off Exchange	On	On	On	On	On	On	On	On	
Network Type	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Lock In / Referral	
High Level Benefit Description									
Integrated	Y/N	N	N	Y	N	Y	Y	Y	
Individual Deductible		\$250 Med/\$0 Rx	\$1800 Med/\$0 Rx	\$1,000	\$0 Med/\$0 Rx	2000	\$2,000	1500	\$500 Med/\$0 Rx
Individual OOP Max		\$3,000	\$2,600	\$3,000	\$1,300	\$5,000	\$4,000	\$2,000	\$3,000
Member Copay/Coinsurance		\$20 PCP/\$30 Spec/\$250 ER/\$500 IP/\$30 DXL	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL	20%	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$0 PCP/\$0 Spec/\$225 ER/\$300 IP/\$0 for DXL	20%	\$15 PCP/\$25 Spec/\$200 ER/\$500 IP/\$25 DXL	\$30 PCP/\$40 Spec/\$250 ER/\$500 IP/\$40 DXL
Rx Copays:									
Retail Generic		\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand		\$45	\$45	20%	\$45	\$45	20%	\$45	\$45
Retail NonPreferred Brand		\$65	\$65	40%	\$65	\$65	40%	\$65	\$65
Specialty		50%	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)		\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1		100%	100%	100%	100%	100%	100%	100%	100%
Class 2		80%	80%	80%	80%	80%	80%	80%	80%
Class 3		80%	80%	80%	80%	80%	80%	80%	80%
Class 4		50%	50%	50%	50%	50%	50%	50%	50%
Class 5		50%	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max		Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)		\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53
Market Level Adjustments:									
Reinsurance		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment		1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)		\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89
Plan Level Adjustments									
Cost Share Factor		0.8099	0.7068	0.7172	0.9515	0.5942	0.5770	0.6930	0.7762
Network &UM		0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9300
Non-EHB*		1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost		1.3636	1.3636	1.3636	1.3636	1.3715	1.3715	1.3715	1.3636
Plan Adjusted Index Rate (PMPM)		\$430.67	\$375.86	\$381.37	\$505.97	\$317.78	\$308.58	\$370.62	\$392.89
Calibrations to Consumer Level Rating Factors									
Age Calibration		0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate		\$408.99	\$356.94	\$362.17	\$480.51	\$301.78	\$293.04	\$351.97	\$373.11
Pricing AV		108.2%	94.5%	95.8%	127.2%	79.9%	77.6%	93.1%	98.7%
Estimated Plan DICR		72.3%	72.3%	72.3%	72.3%	71.9%	71.9%	71.9%	72.3%
Projected Member Months		7,416	288	408	3,816	1,620	312	2,160	1,392
Membership Distribution		8.1%	0.3%	0.4%	4.2%	1.8%	0.3%	2.4%	1.5%
2014 Plan Adjusted Index Rate (PMPM)		\$381.41	\$340.18	\$346.95	\$454.96	\$282.57	\$280.40	\$336.73	\$351.57
% Change		12.9%	10.5%	9.9%	11.2%	12.5%	10.0%	10.1%	11.8%
2014 Consumer Level Base Rate		\$367.46	\$327.74	\$334.26	\$438.32	\$272.24	\$270.15	\$324.42	\$338.71
% Change		11.3%	8.9%	8.3%	9.6%	10.9%	8.5%	8.5%	10.2%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 7/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO Referral \$30/\$40	BlueChoice HMO Referral \$10/\$20	BlueChoice HMO Referral HSA/HRA \$4,000	BlueChoice Plus \$2000	BlueChoice Plus 100%/80%, \$10/\$20	BlueChoice Plus 100%/60%, \$20/\$30	BlueChoice Plus 100%/80%, \$20/\$30
HIOS Product ID	86052DC048	86052DC048	86052DC049	86052DC050	86052DC050	86052DC050	86052DC050
HIOS Plan ID	86052DC0480006	86052DC0480004	86052DC0490001	86052DC0500005	86052DC0500008	86052DC0500007	86052DC0500006
Metal Level	Platinum	Platinum	Bronze	Silver	Platinum	Platinum	Platinum
Metallic AV	88.31%	90.60%	61.18%	71.88%	89.10%	88.62%	88.62%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Lock In / Referral	Lock In / Referral	Lock In / Referral	Open Access Plus	Open Access Plus	Open Access	Open Access
High Level Benefit Description							
Integrated	Y/N	N	N	Y	N	N	N
Individual Deductible		\$0 Med/\$0 Rx	\$0 Med/\$0 Rx	\$4,000	IN: \$2000 Med/\$0 Rx OON: \$4000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx
Individual OOP Max		\$1,300	\$1,300	\$6,350	IN: \$5000 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200
Member Copay/Coinsurance		\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$10 PCP/\$20 Spec/\$50 ER/\$0 IP/\$20 DXL	20%	\$0 PCP/\$0 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/20%	\$10 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/20%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/40%
Rx Copays:							
Retail Generic		\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand		\$45	\$45	20%	\$45	\$45	\$45
Retail NonPreferred Brand		\$65	\$65	40%	\$65	\$65	\$65
Specialty		50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)		\$25	\$25	\$25	\$25	\$25	\$25
Class 1		100%	100%	100%	100%	100%	100%
Class 2		80%	80%	80%	80%	80%	80%
Class 3		80%	80%	80%	80%	80%	80%
Class 4		50%	50%	50%	50%	50%	50%
Class 5		50%	50%	50%	50%	50%	50%
Out of Pocket Max		Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)		\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53
Market Level Adjustments:							
Reinsurance		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment		1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)		\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89
Plan Level Adjustments							
Cost Share Factor		0.9515	0.9744	0.4652	0.6330	0.9645	0.9407
Network & UM		0.9300	0.9300	0.9300	1.0050	1.0050	0.9770
Non-EHB*		1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost		1.3636	1.3636	1.3715	1.3636	1.3636	1.3636
Plan Adjusted Index Rate (PMPM)		\$481.63	\$493.19	\$236.83	\$346.23	\$527.54	\$500.21
Calibrations to Consumer Level Rating Factors							
Age Calibration		0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate		\$457.39	\$468.36	\$224.91	\$328.81	\$500.99	\$475.03
Pricing AV		121.0%	124.0%	59.5%	87.0%	132.6%	128.8%
Estimated Plan DICR		72.3%	72.3%	71.9%	72.3%	72.3%	72.3%
Projected Member Months		4,548	1,812	192	108	2,244	1,620
Membership Distribution		5.0%	2.0%	0.2%	0.1%	2.4%	1.8%
2014 Plan Adjusted Index Rate (PMPM)		\$433.70	\$446.21	\$214.64	\$308.30	\$475.99	\$450.60
% Change		11.1%	10.5%	10.3%	12.3%	10.8%	11.0%
2014 Consumer Level Base Rate		\$417.84	\$429.89	\$206.79	\$297.03	\$458.58	\$434.12
% Change		9.5%	8.9%	8.8%	10.7%	9.2%	9.3%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 7/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Plus HSA/HRA \$3500	BlueChoice Plus HSA/HRA \$1500	BlueChoice Plus HSA/HRA \$2000	BlueChoice Advantage \$1000	BlueChoice Advantage \$500 \$20/\$30	BlueChoice Advantage 80%/50%	BlueChoice Advantage 100%/70%
HIOS Product ID	86052DC051	86052DC051	86052DC051	86052DC044	86052DC044	86052DC044	86052DC044
HIOS Plan ID	86052DC0510006	86052DC0510004	86052DC0510005	86052DC0440008	86052DC0440009	86052DC0440006	86052DC0440007
Metal Level	Bronze	Silver	Silver	Gold	Gold	Platinum	Platinum
Metallic AV	61.62%	71.67%	68.90%	78.69%	78.51%	88.76%	88.37%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y	Y	Y	N	N	N	N
Individual Deductible	IN: \$3500 OON: \$6000	IN: \$1500 OON: \$3000	IN: \$2000 OON: \$4000	IN: \$1000 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN: \$500 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$500 Med/\$0 Rx
Individual OOP Max	IN: \$5250 OON: \$7500	IN: \$4000 OON: \$6000	IN: \$5000 OON: \$7500	IN: \$2500 OON: \$5000	IN: \$4500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL OON: \$100 ER/20%	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$30 PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 DXL OON: \$300 ER/30%	\$20 PCP/\$30 Spec/\$300 ER/\$500 IP/\$30-\$60 DXL OON: \$300 ER/\$750 IP/\$50	\$20 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/50%/30% OP Surg	\$30 PCP/\$30 Spec/\$200 ER/\$300 IP/\$30 DXL OON: \$200 ER/30%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89
Plan Level Adjustments							
Cost Share Factor	0.5064	0.6193	0.5942	0.7413	0.7834	0.9573	0.9464
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3715	1.3715	1.3715	1.3636	1.3636	1.3636	1.3636
Plan Adjusted Index Rate (PMPM)	\$278.61	\$340.73	\$326.91	\$414.38	\$437.88	\$535.07	\$529.01
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$264.59	\$323.58	\$310.46	\$393.53	\$415.84	\$508.14	\$502.38
Pricing AV	70.0%	85.6%	82.2%	104.1%	110.1%	134.5%	133.0%
Estimated Plan DICR	71.9%	71.9%	71.9%	72.3%	72.3%	72.3%	72.3%
Projected Member Months	1,212	1,176	108	7,692	312	72	1,536
Membership Distribution	1.3%	1.3%	0.1%	8.4%	0.3%	0.1%	1.7%
2014 Plan Adjusted Index Rate (PMPM)	\$250.77	\$306.54	\$292.96	\$369.78	n/a	\$476.84	\$470.60
% Change	11.1%	11.2%	11.6%	12.1%	n/a	12.2%	12.4%
2014 Consumer Level Base Rate	\$241.60	\$295.33	\$282.25	\$356.26	n/a	\$459.40	\$453.39
% Change	9.5%	9.6%	10.0%	10.5%	n/a	10.6%	10.8%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 7/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Advantage 90%/70%	BlueChoice Advantage HSA/HRA \$1500	HealthyBlue HMO \$1,500	HealthyBlue HMO \$300	HealthyBlue HMO \$600	HealthyBlue HMO HSA/HRA \$2,000	HealthyBlue Plus \$1,500
HIOS Product ID	86052DC044	86052DC045	86052DC054	86052DC054	86052DC054	86052DC055	86052DC056
HIOS Plan ID	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0540006	86052DC0550002	86052DC0560004
Metal Level	Platinum	Silver	Gold	Platinum	Platinum	Silver	Gold
Metallic AV	90.26%	70.35%	81.88%	90.26%	89.81%	70.81%	81.88%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Advantage	Open Access Advantage	Open Access	Open Access	Open Access	Open Access	Open Access Plus
High Level Benefit Description	Integrated	Y/N	N	Y	N	N	N
Individual Deductible	Med/\$0 Rx OON: \$2000 Me	IN: \$1500 OON: \$3000	\$1500 Med/\$0 Rx	\$300 Med/\$0 Rx	\$600 Med/\$0 Rx	2000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx
Individual OOP Max	IN: \$2500 OON: \$3500	IN: \$4000 OON: \$6000	\$5,500	\$1,500	\$1,500	\$6,350	IN:\$5500 OON: \$7500
Member Copay/Coinsurance	10% IN / 30% OON	\$30PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 or \$0 DXL OON: \$300 ER/30%	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 for DXL	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/05 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP			
Rx Copays:							
Retail Generic	\$10	\$10	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	20%	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	40%	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89
Plan Level Adjustments							
Cost Share Factor	0.9340	0.6112	0.7616	0.9304	0.9048	0.5873	0.7616
Network &UM	1.0270	1.0270	0.9770	0.9770	0.9770	0.9770	1.0050
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3636	1.3715	1.3636	1.3636	1.3636	1.3715	1.3636
Plan Adjusted Index Rate (PMPM)	\$522.06	\$343.63	\$404.98	\$494.73	\$481.15	\$314.07	\$416.59
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$495.78	\$326.33	\$384.60	\$469.83	\$456.93	\$298.26	\$395.62
Pricing AV	131.2%	86.4%	101.8%	124.3%	120.9%	78.9%	104.7%
Estimated Plan DICR	72.3%	71.9%	72.3%	72.3%	72.3%	71.9%	72.3%
Projected Member Months	132	1,536	1,896	624	12	1,332	3,372
Membership Distribution	0.1%	1.7%	2.1%	0.7%	0.0%	1.5%	3.7%
2014 Plan Adjusted Index Rate (PMPM)	\$470.32	\$303.44	\$355.58	\$441.84	\$431.79	\$276.27	\$366.90
% Change	11.0%	13.2%	13.9%	12.0%	11.4%	13.7%	13.5%
2014 Consumer Level Base Rate	\$453.12	\$292.34	\$342.58	\$425.68	\$416.00	\$266.17	\$353.48
% Change	9.4%	11.6%	12.3%	10.4%	9.8%	12.1%	11.9%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 7/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	HealthyBlue Plus \$300	HealthyBlue Plus \$600	HealthyBlue Plus HSA/HRA \$2,000	HealthyBlue Advantage \$1,500	HealthyBlue Advantage \$300	HealthyBlue Advantage \$600	HealthyBlue Advantage HSA/HRA \$2,000
HIOS Product ID	86052DC056	86052DC056	86052DC057	86052DC052	86052DC052	86052DC052	86052DC053
HIOS Plan ID	86052DC0560005	86052DC0560006	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Metal Level	Platinum	Platinum	Silver	Gold	Platinum	Platinum	Silver
Metallic AV	90.26%	89.81%	70.81%	81.88%	90.26%	89.81%	70.81%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y/N						
Individual Deductible	N	N	Y	N	N	N	Y
Individual OOP Max	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000
Member Copay/Coinsurance	IN:\$1500 OON: \$3000	IN:\$1500 OON: \$3000	IN: \$6350 OON: \$7500	IN: \$5500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1500 OON: \$3000	IN: \$6350 OON: \$7500
Rx Copays:							
Retail Generic	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89
Plan Level Adjustments							
Cost Share Factor	0.9304	0.9048	0.5873	0.7616	0.9304	0.9048	0.5873
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3636	1.3636	1.3715	1.3636	1.3636	1.3636	1.3715
Plan Adjusted Index Rate (PMPM)	\$508.91	\$494.93	\$323.07	\$425.71	\$520.05	\$505.77	\$330.14
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$483.29	\$470.02	\$306.81	\$404.28	\$493.87	\$480.31	\$313.53
Pricing AV	127.9%	124.4%	81.2%	107.0%	130.7%	127.1%	83.0%
Estimated Plan DICR	72.3%	72.3%	71.9%	72.3%	72.3%	72.3%	71.9%
Projected Member Months	2,928	708	516	29,388	1,248	24	384
Membership Distribution	3.2%	0.8%	0.6%	32.0%	1.4%	0.0%	0.4%
2014 Plan Adjusted Index Rate (PMPM)	\$455.89	\$445.52	\$285.06	\$370.78	\$460.73	\$450.25	\$288.08
% Change	11.6%	11.1%	13.3%	14.8%	12.9%	12.3%	14.6%
2014 Consumer Level Base Rate	\$439.22	\$429.23	\$274.64	\$357.22	\$443.88	\$433.78	\$277.55
% Change	10.0%	9.5%	11.7%	13.2%	11.3%	10.7%	13.0%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 10/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO \$250	BlueChoice HMO \$1,800	BlueChoice HMO \$1,000	BlueChoice HMO \$30/\$40	BlueChoice HMO HSA/HRA \$2,000	BlueChoice HMO HSA/HRA \$2,000, 80%	BlueChoice HMO HSA/HRA \$1,500	BlueChoice HMO Referral \$500	
HIOS Product ID	86052DC046	86052DC046	86052DC046	86052DC046	86052DC047	86052DC047	86052DC047	86052DC048	
HIOS Plan ID	86052DC0460006	86052DC0460008	86052DC0460003	86052DC0460007	86052DC0470006	86052DC0470002	86052DC0470005	86052DC0480005	
Metal Level	Gold	Gold	Gold	Platinum	Silver	Silver	Gold	Gold	
Metallic AV	81.86%	78.15%	78.47%	88.31%	71.94%	70.90%	79.69%	78.77%	
On / Off Exchange	On	On	On	On	On	On	On	On	
Network Type	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Lock In / Referral	
High Level Benefit Description									
Integrated	Y/N	N	N	Y	N	Y	Y	Y	
Individual Deductible		\$250 Med/\$0 Rx	\$1800 Med/\$0 Rx	\$1,000	\$0 Med/\$0 Rx	2000	\$2,000	1500	\$500 Med/\$0 Rx
Individual OOP Max		\$3,000	\$2,600	\$3,000	\$1,300	\$5,000	\$4,000	\$2,000	\$3,000
Member Copay/Coinsurance		\$20 PCP/\$30 Spec/\$250 ER/\$500 IP/\$30 DXL	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL	20%	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$0 PCP/\$0 Spec/\$225 ER/\$300 IP/\$0 for DXL	20%	\$15 PCP/\$25 Spec/\$200 ER/\$500 IP/\$25 DXL	\$30 PCP/\$40 Spec/\$250 ER/\$500 IP/\$40 DXL
Rx Copays:									
Retail Generic		\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand		\$45	\$45	20%	\$45	\$45	20%	\$45	\$45
Retail NonPreferred Brand		\$65	\$65	40%	\$65	\$65	40%	\$65	\$65
Specialty		50%	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)		\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1		100%	100%	100%	100%	100%	100%	100%	100%
Class 2		80%	80%	80%	80%	80%	80%	80%	80%
Class 3		80%	80%	80%	80%	80%	80%	80%	80%
Class 4		50%	50%	50%	50%	50%	50%	50%	50%
Class 5		50%	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max		Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)		\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92
Market Level Adjustments:									
Reinsurance		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment		1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)		\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70
Plan Level Adjustments									
Cost Share Factor		0.8099	0.7068	0.7172	0.9515	0.5942	0.5770	0.6930	0.7762
Network &UM		0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9300
Non-EHB*		1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost		1.3586	1.3586	1.3586	1.3586	1.3664	1.3664	1.3664	1.3586
Plan Adjusted Index Rate (PMPM)		\$436.45	\$380.90	\$386.48	\$512.76	\$322.02	\$312.69	\$375.57	\$398.16
Calibrations to Consumer Level Rating Factors									
Age Calibration		0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate		\$414.48	\$361.73	\$367.03	\$486.95	\$305.81	\$296.95	\$356.66	\$378.12
Pricing AV		107.8%	94.1%	95.5%	126.7%	79.6%	77.3%	92.8%	98.4%
Estimated Plan DICR		72.6%	72.6%	72.6%	72.6%	72.2%	72.2%	72.2%	72.6%
Projected Member Months		7,068	264	396	3,636	1,536	300	2,064	1,332
Membership Distribution		8.1%	0.3%	0.5%	4.2%	1.8%	0.3%	2.4%	1.5%
2014 Plan Adjusted Index Rate (PMPM)		\$389.43	\$347.33	\$354.24	\$464.53	\$288.52	\$286.30	\$343.81	\$358.97
% Change		12.1%	9.7%	9.1%	10.4%	11.6%	9.2%	9.2%	10.9%
2014 Consumer Level Base Rate		\$375.19	\$334.63	\$341.29	\$447.54	\$277.97	\$275.83	\$331.24	\$345.84
% Change		10.5%	8.1%	7.5%	8.8%	10.0%	7.7%	7.7%	9.3%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 10/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO Referral \$30/\$40	BlueChoice HMO Referral \$10/\$20	BlueChoice HMO Referral HSA/HRA \$4,000	BlueChoice Plus \$2000	BlueChoice Plus 100%/80%, \$10/\$20	BlueChoice Plus 100%/60%, \$20/\$30	BlueChoice Plus 100%/80%, \$20/\$30
HIOS Product ID	86052DC048	86052DC048	86052DC049	86052DC050	86052DC050	86052DC050	86052DC050
HIOS Plan ID	86052DC0480006	86052DC0480004	86052DC0490001	86052DC0500005	86052DC0500008	86052DC0500007	86052DC0500006
Metal Level	Platinum	Platinum	Bronze	Silver	Platinum	Platinum	Platinum
Metallic AV	88.31%	90.60%	61.18%	71.88%	89.10%	88.62%	88.62%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Lock In / Referral	Lock In / Referral	Lock In / Referral	Open Access Plus	Open Access Plus	Open Access	Open Access
High Level Benefit Description							
Integrated	Y/N						
Individual Deductible	N	N	Y	N	N	N	N
Individual OOP Max	\$0 Med/\$0 Rx	\$0 Med/\$0 Rx	\$4,000	IN: \$2000 Med/\$0 Rx OON: \$4000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx
Member Copay/Coinsurance	\$1,300	\$1,300	\$6,350	IN: \$5000 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200	IN: \$1100 OON: \$2200
	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$10 PCP/\$20 Spec/\$50 ER/\$0 IP/\$20 DXL	20%	\$0 PCP/\$0 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/20%	\$10 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/20%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/40%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/20%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	20%	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	40%	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70
Plan Level Adjustments							
Cost Share Factor	0.9515	0.9744	0.4652	0.6330	0.9645	0.9407	0.9641
Network &UM	0.9300	0.9300	0.9300	1.0050	1.0050	0.9770	0.9770
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3586	1.3586	1.3664	1.3586	1.3586	1.3586	1.3586
Plan Adjusted Index Rate (PMPM)	\$488.10	\$499.81	\$239.99	\$350.88	\$534.63	\$506.92	\$519.51
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$463.53	\$474.65	\$227.91	\$333.22	\$507.72	\$481.41	\$493.36
Pricing AV	120.6%	123.5%	59.3%	86.7%	132.1%	125.3%	128.4%
Estimated Plan DICR	72.6%	72.6%	72.2%	72.6%	72.6%	72.6%	72.6%
Projected Member Months	4,320	1,716	180	108	2,136	1,536	7,308
Membership Distribution	4.9%	2.0%	0.2%	0.1%	2.4%	1.8%	8.4%
2014 Plan Adjusted Index Rate (PMPM)	\$442.82	\$455.60	\$219.15	\$314.79	\$486.00	\$460.07	\$471.96
% Change	10.2%	9.7%	9.5%	11.5%	10.0%	10.2%	10.1%
2014 Consumer Level Base Rate	\$426.63	\$438.94	\$211.14	\$303.28	\$468.23	\$443.25	\$454.70
% Change	8.6%	8.1%	7.9%	9.9%	8.4%	8.6%	8.5%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 10/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Plus HSA/HRA \$3500	BlueChoice Plus HSA/HRA \$1500	BlueChoice Plus HSA/HRA \$2000	BlueChoice Advantage \$1000	BlueChoice Advantage \$500 \$20/\$30	BlueChoice Advantage 80%/50%	BlueChoice Advantage 100%/70%
HIOS Product ID	86052DC051	86052DC051	86052DC051	86052DC044	86052DC044	86052DC044	86052DC044
HIOS Plan ID	86052DC0510006	86052DC0510004	86052DC0510005	86052DC0440008	86052DC0440009	86052DC0440006	86052DC0440007
Metal Level	Bronze	Silver	Silver	Gold	Gold	Platinum	Platinum
Metallic AV	61.62%	71.67%	68.90%	78.69%	78.51%	88.76%	88.37%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y	Y	Y	N	N	N	N
Individual Deductible	IN: \$3500 OON: \$6000	IN: \$1500 OON: \$3000	IN: \$2000 OON: \$4000	IN: \$1000 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN: \$500 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$500 Med/\$0 Rx
Individual OOP Max	IN: \$5250 OON: \$7500	IN: \$4000 OON: \$6000	IN: \$5000 OON: \$7500	IN: \$2500 OON: \$5000	IN: \$4500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL OON: \$100 ER/20%	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$30 PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 DXL OON: \$300 ER/30%	\$20 PCP/\$30 Spec/\$300 ER/\$500 IP/\$30-\$60 DXL OON: \$300 ER/\$750 IP/\$50	\$20 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/50%/30% OP Surg	\$30 PCP/\$30 Spec/\$200 ER/\$300 IP/\$30 DXL OON: \$200 ER/30%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70
Plan Level Adjustments							
Cost Share Factor	0.5064	0.6193	0.5942	0.7413	0.7834	0.9573	0.9464
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3664	1.3664	1.3664	1.3586	1.3586	1.3586	1.3586
Plan Adjusted Index Rate (PMPM)	\$282.33	\$345.28	\$331.28	\$419.94	\$443.76	\$542.25	\$536.11
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$268.12	\$327.90	\$314.60	\$398.81	\$421.42	\$514.96	\$509.13
Pricing AV	69.8%	85.3%	81.9%	103.8%	109.7%	134.0%	132.5%
Estimated Plan DICR	72.2%	72.2%	72.2%	72.6%	72.6%	72.6%	72.6%
Projected Member Months	1,164	1,116	96	7,332	300	60	1,464
Membership Distribution	1.3%	1.3%	0.1%	8.4%	0.3%	0.1%	1.7%
2014 Plan Adjusted Index Rate (PMPM)	\$256.04	\$312.99	\$299.13	\$377.56	n/a	\$486.86	\$480.50
% Change	10.3%	10.3%	10.7%	11.2%	n/a	11.4%	11.6%
2014 Consumer Level Base Rate	\$246.68	\$301.54	\$288.19	\$363.75	n/a	\$469.06	\$462.93
% Change	8.7%	8.7%	9.2%	9.6%	n/a	9.8%	10.0%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 10/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Advantage 90%/70%	BlueChoice Advantage HSA/HRA \$1500	HealthyBlue HMO \$1,500	HealthyBlue HMO \$300	HealthyBlue HMO \$600	HealthyBlue HMO HSA/HRA \$2,000	HealthyBlue Plus \$1,500	
HIOS Product ID	86052DC044	86052DC045	86052DC054	86052DC054	86052DC054	86052DC055	86052DC056	
HIOS Plan ID	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0540006	86052DC0550002	86052DC0560004	
Metal Level	Platinum	Silver	Gold	Platinum	Platinum	Silver	Gold	
Metallic AV	90.26%	70.35%	81.88%	90.26%	89.81%	70.81%	81.88%	
On / Off Exchange	On	On	On	On	On	On	On	
Network Type	Open Access Advantage	Open Access Advantage	Open Access	Open Access	Open Access	Open Access	Open Access Plus	
High Level Benefit Description	Integrated	Y/N	N	Y	N	N	Y	N
Individual Deductible	Med/\$0 Rx OON: \$2000 Me	IN: \$1500 OON: \$3000	\$1500 Med/\$0 Rx	\$300 Med/\$0 Rx	\$600 Med/\$0 Rx	2000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	
Individual OOP Max	IN: \$2500 OON: \$3500	IN: \$4000 OON: \$6000	\$5,500	\$1,500	\$1,500	\$6,350	IN:\$5500 OON: \$7500	
Member Copay/Coinsurance	10% IN / 30% OON	\$30PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 or \$0 DXL OON: \$300 ER/30%	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 for DXL	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP				
Rx Copays:								
Retail Generic	\$10	\$10	\$0	\$0	\$0	\$0	\$0	
Retail Preferred Brand	20%	\$45	\$45	\$45	\$45	\$45	\$45	
Retail NonPreferred Brand	40%	\$65	\$65	\$65	\$65	\$65	\$65	
Specialty	50%	50%	50%	50%	50%	50%	50%	
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25	
Class 1	100%	100%	100%	100%	100%	100%	100%	
Class 2	80%	80%	80%	80%	80%	80%	80%	
Class 3	80%	80%	80%	80%	80%	80%	80%	
Class 4	50%	50%	50%	50%	50%	50%	50%	
Class 5	50%	50%	50%	50%	50%	50%	50%	
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	
Index Rate (Projected EHB Allowed PMPM)	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	
Market Level Adjustments:								
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Market Adjusted Index Rate (PMPM)	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	
Plan Level Adjustments								
Cost Share Factor	0.9340	0.6112	0.7616	0.9304	0.9048	0.5873	0.7616	
Network &UM	1.0270	1.0270	0.9770	0.9770	0.9770	0.9770	1.0050	
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Distribution and Admin Cost	1.3586	1.3664	1.3586	1.3586	1.3586	1.3664	1.3586	
Plan Adjusted Index Rate (PMPM)	\$529.06	\$348.21	\$410.42	\$501.37	\$487.60	\$318.26	\$422.18	
Calibrations to Consumer Level Rating Factors								
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Consumer Level Base Rate	\$502.43	\$330.68	\$389.76	\$476.13	\$463.06	\$302.24	\$400.93	
Pricing AV	130.7%	86.0%	101.4%	123.9%	120.5%	78.6%	104.3%	
Estimated Plan DICR	72.6%	72.2%	72.6%	72.6%	72.6%	72.6%	72.6%	
Projected Member Months	144	1,464	1,812	612	12	1,260	3,204	
Membership Distribution	0.2%	1.7%	2.1%	0.7%	0.0%	1.4%	3.7%	
2014 Plan Adjusted Index Rate (PMPM)	\$480.21	\$309.82	\$363.07	\$451.13	\$440.87	\$282.09	\$374.61	
% Change	10.2%	12.4%	13.0%	11.1%	10.6%	12.8%	12.7%	
2014 Consumer Level Base Rate	\$462.65	\$298.49	\$349.79	\$434.63	\$424.75	\$271.77	\$360.91	
% Change	8.6%	10.8%	11.4%	9.5%	9.0%	11.2%	11.1%	

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 10/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	HealthyBlue Plus \$300	HealthyBlue Plus \$600	HealthyBlue Plus HSA/HRA \$2,000	HealthyBlue Advantage \$1,500	HealthyBlue Advantage \$300	HealthyBlue Advantage \$600	HealthyBlue Advantage HSA/HRA \$2,000
HIOS Product ID	86052DC056	86052DC056	86052DC057	86052DC052	86052DC052	86052DC052	86052DC053
HIOS Plan ID	86052DC0560005	86052DC0560006	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Metal Level	Platinum	Platinum	Silver	Gold	Platinum	Platinum	Silver
Metallic AV	90.26%	89.81%	70.81%	81.88%	90.26%	89.81%	70.81%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y/N						
Individual Deductible	N	N	Y	N	N	N	Y
Individual OOP Max	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000
Member Copay/Coinsurance	IN:\$1500 OON: \$3000	IN:\$1500 OON: \$3000	IN: \$6350 OON: \$7500	IN: \$5500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1500 OON: \$3000	IN: \$6350 OON: \$7500
Rx Copays:							
Retail Generic	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70
Plan Level Adjustments							
Cost Share Factor	0.9304	0.9048	0.5873	0.7616	0.9304	0.9048	0.5873
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3586	1.3586	1.3664	1.3586	1.3586	1.3586	1.3664
Plan Adjusted Index Rate (PMPM)	\$515.74	\$501.58	\$327.38	\$431.42	\$527.03	\$512.56	\$334.55
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$489.78	\$476.33	\$310.91	\$409.71	\$500.50	\$486.76	\$317.71
Pricing AV	127.4%	123.9%	80.9%	106.6%	130.2%	126.7%	82.7%
Estimated Plan DICR	72.6%	72.6%	72.2%	72.6%	72.6%	72.6%	72.2%
Projected Member Months	2,796	684	492	27,996	1,188	24	372
Membership Distribution	3.2%	0.8%	0.6%	32.0%	1.4%	0.0%	0.4%
2014 Plan Adjusted Index Rate (PMPM)	\$465.48	\$454.90	\$291.06	\$378.58	\$470.41	\$459.71	\$294.15
% Change	10.8%	10.3%	12.5%	14.0%	12.0%	11.5%	13.7%
2014 Consumer Level Base Rate	\$448.46	\$438.26	\$280.42	\$364.74	\$453.21	\$442.90	\$283.39
% Change	9.2%	8.7%	10.9%	12.3%	10.4%	9.9%	12.1%

* Covers abortion claims for all plans.

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group SHOP Exchange Products
Rates Effective 01/01/2015
Single Risk Pool Desired Incurred Claims Ratio (DICR)

	Medical	Rx	Total
Projected Allowed Claims PMPM (EHB and Non-EHB)	\$ 277.61	\$ 84.61	\$ 362.22
Projected Paid / Allowed Ratio	80.4%	80.4%	80.4%
Adjustment for Risk Transfer			\$ 23.55
Projected Paid Claims PMPM (EHB and Non-EHB), Adjusted for Risk Transfer			\$ 310.16

	Non-CDH		CDH		Total		Total (1Q14)*	% Δ
	PMPM	%	PMPM	%	PMPM	%	%	
Projected Allowed Claims (+ Capitations)	\$ 310.16	72.8%	\$ 310.16	72.4%	\$ 310.16	72.7%	76.9%	-4.2%
Admin Costs	\$ 33.65	7.9%	\$ 33.65	7.9%	\$ 33.65	7.9%	7.9%	0.0%
Patient Outcome Tax	\$ 0.18	0.0%	\$ 0.18	0.0%	\$ 0.18	0.0%	0.0%	0.0%
Reinsurance	\$ 3.60	0.8%	\$ 3.60	0.8%	\$ 3.60	0.8%	1.3%	-0.4%
Risk Adjustment User Fees	\$ 0.08	0.0%	\$ 0.08	0.0%	\$ 0.08	0.0%	0.0%	0.0%
Broker Commissions & Fees	\$ 29.06	6.8%	\$ 29.06	6.8%	\$ 29.06	6.8%	6.4%	0.4%
Contrib to Reserve	\$ 5.54	1.3%	\$ 5.57	1.3%	\$ 5.54	1.3%	1.9%	-0.6%
Invst Income Credit*	\$ (0.00)	0.0%	\$ (0.00)	0.0%	\$ (0.00)	0.0%	0.0%	0.0%
Premium Taxes/Community Health Investment*	\$ 8.52	2.0%	\$ 8.57	2.0%	\$ 8.53	2.0%	2.0%	0.0%
Assessment Fees*	\$ 0.49	0.1%	\$ 0.49	0.1%	\$ 0.49	0.1%	0.1%	0.0%
Federal Income Tax	\$ 2.98	0.7%	\$ 3.00	0.7%	\$ 2.98	0.7%	1.1%	-0.4%
State Income Tax	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Exchange Assessment Fee	\$ 8.52	2.0%	\$ 8.57	2.0%	\$ 8.53	2.0%	0.0%	2.0%
Health Insurer Fee	\$ 13.63	3.2%	\$ 13.72	3.2%	\$ 13.64	3.2%	2.3%	0.9%
Exchange Fees	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Incentive Program	\$ 9.67	2.3%	\$ 9.67	2.3%	\$ 9.67	2.3%	0.0%	2.3%
CDH Expenses	\$ -	0.0%	\$ 2.29	0.5%	\$ 0.26	0.1%	0.0%	0.0%
Total	\$ 426.08	100.0%	\$ 428.60	100.0%	\$ 426.37	100.0%	100.0%	

* From approved BlueChoice DC Small Group filing effective 1/1/2014, SERFF tracking # CFAP-129047155

Note: The Contribution to Reserve shown is post-tax. The pre-tax contribution is 2.0%.

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group SHOP Exchange Products
Rates Effective 04/01/2015
Single Risk Pool Desired Incurred Claims Ratio (DICR)

	Medical	Rx	Total
Projected Allowed Claims PMPM (EHB and Non-EHB)	\$ 282.14	\$ 86.26	\$ 368.40
Projected Paid / Allowed Ratio	80.4%	80.4%	80.4%
Adjustment for Risk Transfer			\$ 23.95
Projected Paid Claims PMPM (EHB and Non-EHB), Adjusted for Risk Transfer			\$ 315.49

	Non-CDH		CDH		Total		Total (1Q15)	% Δ
	PMPM	%	PMPM	%	PMPM	%	%	
Projected Allowed Claims (+ Capitations)	\$ 315.49	73.1%	\$ 315.49	72.6%	\$ 315.49	73.0%	72.7%	0.3%
Admin Costs	\$ 33.65	7.8%	\$ 33.65	7.7%	\$ 33.65	7.8%	7.9%	-0.1%
Patient Outcome Tax	\$ 0.18	0.0%	\$ 0.18	0.0%	\$ 0.18	0.0%	0.0%	0.0%
Reinsurance	\$ 3.25	0.8%	\$ 3.25	0.7%	\$ 3.25	0.8%	0.8%	-0.1%
Risk Adjustment User Fees	\$ 0.08	0.0%	\$ 0.08	0.0%	\$ 0.08	0.0%	0.0%	0.0%
Broker Commissions & Fees	\$ 29.06	6.7%	\$ 29.06	6.7%	\$ 29.06	6.7%	6.8%	-0.1%
Contrib to Reserve	\$ 5.61	1.3%	\$ 5.65	1.3%	\$ 5.62	1.3%	1.3%	0.0%
Invst Income Credit*	\$ (0.00)	0.0%	\$ (0.00)	0.0%	\$ (0.00)	0.0%	0.0%	0.0%
Premium Taxes/Community Health Investment*	\$ 8.63	2.0%	\$ 8.69	2.0%	\$ 8.64	2.0%	2.0%	0.0%
Assessment Fees*	\$ 0.50	0.1%	\$ 0.50	0.1%	\$ 0.50	0.1%	0.1%	0.0%
Federal Income Tax	\$ 3.02	0.7%	\$ 3.04	0.7%	\$ 3.02	0.7%	0.7%	0.0%
State Income Tax	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Exchange Assessment Fee	\$ 8.63	2.0%	\$ 8.69	2.0%	\$ 8.64	2.0%	2.0%	0.0%
Health Insurer Fee	\$ 13.82	3.2%	\$ 13.90	3.2%	\$ 13.82	3.2%	3.2%	0.0%
Exchange Fees	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Incentive Program	\$ 9.82	2.3%	\$ 9.82	2.3%	\$ 9.82	2.3%	2.3%	0.0%
CDH Expenses	\$ -	0.0%	\$ 2.29	0.5%	\$ 0.26	0.1%	0.1%	0.0%
Total	\$ 431.73	100.0%	\$ 434.26	100.0%	\$ 432.02	100.0%	100.0%	

Note: The Contribution to Reserve shown is post-tax. The pre-tax contribution is 2.0%.

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group SHOP Exchange Products
Rates Effective 07/01/2015
Single Risk Pool Desired Incurred Claims Ratio (DICR)

	Medical	Rx	Total
Projected Allowed Claims PMPM (EHB and Non-EHB)	\$ 286.74	\$ 87.95	\$ 374.69
Projected Paid / Allowed Ratio	80.4%	80.4%	80.4%
Adjustment for Risk Transfer			\$ 24.36
Projected Paid Claims PMPM (EHB and Non-EHB), Adjusted for Risk Transfer			\$ 320.85

	Non-CDH		CDH		Total		Total (2Q15)	% Δ
	PMPM	%	PMPM	%	PMPM	%	%	
Projected Allowed Claims (+ Capitations)	\$ 320.85	73.3%	\$ 320.85	72.9%	\$ 320.85	73.3%	73.0%	0.3%
Admin Costs	\$ 33.65	7.7%	\$ 33.65	7.6%	\$ 33.65	7.7%	7.8%	-0.1%
Patient Outcome Tax	\$ 0.18	0.0%	\$ 0.18	0.0%	\$ 0.18	0.0%	0.0%	0.0%
Reinsurance	\$ 2.96	0.7%	\$ 2.96	0.7%	\$ 2.96	0.7%	0.8%	-0.1%
Risk Adjustment User Fees	\$ 0.08	0.0%	\$ 0.08	0.0%	\$ 0.08	0.0%	0.0%	0.0%
Broker Commissions & Fees	\$ 29.06	6.6%	\$ 29.06	6.6%	\$ 29.06	6.6%	6.7%	-0.1%
Contrib to Reserve	\$ 5.69	1.3%	\$ 5.72	1.3%	\$ 5.69	1.3%	1.3%	0.0%
Invst Income Credit*	\$ (0.00)	0.0%	\$ (0.00)	0.0%	\$ (0.00)	0.0%	0.0%	0.0%
Premium Taxes/Community Health Investment*	\$ 8.75	2.0%	\$ 8.80	2.0%	\$ 8.76	2.0%	2.0%	0.0%
Assessment Fees*	\$ 0.50	0.1%	\$ 0.51	0.1%	\$ 0.50	0.1%	0.1%	0.0%
Federal Income Tax	\$ 3.06	0.7%	\$ 3.08	0.7%	\$ 3.06	0.7%	0.7%	0.0%
State Income Tax	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Exchange Assessment Fee	\$ 8.75	2.0%	\$ 8.80	2.0%	\$ 8.76	2.0%	2.0%	0.0%
Health Insurer Fee	\$ 14.00	3.2%	\$ 14.08	3.2%	\$ 14.01	3.2%	3.2%	0.0%
Exchange Fees	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Incentive Program	\$ 9.99	2.3%	\$ 9.99	2.3%	\$ 9.99	2.3%	2.3%	0.0%
CDH Expenses	\$ -	0.0%	\$ 2.29	0.5%	\$ 0.26	0.1%	0.1%	0.0%
Total	\$ 437.51	100.0%	\$ 440.04	100.0%	\$ 437.80	100.0%	100.0%	

Note: The Contribution to Reserve shown is post-tax. The pre-tax contribution is 2.0%.

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group SHOP Exchange Products
Rates Effective 10/01/2015
Single Risk Pool Desired Incurred Claims Ratio (DICR)

	Medical	Rx	Total
Projected Allowed Claims PMPM (EHB and Non-EHB)	\$ 291.43	\$ 89.68	\$ 381.11
Projected Paid / Allowed Ratio	80.4%	80.4%	80.4%
Adjustment for Risk Transfer			\$ 24.78
Projected Paid Claims PMPM (EHB and Non-EHB), Adjusted for Risk Transfer			\$ 326.35

	Non-CDH		CDH		Total		Total (3Q15)	% Δ
	PMPM	%	PMPM	%	PMPM	%	%	
Projected Allowed Claims (+ Capitations)	\$ 326.35	73.6%	\$ 326.35	73.2%	\$ 326.35	73.6%	73.3%	0.3%
Admin Costs	\$ 33.65	7.6%	\$ 33.65	7.5%	\$ 33.65	7.6%	7.7%	-0.1%
Patient Outcome Tax	\$ 0.18	0.0%	\$ 0.18	0.0%	\$ 0.18	0.0%	0.0%	0.0%
Reinsurance	\$ 2.63	0.6%	\$ 2.63	0.6%	\$ 2.63	0.6%	0.7%	-0.1%
Risk Adjustment User Fees	\$ 0.08	0.0%	\$ 0.08	0.0%	\$ 0.08	0.0%	0.0%	0.0%
Broker Commissions & Fees	\$ 29.06	6.6%	\$ 29.06	6.5%	\$ 29.06	6.5%	6.6%	-0.1%
Contrib to Reserve	\$ 5.76	1.3%	\$ 5.80	1.3%	\$ 5.77	1.3%	1.3%	0.0%
Invst Income Credit*	\$ (0.00)	0.0%	\$ (0.00)	0.0%	\$ (0.00)	0.0%	0.0%	0.0%
Premium Taxes/Community Health Investment*	\$ 8.87	2.0%	\$ 8.92	2.0%	\$ 8.87	2.0%	2.0%	0.0%
Assessment Fees*	\$ 0.51	0.1%	\$ 0.51	0.1%	\$ 0.51	0.1%	0.1%	0.0%
Federal Income Tax	\$ 3.10	0.7%	\$ 3.12	0.7%	\$ 3.11	0.7%	0.7%	0.0%
State Income Tax	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Exchange Assessment Fee	\$ 8.87	2.0%	\$ 8.92	2.0%	\$ 8.87	2.0%	2.0%	0.0%
Health Insurer Fee	\$ 14.19	3.2%	\$ 14.27	3.2%	\$ 14.20	3.2%	3.2%	0.0%
Exchange Fees	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Incentive Program	\$ 10.16	2.3%	\$ 10.16	2.3%	\$ 10.16	2.3%	2.3%	0.0%
CDH Expenses	\$ -	0.0%	\$ 2.29	0.5%	\$ 0.26	0.1%	0.1%	0.0%
Total	\$ 443.39	100.0%	\$ 445.92	100.0%	\$ 443.68	100.0%	100.0%	

Note: The Contribution to Reserve shown is post-tax. The pre-tax contribution is 2.0%.

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Support for DICR Components

Estimated Breakdown of Admin Costs

	% of Revenue
Salaries/Wages/Benefits	3.4%
Quality Improvement Activities	1.0%
Other General Admin	3.5%
Total Admin Costs	7.9%

ACA Fees

Patient Outcome Tax (PCORI)	\$	2.11	PMPY
Divide by 12:	\$	0.18	PMPM
Reinsurance 2015	\$	3.67	PMPM
Reinsurance 2016	\$	2.44	PMPM
Risk Adjustment User Fees	\$	0.96	PMPY
Divide by 12:	\$	0.08	PMPM
Health Insurer Fee 2015		3.2%	of premium
Health Insurer Fee 2016		3.2%	of premium
Exchange Fees		0.0%	of premium
Exchange Assessment Fee 2014		1.0%	of premium
Exchange Assessment Fee 2015		1.0%	of premium

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Development of Anticipated Medical Loss Ratio, as Defined by PPACA

		BlueChoice Projected
(1)a	Projected Claims (Trend & Capitation)	\$115,185,904
(1)b	Experience Period Member Months	395,516
(1)c	Credibility Factor	1.00
(1)d	Projected Claims (DICR) = DICR x Revenue - Risk Adjustment	\$115,185,904
(1)e	Projected Claims (Final) = (1)a x (1)c + (1)d x (1-(1)c)	\$115,185,904
(2)	Projected Revenue	\$168,635,431
(3) = (1)e / (2)	Anticipated Incurred Straight LR	68.3%
(4)	Health Care Improvement*	\$4,653,511
(5)	ITS Fees	(\$296,508)
(6)	Risk Transfer Payment/Receipt	\$11,260,776
(7) = (1)e + (4) + (5) + (6)	MLR Numerator	\$130,803,683
(8)	Federal Taxes	\$1,180,448
(9)	State and Premium Taxes	\$3,372,709
(10)	ACA Fees**	\$10,295,257
(11) = (8) + (9) + (10)	Total Taxes & Regulatory Fees	\$14,848,413
(12) = (2) - (11)	MLR Denominator	\$153,787,018
(13) = (7) / (12)	Projected MLR	85.1%

* Estimated at 4.04% of care costs for BlueChoice. Adjustments 1 & 2 below are based on actual health care improvement adjustments for all BlueChoice D.C. Small Group business in 2013, following our understanding of HHS guidelines at the time.

- | | |
|--|---------------|
| 1. Removal of costs which we book as care, but are not considered care under MLR guidelines: | -0.75% |
| 2. Health care improvement expenses: | 1.47% |
| 3. Incentive program quality improvement expenses | 3.32% |
| 4. Net adjustment: | 4.04% |

** Includes Patient Outcome Tax, Reinsurance, Risk Adjustment User Fees, Exchange Fees, Exchange Assessment Fee, and Health Insurer Fee.

Credibility Factor Derivation:

	CMS (Assigned Credibility of <20% = 0%; >90% = 100%)	
BC	Exp Pd Member Months	395,516 100.0%

The verbal description is from pages 15 and 16 of the CY2013 Medicare Advantage Bid Pricing Tool instructions.

Based on an application of classical credibility theory to Medicare FFS experience, CMS has established a guideline for full credibility for MA plans of 24,000 total base period member months. The formula for partial credibility is the square root of the result of base period member months divided by 24,000. This formula is a guideline; actuaries must consider the quality of the base period experience when calculating credibility. Plan sponsors may use a different credibility methodology only if the alternate method is consistently applied among all plans in the contract and is deemed acceptable by CMS.

The certifying actuary must adhere to the following rules of overriding the CMS credibility formula for partial credibility:

- If the CMS formula for partial credibility is applied to base period member months and the resulting credibility is—
- Less than or equal to 20 percent (that is, 960 or fewer MA member months), then the actuary may override the computed credibility with 0 percent credibility.
- Greater than or equal to 90 percent (that is, 19,440 or more MA member months), then the actuary may override the computed credibility with 100 percent credibility.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Summary of Wakely Small Group Modeling

	Relative Risk Score*		Projected Index Rate	Estimated Risk Adjustment PMPM (Applied to Projected Index Rate)	Calculated Risk Adjustment Factor	Proposed Value for Rate Filing	Proposed PMPM Applied to Projected Index Rate
BlueChoice	0.92	1Q15	\$ 361.09	\$ 31.40	1.087	1.065	\$ 23.55
		2Q15	\$ 367.26	\$ 31.94	1.087	1.065	\$ 23.95
		3Q15	\$ 373.53	\$ 32.48	1.087	1.065	\$ 24.36
		4Q15	\$ 379.92	\$ 33.04	1.087	1.065	\$ 24.78

* Assumes market risk score = 1.0

The proposed risk adjustment was developed based on a multi-carrier study conducted by Wakely Consulting. Given the uncertainty in estimating these values, we have applied 75% of the estimated values from Wakely.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Description of "Other" Adjustments to Experience Period Data

The adjustment descriptions below detail the build up of our "Other" multiplicative factors used in adjusting the experience period allowed PMPM amounts to the projection period. These adjustments coincide with those used in worksheet I section II of the URRT. Please see pages 47 - 54 for support of these factors.

Service Category	Other Factor	Description of Adjustment
Inpatient	0.994	Multiplicative factors of 1.011 for changes in average age of the pool, 1.015 to reflect the impact of early renewing business, 0.971 to reflect the impact of the new Incentive Program, 0.999 to reflect decreased utilization in Ind 64- maternity, and 0.998 to reflect a reduction in Out-Of-Network fees.
Outpatient	0.994	Multiplicative factors of 1.011 for changes in average age of the pool, 1.015 to reflect the impact of early renewing business, 0.971 to reflect the impact of the new Incentive Program, 0.999 to reflect decreased utilization in Ind 64- maternity, and 0.998 to reflect a reduction in Out-Of-Network fees.
Professional	1.039	Multiplicative factors of 1.011 for changes in average age of the pool, 1.045 for changes in treatment of ABA services, 1.015 to reflect the impact of early renewing business, 0.971 to reflect the impact of the new Incentive Program, 0.999 to reflect decreased utilization in Ind 64- maternity, and 0.998 to reflect a reduction in Out-Of-Network fees.
Other	1.294	Multiplicative factors of 1.011 for changes in average age of the pool, 1.301 to reflect the impact of embedded pediatric dental benefit, 1.015 to reflect the impact of early renewing business, 0.971 to reflect the impact of the new Incentive Program, and 0.998 to reflect a reduction in Out-Of-Network fees.
Rx	0.961	Multiplicative factors of 0.924 to reflect differences in discounts between the experience period and projection period, 1.041 to reflect the impact of expanding our list of drugs to include the hepatitis C drug Sovaldi, and 1.004 to reflect changes in our Mandatory Generic policy. Also includes multiplicative factors of 1.011 for changes in average age of the pool, 1.015 to reflect the impact of early renewing business, 0.971 to reflect the impact of the new Incentive Program, 0.999 to reflect decreased utilization in Ind 64- maternity, and 0.998 to reflect a reduction in Out-Of-Network fees.
Capitation	0.957	Multiplicative factor of 0.957 to reflect inclusion of pediatric vision benefit.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Support for "Other" adjustment factors

<u>Early Renewal Factor Derivation</u>	Allowed Claims	Item	Calculation
Early Renewal (Small Group Only, BC & GHMSI combined)	PMPM		
Experience Period Total Allowed PMPM of Early renewing cohort	\$ 397.23	(1)	
Experience Period Total Allowed PMPM of Non-Early renewing cohort	\$ 419.26	(2)	
Combined Experience Period Total Allowed PMPM	\$ 412.06	(3)	
Early Renewal Adjustment Factor (Small Group Only)	1.7%		(4) = (2) / (3)-1
Early Renewal Adjustment Factor (Blended Across Single Risk Pool)	1.5%		
Rx Discount Factor Derivation (Based on CFI Total Book of Business Data)			
Grand Total New Allowed	\$ 1,154,386,773	(1)	
Grand Total Old Allowed	\$ 1,249,560,894	(2)	
\$ Difference	\$ (95,174,121)	(3)	
% Difference	-7.6%		(4) = (3)/(2)
Mandatory Generic Factor Derivation (Based on CFI Total Book of Business Data)			
Total \$ Impact Due to expansion of list of Mandatory Generic Drugs	\$ 4,594,160	(1)	
Total 2013 Drug Claims	\$ 1,249,560,894	(2)	
% Increase in Paid Drug \$	0.4%		(3) = (1)/(2)
Sovaldi Factor Derivation			
% Impact to total experience period allowed PMPM (see page 48 for details)	1.0%	(1)	
Experience Period Allowed Rx PMPM	\$ 75.41	(2)	
Total Experience Period Allowed PMPM	\$ 312.41	(3)	
\$ Amount of Sovaldi Drug	\$ 3.12	(4) = (1) * (3)	
Sovaldi Impact to Rx Only	4.10%		(5) = (4) / (2)
Changes in treatment of ABA services (see page 49 for details)			
Ind64-			
\$ Impact to Experience Period Allowed PMPM	\$ 1.74	(1)	
Experience Period Allowed PMPM for Professional Services	\$ 112.48	(2)	
Changes in treatment of ABA services - Impact (to Ind64- Professional only)	1.5%		(3) = (1)/(2)
Small Group			
\$ Impact to Experience Period Allowed PMPM	\$ 5.15	(4)	
Experience Period Allowed PMPM for Professional Services	\$ 104.25	(5)	
Changes in treatment of ABA services - Impact (to Small Group Professional only)	4.9%		(6) = (4)/(5)
Changes in treatment of ABA services - Impact to Professional only (Blended Across Single Risk Pool)	4.5%		
Demographic Factor Derivation			
Demographic Impact (Blended Across Single Risk Pool)	1.1%		
Fee Schedule Change - Out-of-Network service area			
We were able to reduce a portion of our Out-of-Network fee schedule or NP3. The result is a positive impact on savings and thus a negative impact on claims experience. The value below represents the expected savings and is applied to each service category (except capitation) of the Index Rate Derivation. It is specifically applied to all of the "Other Projection Factors".			
Fee Schedule Change - Out-of-Network service area	-0.2%		
Changes in Maternity Utilization (Ind64- Only) (see pages 50 - 51 for details)			
\$ Impact to total experience period allowed PMPM	\$ (1.73)	(1)	
Total Experience Period Allowed	\$ 370.32	(2)	
Impact of Changes in Maternity Utilization - (Ind64- Only)	-0.5%		(3) = (1)/(2)
Impact of Changes in Maternity Utilization - (Blended Across Single Risk Pool)	-0.1%		

Note: Blended adjustments are an average of Ind64- and Small Group adjustments, weighted by claims.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Sovaldi Factor Derivation

	US Population	320 Million	
A	Number of chronic hepatitis C persons in US (source: CDC)	3.2 Million	
	Cost per 90-day script of Sovaldi	\$84,000	
	However, Sovaldi has to be taken with ribavirin and interferon. Cost of 90day supply of both	<u>\$10,000</u>	
B	Total cost per 90-day regimen (Sovaldi + ribavirin + interferon)	\$94,000	
C=A*B	Total maximum market potential for 90-day regimen (\$ Billion)	\$300 Billion	
D	First quarter Sovaldi sales (Gilead Sciences 1Q14 earnings report)	\$2.27 Billion	
E=D*4	Annualized 2014 Sovaldi sales assuming flat growth in Q2-Q4 {lower bound}	\$9 Billion	
F=(94/84)*E	Annualized cost of regimen	\$10 Billion	
	<u>Breakdown of US Population by payor mix (Million)</u>		
	Commercial	147	
	Medicare	51	
G	Medicaid	61	
	Tricare/Other Insured	10	
	Uninsured	<u>47</u>	
	US Total Population (2013)	316	
	<u>Number of Commercial Equivalent Membership Units (Million)</u>		
	Commercial	147	
	Medicare	50	
H=G*.75	Medicaid (pays 25% lower costs on brand name drugs than Medicare)	41	
	Tricare	<u>10</u>	
I	Total Commercial Equivalent Membership Units	248	
J=F/I	Cost per commercial equivalent member per year	\$40	
K	CFI Risk average allowed claim cost per year	\$4,062	
L	Sovaldi regimen costs as % of allowed claims	<table border="1" style="display: inline-table;"><tr><td style="text-align: center;">1%</td></tr></table>	1%
1%			
		(lower bound)	

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Autism Cost Model

Average Cost:	Assume treatment cost per hour for intensive ABA therapy	\$46
	Assume treatment of \$75 per hour for non-intensive therapy	\$97

	ABA Therapy hrs/wk	Other Therapy hrs/wk	Hrs/Yr Therapy	Cost Per Year Therapy
Children 2-5:	40	0	2080	94,826
Children 6-7:	15	5	1040	60,894
Children 8-12:	0	10	520	50,668
Children 13-21:	0	8	416	40,534

Utilization:	Assume 1 in every 68 children age 1-21 have Autism or Asperger's. Assume 1 in 3 seek ABA treatment	0.49%	SG	Ind64-
	children age 2-5 as a % of total population	====>	4.9%	1.8%
	children age 6 as a % of total population	====>	1.3%	0.4%
	children age 7 as % total population		1.2%	0.3%
	children age 8 as % total population		1.2%	0.5%
	children age 9-12 as a % of total population	====>	4.4%	1.7%
	children age 13-21 as a % of total population	====>	9.0%	2.7%

	Small Group		Ind64-	
Cost PMPM: Children 2-5:	\$	1.88	\$	0.68
Children age 6	\$	0.31	\$	0.10
Children age 7	\$	0.30	\$	0.07
Children age 8	\$	0.25	\$	0.10
Children 9-12:	\$	0.92	\$	0.34
Children 13-21:	\$	1.49	\$	0.45
Total	\$	5.15	\$	1.74

	Small Group	Ind64-	Blended
Adjustment (to Professional Only)	4.9%	1.5%	4.5%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Impact of New Essential Health Benefits in Individual, Non-Medigap Market

Maternity

BlueChoice already offers full maternity coverage to its Individual, Non-Medigap members. Since many competitors do not offer this coverage today, current Individual BlueChoice maternity utilization is high compared to the rest of the Individual market segment. This is projected to decrease to the D.C. Small Group level, where full maternity coverage is standard across insurers.

Individual Util/1000	31.9	Individual Cost/Case	\$1,521
D.C. Small Group Util/1000	18.2	D.C. Small Group Cost/Case	\$2,269
Expected Change in Util/1000	-13.7	No Expected Change in Cost/Cas	\$748
Change in Individual Allowed Cost PMPM	\$ (1.73)		
% Impact	-0.5%		

Impact of Maternity on Individual Market PMPM	\$ (1.73)
Impact on Individual & Small Group Market Combined PMPM	\$ (0.17)
Adjustment Factor (Small Group & Individual Markets Combined)	0.999

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Experience - Maternity

Experience Period Incurred 10/1/12 - 9/30/13

Cost/Case	Cases/1000		Claims PMPM		% of Total PMPM		Allowed Amounts		
		<u>Maternity</u>		<u>Maternity</u>		<u>Maternity</u>			
Ind PPO HSA	\$966	Ind PPO HSA	16	Ind PPO HSA	\$1.35	Ind PPO HSA	0.6%	Ind PPO HSA	\$65,033,416
Ind PPO non-CDH	\$726	Ind PPO non-CDH	18	Ind PPO non-CDH	\$1.07	Ind PPO non-CDH	0.5%	Ind PPO non-CDH	\$107,693,483
Ind Indemnity	\$2,102	Ind Indemnity	12	Ind Indemnity	\$2.06	Ind Indemnity	0.8%	Ind Indemnity	\$153,151,968
Ind HMO HSA	\$1,799	Ind HMO HSA	30	Ind HMO HSA	\$4.56	Ind HMO HSA	2.1%	Ind HMO HSA	\$23,110,865
Ind HMO non-CDH	\$1,904	Ind HMO non-CDH	23	Ind HMO non-CDH	\$3.70	Ind HMO non-CDH	1.5%	Ind HMO non-CDH	\$17,588,018
Ind HB Triple Option	\$1,882	Ind HB Triple Option	74	Ind HB Triple Option	\$11.69	Ind HB Triple Option	4.3%	Ind HB Triple Option	\$9,779,889
Ind HB HSA	\$2,121	Ind HB HSA	53	Ind HB HSA	\$9.44	Ind HB HSA	2.4%	Ind HB HSA	\$874,503
<u>Ind HB 2.0</u>	<u>\$1,984</u>	<u>Ind HB 2.0</u>	<u>25</u>	<u>Ind HB 2.0</u>	<u>\$4.17</u>	<u>Ind HB 2.0</u>	<u>1.9%</u>	<u>Ind HB 2.0</u>	<u>\$33,682,459</u>
DC 50- PPO HRA	\$3,007	DC 50- PPO HRA	16	DC 50- PPO HRA	\$4.07	DC 50- PPO HRA	0.9%	DC 50- PPO HRA	\$5,097,753
DC 50- PPO	\$2,305	DC 50- PPO	18	DC 50- PPO	\$3.54	DC 50- PPO	0.8%	DC 50- PPO	\$199,548,699
DC 50- HMO HSA	\$2,122	DC 50- HMO HSA	17	DC 50- HMO HSA	\$3.01	DC 50- HMO HSA	1.5%	DC 50- HMO HSA	\$4,398,977
DC 50- HMO HRA	\$1,674	DC 50- HMO HRA	7	DC 50- HMO HRA	\$0.97	DC 50- HMO HRA	0.4%	DC 50- HMO HRA	\$1,182,741
DC 50- HMO	\$1,988	DC 50- HMO	18	DC 50- HMO	\$3.09	DC 50- HMO	1.1%	DC 50- HMO	\$32,207,977
DC 50- HMO OO	\$2,111	DC 50- HMO OO	21	DC 50- HMO OO	\$3.80	DC 50- HMO OO	1.1%	DC 50- HMO OO	\$36,230,801
DC 50- BC Adv	\$2,472	DC 50- BC Adv	32	DC 50- BC Adv	\$6.49	DC 50- BC Adv	1.7%	DC 50- BC Adv	\$4,655,884
DC 50- HB Non-CDH	\$2,730	DC 50- HB Non-CDH	15	DC 50- HB Non-CDH	\$3.37	DC 50- HB Non-CDH	1.6%	DC 50- HB Non-CDH	\$168,439
<u>MD 2-50 PPO HSA</u>	<u>\$1,697</u>	<u>MD 2-50 PPO HSA</u>	<u>41</u>	<u>MD 2-50 PPO HSA</u>	<u>\$5.76</u>	<u>MD 2-50 PPO HSA</u>	<u>0.8%</u>	<u>MD 2-50 PPO HSA</u>	<u>\$3,448,897</u>
Average Group	\$2,269	Average Group	18	Average Group	\$3.52	Average Group	0.9%		
Average Individual	\$1,521	Average Individual	18	Average Individual	\$2.32	Average Individual	1.0%		

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Derivation of Embedded Pediatric Dental Rate
Projection Period: 1/1/2015 - 12/31/2015

#	Formula	Description	%	PMPM
1		Base D.C. Dental Allowed PMPM For Members Age 19 and Under, Classes 1 -4		\$ 16.32
2		Adjustment to D.C. Benchmark Plan (D.C. FEDVIP)	-1.15%	
3	(3) = (1)*(1+(2))	Adjusted Allowed PMPM Classes 1 - 4		\$ 16.13
4		Base D.C. Dental Allowed PMPM For Members Age 19 and Under, Class 5 (Ortho)		\$ 3.44
5		Adjustment to D.C. Benchmark Plan	-40%	
6	(6) = (4)*(1+(5))	Adjusted Allowed PMPM Classes 5 (Ortho)		\$ 2.06
7		Estimated Base Period Allowed PMPM Adjusted to D.C. Benchmark		\$ 18.19
8		Completion Factor (Incurred 12, Paid 14)		0.980
9	(9) = (7)/(8)	Ultimate Base Period Allowed PMPM Adjusted to D.C. Benchmark		\$ 18.56
10		Assumed Annual Trend	5.0%	
11		Assumed Trend Factor for 24 months	1.103	
12	(12) = (9)*(11)	Projected Allowed Pediatric PMPM		\$ 20.47
13		Adjustment to Dental PPO Fee Schedule	0.879	
14	(14) = (12)*(13)	Projected Allowed Pediatric PMPM Based on PPO Fee Schedule		\$ 17.98
15		Adjustment for Planned 1/1/2014 Fee Schedule Increase	1.000	
16	(16) = (14)*(15)	Projected Allowed Pediatric PMPM Adjusted for Fee Schedule Changes		\$ 17.98
17		% of D.C. Small Group & Individual, Non-Medigap Market Age 19 and Under	21.6%	
18	(18) = (16)*(17)	Projected Allowed Pediatric Dental PMPM Spread Over Single Risk Pool		\$ 3.89
19		Base Period Other Medical PMPM		\$ 12.91
20		Projection Factor Entered To Adjust Other Medical Category		1.301
21		Impact on Total Medical and Rx Base Period PMPM		1.012

Notes:

- Row 1** Allowed PMPM for experience period of 01/2013 - 12/2013, pd through 03/2014 for Classes 1- 4
- Row 2** Adjustment factor to account for coverage differences between current plans and DC Benchmark plan for Classes 1 - 4
- Row 4** Allowed PMPM for experience period of 01/2013 - 12/2013, pd through 03/2014 for Class 5 (Ortho)
- Row 5** Adjustment factor to account for coverage differences between current plans and DC Benchmark plan for Class 5 (Ortho), as provided by CareFirst's Dental Network Director.
- Row 10** Assumed pricing trend.
- Row 11** Projected through 12/31/2015.
- Row 13** Adjustment to PPO plan basis from blended product basis implicit in base experience data.
- Row 20** Benefit factor applied to Base Period Allowed PMPM.

	Begin	End	Mid-point	Months of trend
Experience Period	1/1/2013	12/31/2013	7/2/2013	
Rating Period	1/1/2015	12/31/2015	7/2/2015	24.0

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Derivation of Pediatric Dental Effective Coinsurance

	Allowed PMPM*	Plan Coinsurance	Plan Portion
Level 1	\$ 10.49	100%	\$ 10.49
Level 2	\$ 3.25	80%	\$ 2.60
Level 3	\$ 2.30	80%	\$ 1.84
Level 4	\$ 0.54	50%	\$ 0.27
Level 5	\$ 1.82	50%	\$ 0.91
Total	\$ 18.41		\$ 16.12
Effective Coinsurance			87.6%

* Based on the combined D.C. Small Group dental book of business over the experience period 11/2012 - 10/2013, paid through 12/2013, projected to 2015, and adjusted to the PMPM and utilization distribution of the expected pediatric population.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Vision Embedded in Medical Plan
Projection Period: 1/1/2015 - 12/31/2015

Derivation of Embedded Pediatric Vision Rate (EHB)

Small Group Embedded PMPM (Davis Vision Capitation)	\$	1.25
% of D.C. Small Group Market Age 19 and Under		22.6%
<hr/>		
Pediatric Vision PMPM Spread Over Small Group Market	\$	0.28
Individual, non-Medigap Embedded PMPM (Davis Vision Capitation)	\$	1.77
% of D.C. Individual, non-Medigap Market Age 19 and Under		7.7%
<hr/>		
Pediatric Vision PMPM Spread Over Individual Market	\$	0.14
Blended EHB Pediatric Vision PMPM Spread Over Entire Single Risk Pool	\$	0.27

Derivation of Embedded Adult Vision Rate (Non-EHB, Individual Market Only)

Individual, non-Medigap Embedded PMPM (Davis Vision Capitation)	\$	1.16
% of D.C. Individual, non-Medigap Market Over Age 19		92.3%
<hr/>		
Embedded Adult Vision PMPM Spread Over Individual Market	\$	1.07
Blended Non-EHB Adult Vision PMPM Spread Over Entire Single Risk Pool	\$	0.10

Derivation of Projection Factor

Total Embedded Vision PMPM	\$	0.37
Experience Period Core Vision Capitation PMPM	\$	0.44
\$ Change from Experience to Projection Period PMPM	\$	(0.07)
Total Experience Period Capitation PMPM	\$	1.63
Projection Factor to Adjust Capitation Category		0.957

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

**Derivation of Age Calibration Factor
Based on Approved DC Age Factors from 1/1/2014**

Projected Pool Allowed PMPM (including non-EHB)	\$	362.22
Total Estimated Allowed \$ Per Month, Based on Age Factors	\$	14,437,772
Total Small Group Experience Members		38,557
PMPM Based On Age Factors	\$	374.45
Calibration Adjustment		0.950
Average Age Factor		1.034
Average Age (Implied by Average Factor)		42

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Derivation of Network Factors

BlueChoice Network Variations

Network Type	Proposed Products Using This Network	Description
Lock In / Referral	HMO Referral	Referrals needed for Specialist Care, No Out of Network Coverage
Open Access	HMO, HealthyBlue HMO, BlueChoice Plus (only 2 plans - 100%/80%, \$20/\$30 and 100%/60%, \$20/\$30)	No Referrals needed for Specialist, No Out of Network Coverage
Open Access Plus	BlueChoice Plus (all plans not previously listed), HealthyBlue Plus	No Referrals needed, Out of Network allowances pay up to Regional Preferred Network (RPN) allowance
Open Access Advantage	BlueChoice Advantage, HealthyBlue Advantage	No Referrals needed, Out of Network allowance pay up to RPN allowance, Out of Area BlueCard considered In Network for cost sharing

Network Type	Corresponding Products in Base Period	Mem Months	% Member Months	Assumed Network Factor
Lock In / Referral	HMO	92,135	23.3%	0.930
Open Access	HMO OA, Opt Out OA	181,730	45.9%	0.977
Open Access Plus	Opt Out Plus OA, HealthyBlue 2.0	85,353	21.6%	1.005
Open Access Advantage	BlueChoice Advantage, HealthyBlue Advantage	36,298	9.2%	1.027
BC Products Base Allowed		395,516	100.0%	

Derivation of Open Access Factor Relative to Lock In

Open Access above includes a large block of CDH HSA/HRA benefits. This is skewing the allowed PMPM relationships from what we might expect Non-CDH Only Allowed PMPMs are below. This comparison removes the impact of favorable CDH selection.

	Allowed \$	Mem Months	Allowed PMPM	% Differential
Lock In / Referral	\$ 25,846,265	92,135	\$ 280.53	
Open Access	\$ 51,647,095	156,273	\$ 330.49	17.8%

Derivation of Open Access Plus Factor Relative to Lock In / Referral

The Open Access Plus products use the BlueChoice Fee allowances for In Network services. Out of Network services pay up to our Regional Preferred Network allowances. Members can be balance billed.

	In Network	Out of Network
Estimated Utilization Split for Open Access Plus	88.2%	11.9%
Allowances Relativity	1.050	1.306
Final Factor for Open Access Plus	1.080	

Derivation of Open Access Advantage Factor Relative to Lock In / Referral

Open Access Advantage plans pay Out Of Area BlueCard Services as In Network. Out of Network, Out of Area services pay up to our Regional Preferred Network allowances. Members can be balance billed.

	In Area In Network	Out of Area In Network	In Area Out of Network	Out of Area Out of Network
Assumed Utilization Split	81.79%	12.50%	5.41%	0.30%
Allowances Relativity	1.050	1.366	1.306	1.366
Final Factor for Open Access Advantage				1.104

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Impact of Expected Differences in Utilization of Services Based on Differences in Cost Sharing

The factors below are intended to be multiplicative adjustments to the pure cost sharing factors derived over the pool. These factors represent the expected impact on:

Total BlueChoice

	Midpoint AV	Projected Contracts As Of 12/31/2015	Utilization Impact Relative to Bronze*	Impact Relative to Average
Platinum	90%	5,783	1.166	1.053
Gold	80%	10,793	1.087	0.982
Silver	70%	1,283	1.032	0.932
Bronze	60%	254	1.001	0.904
Subtotal:		18,113		
Average	82.2%		1.107	

	Impact of Health Savings/Reimbursement Account**	1Q15 Projected Member Months
HSA/HRA	0.960	11,808
All Other	1.005	91,068
	1.000	102,876

* Calculated as cost per enrollee divided by Bronze cost per enrollee, based on HHS AV Calculator continuance tables.

** Existing Small Group HRA rates are approximately 8% higher than HSA rates. For the same person, regardless of health status, the addition of an HRA to a plan induces costs and the addition of an HSA reduces costs. Since current Small Group CDH members are enrolled primarily in HSA plans, we assume an overall impact of -4% for CDH plans.

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Rating Methodology & Sample Calculation

Methodology:

- For each subscriber in a group, identify:
All dependents associated with the subscriber including the following categories:
Spouse/Domestic Partner
of children ages 21 or older
of children ages under 21 (if more than 3, select 3 oldest children)

Group ABC

Selects BlueChoice HMO Referral HSA/HRA \$4,000 Bronze Plan

Employee 1

A spouse, and 1 child

1
0
1

Employee 2

5 children

0
1
4

- For each subscriber and dependent, identify their age.

Subscriber	Spouse	Child 1	Subscriber	Child 1*	Child 2	Child 3	Child 4	Child 5
46	34	15	52	6	10	13	18	22

- Determine appropriate age factor.

1.227	0.856	0.654	1.545		0.654	0.654	0.654	0.727
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- Identify the appropriate consumer level base rate.

\$219.06	\$219.06	\$219.06	\$219.06		\$219.06	\$219.06	\$219.06	\$219.06
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- Multiply the (base rate x age factor) and round to the nearest whole cent to determine the member's individual rate.

\$268.79	\$187.52	\$143.27	\$338.45		\$143.27	\$143.27	\$143.27	\$159.26
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- The group's total rate is the sum of individual rates for all subscribers and members combined.

\$1,527.10

*Note that this subscriber has 4 children under the age of 21. Due to the dependent cap, only the oldest 3 are rated. As such, Child 1 is covered at no additional cost.

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Age Factors

Age	Proposed Factor*
<= 20	0.654
21	0.727
22	0.727
23	0.727
24	0.727
25	0.727
26	0.727
27	0.727
28	0.744
29	0.760
30	0.779
31	0.799
32	0.817
33	0.836
34	0.856
35	0.876
36	0.896
37	0.916
38	0.927
39	0.938
40	0.975
41	1.013
42	1.053
43	1.094
44	1.137
45	1.181
46	1.227
47	1.275
48	1.325
49	1.377
50	1.431
51	1.487
52	1.545
53	1.605
54	1.668
55	1.733
56	1.801
57	1.871
58	1.944
59	2.020
60	2.099
61	2.181
62	2.181
63	2.181
64 and over	2.181

From approved filing CFAP-129047155 , effective 1/1/2014.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Network Factors

Network Type	Proposed Products Using This Network	Assumed Network Factor
Lock In / Referral	HMO Referral	0.930
Open Access	HMO, HealthyBlue HMO, BlueChoice Plus (only 2 plans - 100%/80%, \$20/\$30 and 100%/60%, \$20/\$30)	0.977
Open Access Plus	BlueChoice Plus (all plans not previously listed), HealthyBlue Plus	1.005
Open Access Advantage	BlueChoice Advantage, HealthyBlue Advantage	1.027

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Estimated Renewal Rate Changes

Product	HIOS Product ID	1Q15 Estimated	1Q15 Estimated	2Q15 Estimated	2Q15 Estimated	3Q15 Estimated	3Q15 Estimated	4Q15 Estimated	4Q15 Estimated
		Consumer Level Base Rate Renewal	Avg. Plan Adjusted Index Rate Renewal	Consumer Level Base Rate Renewal	Avg. Plan Adjusted Index Rate Renewal	Consumer Level Base Rate Renewal	Avg. Plan Adjusted Index Rate Renewal	Consumer Level Base Rate Renewal	Avg. Plan Adjusted Index Rate Renewal
BlueChoice HMO HSA/HRA	86052DC047	11.0%	12.6%	10.1%	11.7%	9.3%	10.9%	8.5%	10.1%
BlueChoice HMO	86052DC046	12.2%	13.9%	11.4%	13.0%	10.6%	12.2%	9.7%	11.3%
BlueChoice Advantage	86052DC044	12.2%	13.8%	11.3%	12.9%	10.5%	12.1%	9.7%	11.3%
BlueChoice Plus	86052DC050	11.0%	12.6%	10.1%	11.7%	9.3%	10.9%	8.5%	10.1%
HealthyBlue HMO	86052DC054	13.4%	15.0%	12.5%	14.2%	11.7%	13.3%	10.9%	12.5%
HealthyBlue Plus	86052DC056	12.5%	14.1%	11.6%	13.2%	10.8%	12.4%	10.0%	11.5%
HealthyBlue Advantage	86052DC052	14.8%	16.4%	13.9%	15.6%	13.1%	14.7%	12.2%	13.9%
BlueChoice Advantage HSA/HRA	86052DC045	13.3%	15.0%	12.5%	14.1%	11.6%	13.2%	10.8%	12.4%
BlueChoice Plus HSA/HRA	86052DC051	11.2%	12.8%	10.4%	12.0%	9.6%	11.2%	8.7%	10.3%
HealthyBlue HMO HSA/HRA	86052DC055	13.8%	15.4%	12.9%	14.5%	12.1%	13.7%	11.2%	12.8%
HealthyBlue Plus HSA/HRA	86052DC057	13.4%	15.1%	12.5%	14.2%	11.7%	13.3%	10.9%	12.5%
HealthyBlue Advantage HSA/HRA	86052DC053	14.7%	16.3%	13.8%	15.5%	13.0%	14.6%	12.1%	13.7%
BlueChoice HMO Referral HSA/HRA	86052DC049	10.4%	12.0%	9.6%	11.2%	8.8%	10.3%	7.9%	9.5%
BlueChoice HMO Referral	86052DC048	11.1%	12.7%	10.2%	11.8%	9.4%	11.0%	8.6%	10.2%
TOTAL:		12.9%		12.0%		11.2%		10.4%	

APPENDIX

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015
Non-Grandfathered Experience for Existing HIOS IDs

Existing Products Included in Experience Period

HIOS Product ID	HIOS Product Name	Contracts a/o Dec 2013	Member Months	Total Premium	Total Allowed Claims	Incurred Claims
86052DC024	BlueChoice Advantage HRA	57	1,027	\$ 230,468	\$ 361,917	\$ 264,777
86052DC023	BlueChoice Advantage HSA	246	2,609	\$ 556,188	\$ 617,831	\$ 413,221
86052DC008	BlueChoice HMO	5,025	92,135	\$ 31,237,281	\$ 25,846,265	\$ 23,701,361
86052DC018	BlueChoice Opt-Out Open Access	5,033	92,573	\$ 32,326,928	\$ 32,350,400	\$ 29,510,840
86052DC017	BlueChoice HMO Open Access	3,295	63,700	\$ 19,846,393	\$ 19,296,695	\$ 17,804,587
86052DC019	BlueChoice Opt-Out Plus Open Access	1,001	35,417	\$ 12,922,815	\$ 13,878,399	\$ 12,676,602
86052DC025	HealthyBlue 2.0	3,388	42,283	\$ 13,147,692	\$ 12,065,914	\$ 10,351,120
86052DC031	HealthyBlue 2.0 HRA	20	327	\$ 93,903	\$ 53,886	\$ 44,050
86052DC030	HealthyBlue 2.0 HSA	59	1,136	\$ 298,731	\$ 340,775	\$ 250,865
86052DC035	HealthyBlue Advantage	1,153	15,587	\$ 3,983,094	\$ 4,733,221	\$ 4,176,471
86052DC037	HealthyBlue Advantage HRA	97	1,242	\$ 278,137	\$ 641,660	\$ 584,152
86052DC036	HealthyBlue Advantage HSA	162	2,566	\$ 521,182	\$ 650,442	\$ 452,807
86052DC014	HealthyBlue Triple Option	2	399	\$ 110,135	\$ 71,111	\$ 62,572
86052DC016	HealthyBlue Triple Option HRA	-	18	\$ 4,410	\$ 425	\$ 343
86052DC015	HealthyBlue Triple Option HSA	-	31	\$ 6,365	\$ 5,925	\$ 3,768
86052DC010	BlueChoice HMO HRA Open Access	211	4,094	\$ 1,206,033	\$ 766,888	\$ 520,131
86052DC009	BlueChoice HMO HSA Open Access	1,308	21,363	\$ 5,161,714	\$ 4,462,666	\$ 3,082,650
86052DC013	BlueChoice Advantage	722	13,267	\$ 4,089,426	\$ 4,592,358	\$ 4,120,297
86052DC012	BlueChoice Opt-Out Plus HRA Open Access	82	1,532	\$ 413,249	\$ 331,752	\$ 179,370
86052DC011	BlueChoice Opt-Out Plus HSA Open Access	264	4,210	\$ 1,246,611	\$ 2,053,830	\$ 1,621,911
	Total	22,125	395,516	\$ 127,680,752	\$ 123,122,359	\$ 109,821,895

Existing Products with No Experience in Experience Period

HIOS Product ID	HIOS Product Name
86052DC038	BlueChoice HMO Open Access HDHP
86052DC039	BlueChoice Opt-Out Plus Open Access HDHP

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015

Off Exchange HIOS IDs*

HIOS Plan ID	HIOS Plan Name	On/Off Exchange
86052DC0490002	BlueChoice HMO Referral HSA/HRA \$4,000 - SE	Off
86052DC0470003	BlueChoice HMO HSA/HRA \$2,000, 80% - SE	Off
86052DC0470001	BlueChoice HMO HSA/HRA \$1,500	Off
86052DC0470004	BlueChoice HMO HSA/HRA \$2,000	Off
86052DC0460005	BlueChoice HMO \$1,800	Off
86052DC0460001	BlueChoice HMO \$1,000 - SE	Off
86052DC0480001	BlueChoice HMO Referral \$10/\$20	Off
86052DC0480003	BlueChoice HMO Referral \$30/\$40	Off
86052DC0480002	BlueChoice HMO Referral \$500	Off
86052DC0460002	BlueChoice HMO \$250	Off
86052DC0460004	BlueChoice HMO \$30/\$40	Off
86052DC0440003	BlueChoice Advantage 90%/70% - SE	Off
86052DC0440001	BlueChoice Advantage 80%/50%	Off
86052DC0440002	BlueChoice Advantage 100%/70%	Off
86052DC0440005	BlueChoice Advantage \$1000	Off
86052DC0450001	BlueChoice Advantage HSA/HRA \$1500	Off
86052DC0500001	BlueChoice Plus \$2000	Off
86052DC0500004	BlueChoice Plus 100%/80%, \$10/\$20	Off
86052DC0500002	BlueChoice Plus 100%/80%, \$20/\$30	Off
86052DC0500003	BlueChoice Plus 100%/60%, \$20/\$30	Off
86052DC0510001	BlueChoice Plus HSA/HRA \$1500	Off
86052DC0510002	BlueChoice Plus HSA/HRA \$2000	Off
86052DC0510003	BlueChoice Plus HSA/HRA \$3500	Off
86052DC0540002	HealthyBlue HMO \$300	Off
86052DC0540003	HealthyBlue HMO \$600	Off
86052DC0540001	HealthyBlue HMO \$1,500	Off
86052DC0550001	HealthyBlue HMO HSA/HRA \$2,000	Off
86052DC0560002	HealthyBlue Plus \$300	Off
86052DC0560003	HealthyBlue Plus \$600	Off
86052DC0560001	HealthyBlue Plus \$1,500	Off
86052DC0570001	HealthyBlue Plus HSA/HRA \$2,000	Off
86052DC0520002	HealthyBlue Advantage \$300	Off
86052DC0520003	HealthyBlue Advantage \$600	Off
86052DC0520001	HealthyBlue Advantage \$1,500	Off
86052DC0530001	HealthyBlue Advantage HSA/HRA \$2,000	Off

*Off Exchange plans are closed for new and renewing business effective 1/1/2015

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

D.C. BlueChoice Small Group Experience
Experience Period: 1/1/2013 - 12/31/2013, Paid Through 3/31/2014

Service Category	Non-Grandfathered Small Group (Used in Base Period Data)			Total Small Group (Grandfathered & Non) (Used in Historical Trend Analysis)		
	Allowed Amount	Units	Allowed PMPM	Allowed Amount	Units	Allowed PMPM
Inpatient	\$ 24,446,860	1,773	\$ 61.81	\$ 26,732,692	2,002	\$ 60.30
Outpatient	\$ 22,148,801	17,780	\$ 56.00	\$ 24,404,533	20,017	\$ 55.05
Professional	\$ 41,234,070	288,458	\$ 104.25	\$ 46,284,974	324,906	\$ 104.40
Other	\$ 4,890,339	21,286	\$ 12.36	\$ 5,480,447	24,450	\$ 12.36
Rx	\$ 30,402,289	263,172	\$ 76.87	\$ 34,181,667	295,496	\$ 77.10
Capitation	\$ 637,546		\$ 1.61	\$ 714,611		\$ 1.61
Total	\$ 123,759,906		\$ 312.91	\$ 137,798,926		\$ 310.83
Member Months	395,516			443,325		

The base period data used in developing the index rate reflects only non-grandfathered business. The historical trend analysis also includes grandfathered Small Group business. Approximately 6.5% of current D.C. BlueChoice Small Group enrollment is grandfathered business.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Blended Index Rate

Effective Date	Index Rate	Total Member Months
1/1/2015	\$ 361.09	102,876
4/1/2015	\$ 367.26	72,780
7/1/2015	\$ 373.53	91,824
10/1/2015	\$ 379.92	87,492
Blended	\$ 370.21	354,972

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Medical Inpatient
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Admits	Completion Factor	Completed		Rolling 12 PMPM			Rolling 12 Trend		
						Allowed	Admits	Allowed	Admits/1000	Unit Cost	Allowed	Admits/1000	Unit Cost
201104	20,179	32,103	\$1,489,395	143	1.00	\$1,489,395	143						
201105	20,433	32,618	\$2,812,666	169	1.00	\$2,812,666	169						
201106	20,558	32,743	\$1,569,735	142	1.00	\$1,569,735	142						
201107	20,647	32,974	\$1,420,853	148	1.00	\$1,420,853	148						
201108	20,844	33,208	\$1,789,689	152	1.00	\$1,789,689	152						
201109	21,046	33,538	\$1,954,786	151	1.00	\$1,954,786	151						
201110	21,026	33,329	\$1,439,394	140	1.00	\$1,439,394	140						
201111	21,175	33,483	\$2,013,170	182	1.00	\$2,013,170	182						
201112	21,594	34,138	\$1,616,222	166	1.00	\$1,616,222	166						
201201	21,693	34,301	\$2,009,919	192	1.00	\$2,009,919	192						
201202	21,999	34,878	\$2,727,712	174	1.00	\$2,727,712	174						
201203	22,133	35,090	\$2,331,145	161	1.00	\$2,331,257	161	\$57.59	57.26	\$12,070.16			
201204	22,251	35,294	\$1,584,525	141	1.00	\$1,584,696	141	\$57.37	56.75	\$12,132.34			
201205	22,108	35,120	\$1,759,920	141	1.00	\$1,760,336	141	\$54.44	55.58	\$11,755.09			
201206	22,593	35,883	\$1,645,405	146	1.00	\$1,645,909	146	\$54.21	55.27	\$11,770.20			
201207	22,715	36,080	\$2,100,653	157	1.00	\$2,101,284	157	\$55.45	55.12	\$12,071.76			
201208	23,030	36,529	\$1,745,314	157	1.00	\$1,745,949	157	\$54.90	54.83	\$12,016.84			
201209	23,253	36,879	\$2,166,928	167	1.00	\$2,167,768	167	\$54.97	54.85	\$12,027.20			
201210	23,369	37,068	\$2,381,986	188	1.00	\$2,383,063	188	\$56.71	55.72	\$12,212.40			
201211	23,881	37,872	\$1,348,229	148	1.00	\$1,349,057	148	\$54.58	54.21	\$12,083.45			
201212	24,214	38,435	\$1,543,812	150	1.00	\$1,544,960	150	\$53.88	53.23	\$12,146.24			
201301	24,621	39,171	\$2,292,325	184	1.00	\$2,294,540	184	\$53.93	52.42	\$12,344.51			
201302	24,792	39,397	\$1,875,749	183	1.00	\$1,878,149	183	\$51.46	52.14	\$11,843.75			
201303	24,950	39,658	\$3,970,770	177	1.00	\$3,976,655	177	\$54.61	52.04	\$12,592.52	-5.2%	-9.1%	4.3%
201304	25,094	39,885	\$2,897,217	173	1.00	\$2,902,838	173	\$56.97	52.37	\$13,054.40	-0.7%	-7.7%	7.6%
201305	25,173	39,831	\$2,163,004	185	1.00	\$2,168,580	185	\$57.28	53.00	\$12,969.17	5.2%	-4.6%	10.3%
201306	25,507	40,354	\$1,655,462	164	1.00	\$1,660,318	164	\$56.76	52.96	\$12,858.78	4.7%	-4.2%	9.2%
201307	25,551	40,481	\$3,282,567	210	1.00	\$3,294,587	211	\$58.78	53.85	\$13,099.17	6.0%	-2.3%	8.5%
201308	25,836	40,969	\$2,481,955	210	0.99	\$2,496,208	211	\$59.82	54.72	\$13,118.32	9.0%	-0.2%	9.2%
201309	25,931	41,107	\$2,416,767	187	0.99	\$2,436,094	189	\$59.86	54.78	\$13,112.22	8.9%	-0.1%	9.0%
201310	25,875	41,086	\$2,208,549	169	0.99	\$2,238,682	171	\$59.05	53.90	\$13,147.61	4.1%	-3.3%	7.7%
201311	26,103	41,553	\$2,010,873	183	0.98	\$2,051,808	187	\$60.06	54.45	\$13,237.02	10.0%	0.4%	9.5%
201312	26,846	42,793	\$1,894,928	157	0.97	\$1,956,015	162	\$60.36	54.25	\$13,352.03	12.0%	1.9%	9.9%
201401	27,338	44,096	\$2,355,294	179	0.93	\$2,522,821	192	\$60.22	53.89	\$13,409.75	11.7%	2.8%	8.6%
201402	26,670	43,171	\$1,574,237	148	0.80	\$1,966,869	185	\$59.94	53.52	\$13,439.27	16.5%	2.7%	13.5%
201403	25,831	41,851	\$557,405	54	0.36	\$1,533,007	149	\$54.76	52.62	\$12,490.03	0.3%	1.1%	-0.8%
Experience Period	306,279	486,285	\$29,150,166	2,182	0.99	\$29,354,475	2,199						
201303	24,950	39,658									-5.2%	-9.1%	4.3%
201309	25,931	41,107									8.9%	-0.1%	9.0%
201312	26,846	42,793									12.0%	1.9%	9.9%
Avg last 6 months	26,024	41,332									8.3%	-0.6%	9.0%
Selected Pricing Trend												1.0%	7.0%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Medical Outpatient
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Visits	Completion Factor	Completed		Rolling 12 PMPM			Rolling 12 Trend			
						Allowed	Visits	Allowed	Visits/1000	Unit Cost	Allowed	Visits/1000	Unit Cost	
201104	20,179	32,103	\$1,413,257	1,442	1.00	\$1,413,257	1,442							
201105	20,433	32,618	\$1,388,754	1,549	1.00	\$1,388,754	1,549							
201106	20,558	32,743	\$1,467,302	1,554	1.00	\$1,467,302	1,554							
201107	20,647	32,974	\$1,399,531	1,409	1.00	\$1,399,531	1,409							
201108	20,844	33,208	\$1,700,475	1,578	1.00	\$1,700,475	1,578							
201109	21,046	33,538	\$1,691,254	1,567	1.00	\$1,691,254	1,567							
201110	21,026	33,329	\$1,701,282	1,600	1.00	\$1,701,282	1,600							
201111	21,175	33,483	\$1,658,386	1,553	1.00	\$1,658,386	1,553							
201112	21,594	34,138	\$1,653,541	1,558	1.00	\$1,653,541	1,558							
201201	21,693	34,301	\$1,566,499	1,609	1.00	\$1,566,499	1,609							
201202	21,999	34,878	\$1,656,539	1,608	1.00	\$1,656,539	1,608							
201203	22,133	35,090	\$1,786,285	1,809	1.00	\$1,786,370	1,809	\$47.42	561.71	\$1,013.12				
201204	22,251	35,294	\$1,574,810	1,535	1.00	\$1,574,980	1,535	\$47.45	560.05	\$1,016.68				
201205	22,108	35,120	\$1,776,927	1,715	1.00	\$1,777,340	1,715	\$48.11	561.50	\$1,028.17				
201206	22,593	35,883	\$1,964,741	1,640	1.00	\$1,965,323	1,640	\$48.95	559.74	\$1,049.49				
201207	22,715	36,080	\$1,953,920	1,723	1.00	\$1,954,545	1,724	\$49.93	564.66	\$1,061.03				
201208	23,030	36,529	\$2,151,772	1,767	1.00	\$2,152,565	1,768	\$50.61	565.61	\$1,073.77				
201209	23,253	36,879	\$1,613,743	1,667	1.00	\$1,614,368	1,668	\$50.03	563.99	\$1,064.42				
201210	23,369	37,068	\$1,920,511	1,759	1.00	\$1,921,506	1,760	\$50.11	563.55	\$1,066.93				
201211	23,881	37,872	\$1,763,406	1,658	1.00	\$1,764,521	1,659	\$49.84	560.75	\$1,066.58				
201212	24,214	38,435	\$2,020,546	1,703	1.00	\$2,022,101	1,704	\$50.20	559.24	\$1,077.10				
201301	24,621	39,171	\$2,044,249	1,879	1.00	\$2,046,197	1,881	\$50.73	560.47	\$1,086.24				
201302	24,792	39,397	\$2,175,420	1,775	1.00	\$2,177,965	1,777	\$51.39	559.33	\$1,102.60				
201303	24,950	39,658	\$2,058,121	1,853	1.00	\$2,061,297	1,856	\$51.48	554.88	\$1,113.39	8.6%	-1.2%	9.9%	
201304	25,094	39,885	\$2,042,752	1,948	1.00	\$2,046,728	1,952	\$52.00	560.30	\$1,113.76	9.6%	0.0%	9.5%	
201305	25,173	39,831	\$2,570,830	2,019	1.00	\$2,577,398	2,024	\$53.22	562.64	\$1,135.07	10.6%	0.2%	10.4%	
201306	25,507	40,354	\$2,157,718	1,818	1.00	\$2,163,940	1,823	\$53.13	561.94	\$1,134.65	8.5%	0.4%	8.1%	
201307	25,551	40,481	\$2,389,011	1,837	1.00	\$2,397,718	1,844	\$53.58	559.73	\$1,148.77	7.3%	-0.9%	8.3%	
201308	25,836	40,969	\$2,045,610	1,725	0.99	\$2,057,493	1,735	\$52.87	553.61	\$1,146.11	4.5%	-2.1%	6.7%	
201309	25,931	41,107	\$2,081,197	1,774	0.99	\$2,097,876	1,788	\$53.42	551.73	\$1,161.93	6.8%	-2.2%	9.2%	
201310	25,875	41,086	\$2,230,406	1,919	0.99	\$2,260,445	1,945	\$53.68	551.74	\$1,167.57	7.1%	-2.1%	9.4%	
201311	26,103	41,553	\$2,278,239	1,795	0.98	\$2,324,365	1,831	\$54.43	551.81	\$1,183.76	9.2%	-1.6%	11.0%	
201312	26,846	42,793	\$2,378,527	1,724	0.97	\$2,455,508	1,780	\$54.84	548.73	\$1,199.23	9.2%	-1.9%	11.3%	
201401	27,338	44,096	\$2,682,567	1,872	0.93	\$2,873,107	2,005	\$55.97	546.26	\$1,229.55	10.3%	-2.5%	13.2%	
201402	26,670	43,171	\$1,840,173	1,606	0.80	\$2,300,476	2,008	\$55.79	547.68	\$1,222.43	8.6%	-2.1%	10.9%	
201403	25,831	41,851	\$897,506	791	0.36	\$2,507,390	2,226	\$56.44	554.19	\$1,222.17	9.6%	-0.1%	9.8%	
Experience Period	306,279	486,285	\$26,452,080	22,066	0.99	\$26,666,931	22,237							
201303	24,950	39,658									8.6%	-1.2%	9.9%	
201309	25,931	41,107									6.8%	-2.2%	9.2%	
201312	26,846	42,793									9.2%	-1.9%	11.3%	
Avg last 6 months	26,024	41,332									7.4%	-1.8%	9.3%	
Selected Pricing Trend													0.0%	9.5%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Medical Professional
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Visits	Completion Factor	Completed		Rolling 12 PMPM			Rolling 12 Trend		
						Allowed	Visits	Allowed	Visits/1000	Unit Cost	Allowed	Visits/1000	Unit Cost
201104	20,179	32,103	\$2,962,279	19,737	1.00	\$2,962,279	19,737						
201105	20,433	32,618	\$2,968,443	20,067	1.00	\$2,968,443	20,067						
201106	20,558	32,743	\$3,153,064	21,062	1.00	\$3,153,064	21,062						
201107	20,647	32,974	\$2,825,252	18,748	1.00	\$2,825,252	18,748						
201108	20,844	33,208	\$3,303,887	21,082	1.00	\$3,303,887	21,082						
201109	21,046	33,538	\$3,149,513	20,235	1.00	\$3,149,513	20,235						
201110	21,026	33,329	\$3,190,070	21,049	1.00	\$3,190,070	21,049						
201111	21,175	33,483	\$3,345,780	20,599	1.00	\$3,345,780	20,599						
201112	21,594	34,138	\$3,200,930	23,280	1.00	\$3,200,930	23,280						
201201	21,693	34,301	\$3,659,350	25,226	1.00	\$3,659,350	25,226						
201202	21,999	34,878	\$3,593,237	25,758	1.00	\$3,593,237	25,758						
201203	22,133	35,090	\$3,903,079	27,604	1.00	\$3,903,268	27,605	\$97.55	7,886.07	\$148.44			
201204	22,251	35,294	\$3,516,381	25,004	1.00	\$3,516,771	25,007	\$98.15	7,979.94	\$147.60			
201205	22,108	35,120	\$3,717,724	26,633	1.00	\$3,718,587	26,639	\$99.39	8,124.27	\$146.80			
201206	22,593	35,883	\$3,536,399	25,593	1.00	\$3,537,466	25,601	\$99.56	8,194.68	\$145.80			
201207	22,715	36,080	\$3,644,796	25,000	1.00	\$3,645,955	25,008	\$100.80	8,314.55	\$145.48			
201208	23,030	36,529	\$3,961,883	27,997	1.00	\$3,963,343	28,007	\$101.58	8,447.41	\$144.29			
201209	23,253	36,879	\$3,519,808	24,315	1.00	\$3,521,177	24,324	\$101.65	8,496.93	\$143.56			
201210	23,369	37,068	\$3,854,898	27,127	1.00	\$3,856,794	27,140	\$102.33	8,594.23	\$142.88			
201211	23,881	37,872	\$3,653,363	26,142	1.00	\$3,655,661	26,158	\$102.00	8,661.79	\$141.31			
201212	24,214	38,435	\$3,558,489	25,381	1.00	\$3,561,224	25,401	\$101.82	8,634.63	\$141.51			
201301	24,621	39,171	\$4,551,786	31,036	1.00	\$4,556,138	31,066	\$102.74	8,698.57	\$141.73			
201302	24,792	39,397	\$4,185,806	27,985	1.00	\$4,190,825	28,019	\$103.04	8,671.06	\$142.60			
201303	24,950	39,658	\$4,266,243	28,616	1.00	\$4,272,862	28,660	\$102.81	8,610.82	\$143.28	5.4%	9.2%	-3.5%
201304	25,094	39,885	\$4,427,234	31,563	1.00	\$4,435,952	31,625	\$103.80	8,699.07	\$143.19	5.8%	9.0%	-3.0%
201305	25,173	39,831	\$4,438,081	30,662	1.00	\$4,449,400	30,740	\$104.33	8,717.09	\$143.62	5.0%	7.3%	-2.2%
201306	25,507	40,354	\$3,909,764	27,883	1.00	\$3,921,268	27,965	\$104.15	8,694.09	\$143.76	4.6%	6.1%	-1.4%
201307	25,551	40,481	\$4,267,007	30,019	1.00	\$4,283,097	30,132	\$104.54	8,743.97	\$143.46	3.7%	5.2%	-1.4%
201308	25,836	40,969	\$4,208,852	29,923	0.99	\$4,233,254	30,096	\$104.12	8,714.70	\$143.38	2.5%	3.2%	-0.6%
201309	25,931	41,107	\$4,089,600	29,276	0.99	\$4,122,866	29,515	\$104.46	8,768.33	\$142.96	2.8%	3.2%	-0.4%
201310	25,875	41,086	\$4,555,293	33,299	0.99	\$4,616,848	33,750	\$105.17	8,860.50	\$142.44	2.8%	3.1%	-0.3%
201311	26,103	41,553	\$4,020,450	28,522	0.98	\$4,101,496	29,097	\$105.30	8,866.01	\$142.52	3.2%	2.4%	0.9%
201312	26,846	42,793	\$3,809,789	26,803	0.97	\$3,933,067	27,670	\$105.12	8,842.56	\$142.65	3.2%	2.4%	0.8%
201401	27,338	44,096	\$4,501,072	30,796	0.93	\$4,820,608	32,982	\$104.60	8,800.72	\$142.63	1.8%	1.2%	0.6%
201402	26,670	43,171	\$3,625,370	25,744	0.80	\$4,531,947	32,182	\$104.49	8,834.54	\$141.93	1.4%	1.9%	-0.5%
201403	25,831	41,851	\$2,120,154	15,828	0.35	\$6,012,520	44,788	\$107.53	9,184.84	\$140.49	4.6%	6.7%	-1.9%
Experience Period	306,279	486,285	\$50,729,905	355,587	0.99	\$51,117,073	358,334						
201303	24,950	39,658									5.4%	9.2%	-3.5%
201309	25,931	41,107									2.8%	3.2%	-0.4%
201312	26,846	42,793									3.2%	2.4%	0.8%
Avg last 6 months	26,024	41,332									3.0%	3.2%	-0.2%
Selected Pricing Trend												4.5%	0.0%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Medical Other
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Services	Completion Factor	Completed		Rolling 12 PMPM			Rolling 12 Trend			
						Allowed	Services	Allowed	Services/1000	Unit Cost	Allowed	Services/1000	Unit Cost	
201104	20,179	32,103	\$383,798	1,617	1.00	\$383,798	1,617							
201105	20,433	32,618	\$370,204	1,673	1.00	\$370,204	1,673							
201106	20,558	32,743	\$353,452	1,593	1.00	\$353,452	1,593							
201107	20,647	32,974	\$369,382	1,597	1.00	\$369,382	1,597							
201108	20,844	33,208	\$352,779	1,455	1.00	\$352,779	1,455							
201109	21,046	33,538	\$380,151	1,607	1.00	\$380,151	1,607							
201110	21,026	33,329	\$425,463	1,457	1.00	\$425,463	1,457							
201111	21,175	33,483	\$383,726	1,577	1.00	\$383,726	1,577							
201112	21,594	34,138	\$392,715	1,623	1.00	\$392,715	1,623							
201201	21,693	34,301	\$389,297	1,708	1.00	\$389,297	1,708							
201202	21,999	34,878	\$376,517	1,729	1.00	\$376,517	1,729							
201203	22,133	35,090	\$480,403	1,755	1.00	\$480,425	1,755	\$11.58	578.26	\$240.21				
201204	22,251	35,294	\$438,680	1,715	1.00	\$438,727	1,715	\$11.62	576.61	\$241.82				
201205	22,108	35,120	\$429,564	1,738	1.00	\$429,660	1,738	\$11.69	575.00	\$244.05				
201206	22,593	35,883	\$394,762	1,666	1.00	\$394,886	1,667	\$11.71	572.76	\$245.25				
201207	22,715	36,080	\$428,442	1,633	1.00	\$428,579	1,634	\$11.76	569.52	\$247.80				
201208	23,030	36,529	\$409,873	1,669	1.00	\$410,025	1,670	\$11.80	571.16	\$248.00				
201209	23,253	36,879	\$446,231	1,807	1.00	\$446,405	1,808	\$11.87	572.35	\$248.82				
201210	23,369	37,068	\$500,807	2,049	1.00	\$501,037	2,050	\$11.94	584.06	\$245.34				
201211	23,881	37,872	\$510,602	1,939	1.00	\$510,906	1,940	\$12.12	588.24	\$247.15				
201212	24,214	38,435	\$423,258	1,694	1.00	\$423,580	1,695	\$12.07	584.41	\$247.77				
201301	24,621	39,171	\$580,295	2,275	1.00	\$580,856	2,277	\$12.37	593.50	\$250.10				
201302	24,792	39,397	\$593,058	2,014	1.00	\$593,785	2,016	\$12.73	595.23	\$256.72				
201303	24,950	39,658	\$510,223	1,977	1.00	\$511,020	1,980	\$12.67	595.18	\$255.50	9.5%	2.9%	6.4%	
201304	25,094	39,885	\$439,716	2,152	1.00	\$440,606	2,156	\$12.55	600.84	\$250.61	8.0%	4.2%	3.6%	
201305	25,173	39,831	\$497,107	2,134	1.00	\$498,416	2,139	\$12.57	605.17	\$249.23	7.5%	5.2%	2.1%	
201306	25,507	40,354	\$483,564	2,118	1.00	\$484,981	2,124	\$12.64	611.21	\$248.21	8.0%	6.7%	1.2%	
201307	25,551	40,481	\$556,686	2,146	1.00	\$558,945	2,154	\$12.80	618.83	\$248.27	8.9%	8.7%	0.2%	
201308	25,836	40,969	\$514,684	2,321	0.99	\$517,696	2,334	\$12.91	629.95	\$245.95	9.4%	10.3%	-0.8%	
201309	25,931	41,107	\$519,572	2,065	0.99	\$523,857	2,081	\$12.96	631.25	\$246.35	9.2%	10.3%	-1.0%	
201310	25,875	41,086	\$575,930	2,280	0.99	\$583,790	2,311	\$13.02	632.49	\$247.09	9.1%	8.3%	0.7%	
201311	26,103	41,553	\$452,734	1,898	0.98	\$461,863	1,936	\$12.82	627.55	\$245.19	5.8%	6.7%	-0.8%	
201312	26,846	42,793	\$478,163	1,782	0.97	\$493,713	1,839	\$12.85	625.49	\$246.56	6.5%	7.0%	-0.5%	
201401	27,338	44,096	\$441,306	1,748	0.93	\$472,693	1,873	\$12.50	609.33	\$246.22	1.1%	2.7%	-1.6%	
201402	26,670	43,171	\$374,320	1,603	0.80	\$467,591	2,004	\$12.15	604.40	\$241.28	-4.6%	1.5%	-6.0%	
201403	25,831	41,851	\$237,944	921	0.35	\$682,567	2,559	\$12.44	615.71	\$242.53	-1.8%	3.4%	-5.1%	
Experience Period	306,279	486,285	\$6,201,731	25,162	0.99	\$6,249,527	25,347							
201303	24,950	39,658									9.5%	2.9%	6.4%	
201309	25,931	41,107									9.2%	10.3%	-1.0%	
201312	26,846	42,793									6.5%	7.0%	-0.5%	
Avg last 6 months	26,024	41,332									8.1%	8.5%	-0.4%	
Selected Pricing Trend													6.0%	0.0%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Rx
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Scripts	Completion Factor	Completed		Rolling 12 PMPM			Rolling 12 Trend		
						Allowed	Scripts	Allowed	Scripts/1000	Unit Cost	Allowed	Scripts/1000	Unit Cost
201104	20,179	32,103	\$2,145,050	21,363	1.00	\$2,145,050	21,363						
201105	20,433	32,618	\$2,371,440	22,271	1.00	\$2,371,440	22,271						
201106	20,558	32,743	\$2,249,377	22,317	1.00	\$2,249,377	22,317						
201107	20,647	32,974	\$2,347,543	21,273	1.00	\$2,347,543	21,273						
201108	20,844	33,208	\$2,583,537	22,382	1.00	\$2,583,537	22,382						
201109	21,046	33,538	\$2,430,947	21,914	1.00	\$2,430,947	21,914						
201110	21,026	33,329	\$2,490,040	22,649	1.00	\$2,490,040	22,649						
201111	21,175	33,483	\$2,622,628	22,811	1.00	\$2,622,628	22,811						
201112	21,594	34,138	\$2,558,815	23,792	1.00	\$2,558,815	23,792						
201201	21,693	34,301	\$2,659,358	24,534	1.00	\$2,659,358	24,534						
201202	21,999	34,878	\$2,627,312	23,775	1.00	\$2,627,312	23,775						
201203	22,133	35,090	\$2,796,623	25,571	1.00	\$2,796,623	25,571	\$74.26	8,190.36	\$108.80			
201204	22,251	35,294	\$2,696,245	24,500	1.00	\$2,696,245	24,500	\$75.04	8,218.73	\$109.56			
201205	22,108	35,120	\$2,791,942	25,258	1.00	\$2,791,942	25,258	\$75.61	8,256.18	\$109.89			
201206	22,593	35,883	\$2,627,755	23,823	1.00	\$2,627,755	23,823	\$75.95	8,237.08	\$110.64			
201207	22,715	36,080	\$2,713,354	24,581	1.00	\$2,713,354	24,581	\$76.26	8,271.14	\$110.64			
201208	23,030	36,529	\$2,768,769	25,295	1.00	\$2,768,769	25,295	\$76.10	8,289.07	\$110.17			
201209	23,253	36,879	\$2,579,931	23,787	1.00	\$2,579,931	23,787	\$75.85	8,276.67	\$109.97			
201210	23,369	37,068	\$2,804,508	25,700	1.00	\$2,804,508	25,700	\$75.92	8,290.01	\$109.90			
201211	23,881	37,872	\$2,915,072	25,985	1.00	\$2,915,072	25,985	\$75.83	8,293.98	\$109.71			
201212	24,214	38,435	\$2,811,300	26,545	1.00	\$2,811,300	26,545	\$75.66	8,287.97	\$109.54			
201301	24,621	39,171	\$3,252,285	29,079	1.00	\$3,252,285	29,079	\$76.17	8,320.32	\$109.86			
201302	24,792	39,397	\$2,909,926	26,209	1.00	\$2,909,926	26,209	\$76.03	8,301.37	\$109.91			
201303	24,950	39,658	\$3,149,669	27,338	1.00	\$3,149,669	27,338	\$76.04	8,264.00	\$110.42	2.4%	0.9%	1.5%
201304	25,094	39,885	\$3,104,064	28,324	1.00	\$3,104,064	28,324	\$76.17	8,281.59	\$110.37	1.5%	0.8%	0.7%
201305	25,173	39,831	\$3,418,273	28,435	1.00	\$3,418,273	28,435	\$76.76	8,279.64	\$111.25	1.5%	0.3%	1.2%
201306	25,507	40,354	\$3,109,552	26,764	1.00	\$3,109,552	26,764	\$77.06	8,275.90	\$111.74	1.5%	0.5%	1.0%
201307	25,551	40,481	\$3,330,935	28,002	1.00	\$3,330,935	28,002	\$77.66	8,285.84	\$112.47	1.8%	0.2%	1.6%
201308	25,836	40,969	\$3,456,548	27,527	1.00	\$3,456,548	27,527	\$78.39	8,264.55	\$113.82	3.0%	-0.3%	3.3%
201309	25,931	41,107	\$3,245,252	26,683	1.00	\$3,245,252	26,683	\$79.09	8,264.15	\$114.85	4.3%	-0.2%	4.4%
201310	25,875	41,086	\$3,617,879	28,551	1.00	\$3,617,879	28,551	\$80.13	8,266.26	\$116.32	5.5%	-0.3%	5.8%
201311	26,103	41,553	\$3,439,482	27,245	1.00	\$3,439,482	27,245	\$80.60	8,234.49	\$117.46	6.3%	-0.7%	7.1%
201312	26,846	42,793	\$3,704,278	28,821	1.00	\$3,704,278	28,821	\$81.72	8,216.86	\$119.34	8.0%	-0.9%	8.9%
201401	27,338	44,096	\$3,200,129	28,559	1.00	\$3,200,129	28,559	\$80.79	8,121.77	\$119.37	6.1%	-2.4%	8.7%
201402	26,670	43,171	\$2,962,777	26,058	1.00	\$2,962,777	26,058	\$80.28	8,056.19	\$119.58	5.6%	-3.0%	8.8%
201403	25,831	41,851	\$3,479,718	28,851	1.00	\$3,479,718	28,851	\$80.59	8,057.17	\$120.03	6.0%	-2.5%	8.7%
Experience Period	306,279	486,285	\$39,738,141	332,978	1.00	\$39,738,141	332,978						
201303	24,950	39,658									2.4%	0.9%	1.5%
201309	25,931	41,107									4.3%	-0.2%	4.4%
201312	26,846	42,793									8.0%	-0.9%	8.9%
Avg last 6 months	26,024	41,332									4.8%	-0.4%	5.2%
Selected Pricing Trend												1.0%	7.0%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Medical and Rx Total
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Completion Factor	Completed	Rolling 12 PMPM	Rolling 12 Trend
					Allowed	Allowed	Allowed
201104	20,179	32,103	\$8,393,779	1.00	\$8,393,779		
201105	20,433	32,618	\$9,911,507	1.00	\$9,911,507		
201106	20,558	32,743	\$8,792,930	1.00	\$8,792,930		
201107	20,647	32,974	\$8,362,561	1.00	\$8,362,561		
201108	20,844	33,208	\$9,730,367	1.00	\$9,730,367		
201109	21,046	33,538	\$9,606,650	1.00	\$9,606,650		
201110	21,026	33,329	\$9,246,249	1.00	\$9,246,249		
201111	21,175	33,483	\$10,023,690	1.00	\$10,023,690		
201112	21,594	34,138	\$9,422,224	1.00	\$9,422,224		
201201	21,693	34,301	\$10,284,422	1.00	\$10,284,422		
201202	21,999	34,878	\$10,981,316	1.00	\$10,981,316		
201203	22,133	35,090	\$11,297,535	1.00	\$11,297,944	\$288.40	
201204	22,251	35,294	\$9,810,640	1.00	\$9,811,419	\$289.63	
201205	22,108	35,120	\$10,476,077	1.00	\$10,477,865	\$289.24	
201206	22,593	35,883	\$10,169,061	1.00	\$10,171,340	\$290.38	
201207	22,715	36,080	\$10,841,164	1.00	\$10,843,717	\$294.19	
201208	23,030	36,529	\$11,037,611	1.00	\$11,040,651	\$294.99	
201209	23,253	36,879	\$10,326,641	1.00	\$10,329,649	\$294.37	
201210	23,369	37,068	\$11,462,710	1.00	\$11,466,909	\$297.01	
201211	23,881	37,872	\$10,190,672	1.00	\$10,195,217	\$294.37	
201212	24,214	38,435	\$10,357,405	1.00	\$10,363,164	\$293.62	
201301	24,621	39,171	\$12,720,939	1.00	\$12,730,015	\$295.94	
201302	24,792	39,397	\$11,739,958	1.00	\$11,750,649	\$294.66	
201303	24,950	39,658	\$13,955,026	1.00	\$13,971,502	\$297.62	3.2%
201304	25,094	39,885	\$12,910,982	1.00	\$12,930,188	\$301.50	4.1%
201305	25,173	39,831	\$13,087,296	1.00	\$13,112,068	\$304.16	5.2%
201306	25,507	40,354	\$11,316,059	1.00	\$11,340,059	\$303.74	4.6%
201307	25,551	40,481	\$13,826,206	1.00	\$13,865,282	\$307.36	4.5%
201308	25,836	40,969	\$12,707,649	1.00	\$12,761,199	\$308.12	4.4%
201309	25,931	41,107	\$12,352,388	0.99	\$12,425,946	\$309.79	5.2%
201310	25,875	41,086	\$13,188,057	0.99	\$13,317,643	\$311.06	4.7%
201311	26,103	41,553	\$12,201,777	0.99	\$12,379,014	\$313.21	6.4%
201312	26,846	42,793	\$12,265,685	0.98	\$12,542,580	\$314.89	7.2%
201401	27,338	44,096	\$13,180,367	0.95	\$13,889,358	\$314.09	6.1%
201402	26,670	43,171	\$10,376,877	0.85	\$12,229,659	\$312.67	6.1%
201403	25,831	41,851	\$7,292,726	0.51	\$14,215,201	\$311.78	4.8%
Experience Period							
	306,279	486,285	\$152,272,023	0.99	\$153,126,148		
201303	24,950	39,658					3.2%
201309	25,931	41,107					5.2%
201312	26,846	42,793					7.2%
Avg last 6 months	26,024	41,332					5.4%

**CareFirst BlueCross BlueShield
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

BC Trend Support - Individual, non-Medigap & Small Group Combined

	Total Allowed*	Experience Period Actual Trend*		Projection Period Trend		Difference Proj vs. Exp trend	
		6 Mth Average of R12 Trends		Unit Cost	Utilization	Unit Cost	Utilization
Inpatient	\$ 29,354,475	9.0%	-0.6%	7.0%	1.0%	-2.0%	1.6%
Outpatient	\$ 26,666,931	9.3%	-1.8%	9.5%	0.0%	0.2%	1.8%
Professional	\$ 51,117,073	-0.2%	3.2%	0.0%	4.5%	0.2%	1.3%
Other	\$ 6,249,527	-0.4%	8.5%	0.0%	6.0%	0.4%	-2.5%
Rx	\$ 39,738,141	5.2%	-0.4%	7.0%	1.0%	1.8%	1.4%
Total	\$ 153,126,148	4.6%	0.9%	4.8%	2.2%	0.2%	1.3%

Claims-Weighted Total Trend (Cost & Utilization combined) 5.6% 7.1% 1.5%
Total Trend from Allowed PMPM Projection Pages (Incl Capitations, Excl GF SG business) 7.0%

* Includes grandfathered Small Group business.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Morbidity Impact on Small Group/Individual HMO/PPO combined

The current combined Individual/Small Group non-Grandfathered pool is expected to increase from approximately 72,700 members today to approximately 94,000 members in 2015. This 21,300 member increase is expected to come from an influx of the following new entrants:

- a) Prior IND64- grandfathered members (Underwritten, HIPAA, Group Conversion, Open Enrollment) - ~1,100 members
- b) Former large group enrollees - ~2,000 members
- c) Former small group enrollees - ~500 members
- d) Newly insured entrants who were formerly uninsured - ~3,000 members
- e) Congress - ~10,100 members
- f) Competitors - ~4,600 members

The estimated average morbidity of these 21,300 new entrants is approximately 0.99 compared to the current Small Group/Individual merged pool and when blended with the 1.00 morbidity of the current pool, yields a resultant 2015 morbidity of 1.00 in relation to the current non-Grandfathered pool.

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

DC Combined - Small Group & Individual Capitations

<u>BlueChoice</u>	<u>Description</u>	<u>1/1/13</u> <u>PMPM</u>	<u>1/1/14</u> <u>PMPM</u>	<u>Δ</u>
	Mental Health UR	\$0.94	\$0.03	-96.5%
	Nurse Hotline	\$0.04	\$0.00	-100.0%
	Wellness*	\$0.21	\$0.00	-100.0%
	Vision	\$0.46	\$0.02	-95.6%
	TOTAL:	\$1.65	\$0.05	-96.8%

*The total capitation for Wellness is \$0.26, but only applies to members age 18+.

CAREFIRST BLUECROSS BLUESHIELD (CF)
PART III ACTUARIAL MEMORANDUM

1. GENERAL INFORMATION:

- A. **Company Legal Name:** BlueChoice, Inc. (NAIC # 96202). (BC).
- B. **Jurisdiction:** District of Columbia.
- C. **HIOS Issuer ID:** 86052.
- D. **Market:** Small Group (SG). In 2015 the 2014 Off Exchange benefits are being subsumed into On Exchange.
- E. **Effective Date:** 1/1/15 – 12/31/15.

- F. **Primary Contact Name:** Mr. Dwayne Lucado, F.S.A., M.A.A.A.
- G. **Primary Contact Telephone Number:** 410-998-7519.
- H. **Primary Contact E-Mail Address:** Dwayne.Lucado@CareFirst.com.

2. PROPOSED RATE INCREASE(S): In compliance with the “Patient Protection and Affordable Care Act” (ACA, H.R. 3590) and toward the same 2014 objectives of maximizing access and affordability, long-term financial viability and customer rate stability, CF is proposing to raise 1Q15 premiums by 12.9%, prior to age band changes. (For CF the proposed 1Q15 renewal is 12.4%.) The range is 10.1% to 14.9%. (For renewing customers, an age band change adds 2.6% to the renewal, on average, with a range of 0.0% to 3.9% for ages 22 and upwards per the DC age curve.) Since we are filing incremental quarterly trend increases for 2015, the 2Q15, 3Q15, and 4Q15 renewals are estimated to be 12.0%, 11.2%, and 10.4%, respectively.

3. EXPERIENCE PERIOD PREMIUM AND CLAIMS: The incurred period is 1/1/13 through 12/31/13, as required.

- A. **Paid Through Date:** 3/31/14.
- B. **Premiums (Net of Medical Loss Ratio (MLR) Rebate) in Experience Period:** \$137,679,176 (Merged Index Rate).
- C. **Allowed and Incurred Claims From Experience Period:** \$136,985,100 (Merged Index Rate).

4. BENEFIT CATEGORIES:

- A. Inpatient (hospital).
- B. Outpatient (hospital) (OP).
- C. Professional.
- D. Other Medical (non-capitated ambulance, home health care, durable medical equipment, prosthetics, supplies, vision exams, dental services and other).
- E. Prescription drug (Rx).
- F. Capitations.

5. PROJECTION FACTORS:

- A. **Changes in the Morbidity of the Population Insured:** For 2015, CareFirst estimates a morbidity factor that is almost identical to 2014’s projected morbidity. The morbidity risk factor projections are based upon the model that supported CareFirst’s 2014 rate filings. The model compares known and estimated allowed claims costs per member per month (PMPM) for 2013 to project the costs of various categories of the estimated 2015 membership.

These categories are based upon the prior status of the 2015 membership – previous CareFirst members (medically underwritten “Individual Non-Medigap” (INM), Open Enrollment, HIPAA, Group Conversion, Groups (small and large including Congress)) and New Entrants sorted by income (i.e.,

> 200% of Federal Poverty Level (FPL)). As of 5/12/14, CF has enrolled approximately 10,000 members from Congress through the Small Business Health Options Program (SHOP). The prospect of offering of SHOP plans to Congress was not known at the time of the 2014 rate filings. This influx of Congressional members with an average age of 32.3 years versus 33.7 for SG and 36.1 for INM contributed to the decline in the morbidity factor. Congress is projected to represent ~12% of total enrollment with an ~10% improvement in the loss ratio leading to ~1% reduction to premiums. On 12/31/15 we are projecting about 23,000 CF INM members and 71,000 for CF SG for a total of approximately 94,000.

- B. **Changes in Benefits:** We are adding 3 new benefits to our portfolio bringing the total number of unique plans from 54 to 57 – 4 Bronze, 14 Silver (includes a new PPO \$1,000 deductible plan), 18 Gold (including a new BlueChoice Advantage \$500 deductible plan and a new PPO \$500 deductible plan), and 21 Platinum. We have recalculated the costs of “Essential Health Benefits” (EHB) as well as Non-EHBs.

The out-of-area (OOA) utilization for our Open Access Advantage (ADV) benefit which is tailored to groups with employees outside of our service area has been revised to 12.5% from 5% in 2014. This raised ADV rates more than others since OOA utilization incurs “interplan transfer services” (ITS), “Administrative Expense Allowance” (AEA) and BlueCard fees, for example.

Related to autism benefits, per the “Better Prices, Better Quality, Better Choices for Health Coverage Amendment Act of 2013” passed on 6/4/13 (D.C. Official Code § 31-3171.01, et seq.) we have calculated an increase in claims PMPM of \$1.74 for INM and \$5.15 for SG PMPM for 2015. This is largely for “Applied Behavioral Analysis” (ABA) treatments and is a D.C.-mandated benefit.

Attached exhibits detail adjustments for pediatric dental, mandatory generics, a new hepatitis C prescription drug, Sovaldi, and maternity.

- C. **Changes in Demographics:** Comparing the overall CareFirst member-level average age as of 12/31/12 to 3/31/14, we have seen an increase of 0.4 years from 33.8 to 34.2. For BlueChoice the increase is +0.6 from 33.7 to 34.3. For Group Hospitalization and Medical Services, Inc. (GHMSI) the increase is +0.2 years from 33.9 to 34.1.

For INM CF, the average age increased by 2.1 years from 34.0 to 36.1. For BlueChoice the increase is +1.8 from 34.2 to 36.0. For GHMSI the increase is +2.4 years from 33.9 to 36.3.

Age factors will account for a portion of the corresponding increase in claims cost. We find the CMS age curve spread of “3 to 1” to be lower than the “4.5 to 1” that is more correlated with expected claims costs. We have therefore adjusted expected claims costs accordingly in the “experience period” (EP) index rate projection in the “other” category.

- D. **Other Adjustments:** CareFirst (CF) is proposing to introduce an incentive program (IP) whereby members can earn medical expense debit cards of as much as \$150 annually, for an individual (\$400 for a family). The cards must be utilized for qualified medical expenses such as deductibles, copays, and out-of-pocket costs. The scope includes all metaleed benefit plans within CF’s portfolio. This is being done in a revenue-neutral way. That is, the costs to CF of the incentive payments were chosen such that they match the expected savings to CF from more efficacious health care delivery. “HealthyBlue” (HB) was first launched effective 10/1/10 with the objective of motivating and rewarding greater engagement by the member in his or her health, improved wellness and prevention and better provider coordination and quality. As we sought to respond to feedback about HB, subsequent versions were released on 1/1/12 and 10/1/12. This IP represents an evolution of the HB concept. Further, it joins the tenets of HB with our “Patient Centered Medical Home” (PCMH) program which was launched in January, 2011.

The savings has been incorporated in the "Other" category when projecting the EP index rate. The cost of the incentive has been included in "general and administrative expenses." Our aim is that this IP will improve our members' health.

Included in this calculation are decreases to claims costs for 1) a change in our "Pharmacy Benefits Manager" (PBM) in 2014 and 2) a reduction in our fee schedule for out-of-network (OON) utilization for HMO-based products that have an OON option (a.k.a., "NP3").

- E. **Trend Factors (Cost/Utilization):** The proposed trend of 7.0% is a reduction of 200 basis points from 2014's 9.0%.

6. CREDIBILITY MANUAL RATE DEVELOPMENT:

- A. **Source and Appropriateness of Experience Data Used:** The calendar 2013 base data includes 438,476 member months (average monthly of 36,540) and is therefore considered 100% credible.
- B. **Adjustments Made to the Data:** Non-EHBs (adult vision and abortion) were removed to develop the index rate.
- C. **Inclusion of Capitation Payments:** A new exhibit lists all capitations.

7. **PAID TO ALLOWED RATIO:** Projected at 80.4%, on average.

8. RISK ADJUSTMENT AND REINSURANCE:

- A. **Projected Risk Adjustments PMPM:**+\$24 PMPM for 1Q15. This is based on an analysis of the market by Wakely Consulting where CF's normalized risk scores for BC and GHMSI are 0.92 and 1.08. We have applied these percentages to our projected index rates for each quarter of 2015 to translate the risk score into a PMPM. We gave 75% credibility to the Wakely numbers. A risk transfer payment has been shown on our exhibit demonstrating MLR compliance.
- B. **Projected ACA Reinsurance Recoveries Net of Reinsurance Premium (Individual Market and Combined Markets Only):** Not applicable.

9. **NON-BENEFIT EXPENSES AND CONTRIBUTION TO RESERVE (CtR):** The 2015 "desired incurred claims ratio" (DICR) has decreased from 76.9% (2014) to 72.7% due primarily to the medical expense debit card issue described in "Other Adjustments" above.

A. **Administrative Expense Load:** G&A PMPMs increased by 3% versus 2014.

B. **CtR & Risk Margin:** Pre-tax CtR is 2.0% versus 3.0% in 2014.

C. Taxes and Fees:

- Community Health Investment of 2.0%.
- Federal Income Tax (FIT) of 0.7% (35% FIT rate).
- Health Insurer Fee increased 90 basis points to 3.2% considering non-deductibility for tax purposes.
- Patient-Centered Outcomes Research Institute (PCORI) of \$2.11 PMPY (\$0.18 PMPM).
- Reinsurance Payments decreased from \$5.25 PMPM to \$3.60 PMPM.
- Risk Adjustment User Fees remained at \$0.08 PMPM.
- Reinsurance Administrative Fee is \$0.11 PMPM.
- Exchange Assessment Fee of 1.0% for 2015 and 1.0% for 2014 per the "Health Benefit Exchange Authority Financial Sustainability Emergency Amendment Act of 2014" (D.C. Act 20-329) approved on 5/22/14. In addition, there is an additional state assessment fee of 0.1%.

10. **PROJECTED LOSS RATIO:** Our projected DICR for MLR purposes is 85.1%, meeting the 80.0% minimum of "Public Health Service Act" (PHSA) 218. For testing we used the combined experience of INM and SG.
11. **SINGLE RISK POOL (SRP):** Our SRP reflects all covered lives for every non-grandfathered product in our market per 45 CFR Part § 156.80 (d). There are no transitional policies for CareFirst in D.C. This encompasses INM Open Enrollment, HIPAA, Group Conversion, and formerly medically underwritten coverages as well as SGs.
12. **INDEX RATE:** The EP index rate is a key component driving the renewal. Last year's implicit 2013 index rate was \$329 (\$302 + trend of 9.0%). The actual for 2013 is \$312 for a favorable variance of -5%.

For BlueChoice the experience period index rates for INM, SG and INM+SG are \$370, \$306 and \$312, respectively. By using the merged index rate, INM goes down by -16% (i.e., \$312 versus \$370) and SG goes up by +2% (i.e., \$312 versus \$306).

For CF the experience period index rates for INM, SG and INM+SG are \$290, \$372 and \$364, respectively. By using the merged index rate, INM goes up by +26% (i.e., \$364 versus \$290) and SG goes down by -2% (i.e., \$364 versus \$372).

The ratio of our composite PPO to HMO rate was 1.16 in 2014. 2015 filings maintain this ratio.

Retail Clinics will have reduced copays to match the Primary Care Provider (PCP) rather than specialist copay with negligible price impact.

13. **MARKET ADJUSTED INDEX RATE:** A summary exhibit is provided.
14. **PLAN ADJUSTED INDEX RATES:** Network factors composite to 1.00. The "cost-share" factor includes 1) pricing AVs, 2) H.S.A./Non-H.S.A. factors, and 3) benefit generosity. There are 4 types of network factors for BC plans – Lock In / Referral, Open Access, Open Access Plus, and Open Access Advantage.
15. **CALIBRATION:** Done for age and geography but we have elected not to rate for tobacco usage. Capping dependents under the age of 21 at 3 is implicit in the calibration.
16. **CONSUMER ADJUSTED PREMIUM RATE DEVELOPMENT:** A summary exhibit is provided.
17. **HHS ACTUARIAL METAL VALUES (AV):** The 2014 Federal calculator was used exclusively without major modifications. Thirty-one of the thirty-six BlueChoice plans required minor modifications to the AV inputs. These plans have copays on OP facility and/or OP Surgery Physician/Surgical Services, which are not accommodated by the AV calculator. Equivalent coinsurances were computed using the AV calculator continuance tables so that an input could be entered.

For the following plan designs, a subset of generic drugs are not subject to the integrated medical and drug deductible: HealthyBlue HMO HSA/HRA \$2,000, HealthyBlue Plus HSA/HRA \$2,000, and HealthyBlue Advantage HSA/HRA \$2,000. As such, these are considered unique plan designs. For these plans, a baseline AV was calculated assuming the deductible applies to all generic drugs. A second AV was calculated assuming no generic drugs are subject to the deductible. A proportion of this difference based on the ratio of the allowed costs of the applicable generic drugs to the allowed costs of all generic drugs was added to the baseline.

Printouts for each plan are provided as part of the QHP binder submission under separate cover.

18. **AV PRICING VALUES:** We have updated our internal AV model with the latest experience and with corrections for computing effective coinsurance for emergency room (ER) and inpatient hospital care. The

result was a needed upward adjustment of ~6% to allowed claims which we are proposing to grade in by using a 50%/50% blend of the 2014 and 2015 AVs.

19. **MEMBERSHIP PROJECTIONS:** We had projected 39% of enrollment in HMO-based plans as of 12/31/14 in our 2014 filings. Actual data as of 5/12/14 indicate that HMO will comprise 42% of our CF members. Approximately 75% of actual YTD enrollment is in Gold plans. We incorporated this in projecting 12/31/15 enrollment. As of 5/12/14 we have 6,205 INM members in metaled products and 16,960 SG members in metaled products.
20. **TERMINATED PRODUCTS:** Not applicable.
21. **PLAN TYPE:** HMO and POS.
22. **WARNING ALERTS:** Per the District's instructions, the index rate was developed with combined Small Group/Individual experience which is entered on Worksheet 1 of the URRT, but the plan level rates were developed separately as the markets are remaining separate from the federal perspective. Therefore, Worksheet 2 has only the Small Group market's plan data, and most of the warnings have been triggered because the Small Group totals on Worksheet 2 are less than the combined Small Group/Individual totals on Worksheet 1.
23. **RELIANCE:** None.

**BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)**

**Rate Filing # 1958
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015**

Actuarial Memorandum

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

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BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015

Form Numbers

Form Numbers Associated With This Filing:

This list contains the applicable forms for the new and renewing products. Some of these are also used with other products, which may be open or closed to new sales. These forms are used with products that are both grandfathered and non-grandfathered.

The SERFF Tracking # for the corresponding form filing On Exchange is as follows:
 CFBC-129539810

Forms Used for ALL ON-Exchange BlueChoice Group Products

DC/CFBC/SHOP/GC (1/14)
 DC/CFBC/DOL APPEAL (R. 7/11)
 DC/CFBC/SHOP/ELIG (1/14)
 DC/CFBC/FAM PLAN (8/12)
 DC/CFBC/PARTNER (R. 7/09)
 DC/CFBC/PT PROTECT (9/10)
 DC/CFBC/SHOP/2015 GC AMEND (1/15)
 DC/CFBC/SHOP/2015 AMEND (1/15)

Forms Used for ALL ON-Exchange BlueChoice Group Products: Out-of-Network Forms (GHMSI)

DC/CF/SHOP/GC (1/14)
 DC/CF/SHOP/ADV OON/EOC (1/14)
 DC/GHMSI/DOL APPEAL (R. 11/11)
 DC/CF/SHOP/EXC/DOCS (1/14)
 DC/GHMSI/FAM PLAN (8/12)
 DC/CF/PARTNER (R. 7/09)
 DC/CF/BLCRD (1/12)
 DC/CF/MEM/BLCRD (1/12)
 DC/CF/ANCILLARY AMEND (10/12)
 DC/CF/PT PROTECT (9/10)
 DC/GHMSI-HEALTH GUARANTEE 2/08
 DC/CF/SHOP/2015 GC AMEND (1/15)
 DC/CF/SHOP/2015 AMEND (1/15)

Product: BlueChoice Plus (Plans: 100%/80%, \$20/\$30 and 100%/60%, \$20/\$30)

Network: Open Access

DC/CFBC/SHOP/EOC (1/14)
 DC/CFBC/BCOO/DOCS (1/14)
 DC/CFBC/BLCRD (1/12)
 DC/CFBC/MEM/BLCRD (1/12)
 DC/CFBC/BC+ OOOA/10080/SOB (R. 1/15)
 DC/CFBC/BC+ OOOA/10060/SOB (R. 1/15)
 DC/CFBC/HMO/INCENT (1/15)

ON-Exchange

Product: BlueChoice Advantage

In-Network

DC/CFBC/SHOP/ADV IN/EOC (1/14)
 DC/CFBC/HB/SHOP/EXC/DOCS (1/14)
 DC/CFBC/SHOP/ADV IN/PLAT SOB (1/14)
 DC/CFBC/ADV IN/IPP GRP (1/14)
 DC/CFBC/ADV IN/IPP MEM (1/14)
 DC/CFBC/ANCILLARY AMEND (10/12)
 DC/CFBC/ADV CDH IN/1500/SOB (R. 1/15)
 DC/CFBC/ADV IN/8050/SOB (R. 1/15)
 DC/CFBC/ADV IN/10070SOB (R. 1/15)
 DC/CFBC/ADV/1000/INN/SOB (R. 1/15)
 DC/CFBC/ADV/500/INN/SOB (1/15)
 DC/CFBC/ADV IN/INCENT (1/15)

Product: BlueChoice Plus (All Other Plans)

In-Network

DC/CFBC/SHOP/EOC (1/14)
 DC/CFBC/SHOP/EXC/DOCS (1/14)
 DC/CFBC/BLCRD (1/12)
 DC/CFBC/MEM/BLCRD (1/12)
 DC/CFBC/BC+ OOP IN/1500/ SOB (R. 1/15)
 DC/CFBC/BC+ OOP IN CDH/2000/ SOB (R. 1/15)
 DC/CFBC/BC+ OOP IN/3500/SOB (R. 1/15)
 DC/CFBC/BC+ OOP IN/2000/SOB (R. 1/15)
 DC/CFBC/BC+ OOP IN/10080/SOB (R. 1/15)
 DC/CFBC/POS IN/INCENT (1/15)

Product: HealthyBlue Plus

In-Network

DC/CFBC/SHOP/ADV IN/EOC (1/14)
 DC/CFBC/HB/SHOP/EXC/DOCS (1/14)
 DC/CFBC/BLCRD (1/12)
 DC/CFBC/MEM/BLCRD (1/12)
 DC/CFBC/HB PLUS 300 IN SOB (R. 1/15)
 DC/CFBC/HB PLUS 600 IN SOB (R. 1/15)
 DC/CFBC/HB PLUS 1500 IN SOB (R. 1/15)
 DC/CFBC/HB PLUS 2000 IN SOB (R. 1/15)
 DC/CFBC/POS IN/INCENT (1/15)

Product: BlueChoice Advantage

Out-of-Network (GHMSI)

DC/CF/ADV OON/PLAT SOB (R. 1/15)
 DC/CF/BC ADV CDH OON/1500/ SOB (R. 1/15)
 DC/CF/BC ADV OON/8050/ SOB (R. 1/15)
 DC/CF/BC ADV/1000/OON/SOB (R. 1/15)
 DC/CF/BC ADV OON/10070/SOB (R. 1/15)
 DC/CF/BC ADV/500/OON/SOB (1/15)

Product: BlueChoice Plus (All Other Plans)

Out-of-Network (GHMSI)

DC/CF/BC+ OOP OON/1500/SOB (R. 1/15)
 DC/CF/BC+ OOP OON CDH/2000/SOB (R. 1/15)
 DC/CF/BC+ OOP OON/3500/SOB (R. 1/15)
 DC/CF/BC+ OOP OON/2000/SOB (R. 1/15)
 DC/CF/BC+OOP OON/10080/SOB (R. 1/15)

Product: HealthyBlue Plus

Out-of-Network (GHMSI)

DC/CF/HB PLUS 300 SOB (R. 1/15)
 DC/CF/HB PLUS 600 SOB (R. 1/15)
 DC/CF/HB PLUS 1500 SOB (R. 1/15)
 DC/CF/HB PLUS 2000 SOB (R. 1/15)

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015

Form Numbers

Form Numbers Associated With This Filing:

This list contains the applicable forms for the new and renewing products. Some of these are also used with other products, which may be open or closed to new sales. These forms are used with products that are both grandfathered and non-grandfathered.

The SERFF Tracking # for the corresponding form filing On Exchange is as follows:
 CFBC-129539810

ON-Exchange (continued)

Product: BlueChoice HMO and BlueChoice HMO Open Access
Network: Lock In / Referral (HMO), Open Access (HMO Open Access)

DC/CFBC/SHOP/EOC (1/14)
 DC/CFBC/SHOP/EXC/DOCS (1/14)
 DC/CFBC/BCOA/GOLD SOB (R. 1/15)
 DC/CFBC/BCOA/SIL SOB (R. 1/15)
 DC/CFBC/HMO/BRZ SOB (R. 1/15)
 DC/CFBC/BLCRD (1/12)
 DC/CFBC/MEM/BLCRD (1/12)
 DC/CFBC/HMO/1020/SOB (R. 1/15)
 DC/CFBC/HMO/3040/SOB (R. 1/15)
 DC/CFBC/HMO/250/SOB (R. 1/15)
 DC/CFBC/HMO OA/3040/SOB (R. 1/15)
 DC/CFBC/HMO OA/500/SOB (R. 1/15)
 DC/CFBC/HMO OA HRA/1800/SOB (R. 1/15)
 DC/CFBC/HMO OA CDH/1500/SOB (R. 1/15)
 DC/CFBC/HMO OA CDH /2000/SOB (R. 1/15)
 DC/CFBC/HMO/INCENT (1/15)

Product: HealthyBlue HMO
Network: Open Access

DC/CFBC/SHOP/EOC (1/14)
 DC/CFBC/HMO/DOCS (1/14)
 DC/CFBC/BLCRD (1/12)
 DC/CFBC/MEM/BLCRD (1/12)
 DC/CFBC/HB HMO/300 SOB (R. 1/15)
 DC/CFBC/HB HMO/600 SOB (R. 1/15)
 DC/CFBC/HB HMO/1500 SOB (R. 1/15)
 DC/CFBC/HB HMO/2000 SOB (R. 1/15)
 DC/CFBC/HMO/INCENT (1/15)

Product: HealthyBlue Advantage
In-Network

DC/CFBC/SHOP/ADV IN/EOC (1/14)
 DC/CFBC/HB/SHOP/EXC/DOCS (1/14)
 DC/CFBC/ADV IN/IPP GRP (1/14)
 DC/CFBC/ADV IN/IPP MEM (1/14)
 DC/CFBC/ANCILLARY AMEND (10/12)
 DC/CFBC/HB ADV 300 IN SOB (R. 1/15)
 DC/CFBC/HB ADV 600 IN SOB (R. 1/15)
 DC/CFBC/HB ADV 1500 IN SOB (R. 1/15)
 DC/CFBC/HB ADV 2000 IN SOB (R. 1/15)
 DC/CFBC/ADV IN/INCENT (1/15)

Product: HealthyBlue Advantage
Out-of-Network (GHMSI)

DC/CF/HB ADV 300 SOB (R. 1/15)
 DC/CF/HB ADV 600 SOB (R. 1/15)
 DC/CF/HB ADV 1500 SOB (R. 1/15)
 DC/CF/HB ADV 2000 SOB (R. 1/15)

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Acronym	Definition
SHOP	Small Business Health Options Program
CF	CareFirst BlueCross BlueShield
BC	CareFirst BlueChoice, Inc.
GHMSI	Group Hospitalization and Medical Services, Inc.
SG	Small Group
IND64-, INM	Individual, Non-Medigap
CD	Consumer Direct (Individual, Non-Medigap)
AV	Actuarial Value
EHB	Essential Health Benefits
FPL	Federal Poverty Level
GF	Grandfathered
HIPAA	Health Insurance Portability and Accountability Act
RBC	Risk-based Capital
SRP	Single Risk Pool
UW	Underwritten
Med	Medical
Rx	Prescription Drugs
CDH	Consumer Driven Health
Non-CDH	Non-Consumer Driven Health
HSA	Health Savings Account
HRA	Health Reimbursement Account
HDHP	High Deductible Health Plan
HMO	Health Maintenance Organization
HMO OA	Health Maintenance Organization Open Access
OO OA	Opt Out Open Access
POS OA	Point of Service Open Access (aka Opt-Out Plus Open Access)
HB	HealthyBlue
EP	Experience Period
DICR	Desired Incurred Claims Ratio
MLR	Medical Loss Ratio (as defined by PPACA)
IBNR	Incurred But Not Reported
PCP	Primary Care Physician
ER	Emergency Room
In-Net	In-Network
OON	Out of Network
IP, In Pat	Inpatient
OP	Outpatient
Prof	Professional
OOP	Out of Pocket
Co-ins	Coinsurance
MHSA	Mental Health & Substance Abuse
RPN	Regional Preferred Network
ABA	Applied Behavioral Analysis

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015
Actuarial Certification

I, Dwayne Lucado, am the Director of Actuarial Pricing with CareFirst BlueCross BlueShield of which CareFirst BlueChoice, Incorporated is a subsidiary. I am a member of the American Academy of Actuaries. I have been involved in the development of these rates in accordance with applicable laws and regulations of the District of Columbia. Further, to the best of my knowledge and understanding, the rates in this filing have been developed in accordance with the available regulations and guidance for the small group employer market (On Exchange) in the District of Columbia for business effective post 1/1/2015. The actuarial values (AV) of the benefits proposed have been calculated with minimal necessary modifications to the HHS AV calculator. Further, the index rate has been developed based on my best understanding of the available regulations, guidance, and sound actuarial practice. I certify the following:

1. I am a member in good standing with the American Academy of Actuaries.
2. The projected index rate complies with applicable statutes based on my best understanding of the available guidance and sound actuarial practice and is in accordance with applicable actuarial standards including ASOP 8. The Actuarial Memorandum has been developed following the format and content prescribed in the CCIIO instructions for Part III - Actuarial Memorandum.
3. The projected index rate is reasonable in relation to the projected benefits and the projected population and is neither excessive nor deficient.
4. The plan level rates are developed based only on allowed index rate modifiers in accordance with 45 CFR 156.80(d)(1) and (2) and have been calibrated to account for prescribed rating factors.
5. The percent of total premiums related to Essential Health Benefits has been estimated based on sound actuarial practice.
6. The Actuarial Values have been calculated using the HHS calculator with minimal modification, which has been discussed in the Actuarial Memorandum included in this filing.

I further certify that the information in this filing represents the company's best understanding of the available guidance and regulations with regard to the rating of these products. This filing will be revised as applicable as any new guidance is released.

This filing has been prepared in accordance with the applicable Actuarial Standards of Practice.

Dwayne Lucado, FSA, MAAA
Director, Actuarial Pricing
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BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015

Affected HIOS IDs*

HIOS Product ID	HIOS Product Name	HIOS Plan ID	HIOS Plan Name	On/Off Exchange	Product Type	Abortion Coverage	Actuarial Value 2014-2015	Metal Level	Unique Plan	Projected Contracts 12/31/15
86052DC049	BlueChoice HMO Referral HSA/HRA	86052DC0490001	BlueChoice HMO Referral HSA/HRA \$4,000	On	HMO	Yes	61.18%	Bronze	No	35
86052DC047	BlueChoice HMO HSA/HRA	86052DC0470002	BlueChoice HMO HSA/HRA \$2,000, 80%	On	HMO	Yes	70.90%	Silver	No	56
86052DC046	BlueChoice HMO	86052DC0460003	BlueChoice HMO \$1,000	On	HMO	Yes	78.47%	Gold	No	82
86052DC044	BlueChoice Advantage	86052DC0440004	BlueChoice Advantage 90%/70%	On	POS	Yes	90.26%	Platinum	No	28
86052DC047	BlueChoice HMO HSA/HRA	86052DC0470005	BlueChoice HMO HSA/HRA \$1,500	On	HMO	Yes	79.69%	Gold	No	391
86052DC047	BlueChoice HMO HSA/HRA	86052DC0470006	BlueChoice HMO HSA/HRA \$2,000	On	HMO	Yes	71.94%	Silver	No	292
86052DC046	BlueChoice HMO	86052DC0460008	BlueChoice HMO \$1,800	On	HMO	Yes	78.15%	Gold	No	56
86052DC048	BlueChoice HMO Referral	86052DC0480004	BlueChoice HMO Referral \$10/\$20	On	HMO	Yes	90.60%	Platinum	No	360
86052DC048	BlueChoice HMO Referral	86052DC0480006	BlueChoice HMO Referral \$30/\$40	On	HMO	Yes	88.31%	Platinum	No	906
86052DC048	BlueChoice HMO Referral	86052DC0480005	BlueChoice HMO Referral \$500	On	HMO	Yes	78.77%	Gold	No	278
86052DC046	BlueChoice HMO	86052DC0460006	BlueChoice HMO \$250	On	HMO	Yes	81.86%	Gold	No	1,480
86052DC046	BlueChoice HMO	86052DC0460007	BlueChoice HMO \$30/\$40	On	HMO	Yes	88.31%	Platinum	No	761
86052DC044	BlueChoice Advantage	86052DC0440006	BlueChoice Advantage 80%/50%	On	POS	Yes	88.76%	Platinum	No	13
86052DC044	BlueChoice Advantage	86052DC0440007	BlueChoice Advantage 100%/70%	On	POS	Yes	88.37%	Platinum	No	306
86052DC044	BlueChoice Advantage	86052DC0440008	BlueChoice Advantage \$1000	On	POS	Yes	78.69%	Gold	No	1,534
86052DC044	BlueChoice Advantage	86052DC0440009	BlueChoice Advantage \$500 \$20/\$30	On	POS	Yes	78.51%	Gold	No	62
86052DC045	BlueChoice Advantage HSA/HRA	86052DC0450002	BlueChoice Advantage HSA/HRA \$1500	On	POS	Yes	70.35%	Silver	No	278
86052DC050	BlueChoice Plus	86052DC0500005	BlueChoice Plus \$2000	On	POS	Yes	71.88%	Silver	No	23
86052DC050	BlueChoice Plus	86052DC0500008	BlueChoice Plus 100%/80%, \$10/\$20	On	POS	Yes	89.10%	Platinum	No	448
86052DC050	BlueChoice Plus	86052DC0500006	BlueChoice Plus 100%/80%, \$20/\$30	On	POS	Yes	88.62%	Platinum	No	1,531
86052DC050	BlueChoice Plus	86052DC0500007	BlueChoice Plus 100%/60%, \$20/\$30	On	POS	Yes	88.62%	Platinum	No	322
86052DC051	BlueChoice Plus HSA/HRA	86052DC0510004	BlueChoice Plus HSA/HRA \$1500	On	POS	Yes	71.67%	Silver	No	212
86052DC051	BlueChoice Plus HSA/HRA	86052DC0510005	BlueChoice Plus HSA/HRA \$2000	On	POS	Yes	68.90%	Silver	No	19
86052DC051	BlueChoice Plus HSA/HRA	86052DC0510006	BlueChoice Plus HSA/HRA \$3500	On	POS	Yes	61.62%	Bronze	No	219
86052DC054	HealthyBlue HMO	86052DC0540005	HealthyBlue HMO \$300	On	HMO	Yes	90.26%	Platinum	No	126
86052DC054	HealthyBlue HMO	86052DC0540006	HealthyBlue HMO \$600	On	HMO	Yes	89.81%	Platinum	No	2
86052DC054	HealthyBlue HMO	86052DC0540004	HealthyBlue HMO \$1,500	On	HMO	Yes	81.88%	Gold	No	378
86052DC055	HealthyBlue HMO HSA/HRA	86052DC0550002	HealthyBlue HMO HSA/HRA \$2,000	On	HMO	Yes	70.81%	Silver	Yes	240
86052DC056	HealthyBlue Plus	86052DC0560005	HealthyBlue Plus \$300	On	POS	Yes	90.26%	Platinum	No	584
86052DC056	HealthyBlue Plus	86052DC0560006	HealthyBlue Plus \$600	On	POS	Yes	89.81%	Platinum	No	142
86052DC056	HealthyBlue Plus	86052DC0560004	HealthyBlue Plus \$1,500	On	POS	Yes	81.88%	Gold	No	672
86052DC057	HealthyBlue Plus HSA/HRA	86052DC0570002	HealthyBlue Plus HSA/HRA \$2,000	On	POS	Yes	70.81%	Silver	Yes	93
86052DC052	HealthyBlue Advantage	86052DC0520005	HealthyBlue Advantage \$300	On	POS	Yes	90.26%	Platinum	No	249
86052DC052	HealthyBlue Advantage	86052DC0520006	HealthyBlue Advantage \$600	On	POS	Yes	89.81%	Platinum	No	5
86052DC052	HealthyBlue Advantage	86052DC0520004	HealthyBlue Advantage \$1,500	On	POS	Yes	81.88%	Gold	No	5,860
86052DC053	HealthyBlue Advantage HSA/HRA	86052DC0530002	HealthyBlue Advantage HSA/HRA \$2,000	On	POS	Yes	70.81%	Silver	Yes	70

*BlueChoice Advantage \$500 \$20/\$30 is a new plan effective 1/1/15. All other plans were new effective 1/1/14.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

2015 ACA – RATE CHANGES AT PRODUCT/METAL LEVEL
SMALL GROUP - DC BC

1	2	3	4			5	6	7	8	9-12				13	14-17				18	19	20	21	22
			Members							Projected 1Q15 EMMs	HHS 2014 AV	Base Premium				HHS 2015 AV	Base Premium						
Metal	Product	Actual 3/31/14	Projected 12/31/14	Projected 12/31/15	% of Actual Total	Projected 1Q15 EMMs	HHS 2014 AV	1Q14	2Q14			3Q14	4Q14	HHS 2015 AV	1Q15		RNL	2Q15	RNL	3Q15	RNL	4Q15	RNL
ON																							
1	Platinum	BlueChoice Advantage	133	868	561	2.2%	1,944	0.885	\$435	\$444	\$454	\$463	0.885	\$489	12.4%	\$495	11.5%	\$502	10.7%	\$509	9.9%	5.6%	
2	Platinum	BlueChoice HMO	268	3,160	1,230	4.4%	4,284	0.883	\$421	\$429	\$438	\$448	0.883	\$468	11.3%	\$474	10.4%	\$481	9.6%	\$487	8.8%	4.6%	
3	Platinum	BlueChoice HMO Referral	371	6,044	2,045	6.1%	7,116	0.890	\$404	\$413	\$421	\$430	0.890	\$448	11.0%	\$454	10.1%	\$461	9.3%	\$467	8.5%	4.3%	
4	Platinum	BlueChoice Plus	643	8,551	3,716	10.6%	12,936	0.887	\$428	\$437	\$446	\$456	0.887	\$475	11.0%	\$481	10.1%	\$488	9.3%	\$494	8.5%	4.3%	
5	Platinum	HealthyBlue HMO	7	343	208	0.1%	720	0.903	\$408	\$417	\$425	\$434	0.903	\$457	12.0%	\$463	11.2%	\$470	10.4%	\$476	9.5%	5.3%	
6	Platinum	HealthyBlue Plus	188	829	1,172	3.1%	4,068	0.902	\$420	\$428	\$437	\$446	0.902	\$468	11.6%	\$474	10.7%	\$481	9.9%	\$487	9.1%	4.9%	
7	Platinum	HealthyBlue Advantage	44	438	412	0.7%	1,428	0.903	\$426	\$435	\$444	\$453	0.903	\$481	12.9%	\$487	12.1%	\$494	11.3%	\$500	10.4%	6.1%	
PLATINUM SUBTOTAL			1,654	20,233	9,345	27.3%	32,496	0.890	\$421	\$430	\$439	\$448	0.890	\$468	11.3%	\$474	10.4%	\$481	9.6%	\$487	8.8%	4.6%	
8	Gold	BlueChoice Advantage	578	47	2,578	9.5%	8,964	0.787	\$342	\$349	\$356	\$364	0.787	\$384	12.1%	\$389	11.3%	\$394	10.5%	\$400	9.6%	9.6%	
9	Gold	BlueChoice HMO	502	1,015	2,615	8.3%	9,108	0.816	\$350	\$357	\$364	\$372	0.816	\$394	12.8%	\$399	11.9%	\$405	11.1%	\$410	10.3%	5.9%	
10	Gold	BlueChoice HMO Referral	98	467	449	1.6%	1,560	0.788	\$325	\$332	\$339	\$346	0.788	\$363	11.8%	\$368	11.0%	\$373	10.2%	\$378	9.3%	5.1%	
11	Gold	BlueChoice HMO HSA/HRA	186	1,516	698	3.1%	2,424	0.797	\$311	\$318	\$324	\$331	0.797	\$343	10.1%	\$347	9.3%	\$352	8.5%	\$357	7.7%	3.5%	
12	Gold	HealthyBlue HMO	150	31	611	2.5%	2,124	0.819	\$329	\$336	\$343	\$350	0.819	\$375	14.0%	\$379	13.1%	\$385	12.3%	\$390	11.4%	7.1%	
13	Gold	HealthyBlue Plus	255	31	1,085	4.2%	3,768	0.819	\$339	\$346	\$353	\$361	0.819	\$385	13.6%	\$390	12.7%	\$396	11.9%	\$401	11.1%	6.8%	
14	Gold	HealthyBlue Advantage	2,224	27	9,466	36.7%	32,916	0.819	\$343	\$350	\$357	\$365	0.819	\$394	14.9%	\$399	14.0%	\$404	13.2%	\$410	12.3%	7.9%	
GOLD SUBTOTAL			3,993	3,134	17,501	65.9%	60,864	0.812	\$341	\$348	\$356	\$363	0.812	\$388	13.8%	\$393	12.9%	\$399	12.1%	\$404	11.3%	7.5%	
15	Silver	BlueChoice HMO HSA/HRA	113	647	620	1.9%	2,160	0.718	\$261	\$266	\$272	\$278	0.718	\$293	12.2%	\$296	11.3%	\$300	10.5%	\$304	9.6%	5.4%	
16	Silver	BlueChoice Advantage HSA/HRA	40	66	495	0.7%	1,716	0.703	\$280	\$286	\$292	\$298	0.703	\$318	13.3%	\$322	12.5%	\$326	11.6%	\$331	10.8%	6.5%	
17	Silver	BlueChoice Plus	8	10	37	0.1%	132	0.719	\$285	\$291	\$297	\$303	0.719	\$320	12.4%	\$324	11.5%	\$329	10.7%	\$333	9.9%	5.6%	
18	Silver	BlueChoice Plus HSA/HRA	73	323	412	1.2%	1,440	0.714	\$282	\$288	\$294	\$300	0.714	\$314	11.3%	\$318	10.4%	\$322	9.6%	\$327	8.8%	4.5%	
19	Silver	HealthyBlue HMO HSA/HRA	91	34	428	1.5%	1,488	0.708	\$255	\$261	\$266	\$272	0.708	\$291	13.8%	\$294	12.9%	\$298	12.1%	\$302	11.2%	6.9%	
20	Silver	HealthyBlue Plus HSA/HRA	30	25	166	0.5%	576	0.708	\$263	\$269	\$275	\$280	0.708	\$299	13.4%	\$303	12.5%	\$307	11.7%	\$311	10.9%	6.6%	
21	Silver	HealthyBlue Advantage HSA/HRA	27	36	125	0.4%	432	0.708	\$266	\$272	\$278	\$283	0.708	\$305	14.7%	\$309	13.8%	\$314	13.0%	\$318	12.1%	7.8%	
SILVER SUBTOTAL			382	1,141	2,282	6.3%	7,944	0.711	\$269	\$274	\$280	\$286	0.711	\$303	12.8%	\$307	11.9%	\$311	11.1%	\$315	10.3%	6.0%	
22	Bronze	BlueChoice HMO Referral HSA/HRA	7	41	62	0.1%	216	0.612	\$198	\$203	\$207	\$211	0.612	\$219	10.4%	\$222	9.6%	\$225	8.8%	\$228	7.9%	3.8%	
23	Bronze	BlueChoice Plus HSA/HRA	27	30	391	0.4%	1,356	0.616	\$232	\$237	\$242	\$247	0.616	\$258	11.2%	\$261	10.3%	\$265	9.5%	\$268	8.7%	4.5%	
BRONZE SUBTOTAL			34	71	453	0.6%	1,572	0.616	\$227	\$232	\$237	\$242	0.616	\$252	11.1%	\$256	10.2%	\$259	9.4%	\$263	8.6%	4.4%	
BlueChoice Total			6,063	24,579	29,582	100%	102,876	0.826	\$359	\$367	\$374	\$382	0.826	\$405	12.9%	\$410	12.0%	\$416	11.2%	\$421	10.4%	6.4%	

LOW RENEWAL (Minimum): 10.1% 9.3% 8.5% 7.7%
HIGH RENEWAL (Maximum): 14.9% 14.0% 13.2% 12.3%

Note: The previous SERFF tracking number for BlueChoice DC Small Group (effective 1/1/2014) is CFAP-129047155 (On and Off Exchange).

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

2015 ACA – RATE CHANGES AT PRODUCT/METAL LEVEL
SMALL GROUP - DC

1	2	3	4	5	6	7	8	9				13	14				20	21	22			
								Members					HHS 2014 AV	Base Premium						HHS 2015 AV	Base Premium	
Metal	Product	Actual 1/31/14	Projected 12/31/14	Projected 12/31/15	% of Actual Total	Projected 1Q15 EMMs		1Q14	2Q14	3Q14	4Q14			1Q15	RNL	2Q15	RNL	3Q15	RNL		4Q15	RNL
ON																						
1	Platinum	BlueChoice Advantage	133	868	561	0.9%	1,944	0.885	\$435	\$444	\$454	\$463	0.885	\$489	12.4%	\$495	11.5%	\$502	10.7%	\$509	9.9%	5.6%
2	Platinum	BlueChoice HMO	268	3,160	1,230	1.7%	4,284	0.883	\$421	\$429	\$438	\$448	0.883	\$468	11.3%	\$474	10.4%	\$481	9.6%	\$487	8.8%	4.6%
3	Platinum	BlueChoice HMO Referral	371	6,044	2,045	2.4%	7,116	0.890	\$404	\$413	\$421	\$430	0.890	\$448	11.0%	\$454	10.1%	\$461	9.3%	\$467	8.5%	4.3%
4	Platinum	BlueChoice Plus	643	8,551	3,716	4.2%	12,936	0.887	\$428	\$437	\$446	\$456	0.887	\$475	11.0%	\$481	10.1%	\$488	9.3%	\$494	8.5%	4.3%
5	Platinum	HealthyBlue HMO	7	343	208	0.0%	720	0.903	\$408	\$417	\$425	\$434	0.903	\$457	12.0%	\$463	11.2%	\$470	10.4%	\$476	9.5%	5.3%
6	Platinum	HealthyBlue Plus	188	829	1,172	1.2%	4,068	0.902	\$420	\$428	\$437	\$446	0.902	\$468	11.6%	\$474	10.7%	\$481	9.9%	\$487	9.1%	4.9%
7	Platinum	HealthyBlue Advantage	44	438	412	0.3%	1,428	0.903	\$426	\$435	\$444	\$453	0.903	\$481	12.9%	\$487	12.1%	\$494	11.3%	\$500	10.4%	6.1%
8	Platinum	BluePreferred PPO	1,420	28,308	7,907	9.2%	28,272	0.888	\$511	\$517	\$523	\$530	0.888	\$565	10.7%	\$573	10.8%	\$581	11.0%	\$589	11.1%	6.7%
9	Platinum	HealthyBlue PPO	18	396	104	0.1%	372	0.901	\$493	\$499	\$505	\$512	0.901	\$547	11.1%	\$555	11.2%	\$562	11.3%	\$570	11.5%	7.0%
PLATINUM SUBTOTAL			3,092	48,937	17,356	20.1%	61,140	0.889	\$463	\$470	\$478	\$486	0.889	\$514	11.0%	\$520	10.6%	\$528	10.3%	\$535	9.9%	5.6%
10	Gold	BlueChoice Advantage	578	47	2,578	3.7%	8,964	0.787	\$342	\$349	\$356	\$364	0.787	\$384	12.1%	\$389	11.3%	\$394	10.5%	\$400	9.6%	9.6%
11	Gold	BlueChoice HMO	502	1,015	2,615	3.3%	9,108	0.816	\$350	\$357	\$364	\$372	0.816	\$394	12.8%	\$399	11.9%	\$405	11.1%	\$410	10.3%	5.9%
12	Gold	BlueChoice HMO Referral	98	467	449	0.6%	1,560	0.788	\$325	\$332	\$339	\$346	0.788	\$363	11.8%	\$368	11.0%	\$373	10.2%	\$378	9.3%	5.1%
13	Gold	BlueChoice HMO HSA/HRA	186	1,516	698	1.2%	2,424	0.797	\$311	\$318	\$324	\$331	0.797	\$343	10.1%	\$347	9.3%	\$352	8.5%	\$357	7.7%	3.5%
14	Gold	HealthyBlue HMO	150	31	611	1.0%	2,124	0.819	\$329	\$336	\$343	\$350	0.819	\$375	14.0%	\$379	13.1%	\$385	12.3%	\$390	11.4%	7.1%
15	Gold	HealthyBlue Plus	255	31	1,085	1.7%	3,768	0.819	\$339	\$346	\$353	\$361	0.819	\$385	13.6%	\$390	12.7%	\$396	11.9%	\$401	11.1%	6.8%
16	Gold	HealthyBlue Advantage	2,224	27	9,466	14.4%	32,916	0.819	\$343	\$350	\$357	\$365	0.819	\$394	14.9%	\$399	14.0%	\$404	13.2%	\$410	12.3%	7.9%
17	Gold	BluePreferred PPO	4,934	5,320	21,130	32.0%	75,564	0.814	\$399	\$404	\$409	\$414	0.814	\$448	12.3%	\$454	12.5%	\$460	12.6%	\$467	12.7%	12.7%
18	Gold	BluePreferred PPO HSA/HRA	638	2,686	2,569	4.1%	9,192	0.781	\$381	\$386	\$390	\$395	0.781	\$424	11.3%	\$429	11.4%	\$435	11.5%	\$441	11.6%	7.2%
19	Gold	BluePreferred Multi-State Plan	339	884	1,293	2.2%	4,620	0.799	\$401	\$406	\$411	\$416	0.799	\$443	10.5%	\$449	10.6%	\$455	10.7%	\$461	10.8%	6.4%
20	Gold	HealthyBlue PPO	1,748	35	7,267	11.3%	25,992	0.819	\$399	\$404	\$409	\$414	0.819	\$453	13.6%	\$460	13.8%	\$466	13.9%	\$472	14.0%	9.5%
GOLD SUBTOTAL			11,652	12,059	49,760	75.6%	176,232	0.812	\$378	\$384	\$390	\$396	0.812	\$427	12.9%	\$433	12.7%	\$438	12.5%	\$444	12.3%	10.0%
21	Silver	BlueChoice HMO HSA/HRA	113	647	620	0.7%	2,160	0.718	\$261	\$266	\$272	\$278	0.718	\$293	12.2%	\$296	11.3%	\$300	10.5%	\$304	9.6%	5.4%
22	Silver	BlueChoice Advantage HSA/HRA	40	66	495	0.3%	1,716	0.703	\$280	\$286	\$292	\$298	0.703	\$318	13.3%	\$322	12.5%	\$326	11.6%	\$331	10.8%	6.5%
23	Silver	BlueChoice Plus	8	10	37	0.1%	132	0.719	\$285	\$291	\$297	\$303	0.719	\$320	12.4%	\$324	11.5%	\$329	10.7%	\$333	9.9%	5.6%
24	Silver	BlueChoice Plus HSA/HRA	73	323	412	0.5%	1,440	0.714	\$282	\$288	\$294	\$300	0.714	\$314	11.3%	\$318	10.4%	\$322	9.6%	\$327	8.8%	4.5%
25	Silver	HealthyBlue HMO HSA/HRA	91	34	428	0.6%	1,488	0.708	\$255	\$261	\$266	\$272	0.708	\$291	13.8%	\$294	12.9%	\$298	12.1%	\$302	11.2%	6.9%
26	Silver	HealthyBlue Plus HSA/HRA	30	25	166	0.2%	576	0.708	\$263	\$269	\$275	\$280	0.708	\$299	13.4%	\$303	12.5%	\$307	11.7%	\$311	10.9%	6.6%
27	Silver	HealthyBlue Advantage HSA/HRA	27	36	125	0.2%	432	0.708	\$266	\$272	\$278	\$283	0.708	\$305	14.7%	\$309	13.8%	\$314	13.0%	\$318	12.1%	7.8%
28	Silver	BluePreferred PPO HSA/HRA	150	781	744	1.0%	2,664	0.718	\$327	\$331	\$335	\$339	0.718	\$368	12.6%	\$373	12.7%	\$378	12.8%	\$383	12.9%	8.4%
29	Silver	BluePreferred PPO	-	-	100	0.0%	360						0.720	\$409		\$415		\$421		\$426		
30	Silver	BluePreferred Multi-State Plan HSA/HRA	7	245	100	0.0%	360	0.709	\$320	\$324	\$328	\$332	0.709	\$355	11.0%	\$359	11.1%	\$364	11.2%	\$369	11.3%	6.9%
31	Silver	HealthyBlue PPO HSA/HRA	35	37	145	0.2%	516	0.708	\$321	\$325	\$329	\$333	0.708	\$364	13.2%	\$368	13.3%	\$373	13.4%	\$379	13.6%	9.1%
SILVER SUBTOTAL			574	2,204	3,372	3.7%	11,844	0.712	\$286	\$291	\$297	\$302	0.713	\$325	12.7%	\$329	12.1%	\$334	11.6%	\$338	11.1%	6.7%
32	Bronze	BlueChoice HMO Referral HSA/HRA	7	41	62	0.0%	216	0.612	\$198	\$203	\$207	\$211	0.612	\$219	10.4%	\$222	9.6%	\$225	8.8%	\$228	7.9%	3.8%
33	Bronze	BlueChoice Plus HSA/HRA	27	30	391	0.2%	1,356	0.616	\$232	\$237	\$242	\$247	0.616	\$258	11.2%	\$261	10.3%	\$265	9.5%	\$268	8.7%	4.5%
34	Bronze	BluePreferred PPO	5	256	25	0.0%	84	0.619	\$287	\$291	\$295	\$298	0.619	\$322	11.9%	\$326	12.0%	\$330	12.1%	\$335	12.3%	7.8%
35	Bronze	BluePreferred PPO HSA/HRA	61	74	37	0.4%	132	0.610	\$261	\$264	\$267	\$270	0.610	\$293	12.4%	\$296	12.5%	\$301	12.6%	\$305	12.8%	8.3%
BRONZE SUBTOTAL			100	401	515	0.6%	1,788	0.615	\$232	\$237	\$242	\$247	0.615	\$259	11.2%	\$262	10.5%	\$266	9.8%	\$269	9.1%	4.8%
BlueChoice Total			6,063	24,579	29,582	39%	102,876	0.826	\$359	\$367	\$374	\$382	0.826	\$405	12.9%	\$410	12.0%	\$416	11.2%	\$421	10.4%	6.4%
GHMSI Total			9,355	39,022	41,422	61%	148,128	0.824	\$417	\$423	\$428	\$433	0.824	\$468	12.1%	\$474	12.2%	\$481	12.4%	\$487	12.5%	10.3%
Grand Total			15,418	63,601	71,004	100%	251,004	0.825	\$393	\$400	\$406	\$412	0.825	\$442	12.4%	\$448	12.2%	\$454	11.9%	\$460	11.6%	8.7%

LOW RENEWAL (Minimum):														10.1%	9.3%	8.5%	7.7%
HIGH RENEWAL (Maximum):														14.9%	14.0%	13.9%	14.0%
PPO/HMO:								1.16	1.15	1.14	1.13			1.16	1.16	1.16	1.16

Note: The previous SERFF tracking number for BlueChoice DC Small Group (effective 1/1/2014) is CFAP-129047155 (On and Off Exchange).
The previous SERFF tracking number for GHMSI DC Small Group (effective 1/1/2014) is CFAP-129047320 (On and Off Exchange).

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual, Non-Medigap Allowed PMPM Projection (Includes EHB and Non-EHB Claims) & Derivation of Index Rate - Non-Grandfathered Business Only - 1/1/2015

Experience Period Rating Period	Begin	End	Mid-point	Months of Trend	pd through	3/31/2014
	1/1/2013 1/1/2015	12/31/2013 12/31/2015	7/2/2013 7/2/2015	24.0		
Experience Period Summary	Total					
Experience Period Premiums	\$	137,679,176				
MLR Rebates	\$	-				
Net Experience Period Premiums	\$	137,679,176				
Experience Period Paid Claims (Non-Capitated)	\$	123,160,041				
Completion Factor		0.99				
Experience Period Incurred Claims (Non-Capitated)	\$	123,866,461				
Capitations	\$	713,706				
Rx Rebates	\$	(2,892,799)				
Other Manual Claims	\$	-				
Total Experience Period Claims	\$	121,687,368				
Experience Period Loss Ratio (Before MLR Rebates)		88.4%				
Experience Period Loss Ratio (After MLR Rebates)		88.4%				
Experience Period Loss Ratio (System Claims Only)		90.0%				
Experience Period Member Months		438,476				
Average Members		36,540				
End of Experience Period Contract		25,258				
End of Experience Period Members		40,243				
Experience Period Allowed Claims (System Only)	\$	139,164,193				
Adjustments	\$	(2,179,093)				
Total Adjusted EP Allowed Claims	\$	136,985,100				
EP Paid / Allowed Ratio		88.8%				

Service Category Level Projection

Service Category Experience Period Allowed	Utilization Measure	EP Units	EP Allowed \$	Other	Rx Rebates	Net Allowed
Inpatient	Admits	1,968	\$ 27,068,642	\$ -	\$ -	\$ 27,068,642
Outpatient	Visits	19,978	\$ 24,411,199	\$ -	\$ -	\$ 24,411,199
Professional	Visits	321,550	\$ 46,066,170	\$ -	\$ -	\$ 46,066,170
Other	Services	22,097	\$ 5,659,419	\$ -	\$ -	\$ 5,659,419
Rx	Scripts	300,654	\$ 35,958,763	\$ -	\$ (2,892,799)	\$ 33,065,964
Capitation	Member Months	438,476	\$ 713,706	\$ -	\$ -	\$ 713,706
Total			\$ 139,877,899	\$ -	\$ (2,892,799)	\$ 136,985,100
PMPM			\$ 319.01	\$ -	\$ (6.60)	\$ 312.41

Annual Trend Inputs	
Cost Trend	Utilization Trend
7.0%	1.0%
9.5%	0.0%
0.0%	4.5%
0.0%	6.0%
7.0%	1.0%
2.0%	0.0%

Service Category Experience Period Allowed	Utilization Measure	Experience Period			Projection Factors			Cost Factor	Utilization Factor	Total Factor	Projected			Effective Allowed PMPM Annual Trend
		Util / 1000	Unit Cost	PMPM	Population Risk / Morbidity*	Other	Util / 1000				Unit Cost	PMPM		
Inpatient	Admits	53.86	\$ 13,753.39	\$ 61.73	1.000	0.994	1.145	1.020	1.16	54.95	\$ 15,656.85	\$ 71.69	8.1%	
Outpatient	Visits	546.75	\$ 1,221.89	\$ 55.67	1.000	0.994	1.199	1.000	1.19	546.75	\$ 1,456.76	\$ 66.37	9.5%	
Professional	Visits	8,800.02	\$ 143.26	\$ 105.06	1.000	1.039	1.000	1.092	1.13	9,609.84	\$ 148.88	\$ 119.23	4.5%	
Other	Services	604.74	\$ 256.12	\$ 12.91	1.000	1.294	1.000	1.124	1.45	679.49	\$ 331.50	\$ 18.77	6.0%	
Rx	Scripts	8,228.15	\$ 109.98	\$ 75.41	1.000	0.961	1.145	1.020	1.12	8,393.54	\$ 120.96	\$ 84.61	8.1%	
Capitation	Member Months	12,000.00	\$ 1.63	\$ 1.63	1.000	0.957	1.040	1.000	1.00	12,000.00	\$ 1.62	\$ 1.62	2.0%	
Total			\$ 312.41											
Projected Allowed Claims PMPM (EHB + Non-EHB)												\$ 362.29	7.0%	
Non-EHB Claims In Projected PMPM**												\$ 1.20		
Index Rate for EHB												\$ 361.09		

* Please refer to page 74 for more information.

** Includes abortion claims and capitation for embedded adult vision benefit.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual, Non-Medigap Allowed PMPM Projection (Includes EHB and Non-EHB Claims) & Derivation of Index Rate - Non-Grandfathered Business Only - 4/1/2015

Experience Period	Begin	End	Mid-point	Months of Trend	
	1/1/2013	12/31/2013	7/2/2013		
Rating Period	4/1/2015	3/31/2016	9/30/2015	27.0	
pd through 3/31/2014					
Experience Period Summary	Total				
Experience Period Premiums	\$	137,679,176			
MLR Rebates	\$	-			
Net Experience Period Premiums	\$	137,679,176			
Experience Period Paid Claims (Non-Capitated)	\$	123,160,041			
Completion Factor		0.99			
Experience Period Incurred Claims (Non-Capitated)	\$	123,866,461			
Capitations	\$	713,706			
Rx Rebates	\$	(2,892,799)			
Other Manual Claims	\$	-			
Total Experience Period Claims	\$	121,687,368			
Experience Period Loss Ratio (Before MLR Rebates)		88.4%			
Experience Period Loss Ratio (After MLR Rebates)		88.4%			
Experience Period Loss Ratio (System Claims Only)		90.0%			
Experience Period Member Months		438,476			
Average Members		36,540			
End of Experience Period Contract		25,258			
End of Experience Period Members		40,243			
Experience Period Allowed Claims (System Only)	\$	139,164,193			
Adjustments	\$	(2,179,093)			
Total Adjusted EP Allowed Claims	\$	136,985,100			
EP Paid / Allowed Ratio		88.8%			

Service Category Level Projection

Service Category	Experience Period Allowed	Utilization Measure	EP Units	EP Allowed \$	Other	Rx Rebates	Net Allowed
Inpatient		Admits	1,968	\$ 27,068,642	\$ -	\$ -	\$ 27,068,642
Outpatient		Visits	19,978	\$ 24,411,199	\$ -	\$ -	\$ 24,411,199
Professional		Visits	321,550	\$ 46,066,170	\$ -	\$ -	\$ 46,066,170
Other		Services	22,097	\$ 5,659,419	\$ -	\$ -	\$ 5,659,419
Rx		Scripts	300,654	\$ 35,958,763	\$ -	(2,892,799)	\$ 33,065,964
Capitation		Member Months	438,476	\$ 713,706	\$ -	\$ -	\$ 713,706
Total				\$ 139,877,899	\$ -	(2,892,799)	\$ 136,985,100
Check (excluding capitations)				4,659,447	\$ -	\$ -	\$ 0
PMPM				\$ 319.01	\$ -	(6.60)	\$ 312.41

Annual Trend Inputs	
Cost Trend	Utilization Trend
7.0%	1.0%
9.5%	0.0%
0.0%	4.5%
0.0%	6.0%
7.0%	1.0%
2.0%	0.0%

Service Category	Experience Period Allowed	Utilization Measure	Experience Period			Projection Factors		Cost Factor	Utilization Factor	Total Factor	Projected			Effective Allowed PMPM
			Util / 1000	Unit Cost	PMPM	Population Risk / Morbidity*	Other				Util / 1000	Unit Cost	PMPM	
Inpatient		Admits	53.86	\$ 13,753.39	\$ 61.73	1.000	0.994	1.164	1.023	1.18	55.08	\$ 15,923.93	\$ 73.09	8.1%
Outpatient		Visits	546.75	\$ 1,221.89	\$ 55.67	1.000	0.994	1.227	1.000	1.22	546.75	\$ 1,490.19	\$ 67.90	9.5%
Professional		Visits	8,800.02	\$ 143.26	\$ 105.06	1.000	1.039	1.000	1.104	1.15	9,716.17	\$ 148.88	\$ 120.54	4.5%
Other		Services	604.74	\$ 256.12	\$ 12.91	1.000	1.294	1.000	1.140	1.48	689.46	\$ 331.50	\$ 19.05	6.0%
Rx		Scripts	8,228.15	\$ 109.98	\$ 75.41	1.000	0.961	1.164	1.023	1.14	8,414.45	\$ 123.02	\$ 86.26	8.1%
Capitation		Member Months	12,000.00	\$ 1.63	\$ 1.63	1.000	0.957	1.046	1.000	1.00	12,000.00	\$ 1.63	\$ 1.63	2.0%
Total					\$ 312.41									
												Projected Allowed Claims PMPM (EHB + Non-EHB)	\$ 368.48	7.0%
												Non-EHB Claims In Projected PMPM**	\$ 1.22	
												Index Rate for EHB	\$ 367.26	

* Please refer to page 74 for more information.

** Includes abortion claims and capitation for embedded adult vision benefit.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual, Non-Medigap Allowed PMPM Projection (Includes EHB and Non-EHB Claims) & Derivation of Index Rate - Non-Grandfathered Business Only - 7/1/2015

	Begin	End	Mid-point	Months of Trend		
Experience Period	1/1/2013	12/31/2013	7/2/2013			
Rating Period	7/1/2015	6/30/2016	12/30/2015	30.0	pd through	3/31/2014

Experience Period Summary	Total	
Experience Period Premiums	\$	137,679,176
MLR Rebates	\$	-
Net Experience Period Premiums	\$	137,679,176
Experience Period Paid Claims (Non-Capitated)	\$	123,160,041
Completion Factor		0.99
Experience Period Incurred Claims (Non-Capitated)	\$	123,866,461
Capitations	\$	713,706
Rx Rebates	\$	(2,892,799)
Other Manual Claims	\$	-
Total Experience Period Claims	\$	121,687,368
Experience Period Loss Ratio (Before MLR Rebates)		88.4%
Experience Period Loss Ratio (After MLR Rebates)		88.4%
Experience Period Loss Ratio (System Claims Only)		90.0%
Experience Period Member Months		438,476
Average Members		36,540
End of Experience Period Contract		25,258
End of Experience Period Members		40,243
Experience Period Allowed Claims (System Only)	\$	139,164,193
Adjustments	\$	(2,179,093)
Total Adjusted EP Allowed Claims	\$	136,985,100
EP Paid / Allowed Ratio		88.8%

Service Category Level Projection

Service Category Experience Period Allowed	Utilization Measure	EP Units	EP Allowed \$	Other	Rx Rebates	Net Allowed
Inpatient	Admits	1,968	\$ 27,068,642	\$ -	\$ -	\$ 27,068,642
Outpatient	Visits	19,978	\$ 24,411,199	\$ -	\$ -	\$ 24,411,199
Professional	Visits	321,550	\$ 46,066,170	\$ -	\$ -	\$ 46,066,170
Other	Services	22,097	\$ 5,659,419	\$ -	\$ -	\$ 5,659,419
Rx	Scripts	300,654	\$ 35,958,763	\$ -	(2,892,799)	\$ 33,065,964
Capitation	Member Months	438,476	\$ 713,706	\$ -	\$ -	\$ 713,706
Total			\$ 139,877,899	\$ -	(2,892,799)	\$ 136,985,100
PMPM			\$ 319.01	\$ -	(6.60)	\$ 312.41

Annual Trend Inputs	
Cost Trend	Utilization Trend
7.0%	1.0%
9.5%	0.0%
0.0%	4.5%
0.0%	6.0%
7.0%	1.0%
2.0%	0.0%

Service Category Experience Period Allowed	Utilization Measure	Experience Period			Projection Factors			Cost Factor	Utilization Factor	Total Factor	Projected			Effective Allowed PMPM Annual Trend
		Util / 1000	Unit Cost	PMPM	Population Risk / Morbidity*	Other	Util / 1000				Unit Cost	PMPM		
Inpatient	Admits	53.86	\$ 13,753.39	\$ 61.73	1.000	0.994	1.184	1.025	1.21	55.22	\$ 16,195.57	\$ 74.53	8.1%	
Outpatient	Visits	546.75	\$ 1,221.89	\$ 55.67	1.000	0.994	1.255	1.000	1.25	546.75	\$ 1,524.39	\$ 69.46	9.5%	
Professional	Visits	8,800.02	\$ 143.26	\$ 105.06	1.000	1.039	1.000	1.116	1.16	9,823.68	\$ 148.88	\$ 121.88	4.5%	
Other	Services	604.74	\$ 256.12	\$ 12.91	1.000	1.294	1.000	1.157	1.50	699.57	\$ 331.50	\$ 19.33	6.0%	
Rx	Scripts	8,228.15	\$ 109.98	\$ 75.41	1.000	0.961	1.184	1.025	1.17	8,435.40	\$ 125.12	\$ 87.95	8.1%	
Capitation	Member Months	12,000.00	\$ 1.63	\$ 1.63	1.000	0.957	1.051	1.000	1.01	12,000.00	\$ 1.64	\$ 1.64	2.0%	
Total				\$ 312.41										
												Projected Allowed Claims PMPM (EHB + Non-EHB)	\$ 374.78	7.0%
												Non-EHB Claims In Projected PMPM**	\$ 1.25	
												Index Rate for EHB	\$ 373.53	

* Please refer to page 74 for more information.

** Includes abortion claims and capitation for embedded adult vision benefit.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual, Non-Medigap Allowed PMPM Projection (Includes EHB and Non-EHB Claims) & Derivation of Index Rate - Non-Grandfathered Business Only - 10/1/2015

Experience Period Rating Period	Begin	End	Mid-point	Months of Trend	pd through	3/31/2014
	1/1/2013	12/31/2013	7/2/2013			
	10/1/2015	9/30/2016	3/31/2016	33.0		

Experience Period Summary	Total	
Experience Period Premiums	\$	137,679,176
MLR Rebates	\$	-
Net Experience Period Premiums	\$	137,679,176
Experience Period Paid Claims (Non-Capitated)	\$	123,160,041
Completion Factor		0.99
Experience Period Incurred Claims (Non-Capitated)	\$	123,866,461
Capitations	\$	713,706
Rx Rebates	\$	(2,892,799)
Other Manual Claims	\$	-
Total Experience Period Claims	\$	121,687,368
Experience Period Loss Ratio (Before MLR Rebates)		88.4%
Experience Period Loss Ratio (After MLR Rebates)		88.4%
Experience Period Loss Ratio (System Claims Only)		90.0%
Experience Period Member Months		438,476
Average Members		36,540
End of Experience Period Contract		25,258
End of Experience Period Members		40,243
Experience Period Allowed Claims (System Only)	\$	139,164,193
Adjustments	\$	(2,179,093)
Total Adjusted EP Allowed Claims	\$	136,985,100
EP Paid / Allowed Ratio		88.8%

Service Category Level Projection

Service Category Experience Period Allowed	Utilization Measure	EP Units	EP Allowed \$	Other	Rx Rebates	Net Allowed
Inpatient	Admits	1,968	\$ 27,068,642	\$ -	\$ -	\$ 27,068,642
Outpatient	Visits	19,978	\$ 24,411,199	\$ -	\$ -	\$ 24,411,199
Professional	Visits	321,550	\$ 46,066,170	\$ -	\$ -	\$ 46,066,170
Other	Services	22,097	\$ 5,659,419	\$ -	\$ -	\$ 5,659,419
Rx	Scripts	300,654	\$ 35,958,763	\$ -	(2,892,799)	\$ 33,065,964
Capitation	Member Months	438,476	\$ 713,706	\$ -	\$ -	\$ 713,706
Total			\$ 139,877,899	\$ -	(2,892,799)	\$ 136,985,100
PMPM			\$ 319.01	\$ -	(6.60)	\$ 312.41

Annual Trend Inputs	
Cost Trend	Utilization Trend
7.0%	1.0%
9.5%	0.0%
0.0%	4.5%
0.0%	6.0%
7.0%	1.0%
2.0%	0.0%

Service Category Experience Period Allowed	Utilization Measure	Experience Period			Projection Factors		Cost Factor	Utilization Factor	Total Factor	Projected			Effective Allowed
		Util / 1000	Unit Cost	PMPM	Population Risk / Morbidity*	Other				Util / 1000	Unit Cost	PMPM	PMPM
Inpatient	Admits	53.86	\$ 13,753.39	\$ 61.73	1.000	0.994	1.204	1.028	1.23	55.36	\$ 16,471.85	\$ 75.99	8.1%
Outpatient	Visits	546.75	\$ 1,221.89	\$ 55.67	1.000	0.994	1.283	1.000	1.28	546.75	\$ 1,559.37	\$ 71.05	9.5%
Professional	Visits	8,800.02	\$ 143.26	\$ 105.06	1.000	1.039	1.000	1.129	1.17	9,932.38	\$ 148.88	\$ 123.23	4.5%
Other	Services	604.74	\$ 256.12	\$ 12.91	1.000	1.294	1.000	1.174	1.52	709.84	\$ 331.50	\$ 19.61	6.0%
Rx	Scripts	8,228.15	\$ 109.98	\$ 75.41	1.000	0.961	1.204	1.028	1.19	8,456.41	\$ 127.26	\$ 89.68	8.1%
Capitation	Member Months	12,000.00	\$ 1.63	\$ 1.63	1.000	0.957	1.056	1.000	1.01	12,000.00	\$ 1.64	\$ 1.64	2.0%
Total				\$ 312.41								\$ 381.19	7.0%
												Projected Allowed Claims PMPM (EHB + Non-EHB)	
												Non-EHB Claims In Projected PMPM**	\$ 1.27
												Index Rate for EHB	\$ 379.92

* Please refer to page 74 for more information.

** Includes abortion claims and capitation for embedded adult vision benefit.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Estimate of Non-EHB Claims - Individual, non-Medigap & Small Group Markets Combined

Abortion Coverage (Applies to Individual, Non-Medigap & Small Group Markets)

2013 Member

Total Abortion Related	Allowed Amount	Months	Exp Period PMPM
BlueChoice	\$446,872	475,831	\$0.94

Projected PMPM

1Q15	\$1.10
2Q15	\$1.12
3Q15	\$1.15
4Q15	\$1.17

Embedded Adult Vision Coverage (Applies to Individual, Non-Medigap Market Only)

Refer to page 54 for details.

Projected PMPM Spread Over Individual Market

Blended with Small Group

\$1.07

\$0.10

Projected PMPM

1Q15	\$0.10
2Q15	\$0.10
3Q15	\$0.10
4Q15	\$0.10

Projection Period Non-EHB

1Q15	\$1.20
2Q15	\$1.22
3Q15	\$1.25
4Q15	\$1.27

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Adjustments for Small Group Benefits in Excess of EHB

<u>1Q15</u>	Med	Rx	Total
Index Rate for EHB	\$ 276.48	\$ 84.61	\$ 361.09
<u>Benefits to be Covered in Excess of EHB On Exchange (PMPM)</u>			
Abortion*	\$ 1.13	\$ -	\$ 1.13
Total Adjustment to Index Rate	0.41%	0.00%	0.31%
<u>2Q15</u>	Med	Rx	Total
Index Rate for EHB	\$ 280.99	\$ 86.26	\$ 367.26
<u>Benefits to be Covered in Excess of EHB On Exchange (PMPM)</u>			
Abortion*	\$ 1.15	\$ -	\$ 1.15
Total Adjustment to Index Rate	0.41%	0.00%	0.31%
<u>3Q15</u>	Med	Rx	Total
Index Rate for EHB	\$ 285.57	\$ 87.95	\$ 373.53
<u>Benefits to be Covered in Excess of EHB On Exchange (PMPM)</u>			
Abortion*	\$ 1.17	\$ -	\$ 1.17
Total Adjustment to Index Rate	0.41%	0.00%	0.31%
<u>4Q15</u>	Med	Rx	Total
Index Rate for EHB	\$ 290.25	\$ 89.68	\$ 379.92
<u>Benefits to be Covered in Excess of EHB On Exchange (PMPM)</u>			
Abortion*	\$ 1.19	\$ -	\$ 1.19
Total Adjustment to Index Rate	0.41%	0.00%	0.31%

* Based on calendar year 2013 experience for DC BlueChoice Small Group business, trended to 2015.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
DC BC Index Rate History

Month	Index Rate	% Change	% Change Year to Year
201401	\$ 362.28		
201404	\$ 369.86	2.09%	
201407	\$ 377.62	2.10%	
201410	\$ 385.56	2.10%	
201501	\$ 361.09	-6.35%	-0.33%
201504	\$ 367.26	1.71%	-0.71%
201507	\$ 373.53	1.71%	-1.08%
201510	\$ 379.92	1.71%	-1.46%

CareFirst BlueCross BlueShield (GHMSI)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

2015 ACA - TREND ANALYSIS SUMMARY - DC BlueChoice

1		2		3			4			5			6			7			8			9			10			11			12			13			14			15			16		
				2014 FILING			PROJECTED						2015 FILING			EXPERIENCE PERIOD			PROJECTED																										
BC-DC				Allowed			Cost			Utilization			Claims			Allowed			Cost			Utilization			Claims			Cost			Utilization			Claims			vs 2014								
				<u>Claims*</u>			<u>%</u>			<u>Trend</u>			<u>Trend</u>			<u>Trend</u>			<u>Claims</u>			<u>%</u>			<u>Trend</u>			<u>Trend</u>			<u>Trend</u>			<u>Trend**</u>			<u>Δ</u>								
1	Inpatient		Hospital	\$23,770,154	19%	4.1%	1.0%	5.1%	\$29,354,475	19%	9.9%	1.9%	12.0%	7.0%	1.0%	8.1%	2.9%																												
2	Outpatient		Hospital	\$21,965,415	17%	8.5%	3.5%	12.3%	\$26,666,931	17%	11.3%	-1.9%	9.2%	9.5%	0.0%	9.5%	-2.8%																												
3	Professional			\$44,298,737	35%	-5.4%	16.5%	10.2%	\$51,117,073	33%	0.8%	2.4%	3.2%	0.0%	4.5%	4.5%	-5.7%																												
4	Other Medical	Non-Capitated	Ambulance	\$5,216,690	4%	5.5%	2.5%	8.1%	\$6,249,527	4%	-0.5%	7.0%	6.5%	0.0%	6.0%	6.0%	-2.1%																												
5			Home Health																																										
6			DME																																										
7			Prosthetics																																										
8			Supplies																																										
9			Vision Exams																																										
10			Dental Services																																										
11			Other Services																																										
12	Medical	Subtotal (Clms-Wgtd):		\$95,250,996	74%	0.8%	8.9%	9.3%	\$113,388,006	74%	5.6%	1.5%	7.1%	4.0%	2.6%	6.7%	-2.6%																												
13	RX	Claims-Weighted		\$32,757,088	26%	4.5%	2.0%	6.6%	\$39,738,141	26%	8.9%	-0.9%	8.0%	7.0%	1.0%	8.1%	1.5%																												
14	TOTAL	Claims-Weighted		\$128,008,084	100%	1.7%	7.1%	9.0%	\$153,126,148	100%	6.4%	0.9%	7.4%	4.8%	2.2%	7.1%	-1.8%																												

*Includes grandfathered Small Group business

**Note: The total trend shown is claims-weighted. The actual pricing trend utilized is 7.0%, calculated on a PMPM basis.

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

**2015 ACA - PLAN LEVEL DERIVATIONS
SG DC BLUECHOICE**

Benefit Plan	1	2	3	4	5			8	10			12	13	14	15	16	17	18	19
					Market-Level Adjustments (MLA)	Risk Adj	Exch User Fees		Plan-Level Adjustments (PLA)	Non-Distrib	Calibration Allowable Rating Factors (ARFs)*								
	Exchange	ON-1Q15	Projected EMMs	INDEX RATE (Ave ALW EHB)	Reins.	Risk Adj	Exch User Fees	INDEX RATE (Post-MLA)	Network & UM	FHB	Distrib & Admin	INDEX RATE (Plan-Level)	Pricing AV	2014 = 2015 HHS AV	Age	1Q15	1Q14	1Q14	Δ
Bronze Plans																			
		Ded.	OOP Max																
BlueChoice HMO Referral HSA/HRA \$4,000		\$4,000	\$6,350	\$361	1.000	1.065	1.000	\$385	0.930	1.003	1.382	\$231	60.0%	0.612	0.950	\$219	0.452	\$198	10.4%
BlueChoice Plus HSA/HRA \$3500				\$361	1.000	1.065	1.000	\$385	1.005	1.003	1.382	\$271	70.6%	0.616	0.950	\$258	0.488	\$232	11.2%
Silver Plans																			
BlueChoice HMO HSA/HRA \$2,000		\$2,000	\$5,000	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.382	\$310	80.5%	0.719	0.950	\$294	0.567	\$261	12.5%
BlueChoice HMO HSA/HRA \$2,000, 80%		\$2,000	\$4,000	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.382	\$301	78.1%	0.709	0.950	\$285	0.563	\$259	10.1%
BlueChoice Plus \$2000				\$361	1.000	1.065	1.000	\$385	1.005	1.003	1.374	\$337	87.7%	0.719	0.950	\$320	0.604	\$285	12.4%
BlueChoice Plus HSA/HRA \$1500				\$361	1.000	1.065	1.000	\$385	1.005	1.003	1.382	\$332	86.3%	0.717	0.950	\$315	0.596	\$283	11.2%
BlueChoice Plus HSA/HRA \$2000				\$361	1.000	1.065	1.000	\$385	1.005	1.003	1.382	\$318	82.8%	0.689	0.950	\$302	0.570	\$271	11.7%
BlueChoice Advantage HSA/HRA \$1500				\$361	1.000	1.065	1.000	\$385	1.027	1.003	1.382	\$335	87.0%	0.703	0.950	\$318	0.584	\$280	13.3%
HealthyBlue HMO HSA/HRA \$2,000		\$2,000	\$6,350	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.382	\$306	79.5%	0.708	0.950	\$291	0.555	\$255	13.8%
HealthyBlue Plus HSA/HRA \$2,000				\$361	1.000	1.065	1.000	\$385	1.005	1.003	1.382	\$315	81.8%	0.708	0.950	\$299	0.555	\$263	13.4%
HealthyBlue Advantage HSA/HRA \$2,000				\$361	1.000	1.065	1.000	\$385	1.027	1.003	1.382	\$322	83.6%	0.708	0.950	\$305	0.555	\$266	14.7%
Gold Plans																			
BlueChoice HMO \$250		\$250 Med/\$0 Rx	\$3,000	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.374	\$419	109.0%	0.819	0.950	\$398	0.770	\$353	13.0%
BlueChoice HMO \$1,800		\$1800 Med/\$0 Rx	\$2,600	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.374	\$366	95.2%	0.781	0.950	\$348	0.687	\$314	10.6%
BlueChoice HMO \$1,000		\$1,000	\$3,000	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.374	\$371	96.6%	0.785	0.950	\$353	0.701	\$321	10.0%
BlueChoice HMO HSA/HRA \$1,500		\$1,500	\$2,000	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.382	\$361	93.9%	0.797	0.950	\$343	0.676	\$311	10.1%
BlueChoice HMO Referral \$500		\$500 Med/\$0 Rx	\$3,000	\$361	1.000	1.065	1.000	\$385	0.930	1.003	1.374	\$383	99.5%	0.788	0.950	\$363	0.745	\$325	11.8%
BlueChoice Advantage \$1000				\$361	1.000	1.065	1.000	\$385	1.027	1.003	1.374	\$404	104.9%	0.787	0.950	\$383	0.716	\$342	12.1%
BlueChoice Advantage \$500 \$20/\$30				\$361	1.000	1.065	1.000	\$385	1.027	1.003	1.374	\$426	110.9%	0.785	0.950	\$405	NA	NA	NA
HealthyBlue HMO \$1,500		\$1500 Med/\$0 Rx	\$5,500	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.374	\$394	102.5%	0.819	0.950	\$375	0.718	\$329	14.0%
HealthyBlue Plus \$1,500				\$361	1.000	1.065	1.000	\$385	1.005	1.003	1.374	\$406	105.5%	0.819	0.950	\$385	0.718	\$339	13.6%
HealthyBlue Advantage \$1,500				\$361	1.000	1.065	1.000	\$385	1.027	1.003	1.374	\$415	107.8%	0.819	0.950	\$394	0.718	\$343	14.9%
Platinum Plans																			
BlueChoice HMO \$30/\$40		\$0 Med/\$0 Rx	\$1,300	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.374	\$493	128.1%	0.883	0.950	\$468	0.919	\$421	11.3%
BlueChoice HMO Referral \$30/\$40		\$0 Med/\$0 Rx	\$1,300	\$361	1.000	1.065	1.000	\$385	0.930	1.003	1.374	\$469	121.9%	0.883	0.950	\$445	0.919	\$401	11.1%
BlueChoice HMO Referral \$10/\$20		\$0 Med/\$0 Rx	\$1,300	\$361	1.000	1.065	1.000	\$385	0.930	1.003	1.374	\$480	124.9%	0.906	0.950	\$456	0.945	\$412	10.6%
BlueChoice Plus 100%/80%, \$10/\$20				\$361	1.000	1.065	1.000	\$385	1.005	1.003	1.374	\$514	133.6%	0.891	0.950	\$488	0.932	\$440	10.9%
BlueChoice Plus 100%/60%, \$20/\$30				\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.374	\$487	126.6%	0.886	0.950	\$463	0.910	\$416	11.1%
BlueChoice Plus 100%/80%, \$20/\$30				\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.374	\$499	129.8%	0.886	0.950	\$474	0.934	\$427	11.0%
BlueChoice Advantage 80%/50%				\$361	1.000	1.065	1.000	\$385	1.027	1.003	1.374	\$521	135.5%	0.888	0.950	\$495	0.924	\$441	12.3%
BlueChoice Advantage 100%/70%				\$361	1.000	1.065	1.000	\$385	1.027	1.003	1.374	\$515	133.9%	0.884	0.950	\$489	0.912	\$435	12.5%
BlueChoice Advantage 90%/70%				\$361	1.000	1.065	1.000	\$385	1.027	1.003	1.374	\$508	132.2%	0.903	0.950	\$483	0.911	\$435	11.1%
HealthyBlue HMO \$300		\$300 Med/\$0 Rx	\$1,500	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.374	\$482	125.3%	0.903	0.950	\$458	0.892	\$408	12.0%
HealthyBlue HMO \$600		\$600 Med/\$0 Rx	\$1,500	\$361	1.000	1.065	1.000	\$385	0.977	1.003	1.374	\$469	121.8%	0.898	0.950	\$445	0.872	\$399	11.5%
HealthyBlue Plus \$300				\$361	1.000	1.065	1.000	\$385	1.005	1.003	1.374	\$496	128.9%	0.903	0.950	\$471	0.892	\$421	11.7%
HealthyBlue Plus \$600				\$361	1.000	1.065	1.000	\$385	1.005	1.003	1.374	\$482	125.3%	0.898	0.950	\$458	0.872	\$412	11.2%
HealthyBlue Advantage \$300				\$361	1.000	1.065	1.000	\$385	1.027	1.003	1.374	\$506	131.7%	0.903	0.950	\$481	0.892	\$426	12.9%
HealthyBlue Advantage \$600				\$361	1.000	1.065	1.000	\$385	1.027	1.003	1.374	\$493	128.1%	0.898	0.950	\$468	0.872	\$416	12.4%
				\$361	1.000	1.065	1.000	\$385	0.995	1.003	1.382	\$266	69.1%	0.616	0.950	\$252	0.483	\$227	11.1%
				\$361	1.000	1.065	1.000	\$385	0.998	1.003	1.382	\$319	83.0%	0.711	0.950	\$303	0.572	\$269	12.8%
				\$361	1.000	1.065	1.000	\$385	1.012	1.003	1.374	\$409	106.3%	0.812	0.950	\$388	0.724	\$341	13.8%
				\$361	1.000	1.065	1.000	\$385	0.978	1.003	1.374	\$493	128.2%	0.890	0.950	\$468	0.919	\$421	11.3%
				\$361	1.000	1.065	1.000	\$385	1.000	1.003	1.375	\$426	110.9%	0.826	0.950	\$405	0.770	\$359	12.9%

* Geographic and Tobacco calibration factors both = 1.000

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 1/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO \$250	BlueChoice HMO \$1,800	BlueChoice HMO \$1,000	BlueChoice HMO \$30/\$40	BlueChoice HMO HSA/HRA \$2,000	BlueChoice HMO HSA/HRA \$2,000, 80%	BlueChoice HMO HSA/HRA \$1,500	BlueChoice HMO Referral \$500	
HIOS Product ID	86052DC046	86052DC046	86052DC046	86052DC046	86052DC047	86052DC047	86052DC047	86052DC048	
HIOS Plan ID	86052DC0460006	86052DC0460008	86052DC0460003	86052DC0460007	86052DC0470006	86052DC0470002	86052DC0470005	86052DC0480005	
Metal Level	Gold	Gold	Gold	Platinum	Silver	Silver	Gold	Gold	
Metallic AV	81.86%	78.15%	78.47%	88.31%	71.94%	70.90%	79.69%	78.77%	
On / Off Exchange	On	On	On	On	On	On	On	On	
Network Type	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Lock In / Referral	
High Level Benefit Description									
Integrated	Y/N	N	N	Y	N	Y	Y	Y	N
Individual Deductible		\$250 Med/\$0 Rx	\$1800 Med/\$0 Rx	\$1,000	\$0 Med/\$0 Rx	\$2,000	\$2,000	\$1,500	\$500 Med/\$0 Rx
Individual OOP Max		\$3,000	\$2,600	\$3,000	\$1,300	\$5,000	\$4,000	\$2,000	\$3,000
Member Copay/Coinsurance		\$20 PCP/\$30 Spec/\$250 ER/\$500 IP/\$30 DXL	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL	20%	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$0 PCP/\$0 Spec/\$225 ER/\$300 IP/\$0 for DXL	20%	\$15 PCP/\$25 Spec/\$200 ER/\$500 IP/\$25 DXL	\$30 PCP/\$40 Spec/\$250 ER/\$500 IP/\$40 DXL
Rx Copays:									
Retail Generic		\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand		\$45	\$45	20%	\$45	\$45	20%	\$45	\$45
Retail NonPreferred Brand		\$65	\$65	40%	\$65	\$65	40%	\$65	\$65
Specialty		50%	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit									
Deductible (Class 2-4)		\$25	\$25	\$25	\$25	\$25	\$25	\$25	
Class 1		100%	100%	100%	100%	100%	100%	100%	
Class 2		80%	80%	80%	80%	80%	80%	80%	
Class 3		80%	80%	80%	80%	80%	80%	80%	
Class 4		50%	50%	50%	50%	50%	50%	50%	
Class 5		50%	50%	50%	50%	50%	50%	50%	
Out of Pocket Max		Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)		\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09
Market Level Adjustments:									
Reinsurance		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Risk Adjustment		1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	
Exchange User Fees		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Market Adjusted Index Rate (PMPM)		\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64
Plan Level Adjustments									
Cost Share Factor		0.8099	0.7068	0.7172	0.9515	0.5942	0.5770	0.6930	0.7762
Network &UM		0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9300
Non-EHB*		1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost		1.3737	1.3737	1.3737	1.3737	1.3819	1.3819	1.3819	1.3737
Plan Adjusted Index Rate (PMPM)		\$419.41	\$366.03	\$371.40	\$492.75	\$309.52	\$300.56	\$360.99	\$382.62
Calibrations to Consumer Level Rating Factors									
Age Calibration		0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	
Geo Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Tobacco Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Consumer Level Base Rate		\$398.30	\$347.61	\$352.70	\$467.94	\$293.94	\$285.43	\$342.82	\$363.36
Pricing AV		109.0%	95.2%	96.6%	128.1%	80.5%	78.1%	93.9%	99.5%
Estimated Plan DICR		71.8%	71.8%	71.8%	71.8%	71.4%	71.4%	71.4%	71.8%
Projected Member Months		8,316	324	468	4,284	1,812	348	2,424	1,560
Membership Distribution		8.1%	0.3%	0.5%	4.2%	1.8%	0.3%	2.4%	1.5%
2014 Plan Adjusted Index Rate (PMPM)		\$365.92	\$326.35	\$332.86	\$436.47	\$271.09	\$269.01	\$323.05	\$337.29
% Change		14.6%	12.2%	11.6%	12.9%	14.2%	11.7%	11.7%	13.4%
2014 Consumer Level Base Rate		\$352.54	\$314.42	\$320.69	\$420.51	\$261.18	\$259.17	\$311.24	\$324.96
% Change		13.0%	10.6%	10.0%	11.3%	12.5%	10.1%	10.1%	11.8%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 1/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO Referral \$30/\$40	BlueChoice HMO Referral \$10/\$20	BlueChoice HMO Referral HSA/HRA \$4,000	BlueChoice Plus \$2000	BlueChoice Plus 100%/80%, \$10/\$20	BlueChoice Plus 100%/60%, \$20/\$30	BlueChoice Plus 100%/80%, \$20/\$30
HIOS Product ID	86052DC048	86052DC048	86052DC049	86052DC050	86052DC050	86052DC050	86052DC050
HIOS Plan ID	86052DC0480006	86052DC0480004	86052DC0490001	86052DC0500005	86052DC0500008	86052DC0500007	86052DC0500006
Metal Level	Platinum	Platinum	Bronze	Silver	Platinum	Platinum	Platinum
Metallic AV	88.31%	90.60%	61.18%	71.88%	89.10%	88.62%	88.62%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Lock In / Referral	Lock In / Referral	Lock In / Referral	Open Access Plus	Open Access Plus	Open Access	Open Access
High Level Benefit Description							
Integrated	Y/N	N	N	Y	N	N	N
Individual Deductible	\$0 Med/\$0 Rx	\$0 Med/\$0 Rx	\$4,000	IN: \$2000 Med/\$0 Rx OON: \$4000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx
Individual OOP Max	\$1,300	\$1,300	\$6,350	IN: \$5000 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$10 PCP/\$20 Spec/\$50 ER/\$0 IP/\$20 DXL	20%	\$0 PCP/\$0 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/20%	\$10 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/20%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/40%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/20%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	20%	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	40%	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64
Plan Level Adjustments							
Cost Share Factor	0.9515	0.9744	0.4652	0.6330	0.9645	0.9407	0.9641
Network &UM	0.9300	0.9300	0.9300	1.0050	1.0050	0.9770	0.9770
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3737	1.3737	1.3819	1.3737	1.3737	1.3737	1.3737
Plan Adjusted Index Rate (PMPM)	\$469.04	\$480.29	\$230.67	\$337.18	\$513.75	\$487.13	\$499.23
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$445.43	\$456.12	\$219.06	\$320.21	\$487.90	\$462.62	\$474.10
Pricing AV	121.9%	124.9%	60.0%	87.7%	133.6%	126.6%	129.8%
Estimated Plan DICR	71.8%	71.8%	71.4%	71.8%	71.8%	71.8%	71.8%
Projected Member Months	5,088	2,028	216	132	2,520	1,812	8,604
Membership Distribution	4.9%	2.0%	0.2%	0.1%	2.4%	1.8%	8.4%
2014 Plan Adjusted Index Rate (PMPM)	\$416.09	\$428.08	\$205.92	\$295.79	\$456.66	\$432.30	\$443.46
% Change	12.7%	12.2%	12.0%	14.0%	12.5%	12.7%	12.6%
2014 Consumer Level Base Rate	\$400.87	\$412.43	\$198.39	\$284.97	\$439.96	\$416.49	\$427.24
% Change	11.1%	10.6%	10.4%	12.4%	10.9%	11.1%	11.0%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 1/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Plus HSA/HRA \$3500	BlueChoice Plus HSA/HRA \$1500	BlueChoice Plus HSA/HRA \$2000	BlueChoice Advantage \$1000	BlueChoice Advantage \$500 \$20/\$30	BlueChoice Advantage 80%/50%	BlueChoice Advantage 100%/70%
HIOS Product ID	86052DC051	86052DC051	86052DC051	86052DC044	86052DC044	86052DC044	86052DC044
HIOS Plan ID	86052DC0510006	86052DC0510004	86052DC0510005	86052DC0440008	86052DC0440009	86052DC0440006	86052DC0440007
Metal Level	Bronze	Silver	Silver	Gold	Gold	Platinum	Platinum
Metallic AV	61.62%	71.67%	68.90%	78.69%	78.51%	88.76%	88.37%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y	Y	Y	N	N	N	N
Individual Deductible	IN: \$3500 OON: \$6000	IN: \$1500 OON: \$3000	IN: \$2000 OON: \$4000	IN: \$1000 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN: \$500 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$500 Med/\$0 Rx
Individual OOP Max	IN: \$5250 OON: \$7500	IN: \$4000 OON: \$6000	IN: \$5000 OON: \$7500	IN: \$2500 OON: \$5000	IN: \$4500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL OON: \$100 ER/20%	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$30 PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 DXL OON: \$300 ER/30%	\$20 PCP/\$30 Spec/\$300 ER/\$500 IP/\$30-\$60 DXL OON: \$300 ER/\$750 IP/\$50	\$20 PCP/\$25 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/50%/30% OP Surg	\$30 PCP/\$30 Spec/\$200 ER/\$300 IP/\$30 DXL OON: \$200 ER/30%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64
Plan Level Adjustments							
Cost Share Factor	0.5064	0.6193	0.5942	0.7413	0.7834	0.9573	0.9464
Network & UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3819	1.3819	1.3819	1.3737	1.3737	1.3737	1.3737
Plan Adjusted Index Rate (PMPM)	\$271.37	\$331.87	\$318.42	\$403.55	\$426.44	\$521.08	\$515.18
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$257.71	\$315.17	\$302.39	\$383.24	\$404.97	\$494.85	\$489.25
Pricing AV	70.6%	86.3%	82.8%	104.9%	110.9%	135.5%	133.9%
Estimated Plan DICR	71.4%	71.4%	71.4%	71.8%	71.8%	71.8%	71.8%
Projected Member Months	1,356	1,320	120	8,616	348	72	1,716
Membership Distribution	1.3%	1.3%	0.1%	8.4%	0.3%	0.1%	1.7%
2014 Plan Adjusted Index Rate (PMPM)	\$240.59	\$294.08	\$281.07	\$354.76	n/a	\$457.47	\$451.49
% Change	12.8%	12.8%	13.3%	13.8%	n/a	13.9%	14.1%
2014 Consumer Level Base Rate	\$231.79	\$283.33	\$270.79	\$341.79	n/a	\$440.74	\$434.98
% Change	11.2%	11.2%	11.7%	12.1%	n/a	12.3%	12.5%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 1/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Advantage 90%/70%	BlueChoice Advantage HSA/HRA \$1500	HealthyBlue HMO \$1,500	HealthyBlue HMO \$300	HealthyBlue HMO \$600	HealthyBlue HMO HSA/HRA \$2,000	HealthyBlue Plus \$1,500
HIOS Product ID	86052DC044	86052DC045	86052DC054	86052DC054	86052DC054	86052DC055	86052DC056
HIOS Plan ID	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0540006	86052DC0550002	86052DC0560004
Metal Level	Platinum	Silver	Gold	Platinum	Platinum	Silver	Gold
Metallic AV	90.26%	70.35%	81.88%	90.26%	89.81%	70.81%	81.88%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Advantage	Open Access Advantage	Open Access	Open Access	Open Access	Open Access	Open Access Plus
High Level Benefit Description							
Integrated	Y/N						
Individual Deductible	N	Y	N	N	N	Y	N
Individual OOP Max	IN: \$0 Med/\$0 Rx OON: \$2000 Med/\$0 Rx	IN: \$1500 OON: \$3000	\$1500 Med/\$0 Rx	\$300 Med/\$0 Rx	\$600 Med/\$0 Rx	\$2,000	IN: \$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx
Member Copay/Coinsurance	IN: \$2500 OON: \$3500	IN: \$4000 OON: \$6000	\$5,500	\$1,500	\$1,500	\$6,350	IN: \$5500 OON: \$7500
Rx Copays:							
Retail Generic	\$10	\$10	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	20%	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	40%	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64
Plan Level Adjustments							
Cost Share Factor	0.9340	0.6112	0.7616	0.9304	0.9048	0.5873	0.7616
Network & UM	1.0270	1.0270	0.9770	0.9770	0.9770	0.9770	1.0050
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3737	1.3819	1.3737	1.3737	1.3737	1.3819	1.3737
Plan Adjusted Index Rate (PMPM)	\$508.41	\$334.69	\$394.39	\$481.80	\$468.57	\$305.91	\$405.70
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$482.82	\$317.85	\$374.54	\$457.55	\$444.98	\$290.51	\$385.28
Pricing AV	132.2%	87.0%	102.5%	125.3%	121.8%	79.5%	105.5%
Estimated Plan DICR	71.8%	71.4%	71.8%	71.8%	71.8%	71.4%	71.8%
Projected Member Months	156	1,716	2,124	708	12	1,488	3,768
Membership Distribution	0.2%	1.7%	2.1%	0.7%	0.0%	1.4%	3.7%
2014 Plan Adjusted Index Rate (PMPM)	\$451.22	\$291.12	\$341.15	\$423.89	\$414.25	\$265.05	\$351.99
% Change	12.7%	15.0%	15.6%	13.7%	13.1%	15.4%	15.3%
2014 Consumer Level Base Rate	\$434.72	\$280.47	\$328.67	\$408.39	\$399.10	\$255.36	\$339.12
% Change	11.1%	13.3%	14.0%	12.0%	11.5%	13.8%	13.6%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 1/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	HealthyBlue Plus \$300	HealthyBlue Plus \$600	HealthyBlue Plus HSA/HRA \$2,000	HealthyBlue Advantage \$1,500	HealthyBlue Advantage \$300	HealthyBlue Advantage \$600	HealthyBlue Advantage HSA/HRA \$2,000
HIOS Product ID	86052DC056	86052DC056	86052DC057	86052DC052	86052DC052	86052DC052	86052DC053
HIOS Plan ID	86052DC0560005	86052DC0560006	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Metal Level	Platinum	Platinum	Silver	Gold	Platinum	Platinum	Silver
Metallic AV	90.26%	89.81%	70.81%	81.88%	90.26%	89.81%	70.81%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y/N						
Individual Deductible	N	N	Y	N	N	N	Y
Individual OOP Max	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000
Member Copay/Coinsurance	IN:\$1500 OON: \$3000	IN:\$1500 OON: \$3000	IN: \$6350 OON: \$7500	IN: \$5500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1500 OON: \$3000	IN: \$6350 OON: \$7500
Rx Copays:							
Retail Generic	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09	\$361.09
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64	\$384.64
Plan Level Adjustments							
Cost Share Factor	0.9304	0.9048	0.5873	0.7616	0.9304	0.9048	0.5873
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3737	1.3737	1.3819	1.3737	1.3737	1.3737	1.3819
Plan Adjusted Index Rate (PMPM)	\$495.61	\$482.00	\$314.68	\$414.58	\$506.45	\$492.55	\$321.56
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$470.66	\$457.74	\$298.84	\$393.71	\$480.96	\$467.76	\$305.38
Pricing AV	128.9%	125.3%	81.8%	107.8%	131.7%	128.1%	83.6%
Estimated Plan DICR	71.8%	71.8%	71.4%	71.8%	71.8%	71.8%	71.4%
Projected Member Months	3,276	792	576	32,916	1,404	24	432
Membership Distribution	3.2%	0.8%	0.6%	32.0%	1.4%	0.0%	0.4%
2014 Plan Adjusted Index Rate (PMPM)	\$437.37	\$427.43	\$273.49	\$355.72	\$442.01	\$431.96	\$276.39
% Change	13.3%	12.8%	15.1%	16.5%	14.6%	14.0%	16.3%
2014 Consumer Level Base Rate	\$421.38	\$411.80	\$263.49	\$342.71	\$425.85	\$416.16	\$266.28
% Change	11.7%	11.2%	13.4%	14.9%	12.9%	12.4%	14.7%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 4/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO \$250	BlueChoice HMO \$1,800	BlueChoice HMO \$1,000	BlueChoice HMO \$30/\$40	BlueChoice HMO HSA/HRA \$2,000	BlueChoice HMO HSA/HRA \$2,000, 80%	BlueChoice HMO HSA/HRA \$1,500	BlueChoice HMO Referral \$500	
HIOS Product ID	86052DC046	86052DC046	86052DC046	86052DC046	86052DC047	86052DC047	86052DC047	86052DC048	
HIOS Plan ID	86052DC0460006	86052DC0460008	86052DC0460003	86052DC0460007	86052DC0470006	86052DC0470002	86052DC0470005	86052DC0480005	
Metal Level	Gold	Gold	Gold	Platinum	Silver	Silver	Gold	Gold	
Metallic AV	81.86%	78.15%	78.47%	88.31%	71.94%	70.90%	79.69%	78.77%	
On / Off Exchange	On	On	On	On	On	On	On	On	
Network Type	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Lock In / Referral	
High Level Benefit Description									
Integrated	Y/N	N	N	Y	N	Y	Y	Y	N
Individual Deductible		\$250 Med/\$0 Rx	\$1800 Med/\$0 Rx	\$1,000	\$0 Med/\$0 Rx	2000	\$2,000	1500	\$500 Med/\$0 Rx
Individual OOP Max		\$3,000	\$2,600	\$3,000	\$1,300	\$5,000	\$4,000	\$2,000	\$3,000
Member Copay/Coinsurance		\$20 PCP/\$30 Spec/\$250 ER/\$500 IP/\$30 DXL	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL	20%	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$0 PCP/\$0 Spec/\$225 ER/\$300 IP/\$0 for DXL	20%	\$15 PCP/\$25 Spec/\$200 ER/\$500 IP/\$25 DXL	\$30 PCP/\$40 Spec/\$250 ER/\$500 IP/\$40 DXL
Rx Copays:									
Retail Generic		\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand		\$45	\$45	20%	\$45	\$45	20%	\$45	\$45
Retail NonPreferred Brand		\$65	\$65	40%	\$65	\$65	40%	\$65	\$65
Specialty		50%	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit									
Deductible (Class 2-4)		\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1		100%	100%	100%	100%	100%	100%	100%	100%
Class 2		80%	80%	80%	80%	80%	80%	80%	80%
Class 3		80%	80%	80%	80%	80%	80%	80%	80%
Class 4		50%	50%	50%	50%	50%	50%	50%	50%
Class 5		50%	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max		Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)		\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26
Market Level Adjustments:									
Reinsurance		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Risk Adjustment		1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	
Exchange User Fees		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Market Adjusted Index Rate (PMPM)		\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	
Plan Level Adjustments									
Cost Share Factor		0.8099	0.7068	0.7172	0.9515	0.5942	0.5770	0.6930	0.7762
Network &UM		0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9300
Non-EHB*		1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost		1.3685	1.3685	1.3685	1.3685	1.3765	1.3765	1.3765	1.3685
Plan Adjusted Index Rate (PMPM)		\$424.94	\$370.86	\$376.29	\$499.24	\$313.57	\$304.49	\$365.72	\$387.66
Calibrations to Consumer Level Rating Factors									
Age Calibration		0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	
Geo Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Tobacco Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Consumer Level Base Rate		\$403.55	\$352.19	\$357.35	\$474.11	\$297.79	\$289.17	\$347.31	\$368.15
Pricing AV		108.6%	94.8%	96.2%	127.6%	80.2%	77.8%	93.5%	99.1%
Estimated Plan DICR		72.1%	72.1%	72.1%	72.1%	71.7%	71.7%	72.1%	
Projected Member Months		5,880	216	324	3,024	1,272	240	1,728	1,104
Membership Distribution		8.1%	0.3%	0.4%	4.2%	1.7%	0.3%	2.4%	1.5%
2014 Plan Adjusted Index Rate (PMPM)		\$373.57	\$333.18	\$339.83	\$445.61	\$276.77	\$274.64	\$329.82	\$344.35
% Change		13.8%	11.3%	10.7%	12.0%	13.3%	10.9%	10.9%	12.6%
2014 Consumer Level Base Rate		\$359.91	\$321.00	\$327.40	\$429.31	\$266.65	\$264.60	\$317.76	\$331.76
% Change		12.1%	9.7%	9.1%	10.4%	11.7%	9.3%	9.3%	11.0%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 4/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO Referral \$30/\$40	BlueChoice HMO Referral \$10/\$20	BlueChoice HMO Referral HSA/HRA \$4,000	BlueChoice Plus \$2000	BlueChoice Plus 100%/80%, \$10/\$20	BlueChoice Plus 100%/60%, \$20/\$30	BlueChoice Plus 100%/80%, \$20/\$30
HIOS Product ID	86052DC048	86052DC048	86052DC049	86052DC050	86052DC050	86052DC050	86052DC050
HIOS Plan ID	86052DC0480006	86052DC0480004	86052DC0490001	86052DC0500005	86052DC0500008	86052DC0500007	86052DC0500006
Metal Level	Platinum	Platinum	Bronze	Silver	Platinum	Platinum	Platinum
Metallic AV	88.31%	90.60%	61.18%	71.88%	89.10%	88.62%	88.62%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Lock In / Referral	Lock In / Referral	Lock In / Referral	Open Access Plus	Open Access Plus	Open Access	Open Access
High Level Benefit Description							
Integrated	Y/N	N	N	Y	N	N	N
Individual Deductible	\$0 Med/\$0 Rx	\$0 Med/\$0 Rx	\$4,000	IN: \$2000 Med/\$0 Rx OON: \$4000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx
Individual OOP Max	\$1,300	\$1,300	\$6,350	IN: \$5000 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$10 PCP/\$20 Spec/\$50 ER/\$0 IP/\$20 DXL	20%	\$0 PCP/\$0 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/20%	\$10 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/20%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/40%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/20%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	20%	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	40%	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21
Plan Level Adjustments							
Cost Share Factor	0.9515	0.9744	0.4652	0.6330	0.9645	0.9407	0.9641
Network &UM	0.9300	0.9300	0.9300	1.0050	1.0050	0.9770	0.9770
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3685	1.3685	1.3765	1.3685	1.3685	1.3685	1.3685
Plan Adjusted Index Rate (PMPM)	\$475.23	\$486.63	\$233.70	\$341.63	\$520.53	\$493.56	\$505.81
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$451.31	\$462.13	\$221.94	\$324.43	\$494.33	\$468.71	\$480.35
Pricing AV	121.5%	124.4%	59.7%	87.3%	133.1%	126.2%	129.3%
Estimated Plan DICR	72.1%	72.1%	71.7%	72.1%	72.1%	72.1%	72.1%
Projected Member Months	3,600	1,428	156	96	1,776	1,272	6,084
Membership Distribution	4.9%	2.0%	0.2%	0.1%	2.4%	1.7%	8.4%
2014 Plan Adjusted Index Rate (PMPM)	\$424.79	\$437.05	\$210.23	\$301.97	\$466.22	\$441.34	\$452.75
% Change	11.9%	11.3%	11.2%	13.1%	11.6%	11.8%	11.7%
2014 Consumer Level Base Rate	\$409.26	\$421.07	\$202.54	\$290.93	\$449.17	\$425.20	\$436.19
% Change	10.3%	9.8%	9.6%	11.5%	10.1%	10.2%	10.1%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 4/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Plus HSA/HRA \$3500	BlueChoice Plus HSA/HRA \$1500	BlueChoice Plus HSA/HRA \$2000	BlueChoice Advantage \$1000	BlueChoice Advantage \$500 \$20/\$30	BlueChoice Advantage 80%/50%	BlueChoice Advantage 100%/70%
HIOS Product ID	86052DC051	86052DC051	86052DC051	86052DC044	86052DC044	86052DC044	86052DC044
HIOS Plan ID	86052DC0510006	86052DC0510004	86052DC0510005	86052DC0440008	86052DC0440009	86052DC0440006	86052DC0440007
Metal Level	Bronze	Silver	Silver	Gold	Gold	Platinum	Platinum
Metallic AV	61.62%	71.67%	68.90%	78.69%	78.51%	88.76%	88.37%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y	Y	Y	N	N	N	N
Individual Deductible	IN: \$3500 OON: \$6000	IN: \$1500 OON: \$3000	IN: \$2000 OON: \$4000	IN: \$1000 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN: \$500 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$500 Med/\$0 Rx
Individual OOP Max	IN: \$5250 OON: \$7500	IN: \$4000 OON: \$6000	IN: \$5000 OON: \$7500	IN: \$2500 OON: \$5000	IN: \$4500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL OON: \$100 ER/20%	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$30 PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 DXL OON: \$300 ER/30%	\$20 PCP/\$30 Spec/\$300 ER/\$500 IP/\$30-\$60 DXL OON: \$300 ER/\$750 IP/\$50	\$20 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/50%/30% OP Surg	\$30 PCP/\$30 Spec/\$200 ER/\$300 IP/\$30 DXL OON: \$200 ER/30%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21
Plan Level Adjustments							
Cost Share Factor	0.5064	0.6193	0.5942	0.7413	0.7834	0.9573	0.9464
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3765	1.3765	1.3765	1.3685	1.3685	1.3685	1.3685
Plan Adjusted Index Rate (PMPM)	\$274.92	\$336.22	\$322.59	\$408.87	\$432.06	\$527.95	\$521.97
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$261.09	\$319.30	\$306.35	\$388.29	\$410.31	\$501.38	\$495.70
Pricing AV	70.3%	85.9%	82.5%	104.5%	110.4%	135.0%	133.4%
Estimated Plan DICR	71.7%	71.7%	71.7%	72.1%	72.1%	72.1%	72.1%
Projected Member Months	960	924	72	6,096	240	48	1,224
Membership Distribution	1.3%	1.3%	0.1%	8.4%	0.3%	0.1%	1.7%
2014 Plan Adjusted Index Rate (PMPM)	\$245.62	\$300.24	\$286.94	\$362.18	n/a	\$467.05	\$460.94
% Change	11.9%	12.0%	12.4%	12.9%	n/a	13.0%	13.2%
2014 Consumer Level Base Rate	\$236.64	\$289.26	\$276.45	\$348.94	n/a	\$449.97	\$444.08
% Change	10.3%	10.4%	10.8%	11.3%	n/a	11.4%	11.6%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 4/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Advantage 90%/70%	BlueChoice Advantage HSA/HRA \$1500	HealthyBlue HMO \$1,500	HealthyBlue HMO \$300	HealthyBlue HMO \$600	HealthyBlue HMO HSA/HRA \$2,000	HealthyBlue Plus \$1,500	
HIOS Product ID	86052DC044	86052DC045	86052DC054	86052DC054	86052DC054	86052DC055	86052DC056	
HIOS Plan ID	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0540006	86052DC0550002	86052DC0560004	
Metal Level	Platinum	Silver	Gold	Platinum	Platinum	Silver	Gold	
Metallic AV	90.26%	70.35%	81.88%	90.26%	89.81%	70.81%	81.88%	
On / Off Exchange	On	On	On	On	On	On	On	
Network Type	Open Access Advantage	Open Access Advantage	Open Access	Open Access	Open Access	Open Access	Open Access Plus	
High Level Benefit Description	Integrated	Y/N	N	Y	N	N	Y	N
Individual Deductible	Med/\$0 Rx OON: \$2000 Me	IN: \$1500 OON: \$3000	\$1500 Med/\$0 Rx	\$300 Med/\$0 Rx	\$600 Med/\$0 Rx	2000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	
Individual OOP Max	IN: \$2500 OON: \$3500	IN: \$4000 OON: \$6000	\$5,500	\$1,500	\$1,500	\$6,350	IN:\$5500 OON: \$7500	
Member Copay/Coinsurance	10% IN / 30% OON	\$30PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 or \$0 DXL OON: \$300 ER/30%	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 for DXL	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/05 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP				
Rx Copays:								
Retail Generic	\$10	\$10	\$0	\$0	\$0	\$0	\$0	
Retail Preferred Brand	20%	\$45	\$45	\$45	\$45	\$45	\$45	
Retail NonPreferred Brand	40%	\$65	\$65	\$65	\$65	\$65	\$65	
Specialty	50%	50%	50%	50%	50%	50%	50%	
Embedded Pediatric Dental Benefit								
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25	
Class 1	100%	100%	100%	100%	100%	100%	100%	
Class 2	80%	80%	80%	80%	80%	80%	80%	
Class 3	80%	80%	80%	80%	80%	80%	80%	
Class 4	50%	50%	50%	50%	50%	50%	50%	
Class 5	50%	50%	50%	50%	50%	50%	50%	
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	
Index Rate (Projected EHB Allowed PMPM)	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	
Market Level Adjustments:								
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Market Adjusted Index Rate (PMPM)	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	
Plan Level Adjustments								
Cost Share Factor	0.9340	0.6112	0.7616	0.9304	0.9048	0.5873	0.7616	
Network &UM	1.0270	1.0270	0.9770	0.9770	0.9770	0.9770	1.0050	
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Distribution and Admin Cost	1.3685	1.3765	1.3685	1.3685	1.3685	1.3765	1.3685	
Plan Adjusted Index Rate (PMPM)	\$515.11	\$339.08	\$399.59	\$488.15	\$474.75	\$309.92	\$411.05	
Calibrations to Consumer Level Rating Factors								
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Consumer Level Base Rate	\$489.19	\$322.01	\$379.48	\$463.58	\$450.85	\$294.32	\$390.36	
Pricing AV	131.7%	86.7%	102.1%	124.8%	121.4%	79.2%	105.1%	
Estimated Plan DICR	72.1%	71.7%	72.1%	72.1%	72.1%	72.1%	72.1%	
Projected Member Months	120	1,224	1,500	504	12	1,056	2,676	
Membership Distribution	0.2%	1.7%	2.1%	0.7%	0.0%	1.5%	3.7%	
2014 Plan Adjusted Index Rate (PMPM)	\$460.67	\$297.21	\$348.28	\$432.77	\$422.92	\$270.61	\$359.36	
% Change	11.8%	14.1%	14.7%	12.8%	12.3%	14.5%	14.4%	
2014 Consumer Level Base Rate	\$443.82	\$286.34	\$335.54	\$416.94	\$407.45	\$260.71	\$346.22	
% Change	10.2%	12.5%	13.1%	11.2%	10.7%	12.9%	12.7%	

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 4/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	HealthyBlue Plus \$300	HealthyBlue Plus \$600	HealthyBlue Plus HSA/HRA \$2,000	HealthyBlue Advantage \$1,500	HealthyBlue Advantage \$300	HealthyBlue Advantage \$600	HealthyBlue Advantage HSA/HRA \$2,000
HIOS Product ID	86052DC056	86052DC056	86052DC057	86052DC052	86052DC052	86052DC052	86052DC053
HIOS Plan ID	86052DC0560005	86052DC0560006	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Metal Level	Platinum	Platinum	Silver	Gold	Platinum	Platinum	Silver
Metallic AV	90.26%	89.81%	70.81%	81.88%	90.26%	89.81%	70.81%
On / Off Exchange	On						
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y/N	N	N	Y	N	N	Y
Individual Deductible	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000
Individual OOP Max	IN:\$1500 OON: \$3000	IN:\$1500 OON: \$3000	IN: \$6350 OON: \$7500	IN: \$5500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1500 OON: \$3000	IN: \$6350 OON: \$7500
Member Copay/Coinsurance	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP
Rx Copays:							
Retail Generic	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit							
Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx						
Index Rate (Projected EHB Allowed PMPM)	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26	\$367.26
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21	\$391.21
Plan Level Adjustments							
Cost Share Factor	0.9304	0.9048	0.5873	0.7616	0.9304	0.9048	0.5873
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3685	1.3685	1.3765	1.3685	1.3685	1.3685	1.3765
Plan Adjusted Index Rate (PMPM)	\$502.14	\$488.35	\$318.80	\$420.04	\$513.13	\$499.04	\$325.78
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$476.87	\$463.77	\$302.75	\$398.90	\$487.30	\$473.92	\$309.38
Pricing AV	128.4%	124.8%	81.5%	107.4%	131.2%	127.6%	83.3%
Estimated Plan DICR	72.1%	72.1%	71.7%	72.1%	72.1%	72.1%	71.7%
Projected Member Months	2,328	564	408	23,292	996	24	312
Membership Distribution	3.2%	0.8%	0.6%	32.0%	1.4%	0.0%	0.4%
2014 Plan Adjusted Index Rate (PMPM)	\$446.53	\$436.37	\$279.21	\$363.17	\$451.26	\$441.00	\$282.17
% Change	12.5%	11.9%	14.2%	15.7%	13.7%	13.2%	15.5%
2014 Consumer Level Base Rate	\$430.20	\$420.41	\$269.00	\$349.89	\$434.76	\$424.87	\$271.85
% Change	10.8%	10.3%	12.5%	14.0%	12.1%	11.5%	13.8%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 7/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO \$250	BlueChoice HMO \$1,800	BlueChoice HMO \$1,000	BlueChoice HMO \$30/\$40	BlueChoice HMO HSA/HRA \$2,000	BlueChoice HMO HSA/HRA \$2,000, 80%	BlueChoice HMO HSA/HRA \$1,500	BlueChoice HMO Referral \$500	
HIOS Product ID	86052DC046	86052DC046	86052DC046	86052DC046	86052DC047	86052DC047	86052DC047	86052DC048	
HIOS Plan ID	86052DC0460006	86052DC0460008	86052DC0460003	86052DC0460007	86052DC0470006	86052DC0470002	86052DC0470005	86052DC0480005	
Metal Level	Gold	Gold	Gold	Platinum	Silver	Silver	Gold	Gold	
Metallic AV	81.86%	78.15%	78.47%	88.31%	71.94%	70.90%	79.69%	78.77%	
On / Off Exchange	On	On	On	On	On	On	On	On	
Network Type	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Lock In / Referral	
High Level Benefit Description									
Integrated	Y/N	N	N	Y	N	Y	Y	Y	
Individual Deductible		\$250 Med/\$0 Rx	\$1800 Med/\$0 Rx	\$1,000	\$0 Med/\$0 Rx	2000	\$2,000	1500	\$500 Med/\$0 Rx
Individual OOP Max		\$3,000	\$2,600	\$3,000	\$1,300	\$5,000	\$4,000	\$2,000	\$3,000
Member Copay/Coinsurance		\$20 PCP/\$30 Spec/\$250 ER/\$500 IP/\$30 DXL	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL	20%	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$0 PCP/\$0 Spec/\$225 ER/\$300 IP/\$0 for DXL	20%	\$15 PCP/\$25 Spec/\$200 ER/\$500 IP/\$25 DXL	\$30 PCP/\$40 Spec/\$250 ER/\$500 IP/\$40 DXL
Rx Copays:									
Retail Generic		\$10	\$10	\$10	\$10	\$10	\$10	\$10	
Retail Preferred Brand		\$45	\$45	20%	\$45	\$45	20%	\$45	
Retail NonPreferred Brand		\$65	\$65	40%	\$65	\$65	40%	\$65	
Specialty		50%	50%	50%	50%	50%	50%	50%	
Embedded Pediatric Dental Benefit Deductible (Class 2-4)		\$25	\$25	\$25	\$25	\$25	\$25	\$25	
Class 1		100%	100%	100%	100%	100%	100%	100%	
Class 2		80%	80%	80%	80%	80%	80%	80%	
Class 3		80%	80%	80%	80%	80%	80%	80%	
Class 4		50%	50%	50%	50%	50%	50%	50%	
Class 5		50%	50%	50%	50%	50%	50%	50%	
Out of Pocket Max		Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	
Index Rate (Projected EHB Allowed PMPM)		\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	
Market Level Adjustments:									
Reinsurance		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Risk Adjustment		1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	
Exchange User Fees		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Market Adjusted Index Rate (PMPM)		\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	
Plan Level Adjustments									
Cost Share Factor		0.8099	0.7068	0.7172	0.9515	0.5942	0.5770	0.6930	
Network &UM		0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9300	
Non-EHB*		1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	
Catastrophic Adj		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Distribution and Admin Cost		1.3636	1.3636	1.3636	1.3636	1.3715	1.3715	1.3636	
Plan Adjusted Index Rate (PMPM)		\$430.67	\$375.86	\$381.37	\$505.97	\$317.78	\$308.58	\$370.62	\$392.89
Calibrations to Consumer Level Rating Factors									
Age Calibration		0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	
Geo Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Tobacco Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
Consumer Level Base Rate		\$408.99	\$356.94	\$362.17	\$480.51	\$301.78	\$293.04	\$351.97	\$373.11
Pricing AV		108.2%	94.5%	95.8%	127.2%	79.9%	77.6%	93.1%	98.7%
Estimated Plan DICR		72.3%	72.3%	72.3%	72.3%	71.9%	71.9%	71.9%	72.3%
Projected Member Months		7,416	288	408	3,816	1,620	312	2,160	1,392
Membership Distribution		8.1%	0.3%	0.4%	4.2%	1.8%	0.3%	2.4%	1.5%
2014 Plan Adjusted Index Rate (PMPM)		\$381.41	\$340.18	\$346.95	\$454.96	\$282.57	\$280.40	\$336.73	\$351.57
% Change		12.9%	10.5%	9.9%	11.2%	12.5%	10.0%	10.1%	11.8%
2014 Consumer Level Base Rate		\$367.46	\$327.74	\$334.26	\$438.32	\$272.24	\$270.15	\$324.42	\$338.71
% Change		11.3%	8.9%	8.3%	9.6%	10.9%	8.5%	8.5%	10.2%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 7/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO Referral \$30/\$40	BlueChoice HMO Referral \$10/\$20	BlueChoice HMO Referral HSA/HRA \$4,000	BlueChoice Plus \$2000	BlueChoice Plus 100%/80%, \$10/\$20	BlueChoice Plus 100%/60%, \$20/\$30	BlueChoice Plus 100%/80%, \$20/\$30
HIOS Product ID	86052DC048	86052DC048	86052DC049	86052DC050	86052DC050	86052DC050	86052DC050
HIOS Plan ID	86052DC0480006	86052DC0480004	86052DC0490001	86052DC0500005	86052DC0500008	86052DC0500007	86052DC0500006
Metal Level	Platinum	Platinum	Bronze	Silver	Platinum	Platinum	Platinum
Metallic AV	88.31%	90.60%	61.18%	71.88%	89.10%	88.62%	88.62%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Lock In / Referral	Lock In / Referral	Lock In / Referral	Open Access Plus	Open Access Plus	Open Access	Open Access
High Level Benefit Description							
Integrated	Y/N						
Individual Deductible	\$0 Med/\$0 Rx	\$0 Med/\$0 Rx	\$4,000	IN: \$2000 Med/\$0 Rx OON: \$4000 Med/\$0 Rx	IN: \$0Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx
Individual OOP Max	\$1,300	\$1,300	\$6,350	IN: \$5000 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$10 PCP/\$20 Spec/\$50 ER/\$0 IP/\$20 DXL	20%	\$0 PCP/\$0 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/20%	\$10 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/20%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/40%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/20%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	20%	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	40%	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89
Plan Level Adjustments							
Cost Share Factor	0.9515	0.9744	0.4652	0.6330	0.9645	0.9407	0.9641
Network &UM	0.9300	0.9300	0.9300	1.0050	1.0050	0.9770	0.9770
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3636	1.3636	1.3715	1.3636	1.3636	1.3636	1.3636
Plan Adjusted Index Rate (PMPM)	\$481.63	\$493.19	\$236.83	\$346.23	\$527.54	\$500.21	\$512.63
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$457.39	\$468.36	\$224.91	\$328.81	\$500.99	\$475.03	\$486.83
Pricing AV	121.0%	124.0%	59.5%	87.0%	132.6%	125.7%	128.8%
Estimated Plan DICR	72.3%	72.3%	71.9%	72.3%	72.3%	72.3%	72.3%
Projected Member Months	4,548	1,812	192	108	2,244	1,620	7,680
Membership Distribution	5.0%	2.0%	0.2%	0.1%	2.4%	1.8%	8.4%
2014 Plan Adjusted Index Rate (PMPM)	\$433.70	\$446.21	\$214.64	\$308.30	\$475.99	\$450.60	\$462.23
% Change	11.1%	10.5%	10.3%	12.3%	10.8%	11.0%	10.9%
2014 Consumer Level Base Rate	\$417.84	\$429.89	\$206.79	\$297.03	\$458.58	\$434.12	\$445.33
% Change	9.5%	8.9%	8.8%	10.7%	9.2%	9.4%	9.3%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 7/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Plus HSA/HRA \$3500	BlueChoice Plus HSA/HRA \$1500	BlueChoice Plus HSA/HRA \$2000	BlueChoice Advantage \$1000	BlueChoice Advantage \$500 \$20/\$30	BlueChoice Advantage 80%/50%	BlueChoice Advantage 100%/70%
HIOS Product ID	86052DC051	86052DC051	86052DC051	86052DC044	86052DC044	86052DC044	86052DC044
HIOS Plan ID	86052DC0510006	86052DC0510004	86052DC0510005	86052DC0440008	86052DC0440009	86052DC0440006	86052DC0440007
Metal Level	Bronze	Silver	Silver	Gold	Gold	Platinum	Platinum
Metallic AV	61.62%	71.67%	68.90%	78.69%	78.51%	88.76%	88.37%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y	Y	Y	N	N	N	N
Individual Deductible	IN: \$3500 OON: \$6000	IN: \$1500 OON: \$3000	IN: \$2000 OON: \$4000	IN: \$1000 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN: \$500 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$500 Med/\$0 Rx
Individual OOP Max	IN: \$5250 OON: \$7500	IN: \$4000 OON: \$6000	IN: \$5000 OON: \$7500	IN: \$2500 OON: \$5000	IN: \$4500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL OON: \$100 ER/20%	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$30 PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 DXL OON: \$300 ER/30%	\$20 PCP/\$30 Spec/\$300 ER/\$500 IP/\$30-\$60 DXL OON: \$300 ER/\$750 IP/\$50	\$20 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/50%/30% OP Surg	\$30 PCP/\$30 Spec/\$200 ER/\$300 IP/\$30 DXL OON: \$200 ER/30%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89
Plan Level Adjustments							
Cost Share Factor	0.5064	0.6193	0.5942	0.7413	0.7834	0.9573	0.9464
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3715	1.3715	1.3715	1.3636	1.3636	1.3636	1.3636
Plan Adjusted Index Rate (PMPM)	\$278.61	\$340.73	\$326.91	\$414.38	\$437.88	\$535.07	\$529.01
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$264.59	\$323.58	\$310.46	\$393.53	\$415.84	\$508.14	\$502.38
Pricing AV	70.0%	85.6%	82.2%	104.1%	110.1%	134.5%	133.0%
Estimated Plan DICR	71.9%	71.9%	71.9%	72.3%	72.3%	72.3%	72.3%
Projected Member Months	1,212	1,176	108	7,692	312	72	1,536
Membership Distribution	1.3%	1.3%	0.1%	8.4%	0.3%	0.1%	1.7%
2014 Plan Adjusted Index Rate (PMPM)	\$250.77	\$306.54	\$292.96	\$369.78	n/a	\$476.84	\$470.60
% Change	11.1%	11.2%	11.6%	12.1%	n/a	12.2%	12.4%
2014 Consumer Level Base Rate	\$241.60	\$295.33	\$282.25	\$356.26	n/a	\$459.40	\$453.39
% Change	9.5%	9.6%	10.0%	10.5%	n/a	10.6%	10.8%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 7/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Advantage 90%/70%	BlueChoice Advantage HSA/HRA \$1500	HealthyBlue HMO \$1,500	HealthyBlue HMO \$300	HealthyBlue HMO \$600	HealthyBlue HMO HSA/HRA \$2,000	HealthyBlue Plus \$1,500
HIOS Product ID	86052DC044	86052DC045	86052DC054	86052DC054	86052DC054	86052DC055	86052DC056
HIOS Plan ID	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0540006	86052DC0550002	86052DC0560004
Metal Level	Platinum	Silver	Gold	Platinum	Platinum	Silver	Gold
Metallic AV	90.26%	70.35%	81.88%	90.26%	89.81%	70.81%	81.88%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Advantage	Open Access Advantage	Open Access	Open Access	Open Access	Open Access	Open Access Plus
High Level Benefit Description	Integrated	Y/N	N	Y	N	N	N
Individual Deductible	Med/\$0 Rx OON: \$2000 Me	IN: \$1500 OON: \$3000	\$1500 Med/\$0 Rx	\$300 Med/\$0 Rx	\$600 Med/\$0 Rx	2000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx
Individual OOP Max	IN: \$2500 OON: \$3500	IN: \$4000 OON: \$6000	\$5,500	\$1,500	\$1,500	\$6,350	IN:\$5500 OON: \$7500
Member Copay/Coinsurance	10% IN / 30% OON	\$30PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 or \$0 DXL OON: \$300 ER/30%	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 for DXL	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/05 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP			
Rx Copays:							
Retail Generic	\$10	\$10	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	20%	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	40%	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89
Plan Level Adjustments							
Cost Share Factor	0.9340	0.6112	0.7616	0.9304	0.9048	0.5873	0.7616
Network &UM	1.0270	1.0270	0.9770	0.9770	0.9770	0.9770	1.0050
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3636	1.3715	1.3636	1.3636	1.3636	1.3715	1.3636
Plan Adjusted Index Rate (PMPM)	\$522.06	\$343.63	\$404.98	\$494.73	\$481.15	\$314.07	\$416.59
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$495.78	\$326.33	\$384.60	\$469.83	\$456.93	\$298.26	\$395.62
Pricing AV	131.2%	86.4%	101.8%	124.3%	120.9%	78.9%	104.7%
Estimated Plan DICR	72.3%	71.9%	72.3%	72.3%	72.3%	71.9%	72.3%
Projected Member Months	132	1,536	1,896	624	12	1,332	3,372
Membership Distribution	0.1%	1.7%	2.1%	0.7%	0.0%	1.5%	3.7%
2014 Plan Adjusted Index Rate (PMPM)	\$470.32	\$303.44	\$355.58	\$441.84	\$431.79	\$276.27	\$366.90
% Change	11.0%	13.2%	13.9%	12.0%	11.4%	13.7%	13.5%
2014 Consumer Level Base Rate	\$453.12	\$292.34	\$342.58	\$425.68	\$416.00	\$266.17	\$353.48
% Change	9.4%	11.6%	12.3%	10.4%	9.8%	12.1%	11.9%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 7/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	HealthyBlue Plus \$300	HealthyBlue Plus \$600	HealthyBlue Plus HSA/HRA \$2,000	HealthyBlue Advantage \$1,500	HealthyBlue Advantage \$300	HealthyBlue Advantage \$600	HealthyBlue Advantage HSA/HRA \$2,000
HIOS Product ID	86052DC056	86052DC056	86052DC057	86052DC052	86052DC052	86052DC052	86052DC053
HIOS Plan ID	86052DC0560005	86052DC0560006	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Metal Level	Platinum	Platinum	Silver	Gold	Platinum	Platinum	Silver
Metallic AV	90.26%	89.81%	70.81%	81.88%	90.26%	89.81%	70.81%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y/N						
Individual Deductible	N	N	Y	N	N	N	Y
Individual OOP Max	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000
Member Copay/Coinsurance	IN:\$1500 OON: \$3000	IN:\$1500 OON: \$3000	IN: \$6350 OON: \$7500	IN: \$5500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1500 OON: \$3000	IN: \$6350 OON: \$7500
Rx Copays:							
Retail Generic	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53	\$373.53
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89	\$397.89
Plan Level Adjustments							
Cost Share Factor	0.9304	0.9048	0.5873	0.7616	0.9304	0.9048	0.5873
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3636	1.3636	1.3715	1.3636	1.3636	1.3636	1.3715
Plan Adjusted Index Rate (PMPM)	\$508.91	\$494.93	\$323.07	\$425.71	\$520.05	\$505.77	\$330.14
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$483.29	\$470.02	\$306.81	\$404.28	\$493.87	\$480.31	\$313.53
Pricing AV	127.9%	124.4%	81.2%	107.0%	130.7%	127.1%	83.0%
Estimated Plan DICR	72.3%	72.3%	71.9%	72.3%	72.3%	72.3%	71.9%
Projected Member Months	2,928	708	516	29,388	1,248	24	384
Membership Distribution	3.2%	0.8%	0.6%	32.0%	1.4%	0.0%	0.4%
2014 Plan Adjusted Index Rate (PMPM)	\$455.89	\$445.52	\$285.06	\$370.78	\$460.73	\$450.25	\$288.08
% Change	11.6%	11.1%	13.3%	14.8%	12.9%	12.3%	14.6%
2014 Consumer Level Base Rate	\$439.22	\$429.23	\$274.64	\$357.22	\$443.88	\$433.78	\$277.55
% Change	10.0%	9.5%	11.7%	13.2%	11.3%	10.7%	13.0%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 10/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO \$250	BlueChoice HMO \$1,800	BlueChoice HMO \$1,000	BlueChoice HMO \$30/\$40	BlueChoice HMO HSA/HRA \$2,000	BlueChoice HMO HSA/HRA \$2,000, 80%	BlueChoice HMO HSA/HRA \$1,500	BlueChoice HMO Referral \$500	
HIOS Product ID	86052DC046	86052DC046	86052DC046	86052DC046	86052DC047	86052DC047	86052DC047	86052DC048	
HIOS Plan ID	86052DC0460006	86052DC0460008	86052DC0460003	86052DC0460007	86052DC0470006	86052DC0470002	86052DC0470005	86052DC0480005	
Metal Level	Gold	Gold	Gold	Platinum	Silver	Silver	Gold	Gold	
Metallic AV	81.86%	78.15%	78.47%	88.31%	71.94%	70.90%	79.69%	78.77%	
On / Off Exchange	On	On	On	On	On	On	On	On	
Network Type	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Open Access	Lock In / Referral	
High Level Benefit Description									
Integrated	Y/N	N	N	Y	N	Y	Y	Y	N
Individual Deductible		\$250 Med/\$0 Rx	\$1800 Med/\$0 Rx	\$1,000	\$0 Med/\$0 Rx	2000	\$2,000	1500	\$500 Med/\$0 Rx
Individual OOP Max		\$3,000	\$2,600	\$3,000	\$1,300	\$5,000	\$4,000	\$2,000	\$3,000
Member Copay/Coinsurance		\$20 PCP/\$30 Spec/\$250 ER/\$500 IP/\$30 DXL	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL	20%	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$0 PCP/\$0 Spec/\$225 ER/\$300 IP/\$0 for DXL	20%	\$15 PCP/\$25 Spec/\$200 ER/\$500 IP/\$25 DXL	\$30 PCP/\$40 Spec/\$250 ER/\$500 IP/\$40 DXL
Rx Copays:									
Retail Generic		\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand		\$45	\$45	20%	\$45	\$45	20%	\$45	\$45
Retail NonPreferred Brand		\$65	\$65	40%	\$65	\$65	40%	\$65	\$65
Specialty		50%	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)		\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1		100%	100%	100%	100%	100%	100%	100%	100%
Class 2		80%	80%	80%	80%	80%	80%	80%	80%
Class 3		80%	80%	80%	80%	80%	80%	80%	80%
Class 4		50%	50%	50%	50%	50%	50%	50%	50%
Class 5		50%	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max		Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)		\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92
Market Level Adjustments:									
Reinsurance		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment		1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)		\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70
Plan Level Adjustments									
Cost Share Factor		0.8099	0.7068	0.7172	0.9515	0.5942	0.5770	0.6930	0.7762
Network &UM		0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9770	0.9300
Non-EHB*		1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost		1.3586	1.3586	1.3586	1.3586	1.3664	1.3664	1.3664	1.3586
Plan Adjusted Index Rate (PMPM)		\$436.45	\$380.90	\$386.48	\$512.76	\$322.02	\$312.69	\$375.57	\$398.16
Calibrations to Consumer Level Rating Factors									
Age Calibration		0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate		\$414.48	\$361.73	\$367.03	\$486.95	\$305.81	\$296.95	\$356.66	\$378.12
Pricing AV		107.8%	94.1%	95.5%	126.7%	79.6%	77.3%	92.8%	98.4%
Estimated Plan DICR		72.6%	72.6%	72.6%	72.6%	72.2%	72.2%	72.2%	72.6%
Projected Member Months		7,068	264	396	3,636	1,536	300	2,064	1,332
Membership Distribution		8.1%	0.3%	0.5%	4.2%	1.8%	0.3%	2.4%	1.5%
2014 Plan Adjusted Index Rate (PMPM)		\$389.43	\$347.33	\$354.24	\$464.53	\$288.52	\$286.30	\$343.81	\$358.97
% Change		12.1%	9.7%	9.1%	10.4%	11.6%	9.2%	9.2%	10.9%
2014 Consumer Level Base Rate		\$375.19	\$334.63	\$341.29	\$447.54	\$277.97	\$275.83	\$331.24	\$345.84
% Change		10.5%	8.1%	7.5%	8.8%	10.0%	7.7%	7.7%	9.3%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 10/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice HMO Referral \$30/\$40	BlueChoice HMO Referral \$10/\$20	BlueChoice HMO Referral HSA/HRA \$4,000	BlueChoice Plus \$2000	BlueChoice Plus 100%/80%, \$10/\$20	BlueChoice Plus 100%/60%, \$20/\$30	BlueChoice Plus 100%/80%, \$20/\$30
HIOS Product ID	86052DC048	86052DC048	86052DC049	86052DC050	86052DC050	86052DC050	86052DC050
HIOS Plan ID	86052DC0480006	86052DC0480004	86052DC0490001	86052DC0500005	86052DC0500008	86052DC0500007	86052DC0500006
Metal Level	Platinum	Platinum	Bronze	Silver	Platinum	Platinum	Platinum
Metallic AV	88.31%	90.60%	61.18%	71.88%	89.10%	88.62%	88.62%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Lock In / Referral	Lock In / Referral	Lock In / Referral	Open Access Plus	Open Access Plus	Open Access	Open Access
High Level Benefit Description							
Integrated	Y/N	N	N	Y	N	N	N
Individual Deductible	\$0 Med/\$0 Rx	\$0 Med/\$0 Rx	\$4,000	IN: \$2000 Med/\$0 Rx OON: \$4000 Med/\$0 Rx	IN: \$0Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$300 Med/\$0 Rx
Individual OOP Max	\$1,300	\$1,300	\$6,350	IN: \$5000 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$30 PCP/\$40 Spec/\$200 ER/\$250 IP/\$40 DXL	\$10 PCP/\$20 Spec/\$50 ER/\$0 IP/\$20 DXL	20%	\$0 PCP/\$0 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/20%	\$10 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/20%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/40%	\$20 PCP/\$30 Spec/\$100 ER/\$250 IP/\$30 DXL OON: \$100 ER/20%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	20%	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	40%	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70
Plan Level Adjustments							
Cost Share Factor	0.9515	0.9744	0.4652	0.6330	0.9645	0.9407	0.9641
Network &UM	0.9300	0.9300	0.9300	1.0050	1.0050	0.9770	0.9770
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3586	1.3586	1.3664	1.3586	1.3586	1.3586	1.3586
Plan Adjusted Index Rate (PMPM)	\$488.10	\$499.81	\$239.99	\$350.88	\$534.63	\$506.92	\$519.51
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$463.53	\$474.65	\$227.91	\$333.22	\$507.72	\$481.41	\$493.36
Pricing AV	120.6%	123.5%	59.3%	86.7%	132.1%	125.3%	128.4%
Estimated Plan DICR	72.6%	72.6%	72.2%	72.6%	72.6%	72.6%	72.6%
Projected Member Months	4,320	1,716	180	108	2,136	1,536	7,308
Membership Distribution	4.9%	2.0%	0.2%	0.1%	2.4%	1.8%	8.4%
2014 Plan Adjusted Index Rate (PMPM)	\$442.82	\$455.60	\$219.15	\$314.79	\$486.00	\$460.07	\$471.96
% Change	10.2%	9.7%	9.5%	11.5%	10.0%	10.2%	10.1%
2014 Consumer Level Base Rate	\$426.63	\$438.94	\$211.14	\$303.28	\$468.23	\$443.25	\$454.70
% Change	8.6%	8.1%	7.9%	9.9%	8.4%	8.6%	8.5%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 10/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Plus HSA/HRA \$3500	BlueChoice Plus HSA/HRA \$1500	BlueChoice Plus HSA/HRA \$2000	BlueChoice Advantage \$1000	BlueChoice Advantage \$500 \$20/\$30	BlueChoice Advantage 80%/50%	BlueChoice Advantage 100%/70%
HIOS Product ID	86052DC051	86052DC051	86052DC051	86052DC044	86052DC044	86052DC044	86052DC044
HIOS Plan ID	86052DC0510006	86052DC0510004	86052DC0510005	86052DC0440008	86052DC0440009	86052DC0440006	86052DC0440007
Metal Level	Bronze	Silver	Silver	Gold	Gold	Platinum	Platinum
Metallic AV	61.62%	71.67%	68.90%	78.69%	78.51%	88.76%	88.37%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description							
Integrated	Y	Y	Y	N	N	N	N
Individual Deductible	IN: \$3500 OON: \$6000	IN: \$1500 OON: \$3000	IN: \$2000 OON: \$4000	IN: \$1000 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN: \$500 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$0 Med/\$0 Rx OON: \$500 Med/\$0 Rx
Individual OOP Max	IN: \$5250 OON: \$7500	IN: \$4000 OON: \$6000	IN: \$5000 OON: \$7500	IN: \$2500 OON: \$5000	IN: \$4500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1100 OON: \$2200
Member Copay/Coinsurance	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$15 PCP/\$25 Spec/\$100 ER/\$250 IP/\$25 DXL OON: \$100 ER/20%	\$0 PCP/\$0 Spec/\$100 ER/\$250 IP/\$0 DXL OON: \$100 ER/20%	\$30 PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 DXL OON: \$300 ER/30%	\$20 PCP/\$30 Spec/\$300 ER/\$500 IP/\$30-\$60 DXL OON: \$300 ER/\$750 IP/\$50	\$20 PCP/\$20 Spec/\$100 ER/\$250 IP/\$20 DXL OON: \$100 ER/50%/30% OP Surg	\$30 PCP/\$30 Spec/\$200 ER/\$300 IP/\$30 DXL OON: \$200 ER/30%
Rx Copays:							
Retail Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70
Plan Level Adjustments							
Cost Share Factor	0.5064	0.6193	0.5942	0.7413	0.7834	0.9573	0.9464
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3664	1.3664	1.3664	1.3586	1.3586	1.3586	1.3586
Plan Adjusted Index Rate (PMPM)	\$282.33	\$345.28	\$331.28	\$419.94	\$443.76	\$542.25	\$536.11
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$268.12	\$327.90	\$314.60	\$398.81	\$421.42	\$514.96	\$509.13
Pricing AV	69.8%	85.3%	81.9%	103.8%	109.7%	134.0%	132.5%
Estimated Plan DICR	72.2%	72.2%	72.2%	72.6%	72.6%	72.6%	72.6%
Projected Member Months	1,164	1,116	96	7,332	300	60	1,464
Membership Distribution	1.3%	1.3%	0.1%	8.4%	0.3%	0.1%	1.7%
2014 Plan Adjusted Index Rate (PMPM)	\$256.04	\$312.99	\$299.13	\$377.56	n/a	\$486.86	\$480.50
% Change	10.3%	10.3%	10.7%	11.2%	n/a	11.4%	11.6%
2014 Consumer Level Base Rate	\$246.68	\$301.54	\$288.19	\$363.75	n/a	\$469.06	\$462.93
% Change	8.7%	8.7%	9.2%	9.6%	n/a	9.8%	10.0%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 10/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	BlueChoice Advantage 90%/70%	BlueChoice Advantage HSA/HRA \$1500	HealthyBlue HMO \$1,500	HealthyBlue HMO \$300	HealthyBlue HMO \$600	HealthyBlue HMO HSA/HRA \$2,000	HealthyBlue Plus \$1,500
HIOS Product ID	86052DC044	86052DC045	86052DC054	86052DC054	86052DC054	86052DC055	86052DC056
HIOS Plan ID	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0540006	86052DC0550002	86052DC0560004
Metal Level	Platinum	Silver	Gold	Platinum	Platinum	Silver	Gold
Metallic AV	90.26%	70.35%	81.88%	90.26%	89.81%	70.81%	81.88%
On / Off Exchange	On	On	On	On	On	On	On
Network Type	Open Access Advantage	Open Access Advantage	Open Access	Open Access	Open Access	Open Access	Open Access Plus
High Level Benefit Description	Integrated	Y/N	N	Y	N	N	N
Individual Deductible	Med/\$0 Rx OON: \$2000 Me	IN: \$1500 OON: \$3000	\$1500 Med/\$0 Rx	\$300 Med/\$0 Rx	\$600 Med/\$0 Rx	2000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx
Individual OOP Max	IN: \$2500 OON: \$3500	IN: \$4000 OON: \$6000	\$5,500	\$1,500	\$1,500	\$6,350	IN:\$5500 OON: \$7500
Member Copay/Coinsurance	10% IN / 30% OON	\$30PCP/\$30 Spec/\$300 ER/\$300 IP/\$30 or \$0 DXL OON: \$300 ER/30%	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 for DXL	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP			
Rx Copays:							
Retail Generic	\$10	\$10	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	20%	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	40%	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx	Embedded in Med and Rx
Index Rate (Projected EHB Allowed PMPM)	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92	\$379.92
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70	\$404.70
Plan Level Adjustments							
Cost Share Factor	0.9340	0.6112	0.7616	0.9304	0.9048	0.5873	0.7616
Network &UM	1.0270	1.0270	0.9770	0.9770	0.9770	0.9770	1.0050
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3586	1.3664	1.3586	1.3586	1.3586	1.3664	1.3586
Plan Adjusted Index Rate (PMPM)	\$529.06	\$348.21	\$410.42	\$501.37	\$487.60	\$318.26	\$422.18
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$502.43	\$330.68	\$389.76	\$476.13	\$463.06	\$302.24	\$400.93
Pricing AV	130.7%	86.0%	101.4%	123.9%	120.5%	78.6%	104.3%
Estimated Plan DICR	72.6%	72.2%	72.6%	72.6%	72.6%	72.6%	72.6%
Projected Member Months	144	1,464	1,812	612	12	1,260	3,204
Membership Distribution	0.2%	1.7%	2.1%	0.7%	0.0%	1.4%	3.7%
2014 Plan Adjusted Index Rate (PMPM)	\$480.21	\$309.82	\$363.07	\$451.13	\$440.87	\$282.09	\$374.61
% Change	10.2%	12.4%	13.0%	11.1%	10.6%	12.8%	12.7%
2014 Consumer Level Base Rate	\$462.65	\$298.49	\$349.79	\$434.63	\$424.75	\$271.77	\$360.91
% Change	8.6%	10.8%	11.4%	9.5%	9.0%	11.2%	11.1%

* Covers abortion claims for all plans.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice Plan Level Rate Derivation - 10/1/2015

Assumes Index Rate = Projected Pool Allowed Claims PMPM for EHB

Plan	HealthyBlue Plus \$300	HealthyBlue Plus \$600	HealthyBlue Plus HSA/HRA \$2,000	HealthyBlue Advantage \$1,500	HealthyBlue Advantage \$300	HealthyBlue Advantage \$600	HealthyBlue Advantage HSA/HRA \$2,000
HIOS Product ID	86052DC056	86052DC056	86052DC057	86052DC052	86052DC052	86052DC052	86052DC053
HIOS Plan ID	86052DC0560005	86052DC0560006	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Metal Level	Platinum	Platinum	Silver	Gold	Platinum	Platinum	Silver
Metallic AV	90.26%	89.81%	70.81%	81.88%	90.26%	89.81%	70.81%
On / Off Exchange	On						
Network Type	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Advantage	Open Access Advantage	Open Access Advantage	Open Access Advantage
High Level Benefit Description	Integrated Y/N	N	N	Y	N	N	Y
Individual Deductible	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000	IN:\$1500 Med/\$0 Rx OON: \$3000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN:\$300 Med/\$0 Rx OON: \$1000 Med/\$0 Rx	IN: \$2000 OON: \$4000
Individual OOP Max	IN:\$1500 OON: \$3000	IN:\$1500 OON: \$3000	IN: \$6350 OON: \$7500	IN: \$5500 OON: \$7500	IN: \$1500 OON: \$3000	IN: \$1500 OON: \$3000	IN: \$6350 OON: \$7500
Member Copay/Coinsurance	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP	\$0 PCP/\$30 Spec/\$200 ER/\$300 IP/\$0 DXL OON: \$200 ER/\$500 IP/\$50/\$500 OP
Rx Copays:							
Retail Generic	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Retail Preferred Brand	\$45	\$45	\$45	\$45	\$45	\$45	\$45
Retail NonPreferred Brand	\$65	\$65	\$65	\$65	\$65	\$65	\$65
Specialty	50%	50%	50%	50%	50%	50%	50%
Embedded Pediatric Dental Benefit Deductible (Class 2-4)	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Class 1	100%	100%	100%	100%	100%	100%	100%
Class 2	80%	80%	80%	80%	80%	80%	80%
Class 3	80%	80%	80%	80%	80%	80%	80%
Class 4	50%	50%	50%	50%	50%	50%	50%
Class 5	50%	50%	50%	50%	50%	50%	50%
Out of Pocket Max	Embedded in Med and Rx						
Index Rate (Projected EHB Allowed PMPM)	\$379.92						
Market Level Adjustments:							
Reinsurance	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Risk Adjustment	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652	1.0652
Exchange User Fees	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Market Adjusted Index Rate (PMPM)	\$404.70						
Plan Level Adjustments							
Cost Share Factor	0.9304	0.9048	0.5873	0.7616	0.9304	0.9048	0.5873
Network &UM	1.0050	1.0050	1.0050	1.0270	1.0270	1.0270	1.0270
Non-EHB*	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031	1.0031
Catastrophic Adj	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Distribution and Admin Cost	1.3586	1.3586	1.3664	1.3586	1.3586	1.3586	1.3664
Plan Adjusted Index Rate (PMPM)	\$515.74	\$501.58	\$327.38	\$431.42	\$527.03	\$512.56	\$334.55
Calibrations to Consumer Level Rating Factors							
Age Calibration	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497	0.9497
Geo Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tobacco Calibration	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Consumer Level Base Rate	\$489.78	\$476.33	\$310.91	\$409.71	\$500.50	\$486.76	\$317.71
Pricing AV	127.4%	123.9%	80.9%	106.6%	130.2%	126.7%	82.7%
Estimated Plan DICR	72.6%	72.6%	72.2%	72.6%	72.6%	72.6%	72.2%
Projected Member Months	2,796	684	492	27,996	1,188	24	372
Membership Distribution	3.2%	0.8%	0.6%	32.0%	1.4%	0.0%	0.4%
2014 Plan Adjusted Index Rate (PMPM)	\$465.48	\$454.90	\$291.06	\$378.58	\$470.41	\$459.71	\$294.15
% Change	10.8%	10.3%	12.5%	14.0%	12.0%	11.5%	13.7%
2014 Consumer Level Base Rate	\$448.46	\$438.26	\$280.42	\$364.74	\$453.21	\$442.90	\$283.39
% Change	9.2%	8.7%	10.9%	12.3%	10.4%	9.9%	12.1%

* Covers abortion claims for all plans.

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group SHOP Exchange Products
Rates Effective 01/01/2015
Single Risk Pool Desired Incurred Claims Ratio (DICR)

	Medical	Rx	Total
Projected Allowed Claims PMPM (EHB and Non-EHB)	\$ 277.61	\$ 84.61	\$ 362.22
Projected Paid / Allowed Ratio	80.4%	80.4%	80.4%
Adjustment for Risk Transfer			\$ 23.55
Projected Paid Claims PMPM (EHB and Non-EHB), Adjusted for Risk Transfer			\$ 310.16

	Non-CDH		CDH		Total		Total (1Q14)*	% Δ
	PMPM	%	PMPM	%	PMPM	%	%	
Projected Allowed Claims (+ Capitations)	\$ 310.16	72.8%	\$ 310.16	72.4%	\$ 310.16	72.7%	76.9%	-4.2%
Admin Costs	\$ 33.65	7.9%	\$ 33.65	7.9%	\$ 33.65	7.9%	7.9%	0.0%
Patient Outcome Tax	\$ 0.18	0.0%	\$ 0.18	0.0%	\$ 0.18	0.0%	0.0%	0.0%
Reinsurance	\$ 3.60	0.8%	\$ 3.60	0.8%	\$ 3.60	0.8%	1.3%	-0.4%
Risk Adjustment User Fees	\$ 0.08	0.0%	\$ 0.08	0.0%	\$ 0.08	0.0%	0.0%	0.0%
Broker Commissions & Fees	\$ 29.06	6.8%	\$ 29.06	6.8%	\$ 29.06	6.8%	6.4%	0.4%
Contrib to Reserve	\$ 5.54	1.3%	\$ 5.57	1.3%	\$ 5.54	1.3%	1.9%	-0.6%
Invst Income Credit*	\$ (0.00)	0.0%	\$ (0.00)	0.0%	\$ (0.00)	0.0%	0.0%	0.0%
Premium Taxes/Community Health Investment*	\$ 8.52	2.0%	\$ 8.57	2.0%	\$ 8.53	2.0%	2.0%	0.0%
Assessment Fees*	\$ 0.49	0.1%	\$ 0.49	0.1%	\$ 0.49	0.1%	0.1%	0.0%
Federal Income Tax	\$ 2.98	0.7%	\$ 3.00	0.7%	\$ 2.98	0.7%	1.1%	-0.4%
State Income Tax	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Exchange Assessment Fee	\$ 8.52	2.0%	\$ 8.57	2.0%	\$ 8.53	2.0%	0.0%	2.0%
Health Insurer Fee	\$ 13.63	3.2%	\$ 13.72	3.2%	\$ 13.64	3.2%	2.3%	0.9%
Exchange Fees	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Incentive Program	\$ 9.67	2.3%	\$ 9.67	2.3%	\$ 9.67	2.3%	0.0%	2.3%
CDH Expenses	\$ -	0.0%	\$ 2.29	0.5%	\$ 0.26	0.1%	0.0%	0.0%
Total	\$ 426.08	100.0%	\$ 428.60	100.0%	\$ 426.37	100.0%	100.0%	

* From approved BlueChoice DC Small Group filing effective 1/1/2014, SERFF tracking # CFAP-129047155

Note: The Contribution to Reserve shown is post-tax. The pre-tax contribution is 2.0%.

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group SHOP Exchange Products
Rates Effective 04/01/2015
Single Risk Pool Desired Incurred Claims Ratio (DICR)

	Medical	Rx	Total
Projected Allowed Claims PMPM (EHB and Non-EHB)	\$ 282.14	\$ 86.26	\$ 368.40
Projected Paid / Allowed Ratio	80.4%	80.4%	80.4%
Adjustment for Risk Transfer			\$ 23.95
Projected Paid Claims PMPM (EHB and Non-EHB), Adjusted for Risk Transfer			\$ 315.49

	Non-CDH		CDH		Total		Total (1Q15)	% Δ
	PMPM	%	PMPM	%	PMPM	%	%	
Projected Allowed Claims (+ Capitations)	\$ 315.49	73.1%	\$ 315.49	72.6%	\$ 315.49	73.0%	72.7%	0.3%
Admin Costs	\$ 33.65	7.8%	\$ 33.65	7.7%	\$ 33.65	7.8%	7.9%	-0.1%
Patient Outcome Tax	\$ 0.18	0.0%	\$ 0.18	0.0%	\$ 0.18	0.0%	0.0%	0.0%
Reinsurance	\$ 3.25	0.8%	\$ 3.25	0.7%	\$ 3.25	0.8%	0.8%	-0.1%
Risk Adjustment User Fees	\$ 0.08	0.0%	\$ 0.08	0.0%	\$ 0.08	0.0%	0.0%	0.0%
Broker Commissions & Fees	\$ 29.06	6.7%	\$ 29.06	6.7%	\$ 29.06	6.7%	6.8%	-0.1%
Contrib to Reserve	\$ 5.61	1.3%	\$ 5.65	1.3%	\$ 5.62	1.3%	1.3%	0.0%
Invst Income Credit*	\$ (0.00)	0.0%	\$ (0.00)	0.0%	\$ (0.00)	0.0%	0.0%	0.0%
Premium Taxes/Community Health Investment*	\$ 8.63	2.0%	\$ 8.69	2.0%	\$ 8.64	2.0%	2.0%	0.0%
Assessment Fees*	\$ 0.50	0.1%	\$ 0.50	0.1%	\$ 0.50	0.1%	0.1%	0.0%
Federal Income Tax	\$ 3.02	0.7%	\$ 3.04	0.7%	\$ 3.02	0.7%	0.7%	0.0%
State Income Tax	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Exchange Assessment Fee	\$ 8.63	2.0%	\$ 8.69	2.0%	\$ 8.64	2.0%	2.0%	0.0%
Health Insurer Fee	\$ 13.82	3.2%	\$ 13.90	3.2%	\$ 13.82	3.2%	3.2%	0.0%
Exchange Fees	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Incentive Program	\$ 9.82	2.3%	\$ 9.82	2.3%	\$ 9.82	2.3%	2.3%	0.0%
CDH Expenses	\$ -	0.0%	\$ 2.29	0.5%	\$ 0.26	0.1%	0.1%	0.0%
Total	\$ 431.73	100.0%	\$ 434.26	100.0%	\$ 432.02	100.0%	100.0%	

Note: The Contribution to Reserve shown is post-tax. The pre-tax contribution is 2.0%.

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group SHOP Exchange Products
Rates Effective 07/01/2015
Single Risk Pool Desired Incurred Claims Ratio (DICR)

	Medical	Rx	Total
Projected Allowed Claims PMPM (EHB and Non-EHB)	\$ 286.74	\$ 87.95	\$ 374.69
Projected Paid / Allowed Ratio	80.4%	80.4%	80.4%
Adjustment for Risk Transfer			\$ 24.36
Projected Paid Claims PMPM (EHB and Non-EHB), Adjusted for Risk Transfer			\$ 320.85

	Non-CDH		CDH		Total		Total (2Q15)	% Δ
	PMPM	%	PMPM	%	PMPM	%	%	
Projected Allowed Claims (+ Capitations)	\$ 320.85	73.3%	\$ 320.85	72.9%	\$ 320.85	73.3%	73.0%	0.3%
Admin Costs	\$ 33.65	7.7%	\$ 33.65	7.6%	\$ 33.65	7.7%	7.8%	-0.1%
Patient Outcome Tax	\$ 0.18	0.0%	\$ 0.18	0.0%	\$ 0.18	0.0%	0.0%	0.0%
Reinsurance	\$ 2.96	0.7%	\$ 2.96	0.7%	\$ 2.96	0.7%	0.8%	-0.1%
Risk Adjustment User Fees	\$ 0.08	0.0%	\$ 0.08	0.0%	\$ 0.08	0.0%	0.0%	0.0%
Broker Commissions & Fees	\$ 29.06	6.6%	\$ 29.06	6.6%	\$ 29.06	6.6%	6.7%	-0.1%
Contrib to Reserve	\$ 5.69	1.3%	\$ 5.72	1.3%	\$ 5.69	1.3%	1.3%	0.0%
Invst Income Credit*	\$ (0.00)	0.0%	\$ (0.00)	0.0%	\$ (0.00)	0.0%	0.0%	0.0%
Premium Taxes/Community Health Investment*	\$ 8.75	2.0%	\$ 8.80	2.0%	\$ 8.76	2.0%	2.0%	0.0%
Assessment Fees*	\$ 0.50	0.1%	\$ 0.51	0.1%	\$ 0.50	0.1%	0.1%	0.0%
Federal Income Tax	\$ 3.06	0.7%	\$ 3.08	0.7%	\$ 3.06	0.7%	0.7%	0.0%
State Income Tax	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Exchange Assessment Fee	\$ 8.75	2.0%	\$ 8.80	2.0%	\$ 8.76	2.0%	2.0%	0.0%
Health Insurer Fee	\$ 14.00	3.2%	\$ 14.08	3.2%	\$ 14.01	3.2%	3.2%	0.0%
Exchange Fees	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Incentive Program	\$ 9.99	2.3%	\$ 9.99	2.3%	\$ 9.99	2.3%	2.3%	0.0%
CDH Expenses	\$ -	0.0%	\$ 2.29	0.5%	\$ 0.26	0.1%	0.1%	0.0%
Total	\$ 437.51	100.0%	\$ 440.04	100.0%	\$ 437.80	100.0%	100.0%	

Note: The Contribution to Reserve shown is post-tax. The pre-tax contribution is 2.0%.

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group SHOP Exchange Products
Rates Effective 10/01/2015
Single Risk Pool Desired Incurred Claims Ratio (DICR)

	Medical	Rx	Total
Projected Allowed Claims PMPM (EHB and Non-EHB)	\$ 291.43	\$ 89.68	\$ 381.11
Projected Paid / Allowed Ratio	80.4%	80.4%	80.4%
Adjustment for Risk Transfer			\$ 24.78
Projected Paid Claims PMPM (EHB and Non-EHB), Adjusted for Risk Transfer			\$ 326.35

	Non-CDH		CDH		Total		Total (3Q15)	% Δ
	PMPM	%	PMPM	%	PMPM	%	%	
Projected Allowed Claims (+ Capitations)	\$ 326.35	73.6%	\$ 326.35	73.2%	\$ 326.35	73.6%	73.3%	0.3%
Admin Costs	\$ 33.65	7.6%	\$ 33.65	7.5%	\$ 33.65	7.6%	7.7%	-0.1%
Patient Outcome Tax	\$ 0.18	0.0%	\$ 0.18	0.0%	\$ 0.18	0.0%	0.0%	0.0%
Reinsurance	\$ 2.63	0.6%	\$ 2.63	0.6%	\$ 2.63	0.6%	0.7%	-0.1%
Risk Adjustment User Fees	\$ 0.08	0.0%	\$ 0.08	0.0%	\$ 0.08	0.0%	0.0%	0.0%
Broker Commissions & Fees	\$ 29.06	6.6%	\$ 29.06	6.5%	\$ 29.06	6.5%	6.6%	-0.1%
Contrib to Reserve	\$ 5.76	1.3%	\$ 5.80	1.3%	\$ 5.77	1.3%	1.3%	0.0%
Invst Income Credit*	\$ (0.00)	0.0%	\$ (0.00)	0.0%	\$ (0.00)	0.0%	0.0%	0.0%
Premium Taxes/Community Health Investment*	\$ 8.87	2.0%	\$ 8.92	2.0%	\$ 8.87	2.0%	2.0%	0.0%
Assessment Fees*	\$ 0.51	0.1%	\$ 0.51	0.1%	\$ 0.51	0.1%	0.1%	0.0%
Federal Income Tax	\$ 3.10	0.7%	\$ 3.12	0.7%	\$ 3.11	0.7%	0.7%	0.0%
State Income Tax	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Exchange Assessment Fee	\$ 8.87	2.0%	\$ 8.92	2.0%	\$ 8.87	2.0%	2.0%	0.0%
Health Insurer Fee	\$ 14.19	3.2%	\$ 14.27	3.2%	\$ 14.20	3.2%	3.2%	0.0%
Exchange Fees	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	0.0%	0.0%
Incentive Program	\$ 10.16	2.3%	\$ 10.16	2.3%	\$ 10.16	2.3%	2.3%	0.0%
CDH Expenses	\$ -	0.0%	\$ 2.29	0.5%	\$ 0.26	0.1%	0.1%	0.0%
Total	\$ 443.39	100.0%	\$ 445.92	100.0%	\$ 443.68	100.0%	100.0%	

Note: The Contribution to Reserve shown is post-tax. The pre-tax contribution is 2.0%.

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Support for DICR Components

Estimated Breakdown of Admin Costs

	% of Revenue
Salaries/Wages/Benefits	3.4%
Quality Improvement Activities	1.0%
Other General Admin	3.5%
Total Admin Costs	7.9%

ACA Fees

Patient Outcome Tax (PCORI)	\$	2.11	PMPY
Divide by 12:	\$	0.18	PMPM
Reinsurance 2015	\$	3.67	PMPM
Reinsurance 2016	\$	2.44	PMPM
Risk Adjustment User Fees	\$	0.96	PMPY
Divide by 12:	\$	0.08	PMPM
Health Insurer Fee 2015		3.2%	of premium
Health Insurer Fee 2016		3.2%	of premium
Exchange Fees		0.0%	of premium
Exchange Assessment Fee 2014		1.0%	of premium
Exchange Assessment Fee 2015		1.0%	of premium

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Development of Anticipated Medical Loss Ratio, as Defined by PPACA

		BlueChoice Projected
(1)a	Projected Claims (Trend & Capitation)	\$115,185,904
(1)b	Experience Period Member Months	395,516
(1)c	Credibility Factor	1.00
(1)d	Projected Claims (DICR) = DICR x Revenue - Risk Adjustment	\$115,185,904
(1)e	Projected Claims (Final) = (1)a x (1)c + (1)d x (1-(1)c)	\$115,185,904
(2)	Projected Revenue	\$168,635,431
(3) = (1)e / (2)	Anticipated Incurred Straight LR	68.3%
(4)	Health Care Improvement*	\$4,653,511
(5)	ITS Fees	(\$296,508)
(6)	Risk Transfer Payment/Receipt	\$11,260,776
(7) = (1)e + (4) + (5) + (6)	MLR Numerator	\$130,803,683
(8)	Federal Taxes	\$1,180,448
(9)	State and Premium Taxes	\$3,372,709
(10)	ACA Fees**	\$10,295,257
(11) = (8) + (9) + (10)	Total Taxes & Regulatory Fees	\$14,848,413
(12) = (2) - (11)	MLR Denominator	\$153,787,018
(13) = (7) / (12)	Projected MLR	85.1%

* Estimated at 4.04% of care costs for BlueChoice. Adjustments 1 & 2 below are based on actual health care improvement adjustments for all BlueChoice D.C. Small Group business in 2013, following our understanding of HHS guidelines at the time.

- | | |
|--|--------------|
| 1. Removal of costs which we book as care, but are not considered care under MLR guidelines: | -0.75% |
| 2. Health care improvement expenses: | 1.47% |
| 3. Incentive program quality improvement expenses | 3.32% |
| 4. Net adjustment: | 4.04% |

** Includes Patient Outcome Tax, Reinsurance, Risk Adjustment User Fees, Exchange Fees, Exchange Assessment Fee, and Health Insurer Fee.

Credibility Factor Derivation:

	CMS (Assigned Credibility of <20% = 0%; >90% = 100%)	
BC	Exp Pd Member Months	395,516 100.0%

The verbal description is from pages 15 and 16 of the CY2013 Medicare Advantage Bid Pricing Tool instructions.

Based on an application of classical credibility theory to Medicare FFS experience, CMS has established a guideline for full credibility for MA plans of 24,000 total base period member months. The formula for partial credibility is the square root of the result of base period member months divided by 24,000. This formula is a guideline; actuaries must consider the quality of the base period experience when calculating credibility. Plan sponsors may use a different credibility methodology only if the alternate method is consistently applied among all plans in the contract and is deemed acceptable by CMS.

The certifying actuary must adhere to the following rules of overriding the CMS credibility formula for partial credibility:

- If the CMS formula for partial credibility is applied to base period member months and the resulting credibility is—
- Less than or equal to 20 percent (that is, 960 or fewer MA member months), then the actuary may override the computed credibility with 0 percent credibility.
- Greater than or equal to 90 percent (that is, 19,440 or more MA member months), then the actuary may override the computed credibility with 100 percent credibility.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Summary of Wakely Small Group Modeling

	Relative Risk Score*		Projected Index Rate	Estimated Risk Adjustment PMPM (Applied to Projected Index Rate)	Calculated Risk Adjustment Factor	Proposed Value for Rate Filing	Proposed PMPM Applied to Projected Index Rate
BlueChoice	0.92	1Q15	\$ 361.09	\$ 31.40	1.087	1.065	\$ 23.55
		2Q15	\$ 367.26	\$ 31.94	1.087	1.065	\$ 23.95
		3Q15	\$ 373.53	\$ 32.48	1.087	1.065	\$ 24.36
		4Q15	\$ 379.92	\$ 33.04	1.087	1.065	\$ 24.78

* Assumes market risk score = 1.0

The proposed risk adjustment was developed based on a multi-carrier study conducted by Wakely Consulting. Given the uncertainty in estimating these values, we have applied 75% of the estimated values from Wakely.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Description of "Other" Adjustments to Experience Period Data

The adjustment descriptions below detail the build up of our "Other" multiplicative factors used in adjusting the experience period allowed PMPM amounts to the projection period. These adjustments coincide with those used in worksheet I section II of the URRT. Please see pages 47 - 54 for support of these factors.

Service Category	Other Factor	Description of Adjustment
Inpatient	0.994	Multiplicative factors of 1.011 for changes in average age of the pool, 1.015 to reflect the impact of early renewing business, 0.971 to reflect the impact of the new Incentive Program, 0.999 to reflect decreased utilization in Ind 64- maternity, and 0.998 to reflect a reduction in Out-Of-Network fees.
Outpatient	0.994	Multiplicative factors of 1.011 for changes in average age of the pool, 1.015 to reflect the impact of early renewing business, 0.971 to reflect the impact of the new Incentive Program, 0.999 to reflect decreased utilization in Ind 64- maternity, and 0.998 to reflect a reduction in Out-Of-Network fees.
Professional	1.039	Multiplicative factors of 1.011 for changes in average age of the pool, 1.045 for changes in treatment of ABA services, 1.015 to reflect the impact of early renewing business, 0.971 to reflect the impact of the new Incentive Program, 0.999 to reflect decreased utilization in Ind 64- maternity, and 0.998 to reflect a reduction in Out-Of-Network fees.
Other	1.294	Multiplicative factors of 1.011 for changes in average age of the pool, 1.301 to reflect the impact of embedded pediatric dental benefit, 1.015 to reflect the impact of early renewing business, 0.971 to reflect the impact of the new Incentive Program, and 0.998 to reflect a reduction in Out-Of-Network fees.
Rx	0.961	Multiplicative factors of 0.924 to reflect differences in discounts between the experience period and projection period, 1.041 to reflect the impact of expanding our list of drugs to include the hepatitis C drug Sovaldi, and 1.004 to reflect changes in our Mandatory Generic policy. Also includes multiplicative factors of 1.011 for changes in average age of the pool, 1.015 to reflect the impact of early renewing business, 0.971 to reflect the impact of the new Incentive Program, 0.999 to reflect decreased utilization in Ind 64- maternity, and 0.998 to reflect a reduction in Out-Of-Network fees.
Capitation	0.957	Multiplicative factor of 0.957 to reflect inclusion of pediatric vision benefit.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Support for "Other" adjustment factors

<u>Early Renewal Factor Derivation</u>	Allowed Claims	Item	Calculation
Early Renewal (Small Group Only, BC & GHMSI combined)	PMPM		
Experience Period Total Allowed PMPM of Early renewing cohort	\$ 397.23	(1)	
Experience Period Total Allowed PMPM of Non-Early renewing cohort	\$ 419.26	(2)	
Combined Experience Period Total Allowed PMPM	\$ 412.06	(3)	
Early Renewal Adjustment Factor (Small Group Only)	1.7%		(4) = (2) / (3)-1
Early Renewal Adjustment Factor (Blended Across Single Risk Pool)	1.5%		
<u>Rx Discount Factor Derivation (Based on CFI Total Book of Business Data)</u>			
Grand Total New Allowed	\$ 1,154,386,773	(1)	
Grand Total Old Allowed	\$ 1,249,560,894	(2)	
\$ Difference	\$ (95,174,121)	(3)	
% Difference	-7.6%		(4) = (3)/(2)
<u>Mandatory Generic Factor Derivation (Based on CFI Total Book of Business Data)</u>			
Total \$ Impact Due to expansion of list of Mandatory Generic Drugs	\$ 4,594,160	(1)	
Total 2013 Drug Claims	\$ 1,249,560,894	(2)	
% Increase in Paid Drug \$	0.4%		(3) = (1)/(2)
<u>Sovaldi Factor Derivation</u>			
% Impact to total experience period allowed PMPM (see page 48 for details)	1.0%	(1)	
Experience Period Allowed Rx PMPM	\$ 75.41	(2)	
Total Experience Period Allowed PMPM	\$ 312.41	(3)	
\$ Amount of Sovaldi Drug	\$ 3.12	(4) = (1) * (3)	
Sovaldi Impact to Rx Only	4.10%		(5) = (4) / (2)
<u>Changes in treatment of ABA services (see page 49 for details)</u>			
<u>Ind64-</u>			
\$ Impact to Experience Period Allowed PMPM	\$ 1.74	(1)	
Experience Period Allowed PMPM for Professional Services	\$ 112.48	(2)	
Changes in treatment of ABA services - Impact (to Ind64- Professional only)	1.5%		(3) = (1)/(2)
<u>Small Group</u>			
\$ Impact to Experience Period Allowed PMPM	\$ 5.15	(4)	
Experience Period Allowed PMPM for Professional Services	\$ 104.25	(5)	
Changes in treatment of ABA services - Impact (to Small Group Professional only)	4.9%		(6) = (4)/(5)
Changes in treatment of ABA services - Impact to Professional only (Blended Across Single Risk Pool)	4.5%		
<u>Demographic Factor Derivation</u>			
Demographic Impact (Blended Across Single Risk Pool)	1.1%		
<u>Fee Schedule Change - Out-of-Network service area</u>			
We were able to reduce a portion of our Out-of-Network fee schedule or NP3. The result is a positive impact on savings and thus a negative impact on claims experience. The value below represents the expected savings and is applied to each service category (except capitation) of the Index Rate Derivation. It is specifically applied to all of the "Other Projection Factors".			
Fee Schedule Change - Out-of-Network service area	-0.2%		
<u>Changes in Maternity Utilization (Ind64- Only) (see pages 50 - 51 for details)</u>			
\$ Impact to total experience period allowed PMPM	\$ (1.73)	(1)	
Total Experience Period Allowed	\$ 370.32	(2)	
Impact of Changes in Maternity Utilization - (Ind64- Only)	-0.5%		(3) = (1)/(2)
Impact of Changes in Maternity Utilization - (Blended Across Single Risk Pool)	-0.1%		

Note: Blended adjustments are an average of Ind64- and Small Group adjustments, weighted by claims.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Sovaldi Factor Derivation

	US Population	320 Million	
A	Number of chronic hepatitis C persons in US (source: CDC)	3.2 Million	
	Cost per 90-day script of Sovaldi	\$84,000	
	However, Sovaldi has to be taken with ribavirin and interferon. Cost of 90day supply of both	<u>\$10,000</u>	
B	Total cost per 90-day regimen (Sovaldi + ribavirin + interferon)	\$94,000	
C=A*B	Total maximum market potential for 90-day regimen (\$ Billion)	\$300 Billion	
D	First quarter Sovaldi sales (Gilead Sciences 1Q14 earnings report)	\$2.27 Billion	
E=D*4	Annualized 2014 Sovaldi sales assuming flat growth in Q2-Q4 {lower bound}	\$9 Billion	
F=(94/84)*E	Annualized cost of regimen	\$10 Billion	
	<u>Breakdown of US Population by payor mix (Million)</u>		
	Commercial	147	
	Medicare	51	
G	Medicaid	61	
	Tricare/Other Insured	10	
	Uninsured	<u>47</u>	
	US Total Population (2013)	316	
	<u>Number of Commercial Equivalent Membership Units (Million)</u>		
	Commercial	147	
	Medicare	50	
H=G*.75	Medicaid (pays 25% lower costs on brand name drugs than Medicare)	41	
	Tricare	<u>10</u>	
I	Total Commercial Equivalent Membership Units	248	
J=F/I	Cost per commercial equivalent member per year	\$40	
K	CFI Risk average allowed claim cost per year	\$4,062	
L	Sovaldi regimen costs as % of allowed claims	<table border="1" style="display: inline-table;"><tr><td style="text-align: center;">1%</td></tr></table>	1%
1%			
		(lower bound)	

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Autism Cost Model

Average Cost:	Assume treatment cost per hour for intensive ABA therapy	\$46
	Assume treatment of \$75 per hour for non-intensive therapy	\$97

	ABA Therapy hrs/wk	Other Therapy hrs/wk	Hrs/Yr Therapy	Cost Per Year Therapy
Children 2-5:	40	0	2080	94,826
Children 6-7:	15	5	1040	60,894
Children 8-12:	0	10	520	50,668
Children 13-21:	0	8	416	40,534

Utilization:	Assume 1 in every 68 children age 1-21 have Autism or Asperger's. Assume 1 in 3 seek ABA treatment	0.49%	SG	Ind64-
	children age 2-5 as a % of total population	====>	4.9%	1.8%
	children age 6 as a % of total population	====>	1.3%	0.4%
	children age 7 as % total population		1.2%	0.3%
	children age 8 as % total population		1.2%	0.5%
	children age 9-12 as a % of total population	====>	4.4%	1.7%
	children age 13-21 as a % of total population	====>	9.0%	2.7%

	Small Group		Ind64-	
Cost PMPM: Children 2-5:	\$	1.88	\$	0.68
Children age 6	\$	0.31	\$	0.10
Children age 7	\$	0.30	\$	0.07
Children age 8	\$	0.25	\$	0.10
Children 9-12:	\$	0.92	\$	0.34
Children 13-21:	\$	1.49	\$	0.45
Total	\$	5.15	\$	1.74

	Small Group	Ind64-	Blended
Adjustment (to Professional Only)	4.9%	1.5%	4.5%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Impact of New Essential Health Benefits in Individual, Non-Medigap Market

Maternity

BlueChoice already offers full maternity coverage to its Individual, Non-Medigap members. Since many competitors do not offer this coverage today, current Individual BlueChoice maternity utilization is high compared to the rest of the Individual market segment. This is projected to decrease to the D.C. Small Group level, where full maternity coverage is standard across insurers.

Individual Util/1000	31.9	Individual Cost/Case	\$1,521
D.C. Small Group Util/1000	18.2	D.C. Small Group Cost/Case	\$2,269
Expected Change in Util/1000	-13.7	No Expected Change in Cost/Cas	\$748
Change in Individual Allowed Cost PMPM	\$ (1.73)		
% Impact	-0.5%		

Impact of Maternity on Individual Market PMPM	\$ (1.73)
Impact on Individual & Small Group Market Combined PMPM	\$ (0.17)
Adjustment Factor (Small Group & Individual Markets Combined)	0.999

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Experience - Maternity

Experience Period Incurred 10/1/12 - 9/30/13

Cost/Case	Cases/1000		Claims PMPM		% of Total PMPM		Allowed Amounts		
		<u>Maternity</u>		<u>Maternity</u>		<u>Maternity</u>			
Ind PPO HSA	\$966	Ind PPO HSA	16	Ind PPO HSA	\$1.35	Ind PPO HSA	0.6%	Ind PPO HSA	\$65,033,416
Ind PPO non-CDH	\$726	Ind PPO non-CDH	18	Ind PPO non-CDH	\$1.07	Ind PPO non-CDH	0.5%	Ind PPO non-CDH	\$107,693,483
Ind Indemnity	\$2,102	Ind Indemnity	12	Ind Indemnity	\$2.06	Ind Indemnity	0.8%	Ind Indemnity	\$153,151,968
Ind HMO HSA	\$1,799	Ind HMO HSA	30	Ind HMO HSA	\$4.56	Ind HMO HSA	2.1%	Ind HMO HSA	\$23,110,865
Ind HMO non-CDH	\$1,904	Ind HMO non-CDH	23	Ind HMO non-CDH	\$3.70	Ind HMO non-CDH	1.5%	Ind HMO non-CDH	\$17,588,018
Ind HB Triple Option	\$1,882	Ind HB Triple Option	74	Ind HB Triple Option	\$11.69	Ind HB Triple Option	4.3%	Ind HB Triple Option	\$9,779,889
Ind HB HSA	\$2,121	Ind HB HSA	53	Ind HB HSA	\$9.44	Ind HB HSA	2.4%	Ind HB HSA	\$874,503
<u>Ind HB 2.0</u>	<u>\$1,984</u>	<u>Ind HB 2.0</u>	<u>25</u>	<u>Ind HB 2.0</u>	<u>\$4.17</u>	<u>Ind HB 2.0</u>	<u>1.9%</u>	<u>Ind HB 2.0</u>	<u>\$33,682,459</u>
DC 50- PPO HRA	\$3,007	DC 50- PPO HRA	16	DC 50- PPO HRA	\$4.07	DC 50- PPO HRA	0.9%	DC 50- PPO HRA	\$5,097,753
DC 50- PPO	\$2,305	DC 50- PPO	18	DC 50- PPO	\$3.54	DC 50- PPO	0.8%	DC 50- PPO	\$199,548,699
DC 50- HMO HSA	\$2,122	DC 50- HMO HSA	17	DC 50- HMO HSA	\$3.01	DC 50- HMO HSA	1.5%	DC 50- HMO HSA	\$4,398,977
DC 50- HMO HRA	\$1,674	DC 50- HMO HRA	7	DC 50- HMO HRA	\$0.97	DC 50- HMO HRA	0.4%	DC 50- HMO HRA	\$1,182,741
DC 50- HMO	\$1,988	DC 50- HMO	18	DC 50- HMO	\$3.09	DC 50- HMO	1.1%	DC 50- HMO	\$32,207,977
DC 50- HMO OO	\$2,111	DC 50- HMO OO	21	DC 50- HMO OO	\$3.80	DC 50- HMO OO	1.1%	DC 50- HMO OO	\$36,230,801
DC 50- BC Adv	\$2,472	DC 50- BC Adv	32	DC 50- BC Adv	\$6.49	DC 50- BC Adv	1.7%	DC 50- BC Adv	\$4,655,884
DC 50- HB Non-CDH	\$2,730	DC 50- HB Non-CDH	15	DC 50- HB Non-CDH	\$3.37	DC 50- HB Non-CDH	1.6%	DC 50- HB Non-CDH	\$168,439
<u>MD 2-50 PPO HSA</u>	<u>\$1,697</u>	<u>MD 2-50 PPO HSA</u>	<u>41</u>	<u>MD 2-50 PPO HSA</u>	<u>\$5.76</u>	<u>MD 2-50 PPO HSA</u>	<u>0.8%</u>	<u>MD 2-50 PPO HSA</u>	<u>\$3,448,897</u>
Average Group	\$2,269	Average Group	18	Average Group	\$3.52	Average Group	0.9%		
Average Individual	\$1,521	Average Individual	18	Average Individual	\$2.32	Average Individual	1.0%		

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Derivation of Embedded Pediatric Dental Rate
Projection Period: 1/1/2015 - 12/31/2015

#	Formula	Description	%	PMPM
1		Base D.C. Dental Allowed PMPM For Members Age 19 and Under, Classes 1 -4	\$	16.32
2		Adjustment to D.C. Benchmark Plan (D.C. FEDVIP)	-1.15%	
3	(3) = (1)*(1+(2))	Adjusted Allowed PMPM Classes 1 - 4	\$	16.13
4		Base D.C. Dental Allowed PMPM For Members Age 19 and Under, Class 5 (Ortho)	\$	3.44
5		Adjustment to D.C. Benchmark Plan	-40%	
6	(6) = (4)*(1+(5))	Adjusted Allowed PMPM Classes 5 (Ortho)	\$	2.06
7		Estimated Base Period Allowed PMPM Adjusted to D.C. Benchmark	\$	18.19
8		Completion Factor (Incurred 12, Paid 14)		0.980
9	(9) = (7)/(8)	Ultimate Base Period Allowed PMPM Adjusted to D.C. Benchmark	\$	18.56
10		Assumed Annual Trend	5.0%	
11		Assumed Trend Factor for 24 months	1.103	
12	(12) = (9)*(11)	Projected Allowed Pediatric PMPM	\$	20.47
13		Adjustment to Dental PPO Fee Schedule	0.879	
14	(14) = (12)*(13)	Projected Allowed Pediatric PMPM Based on PPO Fee Schedule	\$	17.98
15		Adjustment for Planned 1/1/2014 Fee Schedule Increase	1.000	
16	(16) = (14)*(15)	Projected Allowed Pediatric PMPM Adjusted for Fee Schedule Changes	\$	17.98
17		% of D.C. Small Group & Individual, Non-Medigap Market Age 19 and Under	21.6%	
18	(18) = (16)*(17)	Projected Allowed Pediatric Dental PMPM Spread Over Single Risk Pool	\$	3.89
19		Base Period Other Medical PMPM	\$	12.91
20		Projection Factor Entered To Adjust Other Medical Category		1.301
21		Impact on Total Medical and Rx Base Period PMPM		1.012

Notes:

- Row 1** Allowed PMPM for experience period of 01/2013 - 12/2013, pd through 03/2014 for Classes 1- 4
- Row 2** Adjustment factor to account for coverage differences between current plans and DC Benchmark plan for Classes 1 - 4
- Row 4** Allowed PMPM for experience period of 01/2013 - 12/2013, pd through 03/2014 for Class 5 (Ortho)
- Row 5** Adjustment factor to account for coverage differences between current plans and DC Benchmark plan for Class 5 (Ortho), as provided by CareFirst's Dental Network Director.
- Row 10** Assumed pricing trend.
- Row 11** Projected through 12/31/2015.
- Row 13** Adjustment to PPO plan basis from blended product basis implicit in base experience data.
- Row 20** Benefit factor applied to Base Period Allowed PMPM.

	Begin	End	Mid-point	Months of trend
Experience Period	1/1/2013	12/31/2013	7/2/2013	
Rating Period	1/1/2015	12/31/2015	7/2/2015	24.0

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Derivation of Pediatric Dental Effective Coinsurance

	Allowed PMPM*	Plan Coinsurance	Plan Portion
Level 1	\$ 10.49	100%	\$ 10.49
Level 2	\$ 3.25	80%	\$ 2.60
Level 3	\$ 2.30	80%	\$ 1.84
Level 4	\$ 0.54	50%	\$ 0.27
Level 5	\$ 1.82	50%	\$ 0.91
Total	\$ 18.41		\$ 16.12
Effective Coinsurance			87.6%

* Based on the combined D.C. Small Group dental book of business over the experience period 11/2012 - 10/2013, paid through 12/2013, projected to 2015, and adjusted to the PMPM and utilization distribution of the expected pediatric population.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Vision Embedded in Medical Plan
Projection Period: 1/1/2015 - 12/31/2015

Derivation of Embedded Pediatric Vision Rate (EHB)

Small Group Embedded PMPM (Davis Vision Capitation)	\$	1.25
% of D.C. Small Group Market Age 19 and Under		22.6%
<hr/>		
Pediatric Vision PMPM Spread Over Small Group Market	\$	0.28
Individual, non-Medigap Embedded PMPM (Davis Vision Capitation)	\$	1.77
% of D.C. Individual, non-Medigap Market Age 19 and Under		7.7%
<hr/>		
Pediatric Vision PMPM Spread Over Individual Market	\$	0.14
Blended EHB Pediatric Vision PMPM Spread Over Entire Single Risk Pool	\$	0.27

Derivation of Embedded Adult Vision Rate (Non-EHB, Individual Market Only)

Individual, non-Medigap Embedded PMPM (Davis Vision Capitation)	\$	1.16
% of D.C. Individual, non-Medigap Market Over Age 19		92.3%
<hr/>		
Embedded Adult Vision PMPM Spread Over Individual Market	\$	1.07
Blended Non-EHB Adult Vision PMPM Spread Over Entire Single Risk Pool	\$	0.10

Derivation of Projection Factor

Total Embedded Vision PMPM	\$	0.37
Experience Period Core Vision Capitation PMPM	\$	0.44
\$ Change from Experience to Projection Period PMPM	\$	(0.07)
Total Experience Period Capitation PMPM	\$	1.63
Projection Factor to Adjust Capitation Category		0.957

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

**Derivation of Age Calibration Factor
Based on Approved DC Age Factors from 1/1/2014**

Projected Pool Allowed PMPM (including non-EHB)	\$	362.22
Total Estimated Allowed \$ Per Month, Based on Age Factors	\$	14,437,772
Total Small Group Experience Members		38,557
PMPM Based On Age Factors	\$	374.45
Calibration Adjustment		0.950
Average Age Factor		1.034
Average Age (Implied by Average Factor)		42

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

Derivation of Network Factors

BlueChoice Network Variations

Network Type	Proposed Products Using This Network	Description
Lock In / Referral	HMO Referral	Referrals needed for Specialist Care, No Out of Network Coverage
Open Access	HMO, HealthyBlue HMO, BlueChoice Plus (only 2 plans - 100%/80%, \$20/\$30 and 100%/60%, \$20/\$30)	No Referrals needed for Specialist, No Out of Network Coverage
Open Access Plus	BlueChoice Plus (all plans not previously listed), HealthyBlue Plus	No Referrals needed, Out of Network allowances pay up to Regional Preferred Network (RPN) allowance
Open Access Advantage	BlueChoice Advantage, HealthyBlue Advantage	No Referrals needed, Out of Network allowance pay up to RPN allowance, Out of Area BlueCard considered In Network for cost sharing

Network Type	Corresponding Products in Base Period	Mem Months	% Member Months	Assumed Network Factor
Lock In / Referral	HMO	92,135	23.3%	0.930
Open Access	HMO OA, Opt Out OA	181,730	45.9%	0.977
Open Access Plus	Opt Out Plus OA, HealthyBlue 2.0	85,353	21.6%	1.005
Open Access Advantage	BlueChoice Advantage, HealthyBlue Advantage	36,298	9.2%	1.027
BC Products Base Allowed		395,516	100.0%	

Derivation of Open Access Factor Relative to Lock In

Open Access above includes a large block of CDH HSA/HRA benefits. This is skewing the allowed PMPM relationships from what we might expect. Non-CDH Only Allowed PMPMs are below. This comparison removes the impact of favorable CDH selection.

	Allowed \$	Mem Months	Allowed PMPM	% Differential
Lock In / Referral	\$ 25,846,265	92,135	\$ 280.53	
Open Access	\$ 51,647,095	156,273	\$ 330.49	17.8%

Derivation of Open Access Plus Factor Relative to Lock In / Referral

The Open Access Plus products use the BlueChoice Fee allowances for In Network services. Out of Network services pay up to our Regional Preferred Network allowances. Members can be balance billed.

	In Network	Out of Network
Estimated Utilization Split for Open Access Plus	88.2%	11.9%
Allowances Relativity	1.050	1.306
Final Factor for Open Access Plus	1.080	

Derivation of Open Access Advantage Factor Relative to Lock In / Referral

Open Access Advantage plans pay Out Of Area BlueCard Services as In Network. Out of Network, Out of Area services pay up to our Regional Preferred Network allowances. Members can be balance billed.

	In Area In Network	Out of Area In Network	In Area Out of Network	Out of Area Out of Network
Assumed Utilization Split	81.79%	12.50%	5.41%	0.30%
Allowances Relativity	1.050	1.366	1.306	1.366
Final Factor for Open Access Advantage				1.104

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Impact of Expected Differences in Utilization of Services Based on Differences in Cost Sharing

The factors below are intended to be multiplicative adjustments to the pure cost sharing factors derived over the pool. These factors represent the expected impact on:

Total BlueChoice

	Midpoint AV	Projected Contracts As Of 12/31/2015	Utilization Impact Relative to Bronze*	Impact Relative to Average
Platinum	90%	5,783	1.166	1.053
Gold	80%	10,793	1.087	0.982
Silver	70%	1,283	1.032	0.932
Bronze	60%	254	1.001	0.904
Subtotal:		18,113		
Average	82.2%		1.107	

	Impact of Health Savings/Reimbursement Account**	1Q15 Projected Member Months
HSA/HRA	0.960	11,808
All Other	1.005	91,068
	1.000	102,876

* Calculated as cost per enrollee divided by Bronze cost per enrollee, based on HHS AV Calculator continuance tables.

** Existing Small Group HRA rates are approximately 8% higher than HSA rates. For the same person, regardless of health status, the addition of an HRA to a plan induces costs and the addition of an HSA reduces costs. Since current Small Group CDH members are enrolled primarily in HSA plans, we assume an overall impact of -4% for CDH plans.

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Rating Methodology & Sample Calculation

Methodology:

- For each subscriber in a group, identify:
All dependents associated with the subscriber including the following categories:
Spouse/Domestic Partner
of children ages 21 or older
of children ages under 21 (if more than 3, select 3 oldest children)

Group ABC

Selects BlueChoice HMO Referral HSA/HRA \$4,000 Bronze Plan

Employee 1

A spouse, and 1 child

1
0
1

Employee 2

5 children

0
1
4

- For each subscriber and dependent, identify their age.

Subscriber	Spouse	Child 1	Subscriber	Child 1*	Child 2	Child 3	Child 4	Child 5
46	34	15	52	6	10	13	18	22

- Determine appropriate age factor.

1.227	0.856	0.654	1.545		0.654	0.654	0.654	0.727
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- Identify the appropriate consumer level base rate.

\$219.06	\$219.06	\$219.06	\$219.06		\$219.06	\$219.06	\$219.06	\$219.06
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- Multiply the (base rate x age factor) and round to the nearest whole cent to determine the member's individual rate.

\$268.79	\$187.52	\$143.27	\$338.45		\$143.27	\$143.27	\$143.27	\$159.26
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- The group's total rate is the sum of individual rates for all subscribers and members combined.

\$1,527.10

*Note that this subscriber has 4 children under the age of 21. Due to the dependent cap, only the oldest 3 are rated. As such, Child 1 is covered at no additional cost.

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Age Factors

Age	Proposed Factor*
<= 20	0.654
21	0.727
22	0.727
23	0.727
24	0.727
25	0.727
26	0.727
27	0.727
28	0.744
29	0.760
30	0.779
31	0.799
32	0.817
33	0.836
34	0.856
35	0.876
36	0.896
37	0.916
38	0.927
39	0.938
40	0.975
41	1.013
42	1.053
43	1.094
44	1.137
45	1.181
46	1.227
47	1.275
48	1.325
49	1.377
50	1.431
51	1.487
52	1.545
53	1.605
54	1.668
55	1.733
56	1.801
57	1.871
58	1.944
59	2.020
60	2.099
61	2.181
62	2.181
63	2.181
64 and over	2.181

From approved filing CFAP-129047155 , effective 1/1/2014.

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Network Factors

Network Type	Proposed Products Using This Network	Assumed Network Factor
Lock In / Referral	HMO Referral	0.930
Open Access	HMO, HealthyBlue HMO, BlueChoice Plus (only 2 plans - 100%/80%, \$20/\$30 and 100%/60%, \$20/\$30)	0.977
Open Access Plus	BlueChoice Plus (all plans not previously listed), HealthyBlue Plus	1.005
Open Access Advantage	BlueChoice Advantage, HealthyBlue Advantage	1.027

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

Estimated Renewal Rate Changes

Product	HIOS Product ID	1Q15 Estimated	1Q15 Estimated	2Q15 Estimated	2Q15 Estimated	3Q15 Estimated	3Q15 Estimated	4Q15 Estimated	4Q15 Estimated
		Consumer Level Base Rate Renewal	Avg. Plan Adjusted Index Rate Renewal	Consumer Level Base Rate Renewal	Avg. Plan Adjusted Index Rate Renewal	Consumer Level Base Rate Renewal	Avg. Plan Adjusted Index Rate Renewal	Consumer Level Base Rate Renewal	Avg. Plan Adjusted Index Rate Renewal
BlueChoice HMO HSA/HRA	86052DC047	11.0%	12.6%	10.1%	11.7%	9.3%	10.9%	8.5%	10.1%
BlueChoice HMO	86052DC046	12.2%	13.9%	11.4%	13.0%	10.6%	12.2%	9.7%	11.3%
BlueChoice Advantage	86052DC044	12.2%	13.8%	11.3%	12.9%	10.5%	12.1%	9.7%	11.3%
BlueChoice Plus	86052DC050	11.0%	12.6%	10.1%	11.7%	9.3%	10.9%	8.5%	10.1%
HealthyBlue HMO	86052DC054	13.4%	15.0%	12.5%	14.2%	11.7%	13.3%	10.9%	12.5%
HealthyBlue Plus	86052DC056	12.5%	14.1%	11.6%	13.2%	10.8%	12.4%	10.0%	11.5%
HealthyBlue Advantage	86052DC052	14.8%	16.4%	13.9%	15.6%	13.1%	14.7%	12.2%	13.9%
BlueChoice Advantage HSA/HRA	86052DC045	13.3%	15.0%	12.5%	14.1%	11.6%	13.2%	10.8%	12.4%
BlueChoice Plus HSA/HRA	86052DC051	11.2%	12.8%	10.4%	12.0%	9.6%	11.2%	8.7%	10.3%
HealthyBlue HMO HSA/HRA	86052DC055	13.8%	15.4%	12.9%	14.5%	12.1%	13.7%	11.2%	12.8%
HealthyBlue Plus HSA/HRA	86052DC057	13.4%	15.1%	12.5%	14.2%	11.7%	13.3%	10.9%	12.5%
HealthyBlue Advantage HSA/HRA	86052DC053	14.7%	16.3%	13.8%	15.5%	13.0%	14.6%	12.1%	13.7%
BlueChoice HMO Referral HSA/HRA	86052DC049	10.4%	12.0%	9.6%	11.2%	8.8%	10.3%	7.9%	9.5%
BlueChoice HMO Referral	86052DC048	11.1%	12.7%	10.2%	11.8%	9.4%	11.0%	8.6%	10.2%
TOTAL:		12.9%		12.0%		11.2%		10.4%	

APPENDIX

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015
Non-Grandfathered Experience for Existing HIOS IDs

Existing Products Included in Experience Period

HIOS Product ID	HIOS Product Name	Contracts a/o Dec 2013	Member Months	Total Premium	Total Allowed Claims	Incurred Claims
86052DC024	BlueChoice Advantage HRA	57	1,027	\$ 230,468	\$ 361,917	\$ 264,777
86052DC023	BlueChoice Advantage HSA	246	2,609	\$ 556,188	\$ 617,831	\$ 413,221
86052DC008	BlueChoice HMO	5,025	92,135	\$ 31,237,281	\$ 25,846,265	\$ 23,701,361
86052DC018	BlueChoice Opt-Out Open Access	5,033	92,573	\$ 32,326,928	\$ 32,350,400	\$ 29,510,840
86052DC017	BlueChoice HMO Open Access	3,295	63,700	\$ 19,846,393	\$ 19,296,695	\$ 17,804,587
86052DC019	BlueChoice Opt-Out Plus Open Access	1,001	35,417	\$ 12,922,815	\$ 13,878,399	\$ 12,676,602
86052DC025	HealthyBlue 2.0	3,388	42,283	\$ 13,147,692	\$ 12,065,914	\$ 10,351,120
86052DC031	HealthyBlue 2.0 HRA	20	327	\$ 93,903	\$ 53,886	\$ 44,050
86052DC030	HealthyBlue 2.0 HSA	59	1,136	\$ 298,731	\$ 340,775	\$ 250,865
86052DC035	HealthyBlue Advantage	1,153	15,587	\$ 3,983,094	\$ 4,733,221	\$ 4,176,471
86052DC037	HealthyBlue Advantage HRA	97	1,242	\$ 278,137	\$ 641,660	\$ 584,152
86052DC036	HealthyBlue Advantage HSA	162	2,566	\$ 521,182	\$ 650,442	\$ 452,807
86052DC014	HealthyBlue Triple Option	2	399	\$ 110,135	\$ 71,111	\$ 62,572
86052DC016	HealthyBlue Triple Option HRA	-	18	\$ 4,410	\$ 425	\$ 343
86052DC015	HealthyBlue Triple Option HSA	-	31	\$ 6,365	\$ 5,925	\$ 3,768
86052DC010	BlueChoice HMO HRA Open Access	211	4,094	\$ 1,206,033	\$ 766,888	\$ 520,131
86052DC009	BlueChoice HMO HSA Open Access	1,308	21,363	\$ 5,161,714	\$ 4,462,666	\$ 3,082,650
86052DC013	BlueChoice Advantage	722	13,267	\$ 4,089,426	\$ 4,592,358	\$ 4,120,297
86052DC012	BlueChoice Opt-Out Plus HRA Open Access	82	1,532	\$ 413,249	\$ 331,752	\$ 179,370
86052DC011	BlueChoice Opt-Out Plus HSA Open Access	264	4,210	\$ 1,246,611	\$ 2,053,830	\$ 1,621,911
	Total	22,125	395,516	\$ 127,680,752	\$ 123,122,359	\$ 109,821,895

Existing Products with No Experience in Experience Period

HIOS Product ID	HIOS Product Name
86052DC038	BlueChoice HMO Open Access HDHP
86052DC039	BlueChoice Opt-Out Plus Open Access HDHP

BlueChoice, Inc.
d.b.a. CareFirst BlueCross BlueShield
(NAIC # 96202)
D.C. Small Group Products - On Exchange
Rate Filing Effective 1/1/2015

Off Exchange HIOS IDs*

HIOS Plan ID	HIOS Plan Name	On/Off Exchange
86052DC0490002	BlueChoice HMO Referral HSA/HRA \$4,000 - SE	Off
86052DC0470003	BlueChoice HMO HSA/HRA \$2,000, 80% - SE	Off
86052DC0470001	BlueChoice HMO HSA/HRA \$1,500	Off
86052DC0470004	BlueChoice HMO HSA/HRA \$2,000	Off
86052DC0460005	BlueChoice HMO \$1,800	Off
86052DC0460001	BlueChoice HMO \$1,000 - SE	Off
86052DC0480001	BlueChoice HMO Referral \$10/\$20	Off
86052DC0480003	BlueChoice HMO Referral \$30/\$40	Off
86052DC0480002	BlueChoice HMO Referral \$500	Off
86052DC0460002	BlueChoice HMO \$250	Off
86052DC0460004	BlueChoice HMO \$30/\$40	Off
86052DC0440003	BlueChoice Advantage 90%/70% - SE	Off
86052DC0440001	BlueChoice Advantage 80%/50%	Off
86052DC0440002	BlueChoice Advantage 100%/70%	Off
86052DC0440005	BlueChoice Advantage \$1000	Off
86052DC0450001	BlueChoice Advantage HSA/HRA \$1500	Off
86052DC0500001	BlueChoice Plus \$2000	Off
86052DC0500004	BlueChoice Plus 100%/80%, \$10/\$20	Off
86052DC0500002	BlueChoice Plus 100%/80%, \$20/\$30	Off
86052DC0500003	BlueChoice Plus 100%/60%, \$20/\$30	Off
86052DC0510001	BlueChoice Plus HSA/HRA \$1500	Off
86052DC0510002	BlueChoice Plus HSA/HRA \$2000	Off
86052DC0510003	BlueChoice Plus HSA/HRA \$3500	Off
86052DC0540002	HealthyBlue HMO \$300	Off
86052DC0540003	HealthyBlue HMO \$600	Off
86052DC0540001	HealthyBlue HMO \$1,500	Off
86052DC0550001	HealthyBlue HMO HSA/HRA \$2,000	Off
86052DC0560002	HealthyBlue Plus \$300	Off
86052DC0560003	HealthyBlue Plus \$600	Off
86052DC0560001	HealthyBlue Plus \$1,500	Off
86052DC0570001	HealthyBlue Plus HSA/HRA \$2,000	Off
86052DC0520002	HealthyBlue Advantage \$300	Off
86052DC0520003	HealthyBlue Advantage \$600	Off
86052DC0520001	HealthyBlue Advantage \$1,500	Off
86052DC0530001	HealthyBlue Advantage HSA/HRA \$2,000	Off

*Off Exchange plans are closed for new and renewing business effective 1/1/2015

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015

D.C. BlueChoice Small Group Experience
Experience Period: 1/1/2013 - 12/31/2013, Paid Through 3/31/2014

Service Category	Non-Grandfathered Small Group (Used in Base Period Data)			Total Small Group (Grandfathered & Non) (Used in Historical Trend Analysis)		
	Allowed Amount	Units	Allowed PMPM	Allowed Amount	Units	Allowed PMPM
Inpatient	\$ 24,446,860	1,773	\$ 61.81	\$ 26,732,692	2,002	\$ 60.30
Outpatient	\$ 22,148,801	17,780	\$ 56.00	\$ 24,404,533	20,017	\$ 55.05
Professional	\$ 41,234,070	288,458	\$ 104.25	\$ 46,284,974	324,906	\$ 104.40
Other	\$ 4,890,339	21,286	\$ 12.36	\$ 5,480,447	24,450	\$ 12.36
Rx	\$ 30,402,289	263,172	\$ 76.87	\$ 34,181,667	295,496	\$ 77.10
Capitation	\$ 637,546		\$ 1.61	\$ 714,611		\$ 1.61
Total	\$ 123,759,906		\$ 312.91	\$ 137,798,926		\$ 310.83
Member Months	395,516			443,325		

The base period data used in developing the index rate reflects only non-grandfathered business. The historical trend analysis also includes grandfathered Small Group business. Approximately 6.5% of current D.C. BlueChoice Small Group enrollment is grandfathered business.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Blended Index Rate

Effective Date	Index Rate	Total Member Months
1/1/2015	\$ 361.09	102,876
4/1/2015	\$ 367.26	72,780
7/1/2015	\$ 373.53	91,824
10/1/2015	\$ 379.92	87,492
Blended	\$ 370.21	354,972

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Medical Inpatient
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Admits	Completion Factor	Completed		Rolling 12 PMPM			Rolling 12 Trend			
						Allowed	Admits	Allowed	Admits/1000	Unit Cost	Allowed	Admits/1000	Unit Cost	
201104	20,179	32,103	\$1,489,395	143	1.00	\$1,489,395	143							
201105	20,433	32,618	\$2,812,666	169	1.00	\$2,812,666	169							
201106	20,558	32,743	\$1,569,735	142	1.00	\$1,569,735	142							
201107	20,647	32,974	\$1,420,853	148	1.00	\$1,420,853	148							
201108	20,844	33,208	\$1,789,689	152	1.00	\$1,789,689	152							
201109	21,046	33,538	\$1,954,786	151	1.00	\$1,954,786	151							
201110	21,026	33,329	\$1,439,394	140	1.00	\$1,439,394	140							
201111	21,175	33,483	\$2,013,170	182	1.00	\$2,013,170	182							
201112	21,594	34,138	\$1,616,222	166	1.00	\$1,616,222	166							
201201	21,693	34,301	\$2,009,919	192	1.00	\$2,009,919	192							
201202	21,999	34,878	\$2,727,712	174	1.00	\$2,727,712	174							
201203	22,133	35,090	\$2,331,145	161	1.00	\$2,331,257	161	\$57.59	57.26	\$12,070.16				
201204	22,251	35,294	\$1,584,525	141	1.00	\$1,584,696	141	\$57.37	56.75	\$12,132.34				
201205	22,108	35,120	\$1,759,920	141	1.00	\$1,760,336	141	\$54.44	55.58	\$11,755.09				
201206	22,593	35,883	\$1,645,405	146	1.00	\$1,645,909	146	\$54.21	55.27	\$11,770.20				
201207	22,715	36,080	\$2,100,653	157	1.00	\$2,101,284	157	\$55.45	55.12	\$12,071.76				
201208	23,030	36,529	\$1,745,314	157	1.00	\$1,745,949	157	\$54.90	54.83	\$12,016.84				
201209	23,253	36,879	\$2,166,928	167	1.00	\$2,167,768	167	\$54.97	54.85	\$12,027.20				
201210	23,369	37,068	\$2,381,986	188	1.00	\$2,383,063	188	\$56.71	55.72	\$12,212.40				
201211	23,881	37,872	\$1,348,229	148	1.00	\$1,349,057	148	\$54.58	54.21	\$12,083.45				
201212	24,214	38,435	\$1,543,812	150	1.00	\$1,544,960	150	\$53.88	53.23	\$12,146.24				
201301	24,621	39,171	\$2,292,325	184	1.00	\$2,294,540	184	\$53.93	52.42	\$12,344.51				
201302	24,792	39,397	\$1,875,749	183	1.00	\$1,878,149	183	\$51.46	52.14	\$11,843.75				
201303	24,950	39,658	\$3,970,770	177	1.00	\$3,976,655	177	\$54.61	52.04	\$12,592.52	-5.2%	-9.1%	4.3%	
201304	25,094	39,885	\$2,897,217	173	1.00	\$2,902,838	173	\$56.97	52.37	\$13,054.40	-0.7%	-7.7%	7.6%	
201305	25,173	39,831	\$2,163,004	185	1.00	\$2,168,580	185	\$57.28	53.00	\$12,969.17	5.2%	-4.6%	10.3%	
201306	25,507	40,354	\$1,655,462	164	1.00	\$1,660,318	164	\$56.76	52.96	\$12,858.78	4.7%	-4.2%	9.2%	
201307	25,551	40,481	\$3,282,567	210	1.00	\$3,294,587	211	\$58.78	53.85	\$13,099.17	6.0%	-2.3%	8.5%	
201308	25,836	40,969	\$2,481,955	210	0.99	\$2,496,208	211	\$59.82	54.72	\$13,118.32	9.0%	-0.2%	9.2%	
201309	25,931	41,107	\$2,416,767	187	0.99	\$2,436,094	189	\$59.86	54.78	\$13,112.22	8.9%	-0.1%	9.0%	
201310	25,875	41,086	\$2,208,549	169	0.99	\$2,238,682	171	\$59.05	53.90	\$13,147.61	4.1%	-3.3%	7.7%	
201311	26,103	41,553	\$2,010,873	183	0.98	\$2,051,808	187	\$60.06	54.45	\$13,237.02	10.0%	0.4%	9.5%	
201312	26,846	42,793	\$1,894,928	157	0.97	\$1,956,015	162	\$60.36	54.25	\$13,352.03	12.0%	1.9%	9.9%	
201401	27,338	44,096	\$2,355,294	179	0.93	\$2,522,821	192	\$60.22	53.89	\$13,409.75	11.7%	2.8%	8.6%	
201402	26,670	43,171	\$1,574,237	148	0.80	\$1,966,869	185	\$59.94	53.52	\$13,439.27	16.5%	2.7%	13.5%	
201403	25,831	41,851	\$557,405	54	0.36	\$1,533,007	149	\$54.76	52.62	\$12,490.03	0.3%	1.1%	-0.8%	
Experience Period	306,279	486,285	\$29,150,166	2,182	0.99	\$29,354,475	2,199							
201303	24,950	39,658									-5.2%	-9.1%	4.3%	
201309	25,931	41,107									8.9%	-0.1%	9.0%	
201312	26,846	42,793									12.0%	1.9%	9.9%	
Avg last 6 months	26,024	41,332									8.3%	-0.6%	9.0%	
Selected Pricing Trend													1.0%	7.0%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Medical Outpatient
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Visits	Completion Factor	Completed		Rolling 12 PMPM			Rolling 12 Trend			
						Allowed	Visits	Allowed	Visits/1000	Unit Cost	Allowed	Visits/1000	Unit Cost	
201104	20,179	32,103	\$1,413,257	1,442	1.00	\$1,413,257	1,442							
201105	20,433	32,618	\$1,388,754	1,549	1.00	\$1,388,754	1,549							
201106	20,558	32,743	\$1,467,302	1,554	1.00	\$1,467,302	1,554							
201107	20,647	32,974	\$1,399,531	1,409	1.00	\$1,399,531	1,409							
201108	20,844	33,208	\$1,700,475	1,578	1.00	\$1,700,475	1,578							
201109	21,046	33,538	\$1,691,254	1,567	1.00	\$1,691,254	1,567							
201110	21,026	33,329	\$1,701,282	1,600	1.00	\$1,701,282	1,600							
201111	21,175	33,483	\$1,658,386	1,553	1.00	\$1,658,386	1,553							
201112	21,594	34,138	\$1,653,541	1,558	1.00	\$1,653,541	1,558							
201201	21,693	34,301	\$1,566,499	1,609	1.00	\$1,566,499	1,609							
201202	21,999	34,878	\$1,656,539	1,608	1.00	\$1,656,539	1,608							
201203	22,133	35,090	\$1,786,285	1,809	1.00	\$1,786,370	1,809	\$47.42	561.71	\$1,013.12				
201204	22,251	35,294	\$1,574,810	1,535	1.00	\$1,574,980	1,535	\$47.45	560.05	\$1,016.68				
201205	22,108	35,120	\$1,776,927	1,715	1.00	\$1,777,340	1,715	\$48.11	561.50	\$1,028.17				
201206	22,593	35,883	\$1,964,741	1,640	1.00	\$1,965,323	1,640	\$48.95	559.74	\$1,049.49				
201207	22,715	36,080	\$1,953,920	1,723	1.00	\$1,954,545	1,724	\$49.93	564.66	\$1,061.03				
201208	23,030	36,529	\$2,151,772	1,767	1.00	\$2,152,565	1,768	\$50.61	565.61	\$1,073.77				
201209	23,253	36,879	\$1,613,743	1,667	1.00	\$1,614,368	1,668	\$50.03	563.99	\$1,064.42				
201210	23,369	37,068	\$1,920,511	1,759	1.00	\$1,921,506	1,760	\$50.11	563.55	\$1,066.93				
201211	23,881	37,872	\$1,763,406	1,658	1.00	\$1,764,521	1,659	\$49.84	560.75	\$1,066.58				
201212	24,214	38,435	\$2,020,546	1,703	1.00	\$2,022,101	1,704	\$50.20	559.24	\$1,077.10				
201301	24,621	39,171	\$2,044,249	1,879	1.00	\$2,046,197	1,881	\$50.73	560.47	\$1,086.24				
201302	24,792	39,397	\$2,175,420	1,775	1.00	\$2,177,965	1,777	\$51.39	559.33	\$1,102.60				
201303	24,950	39,658	\$2,058,121	1,853	1.00	\$2,061,297	1,856	\$51.48	554.88	\$1,113.39	8.6%	-1.2%	9.9%	
201304	25,094	39,885	\$2,042,752	1,948	1.00	\$2,046,728	1,952	\$52.00	560.30	\$1,113.76	9.6%	0.0%	9.5%	
201305	25,173	39,831	\$2,570,830	2,019	1.00	\$2,577,398	2,024	\$53.22	562.64	\$1,135.07	10.6%	0.2%	10.4%	
201306	25,507	40,354	\$2,157,718	1,818	1.00	\$2,163,940	1,823	\$53.13	561.94	\$1,134.65	8.5%	0.4%	8.1%	
201307	25,551	40,481	\$2,389,011	1,837	1.00	\$2,397,718	1,844	\$53.58	559.73	\$1,148.77	7.3%	-0.9%	8.3%	
201308	25,836	40,969	\$2,045,610	1,725	0.99	\$2,057,493	1,735	\$52.87	553.61	\$1,146.11	4.5%	-2.1%	6.7%	
201309	25,931	41,107	\$2,081,197	1,774	0.99	\$2,097,876	1,788	\$53.42	551.73	\$1,161.93	6.8%	-2.2%	9.2%	
201310	25,875	41,086	\$2,230,406	1,919	0.99	\$2,260,445	1,945	\$53.68	551.74	\$1,167.57	7.1%	-2.1%	9.4%	
201311	26,103	41,553	\$2,278,239	1,795	0.98	\$2,324,365	1,831	\$54.43	551.81	\$1,183.76	9.2%	-1.6%	11.0%	
201312	26,846	42,793	\$2,378,527	1,724	0.97	\$2,455,508	1,780	\$54.84	548.73	\$1,199.23	9.2%	-1.9%	11.3%	
201401	27,338	44,096	\$2,682,567	1,872	0.93	\$2,873,107	2,005	\$55.97	546.26	\$1,229.55	10.3%	-2.5%	13.2%	
201402	26,670	43,171	\$1,840,173	1,606	0.80	\$2,300,476	2,008	\$55.79	547.68	\$1,222.43	8.6%	-2.1%	10.9%	
201403	25,831	41,851	\$897,506	791	0.36	\$2,507,390	2,226	\$56.44	554.19	\$1,222.17	9.6%	-0.1%	9.8%	
Experience Period	306,279	486,285	\$26,452,080	22,066	0.99	\$26,666,931	22,237							
201303	24,950	39,658									8.6%	-1.2%	9.9%	
201309	25,931	41,107									6.8%	-2.2%	9.2%	
201312	26,846	42,793									9.2%	-1.9%	11.3%	
Avg last 6 months	26,024	41,332									7.4%	-1.8%	9.3%	
Selected Pricing Trend													0.0%	9.5%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Medical Professional
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Visits	Completion Factor	Completed		Rolling 12 PMPM			Rolling 12 Trend		
						Allowed	Visits	Allowed	Visits/1000	Unit Cost	Allowed	Visits/1000	Unit Cost
201104	20,179	32,103	\$2,962,279	19,737	1.00	\$2,962,279	19,737						
201105	20,433	32,618	\$2,968,443	20,067	1.00	\$2,968,443	20,067						
201106	20,558	32,743	\$3,153,064	21,062	1.00	\$3,153,064	21,062						
201107	20,647	32,974	\$2,825,252	18,748	1.00	\$2,825,252	18,748						
201108	20,844	33,208	\$3,303,887	21,082	1.00	\$3,303,887	21,082						
201109	21,046	33,538	\$3,149,513	20,235	1.00	\$3,149,513	20,235						
201110	21,026	33,329	\$3,190,070	21,049	1.00	\$3,190,070	21,049						
201111	21,175	33,483	\$3,345,780	20,599	1.00	\$3,345,780	20,599						
201112	21,594	34,138	\$3,200,930	23,280	1.00	\$3,200,930	23,280						
201201	21,693	34,301	\$3,659,350	25,226	1.00	\$3,659,350	25,226						
201202	21,999	34,878	\$3,593,237	25,758	1.00	\$3,593,237	25,758						
201203	22,133	35,090	\$3,903,079	27,604	1.00	\$3,903,268	27,605	\$97.55	7,886.07	\$148.44			
201204	22,251	35,294	\$3,516,381	25,004	1.00	\$3,516,771	25,007	\$98.15	7,979.94	\$147.60			
201205	22,108	35,120	\$3,717,724	26,633	1.00	\$3,718,587	26,639	\$99.39	8,124.27	\$146.80			
201206	22,593	35,883	\$3,536,399	25,593	1.00	\$3,537,466	25,601	\$99.56	8,194.68	\$145.80			
201207	22,715	36,080	\$3,644,796	25,000	1.00	\$3,645,955	25,008	\$100.80	8,314.55	\$145.48			
201208	23,030	36,529	\$3,961,883	27,997	1.00	\$3,963,343	28,007	\$101.58	8,447.41	\$144.29			
201209	23,253	36,879	\$3,519,808	24,315	1.00	\$3,521,177	24,324	\$101.65	8,496.93	\$143.56			
201210	23,369	37,068	\$3,854,898	27,127	1.00	\$3,856,794	27,140	\$102.33	8,594.23	\$142.88			
201211	23,881	37,872	\$3,653,363	26,142	1.00	\$3,655,661	26,158	\$102.00	8,661.79	\$141.31			
201212	24,214	38,435	\$3,558,489	25,381	1.00	\$3,561,224	25,401	\$101.82	8,634.63	\$141.51			
201301	24,621	39,171	\$4,551,786	31,036	1.00	\$4,556,138	31,066	\$102.74	8,698.57	\$141.73			
201302	24,792	39,397	\$4,185,806	27,985	1.00	\$4,190,825	28,019	\$103.04	8,671.06	\$142.60			
201303	24,950	39,658	\$4,266,243	28,616	1.00	\$4,272,862	28,660	\$102.81	8,610.82	\$143.28	5.4%	9.2%	-3.5%
201304	25,094	39,885	\$4,427,234	31,563	1.00	\$4,435,952	31,625	\$103.80	8,699.07	\$143.19	5.8%	9.0%	-3.0%
201305	25,173	39,831	\$4,438,081	30,662	1.00	\$4,449,400	30,740	\$104.33	8,717.09	\$143.62	5.0%	7.3%	-2.2%
201306	25,507	40,354	\$3,909,764	27,883	1.00	\$3,921,268	27,965	\$104.15	8,694.09	\$143.76	4.6%	6.1%	-1.4%
201307	25,551	40,481	\$4,267,007	30,019	1.00	\$4,283,097	30,132	\$104.54	8,743.97	\$143.46	3.7%	5.2%	-1.4%
201308	25,836	40,969	\$4,208,852	29,923	0.99	\$4,233,254	30,096	\$104.12	8,714.70	\$143.38	2.5%	3.2%	-0.6%
201309	25,931	41,107	\$4,089,600	29,276	0.99	\$4,122,866	29,515	\$104.46	8,768.33	\$142.96	2.8%	3.2%	-0.4%
201310	25,875	41,086	\$4,555,293	33,299	0.99	\$4,616,848	33,750	\$105.17	8,860.50	\$142.44	2.8%	3.1%	-0.3%
201311	26,103	41,553	\$4,020,450	28,522	0.98	\$4,101,496	29,097	\$105.30	8,866.01	\$142.52	3.2%	2.4%	0.9%
201312	26,846	42,793	\$3,809,789	26,803	0.97	\$3,933,067	27,670	\$105.12	8,842.56	\$142.65	3.2%	2.4%	0.8%
201401	27,338	44,096	\$4,501,072	30,796	0.93	\$4,820,608	32,982	\$104.60	8,800.72	\$142.63	1.8%	1.2%	0.6%
201402	26,670	43,171	\$3,625,370	25,744	0.80	\$4,531,947	32,182	\$104.49	8,834.54	\$141.93	1.4%	1.9%	-0.5%
201403	25,831	41,851	\$2,120,154	15,828	0.35	\$6,012,520	44,788	\$107.53	9,184.84	\$140.49	4.6%	6.7%	-1.9%
Experience Period	306,279	486,285	\$50,729,905	355,587	0.99	\$51,117,073	358,334						
201303	24,950	39,658									5.4%	9.2%	-3.5%
201309	25,931	41,107									2.8%	3.2%	-0.4%
201312	26,846	42,793									3.2%	2.4%	0.8%
Avg last 6 months	26,024	41,332									3.0%	3.2%	-0.2%
Selected Pricing Trend												4.5%	0.0%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Medical Other
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Services	Completion Factor	Completed		Rolling 12 PMPM			Rolling 12 Trend			
						Allowed	Services	Allowed	Services/1000	Unit Cost	Allowed	Services/1000	Unit Cost	
201104	20,179	32,103	\$383,798	1,617	1.00	\$383,798	1,617							
201105	20,433	32,618	\$370,204	1,673	1.00	\$370,204	1,673							
201106	20,558	32,743	\$353,452	1,593	1.00	\$353,452	1,593							
201107	20,647	32,974	\$369,382	1,597	1.00	\$369,382	1,597							
201108	20,844	33,208	\$352,779	1,455	1.00	\$352,779	1,455							
201109	21,046	33,538	\$380,151	1,607	1.00	\$380,151	1,607							
201110	21,026	33,329	\$425,463	1,457	1.00	\$425,463	1,457							
201111	21,175	33,483	\$383,726	1,577	1.00	\$383,726	1,577							
201112	21,594	34,138	\$392,715	1,623	1.00	\$392,715	1,623							
201201	21,693	34,301	\$389,297	1,708	1.00	\$389,297	1,708							
201202	21,999	34,878	\$376,517	1,729	1.00	\$376,517	1,729							
201203	22,133	35,090	\$480,403	1,755	1.00	\$480,425	1,755	\$11.58	578.26	\$240.21				
201204	22,251	35,294	\$438,680	1,715	1.00	\$438,727	1,715	\$11.62	576.61	\$241.82				
201205	22,108	35,120	\$429,564	1,738	1.00	\$429,660	1,738	\$11.69	575.00	\$244.05				
201206	22,593	35,883	\$394,762	1,666	1.00	\$394,886	1,667	\$11.71	572.76	\$245.25				
201207	22,715	36,080	\$428,442	1,633	1.00	\$428,579	1,634	\$11.76	569.52	\$247.80				
201208	23,030	36,529	\$409,873	1,669	1.00	\$410,025	1,670	\$11.80	571.16	\$248.00				
201209	23,253	36,879	\$446,231	1,807	1.00	\$446,405	1,808	\$11.87	572.35	\$248.82				
201210	23,369	37,068	\$500,807	2,049	1.00	\$501,037	2,050	\$11.94	584.06	\$245.34				
201211	23,881	37,872	\$510,602	1,939	1.00	\$510,906	1,940	\$12.12	588.24	\$247.15				
201212	24,214	38,435	\$423,258	1,694	1.00	\$423,580	1,695	\$12.07	584.41	\$247.77				
201301	24,621	39,171	\$580,295	2,275	1.00	\$580,856	2,277	\$12.37	593.50	\$250.10				
201302	24,792	39,397	\$593,058	2,014	1.00	\$593,785	2,016	\$12.73	595.23	\$256.72				
201303	24,950	39,658	\$510,223	1,977	1.00	\$511,020	1,980	\$12.67	595.18	\$255.50	9.5%	2.9%	6.4%	
201304	25,094	39,885	\$439,716	2,152	1.00	\$440,606	2,156	\$12.55	600.84	\$250.61	8.0%	4.2%	3.6%	
201305	25,173	39,831	\$497,107	2,134	1.00	\$498,416	2,139	\$12.57	605.17	\$249.23	7.5%	5.2%	2.1%	
201306	25,507	40,354	\$483,564	2,118	1.00	\$484,981	2,124	\$12.64	611.21	\$248.21	8.0%	6.7%	1.2%	
201307	25,551	40,481	\$556,686	2,146	1.00	\$558,945	2,154	\$12.80	618.83	\$248.27	8.9%	8.7%	0.2%	
201308	25,836	40,969	\$514,684	2,321	0.99	\$517,696	2,334	\$12.91	629.95	\$245.95	9.4%	10.3%	-0.8%	
201309	25,931	41,107	\$519,572	2,065	0.99	\$523,857	2,081	\$12.96	631.25	\$246.35	9.2%	10.3%	-1.0%	
201310	25,875	41,086	\$575,930	2,280	0.99	\$583,790	2,311	\$13.02	632.49	\$247.09	9.1%	8.3%	0.7%	
201311	26,103	41,553	\$452,734	1,898	0.98	\$461,863	1,936	\$12.82	627.55	\$245.19	5.8%	6.7%	-0.8%	
201312	26,846	42,793	\$478,163	1,782	0.97	\$493,713	1,839	\$12.85	625.49	\$246.56	6.5%	7.0%	-0.5%	
201401	27,338	44,096	\$441,306	1,748	0.93	\$472,693	1,873	\$12.50	609.33	\$246.22	1.1%	2.7%	-1.6%	
201402	26,670	43,171	\$374,320	1,603	0.80	\$467,591	2,004	\$12.15	604.40	\$241.28	-4.6%	1.5%	-6.0%	
201403	25,831	41,851	\$237,944	921	0.35	\$682,567	2,559	\$12.44	615.71	\$242.53	-1.8%	3.4%	-5.1%	
Experience Period	306,279	486,285	\$6,201,731	25,162	0.99	\$6,249,527	25,347							
201303	24,950	39,658									9.5%	2.9%	6.4%	
201309	25,931	41,107									9.2%	10.3%	-1.0%	
201312	26,846	42,793									6.5%	7.0%	-0.5%	
Avg last 6 months	26,024	41,332									8.1%	8.5%	-0.4%	
Selected Pricing Trend													6.0%	0.0%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Rx
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Scripts	Completion Factor	Completed		Rolling 12 PMPM			Rolling 12 Trend		
						Allowed	Scripts	Allowed	Scripts/1000	Unit Cost	Allowed	Scripts/1000	Unit Cost
201104	20,179	32,103	\$2,145,050	21,363	1.00	\$2,145,050	21,363						
201105	20,433	32,618	\$2,371,440	22,271	1.00	\$2,371,440	22,271						
201106	20,558	32,743	\$2,249,377	22,317	1.00	\$2,249,377	22,317						
201107	20,647	32,974	\$2,347,543	21,273	1.00	\$2,347,543	21,273						
201108	20,844	33,208	\$2,583,537	22,382	1.00	\$2,583,537	22,382						
201109	21,046	33,538	\$2,430,947	21,914	1.00	\$2,430,947	21,914						
201110	21,026	33,329	\$2,490,040	22,649	1.00	\$2,490,040	22,649						
201111	21,175	33,483	\$2,622,628	22,811	1.00	\$2,622,628	22,811						
201112	21,594	34,138	\$2,558,815	23,792	1.00	\$2,558,815	23,792						
201201	21,693	34,301	\$2,659,358	24,534	1.00	\$2,659,358	24,534						
201202	21,999	34,878	\$2,627,312	23,775	1.00	\$2,627,312	23,775						
201203	22,133	35,090	\$2,796,623	25,571	1.00	\$2,796,623	25,571	\$74.26	8,190.36	\$108.80			
201204	22,251	35,294	\$2,696,245	24,500	1.00	\$2,696,245	24,500	\$75.04	8,218.73	\$109.56			
201205	22,108	35,120	\$2,791,942	25,258	1.00	\$2,791,942	25,258	\$75.61	8,256.18	\$109.89			
201206	22,593	35,883	\$2,627,755	23,823	1.00	\$2,627,755	23,823	\$75.95	8,237.08	\$110.64			
201207	22,715	36,080	\$2,713,354	24,581	1.00	\$2,713,354	24,581	\$76.26	8,271.14	\$110.64			
201208	23,030	36,529	\$2,768,769	25,295	1.00	\$2,768,769	25,295	\$76.10	8,289.07	\$110.17			
201209	23,253	36,879	\$2,579,931	23,787	1.00	\$2,579,931	23,787	\$75.85	8,276.67	\$109.97			
201210	23,369	37,068	\$2,804,508	25,700	1.00	\$2,804,508	25,700	\$75.92	8,290.01	\$109.90			
201211	23,881	37,872	\$2,915,072	25,985	1.00	\$2,915,072	25,985	\$75.83	8,293.98	\$109.71			
201212	24,214	38,435	\$2,811,300	26,545	1.00	\$2,811,300	26,545	\$75.66	8,287.97	\$109.54			
201301	24,621	39,171	\$3,252,285	29,079	1.00	\$3,252,285	29,079	\$76.17	8,320.32	\$109.86			
201302	24,792	39,397	\$2,909,926	26,209	1.00	\$2,909,926	26,209	\$76.03	8,301.37	\$109.91			
201303	24,950	39,658	\$3,149,669	27,338	1.00	\$3,149,669	27,338	\$76.04	8,264.00	\$110.42	2.4%	0.9%	1.5%
201304	25,094	39,885	\$3,104,064	28,324	1.00	\$3,104,064	28,324	\$76.17	8,281.59	\$110.37	1.5%	0.8%	0.7%
201305	25,173	39,831	\$3,418,273	28,435	1.00	\$3,418,273	28,435	\$76.76	8,279.64	\$111.25	1.5%	0.3%	1.2%
201306	25,507	40,354	\$3,109,552	26,764	1.00	\$3,109,552	26,764	\$77.06	8,275.90	\$111.74	1.5%	0.5%	1.0%
201307	25,551	40,481	\$3,330,935	28,002	1.00	\$3,330,935	28,002	\$77.66	8,285.84	\$112.47	1.8%	0.2%	1.6%
201308	25,836	40,969	\$3,456,548	27,527	1.00	\$3,456,548	27,527	\$78.39	8,264.55	\$113.82	3.0%	-0.3%	3.3%
201309	25,931	41,107	\$3,245,252	26,683	1.00	\$3,245,252	26,683	\$79.09	8,264.15	\$114.85	4.3%	-0.2%	4.4%
201310	25,875	41,086	\$3,617,879	28,551	1.00	\$3,617,879	28,551	\$80.13	8,266.26	\$116.32	5.5%	-0.3%	5.8%
201311	26,103	41,553	\$3,439,482	27,245	1.00	\$3,439,482	27,245	\$80.60	8,234.49	\$117.46	6.3%	-0.7%	7.1%
201312	26,846	42,793	\$3,704,278	28,821	1.00	\$3,704,278	28,821	\$81.72	8,216.86	\$119.34	8.0%	-0.9%	8.9%
201401	27,338	44,096	\$3,200,129	28,559	1.00	\$3,200,129	28,559	\$80.79	8,121.77	\$119.37	6.1%	-2.4%	8.7%
201402	26,670	43,171	\$2,962,777	26,058	1.00	\$2,962,777	26,058	\$80.28	8,056.19	\$119.58	5.6%	-3.0%	8.8%
201403	25,831	41,851	\$3,479,718	28,851	1.00	\$3,479,718	28,851	\$80.59	8,057.17	\$120.03	6.0%	-2.5%	8.7%
Experience Period	306,279	486,285	\$39,738,141	332,978	1.00	\$39,738,141	332,978						
201303	24,950	39,658									2.4%	0.9%	1.5%
201309	25,931	41,107									4.3%	-0.2%	4.4%
201312	26,846	42,793									8.0%	-0.9%	8.9%
Avg last 6 months	26,024	41,332									4.8%	-0.4%	5.2%
Selected Pricing Trend												1.0%	7.0%

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
BlueChoice D.C. Small Group & Individual Base Experience Medical and Rx Total
Experience Period: Incurred 201301 - 201312, Paid through 201403

Month	Contracts	Members	Allowed	Completion Factor	Completed	Rolling 12 PMPM	Rolling 12 Trend
					Allowed	Allowed	Allowed
201104	20,179	32,103	\$8,393,779	1.00	\$8,393,779		
201105	20,433	32,618	\$9,911,507	1.00	\$9,911,507		
201106	20,558	32,743	\$8,792,930	1.00	\$8,792,930		
201107	20,647	32,974	\$8,362,561	1.00	\$8,362,561		
201108	20,844	33,208	\$9,730,367	1.00	\$9,730,367		
201109	21,046	33,538	\$9,606,650	1.00	\$9,606,650		
201110	21,026	33,329	\$9,246,249	1.00	\$9,246,249		
201111	21,175	33,483	\$10,023,690	1.00	\$10,023,690		
201112	21,594	34,138	\$9,422,224	1.00	\$9,422,224		
201201	21,693	34,301	\$10,284,422	1.00	\$10,284,422		
201202	21,999	34,878	\$10,981,316	1.00	\$10,981,316		
201203	22,133	35,090	\$11,297,535	1.00	\$11,297,944	\$288.40	
201204	22,251	35,294	\$9,810,640	1.00	\$9,811,419	\$289.63	
201205	22,108	35,120	\$10,476,077	1.00	\$10,477,865	\$289.24	
201206	22,593	35,883	\$10,169,061	1.00	\$10,171,340	\$290.38	
201207	22,715	36,080	\$10,841,164	1.00	\$10,843,717	\$294.19	
201208	23,030	36,529	\$11,037,611	1.00	\$11,040,651	\$294.99	
201209	23,253	36,879	\$10,326,641	1.00	\$10,329,649	\$294.37	
201210	23,369	37,068	\$11,462,710	1.00	\$11,466,909	\$297.01	
201211	23,881	37,872	\$10,190,672	1.00	\$10,195,217	\$294.37	
201212	24,214	38,435	\$10,357,405	1.00	\$10,363,164	\$293.62	
201301	24,621	39,171	\$12,720,939	1.00	\$12,730,015	\$295.94	
201302	24,792	39,397	\$11,739,958	1.00	\$11,750,649	\$294.66	
201303	24,950	39,658	\$13,955,026	1.00	\$13,971,502	\$297.62	3.2%
201304	25,094	39,885	\$12,910,982	1.00	\$12,930,188	\$301.50	4.1%
201305	25,173	39,831	\$13,087,296	1.00	\$13,112,068	\$304.16	5.2%
201306	25,507	40,354	\$11,316,059	1.00	\$11,340,059	\$303.74	4.6%
201307	25,551	40,481	\$13,826,206	1.00	\$13,865,282	\$307.36	4.5%
201308	25,836	40,969	\$12,707,649	1.00	\$12,761,199	\$308.12	4.4%
201309	25,931	41,107	\$12,352,388	0.99	\$12,425,946	\$309.79	5.2%
201310	25,875	41,086	\$13,188,057	0.99	\$13,317,643	\$311.06	4.7%
201311	26,103	41,553	\$12,201,777	0.99	\$12,379,014	\$313.21	6.4%
201312	26,846	42,793	\$12,265,685	0.98	\$12,542,580	\$314.89	7.2%
201401	27,338	44,096	\$13,180,367	0.95	\$13,889,358	\$314.09	6.1%
201402	26,670	43,171	\$10,376,877	0.85	\$12,229,659	\$312.67	6.1%
201403	25,831	41,851	\$7,292,726	0.51	\$14,215,201	\$311.78	4.8%
Experience Period	306,279	486,285	\$152,272,023	0.99	\$153,126,148		
201303	24,950	39,658					3.2%
201309	25,931	41,107					5.2%
201312	26,846	42,793					7.2%
Avg last 6 months	26,024	41,332					5.4%

**CareFirst BlueCross BlueShield
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

BC Trend Support - Individual, non-Medigap & Small Group Combined

	Total Allowed*	Experience Period Actual Trend*		Projection Period Trend		Difference Proj vs. Exp trend	
		6 Mth Average of R12 Trends		Unit Cost	Utilization	Unit Cost	Utilization
Inpatient	\$ 29,354,475	9.0%	-0.6%	7.0%	1.0%	-2.0%	1.6%
Outpatient	\$ 26,666,931	9.3%	-1.8%	9.5%	0.0%	0.2%	1.8%
Professional	\$ 51,117,073	-0.2%	3.2%	0.0%	4.5%	0.2%	1.3%
Other	\$ 6,249,527	-0.4%	8.5%	0.0%	6.0%	0.4%	-2.5%
Rx	\$ 39,738,141	5.2%	-0.4%	7.0%	1.0%	1.8%	1.4%
Total	\$ 153,126,148	4.6%	0.9%	4.8%	2.2%	0.2%	1.3%
Claims-Weighted Total Trend (Cost & Utilization combined)		5.6%		7.1%		1.5%	
Total Trend from Allowed PMPM Projection Pages (Incl Capitations, Excl GF SG business)				7.0%			

* Includes grandfathered Small Group business.

CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015
Morbidity Impact on Small Group/Individual HMO/PPO combined

The current combined Individual/Small Group non-Grandfathered pool is expected to increase from approximately 72,700 members today to approximately 94,000 members in 2015. This 21,300 member increase is expected to come from an influx of the following new entrants:

- a) Prior IND64- grandfathered members (Underwritten, HIPAA, Group Conversion, Open Enrollment) - ~1,100 members
- b) Former large group enrollees - ~2,000 members
- c) Former small group enrollees - ~500 members
- d) Newly insured entrants who were formerly uninsured - ~3,000 members
- e) Congress - ~10,100 members
- f) Competitors - ~4,600 members

The estimated average morbidity of these 21,300 new entrants is approximately 0.99 compared to the current Small Group/Individual merged pool and when blended with the 1.00 morbidity of the current pool, yields a resultant 2015 morbidity of 1.00 in relation to the current non-Grandfathered pool.

**CareFirst BlueCross BlueShield (BlueChoice)
D.C. Small Group Products - On Exchange Rate Filing Effective 1/1/2015**

DC Combined - Small Group & Individual Capitations

<u>BlueChoice</u>	<u>Description</u>	<u>1/1/13</u> <u>PMPM</u>	<u>1/1/14</u> <u>PMPM</u>	<u>Δ</u>
	Mental Health UR	\$0.94	\$0.03	-96.5%
	Nurse Hotline	\$0.04	\$0.00	-100.0%
	Wellness*	\$0.21	\$0.00	-100.0%
	Vision	\$0.46	\$0.02	-95.6%
	TOTAL:	\$1.65	\$0.05	-96.8%

*The total capitation for Wellness is \$0.26, but only applies to members age 18+.

CAREFIRST BLUECROSS BLUESHIELD (CF)
PART III ACTUARIAL MEMORANDUM

1. GENERAL INFORMATION:

- A. **Company Legal Name:** BlueChoice, Inc. (NAIC # 96202). (BC).
- B. **Jurisdiction:** District of Columbia.
- C. **HIOS Issuer ID:** 86052.
- D. **Market:** Small Group (SG). In 2015 the 2014 Off Exchange benefits are being subsumed into On Exchange.
- E. **Effective Date:** 1/1/15 – 12/31/15.

- F. **Primary Contact Name:** Mr. Dwayne Lucado, F.S.A., M.A.A.A.
- G. **Primary Contact Telephone Number:** 410-998-7519.
- H. **Primary Contact E-Mail Address:** Dwayne.Lucado@CareFirst.com.

2. PROPOSED RATE INCREASE(S): In compliance with the “Patient Protection and Affordable Care Act” (ACA, H.R. 3590) and toward the same 2014 objectives of maximizing access and affordability, long-term financial viability and customer rate stability, CF is proposing to raise 1Q15 premiums by 12.9%, prior to age band changes. (For CF the proposed 1Q15 renewal is 12.4%.) The range is 10.1% to 14.9%. (For renewing customers, an age band change adds 2.6% to the renewal, on average, with a range of 0.0% to 3.9% for ages 22 and upwards per the DC age curve.) Since we are filing incremental quarterly trend increases for 2015, the 2Q15, 3Q15, and 4Q15 renewals are estimated to be 12.0%, 11.2%, and 10.4%, respectively.

3. EXPERIENCE PERIOD PREMIUM AND CLAIMS: The incurred period is 1/1/13 through 12/31/13, as required.

- A. **Paid Through Date:** 3/31/14.
- B. **Premiums (Net of Medical Loss Ratio (MLR) Rebate) in Experience Period:** \$137,679,176 (Merged Index Rate).
- C. **Allowed and Incurred Claims From Experience Period:** \$136,985,100 (Merged Index Rate).

4. BENEFIT CATEGORIES:

- A. Inpatient (hospital).
- B. Outpatient (hospital) (OP).
- C. Professional.
- D. Other Medical (non-capitated ambulance, home health care, durable medical equipment, prosthetics, supplies, vision exams, dental services and other).
- E. Prescription drug (Rx).
- F. Capitations.

5. PROJECTION FACTORS:

- A. **Changes in the Morbidity of the Population Insured:** For 2015, CareFirst estimates a morbidity factor that is almost identical to 2014’s projected morbidity. The morbidity risk factor projections are based upon the model that supported CareFirst’s 2014 rate filings. The model compares known and estimated allowed claims costs per member per month (PMPM) for 2013 to project the costs of various categories of the estimated 2015 membership.

These categories are based upon the prior status of the 2015 membership – previous CareFirst members (medically underwritten “Individual Non-Medigap” (INM), Open Enrollment, HIPAA, Group Conversion, Groups (small and large including Congress)) and New Entrants sorted by income (i.e.,

> 200% of Federal Poverty Level (FPL)). As of 5/12/14, CF has enrolled approximately 10,000 members from Congress through the Small Business Health Options Program (SHOP). The prospect of offering of SHOP plans to Congress was not known at the time of the 2014 rate filings. This influx of Congressional members with an average age of 32.3 years versus 33.7 for SG and 36.1 for INM contributed to the decline in the morbidity factor. Congress is projected to represent ~12% of total enrollment with an ~10% improvement in the loss ratio leading to ~1% reduction to premiums. On 12/31/15 we are projecting about 23,000 CF INM members and 71,000 for CF SG for a total of approximately 94,000.

- B. **Changes in Benefits:** We are adding 3 new benefits to our portfolio bringing the total number of unique plans from 54 to 57 – 4 Bronze, 14 Silver (includes a new PPO \$1,000 deductible plan), 18 Gold (including a new BlueChoice Advantage \$500 deductible plan and a new PPO \$500 deductible plan), and 21 Platinum. We have recalculated the costs of “Essential Health Benefits” (EHB) as well as Non-EHBs.

The out-of-area (OOA) utilization for our Open Access Advantage (ADV) benefit which is tailored to groups with employees outside of our service area has been revised to 12.5% from 5% in 2014. This raised ADV rates more than others since OOA utilization incurs “interplan transfer services” (ITS), “Administrative Expense Allowance” (AEA) and BlueCard fees, for example.

Related to autism benefits, per the “Better Prices, Better Quality, Better Choices for Health Coverage Amendment Act of 2013” passed on 6/4/13 (D.C. Official Code § 31-3171.01, et seq.) we have calculated an increase in claims PMPM of \$1.74 for INM and \$5.15 for SG PMPM for 2015. This is largely for “Applied Behavioral Analysis” (ABA) treatments and is a D.C.-mandated benefit.

Attached exhibits detail adjustments for pediatric dental, mandatory generics, a new hepatitis C prescription drug, Sovaldi, and maternity.

- C. **Changes in Demographics:** Comparing the overall CareFirst member-level average age as of 12/31/12 to 3/31/14, we have seen an increase of 0.4 years from 33.8 to 34.2. For BlueChoice the increase is +0.6 from 33.7 to 34.3. For Group Hospitalization and Medical Services, Inc. (GHMSI) the increase is +0.2 years from 33.9 to 34.1.

For INM CF, the average age increased by 2.1 years from 34.0 to 36.1. For BlueChoice the increase is +1.8 from 34.2 to 36.0. For GHMSI the increase is +2.4 years from 33.9 to 36.3.

Age factors will account for a portion of the corresponding increase in claims cost. We find the CMS age curve spread of “3 to 1” to be lower than the “4.5 to 1” that is more correlated with expected claims costs. We have therefore adjusted expected claims costs accordingly in the “experience period” (EP) index rate projection in the “other” category.

- D. **Other Adjustments:** CareFirst (CF) is proposing to introduce an incentive program (IP) whereby members can earn medical expense debit cards of as much as \$150 annually, for an individual (\$400 for a family). The cards must be utilized for qualified medical expenses such as deductibles, copays, and out-of-pocket costs. The scope includes all metaleed benefit plans within CF’s portfolio. This is being done in a revenue-neutral way. That is, the costs to CF of the incentive payments were chosen such that they match the expected savings to CF from more efficacious health care delivery. “HealthyBlue” (HB) was first launched effective 10/1/10 with the objective of motivating and rewarding greater engagement by the member in his or her health, improved wellness and prevention and better provider coordination and quality. As we sought to respond to feedback about HB, subsequent versions were released on 1/1/12 and 10/1/12. This IP represents an evolution of the HB concept. Further, it joins the tenets of HB with our “Patient Centered Medical Home” (PCMH) program which was launched in January, 2011.

The savings has been incorporated in the "Other" category when projecting the EP index rate. The cost of the incentive has been included in "general and administrative expenses." Our aim is that this IP will improve our members' health.

Included in this calculation are decreases to claims costs for 1) a change in our "Pharmacy Benefits Manager" (PBM) in 2014 and 2) a reduction in our fee schedule for out-of-network (OON) utilization for HMO-based products that have an OON option (a.k.a., "NP3").

- E. **Trend Factors (Cost/Utilization):** The proposed trend of 7.0% is a reduction of 200 basis points from 2014's 9.0%.

6. CREDIBILITY MANUAL RATE DEVELOPMENT:

- A. **Source and Appropriateness of Experience Data Used:** The calendar 2013 base data includes 438,476 member months (average monthly of 36,540) and is therefore considered 100% credible.
- B. **Adjustments Made to the Data:** Non-EHBs (adult vision and abortion) were removed to develop the index rate.
- C. **Inclusion of Capitation Payments:** A new exhibit lists all capitations.

7. **PAID TO ALLOWED RATIO:** Projected at 80.4%, on average.

8. RISK ADJUSTMENT AND REINSURANCE:

- A. **Projected Risk Adjustments PMPM:** +\$24 PMPM for 1Q15. This is based on an analysis of the market by Wakely Consulting where CF's normalized risk scores for BC and GHMSI are 0.92 and 1.08. We have applied these percentages to our projected index rates for each quarter of 2015 to translate the risk score into a PMPM. We gave 75% credibility to the Wakely numbers. A risk transfer payment has been shown on our exhibit demonstrating MLR compliance.
- B. **Projected ACA Reinsurance Recoveries Net of Reinsurance Premium (Individual Market and Combined Markets Only):** Not applicable.

9. **NON-BENEFIT EXPENSES AND CONTRIBUTION TO RESERVE (CtR):** The 2015 "desired incurred claims ratio" (DICR) has decreased from 76.9% (2014) to 72.7% due primarily to the medical expense debit card issue described in "Other Adjustments" above.

A. **Administrative Expense Load:** G&A PMPMs increased by 3% versus 2014.

B. **CtR & Risk Margin:** Pre-tax CtR is 2.0% versus 3.0% in 2014.

C. Taxes and Fees:

- Community Health Investment of 2.0%.
- Federal Income Tax (FIT) of 0.7% (35% FIT rate).
- Health Insurer Fee increased 90 basis points to 3.2% considering non-deductibility for tax purposes.
- Patient-Centered Outcomes Research Institute (PCORI) of \$2.11 PMPY (\$0.18 PMPM).
- Reinsurance Payments decreased from \$5.25 PMPM to \$3.60 PMPM.
- Risk Adjustment User Fees remained at \$0.08 PMPM.
- Reinsurance Administrative Fee is \$0.11 PMPM.
- Exchange Assessment Fee of 1.0% for 2015 and 1.0% for 2014 per the "Health Benefit Exchange Authority Financial Sustainability Emergency Amendment Act of 2014" (D.C. Act 20-329) approved on 5/22/14. In addition, there is an additional state assessment fee of 0.1%.

10. **PROJECTED LOSS RATIO:** Our projected DICR for MLR purposes is 85.1%, meeting the 80.0% minimum of "Public Health Service Act" (PHSA) 218. For testing we used the combined experience of INM and SG.
11. **SINGLE RISK POOL (SRP):** Our SRP reflects all covered lives for every non-grandfathered product in our market per 45 CFR Part § 156.80 (d). There are no transitional policies for CareFirst in D.C. This encompasses INM Open Enrollment, HIPAA, Group Conversion, and formerly medically underwritten coverages as well as SGs.
12. **INDEX RATE:** The EP index rate is a key component driving the renewal. Last year's implicit 2013 index rate was \$329 (\$302 + trend of 9.0%). The actual for 2013 is \$312 for a favorable variance of -5%.

For BlueChoice the experience period index rates for INM, SG and INM+SG are \$370, \$306 and \$312, respectively. By using the merged index rate, INM goes down by -16% (i.e., \$312 versus \$370) and SG goes up by +2% (i.e., \$312 versus \$306).

For CF the experience period index rates for INM, SG and INM+SG are \$290, \$372 and \$364, respectively. By using the merged index rate, INM goes up by +26% (i.e., \$364 versus \$290) and SG goes down by -2% (i.e., \$364 versus \$372).

The ratio of our composite PPO to HMO rate was 1.16 in 2014. 2015 filings maintain this ratio.

Retail Clinics will have reduced copays to match the Primary Care Provider (PCP) rather than specialist copay with negligible price impact.

13. **MARKET ADJUSTED INDEX RATE:** A summary exhibit is provided.
14. **PLAN ADJUSTED INDEX RATES:** Network factors composite to 1.00. The "cost-share" factor includes 1) pricing AVs, 2) H.S.A./Non-H.S.A. factors, and 3) benefit generosity. There are 4 types of network factors for BC plans – Lock In / Referral, Open Access, Open Access Plus, and Open Access Advantage.
15. **CALIBRATION:** Done for age and geography but we have elected not to rate for tobacco usage. Capping dependents under the age of 21 at 3 is implicit in the calibration.
16. **CONSUMER ADJUSTED PREMIUM RATE DEVELOPMENT:** A summary exhibit is provided.
17. **HHS ACTUARIAL METAL VALUES (AV):** The 2014 Federal calculator was used exclusively without major modifications. Thirty-one of the thirty-six BlueChoice plans required minor modifications to the AV inputs. These plans have copays on OP facility and/or OP Surgery Physician/Surgical Services, which are not accommodated by the AV calculator. Equivalent coinsurances were computed using the AV calculator continuance tables so that an input could be entered.

For the following plan designs, a subset of generic drugs are not subject to the integrated medical and drug deductible: HealthyBlue HMO HSA/HRA \$2,000, HealthyBlue Plus HSA/HRA \$2,000, and HealthyBlue Advantage HSA/HRA \$2,000. As such, these are considered unique plan designs. For these plans, a baseline AV was calculated assuming the deductible applies to all generic drugs. A second AV was calculated assuming no generic drugs are subject to the deductible. A proportion of this difference based on the ratio of the allowed costs of the applicable generic drugs to the allowed costs of all generic drugs was added to the baseline.

Printouts for each plan are provided as part of the QHP binder submission under separate cover.

18. **AV PRICING VALUES:** We have updated our internal AV model with the latest experience and with corrections for computing effective coinsurance for emergency room (ER) and inpatient hospital care. The

result was a needed upward adjustment of ~6% to allowed claims which we are proposing to grade in by using a 50%/50% blend of the 2014 and 2015 AVs.

19. **MEMBERSHIP PROJECTIONS:** We had projected 39% of enrollment in HMO-based plans as of 12/31/14 in our 2014 filings. Actual data as of 5/12/14 indicate that HMO will comprise 42% of our CF members. Approximately 75% of actual YTD enrollment is in Gold plans. We incorporated this in projecting 12/31/15 enrollment. As of 5/12/14 we have 6,205 INM members in metaled products and 16,960 SG members in metaled products.
20. **TERMINATED PRODUCTS:** Not applicable.
21. **PLAN TYPE:** HMO and POS.
22. **WARNING ALERTS:** Per the District's instructions, the index rate was developed with combined Small Group/Individual experience which is entered on Worksheet 1 of the URRT, but the plan level rates were developed separately as the markets are remaining separate from the federal perspective. Therefore, Worksheet 2 has only the Small Group market's plan data, and most of the warnings have been triggered because the Small Group totals on Worksheet 2 are less than the combined Small Group/Individual totals on Worksheet 1.
23. **RELIANCE:** None.

Rate Filing Justification Part II (Plain Language Summary)

Pursuant to 45 CFR 154.215, health insurance issuers are required to file Rate Filing Justifications. Part II of the Rate Filing Justification for rate increases and new submissions must contain a written description that includes a simple and brief narrative describing the data and assumptions that were used to develop the proposed rates. The Part II template below must be filled out and uploaded as an Adobe PDF or Microsoft Word file.

Name of Company CareFirst BlueChoice, Inc.

SERFF tracking number CFAP-129567877

Submission Date 06/13/2014

Product Name BlueChoice HMO Referral, BlueChoice HMO, BlueChoice Plus, BlueChoice Advantage, BlueChoice HMO Referral HSA/HRA, BlueChoice HMO HSA/HRA, BlueChoice Plus HSA/HRA, BlueChoice Advantage HSA/HRA, HealthyBlue HMO, HealthyBlue HMO HSA/HRA, HealthyBlue Plus, HealthyBlue Plus HSA/HRA, HealthyBlue Advantage, HealthyBlue Advantage HSA/HRA

Market Type (Individual/Small Group) Small Group

Rate Filing Type (Rate Increase / New Filing) Rate Increase

Scope and Range of the Increase:

The 12.9% increase is requested because:

of a projected increase in risk adjustment transfer payment, related taxes and fees, and projected increases in medical and prescription drug costs and utilization.

This filing will impact:

of D.C. policyholders 5,363 # of D.C. covered lives 8,544

The average, minimum, and maximum rate changes increases are:

- Average Rate Change: The average premium change, by percentage, across all policy holders if the filing is approved 12.9%
- Minimum Rate Change: The smallest premium increase (or largest decrease), by percentage, that any one policy holder would experience if the filing is approved 10.1%
- Maximum Rate Change: The largest premium increase, by percentage, that any one policy holder would experience if the filing is approved 14.9%

Individuals within the group may vary from the aggregate of the above increase components as a result of: product selection, changes in age factors, and changes in family composition.

Financial Experience of Product

The overall financial experience of the product includes:

Since these products were new effective 1/1/2014, no historical financial experience is included in this filing.

The rate increase will affect the projected financial experience of the product by:
__n/a__

Components of Increase

The request is made up of the following components:

Trend Increases – __-1.1%__% of the __12.9%__% total filed increase

1. Medical Utilization Changes – Defined as the increase in total plan claim costs not attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts. Examples include changes in the mix of services utilized, or an increase/decrease in the frequency of service utilization.

This component is __-0.2%__% of the __12.9__% total filed increase.

2. Medical Price Changes – Defined as the increase in total plan claim costs attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts.

This component is __-0.9%__% of the __12.9__% total filed increase.

Other Increases – __14.0__% of the __12.9__% total filed increase

1. Medical Benefit Changes Required by Law – Defined as any new mandated plan benefit changes, as mandated by either State or Federal Regulation.

This component is __1.2__% of the __12.9__% total filed increase.

2. Medical Benefit Changes Not Required by Law – Defined as changes in plan benefit design made by the company, which are not required by either State or Federal Regulation.

This component is __0.7__% of the __12.9__% total filed increase.

3. Changes to Administration Costs – Defined as increases in the costs of providing insurance coverage. Examples include claims payment expenses, distribution costs, taxes, and general business expenses such as rent, salaries, and overhead.

This component is __2.3__% of the __12.9__% total filed increase.

4. Changes to Profit Margin – Defined as increases to company surplus or changes as an additional margin to cover the risk of the company.

This component is __-0.7__% of the __12.9__% total filed increase.

5. Other – Defined as:

__Items included in this category include ACA related fees and taxes, assessment fees, new incentive program, and changes in assumed risk adjustment payments or receipts.__

This component is __10.5__% of the __12.9__% total filed increase.

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	X	Y
1	Unified Rate Review v2.0.2																						
2																							
3	Company Legal Name:	BlueChoice, Inc.	State:	DC																			
4	HIOS Issuer ID:	86052	Market:	Small Group																			
5	Effective Date of Rate Change(s):	1/1/2015																					
6																							
7																							
8	Market Level Calculations (Same for all Plans)																						
9																							
10																							
11	Section I: Experience period data																						
12	Experience Period:	1/1/2013	to	12/31/2013																			
13			Experience Period																				
14			Aggregate Amount	PMPM	% of Prem																		
15	Premiums (net of MLR Rebate) in Experience Period:	\$137,679,176	\$313.99	100.00%																			
16	Incurred Claims in Experience Period	\$121,687,368	277.52	88.38%																			
17	Allowed Claims:	\$136,985,100	312.41	99.50%																			
18	Index Rate of Experience Period		\$311.00																				
19	Experience Period Member Months	438,476																					
20	Section II: Allowed Claims, PMPM basis																						
21		Experience Period	Projection Period:	1/1/2015	to	12/31/2015	Mid-point to Mid-point, Experience to Projection:	24	months														
22		on Actual Experience Allowed	Adj't. from Experience to Projection Period	Annualized Trend Factors	Projections, before credibility Adjustment	Credibility Manual																	
23	Benefit Category	Utilization per Description	Utilization per 1,000	Average Cost/Service	PMPM	Pop'l risk Morbidity	Other	Cost	Util	Utilization per 1,000	Average Cost/Service	PMPM	Utilization per 1,000	Average Cost/Service	PMPM								
24	Inpatient Hospital	Admits	53.86	13,753.39	\$61.73	1.00	0.99	1.070	1.010	54.95	\$15,656.85	\$71.69	54.95	15656.85	\$71.69								
25	Outpatient Hospital	Visits	546.75	1,221.89	55.67	1.00	0.99	1.095	1.000	546.75	1,456.76	66.37	546.75	1456.76	66.37								
26	Professional	Visits	8,800.02	143.26	105.06	1.00	1.04	1.000	1.045	9,609.84	148.88	119.23	9609.84	148.88	119.23								
27	Other Medical	Services	604.74	256.12	12.91	1.00	1.29	1.000	1.060	679.49	331.50	18.77	679.49	331.50	18.77								
28	Capitation	Other	12,000.00	1.63	1.63	1.00	0.96	1.020	1.000	12,000.00	1.62	1.62	12000.00	1.62	1.62								
29	Prescription Drug	Prescriptions	8,228.15	109.98	75.41	1.00	0.96	1.070	1.010	8,393.54	120.96	84.61	8393.54	120.96	84.61								
30	Total				\$312.41							\$362.29			\$362.29								
31																							
32	Section III: Projected Experience:																						
33																						After Credibility	Projected Period Totals
34																							
35																							
36																							
37																							
38																							
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48																							
49	Information Not Releasable to the Public Unless Authorized by Law: This information has not been publically disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.																						
50																							

Product-Plan Data Collection

Company Legal Name:
HIOS Issuer ID:
Effective Date of Rate Change(s):

Product/Plan Level Calculations

Section I: General Product and Plan Information

Product	noice Advantage HS				HealthyBlue HMO				HealthyBlue HSA				HealthyBlue Plus				HealthyBlue Advantage				yBlue Advantage HS							
	Platinum		Silver		Gold		Platinum		Silver		Gold		Platinum		Silver		Gold		Platinum		Silver							
Product ID:	86052DC040007		86052DC0440004		86052DC0450002		86052DC0540004		86052DC0540005		86052DC0550002		86052DC0560004		86052DC0560005		86052DC0570002		86052DC0520004		86052DC0520005		86052DC0520006		86052DC0530002			
Plan Type:	BlueChoice		BlueChoice		BlueChoice		BlueChoice		BlueChoice		BlueChoice		BlueChoice		BlueChoice		BlueChoice		BlueChoice		BlueChoice		BlueChoice		BlueChoice			
Plan Name:	100%/70%		100%/70%		HSA/HRA \$1500		HealthyBlue HMO \$1500		HealthyBlue HMO \$300		HealthyBlue HMO \$600		HealthyBlue HMO HSA/HRA \$2,000		HealthyBlue Plus \$300		HealthyBlue Plus \$600		HealthyBlue Plus HSA/HRA \$2,000		HealthyBlue Advantage \$1,500		HealthyBlue Advantage \$300		HealthyBlue Advantage \$600		HSA/HRA \$2,000	
Plan ID (Standard Component ID):	86052DC0440007		86052DC0440004		86052DC0450002		86052DC0540004		86052DC0540005		86052DC0550002		86052DC0560004		86052DC0560005		86052DC0570002		86052DC0520004		86052DC0520005		86052DC0520006		86052DC0530002			
Exchange Plan?	Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes		Yes			
Historical Rate Increase - Calendar Year - 2	0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%			
Historical Rate Increase - Calendar Year - 1	0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%			
Historical Rate Increase - Calendar Year 0	0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%		0.00%			
Effective Date of Proposed Rates	1/1/2015		1/1/2015		1/1/2015		1/1/2015		1/1/2015		1/1/2015		1/1/2015		1/1/2015		1/1/2015		1/1/2015		1/1/2015		1/1/2015		1/1/2015			
Rate Change % (over prior filing)	5.69%		4.36%		6.49%		7.08%		5.27%		4.79%		6.90%		6.75%		4.44%		6.57%		7.94%		6.12%		5.61%		7.76%	
Rate Change % (over 12 mos prior)	12.68%		11.06%		13.33%		13.98%		12.04%		13.50%		13.76%		13.63%		11.69%		13.42%		14.88%		13.40%		14.68%			
Prod'd Per Rate Change % (over Expr. Period)	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!			
Product Threshold Rate Increase %	13.32%		13.32%		13.32%		13.38%		13.38%		13.76%		12.45%		13.41%		14.78%		14.78%		14.78%		14.68%		14.68%			

Section II: Components of Premium Increase (PMPM Dollar Amount above

Plan ID (Standard Component ID):	Total	86052DC0440007	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0550002	86052DC0560004	86052DC0560005	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Inpatient	\$0.00	\$12.03	\$11.10	\$8.12	\$9.83	\$11.03	\$10.45	\$7.56	\$9.97	\$11.16	\$10.57	\$7.66	\$12.08	\$11.46
Outpatient	\$0.00	\$0.59	\$0.28	\$0.71	\$1.13	\$0.30	\$0.01	\$0.81	\$1.00	\$0.10	\$0.70	\$1.62	\$0.85	\$0.52
Professional	\$0.00	\$5.81	\$7.35	\$3.15	\$3.17	\$5.91	\$6.32	\$2.38	\$3.56	\$6.46	\$2.90	\$5.19	\$5.84	\$2.88
Prescription Drug	\$0.00	\$3.63	\$4.72	\$1.91	\$1.87	\$4.03	\$3.94	\$2.14	\$4.10	\$4.41	\$1.75	\$3.38	\$3.19	\$1.17
Other	\$0.00	\$1.55	\$1.31	\$1.10	\$1.37	\$1.39	\$1.27	\$1.04	\$1.36	\$1.37	\$1.26	\$1.04	\$1.55	\$1.47
Capitation	\$0.00	\$0.46	\$0.43	\$0.30	\$0.36	\$0.42	\$0.40	\$0.28	\$0.43	\$0.41	\$0.28	\$0.39	\$0.45	\$0.44
Administration	\$0.00	\$2.72	\$2.21	\$1.95	\$2.46	\$2.40	\$1.87	\$1.82	\$2.36	\$2.12	\$1.85	\$2.83	\$2.57	\$2.15
Taxes & Fees	\$0.00	\$18.90	\$17.85	\$12.59	\$15.30	\$17.44	\$16.68	\$11.65	\$15.38	\$17.75	\$16.97	\$11.87	\$16.28	\$18.04
Risk & Profit Charge	\$0.00	\$2.87	\$7.65	\$5.16	\$6.12	\$7.09	\$6.74	\$5.27	\$7.51	\$7.26	\$4.85	\$6.49	\$7.78	\$5.00
Total Rate Increase	\$0.00	\$34.68	\$28.20	\$24.87	\$31.33	\$30.67	\$27.70	\$23.82	\$31.09	\$30.12	\$27.10	\$23.61	\$35.99	\$32.84
Member Cost Share Increase	\$0.00	\$9.01	\$4.60	\$12.98	\$16.85	\$10.73	\$9.59	\$16.27	\$11.24	\$10.06	\$17.13	\$16.90	\$10.81	\$9.54
Average Current Rate PMPM	\$396.71	\$480.50	\$480.21	\$309.82	\$363.07	\$451.13	\$440.87	\$282.00	\$374.61	\$465.48	\$454.90	\$291.06	\$378.58	\$470.41
Projected Member Months	354,972	5,940	52	7,332	2,448	48	5,136	13,020	11,328	2,748	1,992	113,592	4,836	1,500

Section III: Experience Period Information

Plan ID (Standard Component ID):	Total	86052DC0440007	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0550002	86052DC0560004	86052DC0560005	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Average Rate PMPM	\$322.73	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Member Months	395,721	0	0	0	0	0	0	0	0	0	0	0	0	
Total Premium (TP)	\$127,712,100	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
EHB Percent of TP, [see instructions]	99.67%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
state mandated benefits portion of TP that are other than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Other benefits portion of TP	0.33%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	
Total Allowed Claims (TAC)	\$120,627,293	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
EHB Percent of TAC, [see instructions]	99.67%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
state mandated benefits portion of TAC that are other than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Other benefits portion of TAC	0.33%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	
Allowed Claims which are not the issuer's obligation:	\$13,282,289	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Portion of above payable by HHS's funds on behalf of insured person, in dollars	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Portion of above payable by HHS on behalf of insured person, as %	0.00%	#DIV/0!												
Total Incurred Claims, payable with issuer funds	\$107,345,008	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Net Amt of Reim	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Net Amt of Risk Adj	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Incurred Claims PMPM	\$271.26	#DIV/0!												
Allowed Claims PMPM	\$304.83	#DIV/0!												
EHB portion of Allowed Claims, PMPM	\$303.82	#DIV/0!												

Section IV: Projected (12 months following effective date)

Plan ID (Standard Component ID):	Total	86052DC0440007	86052DC0440004	86052DC0450002	86052DC0540004	86052DC0540005	86052DC0550002	86052DC0560004	86052DC0560005	86052DC0570002	86052DC0520004	86052DC0520005	86052DC0520006	86052DC0530002
Plan Adjusted Index Rate	\$426.38	\$515.18	\$508.41	\$334.69	\$394.39	\$481.80	\$468.57	\$305.91	\$405.70	\$495.61	\$482.00	\$314.68	\$414.58	
Member Months	5,940	52	5,940	7,332	2,448	48	5,136	13,020	11,328	2,748	1,992	113,592	4,836	
Total Premium (TP)	\$151,354,542	\$3,060,176	\$2,804,643	\$1,988,086	\$2,891,701	\$1,179,441	\$22,491	\$1,573,148	\$5,282,182	\$5,614,224	\$1,324,529	\$626,835	\$47,092,800	
EHB Percent of TP, [see instructions]	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	
state mandated benefits portion of TP that are other than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Other benefits portion of TP	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	
Total Allowed Claims (TAC)	\$128,546,568	\$2,209,666	\$205,343	\$2,209,666	\$2,594,698	\$866,315	\$16,987	\$1,817,562	\$4,739,655	\$4,123,719	\$1,000,351	\$725,145	\$42,255,953	
EHB Percent of TAC, [see instructions]	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	99.69%	
state mandated benefits portion of TAC that are other than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Other benefits portion of TAC	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	0.31%	
Allowed Claims which are not the issuer's obligation:	\$18,424,144	\$17,987	\$1,049	\$770,969	\$489,686	\$7,741	\$614	\$680,587	\$894,494	\$36,847	\$36,161	\$271,531	\$7,974,775	
Portion of above payable by HHS's funds on behalf of insured person, in dollars	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Portion of above payable by HHS on behalf of insured person, as %	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Total Incurred Claims, payable with issuer funds	\$110,122,424	\$2,227,653	\$204,294	\$1,438,697	\$2,105,012	\$858,574	\$16,373	\$1,136,976	\$3,845,162	\$4,086,871	\$964,190	\$453,615	\$34,281,179	
Net Amt of Reim	\$-1,278,950	\$-21,402	\$-1,989	\$-21,402	\$-26,417	\$-8,820	\$-913	\$-188,505	\$-46,911	\$-40,814	\$-9,901	\$-7,177	\$-409,267	
Net Amt of Risk Adj	\$-6,749,428	\$-112,943	\$-112,943	\$-112,943	\$-119,440	\$-119,440	\$-119,440	\$-119,440	\$-247,562	\$-215,390	\$-25,200	\$-25,200	\$-215,390	
Incurred Claims PMPM	\$310.23	\$375.03	\$170.10	\$242.20	\$287.10	\$190.72	\$341.09	\$221.37	\$295.33	\$360.78	\$350.87	\$227.72	\$301.79	
Allowed Claims PMPM	\$362.13	\$372.00	\$372.00	\$312.00	\$353.89	\$353.89	\$353.89	\$353.89	\$364.03	\$364.03	\$364.03	\$364.03	\$372.00	
EHB portion of Allowed Claims, PMPM	\$361.00	\$370.84	\$370.84	\$370.84	\$352.78	\$352.78	\$352.78	\$352.78	\$362.89					

Rate Filing Justification Part II (Plain Language Summary)

Pursuant to 45 CFR 154.215, health insurance issuers are required to file Rate Filing Justifications. Part II of the Rate Filing Justification for rate increases and new submissions must contain a written description that includes a simple and brief narrative describing the data and assumptions that were used to develop the proposed rates. The Part II template below must be filled out and uploaded as an Adobe PDF or Microsoft Word file.

Name of Company CareFirst BlueChoice, Inc.

SERFF tracking number CFAP-129567877

Submission Date 06/13/2014

Product Name BlueChoice HMO Referral, BlueChoice HMO, BlueChoice Plus, BlueChoice Advantage, BlueChoice HMO Referral HSA/HRA, BlueChoice HMO HSA/HRA, BlueChoice Plus HSA/HRA, BlueChoice Advantage HSA/HRA, HealthyBlue HMO, HealthyBlue HMO HSA/HRA, HealthyBlue Plus, HealthyBlue Plus HSA/HRA, HealthyBlue Advantage, HealthyBlue Advantage HSA/HRA

Market Type (Individual/Small Group) Small Group

Rate Filing Type (Rate Increase / New Filing) Rate Increase

Scope and Range of the Increase:

The 12.9% increase is requested because:

of a projected increase in risk adjustment transfer payment, related taxes and fees, and projected increases in medical and prescription drug costs and utilization.

This filing will impact:

of D.C. policyholders 5,363 # of D.C. covered lives 8,544

The average, minimum, and maximum rate changes increases are:

- Average Rate Change: The average premium change, by percentage, across all policy holders if the filing is approved 12.9%
- Minimum Rate Change: The smallest premium increase (or largest decrease), by percentage, that any one policy holder would experience if the filing is approved 10.1%
- Maximum Rate Change: The largest premium increase, by percentage, that any one policy holder would experience if the filing is approved 14.9%

Individuals within the group may vary from the aggregate of the above increase components as a result of: product selection, changes in age factors, and changes in family composition.

Financial Experience of Product

The overall financial experience of the product includes:

Since these products were new effective 1/1/2014, no historical financial experience is included in this filing.

The rate increase will affect the projected financial experience of the product by:
__n/a__

Components of Increase

The request is made up of the following components:

Trend Increases – __-1.1%__% of the __12.9%__% total filed increase

1. Medical Utilization Changes – Defined as the increase in total plan claim costs not attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts. Examples include changes in the mix of services utilized, or an increase/decrease in the frequency of service utilization.

This component is __-0.2%__% of the __12.9__% total filed increase.

2. Medical Price Changes – Defined as the increase in total plan claim costs attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts.

This component is __-0.9%__% of the __12.9__% total filed increase.

Other Increases – __14.0__% of the __12.9__% total filed increase

1. Medical Benefit Changes Required by Law – Defined as any new mandated plan benefit changes, as mandated by either State or Federal Regulation.

This component is __1.2__% of the __12.9__% total filed increase.

2. Medical Benefit Changes Not Required by Law – Defined as changes in plan benefit design made by the company, which are not required by either State or Federal Regulation.

This component is __0.7__% of the __12.9__% total filed increase.

3. Changes to Administration Costs – Defined as increases in the costs of providing insurance coverage. Examples include claims payment expenses, distribution costs, taxes, and general business expenses such as rent, salaries, and overhead.

This component is __2.3__% of the __12.9__% total filed increase.

4. Changes to Profit Margin – Defined as increases to company surplus or changes as an additional margin to cover the risk of the company.

This component is __-0.7__% of the __12.9__% total filed increase.

5. Other – Defined as:

__Items included in this category include ACA related fees and taxes, assessment fees, new incentive program, and changes in assumed risk adjustment payments or receipts.__

This component is __10.5__% of the __12.9__% total filed increase.