

DEPARTMENT OF MANAGED HEALTH CARE

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**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.)

A large, empty rectangular box with a thin black border, intended for the user to provide justification for any unreasonable rate increases and attach supporting documentation. The box is currently blank.

2) Overall annual medical trend factor assumptions for all benefits

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3) Actual Costs by Aggregate Benefit Category

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|--|---------------------------------|
| 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 Medicare: |
| Laboratory (other than inpatient) | Dollar Cost: |
| | Cost as Percentage of Medicare: |

| | |
|----------------------------------|---------------------------------|
| Radiology (other than inpatient) | Dollar Cost: |
| | Cost as Percentage of Medicare: |
| Capitation (professional) | Dollar Cost and Description: |
| Capitation (institutional) | Dollar Cost and Description: |
| Capitation (other) | Dollar Cost and Description: |
| 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

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|------------------------------------|--|
| 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: |

| | |
|----------------------------|--|
| Capitation (professional) | Trend attributable to use of services: |
| | Trend attributable to price inflation: |
| | Trend attributable to fees and risk: |
| Capitation (institutional) | Trend attributable to use of services: |
| | Trend attributable to price inflation: |
| | Trend attributable to fees and risk: |
| Capitation (other) | Trend attributable to use of services: |
| | Trend attributable to price inflation: |
| | Trend attributable to fees and risk: |
| Other (describe) | Trend attributable to use of services: |
| | Trend attributable to price inflation: |
| | Trend attributable to fees and risk: |

5) Other Information

Complete and submit the CA Plain Language Spreadsheet.

CA PLAIN LANGUAGE SPREADSHEET v. 1

Company Name:

Company ID number for this filing:

SERFF ID number for this filing:

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 ⁽⁴⁾ | Profit/margin projected prior to rate increase | Profit/margin projected after rate increase | Comments |
|---------------------|----------------------|---|--|--|---|--|---|----------|
| | Small Group HMO, HSP | 78.0% | 79.1% | 20.7% | 19.3% | 1.3% | 1.6% | |

(1) "Prior to rate increase" refers to the projected experience period for Q3 2017 filed rates

(2) "After rate increase" refers to the projected experience period for renewal months in Q3 2018

(3) Included in the Administrative costs are the taxes and fees in the table below

(4) These administrative costs also include 'Admin-Reclass', 'SmartCare Captation Change', and 'Expected CommunityCare MLR Settlement'

| Taxes and Fees | Prior to rate increase | After rate increase |
|---------------------|------------------------|---------------------|
| Exchange Fee | 0.0% | 0.0% |
| Risk Adjustment Fee | 0.0% | 0.0% |
| Reinsurer's Fee | 0.0% | 0.0% |
| Premium Tax | 0.0% | 0.0% |
| Insurer's Fee | 1.3% | 0.9% |
| Income Tax | 1.4% | 0.7% |
| Payroll Tax | 0.0% | 0.0% |
| PCORI | 0.0% | 0.0% |
| MCO Tax | 1.0% | 1.4% |
| Total | 3.7% | 3.0% |