

SERFF Tracking #: CFAP-128905891

State Tracking #: District of Columbia

Company Tracking #: 1867

1867

Group Hospitalization and Medical Services, Inc.

State: District of Columbia
 TOI/Sub-TOI: H21 Health - Other/H21.000 Health - Other
 Product Name: DC PPO UW & HIPAA - PPACA
 Project Name/Number: 1867_DC PPO UW & HIPAA - PPACA /1867

Filing Company: Group Hospitalization and Medical Services, Inc.

Rate Information

Rate data applies to filing.

Filing Method: SERFF
 Rate Change Type: Increase
 Overall Percentage of Last Rate Revision: 8.200%
 Effective Date of Last Rate Revision: 04/01/2013
 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 req'd):	Minimum % Change (where req'd):
Group Hospitalization and Medical Services, Inc.	Increase	3.900%	3.900%	\$419,636	3,259	\$9,577,969	7.300%	-0.040%

Product Type:	HMO	PPO	EPO	POS	HSA	HDHP	FFS	Other
Covered Lives:		1,170			3,044			
Policy Holders:		978			2,281			

State: District of Columbia Filing Company: Group Hospitalization and Medical Services, Inc.
 TOI/Sub-TOI: H21 Health - Other/H21.000 Health - Other
 Product Name: DC PPO UW & HIPAA - PPACA
 Project Name/Number: 1867_DC PPO UW & HIPAA - PPACA /1867

Rate Review Detail

COMPANY:

Company Name: Group Hospitalization and Medical Services, Inc.
 HHS Issuer Id: 78079
 Product Names: UW Standard, UW Saver, UW HSA, HIPAA Standard
 Trend Factors:

FORMS:

New Policy Forms:
 Affected Forms:
 Other Affected Forms: D/DP-IEA-5/95, DC/CF/IND RX3 (1/03), DC/CF/IND RX3 (R. 7/09), DC/IEA/HIPAA (10/97), PPP-A/DC-4/96, DC/CF/DB/BP (7/07), DC/GHMSI/DOL APPEAL (3/06), DC/CF/DB/ELIG HIPAA (R. 2/06), DC/CF/DB/ELIG SCH (R. 2/06), DC/CF/BP/DB/IEA HIPAA (7/08), DC/CF/BP/DB/IEA (7/08), DC/CF/BP/DOCS (7/08), DC/CF/DB/BP (R. 3/08), DC/CF/DB/ELIG HIPAA (7/08), DC/CF/DB/ELIG (7/08), DC/CF/LCRX (1/05), DC/CF/LCRX (R. 7/09), DC/DP-IEA-9/95, DC/CF/DB/SOB/LC70 (7/07), DC/CF/DB/SOB/LC100 (7/07), DC/CF/DB SAVER SOB (7/08), DC/CF/IND HSA RX3 (R. 7/09), DC/CF/HSA80 (R. 7/07), DC/CF/HSA100 (R. 7/07), DC/CF/IND HSA RX3 (R. 7/06), DC/CF/DB HSA SOB (7/08), DC/CF/DB/NGF/PPACA (9/10), DC/CF/DB/DEPENDENT AGE (9/10), and any amendments

REQUESTED RATE CHANGE INFORMATION:

Change Period: Quarterly
 Member Months: 45,256
 Benefit Change: Increase
 Percent Change Requested: Min: -0.04 Max: 7.3 Avg: 3.9

PRIOR RATE:

Total Earned Premium: 10,720,380.00
 Total Incurred Claims: 7,759,455.00
 Annual \$: Min: 189.45 Max: 1,211.33 Avg: 236.88

REQUESTED RATE:

Projected Earned Premium: 11,140,016.00
 Projected Incurred Claims: 8,900,552.00
 Annual \$: Min: 189.36 Max: 1,299.25 Avg: 246.16

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1867

State:

District of Columbia

Filing Company:

Group Hospitalization and Medical Services, Inc.

TOI/Sub-TOI:

H21 Health - Other/H21.000 Health - Other

Product Name:

DC PPO UW & HIPAA - PPACA

Project Name/Number:

1867_DC PPO UW & HIPAA - PPACA /1867

Rate/Rule Schedule

SERFF Tracking #:

CFAP-128905891

State Tracking #:

Company Tracking #:

1867

State:

District of Columbia

Filing Company:

Group Hospitalization and Medical Services, Inc.

TOI/Sub-TOI:

H21 Health - Other/H21.000 Health - Other

Product Name:

DC PPO UW & HIPAA - PPACA

Project Name/Number:

1867_DC PPO UW & HIPAA - PPACA /1867

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
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State: District of Columbia
TOI/Sub-TOI: H21 Health - Other/H21.000 Health - Other
Product Name: DC PPO UW & HIPAA - PPACA
Project Name/Number: 1867_DC PPO UW & HIPAA - PPACA /1867

Filing Company:

Group Hospitalization and Medical Services, Inc.

1	1867_DC PPO UW & HIPAA - PPACA - Rate Filing	D/DP-IEA-5/95, DC/CF/IND RX3 (1/03), DC/CF/IND RX3 (R. 7/09), DC/IEA/HIPAA (10/97), PPP-A/DC-4/96, DC/CF/DB/BP (7/07), DC/GHMSI/DOL APPEAL (3/06), DC/CF/DB/ELIG HIPAA (R. 2/06), DC/CF/DB/ELIG SCH (R. 2/06), DC/CF/BP/DB/IEA HIPAA (7/08), DC/CF/BP/DB/IEA (7/08), DC/CF/BP/DOCS (7/08), DC/CF/DB/BP (R. 3/08), DC/CF/DB/ELIG HIPAA (7/08), DC/CF/DB/ELIG (7/08), DC/CF/LCRX (1/05), DC/CF/LCRX (R. 7/09), DC/DP-IEA-9/95, DC/CF/DB/SOB/LC70 (7/07), DC/CF/DB/SOB/LC100 (7/07), DC/CF/DB SAVER SOB (7/08), DC/CF/IND HSA RX3 (R. 7/09), DC/CF/HSA80 (R. 7/07), DC/CF/HSA100 (R. 7/07), DC/CF/IND HSA RX3 (R. 7/06), DC/CF/DB HSA SOB (7/08), DC/CF/DB/NGF/PPACA (9/10), DC/CF/DB/DEPENDENT AGE (9/10), and any amendments	Revised	Previous State Filing Number: CFAP-128718553 or 1830 Percent Rate Change Request: 4.6	1867_DC_PPO UW & HIPAA - PPACA (Q3_Q4 Combined) - Rate Filing - 5-2-13.pdf,
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**GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
PPO (BluePreferred)**

District of Columbia

**Underwritten & HIPAA
Standard, Saver, and HSA - PPACA
Medical & Rx**

**Rate Filing # 1867
Rate Filing**

Effective 7/1/2013

GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
PPO (BluePreferred)
District of Columbia
Underwritten & HIPAA
Standard, Saver, and HSA - PPACA
Rate Filing # 1867
Rate Filing
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Effective 7/1/2013

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**GHMSI dba
CareFirst BlueCross BlueShield
INDIVIDUAL, NON-MEDIGAP
District of Columbia
PPO/BluePreferred
Underwritten Standard, Saver and HSA Plans
Form Numbers**

Underwritten (Standard):

D/DP-IEA-5/95
DC/CF/IND RX3 (1/03)
DC/CF/IND RX3 (R. 7/09)
DC/IEA/HIPAA (10/97)
PPP-A/DC-4/96
DC/CF/DB/BP (7/07)
DC/GHMSI/DOL APPEAL (3/06)
DC/CF/IND RX3 (R. 7/09)
DC/CF/DB/ELIG HIPAA (R. 2/06)
DC/CF/DB/ELIG SCH (R. 2/06)
DC/CF/BP/DB/IEA HIPAA (7/08)
DC/CF/BP/DB/IEA (7/08)
DC/CF/BP/DOCS (7/08)
DC/CF/DB/BP (R. 3/08)
DC/CF/DB/ELIG HIPAA (7/08)
DC/CF/DB/ELIG (7/08)
and any amendments

PPACA:

DC/CF/DB/NGF/PPACA (9/10)
DC/CF/DB/DEPENDENT AGE (9/10)

Underwritten Saver:

DC/CF/LCRX (1/05)
DC/CF/LCRX (R. 7/09)
DC/DP-IEA-9/95
PPP-A/DC-4/96
DC/CF/DB/SOB/LC70 (7/07)
DC/CF/DB/SOB/LC100 (7/07)
DC/GHMSI/DOL APPEAL (3/06)
DC/CF/DB/ELIG SCH (R. 2/06)
DC/CF/BP/DB/IEA (7/08)
DC/CF/BP/DOCS (7/08)
DC/CF/DB SAVER SOB (7/08)
DC/CF/DB/ELIG (7/08)
and any amendments

PPACA:

DC/CF/DB/NGF/PPACA (9/10)
DC/CF/DB/DEPENDENT AGE (9/10)

Underwritten Health Savings Account (HSA):

DC/CF/IND HSA RX3 (R. 7/09)
DC/DP-IEA-9/95
PPP-A/DC-4/96
DC/CF/HSA80 (R. 7/07)
DC/CF/HSA100 (R. 7/07)
DC/GHMSI/DOL APPEAL (3/06)
DC/CF/IND HSA RX3 (R. 7/06)
DC/CF/DB/ELIG SCH (R. 2/06)
DC/CF/BP/DB/IEA (7/08)
DC/CF/BP/DOCS (7/08)
DC/CF/DB HSA SOB (7/08)
DC/CF/DB/ELIG (7/08)
and any amendments

PPACA:

DC/CF/DB/NGF/PPACA (9/10)
DC/CF/DB/DEPENDENT AGE (9/10)

HIPAA (Standard):

D/DP-IEA-5/95
DC/CF/IND RX3 (R. 7/09)
DC/IEA/HIPAA (10/97)
PPP-A/DC-4/96
DC/CF/DB/BP (7/07)
DC/GHMSI/DOL APPEAL (3/06)
DC/CF/IND RX3 (R. 7/09)
DC/CF/DB/ELIG HIPAA (R. 2/06)
DC/CF/DB/ELIG SCH (R. 2/06)
DC/CF/BP/DB/IEA HIPAA (7/08)
DC/CF/BP/DB/IEA (7/08)
DC/CF/BP/DOCS (7/08)
DC/CF/DB/BP (R. 3/08)
DC/CF/DB/ELIG HIPAA (7/08)
DC/CF/DB/ELIG (7/08)
and any amendments

PPACA:

DC/CF/DB/NGF/PPACA (9/10)
DC/CF/DB/DEPENDENT AGE (9/10)

GHMSI dba CareFirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$100 Ded 90% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$100	\$300
90% / 10%	70% / 30%
\$2,500	\$5,000

Base Rate **\$437.23**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$240.48			
6-18	\$214.24	\$432.77	\$428.49	\$582.74
19-20	\$317.87	\$642.09	\$635.73	\$864.60
21	\$317.87	\$642.09	\$635.73	\$864.60
22	\$317.87	\$642.09	\$635.73	\$864.60
23	\$317.87	\$642.09	\$635.73	\$864.60
24	\$317.87	\$642.09	\$635.73	\$864.60
25	\$317.87	\$642.09	\$635.73	\$864.60
26	\$317.87	\$642.09	\$635.73	\$864.60
27	\$317.87	\$642.09	\$635.73	\$864.60
28	\$317.87	\$642.09	\$635.73	\$864.60
29	\$317.87	\$642.09	\$635.73	\$864.60
30	\$317.87	\$642.09	\$635.73	\$864.60
31	\$317.87	\$642.09	\$635.73	\$864.60
32	\$317.87	\$642.09	\$635.73	\$864.60
33	\$326.17	\$658.87	\$652.35	\$887.19
34	\$338.85	\$684.48	\$677.71	\$921.68
35	\$351.97	\$710.98	\$703.94	\$957.36
36	\$365.52	\$738.36	\$731.05	\$994.23
37	\$379.95	\$767.50	\$759.91	\$1,033.47
38	\$394.82	\$797.53	\$789.64	\$1,073.91
39	\$410.12	\$828.45	\$820.24	\$1,115.53
40	\$426.30	\$861.12	\$852.60	\$1,159.53
41	\$442.91	\$894.69	\$885.83	\$1,204.73
42	\$460.40	\$930.01	\$920.81	\$1,252.30
43	\$478.33	\$966.23	\$956.66	\$1,301.06
44	\$497.13	\$1,004.20	\$994.26	\$1,352.19
45	\$516.37	\$1,043.06	\$1,032.74	\$1,404.52
46	\$536.48	\$1,083.69	\$1,072.96	\$1,459.23
47	\$557.47	\$1,126.09	\$1,114.94	\$1,516.31
48	\$579.33	\$1,170.25	\$1,158.66	\$1,575.78
49	\$602.07	\$1,216.17	\$1,204.13	\$1,637.62
50	\$625.68	\$1,263.87	\$1,251.35	\$1,701.84
51	\$650.16	\$1,313.33	\$1,300.32	\$1,768.44
52	\$675.52	\$1,364.55	\$1,351.04	\$1,837.42
53	\$701.75	\$1,417.54	\$1,403.51	\$1,908.77
54	\$729.30	\$1,473.19	\$1,458.60	\$1,983.70
55	\$757.72	\$1,530.59	\$1,515.44	\$2,061.00
56	\$787.45	\$1,590.65	\$1,574.90	\$2,141.87
57	\$818.06	\$1,652.48	\$1,636.11	\$2,225.12
58	\$849.98	\$1,716.95	\$1,699.95	\$2,311.93
59	\$883.20	\$1,784.07	\$1,766.41	\$2,402.32
60	\$917.75	\$1,853.85	\$1,835.49	\$2,496.27
61	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
62	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
63	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
64	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
65	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
>65 Non-Medicare Eligible	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
>65 Medicare Eligible **	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$300 Ded 90% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$300	\$600
90% / 10%	70% / 30%
\$2,500	\$5,000

Base Rate **\$353.29**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$194.31			
6-18	\$173.11	\$349.69	\$346.22	\$470.86
19-20	\$256.84	\$518.82	\$513.68	\$698.61
21	\$256.84	\$518.82	\$513.68	\$698.61
22	\$256.84	\$518.82	\$513.68	\$698.61
23	\$256.84	\$518.82	\$513.68	\$698.61
24	\$256.84	\$518.82	\$513.68	\$698.61
25	\$256.84	\$518.82	\$513.68	\$698.61
26	\$256.84	\$518.82	\$513.68	\$698.61
27	\$256.84	\$518.82	\$513.68	\$698.61
28	\$256.84	\$518.82	\$513.68	\$698.61
29	\$256.84	\$518.82	\$513.68	\$698.61
30	\$256.84	\$518.82	\$513.68	\$698.61
31	\$256.84	\$518.82	\$513.68	\$698.61
32	\$256.84	\$518.82	\$513.68	\$698.61
33	\$263.55	\$532.38	\$527.11	\$716.87
34	\$273.80	\$553.08	\$547.60	\$744.74
35	\$284.40	\$574.48	\$568.80	\$773.56
36	\$295.35	\$596.61	\$590.70	\$803.35
37	\$307.01	\$620.16	\$614.02	\$835.06
38	\$319.02	\$644.42	\$638.04	\$867.74
39	\$331.39	\$669.40	\$662.77	\$901.37
40	\$344.46	\$695.80	\$688.92	\$936.93
41	\$357.88	\$722.92	\$715.77	\$973.44
42	\$372.01	\$751.47	\$744.03	\$1,011.88
43	\$386.50	\$780.73	\$773.00	\$1,051.28
44	\$401.69	\$811.42	\$803.38	\$1,092.60
45	\$417.24	\$842.82	\$834.47	\$1,134.88
46	\$433.49	\$875.64	\$866.97	\$1,179.08
47	\$450.44	\$909.90	\$900.89	\$1,225.21
48	\$468.11	\$945.58	\$936.22	\$1,273.26
49	\$486.48	\$982.69	\$972.96	\$1,323.23
50	\$505.56	\$1,021.23	\$1,011.12	\$1,375.12
51	\$525.34	\$1,061.19	\$1,050.68	\$1,428.93
52	\$545.83	\$1,102.58	\$1,091.67	\$1,484.67
53	\$567.03	\$1,145.40	\$1,134.06	\$1,542.32
54	\$589.29	\$1,190.36	\$1,178.58	\$1,602.86
55	\$612.25	\$1,236.75	\$1,224.50	\$1,665.32
56	\$636.28	\$1,285.28	\$1,272.55	\$1,730.67
57	\$661.01	\$1,335.23	\$1,322.01	\$1,797.94
58	\$686.80	\$1,387.33	\$1,373.59	\$1,868.08
59	\$713.65	\$1,441.56	\$1,427.29	\$1,941.12
60	\$741.56	\$1,497.94	\$1,483.11	\$2,017.03
61	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
62	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
63	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
64	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
65	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
>65 Non-Medicare Eligible	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
>65 Medicare Eligible **	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

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GHMSI dba CareFirst BlueCross BlueShield
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 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$300	\$600
80% / 20%	60% / 40%
\$2,500	\$5,000

Base Rate **\$338.46**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$186.15			
6-18	\$165.85	\$335.01	\$331.69	\$451.10
19-20	\$246.06	\$497.04	\$492.12	\$669.28
21	\$246.06	\$497.04	\$492.12	\$669.28
22	\$246.06	\$497.04	\$492.12	\$669.28
23	\$246.06	\$497.04	\$492.12	\$669.28
24	\$246.06	\$497.04	\$492.12	\$669.28
25	\$246.06	\$497.04	\$492.12	\$669.28
26	\$246.06	\$497.04	\$492.12	\$669.28
27	\$246.06	\$497.04	\$492.12	\$669.28
28	\$246.06	\$497.04	\$492.12	\$669.28
29	\$246.06	\$497.04	\$492.12	\$669.28
30	\$246.06	\$497.04	\$492.12	\$669.28
31	\$246.06	\$497.04	\$492.12	\$669.28
32	\$246.06	\$497.04	\$492.12	\$669.28
33	\$252.49	\$510.03	\$504.98	\$686.78
34	\$262.31	\$529.86	\$524.61	\$713.47
35	\$272.46	\$550.37	\$544.92	\$741.09
36	\$282.95	\$571.56	\$565.91	\$769.63
37	\$294.12	\$594.13	\$588.24	\$800.01
38	\$305.63	\$617.37	\$611.26	\$831.31
39	\$317.48	\$641.30	\$634.95	\$863.53
40	\$330.00	\$666.60	\$660.00	\$897.60
41	\$342.86	\$692.58	\$685.72	\$932.58
42	\$356.40	\$719.92	\$712.80	\$969.40
43	\$370.28	\$747.96	\$740.55	\$1,007.15
44	\$384.83	\$777.35	\$769.66	\$1,046.73
45	\$399.72	\$807.44	\$799.44	\$1,087.24
46	\$415.29	\$838.89	\$830.58	\$1,129.59
47	\$431.54	\$871.70	\$863.07	\$1,173.78
48	\$448.46	\$905.89	\$896.92	\$1,219.81
49	\$466.06	\$941.44	\$932.12	\$1,267.68
50	\$484.34	\$978.36	\$968.67	\$1,317.39
51	\$503.29	\$1,016.65	\$1,006.58	\$1,368.95
52	\$522.92	\$1,056.30	\$1,045.84	\$1,422.34
53	\$543.23	\$1,097.32	\$1,086.46	\$1,477.58
54	\$564.55	\$1,140.39	\$1,129.10	\$1,535.58
55	\$586.55	\$1,184.83	\$1,173.10	\$1,595.42
56	\$609.57	\$1,231.32	\$1,219.13	\$1,658.02
57	\$633.26	\$1,279.18	\$1,266.52	\$1,722.46
58	\$657.97	\$1,329.09	\$1,315.93	\$1,789.67
59	\$683.69	\$1,381.05	\$1,367.38	\$1,859.63
60	\$710.43	\$1,435.06	\$1,420.86	\$1,932.36
61	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
62	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
63	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
64	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
65	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
>65 Non-Medicare Eligible	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
>65 Medicare Eligible **	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$500 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$500	\$1,000
80% / 20%	60% / 40%
\$2,500	\$5,000

Base Rate **\$323.10**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$177.71			
6-18	\$158.32	\$319.80	\$316.64	\$430.63
19-20	\$234.89	\$474.49	\$469.79	\$638.91
21	\$234.89	\$474.49	\$469.79	\$638.91
22	\$234.89	\$474.49	\$469.79	\$638.91
23	\$234.89	\$474.49	\$469.79	\$638.91
24	\$234.89	\$474.49	\$469.79	\$638.91
25	\$234.89	\$474.49	\$469.79	\$638.91
26	\$234.89	\$474.49	\$469.79	\$638.91
27	\$234.89	\$474.49	\$469.79	\$638.91
28	\$234.89	\$474.49	\$469.79	\$638.91
29	\$234.89	\$474.49	\$469.79	\$638.91
30	\$234.89	\$474.49	\$469.79	\$638.91
31	\$234.89	\$474.49	\$469.79	\$638.91
32	\$234.89	\$474.49	\$469.79	\$638.91
33	\$241.03	\$486.89	\$482.07	\$655.61
34	\$250.40	\$505.81	\$500.81	\$681.09
35	\$260.10	\$525.39	\$520.19	\$707.46
36	\$270.11	\$545.63	\$540.22	\$734.70
37	\$280.77	\$567.16	\$561.55	\$763.71
38	\$291.76	\$589.35	\$583.52	\$793.59
39	\$303.07	\$612.20	\$606.14	\$824.34
40	\$315.02	\$636.35	\$630.05	\$856.86
41	\$327.30	\$661.15	\$654.60	\$890.26
42	\$340.22	\$687.25	\$680.45	\$925.41
43	\$353.47	\$714.01	\$706.94	\$961.44
44	\$367.36	\$742.08	\$734.73	\$999.23
45	\$381.58	\$770.79	\$763.16	\$1,037.90
46	\$396.44	\$800.82	\$792.89	\$1,078.33
47	\$411.95	\$832.14	\$823.91	\$1,120.51
48	\$428.11	\$864.78	\$856.22	\$1,164.45
49	\$444.91	\$898.72	\$889.82	\$1,210.15
50	\$462.36	\$933.96	\$924.71	\$1,257.61
51	\$480.45	\$970.51	\$960.90	\$1,306.82
52	\$499.19	\$1,008.36	\$998.38	\$1,357.80
53	\$518.58	\$1,047.52	\$1,037.15	\$1,410.53
54	\$538.93	\$1,088.64	\$1,077.86	\$1,465.89
55	\$559.93	\$1,131.06	\$1,119.86	\$1,523.02
56	\$581.90	\$1,175.44	\$1,163.81	\$1,582.78
57	\$604.52	\$1,221.13	\$1,209.04	\$1,644.29
58	\$628.11	\$1,268.77	\$1,256.21	\$1,708.45
59	\$652.66	\$1,318.38	\$1,305.32	\$1,775.24
60	\$678.19	\$1,369.94	\$1,356.37	\$1,844.67
61	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
62	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
63	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
64	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
65	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
>65 Non-Medicare Eligible	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
>65 Medicare Eligible **	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield

Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$750 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013

District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*	DEDUCTIBLE	<u>In Network</u>	<u>Out-Of-Network</u>
NO MATERNITY**	COINSURANCE	\$750	\$1,500
ANNUAL PHYSICALS	OUT-OF-POCKET MAXIMUM	80% / 20%	60% / 40%
		\$3,500	\$7,000

Base Rate **\$275.52**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$151.54			
6-18	\$135.00	\$272.71	\$270.01	\$367.21
19-20	\$200.30	\$404.61	\$400.61	\$544.82
21	\$200.30	\$404.61	\$400.61	\$544.82
22	\$200.30	\$404.61	\$400.61	\$544.82
23	\$200.30	\$404.61	\$400.61	\$544.82
24	\$200.30	\$404.61	\$400.61	\$544.82
25	\$200.30	\$404.61	\$400.61	\$544.82
26	\$200.30	\$404.61	\$400.61	\$544.82
27	\$200.30	\$404.61	\$400.61	\$544.82
28	\$200.30	\$404.61	\$400.61	\$544.82
29	\$200.30	\$404.61	\$400.61	\$544.82
30	\$200.30	\$404.61	\$400.61	\$544.82
31	\$200.30	\$404.61	\$400.61	\$544.82
32	\$200.30	\$404.61	\$400.61	\$544.82
33	\$205.54	\$415.19	\$411.08	\$559.06
34	\$213.53	\$431.33	\$427.06	\$580.80
35	\$221.79	\$448.02	\$443.59	\$603.28
36	\$230.33	\$465.28	\$460.67	\$626.51
37	\$239.43	\$483.64	\$478.85	\$651.24
38	\$248.79	\$502.57	\$497.59	\$676.72
39	\$258.44	\$522.04	\$516.88	\$702.95
40	\$268.63	\$542.64	\$537.26	\$730.68
41	\$279.10	\$563.79	\$558.20	\$759.16
42	\$290.12	\$586.05	\$580.25	\$789.13
43	\$301.42	\$608.87	\$602.84	\$819.86
44	\$313.27	\$632.80	\$626.53	\$852.08
45	\$325.39	\$657.29	\$650.78	\$885.06
46	\$338.06	\$682.89	\$676.13	\$919.53
47	\$351.29	\$709.60	\$702.58	\$955.50
48	\$365.06	\$737.43	\$730.13	\$992.97
49	\$379.39	\$766.37	\$758.78	\$1,031.94
50	\$394.27	\$796.42	\$788.54	\$1,072.41
51	\$409.70	\$827.59	\$819.40	\$1,114.38
52	\$425.68	\$859.87	\$851.36	\$1,157.85
53	\$442.21	\$893.26	\$884.42	\$1,202.81
54	\$459.57	\$928.33	\$919.13	\$1,250.02
55	\$477.48	\$964.50	\$954.95	\$1,298.74
56	\$496.21	\$1,002.35	\$992.42	\$1,349.70
57	\$515.50	\$1,041.31	\$1,031.00	\$1,402.15
58	\$535.61	\$1,081.93	\$1,071.22	\$1,456.86
59	\$556.55	\$1,124.23	\$1,113.10	\$1,513.82
60	\$578.32	\$1,168.20	\$1,156.63	\$1,573.02
61	\$600.91	\$1,213.84	\$1,201.82	\$1,634.47
62	\$600.91	\$1,213.84	\$1,201.82	\$1,634.47
63	\$600.91	\$1,213.84	\$1,201.82	\$1,634.47
64	\$600.91	\$1,213.84	\$1,201.82	\$1,634.47
65	\$600.91	\$1,213.84	\$1,201.82	\$1,634.47
>65 Non-Medicare Eligible	\$600.91	\$1,213.84	\$1,201.82	\$1,634.47
>65 Medicare Eligible **	\$600.91	\$1,213.84	\$1,201.82	\$1,634.47

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield

Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$2500 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013

District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*	DEDUCTIBLE	<u>In Network</u>	<u>Out-Of-Network</u>
NO MATERNITY**	COINSURANCE	\$2,500	\$5,000
ANNUAL PHYSICALS	OUT-OF-POCKET MAXIMUM	80% / 20%	60% / 40%
		\$5,000	\$7,500

Base Rate **\$187.43**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$103.09			
6-18	\$91.84	\$185.52	\$183.68	\$249.81
19-20	\$136.26	\$275.25	\$272.52	\$370.63
21	\$136.26	\$275.25	\$272.52	\$370.63
22	\$136.26	\$275.25	\$272.52	\$370.63
23	\$136.26	\$275.25	\$272.52	\$370.63
24	\$136.26	\$275.25	\$272.52	\$370.63
25	\$136.26	\$275.25	\$272.52	\$370.63
26	\$136.26	\$275.25	\$272.52	\$370.63
27	\$136.26	\$275.25	\$272.52	\$370.63
28	\$136.26	\$275.25	\$272.52	\$370.63
29	\$136.26	\$275.25	\$272.52	\$370.63
30	\$136.26	\$275.25	\$272.52	\$370.63
31	\$136.26	\$275.25	\$272.52	\$370.63
32	\$136.26	\$275.25	\$272.52	\$370.63
33	\$139.82	\$282.44	\$279.65	\$380.32
34	\$145.26	\$293.42	\$290.52	\$395.10
35	\$150.88	\$304.78	\$301.76	\$410.40
36	\$156.69	\$316.52	\$313.38	\$426.20
37	\$162.88	\$329.01	\$325.75	\$443.02
38	\$169.25	\$341.88	\$338.50	\$460.36
39	\$175.81	\$355.13	\$351.62	\$478.20
40	\$182.74	\$369.14	\$365.49	\$497.06
41	\$189.87	\$383.53	\$379.73	\$516.44
42	\$197.36	\$398.67	\$394.73	\$536.83
43	\$205.05	\$414.20	\$410.10	\$557.73
44	\$213.11	\$430.48	\$426.22	\$579.65
45	\$221.35	\$447.14	\$442.71	\$602.09
46	\$229.98	\$464.55	\$459.95	\$625.54
47	\$238.97	\$482.73	\$477.95	\$650.01
48	\$248.34	\$501.66	\$496.69	\$675.50
49	\$258.09	\$521.34	\$516.18	\$702.01
50	\$268.21	\$541.79	\$536.42	\$729.54
51	\$278.71	\$562.99	\$557.42	\$758.09
52	\$289.58	\$584.95	\$579.16	\$787.66
53	\$300.83	\$607.67	\$601.65	\$818.24
54	\$312.63	\$631.52	\$625.27	\$850.36
55	\$324.82	\$656.13	\$649.63	\$883.50
56	\$337.56	\$681.87	\$675.12	\$918.17
57	\$350.68	\$708.38	\$701.36	\$953.85
58	\$364.36	\$736.02	\$728.73	\$991.07
59	\$378.61	\$764.79	\$757.22	\$1,029.82
60	\$393.42	\$794.70	\$786.83	\$1,070.09
61	\$408.78	\$825.75	\$817.57	\$1,111.89
62	\$408.78	\$825.75	\$817.57	\$1,111.89
63	\$408.78	\$825.75	\$817.57	\$1,111.89
64	\$408.78	\$825.75	\$817.57	\$1,111.89
65	\$408.78	\$825.75	\$817.57	\$1,111.89
>65 Non-Medicare Eligible	\$408.78	\$825.75	\$817.57	\$1,111.89
>65 Medicare Eligible **	\$408.78	\$825.75	\$817.57	\$1,111.89

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan - \$2500 Ded
Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$2,500	\$5,000
70% / 30%	60% / 40%
\$5,000	\$10,000

Base Rate **\$194.85**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$107.17			
6-18	\$95.48	\$192.86	\$190.95	\$259.70
19-20	\$141.66	\$286.15	\$283.31	\$385.30
21	\$141.66	\$286.15	\$283.31	\$385.30
22	\$141.66	\$286.15	\$283.31	\$385.30
23	\$141.66	\$286.15	\$283.31	\$385.30
24	\$141.66	\$286.15	\$283.31	\$385.30
25	\$141.66	\$286.15	\$283.31	\$385.30
26	\$141.66	\$286.15	\$283.31	\$385.30
27	\$141.66	\$286.15	\$283.31	\$385.30
28	\$141.66	\$286.15	\$283.31	\$385.30
29	\$141.66	\$286.15	\$283.31	\$385.30
30	\$141.66	\$286.15	\$283.31	\$385.30
31	\$141.66	\$286.15	\$283.31	\$385.30
32	\$141.66	\$286.15	\$283.31	\$385.30
33	\$145.36	\$293.62	\$290.72	\$395.37
34	\$151.01	\$305.04	\$302.02	\$410.74
35	\$156.85	\$316.85	\$313.71	\$426.64
36	\$162.89	\$329.05	\$325.79	\$443.07
37	\$169.32	\$342.04	\$338.65	\$460.56
38	\$175.95	\$355.42	\$351.90	\$478.58
39	\$182.77	\$369.19	\$365.54	\$497.13
40	\$189.98	\$383.76	\$379.96	\$516.74
41	\$197.38	\$398.71	\$394.77	\$536.88
42	\$205.18	\$414.46	\$410.35	\$558.08
43	\$213.17	\$430.60	\$426.33	\$579.81
44	\$221.54	\$447.52	\$443.09	\$602.60
45	\$230.12	\$464.84	\$460.24	\$625.92
46	\$239.08	\$482.94	\$478.16	\$650.30
47	\$248.43	\$501.84	\$496.87	\$675.74
48	\$258.18	\$521.52	\$516.35	\$702.24
49	\$268.31	\$541.98	\$536.62	\$729.80
50	\$278.83	\$563.24	\$557.66	\$758.42
51	\$289.74	\$585.28	\$579.48	\$788.10
52	\$301.04	\$608.11	\$602.09	\$818.84
53	\$312.73	\$631.72	\$625.47	\$850.64
54	\$325.01	\$656.52	\$650.02	\$884.03
55	\$337.68	\$682.10	\$675.35	\$918.48
56	\$350.92	\$708.87	\$701.85	\$954.52
57	\$364.56	\$736.42	\$729.13	\$991.62
58	\$378.79	\$765.15	\$757.58	\$1,030.30
59	\$393.60	\$795.07	\$787.19	\$1,070.58
60	\$408.99	\$826.16	\$817.98	\$1,112.45
61	\$424.97	\$858.44	\$849.94	\$1,155.91
62	\$424.97	\$858.44	\$849.94	\$1,155.91
63	\$424.97	\$858.44	\$849.94	\$1,155.91
64	\$424.97	\$858.44	\$849.94	\$1,155.91
65	\$424.97	\$858.44	\$849.94	\$1,155.91
>65 Non-Medicare Eligible	\$424.97	\$858.44	\$849.94	\$1,155.91
>65 Medicare Eligible **	\$424.97	\$858.44	\$849.94	\$1,155.91

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - Maternity coverage, with Deductible and then Coinsurance, may be added to any subscriber's coverage for an additional rate of \$126 per month.

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan - \$5000 Ded
Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$5,000	\$10,000
100% / 0%	80% / 20%
\$5,000	\$12,500

Base Rate **\$168.93**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$92.91			
6-18	\$82.78	\$167.21	\$165.55	\$225.15
19-20	\$122.81	\$248.08	\$245.62	\$334.05
21	\$122.81	\$248.08	\$245.62	\$334.05
22	\$122.81	\$248.08	\$245.62	\$334.05
23	\$122.81	\$248.08	\$245.62	\$334.05
24	\$122.81	\$248.08	\$245.62	\$334.05
25	\$122.81	\$248.08	\$245.62	\$334.05
26	\$122.81	\$248.08	\$245.62	\$334.05
27	\$122.81	\$248.08	\$245.62	\$334.05
28	\$122.81	\$248.08	\$245.62	\$334.05
29	\$122.81	\$248.08	\$245.62	\$334.05
30	\$122.81	\$248.08	\$245.62	\$334.05
31	\$122.81	\$248.08	\$245.62	\$334.05
32	\$122.81	\$248.08	\$245.62	\$334.05
33	\$126.02	\$254.56	\$252.04	\$342.78
34	\$130.92	\$264.46	\$261.84	\$356.10
35	\$135.99	\$274.70	\$271.98	\$369.89
36	\$141.23	\$285.28	\$282.45	\$384.13
37	\$146.80	\$296.54	\$293.60	\$399.30
38	\$152.54	\$308.14	\$305.09	\$414.92
39	\$158.46	\$320.08	\$316.91	\$431.00
40	\$164.71	\$332.71	\$329.41	\$448.00
41	\$171.13	\$345.67	\$342.25	\$465.46
42	\$177.88	\$359.32	\$355.77	\$483.84
43	\$184.81	\$373.32	\$369.62	\$502.68
44	\$192.07	\$387.99	\$384.15	\$522.44
45	\$199.51	\$403.00	\$399.01	\$542.66
46	\$207.28	\$418.70	\$414.55	\$563.79
47	\$215.39	\$435.08	\$430.77	\$585.85
48	\$223.83	\$452.14	\$447.66	\$608.82
49	\$232.62	\$469.89	\$465.23	\$632.72
50	\$241.74	\$488.31	\$483.48	\$657.53
51	\$251.20	\$507.42	\$502.40	\$683.26
52	\$261.00	\$527.21	\$521.99	\$709.91
53	\$271.13	\$547.69	\$542.27	\$737.48
54	\$281.78	\$569.19	\$563.55	\$766.43
55	\$292.76	\$591.37	\$585.51	\$796.30
56	\$304.24	\$614.57	\$608.49	\$827.54
57	\$316.07	\$638.46	\$632.14	\$859.71
58	\$328.40	\$663.37	\$656.80	\$893.25
59	\$341.24	\$689.30	\$682.48	\$928.17
60	\$354.58	\$716.26	\$709.17	\$964.47
61	\$368.44	\$744.24	\$736.87	\$1,002.15
62	\$368.44	\$744.24	\$736.87	\$1,002.15
63	\$368.44	\$744.24	\$736.87	\$1,002.15
64	\$368.44	\$744.24	\$736.87	\$1,002.15
65	\$368.44	\$744.24	\$736.87	\$1,002.15
>65 Non-Medicare Eligible	\$368.44	\$744.24	\$736.87	\$1,002.15
>65 Medicare Eligible **	\$368.44	\$744.24	\$736.87	\$1,002.15

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - Maternity coverage, with Deductible and then Coinsurance, may be added to any subscriber's coverage for an additional rate of \$126 per month.

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan - \$10000 Ded
Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS* NO MATERNITY**	DEDUCTIBLE COINSURANCE OUT-OF-POCKET MAXIMUM	In Network \$10,000 100% / 0% \$10,000	Out-Of-Network \$12,500 80% / 20% \$15,000
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Base Rate **\$121.92**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$67.06			
6-18	\$59.74	\$120.68	\$119.48	\$162.49
19-20	\$88.64	\$179.04	\$177.27	\$241.09
21	\$88.64	\$179.04	\$177.27	\$241.09
22	\$88.64	\$179.04	\$177.27	\$241.09
23	\$88.64	\$179.04	\$177.27	\$241.09
24	\$88.64	\$179.04	\$177.27	\$241.09
25	\$88.64	\$179.04	\$177.27	\$241.09
26	\$88.64	\$179.04	\$177.27	\$241.09
27	\$88.64	\$179.04	\$177.27	\$241.09
28	\$88.64	\$179.04	\$177.27	\$241.09
29	\$88.64	\$179.04	\$177.27	\$241.09
30	\$88.64	\$179.04	\$177.27	\$241.09
31	\$88.64	\$179.04	\$177.27	\$241.09
32	\$88.64	\$179.04	\$177.27	\$241.09
33	\$90.95	\$183.72	\$181.90	\$247.39
34	\$94.49	\$190.87	\$188.98	\$257.01
35	\$98.15	\$198.25	\$196.29	\$266.96
36	\$101.93	\$205.89	\$203.85	\$277.24
37	\$105.95	\$214.02	\$211.90	\$288.18
38	\$110.09	\$222.39	\$220.19	\$299.46
39	\$114.36	\$231.01	\$228.72	\$311.06
40	\$118.87	\$240.12	\$237.74	\$323.33
41	\$123.50	\$249.48	\$247.01	\$335.93
42	\$128.38	\$259.33	\$256.76	\$349.20
43	\$133.38	\$269.43	\$266.76	\$362.79
44	\$138.62	\$280.02	\$277.25	\$377.05
45	\$143.99	\$290.85	\$287.98	\$391.65
46	\$149.60	\$302.18	\$299.19	\$406.90
47	\$155.45	\$314.00	\$310.90	\$422.82
48	\$161.54	\$326.32	\$323.09	\$439.40
49	\$167.88	\$339.13	\$335.77	\$456.64
50	\$174.47	\$352.42	\$348.94	\$474.55
51	\$181.30	\$366.22	\$362.59	\$493.12
52	\$188.37	\$380.50	\$376.73	\$512.36
53	\$195.68	\$395.28	\$391.36	\$532.25
54	\$203.36	\$410.79	\$406.73	\$553.15
55	\$211.29	\$426.80	\$422.57	\$574.70
56	\$219.58	\$443.55	\$439.16	\$597.25
57	\$228.11	\$460.79	\$456.22	\$620.47
58	\$237.01	\$478.77	\$474.02	\$644.67
59	\$246.28	\$497.48	\$492.56	\$669.88
60	\$255.91	\$516.94	\$511.82	\$696.08
61	\$265.91	\$537.13	\$531.82	\$723.27
62	\$265.91	\$537.13	\$531.82	\$723.27
63	\$265.91	\$537.13	\$531.82	\$723.27
64	\$265.91	\$537.13	\$531.82	\$723.27
65	\$265.91	\$537.13	\$531.82	\$723.27
>65 Non-Medicare Eligible	\$265.91	\$537.13	\$531.82	\$723.27
>65 Medicare Eligible **	\$265.91	\$537.13	\$531.82	\$723.27

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - Maternity coverage, with Deductible and then Coinsurance, may be added to any subscriber's coverage for an additional rate of \$126 per month.

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 District of Columbia
 PPO/BluePreferred - Underwritten HSA Plan - \$1200 Ded
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

Rx and Medical Combined for Ded, OOP Max and Lifetime Max*
 MATERNITY COVERED*

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$1,200	\$2,400
80% / 20%	60% / 40%
\$2,800	\$5,000

Base Rate

\$204.39

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$112.41			
6-18	\$100.15	\$202.31	\$200.30	\$272.41
19-20	\$148.59	\$300.15	\$297.18	\$404.17
21	\$148.59	\$300.15	\$297.18	\$404.17
22	\$148.59	\$300.15	\$297.18	\$404.17
23	\$148.59	\$300.15	\$297.18	\$404.17
24	\$148.59	\$300.15	\$297.18	\$404.17
25	\$148.59	\$300.15	\$297.18	\$404.17
26	\$148.59	\$300.15	\$297.18	\$404.17
27	\$148.59	\$300.15	\$297.18	\$404.17
28	\$148.59	\$300.15	\$297.18	\$404.17
29	\$148.59	\$300.15	\$297.18	\$404.17
30	\$148.59	\$300.15	\$297.18	\$404.17
31	\$148.59	\$300.15	\$297.18	\$404.17
32	\$148.59	\$300.15	\$297.18	\$404.17
33	\$152.47	\$308.00	\$304.95	\$414.73
34	\$158.40	\$319.97	\$316.80	\$430.85
35	\$164.53	\$332.36	\$329.07	\$447.53
36	\$170.87	\$345.16	\$341.74	\$464.77
37	\$177.61	\$358.78	\$355.23	\$483.11
38	\$184.56	\$372.82	\$369.13	\$502.01
39	\$191.72	\$387.27	\$383.44	\$521.47
40	\$199.28	\$402.55	\$398.56	\$542.04
41	\$207.05	\$418.24	\$414.09	\$563.17
42	\$215.22	\$434.75	\$430.45	\$585.41
43	\$223.60	\$451.68	\$447.21	\$608.20
44	\$232.39	\$469.43	\$464.78	\$632.10
45	\$241.38	\$487.60	\$482.77	\$656.57
46	\$250.79	\$506.59	\$501.57	\$682.14
47	\$260.60	\$526.41	\$521.19	\$708.82
48	\$270.82	\$547.05	\$541.63	\$736.62
49	\$281.45	\$568.52	\$562.89	\$765.53
50	\$292.48	\$590.81	\$584.96	\$795.55
51	\$303.93	\$613.93	\$607.86	\$826.68
52	\$315.78	\$637.88	\$631.57	\$858.93
53	\$328.05	\$662.65	\$656.09	\$892.28
54	\$340.92	\$688.66	\$681.85	\$927.31
55	\$354.21	\$715.50	\$708.42	\$963.45
56	\$368.11	\$743.57	\$736.21	\$1,001.25
57	\$382.41	\$772.48	\$764.83	\$1,040.17
58	\$397.33	\$802.62	\$794.67	\$1,080.75
59	\$412.87	\$833.99	\$825.74	\$1,123.00
60	\$429.01	\$866.61	\$858.03	\$1,166.92
61	\$445.77	\$900.46	\$891.55	\$1,212.51
62	\$445.77	\$900.46	\$891.55	\$1,212.51
63	\$445.77	\$900.46	\$891.55	\$1,212.51
64	\$445.77	\$900.46	\$891.55	\$1,212.51
65	\$445.77	\$900.46	\$891.55	\$1,212.51
Over 65	\$445.77	\$900.46	\$891.55	\$1,212.51

\$10 Generic, \$25 Preferred Brand
 \$45 Non-Preferred Brand Copays
 \$1,500 Annual Max

**** - To include Maternity, with:
 Deductible & Coinsurance
 and no per pregnancy
 maximum, add \$126 to the
 monthly premium rate.
 (Covers those maternity
 services not mandated
 by HB 1271, primarily
 professional services.)**

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 District of Columbia
PPO/BluePreferred - Underwritten HSA Plan - \$1400 Ded
Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

Rx and Medical Combined for Ded and OOP Max*
 MATERNITY COVERED**

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$1,400	\$2,800
80% / 20%	60% / 40%
\$2,800	\$5,000

Base Rate

\$199.75

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$109.86			
6-18	\$97.88	\$197.71	\$195.76	\$266.23
19-20	\$145.22	\$293.34	\$290.44	\$394.99
21	\$145.22	\$293.34	\$290.44	\$394.99
22	\$145.22	\$293.34	\$290.44	\$394.99
23	\$145.22	\$293.34	\$290.44	\$394.99
24	\$145.22	\$293.34	\$290.44	\$394.99
25	\$145.22	\$293.34	\$290.44	\$394.99
26	\$145.22	\$293.34	\$290.44	\$394.99
27	\$145.22	\$293.34	\$290.44	\$394.99
28	\$145.22	\$293.34	\$290.44	\$394.99
29	\$145.22	\$293.34	\$290.44	\$394.99
30	\$145.22	\$293.34	\$290.44	\$394.99
31	\$145.22	\$293.34	\$290.44	\$394.99
32	\$145.22	\$293.34	\$290.44	\$394.99
33	\$149.01	\$301.01	\$298.03	\$405.32
34	\$154.81	\$312.71	\$309.61	\$421.07
35	\$160.80	\$324.81	\$321.60	\$437.37
36	\$166.99	\$337.32	\$333.98	\$454.22
37	\$173.58	\$350.64	\$347.17	\$472.15
38	\$180.37	\$364.36	\$360.75	\$490.62
39	\$187.37	\$378.48	\$374.73	\$509.63
40	\$194.76	\$393.41	\$389.51	\$529.74
41	\$202.35	\$408.74	\$404.69	\$550.38
42	\$210.34	\$424.88	\$420.67	\$572.12
43	\$218.53	\$441.42	\$437.05	\$594.39
44	\$227.12	\$458.77	\$454.23	\$617.75
45	\$235.90	\$476.53	\$471.81	\$641.66
46	\$245.09	\$495.09	\$490.19	\$666.65
47	\$254.68	\$514.46	\$509.36	\$692.73
48	\$264.67	\$534.63	\$529.34	\$719.90
49	\$275.06	\$555.61	\$550.11	\$748.15
50	\$285.84	\$577.40	\$571.68	\$777.49
51	\$297.03	\$600.00	\$594.06	\$807.92
52	\$308.61	\$623.40	\$617.23	\$839.43
53	\$320.60	\$647.61	\$641.20	\$872.03
54	\$333.18	\$673.03	\$666.37	\$906.26
55	\$346.17	\$699.26	\$692.33	\$941.57
56	\$359.75	\$726.69	\$719.50	\$978.52
57	\$373.73	\$754.94	\$747.46	\$1,016.55
58	\$388.31	\$784.39	\$776.63	\$1,056.21
59	\$403.50	\$815.06	\$806.99	\$1,097.51
60	\$419.28	\$846.94	\$838.55	\$1,140.43
61	\$435.65	\$880.02	\$871.31	\$1,184.98
62	\$435.65	\$880.02	\$871.31	\$1,184.98
63	\$435.65	\$880.02	\$871.31	\$1,184.98
64	\$435.65	\$880.02	\$871.31	\$1,184.98
65	\$435.65	\$880.02	\$871.31	\$1,184.98
>65 Non-Medicare Eligible	\$435.65	\$880.02	\$871.31	\$1,184.98
>65 Medicare Eligible ***	\$435.65	\$880.02	\$871.31	\$1,184.98

*- Prescription Drug Benefit:
 \$10 Generic, \$25 Preferred Brand
 \$45 Non-Preferred Brand Copays

** - To include Maternity, with:
 Deductible & Coinsurance
 and no per pregnancy
 maximum, add \$126 to the
 monthly premium rate.
 (Covers those maternity
 services not mandated
 by HB 1271, primarily
 professional services.)

***not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 District of Columbia
 PPO/BluePreferred - Underwritten HSA Plan - \$2700 Ded
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

Rx and Medical Combined for Ded, OOP Max and Lifetime Max*
 MATERNITY COVERED*

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$2,700	\$5,400
100% / 0%	80% / 20%
\$3,200	\$6,400

Base Rate **\$151.48**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$83.31			
6-18	\$74.23	\$149.93	\$148.45	\$201.89
19-20	\$110.13	\$222.45	\$220.25	\$299.54
21	\$110.13	\$222.45	\$220.25	\$299.54
22	\$110.13	\$222.45	\$220.25	\$299.54
23	\$110.13	\$222.45	\$220.25	\$299.54
24	\$110.13	\$222.45	\$220.25	\$299.54
25	\$110.13	\$222.45	\$220.25	\$299.54
26	\$110.13	\$222.45	\$220.25	\$299.54
27	\$110.13	\$222.45	\$220.25	\$299.54
28	\$110.13	\$222.45	\$220.25	\$299.54
29	\$110.13	\$222.45	\$220.25	\$299.54
30	\$110.13	\$222.45	\$220.25	\$299.54
31	\$110.13	\$222.45	\$220.25	\$299.54
32	\$110.13	\$222.45	\$220.25	\$299.54
33	\$113.00	\$228.27	\$226.01	\$307.37
34	\$117.40	\$237.14	\$234.79	\$319.32
35	\$121.94	\$246.32	\$243.88	\$331.68
36	\$126.64	\$255.81	\$253.27	\$344.45
37	\$131.64	\$265.90	\$263.27	\$358.05
38	\$136.79	\$276.31	\$273.57	\$372.06
39	\$142.09	\$287.02	\$284.18	\$386.48
40	\$147.69	\$298.34	\$295.39	\$401.72
41	\$153.45	\$309.97	\$306.90	\$417.38
42	\$159.51	\$322.21	\$319.02	\$433.86
43	\$165.72	\$334.75	\$331.44	\$450.76
44	\$172.23	\$347.91	\$344.47	\$468.47
45	\$178.90	\$361.37	\$357.80	\$486.60
46	\$185.87	\$375.45	\$371.73	\$505.56
47	\$193.14	\$390.14	\$386.27	\$525.33
48	\$200.71	\$405.44	\$401.42	\$545.93
49	\$208.59	\$421.35	\$417.18	\$567.36
50	\$216.77	\$437.87	\$433.54	\$589.61
51	\$225.25	\$455.01	\$450.50	\$612.68
52	\$234.04	\$472.75	\$468.07	\$636.58
53	\$243.13	\$491.11	\$486.25	\$661.30
54	\$252.67	\$510.39	\$505.34	\$687.26
55	\$262.51	\$530.28	\$525.03	\$714.04
56	\$272.82	\$551.09	\$545.63	\$742.06
57	\$283.42	\$572.51	\$566.84	\$770.90
58	\$294.48	\$594.84	\$588.95	\$800.98
59	\$305.99	\$618.10	\$611.98	\$832.29
60	\$317.96	\$642.27	\$635.91	\$864.84
61	\$330.38	\$667.36	\$660.76	\$898.63
62	\$330.38	\$667.36	\$660.76	\$898.63
63	\$330.38	\$667.36	\$660.76	\$898.63
64	\$330.38	\$667.36	\$660.76	\$898.63
65	\$330.38	\$667.36	\$660.76	\$898.63
Over 65	\$330.38	\$667.36	\$660.76	\$898.63

\$10 Generic, \$25 Preferred Brand
 \$45 Non-Preferred Brand Copays
 \$1,500 Annual Max

**** - To include Maternity, with:
 Deductible & Coinsurance
 and no per pregnancy
 maximum, add \$126 to the
 monthly premium rate.
 (Covers those maternity
 services not mandated
 by HB 1271, primarily
 professional services.)**

**not available to new sales

GHMSI dba CareFirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - HIPAA Standard Plan - \$100 Ded 90% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 FULL MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$100	\$300
90% / 10%	70% / 30%
\$2,500	\$5,000

Base Rate **\$1,414.45**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$777.95			
6-18	\$693.08	\$1,400.02	\$1,386.16	\$1,885.18
19-20	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
21	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
22	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
23	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
24	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
25	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
26	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
27	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
28	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
29	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
30	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
31	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
32	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
33	\$1,055.18	\$2,131.46	\$2,110.36	\$2,870.09
34	\$1,096.20	\$2,214.32	\$2,192.40	\$2,981.66
35	\$1,138.63	\$2,300.04	\$2,277.26	\$3,097.08
36	\$1,182.48	\$2,388.61	\$2,364.96	\$3,216.35
37	\$1,229.16	\$2,482.90	\$2,458.31	\$3,343.31
38	\$1,277.25	\$2,580.04	\$2,554.50	\$3,474.12
39	\$1,326.75	\$2,680.04	\$2,653.51	\$3,608.77
40	\$1,379.09	\$2,785.76	\$2,758.18	\$3,751.12
41	\$1,432.84	\$2,894.33	\$2,865.68	\$3,897.32
42	\$1,489.42	\$3,008.62	\$2,978.83	\$4,051.21
43	\$1,547.41	\$3,125.76	\$3,094.82	\$4,208.95
44	\$1,608.23	\$3,248.62	\$3,216.46	\$4,374.38
45	\$1,670.47	\$3,374.34	\$3,340.93	\$4,543.67
46	\$1,735.53	\$3,505.77	\$3,471.06	\$4,720.64
47	\$1,803.42	\$3,642.92	\$3,606.85	\$4,905.31
48	\$1,874.15	\$3,785.78	\$3,748.29	\$5,097.68
49	\$1,947.70	\$3,934.35	\$3,895.40	\$5,297.74
50	\$2,024.08	\$4,088.64	\$4,048.16	\$5,505.49
51	\$2,103.29	\$4,248.64	\$4,206.57	\$5,720.94
52	\$2,185.33	\$4,414.36	\$4,370.65	\$5,944.08
53	\$2,270.19	\$4,585.79	\$4,540.38	\$6,174.92
54	\$2,359.30	\$4,765.79	\$4,718.61	\$6,417.30
55	\$2,451.24	\$4,951.51	\$4,902.48	\$6,667.38
56	\$2,547.42	\$5,145.80	\$5,094.85	\$6,928.99
57	\$2,646.44	\$5,345.80	\$5,292.87	\$7,198.31
58	\$2,749.69	\$5,554.38	\$5,499.38	\$7,479.16
59	\$2,857.19	\$5,771.52	\$5,714.38	\$7,771.55
60	\$2,968.93	\$5,997.24	\$5,937.86	\$8,075.49
61	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97
62	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97
63	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97
64	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97
65	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97
Over 65	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

**not available to new sales

GHMSI dba CareFirst BlueCross BlueShield

Individual Non-Medigap Business
 PPO/BluePreferred - HIPAA Standard Plan - \$300 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$300	\$500
80% / 20%	60% / 40%
\$2,500	\$5,000

Base Rate

\$906.74

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$498.71			
6-18	\$444.30	\$897.49	\$888.61	\$1,208.50
19-20	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
21	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
22	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
23	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
24	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
25	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
26	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
27	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
28	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
29	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
30	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
31	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
32	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
33	\$676.43	\$1,366.38	\$1,352.86	\$1,839.88
34	\$702.72	\$1,419.50	\$1,405.45	\$1,911.41
35	\$729.93	\$1,474.45	\$1,459.85	\$1,985.40
36	\$758.03	\$1,531.23	\$1,516.07	\$2,061.85
37	\$787.96	\$1,591.67	\$1,575.91	\$2,143.24
38	\$818.79	\$1,653.95	\$1,637.57	\$2,227.10
39	\$850.52	\$1,718.05	\$1,701.04	\$2,313.42
40	\$884.07	\$1,785.82	\$1,768.14	\$2,404.67
41	\$918.53	\$1,855.43	\$1,837.06	\$2,498.40
42	\$954.80	\$1,928.69	\$1,909.59	\$2,597.05
43	\$991.97	\$2,003.79	\$1,983.95	\$2,698.17
44	\$1,030.96	\$2,082.55	\$2,061.93	\$2,804.22
45	\$1,070.86	\$2,163.14	\$2,141.72	\$2,912.74
46	\$1,112.57	\$2,247.39	\$2,225.14	\$3,026.19
47	\$1,156.09	\$2,335.31	\$2,312.19	\$3,144.57
48	\$1,201.43	\$2,426.89	\$2,402.86	\$3,267.89
49	\$1,248.58	\$2,522.13	\$2,497.16	\$3,396.14
50	\$1,297.54	\$2,621.04	\$2,595.09	\$3,529.32
51	\$1,348.32	\$2,723.61	\$2,696.64	\$3,667.44
52	\$1,400.91	\$2,829.84	\$2,801.83	\$3,810.48
53	\$1,455.32	\$2,939.74	\$2,910.64	\$3,958.46
54	\$1,512.44	\$3,055.13	\$3,024.88	\$4,113.84
55	\$1,571.38	\$3,174.19	\$3,142.76	\$4,274.15
56	\$1,633.04	\$3,298.74	\$3,266.08	\$4,441.87
57	\$1,696.51	\$3,426.95	\$3,393.02	\$4,614.51
58	\$1,762.70	\$3,560.66	\$3,525.41	\$4,794.55
59	\$1,831.61	\$3,699.86	\$3,663.23	\$4,981.99
60	\$1,903.25	\$3,844.56	\$3,806.49	\$5,176.83
61	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07
62	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07
63	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07
64	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07
65	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07
Over 65	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

**not available to new sales

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, non-Medigap Business - PPO/BluePreferred - Prescription Drug Card Rider
District of Columbia - PPACA
Underwritten Standard Product (open)
Proposed Monthly Premium Rates Effective 7/1/2013

Deductible	=	\$100
RETAIL: 30 Day Supply, Copay	=	\$10 Generic, \$25 Formulary Brand, \$45 Nonformulary
MAIL ORDER: 90 Day Supply, Copay	=	\$20 Generic, \$50 Formulary Brand, \$90 Nonformulary
Annual Benefits Maximum	=	Unlimited
Base Rate	=	\$93.36

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$51.35			
6-18	\$45.75	\$92.41	\$91.49	\$124.43
19-20	\$67.87	\$137.10	\$135.75	\$184.61
21	\$67.87	\$137.10	\$135.75	\$184.61
22	\$67.87	\$137.10	\$135.75	\$184.61
23	\$67.87	\$137.10	\$135.75	\$184.61
24	\$67.87	\$137.10	\$135.75	\$184.61
25	\$67.87	\$137.10	\$135.75	\$184.61
26	\$67.87	\$137.10	\$135.75	\$184.61
27	\$67.87	\$137.10	\$135.75	\$184.61
28	\$67.87	\$137.10	\$135.75	\$184.61
29	\$67.87	\$137.10	\$135.75	\$184.61
30	\$67.87	\$137.10	\$135.75	\$184.61
31	\$67.87	\$137.10	\$135.75	\$184.61
32	\$67.87	\$137.10	\$135.75	\$184.61
33	\$69.65	\$140.69	\$139.29	\$189.44
34	\$72.35	\$146.16	\$144.71	\$196.80
35	\$75.15	\$151.81	\$150.31	\$204.42
36	\$78.05	\$157.66	\$156.10	\$212.29
37	\$81.13	\$163.88	\$162.26	\$220.67
38	\$84.30	\$170.29	\$168.61	\$229.31
39	\$87.57	\$176.89	\$175.14	\$238.19
40	\$91.03	\$183.87	\$182.05	\$247.59
41	\$94.57	\$191.04	\$189.15	\$257.24
42	\$98.31	\$198.58	\$196.62	\$267.40
43	\$102.14	\$206.31	\$204.27	\$277.81
44	\$106.15	\$214.42	\$212.30	\$288.73
45	\$110.26	\$222.72	\$220.52	\$299.90
46	\$114.55	\$231.40	\$229.11	\$311.58
47	\$119.03	\$240.45	\$238.07	\$323.77
48	\$123.70	\$249.88	\$247.40	\$336.47
49	\$128.56	\$259.68	\$257.11	\$349.67
50	\$133.60	\$269.87	\$267.20	\$363.39
51	\$138.83	\$280.43	\$277.65	\$377.61
52	\$144.24	\$291.37	\$288.48	\$392.34
53	\$149.84	\$302.68	\$299.69	\$407.57
54	\$155.72	\$314.56	\$311.45	\$423.57
55	\$161.79	\$326.82	\$323.59	\$440.08
56	\$168.14	\$339.65	\$336.28	\$457.34
57	\$174.68	\$352.85	\$349.35	\$475.12
58	\$181.49	\$366.61	\$362.98	\$493.66
59	\$188.59	\$380.95	\$377.17	\$512.96
60	\$195.96	\$395.84	\$391.93	\$533.02
61	\$203.62	\$411.31	\$407.24	\$553.84
62	\$203.62	\$411.31	\$407.24	\$553.84
63	\$203.62	\$411.31	\$407.24	\$553.84
64	\$203.62	\$411.31	\$407.24	\$553.84
65	\$203.62	\$411.31	\$407.24	\$553.84
>65 Non-Medicare Eligible	\$203.62	\$411.31	\$407.24	\$553.84
>65 Medicare Eligible **	\$203.62	\$411.31	\$407.24	\$553.84

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
NAIC No. 53007
Individual, non-Medigap Business - Prescription Drug Card Rider

District of Columbia - PPACA
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan
PRESCRIPTION DRUG

Proposed Monthly Premium Rates Effective 7/1/2013

Deductible	=	\$150
RETAIL (Acute) : 34 Day Supply, Copay	=	\$15 Generic, Discount on Brand
Annual Benefits Maximum (on Generic only)	=	Unlimited
 Base Rate	 =	 \$21.33

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$11.73			
6-18	\$10.45	\$21.11	\$20.90	\$28.43
19-20	\$15.51	\$31.32	\$31.01	\$42.18
21	\$15.51	\$31.32	\$31.01	\$42.18
22	\$15.51	\$31.32	\$31.01	\$42.18
23	\$15.51	\$31.32	\$31.01	\$42.18
24	\$15.51	\$31.32	\$31.01	\$42.18
25	\$15.51	\$31.32	\$31.01	\$42.18
26	\$15.51	\$31.32	\$31.01	\$42.18
27	\$15.51	\$31.32	\$31.01	\$42.18
28	\$15.51	\$31.32	\$31.01	\$42.18
29	\$15.51	\$31.32	\$31.01	\$42.18
30	\$15.51	\$31.32	\$31.01	\$42.18
31	\$15.51	\$31.32	\$31.01	\$42.18
32	\$15.51	\$31.32	\$31.01	\$42.18
33	\$15.91	\$32.14	\$31.82	\$43.28
34	\$16.53	\$33.39	\$33.06	\$44.96
35	\$17.17	\$34.68	\$34.34	\$46.70
36	\$17.83	\$36.02	\$35.66	\$48.50
37	\$18.54	\$37.44	\$37.07	\$50.42
38	\$19.26	\$38.91	\$38.52	\$52.39
39	\$20.01	\$40.42	\$40.02	\$54.42
40	\$20.80	\$42.01	\$41.59	\$56.57
41	\$21.61	\$43.65	\$43.21	\$58.77
42	\$22.46	\$45.37	\$44.92	\$61.09
43	\$23.34	\$47.14	\$46.67	\$63.47
44	\$24.25	\$48.99	\$48.50	\$65.97
45	\$25.19	\$50.89	\$50.38	\$68.52
46	\$26.17	\$52.87	\$52.34	\$71.19
47	\$27.20	\$54.94	\$54.39	\$73.97
48	\$28.26	\$57.09	\$56.52	\$76.87
49	\$29.37	\$59.33	\$58.74	\$79.89
50	\$30.52	\$61.66	\$61.05	\$83.02
51	\$31.72	\$64.07	\$63.44	\$86.27
52	\$32.95	\$66.57	\$65.91	\$89.64
53	\$34.23	\$69.15	\$68.47	\$93.12
54	\$35.58	\$71.87	\$71.16	\$96.77
55	\$36.96	\$74.67	\$73.93	\$100.54
56	\$38.42	\$77.60	\$76.83	\$104.49
57	\$39.91	\$80.62	\$79.82	\$108.55
58	\$41.47	\$83.76	\$82.93	\$112.79
59	\$43.09	\$87.03	\$86.17	\$117.20
60	\$44.77	\$90.44	\$89.54	\$121.78
61	\$46.52	\$93.97	\$93.04	\$126.54
62	\$46.52	\$93.97	\$93.04	\$126.54
63	\$46.52	\$93.97	\$93.04	\$126.54
64	\$46.52	\$93.97	\$93.04	\$126.54
65	\$46.52	\$93.97	\$93.04	\$126.54
>65 Non-Medicare Eligible	\$46.52	\$93.97	\$93.04	\$126.54
>65 Medicare Eligible **	\$46.52	\$93.97	\$93.04	\$126.54

**not available to new sales

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, non-Medigap Business - PPO/BluePreferred - Prescription Drug Card Rider
District of Columbia - PPACA
HIPAA Standard Product (open)
Proposed Monthly Premium Rates Effective 7/1/2013

Deductible = \$100
Acute : 30 Day Supply, Copay = \$10 Generic, \$25 Formulary Brand, \$45 Nonformulary
Maintenance : 31 to 60 Day Supply, Copay = \$20 Generic, \$50 Formulary Brand, \$90 Nonformulary
Maintenance : 61 to 90 Day Supply, Copay = \$30 Generic, \$75 Formulary Brand, \$135 Nonformulary
Annual Benefits Maximum = Unlimited

Base Rate = **\$142.35**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$78.29			
6-18	\$69.75	\$140.90	\$139.50	\$189.72
19-20	\$103.49	\$209.05	\$206.98	\$281.49
21	\$103.49	\$209.05	\$206.98	\$281.49
22	\$103.49	\$209.05	\$206.98	\$281.49
23	\$103.49	\$209.05	\$206.98	\$281.49
24	\$103.49	\$209.05	\$206.98	\$281.49
25	\$103.49	\$209.05	\$206.98	\$281.49
26	\$103.49	\$209.05	\$206.98	\$281.49
27	\$103.49	\$209.05	\$206.98	\$281.49
28	\$103.49	\$209.05	\$206.98	\$281.49
29	\$103.49	\$209.05	\$206.98	\$281.49
30	\$103.49	\$209.05	\$206.98	\$281.49
31	\$103.49	\$209.05	\$206.98	\$281.49
32	\$103.49	\$209.05	\$206.98	\$281.49
33	\$106.19	\$214.51	\$212.39	\$288.85
34	\$110.32	\$222.85	\$220.64	\$300.07
35	\$114.59	\$231.48	\$229.18	\$311.69
36	\$119.00	\$240.39	\$238.01	\$323.69
37	\$123.70	\$249.88	\$247.40	\$336.47
38	\$128.54	\$259.65	\$257.08	\$349.63
39	\$133.52	\$269.72	\$267.05	\$363.19
40	\$138.79	\$280.36	\$277.58	\$377.51
41	\$144.20	\$291.29	\$288.40	\$392.23
42	\$149.89	\$302.79	\$299.79	\$407.71
43	\$155.73	\$314.58	\$311.46	\$423.59
44	\$161.85	\$326.94	\$323.70	\$440.24
45	\$168.12	\$339.59	\$336.23	\$457.27
46	\$174.66	\$352.82	\$349.33	\$475.08
47	\$181.50	\$366.62	\$362.99	\$493.67
48	\$188.61	\$381.00	\$377.23	\$513.03
49	\$196.02	\$395.95	\$392.03	\$533.16
50	\$203.70	\$411.48	\$407.41	\$554.07
51	\$211.67	\$427.58	\$423.35	\$575.75
52	\$219.93	\$444.26	\$439.86	\$598.21
53	\$228.47	\$461.51	\$456.94	\$621.44
54	\$237.44	\$479.63	\$474.88	\$645.84
55	\$246.69	\$498.32	\$493.39	\$671.00
56	\$256.37	\$517.87	\$512.74	\$697.33
57	\$266.34	\$538.00	\$532.67	\$724.44
58	\$276.73	\$558.99	\$553.46	\$752.70
59	\$287.55	\$580.84	\$575.09	\$782.13
60	\$298.79	\$603.56	\$597.59	\$812.72
61	\$310.47	\$627.14	\$620.93	\$844.47
62	\$310.47	\$627.14	\$620.93	\$844.47
63	\$310.47	\$627.14	\$620.93	\$844.47
64	\$310.47	\$627.14	\$620.93	\$844.47
65	\$310.47	\$627.14	\$620.93	\$844.47
Over 65	\$310.47	\$627.14	\$620.93	\$844.47

**not available to new sales

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, non-Medigap Business - PPO/BluePreferred - Prescription Drug Card Rider
District of Columbia
HIPAA Old Standard Product (Closed) - Grandfathered
Proposed Monthly Premium Rates Effective 7/1/2013

Deductible = \$100
RETAIL (Acute) : 34 Day Supply, Copay = \$10 Generic, \$20 Brand Name
RETAIL (Maintenance) : 35 to 102 Day Supply, Copay = \$20 Generic, \$40 Brand Name
MAIL ORDER: Up to 102 Day Supply, Copay = \$20 Generic, \$40 Brand Name
Annual Benefits Maximum = \$1,500 (100% member coinsurance thereafter)

Base Rate = **\$187.97**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
<21	\$136.65	\$276.04	\$273.31	\$371.70
21	\$136.65	\$276.04	\$273.31	\$371.70
22	\$136.65	\$276.04	\$273.31	\$371.70
23	\$136.65	\$276.04	\$273.31	\$371.70
24	\$136.65	\$276.04	\$273.31	\$371.70
25	\$136.65	\$276.04	\$273.31	\$371.70
26	\$136.65	\$276.04	\$273.31	\$371.70
27	\$136.65	\$276.04	\$273.31	\$371.70
28	\$136.65	\$276.04	\$273.31	\$371.70
29	\$136.65	\$276.04	\$273.31	\$371.70
30	\$136.65	\$276.04	\$273.31	\$371.70
31	\$136.65	\$276.04	\$273.31	\$371.70
32	\$136.65	\$276.04	\$273.31	\$371.70
33	\$140.23	\$283.26	\$280.45	\$381.41
34	\$145.68	\$294.27	\$291.35	\$396.24
35	\$151.32	\$305.66	\$302.63	\$411.58
36	\$157.14	\$317.43	\$314.29	\$427.43
37	\$163.35	\$329.96	\$326.69	\$444.30
38	\$169.74	\$342.87	\$339.47	\$461.68
39	\$176.32	\$356.16	\$352.63	\$479.58
40	\$183.27	\$370.21	\$366.54	\$498.50
41	\$190.41	\$384.64	\$380.83	\$517.93
42	\$197.93	\$399.82	\$395.86	\$538.38
43	\$205.64	\$415.39	\$411.28	\$559.34
44	\$213.72	\$431.72	\$427.44	\$581.32
45	\$221.99	\$448.42	\$443.99	\$603.82
46	\$230.64	\$465.89	\$461.28	\$627.34
47	\$239.66	\$484.12	\$479.32	\$651.88
48	\$249.06	\$503.10	\$498.12	\$677.44
49	\$258.83	\$522.85	\$517.67	\$704.03
50	\$268.99	\$543.35	\$537.97	\$731.64
51	\$279.51	\$564.61	\$559.02	\$760.27
52	\$290.41	\$586.64	\$580.83	\$789.93
53	\$301.69	\$609.42	\$603.38	\$820.60
54	\$313.53	\$633.34	\$627.07	\$852.81
55	\$325.75	\$658.02	\$651.50	\$886.05
56	\$338.53	\$683.84	\$677.07	\$920.81
57	\$351.69	\$710.42	\$703.38	\$956.60
58	\$365.41	\$738.14	\$730.83	\$993.93
59	\$379.70	\$766.99	\$759.40	\$1,032.78
60	\$394.55	\$796.99	\$789.10	\$1,073.17
61	\$409.96	\$828.12	\$819.93	\$1,115.10
62	\$409.96	\$828.12	\$819.93	\$1,115.10
63	\$409.96	\$828.12	\$819.93	\$1,115.10
64	\$409.96	\$828.12	\$819.93	\$1,115.10
65	\$409.96	\$828.12	\$819.93	\$1,115.10
Over 65	\$409.96	\$828.12	\$819.93	\$1,115.10

**not available to new sales

State:

District of Columbia

Filing Company:

Group Hospitalization and Medical Services, Inc.

TOI/Sub-TOI:

H21 Health - Other/H21.000 Health - Other

Product Name:

DC PPO UW & HIPAA - PPACA

Project Name/Number:

1867_DC PPO UW & HIPAA - PPACA /1867

Supporting Document Schedules

Satisfied - Item:	Cover Letter All Filings
Comments:	
Attachment(s):	1867_Cover Letter.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Certificate of Authority to File
Bypass Reason:	n/a
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	1867_DC_PPO UW & HIPAA - PPACA (Q3_Q4 Combined) - Actuarial Memorandum 5-2-13.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Justification
Comments:	Please see actuarial memorandum.
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
Bypass Reason:	n/a
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
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SERFF Tracking #:

CFAP-128905891

State Tracking #:

Company Tracking #:

1867

State:

District of Columbia

Filing Company:

Group Hospitalization and Medical Services, Inc.

TOI/Sub-TOI:

H21 Health - Other/H21.000 Health - Other

Product Name:

DC PPO UW & HIPAA - PPACA

Project Name/Number:

1867_DC PPO UW & HIPAA - PPACA /1867

Bypass Reason:	n/a
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Consumer Disclosure Form
Bypass Reason:	n/a
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Rate Summary Worksheet
Bypass Reason:	n/a
Attachment(s):	
Item Status:	
Status Date:	

GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
Rate Filing # 1867
PPO (BluePreferred)
Underwritten & HIPAA
Standard, Saver, and HSA - PPACA

The attached company rate filing #1867 pertains to the individual, non-Medigap business of GHMSI dba CareFirst BlueCross BlueShield. Rates included in this filing are proposed to have effective dates of 7/1/2013 and 10/1/2013, and are for PPACA products only. In this filing, we are recommending an overall incremental increase of 3.9% for 3Q13, based on our pricing projection which shows a 10.4% needed increase to reach our desired loss ratio. We priced each benefit so that no renewal would exceed 19.9% for any renewal month in 3Q13. Also in this filing, we are recommending a trend increase for 4Q13. A detailed summary of the benefit changes for both 3Q13 and 4Q13 can be seen below.

Product	Medical Rate Change (07/2013 over 04/2013 Rate Level)	Rx Rate Change (07/2013 over 04/2013 Rate Level)	Total Rate Change (07/2013 over 04/2013 Rate Level)	**Total Annual Rate Change (07/2013 over 07/2012 Rate Level) - excluding age change
UW Standard \$100 - 90%	-6.8%	10.0%	-4.3%	0.0%
UW Standard \$300 - 90%	0.0%	10.0%	1.9%	6.8%
UW Standard \$300 - 80%	15.2%	10.0%	14.1%	19.9%
UW Standard \$500 - 80%	15.2%	10.0%	14.0%	19.9%
UW Standard \$750 - 80% *	4.8%	10.0%	6.1%	11.7%
UW Standard \$2500 - 80%	-11.6%	10.0%	-5.5%	0.0%
UW Saver \$2500 - 70%	3.2%	-13.5%	1.3%	12.1%
UW Saver \$5000 - 100%	0.0%	-13.5%	-1.7%	2.5%
UW Saver \$10000 - 100%	0.0%	-13.5%	-2.3%	1.6%
UW HSA \$1200 Option	2.0%	n/a	2.0%	16.6%
UW HSA \$2700 Option	2.8%	n/a	2.8%	16.5%
HIPAA Standard \$100 - 90%	9.8%	10.0%	9.8%	19.9%
HIPAA Standard \$300 - 80%	5.6%	10.0%	6.2%	19.9%
UW Standard	6.1%	10.0%	6.9%	12.4%
UW Saver	1.9%	-13.5%	0.0%	8.0%
UW HSA	2.3%	n/a	2.3%	16.6%
HIPAA Standard	6.9%	10.0%	7.3%	19.9%
Composite	3.6%	7.5%	3.9%	15.7%

Product	Medical Rate Change (10/2013 over 07/2013 Rate Level)	Rx Rate Change (10/2013 over 07/2013 Rate Level)	Total Rate Change (10/2013 over 07/2013 Rate Level)	**Total Annual Rate Change (10/2013 over 10/2012 Rate Level) - excluding age change
UW Standard \$100 - 90%	1.8%	1.8%	1.8%	-4.1%
UW Standard \$300 - 90%	1.8%	1.8%	1.8%	2.6%
UW Standard \$300 - 80%	1.8%	1.8%	1.8%	15.1%
UW Standard \$500 - 80%	1.8%	1.8%	1.8%	15.2%
UW Standard \$750 - 80% *	1.8%	1.8%	1.8%	7.4%
UW Standard \$2500 - 80%	1.8%	1.8%	1.8%	-3.8%
UW Saver \$2500 - 70%	1.8%	1.8%	1.8%	7.4%
UW Saver \$5000 - 100%	1.8%	1.8%	1.8%	-1.7%
UW Saver \$10000 - 100%	1.8%	1.8%	1.8%	-2.5%
UW HSA \$1200 Option	1.9%	n/a	1.9%	8.2%
UW HSA \$2700 Option	1.9%	n/a	1.9%	8.0%
HIPAA Standard \$100 - 90%	1.8%	1.8%	1.8%	14.8%
HIPAA Standard \$300 - 80%	1.8%	1.8%	1.8%	14.9%
UW Standard	1.8%	1.8%	1.8%	7.9%
UW Saver	1.8%	1.8%	1.8%	3.6%
UW HSA	1.9%	n/a	1.9%	8.1%
HIPAA Standard	1.8%	1.8%	1.8%	14.9%
Composite	1.9%	1.8%	1.9%	8.8%

Brad Boban Digitally signed by Brad Boban
 DN: cn=Brad Boban, o=CareFirst BlueCross BlueShield, ou=Actuarial Pricing, email=brad.boban@carefirst.com, c=US
 Date: 2013.02.26 10:15:58 -05'00'

Brad Boban, ASA, MAAA
 Actuarial Associate

**GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
PPO (BluePreferred)**

District of Columbia

**Underwritten & HIPAA
Standard, Saver, and HSA - PPACA
Medical & Rx**

**Rate Filing # 1867
Actuarial Memorandum**

Effective 7/1/2013

**GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
 Individual, Non-Medigap Business
 PPO (BluePreferred)
 District of Columbia
 Underwritten & HIPAA
 Standard, Saver, and HSA - PPACA
 Rate Filing # 1867
 Actuarial Memorandum
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ACTUARIAL CERTIFICATION

I, Brad Boban, am a Pricing Actuary with CareFirst BlueCross BlueShield of which GHMSI is a subsidiary. I am a member of the American Academy of Actuaries. I have been involved in the development of these rates.

To the best of my knowledge, these rating methodologies comply with applicable laws and regulations of the District of Columbia, and produce premiums that are reasonable in relation to benefits, and are based on sound and commonly accepted actuarial principles.

Brad Boban

Digitally signed by Brad Boban
DN: cn=Brad Boban, o=CareFirst BlueCross
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**GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
Rate Filing # 1867
PPO (BluePreferred)
Underwritten & HIPAA
Standard, Saver, and HSA - PPACA**

The attached rate filing pertains to the individual, non-Medigap business of GHMSI dba CareFirst BlueCross BlueShield.

The following is a summary of proposed rate changes included in the filing. The changes are over the most recently filed rates, in filing 1830. Rates included in this filing are proposed to have an effective date of 7/1/2013 and be effective through 12/31/2013. Please see page 10 for the current annual incrementals and the renewal calculations.

Product	Medical Rate Change (07/2013 over 04/2013 Rate Level)	Rx Rate Change (07/2013 over 04/2013 Rate Level)	Total Rate Change (07/2013 over 04/2013 Rate Level)	3rd Quarter 2013 Renewal	4th Quarter 2013 Renewal
				**Total Annual Rate Change (07/2013 over 07/2012 Rate Level) - excluding age change	**Total Annual Rate Change (10/2013 over 10/2012 Rate Level) - excluding age change
UW Standard \$100 - 90%	-6.8%	10.0%	-4.3%	0.0%	-5.8%
UW Standard \$300 - 90%	0.0%	10.0%	1.9%	6.8%	0.7%
UW Standard \$300 - 80%	15.2%	10.0%	14.1%	19.9%	13.1%
UW Standard \$500 - 80%	15.2%	10.0%	14.0%	19.9%	13.2%
UW Standard \$750 - 80% *	5.8%	10.0%	6.8%	12.5%	6.2%
UW Standard \$2500 - 80%	-11.6%	10.0%	-5.5%	0.0%	-5.5%
UW Saver \$2500 - 70%	4.3%	-13.5%	2.3%	13.1%	6.5%
UW Saver \$5000 - 100%	0.0%	-13.5%	-1.7%	2.5%	-3.5%
UW Saver \$10000 - 100%	0.0%	-13.5%	-2.3%	1.6%	-4.3%
UW HSA \$1200 Option	3.1%	n/a	3.1%	17.9%	7.3%
UW HSA \$2700 Option*	3.8%	n/a	3.8%	17.6%	7.0%
UW HSA \$1400 Option***	6.5%	n/a	6.5%	n/a	n/a
HIPAA Standard \$100 - 90%	9.8%	10.0%	9.8%	19.9%	12.8%
HIPAA Standard \$300 - 80%	5.6%	10.0%	6.2%	19.9%	12.9%
UW Standard	6.2%	10.0%	7.0%	12.5%	6.1%
UW Saver	2.6%	-13.5%	0.5%	8.7%	2.3%
UW HSA	3.4%	n/a	3.4%	17.8%	7.3%
HIPAA Standard	6.9%	10.0%	7.3%	19.9%	12.9%
Composite	4.4%	7.5%	4.6%	16.4%	7.5%

These rate changes will also apply to the 10%, 25% and 50% CounterOffers.

* The 25% Counter Offer of the PPO Standard \$750 option will be used for the PPO QTC Coverage. Prior to PPACA, the PPO QTC had the same rate as the PPO OE. However, the PPO OE is now a closed, grandfathered product with different benefits than the PPO QTC product. The PPO OE rate was set equal to 125% of the equivalent Underwritten PPO Option. Using this logic, the PPO QTC rate should be maintained at the 125% of the equivalent PPO Underwritten option.

**The shaded annual rate changes are weighted averages (revenue based).

***The \$1400 HSA Option is a new option that we started selling Jan. 1, 2013. This option was created in response to the Federal Government changing the minimum deductible for a qualified HSA plan from \$1,200 to \$1,250. Since the majority of our subscribers in the \$1,200 deductible will migrate to the \$1,400 deductible we are asking for an increase that will keep the \$1,400 base rate 2.3% less than the \$1,200 deductible's base rate, which is the actuarial value of the \$200 difference in deductible. Please see page 8 for the proposed base rates that the above increases produce.

As of 12/31/11, the "Risk-Based Capital" (RBC) percentage for GHMSI and CFMI were 998% and 679% respectively. Both GHMSI and CFMI own 50/50 of CareFirst Holdings of which the key asset is CareFirst BlueChoice. In 2011, two independent actuarial consultants, Milliman and the Lewin Group, updated their recommended optimal RBC ranges for both legal entities (including their share of CareFirst Holdings) to reflect the impact of Federal Health Care Reform (FHCRR). Based on their surplus evaluations, management filed with their respective regulators revised Board-approved GHMSI and CFMI RBC ranges of 1000-1300% and 1050-1350%, respectively. These ranges increased significantly over the prior 2008 ranges by 150-250% due to changes and uncertainty posed by FHCRR. RBC ratios are calculated on an authorized control level basis.

We have added 3 items to our DICR to reflect additional cost associated with PPACA implementation. The Patient Centered Outcome Fee is a fixed \$2 per member per year that must be paid for all our members to fund the federal Patient Centered Outcome Research Institute (PCORI) for plan beginning after 10/1/12. The Reinsurance fee will be assessed in 2014 to all fully-insured and self-insured members to fund the \$10 billion federal reinsurance program. We've estimated the ultimate cost to be \$64.32 per member per year and have built in a pro-rated fraction of this fee to account for the renewal cohorts who will have these rates in the 2014 calendar year. The Insurer Fee tax is to fund the non-tax deductible fee that applies to fully-insured business only and will amount to \$8 billion dollars in aggregate in 2014. Our estimate for the ultimate cost of this is 1.7% of premium, and just as with the Reinsurance Fee, we have built a small portion into the DICR to cover the portion of premium that will be collected in 2014 and subject to this fee. These latter two fees will increase each filing as a greater portion of the premium reaches into the 2014 calendar year.

On 11/9/11 a conference call meeting was held between CF and the DISB. For CF, Kenny Kan, Brad Boban and Todd Switzer participated. For the DISB, Philip Barlow, Darniece Shirley and Efrén Tanhecho participated. The purpose was to outline our understanding of HHS regulations related to the mechanics of testing for against the PPACA's 10% threshold for unreasonable rate review (URR) toward assent. The context was 2Q12 rate filings. A follow-up mtg was held on 11/22/11. We discussed our mutual understanding of the parameters for the PPACA 10% threshold test for determining rate actions subject to URR. Consistent with those dialogues, this filing is again submitted predicated on the understanding that the threshold test uses a weighted average of 12 months of renewals for non-grandfathered business for the "Individual non-Medigap" and small group markets. Therefore, some single month's renewals may exceed 10% and still not breach the PPACA URR 10% threshold so long as the weighted average for the twelve months ending with the last month of the projection period is below 10%. Based on this understanding, we assume that a non-grandfathered Individual or Small Group filing is not subject to unreasonable rate review if the twelve-month rolling average renewal is under 10%. (As you know, grandfathered (GF) business is not under the purview of PPACA URR. Therefore some GF renewals may exceed a 10% renewal but are not subject to URR.) Exhibits demonstrating our compliance are included in this filing.

CareFirst BlueCross BlueShield (GHMSI)
 Pricing Analysis - Individual, Non-Medicaid Underwritten and HIPAA business - PPACA
 Experience Period: Incurred 10/2011 - 09/2012, Paid Thru 12/2012
 Rate Filing Effective 07/2013

Experience Period:			Projection Period:										Pricing Trend		TARGET LOSS RATIO =		H.S.A. Standard Saver Medical Pooling		Non-CDH Trend		Rx Rebates						
Start Incurred thru Midpt	10/1/2011 9/30/2012 12/31/2012 3/31/2012		Start Thru 7/1/2013 12/31/2013 11/30/2014 3/16/2014 23.5	Women's Preventive			Trend	Trend	Capitation	Capitation	Required	Income	Proj LR at Current Rate Level	Incremental Rate Increase: 07/2013 Over 04/2013	Generated	Proposed - Needed Income	LR w/ Proposed Increase	Renewal Rate Increase: 07/2013 Over 07/2012									
Exp Pd Member Months	Contracts 12/2012	Members 12/2012	Distribution	Incurred Adjusted for Catastrophic	Capitations	Rebates	Incurred + Capitations + Rebates	Income	Loss Ratio	Trend Assumed	Trend Factor	Capitation Factor	Capitations + Rebates	Required Income	IAF	Income at Current 04/2013 Level	Proj LR at Current Rate Level	Derived	Proposed	Generated	Proposed - Needed Income	LR w/ Proposed Increase	Renewal Rate Increase: 07/2013 Over 07/2012				
Medical Experience																											
Underwritten	Standard	6,927	646	783	19.8%	\$1,132,085	\$8,404	\$0	\$1,140,489	\$1,696,859	67.2%	7.5%	1.1521	1.0312	\$1,312,996	\$1,676,154	1.0609	\$1,800,186	72.9%	-6.9%	6.2%	\$1,911,597	\$235,444	68.7%	-4.2%	9.3%	
	Saver	3,341	243	283	7.5%	\$298,838	\$4,051	\$0	\$302,889	\$492,677	61.5%	7.5%	1.1521	1.0317	\$348,485	\$501,132	1.1204	\$551,982	63.1%	-9.2%	2.6%	\$566,304	\$65,172	61.5%	-1.3%	11.6%	
	HSA (incl Rx)	33,647	2,281	3,044	70.0%	\$4,010,923	\$40,798	(\$28,724)	\$4,022,997	\$5,469,726	73.6%	8.0%	1.1627	1.0318	\$4,672,062	\$6,377,194	1.1275	\$6,167,387	75.8%	3.4%	3.4%	\$6,376,269	(\$925)	73.3%	17.8%	17.8%	
	UW Total	43,915	3,170	4,110	97.3%	\$5,441,846	\$53,254	(\$28,724)	\$5,466,375	\$7,659,261	71.4%	7.9%	1.1599	1.0317	\$6,335,543	\$8,554,480	1.1123	\$8,519,555	74.3%	0.4%	3.9%	\$8,854,170	\$298,690	71.5%	11.7%	15.6%	
	HIPAA	Standard	1,341	89	104	2.7%	\$1,398,114	\$1,625	\$0	\$1,399,739	\$1,251,609	111.8%	7.5%	1.1521	1.0322	\$1,612,512	\$2,058,512	1.1397	\$1,426,494	113.0%	44.3%	6.9%	\$1,524,597	(\$533,915)	105.8%	60.9%	19.2%
	HIPAA Total	1,341	89	104	2.7%	\$1,398,114	\$1,625	\$0	\$1,399,739	\$1,251,609	111.8%	7.5%	1.1521	1.0322	\$1,612,512	\$2,058,512	1.1397	\$1,426,494	113.0%	44.3%	6.9%	\$1,524,597	(\$533,915)	105.8%	60.9%	19.2%	
Medical - Underwritten & HIPAA																											
	Standard	8,268	735	887	22.6%	\$2,530,199	\$10,029	\$0	\$2,540,228	\$2,948,468	86.2%	7.5%	1.1521	1.0314	\$2,925,508	\$3,734,666	1.0944	\$3,226,680	90.7%	15.7%	6.5%	\$3,346,194	(\$298,472)	85.1%	17.9%	8.5%	
	Saver	3,341	243	283	7.5%	\$298,838	\$4,051	\$0	\$302,889	\$492,677	61.5%	7.5%	1.1521	1.0317	\$348,485	\$501,132	1.1204	\$551,982	63.1%	-9.2%	2.6%	\$566,304	\$65,172	61.5%	-11.5%	0.0%	
	HSA (incl Rx)	33,647	2,281	3,044	70.0%	\$4,010,923	\$40,798	(\$28,724)	\$4,022,997	\$5,469,726	73.6%	8.0%	1.1627	1.0318	\$4,672,062	\$6,377,194	1.1275	\$6,167,387	75.8%	3.4%	3.4%	\$6,376,269	(\$925)	73.3%	0.0%	0.0%	
	UW & HIPAA Total	45,256	3,259	4,214	100.0%	\$6,839,959	\$54,879	(\$28,724)	\$6,866,114	\$8,910,871	77.1%	7.8%	1.1583	1.0317	\$7,946,054	\$10,612,992	1.1162	\$9,946,049	79.9%	6.7%	4.4%	\$10,378,767	(\$234,225)	76.6%	5.1%	2.8%	
Rx Experience																											
Underwritten	Standard	6,927	646	783	66.1%	\$398,248	\$0	(\$18,738)	\$379,510	\$422,939	89.7%	7.9%	1.1614	1.0000	\$440,750	\$562,655	1.1715	\$495,473	89.0%	13.6%	10.0%	\$545,020	(\$17,636)	80.9%	29.0%	25.0%	
	Saver	3,341	243	283	24.8%	\$19,753	\$0	(\$929)	\$18,824	\$75,413	25.0%	7.9%	1.1614	1.0000	\$21,861	\$31,437	1.0735	\$80,957	27.0%	-61.2%	-13.5%	\$70,028	\$38,590	31.2%	-59.6%	-10.0%	
	HSA (Rx incl w/ Medical)	0	0	0	0.0%	\$0	\$0	\$0	\$0	\$0	0.0%	0.0%	0.0000	0.0000	\$0	\$0	0.0000	\$0	0.0%	0.0%	\$0	\$0	0.0%	0.0%	0.0%	0.0%	
	UW Total	10,268	889	1,066	90.9%	\$418,001	\$0	(\$19,667)	\$398,334	\$498,351	79.9%	7.9%	1.1614	1.0000	\$462,611	\$594,093	1.1567	\$576,430	80.3%	3.1%	6.7%	\$615,048	\$20,955	75.2%	16.0%	20.1%	
	HIPAA	Standard	1,341	89	104	9.1%	\$519,447	\$0	(\$24,440)	\$495,007	\$168,747	293.3%	7.9%	1.1614	1.0000	\$574,884	\$733,889	1.1728	\$197,902	290.5%	270.8%	10.0%	\$217,692	(\$516,198)	264.1%	321.4%	25.0%
	HIPAA Total	1,341	89	104	9.1%	\$519,447	\$0	(\$24,440)	\$495,007	\$168,747	293.3%	7.9%	1.1614	1.0000	\$574,884	\$733,889	1.1728	\$197,902	290.5%	270.8%	10.0%	\$217,692	(\$516,198)	264.1%	321.4%	25.0%	
Rx - Underwritten & HIPAA																											
	Standard	8,268	735	887	75.2%	\$917,695	\$0	(\$43,178)	\$874,517	\$991,686	147.8%	7.9%	1.1614	1.0000	\$1,015,633	\$1,296,545	1.1719	\$693,374	146.5%	87.0%	10.0%	\$762,712	(\$533,833)	133.2%	112.5%	25.0%	
	Saver	3,341	243	283	24.8%	\$19,753	\$0	(\$929)	\$18,824	\$75,413	25.0%	7.9%	1.1614	1.0000	\$21,861	\$31,437	1.0735	\$80,957	27.0%	-61.2%	-13.5%	\$70,028	\$38,590	31.2%	-59.6%	-10.0%	
	HSA (incl Rx)	0	0	0	0.0%	\$0	\$0	\$0	\$0	\$0	0.0%	0.0%	0.0000	0.0000	\$0	\$0	0.0000	\$0	0.0%	0.0%	\$0	\$0	0.0%	0.0%	0.0%	0.0%	
	UW & HIPAA Total	11,609	978	1,170	100.0%	\$937,448	\$0	(\$44,108)	\$893,341	\$667,099	133.9%	7.9%	1.1614	1.0000	\$1,037,495	\$1,327,982	1.1607	\$774,331	134.0%	71.5%	7.5%	\$832,739	(\$495,243)	124.6%	93.5%	21.3%	
Medical & Rx Experience COMBINED																											
Underwritten	Standard	6,927	646	783	19.8%	\$1,530,333	\$8,404	(\$18,738)	\$1,519,999	\$2,119,797	71.7%	7.6%	1.1545	1.0312	\$1,753,745	\$2,238,809	1.0830	\$2,295,659	76.4%	-2.5%	7.0%	\$2,456,617	\$217,808	71.4%	2.5%	12.5%	
	Saver	3,341	243	283	7.5%	\$318,591	\$4,051	(\$929)	\$321,713	\$568,089	56.6%	7.5%	1.1527	1.0317	\$370,347	\$532,570	1.1142	\$632,939	58.5%	-15.9%	0.5%	\$636,331	\$103,762	58.2%	-9.1%	8.7%	
	HSA (incl Rx)	33,647	2,281	3,044	70.0%	\$4,010,923	\$40,798	(\$28,724)	\$4,022,997	\$5,469,726	73.6%	8.0%	1.1627	1.0318	\$4,672,062	\$6,377,194	1.1275	\$6,167,387	75.8%	3.4%	3.4%	\$6,376,269	(\$925)	73.3%	17.8%	17.8%	
	UW Total	43,915	3,170	4,110	97.3%	\$5,859,847	\$53,254	(\$48,932)	\$5,864,709	\$8,157,613	71.9%	7.9%	1.1600	1.0317	\$6,796,154	\$9,148,573	1.1150	\$9,095,985	74.7%	0.6%	4.1%	\$9,469,217	\$320,645	71.8%	11.9%	15.9%	
	HIPAA	Standard	1,341	89	104	2.7%	\$1,917,561	\$1,625	(\$24,440)	\$1,894,746	\$1,420,356	133.4%	7.6%	1.1546	1.0322	\$2,187,396	\$2,792,402	1.1437	\$1,624,395	134.7%	71.9%	7.3%	\$1,742,289	(\$1,050,113)	125.5%	92.1%	19.9%
	HIPAA Total	1,341	89	104	2.7%	\$1,917,561	\$1,625	(\$24,440)	\$1,894,746	\$1,420,356	133.4%	7.6%	1.1546	1.0322	\$2,187,396	\$2,792,402	1.1437	\$1,624,395	134.7%	71.9%	7.3%	\$1,742,289	(\$1,050,113)	125.5%	92.1%	19.9%	
Medical - Underwritten & HIPAA																											
	Standard	8,268	735	887	22.6%	\$3,447,894	\$10,029	(\$43,178)	\$3,414,745	\$3,540,154	96.5%	7.6%	1.1545	1.0314	\$3,941,141	\$5,031,211	1.1073	\$3,920,054	100.5%	28.3%	7.1%	\$4,198,906	(\$832,305)	93.9%	38.5%	15.6%	
	Saver	3,341	243	283	7.5%	\$318,591	\$4,051	(\$929)	\$321,713	\$568,089	56.6%	7.5%	1.1527	1.0317	\$370,347	\$532,570	1.1142	\$632,939	58.5%	-15.9%	0.5%	\$636,331	\$103,762	58.2%	-9.1%	8.7%	
	HSA (incl Rx)	33,647	2,281	3,044	70.0%	\$4,010,923	\$40,798	(\$28,724)	\$4,022,997	\$5,469,726	73.6%	8.0%	1.1627	1.0318	\$4,672,062	\$6,377,194	1.1275	\$6,167,387	75.8%	3.4%	3.4%	\$6,376,269	(\$925)	73.3%	17.8%	17.8%	
	UW & HIPAA Total	45,256	3,259	4,214	100.0%	\$7,777,408	\$54,879	(\$72,932)	\$7,759,455	\$9,577,969	81.0%	7.8%	1.1587	1.0317	\$8,985,549	\$11,940,974	1.1193	\$10,720,380	83.8%	11.4%	4.6%	\$11,211,506	(\$729,468)	80.1%	24.0%	16.4%	

CareFirst BlueCross BlueShield (GHMS)
Pricing Analysis - Individual Nonstop Underwritten and HIPAA business - PPACA
Experience Period: Incurred 10/2011 - 09/2012, Paid Thru 12/2012
Rate Filing Effective 07/2013

Experience Period:	Start Incurred thru Paid thru Midgt	10/1/2011 9/30/2012 12/31/2012 3/31/2012	Projection Period:				Start Thru Midgt Trend Mos	7/1/2013 12/31/2013 11/30/2014 3/16/2014	Start Thru Midgt Trend Mos	Pricing Trend Total Rx Trend	7.5% 8.0% 7.9%	TARGET LOSS RATIO =	H.S.A. Standard Saver Medical Pooling	73.3% 78.3% 69.5%	4.7%	Non-CDH Trend CDH Trend Current Rate Level	7.5% 8.0% 4/1/2013	Rx Rebates Capitations Trend	-4.7% 1.6%												
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	0			
		Exp Pd Member Months	Contracts 12/2012	Members 12/2012	Distribution	Incurred Claims Adjusted for Catastrophic	Capitations	Rebates	Incurred + Capitations + Rebates	Income	Loss Ratio	Trend Assumed	Trend Factor	Capitation Factor	Projected Capitations + Rebates	Required Income	IAF	Income at Current 04/2013 Level	Proj LR at Current Rate Level	Incremental Rate 07/2013 Over 04/2013	Derived	Proposed	Generated Income	Needed - Proposed Income	LR w/ Proposed Increase	Renewal Rate Increase 07/2013 Over 07/2012	Derived	Proposed			
Medical Experience																															
Underwritten Standard	Std \$100 / 90%	690	63	73	1.9%	\$79,651	\$837	\$0	\$80,489	\$248,887	32.2%	7.5%	1.1521	1.0309	\$92,833	\$118,255	1.0604	\$263,918	35.1%	-55.2%	-4.8%	\$245,971	\$127,717	37.7%	-53.9%	-4.1%	\$245,971	\$127,717	37.7%	-53.9%	-4.1%
	Std \$300 / 90%	832	86	93	2.6%	\$111,069	\$1,009	\$0	\$112,078	\$231,357	48.4%	7.5%	1.1521	1.0314	\$129,009	\$164,691	1.0614	\$245,566	52.5%	-32.9%	0.0%	\$245,566	\$80,875	52.5%	-31.0%	2.9%	\$245,566	\$80,875	52.5%	-31.0%	2.9%
	Std \$500 / 80%	1,173	109	130	3.3%	\$220,620	\$1,424	\$0	\$222,043	\$272,112	81.6%	7.5%	1.1521	1.0309	\$255,654	\$326,365	1.0611	\$288,749	88.5%	13.0%	15.2%	\$325,639	\$6,274	76.9%	16.0%	18.5%	\$325,639	\$6,274	76.9%	16.0%	18.5%
	Std \$750 / 80%	2,439	221	273	6.8%	\$480,462	\$2,959	\$0	\$483,421	\$556,171	88.7%	7.5%	1.1521	1.0311	\$568,136	\$725,275	1.0599	\$589,496	96.4%	23.0%	15.2%	\$679,099	(\$46,176)	83.7%	26.8%	38.5%	\$679,099	(\$46,176)	83.7%	26.8%	38.5%
	Std \$1000 / 80%	962	90	116	2.9%	\$179,568	\$1,191	\$0	\$180,759	\$236,460	76.4%	7.5%	1.1521	1.0318	\$208,140	\$265,709	1.0622	\$261,205	82.3%	5.8%	5.8%	\$265,775	\$66	86.3%	8.8%	8.9%	\$265,775	\$66	86.3%	8.8%	8.9%
	Std \$2500 / 80%	811	77	98	2.4%	\$50,696	\$984	\$0	\$51,680	\$151,841	34.0%	7.5%	1.1521	1.0313	\$59,424	\$75,859	1.0620	\$161,253	36.9%	-53.0%	-11.6%	\$142,547	\$66,688	41.7%	-51.6%	-8.0%	\$142,547	\$66,688	41.7%	-51.6%	-8.0%
	Std \$2500 / 70%	1,748	127	146	3.9%	\$220,796	\$2,120	\$0	\$222,906	\$298,022	77.1%	7.5%	1.1521	1.0317	\$266,565	\$368,948	1.1524	\$333,062	77.0%	10.8%	4.3%	\$347,384	(\$21,565)	73.9%	23.6%	16.4%	\$347,384	(\$21,565)	73.9%	23.6%	16.4%
	Svr \$5000 / 100%	754	60	68	1.8%	\$31,853	\$914	\$0	\$32,767	\$113,327	29.2%	7.5%	1.1521	1.0316	\$37,643	\$54,132	1.0778	\$121,062	31.1%	-55.3%	0.0%	\$121,062	\$66,929	31.1%	-53.3%	4.4%	\$121,062	\$66,929	31.1%	-53.3%	4.4%
	Svr \$10000 / 100%	839	56	69	1.7%	\$46,198	\$1,017	\$0	\$47,215	\$91,333	51.7%	7.5%	1.1521	1.0319	\$54,277	\$78,052	1.0714	\$97,858	55.5%	-20.2%	0.0%	\$97,858	\$19,807	55.5%	-17.1%	3.9%	\$97,858	\$19,807	55.5%	-17.1%	3.9%
	HSA (incl Rx)	HSA \$1200 / 80%	16,988	970	1,311	29.8%	\$2,370,017	\$20,592	(\$23,662)	\$2,366,947	\$3,047,021	77.7%	8.0%	1.1627	1.0321	\$2,749,281	\$3,752,668	1.1946	\$3,639,895	75.5%	3.1%	3.1%	\$3,752,732	\$64	73.3%	17.9%	17.9%	\$3,752,732	\$64	73.3%	17.9%
HSA \$2700 / 100%	16,659	1,311	1,733	40.2%	\$1,680,936	\$20,206	(\$5,002)	\$1,685,936	\$2,422,706	69.4%	8.0%	1.1627	1.0315	\$1,922,781	\$2,624,526	1.0433	\$2,527,492	76.1%	3.8%	3.8%	\$2,623,537	(\$939)	73.3%	17.7%	17.7%	\$2,623,537	(\$939)	73.3%	17.7%	17.7%	
UW & HIPAA Total	49,915	3,170	4,110	97.3%	\$5,441,846	\$53,254	(\$28,724)	\$5,466,375	\$7,559,261	77.4%	7.9%	1.1599	1.0327	\$6,333,543	\$8,554,410	1.1323	\$8,519,555	74.3%	0.4%	3.3%	\$8,564,170	\$299,690	71.5%	11.7%	15.9%	\$8,564,170	\$299,690	71.5%	11.7%	15.9%	
HIPAA Standard	Std \$100 / 90%	331	21	25	0.6%	\$347,957	\$401	\$0	\$348,358	\$91,125	89.1%	7.5%	1.1521	1.0322	\$401,312	\$512,309	1.1091	\$433,796	92.5%	18.1%	9.8%	\$476,308	(\$36,002)	84.3%	28.4%	19.4%	\$476,308	(\$36,002)	84.3%	28.4%	19.4%
	Std \$300 / 80%	1,010	68	79	2.1%	\$1,050,157	\$1,224	\$0	\$1,051,382	\$860,485	122.2%	7.5%	1.1521	1.0322	\$1,211,200	\$1,546,203	1.1356	\$992,698	122.0%	55.8%	5.6%	\$1,048,289	(\$497,914)	115.5%	61.7%	19.1%	\$1,048,289	(\$497,914)	115.5%	61.7%	19.1%
	HIPAA Total	1,341	89	104	2.7%	\$1,398,114	\$1,625	\$0	\$1,399,739	\$1,951,610	111.8%	7.5%	1.1521	1.0322	\$1,612,512	\$2,058,512	1.1387	\$1,426,494	119.0%	44.3%	6.9%	\$1,524,597	(\$533,913)	100.8%	75.0%	19.2%	\$1,524,597	(\$533,913)	100.8%	75.0%	19.2%
	HIPAA Total	1,341	89	104	2.7%	\$1,398,114	\$1,625	\$0	\$1,399,739	\$1,951,610	111.8%	7.5%	1.1521	1.0322	\$1,612,512	\$2,058,512	1.1387	\$1,426,494	119.0%	44.3%	6.9%	\$1,524,597	(\$533,913)	100.8%	75.0%	19.2%	\$1,524,597	(\$533,913)	100.8%	75.0%	19.2%
Medical - Underwritten & HIPAA																															
Std \$100 / 90%	1,021	84	98	2.6%	\$427,608	\$1,239	\$0	\$428,846	\$640,012	67.0%	7.5%	1.1521	1.0313	\$493,945	\$630,564	1.0902	\$697,713	70.8%	-9.6%	3.5%	\$722,279	\$91,715	68.4%	-3.5%	10.5%	\$722,279	\$91,715	68.4%	-3.5%	10.5%	
Std \$300 / 90%	832	86	93	2.6%	\$111,069	\$1,009	\$0	\$112,078	\$231,357	48.4%	7.5%	1.1521	1.0314	\$129,009	\$164,691	1.0614	\$245,566	52.5%	-32.9%	0.0%	\$245,566	\$80,875	52.5%	-31.0%	2.9%	\$245,566	\$80,875	52.5%	-31.0%	2.9%	
Std \$500 / 80%	1,173	109	130	3.3%	\$220,620	\$1,424	\$0	\$222,043	\$272,112	81.6%	7.5%	1.1521	1.0315	\$255,654	\$326,365	1.0611	\$288,749	88.5%	13.0%	15.2%	\$325,639	\$6,274	76.9%	16.0%	18.5%	\$325,639	\$6,274	76.9%	16.0%	18.5%	
Std \$750 / 80%	2,439	221	273	6.8%	\$480,462	\$2,959	\$0	\$483,421	\$556,171	88.7%	7.5%	1.1521	1.0311	\$568,136	\$725,275	1.0599	\$589,496	96.4%	23.0%	15.2%	\$679,099	(\$46,176)	83.7%	26.8%	38.5%	\$679,099	(\$46,176)	83.7%	26.8%	38.5%	
Std \$1000 / 80%	962	90	116	2.9%	\$179,568	\$1,191	\$0	\$180,759	\$236,460	76.4%	7.5%	1.1521	1.0318	\$208,140	\$265,709	1.0622	\$261,205	82.3%	5.8%	5.8%	\$265,775	\$66	86.3%	8.8%	8.9%	\$265,775	\$66	86.3%	8.8%	8.9%	
Std \$2500 / 80%	811	77	98	2.4%	\$50,696	\$984	\$0	\$51,680	\$151,841	34.0%	7.5%	1.1521	1.0313	\$59,424	\$75,859	1.0620	\$161,253	36.9%	-53.0%	-11.6%	\$142,547	\$66,688	41.7%	-51.6%	-8.0%	\$142,547	\$66,688	41.7%	-51.6%	-8.0%	
Std \$2500 / 70%	1,748	127	146	3.9%	\$220,796	\$2,120	\$0	\$222,906	\$298,022	77.1%	7.5%	1.1521	1.0317	\$266,565	\$368,948	1.1524	\$333,062	77.0%	10.8%	4.3%	\$347,384	(\$21,565)	73.9%	23.6%	16.4%	\$347,384	(\$21,565)	73.9%	23.6%	16.4%	
Svr \$5000 / 100%	754	60	68	1.8%	\$31,853	\$914	\$0	\$32,767	\$113,327	29.2%	7.5%	1.1521	1.0316	\$37,643	\$54,132	1.0778	\$121,062	31.1%	-55.3%	0.0%	\$121,062	\$66,929	31.1%	-53.3%	4.4%	\$121,062	\$66,929	31.1%	-53.3%	4.4%	
Svr \$10000 / 100%	839	56	69	1.7%	\$46,198	\$1,017	\$0	\$47,215	\$91,333	51.7%	7.5%	1.1521	1.0319	\$54,277	\$78,052	1.0714	\$97,858	55.5%	-20.2%	0.0%	\$97,858	\$19,807	55.5%	-17.1%	3.9%	\$97,858	\$19,807	55.5%	-17.1%	3.9%	
HSA (incl Rx)	HSA \$1200 / 80%	16,988	970	1,311	29.8%	\$2,370,017	\$20,592	(\$23,662)	\$2,366,947	\$3,047,021	77.7%	8.0%	1.1627	1.0321	\$2,749,281	\$3,752,668	1.1946	\$3,639,895	75.5%	3.1%	3.1%	\$3,752,732	\$64	73.3%	17.9%	17.9%	\$3,752,732	\$64	73.3%	17.9%	17.9%
HSA \$2700 / 100%	16,659	1,311	1,733	40.2%	\$1,680,936	\$20,206	(\$5,002)	\$1,685,936	\$2,422,706	69.4%	8.0%	1.1627	1.0315	\$1,922,781	\$2,624,526	1.0433	\$2,527,492	76.1%	3.8%	3.8%	\$2,623,537	(\$939)	73.3%	17.7%	17.7%	\$2,623,537	(\$939)	73.3%	17.7%	17.7%	
UW & HIPAA Total	45,256	3,259	4,214	100.0%	\$6,839,969	\$54,879	(\$28,724)	\$6,866,114	\$8,910,871	77.1%	7.9%	1.1583	1.0327	\$7,946,054	\$10,612,962	1.1162	\$10,946,049	79.9%	6.7%	4.4%	\$10,378,767	(\$234,225)	76.6%	17.0%	16.9%	\$10,378,767	(\$234,225)	76.6%	17.0%	16.9%	
Rx Experience																															
Underwritten Standard	Std \$100 / 90%	690	63	73	6.4%	\$18,482	\$0	(\$870)	\$17,613	\$39,364	44.7%	7.9%	1.1614	1.0000	\$20,455	\$26,112	1.1710	\$46,094	44.4%	-43.3%	10.0%	\$50,770	\$24,591	40.3%	-35.6%	25.0%	\$50,770	\$24,591	40.3%	-35.6%	25.0%
	Std \$300 / 90%	832	86	93	8.8%	\$53,846	\$0	(\$2,533)	\$51,312	\$48,712	105.3%	7.9%	1.1614	1.0000	\$59,593	\$76,075	1.1719	\$57,088	104.4%	33.3%	10.0%	\$62,797	(\$13,278)	94.0%	51.4%	25.0%	\$62,797	(\$13,278)	94.0%	51.4%	25.0%
	Std \$500 / 80%	1,173	109	130	11.1%	\$72,745	\$0	(\$3,423)	\$69,323	\$67,493	102.7%	7.9%	1.1614	1.0000	\$80,509	\$102,777	1.1715	\$79,069	101.8%	30.0%	10.0%	\$86,976	(\$15,800)	92.6%	47.7%	25.0%	\$86,976	(\$15,800)	92.6%	47.7%	25.0%
	Std \$750 / 80%	2,439	221	273	22.9%	\$162,081	\$0	(\$7,668)	\$154,413	\$145,891	106.5%	7.9%	1.1614	1.0000	\$180,375																

CareFirst BlueCross BlueShield
Individual Non-Medigap Underwritten Rate Filing Effective 07/01/2013
 Experience Period Incurred Claims Trends and Proposed Rating Trends (with separate HSA)
 Experience Period: Incurred 10/01/2011 through 09/30/2012 Paid through 12/31/2012

	Member Months	Weights by Incurred Claims	Rolling-12 Observed Claims Trend	Rolling-12 Normalized Trend	Proposed Rating Trend 07/01/2013	EP Claims	Prior Rating Trend 04/01/2013
Medical Non-HSA							
HMO - MD	91,811	88.8%	15.0%	12.3%	9.0%	\$20,004,183	8.5%
HMO - DC	14,241	11.2%	11.2%	6.2%	9.0%	\$2,525,820	12.5%
Total HMO Medical	106,052	100.0%	14.6%	11.6%	9.0%	\$22,530,003	8.9%
PPO - MD	154,125	34.7%	12.0%	11.0%	7.5%	\$22,468,840	6.5%
PPO - DC	63,153	20.2%	23.3%	20.8%	7.5%	\$13,057,109	7.0%
PPO - VA	170,012	45.1%	6.8%	11.2%	8.0%	\$29,192,360	7.5%
Total PPO Medical	387,290	100.0%	12.0%	13.1%	7.7%	\$64,718,310	7.1%
HMO & PPO Medical Non-HSA Subtotal	493,342		12.6%	12.7%	8.1%	\$87,248,313	7.5%
Rx Non-HSA							
HMO - MD	91,811	79.9%	17.0%	6.4%	9.0%	\$946,503	8.5%
HMO - DC	14,241	20.1%	42.5%	-2.8%	9.0%	\$237,968	12.5%
Total HMO Rx	106,052	100.0%	22.2%	4.5%	9.0%	\$1,184,471	9.3%
PPO - MD	154,125	32.7%	17.8%	13.7%	7.5%	\$3,147,424	6.5%
PPO - DC	63,153	20.2%	12.5%	-2.4%	7.5%	\$1,944,634	7.0%
PPO - VA	170,012	47.1%	2.2%	4.3%	8.0%	\$4,526,241	7.5%
Total PPO Rx	387,290	100.0%	9.4%	6.0%	7.7%	\$9,618,299	7.1%
HMO & PPO Rx Non-HSA Subtotal	493,342		10.8%	5.9%	7.9%	\$10,802,770	7.3%
Medical & Rx Non-HSA							
HMO - MD			15.1%	12.0%	9.0%	\$20,950,686	8.5%
HMO - DC			13.9%	5.5%	9.0%	\$2,763,788	12.5%
PPO - MD			12.7%	11.4%	7.5%	\$25,616,264	6.5%
PPO - DC			21.9%	17.8%	7.5%	\$15,001,743	7.0%
PPO - VA			6.2%	10.2%	8.0%	\$33,718,602	7.5%
Total Non-HSA			12.4%	11.9%	8.0%	\$98,051,083	7.5%
Total CMM - MD (Includes Medical & Rx)	595,035	100.0%	6.4%	7.9%	9.0%	\$103,751,891	11.5%
HSA (Includes Medical & Rx)							
HMO HSA - MD	128,893	26.2%	18.2%	18.0%	10.0%	\$18,300,872	9.0%
HMO HSA - DC	5,266	0.7%	29.3%	9.5%	9.0%	\$522,535	8.0%
HMO HSA - VA	11,430	2.9%	10.8%	5.3%	7.5%	\$1,998,880	7.5%
PPO HSA - MD	144,697	26.6%	3.6%	1.8%	8.0%	\$18,618,671	8.5%
PPO HSA - DC	33,647	5.7%	4.2%	1.2%	8.5%	\$3,987,468	8.5%
PPO HSA - VA	50,632	10.6%	-0.4%	-1.0%	8.5%	\$7,426,896	9.0%
CMM HSA	140,686	27.2%	7.1%	6.5%	9.0%	\$19,039,112	14.5%
Total HSA	515,251	100.0%	8.4%	7.1%	8.9%	\$69,894,433	10.3%
Medical Total	1,603,628		9.0%	9.3%	8.6%	\$260,894,637	9.9%
Medical & Rx Combined	1,603,628		9.1%	9.2%	8.6%	\$271,697,408	9.8%

**GHMSI dba
CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
District of Columbia**

**Proposed PPO/BluePreferred Base Rates - PPACA
Effective 7/1/2013**

UW Options	Coverage Type	Deductible (In/Out)	Coinsurance (In/Out)	OOP Max (In/Out)	Current	Proposed			Proposed Counter Offers			Base Rate 7/1/2012	Base Rate Renewal Increase
					Base Rate 4/1/2013	Base Rate 7/1/2013	% Change	\$ Change	110% 10% Load Base Rate 7/1/2013	125% 25% Load Base Rate 7/1/2013	150% 50% Load Base Rate 7/1/2013		
1	PPO	\$100/\$300	90%/70%	\$2,500/\$5,000	\$469.13	\$437.23	-6.8%	(\$31.90)	n/a	n/a	n/a	\$455.93	-4.1%
2	PPO	\$300/\$500	90%/70%	\$2,500/\$5,000	\$353.29	\$353.29	0.0%	\$0.00	n/a	n/a	n/a	\$343.34	2.9%
3	PPO	\$300/\$500	80%/60%	\$2,500/\$5,000	\$293.80	\$338.46	15.2%	\$44.66	n/a	n/a	n/a	\$285.53	18.5%
4	PPO	\$500/\$750	80%/60%	\$2,500/\$4,000	\$280.47	\$323.10	15.2%	\$42.63	\$355.41	\$403.88	\$484.65	\$272.57	18.5%
5	PPO	\$750/\$1,000	80%/60%	\$3,500/\$7,000	\$260.42	\$275.52	5.8%	\$15.10	\$303.07	\$344.40	\$413.28	\$253.10	8.9%
6	PPO	\$2,500/\$5,000	80%/60%	\$5,000/\$7,500	\$212.02	\$187.43	-11.6%	(\$24.59)	\$206.17	\$234.29	\$281.15	\$206.06	-9.0%
7	PPO Saver	\$2,500/\$5,000	70%/60%	\$5,000/\$10,000	\$186.82	\$194.85	4.3%	\$8.03	\$214.34	\$243.56	\$292.28	\$167.38	16.4%
8	PPO Saver	\$5,000/\$10,000	100%/80%	\$5,000/\$12,500	\$168.93	\$168.93	0.0%	\$0.00	\$185.82	\$211.16	\$253.40	\$161.88	4.4%
9	PPO Saver	\$10,000/\$12,500	100%/80%	\$10,000/\$15,000	\$121.92	\$121.92	0.0%	\$0.00	\$134.11	\$152.40	\$182.88	\$117.33	3.9%
10	PPO H.S.A.	\$1,200/\$2,400 (Self)	80%/60% (Self)	\$2,800/\$5,000 (Self)	\$198.24	\$204.39	3.1%	\$6.15	\$224.83	\$255.49	\$306.59	\$173.34	17.9%
11	PPO H.S.A.	\$2,700/\$5,400 (Self)	100%/80% (Self)	\$3,200/\$6,400 (Self)	\$145.93	\$151.48	3.8%	\$5.55	\$166.63	\$189.35	\$227.22	\$128.79	17.6%
12	PPO H.S.A.	\$1,400/\$2,800 (Self)	80%/60% (Self)	\$2,800/\$5,000 (Self)	\$187.56	\$199.75	6.5%	\$12.19	\$219.73	\$249.69	\$299.63	n/a	n/a

UW	Coverage Type	Deductible	Copay	Max Annual Benefit	Current	Proposed			Proposed Counter Offers			Current Base Rate 7/1/2012	% Change
					Base Rate 4/1/2013	Base Rate 7/1/2013	% Change	\$ Change	110% 10% Load Base Rate 7/1/2013	125% 25% Load Base Rate 7/1/2013	150% 50% Load Base Rate 7/1/2013		
	Standard Rx	\$100	\$10/\$25/\$45	Unlimited	\$84.87	\$93.36	10.0%	\$8.49	\$102.70	\$116.70	\$140.04	\$74.69	25.0%
	Saver Rx	\$100	\$15 Generic Only	Unlimited	\$24.66	\$21.33	-13.5%	(\$3.33)	\$23.46	\$26.66	\$32.00	\$23.71	-10.0%

HIPAA Options	Coverage Type	Deductible (In/Out)	Coinsurance (In/Out)	OOP Max (In/Out)	Current	Proposed			Current Base Rate 7/1/2012	% Change
					Base Rate 4/1/2013	Base Rate 7/1/2013	% Change	\$ Change		
1	PPO	\$100/\$300	90%/70%	\$2,500/\$5,000	\$1,288.21	\$1,414.45	9.8%	\$126.24	\$1,184.63	19.4%
3	PPO	\$300/\$500	80%/60%	\$2,500/\$5,000	\$858.66	\$906.74	5.6%	\$48.08	\$761.18	19.1%

HIPAA	Coverage Type	Deductible	Copay	Max Annual Benefit	Current	Proposed			Current Base Rate 7/1/2012	% Change
					Base Rate 4/1/2013	Base Rate 7/1/2013	% Change	\$ Change		
	Standard Rx	\$100	\$10/\$25/\$45	Unlimited	\$129.41	\$142.35	10.0%	\$12.94	\$113.89	25.0%
	Closed Rx - Non-PPACA	\$100	\$10/\$20	\$1,500	\$170.88	\$187.97	10.0%	\$17.09	\$150.39	25.0%

HIPAA PPO High w/ Open Rx	\$1,417.62	\$1,556.80	9.8%	HIPAA PPO High w/ Open Rx	\$1,298.52	19.9%
HIPAA PPO High w/ Closed Rx	\$1,459.09	\$1,602.42	9.8%	HIPAA PPO High w/ Closed Rx	\$1,335.02	20.0%
HIPAA PPO Low w/ Open Rx	\$988.07	\$1,049.09	6.2%	HIPAA PPO Low w/ Open Rx	\$875.07	19.9%
HIPAA PPO Low w/ Closed Rx	\$1,029.54	\$1,094.71	6.3%	HIPAA PPO Low w/ Closed Rx	\$911.57	20.1%

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, Non-Medigap Business
PPO (BluePreferred)
Underwritten & HIPAA
District of Columbia
Standard, Saver, and HSA - PPACA
Incremental Rate Increase History

Effective Date	Medical			Rx		Medical	Rx
	Underwritten Standard	Underwritten Saver	Underwritten H.S.A.	Underwritten Standard	Underwritten Saver	HIPAA Standard	HIPAA Standard
10/01/95							
05/01/97							
05/01/97							
01/01/98							
01/01/98						Inception	
07/01/98						4.0%	
01/01/03						18.6%	
03/01/03						0.0%	Inception
01/01/04						9.0%	9.6%
01/01/05						0.0%	0.0%
10/01/05						-6.3%	0.0%
03/01/06			Inception			0.0%	0.0%
08/01/06			-10.8%			-5.0%	-5.0%
01/01/07			0.0%			12.5%	0.0%
07/01/07			0.0%			3.7%	0.0%
01/01/08			5.0%			11.0%	1.8%
07/01/08			0.0%			4.3%	0.0%
01/01/09			0.0%			12.3%	0.0%
04/01/09			35.0%			5.7%	0.0%
07/01/09			0.0%			3.2%	0.0%
1/1/2010*			-17.8%			2.9%	0.0%
4/1/2010*			34.1%			2.4%	0.0%
07/01/10			-5.8%			7.3%	5.1%
10/01/10	Inception	Inception	7.9%	Inception	Inception	-0.5%	0.0%
01/01/11	2.4%	2.4%	-19.7%	2.4%	2.4%	0.0%	0.0%
04/01/11	2.4%	2.4%	34.1%	2.4%	2.4%	2.4%	2.4%
06/01/11	0.0%	0.0%	-13.2%	0.0%	0.0%	-14.9%	0.0%
07/01/11	0.0%	0.0%	-5.8%	0.0%	0.0%	8.5%	0.0%
10/01/11	0.0%	0.0%	9.9%	0.0%	0.0%	0.0%	0.0%
01/01/12	0.0%	0.0%	-12.2%	0.0%	0.0%	0.0%	0.0%
04/01/12	1.7%	1.7%	5.9%	1.7%	1.7%	1.7%	1.7%
07/01/12	1.7%	1.7%	0.0%	1.7%	1.7%	1.7%	1.7%
10/01/12	6.5%	6.5%	9.9%	4.0%	4.0%	6.5%	4.0%
01/01/13	-5.0%	-2.7%	-6.2%	-5.0%	0.0%	0.4%	-5.0%
04/01/13	1.7%	4.8%	10.4%	15.0%	0.0%	4.2%	15.0%
PROPOSED 07/01/13	6.2%	2.6%	3.4%	10.0%	-13.5%	6.9%	10.0%

* Per DC Emergency Bill capping renewals @ 12.0% (excluding changes to age band, tier and benefit)

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, Non-Medigap Business
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Current Incremental Rate Increases and Renewals

Renewals are equal to the multiplication or product of the prior 12 month's incrementals. In the table below, July's renewals are equal the product of the approved incrementals from all filings in the prior year. Those incremental increases are in columns 1 through 12, from August 2012 through July 2013. Each subsequent month's renewal is then the product of the next twelve months of incrementals. So, August renewals are the product of columns 2-13 and so on. This table shows the resulting renewals based on the prior approved rate increases and the newly proposed rate increases effective 7/1. As mentioned in the filing summary we are not proposing any incremental rate increases for 10/1. The increases we are proposing for 7/1 and the rates they produce will be effective from 7/1/2013 through 12/31/2013. But those July increases will produce different renewal amounts in the third and fourth quarter, as seen below.

		1	2	3		4	5	6	7	8	9	10	11	12	13	14	15	16	17	
		Aug-12	Sep-12	Q4 2012		Q1 2013		Q2 2013		Q3 2013		Q4 2013								
		Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13		
Medical & Rx Combined																				
Incrementals																				
UW	Std \$100 / 90%	0%	0%	6.1%	0%	0%	-5.0%	0%	0%	3.5%	0%	0%	-4.2%	0%	0%	0.0%	0%	0%	0%	
	Std \$300 / 90%	0%	0%	6.1%	0%	0%	-5.0%	0%	0%	4.0%	0%	0%	1.9%	0%	0%	0.0%	0%	0%	0%	
	Std \$300 / 80%	0%	0%	6.0%	0%	0%	-5.0%	0%	0%	4.4%	0%	0%	14.0%	0%	0%	0.0%	0%	0%	0%	
	Std \$500 / 80%	0%	0%	6.0%	0%	0%	-5.0%	0%	0%	4.5%	0%	0%	14.0%	0%	0%	0.0%	0%	0%	0%	
	Std \$750 / 80%	0%	0%	5.9%	0%	0%	-5.0%	0%	0%	4.7%	0%	0%	6.8%	0%	0%	0.0%	0%	0%	0%	
	Std \$2500 / 80%	0%	0%	5.8%	0%	0%	-5.0%	0%	0%	5.2%	0%	0%	-5.4%	0%	0%	0.0%	0%	0%	0%	
	Svr \$2500 / 70%	0%	0%	6.2%	0%	0%	0.0%	0%	0%	4.2%	0%	0%	2.2%	0%	0%	0.0%	0%	0%	0%	
	Svr \$5000 / 100%	0%	0%	6.2%	0%	0%	-5.7%	0%	0%	4.2%	0%	0%	-1.7%	0%	0%	0.0%	0%	0%	0%	
	Svr \$10000 / 100%	0%	0%	6.1%	0%	0%	-5.8%	0%	0%	4.0%	0%	0%	-2.3%	0%	0%	0.0%	0%	0%	0%	
	HSA \$1200 / 80%	0%	0%	9.9%	0%	0%	-8.8%	0%	0%	14.1%	0%	0%	3.1%	0%	0%	0.0%	0%	0%	0%	
	HSA \$2700 / 100%	0%	0%	9.9%	0%	0%	-1.9%	0%	0%	5.1%	0%	0%	3.8%	0%	0%	0.0%	0%	0%	0%	
HIPAA	Std \$100 / 90%	0%	0%	6.3%	0%	0%	-0.1%	0%	0%	2.8%	0%	0%	9.8%	0%	0%	0.0%	0%	0%	0%	
	Std \$300 / 80%	0%	0%	6.2%	0%	0%	-0.3%	0%	0%	6.7%	0%	0%	6.2%	0%	0%	0.0%	0%	0%	0%	
Renewals																				
														Q3 2013			Q4 2013			
														Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	
UW	Std \$100 / 90%													0.0%	0.0%	0.0%	-5.8%	-5.8%	-5.8%	
	Std \$300 / 90%													6.8%	6.8%	6.8%	0.7%	0.7%	0.7%	
	Std \$300 / 80%													19.9%	19.9%	19.9%	13.1%	13.1%	13.1%	
	Std \$500 / 80%													19.9%	19.9%	19.9%	13.2%	13.2%	13.2%	
	Std \$750 / 80%													12.5%	12.5%	12.5%	6.2%	6.2%	6.2%	
	Std \$2500 / 80%													0.0%	0.0%	0.0%	-5.5%	-5.5%	-5.5%	
	Svr \$2500 / 70%													13.1%	13.1%	13.1%	6.5%	6.5%	6.5%	
	Svr \$5000 / 100%													2.5%	2.5%	2.5%	-3.5%	-3.5%	-3.5%	
	Svr \$10000 / 100%													1.6%	1.6%	1.6%	-4.3%	-4.3%	-4.3%	
	HSA \$1200 / 80%													17.9%	17.9%	17.9%	7.3%	7.3%	7.3%	
	HSA \$2700 / 100%													17.6%	17.6%	17.6%	7.0%	7.0%	7.0%	
HIPAA	Std \$300 / 90%													19.9%	19.9%	19.9%	12.8%	12.8%	12.8%	
	Std \$500 / 80%													19.9%	19.9%	19.9%	12.9%	12.9%	12.9%	
Filing Date	SERFF Filing #	CF Filing #	Status																	
Oct-12	CFAP-128343860	1782	Approved																	
Jan-13	CFAP-128659635	1819	Approved																	
Apr-13	CFAP-128718553	1830	Approved																	
Jul-13	CFAP-128905891	1867	Current Submission																	

District of Columbia GHMSI
as of 10/01/2013 Rate Filing
HIOS Rate Review Threshold Test

HIOS Product ID	HIOS Product	Benefit Option	Written Premium	3Q13 Incremental Increases	4Q13 Incremental Increases	Contract Months	Renewal Increase by Renewal Month												Distribution of Renewal Income by Renewal Month												Weighted Average	Beneath Threshold?		
							1/1/13	2/1/13	3/1/13	4/1/13	5/1/13	6/1/13	7/1/13	8/1/13	9/1/13	10/1/13	11/1/13	12/1/13	1/1	2/1	3/1	4/1	5/1	6/1	7/1	8/1	9/1	10/1	11/1	12/1				
	PPACA	Std \$100 / 90%	\$248,887	-4.2%	0.0%	606	4.3%	4.3%	4.3%	6.2%	6.2%	6.2%	0.0%	0.0%	0.0%	-5.8%	-5.8%	-5.8%	8.4%	12.7%	5.8%	13.7%	14.4%	7.1%	3.0%	4.7%	15.9%	0.0%	1.6%	12.8%	2.5%			
	PPACA	Std \$300 / 90%	\$231,357	1.9%	0.0%	799	4.2%	4.2%	4.2%	6.6%	6.6%	6.6%	6.8%	6.8%	6.8%	0.7%	0.7%	0.7%	13.2%	8.6%	4.6%	6.3%	9.7%	4.3%	8.2%	16.0%	5.2%	6.3%	6.4%	11.2%	4.6%			
	PPACA	Std \$300 / 80%	\$272,112	14.0%	0.0%	992	4.1%	4.1%	4.1%	6.9%	6.9%	6.9%	19.9%	19.9%	19.9%	13.1%	13.1%	13.1%	13.8%	9.4%	9.5%	7.5%	10.2%	5.8%	8.9%	7.1%	8.0%	5.0%	5.8%	8.9%	10.3%			
	PPACA	Std \$500 / 80%	\$556,171	14.0%	0.0%	2,084	4.1%	4.1%	4.1%	7.0%	7.0%	7.0%	19.9%	19.9%	19.9%	13.2%	13.2%	13.2%	4.6%	5.7%	14.8%	10.8%	7.4%	7.7%	11.2%	7.5%	10.4%	5.5%	6.5%	8.0%	11.3%			
	PPACA	Std \$750 / 80%	\$236,490	6.8%	0.0%	825	4.1%	4.1%	4.1%	7.1%	7.1%	7.1%	12.5%	12.5%	12.5%	6.2%	6.2%	6.2%	7.3%	13.8%	16.8%	10.2%	12.6%	8.1%	10.7%	5.7%	3.4%	2.2%	4.2%	5.0%	6.9%			
	PPACA	Std \$2500 / 80%	\$151,841	-5.4%	0.0%	656	4.0%	4.0%	4.0%	7.5%	7.5%	7.5%	0.0%	0.0%	0.0%	-5.5%	-5.5%	-5.5%	16.7%	7.3%	15.2%	10.0%	9.5%	8.1%	8.5%	10.2%	1.2%	3.0%	3.5%	7.0%	2.9%			
	Corridor	Std \$100 / 90%	\$61,732	17.9%	0.0%	200	9.9%	9.9%	9.9%	5.6%	5.6%	5.6%	14.5%	14.5%	14.5%	19.9%	19.9%	19.9%	0.0%	0.0%	0.0%	21.0%	20.3%	15.0%	7.6%	23.3%	12.9%	0.0%	0.0%	0.0%	9.5%			
	Corridor	Std \$300 / 90%	\$94,023	2.8%	0.0%	296	9.9%	9.9%	9.9%	5.8%	5.8%	5.8%	8.1%	8.1%	8.1%	4.6%	4.6%	4.6%	0.0%	0.0%	0.0%	14.2%	10.3%	3.0%	19.4%	18.0%	35.1%	0.0%	0.0%	0.0%	7.5%			
	Corridor	Std \$300 / 80%	\$70,976	10.8%	0.0%	360	9.9%	9.9%	9.9%	5.9%	5.9%	5.9%	12.6%	12.6%	12.6%	12.7%	12.7%	12.7%	0.0%	0.0%	0.0%	24.9%	13.1%	13.5%	16.1%	11.0%	21.4%	0.0%	0.0%	0.0%	9.2%			
	Corridor	Std \$500 / 80%	\$207,415	9.7%	0.0%	870	9.9%	9.9%	9.9%	9.3%	9.3%	9.3%	5.2%	5.2%	5.2%	19.9%	19.9%	19.9%	0.0%	0.0%	0.0%	13.9%	12.6%	12.4%	12.0%	22.6%	26.6%	0.0%	0.0%	0.0%	6.8%			
	Corridor	Std \$750 / 80%	\$157,815	9.8%	0.0%	767	9.9%	9.9%	9.9%	9.2%	9.2%	9.2%	9.2%	9.2%	9.2%	19.9%	19.9%	19.9%	0.0%	0.0%	0.0%	18.9%	7.3%	11.7%	20.2%	12.9%	29.0%	0.0%	0.0%	0.0%	12.5%			
	Corridor	Std \$2500 / 80%	\$105,846	13.5%	0.0%	643	9.9%	9.9%	9.9%	6.5%	6.5%	6.5%	19.6%	19.6%	19.6%	15.4%	15.4%	15.4%	0.0%	0.0%	0.0%	17.7%	32.7%	3.4%	12.5%	9.7%	23.9%	0.0%	0.0%	0.0%	7.9%	Yes		
78079DC012	UW Standard	Total	\$2,394,666	7.9%	0.0%	9,098																												
	PPACA	Svr \$2500 / 70%	\$289,022	2.2%	0.0%	1,516	9.8%	9.8%	9.8%	12.6%	12.6%	12.6%	13.1%	13.1%	13.1%	6.5%	6.5%	6.5%	14.8%	10.5%	6.1%	8.3%	2.7%	7.5%	6.7%	8.4%	14.9%	4.8%	6.3%	9.0%	10.7%			
	PPACA	Svr \$5000 / 100%	\$112,322	-1.7%	0.0%	641	3.6%	3.6%	3.6%	6.1%	6.1%	6.1%	2.5%	2.5%	2.5%	-3.5%	-3.5%	-3.5%	11.8%	14.1%	11.7%	1.8%	8.7%	6.4%	9.5%	8.1%	8.2%	6.7%	0.9%	12.1%	2.3%			
	PPACA	Svr \$10000 / 100%	\$91,333	-2.3%	0.0%	725	3.4%	3.4%	3.4%	5.7%	5.7%	5.7%	1.6%	1.6%	1.6%	-4.3%	-4.3%	-4.3%	13.2%	9.3%	0.0%	7.3%	2.0%	5.5%	5.7%	3.2%	27.6%	14.1%	4.1%	8.0%	1.1%			
	Corridor	Svr \$2500 / 70%	\$44,327	17.4%	0.0%	424	9.9%	9.9%	9.9%	12.1%	12.1%	12.1%	19.9%	19.9%	19.9%	9.2%	9.2%	9.2%	0.0%	0.0%	0.0%	14.6%	34.1%	24.0%	13.8%	4.7%	8.7%	0.0%	0.0%	0.0%	14.3%			
	Corridor	Svr \$5000 / 100%	\$17,398	3.0%	0.0%	137	9.8%	9.8%	9.8%	12.0%	12.0%	12.0%	5.0%	5.0%	5.0%	-0.9%	-0.9%	-0.9%	0.0%	0.0%	0.0%	11.8%	7.8%	10.8%	7.3%	59.3%	3.0%	0.0%	0.0%	0.0%	7.2%			
	Corridor	Svr \$10000 / 100%	\$7,785	0.0%	0.0%	157	9.9%	9.9%	9.9%	12.1%	12.1%	12.1%	10.6%	10.6%	10.6%	4.6%	4.6%	4.6%	0.0%	0.0%	0.0%	6.2%	8.7%	0.0%	8.0%	53.4%	23.7%	0.0%	0.0%	0.0%	10.8%			
78079DC013	Saver	Total	\$562,187	1.9%	0.0%	3,600																												
	PPACA	HSA \$1200 / 80%	\$3,047,335	3.1%	0.0%	12,831	9.9%	9.9%	9.9%	14.4%	14.4%	14.4%	17.9%	17.9%	17.9%	7.3%	7.3%	7.3%	9.9%	9.3%	7.4%	8.6%	7.3%	8.9%	9.7%	6.2%	7.6%	9.2%	9.8%	6.0%	12.2%			
	PPACA	HSA \$2700 / 100%	\$2,423,138	3.8%	0.0%	12,282	7.8%	7.8%	7.8%	13.3%	13.3%	13.3%	17.6%	17.6%	17.6%	7.0%	7.0%	7.0%	10.3%	10.4%	8.2%	5.8%	6.7%	9.1%	7.4%	7.9%	9.8%	9.9%	7.5%	7.1%	11.3%			
78079DC003	HSA	Total	\$5,470,472	3.4%	0.0%	25,113																												
	PPACA	Std \$100 / 90%	\$391,125	9.8%	0.0%	274	9.9%	9.9%	9.9%	11.0%	11.0%	11.0%	19.9%	19.9%	19.9%	12.8%	12.8%	12.8%	4.3%	14.7%	5.8%	14.6%	15.9%	15.1%	10.1%	0.0%	6.5%	1.8%	8.8%	2.4%	12.4%			
	PPACA	Std \$300 / 80%	\$860,485	6.2%	0.0%	877	9.5%	9.5%	9.5%	14.8%	14.8%	14.8%	19.9%	19.9%	19.9%	12.9%	12.9%	12.9%	2.0%	10.8%	10.5%	15.4%	4.9%	7.0%	6.2%	6.8%	7.9%	10.2%	9.3%	8.9%	14.1%			
78079DC005	HIPAA Standard	Total	\$1,251,609	7.3%	0.0%	1,151																												

CareFirst BlueCross Blue Shield
Itemization of Premium Components by Product
Individual non-Medigap: DC GHMSI

	1	2	3	4	5
H.S.A.					
Members a/o 12/31/12		3,044			
Member to Contract Ratio		1.335			
		Composite			
	Function	PMPM	%		\$s
1	Projected Claims (+ Capitations)	\$137.54	73.3%		\$5,023,981
2	Admin Costs	\$26.30	14.0%		\$960,826
3	Broker Commissions & Fees	\$14.80	7.9%		\$540,597
4	Contrib to Reserve	\$0.00	0.00%		\$0
5	Invst Income Credit	(\$0.00)	0.0%		(\$7)
6	Premium Tax/Community Health Investment	\$3.75	2.0%		\$137,151
7	Assessment Fees	\$0.16	0.1%		\$5,990
8	Federal Income Tax	\$0.00	0.00%		\$0
9	State Income Tax	\$0.00	0.0%		\$0
10	Patient-Centered Outcome Fee	\$0.17	0.09%		\$6,088
11	Reinsurance Fee	\$3.14	1.67%		\$114,655
12	Insurer Fee Tax	\$1.87	1.00%		\$68,269
13	Risk Charge	\$0.00	0.0%		\$0
14	SUBTOTAL:	\$188	100.0%		\$6,857,551
Saver					
17	Members a/o 12/31/12				
18	Member to Contract Ratio				
19	Projected Claims (+ Capitations)	\$100.86	69.5%		\$716,475
20	Admin Costs	\$20.32	14.0%		\$144,359
21	Broker Commissions & Fees	\$16.06	11.1%		\$114,234
22	Contrib to Reserve	\$0.00	0.0%		\$0
23	Invst Income Credit	(\$0.00)	0.00%		(\$1)
24	Premium Tax/Community Health Investment	\$2.90	2.0%		\$20,606
25	Assessment Fees	\$0.13	0.1%		\$900
26	Federal Income Tax	\$0.00	0.0%		\$0
27	State Income Tax	\$0.00	0.0%		\$0
28	Patient-Centered Outcome Fee	\$0.17	0.1%		\$1,184
29	Reinsurance Fee	\$3.14	2.2%		\$22,298
30	Insurer Fee Tax	\$1.44	1.0%		\$10,257
31	Risk Charge	\$0.00	0.0%		\$0
32	SUM:	\$145	100.0%		\$1,030,313
Standard					
35	Members a/o 12/31/12				
36	Member to Contract Ratio				
37	Projected Claims (+ Capitations)	\$314.65	78.3%		\$16,820,998
38	Admin Costs	\$56.28	14.0%		\$3,008,694
39	Broker Commissions & Fees	\$15.06	3.7%		\$805,089
40	Contrib to Reserve	\$0.00	0.0%		\$0
41	Invst Income Credit	(\$0.00)	0.00%		(\$21)
42	Premium Tax/Community Health Investment	\$8.03	2.0%		\$429,469
43	Assessment Fees	\$0.35	0.1%		\$18,767
44	Federal Income Tax	\$0.00	0.0%		\$0
45	State Income Tax	\$0.00	0.0%		\$0
46	Patient-Centered Outcome Fee	\$0.17	0.0%		\$8,910
47	Reinsurance Fee	\$3.14	0.8%		\$167,802
48	Insurer Fee Tax	\$4.00	1.0%		\$213,774
49	Risk Charge	\$0.00	0.0%		\$0
50	SUM:	\$402	100.0%		\$21,473,473
TOTAL					
53	Members a/o 12/31/12				
54	Member to Contract Ratio				
55	Projected Claims (+ Capitations)	\$232	76.8%		\$22,561,454
56	Admin Costs	\$42.37	14.0%		\$4,113,879
57	Broker Commissions & Fees	\$15.04	5.0%		\$1,459,920
58	Contrib to Reserve	\$0.00	0.0%		\$0
59	Invst Income Credit	(\$0.00)	0.00%		(\$29)
60	Premium Tax/Community Health Investment	\$6.05	2.0%		\$587,227
61	Assessment Fees	\$0.26	0.1%		\$25,647
62	Federal Income Tax	\$0.00	0.0%		\$0
63	State Income Tax	\$0.00	0.0%		\$0
64	Patient-Centered Outcome Fee	\$0.17	0.1%		\$16,182
65	Reinsurance Fee	\$3.14	1.0%		\$304,756
66	Insurer Fee Tax	\$3.01	1.0%		\$292,300
67	Risk Charge	\$0.00	0.0%		\$0
68	SUBTOTAL:	\$302	100.0%		\$29,361,336

CareFirst GHMSI, Inc.
Individual Non-Medigap
Underwritten Products - Standard, Saver & HSA Medical & RX
Rates Effective 7/1/2013
Age & Tier Factors

Standard & Saver & HSA & HIPAA Products						
Age Band	Age	Tier Factors				Age Factor
	Factor	Ind	Ind & Child(ren)	Ind & Adult	Family	Incremental Change
0-5	0.550	1.00				
6-18	0.490	1.00	2.02	2.00	2.72	-10.9%
19-20	0.727	1.00	2.02	2.00	2.72	48.4%
21	0.727	1.00	2.02	2.00	2.72	0.0%
22	0.727	1.00	2.02	2.00	2.72	0.0%
23	0.727	1.00	2.02	2.00	2.72	0.0%
24	0.727	1.00	2.02	2.00	2.72	0.0%
25	0.727	1.00	2.02	2.00	2.72	0.0%
26	0.727	1.00	2.02	2.00	2.72	0.0%
27	0.727	1.00	2.02	2.00	2.72	0.0%
28	0.727	1.00	2.02	2.00	2.72	0.0%
29	0.727	1.00	2.02	2.00	2.72	0.0%
30	0.727	1.00	2.02	2.00	2.72	0.0%
31	0.727	1.00	2.02	2.00	2.72	0.0%
32	0.727	1.00	2.02	2.00	2.72	0.0%
33	0.746	1.00	2.02	2.00	2.72	2.6%
34	0.775	1.00	2.02	2.00	2.72	3.9%
35	0.805	1.00	2.02	2.00	2.72	3.9%
36	0.836	1.00	2.02	2.00	2.72	3.9%
37	0.869	1.00	2.02	2.00	2.72	3.9%
38	0.903	1.00	2.02	2.00	2.72	3.9%
39	0.938	1.00	2.02	2.00	2.72	3.9%
40	0.975	1.00	2.02	2.00	2.72	3.9%
41	1.013	1.00	2.02	2.00	2.72	3.9%
42	1.053	1.00	2.02	2.00	2.72	3.9%
43	1.094	1.00	2.02	2.00	2.72	3.9%
44	1.137	1.00	2.02	2.00	2.72	3.9%
45	1.181	1.00	2.02	2.00	2.72	3.9%
46	1.227	1.00	2.02	2.00	2.72	3.9%
47	1.275	1.00	2.02	2.00	2.72	3.9%
48	1.325	1.00	2.02	2.00	2.72	3.9%
49	1.377	1.00	2.02	2.00	2.72	3.9%
50	1.431	1.00	2.02	2.00	2.72	3.9%
51	1.487	1.00	2.02	2.00	2.72	3.9%
52	1.545	1.00	2.02	2.00	2.72	3.9%
53	1.605	1.00	2.02	2.00	2.72	3.9%
54	1.668	1.00	2.02	2.00	2.72	3.9%
55	1.733	1.00	2.02	2.00	2.72	3.9%
56	1.801	1.00	2.02	2.00	2.72	3.9%
57	1.871	1.00	2.02	2.00	2.72	3.9%
58	1.944	1.00	2.02	2.00	2.72	3.9%
59	2.020	1.00	2.02	2.00	2.72	3.9%
60	2.099	1.00	2.02	2.00	2.72	3.9%
61	2.181	1.00	2.02	2.00	2.72	3.9%
62	2.181	1.00	2.02	2.00	2.72	0.0%
63	2.181	1.00	2.02	2.00	2.72	0.0%
64	2.181	1.00	2.02	2.00	2.72	0.0%
65	2.181	1.00	2.02	2.00	2.72	0.0%
>65 Non-Medicare Eligible	2.181	1.00	2.02	2.00	2.72	0.0%
>65 Medicare Eligible **	2.181	1.00	2.02	2.00	2.72	0.0%

Impact of age change upon renewal Ages 18 - 65

Min	0.0%
Max	3.9%
Average	2.4%

** Only for renewals; not available for new sales.

CareFirst BlueCross BlueShield (GHMSI)
 Experience & Development of Normalized Trends
 D Individual Non-Medigap Rate Filing Effective 07/2013
 Experience Period : Incurred 10/2011 - 09/2012 & Paid Through 12/2012
 Rating Period : Incurred 07/2013 - 09/2014

PPO-UW-Std
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(a)		(b)	(c)	(d)	(e)	(f)	(g)	(h)=(d)+(f)	(i)=(e)+(g)	(j)=(i)/(c)			(k)	(l)						
Current Rate Level				04/2013	=(e)/(f)					Monthly Loss Ratio			Monthly Incurred PMPM	Rolling-12 Incurred PMPM			Observed Rolling 12 Month Trend			
Date	Contract	Member	Medical		Rx		Total		Total	Med	Rx	Total	Total	Med	Rx	Total	Med	Rx	Total	
			Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims												
200810	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200811	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200812	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200901	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200902	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200903	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200904	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200905	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200906	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200907	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200908	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200909	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200910	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200911	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
200912	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201001	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201002	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201003	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201004	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201005	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201006	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201007	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201008	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201009	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201010	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -											
201011	11	13	\$ 2,017	\$ 336	\$ 571	\$ 61	\$ 2,588	\$ 398	15%	17%	11%	15%	\$31	\$26	\$5	\$31				
201012	46	50	\$ 10,757	\$ 463	\$ 2,769	\$ 156	\$ 13,526	\$ 618	5%	6%	6%	6%	\$12	\$13	\$3	\$16				
201101	87	100	\$ 21,766	\$ 13,564	\$ 5,736	\$ 147	\$ 27,502	\$ 13,711	50%	42%	4%	34%	\$137	\$88	\$2	\$90				
201102	141	154	\$ 33,592	\$ 7,879	\$ 8,773	\$ 1,076	\$ 42,365	\$ 8,955	21%	33%	8%	28%	\$58	\$70	\$5	\$75				
201103	188	209	\$ 45,861	\$ 8,568	\$ 11,931	\$ 4,027	\$ 57,793	\$ 12,596	22%	27%	18%	25%	\$60	\$59	\$10	\$69				
201104	222	246	\$ 56,645	\$ 14,257	\$ 14,524	\$ 6,261	\$ 71,168	\$ 20,517	29%	26%	26%	26%	\$83	\$58	\$15	\$74				
201105	266	297	\$ 71,488	\$ 42,481	\$ 18,131	\$ 15,092	\$ 89,619	\$ 57,573	64%	36%	43%	38%	\$194	\$82	\$25	\$107				
201106	303	347	\$ 79,931	\$ 29,778	\$ 20,407	\$ 18,163	\$ 100,338	\$ 47,941	48%	36%	54%	40%	\$138	\$83	\$32	\$115				
201107	323	376	\$ 86,887	\$ 54,019	\$ 22,199	\$ 17,789	\$ 109,086	\$ 71,808	66%	42%	60%	46%	\$191	\$96	\$35	\$131				
201108	359	419	\$ 93,906	\$ 71,325	\$ 24,013	\$ 19,555	\$ 117,919	\$ 90,880	77%	48%	64%	51%	\$217	\$110	\$37	\$147				
201109	390	449	\$ 104,394	\$ 48,860	\$ 26,433	\$ 28,329	\$ 130,827	\$ 77,190	59%	48%	71%	53%	\$172	\$110	\$42	\$151				
201110	394	452	\$ 107,518	\$ 41,897	\$ 26,940	\$ 23,052	\$ 134,457	\$ 64,949	48%	47%	73%	52%	\$144	\$107	\$43	\$150				
201111	414	476	\$ 109,457	\$ 48,203	\$ 27,151	\$ 26,700	\$ 136,608	\$ 74,903	55%	46%	77%	53%	\$157	\$107	\$45	\$152	312.4%	850.3%	395.4%	
201112	430	485	\$ 117,052	\$ 37,229	\$ 29,043	\$ 34,635	\$ 146,095	\$ 71,864	49%	45%	83%	53%	\$148	\$104	\$49	\$153	722.2%	1310.2%	847.8%	
201201	450	511	\$ 123,111	\$ 59,578	\$ 30,919	\$ 22,922	\$ 154,030	\$ 82,499	54%	45%	84%	53%	\$161	\$105	\$49	\$154	19.1%	2102.3%	70.7%	
201202	466	536	\$ 130,780	\$ 73,425	\$ 32,446	\$ 25,672	\$ 163,226	\$ 99,097	61%	47%	85%	55%	\$185	\$110	\$50	\$161	57.2%	1009.5%	115.1%	
201203	494	577	\$ 138,979	\$ 65,094	\$ 34,696	\$ 37,938	\$ 173,675	\$ 103,032	59%	48%	90%	56%	\$179	\$113	\$53	\$167	93.5%	413.6%	141.8%	
201204	520	605	\$ 149,453	\$ 106,615	\$ 37,414	\$ 38,553	\$ 186,867	\$ 145,169	78%	52%	94%	60%	\$240	\$123	\$56	\$178	110.2%	267.1%	142.6%	
201205	531	615	\$ 153,614	\$ 106,494	\$ 38,342	\$ 39,497	\$ 191,957	\$ 145,991	76%	53%	95%	62%	\$237	\$127	\$57	\$184	55.0%	126.8%	71.9%	
201206	533	622	\$ 157,049	\$ 241,171	\$ 38,870	\$ 38,758	\$ 195,919	\$ 279,929	143%	65%	96%	71%	\$450	\$156	\$58	\$214	88.0%	81.7%	86.3%	
201207	554	651	\$ 162,427	\$ 152,275	\$ 40,491	\$ 29,371	\$ 202,917	\$ 181,646	90%	68%	94%	73%	\$279	\$164	\$57	\$221	72.0%	62.9%	69.5%	
201208	577	684	\$ 169,686	\$ 124,302	\$ 42,262	\$ 34,774	\$ 211,948	\$ 159,076	75%	68%	94%	73%	\$233	\$166	\$57	\$223	51.1%	53.2%	51.7%	
201209	599	713	\$ 177,733	\$ 111,286	\$ 44,365	\$ 28,354	\$ 222,098	\$ 139,640	63%	69%	90%	73%	\$196	\$169	\$55	\$223	53.8%	31.9%	47.8%	
201210	621	739	\$ 181,771	\$ 136,620	\$ 45,371	\$ 34,336	\$ 227,142	\$ 170,956	75%	71%	89%	75%	\$231	\$175	\$54	\$229	63.3%	26.3%	52.7%	
201211	638	768	\$ 185,210	\$ 165,779	\$ 46,576	\$ 41,955	\$ 231,786	\$ 207,734	90%	75%	88%	77%	\$270	\$184	\$54	\$238	72.4%	20.8%	57.1%	
201212	646	783	\$ 195,327	\$ 99,285	\$ 48,947	\$ 34,513	\$ 244,274	\$ 133,798	55%	75%	85%	77%	\$171	\$185	\$52	\$237	77.2%	7.2%	55.0%	
Experience Period	5,962	6,927	\$ 1,696,859	\$ 1,167,569	\$ 422,939	\$ 380,225	\$ 2,119,797	\$ 1,547,794	0%	69%	90%	73%	\$223	\$169	\$55	\$223	53.8%	31.9%	47.8%	

CareFirst BlueCross BlueShield (GHMSI)
 Experience & Development of Normalized Trends
 D Individual Non-Medigap Rate Filing Effective 07/2013
 Experience Period : Incurred 10/2011 - 09/2012 & Paid Through 12/2012
 Rating Period : Incurred 07/2013 - 09/2014

PPO-UW-Svr
 PPACA

Date	Contract	Member	(d) 04/2013		(e) =(e)/(f)		(f)		(g)		(h)=(d)+(f)			(i)=(e)+(g)			(j)=(i)/(c)			(k)			(l)		
			Medical		Rx		Total		Monthly Loss Ratio	Rolling-12 Loss Ratio			Monthly Incurred PMPM	Rolling-12 Incurred PMPM			Observed Rolling 12 Month Trend								
			Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Total	Med	Rx	Total	Total	Med	Rx	Total	Med	Rx	Total						
200810	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200811	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200812	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200901	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200902	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200903	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200904	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200905	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200906	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200907	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200908	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200909	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200910	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200911	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
200912	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201001	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201002	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201003	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201004	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201005	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201006	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201007	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201008	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201009	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201010	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -																	
201011	6	6	\$ 567	\$ -	\$ -	\$ 91	\$ -	\$ 658	0%	0%	0%	0%	\$0	\$0	\$0	\$0									
201012	20	23	\$ 2,520	\$ 654	\$ 407	\$ -	\$ 2,928	\$ 654	22%	21%	0%	18%	\$28	\$23	\$0	\$23									
201101	44	52	\$ 6,570	\$ 968	\$ 1,015	\$ -	\$ 7,585	\$ 968	13%	17%	0%	15%	\$19	\$20	\$0	\$20									
201102	63	71	\$ 9,443	\$ 2,440	\$ 1,415	\$ -	\$ 10,858	\$ 2,440	22%	21%	0%	18%	\$34	\$27	\$0	\$27									
201103	77	88	\$ 11,853	\$ 8,517	\$ 1,771	\$ 4	\$ 13,623	\$ 8,521	63%	41%	0%	35%	\$97	\$52	\$0	\$52									
201104	98	108	\$ 14,839	\$ 2,702	\$ 2,241	\$ 42	\$ 17,080	\$ 2,745	16%	33%	1%	29%	\$25	\$44	\$0	\$44									
201105	113	125	\$ 17,021	\$ 7,643	\$ 2,534	\$ 335	\$ 19,555	\$ 7,978	41%	36%	4%	32%	\$64	\$48	\$1	\$49									
201106	137	158	\$ 20,949	\$ 12,570	\$ 3,157	\$ 114	\$ 24,106	\$ 12,684	53%	42%	4%	37%	\$80	\$56	\$1	\$57									
201107	154	170	\$ 22,912	\$ 40,977	\$ 3,441	\$ 317	\$ 26,353	\$ 41,295	157%	72%	5%	63%	\$243	\$95	\$1	\$96									
201108	164	181	\$ 25,056	\$ 40,408	\$ 3,849	\$ 138	\$ 28,905	\$ 40,547	140%	89%	5%	78%	\$224	\$119	\$1	\$120									
201109	193	210	\$ 28,722	\$ 39,241	\$ 4,376	\$ 298	\$ 33,098	\$ 39,539	119%	97%	5%	85%	\$188	\$131	\$1	\$132									
201110	207	229	\$ 31,035	\$ 40,367	\$ 4,810	\$ 393	\$ 35,845	\$ 40,760	114%	103%	6%	90%	\$178	\$138	\$1	\$139									
201111	221	248	\$ 35,259	\$ 7,764	\$ 5,430	\$ 1,310	\$ 40,689	\$ 9,074	22%	90%	9%	80%	\$37	\$123	\$2	\$125									
201112	239	266	\$ 37,306	\$ 19,378	\$ 5,775	\$ 1,087	\$ 43,081	\$ 20,466	48%	85%	10%	75%	\$77	\$117	\$2	\$119	419.1%	428.5%							
201201	236	269	\$ 40,353	\$ 11,629	\$ 6,179	\$ 583	\$ 46,532	\$ 12,212	26%	79%	10%	70%	\$45	\$110	\$2	\$112	449.6%	460.4%							
201202	244	289	\$ 42,570	\$ 11,124	\$ 6,536	\$ 1,486	\$ 49,106	\$ 12,611	26%	74%	12%	66%	\$44	\$104	\$3	\$106	287.3%	297.1%							
201203	245	284	\$ 42,795	\$ 22,117	\$ 6,554	\$ 1,182	\$ 49,348	\$ 23,299	47%	71%	13%	64%	\$82	\$101	\$3	\$104	92.5%	18994.8%							
201204	242	284	\$ 43,009	\$ 17,617	\$ 6,608	\$ 1,297	\$ 49,617	\$ 18,914	38%	70%	14%	63%	\$67	\$100	\$3	\$103	127.3%	2292.1%							
201205	243	287	\$ 42,809	\$ 52,261	\$ 6,531	\$ 2,332	\$ 49,340	\$ 54,593	111%	76%	17%	68%	\$190	\$110	\$4	\$113	126.4%	355.1%							
201206	248	290	\$ 43,847	\$ 22,777	\$ 6,684	\$ 2,277	\$ 50,531	\$ 25,054	50%	75%	19%	67%	\$86	\$108	\$4	\$113	92.5%	438.2%							
201207	249	295	\$ 43,530	\$ 14,285	\$ 6,646	\$ 2,358	\$ 50,176	\$ 16,643	33%	66%	21%	60%	\$56	\$95	\$5	\$100	0.0%	364.0%							
201208	248	293	\$ 44,145	\$ 26,166	\$ 6,704	\$ 2,238	\$ 50,848	\$ 28,404	56%	60%	23%	55%	\$97	\$88	\$5	\$93	-26.3%	436.2%							
201209	260	307	\$ 46,020	\$ 39,828	\$ 6,955	\$ 2,316	\$ 52,975	\$ 42,145	80%	58%	25%	54%	\$137	\$85	\$6	\$91	-34.8%	438.9%							
201210	257	302	\$ 44,882	\$ 25,023	\$ 6,706	\$ 2,621	\$ 51,588	\$ 27,645	54%	53%	27%	50%	\$92	\$79	\$6	\$85	-42.8%	434.6%							
201211	254	297	\$ 44,214	\$ 15,107	\$ 6,571	\$ 2,637	\$ 50,784	\$ 17,744	35%	54%	29%	50%	\$60	\$80	\$6	\$87	-34.8%	264.7%							
201212	243	283	\$ 44,967	\$ 11,730	\$ 6,703	\$ 3,110	\$ 51,670	\$ 14,840	29%	52%	31%	49%	\$52	\$77	\$7	\$85	-33.8%	231.4%							
Experience Period	2,882	3,341	\$ 492,677	\$ 285,314	\$ 75,413	\$ 18,859	\$ 568,089	\$ 304,173	0%	58%	25%	54%	\$91	\$85	\$6	\$91	-34.8%	438.9%							

CareFirst BlueCross BlueShield (GHMSI)
 Experience & Development of Normalized Trends
 D Individual Non-Medigap Rate Filing Effective 07/2013
 Experience Period : Incurred 10/2011 - 09/2012 & Paid Through 12/2012
 Rating Period : Incurred 07/2013 - 09/2014
 PPO-UW-HSA
 PPACA

(a)		(b)		(c)		(d)		(e)		(f)		(g)		(h)=(d)+(f)			(i)=(e)+(g)			(j)=(i)/(c)			(k)			(l)		
Current Rate Level				04/2013		=(e)/(f)																						
Date	Contract	Member	Medical		Rx		Total		Monthly Loss Ratio	Rolling-12 Loss Ratio			Monthly Incurred PMPM	Rolling-12 Incurred PMPM			Observed Rolling 12 Month Trend											
			Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Total	Med	Rx	Total	Total	Med	Rx	Total	Med	Rx	Total									
200810	530	699	\$ 80,696	\$ 98,590	\$ -	\$ 13,463	\$ 80,696	\$ 112,053	139%				\$160															
200811	576	772	\$ 90,531	\$ 127,916	\$ -	\$ 12,828	\$ 90,531	\$ 140,744	155%				\$182															
200812	589	770	\$ 93,501	\$ 52,054	\$ -	\$ 13,627	\$ 93,501	\$ 65,681	70%				\$85															
200901	648	877	\$ 102,868	\$ 55,322	\$ -	\$ 870	\$ 102,868	\$ 56,192	55%				\$64															
200902	677	908	\$ 106,420	\$ 68,384	\$ -	\$ 6,653	\$ 106,420	\$ 75,037	71%				\$83															
200903	734	978	\$ 115,384	\$ 74,093	\$ -	\$ 8,444	\$ 115,384	\$ 82,537	72%				\$84															
200904	788	1,052	\$ 127,724	\$ 69,314	\$ -	\$ 10,440	\$ 127,724	\$ 79,755	62%				\$76															
200905	814	1,086	\$ 135,125	\$ 69,995	\$ -	\$ 12,549	\$ 135,125	\$ 82,544	61%				\$76															
200906	844	1,132	\$ 145,935	\$ 92,263	\$ -	\$ 19,650	\$ 145,935	\$ 111,913	77%				\$99															
200907	856	1,146	\$ 153,027	\$ 88,156	\$ -	\$ 15,853	\$ 153,027	\$ 104,009	68%				\$91															
200908	870	1,150	\$ 161,005	\$ 123,568	\$ -	\$ 15,931	\$ 161,005	\$ 139,499	87%				\$121															
200909	885	1,184	\$ 168,578	\$ 93,452	\$ -	\$ 24,706	\$ 168,578	\$ 118,159	70%	68%	79%		\$100	\$86	\$13	\$99												
200910	946	1,256	\$ 178,234	\$ 81,752	\$ -	\$ 30,502	\$ 178,234	\$ 112,254	63%	63%	74%	\$89	\$81	\$14	\$95													
200911	965	1,278	\$ 185,846	\$ 151,182	\$ -	\$ 33,374	\$ 185,846	\$ 184,556	99%	61%	72%	\$144	\$80	\$15	\$95													
200912	959	1,276	\$ 192,907	\$ 160,673	\$ -	\$ 37,319	\$ 192,907	\$ 197,992	103%	64%	76%	\$155	\$85	\$16	\$101													
201001	979	1,309	\$ 196,647	\$ 76,203	\$ -	\$ 2,810	\$ 196,647	\$ 79,013	40%	62%	73%	\$60	\$84	\$16	\$99													
201002	988	1,328	\$ 200,840	\$ 245,884	\$ -	\$ 8,671	\$ 200,840	\$ 254,555	127%	68%	79%	\$192	\$94	\$16	\$109													
201003	992	1,337	\$ 204,477	\$ 101,638	\$ -	\$ 19,865	\$ 204,477	\$ 121,503	59%	66%	77%	\$91	\$93	\$16	\$109													
201004	1,000	1,332	\$ 210,177	\$ 152,213	\$ -	\$ 20,173	\$ 210,177	\$ 172,386	82%	67%	79%	\$129	\$97	\$16	\$113													
201005	1,014	1,350	\$ 214,289	\$ 98,848	\$ -	\$ 28,735	\$ 214,289	\$ 127,583	60%	66%	78%	\$95	\$97	\$17	\$114													
201006	1,025	1,369	\$ 220,599	\$ 158,172	\$ -	\$ 36,942	\$ 220,599	\$ 195,114	88%	67%	79%	\$143	\$100	\$18	\$118													
201007	1,037	1,396	\$ 225,524	\$ 163,254	\$ -	\$ 28,063	\$ 225,524	\$ 191,317	85%	68%	80%	\$137	\$103	\$18	\$122													
201008	1,060	1,432	\$ 231,808	\$ 175,753	\$ -	\$ 25,592	\$ 231,808	\$ 201,344	87%	68%	80%	\$141	\$105	\$19	\$123													
201009	1,100	1,492	\$ 241,942	\$ 133,672	\$ -	\$ 41,233	\$ 241,942	\$ 174,906	72%	68%	80%	\$117	\$105	\$19	\$125	22.0%	47.0%	25.4%										
201010	1,239	1,643	\$ 266,890	\$ 166,040	\$ -	\$ 33,581	\$ 266,890	\$ 199,621	75%	69%	81%	\$121	\$108	\$19	\$127	33.2%	36.8%	33.8%										
201011	1,321	1,744	\$ 286,531	\$ 150,339	\$ -	\$ 30,426	\$ 286,531	\$ 180,765	63%	66%	78%	\$104	\$105	\$18	\$123	31.8%	22.6%	30.3%										
201012	1,358	1,791	\$ 297,944	\$ 297,295	\$ -	\$ 53,267	\$ 297,944	\$ 350,563	118%	69%	80%	\$196	\$110	\$19	\$128	29.4%	15.8%	27.2%										
201101	1,438	1,893	\$ 313,127	\$ 90,510	\$ -	\$ 3,840	\$ 313,127	\$ 94,350	30%	66%	78%	\$50	\$107	\$18	\$125	27.8%	15.0%	25.8%										
201102	1,536	2,037	\$ 338,079	\$ 173,236	\$ -	\$ 15,378	\$ 338,079	\$ 188,614	56%	61%	72%	\$93	\$99	\$18	\$117	5.7%	15.3%	7.1%										
201103	1,638	2,164	\$ 354,117	\$ 172,178	\$ -	\$ 16,697	\$ 354,117	\$ 188,875	53%	60%	71%	\$87	\$98	\$17	\$115	5.5%	6.6%	5.7%										
201104	1,677	2,210	\$ 361,926	\$ 163,974	\$ -	\$ 23,563	\$ 361,926	\$ 187,537	52%	58%	68%	\$85	\$95	\$16	\$111	-2.4%	0.9%	-1.9%										
201105	1,724	2,287	\$ 377,599	\$ 417,135	\$ -	\$ 23,515	\$ 377,599	\$ 440,650	117%	64%	74%	\$193	\$105	\$15	\$121	8.4%	-9.4%	5.7%										
201106	1,758	2,353	\$ 390,284	\$ 258,744	\$ -	\$ 42,553	\$ 390,284	\$ 301,297	77%	64%	73%	\$128	\$105	\$15	\$120	5.2%	-16.2%	2.0%										
201107	1,821	2,460	\$ 401,321	\$ 158,252	\$ -	\$ 41,033	\$ 401,321	\$ 199,285	50%	61%	70%	\$81	\$100	\$15	\$115	-2.9%	-19.1%	-5.3%										
201108	1,872	2,510	\$ 409,783	\$ 221,048	\$ 32	\$ 48,991	\$ 409,815	\$ 270,038	66%	59%	1168986%	\$108	\$98	\$15	\$113	-6.7%	-18.7%	-8.5%										
201109	1,937	2,583	\$ 420,383	\$ 270,650	\$ (133)	\$ 48,475	\$ 420,250	\$ 319,125	76%	60%	-377542%	\$124	\$99	\$15	\$114	-6.0%	-23.4%	-8.7%										
201110	1,956	2,613	\$ 424,043	\$ 261,899	\$ (290)	\$ 51,001	\$ 423,753	\$ 312,899	74%	60%	-101979%	\$120	\$99	\$15	\$114	-8.3%	-21.8%	-10.3%										
201111	1,971	2,627	\$ 427,599	\$ 337,966	\$ (108)	\$ 57,746	\$ 427,491	\$ 395,712	93%	63%	-85382%	\$151	\$103	\$15	\$118	-2.2%	-16.0%	-4.2%										
201112	1,961	2,623	\$ 435,548	\$ 362,976	\$ -	\$ 83,679	\$ 435,548	\$ 446,656	103%	62%	-91477%	\$170	\$102	\$16	\$118	-7.0%	-14.4%	-8.1%										
201201	2,000	2,674	\$ 442,510	\$ 123,554	\$ (218)	\$ 13,575	\$ 442,292	\$ 137,128	31%	61%	-65067%	\$51	\$100	\$16	\$116	-6.1%	-12.3%	-7.0%										
201202	2,071	2,772	\$ 454,640	\$ 211,805	\$ 110	\$ 21,967	\$ 454,750	\$ 233,772	51%	60%	-77911%	\$84	\$99	\$16	\$115	0.2%	-11.7%	-1.6%										
201203	2,082	2,781	\$ 459,824	\$ 284,463	\$ 256	\$ 32,872	\$ 460,080	\$ 317,335	69%	61%	-139371%	\$114	\$101	\$16	\$117	2.5%	-5.7%	1.3%										
201204	2,119	2,841	\$ 461,266	\$ 257,700	\$ -	\$ 39,666	\$ 461,266	\$ 297,365	64%	62%	-143960%	\$105	\$102	\$16	\$118	7.4%	-1.3%	6.1%										
201205	2,151	2,898	\$ 465,057	\$ 499,823	\$ (221)	\$ 51,259	\$ 464,837	\$ 551,082	119%	63%	-93242%	\$73	\$190	\$102	\$17	\$119	-2.9%	8.5%	-1.4%									
201206	2,160	2,927	\$ 467,192	\$ 211,257	\$ (156)	\$ 48,459	\$ 467,036	\$ 259,716	56%	61%	-74100%	\$89	\$99	\$17	\$116	-5.9%	10.8%	-3.8%										
201207	2,191	2,942	\$ 472,908	\$ 239,381	\$ (36)	\$ 63,445	\$ 472,872	\$ 302,825	64%	61%	-73552%	\$103	\$100	\$17	\$117	-0.2%	14.7%	1.8%										
201208	2,199	2,939	\$ 477,779	\$ 329,788	\$ (84)	\$ 72,835	\$ 477,695	\$ 402,623	84%	63%	-66557%	\$137	\$102	\$18	\$120	4.5%	15.7%	6.0%										
201209	2,252	3,010	\$ 482,106	\$ 256,357	\$ -	\$ 73,997	\$ 482,106	\$ 330,353	69%	62%	-81846%	\$110	\$100	\$18	\$119	1.5%	22.2%	4.2%										
201210	2,256	3,003	\$ 481,554	\$ 447,648	\$ (130)	\$ 78,640	\$ 481,424	\$ 526,288	109%	64%	-108914%	\$175	\$105	\$19	\$123	5.8%	25.3%	8.4%										
201211	2,281	3,027	\$ 485,735	\$ 422,807	\$ -	\$ 86,429	\$ 485,735	\$ 509,236	105%	65%	-139529%	\$168	\$106	\$19	\$125	3.3%	25.1%	6.2%										
201212	2,281	3,044	\$ 494,975	\$ 315,557	\$ -	\$ 118,112	\$ 494,975	\$ 433,669	88%	64%	-146734%	\$142	\$103	\$20	\$123	1.4%	25.0%	4.6%										
Experience Period	25,113	33,647	\$ 5,470,472	\$ 3,376,969	\$ (746)	\$ 610,499	\$ 5,469,726	\$ 3,987,468	0%	62%	-81846%	\$119	\$100	\$18	\$119	1.5%	22.2%	4.2%										

CareFirst BlueCross BlueShield (GHMSI)
Experience & Development of Normalized Trends
D Individual Non-Medigap Rate Filing Effective 07/2013
Experience Period : Incurred 10/2011 - 09/2012 & Paid Through 12/2012
Rating Period : Incurred 07/2013 - 09/2014

PPACA		(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)=(d)+(f)	(i)=(e)+(g)	(j)=(i)/(c)	(k)			(l)							
Current Rate Level					04/2013	=(e)/(f)																
					Medical		Rx		Total		Monthly Loss Ratio	Rolling-12 Loss Ratio			Monthly Incurred PMPM	Rolling-12 Incurred PMPM			Observed Rolling 12 Month Trend			
Date	Contract	Member	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Total	Estimated	Total	Med	Rx	Total	Total	Med	Rx	Total	Med	Rx	Total	
200810	118	135	\$ 103,018	\$ 64,220	\$ 16,176	\$ 9,199	\$ 119,193	\$ 73,419			62%				\$544							
200811	118	132	\$ 105,114	\$ 24,989	\$ 16,313	\$ 9,699	\$ 121,427	\$ 34,688			29%				\$263							
200812	113	127	\$ 102,736	\$ 32,727	\$ 15,644	\$ 6,856	\$ 118,380	\$ 39,582			33%				\$312							
200901	113	129	\$ 102,294	\$ 60,653	\$ 15,589	\$ 16,955	\$ 117,882	\$ 77,608			66%				\$602							
200902	108	125	\$ 99,604	\$ 33,510	\$ 14,913	\$ 12,585	\$ 114,517	\$ 46,095			40%				\$369							
200903	106	122	\$ 95,147	\$ 43,579	\$ 14,182	\$ 13,998	\$ 109,329	\$ 57,577			53%				\$472							
200904	108	120	\$ 94,871	\$ 57,547	\$ 13,967	\$ 14,286	\$ 108,838	\$ 71,833			66%				\$599							
200905	105	116	\$ 95,111	\$ 31,005	\$ 13,840	\$ 9,138	\$ 108,951	\$ 40,143			37%				\$346							
200906	103	115	\$ 98,036	\$ 37,465	\$ 13,997	\$ 7,793	\$ 112,033	\$ 45,258			40%				\$394							
200907	105	116	\$ 97,730	\$ 26,502	\$ 13,611	\$ 8,452	\$ 111,341	\$ 34,955			31%				\$301							
200908	103	114	\$ 96,784	\$ 29,623	\$ 13,459	\$ 5,861	\$ 110,243	\$ 35,485			32%				\$311							
200909	108	119	\$ 100,252	\$ 49,476	\$ 13,449	\$ 7,991	\$ 113,701	\$ 57,468			51%				\$483							
200910	102	115	\$ 97,450	\$ 33,107	\$ 12,948	\$ 6,796	\$ 110,398	\$ 39,903			36%	39%	70%	43%	\$347	\$317	\$83	\$400				
200911	99	112	\$ 96,645	\$ 29,744	\$ 12,661	\$ 4,595	\$ 109,307	\$ 34,339			31%	40%	69%	43%	\$307	\$325	\$81	\$406				
200912	98	109	\$ 95,500	\$ 49,051	\$ 12,316	\$ 6,515	\$ 107,815	\$ 55,567			52%	41%	70%	45%	\$510	\$341	\$81	\$422				
201001	95	106	\$ 89,457	\$ 75,044	\$ 11,889	\$ 10,829	\$ 101,346	\$ 85,873			85%	43%	68%	46%	\$810	\$357	\$78	\$435				
201002	92	104	\$ 90,546	\$ 72,279	\$ 11,894	\$ 11,391	\$ 102,440	\$ 83,670			82%	47%	68%	49%	\$805	\$391	\$79	\$469				
201003	98	111	\$ 89,191	\$ 72,277	\$ 11,772	\$ 10,009	\$ 100,963	\$ 82,286			82%	49%	67%	51%	\$741	\$415	\$76	\$491				
201004	93	105	\$ 90,876	\$ 78,283	\$ 11,864	\$ 11,019	\$ 102,740	\$ 89,303			87%	51%	65%	53%	\$851	\$435	\$75	\$510				
201005	90	104	\$ 89,296	\$ 41,969	\$ 11,548	\$ 9,086	\$ 100,843	\$ 51,055			51%	53%	66%	54%	\$491	\$447	\$75	\$523				
201006	87	100	\$ 87,716	\$ 45,139	\$ 11,092	\$ 6,449	\$ 98,808	\$ 51,589			52%	54%	67%	55%	\$516	\$458	\$75	\$533				
201007	86	97	\$ 90,656	\$ 80,277	\$ 11,417	\$ 10,648	\$ 102,073	\$ 90,925			89%	59%	69%	60%	\$937	\$506	\$78	\$584				
201008	86	98	\$ 89,918	\$ 54,881	\$ 11,371	\$ 5,123	\$ 101,289	\$ 60,003			59%	62%	70%	62%	\$612	\$532	\$78	\$611				
201009	87	100	\$ 95,240	\$ 128,089	\$ 11,986	\$ 7,047	\$ 107,226	\$ 135,136			126%	69%	70%	69%	\$1,351	\$603	\$79	\$682	80.4%	-5.5%	63.2%	
201010	88	101	\$ 96,438	\$ 70,849	\$ 12,049	\$ 7,863	\$ 108,487	\$ 78,712			73%	72%	71%	72%	\$779	\$640	\$81	\$720	101.6%	-2.9%	79.9%	
201011	88	101	\$ 97,399	\$ 53,993	\$ 12,083	\$ 5,269	\$ 109,482	\$ 59,262			54%	75%	72%	74%	\$587	\$665	\$82	\$747	104.6%	1.6%	84.1%	
201012	91	104	\$ 99,867	\$ 53,907	\$ 12,311	\$ 5,448	\$ 112,178	\$ 59,355			53%	75%	71%	74%	\$571	\$672	\$81	\$753	97.1%	0.0%	78.4%	
201101	93	104	\$ 98,443	\$ 95,501	\$ 12,017	\$ 18,274	\$ 110,460	\$ 113,775			103%	76%	76%	76%	\$1,094	\$690	\$88	\$777	93.2%	11.8%	78.6%	
201102	88	100	\$ 99,477	\$ 55,979	\$ 12,101	\$ 18,095	\$ 111,578	\$ 74,074			66%	74%	81%	75%	\$741	\$678	\$93	\$772	73.7%	18.6%	64.4%	
201103	91	106	\$ 102,413	\$ 52,987	\$ 12,513	\$ 21,991	\$ 114,926	\$ 74,977			65%	71%	89%	73%	\$707	\$665	\$104	\$769	60.4%	35.5%	56.5%	
201104	90	105	\$ 104,889	\$ 54,839	\$ 12,837	\$ 18,740	\$ 117,726	\$ 73,578			62%	68%	94%	71%	\$701	\$646	\$110	\$756	48.5%	46.9%	48.3%	
201105	89	104	\$ 104,284	\$ 64,151	\$ 12,761	\$ 19,480	\$ 117,045	\$ 83,631			71%	69%	100%	73%	\$804	\$664	\$118	\$783	48.6%	56.9%	49.8%	
201106	90	105	\$ 104,877	\$ 94,392	\$ 13,045	\$ 26,030	\$ 117,922	\$ 120,422			102%	73%	112%	77%	\$1,147	\$702	\$134	\$836	53.2%	77.8%	56.7%	
201107	93	111	\$ 109,443	\$ 102,655	\$ 13,685	\$ 21,083	\$ 123,128	\$ 123,738			100%	73%	117%	78%	\$1,115	\$712	\$141	\$853	40.6%	80.3%	45.9%	
201108	95	113	\$ 110,719	\$ 196,457	\$ 14,004	\$ 47,590	\$ 124,724	\$ 244,047			196%	84%	143%	90%	\$2,160	\$816	\$173	\$989	53.3%	120.4%	62.0%	
201109	94	112	\$ 110,636	\$ 115,745	\$ 14,144	\$ 30,958	\$ 124,780	\$ 146,703			118%	82%	157%	90%	\$1,310	\$799	\$190	\$989	32.5%	141.1%	45.1%	
201110	95	114	\$ 111,622	\$ 85,676	\$ 14,421	\$ 37,622	\$ 126,043	\$ 123,298			98%	82%	174%	92%	\$1,082	\$802	\$212	\$1,014	25.4%	162.3%	40.7%	
201111	98	117	\$ 111,297	\$ 90,803	\$ 14,573	\$ 32,781	\$ 125,870	\$ 123,584			98%	84%	188%	95%	\$1,056	\$821	\$230	\$1,051	23.4%	181.0%	40.7%	
201112	97	113	\$ 102,952	\$ 124,236	\$ 13,754	\$ 48,534	\$ 116,706	\$ 172,770			148%	89%	213%	103%	\$1,529	\$869	\$262	\$1,131	29.4%	221.5%	50.1%	
201201	95	110	\$ 99,964	\$ 97,000	\$ 13,041	\$ 34,514	\$ 113,004	\$ 131,514			116%	89%	222%	104%	\$1,196	\$866	\$273	\$1,139	25.6%	211.6%	46.6%	
201202	98	112	\$ 101,516	\$ 238,392	\$ 13,663	\$ 38,170	\$ 115,179	\$ 276,562			240%	103%	232%	118%	\$2,469	\$996	\$286	\$1,282	46.9%	206.0%	68.1%	
201203	97	117	\$ 107,802	\$ 89,002	\$ 14,964	\$ 43,935	\$ 122,766	\$ 132,936			108%	106%	242%	121%	\$1,136	\$1,015	\$300	\$1,315	52.6%	189.4%	71.0%	
201204	97	112	\$ 102,971	\$ 135,853	\$ 14,098	\$ 49,347	\$ 117,069	\$ 185,200			158%	112%	259%	129%	\$1,654	\$1,070	\$321	\$1,391	65.6%	192.1%	84.0%	
201205	94	109	\$ 101,581	\$ 82,923	\$ 13,995	\$ 43,757	\$ 115,576	\$ 126,680			110%	114%	271%	132%	\$1,162	\$1,080	\$338	\$1,418	62.6%	185.3%	81.2%	
201206	95	110	\$ 101,869	\$ 93,247	\$ 13,888	\$ 47,865	\$ 115,757	\$ 141,112			122%	114%	283%	134%	\$1,283	\$1,076	\$353	\$1,428	53.2%	163.4%	70.9%	
201207	95	109	\$ 101,892	\$ 91,560	\$ 13,887	\$ 42,123	\$ 115,778	\$ 133,683			115%	114%	295%	135%	\$1,226	\$1,069	\$369	\$1,438	50.1%	162.0%	68.6%	
201208	96	110	\$ 104,984	\$ 105,011	\$ 14,349	\$ 39,453	\$ 119,333	\$ 144,464			121%	107%	290%	129%	\$1,313	\$1,003	\$364	\$1,367	22.9%	110.2%	38.2%	
201209	94	108	\$ 103,161	\$ 101,140	\$ 14,115	\$ 37,839	\$ 117,275	\$ 138,979			119%	107%	294%	129%	\$1,287	\$995	\$370	\$1,365	24.6%	94.4%	38.0%	
201210	93	107	\$ 103,979	\$ 140,948	\$ 14,220	\$ 36,542	\$ 118,200	\$ 177,491			150%	112%	294%	133%	\$1,659	\$1,042	\$371	\$1,413	29.9%	75.3%	39.4%	
201211	92	107	\$ 102,154	\$ 116,270	\$ 14,027	\$ 34,246	\$ 116,181	\$ 150,516			130%	115%	295%	136%	\$1,407	\$1,069	\$375	\$1,444	30.2%	62.9%	37.4%	
201212	89	104	\$ 101,278	\$ 128,514	\$ 13,880	\$ 37,783	\$ 115,158	\$ 166,296			144%	115%	289%	136%	\$1,599	\$1,080	\$369	\$1,449	24.2%	41.1%	28.1%	
Experience Period	1,151	1,341	\$ 1,251,609	\$ 1,334,842	\$ 168,747	\$ 495,940	\$ 1,420,356	\$ 1,830,782			0%	107%	294%	129%	\$1,365	\$995	\$370	\$1,365	24.6%	94.4%	38.0%	

State: District of Columbia

Filing Company:

Group Hospitalization and Medical Services, Inc.

TOI/Sub-TOI: H21 Health - Other/H21.000 Health - Other

Product Name: DC PPO UW & HIPAA - PPACA

Project Name/Number: 1867_DC PPO UW & HIPAA - PPACA /1867

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date	Schedule Item Status	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
02/20/2013		Rate	1867_DC PPO UW & HIPAA - PPACA - Rate Filing	05/02/2013	1867_DC_PPO UW & HIPAA - PPACA - Rate Filing.pdf (Superseded)
02/20/2013		Supporting Document	Actuarial Memorandum	05/02/2013	1867_DC_PPO UW & HIPAA - PPACA - Actuarial Memorandum.pdf (Superseded)

**GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
PPO (BluePreferred)**

District of Columbia

**Underwritten & HIPAA
Standard, Saver, and HSA - PPACA
Medical & Rx**

Rate Filing # 1867

Rate Filing

**Effective 7/1/2013
and
Effective 10/1/2013**

GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
PPO (BluePreferred)
District of Columbia
Underwritten & HIPAA
Standard, Saver, and HSA - PPACA
Rate Filing # 1867
Rate Filing
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Effective 7/1/2013

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GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
PPO (BluePreferred)
District of Columbia
Underwritten & HIPAA
Standard, Saver, and HSA - PPACA
Rate Filing # 1867
Rate Filing
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**GHMSI dba
CareFirst BlueCross BlueShield
INDIVIDUAL, NON-MEDIGAP
District of Columbia
PPO/BluePreferred
Underwritten Standard, Saver and HSA Plans
Form Numbers**

Underwritten (Standard):

D/DP-IEA-5/95
DC/CF/IND RX3 (1/03)
DC/CF/IND RX3 (R. 7/09)
DC/IEA/HIPAA (10/97)
PPP-A/DC-4/96
DC/CF/DB/BP (7/07)
DC/GHMSI/DOL APPEAL (3/06)
DC/CF/IND RX3 (R. 7/09)
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DC/CF/DB/ELIG SCH (R. 2/06)
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DC/CF/DB/BP (R. 3/08)
DC/CF/DB/ELIG HIPAA (7/08)
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and any amendments

PPACA:

DC/CF/DB/NGF/PPACA (9/10)
DC/CF/DB/DEPENDENT AGE (9/10)

Underwritten Saver:

DC/CF/LCRX (1/05)
DC/CF/LCRX (R. 7/09)
DC/DP-IEA-9/95
PPP-A/DC-4/96
DC/CF/DB/SOB/LC70 (7/07)
DC/CF/DB/SOB/LC100 (7/07)
DC/GHMSI/DOL APPEAL (3/06)
DC/CF/DB/ELIG SCH (R. 2/06)
DC/CF/BP/DB/IEA (7/08)
DC/CF/BP/DOCS (7/08)
DC/CF/DB SAVER SOB (7/08)
DC/CF/DB/ELIG (7/08)
and any amendments

PPACA:

DC/CF/DB/NGF/PPACA (9/10)
DC/CF/DB/DEPENDENT AGE (9/10)

Underwritten Health Savings Account (HSA):

DC/CF/IND HSA RX3 (R. 7/09)
DC/DP-IEA-9/95
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DC/CF/HSA80 (R. 7/07)
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DC/GHMSI/DOL APPEAL (3/06)
DC/CF/IND HSA RX3 (R. 7/06)
DC/CF/DB/ELIG SCH (R. 2/06)
DC/CF/BP/DB/IEA (7/08)
DC/CF/BP/DOCS (7/08)
DC/CF/DB HSA SOB (7/08)
DC/CF/DB/ELIG (7/08)
and any amendments

PPACA:

DC/CF/DB/NGF/PPACA (9/10)
DC/CF/DB/DEPENDENT AGE (9/10)

HIPAA (Standard):

D/DP-IEA-5/95
DC/CF/IND RX3 (R. 7/09)
DC/IEA/HIPAA (10/97)
PPP-A/DC-4/96
DC/CF/DB/BP (7/07)
DC/GHMSI/DOL APPEAL (3/06)
DC/CF/IND RX3 (R. 7/09)
DC/CF/DB/ELIG HIPAA (R. 2/06)
DC/CF/DB/ELIG SCH (R. 2/06)
DC/CF/BP/DB/IEA HIPAA (7/08)
DC/CF/BP/DB/IEA (7/08)
DC/CF/BP/DOCS (7/08)
DC/CF/DB/BP (R. 3/08)
DC/CF/DB/ELIG HIPAA (7/08)
DC/CF/DB/ELIG (7/08)
and any amendments

PPACA:

DC/CF/DB/NGF/PPACA (9/10)
DC/CF/DB/DEPENDENT AGE (9/10)

GHMSI dba CareFirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$100 Ded 90% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*	DEDUCTIBLE	<u>In Network</u>	<u>Out-Of-Network</u>
NO MATERNITY**	COINSURANCE	\$100	\$300
ANNUAL PHYSICALS	OUT-OF-POCKET MAXIMUM	90% / 10%	70% / 30%
		\$2,500	\$5,000

Base Rate **\$437.23**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$240.48			
6-18	\$214.24	\$432.77	\$428.49	\$582.74
19-20	\$317.87	\$642.09	\$635.73	\$864.60
21	\$317.87	\$642.09	\$635.73	\$864.60
22	\$317.87	\$642.09	\$635.73	\$864.60
23	\$317.87	\$642.09	\$635.73	\$864.60
24	\$317.87	\$642.09	\$635.73	\$864.60
25	\$317.87	\$642.09	\$635.73	\$864.60
26	\$317.87	\$642.09	\$635.73	\$864.60
27	\$317.87	\$642.09	\$635.73	\$864.60
28	\$317.87	\$642.09	\$635.73	\$864.60
29	\$317.87	\$642.09	\$635.73	\$864.60
30	\$317.87	\$642.09	\$635.73	\$864.60
31	\$317.87	\$642.09	\$635.73	\$864.60
32	\$317.87	\$642.09	\$635.73	\$864.60
33	\$326.17	\$658.87	\$652.35	\$887.19
34	\$338.85	\$684.48	\$677.71	\$921.68
35	\$351.97	\$710.98	\$703.94	\$957.36
36	\$365.52	\$738.36	\$731.05	\$994.23
37	\$379.95	\$767.50	\$759.91	\$1,033.47
38	\$394.82	\$797.53	\$789.64	\$1,073.91
39	\$410.12	\$828.45	\$820.24	\$1,115.53
40	\$426.30	\$861.12	\$852.60	\$1,159.53
41	\$442.91	\$894.69	\$885.83	\$1,204.73
42	\$460.40	\$930.01	\$920.81	\$1,252.30
43	\$478.33	\$966.23	\$956.66	\$1,301.06
44	\$497.13	\$1,004.20	\$994.26	\$1,352.19
45	\$516.37	\$1,043.06	\$1,032.74	\$1,404.52
46	\$536.48	\$1,083.69	\$1,072.96	\$1,459.23
47	\$557.47	\$1,126.09	\$1,114.94	\$1,516.31
48	\$579.33	\$1,170.25	\$1,158.66	\$1,575.78
49	\$602.07	\$1,216.17	\$1,204.13	\$1,637.62
50	\$625.68	\$1,263.87	\$1,251.35	\$1,701.84
51	\$650.16	\$1,313.33	\$1,300.32	\$1,768.44
52	\$675.52	\$1,364.55	\$1,351.04	\$1,837.42
53	\$701.75	\$1,417.54	\$1,403.51	\$1,908.77
54	\$729.30	\$1,473.19	\$1,458.60	\$1,983.70
55	\$757.72	\$1,530.59	\$1,515.44	\$2,061.00
56	\$787.45	\$1,590.65	\$1,574.90	\$2,141.87
57	\$818.06	\$1,652.48	\$1,636.11	\$2,225.12
58	\$849.98	\$1,716.95	\$1,699.95	\$2,311.93
59	\$883.20	\$1,784.07	\$1,766.41	\$2,402.32
60	\$917.75	\$1,853.85	\$1,835.49	\$2,496.27
61	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
62	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
63	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
64	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
65	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
>65 Non-Medicare Eligible	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79
>65 Medicare Eligible **	\$953.60	\$1,926.27	\$1,907.20	\$2,593.79

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$300 Ded 90% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*	DEDUCTIBLE	<u>In Network</u>	<u>Out-Of-Network</u>
NO MATERNITY**	COINSURANCE	\$300	\$600
ANNUAL PHYSICALS	OUT-OF-POCKET MAXIMUM	90% / 10%	70% / 30%
		\$2,500	\$5,000

Base Rate **\$353.29**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$194.31			
6-18	\$173.11	\$349.69	\$346.22	\$470.86
19-20	\$256.84	\$518.82	\$513.68	\$698.61
21	\$256.84	\$518.82	\$513.68	\$698.61
22	\$256.84	\$518.82	\$513.68	\$698.61
23	\$256.84	\$518.82	\$513.68	\$698.61
24	\$256.84	\$518.82	\$513.68	\$698.61
25	\$256.84	\$518.82	\$513.68	\$698.61
26	\$256.84	\$518.82	\$513.68	\$698.61
27	\$256.84	\$518.82	\$513.68	\$698.61
28	\$256.84	\$518.82	\$513.68	\$698.61
29	\$256.84	\$518.82	\$513.68	\$698.61
30	\$256.84	\$518.82	\$513.68	\$698.61
31	\$256.84	\$518.82	\$513.68	\$698.61
32	\$256.84	\$518.82	\$513.68	\$698.61
33	\$263.55	\$532.38	\$527.11	\$716.87
34	\$273.80	\$553.08	\$547.60	\$744.74
35	\$284.40	\$574.48	\$568.80	\$773.56
36	\$295.35	\$596.61	\$590.70	\$803.35
37	\$307.01	\$620.16	\$614.02	\$835.06
38	\$319.02	\$644.42	\$638.04	\$867.74
39	\$331.39	\$669.40	\$662.77	\$901.37
40	\$344.46	\$695.80	\$688.92	\$936.93
41	\$357.88	\$722.92	\$715.77	\$973.44
42	\$372.01	\$751.47	\$744.03	\$1,011.88
43	\$386.50	\$780.73	\$773.00	\$1,051.28
44	\$401.69	\$811.42	\$803.38	\$1,092.60
45	\$417.24	\$842.82	\$834.47	\$1,134.88
46	\$433.49	\$875.64	\$866.97	\$1,179.08
47	\$450.44	\$909.90	\$900.89	\$1,225.21
48	\$468.11	\$945.58	\$936.22	\$1,273.26
49	\$486.48	\$982.69	\$972.96	\$1,323.23
50	\$505.56	\$1,021.23	\$1,011.12	\$1,375.12
51	\$525.34	\$1,061.19	\$1,050.68	\$1,428.93
52	\$545.83	\$1,102.58	\$1,091.67	\$1,484.67
53	\$567.03	\$1,145.40	\$1,134.06	\$1,542.32
54	\$589.29	\$1,190.36	\$1,178.58	\$1,602.86
55	\$612.25	\$1,236.75	\$1,224.50	\$1,665.32
56	\$636.28	\$1,285.28	\$1,272.55	\$1,730.67
57	\$661.01	\$1,335.23	\$1,322.01	\$1,797.94
58	\$686.80	\$1,387.33	\$1,373.59	\$1,868.08
59	\$713.65	\$1,441.56	\$1,427.29	\$1,941.12
60	\$741.56	\$1,497.94	\$1,483.11	\$2,017.03
61	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
62	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
63	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
64	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
65	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
>65 Non-Medicare Eligible	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83
>65 Medicare Eligible **	\$770.53	\$1,556.46	\$1,541.05	\$2,095.83

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba CareFirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$300 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$300	\$600
80% / 20%	60% / 40%
\$2,500	\$5,000

Base Rate **\$338.46**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$186.15			
6-18	\$165.85	\$335.01	\$331.69	\$451.10
19-20	\$246.06	\$497.04	\$492.12	\$669.28
21	\$246.06	\$497.04	\$492.12	\$669.28
22	\$246.06	\$497.04	\$492.12	\$669.28
23	\$246.06	\$497.04	\$492.12	\$669.28
24	\$246.06	\$497.04	\$492.12	\$669.28
25	\$246.06	\$497.04	\$492.12	\$669.28
26	\$246.06	\$497.04	\$492.12	\$669.28
27	\$246.06	\$497.04	\$492.12	\$669.28
28	\$246.06	\$497.04	\$492.12	\$669.28
29	\$246.06	\$497.04	\$492.12	\$669.28
30	\$246.06	\$497.04	\$492.12	\$669.28
31	\$246.06	\$497.04	\$492.12	\$669.28
32	\$246.06	\$497.04	\$492.12	\$669.28
33	\$252.49	\$510.03	\$504.98	\$686.78
34	\$262.31	\$529.86	\$524.61	\$713.47
35	\$272.46	\$550.37	\$544.92	\$741.09
36	\$282.95	\$571.56	\$565.91	\$769.63
37	\$294.12	\$594.13	\$588.24	\$800.01
38	\$305.63	\$617.37	\$611.26	\$831.31
39	\$317.48	\$641.30	\$634.95	\$863.53
40	\$330.00	\$666.60	\$660.00	\$897.60
41	\$342.86	\$692.58	\$685.72	\$932.58
42	\$356.40	\$719.92	\$712.80	\$969.40
43	\$370.28	\$747.96	\$740.55	\$1,007.15
44	\$384.83	\$777.35	\$769.66	\$1,046.73
45	\$399.72	\$807.44	\$799.44	\$1,087.24
46	\$415.29	\$838.89	\$830.58	\$1,129.59
47	\$431.54	\$871.70	\$863.07	\$1,173.78
48	\$448.46	\$905.89	\$896.92	\$1,219.81
49	\$466.06	\$941.44	\$932.12	\$1,267.68
50	\$484.34	\$978.36	\$968.67	\$1,317.39
51	\$503.29	\$1,016.65	\$1,006.58	\$1,368.95
52	\$522.92	\$1,056.30	\$1,045.84	\$1,422.34
53	\$543.23	\$1,097.32	\$1,086.46	\$1,477.58
54	\$564.55	\$1,140.39	\$1,129.10	\$1,535.58
55	\$586.55	\$1,184.83	\$1,173.10	\$1,595.42
56	\$609.57	\$1,231.32	\$1,219.13	\$1,658.02
57	\$633.26	\$1,279.18	\$1,266.52	\$1,722.46
58	\$657.97	\$1,329.09	\$1,315.93	\$1,789.67
59	\$683.69	\$1,381.05	\$1,367.38	\$1,859.63
60	\$710.43	\$1,435.06	\$1,420.86	\$1,932.36
61	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
62	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
63	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
64	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
65	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
>65 Non-Medicare Eligible	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85
>65 Medicare Eligible **	\$738.18	\$1,491.13	\$1,476.36	\$2,007.85

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$500 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$500	\$1,000
80% / 20%	60% / 40%
\$2,500	\$5,000

Base Rate **\$323.10**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$177.71			
6-18	\$158.32	\$319.80	\$316.64	\$430.63
19-20	\$234.89	\$474.49	\$469.79	\$638.91
21	\$234.89	\$474.49	\$469.79	\$638.91
22	\$234.89	\$474.49	\$469.79	\$638.91
23	\$234.89	\$474.49	\$469.79	\$638.91
24	\$234.89	\$474.49	\$469.79	\$638.91
25	\$234.89	\$474.49	\$469.79	\$638.91
26	\$234.89	\$474.49	\$469.79	\$638.91
27	\$234.89	\$474.49	\$469.79	\$638.91
28	\$234.89	\$474.49	\$469.79	\$638.91
29	\$234.89	\$474.49	\$469.79	\$638.91
30	\$234.89	\$474.49	\$469.79	\$638.91
31	\$234.89	\$474.49	\$469.79	\$638.91
32	\$234.89	\$474.49	\$469.79	\$638.91
33	\$241.03	\$486.89	\$482.07	\$655.61
34	\$250.40	\$505.81	\$500.81	\$681.09
35	\$260.10	\$525.39	\$520.19	\$707.46
36	\$270.11	\$545.63	\$540.22	\$734.70
37	\$280.77	\$567.16	\$561.55	\$763.71
38	\$291.76	\$589.35	\$583.52	\$793.59
39	\$303.07	\$612.20	\$606.14	\$824.34
40	\$315.02	\$636.35	\$630.05	\$856.86
41	\$327.30	\$661.15	\$654.60	\$890.26
42	\$340.22	\$687.25	\$680.45	\$925.41
43	\$353.47	\$714.01	\$706.94	\$961.44
44	\$367.36	\$742.08	\$734.73	\$999.23
45	\$381.58	\$770.79	\$763.16	\$1,037.90
46	\$396.44	\$800.82	\$792.89	\$1,078.33
47	\$411.95	\$832.14	\$823.91	\$1,120.51
48	\$428.11	\$864.78	\$856.22	\$1,164.45
49	\$444.91	\$898.72	\$889.82	\$1,210.15
50	\$462.36	\$933.96	\$924.71	\$1,257.61
51	\$480.45	\$970.51	\$960.90	\$1,306.82
52	\$499.19	\$1,008.36	\$998.38	\$1,357.80
53	\$518.58	\$1,047.52	\$1,037.15	\$1,410.53
54	\$538.93	\$1,088.64	\$1,077.86	\$1,465.89
55	\$559.93	\$1,131.06	\$1,119.86	\$1,523.02
56	\$581.90	\$1,175.44	\$1,163.81	\$1,582.78
57	\$604.52	\$1,221.13	\$1,209.04	\$1,644.29
58	\$628.11	\$1,268.77	\$1,256.21	\$1,708.45
59	\$652.66	\$1,318.38	\$1,305.32	\$1,775.24
60	\$678.19	\$1,369.94	\$1,356.37	\$1,844.67
61	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
62	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
63	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
64	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
65	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
>65 Non-Medicare Eligible	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73
>65 Medicare Eligible **	\$704.68	\$1,423.46	\$1,409.36	\$1,916.73

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield

Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$750 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013

District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*	DEDUCTIBLE	<u>In Network</u>	<u>Out-Of-Network</u>
NO MATERNITY**	COINSURANCE	\$750	\$1,500
ANNUAL PHYSICALS	OUT-OF-POCKET MAXIMUM	80% / 20%	60% / 40%
		\$3,500	\$7,000

Base Rate **\$272.92**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$150.11			
6-18	\$133.73	\$270.14	\$267.46	\$363.75
19-20	\$198.41	\$400.79	\$396.83	\$539.68
21	\$198.41	\$400.79	\$396.83	\$539.68
22	\$198.41	\$400.79	\$396.83	\$539.68
23	\$198.41	\$400.79	\$396.83	\$539.68
24	\$198.41	\$400.79	\$396.83	\$539.68
25	\$198.41	\$400.79	\$396.83	\$539.68
26	\$198.41	\$400.79	\$396.83	\$539.68
27	\$198.41	\$400.79	\$396.83	\$539.68
28	\$198.41	\$400.79	\$396.83	\$539.68
29	\$198.41	\$400.79	\$396.83	\$539.68
30	\$198.41	\$400.79	\$396.83	\$539.68
31	\$198.41	\$400.79	\$396.83	\$539.68
32	\$198.41	\$400.79	\$396.83	\$539.68
33	\$203.60	\$411.27	\$407.20	\$553.79
34	\$211.51	\$427.26	\$423.03	\$575.32
35	\$219.70	\$443.80	\$439.40	\$597.59
36	\$228.16	\$460.89	\$456.32	\$620.60
37	\$237.17	\$479.08	\$474.33	\$645.10
38	\$246.45	\$497.82	\$492.89	\$670.34
39	\$256.00	\$517.12	\$512.00	\$696.32
40	\$266.10	\$537.52	\$532.19	\$723.78
41	\$276.47	\$558.47	\$552.94	\$751.99
42	\$287.38	\$580.52	\$574.77	\$781.69
43	\$298.57	\$603.12	\$597.15	\$812.12
44	\$310.31	\$626.83	\$620.62	\$844.04
45	\$322.32	\$651.08	\$644.64	\$876.71
46	\$334.87	\$676.44	\$669.75	\$910.85
47	\$347.97	\$702.91	\$695.95	\$946.49
48	\$361.62	\$730.47	\$723.24	\$983.60
49	\$375.81	\$759.14	\$751.62	\$1,022.21
50	\$390.55	\$788.91	\$781.10	\$1,062.29
51	\$405.83	\$819.78	\$811.66	\$1,103.86
52	\$421.66	\$851.76	\$843.32	\$1,146.92
53	\$438.04	\$884.83	\$876.07	\$1,191.46
54	\$455.23	\$919.57	\$910.46	\$1,238.23
55	\$472.97	\$955.40	\$945.94	\$1,286.48
56	\$491.53	\$992.89	\$983.06	\$1,336.96
57	\$510.63	\$1,031.48	\$1,021.27	\$1,388.92
58	\$530.56	\$1,071.72	\$1,061.11	\$1,443.11
59	\$551.30	\$1,113.62	\$1,102.60	\$1,499.53
60	\$572.86	\$1,157.18	\$1,145.72	\$1,558.18
61	\$595.24	\$1,202.38	\$1,190.48	\$1,619.05
62	\$595.24	\$1,202.38	\$1,190.48	\$1,619.05
63	\$595.24	\$1,202.38	\$1,190.48	\$1,619.05
64	\$595.24	\$1,202.38	\$1,190.48	\$1,619.05
65	\$595.24	\$1,202.38	\$1,190.48	\$1,619.05
>65 Non-Medicare Eligible	\$595.24	\$1,202.38	\$1,190.48	\$1,619.05
>65 Medicare Eligible **	\$595.24	\$1,202.38	\$1,190.48	\$1,619.05

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield

Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$2500 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013

District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*	DEDUCTIBLE	<u>In Network</u>	<u>Out-Of-Network</u>
NO MATERNITY**	COINSURANCE	\$2,500	\$5,000
ANNUAL PHYSICALS	OUT-OF-POCKET MAXIMUM	80% / 20%	60% / 40%
		\$5,000	\$7,500

Base Rate **\$187.43**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$103.09			
6-18	\$91.84	\$185.52	\$183.68	\$249.81
19-20	\$136.26	\$275.25	\$272.52	\$370.63
21	\$136.26	\$275.25	\$272.52	\$370.63
22	\$136.26	\$275.25	\$272.52	\$370.63
23	\$136.26	\$275.25	\$272.52	\$370.63
24	\$136.26	\$275.25	\$272.52	\$370.63
25	\$136.26	\$275.25	\$272.52	\$370.63
26	\$136.26	\$275.25	\$272.52	\$370.63
27	\$136.26	\$275.25	\$272.52	\$370.63
28	\$136.26	\$275.25	\$272.52	\$370.63
29	\$136.26	\$275.25	\$272.52	\$370.63
30	\$136.26	\$275.25	\$272.52	\$370.63
31	\$136.26	\$275.25	\$272.52	\$370.63
32	\$136.26	\$275.25	\$272.52	\$370.63
33	\$139.82	\$282.44	\$279.65	\$380.32
34	\$145.26	\$293.42	\$290.52	\$395.10
35	\$150.88	\$304.78	\$301.76	\$410.40
36	\$156.69	\$316.52	\$313.38	\$426.20
37	\$162.88	\$329.01	\$325.75	\$443.02
38	\$169.25	\$341.88	\$338.50	\$460.36
39	\$175.81	\$355.13	\$351.62	\$478.20
40	\$182.74	\$369.14	\$365.49	\$497.06
41	\$189.87	\$383.53	\$379.73	\$516.44
42	\$197.36	\$398.67	\$394.73	\$536.83
43	\$205.05	\$414.20	\$410.10	\$557.73
44	\$213.11	\$430.48	\$426.22	\$579.65
45	\$221.35	\$447.14	\$442.71	\$602.09
46	\$229.98	\$464.55	\$459.95	\$625.54
47	\$238.97	\$482.73	\$477.95	\$650.01
48	\$248.34	\$501.66	\$496.69	\$675.50
49	\$258.09	\$521.34	\$516.18	\$702.01
50	\$268.21	\$541.79	\$536.42	\$729.54
51	\$278.71	\$562.99	\$557.42	\$758.09
52	\$289.58	\$584.95	\$579.16	\$787.66
53	\$300.83	\$607.67	\$601.65	\$818.24
54	\$312.63	\$631.52	\$625.27	\$850.36
55	\$324.82	\$656.13	\$649.63	\$883.50
56	\$337.56	\$681.87	\$675.12	\$918.17
57	\$350.68	\$708.38	\$701.36	\$953.85
58	\$364.36	\$736.02	\$728.73	\$991.07
59	\$378.61	\$764.79	\$757.22	\$1,029.82
60	\$393.42	\$794.70	\$786.83	\$1,070.09
61	\$408.78	\$825.75	\$817.57	\$1,111.89
62	\$408.78	\$825.75	\$817.57	\$1,111.89
63	\$408.78	\$825.75	\$817.57	\$1,111.89
64	\$408.78	\$825.75	\$817.57	\$1,111.89
65	\$408.78	\$825.75	\$817.57	\$1,111.89
>65 Non-Medicare Eligible	\$408.78	\$825.75	\$817.57	\$1,111.89
>65 Medicare Eligible **	\$408.78	\$825.75	\$817.57	\$1,111.89

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan - \$2500 Ded
Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$2,500	\$5,000
70% / 30%	60% / 40%
\$5,000	\$10,000

Base Rate **\$192.80**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$106.04			
6-18	\$94.47	\$190.83	\$188.94	\$256.96
19-20	\$140.17	\$283.13	\$280.33	\$381.25
21	\$140.17	\$283.13	\$280.33	\$381.25
22	\$140.17	\$283.13	\$280.33	\$381.25
23	\$140.17	\$283.13	\$280.33	\$381.25
24	\$140.17	\$283.13	\$280.33	\$381.25
25	\$140.17	\$283.13	\$280.33	\$381.25
26	\$140.17	\$283.13	\$280.33	\$381.25
27	\$140.17	\$283.13	\$280.33	\$381.25
28	\$140.17	\$283.13	\$280.33	\$381.25
29	\$140.17	\$283.13	\$280.33	\$381.25
30	\$140.17	\$283.13	\$280.33	\$381.25
31	\$140.17	\$283.13	\$280.33	\$381.25
32	\$140.17	\$283.13	\$280.33	\$381.25
33	\$143.83	\$290.53	\$287.66	\$391.21
34	\$149.42	\$301.83	\$298.84	\$406.42
35	\$155.20	\$313.51	\$310.41	\$422.15
36	\$161.18	\$325.59	\$322.36	\$438.41
37	\$167.54	\$338.44	\$335.09	\$455.72
38	\$174.10	\$351.68	\$348.20	\$473.55
39	\$180.85	\$365.31	\$361.69	\$491.90
40	\$187.98	\$379.72	\$375.96	\$511.31
41	\$195.31	\$394.52	\$390.61	\$531.23
42	\$203.02	\$410.10	\$406.04	\$552.21
43	\$210.92	\$426.06	\$421.85	\$573.71
44	\$219.21	\$442.81	\$438.43	\$596.26
45	\$227.70	\$459.95	\$455.39	\$619.34
46	\$236.57	\$477.86	\$473.13	\$643.46
47	\$245.82	\$496.56	\$491.64	\$668.63
48	\$255.46	\$516.03	\$510.92	\$694.85
49	\$265.49	\$536.28	\$530.97	\$722.12
50	\$275.90	\$557.31	\$551.79	\$750.44
51	\$286.69	\$579.12	\$573.39	\$779.81
52	\$297.88	\$601.71	\$595.75	\$810.22
53	\$309.44	\$625.08	\$618.89	\$841.69
54	\$321.59	\$649.61	\$643.18	\$874.73
55	\$334.12	\$674.93	\$668.24	\$908.81
56	\$347.23	\$701.41	\$694.47	\$944.47
57	\$360.73	\$728.67	\$721.46	\$981.18
58	\$374.80	\$757.10	\$749.61	\$1,019.46
59	\$389.46	\$786.70	\$778.91	\$1,059.32
60	\$404.69	\$817.47	\$809.37	\$1,100.75
61	\$420.50	\$849.40	\$840.99	\$1,143.75
62	\$420.50	\$849.40	\$840.99	\$1,143.75
63	\$420.50	\$849.40	\$840.99	\$1,143.75
64	\$420.50	\$849.40	\$840.99	\$1,143.75
65	\$420.50	\$849.40	\$840.99	\$1,143.75
>65 Non-Medicare Eligible	\$420.50	\$849.40	\$840.99	\$1,143.75
>65 Medicare Eligible **	\$420.50	\$849.40	\$840.99	\$1,143.75

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** Maternity coverage, with Deductible and then Coinsurance, may be added to any subscriber's coverage for an additional rate of \$126 per month.

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan - \$5000 Ded
Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$5,000	\$10,000
100% / 0%	80% / 20%
\$5,000	\$12,500

Base Rate **\$168.93**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$92.91			
6-18	\$82.78	\$167.21	\$165.55	\$225.15
19-20	\$122.81	\$248.08	\$245.62	\$334.05
21	\$122.81	\$248.08	\$245.62	\$334.05
22	\$122.81	\$248.08	\$245.62	\$334.05
23	\$122.81	\$248.08	\$245.62	\$334.05
24	\$122.81	\$248.08	\$245.62	\$334.05
25	\$122.81	\$248.08	\$245.62	\$334.05
26	\$122.81	\$248.08	\$245.62	\$334.05
27	\$122.81	\$248.08	\$245.62	\$334.05
28	\$122.81	\$248.08	\$245.62	\$334.05
29	\$122.81	\$248.08	\$245.62	\$334.05
30	\$122.81	\$248.08	\$245.62	\$334.05
31	\$122.81	\$248.08	\$245.62	\$334.05
32	\$122.81	\$248.08	\$245.62	\$334.05
33	\$126.02	\$254.56	\$252.04	\$342.78
34	\$130.92	\$264.46	\$261.84	\$356.10
35	\$135.99	\$274.70	\$271.98	\$369.89
36	\$141.23	\$285.28	\$282.45	\$384.13
37	\$146.80	\$296.54	\$293.60	\$399.30
38	\$152.54	\$308.14	\$305.09	\$414.92
39	\$158.46	\$320.08	\$316.91	\$431.00
40	\$164.71	\$332.71	\$329.41	\$448.00
41	\$171.13	\$345.67	\$342.25	\$465.46
42	\$177.88	\$359.32	\$355.77	\$483.84
43	\$184.81	\$373.32	\$369.62	\$502.68
44	\$192.07	\$387.99	\$384.15	\$522.44
45	\$199.51	\$403.00	\$399.01	\$542.66
46	\$207.28	\$418.70	\$414.55	\$563.79
47	\$215.39	\$435.08	\$430.77	\$585.85
48	\$223.83	\$452.14	\$447.66	\$608.82
49	\$232.62	\$469.89	\$465.23	\$632.72
50	\$241.74	\$488.31	\$483.48	\$657.53
51	\$251.20	\$507.42	\$502.40	\$683.26
52	\$261.00	\$527.21	\$521.99	\$709.91
53	\$271.13	\$547.69	\$542.27	\$737.48
54	\$281.78	\$569.19	\$563.55	\$766.43
55	\$292.76	\$591.37	\$585.51	\$796.30
56	\$304.24	\$614.57	\$608.49	\$827.54
57	\$316.07	\$638.46	\$632.14	\$859.71
58	\$328.40	\$663.37	\$656.80	\$893.25
59	\$341.24	\$689.30	\$682.48	\$928.17
60	\$354.58	\$716.26	\$709.17	\$964.47
61	\$368.44	\$744.24	\$736.87	\$1,002.15
62	\$368.44	\$744.24	\$736.87	\$1,002.15
63	\$368.44	\$744.24	\$736.87	\$1,002.15
64	\$368.44	\$744.24	\$736.87	\$1,002.15
65	\$368.44	\$744.24	\$736.87	\$1,002.15
>65 Non-Medicare Eligible	\$368.44	\$744.24	\$736.87	\$1,002.15
>65 Medicare Eligible **	\$368.44	\$744.24	\$736.87	\$1,002.15

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** Maternity coverage, with Deductible and then Coinsurance, may be added to any subscriber's coverage for an additional rate of \$126 per month.

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan - \$10000 Ded
Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$10,000	\$12,500
100% / 0%	80% / 20%
\$10,000	\$15,000

Base Rate **\$121.92**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$67.06			
6-18	\$59.74	\$120.68	\$119.48	\$162.49
19-20	\$88.64	\$179.04	\$177.27	\$241.09
21	\$88.64	\$179.04	\$177.27	\$241.09
22	\$88.64	\$179.04	\$177.27	\$241.09
23	\$88.64	\$179.04	\$177.27	\$241.09
24	\$88.64	\$179.04	\$177.27	\$241.09
25	\$88.64	\$179.04	\$177.27	\$241.09
26	\$88.64	\$179.04	\$177.27	\$241.09
27	\$88.64	\$179.04	\$177.27	\$241.09
28	\$88.64	\$179.04	\$177.27	\$241.09
29	\$88.64	\$179.04	\$177.27	\$241.09
30	\$88.64	\$179.04	\$177.27	\$241.09
31	\$88.64	\$179.04	\$177.27	\$241.09
32	\$88.64	\$179.04	\$177.27	\$241.09
33	\$90.95	\$183.72	\$181.90	\$247.39
34	\$94.49	\$190.87	\$188.98	\$257.01
35	\$98.15	\$198.25	\$196.29	\$266.96
36	\$101.93	\$205.89	\$203.85	\$277.24
37	\$105.95	\$214.02	\$211.90	\$288.18
38	\$110.09	\$222.39	\$220.19	\$299.46
39	\$114.36	\$231.01	\$228.72	\$311.06
40	\$118.87	\$240.12	\$237.74	\$323.33
41	\$123.50	\$249.48	\$247.01	\$335.93
42	\$128.38	\$259.33	\$256.76	\$349.20
43	\$133.38	\$269.43	\$266.76	\$362.79
44	\$138.62	\$280.02	\$277.25	\$377.05
45	\$143.99	\$290.85	\$287.98	\$391.65
46	\$149.60	\$302.18	\$299.19	\$406.90
47	\$155.45	\$314.00	\$310.90	\$422.82
48	\$161.54	\$326.32	\$323.09	\$439.40
49	\$167.88	\$339.13	\$335.77	\$456.64
50	\$174.47	\$352.42	\$348.94	\$474.55
51	\$181.30	\$366.22	\$362.59	\$493.12
52	\$188.37	\$380.50	\$376.73	\$512.36
53	\$195.68	\$395.28	\$391.36	\$532.25
54	\$203.36	\$410.79	\$406.73	\$553.15
55	\$211.29	\$426.80	\$422.57	\$574.70
56	\$219.58	\$443.55	\$439.16	\$597.25
57	\$228.11	\$460.79	\$456.22	\$620.47
58	\$237.01	\$478.77	\$474.02	\$644.67
59	\$246.28	\$497.48	\$492.56	\$669.88
60	\$255.91	\$516.94	\$511.82	\$696.08
61	\$265.91	\$537.13	\$531.82	\$723.27
62	\$265.91	\$537.13	\$531.82	\$723.27
63	\$265.91	\$537.13	\$531.82	\$723.27
64	\$265.91	\$537.13	\$531.82	\$723.27
65	\$265.91	\$537.13	\$531.82	\$723.27
>65 Non-Medicare Eligible	\$265.91	\$537.13	\$531.82	\$723.27
>65 Medicare Eligible **	\$265.91	\$537.13	\$531.82	\$723.27

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - Maternity coverage, with Deductible and then Coinsurance, may be added to any subscriber's coverage for an additional rate of \$126 per month.

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 District of Columbia
PPO/BluePreferred - Underwritten HSA Plan - \$1200 Ded
Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

Rx and Medical Combined for Ded, OOP Max and Lifetime Max*
 MATERNITY COVERED*

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$1,200	\$2,400
80% / 20%	60% / 40%
\$2,800	\$5,000

Base Rate **\$202.20**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$111.21			
6-18	\$99.08	\$200.14	\$198.16	\$269.49
19-20	\$147.00	\$296.94	\$294.00	\$399.84
21	\$147.00	\$296.94	\$294.00	\$399.84
22	\$147.00	\$296.94	\$294.00	\$399.84
23	\$147.00	\$296.94	\$294.00	\$399.84
24	\$147.00	\$296.94	\$294.00	\$399.84
25	\$147.00	\$296.94	\$294.00	\$399.84
26	\$147.00	\$296.94	\$294.00	\$399.84
27	\$147.00	\$296.94	\$294.00	\$399.84
28	\$147.00	\$296.94	\$294.00	\$399.84
29	\$147.00	\$296.94	\$294.00	\$399.84
30	\$147.00	\$296.94	\$294.00	\$399.84
31	\$147.00	\$296.94	\$294.00	\$399.84
32	\$147.00	\$296.94	\$294.00	\$399.84
33	\$150.84	\$304.70	\$301.68	\$410.29
34	\$156.71	\$316.54	\$313.41	\$426.24
35	\$162.77	\$328.80	\$325.54	\$442.74
36	\$169.04	\$341.46	\$338.08	\$459.79
37	\$175.71	\$354.94	\$351.42	\$477.94
38	\$182.59	\$368.82	\$365.17	\$496.64
39	\$189.66	\$383.12	\$379.33	\$515.88
40	\$197.15	\$398.23	\$394.29	\$536.23
41	\$204.83	\$413.75	\$409.66	\$557.13
42	\$212.92	\$430.09	\$425.83	\$579.13
43	\$221.21	\$446.84	\$442.41	\$601.68
44	\$229.90	\$464.40	\$459.80	\$625.33
45	\$238.80	\$482.37	\$477.60	\$649.53
46	\$248.10	\$501.16	\$496.20	\$674.83
47	\$257.81	\$520.77	\$515.61	\$701.23
48	\$267.92	\$541.19	\$535.83	\$728.73
49	\$278.43	\$562.43	\$556.86	\$757.33
50	\$289.35	\$584.48	\$578.70	\$787.03
51	\$300.67	\$607.36	\$601.34	\$817.83
52	\$312.40	\$631.05	\$624.80	\$849.73
53	\$324.53	\$655.55	\$649.06	\$882.72
54	\$337.27	\$681.28	\$674.54	\$917.37
55	\$350.41	\$707.83	\$700.83	\$953.12
56	\$364.16	\$735.61	\$728.32	\$990.52
57	\$378.32	\$764.20	\$756.63	\$1,029.02
58	\$393.08	\$794.02	\$786.15	\$1,069.17
59	\$408.44	\$825.06	\$816.89	\$1,110.97
60	\$424.42	\$857.32	\$848.84	\$1,154.42
61	\$441.00	\$890.82	\$882.00	\$1,199.52
62	\$441.00	\$890.82	\$882.00	\$1,199.52
63	\$441.00	\$890.82	\$882.00	\$1,199.52
64	\$441.00	\$890.82	\$882.00	\$1,199.52
65	\$441.00	\$890.82	\$882.00	\$1,199.52
Over 65	\$441.00	\$890.82	\$882.00	\$1,199.52

\$10 Generic, \$25 Preferred Brand
 \$45 Non-Preferred Brand Copays
 \$1,500 Annual Max

**** - To include Maternity, with:
 Deductible & Coinsurance
 and no per pregnancy
 maximum, add \$126 to the
 monthly premium rate.
 (Covers those maternity
 services not mandated
 by HB 1271, primarily
 professional services.)**

**not available to new sales

BSBS Code P803

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 District of Columbia
PPO/BluePreferred - Underwritten HSA Plan - \$2700 Ded
Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

Rx and Medical Combined for Ded, OOP Max and Lifetime Max*
 MATERNITY COVERED*

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$2,700	\$5,400
100% / 0%	80% / 20%
\$3,200	\$6,400

Base Rate **\$150.02**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$82.51			
6-18	\$73.51	\$148.49	\$147.02	\$199.95
19-20	\$109.06	\$220.31	\$218.13	\$296.66
21	\$109.06	\$220.31	\$218.13	\$296.66
22	\$109.06	\$220.31	\$218.13	\$296.66
23	\$109.06	\$220.31	\$218.13	\$296.66
24	\$109.06	\$220.31	\$218.13	\$296.66
25	\$109.06	\$220.31	\$218.13	\$296.66
26	\$109.06	\$220.31	\$218.13	\$296.66
27	\$109.06	\$220.31	\$218.13	\$296.66
28	\$109.06	\$220.31	\$218.13	\$296.66
29	\$109.06	\$220.31	\$218.13	\$296.66
30	\$109.06	\$220.31	\$218.13	\$296.66
31	\$109.06	\$220.31	\$218.13	\$296.66
32	\$109.06	\$220.31	\$218.13	\$296.66
33	\$111.91	\$226.07	\$223.83	\$304.41
34	\$116.27	\$234.86	\$232.53	\$316.24
35	\$120.77	\$243.95	\$241.53	\$328.48
36	\$125.42	\$253.34	\$250.83	\$341.13
37	\$130.37	\$263.34	\$260.73	\$354.60
38	\$135.47	\$273.65	\$270.94	\$368.47
39	\$140.72	\$284.25	\$281.44	\$382.76
40	\$146.27	\$295.46	\$292.54	\$397.85
41	\$151.97	\$306.98	\$303.94	\$413.36
42	\$157.97	\$319.10	\$315.94	\$429.68
43	\$164.12	\$331.53	\$328.24	\$446.41
44	\$170.57	\$344.56	\$341.15	\$463.96
45	\$177.17	\$357.89	\$354.35	\$481.91
46	\$184.07	\$371.83	\$368.15	\$500.68
47	\$191.28	\$386.38	\$382.55	\$520.27
48	\$198.78	\$401.53	\$397.55	\$540.67
49	\$206.58	\$417.29	\$413.16	\$561.89
50	\$214.68	\$433.65	\$429.36	\$583.93
51	\$223.08	\$450.62	\$446.16	\$606.78
52	\$231.78	\$468.20	\$463.56	\$630.44
53	\$240.78	\$486.38	\$481.56	\$654.93
54	\$250.23	\$505.47	\$500.47	\$680.63
55	\$259.98	\$525.17	\$519.97	\$707.16
56	\$270.19	\$545.78	\$540.37	\$734.91
57	\$280.69	\$566.99	\$561.37	\$763.47
58	\$291.64	\$589.11	\$583.28	\$793.26
59	\$303.04	\$612.14	\$606.08	\$824.27
60	\$314.89	\$636.08	\$629.78	\$856.51
61	\$327.19	\$660.93	\$654.39	\$889.97
62	\$327.19	\$660.93	\$654.39	\$889.97
63	\$327.19	\$660.93	\$654.39	\$889.97
64	\$327.19	\$660.93	\$654.39	\$889.97
65	\$327.19	\$660.93	\$654.39	\$889.97
Over 65	\$327.19	\$660.93	\$654.39	\$889.97

\$10 Generic, \$25 Preferred Brand
 \$45 Non-Preferred Brand Copays
 \$1,500 Annual Max

**** - To include Maternity, with:
 Deductible & Coinsurance
 and no per pregnancy
 maximum, add \$126 to the
 monthly premium rate.
 (Covers those maternity
 services not mandated
 by HB 1271, primarily
 professional services.)**

**not available to new sales

BSBS Code P804

GHMSI dba CareFirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - HIPAA Standard Plan - \$100 Ded 90% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 FULL MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$100	\$300
90% / 10%	70% / 30%
\$2,500	\$5,000

Base Rate **\$1,414.45**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$777.95			
6-18	\$693.08	\$1,400.02	\$1,386.16	\$1,885.18
19-20	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
21	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
22	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
23	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
24	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
25	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
26	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
27	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
28	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
29	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
30	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
31	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
32	\$1,028.31	\$2,077.18	\$2,056.61	\$2,796.99
33	\$1,055.18	\$2,131.46	\$2,110.36	\$2,870.09
34	\$1,096.20	\$2,214.32	\$2,192.40	\$2,981.66
35	\$1,138.63	\$2,300.04	\$2,277.26	\$3,097.08
36	\$1,182.48	\$2,388.61	\$2,364.96	\$3,216.35
37	\$1,229.16	\$2,482.90	\$2,458.31	\$3,343.31
38	\$1,277.25	\$2,580.04	\$2,554.50	\$3,474.12
39	\$1,326.75	\$2,680.04	\$2,653.51	\$3,608.77
40	\$1,379.09	\$2,785.76	\$2,758.18	\$3,751.12
41	\$1,432.84	\$2,894.33	\$2,865.68	\$3,897.32
42	\$1,489.42	\$3,008.62	\$2,978.83	\$4,051.21
43	\$1,547.41	\$3,125.76	\$3,094.82	\$4,208.95
44	\$1,608.23	\$3,248.62	\$3,216.46	\$4,374.38
45	\$1,670.47	\$3,374.34	\$3,340.93	\$4,543.67
46	\$1,735.53	\$3,505.77	\$3,471.06	\$4,720.64
47	\$1,803.42	\$3,642.92	\$3,606.85	\$4,905.31
48	\$1,874.15	\$3,785.78	\$3,748.29	\$5,097.68
49	\$1,947.70	\$3,934.35	\$3,895.40	\$5,297.74
50	\$2,024.08	\$4,088.64	\$4,048.16	\$5,505.49
51	\$2,103.29	\$4,248.64	\$4,206.57	\$5,720.94
52	\$2,185.33	\$4,414.36	\$4,370.65	\$5,944.08
53	\$2,270.19	\$4,585.79	\$4,540.38	\$6,174.92
54	\$2,359.30	\$4,765.79	\$4,718.61	\$6,417.30
55	\$2,451.24	\$4,951.51	\$4,902.48	\$6,667.38
56	\$2,547.42	\$5,145.80	\$5,094.85	\$6,928.99
57	\$2,646.44	\$5,345.80	\$5,292.87	\$7,198.31
58	\$2,749.69	\$5,554.38	\$5,499.38	\$7,479.16
59	\$2,857.19	\$5,771.52	\$5,714.38	\$7,771.55
60	\$2,968.93	\$5,997.24	\$5,937.86	\$8,075.49
61	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97
62	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97
63	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97
64	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97
65	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97
Over 65	\$3,084.92	\$6,231.53	\$6,169.83	\$8,390.97

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

**not available to new sales

BSBS Code

P601

GHMSI dba CareFirst BlueCross BlueShield

Individual Non-Medigap Business
 PPO/BluePreferred - HIPAA Standard Plan - \$300 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 7/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$300	\$500
80% / 20%	60% / 40%
\$2,500	\$5,000

Base Rate

\$906.74

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$498.71			
6-18	\$444.30	\$897.49	\$888.61	\$1,208.50
19-20	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
21	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
22	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
23	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
24	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
25	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
26	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
27	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
28	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
29	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
30	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
31	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
32	\$659.20	\$1,331.58	\$1,318.40	\$1,793.02
33	\$676.43	\$1,366.38	\$1,352.86	\$1,839.88
34	\$702.72	\$1,419.50	\$1,405.45	\$1,911.41
35	\$729.93	\$1,474.45	\$1,459.85	\$1,985.40
36	\$758.03	\$1,531.23	\$1,516.07	\$2,061.85
37	\$787.96	\$1,591.67	\$1,575.91	\$2,143.24
38	\$818.79	\$1,653.95	\$1,637.57	\$2,227.10
39	\$850.52	\$1,718.05	\$1,701.04	\$2,313.42
40	\$884.07	\$1,785.82	\$1,768.14	\$2,404.67
41	\$918.53	\$1,855.43	\$1,837.06	\$2,498.40
42	\$954.80	\$1,928.69	\$1,909.59	\$2,597.05
43	\$991.97	\$2,003.79	\$1,983.95	\$2,698.17
44	\$1,030.96	\$2,082.55	\$2,061.93	\$2,804.22
45	\$1,070.86	\$2,163.14	\$2,141.72	\$2,912.74
46	\$1,112.57	\$2,247.39	\$2,225.14	\$3,026.19
47	\$1,156.09	\$2,335.31	\$2,312.19	\$3,144.57
48	\$1,201.43	\$2,426.89	\$2,402.86	\$3,267.89
49	\$1,248.58	\$2,522.13	\$2,497.16	\$3,396.14
50	\$1,297.54	\$2,621.04	\$2,595.09	\$3,529.32
51	\$1,348.32	\$2,723.61	\$2,696.64	\$3,667.44
52	\$1,400.91	\$2,829.84	\$2,801.83	\$3,810.48
53	\$1,455.32	\$2,939.74	\$2,910.64	\$3,958.46
54	\$1,512.44	\$3,055.13	\$3,024.88	\$4,113.84
55	\$1,571.38	\$3,174.19	\$3,142.76	\$4,274.15
56	\$1,633.04	\$3,298.74	\$3,266.08	\$4,441.87
57	\$1,696.51	\$3,426.95	\$3,393.02	\$4,614.51
58	\$1,762.70	\$3,560.66	\$3,525.41	\$4,794.55
59	\$1,831.61	\$3,699.86	\$3,663.23	\$4,981.99
60	\$1,903.25	\$3,844.56	\$3,806.49	\$5,176.83
61	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07
62	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07
63	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07
64	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07
65	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07
Over 65	\$1,977.60	\$3,994.75	\$3,955.20	\$5,379.07

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

**not available to new sales

BSBS Code

P603

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, non-Medigap Business - PPO/BluePreferred - Prescription Drug Card Rider
District of Columbia - PPACA
Underwritten Standard Product (open)
Proposed Monthly Premium Rates Effective 7/1/2013

Deductible	=	\$100
RETAIL: 30 Day Supply, Copay	=	\$10 Generic, \$25 Formulary Brand, \$45 Nonformulary
MAIL ORDER: 90 Day Supply, Copay	=	\$20 Generic, \$50 Formulary Brand, \$90 Nonformulary
Annual Benefits Maximum	=	Unlimited
 Base Rate	 =	 \$93.36

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$51.35			
6-18	\$45.75	\$92.41	\$91.49	\$124.43
19-20	\$67.87	\$137.10	\$135.75	\$184.61
21	\$67.87	\$137.10	\$135.75	\$184.61
22	\$67.87	\$137.10	\$135.75	\$184.61
23	\$67.87	\$137.10	\$135.75	\$184.61
24	\$67.87	\$137.10	\$135.75	\$184.61
25	\$67.87	\$137.10	\$135.75	\$184.61
26	\$67.87	\$137.10	\$135.75	\$184.61
27	\$67.87	\$137.10	\$135.75	\$184.61
28	\$67.87	\$137.10	\$135.75	\$184.61
29	\$67.87	\$137.10	\$135.75	\$184.61
30	\$67.87	\$137.10	\$135.75	\$184.61
31	\$67.87	\$137.10	\$135.75	\$184.61
32	\$67.87	\$137.10	\$135.75	\$184.61
33	\$69.65	\$140.69	\$139.29	\$189.44
34	\$72.35	\$146.16	\$144.71	\$196.80
35	\$75.15	\$151.81	\$150.31	\$204.42
36	\$78.05	\$157.66	\$156.10	\$212.29
37	\$81.13	\$163.88	\$162.26	\$220.67
38	\$84.30	\$170.29	\$168.61	\$229.31
39	\$87.57	\$176.89	\$175.14	\$238.19
40	\$91.03	\$183.87	\$182.05	\$247.59
41	\$94.57	\$191.04	\$189.15	\$257.24
42	\$98.31	\$198.58	\$196.62	\$267.40
43	\$102.14	\$206.31	\$204.27	\$277.81
44	\$106.15	\$214.42	\$212.30	\$288.73
45	\$110.26	\$222.72	\$220.52	\$299.90
46	\$114.55	\$231.40	\$229.11	\$311.58
47	\$119.03	\$240.45	\$238.07	\$323.77
48	\$123.70	\$249.88	\$247.40	\$336.47
49	\$128.56	\$259.68	\$257.11	\$349.67
50	\$133.60	\$269.87	\$267.20	\$363.39
51	\$138.83	\$280.43	\$277.65	\$377.61
52	\$144.24	\$291.37	\$288.48	\$392.34
53	\$149.84	\$302.68	\$299.69	\$407.57
54	\$155.72	\$314.56	\$311.45	\$423.57
55	\$161.79	\$326.82	\$323.59	\$440.08
56	\$168.14	\$339.65	\$336.28	\$457.34
57	\$174.68	\$352.85	\$349.35	\$475.12
58	\$181.49	\$366.61	\$362.98	\$493.66
59	\$188.59	\$380.95	\$377.17	\$512.96
60	\$195.96	\$395.84	\$391.93	\$533.02
61	\$203.62	\$411.31	\$407.24	\$553.84
62	\$203.62	\$411.31	\$407.24	\$553.84
63	\$203.62	\$411.31	\$407.24	\$553.84
64	\$203.62	\$411.31	\$407.24	\$553.84
65	\$203.62	\$411.31	\$407.24	\$553.84
>65 Non-Medicare Eligible	\$203.62	\$411.31	\$407.24	\$553.84
>65 Medicare Eligible **	\$203.62	\$411.31	\$407.24	\$553.84

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
NAIC No. 53007
Individual, non-Medigap Business - Prescription Drug Card Rider

District of Columbia - PPACA
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan
PRESCRIPTION DRUG

Proposed Monthly Premium Rates Effective 7/1/2013

Deductible = \$150
 RETAIL (Acute) : 34 Day Supply, Copay = \$15 Generic, Discount on Brand
 Annual Benefits Maximum (on Generic only) = Unlimited

Base Rate = **\$21.33**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$11.73			
6-18	\$10.45	\$21.11	\$20.90	\$28.43
19-20	\$15.51	\$31.32	\$31.01	\$42.18
21	\$15.51	\$31.32	\$31.01	\$42.18
22	\$15.51	\$31.32	\$31.01	\$42.18
23	\$15.51	\$31.32	\$31.01	\$42.18
24	\$15.51	\$31.32	\$31.01	\$42.18
25	\$15.51	\$31.32	\$31.01	\$42.18
26	\$15.51	\$31.32	\$31.01	\$42.18
27	\$15.51	\$31.32	\$31.01	\$42.18
28	\$15.51	\$31.32	\$31.01	\$42.18
29	\$15.51	\$31.32	\$31.01	\$42.18
30	\$15.51	\$31.32	\$31.01	\$42.18
31	\$15.51	\$31.32	\$31.01	\$42.18
32	\$15.51	\$31.32	\$31.01	\$42.18
33	\$15.91	\$32.14	\$31.82	\$43.28
34	\$16.53	\$33.39	\$33.06	\$44.96
35	\$17.17	\$34.68	\$34.34	\$46.70
36	\$17.83	\$36.02	\$35.66	\$48.50
37	\$18.54	\$37.44	\$37.07	\$50.42
38	\$19.26	\$38.91	\$38.52	\$52.39
39	\$20.01	\$40.42	\$40.02	\$54.42
40	\$20.80	\$42.01	\$41.59	\$56.57
41	\$21.61	\$43.65	\$43.21	\$58.77
42	\$22.46	\$45.37	\$44.92	\$61.09
43	\$23.34	\$47.14	\$46.67	\$63.47
44	\$24.25	\$48.99	\$48.50	\$65.97
45	\$25.19	\$50.89	\$50.38	\$68.52
46	\$26.17	\$52.87	\$52.34	\$71.19
47	\$27.20	\$54.94	\$54.39	\$73.97
48	\$28.26	\$57.09	\$56.52	\$76.87
49	\$29.37	\$59.33	\$58.74	\$79.89
50	\$30.52	\$61.66	\$61.05	\$83.02
51	\$31.72	\$64.07	\$63.44	\$86.27
52	\$32.95	\$66.57	\$65.91	\$89.64
53	\$34.23	\$69.15	\$68.47	\$93.12
54	\$35.58	\$71.87	\$71.16	\$96.77
55	\$36.96	\$74.67	\$73.93	\$100.54
56	\$38.42	\$77.60	\$76.83	\$104.49
57	\$39.91	\$80.62	\$79.82	\$108.55
58	\$41.47	\$83.76	\$82.93	\$112.79
59	\$43.09	\$87.03	\$86.17	\$117.20
60	\$44.77	\$90.44	\$89.54	\$121.78
61	\$46.52	\$93.97	\$93.04	\$126.54
62	\$46.52	\$93.97	\$93.04	\$126.54
63	\$46.52	\$93.97	\$93.04	\$126.54
64	\$46.52	\$93.97	\$93.04	\$126.54
65	\$46.52	\$93.97	\$93.04	\$126.54
>65 Non-Medicare Eligible	\$46.52	\$93.97	\$93.04	\$126.54
>65 Medicare Eligible **	\$46.52	\$93.97	\$93.04	\$126.54

**not available to new sales

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, non-Medigap Business - PPO/BluePreferred - Prescription Drug Card Rider
District of Columbia - PPACA
HIPAA Standard Product (open)
Proposed Monthly Premium Rates Effective 7/1/2013

Deductible	=	\$100
Acute : 30 Day Supply, Copay	=	\$10 Generic, \$25 Formulary Brand, \$45 Nonformulary
Maintenance : 31 to 60 Day Supply, Copay	=	\$20 Generic, \$50 Formulary Brand, \$90 Nonformulary
Maintenance : 61 to 90 Day Supply, Copay	=	\$30 Generic, \$75 Formulary Brand, \$135 Nonformulary
Annual Benefits Maximum	=	Unlimited
 Base Rate	=	 \$142.35

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$78.29			
6-18	\$69.75	\$140.90	\$139.50	\$189.72
19-20	\$103.49	\$209.05	\$206.98	\$281.49
21	\$103.49	\$209.05	\$206.98	\$281.49
22	\$103.49	\$209.05	\$206.98	\$281.49
23	\$103.49	\$209.05	\$206.98	\$281.49
24	\$103.49	\$209.05	\$206.98	\$281.49
25	\$103.49	\$209.05	\$206.98	\$281.49
26	\$103.49	\$209.05	\$206.98	\$281.49
27	\$103.49	\$209.05	\$206.98	\$281.49
28	\$103.49	\$209.05	\$206.98	\$281.49
29	\$103.49	\$209.05	\$206.98	\$281.49
30	\$103.49	\$209.05	\$206.98	\$281.49
31	\$103.49	\$209.05	\$206.98	\$281.49
32	\$103.49	\$209.05	\$206.98	\$281.49
33	\$106.19	\$214.51	\$212.39	\$288.85
34	\$110.32	\$222.85	\$220.64	\$300.07
35	\$114.59	\$231.48	\$229.18	\$311.69
36	\$119.00	\$240.39	\$238.01	\$323.69
37	\$123.70	\$249.88	\$247.40	\$336.47
38	\$128.54	\$259.65	\$257.08	\$349.63
39	\$133.52	\$269.72	\$267.05	\$363.19
40	\$138.79	\$280.36	\$277.58	\$377.51
41	\$144.20	\$291.29	\$288.40	\$392.23
42	\$149.89	\$302.79	\$299.79	\$407.71
43	\$155.73	\$314.58	\$311.46	\$423.59
44	\$161.85	\$326.94	\$323.70	\$440.24
45	\$168.12	\$339.59	\$336.23	\$457.27
46	\$174.66	\$352.82	\$349.33	\$475.08
47	\$181.50	\$366.62	\$362.99	\$493.67
48	\$188.61	\$381.00	\$377.23	\$513.03
49	\$196.02	\$395.95	\$392.03	\$533.16
50	\$203.70	\$411.48	\$407.41	\$554.07
51	\$211.67	\$427.58	\$423.35	\$575.75
52	\$219.93	\$444.26	\$439.86	\$598.21
53	\$228.47	\$461.51	\$456.94	\$621.44
54	\$237.44	\$479.63	\$474.88	\$645.84
55	\$246.69	\$498.32	\$493.39	\$671.00
56	\$256.37	\$517.87	\$512.74	\$697.33
57	\$266.34	\$538.00	\$532.67	\$724.44
58	\$276.73	\$558.99	\$553.46	\$752.70
59	\$287.55	\$580.84	\$575.09	\$782.13
60	\$298.79	\$603.56	\$597.59	\$812.72
61	\$310.47	\$627.14	\$620.93	\$844.47
62	\$310.47	\$627.14	\$620.93	\$844.47
63	\$310.47	\$627.14	\$620.93	\$844.47
64	\$310.47	\$627.14	\$620.93	\$844.47
65	\$310.47	\$627.14	\$620.93	\$844.47
Over 65	\$310.47	\$627.14	\$620.93	\$844.47

**not available to new sales

BSBS Code RW16

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, non-Medigap Business - PPO/BluePreferred - Prescription Drug Card Rider
District of Columbia
HIPAA Old Standard Product (Closed) - Grandfathered
Proposed Monthly Premium Rates Effective 7/1/2013

Deductible = \$100
RETAIL (Acute) : 34 Day Supply, Copay = \$10 Generic, \$20 Brand Name
RETAIL (Maintenance) : 35 to 102 Day Supply, Copay = \$20 Generic, \$40 Brand Name
MAIL ORDER: Up to 102 Day Supply, Copay = \$20 Generic, \$40 Brand Name
Annual Benefits Maximum = \$1,500 (100% member coinsurance thereafter)

Base Rate = **\$187.97**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
<21	\$136.65	\$276.04	\$273.31	\$371.70
21	\$136.65	\$276.04	\$273.31	\$371.70
22	\$136.65	\$276.04	\$273.31	\$371.70
23	\$136.65	\$276.04	\$273.31	\$371.70
24	\$136.65	\$276.04	\$273.31	\$371.70
25	\$136.65	\$276.04	\$273.31	\$371.70
26	\$136.65	\$276.04	\$273.31	\$371.70
27	\$136.65	\$276.04	\$273.31	\$371.70
28	\$136.65	\$276.04	\$273.31	\$371.70
29	\$136.65	\$276.04	\$273.31	\$371.70
30	\$136.65	\$276.04	\$273.31	\$371.70
31	\$136.65	\$276.04	\$273.31	\$371.70
32	\$136.65	\$276.04	\$273.31	\$371.70
33	\$140.23	\$283.26	\$280.45	\$381.41
34	\$145.68	\$294.27	\$291.35	\$396.24
35	\$151.32	\$305.66	\$302.63	\$411.58
36	\$157.14	\$317.43	\$314.29	\$427.43
37	\$163.35	\$329.96	\$326.69	\$444.30
38	\$169.74	\$342.87	\$339.47	\$461.68
39	\$176.32	\$356.16	\$352.63	\$479.58
40	\$183.27	\$370.21	\$366.54	\$498.50
41	\$190.41	\$384.64	\$380.83	\$517.93
42	\$197.93	\$399.82	\$395.86	\$538.38
43	\$205.64	\$415.39	\$411.28	\$559.34
44	\$213.72	\$431.72	\$427.44	\$581.32
45	\$221.99	\$448.42	\$443.99	\$603.82
46	\$230.64	\$465.89	\$461.28	\$627.34
47	\$239.66	\$484.12	\$479.32	\$651.88
48	\$249.06	\$503.10	\$498.12	\$677.44
49	\$258.83	\$522.85	\$517.67	\$704.03
50	\$268.99	\$543.35	\$537.97	\$731.64
51	\$279.51	\$564.61	\$559.02	\$760.27
52	\$290.41	\$586.64	\$580.83	\$789.93
53	\$301.69	\$609.42	\$603.38	\$820.60
54	\$313.53	\$633.34	\$627.07	\$852.81
55	\$325.75	\$658.02	\$651.50	\$886.05
56	\$338.53	\$683.84	\$677.07	\$920.81
57	\$351.69	\$710.42	\$703.38	\$956.60
58	\$365.41	\$738.14	\$730.83	\$993.93
59	\$379.70	\$766.99	\$759.40	\$1,032.78
60	\$394.55	\$796.99	\$789.10	\$1,073.17
61	\$409.96	\$828.12	\$819.93	\$1,115.10
62	\$409.96	\$828.12	\$819.93	\$1,115.10
63	\$409.96	\$828.12	\$819.93	\$1,115.10
64	\$409.96	\$828.12	\$819.93	\$1,115.10
65	\$409.96	\$828.12	\$819.93	\$1,115.10
Over 65	\$409.96	\$828.12	\$819.93	\$1,115.10

**not available to new sales

BSBS Code RW13

GHMSI dba CareFirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$100 Ded 90% Coins
 Proposed Monthly Premium Rates Effective 10/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$100	\$300
90% / 10%	70% / 30%
\$2,500	\$5,000

Base Rate **\$445.10**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$244.81			
6-18	\$218.10	\$440.56	\$436.20	\$593.23
19-20	\$323.59	\$653.65	\$647.18	\$880.16
21	\$323.59	\$653.65	\$647.18	\$880.16
22	\$323.59	\$653.65	\$647.18	\$880.16
23	\$323.59	\$653.65	\$647.18	\$880.16
24	\$323.59	\$653.65	\$647.18	\$880.16
25	\$323.59	\$653.65	\$647.18	\$880.16
26	\$323.59	\$653.65	\$647.18	\$880.16
27	\$323.59	\$653.65	\$647.18	\$880.16
28	\$323.59	\$653.65	\$647.18	\$880.16
29	\$323.59	\$653.65	\$647.18	\$880.16
30	\$323.59	\$653.65	\$647.18	\$880.16
31	\$323.59	\$653.65	\$647.18	\$880.16
32	\$323.59	\$653.65	\$647.18	\$880.16
33	\$332.04	\$670.73	\$664.09	\$903.16
34	\$344.95	\$696.80	\$689.91	\$938.27
35	\$358.31	\$723.78	\$716.61	\$974.59
36	\$372.10	\$751.65	\$744.21	\$1,012.12
37	\$386.79	\$781.32	\$773.58	\$1,052.07
38	\$401.93	\$811.89	\$803.85	\$1,093.24
39	\$417.50	\$843.36	\$835.01	\$1,135.61
40	\$433.97	\$876.62	\$867.95	\$1,180.41
41	\$450.89	\$910.79	\$901.77	\$1,226.41
42	\$468.69	\$946.75	\$937.38	\$1,274.84
43	\$486.94	\$983.62	\$973.88	\$1,324.48
44	\$506.08	\$1,022.28	\$1,012.16	\$1,376.53
45	\$525.66	\$1,061.84	\$1,051.33	\$1,429.80
46	\$546.14	\$1,103.20	\$1,092.28	\$1,485.49
47	\$567.50	\$1,146.36	\$1,135.01	\$1,543.61
48	\$589.76	\$1,191.31	\$1,179.52	\$1,604.14
49	\$612.90	\$1,238.06	\$1,225.81	\$1,667.10
50	\$636.94	\$1,286.61	\$1,273.88	\$1,732.47
51	\$661.86	\$1,336.96	\$1,323.73	\$1,800.27
52	\$687.68	\$1,389.11	\$1,375.36	\$1,870.49
53	\$714.39	\$1,443.06	\$1,428.77	\$1,943.13
54	\$742.43	\$1,499.70	\$1,484.85	\$2,019.40
55	\$771.36	\$1,558.14	\$1,542.72	\$2,098.09
56	\$801.63	\$1,619.28	\$1,603.25	\$2,180.42
57	\$832.78	\$1,682.22	\$1,665.56	\$2,265.17
58	\$865.27	\$1,747.85	\$1,730.55	\$2,353.55
59	\$899.10	\$1,816.19	\$1,798.20	\$2,445.56
60	\$934.26	\$1,887.22	\$1,868.53	\$2,541.20
61	\$970.76	\$1,960.94	\$1,941.53	\$2,640.48
62	\$970.76	\$1,960.94	\$1,941.53	\$2,640.48
63	\$970.76	\$1,960.94	\$1,941.53	\$2,640.48
64	\$970.76	\$1,960.94	\$1,941.53	\$2,640.48
65	\$970.76	\$1,960.94	\$1,941.53	\$2,640.48
>65 Non-Medicare Eligible	\$970.76	\$1,960.94	\$1,941.53	\$2,640.48
>65 Medicare Eligible **	\$970.76	\$1,960.94	\$1,941.53	\$2,640.48

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$300 Ded 90% Coins
 Proposed Monthly Premium Rates Effective 10/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$300	\$600
90% / 10%	70% / 30%
\$2,500	\$5,000

Base Rate **\$359.65**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$197.81			
6-18	\$176.23	\$355.98	\$352.46	\$479.34
19-20	\$261.47	\$528.16	\$522.93	\$711.19
21	\$261.47	\$528.16	\$522.93	\$711.19
22	\$261.47	\$528.16	\$522.93	\$711.19
23	\$261.47	\$528.16	\$522.93	\$711.19
24	\$261.47	\$528.16	\$522.93	\$711.19
25	\$261.47	\$528.16	\$522.93	\$711.19
26	\$261.47	\$528.16	\$522.93	\$711.19
27	\$261.47	\$528.16	\$522.93	\$711.19
28	\$261.47	\$528.16	\$522.93	\$711.19
29	\$261.47	\$528.16	\$522.93	\$711.19
30	\$261.47	\$528.16	\$522.93	\$711.19
31	\$261.47	\$528.16	\$522.93	\$711.19
32	\$261.47	\$528.16	\$522.93	\$711.19
33	\$268.30	\$541.96	\$536.60	\$729.77
34	\$278.73	\$563.03	\$557.46	\$758.14
35	\$289.52	\$584.83	\$579.04	\$787.49
36	\$300.67	\$607.35	\$601.33	\$817.82
37	\$312.54	\$631.32	\$625.07	\$850.10
38	\$324.76	\$656.02	\$649.53	\$883.36
39	\$337.35	\$681.45	\$674.70	\$917.60
40	\$350.66	\$708.33	\$701.32	\$953.79
41	\$364.33	\$735.94	\$728.65	\$990.97
42	\$378.71	\$765.00	\$757.42	\$1,030.10
43	\$393.46	\$794.78	\$786.91	\$1,070.20
44	\$408.92	\$826.02	\$817.84	\$1,112.27
45	\$424.75	\$857.99	\$849.49	\$1,155.31
46	\$441.29	\$891.41	\$882.58	\$1,200.31
47	\$458.55	\$926.28	\$917.11	\$1,247.27
48	\$476.54	\$962.60	\$953.07	\$1,296.18
49	\$495.24	\$1,000.38	\$990.48	\$1,347.05
50	\$514.66	\$1,039.61	\$1,029.32	\$1,399.87
51	\$534.80	\$1,080.30	\$1,069.60	\$1,454.65
52	\$555.66	\$1,122.43	\$1,111.32	\$1,511.39
53	\$577.24	\$1,166.02	\$1,154.48	\$1,570.09
54	\$599.90	\$1,211.79	\$1,199.79	\$1,631.72
55	\$623.27	\$1,259.01	\$1,246.55	\$1,695.30
56	\$647.73	\$1,308.41	\$1,295.46	\$1,761.82
57	\$672.91	\$1,359.27	\$1,345.81	\$1,830.30
58	\$699.16	\$1,412.30	\$1,398.32	\$1,901.71
59	\$726.49	\$1,467.52	\$1,452.99	\$1,976.06
60	\$754.91	\$1,524.91	\$1,509.81	\$2,053.34
61	\$784.40	\$1,584.48	\$1,568.79	\$2,133.56
62	\$784.40	\$1,584.48	\$1,568.79	\$2,133.56
63	\$784.40	\$1,584.48	\$1,568.79	\$2,133.56
64	\$784.40	\$1,584.48	\$1,568.79	\$2,133.56
65	\$784.40	\$1,584.48	\$1,568.79	\$2,133.56
>65 Non-Medicare Eligible	\$784.40	\$1,584.48	\$1,568.79	\$2,133.56
>65 Medicare Eligible **	\$784.40	\$1,584.48	\$1,568.79	\$2,133.56

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba CareFirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$300 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 10/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$300	\$600
80% / 20%	60% / 40%
\$2,500	\$5,000

Base Rate **\$344.55**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$189.50			
6-18	\$168.83	\$341.04	\$337.66	\$459.22
19-20	\$250.49	\$505.99	\$500.98	\$681.33
21	\$250.49	\$505.99	\$500.98	\$681.33
22	\$250.49	\$505.99	\$500.98	\$681.33
23	\$250.49	\$505.99	\$500.98	\$681.33
24	\$250.49	\$505.99	\$500.98	\$681.33
25	\$250.49	\$505.99	\$500.98	\$681.33
26	\$250.49	\$505.99	\$500.98	\$681.33
27	\$250.49	\$505.99	\$500.98	\$681.33
28	\$250.49	\$505.99	\$500.98	\$681.33
29	\$250.49	\$505.99	\$500.98	\$681.33
30	\$250.49	\$505.99	\$500.98	\$681.33
31	\$250.49	\$505.99	\$500.98	\$681.33
32	\$250.49	\$505.99	\$500.98	\$681.33
33	\$257.03	\$519.21	\$514.07	\$699.13
34	\$267.03	\$539.39	\$534.05	\$726.31
35	\$277.36	\$560.27	\$554.73	\$754.43
36	\$288.04	\$581.85	\$576.09	\$783.48
37	\$299.41	\$604.82	\$598.83	\$814.41
38	\$311.13	\$628.48	\$622.26	\$846.27
39	\$323.19	\$652.84	\$646.38	\$879.07
40	\$335.94	\$678.59	\$671.87	\$913.75
41	\$349.03	\$705.04	\$698.06	\$949.36
42	\$362.81	\$732.88	\$725.62	\$986.85
43	\$376.94	\$761.41	\$753.88	\$1,025.27
44	\$391.75	\$791.34	\$783.51	\$1,065.57
45	\$406.91	\$821.97	\$813.83	\$1,106.80
46	\$422.76	\$853.98	\$845.53	\$1,149.91
47	\$439.30	\$887.39	\$878.60	\$1,194.90
48	\$456.53	\$922.19	\$913.06	\$1,241.76
49	\$474.45	\$958.38	\$948.89	\$1,290.49
50	\$493.05	\$995.96	\$986.10	\$1,341.10
51	\$512.35	\$1,034.94	\$1,024.69	\$1,393.58
52	\$532.33	\$1,075.31	\$1,064.66	\$1,447.94
53	\$553.00	\$1,117.07	\$1,106.01	\$1,504.17
54	\$574.71	\$1,160.91	\$1,149.42	\$1,563.21
55	\$597.11	\$1,206.15	\$1,194.21	\$1,624.13
56	\$620.53	\$1,253.48	\$1,241.07	\$1,687.85
57	\$644.65	\$1,302.20	\$1,289.31	\$1,753.46
58	\$669.81	\$1,353.01	\$1,339.61	\$1,821.87
59	\$695.99	\$1,405.90	\$1,391.98	\$1,893.10
60	\$723.21	\$1,460.89	\$1,446.42	\$1,967.13
61	\$751.46	\$1,517.96	\$1,502.93	\$2,043.98
62	\$751.46	\$1,517.96	\$1,502.93	\$2,043.98
63	\$751.46	\$1,517.96	\$1,502.93	\$2,043.98
64	\$751.46	\$1,517.96	\$1,502.93	\$2,043.98
65	\$751.46	\$1,517.96	\$1,502.93	\$2,043.98
>65 Non-Medicare Eligible	\$751.46	\$1,517.96	\$1,502.93	\$2,043.98
>65 Medicare Eligible **	\$751.46	\$1,517.96	\$1,502.93	\$2,043.98

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$500 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 10/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$500	\$1,000
80% / 20%	60% / 40%
\$2,500	\$5,000

Base Rate **\$328.92**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$180.91			
6-18	\$161.17	\$325.57	\$322.34	\$438.38
19-20	\$239.12	\$483.03	\$478.25	\$650.42
21	\$239.12	\$483.03	\$478.25	\$650.42
22	\$239.12	\$483.03	\$478.25	\$650.42
23	\$239.12	\$483.03	\$478.25	\$650.42
24	\$239.12	\$483.03	\$478.25	\$650.42
25	\$239.12	\$483.03	\$478.25	\$650.42
26	\$239.12	\$483.03	\$478.25	\$650.42
27	\$239.12	\$483.03	\$478.25	\$650.42
28	\$239.12	\$483.03	\$478.25	\$650.42
29	\$239.12	\$483.03	\$478.25	\$650.42
30	\$239.12	\$483.03	\$478.25	\$650.42
31	\$239.12	\$483.03	\$478.25	\$650.42
32	\$239.12	\$483.03	\$478.25	\$650.42
33	\$245.37	\$495.66	\$490.75	\$667.42
34	\$254.91	\$514.92	\$509.83	\$693.36
35	\$264.78	\$534.86	\$529.56	\$720.20
36	\$274.98	\$555.45	\$549.95	\$747.94
37	\$285.83	\$577.38	\$571.66	\$777.46
38	\$297.01	\$599.97	\$594.03	\$807.88
39	\$308.53	\$623.22	\$617.05	\$839.19
40	\$320.70	\$647.81	\$641.39	\$872.30
41	\$333.20	\$673.06	\$666.39	\$906.29
42	\$346.35	\$699.63	\$692.71	\$942.08
43	\$359.84	\$726.87	\$719.68	\$978.76
44	\$373.98	\$755.44	\$747.96	\$1,017.23
45	\$388.45	\$784.68	\$776.91	\$1,056.60
46	\$403.58	\$815.24	\$807.17	\$1,097.75
47	\$419.37	\$847.13	\$838.75	\$1,140.69
48	\$435.82	\$880.35	\$871.64	\$1,185.43
49	\$452.92	\$914.90	\$905.85	\$1,231.95
50	\$470.68	\$950.78	\$941.37	\$1,280.26
51	\$489.10	\$987.99	\$978.21	\$1,330.36
52	\$508.18	\$1,026.53	\$1,016.36	\$1,382.25
53	\$527.92	\$1,066.39	\$1,055.83	\$1,435.93
54	\$548.64	\$1,108.25	\$1,097.28	\$1,492.30
55	\$570.02	\$1,151.44	\$1,140.04	\$1,550.45
56	\$592.38	\$1,196.62	\$1,184.77	\$1,611.29
57	\$615.41	\$1,243.13	\$1,230.82	\$1,673.91
58	\$639.42	\$1,291.63	\$1,278.84	\$1,739.22
59	\$664.42	\$1,342.13	\$1,328.84	\$1,807.22
60	\$690.40	\$1,394.61	\$1,380.81	\$1,877.90
61	\$717.37	\$1,449.10	\$1,434.75	\$1,951.26
62	\$717.37	\$1,449.10	\$1,434.75	\$1,951.26
63	\$717.37	\$1,449.10	\$1,434.75	\$1,951.26
64	\$717.37	\$1,449.10	\$1,434.75	\$1,951.26
65	\$717.37	\$1,449.10	\$1,434.75	\$1,951.26
>65 Non-Medicare Eligible	\$717.37	\$1,449.10	\$1,434.75	\$1,951.26
>65 Medicare Eligible **	\$717.37	\$1,449.10	\$1,434.75	\$1,951.26

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield

Individual Non-Medigap Business
PPO/BluePreferred - Underwritten Standard Plan - \$750 Ded 80% Coins
Proposed Monthly Premium Rates Effective 10/1/2013

District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*	DEDUCTIBLE	<u>In Network</u>	<u>Out-Of-Network</u>
NO MATERNITY**	COINSURANCE	\$750	\$1,500
ANNUAL PHYSICALS	OUT-OF-POCKET MAXIMUM	80% / 20%	60% / 40%
		\$3,500	\$7,000

Base Rate **\$277.83**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$152.81			
6-18	\$136.14	\$275.00	\$272.27	\$370.29
19-20	\$201.98	\$408.00	\$403.96	\$549.39
21	\$201.98	\$408.00	\$403.96	\$549.39
22	\$201.98	\$408.00	\$403.96	\$549.39
23	\$201.98	\$408.00	\$403.96	\$549.39
24	\$201.98	\$408.00	\$403.96	\$549.39
25	\$201.98	\$408.00	\$403.96	\$549.39
26	\$201.98	\$408.00	\$403.96	\$549.39
27	\$201.98	\$408.00	\$403.96	\$549.39
28	\$201.98	\$408.00	\$403.96	\$549.39
29	\$201.98	\$408.00	\$403.96	\$549.39
30	\$201.98	\$408.00	\$403.96	\$549.39
31	\$201.98	\$408.00	\$403.96	\$549.39
32	\$201.98	\$408.00	\$403.96	\$549.39
33	\$207.26	\$418.67	\$414.52	\$563.75
34	\$215.32	\$434.94	\$430.64	\$585.67
35	\$223.65	\$451.78	\$447.31	\$608.34
36	\$232.27	\$469.18	\$464.53	\$631.76
37	\$241.43	\$487.70	\$482.87	\$656.70
38	\$250.88	\$506.78	\$501.76	\$682.39
39	\$260.60	\$526.42	\$521.21	\$708.84
40	\$270.88	\$547.19	\$541.77	\$736.81
41	\$281.44	\$568.51	\$562.88	\$765.52
42	\$292.55	\$590.96	\$585.11	\$795.75
43	\$303.95	\$613.97	\$607.89	\$826.73
44	\$315.89	\$638.10	\$631.79	\$859.23
45	\$328.12	\$662.80	\$656.23	\$892.48
46	\$340.90	\$688.61	\$681.79	\$927.24
47	\$354.23	\$715.55	\$708.47	\$963.51
48	\$368.12	\$743.61	\$736.25	\$1,001.30
49	\$382.57	\$772.80	\$765.14	\$1,040.60
50	\$397.57	\$803.10	\$795.15	\$1,081.40
51	\$413.13	\$834.53	\$826.27	\$1,123.72
52	\$429.25	\$867.08	\$858.49	\$1,167.55
53	\$445.92	\$900.75	\$891.83	\$1,212.89
54	\$463.42	\$936.11	\$926.84	\$1,260.50
55	\$481.48	\$972.59	\$962.96	\$1,309.62
56	\$500.37	\$1,010.75	\$1,000.74	\$1,361.01
57	\$519.82	\$1,050.04	\$1,039.64	\$1,413.91
58	\$540.10	\$1,091.01	\$1,080.20	\$1,469.08
59	\$561.22	\$1,133.66	\$1,122.43	\$1,526.51
60	\$583.17	\$1,177.99	\$1,166.33	\$1,586.21
61	\$605.95	\$1,224.01	\$1,211.89	\$1,648.18
62	\$605.95	\$1,224.01	\$1,211.89	\$1,648.18
63	\$605.95	\$1,224.01	\$1,211.89	\$1,648.18
64	\$605.95	\$1,224.01	\$1,211.89	\$1,648.18
65	\$605.95	\$1,224.01	\$1,211.89	\$1,648.18
>65 Non-Medicare Eligible	\$605.95	\$1,224.01	\$1,211.89	\$1,648.18
>65 Medicare Eligible **	\$605.95	\$1,224.01	\$1,211.89	\$1,648.18

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield

Individual Non-Medigap Business
 PPO/BluePreferred - Underwritten Standard Plan - \$2500 Ded 80% Coins
 Proposed Monthly Premium Rates Effective 10/1/2013

District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*	DEDUCTIBLE	<u>In Network</u>	<u>Out-Of-Network</u>
NO MATERNITY**	COINSURANCE	\$2,500	\$5,000
ANNUAL PHYSICALS	OUT-OF-POCKET MAXIMUM	80% / 20%	60% / 40%
		\$5,000	\$7,500

Base Rate **\$190.80**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$104.94			
6-18	\$93.49	\$188.85	\$186.98	\$254.30
19-20	\$138.71	\$280.20	\$277.42	\$377.30
21	\$138.71	\$280.20	\$277.42	\$377.30
22	\$138.71	\$280.20	\$277.42	\$377.30
23	\$138.71	\$280.20	\$277.42	\$377.30
24	\$138.71	\$280.20	\$277.42	\$377.30
25	\$138.71	\$280.20	\$277.42	\$377.30
26	\$138.71	\$280.20	\$277.42	\$377.30
27	\$138.71	\$280.20	\$277.42	\$377.30
28	\$138.71	\$280.20	\$277.42	\$377.30
29	\$138.71	\$280.20	\$277.42	\$377.30
30	\$138.71	\$280.20	\$277.42	\$377.30
31	\$138.71	\$280.20	\$277.42	\$377.30
32	\$138.71	\$280.20	\$277.42	\$377.30
33	\$142.34	\$287.52	\$284.67	\$387.16
34	\$147.87	\$298.70	\$295.74	\$402.21
35	\$153.59	\$310.26	\$307.19	\$417.78
36	\$159.51	\$322.21	\$319.02	\$433.86
37	\$165.81	\$334.93	\$331.61	\$450.99
38	\$172.29	\$348.03	\$344.58	\$468.64
39	\$178.97	\$361.52	\$357.94	\$486.80
40	\$186.03	\$375.78	\$372.06	\$506.00
41	\$193.28	\$390.43	\$386.56	\$525.72
42	\$200.91	\$405.84	\$401.82	\$546.48
43	\$208.74	\$421.65	\$417.47	\$567.76
44	\$216.94	\$438.22	\$433.88	\$590.08
45	\$225.33	\$455.18	\$450.67	\$612.91
46	\$234.11	\$472.91	\$468.22	\$636.78
47	\$243.27	\$491.41	\$486.54	\$661.69
48	\$252.81	\$510.68	\$505.62	\$687.64
49	\$262.73	\$530.72	\$525.46	\$714.63
50	\$273.03	\$551.53	\$546.07	\$742.65
51	\$283.72	\$573.11	\$567.44	\$771.72
52	\$294.79	\$595.47	\$589.57	\$801.82
53	\$306.23	\$618.59	\$612.47	\$832.96
54	\$318.25	\$642.87	\$636.51	\$865.65
55	\$330.66	\$667.93	\$661.31	\$899.39
56	\$343.63	\$694.13	\$687.26	\$934.68
57	\$356.99	\$721.11	\$713.97	\$971.00
58	\$370.92	\$749.25	\$741.83	\$1,008.89
59	\$385.42	\$778.54	\$770.83	\$1,048.33
60	\$400.49	\$808.99	\$800.98	\$1,089.33
61	\$416.13	\$840.59	\$832.27	\$1,131.89
62	\$416.13	\$840.59	\$832.27	\$1,131.89
63	\$416.13	\$840.59	\$832.27	\$1,131.89
64	\$416.13	\$840.59	\$832.27	\$1,131.89
65	\$416.13	\$840.59	\$832.27	\$1,131.89
>65 Non-Medicare Eligible	\$416.13	\$840.59	\$832.27	\$1,131.89
>65 Medicare Eligible **	\$416.13	\$840.59	\$832.27	\$1,131.89

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - To include Maternity benefit add \$126 to the monthly premium rate

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan - \$2500 Ded
Proposed Monthly Premium Rates Effective 10/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$2,500	\$5,000
70% / 30%	60% / 40%
\$5,000	\$10,000

Base Rate **\$196.27**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$107.95			
6-18	\$96.17	\$194.27	\$192.34	\$261.59
19-20	\$142.69	\$288.23	\$285.38	\$388.11
21	\$142.69	\$288.23	\$285.38	\$388.11
22	\$142.69	\$288.23	\$285.38	\$388.11
23	\$142.69	\$288.23	\$285.38	\$388.11
24	\$142.69	\$288.23	\$285.38	\$388.11
25	\$142.69	\$288.23	\$285.38	\$388.11
26	\$142.69	\$288.23	\$285.38	\$388.11
27	\$142.69	\$288.23	\$285.38	\$388.11
28	\$142.69	\$288.23	\$285.38	\$388.11
29	\$142.69	\$288.23	\$285.38	\$388.11
30	\$142.69	\$288.23	\$285.38	\$388.11
31	\$142.69	\$288.23	\$285.38	\$388.11
32	\$142.69	\$288.23	\$285.38	\$388.11
33	\$146.42	\$295.76	\$292.83	\$398.26
34	\$152.11	\$307.26	\$304.22	\$413.74
35	\$158.00	\$319.15	\$315.99	\$429.75
36	\$164.08	\$331.45	\$328.16	\$446.30
37	\$170.56	\$344.53	\$341.12	\$463.92
38	\$177.23	\$358.01	\$354.46	\$482.07
39	\$184.10	\$371.88	\$368.20	\$500.76
40	\$191.36	\$386.55	\$382.73	\$520.51
41	\$198.82	\$401.62	\$397.64	\$540.79
42	\$206.67	\$417.48	\$413.34	\$562.15
43	\$214.72	\$433.73	\$429.44	\$584.04
44	\$223.16	\$450.78	\$446.32	\$606.99
45	\$231.79	\$468.23	\$463.59	\$630.48
46	\$240.82	\$486.46	\$481.65	\$655.04
47	\$250.24	\$505.49	\$500.49	\$680.66
48	\$260.06	\$525.32	\$520.12	\$707.36
49	\$270.26	\$545.93	\$540.53	\$735.12
50	\$280.86	\$567.34	\$561.72	\$763.95
51	\$291.85	\$589.54	\$583.71	\$793.84
52	\$303.24	\$612.54	\$606.47	\$824.81
53	\$315.01	\$636.33	\$630.03	\$856.84
54	\$327.38	\$661.30	\$654.76	\$890.47
55	\$340.14	\$687.07	\$680.27	\$925.17
56	\$353.48	\$714.03	\$706.96	\$961.47
57	\$367.22	\$741.79	\$734.44	\$998.84
58	\$381.55	\$770.73	\$763.10	\$1,037.81
59	\$396.47	\$800.86	\$792.93	\$1,078.39
60	\$411.97	\$832.18	\$823.94	\$1,120.56
61	\$428.06	\$864.69	\$856.13	\$1,164.34
62	\$428.06	\$864.69	\$856.13	\$1,164.34
63	\$428.06	\$864.69	\$856.13	\$1,164.34
64	\$428.06	\$864.69	\$856.13	\$1,164.34
65	\$428.06	\$864.69	\$856.13	\$1,164.34
>65 Non-Medicare Eligible	\$428.06	\$864.69	\$856.13	\$1,164.34
>65 Medicare Eligible **	\$428.06	\$864.69	\$856.13	\$1,164.34

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** Maternity coverage, with Deductible and then Coinsurance, may be added to any subscriber's coverage for an additional rate of \$126 per month.

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan - \$5000 Ded
Proposed Monthly Premium Rates Effective 10/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$5,000	\$10,000
100% / 0%	80% / 20%
\$5,000	\$12,500

Base Rate **\$171.97**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$94.58			
6-18	\$84.27	\$170.22	\$168.53	\$229.20
19-20	\$125.02	\$252.54	\$250.04	\$340.06
21	\$125.02	\$252.54	\$250.04	\$340.06
22	\$125.02	\$252.54	\$250.04	\$340.06
23	\$125.02	\$252.54	\$250.04	\$340.06
24	\$125.02	\$252.54	\$250.04	\$340.06
25	\$125.02	\$252.54	\$250.04	\$340.06
26	\$125.02	\$252.54	\$250.04	\$340.06
27	\$125.02	\$252.54	\$250.04	\$340.06
28	\$125.02	\$252.54	\$250.04	\$340.06
29	\$125.02	\$252.54	\$250.04	\$340.06
30	\$125.02	\$252.54	\$250.04	\$340.06
31	\$125.02	\$252.54	\$250.04	\$340.06
32	\$125.02	\$252.54	\$250.04	\$340.06
33	\$128.29	\$259.15	\$256.58	\$348.95
34	\$133.28	\$269.22	\$266.55	\$362.51
35	\$138.44	\$279.64	\$276.87	\$376.55
36	\$143.77	\$290.41	\$287.53	\$391.05
37	\$149.44	\$301.87	\$298.88	\$406.48
38	\$155.29	\$313.68	\$310.58	\$422.39
39	\$161.31	\$325.84	\$322.62	\$438.76
40	\$167.67	\$338.69	\$335.34	\$456.06
41	\$174.21	\$351.90	\$348.41	\$473.84
42	\$181.08	\$365.79	\$362.17	\$492.55
43	\$188.14	\$380.03	\$376.27	\$511.73
44	\$195.53	\$394.97	\$391.06	\$531.84
45	\$203.10	\$410.26	\$406.19	\$552.42
46	\$211.01	\$426.23	\$422.01	\$573.94
47	\$219.26	\$442.91	\$438.52	\$596.39
48	\$227.86	\$460.28	\$455.72	\$619.78
49	\$236.80	\$478.34	\$473.61	\$644.10
50	\$246.09	\$497.10	\$492.18	\$669.36
51	\$255.72	\$516.55	\$511.44	\$695.56
52	\$265.69	\$536.70	\$531.39	\$722.69
53	\$276.01	\$557.54	\$552.02	\$750.75
54	\$286.85	\$579.43	\$573.69	\$780.22
55	\$298.02	\$602.01	\$596.05	\$810.63
56	\$309.72	\$625.63	\$619.44	\$842.43
57	\$321.76	\$649.95	\$643.51	\$875.18
58	\$334.31	\$675.31	\$668.62	\$909.32
59	\$347.38	\$701.71	\$694.76	\$944.87
60	\$360.97	\$729.15	\$721.93	\$981.82
61	\$375.07	\$757.63	\$750.13	\$1,020.18
62	\$375.07	\$757.63	\$750.13	\$1,020.18
63	\$375.07	\$757.63	\$750.13	\$1,020.18
64	\$375.07	\$757.63	\$750.13	\$1,020.18
65	\$375.07	\$757.63	\$750.13	\$1,020.18
>65 Non-Medicare Eligible	\$375.07	\$757.63	\$750.13	\$1,020.18
>65 Medicare Eligible **	\$375.07	\$757.63	\$750.13	\$1,020.18

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** Maternity coverage, with Deductible and then Coinsurance, may be added to any subscriber's coverage for an additional rate of \$126 per month.

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan - \$10000 Ded
Proposed Monthly Premium Rates Effective 10/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 NO MATERNITY**

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$10,000	\$12,500
100% / 0%	80% / 20%
\$10,000	\$15,000

Base Rate **\$124.11**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$68.26			
6-18	\$60.81	\$122.84	\$121.63	\$165.41
19-20	\$90.23	\$182.26	\$180.46	\$245.42
21	\$90.23	\$182.26	\$180.46	\$245.42
22	\$90.23	\$182.26	\$180.46	\$245.42
23	\$90.23	\$182.26	\$180.46	\$245.42
24	\$90.23	\$182.26	\$180.46	\$245.42
25	\$90.23	\$182.26	\$180.46	\$245.42
26	\$90.23	\$182.26	\$180.46	\$245.42
27	\$90.23	\$182.26	\$180.46	\$245.42
28	\$90.23	\$182.26	\$180.46	\$245.42
29	\$90.23	\$182.26	\$180.46	\$245.42
30	\$90.23	\$182.26	\$180.46	\$245.42
31	\$90.23	\$182.26	\$180.46	\$245.42
32	\$90.23	\$182.26	\$180.46	\$245.42
33	\$92.59	\$187.02	\$185.17	\$251.83
34	\$96.19	\$194.29	\$192.37	\$261.62
35	\$99.91	\$201.82	\$199.82	\$271.75
36	\$103.76	\$209.59	\$207.51	\$282.22
37	\$107.85	\$217.86	\$215.70	\$293.36
38	\$112.07	\$226.38	\$224.14	\$304.83
39	\$116.42	\$235.16	\$232.83	\$316.65
40	\$121.01	\$244.43	\$242.01	\$329.14
41	\$125.72	\$253.96	\$251.45	\$341.97
42	\$130.69	\$263.99	\$261.38	\$355.47
43	\$135.78	\$274.27	\$271.55	\$369.31
44	\$141.11	\$285.05	\$282.23	\$383.83
45	\$146.57	\$296.08	\$293.15	\$398.68
46	\$152.28	\$307.61	\$304.57	\$414.21
47	\$158.24	\$319.65	\$316.48	\$430.41
48	\$164.45	\$332.18	\$328.89	\$447.29
49	\$170.90	\$345.22	\$341.80	\$464.85
50	\$177.60	\$358.75	\$355.20	\$483.08
51	\$184.55	\$372.79	\$369.10	\$501.98
52	\$191.75	\$387.33	\$383.50	\$521.56
53	\$199.20	\$402.38	\$398.39	\$541.81
54	\$207.02	\$418.17	\$414.03	\$563.08
55	\$215.08	\$434.47	\$430.17	\$585.02
56	\$223.52	\$451.51	\$447.04	\$607.98
57	\$232.21	\$469.06	\$464.42	\$631.61
58	\$241.27	\$487.37	\$482.54	\$656.25
59	\$250.70	\$506.42	\$501.40	\$681.91
60	\$260.51	\$526.22	\$521.01	\$708.58
61	\$270.68	\$546.78	\$541.37	\$736.26
62	\$270.68	\$546.78	\$541.37	\$736.26
63	\$270.68	\$546.78	\$541.37	\$736.26
64	\$270.68	\$546.78	\$541.37	\$736.26
65	\$270.68	\$546.78	\$541.37	\$736.26
>65 Non-Medicare Eligible	\$270.68	\$546.78	\$541.37	\$736.26
>65 Medicare Eligible **	\$270.68	\$546.78	\$541.37	\$736.26

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

** - Maternity coverage, with Deductible and then Coinsurance, may be added to any subscriber's coverage for an additional rate of \$126 per month.

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 District of Columbia
PPO/BluePreferred - Underwritten HSA Plan - \$1200 Ded
Proposed Monthly Premium Rates Effective 10/1/2013
 District of Columbia - PPACA

Rx and Medical Combined for Ded, OOP Max and Lifetime Max*
 MATERNITY COVERED*

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$1,200	\$2,400
80% / 20%	60% / 40%
\$2,800	\$5,000

Base Rate **\$206.04**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$113.32			
6-18	\$100.96	\$203.94	\$201.92	\$274.61
19-20	\$149.79	\$302.58	\$299.58	\$407.43
21	\$149.79	\$302.58	\$299.58	\$407.43
22	\$149.79	\$302.58	\$299.58	\$407.43
23	\$149.79	\$302.58	\$299.58	\$407.43
24	\$149.79	\$302.58	\$299.58	\$407.43
25	\$149.79	\$302.58	\$299.58	\$407.43
26	\$149.79	\$302.58	\$299.58	\$407.43
27	\$149.79	\$302.58	\$299.58	\$407.43
28	\$149.79	\$302.58	\$299.58	\$407.43
29	\$149.79	\$302.58	\$299.58	\$407.43
30	\$149.79	\$302.58	\$299.58	\$407.43
31	\$149.79	\$302.58	\$299.58	\$407.43
32	\$149.79	\$302.58	\$299.58	\$407.43
33	\$153.71	\$310.49	\$307.41	\$418.08
34	\$159.68	\$322.56	\$319.36	\$434.33
35	\$165.86	\$335.04	\$331.72	\$451.15
36	\$172.25	\$347.94	\$344.50	\$468.52
37	\$179.05	\$361.68	\$358.10	\$487.01
38	\$186.05	\$375.83	\$372.11	\$506.07
39	\$193.27	\$390.40	\$386.53	\$525.68
40	\$200.89	\$405.80	\$401.78	\$546.42
41	\$208.72	\$421.61	\$417.44	\$567.71
42	\$216.96	\$438.26	\$433.92	\$590.13
43	\$225.41	\$455.32	\$450.82	\$613.11
44	\$234.27	\$473.22	\$468.53	\$637.21
45	\$243.33	\$491.53	\$486.67	\$661.87
46	\$252.81	\$510.68	\$505.62	\$687.65
47	\$262.70	\$530.66	\$525.40	\$714.55
48	\$273.00	\$551.47	\$546.01	\$742.57
49	\$283.72	\$573.11	\$567.43	\$771.71
50	\$294.84	\$595.58	\$589.69	\$801.97
51	\$306.38	\$618.89	\$612.76	\$833.36
52	\$318.33	\$643.03	\$636.66	\$865.86
53	\$330.69	\$668.00	\$661.39	\$899.49
54	\$343.67	\$694.22	\$687.35	\$934.80
55	\$357.07	\$721.28	\$714.13	\$971.22
56	\$371.08	\$749.58	\$742.16	\$1,009.33
57	\$385.50	\$778.71	\$771.00	\$1,048.56
58	\$400.54	\$809.09	\$801.08	\$1,089.47
59	\$416.20	\$840.73	\$832.40	\$1,132.07
60	\$432.48	\$873.61	\$864.96	\$1,176.34
61	\$449.37	\$907.73	\$898.75	\$1,222.30
62	\$449.37	\$907.73	\$898.75	\$1,222.30
63	\$449.37	\$907.73	\$898.75	\$1,222.30
64	\$449.37	\$907.73	\$898.75	\$1,222.30
65	\$449.37	\$907.73	\$898.75	\$1,222.30
Over 65	\$449.37	\$907.73	\$898.75	\$1,222.30

\$10 Generic, \$25 Preferred Brand
 \$45 Non-Preferred Brand Copays
 \$1,500 Annual Max

**** - To include Maternity, with:
 Deductible & Coinsurance
 and no per pregnancy
 maximum, add \$126 to the
 monthly premium rate.
 (Covers those maternity
 services not mandated
 by HB 1271, primarily
 professional services.)**

**not available to new sales

BSBS Code P803

GHMSI dba Carefirst BlueCross BlueShield
 Individual Non-Medigap Business
 District of Columbia
PPO/BluePreferred - Underwritten HSA Plan - \$2700 Ded
Proposed Monthly Premium Rates Effective 10/1/2013
 District of Columbia - PPACA

Rx and Medical Combined for Ded, OOP Max and Lifetime Max*
 MATERNITY COVERED*

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$2,700	\$5,400
100% / 0%	80% / 20%
\$3,200	\$6,400

Base Rate **\$152.87**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$84.08			
6-18	\$74.91	\$151.31	\$149.81	\$203.75
19-20	\$111.14	\$224.50	\$222.27	\$302.29
21	\$111.14	\$224.50	\$222.27	\$302.29
22	\$111.14	\$224.50	\$222.27	\$302.29
23	\$111.14	\$224.50	\$222.27	\$302.29
24	\$111.14	\$224.50	\$222.27	\$302.29
25	\$111.14	\$224.50	\$222.27	\$302.29
26	\$111.14	\$224.50	\$222.27	\$302.29
27	\$111.14	\$224.50	\$222.27	\$302.29
28	\$111.14	\$224.50	\$222.27	\$302.29
29	\$111.14	\$224.50	\$222.27	\$302.29
30	\$111.14	\$224.50	\$222.27	\$302.29
31	\$111.14	\$224.50	\$222.27	\$302.29
32	\$111.14	\$224.50	\$222.27	\$302.29
33	\$114.04	\$230.36	\$228.08	\$310.19
34	\$118.47	\$239.32	\$236.95	\$322.25
35	\$123.06	\$248.58	\$246.12	\$334.72
36	\$127.80	\$258.15	\$255.60	\$347.61
37	\$132.84	\$268.34	\$265.69	\$361.34
38	\$138.04	\$278.84	\$276.08	\$375.47
39	\$143.39	\$289.65	\$286.78	\$390.03
40	\$149.05	\$301.08	\$298.10	\$405.41
41	\$154.86	\$312.81	\$309.71	\$421.21
42	\$160.97	\$325.16	\$321.94	\$437.84
43	\$167.24	\$337.82	\$334.48	\$454.89
44	\$173.81	\$351.10	\$347.63	\$472.77
45	\$180.54	\$364.69	\$361.08	\$491.07
46	\$187.57	\$378.89	\$375.14	\$510.19
47	\$194.91	\$393.72	\$389.82	\$530.15
48	\$202.55	\$409.16	\$405.11	\$550.94
49	\$210.50	\$425.21	\$421.00	\$572.57
50	\$218.76	\$441.89	\$437.51	\$595.02
51	\$227.32	\$459.18	\$454.64	\$618.30
52	\$236.18	\$477.09	\$472.37	\$642.42
53	\$245.36	\$495.62	\$490.71	\$667.37
54	\$254.99	\$515.07	\$509.97	\$693.57
55	\$264.92	\$535.15	\$529.85	\$720.59
56	\$275.32	\$556.14	\$550.64	\$748.87
57	\$286.02	\$577.76	\$572.04	\$777.97
58	\$297.18	\$600.30	\$594.36	\$808.33
59	\$308.80	\$623.77	\$617.59	\$839.93
60	\$320.87	\$648.17	\$641.75	\$872.78
61	\$333.41	\$673.49	\$666.82	\$906.87
62	\$333.41	\$673.49	\$666.82	\$906.87
63	\$333.41	\$673.49	\$666.82	\$906.87
64	\$333.41	\$673.49	\$666.82	\$906.87
65	\$333.41	\$673.49	\$666.82	\$906.87
Over 65	\$333.41	\$673.49	\$666.82	\$906.87

\$10 Generic, \$25 Preferred Brand
 \$45 Non-Preferred Brand Copays
 \$1,500 Annual Max

**** - To include Maternity, with:
 Deductible & Coinsurance
 and no per pregnancy
 maximum, add \$126 to the
 monthly premium rate.
 (Covers those maternity
 services not mandated
 by HB 1271, primarily
 professional services.)**

**not available to new sales

BSBS Code P804

GHMSI dba CareFirst BlueCross BlueShield
 Individual Non-Medigap Business
 PPO/BluePreferred - HIPAA Standard Plan - \$100 Ded 90% Coins
 Proposed Monthly Premium Rates Effective 10/1/2013
 District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
 FULL MATERNITY**
 ANNUAL PHYSICALS

DEDUCTIBLE
 COINSURANCE
 OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$100	\$300
90% / 10%	70% / 30%
\$2,500	\$5,000

Base Rate **\$1,439.91**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$791.95			
6-18	\$705.56	\$1,425.22	\$1,411.11	\$1,919.11
19-20	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
21	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
22	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
23	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
24	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
25	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
26	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
27	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
28	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
29	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
30	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
31	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
32	\$1,046.81	\$2,114.57	\$2,093.63	\$2,847.34
33	\$1,074.17	\$2,169.83	\$2,148.35	\$2,921.75
34	\$1,115.93	\$2,254.18	\$2,231.86	\$3,035.33
35	\$1,159.13	\$2,341.44	\$2,318.26	\$3,152.83
36	\$1,203.76	\$2,431.60	\$2,407.53	\$3,274.24
37	\$1,251.28	\$2,527.59	\$2,502.56	\$3,403.49
38	\$1,300.24	\$2,626.48	\$2,600.48	\$3,536.65
39	\$1,350.64	\$2,728.28	\$2,701.27	\$3,673.73
40	\$1,403.91	\$2,835.90	\$2,807.82	\$3,818.64
41	\$1,458.63	\$2,946.43	\$2,917.26	\$3,967.47
42	\$1,516.23	\$3,062.77	\$3,032.45	\$4,124.13
43	\$1,575.26	\$3,182.03	\$3,150.52	\$4,284.71
44	\$1,637.18	\$3,307.10	\$3,274.36	\$4,453.12
45	\$1,700.53	\$3,435.08	\$3,401.07	\$4,625.45
46	\$1,766.77	\$3,568.87	\$3,533.54	\$4,805.61
47	\$1,835.89	\$3,708.49	\$3,671.77	\$4,993.61
48	\$1,907.88	\$3,853.92	\$3,815.76	\$5,189.44
49	\$1,982.76	\$4,005.17	\$3,965.51	\$5,393.10
50	\$2,060.51	\$4,162.23	\$4,121.02	\$5,604.59
51	\$2,141.15	\$4,325.12	\$4,282.29	\$5,823.92
52	\$2,224.66	\$4,493.82	\$4,449.32	\$6,051.08
53	\$2,311.06	\$4,668.33	\$4,622.11	\$6,286.07
54	\$2,401.77	\$4,851.58	\$4,803.54	\$6,532.81
55	\$2,495.36	\$5,040.64	\$4,990.73	\$6,787.39
56	\$2,593.28	\$5,238.42	\$5,186.56	\$7,053.72
57	\$2,694.07	\$5,442.02	\$5,388.14	\$7,327.87
58	\$2,799.19	\$5,654.35	\$5,598.37	\$7,613.78
59	\$2,908.62	\$5,875.41	\$5,817.24	\$7,911.44
60	\$3,022.37	\$6,105.19	\$6,044.74	\$8,220.85
61	\$3,140.44	\$6,343.70	\$6,280.89	\$8,542.01
62	\$3,140.44	\$6,343.70	\$6,280.89	\$8,542.01
63	\$3,140.44	\$6,343.70	\$6,280.89	\$8,542.01
64	\$3,140.44	\$6,343.70	\$6,280.89	\$8,542.01
65	\$3,140.44	\$6,343.70	\$6,280.89	\$8,542.01
Over 65	\$3,140.44	\$6,343.70	\$6,280.89	\$8,542.01

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

**not available to new sales

BSBS Code

P601

GHMSI dba CareFirst BlueCross BlueShield

Individual Non-Medigap Business
PPO/BluePreferred - HIPAA Standard Plan - \$300 Ded 80% Coins
Proposed Monthly Premium Rates Effective 10/1/2013
District of Columbia - PPACA

NO PHARMACY OR MAIL ORDER DRUGS*
NO MATERNITY**
ANNUAL PHYSICALS

DEDUCTIBLE
COINSURANCE
OUT-OF-POCKET MAXIMUM

<u>In Network</u>	<u>Out-Of-Network</u>
\$300	\$500
80% / 20%	60% / 40%
\$2,500	\$5,000

Base Rate **\$923.06**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$507.68			
6-18	\$452.30	\$913.64	\$904.60	\$1,230.25
19-20	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
21	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
22	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
23	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
24	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
25	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
26	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
27	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
28	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
29	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
30	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
31	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
32	\$671.06	\$1,355.55	\$1,342.13	\$1,825.30
33	\$688.60	\$1,390.98	\$1,377.21	\$1,873.00
34	\$715.37	\$1,445.05	\$1,430.74	\$1,945.81
35	\$743.06	\$1,500.99	\$1,486.13	\$2,021.13
36	\$771.68	\$1,558.79	\$1,543.36	\$2,098.96
37	\$802.14	\$1,620.32	\$1,604.28	\$2,181.82
38	\$833.52	\$1,683.72	\$1,667.05	\$2,267.18
39	\$865.83	\$1,748.98	\$1,731.66	\$2,355.06
40	\$899.98	\$1,817.97	\$1,799.97	\$2,447.96
41	\$935.06	\$1,888.82	\$1,870.12	\$2,543.36
42	\$971.98	\$1,963.40	\$1,943.96	\$2,643.79
43	\$1,009.83	\$2,039.85	\$2,019.66	\$2,746.73
44	\$1,049.52	\$2,120.03	\$2,099.04	\$2,854.69
45	\$1,090.13	\$2,202.07	\$2,180.27	\$2,965.16
46	\$1,132.59	\$2,287.84	\$2,265.19	\$3,080.66
47	\$1,176.90	\$2,377.34	\$2,353.80	\$3,201.17
48	\$1,223.05	\$2,470.57	\$2,446.11	\$3,326.71
49	\$1,271.05	\$2,567.53	\$2,542.11	\$3,457.27
50	\$1,320.90	\$2,668.22	\$2,641.80	\$3,592.84
51	\$1,372.59	\$2,772.63	\$2,745.18	\$3,733.45
52	\$1,426.13	\$2,880.78	\$2,852.26	\$3,879.07
53	\$1,481.51	\$2,992.65	\$2,963.02	\$4,029.71
54	\$1,539.66	\$3,110.12	\$3,079.33	\$4,187.89
55	\$1,599.66	\$3,231.32	\$3,199.33	\$4,351.08
56	\$1,662.43	\$3,358.11	\$3,324.86	\$4,521.81
57	\$1,727.05	\$3,488.63	\$3,454.09	\$4,697.56
58	\$1,794.43	\$3,624.75	\$3,588.86	\$4,880.85
59	\$1,864.58	\$3,766.45	\$3,729.16	\$5,071.66
60	\$1,937.50	\$3,913.76	\$3,875.01	\$5,270.01
61	\$2,013.19	\$4,066.65	\$4,026.39	\$5,475.89
62	\$2,013.19	\$4,066.65	\$4,026.39	\$5,475.89
63	\$2,013.19	\$4,066.65	\$4,026.39	\$5,475.89
64	\$2,013.19	\$4,066.65	\$4,026.39	\$5,475.89
65	\$2,013.19	\$4,066.65	\$4,026.39	\$5,475.89
Over 65	\$2,013.19	\$4,066.65	\$4,026.39	\$5,475.89

* - Pharmacy Prescriptions covered by Prescription Drug Card Rider (not optional), priced separately.

**not available to new sales

BSBS Code

P603

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, non-Medigap Business - PPO/BluePreferred - Prescription Drug Card Rider
District of Columbia - PPACA
Underwritten Standard Product (open)
Proposed Monthly Premium Rates Effective 10/1/2013

Deductible	=	\$100
RETAIL: 30 Day Supply, Copay	=	\$10 Generic, \$25 Formulary Brand, \$45 Nonformulary
MAIL ORDER: 90 Day Supply, Copay	=	\$20 Generic, \$50 Formulary Brand, \$90 Nonformulary
Annual Benefits Maximum	=	Unlimited
 Base Rate	 =	 \$95.04

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$52.27			
6-18	\$46.57	\$94.07	\$93.14	\$126.67
19-20	\$69.09	\$139.57	\$138.19	\$187.94
21	\$69.09	\$139.57	\$138.19	\$187.94
22	\$69.09	\$139.57	\$138.19	\$187.94
23	\$69.09	\$139.57	\$138.19	\$187.94
24	\$69.09	\$139.57	\$138.19	\$187.94
25	\$69.09	\$139.57	\$138.19	\$187.94
26	\$69.09	\$139.57	\$138.19	\$187.94
27	\$69.09	\$139.57	\$138.19	\$187.94
28	\$69.09	\$139.57	\$138.19	\$187.94
29	\$69.09	\$139.57	\$138.19	\$187.94
30	\$69.09	\$139.57	\$138.19	\$187.94
31	\$69.09	\$139.57	\$138.19	\$187.94
32	\$69.09	\$139.57	\$138.19	\$187.94
33	\$70.90	\$143.22	\$141.80	\$192.85
34	\$73.66	\$148.79	\$147.31	\$200.34
35	\$76.51	\$154.54	\$153.01	\$208.10
36	\$79.45	\$160.50	\$158.91	\$216.11
37	\$82.59	\$166.83	\$165.18	\$224.64
38	\$85.82	\$173.36	\$171.64	\$233.43
39	\$89.15	\$180.08	\$178.30	\$242.48
40	\$92.66	\$187.18	\$185.33	\$252.05
41	\$96.28	\$194.48	\$192.55	\$261.87
42	\$100.08	\$202.16	\$200.15	\$272.21
43	\$103.97	\$210.03	\$207.95	\$282.81
44	\$108.06	\$218.28	\$216.12	\$293.92
45	\$112.24	\$226.73	\$224.48	\$305.30
46	\$116.61	\$235.56	\$233.23	\$317.19
47	\$121.18	\$244.78	\$242.35	\$329.60
48	\$125.93	\$254.37	\$251.86	\$342.52
49	\$130.87	\$264.36	\$261.74	\$355.97
50	\$136.00	\$274.72	\$272.00	\$369.93
51	\$141.32	\$285.48	\$282.65	\$384.40
52	\$146.84	\$296.61	\$293.67	\$399.40
53	\$152.54	\$308.13	\$305.08	\$414.91
54	\$158.53	\$320.22	\$317.05	\$431.19
55	\$164.70	\$332.70	\$329.41	\$448.00
56	\$171.17	\$345.76	\$342.33	\$465.57
57	\$177.82	\$359.20	\$355.64	\$483.67
58	\$184.76	\$373.21	\$369.52	\$502.54
59	\$191.98	\$387.80	\$383.96	\$522.19
60	\$199.49	\$402.97	\$398.98	\$542.61
61	\$207.28	\$418.71	\$414.56	\$563.81
62	\$207.28	\$418.71	\$414.56	\$563.81
63	\$207.28	\$418.71	\$414.56	\$563.81
64	\$207.28	\$418.71	\$414.56	\$563.81
65	\$207.28	\$418.71	\$414.56	\$563.81
>65 Non-Medicare Eligible	\$207.28	\$418.71	\$414.56	\$563.81
>65 Medicare Eligible **	\$207.28	\$418.71	\$414.56	\$563.81

**not available to new sales

GHMSI dba Carefirst BlueCross BlueShield
NAIC No. 53007
Individual, non-Medigap Business - Prescription Drug Card Rider

District of Columbia - PPACA
PPO/BluePreferred - Underwritten Saver (Low Cost Products) Plan
PRESCRIPTION DRUG

Proposed Monthly Premium Rates Effective 10/1/2013

Deductible = \$150
 RETAIL (Acute) : 34 Day Supply, Copay = \$15 Generic, Discount on Brand
 Annual Benefits Maximum (on Generic only) = Unlimited

Base Rate = **\$21.71**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$11.94			
6-18	\$10.64	\$21.49	\$21.28	\$28.94
19-20	\$15.78	\$31.88	\$31.57	\$42.93
21	\$15.78	\$31.88	\$31.57	\$42.93
22	\$15.78	\$31.88	\$31.57	\$42.93
23	\$15.78	\$31.88	\$31.57	\$42.93
24	\$15.78	\$31.88	\$31.57	\$42.93
25	\$15.78	\$31.88	\$31.57	\$42.93
26	\$15.78	\$31.88	\$31.57	\$42.93
27	\$15.78	\$31.88	\$31.57	\$42.93
28	\$15.78	\$31.88	\$31.57	\$42.93
29	\$15.78	\$31.88	\$31.57	\$42.93
30	\$15.78	\$31.88	\$31.57	\$42.93
31	\$15.78	\$31.88	\$31.57	\$42.93
32	\$15.78	\$31.88	\$31.57	\$42.93
33	\$16.20	\$32.72	\$32.39	\$44.05
34	\$16.83	\$33.99	\$33.65	\$45.76
35	\$17.48	\$35.30	\$34.95	\$47.54
36	\$18.15	\$36.66	\$36.30	\$49.37
37	\$18.87	\$38.11	\$37.73	\$51.32
38	\$19.60	\$39.60	\$39.21	\$53.32
39	\$20.36	\$41.14	\$40.73	\$55.39
40	\$21.17	\$42.76	\$42.33	\$57.57
41	\$21.99	\$44.42	\$43.98	\$59.82
42	\$22.86	\$46.18	\$45.72	\$62.18
43	\$23.75	\$47.98	\$47.50	\$64.60
44	\$24.68	\$49.86	\$49.37	\$67.14
45	\$25.64	\$51.79	\$51.28	\$69.74
46	\$26.64	\$53.81	\$53.28	\$72.46
47	\$27.68	\$55.91	\$55.36	\$75.29
48	\$28.77	\$58.11	\$57.53	\$78.24
49	\$29.89	\$60.39	\$59.79	\$81.31
50	\$31.07	\$62.76	\$62.13	\$84.50
51	\$32.28	\$65.21	\$64.57	\$87.81
52	\$33.54	\$67.75	\$67.08	\$91.23
53	\$34.84	\$70.39	\$69.69	\$94.78
54	\$36.21	\$73.15	\$72.42	\$98.50
55	\$37.62	\$76.00	\$75.25	\$102.34
56	\$39.10	\$78.98	\$78.20	\$106.35
57	\$40.62	\$82.05	\$81.24	\$110.48
58	\$42.20	\$85.25	\$84.41	\$114.80
59	\$43.85	\$88.59	\$87.71	\$119.28
60	\$45.57	\$92.05	\$91.14	\$123.95
61	\$47.35	\$95.65	\$94.70	\$128.79
62	\$47.35	\$95.65	\$94.70	\$128.79
63	\$47.35	\$95.65	\$94.70	\$128.79
64	\$47.35	\$95.65	\$94.70	\$128.79
65	\$47.35	\$95.65	\$94.70	\$128.79
>65 Non-Medicare Eligible	\$47.35	\$95.65	\$94.70	\$128.79
>65 Medicare Eligible **	\$47.35	\$95.65	\$94.70	\$128.79

**not available to new sales

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, non-Medigap Business - PPO/BluePreferred - Prescription Drug Card Rider
District of Columbia - PPACA
HIPAA Standard Product (open)
Proposed Monthly Premium Rates Effective 10/1/2013

Deductible	=	\$100
Acute : 30 Day Supply, Copay	=	\$10 Generic, \$25 Formulary Brand, \$45 Nonformulary
Maintenance : 31 to 60 Day Supply, Copay	=	\$20 Generic, \$50 Formulary Brand, \$90 Nonformulary
Maintenance : 61 to 90 Day Supply, Copay	=	\$30 Generic, \$75 Formulary Brand, \$135 Nonformulary
Annual Benefits Maximum	=	Unlimited
 Base Rate	=	 \$144.91

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
0-5	\$79.70			
6-18	\$71.01	\$143.43	\$142.01	\$193.14
19-20	\$105.35	\$212.81	\$210.70	\$286.55
21	\$105.35	\$212.81	\$210.70	\$286.55
22	\$105.35	\$212.81	\$210.70	\$286.55
23	\$105.35	\$212.81	\$210.70	\$286.55
24	\$105.35	\$212.81	\$210.70	\$286.55
25	\$105.35	\$212.81	\$210.70	\$286.55
26	\$105.35	\$212.81	\$210.70	\$286.55
27	\$105.35	\$212.81	\$210.70	\$286.55
28	\$105.35	\$212.81	\$210.70	\$286.55
29	\$105.35	\$212.81	\$210.70	\$286.55
30	\$105.35	\$212.81	\$210.70	\$286.55
31	\$105.35	\$212.81	\$210.70	\$286.55
32	\$105.35	\$212.81	\$210.70	\$286.55
33	\$108.10	\$218.37	\$216.21	\$294.04
34	\$112.31	\$226.86	\$224.61	\$305.47
35	\$116.65	\$235.64	\$233.31	\$317.29
36	\$121.14	\$244.71	\$242.29	\$329.51
37	\$125.93	\$254.37	\$251.85	\$342.52
38	\$130.85	\$264.32	\$261.71	\$355.92
39	\$135.93	\$274.57	\$271.85	\$369.72
40	\$141.29	\$285.40	\$282.57	\$384.30
41	\$146.79	\$296.52	\$293.59	\$399.28
42	\$152.59	\$308.23	\$305.18	\$415.05
43	\$158.53	\$320.23	\$317.06	\$431.21
44	\$164.76	\$332.82	\$329.53	\$448.15
45	\$171.14	\$345.70	\$342.28	\$465.50
46	\$177.80	\$359.17	\$355.61	\$483.63
47	\$184.76	\$373.22	\$369.52	\$502.55
48	\$192.01	\$387.85	\$384.01	\$522.26
49	\$199.54	\$403.07	\$399.08	\$542.75
50	\$207.37	\$418.88	\$414.73	\$564.04
51	\$215.48	\$435.27	\$430.96	\$586.11
52	\$223.89	\$452.25	\$447.77	\$608.97
53	\$232.58	\$469.81	\$465.16	\$632.62
54	\$241.71	\$488.25	\$483.42	\$657.45
55	\$251.13	\$507.28	\$502.26	\$683.07
56	\$260.98	\$527.19	\$521.97	\$709.87
57	\$271.13	\$547.68	\$542.25	\$737.46
58	\$281.71	\$569.04	\$563.41	\$766.24
59	\$292.72	\$591.29	\$585.44	\$796.19
60	\$304.17	\$614.42	\$608.33	\$827.33
61	\$316.05	\$638.42	\$632.10	\$859.65
62	\$316.05	\$638.42	\$632.10	\$859.65
63	\$316.05	\$638.42	\$632.10	\$859.65
64	\$316.05	\$638.42	\$632.10	\$859.65
65	\$316.05	\$638.42	\$632.10	\$859.65
Over 65	\$316.05	\$638.42	\$632.10	\$859.65

**not available to new sales

BSBS Code RW16

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, non-Medigap Business - PPO/BluePreferred - Prescription Drug Card Rider
District of Columbia
HIPAA Old Standard Product (Closed) - Grandfathered
Proposed Monthly Premium Rates Effective 10/1/2013

Deductible = \$100
RETAIL (Acute) : 34 Day Supply, Copay = \$10 Generic, \$20 Brand Name
RETAIL (Maintenance) : 35 to 102 Day Supply, Copay = \$20 Generic, \$40 Brand Name
MAIL ORDER: Up to 102 Day Supply, Copay = \$20 Generic, \$40 Brand Name
Annual Benefits Maximum = \$1,500 (100% member coinsurance thereafter)

Base Rate = **\$191.35**

Age	Ind	Ind & Child(ren)	Ind & Adult	Family
<21	\$139.11	\$281.01	\$278.22	\$378.38
21	\$139.11	\$281.01	\$278.22	\$378.38
22	\$139.11	\$281.01	\$278.22	\$378.38
23	\$139.11	\$281.01	\$278.22	\$378.38
24	\$139.11	\$281.01	\$278.22	\$378.38
25	\$139.11	\$281.01	\$278.22	\$378.38
26	\$139.11	\$281.01	\$278.22	\$378.38
27	\$139.11	\$281.01	\$278.22	\$378.38
28	\$139.11	\$281.01	\$278.22	\$378.38
29	\$139.11	\$281.01	\$278.22	\$378.38
30	\$139.11	\$281.01	\$278.22	\$378.38
31	\$139.11	\$281.01	\$278.22	\$378.38
32	\$139.11	\$281.01	\$278.22	\$378.38
33	\$142.75	\$288.35	\$285.49	\$388.27
34	\$148.30	\$299.56	\$296.59	\$403.37
35	\$154.04	\$311.15	\$308.07	\$418.98
36	\$159.97	\$323.14	\$319.94	\$435.11
37	\$166.28	\$335.89	\$332.57	\$452.29
38	\$172.79	\$349.03	\$345.58	\$469.99
39	\$179.49	\$362.56	\$358.97	\$488.20
40	\$186.57	\$376.86	\$373.13	\$507.46
41	\$193.84	\$391.55	\$387.68	\$527.24
42	\$201.49	\$407.01	\$402.98	\$548.06
43	\$209.34	\$422.86	\$418.67	\$569.40
44	\$217.56	\$439.48	\$435.13	\$591.78
45	\$225.98	\$456.49	\$451.97	\$614.68
46	\$234.79	\$474.27	\$469.57	\$638.62
47	\$243.97	\$492.82	\$487.94	\$663.60
48	\$253.54	\$512.15	\$507.08	\$689.63
49	\$263.49	\$532.25	\$526.98	\$716.69
50	\$273.82	\$553.12	\$547.64	\$744.80
51	\$284.54	\$574.77	\$569.07	\$773.94
52	\$295.64	\$597.18	\$591.27	\$804.13
53	\$307.12	\$620.38	\$614.23	\$835.36
54	\$319.17	\$644.73	\$638.34	\$868.15
55	\$331.61	\$669.85	\$663.22	\$901.98
56	\$344.62	\$696.14	\$689.24	\$937.37
57	\$358.02	\$723.19	\$716.03	\$973.80
58	\$371.98	\$751.41	\$743.97	\$1,011.80
59	\$386.53	\$780.78	\$773.05	\$1,051.35
60	\$401.64	\$811.32	\$803.29	\$1,092.47
61	\$417.33	\$843.02	\$834.67	\$1,135.15
62	\$417.33	\$843.02	\$834.67	\$1,135.15
63	\$417.33	\$843.02	\$834.67	\$1,135.15
64	\$417.33	\$843.02	\$834.67	\$1,135.15
65	\$417.33	\$843.02	\$834.67	\$1,135.15
Over 65	\$417.33	\$843.02	\$834.67	\$1,135.15

**not available to new sales

BSBS Code RW13

**GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
PPO (BluePreferred)**

District of Columbia

**Underwritten & HIPAA
Standard, Saver, and HSA - PPACA
Medical & Rx**

**Rate Filing # 1867
Actuarial Memorandum**

**Effective 7/1/2013
and
Effective 10/1/2013**

**GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
 Individual, Non-Medigap Business
 PPO (BluePreferred)
 District of Columbia
 Underwritten & HIPAA
 Standard, Saver, and HSA - PPACA
 Rate Filing # 1867
 Actuarial Memorandum
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ACTUARIAL CERTIFICATION

I, Brad Boban, am a Pricing Actuary with CareFirst BlueCross BlueShield of which GHMSI is a subsidiary. I am a member of the American Academy of Actuaries. I have been involved in the development of these rates.

To the best of my knowledge, these rating methodologies comply with applicable laws and regulations of the District of Columbia, and produce premiums that are reasonable in relation to benefits, and are based on sound and commonly accepted actuarial principles.

Brad Boban

Digitally signed by Brad Boban
DN: cn=Brad Boban, o=CareFirst
BlueCross BlueShield, ou=Actuarial
Pricing,
email=brad.boban@carefirst.com, c=US
Date: 2013.02.26 10:12:23 -05'00'

Brad Boban, ASA, MAAA
Senior Actuarial Assistant, Supervisor
GHMSI
Mail Drop-Point 01-780
10455 Mill Run Circle
Owings Mills, Md. 21117

**GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
Rate Filing # 1867
PPO (BluePreferred)
Underwritten & HIPAA
Standard, Saver, and HSA - PPACA**

The attached rate filing pertains to the individual, non-Medigap business of GHMSI dba CareFirst BlueCross BlueShield.

The following is a summary of proposed rate changes included in the filing. The changes are over the most recently filed rates, in filing 1830. Rates included in this filing are proposed to have an effective date of 7/1/2013.

Product	Medical Rate Change (07/2013 over 04/2013 Rate Level)	Rx Rate Change (07/2013 over 04/2013 Rate Level)	Total Rate Change (07/2013 over 04/2013 Rate Level)	**Total Annual Rate Change (07/2013 over 07/2012 Rate Level) - excluding age change
UW Standard \$100 - 90%	-6.8%	10.0%	-4.3%	0.0%
UW Standard \$300 - 90%	0.0%	10.0%	1.9%	6.8%
UW Standard \$300 - 80%	15.2%	10.0%	14.1%	19.9%
UW Standard \$500 - 80%	15.2%	10.0%	14.0%	19.9%
UW Standard \$750 - 80% *	4.8%	10.0%	6.1%	11.7%
UW Standard \$2500 - 80%	-11.6%	10.0%	-5.5%	0.0%
UW Saver \$2500 - 70%	3.2%	-13.5%	1.3%	12.1%
UW Saver \$5000 - 100%	0.0%	-13.5%	-1.7%	2.5%
UW Saver \$10000 - 100%	0.0%	-13.5%	-2.3%	1.6%
UW HSA \$1200 Option	2.0%	n/a	2.0%	16.6%
UW HSA \$2700 Option	2.8%	n/a	2.8%	16.5%
HIPAA Standard \$100 - 90%	9.8%	10.0%	9.8%	19.9%
HIPAA Standard \$300 - 80%	5.6%	10.0%	6.2%	19.9%
UW Standard	6.1%	10.0%	6.9%	12.4%
UW Saver	1.9%	-13.5%	0.0%	8.0%
UW HSA	2.3%	n/a	2.3%	16.6%
HIPAA Standard	6.9%	10.0%	7.3%	19.9%
Composite	3.6%	7.5%	3.9%	15.7%

These rate changes will also apply to the 10%, 25% and 50% CounterOffers.

* The 25% Counter Offer of the PPO Standard \$750 option will be used for the PPO QTC Coverage. Prior to PPACA, the PPO QTC had the same rate as the PPO OE. However, the PPO OE is now a closed, grandfathered product with different benefits than the PPO QTC product. The PPO OE rate was set equal to 125% of the equivalent Underwritten PPO Option. Using this logic, the PPO QTC rate should be maintained at the 125% of the equivalent PPO Underwritten option.

**The shaded annual rate changes are weighted averages (revenue based).

As of 12/31/11, the "Risk-Based Capital" (RBC) percentage for GHMSI and CFMI were 998% and 679% respectively. Both GHMSI and CFMI own 50/50 of CareFirst Holdings of which the key asset is CareFirst BlueChoice. In 2011, two independent actuarial consultants, Milliman and the Lewin Group, updated their recommended optimal RBC ranges for both legal entities (including their share of CareFirst Holdings) to reflect the impact of Federal Health Care Reform (FHCER). Based on their surplus evaluations, management filed with their respective regulators revised Board-approved GHMSI and CFMI RBC ranges of 1000-1300% and 1050-1350%, respectively. These ranges increased significantly over the prior 2008 ranges by 150-250% due to changes and uncertainty posed by FHCER. RBC ratios are calculated on an authorized control level basis.

We have added 3 items to our DICR to reflect additional cost associated with PPACA implementation. The Patient Centered Outcome Fee is a fixed \$2 per member per year that must be paid for all our members to fund the federal Patient Centered Outcome Research Institute (PCORI) for plan beginning after 10/1/12. The Reinsurance fee will be assessed in 2014 to all fully-insured and self-insured members to fund the \$10 billion federal reinsurance program. We've estimated the ultimate cost to be \$64.32 per member per year and have built in a pro-rated fraction of this fee to account for the renewal cohorts who will have these rates in the 2014 calendar year. The Insurer Fee tax is to fund the non-tax deductible fee that applies to fully-insured business only and will amount to \$8 billion dollars in aggregate in 2014. Our estimate for the ultimate cost of this is 1.7% of premium, and just as with the Reinsurance Fee, we have built a small portion into the DICR to cover the portion of premium that will be collected in 2014 and subject to this fee. These latter two fees will increase each filing as a greater portion of the premium reaches into the 2014 calendar year.

On 11/9/11 a conference call meeting was held between CF and the DISB. For CF, Kenny Kan, Brad Boban and Todd Switzer participated. For the DISB, Philip Barlow, Darniece Shirley and Efrén Tanheco participated. The purpose was to outline our understanding of HHS regulations related to the mechanics of testing for against the PPACA's 10% threshold for unreasonable rate review (URR) toward assent. The context was 2Q12 rate filings. A follow-up mtg was held on 11/22/11. We discussed our mutual understanding of the parameters for the PPACA 10% threshold test for determining rate actions subject to URR. Consistent with those dialogues, this filing is again submitted predicated on the understanding that the threshold test uses a weighted average of 12 months of renewals for non-grandfathered business for the "Individual non-Medigap" and small group markets. Therefore, some single month's renewals may exceed 10% and still not breach the PPACA URR 10% threshold so long as the weighted average for the twelve months ending with the last month of the projection period is below 10%. Based on this understanding, we assume that a non-grandfathered Individual or Small Group filing is not subject to unreasonable rate review if the twelve-month rolling average renewal is under 10%. (As you know, grandfathered (GF) business is not under the purview of PPACA URR. Therefore some GF renewals may exceed a 10% renewal but are not subject to URR.) Exhibits demonstrating our compliance are included in this filing.

GHMSI (NAIC No. 53007) dba CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
Rate Filing # 1867
PPO (BluePreferred)
Underwritten & HIPAA
Standard, Saver, and HSA - PPACA

The attached rate filing pertains to the individual, non-Medigap business of GHMSI dba CareFirst BlueCross BlueShield.

The following is a summary of proposed rate changes included in the filing.
Rates included in this filing are proposed to have an effective date of 10/1/2013.

Product	Medical Rate Change (10/2013 over 07/2013 Rate Level)	Rx Rate Change (10/2013 over 07/2013 Rate Level)	Total Rate Change (10/2013 over 07/2013 Rate Level)	**Total Annual Rate Change (10/2013 over 10/2012 Rate Level) - excluding age change
UW Standard \$100 - 90%	1.8%	1.8%	1.8%	-4.1%
UW Standard \$300 - 90%	1.8%	1.8%	1.8%	2.6%
UW Standard \$300 - 80%	1.8%	1.8%	1.8%	15.1%
UW Standard \$500 - 80%	1.8%	1.8%	1.8%	15.2%
UW Standard \$750 - 80% *	1.8%	1.8%	1.8%	7.4%
UW Standard \$2500 - 80%	1.8%	1.8%	1.8%	-3.8%
UW Saver \$2500 - 70%	1.8%	1.8%	1.8%	7.4%
UW Saver \$5000 - 100%	1.8%	1.8%	1.8%	-1.7%
UW Saver \$10000 - 100%	1.8%	1.8%	1.8%	-2.5%
UW HSA \$1200 Option	1.9%	n/a	1.9%	8.2%
UW HSA \$2700 Option	1.9%	n/a	1.9%	8.0%
HIPAA Standard \$100 - 90%	1.8%	1.8%	1.8%	14.8%
HIPAA Standard \$300 - 80%	1.8%	1.8%	1.8%	14.9%
UW Standard	1.8%	1.8%	1.8%	7.9%
UW Saver	1.8%	1.8%	1.8%	3.6%
UW HSA	1.9%	n/a	1.9%	8.1%
HIPAA Standard	1.8%	1.8%	1.8%	14.9%
Composite	1.9%	1.8%	1.9%	8.8%

These rate changes will also apply to the 10%, 25% and 50% CounterOffers.

* The 25% Counter Offer of the PPO Standard \$750 option will be used for the PPO QTC Coverage. Prior to PPACA, the PPO QTC had the same rate as the PPO OE. However, the PPO OE is now a closed, grandfathered product with different benefits than the PPO QTC product. The PPO OE rate was set equal to 125% of the equivalent Underwritten PPO Option. Using this logic, the PPO QTC rate should be maintained at the 125% of the equivalent PPO Underwritten option.

**The shaded annual rate changes are weighted averages (revenue based).

As of 12/31/11, the "Risk-Based Capital" (RBC) percentage for GHMSI and CFMI were 998% and 679% respectively. Both GHMSI and CFMI own 50/50 of CareFirst Holdings of which the key asset is CareFirst BlueChoice. In 2011, two independent actuarial consultants, Milliman and the Lewin Group, updated their recommended optimal RBC ranges for both legal entities (including their share of CareFirst Holdings) to reflect the impact of Federal Health Care Reform (FHCR). Based on their surplus evaluations, management filed with their respective regulators revised Board-approved GHMSI and CFMI RBC ranges of 1000-1300% and 1050-1350%, respectively. These ranges increased significantly over the prior 2008 ranges by 150-250% due to changes and uncertainty posed by FHCR. RBC ratios are calculated on an authorized control level basis.

- We have added 3 items to our DICR to reflect additional cost associated with PPACA implementation. The Patient Centered Outcome Fee is a fixed \$2 per member per year that must be paid for all our members to fund the federal Patient Centered Outcome Research Institute (PCORI) for plan beginning after 10/1/12. The Reinsurance fee will be assessed in 2014 to all fully-insured and self-insured members to fund the \$14 billion federal reinsurance program. We've estimated the ultimate cost to be \$52 per member per year and have built in a fraction of this fee to account for the February and March renewal cohorts who will have these rates for one and two months in 2014 calendar year. The Insurer Fee tax is to fund the non-tax deductible fee that applies to fully-insured business only and will amount to \$8 billion dollars in aggregate in 2014. Our estimate for the ultimate cost of this is 1.5% of premium, and just as with the Reinsurance Fee, we have built a small portion into the DICR to cover the portion of premium that will be collected in 2014 and subject to this fee. These latter two fees will increase each filing as a greater portion of the premium reaches into the 2014 calendar year.

On 11/9/11 a conference call meeting was held between CF and the DISB. For CF, Kenny Kan, Brad Boban and Todd Switzer participated. For the DISB, Philip Barlow, Darniece Shirley and Efren Tanheco participated. The purpose was to outline our understanding of HHS regulations related to the mechanics of testing for against the PPACA's 10% threshold for unreasonable rate review (URR) toward assent. The context was 2Q12 rate filings. A follow-up mtg was held on 11/22/11. We discussed our mutual understanding of the parameters for the PPACA 10% threshold test for determining rate actions subject to URR. Consistent with those dialogues, this filing is again submitted predicated on the understanding that the threshold test uses a weighted average of 12 months of renewals for non-grandfathered business for the "Individual non-Medigap" and small group markets. Therefore, some single month's renewals may exceed 10% and still not breach the PPACA URR 10% threshold so long as the weighted average for the twelve months ending with the last month of the projection period is below 10%. Based on this understanding, we assume that a non-grandfathered Individual or Small Group filing is not subject to unreasonable rate review if the twelve-month rolling average renewal is under 10%. (As you know, grandfathered (GF) business is not under the purview of PPACA URR. Therefore some GF renewals may exceed a 10% renewal but are not subject to URR.) Exhibits demonstrating our compliance are included in this filing.

CareFirst BlueCross BlueShield (GHMSI)
Pricing Analysis - Individual, Non-Medigap Underwritten and HIPAA business - PPACA
Experience Period: Incurred 10/2011 - 09/2012, Paid Thru 12/2012
Rate Filing Effective 07/2013

Experience Period:				Projection Period:																																									
Incurred thru		Paid thru		Start		Midpt		Start		Midpt		Trend		Trend		Trend		Trend		Trend		Trend		Trend		Trend		Trend		Trend															
10/1/2011		9/30/2012		12/31/2012		3/31/2012		7/1/2013		9/30/2013		1/30/2014		22.0		7.5%		7.5%		7.5%		7.5%		7.5%		7.5%		7.5%		7.5%															
Exp Pd Member Months				Contracts		Members		Distribution		Incurred Claims Adjusted for Catastrophic		Capitations		Rebates		Incurred + Capitations + Rebates		Income		Loss Ratio		Trend Assumed		Trend Factor		Capitation Factor		Projected Claims + Capitations + Rebates		Required Income		Income at Current 04/2013 Level		Proj LR at Current Rate Level		Incremental Rate Increase: 07/2013 Over 04/2013		Generated Income		Proposed - Needed Income		LR w/ Proposed Increase		Renewal Rate Increase: 07/2013 Over 07/2012	
Medical Experience																																													
Underwritten																																													
Standard																																													
Saver																																													
HSA (incl Rx)																																													
UW Total																																													
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CareFirst BlueCross BlueShield (GHMSI)
Pricing Analysis - Individual, Non-Medigap Underwritten and HIPAA business - PPACA
Experience Period: Incurred 10/2011 - 09/2012, Paid Thru 12/2012
Rate Filing Effective 10/2013

Experience Period:		Start				Projection Period:				Start			Pricing Trend		TARGET LOSS RATIO =		H.S.A. Standard		Non-CDH Trend		Rx Rebates		-4.7%						
Incurred thru		10/1/2011		12/31/2012		10/1/2011		12/31/2012		7/1/2013		7.5%		7.5%		7.3%		8.0%		8.0%		-4.7%							
Paid thru		9/30/2012		12/31/2012		10/1/2011		12/31/2012		7/1/2013		0.4%		0.4%		78.3%		7.5%		7.5%		-4.7%							
Midpt		12/31/2012		3/31/2012		10/1/2011		12/31/2012		7/1/2013		7.9%		7.9%		69.5%		7/1/2013		7/1/2013		1.6%							
Midpt		3/31/2012		3/31/2012		10/1/2011		12/31/2012		7/1/2013		23.5		23.5		4.7%		4.7%		4.7%		4.7%							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	
Exp Pd		Members		Distribution		Incurred Claims		Incurred +		Income		Loss Ratio		Trend		Projected		Income at		Proj LR at		Incremental Rate		Generated		Renewal Rate			
Member		12/2012		12/2012		Adjusted for		Capitations +		Loss Ratio		Assumed		Capitations +		Current		Current		Increase:		Income		Increase:		Derived			
Months		2012		2012		Catastrophic		Rebates		Trend		Factor		Rebates		Level		Level		10/2013 Over		Proposed		10/2013 Over		10/2012			
Medical Experience																													
Underwritten	Standard	6,927	646	783	19.8%	\$1,132,085	\$8,404	\$0	\$1,140,489	\$1,696,859	67.2%	7.5%	1.1521	1.0312	\$1,312,996	\$1,676,154	1,0609	\$1,800,186	72.9%	-6.9%	1.8%	\$1,832,589	\$156,436	71.6%	-4.6%	4.3%			
	Saver	3,341	243	283	7.5%	\$298,838	\$4,051	\$0	\$302,889	\$492,677	61.5%	7.5%	1.1521	1.0317	\$348,485	\$501,132	1,1204	\$551,982	63.1%	-9.2%	1.8%	\$561,918	\$60,796	62.0%	-5.5%	5.9%			
	HSA (incl Rx)	33,647	2,281	3,044	70.0%	\$4,010,923	\$40,798	(\$28,724)	\$4,022,997	\$5,469,726	73.6%	8.0%	1.1627	1.0318	\$4,672,062	\$6,377,194	1,1275	\$6,167,387	75.8%	3.4%	1.9%	\$6,284,568	(\$92,626)	74.3%	9.7%	8.1%			
	UW Total	43,915	3,170	4,110	97.3%	\$5,441,846	\$53,254	(\$28,724)	\$5,466,375	\$7,659,261	71.4%	7.9%	1.1599	1.0317	\$6,333,543	\$8,554,480	1,1123	\$8,519,555	74.3%	0.4%	1.9%	\$8,679,075	\$124,595	73.0%	5.6%	7.2%			
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HIPAA	Standard	1,341	89	104	2.7%	\$1,398,114	\$1,625	\$0	\$1,399,739	\$1,251,609	111.8%	7.5%	1.1521	1.0322	\$1,612,512	\$2,058,512	1,1397	\$1,426,494	113.0%	44.3%	1.8%	\$1,452,171	(\$606,342)	111.0%	61.5%	13.9%			
	HIPAA Total	1,341	89	104	2.7%	\$1,398,114	\$1,625	\$0	\$1,399,739	\$1,251,609	111.8%	7.5%	1.1521	1.0322	\$1,612,512	\$2,058,512	1,1397	\$1,426,494	113.0%	44.3%	1.8%	\$1,452,171	(\$606,342)	111.0%	61.5%	13.9%			
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Medical - Underwritten & HIPAA																													
	Standard	8,268	735	887	22.6%	\$2,530,199	\$10,029	\$0	\$2,540,228	\$2,948,468	86.2%	7.5%	1.1521	1.0314	\$2,925,508	\$3,734,666	1,0944	\$3,226,680	90.7%	15.7%	1.8%	\$3,284,760	(\$449,906)	89.1%	20.7%	6.2%			
	Saver	3,341	243	283	7.5%	\$298,838	\$4,051	\$0	\$302,889	\$492,677	61.5%	7.5%	1.1521	1.0317	\$348,485	\$501,132	1,1204	\$551,982	63.1%	-9.2%	1.8%	\$561,918	\$60,796	62.0%	-10.8%	0.0%			
	HSA (incl Rx)	33,647	2,281	3,044	70.0%	\$4,010,923	\$40,798	(\$28,724)	\$4,022,997	\$5,469,726	73.6%	8.0%	1.1627	1.0318	\$4,672,062	\$6,377,194	1,1275	\$6,167,387	75.8%	3.4%	1.9%	\$6,284,568	(\$92,626)	74.3%	1.5%	0.0%			
	UW & HIPAA Total	45,256	3,259	4,214	100.0%	\$6,839,959	\$54,879	(\$28,724)	\$6,866,114	\$8,910,871	77.1%	7.8%	1.1583	1.0317	\$7,946,054	\$10,612,992	1,1162	\$9,946,049	79.9%	6.7%	1.9%	\$10,131,245	(\$481,747)	78.4%	6.9%	2.0%			
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Rx Experience																													
Underwritten	Standard	6,927	646	783	66.1%	\$398,248	\$0	(\$18,738)	\$379,510	\$422,939	89.7%	7.9%	1.1614	1.0000	\$440,750	\$562,655	1,1715	\$495,473	89.0%	13.6%	1.8%	\$504,391	(\$58,264)	87.4%	36.5%	22.3%			
	Saver	3,341	243	283	24.8%	\$19,753	\$0	(\$929)	\$18,824	\$75,413	25.0%	7.9%	1.1614	1.0000	\$21,861	\$31,437	1,0735	\$80,957	27.0%	-61.2%	1.8%	\$82,414	\$50,977	26.5%	-66.4%	-12.0%			
	HSA (Rx incl w/ Medical)	0	0	0	0.0%	\$0	\$0	\$0	\$0	\$0	0.0%	0.0%	0.0000	0.0000	\$0	\$0	0.0000	\$0	0.0%	0.0%	1.8%	\$0	\$0	0.0%	0.0%	0.0%			
	UW Total	10,268	889	1,066	90.9%	\$418,001	\$0	(\$19,667)	\$398,334	\$498,351	79.9%	7.9%	1.1614	1.0000	\$462,611	\$594,093	1,1567	\$576,430	80.3%	3.1%	1.8%	\$586,805	(\$7,288)	78.8%	19.0%	17.5%			
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HIPAA	Standard	1,341	89	104	9.1%	\$519,447	\$0	(\$24,440)	\$495,007	\$168,747	293.3%	7.9%	1.1614	1.0000	\$574,884	\$733,889	1,1728	\$197,902	290.5%	270.8%	1.8%	\$201,464	(\$532,426)	285.4%	345.7%	22.3%			
	HIPAA Total	1,341	89	104	9.1%	\$519,447	\$0	(\$24,440)	\$495,007	\$168,747	293.3%	7.9%	1.1614	1.0000	\$574,884	\$733,889	1,1728	\$197,902	290.5%	270.8%	1.8%	\$201,464	(\$532,426)	285.4%	345.7%	22.3%			
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Rx - Underwritten & HIPAA																													
	Standard	8,268	735	887	75.2%	\$917,695	\$0	(\$43,178)	\$874,517	\$591,686	147.8%	7.9%	1.1614	1.0000	\$1,015,633	\$1,296,545	1,1719	\$693,374	146.5%	87.0%	1.8%	\$705,855	(\$590,690)	143.9%	124.7%	22.3%			
	Saver	3,341	243	283	24.8%	\$19,753	\$0	(\$929)	\$18,824	\$75,413	25.0%	7.9%	1.1614	1.0000	\$21,861	\$31,437	1,0735	\$80,957	27.0%	-61.2%	1.8%	\$82,414	\$50,977	26.5%	-66.4%	-12.0%			
	HSA (incl Rx)	0	0	0	0.0%	\$0	\$0	\$0	\$0	\$0	0.0%	0.0%	0.0000	0.0000	\$0	\$0	0.0000	\$0	0.0%	0.0%	1.8%	\$0	\$0	0.0%	0.0%	0.0%			
	UW & HIPAA Total	11,609	978	1,170	100.0%	\$937,448	\$0	(\$44,108)	\$893,341	\$667,099	133.9%	7.9%	1.1614	1.0000	\$1,037,495	\$1,327,982	1,1607	\$774,331	134.0%	71.5%	1.8%	\$788,269	(\$539,713)	131.6%	100.1%	16.8%			
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Medical & Rx Experience COMBINED																													
Underwritten	Standard	6,927	646	783	19.8%	\$1,530,333	\$8,404	(\$18,738)	\$1,519,999	\$2,119,797	71.7%	7.6%	1.1545	1.0312	\$1,753,745	\$2,238,809	1,0830	\$2,295,659	76.4%	-2.5%	1.8%	\$2,336,980	\$98,171	75.0%	3.4%	7.9%			
	Saver	3,341	243	283	7.5%	\$318,591	\$4,051	(\$929)	\$321,713	\$568,089	56.6%	7.5%	1.1527	1.0317	\$370,347	\$532,570	1,1142	\$632,939	58.5%	-15.9%	1.8%	\$644,332	\$111,762	57.5%	-14.4%	3.6%			
	HSA (incl Rx)	33,647	2,281	3,044	70.0%	\$4,010,923	\$40,798	(\$28,724)	\$4,022,997	\$5,469,726	73.6%	8.0%	1.1627	1.0318	\$4,672,062	\$6,377,194	1,1275	\$6,167,387	75.8%	3.4%	1.9%	\$6,284,568	(\$92,626)	74.3%	9.7%	8.1%			
	UW Total	43,915	3,170	4,110	97.3%	\$5,859,847	\$53,254	(\$48,992)	\$5,864,709	\$8,157,613	71.9%	7.9%	1.1600	1.0317	\$6,796,154	\$9,148,573	1,1150	\$9,095,985	74.7%	0.6%	1.9%	\$9,265,890	\$117,307	73.3%	6.4%	7.7%			
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HIPAA	Standard	1,341	89	104	2.7%	\$1,917,561	\$1,625	(\$24,440)	\$1,894,746	\$1,420,356	133.4%	7.6%	1.1546	1.0322	\$2,187,396	\$2,792,402	1,1437	\$1,624,395	134.7%	71.9%	1.8%	\$1,653,634	(\$1,138,767)	132.3%	94.0%	14.9%			
	HIPAA Total	1,341	89	104	2.7%	\$1,917,561	\$1,625	(\$24,440)	\$1,894,746	\$1,420,356	133.4%	7.6%	1.1546	1.0322	\$2,187,396	\$2,792,402	1,1437	\$1,624,395	134.7%	71.9%	1.8%	\$1,653,634	(\$1,138,767)	132.3%	94.0%	14.9%			
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Medical - Underwritten & HIPAA																													
	Standard	8,268	735	887	22.6%	\$3,447,894	\$10,029	(\$43,178)	\$3,414,745	\$3,540,154	96.5%	7.6%	1.1545	1.0314	\$3,941,141	\$5,031,211	1,1073	\$3,920,054	100.5%	28.2%	1.8%	\$3,990,615	(\$1,040,596)	98.8%	39.7%	10.8%			
	Saver	3,341	243	283	7.5%	\$318,591	\$4,051	(\$929)	\$321,713	\$568,089	56.6%	7.5%	1.1527	1.0317	\$370,347	\$532,570	1,1142	\$632,939	58.5%	-15.9%	1.8%	\$644,332	\$111,762	57.5%	-14.4%	3.6%			
	HSA (incl Rx)	33,647	2,281	3,044	70.0%	\$4,010,923	\$40,798	(\$28,724)	\$4,022,997	\$5,469,726	73.6%	8.0%	1.1627	1.0318	\$4,672,062	\$6,377,194	1,1275	\$6,167,387	75.8%	3.4%	1.9%	\$6,284,568	(\$92,626)	74.3%	9.7%	8.1%			
	UW &																												

CareFirst BlueCross BlueShield (GHMS)
Pricing Analysis - Individual, Non-Medical Underwritten and HIPAA business - PPACA
Experience Period: Incurred 10/2011 - 09/2012, Paid Thru 12/2012
Rate Filing Effective 10/2013

Experience Period:	Start Incurred thru Paid thru Mtdpt	10/1/2011 9/30/2012 12/31/2012 3/31/2012	Projection Period:					Start Thru 7/1/2013		Pricing Trend	7.5%	Women's Preventive Trend	0.4%	TARGET LOSS RATIO =	H.S.A. Standard	73.3%	Non-CDH Trend	7.5%	CDH Trend	8.0%	R/Ex Rebaters Trend	-4.7%	1.6%			
			1	2	3	4	5	Spans Thru 12/31/2013 Mtdpt	12/2013 12/31/2013 3/16/2014 7/1 23.5															12	13	14
			Exp Pd Member Months	Contracts 12/2012	Members 12/2012	Distribution	Incurred Claims Adjusted for Catastrophes	Capitations	Rebates	Income	Loss Ratio	Trend Assumed	Trend Factor	Capitation s Factor	Projected Claims + Capitations + Rebates	Required Income IAF	Income at Current 07/01/2013	Proj LR at Current Rate Level	Incremental Rate Increase: 10/2013 Over 07/01/2013 Proposed	Generated Income	Proposed - Needed Income	LR / Proposed Income	General Rate Increase: 10/2013 Over 12/2012 Derived			
Medical Experience																										
Underwritten Standard	Std \$100 / 90%	690	63	73	1.9%	\$765,651	\$837	\$0	\$80,489	\$248,887	32.3%	7.5%	1.1521	1.0309	\$92,633	\$118,255	1,0604	\$263,918	35.1%	-85.2%	1.8%	\$268,668	\$150,414	34.5%	-68.7%	-8.3%
	Std \$300 / 90%	832	86	93	2.1%	\$1,111,069	\$1,009	\$0	\$1,210,778	\$231,357	48.4%	7.5%	1.1521	1.0314	\$129,009	\$164,691	1,0614	\$245,566	32.5%	-32.9%	1.8%	\$249,988	\$85,295	51.8%	-35.2%	-1.6%
	Std \$500 / 80%	1,173	109	130	3.3%	\$2,220,620	\$1,424	\$0	\$2,222,043	\$272,112	81.6%	7.5%	1.1521	1.0309	\$225,654	\$326,365	1,0611	\$288,749	88.5%	13.0%	1.8%	\$293,946	(\$24,418)	87.0%	25.8%	13.3%
	Std \$500 / 80%	2,439	221	273	6.0%	\$490,462	\$2,969	\$0	\$493,421	\$556,171	88.7%	7.5%	1.1521	1.0311	\$568,136	\$725,275	1,0599	\$588,496	96.4%	23.0%	1.8%	\$600,107	(\$25,169)	94.7%	36.9%	13.3%
	Std \$750 / 80%	982	90	116	2.8%	\$179,588	\$1,191	\$0	\$180,778	\$236,490	76.4%	7.5%	1.1521	1.0318	\$208,140	\$265,709	1,0622	\$251,205	82.9%	5.8%	1.8%	\$255,727	(\$9,962)	81.4%	7.1%	3.1%
	Std \$2500 / 80%	811	77	98	2.4%	\$50,696	\$984	\$0	\$51,680	\$151,841	34.0%	7.5%	1.1521	1.0313	\$59,424	\$75,859	1,0620	\$116,253	36.9%	-53.0%	1.8%	\$164,155	\$88,296	36.2%	-56.8%	-13.1%
	Std \$2500 / 70%	1,748	127	146	3.9%	\$220,786	\$2,120	\$0	\$222,906	\$289,022	77.1%	7.5%	1.1521	1.0317	\$256,565	\$368,948	1,1524	\$333,062	77.0%	10.0%	1.8%	\$339,057	(\$29,891)	75.7%	19.8%	10.1%
	Svr \$5000 / 100%	754	60	68	1.8%	\$31,853	\$914	\$0	\$32,768	\$112,322	29.2%	7.5%	1.1521	1.0316	\$37,643	\$54,132	1,0778	\$121,062	31.1%	-55.3%	1.8%	\$123,241	\$69,109	30.5%	-56.2%	-0.2%
	Svr \$10000 / 100%	639	56	69	1.7%	\$46,108	\$1,017	\$0	\$47,215	\$91,333	51.7%	7.5%	1.1521	1.0319	\$54,277	\$79,052	1,0714	\$97,858	55.5%	-20.2%	1.8%	\$99,620	\$21,568	54.5%	-22.2%	-0.7%
	HSA \$1200 / 80%	16,988	970	1,311	29.8%	\$2,370,017	\$20,592	(\$23,662)	\$2,366,947	\$3,047,021	77.7%	8.0%	1.1627	1.0321	\$2,749,281	\$3,752,668	1,1946	\$3,639,895	75.5%	3.1%	1.9%	\$3,709,053	(\$43,615)	74.1%	9.4%	8.2%
	HSA \$2700 / 100%	16,659	1,311	1,733	40.2%	\$1,640,906	\$20,206	(\$5,062)	\$1,656,050	\$2,422,706	68.4%	8.0%	1.1627	1.0315	\$1,922,781	\$2,624,526	1,0433	\$2,527,942	76.1%	3.8%	1.9%	\$2,575,514	(\$49,012)	74.7%	10.1%	8.0%
	UW Total	43,915	3,170	4,110	90.2%	\$5,441,846	\$53,254	(\$28,724)	\$5,466,375	\$7,659,251	71.4%	7.9%	1.1599	1.0317	\$6,333,543	\$8,554,480	1,1123	\$8,519,555	74.3%	0.4%	1.9%	\$8,679,075	\$124,595	73.0%	5.6%	7.2%
HIPAA Standard																										
	Std \$100 / 90%	331	21	25	0.6%	\$347,957	\$401	\$0	\$348,388	\$391,125	89.1%	7.5%	1.1521	1.0322	\$401,312	\$512,309	1,1091	\$433,796	92.5%	18.1%	1.8%	\$441,604	(\$70,705)	90.9%	32.4%	14.1%
	Std \$300 / 90%	488	79	104	2.1%	\$1,050,153	\$1,009	\$0	\$1,270,425	\$1,132,597	112.4%	7.5%	1.1521	1.0315	\$1,466,854	\$1,872,268	1,1314	\$1,281,447	114.5%	46.1%	1.8%	\$1,304,513	(\$58,065)	112.4%	63.3%	13.9%
	HIPAA Total	1,341	89	104	2.7%	\$1,398,114	\$1,625	\$0	\$1,399,739	\$1,251,609	111.8%	7.5%	1.1521	1.0322	\$1,612,512	\$2,058,512	1,1397	\$1,426,494	113.0%	44.3%	1.8%	\$1,452,171	(\$60,342)	111.0%	61.5%	13.9%
Medical - Underwritten & HIPAA																										
	Std \$100 / 90%	1,021	84	98	2.6%	\$427,608	\$1,239	\$0	\$428,846	\$640,012	67.0%	7.5%	1.1521	1.0313	\$493,945	\$630,564	1,0902	\$697,713	70.8%	-9.6%	1.8%	\$710,272	\$79,709	69.5%	-6.2%	5.6%
	Std \$300 / 90%	832	86	93	2.6%	\$1,111,069	\$1,009	\$0	\$1,210,778	\$231,357	48.4%	7.5%	1.1521	1.0314	\$129,009	\$164,691	1,0614	\$245,566	52.5%	-32.9%	1.8%	\$249,988	\$85,295	51.8%	-35.2%	-1.6%
	Std \$500 / 80%	2,439	221	273	6.0%	\$490,462	\$2,969	\$0	\$493,421	\$556,171	88.7%	7.5%	1.1521	1.0311	\$568,136	\$725,275	1,0599	\$588,496	96.4%	23.0%	1.8%	\$600,107	(\$25,169)	94.7%	36.9%	13.3%
	Std \$750 / 80%	982	90	116	2.8%	\$179,588	\$1,191	\$0	\$180,778	\$236,490	76.4%	7.5%	1.1521	1.0318	\$208,140	\$265,709	1,0622	\$251,205	82.9%	5.8%	1.8%	\$255,727	(\$9,962)	81.4%	7.1%	3.1%
	Std \$2500 / 80%	811	77	98	2.4%	\$50,696	\$984	\$0	\$51,680	\$151,841	34.0%	7.5%	1.1521	1.0313	\$59,424	\$75,859	1,0620	\$116,253	36.9%	-53.0%	1.8%	\$164,155	\$88,296	36.2%	-56.8%	-13.1%
	Std \$2500 / 70%	1,748	127	146	3.9%	\$220,786	\$2,120	\$0	\$222,906	\$289,022	77.1%	7.5%	1.1521	1.0317	\$256,565	\$368,948	1,1524	\$333,062	77.0%	10.0%	1.8%	\$339,057	(\$29,891)	75.7%	19.8%	10.1%
	Svr \$5000 / 100%	754	60	68	1.8%	\$31,853	\$914	\$0	\$32,768	\$112,322	29.2%	7.5%	1.1521	1.0316	\$37,643	\$54,132	1,0778	\$121,062	31.1%	-55.3%	1.8%	\$123,241	\$69,109	30.5%	-56.2%	-0.2%
	Svr \$10000 / 100%	639	56	69	1.7%	\$46,108	\$1,017	\$0	\$47,215	\$91,333	51.7%	7.5%	1.1521	1.0319	\$54,277	\$79,052	1,0714	\$97,858	55.5%	-20.2%	1.8%	\$99,620	\$21,568	54.5%	-22.2%	-0.7%
	HSA \$1200 / 80%	16,988	970	1,311	29.8%	\$2,370,017	\$20,592	(\$23,662)	\$2,366,947	\$3,047,021	77.7%	8.0%	1.1627	1.0321	\$2,749,281	\$3,752,668	1,1946	\$3,639,895	75.5%	3.1%	1.9%	\$3,709,053	(\$43,615)	74.1%	9.4%	8.2%
	HSA \$2700 / 100%	16,659	1,311	1,733	40.2%	\$1,640,906	\$20,206	(\$5,062)	\$1,656,050	\$2,422,706	68.4%	8.0%	1.1627	1.0315	\$1,922,781	\$2,624,526	1,0433	\$2,527,942	76.1%	3.8%	1.9%	\$2,575,514	(\$49,012)	74.7%	10.1%	8.0%
	UW & HIPAA Total	45,256	3,259	4,214	100.0%	\$6,839,959	\$59,479	(\$28,724)	\$6,868,114	\$8,910,871	77.1%	7.8%	1.1583	1.0317	\$7,946,054	\$10,612,992	1,1162	\$9,946,499	79.9%	6.7%	1.9%	\$10,313,245	(\$481,747)	78.4%	13.3%	8.1%
Rx Experience																										
Underwritten Standard	Std \$100 / 90%	690	63	73	6.3%	\$18,482	\$0	(\$870)	\$17,613	\$39,364	44.7%	7.9%	1.1614	1.0000	\$20,455	\$26,112	1,1710	\$46,094	44.4%	-43.3%	1.8%	\$46,924	\$20,811	43.6%	-31.9%	22.3%
	Std \$300 / 90%	832	86	93	8.8%	\$53,846	\$0	(\$2,533)	\$51,312	\$48,712	105.3%	7.9%	1.1614	1.0000	\$59,593	\$76,075	1,1719	\$79,088	104.4%	33.3%	1.8%	\$88,115	(\$17,960)	102.5%	60.2%	22.3%
	Std \$500 / 80%	1,173	109	130	11.1%	\$72,745	\$0	(\$3,423)	\$69,323	\$67,493	102.7%	7.9%	1.1614	1.0000	\$80,509	\$102,777	1,1715	\$57,089	101.8%	30.0%	1.8%	\$90,493	(\$22,944)	100.0%	56.2%	22.3%
	Std \$750 / 80%	982	90	116	9.2%	\$62,478	\$0	(\$7,688)	\$55,790	\$45,891	106.5%	7.9%	1.1614	1.0000	\$160,375	\$230,264	1,1702	\$170,725	105.7%	34.9%	1.8%	\$173,798	(\$56,466)	103.8%	62.1%	22.3%
	Std \$2500 / 80%	811	77	98	7.9%	\$27,715	\$0	(\$1,304)	\$26,411	\$53,794	49.1%	7.9%	1.1614	1.0000	\$30,673	\$39,157	1,1728	\$73,404	87.1%	-11.2%	1.8%	\$80,834	(\$7,437)	85.5%	33.6%	22.3%
	Std \$2500 / 70%	1,748	127	146	13.0%	\$10,074	\$0	(\$474)	\$9,600	\$40,400	23.8%	7.9%	1.1614	1.0000	\$11,149	\$16,033	1,0738	\$43,383	25.7%	-63.0%	1.8%	\$44,164	\$28,131	25.2%	-68.0%	-12.0%
	Svr \$5000 / 100%	639	56	69	6.1%	\$3,001	\$0	(\$141)	\$2,859	\$16,420	17.4%	7.9%	1.1614	1.0000	\$3,321	\$4,775	1,0740	\$17,636	18.8%	-72.9%	1.8%	\$17,953	\$13,178	18.5%	-76.6%	-12.0%
	Svr \$10000 / 100%	839	56	69	5.7%	\$6,679	\$0	(\$314)	\$6,364	\$18,592	34.2%	7.9%	1.1614	1.0000	\$7,391	\$10,629	1,0724	\$19,538	37.1%	-46.7%	1.8%	\$20,297	\$9,668	36.4%	-53.9%	-12.0%
	HSA \$1200 / 80%	16,988	970	1,311	29.8%	\$2,370,017	\$20,592	(\$23,662)	\$2,366,947	\$3,047,021	77.7%	8.0%	1.1627	1.0321	\$2,749,281	\$3,752,668	1,1946	\$3,639,895	75.5%	3.1%	1.9%	\$3,709,053	(\$43,615)	74.1%	9.4%	8.2%
	HSA \$2700 / 100%	16,659	1,311	1,733	40.2%	\$1,640,906	\$20,206	(\$5,062)	\$1,656,050	\$2,422,706	68.4%	8.0%	1.1627	1.0315	\$1,922,781	\$2,624,526	1,0433	\$2,527,942	76.1%	3.8%	1.9%	\$2,575,514	(\$49,012)	74.7%	10.1%	8.0%
	UW Total	10,268	889	1,066	90.9%	\$418,001	\$0	(\$19,667)	\$398,334	\$498,351	79.9%	7.9%	1.1614	1.0000	\$462,611	\$594,093	1,1567	\$576,430	80.3%	3.1%	1.8%	\$586,805	(\$7,288)	78.8%	19.0%	17.5%
HIPAA Standard																										
	Std \$100 / 90%	331	21	25	2.																					

CareFirst BlueCross BlueShield
Individual Non-Medigap Underwritten Rate Filing Effective 07/01/2013
 Experience Period Incurred Claims Trends and Proposed Rating Trends (with separate HSA)
 Experience Period: Incurred 10/01/2011 through 09/30/2012 Paid through 12/31/2012

	Member Months	Weights by Incurred Claims	Rolling-12 Observed Claims Trend	Rolling-12 Normalized Trend	Proposed Rating Trend 07/01/2013	EP Claims	Prior Rating Trend 04/01/2013
Medical Non-HSA							
HMO - MD	91,811	88.8%	15.0%	12.3%	9.0%	\$20,004,183	8.5%
HMO - DC	14,241	11.2%	11.2%	6.2%	9.0%	\$2,525,820	12.5%
Total HMO Medical	106,052	100.0%	14.6%	11.6%	9.0%	\$22,530,003	8.9%
PPO - MD	154,125	34.7%	12.0%	11.0%	7.5%	\$22,468,840	6.5%
PPO - DC	63,153	20.2%	23.3%	20.8%	7.5%	\$13,057,109	7.0%
PPO - VA	170,012	45.1%	6.8%	11.2%	8.0%	\$29,192,360	7.5%
Total PPO Medical	387,290	100.0%	12.0%	13.1%	7.7%	\$64,718,310	7.1%
HMO & PPO Medical Non-HSA Subtotal	493,342		12.6%	12.7%	8.1%	\$87,248,313	7.5%
Rx Non-HSA							
HMO - MD	91,811	79.9%	17.0%	6.4%	9.0%	\$946,503	8.5%
HMO - DC	14,241	20.1%	42.5%	-2.8%	9.0%	\$237,968	12.5%
Total HMO Rx	106,052	100.0%	22.2%	4.5%	9.0%	\$1,184,471	9.3%
PPO - MD	154,125	32.7%	17.8%	13.7%	7.5%	\$3,147,424	6.5%
PPO - DC	63,153	20.2%	12.5%	-2.4%	7.5%	\$1,944,634	7.0%
PPO - VA	170,012	47.1%	2.2%	4.3%	8.0%	\$4,526,241	7.5%
Total PPO Rx	387,290	100.0%	9.4%	6.0%	7.7%	\$9,618,299	7.1%
HMO & PPO Rx Non-HSA Subtotal	493,342		10.8%	5.9%	7.9%	\$10,802,770	7.3%
Medical & Rx Non-HSA							
HMO - MD			15.1%	12.0%	9.0%	\$20,950,686	8.5%
HMO - DC			13.9%	5.5%	9.0%	\$2,763,788	12.5%
PPO - MD			12.7%	11.4%	7.5%	\$25,616,264	6.5%
PPO - DC			21.9%	17.8%	7.5%	\$15,001,743	7.0%
PPO - VA			6.2%	10.2%	8.0%	\$33,718,602	7.5%
Total Non-HSA			12.4%	11.9%	8.0%	\$98,051,083	7.5%
Total CMM - MD (Includes Medical & Rx)	595,035	100.0%	6.4%	7.9%	10.5%	\$103,751,891	11.5%
HSA (Includes Medical & Rx)							
HMO HSA - MD	128,893	26.2%	18.2%	18.0%	10.0%	\$18,300,872	9.0%
HMO HSA - DC	5,266	0.7%	29.3%	9.5%	9.0%	\$522,535	8.0%
HMO HSA - VA	11,430	2.9%	10.8%	5.3%	7.5%	\$1,998,880	7.5%
PPO HSA - MD	144,697	26.6%	3.6%	1.8%	7.5%	\$18,618,671	8.5%
PPO HSA - DC	33,647	5.7%	4.2%	1.2%	8.0%	\$3,987,468	8.5%
PPO HSA - VA	50,632	10.6%	-0.4%	-1.0%	8.5%	\$7,426,896	9.0%
CMM HSA	140,686	27.2%	7.1%	6.5%	10.0%	\$19,039,112	14.5%
Total HSA	515,251	100.0%	8.4%	7.1%	9.0%	\$69,894,433	10.3%
Medical Total	1,603,628		9.0%	9.3%	9.3%	\$260,894,637	9.9%
Medical & Rx Combined	1,603,628		9.1%	9.2%	9.2%	\$271,697,408	9.8%

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CareFirst BlueCross BlueShield
Individual, Non-Medigap Business
District of Columbia**

**Proposed PPO/BluePreferred Base Rates - PPACA
Effective 7/1/2013**

UW Options	Coverage Type	Deductible (In/Out)	Coinsurance (In/Out)	OOP Max (In/Out)	Current	Proposed	Proposed Counter Offers				Base Rate 7/1/2012	Base Rate Renewal Increase	
					Base Rate 4/1/2013	Base Rate 7/1/2013	% Change	\$ Change	110% 10% Load Base Rate 7/1/2013	125% 25% Load Base Rate 7/1/2013			150% 50% Load Base Rate 7/1/2013
1	PPO	\$100/\$300	90%/70%	\$2,500/\$5,000	\$469.13	\$437.23	-6.8%	(\$31.90)	n/a	n/a	n/a	\$455.93	-4.1%
2	PPO	\$300/\$500	90%/70%	\$2,500/\$5,000	\$353.29	\$353.29	0.0%	\$0.00	n/a	n/a	n/a	\$343.34	2.9%
3	PPO	\$300/\$500	80%/60%	\$2,500/\$5,000	\$293.80	\$338.46	15.2%	\$44.66	n/a	n/a	n/a	\$285.53	18.5%
4	PPO	\$500/\$750	80%/60%	\$2,500/\$4,000	\$280.47	\$323.10	15.2%	\$42.63	\$355.41	\$403.88	\$484.65	\$272.57	18.5%
5	PPO	\$750/\$1,000	80%/60%	\$3,500/\$7,000	\$260.42	\$272.92	4.8%	\$12.50	\$300.21	\$341.15	\$409.38	\$253.10	7.8%
6	PPO	\$2,500/\$5,000	80%/60%	\$5,000/\$7,500	\$212.02	\$187.43	-11.6%	(\$24.59)	\$206.17	\$234.29	\$281.15	\$206.06	-9.0%
7	PPO Saver	\$2,500/\$5,000	70%/60%	\$5,000/\$10,000	\$186.82	\$192.80	3.2%	\$5.98	\$212.08	\$241.00	\$289.20	\$167.38	15.2%
8	PPO Saver	\$5,000/\$10,000	100%/80%	\$5,000/\$12,500	\$168.93	\$168.93	0.0%	\$0.00	\$185.82	\$211.16	\$253.40	\$161.88	4.4%
9	PPO Saver	\$10,000/\$12,500	100%/80%	\$10,000/\$15,000	\$121.92	\$121.92	0.0%	\$0.00	\$134.11	\$152.40	\$182.88	\$117.33	3.9%
10	PPO H.S.A.	\$1,200/\$2,400 (Self)	80%/60% (Self)	\$2,800/\$5,000 (Self)	\$198.24	\$202.20	2.0%	\$3.96	\$222.42	\$252.75	\$303.30	\$173.34	16.6%
11	PPO H.S.A.	\$2,700/\$5,400 (Self)	100%/80% (Self)	\$3,200/\$6,400 (Self)	\$145.93	\$150.02	2.8%	\$4.09	\$165.02	\$187.53	\$225.03	\$128.79	16.5%

UW	Coverage Type	Deductible	Copay	Max Annual Benefit	Current	Proposed	Proposed Counter Offers				Current Base Rate 7/1/2012	% Change	
					Base Rate 4/1/2013	Base Rate 7/1/2013	% Change	\$ Change	110% 10% Load Base Rate 7/1/2013	125% 25% Load Base Rate 7/1/2013			150% 50% Load Base Rate 7/1/2013
	Standard Rx	\$100	\$10/\$25/\$45	Unlimited	\$84.87	\$93.36	10.0%	\$8.49	\$102.70	\$116.70	\$140.04	\$74.69	25.0%
	Saver Rx	\$100	\$15 Generic Only	Unlimited	\$24.66	\$21.33	-13.5%	(\$3.33)	\$23.46	\$26.66	\$32.00	\$23.71	-10.0%

HIPAA Options	Coverage Type	Deductible (In/Out)	Coinsurance (In/Out)	OOP Max (In/Out)	Current	Proposed	Proposed Counter Offers				Current Base Rate 7/1/2012	% Change	
					Base Rate 4/1/2013	Base Rate 7/1/2013	% Change	\$ Change	110% 10% Load Base Rate 7/1/2013	125% 25% Load Base Rate 7/1/2013			150% 50% Load Base Rate 7/1/2013
1	PPO	\$100/\$300	90%/70%	\$2,500/\$5,000	\$1,288.21	\$1,414.45	9.8%	\$126.24				\$1,184.63	19.4%
3	PPO	\$300/\$500	80%/60%	\$2,500/\$5,000	\$858.66	\$906.74	5.6%	\$48.08				\$761.18	19.1%

HIPAA	Coverage Type	Deductible	Copay	Max Annual Benefit	Current	Proposed	Proposed Counter Offers				Current Base Rate 7/1/2012	% Change	
					Base Rate 4/1/2013	Base Rate 7/1/2013	% Change	\$ Change	110% 10% Load Base Rate 7/1/2013	125% 25% Load Base Rate 7/1/2013			150% 50% Load Base Rate 7/1/2013
	Standard Rx	\$100	\$10/\$25/\$45	Unlimited	\$129.41	\$142.35	10.0%	\$12.94				\$113.89	25.0%
	Closed Rx - Non-PPACA	\$100	\$10/\$20	\$1,500	\$170.88	\$187.97	10.0%	\$17.09				\$150.39	25.0%

HIPAA PPO High w/ Open Rx	\$1,417.62	\$1,556.80	9.8%					HIPAA PPO High w/ Open Rx	\$1,298.52	19.9%
HIPAA PPO High w/ Closed Rx	\$1,459.09	\$1,602.42	9.8%					HIPAA PPO High w/ Closed Rx	\$1,335.02	20.0%
HIPAA PPO Low w/ Open Rx	\$988.07	\$1,049.09	6.2%					HIPAA PPO Low w/ Open Rx	\$875.07	19.9%
HIPAA PPO Low w/ Closed Rx	\$1,029.54	\$1,094.71	6.3%					HIPAA PPO Low w/ Closed Rx	\$911.57	20.1%

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Individual, Non-Medigap Business
District of Columbia**

**Proposed PPO/BluePreferred Base Rates - PPACA
Effective 10/1/2013**

UW Options	Coverage Type	Deductible (In/Out)	Coinsurance (In/Out)	OOP Max (In/Out)	Current	Proposed	Proposed Counter Offers				Base Rate 10/1/2012	Base Rate Renewal Increase	
					Base Rate 7/1/2013	Base Rate 10/1/2013	% Change	\$ Change	110% 10% Load Base Rate 10/1/2013	125% 25% Load Base Rate 10/1/2013			150% 50% Load Base Rate 10/1/2013
1	PPO	\$100/\$300	90%/70%	\$2,500/\$5,000	\$437.23	\$445.10	1.8%	\$7.87	n/a	n/a	n/a	\$485.57	-8.3%
2	PPO	\$300/\$500	90%/70%	\$2,500/\$5,000	\$353.29	\$359.65	1.8%	\$6.36	n/a	n/a	n/a	\$365.66	-1.6%
3	PPO	\$300/\$500	80%/60%	\$2,500/\$5,000	\$338.46	\$344.55	1.8%	\$6.09	n/a	n/a	n/a	\$304.09	13.3%
4	PPO	\$500/\$750	80%/60%	\$2,500/\$4,000	\$323.10	\$328.92	1.8%	\$5.82	\$361.81	\$411.15	\$493.38	\$290.29	13.3%
5	PPO	\$750/\$1,000	80%/60%	\$3,500/\$7,000	\$272.92	\$277.83	1.8%	\$4.91	\$305.61	\$347.29	\$416.75	\$269.55	3.1%
6	PPO	\$2,500/\$5,000	80%/60%	\$5,000/\$7,500	\$187.43	\$190.80	1.8%	\$3.37	\$209.88	\$238.50	\$286.20	\$219.45	-13.1%
7	PPO Saver	\$2,500/\$5,000	70%/60%	\$5,000/\$10,000	\$192.80	\$196.27	1.8%	\$3.47	\$215.90	\$245.34	\$294.41	\$178.26	10.1%
8	PPO Saver	\$5,000/\$10,000	100%/80%	\$5,000/\$12,500	\$168.93	\$171.97	1.8%	\$3.04	\$189.17	\$214.96	\$257.96	\$172.40	-0.2%
9	PPO Saver	\$10,000/\$12,500	100%/80%	\$10,000/\$15,000	\$121.92	\$124.11	1.8%	\$2.19	\$136.52	\$155.14	\$186.17	\$124.96	-0.7%
10	PPO H.S.A.	\$1,200/\$2,400 (Self)	80%/60% (Self)	\$2,800/\$5,000 (Self)	\$202.20	\$206.04	1.9%	\$3.84	\$226.64	\$257.55	\$309.06	\$190.50	8.2%
11	PPO H.S.A.	\$2,700/\$5,400 (Self)	100%/80% (Self)	\$3,200/\$6,400 (Self)	\$150.02	\$152.87	1.9%	\$2.85	\$168.16	\$191.09	\$229.31	\$141.54	8.0%

UW	Coverage Type	Deductible	Copay	Max Annual Benefit	Current	Proposed	Proposed Counter Offers				Current Base Rate 10/1/2012	% Change	
					Base Rate 7/1/2013	Base Rate 10/1/2013	% Change	\$ Change	110% 10% Load Base Rate 10/1/2013	125% 25% Load Base Rate 10/1/2013			150% 50% Load Base Rate 10/1/2013
	Standard Rx	\$100	\$10/\$25/\$45	Unlimited	\$93.36	\$95.04	1.8%	\$1.68	\$104.54	\$118.80	\$142.56	\$77.68	22.3%
	Saver Rx	\$100	\$15 Generic Only	Unlimited	\$21.33	\$21.71	1.8%	\$0.38	\$23.88	\$27.14	\$32.57	\$24.66	-12.0%

HIPAA Options	Coverage Type	Deductible (In/Out)	Coinsurance (In/Out)	OOP Max (In/Out)	Current	Proposed	Proposed Counter Offers				Current Base Rate 10/1/2012	% Change	
					Base Rate 7/1/2013	Base Rate 10/1/2013	% Change	\$ Change	110% 10% Load Base Rate 10/1/2013	125% 25% Load Base Rate 10/1/2013			150% 50% Load Base Rate 10/1/2013
1	PPO	\$100/\$300	90%/70%	\$2,500/\$5,000	\$1,414.45	\$1,439.91	1.8%	\$25.46				\$1,261.63	14.1%
3	PPO	\$300/\$500	80%/60%	\$2,500/\$5,000	\$906.74	\$923.06	1.8%	\$16.32				\$810.66	13.9%

HIPAA	Coverage Type	Deductible	Copay	Max Annual Benefit	Current	Proposed	Proposed Counter Offers				Current Base Rate 10/1/2012	% Change	
					Base Rate 7/1/2013	Base Rate 10/1/2013	% Change	\$ Change	110% 10% Load Base Rate 10/1/2013	125% 25% Load Base Rate 10/1/2013			150% 50% Load Base Rate 10/1/2013
	Standard Rx	\$100	\$10/\$25/\$45	Unlimited	\$142.35	\$144.91	1.8%	\$2.56				\$118.45	22.3%
	Closed Rx - Non-PPACA	\$100	\$10/\$20	\$1,500	\$187.97	\$191.35	1.8%	\$3.38				\$156.41	22.3%

	HIPAA PPO High w/ Open Rx	\$1,556.80	\$1,584.82	1.8%								\$1,380.08	14.8%
	HIPAA PPO High w/ Closed Rx	\$1,602.42	\$1,631.26	1.8%								\$1,418.04	15.0%
	HIPAA PPO Low w/ Open Rx	\$1,049.09	\$1,067.97	1.8%								\$929.11	14.9%
	HIPAA PPO Low w/ Closed Rx	\$1,094.71	\$1,114.41	1.8%								\$967.07	15.2%

GHMSI dba CAREFIRST BLUECROSS BLUESHIELD
Individual, Non-Medigap Business
PPO (BluePreferred)
Underwritten & HIPAA
District of Columbia
Standard, Saver, and HSA - PPACA
Incremental Rate Increase History

Effective Date	Medical			Rx		Medical	Rx
	Underwritten Standard	Underwritten Saver	Underwritten H.S.A.	Underwritten Standard	Underwritten Saver	HIPAA Standard	HIPAA Standard
10/01/95							
05/01/97							
05/01/97							
01/01/98							
01/01/98						Inception	
07/01/98						4.0%	
01/01/03						18.6%	
03/01/03						0.0%	Inception
01/01/04						9.0%	9.6%
01/01/05						0.0%	0.0%
10/01/05						-6.3%	0.0%
03/01/06			Inception			0.0%	0.0%
08/01/06			-10.8%			-5.0%	-5.0%
01/01/07			0.0%			12.5%	0.0%
07/01/07			0.0%			3.7%	0.0%
01/01/08			5.0%			11.0%	1.8%
07/01/08			0.0%			4.3%	0.0%
01/01/09			0.0%			12.3%	0.0%
04/01/09			35.0%			5.7%	0.0%
07/01/09			0.0%			3.2%	0.0%
1/1/2010*			-17.8%			2.9%	0.0%
4/1/2010*			34.1%			2.4%	0.0%
07/01/10			-5.8%			7.3%	5.1%
10/01/10	Inception	Inception	7.9%	Inception	Inception	-0.5%	0.0%
01/01/11	2.4%	2.4%	-19.7%	2.4%	2.4%	0.0%	0.0%
04/01/11	2.4%	2.4%	34.1%	2.4%	2.4%	2.4%	2.4%
06/01/11	0.0%	0.0%	-13.2%	0.0%	0.0%	-14.9%	0.0%
07/01/11	0.0%	0.0%	-5.8%	0.0%	0.0%	8.5%	0.0%
10/01/11	0.0%	0.0%	9.9%	0.0%	0.0%	0.0%	0.0%
01/01/12	0.0%	0.0%	-12.2%	0.0%	0.0%	0.0%	0.0%
04/01/12	1.7%	1.7%	5.9%	1.7%	1.7%	1.7%	1.7%
07/01/12	1.7%	1.7%	0.0%	1.7%	1.7%	1.7%	1.7%
10/01/12	6.5%	6.5%	9.9%	4.0%	4.0%	6.5%	4.0%
01/01/13	-5.0%	-2.7%	-6.2%	-5.0%	0.0%	0.4%	-5.0%
04/01/13	1.7%	4.8%	10.4%	15.0%	0.0%	4.2%	15.0%
PROPOSED 07/01/13	6.1%	1.9%	2.3%	10.0%	-13.5%	6.9%	10.0%
PROPOSED 10/01/13	1.8%	1.8%	1.9%	1.8%	1.8%	1.8%	1.8%

* Per DC Emergency Bill capping renewals @ 12.0% (excluding changes to age band, tier and benefit)

District of Columbia GHMSI
as of 10/01/2013 Rate Filing

HIOS Rate Review Threshold Test

HIOS Product ID	HIOS Product	Benefit Option	Written Premium	3Q13	4Q13	Contract Months	Renewal Increase by Renewal Month												Distribution of Renewal Income by Renewal Month												Weighted Average	Beneath Threshold?
				Incremental Increases	Incremental Increases		1/1/13	2/1/13	3/1/13	4/1/13	5/1/13	6/1/13	7/1/13	8/1/13	9/1/13	10/1/13	11/1/13	12/1/13	1/1	2/1	3/1	4/1	5/1	6/1	7/1	8/1	9/1	10/1	11/1	12/1		
	PPACA	Std \$100 / 90%	\$248,887	-4.2%	1.8%	606	4.3%	4.3%	4.3%	6.2%	6.2%	6.2%	0.0%	0.0%	0.0%	-4.1%	-4.1%	-4.1%	8.4%	12.7%	5.8%	13.7%	14.4%	7.1%	3.0%	4.7%	15.9%	0.0%	1.6%	12.8%	2.7%	
	PPACA	Std \$300 / 90%	\$231,357	1.9%	1.8%	799	4.2%	4.2%	4.2%	6.6%	6.6%	6.6%	6.8%	6.8%	6.8%	2.6%	2.6%	2.6%	13.2%	8.6%	4.6%	6.3%	9.7%	4.3%	8.2%	16.0%	5.2%	6.3%	6.4%	11.2%	5.1%	
	PPACA	Std \$300 / 80%	\$272,112	14.0%	1.8%	992	4.1%	4.1%	4.1%	6.9%	6.9%	6.9%	19.9%	19.9%	19.9%	15.1%	15.1%	15.1%	13.8%	9.4%	9.5%	7.5%	10.2%	5.8%	8.9%	7.1%	8.0%	5.0%	5.8%	8.9%	10.7%	
	PPACA	Std \$500 / 80%	\$556,171	14.0%	1.8%	2,084	4.1%	4.1%	4.1%	7.0%	7.0%	7.0%	19.9%	19.9%	19.9%	15.2%	15.2%	15.2%	4.6%	5.7%	14.8%	10.8%	7.4%	7.7%	11.2%	7.5%	10.4%	5.5%	6.5%	8.0%	11.7%	
	PPACA	Std \$750 / 80%	\$236,490	6.1%	1.8%	825	4.1%	4.1%	4.1%	7.1%	7.1%	7.1%	11.7%	11.7%	11.7%	7.4%	7.4%	7.4%	7.3%	13.8%	16.8%	10.2%	12.6%	8.1%	10.7%	5.7%	3.4%	2.2%	4.2%	5.0%	6.9%	
	PPACA	Std \$2500 / 80%	\$151,841	-5.4%	1.8%	656	4.0%	4.0%	4.0%	7.5%	7.5%	7.5%	0.0%	0.0%	0.0%	-3.8%	-3.8%	-3.8%	16.7%	7.3%	15.2%	10.0%	9.5%	8.1%	8.5%	10.2%	1.2%	3.0%	3.5%	7.0%	3.1%	
	Corridor	Std \$100 / 90%	\$61,732	17.9%	0.0%	200	9.9%	9.9%	9.9%	5.6%	5.6%	5.6%	14.5%	14.5%	14.5%	19.9%	19.9%	19.9%	0.0%	0.0%	0.0%	21.0%	20.3%	15.0%	7.6%	23.3%	12.9%	0.0%	0.0%	0.0%	9.5%	
	Corridor	Std \$300 / 90%	\$94,023	2.8%	0.0%	296	9.9%	9.9%	9.9%	5.8%	5.8%	5.8%	8.1%	8.1%	8.1%	4.6%	4.6%	4.6%	0.0%	0.0%	0.0%	14.2%	10.3%	3.0%	19.4%	18.0%	35.1%	0.0%	0.0%	0.0%	7.5%	
	Corridor	Std \$300 / 80%	\$70,976	10.8%	0.0%	360	9.9%	9.9%	9.9%	5.9%	5.9%	5.9%	12.6%	12.6%	12.6%	12.7%	12.7%	12.7%	0.0%	0.0%	0.0%	24.9%	13.1%	13.5%	16.1%	11.0%	21.4%	0.0%	0.0%	0.0%	9.2%	
	Corridor	Std \$500 / 80%	\$207,415	9.7%	0.0%	870	9.9%	9.9%	9.9%	9.3%	9.3%	9.3%	5.2%	5.2%	5.2%	19.9%	19.9%	19.9%	0.0%	0.0%	0.0%	13.9%	12.6%	12.4%	12.0%	22.6%	26.6%	0.0%	0.0%	0.0%	6.8%	
	Corridor	Std \$750 / 80%	\$157,815	9.8%	0.0%	767	9.9%	9.9%	9.9%	9.2%	9.2%	9.2%	9.2%	9.2%	9.2%	19.9%	19.9%	19.9%	0.0%	0.0%	0.0%	18.9%	7.3%	11.7%	20.2%	12.9%	29.0%	0.0%	0.0%	0.0%	9.2%	
	Corridor	Std \$2500 / 80%	\$105,846	13.5%	0.0%	643	9.9%	9.9%	9.9%	6.5%	6.5%	6.5%	19.6%	19.6%	19.6%	15.4%	15.4%	15.4%	0.0%	0.0%	0.0%	17.7%	32.7%	3.4%	12.5%	9.7%	23.9%	0.0%	0.0%	0.0%	12.5%	
78079DC012	UW Standard	Total	\$2,394,666	7.8%	1.3%	9,098																									8.2% Yes	
	PPACA	Svr \$2500 / 70%	\$289,022	1.3%	1.8%	1,516	9.8%	9.8%	9.8%	12.6%	12.6%	12.6%	12.1%	12.1%	12.1%	7.4%	7.4%	7.4%	14.8%	10.5%	6.1%	8.3%	2.7%	7.5%	6.7%	8.4%	14.9%	4.8%	6.3%	9.0%	10.5%	
	PPACA	Svr \$5000 / 100%	\$112,322	-1.7%	1.8%	641	3.6%	3.6%	3.6%	6.1%	6.1%	6.1%	2.5%	2.5%	2.5%	-1.7%	-1.7%	-1.7%	11.8%	14.1%	11.7%	1.8%	8.7%	6.4%	9.5%	8.1%	8.2%	6.7%	0.9%	12.1%	2.7%	
	PPACA	Svr \$10000 / 100%	\$91,333	-2.3%	1.8%	725	3.4%	3.4%	3.4%	5.7%	5.7%	5.7%	1.6%	1.6%	1.6%	-2.5%	-2.5%	-2.5%	13.2%	9.3%	0.0%	7.3%	2.0%	5.5%	5.7%	3.2%	27.6%	14.1%	4.1%	8.0%	1.5%	
	Corridor	Svr \$2500 / 70%	\$44,327	17.4%	0.0%	424	9.9%	9.9%	9.9%	12.1%	12.1%	12.1%	19.9%	19.9%	19.9%	9.2%	9.2%	9.2%	0.0%	0.0%	0.0%	14.6%	34.1%	24.0%	13.8%	4.7%	8.7%	0.0%	0.0%	0.0%	14.3%	
	Corridor	Svr \$5000 / 100%	\$17,398	3.0%	0.0%	137	9.8%	9.8%	9.8%	12.0%	12.0%	12.0%	5.0%	5.0%	5.0%	-0.9%	-0.9%	-0.9%	0.0%	0.0%	0.0%	11.8%	7.8%	10.8%	7.3%	59.3%	3.0%	0.0%	0.0%	0.0%	7.2%	
	Corridor	Svr \$10000 / 100%	\$7,785	0.0%	0.0%	157	9.9%	9.9%	9.9%	12.1%	12.1%	12.1%	10.6%	10.6%	10.6%	4.6%	4.6%	4.6%	0.0%	0.0%	0.0%	6.2%	8.7%	0.0%	8.0%	53.4%	23.7%	0.0%	0.0%	0.0%	10.8%	
78079DC013	Saver	Total	\$562,187	1.4%	1.6%	3,600																									7.7% Yes	
	PPACA	HSA \$1200 / 80%	\$3,047,335	2.0%	1.9%	12,831	9.9%	9.9%	9.9%	14.4%	14.4%	14.4%	16.7%	16.7%	16.7%	8.2%	8.2%	8.2%	9.9%	9.3%	7.4%	8.6%	7.3%	8.9%	9.7%	6.2%	7.6%	9.2%	9.8%	6.0%	12.1%	
	PPACA	HSA \$2700 / 100%	\$2,423,138	2.8%	1.9%	12,282	7.6%	7.6%	7.6%	13.3%	13.3%	13.3%	16.5%	16.5%	16.5%	8.0%	8.0%	8.0%	10.3%	10.4%	8.2%	5.8%	6.7%	9.1%	7.4%	7.9%	9.8%	9.9%	7.5%	7.1%	11.2%	
78079DC003	HSA	Total	\$5,470,472	2.4%	1.9%	25,113																									11.7% No	
	PPACA	Std \$100 / 90%	\$391,125	9.8%	1.8%	274	9.9%	9.9%	9.9%	11.0%	11.0%	11.0%	19.9%	19.9%	19.9%	14.8%	14.8%	14.8%	4.3%	14.7%	5.8%	14.6%	15.9%	15.1%	10.1%	0.0%	6.5%	1.8%	8.8%	2.4%	12.7%	
	PPACA	Std \$300 / 80%	\$860,485	6.2%	1.8%	877	9.5%	9.5%	9.5%	14.8%	14.8%	14.8%	19.9%	19.9%	19.9%	14.9%	14.9%	14.9%	2.0%	10.8%	10.5%	15.4%	4.9%	7.0%	6.2%	6.8%	7.9%	10.2%	9.3%	8.9%	14.7%	
78079DC005	HIPAA Standard	Total	\$1,251,609	7.3%	1.8%	1,151																									14.1% No	

CareFirst BlueCross Blue Shield
Itemization of Premium Components by Product
Individual non-Medigap: DC GHMSI

	1	2	3	4	5
H.S.A.					
Members a/o 12/31/12		3,044			
Member to Contract Ratio		1,335			
	Function	PMPM	%		\$s
1	Projected Claims (+ Capitations)	\$137.54	73.3%		\$5,023,981
2	Admin Costs	\$26.30	14.0%		\$960,826
3	Broker Commissions & Fees	\$14.80	7.9%		\$540,597
4	Contrib to Reserve	\$0.00	0.00%		\$0
5	Invst Income Credit	(\$0.00)	0.0%		(\$7)
6	Premium Tax/Community Health Investment	\$3.75	2.0%		\$137,151
7	Assessment Fees	\$0.16	0.1%		\$5,990
8	Federal Income Tax	\$0.00	0.00%		\$0
9	State Income Tax	\$0.00	0.0%		\$0
10	Patient-Centered Outcome Fee	\$0.17	0.09%		\$6,088
11	Reinsurance Fee	\$3.14	1.67%		\$114,655
12	Insurer Fee Tax	\$1.87	1.00%		\$68,269
13	Risk Charge	\$0.00	0.0%		\$0
14	SUBTOTAL:	\$188	100.0%		\$6,857,551
Saver					
17	Members a/o 12/31/12				
18	Member to Contract Ratio				
19	Projected Claims (+ Capitations)	\$100.86	69.5%		\$716,475
20	Admin Costs	\$20.32	14.0%		\$144,359
21	Broker Commissions & Fees	\$16.08	11.1%		\$114,234
22	Contrib to Reserve	\$0.00	0.0%		\$0
23	Invst Income Credit	(\$0.00)	0.00%		(\$1)
24	Premium Tax/Community Health Investment	\$2.90	2.0%		\$20,606
25	Assessment Fees	\$0.13	0.1%		\$900
26	Federal Income Tax	\$0.00	0.0%		\$0
27	State Income Tax	\$0.00	0.0%		\$0
28	Patient-Centered Outcome Fee	\$0.17	0.1%		\$1,184
29	Reinsurance Fee	\$3.14	2.2%		\$22,298
30	Insurer Fee Tax	\$1.44	1.0%		\$10,257
31	Risk Charge	\$0.00	0.0%		\$0
32	SUM:	\$145	100.0%		\$1,030,313
Standard					
35	Members a/o 12/31/12				
36	Member to Contract Ratio				
37	Projected Claims (+ Capitations)	\$314.65	78.3%		\$16,820,998
38	Admin Costs	\$56.28	14.0%		\$3,008,694
39	Broker Commissions & Fees	\$15.06	3.7%		\$805,089
40	Contrib to Reserve	\$0.00	0.0%		\$0
41	Invst Income Credit	(\$0.00)	0.00%		(\$21)
42	Premium Tax/Community Health Investment	\$8.03	2.0%		\$429,469
43	Assessment Fees	\$0.35	0.1%		\$18,757
44	Federal Income Tax	\$0.00	0.0%		\$0
45	State Income Tax	\$0.00	0.0%		\$0
46	Patient-Centered Outcome Fee	\$0.17	0.0%		\$8,910
47	Reinsurance Fee	\$3.14	0.8%		\$167,802
48	Insurer Fee Tax	\$4.00	1.0%		\$213,774
49	Risk Charge	\$0.00	0.0%		\$0
50	SUM:	\$402	100.0%		\$21,473,473
TOTAL					
53	Members a/o 12/31/12				
54	Member to Contract Ratio				
55	Projected Claims (+ Capitations)	\$232	76.8%		\$22,561,454
56	Admin Costs	\$42.37	14.0%		\$4,113,879
57	Broker Commissions & Fees	\$15.04	5.0%		\$1,459,920
58	Contrib to Reserve	\$0.00	0.0%		\$0
59	Invst Income Credit	(\$0.00)	0.00%		(\$29)
60	Premium Tax/Community Health Investment	\$6.05	2.0%		\$587,227
61	Assessment Fees	\$0.26	0.1%		\$25,647
62	Federal Income Tax	\$0.00	0.0%		\$0
63	State Income Tax	\$0.00	0.0%		\$0
64	Patient-Centered Outcome Fee	\$0.17	0.1%		\$16,182
65	Reinsurance Fee	\$3.14	1.0%		\$304,756
66	Insurer Fee Tax	\$3.01	1.0%		\$292,300
67	Risk Charge	\$0.00	0.0%		\$0
68	SUBTOTAL:	\$302	100.0%		\$29,361,336

CareFirst GHMSI, Inc.
Individual Non-Medigap
Underwritten Products - Standard, Saver & HSA Medical & RX
Rates Effective 7/1/2013
Age & Tier Factors

Standard & Saver & HSA & HIPAA Products						
Age Band	Age	Tier Factors				Age Factor
	Factor	Ind	Ind & Child(ren)	Ind & Adult	Family	Incremental Change
0-5	0.550	1.00				
6-18	0.490	1.00	2.02	2.00	2.72	-10.9%
19-20	0.727	1.00	2.02	2.00	2.72	48.4%
21	0.727	1.00	2.02	2.00	2.72	0.0%
22	0.727	1.00	2.02	2.00	2.72	0.0%
23	0.727	1.00	2.02	2.00	2.72	0.0%
24	0.727	1.00	2.02	2.00	2.72	0.0%
25	0.727	1.00	2.02	2.00	2.72	0.0%
26	0.727	1.00	2.02	2.00	2.72	0.0%
27	0.727	1.00	2.02	2.00	2.72	0.0%
28	0.727	1.00	2.02	2.00	2.72	0.0%
29	0.727	1.00	2.02	2.00	2.72	0.0%
30	0.727	1.00	2.02	2.00	2.72	0.0%
31	0.727	1.00	2.02	2.00	2.72	0.0%
32	0.727	1.00	2.02	2.00	2.72	0.0%
33	0.746	1.00	2.02	2.00	2.72	2.6%
34	0.775	1.00	2.02	2.00	2.72	3.9%
35	0.805	1.00	2.02	2.00	2.72	3.9%
36	0.836	1.00	2.02	2.00	2.72	3.9%
37	0.869	1.00	2.02	2.00	2.72	3.9%
38	0.903	1.00	2.02	2.00	2.72	3.9%
39	0.938	1.00	2.02	2.00	2.72	3.9%
40	0.975	1.00	2.02	2.00	2.72	3.9%
41	1.013	1.00	2.02	2.00	2.72	3.9%
42	1.053	1.00	2.02	2.00	2.72	3.9%
43	1.094	1.00	2.02	2.00	2.72	3.9%
44	1.137	1.00	2.02	2.00	2.72	3.9%
45	1.181	1.00	2.02	2.00	2.72	3.9%
46	1.227	1.00	2.02	2.00	2.72	3.9%
47	1.275	1.00	2.02	2.00	2.72	3.9%
48	1.325	1.00	2.02	2.00	2.72	3.9%
49	1.377	1.00	2.02	2.00	2.72	3.9%
50	1.431	1.00	2.02	2.00	2.72	3.9%
51	1.487	1.00	2.02	2.00	2.72	3.9%
52	1.545	1.00	2.02	2.00	2.72	3.9%
53	1.605	1.00	2.02	2.00	2.72	3.9%
54	1.668	1.00	2.02	2.00	2.72	3.9%
55	1.733	1.00	2.02	2.00	2.72	3.9%
56	1.801	1.00	2.02	2.00	2.72	3.9%
57	1.871	1.00	2.02	2.00	2.72	3.9%
58	1.944	1.00	2.02	2.00	2.72	3.9%
59	2.020	1.00	2.02	2.00	2.72	3.9%
60	2.099	1.00	2.02	2.00	2.72	3.9%
61	2.181	1.00	2.02	2.00	2.72	3.9%
62	2.181	1.00	2.02	2.00	2.72	0.0%
63	2.181	1.00	2.02	2.00	2.72	0.0%
64	2.181	1.00	2.02	2.00	2.72	0.0%
65	2.181	1.00	2.02	2.00	2.72	0.0%
>65 Non-Medicare Eligible	2.181	1.00	2.02	2.00	2.72	0.0%
>65 Medicare Eligible **	2.181	1.00	2.02	2.00	2.72	0.0%

Impact of age change upon renewal Ages 18 - 65

Min	0.0%
Max	3.9%
Average	2.4%

** Only for renewals; not available for new sales.

CareFirst BlueCross BlueShield (GHMSI)
 Experience & Development of Normalized Trends
 D Individual Non-Medigap Rate Filing Effective 07/2013
 Experience Period : Incurred 10/2011 - 09/2012 & Paid Through 12/2012
 Rating Period : Incurred 07/2013 - 09/2014

PPACA
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(a) Current Rate Level	(b)	(c)	(d) 04/2013		(e) =(e)/(f)		(f)	(g)	(h)=(d)+(f)		(i)=(e)+(g)	(j)=(i)/(c)			(k)			(l)		
			Medical	Rx	Total	Monthly Loss Ratio			Rolling-12 Loss Ratio			Monthly Incurred PMPM	Rolling-12 Incurred PMPM			Observed Rolling 12 Month Trend				
Date	Contract	Member	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Total	Med	Rx	Total	Total	Med	Rx	Total	Med	Rx	Total	
200810	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200811	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200812	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200901	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200902	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200903	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200904	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200905	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200906	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200907	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200908	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200909	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200910	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200911	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
200912	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201001	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201002	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201003	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201004	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201005	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201006	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201007	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201008	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201009	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201010	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -												
201011	11	13	\$ 2,017	\$ 336	\$ 571	\$ 61	\$ 2,588	\$ 398	15%	17%	11%	15%	\$31	\$26	\$5	\$31				
201012	46	50	\$ 10,757	\$ 463	\$ 2,769	\$ 156	\$ 13,526	\$ 618	5%	6%	6%	6%	\$12	\$13	\$3	\$16				
201101	87	100	\$ 21,766	\$ 13,564	\$ 5,736	\$ 147	\$ 27,502	\$ 13,711	50%	42%	4%	34%	\$137	\$88	\$2	\$90				
201102	141	154	\$ 33,592	\$ 7,879	\$ 8,773	\$ 1,076	\$ 42,365	\$ 8,955	21%	33%	8%	28%	\$58	\$70	\$5	\$75				
201103	188	209	\$ 45,861	\$ 8,568	\$ 11,931	\$ 4,027	\$ 57,793	\$ 12,596	22%	27%	18%	25%	\$60	\$59	\$10	\$69				
201104	222	246	\$ 56,645	\$ 14,257	\$ 14,524	\$ 6,261	\$ 71,168	\$ 20,517	29%	26%	26%	26%	\$83	\$58	\$15	\$74				
201105	266	297	\$ 71,488	\$ 42,481	\$ 18,131	\$ 15,092	\$ 89,619	\$ 57,573	64%	36%	43%	38%	\$194	\$82	\$25	\$107				
201106	303	347	\$ 79,931	\$ 29,778	\$ 20,407	\$ 18,163	\$ 100,338	\$ 47,941	48%	36%	54%	40%	\$138	\$83	\$32	\$115				
201107	323	376	\$ 86,887	\$ 54,019	\$ 22,199	\$ 17,789	\$ 109,086	\$ 71,808	66%	42%	60%	46%	\$191	\$96	\$35	\$131				
201108	359	419	\$ 93,906	\$ 71,325	\$ 24,013	\$ 19,555	\$ 117,919	\$ 90,880	77%	48%	64%	51%	\$217	\$110	\$37	\$147				
201109	390	449	\$ 104,394	\$ 48,860	\$ 26,433	\$ 28,329	\$ 130,827	\$ 77,190	59%	48%	71%	53%	\$172	\$110	\$42	\$151				
201110	394	452	\$ 107,518	\$ 41,897	\$ 26,940	\$ 23,052	\$ 134,457	\$ 64,949	48%	47%	73%	52%	\$144	\$107	\$43	\$150				
201111	414	476	\$ 109,457	\$ 48,203	\$ 27,151	\$ 26,700	\$ 136,608	\$ 74,903	55%	46%	77%	53%	\$157	\$107	\$45	\$152	312.4%	850.3%	395.4%	
201112	430	485	\$ 117,052	\$ 37,229	\$ 29,043	\$ 34,635	\$ 146,095	\$ 71,864	49%	45%	83%	53%	\$148	\$104	\$49	\$153	722.2%	1310.2%	847.8%	
201201	450	511	\$ 123,111	\$ 59,578	\$ 30,919	\$ 22,922	\$ 154,030	\$ 82,499	54%	45%	84%	53%	\$161	\$105	\$49	\$154	19.1%	2102.3%	70.7%	
201202	466	536	\$ 130,780	\$ 73,425	\$ 32,446	\$ 25,672	\$ 163,226	\$ 99,097	61%	47%	85%	55%	\$185	\$110	\$50	\$161	57.2%	1009.5%	115.1%	
201203	494	577	\$ 138,979	\$ 65,094	\$ 34,696	\$ 37,938	\$ 173,675	\$ 103,032	59%	48%	90%	56%	\$179	\$113	\$53	\$167	93.5%	413.6%	141.8%	
201204	520	605	\$ 149,453	\$ 106,615	\$ 37,414	\$ 38,553	\$ 186,867	\$ 145,169	78%	52%	94%	60%	\$240	\$123	\$56	\$178	110.2%	267.1%	142.6%	
201205	531	615	\$ 153,614	\$ 106,494	\$ 38,342	\$ 39,497	\$ 191,957	\$ 145,991	76%	53%	95%	62%	\$237	\$127	\$57	\$184	55.0%	126.8%	71.9%	
201206	533	622	\$ 157,049	\$ 241,171	\$ 38,870	\$ 38,758	\$ 195,919	\$ 279,929	143%	65%	96%	71%	\$450	\$156	\$58	\$214	88.0%	81.7%	86.3%	
201207	554	651	\$ 162,427	\$ 152,275	\$ 40,491	\$ 29,371	\$ 202,917	\$ 181,646	90%	68%	94%	73%	\$279	\$164	\$57	\$214	72.0%	62.9%	69.5%	
201208	577	684	\$ 169,686	\$ 124,302	\$ 42,262	\$ 34,774	\$ 211,948	\$ 159,076	75%	68%	94%	73%	\$233	\$166	\$55	\$223	51.1%	53.2%	51.7%	
201209	599	713	\$ 177,733	\$ 111,286	\$ 44,365	\$ 28,354	\$ 222,098	\$ 139,640	63%	69%	90%	73%	\$196	\$169	\$57	\$223	53.8%	31.9%	47.8%	
201210	621	739	\$ 181,771	\$ 136,620	\$ 45,371	\$ 34,336	\$ 227,142	\$ 170,956	75%	71%	89%	75%	\$231	\$175	\$54	\$229	63.3%	26.3%	52.7%	
201211	638	768	\$ 185,210	\$ 165,779	\$ 46,576	\$ 41,955	\$ 231,786	\$ 207,734	90%	75%	88%	77%	\$270	\$184	\$54	\$238	72.4%	20.8%	57.1%	
201212	646	783	\$ 195,327	\$ 99,285	\$ 48,947	\$ 34,513	\$ 244,274	\$ 133,798	55%	75%	85%	77%	\$171	\$185	\$52	\$237	77.2%	7.2%	55.0%	
Experience Period	5,962	6,927	\$ 1,696,859	\$ 1,167,569	\$ 422,939	\$ 380,225	\$ 2,119,797	\$ 1,547,794	0%	69%	90%	73%	\$223	\$169	\$55	\$223	53.8%	31.9%	47.8%	

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PPO-UW-Svr
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(a) Current Rate Level	(b) Contract	(c) Member	(d) 04/2013		(e) =(e)/(f)		(f)		(g)		(h)=(d)+(f)		(i)=(e)+(g)		(j)=(i)/(c)			(k)			(l)		
			Medical		Rx		Total		Monthly Loss Ratio	Rolling-12 Loss Ratio			Monthly Incurred PMPM	Rolling-12 Incurred PMPM			Observed Rolling 12 Month Trend						
			Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Total	Med	Rx	Total	Total	Med	Rx	Total	Med	Rx	Total				
200810	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200811	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200812	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200901	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200902	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200903	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200904	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200905	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200906	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200907	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200908	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200909	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200910	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200911	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
200912	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201001	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201002	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201003	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201004	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201005	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201006	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201007	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201008	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201009	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201010	0	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -													
201011	6	6	\$ 567	\$ -	\$ -	\$ 91	\$ -	\$ -	\$ 658	\$ -	0%	0%	0%	0%	\$0	\$0	\$0	\$0					
201012	20	23	\$ 2,520	\$ 654	\$ 407	\$ -	\$ -	\$ 2,928	\$ 654	\$ 22%	21%	0%	18%	\$28	\$23	\$0	\$23						
201101	44	52	\$ 6,570	\$ 968	\$ 1,015	\$ -	\$ -	\$ 7,585	\$ 968	\$ 13%	17%	0%	15%	\$19	\$20	\$0	\$20						
201102	63	71	\$ 9,443	\$ 2,440	\$ 1,415	\$ -	\$ -	\$ 10,858	\$ 2,440	\$ 22%	21%	0%	18%	\$34	\$27	\$0	\$27						
201103	77	88	\$ 11,853	\$ 8,517	\$ 1,771	\$ 4	\$ -	\$ 13,623	\$ 8,521	\$ 63%	41%	0%	35%	\$97	\$52	\$0	\$52						
201104	98	108	\$ 14,839	\$ 2,702	\$ 2,241	\$ 42	\$ -	\$ 17,080	\$ 2,745	\$ 16%	33%	1%	29%	\$25	\$44	\$0	\$44						
201105	113	125	\$ 17,021	\$ 7,643	\$ 2,534	\$ 335	\$ -	\$ 19,555	\$ 7,978	\$ 41%	36%	4%	32%	\$64	\$48	\$1	\$49						
201106	137	158	\$ 20,949	\$ 12,570	\$ 3,157	\$ 114	\$ -	\$ 24,106	\$ 12,684	\$ 53%	42%	4%	37%	\$80	\$56	\$1	\$57						
201107	154	170	\$ 22,912	\$ 40,977	\$ 3,441	\$ 317	\$ -	\$ 26,353	\$ 41,295	\$ 157%	72%	5%	63%	\$243	\$95	\$1	\$96						
201108	164	181	\$ 25,056	\$ 40,408	\$ 3,849	\$ 138	\$ -	\$ 28,905	\$ 40,547	\$ 140%	89%	5%	78%	\$224	\$119	\$1	\$120						
201109	193	210	\$ 28,722	\$ 39,241	\$ 4,376	\$ 298	\$ -	\$ 33,098	\$ 39,539	\$ 119%	97%	5%	85%	\$188	\$131	\$1	\$132						
201110	207	229	\$ 31,035	\$ 40,367	\$ 4,810	\$ 393	\$ -	\$ 35,845	\$ 40,760	\$ 114%	103%	6%	90%	\$178	\$138	\$1	\$139						
201111	221	248	\$ 35,259	\$ 7,764	\$ 5,430	\$ 1,310	\$ -	\$ 40,689	\$ 9,074	\$ 22%	90%	9%	80%	\$37	\$123	\$2	\$125						
201112	239	266	\$ 37,306	\$ 19,378	\$ 5,775	\$ 1,087	\$ -	\$ 43,081	\$ 20,466	\$ 48%	85%	10%	75%	\$77	\$117	\$2	\$119	419.1%		428.5%			
201201	236	269	\$ 40,353	\$ 11,629	\$ 6,179	\$ 583	\$ -	\$ 46,532	\$ 12,212	\$ 26%	79%	10%	70%	\$45	\$110	\$2	\$112	449.6%		460.4%			
201202	244	289	\$ 42,570	\$ 11,124	\$ 6,536	\$ 1,486	\$ -	\$ 49,106	\$ 12,611	\$ 26%	74%	12%	66%	\$44	\$104	\$3	\$106	287.3%		297.1%			
201203	245	284	\$ 42,795	\$ 22,117	\$ 6,554	\$ 1,182	\$ -	\$ 49,348	\$ 23,299	\$ 47%	71%	13%	64%	\$82	\$101	\$3	\$104	92.5%	18994.8%	97.9%			
201204	242	284	\$ 43,009	\$ 17,617	\$ 6,608	\$ 1,297	\$ -	\$ 49,617	\$ 18,914	\$ 38%	70%	14%	63%	\$67	\$100	\$3	\$103	127.3%	2292.1%	133.8%			
201205	243	287	\$ 42,809	\$ 52,261	\$ 6,531	\$ 2,332	\$ -	\$ 49,340	\$ 54,593	\$ 111%	76%	17%	68%	\$190	\$110	\$4	\$113	126.4%	355.1%	130.1%			
201206	248	290	\$ 43,847	\$ 22,777	\$ 6,684	\$ 2,277	\$ -	\$ 50,531	\$ 25,054	\$ 50%	75%	19%	67%	\$86	\$108	\$4	\$113	92.5%	438.2%	97.3%			
201207	249	295	\$ 43,530	\$ 14,285	\$ 6,646	\$ 2,358	\$ -	\$ 50,176	\$ 16,643	\$ 33%	66%	21%	60%	\$56	\$95	\$5	\$100	0.0%	364.0%	3.8%			
201208	248	293	\$ 44,145	\$ 26,166	\$ 6,704	\$ 2,238	\$ -	\$ 50,848	\$ 28,404	\$ 56%	60%	23%	55%	\$97	\$88	\$5	\$93	-26.3%	436.2%	-22.5%			
201209	260	307	\$ 46,020	\$ 39,828	\$ 6,955	\$ 2,316	\$ -	\$ 52,975	\$ 42,145	\$ 80%	58%	25%	54%	\$137	\$85	\$6	\$91	-34.8%	438.9%	-31.0%			
201210	257	302	\$ 44,882	\$ 25,023	\$ 6,706	\$ 2,621	\$ -	\$ 51,588	\$ 27,645	\$ 54%	53%	27%	50%	\$92	\$79	\$6	\$85	-42.8%	434.6%	-38.9%			
201211	254	297	\$ 44,214	\$ 15,107	\$ 6,571	\$ 2,637	\$ -	\$ 50,784	\$ 17,744	\$ 35%	54%	29%	50%	\$60	\$80	\$6	\$87	-34.8%	264.7%	-30.5%			
201212	243	283	\$ 44,967	\$ 11,730	\$ 6,703	\$ 3,110	\$ -	\$ 51,670	\$ 14,840	\$ 29%	52%	31%	49%	\$52	\$77	\$7	\$85	-33.8%	231.4%	-29.0%			
Experience Period	2,882	3,341	\$ 492,677	\$ 285,314	\$ 75,413	\$ 18,859	\$ 568,089	\$ 304,173	0%	58%	25%	54%	\$91	\$85	\$6	\$91	-34.8%	438.9%	-31.0%				

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PPO-UW-HSA
 PPA

(a) Current Rate Level	(b)	(c)	(d) 04/2013		(e) =(e)/(f)		(f)	(g)	(h)=(d)+(f)	(i)=(e)+(g)	(j)=(i)/(c)			(k)			(l)		
			Medical	Rx	Total	Monthly Loss Ratio					Rolling-12 Loss Ratio			Monthly Incurred PMPM	Rolling-12 Incurred PMPM			Observed Rolling 12 Month Trend	
Date	Contract	Member	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Total	Med	Rx	Total	Med	Rx	Total	Med	Rx	Total	
200810	530	699	\$ 80,696	\$ 98,590	\$ -	\$ 13,463	\$ 80,696	\$ 112,053	139%			\$160							
200811	576	772	\$ 90,531	\$ 127,916	\$ -	\$ 12,828	\$ 90,531	\$ 140,744	155%			\$182							
200812	589	770	\$ 93,501	\$ 52,054	\$ -	\$ 13,627	\$ 93,501	\$ 65,681	70%			\$85							
200901	648	877	\$ 102,868	\$ 55,322	\$ -	\$ 870	\$ 102,868	\$ 56,192	55%			\$64							
200902	677	908	\$ 106,420	\$ 68,384	\$ -	\$ 6,653	\$ 106,420	\$ 75,037	71%			\$83							
200903	734	978	\$ 115,384	\$ 74,093	\$ -	\$ 8,444	\$ 115,384	\$ 82,537	72%			\$84							
200904	788	1,052	\$ 127,724	\$ 69,314	\$ -	\$ 10,440	\$ 127,724	\$ 79,755	62%			\$76							
200905	814	1,086	\$ 135,125	\$ 69,995	\$ -	\$ 12,549	\$ 135,125	\$ 82,544	61%			\$76							
200906	844	1,132	\$ 145,935	\$ 92,263	\$ -	\$ 19,650	\$ 145,935	\$ 111,913	77%			\$99							
200907	856	1,146	\$ 153,027	\$ 88,156	\$ -	\$ 15,853	\$ 153,027	\$ 104,009	68%			\$91							
200908	870	1,150	\$ 161,005	\$ 123,568	\$ -	\$ 15,931	\$ 161,005	\$ 139,499	87%			\$121							
200909	885	1,184	\$ 168,578	\$ 93,452	\$ -	\$ 24,706	\$ 168,578	\$ 118,159	70%	68%	79%	\$100	\$86	\$13	\$99				
200910	946	1,256	\$ 178,234	\$ 81,752	\$ -	\$ 30,502	\$ 178,234	\$ 112,254	63%	63%	74%	\$89	\$81	\$14	\$95				
200911	965	1,278	\$ 185,846	\$ 151,182	\$ -	\$ 33,374	\$ 185,846	\$ 184,556	99%	61%	72%	\$144	\$80	\$15	\$95				
200912	959	1,276	\$ 192,907	\$ 160,673	\$ -	\$ 37,319	\$ 192,907	\$ 197,992	103%	64%	76%	\$155	\$85	\$16	\$101				
201001	979	1,309	\$ 196,647	\$ 76,203	\$ -	\$ 2,810	\$ 196,647	\$ 79,013	40%	62%	73%	\$60	\$84	\$16	\$99				
201002	988	1,328	\$ 200,840	\$ 245,884	\$ -	\$ 8,671	\$ 200,840	\$ 254,555	127%	68%	79%	\$192	\$94	\$16	\$109				
201003	992	1,337	\$ 204,477	\$ 101,638	\$ -	\$ 19,865	\$ 204,477	\$ 121,503	59%	66%	77%	\$91	\$93	\$16	\$109				
201004	1,000	1,332	\$ 210,177	\$ 152,213	\$ -	\$ 20,177	\$ 210,177	\$ 172,386	82%	67%	79%	\$129	\$97	\$16	\$113				
201005	1,014	1,350	\$ 214,289	\$ 98,848	\$ -	\$ 28,735	\$ 214,289	\$ 127,583	60%	66%	78%	\$95	\$97	\$17	\$114				
201006	1,025	1,369	\$ 220,599	\$ 158,172	\$ -	\$ 36,942	\$ 220,599	\$ 195,114	88%	67%	79%	\$143	\$100	\$18	\$118				
201007	1,037	1,396	\$ 225,524	\$ 163,254	\$ -	\$ 28,063	\$ 225,524	\$ 191,317	85%	68%	80%	\$137	\$103	\$18	\$122				
201008	1,060	1,432	\$ 231,808	\$ 175,753	\$ -	\$ 25,992	\$ 231,808	\$ 201,344	87%	68%	80%	\$141	\$105	\$19	\$123				
201009	1,100	1,492	\$ 241,942	\$ 133,672	\$ -	\$ 41,233	\$ 241,942	\$ 174,906	72%	68%	80%	\$117	\$105	\$19	\$125	22.0%	47.0%	25.4%	
201010	1,239	1,643	\$ 266,890	\$ 166,040	\$ -	\$ 33,581	\$ 266,890	\$ 199,621	75%	69%	81%	\$121	\$108	\$19	\$127	33.2%	36.8%	33.8%	
201011	1,321	1,744	\$ 286,531	\$ 150,339	\$ -	\$ 30,266	\$ 286,531	\$ 180,765	63%	69%	78%	\$104	\$105	\$18	\$123	31.8%	22.6%	30.3%	
201012	1,358	1,791	\$ 297,944	\$ 297,295	\$ -	\$ 53,267	\$ 297,944	\$ 350,563	118%	69%	80%	\$196	\$110	\$19	\$128	29.4%	15.8%	27.2%	
201101	1,438	1,893	\$ 313,127	\$ 90,510	\$ -	\$ 3,840	\$ 313,127	\$ 94,350	30%	66%	78%	\$50	\$107	\$18	\$125	27.8%	15.0%	25.8%	
201102	1,536	2,037	\$ 338,079	\$ 173,236	\$ -	\$ 15,378	\$ 338,079	\$ 188,614	56%	61%	72%	\$93	\$99	\$18	\$117	5.7%	15.3%	7.1%	
201103	1,638	2,164	\$ 354,117	\$ 172,178	\$ -	\$ 16,697	\$ 354,117	\$ 188,875	53%	60%	71%	\$87	\$98	\$17	\$115	5.5%	6.6%	5.7%	
201104	1,677	2,210	\$ 361,926	\$ 163,974	\$ -	\$ 23,563	\$ 361,926	\$ 187,537	52%	58%	68%	\$85	\$95	\$16	\$111	-2.4%	0.9%	-1.9%	
201105	1,724	2,287	\$ 377,599	\$ 417,135	\$ -	\$ 23,515	\$ 377,599	\$ 440,650	117%	64%	74%	\$193	\$105	\$15	\$121	8.4%	-9.4%	5.7%	
201106	1,758	2,353	\$ 390,284	\$ 258,744	\$ -	\$ 42,553	\$ 390,284	\$ 301,297	77%	64%	73%	\$128	\$105	\$15	\$120	5.2%	-16.2%	2.0%	
201107	1,821	2,460	\$ 401,321	\$ 158,252	\$ -	\$ 41,033	\$ 401,321	\$ 199,285	50%	61%	70%	\$81	\$100	\$15	\$115	-2.9%	-19.1%	-5.3%	
201108	1,872	2,510	\$ 409,783	\$ 221,048	\$ 32	\$ 48,991	\$ 409,815	\$ 270,038	66%	59%	1168986%	\$108	\$98	\$15	\$113	-6.7%	-18.7%	-8.5%	
201109	1,937	2,583	\$ 420,383	\$ 270,650	\$ (133)	\$ 48,475	\$ 420,250	\$ 319,125	76%	60%	-377542%	\$124	\$99	\$15	\$114	-6.0%	-23.4%	-8.7%	
201110	1,956	2,613	\$ 424,043	\$ 261,899	\$ (290)	\$ 51,001	\$ 423,753	\$ 312,899	74%	60%	-101979%	\$120	\$99	\$15	\$114	-8.3%	-21.8%	-10.3%	
201111	1,971	2,627	\$ 427,599	\$ 337,966	\$ (108)	\$ 57,746	\$ 427,491	\$ 395,712	93%	63%	-85382%	\$151	\$103	\$15	\$118	-2.2%	-16.0%	-4.2%	
201112	1,961	2,623	\$ 435,548	\$ 362,976	\$ -	\$ 83,679	\$ 435,548	\$ 446,656	103%	62%	-91477%	\$170	\$102	\$16	\$118	-7.0%	-14.4%	-8.1%	
201201	2,000	2,674	\$ 442,510	\$ 123,554	\$ (218)	\$ 13,575	\$ 442,292	\$ 137,128	31%	61%	-65067%	\$51	\$100	\$16	\$116	-6.1%	-12.3%	-7.0%	
201202	2,071	2,772	\$ 454,640	\$ 211,805	\$ 110	\$ 21,967	\$ 454,750	\$ 233,772	51%	60%	-77911%	\$84	\$99	\$16	\$115	0.2%	-11.7%	-1.6%	
201203	2,082	2,781	\$ 459,824	\$ 284,463	\$ 256	\$ 32,872	\$ 460,080	\$ 317,335	69%	61%	-139371%	\$114	\$101	\$16	\$117	2.5%	-5.7%	1.3%	
201204	2,119	2,841	\$ 461,266	\$ 257,700	\$ -	\$ 39,666	\$ 461,266	\$ 297,365	64%	62%	-143960%	\$105	\$102	\$16	\$118	7.4%	-1.3%	6.1%	
201205	2,151	2,898	\$ 465,057	\$ 499,823	\$ (221)	\$ 51,259	\$ 464,837	\$ 551,082	119%	63%	-93242%	\$190	\$102	\$17	\$119	-2.9%	8.5%	-1.4%	
201206	2,160	2,927	\$ 467,192	\$ 211,257	\$ (156)	\$ 68,459	\$ 467,036	\$ 259,716	56%	61%	-74100%	\$89	\$99	\$17	\$116	-5.9%	10.8%	-3.8%	
201207	2,191	2,942	\$ 472,908	\$ 239,381	\$ (36)	\$ 63,445	\$ 472,872	\$ 302,825	64%	61%	-73552%	\$103	\$100	\$17	\$117	-0.2%	14.7%	1.8%	
201208	2,199	2,939	\$ 477,779	\$ 329,788	\$ (84)	\$ 72,835	\$ 477,695	\$ 402,623	84%	63%	-66557%	\$137	\$102	\$18	\$120	4.5%	15.7%	6.0%	
201209	2,252	3,010	\$ 482,106	\$ 256,357	\$ -	\$ 73,997	\$ 482,106	\$ 330,353	69%	62%	-81846%	\$110	\$100	\$18	\$119	1.5%	22.2%	4.2%	
201210	2,256	3,003	\$ 481,554	\$ 447,848	\$ (130)	\$ 78,840	\$ 481,424	\$ 526,288	109%	64%	-108914%	\$175	\$105	\$19	\$123	5.8%	25.3%	8.4%	
201211	2,281	3,027	\$ 485,735	\$ 422,807	\$ -	\$ 86,429	\$ 485,735	\$ 509,236	105%	65%	-139529%	\$168	\$106	\$19	\$125	3.3%	25.1%	6.2%	
201212	2,281	3,044	\$ 494,975	\$ 315,557	\$ -	\$ 118,112	\$ 494,975	\$ 433,669	88%	64%	-146734%	\$142	\$103	\$20	\$123	1.4%	25.0%	4.6%	

Experience Period 25,113 33,647 \$ 5,470,472 \$ 3,376,969 \$ (746) \$ 610,499 \$ 5,469,726 \$ 3,987,468 0% 62% -81846% 73% \$119 \$100 \$18 \$119 1.5% 22.2% 4.2%

CareFirst BlueCross BlueShield (GHMSI)
 Experience & Development of Normalized Trends
 D Individual Non-Medigap Rate Filing Effective 07/2013
 Experience Period : Incurred 10/2011 - 09/2012 & Paid Through 12/2012
 Rating Period : Incurred 07/2013 - 09/2014
 PPO-HIPAA-Std
 PPACA

(a)		(b)	(c)	(d)		(e)		(f)		(g)		(h)=(d)+(f)		(i)=(e)+(g)		(j)=(i)/(c)			(k)			(l)		
Current Rate Level				04/2013		=(e)/(f)																		
				Medical		Rx		Total		Monthly Loss Ratio	Rolling-12 Loss Ratio			Monthly Incurred PMPM	Rolling-12 Incurred PMPM			Observed Rolling 12 Month Trend						
Date	Contract	Member	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Revenue	Estimated Incurred Claims	Total		Med	Rx	Total	Total	Med	Rx	Total	Med	Rx	Total				
200810	118	135	\$ 103,018	\$ 64,220	\$ 16,176	\$ 9,199	\$ 119,193	\$ 73,419	62%				\$544											
200811	118	132	\$ 105,114	\$ 24,989	\$ 16,313	\$ 9,699	\$ 121,427	\$ 34,688	29%				\$263											
200812	113	127	\$ 102,736	\$ 32,727	\$ 15,644	\$ 6,856	\$ 118,380	\$ 39,582	33%				\$312											
200901	113	129	\$ 102,294	\$ 60,653	\$ 15,589	\$ 16,955	\$ 117,882	\$ 77,608	66%				\$602											
200902	108	125	\$ 99,604	\$ 33,510	\$ 14,913	\$ 12,585	\$ 114,517	\$ 46,095	40%				\$369											
200903	106	122	\$ 95,147	\$ 43,579	\$ 14,182	\$ 13,998	\$ 109,329	\$ 57,577	53%				\$472											
200904	108	120	\$ 94,871	\$ 57,547	\$ 13,967	\$ 14,286	\$ 108,838	\$ 71,833	66%				\$599											
200905	105	116	\$ 95,111	\$ 31,005	\$ 13,840	\$ 9,138	\$ 108,951	\$ 40,143	37%				\$346											
200906	103	115	\$ 98,036	\$ 37,465	\$ 13,997	\$ 7,793	\$ 112,033	\$ 45,258	40%				\$394											
200907	105	116	\$ 97,730	\$ 26,502	\$ 13,611	\$ 8,452	\$ 111,341	\$ 34,955	31%				\$301											
200908	103	114	\$ 96,784	\$ 29,623	\$ 13,459	\$ 5,861	\$ 110,243	\$ 35,485	32%				\$311											
200909	108	119	\$ 100,252	\$ 49,476	\$ 13,449	\$ 7,991	\$ 113,701	\$ 57,468	51%	41%	70%	45%	\$483	\$334	\$84	\$418								
200910	102	115	\$ 97,450	\$ 33,107	\$ 12,948	\$ 6,796	\$ 110,398	\$ 39,903	36%	39%	70%	43%	\$347	\$317	\$83	\$400								
200911	99	112	\$ 96,645	\$ 29,744	\$ 12,661	\$ 4,595	\$ 109,307	\$ 34,339	31%	40%	69%	43%	\$307	\$325	\$81	\$406								
200912	98	109	\$ 95,500	\$ 49,051	\$ 12,316	\$ 6,515	\$ 107,815	\$ 55,567	52%	41%	70%	45%	\$510	\$341	\$81	\$422								
201001	95	106	\$ 89,457	\$ 75,044	\$ 11,889	\$ 10,829	\$ 101,346	\$ 85,873	85%	43%	68%	46%	\$810	\$357	\$78	\$435								
201002	92	104	\$ 90,546	\$ 72,279	\$ 11,894	\$ 11,391	\$ 102,440	\$ 83,670	82%	47%	68%	49%	\$805	\$391	\$79	\$469								
201003	98	111	\$ 89,191	\$ 72,277	\$ 11,772	\$ 10,009	\$ 100,963	\$ 82,286	82%	49%	67%	51%	\$741	\$415	\$76	\$491								
201004	93	105	\$ 90,876	\$ 78,283	\$ 11,864	\$ 11,019	\$ 102,740	\$ 89,303	87%	51%	65%	53%	\$851	\$435	\$75	\$510								
201005	90	104	\$ 89,296	\$ 41,969	\$ 11,548	\$ 9,086	\$ 100,843	\$ 51,055	51%	53%	66%	54%	\$491	\$447	\$75	\$523								
201006	87	100	\$ 87,716	\$ 45,139	\$ 11,092	\$ 6,449	\$ 98,808	\$ 51,589	52%	54%	67%	55%	\$516	\$458	\$75	\$533								
201007	86	97	\$ 90,656	\$ 80,277	\$ 11,417	\$ 10,648	\$ 102,073	\$ 90,925	89%	59%	69%	60%	\$937	\$506	\$78	\$584								
201008	86	98	\$ 89,918	\$ 54,881	\$ 11,371	\$ 5,123	\$ 101,289	\$ 60,003	59%	62%	70%	62%	\$612	\$532	\$78	\$611								
201009	87	100	\$ 95,240	\$ 128,089	\$ 11,986	\$ 7,047	\$ 107,226	\$ 135,136	126%	69%	70%	69%	\$1,351	\$603	\$79	\$682	80.4%	-5.5%	63.2%					
201010	88	101	\$ 96,438	\$ 70,849	\$ 12,049	\$ 7,863	\$ 108,487	\$ 78,712	73%	72%	71%	72%	\$779	\$640	\$81	\$720	101.6%	-2.9%	79.9%					
201011	88	101	\$ 97,399	\$ 53,993	\$ 12,083	\$ 5,269	\$ 109,482	\$ 59,262	54%	75%	72%	74%	\$587	\$665	\$82	\$747	104.6%	1.6%	84.1%					
201012	91	104	\$ 99,867	\$ 53,907	\$ 12,311	\$ 5,448	\$ 112,178	\$ 59,355	53%	75%	71%	74%	\$571	\$672	\$81	\$753	97.1%	0.0%	78.4%					
201101	93	104	\$ 98,443	\$ 95,501	\$ 12,017	\$ 18,274	\$ 110,460	\$ 113,775	103%	76%	76%	76%	\$1,094	\$690	\$88	\$777	93.2%	11.8%	78.6%					
201102	88	100	\$ 99,477	\$ 55,979	\$ 12,101	\$ 18,095	\$ 111,578	\$ 74,074	66%	74%	81%	75%	\$741	\$678	\$93	\$772	73.7%	18.6%	64.4%					
201103	91	106	\$ 102,413	\$ 52,987	\$ 12,513	\$ 21,991	\$ 114,926	\$ 74,977	65%	71%	89%	73%	\$707	\$665	\$104	\$769	60.4%	35.5%	56.5%					
201104	90	105	\$ 104,889	\$ 54,839	\$ 12,837	\$ 18,740	\$ 117,726	\$ 73,578	62%	68%	94%	71%	\$701	\$646	\$110	\$756	48.5%	46.9%	48.3%					
201105	89	104	\$ 104,284	\$ 64,151	\$ 12,761	\$ 19,480	\$ 117,045	\$ 83,631	71%	69%	100%	73%	\$804	\$664	\$118	\$783	48.6%	56.9%	49.8%					
201106	90	105	\$ 104,877	\$ 94,392	\$ 13,045	\$ 26,030	\$ 117,922	\$ 120,422	102%	73%	112%	77%	\$1,147	\$702	\$134	\$836	53.2%	77.8%	56.7%					
201107	93	111	\$ 109,443	\$ 102,655	\$ 13,685	\$ 21,083	\$ 123,128	\$ 123,738	100%	73%	117%	78%	\$1,115	\$712	\$141	\$853	40.6%	80.3%	45.9%					
201108	95	113	\$ 110,719	\$ 196,457	\$ 14,004	\$ 47,590	\$ 124,724	\$ 244,047	196%	84%	143%	90%	\$2,160	\$816	\$173	\$989	53.3%	120.4%	62.0%					
201109	94	112	\$ 110,636	\$ 115,745	\$ 14,144	\$ 30,958	\$ 124,780	\$ 146,703	118%	82%	157%	90%	\$1,310	\$799	\$190	\$989	32.5%	141.1%	45.1%					
201110	95	114	\$ 111,622	\$ 85,676	\$ 14,421	\$ 37,622	\$ 126,043	\$ 123,298	98%	82%	174%	92%	\$1,082	\$802	\$212	\$1,014	25.4%	162.3%	40.7%					
201111	98	117	\$ 111,297	\$ 90,803	\$ 14,573	\$ 32,781	\$ 125,870	\$ 123,584	98%	84%	188%	95%	\$1,056	\$821	\$230	\$1,051	23.4%	181.0%	40.7%					
201112	97	113	\$ 102,952	\$ 124,236	\$ 13,754	\$ 48,534	\$ 116,706	\$ 172,770	148%	89%	213%	103%	\$1,529	\$869	\$262	\$1,131	29.4%	221.5%	50.1%					
201201	95	110	\$ 99,964	\$ 97,000	\$ 13,041	\$ 34,514	\$ 113,004	\$ 131,514	116%	89%	222%	104%	\$1,196	\$866	\$273	\$1,139	25.6%	211.6%	46.6%					
201202	98	112	\$ 101,516	\$ 238,392	\$ 13,663	\$ 38,170	\$ 115,179	\$ 276,562	240%	103%	232%	118%	\$2,469	\$996	\$286	\$1,282	46.9%	206.0%	66.1%					
201203	97	117	\$ 107,802	\$ 89,002	\$ 14,964	\$ 43,935	\$ 122,766	\$ 132,936	108%	106%	242%	121%	\$1,136	\$1,015	\$300	\$1,315	52.6%	189.4%	71.0%					
201204	97	112	\$ 102,971	\$ 135,853	\$ 14,098	\$ 49,347	\$ 117,069	\$ 185,200	158%	112%	259%	129%	\$1,654	\$1,070	\$321	\$1,391	65.6%	192.1%	84.0%					
201205	94	109	\$ 101,581	\$ 82,923	\$ 13,995	\$ 43,757	\$ 115,576	\$ 126,680	110%	114%	271%	132%	\$1,162	\$1,080	\$338	\$1,418	62.6%	185.3%	81.2%					
201206	95	110	\$ 101,869	\$ 93,247	\$ 13,888	\$ 47,865	\$ 115,757	\$ 141,112	122%	114%	283%	134%	\$1,283	\$1,076	\$353	\$1,428	53.2%	163.4%	70.9%					
201207	95	109	\$ 101,892	\$ 91,560	\$ 13,887	\$ 42,123	\$ 115,778	\$ 133,683	115%	114%	295%	135%	\$1,226	\$1,069	\$369	\$1,438	50.1%	162.0%	68.6%					
201208	96	110	\$ 104,984	\$ 105,011	\$ 14,349	\$ 39,453	\$ 119,333	\$ 144,464	121%	107%	290%	129%	\$1,313	\$1,003	\$364	\$1,367	22.9%	110.2%	38.2%					
201209	94	108	\$ 103,161	\$ 101,140	\$ 14,115	\$ 37,839	\$ 117,275	\$ 138,979	119%	107%	294%	129%	\$1,287	\$995	\$370	\$1,365	24.6%	94.4%	38.0%					
201210	93	107	\$ 103,979	\$ 140,948	\$ 14,220	\$ 36,542	\$ 118,200	\$ 177,491	150%	112%	294%	133%	\$1,659	\$1,042	\$371	\$1,413	29.9%	75.3%	39.4%					
201211	92	107	\$ 102,154	\$ 116,270	\$ 14,027	\$ 34,246	\$ 116,181	\$ 150,516	130%	115%	295%	136%	\$1,407	\$1,069	\$375	\$1,444	30.2%	62.9%	37.4%					
201212	89	104	\$ 101,278	\$ 128,514	\$ 13,880	\$ 37,783	\$ 115,158	\$ 166,296	144%	115%	289%	136%	\$1,599	\$1,080	\$369	\$1,449	24.2%	41.1%	28.1%					
Experience Period	1,151	1,341	\$ 1,251,609	\$ 1,334,842	\$ 168,747	\$ 495,940	\$ 1,420,356	\$ 1,830,782	0%	107%	294%	129%	\$1,365	\$995	\$370	\$1,365	24.6%	94.4%	38.0%					