Unified Rate Review v2.0.4

Company Legal Name: **CareSource Kentucky Co** State: **KY**
HIOS Issuer ID: **45636** Market: **Individual**
Effective Date of Rate Change(s): **1/1/2016**

Market Level Calculations (Same for all Plans)

Section I: Experience period data

Experience Period: 1/1/2014 to 12/31/2014

	Experience Period Aggregate Amount	PMPM	% of Prem
Premiums (net of MLR Rebate) in Experience Period:	$1	$1.00	100.00%
Incurred Claims in Experience Period	$1	1.00	100.00%
Allowed Claims:	$1	1.00	100.00%
Index Rate of Experience Period		$1.00	
Experience Period Member Months	1		

Section II: Allowed Claims, PMPM basis

Projection Period: 1/1/2016 to 12/31/2016 Mid-point to Mid-point, Experience to Projection: 24 months

	Experience Period on Actual Experience Allowed				Adj't. from Experience to Projection Period		Annualized Trend Factors		Projections, before credibility Adjustment			Credibility Manual		
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**
Inpatient Hospital	Days	0.00	$0.00	$0.00	0.925	1.334	1.000	0.989	0.00	$0.00	$0.00	197.16	$3,540.20	$58.16
Outpatient Hospital	Services	0.00	0.00	0.00	0.925	1.334	1.000	0.989	0.00	0.00	0.00	1216.03	1,030.41	104.42
Professional	Services	0.00	0.00	0.00	0.925	1.334	1.000	0.989	0.00	0.00	0.00	9571.75	110.67	88.27
Other Medical	Services	0.00	0.00	0.00	0.925	1.334	1.000	0.989	0.00	0.00	0.00	439.34	168.05	6.15
Capitation	Services	0.00	0.00	0.00	0.925	1.334	1.000	0.989	0.00	0.00	0.00	0.00	0.00	0.00
Prescription Drug	Services	12,000.00	1.00	1.00	0.925	1.334	1.000	0.989	10,857.14	1.33	1.21	6628.08	101.35	55.98
Total				$1.00							$1.21			$312.99

Section III: Projected Experience:

			After Credibility	Projected Period Totals
Projected Allowed Experience Claims PMPM (w/applied credibility if applicable)	0.00%	100.00%	$312.99	$26,017,008
Paid to Allowed Average Factor in Projection Period			0.736	
Projected Incurred Claims, before ACA rein & Risk Adj't, PMPM			$230.36	$19,148,518
Projected Risk Adjustments PMPM			-0.15	(12,469)
Projected Incurred Claims, before reinsurance recoveries, net of rein prem, PMPM			$230.51	$19,160,987
Projected ACA reinsurance recoveries, net of rein prem, PMPM			6.80	565,243
Projected Incurred Claims			$223.71	$18,595,744
Administrative Expense Load		9.55%	25.20	2,094,605
Profit & Risk Load		1.96%	5.16	428,975
Taxes & Fees		3.71%	9.79	813,716
Single Risk Pool Gross Premium Avg. Rate, PMPM			$263.86	$21,933,040
Index Rate for Projection Period			$312.99	
% increase over Experience Period			26285.93%	
% Increase, annualized:			1524.37%	
Projected Member Months				83,124

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Product-Plan Data Collection

Company Legal Name:	**CareSource Kentucky Co**	State:	**KY**
HIOS Issuer ID:	**45636**	Market:	**Individual**
Effective Date of Rate Change(s):	**1/1/2016**		

Product/Plan Level Calculations

Section I: General Product and Plan Information

Product		CareSource Just4me										
Product ID:		45636KY001										
Metal:		Gold	Gold	Gold	Silver	Silver	Silver	Bronze	Bronze	Bronze	Catastrophic	Catastrophic
AV Metal Value		0.818	0.818	0.818	0.711	0.711	0.711	0.620	0.620	0.620	0.590	0.590
AV Pricing Value		1.030	1.104	1.195	0.832	0.892	0.966	0.678	0.727	0.787	0.505	0.542
Plan Type:		HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO
Plan Name		CareSource Just4Me Gold	CareSource Just4Me Gold	CareSource Just4Me Gold	CareSource Just4Me Silver	CareSource Just4Me Silver	CareSource Just4Me Silver	CareSource Just4Me Bronze	CareSource Just4Me Bronze	CareSource Just4Me Bronze	CareSource Just4Me Catastrophic	CareSource Just4Me Catastrophic
Plan ID (Standard Component ID):		45636KY0010001	45636KY0010002	45636KY0010003	45636KY0010004	45636KY0010005	45636KY0010006	45636KY0010007	45636KY0010008	45636KY0010009	45636KY0010010	45636KY0010011
Exchange Plan?		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Historical Rate Increase - Calendar Year - 2		0.00%										
Historical Rate Increase - Calendar Year - 1		0.00%										
Historical Rate Increase - Calendar Year 0		0.00%										
Effective Date of Proposed Rates		1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016
Rate Change % (over prior filing)		14.78%	4.80%	-13.65%	19.63%	9.18%	-10.02%	20.42%	9.88%	-9.44%	7.92%	-1.53%
Cum'tive Rate Change % (over 12 mos prior)		14.78%	4.80%	-13.65%	19.63%	9.18%	-10.02%	20.42%	9.88%	-9.44%	7.92%	-1.53%
Proj'd Per Rate Change % (over Exper. Period)		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Product Threshold Rate Increase %		10.20%										

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

Plan ID (Standard Component ID):	Total	45636KY0010001	45636KY0010002	45636KY0010003	45636KY0010004	45636KY0010005	45636KY0010006	45636KY0010007	45636KY0010008	45636KY0010009	45636KY0010010	45636KY0010011
Inpatient	#DIV/0!	$6.72	$2.56	-$9.57	$6.92	$3.80	-$5.45	$5.83	$3.31	-$4.16	$1.23	-$0.28
Outpatient	#DIV/0!	$12.06	$4.60	-$17.18	$12.42	$6.82	-$9.78	$10.46	$5.95	-$7.46	$2.21	-$0.50
Professional	#DIV/0!	$10.19	$3.89	-$14.52	$10.50	$5.77	-$8.27	$8.84	$5.03	-$6.31	$1.87	-$0.43
Prescription Drug	#DIV/0!	$6.47	$2.47	-$9.21	$6.66	$3.66	-$5.24	$5.61	$3.19	-$4.00	$1.18	-$0.27
Other	#DIV/0!	$0.71	$0.27	-$1.01	$0.73	$0.40	-$0.58	$0.62	$0.35	-$0.44	$0.13	-$0.03
Capitation	#DIV/0!	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
Administration	#DIV/0!	$3.94	$1.50	-$5.62	$4.06	$2.23	-$3.20	$3.42	$1.94	-$2.44	$0.72	-$0.17
Taxes & Fees	#DIV/0!	$0.49	$0.19	-$0.70	$0.50	$0.28	-$0.40	$0.42	$0.24	-$0.30	$0.09	-$0.02
Risk & Profit Charge	#DIV/0!	$0.71	$0.27	-$1.01	$0.73	$0.40	-$0.57	$0.61	$0.35	-$0.44	$0.13	-$0.03
Total Rate Increase	#DIV/0!	$41.29	$15.75	-$58.82	$42.52	$23.36	-$33.49	$35.81	$20.36	-$25.55	$7.56	-$1.73
Member Cost Share Increase	#DIV/0!	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

Average Current Rate PMPM	$243.05	$279.31	$328.04	$430.87	$216.53	$254.42	$334.09	$175.40	$206.13	$270.66	$95.51	$112.25
Projected Member Months	83,124	7,353	1,600	1,024	22,269	9,343	5,290	11,344	8,104	4,095	688	320

:tion III: Experience Period Information

Plan ID (Standard Component ID):	Total	45636KY0010001	45636KY0010002	45636KY0010003	45636KY0010004	45636KY0010005	45636KY0010006	45636KY0010007	45636KY0010008	45636KY0010009	45636KY0010010	45636KY0010011
Plan Adjusted Index Rate	#DIV/0!	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
Member Months	0	0	0	0	0	0	0	0	0	0	0	0
Total Premium (TP)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
EHB Percent of TP, [see instructions]	#DIV/0!	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
state mandated benefits portion of TP that are other than EHB	#DIV/0!	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TP	#DIV/0!	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Total Allowed Claims (TAC)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
EHB Percent of TAC, [see instructions]	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%	0.00%	0.00%	0.00%
state mandated benefits portion of TAC that are other than EHB	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 benefits portion of TAC	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Allowed Claims which are not the issuer's obligation:	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Portion of above payable by HHS's funds on behalf of insured person, in dollars	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Portion of above payable by HHS on behalf of insured person, as %	0.00%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Total Incurred claims, payable with issuer funds	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Net Amt of Rein	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
Net Amt of Risk Adj	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
Incurred Claims PMPM	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Allowed Claims PMPM	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
EHB portion of Allowed Claims, PMPM	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

:tion IV: Projected (12 months following effective date)

Plan ID (Standard Component ID):	Total	45636KY0010001	45636KY0010002	45636KY0010003	45636KY0010004	45636KY0010005	45636KY0010006	45636KY0010007	45636KY0010008	45636KY0010009	45636KY0010010	45636KY0010011
Plan Adjusted Index Rate	$258.44	$312.98	$335.62	$363.22	$252.89	$271.18	$293.47	$206.20	$221.11	$239.29	$153.54	$164.64
Member Months	83,124	7,353	1,600	1,024	22,269	9,343	5,290	11,344	8,104	4,095	688	320
Total Premium (TP)	$21,482,311	$2,301,345	$536,995	$371,936	$5,631,519	$2,533,609	$1,552,468	$2,339,129	$1,791,886	$979,880	$105,638	$52,684
EHB Percent of TP, [see instructions]	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
state mandated benefits portion of TP that are other than EHB	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 benefits portion of TP	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 Allowed Claims (TAC)	$26,017,097	$2,408,837	$562,102	$389,345	$6,798,102	$3,058,622	$1,874,278	$3,116,121	$2,387,262	$1,305,550	$104,033	$51,890
EHB Percent of TAC, [see instructions]	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
state mandated benefits portion of TAC that are other than EHB	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 benefits portion of TAC	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Allowed Claims which are not the issuer's obligation	$7,608,250	$273,520	$102,399	$70,927	$1,996,612	$898,316	$550,472	$1,128,117	$864,247	$472,638	$47,214	$23,549
Portion of above payable by HHS's funds on behalf of insured person, in dollars	$1,944,860	$0	$0	$0	$955,745	$430,011	$263,505	$0	$0	$0	$0	$0
Portion of above payable by HHS on behalf of insured person, as %	25.56%	0.00%	0.00%	0.00%	47.87%	47.87%	47.87%	0.00%	0.00%	0.00%	0.00%	0.00%
Total Incurred claims, payable with issuer funds	$18,408,848	$2,135,317	$459,703	$318,418	$4,801,490	$2,160,306	$1,323,807	$1,988,004	$1,523,015	$832,912	$56,819	$28,341
Net Amt of Rein	$565,065	$60,534	$14,125	$9,783	$148,130	$66,643	$40,836	$61,528	$47,133	$25,774	$2,779	$1,386
Net Amt of Risk Adj	-$12,094	-$1,296	-$302	-$209	-$3,170	-$1,426	-$874	-$1,317	-$1,009	-$552	-$59	-$30

Catastrophic	Gold	Gold	Silver	Silver	Bronze	Bronze	Catastrophic	Catastrophic
0.590	0.818	0.818	0.711	0.711	0.620	0.620	0.590	0.590
0.586	1.135	1.291	0.917	1.043	0.748	0.850	0.557	0.633
HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO
CareSource Just4Me Catastrophic	CareSource Just4Me Gold	CareSource Just4Me Gold	CareSource Just4Me Silver	CareSource Just4Me Silver	CareSource Just4Me Bronze	CareSource Just4Me Bronze	CareSource Just4Me Catastrophic	CareSource Just4Me Catastrophic
45636KY0010012	45636KY0010015	45636KY0010016	45636KY0010019	45636KY0010020	45636KY0010023	45636KY0010024	45636KY0010026	45636KY0010027
Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016
-18.80%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
-18.80%	-999.00%	-999.00%	-999.00%	-999.00%	-999.00%	-999.00%	-999.00%	-999.00%
#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

45636KY0010012	45636KY0010015	45636KY0010016	45636KY0010019	45636KY0010020	45636KY0010023	45636KY0010024	45636KY0010026	45636KY0010027
-$4.51	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
-$8.09	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
-$6.84	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
-$4.34	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
-$0.48	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
-$2.64	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
-$0.33	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
-$0.47	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
-$27.70	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

$147.29	$353.42	$401.93	$285.56	$324.74	$232.83	$264.78	$113.61	$129.18
175	1,159	550	4,057	1,926	2,466	1,171	129	61

45636KY0010012	45636KY0010015	45636KY0010016	45636KY0010019	45636KY0010020	45636KY0010023	45636KY0010024	45636KY0010026	45636KY0010027
$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
0	0	0	0	0	0	0	0	0
$0	$0	$0	$0	$0	$0	$0	$0	$0
100.00%	100.00%	100.00%	100.00%	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%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
$0	$0	$0	$0	$0	$0	$0	$0	$0
100.00%	100.00%	100.00%	100.00%	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%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
$0	$0	$0	$0	$0	$0	$0	$0	$0
$0	$0	$0	$0	$0	$0	$0	$0	$0
#DIV/0!	#DIV/0!	#DIV/0!	0.00%	0.00%	0.00%	0.00%	#DIV/0!	#DIV/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

#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!

45636KY0010012	45636KY0010015	45636KY0010016	45636KY0010019	45636KY0010020	45636KY0010023	45636KY0010024	45636KY0010026	45636KY0010027
$178.16	$345.02	$392.38	$278.77	$317.03	$227.30	$258.49	$169.24	$192.44
175	1,159	550	4,057	1,926	2,466	1,171	129	61
$31,177	$399,879	$215,808	$1,130,972	$610,596	$560,526	$302,692	$21,832	$11,739
100.00%	100.00%	100.00%	100.00%	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%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

$30,712	$418,583	$225,918	$1,365,360	$737,206	$746,786	$403,321	$21,504	$11,565
100.00%	100.00%	100.00%	100.00%	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%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
$13,938	$76,254	$41,155	$401,005	$216,515	$270,354	$146,010	$9,759	$5,249
$0	$0	$0	$191,956	$103,644	$0	$0	$0	$0
0.00%	0.00%	0.00%	47.87%	47.87%	0.00%	0.00%	0.00%	0.00%
$16,774	$342,329	$184,763	$964,355	$520,691	$476,432	$257,310	$11,745	$6,317
$820	$10,518	$5,677	$29,749	$16,061	$14,744	$7,962	$574	$309
-$18	-$225	-$122	-$637	-$344	-$316	-$170	-$12	-$7