

SERFF Tracking Number: AETN-128133161 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: DCAHILG3Q12
 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Aetna Health Maintenance Organization
 Project Name/Number: Aetna Health Inc. 3Q12 Large Group HMO rate filing for DC/

Rate Information

Rate data applies to filing.

Filing Method:

Rate Change Type:

Increase

Overall Percentage of Last Rate Revision:

0.000%

Effective Date of Last Rate Revision:

04/01/2012

Filing Method of Last Filing:

SERFF

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	1.200%	1.200%	\$843,614	200	\$78,457,445	1.300%	0.800%
Product Type:	HMO	PPO	EPO	POS	HSA	HDHP	FFS	Other
Covered Lives:	18,908			600	40	33		
Policy Holders:	118			70	7	5		

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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 07/03, HMO 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 SB-1 10-03, HMO/DC2 SELFREF (10/00), HMO/DC2 SELFREF (10/00), 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 RIDER-VIS-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 TRANSPLANT-AMEND-1 10/03, HMO/DC2 INDHISB-1 07/00, HMO/DC2 INDCOC-1 07/00

REQUESTED RATE CHANGE

INFORMATION:

Change Period: Quarterly
Member Months: 237,292

<i>SERFF Tracking Number:</i>	<i>AETN-128133161</i>	<i>State:</i>	<i>District of Columbia</i>
<i>Filing Company:</i>	<i>Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN State Tracking Number:</i>		
	<i>VA</i>		
<i>Company Tracking Number:</i>	<i>DCAHILG3Q12</i>		
<i>TOI:</i>	<i>H21 Health - Other</i>	<i>Sub-TOI:</i>	<i>H21.000 Health - Other</i>
<i>Product Name:</i>	<i>Aetna Health Maintenance Organization</i>		
<i>Project Name/Number:</i>	<i>Aetna Health Inc. 3Q12 Large Group HMO rate filing for DC/</i>		
Benefit Change:	None		
Percent Change Requested:	Min: 0.8 Max: 1.3 Avg: 1.2		
PRIOR RATE:			
Total Earned Premium:	78,457,445.00		
Total Incurred Claims:	67,907,890.00		
Annual \$:	Min: 181.98 Max: 389.13 Avg: 335.63		
REQUESTED RATE:			
Projected Earned Premium:	71,144,799.00		
Projected Incurred Claims:	72,607,626.00		
Annual \$:	Min: 165.42 Max: 353.72 Avg: 305.09		

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 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Aetna Health Maintenance Organization
 Project Name/Number: Aetna Health Inc. 3Q12 Large Group HMO rate filing for DC/

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
	DC HMO 3Q12 rate manual	see attached list of form numbers	Revised	Previous State Filing Number: Percent Rate Change Request:	AETN- DC 3Q12 HMO rate manual.pdf 1279712 39 1.200

**Aetna Health, Inc.
District of Columbia**

**Large Group Business
Rate Manual**

Table of Contents

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General

The attached pages contain worksheets and instructions for calculating the community rates for the plans available from Aetna Health Inc. They include tables of adjustments for certain benefit variations and co-payment options.

Section B addresses the base medical benefits. Sections C, D, and E cover the various riders available to the base medical plan.

Factors for intermediate benefits, supported by our forms filing but not specifically listed in the factor tables will be computed on a basis actuarially consistent with the basis used for determining the factors on file or will be derived by linear interpolation or extrapolation.

Medical Benefit Plan – Manual Rate Calculation

Refer to the Medical Plan Rate Development Worksheet in Section B.

I. Starting Base Plan Claim Cost

The Starting Base Plan Claim Cost is the PMPM for a \$0 copay plan. Select the appropriate Starting Base Plan Claim Cost from the Starting Base Plan Claim Cost table.

II. Benefit Categories

Column (1) represents the base plan service category weight by line item expense. Enter the “Column (1) Base Plan Service Category Weight” table and select the appropriate weights based on the medical product being rated.

For each line item expense, select the appropriate medical benefit adjustment factors and place in the appropriate column of the rate worksheet. For each line item expense, the following describes the initial steps needed to calculate a rate.

Col. (2): Enter the Include/Exclude Factor from the appropriate table.

Col. (3): Enter the Copay Factor from the appropriate table for each line item. If no benefit feature relates to this column, insert a factor of 1.00.

Col. (4): Enter the Coinsurance Factor from the appropriate table for each line item. If no benefit feature relates to this column, insert a factor of 1.00.

Col. (5): Enter the Days or Visits Maximum Factor from the appropriate table for each line item. If no benefit feature relates to this column, insert a factor of 1.00.

Col. (6): Enter the Dollar Maximum Annual or Lifetime Factor from the appropriate table for each line item. If no benefit feature relates to this column, insert a factor of 1.00.

Col. (7): Enter the Mandated Benefit Factor from the appropriate table for each line item. If no benefit feature relates to this column, insert a factor of 1.00.

Col. (8): Enter the Routine Limit and Emergency Room Penalty Factors from the appropriate tables for each line item. If no benefit feature relates to this column, insert a factor of 1.00.

Col. (9): Enter the Inpatient Pre-Certification Factor from the appropriate table. If no benefit feature relates to this column, insert a factor of 1.00.

Col. (10A-B): Enter the product of columns (1) through (9) in the appropriate column (A) or (B), depending upon deductible applicability for each line item.

Sum up the results for columns [10A] and [10B] at the bottom of each column and call this Total Medical.

III. Bottom Line Adjustments

Deductible Carryover Factor

Determine the Deductible Carryover Factor for column [10A] based on the plan's adjusted deductible amount (the deductible minus an allowance for copays collectable on services subject to the deductible), the percent of services subject to plan deductible, and a determination as to whether the deductible applies to Med/Surg. For column [10B] this factor is set to 1.00. For any adjusted deductible amount that is not represented on the table, interpolate between the bordering tables values.

Deductible Factor

Determine the Deductible Factor for column [10A] from the appropriate table based on the plan's adjusted deductible amount (the deductible minus an allowance for copays collectable on services subject to the deductible), the percent of services subject to plan deductible, and a determination as to whether the deductible applies to Med/Surg. For column [10B], this factor is set to 1.00. For any adjusted deductible amount that is not represented on the table, interpolate between the bordering tables values.

Interim Product

For columns [10A] and [10B], multiply the sum for each column (as calculated at the end of Section II.) by the Deductible Carryover, and Deductible Factors.

Example:

(Sum of [10A]) x (column [10A]'s Deductible Carryover Factor) x (column [10A]'s Deductible Factor)

Interim Sum (1)

Add together the results of the Interim Product calculation for columns [10A] and [10B].

Out-of-Pocket Limit Factor

For plans with average coinsurance less than 98%, select the appropriate factor from [the correct Out-of-Pocket Table based](#) on the plan's Out-of-Pocket trigger (the expected value of claims above which point the plan pays 100%), the percent of services subject to Out-of-Pocket Limit, and a determination as to whether the Med/Surg per Confinement Deductible applies to the Out-of-Pocket Limit. For any Out-of-Pocket trigger point that is not represented on the table, interpolate between the bordering tables values. To calculate the Out-of-Pocket Limit Factor used in the rate calculation, perform the following calculation:

$$\begin{array}{l} \text{Out-of-Pocket Limit Factor} \\ \times \\ (1 - \text{Average Plan Coinsurance}) \\ \times \\ \% \text{ of Services Subject to the Out-of-Pocket Limit} \end{array}$$

For plans with average coinsurance greater than or equal to 98%, select the factor from [the correct Out-of-Pocket Table](#) based on the Med/Surg per Confinement Deductible and the Out-of-Pocket Limit.

Interim Sum (2)

Add together the results of the Interim Sum from above and the Out-of-Pocket Factor.

Cross Application Factor

If Deductible and Out-of-Pocket Cross Application do not apply, enter a factor of 1.00 into the worksheet. If Deductible and/or Out-of-Pocket Cross Application apply, select the appropriate Cross Application Factor(s) from the respective tables. If both Deductible and Out-of-Pocket Cross Application apply, then enter the product of the two Cross Application Factors into the Medical Rate Development Worksheet.

If applicable, entry into the Deductible Cross Application table is based on the Preferred and Non-Preferred Deductibles.

If applicable, entry into the Out-of-Pocket Limit Cross Application table is based on the Preferred and Non-Preferred trigger points (where the trigger point is the expected value of claims above which point the plan pays 100%). For adjusted trigger points not represented on the tables, interpolate between the bordering values.

Maximum Benefit Factors

Select the appropriate factor from the Maximum Benefit Factor table (Annual or Lifetime) if applicable.

Contract State Mandate Adjustment Factor

Select the appropriate factor from the Contract State Mandate Adjustment Factor table if applicable.

Family Deductible Limit Factor

The standard approach to deriving the Family Deductible Limit Factor for the 1x/2x/3x limits is as follows:

- a. Select the appropriate factor from the Family Deductible Limit – Standard Family Limit table using the adjusted deductible and the family limit desired if applicable.
- b. Get the % of services subject to the plan deductible.
- c. The Family Deductible Limit Factor equals $1 + [a - 1] \times b$.

Use the following methodology when the special approach is used:

- a. Select the appropriate factor from the Family Deductible Limit – Standard Family Limit Definition table using the adjusted plan deductible and the family limit desired if applicable.
- b. Select the appropriate factor from the Family Deductible Limit – Special Family Limit Definition table based on billing tier, family deductible limit, and the adjusted plan deductible if applicable.
- c. Derive the weighted adjustment factor for the billing tier structure below, assuming coding for actual values:

<u>2-Tier</u>	<u>Single</u>	<u>Family</u>
Subscriber Count	A	B
Tier Factor	PA	PB

<u>3-Tier</u>	<u>Single</u>	<u>2 Party</u>	<u>Family</u>
Subscriber Count	A	C	D
Tier Factor	PA	PC	PD

<u>4-Tier</u>	<u>Single</u>	<u>Couple</u>	<u>EE+Ch(n)</u>	<u>Family</u>
Subscriber Count	A	E	F	G
Tier Factor	PA	PE	PF	PG

As an example, the calculation for a 1x limit with deductible between \$1 and \$191 is as follows:

1) 2 Tier Billing:
$$\frac{A \times PA \times .99 + B \times PB \times 1.0041}{A \times PA + B \times PB}$$

2) 3 Tier Billing:
$$\frac{A \times PA \times .99 + C \times PC \times 1.003 + D \times PD \times 1.005}{A \times PA + C \times PC + D \times PD}$$

3) 4 Tier Billing:
$$\frac{A \times PA \times .99 + E \times PE \times 1.003 + F \times PF \times 1.003 + G \times PG \times 1.005}{A \times PA + E \times PE + F \times PF + G \times PG}$$

The above calculation for other family limits and/or deductibles would use the same formulas but different factors from the Family Deductible Limit – Special Family Limit Definition table.

- d. Get % services subject to the plan deductible.
- e. The Family Deductible Limit Factor equals $1 + (a \times c - 1) \times d$.

Deductible Credit Factor

Select the appropriate factor from the Deductible Credit Factor table if applicable.

Family Out-of-Pocket Limit Factor

For the standard approach, select the appropriate factor from the Standard Family Limit Definition table if applicable.

Use the following methodology when the special approach is used:

- a. Select the appropriate Family Out-of-Pocket Limit – Standard Family Limit Definition table if applicable.
- b. Select the appropriate Family Out-of-Pocket Limit – Special Family Limit Definition table based on the billing tier and family limit if applicable.
- c. Derive the weighted adjustment factor for the billing tier structure below, assuming coding for actual values:

<u>2-Tier</u>	<u>Single</u>	<u>Family</u>
Subscriber Count	A	B
Tier Factor	PA	PB

<u>3-Tier</u>	<u>Single</u>	<u>2 Party</u>	<u>Family</u>
---------------	---------------	----------------	---------------

Subscriber Count	A	C	D	
Tier Factor	PA	PC	PD	
<u>4-Tier</u>	<u>Single</u>	<u>Couple</u>	<u>EE+Ch(n)</u>	<u>Family</u>
Subscriber Count	A	E	F	G
Tier Factor	PA	PE	PF	PG

As an example, the calculation for the 2x limit is as follows:

- 1) 2 Tier Billing: $\frac{A \times PA \times 1.00 + B \times PB \times .99}{A \times PA + B \times PB}$
- 2) 3 Tier Billing: $\frac{A \times PA \times 1.00 + C \times PC \times .99 + D \times PD \times .99}{A \times PA + C \times PC + D \times PD}$
- 3) 4 Tier Billing: $\frac{A \times PA \times 1.00 + E \times PE \times .9900 + F \times PF \times .99 + G \times PG \times .99}{A \times PA + E \times PE + F \times PF + G \times PG}$

The above calculation for the 1x and 3x limits would use the same formulas but different factors from the Family Out-of-Pocket Limit – Special Family Limit Definition table.

d. The Family Out-of-Pocket Limit Factor equals a x c.

Professional Fee Schedule Factor

Select the appropriate factor form the Professional Fee Schedule table **if applicable**.

Facility Fee Schedule Factor

Select the appropriate factor form the Facility Fee Schedule table **if applicable**.

Cross Application Benefits Limit Factor

Select the appropriate factor from the Cross Application Benefits Limit Factor table **if applicable**. This item is for **Non Preferred** only.

National Advantage Factor

Select the appropriate factor from the National Advantage Factor table **if applicable**.

Custom Product Factor

Select the appropriate factor from the Custom Product Factor table **if applicable**.

Step Therapy/Pre-certification Adjustment Factor

Select the appropriate factor from the Step Therapy/Pre-certification Adjustment Factor **if applicable**.

Mental Health Deductible Factor

Select the appropriate factor from the Mental Health Deductible Factor table **if applicable**.

Benefit Adjustment Factor

Multiply the following together to get the Benefit Adjustment Factor:

Interim Sum (2)
 x
 Cross Application of Out-of-Pocket Limit Factor
 x
 Maximum Benefit Factor
 x
 Contract State Mandate Adjustment Factor
 x
 Family Deductible Limit Factor
 x
 Deductible Credit Factor
 x
 Family Out-of-Pocket Limit Factor
 x
 Professional Fee Schedule Factor
 x
 Facility Fee Schedule Factor
 x
 Cross Application Benefit Limits Factor
 x
 National Advantage Factor
 x
 Custom Product Factor
 x
 Step Therapy/Pre-certification Adjustment Factor
 x
 Mental Health Deductible Factor

Selection Load Factor

Calculate the ratio of the Benefit Adjustment Factor to the Anchor Plan Value. Using the Selection Load Factor table and this ratio, select the appropriate factor.

Final Benefit Adjustment Factor

Multiply the following together to get the Final Benefit Adjustment Factor to the Base Plan Claim Cost:

Benefit Adjustment Factor
 x

Selection Load Factor

VI. Trend Adjusted Flex Medical Starting Claim Cost

Base Plan Component Steerage Factor

Select the Base Plan Component Steerage factor from the Base Plan Component Steerage Table.

Component Base Relativity Factor

Select the Component Base Relativity factor from the Component Base Relativity Table.

Normalized Claim Relativity Factor

Select the Normalized Claim Relativity factor from the Normalized Claim Relativity Table.

Base Plan Claim Cost PMPM

Multiply the following together to get the Base Plan Claim Cost PMPM:

$$\begin{array}{r}
\text{Base Plan Component Steerage Factor} \\
\times \\
\text{Component Base Relativity Factor} \\
\times \\
\text{Normalized Claim Relativity Factor}
\end{array}$$

Flex Plan Claim Costs

Multiply the Base Plan Claim Cost by the Final Benefit Adjustment.

Trend Factor

Select the appropriate trend from the Trend Factor table.

Steerage Factor

Select the Steerage Factor from the Steerage Factor table.

Trend Adjusted Flex Plan Claim Cost PMPM

Multiply the Flex Plan Claim Cost PMPM by Trend and Steerage Factors.

$$\begin{array}{r}
\text{Flex Plan Claim Cost PMPM} \\
\times \\
\text{Trend Factor} \\
\times \\
\text{Steerage Factor}
\end{array}$$

The Steerage Factors are determined as a function of the Preferred Final Benefit Adjustment and the relationship of the Preferred Final Benefit Adjustment to the Non-Preferred Final Benefit Adjustment.

V. Interim Adjusted Flex Plan Claim CostIndustry Factor

Select the appropriate factor from the Industry Factor table.

Rating Area Factor

Select the appropriate factor from the Rating Area Factor table.

Age/Gender Factor

Calculate the appropriate New Business Age/Gender Factor as follows:

Use the New Business Subscriber Based Age/Gender Factor table, the expected employee census, segmented by age, gender and rate tier, and the Tier Factors to calculate the adjustment factor. First sum the product of the expected subscribers times the appropriate age/gender and Tier factors. This result is then divided by the sum of the product of the expected subscribers by tier times the appropriate Tier factors to obtain the age/gender adjustment.

Calculate the appropriate Renewal Business Age/Gender Factor as follows:

Use the Renewal Member Based Age/Gender Factor table and the expected enrolled membership segmented by age and gender to calculate the Weighted Average Age/Gender Factor by taking the sum product of the age/gender factor and the expected enrolled membership.

Calculate the Contract Mix/Family Size Factor. This factor reflects the distribution of enrollment by contract 'tier' type and the average members per contract tier of the group. To calculate this factor, first calculate the group's average number of members per contract. Next, calculate the group's average rate tier factor by weighting the community rate tier factors with the group's actual number of contracts per tier. The contract mix/family size factor is then calculated by dividing the group's average number of members per contract by the group's average rate tier factor.

Multiply the Weighted Average Age/Gender Factor by the Contract Mix/Family Size Factor to get the Age/Gender Factor

COBRA Factor

Select the appropriate factor from the COBRA Factor table if applicable.

Interim Adjusted Flex Plan Claim Cost

Multiply the Total Trend Adjusted Flex Plan Claim Cost by the following to get the Interim Adjusted Flex Plan Claim Cost:

$$\begin{array}{l}
 \text{Industry Factor} \\
 \quad \times \\
 \text{Rating Area Factor} \\
 \quad \times \\
 \text{Age/Gender Factor} \\
 \quad \times \\
 \text{COBRA Factor}
 \end{array}$$

VI. Adjusted Medical Claim Cost by Billing Tier

Tier Factors

Select the appropriate factors from the Tier Factor table.

Dependent Age Adjustment Factor

Calculate the appropriate Dependent Age Adjustment Factor. For those tiers under which children may be covered, apply the appropriate factor. Other tiers will use a factor of 1.0.

Adjusted Medical Claim Cost by Billing Tier

Multiply the following together to get the Adjusted Medical Claim Cost by Billing Tier:

$$\begin{array}{l}
 \text{Interim Adjusted Flex Plan Claim Cost} \\
 \quad \times \\
 \text{Tier Factors} \\
 \quad \times \\
 \text{Dependent Age Adjustment Factor}
 \end{array}$$

VII. Medical Plan Manual Premium Rates by Billing Tier

Multiply the Adjusted Medical Claim Cost by Billing Tier by the adjustment factor from d. below to get Medical Plan Manual Premium Rates by Billing Tier:

Administrative Expense and Profit

- a. Enter the Administrative Expenses and Profit table with total case lives and retrieve the appropriate Medical PMPM and PPACA fee. Also retrieve the appropriate Retention, Commission, and Taxes and Assessments percentages. Retrieve the appropriate ERISA Adjustment. For renewals, also retrieve the appropriate Family Size Adjustment PMPM from the Family Size Adjustment table.
- b. Sum the PMPMs and PPACA fee in a. and multiply the result by members to get Total Retention amount.
- c. Multiply Adjusted Medical Claim Cost by Billing Tier by the appropriate number of subscribers in each tier to get Total Monthly Claim Cost.
- d. The Administrative Expense and Profit Factor will be $[(\text{Total Monthly Claim Cost} + \text{Total Retention amount}) / (1 - \text{Retention Expense \%} - \text{Commissions \%} - \text{Taxes and Assessments \%})] / (\text{Total Monthly Claim Cost})$.

Retention may be adjusted to reflect case specific circumstances such as inclusion or exclusion of certain programs (i.e. wellness programs), case specific commissions, or margin for risk sharing arrangements, etc.

Underwriter Adjustment Factor

Enter the Underwriter Adjustment if applicable.

Note: Rounding to the fourth decimal place occurs in every calculation, with the exception of the last calculation which gets rounded to the second decimal place.

Section IV.

- 116 Base Plan Component Steerage Factor
- 117 Component Base Relativity Factor
- 118 Normalized Claim Relativity Factor
- 119 Base Plan Claim Cost PMPM
- 120 Flex Plan Claim Cost PMPM
- 121 Trend Factor
- 122 Steerage Factor
- 123 Trend Adjusted Flex Plan Claim Cost PMPM
- 124 Total Trend Adjusted Flex Plan Claim Cost PMPM

	1 x 116 x 117 x 118
	115 x 119
	120 x 121 x 122
	123

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- 127 Age/Gender
- 128 COBRA
- 129 Interim Adjusted Flex Plan Claim Cost PMPM

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Section VI.

- 130 Tier Factors

Two-tier Structure	Three-tier Structure			Four-tier Structure				Medicare
Single Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member

- 131 Dependent Age Adjustment

Two-tier Structure	Three-tier Structure			Four-tier Structure				Medicare
Single Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member
1.0000	1.0000			1.0000		1.0000		1.0000

Dependent Age Adjustment Worksheet

	Limiting Age	Adjustment
a. Student:	_____	_____
b. Non-Student:	_____	_____
c. $[1.00 + ((a. + b.) / 100)]$		

- 132 Adjusted Medical Claim Cost by Billing Tier

Two-tier Structure	Three-tier Structure			Four-tier Structure				Medicare
Single Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member

129 x 130 x 131

Section VII.

- 133 Administrative Expenses & Profit
- 134 This line reserved for future use
- 135 Underwriter Adjustment
- 136 Medical Plan Manual Premium Rates by Billing Tier

Two-tier Structure	Three-tier Structure			Four-tier Structure				Medicare
Single Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member

132 x 133 x 134 x 135

NOTE: Rounding to the fourth decimal place occurs in every calculation, with the exception of the last calculation which gets rounded to the second decimal place.

Medical PMPM and Factor Tables

Section I.

Table 1 3rd Quarter 2012 Starting Base Plan Claim Cost

Network	Non-Open Access		Open Access	
	HMO	QPOS	HMO	QPOS
	Products	Products	Products	Products
	Base PMPM	Base PMPM	Base PMPM	Base PMPM
DC	289.12	350.86	302.13	366.65

Section II.

Column [1] Inputs - Preferred and Non-Preferred Base Plan Service Category Weight	Preferred Products Weights
Benefit Description	
MediSurg	23.12%
Serious MH I/P	0.94%
MH I/P	0.06%
SA Detox I/P	0.05%
SA Rehab I/P	0.03%
Maternity I/P	4.00%
Skilled Nursing Facility	0.80%
Hospice I/P	0.01%
Transplants	0.53%
Bariatric Surgery	1.73%
Surgery (SPLU)	3.97%
Surg - Freestanding facility	1.16%
Bariatric O/P	0.01%
Hospice O/P	0.03%
Other Facility O/P	1.63%
Other Rehab O/P	0.02%
Physical Therapy O/P	1.21%
Occupational Therapy O/P	0.06%
Speech Therapy O/P	0.09%
Chiro/Subluxation	0.39%
Diagnostic X-ray Hosp O/P	1.64%
Diagnostic X-ray Non-Hosp O/P	1.12%
Diagnostic X-ray NF	1.06%
Diag. X-ray-Complex Imaging Hosp O/P	1.20%
Diag. X-ray-Compl Imag Non-Hosp O/P	1.43%
Diag. X-ray-Complex Imaging NF	0.13%
Diagnostic Lab Hosp O/P	0.79%
Diagnostic Lab Non-Hosp O/P	1.55%
Diagnostic Lab NF	0.31%
Diagnostic Phys Other	1.70%
Diagnostic OP facility other	0.78%
Ambulance	0.52%
ER O/P	6.70%
ER NF	1.56%
LC O/P	0.15%
PCP	3.94%
E-visits PCP	0.04%
Walk-in Clinics	0.08%
Non-designated PCP	0.82%
Specialist	5.60%
E-visits Specialist	0.02%
Office Based Surgery	0.77%
PCP - Inpatient	0.69%
Specialist - Inpatient	4.53%
Maternity NF	0.89%
Prenatal	0.65%
Surgery NF	2.28%
Bariatric - physician	0.72%
Allergy Testing - NF	0.12%
Allergy Trmt/Serum -NF	0.23%
Oral Surgery NF	0.01%
Routine Physical - Adult	0.57%
Immunization - Adult	0.37%
Routine Physical - Child	0.92%
Immunization - Child	1.05%
Routine Eye Exam	0.12%
Speech & Hearing NF	0.12%
Routine Gyn	0.86%
Mammography	0.35%
Cancer Screening	0.19%
Digital Rectal Exam	0.01%
Prostate Specific Antigen	0.01%
Serious MH NF	1.09%
MH NF	0.55%
MH part hosp	0.07%
SA NF	0.16%
Private Duty Nursing	0.19%
HHC	0.23%
Hospice NF	0.01%
Injectables - AF	1.73%
Injectables - Office	3.47%
Durable Medical Equipment	0.61%
Diabetic Supplies	0.02%
Prosthetics and Orthotics	0.04%
Lens Reimbursement	0.75%
Hearing Aid	0.09%
PKU	0.10%
Infertility - AI/CI NF	0.47%
ART NF	1.48%
TMJ Disorder	0.02%
Tubal Ligation	0.07%
Voluntary Abortion	0.04%
Vasectomy	0.02%
Contraceptives	0.16%
Pharmacy	0.00%
Self Injectables	2.15%
Total Medical	100.00%

Table 2 Med/Surg

a. Per Confinement Copay

Copay	None
\$0	1.0000
\$50	0.9943
\$100	0.9886
\$125	0.9858
\$150	0.9830
\$200	0.9773
\$240	0.9728
\$250	0.9717
\$300	0.9661
\$350	0.9605
\$400	0.9549
\$450	0.9494
\$500	0.9438
\$550	0.9394
\$700	0.9271
\$750	0.9230
\$1,000	0.9023
\$1,250	0.8819
\$1,500	0.8616
\$2,000	0.8218
\$2,500	0.7807
\$3,000	0.7586
\$3,500	0.7284
\$4,000	0.6973

Table 2 Med/Surg

b. Copay Per Day

Copay Per Day	Factor
\$0	1.0000
\$25	0.9879
\$50	0.9758
\$100	0.9519
\$125	0.9410
\$150	0.9321
\$200	0.9143
\$225	0.9055
\$250	0.8968
\$300	0.8794
\$350	0.8621
\$400	0.8450
\$500	0.8131

Table 2 Med/Surg

c. Copay%

Copay%	Factor
10%	0.8511
15%	0.7892
20%	0.7363
25%	0.6842
30%	0.6330
40%	0.5383
50%	0.4486

Table 2 Med/Surg

b1. Copay Per Day/Day Maximum (Adjustment to the b. Per Day Copay factors) (Used in Column B6)

Copay Per Day	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days
\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$25	1.0059	1.0049	1.0042	1.0037	1.0033	1.0029	1.0027	1.0025
\$50	1.0119	1.0099	1.0085	1.0074	1.0066	1.0059	1.0054	1.0049
\$100	1.0241	1.0200	1.0172	1.0150	1.0133	1.0120	1.0109	1.0100
\$125	1.0293	1.0242	1.0206	1.0179	1.0158	1.0141	1.0128	1.0116
\$150	1.0326	1.0263	1.0220	1.0187	1.0161	1.0141	1.0125	1.0115
\$200	1.0390	1.0310	1.0266	1.0232	1.0206	1.0186	1.0169	1.0156
\$225	1.0423	1.0351	1.0301	1.0263	1.0233	1.0210	1.0191	1.0175
\$250	1.0473	1.0393	1.0337	1.0294	1.0261	1.0235	1.0214	1.0196
\$300	1.0575	1.0478	1.0409	1.0357	1.0317	1.0285	1.0260	1.0238
\$350	1.0679	1.0564	1.0483	1.0422	1.0374	1.0337	1.0307	1.0281
\$400	1.0787	1.0654	1.0559	1.0488	1.0433	1.0390	1.0355	1.0325
\$500	1.0985	1.0813	1.0692	1.0601	1.0530	1.0474	1.0429	1.0391

Table 3 Serious MH IP

a. Per Confinement Copay

Copay	None
\$0	1.0000
\$50	0.9881
\$100	0.9764
\$125	0.9705
\$150	0.9646
\$200	0.9530
\$240	0.9437
\$250	0.9414
\$300	0.9299
\$350	0.9184
\$400	0.9070
\$450	0.8957
\$500	0.8845
\$600	0.8642
\$700	0.8442
\$750	0.8343
\$1,000	0.7854
\$1,250	0.7377
\$1,500	0.6913
\$2,000	0.5942
\$2,500	0.5327
\$3,000	0.4712
\$3,500	0.4097
\$4,000	0.3482

Table 3 Serious MH IP

b. Copay Per Day

Copay Per Day	Factor
\$0	1.0000
\$25	0.9597
\$50	0.9203
\$100	0.8474
\$125	0.8136
\$150	0.7804
\$200	0.7156
\$225	0.6835
\$250	0.6497
\$300	0.5878
\$350	0.5457
\$400	0.5037
\$500	0.4195

Table 3 Serious MH IP

b1. Copay Per Day/Day Maximum (Adjustment to the b. Per Day Copay factors) (Used in Column B6)

Copay Per Day	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days
\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$25	1.0251	1.0209	1.0175	1.0147	1.0126	1.0109	1.0096	1.0084
\$50	1.0517	1.0430	1.0359	1.0302	1.0258	1.0223	1.0196	1.0173
\$100	1.1047	1.0890	1.0710	1.0589	1.0496	1.0426	1.0372	1.0329
\$125	1.1313	1.1073	1.0879	1.0737	1.0629	1.0545	1.0478	1.0421
\$150	1.1596	1.1302	1.1084	1.0910	1.0776	1.0672	1.0588	1.0519
\$200	1.2229	1.1843	1.1533	1.1284	1.1097	1.0947	1.0829	1.0730
\$225	1.2604	1.2153	1.1790	1.1528	1.1279	1.1108	1.0971	1.0856
\$250	1.3049	1.2526	1.2134	1.1771	1.1516	1.1318	1.1160	1.1028
\$300	1.3964	1.3280	1.2734	1.2300	1.1969	1.1709	1.1486	1.1300
\$350	1.4555	1.3706	1.3033	1.2483	1.2040	1.1699	1.1428	1.1203
\$400	1.5244	1.4215	1.3366	1.2681	1.2129	1.1747	1.1553	1.1353
\$500	1.7073	1.5494	1.4214	1.3533	1.3021	1.2621	1.2300	1.2031

Table 3 Serious MH IP

c. Copay%

Copay%	Factor
10%	0.8514
15%	0.7857
20%	0.7227
25%	0.6605
30%	0.5987
40%	0.5041
50%	0.4200

Table 3 Serious MH IP

d. Freqmax

	IP MH SMI	All IP MH & IP
Maximum	Factor	SA Combined
20 days/plan yr	0.8752	0.8649
30 days/cal yr	0.9348	0.9294
35 days/cal yr	0.9472	0.9428
40 days/plan yr	0.9616	0.9594
45 days/cal yr	0.9677	0.9650
50 days/cal yr	0.9810	0.9795
60 Days/Life	0.981	0.9550
90 days/cal yr	0.9893	0.9884
90 Days/Life	0.9646	0.9637
200 days/cal yr	0.9987	0.9986
24 days/plan yr	0.9069	N/A
120 days/plan yr	0.9056	N/A
150 days/cal yr	0.9983	N/A
Age 0-18, 25 days per cal yr; Age 19+ 20 days per cal yr	0.8801	N/A
Age 0-18, 25 days per plan yr; Age 19+ 20 days per plan yr	0.8801	N/A
Unlimited	1.0000	1.0000

Table 4 MH I/P

a. Per Confinement Copay

Copay	None
\$0	1.0000
\$50	0.9849
\$100	0.9688
\$125	0.9624
\$150	0.9549
\$200	0.9401
\$240	0.9283
\$250	0.9254
\$300	0.9107
\$350	0.8962
\$400	0.8817
\$450	0.8674
\$500	0.8531
\$550	0.8399
\$700	0.8210
\$750	0.7981
\$1,000	0.7249
\$1,250	0.6636
\$1,500	0.6040
\$2,000	0.4838
\$2,500	0.4032
\$3,000	0.3225
\$3,500	0.2419
\$4,000	0.1613

Table 4 MH I/P

c. Copay%

Copay%	Factor
10%	0.8647
15%	0.8028
20%	0.7438
25%	0.6863
30%	0.6302
40%	0.5196
50%	0.4200

Table 5 SA Detox I/P

a. Per Confinement Copay

Copay	None
\$0	1.0000
\$50	0.9813
\$100	0.9626
\$125	0.9534
\$150	0.9442
\$200	0.9258
\$240	0.9112
\$250	0.9076
\$300	0.8895
\$350	0.8715
\$400	0.8537
\$450	0.8360
\$500	0.8184
\$600	0.7804
\$700	0.7431
\$750	0.7248
\$1,000	0.6358
\$1,250	0.5515
\$1,500	0.4717
\$2,000	0.3401
\$2,500	0.2834
\$3,000	0.2267
\$3,500	0.1700
\$4,000	0.1134

Table 4 MH I/P

b. Copay Per Day

Copay Per Day	Factor
\$0	1.0000
\$25	0.9487
\$50	0.8985
\$100	0.8051
\$125	0.7614
\$150	0.7185
\$200	0.6352
\$225	0.5935
\$250	0.5523
\$300	0.4745
\$350	0.4136
\$400	0.3527
\$500	0.2308

Table 4 MH I/P

d. Freqmax

	I/P MH	All I/P MH & I/P SA Combined
Maximum	0.9447	0.8649
20 days/plan yr	0.9761	0.9294
30 days/plan yr	0.9800	0.9428
35 days/plan yr	0.9838	0.9584
45 days/plan yr	0.9877	0.9650
60 days/plan yr	0.9992	0.9795
90 days/plan yr	1.0000	0.9884
90 Days/Life	0.9750	0.9637
200 days/plan yr	1.0000	0.9986
24 visits/plan yr	0.9611	N/A
120 days/plan yr	1.0000	N/A
150 days/plan yr	1.0000	N/A
Age 0-18, 25 days per plan yr; Age 19+ 20 days per plan yr	0.9488	N/A
Age 0-18, 25 days per plan yr; Age 19+ 20 days per plan yr	0.9488	N/A
Unlimited	1.0000	N/A
Not Covered	0.0000	0.0000

Table 5 SA Detox I/P

b. Copay Per Day

Copay Per Day	Factor
\$0	1.0000
\$25	0.9490
\$50	0.8990
\$100	0.8004
\$125	0.7491
\$150	0.6992
\$200	0.6036
\$225	0.5578
\$250	0.5134
\$300	0.4337
\$350	0.3619
\$400	0.2975
\$500	0.1737

Table 4 MH I/P

b1. Copay Per Day/Day Maximum (Adjustment to the b. Per Day Copay factors) (Used in Column [6])

Copay Per Day	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days
\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$25	1.0324	1.0269	1.0225	1.0189	1.0162	1.0140	1.0123	1.0109
\$50	1.0673	1.0559	1.0467	1.0392	1.0335	1.0291	1.0255	1.0225
\$100	1.1410	1.1161	1.0960	1.0799	1.0675	1.0580	1.0508	1.0448
\$125	1.1804	1.1479	1.1216	1.1020	1.0870	1.0753	1.0660	1.0582
\$150	1.2238	1.1829	1.1522	1.1276	1.1088	1.0942	1.0825	1.0727
\$200	1.3263	1.2677	1.2224	1.1963	1.1750	1.1572	1.1421	1.1288
\$225	1.3853	1.3181	1.2642	1.2242	1.1984	1.1830	1.1698	1.1589
\$250	1.4584	1.3789	1.3162	1.2644	1.2257	1.1968	1.1719	1.1520
\$300	1.6239	1.5147	1.4276	1.3584	1.3058	1.2648	1.2304	1.2018
\$350	1.7803	1.6362	1.5222	1.4301	1.3574	1.3017	1.2575	1.2209
\$400	1.9912	1.8022	1.6489	1.5240	1.4301	1.3614	1.3172	1.2800
\$500	2.7557	2.3949	2.1077	1.9303	1.7955	1.6902	1.6057	1.5348

Table 5 SA Detox I/P

b1. Copay Per Day/Day Maximum (Adjustment to the b. Per Day Copay factors) (Used in Column [6])

Copay Per Day	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days
\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$25	1.0289	1.0232	1.0189	1.0158	1.0134	1.0115	1.0099	1.0085
\$50	1.0602	1.0483	1.0393	1.0329	1.0279	1.0239	1.0206	1.0177
\$100	1.1332	1.1072	1.0876	1.0733	1.0624	1.0537	1.0466	1.0402
\$125	1.1825	1.1460	1.1201	1.1014	1.0865	1.0740	1.0637	1.0547
\$150	1.2326	1.1897	1.1543	1.1285	1.1096	1.0929	1.0789	1.0665
\$200	1.3542	1.2817	1.2277	1.1892	1.1596	1.1364	1.1173	1.1012
\$225	1.4224	1.3354	1.2707	1.2246	1.1902	1.1638	1.1390	1.1190
\$250	1.4992	1.3957	1.3189	1.2661	1.2227	1.1901	1.1632	1.1397
\$300	1.6678	1.5282	1.4195	1.3450	1.2884	1.2441	1.2078	1.1760
\$350	1.8734	1.6793	1.5372	1.4373	1.3616	1.3027	1.2601	1.2227
\$400	2.1268	1.8699	1.6785	1.5503	1.4511	1.3912	1.3357	1.2854
\$500	3.1619	2.6451	2.3980	2.0705	1.8970	1.7698	1.6641	1.5707

Table 5 SA Detox IP

c. Copay%	Factor
10%	0.8718
15%	0.8200
20%	0.7618
25%	0.7016
30%	0.6431
40%	0.5311
50%	0.4258

Table 5 SA Detox IP

d. Freqmax	IP SA Detox Factor	All IP MH & IP SA Combined Factor
Maximum	0.8382	0.8649
20 days/plan yr	0.8810	0.9294
30 days/cal yr	0.9149	0.9428
35 days/cal yr	0.9233	0.9584
40 days/plan yr	0.9435	0.9650
45 days/cal yr	0.9687	0.9795
50 days/cal yr	0.9445	0.9550
60 days/cal yr	0.9094	0.9384
90 days/cal yr	0.8705	0.9637
200 days/cal yr	1.0000	0.9986
12 days/cal yr	0.7478	N/A
14 days/cal yr	N/A	N/A
15 days/cal yr	0.7907	N/A
150 days/cal yr	1.0000	N/A
180 days/cal yr	1.0000	N/A
Age 0-18, 25 days per cal yr; Age 19+ 20 days per cal yr	0.8382	N/A
Age 0-18, 25 days per plan yr; Age 19+ 20 days per plan yr	N/A	N/A
28 days/cal yr	0.8741	N/A
Unlimited	1.0000	N/A

Table 5 SA Detox IP

e. Calendar Year Day Maximum	IP SA Detox Factor	All IP MH & IP SA Combined Factor
Maximum		
20 days/cal yr, 90 day max lifetime	N/A	N/A
3 episodes/lifetime, IP & OP combined	0.8553	N/A
30 days/cal yr - Alcohol Only	N/A	N/A
30 days/cal yr for Drug only, unlimited for Alcohol	0.9431	N/A
30 days/cal yr, 90 day max lifetime	N/A	N/A
40 days/cal yr, 90 day max lifetime	N/A	N/A
60 visits/cal yr, 120 visits/lifetime	N/A	N/A
4 admissions/lifetime, 7 day maximum/admission	0.9408	N/A
7 days/admission	0.8449	N/A

Table 6 SA Rehab IP

a. Per Confinement Copay	None
Copay	Factor
\$0	1.0000
\$50	0.9848
\$100	0.9697
\$125	0.9622
\$150	0.9547
\$200	0.9398
\$240	0.9279
\$250	0.9250
\$300	0.9103
\$350	0.8957
\$400	0.8811
\$450	0.8667
\$500	0.8524
\$600	0.8207
\$700	0.7895
\$750	0.7741
\$1,000	0.6992
\$1,250	0.6279
\$1,500	0.5599
\$2,000	0.4531
\$2,500	0.3775
\$3,000	0.3020
\$3,500	0.2285
\$4,000	0.1510

Table 6 SA Rehab IP

b. Copay Per Day	Factor
Per Day	Factor
\$0	1.0000
\$25	0.9587
\$50	0.9181
\$100	0.8374
\$125	0.7945
\$150	0.7526
\$200	0.6720
\$225	0.6332
\$250	0.5955
\$300	0.5291
\$350	0.4708
\$400	0.4211
\$500	0.3282

Table 6 SA Rehab IP

b1. Copay Per Day/Day Maximum (Adjustment to the b. Per Day Copay factors) (Used in Column (b))	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days
Copay Per Day	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor
\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$25	1.0232	1.0187	1.0152	1.0127	1.0108	1.0093	1.0080	1.0069
\$50	1.0478	1.0384	1.0313	1.0262	1.0222	1.0190	1.0164	1.0141
\$100	1.1041	1.0839	1.0685	1.0575	1.0490	1.0423	1.0367	1.0318
\$125	1.1405	1.1141	1.0941	1.0798	1.0682	1.0584	1.0503	1.0431
\$150	1.1796	1.1464	1.1201	1.1000	1.0846	1.0724	1.0623	1.0534
\$200	1.2672	1.2128	1.1721	1.1431	1.1208	1.1033	1.0889	1.0768
\$225	1.3131	1.2490	1.2012	1.1671	1.1418	1.1224	1.1036	1.0867
\$250	1.3631	1.2883	1.2326	1.1947	1.1626	1.1390	1.1194	1.1023
\$300	1.4606	1.3633	1.2893	1.2377	1.1963	1.1675	1.1422	1.1200
\$350	1.5606	1.4348	1.3422	1.2770	1.2274	1.1888	1.1523	1.1390
\$400	1.6566	1.5001	1.3857	1.3054	1.2353	1.2183	1.1853	1.1554
\$500	1.9071	1.6757	1.5310	1.4289	1.3562	1.3057	1.2637	1.2286

Table 6 SA Rehab IP

c. Copay%	Factor
10%	0.8718
15%	0.8095
20%	0.7439
25%	0.6807
30%	0.6196
40%	0.5043
50%	0.4052

Table 6 SA Rehab IP

d. Freqmax	IP SA Rehab Factor	All IP MH & IP SA Combined Factor
Maximum	0.7712	0.8649
20 days/plan yr	0.8317	0.9294
30 days/cal yr	0.8797	0.9428
35 days/cal yr	0.8916	0.9584
40 days/cal yr	0.9202	0.9650
45 days/cal yr	0.9557	0.9795
50 days/life	0.9318	0.9550
90 days/cal yr	0.9934	0.9884
90 days/life	0.9686	0.9637
200 days/cal yr	1.0000	0.9986
12 days/cal yr	N/A	N/A
14 days/cal yr	0.8916	N/A
15 days/cal yr	0.7040	N/A
150 days/cal yr	1.0000	N/A
180 days/cal yr	N/A	N/A
Age 0-18, 25 days per cal yr; Age 19+ 20 days per cal yr	0.7807	N/A
Age 0-18, 25 days per plan yr; Age 19+ 20 days per plan yr	0.7712	N/A
28 days/cal yr	0.8741	N/A
Unlimited	1.0000	N/A

Table 6 SA Rehab I/P

e. Calendar Year Day Maximum	IP SA Rehab Factor	All I/P MH & I/P SA Combined Factor
Maximum		
30 days/cal yr, 90 day maxlifetime	0.7704	N/A
3 episodes/lifetime, IP & OP combined	0.7953	N/A
30 days/cal yr - Alcohol Only	0.4337	N/A
30 days/cal yr for Drug only, unlimited for Alcohol	0.9195	N/A
30 days/cal yr, 90 day maxlifetime	0.8309	N/A
40 days/cal yr, 90 day maxlifetime	0.8907	N/A
60 visits/cal yr, 120 visits/lifetime	0.9366	N/A
4 admissions/lifetime, 7 day maximum/admission	N/A	N/A
7 days/admission	N/A	N/A

Table 6 SA Rehab I/P

f. MA specific	Factor
All Only	0.5200
All & Drug	1.0000

Table 7 Maternity I/P

a. Per Confinement Copay

Copay	None
\$0	1.0000
\$50	0.9888
\$100	0.9776
\$125	0.9721
\$150	0.9665
\$200	0.9585
\$240	0.9487
\$250	0.9445
\$300	0.9322
\$350	0.9200
\$400	0.9078
\$450	0.8958
\$500	0.8838
\$600	0.8600
\$700	0.8366
\$750	0.8251
\$1,000	0.7883
\$1,250	0.7286
\$1,500	0.6896
\$2,000	0.6137
\$2,500	0.5548
\$3,000	0.5048
\$3,500	0.4388
\$4,000	0.3778

Table 7 Maternity I/P

b. Copay Per Day

Copay Per Day	Factor
\$0	1.0000
\$25	0.9825
\$50	0.9651
\$100	0.9290
\$125	0.9099
\$150	0.8911
\$200	0.8538
\$225	0.8367
\$250	0.8176
\$300	0.7842
\$350	0.7531
\$400	0.7283
\$500	0.6795

Table 7 Maternity I/P

b1. Copay Per Day/Day Maximum (Adjustment to the b. Per Day Copay factors) (Used in Column (B))

Copay Per Day	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days
\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$25	1.0042	1.0030	1.0024	1.0021	1.0018	1.0016	1.0015	1.0014
\$50	1.0085	1.0060	1.0048	1.0041	1.0037	1.0033	1.0031	1.0029
\$100	1.0193	1.0138	1.0111	1.0095	1.0085	1.0076	1.0071	1.0068
\$125	1.0249	1.0174	1.0141	1.0121	1.0107	1.0097	1.0089	1.0083
\$150	1.0302	1.0211	1.0171	1.0146	1.0130	1.0117	1.0108	1.0101
\$200	1.0413	1.0288	1.0233	1.0200	1.0177	1.0160	1.0148	1.0137
\$225	1.0470	1.0338	1.0285	1.0227	1.0202	1.0182	1.0168	1.0156
\$250	1.0529	1.0389	1.0298	1.0255	1.0227	1.0205	1.0189	1.0176
\$300	1.0621	1.0424	1.0343	1.0298	1.0269	1.0242	1.0208	1.0196
\$350	1.0713	1.0471	1.0393	1.0317	1.0282	1.0272	1.0199	1.0185
\$400	1.0695	1.0454	1.0367	1.0314	1.0279	1.0252	1.0232	1.0216
\$500	1.0853	1.0595	1.0480	1.0412	1.0366	1.0330	1.0304	1.0283

Table 7 Maternity I/P

c. Copay%

Copay%	Factor
10%	0.8334
15%	0.7562
20%	0.6897
25%	0.6448
30%	0.5948
40%	0.5098
50%	0.4248

Table 8 Skilled Nursing Facility

a. Per Confinement Copay

Copay	None
\$0	1.0000
\$50	0.9938
\$100	0.9877
\$125	0.9846
\$150	0.9815
\$200	0.9754
\$240	0.9705
\$250	0.9693
\$300	0.9632
\$350	0.9571
\$400	0.9510
\$450	0.9449
\$500	0.9388
\$600	0.9189
\$700	0.8990
\$750	0.8891
\$1,000	0.8399
\$1,250	0.7913
\$1,500	0.7431
\$2,000	0.6485
\$2,500	0.6316
\$3,000	0.6147
\$3,500	0.5979
\$4,000	0.5810

Table 8 Skilled Nursing Facility

b. Copay Per Day

Copay Per Day	Factor
\$0	1.0000
\$25	0.9926
\$50	0.9846
\$100	0.9743
\$125	0.9611
\$150	0.9573
\$200	0.9506
\$225	0.9375
\$250	0.9345
\$300	0.9290
\$350	0.9212
\$400	0.9136
\$500	0.8970

Table 8 Skilled Nursing Facility

b1. Copay Per Day/Day Maximum (Adjustment to the b. Per Day Copay factors) (Used in Column (B))

Copay Per Day	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days
\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$25	1.0407	1.0381	1.0356	1.0334	1.0312	1.0294	1.0277	1.0261
\$50	1.1111	1.1054	1.1002	1.0953	1.0908	1.0868	1.0832	1.0798
\$100	1.3151	1.3016	1.2891	1.2767	1.2659	1.2432	1.2291	1.2159
\$125	1.4478	1.4292	1.4096	1.3798	1.3553	1.3337	1.3142	1.2961
\$150	1.4886	1.4605	1.4251	1.3920	1.3616	1.3349	1.3106	1.2884
\$200	1.5184	1.4657	1.4169	1.3712	1.3294	1.2928	1.2597	1.2290
\$225	1.5284	1.4681	1.4180	1.3600	1.3122	1.2703	1.2326	1.1976
\$250	1.5387	1.4703	1.4072	1.3482	1.2942	1.2470	1.2044	1.1650
\$300	1.5596	1.4744	1.3958	1.3226	1.2557	1.1972	1.1572	1.1480
\$350	1.5661	1.4584	1.3645	1.2772	1.1981	1.1851	1.1733	1.1623
\$400	1.5424	1.4242	1.3196	1.2223	1.2050	1.1999	1.1782	1.1636
\$500	1.5052	1.3630	1.2668	1.2424	1.2201	1.2007	1.1831	1.1669

Table 8 Skilled Nursing Facility

c. Copay%

Copay%	Factor
10%	0.7386
15%	0.6044
20%	0.5376
25%	0.4949
30%	0.4534
40%	0.3740
50%	0.3105

Table 8 Skilled Nursing Facility

d. Maximum Days

Maximum Days	Factor
30 days/cal yr	0.6732
60 days/cal yr	0.8232
90 days/cal yr	0.8851
100 days/cal yr	0.8958
120 days/cal yr	0.9135
200 days/cal yr	0.9562
240 days/cal yr	0.9695
Unlimited	1.0000

Table 9 Hospice I/P

a. Per Confinement Copay

All limits	Factor
All limits	1.0000

Table 10 Transplants

a. Per Confinement Copay

Copay	Factor
\$0	1.0000
\$50	0.9998
\$100	0.9996
\$125	0.9995
\$150	0.9995
\$200	0.9993
\$240	0.9991
\$250	0.9991
\$300	0.9989
\$350	0.9987
\$400	0.9985
\$450	0.9984
\$500	0.9982
\$550	0.9979
\$700	0.9974
\$750	0.9973
\$1,000	0.9964
\$1,250	0.9954
\$1,500	0.9945
\$2,000	0.9927
\$2,500	0.9909
\$3,000	0.9891
\$3,500	0.9872
\$4,000	0.9854

Table 10 Transplants

b. Copay Per Day

Copay Per Day	Factor
\$0	1.0000
\$25	0.9985
\$50	0.9969
\$100	0.9939
\$125	0.9923
\$150	0.9908
\$200	0.9877
\$225	0.9862
\$250	0.9846
\$300	0.9816
\$350	0.9785
\$400	0.9754
\$500	0.9693

Table 10 Transplants

b1. Copay Per Day/Day Maximum (Adjustment to the b. Per Day Copay factors) (Used in Column B6)

Copay Per Day	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days
\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$25	1.0013	1.0012	1.0011	1.0010	1.0010	1.0009	1.0008	1.0008
\$50	1.0025	1.0024	1.0022	1.0021	1.0021	1.0019	1.0018	1.0017
\$100	1.0051	1.0048	1.0044	1.0042	1.0042	1.0039	1.0036	1.0032
\$125	1.0064	1.0060	1.0056	1.0052	1.0049	1.0045	1.0043	1.0040
\$150	1.0077	1.0072	1.0067	1.0062	1.0058	1.0055	1.0051	1.0048
\$200	1.0103	1.0096	1.0089	1.0084	1.0079	1.0073	1.0069	1.0064
\$225	1.0116	1.0108	1.0101	1.0094	1.0088	1.0082	1.0077	1.0072
\$250	1.0129	1.0120	1.0112	1.0105	1.0098	1.0092	1.0086	1.0081
\$300	1.0155	1.0145	1.0135	1.0126	1.0118	1.0110	1.0103	1.0097
\$350	1.0181	1.0169	1.0158	1.0148	1.0138	1.0129	1.0121	1.0114
\$400	1.0208	1.0194	1.0181	1.0169	1.0158	1.0148	1.0139	1.0130
\$500	1.0262	1.0244	1.0228	1.0213	1.0199	1.0186	1.0175	1.0164

Table 10 Transplants

c. Copay%

Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 10 Transplants

d. Dollar Max / Coinsurance

Coins%	Maximum				
	No Coverage	\$10,000	\$25,000	\$50,000	Unlimited
Benefit Option	Factor	Factor	Factor	Factor	Factor
50%	0.0000	1.8736	1.6893	1.4432	1.0000
60%	0.0000	1.5615	1.4143	1.2427	1.0000
70%	0.0000	1.3389	1.2215	1.1085	1.0000
75%	0.0000	1.2500	1.1477	1.0632	1.0000
80%	0.0000	1.1723	1.0910	1.0345	1.0000
85%	0.0000	1.1057	1.0447	1.0189	1.0000
90%	0.0000	1.0492	1.0154	1.0049	1.0000
100%	0.0000	1.0000	1.0000	1.0000	1.0000

Table 10 Transplants

e. Benefit Limit/Maximum

Annual and Per Procedure Dollar Max	50%	60%	70%	75%	80%	85%	90%	100%
\$25,000	0.3107	0.2601	0.2240	0.2093	0.1964	0.1851	0.1749	0.1578
\$250,000	0.9558	0.9245	0.9021	0.8932	0.8853	0.8784	0.8723	0.8618
\$500,000	0.9932	0.9884	0.9817	0.9760	0.9709	0.9665	0.9626	0.9558
\$750,000	0.9991	0.9962	0.9941	0.9932	0.9914	0.9898	0.9884	0.9860
\$1,000,000	1.0000	0.9984	0.9983	0.9972	0.9962	0.9953	0.9945	0.9932

Per Lifetime Dollar Max	50%	60%	70%	75%	80%	85%	90%	100%
\$25,000	0.3061	0.2562	0.2208	0.2062	0.1935	0.1823	0.1723	0.1554
\$250,000	0.9415	0.9106	0.8886	0.8798	0.8720	0.8652	0.8592	0.8489
\$500,000	1.0000	0.9738	0.9670	0.9613	0.9584	0.9520	0.9481	0.9416
\$750,000	1.0000	1.0000	1.0000	1.0000	0.9785	0.9755	0.9736	0.9713
\$1,000,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000

Table 11 Bariatric Surgery

a. Per Confinement Deductible

Copay	Factor
\$0	1.0000
\$50	0.9943
\$100	0.9887
\$125	0.9859
\$150	0.9830
\$200	0.9774
\$240	0.9729
\$250	0.9718
\$300	0.9662
\$350	0.9606
\$400	0.9550
\$450	0.9495
\$500	0.9439
\$550	0.9386
\$700	0.9273
\$750	0.9232
\$1,000	0.9026
\$1,250	0.8822
\$1,500	0.8621
\$2,000	0.8223
\$2,500	0.7913
\$3,000	0.7603
\$3,500	0.7294
\$4,000	0.6984
Not Covered	0.0000

Table 11 Bariatric Surgery

b. Copay Per Day

Copay Per Day	Factor
\$0	1.0000
\$25	0.9918
\$50	0.9836
\$100	0.9673
\$125	0.9592
\$150	0.9511
\$200	0.9373
\$225	0.9312
\$250	0.9252
\$300	0.9133
\$350	0.9014
\$400	0.8895
\$500	0.8661

Table 11 Bariatric Surgery

b1. Copay Per Day/Day Maximum (Adjustment to the b. Per Day Copay factors) (Used in Column B6)

Copay Per Day	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days
\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$25	1.0020	1.0015	1.0012	1.0011	1.0009	1.0008	1.0008	1.0007
\$50	1.0041	1.0029	1.0024	1.0021	1.0019	1.0017	1.0015	1.0014
\$100	1.0082	1.0059	1.0049	1.0043	1.0038	1.0034	1.0031	1.0028
\$125	1.0103	1.0074	1.0061	1.0053	1.0047	1.0043	1.0039	1.0036
\$150	1.0124	1.0089	1.0074	1.0064	1.0057	1.0052	1.0047	1.0043
\$200	1.0144	1.0097	1.0076	1.0065	1.0058	1.0052	1.0048	1.0044
\$225	1.0145	1.0103	1.0085	1.0074	1.0065	1.0059	1.0054	1.0049
\$250	1.0159	1.0114	1.0095	1.0082	1.0073	1.0066	1.0060	1.0055
\$300	1.0192	1.0138	1.0115	1.0100	1.0088	1.0080	1.0073	1.0066
\$350	1.0226	1.0163	1.0135	1.0117	1.0104	1.0094	1.0086	1.0078
\$400	1.0261	1.0188	1.0160	1.0135	1.0119	1.0108	1.0099	1.0090
\$500	1.0331	1.0238	1.0197	1.0172	1.0152	1.0137	1.0125	1.0114

Table 11 Bariatric Surgery

All copay/admit/day	Mandate Benefit	Rider Benefit	Rider Benefit
	No Ben Max	No Ben Max	Ben Max
	0.1400	1.0000	1.0000

Table 11 Bariatric Surgery

c. Copay%	Factor
10%	0.8463
15%	0.7859
20%	0.7322
25%	0.6784
30%	0.6280
40%	0.5383
50%	0.4486

Table 12 Surgery (SPU)

a. Copay	Factor
\$0	1.0000
\$5	0.9961
\$10	0.9922
\$15	0.9883
\$20	0.9845
\$25	0.9806
\$30	0.9767
\$50	0.9613
\$75	0.9421
\$100	0.9229
\$125	0.8976
\$150	0.8726
\$200	0.8235
\$250	0.7757
\$300	0.7292
\$350	0.6840
\$400	0.6400
\$450	0.5974
\$500	0.5560
\$550	0.5211
\$600	0.4870
\$650	0.4537
\$700	0.4210
\$750	0.3942

Table 13 Surg - Freestanding facility

a. Copay	Factor
\$0	1.0000
\$5	0.9953
\$10	0.9906
\$15	0.9858
\$20	0.9811
\$25	0.9764
\$30	0.9717
\$50	0.9530
\$75	0.9296
\$100	0.9064
\$125	0.8771
\$150	0.8482
\$175	0.8199
\$200	0.7917
\$250	0.7367
\$300	0.6833
\$350	0.6316
\$400	0.5814
\$450	0.5328
\$500	0.4858
\$550	0.4400
\$600	0.4050
\$650	0.3690
\$700	0.3278
\$750	0.2944

Table 11 Bariatric Surgery

d. Maximum Benefit	Rider with Benefit Maximum								Mandated or Rider Benefit No Maximum
	50%	40%	30%	25%	20%	15%	10%	Copay/adm/day	
\$10,000 per procedure	0.8189	0.7430	0.6802	0.6470	0.6180	0.5908	0.5635	0.7300	1,0000
\$1,000,000 per lifetime	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000

Table 12 Surgery (SPU)

b. Copay%	Factor
10%	0.8866
15%	0.8193
20%	0.7542
25%	0.6912
30%	0.6303
40%	0.5148
50%	0.4127

Table 13 Surg - Freestanding facility

b. Copay%	Factor
10%	0.8915
15%	0.8301
20%	0.7677
25%	0.7070
30%	0.6480
40%	0.5351
50%	0.4289

Table 13 Surg - Freestanding facility

c. Benefit Maximum	50% Factor	60% Factor	70% Factor	75% Factor	80% Factor	90% Factor	100% Factor
Maximum							
2000 OON benefit maximum added to ASC (freestanding ambulatory Surgical center) per CY or PY (works like DME maximum). Includes associated ancillary services.	0.7598	0.7111	0.6734	0.6546	0.6370	0.6034	0.5734

Table 14 Bariatric O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$5	0.9982
\$10	0.9963
\$15	0.9945
\$20	0.9927
\$25	0.9909
\$30	0.9890
\$50	0.9817
\$75	0.9726
\$100	0.9634
\$125	0.9543
\$150	0.9451
\$200	0.9268
\$250	0.9086
\$300	0.8905
\$350	0.8720
\$400	0.8537
\$450	0.8355
\$500	0.8172
\$550	0.7990
\$600	0.7807
\$650	0.7624
\$700	0.7442
\$750	0.7260
Not Covered	0.0000

Table 14 Bariatric O/P

b. Copay%	
Copay%	Factor
10%	0.8995
15%	0.8493
20%	0.7991
25%	0.7489
30%	0.6988
40%	0.5987
50%	0.4986

Table 14 Bariatric O/P

	Mandate Benefit	Rider Benefit	Rider Benefit
	No Ben Max	No Ben Max	Ben Max
All copay/admitted	0.1400	1.0000	1.0000

Table 14 Bariatric O/P

c. Maximum Benefit	Rider with Benefit Maximum							Mandated or
	50%	40%	30%	25%	20%	15%	10%	Rider Benefit
Copay %								No Maximum
\$10,000 per procedure	0.8189	0.7430	0.6802	0.6470	0.6180	0.5908	0.5635	1.0000
\$1,000,000 per lifetime	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000

Table 15 Hospice O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$5	0.9506
\$10	0.9024
\$15	0.8555
\$20	0.8099
\$25	0.7655
\$30	0.7223
\$35	0.6804
\$40	0.6397
\$45	0.6170
\$50	0.5945
\$55	0.5722
\$60	0.5502
Not Covered	0.0000

Table 15 Hospice O/P

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 15 Hospice O/P

c. Benefit Maximum	
Maximum	Factor
\$5,000 Lifetime	0.5388
\$9,100 per benefit period of 3 months of continuous care, 3 benefit periods per lifetime. Bereavement Care limited to separate \$1,500 maximum during 12 months following death	0.7162
\$10,000 Lifetime	0.7072
\$10,000 Combined IP, OP & NF	0.7071
Inpatient and Outpatient Combined	1.0000
N/A	1.0000
Unlimited	1.0000

Table 16 Other Facility O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9987
\$3	0.9981
\$5	0.9968
\$10	0.9935
\$15	0.9903
\$20	0.9871
\$25	0.9839
\$30	0.9806
\$35	0.9774
\$40	0.9742
\$45	0.9710
\$50	0.9677
\$55	0.9645
\$60	0.9613
\$65	0.9581
\$70	0.9548
\$75	0.9516

Table 16 Other Facility O/P

b. Copay%	
Copay%	Factor
10%	0.9500
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 17 Other Rehab O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9873
\$3	0.9809
\$5	0.9683
\$10	0.9370
\$15	0.9062
\$20	0.8759
\$25	0.8460
\$30	0.8166
\$35	0.7877
\$40	0.7592
\$45	0.7312
\$50	0.7037
\$55	0.6766
\$60	0.6500
\$65	0.6239
\$70	0.5982
\$75	0.5730

Table 17 Other Rehab O/P

b. Copay%	
Copay%	Factor
10%	0.8587
15%	0.7915
20%	0.7265
25%	0.6639
30%	0.6036
40%	0.4898
50%	0.3852

Table 18 Physical Therapy O/P

a. Copay	
Copay	Factor
\$0	1.000
\$2	0.9752
\$3	0.9630
\$5	0.9386
\$10	0.8789
\$15	0.8210
\$20	0.7647
\$25	0.7102
\$30	0.6574
\$35	0.6064
\$40	0.5570
\$45	0.5094
\$50	0.4635
\$55	0.4193
\$60	0.3768
\$65	0.3361
\$70	0.2970
\$75	0.2597

Table 18 Physical Therapy O/P

b. Copay%	
Copay%	Factor
10%	0.8888
15%	0.8341
20%	0.7801
25%	0.7267
30%	0.6739
40%	0.5701
50%	0.4689

Table 18 Physical Therapy O/P

c. Maximum Visits	PT/OT/ST	PT/OT	PT/OT/ST
	Combined	Combined	/Chiro comb
Maximum	Factor	Factor	Factor
20 Visits Combined	0.7001	0.7091	0.6754
25 Visits Combined	0.7493	0.7568	0.7229
30 Visits Combined	0.8007	0.8067	0.7727
40 Visits Combined	0.8567	0.8610	N/A
45 Visits Combined	N/A	0.8672	N/A
60 Visits Combined	0.8869	0.8903	0.8617
120 Visits Combined	0.9837	N/A	N/A
20 continuous days/incident	0.6511	0.6594	N/A
25 continuous days/incident	0.6968	0.7038	N/A
30 continuous days/incident	0.7446	0.7502	N/A
60 continuous days/incident	0.8248	0.8279	N/A
90 continuous days/incident	0.8892	0.8904	N/A
120 continuous days/incident	0.9148	N/A	N/A
20 OT/PT visits & 20 ST visits	0.6951	N/A	N/A
25 OT/PT visits & 20 ST visits	0.7263	N/A	N/A
30 OT/PT visits & 20 ST visits	0.7535	N/A	N/A
20 OT/PT visits & 25 ST visits	0.7013	N/A	N/A
25 OT/PT visits & 25 ST visits	0.7445	N/A	N/A
30 OT/PT visits & 25 ST visits	0.7897	N/A	N/A
20 OT/PT visits & 30 ST visits	0.7063	N/A	N/A
25 OT/PT visits & 30 ST visits	0.7495	N/A	N/A
30 OT/PT visits & 30 ST visits	0.7947	N/A	N/A
60 OT/PT visits & 30 ST visits	0.8705	N/A	N/A
20 OT/PT visits & 60 ST visits	0.7228	N/A	N/A
25 OT/PT visits & 60 ST visits	0.7661	N/A	N/A
30 OT/PT visits & 60 ST visits	0.8113	N/A	N/A
45 OT/PT visits & 60 ST visits	0.8661	N/A	N/A
60 OT/PT visits & 60 ST visits	0.8870	N/A	N/A
20 OT/PT visits & unlimited ST visits	0.7263	N/A	N/A
25 OT/PT visits & unlimited ST visits	0.7796	N/A	N/A
30 OT/PT visits & unlimited ST visits	0.8248	N/A	N/A
60 OT/PT visits & unlimited ST visits	0.9005	N/A	N/A
20 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.6876
20 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.6713
20 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.6744
20 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.6944
25 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.7125
25 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.7164
25 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.7194
25 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.7294
20 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.6925
25 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.7375
30 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.7847
60 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.8650
30 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.7598
30 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.7635
30 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.7665
30 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.7765
45 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.8360
60 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.8441
60 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.8478
60 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.8508
60 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.8608
PTOT 60 visits/cal yr/ST 20 visits/cal yr	0.8593	N/A	N/A
PTOT 60 visits/cal yr/ST 25 visits/cal yr	0.8655	N/A	N/A
60 visits per year. Additional 20 separate PT, 20 separate OT visits for child up to age 5 for congenital defect or birth abnormality, other than cleft lip/palate, without regard to improvement of body function	0.9914	N/A	N/A
PTOT unlimited/ST 20 visits/cal yr	0.9587	N/A	N/A
PTOT unlimited/ST 25 visits/cal yr	0.9649	N/A	N/A
PTOT unlimited/ST 30 visits/cal yr	0.9699	N/A	N/A
PTOT unlimited/ST 60 visits/cal yr	0.9865	N/A	N/A
PTOT unlimited/ST unlimited visits/cal yr	1.0000	N/A	N/A
PTOT unlimited/ST unlimited visits/cal yr, covers services rendered by a speech therapist for developmental and maintenance therapy when under direction of physician	1.0000	N/A	N/A
Unlimited	1.0000	1.0000	1.0000

Table 19 Occupational Therapy O/P

a. Ccopy	Factor
\$0	1.0000
\$2	0.9835
\$3	0.9752
\$5	0.9589
\$10	0.9186
\$15	0.8793
\$20	0.8407
\$25	0.8031
\$30	0.7663
\$35	0.7303
\$40	0.6953
\$45	0.6611
\$50	0.6277
\$55	0.5952
\$60	0.5636
\$65	0.5328
\$70	0.5030
\$75	0.4739

Table 19 Occupational Therapy O/P

b. Ccopy%	Factor
10%	0.8777
15%	0.8184
20%	0.7603
25%	0.7035
30%	0.6479
40%	0.5404
50%	0.4380

Table 19 Occupational Therapy O/P

e. Maximum Visits	PT/OT/ST Combined	PT/OT Combined	PT/OT/ST /Chiro comb
Maximum	Factor	Factor	Factor
20 Visits Combined	0.7001	0.7091	0.6754
25 Visits Combined	0.7493	0.7568	0.7229
30 Visits Combined	0.8007	0.8067	0.7727
40 Visits Combined	0.8567	0.8610	N/A
45 Visits Combined	N/A	0.8672	N/A
60 Visits Combined	0.8869	0.8903	0.8617
120 Visits Combined	0.9837	N/A	N/A
20 continuous days/incident	0.6511	0.6594	N/A
25 continuous days/incident	0.6968	0.7038	N/A
30 continuous days/incident	0.7446	0.7502	N/A
60 continuous days/incident	0.8248	0.8279	N/A
90 continuous days/incident	0.8892	0.8904	N/A
120 continuous days/incident	0.9148	N/A	N/A
20 OT/PT visits & 20 ST visits	0.6951	N/A	N/A
25 OT/PT visits & 20 ST visits	0.7382	N/A	N/A
30 OT/PT visits & 20 ST visits	0.7835	N/A	N/A
20 OT/PT visits & 25 ST visits	0.7013	N/A	N/A
25 OT/PT visits & 25 ST visits	0.7445	N/A	N/A
30 OT/PT visits & 25 ST visits	0.7897	N/A	N/A
20 OT/PT visits & 30 ST visits	0.7063	N/A	N/A
25 OT/PT visits & 30 ST visits	0.7495	N/A	N/A
30 OT/PT visits & 30 ST visits	0.7947	N/A	N/A
60 OT/PT visits & 30 ST visits	0.8705	N/A	N/A
20 OT/PT visits & 60 ST visits	0.7228	N/A	N/A
25 OT/PT visits & 60 ST visits	0.7661	N/A	N/A
30 OT/PT visits & 60 ST visits	0.8113	N/A	N/A
45 OT/PT visits & 60 ST visits	0.8661	N/A	N/A
60 OT/PT visits & 60 ST visits	0.8870	N/A	N/A
20 OT/PT visits & unlimited ST visits	0.7363	N/A	N/A
25 OT/PT visits & unlimited ST visits	0.7796	N/A	N/A
30 OT/PT visits & unlimited ST visits	0.8248	N/A	N/A
60 OT/PT visits & unlimited ST visits	0.9005	N/A	N/A
20 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.6876
20 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.6713
20 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.6744
20 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.6944
25 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.7126
25 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.7164
25 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.7194
25 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.7294
20 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.6925
25 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.7375
30 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.7847
60 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.8690
30 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.7598
30 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.7635
30 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.7665
30 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.7785
45 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.8360
60 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.8441
60 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.8476
60 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.8568
60 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.8608
PTOT 60 visits/cal yr/ST 20 visits/cal yr	0.8593	N/A	N/A
PTOT 60 visits/cal yr/ST 25 visits/cal yr	0.8655	N/A	N/A
60 visits per year. Additional 20 separate PT, 20 separate OT vists for child up to age 5 for congenital defect or birth abnormality, other than cleft lip/palate without regard to improvement of body function	0.8914	N/A	N/A
PTOT unlimited/ST 20 visits/cal yr	0.9587	N/A	N/A
PTOT unlimited/ST 25 visits/cal yr	0.9649	N/A	N/A
PTOT unlimited/ST 30 visits/cal yr	0.9699	N/A	N/A
PTOT unlimited/ST 60 visits/cal yr	0.9865	N/A	N/A
PTOT unlimited/ST unlimited visits/cal yr	1.0000	N/A	N/A
PTOT unlimited/ST unlimited visits/cal yr, covers services rendered by a speech therapist for developmental and maintenance therapy when under direction of physician	1.0000	N/A	N/A
Unlimited	1.0000	1.0000	1.0000

Table 20 Speech Therapy O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9855
\$3	0.9782
\$5	0.9638
\$10	0.9283
\$15	0.8935
\$20	0.8593
\$25	0.8257
\$30	0.7928
\$35	0.7606
\$40	0.7290
\$45	0.6981
\$50	0.6678
\$55	0.6381
\$60	0.6092
\$65	0.5809
\$70	0.5532
\$75	0.5262

Table 20 Speech Therapy O/P

b. Copay%	
Copay%	Factor
10%	0.8705
15%	0.8082
20%	0.7476
25%	0.6886
30%	0.6312
40%	0.5214
50%	0.4181

Table 20 Speech Therapy O/P

c. Maximum Visits	PT/OT/ST	PT/OT	PT/OT/ST
	Combined Factor	Combined Factor	/Chiro comb Factor
Maximum			
20 Visits Combined	0.7001	0.7091	0.6754
25 Visits Combined	0.7493	0.7568	0.7229
30 Visits Combined	0.8007	0.8067	0.7727
40 Visits Combined	0.8567	0.8610	N/A
45 Visits Combined	N/A	0.8672	N/A
60 Visits Combined	0.8869	0.8903	0.8617
120 Visits Combined	0.9837	N/A	N/A
20 continuous days/incident	0.6511	0.6594	N/A
25 continuous days/incident	0.6968	0.7038	N/A
30 continuous days/incident	0.7446	0.7502	N/A
60 continuous days/incident	0.8248	0.8279	N/A
90 continuous days/incident	0.8892	0.8904	N/A
120 continuous days/incident	0.9148	N/A	N/A
20 OT/PT visits & 20 ST visits	0.6951	N/A	N/A
25 OT/PT visits & 20 ST visits	0.7393	N/A	N/A
30 OT/PT visits & 20 ST visits	0.7836	N/A	N/A
20 OT/PT visits & 25 ST visits	0.7013	N/A	N/A
25 OT/PT visits & 25 ST visits	0.7445	N/A	N/A
30 OT/PT visits & 25 ST visits	0.7897	N/A	N/A
20 OT/PT visits & 30 ST visits	0.7063	N/A	N/A
25 OT/PT visits & 30 ST visits	0.7495	N/A	N/A
30 OT/PT visits & 30 ST visits	0.7947	N/A	N/A
60 OT/PT visits & 30 ST visits	0.8705	N/A	N/A
20 OT/PT visits & 60 ST visits	0.7228	N/A	N/A
25 OT/PT visits & 60 ST visits	0.7661	N/A	N/A
30 OT/PT visits & 60 ST visits	0.8113	N/A	N/A
45 OT/PT visits & 60 ST visits	0.8661	N/A	N/A
60 OT/PT visits & 60 ST visits	0.8870	N/A	N/A
20 OT/PT visits & unlimited ST visits	0.7363	N/A	N/A
25 OT/PT visits & unlimited ST visits	0.7796	N/A	N/A
30 OT/PT visits & unlimited ST visits	0.8248	N/A	N/A
60 OT/PT visits & unlimited ST visits	0.9005	N/A	N/A
20 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.6676
20 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.6713
20 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.6744
20 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.6844
25 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.7126
25 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.7164
25 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.7194
25 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.7294
20 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.6925
25 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.7375
30 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.7847
60 Visits OT/PT/Chiro & unlimited ST	N/A	N/A	0.8690
30 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.7598
30 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.7635
30 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.7665
30 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.7765
45 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.8360
60 Visits OT/PT/Chiro & 20 ST	N/A	N/A	0.8441
60 Visits OT/PT/Chiro & 25 ST	N/A	N/A	0.8478
60 Visits OT/PT/Chiro & 30 ST	N/A	N/A	0.8508
60 Visits OT/PT/Chiro & 60 ST	N/A	N/A	0.8608
PTOT 60 visits/cal yr/ST 20 visits/cal yr	0.8593	N/A	N/A
PTOT 60 visits/cal yr/ST 25 visits/cal yr	0.8655	N/A	N/A
60 visits per year. Additional 20 separate PT, 20 separate OT visits for child up to age 5 for congenital defect or birth abnormality, other than cleft lip/palate, without regard to improvement of body function	0.9914	N/A	N/A
PTOT unlimited/ST 20 visits/cal yr	0.9587	N/A	N/A
PTOT unlimited/ST 25 visits/cal yr	0.9649	N/A	N/A
PTOT unlimited/ST 30 visits/cal yr	0.9699	N/A	N/A
PTOT unlimited/ST 60 visits/cal yr	0.9865	N/A	N/A
PTOT unlimited/ST unlimited visits/cal yr	1.0000	N/A	N/A
PTOT unlimited/ST unlimited visits/cal yr, covers services rendered by a speech therapist for developmental and maintenance therapy when under direction of physician	1.0000	N/A	N/A
Unlimited	1.0000	1.0000	1.0000

Table 20 Speech Therapy O/P

d. Additional PDD coverage	Factor
Copay	1.0035
Covered	1.0000
Not covered	1.0000
Unlimited	1.0035
Covered to age 21, age 21 and over not covered	1.0035
Covered to age 18, \$36,000 calendar year maximum combined with ABA and Behavioral Therapy, and \$200,000 lifetime maximum combined with ABA and Behavioral Therapy. Age 18 and over, no coverage.	1.0035
Covered to age 21, \$38,527 calendar year maximum combined with Behavioral Therapy and Applied Behavioral Analysis, once calendar year maximum has been met 20 additional Speech Therapy visits for Autism Spectrum Disorder. Age 21 and over, no coverage.	1.0045
Covered to age 17, \$36,000 calendar year maximum combined with ABA and Behavioral Therapy and \$144,000 lifetime maximum combined with ABA and Behavioral Therapy. Age 17 and over, no coverage.	1.0035
Covered to age 19, combined with short term rehabilitation. Age 19 and over, no coverage.	1.0035
Covered to age 19, \$40,000 calendar year maximum. Age 19 and over, no coverage.	1.0035
Covered to age 9, \$50,000 calendar year maximum combined with ABA and Behavioral Therapy. Age 9 to 19, \$20,000 calendar year maximum combined with ABA and Behavioral Therapy. Age 19 and over, no coverage.	1.0035
Covered to age 21, combined with short term rehabilitation. Age 21 and over, no coverage.	1.0035
Covered to age 22, \$36,000 calendar year maximum combined with Behavioral Therapy and Applied Behavioral Analysis and \$200,000 lifetime maximum combined with Behavioral Therapy and Applied Behavioral Analysis. Age 22 and over, no coverage.	1.0035
Covered to age 22, combined with Short Term Rehabilitation. Age 22 and over, no coverage.	1.0035
Covered to age 18, combined with short term rehabilitation. Over age 18, no coverage.	1.0035
Covered to age 16, combined with Short Term Rehabilitation. Age 16 and over, no coverage.	1.0033
Covered to age 10, covered. Age 10 and over, no coverage.	1.0027
Covered to age 12, combined with Short Term Rehabilitation. Age 12 and over, no coverage.	1.0029
Covered to age 21 covered, age 21 and over no coverage.	1.0035
Covered to age 19 unlimited visits calendar year maximum for PT/OT, and 20 VISITS calendar year max FOR Speech Therapy, age 19 and over, 20 VISITS calendar year max for Speech Therapy.	1.0098

Table 21 Chiro/Subluxation

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9622
\$3	0.9435
\$5	0.9065
\$10	0.8185
\$15	0.7301
\$20	0.6471
\$25	0.5678
\$30	0.4871
\$35	0.4111
\$40	0.3388
\$45	0.2732
\$50	0.2114
\$55	0.1591
\$60	0.1095
\$65	0.0598
\$70	0.0128
\$75	0.0000
Not Covered	0.0000

Table 21 Chiro/Subluxation

b. Copay%	
Copay%	Factor
10%	0.8877
15%	0.8325
20%	0.7781
25%	0.7243
30%	0.6712
40%	0.5811
50%	0.4857

Table 21 Chiro/Subluxation

c. Maximum Visits	Chiro Only	PT/OT/ST /Chiro Comb.	PT/OT /Chiro Comb.
	Factor	Factor	Factor
Maximum	0.9967	N/A	N/A
10 visits	0.6547	N/A	N/A
12 visits	0.7238	N/A	N/A
15 visits	0.8067	0.6754	0.6741
20 visits	0.8582	N/A	N/A
24 visits	0.8668	0.7229	0.7218
25 visits	0.8739	N/A	N/A
28 visits	0.9003	0.7727	0.7718
30 visits	0.9248	N/A	N/A
35 visits	0.9277	N/A	N/A
40 visits	0.9423	N/A	N/A
45 visits	0.9512	N/A	N/A
50 visits	0.9569	N/A	N/A
60 visits	0.9632	0.8617	N/A
90 visits	0.9736	N/A	N/A
Unlimited	1.0000	1.0000	1.0000

Table 21 Chiro/Subluxation

d. Dollar Max	\$1,000	Unlimited
	Factor	Factor
10%	0.6298	1.0000
15%	0.6468	1.0000
20%	0.6647	1.0000
25%	0.6832	1.0000
30%	0.7025	1.0000
40%	0.7451	1.0000
50%	0.7930	1.0000

Table 22 Diagnostic X-ray Hosp O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9972
\$3	0.9959
\$5	0.9931
\$10	0.9862
\$15	0.9794
\$20	0.9725
\$25	0.9656
\$30	0.9587
\$35	0.9518
\$40	0.9449
\$45	0.9381
\$50	0.9312
\$55	0.9223
\$60	0.9135
\$65	0.9047
\$70	0.8960
\$75	0.8873

Table 22 Diagnostic X-ray Hosp O/P

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.7972
25%	0.7428
30%	0.6890
40%	0.5831
50%	0.4798

Table 23 Diagnostic X-ray Non-Hosp O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9873
\$3	0.9810
\$5	0.9683
\$10	0.9365
\$15	0.9048
\$20	0.8731
\$25	0.8413
\$30	0.8096
\$35	0.7779
\$40	0.7461
\$45	0.7144
\$50	0.6827
\$55	0.6498
\$60	0.6166
\$65	0.5837
\$70	0.5510
\$75	0.5185

Table 23 Diagnostic X-ray Non-Hosp O/P

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 24 Diagnostic X-ray NF

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9964
\$3	0.9946
\$5	0.9910
\$10	0.9820
\$15	0.9730
\$20	0.9640
\$25	0.9550
\$30	0.9461
\$35	0.9371
\$40	0.9281
\$45	0.9191
\$50	0.9101
\$55	0.8992
\$60	0.8883
\$65	0.8775
\$70	0.8667
\$75	0.8560

Table 24 Diagnostic X-ray NF

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 25 Diag. X-ray-Complex Imaging Hosp O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9990
\$3	0.9985
\$5	0.9975
\$10	0.9950
\$15	0.9924
\$20	0.9899
\$25	0.9874
\$30	0.9849
\$35	0.9823
\$40	0.9798
\$45	0.9773
\$50	0.9748
\$55	0.9702
\$60	0.9656
\$65	0.9610
\$70	0.9565
\$75	0.9519
\$100	0.9294
\$125	0.9071
\$150	0.8851
\$175	0.8609
\$200	0.8370
\$250	0.7904
\$300	0.7450
\$350	0.7030
\$400	0.6611
\$450	0.6191
\$500	0.5771

Table 25 Diag. X-ray-Complex Imaging Hosp O/P

b. Copay%	
Copay%	Factor
10%	0.8813
15%	0.8145
20%	0.7457
25%	0.6794
30%	0.6157
40%	0.4993
50%	0.3873

Table 26 Diag. X-ray-Compl Imag Non-Hosp O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9964
\$3	0.9946
\$5	0.9909
\$10	0.9819
\$15	0.9728
\$20	0.9638
\$25	0.9547
\$30	0.9457
\$35	0.9366
\$40	0.9276
\$45	0.9185
\$50	0.9094
\$55	0.8995
\$60	0.8897
\$65	0.8797
\$70	0.8698
\$75	0.8599
\$100	0.8015
\$125	0.7490
\$150	0.6974
\$175	0.6460
\$200	0.5938
\$250	0.4950
\$300	0.4010
\$350	0.3190
\$400	0.2369
\$450	0.1549
\$500	0.0729

Table 28 Diagnostic Lab Hosp O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9986
\$3	0.9968
\$5	0.9911
\$10	0.9882
\$15	0.9873
\$20	0.9864
\$25	0.9855
\$30	0.9845
\$35	0.9836
\$40	0.9827
\$45	0.9918
\$50	0.9909
\$55	0.9900
\$60	0.9891
\$65	0.9882
\$70	0.9873
\$75	0.9864

Table 30 Diagnostic Lab NF

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9986
\$3	0.9980
\$5	0.9966
\$10	0.9932
\$15	0.9898
\$20	0.9864
\$25	0.9830
\$30	0.9796
\$35	0.9762
\$40	0.9728
\$45	0.9694
\$50	0.9660
\$55	0.9626
\$60	0.9592
\$65	0.9558
\$70	0.9524
\$75	0.9490

Table 32 Diagnostic OP facility other

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9977
\$3	0.9966
\$5	0.9944
\$10	0.9887
\$15	0.9831
\$20	0.9774
\$25	0.9718
\$30	0.9661
\$35	0.9605
\$40	0.9548
\$45	0.9492
\$50	0.9435
\$55	0.9379
\$60	0.9323
\$65	0.9267
\$70	0.9212
\$75	0.9056

Table 26 Diag. X-ray-Compl Imag Non-Hosp O/P

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.7982
25%	0.7439
30%	0.6903
40%	0.5846
50%	0.4813

Table 28 Diagnostic Lab Hosp O/P

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 30 Diagnostic Lab NF

b. Copay%	
Copay%	Factor
10%	0.8000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 32 Diagnostic OP facility other

b. Copay%	
Copay%	Factor
10%	0.8000
15%	0.8431
20%	0.7857
25%	0.7293
30%	0.6738
40%	0.5637
50%	0.4676

Table 27 Diag. X-ray-Complex Imaging NF

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9980
\$3	0.9970
\$5	0.9950
\$10	0.9900
\$15	0.9850
\$20	0.9800
\$25	0.9750
\$30	0.9700
\$35	0.9650
\$40	0.9600
\$45	0.9550
\$50	0.9500
\$55	0.9430
\$60	0.9360
\$65	0.9291
\$70	0.9221
\$75	0.9152
\$100	0.8810
\$125	0.8472
\$150	0.8140
\$175	0.7792
\$200	0.7450
\$250	0.6785
\$300	0.6148
\$350	0.5576
\$400	0.5005
\$450	0.4433
\$500	0.3862

Table 29 Diagnostic Lab Non-Hosp O/P

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9990
\$3	0.9985
\$5	0.9975
\$10	0.9950
\$15	0.9925
\$20	0.9900
\$25	0.9874
\$30	0.9849
\$35	0.9824
\$40	0.9799
\$45	0.9774
\$50	0.9749
\$55	0.9724
\$60	0.9699
\$65	0.9673
\$70	0.9648
\$75	0.9623

Table 31 Diagnostic Phys Other

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9962
\$3	0.9942
\$5	0.9904
\$10	0.9808
\$15	0.9711
\$20	0.9615
\$25	0.9519
\$30	0.9423
\$35	0.9326
\$40	0.9230
\$45	0.9134
\$50	0.9038
\$55	0.8923
\$60	0.8808
\$65	0.8693
\$70	0.8580
\$75	0.8466

Table 33 Ambulance

a. Copay	
Copay	Factor
\$0	1.0000
\$5	0.9912
\$10	0.9824
\$15	0.9736
\$20	0.9649
\$25	0.9561
\$30	0.9473
\$35	0.9386
\$40	0.9298
\$45	0.9211
\$50	0.9124
\$60	0.8875
\$75	0.8503
\$100	0.7885
\$110	0.7474
\$125	0.7289
\$150	0.6656
\$175	0.6229
\$200	0.5804

Table 27 Diag. X-ray-Complex Imaging NF

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.7986
25%	0.7444
30%	0.6908
40%	0.5852
50%	0.4820

Table 29 Diagnostic Lab Non-Hosp O/P

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 31 Diagnostic Phys Other

b. Copay%	
Copay%	Factor
10%	0.8000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 33 Ambulance

b. Copay%	
Copay%	Factor
10%	0.8452
15%	0.7696
20%	0.6892
25%	0.6132
30%	0.5481
40%	0.4307
50%	0.3106

Tables 34 ER OP & 36 UC OP

UC Copay	ER Copay										
	\$0	\$5	\$10	\$15	\$20	\$25	\$30	\$35	\$40	\$45	\$50
N/A	1.0000	0.9921	0.9843	0.9764	0.9685	0.9606	0.9528	0.9449	0.9370	0.9291	0.9213
\$0	1.0000	0.9921	0.9801	0.9699	0.9562	0.9482	0.9401	0.9320	0.9241	0.9161	0.9082
\$5	1.0000	0.9921	0.9843	0.9722	0.9620	0.9483	0.9403	0.9322	0.9241	0.9161	0.9082
\$10	1.0044	0.9921	0.9843	0.9764	0.9643	0.9541	0.9404	0.9324	0.9243	0.9161	0.9082
\$15	1.0089	0.9965	0.9843	0.9764	0.9685	0.9564	0.9463	0.9325	0.9245	0.9163	0.9083
\$20	1.0134	0.9990	0.9888	0.9764	0.9685	0.9606	0.9486	0.9383	0.9246	0.9165	0.9085
\$25	1.0138	1.0056	0.9972	0.9809	0.9685	0.9606	0.9528	0.9407	0.9304	0.9186	0.9087
\$30	1.0138	1.0058	0.9978	0.9833	0.9730	0.9606	0.9528	0.9449	0.9328	0.9225	0.9126
\$35	1.0140	1.0060	0.9980	0.9888	0.9784	0.9651	0.9558	0.9449	0.9370	0.9248	0.9147
\$40	1.0278	1.0062	0.9982	0.9901	0.9821	0.9675	0.9573	0.9449	0.9370	0.9291	0.9170
\$45	1.0281	1.0200	0.9984	0.9903	0.9823	0.9742	0.9588	0.9494	0.9370	0.9291	0.9213
\$50	1.0284	1.0203	1.0123	0.9905	0.9825	0.9744	0.9664	0.9519	0.9415	0.9291	0.9213
\$55	1.0359	1.0208	1.0126	1.0045	0.9827	0.9746	0.9666	0.9586	0.9440	0.9336	0.9213
\$60	1.0437	1.0281	1.0129	1.0048	0.9827	0.9748	0.9668	0.9588	0.9507	0.9361	0.9258
\$75	1.0475	1.0287	1.0359	1.0204	1.0049	0.9899	0.9755	0.9656	0.9528	0.9426	0.9325
\$80	1.0481	1.0422	1.0363	1.0282	1.0126	0.9971	0.9819	0.9737	0.9656	0.9430	0.9351
\$85	1.0486	1.0427	1.0368	1.0286	1.0204	1.0048	0.9894	0.9741	0.9659	0.9578	0.9353
\$90	1.0491	1.0432	1.0373	1.0291	1.0208	1.0126	0.9971	0.9817	0.9663	0.9581	0.9501
\$95	1.0497	1.0437	1.0378	1.0296	1.0213	1.0130	1.0049	0.9893	0.9739	0.9585	0.9504
\$100	1.0503	1.0443	1.0383	1.0301	1.0218	1.0135	1.0053	0.9972	0.9815	0.9661	0.9508
\$105	1.0509	1.0449	1.0389	1.0306	1.0223	1.0140	1.0058	0.9976	0.9819	0.9737	0.9585
\$110	1.0514	1.0454	1.0394	1.0311	1.0228	1.0145	1.0063	0.9981	0.9824	0.9668	0.9585
\$115	1.0523	1.0462	1.0401	1.0318	1.0234	1.0150	1.0068	0.9986	0.9903	0.9820	0.9740
\$120	1.0530	1.0469	1.0408	1.0324	1.0240	1.0156	1.0073	0.9991	0.9908	0.9825	0.9744
\$125	1.0538	1.0475	1.0415	1.0331	1.0246	1.0162	1.0079	0.9996	0.9913	0.9830	0.9749
\$130	1.0546	1.0484	1.0422	1.0338	1.0253	1.0168	1.0085	1.0002	0.9918	0.9835	0.9754
\$135	1.0554	1.0492	1.0430	1.0345	1.0260	1.0175	1.0091	1.0008	0.9924	0.9840	0.9759
\$140	1.0562	1.0500	1.0438	1.0353	1.0267	1.0182	1.0098	1.0014	0.9930	0.9846	0.9764
\$145	1.0571	1.0508	1.0446	1.0361	1.0275	1.0189	1.0105	1.0021	0.9936	0.9852	0.9770
\$150	1.0580	1.0517	1.0454	1.0369	1.0283	1.0197	1.0112	1.0028	0.9943	0.9858	0.9774
\$175	1.0591	1.0527	1.0464	1.0379	1.0292	1.0206	1.0121	1.0036	0.9951	0.9866	0.9784
\$200	1.0603	1.0539	1.0475	1.0390	1.0303	1.0217	1.0131	1.0046	0.9961	0.9875	0.9793
\$250	1.0618	1.0554	1.0489	1.0404	1.0317	1.0231	1.0144	1.0059	0.9974	0.9887	0.9805
\$300	1.0636	1.0572	1.0506	1.0421	1.0334	1.0248	1.0160	1.0075	0.9990	0.9902	0.9820
\$350	1.0657	1.0593	1.0526	1.0441	1.0354	1.0268	1.0179	1.0094	1.0009	0.9920	0.9838
10%	1.0060	0.9952	0.9904	0.9848	0.9747	0.9647	0.9533	0.9452	0.9422	0.9353	0.9164
15%	1.0067	0.9926	0.9904	0.9856	0.9757	0.9657	0.9538	0.9456	0.9425	0.9356	0.9166
20%	1.0162	1.0047	0.9956	0.9856	0.9809	0.9745	0.9636	0.9542	0.9436	0.9383	0.9324
25%	1.0181	1.0110	0.9997	0.9905	0.9809	0.9761	0.9684	0.9586	0.9490	0.9387	0.9334
30%	1.0191	1.0133	1.0058	0.9947	0.9854	0.9761	0.9713	0.9642	0.9536	0.9437	0.9339
40%	1.0285	1.0150	1.0094	1.0037	0.9954	0.9848	0.9750	0.9665	0.9617	0.9537	0.9435
50%	1.0369	1.0313	1.0172	1.0054	0.9968	0.9843	0.9850	0.9749	0.9646	0.9569	0.9521

Tables 34 ER OP & 36 UC OP

UC Copay	ER Copay										
	\$55	\$60	\$65	\$70	\$75	\$80	\$85	\$90	\$95	\$100	\$105
N/A	0.9134	0.9055	0.8999	0.8867	0.8819	0.8740	0.8662	0.8583	0.8504	0.8425	0.8347
\$0	0.8893	0.8809	0.8714	0.8588	0.8503	0.8413	0.8328	0.8193	0.8105	0.8016	0.7928
\$5	0.8896	0.8813	0.8729	0.8584	0.8507	0.8423	0.8333	0.8247	0.8111	0.8024	0.7934
\$10	0.8899	0.8816	0.8733	0.8580	0.8504	0.8427	0.8344	0.8252	0.8166	0.8074	0.7983
\$15	0.8902	0.8819	0.8736	0.8554	0.8570	0.8474	0.8348	0.8283	0.8171	0.8085	0.7949
\$20	0.9004	0.8822	0.8739	0.8657	0.8574	0.8490	0.8395	0.8267	0.8183	0.8090	0.8004
\$25	0.9006	0.8924	0.8742	0.8660	0.8577	0.8494	0.8410	0.8315	0.8187	0.8102	0.8009
\$30	0.9008	0.8926	0.8845	0.8663	0.8580	0.8497	0.8414	0.8330	0.8234	0.8106	0.8021
\$35	0.9009	0.8928	0.8847	0.8767	0.8683	0.8500	0.8417	0.8334	0.8250	0.8154	0.8025
\$40	0.9068	0.8929	0.8849	0.8769	0.8687	0.8503	0.8420	0.8337	0.8254	0.8170	0.8073
\$45	0.9091	0.8989	0.8904	0.8771	0.8699	0.8608	0.8423	0.8340	0.8257	0.8174	0.8090
\$50	0.9134	0.9012	0.8909	0.8772	0.8691	0.8610	0.8547	0.8343	0.8260	0.8177	0.8118
\$55	0.9134	0.9055	0.8933	0.8831	0.8692	0.8612	0.8549	0.8468	0.8263	0.8180	0.8121
\$60	0.9134	0.9055	0.8976	0.8855	0.8752	0.8613	0.8557	0.8470	0.8374	0.8183	0.8124
\$75	0.9272	0.9126	0.9022	0.8879	0.8819	0.8740	0.8619	0.8515	0.8376	0.8295	0.8213
\$80	0.9274	0.9193	0.9047	0.8844	0.8819	0.8740	0.8662	0.8539	0.8436	0.8296	0.8215
\$85	0.9276	0.9195	0.9115	0.8969	0.8885	0.8740	0.8662	0.8583	0.8460	0.8357	0.8216
\$90	0.9278	0.9197	0.9117	0.9037	0.8950	0.8766	0.8662	0.8583	0.8504	0.8381	0.8277
\$95	0.9424	0.9198	0.9119	0.9038	0.8959	0.8811	0.8708	0.8583	0.8504	0.8425	0.8301
\$100	0.9427	0.9346	0.9121	0.9041	0.8961	0.8880	0.8734	0.8629	0.8504	0.8425	0.8347
\$105	0.9430	0.9349	0.9268	0.9043	0.8963	0.8882	0.8802	0.8655	0.8551	0.8425	0.8347
\$110	0.9507	0.9353	0.9271	0.9191	0.8965	0.8884	0.8804	0.8724	0.8576	0.8483	0.8347
\$115	0.9583	0.9429	0.9275	0.9194	0.9114	0.8886	0.8806	0.8726	0.8663	0.8520	0.8433
\$120	0.9682	0.9505	0.9352	0.9198	0.9117	0.9036	0.8808	0.8750	0.8665	0.8612	0.8469
\$125	0.9686	0.9504	0.9427	0.9275	0.9120	0.9039	0.8972	0.8752	0.8697	0.8614	0.8561
\$130	0.9671	0.9588	0.9507	0.9352	0.9203	0.9055	0.8975	0.8918	0.8699	0.8645	0.8563
\$135	0.9676	0.9593	0.9511	0.9444	0.9295	0.9146	0.9000	0.8921	0.8863	0.8647	0.8592
\$140	0.9681	0.9598	0.9516	0.9448	0.9386	0.9237	0.9091	0.8944	0.8866	0.8809	0.8594
\$145	0.9686	0.9603	0.9521	0.9453	0.9390	0.9328	0.9181	0.9034	0.8889	0.8812	0.8754
\$150	0.9692	0.9608	0.9526	0.9458	0.9395	0.9332	0.9272	0.9124	0.8978	0.8833	0.8757
\$175	0.9699	0.9615	0.9533	0.9464	0.9401	0.9338	0.9277	0.9214	0.9157	0.9099	0.9042
\$200	0.9708	0.9623	0.9541	0.9472	0.9409	0.9345	0.9284	0.9221	0.9163	0.9105	0.9048
\$250	0.9720	0.9634	0.9552	0.9483	0.9420	0.9355	0.9294	0.9231	0.9172	0.9114	0.9057
\$300	0.9735	0.9648	0.9566	0.9497	0.9434	0.9368	0.9307	0.9244	0.9184	0.9126	0.9069
\$350	0.9753	0.9665	0.9583	0.9514	0.9451	0.9384	0.9323	0.9260	0.9199	0.9141	0.9084
10%	0.9110	0.9050	0.8990	0.8880	0.8786	0.8674	0.8613	0.8513	0.8446	0.8303	0.8238
15%	0.9114	0.9061	0.9000	0.8937	0.8829	0.8732	0.8625	0.8561	0.8464	0.8390	0.8252
20%	0.9238	0.9066	0.9011	0.8951	0.8885	0.8777	0.8679	0.8576	0.8509	0.8413	0.8334
25%	0.9276	0.9180	0.9071	0.8961	0.8902	0.8832	0.8				

Tables 34 ER O/P & 36 UC O/P Continued

UC Copay	ER Copay										
	\$115	\$120	\$125	\$130	\$135	\$140	\$145	\$150	\$175	\$200	
N/A	0.8288	0.8189	0.8110	0.8032	0.7953	0.7874	0.7795	0.7717	0.7638	0.7244	0.6851
\$0	0.7795	0.7563	0.7427	0.7310	0.7191	0.7072	0.6954	0.6835	0.6715	0.6113	0.5522
\$5	0.7817	0.7685	0.7453	0.7317	0.7199	0.7080	0.6962	0.6844	0.6724	0.6123	0.5534
\$10	0.7823	0.7705	0.7574	0.7443	0.7306	0.7088	0.6970	0.6852	0.6733	0.6133	0.5546
\$15	0.7832	0.7712	0.7596	0.7464	0.7333	0.7095	0.6978	0.6860	0.6741	0.6143	0.5557
\$20	0.7838	0.7721	0.7602	0.7466	0.7354	0.7122	0.6985	0.6868	0.6749	0.6153	0.5568
\$25	0.7893	0.7727	0.7610	0.7492	0.7375	0.7243	0.7011	0.6875	0.6757	0.6162	0.5579
\$30	0.7898	0.7792	0.7616	0.7501	0.7386	0.7255	0.7132	0.6902	0.6784	0.6171	0.5585
\$35	0.7911	0.7787	0.7671	0.7507	0.7390	0.7271	0.7154	0.7029	0.6792	0.6180	0.5599
\$40	0.7915	0.7801	0.7676	0.7561	0.7396	0.7279	0.7160	0.7045	0.6912	0.6188	0.5609
\$45	0.7963	0.7805	0.7690	0.7566	0.7451	0.7285	0.7169	0.7051	0.6934	0.6196	0.5619
\$50	0.7983	0.7852	0.7694	0.7581	0.7456	0.7340	0.7175	0.7059	0.6940	0.6204	0.5628
\$55	0.8007	0.7872	0.7742	0.7585	0.7471	0.7345	0.7229	0.7085	0.6949	0.6211	0.5637
\$60	0.8010	0.7878	0.7762	0.7633	0.7475	0.7390	0.7234	0.7140	0.6955	0.6241	0.5646
\$75	0.8101	0.7981	0.7799	0.7655	0.7542	0.7428	0.7302	0.7145	0.6951	0.6249	0.5651
\$80	0.8103	0.7991	0.7771	0.7629	0.7545	0.7432	0.7322	0.7193	0.7035	0.6308	0.5661
\$85	0.8105	0.7993	0.7883	0.7661	0.7548	0.7435	0.7346	0.7212	0.7082	0.6404	0.5693
\$90	0.8106	0.7995	0.7885	0.7787	0.7551	0.7438	0.7349	0.7239	0.7102	0.6487	0.5813
\$95	0.8187	0.7996	0.7887	0.7789	0.7692	0.7441	0.7358	0.7242	0.7167	0.6498	0.5897
\$100	0.8191	0.8057	0.7888	0.7813	0.7694	0.7618	0.7362	0.7289	0.7172	0.6588	0.6041
\$105	0.8298	0.8102	0.7981	0.7814	0.7620	0.7544	0.7292	0.7218	0.7189	0.6596	0.6029
\$110	0.8298	0.8205	0.8025	0.7906	0.7729	0.7663	0.7471	0.7221	0.7156	0.6605	0.6040
\$115	0.8288	0.8189	0.8110	0.7944	0.7830	0.7664	0.7588	0.7473	0.7397	0.6735	0.6170
\$120	0.8352	0.8189	0.8110	0.8032	0.7871	0.7754	0.7589	0.7513	0.7399	0.6821	0.6178
\$125	0.8387	0.8272	0.8110	0.8032	0.7953	0.7794	0.7678	0.7514	0.7438	0.6824	0.6264
\$130	0.8478	0.8305	0.8191	0.8032	0.7953	0.7874	0.7716	0.7603	0.7439	0.6863	0.6288
\$135	0.8480	0.8395	0.8223	0.8111	0.7953	0.7874	0.7795	0.7640	0.7527	0.6866	0.6353
\$140	0.8508	0.8397	0.8312	0.8142	0.8031	0.7874	0.7795	0.7717	0.7563	0.7029	0.6395
\$145	0.8510	0.8424	0.8314	0.8230	0.8060	0.7950	0.7795	0.7717	0.7638	0.7031	0.6473
\$150	0.8587	0.8426	0.8339	0.8232	0.8147	0.7975	0.7875	0.7717	0.7638	0.7074	0.6478
\$175	0.8951	0.8774	0.8599	0.8426	0.8296	0.8235	0.7981	0.7921	0.7795	0.7244	0.6704
\$200	0.8956	0.8860	0.8770	0.8680	0.8589	0.8499	0.8326	0.8156	0.7987	0.7378	0.6851
\$250	0.8964	0.8868	0.8778	0.8688	0.8596	0.8408	0.8248	0.8318	0.8228	0.7776	0.7110
\$300	0.8975	0.8879	0.8789	0.8699	0.8605	0.8516	0.8418	0.8327	0.8237	0.7784	0.7325
\$350	0.8989	0.8893	0.8803	0.8713	0.8619	0.8529	0.8431	0.8339	0.8249	0.7795	0.7334
10%	0.8117	0.8031	0.7989	0.7925	0.7857	0.7480	0.7403	0.7324	0.7246	0.6847	0.6459
15%	0.8188	0.8099	0.7999	0.7925	0.7858	0.7489	0.7412	0.7334	0.7256	0.6856	0.6473
20%	0.8194	0.8097	0.7982	0.7888	0.7737	0.7536	0.7422	0.7344	0.7256	0.6872	0.6488
25%	0.8260	0.8116	0.8026	0.7914	0.7819	0.7661	0.7465	0.7353	0.7276	0.6884	0.6501
30%	0.8295	0.8187	0.8048	0.7956	0.7846	0.7748	0.7585	0.7395	0.7286	0.6895	0.6514
40%	0.8359	0.8262	0.8160	0.8041	0.7914	0.7816	0.7711	0.7607	0.7433	0.6917	0.6540
50%	0.8450	0.8325	0.8225	0.8121	0.8025	0.7895	0.7778	0.7675	0.7575	0.6937	0.6564

Tables 34 ER O/P & 36 UC O/P Continued

UC Copay	ER Copay									
	\$250	\$300	\$350	10%	15%	20%	25%	30%	40%	50%
N/A	0.6063	0.5278	0.4489	0.9000	0.8500	0.8000	0.7500	0.7000	0.6000	0.5000
\$0	0.4680	0.3994	0.3336	0.8275	0.7264	0.6484	0.5749	0.5228	0.4411	0.3737
\$5	0.4695	0.4012	0.3357	0.8316	0.7275	0.6500	0.5789	0.5252	0.4437	0.3780
\$10	0.4710	0.4026	0.3378	0.8358	0.7316	0.6545	0.5828	0.5279	0.4456	0.3794
\$15	0.4724	0.4047	0.3398	0.8428	0.7359	0.6530	0.5807	0.5298	0.4489	0.3805
\$20	0.4738	0.4064	0.3418	0.8452	0.7399	0.6545	0.5826	0.5321	0.4515	0.3827
\$25	0.4752	0.4081	0.3438	0.8492	0.7319	0.6558	0.5843	0.5342	0.4540	0.3849
\$30	0.4785	0.4097	0.3457	0.8521	0.7355	0.6572	0.5861	0.5364	0.4564	0.3870
\$35	0.4778	0.4113	0.3476	0.8581	0.7465	0.6586	0.5879	0.5385	0.4589	0.3892
\$40	0.4791	0.4129	0.3495	0.8631	0.7574	0.6599	0.5895	0.5406	0.4612	0.3912
\$45	0.4804	0.4145	0.3514	0.8675	0.7611	0.6611	0.5912	0.5427	0.4636	0.3933
\$50	0.4816	0.4160	0.3532	0.8692	0.7649	0.6623	0.5929	0.5446	0.4659	0.3953
\$55	0.4828	0.4175	0.3550	0.8692	0.7680	0.6635	0.5943	0.5466	0.4682	0.3973
\$60	0.4840	0.4190	0.3568	0.8753	0.7743	0.6653	0.5959	0.5485	0.4704	0.3993
\$75	0.4851	0.4204	0.3585	0.8874	0.7859	0.6696	0.5974	0.5504	0.4727	0.4014
\$80	0.4861	0.4217	0.3601	0.8902	0.7899	0.6714	0.5987	0.5521	0.4748	0.4032
\$85	0.4871	0.4230	0.3617	0.8984	0.7954	0.6768	0.6005	0.5539	0.4769	0.4050
\$90	0.4891	0.4243	0.3633	0.9114	0.8005	0.6917	0.6031	0.5556	0.4789	0.4069
\$95	0.4891	0.4255	0.3649	0.9260	0.8040	0.6973	0.6048	0.5572	0.4808	0.4086
\$100	0.4900	0.4268	0.3664	0.9060	0.8053	0.6994	0.6061	0.5588	0.4828	0.4102
\$105	0.4909	0.4280	0.3679	0.9084	0.8071	0.7057	0.6078	0.5603	0.4847	0.4119
\$110	0.4918	0.4292	0.3694	0.9153	0.8184	0.7092	0.6091	0.5619	0.4866	0.4136
\$115	0.4926	0.4303	0.3708	0.9219	0.8284	0.7232	0.6114	0.5634	0.4884	0.4152
\$120	0.4934	0.4314	0.3722	0.9285	0.8314	0.7263	0.6126	0.5648	0.4902	0.4168
\$125	0.4942	0.4325	0.3736	0.9300	0.8341	0.7351	0.6144	0.5662	0.4919	0.4183
\$130	0.4962	0.4335	0.3749	0.9327	0.8395	0.7372	0.6189	0.5679	0.4936	0.4198
\$135	0.5061	0.4345	0.3762	0.9393	0.8469	0.7459	0.6286	0.5702	0.4953	0.4213
\$140	0.5219	0.4355	0.3775	0.9513	0.8544	0.7540	0.6468	0.5734	0.4969	0.4228
\$145	0.5298	0.4365	0.3788	0.9526	0.8589	0.7625	0.6564	0.5756	0.4985	0.4242
\$150	0.5337	0.4374	0.3800	0.9579	0.8589	0.7641	0.6610	0.5771	0.5001	0.4256
\$175	0.5613	0.4383	0.3812	0.9834	0.8828	0.7928	0.6972	0.5821	0.5016	0.4269
\$200	0.5777	0.4734	0.3892	0.9842	0.9095	0.8146	0.7227	0.6256	0.5029	0.4281
\$250	0.6053	0.5079	0.4127	0.9854	0.9320	0.8560	0.7694	0.6914	0.5430	0.4616
\$300	0.6234	0.5276	0.4380	0.9870	0.9332	0.8781	0.8022	0.7214	0.5908	0.5019
\$350	0.6421	0.5359	0.4489	0.9890	0.9348	0.8793	0.8242	0.7501	0.6238	0.5296
10%	0.5722	0.5220	0.4759	0.8353	0.7287	0.6513	0.5786	0.5273	0.4461	0.3599
15%	0.5740	0.5242	0.4784	0.8416	0.7297	0.6527	0.5804	0.5294	0.4485	0.3619
20%	0.5758	0.5264	0.4810	0.8447	0.7307	0.6541	0.5821	0.5315	0.4509	0.3639
25%	0.5775	0.5285	0.4835	0.8481	0.7316	0.6554	0.5838	0.5336	0.4533	0.3659
30%	0.5792	0.5305	0.4859	0.8511	0.7343	0.6587	0.5855	0.5359	0.4556	0.3678
40%	0.5825	0.5346	0.4908	0.8608	0.7524	0.6593	0.5868	0.5397	0.4602	0.3716
50%	0.5857	0.5386	0.4954	0.8678	0.7627	0.6616	0.5919	0.5435		

Table 35 ER NF

Copay%	Factor
10%	0.9600
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 37 PCP

a. Copay		Copay	Factor
\$0	1.0000		
\$2	0.9615		
\$3	0.9426		
\$5	0.9051		
\$10	0.8146		
\$15	0.7285		
\$20	0.6488		
\$25	0.5694		
\$30	0.4964		
\$35	0.4418		
\$40	0.3885		
\$45	0.3365		
\$50	0.2860		
\$55	0.2404		
\$60	0.1948		
\$65	0.1492		
\$70	0.1036		
\$75	0.0580		

Table 37 PCP

b. Copay%		Copay%	Factor
10%	0.9541		
15%	0.7650		
20%	0.7185		
25%	0.6544		
30%	0.5930		
40%	0.4777		
50%	0.3868		

Table 38 E-visits PCP

a. Copay		Copay	Factor
\$0	1.0000		
\$2	0.9487		
\$3	0.9237		
\$5	0.8750		
\$10	0.7605		
\$15	0.6562		
\$20	0.5614		
\$25	0.4759		
\$30	0.3991		
\$35	0.3305		
\$40	0.2698		
\$45	0.2165		
\$50	0.1700		
\$55	0.1417		
\$60	0.1148		
\$65	0.0894		
\$70	0.0653		
\$75	0.0427		

Table 38 E-visits PCP

b. Copay%		Copay%	Factor
10%	0.8591		
15%	0.7924		
20%	0.7283		
25%	0.6665		
30%	0.6068		
40%	0.4949		
50%	0.3918		

Table 39 Walk-in Clinics

a. Copay		Copay	Factor
\$0	1.0000		
\$2	0.9474		
\$3	0.9217		
\$5	0.8713		
\$10	0.7519		
\$15	0.6244		
\$20	0.5401		
\$25	0.4472		
\$30	0.3627		
\$35	0.3004		
\$40	0.2405		
\$45	0.1830		
\$50	0.1278		
\$55	0.0787		
\$60	0.0256		
\$65	0.0000		
\$70	0.0000		
\$75	0.0000		

Table 39 Walk-in Clinics

b. Copay%		Copay%	Factor
\$0	0.8477		
15%	0.7763		
20%	0.7080		
25%	0.6427		
30%	0.5804		
40%	0.4648		
50%	0.3607		

Table 40 Non-designated PCP

a. Copay	Copay	Applies to	Applies to
		All PCPs	Designated PCP
	Factor	Factor	Factor
\$0	1.0000	1.0000	
\$2	0.9615	0.9700	
\$3	0.9426	0.9552	
\$5	0.9051	0.9259	
\$10	0.8146	0.8547	
\$15	0.7285	0.7863	
\$20	0.6488	0.7208	
\$25	0.5694	0.6581	
\$30	0.4964	0.5983	
\$35	0.4418	0.5413	
\$40	0.3885	0.4871	
\$45	0.3365	0.4358	
\$50	0.2860	0.3873	
\$55	0.2404	0.3566	
\$60	0.1948	0.3267	
\$65	0.1492	0.2975	
\$70	0.1036	0.2690	
\$75	0.0580	0.2413	

Table 40 Non-designated PCP

b. Copay%	Copay%	Applies to	Applies to
		All PCPs	Designated PCP
	Factor	Factor	Factor
10%	0.8541	0.8387	
15%	0.7850	0.7632	
20%	0.7185	0.6910	
25%	0.6544	0.6223	
30%	0.5930	0.5570	
40%	0.4777	0.4366	
50%	0.3868	0.3297	

Table 41 Specialist

a. Copay		Copay	Factor
\$0	1.0000		
\$2	0.9700		
\$3	0.9562		
\$5	0.9259		
\$10	0.8547		
\$15	0.7863		
\$20	0.7208		
\$25	0.6581		
\$30	0.5983		
\$35	0.5413		
\$40	0.4871		
\$45	0.4358		
\$50	0.3873		
\$55	0.3566		
\$60	0.3267		
\$65	0.2975		
\$70	0.2690		
\$75	0.2413		

Table 41 Specialist

b. Copay%		Copay%	Factor
10%	0.8387		
15%	0.7632		
20%	0.6910		
25%	0.6223		
30%	0.5570		
40%	0.4366		
50%	0.3297		

Table 42 E-visits Specialist

a. Copay		Copay	Factor
\$0	1.0000		
\$2	0.9487		
\$3	0.9237		
\$5	0.8750		
\$10	0.7605		
\$15	0.6562		
\$20	0.5614		
\$25	0.4759		
\$30	0.3991		
\$35	0.3305		
\$40	0.2698		
\$45	0.2165		
\$50	0.1700		
\$55	0.1417		
\$60	0.1148		
\$65	0.0894		
\$70	0.0653		
\$75	0.0427		

Table 42 E-visits Specialist

b. Copay%		Copay%	Factor
10%	0.8591		
15%	0.7924		
20%	0.7283		
25%	0.6665		
30%	0.6068		
40%	0.4949		
50%	0.3918		

Table 43 Office Based Surgery

a. Copay		Copay	Factor
\$0	1.0000		
\$2	0.9817		
\$3	0.9817		
\$5	0.9695		
\$10	0.9394		
\$15	0.9096		
\$20	0.8801		
\$25	0.8509		
\$30	0.8221		
\$35	0.7988		
\$40	0.7581		
\$45	0.7289		
\$50	0.6982		
\$55	0.6702		
\$60	0.6445		
\$65	0.6190		
\$70	0.5939		
\$75	0.5689		
\$80	0.5478		
\$85	0.5286		
\$90	0.5054		
\$95	0.4842		
\$100	0.4630		

Table 43 Office Based Surgery

b. Copay%		Copay%	Factor
10%	0.8860		
15%	0.8302		
20%	0.7752		
25%	0.7209		
30%	0.6646		
40%	0.5541		
50%	0.4531		

Table 44 PCP - Inpatient

a. Copay%		Copay%	Factor
10%	0.8864		
15%	0.8308		
20%	0.7759		
25%	0.7217		
30%	0.6683		
40%	0.5638		
50%	0.4623		

Table 45 Specialist - Inpatient

a. Copay%		Copay%	Factor
10%	0.8610		
15%	0.7948		
20%	0.7307		
25%	0.6688		
30%	0.6090		
40%	0.5138		
50%	0.4282		

Table 46 Maternity NF

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9986
\$3	0.9979
\$5	0.9964
\$10	0.9929
\$15	0.9893
\$20	0.9857
\$25	0.9821
\$30	0.9786
\$35	0.9751
\$40	0.9716
\$45	0.9680
\$50	0.9645
\$55	0.9610
\$60	0.9575
\$65	0.9540
\$70	0.9505
\$75	0.9470

Table 46 Maternity NF

b. Copay%	
Copay%	Factor
10%	0.8525
15%	0.8052
20%	0.7578
25%	0.7104
30%	0.6631
40%	0.5683
50%	0.4736

Table 47 Prenatal

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9986
\$3	0.9979
\$5	0.9964
\$10	0.9929
\$15	0.9893
\$20	0.9857
\$25	0.9821
\$30	0.9786
\$35	0.9751
\$40	0.9716
\$45	0.9680
\$50	0.9645
\$55	0.9610
\$60	0.9575
\$65	0.9540
\$70	0.9505
\$75	0.9470

Table 47 Prenatal

b. Copay%	
Copay%	Factor
10%	0.8525
15%	0.8052
20%	0.7578
25%	0.7104
30%	0.6631
40%	0.5683
50%	0.4736

Table 47 Prenatal

c. Breast Pump/Lactation				
Copay%	Breast & Lactation	Breast Pump	Lactation Not Counseling	Covered
0%	1.1449	1.0700	1.0700	1.0000
10%	1.1591	1.0766	1.0766	1.0000
15%	1.1688	1.0811	1.0811	1.0000
20%	1.1798	1.0862	1.0862	1.0000
25%	1.1925	1.0920	1.0920	1.0000
30%	1.2067	1.0985	1.0985	1.0000
40%	1.2432	1.1150	1.1150	1.0000
50%	1.2950	1.1380	1.1380	1.0000

Table 48 Surgery NF

a. Copay %	
Copay%	Factor
10%	0.8598
15%	0.7816
20%	0.7194
25%	0.6650
30%	0.6206
40%	0.5220
50%	0.4433

Table 49 Bariatric - physician

	Mandate Benefit	Rider Benefit	Rider Benefit
	No Ben Max	No Ben Max	Ben Max
All copay/adm/day	0.1400	1.0000	1.0000

Table 49 Bariatric - physician

a. Maximum Benefit	Rider with Benefits Maximum						Mandated or Rider Benefit
	50%	40%	30%	25%	20%	15%	No Maximum
\$10,000 per procedure	0.8189	0.7430	0.6802	0.6470	0.6180	0.5908	1.0000
\$1,000,000 per lifetime	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000

Table 50 Allergy Testing - NF

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9942
\$3	0.9914
\$5	0.9856
\$10	0.9713
\$15	0.9572
\$20	0.9431
\$25	0.9277
\$30	0.9124
\$35	0.8973
\$40	0.8823
\$45	0.8674
\$50	0.8526
\$55	0.8379
\$60	0.8154
\$65	0.7971
\$70	0.7789
\$75	0.7610
Not Covered	0.0000

Table 50 Allergy Testing - NF

b. Copay%	
Copay%	Factor
10%	0.8766
15%	0.8152
20%	0.7548
25%	0.6959
30%	0.6368
40%	0.5177
50%	0.4257

Table 51 Allergy Trmt/Serum -NF

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9800
\$3	0.9701
\$5	0.9505
\$10	0.9022
\$15	0.8551
\$20	0.8093
\$25	0.7647
\$30	0.7214
\$35	0.6793
\$40	0.6385
\$45	0.5988
\$50	0.5604
\$55	0.5335
\$60	0.5165
\$65	0.4945
\$70	0.4725
\$75	0.4505
Not Covered	0.0000

Table 51 Allergy Trmt/Serum -NF

b. Copay %	
Copay%	Factor
10%	0.8824
15%	0.8251
20%	0.7688
25%	0.7134
30%	0.6590
40%	0.5532
50%	0.5000

Table 52 Oral Surgery NF

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9968
\$3	0.9952
\$5	0.9921
\$10	0.9841
\$15	0.9763
\$20	0.9684
\$25	0.9606
\$30	0.9528
\$35	0.9451
\$40	0.9373
\$45	0.9296
\$50	0.9220
\$55	0.9143
\$60	0.9067
\$65	0.8992
\$70	0.8916
\$75	0.8841

Table 52 Oral Surgery NF

b. Copay%	
Copay%	Factor
10%	0.8541
15%	0.7901
20%	0.7334
25%	0.6780
30%	0.6324
40%	0.5420
50%	0.4517

Table 52 Oral Surgery NF

c. Option	
Include	Factor
Include Medical in Nature	1.0000
Include Medical & Dental in Nature	1.0330

Table 53 Routine Physical - Adult

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9799
\$3	0.9700
\$5	0.9502
\$10	0.9013
\$15	0.8534
\$20	0.8065
\$25	0.7583
\$30	0.7100
\$35	0.7074
\$40	0.6599
\$45	0.6138
\$45	0.5691
\$50	0.5257
\$55	0.4852
\$60	0.4459
\$65	0.4077
\$70	0.3708
\$75	0.3349
Not Covered	0.0000

Table 53 Routine Physical - Adult

b. Copay%	
Copay%	Factor
10%	0.9700
15%	0.8076
20%	0.7422
25%	0.6783
30%	0.6168
40%	0.5010
50%	0.3975

Table 53 Routine Physical - Adult

c. Coverage Limit	
Coverage Limit	Adult Factor
No Age or Frequency Limitations Apply	1.1900
1/12 Months	1.0000
1/24 Months	0.8200
1 Exam Every 12 Months for Ages 21 and Over	1.0000
1 Exam Every 24 Months for Ages 21 to 65, age 65+ 1 every 12 months	0.8200
Age 18 to age 65, 1 exam every 24 months, Age 65 & over, 1 exam every 12 months.	0.8200
Includes blood lead screening	0.8300
1 exam every 12 months age 18 to 22, 1 exam every 24 months age 22 to 65.	0.8300
1 exam every 12 months age 65 and older	0.8300
1 exam every 12 months age 19 to 22, 1 exam every 24 months age 22 to 65.	0.8300
1 exam every 12 months age 65 and older	0.8300
1 exam every 12 months age 21 to 22, 1 exam every 24 months age 22 to 65.	0.8300
1 exam every 12 months age 65 and older	0.8300
1 exam every 12 months age 16 to 22, 1 exam every 24 months age 22 through 999	0.8300
1 exam every 24 months age 22 to 65, 1 exam every 12 months age 65 and older	0.8300
1 visit per plan year, ages 22 - 999	1.0000
1 visit per calendar year, ages 22 - 999	1.0000
1 visit per 12 months, ages 22 - 999	1.0000

Table 53 Routine Physical - Adult

d. Preventative Care Calendar Year Maximum	
Option	Factor
N/A	1.0000
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.5600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6100
Includes Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6200
Includes Well Child, Well Adult and Immunizations	0.7800
Includes Well Child, Well Adult, Immunizations, and Routine Mammograms	0.7400
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.6200
Includes Well Child, Well Adult, Immunizations, and Routine PSA	0.7600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.7300
Includes Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.7500
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine GYN	0.6800
Includes Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.6300
Includes Well Adult, Immunizations, and Routine PSA	0.9300
Includes Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.8100
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.6700
Includes Well Adult, Immunizations, and Routine GYN	0.8500
Includes Well Baby, Well Child, Well Adult, and Immunizations	0.6500
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine Mammograms	0.6500
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.5600
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.6400
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine PSA	0.6300
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears	0.6800
Includes Well Baby, Well Child, Well Adult, and Routine PSA	0.8000
Includes Well Adult, Routine GYN, Routine Pap Smears, and Routine PSA	0.9300
Includes Well Adult, Immunizations, Routine GYN, Routine Pap Smears	0.8500
Includes Well Baby, Well Child, Well Adult, and Routine Pap Smears	0.7900
Includes Well Baby, Well Child, and Well Adult	0.7900

Table 54 Immunization - Adult

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9799
\$3	0.9700
\$5	0.9502
\$10	0.9013
\$15	0.8534
\$20	0.8065
\$25	0.7583
\$30	0.7100
\$35	0.6599
\$40	0.6138
\$45	0.5691
\$50	0.5257
\$55	0.4852
\$60	0.4459
\$65	0.4077
\$70	0.3708
\$75	0.3349
Not Covered	0.0000

Table 54 Immunization - Adult

b. Copay%	
Copay%	Factor
10%	0.9700
15%	0.8076
20%	0.7422
25%	0.6783
30%	0.6168
40%	0.5010
50%	0.3975

Table 54 Immunization - Adult

e. Preventative Care Calendar Year Maximum	
Option	Factor
N/A	1.0000
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.5600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6100
Includes Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6200
Includes Well Child, Well Adult and Immunizations	0.7800
Includes Well Child, Well Adult, Immunizations, and Routine Mammograms	0.7400
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.6200
Includes Well Child, Well Adult, Immunizations, and Routine PSA	0.7600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.7300
Includes Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.7500
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine GYN	0.6800
Includes Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.6300
Includes Well Adult, Immunizations, and Routine PSA	0.9300
Includes Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.8100
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.6700
Includes Well Adult, Immunizations, and Routine GYN	0.8500
Includes Well Baby, Well Child, Well Adult, and Immunizations	0.6500
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine Mammograms	0.6500
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.5600
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.6400
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine PSA	0.6300
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears	0.6800
Includes Well Adult, Immunizations, Routine GYN, Routine Pap Smears	0.8500

Table 55 Routine Physical - Child

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9738
\$3	0.9609
\$5	0.9352
\$10	0.8721
\$15	0.8110
\$20	0.7516
\$25	0.6941
\$30	0.6384
\$35	0.5845
\$40	0.5325
\$45	0.4823
\$50	0.4339
\$55	0.3948
\$60	0.3562
\$65	0.3180
\$70	0.2803
\$75	0.2446
Not Covered	0.0000

Table 55 Routine Physical - Child

b. Copay's	
Copay's	Factor
10%	0.8627
15%	0.7971
20%	0.7336
25%	0.6722
30%	0.6129
40%	0.5004
50%	0.3991

Table 55 Routine Physical - Child

c. Limiting Age	
Benefit Descriptions	Factor
3 exams 25 - 36 months, 1 exam per 12 months thereafter to age 18	1.0625
3 exams 25 - 36 months, 1 exam per 12 months thereafter to age 19	1.0625
3 exams 25 - 36 months, 1 exam per 12 months thereafter thru age 21	1.0625
No Schedule for first 24 months; 3 exams 25 - 36 months, 1 exam per 12 months thereafter to age 19	1.1458
6 exams 1st 12 months, 2 exams 13th - 24 months, 1 exam per year thereafter.	0.9583
7 exams 1st 12 months, 2 exams 13th - 24 months, 1 exam per year thereafter.	1.0000
7 exams 1st 12 months, 3 exams 13th - 24 months, 3 exams 25th - 36th months, 1 exam per 12 months thereafter	1.0625
7 exams 1st 12 months, 3 exams 13 - 24 months, 3 exams 25 - 36 months, 1 exam per 12 months thereafter thru age 21	1.0625
9 exams 1st 24 months, 1 exam per 12 months thereafter to age 7	0.6250
9 exams 1st 24 months, 1 exam per 12 months thereafter	1.0000
Unlimited exam for child to age 12, 3 exams per year child age 12-21	1.1875
1 exam every 365 days	0.7083
No schedule applies	1.1458
\$500 maximum birth to age 1, \$150 calendar year maximum ages 1 year to 9 years.	0.7083

Table 55 Routine Physical - Child

d. Preventative Care Calendar Year Maximum	
Option	Factor
N/A	1.0000
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.5600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6100
Includes Well Child, Well Adult and Immunizations	0.7800
Includes Well Child, Well Adult, Immunizations, and Routine Mammograms	0.7400
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.6500
Includes Well Child, Well Adult, Immunizations, and Routine PSA	0.7600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.7300
Includes Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.7500
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine GYN	0.6800
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.6700
Includes Well Baby, Well Child, Well Adult, and Immunizations	0.6500
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine Mammograms	0.6500
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.5600
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.6400
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine PSA	0.6300
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears	0.6800
Includes Well Baby, Well Child, Well Adult, and Routine PSA	0.8000
Includes Well Baby, Well Child, Well Adult, and Routine Pap Smears	0.7900
Includes Well Baby, Well Child, Well Adult	0.7800

Table 56 Immunization - Child

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9738
\$3	0.9609
\$5	0.9352
\$10	0.8721
\$15	0.8110
\$20	0.7516
\$25	0.6941
\$30	0.6384
\$35	0.5845
\$40	0.5325
\$45	0.4823
\$50	0.4339
\$55	0.3948
\$60	0.3562
\$65	0.3180
\$70	0.2803
\$75	0.2446
Not Covered	0.0000

Table 56 Immunization - Child

b. Copay's	
Copay's	Factor
10%	0.8627
15%	0.7971
20%	0.7336
25%	0.6722
30%	0.6129
40%	0.5004
50%	0.3991

Table 56 Immunization - Child

c. Preventative Care Calendar Year Maximum	
Option	Factor
N/A	1.0000
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.5600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6100
Includes Well Child, Well Adult and Immunizations	0.7800
Includes Well Child, Well Adult, Immunizations, and Routine Mammograms	0.7400
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.6200
Includes Well Child, Well Adult, Immunizations, and Routine PSA	0.7600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.7300
Includes Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.7500
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.6700
Includes Well Baby, Well Child, Well Adult, and Immunizations	0.6500
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine Mammograms	0.6500
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.5600
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.6400
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine PSA	0.6300
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears	0.6800
Includes Well Baby, Well Child, Well Adult, and Routine PSA	0.8000
Includes Well Baby, Well Child, Well Adult, and Routine Pap Smears	0.7900
Includes Well Baby, Well Child, Well Adult	0.7800

Table 57 Routine Eye Exam

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9594
\$3	0.9394
\$5	0.8999
\$10	0.8041
\$15	0.7127
\$20	0.6267
\$25	0.5431
\$30	0.4649
\$35	0.3834
\$40	0.3086
\$45	0.2403
\$50	0.1788
\$55	0.1314
\$60	0.0854
\$65	0.0409
\$70	0.0000
\$75	0.0000
Not Covered	0.0000

Table 57 Routine Eye Exam

b. Copay's	
Copay's	Factor
10%	0.8687
15%	0.8056
20%	0.7443
25%	0.6847
30%	0.6269
40%	0.5184
50%	0.4130

Table 57 Routine Eye Exam

c. Routine Eye Exam	
Maximum	Factor
Eye Exam excluded, includes Glaucoma Test every 5 yrs age 35+	0.0200
Standard Schedule	0.8900
HMO Schedule Applies	0.7500

Table 58 Speech & Hearing NF

a. Copay	Factor
\$0	1.0000
\$2	0.9898
\$3	0.9829
\$5	0.9716
\$10	0.9435
\$15	0.9158
\$20	0.8884
\$25	0.8539
\$30	0.8200
\$35	0.7868
\$40	0.7543
\$45	0.7225
\$50	0.6913
\$55	0.6673
\$60	0.6450
\$65	0.6202
\$70	0.5972
\$75	0.5745

Table 58 Speech & Hearing NF

b. Copay%	Factor
10%	0.8941
15%	0.8416
20%	0.7895
25%	0.7377
30%	0.6862
40%	0.5843
50%	0.4836

Table 58 Speech & Hearing NF

c. Routine Hearing Maximum	Factor
Option	
1 Exam per 36 months	0.3300
Audiometric exams for children under age 13	0.4660
Child to age 18	0.5440
Child to age 2 covered 1 exam per 48 months	0.0634
N/A	1.0000

Table 59 Routine Gyn

a. Copay	Factor
\$0	1.0000
\$2	0.9888
\$3	0.9832
\$5	0.9720
\$10	0.9439
\$15	0.9159
\$20	0.8879
\$25	0.8598
\$30	0.8317
\$35	0.8037
\$40	0.7756
\$45	0.7476
\$50	0.7195
\$55	0.6914
\$60	0.6635
\$65	0.6354
\$70	0.6074
\$75	0.5793
Not Covered	0.0000

Table 59 Routine Gyn

b. Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 59 Routine Gyn

c. Benefit Maximums	Factor
Maximums	
1 exam per calendar year	0.9850
2 visits 12 months	0.9990

Table 59 Routine Gyn

d. Preventative Care Calendar Year Maximum	Factor
Option	
N/A	1.0000
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.5600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6100
Includes Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6300
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.6200
Includes Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.7500
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine GYN	0.6800
Includes Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.6300
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.6700
Includes Well Adult, Immunizations, and Routine GYN	0.8500
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.5600
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears	0.6800
Includes Well Adult, Routine GYN, Routine Pap Smears, and Routine PSA	0.9300
Includes Well Adult, Immunizations, Routine GYN, Routine Pap Smears	0.8500

Table 60 Mammography

a. Copay	Factor
\$0	1.0000
\$2	0.9873
\$3	0.9810
\$5	0.9683
\$10	0.9367
\$15	0.9050
\$20	0.8733
\$25	0.8416
\$30	0.8100
\$35	0.7783
\$40	0.7466
\$45	0.7150
\$50	0.6833
\$55	0.6516
\$60	0.6200
\$65	0.5883
\$70	0.5566
\$75	0.5249

Table 60 Mammography

b. Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 60 Mammography

c. Maximums	Factor
Maximums	
1 per plan year age 35 and over	0.9700
1 Mammogram per 365 day period, no age limit	0.9800
1 baseline age 35 to 40 age 40 and over 1 per calendar	0.9650
1 baseline age 35-39, age 40 & over unlimited	0.9950
No Age or Frequency Limitations Apply	1.0000

Table 60 Mammography

Option	Factor
N/A	1.0000
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.5600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6100
Includes Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6200
Includes Well Child, Well Adult, Immunizations, and Routine Mammograms	0.7400
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.6200
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.7300
Includes Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.6300
Includes Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.8100
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine Mammograms	0.6500
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, and Routine Pap Smears	0.5600
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.6400

Table 61 Cancer Screening

a. Copay	Factor
\$0	1.0000
\$5	0.9962
\$10	0.9924
\$15	0.9886
\$20	0.9847
\$25	0.9809
\$30	0.9771
\$35	0.9733
\$40	0.9695
\$45	0.9657
\$50	0.9618
\$55	0.9580
\$60	0.9542
\$65	0.9504
\$70	0.9466
\$75	0.9428
Not Covered	0.0000

Table 61 Cancer Screening

b. Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 62 Digital Rectal Exam

	Factor
All cost share & limits	1.0000

Table 63 Prostate Specific Antigen

a. Copay	Factor
\$0	1.0000
\$5	0.9883
\$10	0.9767
\$15	0.9650
\$20	0.9534
\$25	0.9417
\$30	0.9301
\$35	0.9184
\$40	0.9068
\$45	0.8951
\$50	0.8835
\$55	0.8718
\$60	0.8602
\$65	0.8485
\$70	0.8369
\$75	0.8252

Table 63 Prostate Specific Antigen

b. Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 63 Prostate Specific Antigen

c. Preventative Care Calendar Year Maximum	Factor
Option	Factor
N/A	1.0000
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.5600
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6100
Includes Well Adult, Immunizations, Routine Mammograms, Routine GYN, Routine Pap Smears, and Routine PSA	0.6200
Includes Well Child, Well Adult, Immunizations, and Routine PSA	0.7500
Includes Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.7300
Includes Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.7500
Includes Well Adult, Immunizations, and Routine PSA	0.9300
Includes Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.8100
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine GYN, Routine Pap Smears, and Routine PSA	0.6700
Includes Well Baby, Well Child, Well Adult, Immunizations, Routine Mammograms, and Routine PSA	0.6400
Includes Well Baby, Well Child, Well Adult, Immunizations, and Routine PSA	0.9300
Includes Well Baby, Well Child, Well Adult, and Routine PSA	0.9000
Includes Well Adult, Routine GYN, Routine Pap Smears, and Routine PSA	0.9300

Table 64 Serious MH NF

a. Copay	Factor
\$0	1.0000
\$2	0.9608
\$3	0.9415
\$5	0.9035
\$10	0.8118
\$15	0.7288
\$20	0.6427
\$25	0.5654
\$30	0.4848
\$35	0.4104
\$40	0.3421
\$45	0.2800
\$50	0.2241
\$55	0.1860
\$60	0.1507
\$65	0.1181
\$70	0.0882
\$75	0.0660

Table 64 Serious MH NF

b1. Copay%	Factor
10%	0.8371
15%	0.7809
20%	0.6881
25%	0.6189
30%	0.5532
40%	0.4208
50%	0.3058

Table 64 Serious MH NF

Step Coinsurance Plans	Serious MH NF Only Factor
\$0/\$0 1-4/5-Unlimited/CAL, SM2 \$0 Unlimited/CAL	1.0000
\$0/\$5 1-4/5-Unlimited/CAL, SM2 \$5 Unlimited/CAL	0.9035
\$0/\$10 1-4/5-Unlimited/CAL, SM2 \$10 Unlimited/CAL	0.8118
\$0/\$15 1-4/5-Unlimited/CAL, SM2 \$15 Unlimited/CAL	0.7248
\$0/\$20 1-4/5-Unlimited/CAL, SM2 \$20 Unlimited/CAL	0.6427
\$0/\$25 1-4/5-Unlimited/CAL, SM2 \$25 Unlimited/CAL	0.5654
\$0/\$30 1-4/5-Unlimited/CAL, SM2 \$30 Unlimited/CAL	0.4948
\$0/\$35 1-4/5-Unlimited/CAL, SM2 \$35 Unlimited/CAL	0.4294
\$0/\$40 1-4/5-Unlimited/CAL, SM2 \$40 Unlimited/CAL	0.3421
\$0/\$45 1-4/5-Unlimited/CAL, SM2 \$45 Unlimited/CAL	0.2800
\$0/\$50 1-4/5-Unlimited/CAL, SM2 \$50 Unlimited/CAL	0.2241
\$0/\$55 1-4/5-Unlimited/CAL, SM2 \$55 Unlimited/CAL	0.1860
\$0/\$60 1-4/5-Unlimited/CAL, SM2 \$60 Unlimited/CAL	0.1507
\$0/\$65 1-4/5-Unlimited/CAL, SM2 \$65 Unlimited/CAL	0.1181
\$0/\$70 1-4/5-Unlimited/CAL, SM2 \$70 Unlimited/CAL	0.0952
\$0/\$75 1-4/5-Unlimited/CAL, SM2 \$75 Unlimited/CAL	0.0850
\$0/V, 1-5 visits, \$0/V, 6+ visits	1.0000
\$0/V, 1-5 visits, \$2/V, 6+ visits	0.9777
\$0/V, 1-5 visits, \$3/V, 6+ visits	0.9668
\$0/V, 1-5 visits, \$5/V, 6+ visits	0.9452
\$0/V, 1-5 visits, \$10/V, 6+ visits	0.8931
\$0/V, 1-5 visits, \$15/V, 6+ visits	0.8437
\$0/V, 1-5 visits, \$20/V, 6+ visits	0.7971
\$0/V, 1-5 visits, \$25/V, 6+ visits	0.7532
\$0/V, 1-5 visits, \$30/V, 6+ visits	0.7074
\$0/V, 1-5 visits, \$35/V, 6+ visits	0.6651
\$0/V, 1-5 visits, \$40/V, 6+ visits	0.6264
\$0/V, 1-5 visits, \$45/V, 6+ visits	0.5911
\$0/V, 1-5 visits, \$50/V, 6+ visits	0.5594
\$0/V, 1-5 visits, \$55/V, 6+ visits	0.5377
\$0/V, 1-5 visits, \$60/V, 6+ visits	0.5177
\$0/V, 1-5 visits, \$65/V, 6+ visits	0.4992
\$0/V, 1-5 visits, \$70/V, 6+ visits	0.4822
\$0/V, 1-5 visits, \$75/V, 6+ visits	0.4690
\$25/V, 1-40 visits, \$30/V, 41+ visits	0.5592
\$25/V, 1-40 visits, \$35/V, 41+ visits	0.5535
\$25/V, 1-40 visits, \$40/V, 41+ visits	0.5483
\$0/V, 1-20 visits, \$10/V, 21+ visits	0.9597
\$0/V, 1-2 visits, \$10/V, 3-10 visits, \$25/V, 11+ visits	0.7497
\$0/V, 1-2 visits, \$10/V, 3-10 visits, \$25/V, 11-20 visits	0.6298
\$15/V, 1-5 visits, \$20/V, 6-30 visits, \$20/V, 31+ visits	0.3650
\$15/V, 1-5 visits, \$25/V, 6-30 visits, \$25/V, 31+ visits	0.3211
\$15/V, 1-5 visits, \$25/V, 6-30 visits, \$30/V, 31+ visits	0.3115
\$15/V, 1-5 visits, \$25/V, 6-30 visits, \$35/V, 31+ visits	0.3159
\$0/V/V visits 1-5, 65%/V visits 6-30, 60%/V visits 31+	0.5516
\$0/V/V visits 1-5, 65%/V visits 6-30, 60%/V visits 31+	0.5553
100%/50% 1-4/5-Unlimited/CAL, SM2 50% Unlimited/CAL	0.3058
100%/60% 1-4/5-Unlimited/CAL, SM2 60% Unlimited/CAL	0.4209
100%/70% 1-4/5-Unlimited/CAL, SM2 70% Unlimited/CAL	0.5532
100%/75% 1-4/5-Unlimited/CAL, SM2 75% Unlimited/CAL	0.6189
100%/80% 1-4/5-Unlimited/CAL, SM2 80% Unlimited/CAL	0.6981
\$0/V/V visits 1-5, 50%/V visits 6-20	0.2404
\$0/V/V visits 1-5, 50%/V visits 6-20	0.2901
70%/V visits 1-5, 50%/V visits 6-20	0.3473
75%/V visits 1-5, 50%/V visits 6-20	0.3757
\$0/V/V visits 1-5, 50%/V visits 6-20	0.4056
\$5/V/V visits 1-5, 50%/V visits 6-20	0.4370
\$0/V/V visits 1-5, 50%/V visits 6-20	0.4700
\$0/V/V visits 1-5, 70%/V visits 6+	0.6142
\$0/V/V visits 1-5, 75%/V visits 6+	0.6513
20% for the first 5 visits, 35% for visits 6-30 and 40% for 31+ visits	0.5653
20% for the first 5 visits, 35% for visits 6-30 and 50% for 31+ visits	0.5516
20% for visits 1-5 and 30% for 6+ visits	0.6115
25% for visits 1-40 and 30% for 41+ visits	0.6139
25% for visits 1-40 and 40% for 41+ visits	0.6057
75%/V visits 1-40, 70%/V visits 41+ per plan year	0.6139
75%/V visits 1-40, 70%/V visits 41+	0.6139
0% visits 1-4, 10% after \$0 Copay 5+ visits	0.8934
0% visits 1-4, 10% after \$2 Copay 5+ visits	0.8719
0% visits 1-4, 10% after \$5 Copay 5+ visits	0.8405
0% visits 1-4, 10% after \$10 Copay 5+ visits	0.7903
0% visits 1-4, 10% after \$15 Copay 5+ visits	0.7427
0% visits 1-4, 10% after \$20 Copay 5+ visits	0.6977
0% visits 1-4, 10% after \$25 Copay 5+ visits	0.6554
0% visits 1-4, 10% after \$30 Copay 5+ visits	0.6112
0% visits 1-4, 10% after \$35 Copay 5+ visits	0.5704
0% visits 1-4, 10% after \$40 Copay 5+ visits	0.5331

Table 64 Serious MH NF

Step Coinsurance Plans (continued)	Serious MH NF Only Factor
0% visits 1-4, 10% after \$45 Copay 5+ visits	0.4991
0% visits 1-4, 10% after \$50 Copay 5+ visits	0.4684
0% visits 1-4, 10% after \$55 Copay 5+ visits	0.4476
0% visits 1-4, 10% after \$60 Copay 5+ visits	0.4282
0% visits 1-4, 10% after \$65 Copay 5+ visits	0.4104
0% visits 1-4, 10% after \$70 Copay 5+ visits	0.3940
0% visits 1-4, 10% after \$75 Copay 5+ visits	0.3813
0% visits 1-4, 20% after \$0 Copay 5+ visits	0.7359
0% visits 1-4, 20% after \$2 Copay 5+ visits	0.7783
0% visits 1-4, 20% after \$5 Copay 5+ visits	0.7525
0% visits 1-4, 20% after \$10 Copay 5+ visits	0.7525
0% visits 1-4, 20% after \$15 Copay 5+ visits	0.6720
0% visits 1-4, 20% after \$20 Copay 5+ visits	0.6351
0% visits 1-4, 20% after \$25 Copay 5+ visits	0.6003
0% visits 1-4, 20% after \$30 Copay 5+ visits	0.5690
0% visits 1-4, 20% after \$35 Copay 5+ visits	0.5395
0% visits 1-4, 20% after \$40 Copay 5+ visits	0.4997
0% visits 1-4, 20% after \$45 Copay 5+ visits	0.4718
0% visits 1-4, 20% after \$50 Copay 5+ visits	0.4466
0% visits 1-4, 20% after \$55 Copay 5+ visits	0.4294
0% visits 1-4, 20% after \$60 Copay 5+ visits	0.4135
0% visits 1-4, 20% after \$65 Copay 5+ visits	0.3937
0% visits 1-4, 20% after \$70 Copay 5+ visits	0.3854
0% visits 1-4, 20% after \$75 Copay 5+ visits	0.3749
0% visits 1-4, 30% after \$0 Copay 5+ visits	0.7076
0% visits 1-4, 30% after \$2 Copay 5+ visits	0.6935
0% visits 1-4, 30% after \$5 Copay 5+ visits	0.6727
0% visits 1-4, 30% after \$10 Copay 5+ visits	0.6395
0% visits 1-4, 30% after \$15 Copay 5+ visits	0.6080
0% visits 1-4, 30% after \$20 Copay 5+ visits	0.5783
0% visits 1-4, 30% after \$25 Copay 5+ visits	0.5503
0% visits 1-4, 30% after \$30 Copay 5+ visits	0.5212
0% visits 1-4, 30% after \$35 Copay 5+ visits	0.4942
0% visits 1-4, 30% after \$40 Copay 5+ visits	0.4695
0% visits 1-4, 30% after \$45 Copay 5+ visits	0.4470
0% visits 1-4, 30% after \$50 Copay 5+ visits	0.4268
0% visits 1-4, 30% after \$55 Copay 5+ visits	0.4100
0% visits 1-4, 30% after \$60 Copay 5+ visits	0.4002
0% visits 1-4, 30% after \$65 Copay 5+ visits	0.3884
0% visits 1-4, 30% after \$70 Copay 5+ visits	0.3776
0% visits 1-4, 30% after \$75 Copay 5+ visits	0.3692
0% visits 1-4, 40% after \$0 Copay 5+ visits	0.6211
0% visits 1-4, 40% after \$2 Copay 5+ visits	0.6103
0% visits 1-4, 40% after \$5 Copay 5+ visits	0.5945
0% visits 1-4, 40% after \$10 Copay 5+ visits	0.5692
0% visits 1-4, 40% after \$15 Copay 5+ visits	0.5453
0% visits 1-4, 40% after \$20 Copay 5+ visits	0.5227
0% visits 1-4, 40% after \$25 Copay 5+ visits	0.5014
0% visits 1-4, 40% after \$30 Copay 5+ visits	0.4792
0% visits 1-4, 40% after \$35 Copay 5+ visits	0.4587
0% visits 1-4, 40% after \$40 Copay 5+ visits	0.4399
0% visits 1-4, 40% after \$45 Copay 5+ visits	0.4228
0% visits 1-4, 40% after \$50 Copay 5+ visits	0.4074
0% visits 1-4, 40% after \$55 Copay 5+ visits	0.3969
0% visits 1-4, 40% after \$60 Copay 5+ visits	0.3872
0% visits 1-4, 40% after \$65 Copay 5+ visits	0.3782
0% visits 1-4, 40% after \$70 Copay 5+ visits	0.3700
0% visits 1-4, 40% after \$75 Copay 5+ visits	0.3636
0% visits 1-4, 50% after \$0 Copay 5+ visits	0.5438
0% visits 1-4, 50% after \$2 Copay 5+ visits	0.5379
0% visits 1-4, 50% after \$5 Copay 5+ visits	0.5265
0% visits 1-4, 50% after \$10 Copay 5+ visits	0.5081
0% visits 1-4, 50% after \$15 Copay 5+ visits	0.4907
0% visits 1-4, 50% after \$20 Copay 5+ visits	0.4743
0% visits 1-4, 50% after \$25 Copay 5+ visits	0.4598
0% visits 1-4, 50% after \$30 Copay 5+ visits	0.4427
0% visits 1-4, 50% after \$35 Copay 5+ visits	0.4278
0% visits 1-4, 50% after \$40 Copay 5+ visits	0.4141
0% visits 1-4, 50% after \$45 Copay 5+ visits	0.4017
0% visits 1-4, 50% after \$50 Copay 5+ visits	0.3905
0% visits 1-4, 50% after \$55 Copay 5+ visits	0.3829
0% visits 1-4, 50% after \$60 Copay 5+ visits	0.3758
0% visits 1-4, 50% after \$65 Copay 5+ visits	0.3693
0% visits 1-4, 50% after \$70 Copay 5+ visits	0.3633
0% visits 1-4, 50% after \$75 Copay 5+ visits	0.3587
N/A	0.0000

Table 64 Serious MH NF

c. Freemax	MH SMI	All OP MH & SA
	NF	SA Combined
Maximum	Factor	Factor
20 visits/cal yr	0.7925	0.7868
200 visits/cal yr	0.8895	0.8995
25 visits/cal yr	0.8442	0.8354
30 visits/cal yr	0.8850	0.8784
35 visits/cal yr	0.9128	0.9079
40 visits/cal yr	0.9256	0.9213
45 visits/cal yr	0.9438	0.9406
50 visits/cal yr	0.9498	0.9470
60 visits/cal yr	0.9671	0.9652
90 visits/cal yr	0.9868	0.9860
Unlimited visits/cal yr	1.0000	1.0000
26 visits/cal yr	0.8637	N/A
24 visits/cal yr	0.8377	N/A

Table 64 Serious MH NF

d. Applied Behavioral Analysis	Factor
Benefit	1.0000
Not Covered	1.0000
Unlimited	1.2000
Covered to age 9, \$34,000 calendar year maximum Age 9 to 19, \$19,000 calendar year maximum. Age 19 and over, no coverage.	1.1569
Covered to age 9, \$50,000 cal year max combined with Behav Thrp. Age 9 to 13, \$35,000 cal year max combined with Behav Thrp. Age 13 to 15, \$25,000 cal year max combined with Behav Thrp. age 15 and over, no coverage.	1.1704
Covered to age 18, \$36,000 calendar year max combined with Behav Thrp and Phys/Occ/Speech Therapy, and \$200,000 lifetime max combined with Behav Thrp and Phys/Occ/Speech Therapy. Age 18 and over, no coverage.	1.1633
Covered to age 17, \$36,000 calendar year maximum combined with Phys/Occ/Speech Therapy and Behav Thrp, and \$144,000 lifetime maximum combined with Phys/Occ/Speech Therapy and Behav Thrp. Age 17 and over, no coverage.	1.1596
Covered to age 19, \$40,000 calendar year maximum. age 19 and over, no coverage.	1.1743
Covered to age 9, \$50,000 calendar year max combined with Phys/Occ/Speech Therapy and Behav Thrp. ACE 9 to 19, \$20,000 calendar year max combined with Phys/Occ/Speech Therapy AND Behav Thrp. Age 19 and over, no coverage.	1.1761
Covered to age 13, \$36,000 calendar year maximum. age 13 to 21, \$27,000 calendar year maximum. Age 21 and over, no coverage.	1.1662
Covered to age 21, \$36,000 calendar year maximum. age 21 and over, no coverage.	1.1677
Covered to age 22, \$36,000 calendar year max combined with Phys/Occ/Speech Therapy and Behav Thrp, and \$200,000 lifetime max combined with Phys/Occ/Speech Therapy and Behav Thrp. age 22 and over, no coverage.	1.1677
Covered to age 22, \$36,000 calendar year maximum. age 22 and over, no coverage.	1.1679
Covered to age 16, \$50,000 calendar year maximum combined with Behavioral Therapy. Age 16 and over, no coverage.	1.1738
Covered to age 10, covered. age 10 and over no coverage.	1.1539
Covered to age 9, \$50,000 calendar year maximum combined with Behavioral Therapy. Age 9 to 16, \$25,000 calendar year maximum combined with Behavioral Therapy. Age 16 and over, no coverage.	1.1684
Covered to age 21, \$38,527 calendar year maximum combined with Behavioral Therapy and Phys/Occ/Speech Therapy. age 21 and over, no coverage.	1.1722
Covered to age 16, covered. Age 16 and over, no coverage.	1.1858
Covered to age 15, covered. Age 15 and over, no coverage.	1.1817
Covered to age 18, \$36,000 Cal Yr Max comb with Behav Therapy and Aut PT/OT/ST payable beyond dollar max. \$200,000 lifetime max comb with Behav Therapy and Aut PT/OT/ST payable beyond dollar max. Age 18 and over, no coverage.	1.1633
Covered, \$45,000 Cal Yr Max	1.1830

Table 65 MH NF

a. Copay	Factor
\$0	1.0000
\$2	0.9601
\$3	0.9404
\$5	0.9017
\$10	0.8083
\$15	0.7199
\$20	0.6364
\$25	0.5580
\$30	0.4765
\$35	0.4014
\$40	0.3327
\$45	0.2704
\$50	0.2145
\$55	0.1759
\$60	0.1402
\$65	0.1073
\$70	0.0773
\$75	0.0532

Table 65 MH NF

b1. Copay%	Factor
10%	0.8391
15%	0.7638
20%	0.6918
25%	0.6232
30%	0.5580
40%	0.4279
50%	0.3131

Table 65 MH NF

Step Coinsurance Plans	MH NF Only Factor
\$0/\$0 1-4/5-Unlimited/CAL, SM2 \$0 Unlimited/CAL	1.0000
\$0/\$5 1-4/5-Unlimited/CAL, SM2 \$5 Unlimited/CAL	0.9440
\$0/\$10 1-4/5-Unlimited/CAL, SM2 \$10 Unlimited/CAL	0.8908
\$0/\$15 1-4/5-Unlimited/CAL, SM2 \$15 Unlimited/CAL	0.8404
\$0/\$20 1-4/5-Unlimited/CAL, SM2 \$20 Unlimited/CAL	0.7929
\$0/\$25 1-4/5-Unlimited/CAL, SM2 \$25 Unlimited/CAL	0.7481
\$0/\$30 1-4/5-Unlimited/CAL, SM2 \$30 Unlimited/CAL	0.7077
\$0/\$35 1-4/5-Unlimited/CAL, SM2 \$35 Unlimited/CAL	0.6699
\$0/\$40 1-4/5-Unlimited/CAL, SM2 \$40 Unlimited/CAL	0.6358
\$0/\$45 1-4/5-Unlimited/CAL, SM2 \$45 Unlimited/CAL	0.6043
\$0/\$50 1-4/5-Unlimited/CAL, SM2 \$50 Unlimited/CAL	0.5754
\$0/\$55 1-4/5-Unlimited/CAL, SM2 \$55 Unlimited/CAL	0.5305
\$0/\$60 1-4/5-Unlimited/CAL, SM2 \$60 Unlimited/CAL	0.5101
\$0/\$65 1-4/5-Unlimited/CAL, SM2 \$65 Unlimited/CAL	0.4914
\$0/\$70 1-4/5-Unlimited/CAL, SM2 \$70 Unlimited/CAL	0.4743
\$0/\$75 1-4/5-Unlimited/CAL, SM2 \$75 Unlimited/CAL	0.4595
\$0/V, 1-5 visits, \$0/V, 6-20 visits	1.0000
\$0/V, 1-5 visits, \$2/V, 6-20 visits	0.7720
\$0/V, 1-5 visits, \$3/V, 6-20 visits	0.7650
\$0/V, 1-5 visits, \$5/V, 6-20 visits	0.7513
\$0/V, 1-5 visits, \$10/V, 6-20 visits	0.7183
\$0/V, 1-5 visits, \$15/V, 6-20 visits	0.6870
\$0/V, 1-5 visits, \$20/V, 6-20 visits	0.6574
\$0/V, 1-5 visits, \$25/V, 6-20 visits	0.6296
\$0/V, 1-5 visits, \$30/V, 6-20 visits	0.6008
\$0/V, 1-5 visits, \$35/V, 6-20 visits	0.5742
\$0/V, 1-5 visits, \$40/V, 6-20 visits	0.5499
\$0/V, 1-5 visits, \$45/V, 6-20 visits	0.5278
\$0/V, 1-5 visits, \$50/V, 6-20 visits	0.5080
\$0/V, 1-5 visits, \$55/V, 6-20 visits	0.4904
\$0/V, 1-5 visits, \$60/V, 6-20 visits	0.4817
\$0/V, 1-5 visits, \$65/V, 6-20 visits	0.4701
\$0/V, 1-5 visits, \$70/V, 6-20 visits	0.4595
\$0/V, 1-5 visits, \$75/V, 6-20 visits	0.4509
\$25/V, 1-40 visits, \$30/V, 41+ visits	0.5517
\$25/V, 1-40 visits, \$35/V, 41+ visits	0.5460
\$25/V, 1-40 visits, \$40/V, 41+ visits	0.5407
\$0/V, 1-20 visits, \$10/V, 21+ visits	0.9590
\$0/V, 1-2 visits, \$10/V, 3-10 visits, \$25/V, 11+ visits	0.7453
\$0/V, 1-2 visits, \$10/V, 3-10 visits, \$25/V, 11-20 visits	0.6260
\$15/V, 1-5 visits, \$20/V, 6-30 visits, \$20/V, 31+ visits	0.3614
\$15/V, 1-5 visits, \$25/V, 6-30 visits, \$25/V, 31+ visits	0.3169
\$15/V, 1-5 visits, \$25/V, 6-30 visits, \$30/V, 31+ visits	0.3072
\$15/V, 1-5 visits, \$25/V, 6-30 visits, \$35/V, 31+ visits	0.6094
\$0/V/V visits 1-5, 65%/V visits 6-30, 60%/V visits 31+	0.5570
\$0/V/V visits 1-5, 65%/V visits 6-30, 60%/V visits 31+	0.5706
100%/50% 1-4/5-Unlimited/CAL, SM2 50% Unlimited/CAL	0.6086
100%/60% 1-4/5-Unlimited/CAL, SM2 60% Unlimited/CAL	0.6740
100%/70% 1-4/5-Unlimited/CAL, SM2 70% Unlimited/CAL	0.7481
100%/75% 1-4/5-Unlimited/CAL, SM2 75% Unlimited/CAL	0.7393
100%/80% 1-4/5-Unlimited/CAL, SM2 80% Unlimited/CAL	0.8244
50%/V visits 1-5, 50%/V visits 6-20	0.2461
60%/V visits 1-5, 50%/V visits 6-20	0.2958
70%/V visits 1-5, 50%/V visits 6-20	0.3519
75%/V visits 1-5, 50%/V visits 6-20	0.3801
80%/V visits 1-5, 50%/V visits 6-20	0.4098
85%/V visits 1-5, 50%/V visits 6-20	0.4409
90%/V visits 1-5, 50%/V visits 6-20	0.4774
95%/V visits 1-5, 70%/V visits 6+	0.6158
80%/V visits 1-5, 75%/V visits 6+	0.6528
20% for the first 5 visits, 35% for visits 6-30 and 40% for 31+ visits	0.5706
20% for visits 1-4 and 30% for 6+ visits	0.6158
20% for the first 5 visits, 35% for visits 6-30 and 50% for 31+ visits	0.5570
25% for visits 1-40 and 30% for 41+ visits	0.6182
25% for visits 1-40 and 40% for 41+ visits	0.6095
75%/V visits 1-40, 70%/V visits 41+ per plan year	0.6182
75%/V visits 1-40, 70%/V visits 41+	0.6182
0% visits 1-4, 10% after \$0 Copay 5+ visits	0.8947
0% visits 1-4, 10% after \$2 Copay 5+ visits	0.8728
0% visits 1-4, 10% after \$5 Copay 5+ visits	0.8407
0% visits 1-4, 10% after \$10 Copay 5+ visits	0.7895
0% visits 1-4, 10% after \$15 Copay 5+ visits	0.7409
0% visits 1-4, 10% after \$20 Copay 5+ visits	0.6951
0% visits 1-4, 10% after \$25 Copay 5+ visits	0.6520
0% visits 1-4, 10% after \$30 Copay 5+ visits	0.6073
0% visits 1-4, 10% after \$35 Copay 5+ visits	0.5661

Table 65 MH NF

Step Coinsurance Plans (continued)	MH NF Only Factor
0% visits 1-4, 10% after \$40 Copay 5+ visits	0.5290
0% visits 1-4, 10% after \$45 Copay 5+ visits	0.4941
0% visits 1-4, 10% after \$50 Copay 5+ visits	0.4634
0% visits 1-4, 10% after \$55 Copay 5+ visits	0.4423
0% visits 1-4, 10% after \$60 Copay 5+ visits	0.4227
0% visits 1-4, 10% after \$65 Copay 5+ visits	0.4046
0% visits 1-4, 10% after \$70 Copay 5+ visits	0.3981
0% visits 1-4, 20% after \$75 Copay 5+ visits	0.3749
0% visits 1-4, 20% after \$80 Copay 5+ visits	0.3783
0% visits 1-4, 20% after \$2 Copay 5+ visits	0.7803
0% visits 1-4, 20% after \$5 Copay 5+ visits	0.7538
0% visits 1-4, 20% after \$10 Copay 5+ visits	0.7338
0% visits 1-4, 20% after \$15 Copay 5+ visits	0.6715
0% visits 1-4, 20% after \$20 Copay 5+ visits	0.6338
0% visits 1-4, 20% after \$25 Copay 5+ visits	0.5982
0% visits 1-4, 20% after \$30 Copay 5+ visits	0.5614
0% visits 1-4, 20% after \$35 Copay 5+ visits	0.5274
0% visits 1-4, 20% after \$40 Copay 5+ visits	0.4963
0% visits 1-4, 20% after \$45 Copay 5+ visits	0.4681
0% visits 1-4, 20% after \$50 Copay 5+ visits	0.4427
0% visits 1-4, 20% after \$55 Copay 5+ visits	0.4253
0% visits 1-4, 20% after \$60 Copay 5+ visits	0.4091
0% visits 1-4, 20% after \$65 Copay 5+ visits	0.3943
0% visits 1-4, 20% after \$70 Copay 5+ visits	0.3807
0% visits 1-4, 20% after \$75 Copay 5+ visits	0.3698
0% visits 1-4, 30% after \$0 Copay 5+ visits	0.7108
0% visits 1-4, 30% after \$2 Copay 5+ visits	0.6962
0% visits 1-4, 30% after \$5 Copay 5+ visits	0.6749
0% visits 1-4, 30% after \$10 Copay 5+ visits	0.6408
0% visits 1-4, 30% after \$15 Copay 5+ visits	0.6085
0% visits 1-4, 30% after \$20 Copay 5+ visits	0.5780
0% visits 1-4, 30% after \$25 Copay 5+ visits	0.5494
0% visits 1-4, 30% after \$30 Copay 5+ visits	0.5196
0% visits 1-4, 30% after \$35 Copay 5+ visits	0.4922
0% visits 1-4, 30% after \$40 Copay 5+ visits	0.4671
0% visits 1-4, 30% after \$45 Copay 5+ visits	0.4444
0% visits 1-4, 30% after \$50 Copay 5+ visits	0.4207
0% visits 1-4, 30% after \$55 Copay 5+ visits	0.4099
0% visits 1-4, 30% after \$60 Copay 5+ visits	0.3969
0% visits 1-4, 30% after \$65 Copay 5+ visits	0.3849
0% visits 1-4, 30% after \$70 Copay 5+ visits	0.3739
0% visits 1-4, 30% after \$75 Copay 5+ visits	0.3651
0% visits 1-4, 40% after \$0 Copay 5+ visits	0.6257
0% visits 1-4, 40% after \$2 Copay 5+ visits	0.6145
0% visits 1-4, 40% after \$5 Copay 5+ visits	0.5981
0% visits 1-4, 40% after \$10 Copay 5+ visits	0.5720
0% visits 1-4, 40% after \$15 Copay 5+ visits	0.5472
0% visits 1-4, 40% after \$20 Copay 5+ visits	0.5239
0% visits 1-4, 40% after \$25 Copay 5+ visits	0.5019
0% visits 1-4, 40% after \$30 Copay 5+ visits	0.4791
0% visits 1-4, 40% after \$35 Copay 5+ visits	0.4581
0% visits 1-4, 40% after \$40 Copay 5+ visits	0.4381
0% visits 1-4, 40% after \$45 Copay 5+ visits	0.4214
0% visits 1-4, 40% after \$50 Copay 5+ visits	0.4057
0% visits 1-4, 40% after \$55 Copay 5+ visits	0.3949
0% visits 1-4, 40% after \$60 Copay 5+ visits	0.3849
0% visits 1-4, 40% after \$65 Copay 5+ visits	0.3757
0% visits 1-4, 40% after \$70 Copay 5+ visits	0.3673
0% visits 1-4, 40% after \$75 Copay 5+ visits	0.3606
0% visits 1-4, 50% after \$0 Copay 5+ visits	0.5606
0% visits 1-4, 50% after \$2 Copay 5+ visits	0.5424
0% visits 1-4, 50% after \$5 Copay 5+ visits	0.5304
0% visits 1-4, 50% after \$10 Copay 5+ visits	0.5113
0% visits 1-4, 50% after \$15 Copay 5+ visits	0.4932
0% visits 1-4, 50% after \$20 Copay 5+ visits	0.4791
0% visits 1-4, 50% after \$25 Copay 5+ visits	0.4650
0% visits 1-4, 50% after \$30 Copay 5+ visits	0.4433
0% visits 1-4, 50% after \$35 Copay 5+ visits	0.4279
0% visits 1-4, 50% after \$40 Copay 5+ visits	0.4138
0% visits 1-4, 50% after \$45 Copay 5+ visits	0.4011
0% visits 1-4, 50% after \$50 Copay 5+ visits	0.3896
0% visits 1-4, 50% after \$55 Copay 5+ visits	0.3817
0% visits 1-4, 50% after \$60 Copay 5+ visits	0.3744
0% visits 1-4, 50% after \$65 Copay 5+ visits	0.3677
0% visits 1-4, 50% after \$70 Copay 5+ visits	0.3615
0% visits 1-4, 50% after \$75 Copay 5+ visits	0.3566
N/A	0.0000

Table 65 MH NF

d_Freemax	MH non-SMI	All OP MH & SA
	NF	SA Combined
Maximum	Factor	Factor
20 visits/cal yr	0.8534	0.7858
200 visits/cal yr	1.0000	0.9895
25 visits/cal yr	0.8974	0.8354
30 visits/cal yr	0.9278	0.8784
35 visits/cal yr	0.9489	0.9079
40 visits/cal yr	0.9519	0.9213
45 visits/cal yr	0.9545	0.9406
50 visits/cal yr	0.9597	0.9470
60 visits/cal yr	0.9772	0.9652
90 visits/cal yr	0.9890	0.9860
Unlimited visits/cal yr	1.0000	1.0000
26 visits/cal yr	0.9158	N/A
24 visits/cal yr	0.8917	N/A

Table 66 MH part hosp

a. Copay

Copay	Factor
\$0	1.0000
\$2	0.9831
\$3	0.9747
\$5	0.9580
\$10	0.9168
\$15	0.8764
\$20	0.8369
\$25	0.7981
\$30	0.7526
\$35	0.7082
\$40	0.6649
\$45	0.6225
\$50	0.5812
\$55	0.5580
\$60	0.5363
\$65	0.5130
\$70	0.4912
\$75	0.4826

Table 66 MH part hosp

b1. Copay%

Copay%	Factor
10%	0.7216
15%	0.5800
20%	0.5014
25%	0.4485
30%	0.4280
40%	0.3668
50%	0.3057

Table 66 MH part hosp

Option	Part hosp Only Factor
\$0/\$0 1-4/5-Unlimited/CAL, SM2 \$0 Unlimited/CAL	1.0000
\$0/\$5 1-4/5-Unlimited/CAL, SM2 \$5 Unlimited/CAL	0.9580
\$0/\$10 1-4/5-Unlimited/CAL, SM2 \$10 Unlimited/CAL	0.9168
\$0/\$15 1-4/5-Unlimited/CAL, SM2 \$15 Unlimited/CAL	0.8754
\$0/\$20 1-4/5-Unlimited/CAL, SM2 \$20 Unlimited/CAL	0.8369
\$0/\$25 1-4/5-Unlimited/CAL, SM2 \$25 Unlimited/CAL	0.7981
\$0/\$30 1-4/5-Unlimited/CAL, SM2 \$30 Unlimited/CAL	0.7598
\$0/\$35 1-4/5-Unlimited/CAL, SM2 \$35 Unlimited/CAL	0.7225
\$0/\$40 1-4/5-Unlimited/CAL, SM2 \$40 Unlimited/CAL	0.6869
\$0/\$45 1-4/5-Unlimited/CAL, SM2 \$45 Unlimited/CAL	0.6525
\$0/\$50 1-4/5-Unlimited/CAL, SM2 \$50 Unlimited/CAL	0.6187
\$0/\$55 1-4/5-Unlimited/CAL, SM2 \$55 Unlimited/CAL	0.5860
\$0/\$60 1-4/5-Unlimited/CAL, SM2 \$60 Unlimited/CAL	0.5543
\$0/\$65 1-4/5-Unlimited/CAL, SM2 \$65 Unlimited/CAL	0.5230
\$0/\$70 1-4/5-Unlimited/CAL, SM2 \$70 Unlimited/CAL	0.4922
\$0/\$75 1-4/5-Unlimited/CAL, SM2 \$75 Unlimited/CAL	0.4625
\$0/V, 1-5 visits, \$0/V, 6+ visits	1.0000
\$0/V, 1-5 visits, \$2/V, 6+ visits	0.9904
\$0/V, 1-5 visits, \$3/V, 6+ visits	0.9856
\$0/V, 1-5 visits, \$5/V, 6+ visits	0.9762
\$0/V, 1-5 visits, \$10/V, 6+ visits	0.9528
\$0/V, 1-5 visits, \$15/V, 6+ visits	0.9293
\$0/V, 1-5 visits, \$20/V, 6+ visits	0.9073
\$0/V, 1-5 visits, \$25/V, 6+ visits	0.8853
\$0/V, 1-5 visits, \$30/V, 6+ visits	0.8655
\$0/V, 1-5 visits, \$35/V, 6+ visits	0.8443
\$0/V, 1-5 visits, \$40/V, 6+ visits	0.8207
\$0/V, 1-5 visits, \$45/V, 6+ visits	0.7956
\$0/V, 1-5 visits, \$50/V, 6+ visits	0.7692
\$0/V, 1-5 visits, \$55/V, 6+ visits	0.7440
\$0/V, 1-5 visits, \$60/V, 6+ visits	0.7361
\$0/V, 1-5 visits, \$65/V, 6+ visits	0.7234
\$0/V, 1-5 visits, \$70/V, 6+ visits	0.7110
\$0/V, 1-5 visits, \$75/V, 6+ visits	0.7062
\$25/V, 1-40 visits, \$30/V, 41+ visits	0.7946
\$25/V, 1-40 visits, \$35/V, 41+ visits	0.7912
\$25/V, 1-40 visits, \$40/V, 41+ visits	0.7873
\$0/V, 1-20 visits, \$10/V, 21+ visits	0.9822
\$0/V, 1-2 visits, \$10/V, 3-10 visits, \$25/V, 11+ visits	0.8856
\$0/V, 1-2 visits, \$10/V, 3-10 visits, \$25/V, 11-20 visits	0.7149
\$15/V, 1-5 visits, \$20/V, 6-30 visits, \$20/V, 31+ visits	0.6652
\$15/V, 1-5 visits, \$25/V, 6-30 visits, \$25/V, 31+ visits	0.5660
\$15/V, 1-5 visits, \$25/V, 6-30 visits, \$30/V, 31+ visits	0.4894
\$15/V, 1-5 visits, \$25/V, 6-30 visits, \$35/V, 31+ visits	0.4314
\$0/V/V visits 1-5, 65%/V visits 6-30, 60%/V visits 31+	0.4387
100%/50% 1-4/5-Unlimited/CAL, SM2 50% Unlimited/CAL	0.3057
100%/60% 1-4/5-Unlimited/CAL, SM2 60% Unlimited/CAL	0.3668
100%/70% 1-4/5-Unlimited/CAL, SM2 70% Unlimited/CAL	0.4280
100%/75% 1-4/5-Unlimited/CAL, SM2 75% Unlimited/CAL	0.4585
100%/80% 1-4/5-Unlimited/CAL, SM2 80% Unlimited/CAL	0.5014
50%/V visits 1-5, 50%/V visits 6-20	0.2403
60%/V visits 1-5, 50%/V visits 6-20	0.2697
70%/V visits 1-5, 50%/V visits 6-20	0.2931
75%/V visits 1-5, 50%/V visits 6-20	0.3064
80%/V visits 1-5, 50%/V visits 6-20	0.3249
85%/V visits 1-5, 50%/V visits 6-20	0.3589
90%/V visits 1-5, 50%/V visits 6-20	0.4205
80%/V visits 1-5, 70%/V visits 6+	0.5335
80%/V visits 1-5, 75%/V visits 6+	0.6706
20% for the first 5 visits, 35% for visits 6-30 and 40% for 31+ visits	0.4387
20% for visits 1-5 and 30% for 6+ visits	0.4597
20% for the first 5 visits, 35% for visits 6-30 and 50% for 31+ visits	0.4314
25% for visits 1-40 and 30% for 41+ visits	0.4562
25% for visits 1-40 and 40% for 41+ visits	0.4515
75%/V visits 1-40, 70%/V visits 41+ per plan year	0.4562
75%/V visits 1-40, 70%/V visits 41+	0.4562
0% visits 1-4, 10% after \$0 Copay 5+ visits	0.9178
0% visits 1-4, 10% after \$2 Copay 5+ visits	0.8099
0% visits 1-4, 10% after \$5 Copay 5+ visits	0.7980
0% visits 1-4, 10% after \$10 Copay 5+ visits	0.7786
0% visits 1-4, 10% after \$15 Copay 5+ visits	0.7595
0% visits 1-4, 10% after \$20 Copay 5+ visits	0.7408
0% visits 1-4, 10% after \$25 Copay 5+ visits	0.7225
0% visits 1-4, 10% after \$30 Copay 5+ visits	0.7010
0% visits 1-4, 10% after \$35 Copay 5+ visits	0.6801
0% visits 1-4, 10% after \$40 Copay 5+ visits	0.6596

Table 66 MH part hosp

Option	Part hosp Only Factor
0% visits 1-4, 10% after \$45 Copay 5+ visits	0.6390
0% visits 1-4, 10% after \$50 Copay 5+ visits	0.6201
0% visits 1-4, 10% after \$55 Copay 5+ visits	0.6091
0% visits 1-4, 10% after \$60 Copay 5+ visits	0.5984
0% visits 1-4, 10% after \$65 Copay 5+ visits	0.5879
0% visits 1-4, 10% after \$70 Copay 5+ visits	0.5776
0% visits 1-4, 20% after \$75 Copay 5+ visits	0.5735
0% visits 1-4, 20% after \$80 Copay 5+ visits	0.5717
0% visits 1-4, 20% after \$2 Copay 5+ visits	0.6682
0% visits 1-4, 20% after \$5 Copay 5+ visits	0.6600
0% visits 1-4, 20% after \$10 Copay 5+ visits	0.6600
0% visits 1-4, 20% after \$15 Copay 5+ visits	0.6332
0% visits 1-4, 20% after \$20 Copay 5+ visits	0.6202
0% visits 1-4, 20% after \$25 Copay 5+ visits	0.6075
0% visits 1-4, 20% after \$30 Copay 5+ visits	0.5953
0% visits 1-4, 20% after \$40 Copay 5+ visits	0.5780
0% visits 1-4, 20% after \$45 Copay 5+ visits	0.5638
0% visits 1-4, 20% after \$50 Copay 5+ visits	0.5499
0% visits 1-4, 20% after \$55 Copay 5+ visits	0.5363
0% visits 1-4, 20% after \$60 Copay 5+ visits	0.5287
0% visits 1-4, 20% after \$65 Copay 5+ visits	0.5213
0% visits 1-4, 20% after \$70 Copay 5+ visits	0.5140
0% visits 1-4, 20% after \$75 Copay 5+ visits	0.5068
0% visits 1-4, 30% after \$0 Copay 5+ visits	0.5040
0% visits 1-4, 30% after \$2 Copay 5+ visits	0.6297
0% visits 1-4, 30% after \$5 Copay 5+ visits	0.6210
0% visits 1-4, 30% after \$10 Copay 5+ visits	0.6139
0% visits 1-4, 30% after \$15 Copay 5+ visits	0.6024
0% visits 1-4, 30% after \$20 Copay 5+ visits	0.5911
0% visits 1-4, 30% after \$25 Copay 5+ visits	0.5800
0% visits 1-4, 30% after \$30 Copay 5+ visits	0.5691
0% visits 1-4, 30% after \$35 Copay 5+ visits	0.5584
0% visits 1-4, 30% after \$40 Copay 5+ visits	0.5440
0% visits 1-4, 30% after \$45 Copay 5+ visits	0.5319
0% visits 1-4, 30% after \$50 Copay 5+ visits	0.5200
0% visits 1-4, 30% after \$55 Copay 5+ visits	0.5084
0% visits 1-4, 30% after \$60 Copay 5+ visits	0.4973
0% visits 1-4, 30% after \$65 Copay 5+ visits	0.4856
0% visits 1-4, 30% after \$70 Copay 5+ visits	0.4893
0% visits 1-4, 30% after \$75 Copay 5+ visits	0.4832
0% visits 1-4, 40% after \$0 Copay 5+ visits	0.4808
0% visits 1-4, 40% after \$2 Copay 5+ visits	0.5687
0% visits 1-4, 40% after \$5 Copay 5+ visits	0.5616
0% visits 1-4, 40% after \$10 Copay 5+ visits	0.5513
0% visits 1-4, 40% after \$15 Copay 5+ visits	0.5467
0% visits 1-4, 40% after \$20 Copay 5+ visits	0.5360
0% visits 1-4, 40% after \$25 Copay 5+ visits	0.5283
0% visits 1-4, 40% after \$30 Copay 5+ visits	0.5157
0% visits 1-4, 40% after \$35 Copay 5+ visits	0.5053
0% visits 1-4, 40% after \$40 Copay 5+ visits	0.4951
0% visits 1-4, 40% after \$45 Copay 5+ visits	0.4852
0% visits 1-4, 40% after \$50 Copay 5+ visits	0.4796
0% visits 1-4, 40% after \$55 Copay 5+ visits	0.4742
0% visits 1-4, 40% after \$60 Copay 5+ visits	0.4688
0% visits 1-4, 40% after \$65 Copay 5+ visits	0.4636
0% visits 1-4, 40% after \$70 Copay 5+ visits	0.4615
0% visits 1-4, 50% after \$0 Copay 5+ visits	0.5419
0% visits 1-4, 50% after \$2 Copay 5+ visits	0.5423
0% visits 1-4, 50% after \$5 Copay 5+ visits	0.5373
0% visits 1-4, 50% after \$10 Copay 5+ visits	0.5291
0% visits 1-4, 50% after \$15 Copay 5+ visits	0.5210
0% visits 1-4, 50% after \$20 Copay 5+ visits	0.5131
0% visits 1-4, 50% after \$25 Copay 5+ visits	0.5053
0% visits 1-4, 50% after \$30 Copay 5+ visits	0.4962
0% visits 1-4, 50% after \$35 Copay 5+ visits	0.4873
0% visits 1-4, 50% after \$40 Copay 5+ visits	0.4787
0% visits 1-4, 50% after \$45 Copay 5+ visits	0.4702
0% visits 1-4, 50% after \$50 Copay 5+ visits	0.4619
0% visits 1-4, 50% after \$55 Copay 5+ visits	0.4573
0% visits 1-4, 50% after \$60 Copay 5+ visits	0.4527
0% visits 1-4, 50% after \$65 Copay 5+ visits	0.4483
0% visits 1-4, 50% after \$70 Copay 5+ visits	0.4439
0% visits 1-4, 50% after \$75 Copay 5+ visits	0.4422
N/A	0.0000

Table 66 MH part hosp

d. Freemax	MH part hosp NF Factor	All OP MH & SA Combined Factor
20 visits/cal yr	NA	0.7808
200 visits/cal yr	NA	0.9995
25 visits/cal yr	NA	0.8354
30 visits/cal yr	NA	0.8784
35 visits/cal yr	NA	0.9079
40 visits/cal yr	NA	0.9213
45 visits/cal yr	NA	0.9406
50 visits/cal yr	NA	0.9470
60 visits/cal yr	0.9838	0.9652
90 visits/cal yr	NA	0.9660
Unlimited visits/cal yr	1.0000	1.0000
30 visits/cal yr, (SMI) unlimited cell yr	0.8932	N/A
120 visits/cal yr	1.0000	N/A

Table 67 SANF

a. Copay	Factor
\$0	0.9894
\$2	0.9894
\$3	0.9542
\$5	0.9243
\$10	0.8516
\$15	0.7818
\$20	0.7180
\$25	0.6511
\$30	0.5804
\$35	0.5136
\$40	0.4505
\$45	0.3912
\$50	0.3357
\$55	0.3029
\$60	0.2725
\$65	0.2423
\$70	0.2146
\$75	0.2003

Table 67 SANF

b1. Copay%	Factor
10%	0.9129
15%	0.7266
20%	0.6451
25%	0.5624
30%	0.4814
40%	0.3380
50%	0.2397

Table 67 SANF

b2. Step Coinsurance Plans	SA NF Only Factor
\$0/V 1-4 visits \$0V 5+ visits	1.0000
\$0/V 1-4 visits \$5/V 5+ visits	0.9494
\$0/V 1-4 visits \$10/V 5+ visits	0.9007
\$0/V 1-4 visits \$15/V 5+ visits	0.8541
\$0/V 1-4 visits \$20/V 5+ visits	0.8094
\$0/V 1-4 visits \$25/V 5+ visits	0.7666
\$0/V 1-4 visits \$30/V 5+ visits	0.7194
\$0/V 1-4 visits \$35/V 5+ visits	0.6746
\$0/V 1-4 visits \$40/V 5+ visits	0.6324
\$0/V 1-4 visits \$45/V 5+ visits	0.5928
\$0/V 1-4 visits \$50/V 5+ visits	0.5556
\$0/V 1-4 visits \$55/V 5+ visits	0.5337
\$0/V 1-4 visits \$60/V 5+ visits	0.5129
\$0/V 1-4 visits \$65/V 5+ visits	0.4932
\$0/V 1-4 visits \$70/V 5+ visits	0.4746
\$0/V 1-4 visits \$75/V 5+ visits	0.4561
\$0/V 1-5 visits, \$0V, 6-80 visits	1.0000
\$0/V 1-5 visits, \$2V, 6-80 visits	0.9723
\$0/V 1-5 visits, \$3V, 6-80 visits	0.9636
\$0/V 1-5 visits, \$5V, 6-80 visits	0.9464
\$0/V 1-5 visits, \$10V, 6-80 visits	0.9045
\$0/V 1-5 visits, \$15V, 6-80 visits	0.8643
\$0/V 1-5 visits, \$20V, 6-80 visits	0.8258
\$0/V 1-5 visits, \$25V, 6-80 visits	0.7899
\$0/V 1-5 visits, \$30V, 6-80 visits	0.7482
\$0/V 1-5 visits, \$35V, 6-80 visits	0.7097
\$0/V 1-5 visits, \$40V, 6-80 visits	0.6734
\$0/V 1-5 visits, \$45V, 6-80 visits	0.6392
\$0/V 1-5 visits, \$50V, 6-80 visits	0.6072
\$0/V 1-5 visits, \$55V, 6-80 visits	0.5784
\$0/V 1-5 visits, \$60V, 6-80 visits	0.5704
\$0/V 1-5 visits, \$65V, 6-80 visits	0.5535
\$0/V 1-5 visits, \$70V, 6-80 visits	0.5375
\$0/V 1-5 visits, \$75V, 6-80 visits	0.5293
\$25V, 1-40 visits, \$30V, 41+ visits	0.6482
\$25V, 1-40 visits, \$35V, 41+ visits	0.6456
\$25V, 1-40 visits, \$40V, 41+ visits	0.6430
\$0/V, 1-20 visits, \$10V, 21+ visits	0.9745
\$0/V, 1-2 visits, \$10V, 3-10 visits, \$25V, 11+ visits	0.7988
\$0/V, 1-2 visits, \$10V, 3-10 visits, \$25V, 11-20 visits	0.6867
\$15/V, 1-5 visits, \$20V, 6-30 visits, \$20V, 31+ visits	0.7426
\$15/V, 1-5 visits, \$25V, 6-30 visits, \$25V, 31+ visits	0.7052
\$15/V, 1-5 visits, \$25V, 6-30 visits, \$30V, 31+ visits	0.6994
\$15/V, 1-5 visits, \$25V, 6-30 visits, \$35V, 31+ visits	0.6959
80%/V Visits 1-5 65%/V visits 6-30 50%/V visits 31+	0.4916
80%/V Visits 1-5 65%/V visits 6-30 60%/V visits 31+	0.4997
100%/V visits 1-4, 50%/V visits 5+	0.4914
100%/V visits 1-4, 60%/V visits 5+	0.5572
100%/V visits 1-4, 70%/V visits 5+	0.6531
100%/V visits 1-4, 75%/V visits 5+	0.7073
100%/V visits 1-4, 80%/V visits 5+	0.7626
100%/V visits 1-4, 90%/V visits 5+	0.8748
50%/V visits 1-5, 50%/V visits 6-20	0.1984
60%/V visits 1-5, 50%/V visits 6-20	0.2391
70%/V visits 1-5, 50%/V visits 6-20	0.2965
75%/V visits 1-5, 50%/V visits 6-20	0.3320
80%/V visits 1-5, 50%/V visits 6-20	0.3662
85%/V visits 1-5, 50%/V visits 6-20	0.3999
90%/V visits 1-5, 50%/V visits 6-20	0.4357
80%/V visits 1-5, 70%/V visits 6+	0.5492
80%/V visits 1-5, 75%/V visits 6+	0.5967
20% for the first 5 visits, 35% for visits 6-30 and 40% for 31+ visits	0.4916
20% for the first 5 visits, 35% for visits 6-30 and 50% for 31+ visits	0.4916
25% for visits 1-40 and 30% for 41+ visits	0.5492
25% for visits 1-40 and 30% for 41+ visits	0.5592
25% for visits 1-40 and 40% for 41+ visits	0.5535
75%/V visits 1-40, 70%/V visits 41+ per plan year	0.5592
75%/V visits 1-40, 70%/V visits 41+	0.5592
0% visits 1-4, 10% after \$0 Copay 5+ visits	0.8748
0% visits 1-4, 10% after \$2 Copay 5+ visits	0.8562
0% visits 1-4, 10% after \$5 Copay 5+ visits	0.8337
0% visits 1-4, 10% after \$10 Copay 5+ visits	0.7992
0% visits 1-4, 10% after \$15 Copay 5+ visits	0.7562
0% visits 1-4, 10% after \$20 Copay 5+ visits	0.7199
0% visits 1-4, 10% after \$25 Copay 5+ visits	0.6851
0% visits 1-4, 10% after \$30 Copay 5+ visits	0.6467
0% visits 1-4, 10% after \$35 Copay 5+ visits	0.6104

Table 67 SANF

b2. Step Coinsurance Plans	SA NF Only Factor
0% visits 1-4, 10% after \$40 Copay 5+ visits	0.6761
0% visits 1-4, 10% after \$45 Copay 5+ visits	0.5438
0% visits 1-4, 10% after \$50 Copay 5+ visits	0.5136
0% visits 1-4, 10% after \$55 Copay 5+ visits	0.4958
0% visits 1-4, 10% after \$60 Copay 5+ visits	0.4789
0% visits 1-4, 10% after \$65 Copay 5+ visits	0.4629
0% visits 1-4, 10% after \$70 Copay 5+ visits	0.4478
0% visits 1-4, 10% after \$75 Copay 5+ visits	0.4400
0% visits 1-4, 20% after \$0 Copay 5+ visits	0.7626
0% visits 1-4, 20% after \$2 Copay 5+ visits	0.7494
0% visits 1-4, 20% after \$5 Copay 5+ visits	0.7300
0% visits 1-4, 20% after \$10 Copay 5+ visits	0.7300
0% visits 1-4, 20% after \$15 Copay 5+ visits	0.6685
0% visits 1-4, 20% after \$20 Copay 5+ visits	0.6396
0% visits 1-4, 20% after \$25 Copay 5+ visits	0.6121
0% visits 1-4, 20% after \$30 Copay 5+ visits	0.5816
0% visits 1-4, 20% after \$35 Copay 5+ visits	0.5527
0% visits 1-4, 20% after \$40 Copay 5+ visits	0.5255
0% visits 1-4, 20% after \$45 Copay 5+ visits	0.4999
0% visits 1-4, 20% after \$50 Copay 5+ visits	0.4760
0% visits 1-4, 20% after \$55 Copay 5+ visits	0.4618
0% visits 1-4, 20% after \$60 Copay 5+ visits	0.4484
0% visits 1-4, 20% after \$65 Copay 5+ visits	0.4367
0% visits 1-4, 20% after \$70 Copay 5+ visits	0.4237
0% visits 1-4, 20% after \$75 Copay 5+ visits	0.4176
0% visits 1-4, 30% after \$0 Copay 5+ visits	0.6631
0% visits 1-4, 30% after \$2 Copay 5+ visits	0.6432
0% visits 1-4, 30% after \$5 Copay 5+ visits	0.6287
0% visits 1-4, 30% after \$10 Copay 5+ visits	0.6053
0% visits 1-4, 30% after \$15 Copay 5+ visits	0.5829
0% visits 1-4, 30% after \$20 Copay 5+ visits	0.5613
0% visits 1-4, 30% after \$25 Copay 5+ visits	0.5408
0% visits 1-4, 30% after \$30 Copay 5+ visits	0.5180
0% visits 1-4, 30% after \$35 Copay 5+ visits	0.4965
0% visits 1-4, 30% after \$40 Copay 5+ visits	0.4762
0% visits 1-4, 30% after \$45 Copay 5+ visits	0.4571
0% visits 1-4, 30% after \$50 Copay 5+ visits	0.4392
0% visits 1-4, 30% after \$55 Copay 5+ visits	0.4286
0% visits 1-4, 30% after \$60 Copay 5+ visits	0.4186
0% visits 1-4, 30% after \$65 Copay 5+ visits	0.4091
0% visits 1-4, 30% after \$70 Copay 5+ visits	0.4002
0% visits 1-4, 30% after \$75 Copay 5+ visits	0.3956
0% visits 1-4, 40% after \$0 Copay 5+ visits	0.5572
0% visits 1-4, 40% after \$2 Copay 5+ visits	0.5502
0% visits 1-4, 40% after \$5 Copay 5+ visits	0.5401
0% visits 1-4, 40% after \$10 Copay 5+ visits	0.5236
0% visits 1-4, 40% after \$15 Copay 5+ visits	0.5078
0% visits 1-4, 40% after \$20 Copay 5+ visits	0.4927
0% visits 1-4, 40% after \$25 Copay 5+ visits	0.4783
0% visits 1-4, 40% after \$30 Copay 5+ visits	0.4623
0% visits 1-4, 40% after \$35 Copay 5+ visits	0.4472
0% visits 1-4, 40% after \$40 Copay 5+ visits	0.4329
0% visits 1-4, 40% after \$45 Copay 5+ visits	0.4195
0% visits 1-4, 40% after \$50 Copay 5+ visits	0.4070
0% visits 1-4, 40% after \$55 Copay 5+ visits	0.3966
0% visits 1-4, 40% after \$60 Copay 5+ visits	0.3925
0% visits 1-4, 40% after \$65 Copay 5+ visits	0.3869
0% visits 1-4, 40% after \$70 Copay 5+ visits	0.3795
0% visits 1-4, 40% after \$75 Copay 5+ visits	0.3764
0% visits 1-4, 50% after \$0 Copay 5+ visits	0.4914
0% visits 1-4, 50% after \$5 Copay 5+ visits	0.4865
0% visits 1-4, 50% after \$10 Copay 5+ visits	0.4793
0% visits 1-4, 50% after \$15 Copay 5+ visits	0.4676
0% visits 1-4, 50% after \$20 Copay 5+ visits	0.4465
0% visits 1-4, 50% after \$25 Copay 5+ visits	0.4355
0% visits 1-4, 50% after \$30 Copay 5+ visits	0.4242
0% visits 1-4, 50% after \$35 Copay 5+ visits	0.4134
0% visits 1-4, 50% after \$40 Copay 5+ visits	0.4033
0% visits 1-4, 50% after \$45 Copay 5+ visits	0.3938
0% visits 1-4, 50% after \$50 Copay 5+ visits	0.3849
0% visits 1-4, 50% after \$55 Copay 5+ visits	0.3792
0% visits 1-4, 50% after \$60 Copay 5+ visits	0.3747
0% visits 1-4, 50% after \$65 Copay 5+ visits	0.3700
0% visits 1-4, 50% after \$70 Copay 5+ visits	0.3655
0% visits 1-4, 50% after \$75 Copay 5+ visits	0.3632
N/A	0.0000

Table 67 SANF

c. Freemax	All OP MH & SA	
	SA NF	SA Combined
Maximum	Factor	Factor
20 visits/cal yr	0.8278	0.7858
200 visits/cal yr	1.0000	0.9895
25 visits/cal yr	0.8818	0.8354
30 visits/cal yr	0.9179	0.8784
35 visits/cal yr	0.9429	0.9079
40 visits/cal yr	0.9600	0.9213
45 visits/cal yr	0.9720	0.9406
50 visits/cal yr	0.9800	0.9470
60 visits/cal yr	0.9896	0.9652
80 visits/cal yr	0.9991	0.9860
Unlimited visits/cal yr	1.0000	1.0000
26 visits/cal yr	0.8902	N/A
120 day max/lifetime	0.8500	N/A
120 visits/cal yr	1.0000	N/A
20 visits/cal yr - Alcohol Only	0.4719	N/A
20 visits/cal yr combined with OP detox	0.8278	N/A
20 visits/cal yr for Drug Abuse, unlimited for Alcoholism	0.9260	N/A
3 episodes/lifetime, IP & OP combined	0.9616	N/A
44 visits/cal yr	0.9713	N/A
50 visits/cal yr combined with OP Detox	0.9800	N/A
80 visits/cal yr, 120 visits/lifetime	0.9701	N/A
85 visits/cal yr	0.9927	N/A
14 visits/cal yr	0.7223	N/A
81 visits/cal yr	0.9993	N/A

Table 67 SANF

d. MA specific	Factor
Alc Only	0.5700
Alc and Drug	1.0000

Table 68 Private Duty Nursing

a. Coinsurance	
Copay	Factor
10%	0.8770
15%	0.8174
20%	0.7591
25%	0.7021
30%	0.6463
40%	0.5387
50%	0.4381
Not Covered	0.0000

Table 69 HHC

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9801
\$3	0.9702
\$5	0.9506
\$10	0.9024
\$15	0.8555
\$20	0.8099
\$25	0.7655
\$30	0.7223
\$35	0.6804
\$40	0.6397
\$45	0.6170
\$50	0.5945
\$55	0.5722
\$60	0.5502
\$65	0.5285
\$70	0.5070
\$75	0.4858
Not Covered	0.0000

Table 69 HHC

b. Copay%	
Copay%	Factor
10%	0.9393
15%	0.7641
20%	0.6921
25%	0.6236
30%	0.5584
40%	0.4660
50%	0.3818

Table 69 HHC

c. Maximum		w/o PDN
Maximum	Factor	
90-visit		0.7357
100-visit		0.7958
120-visit		0.8218
80-visit		0.7692
30-visit		0.6579
90-visit		0.7835
200-visit		0.8948
Unlimited		1.0000

Table 70 Hospice NF

a. Copay	
Copay	Factor
\$0	1.0000
\$2	1.0000
\$3	1.0000
\$5	1.0000
\$10	0.9979
\$15	1.0000
\$20	1.0000
\$25	1.0000
\$30	1.0000
\$35	1.0000
\$40	1.0000
\$45	1.0000
\$50	1.0000
\$55	1.0000
\$60	1.0000
Not Covered	0.0000

Table 70 Hospice NF

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 70 Hospice NF

c. Benefit Maximum	
Maximum	Factor
\$5,000 Lifetime	0.5388
\$9,100 per benefit period of 3 months of continuous care, 3 benefit periods per lifetime. Bereavement Care limited to separate \$1,500 maximum during 12 months following death	0.7162
\$10,000 Lifetime	0.7072
\$10,000 Combined IP, OP & NF	0.7071
Unlimited	1.0000

Table 71 Injectables - AF

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9996
\$3	0.9994
\$5	0.9990
\$10	0.9979
\$15	0.9969
\$20	0.9958
\$25	0.9948
\$30	0.9937
\$35	0.9927
\$40	0.9916
\$45	0.9906
\$50	0.9895
\$55	0.9885
\$60	0.9874
\$65	0.9864
\$70	0.9853
\$75	0.9843
\$100	0.9790
\$125	0.9738
\$150	0.9685
\$175	0.9633
\$200	0.9580
\$250	0.9475
\$300	0.9370
\$350	0.9265
\$400	0.9160
\$500	0.8951

Table 71 Injectables - AF

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 72 Injectables - Office

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9996
\$3	0.9994
\$5	0.9990
\$10	0.9979
\$15	0.9969
\$20	0.9958
\$25	0.9948
\$30	0.9937
\$35	0.9927
\$40	0.9916
\$45	0.9906
\$50	0.9895
\$55	0.9885
\$60	0.9874
\$65	0.9864
\$70	0.9853
\$75	0.9843

Table 72 Injectables - Office

b. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 73 Durable Medical Equipment

a. Copay%	
Copay%	Factor
0%	1.0000
5%	0.9382
10%	0.8739
15%	0.8130
20%	0.7506
25%	0.6856
30%	0.6230
35%	0.5628
40%	0.5050
45%	0.4496
50%	0.4060
Not covered	0.0000

Table 73 Durable Medical Equipment

b. Maximum	Copay%											
	0%	5%	10%	15%	20%	25%	30%	35%	40%	45%	50%	
Dollar Maximum	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	
\$50	0.1949	0.2051	0.2165	0.2283	0.2406	0.2539	0.2684	0.2844	0.3018	0.3208	0.3414	
\$500	0.3898	0.3983	0.4079	0.4185	0.4305	0.4440	0.4595	0.4754	0.4925	0.5091	0.5261	
\$750	0.4711	0.4798	0.4895	0.5003	0.5124	0.5261	0.5376	0.5508	0.5662	0.5811	0.5975	
\$800	0.4821	0.4914	0.5017	0.5132	0.5261	0.5368	0.5490	0.5631	0.5771	0.5922	0.6078	
\$1,000	0.5261	0.5346	0.5439	0.5544	0.5662	0.5771	0.5891	0.6015	0.6147	0.6304	0.6491	
\$1,250	0.5662	0.5748	0.5844	0.5941	0.6040	0.6147	0.6270	0.6412	0.6553	0.6692	0.6850	
\$2,000	0.6491	0.6569	0.6655	0.6751	0.6850	0.6956	0.7087	0.7217	0.7348	0.7494	0.7659	
\$2,500	0.6860	0.6943	0.7036	0.7141	0.7242	0.7348	0.7465	0.7599	0.7725	0.7873	0.8034	
\$3,000	0.7178	0.7258	0.7348	0.7446	0.7546	0.7659	0.7772	0.7896	0.8024	0.8122	0.8239	
\$5,000	0.8024	0.8081	0.8144	0.8214	0.8276	0.8338	0.8408	0.8496	0.8595	0.8691	0.8798	
\$7,500	0.8461	0.8534	0.8595	0.8658	0.8724	0.8798	0.8856	0.8924	0.8991	0.9057	0.9137	
\$10,000	0.8798	0.8841	0.8889	0.8942	0.8991	0.9039	0.9095	0.9154	0.9211	0.9278	0.9358	
\$20,000	0.9358	0.9384	0.9413	0.9446	0.9482	0.9516	0.9554	0.9590	0.9613	0.9641	0.9674	
Unlimited	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	

Table 74 Diabetic Supplies

Coinsurance	Factor
Covered	1.0000
Not Covered	0.0000

Table 75 Prosthetics and Orthotics

a. Copy	
Copy	Factor
\$0	1.0000
\$2	0.9876
\$3	0.9964
\$5	0.9940
\$10	0.9879
\$15	0.9819
\$20	0.9788
\$25	0.9688
\$30	0.9637
\$35	0.9577
\$40	0.9516
\$45	0.9456
\$50	0.9395
\$55	0.9335
\$60	0.9274
\$65	0.9214
\$70	0.9153
\$75	0.9093
Not covered	

Table 75 Prosthetics and Orthotics

b. Copy %	
Copy %	Factor
0%	1.0000
5%	0.9500
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
35%	0.6500
40%	0.6000
45%	0.5500
50%	0.5000
Not covered	0.5000

Table 76 Lens Reimbursement

Benefit	Every 12 months	Every 24 months	Every 36 months
	Factor	Factor	Factor
\$35	0.3879	0.0864	0.0407
\$70	0.4547	0.1981	0.0640
\$75	0.4679	0.2058	0.0867
\$100	0.5231	0.2882	0.1458
\$125	0.5766	0.3680	0.1784
\$150	0.6091	0.4166	0.2416
\$175	0.6343	0.4542	0.2925
\$200	0.6531	0.4823	0.3270
\$250	0.7402	0.6123	0.4960
\$300	0.8084	0.7140	0.6282
\$350	0.8557	0.7846	0.7200
Not Covered	0.0000	0.0000	0.0000

Table 77 Hearing Aid

a. Copy	
Copy	Factor
\$0	1.0000
\$2	0.9984
\$3	0.9977
\$5	0.9961
\$10	0.9922
\$15	0.9883
\$20	0.9844
\$25	0.9805
\$30	0.9766
\$35	0.9727
\$40	0.9688
\$45	0.9649
\$50	0.9610
\$55	0.9571
\$60	0.9532
\$65	0.9493
\$70	0.9454
\$75	0.9415
\$100	0.9220
\$110	0.9142
\$125	0.9025
\$150	0.8830
\$175	0.8636
\$200	0.8441
Not Covered	0.0000

Table 77 Hearing Aid

b. Copy %	
Copy %	Factor
0%	0.9000
10%	0.8500
15%	0.8000
20%	0.7500
25%	0.7000
30%	0.6500
40%	0.6000
50%	0.5500
Not Covered	0.0000

Table 77 Hearing Aid

c. Hearing Aid Limits	
Frequency	Factor
1 hearing aid per ear to \$1,400 maximum per ear every 36 months to age 19. For age 19 and older, \$600 per ear, every three years beginning with the initial purchase of the hearing aid.	0.3070
\$1,400 per ear every 36 months	0.5600
\$1,400/ 36 months for child	0.0500
1 hearing aid to a maximum of \$1,000 per ear during any 24 month period for children thru age 15	0.0320
1 hearing aid per ear to \$1,000 maximum per ear every 3 years for child to age 24	0.0450
1 hearing aid to a maximum of \$1,000 per ear during any 24 month period for children under age 13	0.0280
1 hearing aid per ear every 24 months for Children under age 13	0.0510
1 hearing aid to a maximum of \$1,400 per ear during any 36 month period for children under age 18	0.0510
1 hearing aid per ear to a maximum of \$2,500 every 36 months to age 22	0.0780
1 hearing aid per ear every 5 years for child to age 18. Hearing aid replacement can occur more frequently if medically necessary.	0.0900
Child to age 1, initial hearing aids covered for each impaired ear	0.0100
1st hearing aid per ear including ear mold and batteries and follow up visits up to 6 months after aid fitting. In addition, 1st hearing aid per ear for children under the age of 1	0.0000
1 per ear per 36 mos to age 19	0.0880
4 ear molds per calendar year for children to age 2, age 2 to age 18, 2 per 48 months	0.9000
Unlimited/36 Months for Adult and Child	1.0000
\$100 per 12 months	0.0337
\$400 per 12 months	0.1304
\$1,000 per 24 months	0.3032
\$1,500 per 24 months	0.4289
\$1,400 per 36 months	0.3908
\$5,000 per 36 months	0.8369
Unlimited	1.0000

Table 78 PKU

a. Copy	
Copy %	Factor
0%	Factor
10%	1.0000
15%	0.9000
20%	0.8500
25%	0.8000
30%	0.7500
40%	0.7000
50%	0.6000
Not Covered	0.5000

Table 78 PKU

b. Frequency Maximum		Factor
Child to age 3		0.2500
Child to age 6 w/\$5000 cal yr max		0.3200
Child to age 12		0.5400
Thru age 24 w/\$2500 cal yr max		0.5000
Nutritional Support - Child to age 12. Low protein modified food products, amino acid modified supplements, and oral specialized formulas for the dietary treatment of an inherited metabolic disease		0.5400
Unlimited		1.0000

Table 79 Infertility - AI/OI NF

a. Copy	
Copy	Factor
\$0	1.0000
\$2	0.9901
\$3	0.9852
\$5	0.9753
\$10	0.9596
\$15	0.9258
\$20	0.9011
\$25	0.8764
\$30	0.8517
\$35	0.8269
\$40	0.8022
\$45	0.7775
\$50	0.7528
\$55	0.7280
\$60	0.7033
\$65	0.6786
\$70	0.6539
\$75	0.6292
Not covered	0.0000

Table 79 Infertility - AI/OI NF

b. Copy %	
Copy %	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 79 Infertility - AI/OI NF

c. Dollar Maximum		
Dollar	Annual Factor	Lifetime Factor
\$5,000	0.9950	0.9940
\$10,000	1.0000	1.0000
\$15,000	1.0000	1.0000
\$20,000	1.0000	1.0000
\$25,000	1.0000	1.0000
\$100,000	1.0000	1.0000
\$1,000,000	1.0000	1.0000
Unlimited	1.0000	1.0000

Table 79 Infertility - AI/OI NF

d. Other Maximums	
Maximum Attempts	Factor
2 per calendar year	0.8150
3 attempts of intrauterine insemination (IUI) and artificial insemination (AI) per lifetime and 4 attempts of ovulation induction (OI) per lifetime to age 40	0.8230
3 courses of treatment per lifetime	0.7750
4 attempts per lifetime, if live birth, 2 additional attempts covered. Includes RX therapy	0.9190
4 attempts per lifetime, if live birth, 2 additional attempts covered.	0.9190
6 attempts of intrauterine insemination (IUI) ovulation induction (OI) and artificial insemination (AI) per lifetime	0.9680
Unlimited	1.0000
Not covered	0.0000

Table 80 ART NF

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9992
\$3	0.9989
\$5	0.9981
\$10	0.9962
\$15	0.9943
\$20	0.9925
\$25	0.9908
\$30	0.9887
\$35	0.9868
\$40	0.9849
\$45	0.9830
\$50	0.9811
\$55	0.9793
\$60	0.9774
\$65	0.9755
\$70	0.9736
\$75	0.9717
Not covered	0.0000

Table 80 ART NF

b. Copay%	
Copay%	Factor
10%	0.9200
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 80 ART NF

c. Dollar Maximum		
Dollar Maximum	Annual Factor	Lifetime Factor
\$5,000	0.6274	0.5529
\$10,000	0.8949	0.8213
\$15,000	0.9678	0.9389
\$20,000	0.9862	0.9724
\$25,000	0.9905	0.9800
\$100,000	0.9961	0.9910
\$1,000,000	1.0000	1.0000
Unlimited	1.0000	1.0000

Table 80 ART NF

d. Other Maximums	
Maximum Attempts	Factor
2 cycles per lifetime maximum, 2 embryo transfers per cycle for IVF, GIFT, ZIFT, low tubal ovum transfer, to age 40.	0.6038
2 per calendar year	0.7085
3 attempts per live birth for Invitro only, excludes all other ART benefits	0.8450
3 cycles per lifetime maximum with 3 embryo transfers per cycle for IVF, GIFT, ZIFT, low tubal ovum transfer	0.8450
3 attempts per live birth for Invitro/CSI only	0.8450
3 per lifetime	0.8450
4 attempts per lifetime, if live birth, 2 additional attempts covered, includes Rx therapy.	0.8840
4 attempts per lifetime, if live birth, 2 additional attempts covered	0.8840
4 Oocyte retrievals max. However, if live birth max of 2 more retrievals, no more than 6 retrievals per lifetime	0.8840
6 courses of treatment per lifetime	0.8990
includes Rx therapy, 4 Oocyte retrievals max. However, if live birth max of 2 more retrievals, no more than 6 retrievals per lifetime	0.8840
IVF, GIFT, ZIFT, sperm/egg procurement, processing, banking, freezing & storage of sperm or embryo	1.0000
Unlimited for Invitro only, excludes all other ART benefits	0.9900
Unlimited	1.0000
Not covered	0.0000

Table 81 TMJ Disorder

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9775
\$3	0.9663
\$5	0.9442
\$10	0.8898
\$15	0.8369
\$20	0.7856
\$25	0.7357
\$30	0.6872
\$35	0.6403
\$40	0.5949
\$45	0.5509
\$50	0.5084
\$55	0.4679
\$60	0.4677
\$65	0.4480
\$70	0.4286
\$75	0.4096
Not covered	0.0000

Table 81 TMJ Disorder

b1. Copay%	
Copay%	Factor
10%	0.8218
15%	0.7391
20%	0.6809
25%	0.5870
30%	0.5174
40%	0.3913
50%	0.3105

Table 82 Tubal Ligation

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9970
\$3	0.9955
\$4	0.9924
\$10	0.9849
\$15	0.9774
\$20	0.9689
\$25	0.9624
\$30	0.9496
\$35	0.9389
\$40	0.9242
\$45	0.9117
\$50	0.8992
\$55	0.8868
\$60	0.8745
\$65	0.8623
\$70	0.8502
\$75	0.8381

Table 82 Tubal Ligation

b1. Copay%	
Copay%	Factor
10%	0.8267
15%	0.7386
20%	0.6829
25%	0.5959
30%	0.5486
40%	0.4787
50%	0.3973

Table 83 Voluntary Abortion

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9976
\$3	0.9965
\$5	0.9941
\$10	0.9882
\$15	0.9824
\$20	0.9765
\$25	0.9706
\$30	0.9647
\$35	0.9588
\$40	0.9530
\$45	0.9471
\$50	0.9412
\$55	0.9353
\$60	0.9295
\$65	0.9236
\$70	0.9177
\$75	0.9118

Table 83 Voluntary Abortion

b1. Copay%	
Copay%	Factor
10%	0.8000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Table 84 Vasectomy

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9969
\$3	0.9953
\$5	0.9922
\$10	0.9844
\$15	0.9766
\$20	0.9688
\$25	0.9611
\$30	0.9473
\$35	0.9337
\$40	0.9202
\$45	0.9067
\$50	0.8934
\$55	0.8801
\$60	0.8670
\$65	0.8539
\$70	0.8410
\$75	0.8281

Table 84 Vasectomy

b1. Copay%	
Copay%	Factor
10%	0.8512
15%	0.7676
20%	0.6983
25%	0.6289
30%	0.5644
40%	0.4838
50%	0.4032

Table 85 Contraceptives

a. Copay	
Copay	Factor
\$0	1.0000
\$2	0.9976
\$3	0.9963
\$5	0.9941
\$10	0.9882
\$15	0.9824
\$20	0.9765
\$25	0.9706
\$30	0.9647
\$35	0.9588
\$40	0.9530
\$45	0.9471
\$50	0.9412
\$55	0.9353
\$60	0.9295
\$65	0.9236
\$70	0.9177
\$75	0.9118
Not Covered	0.0000

Table 85 Contraceptives

b1. Copay%	
Copay%	Factor
10%	0.8000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Include/Exclude Adjustment Factor Used in Column [2]	
Option	Factor
Include	1.0000
Exclude	0.0000

Table 85 Contraceptives

c. Other	
Option	Factor
Exclude	0.0000
Include Medical contra only	1.0000
Include Medical contra and oral contraceptives	2.0000
Include Medical contra and oral contra subject to the HCR mandate waive cost share	8.0000

Inpatient Pre-certification Adjustment Factor Used in Column [9]	
Option	Factor
Included	1.0000
\$500	1.0000
Excluded	1.1480
None	1.1480

Table 87 Self Injectables

b1. Copay%	
Copay%	Factor
10%	0.9000
15%	0.8500
20%	0.8000
25%	0.7500
30%	0.7000
40%	0.6000
50%	0.5000

Section III. Bottom Line Adjustments:

Table 89 Deductible Carryover

Adjusted Plan Deductible Amount	Factor
\$0	1.0000
\$50	1.0007
\$100	1.0013
\$150	1.0019
\$200	1.0025
\$250	1.0030
\$300	1.0035
\$350	1.0040
\$400	1.0044
\$450	1.0048
\$500	1.0052
\$550	1.0056
\$600	1.0059
\$650	1.0062
\$700	1.0065
\$750	1.0068
\$800	1.0071
\$850	1.0073
\$900	1.0076
\$950	1.0078
\$1,000	1.0080
\$1,250	1.0092
\$1,500	1.0104
\$2,000	1.0128
\$2,500	1.0151
\$3,000	1.0175
\$3,500	1.0199
\$4,000	1.0223
\$4,500	1.0246
\$5,000	1.0270
\$5,500	1.0293
\$6,000	1.0316
\$6,500	1.0339
\$7,000	1.0362
\$7,500	1.0385
\$8,000	1.0408
\$8,500	1.0431
\$9,000	1.0454
\$9,500	1.0477
\$10,000	1.0500
\$15,000	1.0505
\$20,000	1.0510
Not Applicable	1.0000

Table 90 Deductible

a. Deductible Applies to Med/Surg & Pharmacy Costs Are Not Integrated

Adjusted Plan Deductible Amount *	Percent of Services subject to Plan Deductible			
	>= 40%		<40%	
	Factor	Factor	Factor	Factor
	In network		Out-of-network	
\$0	1.0000	1.0000	1.0000	1.0000
\$50	0.9826	0.9874	0.9726	0.9845
\$100	0.9657	0.9833	0.9481	0.9695
\$150	0.9524	0.9756	0.9267	0.9554
\$200	0.9392	0.9683	0.9076	0.9420
\$250	0.9086	0.9424	0.8726	0.9108
\$300	0.8950	0.9333	0.8546	0.8963
\$350	0.8822	0.9247	0.8380	0.8824
\$400	0.8700	0.9163	0.8224	0.8689
\$450	0.8583	0.9083	0.8077	0.8558
\$500	0.8472	0.9003	0.7936	0.8430
\$550	0.8370	0.8932	0.7806	0.8312
\$600	0.8271	0.8863	0.7682	0.8196
\$650	0.8177	0.8795	0.7562	0.8084
\$700	0.8086	0.8730	0.7448	0.7977
\$750	0.7997	0.8665	0.7338	0.7871
\$800	0.7913	0.8604	0.7233	0.7769
\$850	0.7832	0.8544	0.7133	0.7670
\$900	0.7752	0.8485	0.7034	0.7572
\$950	0.7674	0.8427	0.6939	0.7476
\$1,000	0.7599	0.8370	0.6847	0.7383
\$1,250	0.7287	0.8141	0.6450	0.6982
\$1,500	0.7002	0.7922	0.6093	0.6609
\$2,000	0.6514	0.7531	0.5488	0.5945
\$2,500	0.6106	0.7188	0.4993	0.5375
\$3,000	0.5757	0.6885	0.4577	0.4885
\$3,500	0.5444	0.6599	0.4217	0.4461
\$4,000	0.5171	0.6340	0.3911	0.4104
\$4,500	0.4918	0.6092	0.3642	0.3787
\$5,000	0.4684	0.5856	0.3405	0.3504
\$5,500	0.4515	0.5693	0.3229	0.3290
\$6,000	0.4358	0.5537	0.3070	0.3096
\$6,500	0.4212	0.5389	0.2926	0.2922
\$7,000	0.4075	0.5247	0.2796	0.2766
\$7,500	0.3947	0.5111	0.2675	0.2624
\$8,000	0.3826	0.4983	0.2564	0.2493
\$8,500	0.3712	0.4862	0.2462	0.2376
\$9,000	0.3605	0.4745	0.2367	0.2266
\$9,500	0.3504	0.4632	0.2279	0.2163
\$10,000	0.3408	0.4523	0.2197	0.2069
\$15,000	0.2721	0.3692	0.1656	0.1408
\$20,000	0.2308	0.3174	0.1373	0.1101

* For HRA plans that contain a HealthFund Plan Deductible, the adjusted deductible amount is the sum of the HealthFund Plan Deductible and the Annual HealthFund Contribution.

Table 90 Deductible

b. Deductible Does Not Apply to Med/Surg & Pharmacy Costs Are Not Integrated

Adjusted Plan Deductible Amount *	Percent of Services subject to Plan Deductible			
	>= 40%		<40%	
	Factor	Factor	Factor	Factor
	In network		Out-of-network	
\$0	1.0000	1.0000	1.0000	1.0000
\$50	0.9770	0.9614	0.9680	0.9444
\$100	0.9546	0.9287	0.9395	0.8998
\$150	0.9337	0.9003	0.9148	0.8629
\$200	0.9140	0.8747	0.8929	0.8310
\$250	0.8777	0.8344	0.8557	0.7868
\$300	0.8583	0.8110	0.8356	0.7600
\$350	0.8400	0.7893	0.8172	0.7357
\$400	0.8227	0.7690	0.8000	0.7134
\$450	0.8062	0.7498	0.7838	0.6927
\$500	0.7905	0.7317	0.7684	0.6732
\$550	0.7759	0.7151	0.7542	0.6554
\$600	0.7620	0.6992	0.7406	0.6385
\$650	0.7485	0.6841	0.7276	0.6225
\$700	0.7355	0.6697	0.7152	0.6074
\$750	0.7234	0.6559	0.7033	0.5930
\$800	0.7117	0.6429	0.6920	0.5797
\$850	0.7003	0.6304	0.6811	0.5669
\$900	0.6893	0.6185	0.6706	0.5546
\$950	0.6787	0.6070	0.6604	0.5429
\$1,000	0.6685	0.5960	0.6505	0.5317
\$1,250	0.6248	0.5497	0.6081	0.4846
\$1,500	0.5861	0.5106	0.5704	0.4456
\$2,000	0.5220	0.4488	0.5072	0.3853
\$2,500	0.4702	0.4019	0.4562	0.3408
\$3,000	0.4274	0.3654	0.4142	0.3058
\$3,500	0.3909	0.3353	0.3784	0.2777
\$4,000	0.3601	0.3110	0.3483	0.2549
\$4,500	0.3330	0.2901	0.3222	0.2351
\$5,000	0.3089	0.2720	0.2995	0.2181
\$5,500	0.2907	0.2589	0.2825	0.2056
\$6,000	0.2745	0.2474	0.2673	0.1945
\$6,500	0.2599	0.2372	0.2538	0.1847
\$7,000	0.2468	0.2282	0.2416	0.1760
\$7,500	0.2349	0.2199	0.2304	0.1681
\$8,000	0.2241	0.2123	0.2203	0.1610
\$8,500	0.2142	0.2054	0.2109	0.1544
\$9,000	0.2052	0.1990	0.2023	0.1486
\$9,500	0.1968	0.1930	0.1945	0.1435
\$10,000	0.1891	0.1875	0.1875	0.1391
\$15,000	0.1382	0.1406	0.1425	0.1088
\$20,000	0.1117	0.1277	0.1191	0.0939

Table 93 Out-of-Pocket

a1. No Med/Surg Deductible or Med/Surg Deductible Applies Toward OOP - Average Plan Coinsurance Less Than or Equal to 98.0%

Plan OOP Trigger	Preferred		Non-Preferred	
	Factor	Factor	Factor	Factor
\$0	1.0000	1.0000		
\$500	0.9530	0.9509		
\$1,000	0.9017	0.8784		
\$2,000	0.8087	0.7383		
\$3,000	0.7370	0.6301		
\$4,000	0.6817	0.5503		
\$5,000	0.6361	0.4926		
\$6,000	0.5975	0.4481		
\$7,000	0.5640	0.4110		
\$8,000	0.5354	0.3803		
\$9,000	0.5105	0.3547		
\$10,000	0.4883	0.3330		
\$12,500	0.4421	0.2906		
\$15,000	0.4049	0.2591		
\$17,500	0.3744	0.2352		
\$20,000	0.3475	0.2164		
\$25,000	0.3043	0.1869		
\$30,000	0.2710	0.1665		
\$40,000	0.2213	0.1366		
\$50,000	0.1870	0.1199		
\$75,000	0.1331	0.0957		
\$100,000	0.0989	0.0808		
\$10,000,000	0.0000	0.0000		

Table 93 Out-of-Pocket

a2. Med/Surg Deductible DOES NOT Apply Toward OOP- Average Plan Coinsurance Less Than or Equal to 98.0%

Plan OOP Trigger	Preferred		Non-Preferred	
	Factor	Factor	Factor	Factor
\$0	1.0000	1.0000		
\$500	0.9751	0.9509		
\$1,000	0.7724	0.8784		
\$2,000	0.6305	0.7383		
\$3,000	0.5367	0.6301		
\$4,000	0.4705	0.5503		
\$5,000	0.4210	0.4926		
\$6,000	0.3834	0.4481		
\$7,000	0.3525	0.4110		
\$8,000	0.3279	0.3803		
\$9,000	0.3086	0.3547		
\$10,000	0.2907	0.3330		
\$12,500	0.2561	0.2906		
\$15,000	0.2303	0.2591		
\$17,500	0.2104	0.2352		
\$20,000	0.1825	0.2164		
\$25,000	0.1675	0.1869		
\$30,000	0.1481	0.1665		
\$40,000	0.1197	0.1366		
\$50,000	0.0993	0.1199		
\$75,000	0.0647	0.0957		
\$100,000	0.0419	0.0808		
\$10,000,000	0.0000	0.0000		

Table 93 Out-of-Pocket

b. Med/Surg Deductible - Average Plan Coinsurance Greater Than 98.0%

Deductible Per Confinement	ADJUSTED OOP LIMIT										
	\$0.01 Factor	\$250 Factor	\$500 Factor	\$1,000 Factor	\$1,500 Factor	\$2,000 Factor	\$2,500 Factor	\$3,000 Factor	\$3,500 Factor	\$4,000 Factor	\$4,500 Factor
\$0	0.0000	0.0000	0.0063	0.0018	0.0007	0.0004	0.0002	0.0001	0.0001	0.0001	0.0001
\$100	0.0440	0.0160	0.0071	0.0021	0.0009	0.0005	0.0002	0.0002	0.0001	0.0001	0.0001
\$150	0.0449	0.0167	0.0076	0.0024	0.0011	0.0006	0.0004	0.0002	0.0002	0.0001	0.0001
\$200	0.0457	0.0175	0.0082	0.0027	0.0012	0.0007	0.0004	0.0003	0.0002	0.0002	0.0001
\$250	0.0593	0.0307	0.0183	0.0084	0.0047	0.0028	0.0018	0.0012	0.0009	0.0006	0.0005
\$300	0.0664	0.0377	0.0238	0.0116	0.0066	0.0041	0.0027	0.0018	0.0013	0.0009	0.0007
\$350	0.0736	0.0447	0.0294	0.0149	0.0086	0.0053	0.0035	0.0024	0.0017	0.0013	0.0010
\$400	0.0775	0.0479	0.0321	0.0167	0.0098	0.0062	0.0041	0.0029	0.0021	0.0016	0.0012
\$450	0.0813	0.0512	0.0349	0.0185	0.0110	0.0071	0.0048	0.0034	0.0025	0.0019	0.0015
\$500	0.0852	0.0544	0.0376	0.0203	0.0123	0.0080	0.0054	0.0039	0.0029	0.0022	0.0017
\$600	0.0922	0.0604	0.0428	0.0239	0.0148	0.0098	0.0068	0.0049	0.0037	0.0029	0.0023
\$700	0.0992	0.0663	0.0480	0.0276	0.0174	0.0116	0.0082	0.0060	0.0045	0.0035	0.0028
\$800	0.1046	0.0706	0.0517	0.0304	0.0194	0.0131	0.0093	0.0068	0.0052	0.0041	0.0033
\$900	0.1095	0.0734	0.0541	0.0325	0.0209	0.0142	0.0101	0.0075	0.0058	0.0045	0.0037
\$1,000	0.1129	0.0761	0.0565	0.0345	0.0223	0.0153	0.0110	0.0082	0.0063	0.0050	0.0040
\$1,250	0.1219	0.0845	0.0641	0.0409	0.0276	0.0193	0.0141	0.0106	0.0083	0.0066	0.0054
\$1,500	0.1315	0.0930	0.0717	0.0473	0.0330	0.0232	0.0171	0.0131	0.0103	0.0082	0.0068
\$2,000	0.1474	0.1064	0.0839	0.0579	0.0427	0.0321	0.0245	0.0190	0.0151	0.0124	0.0103
\$2,500	0.1633	0.1198	0.0961	0.0685	0.0525	0.0410	0.0318	0.0248	0.0199	0.0165	0.0139
\$3,000	0.1814	0.1325	0.1069	0.0781	0.0611	0.0491	0.0397	0.0318	0.0255	0.0211	0.0179
\$3,500	0.1876	0.1387	0.1131	0.0844	0.0673	0.0553	0.0459	0.0380	0.0315	0.0267	0.0228
\$4,000	0.1938	0.1449	0.1194	0.0906	0.0735	0.0615	0.0521	0.0442	0.0376	0.0322	0.0278
\$4,500	0.2000	0.1511	0.1256	0.0968	0.0797	0.0678	0.0583	0.0504	0.0436	0.0378	0.0327
\$5,000	0.2062	0.1573	0.1318	0.1030	0.0859	0.0740	0.0645	0.0566	0.0497	0.0434	0.0377
\$10,000	0.2479	0.1990	0.1734	0.1446	0.1276	0.1156	0.1062	0.0983	0.0913	0.0851	0.0793

Table 93 Out-of-Pocket

b. Med/Surg Deductible - Average Plan Coinsurance Greater Than 98.0% (continued)

Deductible Per Confinement	ADJUSTED OOP LIMIT									
	\$5,000 Factor	\$6,000 Factor	\$7,000 Factor	\$8,000 Factor	\$9,000 Factor	\$10,000 Factor	\$15,000 Factor	\$20,000 Factor	\$50,000 Factor	\$100,000 Factor
\$0	0.0001	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
\$100	0.0001	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
\$150	0.0001	0.0001	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
\$200	0.0001	0.0001	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
\$250	0.0004	0.0002	0.0001	0.0001	0.0001	0.0000	0.0000	0.0000	0.0000	0.0000
\$300	0.0006	0.0004	0.0002	0.0001	0.0001	0.0000	0.0000	0.0000	0.0000	0.0000
\$350	0.0007	0.0005	0.0003	0.0002	0.0001	0.0001	0.0000	0.0000	0.0000	0.0000
\$400	0.0010	0.0006	0.0004	0.0003	0.0002	0.0001	0.0000	0.0000	0.0000	0.0000
\$450	0.0012	0.0008	0.0005	0.0004	0.0003	0.0002	0.0000	0.0000	0.0000	0.0000
\$500	0.0014	0.0009	0.0006	0.0004	0.0003	0.0002	0.0000	0.0000	0.0000	0.0000
\$600	0.0018	0.0013	0.0009	0.0006	0.0005	0.0003	0.0000	0.0000	0.0000	0.0000
\$700	0.0023	0.0016	0.0011	0.0008	0.0006	0.0005	0.0001	0.0000	0.0000	0.0000
\$800	0.0027	0.0019	0.0014	0.0010	0.0007	0.0006	0.0001	0.0000	0.0000	0.0000
\$900	0.0030	0.0021	0.0015	0.0011	0.0008	0.0006	0.0001	0.0000	0.0000	0.0000
\$1,000	0.0033	0.0024	0.0017	0.0013	0.0009	0.0007	0.0001	0.0000	0.0000	0.0000
\$1,250	0.0045	0.0032	0.0024	0.0019	0.0014	0.0011	0.0003	0.0000	0.0000	0.0000
\$1,500	0.0056	0.0041	0.0031	0.0024	0.0019	0.0015	0.0004	0.0001	0.0000	0.0000
\$2,000	0.0087	0.0064	0.0050	0.0039	0.0032	0.0026	0.0009	0.0002	0.0000	0.0000
\$2,500	0.0118	0.0088	0.0068	0.0054	0.0044	0.0036	0.0013	0.0004	0.0000	0.0000
\$3,000	0.0154	0.0117	0.0090	0.0072	0.0059	0.0049	0.0020	0.0007	0.0000	0.0000
\$3,500	0.0197	0.0150	0.0118	0.0097	0.0080	0.0067	0.0030	0.0014	0.0000	0.0000
\$4,000	0.0240	0.0182	0.0146	0.0121	0.0101	0.0085	0.0039	0.0020	0.0000	0.0000
\$4,500	0.0282	0.0215	0.0174	0.0146	0.0123	0.0103	0.0049	0.0026	0.0000	0.0000
\$5,000	0.0325	0.0247	0.0202	0.0170	0.0144	0.0121	0.0058	0.0032	0.0000	0.0000
\$10,000	0.0741	0.0647	0.0563	0.0489	0.0423	0.0364	0.0218	0.0137	0.0020	0.0000

Table 93 Out-of-Pocket

Conversion Factor	
Per day deductible conversion factor	2.80

Table 97 Lifetime Maximum Benefit

Lifetime Maximum Amt	Factor
\$250,000	0.9350
\$500,000	0.9700
\$1,000,000	0.9875
\$2,000,000	1.0000
\$3,000,000	1.0017
\$4,000,000	1.0033
\$5,000,000	1.0050
Unlimited	1.0100

Table 98 Calendar Year Maximum Benefit

Annual Benefit Max	Factor
\$50,000	0.9700
\$100,000	0.9800
\$150,000	0.9885
\$250,000	0.9950
\$500,000	1.0000
\$1,000,000	1.0010
\$2,000,000	1.0010
\$3,000,000	1.0017
\$4,000,000	1.0033
\$5,000,000	1.0050
Unlimited	1.0100

Table 99 Contract State Mandate Adjustment

Option	Factor
Include Elsewhere	1.0000

Table 100 Family Deductible Limit

a. Standard Family Limit Definition

Adjusted Plan Deductible	Family Limit						
	None Factor	1X Factor	2X Factor	2.5X Factor	3X Factor	2 Individuals Factor	3 Individuals Factor
\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$100	1.0000	1.0110	1.0045	1.0030	1.0010	1.0042	1.0010
\$200	1.0000	1.0190	1.0070	1.0040	1.0020	1.0067	1.0020
\$300	1.0000	1.0260	1.0085	1.0050	1.0030	1.0082	1.0020
\$500	1.0000	1.0370	1.0110	1.0070	1.0030	1.0100	1.0020
\$750	1.0000	1.0450	1.0120	1.0070	1.0030	1.0085	1.0020
\$1,000	1.0000	1.0510	1.0130	1.0060	1.0030	1.0070	1.0010
\$1,250	1.0000	1.0580	1.0135	1.0060	1.0030	1.0070	1.0010
\$1,500	1.0000	1.0650	1.0140	1.0060	1.0020	1.0070	1.0010
\$2,000	1.0000	1.0750	1.0140	1.0060	1.0020	1.0065	1.0010
\$3,000	1.0000	1.0890	1.0140	1.0050	1.0020	1.0055	1.0005
\$4,000	1.0000	1.0980	1.0125	1.0040	1.0020	1.0040	1.0005
\$5,000	1.0000	1.1030	1.0115	1.0035	1.0010	1.0035	1.0005
\$6,000	1.0000	1.1060	1.0100	1.0035	1.0010	1.0035	1.0002
\$7,000	1.0000	1.1070	1.0090	1.0030	1.0010	1.0030	1.0002
\$8,000	1.0000	1.1070	1.0090	1.0030	1.0010	1.0030	1.0002
\$9,000	1.0000	1.1060	1.0080	1.0020	1.0010	1.0025	1.0001
\$10,000	1.0000	1.1050	1.0070	1.0020	1.0005	1.0025	1.0001
\$15,000	1.0000	1.0980	1.0050	1.0015	1.0005	1.0025	1.0001
\$20,000	1.0000	1.0880	1.0035	1.0010	1.0001	1.0025	1.0001

Table 100 Family Deductible Limit

b1. TIF Family Limit Definition (Preferred)

Family Deductible Limit	Adjusted Plan Deductible From	Adjusted Plan Deductible To	Billing Tier Structure									
			2 Tier		3 Tier			4 Tier				
			Single Factor	Family Factor	Single Factor	2 Party Factor	Family Factor	Single Factor	Couple Factor	EE+Ch(n) Factor	Family Factor	
None	\$0	\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$1	\$500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$501	\$1,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$1,001	\$1,500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$1,501	\$2,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$2,001	\$2,500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$2,501	\$3,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$3,001	\$3,500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$3,501	\$4,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$4,001	\$4,500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$4,501	\$5,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$5,001	\$6,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$6,001	\$7,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$7,001	\$8,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$8,001	\$9,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$9,001	\$10,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$10,001	\$15,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$15,001	\$20,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
1X	\$0	\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
1X	\$1	\$500	1.0000	1.0560	1.0000	1.0220	1.0720	1.0000	1.0220	1.0500	1.0770	1.0000
1X	\$501	\$1,000	1.0000	1.0820	1.0000	1.0310	1.1070	1.0000	1.0310	1.0700	1.1150	1.0000
1X	\$1,001	\$1,500	1.0000	1.1080	1.0000	1.0390	1.1410	1.0000	1.0390	1.0860	1.1540	1.0000
1X	\$1,501	\$2,000	1.0000	1.1250	1.0000	1.0450	1.1660	1.0000	1.0450	1.0950	1.1830	1.0000
1X	\$2,001	\$2,500	1.0000	1.1380	1.0000	1.0490	1.1840	1.0000	1.0490	1.0990	1.2040	1.0000
1X	\$2,501	\$3,000	1.0000	1.1470	1.0000	1.0520	1.1970	1.0000	1.0520	1.1010	1.2200	1.0000
1X	\$3,001	\$3,500	1.0000	1.1540	1.0000	1.0550	1.2070	1.0000	1.0550	1.1020	1.2310	1.0000
1X	\$3,501	\$4,000	1.0000	1.1590	1.0000	1.0550	1.2140	1.0000	1.0550	1.1020	1.2400	1.0000
1X	\$4,001	\$4,500	1.0000	1.1620	1.0000	1.0560	1.2190	1.0000	1.0560	1.1030	1.2460	1.0000
1X	\$4,501	\$5,000	1.0000	1.1640	1.0000	1.0570	1.2230	1.0000	1.0570	1.1040	1.2510	1.0000
1X	\$5,001	\$6,000	1.0000	1.1660	1.0000	1.0560	1.2280	1.0000	1.0560	1.1040	1.2570	1.0000
1X	\$6,001	\$7,000	1.0000	1.1670	1.0000	1.0540	1.2320	1.0000	1.0540	1.1040	1.2620	1.0000
1X	\$7,001	\$8,000	1.0000	1.1660	1.0000	1.0510	1.2330	1.0000	1.0510	1.1030	1.2640	1.0000
1X	\$8,001	\$9,000	1.0000	1.1640	1.0000	1.0470	1.2330	1.0000	1.0470	1.1030	1.2640	1.0000
1X	\$9,001	\$10,000	1.0000	1.1610	1.0000	1.0420	1.2320	1.0000	1.0420	1.1050	1.2630	1.0000
1X	\$10,001	\$15,000	1.0000	1.1500	1.0000	1.0320	1.2250	1.0000	1.0320	1.1070	1.2530	1.0000
1X	\$15,001	\$20,000	1.0000	1.1310	1.0000	1.0210	1.2060	1.0000	1.0210	1.1070	1.2290	1.0000
2X	\$0	\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
2X	\$1	\$500	1.0000	1.0120	1.0000	0.9850	1.0250	1.0000	0.9850	0.9930	1.0320	1.0000
2X	\$501	\$1,000	1.0000	1.0060	1.0000	0.9880	1.0230	1.0000	0.9880	0.9770	1.0340	1.0000
2X	\$1,001	\$1,500	1.0000	0.9900	1.0000	0.9450	1.0120	1.0000	0.9450	0.9530	1.0260	1.0000
2X	\$1,501	\$2,000	1.0000	0.9720	1.0000	0.9240	0.9960	1.0000	0.9240	0.9300	1.0110	1.0000
2X	\$2,001	\$2,500	1.0000	0.9540	1.0000	0.9050	0.9790	1.0000	0.9050	0.9070	0.9950	1.0000
2X	\$2,501	\$3,000	1.0000	0.9360	1.0000	0.8870	0.9610	1.0000	0.8870	0.8850	0.9790	1.0000
2X	\$3,001	\$3,500	1.0000	0.9190	1.0000	0.8720	0.9440	1.0000	0.8720	0.8660	0.9620	1.0000
2X	\$3,501	\$4,000	1.0000	0.9040	1.0000	0.8590	0.9270	1.0000	0.8590	0.8490	0.9450	1.0000
2X	\$4,001	\$4,500	1.0000	0.8890	1.0000	0.8480	0.9100	1.0000	0.8480	0.8340	0.9280	1.0000
2X	\$4,501	\$5,000	1.0000	0.8760	1.0000	0.8390	0.8950	1.0000	0.8390	0.8200	0.9130	1.0000
2X	\$5,001	\$6,000	1.0000	0.8630	1.0000	0.8310	0.8810	1.0000	0.8310	0.8060	0.8980	1.0000
2X	\$6,001	\$7,000	1.0000	0.8450	1.0000	0.8180	0.8590	1.0000	0.8180	0.7860	0.8770	1.0000
2X	\$7,001	\$8,000	1.0000	0.8230	1.0000	0.8020	0.8340	1.0000	0.8020	0.7650	0.8510	1.0000
2X	\$8,001	\$9,000	1.0000	0.8060	1.0000	0.7890	0.8160	1.0000	0.7890	0.7490	0.8310	1.0000
2X	\$9,001	\$10,000	1.0000	0.7900	1.0000	0.7760	0.7980	1.0000	0.7760	0.7360	0.8120	1.0000
2X	\$10,001	\$15,000	1.0000	0.7540	1.0000	0.7420	0.7610	1.0000	0.7420	0.7140	0.7720	1.0000
2X	\$15,001	\$20,000	1.0000	0.7200	1.0000	0.7070	0.7280	1.0000	0.7070	0.7000	0.7340	1.0000

Table 100 Family Deductible Limit

b1. TIF Family Limit Definition (Preferred)												
Family Deductible Limit	Adjusted Plan Deductible From	Adjusted Plan Deductible To	Billing Tier Structure									
			2 Tier		3 Tier			4 Tier				
			Single Factor	Family Factor	Single Factor	2 Party Factor	Family Factor	Single Factor	Couple Factor	EE+CH(n) Factor	Family Factor	
2.5X	\$0	\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
2.5X	\$1	\$500	1.0000	0.9920	1.0000	0.9670	1.0030	1.0000	0.9670	1.0000	0.9680	1.0110
2.5X	\$501	\$1,000	1.0000	0.9720	1.0000	0.9400	0.9870	1.0000	0.9400	1.0000	0.9390	0.9980
2.5X	\$1,001	\$1,500	1.0000	0.9410	1.0000	0.9060	0.9580	1.0000	0.9060	1.0000	0.9010	0.9710
2.5X	\$1,501	\$2,000	1.0000	0.9110	1.0000	0.8750	0.9290	1.0000	0.8750	1.0000	0.8670	0.9430
2.5X	\$2,001	\$2,500	1.0000	0.8830	1.0000	0.8480	0.9010	1.0000	0.8480	1.0000	0.8360	0.9150
2.5X	\$2,501	\$3,000	1.0000	0.8580	1.0000	0.8260	0.8750	1.0000	0.8260	1.0000	0.8090	0.8900
2.5X	\$3,001	\$3,500	1.0000	0.8360	1.0000	0.8080	0.8520	1.0000	0.8080	1.0000	0.7840	0.8650
2.5X	\$3,501	\$4,000	1.0000	0.8150	1.0000	0.7920	0.8270	1.0000	0.7920	1.0000	0.7620	0.8420
2.5X	\$4,001	\$4,500	1.0000	0.8010	1.0000	0.7820	0.8110	1.0000	0.7820	1.0000	0.7470	0.8250
2.5X	\$4,501	\$5,000	1.0000	0.7900	1.0000	0.7740	0.7970	1.0000	0.7740	1.0000	0.7350	0.8120
2.5X	\$5,001	\$6,000	1.0000	0.7850	1.0000	0.7570	0.7680	1.0000	0.7570	1.0000	0.7090	0.7820
2.5X	\$6,001	\$7,000	1.0000	0.7380	1.0000	0.7380	0.7370	1.0000	0.7380	1.0000	0.6820	0.7500
2.5X	\$7,001	\$8,000	1.0000	0.7180	1.0000	0.7220	0.7140	1.0000	0.7220	1.0000	0.6610	0.7260
2.5X	\$8,001	\$9,000	1.0000	0.7020	1.0000	0.7080	0.6970	1.0000	0.7080	1.0000	0.6480	0.7080
2.5X	\$9,001	\$10,000	1.0000	0.6930	1.0000	0.6980	0.6890	1.0000	0.6980	1.0000	0.6430	0.6990
2.5X	\$10,001	\$15,000	1.0000	0.6620	1.0000	0.6650	0.6590	1.0000	0.6650	1.0000	0.6260	0.6670
2.5X	\$15,001	\$20,000	1.0000	0.6030	1.0000	0.6090	0.5980	1.0000	0.6090	1.0000	0.5870	0.6000
3X	\$0	\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
3X	\$1	\$500	1.0000	0.9720	1.0000	0.9510	0.9820	1.0000	0.9510	1.0000	0.9450	0.9900
3X	\$501	\$1,000	1.0000	0.9400	1.0000	0.9150	0.9530	1.0000	0.9150	1.0000	0.9040	0.9640
3X	\$1,001	\$1,500	1.0000	0.8960	1.0000	0.8700	0.9090	1.0000	0.8700	1.0000	0.8550	0.9220
3X	\$1,501	\$2,000	1.0000	0.8670	1.0000	0.8310	0.8690	1.0000	0.8310	1.0000	0.8130	0.8820
3X	\$2,001	\$2,500	1.0000	0.8220	1.0000	0.8000	0.8340	1.0000	0.8000	1.0000	0.7760	0.8470
3X	\$2,501	\$3,000	1.0000	0.7920	1.0000	0.7750	0.8010	1.0000	0.7750	1.0000	0.7440	0.8140
3X	\$3,001	\$3,500	1.0000	0.7680	1.0000	0.7560	0.7740	1.0000	0.7560	1.0000	0.7180	0.7870
3X	\$3,501	\$4,000	1.0000	0.7500	1.0000	0.7420	0.7530	1.0000	0.7420	1.0000	0.6980	0.7660
3X	\$4,001	\$4,500	1.0000	0.7310	1.0000	0.7290	0.7320	1.0000	0.7290	1.0000	0.6790	0.7440
3X	\$4,501	\$5,000	1.0000	0.7090	1.0000	0.7130	0.7060	1.0000	0.7130	1.0000	0.6560	0.7170
3X	\$5,001	\$6,000	1.0000	0.6860	1.0000	0.6970	0.6790	1.0000	0.6970	1.0000	0.6320	0.6990
3X	\$6,001	\$7,000	1.0000	0.6620	1.0000	0.6790	0.6520	1.0000	0.6790	1.0000	0.6080	0.6620
3X	\$7,001	\$8,000	1.0000	0.6440	1.0000	0.6630	0.6320	1.0000	0.6630	1.0000	0.5910	0.6420
3X	\$8,001	\$9,000	1.0000	0.6280	1.0000	0.6470	0.6160	1.0000	0.6470	1.0000	0.5730	0.6240
3X	\$9,001	\$10,000	1.0000	0.6060	1.0000	0.6260	0.5930	1.0000	0.6260	1.0000	0.5620	0.6020
3X	\$10,001	\$15,000	1.0000	0.5700	1.0000	0.5880	0.5670	1.0000	0.5880	1.0000	0.5390	0.5810
3X	\$15,001	\$20,000	1.0000	0.5290	1.0000	0.5440	0.5180	1.0000	0.5440	1.0000	0.5140	0.5180

Table 100 Family Deductible Limit

b2. TIF Family Limit Definition (Non-Preferred)

Family Deductible Limit	Adjusted Plan Deductible From	Adjusted Plan Deductible To	Billing Tier Structure									
			2 Tier		3 Tier			4 Tier				
			Single Factor	Family Factor	Single Factor	2 Party Factor	Family Factor	Single Factor	Couple Factor	EE+Ch(n) Factor	Family Factor	
None	\$0	\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$1	\$500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$501	\$1,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$1,001	\$1,500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$1,501	\$2,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$2,001	\$2,500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$2,501	\$3,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$3,001	\$3,500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$3,501	\$4,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$4,001	\$4,500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$4,501	\$5,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$5,001	\$6,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$6,001	\$7,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$7,001	\$8,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$8,001	\$9,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$9,001	\$10,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$10,001	\$15,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
None	\$15,001	\$20,000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
1X	\$0	\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
1X	\$1	\$500	1.0000	1.0430	1.0280	1.0280	1.0490	1.0000	1.0280	0.9780	1.0520	1.0000
1X	\$501	\$1,000	1.0000	1.0650	1.0410	1.0410	1.0730	1.0000	1.0410	0.9670	1.0800	1.0000
1X	\$1,001	\$1,500	1.0000	1.0910	1.0570	1.0570	1.1030	1.0000	1.0570	0.9590	1.1120	1.0000
1X	\$1,501	\$2,000	1.0000	1.1140	1.0720	1.0720	1.1280	1.0000	1.0720	0.9540	1.1400	1.0000
1X	\$2,001	\$2,500	1.0000	1.1350	1.0850	1.0850	1.1490	1.0000	1.0850	0.9510	1.1640	1.0000
1X	\$2,501	\$3,000	1.0000	1.1500	1.0980	1.0980	1.1670	1.0000	1.0980	0.9490	1.1850	1.0000
1X	\$3,001	\$3,500	1.0000	1.1660	1.1080	1.1080	1.1840	1.0000	1.1080	0.9460	1.2050	1.0000
1X	\$3,501	\$4,000	1.0000	1.1790	1.1150	1.1150	1.2000	1.0000	1.1150	0.9450	1.2240	1.0000
1X	\$4,001	\$4,500	1.0000	1.1910	1.1170	1.1170	1.2140	1.0000	1.1170	0.9440	1.2400	1.0000
1X	\$4,501	\$5,000	1.0000	1.2010	1.1200	1.1200	1.2260	1.0000	1.1200	0.9440	1.2550	1.0000
1X	\$5,001	\$6,000	1.0000	1.2130	1.1210	1.1210	1.2420	1.0000	1.1210	0.9440	1.2740	1.0000
1X	\$6,001	\$7,000	1.0000	1.2260	1.1200	1.1200	1.2590	1.0000	1.1200	0.9430	1.2960	1.0000
1X	\$7,001	\$8,000	1.0000	1.2340	1.1150	1.1150	1.2700	1.0000	1.1150	0.9420	1.3100	1.0000
1X	\$8,001	\$9,000	1.0000	1.2390	1.1080	1.1080	1.2780	1.0000	1.1080	0.9410	1.3200	1.0000
1X	\$9,001	\$10,000	1.0000	1.2420	1.1030	1.1030	1.2840	1.0000	1.1030	0.9410	1.3280	1.0000
1X	\$10,001	\$15,000	1.0000	1.2480	1.0920	1.0920	1.2950	1.0000	1.0920	0.9430	1.3460	1.0000
1X	\$15,001	\$20,000	1.0000	1.2480	1.0690	1.0690	1.3010	1.0000	1.0690	0.9420	1.3600	1.0000
2X	\$0	\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
2X	\$1	\$500	1.0000	0.9630	1.0000	0.9410	0.9700	1.0000	0.9410	0.9360	0.9750	1.0000
2X	\$501	\$1,000	1.0000	0.9420	1.0000	0.9040	0.9550	1.0000	0.9040	0.9060	0.9630	1.0000
2X	\$1,001	\$1,500	1.0000	0.9150	1.0000	0.8550	0.9350	1.0000	0.8550	0.8750	0.9440	1.0000
2X	\$1,501	\$2,000	1.0000	0.8930	1.0000	0.8170	0.9180	1.0000	0.8170	0.8530	0.9280	1.0000
2X	\$2,001	\$2,500	1.0000	0.8750	1.0000	0.7880	0.9030	1.0000	0.7880	0.8320	0.9150	1.0000
2X	\$2,501	\$3,000	1.0000	0.8610	1.0000	0.7680	0.8910	1.0000	0.7680	0.8200	0.9030	1.0000
2X	\$3,001	\$3,500	1.0000	0.8490	1.0000	0.7490	0.8820	1.0000	0.7490	0.8130	0.8930	1.0000
2X	\$3,501	\$4,000	1.0000	0.8380	1.0000	0.7320	0.8710	1.0000	0.7320	0.8030	0.8830	1.0000
2X	\$4,001	\$4,500	1.0000	0.8260	1.0000	0.7160	0.8610	1.0000	0.7160	0.7940	0.8720	1.0000
2X	\$4,501	\$5,000	1.0000	0.8160	1.0000	0.7050	0.8510	1.0000	0.7050	0.7850	0.8630	1.0000
2X	\$5,001	\$6,000	1.0000	0.8150	1.0000	0.7030	0.8490	1.0000	0.7030	0.7860	0.8610	1.0000
2X	\$6,001	\$7,000	1.0000	0.8120	1.0000	0.7000	0.8460	1.0000	0.7000	0.7950	0.8560	1.0000
2X	\$7,001	\$8,000	1.0000	0.8020	1.0000	0.6870	0.8370	1.0000	0.6870	0.8050	0.8440	1.0000
2X	\$8,001	\$9,000	1.0000	0.7990	1.0000	0.6750	0.8260	1.0000	0.6750	0.8200	0.8390	1.0000
2X	\$9,001	\$10,000	1.0000	0.7950	1.0000	0.6610	0.8350	1.0000	0.6610	0.8340	0.8350	1.0000
2X	\$10,001	\$15,000	1.0000	0.7920	1.0000	0.6190	0.8440	1.0000	0.6190	0.8560	0.8420	1.0000
2X	\$15,001	\$20,000	1.0000	0.7890	1.0000	0.5810	0.8510	1.0000	0.5810	0.8640	0.8480	1.0000

Table 100 Family Deductible Limit

b1. TIF Family Limit Definition (Preferred)

Family Deductible Limit	Adjusted Plan Deductible From	Adjusted Plan Deductible To	Billing Tier Structure									
			2 Tier		3 Tier		4 Tier					
			Single Factor	Family Factor	Single Factor	2 Party Factor	Family Factor	Single Factor	Couple Factor	EE+Ch(n) Factor	Family Factor	
2.5X	\$0	\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
2.5X	\$1	\$500	1.0000	0.9200	1.0000	0.9040	0.9380	1.0000	0.9040	0.9010	0.9440	0.9440
2.5X	\$501	\$1,000	1.0000	0.8820	1.0000	0.8470	0.9090	1.0000	0.8470	0.8580	0.9160	0.9160
2.5X	\$1,001	\$1,500	1.0000	0.8480	1.0000	0.7790	0.8710	1.0000	0.7790	0.8160	0.8800	0.8800
2.5X	\$1,501	\$2,000	1.0000	0.8130	1.0000	0.7280	0.8420	1.0000	0.7280	0.7850	0.8510	0.8510
2.5X	\$2,001	\$2,500	1.0000	0.7870	1.0000	0.6910	0.8180	1.0000	0.6910	0.7640	0.8270	0.8270
2.5X	\$2,501	\$3,000	1.0000	0.7650	1.0000	0.6640	0.7980	1.0000	0.6640	0.7490	0.8060	0.8060
2.5X	\$3,001	\$3,500	1.0000	0.7460	1.0000	0.6430	0.7790	1.0000	0.6430	0.7350	0.7870	0.7870
2.5X	\$3,501	\$4,000	1.0000	0.7300	1.0000	0.6240	0.7630	1.0000	0.6240	0.7220	0.7700	0.7700
2.5X	\$4,001	\$4,500	1.0000	0.7230	1.0000	0.6170	0.7560	1.0000	0.6170	0.7200	0.7620	0.7620
2.5X	\$4,501	\$5,000	1.0000	0.7210	1.0000	0.6150	0.7540	1.0000	0.6150	0.7280	0.7590	0.7590
2.5X	\$5,001	\$6,000	1.0000	0.7060	1.0000	0.6010	0.7390	1.0000	0.6010	0.7270	0.7410	0.7410
2.5X	\$6,001	\$7,000	1.0000	0.6940	1.0000	0.5850	0.7270	1.0000	0.5850	0.7330	0.7260	0.7260
2.5X	\$7,001	\$8,000	1.0000	0.6880	1.0000	0.5710	0.7240	1.0000	0.5710	0.7470	0.7190	0.7190
2.5X	\$8,001	\$9,000	1.0000	0.6880	1.0000	0.5590	0.7270	1.0000	0.5590	0.7560	0.7200	0.7200
2.5X	\$9,001	\$10,000	1.0000	0.6970	1.0000	0.5540	0.7400	1.0000	0.5540	0.7890	0.7300	0.7300
2.5X	\$10,001	\$15,000	1.0000	0.6930	1.0000	0.5220	0.7450	1.0000	0.5220	0.8010	0.7320	0.7320
2.5X	\$15,001	\$20,000	1.0000	0.6500	1.0000	0.4590	0.7070	1.0000	0.4590	0.7770	0.6890	0.6890
3X	\$0	\$0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
3X	\$1	\$500	1.0000	0.8990	1.0000	0.8700	0.9090	1.0000	0.8700	0.8690	0.9150	0.9150
3X	\$501	\$1,000	1.0000	0.8480	1.0000	0.7970	0.8660	1.0000	0.7970	0.8170	0.8730	0.8730
3X	\$1,001	\$1,500	1.0000	0.7910	1.0000	0.7150	0.8160	1.0000	0.7150	0.7660	0.8240	0.8240
3X	\$1,501	\$2,000	1.0000	0.7480	1.0000	0.6560	0.7780	1.0000	0.6560	0.7330	0.7860	0.7860
3X	\$2,001	\$2,500	1.0000	0.7140	1.0000	0.6140	0.7470	1.0000	0.6140	0.7090	0.7540	0.7540
3X	\$2,501	\$3,000	1.0000	0.6970	1.0000	0.5950	0.7200	1.0000	0.5950	0.6990	0.7250	0.7250
3X	\$3,001	\$3,500	1.0000	0.6880	1.0000	0.5680	0.7000	1.0000	0.5680	0.6760	0.7050	0.7050
3X	\$3,501	\$4,000	1.0000	0.6580	1.0000	0.5570	0.6900	1.0000	0.5570	0.6750	0.6930	0.6930
3X	\$4,001	\$4,500	1.0000	0.6500	1.0000	0.5400	0.6820	1.0000	0.5400	0.6780	0.6820	0.6820
3X	\$4,501	\$5,000	1.0000	0.6350	1.0000	0.5340	0.6660	1.0000	0.5340	0.6780	0.6640	0.6640
3X	\$5,001	\$6,000	1.0000	0.6230	1.0000	0.5190	0.6550	1.0000	0.5190	0.6820	0.6500	0.6500
3X	\$6,001	\$7,000	1.0000	0.6170	1.0000	0.5050	0.6510	1.0000	0.5050	0.6940	0.6430	0.6430
3X	\$7,001	\$8,000	1.0000	0.6160	1.0000	0.4930	0.6530	1.0000	0.4930	0.7120	0.6420	0.6420
3X	\$8,001	\$9,000	1.0000	0.6180	1.0000	0.4820	0.6600	1.0000	0.4820	0.7340	0.6450	0.6450
3X	\$9,001	\$10,000	1.0000	0.6130	1.0000	0.4610	0.6590	1.0000	0.4610	0.7510	0.6400	0.6400
3X	\$10,001	\$15,000	1.0000	0.5940	1.0000	0.4260	0.6450	1.0000	0.4260	0.7450	0.6230	0.6230
3X	\$15,001	\$20,000	1.0000	0.5700	1.0000	0.3850	0.6240	1.0000	0.3850	0.7200	0.6010	0.6010

Table 101 Deductible Credit

Option	Factor
Included	1.0000
Excluded	0.9900

Table 102 Family Out-of-Pocket Limit

a. Standard Family Limit Definition	
Option	Factor
1x Individual OOP Amount	1.0030
2x Individual OOP Amount	1.0020
2.5x Individual OOP Amount	1.0015
3x Individual OOP Amount	1.0010
2 Individuals	1.0010
3 Individuals	1.0005
None	1.0000

Table 102 Family Out-of-Pocket Limit

b. TIF Family Limit Definition		Family Limit			
		1X Factor	2X Factor	2.5X Factor	3X Factor
2 Tier	Single	1.0000	1.0000	1.0000	1.0000
2 Tier	Family	1.0050	0.9850	0.9800	0.9700
3 Tier	Single	1.0000	1.0000	1.0000	1.0000
3 Tier	2 Party	1.0050	0.9850	0.9800	0.9700
3 Tier	Family	1.0050	0.9850	0.9800	0.9700
4 Tier	Single	1.0000	1.0000	1.0000	1.0000
4 Tier	Couple	1.0050	0.9850	0.9800	0.9700
4 Tier	EE+Ch(n)	1.0050	0.9850	0.9800	0.9700
4 Tier	Family	1.0050	0.9850	0.9800	0.9700

Table 108 National Advantage

	OCN	Other
Included	1.0000	1.0000
Excluded	1.0701	1.0000

Table 110 Step Therapy/Pre-certification Adjustment

Benefit Option	Factor
Basic Pre-certification Only	1.0000
Add Expanded Pre-certification and Step Therapy	0.9900
Add Step Therapy Only	0.9950
Add Expanded Pre-certification Only	0.9950
Add Expanded Pre-certification after 90 days Only	0.9983
Add Step Therapy after 90 days Only	0.9983
Add Expanded Pre-certification after 90 days and Step Therapy after 90 days	0.9967
Add Step Therapy and Expanded Pre-certification after 90 days	0.9933
Add Expanded Pre-certification and Step Therapy after 90 days	0.9933
Full Pharmacy Step-Therapy and Pre-certification	0.9967
Pharmacy Benefit Excluded	1.0000

Table 109 Custom Product

Benefit	Factor
No Custom Benefits	1.0000

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Table 112 Mental Health Deductible

Deductible	Factor
\$0	1.0000
\$50	1.0000
\$100	0.9993
\$150	0.9987
\$200	0.9982
\$250	0.9977
\$300	0.9971
\$350	0.9966
\$400	0.9962
\$450	0.9958
\$500	0.9955
\$550	0.9951
\$600	0.9948
\$650	0.9945
\$700	0.9942
\$750	0.9939
\$800	0.9936
\$850	0.9933
\$900	0.9931
\$950	0.9929
\$1,000	0.9926
\$1,250	0.9924
\$1,500	0.9914
\$2,000	0.9905
\$2,500	0.9892
\$3,000	0.9881
\$3,500	0.9872
\$4,000	0.9865
\$4,500	0.9861
\$5,000	0.9856
\$5,500	0.9851
\$6,000	0.9849
\$6,500	0.9846
\$7,000	0.9844
\$7,500	0.9841
\$8,000	0.9839
\$8,500	0.9837
\$9,000	0.9835
\$9,500	0.9834
\$10,000	0.9832
\$15,000	0.9831
\$20,000	0.9823
Not Applicable	0.9816

Table 114 Selection Load

a. Anchor Plan Values - Network 1

Product	Factor
HMO - All Products	1.0000
QPOS - All Products	1.0000

Table 114 Selection Load

b. Selection Load Factor - Network 1

Benefit Adjustment Factor / Anchor	HMO - All Products	QPOS - All Products
Plan Benefit Adjustment Factor	Factor	Factor
< .85	1.0000	1.0000
: .85 < .95	1.0000	1.0000
: .95 < 1.05	1.0000	1.0000
: 1.05 < 1.15	1.0000	1.0000
: 1.15	1.0000	1.0000

Section IV.

Table 116 Base Plan Component Steerage Factor

Table 122 Steerage Factor

HMO - All Products

Final Non-Pref. to Pref. Benefit Adj. Factor Ratio	Preferred Final Benefit Adjustment Factor									
	< .50	≥ .50 < .55	≥ .55 < .60	≥ .60 < .65	≥ .65 < .70	≥ .70 < .75	≥ .75 < .80	≥ .80 < .85	≥ .85 < .90	≥ .90
< .50	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
≥ .50 < .55	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
≥ .55 < .60	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
≥ .60 < .65	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
≥ .65 < .70	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
≥ .70 < .75	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
≥ .75 < .80	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
≥ .80 < .85	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
≥ .85 < .90	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
≥ .90	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000

QPOS - All Products

Final Non-Pref. to Pref. Benefit Adj. Factor Ratio	Preferred Final Benefit Adjustment Factor									
	< .50	≥ .50 < .55	≥ .55 < .60	≥ .60 < .65	≥ .65 < .70	≥ .70 < .75	≥ .75 < .80	≥ .80 < .85	≥ .85 < .90	≥ .90
< .50	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000
≥ .50 < .55	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000
≥ .55 < .60	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000
≥ .60 < .65	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000
≥ .65 < .70	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000
≥ .70 < .75	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000
≥ .75 < .80	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000
≥ .80 < .85	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000
≥ .85 < .90	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000
≥ .90	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000

Table 117 Component Base Relativity Factor

Product	Factor
HMO - All Products	Factor
QPOS - All Products	1.0000

Table 118 Normalized Claim Relativity Factor

Product	Factor
HMO - All Products	1.0000
QPOS - All Products	1.0010

Table 121 Trend Factor
HMO - All Products

Effective Date	Trend Factor
07/01/2012	1.000
10/01/2012	1.016
01/01/2013	1.032
04/01/2013	1.048

QPOS - All Products

Effective Date	Trend Factor
07/01/2012	1.000
10/01/2012	1.016
01/01/2013	1.032
04/01/2013	1.048

Section V.

Table 125 Industry

SIC Range		
From	To	Factor
111	119	0.9800
131	139	0.9800
161	161	0.9800
171	179	0.9800
181	182	0.9800
191	191	0.9800
211	291	1.0700
711	722	0.9800
723	723	0.9800
724	724	0.9800
741	742	0.9800
751	752	0.9800
761	762	0.9800
781	781	1.0000
782	783	0.9800
811	851	1.0300
912	919	1.1000
921	921	1.0000
971	971	1.0300
1011	1031	1.1500
1041	1044	1.1500
1061	1081	1.1500
1094	1099	1.1500
1221	1222	1.1500
1231	1231	1.1500
1241	1241	1.1500
1311	1321	1.0000
1381	1389	1.0000
1411	1429	1.0300
1442	1446	1.0300
1455	1459	1.0300
1474	1479	1.0300
1481	1499	1.0300
1521	1522	1.0400
1531	1531	1.0900
1541	1541	1.0200
1542	1542	1.0000
1611	1611	1.0300
1622	1629	1.0300
1711	1711	1.0100
1721	1721	1.0100
1731	1731	1.0100
1741	1741	1.0100
1742	1742	1.0100
1743	1743	1.0100
1751	1752	1.0100
1761	1761	1.0100
1771	1771	1.0100
1781	1781	1.0100
1791	1791	1.0100
1793	1793	1.0100
1794	1794	1.0100
1795	1795	1.0100
1796	1796	1.0100
1799	1799	1.0100
2011	2015	1.0000
2021	2035	1.0000
2037	2048	0.9800
2051	2052	0.9800
2053	2053	0.9800
2061	2063	0.9800
2064	2068	0.9800
2074	2079	0.9800
2082	2087	0.9800
2091	2091	0.9800
2092	2092	0.9800
2095	2095	0.9800
2096	2096	0.9800
2097	2097	0.9800
2098	2098	0.9800
2099	2099	0.9800
2111	2141	1.0000
2211	2211	1.0000
2221	2221	1.0000
2231	2231	1.0000
2241	2241	1.0000
2251	2259	1.0000
2261	2269	1.0000
2273	2273	1.0000
2281	2284	1.0000
2295	2299	1.0000
2311	2329	0.9800
2331	2342	0.9800
2353	2353	0.9800
2361	2369	0.9800
2371	2399	1.0000
2411	2411	1.0000
2421	2429	1.0000

SIC Range		
From	To	Factor
2431	2431	1.0300
2434	2434	0.9700
2435	2435	0.9700
2436	2436	0.9700
2439	2439	0.9700
2441	2449	0.9700
2451	2452	0.9700
2491	2499	0.9700
2511	2519	0.9700
2521	2522	0.9700
2531	2531	0.9700
2541	2542	0.9700
2591	2599	0.9700
2611	2611	1.0300
2621	2621	1.0300
2631	2631	1.0300
2652	2657	1.0300
2671	2679	1.0300
2711	2711	1.0000
2721	2789	1.0000
2791	2796	1.0000
2812	2819	1.0000
2821	2824	1.0000
2833	2834	1.0400
2835	2836	1.0000
2841	2844	0.9800
2851	2851	0.9800
2861	2869	0.9800
2873	2879	0.9800
2891	2891	0.9500
2892	2892	0.9500
2893	2895	0.9500
2899	2899	0.9500
2911	2952	1.0300
2992	2999	1.0300
3011	3011	0.9800
3021	3069	0.9800
3081	3089	0.9600
3111	3111	1.0000
3131	3149	1.0000
3151	3199	1.0000
3211	3211	1.0200
3221	3231	1.0200
3241	3241	1.0200
3251	3259	1.0200
3261	3269	1.0200
3271	3275	1.0200
3281	3281	1.0200
3291	3291	1.0200
3292	3292	1.0200
3295	3299	1.0200
3312	3317	1.0400
3321	3325	1.0400
3331	3339	1.0400
3341	3341	1.0400
3351	3357	1.0400
3363	3369	1.0400
3398	3399	1.0400
3411	3412	0.9400
3421	3429	0.9400
3431	3433	0.9400
3441	3441	0.9400
3442	3442	1.0000
3443	3443	0.9800
3444	3444	0.9800
3446	3446	0.9800
3448	3448	0.9800
3449	3449	0.9800
3451	3452	0.9800
3462	3469	0.9800
3471	3479	0.9800
3482	3483	0.9800
3484	3484	0.9800
3489	3489	0.9800
3491	3499	0.9700
3511	3519	0.9700
3523	3524	0.9700
3531	3537	0.9800
3541	3549	0.9500
3552	3569	0.9500
3571	3579	0.9500
3581	3589	0.9500
3592	3599	0.9500
3612	3613	0.9900
3621	3648	0.9900
3651	3652	0.9900
3661	3669	0.9900

SIC Range		
From	To	Factor
3671	3679	0.9900
3691	3699	0.9900
3711	3716	1.0000
3721	3728	0.9500
3731	3731	0.9500
3732	3732	0.9500
3743	3743	0.9500
3751	3751	0.9500
3761	3769	0.9500
3792	3792	0.9500
3795	3795	0.9500
3799	3799	0.9500
3812	3812	0.9400
3821	3829	1.0100
3841	3845	1.0100
3851	3851	1.0100
3861	3861	0.9400
3873	3873	0.9400
3911	3915	0.9400
3931	3931	1.0000
3942	3949	1.0000
3951	3955	0.9700
3961	3965	0.9700
3991	3999	0.9700
4011	4013	1.0200
4111	4119	1.0600
4121	4121	1.1200
4131	4131	1.0600
4141	4142	1.0600
4151	4151	1.0300
4173	4173	1.0400
4212	4212	1.0200
4213	4214	1.0200
4215	4215	1.0200
4221	4221	1.0200
4222	4222	1.0200
4225	4225	1.0200
4226	4226	1.0200
4231	4231	1.0200
4311	4311	1.0000
4412	4412	1.0200
4424	4424	1.0200
4432	4432	1.0200
4449	4449	1.0200
4481	4489	1.0200
4491	4499	1.0200
4512	4513	0.9500
4522	4522	0.9500
4581	4581	0.9500
4612	4619	1.0500
4724	4729	1.0800
4731	4731	0.9800
4741	4789	0.9800
4812	4813	1.0000
4822	4899	1.0200
4911	4911	0.9700
4922	4925	1.0000
4931	4939	0.9500
4941	4941	0.9500
4952	4959	0.9500
4961	4961	0.9500
4971	4971	0.9500
5012	5015	1.0000
5021	5021	1.0000
5023	5023	1.0000
5031	5039	1.0400
5043	5049	1.0200
5051	5052	1.0200
5063	5064	1.0200
5065	5065	1.0200
5072	5078	1.0000
5082	5087	1.0000
5088	5088	1.0000
5091	5092	1.0000
5093	5093	1.1200
5094	5099	0.9400
5111	5113	1.0000
5122	5122	0.9800
5131	5139	1.0200
5141	5149	0.9800
5153	5153	0.9800
5154	5159	0.9800
5162	5169	0.9800
5171	5172	0.9800
5181	5182	0.9800
5191	5199	1.0200
5211	5211	1.0300

Table 125 Industry (continued)

SIC Range		
From	To	Factor
5231	5231	1.0300
5251	5261	1.0300
5271	5271	1.0300
5311	5399	0.9700
5411	5411	1.0000
5421	5421	1.0000
5431	5431	1.0000
5441	5441	1.0000
5451	5451	1.0000
5461	5461	1.0000
5499	5499	1.0000
5511	5511	1.1000
5521	5521	1.1000
5531	5531	1.1000
5541	5541	1.1000
5551	5551	1.1200
5561	5561	1.1200
5571	5571	1.1200
5599	5599	1.1200
5611	5651	0.9600
5661	5661	0.9600
5699	5699	0.9600
5712	5719	1.0200
5722	5722	1.0400
5731	5736	0.9700
5812	5812	1.0000
5813	5813	1.0500
5912	5912	0.9700
5921	5921	1.0600
5932	5932	1.0000
5941	5949	0.9700
5961	5963	1.0500
5983	5989	1.0500
5992	5992	1.0000
5993	5999	1.0000
6011	6149	1.0000
6153	6163	1.0300
6211	6289	1.0000
6311	6399	1.0300
6411	6411	1.0300
6512	6519	1.0300
6531	7221	1.0300
6541	6553	1.0300
6712	6799	0.9700
7011	7041	0.9800
7211	7219	0.9900
7221	7221	1.0000
7231	7241	1.0500
7251	7251	1.0300
7261	7261	1.0500
7291	7299	1.0300
7311	7311	0.9800
7312	7319	0.9800
7322	7331	1.0300
7334	7334	0.9600
7335	7336	0.9600
7338	7338	0.9600
7342	7349	0.9800
7352	7352	1.0000
7353	7359	1.0000
7361	7363	1.0300
7371	7379	0.9700
7381	7381	0.9700
7382	7382	1.0000
7383	7383	1.0400
7384	7384	1.0400
7389	7389	1.0000
7513	7519	1.0300
7521	7521	1.0300
7532	7539	1.0100
7542	7549	1.0900
7622	7629	1.0000
7631	7641	1.0000
7692	7692	1.0200
7694	7699	1.0200
7812	7833	1.0600
7841	7841	1.0500
7911	7911	1.0900
7922	7929	1.0900
7933	7933	1.0500
7941	7948	1.0500
7991	7996	1.0500
7997	7999	0.9800
8011	8011	1.0800
8021	8021	1.0400
8031	8041	1.0800
8042	8042	1.0400
8043	8049	1.0800
8051	8059	1.0600
8061	8069	1.1200
8071	8071	1.0800

SIC Range		
From	To	Factor
8072	8072	1.0800
8082	8099	1.0600
8111	8111	1.0700
8211	8211	0.9800
8221	8222	0.9800
8231	8231	0.9800
8243	8244	0.9800
8249	8249	0.9800
8299	8299	0.9800
8322	8322	1.0300
8331	8331	1.0300
8351	8351	1.0300
8361	8361	1.0200
8399	8399	1.0200
8412	8422	0.9600
8611	8611	1.0300
8621	8651	1.0300
8661	8661	1.0000
8699	8699	1.0000
8711	8713	1.0000
8721	8721	1.0000
8731	8732	0.9800
8733	8733	0.9800
8734	8734	0.9800
8741	8748	1.0100
8811	8811	1.0500
8999	8999	1.0000
9111	9131	1.0300
9199	9199	1.0300
9211	9211	1.0100
9221	9221	1.1000
9222	9222	1.1000
9223	9223	1.1000
9224	9224	1.1000
9229	9229	1.1000
9311	9311	1.1000
9411	9451	1.0800
9511	9532	1.0300
9611	9661	1.0200
9711	9711	1.0600
9721	9721	1.1000
9999	9999	1.0500

Table 126 Rating Area

Rating Area	HMO - All Products	OPOS - All Products
	Factor	Factor
All Areas	1.000	1.000

Table 127a. New Business Subscriber Based Age/Gender

Age Band	Two-Tier Factors			
	Male		Female	
	Single	Family	Single	Family
Under 25	0.3997	0.7373	0.8983	1.1142
025 - 029	0.4295	0.7388	0.8053	0.9455
030 - 034	0.4988	0.8920	0.9454	0.9427
035 - 039	0.6022	0.8925	1.0374	0.9126
040 - 044	0.7747	0.8851	1.1428	0.8308
045 - 049	0.9836	0.9399	1.2202	0.8861
050 - 054	1.2461	1.0658	1.3941	1.0292
055 - 059	1.6134	1.1565	1.5898	1.1961
060 - 064	2.0956	1.3696	1.9279	1.4851
065+	2.1562	1.5336	1.9461	1.7547

Table 127b. Renewal Member Based Age/Gender

Age Band	Male	Female
000 - 001	0.5037	0.5314
002 - 004	0.5037	0.5314
005 - 009	0.5037	0.5314
010 - 014	0.5037	0.5314
015 - 019	0.5037	0.5314
020 - 024	0.4907	0.8257
025 - 029	0.4968	1.2662
030 - 034	0.5487	1.4998
035 - 039	0.6435	1.3649
040 - 044	0.7854	1.2306
045 - 049	0.9950	1.2839
050 - 054	1.3817	1.5091
055 - 059	1.7860	1.7173
060 - 064	2.2838	2.1165
065+	3.0422	2.5331

Age Band	Three-Tier Factors					
	Male			Female		
	Single	2-Party	Family	Single	2-Party	Family
Under 25	0.3997	0.5572	1.1197	0.6983	1.2272	1.2685
025 - 029	0.4295	0.5601	0.8894	0.8053	0.9672	1.0170
030 - 034	0.4988	0.6642	0.9134	0.9454	1.0152	0.8869
035 - 039	0.6022	0.7354	0.8383	1.0374	0.9907	0.8326
040 - 044	0.7747	0.8043	0.8109	1.1428	0.8362	0.7811
045 - 049	0.9836	0.9113	0.8643	1.2202	0.9570	0.8306
050 - 054	1.2461	1.1620	0.9836	1.3941	1.1795	0.9687
055 - 059	1.6134	1.3636	1.0660	1.5898	1.4407	1.1079
060 - 064	2.0956	1.6663	1.2344	1.9279	1.8101	1.4096
065+	2.1562	1.8830	1.3747	1.9461	2.1603	1.6491

Age Band	Four-Tier Factors							
	Male				Female			
	Single	EE + Sp	EE + Ch(ren)	Family	Single	EE + Sp	EE + Ch(ren)	Family
Under 25	0.3997	0.5668	0.5863	1.1611	0.6983	0.5942	1.7073	1.3087
025 - 029	0.4295	0.6109	0.4871	0.9120	0.8053	0.6917	1.3613	0.9654
030 - 034	0.4988	0.7545	0.5366	0.9228	0.9454	0.8592	1.1520	0.9068
035 - 039	0.6022	0.8960	0.5513	0.8407	1.0374	0.9242	1.0553	0.8513
040 - 044	0.7747	0.9336	0.6829	0.8008	1.1428	0.9798	0.8411	0.8034
045 - 049	0.9836	1.0192	0.7300	0.8500	1.2202	1.1266	0.8503	0.8501
050 - 054	1.2461	1.2269	0.8660	0.9580	1.3941	1.3071	0.9082	0.9877
055 - 059	1.6134	1.3785	1.0766	1.0225	1.5898	1.5240	0.9120	1.1159
060 - 064	2.0956	1.6579	1.2692	1.1835	1.9279	1.8220	1.3234	1.3897
065+	2.1562	1.8642	1.3214	1.3052	1.9461	2.1665	1.3834	1.5362

Table 128 COBRA

COBRA Penetration	Factor
Under 5%	1.0000
5% - 7%	1.0300
7% - 10%	1.0500
10% - 15%	1.0900
Over 15%	1.1500

Section VI.

Table 130 Tier Factors

Tier	Tier Factor	
2-Tier	Single	1.1088
	Family	3.2110
3-Tier	Single 1.1088	
	2-Party	2.6106
4-Tier	Family	3.7084
	Single 1.1088	
	Par/Child	2.4918
	Couple	2.6504
Medicare	Family	3.9215
	Member	1.1088

Table 131 Dependent Age Adjustment

Age up to	Students	Non-Students
19	-1.6	0.0
20	-1.2	0.4
21	-0.8	0.8
22	-0.4	1.2
23	0.0	1.6
24	0.4	2.0
25	0.8	2.4
26	1.2	2.8
27	1.6	3.2
28*	2.0	3.6

* For each year of age or part thereof beyond 28, add .4 to the last value in the column, not to exceed the factor for age 35.
 ** Up to the end of the month in which the age is reached. If the limiting age is to the end of the calendar year in which the age is reached, add an additional 0.2 to each value in the respective columns.

Section VII.

Table 133a. Administrative Expenses & Profit

Case Size (total lives)	PMPM - Applies to All Products		PPACA Fee****	Retention*	Commissions***	Taxes & Assessments
	HMO	QPOS				
<= 10	\$36.55	\$36.55	\$0.10	0-7.5%	0%-10%	2.70%
<= 50	\$33.40	\$33.40	\$0.10	0-7.5%	0%-10%	2.70%
<= 100	\$32.60	\$32.60	\$0.10	0-7.5%	0%-10%	2.70%
<= 300	\$31.65	\$31.65	\$0.10	0-7.5%	0%-10%	2.70%
<= 1,000	\$30.40	\$30.40	\$0.10	0-7.5%	0%-10%	2.70%
<= 1,500	\$26.25	\$26.25	\$0.10	0-7.5%	0%-10%	2.70%
<= 3,000	\$24.90	\$24.90	\$0.10	0-7.5%	0%-10%	2.70%
<= 4,000	\$23.65	\$23.65	\$0.10	0-7.5%	0%-10%	2.70%
<= 5,000	\$23.50	\$23.50	\$0.10	0-7.5%	0%-10%	2.70%
<= 7,500	\$23.10	\$23.10	\$0.10	0-7.5%	0%-10%	2.70%
<= 10,000	\$23.00	\$23.00	\$0.10	0-7.5%	0%-10%	2.70%
<= 20,000	\$22.90	\$22.90	\$0.10	0-7.5%	0%-10%	2.70%
<= 35,000	\$22.70	\$22.70	\$0.10	0-7.5%	0%-10%	2.70%
<= 70,000	\$22.55	\$22.55	\$0.10	0-7.5%	0%-10%	2.70%
<= 100,000	\$22.35	\$22.35	\$0.10	0-7.5%	0%-10%	2.70%
> 100,000	\$22.15	\$22.15	\$0.10	0-7.5%	0%-10%	2.70%

* Retention may be adjusted to reflect case specific circumstances such as inclusion or exclusion of certain programs (i.e. wellness programs), case specific commissions, or margin for risk sharing arrangements, etc.
 ** The Aexcel Retention percentages should only be used in the retention calculation if an Aexcel Network applies.
 *** Aetna's standard is not to include commissions in our premiums. Should the customer instruct Aetna to include a broker fee, final billing rates to the Customer will be modified to reflect the agreed upon schedule.
 **** PPACA imposed Patient Centered Outcomes Research Fund Fee.

b. Family Size Adjustment

Member to Subscriber Ratio	PMPM
<= 1.49	\$1.10
1.50 to 1.79	\$0.00
1.80 to 2.39	\$0.00
2.40 to 2.79	\$0.00
>= 2.8	(\$2.00)

c. ERISA Adjustment

Applicability	PMPM
ERISA Plan	\$0.00
non-ERISA Plan	\$0.75

Pharmacy Benefit Plan – Manual Rate Calculation

Refer to the Pharmacy Plan Rate Development Worksheet in [Section C](#).

I. Pharmacy Start Rate

Calculate the Pharmacy Start Rate as follows:

$$\begin{array}{l} \text{Starting Base Plan Claim Cost} \\ \quad \times \\ \text{Benefit Adjustment Factor} \\ \quad \times \\ \text{Trend Factor} \end{array}$$

Starting Base Plan Claim Cost

The Starting Base Plan Claim Cost is the PMPM for a \$10/\$15/\$30 open formulary copay plan with no deductible, for up to 34 day supply of retail prescriptions (and with one copay for up to 90 day supply for maintenance medications) .

Benefit Adjustment Factor

The Benefit Adjustment Factor is the product of the following factors:

$$\begin{array}{l} \text{Pharmacy Plan Option Factor} \\ \quad \times \\ \text{Restrictive Formulary Factor} \\ \quad \times \\ \text{Mandatory Generic Factor} \\ \quad \times \\ \text{DAW Factor} \\ \quad \times \\ \text{Multiple Copayment Factor} \\ \quad \times \\ \text{30-Day Maintenance Supply Factor} \\ \quad \times \\ \text{Mail Order Drug Only Factor} \\ \quad \times \\ \text{Mandatory Mail Order Factor} \\ \quad \times \\ \text{Coinsurance Min/Max Factor} \\ \quad \times \\ \text{Oral Contraceptives Factor} \\ \quad \times \\ \text{Sexual Performance Drug Factor} \\ \quad \times \\ \text{Deductible Factor} \\ \quad \times \\ \text{Maximum Annual Benefit Factor} \\ \quad \times \\ \text{Out-of-Pocket Maximum Factor} \end{array}$$

x
 Custom Product Factor
 x
 Step Therapy/Precertification Adjustment Factor
 x
 Chronic and/or Preventative Drug Deductible Waiver Adjustment Factor
 x
 Infertility Drug Coverage Adjustment Factor
 x
 Per Script Copay Maximum Factor
 x
 Incentivized MOD Factor

Trend Factor

Select the appropriate factor from the Trend Factor table.

II. Pharmacy Flex Plan Claim Cost

Industry Factor

Select the appropriate factor from the Industry Factor table.

Rating Area Factor

Select the appropriate factor from the Rating Area Factor table.

Age/Gender Factor

Calculate the appropriate Age/Gender Factor as follows:

Use the New Business Subscriber Based Age/Gender Factor table, the expected employee census, segmented by age, gender and rate tier, and the Tier Factors to calculate the adjustment factor. First sum the product of the expected subscribers times the appropriate age/gender and Tier factors. This result is then divided by the sum of the product of the expected subscribers by tier times the appropriate rate Tier factors to obtain the age/gender adjustment.

Calculate the appropriate Renewal Business Age/Gender Factor as follows:

Use the Renewal Member Based Age/Gender Factor table and the expected enrolled membership segmented by age and gender to calculate the Weighted Average Age/Gender Factor by taking the sum product of the age/gender factor and the expected enrolled membership.

Calculate the Contract Mix/Family Size Factor. This factor reflects the distribution of enrollment by contract 'tier' type and the average members per contract tier of the group. To calculate this factor, first calculate the group's average number of members per contract. Next, calculate the group's average rate tier factor by weighting the community rate tier factors with the group's actual number of contracts per tier. The contract mix/family size factor is then calculated by dividing the group's average number of members per contract by the group's average rate tier factor.

Multiply the Weighted Average Age/Gender Factor by the Contract Mix/Family Size Factor to get the Age/Gender Factor

Multiply the Pharmacy Start Rate as calculated in **I.** by the following to get the Flex Plan Claim Cost PMPM:

$$\begin{array}{l} \text{Industry Factor} \\ \quad \times \\ \text{Rating Area Factor} \\ \quad \times \\ \text{Age/Gender Factor} \end{array}$$

III. Adjusted Pharmacy Claim Cost by Billing Tier

Tier Factor

For each billing tier, multiply the [Pharmacy Flex Plan Claim Cost](#) by the appropriate Tier Factor from the Tier Factor table.

Dependent Age Adjustment Factor

For those tiers under which children may be covered, apply the appropriate factor. Other tiers will use a factor of 1.0.

Multiply the Flex Plan Claim Cost PMPM as calculated in **II.** by the following to get the Adjusted Pharmacy Claim Cost by Billing Tier:

$$\begin{array}{l} \text{Tier Factor} \\ \quad \times \\ \text{Dependent Age Adjustment Factor} \end{array}$$

IV. Pharmacy Plan Manual Premium Rates by Billing Tier

Multiply the Adjusted Pharmacy Claim Cost by Billing Tier as calculated in **III.** by the adjustment factor from d. below to get Pharmacy Plan Manual Premium Rates by Billing Tier:

[Administrative Expense and Profit](#)

- a. Enter the Administrative Expenses and Profit table with total case lives and retrieve the appropriate Pharmacy PMPM expense. Also retrieve the appropriate Retention, Commission, and Taxes and Assessments percentages.
- b. Multiply the PMPM in a. by members to get Total Retention amount.
- c. Multiply Adjusted Pharmacy Claim Cost by Billing Tier by the appropriate number of subscribers in each tier to get Total Monthly Claim Cost.
- d. The Administrative Expense and Profit Factor will be $[(\text{Total Monthly Claim Cost} + \text{Total Retention amount}) / (1 - \text{Retention Expense \%} - \text{Commissions \%} - \text{Taxes and Assessments \%})] / (\text{Total Monthly Claim Cost})$

Retention may be adjusted to reflect case specific circumstances such as inclusion or exclusion of certain programs (i.e. wellness programs), case specific commissions, or margin for risk sharing arrangements, etc.

Underwriter Adjustment Factor

Enter the Underwriter Adjustment if applicable.

Note: Rounding to the eighth decimal place occurs in every calculation, with the exception of the last calculation which gets rounded to the second decimal place.

Also, enter these rates on the appropriate line in the Medical Section of the Rate Manual.

Pharmacy Plan Rate Development Worksheet

Customer Name: _____ Customer No.: _____ Effective Date: _____ Today's Date: _____

Section I.

- 1 3rd Quarter 2012 Starting Base Plan Claim Cost _____
- 2 Selected Benefit Option _____
- 3 Restrictive Formulary _____
- 4 Mandatory Generic _____
- 5 Dispense as Written _____
- 6 Multiple Copayment _____
- 7 30 day Maintenance Supply _____
- 8 Mail Order Drug Only _____
- 8a Mandatory Mail Order _____
- 9 Coinsurance Min/Max _____
- 10 Oral Contraceptives _____
- 11 Sexual Performance Drug _____
- 12 Deductible _____
- 13 Maximum Annual Benefit _____
- 14 Out-of-Pocket Maximum _____
- 15 Custom Product _____
- 16 Step Therapy/Pre-certification Adjustment _____
- 17 Chronic and/or Preventative Drug Deductible Waiver Adjustment _____
- 18 Infertility Drug Coverage Adjustment _____
- 19 Per Script Copay Maximum _____
- 20 Incentivized MOD _____
- 21 Benefit Adjustment 2 x 3 x 4 x 5 x 6 x 7 x 8 x 8a x 9x 10 x 11 x 12 x 13 x 14 x 15 x 16 x 17 x 18 x 19 x 20 _____
- 22 Trend _____
- 23 Pharmacy Start Rate 1 x 21 x 22 _____

Section II.

- 24 Industry _____
- 25 Rating Area _____
- 26 Age/Gender _____
- 27 Flex Plan Claim Cost PMPM 23 x 24 x 25 x 26 _____

Section III.

28 Tier

Two-tier Structure		Three-tier Structure			Four-tier Structure				Medicare
Single	Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member

29 Dependent Age Adjustment

Two-tier Structure		Three-tier Structure			Four-tier Structure				Medicare
Single	Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member
1.00		1.00			1.00		1.00		1.00

Dependent Age Adjustment Worksheet		
	Limiting Age	Adjustment
a. Student:	_____	_____
b. Non-Student:	_____	_____
c. $[1.00 + ((a.+ b.) / 100)]$		

30 Adjusted Pharmacy Claim Cost by Billing Tier 27 x 28 x 29

Two-tier Structure		Three-tier Structure			Four-tier Structure				Medicare
Single	Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member

Section IV.

- 31 Administrative Expenses & Profit Factor _____
 - 32 This line reserved for future use _____
 - 33 Underwriter Adjustment _____
 - 34 Pharmacy Plan Manual Premium Rates by Billing Tier 30 x 31 x 32 x 33
- | Two-tier Structure | | Three-tier Structure | | | Four-tier Structure | | | | Medicare |
|--------------------|--------|----------------------|---------|--------|---------------------|-----------|--------|--------|----------|
| Single | Family | Single | 2-Party | Family | Single | Par/Child | Couple | Family | Member |
| | | | | | | | | | |

NOTE: Rounding to the fourth decimal place occurs in every calculation, with the exception of the last calculation which gets rounded to the second decimal place.

Pharmacy PMPM and Factor Tables

Section I.

Table 1 3rd Quarter 2012 Starting Base Plan Claim Cost

Network	Base PMPM
DC	\$59.71

* The Starting Base Plan Claim Cost is the PMPM for a \$10/\$15/\$30 open formulary copay plan with no deductible, for up to 34 day supply of retail prescriptions (and with one copay for up to 90 day supply for maintenance medications).

Table 10 Oral Contraceptives

Option	Factor
Covered	1.0000
Not Covered	0.9750
Covered waive cost share/vary by copay	

Single - Tier Copay Levels	Table 2	Table 3	Table 4	Table 5	Table 6 Multiple Copayment					Table 7	Table 8	Table 8A Multiple Copayment			Table 9	Table 10
					Pharmacy Plan Option	Restrictive Formulary	Mandatory Generic	Dispense as Written	2X-90 day			2.5X-90 day	3X-90 day	2X-60 day		
All Generic and All Brand	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor
\$0.00	1.4890	0.9680	0.9300	1.0215	1.0000	1.0000	1.0000	0.9950	1.0000	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0000
\$1.00	1.4646	0.9682	0.9300	1.0215	0.9992	0.9988	0.9984	0.9934	0.9989	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0050
\$2.00	1.4405	0.9684	0.9300	1.0215	0.9984	0.9976	0.9968	0.9918	0.9978	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0100
\$2.50	1.4285	0.9685	0.9300	1.0215	0.9980	0.9970	0.9960	0.9910	0.9972	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0161
\$3.00	1.4166	0.9686	0.9300	1.0215	0.9976	0.9964	0.9952	0.9902	0.9966	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0275
\$4.00	1.3930	0.9688	0.9300	1.0215	0.9968	0.9952	0.9936	0.9886	0.9955	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0150
\$5.00	1.3697	0.9690	0.9300	1.0215	0.9960	0.9940	0.9919	0.9869	0.9944	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0250
\$6.00	1.3466	0.9692	0.9300	1.0215	0.9951	0.9927	0.9903	0.9853	0.9932	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0300
\$7.00	1.3244	0.9694	0.9300	1.0215	0.9943	0.9915	0.9887	0.9838	0.9921	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0350
\$7.50	1.3136	0.9695	0.9300	1.0215	0.9939	0.9909	0.9879	0.9830	0.9915	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0400
\$8.00	1.3029	0.9696	0.9300	1.0215	0.9935	0.9903	0.9871	0.9822	0.9909	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0450
\$10.00	1.2606	0.9700	0.9300	1.0215	0.9918	0.9879	0.9839	0.9790	0.9886	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0650
\$12.00	1.2193	0.9744	0.9300	1.0215	0.9901	0.9854	0.9806	0.9757	0.9863	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0750
\$15.00	1.1212	0.9877	0.9300	1.0215	0.9903	0.9857	0.9811	0.9762	0.9866	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0850
\$20.00	1.0257	0.9895	0.9300	1.0215	0.9869	0.9809	0.9748	0.9699	0.9821	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1050
\$25.00	0.9349	0.9911	0.9300	1.0215	0.9834	0.9759	0.9683	0.9635	0.9774	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1150
\$30.00	0.8534	0.9926	0.9300	1.0215	0.9797	0.9707	0.9617	0.9569	0.9725	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1250
\$35.00	0.7762	0.9938	0.9300	1.0215	0.9760	0.9656	0.9552	0.9504	0.9677	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1500
\$40.00	0.7050	0.9950	0.9300	1.0215	0.9719	0.9602	0.9485	0.9438	0.9625	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1600
\$45.00	0.6378	0.9960	0.9300	1.0215	0.9677	0.9544	0.9411	0.9364	0.9571	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1700
\$50.00	0.5742	0.9968	0.9300	1.0215	0.9630	0.9483	0.9336	0.9289	0.9512	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1750
\$55.00	0.5168	0.9976	0.9300	1.0215	0.9585	0.9420	0.9255	0.9209	0.9453	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1800
\$60.00	0.4627	0.9982	0.9300	1.0215	0.9532	0.9353	0.9174	0.9128	0.9389	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1850
\$65.00	0.4428	0.9985	0.9300	1.0215	0.9497	0.9314	0.9130	0.9084	0.9350	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1900
\$70.00	0.4245	0.9989	0.9300	1.0215	0.9464	0.9275	0.9085	0.9040	0.9312	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1950
\$75.00	0.4080	0.9991	0.9300	1.0215	0.9436	0.9239	0.9041	0.8996	0.9278	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.2000
10% Coinsurance	1.0627	N/A	0.9900	1.0050	1.0000	1.0000	1.0000	0.9950	1.0000	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0360
15% Coinsurance	0.9703	N/A	0.9900	1.0050	1.0000	1.0000	1.0000	0.9950	1.0000	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0438
20% Coinsurance	0.8941	N/A	0.9900	1.0000	1.0000	1.0000	1.0000	0.9950	1.0000	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0502
25% Coinsurance	0.8263	N/A	0.9900	1.0050	1.0000	1.0000	1.0000	0.9950	1.0000	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0560
30% Coinsurance	0.7610	N/A	0.9900	1.0050	1.0000	1.0000	1.0000	0.9950	1.0000	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0615
40% Coinsurance	0.6369	N/A	0.9900	1.0050	1.0000	1.0000	1.0000	0.9950	1.0000	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0820
50% Coinsurance	0.5201	N/A	0.9900	1.0050	1.0000	1.0000	1.0000	0.9950	1.0000	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1422
60% Coinsurance	0.4092	N/A	0.9900	1.0050	1.0000	1.0000	1.0000	0.9950	1.0000	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1994

Two - Tier Copay Levels	Table 2	Table 3	Table 4	Table 5	Table 6					Table 7	Table 8	Table 8A			Table 9	Table 10
					Multiple Copayment							Multiple Copayment				
					2X-90 day Factor	2.5X-90 day Factor	3X-90 day Factor	2X-60 day Factor	1x-30 day/2x-60 day/3x-90 day Factor			30-Day Maint Supply Factor	Order After 1 Fill at 2X Copay Factor	Order After 1 Fill at 2.5X Copay Factor		
Generic & Brand-Formulary / Brand Non-Formulary	Pharmacy Plan Option Factor	Restrictive Formulary Factor	Mandatory Generic Factor	Dispense as Written Factor	2X-90 day Factor	2.5X-90 day Factor	3X-90 day Factor	2X-60 day Factor	1x-30 day/2x-60 day/3x-90 day Factor	30-Day Maint Supply Factor	Order After 1 Fill at 2X Copay Factor	Order After 1 Fill at 2.5X Copay Factor	Order After 1 Fill at 3X Copay Factor	Coinsurance Min/Max Factor	Contraceptives Share	
\$1.00 / \$2.00	1.4598	N/A	N/A	N/A	0.9990	0.9985	0.9980	0.9930	0.9986	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0051
\$2.00 / \$4.00	1.4310	N/A	N/A	N/A	0.9980	0.9971	0.9961	0.9911	0.9972	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0158
\$2.50 / \$7.50	1.4050	N/A	N/A	N/A	0.9970	0.9956	0.9941	0.9891	0.9958	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0181
\$3.00 / \$6.00	1.3619	N/A	N/A	N/A	0.9970	0.9955	0.9940	0.9890	0.9958	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0326
\$4.00 / \$9.00	1.3300	N/A	N/A	N/A	0.9958	0.9937	0.9915	0.9865	0.9941	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0168
\$5.00 / \$10.00	1.3071	N/A	N/A	N/A	0.9949	0.9924	0.9898	0.9849	0.9929	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0265
\$5.00 / \$15.00	1.2859	N/A	N/A	N/A	0.9939	0.9909	0.9879	0.9830	0.9915	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0270
\$5.00 / \$20.00	1.2649	N/A	N/A	N/A	0.9930	0.9895	0.9860	0.9811	0.9902	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0275
\$5.00 / \$25.00	1.2442	N/A	N/A	N/A	0.9920	0.9880	0.9840	0.9791	0.9888	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0280
\$6.00 / \$11.00	1.2846	N/A	N/A	N/A	0.9940	0.9911	0.9882	0.9833	0.9917	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0340
\$6.00 / \$12.00	1.2803	N/A	N/A	N/A	0.9939	0.9909	0.9878	0.9829	0.9915	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0343
\$7.00 / \$12.00	1.2628	N/A	N/A	N/A	0.9932	0.9899	0.9865	0.9816	0.9905	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0369
\$7.50 / \$12.00	1.2543	N/A	N/A	N/A	0.9928	0.9893	0.9858	0.9809	0.9900	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0433
\$8.00 / \$13.00	1.2020	N/A	N/A	N/A	0.9922	0.9884	0.9846	0.9797	0.9892	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0488
\$10.00 / \$15.00	1.1613	N/A	N/A	N/A	0.9904	0.9858	0.9812	0.9763	0.9867	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0672
\$10.00 / \$20.00	1.1425	N/A	N/A	N/A	0.9894	0.9843	0.9792	0.9743	0.9853	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0676
\$10.00 / \$25.00	1.1240	N/A	N/A	N/A	0.9884	0.9828	0.9772	0.9723	0.9839	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0680
\$12.00 / \$17.00	1.1215	N/A	N/A	N/A	0.9887	0.9833	0.9778	0.9729	0.9843	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0791
\$15.00 / \$20.00	1.0289	N/A	N/A	N/A	0.9889	0.9837	0.9784	0.9735	0.9847	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0874
\$15.00 / \$25.00	1.0159	N/A	N/A	N/A	0.9881	0.9825	0.9768	0.9719	0.9836	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0877
\$20.00 / \$25.00	0.9360	N/A	N/A	N/A	0.9852	0.9784	0.9716	0.9667	0.9798	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1077
\$20.00 / \$30.00	0.9244	N/A	N/A	N/A	0.9844	0.9773	0.9701	0.9652	0.9787	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1080
\$30.00 / \$40.00	0.7597	N/A	N/A	N/A	0.9765	0.9663	0.9560	0.9512	0.9683	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1292
\$30.00 / \$50.00	0.7422	N/A	N/A	N/A	0.9749	0.9640	0.9530	0.9482	0.9661	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1299

Two - Tier Copay Levels	Table 2	Table 3	Table 4	Table 5	Table 6					Table 7	Table 8	Table 8A			Table 9	Table 10		
					Multiple Copayment							30-Day Maint Supply	Mail Order Only for Extended Days Supply	Mandatory Mail Order After 1 Fill at 2X Copay			Mandatory Mail Order After 1 Fill at 2.5X Copay	Mandatory Mail Order After 1 Fill at 3X Copay
					2X-90 day	2.5X-90 day	3X-90 day	2X-60 day	1x-30 day/2x-60 day/3x-90 day									
Pharmacy Plan Option Factor	Restrictive Formulary Factor	Mandatory Generic Factor	Dispense as Written Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Coinurance Min/Max	Oral Contraceptives Share			
All Generic / All Brand																		
\$0.00 / \$10.00	1.2576	0.9261	0.9500	1.0263	0.9957	0.9936	0.9914	0.9864	0.9940	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0039		
\$0.00 / \$15.00	1.1773	0.9283	0.9900	1.0050	0.9936	0.9905	0.9873	0.9824	0.9911	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0053		
\$0.00 / \$20.00	1.1031	0.9304	0.9900	1.0050	0.9917	0.9876	0.9834	0.9785	0.9884	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0065		
\$0.00 / \$25.00	1.0346	0.9324	0.9900	1.0050	0.9888	0.9848	0.9797	0.9748	0.9858	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0077		
\$1.00 / \$2.00	1.4034	0.9218	0.9500	1.0263	0.9987	0.9981	0.9975	0.9925	0.9982	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0066		
\$1.00 / \$3.00	1.3511	0.9235	0.9500	1.0263	0.9983	0.9975	0.9966	0.9916	0.9976	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0080		
\$1.00 / \$5.00	1.3311	0.9238	0.9500	1.0263	0.9974	0.9961	0.9948	0.9898	0.9964	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0085		
\$1.00 / \$10.00	1.2441	0.9261	0.9500	1.0263	0.9952	0.9929	0.9905	0.9855	0.9933	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0107		
\$1.00 / \$15.00	1.1636	0.9283	0.9500	1.0263	0.9931	0.9897	0.9863	0.9814	0.9904	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0128		
\$1.00 / \$20.00	1.0893	0.9304	0.9900	1.0050	0.9911	0.9867	0.9823	0.9774	0.9876	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0148		
\$1.00 / \$25.00	1.0205	0.9324	0.9900	1.0050	0.9892	0.9839	0.9785	0.9736	0.9849	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0166		
\$2.00 / \$4.00	1.3277	0.9237	0.9500	1.0263	0.9974	0.9962	0.9949	0.9899	0.9964	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0249		
\$2.00 / \$7.00	1.2980	0.9242	0.9500	1.0263	0.9961	0.9942	0.9922	0.9872	0.9945	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0276		
\$2.00 / \$10.00	1.2306	0.9261	0.9500	1.0263	0.9948	0.9922	0.9896	0.9847	0.9927	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0335		
\$2.50 / \$7.50	1.2866	0.9243	0.9500	1.0263	0.9957	0.9936	0.9914	0.9864	0.9940	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0286		
\$3.00 / \$6.00	1.2947	0.9240	0.9500	1.0263	0.9961	0.9942	0.9923	0.9873	0.9946	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0389		
\$4.00 / \$9.00	1.2130	0.9260	0.9500	1.0263	0.9943	0.9915	0.9887	0.9838	0.9921	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0201		
\$4.00 / \$10.00	1.2040	0.9261	0.9500	1.0263	0.9939	0.9909	0.9878	0.9829	0.9915	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0204		
\$4.00 / \$15.00	1.1232	0.9283	0.9500	1.0263	0.9916	0.9875	0.9833	0.9784	0.9883	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0227		
\$4.00 / \$20.00	1.0483	0.9304	0.9900	1.0050	0.9894	0.9842	0.9789	0.9740	0.9852	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0248		
\$4.00 / \$25.00	0.9791	0.9324	0.9900	1.0050	0.9873	0.9810	0.9747	0.9698	0.9823	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0268		
\$5.00 / \$7.00	1.2590	0.9242	0.9500	1.0263	0.9948	0.9923	0.9897	0.9848	0.9928	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0277		
\$5.00 / \$7.50	1.2542	0.9243	0.9500	1.0263	0.9946	0.9920	0.9893	0.9844	0.9925	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0278		
\$5.00 / \$8.00	1.2086	0.9258	0.9500	1.0263	0.9943	0.9915	0.9887	0.9838	0.9921	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0289		
\$5.00 / \$10.00	1.1909	0.9261	0.9500	1.0263	0.9934	0.9902	0.9869	0.9820	0.9908	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0293		
\$5.00 / \$15.00	1.1099	0.9283	0.9500	1.0263	0.9911	0.9867	0.9823	0.9774	0.9876	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0313		
\$5.00 / \$20.00	1.0349	0.9304	0.9900	1.0050	0.9889	0.9834	0.9778	0.9729	0.9845	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0331		
\$6.00 / \$11.00	1.1690	0.9263	0.9500	1.0263	0.9925	0.9888	0.9851	0.9802	0.9895	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0414		
\$6.00 / \$12.00	1.1603	0.9264	0.9500	1.0263	0.9920	0.9881	0.9842	0.9793	0.9889	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0420		
\$7.00 / \$10.00	1.1654	0.9261	0.9500	1.0263	0.9925	0.9888	0.9851	0.9802	0.9895	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0399		
\$7.00 / \$12.00	1.1481	0.9264	0.9500	1.0263	0.9915	0.9874	0.9833	0.9784	0.9882	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0405		
\$7.00 / \$14.00	1.0922	0.9281	0.9500	1.0263	0.9905	0.9859	0.9812	0.9763	0.9868	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0422		
\$7.00 / \$15.00	1.0842	0.9283	0.9500	1.0263	0.9901	0.9852	0.9803	0.9754	0.9862	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0425		
\$7.00 / \$20.00	1.0090	0.9304	0.9500	1.0263	0.9877	0.9817	0.9756	0.9707	0.9829	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0448		
\$7.00 / \$25.00	0.9942	N/A	0.9900	1.0050	0.9866	0.9801	0.9736	0.9687	0.9814	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0453		
\$7.00 / \$30.00	0.8750	0.9389	0.9900	1.0050	0.9831	0.9759	0.9687	0.9639	0.9773	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0490		
\$7.50 / \$12.00	1.1423	0.9264	0.9500	1.0263	0.9913	0.9871	0.9828	0.9779	0.9879	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0496		
\$8.00 / \$13.00	1.0883	0.9280	0.9500	1.0263	0.9905	0.9859	0.9812	0.9763	0.9868	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0530		
\$8.00 / \$16.00	1.0646	0.9284	0.9500	1.0263	0.9891	0.9838	0.9785	0.9736	0.9849	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0539		
\$8.00 / \$18.00	1.0115	0.9301	0.9500	1.0263	0.9881	0.9823	0.9764	0.9715	0.9834	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0559		
\$9.00 / \$10.00	1.1422	0.9261	0.9500	1.0263	0.9916	0.9876	0.9835	0.9786	0.9884	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0550		
\$9.00 / \$15.00	1.0608	0.9283	0.9500	1.0263	0.9891	0.9838	0.9785	0.9736	0.9849	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0587		
\$9.00 / \$18.00	0.9997	0.9301	0.9500	1.0263	0.9875	0.9815	0.9755	0.9706	0.9827	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0615		
\$9.00 / \$20.00	0.9855	0.9329	0.9500	1.0263	0.9866	0.9801	0.9736	0.9687	0.9814	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0621		
\$9.00 / \$25.00	0.9157	0.9391	0.9900	1.0050	0.9841	0.9780	0.9718	0.9669	0.9792	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0653		
\$10.00 / \$15.00	1.0493	0.9283	0.9500	1.0263	0.9886	0.9831	0.9776	0.9727	0.9842	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0697		
\$10.00 / \$20.00	0.9738	0.9354	0.9500	1.0263	0.9861	0.9794	0.9726	0.9677	0.9807	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0713		
\$10.00 / \$25.00	0.9040	0.9418	0.9900	1.0050	0.9864	0.9800	0.9736	0.9687	0.9813	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0729		
\$10.00 / \$30.00	0.8429	0.9430	0.9900	1.0050	0.9845	0.9772	0.9698	0.9650	0.9786	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0742		
\$10.00 / \$35.00	0.7857	0.9439	0.9900	1.0050	0.9824	0.9741	0.9658	0.9610	0.9758	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0755		
\$10.00 / \$50.00	0.6337	0.9461	0.9900	1.0050	0.9760	0.9648	0.9536	0.9488	0.9670	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0788		
\$12.00 / \$17.00	1.0111	0.9360	0.9500	1.0263	0.9867	0.9809	0.9750	0.9701	0.9820	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0838		
\$15.00 / \$20.00	0.9243	0.9414	0.9500	1.0263	0.9869	0.9808	0.9746	0.9697	0.9820	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0901		
\$15.00 / \$25.00	0.8591	0.9424	0.9500	1.0263	0.9846	0.9773	0.9700	0.9652	0.9788	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0918		
\$15.00 / \$30.00	0.7974	0.9434	0.9900	1.0050	0.9821	0.9737	0.9653	0.9605	0.9754	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0934		
\$15.00 / 50%	0.5442	N/A	0.9900	1.0050	0.9918	0.9883	0.9847	0.9798	0.9890	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1000		
\$20.00 / \$25.00	0.8345	0.9428	0.9500	1.0263	0.9828	0.9750	0.9672	0.9624	0.9766	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1107		
\$20.00 / \$30.00	0.7727	0.9437	0.9500	1.0263	0.9801	0.9712	0.9622	0.9574	0.9729	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1126		
\$20.00 / \$40.00	0.6591	0.9453	0.9900	1.0050	0.9744	0.9630	0.9516	0.9468	0.9653	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1160		
\$20.00 / \$50.00	0.5580	0.9465	0.9900	1.0050	0.9683	0.9543	0.9402	0.9355	0.9571	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.1191		
\$30.00 / \$40.00	0.6180	0.9458	0.9500	1.0263	0.9705	0.9579	0.9452	0.9405	0.9604	0.9700	0.9900	1.000						

Three - Tier Copay Levels	Table 2	Table 3	Table 4	Table 5	Table 6					Table 7	Table 8	Table 8A			Table 9	Table 10
					Multiple Copayment							Multiple Copayment				
Generic Formulary/Brand Formulary/	Pharmacy Plan	Restrictive	Mandatory	Dispense as Written	2X-90 day	2.5X-90 day	3X-90 day	2X-60 day	1x-30 day/2x-60	30-Day	only for Extended	Mandatory Mail Order After 1 Fill at 2X Copay	Mandatory Mail Order After 1 Fill at 2.5X Copay	Mandatory Mail Order After 1 Fill at 3X Copay	Coinsurance	Oral Contraceptives
Non-Formulary OR Generic/Brand Formulary/Brand Non-Formulary	Option Factor	Formulary Factor	Generic Factor	Dispense as Written Factor	Factor	Factor	Factor	Factor	Factor	Maint Supply Factor	Factor	Factor	Factor	Factor	Min/Max	Share
\$0.00 / \$10.00 / \$25.00	1.2002	N/A	0.9900	1.0050	0.9927	0.9891	0.9855	0.9806	0.9898	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0049
\$0.00 / \$10.00 / 50%	0.9786	N/A	0.9900	1.0050	0.9979	0.9869	0.9958	0.9908	0.9971	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0086
\$0.00 / \$15.00 / \$30.00	1.1247	N/A	0.9900	1.0050	0.9907	0.9861	0.9815	0.9766	0.9870	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0062
\$0.00 / \$15.00 / 50%	0.9378	N/A	0.9900	1.0050	0.9969	0.9954	0.9938	0.9888	0.9957	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0093
\$0.00 / \$20.00 / \$35.00	1.0553	N/A	0.9900	1.0050	0.9887	0.9833	0.9778	0.9729	0.9843	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0073
\$0.00 / \$20.00 / \$40.00	1.0395	N/A	0.9900	1.0050	0.9878	0.9820	0.9761	0.9712	0.9831	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0076
\$0.00 / \$20.00 / 50%	0.8984	N/A	0.9900	1.0050	0.9959	0.9939	0.9919	0.9869	0.9943	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0100
\$0.00 / \$25.00 / \$40.00	0.9913	N/A	0.9900	1.0050	0.9869	0.9806	0.9743	0.9684	0.9819	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0084
\$0.00 / \$25.00 / \$45.00	0.9772	N/A	0.9900	1.0050	0.9860	0.9793	0.9726	0.9677	0.9806	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0087
\$0.00 / \$25.00 / \$50.00	0.9634	N/A	0.9900	1.0050	0.9851	0.9780	0.9709	0.9660	0.9794	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0089
\$0.00 / \$30.00 / \$45.00	0.9324	N/A	0.9900	1.0050	0.9852	0.9782	0.9711	0.9662	0.9796	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0094
\$0.00 / \$30.00 / \$50.00	0.9199	N/A	0.9900	1.0050	0.9844	0.9769	0.9694	0.9646	0.9784	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0096
\$0.00 / \$30.00 / \$60.00	0.8955	N/A	0.9900	1.0050	0.9826	0.9744	0.9661	0.9613	0.9760	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0100
\$1.00 / \$5.00 / \$10.00	1.3123	N/A	0.9500	1.0263	0.9964	0.9946	0.9928	0.9878	0.9950	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0090
\$1.00 / \$5.00 / 50%	1.0120	N/A	0.9900	1.0050	0.9986	0.9979	0.9972	0.9922	0.9980	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0168
\$1.00 / \$10.00 / \$25.00	1.1870	N/A	0.9900	1.0050	0.9922	0.9884	0.9846	0.9797	0.9892	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0122
\$1.00 / \$10.00 / 50%	0.9694	N/A	0.9900	1.0050	0.9975	0.9963	0.9905	0.9900	0.9965	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0179
\$1.00 / \$15.00 / \$30.00	1.1114	N/A	0.9900	1.0050	0.9902	0.9854	0.9805	0.9756	0.9863	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0142
\$1.00 / \$15.00 / 50%	0.9282	N/A	0.9900	1.0050	0.9965	0.9948	0.9930	0.9880	0.9951	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0190
\$1.00 / \$20.00 / \$35.00	1.0417	N/A	0.9900	1.0050	0.9882	0.9825	0.9767	0.9718	0.9836	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0160
\$1.00 / \$20.00 / \$40.00	1.0261	N/A	0.9900	1.0050	0.9872	0.9811	0.9749	0.9700	0.9823	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0164
\$1.00 / \$20.00 / 50%	0.8885	N/A	0.9900	1.0050	0.9955	0.9932	0.9909	0.9859	0.9937	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0200
\$1.00 / \$25.00 / \$40.00	0.9775	N/A	0.9900	1.0050	0.9863	0.9797	0.9731	0.9682	0.9810	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0177
\$1.00 / \$25.00 / \$45.00	0.9636	N/A	0.9900	1.0050	0.9853	0.9783	0.9713	0.9664	0.9797	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0180
\$1.00 / \$25.00 / \$50.00	0.9499	N/A	0.9900	1.0050	0.9845	0.9771	0.9696	0.9648	0.9785	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0184
\$1.00 / \$30.00 / \$45.00	0.9185	N/A	0.9900	1.0050	0.9845	0.9771	0.9697	0.9649	0.9786	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0192
\$1.00 / \$30.00 / \$50.00	0.9061	N/A	0.9900	1.0050	0.9836	0.9758	0.9680	0.9632	0.9774	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0195
\$2.00 / \$5.00 / \$10.00	1.2991	N/A	0.9500	1.0263	0.9960	0.9940	0.9920	0.9870	0.9944	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0275
\$2.00 / \$15.00 / \$25.00	1.1158	N/A	0.9900	1.0050	0.9906	0.9860	0.9814	0.9765	0.9869	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0436
\$2.50 / \$7.50 / \$12.00	1.2703	N/A	0.9500	1.0263	0.9947	0.9921	0.9895	0.9846	0.9926	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0300
\$3.00 / \$6.00 / \$10.00	1.2805	N/A	0.9500	1.0263	0.9953	0.9930	0.9907	0.9857	0.9935	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0403
\$4.00 / \$9.00 / \$14.00	1.1956	N/A	0.9500	1.0263	0.9933	0.9900	0.9866	0.9817	0.9906	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0206
\$4.00 / \$10.00 / \$25.00	1.1480	N/A	0.9900	1.0050	0.9908	0.9863	0.9817	0.9768	0.9872	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0220
\$4.00 / \$10.00 / 50%	0.9421	N/A	0.9900	1.0050	0.9963	0.9945	0.9927	0.9877	0.9949	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0278
\$4.00 / \$15.00 / \$30.00	1.0719	N/A	0.9900	1.0050	0.9886	0.9830	0.9773	0.9724	0.9841	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0241
\$4.00 / \$15.00 / 50%	0.8999	N/A	0.9900	1.0050	0.9952	0.9928	0.9903	0.9853	0.9932	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0290
\$4.00 / \$20.00 / \$35.00	1.0018	N/A	0.9900	1.0050	0.9864	0.9798	0.9732	0.9683	0.9811	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0261
\$4.00 / \$20.00 / \$40.00	0.9865	N/A	0.9900	1.0050	0.9854	0.9784	0.9713	0.9664	0.9798	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0266
\$4.00 / \$20.00 / 50%	0.8591	N/A	0.9900	1.0050	0.9940	0.9910	0.9880	0.9831	0.9916	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0302
\$4.00 / \$25.00 / \$40.00	0.9370	N/A	0.9900	1.0050	0.9843	0.9768	0.9692	0.9644	0.9783	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0280
\$4.00 / \$25.00 / \$45.00	0.9235	N/A	0.9900	1.0050	0.9833	0.9761	0.9688	0.9640	0.9775	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0283
\$4.00 / \$25.00 / \$50.00	0.9101	N/A	0.9900	1.0050	0.9838	0.9771	0.9703	0.9654	0.9784	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0287
\$4.00 / \$30.00 / \$45.00	0.8774	N/A	0.9900	1.0050	0.9823	0.9748	0.9673	0.9625	0.9763	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0297
\$4.00 / \$30.00 / \$50.00	0.8653	N/A	0.9900	1.0050	0.9831	0.9759	0.9686	0.9638	0.9773	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0300
\$5.00 / \$10.00 / \$15.00	1.1736	N/A	0.9500	1.0263	0.9924	0.9886	0.9848	0.9799	0.9894	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0298
\$5.00 / \$10.00 / \$20.00	1.1543	N/A	0.9900	1.0050	0.9914	0.9871	0.9828	0.9779	0.9880	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0302
\$5.00 / \$10.00 / \$25.00	1.1352	N/A	0.9900	1.0050	0.9903	0.9856	0.9808	0.9759	0.9865	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0307
\$5.00 / \$10.00 / \$30.00	1.1164	N/A	0.9900	1.0050	0.9893	0.9841	0.9788	0.9739	0.9851	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0312
\$5.00 / \$10.00 / \$35.00	1.0981	N/A	0.9900	1.0050	0.9882	0.9826	0.9769	0.9720	0.9837	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0316
\$5.00 / \$10.00 / 50%	0.9331	N/A	0.9900	1.0050	0.9959	0.9939	0.9919	0.9869	0.9943	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0356
\$5.00 / \$12.00 / \$25.00	1.1256	N/A	0.9900	1.0050	0.9898	0.9848	0.9797	0.9748	0.9858	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0309
\$5.00 / \$15.00 / \$20.00	1.0938	N/A	0.9900	1.0050	0.9901	0.9852	0.9802	0.9753	0.9861	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0317
\$5.00 / \$15.00 / \$25.00	1.0762	N/A	0.9900	1.0050	0.9890	0.9836	0.9782	0.9733	0.9847	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0321
\$5.00 / \$15.00 / \$30.00	1.0590	N/A	0.9900	1.0050	0.9880	0.9822	0.9763	0.9714	0.9833	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0325
\$5.00 / \$15.00 / \$35.00	1.0421	N/A	0.9900	1.0050	0.9870	0.9807	0.9744	0.9695	0.9820	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0330
\$5.00 / \$15.00 / 50%	0.8905</															

Three - Tier Copay Levels Generic Formulary/Brand Formulary/ Non-Formulary OR Generic/Brand Formulary/Brand Non-Formulary	Table 2	Table 3	Table 4	Table 5	Table 6					Table 7	Table 8	Table 8A			Table 9	Table 10
	Pharmacy Plan	Restrictive Formulary	Mandatory Generic	Dispense as Written	Multiple Copayment					30-Day Maint Supply	only for Extended Days Supply	Multiple Copayment			Coinsurance Min/Max	Oral Contraceptives Waive Cost Share
					2X-90 day	2.5X-90 day	3X-90 day	2X-60 day	1x-30 day/2x-60 day/3x-90 day			Mandatory Mail Order After 1 Fill at 2X Copay	Mandatory Mail Order After 1 Fill at 2.5X Copay	Mandatory Mail Order After 1 Fill at 3X Copay		
Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	Factor	
\$5.00 / \$25.00 / \$40.00	0.9238	N/A	0.9900	1.0050	0.9836	0.9763	0.9690	0.9642	0.9778	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0358
\$5.00 / \$25.00 / \$50.00	0.8978	N/A	0.9900	1.0050	0.9853	0.9783	0.9712	0.9663	0.9797	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0365
\$5.00 / \$25.00 / \$60.00	0.8774	N/A	0.9900	1.0050	0.9838	0.9761	0.9684	0.9636	0.9776	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0370
\$5.00 / \$25.00 / \$65.00	0.8673	N/A	0.9900	1.0050	0.9831	0.9751	0.9671	0.9623	0.9767	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0372
\$5.00 / \$25.00 / 50%	0.8097	N/A	0.9900	1.0050	0.9923	0.9885	0.9846	0.9797	0.9892	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0386
\$5.00 / \$30.00 / \$50.00	0.8528	N/A	0.9900	1.0050	0.9842	0.9767	0.9692	0.9644	0.9782	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0376
\$5.00 / \$40.00 / \$60.00	0.7519	N/A	0.9900	1.0050	0.9809	0.9718	0.9627	0.9579	0.9736	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0400
\$6.00 / \$11.00 / \$16.00	1.1519	N/A	0.9500	1.0263	0.9914	0.9872	0.9830	0.9781	0.9880	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0425
\$6.00 / \$12.00 / \$25.00	1.1130	N/A	0.9900	1.0050	0.9893	0.9841	0.9788	0.9739	0.9851	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0450
\$7.00 / \$10.00 / \$25.00	1.1105	N/A	0.9900	1.0050	0.9893	0.9841	0.9789	0.9740	0.9851	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0416
\$7.00 / \$10.00 / 50%	0.9158	N/A	0.9900	1.0050	0.9951	0.9928	0.9904	0.9854	0.9932	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0477
\$7.00 / \$12.00 / \$17.00	1.1311	N/A	0.9500	1.0263	0.9905	0.9859	0.9812	0.9763	0.9868	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0410
\$7.00 / \$12.00 / \$25.00	1.1010	N/A	0.9900	1.0050	0.9888	0.9834	0.9779	0.9730	0.9844	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0419
\$7.00 / \$15.00 / \$20.00	1.0683	N/A	0.9500	1.0263	0.9890	0.9836	0.9782	0.9733	0.9847	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0430
\$7.00 / \$15.00 / \$25.00	1.0510	N/A	0.9900	1.0050	0.9880	0.9821	0.9762	0.9713	0.9833	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0435
\$7.00 / \$15.00 / \$30.00	1.0340	N/A	0.9900	1.0050	0.9869	0.9806	0.9742	0.9693	0.9818	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0440
\$7.00 / \$15.00 / \$35.00	1.0174	N/A	0.9900	1.0050	0.9859	0.9791	0.9723	0.9674	0.9805	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0445
\$7.00 / \$15.00 / 50%	0.8726	N/A	0.9900	1.0050	0.9938	0.9908	0.9878	0.9829	0.9914	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0490
\$7.00 / \$20.00 / \$30.00	0.9787	N/A	0.9900	1.0050	0.9856	0.9786	0.9716	0.9667	0.9800	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0457
\$7.00 / \$20.00 / \$35.00	0.9635	N/A	0.9900	1.0050	0.9846	0.9780	0.9714	0.9665	0.9793	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0462
\$7.00 / \$20.00 / \$40.00	0.9485	N/A	0.9900	1.0050	0.9856	0.9794	0.9731	0.9682	0.9806	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0467
\$7.00 / \$20.00 / 50%	0.8308	N/A	0.9900	1.0050	0.9925	0.9889	0.9852	0.9803	0.9896	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0503
\$7.00 / \$25.00 / \$40.00	0.8985	N/A	0.9900	1.0050	0.9856	0.9788	0.9720	0.9671	0.9802	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0482
\$7.00 / \$25.00 / \$45.00	0.8879	N/A	0.9900	1.0050	0.9849	0.9777	0.9705	0.9656	0.9791	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0486
\$7.00 / \$25.00 / \$50.00	0.8775	N/A	0.9900	1.0050	0.9841	0.9766	0.9691	0.9643	0.9781	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0489
\$7.00 / \$30.00 / \$45.00	0.8415	N/A	0.9900	1.0050	0.9837	0.9760	0.9683	0.9635	0.9775	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0500
\$7.00 / \$30.00 / \$50.00	0.8319	N/A	0.9900	1.0050	0.9830	0.9750	0.9669	0.9621	0.9766	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0503
\$7.50 / \$12.00 / \$15.00	1.1329	N/A	0.9500	1.0263	0.9907	0.9861	0.9815	0.9766	0.9870	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0501
\$7.50 / \$15.00 / \$25.00	1.0452	N/A	0.9900	1.0050	0.9877	0.9817	0.9757	0.9708	0.9829	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0550
\$8.00 / \$13.00 / \$18.00	1.0723	N/A	0.9500	1.0263	0.9894	0.9843	0.9791	0.9742	0.9853	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0536
\$8.00 / \$18.00 / \$35.00	0.9597	N/A	0.9900	1.0050	0.9845	0.9785	0.9725	0.9676	0.9797	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0578
\$8.00 / \$20.00 / \$35.00	0.9519	N/A	0.9900	1.0050	0.9854	0.9793	0.9732	0.9683	0.9805	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0581
\$8.00 / \$25.00 / \$35.00	0.9002	N/A	0.9900	1.0050	0.9859	0.9792	0.9725	0.9676	0.9805	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0600
\$9.00 / \$10.00 / \$25.00	1.0879	N/A	0.9900	1.0050	0.9884	0.9828	0.9772	0.9723	0.9839	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0575
\$9.00 / \$10.00 / 50%	0.9004	N/A	0.9900	1.0050	0.9944	0.9918	0.9891	0.9842	0.9923	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0660
\$9.00 / \$15.00 / \$30.00	1.0113	N/A	0.9900	1.0050	0.9859	0.9795	0.9731	0.9682	0.9808	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0610
\$9.00 / \$15.00 / 50%	0.8566	N/A	0.9900	1.0050	0.9930	0.9897	0.9863	0.9814	0.9903	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0680
\$9.00 / \$20.00 / \$35.00	0.9414	N/A	0.9900	1.0050	0.9867	0.9804	0.9741	0.9692	0.9817	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0642
\$9.00 / \$20.00 / \$40.00	0.9296	N/A	0.9900	1.0050	0.9859	0.9793	0.9726	0.9677	0.9806	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0647
\$9.00 / \$20.00 / 50%	0.8143	N/A	0.9900	1.0050	0.9916	0.9876	0.9835	0.9786	0.9884	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0700
\$9.00 / \$25.00 / \$40.00	0.8803	N/A	0.9900	1.0050	0.9846	0.9774	0.9702	0.9653	0.9788	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0669
\$9.00 / \$25.00 / \$45.00	0.8698	N/A	0.9900	1.0050	0.9838	0.9763	0.9687	0.9639	0.9778	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0674
\$9.00 / \$25.00 / \$50.00	0.8595	N/A	0.9900	1.0050	0.9831	0.9752	0.9672	0.9624	0.9767	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0679
\$9.00 / \$30.00 / \$45.00	0.8228	N/A	0.9900	1.0050	0.9826	0.9744	0.9662	0.9614	0.9760	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0696
\$9.00 / \$30.00 / \$50.00	0.8134	N/A	0.9900	1.0050	0.9818	0.9733	0.9648	0.9600	0.9750	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0700
\$10.00 / \$15.00 / \$20.00	1.0335	N/A	0.9500	1.0263	0.9875	0.9815	0.9755	0.9706	0.9827	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0700
\$10.00 / \$15.00 / \$25.00	1.0166	N/A	0.9900	1.0050	0.9865	0.9800	0.9734	0.9685	0.9813	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0704
\$10.00 / \$15.00 / \$30.00	1.0000	N/A	0.9900	1.0050	0.9859	0.9804	0.9749	0.9700	0.9815	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0707
\$10.00 / \$15.00 / \$35.00	0.9847	N/A	0.9900	1.0050	0.9876	0.9817	0.9758	0.9709	0.9829	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0711
\$10.00 / \$15.00 / 50%	0.8487	N/A	0.9900	1.0050	0.9926	0.9891	0.9856	0.9807	0.9898	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0741
\$10.00 / 15% / 30%	0.8549	N/A	0.9900	1.0050	0.9955	0.9935	0.9915	0.9865	0.9939	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0739
\$10.00 / \$20.00 / \$30.00	0.9444	N/A	0.9900	1.0050	0.9871	0.9810	0.9748	0.9699	0.9822	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0720
\$10.00 / \$20.00 / \$35.00	0.9325	N/A	0.9900	1.0050	0.9863	0.9798	0.9733	0.9684	0.9811	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0722
\$10.00 / \$20.00 / \$40.00	0.9208	N/A	0.9900	1.0050	0.9854	0.9786	0.9718	0.9669	0.9800	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0725
\$10.00 / \$20.00 / \$45.00	0.9095	N/A	0.9900	1.0050	0.9846	0.9775	0.9703	0.9654	0.9789	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0727
\$10.00 / \$20.00 / \$50.00	0.8985	N/A	0.9900	1.0050	0.9839	0.9764	0.9689	0.9641	0.9779	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0730
\$10.00 / \$20.00 / \$55.00	0.8877	N/A	0.9900	1.0050	0.9831	0.9753	0.9674	0.9626	0.9768	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0732
\$10.00 / \$20.00 / 50%	0.8060	N/A	0.9900	1.0050	0.9911	0.9869	0.9827	0.9778	0.9877	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0750

Three - Tier Copay Levels (continued)	Table 2	Table 3	Table 4	Table 5	Table 6					Table 7	Table 8	Table 8A				Table 9	Table 10
					Multiple Copayment							Multiple Copayment					
Generic Form./Brand Form./Non-Form. OR Generic/Brand Form./Brand Non-Form.	Pharmacy Plan Option Factor	Restrictive Formulary Factor	Mandatory Generic Factor	Dispense as Written Factor	2X-90 day Factor	2.5X-90 day Factor	3X-90 day Factor	2X-60 day Factor	1x-30 day/2x-60 day/3x-90 day Factor	30-Day Maint Supply Factor	Mail Order Only for Extended Days Supply Factor	Mandatory Mail Order After 1 Fill at 2X Copay Factor	Mandatory Mail Order After 1 Fill at 2.5X Copay Factor	Mandatory Mail Order After 1 Fill at 3X Copay Factor	Coinsurance Min/Max Factor	Oral Contracepti ves Share	
\$10.00 / \$25.00 / \$35.00	0.8819	N/A	0.9900	1.0050	0.9850	0.9779	0.9708	0.9659	0.9793	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0733	
\$10.00 / \$25.00 / \$40.00	0.8712	N/A	0.9900	1.0050	0.9841	0.9767	0.9693	0.9645	0.9782	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0736	
\$10.00 / \$25.00 / \$45.00	0.8608	N/A	0.9900	1.0050	0.9833	0.9756	0.9678	0.9630	0.9771	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0738	
\$10.00 / \$25.00 / \$50.00	0.8506	N/A	0.9900	1.0050	0.9826	0.9745	0.9663	0.9615	0.9761	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0740	
\$10.00 / \$25.00 / 50%	0.7648	N/A	0.9900	1.0050	0.9896	0.9847	0.9798	0.9749	0.9857	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0759	
\$10.00 / \$30.00 / \$40.00	0.8231	N/A	0.9900	1.0050	0.9828	0.9748	0.9667	0.9619	0.9764	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0746	
\$10.00 / \$30.00 / \$45.00	0.8135	N/A	0.9900	1.0050	0.9820	0.9736	0.9652	0.9604	0.9753	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0748	
\$10.00 / \$30.00 / \$50.00	0.8042	N/A	0.9900	1.0050	0.9813	0.9725	0.9637	0.9589	0.9743	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0750	
\$10.00 / \$30.00 / \$55.00	0.7950	N/A	0.9900	1.0050	0.9805	0.9714	0.9622	0.9574	0.9732	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0752	
\$10.00 / \$30.00 / \$60.00	0.7860	N/A	0.9900	1.0050	0.9797	0.9703	0.9608	0.9560	0.9721	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0754	
\$10.00 / \$30.00 / \$65.00	0.7770	N/A	0.9900	1.0050	0.9790	0.9692	0.9594	0.9546	0.9712	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0756	
\$10.00 / \$30.00 / \$70.00	0.7687	N/A	0.9900	1.0050	0.9782	0.9681	0.9580	0.9532	0.9701	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0758	
\$10.00 / \$30.00 / 50%	0.7249	N/A	0.9900	1.0050	0.9881	0.9825	0.9768	0.9719	0.9836	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0768	
\$10.00 / \$35.00 / \$45.00	0.7678	N/A	0.9900	1.0050	0.9807	0.9717	0.9627	0.9579	0.9735	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0758	
\$10.00 / \$35.00 / \$50.00	0.7592	N/A	0.9900	1.0050	0.9799	0.9706	0.9612	0.9564	0.9724	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0760	
\$10.00 / \$35.00 / \$55.00	0.7509	N/A	0.9900	1.0050	0.9792	0.9695	0.9597	0.9549	0.9714	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0762	
\$10.00 / \$35.00 / \$60.00	0.7426	N/A	0.9900	1.0050	0.9784	0.9683	0.9582	0.9534	0.9703	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0764	
\$10.00 / \$35.00 / \$65.00	0.7344	N/A	0.9900	1.0050	0.9776	0.9672	0.9568	0.9520	0.9693	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0766	
\$10.00 / \$35.00 / \$70.00	0.7269	N/A	0.9900	1.0050	0.9769	0.9662	0.9554	0.9506	0.9683	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0767	
\$10.00 / \$35.00 / \$80.00	0.7120	N/A	0.9900	1.0050	0.9754	0.9642	0.9530	0.9482	0.9664	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0771	
\$10.00 / \$40.00 / \$60.00	0.7007	N/A	0.9900	1.0050	0.9771	0.9664	0.9557	0.9509	0.9685	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0773	
\$10.00 / \$40.00 / \$70.00	0.6864	N/A	0.9900	1.0050	0.9756	0.9643	0.9529	0.9481	0.9665	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0776	
\$10.00 / \$45.00 / \$60.00	0.6601	N/A	0.9900	1.0050	0.9758	0.9645	0.9531	0.9483	0.9667	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0782	
\$10.00 / \$50.00 / \$100.00	0.5809	N/A	0.9900	1.0050	0.9687	0.9551	0.9414	0.9367	0.9578	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0800	
\$10.00 / 20% / 30%	0.8245	N/A	0.9900	1.0050	0.9955	0.9935	0.9914	0.9864	0.9939	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0746	
\$10.00 / 20% / 35%	0.8043	N/A	0.9900	1.0050	0.9954	0.9933	0.9912	0.9862	0.9937	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0750	
\$10.00 / 30% / 40%	0.7263	N/A	0.9900	1.0050	0.9951	0.9929	0.9907	0.9857	0.9933	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0768	
\$10.00 / 30% / 45%	0.7071	N/A	0.9900	1.0050	0.9950	0.9928	0.9906	0.9856	0.9932	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0772	
\$10.00 / 30% / 50%	0.6881	N/A	0.9900	1.0050	0.9950	0.9927	0.9904	0.9854	0.9932	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0776	
\$10.00 / 40% / 50%	0.6329	N/A	0.9900	1.0050	0.9947	0.9923	0.9899	0.9850	0.9928	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0788	
\$10.00 / 50% / 50%	0.5792	N/A	0.9900	1.0050	0.9943	0.9918	0.9893	0.9844	0.9923	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0800	
\$12.00 / \$17.00 / \$22.00	0.9957	N/A	0.9500	1.0263	0.9874	0.9820	0.9766	0.9717	0.9831	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0844	
\$12.00 / \$25.00 / \$30.00	0.8747	N/A	0.9900	1.0050	0.9849	0.9778	0.9706	0.9657	0.9792	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0895	
\$12.00 / \$25.00 / \$35.00	0.8639	N/A	0.9900	1.0050	0.9840	0.9765	0.9690	0.9642	0.9780	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0900	
\$15.00 / \$20.00 / \$25.00	0.9130	N/A	0.9500	1.0263	0.9860	0.9795	0.9729	0.9680	0.9808	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0904	
\$15.00 / \$20.00 / \$30.00	0.9011	N/A	0.9900	1.0050	0.9851	0.9782	0.9712	0.9663	0.9795	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0907	
\$15.00 / \$20.00 / \$35.00	0.8896	N/A	0.9900	1.0050	0.9843	0.9770	0.9697	0.9649	0.9785	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0910	
\$15.00 / \$20.00 / \$40.00	0.8782	N/A	0.9900	1.0050	0.9834	0.9758	0.9681	0.9633	0.9773	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0913	
\$15.00 / \$20.00 / 50%	0.7662	N/A	0.9900	1.0050	0.9890	0.9840	0.9789	0.9740	0.9850	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0942	
\$15.00 / \$25.00 / \$35.00	0.8378	N/A	0.9900	1.0050	0.9827	0.9747	0.9667	0.9619	0.9763	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0924	
\$15.00 / \$25.00 / \$40.00	0.8273	N/A	0.9900	1.0050	0.9819	0.9735	0.9651	0.9603	0.9752	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0926	
\$15.00 / \$25.00 / \$45.00	0.8172	N/A	0.9900	1.0050	0.9810	0.9723	0.9636	0.9588	0.9740	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0929	
\$15.00 / \$25.00 / \$50.00	0.8073	N/A	0.9900	1.0050	0.9802	0.9711	0.9620	0.9572	0.9729	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0932	
\$15.00 / \$25.00 / \$55.00	0.7976	N/A	0.9900	1.0050	0.9794	0.9700	0.9605	0.9557	0.9718	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0934	
\$15.00 / \$25.00 / 50%	0.7236	N/A	0.9900	1.0050	0.9873	0.9814	0.9755	0.9706	0.9826	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0953	
\$15.00 / \$30.00 / \$40.00	0.7780	N/A	0.9900	1.0050	0.9803	0.9712	0.9620	0.9572	0.9730	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0939	
\$15.00 / \$30.00 / \$45.00	0.7687	N/A	0.9900	1.0050	0.9794	0.9700	0.9605	0.9557	0.9718	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0942	
\$15.00 / \$30.00 / \$50.00	0.7596	N/A	0.9900	1.0050	0.9786	0.9688	0.9589	0.9541	0.9707	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0944	
\$15.00 / \$30.00 / \$55.00	0.7507	N/A	0.9900	1.0050	0.9778	0.9676	0.9573	0.9525	0.9696	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0946	
\$15.00 / \$30.00 / \$60.00	0.7419	N/A	0.9900	1.0050	0.9770	0.9664	0.9558	0.9510	0.9685	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0949	
\$15.00 / \$30.00 / \$65.00	0.7332	N/A	0.9900	1.0050	0.9762	0.9653	0.9543	0.9495	0.9674	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0951	
\$15.00 / \$30.00 / \$70.00	0.7252	N/A	0.9900	1.0050	0.9754	0.9641	0.9528	0.9480	0.9664	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0953	
\$15.00 / \$30.00 / 50%	0.6823	N/A	0.9900	1.0050	0.9855	0.9788	0.9720	0.9671	0.9801	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0964	
\$15.00 / \$35.00 / \$50.00	0.7134	N/A	0.9900	1.0050	0.9769	0.9663	0.9557	0.9509	0.9684	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0956	
\$15.00 / \$35.00 / \$55.00	0.7053	N/A	0.9900	1.0050	0.9761	0.9651	0.9541	0.9493	0.9673	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0958	
\$15.00 / \$35.00 / \$60.00	0.6972	N/A	0.9900	1.0050	0.9753	0.9640	0.9526	0.9478	0.9662	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0960	
\$15.00 / \$35.00 / \$70.00	0.6819	N/A	0.9900	1.0050	0.9737	0.9617	0.9496	0.9449	0.9641	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0964	
\$15.00 / \$35.00 / \$75.00	0.6747	N/A	0.9900	1.0050	0.9729	0.9606	0.9482	0.9435	0.9630	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0966	
\$15.00 / \$35.00 / \$80.00	0.6674	N/A	0.9900	1.0050	0.9721	0.9596	0.9470	0.9423	0.9621	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0968	
\$15.00 / \$35.00 / 50%	0.6423	N/A	0.9900	1.0050	0.9836	0.9760	0.9684	0.9636	0.9775	0.9700	0.9900	1.0000	0.9900	0.9600	N/A	1.0974	

Three - Tier Copay Levels (continued)	Table 2	Table 3	Table 4	Table 5	Table 6					Table 7	Table 8	Table 8A			Table 9	Table 10
					Multiple Copayment							Multiple Copayment				
					Pharmacy Plan Option Factor	Restrictive Formulary Factor	Mandatory Generic Factor	Dispense as Written Factor	2X-90 day Factor			2.5X-90 day Factor	3X-90 day Factor	2X-60 day Factor		
Generic Form./Brand Form./Non-Form.																
OR Generic/Brand Form./Brand Non-Form.																
\$15.00 / \$40.00 / \$60.00																
\$15.00 / \$40.00 / \$70.00																
\$15.00 / \$40.00 / \$75.00																
\$15.00 / \$40.00 / 50%																
\$15.00 / \$45.00 / \$60.00																
\$15.00 / \$45.00 / \$65.00																
\$15.00 / \$45.00 / \$70.00																
\$15.00 / \$45.00 / \$80.00																
\$15.00 / \$50.00 / \$90.00																
\$15.00 / 20% / 30%																
\$15.00 / 20% / 35%																
\$15.00 / 30% / 50%																
\$15.00 / 40% / 50%																
\$20.00 / \$25.00 / \$30.00																
\$20.00 / \$25.00 / \$40.00																
\$20.00 / \$25.00 / 50%																
\$20.00 / \$30.00 / \$45.00																
\$20.00 / \$30.00 / \$50.00																
\$20.00 / \$30.00 / \$55.00																
\$20.00 / \$30.00 / \$60.00																
\$20.00 / \$30.00 / \$70.00																
\$20.00 / \$35.00 / \$50.00																
\$20.00 / \$35.00 / \$55.00																
\$20.00 / \$35.00 / \$70.00																
\$20.00 / \$40.00 / \$75.00																
\$20.00 / \$40.00 / \$80.00																
\$20.00 / \$40.00 / \$90.00																
\$20.00 / \$40.00 / 50%																
\$20.00 / 30% / 50%																
\$20.00 / 40% / 50%																
\$20.00 / 50% / 50%																
\$25.00 / \$30.00 / \$50.00																
\$25.00 / \$35.00 / \$50.00																
\$25.00 / \$40.00 / \$70.00																
\$30.00 / \$40.00 / \$50.00																
\$30.00 / \$45.00 / \$60.00																
\$30.00 / \$45.00 / 50%																
\$50.00 / 50% / 50%																
10% / 20% / 30%																
10% / 20% / 35%																
20% / 20% / 40%																
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30% / 40% / 50%																
40% / 50% / 50%																
\$0 / 100% / 100%																
\$5 / 100% / 100%																
\$10 / 100% / 100%																
\$15 / 100% / 100%																
\$0 / \$10 / 100%																
\$0 / \$25 / 100%																
\$5 / \$15 / 100%																
\$10 / \$20 / 100%																
\$10 / \$35 / 100%																
\$15 / \$25 / 100%																
\$20 / \$45 / 100%																
\$25 / \$50 / 100%																
No Copay (Deductible = OOP)																

		Table 11						
Single - Tier Copay Levels		Sexual Performance Drug						
All Generic and All Brand	2-pill Factor	4-pill Factor	6-pill Factor	7-pill Factor	8-pill Factor	10-pill Factor	12-pill Factor	
\$0.00	1.0036	1.0071	1.0106	1.0131	1.0156	1.0206	1.0256	
\$1.00	1.0035	1.0071	1.0107	1.0132	1.0157	1.0207	1.0257	
\$2.00	1.0035	1.0071	1.0107	1.0132	1.0157	1.0207	1.0257	
\$2.50	1.0035	1.0071	1.0107	1.0132	1.0157	1.0207	1.0257	
\$3.00	1.0035	1.0071	1.0107	1.0132	1.0157	1.0207	1.0257	
\$4.00	1.0036	1.0072	1.0108	1.0133	1.0158	1.0208	1.0258	
\$5.00	1.0036	1.0072	1.0108	1.0133	1.0158	1.0208	1.0258	
\$6.00	1.0037	1.0073	1.0109	1.0134	1.0159	1.0209	1.0259	
\$7.00	1.0037	1.0073	1.0109	1.0134	1.0159	1.0209	1.0259	
\$7.50	1.0037	1.0073	1.0109	1.0134	1.0159	1.0209	1.0259	
\$8.00	1.0037	1.0073	1.0109	1.0134	1.0159	1.0209	1.0259	
\$10.00	1.0036	1.0073	1.0110	1.0135	1.0160	1.0210	1.0260	
\$12.00	1.0037	1.0074	1.0111	1.0136	1.0161	1.0211	1.0261	
\$15.00	1.0036	1.0073	1.0110	1.0135	1.0160	1.0210	1.0260	
\$20.00	1.0036	1.0072	1.0108	1.0133	1.0158	1.0208	1.0258	
\$25.00	1.0035	1.0071	1.0107	1.0132	1.0157	1.0207	1.0257	
\$30.00	1.0035	1.0070	1.0105	1.0130	1.0155	1.0205	1.0255	
\$35.00	1.0035	1.0069	1.0103	1.0128	1.0153	1.0203	1.0253	
\$40.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251	
\$45.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
\$50.00	1.0033	1.0065	1.0097	1.0122	1.0147	1.0197	1.0247	
\$55.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244	
\$60.00	1.0031	1.0061	1.0091	1.0116	1.0141	1.0191	1.0241	
\$65.00	1.0031	1.0061	1.0091	1.0116	1.0141	1.0191	1.0241	
\$70.00	1.0031	1.0061	1.0091	1.0116	1.0141	1.0191	1.0241	
\$75.00	1.0031	1.0061	1.0091	1.0116	1.0141	1.0191	1.0241	
10% Coinsurance	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
15% Coinsurance	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
20% Coinsurance	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
25% Coinsurance	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
30% Coinsurance	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
40% Coinsurance	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
50% Coinsurance	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
60% Coinsurance	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
Two - Tier Copay Levels		Table 11						
Generic & Brand-Formulary / Brand Non-Formulary		Sexual Performance Drug						
	2-pill Factor	4-pill Factor	6-pill Factor	7-pill Factor	8-pill Factor	10-pill Factor	12-pill Factor	
\$1.00 / \$2.00	1.0036	1.0071	1.0106	1.0131	1.0156	1.0206	1.0256	
\$2.00 / \$4.00	1.0036	1.0071	1.0106	1.0131	1.0156	1.0206	1.0256	
\$2.50 / \$7.50	1.0035	1.0070	1.0105	1.0130	1.0155	1.0205	1.0255	
\$3.00 / \$6.00	1.0034	1.0069	1.0104	1.0129	1.0154	1.0204	1.0254	
\$4.00 / \$9.00	1.0035	1.0069	1.0103	1.0128	1.0153	1.0203	1.0253	
\$5.00 / \$10.00	1.0034	1.0069	1.0104	1.0129	1.0154	1.0204	1.0254	
\$5.00 / \$15.00	1.0034	1.0068	1.0102	1.0127	1.0152	1.0202	1.0252	
\$5.00 / \$20.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
\$5.00 / \$25.00	1.0033	1.0065	1.0097	1.0122	1.0147	1.0197	1.0247	
\$6.00 / \$11.00	1.0034	1.0069	1.0104	1.0129	1.0154	1.0204	1.0254	
\$6.00 / \$12.00	1.0034	1.0069	1.0104	1.0129	1.0154	1.0204	1.0254	
\$7.00 / \$12.00	1.0034	1.0069	1.0104	1.0129	1.0154	1.0204	1.0254	
\$7.50 / \$12.00	1.0035	1.0070	1.0105	1.0130	1.0155	1.0205	1.0255	
\$8.00 / \$13.00	1.0034	1.0068	1.0102	1.0127	1.0152	1.0202	1.0252	
\$10.00 / \$15.00	1.0035	1.0069	1.0103	1.0128	1.0153	1.0203	1.0253	
\$10.00 / \$20.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251	
\$10.00 / \$25.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
\$12.00 / \$17.00	1.0034	1.0069	1.0104	1.0129	1.0154	1.0204	1.0254	
\$15.00 / \$20.00	1.0035	1.0069	1.0103	1.0128	1.0153	1.0203	1.0253	
\$15.00 / \$25.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251	
\$20.00 / \$25.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251	
\$20.00 / \$30.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249	
\$30.00 / \$40.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246	
\$30.00 / \$50.00	1.0031	1.0061	1.0091	1.0116	1.0141	1.0191	1.0241	

Two - Tier Copay Levels	Table 11						
	Sexual Performance Drug						
	2-pill Factor	4-pill Factor	6-pill Factor	7-pill Factor	8-pill Factor	10-pill Factor	12-pill Factor
All Generic / All Brand							
\$0.00 / \$10.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$0.00 / \$15.00	1.0031	1.0062	1.0093	1.0118	1.0143	1.0193	1.0243
\$0.00 / \$20.00	1.0029	1.0059	1.0089	1.0114	1.0139	1.0189	1.0239
\$0.00 / \$25.00	1.0028	1.0056	1.0084	1.0109	1.0134	1.0184	1.0234
\$1.00 / \$2.00	1.0034	1.0069	1.0104	1.0129	1.0154	1.0204	1.0254
\$1.00 / \$3.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$1.00 / \$5.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$1.00 / \$10.00	1.0033	1.0065	1.0097	1.0122	1.0147	1.0197	1.0247
\$1.00 / \$15.00	1.0031	1.0062	1.0093	1.0118	1.0143	1.0193	1.0243
\$1.00 / \$20.00	1.0029	1.0059	1.0089	1.0114	1.0139	1.0189	1.0239
\$1.00 / \$25.00	1.0029	1.0057	1.0085	1.0110	1.0135	1.0185	1.0235
\$2.00 / \$4.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$2.00 / \$7.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$2.00 / \$10.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$2.50 / \$7.50	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$3.00 / \$6.00	1.0034	1.0068	1.0102	1.0127	1.0152	1.0202	1.0252
\$4.00 / \$9.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249
\$4.00 / \$10.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249
\$4.00 / \$15.00	1.0031	1.0063	1.0095	1.0120	1.0145	1.0195	1.0245
\$4.00 / \$20.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$4.00 / \$25.00	1.0029	1.0058	1.0087	1.0112	1.0137	1.0187	1.0237
\$5.00 / \$7.00	1.0035	1.0069	1.0103	1.0128	1.0153	1.0203	1.0253
\$5.00 / \$7.50	1.0035	1.0069	1.0103	1.0128	1.0153	1.0203	1.0253
\$5.00 / \$8.00	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250
\$5.00 / \$10.00	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250
\$5.00 / \$15.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$5.00 / \$20.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$6.00 / \$11.00	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250
\$6.00 / \$12.00	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250
\$7.00 / \$10.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$7.00 / \$12.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$7.00 / \$14.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$7.00 / \$15.00	1.0033	1.0065	1.0097	1.0122	1.0147	1.0197	1.0247
\$7.00 / \$20.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244
\$7.00 / \$25.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249
\$7.00 / \$30.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$7.50 / \$12.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$8.00 / \$13.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$8.00 / \$16.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$8.00 / \$18.00	1.0031	1.0063	1.0095	1.0120	1.0145	1.0195	1.0245
\$9.00 / \$10.00	1.0034	1.0068	1.0102	1.0127	1.0152	1.0202	1.0252
\$9.00 / \$15.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249
\$9.00 / \$18.00	1.0031	1.0063	1.0095	1.0120	1.0145	1.0195	1.0245
\$9.00 / \$20.00	1.0031	1.0063	1.0095	1.0120	1.0145	1.0195	1.0245
\$9.00 / \$25.00	1.0031	1.0061	1.0091	1.0116	1.0141	1.0191	1.0241
\$10.00 / \$15.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249
\$10.00 / \$20.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$10.00 / \$25.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$10.00 / \$30.00	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$10.00 / \$35.00	1.0028	1.0056	1.0084	1.0109	1.0134	1.0184	1.0234
\$10.00 / \$50.00	1.0023	1.0046	1.0069	1.0094	1.0119	1.0169	1.0219
\$12.00 / \$17.00	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250
\$15.00 / \$20.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249
\$15.00 / \$25.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$15.00 / \$30.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$15.00 / 50%	1.0031	1.0063	1.0095	1.0120	1.0145	1.0195	1.0245
\$20.00 / \$25.00	1.0033	1.0065	1.0097	1.0122	1.0147	1.0197	1.0247
\$20.00 / \$30.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244
\$20.00 / \$40.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$20.00 / \$50.00	1.0026	1.0051	1.0076	1.0101	1.0126	1.0176	1.0226
\$30.00 / \$40.00	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$30.00 / \$50.00	1.0027	1.0054	1.0081	1.0106	1.0131	1.0181	1.0231

Three - Tier Copay Levels Generic Formulary/Brand Formulary/ Non-Formulary OR Generic/Brand Formulary/Brand Non-Formulary	Table 11 Sexual Performance Drug						
	2-pill	4-pill	6-pill	7-pill	8-pill	10-pill	12-pill
	Factor	Factor	Factor	Factor	Factor	Factor	Factor
\$0.00 / \$10.00 / \$25.00	1.0033	1.0065	1.0097	1.0122	1.0147	1.0197	1.0247
\$0.00 / \$10.00 / 50%	1.0021	1.0043	1.0065	1.0090	1.0115	1.0165	1.0215
\$0.00 / \$15.00 / \$30.00	1.0031	1.0062	1.0093	1.0118	1.0143	1.0193	1.0243
\$0.00 / \$15.00 / 50%	1.0021	1.0042	1.0063	1.0088	1.0113	1.0163	1.0213
\$0.00 / \$20.00 / \$35.00	1.0029	1.0059	1.0089	1.0114	1.0139	1.0189	1.0239
\$0.00 / \$20.00 / \$40.00	1.0029	1.0058	1.0087	1.0112	1.0137	1.0187	1.0237
\$0.00 / \$20.00 / 50%	1.0020	1.0041	1.0062	1.0087	1.0112	1.0162	1.0212
\$0.00 / \$25.00 / \$40.00	1.0029	1.0057	1.0085	1.0110	1.0135	1.0185	1.0235
\$0.00 / \$25.00 / \$45.00	1.0027	1.0055	1.0083	1.0108	1.0133	1.0183	1.0233
\$0.00 / \$25.00 / \$50.00	1.0026	1.0053	1.0080	1.0105	1.0130	1.0180	1.0230
\$0.00 / \$30.00 / \$45.00	1.0026	1.0053	1.0080	1.0105	1.0130	1.0180	1.0230
\$0.00 / \$30.00 / \$50.00	1.0026	1.0052	1.0078	1.0103	1.0128	1.0178	1.0228
\$0.00 / \$30.00 / \$60.00	1.0024	1.0049	1.0074	1.0099	1.0124	1.0174	1.0224
\$1.00 / \$5.00 / \$10.00	1.0036	1.0071	1.0106	1.0131	1.0156	1.0206	1.0256
\$1.00 / \$5.00 / 50%	1.0022	1.0044	1.0066	1.0091	1.0116	1.0166	1.0216
\$1.00 / \$10.00 / \$25.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$1.00 / \$10.00 / 50%	1.0021	1.0043	1.0065	1.0090	1.0115	1.0165	1.0215
\$1.00 / \$15.00 / \$30.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244
\$1.00 / \$15.00 / 50%	1.0022	1.0043	1.0064	1.0089	1.0114	1.0164	1.0214
\$1.00 / \$20.00 / \$35.00	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$1.00 / \$20.00 / \$40.00	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$1.00 / \$20.00 / 50%	1.0020	1.0041	1.0062	1.0087	1.0112	1.0162	1.0212
\$1.00 / \$25.00 / \$40.00	1.0029	1.0057	1.0085	1.0110	1.0135	1.0185	1.0235
\$1.00 / \$25.00 / \$45.00	1.0027	1.0055	1.0083	1.0108	1.0133	1.0183	1.0233
\$1.00 / \$25.00 / \$50.00	1.0027	1.0054	1.0081	1.0106	1.0131	1.0181	1.0231
\$1.00 / \$30.00 / \$45.00	1.0027	1.0054	1.0081	1.0106	1.0131	1.0181	1.0231
\$1.00 / \$30.00 / \$50.00	1.0027	1.0053	1.0079	1.0104	1.0129	1.0179	1.0229
\$2.00 / \$5.00 / \$10.00	1.0035	1.0071	1.0107	1.0132	1.0157	1.0207	1.0257
\$2.00 / \$15.00 / \$25.00	1.0033	1.0065	1.0097	1.0122	1.0147	1.0197	1.0247
\$2.50 / \$7.50 / \$12.00	1.0035	1.0071	1.0107	1.0132	1.0157	1.0207	1.0257
\$3.00 / \$6.00 / \$10.00	1.0035	1.0071	1.0107	1.0132	1.0157	1.0207	1.0257
\$4.00 / \$9.00 / \$14.00	1.0034	1.0069	1.0104	1.0129	1.0154	1.0204	1.0254
\$4.00 / \$10.00 / \$25.00	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250
\$4.00 / \$10.00 / 50%	1.0023	1.0045	1.0067	1.0092	1.0117	1.0167	1.0217
\$4.00 / \$15.00 / \$30.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$4.00 / \$15.00 / 50%	1.0021	1.0043	1.0065	1.0090	1.0115	1.0165	1.0215
\$4.00 / \$20.00 / \$35.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$4.00 / \$20.00 / \$40.00	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$4.00 / \$20.00 / 50%	1.0022	1.0043	1.0064	1.0089	1.0114	1.0164	1.0214
\$4.00 / \$25.00 / \$40.00	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$4.00 / \$25.00 / \$45.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$4.00 / \$25.00 / \$50.00	1.0027	1.0055	1.0083	1.0108	1.0133	1.0183	1.0233
\$4.00 / \$30.00 / \$45.00	1.0027	1.0055	1.0083	1.0108	1.0133	1.0183	1.0233
\$4.00 / \$30.00 / \$50.00	1.0027	1.0054	1.0081	1.0106	1.0131	1.0181	1.0231
\$5.00 / \$10.00 / \$15.00	1.0035	1.0070	1.0105	1.0130	1.0155	1.0205	1.0255
\$5.00 / \$10.00 / \$20.00	1.0035	1.0069	1.0103	1.0128	1.0153	1.0203	1.0253
\$5.00 / \$10.00 / \$25.00	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250
\$5.00 / \$10.00 / \$30.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$5.00 / \$10.00 / \$35.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$5.00 / \$10.00 / 50%	1.0023	1.0045	1.0067	1.0092	1.0117	1.0167	1.0217
\$5.00 / \$12.00 / \$25.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$5.00 / \$15.00 / \$20.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$5.00 / \$15.00 / \$25.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249
\$5.00 / \$15.00 / \$30.00	1.0033	1.0065	1.0097	1.0122	1.0147	1.0197	1.0247
\$5.00 / \$15.00 / \$35.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244
\$5.00 / \$15.00 / 50%	1.0022	1.0044	1.0066	1.0091	1.0116	1.0166	1.0216
\$5.00 / \$20.00 / \$35.00	1.0031	1.0062	1.0093	1.0118	1.0143	1.0193	1.0243
\$5.00 / \$20.00 / \$40.00	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$5.00 / \$20.00 / \$50.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$5.00 / \$20.00 / \$60.00	1.0028	1.0055	1.0082	1.0107	1.0132	1.0182	1.0232
\$5.00 / 20% / 30%	1.0029	1.0059	1.0089	1.0114	1.0139	1.0189	1.0239

Three - Tier Copay Levels Generic Formulary/Brand Formulary/ Non-Formulary OR Generic/Brand Formulary/Brand Non-Formulary	Table 11 Sexual Performance Drug						
	2-pill Factor	4-pill Factor	6-pill Factor	7-pill Factor	8-pill Factor	10-pill Factor	12-pill Factor
	\$5.00 / \$25.00 / \$40.00	1.0029	1.0059	1.0089	1.0114	1.0139	1.0189
\$5.00 / \$25.00 / \$50.00	1.0028	1.0056	1.0084	1.0109	1.0134	1.0184	1.0234
\$5.00 / \$25.00 / \$60.00	1.0026	1.0053	1.0080	1.0105	1.0130	1.0180	1.0230
\$5.00 / \$25.00 / \$65.00	1.0026	1.0052	1.0078	1.0103	1.0128	1.0178	1.0228
\$5.00 / \$25.00 / 50%	1.0021	1.0042	1.0063	1.0088	1.0113	1.0163	1.0213
\$5.00 / \$30.00 / \$50.00	1.0028	1.0055	1.0082	1.0107	1.0132	1.0182	1.0232
\$5.00 / \$40.00 / \$60.00	1.0025	1.0049	1.0073	1.0098	1.0123	1.0173	1.0223
\$6.00 / \$11.00 / \$16.00	1.0035	1.0070	1.0105	1.0130	1.0155	1.0205	1.0255
\$6.00 / \$12.00 / \$25.00	1.0034	1.0068	1.0102	1.0127	1.0152	1.0202	1.0252
\$7.00 / \$10.00 / \$25.00	1.0034	1.0068	1.0102	1.0127	1.0152	1.0202	1.0252
\$7.00 / \$10.00 / 50%	1.0022	1.0045	1.0068	1.0093	1.0118	1.0168	1.0218
\$7.00 / \$12.00 / \$17.00	1.0036	1.0071	1.0106	1.0131	1.0156	1.0206	1.0256
\$7.00 / \$12.00 / \$25.00	1.0034	1.0068	1.0102	1.0127	1.0152	1.0202	1.0252
\$7.00 / \$15.00 / \$20.00	1.0035	1.0069	1.0103	1.0128	1.0153	1.0203	1.0253
\$7.00 / \$15.00 / \$25.00	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250
\$7.00 / \$15.00 / \$30.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$7.00 / \$15.00 / \$35.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$7.00 / \$15.00 / 50%	1.0023	1.0045	1.0067	1.0092	1.0117	1.0167	1.0217
\$7.00 / \$20.00 / \$30.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$7.00 / \$20.00 / \$35.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244
\$7.00 / \$20.00 / \$40.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$7.00 / \$20.00 / 50%	1.0022	1.0044	1.0066	1.0091	1.0116	1.0166	1.0216
\$7.00 / \$25.00 / \$40.00	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$7.00 / \$25.00 / \$45.00	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$7.00 / \$25.00 / \$50.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$7.00 / \$30.00 / \$45.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$7.00 / \$30.00 / \$50.00	1.0028	1.0056	1.0084	1.0109	1.0134	1.0184	1.0234
\$7.50 / \$12.00 / \$15.00	1.0035	1.0071	1.0107	1.0132	1.0157	1.0207	1.0257
\$7.50 / \$15.00 / \$25.00	1.0033	1.0067	1.0101	1.0126	1.0151	1.0201	1.0251
\$8.00 / \$13.00 / \$18.00	1.0034	1.0069	1.0104	1.0129	1.0154	1.0204	1.0254
\$8.00 / \$18.00 / \$35.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244
\$8.00 / \$20.00 / \$35.00	1.0031	1.0063	1.0095	1.0120	1.0145	1.0195	1.0245
\$8.00 / \$25.00 / \$35.00	1.0031	1.0062	1.0093	1.0118	1.0143	1.0193	1.0243
\$9.00 / \$10.00 / \$25.00	1.0035	1.0069	1.0103	1.0128	1.0153	1.0203	1.0253
\$9.00 / \$10.00 / 50%	1.0023	1.0046	1.0069	1.0094	1.0119	1.0169	1.0219
\$9.00 / \$15.00 / \$30.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249
\$9.00 / \$15.00 / 50%	1.0022	1.0045	1.0068	1.0093	1.0118	1.0168	1.0218
\$9.00 / \$20.00 / \$35.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$9.00 / \$20.00 / \$40.00	1.0031	1.0062	1.0093	1.0118	1.0143	1.0193	1.0243
\$9.00 / \$20.00 / 50%	1.0023	1.0045	1.0067	1.0092	1.0117	1.0167	1.0217
\$9.00 / \$25.00 / \$40.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$9.00 / \$25.00 / \$45.00	1.0029	1.0059	1.0089	1.0114	1.0139	1.0189	1.0239
\$9.00 / \$25.00 / \$50.00	1.0029	1.0058	1.0087	1.0112	1.0137	1.0187	1.0237
\$9.00 / \$30.00 / \$45.00	1.0029	1.0058	1.0087	1.0112	1.0137	1.0187	1.0237
\$9.00 / \$30.00 / \$50.00	1.0029	1.0057	1.0085	1.0110	1.0135	1.0185	1.0235
\$10.00 / \$15.00 / \$20.00	1.0035	1.0070	1.0105	1.0130	1.0155	1.0205	1.0255
\$10.00 / \$15.00 / \$25.00	1.0034	1.0068	1.0102	1.0127	1.0152	1.0202	1.0252
\$10.00 / \$15.00 / \$30.00	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250
\$10.00 / \$15.00 / \$35.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$10.00 / \$15.00 / 50%	1.0023	1.0046	1.0069	1.0094	1.0119	1.0169	1.0219
\$10.00 / 15% / 30%	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$10.00 / \$20.00 / \$30.00	1.0033	1.0066	1.0099	1.0124	1.0149	1.0199	1.0249
\$10.00 / \$20.00 / \$35.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$10.00 / \$20.00 / \$40.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244
\$10.00 / \$20.00 / \$45.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$10.00 / \$20.00 / \$50.00	1.0029	1.0059	1.0089	1.0114	1.0139	1.0189	1.0239
\$10.00 / \$20.00 / \$55.00	1.0029	1.0058	1.0087	1.0112	1.0137	1.0187	1.0237
\$10.00 / \$20.00 / 50%	1.0023	1.0045	1.0067	1.0092	1.0117	1.0167	1.0217

Three - Tier Copay Levels (continued)	Table 11						
	Sexual Performance Drug						
	2-pill Factor	4-pill Factor	6-pill Factor	7-pill Factor	8-pill Factor	10-pill Factor	12-pill Factor
Generic Form./Brand Form./Non-Form.							
OR Generic/Brand Form./Brand Non-Form.							
\$10.00 / \$25.00 / \$35.00	1.0031	1.0063	1.0095	1.0120	1.0145	1.0195	1.0245
\$10.00 / \$25.00 / \$40.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$10.00 / \$25.00 / \$45.00	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$10.00 / \$25.00 / \$50.00	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$10.00 / \$25.00 / 50%	1.0022	1.0044	1.0066	1.0091	1.0116	1.0166	1.0216
\$10.00 / \$30.00 / \$40.00	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$10.00 / \$30.00 / \$45.00	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$10.00 / \$30.00 / \$50.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$10.00 / \$30.00 / \$55.00	1.0028	1.0056	1.0084	1.0109	1.0134	1.0184	1.0234
\$10.00 / \$30.00 / \$60.00	1.0028	1.0055	1.0082	1.0107	1.0132	1.0182	1.0232
\$10.00 / \$30.00 / \$65.00	1.0027	1.0053	1.0079	1.0104	1.0129	1.0179	1.0229
\$10.00 / \$30.00 / \$70.00	1.0025	1.0051	1.0077	1.0102	1.0127	1.0177	1.0227
\$10.00 / \$30.00 / 50%	1.0021	1.0043	1.0065	1.0090	1.0115	1.0165	1.0215
\$10.00 / \$35.00 / \$45.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$10.00 / \$35.00 / \$50.00	1.0028	1.0056	1.0084	1.0109	1.0134	1.0184	1.0234
\$10.00 / \$35.00 / \$55.00	1.0028	1.0055	1.0082	1.0107	1.0132	1.0182	1.0232
\$10.00 / \$35.00 / \$60.00	1.0026	1.0053	1.0080	1.0105	1.0130	1.0180	1.0230
\$10.00 / \$35.00 / \$65.00	1.0025	1.0051	1.0077	1.0102	1.0127	1.0177	1.0227
\$10.00 / \$35.00 / \$70.00	1.0025	1.0050	1.0075	1.0100	1.0125	1.0175	1.0225
\$10.00 / \$35.00 / \$80.00	1.0023	1.0047	1.0071	1.0096	1.0121	1.0171	1.0221
\$10.00 / \$40.00 / \$60.00	1.0025	1.0051	1.0077	1.0102	1.0127	1.0177	1.0227
\$10.00 / \$40.00 / \$70.00	1.0025	1.0049	1.0073	1.0098	1.0123	1.0173	1.0223
\$10.00 / \$45.00 / \$60.00	1.0024	1.0049	1.0074	1.0099	1.0124	1.0174	1.0224
\$10.00 / \$50.00 / \$100.00	1.0019	1.0038	1.0057	1.0082	1.0107	1.0157	1.0207
\$10.00 / 20% / 30%	1.0031	1.0062	1.0093	1.0118	1.0143	1.0193	1.0243
\$10.00 / 20% / 35%	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$10.00 / 30% / 40%	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$10.00 / 30% / 45%	1.0027	1.0055	1.0083	1.0108	1.0133	1.0183	1.0233
\$10.00 / 30% / 50%	1.0025	1.0051	1.0077	1.0102	1.0127	1.0177	1.0227
\$10.00 / 40% / 50%	1.0027	1.0055	1.0083	1.0108	1.0133	1.0183	1.0233
\$10.00 / 50% / 50%	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$12.00 / \$17.00 / \$22.00	1.0036	1.0071	1.0106	1.0131	1.0156	1.0206	1.0256
\$12.00 / \$25.00 / \$30.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$12.00 / \$25.00 / \$35.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$15.00 / \$20.00 / \$25.00	1.0034	1.0069	1.0104	1.0129	1.0154	1.0204	1.0254
\$15.00 / \$20.00 / \$30.00	1.0034	1.0068	1.0102	1.0127	1.0152	1.0202	1.0252
\$15.00 / \$20.00 / \$35.00	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250
\$15.00 / \$20.00 / \$40.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$15.00 / \$20.00 / 50%	1.0024	1.0047	1.0070	1.0095	1.0120	1.0170	1.0220
\$15.00 / \$25.00 / \$35.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$15.00 / \$25.00 / \$40.00	1.0032	1.0064	1.0096	1.0121	1.0146	1.0196	1.0246
\$15.00 / \$25.00 / \$45.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244
\$15.00 / \$25.00 / \$50.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$15.00 / \$25.00 / \$55.00	1.0029	1.0059	1.0089	1.0114	1.0139	1.0189	1.0239
\$15.00 / \$25.00 / 50%	1.0023	1.0046	1.0069	1.0094	1.0119	1.0169	1.0219
\$15.00 / \$30.00 / \$40.00	1.0031	1.0063	1.0095	1.0120	1.0145	1.0195	1.0245
\$15.00 / \$30.00 / \$45.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$15.00 / \$30.00 / \$50.00	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$15.00 / \$30.00 / \$55.00	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$15.00 / \$30.00 / \$60.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$15.00 / \$30.00 / \$65.00	1.0027	1.0055	1.0083	1.0108	1.0133	1.0183	1.0233
\$15.00 / \$30.00 / \$70.00	1.0027	1.0054	1.0081	1.0106	1.0131	1.0181	1.0231
\$15.00 / \$30.00 / 50%	1.0022	1.0045	1.0068	1.0093	1.0118	1.0168	1.0218
\$15.00 / \$35.00 / \$50.00	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$15.00 / \$35.00 / \$55.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$15.00 / \$35.00 / \$60.00	1.0028	1.0056	1.0084	1.0109	1.0134	1.0184	1.0234
\$15.00 / \$35.00 / \$70.00	1.0027	1.0053	1.0079	1.0104	1.0129	1.0179	1.0229
\$15.00 / \$35.00 / \$75.00	1.0025	1.0051	1.0077	1.0102	1.0127	1.0177	1.0227
\$15.00 / \$35.00 / \$80.00	1.0025	1.0050	1.0075	1.0100	1.0125	1.0175	1.0225
\$15.00 / \$35.00 / 50%	1.0022	1.0044	1.0066	1.0091	1.0116	1.0166	1.0216

Three - Tier Copay Levels (continued)	Table 11						
	Sexual Performance Drug						
	2-pill Factor	4-pill Factor	6-pill Factor	7-pill Factor	8-pill Factor	10-pill Factor	12-pill Factor
Generic Form./Brand Form./Non-Form.							
OR Generic/Brand Form./Brand Non-Form.							
\$15.00 / \$40.00 / \$60.00	1.0028	1.0055	1.0082	1.0107	1.0132	1.0182	1.0232
\$15.00 / \$40.00 / \$70.00	1.0025	1.0051	1.0077	1.0102	1.0127	1.0177	1.0227
\$15.00 / \$40.00 / \$75.00	1.0025	1.0050	1.0075	1.0100	1.0125	1.0175	1.0225
\$15.00 / \$40.00 / 50%	1.0021	1.0043	1.0065	1.0090	1.0115	1.0165	1.0215
\$15.00 / \$45.00 / \$60.00	1.0027	1.0053	1.0079	1.0104	1.0129	1.0179	1.0229
\$15.00 / \$45.00 / \$65.00	1.0025	1.0051	1.0077	1.0102	1.0127	1.0177	1.0227
\$15.00 / \$45.00 / \$70.00	1.0025	1.0050	1.0075	1.0100	1.0125	1.0175	1.0225
\$15.00 / \$45.00 / \$80.00	1.0023	1.0047	1.0071	1.0096	1.0121	1.0171	1.0221
\$15.00 / \$50.00 / \$90.00	1.0022	1.0043	1.0064	1.0089	1.0114	1.0164	1.0214
\$15.00 / 20% / 30%	1.0033	1.0065	1.0097	1.0122	1.0147	1.0197	1.0247
\$15.00 / 20% / 35%	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$15.00 / 30% / 50%	1.0027	1.0054	1.0081	1.0106	1.0131	1.0181	1.0231
\$15.00 / 40% / 50%	1.0029	1.0058	1.0087	1.0112	1.0137	1.0187	1.0237
\$20.00 / \$25.00 / \$30.00	1.0035	1.0069	1.0103	1.0128	1.0153	1.0203	1.0253
\$20.00 / \$25.00 / \$40.00	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$20.00 / \$25.00 / 50%	1.0023	1.0047	1.0071	1.0096	1.0121	1.0171	1.0221
\$20.00 / \$30.00 / \$45.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244
\$20.00 / \$30.00 / \$50.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$20.00 / \$30.00 / \$55.00	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$20.00 / \$30.00 / \$60.00	1.0029	1.0058	1.0087	1.0112	1.0137	1.0187	1.0237
\$20.00 / \$30.00 / \$70.00	1.0027	1.0055	1.0083	1.0108	1.0133	1.0183	1.0233
\$20.00 / \$35.00 / \$50.00	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$20.00 / \$35.00 / \$55.00	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
\$20.00 / \$35.00 / \$70.00	1.0027	1.0054	1.0081	1.0106	1.0131	1.0181	1.0231
\$20.00 / \$40.00 / \$60.00	1.0028	1.0056	1.0084	1.0109	1.0134	1.0184	1.0234
\$20.00 / \$40.00 / \$70.00	1.0027	1.0053	1.0079	1.0104	1.0129	1.0179	1.0229
\$20.00 / \$40.00 / \$75.00	1.0025	1.0051	1.0077	1.0102	1.0127	1.0177	1.0227
\$20.00 / \$40.00 / \$80.00	1.0025	1.0050	1.0075	1.0100	1.0125	1.0175	1.0225
\$20.00 / \$50.00 / \$70.00	1.0024	1.0049	1.0074	1.0099	1.0124	1.0174	1.0224
\$20.00 / \$40.00 / 50%	1.0022	1.0044	1.0066	1.0091	1.0116	1.0166	1.0216
\$20.00 / 30% / 50%	1.0027	1.0055	1.0083	1.0108	1.0133	1.0183	1.0233
\$20.00 / 40% / 50%	1.0030	1.0060	1.0090	1.0115	1.0140	1.0190	1.0240
\$20.00 / 50% / 50%	1.0032	1.0065	1.0098	1.0123	1.0148	1.0198	1.0248
\$25.00 / \$30.00 / \$50.00	1.0032	1.0063	1.0094	1.0119	1.0144	1.0194	1.0244
\$25.00 / \$35.00 / \$50.00	1.0031	1.0062	1.0093	1.0118	1.0143	1.0193	1.0243
\$25.00 / \$40.00 / \$70.00	1.0028	1.0055	1.0082	1.0107	1.0132	1.0182	1.0232
\$30.00 / \$40.00 / \$50.00	1.0030	1.0061	1.0092	1.0117	1.0142	1.0192	1.0242
\$30.00 / \$45.00 / \$60.00	1.0028	1.0057	1.0086	1.0111	1.0136	1.0186	1.0236
\$30.00 / \$45.00 / 50%	1.0022	1.0045	1.0068	1.0093	1.0118	1.0168	1.0218
\$50.00 / 50% / 50%	1.0036	1.0072	1.0108	1.0133	1.0158	1.0208	1.0258
10% / 20% / 30%	1.0030	1.0059	1.0088	1.0113	1.0138	1.0188	1.0238
10% / 20% / 35%	1.0027	1.0055	1.0083	1.0108	1.0133	1.0183	1.0233
20% / 20% / 40%	1.0027	1.0054	1.0081	1.0106	1.0131	1.0181	1.0231
20% / 20% / 50%	1.0024	1.0047	1.0070	1.0095	1.0120	1.0170	1.0220
20% / 30% / 50%	1.0025	1.0050	1.0075	1.0100	1.0125	1.0175	1.0225
30% / 30% / 50%	1.0026	1.0052	1.0078	1.0103	1.0128	1.0178	1.0228
30% / 40% / 50%	1.0028	1.0056	1.0084	1.0109	1.0134	1.0184	1.0234
40% / 50% / 50%	1.0031	1.0063	1.0095	1.0120	1.0145	1.0195	1.0245
\$0 / 100% / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$5 / 100% / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$10 / 100% / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$15 / 100% / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$0 / \$10 / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$0 / \$25 / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$5 / \$15 / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$10 / \$20 / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$10 / \$35 / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$15 / \$25 / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$20 / \$45 / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
\$25 / \$50 / 100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
No Copay (Deductible = OOP)	1.0034	1.0067	1.0100	1.0125	1.0150	1.0200	1.0250

Table 12 Deductible Factor

If the plan includes a pharmacy deductible, enter Table 12a. or 12b. and select the appropriate Deductible Factor.

If the pharmacy deductible is integrated with medical, then calculate the Deductible Factor according to the Integrated Pharmacy Deductible Factor Calculation table below.

Integrated Pharmacy Deductible Factor Calculation Table

Family Deductible Limit	Adjustment Factor	Table Reference
1x Family Limit	1.0000	Table 12b1.
2x Family Limit	1.0220	Table 12a1.
2.5x Family Limit	1.0125	Table 12a1.
3x Family Limit	1.0030	Table 12a1.
No Family Limit	1.0000	Table 12a1.
2 Individuals	1.0180	Table 12a1.
3 Individuals	1.0020	Table 12a1.

Integrated deductibles are not available for medical deductibles below \$500.

Multiply the Adjustment Factor by the appropriate value from the table designated in the Table Reference column. Enter the indicated table based on the deductible amount.

Table 12 Deductible Factor

a. Per Individual - Non-Integrated

Benefit Option	No Family Limit	2x Family Limit	2.5x Family Limit	3x Family Limit
None	1.0000	1.0000	1.0000	1.0000
\$50	0.9500	0.9709	0.9619	0.9529
\$100	0.9100	0.9300	0.9214	0.9127
\$150	0.8700	0.8891	0.8809	0.8726
\$200	0.8300	0.8483	0.8404	0.8325
\$250	0.8000	0.8176	0.8100	0.8024
\$300	0.7700	0.7869	0.7796	0.7723
\$400	0.7134	0.7291	0.7223	0.7155
\$500	0.6715	0.6863	0.6799	0.6735
\$1,000	0.4900	0.5008	0.4961	0.4915

Table 12 Deductible Factor

a1. Per Individual - Integrated

Deductible	Factor
\$0	N/A
\$50	N/A
\$100	N/A
\$150	N/A
\$200	N/A
\$250	N/A
\$300	N/A
\$350	N/A
\$400	N/A
\$450	N/A
\$500	0.9560
\$550	0.9466
\$600	0.9372
\$650	0.9278
\$700	0.9184
\$750	0.9090
\$800	0.9022
\$850	0.8954
\$900	0.8886
\$950	0.8818
\$1,000	0.8750
\$1,100	0.8650
\$1,250	0.8490
\$1,500	0.8220
\$2,000	0.7810
\$2,500	0.7370
\$3,000	0.7010
\$3,500	0.6740
\$4,000	0.6470
\$4,500	0.6190
\$5,000	0.5910
\$5,500	0.5710
\$6,000	0.5510
\$6,500	0.5310
\$7,000	0.5110
\$7,500	0.4910
\$8,000	0.4710
\$8,500	0.4510
\$9,000	0.4310
\$9,500	0.4110
\$10,000	0.3910
\$15,000	0.3710

Table 12 Deductible Factor

b1. Per Family - Integrated

Deductible	Factor
\$0	N/A
\$50	N/A
\$100	N/A
\$150	N/A
\$200	N/A
\$250	N/A
\$300	N/A
\$350	N/A
\$400	N/A
\$450	N/A
\$500	1.0000
\$550	0.9982
\$600	0.9964
\$650	0.9946
\$700	0.9928
\$750	0.9910
\$800	0.9888
\$850	0.9866
\$900	0.9844
\$950	0.9822
\$1,000	0.9800
\$1,100	0.9770
\$1,250	0.9650
\$1,500	0.9360
\$2,000	0.9000
\$2,500	0.8560
\$3,000	0.8180
\$3,500	0.7870
\$4,000	0.7550
\$4,500	0.7220
\$5,000	0.6890
\$5,500	0.6590
\$6,000	0.6390
\$6,500	0.6190
\$7,000	0.5990
\$7,500	0.5790
\$8,000	0.5590
\$8,500	0.5390
\$9,000	0.5190
\$9,500	0.4990
\$10,000	0.4790
\$15,000	0.4590

Table 12 Deductible Factor

c. Accumulating Period Factor

Benefit Option	Factor
Per Calendar Year	1.0000
Per Contract Year	1.0000

Table 13 Maximum Annual Benefit Factor

a. Per Individual

Benefit Option	Factor
Unlimited	1.0000
\$500	0.5808
\$1,000	0.7179
\$1,500	0.7973
\$2,000	0.8478
\$2,500	0.8791
\$3,000	0.8995
\$3,500	0.9200
\$4,000	0.9308
\$5,000	0.9525
\$7,500	0.9669
\$10,000	0.9891

Table 13 Maximum Annual Benefit Factor

b. Per Individual/Family

Benefit Option	Factor
\$500 / \$1000	0.5569
\$1000 / \$2000	0.7090
\$1500 / \$3000	0.7902
\$2000 / \$4000	0.8422
\$2500 / \$5000	0.8748
\$3000 / \$6000	0.8960
\$3500 / \$7000	0.9173
\$4000 / \$8000	0.9277
\$5000 / \$10000	0.9500
\$7500 / \$15000	0.9649
\$10000 / \$20000	0.9876

Table 13 Maximum Annual Benefit Factor

c. Accumulating Period Factor

Benefit Option	Factor
Per Calendar Year	1.0000
Per Contract Year	1.0000

Table 14 Out-of-Pocket Maximum Factor

Per Individual

Benefit Option	No Family Limit	1x Family Limit	2x Family Limit	2.5x Family	3x Family Limit
Unlimited	1.0000	1.0000	1.0000	1.0000	1.0000
\$500	1.0513	1.0608	1.0566	1.0553	1.0540
\$1,000	1.0181	1.0273	1.0232	1.0220	1.0207
\$1,500	1.0126	1.0217	1.0176	1.0164	1.0151
\$2,000	1.0100	1.0191	1.0151	1.0138	1.0126
\$2,500	1.0088	1.0179	1.0139	1.0126	1.0113
\$3,000	1.0077	1.0168	1.0128	1.0115	1.0103
\$3,500	1.0067	1.0157	1.0117	1.0104	1.0092
\$4,000	1.0057	1.0147	1.0107	1.0094	1.0082
\$5,000	1.0046	1.0136	1.0096	1.0084	1.0071
\$7,500	1.0032	1.0123	1.0082	1.0070	1.0057
\$10,000	1.0019	1.0109	1.0069	1.0056	1.0044

Table 15 Custom Product Factor

Benefit	Factor
No Custom Benefits	1.0000

Table 16 Step Therapy/Pre-certification Adjustment Factor

Benefit Option	Factor
Basic Precertification Only	1.0000
Add Expanded Precertification and Step Therapy	0.9900
Add Step Therapy Only	0.9950
Add Expanded Precertification Only	0.9950
Add Expanded Precertification after 90 days Only	0.9983
Add Step Therapy after 90 days Only	0.9983
Add Expanded Precertification after 90 days and Step Therapy after 90 days	0.9967
Add Step Therapy and Expanded Precertification after 90 days	0.9933
Add Expanded Precertification and Step Therapy after 90 days	0.9933
Full Pharmacy Step-Therapy and Precertification	0.9867
Pharmacy Benefit Excluded	1.0000

Table 17 Chronic and/or Preventative Drug Deductible Waiver Adjustment Factor

Medical Deductible	Health Reimbursement Account Products		
	Waive For Prev. & Chronic	Waive For Chronic Only	Waive For Prev. Only
	Factor	Factor	Factor
<= \$1,500	1.0800	1.0800	1.0800
\$1,501 <= \$2,500	1.0800	1.0800	1.0800
> \$2,500	1.0800	1.0800	1.0800

Table 18 Infertility Drug Coverage Adjustment Factor

Option	Factor
No Infertility Drug Coverage	1.0000
Oral Infertility Drugs Only	1.0020
Injectable Infertility Drugs Only	1.0050
Oral and Injectable Infertility Drugs	1.0060

Medical Deductible	All Other Products		
	Waive For Prev. & Chronic	Waive For Chronic Only	Waive For Prev. Only
	Factor	Factor	Factor
<= \$1,500	1.2000	1.2000	1.2000
\$1,501 <= \$2,500	1.2000	1.2000	1.2000
> \$2,500	1.2000	1.2000	1.2000

Table 19 Per Script Copay Maximum Factor (to be applied to non-self-injectable drug claims only)

Plan Design (Generic Preferred & Non-Preferred / Brand Preferred / Brand Non-Preferred)	Per Script Copay Maximum													
	\$100	\$150	\$200	\$250	\$300	\$350	\$400	\$450	\$500	\$550	\$600	\$650	\$700	\$750
Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor	Cost / Util Factor
10%	1.2149	1.1381	1.0995	1.0772	1.0627	1.0521	1.0439	1.0377	1.0333	1.0296	1.0265	1.0243	1.0224	1.0210
20%	1.3856	1.2525	1.1812	1.1405	1.1137	1.0951	1.0809	1.0696	1.0605	1.0534	1.0480	1.0443	1.0410	1.0380
30%	1.0318	1.0205	1.0153	1.0121	1.0100	1.0084	1.0070	1.0060	1.0053	1.0048	1.0043	1.0039	1.0036	1.0033
40%	1.0538	1.0352	1.0261	1.0210	1.0175	1.0148	1.0127	1.0110	1.0095	1.0082	1.0073	1.0067	1.0063	1.0059
50%	1.0876	1.0595	1.0437	1.0349	1.0293	1.0250	1.0216	1.0189	1.0167	1.0147	1.0130	1.0117	1.0105	1.0099
60%	1.1068	1.0715	1.0522	1.0409	1.0339	1.0290	1.0251	1.0220	1.0195	1.0173	1.0153	1.0139	1.0126	1.0118
10% / 20% / 30%	1.1085	1.0727	1.0530	1.0415	1.0344	1.0293	1.0254	1.0223	1.0198	1.0175	1.0155	1.0141	1.0128	1.0119
20% / 20% / 40%	1.1445	1.0945	1.0686	1.0535	1.0436	1.0364	1.0313	1.0275	1.0244	1.0217	1.0194	1.0177	1.0162	1.0151
20% / 20% / 50%	1.2089	1.1345	1.0971	1.0752	1.0611	1.0508	1.0429	1.0368	1.0325	1.0290	1.0259	1.0238	1.0219	1.0206
20% / 30% / 50%	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
30% / 30% / 50%	1.0271	1.0178	1.0133	1.0106	1.0087	1.0072	1.0060	1.0052	1.0046	1.0042	1.0038	1.0035	1.0032	1.0030
30% / 40% / 50%	1.0316	1.0204	1.0152	1.0121	1.0100	1.0083	1.0070	1.0060	1.0053	1.0048	1.0043	1.0039	1.0036	1.0033
40% / 50% / 50%	1.0422	1.0275	1.0204	1.0164	1.0136	1.0115	1.0097	1.0084	1.0073	1.0064	1.0057	1.0053	1.0049	1.0046
For any \$ copay in the first or second tier and the following coinsurances in the remaining tiers														
\$ / 15% / 30%	1.1057	1.0709	1.0517	1.0406	1.0337	1.0288	1.0249	1.0219	1.0194	1.0172	1.0152	1.0138	1.0125	1.0117
\$ / 20% / 30%	1.1417	1.0928	1.0673	1.0526	1.0429	1.0358	1.0308	1.0271	1.0240	1.0214	1.0191	1.0174	1.0159	1.0149
\$ / 20% / 35%	1.2027	1.1308	1.0944	1.0732	1.0595	1.0495	1.0418	1.0359	1.0317	1.0283	1.0253	1.0232	1.0214	1.0201
\$ / 30% / 40%	1.0755	1.0522	1.0386	1.0309	1.0260	1.0222	1.0193	1.0169	1.0150	1.0133	1.0118	1.0107	1.0097	1.0092
\$ / 30% / 50%	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
\$ / 40% / 50%	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
\$ / 50% / 50%	centivized MOD factor	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	vized MOD	0.0000	0.0000	0.0000	0.0000	0.0000
\$ / \$ / 50%	2 X MOD	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	2.5 X MOD	0.0000	0.0000	0.0000	0.0000	0.0000

Table 20 Incentivized MOD Factor

	Incentivized MOD factors								Incentivized MOD factors							
	2 X MOD								2.5 X MOD							
	2 fills allowed at retail				3 fills allowed at retail				2 fills allowed at retail				3 fills allowed at retail			
	50% of Drug Cost	75% of Drug Cost	2x Retail Copay	3x Retail Copay	50% of Drug Cost	75% of Drug Cost	2x Retail Copay	3x Retail Copay	50% of Drug Cost	75% of Drug Cost	2x Retail Copay	3x Retail Copay	50% of Drug Cost	75% of Drug Cost	2x Retail Copay	3x Retail Copay
\$5/\$20/\$60	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9928	0.9928	0.9983	0.9969	0.9913	0.9913
\$5/\$25/\$60	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9936	0.9936	1.0000	1.0000	0.9919	0.9919
\$5/\$25/\$65	N/A	N/A	N/A	N/A	1.0000	1.0000	1.0000	1.0000	N/A	1.0000	0.9949	0.9949	1.0000	0.9972	0.9927	0.9927
\$10/\$25/\$50	N/A	N/A	N/A	N/A	N/A	1.0000	1.0000	1.0000	1.0000	1.0000	0.9964	0.9964	1.0000	1.0000	0.9937	0.9937
\$10/\$30/\$60	N/A	N/A	N/A	N/A	N/A	1.0000	1.0000	1.0000	N/A	1.0000	0.9969	0.9969	1.0000	1.0000	0.9941	0.9941
\$10/\$30/\$70	N/A	N/A	N/A	N/A	N/A	1.0000	1.0000	1.0000	N/A	1.0000	0.9971	0.9971	1.0000	1.0000	0.9942	0.9942
\$15/\$35/\$60	N/A	N/A	N/A	N/A	N/A	1.0000	1.0000	1.0000	N/A	1.0000	0.9960	0.9960	1.0000	0.9999	0.9929	0.9929
\$15/\$35/\$75	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
\$15/\$35/\$80	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
\$15/\$40/\$75	0.0000	Leverage	Trend Period	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
\$20/\$40/\$70	Trend %	Adjustment	Exponent	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000

Table 22 Trend Factor

Effective Date	Trend Factor
07/01/2012	1.000
10/01/2012	1.016
01/01/2013	1.032
04/01/2013	1.048

Section II.

Table 24 Industry Factor

SIC Range		
From	To	Factor
111	119	0.9800
131	139	0.9800
161	161	0.9800
171	179	0.9800
181	182	0.9800
191	191	0.9800
211	291	1.0700
711	722	0.9800
723	723	0.9800
724	724	0.9800
741	742	0.9800
751	752	0.9800
761	762	0.9800
781	781	1.0000
782	783	0.9800
811	851	1.0300
912	919	1.1000
921	921	1.0000
971	971	1.0300
1011	1031	1.1500
1041	1044	1.1500
1061	1081	1.1500
1094	1099	1.1500
1221	1222	1.1500
1231	1231	1.1500
1241	1241	1.1500
1311	1321	1.0000
1381	1389	1.0000
1411	1429	1.0300
1442	1446	1.0300
1455	1459	1.0300
1474	1479	1.0300
1481	1499	1.0300
1521	1522	1.0400
1531	1531	1.0900
1541	1541	1.0200
1542	1542	1.0000
1611	1611	1.0300
1622	1629	1.0300
1711	1711	1.0100
1721	1721	1.0100
1731	1731	1.0100
1741	1741	1.0100
1742	1742	1.0100
1743	1743	1.0100
1751	1752	1.0100
1761	1761	1.0100
1771	1771	1.0100
1781	1781	1.0100
1791	1791	1.0100
1793	1793	1.0100
1794	1794	1.0100
1795	1795	1.0100
1796	1796	1.0100
1799	1799	1.0100
2011	2015	1.0000
2021	2035	1.0000
2037	2048	0.9800
2051	2052	0.9800
2053	2053	0.9800
2061	2063	0.9800
2064	2068	0.9800
2074	2079	0.9800
2082	2087	0.9800
2091	2091	0.9800
2092	2092	0.9800
2095	2095	0.9800
2096	2096	0.9800
2097	2097	0.9800
2098	2098	0.9800
2099	2099	0.9800
2111	2141	1.0000
2211	2211	1.0000
2221	2221	1.0000
2231	2231	1.0000
2241	2241	1.0000
2251	2259	1.0000
2261	2269	1.0000
2273	2273	1.0000
2281	2284	1.0000
2296	2299	1.0000
2311	2329	0.9800
2331	2342	0.9800
2353	2353	0.9800
2361	2369	0.9800
2371	2399	1.0000
2411	2411	1.0000
2421	2429	1.0000

SIC Range		
From	To	Factor
2431	2431	1.0300
2434	2434	0.9700
2435	2435	0.9700
2436	2436	0.9700
2439	2439	0.9700
2441	2449	0.9700
2451	2452	0.9700
2491	2499	0.9700
2511	2519	0.9700
2521	2522	0.9700
2531	2531	0.9700
2541	2542	0.9700
2591	2599	0.9700
2611	2611	1.0300
2621	2621	1.0300
2631	2631	1.0300
2652	2657	1.0300
2671	2679	1.0300
2711	2711	1.0000
2721	2789	1.0000
2791	2796	1.0000
2812	2819	1.0000
2821	2824	1.0000
2833	2834	1.0400
2835	2836	1.0000
2841	2844	0.9800
2851	2851	0.9800
2861	2869	0.9800
2873	2879	0.9800
2891	2891	0.9500
2892	2892	0.9500
2893	2895	0.9500
2899	2899	0.9500
2911	2952	1.0300
2992	2999	1.0300
3011	3011	0.9800
3021	3069	0.9800
3081	3089	0.9600
3111	3111	1.0000
3131	3149	1.0000
3151	3199	1.0000
3211	3211	1.0200
3221	3231	1.0200
3241	3241	1.0200
3251	3259	1.0200
3261	3269	1.0200
3271	3275	1.0200
3281	3281	1.0200
3291	3291	1.0200
3292	3292	1.0200
3295	3299	1.0200
3312	3317	1.0400
3321	3325	1.0400
3331	3339	1.0400
3341	3341	1.0400
3351	3357	1.0400
3363	3369	1.0400
3398	3399	1.0400
3411	3412	0.9400
3421	3429	0.9400
3431	3433	0.9400
3441	3441	0.9400
3442	3442	1.0000
3443	3443	0.9800
3444	3444	0.9800
3446	3446	0.9800
3448	3448	0.9800
3449	3449	0.9800
3451	3452	0.9800
3462	3469	0.9800
3471	3479	0.9800
3482	3483	0.9800
3484	3484	0.9800
3489	3489	0.9800
3491	3499	0.9700
3511	3519	0.9700
3523	3524	0.9700
3531	3537	0.9800
3541	3549	0.9500
3552	3569	0.9500
3571	3579	0.9500
3581	3589	0.9500
3592	3599	0.9500
3612	3613	0.9900
3621	3648	0.9900
3651	3652	0.9900
3661	3669	0.9900

SIC Range		
From	To	Factor
3671	3679	0.9900
3691	3699	0.9900
3711	3716	1.0000
3721	3728	0.9500
3731	3731	0.9500
3732	3732	0.9500
3743	3743	0.9500
3751	3751	0.9500
3761	3769	0.9500
3792	3792	0.9500
3795	3795	0.9500
3799	3799	0.9500
3812	3812	0.9400
3821	3829	1.0100
3841	3845	1.0100
3851	3851	1.0100
3861	3861	0.9400
3873	3873	0.9400
3911	3915	0.9400
3931	3931	1.0000
3942	3949	1.0000
3951	3955	0.9700
3961	3965	0.9700
3991	3999	0.9700
4011	4013	1.0200
4111	4119	1.0600
4121	4121	1.1200
4131	4131	1.0600
4141	4142	1.0600
4151	4151	1.0300
4173	4173	1.0400
4212	4212	1.0200
4213	4214	1.0200
4215	4215	1.0200
4221	4221	1.0200
4222	4222	1.0200
4225	4225	1.0200
4226	4226	1.0200
4231	4231	1.0200
4311	4311	1.0000
4412	4412	1.0200
4424	4424	1.0200
4432	4432	1.0200
4449	4449	1.0200
4481	4489	1.0200
4491	4499	1.0200
4512	4513	0.9500
4522	4522	0.9500
4581	4581	0.9500
4612	4619	1.0500
4724	4729	1.0800
4731	4731	0.9800
4741	4789	0.9800
4812	4813	1.0000
4822	4899	1.0200
4911	4911	0.9700
4922	4925	1.0000
4931	4939	0.9500
4941	4941	0.9500
4952	4959	0.9500
4961	4961	0.9500
4971	4971	0.9500
5012	5015	1.0000
5021	5021	1.0000
5023	5023	1.0000
5031	5039	1.0400
5043	5049	1.0200
5051	5052	1.0200
5063	5064	1.0200
5065	5065	1.0200
5072	5078	1.0000
5082	5087	1.0000
5088	5088	1.0000
5091	5092	1.0000
5093	5093	1.1200
5094	5099	0.9400
5111	5113	1.0000
5122	5122	0.9800
5131	5139	1.0200
5141	5149	0.9800
5153	5153	0.9800
5154	5159	0.9800
5162	5169	0.9800
5171	5172	0.9800
5181	5182	0.9800
5191	5199	1.0200
5211	5211	1.0300

Table 24 Industry Factor (continued)

SIC Range		
From	To	Factor
5231	5231	1.0300
5251	5261	1.0300
5271	5271	1.0300
5311	5399	0.9700
5411	5411	1.0000
5421	5421	1.0000
5431	5431	1.0000
5441	5441	1.0000
5451	5451	1.0000
5461	5461	1.0000
5499	5499	1.0000
5511	5511	1.1000
5521	5521	1.1000
5531	5531	1.1000
5541	5541	1.1000
5551	5551	1.1200
5561	5561	1.1200
5571	5571	1.1200
5599	5599	1.1200
5611	5651	0.9600
5661	5661	0.9600
5699	5699	0.9600
5712	5719	1.0200
5722	5722	1.0400
5731	5736	0.9700
5812	5812	1.0000
5813	5813	1.0500
5912	5912	0.9700
5921	5921	1.0600
5932	5932	1.0000
5941	5949	0.9700
5961	5963	1.0500
5983	5989	1.0500
5992	5992	1.0000
5993	5999	1.0000
6011	6149	1.0000
6153	6163	1.0300
6211	6289	1.0000
6311	6399	1.0300
6411	6411	1.0300
6512	6519	1.0300
6531	6531	1.0300
6541	6553	1.0300
6712	6799	0.9700
7011	7041	0.9800
7211	7219	0.9900
7221	7221	1.0000
7231	7241	1.0500
7251	7251	1.0300
7261	7261	1.0500
7291	7299	1.0300
7311	7311	0.9800
7312	7319	0.9800
7322	7331	1.0300
7334	7334	0.9600
7335	7336	0.9600
7338	7338	0.9600
7342	7349	0.9800
7352	7352	1.0000
7353	7359	1.0000
7361	7363	1.0300
7371	7379	0.9700
7381	7381	0.9700
7382	7382	1.0000
7383	7383	1.0400
7384	7384	1.0400
7389	7389	1.0000
7513	7519	1.0300
7521	7521	1.0300
7532	7539	1.0100
7542	7549	1.0900
7622	7629	1.0000
7631	7641	1.0000
7692	7692	1.0200
7694	7699	1.0200
7812	7833	1.0600
7841	7841	1.0500
7911	7911	1.0900
7922	7929	1.0900
7933	7933	1.0500
7941	7948	1.0500
7991	7996	1.0500
7997	7999	0.9800
8011	8011	1.0800
8021	8021	1.0400
8031	8041	1.0800
8042	8042	1.0400
8043	8049	1.0800
8051	8059	1.0600
8061	8069	1.1200
8071	8071	1.0800

Table 25 Rating Factor

Rating Area	Factor
All Areas	1.000

Table 26 New Business Subscriber Based Age/Gender Factor

Age Band	Two-Tier Factors			
	Male		Female	
	Single	Family	Single	Family
Under 25	0.2504	0.3069	0.4612	0.3453
025 - 029	0.3452	0.3953	0.6471	0.4612
030 - 034	0.4884	0.5823	0.7496	0.5897
035 - 039	0.7700	0.8136	0.8507	0.7677
040 - 044	1.1281	1.0705	1.0142	0.9831
045 - 049	1.3070	1.3744	1.2159	1.2045
050 - 054	1.5064	1.6630	1.4578	1.5363
055 - 059	1.7641	1.8961	1.7826	1.8637
060 - 064	2.0418	2.2136	2.1875	2.2964
065+	2.5600	2.8078	2.5191	2.7302

Table 26 Renewal Member Based/Age/Gender Factor

Age Band	Male	Female
000 - 001	0.3650	0.3651
002 - 004	0.3650	0.3651
005 - 009	0.3650	0.3651
010 - 014	0.3650	0.3651
015 - 019	0.3650	0.3651
020 - 024	0.4131	0.5679
025 - 029	0.4448	0.6583
030 - 034	0.5710	0.7840
035 - 039	0.8210	0.9473
040 - 044	1.1482	1.1893
045 - 049	1.4515	1.4892
050 - 054	1.8807	1.8823
055 - 059	2.3363	2.3398
060 - 064	2.7795	2.8559
065+	3.4387	3.2993

Age Band	Three-Tier Factors					
	Male			Female		
	Single	2-Party	Family	Single	2-Party	Family
Under 25	0.2504	0.2484	0.4279	0.4612	0.2858	0.5657
025 - 029	0.3452	0.3775	0.4158	0.6471	0.4900	0.4489
030 - 034	0.4884	0.5595	0.5735	0.7496	0.6135	0.5686
035 - 039	0.7700	0.7773	0.7830	0.8507	0.7474	0.7517
040 - 044	1.1281	1.0454	1.0214	1.0142	1.0227	0.9380
045 - 049	1.3070	1.3400	1.3218	1.2159	1.1837	1.2034
050 - 054	1.5064	1.7223	1.5983	1.4578	1.5990	1.5265
055 - 059	1.7641	2.0456	1.8092	1.7826	2.0065	1.8327
060 - 064	2.0418	2.4112	2.1144	2.1875	2.5215	2.2708
065+	2.5600	3.0851	2.6876	2.5191	2.9759	3.1021

Age Band	Four-Tier Factors							
	Male				Female			
	Single	EE + Sp	EE + Ch(ren)	Family	Single	EE + Sp	EE + Ch(ren)	Family
Under 25	0.2504	0.2615	0.2249	0.3090	0.4612	0.3127	0.4027	0.3416
025 - 029	0.3452	0.3716	0.3326	0.4142	0.6471	0.5425	0.5506	0.5613
030 - 034	0.4884	0.5600	0.5285	0.5584	0.7496	0.6924	0.7131	0.7047
035 - 039	0.7700	0.8016	0.7500	0.7894	0.8507	0.8518	0.9257	0.8571
040 - 044	1.1281	1.0910	1.0349	1.0662	1.0142	1.1275	1.1295	1.1207
045 - 049	1.3070	1.2919	1.2376	1.2864	1.2159	1.2668	1.3022	1.2540
050 - 054	1.5064	1.5489	1.5661	1.5348	1.4578	1.5243	1.6359	1.5483
055 - 059	1.7641	1.7451	1.9407	1.7141	1.7826	1.7762	1.9064	1.8083
060 - 064	2.0418	2.0148	2.0878	2.0061	2.1875	2.1358	2.2794	2.1522
065+	2.5600	2.5570	2.2790	2.5245	2.5191	2.4866	2.7953	2.4876

Section III.

Table 28 Tier Factor

Tier	Tier Factor	
2-Tier	Single	1.1878
	Family	2.5433
3-Tier	Single 1.1878	
	2-Party	2.3229
4-Tier	Family	2.7307
	Single 1.1878	
	Par/Child	1.4930
	Couple	2.8207
Medicare	Family	2.9496
	Member	1.1878

Table 29 Dependent Age Adjustment Factor

Age up to	Students	Non-Students
19 years	-1.6	0.0
20 years	-1.2	0.4
21 years	-0.8	0.8
22 years	-0.4	1.2
23 years	0.0	1.6
24 years	0.4	2.0
25 years	0.8	2.4
26 years	1.2	2.8
27 years	1.6	3.2
28 years *	2.0	3.6

* For each year of age or part thereof beyond 28, add 0.4 to the last value in the column, not to exceed the factor for age 35.
 ** Up to the end of the month in which the age is reached. If the limiting age is to the end of the calendar year in which the age is reached, add an additional 0.2 to each value in the respective columns.

Section IV.

Table 31 Administrative Expenses & Profit Factor

Case Size (total lives)	PMPM	Retention	Commissions*	Taxes & Assessments
<= 10	\$2.90	0-7.5%	0%-10%	2.70%
<= 50	\$2.80	0-7.5%	0%-10%	2.70%
<= 100	\$2.65	0-7.5%	0%-10%	2.70%
<= 300	\$2.30	0-7.5%	0%-10%	2.70%
<= 1,000	\$2.15	0-7.5%	0%-10%	2.70%
<= 1,500	\$2.00	0-7.5%	0%-10%	2.70%
<= 3,000	\$1.80	0-7.5%	0%-10%	2.70%
<= 4,000	\$1.60	0-7.5%	0%-10%	2.70%
<= 5,000	\$1.50	0-7.5%	0%-10%	2.70%
<= 7,500	\$1.45	0-7.5%	0%-10%	2.70%
<= 10,000	\$1.35	0-7.5%	0%-10%	2.70%
<= 20,000	\$1.20	0-7.5%	0%-10%	2.70%
<= 35,000	\$1.05	0-7.5%	0%-10%	2.70%
<= 70,000	\$1.00	0-7.5%	0%-10%	2.70%
<= 100,000	\$0.95	0-7.5%	0%-10%	2.70%
> 100,000	\$0.90	0-7.5%	0%-10%	2.70%

* Aetna's standard is not to include commissions in our premiums. Should the customer instruct Aetna to include a broker fee, final billing rates to the Customer will be modified to reflect the agreed upon schedule.

Self Injectables Benefit Plan – Manual Rate Calculation

Refer to the Self Injectables Plan Rate Development Worksheet in [Section D](#).

I. Self Injectables Start Rate

Calculate the Self Injectables Self Injectables Start Rate as follows:

$$\begin{array}{l} \text{Starting Base Plan Claim Cost} \\ \quad \times \\ \text{Benefit Adjustment Factor} \\ \quad \times \\ \text{Trend Factor} \end{array}$$

Starting Base Plan Claim Cost

The Starting Base Plan Claim Cost is the PMPM for a \$0 copay plan

Benefit Adjustment Factor

The Benefit Adjustment Factor is the product of the following factors:

$$\begin{array}{l} \text{Self Injectables Plan Option Factor} \\ \quad \times \\ \text{Deductible Factor} \\ \quad \times \\ \text{Maximum Annual Benefit Factor} \\ \quad \times \\ \text{Out-of-Pocket Maximum Factor} \\ \quad \times \\ \text{Custom Product Factor} \\ \quad \times \\ \text{Step Therapy/Precertification Adjustment Factor} \\ \quad \times \\ \text{Chronic and/or Preventative Drug Deductible Waiver Adjustment Factor} \\ \quad \times \\ \text{Infertility Drug Coverage Adjustment Factor} \\ \quad \times \\ \text{Per Script Copay Maximum Factor} \\ \quad \times \\ \text{Incentivized MOD Factor} \end{array}$$

Trend Factor

Select the appropriate factor from the Trend Factor table.

II. Self Injectables Flex Plan Claim Cost

Industry Factor

Select the appropriate factor from the Industry Factor table.

Rating Area Factor

Select the appropriate factor from the Rating Area Factor.

Age/Gender Factor

Calculate the appropriate Age/Gender Factor as follows:

Use the New Business Subscriber Based Age/Gender Factor table, the expected employee census segmented by age, gender and rate tier, and the Tier Factors to calculate the adjustment factor. First sum the product of the expected subscribers times the appropriate age/gender and Tier factors. This result is then divided by the sum of the product of the expected subscribers by tier times the appropriate rate tier factors to obtain the age/gender adjustment.

Calculate the appropriate Renewal Business Age/Gender Factor as follows:

Use the Renewal Member Based Age/Gender Factor table and the expected enrolled membership segmented by age and gender to calculate the Weighted Average Age/Gender Factor by taking the sum product of the age/gender factor and the expected enrolled membership.

Calculate the Contract Mix/Family Size Factor. This factor reflects the distribution of enrollment by contract 'tier' type and the average members per contract tier of the group. To calculate this factor, first calculate the group's average number of members per contract. Next, calculate the group's average rate tier factor by weighting the community rate tier factors with the group's actual number of contracts per tier. The contract mix/family size factor is then calculated by dividing the group's average number of members per contract by the group's average rate tier factor.

Multiply the Weighted Average Age/Gender Factor by the Contract Mix/Family Size Factor to get the Age/Gender Factor

Multiply the Self Injectables Start Rate as calculated in **I.** by the following to get the Flex Plan Claim Cost PMPM:

$$\begin{array}{l}
 \text{Industry Factor} \\
 \quad \times \\
 \text{Rating Area Factor} \\
 \quad \times \\
 \text{Age/Gender Factor}
 \end{array}$$

III. Adjusted Self Injectables Claim Cost by Billing Tier

Tier Factor

For each billing tier, multiply the Self Injectables Start Rate by the appropriate Tier Factor from the Tier Factor table.

Dependent Age Adjustment Factor

For those tiers under which children may be covered, apply the appropriate factor. Other tiers will use a factor of 1.0.

Multiply the Flex Plan Claim Cost PMPM as calculated in **II.** by the following to get the Adjusted Self Injectables Claim Cost by Billing Tier:

$$\begin{array}{r} \text{Tier Factor} \\ \times \\ \text{Dependent Age Adjustment Factor} \end{array}$$

IV. Self Injectables Manual Premium Rates by Billing Tier

Multiply the Adjusted Self Injectables Claim Cost by Billing Tier as calculated in **III.** by the adjustment factor from d. below to get Self Injectables Manual Premium Rates by Billing Tier:

Administrative Expense and Profit

- a. Enter the Administrative Expenses and Profit table with total case lives and retrieve the appropriate Self Injectables PMPM expense. Also retrieve the appropriate Retention, Commission, and Taxes and Assessments percentages.
- b. Multiply the PMPM in a. by members to get Total Retention amount.
- c. Multiply Adjusted Self Injectables Claim Cost by Billing Tier by the appropriate number of subscribers in each tier to get Total Monthly Claim Cost.
- d. The Administrative Expense and Profit Factor will be $[(\text{Total Monthly Claim Cost} + \text{Total Retention amount}) / (1 - \text{Retention Expense \%} - \text{Commissions \%} - \text{Taxes and Assessments \%})] / (\text{Total Monthly Claim Cost})$

[Retention may be adjusted to reflect case specific circumstances such as inclusion or exclusion of certain programs \(i.e. wellness programs\), case specific commissions, or margin for risk sharing arrangements, etc.](#)

Underwriter Adjustment Factor

Enter the Underwriter Adjustment Factor if applicable.

Note: Rounding to the eighth decimal place occurs in every calculation, with the exception of the last calculation which gets rounded to the second decimal place.

Also, enter these rates on the appropriate line in the Medical Section of the Rate Manual.

Self Injectable Plan Rate Development Worksheet

Group Name: _____ Group No.: _____ Effective Date: _____ Today's Date: _____

Section I.

- 1 3rd Quarter 2012 Starting Base Plan Claim Cost _____
- 2 Selected Benefit Plan Option _____
- 3 Deductible _____
- 4 Maximum Annual Benefit _____
- 5 Out-of-Pocket Maximum _____
- 6 Custom Product _____
- 7 Step Therapy/Pre-certification Adjustment _____
- 8 Chronic and/or Preventative Drug Deductible Waiver Adjustment _____
- 9 Infertility Drug Coverage Adjustment _____
- 10 Per Script Copay Maximum _____
- 11 Incentivized MOD _____
- 12 Benefit Adjustment 2 x 3 x 4 x 5 x 6 x 7 x 8 x 9 x 10 x 11
- 13 Trend _____
- 14 Self Injectable Start Rate 1 x 12 x 13

Section II.

- 15 Industry _____
- 16 Rating Area _____
- 17 Age/Gender _____
- 18 Flex Plan Claim Cost PMPM 14 x 15 x 16 x 17

Section III.

19 Tier Factors

Two-tier Structure	Three-tier Structure			Four-tier Structure				Medicare
Single Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member

20 Dependent Age Adjustment

Two-tier Structure	Three-tier Structure			Four-tier Structure				Medicare
Single Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member
1.00	1.00			1.00		1.00		1.00

Dependent Age Adjustment Worksheet		
	Limiting Age	Adjustment
a. Student:	_____	_____
b. Non-Student:	_____	_____
c. [1.00 + ((a.+ b.) / 100)]		_____

21 Adjusted Self Injectable Rider Claim Cost by Billing Tier

Two-tier Structure	Three-tier Structure			Four-tier Structure				Medicare
Single Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member

18 x 19 x 20

Section IV.

- 22 Administrative Expenses & Profit Factor _____
- 23 This line reserved for future use _____
- 24 Underwriter Adjustment _____
- 25 Final Self Injectable Rider Premium Rates by Billing Tier 21 x 22 x 23 x 24

Two-tier Structure	Three-tier Structure			Four-tier Structure				Medicare
Single Family	Single	2-Party	Family	Single	Par/Child	Couple	Family	Member

NOTE: Rounding to the fourth decimal place occurs in every calculation, with the exception of the last calculation which gets rounded to the second decimal place.

Self Injectables PMPM and Benefit Factor Tables

Section I.

Table 1. 3rd Quarter 2012 Starting Base Plan Claim Cost

Area	Base Cost
DC	6.10

Table 2. Benefit Plan Options
a. Single - Tier Copay Levels

All Generic & All Brand	Factor	Coinsurance With Min/Max Factor
\$0.00	1.0000	N/A
\$1.00	0.9996	N/A
\$2.00	0.9992	N/A
\$2.50	0.9990	N/A
\$3.00	0.9988	N/A
\$4.00	0.9984	N/A
\$5.00	0.9980	N/A
\$6.00	0.9976	N/A
\$7.00	0.9972	N/A
\$7.50	0.9970	N/A
\$8.00	0.9968	N/A
\$10.00	0.9961	N/A
\$12.00	0.9953	N/A
\$15.00	0.9941	N/A
\$20.00	0.9921	N/A
\$25.00	0.9901	N/A
\$30.00	0.9882	N/A
\$35.00	0.9862	N/A
\$40.00	0.9842	N/A
\$45.00	0.9823	N/A
\$50.00	0.9803	N/A
\$55.00	0.9783	N/A
\$60.00	0.9764	N/A
\$65.00	0.9744	N/A
\$70.00	0.9724	N/A
\$75.00	0.9704	N/A
10% Coinsurance	0.9000	N/A
15% Coinsurance	0.8500	N/A
20% Coinsurance	0.8000	N/A
25% Coinsurance	0.7500	N/A
30% Coinsurance	0.7000	N/A
40% Coinsurance	0.6000	N/A
50% Coinsurance	0.5000	N/A
60% Coinsurance	0.4000	N/A

Table 2. Benefit Plan Options
b1. Two - Tier Copay Levels

Generic & Brand-Formulary / Brand Non-Formulary	Factor	Coinsurance With Min/Max Factor
\$1.00 / \$2.00	0.9995	N/A
\$2.00 / \$4.00	0.9990	N/A
\$2.50 / \$7.50	0.9985	N/A
\$3.00 / \$6.00	0.9985	N/A
\$4.00 / \$8.00	0.9980	N/A
\$5.00 / \$10.00	0.9976	N/A
\$5.00 / \$15.00	0.9971	N/A
\$5.00 / \$20.00	0.9966	N/A
\$5.00 / \$25.00	0.9961	N/A
\$6.00 / \$11.00	0.9972	N/A
\$6.00 / \$12.00	0.9971	N/A
\$7.00 / \$12.00	0.9968	N/A
\$7.50 / \$12.00	0.9966	N/A
\$8.00 / \$13.00	0.9964	N/A
\$10.00 / \$15.00	0.9956	N/A
\$10.00 / \$20.00	0.9951	N/A
\$10.00 / \$25.00	0.9946	N/A
\$12.00 / \$17.00	0.9948	N/A
\$15.00 / \$20.00	0.9936	N/A
\$15.00 / \$25.00	0.9931	N/A
\$20.00 / \$25.00	0.9916	N/A
\$20.00 / \$30.00	0.9912	N/A
\$30.00 / \$40.00	0.9872	N/A
\$30.00 / \$50.00	0.9863	N/A

Table 2. Benefit Plan Options
b2. Two - Tier Copay Levels

All Generic / All Brand	Factor	Coinsurance With Min/Max Factor
\$0.00 / \$10.00	0.9962	N/A
\$0.00 / \$15.00	0.9943	N/A
\$0.00 / \$20.00	0.9923	N/A
\$0.00 / \$25.00	0.9904	N/A
\$1.00 / \$2.00	0.9992	N/A
\$1.00 / \$3.00	0.9988	N/A
\$1.00 / \$5.00	0.9981	N/A
\$1.00 / \$10.00	0.9962	N/A
\$1.00 / \$15.00	0.9942	N/A
\$1.00 / \$20.00	0.9923	N/A
\$1.00 / \$25.00	0.9904	N/A
\$2.00 / \$4.00	0.9984	N/A
\$2.00 / \$7.00	0.9973	N/A
\$2.00 / \$10.00	0.9961	N/A
\$2.50 / \$7.50	0.9971	N/A
\$3.00 / \$6.00	0.9977	N/A
\$4.00 / \$9.00	0.9965	N/A
\$4.00 / \$10.00	0.9961	N/A
\$4.00 / \$15.00	0.9942	N/A
\$4.00 / \$20.00	0.9923	N/A
\$4.00 / \$25.00	0.9904	N/A
\$5.00 / \$7.00	0.9973	N/A
\$5.00 / \$7.50	0.9971	N/A
\$5.00 / \$8.00	0.9969	N/A
\$5.00 / \$10.00	0.9961	N/A
\$5.00 / \$15.00	0.9942	N/A
\$5.00 / \$20.00	0.9923	N/A
\$6.00 / \$11.00	0.9957	N/A
\$6.00 / \$12.00	0.9953	N/A
\$7.00 / \$10.00	0.9961	N/A
\$7.00 / \$12.00	0.9953	N/A
\$7.00 / \$14.00	0.9946	N/A
\$7.00 / \$15.00	0.9942	N/A
\$7.00 / \$20.00	0.9923	N/A
\$7.00 / \$25.00	0.9916	N/A
\$7.00 / \$30.00	0.9894	N/A
\$7.50 / \$12.00	0.9953	N/A
\$8.00 / \$13.00	0.9949	N/A
\$8.00 / \$16.00	0.9938	N/A
\$8.00 / \$18.00	0.9930	N/A
\$9.00 / \$10.00	0.9961	N/A
\$9.00 / \$15.00	0.9942	N/A
\$9.00 / \$18.00	0.9930	N/A
\$9.00 / \$20.00	0.9922	N/A
\$9.00 / \$25.00	0.9905	N/A
\$10.00 / \$15.00	0.9941	N/A
\$10.00 / \$20.00	0.9922	N/A
\$10.00 / \$25.00	0.9903	N/A
\$10.00 / \$30.00	0.9884	N/A
\$10.00 / \$35.00	0.9865	N/A
\$10.00 / \$50.00	0.9807	N/A
\$12.00 / \$17.00	0.9934	N/A
\$15.00 / \$20.00	0.9922	N/A
\$15.00 / \$25.00	0.9903	N/A
\$15.00 / \$30.00	0.9883	N/A
\$15.00 / 50%	0.5032	N/A
\$20.00 / \$25.00	0.9902	N/A
\$20.00 / \$30.00	0.9883	N/A
\$20.00 / \$40.00	0.9845	N/A
\$20.00 / \$50.00	0.9806	N/A
\$30.00 / \$40.00	0.9843	N/A
\$30.00 / \$50.00	0.9805	N/A

Table 2 Benefit Plan Options
c. Three - Tier Copay Levels

Generic Formulary/Brand Formulary/ Non-Formulary OR Generic/Brand Formulary/Brand Non-Formulary	Factor	Coinsurance With Min/Max Factor
\$0.00 / \$10.00 / \$25.00	0.9296	N/A
\$0.00 / \$10.00 / 50%	0.8930	N/A
\$0.00 / \$15.00 / \$30.00	0.9528	N/A
\$0.00 / \$15.00 / 50%	0.8915	N/A
\$0.00 / \$20.00 / \$35.00	0.9909	N/A
\$0.00 / \$20.00 / \$40.00	0.9905	N/A
\$0.00 / \$20.00 / 50%	0.8901	N/A
\$0.00 / \$25.00 / \$40.00	0.9890	N/A
\$0.00 / \$25.00 / \$45.00	0.9885	N/A
\$0.00 / \$25.00 / \$50.00	0.9881	N/A
\$0.00 / \$30.00 / \$45.00	0.9871	N/A
\$0.00 / \$30.00 / \$50.00	0.9866	N/A
\$0.00 / \$30.00 / \$60.00	0.9857	N/A
\$1.00 / \$5.00 / \$10.00	0.9976	N/A
\$1.00 / \$5.00 / 50%	0.8944	N/A
\$1.00 / \$10.00 / \$25.00	0.9947	N/A
\$1.00 / \$10.00 / 50%	0.8930	N/A
\$1.00 / \$15.00 / \$30.00	0.9928	N/A
\$1.00 / \$15.00 / 50%	0.8915	N/A
\$1.00 / \$20.00 / \$35.00	0.9909	N/A
\$1.00 / \$20.00 / \$40.00	0.9904	N/A
\$1.00 / \$20.00 / 50%	0.8901	N/A
\$1.00 / \$25.00 / \$40.00	0.9890	N/A
\$1.00 / \$25.00 / \$45.00	0.9885	N/A
\$1.00 / \$25.00 / \$50.00	0.9881	N/A
\$1.00 / \$30.00 / \$45.00	0.9871	N/A
\$1.00 / \$30.00 / \$50.00	0.9866	N/A
\$2.00 / \$5.00 / \$10.00	0.9976	N/A
\$2.00 / \$15.00 / \$25.00	0.9933	N/A
\$2.50 / \$7.50 / \$12.00	0.9967	N/A
\$3.00 / \$6.00 / \$10.00	0.9973	N/A
\$4.00 / \$9.00 / \$14.00	0.9960	N/A
\$4.00 / \$10.00 / \$25.00	0.9947	N/A
\$4.00 / \$10.00 / 50%	0.8929	N/A
\$4.00 / \$15.00 / \$30.00	0.9928	N/A
\$4.00 / \$15.00 / 50%	0.8915	N/A
\$4.00 / \$20.00 / \$35.00	0.9909	N/A
\$4.00 / \$20.00 / \$40.00	0.9904	N/A
\$4.00 / \$20.00 / 50%	0.8900	N/A
\$4.00 / \$25.00 / \$40.00	0.9890	N/A
\$4.00 / \$25.00 / \$45.00	0.9885	N/A
\$4.00 / \$25.00 / \$50.00	0.9880	N/A
\$4.00 / \$30.00 / \$45.00	0.9870	N/A
\$4.00 / \$30.00 / \$50.00	0.9866	N/A
\$5.00 / \$10.00 / \$15.00	0.9956	N/A
\$5.00 / \$10.00 / \$20.00	0.9952	N/A
\$5.00 / \$10.00 / \$25.00	0.9947	N/A
\$5.00 / \$10.00 / \$30.00	0.9942	N/A
\$5.00 / \$10.00 / \$35.00	0.9938	N/A
\$5.00 / \$10.00 / 50%	0.8929	N/A
\$5.00 / \$12.00 / \$25.00	0.9941	N/A
\$5.00 / \$15.00 / \$20.00	0.9937	N/A
\$5.00 / \$15.00 / \$25.00	0.9933	N/A
\$5.00 / \$15.00 / \$30.00	0.9928	N/A
\$5.00 / \$15.00 / \$35.00	0.9923	N/A
\$5.00 / \$15.00 / 50%	0.8915	N/A
\$5.00 / \$20.00 / \$35.00	0.9909	N/A
\$5.00 / \$20.00 / \$40.00	0.9904	N/A
\$5.00 / \$20.00 / \$50.00	0.9895	N/A
\$5.00 / \$20.00 / \$60.00	0.9885	N/A
\$5.00 / 20% / 30%	0.7804	N/A
\$5.00 / \$25.00 / \$40.00	0.9890	N/A
\$5.00 / \$25.00 / \$50.00	0.9880	N/A
\$5.00 / \$25.00 / \$60.00	0.9871	N/A
\$5.00 / \$25.00 / \$65.00	0.9866	N/A
\$5.00 / \$25.00 / 50%	0.8886	N/A

Table 2 Benefit Plan Options
c. Three - Tier Copay Levels (continued)

Generic Formulary/Brand Formulary/ Non-Formulary OR Generic/Brand Formulary/Brand Non-Formulary	Factor	Coinsurance With Min/Max Factor
\$5.00 / \$30.00 / \$50.00	0.9866	N/A
\$5.00 / \$40.00 / \$60.00	0.9827	N/A
\$6.00 / \$11.00 / \$16.00	0.9952	N/A
\$6.00 / \$12.00 / \$25.00	0.9941	N/A
\$7.00 / \$10.00 / \$25.00	0.9947	N/A
\$7.00 / \$10.00 / 50%	0.8929	N/A
\$7.00 / \$12.00 / \$17.00	0.9949	N/A
\$7.00 / \$12.00 / \$25.00	0.9941	N/A
\$7.00 / \$15.00 / \$20.00	0.9937	N/A
\$7.00 / \$15.00 / \$25.00	0.9932	N/A
\$7.00 / \$15.00 / \$30.00	0.9928	N/A
\$7.00 / \$15.00 / \$35.00	0.9923	N/A
\$7.00 / \$15.00 / 50%	0.8914	N/A
\$7.00 / \$20.00 / \$30.00	0.9913	N/A
\$7.00 / \$20.00 / \$35.00	0.9908	N/A
\$7.00 / \$20.00 / \$40.00	0.9904	N/A
\$7.00 / \$20.00 / 50%	0.8900	N/A
\$7.00 / \$25.00 / \$40.00	0.9889	N/A
\$7.00 / \$25.00 / \$45.00	0.9885	N/A
\$7.00 / \$25.00 / \$50.00	0.9880	N/A
\$7.00 / \$30.00 / \$45.00	0.9870	N/A
\$7.00 / \$30.00 / \$50.00	0.9865	N/A
\$7.00 / \$30.00 / \$55.00	0.9859	N/A
\$7.00 / \$30.00 / 50%	0.8885	N/A
\$7.50 / \$12.00 / \$15.00	0.9950	N/A
\$7.50 / \$15.00 / \$25.00	0.9932	N/A
\$8.00 / \$13.00 / \$18.00	0.9945	N/A
\$8.00 / \$18.00 / \$35.00	0.9914	N/A
\$8.00 / \$20.00 / \$35.00	0.9908	N/A
\$8.00 / \$25.00 / \$35.00	0.9894	N/A
\$9.00 / \$10.00 / \$25.00	0.9947	N/A
\$9.00 / \$10.00 / 50%	0.8929	N/A
\$9.00 / \$15.00 / \$30.00	0.9927	N/A
\$9.00 / \$15.00 / 50%	0.8914	N/A
\$9.00 / \$20.00 / \$35.00	0.9908	N/A
\$9.00 / \$20.00 / \$40.00	0.9904	N/A
\$9.00 / \$20.00 / 50%	0.8900	N/A
\$9.00 / \$25.00 / \$40.00	0.9889	N/A
\$9.00 / \$25.00 / \$45.00	0.9884	N/A
\$9.00 / \$25.00 / \$50.00	0.9880	N/A
\$9.00 / \$30.00 / \$45.00	0.9870	N/A
\$9.00 / \$30.00 / \$50.00	0.9865	N/A
\$10.00 / \$15.00 / \$20.00	0.9937	N/A
\$10.00 / \$15.00 / \$25.00	0.9932	N/A
\$10.00 / \$15.00 / \$30.00	0.9927	N/A
\$10.00 / \$15.00 / \$35.00	0.9923	N/A
\$10.00 / \$15.00 / 50%	0.8914	N/A
\$10.00 / 15% / 30%	0.8196	N/A
\$10.00 / \$20.00 / \$30.00	0.9913	N/A
\$10.00 / \$20.00 / \$35.00	0.9908	N/A
\$10.00 / \$20.00 / \$40.00	0.9903	N/A
\$10.00 / \$20.00 / \$45.00	0.9899	N/A
\$10.00 / \$20.00 / \$50.00	0.9894	N/A
\$10.00 / \$20.00 / \$55.00	0.9889	N/A
\$10.00 / \$20.00 / 50%	0.8900	N/A
\$10.00 / \$25.00 / \$35.00	0.9894	N/A
\$10.00 / \$25.00 / \$40.00	0.9889	N/A
\$10.00 / \$25.00 / \$45.00	0.9884	N/A
\$10.00 / \$25.00 / \$50.00	0.9880	N/A
\$10.00 / \$25.00 / 50%	0.8885	N/A
\$10.00 / \$30.00 / \$40.00	0.9875	N/A
\$10.00 / \$30.00 / \$45.00	0.9870	N/A
\$10.00 / \$30.00 / \$50.00	0.9865	N/A
\$10.00 / \$30.00 / \$55.00	0.9860	N/A
\$10.00 / \$30.00 / \$60.00	0.9856	N/A
\$10.00 / \$30.00 / \$65.00	0.9851	N/A
\$10.00 / \$30.00 / \$70.00	0.9846	N/A
\$10.00 / \$30.00 / 50%	0.8871	N/A

Table 2 Benefit Plan Options
c. Three - Tier Copay Levels

Generic Formulary/Brand Formulary/ Non-Formulary OR Generic/Brand Formulary/Brand Non-Formulary	Factor	Coinsurance With Min/Max Factor
\$10.00 / \$35.00 / \$45.00	0.9855	N/A
\$10.00 / \$35.00 / \$50.00	0.9851	N/A
\$10.00 / \$35.00 / \$55.00	0.9846	N/A
\$10.00 / \$35.00 / \$60.00	0.9841	N/A
\$10.00 / \$35.00 / \$65.00	0.9837	N/A
\$10.00 / \$35.00 / \$70.00	0.9832	N/A
\$10.00 / \$35.00 / \$80.00	0.9822	N/A
\$10.00 / \$40.00 / \$60.00	0.9827	N/A
\$10.00 / \$40.00 / \$70.00	0.9817	N/A
\$10.00 / \$45.00 / \$60.00	0.9812	N/A
\$10.00 / \$50.00 / \$100.00	0.9760	N/A
\$10.00 / 20% / 30%	0.7804	N/A
\$10.00 / 20% / 35%	0.7700	N/A
\$10.00 / 30% / 40%	0.6811	N/A
\$10.00 / 30% / 45%	0.6706	N/A
\$10.00 / 30% / 50%	0.6602	N/A
\$10.00 / 40% / 50%	0.5817	N/A
\$10.00 / 50% / 50%	0.5032	N/A
\$12.00 / \$17.00 / \$22.00	0.9929	N/A
\$12.00 / \$25.00 / \$30.00	0.9898	N/A
\$12.00 / \$25.00 / \$35.00	0.9893	N/A
\$15.00 / \$20.00 / \$25.00	0.9917	N/A
\$15.00 / \$20.00 / \$30.00	0.9912	N/A
\$15.00 / \$20.00 / \$35.00	0.9908	N/A
\$15.00 / \$20.00 / \$40.00	0.9903	N/A
\$15.00 / \$20.00 / 50%	0.8899	N/A
\$15.00 / \$25.00 / \$35.00	0.9893	N/A
\$15.00 / \$25.00 / \$40.00	0.9888	N/A
\$15.00 / \$25.00 / \$45.00	0.9884	N/A
\$15.00 / \$25.00 / \$50.00	0.9879	N/A
\$15.00 / \$25.00 / \$55.00	0.9874	N/A
\$15.00 / \$25.00 / 50%	0.8885	N/A
\$15.00 / \$30.00 / \$40.00	0.9874	N/A
\$15.00 / \$30.00 / \$45.00	0.9869	N/A
\$15.00 / \$30.00 / \$50.00	0.9865	N/A
\$15.00 / \$30.00 / \$55.00	0.9860	N/A
\$15.00 / \$30.00 / \$60.00	0.9855	N/A
\$15.00 / \$30.00 / \$65.00	0.9850	N/A
\$15.00 / \$30.00 / \$70.00	0.9846	N/A
\$15.00 / \$30.00 / 50%	0.8870	N/A
\$15.00 / \$35.00 / \$50.00	0.9850	N/A
\$15.00 / \$35.00 / \$55.00	0.9845	N/A
\$15.00 / \$35.00 / \$60.00	0.9841	N/A
\$15.00 / \$35.00 / \$70.00	0.9831	N/A
\$15.00 / \$35.00 / \$75.00	0.9827	N/A
\$15.00 / \$35.00 / \$80.00	0.9822	N/A
\$15.00 / \$35.00 / 50%	0.8856	N/A
\$15.00 / \$40.00 / \$60.00	0.9826	N/A
\$15.00 / \$40.00 / \$70.00	0.9817	N/A
\$15.00 / \$40.00 / \$75.00	0.9812	N/A
\$15.00 / \$40.00 / 50%	0.8841	N/A
\$15.00 / \$45.00 / \$60.00	0.9812	N/A
\$15.00 / \$45.00 / \$65.00	0.9807	N/A
\$15.00 / \$45.00 / \$70.00	0.9802	N/A
\$15.00 / \$45.00 / \$80.00	0.9793	N/A
\$15.00 / \$50.00 / \$80.00	0.9769	N/A

Table 2 Benefit Plan Options
c. Three - Tier Copay Levels

Generic Formulary/Brand Formulary/ Non-Formulary OR Generic/Brand Formulary/Brand Non-Formulary	Factor	Coinsurance With Min/Max Factor
\$15.00 / 20% / 30%	0.7803	N/A
\$15.00 / 20% / 35%	0.7699	N/A
\$15.00 / 30% / 50%	0.6602	N/A
\$15.00 / 40% / 50%	0.5817	N/A
\$20.00 / \$25.00 / \$30.00	0.9897	N/A
\$20.00 / \$25.00 / \$40.00	0.9888	N/A
\$20.00 / \$25.00 / 50%	0.8884	N/A
\$20.00 / \$30.00 / \$45.00	0.9869	N/A
\$20.00 / \$30.00 / \$50.00	0.9864	N/A
\$20.00 / \$30.00 / \$55.00	0.9859	N/A
\$20.00 / \$30.00 / \$60.00	0.9855	N/A
\$20.00 / \$30.00 / \$70.00	0.9845	N/A
\$20.00 / \$35.00 / \$50.00	0.9850	N/A
\$20.00 / \$35.00 / \$55.00	0.9845	N/A
\$20.00 / \$35.00 / \$70.00	0.9831	N/A
\$20.00 / \$40.00 / \$60.00	0.9826	N/A
\$20.00 / \$40.00 / \$70.00	0.9816	N/A
\$20.00 / \$40.00 / \$75.00	0.9812	N/A
\$20.00 / \$40.00 / \$80.00	0.9807	N/A
\$20.00 / \$50.00 / \$70.00	0.9787	N/A
\$20.00 / \$40.00 / 50%	0.8841	N/A
\$20.00 / 30% / 50%	0.6601	N/A
\$20.00 / 40% / 50%	0.5816	N/A
\$20.00 / 50% / 50%	0.5031	N/A
\$25.00 / \$30.00 / \$50.00	0.9863	N/A
\$25.00 / \$35.00 / \$50.00	0.9849	N/A
\$25.00 / \$40.00 / \$70.00	0.9816	N/A
\$30.00 / \$40.00 / \$50.00	0.9834	N/A
\$30.00 / \$45.00 / \$60.00	0.9810	N/A
\$30.00 / \$45.00 / 50%	0.8825	N/A
\$50.00 / 50% / 50%	0.5028	N/A
10% / 20% / 30%	0.7788	N/A
10% / 20% / 35%	0.7694	N/A
20% / 20% / 40%	0.7583	N/A
20% / 20% / 50%	0.7375	N/A
20% / 30% / 50%	0.6590	N/A
30% / 30% / 50%	0.6583	N/A
30% / 40% / 50%	0.5798	N/A
40% / 50% / 50%	0.5007	N/A
\$0 / 100% / 100%	N/A	N/A
\$5 / 100% / 100%	N/A	N/A
\$10 / 100% / 100%	N/A	N/A
\$15 / 100% / 100%	N/A	N/A
\$0 / \$10 / 100%	N/A	N/A
\$0 / \$25 / 100%	N/A	N/A
\$5 / \$15 / 100%	N/A	N/A
\$10 / \$20 / 100%	N/A	N/A
\$10 / \$35 / 100%	N/A	N/A
\$15 / \$25 / 100%	N/A	N/A
\$20 / \$45 / 100%	N/A	N/A
\$25 / \$50 / 100%	N/A	N/A

Table 2 Benefit Plan Options
d. Fourth - Tier Level

Preferred & Non-Preferred as same Coinsurance/Copay	Coinsurance Cost/Util Factor	With Min/Max Factor
10%	0.9000	NA
15%	0.8500	NA
20%	0.8000	NA
25%	0.7500	NA
30%	0.7000	NA
35%	0.6500	NA
40%	0.6000	NA
45%	0.5500	NA
50%	0.5000	NA
\$10.00	0.9957	0.9987
\$20.00	0.9915	0.9774
\$25.00	0.9894	NA
\$30.00	0.9872	0.9661
\$35.00	0.9851	NA
\$40.00	0.9830	0.9548
\$45.00	0.9808	NA
\$50.00	0.9787	0.9436
\$55.00	0.9766	NA
\$60.00	0.9744	NA
\$65.00	0.9723	NA
\$70.00	0.9702	NA
\$75.00	0.9681	NA
\$80.00	0.9659	NA
\$85.00	0.9638	NA
\$90.00	0.9617	NA
\$95.00	0.9596	NA
\$100.00	0.9575	NA
\$150.00	0.9363	NA
\$200.00	0.9154	NA
\$250.00	0.8944	NA
\$300.00	0.8735	NA

Table 2 Benefit Plan Options
e. Fourth & Fifth - Tier Levels

Preferred / Non-Preferred as different Coinsurance/Copay	Coinsurance Cost/Util Factor	Coinsurance With Min/Max Factor
10% / 20%	0.8737	NA
10% / 25%	0.8605	NA
10% / 30%	0.8473	NA
10% / 35%	0.8342	NA
10% / 40%	0.8210	NA
10% / 45%	0.8079	NA
10% / 50%	0.7947	NA
15% / 25%	0.8237	NA
15% / 30%	0.8105	NA
15% / 35%	0.7973	NA
15% / 40%	0.7842	NA
15% / 45%	0.7710	NA
15% / 50%	0.7579	NA
20% / 30%	0.7737	NA
20% / 35%	0.7605	NA
20% / 40%	0.7473	NA
20% / 45%	0.7342	NA
20% / 50%	0.7210	NA
25% / 35%	0.7237	NA
25% / 40%	0.7105	NA
25% / 45%	0.6973	NA
25% / 50%	0.6842	NA
30% / 40%	0.6737	NA
30% / 45%	0.6605	NA
30% / 50%	0.6473	NA
35% / 45%	0.6237	NA
35% / 50%	0.6105	NA
40% / 50%	0.5737	NA
\$10 / \$20	0.9947	0.9860
\$10 / \$50	0.9917	0.9779
\$20 / \$30	0.9905	0.9747
\$20 / \$40	0.9894	0.9720
\$20 / \$50	0.9884	NA
\$20 / \$60	0.9874	NA
\$20 / \$70	0.9864	NA
\$20 / \$80	0.9854	NA
\$20 / \$90	0.9844	NA
\$20 / \$100	0.9833	NA
\$30 / \$50	0.9852	0.9607
\$30 / \$60	0.9842	0.9580
\$30 / \$70	0.9832	NA
\$30 / \$80	0.9821	NA
\$30 / \$90	0.9811	NA
\$30 / \$100	0.9801	NA
\$40 / \$60	0.9809	NA
\$40 / \$70	0.9799	0.9468
\$40 / \$80	0.9789	NA
\$40 / \$90	0.9779	NA
\$40 / \$100	0.9769	NA
\$50 / \$70	0.9767	NA
\$50 / \$80	0.9757	NA
\$50 / \$90	0.9746	NA
\$50 / \$100	0.9736	NA
\$60 / \$80	0.9724	NA
\$60 / \$90	0.9714	NA
\$60 / \$100	0.9704	NA
\$70 / \$90	0.9681	NA
\$70 / \$100	0.9671	NA
\$80 / \$100	0.9639	NA
\$150 / \$200	0.9313	NA
\$150 / \$250	0.9262	NA
\$150 / \$300	0.9211	NA
\$200 / \$250	0.9103	NA
\$200 / \$300	0.9052	NA
\$250 / \$300	0.8893	NA

Table 2 Benefit Plan Options
f. Custom Plans

Coinsurance/Copay	Coinsurance Cost/Util Factor	Coinsurance With Min/Max Factor
\$1.50 / \$5.00 / \$5.00 (MOD \$0)	0.9940	N/A
\$5.00 / \$10.00 / \$10.00 (MOD \$0)	0.9880	N/A
20% (MOD \$0)	0.7982	N/A
No Copay (Deductible = OOP)	0.9921	N/A

Table 3 Deductible Factor

If the plan includes a pharmacy deductible, select the appropriate Deductible Factor from Table 3a or 3b.

If the pharmacy deductible is integrated with medical, then calculate the Deductible Factor according to the Integrated Pharmacy Deductible Factor Calculation table below.

Integrated Pharmacy Deductible Factor Calculation Table

Family Deductible Limit	Adjustment Factor	Table Reference
1x Family Limit	1.0000	Table 3a1
2x Family Limit	1.0220	Table 3a1
2.5x Family Limit	1.0125	Table 3a1
3x Family Limit	1.0030	Table 3a1
No Family Limit	1.0000	Table 3a1
2 Individuals	1.0180	Table 3a1
3 Individuals	1.0020	Table 3a1

Integrated deductibles are not available for medical deductibles below \$500.

Multiply the Adjustment Factor by the appropriate value from the table designated in the Table Reference column. Enter the indicated table based on the deductible amount.

Table 3 Deductible Factor

a. Per Individual - Non-Integrated

Benefit Option	No Family Limit	2x Family Limit	2.5x Family Limit	3x Family Limit
None	1.0000	1.0000	1.0000	1.0000
\$50	0.9500	0.9709	0.9619	0.9529
\$100	0.9100	0.9300	0.9214	0.9127
\$150	0.8700	0.8891	0.8809	0.8726
\$200	0.8300	0.8483	0.8404	0.8325
\$250	0.8000	0.8176	0.8100	0.8024
\$300	0.7700	0.7869	0.7796	0.7723
\$400	0.7134	0.7291	0.7223	0.7155
\$500	0.6715	0.6863	0.6799	0.6735
\$1,000	0.4900	0.5008	0.4961	0.4915

Table 3 Deductible Factor

a1. Per Individual - Integrated

Deductible	Factor
\$0	N/A
\$50	N/A
\$100	N/A
\$150	N/A
\$200	N/A
\$250	N/A
\$300	N/A
\$350	N/A
\$400	N/A
\$450	N/A
\$500	0.9560
\$550	0.9466
\$600	0.9372
\$650	0.9278
\$700	0.9184
\$750	0.9090
\$800	0.9022
\$850	0.8954
\$900	0.8886
\$950	0.8818
\$1,000	0.8750
\$1,100	0.8650
\$1,250	0.8490
\$1,500	0.8220
\$2,000	0.7810
\$2,500	0.7370
\$3,000	0.7010
\$3,500	0.6740
\$4,000	0.6470
\$4,500	0.6190
\$5,000	0.5910
\$5,500	0.5710
\$6,000	0.5510
\$6,500	0.5310
\$7,000	0.5110
\$7,500	0.4910
\$8,000	0.4710
\$8,500	0.4510
\$9,000	0.4310
\$9,500	0.4110
\$10,000	0.3910
\$15,000	0.3710

Table 3 Deductible Factor

b1. Per Family - Integrated

Deductible	Factor
\$0	N/A
\$50	N/A
\$100	N/A
\$150	N/A
\$200	N/A
\$250	N/A
\$300	N/A
\$350	N/A
\$400	N/A
\$450	N/A
\$500	1.0000
\$550	0.9982
\$600	0.9964
\$650	0.9946
\$700	0.9928
\$750	0.9910
\$800	0.9888
\$850	0.9866
\$900	0.9844
\$950	0.9822
\$1,000	0.9800
\$1,100	0.9770
\$1,250	0.9650
\$1,500	0.9360
\$2,000	0.9000
\$2,500	0.8560
\$3,000	0.8180
\$3,500	0.7870
\$4,000	0.7550
\$4,500	0.7220
\$5,000	0.6890
\$5,500	0.6590
\$6,000	0.6390
\$6,500	0.6190
\$7,000	0.5990
\$7,500	0.5790
\$8,000	0.5590
\$8,500	0.5390
\$9,000	0.5190
\$9,500	0.4990
\$10,000	0.4790
\$15,000	0.4590

Table 3 Deductible Factor

c. Accumulating Period Factor

Benefit Option	Factor
Per Calendar Year	1.0000
Per Contract Year	1.0000

Table 4 Maximum Annual Benefit Factor

a. Per Individual

Benefit Option	Factor
Unlimited	1.0000
\$500	0.5808
\$1,000	0.7179
\$1,500	0.7973
\$2,000	0.8478
\$2,500	0.8791
\$3,000	0.8995
\$3,500	0.9200
\$4,000	0.9308
\$5,000	0.9525
\$7,500	0.9669
\$10,000	0.9891

Table 4 Maximum Annual Benefit Factor

b. Per Individual/Family

Benefit Option	Factor
\$500 / \$1000	0.5569
\$1000 / \$2000	0.7090
\$1500 / \$3000	0.7992
\$2000 / \$4000	0.8422
\$2500 / \$5000	0.8748
\$3000 / \$6000	0.8960
\$3500 / \$7000	0.9173
\$4000 / \$8000	0.9277
\$5000 / \$10000	0.9500
\$7500 / \$15000	0.9649
\$10000 / \$20000	0.9876

Table 5 Out-of-Pocket Maximum

a. Per Person

Benefit Option	No Family Limit	1x Family Limit	2x Family Limit	2.5x Family Limit	3x Family Limit
None	1.0000	1.0000	1.0000	1.0000	1.0000
\$500	1.0513	1.0608	1.0566	1.0553	1.0540
\$1,000	1.0181	1.0273	1.0232	1.0220	1.0207
\$1,500	1.0126	1.0217	1.0176	1.0164	1.0151
\$2,000	1.0100	1.0191	1.0151	1.0138	1.0126
\$2,500	1.0088	1.0179	1.0139	1.0126	1.0113
\$3,000	1.0077	1.0168	1.0128	1.0115	1.0103
\$3,500	1.0067	1.0157	1.0117	1.0104	1.0092
\$4,000	1.0057	1.0147	1.0107	1.0094	1.0082
\$5,000	1.0046	1.0136	1.0096	1.0084	1.0071
\$7,500	1.0032	1.0123	1.0082	1.0070	1.0057
\$10,000	1.0019	1.0109	1.0069	1.0056	1.0044

Table 6 Custom Product Factor

Benefit	Factor
No Custom Benefits	1.0000

Table 7 Step Therapy/Pre-certification Adjustment Factor

Benefit Option	Factor
Basic Precertification Only	1.0000
Add Expanded Precertification and Step Therapy	0.9900
Add Step Therapy Only	0.9950
Add Expanded Precertification Only	0.9950
Add Expanded Precertification after 90 days Only	0.9983
Add Step Therapy after 90 days Only	0.9983
Add Expanded Precertification after 90 days and Step Therapy after 90 days	0.9967
Add Step Therapy and Expanded Precertification after 90 days	0.9933
Add Expanded Precertification and Step Therapy after 90 days	0.9933
Full Pharmacy Step-Therapy and Precertification	0.9867
Pharmacy Benefit Excluded	1.0000

Table 8 Chronic &/or Preventative Drug Deductible Waiver Adj. Factor

	Health Reimbursement Account Products		
	Waive For Prev. & Chronic	Waive For Chronic Only	Waive For Prev. Only
Medical Deductible	Factor	Factor	Factor
<= \$1,500	1.0800	1.0800	1.0800
\$1,501 <= \$2,500	1.0800	1.0800	1.0800
> \$2,500	1.0800	1.0800	1.0800

	All Other Products		
	Waive For Prev. & Chronic	Waive For Chronic Only	Waive For Prev. Only
Medical Deductible	Factor	Factor	Factor
<= \$1,500	1.2000	1.2000	1.2000
\$1,501 <= \$2,500	1.2000	1.2000	1.2000
> \$2,500	1.2000	1.2000	1.2000

Table 9 Infertility Drug Coverage Adjustment Factor

Option	Factor
No Infertility Drug Coverage	1.0000
Oral Infertility Drugs Only	1.0020
Injectable Infertility Drugs Only	1.0050
Oral and Injectable Infertility Drugs	1.0060

Table 10 Per Script Copay Maximums Factor (to be applied to Self-Injectable drug claims only)

Plan Design (Generic Preferred & Non-Preferred / Brand Preferred / Brand Non-Preferred)	Per Script Copay Maximum						
	\$100.00 Cost / Util Factor	\$150.00 Cost / Util Factor	\$200.00 Cost / Util Factor	\$250.00 Cost / Util Factor	\$300.00 Cost / Util Factor	\$350.00 Cost / Util Factor	\$400.00 Cost / Util Factor
10%	1.0706	1.0434	1.0286	1.0213	1.0162	1.0135	1.0114
20%	1.2257	1.1877	1.1535	1.1213	1.0926	1.0745	1.0598
30%	1.4280	1.3805	1.3353	1.2930	1.2540	1.2168	1.1813
40%	1.6986	1.6389	1.5818	1.5272	1.4751	1.4268	1.3810
50%	2.0778	2.0013	1.9281	1.8576	1.7899	1.7250	1.6633
60%	2.6468	2.5457	2.4482	2.3544	2.2639	2.1765	2.0926
10% / 20%	1.2778	1.2373	1.2003	1.1655	1.1348	1.1145	1.0973
20% / 20%	1.3480	1.3043	1.2643	1.2265	1.1926	1.1694	1.1499
20% / 20% / 50%	1.4464	1.3985	1.3544	1.3129	1.2751	1.2483	1.2248
20% / 30%	1.5963	1.5415	1.4893	1.4403	1.3943	1.3505	1.3088
30% / 30%	1.5965	1.5416	1.4894	1.4403	1.3943	1.3505	1.3089
30% / 40%	1.7966	1.7328	1.6718	1.6134	1.5575	1.5056	1.4559
40% / 50%	2.0771	2.0009	1.9277	1.8574	1.7897	1.7249	1.6632
For any \$ copay in the first or second tier and the following coinsurances in the remaining tiers							
\$ / 15% / 30%	1.2201	1.1836	1.1550	1.1307	1.1097	1.0952	1.0826
\$ / 20% / 30%	1.2778	1.2372	1.2003	1.1655	1.1347	1.1145	1.0973
\$ / 30% / 35%	1.3128	1.2707	1.2322	1.1960	1.1637	1.1419	1.1226
\$ / 30% / 40%	1.4978	1.4472	1.3991	1.3539	1.3117	1.2715	1.2338
\$ / 30% / 50%	1.5962	1.5414	1.4892	1.4402	1.3942	1.3504	1.3087
\$ / 40% / 50%	1.7962	1.7326	1.6716	1.6133	1.5574	1.5054	1.4558
\$ / 50% / 50%	2.0783	2.0004	1.9274	1.8571	1.7895	1.7247	1.6630
\$ / \$ / 50%	1.2819	1.2643	1.2479	1.2326	1.2180	1.2044	1.1915
4th Tier							
10%	1.0706	1.0434	1.0286	1.0213	1.0162	1.0135	1.0114
15%	1.1481	1.1155	1.0910	1.0713	1.0544	1.0440	1.0356
20%	1.2257	1.1877	1.1535	1.1213	1.0926	1.0745	1.0598
25%	1.3259	1.2841	1.2444	1.2072	1.1733	1.1456	1.1226
30%	1.4280	1.3805	1.3353	1.2930	1.2540	1.2168	1.1813
35%	1.5633	1.5097	1.4585	1.4101	1.3646	1.3218	1.2812
40%	1.6986	1.6389	1.5818	1.5272	1.4751	1.4268	1.3810
45%	1.8882	1.8201	1.7549	1.6924	1.6325	1.5759	1.5222
50%	2.0778	2.0013	1.9281	1.8576	1.7899	1.7250	1.6633
60%	2.6468	2.5457	2.4482	2.3544	2.2639	2.1765	2.0926
4th & 5th Tier (Generic & Brand Preferred) / (Brand Non-Preferred)							
10% / 20%	1.1102	1.0803	1.0629	1.0517	1.0424	1.0358	1.0304
10% / 25%	1.1363	1.1051	1.0863	1.0738	1.0635	1.0558	1.0492
10% / 30%	1.1624	1.1299	1.1097	1.0960	1.0846	1.0759	1.0679
10% / 35%	1.1974	1.1634	1.1417	1.1264	1.1135	1.1033	1.0942
10% / 40%	1.2325	1.1969	1.1737	1.1569	1.1424	1.1307	1.1205
10% / 45%	1.2817	1.2440	1.2188	1.2001	1.1837	1.1702	1.1580
10% / 50%	1.3309	1.2911	1.2638	1.2432	1.2249	1.2096	1.1954
15% / 25%	1.1940	1.1588	1.1316	1.1086	1.0886	1.0752	1.0639
15% / 30%	1.2202	1.1836	1.1550	1.1308	1.1097	1.0952	1.0826
15% / 35%	1.2552	1.2171	1.1870	1.1612	1.1386	1.1226	1.1089
15% / 40%	1.2903	1.2506	1.2190	1.1917	1.1675	1.1501	1.1352
15% / 45%	1.3395	1.2977	1.2641	1.2349	1.2088	1.1895	1.1727
15% / 50%	1.3886	1.3448	1.3091	1.2780	1.2500	1.2289	1.2101
20% / 30%	1.2779	1.2373	1.2003	1.1656	1.1348	1.1146	1.0973
20% / 35%	1.3130	1.2708	1.2323	1.1960	1.1637	1.1420	1.1236
20% / 40%	1.3480	1.3043	1.2643	1.2265	1.1926	1.1694	1.1499
20% / 45%	1.3972	1.3514	1.3094	1.2697	1.2339	1.2089	1.1874
20% / 50%	1.4464	1.3985	1.3544	1.3129	1.2751	1.2483	1.2248
25% / 35%	1.3880	1.3424	1.2998	1.2598	1.2233	1.1931	1.1656
25% / 40%	1.4231	1.3759	1.3318	1.2903	1.2522	1.2206	1.1919
25% / 45%	1.4723	1.4229	1.3768	1.3334	1.2935	1.2600	1.2294
25% / 50%	1.5215	1.4700	1.4219	1.3766	1.3347	1.2994	1.2669
30% / 40%	1.4982	1.4474	1.3992	1.3540	1.3118	1.2717	1.2339
30% / 45%	1.5474	1.4945	1.4443	1.3972	1.3531	1.3111	1.2714
30% / 50%	1.5965	1.5416	1.4894	1.4403	1.3943	1.3505	1.3089
35% / 45%	1.6476	1.5902	1.5356	1.4838	1.4347	1.3886	1.3449
35% / 50%	1.6968	1.6373	1.5807	1.5269	1.4759	1.4281	1.3824
40% / 50%	1.7970	1.7331	1.6720	1.6135	1.5576	1.5056	1.4560

Table 10 Per Script Copay Maximums Factor (to be applied to Self-Injectable drug claims only) continued

Plan Design (Generic Preferred & Non-Preferred / Brand Preferred / Brand Non-Preferred)	Per Script Copay Maximum						
	\$450 Cost / Util Factor	\$500 Cost / Util Factor	\$550 Cost / Util Factor	\$600 Cost / Util Factor	\$650 Cost / Util Factor	\$700 Cost / Util Factor	\$750 Cost / Util Factor
10%	1.0097	1.0085	1.0075	1.0067	1.0062	1.0058	1.0055
20%	1.0504	1.0438	1.0377	1.0326	1.0299	1.0276	1.0256
30%	1.1503	1.1294	1.1105	1.0949	1.0852	1.0783	1.0722
40%	1.3370	1.2952	1.2549	1.2206	1.2001	1.1806	1.1627
50%	1.6057	1.5504	1.4971	1.4462	1.4053	1.3648	1.3308
60%	2.0117	1.9357	1.8634	1.7938	1.7414	1.6897	1.6386
10% / 20% / 30%	1.0843	1.0737	1.0639	1.0558	1.0513	1.0481	1.0454
20% / 20% / 40%	1.1347	1.1217	1.1094	1.0985	1.0913	1.0849	1.0789
20% / 20% / 50%	1.2062	1.1903	1.1751	1.1614	1.1526	1.1443	1.1363
20% / 30% / 50%	1.2721	1.2459	1.2216	1.2004	1.1864	1.1744	1.1630
30% / 30% / 50%	1.2721	1.2460	1.2217	1.2004	1.1864	1.1744	1.1631
30% / 40% / 50%	1.4085	1.3637	1.3206	1.2834	1.2613	1.2400	1.2201
40% / 50% / 50%	1.6056	1.5503	1.4970	1.4461	1.4052	1.3648	1.3308
For any \$ copay in the first or second tier and the following coinsurances in the remaining tiers							
\$ / 15% / 30%	1.0725	1.0639	1.0562	1.0496	1.0459	1.0433	1.0412
\$ / 20% / 30%	1.0843	1.0737	1.0639	1.0558	1.0513	1.0481	1.0454
\$ / 20% / 35%	1.1095	1.0977	1.0866	1.0771	1.0713	1.0664	1.0621
\$ / 30% / 40%	1.2005	1.1773	1.1559	1.1375	1.1251	1.1149	1.1055
\$ / 30% / 50%	1.2720	1.2459	1.2216	1.2003	1.1863	1.1743	1.1630
\$ / 40% / 50%	1.4084	1.3635	1.3205	1.2833	1.2612	1.2399	1.2200
\$ / 50% / 50%	1.6054	1.5501	1.4968	1.4459	1.4051	1.3646	1.3306
\$ / \$ / 50%	1.1795	1.1684	1.1577	1.1475	1.1405	1.1336	1.1269
4th Tier							
10%	1.0097	1.0085	1.0075	1.0067	1.0062	1.0058	1.0055
15%	1.0301	1.0262	1.0226	1.0197	1.0180	1.0167	1.0156
20%	1.0504	1.0438	1.0377	1.0326	1.0299	1.0276	1.0256
25%	1.1003	1.0866	1.0741	1.0638	1.0575	1.0529	1.0489
30%	1.1503	1.1294	1.1105	1.0949	1.0852	1.0783	1.0722
35%	1.2437	1.2123	1.1827	1.1577	1.1427	1.1294	1.1174
40%	1.3370	1.2952	1.2549	1.2206	1.2001	1.1806	1.1627
45%	1.4714	1.4228	1.3760	1.3334	1.3027	1.2727	1.2468
50%	1.6057	1.5504	1.4971	1.4462	1.4053	1.3648	1.3308
60%	2.0117	1.9357	1.8634	1.7938	1.7414	1.6897	1.6386
4th & 5th Tier (Generic & Brand Preferred) / (Brand Non-Preferred)							
10% / 20%	1.0266	1.0242	1.0221	1.0203	1.0190	1.0180	1.0172
10% / 25%	1.0436	1.0392	1.0353	1.0319	1.0288	1.0263	1.0271
10% / 30%	1.0606	1.0542	1.0484	1.0435	1.0405	1.0386	1.0370
10% / 35%	1.0858	1.0762	1.0712	1.0648	1.0605	1.0569	1.0537
10% / 40%	1.1110	1.1022	1.0939	1.0861	1.0805	1.0753	1.0704
10% / 45%	1.1467	1.1365	1.1267	1.1175	1.1111	1.1050	1.0992
10% / 50%	1.1824	1.1707	1.1596	1.1490	1.1417	1.1347	1.1279
15% / 25%	1.0555	1.0490	1.0430	1.0381	1.0352	1.0331	1.0313
15% / 30%	1.0725	1.0639	1.0562	1.0497	1.0459	1.0433	1.0412
15% / 35%	1.0977	1.0880	1.0789	1.0710	1.0659	1.0617	1.0580
15% / 40%	1.1228	1.1120	1.1017	1.0923	1.0859	1.0800	1.0747
15% / 45%	1.1586	1.1462	1.1345	1.1237	1.1165	1.1098	1.1034
15% / 50%	1.1943	1.1805	1.1674	1.1552	1.1472	1.1395	1.1321
20% / 30%	1.0844	1.0737	1.0640	1.0558	1.0513	1.0481	1.0455
20% / 35%	1.1095	1.0977	1.0867	1.0772	1.0713	1.0665	1.0622
20% / 40%	1.1347	1.1217	1.1094	1.0985	1.0913	1.0849	1.0789
20% / 45%	1.1705	1.1560	1.1423	1.1299	1.1220	1.1145	1.1076
20% / 50%	1.2062	1.1903	1.1751	1.1614	1.1526	1.1443	1.1363
25% / 35%	1.1425	1.1256	1.1100	1.0967	1.0883	1.0815	1.0755
25% / 40%	1.1677	1.1496	1.1327	1.1180	1.1083	1.0999	1.0922
25% / 45%	1.2034	1.1839	1.1666	1.1495	1.1389	1.1296	1.1210
25% / 50%	1.2392	1.2181	1.1984	1.1809	1.1695	1.1593	1.1497
30% / 40%	1.2006	1.1774	1.1560	1.1376	1.1252	1.1149	1.1056
30% / 45%	1.2364	1.2117	1.1898	1.1690	1.1558	1.1447	1.1343
30% / 50%	1.2721	1.2460	1.2217	1.2004	1.1864	1.1744	1.1631
35% / 45%	1.3046	1.2706	1.2383	1.2105	1.1933	1.1775	1.1629
35% / 50%	1.3403	1.3048	1.2712	1.2419	1.2239	1.2072	1.1916
40% / 50%	1.4085	1.3637	1.3206	1.2834	1.2614	1.2401	1.2201

Table 11 Incentivized MOD Factor

Incentivized MOD factors								
2 X MOD								
2 fills allowed at retail				3 fills allowed at retail				
50% of Drug Cost	75% of Drug Cost	2x Retail Copay	3x Retail Copay	50% of Drug Cost	75% of Drug Cost	2x Retail Copay	3x Retail Copay	
\$5/\$20/\$60	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9974	0.9974
\$5/\$25/\$60	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9983	0.9983
\$5/\$25/\$65	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9990	0.9990
\$10/\$25/\$50	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9994	0.9994
\$10/\$30/\$60	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$10/\$30/\$70	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
\$15/\$35/\$60	N/A	N/A	N/A	N/A	1.0000	1.0000	1.0000	1.0000
\$15/\$35/\$75	N/A	N/A	N/A	N/A	N/A	1.0000	1.0000	1.0000
\$15/\$35/\$80	N/A	N/A	N/A	N/A	N/A	1.0000	1.0000	1.0000
\$15/\$40/\$75	N/A	N/A	N/A	N/A	N/A	1.0000	1.0000	1.0000
\$20/\$40/\$70	N/A	N/A	N/A	N/A	N/A	1.0000	1.0000	1.0000

Incentivized MOD factors								
2.5 X MOD								
2 fills allowed at retail				3 fills allowed at retail				
50% of Drug Cost	75% of Drug Cost	2x Retail Copay	3x Retail Copay	50% of Drug Cost	75% of Drug Cost	2x Retail Copay	3x Retail Copay	
\$5/\$20/\$60	1.0000	0.9959	0.9905	0.9905	0.9982	0.9940	0.9899	0.9899
\$5/\$25/\$60	1.0000	0.9965	0.9910	0.9910	0.9987	0.9944	0.9902	0.9902
\$5/\$25/\$65	1.0000	0.9965	0.9914	0.9914	1.0000	0.9958	0.9904	0.9904
\$10/\$25/\$50	1.0000	0.9955	0.9915	0.9915	0.9942	0.9926	0.9905	0.9905
\$10/\$30/\$60	1.0000	1.0000	0.9928	0.9928	0.9983	0.9969	0.9913	0.9913
\$10/\$30/\$70	1.0000	1.0000	0.9936	0.9936	1.0000	1.0000	0.9919	0.9919
\$15/\$35/\$60	N/A	1.0000	0.9949	0.9949	1.0000	0.9972	0.9927	0.9927
\$15/\$35/\$75	N/A	1.0000	0.9964	0.9964	1.0000	1.0000	0.9937	0.9937
\$15/\$35/\$80	N/A	1.0000	0.9969	0.9969	1.0000	1.0000	0.9941	0.9941
\$15/\$40/\$75	N/A	1.0000	0.9971	0.9971	1.0000	1.0000	0.9942	0.9942
\$20/\$40/\$70	N/A	1.0000	0.9960	0.9960	1.0000	0.9999	0.9929	0.9929

Table 13 Trend Factor

Effective Date	Trend Factor
07/01/2012	1.000
10/01/2012	1.016
01/01/2013	1.032
04/01/2013	1.048

Section II.

Table 15 Industry Factor

SIC Range		
From	To	Factor
111	119	0.9800
131	139	0.9800
161	161	0.9800
171	179	0.9800
181	182	0.9800
191	191	0.9800
211	291	1.0700
711	722	0.9800
723	723	0.9800
724	724	0.9800
741	742	0.9800
751	752	0.9800
761	762	0.9800
781	782	1.0000
782	783	0.9800
811	851	1.0300
912	919	1.1000
921	921	1.0000
971	971	1.0300
1011	1031	1.1500
1041	1044	1.1500
1061	1081	1.1500
1094	1099	1.1500
1221	1222	1.1500
1231	1231	1.1500
1241	1241	1.1500
1311	1321	1.0000
1381	1389	1.0000
1411	1429	1.0300
1442	1446	1.0300
1455	1459	1.0300
1474	1479	1.0300
1481	1499	1.0300
1521	1522	1.0400
1531	1531	1.0900
1541	1541	1.0200
1542	1542	1.0000
1611	1611	1.0300
1622	1629	1.0300
1711	1711	1.0100
1721	1721	1.0100
1731	1731	1.0100
1741	1741	1.0100
1742	1742	1.0100
1743	1743	1.0100
1751	1752	1.0100
1761	1761	1.0100
1771	1771	1.0100
1781	1781	1.0100
1791	1791	1.0100
1793	1793	1.0100
1794	1794	1.0100
1795	1795	1.0100
1796	1796	1.0100
1799	1799	1.0100
2011	2015	1.0000
2021	2035	1.0000
2037	2048	0.9800
2051	2052	0.9800
2053	2053	0.9800
2061	2063	0.9800
2064	2068	0.9800
2074	2079	0.9800
2082	2087	0.9800
2091	2091	0.9800
2092	2092	0.9800
2095	2095	0.9800
2096	2096	0.9800
2097	2097	0.9800
2098	2098	0.9800
2099	2099	0.9800
2111	2141	1.0000
2211	2211	1.0000
2221	2221	1.0000
2231	2231	1.0000
2241	2241	1.0000
2251	2259	1.0000
2261	2269	1.0000
2273	2273	1.0000
2281	2284	1.0000
2295	2299	1.0000
2311	2329	0.9800
2331	2342	0.9800
2353	2353	0.9800
2361	2369	0.9800
2371	2399	1.0000
2411	2411	1.0000
2421	2429	1.0000

SIC Range		
From	To	Factor
2431	2431	1.0300
2434	2434	0.9700
2435	2435	0.9700
2436	2436	0.9700
2439	2439	0.9700
2441	2449	0.9700
2451	2452	0.9700
2491	2499	0.9700
2511	2519	0.9700
2521	2522	0.9700
2531	2531	0.9700
2541	2542	0.9700
2591	2599	0.9700
2611	2611	1.0300
2621	2621	1.0300
2631	2631	1.0300
2652	2657	1.0300
2671	2679	1.0300
2711	2711	1.0000
2721	2789	1.0000
2791	2796	1.0000
2812	2819	1.0000
2821	2824	1.0000
2833	2834	1.0400
2835	2836	1.0000
2841	2844	0.9800
2851	2851	0.9800
2861	2869	0.9800
2873	2879	0.9800
2891	2891	0.9500
2892	2892	0.9500
2893	2895	0.9500
2899	2899	0.9500
2911	2952	1.0300
2992	2999	1.0300
3011	3011	0.9800
3021	3069	0.9800
3081	3089	0.9600
3111	3111	1.0000
3131	3149	1.0000
3151	3199	1.0000
3211	3211	1.0200
3221	3231	1.0200
3241	3241	1.0200
3251	3259	1.0200
3261	3269	1.0200
3271	3275	1.0200
3281	3281	1.0200
3291	3291	1.0200
3292	3292	1.0200
3295	3299	1.0200
3312	3317	1.0400
3321	3325	1.0400
3331	3339	1.0400
3341	3341	1.0400
3351	3357	1.0400
3363	3369	1.0400
3398	3399	1.0400
3411	3412	0.9400
3421	3429	0.9400
3431	3433	0.9400
3441	3441	0.9400
3442	3442	1.0000
3443	3443	0.9800
3444	3444	0.9800
3446	3446	0.9800
3448	3448	0.9800
3449	3449	0.9800
3451	3452	0.9800
3462	3469	0.9800
3471	3479	0.9800
3482	3483	0.9800
3484	3484	0.9800
3489	3489	0.9800
3491	3499	0.9700
3511	3519	0.9700
3523	3524	0.9700
3531	3537	0.9800
3541	3549	0.9500
3552	3569	0.9500
3571	3579	0.9500
3581	3589	0.9500
3592	3599	0.9500
3612	3613	0.9900
3621	3648	0.9900
3651	3652	0.9900
3661	3669	0.9900

SIC Range		
From	To	Factor
3671	3679	0.9900
3691	3699	0.9900
3711	3716	1.0000
3721	3728	0.9500
3731	3731	0.9500
3732	3732	0.9500
3743	3743	0.9500
3751	3751	0.9500
3761	3769	0.9500
3792	3792	0.9500
3795	3795	0.9500
3799	3799	0.9500
3812	3812	0.9400
3821	3829	1.0100
3841	3845	1.0100
3851	3851	1.0100
3861	3861	0.9400
3873	3873	0.9400
3911	3915	0.9400
3931	3931	1.0000
3942	3949	1.0000
3951	3955	0.9700
3961	3965	0.9700
3991	3999	0.9700
4011	4013	1.0200
4111	4119	1.0600
4121	4121	1.1200
4131	4131	1.0600
4141	4142	1.0600
4151	4151	1.0300
4173	4173	1.0400
4212	4212	1.0200
4213	4214	1.0200
4215	4215	1.0200
4221	4221	1.0200
4222	4222	1.0200
4225	4225	1.0200
4226	4226	1.0200
4231	4231	1.0200
4311	4311	1.0000
4412	4412	1.0200
4424	4424	1.0200
4432	4432	1.0200
4449	4449	1.0200
4481	4489	1.0200
4491	4499	1.0200
4512	4513	0.9500
4522	4522	0.9500
4581	4581	0.9500
4612	4619	1.0500
4724	4729	1.0800
4731	4731	0.9800
4741	4789	0.9800
4812	4813	1.0000
4822	4899	1.0200
4911	4911	0.9700
4922	4925	1.0000
4931	4939	0.9500
4941	4941	0.9500
4952	4959	0.9500
4961	4961	0.9500
4971	4971	0.9500
5012	5015	1.0000
5021	5021	1.0000
5023	5023	1.0000
5031	5039	1.0400
5043	5049	1.0200
5051	5052	1.0200
5063	5064	1.0200
5065	5065	1.0200
5072	5078	1.0000
5082	5087	1.0000
5088	5088	1.0000
5091	5092	1.0000
5093	5093	1.1200
5094	5099	0.9400
5111	5113	1.0000
5122	5122	0.9800
5131	5139	1.0200
5141	5149	0.9800
5153	5153	0.9800
5154	5159	0.9800
5162	5169	0.9800
5171	5172	0.9800
5181	5182	0.9800
5191	5199	1.0200
5211	5211	1.0300

Table 15 Industry Factor (continued)

SIC Range		
From	To	Factor
5231	5231	1.0300
5251	5261	1.0300
5271	5271	1.0300
5311	5399	0.9700
5411	5411	1.0000
5421	5421	1.0000
5431	5431	1.0000
5441	5441	1.0000
5451	5451	1.0000
5461	5461	1.0000
5499	5499	1.0000
5511	5511	1.1000
5521	5521	1.1000
5531	5531	1.1000
5541	5541	1.1000
5551	5551	1.1200
5561	5561	1.1200
5571	5571	1.1200
5599	5599	1.1200
5611	5651	0.9600
5661	5661	0.9600
5699	5699	0.9600
5712	5719	1.0200
5722	5722	1.0400
5731	5736	0.9700
5812	5812	1.0000
5813	5813	1.0500
5912	5912	0.9700
5921	5921	1.0600
5932	5932	1.0000
5941	5949	0.9700
5961	5963	1.0500
5983	5989	1.0500
5992	5992	1.0000
5993	5999	1.0000
6011	6149	1.0000
6153	6163	1.0300
6211	6289	1.0000
6311	6399	1.0300
6411	6411	1.0300
6512	6519	1.0300
6531	6531	1.0300
6541	6553	1.0300
6712	6799	0.9700
7011	7041	0.9800
7211	7219	0.9900
7221	7221	1.0000
7231	7241	1.0500
7251	7251	1.0300
7261	7261	1.0500
7291	7299	1.0300
7311	7311	0.9800
7312	7319	0.9800
7322	7331	1.0300
7334	7334	0.9600
7335	7336	0.9600
7338	7338	0.9600
7342	7349	0.9800
7352	7352	1.0000
7353	7359	1.0000
7361	7363	1.0300
7371	7379	0.9700
7381	7381	0.9700
7382	7382	1.0000
7383	7383	1.0400
7384	7384	1.0400
7389	7389	1.0000
7513	7519	1.0300
7521	7521	1.0300
7532	7539	1.0100
7542	7549	1.0900
7622	7629	1.0000
7631	7641	1.0000
7692	7692	1.0200
7694	7699	1.0200
7812	7833	1.0600
7841	7841	1.0500
7911	7911	1.0900
7922	7929	1.0900
7933	7933	1.0500
7941	7948	1.0500
7991	7996	1.0500
7997	7999	0.9800
8011	8011	1.0800
8021	8021	1.0400
8031	8041	1.0800
8042	8042	1.0400
8043	8049	1.0800
8051	8059	1.0600
8061	8069	1.1200
8071	8071	1.0800

SIC Range		
From	To	Factor
8072	8072	1.0800
8082	8099	1.0600
8111	8111	1.0700
8211	8211	0.9800
8221	8222	0.9800
8231	8231	0.9800
8243	8244	0.9800
8249	8249	0.9800
8299	8299	0.9800
8322	8322	1.0300
8331	8331	1.0300
8351	8351	1.0300
8361	8361	1.0200
8399	8399	1.0200
8412	8422	0.9600
8611	8611	1.0300
8621	8651	1.0300
8661	8661	1.0000
8699	8699	1.0000
8711	8713	1.0000
8721	8721	1.0000
8731	8732	0.9800
8733	8733	0.9800
8734	8734	0.9800
8741	8748	1.0100
8811	8811	1.0500
8999	8999	1.0000
9111	9131	1.0300
9199	9199	1.0300
9211	9211	1.0100
9221	9221	1.1000
9222	9222	1.1000
9223	9223	1.1000
9224	9224	1.1000
9229	9229	1.1000
9311	9311	1.1000
9411	9451	1.0800
9511	9532	1.0300
9611	9661	1.0200
9711	9711	1.0600
9721	9721	1.1000
9999	9999	1.0500

Table 16 Rating Factor

Rating Area	Factor
All Areas	1.000

Table 17a. New Business Subscriber Based Age/Gender Factor

Age Band	Two-Tier Factors			
	Male		Female	
	Single	Family	Single	Family
Under 25	0.2504	0.3069	0.4612	0.3453
025 - 029	0.3452	0.3953	0.6471	0.4612
030 - 034	0.4884	0.5823	0.7496	0.5897
035 - 039	0.7700	0.8136	0.8507	0.7677
040 - 044	1.1281	1.0705	1.0142	0.9831
045 - 049	1.3070	1.3744	1.2159	1.2045
050 - 054	1.5064	1.6630	1.4578	1.5363
055 - 059	1.7641	1.8961	1.7826	1.8637
060 - 064	2.0418	2.2136	2.1875	2.2964
065+	2.5600	2.8078	2.5191	2.7302

Table 17b. Renewal Member Based Age/Gender Factor

Age Band	Male	Female
000 - 001	0.3650	0.3651
002 - 004	0.3650	0.3651
005 - 009	0.3650	0.3651
010 - 014	0.3650	0.3651
015 - 019	0.3650	0.3651
020 - 024	0.4131	0.5679
025 - 029	0.4448	0.6583
030 - 034	0.5710	0.7840
035 - 039	0.8210	0.9473
040 - 044	1.1482	1.1893
045 - 049	1.4515	1.4892
050 - 054	1.8807	1.8823
055 - 059	2.3363	2.3398
060 - 064	2.7795	2.8559
065+	3.4387	3.2993

Age Band	Three-Tier Factors					
	Male			Female		
	Single	2-Party	Family	Single	2-Party	Family
Under 25	0.2504	0.2484	0.4279	0.4612	0.2858	0.5657
025 - 029	0.3452	0.3775	0.4158	0.6471	0.4900	0.4489
030 - 034	0.4884	0.5595	0.5735	0.7496	0.6135	0.5686
035 - 039	0.7700	0.7773	0.7830	0.8507	0.7474	0.7517
040 - 044	1.1281	1.0454	1.0214	1.0142	1.0227	0.9380
045 - 049	1.3070	1.3400	1.3218	1.2159	1.1837	1.2034
050 - 054	1.5064	1.7223	1.5983	1.4578	1.5990	1.5265
055 - 059	1.7641	2.0456	1.8092	1.7826	2.0065	1.8327
060 - 064	2.0418	2.4112	2.1144	2.1875	2.5215	2.2708
065+	2.5600	3.0851	2.6876	2.5191	2.9759	3.1021

Age Band	Four-Tier Factors							
	Male				Female			
	Single	EE + Sp	EE + Ch(ren)	Family	Single	EE + Sp	EE + Ch(ren)	Family
Under 25	0.2504	0.2615	0.2249	0.3090	0.4612	0.3127	0.4027	0.3416
025 - 029	0.3452	0.3716	0.3326	0.4142	0.6471	0.5425	0.5506	0.5613
030 - 034	0.4884	0.5600	0.5285	0.5584	0.7496	0.6924	0.7131	0.7047
035 - 039	0.7700	0.8016	0.7500	0.7894	0.8507	0.8518	0.9257	0.8571
040 - 044	1.1281	1.0910	1.0349	1.0662	1.0142	1.1275	1.1295	1.1207
045 - 049	1.3070	1.2919	1.2376	1.2864	1.2159	1.2668	1.3022	1.2540
050 - 054	1.5064	1.5489	1.5661	1.5348	1.4578	1.5243	1.6359	1.5483
055 - 059	1.7641	1.7451	1.9407	1.7141	1.7826	1.7762	1.9064	1.8083
060 - 064	2.0418	2.0148	2.0878	2.0061	2.1875	2.1358	2.2794	2.1522
065+	2.5600	2.5570	2.2790	2.5245	2.5191	2.4866	2.7953	2.4876

Section III.

Table 19 Tier Factors

Tier	Tier Factor	
2-Tier	Single	1.1878
	Family	2.5433
3-Tier	Single 1.1878	
	2-Party	2.3229
4-Tier	Family	2.7307
	Single 1.1878	
	Par/Child	1.4930
Medicare	Couple	2.8207
	Family	2.9496
Medicare	Member	1.1878

Table 20 Dependent Age Adjustment Factor

Age up to	Students	Non-Students
19 years	-1.6	0.0
20 years	-1.2	0.4
21 years	-0.8	0.8
22 years	-0.4	1.2
23 years	0.0	1.6
24 years	0.4	2.0
25 years	0.8	2.4
26 years	1.2	2.8
27 years	1.6	3.2
28 years *	2.0	3.6

* For each year of age or part thereof beyond 28, add 0.4 to the last value in the column, not to exceed the factor for age 35.
 ** Up to the end of the month in which the age is reached. If the limiting age is to the end of the calendar year in which the age is reached, add an additional 0.2 to each value in the respective columns.

Section IV.

Table 22 Administrative Expenses & Profit Factor

Case Size (total lives)	PMPM	Retention	Commissions*	Taxes & Assessments
<= 10	\$0.00	0-7.5%	0%-10%	2.70%
<= 50	\$0.00	0-7.5%	0%-10%	2.70%
<= 100	\$0.00	0-7.5%	0%-10%	2.70%
<= 300	\$0.00	0-7.5%	0%-10%	2.70%
<= 1,000	\$0.00	0-7.5%	0%-10%	2.70%
<= 1,500	\$0.00	0-7.5%	0%-10%	2.70%
<= 3,000	\$0.00	0-7.5%	0%-10%	2.70%
<= 4,000	\$0.00	0-7.5%	0%-10%	2.70%
<= 5,000	\$0.00	0-7.5%	0%-10%	2.70%
<= 7,500	\$0.00	0-7.5%	0%-10%	2.70%
<= 10,000	\$0.00	0-7.5%	0%-10%	2.70%
<= 20,000	\$0.00	0-7.5%	0%-10%	2.70%
<= 35,000	\$0.00	0-7.5%	0%-10%	2.70%
<= 70,000	\$0.00	0-7.5%	0%-10%	2.70%
<= 100,000	\$0.00	0-7.5%	0%-10%	2.70%
> 100,000	\$0.00	0-7.5%	0%-10%	2.70%

* Aetna's standard is not to include commissions in our premiums. Should the customer instruct Aetna to include a broker fee, final billing rates to the Customer will be modified to reflect the agreed upon schedule.

Dental Benefit Plans

Refer to the Dental Plan Rate Development Worksheet in page [Section E](#).

Section I.

Base Plan Claim Cost

The Base Plan Claim Cost is the PMPM for a \$0/\$0/\$0 copay plan.

Benefit Adjustment Factor

The Benefit Adjustment Factor is the product of the following factors:

$$\begin{array}{r} \text{Coverage Option Factor} \\ \times \\ \text{Copay Option Factor} \end{array}$$

Trend Factor

Select the appropriate factor from the Trend Factor Table.

Dental Rider Starting Rate

Calculate the Dental Rider Starting Rate as follows:

$$\begin{array}{r} \text{Base Plan Claim Cost} \\ \times \\ \text{Benefit Adjustment Factor} \\ \times \\ \text{Trend Factor} \end{array}$$

Section II.

Tier Factor

For each billing tier, multiply the Dental Rider Rate by the appropriate Tier Factor.

Dependent Age Adjustment Factor

For those tiers under which children may be covered, apply the appropriate factor. Other tiers will use a factor of 1.0.

Adjusted Dental Claim Cost by Billing Tier

Multiply the Dental Rider Rate by the appropriate Tier Factors and Dependent Age Adjustment Factors to get the Cost by Billing Tier.

Administrative Expense and Profit

See Appendix [A](#) for the calculation of the Administrative Expense and Profit.

Final Dental Rider Premium Rates by Billing Tier

The Final Dental Rider Premium Rates by Billing Tier is equal to:

$$\begin{array}{c} \text{Adjusted Dental Claim Cost by Billing Tier} \\ \times \\ \text{Administrative Expense and Profit} \end{array}$$

Retention may be adjusted to reflect case specific circumstances such as inclusion or exclusion of certain programs (i.e. wellness programs), case specific commissions, or margin for risk sharing arrangements, etc.

Note: Rounding to the eighth decimal place occurs in every calculation, with the exception of the last calculation which gets rounded to the second decimal place.

Also, enter these rates on the appropriate line in the Medical Section of the Rate Manual.

Medical Plan Rate Development Worksheet

Group Name: _____ Group No.: _____ Effective Date: _____ Today's Date: _____

Section I.

- 1 Base Plan Claim Cost _____
- 2 Coverage Option Factor _____
- 3 Copay Option Factor _____
- 4 Benefit Adjustment Factor _____ 2 x 3
- 5 Trend Factor _____
- 6 Dental Rider Start Rate _____ 1 x 4 x 5

Section II.

7 Tier Factors

Two-tier Structure		Three-tier Structure			Four-tier Structure			
Single Family		Single	2-Party	Family	Single	Par/Child	Couple	Family
1.0000	3.1800	1.0000	1.9600	3.7100	1.0000	2.0100	2.5300	3.8100

8 Dependent Age Adjustment

Two-tier Structure		Three-tier Structure			Four-tier Structure			
Single Family		Single	2-Party	Family	Single	Par/Child	Couple	Family
1.00		1.00			1.00		1.00	

Dependent Age Adjustment Worksheet

	Limiting Age	Adjustment
a. Student:	_____	_____
b. Non-Student:	_____	_____
c. Handicap/Mental Retardation:	_____	_____
d. $[1.00 + ((a + b + c.) / 100)]$		_____

9 Adjusted Dental Rider Claim Cost by Billing Tier _____ 6 x 7 x 8

Two-tier Structure		Three-tier Structure			Four-tier Structure			
Single Family		Single	2-Party	Family	Single	Par/Child	Couple	Family

Section III.

- 10 Administrative Expenses & Profit _____
 - 11 Final Dental Rider Premium Cost by Billing Tier _____
- | Two-tier Structure | | Three-tier Structure | | | Four-tier Structure | | | |
|--------------------|--|----------------------|---------|--------|---------------------|-----------|--------|--------|
| Single Family | | Single | 2-Party | Family | Single | Par/Child | Couple | Family |
| | | | | | | | | |

NOTE: Rounding to the eighth decimal place occurs in every calculation, with the exception of the last calculation which gets rounded to the second decimal place.

Dental Rider PMPM and Benefit Factor Tables

Table 1 Base Plan Claim Cost

Area	Base Cost
All Areas	9.87

Table 2 Coverage Option Factor

Coverage	Factor
Preventive	0.4793
Basic	1.0000
Advantage	1.3923

Table 3 Copay Option Factor

Copay	Factor
Basic \$0	1.0000
Basic \$2	0.9586
Basic \$5	0.8965
Basic \$10	0.8102
Basic \$15	0.7264
Preventive \$0	1.0000
Preventive \$2	0.9416
Preventive \$5	0.8539
Preventive \$10	0.7261
Preventive \$15	0.6023
Advantage \$0	1.0000
Advantage \$2	0.9586
Advantage \$5	0.8965
Advantage \$10	0.8102
Advantage \$15	0.7264

Table 5 Trend Factor

Effective Date	Trend Factor
07/01/2012	1.0000
10/01/2012	1.0000
01/01/2013	1.0000
04/01/2013	1.0000

Table 8 Dependent Age Adjustment

Age up to	Students	Non-Students
19	-1.6	0
20	-1.2	0.4
21	-0.8	0.8
22	-0.4	1.2
23	0	1.6
24	0.4	2
25	0.8	2.4
26	1.2	2.8
27	1.6	3.2
28*	2	3.6

* For each year of age or part thereof beyond 28, add .4 to the last value in the column.

Table 10 Administrative Expenses & Profit

Case Size Description *	PMPM's	Retention	Premium & Income Tax Factor	Commission Factor
1 - 10	\$0.00	0-7.5%	2.70%	0%-10%
11 - 50	\$0.00	0-7.5%	2.70%	0%-10%
51 - 100	\$0.00	0-7.5%	2.70%	0%-10%
101 - 300	\$0.00	0-7.5%	2.70%	0%-10%
301 - 1,000	\$0.00	0-7.5%	2.70%	0%-10%
1,001 - 1,500	\$0.00	0-7.5%	2.70%	0%-10%
1,501 - 3,000	\$0.00	0-7.5%	2.70%	0%-10%
3,001 - 4,000	\$0.00	0-7.5%	2.70%	0%-10%
4,001 - 5,000	\$0.00	0-7.5%	2.70%	0%-10%
5,001 - 7,500	\$0.00	0-7.5%	2.70%	0%-10%
7,501 - 10,000	\$0.00	0-7.5%	2.70%	0%-10%
10,001 - 20,000	\$0.00	0-7.5%	2.70%	0%-10%
20,001 - 35,000	\$0.00	0-7.5%	2.70%	0%-10%
35,001 - 70,000	\$0.00	0-7.5%	2.70%	0%-10%
70,001 - 100,000	\$0.00	0-7.5%	2.70%	0%-10%
100,001 - Higher	\$0.00	0-7.5%	2.70%	0%-10%

* Aetna's standard is not to include commissions in our premiums. Should we agree to pay commissions, final billing rates to the Customer will be modified to reflect the agreed upon schedule.

Administrative Expenses and Profit Factor Calculation

Step 1 Number of Members
When total members are unknown, multiply subscribers by tier specific Subscriber to Member Conversion factors to get total member assumption.

Two-tier Structure		Three-tier Structure			Four-tier Structure			
Single	Family	Single	2-Party	Family	Single	Par/Child	Couple	Family
1.00	3.44	1.00	2.00	3.85	1.00	2.61	2.00	3.93

Step 2 Total Monthly Claim Cost
Multiply total members by Adjusted Claim Cost PMPM to get Monthly Claim Cost.
When total members are unknown, multiply the total members in each billing structure by the Adjusted Claim Cost by Billing Tier and sum the result.

Step 3 Total Retention PMPM
Find the appropriate PMPM Retention from the Medical Administrative Expense & Profit Table, the Pharmacy Administrative Expense & Profit Table, the Self Injectables Administrative Expense & Profit Table, or the Dental Administrative Expense & Profit Table.
FOR RENEWALS - Add the appropriate PMPM adjustment from the Family Size Adjustment table.
Multiply the total retention PMPM by the number of members from Step 1.

Step 4 Calculate the Total Retention Percent
The Total Retention Percent is the sum of the retention, premium and income tax, and commission factors from the Medical Administrative Expense & Profit Table, the Pharmacy Administrative Expense & Profit Table, the Self Injectables Administrative Expense & Profit Table, or the Dental Administrative Expense & Profit Table.

Step 5 Administrative Expense and Profit Factor
The Administrative Expense and Profit Factor is $[(\text{Total Monthly Claim Cost} + \text{Total Retention PMPM}) / (1 - \text{Total Retention Percent})] / (\text{Total Monthly Claim Cost})$

Step 6 If applicable, adjust the Administrative Expense and Profit Factor from Step 5 by the expected value of any special administrative requirements or services provided.

Retention may be adjusted to reflect case specific circumstances such as inclusion or exclusion of certain programs (i.e. wellness programs), case specific commissions, or

Individual Conversion

Rather than have an individual conversion product for every possible benefit configuration available to employer groups, Aetna Health, Inc. will offer a standard individual conversion HMO benefit. Members who elect to continue their coverage on an individual basis will be converted to the standard individual conversion plan.

Quarterly Individual Conversion Rates

	<u>3Q12</u>	<u>4Q12</u>
Single	\$1,948.50	\$1,992.00
Parent/Children	\$3,950.30	\$4,038.50
Husband/Wife	\$4,664.20	\$4,768.30
Family	\$6,162.30	\$6,299.80

**Aetna Health Inc. - District of Columbia
Premium Rate Manual
Large Groups with 51-100 Eligible Employees**

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

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.

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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.

**Base Rate Table
Table 1**

Effective 8/1/2012

Age Bracket	Male Employee	Male EE Couple	Male EE + Child(ren)	Male EE Family	Female Employee	Female EE Couple	Female EE + Child(ren)	Female EE Family
<25	92.04	297.40	307.53	868.35	148.20	272.28	834.83	1,198.58
25 - 29	96.43	301.09	259.51	678.66	171.79	294.62	692.88	767.94
30 - 34	105.53	376.91	230.44	628.44	198.43	441.38	591.77	667.61
35 - 39	138.12	423.69	306.50	624.94	217.04	489.68	495.70	585.58
40 - 44	174.06	440.65	332.59	605.73	235.04	553.01	426.00	640.99
45 - 49	225.90	521.42	396.80	673.61	265.10	593.19	455.72	701.48
50 - 54	281.72	614.46	484.04	754.22	302.59	711.01	489.66	788.94
55 - 59	340.75	708.28	543.30	845.00	351.23	786.14	548.67	856.57
60 - 64	455.68	878.19	716.13	1,030.04	409.88	931.17	675.31	1,110.54
65+ Primary	402.75	833.67	639.56	1,042.79	339.03	869.54	557.57	1,027.64
65+ Secondary	537.00	1,111.56	852.74	1,390.39	452.04	1,159.38	743.43	1,370.19

The Base Rates above include both Medical and Pharmacy benefit costs. The Plan Relativity factors used with these Base Rates in the rating calculation reflect the Pharmacy benefit option (if any) associated with that plan.

Plan Relativity Factor Table (HMO)

Table 2

TYPE	PLAN NAME	IN NETWORK										PHARMACY				LifETIME Maximum	Plan Relativity Factor
		Copayments								Copayments							
		PCP	Spec	IP Hospital	OP Surg	ER	UC	Ded	Coins	OOP*	Generic	Form	Non-Form	Rx Ded			
HNO	DC Health Network Only 1.4 (20/250A,10/25/50)	\$20	\$30	\$250	per Adm	\$50	\$150	\$50	N/A	N/A	\$1,500	\$10	\$25	\$50	None	Unlimited	1.0626
HNO	DC Health Network Only 1.4 (20/250A,10/35/60)	\$20	\$30	\$250	per Adm	\$50	\$150	\$50	N/A	N/A	\$1,500	\$10	\$35	\$60	None	Unlimited	1.0401
HNO	DC Health Network Only 2.4 (20/500A)	\$20	\$40	\$500	per Adm	\$300	\$200	\$75	N/A	N/A	\$2,000	\$10	\$35	\$60	None	Unlimited	0.9752
HNO	DC Health Network Only 3.4 (25/10%)	\$25	\$50	10%		10%	\$200	\$75	N/A	N/A	\$2,500	\$10	\$35	\$60	None	Unlimited	0.8989
HNO	DC Health Network Only 4.4 (25/30%)	\$25	\$50	30%		30%	\$200	\$75	N/A	N/A	\$3,000	\$10	\$35	\$60	None	Unlimited	0.7419
HNO	DC Health Network Only CD 1.4 (2000 Ded)	\$25	\$50	30%	aft ded	30% aft ded	\$200 after ded	\$75 after ded	\$2,000	N/A	\$4,000	\$10	\$35	\$60	None	Unlimited	0.6485
HNO	DC Health Network Only HSA Comp 1.4 (1500 Ded)	\$20 after ded	\$40 after ded	\$500 per Adm	aft ded	\$300 after ded	\$200 after ded	\$75 after ded	\$1,500	N/A	\$3,000	\$10	\$35	\$60	int w/medical	Unlimited	0.6960
HNO	DC Health Network Only HSA Comp 2.4 (2500 Ded)	\$30 after ded	\$50 after ded	\$300/Day (5X)	aft ded	\$200 after ded	\$200 after ded	\$75 after ded	\$2,500	N/A	\$5,000	\$10	\$35	\$60	int w/medical	Unlimited	0.5152

* Out-of-Pocket Maximum excludes deductible for all plans.

Note:

This table includes 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. Any new plan designs will be developed based only on benefit differences using the same underlying morbidity assumptions as the above relativity factors.

Plan Relativity Factor Table (QPOS)
Table 2

TYPE	PLAN NAME	IN NETWORK											OUT OF NETWORK			PHARMACY				Lifetime Maximum	Plan Relativity Factor
		Copayments								Ded	Coins	OOP*	Copayments								
		PCP	Spec	IP Hospital	OP Surg	ER	UC	Generic	Form				Non-Form	Rx Ded							
HNO	DC Health Network Option 1.4 (20/250A,10/25/50)	\$20	\$30	\$250 per Adm	\$50	\$150	\$50	N/A	N/A	\$1,500	\$500	20%	\$3,000	\$10	\$25	\$50	None	Unlimited	1.1159		
HNO	DC Health Network Option 1.4 (20/250A,10/35/60)	\$20	\$30	\$250 per Adm	\$50	\$150	\$50	N/A	N/A	\$1,500	\$500	20%	\$3,000	\$10	\$35	\$60	None	Unlimited	1.0935		
HNO	DC Health Network Option 2.4 (20/500A)	\$20	\$40	\$500 per Adm	\$300	\$200	\$75	N/A	N/A	\$2,000	\$500	30%	\$3,500	\$10	\$35	\$60	None	Unlimited	1.0267		
HNO	DC Health Network Option 3.4 (25/10%)	\$25	\$50	10%	10%	\$200	\$75	N/A	N/A	\$2,500	\$1,000	30%	\$4,000	\$10	\$35	\$60	None	Unlimited	0.9453		

* Out-of-Pocket Maximum excludes deductible for all plans.

Note:
This table includes 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. Any new plan designs will be developed based only on benefit differences using the same underlying morbidity assumptions as the above relativity factors.

Area Factor Table
Table 3

Area ID	Area Factors
DCRA01	1.0000

Effective Date Factor Table
Table 4

Effective Date	Factor
Aug-12	1.4595
Sep-12	1.4595
Oct-12	1.4974
Nov-12	1.4974
Dec-12	1.4974
Jan-13	1.5363
Feb-13	1.5363
Mar-13	1.5363
Apr-13	1.5762
May-13	1.5762
Jun-13	1.5762

Annual Medical/Rx Trend:

9.6%

For each additional month beginning Apr-13,
multiply the latest factor above by 1.0077.

Industry Factor (SIC) Table
Table 5

SIC Range		Industry Factor	SIC Band Description
From	To		
0000	0000		
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
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

SIC Range		Industry Factor	SIC Band Description
From	To		
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
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

SIC Range		Industry Factor	SIC Band Description
From	To		
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
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

SIC Range		Industry Factor	SIC Band Description
From	To		
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
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

SIC Range		Industry Factor	SIC Band 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
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

SIC Range		Industry Factor	SIC Band Description
From	To		
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
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

SIC Range		Industry Factor	SIC Band Description
From	To		
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
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

Size Factor Table
Table 6

Number of Enrolled Employees	Factor
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
Table 7

Classes	Class of Business Factor
All (not used)	1.00

Group Experience Factor Table
Table 8

Number of Eligible Employees	Range
2-50	0%- 230%*
51-100	0%- 230%*

*Limited to +/- 20% for Standard and Essential Plans

SERFF Tracking Number: AETN-128133161 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: DCAHILG3Q12
 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Aetna Health Maintenance Organization
 Project Name/Number: Aetna Health Inc. 3Q12 Large Group HMO rate filing for DC/

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Actuarial Justification		
Comments:		
Attached, please find the 3Q12 DC Large Group rate filing submission for Aetna Health Inc. The attachments include: our NAIC Transmittal form, the Large Group Actuarial Certification, our cover letter including form numbers and other supporting documents. The rate manual pages mentioned in the cover letter have been attached under the Rate/Rule Schedule tab.		
Attachments:		
NAIC Transmittal Doc 3Q12.pdf		
DC HMO Act Cert 3Q12.pdf		
DC 3Q12 HMO supporting documentation.pdf		

	Item Status:	Status Date:
Bypassed - Item: Rate Summary Worksheet		
Bypass Reason: This worksheet does not apply to large group filings.		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Consumer Disclosure Form		
Bypass Reason: This form does not apply to large group filings.		
Comments:		


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	PA	Accident & Health		95109		
4.	Contact Name & Address	Telephone #	Fax #		E-mail Address		
	Frances Casale 980 Jolly Road Mail Stop: U12S Blue Bell, PA 19422	(215) 775-2717	(215) 775-6441		casaleFM@aetna.com		
5.	Requested Filing Mode	<input type="checkbox"/> Review & Approval <input checked="" type="checkbox"/> File & Use <input type="checkbox"/> Informational <input type="checkbox"/> Combination (please explain): _____ <input type="checkbox"/> Other (please explain): _____					
6.	Company Tracking Number	DCAHILG3Q12					
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"/> Small <input checked="" 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	H21 Health-Other					
10.	Product Coding Matrix Filing Code	H21.000 Health-Other					
11.	Submitted Documents	<input type="checkbox"/> FORMS <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 Rates <input checked="" type="checkbox"/> New Rate <input type="checkbox"/> Revised Rate <input type="checkbox"/> FILING OTHER THAN FORM OR RATE: Please explain: _____ SUPPORTING DOCUMENTATION <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 checked="" type="checkbox"/> Certifications <input type="checkbox"/> Actuarial Memorandum <input checked="" type="checkbox"/> Other - DCLG 3Q12 Rate Manual & Actuarial Certification					

		<input type="checkbox"/> Other _____
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LHTD-1, Page 1 of 2

12.	Filing Submission Date	March 1, 2012
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:	
	<p>This filing seeks approval of the Aetna Health Inc. Large Group 3Q12 rate manual. This filing is for effective dates July 1, 2012 and later. Changes from our previously approved rate manual have been highlighted.</p>	

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>		
Print Name Frances Casale		Title Actuarial Team Lead
Signature		Date: March 1, 2012

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

	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		1.2% quarterly manual rate change		
	Document Name	Affected Form Numbers		Previous State Filing Number
	Description			
01		See list of form numbers attached to cover letter.	<input type="checkbox"/> New <input type="checkbox"/> Revised Request +____% -____% <input type="checkbox"/> Other _____	
02			<input type="checkbox"/> New <input type="checkbox"/> Revised Request +____% -____% <input type="checkbox"/> Other _____	
03			<input type="checkbox"/> New <input type="checkbox"/> Revised Request +____% -____% <input type="checkbox"/> Other _____	
04			<input type="checkbox"/> New <input type="checkbox"/> Revised Request +____% -____% <input type="checkbox"/> Other _____	
05			<input type="checkbox"/> New <input type="checkbox"/> Revised Request +____% -____% <input type="checkbox"/> Other _____	
06			<input type="checkbox"/> New <input type="checkbox"/> Revised Request +____% -____% <input type="checkbox"/> Other _____	
07			<input type="checkbox"/> New <input type="checkbox"/> Revised Request +____% -____% <input type="checkbox"/> Other _____	
08			<input type="checkbox"/> New <input type="checkbox"/> Revised Request +____% -____% <input type="checkbox"/> Other _____	
09			<input type="checkbox"/> New <input type="checkbox"/> Revised Request +____% -____% <input type="checkbox"/> Other _____	
10			<input type="checkbox"/> New <input type="checkbox"/> Revised Request +____% -____% <input type="checkbox"/> Other _____	

LH RFA-1

To: Aetna Health Inc.
From: [David M. Walker, ASA, MAAA](#)
Date: [March 1, 2012](#)
Re: **Actuarial Certification of Premium Rates**

I, [David M. Walker](#), am an employee of Aetna Health Inc. and a member of the American Academy of Actuaries. I have reviewed the enclosed rates submitted by Aetna Health, Inc. for the District of Columbia.

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. I also relied on guidance from responsible employees of Aetna Health Inc. for regulatory compliance matters. 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 the District of Columbia,
- (iii) make a good and sufficient provision for all unpaid claims of the organization under the terms of its contracts and agreements, and
- (iv) include appropriate provision for all actuarial items which ought to be established where allowed by law.

A manual rate target medical loss ratio of [81.6%](#) was used in the development of the manual rates. These rates are appropriate for quotes delivered for effective dates beginning [July 1, 2012](#) and the increase requested is not greater than 10% over the prior year's rates (excluding demographic changes).

This rate filing conforms with the benefit plan provisions required by the Patient Protection and Affordability Act (P.L. 111-148) of 2010. This filing is made in accordance with all the applicable Actuarial Standards of Practice, including ASOP No. 8.

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.



[March 1, 2012](#)

David M. Walker
ASA, MAAA

Date



980 Jolly Road
Mail Stop U12S
Blue Bell, PA 19422

March 1, 2012

Mr. Efren Tanhehco
Supervising Actuary
District of Columbia Department of Insurance Securities and Banking
Actuarial Analysis Division
810 First Street, NE Suite 701
Washington, D.C. 20002

RE: Aetna Health Inc. - DC
NAIC Number: 95109
District of Columbia [Large Group](#) New Business
[Forms: see attached for list of form numbers](#)

Dear Mr. Tanhehco:

I am writing to seek approval for revisions to the approved Aetna Health, Inc. rate manual last submitted on [January 10, 2012](#). These changes are for effective dates [July 1, 2012 through June 3, 2013](#), for our [HMO](#) medical plans, as well as our pharmacy and other riders.

In accordance with the Health Insurance Rate Filing Procedures, we have included the following:

- An actuarial certification
- An actuarial memorandum, including appendices with brief summaries of already approved underwriting methodologies and trend assumptions.
- A summary of rate manual changes, an annual rate change history summary and the development of current annual rate change (Exhibit A and A.1)
- A summary of Aetna Health Inc. District of Columbia large group experience data, including earned premiums, incurred claims, member months and loss ratios (Exhibit B)
- Revised rate manual pages that have had factor/table changes. We have also included rate manual pages where the page numbers have shifted.

The increase requested is not greater than 10% over the prior year's rates (excluding demographic changes). The new business quarterly manual rate change requested is [1.2%](#).

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

Since Aetna Health, Inc. considers this submission to contain proprietary information, we ask that it be kept confidential to the extent possible. In particular, we believe the tables of factor adjustments would be especially valuable to competitors.

Please contact me at 215-775-2717 if you have any questions regarding the attached information.

Sincerely,

A handwritten signature in cursive script that reads "Frances Casale".

Frances Casale
LEC Actuarial - SE

Enclosures

**Aetna Health, Inc
District of Columbia**

Forms:

HMO/DC2 NAMEAMEND-1 05/02	NAME CHANGE AMENDMENT
HMO/DC2 GA-1 01/02	GROUP AGREEMENT
HMO/DC2 Amendment to GA ELR-1 05/02	GROUP AGREEMENT AMENDMENT
HMO/DC2 COC-1 07/02	CERTIFICATE OF COVERAGE (COC)
HMO DC2 COC-AMEND-1 07-03	AMENDMENT
HMO/DC2 COC-AMEND-2 07/03	AMENDMENT
HMO DC2 MEDICALLY NECESSARY 10-03	NEW DEFINITION AMENDMENT
HMO AMD-COMPL-APPL-11/02-DC	GRIEVANCE PROCESS AMENDMENT
HMO/DC2 COC-CONVERSION-AMEND 01/03	CONVERSION AMENDMENT
HMO DC2 AMEND-COB-2 10-03	COB AMENDMENT
HMO GEN MOP-AMEND-2 10-03	AMENDMENT
HMO DC2 SB-1 10-03	SCHEDULE OF BENEFITS
HMO/DC2 SELFREF (10/00)	OPEN ACCESS RIDER
HMO/DC2 RIDER-HEAR-1 01/00	HEARING AID RIDER
HMO/DC2 RIDER-UAW-1 (01/00)	NOCO RIDER
HMO/DC2 RIDER-RX-2003-1 (08/02)	RX RIDER
HMO/DC2 RDR-SHELL-1 06/99	RIDER SHELL
HMO/DC2 RIDER-VIS-1 06/99	VISION
HMO/DC2 SERVAGREE-1 06/99	SERVICE AGREEMENT
HMO/DC2 RIDER-SBF-1 06/99	MEDICAL SPENDING
HMO/DC2 AMEND-DP-1 06/99	DOMESTIC PARTNER
HMO/DC2 AMEND-STNT-1 06/99	STUDENT
HMO/DC2 RIDER-DEN-1 06/99	DENTAL RIDER
HMO/DC2 BASIC-INF-AMEND 04/03	BASIC INFERTILITY AMENDMENT
HMO GEN RIDER 2003CI-1 (07-03)	COMPREHENSIVE INFERTILITY AMENDMENT
HMO GEN RIDER 2003ART-1 (07-03)	ART AMENDMENT
HMO DC2 TRANSPLANT-AMEND-1 10/03	TRANSPLANT AMENDMENT
HMO/DC2 INDHISB-1 07/00	INDIVIDUAL CONVERSION SB HIGH OPTION
HMO/DC2 INDCOC-1 07/00	INDIVIDUAL COC

To: Aetna Health Inc.
From: [David M. Walker, ASA, MAAA](#)
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Re: **Actuarial Certification of Premium Rates**

I, [David M. Walker](#), am an employee of Aetna Health Inc. and a member of the American Academy of Actuaries. I have reviewed the enclosed rates submitted by Aetna Health, Inc. for the District of Columbia.

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. I also relied on guidance from responsible employees of Aetna Health Inc. for regulatory compliance matters. 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 the District of Columbia,
- (iii) make a good and sufficient provision for all unpaid claims of the organization under the terms of its contracts and agreements, and
- (iv) include appropriate provision for all actuarial items which ought to be established where allowed by law.

A manual rate target medical loss ratio of [81.6%](#) was used in the development of the manual rates. These rates are appropriate for quotes delivered for effective dates beginning [July 1, 2012](#) and the increase requested is not greater than 10% over the prior year's rates (excluding demographic changes).

This rate filing conforms with the benefit plan provisions required by the Patient Protection and Affordability Act (P.L. 111-148) of 2010. This filing is made in accordance with all the applicable Actuarial Standards of Practice, including ASOP No. 8.

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.



[March](#) [1, 2012](#)

David M. Walker
ASA, MAAA Date

**Aetna Health Inc. – District of Columbia
HMO Large Group Business**

Actuarial Memorandum

Statement of Purpose for Filing

This actuarial memorandum supports DC HMO commercial base rates for large groups (groups with 51 or more eligible subscribers) effective July 1, 2012 through June 30, 2013 for Aetna Health Inc.- District of Columbia.

The purpose of this memorandum is to comply with the District of Columbia, Department of Insurance, Securities and Banking, Health Insurance Rate Filing Procedures and to provide adequate supporting information for our proposed rates pursuant to the DC Official Code, Title 31, Subtitle IV, Chapter 34.

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

A. Description of Benefits

The Aetna Health Inc. – District of Columbia offers group medical benefit coverage for the inpatient, outpatient, primary care and specialist services listed on pages B-13 through B-15 of our rate manual as well as riders such as pharmacy, vision, self Injectables, DME and vision. The rate manual includes tables of adjustments for certain benefit variations and co-payment options. Section B addresses the base medical benefits. Sections C, D, and E cover the various riders available to the base medical plan.

B. Renewability Provision

Group contracts are effective for a 12 month period at the end of which they are renewable upon agreement between both Aetna and the employer.

C. Applicability

The benefit plans and corresponding rates apply to large group new business. For informational completeness, a summary description of renewal methodologies is included as Appendix C.

D. Marketing Method

AHI uses brokers as well as internal sales staff to market our large group benefit plans.

E. Underwriting Method

Generally for groups with less than 300 eligible subscribers, Aetna requires the completion of a group medical questionnaire. We may use the information contained in the questionnaire to adjust a case appropriately for the given risk.

F. Issue Age Limits

Not applicable

G. Premium Basis

The base claim costs (medical and pharmacy) for this filing was for dates of service [January 2011 through December 2011](#) paid thru [December 2011](#) (our most recent 12 months of experience data) projected forward to the rating period ([3Q12-2Q13](#)) and then retention added.

H. Nature of Rate Change and Proposed Rate/Methodology Change

There are no proposed rating methodology changes proposed in this rate filing. The manual rate change results from the proposed change in manual base rate for our medical and pharmacy riders.

I. For Each Change, Indication if New or Modified

This is a new request for a manual base rate change for this time period.

J. For Each Change Comparison to Status Quo

Not applicable

K. Summary of How Each Proposed Modification Differs from Corresponding Current/Approved Rate/Methodology

There are no proposed rating methodology changes in this rate filing.

L. Summary of Each Proposed New Rule

Not Applicable

M. Overall Premium Impact of Filing on DC Policyholders

The new business quarterly composite manual rate change requested for [3Q12](#) is [1.2%](#). The new business annual composite manual rate change requested for [3Q12](#) is [3.9%](#). This rate filing does not impact renewing business.

N. Filed Minimum Required Loss Ratio

A manual rate target medical loss ratio of [81.6%](#) was used in the development of the manual rates.

O. Interest Rate Assumptions

Not Applicable

P. Trend Assumptions

The medical cost trend assumptions used in the development of these manual rates are shown in the attached Appendix P. Appendix P shows medical membership and claims PMPM's for our North Capitol Region Area. The data is paid through [December 2011](#), which is the data that was available at the time we developed this rate filing. This data represents our fully insured large group business and does not include National or Federal business. The data includes all our HMO-based products including Pharmacy and Self-Injectables.

The PMPM data shown here are net of any normalization for benefits, demographics and industry. Benefit normalization adjustments were determined using a benefit indexing process designed to compare the various plan design levels over time. Benefit plan design data was analyzed and a process was built to compare the actuarial value of the various book of business plan designs to the value of a

\$0 base plan (100% coverage of all services with no member cost sharing). The resulting relativity factors, the numerical value of comparing the various plan design values with the base plan value, are composited by membership and a monthly index factor is calculated. This factor is then applied to the monthly claims experience to calculate a monthly normalized claim cost. The change in factors is measured and used to adjust net trends to an adjusted net level. A similar process is used to calculate demographic and industry index factors using our currently filed age gender factors and industry factors respectively.

From the claims experience we calculated rolling 3, 6 and 12 month PMPMs and trends. These rolling trends are on a net trend basis. From the net trend an adjusted net trend is calculated based on the change in industry, demographics, plan design and high claims. The adjusted net trend is then adjusted based on the items shown in the appendix that were believed to have had an effect on the experience data such as an increase in COBRA benefits and an increase in claims due to seasonal flu and snow to become an adjusted gross trend. This adjusted gross trend was then adjusted for medical management initiatives to reach a gross trend. The development of our projected 2012 gross trend was done using a "cross-walk" approach. Meaning that we started with our 2011 adjusted gross trend, (which included our 2011 adjustments) and applied only the value of the expected changes in the line items from '11 to '12. The adjusted gross trend was then adjusted for medical management initiatives to reach a 2012 gross trend.

The estimated increase in claims expected as a result of increased COBRA benefits and the estimated increase in claims due to seasonal flu and snow were developed by our Medical Economics Unit. P-model changes refer to the changes in unit price contracted for hospital and professional services. Aetna believes in actively developing and managing programs that reduce the cost of medical care. We do this through Medical Management Initiatives (MMI), which are company-wide programs that are created at the national and local market level in response to trends in healthcare. Medical Management Initiatives are the additional strategies Aetna has implemented to reduce/mitigate medical cost spending.

The adjustments to trend for MMI are the incremental improvements over the prior year's initiatives. In other words, the impact of MMI are cumulative over time, similar to the ongoing impact of continued buy-downs of benefit plans every year by plan sponsors.

Each year, Aetna creates new strategies to not only reduce medical inflation through contracting, but also strategies to implement cost saving initiatives to control our plan sponsors' medical costs. They are robust and comprehensive opportunities that positively impact our customers' savings. One such program, for example, is to provide referring providers with information that will assist members in making the most cost effective care decisions. Another program actively manages the utilization of Chiropractic care, and yet another designed to monitor non participating utilization and engage these providers with the goal of being included in network at appropriate levels. All these programs provide savings to the member in form of fewer copays and lower coinsurance responsibilities.

Q. Persistency

Not Applicable

R. Long Term Care Insurance

Not Applicable

S. Actuarial Certification

An Actuarial Certification is attached.

**Aetna Health Inc. – District of Columbia
HMO Large Group Business**

Actuarial Memorandum Appendix C

Rating methodologies beyond the scope and purpose of this filing (the manual rating process) used by Aetna have been previously filed and approved. These methodologies include [community rating](#), [portfolio rating](#), [experience rating](#), and [retrospective rating](#) and they have been in place for years. No change to these methodologies is proposed. For informational completeness, a summary description of these methodologies is included as follows, as well as an example calculation of the portfolio rating methodology, experience rating methodology and each of the retrospective rating methodologies.

Community Rating by Class

Aetna Health, Inc. intends to community rate by class for large group contract holders, subject to meeting certain group criteria as determined by Aetna Health, Inc., as described below.

Existing business with 251 or more eligible subscribers and less than 100 average enrolled subscribers during their experience period will be class rated upon renewal. Each group will be given a class adjustment to the community rate that reflects the member age mix of the group, the single/family contract mix of the group, and the average contract size of the group.

For new business with fewer than 100 enrolled subscribers, community rates will be adjusted similarly to the way existing group rates are adjusted. However, since dependent information is rarely, if ever, available from prospective groups, the new business class adjustment will be based on eligible subscribers instead of members. The class adjustment for new business will reflect the age and single/family mix of each group's eligible contract holders. We will assume that each group's average contract size is that of the community-wide average contract size.

Portfolio Rating

The goal of portfolio rating is to treat groups of cases as one large case (from now on referred to as the Cohort). For the purpose of developing required rate increases reflecting experience, each group in the Cohort is assigned to the Cohort based on the eligibility requirements discussed below. Once the Cohort is created, experience rating is performed and credibility for the Cohort is calculated as indicated in [Table 1 below](#). For any Cohort that is < 100% credible, the Cohort's experience will be blended with the appropriate manual rate increase. Case specific rate increases will start with the blended rate increase, but differentiation will occur on case specific characteristics, as described below.

Eligibility Requirements

To be considered for portfolio rating, an employer group must have 51 through 250 eligible employees.

If an employer has multiple medical plans, eligibility is based on total number of eligible employees for that employer. Each medical plan is considered separately in the following rating methodology for determining rate increases and then a premium weighted average rate increase is applied to each medical plan within that employer. See [Blended Rate Increase Example below](#) for an example calculation.

All groups that qualify will be subject to the portfolio rating methodology and the employer will not be allowed to opt out. Similarly, [Aetna Health Inc.](#) will apply the portfolio rating methodology consistently to all qualifying groups.

The portfolio rating methodology applies to all medical products and is applied to renewal business only.

Portfolio Rating Methodology - see example calculation at the end of this section

I. The Definition of a Cohort

A cohort is a block of business with similar characteristics that are combined together to form a large enough block such that it will have enough credibility to use the portfolio rating methodology. This could include grouping by financial office and/or region and/or product category within an area. Cohorts are also defined by the customer's renewal quarter. A cohort consists of groups that have between 51 and 124 eligible employees.

II. The Overall Cohort Rate Change Calculation

$$RC = (((((CC - PCI) \times DF \times TF + PCh) / TLR) + PTA + BC) / CP) - 1$$

where

RC = Cohort Rate Change

CC = Cohort Claims. These are aggregate incurred claims from all the groups that meet the cohort definition. They are made up of claims from a 12 month experience period that allows for one month of run-out prior to the valuation.

PCI = Pooled Claims. Claims are pooled at a level consistent with the total size of the block. The cohort will be treated as [Aetna Health Inc.](#) would treat one large group of that size. See [Table 2](#) for pooling points.

PCh = Pooling Charge. This is the aggregate pooling charge assessed to the cohort. See [Table 2](#) for pooling charges.

DF = Demographic Factor. The demographic factor represents the change in morbidity due to aging of the membership from the experience period to the renewal period.

TF = Trend Factor. The trend factor is calculated from the weighted average mid-point of when the claims occurred during the experience period to the weighted average mid-point of the renewal period, based on when the members renew. Trends are weighted based on the local market incurred claims dollars.

CP = Current Premium (annualized). This is the most recent month's premium for each group in the cohort. This amount is annualized and then adjusted for the ratio of the average number of enrolled for the cohort during the experience period over the number of current enrolled, as of the valuation date.

TLR = Target Loss Ratio. This is a premium weighted average of the TLR's for each of the cases in the cohort. Each individual TLR is driven by product, fixed and variable administrative and profit factors for each case. See [Table 3](#) for the factors.

PTA = Premium Taxes and Assessments. This is a premium weighted average of the state taxes and assessments paid for each case.

BC = Broker Commission. This is a premium weighted average of the commissions paid for each case. Standardly, a broker commission is not paid. If it is paid, it is the actual commission paid for the group.

The overall cohort rate change is a blend of the cohort rate change (RC) and the manual rate change. The weighting of the two rate changes is determined by the size of the cohort, as indicated in [Table 1](#).

$$\text{ORC} = (\text{CCr}) \times (\text{RC}) + (1 - \text{CCr}) \times (\text{MRC})$$

Where

ORC = Overall Rate Change

CCr = Cohort Credibility percentage, as calculated in Table 1

MRC = Manual Rate Change

The overall cohort rate change is the starting point for a rate change for each group within the cohort. The ORC will be incremented or decremented by case specific adjustments, as listed below.

III. Case Specific Adjustments to the ORC prior to normalization

Each group will have adjustments made to the ORC based on their following characteristics:

1. Medical Benefits Ratio Adjustment (MBRA)

This adjustment is based on calculating the difference between each group's MBR for that year and the overall MBR for the cohort. The MBR in this adjustment is defined for each group as incurred claims divided by the premium. The MBR for the first year is made up of the incurred claims from months 2 – 13 as of the evaluation date to allow for one month of run-out to occur. Incurred claims for the MBR remove claims over \$50,000 when comparing the MBR variance from the cohort.

See [Table 4 below](#) for the adjustment factor.

2. Relative Risk Adjustment (RRA)

Predictive modeling is used to determine a risk score per member. This is based on the projected future cost of each member. The projected future costs are normalized by age, gender, and duration such that a factor of 1.0 is average. A relative risk score above 1.0 indicates the group has higher than average morbidity and a score below 1.0 indicates the group has lower than average morbidity.

See [Table 5 below](#) for the adjustment factor.

3. Predicted High Claimant (HCA)

Medical underwriting will review active members with more than \$25,000 in paid claims in the latest 12 months or more than \$10,000 in paid for certain medical categories such as Rx cost.

See [Table 6 below](#) for the adjustment factor.

4. Persistency Adjustment (PA)

A durational adjustment is made to reflect expected changes in morbidity after the renewal date.

See [Table 7 below](#) for the adjustment factor.

The total case specific adjustment (TCSA) prior to normalization is calculated as:

$$\begin{aligned} & (1 + \text{MBR Adjustment}) \\ & \quad \times \\ & (1 + \text{Relative Risk Adjustment}) \\ & \quad \times \\ & (1 + \text{High Claimant Adjustment}) \\ & \quad \times \\ & (1 + \text{Persistency Adjustment}) - 1 \end{aligned}$$

IV. Normalized Case Specific Adjustments

The case specific adjustments are normalized to the overall weighted average of all the case specific adjustments.

The case specific Normalized Rate Change (NRC) is calculated as follows:

$$\begin{aligned} & ((1 + \text{ORC}) \\ & \quad \times \\ & (1 + \text{Case specific adjustment prior to normalization}) \\ & \quad / \\ & (1 + \text{Overall weighted average of the case specific adjustments})) - 1 \end{aligned}$$

Where the Overall weighted average of the case specific adjustments is calculated as:

$$\begin{aligned} & \sum ((1 + \text{Case specific adjustment prior to normalization}) \\ & \quad \times \\ & (\text{Case specific current premium})) \\ & \quad / \\ & \sum (\text{Case specific current premium}) \end{aligned}$$

V. Minimum and Maximum Rate Change Adjustments

The case specific Final Rate Change (FRC) is determined by limiting the NRC based on a minimum (MinRC) and maximum rate change (MaxRC). The FRC is calculated as:

$$\text{The minimum of (MaxRC and the maximum of (MinRC and NRC))}$$

See [Table 8](#) in the Appendix for the adjustment factors.

VI. Monthly Renewal Premium

The monthly renewal premium for each group is calculated as:

$$\begin{aligned} & (1 + \text{FRC}) \\ & \quad \times \\ & \text{Current Monthly Premium} \end{aligned}$$

Table 1 - Credibility Table

Cohort credibility (CCr) percentage levels are based on the following:

Member Months, MM		Credibility, CCr
<	11,999	MM / 12,000
12,000	+	100%

Blended Rate Increase Example

A group has an HMO plan and a PPO plan with [Aetna Health Inc.](#) and the following characteristics:

1. Current monthly PPO premium = \$3,047 and current monthly HMO premium = \$22,046.
2. The final rate change with broker commissions for the PPO and HMO are 21.1% and 40.2% respectively.

The blended rate increase that would be applied to both the PPO and HMO product is calculated as:

$$37.9\% = ((3,047 * 1.211 + 22,046 * 1.402) / (3,047 + 22,046)) - 1$$

Table 2 – Large Claim Adjustment Table

The pooling point is based on the number of average monthly subscribers for the experience period being used. The pooling point is applied on a member level basis and all claims above the pooling point are removed from the cohort’s experience.

Avg Monthly Subscribers		Pooling Pt	Pooling Adj
0	299	\$100,000	6.9%
300	499	\$125,000	5.5%
500	749	\$150,000	4.5%
750	999	\$175,000	3.8%
1,000	1,499	\$200,000	3.2%
1,500	1,999	\$225,000	2.8%
2,000	2,999	\$250,000	2.4%
3,000	4,999	\$300,000	1.9%
5,000	7,999	\$400,000	1.2%
8,000	& up	\$500,000	0.8%

Table 3 – Target Loss Ratio

Product	Fixed Administrative & Profit Factor	Variable Administrative & Profit Factor	Premium Tax & Assessments Factor	PPACA Fee
HMO Based	\$30.25 pmpm*	7.45%	2.700%	\$0.10 pmpm*
ALIC Based	\$33.24 pmpm*	7.45%	2.600%	\$0.10 pmpm*

*Average Factor for all states. Actual is a blended fixed retention depending on product mix.

Table 4 - MBR Adjustment

The MBR Adjustment is based on the variance between the group's MBR and the cohort's MBR (both with claims amounts over \$50,000 removed).

Example: If the group's MBR (with claims over \$50,000 removed) is 65%, and if the cohort MBR is 80%. Then current year MBR adjustment is -5%.
 The calculation is 65% - 80% = -15%. A -15% variance results in a -5% adjustment factor.

MBR Variance Range		Adjustment Factor
-999%	-50%	-30%
-50%	-40%	-25%
-40%	-30%	-15%
-30%	-20%	-10%
-20%	-10%	-5%
-10%	10%	0%
10%	20%	5%
20%	40%	10%
40%	60%	15%
60%	100%	25%
100%	999%	35%

The maximum rate adjustment for MBR is 35%.

Table 5 – Relative Risk Adjustment

The relative risk score per member is aggregated at the group level. The following adjustment applies based on the group's relative risk factor.

Relative Risk Score Range	Adjustment Factor
<0.5	-9%
0.5 - 0.7	-6%
0.7 - 0.9	-3%
0.9 - 1.1	0%
1.1 - 1.3	3%
1.3 - 1.5	6%
1.5+	9%

Table 6 – Predicted High Claimant Adjustment

If there are known expected large claims, the adjustment equals 50% of the expected large claim amount as a percentage of annual premium. The adjustment for predicted high claimants will not exceed 25%.

Table 7 – Persistency Adjustment

1st renewal = 1.5%

2nd renewal and later = -1.0%

Table 8 - Minimum and Maximum Rate Change Adjustments

The Minimum Rate Change (MinRC) is 9% and the Maximum Rate Change (MaxRC) is assigned to each case based on the following:

First, consider the case specific medical benefit ratio (MBR)

Criteria	MaxRC
MBR < 70%	19%
70% ≤ MBR < 85%	29%

Second, if the case specific MBR method does not assign the MaxRC, then use the following table based on the cohort specific overall rate change (ORC)

Criteria	MaxRC
ORC < 15%	41%
15 % ≤ ORC < 25%	51%
25% ≤ ORC	61%

The Overall Cohort Rate Change Calculation

Renewal Cohort Description	Capitol Area	
Subscriber Months	12,381	
Avg Monthly Subscribers	1,032	
Member Months	24,692	
CC	Cohort Claims	\$8,321,619
PCI	Average of Cohort's Pooling Point	200,000 (Table 2)
PAAdj	Pooled Claims	\$767,621 (Table 2)
	Pooling Adj	3.2%
	LCAF Leveraged Trend	19.2%
	LCAF Trend Months	16.8
LCAF TF	Trend Factor	1.279
PCh	Pooling Charge (x member months)	\$312,588 PCh = PAAdj * (CC - PCI) x DF x LCAF TF
DF	Demographic Factor	1.005
	Avg Trend	10.4%
	Avg Trend Months	16.8
TF	Trend Factor	1.148
	Projected Incurred Claims	\$9,029,962
CP	Current Members	2,796
	Current Premium (annualized)	\$9,689,074
	Cohort Average Fixed Retention pmpm	\$29.74 (Table 3 blended for product mix)
	Cohort Average Fixed Retention dollar amount	\$734,253
	Cohort Average Premium Tax	2.63% (Table 3 blended for product mix)
	Cohort Average Premium Tax dollar amount	\$278,531
	Cohort Average Variable Retention	7.45% (Table 3)
	Cohort Average Variable Retention dollar amount	\$809,018
	Cohort Average Broker Comm	0.00%
	Cohort Average Broker Comm dollar amount	\$0
TLR	Target Loss Ratio	85.4%
		\$10,573,234 \$278,531 \$278,531
PTA	Premium Taxes and Assessments	\$278,531
BC	Broker Commissions	\$0
RC	Cohort Rate Change	12.0% RC = (((((CC - PCI) x DF x TF + PCh) / TLR) + PTA + BC) / CP) - 1
CCr	Cohort Credibility Percentage	100% (Table 1)
MRC	Manual Rate Change	5.00%
ORC	Overall Cohort Rate Change	12.0% ORC = (CCr x RC) + ((1-CCr) x MRC)
	Renewal Premium	\$10,851,764

Case Specific Adjustments of the ORC prior to normalization

"Case ABC" Specific (in Capitol Cohort)		
	Case ABC MBR (less claims in excess of 50k)	72.7%
	Cohort MBR (less claims in excess of 50k)	71.6%
		1.1% (Case MBR - Cohort MBR)
MBRA	Medical Benefit Ratio Adjustment	0% (Table 4)
	Relative Risk Score	0.72
RRA	Relative Risk Adjustment	-3% (Table 5)
	MUD Projection (expected large claims)	58,601
	Annual Premium	422,416
HCA	Predicted High Claimant	7% (Table 6)
	Duration	12
PA	Persistancy Adjustment	-1% (Table 7)
TCSA	Total Case Specific Adjustment	2.69% TCSA = (1+MBRA) x (1+RRA) x (1+HCA) x (1+PA) - 1

Normalized Case Specific Adjustments

ORC	Overall Cohort Rate Change	12.0%
CSApn	Total Case Specific Adjustment prior to Normalization	2.69%
OWACSA	Overall Weighted Averages Cohort Specific Adjustments	4.25% $\frac{\sum((1 + \text{case specific adj}) \times (\text{Case spec current premium}))}{\sum(\text{case specific current premium})}$
NRC	Case Specific Normalized Rate Change	10.33% NRC = ((1+ORC)*(1+CSApn)/(1+OWACSA))-1

Table 1

Cohort Credibility		
Member Months, MM	Credibility, CCr	
0	11,999	MM/12000
12000	& up	100%

Table 2

Pooling Charge			
Avg Monthly Subscribers	Pooling Pt	Pooling Adj	
0	299	\$100,000	6.9%
300	499	\$125,000	5.5%
500	749	\$150,000	4.5%
750	999	\$175,000	3.8%
1,000	1,499	\$200,000	3.2%
1,500	1,999	\$225,000	2.8%
2,000	2,999	\$250,000	2.4%
3,000	4,999	\$300,000	1.9%
5,000	7,999	\$400,000	1.2%
8,000	& up	\$500,000	0.8%

Table 3

Target Loss Ratio				
Product	PPACA Fee	Fixed Admin & Profit Factor	Variable Admin & Profit Factor	Premium Tax & Assessments Factor
HMO Based	\$0.10	\$30.25	7.45%	2.700%
ALIC Based	\$0.10	\$33.24	7.45%	2.600%

* Average Factor constant for all states.
Model uses blended fixed retention depending on product mix.

Table 4.

MBR Cohort Adjustment			
Min	Max	Adjustment	
-99999%	-50%	-30%	
-50%	-40%	-25%	
-40%	-30%	-15%	
-30%	-20%	-10%	
-20%	-10%	-5%	
-10%	10%	0%	
10%	20%	5%	
20%	40%	10%	
40%	60%	15%	
60%	100%	25%	
100%	999%	35%	

Table 5.

Relative Risk Score Adjustment			
Min	Max	Range	SG RRS Adj
0	0.5	<0.5	-9%
0.5	0.7	0.5 - 0.7	-6%
0.7	0.9	0.7 - 0.9	-3%
0.9	1.1	0.9 - 1.1	0%
1.1	1.3	1.1 - 1.3	3%
1.3	1.5	1.3 - 1.5	6%
1.5	999	1.5+	9%

Table 6.

High Claimant Adjustment
Expected Large Claims x .50
Annual Premium

Table 7

Persistancy Adjustment	
Duration	Adjustment
1st renewal	1.5%
2nd renewal and later	-1.0%

Experience Rating

New business groups with 100 or more enrolled subscribers and existing groups with 251 or more eligible subscribers and 100 or more average enrolled subscribers during their experience period will be experience rated.

The medical cost PMPM incurred during the most recent experience period (12 to 24 months based on case characteristics) prior to the renewal preparation, will be adjusted to remove large claims above the pooling point and to reflect any costs not reflected in the claims experience.

The amount of pooled claims in excess of the pooling point will be removed before further adjustments are made to claims for the experience period. The non-pooled claims experience is projected from the mid-point of the experience period to the mid-point of the renewal period using medical and pharmacy non-pooled trend factors.

A PMPM adjustment to reflect the expected level of large claims (from the Large Claim Pooling (LCP) Monthly Base Rate table) is added to the non-pooled claims PMPM. The LCP Monthly Base Rate is adjusted using the large claim pooling trend, and for demographics, and industry to derive the Large Claim Adjustment PMPM. The Large Claim PMPM may be modified based on case specific situations.

The Large Claim PMPM is added to the trended medical cost PMPM. An additional adjustment may be applied for known large claims which are expected to continue through the renewal period. If applicable, a trended pharmacy cost PMPM is added.

The experience rate is then blended with the corresponding non-experience based expected claims, according to the credibility assigned to the group based on total enrollment over time. Rate manual benefit factors are applied to take into account any change in benefits as of the renewal. An adjustment may be made to reflect costs not reflected in the claims experience such as enrollment turnover, demographic changes, morbidity changes, or other significant changes in the size or characteristics of the group. The resulting per member per month cost projection is divided by a target loss ratio to determine the experience rated required revenue. A final adjustment may be made to this renewal rate based on underwriter discretion.

Experience Rating Methodology - see example calculation at the end of this section

I. Historical Experience

The medical cost PMPM incurred during the most recent experience period prior to the renewal preparation will be adjusted to remove large claims above the pooling point and to reflect any costs not reflected in the claims experience. The number of months used is based on case characteristics. For first year renewals, we may include gap data from the prior carrier (if available) to supplement Aetna's immature, first year experience for a full 12 months of experience. If the experience period used is less than 12 months, an adjustment is made to the credibility adjustment. See Table 3.

Large claims above a pre-determined threshold are then removed from the adjusted medical claims resulting in current net incurred claims. The threshold is based on the current enrolled number of employees. See Table 1.

The PMPM medical and Rx net incurred claims are then adjusted by a demographic adjustment factor resulting in the Net Adjusted Incurred Claims PMPM (C PMPM). This adjustment is determined by comparing the current membership to the membership enrolled during the experience period used in the renewal rating. The medical and Rx claims are then converted to a PMPM basis using the enrolled members during the experience period.

II. Current Premium Development

The current monthly premium and current members are used to calculate a current premium PMPM.

III. Rate Change Development

The Net Adjusted Incurred Claims PMPM (C PMPM) claims are then trended forward using the annual trend in force (TF) at the time of the rate development. A midpoint to midpoint calculation is used to determine the total months of trend used. The midpoint to midpoint calculation compares the midpoint of the experience period to the midpoint of the projected renewal rate period. Medical and Rx claims are trended separately which produces the Trended Experience Incurred Claims PMPM (TIC).

$$\text{TIC} = \text{C PMPM} \times \text{TF}$$

A Large Claim Adjustment PMPM (LCA), or pool charge, is calculated starting with a Large Claim Pooling PMPM (LCP) (from Table 2) and trending it forward using the annual large claim trend in force (LCP TF) at the time of the rate development and the midpoint method described above.

$$\text{LCA} = \text{LCP} \times \text{LCP TF}$$

The Large Claim Adjustment PMPM (LCA) is then added to the Trended Experience Incurred Claims PMPM (TIC), producing the Projected Incurred Claims PMPM (PIC).

The Projected Incurred Claims PMPM (PIC) is then blended with the baseline claims PMPM based on the credibility formula outlined in Table 3.

If applicable, rate manual benefit factors are then applied to the blended medical/Rx claims to account for any plan changes as of the renewal, resulting in the Net Expected Claims PMPM (NEC PMPM)

Fixed expenses (on a PMPM basis) and variable administrative and profit are then converted to a Target Cost Ratio (TCR). See Table 4 for fixed and variable expenses.

$$\text{TCR} = \text{NEC PMPM} / (\text{NEC PMPM} + \text{Fixed Admin}) / (1 - \text{Var Admin \& Prof})$$

The Net Expected Claims PMPM (NEC PMPM) is divided by this Target Cost Ratio (TCR). Estimated premium taxes, assessments and other charges and broker commissions (if applicable) are then added to the target cost ratio adjusted claims to produce the Experience Based Premium PMPM (EBP PMPM).

$$\text{EBP PMPM} = (\text{NEC PMPM} / \text{TCR}) + \text{STA} + \text{C}$$

Consistent with our rate filing, the Experience Based Premium PMPM (EBP PMPM) can be adjusted using underwriter discretion to produce the renewal premium PMPM.

The renewal premium PMPM is then compared the current premium on a PMPM basis to produce the calculated rate change.

Appendix C
Experience Rating Example Calculation
(for illustrative purposes only)

Historical Experience					
Incurring Medical Costs (4/1/2009 - 11/1/2009)	Month	Members	Total Medical	Rx Claims	Combined
HMO	Apr-09	280	\$98,894	\$10,863	
	May-09	281	\$72,421	\$16,205	
	Jun-09	282	\$40,395	\$12,175	
	Jul-09	285	\$88,464	\$14,707	
	Aug-09	287	\$135,818	\$12,209	
	Sep-09	275	\$37,458	\$10,350	
	Oct-09	275	\$58,107	\$14,307	
	Totals	1,965	\$531,557	90,814	
Claims Over \$100,000 Threshold			\$25,345		(Table 1)
Net Incurred Claims			\$506,212		
Net Incurred Claims PMPM			\$257.61	\$46.22	
Demographic Adjustment Factor			1.0140	1.0177	
C PMPM Net Adjusted Incurred Claims PMPM (Non-pooled)			\$261.23	\$47.03	\$308.26

Current Premium Development			
Current Employees			
Emp Only	56		
Emp + Spouse	19		
Emp + Child(ren)	18	Current Monthly Premium	\$85,237.65
Emp + Family	32	Current Members	275
TOTAL	125	Current Premium PMPM	\$309.96

Rate Change Development					
			Medical	RX	
C PMPM	Net Adjusted Incurred Claims PMPM (Non-pooled)		\$261.23	\$47.03	\$308.26
	Annual Trend		13.40%	14.59%	
	Months to Trend Experience		14.5	14.5	
TF	Trend Factor		1.1641	1.1789	
TIC	Trended Incurred Claims		\$304.10	\$55.45	\$359.55 (C PMPM x TF)
LCP	Large Claim Pooling (LCP) Monthly Base Rate table		\$26.68	-	(Table 2)
	LCP Trend		22.1%		
	LCP Trend Months		14.5		
LCP TF	Trend Factor		1.273		
LCA	Large Claim Adjustment PMPM (\$100,000 threshold)		\$33.96		(LCP x LCP TF)
PIC	Projected Incurred Claims PMPM		\$338.06	\$55.45	\$393.50 (TIC + LCA)
CRED	Experience Credibility		23.4%	23.4%	(Table 3)
	Baseline Claims PMPM		\$221.86	\$56.65	
	Baseline Weight		76.6%	76.6%	(100% - CRED)
	Blended Claims PMPM		\$249.08	\$56.37	
	Adjustment for Renewal Benefit Change PMPM		\$1.25	\$0.00	
NEC PMPM	NET Expected Claim PMPM		\$250.33	\$56.37	\$306.70
					(Table 4)
TLR	Target Cost Ratio (excluding Taxes, Comm., Other)		82.57%	88.62%	NEC PMPM / (NEC PMPM + Fixed Admin) / (1 - Var Admin&Profit)
STA	State Taxes, Assessments and/or Other Charges		\$3.94	\$0.83	
C	Commissions PMPM		\$10.60	\$2.23	
EBP PMPM	Experience-Based Premium PMPM		\$317.71	\$66.67	\$384.38 (NEC PMPM / TLR + STA + C)
OA	Other Adjustment PMPM		\$0.00	\$0.00	
	RENEWAL Premium PMPM (16+17)		\$317.71	\$66.67	\$384.38
	Current Premium PMPM				\$309.96
	Calculated Rate Change				24.0%

Pooling Threshold		
Lives		Pooling Pt
0	299	100,000
300	499	125,000
500	749	150,000
750	999	175,000
1,000	1,499	200,000
1,500	1,999	225,000
2,000	2,999	250,000
3,000	4,999	300,000
5,000	7,999	400,000
8,000	& up	500,000

Large Claim Pooling Monthly Base Rates eff. 10/1/11			
Pooling Point	DC01 HMO	DC01 QPOS	
30,000	\$65.24	\$69.07	
35,000	\$59.17	\$62.65	
40,000	\$54.30	\$57.50	
45,000	\$50.18	\$53.14	
50,000	\$46.61	\$49.36	
60,000	\$40.84	\$43.24	
75,000	\$34.28	\$36.30	
100,000	\$26.68	\$28.25	
125,000	\$21.42	\$22.68	
150,000	\$17.69	\$18.73	
175,000	\$14.98	\$15.86	
200,000	\$12.92	\$13.68	
225,000	\$11.13	\$11.78	
250,000	\$9.68	\$10.25	
300,000	\$7.71	\$8.16	
400,000	\$4.91	\$5.20	
500,000	\$3.39	\$3.58	

Credibility	
Member Months, MM	Credibility, CCr*
< 9,430 (MM)	(1.143 x MM) / (MM + 4,286)
9,430 MM to 12,000 MM	(MM / 12,000)
> 12,000	100%

*If the experience period used to develop the Experience-Based Cost is less than 12 months long, credibility will be reduced by 2.5 percentage points for every month of experience less than 12 (no fewer than 4 months of experience will be considered).

Target Loss Ratio		
Product	Fixed Admin & Profit Factor	Variable Admin & Profit Factor
HMO Based Medical	\$30.25	7.45%
Pharmacy	\$2.50	7.45%

Retrospective Rating

General

Aetna is supplementing its filed prospective experience rating methodology with several alternative funding arrangements based on retrospective experience rating: Shared Surplus, Participating MCR (medical cost ratio) and Premium Offset.

Retrospective rating adds claim margin to the calculated prospective rates. At the end of the policy year, experience is reviewed. If claim results are less than estimated, a refund is made. If claims are greater than estimated, the deficit may be carried forward to be recovered in future policy periods.

A premium load is assessed to cover the additional risk in the arrangement. This is in addition to the normal retention charge in our prospective rating calculation.

Shared Surplus

The shared surplus premium rates are calculated using the filed prospective experience rating methodology multiplied by the premium load and claim margin listed below. The premium load and claims margin are determined by case size. Case size is defined by enrolled subscribers. The claim margin is included in the target MCR calculation, so it may be refunded to the customer through good experience.

Case Size	Premium Load	Claim Margin
150 - 249	1.5%	2.0%
250 - 499	1.0%	2.0%
500 +	0.75%	1.25%

How it Works

The customer prefunds the cost by paying Aetna a monthly premium. The premium is based on predetermined rates, multiplied by the number of employees insured that month. Aetna pays all claims incurred during the policy year.

After the completion of each policy year, we will provide the customer with a summary accounting of premiums paid and incurred claims and a year-end accounting is performed. The actual MCR is calculated using completed incurred claims. The calculated actual MCR for the year is compared to the target or expected MCR built into the premiums.

If the actual MCR is less than the target MCR, 50% of the difference is refundable to the customer.

If the actual MCR is greater than the target MCR, the deficit is not charged to the customer nor carried forward into subsequent accounting periods.

If the customer terminates in the year of a surplus, the surplus is retained by Aetna.

Shared Surplus Examples

The following examples illustrate the calculation of the Shared Surplus arrangement.

Claims (including pooling etc.)	\$ 300.00	a
Preliminary Premium*	\$ 369.32	b
Premium Load	1.50%	c
Claim Margin	2.00%	d
Final Premium Rate	\$ 382.24	$e=(b)*(1+c+d)$
Target MCR numerator	\$ 307.39	$f=a+(b*d)$
Target MCR	80.42%	$g=f/e$

Example 1: (refund)

Actual Claims	\$ 280.00	h
Actual MCR	73.25%	$i=h/e$
Refund percent	7.16%	$k=g-i$
Refund sharing	50%	l
Refund	\$ 13.69	$m=e*k*l$

Example 2: (deficit)

Actual Claims	\$ 320.00	n
Actual MCR	83.72%	$o=n/e$
Deficit percent	3.30%	$p=o-g$
Deficit Carryforward Percent	0%	q
Deficit Carryforward	\$ -	$s=e*p*q$

* Preliminary Premium will be calculated based on the prospective experience rating methodology on file with the state. The number shown here is for illustrative purpose only.

Participating MCR

The participating MCR premium rates are calculated using the filed prospective experience rating methodology multiplied by the premium load and claim margin listed below. The premium load and claims margin are determined by case size. Case size is defined by enrolled subscribers. The claim margin is included in the target MCR calculation, so it may be refunded to the customer through good experience.

A neutral corridor as a buffer around the target MCR is included in the participating MCR arrangement. If the actual MCR falls within the corridor, no surplus or deficit is applied for the year.

Case Size	Premium Load	Claim margin	MCR Corridor
150 - 249	0.85%	1.65%	+/-3%
250 - 499	0.75%	1.25%	+/-3%
500 +	0.35%	0.65%	+/-2%

How it Works

The customer prefunds the cost by paying Aetna a monthly premium. The premium is based on predetermined rates, multiplied by the number of employees insured that month. Aetna pays all claims incurred during the policy year.

After the completion of each policy year, we will provide the customer with a summary accounting of premiums paid and incurred claims and a year-end accounting is performed. A surplus results if the actual MCR (completed incurred claims for the period divided by paid premium) is less than the target MCR minus the corridor. (The corridor is a pre-established percent variation from the target MCR.) The amount payable to the customer equals 50% of the surplus.

A deficit results if the actual MCR is greater than the target MCR plus the corridor. The amount of deficit allocated to the customer will be equal to 25% of the deficit. Accumulated deficits are not payable to Aetna, but will apply in offsetting any future surpluses that would otherwise be payable.

If the customer terminates in the year of a surplus, that surplus is retained by Aetna.

Participating MCR Examples

The following examples illustrate the calculation of the Participating MCR arrangement.

Claims (including pooling etc.)	\$ 300.00	a
Preliminary Premium*	\$ 369.32	b
Risk Charge	0.85%	c
Claim Margin	1.65%	d
Final Premium Rate	\$ 378.55	$e=(b)*(1+c+d)$
Target MCR numerator	\$ 306.09	$f=a+(b*d)$
Target MCR	80.86%	$g=f/e$

Example 1: (refund)

Actual Claims	\$ 280.00	h
Actual MCR	73.97%	$i=h/e$
Corridor	3%	j
Refund percent	3.89%	$k=(g - j) - i$
Refund sharing	50%	l
Refund	\$ 7.36	$m=e*k*l$

Example 2: (deficit)

Actual Claims	\$ 320.00	n
Actual MCR	84.53%	$o=n/e$
Corridor	3%	p
Deficit percent	0.67%	$q=o- (g + p)$
Deficit Carryforward Percent	25%	r
Deficit Carryforward	\$ 0.63	$s=e*q*r$

* Preliminary Premium will be calculated based on the prospective experience rating methodology on file with the state. The number shown here is for illustrative purpose only.

Premium Offset

Aetna may accommodate a premium offset arrangement to reduce or postpone a portion of the premium amount due during the policy year. The Premium Offset premium rates are calculated using the filed prospective experience rating methodology multiplied by a premium offset factor. Aetna may require that the offset premium be held in reserve, referred to going forward as a Premium Stabilization Reserve (PSR). The premium offset factor is determined by case size. Case size is defined by enrolled subscribers.

How it Works

The customer prefunds the cost by paying Aetna a monthly premium. The premium is based on predetermined rates, multiplied by the number of employees insured that month. Aetna pays all claims incurred during the policy year.

After the completion of each policy year, we will provide the customer with a summary accounting of premiums paid and incurred claims, and a year-end accounting is performed.

If an experience deficit is calculated, premium can be called to either the lesser of the experience deficit or the original reduction in premium. If a surplus is calculated, there is no further exchange of funds.

In the premium offset arrangement, if the customer terminates in the year, the amount of the original premium reduction shall be payable to Aetna as a retrospective premium.

Premium Offset Examples

The following examples illustrate the calculation of the Premium Offset arrangement.

Claims (including pooling etc.)	\$300.00	a
Credited Premium*	\$369.32	b
Premium Offset Factor	5.00%	c
Paid Premium Rate	\$350.85	$d=(b)*(1-c)$
Premium Offset (reduction)	(\$18.47)	$e=(d)-(b)$
Premium Stabilization Reserve (if required)	\$0.00	$f=(e)$
Target MCR	85.50%	$g=(a)/(d)$

Example 1: (surplus)

Actual Claims	\$280.00	h
Retention	\$40.60	$i=(h)*(1-g)$
Unreimbursed Deficit(prior year)	\$0.00	j
PSR Requirement	\$0.00	$k=(f)$
Total Settlement	\$320.60	$l = (h)+(i)+(j)+(k)$
Paid Premium Rate	\$350.85	$m=(d)$
Surplus	\$30.25	$n=(m)-(l)$

Example 2: (deficit less than premium offset)

Actual Claims	\$320.00	o
Retention	\$46.40	$p=(o)*(1-g)$
Unreimbursed Deficit(prior year)	\$0.00	q
PSR Requirement	\$0.00	$r=(f)$
Total Settlement	\$366.40	$s = (o)+(p)+(q)+(r)$
Paid Premium Rate	\$350.85	$t=(d)$
Deficit	(\$15.55)	$u=(t)-(s)$
Experience Deficit Due	(\$15.55)	$v=\text{Lesser of (e) and (u)}$

Example 3: (deficit greater than premium offset)

Actual Claims	\$330.00	w
Retention	\$47.85	$x=(w)*(1-g)$
Unreimbursed Deficit(prior year)	\$0.00	y
PSR Requirement	\$0.00	$z=(f)$
Total Settlement	\$377.85	$aa = (w)+(x)+(y)+(z)$
Total Settlement	\$350.85	$ab=(d)$
Deficit	(\$27.00)	$ac=(ab)-(aa)$
Experience Deficit Due	(\$18.47)	$ad=\text{Lesser of (e) and (ac)}$

* Preliminary Premium will be calculated based on the prospective experience rating methodology on file with the state. The number shown here is for illustrative purpose only.

Aetna Health Inc.
District of Columbia
Summary of Rate Manual Changes
Effective July 1, 2012

Outside of the normal quarterly changes such as base rate, trend, and area factor, the following changes have been made effective July 1, 2012.

Medical Benefit Factors

Last quarter we submitted structural table changes in support of Health Care Reform Women's Health mandate benefit so that our systems can be modified as necessary. This quarter we have included line item weight changes to correspond to the structural changes. Line item weights that have changed have been highlighted on the Rate Development Worksheet pages of our manual.

PMPM Retention Updates

We have updated our PMPM retention factors. The updated factors have been highlighted.

Pharmacy Base Rate

In support of the Health Care Reform Women's Health mandate to cover contraceptives, we have adjusted our Pharmacy Base rate and contraceptive coverage table to reflect that all pharmacy plans include contraceptive coverage. The revised base rate and factor table have been highlighted.

Appendix C

Changes to our rate manual that affect the Portfolio Rating methodology and the example provided in Appendix C, have been highlighted in the attached Appendix C. In addition to the rate manual changes, we intend to change the eligibility requirements for Portfolio Rating from up to 124 to up to 250 if system changes are implemented on a timely basis.

Section G – Medical Benefit Plans for Groups with 51-100 Eligible Employees

To ensure a smooth transition into 2014, when Healthcare Reform requires the definition of small groups to change from groups with fewer than 50 lives, to groups with 100 or fewer lives, we are moving our large group 51-100 block of business on to the current small group rating methodology effective 8/1/2012. The current large group 100+ manual rating methodology begins with a \$0 copay base rate and adjust for each benefit categories with cost sharing tables. The large group customers have a lot of flexibility in choosing the plan/benefit design they want. The current small group manual rating methodology offers only packaged plans. These new base rates and rating factors were based on Aetna's current approved small group methodology. Since these package plans will be offered to this block of business for the first time, there is no rate change.

North Capitol Region
HMO BASED Medical and Rx
SELECT and KEY Net Trends

Month/Year incurred	Membership	Medical PMPM				Medical Trend			
		1-month	3-month rolling	6-month rolling	12-month rolling	1-month	3-month rolling	6-month rolling	12-month rolling
Jan-07	37,352	233.00							
Feb-07	37,662	216.48							
Mar-07	37,405	248.79	232.72						
Apr-07	36,691	245.35	236.77						
May-07	36,905	257.30	250.48						
Jun-07	36,657	241.04	247.92	240.25					
Jul-07	37,092	233.98	244.10	240.42					
Aug-07	36,946	246.01	240.34	245.42					
Sep-07	36,885	223.15	234.39	241.13					
Oct-07	37,630	248.68	239.35	241.72					
Nov-07	38,227	238.42	236.85	238.58					
Dec-07	38,986	219.93	235.50	234.96	237.58				
Jan-08	36,120	257.51	238.14	238.74	239.57	10.5%			
Feb-08	35,546	267.64	247.52	242.14	243.77	23.6%			
Mar-08	35,771	266.06	263.71	249.14	245.14	6.9%	13.3%		
Apr-08	35,986	283.08	272.29	254.75	248.21	15.4%	15.0%		
May-08	36,349	267.09	272.07	259.65	249.00	3.8%	8.6%		
Jun-08	36,556	252.61	267.51	265.62	249.96	4.8%	7.9%	10.6%	
Jul-08	35,777	272.82	264.10	268.17	253.16	16.6%	8.2%	11.5%	
Aug-08	36,116	257.22	260.81	266.43	254.09	4.6%	8.5%	8.6%	
Sep-08	35,805	267.01	265.65	266.59	257.75	19.7%	13.3%	10.6%	
Oct-08	35,321	284.43	269.45	266.76	260.69	14.4%	12.6%	10.4%	
Nov-08	35,109	243.53	265.04	262.90	261.26	2.1%	11.9%	10.2%	
Dec-08	34,297	268.80	265.60	265.63	265.63	22.2%	12.8%	13.1%	11.8%
Jan-09	31,950	271.69	260.96	265.32	266.77	5.5%	9.6%	11.1%	11.4%
Feb-09	31,490	280.17	273.41	269.05	267.70	4.7%	10.5%	11.1%	9.8%
Mar-09	31,714	304.11	285.30	274.98	270.62	14.3%	8.2%	10.4%	10.4%
Apr-09	31,884	290.69	291.68	275.83	271.08	2.7%	7.1%	8.3%	9.2%
May-09	33,387	290.30	294.94	284.14	273.00	8.7%	8.4%	9.4%	9.6%
Jun-09	33,951	283.26	288.02	286.69	275.69	12.1%	7.7%	7.9%	10.3%
Jul-09	33,337	310.92	294.75	293.26	278.85	14.0%	11.6%	9.4%	10.1%
Aug-09	33,457	272.45	288.82	291.83	280.26	5.9%	10.7%	9.5%	10.3%
Sep-09	32,829	264.97	282.86	285.43	280.19	-0.8%	6.5%	7.1%	8.7%
Oct-09	32,237	301.05	279.32	287.12	281.51	5.8%	3.7%	7.6%	8.0%
Nov-09	31,721	271.43	279.11	284.06	284.10	11.5%	5.3%	8.0%	8.7%
Dec-09	31,234	255.34	276.18	279.60	283.14	-5.0%	4.0%	5.3%	6.6%
Jan-10	27,217	275.98	267.23	273.54	283.58	1.6%	2.4%	3.1%	6.3%
Feb-10	27,048	255.81	262.06	271.11	281.89	-8.7%	-4.2%	0.8%	5.3%
Mar-10	26,879	313.78	281.78	278.76	282.29	3.2%	-1.2%	1.4%	4.3%
Apr-10	26,525	300.12	289.79	277.87	282.85	3.2%	-0.7%	0.7%	4.3%
May-10	26,647	282.02	298.68	279.77	282.10	-2.9%	1.3%	-1.5%	3.3%
Jun-10	25,453	274.38	285.65	283.68	281.44	-3.1%	-0.8%	-1.0%	2.1%
Jul-10	25,274	265.42	274.08	282.09	277.43	-14.6%	-7.0%	-3.8%	-0.5%
Aug-10	25,215	279.56	273.12	286.24	278.09	2.6%	-5.4%	-1.9%	-0.8%
Sep-10	24,528	289.23	277.96	281.90	280.22	9.2%	-1.7%	-1.2%	0.0%
Oct-10	25,994	297.91	288.99	281.46	279.56	-1.0%	3.5%	-2.0%	-0.7%
Nov-10	24,976	269.99	285.85	279.47	279.62	-0.5%	2.4%	-1.6%	-1.6%
Dec-10	25,153	268.81	279.14	278.55	281.19	5.3%	1.1%	-0.4%	-0.7%
Jan-11	25,206	253.26	264.00	276.53	279.37	-8.2%	-1.2%	1.1%	-1.5%
Feb-11	25,345	269.56	263.88	274.85	280.63	5.4%	0.7%	1.4%	-0.4%
Mar-11	24,918	283.50	268.72	273.95	277.95	-9.6%	-4.6%	-1.7%	-1.5%
Apr-11	25,064	280.75	277.89	270.95	276.24	-6.5%	-4.1%	-2.5%	-2.3%
May-11	24,727	259.16	274.52	269.17	274.34	-8.1%	-8.1%	-3.8%	-2.8%
Jun-11	25,517	281.57	273.94	271.33	274.94	2.6%	-4.1%	-4.4%	-2.3%
Jul-11	27,211	261.47	267.35	272.55	274.53	-1.5%	-2.5%	-3.4%	-1.0%
Aug-11	27,573	319.40	287.75	281.37	278.15	14.3%	5.4%	-1.7%	0.0%
Sep-11	27,273	290.04	290.43	282.54	278.32	0.3%	4.5%	0.2%	-0.7%
Oct-11	27,233	262.50	290.77	279.40	275.29	-11.9%	0.6%	-0.7%	-1.5%
Nov-11	27,855	264.19	272.19	279.87	274.73	-2.2%	-4.8%	0.1%	-1.8%
Dec-11	28,903	283.87	270.41	280.31	276.03	5.6%	-3.1%	0.6%	-1.8%

a Projected 2011 Net Trend (NOT Adjusted for Demo, Benefits and Industry)	-1.8%
b Change in Industry	-0.5%
c Change in Demo	1.7%
d Change in Plan	-1.5%
e Change in High Claims	-1.4%
f Projected 2011 Adjusted Net Trend (Adjusted for Demo, Benefits and Industry)	0.0%
g Estimated claims impact due to expanded COBRA benefits	-0.8%
h Estimated claims impact due to seasonal flu / snow	0.0%
i FY 2011 Adjusted Gross Trend (1+f) / (1+g) / (1+h) -1	0.8%
j Impact of Medical Management Initiatives	-3.6%
k FY 2011 Projected Gross Trend (1+i) / (1+j) -1	4.5%
l FY 2011 Adjusted Gross Trend k	0.8%
m 2011 to 2012 P-model (medical unit cost) changes	0.1%
n 2011 to 2012 Estimated claims utilization and RX cost changes	3.6%
n1 Leap Year Adjustment	0.3%
o FY 2012 Adjusted Gross Trend (1+l) * (1+m) * (1+n) * (1+n1) -1	4.9%
p Impact of Medical Management Initiatives x 50%	-1.5%
q FY 2012 Projected Gross Trend (1+o) / (1+p) -1	6.5%

**Aetna Health Inc.
District of Columbia
Annual Rate Change History Summary**

	Base Medical Plan	Base Pharmacy Plan	Composite Medical and Pharmacy
1Q10	11.1%	12.1%	11.1%
2Q10	6.5%	33.2%	10.3%
3Q10	4.5%	30.1%	8.2%
4Q10	-0.4%	26.3%	3.4%
1Q11	-1.0%	22.6%	2.5%
2Q11	-2.0%	-2.2%	-2.0%
3Q11	-7.1%	-6.9%	-7.0%
4Q11	-6.4%	-6.8%	-6.5%
1Q12	-5.0%	-5.8%	-5.1%
2Q12	-1.2%	-3.5%	-1.6%
3Q12	3.6%	5.3%	3.9%

**Aetna Health Inc.
District of Columbia
Annual Rate Change Summary**

**Manual Rates
7/1/12 thru 9/30/12**

	Medical		Pharmacy + Self Inj		Composite	
	3Q11	3Q12	3Q11	3Q12	3Q11	3Q12
Base PMPM	\$281.34	\$289.12	\$62.58	\$65.81		
Flat \$ Retention	\$28.45	\$31.75	\$2.10	\$2.30		
% Retention	6.70%	6.70%	6.70%	6.70%		
Tax	2.70%	2.70%	2.70%	2.70%		
Commission	0.00%	0.00%	0.00%	0.00%		
Gross PMPM	\$341.93	\$354.16	\$71.39	\$75.18	\$413.32	\$429.34
		3.6%		5.3%		3.9%

**Aetna Health Inc.
District of Columbia
Quarterly Rate Change Summary**

**Manual Rates
7/1/12 thru 9/30/12**

	Medical		Pharmacy + Self Inj		Composite	
	2Q12	3Q12	2Q12	3Q12	2Q12	3Q12
Base PMPM	\$289.12	\$289.12	\$62.97	\$65.81		
Flat \$ Retention	\$29.95	\$31.75	\$2.20	\$2.30		
% Retention	6.70%	6.70%	6.70%	6.70%		
Tax	2.70%	2.70%	2.70%	2.70%		
Commission	0.00%	0.00%	0.00%	0.00%		
Gross PMPM	\$352.17	\$354.16	\$71.93	\$75.18	\$424.10	\$429.34
		0.6%		4.5%		1.2%

Aetna Health Inc.
 District of Columbia
 Commercial Data

Exhibit B

	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09	Jul-09	Aug-09	Sep-09	Oct-09	Nov-09	Dec-09
Member Months	31,307	31,359	31,202	31,217	31,188	31,486	31,383	31,350	31,644	31,330	31,161	30,958
Incurred Claims	\$ 7,970,089	\$ 8,425,512	\$ 9,582,666	\$ 8,697,389	\$ 8,260,237	\$ 8,360,600	\$ 10,031,266	\$ 9,331,282	\$ 8,376,682	\$ 8,977,095	\$ 8,617,585	\$ 8,624,499
Member Premium	\$ 11,580,471	\$ 11,549,835	\$ 11,542,238	\$ 11,572,823	\$ 11,526,165	\$ 12,508,896	\$ 11,602,149	\$ 11,605,788	\$ 11,770,926	\$ 11,618,571	\$ 11,485,826	\$ 11,528,033
	68.8%	72.9%	83.0%	75.2%	71.7%	66.8%	86.5%	80.4%	71.2%	77.3%	75.0%	74.8%

Rolling 12 Months Ending:

Member Months	375,585
Incurred Claims	\$ 105,254,902
Member Premium	\$ 139,891,721
	75.2%

Aetna Health Inc.
 District of Columbia
 Commercial Data

Exhibit B

	Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10
Member Months	19,815	19,717	19,687	19,639	19,652	19,693	19,664	19,620	19,597	19,663	19,746	20,020
Incurred Claims	\$ 4,721,291	\$ 4,086,844	\$ 5,561,647	\$ 5,364,911	\$ 5,470,320	\$ 5,140,581	\$ 5,778,952	\$ 4,627,441	\$ 4,832,680	\$ 5,382,676	\$ 5,302,338	\$ 5,894,264
Member Premium	\$ 7,137,201	\$ 7,203,466	\$ 7,215,587	\$ 7,195,018	\$ 7,213,401	\$ 7,208,434	\$ 7,216,511	\$ 7,188,339	\$ 7,183,256	\$ 7,221,696	\$ 7,205,004	\$ 7,264,241
	66.2%	56.7%	77.1%	74.6%	75.8%	71.3%	80.1%	64.4%	67.3%	74.5%	73.6%	81.1%
Rolling 12 Months Ending:	Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10
Member Months	364,093	352,451	340,936	329,358	317,822	306,029	294,310	282,580	270,533	258,866	247,451	236,513
Incurred Claims	\$ 102,006,104	\$ 97,667,436	\$ 93,646,416	\$ 90,313,939	\$ 87,524,022	\$ 84,304,004	\$ 80,051,690	\$ 75,347,849	\$ 71,803,847	\$ 68,209,428	\$ 64,894,181	\$ 62,163,947
Member Premium	\$ 135,448,451	\$ 131,102,082	\$ 126,775,431	\$ 122,397,625	\$ 118,084,861	\$ 112,784,399	\$ 108,398,761	\$ 103,981,312	\$ 99,393,642	\$ 94,996,768	\$ 90,715,945	\$ 86,452,153
	75.3%	74.5%	73.9%	73.8%	74.1%	74.7%	73.8%	72.5%	72.2%	71.8%	71.5%	71.9%

Aetna Health Inc.
 District of Columbia
 Commercial Data

Exhibit B

	Jan-11	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11
Member Months	20,013	19,889	19,893	19,933	19,723	19,661	19,574	19,609	19,588	19,566	19,397	19,433
Incurred Claims	\$ 6,178,907	\$ 6,113,748	\$ 6,318,636	\$ 5,749,580	\$ 5,012,195	\$ 5,919,201	\$ 5,358,914	\$ 5,344,663	\$ 5,786,271	\$ 5,579,526	\$ 5,422,638	\$ 5,800,489
Member Premium	\$ 7,758,942	\$ 7,704,884	\$ 7,705,092	\$ 7,706,782	\$ 7,618,722	\$ 7,562,626	\$ 7,552,152	\$ 7,542,589	\$ 7,528,304	\$ 7,514,466	\$ 7,428,056	\$ 6,003,524
	79.6%	79.3%	82.0%	74.6%	65.8%	78.3%	71.0%	70.9%	76.9%	74.3%	73.0%	96.6%
Rolling 12 Months Ending:	Jan-11	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11
Member Months	236,711											
Incurred Claims	\$ 63,621,563	\$ 65,648,467	\$ 66,405,456	\$ 66,790,125	\$ 66,331,999	\$ 67,110,619	\$ 66,690,581	\$ 67,407,803	\$ 68,361,394	\$ 68,558,244	\$ 68,678,544	\$ 68,584,769
Member Premium	\$ 87,073,894	\$ 87,575,312	\$ 88,064,817	\$ 88,576,581	\$ 88,981,903	\$ 89,336,095	\$ 89,671,736	\$ 90,025,986	\$ 90,371,034	\$ 90,663,804	\$ 90,886,856	\$ 89,626,139
	73.1%	75.0%	75.4%	75.4%	74.5%	75.1%	74.4%	74.9%	75.6%	75.6%	75.6%	76.5%