

SERFF Tracking Number: AETN-127847469 State: District of Columbia
 Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD State Tracking Number:
 NV NC OK TN VA
 Company Tracking Number: DCAHISG0412
 TOI: HOrg02G Group Health Organizations - Health Sub-TOI: HOrg02G.004F Small Group Only - HMO
 Maintenance (HMO)
 Product Name: DC AHI SG 2Q12
 Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

Correspondence Summary

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending	Efren	03/07/2012	03/07/2012			
Industry	Tanhehco					
Response						

SERFF Tracking Number: AETN-127847469 State: District of Columbia
Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD State Tracking Number:
NV NC OK TN VA
Company Tracking Number: DCAHISG0412
TOI: HOrg02G Group Health Organizations - Health Sub-TOI: HOrg02G.004F Small Group Only - HMO
Maintenance (HMO)
Product Name: DC AHI SG 2Q12
Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 03/07/2012
Submitted Date 03/07/2012
Respond By Date 03/23/2012
Dear Andrew Owen,

Objection 1

- DC Cover Letter 2Q12 AHI (Supporting Document)

Comment: Per the Cover Letter attached, it indicated that the proposed rate change is 1.7% (just from the Effective Date Factor Table quarterly change, which is true per my analysis) BUT excluding Demographic changes ----- please list down all those Demographic factor changes / the % impact from previous quarter filings/ and the overall average changes. Also, please justify those demographic proposed changes, if any.

Sincerely,
Efren Tanhehco

SERFF Tracking Number: AETN-127847469 State: District of Columbia
 Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN State Tracking Number:
 VA
 Company Tracking Number: DCAHISG0412
 TOI: HOrg02G Group Health Organizations - Health Maintenance Sub-TOI: HOrg02G.004F Small Group Only - HMO
 (HMO)
 Product Name: DC AHI SG 2Q12
 Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

Rate Information

Rate data applies to filing.

Filing Method: Prior Approval
Rate Change Type: Increase
Overall Percentage of Last Rate Revision: -5.000%
Effective Date of Last Rate Revision: 01/01/2012
Filing Method of Last Filing: Prior Approval

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA	Increase	1.700%	1.700%	\$36,832	85	\$2,047,282	1.700%	1.700%
Product Type:	HMO	PPO	EPO	POS	HSA	HDHP	FFS	Other
Covered Lives:	4,475				2,206			
Policy Holders:	65				20			

SERFF Tracking Number: AETN-127847469 State: District of Columbia
Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN State Tracking Number:
VA
Company Tracking Number: DCAHISG0412
TOI: HOrg02G Group Health Organizations - Health Maintenance Sub-TOI: HOrg02G.004F Small Group Only - HMO
(HMO)
Product Name: DC AHI SG 2Q12
Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

SERFF Tracking Number: AETN-127847469 State: District of Columbia
Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN State Tracking Number:
VA
Company Tracking Number: DCAHISG0412
TOI: HOrg02G Group Health Organizations - Health Maintenance Sub-TOI: HOrg02G.004F Small Group Only - HMO
(HMO)
Product Name: DC AHI SG 2Q12
Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

Rate Review Details

COMPANY:

Company Name: Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA
HHS Issuer Id: 73987
Product Names: Aetna Health Maintenance Organization
Trend Factors:

FORMS:

New Policy Forms:
Affected Forms:
Other Affected Forms:

HMO/DC2 NAMEAMEND-1 05/02,HMO/DC2 GA-1 01/02,HMO/DC2 Amendment to GA ELR-1 05/02,HMO/DC2
COC-1 07/02,HMO DC2 COC-AMEND-1 07-03,HMO/DC2 COC-AMEND-2 07/03HMO DC2 MEDICALLY
NECESSARY 10-03,HMO AMD-COMPL-APPL-11/02-DC,HMO/DC2 COC-CONVERSION-AMEND 01/03,HMO
DC2 AMEND-COB-2 10-03,HMO GEN MOP-AMEND-2 10-03,HMO/DC2 RIDER-HEAR-1 01/00,HMO/DC2
RIDER-UAW-1 (01/00),HMO/DC2 RIDER-RX-2003-1 (08/02),HMO/DC2 RDR-SHELL-1 06/99,HMO/DC2
SERVAGREE-1 06/99,HMO/DC2 RIDER-SBF-1 06/99,HMO/DC2 AMEND-DP-1 06/99,HMO/DC2 AMEND-
STNT-1 06/99,HMO/DC2 RIDER-DEN-1 06/99,HMO/DC2 BASIC-INF-AMEND 04/03,HMO GEN RIDER 2003CI-
1 (07-03),HMO GEN RIDER 2003ART-1 (07-03),HMO/DC2 INDHISB-1 07/00,HMO/DC2 INDCOC-1 07/00,HI
DC ATransplant V002,HMO [GEN] HIPAA-AMEND-1 (4/05),HMO [GEN] AETNA OPEN ACCESS AEXCEL
(09/07),HMO [GEN] AEXCEL (09/07),HMO [GEN] HNO (06/06),HMO [GEN] RIDER-DEDCREDIT-1 07-05,HMO
[GEN] RTF-AMEND-1 (8/05),HMO COC GEN AMENDSI (03-04),HMO DC AEXCEL SB-1 09/07,HMO DC AOA-
2 01-05,HMO DC BAR EXCL AMND-1 (04/04),HMO DC HAB AMEND-1 (02/08),HMO DC LIM MAT-AMEND-1
(05/06),HMO DC MH-AMEND-1 (01/08),HMO DC SB-2 (06-06),HMO [GEN] GA AMEND-PERFGUAR-1

SERFF Tracking Number: AETN-127847469 State: District of Columbia
 Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN State Tracking Number:
 VA
 Company Tracking Number: DCAHISG0412
 TOI: HOrg02G Group Health Organizations - Health Maintenance Sub-TOI: HOrg02G.004F Small Group Only - HMO
 (HMO)
 Product Name: DC AHI SG 2Q12
 Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

(06/06),HMO [GEN] DISCPROG-1 (06/06), HMO GEN HHC-AMEND-1 (7/04),HMO GEN INFUSION-AMEND-1
 (1/05),HMO GEN OV AMEND (08/07),HMO [GEN] PERFGUAR-1 (06/06),HMO GEN REHAB-AMEND-1
 (7/04),HMO GEN RIDER BARSURG-1 (04/04),HMO [GEN] RIDER-AHF‑1 06-06,HMO/[GEN] RIDER-
 VIS-2 (06/06)

**REQUESTED RATE CHANGE
 INFORMATION:**

Change Period: Quarterly
 Member Months: 6,681
 Benefit Change: None
 Percent Change Requested: Min: 1.7 Max: 1.7 Avg: 1.7

PRIOR RATE:

Total Earned Premium: 2,066,928.00
 Total Incurred Claims: 1,374,669.00
 Annual \$: Min: 161.69 Max: 471.93 Avg: 313.46

REQUESTED RATE:

Projected Earned Premium: 2,245,010.00
 Projected Incurred Claims: 1,520,479.00
 Annual \$: Min: 179.38 Max: 523.55 Avg: 347.74

SERFF Tracking Number: AETN-127847469 State: District of Columbia
 Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD State Tracking Number:
 NV NC OK TN VA
 Company Tracking Number: DCAHISG0412
 TOI: HOrg02G Group Health Organizations - Health Sub-TOI: HOrg02G.004F Small Group Only - HMO
 Maintenance (HMO)
 Product Name: DC AHI SG 2Q12
 Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
	DC Rate Manual - 2Q12 AHI.pdf	HMO/DC2 NAMEAMEND-1 05/02, HMO/DC2 GA-1 01/02, HMO/DC2 Amendment to GA ELR-1 05/02, HMO/DC2 COC- 1 07/02, HMO DC2 COC- AMEND-1 07-03, HMO/DC2 COC- AMEND-2 07/03HMO DC2 MEDICALLY NECESSARY 10- 03, HMO AMD- COMPL-APPL- 11/02-DC, HMO/DC2 COC- CONVERSION- AMEND 01/03, HMO DC2 AMEND-COB-2 10-03, HMO GEN MOP-AMEND-2	New		DC Rate Manual - 2Q12 AHI.pdf

SERFF Tracking Number: AETN-127847469 State: District of Columbia
Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD State Tracking Number:
NV NC OK TN VA
Company Tracking Number: DCAHISG0412
TOI: HOrg02G Group Health Organizations - Health Sub-TOI: HOrg02G.004F Small Group Only - HMO
Maintenance (HMO)
Product Name: DC AHI SG 2Q12
Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

10-03, HMO/DC2
RIDER-HEAR-1
01/00, HMO/DC2
RIDER-UAW-1
(01/00),
HMO/DC2
RIDER-RX-2003-
1 (08/02),
HMO/DC2 RDR-
SHELL-1 06/99,
HMO/DC2
SERVAGREE-1
06/99, HMO/DC2
RIDER-SBF-1
06/99, HMO/DC2
AMEND-DP-1
06/99, HMO/DC2
AMEND-STNT-1
06/99, HMO/DC2
RIDER-DEN-1
06/99, HMO/DC2
BASIC-INF-
AMEND 04/03,
HMO GEN
RIDER 2003CI-1
(07-03), HMO
GEN RIDER
2003ART-1 (07-
03), HMO/DC2
INDHISB-1
07/00, HMO/DC2
INDCOC-1 07/00,
HI DC
ATransplant

SERFF Tracking Number: AETN-127847469 State: District of Columbia
Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD State Tracking Number:
NV NC OK TN VA
Company Tracking Number: DCAHISG0412
TOI: HOrg02G Group Health Organizations - Health Sub-TOI: HOrg02G.004F Small Group Only - HMO
Maintenance (HMO)
Product Name: DC AHI SG 2Q12
Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

V002, HMO
[GEN] HIPAA-
AMEND-1 (4/05),
HMO [GEN]
AETNA OPEN
ACCESS
AEXCEL (09/07),
HMO [GEN]
AEXCEL (09/07),
HMO [GEN] HNO
(06/06), HMO
[GEN] RIDER-
DEDCREDIT-1
07-05, HMO
[GEN] RTF-
AMEND-1 (8/05),
HMO COC GEN
AMENDSI (03-
04), HMO DC
AEXCEL SB-1
09/07, HMO DC
AOA-2 01-05,
HMO DC BAR
EXCL AMND-1
(04/04), HMO DC
HAB AMEND-1
(02/08), HMO DC
LIM MAT-
AMEND-1
(05/06), HMO DC
MH-AMEND-1
(01/08), HMO DC
SB-2 (06-06),
HMO [GEN] GA

SERFF Tracking Number: AETN-127847469 State: District of Columbia
Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD State Tracking Number:
NV NC OK TN VA
Company Tracking Number: DCAHISG0412
TOI: HOrg02G Group Health Organizations - Health Sub-TOI: HOrg02G.004F Small Group Only - HMO
Maintenance (HMO)
Product Name: DC AHI SG 2Q12
Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

AMEND-
PERFGUAR-1
(06/06), HMO
[GEN]
DISCPROG-1
(06/06), HMO
GEN HHC-
AMEND-1 (7/04),
HMO GEN
INFUSION-
AMEND-1 (1/05),
HMO GEN OV
AMEND (08/07),
HMO [GEN]
PERFGUAR-1
(06/06), HMO
GEN REHAB-
AMEND-1 (7/04),
HMO GEN
RIDER
BARSURG-1
(04/04), HMO
[GEN] RIDER-
AHF‑1
06-06,
HMO/[GEN]
RIDER-VIS-2
(06/06)

District of Columbia Small Group Premium Rate Manual Aetna Health, Inc.

The following steps are used to calculate premium rates for each plan per small group.

1. **Base Rate Table** – Table of starting premium rates.
2. **Plan Relativity Factor** – Rate factor for each unique plan design.

Base Rate X Plan Relativity Factor = Rate for Unique Plan

The product identifier will identify the plan. For each product identifier, there will be a plan relativity factor.

3. **Area Factor** - Rate factor to reflect differences in cost by geographic area.

Base Rate X Plan Relativity Factor X Area Factor = Rate for that Plan for that Rating Area

4. **Effective Date Factor** – Premium rate level adjustment factor to reflect differences in cost by effective date.
5. **Rate Sheets** (1 x 2 x 3 x 4 steps above)
Format will be the same as base rate table.
6. **Industry (SIC) Factor** – Rate factor to reflect differences in cost by industry. This factor will be based on the SIC code of the group.
7. **Group Size Factor** – Rate factor to reflect differences in morbidity and administrative costs by size of group. This factor will be based on the size of the group.
8. **Medical Rate Adjustment Factor** – Rate factor to reflect differences in costs due to medical conditions of members in each group. For new business, information from medical questionnaires completed by each subscriber will be used to determine the Medical Rate-Up Factor. For renewal business, the factor will be determined using a relative risk score calculated for each small group using predictive modeling techniques.
9. **Class of Business Factor** – Rate factor to reflect a specific class of business. This factor will not currently be used in DC and will be equal to 1.00, which will have no impact on a group's rates.
10. **Multiple Option Factor** – Rate factor to reflect the additional morbidity costs associated with a group offering more than one plan to their employees. This factor will not currently be used in DC and will be equal to 1.00, which will have no impact on a group's rates.

**District of Columbia
Small Group Premium Rate Manual
Aetna Health, Inc.**

11. **Tabular rates** (5 x 6 x 7 x 8 x 9 x 10 steps above)

12. **Composite rates** – Rates by rate tier, i.e., without age brackets

This step converts the tabular rates from Step 11 into composite rates by contract type in the following way:

This calculation first applies the age distribution for the entire group to the tabular rates for each tier to calculate an average premium rate over all ages for each contract type. Then each of these premium rates is adjusted by a single factor so that the total premium for the group using the composite rates calculated in this step is equal to the total premium for the group using the tabular rates from Step 11.

Area Factor Table

Rating Area Name	Area Factor
Washington	1.000

Size Factor Table

Number of Employees	Case Size Factors
1	1.350
2	1.250
3 - 4	1.100
5 - 9	1.050
10 - 14	1.025
15 - 50+	1.000

Class of Business Factor Table

Classes	Class of Business Factor
All	1.000

Multiple Option Factor Table

Options	Multiple Option Factor
All	1.000

Medical Rate Up Adjustment Range

	Medical Rate Up
Range	0% - 230%

Base Rate Table

<u>Age Bracket</u>	<u>Male</u>				<u>Female</u>			
	<u>Single</u>	<u>Couple</u>	<u>Eee & Child</u>	<u>Family</u>	<u>Single</u>	<u>Couple</u>	<u>Eee & Child</u>	<u>Family</u>
<25	\$ 108.68	\$ 359.98	\$ 225.95	\$ 413.08	\$ 153.02	\$ 396.84	\$ 337.44	\$ 449.77
25-29	\$ 111.95	\$ 370.81	\$ 232.75	\$ 425.51	\$ 157.63	\$ 408.79	\$ 347.61	\$ 463.32
30	\$ 115.32	\$ 381.97	\$ 239.76	\$ 438.32	\$ 162.37	\$ 421.08	\$ 358.06	\$ 477.26
31	\$ 118.79	\$ 393.46	\$ 246.97	\$ 451.51	\$ 167.26	\$ 433.77	\$ 368.85	\$ 491.63
32	\$ 122.37	\$ 405.32	\$ 254.41	\$ 465.11	\$ 172.29	\$ 446.81	\$ 379.94	\$ 506.42
33	\$ 126.05	\$ 417.51	\$ 262.06	\$ 479.10	\$ 177.48	\$ 460.27	\$ 391.38	\$ 521.67
34	\$ 129.84	\$ 430.06	\$ 269.94	\$ 493.51	\$ 182.82	\$ 474.12	\$ 403.16	\$ 537.37
35	\$ 133.75	\$ 443.01	\$ 278.07	\$ 508.37	\$ 188.32	\$ 488.38	\$ 415.29	\$ 553.53
36	\$ 137.78	\$ 456.36	\$ 286.45	\$ 523.68	\$ 193.99	\$ 503.09	\$ 427.79	\$ 570.20
37	\$ 141.93	\$ 470.11	\$ 295.08	\$ 539.46	\$ 199.83	\$ 518.23	\$ 440.67	\$ 587.36
38	\$ 146.20	\$ 484.25	\$ 303.96	\$ 555.69	\$ 205.84	\$ 533.82	\$ 453.92	\$ 605.03
39	\$ 150.60	\$ 498.82	\$ 313.10	\$ 572.41	\$ 212.04	\$ 549.90	\$ 467.60	\$ 623.25
40	\$ 155.13	\$ 513.83	\$ 322.52	\$ 589.63	\$ 218.42	\$ 566.44	\$ 481.67	\$ 642.01
41	\$ 159.80	\$ 529.30	\$ 332.23	\$ 607.38	\$ 224.99	\$ 583.48	\$ 496.15	\$ 661.32
42	\$ 164.61	\$ 545.23	\$ 342.23	\$ 625.66	\$ 231.76	\$ 601.04	\$ 511.08	\$ 681.22
43	\$ 169.56	\$ 561.62	\$ 352.52	\$ 644.48	\$ 238.74	\$ 619.14	\$ 526.48	\$ 701.73
44	\$ 174.66	\$ 578.52	\$ 363.13	\$ 663.86	\$ 245.93	\$ 637.79	\$ 542.33	\$ 722.87
45	\$ 179.92	\$ 595.94	\$ 374.06	\$ 683.85	\$ 253.33	\$ 656.98	\$ 558.65	\$ 744.62
46	\$ 185.34	\$ 613.89	\$ 385.33	\$ 704.45	\$ 260.96	\$ 676.76	\$ 575.48	\$ 767.04
47	\$ 190.92	\$ 632.37	\$ 396.93	\$ 725.66	\$ 268.81	\$ 697.12	\$ 592.79	\$ 790.12
48	\$ 196.67	\$ 651.42	\$ 408.89	\$ 747.52	\$ 276.90	\$ 718.10	\$ 610.63	\$ 813.90
49	\$ 202.59	\$ 671.03	\$ 421.19	\$ 770.02	\$ 285.23	\$ 739.71	\$ 629.00	\$ 838.38
50	\$ 208.69	\$ 691.23	\$ 433.88	\$ 793.21	\$ 293.82	\$ 761.98	\$ 647.94	\$ 863.63
51	\$ 214.97	\$ 712.03	\$ 446.93	\$ 817.07	\$ 302.66	\$ 784.91	\$ 667.43	\$ 889.61
52	\$ 221.44	\$ 733.46	\$ 460.38	\$ 841.67	\$ 311.77	\$ 808.53	\$ 687.52	\$ 916.39
53	\$ 228.11	\$ 755.56	\$ 474.25	\$ 867.02	\$ 321.15	\$ 832.86	\$ 708.21	\$ 943.96
54	\$ 234.98	\$ 778.31	\$ 488.53	\$ 893.13	\$ 330.82	\$ 857.94	\$ 729.53	\$ 972.39
55	\$ 242.05	\$ 801.73	\$ 503.23	\$ 920.00	\$ 340.78	\$ 883.77	\$ 751.50	\$ 1,001.66
56	\$ 249.34	\$ 825.88	\$ 518.39	\$ 947.71	\$ 351.04	\$ 910.37	\$ 774.12	\$ 1,031.82
57	\$ 256.85	\$ 850.75	\$ 534.00	\$ 976.26	\$ 361.61	\$ 937.79	\$ 797.43	\$ 1,062.89
58	\$ 264.58	\$ 876.35	\$ 550.07	\$ 1,005.64	\$ 372.50	\$ 966.03	\$ 821.45	\$ 1,094.90
59	\$ 272.54	\$ 902.72	\$ 566.62	\$ 1,035.89	\$ 383.72	\$ 995.13	\$ 846.19	\$ 1,127.88
60	\$ 280.74	\$ 929.88	\$ 583.67	\$ 1,067.06	\$ 395.28	\$ 1,025.10	\$ 871.68	\$ 1,161.85
61	\$ 289.20	\$ 957.90	\$ 601.26	\$ 1,099.21	\$ 407.19	\$ 1,055.99	\$ 897.95	\$ 1,196.86
62	\$ 297.91	\$ 986.75	\$ 619.37	\$ 1,132.32	\$ 419.46	\$ 1,087.81	\$ 925.01	\$ 1,232.93
63	\$ 306.89	\$ 1,016.50	\$ 638.04	\$ 1,166.45	\$ 432.10	\$ 1,120.59	\$ 952.88	\$ 1,270.08
64	\$ 316.14	\$ 1,047.13	\$ 657.27	\$ 1,201.61	\$ 445.12	\$ 1,154.36	\$ 981.59	\$ 1,308.35
65+ (P)	\$ 320.90	\$ 1,062.90	\$ 667.17	\$ 1,219.70	\$ 451.82	\$ 1,171.74	\$ 996.37	\$ 1,328.05
65+ (S)	\$ 325.66	\$ 1,078.67	\$ 677.06	\$ 1,237.79	\$ 458.52	\$ 1,189.11	\$ 1,011.14	\$ 1,347.74

Effective Date Factor Table

04/01/2011	1.4956
05/01/2011	1.4956
06/01/2011	1.4956
07/01/2011	1.4956
08/01/2011	1.4956
09/01/2011	1.4956
10/01/2011	1.4956
11/01/2011	1.4956
12/01/2011	1.4956
01/01/2012	1.4208
02/01/2012	1.4208
03/01/2012	1.4208
04/01/2012	1.4450
05/01/2012	1.4450
06/01/2012	1.4450

Industry Factor (SIC) Table
(Confidential and Proprietary Information)

SIC Range		Factor	Description
From	To		
0111	0119	0.98	Cash Grains
0131	0139	0.98	Field Crops, except Cash Grains
0161	0161	0.98	Vegetables and Melons
0171	0179	0.98	Fruit and Tree Nuts
0181	0182	0.98	Horticulture Specialties
0191	0191	0.98	General Farms, Primarily Crop
0211	0291	1.07	Agriculture Production-Livestock
0711	0722	0.98	Soil Preparation Services, Crop Planting, Cultivating and Crop Harvesting by Machine
0723	0723	0.98	Crop Preparation except Cotton Ginning
0724	0724	0.98	Cotton Ginning
0741	0742	0.98	Veterinary Services
0751	0752	0.98	Animal Services, except Veterinary
0761	0762	0.98	Farm Labor and Management Services
0781	0783	1.00	Landscape and Horticultural Services
0811	0851	1.03	Forestry
0912	0919	1.13	Commercial Fishing
0921	0921	1.00	Fish Hatcheries and Preserves
0971	0971	1.03	Hunting and Trapping, and Game Propagation
1011	1031	1.15	Iron, Copper, Lead, and Zinc Ores
1041	1044	1.15	Gold and Silver Ores
1061	1081	1.15	Ferroalloy (except Vanadium) Ores, and Metal Mining Services
1094	1099	1.15	Miscellaneous Metal Ores
1221	1222	1.15	Bituminous Coal and Lignite Mining
1231	1231	1.15	Anthracite Mining
1241	1241	1.15	Coal Mining Services
1311	1321	1.00	Crude Petroleum, Natural Gas, and Natural Gas Liquids
1381	1389	1.00	Oil and Gas Field Services
1411	1429	1.03	Dimension Stone, Crushed and Broken Stone Including Riprap
1442	1446	1.03	Sand and Gravel
1455	1459	1.03	Clay, Ceramic, and Refractory Minerals
1474	1479	1.03	Chemical and Fertilizer Mineral Mining
1481	1499	1.03	Nonmetallic Minerals Services (except Fuel)
1521	1522	1.02	General Building Contractors-Residential Buildings
1531	1531	1.06	Operative Builders
1541	1541	1.00	General Building Contractors-Industrial Buildings and Warehouses
1542	1542	0.98	General Building Contractors-Non-Residential Buildings Other than Code 1541
1611	1611	1.03	Highway and Street Construction
1622	1629	1.03	Heavy Construction, except Highway and Street
1711	1711	1.03	Plumbing, Heating, and Air Conditioning
1721	1721	1.03	Painting and Paper Hanging
1731	1731	1.03	Electrical Work
1741	1741	1.03	Masonry, Stone Setting, and Other Stone Work
1742	1742	1.03	Plastering, Drywall, Acoustical, and Insulation Work
1743	1743	1.03	Terrazzo, Tile, Marble, and Mosaic Work
1751	1752	1.03	Carpentry and Floor Work
1761	1761	1.03	Roofing, Siding, and Sheet Metal Work
1771	1771	1.03	Concrete Work

Industry Factor (SIC) Table
(Confidential and Proprietary Information)

SIC Range		Factor	Description
From	To		
1781	1781	1.03	Water Well Drilling
1791	1791	1.03	Structural Steel Erection
1793	1793	1.03	Glass and Glazing Work
1794	1794	1.03	Excavation Work
1795	1795	1.03	Wrecking and Demolition Work
1796	1796	1.03	Other Installation/Erection of Building Equipment
1799	1799	1.03	Other Special Trade Contractors
2011	2015	0.98	Meat Products
2021	2038	0.98	Dairy Products, Canned, Frozen, and Preserved Fruits, Vegetables, and Food Specialties
2041	2048	0.98	Grain Mill Products
2051	2052	0.98	Bakery Products
2053	2053	0.98	Frozen Baking Products, except Bread
2061	2063	0.98	Cane Sugar and Beet Sugar
2064	2068	0.98	Other Sugar and Confectionery Products
2074	2079	0.98	Fats and Oils
2082	2087	0.98	Beverages
2091	2091	0.98	Canned and Cured Fish and Seafoods
2092	2092	0.98	Fresh or Frozen Packaged Fish and Seafoods
2095	2095	0.98	Roasted Coffee
2096	2096	0.98	Potato Chips and Similar Snacks
2097	2097	0.98	Manufactured Ice (except Dry Ice)
2098	2098	0.98	Macaroni, Spaghetti, Vermicelli, and Noodles
2099	2099	0.98	Other Food Preparations
2111	2141	1.00	Tobacco Products
2211	2211	1.00	Broadwoven Fabric Mills-Cotton
2221	2221	1.00	Broadwoven Fabric Mills-Man Made Fiber and Silk
2231	2231	1.00	Broadwoven Fabric Mills-Wool
2241	2241	1.00	Narrow Fabrics and Other Smallwares Mills
2251	2259	1.03	Knitting Mills
2261	2269	1.00	Dyeing and Finishing Textiles, except Wool Fabrics and Knit Goods
2273	2273	1.00	Carpets and Rugs
2281	2284	1.00	Yarn and Thread Mills
2295	2299	1.00	Miscellaneous Textile Goods
2311	2329	0.96	Men's, Youth's, and Boy's Suits, Coats, Overcoats, Shirts, and Nightwear
2331	2342	0.96	Women's, Misses', and Juniors' Outerwear, Undergarments
2353	2353	0.96	Hats, Caps, and Millinery
2361	2369	0.96	Girls', Children's, and Infants' Outerwear
2371	2399	1.00	Fur Goods, Miscellaneous Apparel and Textiles
2411	2411	1.00	Logging Camps and Logging Contractors
2421	2429	1.00	Sawmills and Planing Mills
2431	2431	1.00	Millwork
2434	2434	0.97	Wood Kitchen Cabinets
2435	2435	0.97	Hardwood, Veneer, and Plywood
2436	2436	0.97	Softwood Veneer, and Plywood
2439	2439	0.97	Other Structural Wood Members
2441	2449	0.97	Wood Containers
2451	2452	0.97	Wood Buildings and Mobile Homes

Industry Factor (SIC) Table
(Confidential and Proprietary Information)

SIC Range		Factor	Description
From	To		
2491	2499	0.97	Miscellaneous Wood Products
2511	2519	0.97	Household Furniture
2521	2522	0.97	Office Furniture
2531	2531	0.97	Public Building and Related Furniture
2541	2542	0.97	Partitions, Shelving, Lockers, and Office and Storage Fixtures
2591	2599	0.97	Miscellaneous Furniture and Fixtures
2611	2611	1.00	Pulp Mills
2621	2621	1.00	Paper Mills
2631	2631	1.00	Paperboard Mills
2652	2657	1.00	Paperboard Containers and Boxes
2671	2679	1.03	Converted Paper and Paperboard Products except Containers and Boxes
2711	2711	1.00	Newspaper-Publishing and Printing
2721	2789	1.00	Miscellaneous Publishing and Printing
2791	2796	1.00	Service Industries for the Printing Trade
2812	2819	1.02	Industrial Inorganic Chemicals
2821	2824	1.02	Plastic Materials, Synthetic Resins, and Other Man Made Fibers, except Glass
2833	2834	1.00	Medicinal Chemicals, Botanical Products, Pharmaceutical Preparations
2835	2836	0.98	In Vitro and In Vivo Diagnostic Substances and Biological Products
2841	2844	0.97	Soap, Detergents, and Cleaning Preparations, Perfumes, Cosmetics, and Other Toilet Preparations
2851	2851	0.97	Paints, Varnishes, Lacquers, Enamels, and Allied Products
2861	2869	0.97	Industrial Organic Chemicals
2873	2879	0.97	Agricultural Chemicals
2891	2891	0.98	Adhesives and Sealants
2892	2892	0.98	Explosives
2893	2895	0.98	Printing Ink and Carbon Black
2899	2899	0.98	Other Chemicals and Chemical Preparations
2911	2952	1.03	Petroleum Refining; Paving and Roofing Materials
2992	2999	1.03	Miscellaneous Products of Petroleum and Coal
3011	3011	1.00	Tires and Inner Tubes
3021	3069	1.00	Other Rubber Products
3081	3089	0.94	Miscellaneous Plastic Products
3111	3111	1.00	Leather Tanning and Refinishing
3131	3149	1.00	Footwear, except Rubber
3151	3199	1.00	Other Leather Products
3211	3211	1.05	Flat Glass
3221	3231	1.05	Glass, Glassware, and Glass Products
3241	3241	1.05	Cement, Hydraulic
3251	3259	1.05	Structural Clay Products
3261	3269	1.05	Pottery and Related Products
3271	3275	1.05	Concrete, Gypsum, and Other Plaster Products
3281	3281	1.05	Cut Stone and Stone Products
3291	3291	1.05	Abrasive Products
3292	3292	1.05	Asbestos Products
3295	3299	1.05	Miscellaneous Nonmetallic Mineral Products
3312	3317	1.06	Blast Furnaces, Steel Works, and Rolling and Finishing Mills
3321	3325	1.06	Iron and Steel Foundries
3331	3339	1.06	Primary Smelting and Refining of Nonferrous Metals

Industry Factor (SIC) Table
(Confidential and Proprietary Information)

SIC Range		Factor	Description
From	To		
3341	3341	1.06	Secondary Smelting and Refining of Nonferrous Metals
3351	3357	1.06	Rolling, Drawing, and Extruding of Nonferrous Metals
3363	3369	1.06	Nonferrous Foundries (Castings)
3398	3399	1.06	Miscellaneous Primary Metal Products
3411	3412	0.97	Metal Cans and Shipping Containers
3421	3429	0.97	Cutlery, Handtools, and General Hardware
3431	3433	0.97	Heating Equipment, except Electric and Warm Air, and Plumbing Fixtures
3441	3441	0.97	Fabricated Structural Metal
3442	3442	1.00	Metal Doors, Sash, Frames, Molding and Trim
3443	3443	1.00	Fabricated Plate Work (Boiler Shops)
3444	3444	1.00	Sheet Metal Work
3446	3446	1.00	Architectural and Ornamental Metal Work
3448	3448	1.00	Prefabricated Metal Buildings and Components
3449	3449	1.00	Miscellaneous Structural Metal Work
3451	3452	1.00	Screw Machine Products, Bolts, Nuts, Screws, Rivets, and Washers
3462	3469	1.00	Metal Forgings and Stampings
3471	3479	1.00	Coating, Engraving and Allied Services
3482	3483	1.00	Ammunition
3484	3484	1.00	Small Arms
3489	3489	1.00	Other Ordnance and Accessories
3491	3499	0.97	Miscellaneous Fabricated Metal Products
3511	3519	1.00	Engines and Turbines
3523	3524	1.00	Farm and Garden Machinery & Equip.
3531	3537	0.98	Construction, Mining, and Materials Handling, Machinery and Equipment
3541	3549	0.95	Metal Working Machinery and Equipment
3552	3569	0.95	Industrial Machinery
3571	3579	0.95	Computer and Office Equipment
3581	3589	0.95	Refrigeration and Service Industry Machinery
3592	3599	0.95	Miscellaneous Industrial and Commercial Machinery, except Electrical
3612	3613	0.96	Electric Transmission and Distribution Equipment
3621	3648	0.96	Electrical Industrial Apparatus, Household Appliances, Electrical Lighting and Wiring Equipment
3651	3652	0.96	Household Audio and Video Equipment, and Audio Recordings
3661	3669	0.96	Communication Equipment
3671	3679	0.96	Electronic Components and Accessories
3691	3699	0.96	Miscellaneous Electrical Machinery, Equipment and Supplies
3711	3716	0.98	Motor Vehicles and Motor Vehicle Equipment
3721	3728	0.98	Aircraft and Parts
3731	3731	0.98	Ship Building and Repairing
3732	3732	0.98	Boat Building and Repairing
3743	3743	0.98	Railroad Equipment
3751	3751	0.98	Motorcycles, Bicycles, and Parts
3761	3769	0.98	Guided Missiles and Space Vehicles and Parts
3792	3792	0.98	Travel Trailers and Campers
3795	3795	0.98	Tanks and Tank Components
3799	3799	0.98	Other Transportation Equipment
3812	3812	0.94	Search, Detection, Navigation and Aeronautical Equipment
3821	3829	0.96	Laboratory Apparatus and Analytical, Optical, Measuring, and Controlling Instruments

Industry Factor (SIC) Table
(Confidential and Proprietary Information)

SIC Range		Factor	Description
From	To		
3841	3845	0.96	Surgical, Medical, and Dental Instruments and Supplies
3851	3851	0.96	Ophthalmic Goods
3861	3861	0.94	Photographic Equipment and Supplies
3873	3873	0.94	Watches, Clocks, Clockwork Operated Devices and Parts
3911	3915	0.94	Jewelry, Silverware and Plated Ware
3931	3931	0.97	Musical Instruments
3942	3949	0.97	Dolls, Toys, Games and Sporting and Athletic Goods
3951	3955	0.97	Pens, Pencils, and Other Artists' Materials
3961	3965	0.97	Costume Jewelry, Novelties, Notions
3991	3999	0.97	Miscellaneous Manufacturing Industries
4011	4013	1.02	Railroads
4111	4119	1.06	Local and Suburban Passenger Transportation.
4121	4121	1.12	Taxicabs
4131	4131	1.06	Intercity and Rural Highway Bus Transportation
4141	4142	1.06	Bus Charter Services
4151	4151	1.06	School Buses
4173	4173	1.04	Terminal and Service Facilities for Motor Vehicle Passenger Transportation
4212	4212	1.04	Local Trucking without Storage
4213	4215	1.04	Trucking, except Local, Local Trucking with Storage; Courier Service
4221	4221	1.04	Farm Product Warehousing and Storage
4222	4222	1.02	Refrigerated Warehousing
4225	4225	1.02	General Warehousing and Storage
4226	4226	1.02	Special Warehousing and Storage
4231	4231	1.02	Terminal and Joint Terminal Maintenance Facilities for Motor Freight Transportation
4311	4311	1.00	United States Postal Service
4412	4412	1.02	Deep Sea Foreign Transportation of Freight
4424	4424	1.02	Deep Sea Domestic Transportation of Freight
4432	4432	1.02	Freight Transportation on the Great Lakes-St. Lawrence Seaway
4449	4449	1.02	Other Water Transportation of Freight
4481	4489	1.02	Water Transportation of Passengers
4491	4499	1.02	Services Incidental to Water Transportation.
4512	4513	0.97	Scheduled Air Transportation and Air Courier Services
4522	4522	0.97	Air Transportation, Non Scheduled
4581	4581	0.97	Airports Flying Fields, and Airport Terminal Services
4612	4619	1.05	Pipe Lines, except Natural Gas
4724	4729	1.06	Arrangement of Passenger Transportation
4731	4731	0.98	Arrangement of Transportation of Freight and Cargo
4741	4789	0.98	Other Transportation Services
4812	4813	0.97	Telephone Communications
4822	4899	0.98	Radio and Television Broadcasting Stations and Other Communication Services
4911	4911	0.97	Electric Services
4922	4925	1.00	Gas Production and Distribution
4931	4939	0.98	Combination Electric and Gas, and Other Utility Services
4941	4941	0.98	Water Supply
4952	4959	0.98	Sanitary Services
4961	4961	0.98	Steam and Air Conditioning Supply
4971	4971	0.98	Irrigation Systems
5012	5015	0.98	Motor Vehicles and Motor Vehicle Parts and Supplies

Industry Factor (SIC) Table
(Confidential and Proprietary Information)

SIC Range		Factor	Description
From	To		
5021	5021	1.02	Furniture
5023	5023	1.02	Home Furnishings
5031	5039	1.04	Lumber and Other Construction Materials
5043	5049	0.99	Professional and Commercial Equipment and Supplies
5051	5052	0.99	Metals and Minerals, except Petroleum
5063	5064	0.99	Electrical Apparatus and Equipment, Wiring Supplies, and Construction Materials; Electrical
5065	5065	0.99	Other Electrical Goods
5072	5078	1.00	Hardware, Plumbing and Heating Equipment and Supplies
5082	5087	1.00	Machinery, Equipment and Supplies
5088	5088	1.00	Transportation Equipment and Supplies, except Motor Vehicles
5091	5092	1.00	Sporting, Recreational and Hobby Goods, Toys, and Supplies
5093	5093	1.15	Scrap and Waste Materials
5094	5099	0.94	Miscellaneous Durable Goods
5111	5113	1.00	Paper and Paper products
5122	5122	0.94	Drugs, Drug Proprietaries and Druggists' Sundries
5131	5139	1.00	Apparel, Piece Goods, Notions
5141	5149	0.98	Groceries and Related Products
5153	5153	0.95	Grain and Field Beans
5154	5159	0.95	Livestock; Farm-Product Raw Materials
5162	5169	0.95	Chemicals and Allied Products
5171	5172	0.95	Petroleum and Petroleum Products
5181	5182	0.95	Beer, Wine, and Distilled Alcoholic Beverages
5191	5199	1.00	Miscellaneous Nondurable Goods
5211	5211	1.03	Lumber and Other Building Materials Dealers
5231	5231	1.03	Paint, Glass, and Wallpaper Stores
5251	5261	1.03	Hardware Stores, Retail Nurseries, Lawn and Garden Supply Stores
5271	5271	1.03	Mobile Home Dealers
5311	5399	1.00	General Merchandise Stores
5411	5411	0.98	Grocery Stores
5421	5421	0.98	Meat and Fish Markets, Including Freezer Provisioners
5431	5431	0.98	Fruit and Vegetable Markets
5441	5441	0.98	Candy, Nut and Confectionery Stores
5451	5451	0.98	Dairy Products Stores
5461	5461	0.98	Retail Bakeries
5499	5499	0.98	Miscellaneous Food Stores
5511	5511	1.10	Motor Vehicle Dealers-New and Used Cars
5521	5521	1.10	Motor Vehicle Dealers- Used Cars
5531	5531	1.10	Auto and Home Supply Stores
5541	5541	1.10	Gasoline Service Stations
5551	5551	1.12	Boat Dealers
5561	5561	1.12	Recreational and Utility Trailer Dealers
5571	5571	1.12	Motorcycle Dealers
5599	5599	1.12	Other Vehicle Dealers, not elsewhere classified
5611	5651	0.98	Apparel and Accessory Stores
5661	5661	0.98	Shoe Stores
5699	5699	0.98	Miscellaneous Apparel and Accessory Stores
5712	5719	1.02	Home Furniture and Furnishings

Industry Factor (SIC) Table
(Confidential and Proprietary Information)

SIC Range		Factor	Description
From	To		
5722	5722	1.04	Appliance Stores
5731	5736	0.97	Radio, Television, Consumer Electronics, and Music Stores
5812	5812	1.05	Restaurants
5813	5813	1.05	Bars and Taverns
5912	5912	1.00	Drug Stores and Proprietary Stores
5921	5921	1.06	Liquor Stores
5932	5932	1.06	Used Merchandise Stores
5941	5949	1.00	Miscellaneous Shopping Goods Stores
5961	5963	1.05	Non-store Retailers
5983	5989	1.05	Fuel Dealers
5992	5992	1.00	Florists
5993	5999	1.00	Other Retail Stores, except Florists
6011	6149	0.97	Depository and Non-depository Credit Institutions
6153	6163	1.00	Business Credit Institutions and Mortgage Bankers And Brokers
6211	6289	0.97	Securities and Commodities, Dealers, Exchanges and Services
6311	6399	1.00	Insurance Carriers
6411	6411	1.00	Insurance Agents, Brokers and Service
6512	6519	1.00	Real Estate Operators (except Developers) and Lessors
6531	6531	1.00	Real Estate Agent and Managers
6541	6553	1.00	Title Abstract Offices, Land Subdividers and Developers
6712	6799	0.97	Holding and Other Investment Offices
7011	7041	1.00	Hotels, Rooming Houses, Camps, and Other Lodging Places
7211	7219	0.97	Laundry, Cleaning and Garment Services
7221	7221	1.00	Photographic Studios, Portrait
7231	7241	1.08	Beauty Shops, Barber Shops
7251	7261	1.03	Shoe Repair Shops, Shoe Shine Parlors, Hat Cleaning Shops, Funeral Service and Crematories
7291	7299	1.06	Miscellaneous Personal Services
7311	7311	0.95	Advertising Agencies
7312	7319	0.95	Other Advertising
7322	7331	1.03	Credit / Mercantile Reporting Agencies, Collection Agencies, Direct Mail Advertising Services
7334	7334	0.94	Photocopying and Duplicating Services
7335	7336	0.94	Commercial Photography, Art, and Graphic Design
7338	7338	0.94	Secretarial and Court Reporting Services
7342	7349	1.00	Services to Dwellings and Other Buildings
7352	7352	0.97	Medical Equipment Rental and Leasing
7353	7359	0.97	Misc. Equipment Rental and Leasing
7361	7363	1.00	Personnel Supply Services
7371	7379	0.94	Computer Programming, Data Processing and Other Computer Related Services
7381	7381	0.97	Detective and Armored Car Services
7382	7382	0.97	Security System Services
7383	7383	1.02	News Syndicates
7384	7384	1.02	Photo Finishing Laboratories
7389	7389	1.00	Other Business Services
7513	7519	1.03	Automotive Rental and Leasing, (without Drivers)
7521	7521	1.03	Automobile Parking
7532	7539	1.03	Automotive Repair Shops
7542	7549	1.09	Automotive Services, except Repair
7622	7629	1.03	Electrical Repair Shops

Industry Factor (SIC) Table
(Confidential and Proprietary Information)

SIC Range		Factor	Description
From	To		
7631	7641	1.03	Watch, Clock, Jewelry, Reupholstery and Furniture Repair
7692	7692	1.05	Welding Repair
7694	7699	1.05	Other Repair Shops and Related Services
7812	7833	1.06	Motion Pictures
7841	7841	1.00	Video Tape Rental
7911	7911	1.09	Dance Studio, Schools & Halls
7922	7929	1.09	Theatrical Producers, Bands, Orchestras and Entertainers
7933	7933	1.05	Bowling Centers
7941	7948	1.05	Professional Sports, Clubs and Racing (including Track Operation)
7991	7996	1.05	Physical Fitness Facilities, Public Golf Courses, Coin-Operated Amusement Devices, Amusement
7997	7999	1.00	Other Amusement and Recreation Services
8011	8011	1.08	Offices and Clinics of Doctors of Medicine
8021	8021	1.04	Offices and Clinics of Dentists
8031	8031	1.08	Offices and Clinics of Doctors of Osteopathy
8041	8041	1.08	Offices and Clinics of Chiropractors
8042	8042	1.04	Offices and Clinics of Optometrists
8043	8049	1.08	Offices and Clinics of Other Health Practitioners
8051	8059	1.06	Nursing Care and Personal Care Facilities
8062	8069	1.12	Hospitals
8071	8071	1.06	Medical Laboratories
8072	8072	1.06	Dental Laboratories
8082	8099	1.06	Home Health Care Services: Other Health and Allied Services
8111	8111	1.05	Legal Services
8211	8211	0.98	Elementary and Secondary Schools
8221	8222	0.98	Colleges, Universities, Professional Schools, and Junior Colleges
8231	8231	0.98	Libraries
8243	8244	0.98	Data Processing Schools, Business and Secretarial Schools
8249	8249	0.98	Vocational Schools, (except Vocational High Schools)
8299	8299	0.98	Other Schools and Educational Services
8322	8322	1.02	Individual and Family Social Services
8331	8331	1.02	Job Training and Vocational Rehabilitation Services
8351	8351	1.02	Child Day Care Services
8361	8361	1.02	Residential Care
8399	8399	1.02	Other Social Services
8412	8422	0.96	Museums, Art Galleries, Botanical and Zoological Gardens
8611	8611	1.03	Business Associations
8621	8651	1.03	Professional Membership, Labor Unions, Civic, Social, Fraternal and Political Organizations
8661	8661	1.00	Religious Organizations
8699	8699	1.00	Other Membership Organizations
8711	8713	0.98	Engineering, Architectural and Surveying Offices
8721	8721	1.00	Accounting, Auditing, and Bookkeeping Services
8731	8732	0.96	Commercial, Physical & Non-Physical Research
8733	8733	0.96	Noncommercial Research Organizations
8734	8734	0.96	Testing Laboratories
8741	8748	0.99	Management and Public Relations Services
8811	8811	1.05	Private Households

Industry Factor (SIC) Table
(Confidential and Proprietary Information)

SIC Range		Factor	Description
From	To		
8999	8999	0.96	Other Services (i.e., writers, artists)
9111	9131	1.03	Executive and Legislative Bodies
9199	9199	1.03	All Departments Combined
9211	9211	0.98	Courts
9221	9221	1.15	Police Protection (Written Alone)
9222	9222	1.06	Legal Counsel and Prosecution
9223	9223	1.15	Correctional Institutions
9224	9224	1.15	Fire Protection (Written Alone)
9229	9229	1.06	Other Public Order and Safety
9311	9451	1.06	Public Finance, Taxation and Monetary Policy, Administration of Human Resources Programs
9511	9532	1.06	Administration of Environmental Quality and Housing Programs
9611	9661	0.98	Administration of Economic Programs
9711	9711	1.06	National Security
9721	9721	1.06	International Affairs

Plan Relativity Factor Table
(Confidential and Proprietary Information)

Benefit Descriptions																
PPID	Plan Relativity Factor	Primary Copay	Specialist Copay	SPU Copay	SPU Coins	Hospital Copay	Hospital Coins	ERroom Copay	MBR Ded	Family Ded	Annual Max	Life Max	MBR Coins Limit	Family Coins Limit	Coins %	Rx
3403183	0.987277	\$10	\$20	\$100	0%	\$250	0%	\$100	\$0	\$0	\$0	\$0	\$2,500	\$5,000	-	\$10/\$30/\$45 \$0 Deductible
3403184	0.866834	\$20	\$40	\$150	-	200 (X5)	-	\$100	-	-	-	-	\$2,500	\$5,000	-	\$15/\$35/\$50 \$100 Deductible
3403189	0.771318	\$15	\$35	-	20%	-	20%	\$0	\$250	\$500	-	-	\$2,500	\$5,000	20%	\$15/\$35/\$50 \$100 Deductible
3403190	0.654625	\$25	\$50	-	30%	-	30%	\$0	\$500	\$1,000	-	-	\$3,000	\$6,000	30%	\$20/\$40/\$60 \$250 Deductible
3404797	1.080856	\$10	\$20	\$0	0%	\$0	0%	\$100	\$0	\$0	\$0	\$0	\$0	\$0	0%	RX (HMO) \$10/\$20/\$30
3404798	0.954519	\$15	\$35	\$100	0%	\$250	0%	\$100	\$0	\$0	\$0	\$0	\$0	\$0	0%	RX (HMO) \$15/\$35/\$50
3404799	0.895777	\$20	\$40	\$100	0%	\$250	0%	\$100	\$0	\$0	\$0	\$0	\$0	\$0	0%	RX (HMO) \$20/\$40/\$60
3404800	0.633536	\$20	\$30	\$100	0%	\$300	0%	\$100	\$1,200	\$2,400	\$0	\$0	\$2,400	\$4,800	0%	RX (HMO) \$15/\$35/\$50
3404801	0.778760	\$0	\$0	\$0	0%	\$0	0%	\$0	\$1,200	\$2,400	\$0	\$0	\$2,400	\$4,800	0%	RX (HMO) \$10/\$20/\$30
3404802	0.616542	\$0	\$0	\$0	0%	\$0	0%	\$0	\$2,000	\$4,000	\$0	\$0	\$4,000	\$8,000	0%	RX (HMO) \$10/\$20/\$30
3404803	0.522027	\$20	\$30	\$100	0%	\$250	0%	\$100	\$2,000	\$4,000	\$0	\$0	\$4,000	\$8,000	0%	RX (HMO) \$10/\$20/\$30
New Plans as of 10/1/2010																
6403585	0.883291	\$25	\$50	\$0	10%	\$0	10%	\$200	\$0	\$0	Unlimited	Unlimited	\$2,500	\$5,000	10%	RX (HMO) \$10/\$35/\$60
6403586	0.729638	\$25	\$50	\$0	30%	\$0	30%	\$200	\$0	\$0	Unlimited	Unlimited	\$3,000	\$6,000	30%	RX (HMO) \$10/\$35/\$60
6403587	0.499827	\$30 aft ded	\$50 aft ded	\$200 aft ded	0%	\$300/Day aft ded	0%	\$200 aft ded	\$2,500	\$5,000	Unlimited	Unlimited	\$5,000	\$10,000	0%	RX (HMO) \$10/\$35/\$60 aft ded
6403589*	0.892124	\$25	\$50	\$0	10%	\$0	10%	\$200	\$0	\$0	Unlimited	Unlimited	\$2,500	\$5,000	10%	RX (HMO) \$10/\$35/\$60
6403590*	0.736934	\$25	\$50	\$0	30%	\$0	30%	\$200	\$0	\$0	Unlimited	Unlimited	\$3,000	\$6,000	30%	RX (HMO) \$10/\$35/\$60
6403591*	0.504825	\$30 aft ded	\$50 aft ded	\$200 aft ded	0%	\$300/Day aft ded	0%	\$200 aft ded	\$2,500	\$5,000	Unlimited	Unlimited	\$5,000	\$10,000	0%	RX (HMO) \$10/\$35/\$60 aft ded

Note:

- 1) This table includes unique PPIDs for various benefit plan feature combinations, with only the major benefit categories illustrated. Additional benefit plan features apply, e.g. Rx features and mandated offers, and are taken into account when determining the Plan Relativity Factor.
- 2) This table does not include every plan in force, but does include all of those plans that are actively being marketed.
- 3) To comply with new Federal Mental Health parity rules, Aetna will offer a MHP versions of a currently offered small group plan to those small groups that have greater than 50 lives. The MHP plans factors will have a 1% load applied to the underlying small group plan.
- 4) Plan sponsors will be asked to sign an attestation form certifying whether any underlying plan (any plan sponsor-funded arrangement or third party plan or combination of them) is being used to directly or indirectly subsidize/fund/ reimburse any part of an insured's or enrollee's network deductible expenses at any time during the plan year and if so, at what percentage. In the event that a plan sponsor certifies to Aetna that greater than 50% of the network deductible is being funded/subsidized/reimbursed, a 10% load will be applied to rates to account for this effective plan change. If the plan sponsor does not certify to the level of subsidization/funding/reimbursement, the 10% load will be applied.

SERFF Tracking Number: AETN-127847469 State: District of Columbia
 Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD State Tracking Number:
 NV NC OK TN VA
 Company Tracking Number: DCAHISG0412
 TOI: HOrg02G Group Health Organizations - Health Sub-TOI: HOrg02G.004F Small Group Only - HMO
 Maintenance (HMO)
 Product Name: DC AHI SG 2Q12
 Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/

Supporting Document Schedules

Item Status: **Status**
Date:

Satisfied - Item: Actuarial Justification

Comments:

Attached is the 2Q12 Small Group District of Columbia Actuarial Certification for Aetna Health Inc

Attachment:

QBS DC AHI Actuarial Cert 2Q12.pdf

Item Status: **Status**
Date:

Bypassed - Item: Rate Summary Worksheet
Bypass Reason: The proposed rate action in the filing are below the "subject to review" threshold
Comments:

Item Status: **Status**
Date:

Bypassed - Item: Consumer Disclosure Form
Bypass Reason: The proposed rate action in the filing are below the "subject to review" threshold
Comments:

Item Status: **Status**
Date:

Satisfied - Item: AHI SG 2Q12 Transmittal Document

Comments:

Attachment:

AHI SG 2Q12 Transmittal Document.pdf

Item Status: **Status**
Date:

SERFF Tracking Number: AETN-127847469 State: District of Columbia
Filing Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD State Tracking Number:
NV NC OK TN VA
Company Tracking Number: DCAHISG0412
TOI: HOrg02G Group Health Organizations - Health Sub-TOI: HOrg02G.004F Small Group Only - HMO
Maintenance (HMO)
Product Name: DC AHI SG 2Q12
Project Name/Number: DC AHI Small Group Rate Manual 4/1/2012/
Satisfied - Item: DC Cover Letter 2Q12 AHI
Comments:
Attachment:
DC Cover Letter - 2Q12 AHI.pdf

Item Status:

**Status
Date:**

Satisfied - Item: Loss Ratio Exhibit
Comments:
Attachment:
DC Loss Ratio exhibit - 2Q12 AHI.pdf

Memorandum

To: Aetna Health Inc.
From: Bruce Sobus, F.S.A., M.A.A.A.
Date: December 21, 2011
Re: **Actuarial Certification of Premium Rates**

I, Bruce Sobus, am an employee of Aetna Inc. and a member of the American Academy of Actuaries. I have reviewed the enclosed rates submitted by Aetna Health Inc. for Washington D.C.

These rates reflect the negotiated prices from the provider contracts and the expected utilization experience of the plan.

I relied upon financial records and summaries prepared by responsible officers and employees of Aetna Health Inc. In other respects, my analysis included review of assumptions that I considered necessary.

For preparation of the rates, items identified above:

- (i). are computed in accordance with commonly accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles,
- (ii). meet the requirements of Washington D.C,
- (iii). make a good and sufficient provision for all unpaid claims of the organization under the terms of it's contracts and agreements, and
- (iv). include appropriate provision for all actuarial items which ought to be established where allowed by law.

A target medical loss ratio of 79% was used.

These rates are appropriate for quotes delivered for effective dates beginning April 1, 2012 and the increase requested is not greater than 10% over the prior year's rates (excluding demographic changes).

This rate filing conforms to the benefit plan provisions required by the Patient Protection and Affordable Care Act (P.L. 111-148) of 2010.

In my opinion, the enclosed rates are reasonable in relation to the anticipated experience of Aetna Health Inc. They are neither excessive nor inadequate, nor unfairly discriminatory.



Bruce Sobus
F.S.A., M.A.A.A.

12/21/2011

Date

Life, Accident & Health, Annuity, Credit Transmittal Document

1.	Prepared for the State of	District of Columbia
-----------	----------------------------------	-----------------------------

2.	Department Use Only
	State Tracking ID

3.	Insurer Name & Address	Domicile	Insurer License Type	NAIC Group #	NAIC #	FEIN #	State #
	Aetna Health Inc. 1302 Concourse Drive, Suite 402 Linthicum, MD 2109	MD	Accident & Health		95109		

4.	Contact Name & Address	Telephone #	Fax #	E-mail Address
	Andrew Owen 980 Jolly Road Blue Bell PA 19422	215-775-3837	215-775-6441	OwenAJ@Aetna.com

5.	Requested Filing Mode	<input checked="" type="checkbox"/> Review & Approval <input type="checkbox"/> File & Use <input type="checkbox"/> Informational <input type="checkbox"/> Combination (please explain): _____ <input type="checkbox"/> Other (please explain): _____
-----------	------------------------------	--

6.	Company Tracking Number	DCAHISG0412
-----------	--------------------------------	--------------------

7.	<input checked="" type="checkbox"/> New Submission <input type="checkbox"/> Resubmission	Previous file # _____
-----------	--	-----------------------


8.	Market	<input type="checkbox"/> Individual <input type="checkbox"/> Franchise <input type="checkbox"/> Group <table style="margin-left: 20px;"> <tr> <td><input checked="" type="checkbox"/> Small</td> <td><input type="checkbox"/> Large</td> <td><input type="checkbox"/> Small and Large</td> </tr> <tr> <td><input type="checkbox"/> Employer</td> <td><input type="checkbox"/> Association</td> <td><input type="checkbox"/> Blanket</td> </tr> <tr> <td><input type="checkbox"/> Discretionary</td> <td><input type="checkbox"/> Trust</td> <td></td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Other: _____</td> </tr> </table>	<input checked="" type="checkbox"/> Small	<input type="checkbox"/> Large	<input type="checkbox"/> Small and Large	<input type="checkbox"/> Employer	<input type="checkbox"/> Association	<input type="checkbox"/> Blanket	<input type="checkbox"/> Discretionary	<input type="checkbox"/> Trust		<input type="checkbox"/> Other: _____		
<input checked="" type="checkbox"/> Small	<input type="checkbox"/> Large	<input type="checkbox"/> Small and Large												
<input type="checkbox"/> Employer	<input type="checkbox"/> Association	<input type="checkbox"/> Blanket												
<input type="checkbox"/> Discretionary	<input type="checkbox"/> Trust													
<input type="checkbox"/> Other: _____														

9.	Type of Insurance	HOrg02G Group Health Organizations - Health Maintenance (HMO)
-----------	--------------------------	--

10.	Product Coding Matrix Filing Code	HOrg02G.004F Small Group Only - HMO
------------	--	--

11.	Submitted Documents	<p><input type="checkbox"/> FORMS</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Policy</td> <td><input type="checkbox"/> Outline of Coverage</td> <td><input type="checkbox"/> Certificate</td> </tr> <tr> <td><input type="checkbox"/> Application/Enrollment</td> <td><input type="checkbox"/> Rider/Endorsement</td> <td><input type="checkbox"/> Advertising</td> </tr> <tr> <td><input type="checkbox"/> Schedule of Benefits</td> <td><input type="checkbox"/> Other</td> <td></td> </tr> </table> <p>Rates <input checked="" type="checkbox"/> New Rate <input type="checkbox"/> Revised Rate</p> <p><input type="checkbox"/> FILING OTHER THAN FORM OR RATE: Please explain: _____</p> <p>SUPPORTING DOCUMENTATION</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Articles of Incorporation</td> <td><input type="checkbox"/> Third Party Authorization</td> </tr> <tr> <td><input type="checkbox"/> Association Bylaws</td> <td><input type="checkbox"/> Trust Agreements</td> </tr> <tr> <td><input type="checkbox"/> Statement of Variability</td> <td><input type="checkbox"/> Certifications</td> </tr> <tr> <td><input type="checkbox"/> Actuarial Memorandum</td> <td></td> </tr> </table> <p><input checked="" type="checkbox"/> Other_DC SG 2Q12 Rate Manual & Actuarial Certification</p>	<input type="checkbox"/> Policy	<input type="checkbox"/> Outline of Coverage	<input type="checkbox"/> Certificate	<input type="checkbox"/> Application/Enrollment	<input type="checkbox"/> Rider/Endorsement	<input type="checkbox"/> Advertising	<input type="checkbox"/> Schedule of Benefits	<input type="checkbox"/> Other		<input type="checkbox"/> Articles of Incorporation	<input type="checkbox"/> Third Party Authorization	<input type="checkbox"/> Association Bylaws	<input type="checkbox"/> Trust Agreements	<input type="checkbox"/> Statement of Variability	<input type="checkbox"/> Certifications	<input type="checkbox"/> Actuarial Memorandum	
<input type="checkbox"/> Policy	<input type="checkbox"/> Outline of Coverage	<input type="checkbox"/> Certificate																	
<input type="checkbox"/> Application/Enrollment	<input type="checkbox"/> Rider/Endorsement	<input type="checkbox"/> Advertising																	
<input type="checkbox"/> Schedule of Benefits	<input type="checkbox"/> Other																		
<input type="checkbox"/> Articles of Incorporation	<input type="checkbox"/> Third Party Authorization																		
<input type="checkbox"/> Association Bylaws	<input type="checkbox"/> Trust Agreements																		
<input type="checkbox"/> Statement of Variability	<input type="checkbox"/> Certifications																		
<input type="checkbox"/> Actuarial Memorandum																			

12.	Filing Submission Date	12/21/2011
13	Filing Fee (If required)	Amount _____ Check Date _____ Retaliatory <input type="checkbox"/> Yes <input type="checkbox"/> No Check Number _____
14.	Date of Domiciliary Approval	
15.	Filing Description:	
	This filing is for effective dates April 1, 2012 – June 30, 2012. This rate filing conforms to the benefit plan provisions required by the Patient Protection and Affordable Care Act (P.L. 111-148) of 2010. This rate filing reflects changes to the following tables over that previously filed on September 23, 2011: Effective Date Factor Table. All other factors remain unchanged.	

16.	Certification (If required)	
	<p>I HEREBY CERTIFY that I have reviewed the applicable filing requirements for this filing, and the filing complies with all applicable statutory and regulatory provisions for the state of _____.</p> <p>Print Name <u>Andrew Owen</u> Title <u>Actuarial Manager</u></p> <p>Signature <u></u> Date: <u>12/21/11</u></p>	

17.	Form Filing Attachment	
This filing transmittal is part of company tracking number		N/A
This filing corresponds to rate filing company tracking number		N/A

	Document Name	Form Number		Replaced Form Number
	Description			Previous State Filing Number
01			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
02			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
03			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
04			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
05			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
06			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
07			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
08			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
09			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
10			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	

LH FFA-1

18.		Rate Filing Attachment		
This filing transmittal is part of company tracking number				
This filing corresponds to form filing company tracking number		N/A		
Overall percentage rate indication (when applicable)				
Overall percentage rate impact for this filing		1.7%		
	Document Name	Affected Form Numbers		Previous State Filing Number
	Description			
01	NAME CHANGE AMENDMENT	HMO/DC2 NAMEAMEND-1 05/02	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
02	GROUP AGREEMENT	HMO/DC2 GA-1 01/02	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
03	GROUP AGREEMENT AMENDMENT	HMO/DC2 Amendment to GA ELR-1 05/02	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
04	CERTIFICATE OF COVERAGE (COC)	HMO/DC2 COC- 1 07/02	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
05	AMENDMENT	HMO DC2 COC- AMEND-1 07-03	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
06	AMENDMENT	HMO/DC2 COC- AMEND-2 07/03	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
07	NEW DEFINITION AMENDMENT	HMO DC2 MEDICALLY NECESSARY 10- 03	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
08	GRIEVANCE PROCESS AMENDMENT	HMO AMD- COMPL-APPL- 11/02-DC	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
09	CONVERSION AMENDMENT	HMO/DC2 COC- CONVERSION- AMEND 01/03	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
10	COB AMENDMENT	HMO DC2 AMEND-COB-2 10-03	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	

	Document Name	Affected Form Numbers		Previous State Filing Number
	Description			
11	AMENDMENT	HMO GEN MOP-AMEND-2 10-03	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
12	HEARING AID RIDER	HMO/DC2 RIDER-HEAR-1 01/00	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
13	NOCO RIDER	HMO/DC2 RIDER-UAW-1 (01/00)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
14	RX RIDER	HMO/DC2 RIDER-RX-2003-1 (08/02)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
15	RIDER SHELL	HMO/DC2 RDR-SHELL-1 06/99	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
16	SERVICE AGREEMENT	HMO/DC2 SERVAGREE-1 06/99	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
17	MEDICAL SPENDING	HMO/DC2 RIDER-SBF-1 06/99	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
18	DOMESTIC PARTNER	HMO/DC2 AMEND-DP-1 06/99	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
19	STUDENT	HMO/DC2 AMEND-STNT-1 06/99	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
20	DENTAL RIDER	HMO/DC2 RIDER-DEN-1 06/99	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	

	Document Name	Affected Form Numbers		Previous State Filing Number
	Description			
21	BASIC INFERTILITY AMENDMENT	HMO/DC2 BASIC-INF-AMEND 04/03	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
22	COMPREHENSIVE INFERTILITY AMENDMENT	HMO GEN RIDER 2003CI-1 (07-03)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
23	ART AMENDMENT	HMO GEN RIDER 2003ART-1 (07-03)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
24	INDIVIDUAL CONVERSION SB HIGH OPTION	HMO/DC2 INDHISB-1 07/00	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
25	INDIVIDUAL COC	HMO/DC2 INDCOC-1 07/00	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
26	TRANSPLANT AMENDMENT	HI DC A Transplant V002	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
27	HIPAA AMENDMENT	HMO [GEN] HIPAA-AMEND-1 (4/05)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
28	OPEN ACCESS AEXCEL RIDER	HMO [GEN] AETNA OPEN ACCESS AEXCEL (09/07)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
29	AEXCEL RIDER	HMO [GEN] AEXCEL (09/07)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
30	HNO AMENDMENT	HMO [GEN] HNO (06/06)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	

	Document Name	Affected Form Numbers		Previous State Filing Number
	Description			
31	DEDUCTIBLE CREDIT RIDER	HMO [GEN] RIDER- DEDCREDIT-1 07-05	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
32	RESIDENTIAL TREATMENT FACILITY AMENDMENT	HMO [GEN] RTF-AMEND-1 (8/05)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
33	SELF-INJECTABLE AMENDMENT	HMO COC GEN AMENDSI (03- 04)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
34	AEXCEL SCHEDULE OF BENEFITS	HMO DC AEXCEL SB-1 09/07	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
35	OPEN ACCESS RIDER	HMO DC AOA-2 01-05	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
36	WEIGHT CONTROL SERVICES EXCLUSION AMENDMENT	HMO DC BAR EXCL AMND-1 (04/04)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
37	CHILDRENS HABILITATIVE SERVICES AMENDMENT	HMO DC HAB AMEND-1 (02/08)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
38	LIMITED MATERNITY BENEFIT AMENDMENT	HMO DC LIM MAT-AMEND-1 (05/06)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
39	MENTAL HEALTH AMENDMENT	HMO DC MH- AMEND-1 (01/08)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
40	SCHEDULE OF BENEFITS	HMO DC SB-2 (06-06)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	

	Document Name	Affected Form Numbers		Previous State Filing Number
	Description			
41	PERFORMANCE GUARANTEES AMENDMENT GROUP AGREE	HMO [GEN] GA AMEND-PERFGUAR-1 (06/06)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
42	DISCOUNT PROGRAMS AMENDMENT	HMO [GEN] DISCPROG-1 (06/06)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
43	HOME HEALTH CARE AMENDMENT	HMO GEN HHC-AMEND-1 (7/04)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
44	INFUSION THERAPY AMENDMENT	HMO GEN INFUSION-AMEND-1 (1/05)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
45	ALTERNATIVES TO PHYSICIAN OFFICE VISITS AMENDMENT	HMO GEN OV AMEND (08/07)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
46	PERFORMANCE GUARANTEES AMENDMENT	HMO [GEN] PERFGUAR-1 (06/06)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
47	REHABILITATION AMENDMENT	HMO GEN REHAB-AMEND-1 (7/04)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
48	MORBID OBESITY SURGICAL TREATMENT RIDER	HMO GEN RIDER BARSURG-1 (04/04)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
49	AETNA HEALTHFUND® RIDER	HMO [GEN] RIDER-AHF- 1 06-06	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	
50	PRESCRIPTION LENS RIDER	HMO/[GEN] RIDER-VIS-2 (06/06)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request 1.7% - 1.7% <input type="checkbox"/> Other _____	

LH RFA-1



980 Jolly Road – U12S
Blue Bell, PA 19422
(215)-775-3837
Fax: (215)-775-6441

December 21, 2011

Mr. Laszlo Penteck
District of Columbia Department of Insurance & Securities Regulation
810 First Street NE, 6th Floor
Washington, DC 20002

Subject: Aetna Health Inc.
NAIC Number 95109
DCAHISG0412 Small Group Premium Rate Filing
Effective dates 4/1/2012 – 6/30/2012

Dear Mr. Penteck:

I am writing to request approval of the attached Aetna Health Inc. rate manual. This filing is for effective dates April 1, 2012 – June 30, 2012. This rate filing conforms to the benefit plan provisions required by the Patient Protection and Affordable Care Act (P.L. 111-148) of 2010.

This rate filing reflects changes to the following tables over that previously filed on September 23, 2011 (SERFF Tracking number AETN-127618740): Effective Date Factor Table. All other factors remain unchanged.

The increase requested is not greater than 10% over the prior year's rates (excluding demographic changes). The manual rate change requested is 1.7%

The purpose of this rate filing is to conform to regulatory rate filing requirements. This filing is not intended to be used for other purposes. We have tried to present this information in a manner that will facilitate your review of the rates submitted. If there is something more we can do to improve the process or you would like us to do differently in the future, please let us know.

We ask that this rate filing submission be kept confidential to the extent possible.

Sincerely,

A handwritten signature in black ink that reads 'Andrew J. Owen'.

Andrew J. Owen
Actuarial Manager

**District Of Columbia
Loss Ratio Exhibit
Small Group: 2-50 Life Market Only**

District of Columbia					
Year	Member Months	Premium	Claims	Loss Ratio	
2008	4,296	\$ 1,428,871	\$ 925,722	64.8%	
2009	4,458	\$ 1,449,845	\$ 753,186	51.9%	
2010	7,107	\$ 2,305,906	\$ 1,879,560	81.5%	
2011 (partial)	6,993	\$ 2,194,123	\$ 2,352,374	107.2%	
Countrywide					
Year	Member Months	Premium	Claims	Loss Ratio	
2008	3,850,160	\$ 1,204,976,816	\$ 949,436,274	78.8%	
2009	3,543,486	\$ 1,132,278,273	\$ 925,603,600	81.7%	
2010	3,389,261	\$ 1,135,288,568	\$ 885,794,601	78.0%	
2011 (partial)	2,748,733	\$ 953,472,805	\$ 727,719,838	76.3%	