

DEPARTMENT OF INSURANCE

Legal Division

45 Fremont Street, 24th Floor
San Francisco CA 94105



California Rate Filing Form
For Individual and Small Group Health Insurance
Rate Filings for Existing Products, Version 2
(do not use this form for initial filings for new product rates)

The rate filing submission should include:

- 1) This form
- 2) A California Rate Filing Spreadsheet
- 3) An actuarial certification
- 4) A spreadsheet with rate information responsive to Questions 10 & 15, below
- 5) A California Plain-Language Filing Form
- 6) A California Plain-Language Spreadsheet

1) Company Name:

2) Number of policy forms covered by the filing: _____

3) Policy form numbers covered by the filing:
List all of the policy form numbers covered by this filing in column "A" of the "California Rate Filing Spreadsheet". List all product names associated with each policy form number in column "B."

4) Product types covered by the filing. Selected from the following:

	HMO (Health Maintenance Organization)
	PPO (Preferred Provider Organization)
	EPO (Exclusive Provider Organization)
	POS (Point of Service)
	FFS (Fee for Service)
	Other (describe) _____

5) Segment type. One of the following:

<input type="checkbox"/>	Small Group (2-50 employees)
<input type="checkbox"/>	Individual

Note: Large Group, Small Group, and Individual filings should not be combined within a single filing.

6) Plan/Insurer Type. One of the following: for-profit company, not-for-profit company

<input type="checkbox"/>	For-profit company
<input type="checkbox"/>	Not-for-profit company

7) Whether the products are open or closed. List each open or closed product by policy form number.

For each policy form number, indicate in column "C" of the California Rate Filing Spreadsheet whether the products are open or closed.

If all policy forms listed are open, check here:

If all products listed are closed, check here:

If only some policy forms listed are closed, check here:

8) Enrollment:

In column "D" of the California Rate Filing Spreadsheet, state the number of lives, including dependents, covered by each product as of the end of the latest month for which the data has been compiled.

9) Insured months in each policy form

In column "E" of the California Rate Filing Spreadsheet, state the number of insured (or member) months for the experience period on which the rates were based. (Does not apply to rates for new products.)

10) Annual Rate

In a separate spreadsheet, for each product included in the filing, show the current and proposed annual premium rates for each rating cell.

11) Total earned premium

For each policy form list:

In column "F" of the California Rate Filing Spreadsheet, state the experience period on which rates are based,

In column "G" of the California Rate Filing Spreadsheet, state the period for which rates are to be effective,

In column "H" of the California Rate Filing Spreadsheet, state the total premium earned for the experience period on which the rates are based.

- 12) In column "I" of the California Rate Filing Spreadsheet, state the total dollar amount of incurred claims in each policy form for the experience period on which the rates are based.

If helpful to understanding the basis for the filed rate increases, the insurer may, but is not required to, disaggregate incurred claim data into the aggregate benefit categories listed in item 18 below.

- 13) In column "J" of the CA Rate Filing Spreadsheet, state the average rate increase initially requested

The weighted average of the proposed rate increases included in the filing, weighting the increases by the number of covered lives for each product (per item 8, above). Rates for new products are not included in this calculation, as they have a weight of zero. (Does not apply to rates for new products.)

- 14) Review category: One of the following:

	Initial Filing for New Product
	Filing for Existing Product
	Resubmission

Resubmissions should be submitted through SERFF under the same state filing number and SERFF tracking number assigned to the original submission of this filing. Do not submit resubmissions as a new filing.

- 15) Average rate of increase

In those instances in which there is a revision to the rates requested after initial submission, the revision should be submitted as an amendment to the original submission of this filing under the rate/rule form tab. Submit a revised California Rate Filing Form, a revised spreadsheet responsive to Question 10, and a revised California Rate Filing Spreadsheet, completing columns A, B, and J. Also, in the case of a resubmission, update the information under the "company rate information" field under the "Rate/Rule Schedule" tab in SERFF. The average rate of increase is a weighted average, calculated as in item 13, above.

- 16) Effective date of rate increase: _____

The earliest anticipated date that the proposed rate increase, or new product rate, will take effect for a policyholder.

- 17) Number of policyholders or insureds affected by each policy form

This information was provided in item 8, above, and need not be repeated.

- 18) Overall medical trend factor and trend factors by aggregate benefit category:

Overall Medical Trend Factor

“Overall” means the weighted average of trend factors used to determine rate increases included in the filing, weighting the factor for each aggregate benefit category by the amount of projected medical costs attributable to that category.

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Medical Trend Factor by Aggregate Benefit Category

The aggregate benefit categories are each of the following – hospital inpatient, hospital outpatient (including emergency room), physician and other professional services, prescription drugs from pharmacies, laboratory services (other than hospital inpatient), radiology services (other than hospital inpatient), other (describe).

Hospital Inpatient	
Hospital Outpatient (including ER)	
Physician/other professional services	
Prescription Drug	
Laboratory (other than inpatient)	
Radiology (other than inpatient)	
Other (describe)	

Optional Medical Trend Factor by Aggregate Benefit Category by Geographic Region

The insurer may, but is not required to, aggregate additional data in major geographic regions of the state. If the insurer chooses to so aggregate, the major geographic regions of the state are: Northern California (consisting of Monterey, Kings, Tulare, and Inyo counties, and all counties to the north), and Southern California (consisting of San Luis Obispo, Kern, and San Bernardino counties, and all counties to the south).

	North	South
Hospital Inpatient		
Hospital Outpatient (including ER)		
Physician/other professional services		
Prescription Drug		
Laboratory (other than inpatient)		
Radiology (other than inpatient)		
Other (describe)		

19) Projected medical trend

Use the same aggregate benefit categories used in item 18 –hospital inpatient, hospital outpatient (including emergency room), physician and other professional services, prescription drugs from pharmacies, laboratory services (other than hospital inpatient), radiology services (other than Hospital inpatient), other (describe). Furthermore, within each aggregate category quantify the sources of trend, i.e. use of services, price inflation, and fees and risk.

Projected Medical Trend by Aggregate Benefit Category

Hospital Inpatient	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:
Hospital Outpatient (including ER)	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:
Physician/other professional services	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:

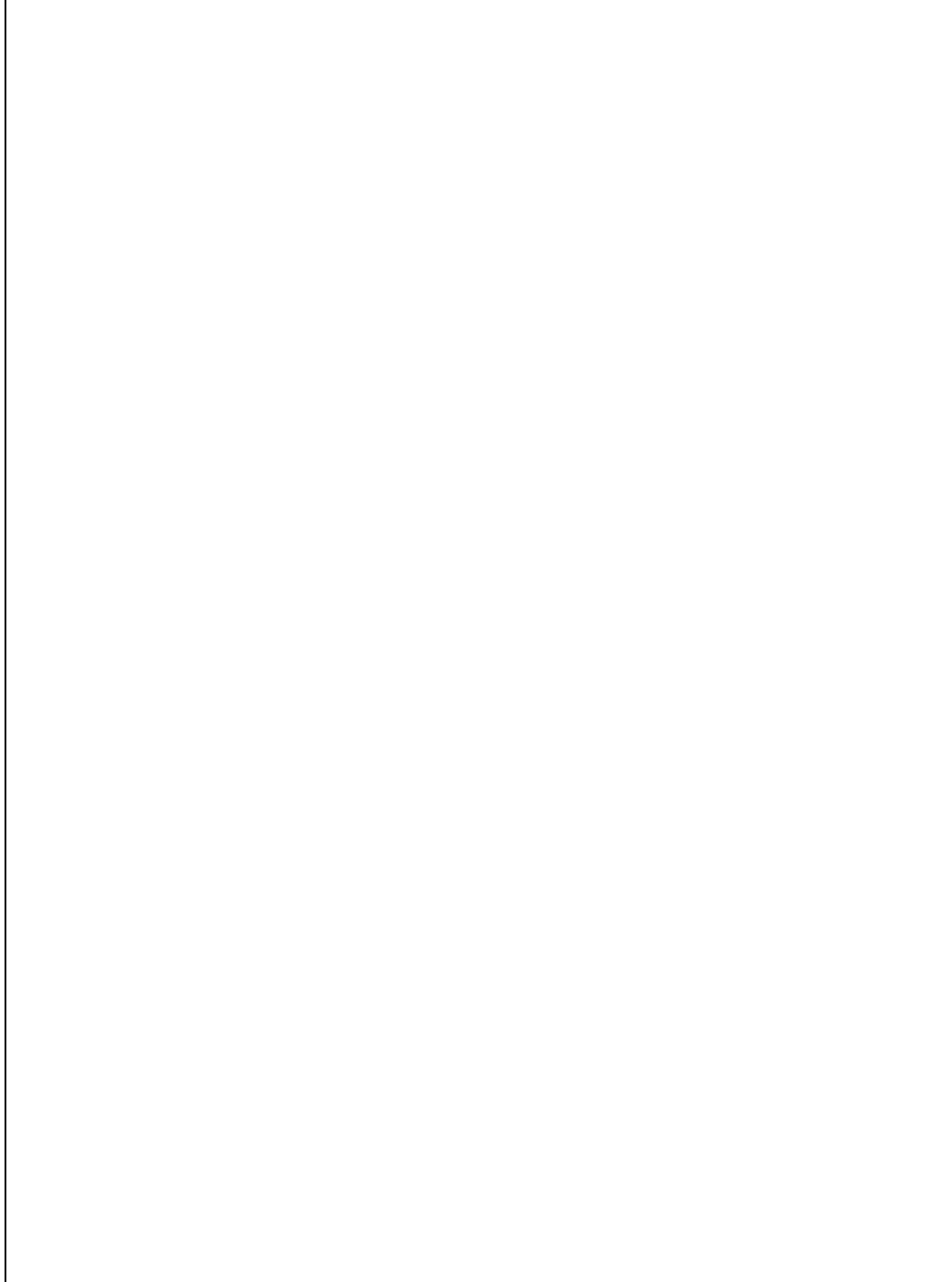
Prescription Drug	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:
Laboratory (other than inpatient)	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:
Radiology (other than inpatient)	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:
Other (describe)	

20) Comparison of claims cost and rate of changes over time

For each proposed rate increase, provide the projected annualized incurred claims cost per insured for the period covered by the proposed rate, the historical incurred claims cost per insured for the most recent 12 months of the experience period on which the rates were based, and the historical incurred claims cost per insured for the next two most recent 12 month periods. Also, compare the rate of change of claims costs over all of the projected and historical periods for which information is provided. Show all claim costs according to aggregate benefit category.

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- 21) Describe any changes in enrollee/insured cost-sharing, compared to the prior year, associated with the submitted rate filing, including both the absolute amount of the change, and the percentage change, and quantify the impact of each change on each of the rates included in the filing. Also describe any changes in benefits exempted from cost-sharing, as well as any newly-imposed cost-sharing.



- 22) Describe any changes in enrollee/insured benefits, including but not limited to hospital inpatient, hospital outpatient (including emergency services), physician and other professional services, laboratory services, radiology services, and other benefits (describe), compared to the prior year, associated with the submitted rate filing, and quantify the impact of each change on each of the rates included in the filing.

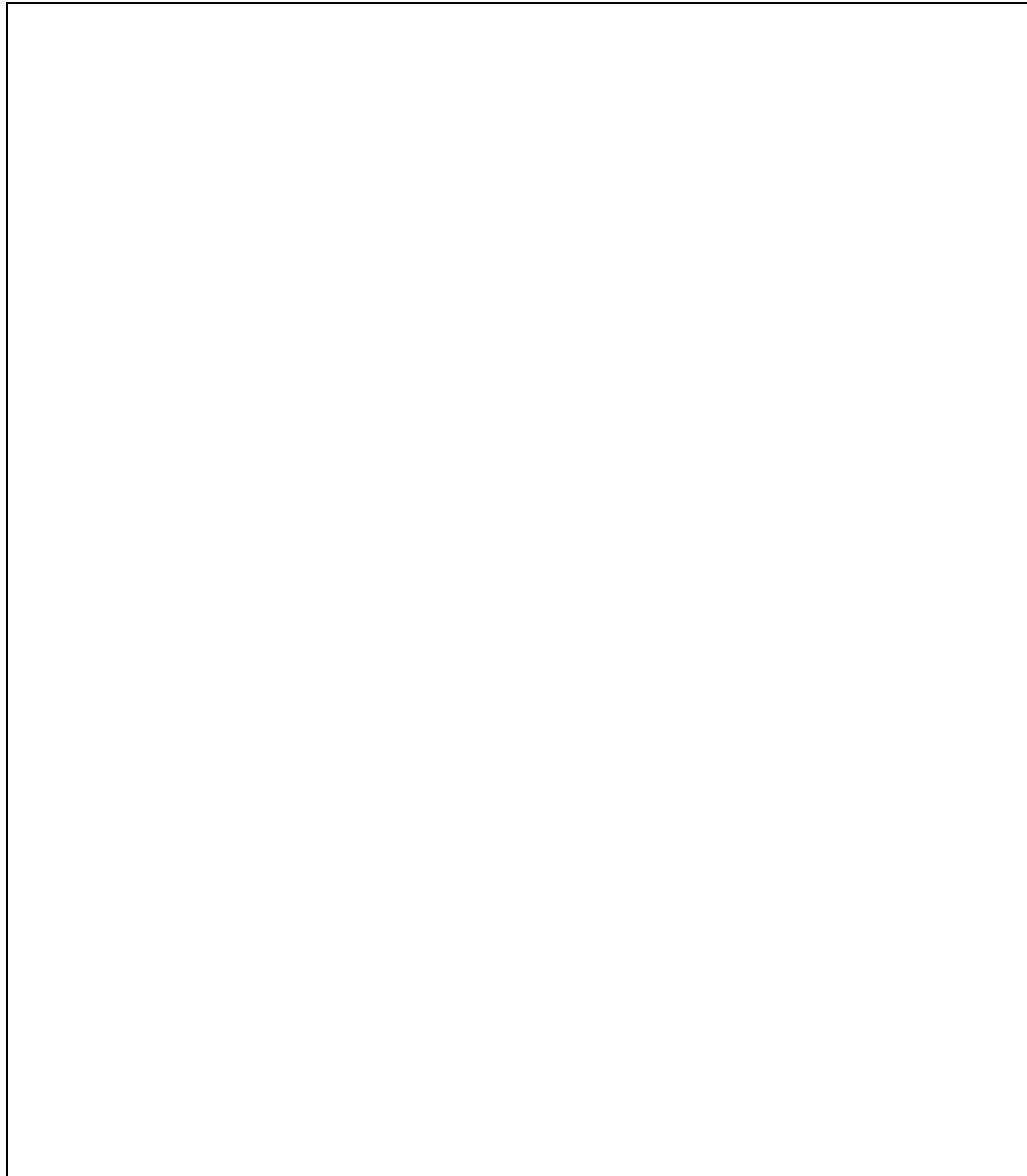
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- 23) Submit the required actuarial certification, described in Guidance 1163:2, under the "Supporting Documentation" tab in SERFF.

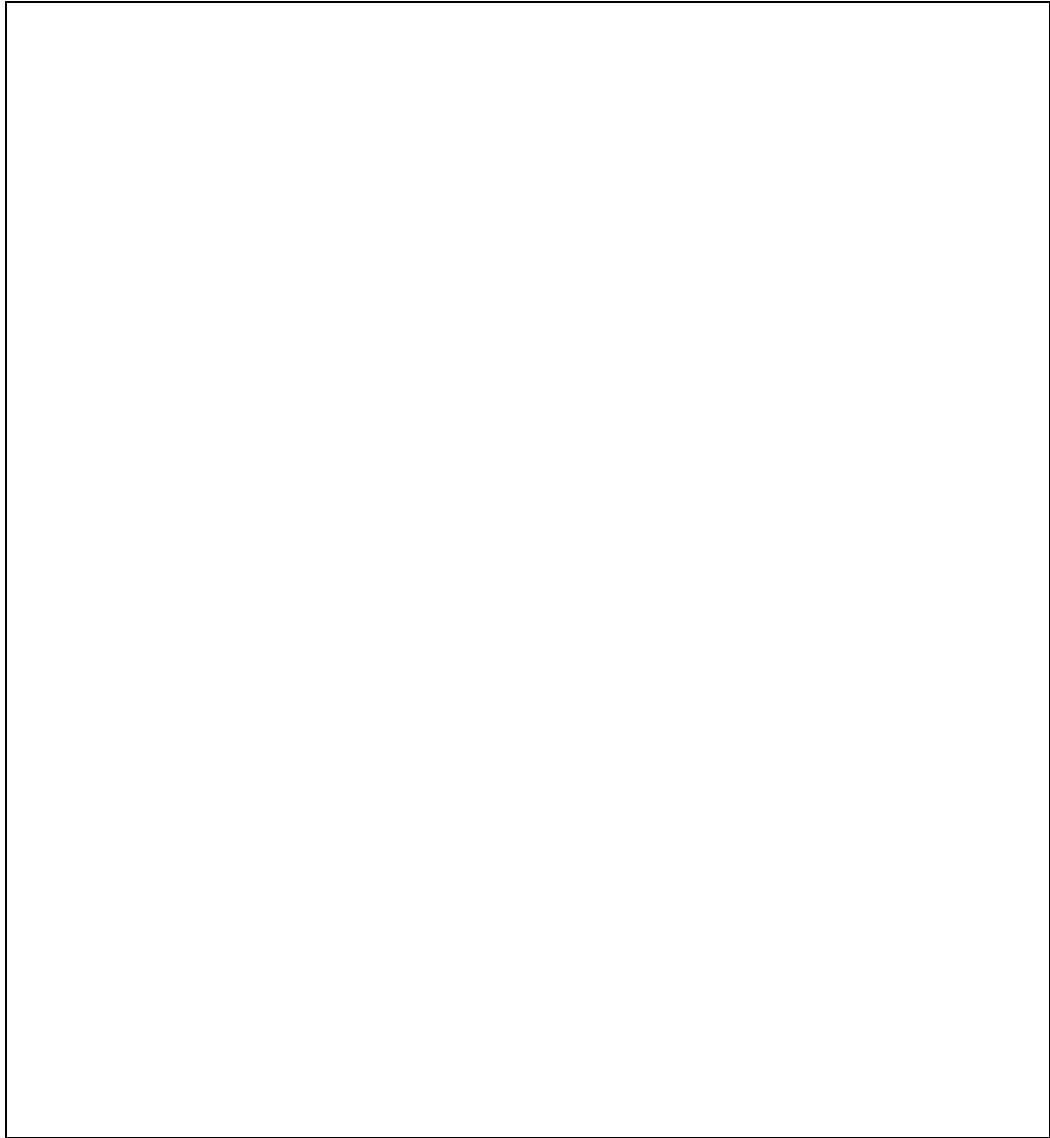
	Submitted
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24) Changes in administrative costs

Administrative costs are the costs defined in Sections 158.150, 158.151, 158.160, and 158.161 of 45 Code of Federal Regulations Subtitle A, Subchapter B, in the interim final rule issued by the Department of Health and Human Services on December 1, 2010 at 75 Federal Register 74924-74926. Using those definitions, describe the administrative costs for the policy forms included in this filing for the year prior to the requested rate increase, then also describe any changes in administrative costs, compared to the prior year, associated with the submitted rate filing, and quantify the impact of each change on each of the rates included in the filing. Changes should be shown separately for the costs defined by each of the sections of Code of Federal Regulations listed above in this item. (Does not apply to rates for new products.)



26) Comments. Place any needed comments here.

A large, empty rectangular box with a thin black border, intended for providing comments. It occupies the central portion of the page.

#632743v16

DEPARTMENT OF INSURANCE

Legal Division

45 Fremont Street, 24th Floor
San Francisco CA 94105



**California Plain-Language
Rate Filing Description**
[for Web site posting, Health & Safety
Code 1385.07(d), Insurance Code 10181.7(d)]

Company Name:

SERFF Tracking Number

Department File Number: (will be completed by Department)

1. Justification for any unreasonable rate increases.

(Include all information as to why the rate increase is justified. Attach supporting documentation to this PDF file.)



2) Overall annual medical trend factor assumptions for all benefits

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3) Actual Costs by Aggregate Benefit Category

Hospital Inpatient	Dollar Cost:
	Cost as Percentage of Medicare:
Hospital Outpatient (including ER)	Dollar Cost:
	Cost as Percentage of Medicare:
Physician/other professional services	Dollar Cost:
	Cost as Percentage of Medicare:
Prescription Drug	Dollar Cost:
	Cost as Percentage of Average Wholesale Price:
Laboratory (other than inpatient)	Dollar Cost:
	Cost as Percentage of Medicare:

Radiology (other than inpatient)	Dollar Cost:
	Cost as Percentage of Medicare:
Other (describe)	Dollar Cost and Description:

4) Amount of Projected Trend, by Aggregate Benefit Category, Attributable to Use of Services, Price Inflation, Fees and Risk

Hospital Inpatient	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:
Hospital Outpatient (including ER)	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:

Physician/other professional services	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:
Prescription Drug	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:
Laboratory (other than inpatient)	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:
Radiology (other than inpatient)	Trend attributable to use of services:
	Trend attributable to price inflation:
	Trend attributable to fees and risk:
Other (describe)	

5) Other Information

Complete and submit the CA Plain Language Spreadsheet.

#630302v7

California Manual Rate Development Template

Company Legal Name: **Health Net Life Insurance Company** State: **CA**
 HIOS Issuer ID: **99110** Market: **Individual**
 Effective Date: **1/1/2017**

Market Level Calculations (Same for all Plans)

Section I:
 Experience Period: **1/1/2015** to **12/31/2015**
 Paid through **3/31/2016**
 PMPM
 Incurred Claims in Experience Period **\$476,066,711** 1,080.91
 Allowed Claims: **\$665,655,090** 1,511.38
 Experience Period Member Months **440,430**

Section II: Manual Rate Allowed Claims, PMPM basis

Experience Period

Projection Period: **1/1/2017** to **12/31/2017**

Mid-point to Mid-point, Experience to Projection: 24 months

Actual or Model Experience

Adjustments from Experience to Projection Period

Annualized Trend Factors

Projected Manual Allowed

Benefit Category	Utilization Description	Utilization per 1,000	Average Cost/Service	Allowed		Net Claims	
				PMPM	Cost PMPM	PMPM	Cost PMPM
Inpatient Hospital	Admits	123.40	\$34,216.55	\$ 351.87	100.22	\$ 251.65	
Outpatient Hospital	Visits	327.29	\$5,323.52	145.19	41.35	103.84	
Professional	Visits	12,739.76	\$795.53	844.58	240.55	604.03	
Other Medical	Visits	242.75	\$1,076.76	21.78	6.20	15.58	
Capitation (Professional)	Benefit Period	1,000.00	\$0.00	0.00	0.00	0.00	
Capitation (Institutional)	Benefit Period	1,000.00	\$0.00	0.00	0.00	0.00	
Capitation (Other)	Benefit Period	1,000.00	\$1.06	0.09	0.03	0.06	
Prescription Drug	Scripts	11,169.26	\$158.86	147.86	42.11	105.75	
Total				\$ 1,511.38	\$ 430.46	\$ 1,080.91	

Population Risk Adjustment	Util Adj 1	Util Adj 2	Util Adj 3	Cost Adj 1	Cost Adj 2	Cost Adj 3	Cost	Util
0.967	1.000	1.000	1.000	0.753	1.000	1.000	1.061	1.017
0.967	1.000	1.000	1.000	0.753	1.000	1.000	1.060	1.017
0.967	1.000	1.000	1.000	0.753	1.000	1.000	1.055	1.017
0.967	1.000	1.000	1.000	0.753	1.000	1.000	1.041	1.017
0.967	1.000	1.000	1.000	0.753	1.000	1.000	1.000	1.000
0.967	1.000	1.000	1.000	0.753	1.000	1.000	1.000	1.000
0.967	1.000	1.000	1.000	0.753	1.000	1.000	1.000	1.000
0.967	1.000	1.000	1.000	0.753	1.000	1.000	1.110	1.000

Utilization per 1,000	Average Cost/Service	Allowed		Net Claims	
		PMPM	Cost PMPM	PMPM	Cost PMPM
123.47	\$ 29,005.20	\$ 298.45	\$ 90.43	\$ 208.02	
327.47	4,500.50	122.82	37.22	85.60	
12,747.04	666.96	708.48	214.68	493.80	
242.89	878.36	17.78	5.39	12.39	
967.16	0.00	0.00	0.00	0.00	
967.16	0.00	0.00	0.00	0.00	
967.16	0.80	0.06	0.02	0.04	
10,802.47	147.39	132.68	40.20	92.47	
		\$ 1,280.26	\$ 387.94	\$ 892.33	

Description of Population Risk Adjustment Assumption for Enrollment in Bronze, Silver, Gold, and Platinum Plans

Description of Population Risk Adjustment Assumption for Enrollment in Catastrophic Plans

California Rating Factor Exhibit

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

Health Net Life Insurance Company
99110
1/1/2017

Market/Product/Plan Level Calculations

Market Adjusted Index Rate

Index Rate	\$ 1,303.08
Federal Reinsurance Program Adjustment	\$0.00
Risk Adjustment	\$ 283.55
Exchange User Fee Adjustment	\$ 4.83
Market Adjusted Index Rate	\$ 1,024.35

Plan Adjusted Index Rate

Plan Name	Health Net Platinum 90 PPO 99110CA0210007	Health Net Gold 80 PPO 99110CA0210008	Health Net Silver 70 PPO 99110CA0210009	Health Net Bronze 60 PPO 99110CA0210010	Health Net Minimum Coverage PPO 99110CA0210011	Health Net Platinum 90 EPO 99110CA0340006	Health Net Platinum 90 EPO 99110CA0340007
Plan ID (Standard Component ID):							
Market Adjusted Index Rate	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35
Actuarial value and cost-sharing adjustment	1.251	0.980	0.752	0.534	0.534	1.106	1.106
Provider network, delivery system and utilization management adjustment	1.000	1.000	1.000	1.000	1.000	0.880	0.917
Adjustment for benefits in addition to the EHBs	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Impact of specific eligibility categories for the catastrophic plan	1.000	1.000	1.000	1.000	0.815	1.000	1.000
Adjustment for distribution and administrative costs	0.846	0.846	0.846	0.846	0.846	0.846	0.846
Plan Adjusted Index Rate	1,084.24	849.49	652.08	462.53	376.96	843.38	878.59

Calibration

Plan Adjusted Index Rate	\$ 1,084.24	\$ 849.49	\$ 652.08	\$ 462.53	\$ 376.96	\$ 843.38	\$ 878.59
Age Curve Calibration	0.653	0.653	0.653	0.653	0.653	0.653	0.653
Geographic Factor Calibration	0.854	0.854	0.854	0.854	0.854	0.854	0.854
Network Factor Calibration	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Calibrated Plan Adjusted Index Rate	\$ 604.56	\$ 473.67	\$ 363.59	\$ 257.90	\$ 210.19	\$ 470.26	\$ 489.89

Rating Area Factors

Rating Area	1	2	3	4	5	6	7
Rating Area Factor		1.234		1.278	1.210		1.158

State:

CA



Health Net Platinum 90 EPO 99110CA0340008	Health Net Platinum 90 EPO 99110CA0340009	Health Net Platinum 90 EPO 99110CA0340010	Health Net Platinum 90 EPO 99110CA0340011	Health Net Gold 80 EPO 99110CA0340012	Health Net Gold 80 EPO 99110CA0340013	Health Net Gold 80 EPO 99110CA0340014	Health Net Gold 80 EPO 99110CA0340015	Health Net Gold 80 EPO 99110CA0340016	Health Net Gold 80 EPO 99110CA0340017	Health Net Silver 70 EPO 99110CA0340018
\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35
1.106	1.106	1.106	1.106	0.936	0.936	0.936	0.936	0.936	0.936	0.751
0.872	0.955	0.862	0.939	0.880	0.917	0.872	0.955	0.862	0.939	0.880
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846
835.60	914.99	825.87	899.45	713.82	743.63	707.24	774.44	699.00	761.29	572.72

\$ 835.60	\$ 914.99	\$ 825.87	\$ 899.45	\$ 713.82	\$ 743.63	\$ 707.24	\$ 774.44	\$ 699.00	\$ 761.29	\$ 572.72
0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653
0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
\$ 465.92	\$ 510.19	\$ 460.50	\$ 501.53	\$ 398.02	\$ 414.64	\$ 394.35	\$ 431.82	\$ 389.76	\$ 424.49	\$ 319.34

8	9	10	11	12	13	14	15	16	17	18
1.320	1.276	1.146				0.943	0.915		0.983	1.008



Health Net Silver 70 EPO 99110CA0340019	Health Net Silver 70 EPO 99110CA0340020	Health Net Silver 70 EPO 99110CA0340021	Health Net Silver 70 EPO 99110CA0340022	Health Net Silver 70 EPO 99110CA0340023	Health Net Bronze 60 EPO 99110CA0340024	Health Net Bronze 60 EPO 99110CA0340025	Health Net Bronze 60 EPO 99110CA0340026	Health Net Bronze 60 EPO 99110CA0340027	Health Net Bronze 60 EPO 99110CA0340028	Health Net Bronze 60 EPO 99110CA0340029
\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35
0.751	0.751	0.751	0.751	0.751	0.566	0.566	0.566	0.566	0.566	0.566
0.917	0.872	0.955	0.862	0.939	0.880	0.917	0.872	0.955	0.862	0.939
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846
596.63	567.44	621.35	560.83	610.80	431.59	449.61	427.61	468.24	422.63	460.29

\$ 596.63	\$ 567.44	\$ 621.35	\$ 560.83	\$ 610.80	\$ 431.59	\$ 449.61	\$ 427.61	\$ 468.24	\$ 422.63	\$ 460.29
0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653
0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
\$ 332.68	\$ 316.40	\$ 346.46	\$ 312.71	\$ 340.58	\$ 240.65	\$ 250.70	\$ 238.43	\$ 261.09	\$ 235.66	\$ 256.65

19
1.024



Health Net Minimum Coverage EPO 99110CA0340030	Health Net Minimum Coverage EPO 99110CA0340031	Health Net Minimum Coverage EPO 99110CA0340032	Health Net Minimum Coverage EPO 99110CA0340033	Health Net Minimum Coverage EPO 99110CA0340034	Health Net Minimum Coverage EPO 99110CA0340035	Health Net Platinum 90 EPO 99110CA0350006	Health Net Platinum 90 EPO 99110CA0350007	Health Net Platinum 90 EPO 99110CA0350008	Health Net Platinum 90 EPO 99110CA0350009	Health Net Platinum 90 EPO 99110CA0350010
\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35
0.566	0.566	0.566	0.566	0.566	0.566	1.106	1.106	1.106	1.106	1.106
0.880	0.917	0.872	0.955	0.862	0.939	0.880	0.917	0.872	0.901	0.955
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
0.788	0.788	0.788	0.788	0.788	0.788	1.000	1.000	1.000	1.000	1.000
0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846
340.14	354.34	337.00	369.02	333.08	362.76	843.38	878.59	835.60	863.44	914.99

\$ 340.14	\$ 354.34	\$ 337.00	\$ 369.02	\$ 333.08	\$ 362.76	\$ 843.38	\$ 878.59	\$ 835.60	\$ 863.44	\$ 914.99
0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653
0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
\$ 189.66	\$ 197.58	\$ 187.91	\$ 205.76	\$ 185.72	\$ 202.27	\$ 470.26	\$ 489.89	\$ 465.92	\$ 481.45	\$ 510.19



Health Net Platinum 90 EPO 99110CA0350011	Health Net Platinum 90 EPO 99110CA0350012	Health Net Platinum 90 EPO 99110CA0350013	Health Net Gold 80 EPO 99110CA0350014	Health Net Gold 80 EPO 99110CA0350015	Health Net Gold 80 EPO 99110CA0350016	Health Net Gold 80 EPO 99110CA0350017	Health Net Gold 80 EPO 99110CA0350018	Health Net Gold 80 EPO 99110CA0350019	Health Net Gold 80 EPO 99110CA0350020	Health Net Gold 80 EPO 99110CA0350021
\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35
1.106	1.106	1.106	0.936	0.936	0.936	0.936	0.936	0.936	0.936	0.936
0.862	0.939	0.895	0.880	0.917	0.872	0.901	0.955	0.862	0.939	0.895
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846
825.87	899.45	857.68	713.82	743.63	707.24	730.81	774.44	699.00	761.29	725.93

\$ 825.87	\$ 899.45	\$ 857.68	\$ 713.82	\$ 743.63	\$ 707.24	\$ 730.81	\$ 774.44	\$ 699.00	\$ 761.29	\$ 725.93
0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653
0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
\$ 460.50	\$ 501.53	\$ 478.24	\$ 398.02	\$ 414.64	\$ 394.35	\$ 407.49	\$ 431.82	\$ 389.76	\$ 424.49	\$ 404.78



Health Net Silver 70 EPO 99110CA0350022	Health Net Silver 70 EPO 99110CA0350023	Health Net Silver 70 EPO 99110CA0350024	Health Net Silver 70 EPO 99110CA0350025	Health Net Silver 70 EPO 99110CA0350026	Health Net Silver 70 EPO 99110CA0350027	Health Net Silver 70 EPO 99110CA0350028	Health Net Silver 70 EPO 99110CA0350029	Health Net Bronze 60 EPO 99110CA0350030	Health Net Bronze 60 EPO 99110CA0350031	Health Net Bronze 60 EPO 99110CA0350032
\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35
0.751	0.751	0.751	0.751	0.751	0.751	0.751	0.751	0.566	0.566	0.566
0.880	0.917	0.872	0.901	0.955	0.862	0.939	0.895	0.880	0.917	0.872
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846
572.72	596.63	567.44	586.34	621.35	560.83	610.80	582.43	431.59	449.61	427.61

\$ 572.72	\$ 596.63	\$ 567.44	\$ 586.34	\$ 621.35	\$ 560.83	\$ 610.80	\$ 582.43	\$ 431.59	\$ 449.61	\$ 427.61
0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653
0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
\$ 319.34	\$ 332.68	\$ 316.40	\$ 326.94	\$ 346.46	\$ 312.71	\$ 340.58	\$ 324.76	\$ 240.65	\$ 250.70	\$ 238.43



Health Net Bronze 60 EPO 99110CA0350033	Health Net Bronze 60 EPO 99110CA0350034	Health Net Bronze 60 EPO 99110CA0350035	Health Net Bronze 60 EPO 99110CA0350036	Health Net Bronze 60 EPO 99110CA0350037	Health Net Minimum Coverage EPO 99110CA0350038	Health Net Minimum Coverage EPO 99110CA0350039	Health Net Minimum Coverage EPO 99110CA0350040	Health Net Minimum Coverage EPO 99110CA0350041	Health Net Minimum Coverage EPO 99110CA0350042	Health Net Minimum Coverage EPO 99110CA0350043
\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35
0.566	0.566	0.566	0.566	0.566	0.566	0.566	0.566	0.566	0.566	0.566
0.901	0.955	0.862	0.939	0.895	0.880	0.917	0.872	0.901	0.955	0.862
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
1.000	1.000	1.000	1.000	1.000	0.788	0.788	0.788	0.788	0.788	0.788
0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846
441.86	468.24	422.63	460.29	438.91	340.14	354.34	337.00	348.23	369.02	333.08

\$ 441.86	\$ 468.24	\$ 422.63	\$ 460.29	\$ 438.91	\$ 340.14	\$ 354.34	\$ 337.00	\$ 348.23	\$ 369.02	\$ 333.08
0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653
0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
\$ 246.38	\$ 261.09	\$ 235.66	\$ 256.65	\$ 244.74	\$ 189.66	\$ 197.58	\$ 187.91	\$ 194.17	\$ 205.76	\$ 185.72



Health Net Minimum Coverage EPO 99110CA0350044	Health Net Minimum Coverage EPO 99110CA0350045	Health Net Platinum 90 EPO 99110CA0350046	Health Net Platinum 90 EPO 99110CA0350047	Health Net Platinum 90 EPO 99110CA0350048	Health Net Platinum 90 EPO 99110CA0350049	Health Net Gold 80 EPO 99110CA0350050	Health Net Gold 80 EPO 99110CA0350051	Health Net Gold 80 EPO 99110CA0350052	Health Net Gold 80 EPO 99110CA0350053	Health Net Silver 70 EPO 99110CA0350054
\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35
0.566	0.566	1.106	1.106	1.106	1.106	0.936	0.936	0.936	0.936	0.751
0.939	0.895	0.844	0.890	0.827	0.823	0.844	0.890	0.827	0.823	0.844
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
0.788	0.788	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846
362.76	345.91	808.60	852.38	792.96	788.99	684.39	721.45	671.15	667.79	549.10

\$ 362.76	\$ 345.91	\$ 808.60	\$ 852.38	\$ 792.96	\$ 788.99	\$ 684.39	\$ 721.45	\$ 671.15	\$ 667.79	\$ 549.10
0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653
0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
\$ 202.27	\$ 192.88	\$ 450.87	\$ 475.28	\$ 442.15	\$ 439.93	\$ 381.61	\$ 402.27	\$ 374.23	\$ 372.36	\$ 306.17



Health Net Silver 70 EPO 99110CA0350055	Health Net Silver 70 EPO 99110CA0350056	Health Net Silver 70 EPO 99110CA0350057	Health Net Bronze 60 EPO 99110CA0350058	Health Net Bronze 60 EPO 99110CA0350059	Health Net Bronze 60 EPO 99110CA0350060	Health Net Bronze 60 EPO 99110CA0350061	Health Net Minimum Coverage EPO 99110CA0350062	Health Net Minimum Coverage EPO 99110CA0350063	Health Net Minimum Coverage EPO 99110CA0350064	Health Net Minimum Coverage EPO 99110CA0350065
\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35	\$ 1,024.35
0.751	0.751	0.751	0.566	0.566	0.566	0.566	0.566	0.566	0.566	0.566
0.890	0.827	0.823	0.844	0.890	0.827	0.823	0.844	0.890	0.827	0.823
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
1.000	1.000	1.000	1.000	1.000	1.000	1.000	0.788	0.788	0.788	0.788
0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846	0.846
578.83	538.48	535.78	413.79	436.20	405.79	403.76	326.11	343.77	319.81	318.20

\$ 578.83	\$ 538.48	\$ 535.78	\$ 413.79	\$ 436.20	\$ 405.79	\$ 403.76	\$ 326.11	\$ 343.77	\$ 319.81	\$ 318.20
0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653	0.653
0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854	0.854
1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
\$ 322.75	\$ 300.25	\$ 298.75	\$ 230.73	\$ 243.22	\$ 226.27	\$ 225.13	\$ 181.84	\$ 191.68	\$ 178.32	\$ 177.43

Monthly Claims Supplement to Experience Development in Worksheet 1

Company Legal Name: **Health Net Life Insurance Con** State: **CA**
 HIOS Issuer ID: **99110** Market: **Individual**
 Effective Date: **1/1/2017**

Market Level Calculations (Same for all Plans)

Experience Period: **1/1/2015** to **12/31/2015**
 Experience Paid Through: **3/31/2016**

Experience Month	Members	Premium	Capitation	FFS Claims	Pharmacy Claims	IBNP	Premium PMPM	Incurred Claims PMPM	Loss Ratio
Jan-15	35,565	15,277,454	1,803	23,077,148	\$2,967,731	\$613,551	\$429.56	\$749.61	174.5%
Feb-15	35,839	15,427,197	2,088	23,576,451	\$2,946,617	\$384,146	430.46	\$750.84	174.4%
Mar-15	38,151	16,276,410	2,832	33,025,486	\$3,389,380	\$300,661	426.63	\$962.45	225.6%
Apr-15	37,456	16,070,230	2,835	29,627,049	\$3,670,760	\$643,449	429.05	\$906.25	211.2%
May-15	37,125	15,948,125	2,840	28,904,617	\$3,538,595	\$289,814	429.58	\$881.79	205.3%
Jun-15	36,913	15,882,847	2,899	30,004,210	\$3,949,142	\$305,336	430.28	\$928.17	215.7%
Jul-15	36,822	15,852,447	2,845	32,660,275	\$4,333,943	\$527,366	430.51	\$1,019.07	236.7%
Aug-15	36,841	15,859,049	2,851	33,722,803	\$4,026,606	\$653,504	430.47	\$1,042.47	242.2%
Sep-15	36,730	15,672,855	2,823	41,588,886	\$4,040,340	\$1,148,727	426.71	\$1,273.66	298.5%
Oct-15	36,429	15,663,913	2,773	55,855,113	\$3,935,785	\$1,033,960	429.98	\$1,669.75	388.3%
Nov-15	36,461	15,695,309	2,773	50,234,182	\$3,807,070	\$2,173,102	430.47	\$1,541.83	358.2%
Dec-15	36,098	15,392,702	2,729	36,741,458	\$4,289,388	\$4,047,967	426.41	\$1,248.86	292.9%
Jan-16							0.00	\$0.00	0.0%
Feb-16							0.00	\$0.00	0.0%
Mar-16							0.00	\$0.00	0.0%
Apr-16							0.00	\$0.00	0.0%
May-16							0.00	\$0.00	0.0%
Jun-16							0.00	\$0.00	0.0%
Jul-16							0.00	\$0.00	0.0%
Aug-16							0.00	\$0.00	0.0%
Sep-16							0.00	\$0.00	0.0%
Oct-16							0.00	\$0.00	0.0%
Nov-16							0.00	\$0.00	0.0%
Dec-16							0.00	\$0.00	0.0%
Jan-17							0.00	\$0.00	0.0%
Feb-17							0.00	\$0.00	0.0%
Mar-17							0.00	\$0.00	0.0%
Apr-17							0.00	\$0.00	0.0%
May-17							0.00	\$0.00	0.0%
Jun-17							0.00	\$0.00	0.0%
Jul-17							0.00	\$0.00	0.0%
Aug-17							0.00	\$0.00	0.0%
Sep-17							0.00	\$0.00	0.0%
Oct-17							0.00	\$0.00	0.0%
Nov-17							0.00	\$0.00	0.0%
Dec-17							0.00	\$0.00	0.0%
1/2015 - 12/2015	440,430	189,018,536	32,092	419,017,678	44,895,357	12,121,583	429.17	\$1,080.91	251.9%
1/2016 - 12/2016	0	0	0	0	0	0	0.00	\$0.00	0.0%
1/2017 - 12/2017	0	0	0	0	0	0	0.00	\$0.00	0.0%

Risk Score Results from Edge Server for 1/1/2015 to 12/31/2015

PROPRIETARY / CONFIDENTIAL

Company Legal Name: **Health Net Life Insurance Company**
 HIOS Issuer ID: **99110**
 Effective Date: **1/1/2017**

State: **CA**
 Market: **Individual**

Market Level Calculations (Same for all Plans)

		Member Month Counts by Metal Level and Rating Region						Average HHS Risk Scores by Metal Level and Rating Region					
CAI		Bronze	Silver	Gold	Platinum	Catastrophic	Total	4	3	2	1	CAC	Total
Rating Area		Bronze	Silver	Gold	Platinum	Other		Bronze	Silver	Gold	Platinum	Other	
1		-	-	-	-	-	-	-	-	-	-	-	-
2		16,798	9,349	4,284	3,396	1,353	35,180	1.079	1.688	1.653	4.246	0.298	1.585
3		-	-	-	-	-	-	-	-	-	-	-	-
4		9,333	5,654	3,200	3,013	3,004	24,204	0.891	1.666	1.814	3.482	0.169	1.427
5		3,937	2,646	1,293	1,095	1,496	10,467	0.983	1.725	1.542	7.731	0.332	1.828
6		-	-	-	-	-	-	-	-	-	-	-	-
7		23,071	11,655	5,768	3,336	3,536	47,366	0.707	1.487	1.660	4.210	0.203	1.226
8		11,334	5,294	3,150	1,982	1,853	23,613	0.842	1.738	1.673	4.467	0.256	1.408
9		10,801	6,164	2,323	1,492	1,224	22,004	1.031	1.601	1.628	5.622	0.683	1.549
10		5,169	4,284	1,192	1,113	867	12,625	1.025	1.825	2.238	3.688	0.306	1.595
11		-	-	-	-	-	-	-	-	-	-	-	-
12		-	-	-	-	-	-	-	-	-	-	-	-
13		-	-	-	-	-	-	-	-	-	-	-	-
14		2,691	935	449	575	962	5,612	0.633	2.472	3.182	2.693	0.234	1.290
15		11,623	6,482	5,144	5,267	5,989	34,505	0.752	2.072	2.169	4.572	0.222	1.687
16		33,538	23,332	19,729	18,392	6,659	101,650	0.958	1.658	1.801	3.854	0.405	1.780
17		5,873	3,375	2,414	5,444	3,046	20,152	0.921	2.009	3.259	4.559	0.496	2.338
18		23,326	11,255	7,967	9,146	5,384	57,078	0.827	1.307	2.113	4.709	0.293	1.663
19		25,690	7,183	4,470	3,714	4,917	45,974	0.850	1.845	2.531	3.907	0.277	1.354
Total		183,184	97,608	61,383	57,965	40,290	440,430	0.882	1.672	1.958	4.265	0.306	1.602

Plan Paid Claims Distribution for 1/1/2015 to 12/31/2015 Experience, Including Estimates for Claims IBNP

Company Legal Name:

Health Net Life Insurance Co State:

CA

HIOS Issuer ID:

99110

Market:

Individual

Effective Date:

1/1/2017

Market Level Calculations (Same for all Plans)

Claim Range	Claim Frequency	Average Annual Paid Claim
< \$45,000	0.958	\$290.42
\$45,000 - \$59,999	0.009	\$6,582.39
\$60,000 - \$89,999	0.009	\$10,251.20
\$90,000 - \$149,999	0.010	\$17,169.56
\$150,000 - \$199,999	0.005	\$23,883.30
\$200,000 - \$249,999	0.003	\$25,858.66
\$250,000 - \$999,999	0.006	\$40,932.35
\$1,000,000+	0.000	\$165,009.32
Projected Paid PMPY	1.000	\$10,707.90
Projected Paid PMPM		\$892.33

Projected Specialty Rx Trends

Company Legal Name:

Health Net Life Insurance State: **CA**

HIOS Issuer ID:

99110

Market: **Other**

Effective Date:

1/1/2017

Market Level Calculations (Same for all Plans)

Time Periods	Utilization Trend	Unit Cost Trend	PMPM Trend	Notes, including assumptions about any further impact on plan-paid PMPM trend due to specialty drug cost-sharing caps.
2015 to 2016	9.0%	18.0%	0.29	
2016 to 2017	9.0%	9.0%	0.19	
2017 to 2018	9.0%	10.0%	0.20	
2018 to 2019	9.0%	10.0%	0.20	

Explanation for Changes in Regional Pricing for 2017 Plans

Rating Area	Have you changed your Regional Pricing? If yes, please provide a detailed explanation of drivers of relative changes in premium levels by rating area from 2016 to 2017 (e.g. changes in provider contracting or provider networks)
1	No
2	No
3	No
4	No
5	No
6	No
7	No
8	No
9	No
10	No
11	No
12	No
13	No
14	No
15	No
16	No
17	No
18	No
19	No

Weighted % Premium Increase by Region and Plan Type for 2016 to 2017

Rating Area	2017 Projected Membership	Weighted % Premium Increase				Regional Total
		HMO	PPO	EPO	HSP	
1	-					
2	28,110		9.9%	23.2%		12.3%
3	-					
4	18,342		9.9%	23.1%		12.5%
5	13,704		9.9%	23.1%		15.1%
6	-					
7	47,449		9.9%	23.2%		10.7%
8	36,387		9.9%	23.3%		12.9%
9	25,829		9.9%	23.4%		16.6%
10	12,520		9.9%	23.2%		13.3%
11	-					
12	-					
13	-					
14	2,423		9.9%	22.9%		9.9%
15	19,734		9.9%	22.9%		9.9%
16	66					
17	11,468		9.9%	22.9%		9.9%
18	36,880		9.9%	22.9%		9.9%
19	29,458		9.9%	22.9%		9.9%
Total	282,370		9.9%	23.1%		11.8%

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	X	Y	
1	Unified Rate Review v3.3																							
2																								
3	Company Legal Name:	Health Net Life Insurance Com																		State:	CA			
4	HIOS Issuer ID:	99110																		Market:	Individual			
5	Effective Date of Rate Change(s):	1/1/2017																						
6																								
7																								
8	Market Level Calculations (Same for all Plans)																							
9																								
10																								
11	Section I: Experience period data																							
12	Experience Period:	1/1/2015		to	12/31/2015																			
13		<u>Experience Period</u>																						
14		<u>Aggregate Amount</u>		<u>PMPM</u>	<u>% of Prem</u>																			
15	Premiums (net of MLR Rebate) in Experience Period:	\$189,018,536		\$429.17	100.00%																			
16	Incurred Claims in Experience Period	\$476,066,711		1,080.91	251.86%																			
17	Allowed Claims:	\$665,655,090		1,511.38	352.16%																			
18	Index Rate of Experience Period			\$1,511.00																				
19	Experience Period Member Months	440,430																						
20	Section II: Allowed Claims, PMPM basis																							
21		<u>Experience Period</u>		<u>Projection Period:</u> 1/1/2017 to 12/31/2017				Mid-point to Mid-point, Experience to Projection:															24	months
22		<u>on Actual Experience Allowed</u>			<u>Adj't. from Experience to Projection Period</u>				<u>Annualized Trend Factors</u>				<u>Projections, before credibility Adjustment</u>				<u>Credibility Manual</u>							
23	Benefit Category	Utilization Description	Utilization per 1,000	Average Cost/Service	PMPM	Pop'l risk		Morbidity	Other	Cost	Util	Utilization per 1,000	Average Cost/Service	PMPM	Utilization per 1,000	Average Cost/Service	PMPM							
24	Inpatient Hospital	Admits	123.40	\$34,216.55	\$351.87	0.967	0.753	1.061	1.017	123.47	\$29,005.20	\$298.45	0.00	\$0.00	\$0.00									
25	Outpatient Hospital	Visits	327.29	5,323.52	145.19	0.967	0.753	1.060	1.017	327.47	4,500.50	122.82	0.00	0.00	0.00									
26	Professional	Visits	12,739.76	795.53	844.58	0.967	0.753	1.055	1.017	12,747.04	666.96	708.48	0.00	0.00	0.00									
27	Other Medical	Visits	242.75	1,076.76	21.78	0.967	0.753	1.041	1.017	242.89	878.36	17.78	0.00	0.00	0.00									
28	Capitation	Benefit Period	1,000.00	1.06	0.09	0.967	0.753	1.000	1.000	967.16	0.80	0.06	0.00	0.00	0.00									
29	Prescription Drug	Prescriptions	11,169.26	158.86	147.86	0.967	0.753	1.110	1.000	10,802.47	147.39	132.68	0.00	0.00	0.00									
30	Total				\$1,511.38							\$1,280.26		\$0.00										
31																After Credibility	Projected Period Totals							
32	Section III: Projected Experience:															Projected Allowed Experience Claims PMPM (w/applied credibility if applicable)	100.00%	0.00%	\$1,280.26	\$361,508,377				
33																Paid to Allowed Average Factor in Projection Period			0.697					
34																Projected Incurred Claims, before ACA rein & Risk Adj't, PMPM			\$892.33	\$251,965,898				
35																Projected Risk Adjustments PMPM			194.02	54,785,456				
36																Projected Incurred Claims, before reinsurance recoveries, net of rein prem, PMPM			\$698.31	\$197,180,442				
37																Projected ACA reinsurance recoveries, net of rein prem, PMPM			0.00	0				
38																Projected Incurred Claims			\$698.31	\$197,180,442				
39																Administrative Expense Load			7.08%	42.01	11,861,431			
40																Profit & Risk Load			-24.73%	(146.77)	(41,444,798)			
41																Taxes & Fees			0.00%	0.00	0			
42																Single Risk Pool Gross Premium Avg. Rate, PMPM				\$593.54	\$167,597,075			
43																Index Rate for Projection Period				\$1,303.08				
44																% increase over Experience Period				38.30%				
45																% Increase, annualized:				17.60%				
46																Projected Member Months					282,370			
47																								
48																								
49	Information Not Releasable to the Public Unless Authorized by Law: This information has not been publically disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.																							
50																								

Product-Plan Data Collection

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

Health Net Life Insurance Company
99110
1/1/2017

State: CA
Market: Individual

Product/Plan Level Calculations

Section I: General Product and Plan Information

Product	Off-Exchange PPO Plans																				Gold		Gold		Gold		Gold		Gold		Gold		Gold		Gold	
Product ID	99110CA0201																				99110CA03001		99110CA03002		99110CA03003		99110CA03004		99110CA03005		99110CA03006		99110CA03007		99110CA03008	
Metal	Platinum	Gold	Silver	Bronze	Catastrophic	Platinum	Gold	Silver	Bronze	Catastrophic	Platinum	Gold	Silver	Bronze	Catastrophic	Platinum	Gold	Silver	Bronze	Catastrophic	Platinum	Gold	Silver	Bronze	Catastrophic	Platinum	Gold	Silver	Bronze	Catastrophic	Platinum	Gold	Silver	Bronze	Catastrophic	
AV Metal Value	0.897	0.809	0.715	0.619	0.619	0.881	0.788	0.703	0.606	0.604	0.897	0.897	0.823	0.700	0.604	0.897	0.897	0.823	0.700	0.604	0.897	0.897	0.823	0.700	0.604	0.897	0.897	0.823	0.700	0.604	0.897	0.897	0.823	0.700	0.604	
AV Pricing Value	1.058	0.829	0.637	0.452	0.368	0.010	0.010	0.010	0.010	0.010	0.897	0.897	0.823	0.700	0.604	0.897	0.897	0.823	0.700	0.604	0.897	0.897	0.823	0.700	0.604	0.897	0.897	0.823	0.700	0.604	0.897	0.897	0.823	0.700	0.604	
Plan Category	Renewing PPO	Renewing PPO	Renewing PPO	Renewing PPO	Renewing PPO	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net	Health Net		
Plan Name	Health Net Platinum 90 PPO	Health Net Gold 80 PPO	Health Net Silver 70 PPO	Health Net Bronze 60 PPO	Health Net Catastrophic 50 PPO	Health Net Platinum 90 PPO	Health Net Gold 80 PPO	Health Net Silver 70 PPO	Health Net Bronze 60 PPO	Health Net Catastrophic 50 PPO	Health Net Platinum 90 PPO	Health Net Gold 80 PPO	Health Net Silver 70 PPO	Health Net Bronze 60 PPO	Health Net Catastrophic 50 PPO	Health Net Platinum 90 PPO	Health Net Gold 80 PPO	Health Net Silver 70 PPO	Health Net Bronze 60 PPO	Health Net Catastrophic 50 PPO	Health Net Platinum 90 PPO	Health Net Gold 80 PPO	Health Net Silver 70 PPO	Health Net Bronze 60 PPO	Health Net Catastrophic 50 PPO	Health Net Platinum 90 PPO	Health Net Gold 80 PPO	Health Net Silver 70 PPO	Health Net Bronze 60 PPO	Health Net Catastrophic 50 PPO	Health Net Platinum 90 PPO	Health Net Gold 80 PPO	Health Net Silver 70 PPO	Health Net Bronze 60 PPO	Health Net Catastrophic 50 PPO	
Plan ID (Standard Component ID)	99110CA0210007	99110CA0210008	99110CA0210009	99110CA0210010	99110CA0210011	99110CA0340001	99110CA0340002	99110CA0340003	99110CA0340004	99110CA0340005	99110CA0340006	99110CA0340007	99110CA0340008	99110CA0340009	99110CA0340010	99110CA0340011	99110CA0340012	99110CA0340013	99110CA0340014	99110CA0340015	99110CA0340016	99110CA0340017	99110CA0340018	99110CA0340019	99110CA0340020	99110CA0340021	99110CA0340022	99110CA0340023	99110CA0340024	99110CA0340025	99110CA0340026	99110CA0340027	99110CA0340028	99110CA0340029	99110CA0340030	
Exchange Plan?	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	
Historical Rate Increase - Calendar Year - 1																																				
Historical Rate Increase - Calendar Year - 2																																				
Historical Rate Increase - Calendar Year - 3																																				
Effective Date of Proposed Rates	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	
Rate Change % (over prior filing)	9.88%	9.92%	9.88%	9.88%	9.85%	9.86%	0.00%	0.00%	0.00%	0.00%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	
Claim True Rate Change % (over 12 mos prior)	9.88%	9.92%	9.88%	9.88%	9.85%	9.86%	0.00%	0.00%	0.00%	0.00%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	23.68%	
Prod Net Rate Change % (over Exer. Period)	50.33%	43.02%	31.98%	33.82%	30.57%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	
Product Rate Increase %	9.87%																																			

Section II: Components of Premium Increase (PMPM Dollar Amount above Current Average Rate PMPM)

Plan ID (Standard Component ID)	Total	99110CA0210007	99110CA0210008	99110CA0210009	99110CA0210010	99110CA0210011	99110CA0340001	99110CA0340002	99110CA0340003	99110CA0340004	99110CA0340005	99110CA0340006	99110CA0340007	99110CA0340008	99110CA0340009	99110CA0340010	99110CA0340011	99110CA0340012	99110CA0340013	99110CA0340014	99110CA0340015	99110CA0340016	99110CA0340017	99110CA0340018	99110CA0340019	99110CA0340020	99110CA0340021	99110CA0340022	99110CA0340023	99110CA0340024	99110CA0340025	99110CA0340026	99110CA0340027	99110CA0340028	99110CA0340029	99110CA0340030	
Investor	\$17.67	\$31.04	\$24.75	\$20.79	\$15.47	\$7.22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Outpatient	\$7.27	\$12.77	\$10.19	\$8.56	\$6.37	\$2.97	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Professional	\$4.94	\$7.68	\$5.76	\$4.86	\$3.63	\$1.73	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Prescription Drug	\$1.05	\$1.85	\$1.47	\$1.24	\$0.93	\$0.43	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.01	\$0.01	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Capitation	\$7.85	\$11.00	\$8.24	\$6.88	\$5.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Administration	\$11.09	\$19.49	\$15.84	\$13.05	\$9.71	\$4.54	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Risk Fee	\$13.44	\$23.61	\$18.63	\$15.82	\$11.77	\$5.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Risk & Profit Charge	\$20.32	\$44.48	\$35.47	\$29.80	\$22.17	\$10.35	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Total Rate Increase	\$48.13	\$84.55	\$67.43	\$56.64	\$44.14	\$19.68	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Member Cost Share Increase	\$18.66	\$42.52	\$42.52	\$42.52	\$42.52	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Projected Current Rate PMPM	\$72.39	\$85.34	\$67.90	\$57.99	\$47.92	\$19.62	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Advanced Member Months	283.66	24.08	26.76	68.40	106.76	13.752	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

Section III: Experience Period Information

Plan ID (Standard Component ID)	Total	99110CA0210007	99110CA0210008	99110CA0210009	99110CA0210010	99110CA0210011	99110CA0340001	99110CA0340002	99110CA0340003	99110CA0340004	99110CA0340005	99110CA0340006	99110CA0340007	99110CA0340008	99110CA0340009	99110CA0340010	99110CA0340011	99110CA0340012	99110CA0340013	99110CA0340014	99110CA0340015	99110CA0340016	99110CA0340017	99110CA0340018	99110CA0340019	99110CA0340020	99110CA0340021	99110CA0340022	99110CA0340023	99110CA0340024	99110CA0340025	99110CA0340026	99110CA0340027	99110CA0340028</
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Off-Exchange EPO Plans																														
99110CA035000																														
Platinum 0.897 0.843 Renewing EPO	Platinum 0.897 0.893 Renewing EPO	Platinum 0.897 0.806 Renewing EPO	Platinum 0.897 0.878 Renewing EPO	Platinum 0.897 0.817 Renewing EPO	Gold 0.809 0.697 Renewing EPO	Gold 0.809 0.726 Renewing EPO	Gold 0.809 0.690 Renewing EPO	Gold 0.809 0.682 Renewing EPO	Gold 0.809 0.713 Renewing EPO	Gold 0.809 0.756 Renewing EPO	Gold 0.809 0.682 Renewing EPO	Gold 0.809 0.709 Renewing EPO	Gold 0.809 0.682 Renewing EPO	Gold 0.809 0.743 Renewing EPO	Gold 0.809 0.559 Renewing EPO	Silver 0.715 0.547 Renewing EPO	Silver 0.715 0.547 Renewing EPO	Silver 0.715 0.554 Renewing EPO	Silver 0.715 0.572 Renewing EPO	Silver 0.715 0.627 Renewing EPO	Silver 0.715 0.547 Renewing EPO	Silver 0.715 0.596 Renewing EPO	Silver 0.715 0.569 Renewing EPO	Bronze 0.619 0.423 Renewing EPO	Bronze 0.619 0.439 Renewing EPO	Bronze 0.619 0.417 Renewing EPO	Bronze 0.619 0.431 Renewing EPO	Bronze 0.619 0.457 Renewing EPO		
Health Net Platinum 90 EPO	Health Net Platinum 90 EPO	Health Net Platinum 90 EPO	Health Net Platinum 90 EPO	Health Net Platinum 90 EPO	Health Net Gold 80 EPO	Health Net Gold 80 EPO	Health Net Gold 80 EPO	Health Net Gold 80 EPO	Health Net Gold 80 EPO	Health Net Gold 80 EPO	Health Net Gold 80 EPO	Health Net Gold 80 EPO	Health Net Gold 80 EPO	Health Net Gold 80 EPO	Health Net Silver 70 EPO	Health Net Silver 70 EPO	Health Net Silver 70 EPO	Health Net Silver 70 EPO	Health Net Silver 70 EPO	Health Net Silver 70 EPO	Health Net Silver 70 EPO	Health Net Silver 70 EPO	Health Net Silver 70 EPO	Health Net Bronze 60 EPO	Health Net Bronze 60 EPO	Health Net Bronze 60 EPO	Health Net Bronze 60 EPO	Health Net Bronze 60 EPO		
99110CA0350009	99110CA0350010	99110CA0350011	99110CA0350012	99110CA0350013	99110CA0350014	99110CA0350015	99110CA0350016	99110CA0350017	99110CA0350018	99110CA0350019	99110CA0350020	99110CA0350021	99110CA0350022	99110CA0350023	99110CA0350024	99110CA0350025	99110CA0350026	99110CA0350027	99110CA0350028	99110CA0350029	99110CA0350030	99110CA0350031	99110CA0350032	99110CA0350033	99110CA0350034	99110CA0350035	99110CA0350036	99110CA0350037	99110CA0350038	
No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	
0.00%																														
-1.47%																														
1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017	
23.68%	23.68%	23.68%	23.68%	23.68%	23.00%	23.00%	23.00%	23.00%	23.00%	23.00%	23.00%	23.00%	23.00%	23.00%	23.00%	23.96%	23.96%	23.96%	23.96%	23.96%	23.96%	23.96%	23.96%	23.96%	23.96%	23.96%	23.96%	23.96%	23.96%	23.96%
#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

99110CA0350009	99110CA0350010	99110CA0350011	99110CA0350012	99110CA0350013	99110CA0350014	99110CA0350015	99110CA0350016	99110CA0350017	99110CA0350018	99110CA0350019	99110CA0350020	99110CA0350021	99110CA0350022	99110CA0350023	99110CA0350024	99110CA0350025	99110CA0350026	99110CA0350027	99110CA0350028	99110CA0350029	99110CA0350030	99110CA0350031	99110CA0350032	99110CA0350033	99110CA0350034	99110CA0350035	99110CA0350036	99110CA0350037	99110CA0350038		
\$23.22	\$23.05	\$17.06	\$21.25	\$16.67	\$21.90	\$17.71	\$13.06	\$18.44	\$28.92	\$16.82	\$28.44	\$13.78	\$15.13	\$15.70	\$17.02	\$16.15	\$20.47	\$17.28	\$23.49	\$24.66	\$27.77	\$33.77	\$36.59	\$30.77	\$30.32	\$36.31	\$33.97	\$30.32	\$36.31		
\$133.97	\$132.72	\$98.41	\$122.57	\$96.16	\$126.33	\$102.14	\$75.34	\$106.36	\$166.83	\$78.01	\$138.74	\$79.50	\$87.39	\$90.58	\$98.19	\$93.16	\$118.30	\$99.66	\$129.75	\$65.92	\$80.16	\$86.85	\$73.05	\$71.98	\$86.19	\$83.84	\$71.98	\$86.19	\$83.84		
\$9.36	\$9.34	\$2.47	\$9.08	\$6.41	\$9.17	\$6.26	\$1.89	\$6.48	\$14.35	\$6.56	\$14.48	\$1.99	\$2.39	\$2.27	\$2.46	\$2.34	\$2.86	\$2.50	\$3.26	\$1.63	\$2.01	\$2.18	\$1.81	\$1.81	\$2.18	\$1.81	\$2.18	\$1.81	\$2.18		
\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01	
\$25.09	\$24.86	\$18.43	\$22.95	\$18.01	\$23.66	\$19.13	\$14.11	\$19.92	\$34.24	\$14.61	\$25.98	\$14.89	\$16.37	\$16.96	\$18.39	\$17.45	\$22.32	\$18.66	\$24.30	\$12.34	\$15.01	\$16.16	\$13.68	\$13.48	\$16.16	\$13.48	\$16.16	\$13.48	\$16.16	\$13.48	
\$35.43	\$35.30	\$26.03	\$32.42	\$25.43	\$33.41	\$25.92	\$28.13	\$32.69	\$52.03	\$23.11	\$23.96	\$22.03	\$23.11	\$23.96	\$22.03	\$24.64	\$21.23	\$26.36	\$34.32	\$17.43	\$21.23	\$21.23	\$19.32	\$19.04	\$22.80	\$19.32	\$19.04	\$22.80	\$19.32	\$19.04	\$22.80
\$42.94	\$42.54	\$31.94	\$39.29	\$30.82	\$40.49	\$32.74	\$24.14	\$34.09	\$53.47	\$25.01	\$25.86	\$24.46	\$25.48	\$26.01	\$23.47	\$25.86	\$22.81	\$23.44	\$41.98	\$21.13	\$25.86	\$25.86	\$23.44	\$23.44	\$27.84	\$23.44	\$23.44	\$27.84	\$23.44	\$23.44	\$27.84
\$80.87	\$80.12	\$59.40	\$73.99	\$58.05	\$76.25	\$61.66	\$45.47	\$64.20	\$100.71	\$47.09	\$83.75	\$47.99	\$52.73	\$54.08	\$55.27	\$56.24	\$51.29	\$56.16	\$78.32	\$39.79	\$48.39	\$52.43	\$48.39	\$52.43	\$48.39	\$52.43	\$48.39	\$52.43	\$48.39	\$52.43	\$48.39
\$153.72	\$152.29	\$112.91	\$140.64	\$110.34	\$144.95	\$114.95	\$86.43	\$122.40	\$191.43	\$89.41	\$114.35	\$91.22	\$100.28	\$103.93	\$112.67	\$106.90	\$121.51	\$114.35	\$148.88	\$75.61	\$91.93	\$99.65	\$83.82	\$83.82	\$99.65	\$83.82	\$99.65	\$83.82	\$99.65	\$83.82	
\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52	\$42.52

\$69.14	\$64.12	\$43.81	\$59.31	\$46.95	\$60.15	\$50.51	\$37.36	\$50.56	\$82.21	\$39.17	\$69.02	\$39.55	\$44.61	\$43.84	\$47.70	\$44.71	\$35.61	\$47.31	\$62.46	\$31.71	\$48.11	\$45.01	\$38.02	\$37.46	\$45.01	\$37.46	\$45.01	\$37.46	\$45.01	\$37.46
192	72	12	1	1	72	12	72	420	156	72	60	1	288	240	264	1,548	672	427	312	36	1	312	72	228	1,176	612	427	312	36	612

99110CA0350009	99110CA0350010	99110CA0350011	99110CA0350012	99110CA0350013	99110CA0350014	99110CA0350015	99110CA0350016	99110CA0350017	99110CA0350018	99110CA0350019	99110CA0350020	99110CA0350021	99110CA0350022	99110CA0350023	99110CA0350024	99110CA0350025	99110CA0350026	99110CA0350027	99110CA0350028	99110CA0350029	99110CA0350030	99110CA0350031	99110CA0350032	99110CA0350033	99110CA0350034	99110CA0350035	99110CA0350036	99110CA0350037	99110CA0350038		
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
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\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

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99110CA0350009	99110CA0350010	99110CA0350011	99110CA0350012	99110CA0350013	99110CA0350014	99110CA0350015	99110CA0350016	99110CA0350017	99110CA0350018	99110CA0350019	99110CA0350020	99110CA0350021	99110CA0350022	99110CA0350023	99110CA0350024	99110CA0350025	99110CA0350026	99110CA0350027	99110CA0350028	99110CA0350029	99110CA0350030	99110CA0350031	99110CA0350032	99110CA0350033	99110CA0
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Bronze 0.619 0.394 Renewing EPO Health Net Bronze 60 EPO	Catastrophic 0.619 0.318 Renewing EPO Health Net Minimum Coverage EPO	Catastrophic 0.619 0.336 Renewing EPO Health Net Minimum Coverage EPO	Catastrophic 0.619 0.312 Renewing EPO Health Net Minimum Coverage EPO	Catastrophic 0.619 0.311 Renewing EPO Health Net Minimum Coverage EPO
99110CA0350061	99110CA0350062	99110CA0350063	99110CA0350064	99110CA0350065
No	No	No	No	No
1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2017
22.00%	22.00%	22.00%	22.00%	22.00%
22.00%	22.00%	22.00%	22.00%	22.00%
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99110CA0350061	99110CA0350062	99110CA0350063	99110CA0350064	99110CA0350065
\$19.50	\$14.08	\$15.99	\$15.21	\$15.37
\$8.02	\$5.80	\$6.56	\$6.20	\$6.32
\$46.79	\$33.43	\$37.85	\$36.12	\$36.48
\$1.16	\$0.84	\$0.95	\$0.91	\$0.92
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$8.67	\$6.26	\$7.09	\$6.76	\$6.83
\$12.24	\$8.84	\$10.01	\$9.55	\$9.65
\$14.84	\$10.71	\$12.25	\$11.97	\$11.89
\$27.84	\$20.18	\$22.85	\$21.80	\$22.02
\$53.12	\$38.36	\$43.43	\$41.44	\$41.86
\$42.52	\$42.52	\$42.52	\$42.52	\$42.52

\$241.44	\$174.37	\$197.44	\$188.37	\$190.28
1	1	1	1	1

99110CA0350061	99110CA0350062	99110CA0350063	99110CA0350064	99110CA0350065
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
0	0	0	0	0
\$0	\$0	\$0	\$0	\$0
0.00%	0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.00%	0.00%
100.00%	100.00%	100.00%	100.00%	100.00%
\$0	\$0	\$0	\$0	\$0
0.00%	0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.00%	0.00%
100.00%	100.00%	100.00%	100.00%	100.00%
\$0	\$0	\$0	\$0	\$0
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\$0	\$0	\$0	\$0	\$0
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99110CA0350061	99110CA0350062	99110CA0350063	99110CA0350064	99110CA0350065
\$284.56	\$212.73	\$240.87	\$229.81	\$232.14
1	1	1	1	1
\$285	\$213	\$241	\$230	\$232
100.00%	100.00%	100.00%	100.00%	100.00%
0.00%	0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.00%	0.00%
\$1,280	\$1,280	\$1,280	\$1,280	\$1,280
100.00%	100.00%	100.00%	100.00%	100.00%
0.00%	0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.00%	0.00%
\$582	\$582	\$582	\$582	\$582
0.00%	0.00%	0.00%	0.00%	0.00%
\$698	\$698	\$698	\$698	\$698
\$0	\$0	\$0	\$0	\$0
\$194	\$194	\$194	\$194	\$194
\$698.31	\$698.31	\$698.31	\$698.31	\$698.31
\$1,280.26	\$1,280.26	\$1,280.26	\$1,280.26	\$1,280.26
\$1,280.26	\$1,280.26	\$1,280.26	\$1,280.26	\$1,280.26



Filing Information

1. Company Legal Name: Health Net Life Insurance Company
2. State: California
3. HIOS Issuer ID: 99110
4. Market: Individual
5. Effective Date: Individuals enrolling January 1, 2017 – December 31, 2017
6. Primary Contact: Name: Bryan Curley
7. Primary Contact Telephone Number: (818) 676-8358
8. Primary Contact Email Address: Bryan.J.Curley@healthnet.com
9. Product Names: Health Net PPO, Health Net EPO

Documentation Required for the Individual Non-Grandfathered Health Plan

- 1. Parts I, III of HHS Forms. (Requirements per 45 CFR §154.215)**
Part I Unified Rate Review Data Template
Part III Rate Filing Documentation and Actuarial Memorandum
- 2. SERFF Rate Data Template**
- 3. Covered CA Forms**
Supplement Rate Review Template

Actuarial Memorandum and Certification

Introduction

Submitted for your review are Health Net's proposed premium rates for ten EPO and five PPO plan designs. Five of the EPO plans are to be offered through Covered California, all other plans are to be offered off-Exchange. All rates are guaranteed for a 12-month period.

The On-Exchange and Off-Exchange EPO rates within are our proposed EPO rates to Covered CA and the CDI and we do not expect them to change.

The Off-Exchange PPO rates (there is no Exchange PPO plans) within are developed on a preliminary basis and are subject to change based on our continuing negotiations with the CDI.

As it stands, Health Net is expected to have an after-tax profit loss. It is not Health Net's intention to continue to run at a deficit. The intention is to bring costs down as much as is possible to reach our long term target.

Proposed Rate Increase(s)

This rate filing is for all Individuals, both those sold onto these plans and those renewing from the 2016 version of these plans. The rates are guaranteed until December 31, 2017.

The projected claims experience was developed using calendar year non-grandfathered 2015 experience.

The overall renewal of 12.1% is the weighted average of the PPO and EPO plan increases, weighted on projected premium and projected 2017 members.

The PPO rates are being increased 9.9% with no area variation in renewal. EPO rates are increased by 23.2% (EPO premium rates are the same as established in the July 14th filing).

Note the rate increase of 12.1% assumes that we are operating at an after-tax profit loss on risk adjusted premium of -12.2%. We have identified the loss as a consequence of benefit design vulnerabilities on our Off-Exchange PPO product.

Compared to the filing submitted July 14th, this filing incorporates the following revisions:

- Out of Network deductibles for Platinum and Gold at \$5,000 Individual/\$10,000 Family
- Out of Network Out of Pocket Maximums at \$25,000 Individual/\$50,000 Family
- Current membership updated to August 2016 members. 2017 Projected Membership has the same metal tier distribution % as in August 2016.
- 2017 Substance membership ties to August 2016
- Risk Adjustment projection based on latest Wakely January - July 2016 forecast
- Morbidity assumption data incorporates January - July 2016 claims experience

Impact of Rate Factor Changes

Plan premiums are calculated as Calibrated Plan Specific Base Rate x Area Factor x Age Factor (subject to the three child limit). The age factors are Federally mandated, and the area factors are included below.

Impact of Benefit Plan Changes

Plans are the 2017 standard plans designed by Covered CA. We relied on their AV calculations as a component of plan pricing.

Experience Period Premium and Claims

Experience Period:

January 1, 2015 – December 31, 2015.

Paid Through Date:

January 31, 2016.

Premiums (net of MLR Rebate) in Experience Period:

Premiums are actual member premiums collected during the experience period. As MLR rebates are not applicable during the experience period, rebates were not included.

Allowed and Incurred Claims Incurred During the Experience Period:

Incurred claims were pulled directly from Health Net's internal claims system.

	Experience:	Total	PMPM
A	Experience Period Member Months	440,430	36,703
B	Expected Member Months in the Rating Period	282,370	23,531
C	Experience Period Premium	\$189,018,536	\$429.17
D	System Experience Period Completed Incurred Claims	\$473,970,047	\$1,076.15
E	Off System Adjustments to Claims (Pediatric Vision+Dental)	\$2,096,664	\$4.76
F	Experience Period Completed Incurred Claims	\$476,066,711	\$1,080.91

- Incurred but not paid claims are based on historical claims payment patterns.
- The projected claims experience was developed using calendar year 2015 non-grandfathered experience.
- An off-system adjustment of \$4.76 was made to account for pediatric dental and vision. This benefit is currently not included in our internal systems, thus claims have to be adjusted for it. It is computed as the per child per month cap rate multiplied by the percentage of children age 0-18 on plans that include pediatric dental or vision coverage during the experience period, CY 2015.

	Rate per child per month	% of plans with coverage	% of children age 0-18	Experience Adjustment
Pediatric Dental	\$20.28	100.0%	21.8%	\$4.41
Pediatric Vision	\$1.60	100.0%	21.8%	\$0.35
Total Adjustment				\$4.76

Benefit Categories

Benefit categories are determined using a combination of diagnostic, procedural and other codes pulled from claims data. Similar to how claims are mapped in Milliman's Health Care Cost Guidelines, an industry wide standard. Health Net's algorithm is developed and maintained by our Health is internally developed by our Health Care Solutions department.

Projection Factors

1. Eligibility requirements and exclusions conform to ACA.
2. The Index Rate as of January 1, 2017 was developed based on CY 2015 costs for Individual non-grandfathered PPO and EPO business and adjusted to reflect anticipated Individual demographics for 2017. These costs were adjusted based on the following changes not reflected in CY 2015 experience.

	Claims development:	Total	PMPM
H	Experience Incurred Claims (D)	\$473,970,047	\$1,080.91
I	Claims without OON Substance Abuse Claims		\$617.84
J	OON Substance Abuse Cost Adjustment ---80% reduction	0.657	\$710.14
K	Updates: Current Exposure to Substance Abuse / Region / Metal Tier	0.977	\$693.48
L	Reflect 2016 Observed Adverse Selection	1.152	\$799.19
M	Assumption for 2017 Adverse Selection	1.028	\$821.57
N	Proposal B Increase OON Cost Share Amounts - Deductible	0.992	\$814.98
	Proposal B Increase OON Cost Share Amounts - MOOP	0.977	\$796.64
	Proposal E: Remove First Health Travel Benefit for IFP and remove all out of state OON benefits/ coverage, with the exception of ER for IFP	0.996	\$793.39
	Proposal F: Exclude OON non-certified services (remove pre-cert penalties)	1.000	\$793.39
	Proposal G: Limit as Many Services as Possible to INN only (Expand Non-Coverage of Certain Services OON)	0.999	\$792.76
	Increase Certification Requirements for Services/ PA Required for Payment	1.000	\$792.76
	Other 2017 Initiatives	1.000	\$792.76
O	Morbidity adjustment - Healthy lives entering the market (in Risk Adjustment)	1.000	\$792.76
P	Morbidity adjustment - Guaranteed Issue for PPO	1.000	\$792.76
Q	CSR Receivables	0.996	\$789.92
R	Release of Pent-Up Demand	1.000	\$789.92
S	2016 Carryover Initiatives	0.989	\$781.57
U	Age Adjustment	0.976	\$762.64
V	Area Adjustment	1.000	\$762.76
W	Plan Adjustment	1.009	\$769.46
X	Benefit Adjustments	1.000	\$769.46
Y	Plan benefits in addition to EHB	1.000	\$769.46
Z	Claims Adjustment: Hepatitis C	0.997	\$767.08
AA	Adjustment for Grace Period	1.000	\$767.08
AB	Pricing Trend	7.85%	7.85%
AC	Months of Trend	24	24
AD	Trend Factor	1.163	1.163
AE	Projected Incurred Claims	\$251,965,898	\$892.33

(I) Claims without OON Substance Abuse Claims

This is 2015 claims cost without Out-of-Network substance abuse claims. Of the Out-of-Network substance abuse claims, roughly

- (1) 20% is Inpatient Facility
- (2) 50% is Outpatient Facility
- (3) 30% is Toxicology Screens

We present this number in order to demonstrate the severity of Out-of-Network Substance Abuse claims on the single risk pool. Note the On-Exchange EPO product does not have Substance Abuse issues as it does not have OON benefits.

(J) OON Substance Abuse Cost Adjustment ----80% reduction

In CY 2015, Out-of-Network substance abuse claims consumed 42.7% of the dollars spend for this block of business. Each claimant had an average cost PMPM of \$19,000 in CY 2015.

OON substance abuse claims are residential treatment center inpatient and outpatient claims and toxicology screens (drug tests). Prior to 2016, Out of network substance abuse claims were paid as a % of billed, because a Medicare Allowable rate was not available for this claim category. For example, toxicology was paid based upon CPT. There was no Medicare fee schedule amount at CPT level but there is an amount when they bill using G-codes. We now crosswalk services to G-codes because Medicare has allowed amounts at that level.

We have fixed this coding pitfall, which will allow us to establish a reasonable reimbursement rate by doing the following:

- Eliminate the default rate of 75% of billed charges for services that do not have a Medicare rate.
- Reduction of reimbursement for out-of-network physicians to 100% of Medicare rate (from the 85th percentile of FAIR Health)
- Reduction to 150% of Medicare for out-of-network facilities (from 190% of Medicare).

This drop in reimbursement rate is expected to reduce OON substance abuse claims by 80%.

OON substance abuse claims make up 42.7% of claims for 2015. As we expect a reduction in costs of 80%, the adjustment is calculated as $0.657 = 1 - (42.7\% \times 0.8)$.

(K) Updates: Current Exposure to Substance Abuse / Region / Metal Tier

There are two components to this item (1) 2017 Exposure to Substance Abuse and (2) Reweighting Claims to expected member weights by region by metal tier.

(1) 2017 Exposure to Substance Abuse

In CY 2015, we had an average of 697 (or 2.0%) substance abuse members during the year, culminating in a high of 1,615 (or 5.4%) members at January 2016. The number of claimants that incur OON substance abuse claims has dropped from that high to 362 members which would be 1.5% of expected members in 2017.

(2) Reweighting Claims to expected member weights by region by metal tier.

This adjustment ensures that claims cost reflects the actual ACA population that will be impacted by the proposed rates. It is calculated as the claims cost of the renewing ACA market weighted by the expected member months in the rating period, rather than the experience member months.

The expected member months in the rating period are our projections. We take August 2016 membership and forecast the future 2017 distribution by product. Metal tier distribution by for 2017 is the same percentage of the book as in August 2016.

(L) Reflect 2016 Observed Adverse Selection

This adjustment ensures that 2017 claims cost reflects known 2016 experience from January to July. It is calculated by comparing the January – July 2016 Claims cost less Substance Abuse to the January – July 2015 Claims Cost less Substance Abuse with trend. We remove the impact of Substance Abuse as that morbidity adjustment is already considered above.

	EPO	EPO	PPO	PPO	PPO	PPO	PPO
	Exchange	Off-Exchange	Off-Exchange	Off-Exchange	Off-Exchange	Off-Exchange	Off-Exchange
	ALL	ALL	Platinum	Gold	Silver	Bronze	Catastrophic
Experience:	PMPM	PMPM	PMPM	PMPM	PMPM	PMPM	PMPM
Jan-Jul 2016 MMOS	25,054	5,096	22,422	19,468	44,551	67,212	10,011
Jan-Jul 2016 Claims	\$757.77	\$838.05	\$3,658.45	\$1,136.03	\$730.75	\$332.59	\$113.86
MHN Costs (no IBNR)	\$2.28	\$0.40	\$1,070.23	\$161.10	\$34.20	\$8.28	\$2.13
(a) Other Costs	\$755.49	\$837.65	\$2,588.22	\$974.93	\$696.55	\$324.31	\$111.73
Jan-Jul 2015 MMOS	20,032	1,342	30,710	34,637	49,061	98,586	21,983
Jan-Jul 2015 Claims	\$710.06	\$514.34	\$3,353.49	\$871.21	\$1,013.55	\$242.35	\$107.06
MHN Costs (no IBNR)	\$5.15	\$0.00	\$1,259.08	\$170.79	\$419.23	\$7.80	\$9.10
(b) Other Costs	\$704.91	\$514.34	\$2,094.41	\$700.42	\$594.33	\$234.55	\$97.97
(c) Trend	7.85%	7.85%	7.85%	7.85%	0.00%	7.85%	7.85%

MORBIDITY ASSUMPTIONS							
(a) / (b) / (1 + c) -1	-0.6%	51.0%	14.6%	29.1%	8.7%	28.2%	5.7%

(M) Assumption for 2017 Adverse Selection

We assume that Adverse selection in 2017 will be down -82% from 15.2% in 2016 to 2.8% in 2017. We still expect some adverse selection as a result of lapsation.

(N) Proposed Benefit Changes

Proposal B Increase OON Cost Share Amounts – Deductible and MOOP

For PPO we propose to make the following benefit changes to Out-of-Network deductibles and Maximum Out of Pocket:

OON Deductibles (Individual/Family):

Platinum - \$5,000/\$10,000

Gold - \$5,000/\$10,000

Silver - \$5,000/\$10,000

Bronze - \$12,600/\$25,200

Minimum Coverage - \$14,300/\$28,600

OON OOPMs:

Platinum - \$25,000/\$50,000

Gold - \$25,000/\$50,000

Silver - \$25,000/\$50,000

Bronze - \$25,000/\$50,000

Minimum Coverage - \$25,000/\$50,000

The changes in deductible impact the single risk pool by -0.8%, though they vary by metal tier.

The changes in MOOP impact the single risk pool by -2.3%, though they vary by metal tier

Note, this impacts only PPO plans, our EPO Plans (which are On-Exchange) are not impacted as they have no Out-of-Network benefits. Services such as Emergency Care are not subject to the change as they are always paid at the In-Network cost share.

Proposal E: Remove First Health Travel Benefit for IFP and remove all out of state OON benefits/ coverage, with the exception of ER for IFP

We expect that the changes to these benefit categories reduces the single risk pool claims by 0.4%.

Proposal F: Exclude OON non-certified services (remove pre-cert penalties)

We expect that this proposal will not have a material impact to projected 2017 claims but such a benefit change is good policy.

Proposal G: Limit as Many Services as Possible to INN only (Expand Non-Coverage of Certain Services OON)

We expect that this proposal will have a -0.1% impact to projected 2017 claims.

Increase Certification Requirements for Services/ PA Required for Payment

We expect that this proposal will not have a material impact to projected 2017 claims but such a benefit change is good policy.

Other 2017 Initiatives

Note the rate increase of 12.1% assumes that there are no further benefit changes we can implement for 2017 plans.

(O) Morbidity adjustment - Healthy lives entering the market (in Risk Adjustment)

We don't expect healthy lives entering the risk pool to impact our population materially.

(P) Morbidity adjustment - Guaranteed Issue for PPO

We do not adjust for guaranteed issue for PPO.

(Q) CSR Receivables

We are in the Exchange in CY 2017 for EPO and expect 2017 claims can reduce claims by \$2.83 PMPM due to CSR. This projection is based on the CSR Receivables booked with CMS in the June 3, 2016 reconciliation.

(R) Release of Pent-Up Demand

We believe that Pent-up demand has been fully realized, therefore the factor is 1.0.

(S) 2016 Carryover Initiatives

This reflects the expected reduction to health care costs as a result of our cost containment/quality improvement initiatives. We expect these initiatives, if 100% realized, will reduce costs by a factor of 0.989. These 2016 initiatives are separate from the 2017 initiatives presented in (M).

(U) Age Adjustment (Relative to Current Metal/Region Mix)

We must adjust CY 2015 claims to reflect the average age factor of the population in the rating period.

- A. We pulled the census of every non-grandfathered member in California Individual PPO business in CY 2015. The average age factor was calculated based on this population and using the approved ACA age factors. The calculated value is 1.176.
- B. We pulled the census of every non-grandfathered member in California Individual PPO as of August 2016. The average age factor was calculated based on this population and using the approved ACA age factors. The calculated value is 1.148.

Hence the Age Adjustment (B) / (A) = 1.148 / 1.176 = 0.976

(V) Area Adjustment

We must adjust CY 2015 claims to reflect the average area factor of the population in the rating period.

- A. We pulled the census of every non-grandfathered member in California Individual PPO business in CY 2015. The average area factor was calculated based on this population and using the approved 2016 ACA area factors. The calculated value is 1.130.
- B. We pulled the census of every non-grandfathered member in California Individual PPO as of August 2016. The average area factor was calculated based on this population and using the approved 2016 ACA area factors. The calculated value is 1.130.

Hence the Area Adjustment (B) / (A) = 1.130 / 1.130 = 1.000

(W) Plan Adjustment

We must adjust CY 2015 claims to reflect the expected benefits to be paid in the rating period.

- A. The experience period has an average plan factor of 0.696, which is calculated as the average actuarial value of our California Individual non-grandfathered PPO business in 2015 using the standalone AV calculator.
- B. We pulled the census of every non-grandfathered member in California Individual PPO as of August 2016. The average plan factor was calculated based on this population and using the 2016 ACA plan factors. The calculated value is 0.702. The AVs were determined based on the standalone AV calculator which is a paid to allowed calculator.

Hence the Plan Adjustment is (B) / (A) = 0.702 / 0.696 = 1.009

(X) Benefit Adjustments

No benefit adjustments were made.

(Y) Plan benefits in addition to EHB

There are no adjustments for plan benefits in addition to EHB.

(Z) Claims Adjustment: Hepatitis C

Because the morbidity of the population is already quite high, we expect 2017 to be lower than the 2015 experience trended forward to 2017 by \$2.38 PMPM. The cost impact of these drugs to the 2017 book of business has been calculated as reducing claims cost by 0.3%.

(AA) Adjustment for Grace Period

Claims are not adjusted for the impact of the 90 Day Grace Period to pay plan premiums the majority of our business in this pool is Off-Exchange.

(AB) Pricing Trend

Trends are built from a “first principles” approach, calculating the expected unit cost change by hospital and medical group which is then weighted using the historic volume associated with each provider. Variables of trend such as anti-selection, underwriting wear-off, demographic changes, margin for trend, technology/intensity not included. There is no trend margin or

fluctuation factor in trend development. Cost trends are supported by known and forecasted contractual increases based on our expectations of contracts in 2017. Note trend is reported on a risk neutral basis and does not incorporate antiselection in the experience.

The average medical and pharmacy trend is 7.85%. The components of trend are detailed below. All components are based on our Commercial book of business.

Benefit Category	Annualized Trend Factors	
	Cost	Util
Inpatient Hospital	106.1%	101.7%
Outpatient Hospital	106.0%	101.7%
Professional	105.5%	101.7%
Other Medical	104.1%	101.7%
Capitation	100.0%	100.0%
Prescription Drug	111.0%	100.0%

Medical Unit Cost Trend is the increase in health care costs due to medical inflation. It is estimated by reviewing current and anticipated future provider reimbursement arrangements. Note deductible leveraging is not a component of trend, instead it is reflected in the change in AV from current year to the rating period as implicit in the change in the AV calculator.

Medical Utilization Trend is the increase in health care costs due to changes in service. It includes evolutionary changes in medical care practices, increase in the supply of services, and changes in the overall health and/or attitude of the population.

The utilization of services has been very volatile. We assume for the rating period that utilization is 1.7%. The utilization estimates used in the rate development were based on actuarial judgment.

Rx Trend is the increase in health care costs due to prescription drug inflation. We use 11.0% in rating.

Risk Adjustment and Reinsurance

	Risk Adjustment/Reinsurance Recoveries	Total	PMPM
AF	Reinsurance Recoveries	1.000	\$0.00
AG	Risk Adjustment		(\$194.17)
AH	Projected Incurred Claims (w/ ACA Adjustments)	\$197,138,086	\$698.16

(AF) Reinsurance Recoveries

The reinsurance program is no longer in effect for plans in 2017 and beyond.

(AG) Risk Adjustment

Risk Adjustment is based on January – July 2016 Wakely forecast, projected to 2017 assuming the market premium trend is 9.5%.

Non-Benefit Expenses and Profit & Risk

Total Premium Retention is the amount to be retained by the insurer to cover all of the insurer's non-claim costs including expected profit. Note we display profit on an after-tax basis per the methodology established by the Unified Rate Review template which specifies that taxes and fees should include income tax and profit should be reported on an after tax basis.

	Admin Development	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AI	Administrative Expenses	\$9,840,378	\$34.85	4.4%	5.9%
AJ	Commissions	\$2,021,053	\$7.16	0.9%	1.2%
AK	Broker Bonus	\$0	\$0.00	0.0%	0.0%
AL	Total Administrative Costs	\$11,861,431	\$42.01	5.3%	7.1%

	Taxes and Fees	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AM	Premium tax	\$0	\$0.00	0.0%	0.0%
AN	Risk Adjustment Fee	\$42,356	\$0.15	0.0%	0.0%
AO	Reinsurer's Fee	\$0	\$0.00	0.0%	0.0%
AP	Exchange Fee	\$933,380	\$3.31	0.4%	0.6%
AQ	Insurer's Fee	\$0	\$0.00	0.0%	0.0%
AR	PCORI	\$51,062	\$0.18	0.0%	0.0%
AS	Income Tax	(\$15,357,687)	(\$54.39)	-6.9%	-9.2%
AT	Total Taxes and Fees	(\$14,330,890)	(\$50.75)	-6.4%	-8.6%

	Premium development	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AU	Experience Period Premium (C)	(\$28,704,136)	\$429.17		
AV	Adjustments for Approved Rate Changes	(\$58,341,652)	\$100.12		
AW	Adjusted Earned Premium	\$23,100,091	\$529.29		

	Proposed Base Rate Development:	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AX	Projected Incurred Claims (w/ ACA Adjustments) (AH)	\$197,138,086	\$698.16		
AY	Total Administrative Costs	\$11,861,431	\$42.01		
AZ	Total Taxes and Fees	(\$14,330,890)	(\$50.75)		
BA	After-tax Profit/Margin	(\$27,071,552)	(\$95.87)	-12.2%	-16.2%
BB	Required Revenue	\$167,597,074	\$593.54		
BC	Risk Adjusted Revenue		\$787.71		
BD	Requested Base Rate		\$593.54		
BE	Requested Renewal Increase		\$0.12		
BF	Target Medical Loss Ratio				117.6%

(AI) Administrative Expenses

Projected operating expense is \$34.85.

(AJ) Commissions

Broker commissions are 1.2% of premium. This is based on our agreements with the brokers and is calculated using current membership distribution by product, metal tier and Exchange status.

(AK) Broker Bonus

We do not pay a broker bonus on this business.

(AM) Premium Tax

There is no adjustment made for premium tax as the premium tax for this block was set at 0% as in order to mitigate the implementation of the tax on Managed Care Organizations.

(AN) Risk Adjustment Fee

Risk Adjustment is \$1.75 per member per year, or \$0.15 PMPM.

(AO) Reinsurer's Fee

We are not assessed the Reinsurer's Fee for 2017.

(AP) Exchange Fee

Based on current membership, 14% of our membership will be in the Exchange. Business in the Exchange is assessed an Exchange Fee of 4.0% of premium. This fee must be spread to the entire book, both on and off Exchange, as rates off the Exchange for Qualified Health Plans must match rates on the Exchange. That implies that all plans must incur at charge of 0.6% of premium per member, per month to reflect the assessment of the Exchange Fee.

(AQ) Insurer's Fee

We are not assessed the Insurer's Fee for 2017.

(AR) PCORI

These are fees set by the Federal Government. PCORI is \$0.18 PMPM in 2017.

(AS) Income Tax

Income tax is calculated as:

$$\begin{aligned}\text{Income Tax} &= (\text{After-Tax Profit} + \text{Insurer's Fee}) / (1 - \text{Corporate Tax Rate}) \times \text{Corporate Tax Rate} \\ &= (-16.2\% + 0.0\%) / (1 - 36.2\%) \times 36.2\% \\ &= -9.2\%\end{aligned}$$

Note the After-Tax Profit referenced is expressed as a % of Risk Adjusted Revenue (Premium Net of Risk Adjustment).

(AW) Adjusted Earned Premium

A renewal increase is calculated by comparing the proposed premium with an effective date of January 1, 2017 versus the adjusted earned premium one year prior or January 1, 2016.

The adjusted earned premium is the Individual PPO rates filed for CDI ACA plans with January 1, 2016 effective dates. It is computed by pulling a census of every non-grandfathered member in California Individual PPO as of the current month (August 2016). Then membership is adjusted to reflect what we think the book distribution will be in 2017 (see K).

All members are rated as if they were on a January 2016 ACA plan using the rating formula:

Member Premium = Plan Specific Base Rate x Age Factor (with 3 child limit) x Area Factor

Book of Business Premium = Sum of all Member Premiums (subject to the 3 child limit)

The age factor of this population is determined by mapping every member to their ACA age factor, with the 3 child limit based on their age on January 1, 2017, the effective date of the rate filing.

The area factor of this population is determined by mapping every member to their ACA area factor based on their current zip code.

The average plan factor of this population is the plan actor of the ACA plan they are currently enrolled in.

We note that the average area and plan of current rates is consistent with the average area and plan in projected claims. The average age uses the same population but aging in claims uses the Milliman age factors (which do not advantage one cohort over another and reflect the true claims costs by age). While aging in premium uses the ACA age factors, the age factors mandated in premium setting.

Thus current premium and projected incurred claims use the same demographics basis and a comparison of Required Premium versus Adjusted Earned Premium is the Renewal Rate Increase, the annual increase from January 2016 to January 2017.

(BA) After Tax Margin/Profit

The 2017 after tax profit as a percent of billed premium is -16.2%. This is the profit reported in the URRT using the prescribed URRT methodology.

This results in an after-tax profit loss as a percent of risk adjusted revenue of -12.2%.

(BE) Requested Renewal Increase

The comparison between required premium (which is projected incurred claims plus administrative expenses plus profit) and current premium determines the renewal increase.

The renewal increase by plan is shown below. The overall average renewal is 12.1% for our PPO and EPO plans. This increase does not include the impact of demographic shifts.

EPO premium rates are the same as previously filed, though the renewal increase varies slightly due to using an updated census (August 2016) to weight the average renewal.

Plan Name	Product	Exchange	Total
Health Net Platinum 90 PPO	PPO	Off	9.9%
Health Net Gold 80 PPO	PPO	Off	9.9%
Health Net Silver 70 PPO	PPO	Off	9.9%
Health Net Bronze 60 PPO	PPO	Off	9.9%
Health Net Minimum Coverage PPO	PPO	Off	9.9%
Health Net Platinum 90 EPO	EPO	On	23.7%
Health Net Gold 80 EPO	EPO	On	23.0%
Health Net Silver 70 EPO	EPO	On	24.0%
Health Net Bronze 60 EPO	EPO	On	22.0%
Health Net Minimum Coverage EPO	EPO	On	22.0%
Health Net Platinum 90 EPO	EPO	Off	23.7%
Health Net Gold 80 EPO	EPO	Off	23.0%
Health Net Silver 70 EPO	EPO	Off	24.0%
Health Net Bronze 60 EPO	EPO	Off	22.0%
Health Net Minimum Coverage EPO	EPO	Off	22.0%

Projected Loss Ratio

Using the Federally prescribed MLR methodology, the projected loss ratio is 109.0%.

	Federal MLR Calculation	Total	PMPM	% of Revenue
BG	Premium tax	\$0	\$0.00	0.0%
BH	Income Tax	(\$15,357,687)	(\$54.39)	-9.2%
BI	Exchange Fee	\$933,380	\$3.31	0.6%
BJ	Insurer's Fee	\$0	\$0.00	0.0%
BK	PCORI	\$51,062	\$0.18	0.0%
BL	Risk Adjustment Fee	\$42,356	\$0.15	0.0%
BM	Reinsurer's Fee	\$0	\$0.00	0.0%
BN	Quality Improvements	\$1,186,099	\$4.20	0.7%
BO	Federal MLR [= (Claims + QI)/(Revenue - Taxes)]			109.0%

Projected Index Rate

The Allowed Index Rate for the effective period is \$1,303.08. It is calculated by taking the Projected Incurred Claims (before ACA adjustments) and dividing it by the allowed modifiers to the Index Rate (i.e., Provider Network) and the Paid to Allowed Ratio.

	Index Rate Development	PMPM
BP	Projected Incurred Claims (AE)	\$892.33
BQ	Paid to Allowed Ratio	0.697
BR	Network Calibration	0.982
BS	Index Rate	\$1,303.08

(BP) Projected Incurred Claims

Assumptions that went into Projected Incurred Claims are discussed in detail in the following sections of this memorandum:

Experience Period Premium and Claims
Projection Factors

(BQ) Paid to Allowed Ratio

We expect the paid to allowed ratio of future business to be 0.697. This valuation was calculated based on the member weighted average of the AVs of our 2017 portfolio assuming the expected 2017 membership distribution. The AVs were determined based on the standalone AV calculator which is a paid to allowed calculator.

(BR) Network Calibration

To calculate the average network factor we pulled the census of every non-grandfathered member in California Individual PPO/EPO as of January 2016 by plan and network, and then projected them to our expected 2017 membership distribution. The average network factor was calculated based on this population and using our proposed 2017 network factors.

Market Adjusted Index Rate

After developing the Index Rate, the Market Level Base Rate is calculated as:

BT	Index Rate PMPM	\$1,303.08
BU	Federal Reinsurance Program Adjustment	\$0.00
BV	Risk Adjustment	\$283.55
BW	Exchange User Fee Adjustment	\$4.83
BX	Market Adjusted Index Rate	\$1,024.35

(BU) Federal Reinsurance Program Adjustment

There is no Reinsurance Program Adjustment.

(BV) Risk Adjustment

This is the negative of (AG) Risk Adjustment Projection based on Edge Server divided by (BQ) Paid to Allowed Ratio and (BR) Network Calibration.

(BW) Exchange User Fee Adjustment

This is (AP) Exchange Fee, divided by (BQ) Paid to Allowed Ratio and (BR) Network Calibration.

(BX) Market Adjusted Index Rate

This is calculated as:

(BT) Index Rate PMPM – (BU) Federal Reinsurance Program Adjustment - (BV) Risk Adjustment + (BW) Exchange User Fee Adjustment.

It is the Rate where all allowable modifiers to the Index Rate: Actuarial Value, Provider Network, Plan Benefits in addition to EHB, Administrative Costs excluding exchange fees are 1.00. It is also the Rate where age factor and area factor are 1.00.

Plan Adjusted Index Rate

After developing the Market Adjusted Index Rate, the Plan Adjusted Index Rate is calculated using the plan specific factors allowed by 45 CFR Part 156, §156.80(d)(2).

BY	Market Adjusted Index Rate	\$1,024.35
BZ	Actuarial value and cost-sharing adjustment	varies by plan
CA	Provider network, delivery system and utilization management adjustment	varies by plan
CB	Adjustment for benefits in addition to the EHBs	1.000
CC	Impact of specific eligibility categories for the catastrophic plan	varies by plan
CD	Adjustment for distribution and administrative costs	0.846
CE	Plan Adjusted Index Rate	varies by plan
CF	Plan Adjusted Index Rate	varies by plan
CG	Age Curve Calibration	0.653
CH	Geographic Factor Calibration	0.856
CI	Network Factor Calibration	1.000
CJ	Calibrated Plan Adjusted Index Rate	varies by plan

(BZ) Actuarial Value and Cost-Sharing Adjustment

The Actuarial Value and Cost-Sharing Adjustment is the product of the AV of the plan as computed by the Standalone calculator, the Induced Demand Factor, and the Normalization Adjustment.

There are no changes to the Induced Demand factor from 2016 to 2017. The normalization factor changed due to the changes in demographic mix.

(CA) Provider network, delivery system and utilization management adjustment

This varies by network and rating region, and represents the cost relativity of the PPO and EPO networks, by region:

Compared to the July 14th filing, area factor was changed so that there would be no rate variation by region. The network factor for EPO was modified in order to arrive at the same premium rates as filed with the CDI and Covered CA on July 14th.

Product	Rating Region	Current	Proposed	Change
		Network Factors	Network Factors	
PPO	All	1.000	1.000	0.0%
EPO	2	0.768	0.880	14.5%
EPO	4	0.800	0.917	14.5%
EPO	5	0.761	0.872	14.5%
EPO	7	0.787	0.901	14.5%
EPO	8	0.834	0.955	14.5%
EPO	9	0.752	0.862	14.5%
EPO	10	0.819	0.939	14.5%
EPO	14	0.781	0.895	14.5%
EPO	15	0.737	0.844	14.5%
EPO	16	-	-	14.5%
EPO	17	0.777	0.890	14.5%
EPO	18	0.722	0.827	14.5%
EPO	19	0.719	0.823	14.5%

As a result of CCIIO guidance regarding providing multiple networks as part of the same risk pool, we are showing our EPO products by region each as a separate network adjustment factor.

(CB) Adjustment for benefits in addition to the EHBs

There are no benefits in addition to the EHBs.

(CC) Impact of specific eligibility categories for the catastrophic plan

Catastrophic plans are their own single risk pool and this adjustment factor is meant to adjust the catastrophic rates so that they reflect their own experience. Our 2016 catastrophic factors were 0.815 for PPO plans and 0.788 for EPO plans and remain unchanged from the previous rate filing.

(CD) Adjustment for distribution and administrative costs

This is calculated as:

$$1 + \frac{\text{Total Administrative Costs} + \text{Total Taxes \& Fees} - \text{Exchange User Fees} + \text{Profit}}{\text{Projected Incurred Claims w/ ACA Adjustments} + \text{Exchange User Fees}}$$

The resulting adjustment is 0.846.

(CG) Age Curve Calibration

This is the inverse of the expected average age factor using the ACA age factors and the 3 child limit.

The age curve factor was calculated by pulling a census of every non-grandfathered member in California Individual PPO as of January 2016, then projecting them to the expected 2017 membership. The ACA age factor is based on the member's age in years (rounded down) as of January 1, 2017 - the age implicit in (AW) Adjusted Earned Premium. The 3 child limit was applied so that dependent children age 0-20 were not counted if they were the 4th or more child in a family contract. The result of this analysis demonstrated that the average age factor for this block is 1.531. Thus to calibrate the plan adjusted index rate so that the implied age factor is 1.00, we multiply by the inverse of the average age factor of the block. The inverse of 1.531 is 0.653.

(CH) Geographic Factor Calibration

This is the inverse of the weighted average of the proposed area factors, weighted by projected 2017 ACA membership. The average area factor was calculated based on this population and using our proposed 2017 area factors. The calculated value is 0.854.

Note we adjust the calibration factor by 0.978 in order to account for average differences between the renewal produced by the "Rating factors" tab and the renewal calculated by the Rate Development.

AV Metal Values

All AV Metal Values included in Worksheet 2 of the Part I Unified Rate Review Template were entirely based on the AV Calculator.

AV Pricing Values

All plans filed are standard plans developed by Covered California. The AVs below are calculated by Covered California and we relied on them without comment.

Rating Factors

We do not rate for tobacco. Per member premium is calculated as:

Plan Specific Base Rate

x Age Factor with 3 child limit

x Area Factor

Age Factors and Tier Factors:

We use ACA age factors with the 3 child limit.

Area Factors:

Area factors reflect the regional differences in provider contracting and claims cost.

Regional differences between plan premiums is the product of the Area Factor x Network factor.

Rating Region	Current		Proposed		Change	
	Area x Network		Area x Network		Area x Network	
	PPO	EPO	PPO	EPO	PPO	EPO
2	1.234	0.948	1.234	1.086	0.0%	14.5%
4	1.278	1.023	1.278	1.171	0.0%	14.5%
5	1.210	0.921	1.210	1.055	0.0%	14.5%
7	1.158	0.911	1.158	1.044	0.0%	14.5%
8	1.320	1.100	1.320	1.260	0.0%	14.5%
9	1.276	0.960	1.276	1.099	0.0%	14.5%
10	1.146	0.939	1.146	1.076	0.0%	14.5%
14	0.943	0.737	0.943	0.844	0.0%	14.5%
15	0.915	0.674	0.915	0.772	0.0%	14.5%
16	-	-	-	-		
17	0.983	0.764	0.983	0.875	0.0%	14.5%
18	1.008	0.729	1.008	0.834	0.0%	14.5%
19	1.024	0.736	1.024	0.843	0.0%	14.5%

For PPO, there is no area factor variation in renewal. For EPO, the network factor is set so that premium rates are set to the same premium as established in the July 14th filing.

Unified Rate Review Template

Section I: Experience period data:

Allowed and Incurred Claims Incurred During the Experience Period:

In order to supply the requested information for the URRT we have included all non-grandfathered California Individual business. Therefore the Single Risk Pool is comprised of our Non-Grandfathered Individual PPO and EPO business.

California Individual PPO incurred claims were pulled directly from Health Net's internal claims system. A completion factor of was applied to account for claims incurred but not reported.

Section II: Allowed Claims, PMPM basis

Other – This is the product of the following factors below. See above Projection Factors (I) – (AA), for further details regarding the quantitative development of these items.

	Claims development:	Total
I	Claims without OON Substance Abuse Claims	0.572
J	OON Substance Abuse Cost Adjustment ----80% reduction	1.149
	Selection Exposure to Substance Abuse	1.010
N	Proposal B Increase OON Cost Share Amounts - Deductible	1.175
	Proposal E: Remove First Health Travel Benefit for IFP and remove all out of state OON benefits/ coverage, with the exception of ER for IFP	0.974
	Proposal F: Exclude OON non-certified services (remove pre-cert penalties)	1.000
	Proposal G: Limit as Many Services as Possible to INN only (Expand Non-Coverage of Certain Services OON)	0.999
	Increase Certification Requirements for Services/ PA Required for Payment	1.000
	Other 2017 Initiatives	1.000
Q	CSR Receivables	0.996
R	Release of Pent-Up Demand	1.000
S	2016 Carryover Initiatives	0.989
U	Age Adjustment	0.976
V	Area Adjustment	1.000
X	Benefit Adjustments	1.000
Y	Plan benefits in addition to EHB	1.000
Z	Claims Adjustment: Hepatitis C	0.997
AA	Adjustment for Grace Period	1.000
	<i>Equalize Paid to Allowed</i>	1.035
	<i>Equalize Months of Trend</i>	1.000
	Total	0.753

Note: Equalize Paid to Allowed is equal to the ratio of the Experience AV to Projected AV w/ Plan Adjustment. It represents benefit / leveraging changes due to the change in plan benefits as calculated by the AV calculator. It is calculated as the

$$\text{Plan Adjustment (W)} \times \text{Experience AV} / \text{Projected AV} = 1.009 \times 0.715 / 0.697 = 1.035$$

Administrative Expense Load – This is the sum of the following factors below. See above Non-Benefit Expenses and Profit & Risk (AI) – (AK), for further details regarding the quantitative development of these items.

	Admin Development	% of Revenue
AI	Administrative Expenses	5.9%
AJ	Commissions	1.2%
AK	Broker Bonus	0.0%
	Total	7.1%

Profit – Profit in the rate development is -16.2%. See above Non-Benefit Expenses and Profit & Risk (BA) for further details regarding the quantitative development of this item. Please note, due to restrictions in the URRT we are including Taxes and Fees in the Profit section. This is because we are not permitted to validate the URRT with negative values in the Taxes and Fees section. Taxes and Fees total -8.6%, described below. Therefore we zero out the Taxes and Fees and Profit becomes $-24.7\% = -16.2\% + -8.6\%$.

Taxes and Fees – This is the sum of the following items below. See above Non-Benefit Expenses and Profit & Risk (AM)-(AR), for further details regarding the quantitative development of these items. Please note that the Taxes and Fees calculated below are included in the Administrative Load section, above, because the URRT does not allow for a negative value in the Taxes and Fees field.

	Taxes and Fees	% of Revenue
AM	Premium tax	0.0%
AS	Income Tax	-9.2%
AP	Exchange Fee	0.6%
AQ	Insurer's Fee	0.0%
AR	PCORI	0.0%
	<i>Total</i>	-8.6%

Credibility Manual Rate Development

Health Net did not employ the use of external claims experience.

Credibility of Experience

Our California Individual PPO non-grandfathered experience data includes over 36,700 lives and we considered it fully credible for the purpose of premium setting.

Paid to Allowed Ratio

We expect the paid to allowed ratio of future business to be 0.697. This valuation was calculated as the average of the AVs of our 2017 portfolio based on the census of our projected 2017 membership. The AVs were determined based on the standalone AV calculator which is a paid to allowed calculator.

Membership Projections

We project 23,531 members or 282,370 member months on 2017 Individual ACA PPO and EPO plans in California.

Warning Alerts

WARNING - Wksh 1 - Market Experience Index Rate For Projection Period (Cell V44) must be less than or equal to Projected Allowed Experience Claims PMPM (w/applied credibility if applicable), After Credibility Total (Cell V32).

This error occurs because the Projected Allowed Experience Claims do not match the Index Rate. In order to keep the Projected Paid to Allowed Factor consistent, the network factor and calibration were omitted from the URRT. As a result the Projected Allowed Experience Claims is equal to the Projected Paid Claims / Projected Paid to Allowed ($\$1,280.26 = \$892.33 / 0.697$).

This is the only way for the URRT to keep the correct Paid to Allowed Factor of 0.697, while also calculating a Single Risk Pool Average Premium that is consistent with the Requested Base Rate/Required Revenue ($\$593.54$).

The Index Rate is calculated as the Projected Allowed Experience Claims / Network Calibration ($\$1,303.08 = \$1,280.26 / 0.982$).

WARNING - Wksh 1 - Market Experience The sum of Administrative Expense Load (Cell T40), Profit & Risk Load (Cell T41), and Taxes & Fees (Cell T42) must also be between 0% and 100%.

This warning occurs because the Taxes and Fees are calculated as a negative number (-8.6%) which the URRT doesn't permit. To get around this, we lump it with the Profit/Risk load in the URRT. This warning message still occurs because the sum of admin, taxes, and profit are still negative.

Effective Rate Review Information (optional)

N/A

Reliance

Health Net did not rely on any information or underlying assumptions provided by another individual.

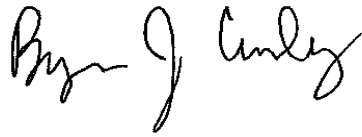
Actuarial Certification

I, Bryan Curley, am an actuary for Health Net, Inc. and a member of the American Academy of Actuaries, in good standing.

The rates developed in this memorandum are a result of discussions between Centene/Health Net and the California Department of Insurance. Based upon the information I had available to me at time of filing, the rates are deficient. However, Centene will continue to work toward finding additional cost of care initiatives to offset as much of this loss as possible. So, I am qualifying my certification below.

I hereby certify the following statements:

1. The projected index rate, in conjunction with other ACA financial provisions, is in compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80(d)(1)) and was developed in compliance with the applicable Actuarial Standards of Practice.
2. The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates.
3. The percent of total health care costs that represents essential health benefits included in Worksheet 2, Section IV were calculated in accordance with actuarial standards of practice.
4. The AV Metal Values included in Worksheet 2 of the Part I Unified Rate Review Template were distributed by Covered California. As directed by Covered California, we are submitting these plans based on Covered California's calculations.
5. Calculations are based on generally accepted actuarial rating principles for rating blocks of business.
6. The Part I Unified Rate Review Template does not demonstrate the process used by the Health Net to develop the rates. Rather it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of qualified health plans for federally facilitated exchanges and for certification that the Index Rate is developed in accordance with Federal regulation and used consistently and only adjusted by the allowable modifiers.
7. Note that rates were developed assuming the funding of Advanced Premium Tax Credits (APTCs) and Cost Sharing Reduction Subsidies (CSRs) remains intact. The loss of such funding will impact whether rates are sufficient to cover incurred costs.



Bryan Curley, FSA, MAAA
Health Net
21650 Oxnard Street
Woodland Hills, CA 91367
Phone #:(818) 676-8358
Fax #: (818) 676-8021

October 3, 2016

Date

Health Net Life Insurance Company
 IFP PPO/EPO Rate Filing Effective January 1, 2017
 Development of Rate Change or Base Rate

Development of the Index Rate

45 CFR Part 156, §156.80 sets the methodology to determine the Index Rate:

(d) Index rate —(1) In general. Each plan year or policy year, as applicable, a health insurance issuer must establish an index rate for a state market described in paragraphs (a) through (c) of this section based on the total combined claims costs for providing essential health benefits within the single risk pool of that state market. The index rate must be adjusted on a market-wide basis based on the total expected market-wide payments and charges under the risk adjustment and reinsurance programs in the state and Exchange user fees. The premium rate for all of the health insurance issuer's plans in the relevant state market must use the applicable market-wide adjusted index rate, subject only to the plan-level adjustments permitted in paragraph (d)(2) of this section.

Experience Period (from X to Y)	1/1/2015	12/31/2015
Paid Through		1/31/2015
Rating Period (from X to Y)	1/1/2017	12/31/2017

	Experience:	Total	PMPM	% of Risk Adj Revenue	% of Revenue
A	Experience Period Member Months	440,430	36,703		
B	Expected Member Months in the Rating Period	282,370	23,531		
C	Experience Period Premium	\$189,018,536	\$429.17		
D	System Experience Period Completed Incurred Claims	\$473,970,047	\$1,076.15		
E	Off System Adjustments to Claims (Pediatric Vision+Dental)	\$2,096,664	\$4.76		
F	Experience Period Completed Incurred Claims	\$476,066,711	\$1,080.91		
G	Experience Period Medical Loss Ratio		251.9%		

	Claims development:	Total	PMPM	% of Risk Adj Revenue	% of Revenue
H	Experience Incurred Claims (D)	\$473,970,047	\$1,080.91		
I	Claims without OON Substance Abuse Claims		\$617.84		
J	OON Substance Abuse Cost Adjustment ----80% reduction	0.657	\$710.14		
K	Updates: Current Exposure to Substance Abuse / Region / Metal Tier	0.977	\$693.48		
L	Reflect 2016 Observed Morbidity Shifts	1.152	\$799.19		
M	Assumption for 2017 Adverse Selection	1.028	\$821.57		
N	Proposal B Increase OON Cost Share Amounts - Deductible	0.992	\$814.98		
	Proposal B Increase OON Cost Share Amounts - MOOP	0.977	\$796.64		
	Proposal E: Remove First Health Travel Benefit for IFP and remove all out of state OON benefits/ coverage, with the exception of ER for IFP	0.996	\$793.39		
	Proposal F: Exclude OON non-certified services (remove pre-cert penalties)	1.000	\$793.39		
	Proposal G: Limit as Many Services as Possible to INN only (Expand Non-Coverage of Certain Services OON)	0.999	\$792.76		
	Increase Certification Requirements for Services/ PA Required for Payment	1.000	\$792.76		
	Other 2017 Initiatives	1.000	\$792.76		
O	Morbidity adjustment - Healthy lives entering the market (in Risk Adjustment)	1.000	\$792.76		
P	Morbidity adjustment - Guaranteed Issue for PPO	1.000	\$792.76		
Q	CSR Receivables	0.996	\$789.92		
R	Release of Pent-Up Demand	1.000	\$789.92		
S	2016 Carryover Initiatives	0.989	\$781.57		
U	Age Adjustment	0.976	\$762.64		
V	Area Adjustment	1.000	\$762.76		
W	Plan Adjustment	1.009	\$769.46		
X	Benefit Adjustments	1.000	\$769.46		
Y	Plan benefits in addition to EHB	1.000	\$769.46		
Z	Claims Adjustment: Hepatitis C	0.997	\$767.08		
AA	Adjustment for Grace Period	1.000	\$767.08		
AB	Pricing Trend	7.85%	7.85%		

AC	Months of Trend	24	24		
AD	Trend Factor	1.163	1.163		
AE	Projected Incurred Claims	\$251,965,898	\$892.33		

	Risk Adjustment/Reinsurance Recoveries	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AF	Reinsurance Recoveries	1.000	\$0.00		
AG	Risk Adjustment		(\$194.17)		
AH	Projected Incurred Claims (w/ ACA Adjustments)	\$197,138,086	\$698.16		

	Admin Development	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AI	Administrative Expenses	\$9,840,378	\$34.85	4.4%	5.9%
AJ	Commissions	\$2,021,053	\$7.16	0.9%	1.2%
AK	Broker Bonus	\$0	\$0.00	0.0%	0.0%
AL	Total Administrative Costs	\$11,861,431	\$42.01	5.3%	7.1%

	Taxes and Fees	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AM	Premium tax	\$0	\$0.00	0.0%	0.0%
AN	Risk Adjustment Fee	\$42,356	\$0.15	0.0%	0.0%
AO	Reinsurer's Fee	\$0	\$0.00	0.0%	0.0%
AP	Exchange Fee	\$933,380	\$3.31	0.4%	0.6%
AQ	Insurer's Fee	\$0	\$0.00	0.0%	0.0%
AR	PCORI	\$51,062	\$0.18	0.0%	0.0%
AS	Income Tax	(\$15,357,687)	(\$54.39)	-6.9%	-9.2%
AT	Total Taxes and Fees	(\$14,330,890)	(\$50.75)	-6.4%	-8.6%

	Premium development	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AU	Experience Period Premium (C)	(\$28,704,136)	\$429.17		
AV	Adjustments for Approved Rate Changes	(\$58,341,652)	\$100.12		
AW	Adjusted Earned Premium	\$23,100,091	\$529.29		

	Proposed Base Rate Development:	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AX	Projected Incurred Claims (w/ ACA Adjustments) (AI)	\$197,138,086	\$698.16		
AY	Total Administrative Costs	\$11,861,431	\$42.01		
AZ	Total Taxes and Fees	(\$14,330,890)	(\$50.75)		
BA	After-tax Profit/Margin	(\$27,071,552)	(\$95.87)	-12.2%	-16.2%
BB	Required Revenue	\$167,597,074	\$593.54		
BC	Risk Adjusted Revenue		\$787.71		
BD	Requested Base Rate		\$593.54		
BE	Requested Renewal Increase		12.1%		
BF	Target Medical Loss Ratio				117.6%

	Federal MLR Calculation	Total	PMPM	% of Risk Adj Revenue	% of Revenue
BG	Premium tax	\$0	\$0.00		0.0%
BH	Income Tax	(\$15,357,687)	(\$54.39)		-9.2%
BI	Exchange Fee	\$933,380	\$3.31		0.6%
BJ	Insurer's Fee	\$0	\$0.00		0.0%
BK	PCORI	\$51,062	\$0.18		0.0%
BL	Risk Adjustment Fee	\$42,356	\$0.15		0.0%
BM	Reinsurer's Fee	\$0	\$0.00		0.0%
BN	Quality Improvements	\$1,186,099	\$4.20		0.7%
BO	Federal MLR [= (Claims + QI)/(Revenue - Taxes)]				109.0%

	Index Rate Development	Total	PMPM	% of Risk Adj Revenue	% of Revenue
BP	Projected Incurred Claims (AF)		\$892.33		
BQ	Paid to Allowed Ratio		0.697		
BR	Network Calibration		0.982		
BS	Index Rate		\$1,303.08		

Development of the Market Adjusted Index Rate

BT	Index Rate PMPM	\$1,303.08
BU	Federal Reinsurance Program Adjustment	\$0.00
BV	Risk Adjustment	\$283.55
BW	Exchange User Fee Adjustment	\$4.83
BX	Market Adjusted Index Rate	\$1,024.35

Development of Plan Adjusted Index Rate

Allowable modifiers to the Index Rate are defined in 45 CFR Part 156, §156.80(d)(2)

BY	Market Adjusted Index Rate	\$1,024.35
BZ	Actuarial value and cost-sharing adjustment	varies by plan
CA	Provider network, delivery system and utilization management adjustment	varies by plan
CB	Adjustment for benefits in addition to the EHBs	1.000
CC	Impact of specific eligibility categories for the catastrophic plan	varies by plan
CD	Adjustment for distribution and administrative costs	0.846
CE	Plan Adjusted Index Rate	varies by plan

CF	Plan Adjusted Index Rate	varies by plan
CG	Age Curve Calibration	0.653
CH	Geographic Factor Calibration	0.854
CI	Network Factor Calibration	1.000
CJ	Calibrated Plan Adjusted Index Rate	varies by plan

CA PLAIN LANGUAGE SPREADSHEET v. 1

Company Name: Health Net Life Insurance Company

Company ID number for this filing:

SERFF ID number for this filing: HNLI-130544448

For the expense period on which the rates are based, premium attributed to:

Policy Form Numbers	Marketing Names	Medical Costs prior to rate increase ⁽¹⁾	Medical Costs after rate increase ⁽²⁾	Administrative costs prior to rate increase ⁽³⁾	Administrative costs after rate increase	Profit/margin projected prior to rate increase	Profit/margin projected after rate increase	Comments
P34401, P30601	Individual PPO, EPO	86.7%	117.6%	13.7%	-1.5%	-0.5%	-16.2%	

(1) "Prior to rate increase" refers to the projected experience period for 2016 filed rates

(2) "After rate increase" refers to the projected experience period for individuals renewing in 2017

(3) Included in the Administrative costs are the following taxes and fees:

Taxes and Fees	Prior to rate increase	After rate increase
Exchange Fee	0.2%	0.6%
Risk Adjustment Fee	N/A	0.0%
Reinsurer's Fee	N/A	0.0%
Premium Tax	2.4%	0.0%
Insurer's Fee	1.8%	0.0%
Income Tax	0.8%	-9.2%
PCORI / Risk Adj	0.0%	0.0%
Total	5.2%	-8.6%

California Rate Filing Spreadsheet, v. 1

Company Name: Health Net Life Insurance Company

Company ID number:

SERFF ID number for this filing: HNLI-130544448

Policy Form Number	Product Name	Open or closed?	Enrollment	Insured months in each policy form	Experience Period on Which Rates are Based	Period for which rates are to be effective	Total premium earned during the experience period on which the rates are based	Total dollar amount of claims incurred during the experience period on which the rates are based	Average rate increase (weighted based on covered lives)	Average rate increase (weighted based on premium)	Comments
P34401, P30601	Individual PPO, EPO	Open	23,548	440,430	Jan'15 - Dec'15	Jan'17 - Dec'17	\$189,018,536	\$476,066,711	12.1%	12.1%	

Health Net Life Insurance Company
 IFP PPO/EPO Rate Filing Effective January 1, 2017
 Development of Rate Change or Base Rate

Development of the Index Rate

45 CFR Part 156, §156.80 sets the methodology to determine the Index Rate:

(d) Index rate —(1) In general. Each plan year or policy year, as applicable, a health insurance issuer must establish an index rate for a state market described in paragraphs (a) through (c) of this section based on the total combined claims costs for providing essential health benefits within the single risk pool of that state market. The index rate must be adjusted on a market-wide basis based on the total expected market-wide payments and charges under the risk adjustment and reinsurance programs in the state and Exchange user fees. The premium rate for all of the health insurance issuer's plans in the relevant state market must use the applicable market-wide adjusted index rate, subject only to the plan-level adjustments permitted in paragraph (d)(2) of this section.

Experience Period (from X to Y)	1/1/2015	12/31/2015
Paid Through		1/31/2015
Rating Period (from X to Y)	1/1/2017	12/31/2017

	Experience:	Total	PMPM	% of Risk Adj Revenue	% of Revenue
A	Experience Period Member Months	440,430	36,703		
B	Expected Member Months in the Rating Period	282,370	23,531		
C	Experience Period Premium	\$189,018,536	\$429.17		
D	System Experience Period Completed Incurred Claims	\$473,970,047	\$1,076.15		
E	Off System Adjustments to Claims (Pediatric Vision+Dental)	\$2,096,664	\$4.76		
F	Experience Period Completed Incurred Claims	\$476,066,711	\$1,080.91		
G	Experience Period Medical Loss Ratio		251.9%		

	Claims development:	Total	PMPM	% of Risk Adj Revenue	% of Revenue
H	Experience Incurred Claims (D)	\$473,970,047	\$1,080.91		
I	Claims without OON Substance Abuse Claims		\$617.84		
J	OON Substance Abuse Cost Adjustment ----80% reduction	0.657	\$710.14		
K	Updates: Current Exposure to Substance Abuse / Region / Metal Tier	0.977	\$693.48		
L	Reflect 2016 Observed Morbidity Shifts	1.152	\$799.19		
M	Assumption for 2017 Adverse Selection	1.028	\$821.57		
N	Proposal B Increase OON Cost Share Amounts - Deductible	0.992	\$814.98		
	Proposal B Increase OON Cost Share Amounts - MOOP	0.977	\$796.64		

	Proposal E: Remove First Health Travel Benefit for IFP and remove all out of state OON benefits/ coverage, with the exception of ER for IFP	0.996	\$793.39		
	Proposal F: Exclude OON non-certified services (remove pre-cert penalties)	1.000	\$793.39		
	Proposal G: Limit as Many Services as Possible to INN only (Expand Non-Coverage of Certain Services OON)	0.999	\$792.76		
	Increase Certification Requirements for Services/ PA Required for Payment	1.000	\$792.76		
	Other 2017 Initiatives	1.000	\$792.76		
O	Morbidity adjustment - Healthy lives entering the market (in Risk Adjustment)	1.000	\$792.76		
P	Morbidity adjustment - Guaranteed Issue for PPO	1.000	\$792.76		
Q	CSR Receivables	0.996	\$789.92		
R	Release of Pent-Up Demand	1.000	\$789.92		
S	2016 Carryover Initiatives	0.989	\$781.57		
U	Age Adjustment	0.976	\$762.64		
V	Area Adjustment	1.000	\$762.76		
W	Plan Adjustment	1.009	\$769.46		
X	Benefit Adjustments	1.000	\$769.46		
Y	Plan benefits in addition to EHB	1.000	\$769.46		
Z	Claims Adjustment: Hepatitis C	0.997	\$767.08		
AA	Adjustment for Grace Period	1.000	\$767.08		
AB	Pricing Trend	7.85%	7.85%		
AC	Months of Trend	24	24		
AD	Trend Factor	1.163	1.163		
AE	Projected Incurred Claims		\$251,965,898	\$892.33	

	Risk Adjustment/Reinsurance Recoveries	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AF	Reinsurance Recoveries	1.000	\$0.00		
AG	Risk Adjustment		(\$194.17)		
AH	Projected Incurred Claims (w/ ACA Adjustments)	\$197,138,086	\$698.16		

	Admin Development	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AI	Administrative Expenses	\$9,840,378	\$34.85	4.4%	5.9%
AJ	Commissions	\$2,021,053	\$7.16	0.9%	1.2%
AK	Broker Bonus	\$0	\$0.00	0.0%	0.0%
AL	Total Administrative Costs	\$11,861,431	\$42.01	5.3%	7.1%

	Taxes and Fees	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AM	Premium tax	\$0	\$0.00	0.0%	0.0%
AN	Risk Adjustment Fee	\$42,356	\$0.15	0.0%	0.0%
AO	Reinsurer's Fee	\$0	\$0.00	0.0%	0.0%
AP	Exchange Fee	\$933,380	\$3.31	0.4%	0.6%
AQ	Insurer's Fee	\$0	\$0.00	0.0%	0.0%
AR	PCORI	\$51,062	\$0.18	0.0%	0.0%
AS	Income Tax	(\$15,357,687)	(\$54.39)	-6.9%	-9.2%
AT	Total Taxes and Fees	(\$14,330,890)	(\$50.75)	-6.4%	-8.6%

	Premium development	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AU	Experience Period Premium (C)	(\$28,704,136)	\$429.17		
AV	Adjustments for Approved Rate Changes	(\$58,341,652)	\$100.12		
AW	Adjusted Earned Premium	\$23,100,091	\$529.29		

	Proposed Base Rate Development:	Total	PMPM	% of Risk Adj Revenue	% of Revenue
AX	Projected Incurred Claims (w/ ACA Adjustments) (AI)	\$197,138,086	\$698.16		
AY	Total Administrative Costs	\$11,861,431	\$42.01		
AZ	Total Taxes and Fees	(\$14,330,890)	(\$50.75)		
BA	After-tax Profit/Margin	(\$27,071,552)	(\$95.87)	-12.2%	-16.2%
BB	Required Revenue	\$167,597,074	\$593.54		
BC	Risk Adjusted Revenue		\$787.71		
BD	Requested Base Rate		\$593.54		
BE	Requested Renewal Increase		12.1%		
BF	Target Medical Loss Ratio				117.6%

	Federal MLR Calculation	Total	PMPM	% of Risk Adj Revenue	% of Revenue
BG	Premium tax	\$0	\$0.00		0.0%
BH	Income Tax	(\$15,357,687)	(\$54.39)		-9.2%
BI	Exchange Fee	\$933,380	\$3.31		0.6%
BJ	Insurer's Fee	\$0	\$0.00		0.0%
BK	PCORI	\$51,062	\$0.18		0.0%
BL	Risk Adjustment Fee	\$42,356	\$0.15		0.0%
BM	Reinsurer's Fee	\$0	\$0.00		0.0%
BN	Quality Improvements	\$1,186,099	\$4.20		0.7%
BO	Federal MLR [= (Claims + QI)/(Revenue - Taxes)]				109.0%

	Index Rate Development	Total	PMPM	% of Risk Adj Revenue	% of Revenue
BP	Projected Incurred Claims (AF)		\$892.33		
BQ	Paid to Allowed Ratio		0.697		
BR	Network Calibration		0.982		
BS	Index Rate		\$1,303.08		

Development of the Market Adjusted Index Rate

BT	Index Rate PMPM	\$1,303.08
BU	Federal Reinsurance Program Adjustment	\$0.00
BV	Risk Adjustment	\$283.55
BW	Exchange User Fee Adjustment	\$4.83
BX	Market Adjusted Index Rate	\$1,024.35

Development of Plan Adjusted Index Rate

Allowable modifiers to the Index Rate are defined in 45 CFR Part 156, §156.80(d)(2)

BY	Market Adjusted Index Rate	\$1,024.35
BZ	Actuarial value and cost-sharing adjustment	varies by plan
CA	Provider network, delivery system and utilization management adjustment	varies by plan
CB	Adjustment for benefits in addition to the EHBs	1.000
CC	Impact of specific eligibility categories for the catastrophic plan	varies by plan
CD	Adjustment for distribution and administrative costs	0.846
CE	Plan Adjusted Index Rate	varies by plan

CF	Plan Adjusted Index Rate	varies by plan
CG	Age Curve Calibration	0.653
CH	Geographic Factor Calibration	0.854
CI	Network Factor Calibration	1.000
CJ	Calibrated Plan Adjusted Index Rate	varies by plan

2017 Rates Table Template v6.0

All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.

If you are a community rating state, select Family Option under Age and fill in all columns.

If you are not community rating state, select 0-20 under Age and provide an Individual Rate for every age band.

If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.

To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.

HIOS Issuer ID*	99110
Federal TIN*	73-0654885
Rate Effective Date*	1/1/2017
Rate Expiration Date*	12/31/2017

Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
99110CA0210007	Rating Area 2	No Preference	0-20	473.67
99110CA0210007	Rating Area 2	No Preference	21	745.94
99110CA0210007	Rating Area 2	No Preference	22	745.94
99110CA0210007	Rating Area 2	No Preference	23	745.94
99110CA0210007	Rating Area 2	No Preference	24	745.94
99110CA0210007	Rating Area 2	No Preference	25	748.92
99110CA0210007	Rating Area 2	No Preference	26	763.84
99110CA0210007	Rating Area 2	No Preference	27	781.74
99110CA0210007	Rating Area 2	No Preference	28	810.83
99110CA0210007	Rating Area 2	No Preference	29	834.70
99110CA0210007	Rating Area 2	No Preference	30	846.64
99110CA0210007	Rating Area 2	No Preference	31	864.54
99110CA0210007	Rating Area 2	No Preference	32	882.44
99110CA0210007	Rating Area 2	No Preference	33	893.63
99110CA0210007	Rating Area 2	No Preference	34	905.57
99110CA0210007	Rating Area 2	No Preference	35	911.53
99110CA0210007	Rating Area 2	No Preference	36	917.50
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99110CA0350064	Rating Area 18	No Preference	58	458.19
99110CA0350064	Rating Area 18	No Preference	59	468.08
99110CA0350064	Rating Area 18	No Preference	60	488.04
99110CA0350064	Rating Area 18	No Preference	61	505.30
99110CA0350064	Rating Area 18	No Preference	62	516.63
99110CA0350064	Rating Area 18	No Preference	63	530.84
99110CA0350064	Rating Area 18	No Preference	64	539.46
99110CA0350064	Rating Area 18	No Preference	65 and over	539.46
99110CA0350065	Rating Area 19	No Preference	0-20	115.35
99110CA0350065	Rating Area 19	No Preference	21	181.65
99110CA0350065	Rating Area 19	No Preference	22	181.65
99110CA0350065	Rating Area 19	No Preference	23	181.65
99110CA0350065	Rating Area 19	No Preference	24	181.65
99110CA0350065	Rating Area 19	No Preference	25	182.37
99110CA0350065	Rating Area 19	No Preference	26	186.01
99110CA0350065	Rating Area 19	No Preference	27	190.37
99110CA0350065	Rating Area 19	No Preference	28	197.45
99110CA0350065	Rating Area 19	No Preference	29	203.26
99110CA0350065	Rating Area 19	No Preference	30	206.17
99110CA0350065	Rating Area 19	No Preference	31	210.53
99110CA0350065	Rating Area 19	No Preference	32	214.89
99110CA0350065	Rating Area 19	No Preference	33	217.61
99110CA0350065	Rating Area 19	No Preference	34	220.52
99110CA0350065	Rating Area 19	No Preference	35	221.97
99110CA0350065	Rating Area 19	No Preference	36	223.42
99110CA0350065	Rating Area 19	No Preference	37	224.88
99110CA0350065	Rating Area 19	No Preference	38	226.33
99110CA0350065	Rating Area 19	No Preference	39	229.24
99110CA0350065	Rating Area 19	No Preference	40	232.14
99110CA0350065	Rating Area 19	No Preference	41	236.50
99110CA0350065	Rating Area 19	No Preference	42	240.68
99110CA0350065	Rating Area 19	No Preference	43	246.49
99110CA0350065	Rating Area 19	No Preference	44	253.76
99110CA0350065	Rating Area 19	No Preference	45	262.30
99110CA0350065	Rating Area 19	No Preference	46	272.47
99110CA0350065	Rating Area 19	No Preference	47	283.91
99110CA0350065	Rating Area 19	No Preference	48	296.99
99110CA0350065	Rating Area 19	No Preference	49	309.89
99110CA0350065	Rating Area 19	No Preference	50	324.42
99110CA0350065	Rating Area 19	No Preference	51	338.77
99110CA0350065	Rating Area 19	No Preference	52	354.57
99110CA0350065	Rating Area 19	No Preference	53	370.56
99110CA0350065	Rating Area 19	No Preference	54	387.81
99110CA0350065	Rating Area 19	No Preference	55	405.07
99110CA0350065	Rating Area 19	No Preference	56	423.78
99110CA0350065	Rating Area 19	No Preference	57	442.67
99110CA0350065	Rating Area 19	No Preference	58	462.83
99110CA0350065	Rating Area 19	No Preference	59	472.82
99110CA0350065	Rating Area 19	No Preference	60	492.99
99110CA0350065	Rating Area 19	No Preference	61	510.43
99110CA0350065	Rating Area 19	No Preference	62	521.87
99110CA0350065	Rating Area 19	No Preference	63	536.22
99110CA0350065	Rating Area 19	No Preference	64	544.95
99110CA0350065	Rating Area 19	No Preference	65 and over	544.95