RATE REVIEW WORK PLAN – CYCLE II
GRANTS TO SUPPORT STATES IN HEALTH INSURANCE RATE REVIEW
KENTUCKY DEPARTMENT OF INSURANCE

Funding Agency Goal:

By submitting this application, the Kentucky Department of Insurance ("Department") will improve and enhance the agency's current effective processes for reviewing and reporting health insurance rate information.

Objective:

The overall objective of the Department related to the use of Cycle II grant funds is to improve and enhance the Department's current health insurance rate review processes. The agency intends to develop processes and reporting capabilities to meet federal law requirements. Further, the agency intends to develop mechanisms to make and assist the federal government in making health insurance rate information transparent to consumers.

Results or Benefits Expected:

- Continue to develop and improve the Department's effective, efficient, and in-depth rate review processes;
- Collect and analyze required and meaningful health insurance rate information; and
- Educate and make rate information available to Kentucky health insurance consumers.

RATE REVIEW WORK PLAN				
Activities	**Milestones**	**Measurable Objective**	**Begin Date**	**End Date**
PERSONNEL				
Enhance the rate review process by retaining staff added with Cycle I grant funds and adding new staff and actuarial resources.	Retain positions added as a result of receipt of Cycle I grant funds through the Cycle II grant period.	Retention of 6 staff positions through the Cycle II grant period: • Information Officer • Systems Analyst II • Res. Mgmt Analyst I • Healthcare Data Administrator • Health Policy Specialist II	10/01/11	09/30/14

		• Administrative Specialist II.		
	Hire an Internal Actuary to provide unbiased actuarial advice regarding DOI rate review process, enhancements, database functions, data point needs, rate filing components, rate filing review needs, and compliance with federal law requirements; develop appropriate actuarial review checklists; and study the feasibility of integrating multi-year rate filings for actuarial review, reporting, and analysis.	Employ Internal Actuary.	10/01/11	01/30/12
	Contract with an Actuary to conduct audits of insurer rate application and rate derivation activity.	Finalize Contract with Audit Actuary.	11/01/11	03/15/12
	Contract with a Translator to enhance consumer rate communications to make certain they are culturally and linguistically appropriate given the demographics in the state of Kentucky.	Finalize Contract with Translator.	11/01/11	03/15/12
INFORMATION TECHNOLOGY				
Improve the Department's rate review systems with a focus on transparency, consumer participation, consumer protection, and more efficiency for actuarial review.	Capture rate filing dispositions in current databases, including differentiating between approvals and approvals after receipt of a filing modification.	Capture data regarding rate filing dispositions as follows: • Disapproval • Approval • Approval after Insurer filing modification.	10/01/11	05/01/12
		Provide public access to rate filing disposition final action document.	10/01/11	05/01/12
	Working collaboratively with	Provide funding to the	10/01/11	12/01/11

	the NAIC, make additional enhancements to the SERFF database.	NAIC for SERFF enhancements.		
		The SERFF system will be enhanced to assist with the collection of all parts of the industry Preliminary Justification for rate increases.	12/01/11	04/01/12
		SERFF will be modified to allow the states to enter a Summary of Rate Review and/or a State Filing Summary.	12/01/11	04/01/12
		The Health Filing Access Interface will be enhanced to allow states to display rate filing information and to accept and process public comments on rate filings.	12/01/11	04/01/12
		Make enhancements to Department's internal database to reflect SERFF changes and capture additional data.	05/01/12	11/15/12
		Make additional necessary SERFF enhancements for Cycle II, Year 2.	10/01/12	09/30/13
		Make additional necessary SERFF enhancements for Cycle II, Year 3.	10/01/13	09/30/14
	Enhance the Department's internal database to better capture, store, and retrieve pertinent rate filing documents in a manner accessible to consumers.	Consumers have the ability to retrieve and print documents related to rate filings without going through an open records process.	01/01/12	01/01/13
	In a timely manner publish **all** rate filings and insurers' justification for increases regardless of percentage of increase or decrease.	The Department's Website will contain information regarding all rate increase filings regardless of whether or not the percentage	01/01/12	01/01/13

		increase request meets the federal threshold.		
	Educate and make meaningful health insurance rate information available to Kentucky consumers.	Publish health rate filing information in language(s) other than English.	01/15/12	09/30/14
		Provide email notification to interested parties upon Department receipt of a rate filing.	01/01/12	07/15/12
		Purchase equipment to host Webinars.	01/01/12	04/01/12
		Host 4 Webinars.	04/01/12	09/30/14
		Replace the current Rate Filing Summary report with a report similar to HHS' "Consumer Disclosure about Proposed Health Insurance Rate Increase" report.	10/01/11	09/30/12
	Collaborate with industry, insurers, and consumer groups to provide additional transparency.	Hold 4 stakeholder forums to gather input.	01/01/12	09/30/14
	Increase public access and participation by updating the plain language website for consumer protection and rate review issues.	Continually update information available to consumers on Department's Website. Define rate filing terms for consumers.	10/01/11	09/30/14
	Develop and implement more robust consumer protection procedures for rate increases, receive and investigate complaints, coordinate hearing requests and notices, liaison with officials and Attorney General staff.		10/01/11	09/30/14
	Establish a primary point of contact for consumers with regard to rate filing questions and issues.	Designate and publish a primary contact for consumers regarding rate filing issues.	10/01/11	12/01/11

	Establish a consumer help desk to assist with filing complaints and obtaining information from the department with regard to rate increases and indexes, insurer offerings, and medical loss ratio.	Establish consumer help desk.	10/01/11	12/01/11
RATE REVIEW PROCESS IMPROVEMENTS				
Implement more rigorous rate filing requirements that better document the underlying factors that influence proposed rate increases.	Identify needed changes to statutes and regulations to better collect data need for a more efficient rate review process including: • Trend assumptions • Projections • Financial data • Administrative Expenses.	Identify rate review law changes needed for individual and small group market segments. Promulgate necessary law changes.	10/01/11	10/01/12
		Identify rate review law changes needed for associations and large group market segments. Promulgate necessary law changes.	10/01/12	10/01/13
		Identify rate review law changes needed for non-health benefit plan products. Promulgate necessary law changes.	10/01/12	09/30/14
	Require compliance with standards of practice and be more aggressive in reporting questionable actuarial work.	Build process to better oversee insurer's actuarial work product.	10/01/11	09/30/12
	Study the feasibility of automating the review process by assembling relevant past rate filing data.	Make a recommendation regarding automating the rate review process.	01/30/12	07/15/12
		Make IT enhancements to internal database based on automation recommendation.	08/01/12	09/30/14

	Expand rate review to include non health benefit plans, such as student blanket policies.	Review rates regarding non-health benefit plans.	10/01/13	09/30/14
	Standardize and streamline rate applications / filings and develop and implement new procedures and forms for more robust rate review process.	Develop new rate filing forms.	10/1/11	10/1/12
ENFORCEMENT INITIATIVES				
Determine insurer rate application practices and take necessary action with respect to rate application violations identified.	Conduct insurer rate application audits to determine if filed rates are being used, to determine the effect of underwriting on rates, and to gather information to report to the Exchange.	Conduct 5 rate application audits.	03/15/12	09/30/12
		Conduct 10 rate application audits.	09/30/12	09/30/13
		Conduct 10 rate application audits	09/30/13	09/30/14
		Develop reporting tool to report information regarding insurer rating practices to the Exchange.	09/30/13	09/30/14
	Conduct insurer rate derivation audits to determine how insurers derive their rates and whether applicable medical loss ratio standards are being met.	Conduct 5 rate derivation audits	03/15/12	09/30/12
		Conduct 10 rate derivation audits	09/30/12	09/30/13
		Conduct 10 rate derivation audits	09/30/13	09/30/14

MISCELLANEOUS				
Assess technology, training, communications, physical space and supply needs of the Department for this project; facilitate acquisition and determine priority of project plan items.	Continuously monitor the program for training and resource needs to meet program objectives in a timely manner.	Identify training and resource needs to meet program objectives in a timely manner.	10/01/11	09/30/14
Monitor and track Project Budget and resources and compile operational reports for federal reporting; audit functions for the Project.	Meet all reporting deadlines and consistently review the budget and resources for program efficiency.	Report as required by HHS regarding use of grant funds and Department rate review progress.	10/01/11	09/30/14

PUBLIC PROTECTION CABINET

Steven L. Beshear
Governor

Department of Insurance
P.O. Box 517
Frankfort, KY 40602-0517
800-595-6053
http://insurance.ky.gov

Robert D. Vance
Secretary

Sharon P. Clark
Commissioner

August 10, 2011

The Honorable Kathleen Sebelius
Secretary, Department of Health & Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Re: Grants to Support States in Health Insurance Rate Review – Cycle II Applicant Cover Letter

Dear Secretary Sebelius:

The attached grant application is being submitted by the Commonwealth of Kentucky, Kentucky Department of Insurance (the "Department"), in order to request funding for the Health Insurance Rate Review – Cycle II Project (the "Project"). The goal of the Project is to expand, improve, and enhance the Department of Insurance's existing rate review and data collection processes in response to new requirements as set forth in the Patient Protection and Affordable Care Act of 2010, the Health Care and Education Reconciliation Act of 2010, and the federal government's proposed final rule regarding Rate Increase Disclosure and Review. The Project Title is "Grants to Support States in Health Insurance Rate Review – Cycle II" and the Project Director is:

William Nold
Director, Health and Life Division
Kentucky Department of Insurance
215 West Main Street
Frankfort, KY 40601
Phone: 502-564-6088
Fax: 502-564-2728
William.Nold@ky.gov

Pursuant to existing Kentucky statutes, the Department has the authority to review all individual, small group, association, and employer-organized association rate filings. The Department also has the authority to disapprove or request modifications of rating factors. In the large group market, the Department has the authority to review the rating methodology used to determine any rate.

With Cycle I grant funds, the Department hired additional staff, expanded its access to actuarial resources, initiated the development of a mechanism to make rate filing information more readily available to the public, and collaborated with the NAIC and provided funding to enhance the SERFF database in order to collect better rate data. With Cycle II grant funds, the Department proposes to continue to fund the rate review positions established under the Cycle I grant; to continue to enhance, maintain, and support consumer outreach efforts; to continue to improve internal rate review processes; and to enhance technological capabilities in order to capture required and relevant rate data, analyze the captured data, and provide necessary reports on rate data.

My assurances are given that grant funds will only be used to enhance Kentucky's existing rate review efforts and will not be used as a substitute for existing funding for such efforts. Please contact the Project Director listed above with any questions or if any additional information is needed to review this grant proposal.

Sincerely,

Sharon P. Clark

Sharon P. Clark
Commissioner

ATTACHMENT C:

Application Check-Off List

REQUIRED CONTENTS

A complete application consists of the following materials. Please ensure that the project narrative is page-numbered.

- [X] Forms/Mandatory Documents (Grants.gov) (with an original signature)
  - [X] SF 424: Application for Federal Assistance
  - [X] SF-424A: Budget Information
  - [X] SF-424B: Assurances-Non-Construction Programs
  - [X] SF-LLL: Disclosure of Lobbying Activities
  - [X] Project Site Location Form(s)
  - [X] Lobbying Certification Form (HHS checklist, 5161)

- [X] Required Letters of Support (Governor)

- [X] Applicant's Application Cover Letter

- [X] Project Abstract

- [X] Project Narrative

- [X] Rate Review Work Plan

- [X] Budget Narrative

- [X] Required Supporting Documentation
  - [X] State Certification of Maintenance of Effort
  - [X] Descriptions for Key Personnel & Organizational Chart

COMMONWEALTH OF KENTUCKY
OFFICE OF THE GOVERNOR

STEVEN L. BESHEAR
GOVERNOR

700 CAPITOL AVENUE
SUITE 100
FRANKFORT, KY 40601
(502) 564-2611
FAX: (502) 564-2517

August 10, 2011

The Honorable Kathleen Sebelius
Secretary
Department of Health & Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Re: Grants to Support States in Health Insurance Rate Review – Cycle II
Funding Opportunity Number: PR-PRP-11-001
Governor's Letter of Support

Dear Secretary Sebelius:

The attached grant application is being submitted by the Commonwealth of Kentucky, Kentucky Department of Insurance (Department), in order to request funding for the Health Insurance Premium Review – Cycle II Project (Project). The goal of the Project is to expand, improve, and enhance the Department of Insurance's existing rate review and data collection processes in response to new requirements as set forth in the Patient Protection and Affordable Care Act of 2010, the Health Care and Education Reconciliation Act of 2010, and the federal government's proposed final rule regarding Rate Increase Disclosure and Review. As Governor of the Commonwealth of Kentucky, I give my support to this grant application and the Health Insurance Premium Review – Cycle II Project.

Currently, the Kentucky Department of Insurance has statutory authority to review health insurance rate filings. The Department has a rate review process in place to protect consumers from unjustifiable rate increases, and with federal funds granted under the Health Insurance Premium Review - Cycle I Project, the Department has been working diligently to enhance its rate review processes in anticipation of and preparation for new federal rules governing rate review. The Cycle II Project will allow the Department to continue to expand and improve existing rate review processes by enhancing data collection and analysis efforts, requiring more detailed information from insurers regarding the assumptions used in rating factors, making the rate review process more transparent to the public, and enhancing consumer protection and consumer outreach capabilities. These improvements will greatly benefit the citizens of the Commonwealth and protect policyholders in Kentucky from unreasonable rate increases by health insurers. For these reasons, I support and endorse the submission of the grant application for the Health Insurance Premium Review - Cycle II Project.

I look forward to working with the Department to expand, improve, and enhance existing rate review processes in Kentucky.

Sincerely,

Steven L. Beshear

PUBLIC PROTECTION CABINET

Steven L. Beshear
Governor

Department of Insurance
P.O. Box 517
Frankfort, Kentucky 40602-0517
1-800-595-6053
http://insurance.ky.gov

Robert D. Vance
Secretary

Sharon P. Clark
Commissioner

June 21, 2011

Via E-mail

Jacqueline Roche
The Center for Consumer Information and Insurance Oversight
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

E-mail: Jacqueline.Roche@hhs.gov

Re: Grants to Support States in Health Insurance Rate Review – Cycle II
Optional Letter of Intent

Dear Ms. Roche:

This letter will serve as notice that the State of Kentucky, on behalf of the Kentucky Department of Insurance (Department), intends to apply for the Grants to Support States in Health Insurance Rate Review – Cycle II. With these grant funds the Department will continue to develop and enhance its rate review processes to ensure that rate review in Kentucky is effective, comprehensive, and transparent. Should you have any questions prior to the submission of Kentucky's Cycle II grant application, please contact William Nold at (502) 564-6088 or via e-mail at William.Nold@ky.gov.

Sincerely,

Sharon P. Clark

Sharon P. Clark
Commissioner

PROJECT ABSTRACT
GRANTS TO SUPPORT STATES IN HEALTH INSURANCE RATE REVIEW – CYCLE II
FUNDING OPPORTUNITY NUMBER PR-PRP-11-001

Applicant: KENTUCKY DEPARTMENT OF INSURANCE
Project Director: **William Nold**
Project Director Address: **215 West Main Street**
P.O. Box 517
Frankfort, Kentucky 40602
Project Director Phone: **(502) 564-6088/(502) 564-2728 (FAX)**
Project Director Email: **William.Nold@ky.gov**
Department of Insurance Website address: http://insurance.ky.gov/
Projected Date for Project Completion: September 30, 2014

The Health Insurance Premium Review – Cycle II Project (the "Project") is designed to continue work that began in 2010 as part of the Cycle I Project to expand and improve the Kentucky Department of Insurance's (the "Department's") rate review and data collection programs. The Cycle I Project allowed the Department to study gaps between our current rate review process and the requirements of the Affordable Care Act as well as hire additional actuarial staff to review our processes and make recommendations. Generally, the Cycle II Project will be used to continue to meet the requirements of an effective rate review program; work to implement actuarial recommendations to expand the scope of the current rate review processes; clarify rate filing requirements; develop and expand current website solutions to increase transparency; examine insurer application of approved rates; and continue outreach to consumers about the relationship between costs, rates, and premium.

The focus of Cycle II is to increase and improve transparency of the Department's rate review and approval process and develop an infrastructure to collect, analyze, and report to the Secretary critical information about rate review decisions and trends, including, to the extent permitted by applicable State law, the approval and disapproval of proposed rate increases. The Department will be expanding its current website to allow consumers to access rate filing information, comment about pending rate increases, and access educational materials. Also, the Department intends to amend the rate filing requirements to require information similar to Part I and Part II of the rate justification forms created by HHS for all rate filings. Rate review staff will be used to load necessary information onto the website and be available to review comments and questions submitted by consumers as a part of the rate review process. Funds will also be used to continue to develop consumer outreach information in order to help the public better understand the rate review process, the relationship between rates and premium, and the cost drivers behind rate increases.

A secondary goal of the Cycle II project will be to continue to work with insurers to clarify the requirements of the rate review process and simplify the rate filing procedure. Additional actuarial staff will continue to be used to delve more deeply into the assumptions made by the insurers, reconcile past assumptions with actual results, and examine how insurers apply approved rates. Funds will be used to promulgate additional regulations and new legislation to clarify rate filing requirements and increase the types of data to be provided with a rate filing.

Lastly, the Cycle II project will fund training for our rate review staff to interact with the American Health Benefit Exchanges and study the underlying methodologies that could impact selection issues inside and outside of an exchange. Including "Workload" funding, the current budget for the Project is $3,225,170.

EXHIBIT 2B

Indirect Cost Allocation Plan

United States Department of the Interior
National Business Center
ACQUISITION SERVICES DIRECTORATE
Indirect Cost Services
2180 Harvard Street, Suite 430
Sacramento, CA 95815

January 26, 2010

Ms. Holly McCoy-Johnson, Executive Director
Kentucky Environmental and Public Protection Cabinet
500 Mero Street
4th Floor Capital Plaza Tower
Frankfort, Kentucky 40601

Dear Ms. McCoy-Johnson:

We have reviewed your organization's revised Cost Allocation Plan (Plan), including your Cost Policy Statement, dated January 6, 2010. The Kentucky Environmental and Public Protection Cabinet has chosen not to employ an indirect cost rate, but to allocate actual costs monthly in accordance with the Cost Allocation Plan.

The allocation methodologies described in your Plan are hereby approved on a final basis for fiscal year (FY) ending June 30, 2007 and on a provisional basis for FY ending June 30, 2009.

The FY 2008 Plan must be finalized, based upon financial data for FY 2008, which was due in our office before January 1, 2009. The Plan must be supported by the attached list of required documentation. At the time the Plan is finalized, you can obtain a provisional Plan for FY ending June 30, 2010.

Acceptance of the actual costs in accordance with the approved Plan is subject to the following conditions:

1. The information contained in the Plan and provided by your organization in connection with our review of the Plan is complete and accurate in all material respects.

2. The actual costs claimed by your organization are allowable under prevailing cost principles, applicable law, and program regulations.

3. The claims conform to the administrative and statutory limitations against which the claims are made.

This approval relates only to the methods of identifying and allocating costs to the programs. Nothing contained herein should be construed as approving activities not otherwise authorized by approved program plans or federal legislation and regulations.

The Plan, and the costs allocated therein, may be subsequently reviewed or audited by authorized federal staff. The disclosure of inequities, violations of laws and regulations, or noncompliance with award terms and conditions may require changes to the Plan and may result in questioned costs.

If you have any questions, please contact Te Lam-Vi at 916-566-7111 or email at Te_Vi@nbc.gov.

Sincerely,

Deborah A. Moberly

Deborah A. Moberly
Indirect Cost Coordinator

Attachment

Ref: J: Kentucky/Eppc709/Eppc-CAP.07F&09P

Attachment

Required Documentation to Finalize Cost Allocation Plan

1. Organizational chart.

2. Complete Cost Policy Statement describing all accounting policies and narrating in detail the proposed final Cost Allocation Plan. This Plan/Policy must identify the procedures used to identify, measure, and allocate all costs to each benefiting activity. This Plan/Policy should be signed by an authorized official.

3. Audited financial statements and related OMB Circular A-133 reports.

4. Cost Allocation Worksheet detailing expenses by function and cost category and reconciled with the financial statements or a budget for the applicable fiscal year(s).

   a. Supporting schedule of direct costs incurred by cost category, identified by specific government grant, contract, or other non-government activities.

   b. Supporting schedule of indirect costs identified by cost category claimed as direct costs under specific government grants, contracts, or other non-government activities.

5. A listing of grants and contracts by federal agency, amounts, periods of performance, and the indirect cost (overhead) limitations (if any) applicable to each, such as ceiling rates or amounts restricted by administrative or statutory regulations.

6. Statement of employee benefits. This document should contain the actual costs of the benefits earned/paid to employees.

7. A copy of the approved grant or contract budget(s) by line item with the U.S. Department of the Interior and any applicable clauses on indirect costs (overhead).

8. Certification signed by a duly authorized official of the organization stating that (1) information contained in the Plan was prepared in accordance with 2 CFR 230 (formerly OMB Circular A-122), (2) the costs have been accorded consistent treatment in accordance with generally accepted accounting principles, (3) an adequate accounting and statistical system exists to support claims that will be made under the Plan, (4) the information provided in support of the Cost Allocation Plan is accurate, and (5) all federally unallowable costs have been excluded from allocations.

BUDGET NARRATIVE – CYCLE II
GRANTS TO SUPPORT STATES IN HEALTH INSURANCE RATE REVIEW
KENTUCKY DEPARTMENT OF INSURANCE

I. ESTIMATED BUDGET TOTAL

The fiscal year for the Kentucky Department of Insurance ("Department") begins July 1 and ends June 30. The total expenditure appropriation for the Department for fiscal year 2012 is $36,540,400. This appropriation includes money received from the tobacco settlement[1] in the amount of $16,581,400 as well as restricted funds from the Kentucky State Treasury in the amount of $19,959,000. With this budgeted appropriation, the Department supports twelve separate divisions and branches including the Health and Life Division. The Health and Life Division is responsible for health insurance rate review in Kentucky.

The total appropriation of state funds for fiscal year 2011 for the Health and Life Division was $2,492,400.00. The total appropriation of state funds for fiscal year 2012 for the Health and Life Division is $2,658,500.00. These appropriations include funding for all functions of the Health and Life Division, only one of which is the review of health insurance rates. The review of health insurance rates accounts for approximately thirty percent (30%) of the total budget for the Health and Life Division. In fiscal year 2011, the Health and Life Division spent approximately $635,108 in state appropriated funds for the purpose of overseeing health insurance rates. This expenditure does not include new staff hired or expenditures made as a result of the Department's receipt of $1,000,000.00 in Cycle I rate grant funds for the period of August 9, 2010, through September 30, 2011.

By the submission of this application for Grants to Support States in Health Insurance Rate Review – Cycle II, the Department is requesting grant funds totaling $3,225,170.00 to be

[1] Tobacco settlement money is used exclusively to fund Kentucky Access, Kentucky's high-risk pool.

apportioned over a 3-year period beginning October 1, 2011, and ending September 30, 2014. For the first year of the Cycle II grant period, the Department requests $1,000,000 plus an additional $225,170 in "Workload" grant funds. For the second and third year of the grant, the Department requests $1,000,000 for each year. A detailed breakdown of the Department's intentions regarding the allocation and expenditure of Cycle II grant funds follows. **Exhibit 1B** details the proposed Cycle II grant budget/expenditures for the 3-year period grant period in spreadsheet format.

II. BREAKDOWN AND ALLOCATION OF FUNDS

A. Personnel

With Cycle I rate review grant funds, the Department established six new staff positions and employed persons to fill these positions. The positions are a Healthcare Data Administrator, a Health Policy Specialist, an Administrative Specialist, an Information Officer, a Systems Analyst, and a Resource Management Analyst. Using Cycle II rate review grant funds, the Department intends to retain the positions established with Cycle I grant funds as well as establish one additional staff position, an internal actuary. Also, using Cycle II rate review grant funds, the Department intends to contract with an additional actuary and a translator. For the first year of the Cycle II grant, the total personnel costs are anticipated to be $270,789.00 and are itemized as follows:

Position Title and Name	*Salary/FICA*	*Time*	*Months*	*Amount Requested*
Information Officer I, Jim Jordan	$28,387.00	100%	12 Months	$28,387.00

A new position created with Cycle I grant funds, the Information Officer educates health insurance consumers about Kentucky's on-going rate review process and future changes expected under the Patient Protection and Affordable Care Act. Primarily, the Information Officer drafts narratives for Department publications and Internet sites. The Information Officer also assists other member of the rate review team with writing and communications related to their work. Future anticipated consumer transparency

enhancements will require the services of the Information Officer to assist the Department in making consumer communications easy to understand. The Information Officer dedicates 100% of his time to rate review and grant activities.

Systems Analyst II, Bess Miller $37,781.00 100% 12 Months $37,781.00

A new position created with Cycle I grant funds, the Systems Analyst is devoted to analyzing and developing systems enhancements specifically for the rate review process in the Health and Life Division. The Systems Analyst coordinates any SERFF enhancements with IT enhancements of the Department. The Systems Analyst is working with other Department Analysts to develop a user-friendly Website for consumers containing rate filing information, rate review process questions and answers, and access to rate filing documentation. The Systems Analyst dedicates 100% of her time to rate review and grant activities.

Resource Management Analyst I,
Mark Moriarty $31,224.00 100% 12 Months $31,224.00

A new position created with Cycle I grant funds, the Resource Management Analyst monitors and tracks grant fund receipts and expenditures, manages grant resources, compiles operational reports for federal grant reporting, and performs audit functions regarding grant funding. He assesses technology, training, communications, physical space, and supply needs of the Department regarding the grant. The Resource Management Analyst facilitates acquisitions and determines priority of the grant rate review plan items. The Resource Management Analyst dedicates 100% of his time to grant activities.

Healthcare Data Administrator,
Ron Alsup $61,911.00 100% 12 Months $61,911.00

A new position created with Cycle I grant funds, the Healthcare Data Administrator gathers information from insurers and consumers in order to develop a baseline upon which consumer transparency initiatives and the rate review enhancements by the Department will be built. The Healthcare Data Administrator analyzes data and other information received and implements rate review enhancements. He supervises the Health Policy Specialist hired with Cycle I grant funds and is responsible for compiling, drafting, and reporting to the Department of Health and Human Services information regarding grant activities. The Healthcare Data Administrator dedicates 100% of his time to functions associated with the rate review process in Kentucky.

Health Policy Specialist II,
Nancy Phillips $41,588.00 100% 12 Months $41,588.00

A new position created with Cycle I grant funds, the Health Policy Specialist receives rate filings, works directly with existing staff to develop and implement new procedures and forms for a more robust rate review process, reviews and makes recommendations regarding statutory and regulatory revisions, manages consumer questions and coordinates complaint investigations regarding rating practices, and coordinates the rate review processes. The Health Policy Specialist dedicates 100% of her time to rate review and grant activities.

Administrative Specialist II, Wendy Kurtz	$27,095.00	100%	12 Months	$27,095.00

A new position created with Cycle I grant funds, the Administrative Specialist provides administrative support to the Health Insurance Rates Branch. The Administrative Specialist performs data entry functions to capture more information from rate filings, administratively coordinates the policy rate review functions, and assists in the development of forms necessary to carry out the rate review processes. The Administrative Specialist dedicates 100% of her time to rate review and grant activities.

Internal Actuary, Vacant	$57,311.00	100%	9 Months	$42,803.00

A new employee expected to be hired using Cycle II grant funds, the Actuary will be employed full-time and, given state salary restrictions, will likely be a new-comer to the actuarial field. The Department expects that this Actuary will be dedicated to the Department's initiatives toward enhancing the established rate review process. This Actuary will provide impartial and unbiased expert advice to the Department with respect to the actuaries' role in reviewing health insurance rate filings. This advice will assist the Department in identifying data analysis techniques, data needs, data integration proposals, and insurer data request process that will enhance rate reviews. Further, this Actuary will develop working relationships with company actuaries in order to better understand rate development and interact with insurers during the rate review process. To account for negotiating the state's procurement process, funding for this position for the first year has been calculated on a 9-month term. Funding for this position for years two and three of the grant period will increase to $57,311.00

Total:	*$270,789.00*
Rate Review Grant:	*$270,789.00*
Other Funding:	*$0.00*

Exhibit 1B provides a detailed itemization of Personnel expenditures for the second and third year of the Cycle II grant period. For years two and three of the grant period, the anticipated personnel costs total $285,297.00 for each year.

B. Fringe Benefits

Kentucky's Cycle II rate grant application requests $104,786.00 in funding to pay for fringe benefits afforded to persons hired under the Cycle I grant and the actuary that the Department intends to hire under the Cycle II grant. In Kentucky, fringe benefits are calculated as follows:

Life Insurance = $15.00 per employee

Health Insurance = Actual cost or $7,222.00 per employee

Retirement = Total Salary (Salary + FICA) x 19.82%

Workers' Compensation = $120.00 per employee

Position Title	*Life Ins.*	*Health Ins.*	*Retirement*	*W C Ins.*	*Total*
Information Officer I	$15.00	$7,222.00	$5,218.00	$120.00	$12,575.00
Systems Analyst II	$15.00	$7,060.00	$6,944.00	$120.00	$14,139.00
Resource Mgmt Analyst I	$15.00	$6,920.00	$5,739.00	$120.00	$12,794.00
Healthcare Data Admin.	$15.00	$9,086.00	$11,379.00	$120.00	$20,600.00
Health Policy Spec. II	$15.00	$8,728.00	$7,638.00	$120.00	$16,501.00
Administrative Spec. II	$15.00	$7,222.00	$4,980.00	$120.00	$12,337.00
Internal Actuary	$15.00	$7,222.00	$8,483.00	$120.00	$15,840.00

Total:	*$104,786.00*
Rate Review Grant:	*$104,786.00*
Other Funding:	*$0.00*

Exhibit 1B provides a detailed itemization of Fringe Benefit expenditures for the second and third year of the Cycle II grant period. For years two and three of the grant period, the anticipated costs related to providing fringe benefits total $104,786.00 for each year.

C. Equipment

The Department is requesting $7,000.00 in Cycle II grant funds to purchase equipment necessary to allow the Department to host Webinars. The Department has agreed to mentor other states that are working to make their rate review process an effective one. Webinar capability will allow the Department to communicate with other states without incurring costs associated with travel. Further, Webinars will allow the Department to host stakeholder forums in order to gather input from insurers regarding the rate review process and changes to the process that the Department is considering. Webinar capability will also permit the Department to hold educational forums for and gather input from consumers regarding health insurance rates, consumer transparency enhancements, and the Department's rate review process. Having the ability to produce Webinars will eliminate the need for health insurance consumers to travel in order to gain rate review information from the Department.

In addition to equipment needed to install Webinar capability, the Department is requesting $1800.00 in Cycle II grant funds to provide desktop computers for the internal actuary, a new position under Cycle II, and a translator, a new contract under Cycle II. Further, the Department requests $1,000.00 to purchase a laptop for use by a new contract actuary that will be responsible for audit functions. The actuary will be required to travel to insurer locations to perform rate application and rate derivation audits. A laptop computer will be needed in order to access Department information electronically. Due to contractual terms, privacy considerations, ownership of work product concerns, and security issues, the Department prefers to provide contractors with laptops rather than provide contractors access to Department databases.

For the first year of the Cycle II grant, the total equipments costs are anticipated to be $9,800.00 and are itemized as follows:

Item Requested	*How Many*	*Unit Cost*	*Amount*
Webinar Capability	1	$7,000.00	$7,000.00
Desktop Computer	2	$900.00	$1,800.00
Laptop	1	$1,000.00	$1,000.00
		Total:	*$9,800.00*
		Rate Review Grant:	*$9,800.00*
		Other Funding:	*$0.00*

The Department does not anticipate any expenditures for equipment from Cycle II grant funds in the second or third year of the grant period.

D. Travel Expenses

Though travel expenses are difficult to predict, the Department anticipates that rate review staff may be required to travel intermittently for the purposes of receiving training, mentoring other states seeking an effective rate review process, and attending meetings held by stakeholders, the federal government, or the states. In anticipation of these travel needs, the Department has predicted that Cycle II funds will be needed to defray the cost of in-state and out-of-state travel. The Department estimates travel costs to be as follows:

In-State Travel

3 trips x 3 persons x 150 miles x .47/mile	=	$ 634.50

Out-of-State Travel

Airfare – 3 trips x 3 persons x $450.00	=	$4,050.00
Lodging – 3 trips x 3 persons x 3 nights x $250.00	=	$6,750.00
Per Diem - 3 trips x 3 persons x $36.00	=	$ 972.00

Ground Transportation – 3 trips x 3 persons x $100 = $ 600.00

Total:	*$13,006.50*
Rate Review Grant:	*$13,006.50*
Other Funding:	*$0.00*

The Department anticipates that travel costs in the second and third years of the grant period will be similar to the cost allotted to travel in the first year. Consequently, the Department has budgeted $13,006.50 in travel costs for years two and three of the grant period.

E. Contractual

The Department currently has two actuaries under contract assigned to review health insurance rates, James E. Drennan with Ingenix Consulting and Ron Burkhart with Wakely Consulting Group. While Mr. Burkhart concentrates on the review of rates associated with health insurance products such as long-term care and Medicare supplements, Mr. Drennan devotes 100% of his time while at the Department to the review of rates associated with health benefit plans.

The Department amended its contract with Ingenix Consulting to add John Stark as a consulting actuary to assist the Division in analyzing its rate review process and making enhancements. Mr. Stark is paid from Cycle I grant funds. The Department intends to continue consulting with Mr. Stark regarding any "actuarial-type" enhancements that need to be made to the Department's rate review process. Consequently, the Department is requesting Cycle II funds in order to continue the contract with Mr. Stark.

Using Cycle II grant funds, the Department expects to contract with an additional actuary for the purpose of conducting rate application audits. The Department believes that insurer underwriting practices play an important role in the final rate quote given to prospective insureds. Rate application audits will allow the Department to determine if filed and approved

rates are being appropriately charged to the consumer. Further, rate application audits will allow the Department to evaluate the effect of underwriting on an insured's health insurance premium. This evaluation could potentially lead to future rate filing requirements. Lastly, rate application audits will assist the Department in collecting information that will be useful in developing criteria for certification of Qualified Health Plans to participate in the Exchange.

The new contract actuary may also be engaged to participate in multi-state examinations to review insurer rate derivation practices and loss ratio calculations. The examination findings from this type of audit will allow the Department to determine how insurance rates are derived at the insurer level. Further, the examinations will assist the Department in determining whether federal medical loss ratio standards are being met.

With Cycle II grant funds, the Department expects to contract with a Translator to develop consumer rate filing communications that are culturally and linguistically appropriate given the demographics in Kentucky. The Translator will make certain that rate filing information is available to non-English speaking residents of Kentucky. Given that rate filing information is naturally confusing, it is imperative that the Department make information available to those with language barriers in a manner they can easily understand. The Translator will provide translation services to the Department with respect to rate filing information included on the Department's Website as well as any written literature regarding health insurance rates that the Department may publish such as FAQs.

Contractor Name	*Contract Rate Total*	*Contract Travel Total*	*Total*
Ingenix Consulting, John Stark	$221,544.00	$15,000.00	$236,544.00

Name of Consultant: John Stark – qualifications outlined in bio which is an exhibit to the grant Project Narrative. Ingenix Consulting was selected through

Kentucky's procurement process, KRS Chapter 45A. Bids are accepted after solicitation through the Request for Proposal process. Responses are reviewed and scored by the Department of Insurance. The Vendor is then chosen based on scores achieved after a review of the Department's evaluation criteria against the vendor responses.

Organizational Affiliation: Ingenix Consulting

Nature of Services to be Rendered: Through the contract with Ingenix Consulting, the Department utilizes the consulting services provided by John Stark solely for the purposes of determining how the Department's rate review process may be enhanced.

Relevance of Service to the Project: The Cycle II program for the State of Kentucky is for the purposes of enhancing the Department's review of health insurance rates. The actuary's main function is to review the Department's rate review process and federal law requirements and make rate review enhancement recommendations. Consequently, the actuary's expertise in identifying possible rate review enhancements is directly related to the program's objectives.

Number of Days of Consultation: Contract period is in effect July 1, 2010, through June 30, 2012. The contract is not limited by the number of days but rather by a maximum contract price of $405,000.00 for fiscal year 2011 and $135,000.00 for fiscal year 2012. Travel expenses are also limited to $42,450.00 for fiscal year 2011 and $14,150.00 for fiscal year 2012.

Expected Rate of Consultation: $340.00 per hour

Method of Accountability: Actuary reports directly to Jill Mitchell, the Manager of the Health Insurance Rates Branch. Ms. Mitchell reviews all rate review determinations and the methods of review utilized by the actuaries. Ms. Mitchell also accepts, considers, and presents for review to the Department, recommendations submitted by the actuary.

New Audit Actuary

(Vacant)	$400,000.00	$50,000.00	$450,000.00

A new contract expected to be negotiated with Cycle II grant funds, the actuary will, on a part-time basis, provide rate application reviews with respect to specific insurers. These reviews will assist the Department in determining the effect that underwriting has on rates, develop a process for identifying and reporting rate information to the Exchange, develop a process for certifying qualified health plans for the Exchange, determine how to normalize rating/underwriting methodologies given insurers' underlying underwriting differences, and develop a process for auditing quotes within the Exchange. It is anticipated that the Actuary will also conduct rate derivation audits as well as review medical loss ratio

calculations. The Actuary will dedicate approximately 100% of his/her time, as limited by the contractual arrangement, to rate review and grant activities under the contract.

Translator

(Vacant)	$ 50,000.00	$0	$ 50,000.00

A new contract expected to be negotiated with Cycle II grant funds, the Translator will, on a part-time basis, make certain that consumer rate communications are culturally and linguistically appropriate given the demographics in the state of Kentucky. The Translator will also ensure that rate summaries are understandable and in the appropriate language needed to best serve Kentuckians. The Translator will be utilized on an as-needed basis and will dedicate approximately 100% of his/her time, as limited by the contractual arrangement, to rate review and grant activities under the contract.

Total:	*$736,544.00*
Rate Review Grant:	*$736,544.00*
Other Funding:	*$0.00*

The Department anticipates that the contractual costs in the second and third years of the Cycle II grant period will decrease for the actuarial consultant and translator services. However, the Department anticipates that the actuarial costs related to rate application and derivation audits may increase slightly in the last two years of the grant period. For the second and third year of the grant period, the Department has allocated a total of $518,187.50 to contract costs for each year.

F. Other Costs

The Department anticipates that it will incur costs associated with holding stakeholder forums for the purposes of gathering information and educating interested consumers. The anticipated costs associated with stakeholder forums have been allocated to the "Other" category of expenses. Also allocated to the "Other" cost category will be expenses associated with procuring software licenses for rate review staff, including new contracted actuarial personnel.

The Department intends to provide resources using Cycle II funds to the National Association of Insurance Commissioners ("NAIC"). These funds will be used by the NAIC to make additional enhancements to the SERFF database. These enhancements include the following:

- The SERFF system will be enhanced to assist with the collection of all parts of the industry Preliminary Justification for rate increases;
- SERFF will be modified to allow the states to enter a Summary of Rate Review and/or a State Filing Summary. This enhancement will result in the need for additional enhancements to the Department's internal database to reflect SERFF changes and capture the data;
- The Health Filing Access Interface will be enhanced to allow states to display rate filing information and to accept and process public comments on rate filings;

Again, funds to be provided to the NAIC for SERFF enhancements have been allocated to the "Other" category. A breakdown of the "Other" expenses is as follows:

Type of Expenditure	*Amount Requested*
IT Expenditure – SERFF Enhancements	$20,856.00
2 Stakeholder Forums	
Facility Rental @ $1,000.00 each	$ 2,000.00
Refreshments @ $375.00 each	$ 750.00
Speaker Reimbursement @ $500.00 each	$ 1,000.00
Software Licenses 2 @ $1,250	$ 2,500.00
Total:	*$27,106.00*
Rate Review Grant:	*$27,106.00*
Other Funding:	*$0.00*

While there may be a need in the second and third years of the Cycle II grant period for additional enhancements to the SERFF database, the Department anticipates that the cost of these enhancements will be less than in the first year. For this reason, the Department has allocated $10,000.00 in grant years two and three for additional SERFF enhancements.

The Department also anticipates spending less on stakeholder forums and software licenses in years two and three of the Cycle II grant period. Consequently, the Department has allocated $1,200.00 to defray the costs of holding stakeholder forums and $1,000.00 for software licenses in the second and third years of the grant period.

G. Indirect Costs

The Department has allocated $63,138.50 to indirect charges for costs associated with items such as procuring office furniture/supplies, maintaining and procuring office space, and reimbursement for telephone charges.

Total:	*$63,138.50*
Rate Review Grant:	*$63,138.50*
Other Funding:	*$0.00*

For the second and third years of the Cycle II rate grant period, the Department has allocated $66,523.00 per year to indirect charges. Indirect charges will be charged in accordance with the indirect cost allocation plan which is attached and labeled **Exhibit 2B.**

III. TOTAL BUDGET REQUESTED AMOUNTS

As noted above, for the first year of the Cycle II grant period, the Department is requesting $1,000,000 plus an additional $225,170 in "Workload" grant funds. For the second and third year of the grant period, the Department is requesting $1,000,000 for each year. Per category, below is a summary of the Department's proposed Cycle II rate grant budget for the first, second, and third years of the grant period.

A. First Year

Budget Category	*Amount Requested*
Personnel	$270,789.00
Fringe Benefits	$104,786.00
Equipment	$ 9,800.00
Travel	$ 13,006.50
Contractual	$736,544.00
Indirect Charges	$ 63,138.50
Other	$ 27,106.00
Total First Year	*$1,225,170.00*

B. Second Year

Budget Category	*Amount Requested*
Personnel	$285,297.00
Fringe Benefits	$104,786.00
Equipment	$ 00.00
Travel	$ 13,006.50
Contractual	$518,187.50
Indirect Charges	$ 66,523.00
Other	$ 12,200.00
Total Second Year	*$1,000,000.00*

C. Third Year

Budget Category	*Amount Requested*
Personnel	$285,297.00

Fringe Benefits	$104,786.00
Equipment	$ 00.00
Travel	$ 13,006.50
Contractual	$518,187.50
Indirect Charges	$ 66,523.00
Other	$ 12,200.00
Total Third Year	*$1,000,000.00*

III. MAINTENANCE OF EFFORT

By submitting this grant application, the Department gives its assurances that grant funds will not be used as a substitute for existing funding for health insurance rate review efforts. Rather, grant funds will only be used to enhance and improve Kentucky's existing rate review processes.

EXHIBIT 1B

Cycle II Proposed Budget/Expenditures Spreadsheets

3-Year Period

GRANTS TO SUPPORT STATES IN HEALTH INSURANCE RATE REVIEW

CYCLE II - FIRST YEAR

Estimated Expenditure of Grant Funds

Object Class Category	Personnel Position and Names	% of Time Budgeted for Cycle II Program	Salary	Total Months of Salary Budgeted	FICA: Total Salary x.95x.0765	Total Salary/FICA	Total
Personnel	Information Officer I, Jim Jordan	100%	$26,483.00	12 Months	$1,904.00	$28,387.00	
	Systems Analyst II, Bess Miller	100%	$35,246.00	12 Months	$2,535.00	$37,781.00	
	Resource Management Analyst I, Mark Moriarty	100%	$29,129.00	12 Months	$2,095.00	$31,224.00	
	Healthcare Data Administrator, Ron Alsup	100%	$57,758.00	12 Months	$4,153.00	$61,911.00	
	Health Policy Specialist II, Nancy Phillips	100%	$38,770.00	12 Months	$2,818.00	$41,588.00	
	Administrative Specialist II, Wendy Kurtz	100%	$25,277.00	12 Months	$1,818.00	$27,095.00	
	Internal Actuary, New Cycle II Position (Vacant)	100%	$39,891.00	9 Months	$2,912.00	$42,803.00	$270,789.00

Fringe Benefits	Personnel Position and Names	Life Insurance: $15.00 per Employee	Health: Actual Cost or $7,222 per Employee	Retirement: Total Salary x 19.82%	Workers' Compensation: $120.00 per Employee	Cost Per Employee	
	Information Officer I, Jim Jordan	$15.00	$7,222.00	$5,218.00	$120.00	$12,575.00	
	Systems Analyst II, Bess Miller	$15.00	$7,060.00	$6,944.00	$120.00	$14,139.00	
	Resource Management Analyst I, Mark Moriarty	$15.00	$6,920.00	$5,739.00	$120.00	$12,794.00	
	Healthcare Data Administrator, Ron Alsup	$15.00	$9,086.00	$11,379.00	$120.00	$20,600.00	
	Health Policy Specialist II, Nancy Phillips	$15.00	$8,728.00	$7,638.00	$120.00	$16,501.00	
	Administrative Specialist II, Wendy Kurtz	$15.00	$7,222.00	$4,980.00	$120.00	$12,337.00	
	Internal Actuary, New Cycle II Position (Vacant)	$15.00	$7,222.00	$8,483.00	$120.00	$15,840.00	$104,786.00

Equipment	Type	Amount	Cost				
	Webinar Capability - Audio and Visual		$7,000.00				
	Desktop computers	2	$1,800.00				
	Laptop	1	$1,000.00				$9,800.00

Travel	Type of Travel	Breakdown of Travel Charges	Travel Calculation	Cost	Total Cost		
	In-state Travel - State Personnel	Mileage Reimbursement	3 trips x 3 persons x 150 miles x .47/mile	$634.50	$634.50		
		Airfare	3 trips x 3 persons x $450.00	$4,050.00			
		Lodging	3 trips x 3 persons 3 nights x $250.00	$6,750.00			
		Per Diem	3 trips x 3 persons 3 days x $36.00	$972.00			
	Out-of-State Travel - State Personnel	Ground Transportation	3 trips x 3 persons $100.00	$600.00	$12,372.00		$13,006.50

Contractual	Type	Rate Calculation	Total Cost	Travel	Total Per Contract		
	Actuary - Rate Application Audits	$340/hr	$400,000.00	$50,000	$450,000.00		
	Actuary - Health Rate Review/Consulting	$340/hr	$221,544.00	$15,000	$236,544.00		
	Translator	.15/word	$50,000.00	0	$50,000.00		$736,544.00

Indirect Charges	Indirect Cost Allocation Plan						
							$63,138.50

Other	Type	Breakdown	Cost	Total Cost			
	IT Expenditure - SERFF enhancement		$20,856.00	$20,856.00			
	2 Stakeholder Forums:	Facility Rental	$2,000.00				
		Refreshments	$750.00				
		Speaker Reimbursement	$1,000.00	$3,750.00			
	Software Licenses	Two Licenses	$2,500.00	$2,500.00			$27,106.00

	TOTAL	$1,225,170.00

GRANTS TO SUPPORT STATES IN HEALTH INSURANCE RATE REVIEW

CYCLE II - SECOND YEAR

Estimated Expenditure of Grant Funds

Object Class Category	Breakdown of Category Estimated Expense	% of Time Budgeted for Cycle II Program	Salary	Total Months of Salary Budgeted	FICA	Total Salary/FICA	Totals
Personnel	Information Officer I, Jim Jordan	100%	$26,483.00	12 Months	$1,904.00	$28,387.00	
	Systems Analyst II, Bess Miller	100%	$35,246.00	12 Months	$2,535.00	$37,781.00	
	Resource Management Analyst I, Mark Moriarty	100%	$29,129.00	12 Months	$2,095.00	$31,224.00	
	Healthcare Data Administrator, Ron Alsup	100%	$57,758.00	12 Months	$4,153.00	$61,911.00	
	Health Policy Specialist II, Nancy Phillips	100%	$38,770.00	12 Months	$2,818.00	$41,588.00	
	Administrative Specialist II, Wendy Kurtz	100%	$25,277.00	12 Months	$1,818.00	$27,095.00	
	Internal Actuary, New Cycle II Position (Vacant)	100%	$53,428.00	12 Months	$3,883.00	$57,311.00	$285,297.00

	Personnel Position and Names	Life Insurance: $15.00 per Employee	Health: Actual Cost or $7,222 per Employee	Retirement: Total Salary x 19.82%	Workers' Compensation: $120.00 per Employee	Cost Per Employee	
Fringe Benefits	Information Officer I, Jim Jordan	$15.00	$7,222.00	$5,218.00	$120.00	$12,575.00	
	Systems Analyst II, Bess Miller	$15.00	$7,060.00	$6,944.00	$120.00	$14,139.00	
	Resource Management Analyst I, Mark Moriarty	$15.00	$6,920.00	$5,739.00	$120.00	$12,794.00	
	Healthcare Data Administrator, Ron Alsup	$15.00	$9,086.00	$11,379.00	$120.00	$20,600.00	
	Health Policy Specialist II, Nancy Phillips	$15.00	$8,728.00	$7,638.00	$120.00	$16,501.00	
	Administrative Specialist II, Wendy Kurtz	$15.00	$7,222.00	$4,980.00	$120.00	$12,337.00	
	Internal Actuary, New Cycle II Position (Vacant)	$15.00	$7,222.00	$8,483.00	$120.00	$15,840.00	$104,786.00

	Type	Amount	Cost				
Equipment	No equipment purchases anticipated in Year 2						$0.00

	Type of Travel	Breakdown of Travel Charges	Travel Calculation	Cost	Total Cost		
Travel	In-state Travel - State Personnel	Mileage Reimbursement	3 trips x 3 persons x 150 miles x .47/mile	$634.50	$634.50		
		Airfare	3 trips x 3 persons x $450.00	$4,050.00			
		Lodging	3 trips x 3 persons 3 nights x $250.00	$6,750.00			
		Per Diem	3 trips x 3 persons 3 days x $36.00	$972.00			
	Out-of-State Travel - State Personnel	Ground Transportation	3 trips x 3 persons $100.00	$600.00	$12,372.00		$13,006.50

	Type	Rate Calculation	Total Cost	Travel	Total Per Contract		
Contractual	Actuary - Rate Application Audits	$340/hr	$400,000.00	$45,000	$445,000.00		
	Actuary - Health Rate Review/Consulting	$340/hr	$50,000.00	$7,000	$57,000.00		
	Translator	.15/word	$16,187.50	0	$16,187.50		$518,187.50

Indirect Charges	Indirect Cost Allocation Plan						$66,523.00

	Type	Breakdown	Cost	Total Cost			
Other	IT Expenditure - SERFF enhancement		$10,000.00	$10,000.00			
	2 Stakeholder Forums:	Facility Rental	$1,000.00				
		Refreshments	$200.00				
		Speaker Reimbursement	$0.00	$1,200.00			
	Software Licenses	One License	$1,000.00	$1,000.00			$12,200.00

TOTAL	$1,000,000.00

GRANTS TO SUPPORT STATES IN HEALTH INSURANCE RATE REVIEW

CYCLE II - THIRD YEAR

Estimated Expenditure of Grant Funds

Object Class Category	Breakdown of Category Estimated Expense	% of Time Budgeted for Cycle II Program	Salary	Total Months of Salary Budgeted	FICA	Total Salary/FICA	Totals
Personnel	Information Officer I, Jim Jordan	100%	$26,483.00	12 Months	$1,904.00	$28,387.00	
	Systems Analyst II, Bess Miller	100%	$35,246.00	12 Months	$2,535.00	$37,781.00	
	Resource Management Analyst I, Mark Moriarty	100%	$29,129.00	12 Months	$2,095.00	$31,224.00	
	Healthcare Data Administrator, Ron Alsup	100%	$57,758.00	12 Months	$4,153.00	$61,911.00	
	Health Policy Specialist II, Nancy Phillips	100%	$38,770.00	12 Months	$2,818.00	$41,588.00	
	Administrative Specialist II, Wendy Kurtz	100%	$25,277.00	12 Months	$1,818.00	$27,095.00	
	Internal Actuary, New Cycle II Position (Vacant)	100%	$53,428.00	12 Months	$3,883.00	$57,311.00	$285,297.00

	Personnel Position and Names	Life Insurance: $15.00 per Employee	Health: Actual Cost or $7,222 per Employee	Retirement: Total Salary x 19.82%	Workers' Compensation: $120.00 per Employee	Cost Per Employee	
Fringe Benefits	Information Officer I, Jim Jordan	$15.00	$7,222.00	$5,218.00	$120.00	$12,575.00	
	Systems Analyst II, Bess Miller	$15.00	$7,060.00	$6,944.00	$120.00	$14,139.00	
	Resource Management Analyst I, Mark Moriarty	$15.00	$6,920.00	$5,739.00	$120.00	$12,794.00	
	Healthcare Data Administrator, Ron Alsup	$15.00	$9,086.00	$11,379.00	$120.00	$20,600.00	
	Health Policy Specialist II, Nancy Phillips	$15.00	$8,728.00	$7,638.00	$120.00	$16,501.00	
	Administrative Specialist II, Wendy Kurtz	$15.00	$7,222.00	$4,980.00	$120.00	$12,337.00	
	Internal Actuary, New Cycle II Position (Vacant)	$15.00	$7,222.00	$8,483.00	$120.00	$15,840.00	$104,786.00

	Type	Amount	Cost				
Equipment	No equipment purchases anticipated in Year 3						$0.00

	Type of Travel	Breakdown of Travel Charges	Travel Calculation	Cost	Total Cost		
Travel	In-state Travel - State Personnel	Mileage Reimbursement	3 trips x 3 persons x 150 miles x .47/mile	$634.50	$634.50		
		Airfare	3 trips x 3 persons x $450.00	$4,050.00			
		Lodging	3 trips x 3 persons 3 nights x $250.00	$6,750.00			
		Per Diem	3 trips x 3 persons 3 days x $36.00	$972.00			
	Out-of-State Travel - State Personnel	Ground Transportation	3 trips x 3 persons $100.00	$600.00	$12,372.00		$13,006.50

	Type	Rate Calculation	Total Cost	Travel	Total Per Contract		
Contractual	Actuary - Rate Application Audits	$340/hr	$400,000.00	$45,000	$445,000.00		
	Actuary - Health Rate Review/Consulting	$340/hr	$50,000.00	$7,000	$57,000.00		
	Translator	.15/word	$16,187.50	0	$16,187.50		$518,187.50

Indirect Charges	Indirect Cost Allocation Plan						$66,523.00

	Type	Breakdown	Cost	Total Cost			
Other	IT Expenditure - SERFF enhancement		$10,000.00	$10,000.00			
	2 Stakeholder Forums:	Facility Rental	$1,000.00				
		Refreshments	$200.00				
		Speaker Reimbursement	$0.00	$1,200.00			
	Software Licenses	One License	$1,000.00	$1,000.00			$12,200.00

TOTAL	$1,000,000.00

PROJECT NARRATIVE – CYCLE II
GRANTS TO SUPPORT STATES IN HEALTH INSURANCE RATE REVIEW
KENTUCKY DEPARTMENT OF INSURANCE

I. PAST PROGRESS AND CURRENT RATE REVIEW PROGRAM/PROCESS

A. Kentucky's Rate Review Process

The Kentucky Department of Insurance ("Department") currently regulates HMO, PPO, POS, and FFS products through a form and rate filing process. These health benefit plan products are offered in the small group (2-50 employees), large group (51+ employees), individual, association, employer-organized association, and insurance purchasing outlet ("IPO") market segments. These market segments are defined by KRS 304.17A-005 and 304.17A-750. **[Exhibit 1,** KRS 304.17A-005; **Exhibit 2,** KRS 304.17A-750]. Currently, no entities are registered in Kentucky as an insurance purchasing outlet.

Rating rules utilized by insurers in Kentucky vary among different market segments. The individual market is subject to a rating band of plus or minus 35%, and the ratio pertaining to the combined effect of case characteristics such as age, gender, occupation, and geographic area cannot be greater than five-to-one ("5:1"). That is, the ratio of the highest rate factor within a class of business shall not exceed 5:1. For an individual product filed under a minimum guaranteed lifetime loss ratio ("GLLR"), the minimum GLLR must be greater than or equal to 65%. **[Exhibit 3,** KRS 304.17A-095; **Exhibit 4,** KRS 304.17A-0952].

Small group rates are subject to a rating band of plus or minus 50%, and the ratio of the combined effect of case characteristics cannot be greater than 5:1. **[Exhibits 3 and 4].** Association rates are treated as individual products for the purpose of rate review in Kentucky. **[Exhibits 3 and 4].** Employer-Organized Association ("EOA") rates are reviewed in a manner similar to the review of rates in the small group market. **[Exhibit 5,** KRS 304.17A-0954].

Rating band rules are not applicable to the large group market in Kentucky. Rather, insurers must file their rating methodology with the Department for large group products. **[Exhibit 3]**.

Insurers offering health benefit plans in any of the market segments in Kentucky must submit a rate filing to the Department before rates may be used to establish premiums. Kentucky Administrative Regulation, 806 KAR 17:150, specifies the information and data required to be included in rate filings. **[Exhibit 6**, 806 KAR 17:150**]**. The regulation establishes a standard format for rate filings and requires supporting documentation to be included with the filings. The required rate filing data/documentation includes, but is not limited to, base and index rates, an actuarial memorandum, claim cost development, and any changes in benefits. A sample rate filing in the individual market is attached and labeled **Exhibit 7**. Premiums based on approved rates for all market segments must be guaranteed for twelve months from the date of policy issuance or renewal.

The rate review process is governed by KRS 304.17A-095, 304.17A-0952 and 304.17A-0954. **[Exhibits 3, 4, and 5]**. A rate filing work flow chart is attached and labeled **Exhibit 8**. The work flow chart depicts the Department's internal rate review process. A general overview of the process follows.

The Department accepts hard-copy paper filings as well as electronic filings submitted through the National Association of Insurance Commissioners' ("NAIC") SERFF database. Upon receipt, Department staff enters information from the filing into the Department's internal Oracle database. A sample printout from the Department's internal database depicting the rate filing information captured is attached and labeled **Exhibit 9**.

A complete filing, one that includes all required information, is given a "date of filing." A rate filing may be used by the insurer on and after the date of filing and prior to approval by

the Department. Rates must be approved or disapproved within 60 days of the date of filing. Otherwise, the filing will be deemed approved after the expiration of the 60-day timeframe. The Department has the authority to disapprove or request modification of a rate filing. Because rates may be used when filed, the Department may order the insurer to retroactively modify or reduce rates for any disapproved or modified rate filing. **[Exhibit 3]**.

Insurers are required to file rates with the Kentucky Office of the Attorney General ("AG") when a rate filing is made with the Department. **[Exhibit 3]**. In addition, Department staff notifies the AG of any rate filing received and advises the AG of the date of filing. The AG's rate reviews are separate and distinct from the Department's review although the AG and the Department often exchange information during the review of health insurance rate filings.

The Department's internal rate review staff assigns complete filings to contracted actuaries for review. The Department's actuaries review rate filings to determine if the rates are actuarially justified and comply with Kentucky statutes and regulations. During the review, the Department's actuary may contact the insurer for additional information or clarification as needed. The Department's actuary will make a final recommendation to the Department to approve or disapprove a rate filing. The actuary may also request a modification of a rate filing. The insurer has the option to withdraw a rate filing, often in response to a request from the Department, if the filing would require significant modification in order to be approved. Often, the insurer chooses to re-file with the requested modification.

With the exception of large group, in all health insurance market segments in Kentucky insurers have the option to file rates and policy forms that contain a minimum GLLR. Filings submitted with a minimum GLLR that meet the requirements of KRS 304.17A-095(6) are deemed approved upon receipt. Again, the Department has the authority to disapprove or request

modification and order the insurer to retroactively modify or reduce rates for any disapproved or modified filing. **[Exhibit 3]**. Currently, the Department is considering how to treat Kentucky's GLLR rules in light of the federal medical loss ratio requirements.

Kentucky Revised Statute 304.17A-095(3) outlines the factors that the commissioner is required to consider when determining whether a rate filing should be approved or disapproved. Those factors include, but are not limited to, the following:

- Whether the benefits provided are reasonable in relation to the premium or fee charged;
- Whether the rates, fees, dues, or other charges are excessive, inadequate, or unfairly discriminatory; and
- Other factors as deemed relevant by the commissioner.

Rate filings are approved and disapproved by the Department through the creation of a formal legal order. **[Exhibit 10**, Sample Approval/Disapproval Orders**]**. The final dispositive action on the rate filing is captured in the Department's internal database, together with the date of action. All rate filing disapprovals are reported as a regulatory action to the NAIC. The filing and the final legal order are scanned and retained in the Department's internal database. These documents are made available for public disclosure upon request.

The Department may conduct a retrospective review of a rate filing if a significant number of consumer complaints are received or the AG's actuary has advised the Department of concerns regarding the rate filing. An insurer that does not meet the minimum GLLR is required to issue premium refunds, including interest, to Kentucky policyholder(s) insured under the applicable policy if the refund would equal $10 or more. Premium refunds of less than $10 per policy shall be aggregated by the insurer and paid to the Kentucky State Treasury. **[Exhibit 3]**.

With Cycle I rate review grant funds, the Department increased its scrutiny of rate filings by hiring additional staff to receive and analyze data; improved the Department's ability to capture pertinent rate filing data; educated consumers and made rate filing information more transparent to the public; assisted the NAIC in making improvements to the SERFF database to better report information to the federal government and ensure that the rate filing process is more efficient for insurers and the Department; and analyzed current rate review systems and processes to improve upon current methods of review and identify needed law changes.

B. Information Technology (IT) and Systems Capacity

Though not required by statute or regulation, the Department currently requests that all health insurers utilize the SERFF database to submit health insurance rate filings for review. Utilizing SERFF makes the rate filing process more uniform and allows the Department to capture rate filing information necessary to report to the federal government. **Exhibit 11** depicts the information captured through the SERFF database.

The Department's internal Oracle database has been enhanced to incorporate all SERFF data fields. By reconciling the Department's database with SERFF, the Department can conduct an Application Programming Interface ("API") download from SERFF into the Department's database. This download allows the Department to internally capture all rate information, including attached documentation, filed through SERFF. Once the download is complete, Department personnel need only enter Kentucky-specific information into the Department's rate filing database. As a result, the enhancements made to SERFF have reduced the need for data entry, thereby making the rate filing process more efficient in Kentucky.

C. Budget and Staffing

1. Annual Overall Total Budget and Revenue for Department

The Department's fiscal year begins July 1 and ends June 30. The total budget appropriation for the Department for fiscal year 2012 is $36,540,400. This appropriation includes money received from the tobacco settlement in the amount of $16,581,400[1] as well as restricted funds from the Kentucky State Treasury in the amount of $19,959,000. With this budgeted appropriation, the Department supports twelve separate divisions and branches including the Health and Life Division. The Department's revenue and receipts for fiscal year 2011 are estimated to be $31,213,100.

2. Resources Allocated to Rate Review and Personnel Qualifications

The Department has nine employees devoted primarily to reviewing and enhancing the health insurance rate review process. Six of these employees were employed using Cycle I grant funds. The organizational chart attached as an exhibit depicts how these employees operate functionally, as well as the managerial reporting scheme for those persons handling health insurance rate review. [**Exhibit 12**, Organizational Chart]. Position descriptions and education and experience requirements of all employees associated with the rate review process are outlined in **Exhibit 13**. The Commonwealth of Kentucky's class specifications are included as **Exhibit 14** for each staff position that devotes more than fifty percent (50%) of their time to health insurance rate review. Also attached is biographical information for William Nold, the Director of the Health and Life Division and the Project Director for this Cycle II grant. [**Exhibit 15**, Biographical Information for William Nold].

The Health and Life Division currently has two actuaries under contract assigned to review health insurance rates, James E. Drennan with Ingenix Consulting and Ron Burkhart with Wakely Consulting Group. While Mr. Burkhart concentrates on the review of rates associated with health insurance products such as long-term care and Medicare supplements, Mr. Drennan

[1] Tobacco settlement funds are used solely to fund Kentucky Access, Kentucky's high-risk pool.

devotes 100% of his time while at the Department to the review of rates associated with health benefit plans. [**Exhibit 16**, Biographical Information for James E. Drennan].

The Health and Life Division amended its contract with Ingenix Consulting to add John Stark as a consulting actuary to assist the Division in analyzing its rate review process and making enhancements. **[Exhibit 17,** Contract between Department and Ingenix Consulting]. Mr. Stark is paid from Cycle I grant funds. [**Exhibit 18**, Biographical Information for John Stark]. Pertinent contract information, as required by the grant application, is included in the Position Descriptions and Time Allocation Listing attached as **Exhibit 13**.

3. Health Insurance Rate Filing Data and Time Constraints

Between January 1, 2010, and December 31, 2010, the Department received 95 rate filings and 82 amendments. Of the 95 rate filings received, 34 were for the individual market, 23 were for the small group market, 25 were for employer-organized associations, and 13 were for the large group market. Of the 82 amendments received, 15 were for the individual market, 9 were for the small group market, 57 were for employer- organized associations, and 1 was for the large group market.

As noted above, the commissioner is required to take action on a rate filing within 60 days after the date of filing. If a filing is not approved or disapproved within the 60-day timeframe, the filing is deemed approved. Typically, the Department utilizes the entire 60-day timeframe to complete the rate review process. The Department will not permit a rate filing to be deemed approved. Rather, an approval/disapproval decision is rendered on each filing within the statutory timeframe.

D. Consumer Protections

1. Public Access to Rates and Rate Filings

In accordance with KRS 304.2-150 and the Kentucky Open Records Act, codified at KRS 61.870 through KRS 61.884, all rate and form filings and information filed in support thereof are open and subject to public disclosure. **[Exhibit 19**, KRS 304.2-150; **Exhibit 20,** Kentucky Open Records Act at KRS 61.870 through KRS 61.884]. Provider fee reimbursement schedules are exempted from public disclosure as those schedules have been determined to be proprietary and confidential in accordance with KRS 61.878, the exemptions to the Kentucky Open Records Act. **[Exhibit 21**, KRS 61.878].

An open records requests for a rate filing must be submitted, in writing, to the Department. The request must provide sufficient information in order for the Department to determine which rate filing is being requested. Pursuant to KRS 304.4-010, the cost of providing a rate filing is thirty cents per page and must be paid prior to the Department's delivery of the requested filing. **[Exhibit 22**, KRS 304.4-010].

2. Summaries of Rate Changes and Notice to Consumers

Beginning August 1, 2011, the Kentucky Department of Insurance (DOI) Website was enhanced to allow consumers to search for health benefit plan rate filings. The consumer can search by market segment, insurer name, Department filing number, received date range, or filing status (pending, approved, disapproved, withdrawn, all). For each filing, the search result includes a link to a Rate Filing Summary report. The report includes the search criteria data as well as product type, date effective, base rate change requested and approved, and the status of the Department's action on the rate filing. **[Exhibit 23**, Screen Print Pages of Consumer Rate Information and Rate Filing Summary Report]. In addition, the search result includes a link that enables the consumer to send comments via email for each filing to the Department. This ability to comment is only available on filings that are pending, which is on average 60 days.

Notwithstanding the above-referenced changes to the Department's Website, the Department continues to consider enhancements that will be effective in providing consumers with advanced notice and more information about rate filings, definitions of rate terms, and access to rate filing documentation and summary information. With Cycle II grant funding, the Department intends to develop improved methods to ensure that requests for rate increases and the overall rate review process are more transparent for interested consumers. Further enhancements that the Department is considering with respect to consumer transparency are outlined in Section II of this narrative.

3. Public Meetings and Hearings

In accordance with KRS 304.2-310(1), the commissioner of the Department, at her discretion, may hold a hearing for any purpose within the scope of the Kentucky Insurance Code. This statute authorizes the commissioner to hold public informational hearings to gather information and data regarding rate filings from interested parties and stakeholders. Further, any person aggrieved by any order of the commissioner may file an application for a hearing within 60 days after the person knew or reasonably should have known of the order. **[Exhibit 24**, KRS 304.2-310]. Consequently, the issuance of an order approving or disapproving a rate filing might give rise to the necessity to hold a formal administrative hearing. Lastly, KRS 304.17A-095(8)(a) requires the commissioner to hold a hearing regarding a rate filing upon written request by the AG if such request is based upon one or more of the approval/disapproval considerations outlined in KRS 304.17A-095(3). Also, KRS 304.17A-095(8)(b) reiterates an insurer's right to request a hearing pursuant to KRS 304.2-310 with regard to any action taken by the commissioner as to the disapproval of rates or an order of a retroactive reduction in rates. **[Exhibit 3]**.

4. Consumer Inquiries and Complaints

Between January 1, 2008, and June 30, 2011, the Department received approximately 98 complaints and 1 inquiry related to health benefit plan premiums and rating. Of the 98 complaints received, 86 are closed and 13 remain open. Seven of the 98 complaints were determined to be justified, 79 were determined not to be justified, and 12 have not yet been resolved and categorized as justified or not justified.

E. Examination and Oversight

The Department is authorized to conduct examinations of insurer business practices, including the application of rates that have been filed and approved in Kentucky. **[Exhibit 25,** KRS 302.2-210, Examination of Insurers; **Exhibit 26,** Examination of Health Maintenance Organizations]. The Department conducts market regulation as well as financial examinations of insurers transacting health insurance business in Kentucky. Market Regulation examinations of each health insurer doing business in Kentucky occurs approximately every 4-5 years.

On occasion, a market regulation examination may reveal an isolated violation by an insurer for charging a health insurance rate not filed and approved with the Department; however, this business practice has not been determined to be prevalent in the Commonwealth of Kentucky. In fact, within the past 12 months, Kentucky has completed market regulation examinations of Anthem Health Plans of Kentucky, Inc.; Humana Health Plan, Inc.; and Time Insurance Company. These three companies represent approximately 98% of the individual health insurance market in Kentucky. For all products and market segments, these three companies represent approximately 86% of the health insurance market in Kentucky with over 313,000 subscribers. The market regulation examinations included a review of the insurers' practices regarding the application of filed rates. The examinations did not reveal any significant

findings or violations associated with the insurers using health insurance rates that had not been filed and approved.

There have been no administrative actions taken against an insurer based on the insurer's health insurance rating practices during the past two years. With respect to the Department's final action on health insurance rate filings, the Department has issued 117 orders approving and 5 orders disapproving such filings since July 1, 2009. In general, insurers agree to modify their rate filings in response to issues advanced by the Department or the AG after the initial review of a filing rather than receive an order of disapproval. This accounts for the disproportionate number of approval orders as compared to the number of disapprovals. The Department's data does not currently capture the number of rate filings modified prior to the issuance of an approval order. However, with Cycle II grant funds, the Department intends to modify the manner in which the final disposition of rate filings are captured in order to more accurately reflect that a rate filing has been modified after filing but prior to approval. This will eliminate any tendency to misconstrue the Department's rate filing approval and disapproval statistics.

The Department has not held any formal hearings over the past two years regarding health insurance rates or rate filings.

II. PROPOSAL TO MEET CYCLE II PROGRAM REQUIREMENTS

A. Detailed Description of Proposed Rate Review Enhancements

With Cycle II rate grant funds, the Department intends to continue enhancing its health insurance rate review process in several broad categories: (1) Information Technology, (2) Personnel, (3) Consumer Initiatives, (4) Internal Processes, and (5) Audit Capabilities. A detailed outline of future activities intended to enhance the Department's rate review process is included below and in the Rate Review Work Plan. [**Exhibit 27**, Rate Review Work Plan]. The

Rate Review Work Plan includes articulated goals, measurable objectives, milestones, and a timeline regarding the Department's plans for future enhancements.

B. Rate Review Enhancement Milestones

1. Improving Rate Filing Requirements

Two of the most important components of a rate calculation are the claims experience and the trend projections. While 806 KAR 17:150 outlines a substantial amount of information that insurers should include in a rate filing, the Department believes that changes to the regulation will enhance the rate review process in order to receive information necessary to complete a more thorough review of a health insurance rate filing. **[Exhibit 6]**.

The Department believes that each insurer should better substantiate how they selected and modified the claims experience used in their rate filings. For example, often insurers may have augmented claims with data derived from other geographical regions or from products similar to those that are the subject of the rate filing. The reason given for this practice is that the data in Kentucky is not credible or the product is so new that the actual experience is not a good indicator of the future experience. The Department believes that insurers should be required to sufficiently justify reliance on data from a region other than Kentucky or a product other than the product that is the subject matter of the rate filing. In order to better regulate this issue and improve Kentucky's current rate review process, changes to 806 KAR 17:150 will be necessary.

Pricing trend assumptions is critical since the assumptions reflect an insurer's expectations about the future. Further, trends are applied in a compounded fashion which magnifies their importance. Because assumptions can be very subjective depending on the economic, market, legislative, and regulatory climates, it is important not only to receive justification concerning trend assumptions, but also the level of margin or conservatism inherent

in the trend projections. Further amendments to 806 KAR 17:150 are being considered that would clarify the authority of the Department to request additional data such as a range of potential reasonable trends, where the trends used in the rate filing fall within the range, why certain trends were chosen, and a comparison of trend assumptions to prior estimates.

Other enhancements that the Department is considering include: (1) requesting more substantial information regarding rate filings in the large group market, (2) conducting a more in-depth review of rate filings in the large group market, and (3) making rate filing requirements applicable to non-health benefit plans such as student health plans.

The proposed changes outlined above will require actuarial consultation, actuarial analysis, and staff resources to draft and promulgate the amendments to 806 KAR 17:150 and any related statute that may require amendments.

2. Reporting and Justifying Administrative Expenses

The Department is considering requiring insurers to report and justify administrative expenses in a more detailed manner. In particular, requiring insurers to submit the following information in a rate filing would be helpful in analyzing the insurers' spending patterns, excessive expenditures, and trends in administrative expenses:

- An explanation regarding how the expenses appear in rate calculations;
- A breakdown of broad categories of administrative expenses such as salaries, rent, advertising, and information technology;
- A report of at least 3 years of actual expenses, by category, to enable reviewers to determine how expenses increase and how insurers are spending their money and to make comparisons with other insurers in the market.

3. Insurer's Overall Finances

Consideration of an insurer's overall finances bridges the gap between the future (projected rates) and the past (financial reporting) as well as ties pricing of the insurance product to an insurer's financial solvency. While the Department requests and reviews an insurer's annual statement in conjunction with each submitted rate filing, there are very few rules that govern how this financial information should be treated.

In addition to the insurer's annual statement, additional financial information might be helpful to the rate filing reviewers. Such information might include a 3-year analysis of expected versus actual profits for the products covered by the rate filing. This information will allow the Department to assess whether insurers are anticipating too little profit which can be a solvency issue or, whether the experience is indicative of excessive profits borne by insureds.

Other issues related to the insurer's financial condition that the Department will be analyzing to determine whether changes to the rate review process are necessary include: (1) requiring insurers to disclose where margins or risk charges emerge in the rate development process; (2) the amount of investment income earned versus surplus derived from rating practices; (3) insurer allocation practices regarding investment income; (4) the insurance product's contribution to the risk-based capital ("RBC") projected contribution; and (5) the reconciliation of actual to expected experience.

C. Staffing Enhancements

With Cycle I rate review grant funds, the Department established six new staff positions and employed persons to fill these positions. The positions are a Healthcare Data Administrator, a Health Policy Specialist, an Administrative Specialist, an Information Officer, a Systems Analyst, and a Resource Management Analyst. The positions are described in the Position

Descriptions and Time Allocation Listing. **[Exhibit 13]**. Also, the Commonwealth's class specifications for these positions are attached to this narrative as **Exhibit 14**.

Using Cycle II rate review grant funds, the Department intends to retain the positions established with Cycle I grant funds as well as establish one additional staff position, an internal actuary. Also, using Cycle II rate review grant funds, the Department intends to contract with an additional actuary and a translator.

The Department requires an internal actuary to provide unbiased actuarial advice regarding the Department's rate review process, enhancements, database functions, data point needs, rate filing components, rate filing review needs, compliance with federal law requirements, meaningful rate review, development of actuarial review checklists, and the feasibility of integrating multi-year rate filings for actuarial review, reporting, and analysis.

The Department expects to contract with an additional actuary for the purpose of conducting rate application audits. The Department believes that insurer underwriting practices play an important role in the final rate quote given to prospective insureds. Rate application audits will allow the Department to determine if filed and approved rates are being appropriately charged to the consumer. Further, rate application audits will allow the Department to evaluate the effect of underwriting on an insured's health insurance premium. This evaluation could potentially lead to future rate filing requirements. Lastly, rate review audits will assist the Department in collecting information that will be useful in developing criteria for certification of Qualified Health Plans to participate in the Exchange.

The actuary may also be engaged to participate in multi-state examinations to review insurer rate derivation practices and loss ratio calculations. The examination findings will allow the Department to determine how insurance rates are derived at the insurer level. Further, the

examinations will assist the Department in determining whether federal medical loss ratio standards are being met.

With Cycle II grant funds, the Department expects to contract with a Translator to develop consumer rate filing communications that are culturally and linguistically appropriate given the demographics in Kentucky. The Translator will make certain that rate filing information is available to non-English speaking residents of Kentucky. Given that rate filing information is naturally confusing, it is imperative that the Department make information available to those with language barriers in a manner they can easily understand. The Translator will provide translation services to the Department with respect to rate filing information included on the Department's Website as well as any written literature regarding health insurance rates that the Department may publish such as FAQs.

D. IT Enhancements

With Cycle II grant funds, the Department intends to make information system enhancements to automate the analysis of health insurance rate increases filed with the Department. The specifics of these enhancements have not been determined but the Department's rate review automation needs will be defined upon completion of current analysis of the process and finality of federal rules and guidance relating to effective rate review. Enhancements will, at a minimum, include additional data collection, automation of the actuary's rate filing analysis, and enhancements to accurately record filing dispositions.

The Department intends to provide resources using Cycle II funds to the NAIC. These funds will be used by the NAIC to make additional enhancements to the SERFF database. These enhancements include the following:

- The SERFF system will be enhanced to assist with the collection of all parts of the industry Preliminary Justification for rate increases;
- SERFF will be modified to allow the states to enter a Summary of Rate Review and/or a State Filing Summary. This enhancement will result in the need for additional enhancements to the Department's internal database to reflect SERFF changes and capture the data;
- The Health Filing Access Interface will be enhanced to allow states to display rate filing information and to accept and process public comments on rate filings;

If planned system enhancements to the Department's database significantly increase the burden on the Department's Information Technology capacity, Cycle II funds may also be used to purchase additional software and hardware. This purchase would offset any performance degradation caused by the enhancements. Cycle II funds will also be necessary to purchase computers and laptops for new staff.

Lastly, the Department anticipates future enhancements to the Department's internal database to house all filings electronically, including comments from consumers, comments from the AG, and the final legal disposition. These enhancements will assist the Department with document retrieval for reporting, open records requests, media inquiries, and consumer complaint handling. Further, the Department has budgeted funds to procure audio and visual technological capability which can be used for mentoring other states, educating consumers, and holding stakeholder forums to address issues or gather information.

E. Consumer Protection Enhancements

1. Transparency

With Cycle I grant funds, the Department has enhanced its Website so that consumers can retrieve rate filing information, communicate with the Department regarding rate filings, and view the final legal disposition of rate filings. As this is work in progress, the Department intends to continue to review the information displayed on the Website, improve the quality and types of information that it contains, and develop additional consumer-friendly communications regarding rates and rate filings. Enhancements may also be made based on comments and feedback gathered from consumers that access the rate filing information on the Department's Website. This work will be accomplished using Cycle II grant funds.

2. Public Hearing Process

The Department's hearing process is outlined above. At this time, the Department is not contemplating any statutory changes or other enhancements that would affect the hearing process.

3. Consumer Advanced Notice of Rate Changes

With Cycle II grant funds, the Department intends to establish, through its Website, a mechanism that will provide consumers with the ability to request an email whenever a health insurance rate filing is received by the Department. Further, the Department intends to enhance its Website to allow consumers to access rate filing documents without having to go through the Department's open records process and incur a cost for procuring or reviewing the documents.

One of the more challenging aspects to the Department's endeavors to enhance the health insurance rate review process has been that of educating consumers about the process, explaining the components of rate filings, summarizing the rate filings, and providing meaningful information that consumers can easily comprehend. Health insurance rate filings contain terms that are uncommon. As a result, most persons outside of the actuarial field or rate review

process may not understand the components of a rate filing. The Department is continuing to assess how we can educate the public regarding this complex topic and address public concerns.

III. REPORTING TO THE SECRETARY ON RATE INCREASE PATTERNS

By submitting this application for Cycle II grant funds, the Department agrees that it will comply with the reporting requirements outlined in Section 2794 of the PHS Act. The Department has met its reporting responsibilities under the Cycle I grant utilizing the SERFF database. The Department intends to continue meeting its reporting requirements under the Cycle II grant utilizing the same mechanism, SERFF.

IV. RECOMMENDATIONS TO THE APPLICABLE STATE EXCHANGE

As noted above, the Department intends to utilize an actuary to conduct rate application and rate derivation audits. Using the audit findings as well as other data collected through the rate review process, the Department will make recommendations to the applicable Exchange regarding whether particular health insurers should be excluded from participation based on a pattern or practice of excessive or unjustified rate increases. The Department has been working very closely with the Kentucky Cabinet for Health and Family Services with respect to the Exchanges. It is through this partnership that a reporting mechanism will be developed to communicate with the appropriate Exchange regarding any relevant rate increase data or findings that might result in the exclusion of an insurer from participation in the Exchange.

V. COMMITMENT TO MENTOR STATES

The Department agrees, to the extent that resources and time allow, to mentor states that are in the process of developing an effective rate review program. The Department has budgeted expenses into this Cycle II grant application to defer the costs should travel to other states become necessary in order to perform any mentoring responsibilities.

VI. EVALUATION PLAN

Cycle II grant funds will enable the Department to continue to enhance its rate review process and dramatically increase consumer input capabilities and transparency. The Department's Website enables Kentucky consumers to review and comment on all rate filings. The Department launched this capability beginning August 1, 2011.

The Department intends to specifically measure the period of time a rate filing is under review; the number of reviews completed; the status of each rate filing; the number of consumer comments received regarding each filing; the types and numbers of rate filing dispositions including approved, approved after filing modification, disapproved, and withdrawn; the number and results of actuarial audits; and the additional cost and hours associated with enhanced rate review. The Department can and will continue to measure the impact of grant funding on the Department's infrastructure by the amount of funds spent for additional staff, equipment, resources, and Department hours dedicated to preparation for Exchange operations.

Progress will be monitored through the Department's quarterly reports and the comprehensive final report at the conclusion of the grant period. To better quantify the outcome and results of the Cycle II grant, the Department plans to hire an outside audit contractor to do a final report of our grant goals and objectives to accurately reflect the impact of Cycle II funds.

EXHIBIT 1

Definitions

KRS 304.17A-005

304.17A-005 Definitions for subtitle.

As used in this subtitle, unless the context requires otherwise:

(1) "Association" means an entity, other than an employer-organized association, that has been organized and is maintained in good faith for purposes other than that of obtaining insurance for its members and that has a constitution and bylaws;

(2) "At the time of enrollment" means:

(a) At the time of application for an individual, an association that actively markets to individual members, and an employer-organized association that actively markets to individual members; and

(b) During the time of open enrollment or during an insured's initial or special enrollment periods for group health insurance;

(3) "Base premium rate" means, for each class of business as to a rating period, the lowest premium rate charged or that could have been charged under the rating system for that class of business by the insurer to the individual or small group, or employer as defined in KRS 304.17A-0954, with similar case characteristics for health benefit plans with the same or similar coverage;

(4) "Basic health benefit plan" means any plan offered to an individual, a small group, or employer-organized association that limits coverage to physician, pharmacy, home health, preventive, emergency, and inpatient and outpatient hospital services in accordance with the requirements of this subtitle. If vision or eye services are offered, these services may be provided by an ophthalmologist or optometrist. Chiropractic benefits may be offered by providers licensed pursuant to KRS Chapter 312;

(5) "Bona fide association" means an entity as defined in 42 U.S.C. sec. 300gg-91(d)(3);

(6) "Church plan" means a church plan as defined in 29 U.S.C. sec. 1002(33);

(7) "COBRA" means any of the following:

(a) 26 U.S.C. sec. 4980B other than subsection (f)(1) as it relates to pediatric vaccines;

(b) The Employee Retirement Income Security Act of 1974 (29 U.S.C. sec. 1161 et seq. other than sec. 1169); or

(c) 42 U.S.C. sec. 300bb;

(8) (a) "Creditable coverage" means, with respect to an individual, coverage of the individual under any of the following:

1. A group health plan;
2. Health insurance coverage;
3. Part A or Part B of Title XVIII of the Social Security Act;
4. Title XIX of the Social Security Act, other than coverage consisting solely of benefits under section 1928;
5. Chapter 55 of Title 10, United States Code, including medical and dental care for members and certain former members of the uniformed services,

and for their dependents; for purposes of Chapter 55 of Title 10, United States Code, "uniformed services" means the Armed Forces and the Commissioned Corps of the National Oceanic and Atmospheric Administration and of the Public Health Service;

6. A medical care program of the Indian Health Service or of a tribal organization;
7. A state health benefits risk pool;
8. A health plan offered under Chapter 89 of Title 5, United States Code, such as the Federal Employees Health Benefit Program;
9. A public health plan as established or maintained by a state, the United States government, a foreign country, or any political subdivision of a state, the United States government, or a foreign country that provides health coverage to individuals who are enrolled in the plan;
10. A health benefit plan under section 5(e) of the Peace Corps Act (22 U.S.C. sec. 2504(e)); or
11. Title XXI of the Social Security Act, such as the State Children's Health Insurance Program.

(b) This term does not include coverage consisting solely of coverage of excepted benefits as defined in subsection (14) of this section;

(9) "Dependent" means any individual who is or may become eligible for coverage under the terms of an individual or group health benefit plan because of a relationship to a participant;

(10) "Employee benefit plan" means an employee welfare benefit plan or an employee pension benefit plan or a plan which is both an employee welfare benefit plan and an employee pension benefit plan as defined by ERISA;

(11) "Eligible individual" means an individual:

(a) For whom, as of the date on which the individual seeks coverage, the aggregate of the periods of creditable coverage is eighteen (18) or more months and whose most recent prior creditable coverage was under a group health plan, governmental plan, or church plan. A period of creditable coverage under this paragraph shall not be counted if, after that period, there was a sixty-three (63) day period of time, excluding any waiting or affiliation period, during all of which the individual was not covered under any creditable coverage;

(b) Who is not eligible for coverage under a group health plan, Part A or Part B of Title XVIII of the Social Security Act (42 U.S.C. secs. 1395j et seq.), or a state plan under Title XIX of the Social Security Act (42 U.S.C. secs. 1396 et seq.) and does not have other health insurance coverage;

(c) With respect to whom the most recent coverage within the coverage period described in paragraph (a) of this subsection was not terminated based on a factor described in KRS 304.17A-240(2)(a), (b), and (c);

(d) If the individual had been offered the option of continuation coverage under a COBRA continuation provision or under KRS 304.18-110, who elected the coverage; and

(e) Who, if the individual elected the continuation coverage, has exhausted the continuation coverage under the provision or program;

(12) "Employer-organized association" means any of the following:

(a) Any entity that was qualified by the commissioner as an eligible association prior to April 10, 1998, and that has actively marketed a health insurance program to its members since September 8, 1996, and which is not insurer-controlled;

(b) Any entity organized under KRS 247.240 to 247.370 that has actively marketed health insurance to its members and that is not insurer-controlled; or

(c) Any entity that is a bona fide association as defined in 42 U.S.C. sec. 300gg-91(d)(3), whose members consist principally of employers, and for which the entity's health insurance decisions are made by a board or committee, the majority of which are representatives of employer members of the entity who obtain group health insurance coverage through the entity or through a trust or other mechanism established by the entity, and whose health insurance decisions are reflected in written minutes or other written documentation.

Except as provided in KRS 304.17A-200, 304.17A.210, and 304.17A-220, no employer-organized association shall be treated as an association, small group, or large group under this subtitle;

(13) "Employer-organized association health insurance plan" means any health insurance plan, policy, or contract issued to an employer-organized association, or to a trust established by one (1) or more employer-organized associations, or providing coverage solely for the employees, retired employees, directors and their spouses and dependents of the members of one (1) or more employer-organized associations;

(14) "Excepted benefits" means benefits under one (1) or more, or any combination thereof, of the following:

(a) Coverage only for accident, including accidental death and dismemberment, or disability income insurance, or any combination thereof;

(b) Coverage issued as a supplement to liability insurance;

(c) Liability insurance, including general liability insurance and automobile liability insurance;

(d) Workers' compensation or similar insurance;

(e) Automobile medical payment insurance;

(f) Credit-only insurance;

(g) Coverage for on-site medical clinics;

(h) Other similar insurance coverage, specified in administrative regulations, under which benefits for medical care are secondary or incidental to other insurance benefits;

(i) Limited scope dental or vision benefits;

(j) Benefits for long-term care, nursing home care, home health care, community-based care, or any combination thereof;

(k) Such other similar, limited benefits as are specified in administrative regulations;

(l) Coverage only for a specified disease or illness;

(m) Hospital indemnity or other fixed indemnity insurance;

(n) Benefits offered as Medicare supplemental health insurance, as defined under section 1882(g)(1) of the Social Security Act;

(o) Coverage supplemental to the coverage provided under Chapter 55 of Title 10, United States Code;

(p) Coverage similar to that in paragraphs (n) and (o) of this subsection that is supplemental to coverage under a group health plan; and

(q) Health flexible spending arrangements;

(15) "Governmental plan" means a governmental plan as defined in 29 U.S.C. sec. 1002(32);

(16) "Group health plan" means a plan, including a self-insured plan, of or contributed to by an employer, including a self-employed person, or employee organization, to provide health care directly or otherwise to the employees, former employees, the employer, or others associated or formerly associated with the employer in a business relationship, or their families;

(17) "Guaranteed acceptance program participating insurer" means an insurer that is required to or has agreed to offer health benefit plans in the individual market to guaranteed acceptance program qualified individuals under KRS 304.17A-400 to 304.17A-480;

(18) "Guaranteed acceptance program plan" means a health benefit plan in the individual market issued by an insurer that provides health benefits to a guaranteed acceptance program qualified individual and is eligible for assessment and refunds under the guaranteed acceptance program under KRS 304.17A-400 to 304.17A-480;

(19) "Guaranteed acceptance program" means the Kentucky Guaranteed Acceptance Program established and operated under KRS 304.17A-400 to 304.17A-480;

(20) "Guaranteed acceptance program qualified individual" means an individual who, on or before December 31, 2000:

(a) Is not an eligible individual;

(b) Is not eligible for or covered by other health benefit plan coverage or who is a spouse or a dependent of an individual who:

1. Waived coverage under KRS 304.17A-210(2); or

2. Did not elect family coverage that was available through the association or group market;

(c) Within the previous three (3) years has been diagnosed with or treated for a high-cost condition or has had benefits paid under a health benefit plan for a

high-cost condition, or is a high risk individual as defined by the underwriting criteria applied by an insurer under the alternative underwriting mechanism established in KRS 304.17A-430(3);

(d) Has been a resident of Kentucky for at least twelve (12) months immediately preceding the effective date of the policy; and

(e) Has not had his or her most recent coverage under any health benefit plan terminated or nonrenewed because of any of the following:

1. The individual failed to pay premiums or contributions in accordance with the terms of the plan or the insurer had not received timely premium payments;

2. The individual performed an act or practice that constitutes fraud or made an intentional misrepresentation of material fact under the terms of the coverage; or

3. The individual engaged in intentional and abusive noncompliance with health benefit plan provisions;

(21) "Guaranteed acceptance plan supporting insurer" means either an insurer, on or before December 31, 2000, that is not a guaranteed acceptance plan participating insurer or is a stop loss carrier, on or before December 31, 2000, provided that a guaranteed acceptance plan supporting insurer shall not include an employer-sponsored self-insured health benefit plan exempted by ERISA;

(22) "Health benefit plan" means any hospital or medical expense policy or certificate; nonprofit hospital, medical-surgical, and health service corporation contract or certificate; provider sponsored integrated health delivery network; a self-insured plan or a plan provided by a multiple employer welfare arrangement, to the extent permitted by ERISA; health maintenance organization contract; or any health benefit plan that affects the rights of a Kentucky insured and bears a reasonable relation to Kentucky, whether delivered or issued for delivery in Kentucky, and does not include policies covering only accident, credit, dental, disability income, fixed indemnity medical expense reimbursement policy, long-term care, Medicare supplement, specified disease, vision care, coverage issued as a supplement to liability insurance, insurance arising out of a workers' compensation or similar law, automobile medical-payment insurance, insurance under which benefits are payable with or without regard to fault and that is statutorily required to be contained in any liability insurance policy or equivalent self-insurance, short-term coverage, student health insurance offered by a Kentucky-licensed insurer under written contract with a university or college whose students it proposes to insure, medical expense reimbursement policies specifically designed to fill gaps in primary coverage, coinsurance, or deductibles and provided under a separate policy, certificate, or contract, or coverage supplemental to the coverage provided under Chapter 55 of Title 10, United States Code, or limited health service benefit plans;

(23) "Health care provider" or "provider" means any facility or service required to be licensed pursuant to KRS Chapter 216B, pharmacist as defined pursuant to KRS Chapter 315, and any of the following independent practicing practitioners:

(a) Physicians, osteopaths, and podiatrists licensed under KRS Chapter 311;

(b) Chiropractors licensed under KRS Chapter 312;

(c) Dentists licensed under KRS Chapter 313;

(d) Optometrists licensed under KRS Chapter 320;

(e) Physician assistants regulated under KRS Chapter 311;

(f) Advanced practice registered nurses licensed under KRS Chapter 314; and

(g) Other health care practitioners as determined by the department by administrative regulations promulgated under KRS Chapter 13A;

(24) (a) "High-cost condition," pursuant to the Kentucky Guaranteed Acceptance Program, means a covered condition in an individual policy as listed in paragraph (c) of this subsection or as added by the commissioner in accordance with KRS 304.17A-280, but only to the extent that the condition exceeds the numerical score or rating established pursuant to uniform underwriting standards prescribed by the commissioner under paragraph (b) of this subsection that account for the severity of the condition and the cost associated with treating that condition.

(b) The commissioner by administrative regulation shall establish uniform underwriting standards and a score or rating above which a condition is considered to be high-cost by using:

1. Codes in the most recent version of the "International Classification of Diseases" that correspond to the medical conditions in paragraph (c) of this subsection and the costs for administering treatment for the conditions represented by those codes; and

2. The most recent version of the questionnaire incorporated in a national underwriting guide generally accepted in the insurance industry as designated by the commissioner, the scoring scale for which shall be established by the commissioner.

(c) The diagnosed medical conditions are: acquired immune deficiency syndrome (AIDS), angina pectoris, ascites, chemical dependency cirrhosis of the liver, coronary insufficiency, coronary occlusion, cystic fibrosis, Friedreich's ataxia, hemophilia, Hodgkin's disease, Huntington chorea, juvenile diabetes, leukemia, metastatic cancer, motor or sensory aphasia, multiple sclerosis, muscular dystrophy, myasthenia gravis, myotonia, open heart surgery, Parkinson's disease, polycystic kidney, psychotic disorders, quadriplegia, stroke, syringomyelia, and Wilson's disease;

(25) "Index rate" means, for each class of business as to a rating period, the arithmetic average of the applicable base premium rate and the corresponding highest premium rate;

(26) "Individual market" means the market for the health insurance coverage offered to individuals other than in connection with a group health plan. The individual market includes an association plan that is not employer related, issued to individuals on an individually underwritten basis, other than an employer-organized association or a bona fide association, that has been organized and is maintained in good faith for

purposes other than obtaining insurance for its members and that has a constitution and bylaws;

(27) "Insurer" means any insurance company; health maintenance organization; self-insurer or multiple employer welfare arrangement not exempt from state regulation by ERISA; provider-sponsored integrated health delivery network; self-insured employer-organized association, or nonprofit hospital, medical-surgical, dental, or health service corporation authorized to transact health insurance business in Kentucky;

(28) "Insurer-controlled" means that the commissioner has found, in an administrative hearing called specifically for that purpose, that an insurer has or had a substantial involvement in the organization or day-to-day operation of the entity for the principal purpose of creating a device, arrangement, or scheme by which the insurer segments employer groups according to their actual or anticipated health status or actual or projected health insurance premiums;

(29) "Kentucky Access" has the meaning provided in KRS 304.17B-001(17);

(30) "Large group" means:

(a) An employer with fifty-one (51) or more employees; or

(b) An affiliated group with fifty-one (51) or more eligible members;

(31) "Managed care" means systems or techniques generally used by third-party payors or their agents to affect access to and control payment for health care services and that integrate the financing and delivery of appropriate health care services to covered persons by arrangements with participating providers who are selected to participate on the basis of explicit standards for furnishing a comprehensive set of health care services and financial incentives for covered persons using the participating providers and procedures provided for in the plan;

(32) "Market segment" means the portion of the market covering one (1) of the following:

(a) Individual;

(b) Small group;

(c) Large group; or

(d) Association;

(33) "Participant" means any employee or former employee of an employer, or any member or former member of an employee organization, who is or may become eligible to receive a benefit of any type from an employee benefit plan which covers employees of the employer or members of the organization, or whose beneficiaries may be eligible to receive any benefit as established in Section 3(7) of ERISA;

(34) "Preventive services" means medical services for the early detection of disease that are associated with substantial reduction in morbidity and mortality;

(35) "Provider network" means an affiliated group of varied health care providers that is established to provide a continuum of health care services to individuals;

(36) "Provider-sponsored integrated health delivery network" means any provider-sponsored integrated health delivery network created and qualified under KRS 304.17A-300 and KRS 304.17A-310;

(37) "Purchaser" means an individual, organization, employer, association, or the Commonwealth that makes health benefit purchasing decisions on behalf of a group of individuals;

(38) "Rating period" means the calendar period for which premium rates are in effect. A rating period shall not be required to be a calendar year;

(39) "Restricted provider network" means a health benefit plan that conditions the payment of benefits, in whole or in part, on the use of the providers that have entered into a contractual arrangement with the insurer to provide health care services to covered individuals;

(40) "Self-insured plan" means a group health insurance plan in which the sponsoring organization assumes the financial risk of paying for covered services provided to its enrollees;

(41) "Small employer" means, in connection with a group health plan with respect to a calendar year and a plan year, an employer who employed an average of at least two (2) but not more than fifty (50) employees on business days during the preceding calendar year and who employs at least two (2) employees on the first day of the plan year;

(42) "Small group" means:

(a) A small employer with two (2) to fifty (50) employees; or

(b) An affiliated group or association with two (2) to fifty (50) eligible members;

(43) "Standard benefit plan" means the plan identified in KRS 304.17A-250; and

(44) "Telehealth" has the meaning provided in KRS 311.550.

Effective: July 15, 2010

History: Amended 2010 Ky. Acts ch. 24, sec. 1209, effective July 15, 2010; and ch. 85, sec. 46, effective July 15, 2010. -- Amended 2006 Ky. Acts ch. 253, sec. 1, effective July 12, 2006. -- Amended 2005 Ky. Acts ch. 144, sec. 7, effective June 20, 2005. -- Amended 2002 Ky. Acts ch. 351, sec. 1, effective July 15, 2002. -- Amended 2000 Ky. Acts ch. 376, sec. 6, effective July 15, 2001; ch. 476, sec. 17, effective July 14, 2000; and ch. 521, sec. 1, effective July 14, 2000. -- Created 1998 Ky. Acts ch. 496, sec. 1, effective April 10, 1998.

Legislative Research Commission Note (7/15/2010). This section was amended by 2010 Ky. Acts chs. 24 and 85, which do not appear to be in conflict and have been codified together.

EXHIBIT 2

Definition: Insurance Purchasing Outlet

KRS 304.17A-750

304.17A-750 Definitions for KRS 304.17A-750 to 304.17A-770 and 304.47-020.

As used in KRS 304.17A-750 to 304.17A-770 and 304.47-020, unless the context requires otherwise:

(1) "Eligible employee" means any full time or part time employee who is actively engaged in the conduct of business of the employer, who has satisfied any employer waiting period requirements, and who has been given a voucher by the employer to purchase a health benefit plan;

(2) "Eligible person" means an employer, eligible employee, self-employed person, unemployed person, or retiree who is not eligible for Medicare;

(3) "Employer" means any corporation, partnership, sole proprietorship, or other business entity doing business in Kentucky that provides a voucher for a health benefit plan to its eligible employees to purchase a health benefit plan;

(4) "Insurance purchasing outlet" means a business entity licensed as an administrator in accordance with Subtitle 9 of Chapter 304, which collects premiums and vouchers from or on behalf of health purchasing outlet members, and which is issued a certificate of registration in accordance with KRS 304.17A-750 to 304.17A-770 and 304.47-020;

(5) "Insurance purchasing outlet member" means an eligible person, including a dependent of an eligible person, who is enrolled in a health benefit plan offered through an insurance purchasing outlet by a participating insurer;

(6) "Participating insurer" means an authorized insurer that contracts with an insurance purchasing outlet to provide coverage to insurance purchasing outlet members under a health benefit plan; and

(7) "Voucher" means an instrument that is issued to an eligible employee by an employer to purchase a health benefit plan.

Effective: July 15, 2002

History: Created 2002 Ky. Acts ch. 207, sec. 1, effective July 15, 2002.

EXHIBIT 3

Health Benefit Plan Rate Filing Requirements
KRS 304.17-095

304.17A-095 Insurer issuing health benefit plan must file rates and charges -- Commissioner's approval -- Policy forms -- Administrative regulations -- Hearing.

(1) (a) Notwithstanding any other provisions of this chapter to the contrary, each insurer that issues, delivers, or renews any health benefit plan to any market segment other than a large group shall, before use thereof, file with the commissioner its rates, fees, dues, and other charges paid by insureds, members, enrollees, or subscribers. The insurer shall also submit a copy of the filing to the Attorney General and shall comply with the provisions of this section. The insurer shall adhere to its rates, fees, dues, and other charges as filed with the commissioner. The insurer shall submit a new filing to reflect any material change to the previously filed and approved rate filing. For all other changes, the insurer shall submit an amendment to a previously approved rate filing.

(b) Notwithstanding any other provisions of this chapter to the contrary, each insurer that issues, delivers, or renews any health benefit plan to a large group as defined in KRS 304.17A-005 shall file the rating methodology with the commissioner and shall submit a copy of the filing to the Attorney General.

(2) (a) A rate filing under this section may be used by the insurer on and after the date of filing with the commissioner prior to approval by the commissioner. A rate filing shall be approved or disapproved by the commissioner within sixty (60) days after the date of filing. Should sixty (60) days expire after the commissioner receives the filing before approval or disapproval of the filing, the filing shall be deemed approved.

(b) In the circumstances of a filing that has been deemed approved or has been disapproved under paragraph (a) of this subsection, the commissioner shall have the authority to order a retroactive reduction of rates to a reasonable rate if the commissioner subsequently determines that the filing contained misrepresentations or was based on fraudulent information, and if after applying the factors in subsection (3) of this section the commissioner determines that the rates were unreasonable. If the commissioner seeks to order a retroactive reduction of rates and more than one (1) year has passed since the date of the filing, the commissioner shall consider the reasonableness of the rate over the entire period during which the filing has been in effect.

(3) In approving or disapproving a filing under this section, the commissioner shall consider:

(a) Whether the benefits provided are reasonable in relation to the premium or fee charged;

(b) Whether the fees paid to providers for the covered services are reasonable in relation to the premium or fee charged;

(c) Previous premium rates or fees for the policies or contracts to which the filing applies;

(d) The effect of the rate or rate increase on policyholders, enrollees, and subscribers;

(e) Whether the rates, fees, dues, or other charges are excessive, inadequate, or unfairly discriminatory;

(f) The effect on the rates of any assessment made under KRS 304.17B-021; and

(g) Other factors as deemed relevant by the commissioner.

(4) The rates for each policyholder shall be guaranteed for twelve (12) months at the rate in effect on the date of issue or date of renewal.

(5) At any time the commissioner, after a public hearing for which at least thirty (30) days' notice has been given, may withdraw approval of rates or fees previously approved under this section and may order an appropriate refund or future premium credit to policyholders, enrollees, and subscribers if the commissioner determines that the rates or fees previously approved are in violation of this chapter.

(6) Notwithstanding subsection (2) of this section, premium rates may be used upon filing with the department of a policy form not previously used if the filing is accompanied by the policy form filing and a minimum loss ratio guarantee. Insurers may use the filing procedure specified in this subsection only if the affected policy forms disclose the benefit of a minimum loss ratio guarantee. An insurer may not elect to use the filing procedure in this subsection for a policy form that does not contain the minimum loss ratio guarantee. If an insurer elects to use the filing procedure in this subsection for a policy form or forms, the insurer shall not use a filing of premium rates that does not provide a minimum loss ratio guarantee for that policy form or forms.

(a) The minimum loss ratio shall be in writing and shall contain at least the following:

1. An actuarial memorandum specifying the expected loss ratio that complies with the standards as set forth in this subsection;

2. A statement certifying that all rates, fees, dues, and other charges are not excessive, inadequate, or unfairly discriminatory;

3. Detailed experience information concerning the policy forms;

4. A step-by-step description of the process used to develop the experience loss ratio, including demonstration with supporting data;

5. A guarantee of a specific lifetime minimum loss ratio, that shall be greater than or equal to the following, taking into consideration adjustments for duration as set forth in administrative regulations promulgated by the commissioner:

a. Sixty-five percent (65%) for policies issued to individuals or for certificates issued to members of an association that does not offer coverage to small employers;

b. Seventy percent (70%) for policies issued to small groups of two (2) to ten (10) employees or for certificates issued to members of an association that offers coverage to small employers; and

c. Seventy-five percent (75%) for policies issued to small groups of eleven (11) to fifty (50) employees;

6. A guarantee that the actual Kentucky loss ratio for the calendar year in which the new rates take effect, and for each year thereafter until new rates are filed, will meet or exceed the minimum loss ratio standards referred to in subparagraph 5. of this paragraph, adjusted for duration;

7. A guarantee that the actual Kentucky lifetime loss ratio shall meet or exceed the minimum loss ratio standards referred to in subparagraph 5. of this paragraph; and

8. If the annual earned premium volume in Kentucky under the particular policy form is less than two million five hundred thousand dollars ($2,500,000), the minimum loss ratio guarantee shall be based partially on the Kentucky earned premium and other credibility factors as specified by the commissioner.

(b) The actual Kentucky minimum loss ratio results for each year at issue shall be independently audited at the insurer's expense and the audit shall be filed with the commissioner not later than one hundred twenty (120) days after the end of the year at issue. The audit shall demonstrate the calculation of the actual Kentucky loss ratio in a manner prescribed as set forth in administrative regulations promulgated by the commissioner.

(c) The insurer shall refund premiums in the amount necessary to bring the actual loss ratio up to the guaranteed minimum loss ratio.

(d) A Kentucky policyholder affected by the guaranteed minimum loss ratio shall receive a portion of the premium refund relative to the premium paid by the policyholder. The refund shall be made to all Kentucky policyholders insured under the applicable policy form during the year at issue if the refund would equal ten dollars ($10) or more per policy. The refund shall include statutory interest from July 1 of the year at issue until the date of payment. Payment shall be made not later than one hundred eighty (180) days after the end of the year at issue.

(e) Premium refunds of less than ten dollars ($10) per insured shall be aggregated by the insurer and paid to the Kentucky State Treasury.

(f) None of the provisions of subsections (2) and (3) of this section shall apply if premium rates are filed with the department and accompanied by a minimum loss ratio guarantee that meets the requirements of this subsection. Such filings shall be deemed approved. Each insurer paying a risk assessment under KRS 304.17B-021 may include the amount of the assessment in establishing premium rates filed with the commissioner under this section. The insurer shall identify any assessment allocated.

(g) The policy form filing of an insurer using the filing procedure with a minimum loss ratio guarantee will disclose to the enrollee, member, or subscriber as prescribed by the commissioner an explanation of the lifetime

loss ratio guarantee, and the actual loss ratio, and any adjustments for duration.

(h) The insurer who elects to use the filing procedure with a minimum loss ratio guarantee shall notify all policyholders of the refund calculation, the result of the refund calculation, the percent of premium on an aggregate basis to be refunded if any, any amount of the refund attributed to the payment of interests, and an explanation of amounts less than ten dollars ($10).

(i) Notwithstanding the provisions of this subsection, an insurer may amend the policy forms used before March 31, 2005, or may amend the minimum loss ratio guarantee on policy forms filed with the department and used by the insurer prior to March 31, 2005, to provide for a minimum loss ratio guarantee allowed under this subsection for policies issued, delivered, or renewed on or after March 31, 2005.

(7) The commissioner may by administrative regulation prescribe any additional information related to rates, fees, dues, and other charges as they relate to the factors set out in subsection (3) of this section that he or she deems necessary and relevant to be included in the filings and the form of the filings required by this section. When determining a loss ratio for the purposes of loss ratio guarantee, the insurer shall divide the total of the claims incurred, plus preferred provider organization expenses, case management and utilization review expenses, plus reinsurance premiums less reinsurance recoveries by the premiums earned less state and local premium taxes less other assessments. For purposes of determining the loss ratio for any loss ratio guarantee pursuant to this section, the commissioner may examine the insurer's expenses for preferred provider organization, case management, utilization review, and reinsurance used by the insurer in calculating the loss ratio guarantee for reasonableness. Only those expenses found to be reasonable by the commissioner may be used by the insurer for determining the loss ratio for purposes of any loss ratio guarantee.

(8) (a) The commissioner shall hold a hearing upon written request by the Attorney General. The written request shall be based upon one (1) or more of the reasons set out in subsection (3) of this section and shall state the applicable reasons.

(b) An insurer may request a hearing, pursuant to KRS 304.2-310, with regard to any action taken by the commissioner under this section as to the disapproval of rates or an order of a retroactive reduction of rates.

(c) The hearing shall be a public hearing conducted in accordance with KRS 304.2-310.

Effective: July 15, 2010

History: Amended 2010 Ky. Acts ch. 24, sec. 1212, effective July 15, 2010. -- Amended 2005 Ky. Acts ch. 183, sec. 2, effective March 31, 2005. -- Amended 2004 Ky. Acts ch. 59, sec. 3, effective July 13, 2004. -- Amended 2002 Ky. Acts ch. 351, sec. 3, effective July 15, 2002. -- Amended 2000 Ky. Acts ch. 476, sec. 25, effective January 1, 2001; and 2000 Ky. Acts ch. 521, sec. 14, effective July 14, 2000. -- Amended 1998 Ky. Acts ch. 496, sec. 9, effective April 10, 1998. -- Created 1996 Ky. Acts ch. 371, sec. 16, effective July 15, 1996.

EXHIBIT 4

Premium Rate Guidelines for Individual, Small Group, and Association Plans

KRS 304.17A-0952

304.17A-0952 Premium rate guidelines for individual, small group, and association plans.

Premium rates for a health benefit plan issued or renewed to an individual, a small group, or an association on or after April 10, 1998, shall be subject to the following provisions:

(1) The premium rates charged during a rating period to an individual with similar case characteristics for the same coverage, or the rates that could be charged to that individual under the rating system for that class of business, shall not vary from the index rate by more than thirty-five percent (35%) of the index rate upon any policy issuance or renewal, on or after January 1, 2003.

(2) Notwithstanding the thirty-five percent (35%) variance limitation in subsection (1) of this section, insurers offering an individual health benefit plan that is state-elected under sec. 35(e)(1)F of the Trade Act of 2002, Pub. L. No. 107-210 sec. 201, may vary from the index rate by more than thirty-five percent (35%) for individuals who are eligible for the health coverage tax credit under the following conditions:

   (a) The insurer certifies that the individual does not meet the insurer's underwriting guidelines for issuance of an individual policy;

   (b) The policy meets the requirements for state-elected coverage under the Trade Act of 2002; and

   (c) The premium rate is actuarially justified and has been approved by the Department of Insurance pursuant to KRS 304.17A-095.

(3) The percentage increase in the premium rate charged to an individual for a new rating period shall not exceed the sum of the following:

   (a) The percentage change in the new business premium rate measured from the first day of the prior rating period to the first day of the new rating period. In the case of a class of business for which the insurer is not issuing new policies, the insurer shall use the percentage change in the base premium rate;

   (b) Any adjustment, not to exceed twenty percent (20%) annually and adjusted pro rata for rating periods of less than one (1) year, due to the claim experience, mental and physical condition, including medical condition, medical history, and health service utilization, or duration of coverage of the individual and dependents as determined from the insurer's rate manual for the class of business; and

   (c) Any adjustment due to change in coverage or change in the case characteristics of the individual as determined from the insurer's rate manual for the class of business.

(4) The premium rates charged during a rating period to a small group or to an association member with similar case characteristics for the same coverage, or the rates that could be charged to that small group or that association member under the rating system for that class of business, shall not vary from the index rate by more than fifty percent (50%) of the index rate.

(5) The percentage increase in the premium rate charged to a small group or to an association member for a new rating period shall not exceed the sum of the following:

(a) The percentage change in the new business premium rate measured from the first day of the prior rating period to the first day of the new rating period. In the case of a class of business for which the insurer is not issuing new policies, the insurer shall use the percentage change in the base premium rate;

(b) Any adjustment, not to exceed twenty percent (20%) annually and adjusted pro rata for rating periods of less than one (1) year, due to the claims experience, mental and physical condition, including medical condition, medical history, and health service utilization, or duration of coverage of the employee, association member, or dependents as determined from the insurer's rate manual for the class of business; and

(c) Any adjustment due to change in coverage or change in the case characteristics of the small group or association member as determined from the insurer's rate manual for the class of business.

(6) In utilizing case characteristics, the ratio of the highest rate factor to the lowest rate factor within a class of business shall not exceed five to one (5:1). For purpose of this limitation, case characteristics include age, gender, occupation or industry, and geographic area.

(7) Adjustments in rates for claims experience, mental and physical condition, including medical condition, medical history, and health service utilization, health status, and duration of coverage shall not be charged to an individual group member or the member's dependents. Any adjustment shall be applied uniformly to the rates charged for all individuals and dependents of the small group.

(8) The commissioner may approve establishment of additional classes of business upon application to the commissioner and a finding by the commissioner that the additional class would enhance the efficiency and fairness for the applicable market segment.

(a) The index rate for a rating period for any class of business shall not exceed the index rate for any other class of business in that market segment by more than ten percent (10%).

(b) An insurer may establish a separate class of business only to reflect substantial differences in expected claims experience or administrative cost related to the following reasons:

1. The insurer uses more than one (1) type of system for the marketing and sale of the health benefit plans;
2. The insurer has acquired a class of business from another insurer; or
3. The insurer is offering a state-elected plan under the provisions of the Trade Act of 2002, Pub. L. No. 107-210 sec. 201.

(c) Notwithstanding any other provision of this subsection, beginning January 1, 2001, a GAP participating insurer may establish a separate class of business for the purpose of separating guaranteed acceptance program qualified

individuals from other individuals enrolled in their plan prior to January 1, 2001. The index rate for the separate class created under this paragraph shall be established taking into consideration expected claims experience and administrative costs of the new class of business and the previous class of business.

(9) For the purpose of this section, a health benefit plan that utilizes a restricted provider network shall not be considered similar coverage to a health benefit plan that does not utilize a restricted provider network if utilization of the restricted provider network results in substantial differences in claims costs.

(10) Notwithstanding any other provision of this section, an insurer shall not be required to utilize the experience of those individuals with high-cost conditions who enrolled in its plans between July 15, 1995, and April 10, 1998, to develop the insurer's index rate for its individual policies.

(11) Nothing in this section shall be construed to prevent an insurer from offering incentives to participate in a program of disease prevention or health improvement.

Effective: July 15, 2010

History: Amended 2010 Ky. Acts ch. 24, sec. 1213, effective July 15, 2010. -- Amended 2004 Ky. Acts ch. 168, sec. 1, effective April 21, 2004. -- Amended 2002 Ky. Acts ch. 351, sec. 15, effective July 15, 2002. -- Amended 2000 Ky. Acts ch. 476, sec. 19, effective January 1, 2001. -- Created 1998 Ky. Acts ch. 496, sec. 10, effective April 10, 1998.

EXHIBIT 5

Premium Rate Guidelines for
Employer-Organized Association Plans
KRS 304.17A-0954

304.17A-0954 Definitions for section -- Premium rate guidelines for employer-organized association plans.

(1) For purposes of this section:

(a) "Base premium rate" has the meaning provided in KRS 304.17A-005;

(b) "Employer" means a person engaged in a trade or business who has two (2) or more employees within the state in each of twenty (20) or more calendar weeks in the current or preceding calendar year;

(c) "Employer-organized association" means any of the following:

1. Any entity which was qualified by the commissioner as an eligible association prior to April 10, 1998, and which has actively marketed a health insurance program to its members after September 8, 1996, and which is not insurer-controlled;

2. An entity organized under KRS 247.240 to 247.370 that has actively marketed health insurance to its members and which is not insurer-controlled; or

3. Any entity which is a bona fide association as defined in 42 U.S.C. sec. 300gg-91(d)(3), whose members consist principally of employers, and for which the entity's health insurance decisions are made by a board or committee the majority of which are representatives of employer members of the entity who obtain group health insurance coverage through the entity or through a trust or other mechanism established by the entity, and whose health insurance decisions are reflected in written minutes or other written documentation;

(d) "Index rate" has the meaning provided in KRS 304.17A-005.

(2) Notwithstanding any other provision of this chapter, the amount or rate of premiums for an employer-organized association health plan may be determined, subject to the restrictions of subsection (3) of this section, based upon the experience or projected experience of the employer-organized associations whose employers obtain group coverage under the plan. Without the written consent of the employer-organized association filed with the commissioner, the index rate for the employer-organized association shall be calculated solely with respect to that employer-organized association and shall not be tied to, linked to, or otherwise adversely affected by any other index rate used by the issuing insurer.

(3) The following restrictions shall be applied in calculating the permissible amount or rate of premiums for an employer-organized health insurance plan:

(a) The premium rates charged during a rating period to members of the employer-organized association with similar characteristics for the same or similar coverage, or the premium rates that could be charged to a member of the employer-organized association under the rating system for that class of business, shall not vary from its own index rate by more than fifty percent (50%) of its own index rate; and

(b) The percentage increase in the premium rate charged to an employer member of an employer-organized association for a new rating period shall not exceed the sum of the following:

1. The percentage change in the new business premium rate for the employer-organized association measured from the first day of the prior rating period to the first day of the new rating period;
2. Any adjustment, not to exceed twenty percent (20%) annually and adjusted pro rata for rating period of less than one (1) year, due to the claims experience, mental and physical condition, including medical condition, medical history, and health service utilization, or duration of coverage of the member as determined from the insurer's rate manual; and
3. Any adjustment due to change in coverage or change in the case characteristics of the member as determined by the insurer's rate manual.

(4) In utilizing case characteristics, the ratio of the highest rate factor to the lowest rate factor within a class of business shall not exceed five to one (5:1). For purpose of this limitation, case characteristics include age, gender, occupation or industry, and geographic area.

(5) For the purpose of this section, a health insurance contract that utilizes a restricted provider network shall not be considered similar coverage to a health insurance contract that does not utilize a restricted provider network if utilization of the restricted provider network results in measurable differences in claims costs.

Effective: July 15, 2010

History: Amended 2010 Ky. Acts ch. 24, sec. 1214, effective July 15, 2010. -- Amended 2002 Ky. Acts ch. 351, sec. 16, effective July 15, 2002. -- Amended 2000 Ky. Acts ch. 476, sec. 27, effective January 1, 2001. -- Created 1998 Ky. Acts ch. 496, sec. 11, effective April 10, 1998.

EXHIBIT 6

Health Benefit Plan Rate Filing Requirements
806 KAR 17:150

806 KAR 17:150. Health benefit plan rate filing requirements.

RELATES TO: KRS 304.1-050, 304.3-270, 304.4-010, 304.17A-005, 304.17A-095, 304.17A-0952, 304.17A-0954, 304.17A-096, 304.17A-132, 304.17A-134, 304.17A-139, 304.17A-149, 304.17A-410, 304.17A-430, 304.17A-450, 304.17A-500, 304.17A-750, 304.17B-021, 304.17B-023(3)

STATUTORY AUTHORITY: KRS 304.2-110(1), 304.17A-095(7)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 304.2-110(1) authorizes the Executive Director of Insurance to promulgate administrative regulations necessary for or as an aid to the effectuation of any provision of the Kentucky Insurance Code, as defined by KRS 304.1-010. KRS 304.17A-095(7) authorizes the executive director to promulgate an administrative regulation to obtain relevant information for health benefit plan rate filings and establish the format of the filings. This administrative regulation establishes the format and procedure for the submission of a health benefit plan rate filing.

Section 1. Definitions. (1) "Base new business rate" means the premium rate for each product benefit plan for each class of business, prior to any adjustment for case characteristics or health status.

(2) "Base new business rate change" means:

(a) For a product benefit plan, the percentage change in the base new business rate measured from the first day of the prior rating period to the first day of the proposed rating period; and

(b) For a product within a market segment class of business, the percentage change equal to the premium weighted average base new business rate change for all of the product benefit plans within that market segment class of business.

(3) "Base premium rate" is defined in KRS 304.17A-005(3).

(4) "Basic health benefit plan" is defined in KRS 304.17A-005(4).

(5) "Class of business" means all or a distinct grouping of small employers or individuals as shown on the records of the small employer or individual insurance carrier.

(6) "Covered person" is defined in KRS 304.17A-500(3).

(7) "Date of filing" means the date the office confirms that the appropriate filing fee and all information required by this administrative regulation have been received by the office.

(8) "Duration" means a policy year of twelve (12) months, measured from the date of issuance of a policy, with each succeeding twelve (12) month period being a new duration.

(9) "Employer-organized association" is defined in KRS 304.17A-0954(1)(c).

(10) "Executive director" is defined in KRS 304.1-050(1).

(11) "FFS" means a fee for service product type.

(12) "Guaranteed Acceptance Program" or "GAP" is defined in KRS 304.17A-005(19).

(13) "Health benefit plan" is defined in KRS 304.17A-005(22).

(14) "Health benefit plan region" or "geographic region" means each one (1) of the eight (8) allowable rating regions for health benefit plans identified in HIPMC-R33, Health Benefit Plan Regions, which is incorporated by reference in 806 KAR 17:005.

(15) "HMO" means a health maintenance organization product type.

(16) "Index rate" is defined in KRS 304.17A-005(25).

(17) "Insurance purchasing outlet" is defined in KRS 304.17A-750(4).

(18) "Large group" is defined in KRS 304.17A-005(30).

(19) "Material change" means any change to a rate filing, except that a change in value of an existing rate factor other than trend shall not be considered a material change.

(20) "Office" is defined in KRS 304.1-050(2).

(21) "POS" means a point of service product type.

(22) "PPO" means a preferred provider organization product type.

(23) "Small group" is defined in KRS 304.17A-005(42).

(24) "Target loss ratio" means a loss ratio that an insurer files, which projects and guarantees a loss ratio on an annual basis.

Section 2. Scope. (1) A health benefit plan rate filing to which the standards of KRS 304.17A-095 apply, shall include the information required by Sections 3 through 10 of this administrative regulation.

(2) The period of time in which the executive director shall approve or disapprove a filing shall not begin until the date of filing.

(3) An insurer shall not market or use the proposed rates until the date of filing.

(4) A filing and fee shall not be deemed received until the office confirms that:

(a) Information required by Sections 3 through 10 of this administrative regulation has been received; and

(b) The appropriate fee, as set forth in 806 KAR 4:010, has been paid.

Section 3. Health Benefit Plan Rate Filing Procedures. (1) A health benefit plan rate filing shall be submitted to the office for a:

(a) New rate filing; or

(b) Material change to a previously approved rate filing.

(2) The following shall be included and properly completed in a health benefit plan rate filing submission:

(a) Form HIPMC-R32, the Health Benefit Rate Filing Information Form, which is incorporated by reference in 806 KAR 17:005;

(b) The following filing fee or the domiciliary state fee, whichever is greater:

1. $100 for an original or new filing; or

2. Fifty (50) dollars for an amendment to a filing;

(c) Form HIPMC-F1, Face Sheet and Verification Form, which is incorporated by reference in 806 KAR 17:005;

(d) Signed actuarial memorandum prepared in accordance with Sections 6 and 7 of this administrative regulation;

(e) An Income and Expense Worksheet, which is incorporated by reference in 806 KAR 17:005;

(f) Except for large groups, Certification Form HIPMC-R34, which is incorporated by reference in 806 KAR 17:005; and

(g) If a rate for a basic health benefit plan is included, Form HIPMC-RF-25, Basic Health Benefit Plan Summary Sheet-Form and Rate Filings, which is incorporated by reference in 806 KAR 17:005.

(3) Two (2) copies of all written material shall be submitted to the office.

(4) One (1) copy of all written material shall be submitted to the Kentucky Attorney General's Office by the insurer at the same time as the submission to the office and shall include:

(a) An amendment;

(b) An update; or

(c) A response to an inquiry from the office.

(5) Two (2) copies of all correspondence with the office or other state agency concerning a filing shall be submitted to the office.

(6) A photocopy of the most recent annual financial report shall be attached to the filing as an exhibit.

Section 4. Filing Format. (1) A separate health benefit plan rate filing shall be submitted for each market segment as follows:
(a) Individual;
(b) Small group;
(c) Association;
(d) Large group; and
(e) Except as otherwise authorized pursuant to KRS 304.17A-0954(2), each employer-organized association.
(2) A large group rate filing may include each product type offered as follows:
(a) FFS;
(b) PPO;
(c) POS; and
(d) HMO.
(3) A rate filing for a market segment other than large group may be submitted separately for each product type listed in subsection (2) of this section or in the following combinations:
(a) FFS and PPO; or
(b) POS, HMO, and PPO.

Section 5. Employer-organized Association Rate Filings. (1)(a) An employer-organized association rate filing shall include the name of each employer-organized association that generated the rating experience contained in the filing; and
(b) If more than one (1) employer-organized association is named in the filing as identified in paragraph (a) of this subsection and each employer-organized association provides the insurer with written permission to have rates based on experience other than its own, the insurer:
1. May have the experience of all employer-organized associations named in the filing combined for rate determination; and
2. Shall include proposed rates for the combination of associations in one (1) filing.
(2) Each employer-organized association rate filing shall contain documentation demonstrating that the entity is an employer-organized association pursuant to KRS 304.17A-0954(1)(c).
(3) If an insurer is proposing to begin marketing a health benefit plan to an employer-organized association, a rate filing may be based on the standard plan benefits, including appropriate formulas and rate factors within the limitations outlined in KRS 304.17A-0954. The filing shall include:
(a) Factors for all plans to be offered; and
(b) A detailed description of the methodology for incorporating the actual experience of an employer-organized association in determining rates for that association.
(4) If the insurer receives written permission from an employer-organized association regarding combining experience with other employer-organized associations, the insurer shall submit two (2) copies of the written permission to the executive director with the rate filing. The written permission shall include the following:
(a) A statement giving the insurer permission to rate the employer-organized association on experience other than the employer-organized association's own experience;
(b) Name, address, and telephone number of the employer-organized association giving permission to the insurer;
(c) Name, address, and telephone number of the insurer to which permission is given;
(d) Month, day, and year that permission is given to the insurer; and
(e) Number of eligible association members.

Section 6. Actuarial Memorandum. (1) The actuarial memorandum for each rate filing shall be prepared in accordance with the following:
(a) Actuarial Standard of Practice No. 8, Regulatory Filings for Rates and Financial Projections for Health Plans (Doc. No. 010, 1990 Edition), American Academy of Actuaries;
(b) Actuarial Standard of Practice No. 26, Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans (Doc. No. 052, adopted October, 1996), American Academy of Actuaries;
(c) Actuarial Standard of Practice No. 31, Documentation in Health Benefit Plan Ratemaking (Doc. No. 060, adopted October, 1997), American Academy of Actuaries; and
(d) Actuarial Standard of Practice No. 41, Actuarial Communication (Doc. No. 086, adopted March, 2002), American Academy of Actuaries.
(2) The actuarial memorandum for a rate filing, other than a large group rate filing, shall include the following:
(a) Qualifications of the signing actuary;
(b) A statement identifying the date that the proposed rates shall be used;
(c) A discussion of the rate development, which shall include a detailed explanation of the following:
1. The effects of each of the following mandated benefits which shall include the percentage cost and actual dollars attributable to the rates and the number of policyholders who are affected:
a. For benefit plans offering pharmacy benefits, coverage for amino acid modified preparations and low-protein modified food products for the treatment of inherited metabolic disorders in accordance with KRS 304.17A-139(4);
b. Hearing aids and related services in accordance with KRS 304.17A-132;
c. Anesthesia and hospital or ambulatory surgical facility services in connection with dental procedures in accordance with KRS 304.17A-149; and
d. Medical and surgical benefits with respect to mastectomies pursuant to KRS 304.17A-134;
2. The claim cost development, which shall include an explanation of the following:
a. Methodology;
b. Assumptions including the following:
(i) Trend, including supporting analysis, which supports the trend level selected;
(ii) Benefit change;
(iii) Utilization or cost-per-service change;
(iv) Demographic change;
(v) Change in medical management;
(vi) Change in provider contracts; and
(vii) Any other assumption used by the actuary in the claim cost development; and
c. Experience by month, including exposures or members, earned premium, paid claims, incurred claims, and incurred loss ratio, for the past three (3) years for this product, or for a similar product if this filing is for a new product;
3.a. Development and printout of the following shall be shown by age, gender, and tier combination using the lowest industry factor and

the lowest area factor, and separately using the highest industry factor and highest area factor:
(i) Base premium rates;
(ii) Index rates;
(iii) Corresponding highest premium rates; and
(iv) If offered, any applicable GAP premium rates for the standard plan option.
b. If the filing contains more than one (1) product type, a development and printout as identified and described in clause a of this subparagraph for each product type separately.
c. If the filing contains proposed rates for more than one (1) class of business, a development and printout as identified and described in clauses a and b of this subparagraph for each class of business separately;
4. For an insurer that has existing GAP enrollees:
a. Index rates for the non-GAP classes of business may be set by excluding the experience of the GAP enrollees;
b. Index rates for the GAP class of business shall be set by considering the block of experience for the new GAP class of business and the former class of business, which included GAP enrollees; and
c. Rates for the GAP class of business may not exceed 150 percent of the index rates established in clause b of this subparagraph;
5. Factors used for each case characteristic, including age, gender, industry or occupation, and geographic region, with a separate summary of the maximum factor and the minimum factor for each case characteristic.
a. A health benefit plan region other than the eight (8) identified in HIPMC-R33, Health Benefit Plan Regions, which is incorporated by reference in 806 KAR 17:005, shall not be used for a geographic region factor adjustment; and
b. Any healthy lifestyle discount factor, if applicable, shall be included and an explanation of the determination of that factor, and the condition under which that factor is applicable;
6. The anticipated pricing loss ratio, including a detailed justification of load factors, including percentages allocated for the:
a. Administrative expense assumption, including an explanation of:
(i) Any change from the factor used for existing rates; and
(ii) How these costs are allocated among each benefit plan design, including demonstrative documentation as an exhibit;
b. Commission assumption, including an explanation for any change from the factor used for existing rates;
c. Federal, state, and local government tax assumptions, including an explanation for a change from the factor used for existing rates;
d. Investment income assumption, including an explanation for any change from the factor used for existing rates;
e. Profit and contingency assumption, including an explanation for a change from the factor used for existing rates;
f. Assessments pursuant to KRS 304.17B-021; and
g. Other identified load factors;
(d) A detailed explanation, including an example of the following:
1. The method for determining a small group composite rate;
2. The conditions under which a small group composite rate is recalculated; and
3. The group size that is eligible for a composite rate calculation;
(e) Each health benefit plan description and the applicable benefit factor adjustment, or other methods of calculating rates for a different benefit plan if the method is not multiplicative, for each benefit plan to which this filing applies;
(f) Detailed discussion of the manner in which the projected amount of net assessments and payments under KRS 304.17B-021 and 304.17B-023(3) used in establishing the proposed rates in the filing as required by KRS 304.17A-095;
(g) Information regarding how fees are paid to providers as follows:
1. Justification of fees paid to providers in relation to the rate requested, including any assumption used regarding provider discounts in the rate filing; and
2. Average discount to providers during experience period and average discount for physician payments, hospital payments, laboratory payments, pharmacy payments, mental health payments, and other payments for the rate filing period;
(h) If a trend rate is used, include the time period to which the trend applies, not to exceed twelve (12) months, and the applicable annual trend rate and the periodicity of the factor;
(i) Explanation of the anticipated effect of the requested rates on the current policyholders, subscribers, or enrollees;
(j) Information regarding each class of business, which shall include:
1. Identification of each class of business;
2. Justification of each separate class of business; and
3. A demonstration that each index rate for the class of business with the highest index rates is within ten (10) percent of the corresponding index rate from the class of business with the lowest index rates, excluding a GAP class of business; and
(k) Prospective certification of the following, which shall be filed as an attachment to the actuarial memorandum for a rate filing other than a large group filing, and signed by the qualified actuary who prepared and signed the actuarial memorandum:
1. That the information is prepared in accordance with American Academy of Actuaries Actuarial Standard of Practice No. 26, Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans, applicable to the following markets:
a. Individual;
b. Association; and
c. Small group; and
2. That the proposed rates meet the requirements of KRS 304.17A-0952 or 304.17A-0954, as applicable.

Section 7. Large Group Rate Filings. (1) The actuarial memorandum for a large group rate filing shall include the following information:
(a) The information identified in Section 6(2)(a), (b), (c)1, 2, 6, (f), (g), (h) and (i) of this administrative regulation;
(b) Development of rating basis, including each adjustment for the following:
1. Age;
2. Gender;
3. Family composition;
4. Benefit plan;
5. Industry;
6. Healthy lifestyle; and
7. Any other adjustment included in the development;
(c) A formula for new and renewal business, including a definition of each term used in the formula;
(d) Credibility criteria used in conjunction with experience rating;
(e) Detailed explanation of a change in the manual rating formula or experience rating formula;
(f) Detailed explanation of a change in factors that would be used in a formula;
(g) Any periodic trend rate applied in the formula;

(h) The composite effect of a change in formula and formula factors; and
(i) Detailed explanation of any trend assumption used in experience rating.
(2) Certification Form HIPMC-R34, Certification Form, incorporated by reference in 806 KAR 17:005, shall not be required for a large group rate filing.

Section 8. Guaranteed Loss Ratio Filing for New Products or Products without Credible Experience. (1) A filing accompanied by a guaranteed loss ratio statement shall meet all requirements of KRS 304.17A-095(6).
(2) Individual, small group, and employer-organized association market filings shall meet the following requirements regarding guaranteed loss ratios by duration:
(a) The guaranteed loss ratio for the first duration shall not be less than sixty (60) percent of the guaranteed lifetime loss ratio specified in the policy.
1. Expected loss ratios may vary by month within the first duration; and
2. The average of the loss ratios for all months shall be equal to the guaranteed loss ratio for the first duration;
(b) The guaranteed loss ratio for a specific duration shall not be less than the guaranteed loss ratio for the previous duration;
(c) The guaranteed loss ratio for the third duration shall not be less than the guaranteed lifetime loss ratio identified in the policy;
(d) The average of the first six (6) guaranteed loss ratios by duration shall not be less than the guaranteed lifetime loss ratio identified in the policy;
(e) The guaranteed lifetime loss ratio shall not be less than that identified in KRS 304.17A-095(6)(a)5; and
(f) The guaranteed loss ratios by duration shall be guaranteed for any policy issued under the policy form and shall be identified in the policy.
(3) A refund shall be calculated pursuant to the following formula:
(a) Refundable premium for any year shall be the sum of the current year's refundable premium for each duration. Each duration's refundable premium shall be calculated by subtracting the three (3) items in subparagraphs 1, 2, and 3 of this paragraph from the current year's earned premium by duration and multiplying the result by the ratio of earned premium by duration and earned premium by duration minus the items identified in subparagraphs 1 and 2 of this paragraph and minus any premium related expenses identified in subparagraph 3 of this paragraph:
1. State and local premium taxes allocated to that duration;
2. Assessments pursuant to KRS 304.17B-021 allocated to that duration; and
3. The sum of incurred claims, preferred provider organization expenses, case management and utilization review expenses, and reinsurance premiums, minus reinsurance recoveries, allocated to that duration, divided by the guaranteed loss ratio in the policy, for that duration;
(b) If the annual earned premium is less than $2,500,000, the minimum refund shall be calculated by refundable premium multiplied by the annual earned premium, divided by $2,500,000;
(c) If the annual earned premium is equal to or greater than $2,500,000, the minimum refund shall be the refundable premium;
(d) The refund to be paid to a policyholder pursuant to KRS 304.17A-095(6)(d) shall be calculated by dividing the earned premium for that policyholder by the total earned premium for the year, and multiplying that percentage of the aggregate refund of the policy form by the aggregate refund; and
(e) The amount of the refund shall include the computation of interest in accordance with KRS 304.17A-095(6)(d) in determining whether payment shall be made to the policyholder or to the Kentucky State Treasurer.
(4) An audit shall be conducted in accordance with KRS 304.17A-095(6)(b), which shall include the following:
(a) Guaranteed lifetime loss ratio;
(b) Guaranteed loss ratios by duration;
(c) Analysis of prior year estimated items, including uncollected premiums and unpaid claim liabilities, and description of method of allocation by duration;
(d) Earned premium by duration and description of method of allocation by duration;
(e) State premium tax by duration and description of method of allocation by duration;
(f) Local premium tax by duration and description of method of allocation by duration;
(g) Assessments by duration and description of the method of allocation by duration;
(h) Incurred claims by duration and description of method of allocation by duration;
(i) Preferred provider organization expenses and description of method of allocation by duration;
(j) Case management and utilization review expenses and description of method of allocation by duration;
(k) Reinsurance premiums less reinsurance recoveries and description of method of allocation by duration;
(l) A description of reinsurance and identity of reinsurer;
(m) A statement that incurred claims do not include administrative expenses, late payment charges, punitive damages, legal fees, or any other related administration expenses;
(n) A statement that incurred claims have been reduced for the full amount of all provider discounts, rebates, coordination of benefits savings, subrogation savings, and any other savings;
(o) A statement of refund checks not being issued before approval of the audit;
(p) Calculation of minimum refundable premium, actual refunded premium, and refund carryover;
(q) Calculation of percent of earned premium that shall be refunded;
(r) Method used to calculate a policyholder's actual refund;
(s) Historical experience for the policy form since inception;
(t) Auditor's certification; and
(u) Actuarial certification.
(5) An initial rate filing shall be a formal filing, and a subsequent rate filing may be submitted by actuarial certification.

Section 9. Minimum Guaranteed Loss Ratio Requirements for an Amended Policy Form or a Previously Filed Minimum Guaranteed Loss Ratio. (1) If amending a policy form or a previously filed minimum guaranteed loss ratio, a filing accompanied by a guaranteed loss ratio statement shall meet the requirements of KRS 304.17A-095(6).
(2)(a) An insurer shall provide a minimum guaranteed loss ratio statement each time rates are amended for a policy form or if amending a previously filed minimum guaranteed loss ratio. The statement shall identify amounts by which rates are amended and include an actuarial certification verifying that rates continue to meet the requirements of the minimum guaranteed loss ratio; and
(b) Most recently filed with the office.
(3) The initial rate filing and subsequent statements shall include an actuarial certification, which includes information to demonstrate meeting the requirements of KRS 304.17A-0952 and Section 6 of this administrative regulation.
(4)(a) The currently approved loss ratio on file with the office under a prior approval process or a minimum guaranteed loss ratio shall be

deemed a reasonable loss ratio for any amended policy forms or amended minimum guaranteed loss ratios; and

(b) Rate filings requesting a change in the previously approved loss ratio shall require documented evidence to demonstrate increased administrative cost or other evidence that the insurer would not be able to achieve previously approved profitability targets.

(5) If experience is filed by duration pursuant to Section 8(2) of this administrative regulation, a refund shall be calculated in accordance with Section 8(3) of this administrative regulation.

(6) If experience is filed by utilizing a target loss ratio and the actual achieved loss ratio is less than the target loss ratio, a refundable premium shall be determined as follows:

(a) Refundable premium shall be equal to the annual earned premium multiplied by the percentage by which the target loss ratio exceeds the actual achieved loss ratio;

(b)1. If the annual earned premium is equal to or greater than $2,500,000, the minimum refundable premium shall be equal to the refundable premium as established in paragraph (a) of this subsection; or

2. If the annual earned premium is less than $2,500,000, the:

a. Minimum refundable premium shall be equal to the refundable premium multiplied by the ratio of the annual earned premium divided by $2,500,000;

b. Refund carryover shall be equal to any amount by which the refundable premium exceeds the minimum refundable premium; and

c. Refundable premium in the subsequent year shall be the sum of the refund carryover plus the calculated refundable premium for the subsequent year;

(c) The refund to be paid to a policyholder pursuant to KRS 304.17A-095(6)(d) shall be calculated by dividing the earned premium for that policyholder by the total earned premium for the year, and multiplying that percentage of the aggregate refund of the policy form by the aggregate refund; and

(d) The amount of the refund shall include the computation of interest in accordance with KRS 304.17A-095(6)(d) in determining whether payment shall be made to the policyholder or to the Kentucky State Treasurer.

(7) If experience is filed by duration, an audit shall be conducted in accordance with Section 8(4) of this administrative regulation.

(8) If experience is filed by target loss ratio, an audit shall be conducted in accordance with KRS 304.17A-095(6)(b), which shall include the following:

(a) Guaranteed lifetime loss ratio;
(b) Actual loss ratio;
(c) Analysis of prior year estimated items, including uncollected premiums and unpaid claim liabilities;
(d) Earned premium;
(e) State premium tax;
(f) Local premium tax;
(g) Assessments;
(h) Incurred claims;
(i) Preferred provider organization expenses;
(j) Case management and utilization review expenses;
(k) Reinsurance premiums less reinsurance recoveries;
(l) A description of reinsurance and identity of reinsurer;
(m) A statement that incurred claims do not include administrative expenses, late payment charges, punitive damages, legal fees, or any other related administration expenses;
(n) A statement that incurred claims have been reduced for the full amount of all provider discounts, rebates, coordination of benefits savings, subrogation savings, and any other savings;
(o) A statement of refund checks not being issued before approval of the audit;
(p) Calculation of minimum refundable premium, actual refunded premium, and refund carryover;
(q) Calculation of percent of earned premium that is to be refunded;
(r) Method used to calculate a policyholder's actual refund;
(s) Historical experience for the policy form since inception;
(t) An auditor's certification; and
(u) An actuarial certification.

(9) An initial rate filing shall be a formal filing, and a subsequent rate filing may be by actuarial certification.

(10) An initial rate filing shall be required for insurers electing to file under a minimum guaranteed loss ratio pursuant to KRS 304.17A-095 (6).

Section 10. Amendments to Previously Approved Rate Filings. (1) For any change that is not a material change, an insurer shall submit an amendment to a rate filing previously approved by the office, which shall include the following:

(a) Identification of the rate file number assigned and stated in the Order of Approval received by the insurer from the office for the previously approved rate filing;
(b) Date of approval of the previously approved rate filing;
(c) The proposed effective date of the amendment;
(d) A fifty (50) dollar filing fee;
(e) Two (2) copies of a properly completed HIPMC-F1 form, Face Sheet and Verification Form, which is incorporated by reference in 806 KAR 17:005;
(f) Two (2) copies of a properly-completed HIPMC-R32 form, Health Benefit Plan Rate Filing Information Form, which is incorporated by reference in 806 KAR 17:005; and
(g) If the filing is for a basic health benefit, two (2) copies of the completed HIPMC-RF-25 Form, Basic Health Benefit Plan Summary Sheet - Form and Rate Filings, which is incorporated by reference in 806 KAR 17:005.

(2) Each amendment filing shall contain documentation to demonstrate the necessity of the amendment, which shall include the following:
(a) An itemized list of the information to be amended and the reason for the amendment;
(b) A statement identifying the impact of the amendment in relation to benefits and costs on current and future policyholders; and
(c) A statement identifying the impact of the amendment on the insurer.

(3) One (1) copy of the amendment filing and written material relating to the filing shall be submitted to the Kentucky Attorney General's Office by the insurer at the same time as the submission to the office.

(4) The amendment to a previously approved rate filing shall not be deemed received until the office confirms that the information and fifty (50) dollar filing fee required under this section have been received.

(5) Within sixty (60) days of confirmation of receipt of the required information and fee, the office shall notify the insurer in writing of the acceptance or rejection of the amendment.

(6) The sixty (60) day confirmation time shall not begin until the office confirms that the required information and fee have been received.

Section 11. Material Incorporated by Reference: (1) The following material is incorporated by reference:

(a) Actuarial Standard of Practice No. 8, "Regulatory Filings for Rates and Financial Projections for Health Plans (Doc. No. 010, 1990 Edition)", American Academy of Actuaries;

(b) Actuarial Standard of Practice No. 26, "Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans (Doc. No. 052, adopted October, 1996)", American Academy of Actuaries;

(c) Actuarial Standard of Practice No. 31, "Documentation in Health Benefit Plan Ratemaking (Doc. No. 060, adopted October, 1997)", American Academy of Actuaries;

(d) Actuarial Standard of Practice No. 41, "Actuarial Communication (Doc. No. 086, adopted March, 2002)", American Academy of Actuaries.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Office of Insurance, 215 West Main Street, Frankfort, Kentucky 40601, Monday through Friday, 8 a.m. to 4:30 p.m. This material is also available on the office's internet Web site at http://doi.ppr.ky.gov. (25 Ky.R. 718; Am. 1049; eff. 11-20-98; 28 Ky.R. 151; eff. 9-10-2001; 29 Ky.R. 1368; 1799; eff. 1-16-2003; 32 Ky.R. 158; 512; eff. 11-22-05; 34 Ky.R. 1804; 2095; eff. 4-4-08.)

EXHIBIT 7

Sample Rate Filing

Raley, Angela M (PPC)

From: Bogolin, Joann [joann.bogolin@ingenixconsulting.com]
Sent: Wednesday, March 30, 2011 5:16 PM
To: Mitchell, Barton; Drennan, Jim (PPC Contractor); Drennan, James E; Bogolin, JoAnn (PPC); Kash, Heather (KYOAG); Mitchell, Jill (PPC); Raley, Angela M (PPC)
Cc: Hurley, Kevin J.; Henn, Andy; Wagner, Elaine; Schwierjohn, Tyler
Subject: RE: Anthem Ind PPO Filing: Filing # 2011-003723-R

Thank you, Bart. I will review your responses and let you know if I have additional questions.

JoAnn
678-417-4907

From: Mitchell, Barton [mailto:bart.mitchell@anthem.com]
Sent: Wednesday, March 30, 2011 5:04 PM
To: Drennan, Jim (PPC Contractor); Drennan, James E; Bogolin, JoAnn (PPC); Kash, Heather (KYOAG); Mitchell, Jill (PPC); Raley, Angela M (PPC); Bogolin, Joann
Cc: Hurley, Kevin J.; Henn, Andy; Wagner, Elaine; Schwierjohn, Tyler
Subject: RE: Anthem Ind PPO Filing: Filing # 2011-003723-R

I apologize for the delay on this. We are currently working on a 7/1 filing for this particular product and have been trying to make sure we're able to address these particular questions going forward as well, and in the process took longer than usual to respond. Again, I apologize. Please see below for our response. On filings going forward, Kevin Hurley will be the contact actuary instead of Elaine.

Thanks,
Bart

1. Exhibit E, the example of age/gender factor calculation, is a non-maternity example. Will you please provide us with a maternity example so that we can be clear on how the maternity rider factor is applied?

Below is an example that includes a Maternity age/gender factor.

Example 3:	Gender	Age	Factor
Subscriber **	F	42	2.663
Dependent***	M	40	0.762
Dependent	F	20	0.751
Dependent	M	17	0.619
Dependent	F	14	0.619
Dependent *	M	7	0
Dependent *	F	3	0
Total Age Factor for Policy			**5.414**

2. On the last page of the actuarial memorandum, restatement fees are described as applying to groups vhose coverage lapses. Since this is an individual filing, will you please clarify if there are restatement fees iat apply to individuals whose coverage lapses or if no restatement fees apply? If restatement fees do apply individuals, will you please confirm the terms of those restatement fees, as described in the actuarial morandum?

member must pay the full amount due to reinstate the contract but we currently do not apply this atement fee to individuals in Kentucky.

3. Will you please provide justification for the 3% per quarter trend and annual trend limit for medical and pharmacy expense of 13.5%? Since these two products are new, there is no experience upon which to calculate a trend. We need an understanding of how the above-mentioned trends are applicable to these products.

Attached is an exhibit containing our justification for a 13.5% trend. We do not yet have enough experience for an annual trend on this particular block of business as it is relatively new as of 2009, and so the attached exhibit shows experience for the Blue Access, CDHP, Value, Economy and Saver product portfolios that have longer experience periods. The trends have been normalized to account for benefits, age/gender and duration. At the time of this filing, we were looking at experience through October 2010. At this time we were showing a normalized trend of over 15% and felt our 13.5% trend was justified.

4. The actuarial memorandum indicates that this filing brings the benefit factors for the $3,000- and $5,000-deductible plans up to the level of the other HSA Plus factors, which include the PPACA provisions. Please explain exactly what changed for these two benefit designs between this filing and the previously amended filing, 2010-003544-R Amendment 310, which also stated that these two designs were PPACA-compliant. Explain what benefits changed and how much they each impacted these benefit factors.

The benefits were not changed in this filing and have been complaint as noted in the previous filing amendment referenced. The $3,000 and $5,000 deductible plans were originally missed in the filing effective for 9/23 that added benefits options that were PPACA compliant. The amendment was to add these deductibles in, but we were unable to wait for an approval, so we did not apply pricing to account for these extra benefits. The filing for 4/1 was to account for this. We used the same methodology to price for these deductibles that was used in the original 9/23 filing that was previously approved.

5. From 806 KAR 17:150 Section 6, the actuarial memorandum needs to address the effects of the state mandated benefits on the rates provided. Please provide applicable comments.

The effects of the mandated benefits are accounted for in our claims data and trend. No specific adjustments were made for the effects of the stated mandate benefits were made in this filing.

From: Wagner, Elaine
Sent: Wednesday, March 16, 2011 1:53 PM
To: Mitchell, Barton; Schwierjohn, Tyler; Hurley, Kevin J.; Henn, Andy
Subject: FW: Anthem Ind PPO Filing: Filing # 2011-003723-R

From: Bogolin, JoAnn (PPC) [mailto:JoAnn.Bogolin@ky.gov]
Sent: Wednesday, March 16, 2011 12:48 PM
To: Wagner, Elaine
Cc: Drennan, Jim (PPC Contractor); jim.drennan@ingenixconsulting.com; JoAnn Bogolin; Kash, Heather (KYOAG); Mitchell, Jill (PPC); Raley, Angela M (PPC)
Subject: Anthem Ind PPO Filing: Filing # 2011-003723-R

Wagner,

With respect to the above-referenced filing, we have the following questions/requests:

1. Exhibit E, the example of age/gender factor calculation, is a non-maternity example. Will you please provide us with a maternity example so that we can be clear on how the maternity rider factor is applied?

2. On the last page of the actuarial memorandum, restatement fees are described as applying to groups whose coverage lapses. Since this is an individual filing, will you please clarify if there are restatement fees that apply to individuals whose coverage lapses or if no restatement fees apply? If restatement fees do apply to individuals, will you please confirm the terms of those restatement fees, as described in the actuarial memorandum?

3. Will you please provide justification for the 3% per quarter trend and annual trend limit for medical and pharmacy expense of 13.5%? Since these two products are new, there is no experience upon which to calculate a trend. We need an understanding of how the above-mentioned trends are applicable to these products.

4. The actuarial memorandum indicates that this filing brings the benefit factors for the $3,000- and $5,000-deductible plans up to the level of the other HSA Plus factors, which include the PPACA provisions. Please explain exactly what changed for these two benefit designs between this filing and the previously amended filing, 2010-003544-R Amendment 310, which also stated that these two designs were PPACA-compliant. Explain what benefits changed and how much they each impacted these benefit factors.

5. From 806 KAR 17:150 Section 6, the actuarial memorandum needs to address the effects of the state mandated benefits on the rates provided. Please provide applicable comments.

When responding to this email, please reply to all.

Thank you!

JoAnn Bogolin, ASA, MAAA | Senior Consultant | Ingenix Consulting | Consultant for the Kentucky Department of Insurance

2170 Satellite Blvd., Suite 150 | Duluth, Georgia 30097 | (678) 417-4907 (o) | (678) 417-4950 (f)

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Anthem Blue Cross and Blue Shield
13550 Triton Park Blvd.
Louisville, KY 40223-4194

1/11/11
$100.00
61666872
SF

Anthem

January 7, 2011

DATE OF FILING
JAN 27 2011
KY DEPT. OF INSURANCE

TO: Sharon Clark, Commissioner of Insurance
Kentucky Office of Insurance
215 West Main Street
Frankfort, KY 40601

RE: Anthem Individual PPO Filing – HSA & HSA Plus
Form # AHP 1368

Dear Mrs. Clark,

Enclosed for your review and consideration of approval is the above-mentioned rate filing. This filing will apply to all new and renewing Individual PPO policies under the products listed above written by Anthem Health Plans of Kentucky, Inc. and is necessary to assure the proper relationship between benefit costs, operating expenses and premium rates. The proposed effective date of the filing is April 1, 2011. This filing replaces Individual Rate Filing DOI# 2010-003544-R.

Please let me know if you have any questions.

Sincerely,

Elaine Wagner

Elaine Wagner, FSA, MAAA
Actuarial Director, Individual Pricing

cc: Office of Rate Intervention
Office of the Attorney General

Enclosures

REC.—HEALTH DIV.
JAN 11 2011
1-11-2011-01 3723

RECEIVED
JAN 11 2011
ADMINISTRATIVE SERVICES
OFFICE OF INSURANCE

LKY-15 (8/05)

Anthem Blue Cross and Blue Shield is the trade name of Anthem Health Plans of Kentucky, Inc.
An independent licensee of the Blue Cross and Blue Shield Association
® Registered marks Blue Cross and Blue Shield Association

KENTUCKY INDIVIDUAL RATE FILING - PPO
ANTHEM HEALTH PLANS OF KENTUCKY, INC.

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Page(s)	Page Title	Description
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2	Table of Contents	Rate Filing Format
3	Face Sheet	Required Form
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13	Exhibit A	Required Form-Income & Expense Worksheets
14	Exhibit B	Plan Benefit & Deductible Factors
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75	Exhibit H	Benefit Relativity
76 - 78	Exhibit I	Loss Ratio Guarantee

Kentucky Office of Insurance
Division of Health Insurance Policy and Managed Care
Face Sheet and Verification Form (In Duplicate)

Anthem Health Plans of Kentucky, Inc.	(502) 889-2530	95120	61-0263895
Company	Phone No. (800# if available)	NAIC Company No.	Fed. Tax ID.
No.			
Anthem BCBS 13550 Triton Park Blvd Louisville, KY 40223		(502) 889-2783	Wenda.Watson@Anthem.Com
Address, City, State and Zip Code		Fax Number	E-Mail Address
AHP 1368	Individual PPO - Lumenos HSA & HSA Plus		Flesch Score
Form No. *	Description of Filing		

_____ 1. **CERTIFICATION POLICY FORMS** Include signed HIPMC-F2 and signed HIPMC-R4, as appropriate. Individual health policy must include rates, actuarial memorandum, and classifications, if any.

_____ 2. **APPROVAL - FORMS** (These filings may not be filed by certification)
( ) Stop Loss ( ) Medicare Supp. ( ) LTC/Nursing Home/Home Health
( ) HMO ( ) Blanket
( ) Limited Health Service Benefit Plan (include HIPMC-F-37)
( ) Health Benefit Plan (include HIPMC-F-35)
( ) Basic Health Benefit Plan (include HIPMC-RF-25)

__X__ 3. **APPROVAL - RATES**
( ) Basic Health Benefit Plan Rates (KRS 304.17A)
( ) Health Benefit Plan Rates (KRS 304.17A)
( ) Limited Health Service Benefit Plan Rates (KRS 304.17C)
(X) Other -- Rate Change/Revisions: Guaranteed Loss Ratio Rate Filing

_____ 4. **FILED ONLY**
( ) Provider Agreements ( ) Risk Sharing Arrangements
( ) Provider Directory ( ) Advertising

_____ 5. **AMENDMENT**
( ) Previously Approved Health Benefit Plan Rate Filing
OOI FILE NO: _____ Approval Date: _____

_____ 6. **REFERENCE FILING** (For use only when referencing another company's approved filing).
Referenced Company Name _____ NAIC # _____
Date Approved By Kentucky Office of Insurance _____ Form # _____

FEES: KRS.304.4-010 and 806 KAR 4:010 establish filing fees as follow: a)_____ for rate level revision filings subject to prior approval; b)_____ for other rate and form filings; c) your company's domiciliary state fee of $_____; and d) a $50.00 filing fee for amendments to previously approved health benefit plan rate filings. Pursuant to KRS 304.3-270 submit the greater of a), b), c), or d). Amount submitted $ 100.00

KRS 304.17A-527 and 806 KAR 17:300 establish filing fee as follows: a) $25.00 for provider agreement; and b) $50.00 for a risk sharing arrangement agreement. Amount submitted: $_____.

A FILING CANNOT BE ACCEPTED UNLESS ACCOMPANIED BY THE APPROPRIATE FEE
(MAKE CHECK PAYABLE TO KENTUCKY STATE TREASURER)

CERTIFICATION OF PERSON RESPONSIBLE FOR FILING

I certify that I have been authorized by the board of directors or management committee of the company or organization listed above to make this filing.

Elaine Wagner	Actuarial, Individual Pricing	January 7, 2011
NAME (Manual Signature Required)	POSITION	DATE

Elaine Wagner, FSA, MAAA
NAME (Print or Type)

Applications, benefit riders, certificates of insurance, and disclosure statements will not be adopted by reference unless noted above with form numbers.

COMMONWEALTH OF KENTUCKY
OFFICE OF INSURANCE
Frankfort, KY 40602-0517

HEALTH BENEFIT PLAN RATE FILING
INFORMATION FORM

Company Name: Anthem Health Plans of Kentucky, Inc
(name listed on the certificate of authority and/or the article of incorporation)

NAIC NO. 95120 FEDERAL TAX ID NO. 61-0263895

D/B/A: Anthem Blue Cross Blue Shield
(name listed on the filed certificate of assumed name)

Product Marketing Network Name: Individual PPO - Lumenos HSA & HSA Plus

Contact Person: Wanda Watson

Mailing Address: 13550 Triton Park Blvd, Louisville, KY 40223

Phone Number: (502) 889-2530 Ext. _____ Fax No. (502) 889-2783

E-Mail: Wanda.Watson@Anthem.com

Contact Actuary: Elaine Wagner, FSA, MAAA

Mailing Address: 13550 Triton Park Blvd, Louisville, KY 40223

Phone Number: (262) 523-4969 Ext. _____ Fax No. (502) 889-2783

E-Mail: Elaine.Wagner@Wellpoint.com

To whom should the notification for the "DATE OF FILING" be sent:

X Contact Person _____ Contact Actuary

_____ Other _____ Fax Number

_____ E-mail

Form Number(s) to which this filing applies: AHP 1368

DOI Form Filing Number to which this filing applies: _____
(DOI File Number is LOCATED on your return form filing copy)

Company/Insurer Assigned File Number: AHP 1368

Requested Effective Date of This Filing: April 1, 2011

MARKET SEGMENT: Small Group _____ Individual X Large Group _____

Association _____

OTHER: _____ Employer Organized Association: _____
Employer Organized Association Name

_____ Health Insurance Purchasing Outlet: _____
Health Insurance Purchasing Outlet Name

PRODUCT TYPE: HMO _____ POS _____ PPO X FFS _____

COMMONWEALTH OF KENTUCKY
OFFICE OF INSURANCE
Frankfort, KY 40602-0517

HEALTH BENEFIT PLAN RATE FILING
INFORMATION FORM

COMPLETE A SEPARATE PAGE FOR EACH PRODUCT TYPE

Product Type Individual PPO - Lumenos HSA

This filing is for: _____ Material Change to previously approved DOI Rate Filin_____ (DOI File No)

_____ New Product Rates

_____ Change in Existing Product Rates Due to:

_____ Projected need for rate change

_____ Geographical Region (Adding or Deleting a Service Area)

_____ Other change requiring a change in rates

Specify: Base Rate Increase - Trend

_____ Rate Change: Increase: X Decrease: _____

DOI File Number for Existing Health Benefit Rates: 2010-003544-R

Effective Date of Existing Health Benefit Rates: October 1, 2010

ASSESSMENT: Identify the amount of assessments (Kentucky, Access/Guaranteed Acceptance Program (GAP) used in this product's rate development:

Net Assessment (paid minus refund received):

Amount: $_____

Paid Date: _____

Base New Business Rate: $ 207.97

Base New Business Rate Change: 6.1%

Class: _____ Product: _____

Class: _____ Product: _____

COMMONWEALTH OF KENTUCKY
OFFICE OF INSURANCE
Frankfort, KY 40602-0517

HEALTH BENEFIT PLAN RATE FILING
INFORMATION FORM

COMPLETE A SEPARATE PAGE FOR EACH PRODUCT TYPE

Product Type Individual PPO - HSA Plus

This filing is for: _____ Material Change to previously approved DOI Rate Fili_____
(DOI File No)

_____ New Product Rates

__X__ Change in Existing Product Rates Due to: PPACA

_____ Projected need for rate change

_____ Geographical Region (Adding or Deleting a Service Area)

_____ Other change requiring a change in rates

Specify: Applying PPACA benefits to missed 3,000 & 5,000 Deductible levels & Base Rate inc

_____ Rate Change: Increase: __X__ Decrease: _____

DOI File Number for Existing Health Benefit Rates: 2010-003544-R

Effective Date of Existing Health Benefit Rates: September 23, 2010

ASSESSMENT: Identify the amount of assessments (Kentucky, Access/Guaranteed Acceptance Program (GAP) used in this product's rate development:

Net Assessment (paid minus refund received):

Amount: $_____

Paid Date: _____

Base New Business Rate: $ 326.26

Base New Business Rate Change: 6.1%

Class: _____ Product: _____

Class: _____ Product: _____

Commonwealth of Kentucky
Office of Insurance
Frankfort, KY 40602-0517

HEALTH BENEFIT PLAN RATE FILING
INFORMATION FORM

COMPLETE A SEPARATE PAGE FOR EACH PRODUCT TYPE

Product Type Individual PPO - Lumenos HSA & HSA Plus

Enter the number of existing Covered Persons in each region

Region	1	2	3	4	5	6	7	8
HSA	517	1,065	4,387	1,483	2,779	1,654	323	433
HSA Plus	37	85	299	69	218	186	24	37

Total Statewide Covered Persons: 13,596

I have prepared or supervised the preparation of this Product Information Form for the above policy(ies), and the content is accurate and complete.

January 7, 2011
Date

Signature of Company Representative

Elaine Wagner, FSA, MAAA
(Type name of person Signing)

Actuarial, Individual Pricing
(Type title of person signing above)

Commonwealth of Kentucky
Office of Insurance
Frankfort, KY 40602-0517

HEALTH BENEFIT PLAN RATE FILING
INFORMATION FORM

COMPLETE A SEPARATE PAGE FOR EACH PRODUCT TYPE

Company Name: Anthem Health Plans of Kentucky, Inc dba Anthem Blue Cross Blue Shield

Product Type: Individual PPO - Lumenos HSA & HSA Plus

Market Segment: Regular: All

Other:

Class of Business:

	Plan Identification	(a) Monthly Premium In Force	(b) Proposed Change in New Business Rate	(c) (a)*(b)
1	Lum HSA 1st $ Prev 0% - $1,500/$3,000	$537,018	6.09%	$32,704
2	Lum HSA 1st $ Prev 0% - $3,000/$6,000	$566,290	6.09%	$34,487
3	Lum HSA 1st $ Prev 0% - $5,000/$10,000	$361,471	6.09%	$22,014
4	Lum HSA Prev w/Ded&Coins 50% - $1,500/$3,000	$1,907	6.09%	$116
5	Lum HSA Prev w/Ded&Coins 20% - $1,750/$3,500	$11,821	6.09%	$720
6	Lum HSA Prev w/Ded&Coins 0% - $2,500/$5,000	$40,812	6.09%	$2,485
7	Lum HSA Prev w/Ded&Coins 0% - $3,500/$7,000	$33,321	6.09%	$2,029
8	Lum HSA Prev w/Ded&Coins 0% - $5,500/$11,000	$18,278	6.09%	$1,113
9	Lum HSA Select 1st $ Prev 20% - $1,750/$3,500	$0	6.09%	$0
10	Lum HSA Select 1st $ Prev 20% - $3,000/$6,000	$0	6.09%	$0
11	Lum HSA Select 1st $ Prev 0% - $5,800/$11,600	$384	6.09%	$23
12	Lum HSA Select Prev w/Ded&Coins 20% - $2,250/$4,500	$0	6.09%	$0
13	Lum HSA Select Prev w/Ded&Coins 0% - $4,000/$8,000	$254	6.09%	$15
14	HSA Plus 20% - $1,750/$3,500	$1,401	6.09%	$85
15	HSA Plus 0% - $1,500/$3,000	$31,022	6.09%	$1,889
16	HSA Plus 0% - $2,500/$5,000	$23,452	6.09%	$1,428
17	HSA Plus 0% - $3,000/$6,000	$0	6.09%	$0
18	HSA Plus 0% - $3,500/$7,000	$23,945	6.09%	$1,458
19	HSA Plus 0% - $5,000/$10,000	$0	6.09%	$0
20	HSA Plus 0% - $5,500/$11,000	$30,684	6.09%	$1,869
21	HSA Plus 50% - $1,500/$3,000	$1,193	6.09%	$73
	Total	$1,683,254		$102,510

Average increase in base new business rates = Total (c) /Total (a) = 6.09%
(Attach Additional Pages as Necessary)

Change for each product HMO, FFS, POS, and PPO.

COMMONWEALTH OF KENTUCKY
OFFICE OF INSURANCE
Frankfort, KY 40602-0517

CERTIFICATION

I, Elaine Wagner, FSA, MAAA
(qualified actuary who prepares and signs the actuarial memorandum)

certify that the information in this filing is prepared in accordance with American Academy of Actuaries Actuarial Standard of Practice No. 26, Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans, applicable to individual as well as small employer business and that all the proposed rates are in compliance with KRS 304.17A-0952 and 304.17A-0954

Elaine Wagner
(Signature)

January 7, 2011
(Date)

Anthem Health Plans of Kentucky, Inc.
Income Expense Worksheet

INCOME & EXPENSE WORKSHEET
Company: Anthem Health Plans of Kentucky, Inc.
Period: From: Jan-09 To: Dec-09
Product: ANTHEM INDIVIDUAL Total of All Plans

	Kentucky Total	%	Individual Total	%	Individual Total PPO	%	Individual Total FFS	%
INCOME	0	0.0%		0.0%				
Risk Adjustment Revenue	$1,699,873,327	100.0%	$321,965,373	100.0%	321,246,132	100.0%	719,241	100.0%
Premium	$25,484,416	1.5%	$4,826,889	1.5%	$4,816,106	1.5%	$10,783	1.5%
Investment	-$8,000	0.0%	-$1,515	0.0%	-$1,512	0.0%	-$3	0.0%
Other	$1,725,349,743	101.5%	$326,790,746	101.5%	$326,060,726	101.5%	$730,020	101.5%
TOTAL INCOME								
CLAIMS EXPENSES								
Physician Payments	$551,849,469	32.5%	$105,054,856	32.6%	$104,683,123	32.6%	$371,734	51.7%
Hospital Payments (Inc. Lab.)	$595,102,924	35.0%	$113,288,959	35.2%	$112,888,090	35.1%	$400,870	55.7%
Outpatient Referral	$2,697	0.0%	$506	0.0%	$504	0.0%	$2	0.0%
Pharmacy	$223,473,524	13.1%	$42,542,360	13.2%	$42,391,825	13.2%	$150,535	20.8%
Mental Health	$12,864,627	0.8%	$2,449,022	0.8%	$2,440,356	0.8%	$8,666	1.2%
Total Medical & Hospital	$1,383,293,201	81.4%	$263,335,704	81.8%	$262,403,898	81.7%	$931,806	129.6%
Increase in Reserves	(3,769,000)	-0.2%	-$717,500	-0.2%	-$714,961	-0.2%	-$2,539	-0.4%
TOTAL CLAIMS EXPENSE	$1,379,524,201	81.2%	$262,618,204	81.6%	261,688,937	81.5%	929,267	129.2%
OVERHEAD EXPENSES								
Risk Adjustment Payment	$0	0.0%	$0	0.0%	$0	0.0%	$0	0.0%
Salaries	$81,120,684	4.8%	$15,364,704	4.8%	$15,330,381	4.8%	$34,323	4.8%
Managed Care	$2,771,930	0.2%	$525,019	0.2%	$523,846	0.2%	$1,173	0.2%
Wellness Programs (Inc. in Cust. Ed.)	$9,224,836	0.5%	$1,747,197	0.5%	$1,743,294	0.5%	$3,903	0.5%
Customer Education	$0	0.0%	$0	0.0%	$0	0.0%	$0	0.0%
Commissions	$68,688,831	3.9%	$12,878,615	4.0%	$12,849,845	4.0%	$28,770	4.0%
Payroll Taxes	$6,278,697	0.4%	$1,189,220	0.4%	$1,186,563	0.4%	$2,657	0.4%
Employee Benefits	$18,737,898	1.1%	$3,549,061	1.1%	$3,541,132	1.1%	$7,928	1.1%
Retirement Benefits (Inc. in EE Ben.)	$0	0.0%	$0	0.0%	$0	0.0%	$0	0.0%
Attorney Fees	$2,610,143	0.2%	$494,375	0.2%	$493,271	0.2%	$1,104	0.2%
Accounting Fees	$547,922	0.0%	$103,779	0.0%	$103,548	0.0%	$232	0.0%
Actuarial Fees	$12,973	0.0%	$2,457	0.0%	$2,452	0.0%	$5	0.0%
Independent Contractors	$18,360,497	1.1%	$3,477,579	1.1%	$3,469,811	1.1%	$7,769	1.1%
Advertising - Personnel Recruitment	$0	0.0%	$0	0.0%	$0	0.0%	$0	0.0%
Advertising - Other	$9,287,465	0.5%	$1,759,097	0.5%	$1,755,167	0.5%	$3,930	0.5%
Lobbying (Inc. in Dues)	$0	0.0%	$0	0.0%	$0	0.0%	$0	0.0%
Charitable Contributions	$0	0.0%	$0	0.0%	$0	0.0%	$0	0.0%
Travel Expenses	$1,892,701	0.1%	$358,488	0.1%	$357,687	0.1%	$801	0.1%
Dues or Membership fees	$829,518	0.0%	$157,115	0.0%	$156,764	0.0%	$351	0.0%
Rent	$3,648,035	0.2%	$690,958	0.2%	$689,414	0.2%	$1,544	0.2%
Utilities (Except for Tel, Inc. in Rent)	$1,654,572	0.1%	$313,385	0.1%	$312,685	0.1%	$700	0.1%
Office Supplies	$889,334	0.1%	$168,445	0.1%	$168,068	0.1%	$376	0.1%
Office - Other	$8,937,476	0.5%	$1,692,807	0.5%	$1,689,026	0.5%	$3,782	0.5%
Taxes (non payroll)	$12,261,612	0.7%	$2,322,417	0.7%	$2,317,229	0.7%	$5,188	0.7%
Other	-$38,098,684	-2.2%	-$7,216,101	-2.2%	-$7,199,981	-2.2%	-$16,120	-2.2%
Loss Adjustment Expense	$0	0.0%	$0	0.0%	$0	0.0%	$0	0.0%
TOTAL OVERHEAD EXPENSES	$207,656,040	12.2%	$39,331,198	12.2%	$39,243,336	12.2%	$87,862	12.2%

* NOTE: "Other" Overhead Expense category equals Overhead Expenses NOT elsewhere classified less Cost Plus retentions.
The Cost Plus retention is a necessary balancing item for the Annual Statement.

ACTUARIAL MEMORANDUM
Anthem Health Plans of Kentucky, Inc.
Individual HSA & HSA Plus Product Rate Filing

This memorandum presents the rates for HSA and the development of rates for HSA Plus, effective April 1, 2011 for Individual to be offered by Anthem Health Plans of Kentucky, Inc. (Anthem).

The purpose of this rate filing is to demonstrate that rates are reasonable relative to the benefits provided, to revise the rates for the PPACA compliant $3,000 and $5,000 deductible levels, and to demonstrate compliance with 806 KAR 17:150, Sections 4, 6, & 8. This policy form is created to be compliant with the provisions of PPACA. The filing is not intended to be used for any other purpose.

In this filing, we will be presenting new rates and factors for the $3,000 and $5,000 deductible levels in our HSA Plus product along with previously approved factors for the rest of our HSA Plus and Lumenos HSA products. The new factors and rates for the $3,000 and $5,000 deductible levels are to account for PPACA benefits. The methodology used to set these new factors is the same as the 9/23/2010 filing, DOI# 2010-003544-R. All other rating factors remain unchanged from the previously approved rate filing. We are implementing a 3% trend increase for 4/1/2011. In total this is 6.1% higher than the 9/23/10 effective filing, due to a 3% trend increase applied on 1/1/2011. We will also present the minimum loss ratios by duration that will be guaranteed for the HSA and HSA Plus products combined.

(a) Qualification of the actuary signing the memorandum
I, Elaine Wagner, am an Actuarial Director for Central Zone Individual Pricing for Anthem Insurance, Inc. I am a Fellow of the Society of Actuaries and a member of the American Academy of Actuaries.

(b) When the company will begin using the proposed rates
April 1, 2011

(c) Detailed explanation of rate development

1. The effects of the mandated benefits
Please see Exhibit C.

2. Claims cost development

a. Methodology
Underlying morbidity assumptions for the HSA Plus Product were based on the experience of our existing HSA product sold in the state of Kentucky. Adjustments were made for underwriting changes, benefit differences and other anticipated morbidity differences. Rate Development is outlined in Exhibit H.

b. Assumptions as follows:

(i). Trend
No trend experience is available on this new product. See (h) for periodic trend adjustments.

(ii). Benefit changes
Benefits are outlined in Exhibit C.

(iii). Utilization and cost per service changes
Initial utilization and cost per service levels are reflected in underlying morbidity and any changes to these parameters are reflected in the periodic trend adjustments detailed in (h) of this memorandum.

(iv). Demographic changes
Underlying demographics in rate development are assumed to be similar to the HSA product.

(v). Changes in medical management
Initially, the impact of medical management is reflected in the underlying morbidity. Any changes to these parameters are reflected in the periodic trend adjustments detailed in (h) of this memorandum.

(vi). Changes in provider contracts
Changes to provider contracts are expected but these changes are anticipated and therefore built into periodic trend rates.

(vii). Any other assumptions used
The average premium on this policy is assumed to be $1,426 annually.

c. Experience including earned premium, paid claims, incurred claims and incurred loss ratios for the last three years
HSA Plus is a new product so very limited experience is available. Experience for HSA is shown in Exhibit F.

3. Development and printout of the base premium rates, index rates, and GAP premium rates for the standard plan option by product and by class of business
This is not applicable to this filing. Anthem's Standard plan rates are filed in AHP 1331.

4. All age, gender, industry or occupation and geographic region factors summarized separately from the maximum to the minimum factor and any healthy lifestyle discount factor with an explanation of the determination of the factor and where it is applicable
A policy's age/gender factor is calculated as the sum of the age/gender factor for each member covered by the policy. If a policy includes more than three children, only the factors for the three oldest children will be included. A 10% spouse discount is applied to the 2nd adult on the policy. An example of this method is included in Exhibit E. The age/gender and area factors are listed in Exhibit D. Anthem does not currently use an industry factor or offer a healthy lifestyle discount.

5. The anticipated pricing loss ratio and the percentages allocated for administrative expenses, commissions, taxes, investment income, profit & contingency, and other expenses including a detailed and justified explanation of how costs are allocated among plans
The anticipated pricing loss ratio is 65%. Exhibit I details the guaranteed lifetime loss ratio as well as durational loss ratios. Loss ratio targets will be adjusted to reflect the required minimum loss ratio established for Individual business.

a. Administrative Expense
General overhead expenses are assumed to be a fixed amount per member per month. The % of the premium that is attributable to them varies based on age, benefit plan and underwriting factor. On average, we expect these expenses to be 23% of premium. Inflation assumption on these expenses is 3% per year. The % attributable to overhead expenses will be modified to reflect the minimum loss ratio established for Individual business.

b. Commissions
First year commission is currently 14% of premium and 5% thereafter. The lifetime average is assumed to be 5.5%. Commission structure is under review and will be modified to reflect the minimum loss ratio established for Individual business.

c. Taxes
Anthem does not load rates explicitly for federal income taxes. All other types of taxes were included in the administrative expense load outlined above. Instead of loading rates for federal income taxes, it was assumed that they would be partially offset by investment income.

d. Investment Income
Investment income has been used historically to offset federal income tax and to support reserve requirements. In addition, given the low premium and annual renewable term nature of this product, estimated investment income is assumed to be immaterial.

e. Profit and contingency
Based upon expense assumptions and anticipated average premium, the average contingency margin is 6%. The targeted profit and contingency margin is under review and may be modified to reflect the minimum loss ratio established for Individual business.

f. Percentage Allocated for Any Other Factor
Anthem may charge the following fees:
Paper Billing Fee: customers who choose monthly paper billing will be charged an additional $5.00 per month to cover the cost of this administrative service. This amount will be clearly listed as a separate line item on the customer's bill.

Paper Application Fee: customers applying by paper applications will be charged an additional $25.

Insufficient Funds/Return Payment Charge: this may be charged to customers who have insufficient funds to cover a written check or have an electronic payment returned. The fee will be no greater than $25 per occurrence.

Late Charge: This may be charged to all due and unpaid premiums past 15 days. The charge will not exceed 18% annually.

Reinstatement Fee: This may be charged to groups whose coverage lapses for non-payment and they seek reinstatement of their policy. This charge covers reasonable costs associated with reinstatement that we do not want to pass on to other on-time paying customers. This fee will be no greater than $200 per occurrence.

(d) Detailed explanation, with example, of how a individual composite rate is determined, including the group size eligible for a composite rate calculation
Composite rates are not applicable for Individual business.

(e) Each benefit plan description and the applicable benefit factor adjustment and the two Individual GAP benefit plans, (other then the standard benefit plan) if applicable
The benefit plan descriptions and factors are shown in Exhibits B & C.

(f) Detailed discussion of how the projected GAP amount net assessments and refunds were used in establishing the proposed rates
Rates are being loaded at 0.5% to cover GAP/High Risk Pool assessments.

(g) Justification of fees paid to providers in relation to the rate requested and the average discounts paid to physician, hospital, lab, pharmacy, mental health and other providers
All data used to develop these rates is NET of provider discounts.

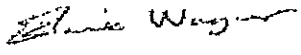
(h) If a trend rate is used, include the time period to which the trend applies and the applicable trend rate
Rates for future effective dates will be adjusted as often as quarterly, by a trend amount not to exceed 13.5% annually for both medical and prescription drug coverage.

(i) Explanation of the anticipated effect of the requested rates on the policyholders, subscribers, enrollees
Not applicable at this time for the HSA Plus product as these are new benefits. We are implementing a 3% trend increase for 4/1/2011. The base rate is now 6.1% higher than previously filed for 9/23/2010 due to quarterly trend adjustments of 3% on 1/1/2011 as well, within the filed trend amount.

(j) Identify all classes of business, justify the reason for separate classes, and demonstrate that all index rates for the class of business with highest index rates are within 10% of the corresponding index rates from the class of business with lowest index rates
Kentucky Farm Bureau is the only additional class of business applicable to this product. No distinct rates for different classes of business will be applied.

(k) Prospective certification
Please see the attached form HIPMC R-34.

Actuary's Statement
To the best of my knowledge and judgment, the rates presented in this filing are in compliance with the laws and regulations of the Commonwealth of Kentucky, and the corresponding relationships of benefits to premiums are reasonable.



Elaine Wagner, FSA, MAAA
Actuarial Director, Individual Pricing

Individual PPO - Lumenos HSA & HSA Plus
Benefit & Deductible Factors

Plan	Deductible	Current Benefit Factor	Current Benefit Factor w/ MH	Current Deductible Factor
Lum HSA 1st $ Prev 0% - Single	$1,500	1.0000	1.0500	1.3725
Lum HSA 1st $ Prev 0% - Single	$3,000	1.0000	1.0500	1.0000
Lum HSA 1st $ Prev 0% - Single	$5,000	1.0000	1.0500	0.6885
Lum HSA Prev w/Ded&Coins 50% - Single	$1,500	0.6583	0.6912	1.3725
Lum HSA Prev w/Ded&Coins 20% - Single	$1,750	0.7224	0.7585	1.2950
Lum HSA Prev w/Ded&Coins 0% - Single	$2,500	0.8189	0.8598	1.1222
Lum HSA Prev w/Ded&Coins 0% - Single	$3,500	0.8189	0.8598	0.9279
Lum HSA Prev w/Ded&Coins 0% - Single	$5,500	0.8189	0.8598	0.6724
Lum HSA Select 1st $ Prev 20% - Single	$1,750	0.8248	0.8660	1.2889
Lum HSA Select 1st $ Prev 20% - Single	$3,000	0.8248	0.8660	1.0000
Lum HSA Select 1st $ Prev 0% - Single	$5,800	1.0000	1.0500	0.6676
Lum HSA Select Prev w/Ded&Coins 20% - Single	$2,250	0.7604	0.7984	1.1226
Lum HSA Select Prev w/Ded&Coins 0% - Single	$4,000	0.8620	0.9051	0.8640
Lum HSA 1st $ Prev 0% - Family	$3,000	0.8850	0.9293	1.3725
Lum HSA 1st $ Prev 0% - Family	$6,000	0.8850	0.9293	1.0000
Lum HSA 1st $ Prev 0%- Family	$10,000	0.8850	0.9293	0.6885
Lum HSA Prev w/Ded&Coins 50% - Family	$3,000	0.5826	0.6117	1.3725
Lum HSA Prev w/Ded&Coins 20% - Family	$3,500	0.6393	0.6713	1.2950
Lum HSA Prev w/Ded&Coins 0% - Family	$5,000	0.7247	0.7609	1.1222
Lum HSA Prev w/Ded&Coins 0% - Family	$7,000	0.7247	0.7609	0.9279
Lum HSA Prev w/Ded&Coins 0% - Family	$11,000	0.7247	0.7609	0.6724
Lum HSA Select 1st $ Prev 20% - Family	$3,500	0.7299	0.7664	1.2889
Lum HSA Select 1st $ Prev 20% - Family	$6,000	0.7299	0.7664	1.0000
Lum HSA Select 1st $ Prev 0% - Family	$11,600	0.8850	0.9293	0.6676
Lum HSA Select Prev w/Ded&Coins 20% - Family	$4,500	0.6730	0.7067	1.1226
Lum HSA Select Prev w/Ded&Coins 0% - Family	$8,000	0.7629	0.8010	0.8640
HSA Plus 20% - Single	1,750	0.5865	0.6158	1.2950
HSA Plus 0% - Single	1,500	0.6648	0.6981	1.3725
HSA Plus 0% - Single	2,500	0.6648	0.6981	1.1222
HSA Plus 0% - Single	3,000	0.6648	0.6981	1.0000
HSA Plus 0% - Single	3,500	0.6648	0.6981	0.9279
HSA Plus 0% - Single	5,000	0.6648	0.6981	0.6885
HSA Plus 0% - Single	5,500	0.6648	0.6981	0.6724
HSA Plus 50% - Single	1,500	0.5345	0.5612	1.3725
HSA Plus 20% - Family	3,500	0.5190	0.5450	1.2950
HSA Plus 0% - Family	3,000	0.5884	0.6178	1.3725
HSA Plus 0% - Family	5,000	0.5884	0.6178	1.1222
HSA Plus 0% - Family	6,000	0.5884	0.6178	1.0000
HSA Plus 0% - Family	7,000	0.5884	0.6178	0.9279
HSA Plus 0% - Family	10,000	0.5884	0.6178	0.6885
HSA Plus 0% - Family	11,000	0.5884	0.6178	0.6724
HSA Plus 50% - Family	3,000	0.4730	0.4967	1.3725

Individual PPO - Lumenos HSA & HSA Plus
Benefit Overview

Plan	In Network Deductible	Contract Maximum	Family Deductible Multiplier	Coins In-Network	Coins Non-Network	Preventive Care	Maternity	Out-Of-Pocket Maximum	Office Visit	Prescription Drug Coverage
Lumenos HSA	$1,500	Unlimited	2X	100/0	60/40	Ded Waived	None	$1,500 IN/$3,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA	$1,750	Unlimited	2X	80/20	60/40	After Ded	None	$5,000 IN/$10,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA	$3,000	Unlimited	2X	100/0	60/40	Ded Waived	Optional Rider Available	$3,000 IN/$6,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA	$3,500	Unlimited	2X	100/0	60/40	After Ded	Optional Rider Available	$3,500 IN/$7,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA	$5,000	Unlimited	2X	100/0	60/40	Ded Waived	Optional Rider Available	$5,000 IN/$10,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA	$1,500	Unlimited	2X	50/50	30/70	After Ded	Optional Rider (Family Only)	$4,000 IN/$8,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA	$2,500	Unlimited	2X	100/0	60/40	After Ded	Optional Rider Available	$2,500 IN/$5,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA	$5,500	Unlimited	2X	100/0	60/40	After Ded	Optional Rider Available	$5,500 IN/$11,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
HSA Select	$1,750	Unlimited	2X	80/20	60/40	Ded Waived	None	$5,000 IN/$10,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
HSA Select	$2,250	Unlimited	2X	80/20	60/40	After Ded	None	$5,500 IN/$11,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
HSA Select	$3,000	Unlimited	2X	80/20	60/40	Ded Waived	None	$5,500 IN/$11,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
HSA Select	$4,000	Unlimited	2X	100/0	60/40	After Ded	None	$4,000 IN/$8,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
HSA Select	$5,800	Unlimited	2X	100/0	60/40	Ded Waived	None	$5,800 IN/$11,600 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance

Plan	Deductible	Contract Maximum	Family Deductible Multiplier	Coins In-Network	Coins Non-Network	Preventive Care	Maternity	Out-Of-Pocket Maximum	Office Visit	Prescription Drug Coverage
Lumenos HSA Plus	$1,500	Unlimited	2X	100/0	60/40	Covered in Full	None	$1,500 IN/$3,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA Plus	$1,500	Unlimited	2X	50/50	30/70	Covered in Full	None	$4,000 IN/$8,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA Plus	$1,750	Unlimited	2X	80/20	60/40	Covered in Full	None	$5,000 IN/$10,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA Plus	$2,500	Unlimited	2X	100/0	60/40	Covered in Full	None	$2,500 IN/$5,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA Plus	$3,000	Unlimited	2X	100/0	60/40	Covered in Full	None	$3,000 IN/$6,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA Plus	$3,500	Unlimited	2X	100/0	60/40	Covered in Full	None	$3,500 IN/$7,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA Plus	$5,000	Unlimited	2X	100/0	60/40	Covered in Full	None	$5,000 IN/$8,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance
Lumenos HSA Plus	$5,500	Unlimited	2X	100/0	60/40	Covered in Full	None	$5,500 IN/$11,000 NN	Subject to Deductible & Coinsurance	Subject to Deductible & Coinsurance

Case Characteristics Rate Factor Exhibit
Lumenos HSA Age Factors

Case Characteristics Summary			
	Minimum	Maximum	Range
Age/Gender	0.577	2.562	4.440
Area	0.9647	1.0861	1.126
Industry	1.000	1.000	1.000
Product	0.557	2.783	4.999

Maternity Case Characteristics Summary			
	Minimum	Maximum	Range
Age/Gender	0.679	1.493	2.199
Area	0.9647	1.0861	1.126
Industry	1.000	1.000	1.000
Product	0.655	1.622	2.478

AREA	Area Factor Current
Area 1	1.0861
Area 2	0.9716
Area 3	1.0006
Area 4	0.9665
Area 5	0.9647
Area 6	1.0696
Area 7	1.0628
Area 8	1.0466

Maternity Rider	
Age	Multiplier
13-18	2.178
19-24	2.322
25-29	2.500
30-34	2.379
35-39	2.162
40-44	2.001
45-49	1.933

	$1500 Deductible					$1750 Deductible				
Age	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female
0	1.007	1.007	-	1.007	1.007	0.837	0.837	-	0.837	0.837
1	0.817	0.817	-	0.817	0.817	0.710	0.710	-	0.710	0.710
2	0.630	0.630	-	0.630	0.630	0.630	0.630	-	0.630	0.630
3	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
4	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
5	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
6	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
7	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
8	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
9	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
10	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
11	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
12	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
13	0.577	0.577	0.679	0.577	0.577	0.577	0.577	0.679	0.577	0.577
14	0.577	0.577	0.679	0.577	0.577	0.577	0.582	0.684	0.577	0.582
15	0.577	0.630	0.741	0.577	0.630	0.577	0.633	0.744	0.577	0.633
16	0.577	0.641	0.754	0.577	0.641	0.577	0.638	0.750	0.577	0.638
17	0.577	0.641	0.754	0.577	0.641	0.577	0.638	0.750	0.577	0.638
18	0.577	0.682	0.802	0.577	0.682	0.577	0.689	0.787	0.577	0.689
19	0.577	0.709	0.937	0.577	0.709	0.577	0.696	0.920	0.577	0.696
20	0.577	0.723	0.958	0.577	0.723	0.577	0.709	0.937	0.577	0.709
21	0.577	0.745	0.985	0.577	0.745	0.577	0.711	0.940	0.577	0.711
22	0.577	0.745	0.985	0.577	0.745	0.577	0.711	0.940	0.577	0.711
23	0.577	0.750	0.992	0.577	0.750	0.577	0.717	0.948	0.577	0.717
24	0.577	0.763	1.009	0.577	0.763	0.577	0.732	0.968	0.577	0.732
25	0.577	0.775	1.240	0.577	0.775	0.577	0.745	1.192	0.577	0.745
26	0.577	0.790	1.264	0.577	0.790	0.577	0.761	1.218	0.577	0.761
27	0.577	0.808	1.293	0.577	0.790	0.577	0.781	1.250	0.577	0.761
28	0.577	0.837	1.339	0.577	0.790	0.586	0.813	1.301	0.577	0.781
29	0.577	0.876	1.405	0.577	0.790	0.595	0.857	1.371	0.577	0.781
30	0.577	0.900	1.241	0.577	0.790	0.603	0.903	1.245	0.577	0.761
31	0.584	0.948	1.307	0.577	0.790	0.618	0.956	1.318	0.577	0.761
32	0.597	0.980	1.351	0.577	0.790	0.629	0.991	1.367	0.577	0.761
33	0.620	1.023	1.411	0.577	0.790	0.656	1.037	1.430	0.577	0.761
34	0.644	1.055	1.455	0.577	0.790	0.683	1.073	1.480	0.577	0.761
35	0.654	1.069	1.242	0.577	0.790	0.694	1.088	1.264	0.577	0.761
36	0.676	1.079	1.264	0.577	0.790	0.718	1.100	1.278	0.577	0.761
37	0.707	1.101	1.279	0.577	0.790	0.751	1.124	1.306	0.577	0.761
38	0.763	1.129	1.312	0.577	0.790	0.801	1.154	1.341	0.577	0.761
39	0.818	1.185	1.377	0.577	0.790	0.873	1.218	1.415	0.577	0.761
40	0.845	1.249	1.250	0.577	0.790	0.888	1.253	1.264	0.577	0.761
41	0.869	1.274	1.275	0.577	0.790	0.939	1.279	1.280	0.577	0.761
42	0.914	1.306	1.308	0.577	0.790	0.983	1.314	1.315	0.577	0.761
43	0.936	1.349	1.350	0.577	0.790	0.988	1.384	1.365	0.577	0.761
44	0.957	1.379	1.380	0.577	0.790	1.020	1.397	1.398	0.577	0.761
45	0.983	1.389	1.298	0.577	0.790	1.049	1.413	1.318	0.577	0.761
46	1.039	1.421	1.328	0.577	0.790	1.101	1.451	1.354	0.577	0.761
47	1.076	1.439	1.343	0.577	0.790	1.140	1.475	1.378	0.577	0.761
48	1.137	1.453	1.358	0.577	0.790	1.212	1.490	1.390	0.577	0.761
49	1.203	1.490	1.390	0.577	0.790	1.288	1.533	1.430	0.577	0.761
50	1.357	1.543	-	0.577	0.790	1.359	1.574	-	0.577	0.761
51	1.427	1.592	-	0.577	0.790	1.444	1.631	-	0.577	0.761
52	1.498	1.637	-	0.577	0.790	1.522	1.686	-	0.577	0.761
53	1.562	1.674	-	0.577	0.790	1.595	1.733	-	0.577	0.761
54	1.640	1.738	-	0.577	0.790	1.691	1.809	-	0.577	0.761
55	1.722	1.812	-	0.577	0.790	1.784	1.889	-	0.577	0.761
56	1.782	1.852	-	0.577	0.790	1.858	1.938	-	0.577	0.761
57	1.856	1.897	-	0.577	0.790	1.947	1.996	-	0.577	0.761
58	1.948	1.930	-	0.577	0.790	2.055	2.033	-	0.577	0.761
59	2.024	1.973	-	0.577	0.790	2.149	2.088	-	0.577	0.761
60	2.168	2.107	-	0.577	0.790	2.338	2.233	-	0.577	0.761
61	2.264	2.159	-	0.577	0.790	2.423	2.305	-	0.577	0.761
62	2.325	2.200	-	0.577	0.790	2.515	2.354	-	0.577	0.761
63	2.391	2.268	-	0.577	0.790	2.562	2.442	-	0.577	0.761
64	2.464	2.367	-	0.577	0.790	2.562	2.551	-	0.577	0.761

Age	$2250 Deductible					$2500 Deductible				
	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female
0	0.646	0.646	-	0.646	0.646	0.649	0.649	-	0.649	0.649
1	0.714	0.714	-	0.714	0.714	0.716	0.716	-	0.716	0.716
2	0.630	0.630	-	0.630	0.630	0.630	0.630	-	0.630	0.630
3	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
4	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
5	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
6	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
7	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
8	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
9	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
10	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
11	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
12	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
13	0.577	0.577	0.678	0.577	0.577	0.577	0.577	0.678	0.577	0.577
14	0.577	0.582	0.684	0.577	0.582	0.577	0.582	0.684	0.577	0.582
15	0.577	0.634	0.746	0.577	0.634	0.577	0.634	0.746	0.577	0.634
16	0.577	0.639	0.751	0.577	0.639	0.577	0.639	0.751	0.577	0.639
17	0.577	0.639	0.751	0.577	0.639	0.577	0.639	0.751	0.577	0.639
18	0.577	0.670	0.788	0.577	0.670	0.577	0.670	0.788	0.577	0.670
19	0.577	0.697	0.821	0.577	0.697	0.577	0.697	0.821	0.577	0.697
20	0.577	0.710	0.939	0.577	0.710	0.577	0.710	0.938	0.577	0.710
21	0.577	0.712	0.941	0.577	0.712	0.577	0.712	0.941	0.577	0.712
22	0.577	0.712	0.941	0.577	0.712	0.577	0.712	0.941	0.577	0.712
23	0.577	0.718	0.949	0.577	0.718	0.577	0.718	0.949	0.577	0.718
24	0.577	0.733	0.969	0.577	0.733	0.577	0.733	0.969	0.577	0.733
25	0.577	0.746	1.194	0.577	0.746	0.577	0.747	1.196	0.577	0.747
26	0.577	0.762	1.219	0.577	0.762	0.577	0.763	1.221	0.577	0.763
27	0.577	0.762	1.251	0.577	0.762	0.577	0.763	1.253	0.577	0.763
28	0.587	0.814	1.302	0.577	0.762	0.587	0.816	1.304	0.577	0.763
29	0.596	0.858	1.373	0.577	0.762	0.596	0.859	1.374	0.577	0.763
30	0.604	0.904	1.247	0.577	0.762	0.604	0.905	1.248	0.577	0.763
31	0.617	0.957	1.320	0.577	0.762	0.618	0.958	1.321	0.577	0.763
32	0.630	0.992	1.368	0.577	0.762	0.631	0.993	1.369	0.577	0.763
33	0.657	1.038	1.431	0.577	0.762	0.658	1.039	1.433	0.577	0.763
34	0.664	1.074	1.481	0.577	0.762	0.666	1.076	1.482	0.577	0.763
35	0.695	1.090	1.267	0.577	0.762	0.696	1.091	1.268	0.577	0.763
36	0.720	1.102	1.281	0.577	0.762	0.721	1.103	1.282	0.577	0.763
37	0.753	1.127	1.310	0.577	0.762	0.754	1.127	1.310	0.577	0.763
38	0.803	1.157	1.344	0.577	0.762	0.804	1.157	1.344	0.577	0.763
39	0.875	1.221	1.419	0.577	0.762	0.876	1.221	1.419	0.577	0.763
40	0.890	1.257	1.258	0.577	0.762	0.891	1.258	1.259	0.577	0.763
41	0.938	1.282	1.283	0.577	0.762	0.939	1.282	1.283	0.577	0.763
42	0.966	1.317	1.318	0.577	0.762	0.966	1.318	1.319	0.577	0.763
43	0.989	1.367	1.368	0.577	0.762	0.990	1.368	1.369	0.577	0.763
44	1.023	1.400	1.401	0.577	0.762	1.023	1.401	1.402	0.577	0.763
45	1.051	1.418	1.323	0.577	0.762	1.052	1.417	1.322	0.577	0.763
46	1.104	1.456	1.358	0.577	0.762	1.105	1.456	1.358	0.577	0.763
47	1.143	1.481	1.382	0.577	0.762	1.144	1.481	1.382	0.577	0.763
48	1.215	1.496	1.396	0.577	0.762	1.216	1.496	1.396	0.577	0.763
49	1.294	1.539	1.436	0.577	0.762	1.296	1.538	1.435	0.577	0.763
50	1.366	1.581	-	0.577	0.762	1.368	1.580	-	0.577	0.763
51	1.450	1.640	-	0.577	0.762	1.450	1.638	-	0.577	0.763
52	1.529	1.696	-	0.577	0.762	1.529	1.694	-	0.577	0.763
53	1.604	1.743	-	0.577	0.762	1.602	1.741	-	0.577	0.763
54	1.703	1.820	-	0.577	0.762	1.703	1.817	-	0.577	0.763
55	1.800	1.906	-	0.577	0.762	1.799	1.905	-	0.577	0.763
56	1.876	1.960	-	0.577	0.762	1.875	1.960	-	0.577	0.763
57	1.966	2.015	-	0.577	0.762	1.964	2.012	-	0.577	0.763
58	2.082	2.062	-	0.577	0.762	2.081	2.049	-	0.577	0.763
59	2.177	2.107	-	0.577	0.762	2.176	2.104	-	0.577	0.763
60	2.361	2.264	-	0.577	0.762	2.358	2.260	-	0.577	0.763
61	2.453	2.332	-	0.577	0.762	2.447	2.325	-	0.577	0.763
62	2.562	2.383	-	0.577	0.762	2.547	2.377	-	0.577	0.763
63	2.562	2.477	-	0.577	0.762	2.562	2.473	-	0.577	0.763
64	2.562	2.562	-	0.577	0.762	2.562	2.562	-	0.577	0.763

	$3000 Deductible					$3500 Deductible				
Age	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female
0	1.040	1.040	-	1.040	1.040	0.887	0.887	-	0.887	0.887
1	0.833	0.833	-	0.833	0.833	0.724	0.724	-	0.724	0.724
2	0.630	0.630	-	0.630	0.630	0.630	0.630	-	0.630	0.630
3	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
4	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
5	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
6	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
7	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
8	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
9	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
10	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
11	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
12	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
13	0.577	0.577	0.679	0.577	0.577	0.577	0.577	0.679	0.577	0.577
14	0.577	0.577	0.679	0.577	0.577	0.577	0.582	0.684	0.577	0.582
15	0.577	0.633	0.744	0.577	0.633	0.577	0.635	0.747	0.577	0.635
16	0.577	0.648	0.760	0.577	0.648	0.577	0.640	0.753	0.577	0.640
17	0.577	0.648	0.760	0.577	0.648	0.577	0.640	0.753	0.577	0.640
18	0.577	0.690	0.811	0.577	0.690	0.577	0.671	0.789	0.577	0.671
19	0.577	0.718	0.849	0.577	0.718	0.577	0.698	0.823	0.577	0.698
20	0.577	0.731	0.866	0.577	0.731	0.577	0.711	0.840	0.577	0.711
21	0.577	0.769	1.003	0.577	0.769	0.577	0.714	0.844	0.577	0.714
22	0.577	0.769	1.003	0.577	0.769	0.577	0.714	0.844	0.577	0.714
23	0.577	0.764	1.010	0.577	0.764	0.577	0.720	0.852	0.577	0.720
24	0.577	0.777	1.027	0.577	0.777	0.577	0.735	0.872	0.577	0.735
25	0.577	0.787	1.259	0.577	0.787	0.577	0.749	1.188	0.577	0.749
26	0.577	0.803	1.286	0.577	0.803	0.577	0.765	1.224	0.577	0.765
27	0.577	0.822	1.315	0.577	0.803	0.577	0.788	1.258	0.577	0.765
28	0.577	0.851	1.362	0.577	0.803	0.580	0.818	1.309	0.577	0.765
29	0.577	0.890	1.424	0.577	0.803	0.598	0.863	1.381	0.577	0.765
30	0.577	0.907	1.251	0.577	0.803	0.606	0.909	1.254	0.577	0.765
31	0.577	0.954	1.316	0.577	0.803	0.622	0.962	1.327	0.577	0.765
32	0.589	0.985	1.358	0.577	0.803	0.634	0.997	1.376	0.577	0.765
33	0.613	1.027	1.416	0.577	0.803	0.660	1.042	1.437	0.577	0.765
34	0.637	1.059	1.459	0.577	0.803	0.687	1.078	1.487	0.577	0.765
35	0.648	1.073	1.247	0.577	0.803	0.700	1.095	1.272	0.577	0.765
36	0.671	1.084	1.260	0.577	0.803	0.726	1.107	1.288	0.577	0.765
37	0.701	1.106	1.286	0.577	0.803	0.759	1.132	1.316	0.577	0.765
38	0.747	1.133	1.317	0.577	0.803	0.809	1.162	1.350	0.577	0.765
39	0.812	1.191	1.384	0.577	0.803	0.880	1.226	1.425	0.577	0.765
40	0.841	1.261	1.262	0.577	0.803	0.895	1.266	1.267	0.577	0.765
41	0.885	1.265	1.286	0.577	0.803	0.943	1.287	1.288	0.577	0.765
42	0.909	1.318	1.319	0.577	0.803	0.971	1.324	1.325	0.577	0.765
43	0.932	1.363	1.364	0.577	0.803	0.996	1.374	1.376	0.577	0.765
44	0.964	1.393	1.394	0.577	0.803	1.028	1.407	1.408	0.577	0.765
45	0.989	1.407	1.313	0.577	0.803	1.057	1.424	1.329	0.577	0.765
46	1.038	1.441	1.344	0.577	0.803	1.111	1.464	1.366	0.577	0.765
47	1.075	1.466	1.368	0.577	0.803	1.150	1.489	1.389	0.577	0.765
48	1.139	1.479	1.380	0.577	0.803	1.222	1.504	1.403	0.577	0.765
49	1.210	1.519	1.417	0.577	0.803	1.306	1.547	1.443	0.577	0.765
50	1.384	1.580	-	0.577	0.803	1.376	1.590	-	0.577	0.765
51	1.485	1.634	-	0.577	0.803	1.460	1.648	-	0.577	0.765
52	1.538	1.687	-	0.577	0.803	1.540	1.707	-	0.577	0.765
53	1.604	1.731	-	0.577	0.803	1.613	1.765	-	0.577	0.765
54	1.703	1.802	-	0.577	0.803	1.722	1.831	-	0.577	0.765
55	1.797	1.886	-	0.577	0.803	1.821	1.930	-	0.577	0.765
56	1.869	1.930	-	0.577	0.803	1.900	1.993	-	0.577	0.765
57	1.955	1.988	-	0.577	0.803	1.989	2.037	-	0.577	0.765
58	2.044	2.024	-	0.577	0.803	2.118	2.072	-	0.577	0.765
59	2.130	2.073	-	0.577	0.803	2.217	2.126	-	0.577	0.765
60	2.325	2.223	-	0.577	0.803	2.387	2.275	-	0.577	0.765
61	2.417	2.292	-	0.577	0.803	2.484	2.356	-	0.577	0.765
62	2.516	2.341	-	0.577	0.803	2.662	2.412	-	0.577	0.765
63	2.562	2.436	-	0.577	0.803	2.662	2.519	-	0.577	0.765
64	2.562	2.562	-	0.577	0.803	2.662	2.562	-	0.577	0.765

Age	$4000 Deductible					$5000 Deductible				
	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female
0	0.884	0.884	-	0.884	0.884	1.056	1.056	-	1.056	1.056
1	0.720	0.720	-	0.720	0.720	0.834	0.834	-	0.834	0.834
2	0.631	0.631	-	0.631	0.631	0.631	0.631	-	0.631	0.631
3	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
4	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
5	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
6	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
7	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
8	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
9	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
10	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
11	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
12	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
13	0.577	0.577	0.679	0.577	0.577	0.577	0.577	0.679	0.577	0.577
14	0.577	0.582	0.684	0.577	0.582	0.577	0.578	0.680	0.577	0.578
15	0.577	0.635	0.747	0.577	0.635	0.577	0.634	0.746	0.577	0.634
16	0.577	0.640	0.753	0.577	0.640	0.577	0.648	0.762	0.577	0.648
17	0.577	0.640	0.753	0.577	0.640	0.577	0.648	0.762	0.577	0.648
18	0.577	0.671	0.789	0.577	0.671	0.577	0.683	0.816	0.577	0.683
19	0.577	0.698	0.823	0.577	0.698	0.577	0.721	0.963	0.577	0.721
20	0.577	0.711	0.840	0.577	0.711	0.577	0.735	0.972	0.577	0.735
21	0.577	0.714	0.844	0.577	0.714	0.577	0.766	1.013	0.577	0.766
22	0.577	0.714	0.844	0.577	0.714	0.577	0.766	1.013	0.577	0.766
23	0.577	0.720	0.852	0.577	0.720	0.577	0.772	1.021	0.577	0.772
24	0.577	0.736	0.873	0.577	0.736	0.577	0.784	1.036	0.577	0.784
25	0.577	0.749	1.198	0.577	0.749	0.577	0.784	1.270	0.577	0.784
26	0.577	0.766	1.226	0.577	0.766	0.577	0.809	1.294	0.577	0.809
27	0.577	0.767	1.259	0.577	0.766	0.577	0.827	1.323	0.577	0.809
28	0.599	0.820	1.312	0.577	0.766	0.577	0.866	1.370	0.577	0.809
29	0.598	0.863	1.361	0.577	0.766	0.577	0.895	1.432	0.577	0.809
30	0.606	0.911	1.255	0.577	0.766	0.577	0.906	1.249	0.577	0.809
31	0.621	0.963	1.328	0.577	0.766	0.577	0.863	1.314	0.577	0.809
32	0.633	0.968	1.376	0.577	0.766	0.583	0.893	1.366	0.577	0.809
33	0.661	1.043	1.438	0.577	0.766	0.608	1.024	1.412	0.577	0.809
34	0.668	1.079	1.488	0.577	0.766	0.631	1.064	1.453	0.577	0.809
35	0.700	1.096	1.274	0.577	0.766	0.642	1.068	1.241	0.577	0.809
36	0.725	1.108	1.287	0.577	0.766	0.664	1.079	1.254	0.577	0.809
37	0.757	1.133	1.317	0.577	0.766	0.693	1.100	1.278	0.577	0.809
38	0.807	1.163	1.351	0.577	0.766	0.738	1.127	1.310	0.577	0.809
39	0.878	1.227	1.426	0.577	0.766	0.802	1.184	1.378	0.577	0.809
40	0.894	1.266	1.266	0.577	0.766	0.834	1.260	1.261	0.577	0.809
41	0.942	1.268	1.269	0.577	0.766	0.876	1.263	1.264	0.577	0.809
42	0.970	1.326	1.326	0.577	0.766	0.900	1.316	1.316	0.577	0.809
43	0.994	1.376	1.376	0.577	0.766	0.922	1.360	1.361	0.577	0.809
44	1.028	1.408	1.409	0.577	0.766	0.954	1.389	1.390	0.577	0.809
45	1.057	1.428	1.330	0.577	0.766	0.979	1.402	1.308	0.577	0.809
46	1.111	1.486	1.387	0.577	0.766	1.026	1.437	1.341	0.577	0.809
47	1.149	1.486	1.389	0.577	0.766	1.062	1.460	1.362	0.577	0.809
48	1.222	1.504	1.403	0.577	0.766	1.125	1.472	1.373	0.577	0.809
49	1.302	1.547	1.443	0.577	0.766	1.194	1.511	1.410	0.577	0.809
50	1.376	1.590	-	0.577	0.766	1.385	1.576	-	0.577	0.809
51	1.459	1.647	-	0.577	0.766	1.464	1.629	-	0.577	0.809
52	1.539	1.708	-	0.577	0.766	1.535	1.680	-	0.577	0.809
53	1.612	1.765	-	0.577	0.766	1.600	1.723	-	0.577	0.809
54	1.727	1.835	-	0.577	0.766	1.697	1.792	-	0.577	0.809
55	1.818	1.926	-	0.577	0.766	1.780	1.877	-	0.577	0.809
56	1.898	1.991	-	0.577	0.766	1.850	1.919	-	0.577	0.809
57	1.985	2.035	-	0.577	0.766	1.944	1.976	-	0.577	0.809
58	2.104	2.070	-	0.577	0.766	2.032	2.012	-	0.577	0.809
59	2.202	2.126	-	0.577	0.766	2.116	2.060	-	0.577	0.809
60	2.305	2.274	-	0.577	0.766	2.309	2.209	-	0.577	0.809
61	2.479	2.358	-	0.577	0.766	2.400	2.278	-	0.577	0.809
62	2.562	2.410	-	0.577	0.766	2.491	2.326	-	0.577	0.809
63	2.562	2.510	-	0.577	0.766	2.562	2.416	-	0.577	0.809
64	2.562	2.562	-	0.577	0.766	2.562	2.546	-	0.577	0.809

	$5500 Deductible					$6500 Deductible				
Age	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female
0	0.880	0.880	-	0.880	0.880	1.056	1.056	-	1.056	1.056
1	0.725	0.725	-	0.725	0.725	0.834	0.834	-	0.834	0.834
2	0.631	0.631	-	0.631	0.631	0.631	0.631	-	0.631	0.631
3	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
4	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
5	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
6	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
7	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
8	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
9	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
10	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
11	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
12	0.577	0.577	-	0.577	0.577	0.577	0.577	-	0.577	0.577
13	0.577	0.577	0.679	0.577	0.577	0.577	0.577	0.679	0.577	0.577
14	0.577	0.582	0.684	0.577	0.582	0.577	0.578	0.680	0.577	0.578
15	0.577	0.638	0.749	0.577	0.638	0.577	0.634	0.746	0.577	0.634
16	0.577	0.641	0.754	0.577	0.641	0.577	0.648	0.762	0.577	0.648
17	0.577	0.641	0.754	0.577	0.641	0.577	0.648	0.762	0.577	0.648
18	0.577	0.672	0.790	0.577	0.672	0.577	0.693	0.815	0.577	0.693
19	0.577	0.699	0.824	0.577	0.699	0.577	0.721	0.853	0.577	0.721
20	0.577	0.712	0.841	0.577	0.712	0.577	0.735	0.872	0.577	0.735
21	0.577	0.716	0.847	0.577	0.716	0.577	0.766	1.013	0.577	0.766
22	0.577	0.716	0.847	0.577	0.716	0.577	0.768	1.013	0.577	0.768
23	0.577	0.721	0.853	0.577	0.721	0.577	0.772	1.021	0.577	0.772
24	0.577	0.737	0.874	0.577	0.737	0.577	0.784	1.038	0.577	0.784
25	0.577	0.761	1.202	0.577	0.761	0.577	0.794	1.270	0.577	0.794
26	0.577	0.770	1.232	0.577	0.770	0.577	0.809	1.294	0.577	0.809
27	0.579	0.790	1.264	0.577	0.770	0.577	0.827	1.323	0.577	0.809
28	0.581	0.823	1.317	0.577	0.770	0.577	0.858	1.370	0.577	0.809
29	0.600	0.897	1.387	0.577	0.770	0.577	0.896	1.432	0.577	0.809
30	0.608	0.915	1.262	0.577	0.770	0.577	0.908	1.249	0.577	0.809
31	0.626	0.967	1.333	0.577	0.770	0.577	0.953	1.314	0.577	0.809
32	0.638	1.002	1.382	0.577	0.770	0.583	0.983	1.356	0.577	0.809
33	0.666	1.048	1.445	0.577	0.770	0.638	1.024	1.412	0.577	0.809
34	0.692	1.083	1.493	0.577	0.770	0.631	1.064	1.453	0.577	0.809
35	0.705	1.100	1.278	0.577	0.770	0.642	1.068	1.241	0.577	0.809
36	0.730	1.113	1.293	0.577	0.770	0.664	1.079	1.254	0.577	0.809
37	0.762	1.138	1.322	0.577	0.770	0.693	1.100	1.278	0.577	0.809
38	0.812	1.166	1.357	0.577	0.770	0.738	1.127	1.310	0.577	0.809
39	0.883	1.232	1.432	0.577	0.770	0.802	1.184	1.376	0.577	0.809
40	0.898	1.273	1.274	0.577	0.770	0.834	1.280	1.261	0.577	0.809
41	0.948	1.284	1.295	0.577	0.770	0.876	1.283	1.284	0.577	0.809
42	0.976	1.332	1.333	0.577	0.770	0.900	1.316	1.316	0.577	0.809
43	1.000	1.382	1.383	0.577	0.770	0.922	1.360	1.361	0.577	0.809
44	1.033	1.416	1.416	0.577	0.770	0.954	1.388	1.390	0.577	0.809
45	1.062	1.433	1.337	0.577	0.770	0.979	1.402	1.308	0.577	0.809
46	1.116	1.472	1.373	0.577	0.770	1.028	1.437	1.341	0.577	0.809
47	1.165	1.404	1.394	0.577	0.770	1.062	1.460	1.382	0.577	0.809
48	1.227	1.509	1.408	0.577	0.770	1.125	1.472	1.373	0.577	0.809
49	1.310	1.552	1.448	0.577	0.770	1.194	1.511	1.410	0.577	0.809
50	1.388	1.596	-	0.577	0.770	1.385	1.576	-	0.577	0.809
51	1.465	1.663	-	0.577	0.770	1.484	1.629	-	0.577	0.809
52	1.544	1.712	-	0.577	0.770	1.535	1.680	-	0.577	0.809
53	1.618	1.761	-	0.577	0.770	1.600	1.723	-	0.577	0.809
54	1.742	1.842	-	0.577	0.770	1.697	1.792	-	0.577	0.809
55	1.831	1.944	-	0.577	0.770	1.780	1.877	-	0.577	0.809
56	1.910	2.004	-	0.577	0.770	1.860	1.918	-	0.577	0.809
57	1.994	2.060	-	0.577	0.770	1.944	1.976	-	0.577	0.809
58	2.127	2.082	-	0.577	0.770	2.032	2.012	-	0.577	0.809
59	2.227	2.138	-	0.577	0.770	2.116	2.060	-	0.577	0.809
60	2.397	2.265	-	0.577	0.770	2.309	2.209	-	0.577	0.809
61	2.469	2.377	-	0.577	0.770	2.400	2.276	-	0.577	0.809
62	2.562	2.428	-	0.577	0.770	2.491	2.326	-	0.577	0.809
63	2.562	2.530	-	0.577	0.770	2.562	2.418	-	0.577	0.809
64	2.562	2.562	-	0.577	0.770	2.562	2.546	-	0.577	0.809

Case Characteristics Age & Area Factor Exhibit
HSA Plus Age Factors

Case Characteristics Summary			
	Minimum	Maximum	Range
Age/Gende	0.579	2.662	4.425
Area	0.9647	1.0881	1.126
Industry	1.000	1.000	1.000
Product	0.659	2.783	4.862

Maternity Case Characteristics Summary			
	Minimum	Maximum	Range
Age/Gende	0.726	1.477	2.034
Area	0.9647	1.0881	1.126
Industry	1.000	1.000	1.000
Product	0.700	1.604	2.290

AREA	Area Factor Current
Area 1	1.0881
Area 2	0.9716
Area 3	1.0006
Area 4	0.9855
Area 5	0.9647
Area 6	1.0596
Area 7	1.0628
Area 8	1.0486

Maternity Rider	
Age	Multiplier
13-18	2.178
19-24	2.322
25-29	2.600
30-34	2.379
35-39	2.162
40-44	2.001
45-49	1.933

	$1600 Deductible					$1750 Deductible				
Age	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female
0	1.047	1.047	-	1.047	1.047	1.054	1.054	-	1.054	1.054
1	0.872	0.872	-	0.872	0.872	0.877	0.877	-	0.877	0.877
2	0.677	0.677	-	0.677	0.677	0.678	0.678	-	0.678	0.678
3	0.637	0.637	-	0.637	0.637	0.638	0.638	-	0.638	0.638
4	0.635	0.631	-	0.635	0.631	0.638	0.632	-	0.638	0.632
5	0.635	0.631	-	0.635	0.631	0.638	0.632	-	0.638	0.632
6	0.629	0.629	-	0.629	0.629	0.630	0.630	-	0.630	0.630
7	0.629	0.629	-	0.629	0.629	0.630	0.630	-	0.630	0.630
8	0.629	0.629	-	0.629	0.629	0.630	0.630	-	0.630	0.630
9	0.629	0.629	-	0.629	0.629	0.630	0.630	-	0.630	0.630
10	0.629	0.629	-	0.629	0.629	0.630	0.630	-	0.630	0.630
11	0.629	0.629	-	0.629	0.629	0.630	0.630	-	0.630	0.630
12	0.629	0.629	-	0.629	0.629	0.630	0.630	-	0.630	0.630
13	0.617	0.617	0.726	0.617	0.617	0.618	0.618	0.727	0.618	0.618
14	0.617	0.617	0.726	0.617	0.617	0.618	0.618	0.727	0.618	0.618
15	0.617	0.674	0.793	0.617	0.674	0.618	0.676	0.794	0.618	0.676
16	0.617	0.686	0.807	0.617	0.686	0.618	0.687	0.808	0.618	0.687
17	0.617	0.686	0.807	0.617	0.686	0.618	0.687	0.808	0.618	0.687
18	0.617	0.730	0.858	0.617	0.730	0.618	0.732	0.861	0.618	0.732
19	0.590	0.730	0.985	0.590	0.730	0.590	0.732	0.988	0.590	0.732
20	0.590	0.744	0.984	0.590	0.744	0.590	0.746	0.986	0.590	0.746
21	0.590	0.767	1.014	0.590	0.767	0.590	0.770	1.018	0.590	0.770
22	0.590	0.767	1.014	0.590	0.767	0.590	0.770	1.018	0.590	0.770
23	0.579	0.767	1.001	0.579	0.767	0.579	0.760	1.005	0.579	0.760
24	0.579	0.770	1.018	0.579	0.770	0.579	0.773	1.022	0.579	0.773
25	0.579	0.782	1.251	0.579	0.782	0.579	0.785	1.256	0.579	0.785
26	0.579	0.797	1.276	0.579	0.797	0.579	0.800	1.280	0.579	0.800
27	0.579	0.816	1.306	0.579	0.797	0.579	0.819	1.310	0.579	0.800
28	0.579	0.845	1.352	0.579	0.797	0.579	0.848	1.357	0.579	0.800
29	0.579	0.886	1.418	0.579	0.797	0.579	0.889	1.422	0.579	0.800
30	0.579	0.907	1.251	0.579	0.797	0.579	0.909	1.254	0.579	0.800
31	0.586	0.956	1.316	0.579	0.797	0.586	0.958	1.321	0.579	0.800
32	0.599	0.988	1.362	0.579	0.797	0.598	0.989	1.364	0.579	0.800
33	0.623	1.031	1.422	0.579	0.797	0.622	1.032	1.423	0.579	0.800
34	0.647	1.084	1.497	0.579	0.797	0.646	1.085	1.469	0.579	0.800
35	0.657	1.079	1.254	0.579	0.797	0.656	1.080	1.255	0.579	0.800
36	0.679	1.090	1.267	0.579	0.797	0.678	1.091	1.268	0.579	0.800
37	0.710	1.112	1.292	0.579	0.797	0.709	1.114	1.294	0.579	0.800
38	0.756	1.140	1.325	0.579	0.797	0.755	1.141	1.326	0.579	0.800
39	0.821	1.197	1.391	0.579	0.797	0.820	1.199	1.393	0.579	0.800
40	0.849	1.262	1.263	0.579	0.797	0.849	1.265	1.266	0.579	0.800
41	0.893	1.287	1.288	0.579	0.797	0.893	1.290	1.291	0.579	0.800
42	0.918	1.319	1.320	0.579	0.797	0.917	1.322	1.323	0.579	0.800
43	0.940	1.363	1.364	0.579	0.797	0.940	1.366	1.367	0.579	0.800
44	0.971	1.393	1.394	0.579	0.797	0.971	1.396	1.397	0.579	0.800
45	0.996	1.403	1.309	0.579	0.797	0.996	1.407	1.313	0.579	0.800
46	1.043	1.435	1.339	0.579	0.797	1.043	1.439	1.343	0.579	0.800
47	1.079	1.453	1.356	0.579	0.797	1.079	1.458	1.360	0.579	0.800
48	1.141	1.467	1.369	0.579	0.797	1.142	1.472	1.373	0.579	0.800
49	1.207	1.505	1.404	0.579	0.797	1.209	1.511	1.410	0.579	0.800
50	1.361	1.557	-	0.579	0.797	1.366	1.564	-	0.579	0.800
51	1.431	1.606	-	0.579	0.797	1.438	1.614	-	0.579	0.800
52	1.503	1.652	-	0.579	0.797	1.510	1.661	-	0.579	0.800
53	1.567	1.689	-	0.579	0.797	1.574	1.700	-	0.579	0.800
54	1.645	1.752	-	0.579	0.797	1.656	1.764	-	0.579	0.800
55	1.726	1.825	-	0.579	0.797	1.739	1.839	-	0.579	0.800
56	1.787	1.886	-	0.579	0.797	1.802	1.880	-	0.579	0.800
57	1.861	1.911	-	0.579	0.797	1.876	1.927	-	0.579	0.800
58	1.953	1.944	-	0.579	0.797	1.969	1.961	-	0.579	0.800
59	2.029	1.988	-	0.579	0.797	2.047	2.006	-	0.579	0.800
60	2.193	2.123	-	0.579	0.797	2.216	2.143	-	0.579	0.800
61	2.259	2.175	-	0.579	0.797	2.287	2.198	-	0.579	0.800
62	2.331	2.217	-	0.579	0.797	2.362	2.242	-	0.579	0.800
63	2.397	2.285	-	0.579	0.797	2.426	2.314	-	0.579	0.800
64	2.460	2.385	-	0.579	0.797	2.478	2.419	-	0.579	0.800
65+	2.662	2.662	-	0.579	0.797	2.662	2.662	-	0.579	0.800

HSA Plus Age Factors

	$2500 Deductible					$3000 Deductible				
Age	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female
0	1.076	1.076	-	1.076	1.076	1.090	1.090	-	1.000	1.090
1	0.891	0.891	-	0.891	0.891	0.900	0.900	-	0.900	0.900
2	0.682	0.682	-	0.682	0.682	0.684	0.684	-	0.684	0.684
3	0.641	0.641	-	0.641	0.641	0.643	0.643	-	0.643	0.643
4	0.638	0.634	-	0.638	0.634	0.640	0.636	-	0.640	0.636
5	0.638	0.634	-	0.638	0.634	0.640	0.636	-	0.640	0.636
6	0.631	0.631	-	0.631	0.631	0.632	0.632	-	0.632	0.632
7	0.631	0.631	-	0.631	0.631	0.632	0.632	-	0.632	0.632
8	0.631	0.631	-	0.631	0.631	0.632	0.632	-	0.632	0.632
9	0.631	0.631	-	0.631	0.631	0.632	0.632	-	0.632	0.632
10	0.631	0.631	-	0.631	0.631	0.632	0.632	-	0.632	0.632
11	0.631	0.631	-	0.631	0.631	0.632	0.632	-	0.632	0.632
12	0.631	0.631	-	0.631	0.631	0.632	0.632	-	0.632	0.632
13	0.619	0.619	0.728	0.619	0.619	0.620	0.620	0.728	0.620	0.620
14	0.619	0.619	0.728	0.619	0.619	0.620	0.620	0.729	0.620	0.620
15	0.619	0.678	0.797	0.619	0.678	0.620	0.680	0.800	0.620	0.680
16	0.619	0.691	0.813	0.619	0.691	0.620	0.694	0.816	0.620	0.694
17	0.619	0.691	0.813	0.619	0.691	0.620	0.694	0.816	0.620	0.694
18	0.619	0.738	0.868	0.619	0.738	0.620	0.742	0.873	0.620	0.742
19	0.591	0.738	0.976	0.591	0.738	0.591	0.742	0.981	0.591	0.742
20	0.591	0.761	0.993	0.591	0.761	0.591	0.765	0.998	0.591	0.765
21	0.591	0.778	1.029	0.591	0.778	0.591	0.784	1.036	0.591	0.784
22	0.591	0.778	1.029	0.591	0.778	0.591	0.784	1.036	0.591	0.784
23	0.580	0.768	1.015	0.580	0.768	0.580	0.774	1.023	0.580	0.774
24	0.580	0.781	1.032	0.580	0.781	0.580	0.787	1.040	0.580	0.787
25	0.580	0.792	1.267	0.580	0.792	0.580	0.797	1.276	0.580	0.797
26	0.580	0.808	1.293	0.580	0.808	0.580	0.813	1.301	0.580	0.813
27	0.580	0.827	1.323	0.580	0.808	0.580	0.832	1.331	0.580	0.813
28	0.580	0.856	1.370	0.580	0.808	0.580	0.862	1.379	0.580	0.813
29	0.580	0.896	1.434	0.580	0.808	0.580	0.901	1.442	0.580	0.813
30	0.580	0.914	1.260	0.580	0.808	0.580	0.917	1.265	0.580	0.813
31	0.582	0.982	1.327	0.580	0.808	0.580	0.985	1.331	0.580	0.813
32	0.594	0.993	1.369	0.580	0.808	0.592	0.998	1.373	0.580	0.813
33	0.618	1.038	1.429	0.580	0.808	0.616	1.038	1.431	0.580	0.813
34	0.643	1.068	1.473	0.580	0.808	0.641	1.070	1.476	0.580	0.813
35	0.653	1.084	1.260	0.580	0.808	0.651	1.087	1.263	0.580	0.813
36	0.676	1.096	1.272	0.580	0.808	0.675	1.098	1.276	0.580	0.813
37	0.707	1.118	1.299	0.580	0.808	0.705	1.121	1.303	0.580	0.813
38	0.763	1.145	1.330	0.580	0.808	0.761	1.148	1.334	0.580	0.813
39	0.818	1.204	1.399	0.580	0.808	0.816	1.207	1.403	0.580	0.813
40	0.847	1.273	1.274	0.580	0.808	0.846	1.276	1.280	0.580	0.813
41	0.891	1.288	1.299	0.580	0.808	0.890	1.303	1.304	0.580	0.813
42	0.916	1.331	1.332	0.580	0.808	0.914	1.337	1.338	0.580	0.813
43	0.938	1.376	1.377	0.580	0.808	0.937	1.382	1.383	0.580	0.813
44	0.970	1.406	1.407	0.580	0.808	0.970	1.413	1.414	0.580	0.813
45	0.995	1.418	1.323	0.580	0.808	0.994	1.426	1.330	0.580	0.813
46	1.043	1.452	1.355	0.580	0.808	1.043	1.460	1.362	0.580	0.813
47	1.080	1.474	1.375	0.580	0.808	1.080	1.485	1.386	0.580	0.813
48	1.143	1.488	1.388	0.580	0.808	1.144	1.499	1.399	0.580	0.813
49	1.213	1.528	1.426	0.580	0.808	1.218	1.539	1.436	0.580	0.813
50	1.380	1.686	-	0.580	0.808	1.390	1.698	-	0.580	0.813
51	1.458	1.637	-	0.580	0.808	1.471	1.653	-	0.580	0.813
52	1.530	1.689	-	0.580	0.808	1.544	1.707	-	0.580	0.813
53	1.596	1.731	-	0.580	0.808	1.611	1.752	-	0.580	0.813
54	1.668	1.789	-	0.580	0.808	1.710	1.823	-	0.580	0.813
55	1.777	1.878	-	0.580	0.808	1.803	1.904	-	0.580	0.813
56	1.846	1.921	-	0.580	0.808	1.875	1.949	-	0.580	0.813
57	1.928	1.976	-	0.580	0.808	1.961	2.007	-	0.580	0.813
58	2.018	2.011	-	0.580	0.808	2.051	2.044	-	0.580	0.813
59	2.101	2.059	-	0.580	0.808	2.137	2.093	-	0.580	0.813
60	2.288	2.204	-	0.580	0.808	2.332	2.245	-	0.580	0.813
61	2.369	2.268	-	0.580	0.808	2.424	2.314	-	0.580	0.813
62	2.466	2.316	-	0.580	0.808	2.518	2.364	-	0.580	0.813
63	2.512	2.402	-	0.580	0.808	2.562	2.460	-	0.580	0.813
64	2.533	2.620	-	0.580	0.808	2.562	2.562	-	0.580	0.813
65+	2.562	2.562	-	0.580	0.808	2.562	2.562	-	0.580	0.813

HSA Plus Age Factors

Age	$3500 Deductible					$5000 Deductible				
	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female
0	1.098	1.098	-	1.098	1.098	1.122	1.122	-	1.122	1.122
1	0.905	0.905	-	0.905	0.905	0.920	0.920	-	0.920	0.920
2	0.687	0.687	-	0.687	0.687	0.696	0.696	-	0.696	0.696
3	0.646	0.646	-	0.646	0.646	0.654	0.654	-	0.654	0.654
4	0.643	0.637	-	0.643	0.637	0.650	0.641	-	0.650	0.641
5	0.643	0.637	-	0.643	0.637	0.650	0.641	-	0.650	0.641
6	0.633	0.633	-	0.633	0.633	0.637	0.637	-	0.637	0.637
7	0.633	0.633	-	0.633	0.633	0.637	0.637	-	0.637	0.637
8	0.633	0.633	-	0.633	0.633	0.637	0.637	-	0.637	0.637
9	0.633	0.633	-	0.633	0.633	0.637	0.637	-	0.637	0.637
10	0.633	0.633	-	0.633	0.633	0.637	0.637	-	0.637	0.637
11	0.633	0.633	-	0.633	0.633	0.637	0.637	-	0.637	0.637
12	0.633	0.633	-	0.633	0.633	0.637	0.637	-	0.637	0.637
13	0.622	0.622	0.731	0.622	0.622	0.626	0.626	0.736	0.626	0.626
14	0.622	0.622	0.731	0.622	0.622	0.626	0.627	0.737	0.626	0.627
15	0.622	0.682	0.802	0.622	0.682	0.626	0.687	0.809	0.626	0.687
16	0.622	0.696	0.818	0.622	0.696	0.626	0.702	0.826	0.626	0.702
17	0.622	0.696	0.818	0.622	0.696	0.626	0.702	0.826	0.626	0.702
18	0.622	0.744	0.875	0.622	0.744	0.626	0.751	0.883	0.626	0.751
19	0.591	0.744	0.984	0.591	0.744	0.592	0.749	0.990	0.592	0.749
20	0.591	0.757	1.001	0.591	0.757	0.592	0.763	1.009	0.592	0.763
21	0.591	0.787	1.040	0.591	0.787	0.592	0.795	1.051	0.592	0.795
22	0.591	0.787	1.040	0.591	0.787	0.592	0.795	1.051	0.592	0.795
23	0.580	0.777	1.027	0.580	0.777	0.581	0.785	1.039	0.581	0.785
24	0.580	0.790	1.044	0.580	0.790	0.581	0.798	1.055	0.581	0.798
25	0.580	0.800	1.260	0.580	0.800	0.581	0.808	1.293	0.581	0.808
26	0.580	0.816	1.306	0.580	0.816	0.581	0.824	1.318	0.581	0.824
27	0.580	0.835	1.336	0.580	0.816	0.581	0.842	1.347	0.581	0.824
28	0.580	0.866	1.384	0.580	0.816	0.581	0.872	1.395	0.581	0.824
29	0.580	0.904	1.446	0.580	0.816	0.581	0.911	1.458	0.581	0.824
30	0.581	0.916	1.266	0.580	0.816	0.582	0.921	1.270	0.581	0.824
31	0.581	0.968	1.332	0.580	0.816	0.582	0.968	1.336	0.581	0.824
32	0.591	0.997	1.376	0.580	0.816	0.588	0.999	1.378	0.581	0.824
33	0.615	1.039	1.433	0.580	0.816	0.613	1.041	1.438	0.581	0.824
34	0.640	1.070	1.476	0.580	0.816	0.636	1.071	1.477	0.581	0.824
35	0.650	1.088	1.264	0.580	0.816	0.647	1.089	1.266	0.581	0.824
36	0.674	1.099	1.277	0.580	0.816	0.669	1.100	1.278	0.581	0.824
37	0.703	1.121	1.303	0.580	0.816	0.698	1.121	1.303	0.581	0.824
38	0.749	1.148	1.334	0.580	0.816	0.744	1.149	1.336	0.581	0.824
39	0.814	1.207	1.403	0.580	0.816	0.808	1.207	1.403	0.581	0.824
40	0.845	1.231	1.282	0.580	0.816	0.841	1.288	1.287	0.581	0.824
41	0.888	1.305	1.306	0.580	0.816	0.883	1.310	1.311	0.581	0.824
42	0.913	1.338	1.339	0.580	0.816	0.908	1.342	1.343	0.581	0.824
43	0.936	1.364	1.385	0.580	0.816	0.930	1.368	1.389	0.581	0.824
44	0.968	1.414	1.416	0.580	0.816	0.962	1.418	1.418	0.581	0.824
45	0.992	1.427	1.331	0.580	0.816	0.988	1.429	1.333	0.581	0.824
46	1.041	1.481	1.383	0.580	0.816	1.033	1.486	1.387	0.581	0.824
47	1.077	1.486	1.388	0.580	0.816	1.069	1.488	1.388	0.581	0.824
48	1.141	1.500	1.400	0.580	0.816	1.133	1.501	1.400	0.581	0.824
49	1.213	1.539	1.436	0.580	0.816	1.202	1.540	1.437	0.581	0.824
50	1.391	1.600	-	0.580	0.816	1.393	1.603	-	0.581	0.824
51	1.472	1.654	-	0.580	0.816	1.473	1.657	-	0.581	0.824
52	1.544	1.708	-	0.580	0.816	1.544	1.709	-	0.581	0.824
53	1.611	1.752	-	0.580	0.816	1.610	1.753	-	0.581	0.824
54	1.709	1.823	-	0.580	0.816	1.707	1.823	-	0.581	0.824
55	1.802	1.904	-	0.580	0.816	1.799	1.904	-	0.581	0.824
56	1.874	1.948	-	0.580	0.816	1.869	1.948	-	0.581	0.824
57	1.959	2.008	-	0.580	0.816	1.953	2.004	-	0.581	0.824
58	2.049	2.043	-	0.580	0.816	2.042	2.041	-	0.581	0.824
59	2.134	2.092	-	0.580	0.816	2.126	2.089	-	0.581	0.824
60	2.329	2.244	-	0.580	0.816	2.319	2.240	-	0.581	0.824
61	2.421	2.313	-	0.580	0.816	2.411	2.310	-	0.581	0.824
62	2.514	2.393	-	0.580	0.816	2.502	2.389	-	0.581	0.824
63	2.562	2.458	-	0.580	0.816	2.562	2.452	-	0.581	0.824
64	2.562	2.562	-	0.580	0.816	2.562	2.562	-	0.581	0.824
65+	2.562	2.562	-	0.580	0.816	2.562	2.562	-	0.581	0.824

HSA Plus Age Factors

	$5500 Deductible				
Age	Single Male	Non-Mat Female	Maternity Rider	Child Male	Child Female
0	1.122	1.122	-	1.122	1.122
1	0.920	0.920	-	0.920	0.920
2	0.696	0.696	-	0.696	0.696
3	0.654	0.654	-	0.654	0.654
4	0.650	0.641	-	0.650	0.641
5	0.650	0.641	-	0.650	0.641
6	0.637	0.637	-	0.637	0.637
7	0.637	0.637	-	0.637	0.637
8	0.637	0.637	-	0.637	0.637
9	0.637	0.637	-	0.637	0.637
10	0.637	0.637	-	0.637	0.637
11	0.637	0.637	-	0.637	0.637
12	0.637	0.637	-	0.637	0.637
13	0.626	0.626	0.736	0.626	0.626
14	0.626	0.627	0.737	0.626	0.627
15	0.626	0.667	0.808	0.626	0.667
16	0.626	0.702	0.826	0.626	0.702
17	0.626	0.702	0.826	0.626	0.702
18	0.626	0.751	0.883	0.626	0.751
19	0.592	0.749	0.990	0.592	0.749
20	0.592	0.763	1.009	0.592	0.763
21	0.592	0.795	1.051	0.592	0.795
22	0.592	0.795	1.051	0.592	0.795
23	0.581	0.786	1.039	0.581	0.786
24	0.581	0.798	1.056	0.581	0.798
25	0.581	0.808	1.283	0.581	0.808
26	0.581	0.824	1.318	0.581	0.824
27	0.581	0.842	1.347	0.581	0.824
28	0.581	0.872	1.395	0.581	0.824
29	0.581	0.911	1.459	0.581	0.824
30	0.582	0.921	1.270	0.581	0.824
31	0.582	0.968	1.336	0.581	0.824
32	0.588	0.999	1.378	0.581	0.824
33	0.613	1.041	1.436	0.581	0.824
34	0.636	1.071	1.477	0.581	0.824
35	0.647	1.089	1.265	0.581	0.824
36	0.669	1.100	1.278	0.581	0.824
37	0.698	1.121	1.303	0.581	0.824
38	0.744	1.149	1.335	0.581	0.824
39	0.808	1.207	1.403	0.581	0.824
40	0.841	1.268	1.287	0.581	0.824
41	0.883	1.310	1.311	0.581	0.824
42	0.908	1.342	1.343	0.581	0.824
43	0.930	1.368	1.389	0.581	0.824
44	0.962	1.418	1.419	0.581	0.824
45	0.988	1.429	1.333	0.581	0.824
46	1.033	1.465	1.367	0.581	0.824
47	1.069	1.488	1.388	0.581	0.824
48	1.133	1.501	1.400	0.581	0.824
49	1.202	1.540	1.437	0.581	0.824
50	1.393	1.603	-	0.581	0.824
51	1.473	1.657	-	0.581	0.824
52	1.544	1.709	-	0.581	0.824
53	1.610	1.753	-	0.581	0.824
54	1.707	1.823	-	0.581	0.824
55	1.799	1.904	-	0.581	0.824
56	1.869	1.946	-	0.581	0.824
57	1.953	2.004	-	0.581	0.824
58	2.042	2.041	-	0.581	0.824
59	2.126	2.069	-	0.581	0.824
60	2.319	2.240	-	0.581	0.824
61	2.411	2.310	-	0.581	0.824
62	2.502	2.359	-	0.581	0.824
63	2.562	2.452	-	0.581	0.824
64	2.562	2.562	-	0.581	0.824
65+	2.562	2.562	-	0.581	0.824

Example of Age/Gender Factor Calculation

HSA Plus, $2,500 Deductible

Example 1:	Gender	Age	Factor
Subscriber	M	35	0.653
Dependent	F	13	0.619
Total Age Factor for Policy			**1.272**

Example 2:	Gender	Age	Factor
Subscriber **	F	42	1.331
Dependent***	M	40	0.762
Dependent	F	20	0.751
Dependent	M	17	0.619
Dependent	F	14	0.619
Dependent *	M	7	0
Dependent *	F	3	0
Total Age Factor for Policy			**4.082**

* Only 3 oldest children used in calculation.
** Non Maternity Example
*** Spouse Discount - Calculated as .847*.90

Kentucky Individual - LumenosHSA
Experience through October 2010 runout through November 2010

REPORT PERIOD	MEMBERS	PREMIUM	Completed CLAIMS	PREMIUM PMPM	CLAIM PMPM	12-Month Loss Ratio
200905	76	6,405	335	$84.16	$4.40	-
200906	488	53,207	9,304	$108.98	$19.06	-
200907	1,127	121,592	50,788	$107.94	$45.06	-
200908	1,754	189,687	54,855	$108.13	$31.27	-
200909	2,489	271,948	96,738	$109.27	$38.87	-
200910	3,228	355,272	189,840	$110.05	$58.81	-
200911	3,906	438,807	502,398	$112.34	$128.62	-
200912	4,486	513,081	267,388	$114.37	$59.60	-
201001	5,773	672,051	324,711	$116.41	$56.24	-
201002	6,683	761,990	435,156	$117.01	$65.11	-
201003	7,842	899,282	628,236	$117.68	$82.21	-
201004	8,615	1,008,307	468,685	$117.04	$54.40	57.0%
201005	9,443	1,118,281	857,766	$118.42	$90.84	60.5%
201006	10,221	1,205,726	609,082	$117.97	$59.59	59.2%
201007	10,977	1,311,272	806,006	$119.45	$73.42	59.8%
201008	11,831	1,427,399	993,990	$120.65	$84.02	61.8%
201009	12,949	1,565,902	1,008,373	$120.93	$77.87	62.8%
201010	12,695	1,581,786	1,117,137	$122.67	$88.64	64.0%
201011	12,710	1,568,811	1,242,586	$123.43	$97.76	64.2%
November 09 - October 10	105,421	12,523,685	8,018,929	$118.80	$76.07	64.0%

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 1

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins	
	$1,500		$3,000		$5,000		$1,750		$3,000		$6,000		$10,000		$3,500	
	Single	Single	Single	Single	Single	Single	Single	Single	Family	Family	Family	Family	Family	Family	Family	Family
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	178.68	178.88	134.60	134.60	94.10	94.10	101.34	101.34	158.31	158.31	119.13	119.13	83.28	83.28	89.69	89.69
1	145.13	145.13	107.82	107.82	74.32	74.32	85.97	85.97	128.44	128.44	95.42	95.42	65.77	65.77	76.08	76.08
2	111.91	111.91	81.54	81.54	56.23	56.23	76.28	76.28	99.04	99.04	72.16	72.16	49.76	49.76	67.51	67.51
3	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
4	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
5	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
6	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
7	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
8	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
9	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
10	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
11	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
12	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
13	102.50	102.50	74.68	74.68	51.42	51.42	69.87	69.87	90.71	90.71	66.09	66.09	45.51	45.51	61.83	61.83
14	102.50	102.50	74.68	74.68	51.42	51.51	69.87	70.47	90.71	90.71	66.09	66.09	45.51	45.58	61.83	62.37
15	102.50	111.91	74.68	81.93	51.42	55.50	69.87	76.64	90.71	99.04	66.09	72.51	45.51	50.00	61.83	67.83
16	102.50	113.87	74.68	83.61	51.42	57.75	69.87	77.25	90.71	100.77	66.09	74.00	45.51	51.11	61.83	68.35
17	102.50	113.87	74.68	83.61	51.42	57.75	69.87	77.25	90.71	100.77	66.09	74.00	45.51	51.11	61.83	68.35
18	102.50	121.15	74.68	89.31	51.42	61.75	69.87	81.01	90.71	107.21	66.09	79.03	45.51	54.65	61.83	71.69
19	102.50	125.95	74.68	92.93	51.42	64.25	69.87	84.27	90.71	111.46	66.09	82.24	45.51	56.86	61.83	74.58
20	102.50	128.43	74.68	94.61	51.42	65.49	69.87	85.85	90.71	113.67	66.09	83.73	45.51	57.96	61.83	75.97
21	102.50	132.34	74.68	98.24	51.42	68.25	69.87	86.09	90.71	117.12	66.09	86.94	45.51	60.41	61.83	76.19
22	102.50	132.34	74.68	98.24	51.42	68.26	69.87	86.09	90.71	117.12	66.09	86.94	45.51	60.41	61.83	76.19
23	102.50	133.23	74.68	98.88	51.42	68.79	69.87	86.82	90.71	117.91	66.09	87.51	45.51	60.88	61.83	76.83
24	102.50	135.54	74.68	100.56	51.42	69.87	69.87	88.63	90.71	119.95	66.09	89.00	45.51	61.83	61.83	78.43
25	102.50	137.67	74.68	101.68	51.42	70.75	69.87	90.21	90.71	121.84	66.09	90.14	45.51	62.62	61.83	79.82
26	102.50	140.34	74.68	103.93	51.42	72.09	69.87	91.14	90.71	124.19	66.09	91.97	45.51	63.80	61.83	81.54
27	102.50	143.53	74.68	106.39	51.42	73.70	69.87	94.56	90.71	127.02	66.09	94.16	45.51	65.22	61.83	83.69
28	102.50	148.68	74.68	110.14	51.42	76.28	70.95	98.44	90.71	131.58	66.09	97.49	45.51	67.51	62.80	87.11
29	102.50	155.97	74.68	115.19	51.42	79.75	72.04	103.77	90.71	138.03	66.09	101.94	45.51	70.59	63.76	91.83
30	102.50	159.87	74.68	117.39	51.42	80.74	73.01	109.34	90.71	141.49	66.09	103.89	45.51	71.45	64.61	96.76
31	103.74	168.40	74.68	123.47	51.42	84.92	74.59	115.75	91.81	149.04	66.09	109.28	45.51	75.15	66.00	102.44
32	106.05	174.08	76.23	127.49	51.95	87.59	76.16	119.99	93.85	154.06	67.47	112.82	45.98	77.53	67.40	106.19
33	110.14	181.72	79.34	132.92	54.18	91.24	79.43	125.56	97.47	160.82	70.21	117.63	47.95	80.75	70.29	111.12
34	114.40	187.41	82.45	136.93	56.73	93.92	82.70	129.92	101.24	165.86	72.96	121.19	49.76	83.12	73.19	114.98
35	116.18	189.89	83.86	138.87	57.21	95.17	84.03	131.74	102.81	168.06	74.23	122.93	50.62	84.23	74.36	116.58
36	120.08	191.67	86.85	140.30	59.17	96.15	86.94	133.19	106.27	169.63	76.86	124.16	52.36	85.09	76.93	117.87
37	125.60	195.58	90.73	143.14	61.75	98.02	90.93	136.09	111.15	173.09	80.29	126.68	54.65	86.75	80.47	120.44
38	133.77	200.56	96.68	146.64	65.76	100.42	96.99	139.73	118.38	177.49	85.57	129.77	58.20	88.88	85.82	123.65
39	145.31	210.50	105.09	154.15	71.47	105.51	105.70	147.47	128.60	186.29	93.01	136.42	63.25	93.38	93.54	130.51
40	150.11	221.87	108.85	163.21	74.32	112.28	107.64	151.71	132.84	196.35	96.33	144.44	65.77	99.37	95.26	134.27
41	157.92	226.91	114.54	166.91	78.06	114.33	113.33	154.86	139.76	200.29	101.37	147.19	69.09	101.18	100.30	137.04
42	162.36	231.82	117.65	170.58	80.20	117.18	116.60	159.10	143.69	205.16	104.11	150.97	70.98	103.71	103.19	140.80
43	166.27	239.63	120.63	176.41	82.16	121.19	119.38	165.16	147.15	212.08	106.76	156.12	72.71	107.25	105.66	146.16
44	171.78	244.96	124.77	180.29	85.01	123.77	123.50	169.15	152.02	216.79	110.42	159.56	75.23	109.55	109.29	149.69
45	176.39	246.74	128.00	182.10	87.24	124.93	127.01	171.09	156.11	218.86	113.28	161.16	77.21	110.57	112.40	151.41
46	184.56	252.42	134.85	186.50	91.43	128.05	133.31	175.69	163.35	223.40	118.90	165.06	80.81	113.33	117.97	155.68
47	190.96	255.63	139.14	189.74	94.63	130.10	138.04	178.59	169.00	226.23	123.14	167.92	83.76	115.14	122.15	158.05
48	201.97	258.11	147.42	191.62	100.25	131.17	146.75	180.41	178.75	228.43	130.47	169.41	88.72	116.08	129.87	159.65
49	213.70	264.68	156.61	196.60	106.40	134.65	155.95	185.62	189.12	234.24	138.59	173.99	94.16	119.17	138.01	164.27
50	241.06	274.09	178.13	204.49	123.41	140.44	164.54	190.58	213.34	242.57	158.53	180.98	109.23	124.29	145.62	168.66
51	253.49	282.80	189.61	211.48	130.46	145.16	174.84	197.48	224.34	250.28	167.81	187.16	115.45	128.47	154.73	174.77
52	266.11	290.79	199.06	218.35	138.78	149.70	184.29	204.14	235.50	257.35	176.16	193.23	121.06	132.49	163.08	180.66
53	277.48	297.36	207.60	224.04	142.58	153.54	193.12	209.83	245.56	263.17	183.73	198.28	126.18	135.88	170.90	185.69
54	291.33	308.38	220.41	233.23	151.22	159.68	204.75	219.03	257.83	272.92	195.07	206.41	133.84	141.92	181.19	193.84
55	303.90	321.88	232.58	244.10	159.51	167.26	216.00	228.72	270.71	284.87	205.83	216.03	141.16	148.02	191.16	202.41
56	316.55	328.99	241.90	249.79	165.75	171.01	224.97	234.65	280.15	291.15	214.08	221.06	146.68	151.34	199.08	207.66
57	329.69	336.93	253.03	257.80	173.24	176.08	235.74	241.68	291.78	298.23	223.93	227.71	153.31	155.83	208.62	213.88
58	346.03	342.84	264.55	261.96	181.07	179.29	248.82	246.16	306.25	303.41	234.13	231.83	160.25	158.67	220.19	217.84
59	359.54	350.48	275.68	268.80	188.56	183.57	260.20	252.82	318.19	310.18	243.97	237.45	166.87	162.46	230.27	223.73
60	383.67	374.28	800.92	287.72	205.76	196.84	282.84	270.38	343.58	331.25	266.31	254.63	182.09	174.21	250.31	239.27
61	400.40	383.52	812.82	295.65	213.87	202.99	293.38	279.09	354.35	339.42	276.85	262.53	189.27	179.65	259.63	246.99
62	413.01	390.81	824.86	302.99	221.97	207.27	304.52	285.02	365.52	345.85	287.50	268.15	196.45	183.43	269.49	252.23
63	424.73	402.89	931.60	315.28	228.31	215.47	310.21	295.68	375.89	356.55	293.46	279.02	202.05	190.69	274.52	261.67
64	435.93	420.47	931.60	331.60	228.31	226.87	310.21	308.89	385.79	372.12	293.46	293.46	202.05	200.78	274.52	273.34

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 2

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins	
	$1,500		$3,000		$5,000		$1,750		$3,000		$6,000		$10,000		$3,500	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	160.03	160.03	120.42	120.42	84.19	84.19	90.66	90.66	141.62	141.62	106.57	106.57	74.50	74.50	80.23	80.23
1	129.83	129.83	96.45	96.45	66.49	66.49	78.91	76.91	114.90	114.90	85.36	85.36	58.84	58.84	68.06	68.06
2	100.11	100.11	72.94	72.94	50.30	50.30	68.24	68.24	88.60	88.60	64.55	64.55	44.52	44.52	60.39	60.39
3	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
4	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
5	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
6	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
7	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
8	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
9	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
10	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
11	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
12	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
13	91.69	91.69	66.81	66.81	45.99	45.99	62.50	62.50	81.15	81.15	59.12	59.12	40.71	40.71	55.31	55.31
14	91.69	91.69	66.81	66.81	45.99	46.07	62.50	63.84	81.15	81.15	59.12	59.12	40.71	40.77	55.31	55.79
15	91.69	100.11	66.81	73.29	45.99	50.54	62.50	68.56	81.15	88.60	59.12	64.86	40.71	44.73	55.31	60.67
16	91.69	101.86	66.81	74.79	45.99	51.66	62.50	69.10	81.15	90.15	59.12	66.19	40.71	45.72	55.31	61.16
17	91.69	101.86	66.81	74.79	45.99	51.66	62.50	69.10	81.15	90.15	59.12	66.19	40.71	45.72	55.31	61.16
18	91.69	108.38	66.81	79.89	45.99	55.24	62.50	72.46	81.15	95.91	59.12	70.70	40.71	48.89	55.31	64.13
19	91.69	112.67	66.81	83.13	45.99	57.48	62.50	75.38	81.15	99.71	59.12	73.57	40.71	50.87	55.31	66.72
20	91.69	114.89	66.81	84.64	45.99	58.59	62.50	76.79	81.15	101.68	59.12	74.90	40.71	51.85	55.31	67.96
21	91.69	118.39	66.81	87.88	45.99	61.06	62.50	77.01	81.15	104.78	59.12	77.77	40.71	54.04	55.31	68.15
22	91.69	118.39	66.81	87.88	45.99	61.06	62.50	77.01	81.15	104.78	59.12	77.77	40.71	54.04	55.31	68.15
23	91.69	119.18	66.81	88.46	45.99	61.54	62.50	77.66	81.15	105.48	59.12	78.29	40.71	54.46	55.31	68.73
24	91.69	121.25	66.81	89.96	45.99	62.50	62.50	79.29	81.15	107.31	59.12	79.62	40.71	55.31	55.31	70.16
25	91.69	123.16	66.81	91.12	45.99	63.29	62.50	80.70	81.15	109.00	59.12	80.64	40.71	56.02	55.31	71.41
26	91.69	125.54	66.81	92.97	45.99	64.49	62.50	82.43	81.15	111.10	59.12	82.28	40.71	57.08	55.31	72.95
27	91.69	128.40	66.81	95.18	45.99	65.93	62.50	84.59	81.15	113.63	59.12	84.23	40.71	58.34	55.31	74.85
28	91.69	133.00	66.81	98.53	45.99	68.24	63.47	88.06	81.15	117.72	59.12	87.20	40.71	60.39	56.17	77.93
29	91.69	139.53	66.81	103.04	45.99	71.34	64.45	92.83	81.15	123.48	59.12	91.20	40.71	63.14	57.04	82.15
30	91.69	143.02	66.81	105.81	45.99	72.23	65.32	97.81	81.15	128.57	59.12	92.94	40.71	63.92	57.80	86.56
31	92.81	150.65	66.81	110.46	45.99	75.97	66.79	103.55	82.13	133.83	59.12	97.75	40.71	67.23	59.05	91.64
32	94.87	155.74	68.19	114.04	46.48	78.36	68.13	107.34	83.98	137.82	60.35	100.93	41.13	69.35	60.29	94.99
33	98.52	162.57	70.93	118.91	48.47	81.63	71.08	112.33	87.19	143.87	62.81	105.23	42.89	72.24	62.88	99.40
34	102.34	167.65	73.76	122.50	50.30	84.02	73.88	116.22	90.57	148.37	65.27	108.41	44.52	74.36	65.47	102.85
35	103.93	169.87	75.02	124.23	51.18	85.14	75.17	117.85	91.93	150.34	66.40	109.95	45.29	75.35	66.53	104.29
36	107.43	171.46	77.69	125.51	52.93	86.01	77.77	119.14	95.07	151.75	68.75	111.07	46.84	76.12	68.82	105.44
37	112.35	174.86	81.17	128.05	55.24	87.69	81.34	121.75	99.43	154.84	71.83	113.33	48.89	77.60	71.99	107.74
38	119.67	179.41	86.49	131.18	58.83	89.84	86.76	124.99	105.90	158.78	76.55	116.19	52.06	79.50	76.78	110.62
39	129.99	188.31	94.01	137.60	63.94	94.38	94.56	131.93	115.04	166.66	83.21	122.04	56.58	83.53	83.68	116.75
40	134.28	198.48	97.37	146.00	66.49	100.45	98.29	135.72	118.84	175.65	86.17	129.21	58.84	88.90	85.22	120.11
41	141.27	202.45	102.46	148.78	69.83	102.27	101.39	138.53	125.02	179.17	90.68	131.67	61.80	90.51	89.72	122.60
42	145.24	207.38	105.24	152.60	71.75	104.82	104.31	142.33	128.54	183.53	93.14	135.05	63.49	92.77	92.31	125.95
43	148.74	214.37	107.91	157.81	73.50	108.41	106.80	147.74	131.64	189.72	95.50	139.66	65.05	95.95	94.52	130.75
44	153.67	219.14	111.61	161.28	76.05	110.73	110.48	151.92	136.00	193.94	98.78	142.74	67.30	97.99	97.77	133.91
45	157.80	220.73	114.51	162.90	78.04	111.78	113.62	153.85	139.66	195.35	101.34	144.17	69.07	98.91	100.55	135.43
46	155.11	225.81	120.18	166.84	81.79	114.55	119.26	157.16	146.13	199.83	106.36	147.66	72.39	101.38	105.54	139.08
47	170.83	228.67	124.47	169.73	84.68	116.38	123.48	159.76	151.19	202.38	110.15	150.22	74.93	103.00	109.28	141.39
48	180.68	230.90	131.89	171.24	89.69	117.34	131.27	161.39	159.90	204.35	116.71	151.55	79.37	103.84	116.18	142.82
49	191.17	236.78	140.09	175.88	95.18	120.46	139.51	166.05	169.18	209.55	123.99	155.65	84.23	106.60	123.46	146.95
50	215.64	245.20	160.25	182.94	110.41	125.63	147.20	170.48	190.84	217.00	141.82	161.90	97.71	111.18	130.27	150.88
51	226.76	252.99	169.63	189.19	116.71	129.86	156.41	176.66	200.69	223.89	150.11	167.43	103.28	114.93	138.41	156.34
52	238.05	260.14	178.08	195.33	122.86	133.92	164.86	182.62	210.67	230.23	157.59	172.86	108.80	118.52	145.89	161.61
53	248.22	266.02	185.72	200.42	127.54	137.35	172.77	187.71	219.67	235.42	164.36	177.37	112.88	121.56	152.89	166.12
54	260.62	275.87	197.18	208.64	135.28	142.85	183.17	195.94	230.64	244.15	174.50	184.64	119.72	126.42	162.09	173.40
55	273.65	287.95	208.06	218.36	142.69	149.63	193.23	204.61	242.18	254.84	184.13	193.25	126.28	132.42	171.01	181.07
56	283.18	294.30	216.40	223.45	148.28	152.98	201.25	209.91	250.62	260.46	191.51	197.76	131.22	135.38	178.09	185.77
57	294.93	301.45	226.35	230.17	154.97	157.52	210.89	216.20	261.02	266.79	200.32	203.71	137.15	139.41	186.63	191.33
58	309.56	306.70	236.66	234.35	161.99	160.39	222.59	220.21	273.96	271.42	209.45	207.39	143.36	141.94	196.98	194.88
59	321.64	313.53	246.62	240.02	168.68	164.22	232.77	226.16	284.65	277.48	218.26	212.41	149.28	145.33	205.99	200.15
60	347.70	334.83	269.20	257.39	184.06	176.09	253.03	241.87	307.71	296.32	238.24	227.78	162.90	155.84	223.92	214.04
61	358.19	343.09	279.24	265.37	191.32	181.60	262.45	249.67	317.00	303.63	247.67	234.85	169.32	160.71	232.25	220.95
62	369.47	349.61	290.61	271.05	198.57	185.42	272.41	254.97	326.53	309.40	257.19	239.87	175.74	164.10	241.08	225.64
63	379.96	360.41	296.64	282.04	204.23	192.76	277.50	264.51	336.27	318.97	262.52	249.61	180.75	170.58	245.58	234.08
64	389.97	376.14	296.64	296.64	204.23	202.96	277.50	276.91	345.12	332.89	262.52	262.52	180.75	179.62	245.58	244.53

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 3

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins	
	$1,500		$3,000		$5,000		$1,750		$3,000		$6,000		$10,000		$3,500	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	164.60	164.60	124.01	124.01	86.69	86.69	93.36	93.36	145.85	145.85	109.75	109.75	76.72	76.72	82.63	82.63
1	133.70	133.70	99.32	99.32	68.47	68.47	79.20	79.20	118.33	118.33	87.90	87.90	60.59	60.59	70.09	70.09
2	103.11	103.11	75.12	75.12	51.80	51.80	70.27	70.27	91.25	91.25	66.48	66.48	45.85	45.85	62.19	62.19
3	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
4	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
5	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
6	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
7	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
8	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
9	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
10	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
11	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
12	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
13	94.43	94.43	68.80	68.80	47.37	47.37	64.37	64.37	83.57	83.57	60.89	60.89	41.92	41.92	56.96	56.96
14	94.43	94.43	68.80	68.80	47.37	47.45	64.37	64.92	83.57	83.57	60.89	60.89	41.92	41.99	56.96	57.45
15	94.43	103.11	68.80	75.48	47.37	52.05	64.37	70.61	83.57	91.25	60.89	66.80	41.92	46.06	56.96	62.49
16	94.43	104.90	68.80	77.03	47.37	53.28	64.37	71.17	83.57	92.84	60.89	68.17	41.92	47.08	56.96	62.98
17	94.43	104.90	68.80	77.03	47.37	53.20	64.37	71.17	83.57	92.84	60.89	68.17	41.92	47.08	56.96	62.98
18	94.43	111.61	68.80	82.28	47.37	56.89	64.37	74.63	83.57	98.77	60.89	72.82	41.92	50.35	56.96	66.04
19	94.43	116.03	68.80	85.61	47.37	59.19	64.37	77.64	83.57	102.69	60.89	75.77	41.92	52.38	56.96	68.71
20	94.43	118.32	68.80	87.16	47.37	60.34	64.37	79.09	83.57	104.72	60.89	77.14	41.92	53.40	56.96	69.99
21	94.43	121.92	68.80	90.50	47.37	62.89	64.37	79.31	83.57	107.90	60.89	80.09	41.92	55.66	56.96	70.19
22	94.43	121.92	68.80	90.50	47.37	62.89	64.37	79.31	83.57	107.90	60.89	80.09	41.92	55.66	56.96	70.19
23	94.43	122.74	68.80	91.10	47.37	63.38	64.37	79.98	83.57	108.62	60.89	80.62	41.92	56.09	56.96	70.78
24	94.43	124.87	68.80	92.65	47.37	64.37	64.37	81.66	83.57	110.61	60.89	82.00	41.92	56.96	56.96	72.26
25	94.43	126.83	68.80	93.84	47.37	65.18	64.37	83.11	83.57	112.25	60.89	83.05	41.92	57.69	56.96	73.54
26	94.43	129.29	68.80	95.75	47.37	66.42	64.37	84.89	83.57	114.42	60.89	84.74	41.92	58.78	56.96	75.13
27	94.43	132.23	68.80	98.81	47.37	67.89	64.37	87.12	83.57	117.02	60.89	86.74	41.92	60.08	56.96	77.10
28	94.43	136.98	68.80	101.47	47.37	70.27	65.37	90.69	83.57	121.23	60.89	89.80	41.92	62.19	57.85	80.25
29	94.43	143.69	68.80	106.12	47.37	73.48	66.37	95.60	83.57	127.16	60.89	93.92	41.92	65.03	58.74	84.60
30	94.43	147.28	68.80	108.15	47.37	74.38	67.26	100.73	83.57	130.35	60.89	95.71	41.92	65.83	59.52	89.14
31	95.58	155.15	68.80	113.75	47.37	78.24	68.71	106.64	84.59	137.30	60.89	100.68	41.92	69.24	60.81	94.37
32	97.70	160.38	70.23	117.45	47.86	80.70	70.16	110.55	86.47	141.94	62.16	103.94	42.36	71.42	62.09	97.83
33	101.47	167.42	73.10	122.48	49.91	84.06	73.18	115.68	89.79	148.17	64.69	108.37	44.18	74.40	64.76	102.37
34	105.39	172.66	75.96	126.15	51.80	86.53	76.19	119.69	93.27	152.80	67.22	111.65	45.85	76.58	67.42	105.92
35	107.03	174.94	77.26	127.94	52.71	87.67	77.41	121.37	94.72	154.82	68.38	113.23	46.64	77.60	68.51	107.40
36	110.63	178.58	80.01	129.26	54.52	88.58	80.09	122.70	97.91	156.27	70.81	114.39	48.24	78.39	70.87	108.58
37	115.71	188.19	83.59	131.88	56.89	90.30	83.77	125.38	102.40	159.47	73.97	116.71	50.35	79.92	74.13	110.96
38	123.24	184.76	89.07	135.10	60.58	92.52	89.35	128.72	109.06	163.52	78.83	119.56	53.62	81.88	79.07	113.92
39	133.87	193.93	96.82	142.01	65.84	97.20	97.38	135.86	118.47	171.63	85.69	125.68	58.27	86.02	85.18	120.24
40	138.29	204.40	100.28	150.36	68.47	103.44	99.16	139.77	122.39	180.90	88.75	133.07	60.59	91.55	87.76	123.69
41	145.49	208.50	105.52	153.22	71.92	105.33	104.41	142.67	128.75	184.52	93.59	135.60	63.63	93.22	92.40	126.25
42	149.58	213.57	108.38	157.15	73.89	107.95	107.42	146.57	132.38	189.01	95.92	139.08	65.39	95.54	95.07	129.72
43	153.18	220.77	111.13	162.52	75.69	111.65	109.99	152.15	135.57	195.38	98.35	143.83	66.99	98.81	97.34	134.65
44	158.26	225.68	114.94	166.10	78.32	114.03	113.78	155.83	140.06	199.72	101.73	147.00	69.31	100.92	100.69	137.90
45	162.51	227.31	117.92	167.77	80.37	115.10	117.01	157.62	143.82	201.17	104.37	148.48	71.13	101.86	103.55	139.49
46	170.04	232.55	123.77	171.82	84.23	117.97	122.82	161.86	150.49	205.81	109.53	152.06	74.55	104.41	108.69	143.24
47	175.93	235.50	128.18	174.80	87.18	119.86	127.17	164.53	155.70	208.42	113.44	154.70	77.16	106.07	112.54	145.61
48	186.07	237.79	135.81	176.95	92.36	120.85	135.19	166.20	164.67	210.45	120.20	156.07	81.74	106.94	119.65	147.08
49	196.88	243.85	144.28	181.19	98.02	124.05	143.67	171.01	174.23	215.80	127.68	160.80	86.75	109.78	127.14	151.34
50	222.08	252.52	165.02	188.40	113.70	129.38	151.59	175.57	196.54	223.48	146.05	166.73	100.63	114.50	134.16	155.38
51	233.53	260.54	174.68	194.83	120.19	133.78	161.08	181.93	206.88	230.58	154.60	172.43	106.37	118.35	142.55	161.01
52	245.16	267.90	183.39	201.16	126.01	137.92	169.78	188.07	216.95	237.10	162.30	178.03	111.53	122.06	150.25	166.43
53	255.63	273.96	191.26	206.41	131.35	141.45	177.92	193.31	226.23	242.45	169.26	182.67	116.24	125.18	157.45	171.07
54	268.39	284.10	203.06	214.86	139.32	147.11	188.63	201.79	237.53	251.43	179.71	190.16	123.30	130.20	166.93	178.58
55	281.81	296.54	214.27	224.89	146.95	154.09	199.00	210.72	249.40	262.44	189.63	199.02	130.05	136.37	176.11	186.48
56	291.63	303.09	222.86	230.13	152.70	157.54	207.26	216.18	258.10	268.23	197.23	203.66	135.14	139.43	183.41	191.31
57	303.74	310.45	233.11	237.04	159.60	162.22	217.18	222.65	268.81	274.75	206.30	209.79	141.24	143.57	192.20	197.04
58	318.79	315.85	243.73	241.34	166.82	165.17	229.23	226.78	282.14	279.53	215.70	213.58	147.63	146.18	202.86	200.69
59	331.24	322.89	253.98	247.18	173.71	169.12	239.71	232.91	293.15	285.76	224.77	218.75	153.74	149.67	212.14	206.13
60	358.07	344.82	277.23	265.07	189.56	181.35	260.58	249.09	316.90	305.17	245.35	234.59	167.76	160.50	230.60	220.43
61	368.88	353.33	288.20	273.30	197.03	187.02	270.28	257.12	326.46	312.70	255.08	241.86	174.37	165.51	239.19	227.54
62	380.50	360.04	299.28	279.14	204.50	190.95	280.54	262.58	336.74	318.63	264.87	247.04	180.98	168.99	248.28	232.37
63	391.30	371.17	305.49	290.46	210.33	198.51	285.79	272.40	346.30	328.48	270.35	257.06	186.14	175.68	252.91	241.07
64	401.61	387.37	305.49	305.49	210.33	209.01	285.79	284.56	355.42	342.83	270.35	270.35	186.14	184.93	252.91	251.82

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 4

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins	
	$1,500		$3,000		$5,000		$1,750		$3,000		$6,000		$10,000		$3,500	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	162.48	162.48	122.26	122.26	85.47	85.47	92.05	92.05	143.79	143.79	108.21	108.21	75.64	75.64	81.46	81.46
1	131.82	131.82	97.93	97.93	67.51	67.51	78.09	78.09	116.66	116.66	86.67	86.67	59.74	59.74	69.10	69.10
2	101.65	101.65	74.06	74.06	51.07	51.07	69.29	69.29	89.96	89.96	65.54	65.54	45.20	45.20	61.32	61.32
3	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
4	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
5	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
6	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
7	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
8	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
9	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
10	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
11	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
12	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
13	93.10	93.10	67.83	67.83	46.70	46.70	63.45	63.45	82.39	82.39	60.03	60.03	41.33	41.33	56.16	56.16
14	93.10	93.10	67.83	67.83	46.70	46.78	63.45	64.00	82.39	82.39	60.03	60.03	41.33	41.40	56.16	56.65
15	93.10	101.65	67.83	74.42	46.70	51.51	63.45	69.61	82.39	89.96	60.03	65.86	41.33	45.42	56.16	61.61
16	93.10	103.43	67.83	75.95	46.70	52.45	63.45	70.16	82.39	91.53	60.03	67.21	41.33	46.42	56.16	62.10
17	93.10	103.43	67.83	75.95	46.70	52.45	63.45	70.16	82.39	91.53	60.03	67.21	41.33	46.42	56.16	62.10
18	93.10	110.04	67.83	81.11	46.70	56.09	63.45	73.57	82.39	97.38	60.03	71.79	41.33	49.64	56.16	65.11
19	93.10	114.40	67.83	84.40	46.70	58.36	63.45	76.54	82.39	101.24	60.03	74.70	41.33	51.65	56.16	67.74
20	93.10	116.65	67.83	85.94	46.70	59.49	63.45	77.97	82.39	103.24	60.03	76.05	41.33	52.65	56.16	69.00
21	93.10	120.20	67.83	89.23	46.70	62.00	63.45	78.19	82.39	106.38	60.03	78.97	41.33	54.87	56.16	69.20
22	93.10	120.20	67.83	89.23	46.70	62.00	63.45	78.19	82.39	106.38	60.03	78.97	41.33	54.87	56.16	69.20
23	93.10	121.01	67.83	89.81	46.70	62.45	63.45	78.86	82.39	107.09	60.03	79.49	41.33	55.30	56.16	69.78
24	93.10	123.11	67.83	91.84	48.70	63.45	63.45	80.51	82.39	108.95	60.03	80.84	41.33	56.16	56.16	71.24
25	93.10	125.05	67.83	92.52	48.70	64.27	63.45	81.93	82.39	110.67	60.03	81.88	41.33	56.88	56.16	72.51
26	93.10	127.47	67.83	94.40	48.70	65.48	63.45	83.69	82.39	112.81	60.03	83.54	41.33	57.95	56.16	74.07
27	93.10	130.37	67.83	96.63	48.70	66.94	63.45	85.89	82.39	115.37	60.03	85.52	41.33	59.24	56.16	76.01
28	93.10	135.04	67.83	100.04	48.70	69.29	64.45	89.41	82.39	119.52	60.03	88.54	41.33	61.32	57.04	79.13
29	93.10	141.67	67.83	104.62	48.70	72.44	65.44	94.25	82.39	125.37	60.03	92.60	41.33	64.11	57.91	83.41
30	93.10	145.21	67.83	106.62	48.70	73.33	66.32	99.31	82.39	128.51	60.03	94.37	41.33	64.90	58.69	87.69
31	94.23	152.96	67.83	112.15	48.70	77.14	67.75	105.14	83.39	135.37	60.03	99.26	41.33	68.26	59.53	93.04
32	96.33	158.12	69.24	115.79	47.19	79.56	69.18	108.99	85.25	139.94	61.28	102.48	41.76	70.42	61.22	96.45
33	100.03	165.06	72.07	120.74	49.21	82.68	72.15	114.05	88.53	146.07	63.77	106.85	43.55	73.35	63.85	100.93
34	103.91	170.22	74.89	124.38	51.07	85.31	75.11	118.00	91.96	150.65	66.27	110.07	45.20	75.50	66.47	104.43
35	105.52	172.48	76.17	126.14	51.97	86.44	76.32	119.65	93.39	152.64	67.41	111.63	45.98	76.50	67.53	105.89
36	109.09	174.09	78.88	127.44	53.75	87.33	78.96	120.97	96.53	154.07	69.81	112.78	47.56	77.29	69.88	107.05
37	114.08	177.65	82.41	130.01	56.09	89.03	82.59	123.61	100.96	157.22	72.93	115.06	49.64	78.79	73.09	109.40
38	121.50	182.16	87.81	133.19	59.73	91.22	88.09	126.91	107.52	161.21	77.72	117.87	52.86	80.72	77.96	112.31
39	131.98	191.20	95.45	140.01	64.92	95.83	96.01	133.95	116.81	169.21	84.48	123.91	57.45	84.81	84.96	118.54
40	136.34	201.52	98.87	148.24	67.51	101.98	97.77	137.80	120.66	178.35	87.50	131.19	59.74	90.25	86.52	121.95
41	143.44	205.56	104.04	151.06	70.90	103.84	102.94	140.66	126.94	181.92	92.08	133.69	62.75	91.90	91.10	124.48
42	147.47	210.56	106.86	154.94	72.85	106.43	105.91	144.51	130.51	186.35	94.57	137.12	64.47	94.20	93.73	127.89
43	151.02	217.66	109.58	160.23	74.63	110.07	108.43	150.01	133.66	192.63	96.96	141.80	66.04	97.42	95.97	132.75
44	156.02	222.50	113.32	163.76	77.22	112.42	112.18	153.64	138.08	196.91	100.29	144.93	68.34	99.50	99.27	135.96
45	160.22	224.11	116.26	165.40	79.24	113.48	115.36	155.40	141.79	198.34	102.89	146.38	70.13	100.42	102.09	137.53
46	167.84	229.27	122.03	169.40	83.04	116.31	121.09	159.57	148.37	202.91	107.99	149.92	73.49	102.93	107.16	141.22
47	173.45	232.18	126.38	172.34	85.96	118.17	125.38	162.22	153.50	205.48	111.84	152.52	76.07	104.58	110.95	143.55
48	183.45	234.44	133.90	173.87	91.06	119.14	133.29	163.87	162.33	207.48	118.50	153.88	80.59	105.44	117.96	145.01
49	194.10	240.41	142.24	178.58	96.64	122.30	141.65	168.59	171.78	212.76	125.88	158.04	85.53	108.24	125.36	149.20
50	218.95	248.96	162.70	185.74	112.10	127.56	149.46	173.10	193.77	220.33	143.99	164.38	99.21	112.89	132.27	153.29
51	230.24	256.87	172.23	192.09	118.50	131.85	158.81	179.37	203.76	227.33	152.42	170.00	104.87	116.69	140.53	158.74
52	241.70	264.12	180.80	198.32	124.24	135.97	167.38	185.42	213.90	233.76	160.01	175.52	109.95	120.34	148.13	164.09
53	252.03	270.10	188.56	203.50	129.50	139.46	175.41	190.59	223.04	239.03	166.87	180.09	114.61	123.42	155.23	168.66
54	264.61	280.10	200.20	211.64	137.35	145.04	185.97	198.95	234.19	247.89	177.18	187.47	121.56	128.36	164.58	176.07
55	277.84	292.37	211.25	221.71	144.88	151.92	196.20	207.75	245.89	258.74	186.96	196.21	128.22	134.45	173.62	183.85
56	287.52	298.81	219.72	226.89	150.54	155.32	204.34	213.13	254.46	264.43	194.45	200.79	133.23	137.46	180.83	188.62
57	299.46	306.08	229.82	233.70	157.35	159.94	214.12	219.52	265.02	270.88	203.39	206.83	139.25	141.54	189.49	194.26
58	314.30	311.40	240.29	237.94	164.47	162.85	226.00	223.58	278.16	275.59	212.66	210.57	145.55	144.12	200.00	197.86
59	326.57	318.34	250.40	243.70	171.26	166.74	236.34	229.64	289.02	281.73	221.60	215.67	151.57	147.56	209.15	203.22
60	351.03	339.96	278.32	261.33	186.89	178.79	256.90	245.58	312.43	300.87	241.89	231.28	165.40	158.23	227.35	217.33
61	363.68	348.35	284.13	269.44	194.25	184.38	266.47	253.50	321.85	308.29	251.45	238.46	171.91	163.17	235.82	224.34
62	375.14	354.97	295.07	275.21	201.62	188.26	276.59	258.89	332.00	314.15	261.13	243.55	178.43	166.61	244.77	229.10
63	385.78	365.94	301.19	286.37	207.37	195.71	281.76	268.57	341.42	323.86	266.54	253.44	183.52	173.20	249.35	237.67
64	395.95	381.91	301.19	301.19	207.37	206.07	281.76	280.55	350.41	338.00	266.54	266.54	183.52	182.37	249.35	248.28

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 5

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins	
	$1,500		$3,000		$5,000		$1,750		$3,000		$6,000		$10,000		$3,500	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	159.89	158.89	119.56	118.56	83.58	83.58	90.01	90.01	140.61	140.61	105.81	105.81	73.97	73.97	79.65	79.65
1	128.91	128.91	95.76	95.76	66.01	66.01	76.36	76.36	114.08	114.08	84.75	84.75	58.42	58.42	67.57	67.57
2	99.40	99.40	72.42	72.42	49.94	49.94	67.75	67.75	87.97	87.97	64.10	64.10	44.20	44.20	59.98	59.98
3	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
4	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
5	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
6	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
7	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
8	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
9	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
10	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
11	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
12	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
13	91.04	91.04	66.33	66.33	45.67	45.67	62.06	62.06	80.57	80.57	58.70	58.70	40.42	40.42	54.92	54.92
14	91.04	91.04	66.33	66.33	45.67	45.75	62.06	62.59	80.57	80.57	58.70	58.70	40.42	40.48	54.92	55.39
15	91.04	99.40	66.33	72.77	45.67	50.18	62.06	68.07	80.57	87.97	58.70	64.41	40.42	44.41	54.92	60.25
16	91.04	101.14	66.33	74.27	45.67	51.29	62.06	68.62	80.57	89.51	58.70	65.72	40.42	45.39	54.92	60.72
17	91.04	101.14	66.33	74.27	45.67	51.29	62.06	68.62	80.57	89.51	58.70	65.72	40.42	45.39	54.92	60.72
18	91.04	107.61	66.33	79.32	45.67	54.85	62.06	71.95	80.57	95.23	58.70	70.20	40.42	48.54	54.92	63.67
19	91.04	111.87	66.33	82.54	45.67	57.07	62.06	74.85	80.57	99.00	58.70	73.05	40.42	50.50	54.92	66.24
20	91.04	114.08	66.33	84.04	45.67	58.18	62.06	76.25	80.57	100.96	58.70	74.37	40.42	51.48	54.92	67.48
21	91.04	117.55	66.33	87.26	45.67	60.63	62.06	76.47	80.57	104.03	58.70	77.22	40.42	53.66	54.92	67.67
22	91.04	117.55	66.33	87.26	45.67	60.63	62.06	76.47	80.57	104.03	58.70	77.22	40.42	53.66	54.92	67.67
23	91.04	118.34	66.33	87.83	45.67	61.10	62.06	77.11	80.57	104.73	58.70	77.73	40.42	54.03	54.92	68.26
24	91.04	120.39	66.33	89.32	45.67	62.06	62.06	78.72	80.57	106.54	58.70	79.05	40.42	54.92	54.92	69.67
25	91.04	122.28	66.33	90.47	45.67	62.85	62.06	80.12	80.57	108.22	58.70	80.07	40.42	55.62	54.92	70.90
26	91.04	124.65	66.33	92.31	45.67	64.03	62.06	81.84	80.57	110.31	58.70	81.69	40.42	56.67	54.92	72.43
27	91.04	127.49	66.33	94.50	45.67	65.46	62.06	84.00	80.57	112.82	58.70	83.63	40.42	57.93	54.92	74.33
28	91.04	132.07	66.33	97.83	45.67	67.75	63.02	87.44	80.57	116.88	58.70	86.58	40.42	59.96	55.78	77.38
29	91.04	138.53	66.33	102.31	45.67	70.84	63.99	92.17	80.57	122.60	58.70	90.55	40.42	62.70	56.63	81.57
30	91.04	142.00	66.33	104.27	45.67	71.71	64.85	97.12	80.57	125.67	58.70	92.28	40.42	63.47	57.39	85.94
31	92.15	149.58	66.33	109.67	45.67	75.43	66.25	102.81	81.55	132.38	58.70	97.06	40.42	66.75	58.63	90.99
32	94.20	154.63	67.71	113.24	46.14	77.80	67.65	106.58	83.37	136.84	59.92	100.21	40.84	68.86	59.87	94.32
33	97.82	161.41	70.47	118.07	48.13	81.05	70.55	111.53	86.57	142.85	62.37	104.49	42.56	71.78	62.43	98.70
34	101.61	166.46	73.23	121.62	49.94	83.42	73.45	115.40	89.93	147.32	64.81	107.64	44.20	73.83	65.01	102.13
35	103.19	168.67	74.49	123.35	50.81	84.53	74.63	117.01	91.32	149.27	65.93	109.17	44.97	74.81	66.05	103.55
36	105.66	170.25	77.14	124.62	52.56	85.41	77.22	118.30	94.40	150.67	68.27	110.29	46.51	75.58	68.24	104.69
37	111.56	173.72	80.59	127.14	54.85	87.07	80.76	120.88	98.73	153.74	71.32	112.53	48.54	77.05	71.48	106.98
38	118.81	178.13	85.88	130.25	58.41	89.20	86.14	124.11	105.15	157.65	76.00	115.27	51.70	78.94	76.23	109.83
39	129.07	186.98	93.55	136.92	63.48	93.71	93.89	130.99	114.23	165.47	82.61	121.17	56.18	82.94	83.09	115.92
40	133.33	197.87	96.68	144.96	66.01	99.73	95.61	134.75	117.99	174.43	85.57	128.29	58.42	88.26	84.61	119.25
41	140.27	201.81	101.74	147.73	69.33	101.55	100.66	137.55	124.13	177.90	90.04	130.74	61.36	89.87	89.08	121.73
42	144.21	205.91	104.50	151.51	71.24	104.08	103.57	141.32	127.63	182.23	92.48	134.09	63.04	92.12	91.66	125.06
43	147.69	212.85	107.15	156.69	72.98	107.64	106.04	146.69	130.70	188.37	94.82	138.67	64.59	95.17	93.85	129.82
44	152.58	217.59	110.82	160.14	75.51	109.94	109.70	150.25	135.03	192.56	98.03	141.73	66.82	97.30	97.08	132.96
45	156.68	219.16	113.69	161.75	77.49	110.97	112.82	151.97	138.66	193.95	100.62	143.15	68.58	98.21	99.83	134.48
46	163.94	224.21	119.33	165.65	81.21	113.74	118.41	156.05	145.08	198.42	105.61	146.61	71.97	100.66	104.79	138.10
47	169.62	227.05	123.58	168.53	84.05	115.56	122.60	158.63	150.11	200.94	109.37	149.15	74.39	102.27	108.50	140.39
48	179.39	229.26	130.84	170.03	89.84	116.51	130.35	160.25	158.77	202.89	115.88	150.48	78.80	103.11	115.35	141.81
49	189.81	235.10	139.10	174.63	94.50	119.60	138.52	164.87	167.98	208.06	123.10	154.54	83.64	105.84	122.58	145.90
50	214.11	243.46	159.10	181.64	109.62	124.74	146.16	169.28	189.49	215.46	140.81	160.74	97.01	110.39	129.84	149.81
51	229.15	251.19	168.42	187.84	115.88	128.94	155.29	175.41	199.27	222.30	149.05	166.24	102.55	114.11	137.43	155.23
52	236.36	258.29	176.81	193.94	121.49	132.97	163.69	181.32	209.17	228.59	156.47	171.64	107.52	117.88	144.85	160.46
53	246.45	264.12	184.39	199.00	126.64	136.37	171.54	186.38	218.11	233.75	163.18	176.11	112.07	120.69	151.80	164.94
54	258.77	273.91	195.78	207.16	134.32	141.83	181.86	194.55	229.01	242.41	173.26	183.33	118.87	125.52	160.94	172.18
55	272.71	285.90	206.58	216.81	141.68	148.56	191.86	203.16	240.45	253.03	182.82	191.88	125.38	131.47	169.79	179.78
56	281.17	292.21	214.86	221.87	147.22	151.89	199.82	208.42	248.84	258.61	190.16	196.36	130.29	134.43	176.83	184.45
57	292.84	299.32	224.75	228.54	153.87	156.40	209.39	214.66	259.17	264.89	198.90	202.26	136.17	138.41	185.31	189.97
58	307.38	304.52	234.93	232.68	160.84	159.25	221.01	218.65	272.01	269.50	207.96	205.92	142.34	140.94	195.58	193.49
59	319.38	311.31	244.87	238.91	167.48	163.05	231.11	224.56	282.63	275.51	216.70	210.90	148.22	144.30	204.53	198.73
60	345.23	332.45	267.28	255.56	182.76	174.84	251.23	240.15	305.53	294.22	236.54	226.17	161.74	154.74	222.33	212.53
61	355.64	340.65	277.86	263.49	189.96	180.31	260.58	247.90	314.74	301.48	245.91	233.19	168.11	159.57	230.60	219.38
62	365.85	347.12	288.55	269.12	197.16	184.10	270.48	253.16	324.66	307.20	255.36	238.17	174.49	162.93	239.37	224.04
63	377.26	357.86	294.53	280.04	202.78	191.39	275.53	262.63	333.88	316.78	260.65	247.83	179.46	169.37	243.84	232.42
64	387.20	373.47	294.53	294.53	202.78	201.51	275.53	274.95	342.67	330.52	260.65	260.65	179.46	178.34	243.84	242.79

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 6

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins	
	$1,500		$3,000		$5,000		$1,750		$3,000		$6,000		$10,000		$3,500	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	174.52	174.52	131.32	131.32	91.81	91.81	98.87	98.87	154.45	154.45	116.22	116.22	81.25	81.25	87.50	87.50
1	141.59	141.59	105.19	105.19	72.51	72.51	83.87	83.87	125.31	125.31	93.09	93.09	64.17	64.17	74.23	74.23
2	109.19	109.19	79.55	79.55	54.85	54.85	74.42	74.42	96.63	96.63	70.40	70.40	48.55	48.55	65.85	65.85
3	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
4	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
5	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
6	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
7	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
8	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
9	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
10	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
11	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
12	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
13	100.00	100.00	72.85	72.85	50.16	50.16	68.16	68.16	88.50	88.50	64.48	64.48	44.40	44.40	60.32	60.32
14	100.00	100.00	72.85	72.85	50.16	50.25	68.16	68.75	88.50	88.50	64.48	64.48	44.40	44.47	60.32	60.84
15	100.00	109.19	72.85	79.93	50.16	55.12	68.16	74.77	88.50	96.63	64.48	70.74	44.40	48.78	60.32	66.18
16	100.00	111.09	72.85	81.57	50.16	56.24	68.16	75.97	88.50	98.32	64.48	72.19	44.40	49.86	60.32	66.70
17	100.00	111.09	72.85	81.57	50.16	56.34	68.16	75.97	88.50	98.32	64.48	72.19	44.40	49.86	60.32	66.70
18	100.00	118.19	72.85	87.12	50.16	60.25	68.16	78.03	88.50	104.60	64.48	77.11	44.40	53.32	60.32	69.94
19	100.00	122.67	72.85	90.66	50.16	62.68	68.16	82.21	88.50	108.74	64.48	80.24	44.40	55.48	60.32	72.76
20	100.00	125.30	72.85	92.30	50.16	63.90	68.16	83.75	88.50	110.89	64.48	81.69	44.40	56.55	60.32	74.12
21	100.00	129.11	72.85	95.84	50.16	66.59	68.16	83.98	88.50	114.27	64.48	84.82	44.40	58.94	60.32	74.33
22	100.00	129.11	72.85	95.84	50.16	66.59	68.16	83.98	88.50	114.27	64.48	84.82	44.40	58.94	60.32	74.33
23	100.00	129.58	72.85	96.47	50.16	67.12	68.16	84.79	88.50	115.03	64.48	85.38	44.40	59.40	60.32	74.95
24	100.00	132.23	72.85	98.11	50.16	68.16	68.16	86.47	88.50	117.02	64.48	86.83	44.40	60.32	60.32	76.32
25	100.00	134.31	72.85	99.37	50.16	69.03	68.16	88.01	88.50	118.87	64.48	87.94	44.40	61.09	60.32	77.88
26	100.00	136.91	72.85	101.29	50.16	70.33	68.16	89.89	88.50	121.16	64.48	89.73	44.40	62.24	60.32	79.56
27	100.00	140.03	72.85	103.79	50.16	71.90	68.16	92.26	88.50	123.92	64.48	91.86	44.40	63.63	60.32	81.64
28	100.00	145.05	72.85	107.45	50.16	74.42	69.22	96.04	88.50	128.37	64.48	95.10	44.40	65.85	61.26	84.99
29	100.00	152.17	72.85	112.33	50.16	77.81	70.28	101.24	88.50	134.66	64.48	99.46	44.40	68.85	62.20	89.59
30	100.00	155.97	72.85	114.53	50.16	78.76	71.23	106.67	88.50	138.04	64.48	101.36	44.40	69.71	63.04	94.40
31	101.21	154.30	72.85	120.45	50.16	82.85	72.77	112.93	89.57	145.40	64.48	106.61	44.40	73.32	64.39	99.94
32	103.47	159.84	74.37	124.33	50.69	85.46	74.30	117.08	91.57	150.30	65.82	110.07	44.85	75.63	65.75	103.60
33	107.45	177.29	77.41	129.63	52.86	89.02	77.49	122.50	95.09	156.90	68.50	114.77	46.78	78.78	68.58	108.41
34	111.61	182.84	80.44	133.59	54.85	91.63	80.68	126.75	98.77	161.61	71.18	118.23	48.55	81.09	71.40	112.17
35	113.35	185.26	81.82	135.49	55.82	92.84	81.98	128.52	100.31	163.95	72.42	119.91	49.39	82.17	72.55	113.73
36	117.16	187.00	84.73	136.88	57.73	93.81	84.82	129.93	103.69	165.49	74.89	121.13	51.08	83.02	75.08	114.99
37	122.53	190.81	88.52	139.63	60.25	95.63	88.71	132.77	108.43	168.87	78.33	123.59	53.32	84.63	78.51	117.50
38	130.50	195.66	94.32	143.06	64.16	97.98	94.62	136.32	115.49	173.16	83.47	126.61	56.78	86.71	83.73	120.63
39	141.77	205.37	102.53	150.38	69.72	102.93	103.12	143.87	125.45	181.75	90.74	133.09	61.71	91.10	91.26	127.33
40	146.45	216.46	106.19	159.23	72.51	109.54	105.01	148.01	129.60	191.56	93.98	140.91	64.17	96.95	92.93	130.99
41	154.07	220.79	111.75	162.26	76.16	111.54	110.57	151.08	136.35	195.40	98.90	143.60	67.40	98.71	97.85	133.70
42	158.40	226.16	114.78	166.42	78.24	114.32	113.76	155.22	140.18	200.15	101.58	147.28	69.25	101.17	100.67	137.36
43	162.21	233.79	117.68	172.10	80.16	118.23	116.47	161.13	143.56	206.90	104.15	152.31	70.94	104.64	103.08	142.59
44	167.59	238.99	121.72	175.69	82.94	120.75	120.49	165.02	148.32	211.50	107.72	155.67	73.40	106.87	106.63	146.04
45	172.09	240.72	124.88	177.66	85.11	121.88	123.91	166.91	152.30	213.04	110.52	157.23	75.32	107.87	109.68	147.71
46	180.07	245.26	131.07	181.95	89.20	124.93	130.06	171.40	159.36	217.94	116.00	161.03	78.94	110.56	115.10	151.68
47	185.31	249.39	135.74	185.11	92.32	126.93	134.67	174.23	164.88	220.71	120.13	163.82	81.71	112.33	119.17	154.19
48	197.04	251.81	143.82	186.75	97.81	127.97	143.16	176.01	174.39	222.86	127.28	165.28	86.55	113.25	126.70	155.76
49	208.49	258.22	152.78	191.81	103.80	131.37	152.15	181.09	184.51	228.52	135.21	169.75	91.86	116.26	134.64	160.26
50	235.18	267.41	174.75	199.50	120.40	137.01	160.53	185.93	208.13	236.65	154.66	176.56	106.56	121.25	142.07	164.54
51	247.31	275.90	184.99	206.32	127.27	141.62	170.57	192.66	218.86	244.17	163.71	182.59	112.64	125.33	150.95	170.50
52	259.61	283.70	194.23	213.02	133.45	146.05	179.79	199.16	229.75	251.08	171.87	188.52	118.10	129.26	159.10	176.25
53	270.70	290.11	202.53	218.58	139.10	149.79	188.41	204.72	239.57	256.74	179.25	193.44	123.10	132.58	166.74	181.16
54	284.22	300.85	215.04	227.54	147.53	155.79	199.75	213.69	251.54	266.26	190.30	201.37	130.57	137.87	176.77	189.11
55	298.44	314.03	226.90	238.14	155.62	163.18	210.74	223.14	264.11	277.92	200.81	210.76	137.72	144.41	186.49	197.47
56	308.83	320.96	235.80	243.70	161.70	166.83	219.48	228.92	273.92	284.05	208.85	215.67	143.11	147.64	194.23	202.60
57	321.65	328.76	246.85	251.02	169.01	171.79	229.99	235.78	284.65	290.95	218.47	222.16	149.57	152.03	203.54	208.66
58	337.59	334.48	258.10	255.57	176.66	174.91	242.75	240.15	298.77	296.01	228.41	226.17	156.34	154.80	214.82	212.53
59	350.77	341.93	268.95	261.75	183.96	179.09	253.85	246.65	310.43	302.61	238.02	231.65	162.80	158.49	224.65	218.28
60	379.19	365.15	293.58	280.70	200.73	192.04	275.95	263.77	335.58	323.16	259.81	248.42	177.65	169.96	244.20	233.43
61	390.63	374.16	305.19	289.41	208.65	198.04	286.22	272.28	345.71	331.14	270.10	256.13	184.65	175.26	253.29	240.96
62	402.93	381.27	316.93	295.60	216.56	202.21	297.08	278.07	356.60	337.42	280.48	261.60	191.65	178.96	262.92	246.08
63	414.37	393.06	323.50	307.59	222.73	210.22	302.64	288.47	366.72	347.85	286.29	272.22	197.12	185.04	267.83	255.28
64	425.29	410.21	323.50	323.50	222.73	221.34	302.64	301.34	376.38	363.04	286.29	286.29	197.12	195.89	267.83	268.67

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 7

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins	
	$1,500		$3,000		$5,000		$1,750		$3,000		$6,000		$10,000		$3,500	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	175.05	175.05	131.72	131.72	92.09	92.09	99.17	99.17	154.92	154.92	116.57	116.57	81.49	81.49	87.76	87.76
1	142.01	142.01	105.50	105.50	72.73	72.73	84.13	84.13	125.69	125.69	93.37	93.37	64.37	64.37	74.45	74.45
2	109.51	109.51	79.79	79.79	55.02	55.02	74.64	74.64	96.92	96.92	70.61	70.61	48.69	48.69	66.06	66.06
3	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
4	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
5	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
6	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
7	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
8	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
9	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
10	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
11	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
12	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
13	100.30	100.30	73.08	73.08	50.32	50.32	68.36	68.36	88.76	88.76	64.67	64.67	44.53	44.53	60.50	60.50
14	100.30	100.30	73.08	73.08	50.32	50.40	68.36	68.95	88.76	88.76	64.67	64.67	44.53	44.60	60.50	61.02
15	100.30	109.51	73.08	80.17	50.32	55.28	68.36	74.99	88.76	96.92	64.67	70.95	44.53	48.93	60.50	66.37
16	100.30	111.43	73.08	81.82	50.32	56.51	68.36	75.60	88.76	98.61	64.67	72.41	44.53	50.01	60.50	66.90
17	100.30	111.43	73.08	81.82	50.32	56.51	68.36	75.60	88.76	98.61	64.67	72.41	44.53	50.01	60.50	66.90
18	100.30	116.55	73.08	87.39	50.32	60.43	68.36	79.26	88.76	104.92	64.67	77.34	44.53	53.48	60.50	70.15
19	100.30	123.25	73.08	90.94	50.32	62.87	68.36	82.46	88.76	109.07	64.67	80.48	44.53	55.64	60.50	72.93
20	100.30	125.68	73.08	92.59	50.32	64.09	68.36	84.00	88.76	111.23	64.67	81.93	44.53	56.72	60.50	74.34
21	100.30	129.50	73.08	96.13	50.32	66.79	68.36	84.24	88.76	114.61	64.67	85.07	44.53	59.12	60.50	74.55
22	100.30	129.50	73.08	96.13	50.32	66.79	68.36	84.24	88.76	114.61	64.67	85.07	44.53	59.12	60.50	74.55
23	100.30	130.37	73.08	96.76	50.32	67.32	68.36	84.95	88.76	115.38	64.67	85.63	44.53	59.57	60.50	75.18
24	100.30	132.63	73.08	98.41	50.32	68.36	68.36	86.73	88.76	117.37	64.67	87.09	44.53	60.50	60.50	76.75
25	100.30	134.72	73.08	99.67	50.32	69.34	68.36	88.27	88.76	119.22	64.67	88.21	44.53	61.28	60.50	78.12
26	100.30	137.33	73.08	101.70	50.32	70.54	68.36	90.17	88.76	121.53	64.67	90.00	44.53	62.43	60.50	79.80
27	100.30	140.45	73.08	104.11	50.32	72.12	68.36	92.53	88.76	124.90	64.67	92.13	44.53	63.82	60.50	81.89
28	100.30	145.49	73.08	107.78	50.32	74.64	69.43	96.33	88.76	128.76	64.67	95.39	44.53	66.06	61.45	85.25
29	100.30	152.62	73.08	112.71	50.32	78.04	70.50	101.54	88.76	135.07	64.67	99.76	44.53	69.07	62.39	89.86
30	100.30	156.44	73.08	114.88	50.32	79.01	71.45	106.99	88.76	138.45	64.67	101.66	44.53	69.92	63.22	94.68
31	101.52	164.79	73.08	120.82	50.32	83.10	72.99	113.27	89.84	145.84	64.67	106.93	44.53	73.54	64.59	100.24
32	103.78	170.35	74.59	124.75	50.84	85.72	74.53	117.42	91.84	150.76	66.02	110.41	44.99	75.86	65.95	103.91
33	107.77	177.82	77.64	130.07	53.02	89.29	77.73	122.87	95.38	157.37	68.71	115.11	46.92	79.02	68.78	108.73
34	111.94	183.39	80.68	134.00	55.02	91.91	80.92	127.13	99.07	162.30	71.40	118.59	48.69	81.34	71.62	112.51
35	113.68	185.82	82.07	135.89	55.98	93.12	82.23	128.91	100.61	164.45	72.63	120.27	49.54	82.42	72.77	114.08
36	117.51	187.56	84.98	137.29	57.90	94.09	85.07	130.33	103.99	165.99	75.21	121.50	51.24	83.27	75.28	115.33
37	122.98	191.39	88.79	140.07	60.43	95.92	88.93	133.17	108.77	169.38	78.57	123.96	53.48	84.88	78.74	117.85
38	130.90	196.25	94.61	143.50	64.35	98.27	94.91	136.73	115.84	173.68	83.73	126.99	56.95	86.97	83.93	121.00
39	142.19	205.99	102.84	150.84	69.93	103.24	103.44	144.31	125.84	182.10	91.02	133.50	61.89	91.37	91.54	127.71
40	146.89	217.11	106.51	159.71	72.73	109.87	105.33	148.48	130.00	192.14	94.26	141.34	64.37	97.24	93.22	131.58
41	154.54	221.46	112.08	162.74	76.39	111.88	110.90	151.54	136.76	195.99	99.20	144.03	67.60	99.01	98.14	134.10
42	158.88	226.84	115.12	166.92	78.48	114.66	114.10	155.68	140.61	200.76	101.89	147.73	69.45	101.48	100.97	137.78
43	162.70	234.49	118.04	172.62	80.40	118.59	116.82	161.61	143.99	207.53	104.46	152.77	71.16	104.95	103.39	143.02
44	168.09	239.71	122.09	176.42	83.19	121.12	120.85	165.52	148.76	212.14	108.05	156.14	73.62	107.19	106.95	146.48
45	172.61	241.45	125.26	178.20	85.37	122.26	124.29	167.41	152.76	213.68	110.85	157.70	75.55	108.19	109.99	148.16
46	180.60	247.01	131.46	182.50	89.47	125.30	130.45	171.92	159.84	218.60	116.35	161.52	79.18	110.90	115.44	152.14
47	186.87	250.14	136.15	185.67	92.60	127.31	135.07	174.76	165.37	221.37	120.50	164.31	81.96	112.67	119.53	154.66
48	197.64	252.57	144.26	187.32	98.10	128.36	143.60	176.54	174.91	223.53	127.67	165.78	86.82	113.59	127.09	156.23
49	209.11	259.00	153.24	192.38	104.12	131.76	152.61	181.64	185.06	229.22	135.62	170.26	92.14	116.81	135.05	160.74
50	235.88	268.22	175.29	200.11	120.77	137.42	161.01	186.49	208.76	237.37	155.13	177.09	105.88	121.62	142.49	165.04
51	248.05	276.74	185.54	206.94	127.66	142.05	171.09	193.24	219.53	244.91	164.20	183.15	112.98	125.71	151.40	171.02
52	260.39	284.55	194.79	213.66	133.85	146.49	180.33	199.76	230.44	251.83	172.39	189.09	118.46	129.65	159.59	176.78
53	271.52	290.99	203.15	219.24	139.52	150.24	188.98	205.33	240.29	257.52	179.78	194.02	123.47	132.96	167.24	181.71
54	285.08	301.76	215.68	228.22	147.98	156.26	200.36	214.33	252.30	267.06	190.88	201.98	130.96	138.29	177.30	189.68
55	299.84	314.98	227.59	238.66	156.09	163.67	211.37	223.81	264.91	278.76	201.42	211.39	138.13	144.85	187.06	198.07
56	309.76	321.93	236.71	244.44	162.19	167.34	220.14	229.62	274.14	284.91	209.49	216.32	143.54	148.09	194.81	203.21
57	322.62	329.75	247.60	251.78	169.52	172.31	230.68	235.49	285.52	291.83	219.13	222.83	150.02	152.49	204.15	209.29
58	338.61	335.49	258.68	255.34	177.19	175.44	243.48	240.88	299.67	296.91	229.11	226.86	156.81	155.27	215.47	213.17
59	351.83	342.96	269.77	262.54	184.51	179.63	254.62	247.39	311.37	303.52	238.74	232.35	163.29	158.97	225.33	218.94
60	383.33	368.26	294.46	281.54	201.34	192.62	276.78	264.57	336.60	324.14	260.59	249.16	178.19	170.47	244.94	234.13
61	391.81	375.29	306.11	290.28	209.28	198.64	287.03	273.10	346.75	332.13	270.91	256.90	185.21	175.80	254.06	241.69
62	404.15	382.43	317.89	296.49	217.21	202.82	297.98	278.91	357.67	338.44	281.33	262.39	192.23	179.50	263.71	246.82
63	415.62	394.25	324.48	308.52	223.41	210.85	303.55	289.34	367.83	348.91	287.16	273.04	197.71	186.60	268.63	256.05
64	425.58	411.45	324.48	324.48	223.41	222.00	303.55	302.25	377.52	364.14	287.16	287.16	197.71	196.48	268.63	267.48

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 8

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev DedCoins	
	$1,500		$3,000		$5,000		$1,750		$3,000		$6,000		$10,000		$3,500	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	172.38	172.38	129.71	129.71	90.68	90.68	97.66	97.66	152.55	152.55	114.79	114.79	80.25	80.25	86.43	86.43
1	139.85	139.85	103.89	103.89	71.61	71.61	82.84	82.84	123.77	123.77	91.94	91.94	63.39	63.39	73.32	73.32
2	107.84	107.84	78.58	78.58	54.18	54.18	73.50	73.50	95.44	95.44	69.53	69.53	47.95	47.95	65.05	65.05
3	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
4	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
5	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
6	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
7	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
8	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
9	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
10	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
11	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
12	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
13	98.77	98.77	71.96	71.96	49.55	49.55	67.32	67.32	87.41	87.41	63.69	63.69	43.85	43.85	59.58	59.58
14	98.77	98.77	71.96	71.96	49.55	49.63	67.32	67.91	87.41	87.41	63.69	63.69	43.85	43.92	59.58	60.10
15	98.77	107.84	71.96	78.95	49.55	54.44	67.32	73.85	87.41	95.44	63.69	69.87	43.85	48.18	59.58	65.36
16	98.77	109.73	71.96	80.57	49.55	55.64	67.32	74.44	87.41	97.11	63.69	71.30	43.85	49.25	59.58	65.88
17	98.77	109.73	71.96	80.57	49.55	55.64	67.32	74.44	87.41	97.11	63.69	71.30	43.85	49.25	59.58	65.88
18	98.77	116.74	71.96	86.06	49.55	59.51	67.32	78.06	87.41	103.32	63.69	76.16	43.85	52.66	59.58	69.08
19	98.77	121.37	71.96	89.55	49.55	61.91	67.32	81.21	87.41	107.41	63.69	79.25	43.85	54.80	59.58	71.87
20	98.77	123.76	71.96	91.17	49.55	63.11	67.32	82.72	87.41	109.53	63.69	80.68	43.85	55.86	59.58	73.21
21	98.77	127.53	71.96	94.67	49.55	65.77	67.32	82.96	87.41	112.86	63.69	83.78	43.85	58.21	59.58	73.41
22	98.77	127.53	71.96	94.67	49.55	65.77	67.32	82.96	87.41	112.86	63.69	83.78	43.85	58.21	59.58	73.41
23	98.77	128.39	71.96	95.28	49.55	66.29	67.32	83.66	87.41	113.62	63.69	84.33	43.85	58.67	59.58	74.03
24	98.77	130.61	71.96	96.91	49.55	67.31	67.32	85.41	87.41	115.59	63.69	85.76	43.85	59.58	59.58	75.58
25	98.77	132.67	71.96	98.15	49.55	68.18	67.32	86.92	87.41	117.41	63.69	86.87	43.85	60.34	59.58	76.93
26	98.77	135.23	71.96	100.15	49.55	69.47	67.32	88.79	87.41	119.68	63.69	88.63	43.85	61.48	59.58	78.58
27	98.77	138.31	71.96	102.52	49.55	71.02	67.32	91.12	87.41	122.40	63.69	90.73	43.85	62.85	59.58	80.64
28	98.77	143.27	71.96	106.14	49.55	73.50	68.37	94.86	87.41	126.80	63.69	93.93	43.85	65.05	60.51	83.94
29	98.77	150.30	71.96	111.00	49.55	76.85	69.42	99.99	87.41	133.01	63.69	98.24	43.85	68.02	61.44	88.49
30	98.77	154.06	71.96	113.12	49.55	77.80	70.36	105.36	87.41	136.34	63.69	100.11	43.85	68.85	62.26	93.24
31	99.97	162.28	71.96	118.93	49.55	81.84	71.88	111.55	88.47	143.62	63.69	105.20	43.85	72.42	63.60	98.71
32	102.19	167.76	73.46	122.85	50.08	84.41	73.39	115.63	90.44	148.46	65.01	108.72	44.30	74.70	64.95	102.33
33	106.13	175.11	76.46	128.09	52.21	87.93	76.84	120.99	93.93	154.97	67.66	113.36	46.21	77.82	67.73	107.08
34	110.24	180.59	79.45	131.95	54.18	90.51	79.69	125.19	97.56	159.83	70.31	116.78	47.95	80.09	70.52	110.80
35	111.95	182.99	80.82	133.82	55.13	91.71	80.97	126.94	99.08	161.94	71.53	118.43	48.79	81.17	71.66	112.34
36	115.72	184.70	83.69	135.20	57.02	92.65	83.77	128.34	102.41	163.46	74.07	119.65	50.46	82.00	74.13	113.58
37	121.02	188.47	87.43	137.94	59.51	94.46	87.62	131.14	107.11	166.79	77.37	122.08	52.66	83.59	77.54	116.06
38	128.90	193.26	93.16	141.31	63.37	96.77	93.45	134.64	114.07	171.03	82.45	125.06	56.09	85.64	82.71	119.16
39	140.02	202.85	101.27	148.54	68.87	101.67	101.85	142.11	123.92	179.52	89.62	131.46	60.95	89.98	90.14	125.76
40	144.65	213.80	104.89	157.27	71.61	108.20	103.72	146.20	128.01	189.21	92.83	139.19	63.39	95.75	91.79	129.38
41	152.18	218.08	110.38	160.26	75.22	110.17	109.21	149.23	134.67	193.00	97.69	141.83	66.57	97.50	96.65	132.06
42	156.46	223.39	113.37	164.38	77.29	112.92	112.36	153.31	138.47	197.70	100.33	145.47	68.39	99.94	99.44	135.67
43	160.22	230.92	116.24	169.99	79.17	116.78	115.84	159.15	141.80	204.37	102.87	150.44	70.07	103.35	101.81	140.84
44	165.53	236.05	120.23	173.73	81.92	119.28	119.01	163.00	146.49	208.90	106.41	153.76	72.50	105.56	105.32	144.25
45	169.88	237.77	123.34	175.48	84.66	120.39	122.39	164.86	150.44	210.42	109.16	155.30	74.40	106.54	108.31	145.90
46	177.85	243.24	129.45	179.72	88.10	123.40	128.46	169.30	157.40	215.27	114.57	159.05	77.97	109.21	113.68	149.82
47	184.02	246.33	134.08	182.64	91.19	125.37	133.02	172.09	162.85	218.00	118.66	161.81	80.71	110.95	117.71	152.30
48	194.63	248.72	142.06	184.46	96.61	126.40	141.41	173.85	172.24	220.12	125.72	163.25	85.49	111.85	125.14	153.84
49	205.92	255.05	150.91	189.45	102.53	129.75	150.28	178.87	182.24	225.72	133.55	167.67	90.73	114.83	132.99	158.29
50	232.29	264.12	172.61	197.05	118.93	135.33	158.56	183.65	205.58	233.75	152.76	174.39	105.25	119.77	140.32	162.53
51	244.27	272.52	182.72	203.79	125.72	139.88	168.48	190.30	216.18	241.18	161.71	180.35	111.26	123.80	149.10	168.41
52	256.43	280.21	191.82	210.41	131.81	144.26	177.58	196.72	226.93	247.99	169.76	186.21	116.65	127.67	157.15	174.09
53	267.38	288.55	200.05	215.69	137.39	147.95	185.10	202.20	236.63	253.60	177.05	191.07	121.59	130.94	164.69	178.54
54	280.73	297.16	212.39	224.74	145.72	153.88	197.50	211.06	248.45	263.00	187.97	198.90	128.97	136.18	174.60	186.79
55	294.77	310.18	224.12	235.22	153.71	161.17	208.15	220.40	260.87	274.51	198.34	208.17	136.03	142.64	184.20	195.05
56	305.04	317.02	233.10	240.71	159.72	164.78	216.79	226.12	269.96	280.56	206.30	215.02	141.35	145.83	191.85	200.11
57	317.71	324.72	243.83	247.94	166.93	169.68	227.17	232.83	281.17	287.38	215.79	219.43	147.74	150.17	201.04	206.10
58	333.45	330.37	254.93	252.44	174.49	172.77	238.77	237.20	295.11	292.38	225.61	223.40	154.42	152.90	212.19	209.92
59	346.46	337.73	265.65	258.54	181.70	176.90	250.73	241.62	305.62	298.90	235.10	228.81	160.81	156.54	221.89	215.60
60	374.54	360.67	289.97	277.25	198.28	189.69	272.56	260.54	331.47	319.20	256.62	245.37	175.48	167.87	241.20	230.57
61	385.84	369.57	301.44	285.86	206.09	195.61	282.71	268.94	341.46	327.07	266.78	252.99	182.39	173.11	250.18	238.00
62	397.99	376.59	313.05	291.97	213.90	199.73	293.44	274.66	352.22	333.29	277.05	258.39	189.30	176.76	259.69	243.06
63	409.28	388.24	319.53	303.82	220.00	207.63	298.93	284.92	362.22	343.59	282.78	268.87	194.70	183.76	264.54	252.15
64	420.07	405.17	319.53	319.53	220.00	218.62	298.93	297.64	371.76	358.58	282.78	282.78	194.70	193.48	264.54	263.40

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 1

	HSA09 0% Prev Ded/Coins $2,500		HSA09 0% Prev Ded/Coins $3,500		HSA09 0% Prev Ded/Coins $5,500		HSA09 0% Prev Ded/Coins $5,000		HSA09 0% Prev Ded/Coins $7,000		HSA09 0% Prev Ded/Coins $11,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	100.98	100.98	85.27	85.27	62.71	62.71	89.35	89.35	75.46	75.46	55.50	55.50
1	85.16	85.16	71.20	71.20	51.67	51.67	75.37	75.37	63.01	63.01	45.73	45.73
2	74.93	74.93	61.96	61.96	44.97	44.97	66.31	66.31	54.84	54.84	39.80	39.80
3	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
4	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
5	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
6	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
7	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
8	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
9	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
10	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
11	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
12	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
13	68.63	68.63	56.74	56.74	41.12	41.12	60.73	60.73	50.22	50.22	36.39	36.39
14	68.63	69.22	56.74	57.24	41.12	41.48	60.73	61.27	50.22	50.65	36.39	36.71
15	68.63	75.41	56.74	62.45	41.12	45.32	60.73	66.73	50.22	55.27	36.39	40.11
16	68.63	76.00	56.74	62.94	41.12	45.68	60.73	67.26	50.22	55.70	36.39	40.43
17	68.63	76.00	56.74	62.94	41.12	45.68	60.73	67.26	50.22	55.70	36.39	40.43
18	68.63	79.69	56.74	65.99	41.12	47.89	60.73	70.52	50.22	58.40	36.39	42.38
19	68.63	82.90	56.74	68.65	41.12	49.82	60.73	73.37	50.22	60.74	36.39	44.09
20	68.63	84.44	56.74	69.92	41.12	50.74	60.73	74.73	50.22	61.88	36.39	44.91
21	68.63	84.69	56.74	70.22	41.12	51.03	60.73	74.94	50.22	62.14	36.39	45.16
22	68.63	84.69	56.74	70.22	41.12	51.03	60.73	74.94	50.22	62.14	36.39	45.16
23	68.63	85.39	56.74	70.81	41.12	51.38	60.73	75.58	50.22	62.66	36.39	45.47
24	68.63	87.18	56.74	72.28	41.12	52.53	60.73	77.15	50.22	63.97	36.39	46.48
25	68.63	88.85	56.74	73.66	41.12	53.52	60.73	78.63	50.22	65.19	36.39	47.36
26	68.63	90.75	56.74	75.23	41.12	54.88	60.73	80.31	50.22	66.58	36.39	48.56
27	68.63	93.13	56.74	77.30	41.26	56.50	60.73	82.41	50.22	68.40	36.52	49.82
28	69.82	96.93	57.92	80.45	42.12	58.65	61.79	85.78	51.26	71.20	37.27	51.80
29	70.89	102.17	58.81	84.87	42.76	61.79	62.73	90.42	52.05	75.11	37.84	54.68
30	71.84	107.64	59.59	89.40	43.32	65.21	63.58	95.26	52.74	79.11	38.33	57.71
31	73.50	113.94	61.17	94.61	44.54	68.91	65.05	100.84	54.14	83.72	39.42	60.99
32	75.05	118.11	62.35	98.05	45.47	71.41	66.42	104.52	55.17	86.77	40.24	63.19
33	76.27	123.58	64.91	102.48	47.39	74.68	69.26	109.36	57.44	90.69	41.94	66.18
34	81.47	127.86	67.56	106.02	49.31	77.38	72.11	113.15	59.79	93.82	43.65	68.30
35	82.78	129.76	68.84	107.69	50.24	78.60	73.26	114.83	60.92	95.50	44.46	69.38
36	85.76	131.19	71.30	108.87	52.03	79.31	75.89	116.10	63.10	96.34	46.04	70.19
37	89.68	134.05	74.64	111.33	54.30	81.10	79.37	118.62	66.06	98.52	48.06	71.77
38	95.63	137.61	79.56	114.28	57.87	83.24	84.63	121.79	70.41	101.13	51.21	73.66
39	104.19	145.23	86.54	120.57	62.93	87.80	92.11	128.52	76.59	106.70	55.68	77.70
40	105.98	149.63	88.02	124.51	63.99	90.72	93.78	132.41	77.90	110.18	56.64	80.29
41	111.68	152.48	92.74	126.57	67.42	92.22	98.84	134.94	82.07	112.02	59.66	81.61
42	114.90	156.76	95.49	130.21	69.48	94.92	101.68	138.73	84.51	115.23	61.49	84.01
43	117.75	162.71	97.86	135.12	71.26	98.49	104.21	143.99	86.60	119.58	63.07	87.16
44	121.67	166.63	101.10	138.37	73.61	100.84	107.68	147.47	89.47	122.48	65.15	89.24
45	125.13	168.54	103.95	140.05	75.68	102.13	110.73	149.15	92.00	123.94	66.98	90.37
46	131.43	173.18	109.27	143.98	79.53	104.90	116.31	153.25	96.69	127.42	70.39	92.83
47	136.06	176.15	113.10	146.44	82.31	106.47	120.42	155.89	100.09	129.60	72.85	94.22
48	144.51	177.93	120.18	147.91	87.45	107.54	127.89	157.47	106.35	130.90	77.39	95.17
49	154.03	182.93	128.35	152.14	93.36	110.61	136.31	161.89	113.57	134.64	82.62	97.88
50	162.47	187.93	135.33	156.37	98.78	113.74	143.78	166.31	119.76	138.39	87.41	100.66
51	172.46	194.82	143.58	162.07	104.80	117.80	152.62	172.41	127.07	143.43	92.80	104.25
52	181.66	201.48	151.45	167.88	110.03	122.01	160.94	178.31	134.03	148.56	97.38	107.98
53	190.54	207.08	158.64	172.60	115.30	125.50	168.62	183.25	140.39	152.74	102.05	111.06
54	202.55	216.11	169.35	180.07	124.15	131.27	179.25	191.26	149.87	159.36	109.87	116.17
55	213.97	226.58	179.09	189.81	130.49	138.55	189.36	200.52	158.49	167.97	115.48	122.60
56	223.01	233.12	186.86	195.01	136.12	142.82	197.36	206.30	165.36	173.46	120.46	126.39
57	233.60	239.91	195.61	200.33	142.10	146.09	206.73	211.78	173.11	177.29	125.76	129.29
58	247.51	243.71	208.30	203.77	151.58	148.38	219.04	215.67	184.33	180.33	134.15	131.31
59	258.61	250.25	218.04	209.09	158.71	152.22	229.04	221.46	192.96	185.03	140.45	134.72
60	280.22	267.61	234.75	223.73	170.82	162.84	247.99	236.83	207.75	198.00	151.18	144.11
61	291.05	276.54	244.29	231.70	177.38	169.40	257.56	244.73	216.19	205.05	156.93	149.91
62	302.94	282.72	251.97	237.21	182.59	173.03	268.09	250.19	222.98	209.92	161.59	153.13
63	304.72	294.14	251.97	247.73	182.59	180.30	269.67	260.30	222.98	219.24	161.59	159.56
64	304.72	304.72	251.97	251.97	182.59	182.59	269.67	269.67	222.98	222.98	161.59	161.59

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 2

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$2,500		$3,500		$5,500		$5,800		$7,000		$11,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	90.33	90.33	76.28	76.28	56.10	56.10	79.94	79.94	67.51	67.51	49.65	49.65
1	76.18	76.18	63.69	63.69	46.22	46.22	67.42	67.42	56.37	56.37	40.90	40.90
2	67.03	67.03	55.43	55.43	40.23	40.23	59.32	59.32	49.05	49.05	35.60	35.60
3	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
4	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
5	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
6	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
7	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
8	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
9	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
10	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
11	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
12	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
13	61.40	61.40	50.76	50.76	36.78	36.78	54.33	54.33	44.92	44.92	32.55	32.55
14	61.40	61.92	50.76	51.20	36.78	37.11	54.33	54.80	44.92	45.31	32.55	32.83
15	61.40	67.45	50.76	55.87	36.78	40.55	54.33	59.70	44.92	49.44	32.55	35.88
16	61.40	67.99	50.76	56.31	36.78	40.87	54.33	60.17	44.92	49.83	32.55	36.17
17	61.40	67.99	50.76	56.31	36.78	40.87	54.33	60.17	44.92	49.83	32.55	36.17
18	61.40	71.29	50.76	59.04	36.78	42.84	54.33	63.09	44.92	52.24	32.55	37.92
19	61.40	74.16	50.76	61.41	36.78	44.57	54.33	65.63	44.92	54.34	32.55	39.44
20	61.40	75.54	50.76	62.55	36.78	45.39	54.33	66.85	44.92	55.36	32.55	40.17
21	61.40	75.76	50.76	62.82	36.78	45.65	54.33	67.04	44.92	55.59	32.55	40.40
22	61.40	75.76	50.76	62.82	36.78	45.65	54.33	67.04	44.92	55.59	32.55	40.40
23	61.40	76.98	50.76	63.35	36.78	45.97	54.33	67.61	44.92	56.06	32.55	40.68
24	61.40	77.99	50.76	64.66	36.78	45.99	54.33	69.02	44.92	57.23	32.55	41.58
25	61.40	79.49	50.76	65.90	36.78	47.88	54.33	70.34	44.92	58.32	32.55	42.37
26	61.40	81.18	50.76	67.30	36.78	49.09	54.33	71.84	44.92	59.56	32.55	43.44
27	61.40	83.31	50.76	69.15	36.91	50.37	54.33	73.73	44.92	61.20	32.67	44.57
28	62.46	86.72	51.82	71.97	37.68	52.47	55.27	76.74	45.86	63.69	33.34	46.43
29	63.41	91.40	52.61	75.93	38.25	55.27	56.12	80.83	46.56	67.19	33.85	48.91
30	64.27	96.29	53.31	79.97	38.76	58.33	56.88	85.22	47.18	70.77	34.31	51.63
31	65.76	101.93	54.72	84.63	39.85	61.65	58.19	90.21	48.43	74.90	35.26	54.56
32	67.14	105.66	55.78	87.71	40.68	63.88	59.41	93.50	49.35	77.62	36.00	56.53
33	70.01	110.55	58.07	91.67	42.40	66.81	61.96	97.83	51.39	81.13	37.52	59.13
34	72.89	114.38	60.44	94.84	44.12	69.05	64.50	101.23	53.49	83.93	39.04	61.10
35	74.05	116.08	61.59	96.34	44.95	70.13	65.54	102.73	54.50	85.25	39.78	62.06
36	76.72	117.36	63.79	97.39	46.54	70.95	67.89	103.86	56.45	86.18	41.19	62.80
37	80.23	119.91	66.77	99.59	48.58	72.55	71.00	106.12	59.10	88.13	42.99	64.20
38	85.55	123.10	71.17	102.23	51.77	74.45	75.70	108.94	62.99	90.47	45.81	65.90
39	93.21	129.92	77.42	107.86	56.30	78.54	82.48	114.97	68.51	95.46	49.82	69.50
40	94.60	133.85	78.74	111.33	57.25	81.16	83.90	118.46	69.69	98.57	50.66	71.83
41	99.91	136.40	82.96	113.22	60.31	82.49	88.42	120.71	73.42	100.21	53.37	73.01
42	102.78	140.24	85.42	116.49	62.16	84.92	90.96	124.11	75.60	103.08	55.01	75.15
43	105.34	145.55	87.54	120.88	63.75	88.11	93.22	128.81	77.47	106.97	56.42	77.97
44	108.85	149.07	90.44	123.79	65.85	90.21	96.33	131.92	80.04	109.55	58.29	79.84
45	111.94	150.77	93.00	125.28	67.71	91.36	99.05	133.42	82.29	110.87	59.91	80.85
46	117.57	154.92	97.74	128.80	71.15	93.84	104.05	137.10	86.50	113.99	62.97	83.04
47	121.72	157.58	101.17	131.00	73.63	95.24	107.72	139.46	89.54	115.94	65.17	84.29
48	129.28	159.17	107.51	132.32	78.23	96.20	114.41	140.85	95.15	117.10	69.23	85.14
49	137.79	163.64	114.81	136.10	83.51	98.95	121.94	144.82	101.60	120.45	73.91	87.56
50	145.35	168.11	121.06	139.88	88.36	101.75	128.63	148.77	107.13	123.79	78.20	90.05
51	154.28	174.28	128.45	144.99	93.40	105.38	136.53	154.23	113.67	128.31	82.66	93.26
52	162.69	180.24	135.49	150.18	98.44	109.15	143.97	159.51	119.90	132.90	87.11	95.59
53	170.45	185.25	141.91	154.40	103.15	112.27	150.85	163.94	125.58	136.64	91.28	99.35
54	181.20	193.33	151.50	161.09	111.05	117.44	160.35	171.09	134.07	142.56	98.29	103.93
55	191.42	202.69	160.21	169.83	118.74	123.94	169.40	179.38	141.78	150.26	103.31	109.68
56	199.50	208.54	167.16	175.34	121.77	127.76	176.55	184.56	147.93	155.17	107.76	113.05
57	208.97	214.08	174.99	179.21	127.13	130.69	184.94	189.46	154.85	158.59	112.50	115.66
58	221.42	218.02	188.33	182.29	135.60	132.74	195.95	192.93	164.90	161.92	120.00	117.47
59	231.53	223.87	195.05	187.04	141.98	136.17	204.89	198.11	172.61	165.53	125.65	120.51
60	250.68	238.41	210.00	200.15	152.81	145.67	221.84	211.85	185.85	177.13	135.24	128.91
61	260.37	247.33	218.54	207.28	158.69	151.54	230.41	218.93	193.40	183.43	140.43	134.11
62	271.01	252.92	225.40	212.20	163.34	154.79	239.83	223.82	199.47	187.80	144.55	136.99
63	272.59	263.13	225.40	221.61	163.34	161.29	241.24	232.85	199.47	196.13	144.55	142.74
64	272.59	272.59	225.40	225.40	163.34	163.34	241.24	241.24	199.47	199.47	144.55	144.55

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 3

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$2,500		$3,500		$5,500		$5,800		$7,000		$11,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	93.03	93.03	78.55	78.55	57.78	57.78	82.53	82.39	69.52	69.52	51.13	51.13
1	78.46	78.46	65.60	65.60	47.60	47.60	69.43	69.43	58.05	58.05	42.12	42.12
2	69.03	69.03	57.08	57.08	41.43	41.43	61.09	61.09	50.52	50.52	36.67	36.67
3	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
4	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
5	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
6	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
7	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
8	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
9	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
10	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
11	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
12	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
13	63.23	63.23	52.27	52.27	37.88	37.88	55.95	55.95	46.26	46.26	33.53	33.53
14	63.23	63.77	52.27	52.73	37.88	38.21	55.95	56.44	46.26	46.67	33.53	33.82
15	63.23	69.47	52.27	57.53	37.88	41.75	55.95	61.48	46.26	50.91	33.53	36.95
16	63.23	70.01	52.27	57.99	37.88	42.08	55.95	61.96	46.26	51.31	33.53	37.25
17	63.23	70.01	52.27	57.99	37.88	42.08	55.95	61.96	46.26	51.31	33.53	37.25
18	63.23	73.42	52.27	60.80	37.88	44.12	55.95	64.97	46.26	53.80	33.53	39.04
19	63.23	76.38	52.27	63.24	37.88	45.90	55.95	67.59	46.26	55.96	33.53	40.61
20	63.23	77.80	52.27	64.42	37.88	46.75	55.95	68.85	46.26	57.01	33.53	41.37
21	63.23	78.02	52.27	64.69	37.88	47.01	55.95	69.04	46.26	57.25	33.53	41.60
22	63.23	78.02	52.27	64.69	37.88	47.01	55.95	69.04	46.26	57.25	33.53	41.60
23	63.23	78.67	52.27	65.24	37.88	47.34	55.95	69.63	46.26	57.73	33.53	41.89
24	63.23	80.32	52.27	66.59	37.88	48.39	55.95	71.07	46.26	58.93	33.53	42.82
25	63.23	81.86	52.27	67.86	37.88	49.31	55.95	72.44	46.26	60.06	33.53	43.64
26	63.23	83.61	52.27	69.31	37.88	50.56	55.95	73.99	46.26	61.33	33.53	44.74
27	63.23	85.80	52.27	71.21	38.01	51.87	55.95	75.93	46.26	63.02	33.65	45.90
28	64.32	89.30	53.37	74.12	38.80	54.04	56.92	79.03	47.23	65.59	34.34	47.82
29	65.31	94.13	54.18	78.19	39.39	56.92	57.79	83.30	47.95	69.20	34.86	50.37
30	66.19	99.16	54.90	82.36	39.92	60.07	58.57	87.78	48.59	72.89	35.33	53.17
31	67.72	104.97	56.35	87.16	41.03	63.49	59.92	92.90	49.87	77.13	36.32	56.19
32	69.14	108.81	57.44	90.33	41.89	65.79	61.18	96.29	50.83	79.94	37.07	58.22
33	72.11	113.85	59.80	94.41	43.66	68.81	63.81	100.78	52.92	83.55	38.64	60.89
34	75.05	117.79	62.24	97.67	45.43	71.10	66.43	104.25	55.09	86.44	40.21	62.93
35	76.27	119.55	63.43	99.21	46.29	72.23	67.49	105.79	56.13	87.80	40.96	63.92
36	79.01	120.86	65.69	100.30	47.93	73.07	69.92	106.95	58.13	88.76	42.41	64.67
37	82.62	123.49	68.77	102.57	50.03	74.72	73.12	109.28	60.86	90.76	44.28	66.12
38	88.10	126.78	73.30	105.28	53.32	76.68	77.96	112.20	64.87	93.17	47.18	67.87
39	95.99	133.80	79.73	111.08	57.98	80.88	84.93	118.40	70.56	98.30	51.30	71.58
40	97.63	137.85	81.09	114.70	58.96	83.58	86.40	121.99	71.77	101.51	52.17	73.97
41	102.89	140.48	85.44	116.61	62.11	84.96	91.06	124.32	75.61	103.20	54.97	75.19
42	105.85	144.42	87.97	119.96	64.01	87.45	93.67	127.81	77.85	106.16	56.65	77.40
43	108.48	149.90	90.15	124.49	65.65	90.73	96.00	132.68	79.78	110.17	58.10	80.29
44	112.10	153.52	93.14	127.48	67.82	92.91	99.20	135.86	82.43	112.82	60.02	82.22
45	115.28	155.27	95.77	129.02	69.72	94.09	102.02	137.41	84.75	114.18	61.70	83.26
46	121.09	159.55	100.66	132.64	73.26	96.64	107.15	141.19	89.03	117.38	64.85	85.53
47	125.36	162.29	104.19	134.91	75.83	98.09	110.94	143.62	92.21	119.39	67.11	86.80
48	133.14	163.92	110.72	136.27	80.56	99.07	117.82	145.07	97.93	120.59	71.29	87.67
49	141.90	168.53	118.24	140.17	86.01	101.90	125.58	149.15	104.64	124.04	76.12	90.17
50	149.68	173.13	124.67	144.06	91.00	104.78	132.47	153.21	110.83	127.49	80.53	92.73
51	158.89	179.49	132.28	149.32	96.16	108.53	140.61	158.84	117.06	132.14	85.12	96.05
52	167.55	185.62	139.53	154.66	101.38	112.41	148.27	164.27	123.48	136.87	89.71	99.47
53	175.54	190.77	146.14	159.01	106.23	115.62	155.35	168.83	129.34	140.72	94.01	102.32
54	186.61	199.10	156.02	165.89	114.37	120.94	165.14	176.20	138.07	146.81	101.22	107.02
55	197.13	208.74	164.99	174.86	120.22	127.64	174.45	184.73	146.01	154.75	106.39	112.96
56	205.46	214.77	172.15	180.58	125.40	131.58	181.82	190.06	152.34	159.80	110.98	116.44
57	215.21	220.47	180.21	184.56	130.92	134.59	190.45	195.11	159.48	163.33	115.85	119.11
58	228.03	224.52	191.90	187.73	139.65	136.69	201.80	198.69	169.83	166.14	123.58	120.97
59	238.44	230.55	200.87	192.63	146.21	140.24	211.01	204.03	177.77	170.47	129.40	124.11
60	258.16	246.55	216.27	206.13	157.37	150.02	228.47	218.19	191.99	182.41	139.28	132.76
61	268.14	254.77	225.06	213.46	163.42	156.05	237.29	225.46	199.17	188.91	144.62	136.11
62	279.09	263.46	232.13	218.54	168.22	159.41	246.99	230.50	205.42	193.40	148.87	141.08
63	280.73	270.98	232.13	228.23	168.22	166.11	248.44	239.81	205.42	201.98	148.87	147.00
64	280.73	280.73	232.13	232.13	168.22	168.22	248.44	248.44	205.42	205.42	148.87	148.87

Rates shown are based on our Preferred risk tier - .573

	Lumenos HSA - Area 4											
	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%	
	Prev Ded Coins		Prev Ded Coins		Prev Ded Coins		Prev Ded Coins		Prev Ded Coins		Prev Ded Coins	
	$2,500		$3,500		$5,500		$5,000		$7,000		$11,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	91.72	91.72	77.45	77.45	56.96	56.96	81.17	81.17	68.54	68.54	50.41	50.41
1	77.35	77.35	64.67	64.67	46.93	46.93	68.46	68.46	57.23	57.23	41.53	41.53
2	68.06	68.06	56.28	56.28	40.84	40.84	60.23	60.23	49.81	49.81	36.15	36.15
3	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
4	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
5	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
6	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
7	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
8	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
9	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
10	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
11	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
12	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
13	62.34	62.34	51.54	51.54	37.35	37.35	55.16	55.16	45.61	45.61	33.05	33.05
14	62.34	62.88	51.54	51.99	37.35	37.67	55.16	55.64	45.61	46.01	33.05	33.34
15	62.34	68.49	51.54	56.73	37.35	41.17	55.16	60.61	45.61	50.19	33.05	36.43
16	62.34	69.03	51.54	57.17	37.35	41.49	55.16	61.09	45.61	50.59	33.05	36.72
17	62.34	69.03	51.54	57.17	37.35	41.49	55.16	61.09	45.61	50.59	33.05	36.72
18	62.34	72.38	51.54	59.94	37.35	43.50	55.16	64.06	45.61	53.04	33.05	38.49
19	62.34	75.30	51.54	62.35	37.35	45.25	55.16	66.64	45.61	55.17	33.05	40.04
20	62.34	76.70	51.54	63.51	37.35	46.09	55.16	67.88	45.61	56.21	33.05	40.79
21	62.34	76.92	51.54	63.78	37.35	46.34	55.16	68.07	45.61	56.44	33.05	41.02
22	62.34	76.92	51.54	63.78	37.35	46.34	55.16	68.07	45.61	56.44	33.05	41.02
23	62.34	77.57	51.54	64.31	37.35	46.67	55.16	68.65	45.61	56.92	33.05	41.30
24	62.34	79.19	51.54	65.65	37.35	47.71	55.16	70.08	45.61	58.10	33.05	42.22
25	62.34	80.70	51.54	66.90	37.35	48.61	55.16	71.41	45.61	59.21	33.05	43.02
26	62.34	82.43	51.54	68.34	37.35	49.65	55.16	72.95	45.61	60.47	33.05	44.11
27	62.34	84.59	51.54	70.21	37.47	51.14	55.16	74.86	45.61	62.14	33.17	45.26
28	63.42	88.05	52.61	73.07	38.26	53.28	56.12	77.92	46.56	64.67	33.85	47.14
29	64.59	92.60	53.42	77.09	38.84	56.12	56.98	82.13	47.27	68.22	34.37	49.66
30	65.25	97.77	54.13	81.20	39.35	59.23	57.75	86.52	47.91	71.85	34.83	52.42
31	66.77	103.50	55.56	85.93	40.45	62.60	59.08	91.59	49.17	78.04	35.80	55.40
32	68.17	107.28	56.64	89.06	41.30	64.86	60.33	94.93	50.11	78.82	36.55	57.40
33	71.09	112.24	58.98	93.08	43.04	67.84	62.91	99.34	52.17	82.37	38.09	60.04
34	74.02	116.14	61.36	96.29	44.79	70.11	65.49	102.78	54.31	85.22	39.64	62.04
35	75.19	117.87	62.53	97.81	45.69	71.21	66.54	104.30	55.33	86.56	40.39	63.02
36	77.89	119.16	64.76	98.83	47.26	72.04	68.93	105.45	57.31	87.51	41.82	63.76
37	81.45	121.75	67.80	101.12	49.32	73.66	72.09	107.75	60.00	89.49	43.65	65.19
38	86.86	124.99	72.28	103.80	52.56	75.60	76.86	110.62	63.95	91.86	46.52	66.91
39	94.64	131.91	78.60	109.51	57.16	79.75	83.75	116.73	69.57	96.92	50.58	70.57
40	96.26	135.90	79.94	113.09	58.13	82.40	85.19	120.27	70.75	100.08	51.44	72.93
41	101.44	138.49	84.24	114.96	61.24	83.76	89.78	122.56	74.55	101.74	54.19	74.13
42	104.36	142.38	86.74	118.27	63.11	86.22	92.35	126.01	76.76	104.66	55.85	76.31
43	106.96	147.79	88.88	122.74	64.73	89.46	94.65	130.79	78.66	108.62	57.28	79.17
44	110.51	151.36	91.83	125.68	66.86	91.59	97.80	133.94	81.27	111.23	59.18	81.06
45	113.65	153.08	94.42	127.20	68.74	92.76	100.58	135.47	83.55	112.57	60.84	82.09
46	119.38	157.29	99.24	130.78	72.24	95.28	105.64	139.20	87.82	115.73	63.93	84.32
47	123.59	160.00	102.73	133.00	74.76	96.71	109.37	141.59	90.91	117.71	66.16	85.58
48	131.26	161.61	109.16	134.35	79.42	97.68	116.16	143.02	96.60	118.89	70.29	86.44
49	139.90	168.15	116.58	138.19	84.79	100.46	123.81	147.04	103.16	122.30	75.05	88.91
50	147.58	170.59	122.91	142.03	89.72	103.31	130.60	151.05	108.77	125.69	79.39	91.43
51	156.63	176.95	130.42	147.21	94.83	107.00	138.63	156.50	115.41	130.28	83.93	94.69
52	165.18	183.00	137.56	152.48	99.94	110.82	146.18	161.95	121.74	134.94	88.45	98.07
53	173.07	188.09	144.09	156.77	104.73	113.99	153.16	168.45	127.51	138.74	92.69	100.88
54	183.98	196.29	153.82	163.56	112.76	119.24	162.81	173.72	136.13	144.74	99.79	105.52
55	194.35	205.80	162.67	172.40	118.53	125.84	171.99	182.13	143.55	152.57	104.89	111.36
56	202.56	211.74	169.72	178.83	123.64	129.72	179.26	187.38	150.19	157.55	109.41	114.80
57	212.18	217.36	177.68	181.95	129.07	132.70	187.77	192.36	157.23	161.02	114.22	117.44
58	224.82	221.36	189.19	185.08	137.68	134.77	198.96	195.89	167.43	163.80	121.84	119.26
59	235.08	227.30	198.04	189.91	144.16	138.26	208.03	201.16	175.26	168.07	127.57	122.56
60	254.52	243.07	213.22	203.22	155.16	147.91	225.25	215.11	188.69	179.84	137.31	130.89
61	264.36	251.17	221.89	210.45	161.12	153.87	233.94	222.28	196.37	185.24	142.58	135.17
62	275.16	255.80	228.85	215.45	165.84	157.17	243.50	227.25	202.53	190.68	146.76	139.09
63	276.78	267.17	228.85	225.02	165.84	163.77	244.94	236.43	202.53	199.13	146.76	144.93
64	276.78	276.78	228.85	228.86	165.84	165.84	244.94	244.94	202.53	202.53	146.76	146.76

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 5

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$2,500		$3,500		$5,500		$5,000		$7,000		$11,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	89.69	89.69	75.73	75.73	55.70	55.70	79.37	79.37	67.02	67.02	49.30	49.30
1	75.64	75.64	63.24	63.24	45.89	45.89	66.94	66.94	55.97	55.97	40.61	40.61
2	66.55	66.55	55.04	55.04	39.94	39.94	58.90	58.90	48.71	48.71	35.35	35.35
3	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
4	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
5	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
6	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
7	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
8	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
9	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
10	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
11	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
12	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
13	60.96	60.96	50.40	50.40	36.52	36.52	53.95	53.95	44.60	44.60	32.32	32.32
14	60.96	61.48	50.40	50.84	36.52	36.84	53.95	54.42	44.60	44.99	32.32	32.60
15	60.96	66.98	50.40	55.47	36.52	40.26	53.95	59.27	44.60	49.09	32.32	35.62
16	60.96	67.51	50.40	55.91	36.52	40.57	53.95	59.74	44.60	49.47	32.32	35.91
17	60.96	67.51	50.40	55.91	36.52	40.57	53.95	59.74	44.60	49.47	32.32	35.91
18	60.96	70.78	50.40	58.62	36.52	42.53	53.95	62.64	44.60	51.87	32.32	37.65
19	60.96	73.64	50.40	60.97	36.52	44.25	53.95	65.17	44.60	53.95	32.32	39.16
20	60.96	75.01	50.40	62.11	36.52	45.07	53.95	66.38	44.60	54.96	32.32	39.89
21	60.96	75.22	50.40	62.37	36.52	45.32	53.95	66.57	44.60	55.20	32.32	40.11
22	60.96	75.22	50.40	62.37	36.52	45.32	53.95	66.57	44.60	55.20	32.32	40.11
23	60.96	75.85	50.40	62.89	36.52	45.64	53.95	67.13	44.60	55.66	32.32	40.39
24	60.96	77.44	50.40	64.20	36.52	46.65	53.95	68.53	44.60	56.82	32.32	41.28
25	60.96	78.92	50.40	65.43	36.52	47.54	53.95	69.84	44.60	57.90	32.32	42.07
26	60.96	80.60	50.40	66.82	36.52	48.75	53.95	71.33	44.60	59.13	32.32	43.14
27	60.96	82.72	50.40	68.65	36.65	50.01	53.95	73.21	44.60	60.76	32.64	44.25
28	62.02	86.10	51.45	71.46	37.41	52.10	54.88	76.19	45.53	63.24	33.11	46.10
29	62.97	90.75	52.23	75.29	37.98	54.88	55.72	80.31	46.23	66.71	33.61	48.57
30	63.81	95.61	52.93	79.41	38.48	57.92	56.47	84.61	46.85	70.27	34.06	51.26
31	65.29	101.21	54.33	84.03	39.56	61.21	57.78	89.57	48.09	74.36	35.01	54.17
32	66.66	104.90	55.38	87.09	40.39	63.43	58.99	92.84	49.01	77.07	35.74	56.13
33	69.52	109.76	57.66	91.02	42.09	66.34	61.52	97.14	51.02	80.55	37.25	58.71
34	72.37	113.57	60.01	94.17	43.80	68.55	64.04	100.50	53.11	83.34	38.76	60.67
35	73.53	115.26	61.15	95.65	44.63	69.63	65.07	102.00	54.11	84.64	39.50	61.62
36	76.17	116.53	63.33	96.70	46.21	70.45	67.41	103.12	56.05	85.58	40.90	62.35
37	79.65	119.06	66.30	98.89	48.24	72.04	70.50	105.36	58.68	87.51	42.68	63.75
38	84.94	122.23	70.67	101.51	51.40	73.93	75.17	108.17	62.54	89.82	45.49	65.43
39	92.55	128.99	76.87	107.09	55.90	77.99	81.90	114.15	68.03	94.78	49.46	69.01
40	94.13	132.90	78.18	110.59	56.84	80.58	83.30	117.61	69.19	97.87	50.30	71.32
41	99.20	135.43	82.97	112.42	59.88	81.91	87.79	119.86	72.90	99.50	53.00	72.49
42	102.05	139.24	84.82	115.65	61.72	84.32	90.31	123.22	75.06	102.35	54.62	74.62
43	104.59	144.52	85.92	120.03	63.30	87.48	92.56	127.89	76.92	106.22	56.02	77.42
44	108.07	148.01	89.80	122.90	65.39	89.57	95.64	130.99	79.47	108.77	57.87	79.27
45	111.14	149.70	92.33	124.39	67.22	90.71	98.36	132.48	81.71	110.08	59.49	80.27
46	116.74	153.82	97.05	127.88	70.65	93.18	103.31	136.13	85.89	113.17	62.52	82.45
47	120.86	156.46	100.45	130.07	73.11	94.57	106.96	138.47	88.90	115.11	64.70	83.89
48	128.35	158.04	106.74	131.38	77.67	95.52	113.60	139.86	94.47	116.27	68.74	84.53
49	136.81	162.48	114.00	135.14	82.92	98.25	121.07	143.79	100.83	119.59	73.38	86.94
50	144.31	166.92	120.20	138.83	87.74	101.03	127.71	147.72	106.37	122.91	77.64	89.41
51	153.19	173.05	127.54	143.96	92.73	104.64	135.56	153.14	112.86	127.60	82.07	92.60
52	161.53	178.96	134.52	149.11	97.74	108.37	142.95	158.38	119.05	131.96	86.49	95.91
53	169.24	183.93	140.90	153.31	102.42	111.47	149.78	162.77	124.70	135.67	90.64	98.65
54	179.91	191.96	150.42	159.95	110.27	116.60	159.21	169.88	133.12	141.54	97.59	103.19
55	190.05	201.25	158.87	168.59	115.91	123.06	168.19	178.11	140.77	149.20	102.57	108.93
56	198.09	207.07	165.97	174.09	120.93	126.86	175.30	183.25	146.88	154.07	107.00	112.26
57	207.49	212.56	173.75	177.94	126.22	129.76	183.62	188.11	153.76	157.47	111.70	114.84
58	219.85	216.47	185.02	180.99	134.64	131.79	194.56	191.57	163.73	160.18	119.15	116.63
59	228.88	222.28	193.66	185.72	140.97	135.21	203.44	196.71	171.39	164.33	124.75	119.66
60	248.50	237.70	208.51	198.73	151.73	144.64	220.27	210.56	184.53	175.87	134.28	128.00
61	258.51	245.62	216.98	205.80	157.56	150.46	228.78	217.37	192.03	182.13	139.43	133.16
62	269.08	251.12	223.80	210.70	162.18	153.70	238.12	222.23	198.05	186.46	143.52	136.01
63	270.66	261.27	223.80	220.04	162.18	160.15	239.53	231.21	198.05	194.73	143.52	141.73
64	270.66	270.66	223.80	223.80	162.18	162.18	239.53	239.53	198.05	198.05	143.52	143.52

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 6

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%	
	Prev Ded/Coins		Prev Ded/Coins		Prev Ded/Coins		Prev Ded/Coins		Prev Ded/Coins		Prev Ded/Coins	
	$2,500		$3,500		$5,500		$5,980		$7,000		$11,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	98.52	98.52	83.19	83.19	61.18	61.18	87.18	87.18	73.62	73.62	54.15	54.15
1	83.09	83.09	69.46	69.46	50.41	50.41	73.53	73.53	61.47	61.47	44.61	44.61
2	73.10	73.10	60.45	60.45	43.87	43.87	64.69	64.69	53.50	53.50	38.83	38.83
3	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
4	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
5	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
6	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
7	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
8	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
9	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
10	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
11	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
12	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
13	66.96	66.96	55.36	55.36	40.12	40.12	59.25	59.25	48.99	48.99	35.50	35.50
14	66.96	67.53	55.36	55.84	40.12	40.47	59.25	59.77	48.99	49.42	35.50	35.81
15	66.96	73.57	55.36	60.93	40.12	44.22	59.25	65.10	48.99	53.91	35.50	39.13
16	66.96	74.15	55.36	61.41	40.12	44.56	59.25	65.62	48.99	54.34	35.50	39.44
17	66.96	74.15	55.36	61.41	40.12	44.56	59.25	65.62	48.99	54.34	35.50	39.44
18	66.96	77.74	55.36	64.38	40.12	46.72	59.25	68.80	48.99	56.97	35.50	41.35
19	66.96	80.88	55.36	66.97	40.12	48.60	59.25	71.58	48.99	59.27	35.50	43.01
20	66.96	82.39	55.36	68.22	40.12	49.50	59.25	72.91	48.99	60.37	35.50	43.81
21	66.96	82.62	55.36	68.50	40.12	49.78	59.25	73.11	48.99	60.62	35.50	44.05
22	66.96	82.62	55.36	68.50	40.12	49.78	59.25	73.11	48.99	60.62	35.50	44.05
23	66.96	83.31	55.36	69.08	40.12	50.13	59.25	73.73	48.99	61.13	35.50	44.36
24	66.96	85.06	55.36	70.52	40.12	51.24	59.25	75.27	48.99	62.41	35.50	45.35
25	66.96	86.68	55.36	71.88	40.12	52.22	59.25	76.71	48.99	63.60	35.50	46.21
26	66.96	88.53	55.36	73.40	40.12	53.54	59.25	78.35	48.99	64.96	35.50	47.38
27	66.96	90.86	55.36	75.41	40.25	54.93	59.25	80.40	48.99	66.74	35.63	48.61
28	68.11	94.57	56.51	78.48	41.09	57.23	60.28	83.69	50.01	69.46	36.36	50.64
29	69.16	99.67	57.37	82.80	41.72	60.28	61.20	88.21	50.77	73.28	36.91	53.35
30	70.09	109.01	58.14	87.22	42.27	63.61	62.03	92.93	51.46	77.18	37.41	56.30
31	71.71	111.16	59.68	92.30	43.46	67.24	63.46	98.38	52.81	81.68	38.46	59.50
32	73.22	115.22	60.83	95.66	44.36	69.67	64.79	101.97	53.83	84.68	39.26	61.65
33	76.36	120.56	63.33	99.97	46.24	72.85	67.57	106.69	56.04	88.47	40.92	64.49
34	79.49	124.74	65.91	103.43	48.11	75.30	70.35	110.39	58.34	91.54	42.58	66.63
35	80.76	126.60	67.16	105.06	49.01	76.68	71.48	112.03	59.43	92.97	43.38	67.68
36	83.66	127.99	69.56	106.22	50.76	77.38	74.04	113.26	61.56	93.99	44.92	68.48
37	87.49	130.78	72.82	108.61	52.98	79.13	77.43	115.73	64.45	96.12	46.88	70.02
38	93.30	134.25	77.62	111.49	56.46	81.21	82.56	118.61	68.69	98.66	49.96	71.87
39	101.65	141.69	84.43	117.63	61.40	85.66	89.96	125.38	74.72	104.10	54.33	75.80
40	103.39	145.98	85.87	121.46	62.43	88.51	91.50	129.18	76.00	107.49	55.25	78.33
41	108.96	148.76	90.48	123.48	65.77	89.97	96.43	131.65	80.07	109.28	58.21	79.62
42	112.09	152.93	93.16	127.03	67.79	92.61	99.20	135.35	82.44	112.42	59.99	81.96
43	114.88	158.74	95.47	131.83	69.52	96.09	101.66	140.48	84.48	116.66	61.53	85.03
44	118.70	162.57	98.63	134.99	71.82	98.38	105.05	143.87	87.29	119.47	63.55	87.07
45	122.07	164.42	101.42	135.63	73.84	99.63	108.03	145.51	89.75	120.91	65.34	88.17
46	128.23	168.95	106.60	140.47	77.60	102.34	113.47	149.52	94.33	124.31	68.67	90.57
47	132.75	171.85	110.34	142.86	80.30	103.87	117.48	152.09	97.65	126.43	71.07	91.92
48	140.99	173.59	117.25	144.30	85.31	104.92	124.77	153.62	103.76	127.70	75.50	92.84
49	150.27	178.47	125.21	148.43	91.03	107.91	132.98	157.94	110.81	131.35	80.60	95.49
50	158.51	183.34	132.02	152.56	96.37	110.96	140.28	162.25	116.83	135.00	85.28	98.20
51	168.26	190.07	140.08	158.12	101.86	114.93	148.90	168.20	123.97	139.93	90.14	101.71
52	177.42	196.57	147.75	163.78	107.35	119.03	157.01	173.96	130.76	144.94	95.00	105.34
53	185.89	202.02	154.76	168.39	112.49	122.44	164.51	178.78	136.96	149.02	99.55	108.85
54	197.61	210.84	165.22	175.68	121.12	128.07	174.83	185.59	146.21	155.47	107.19	113.34
55	208.75	221.05	174.72	185.18	127.31	135.16	184.74	195.62	154.62	163.88	112.66	119.61
56	217.57	227.44	182.29	191.22	132.80	139.34	192.55	201.27	161.33	169.22	117.52	123.30
57	227.90	233.47	190.84	195.44	138.64	142.53	201.68	206.61	168.89	172.96	122.69	126.13
58	241.47	237.76	203.21	198.80	147.89	144.76	213.70	210.41	179.84	175.93	130.87	128.11
59	252.50	244.14	212.71	203.98	154.84	148.51	223.45	216.06	188.25	180.52	137.03	131.43
60	273.38	261.09	229.02	218.28	166.66	158.86	241.94	231.05	202.63	193.17	147.49	140.59
61	283.94	269.79	238.33	226.05	173.06	165.26	251.28	238.76	210.92	200.05	153.15	146.28
62	295.55	275.83	245.82	231.42	178.13	168.81	261.55	244.09	217.53	204.80	157.64	149.40
63	297.28	285.96	245.82	241.69	178.13	175.91	263.09	253.95	217.53	213.89	157.64	155.67
64	297.28	297.28	245.82	245.82	178.13	178.13	263.09	263.09	217.53	217.53	157.64	157.64

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 7

	HSA09 0% Prev Ded/Coins $2,500		HSA09 0% Prev Ded/Coins $3,500		HSA09 0% Prev Ded/Coins $5,500		HSA09 0% Prev Ded/Coins $5,000		HSA09 0% Prev Ded/Coins $7,000		HSA09 0% Prev Ded/Coins $11,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	98.81	98.81	83.43	83.43	61.37	61.37	87.45	87.45	79.84	79.84	54.31	54.31
1	83.33	83.33	69.67	69.67	50.56	50.56	73.75	73.75	81.66	61.66	44.74	44.74
2	73.32	73.32	60.63	60.63	44.01	44.01	64.89	64.89	53.66	53.66	38.95	38.95
3	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
4	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
5	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
6	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
7	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
8	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
9	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
10	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
11	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
12	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
13	67.16	67.16	55.53	55.53	40.24	40.24	59.43	59.43	49.14	49.14	35.61	35.61
14	67.16	67.74	55.53	56.01	40.24	40.59	59.43	59.95	49.14	49.56	35.61	35.92
15	67.16	73.79	55.53	61.11	40.24	44.35	59.43	65.30	49.14	54.08	35.61	39.25
16	67.16	74.37	55.53	61.59	40.24	44.70	59.43	65.82	49.14	54.50	35.61	39.56
17	67.16	74.37	55.53	61.59	40.24	44.70	59.43	65.82	49.14	54.50	35.61	39.56
18	67.16	77.93	55.53	64.58	40.24	46.85	59.43	69.01	49.14	57.15	35.61	41.47
19	67.16	81.13	55.53	67.17	40.24	48.75	59.43	71.79	49.14	59.44	35.61	43.14
20	67.16	82.63	55.53	68.43	40.24	49.65	59.43	73.13	49.14	60.55	35.61	43.94
21	67.16	82.87	55.53	68.71	40.24	49.93	59.43	73.33	49.14	60.81	35.61	44.19
22	67.16	82.87	55.53	68.71	40.24	49.93	59.43	73.33	49.14	60.81	35.61	44.19
23	67.16	83.57	55.53	69.29	40.24	50.28	59.43	73.96	49.14	61.32	35.61	44.50
24	67.16	85.31	55.53	70.73	40.24	51.40	59.43	75.50	49.14	62.60	35.61	45.48
25	67.16	86.95	55.53	72.08	40.24	52.37	59.43	76.94	49.14	63.79	35.61	46.35
26	67.16	88.80	55.53	73.62	40.24	53.70	59.43	78.59	49.14	65.15	35.61	47.52
27	67.16	91.14	55.53	75.64	40.37	55.09	59.43	80.65	49.14	66.94	35.74	48.76
28	68.32	94.85	56.69	78.72	41.22	57.40	60.46	83.94	50.16	69.67	36.47	50.79
29	69.37	99.98	57.55	83.05	41.84	60.46	61.39	88.48	50.93	73.50	37.03	53.51
30	70.30	105.33	58.31	87.48	42.40	63.81	62.22	93.22	51.61	77.41	37.53	56.47
31	71.93	111.50	59.86	92.58	43.58	67.44	63.65	98.68	52.97	81.93	38.57	59.68
32	73.44	115.57	61.01	95.94	44.49	69.88	64.99	102.28	53.99	84.91	39.38	61.84
33	76.59	120.93	63.52	100.28	46.37	73.09	67.77	107.02	56.21	88.74	41.04	64.68
34	78.73	125.11	66.11	103.74	48.26	75.53	70.56	110.73	58.51	91.81	42.71	66.83
35	81.01	126.98	67.37	105.38	49.16	76.71	71.69	112.37	59.61	93.26	43.51	67.89
36	83.92	128.37	69.77	106.54	50.91	77.61	74.27	113.61	61.75	94.28	45.05	68.69
37	87.75	131.17	73.04	108.94	53.14	78.36	77.66	116.08	64.65	96.41	47.03	70.23
38	93.58	134.66	77.85	111.83	56.63	81.45	82.81	119.17	68.90	98.96	50.11	72.08
39	101.95	142.12	84.68	117.99	61.58	85.92	90.22	125.76	74.95	104.42	54.49	76.03
40	103.70	146.42	86.13	121.83	62.62	88.77	91.77	129.57	76.23	107.82	55.41	78.56
41	109.29	149.21	90.75	123.85	65.97	90.24	96.72	132.05	80.31	109.61	58.38	79.86
42	112.43	153.40	93.44	127.42	67.99	92.89	99.50	135.76	82.70	112.76	60.18	82.21
43	115.22	159.22	95.75	132.23	69.73	96.38	101.97	140.90	84.74	117.02	61.71	85.29
44	119.06	163.06	98.93	135.40	72.04	98.68	105.37	144.30	87.55	119.83	63.75	87.33
45	122.44	164.92	101.72	137.04	74.06	99.94	108.35	145.95	90.02	121.28	65.54	88.44
46	128.61	169.46	106.92	140.89	77.83	102.65	113.81	149.97	94.62	124.68	68.87	90.84
47	133.15	172.38	110.67	143.30	80.55	104.18	117.83	152.54	97.94	126.81	71.28	92.20
48	141.41	174.12	117.60	144.74	85.57	105.23	125.15	154.09	104.07	128.09	75.73	93.12
49	150.72	179.01	125.59	148.88	91.35	108.23	133.99	158.42	111.14	131.76	80.83	95.78
50	158.99	183.69	132.43	153.01	96.66	111.30	140.70	162.74	117.18	135.41	85.54	98.50
51	168.76	190.64	140.51	158.60	102.17	115.28	149.35	168.71	124.34	140.35	90.41	102.02
52	177.96	197.16	148.20	164.27	107.67	119.39	157.48	174.48	131.16	145.38	95.29	105.66
53	186.45	202.64	155.23	168.90	112.84	122.81	165.01	179.32	137.38	149.47	99.86	108.63
54	198.21	211.48	165.72	176.21	121.48	128.46	175.41	187.15	146.65	155.94	107.51	113.68
55	208.38	221.72	175.25	185.73	127.69	135.57	185.30	196.21	155.09	164.37	113.00	119.97
56	218.23	228.12	182.85	191.80	133.20	139.75	193.13	201.88	161.62	169.73	117.88	123.68
57	228.59	234.17	191.42	195.03	139.06	142.96	202.29	207.24	169.40	173.48	123.06	126.52
58	242.21	238.48	203.83	199.40	148.33	145.19	214.34	211.04	180.38	176.47	131.27	128.49
59	253.26	244.88	213.36	204.60	155.31	148.96	224.12	216.71	188.81	181.06	137.44	131.82
60	274.21	261.88	229.72	218.94	167.16	159.35	242.67	231.75	203.29	193.75	147.94	141.02
61	284.83	270.60	239.05	226.73	173.58	165.76	252.04	239.48	211.56	200.65	153.61	146.70
62	296.44	276.66	246.56	232.12	178.67	169.92	262.34	244.83	218.19	205.42	158.12	149.85
63	298.18	287.83	246.56	242.42	178.67	176.43	263.88	254.72	218.19	214.53	158.12	156.14
64	298.18	298.18	246.56	246.56	178.67	178.67	263.88	263.88	218.19	218.19	158.12	158.12

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA - Area 6

	HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%		HSA09 0%	
	Prev Ded/Coins		Prev Ded/Coins		Prev Ded/Coins		Prev Ded/Coins		Prev Ded/Coins		Prev Ded/Coins	
	$2,500		$3,500		$5,500		$5,000		$7,000		$11,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	97.31	97.31	82.16	82.16	60.43	60.43	86.11	86.11	72.71	72.71	53.48	53.48
1	82.07	82.07	68.61	68.61	49.79	49.79	72.62	72.62	60.72	60.72	44.06	44.06
2	72.20	72.20	59.71	59.71	43.34	43.34	63.90	63.90	52.84	52.84	38.35	38.35
3	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
4	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
5	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
6	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
7	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
8	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
9	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
10	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
11	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
12	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
13	66.14	66.14	54.68	54.68	39.62	39.62	58.53	58.53	48.39	48.39	35.06	35.06
14	66.14	66.70	54.68	55.16	39.62	39.97	58.53	59.04	48.39	48.81	35.06	35.37
15	66.14	72.67	54.68	60.18	39.62	43.67	58.53	64.31	48.39	53.25	35.06	38.65
16	66.14	73.24	54.68	60.65	39.62	44.02	58.53	64.82	48.39	53.67	35.06	38.96
17	66.14	73.24	54.68	60.65	39.62	44.02	58.53	64.82	48.39	53.67	35.06	38.96
18	66.14	76.79	54.68	63.59	39.62	46.15	58.53	67.96	48.39	56.27	35.06	40.84
19	66.14	79.89	54.68	66.15	39.62	48.01	58.53	70.70	48.39	58.54	35.06	42.48
20	66.14	81.97	54.68	67.88	39.62	48.69	58.53	72.01	48.39	59.63	35.06	43.27
21	66.14	81.61	54.68	67.67	39.62	49.17	58.53	72.22	48.39	59.88	35.06	43.51
22	66.14	81.61	54.68	67.67	39.62	49.17	58.53	72.22	48.39	59.88	35.06	43.51
23	66.14	82.29	54.68	68.23	39.62	49.51	58.53	72.83	48.39	60.38	35.06	43.82
24	66.14	84.01	54.68	69.65	39.62	50.61	58.53	74.35	48.39	61.64	35.06	44.79
25	66.14	85.62	54.68	70.98	39.62	51.58	58.53	75.77	48.39	62.82	35.06	45.65
26	66.14	87.45	54.68	72.50	39.62	52.88	58.53	77.39	48.39	64.16	35.06	46.80
27	66.14	89.74	54.68	74.49	39.76	54.26	58.53	79.42	48.39	65.92	35.19	48.01
28	67.28	93.41	55.82	77.52	40.59	56.52	59.54	82.66	49.40	68.61	35.92	50.02
29	68.31	98.45	56.67	81.79	41.20	59.54	60.45	87.13	50.15	72.38	36.46	52.69
30	69.23	103.72	57.43	86.14	41.75	62.84	61.27	91.79	50.83	76.23	36.95	55.61
31	70.83	109.80	58.94	91.16	42.92	66.41	62.68	97.17	52.17	80.68	37.88	58.77
32	72.32	113.81	60.09	94.48	43.81	68.81	64.00	100.72	53.17	83.62	38.77	60.89
33	75.42	119.08	62.55	98.75	45.67	71.97	66.74	105.39	55.35	87.39	40.41	63.69
34	78.51	123.21	65.10	102.16	47.52	74.38	69.48	109.04	57.62	90.41	42.06	65.81
35	79.77	125.05	66.34	103.77	48.41	75.54	70.60	110.65	58.70	91.83	42.85	66.85
36	82.64	126.42	68.71	104.91	50.14	76.43	73.13	111.87	60.80	92.84	44.37	67.64
37	85.42	129.17	71.93	107.28	52.33	78.15	76.48	114.31	63.66	94.94	46.31	69.16
38	92.15	132.60	76.67	110.12	55.76	80.21	81.55	117.36	67.85	97.45	49.35	70.99
39	100.40	139.94	83.59	116.19	60.64	84.66	88.85	123.84	73.81	102.82	53.66	74.87
40	102.13	144.18	84.82	119.97	61.67	87.42	90.37	127.60	75.06	106.18	54.57	77.37
41	107.62	146.93	89.37	121.97	64.97	88.87	95.24	130.03	79.09	107.94	57.49	78.64
42	110.72	151.06	92.02	125.48	66.96	91.47	97.98	133.69	81.43	111.04	59.25	80.95
43	113.47	156.79	94.30	130.21	68.67	94.91	100.41	138.75	83.45	115.23	60.77	83.99
44	117.25	160.58	97.42	133.34	70.94	97.18	103.76	142.10	86.22	118.00	62.78	86.00
45	120.58	162.41	100.17	134.95	72.93	98.41	106.70	143.73	88.65	119.43	64.54	87.09
46	126.65	166.83	105.29	138.74	76.64	101.08	112.08	147.69	93.18	122.78	67.83	89.46
47	131.12	169.75	108.98	141.11	79.31	102.60	116.04	150.22	96.45	124.88	70.19	90.80
48	139.26	171.46	115.81	142.53	84.27	103.63	123.24	151.74	102.49	126.13	74.57	91.71
49	148.42	176.28	123.68	146.61	89.96	106.58	131.35	156.00	109.44	129.74	79.62	94.32
50	156.57	181.09	130.40	150.68	95.19	109.60	138.55	160.26	115.40	133.35	84.24	97.00
51	166.19	187.74	138.56	156.18	100.61	113.52	147.07	166.14	122.44	138.21	89.04	100.46
52	175.25	194.16	145.94	161.77	106.03	117.57	155.08	171.82	129.16	143.16	93.83	104.05
53	183.61	199.55	152.86	166.32	111.11	120.94	162.49	176.59	135.28	147.19	98.33	107.02
54	195.19	208.25	163.19	173.52	119.63	126.50	172.73	184.30	144.42	153.56	105.87	111.95
55	206.19	218.34	172.58	182.90	125.74	133.50	182.47	193.22	152.73	161.87	111.28	118.15
56	214.90	224.64	180.06	188.88	131.17	137.62	190.18	198.80	159.35	167.15	116.08	121.79
57	225.10	230.60	188.50	193.84	136.94	140.78	199.21	204.09	166.81	170.83	121.18	124.59
58	238.51	234.84	200.72	196.98	146.07	142.98	211.08	207.83	177.63	173.77	129.26	126.53
59	249.40	241.15	210.11	201.48	152.93	146.69	220.71	213.41	185.94	178.31	135.35	129.82
60	270.03	257.68	226.21	215.60	164.61	156.92	238.97	228.21	200.19	190.80	145.68	138.87
61	280.46	266.48	235.41	223.28	170.93	163.14	248.20	235.82	208.33	197.59	151.27	144.46
62	291.92	272.44	242.80	228.58	175.95	166.74	258.34	241.10	214.87	202.29	155.71	147.56
63	293.64	283.45	242.80	238.72	175.95	173.75	259.86	250.84	214.87	211.27	155.71	153.76
64	293.64	293.64	242.80	242.80	175.95	175.95	259.86	259.86	214.87	214.87	155.71	155.71

Rates shown are based on our Preferred risk tier - .573

	Lumenos HSA - Area 1				Lumenos HSA Select - Area 1							
	HSA09 50%		HSA09 50%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$1,500		$3,000		$2,250		$4,500		$4,000		$8,000	
Age	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female
0	117.76	117.76	104.22	104.22	93.47	93.47	82.73	82.73	83.28	83.28	73.71	73.71
1	95.54	95.54	84.55	84.55	78.88	78.88	69.82	69.82	69.40	69.40	61.43	61.43
2	73.67	73.67	65.20	65.20	69.60	69.60	61.60	61.60	60.83	60.83	53.83	53.83
3	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
4	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
5	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
6	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
7	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
8	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
9	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
10	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
11	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
12	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
13	67.47	67.47	59.71	59.71	63.75	63.75	56.42	56.42	55.62	55.62	49.23	49.23
14	67.47	67.47	59.71	59.71	63.75	64.30	56.42	56.91	55.62	56.10	49.23	49.65
15	67.47	73.67	59.71	65.20	63.75	70.04	56.42	62.00	55.62	61.21	49.23	54.18
16	67.47	74.96	59.71	66.34	63.75	70.60	56.42	62.48	55.62	61.69	49.23	54.60
17	67.47	74.96	59.71	66.34	63.75	70.60	56.42	62.48	55.62	61.69	49.23	54.60
18	67.47	79.75	59.71	70.58	63.75	74.02	56.42	65.51	55.62	64.68	49.23	57.24
19	67.47	82.91	59.71	73.37	63.75	77.01	56.42	68.15	55.62	67.28	49.23	59.55
20	67.47	84.55	59.71	74.82	63.75	78.44	56.42	69.43	55.62	68.54	49.23	60.65
21	67.47	87.12	59.71	77.10	63.75	78.66	56.42	69.62	55.62	68.82	49.23	60.92
22	67.47	87.12	59.71	77.10	63.75	78.66	56.42	69.62	55.62	68.82	49.23	60.92
23	67.47	87.70	59.71	77.62	63.75	79.33	56.42	70.20	55.62	69.40	49.23	61.43
24	67.47	89.22	59.71	78.96	63.75	80.93	56.42	71.68	55.62	70.95	49.23	62.79
25	67.47	90.63	59.71	80.21	63.75	82.42	56.42	72.94	55.62	72.20	49.23	63.90
26	67.47	92.38	59.71	81.76	63.75	84.19	56.42	74.51	55.62	73.84	49.23	65.35
27	67.47	94.49	59.71	83.62	63.75	86.40	56.42	76.47	55.62	75.87	49.23	67.14
28	67.47	97.88	59.71	86.62	64.85	89.93	57.40	79.60	56.77	79.05	50.25	69.96
29	67.47	102.67	59.71	90.87	65.85	94.79	58.28	83.90	57.64	83.19	51.02	73.62
30	67.47	105.24	59.71	93.15	66.73	99.88	59.06	88.40	58.41	87.81	51.70	77.72
31	68.30	110.86	60.44	98.11	68.17	105.73	60.34	93.58	59.85	92.83	52.98	82.16
32	69.81	114.61	61.78	101.42	69.60	109.60	61.60	97.00	61.01	96.20	54.00	85.14
33	72.50	119.63	64.16	105.87	72.59	114.68	64.24	101.50	63.71	100.54	56.39	88.98
34	75.31	123.37	66.65	109.19	75.57	118.66	66.88	105.02	66.31	104.01	58.69	92.05
35	76.48	125.01	67.68	110.63	76.78	120.43	67.96	106.58	67.47	105.65	59.72	93.50
36	79.05	126.18	69.96	111.67	79.55	121.75	70.40	107.76	69.88	106.81	61.85	94.53
37	82.68	128.75	73.17	113.94	83.19	124.51	73.63	110.21	72.97	109.21	64.58	96.65
38	88.05	132.02	77.93	116.85	88.72	127.82	78.52	113.13	77.79	112.11	68.85	99.22
39	95.66	138.57	84.66	122.64	96.67	134.90	85.56	119.40	84.73	118.27	74.99	104.68
40	98.81	146.06	87.45	129.26	98.33	138.87	87.03	122.91	86.17	121.94	76.27	107.92
41	103.96	148.98	92.01	131.85	103.63	141.64	91.72	125.36	90.80	124.16	80.36	109.88
42	106.88	152.61	94.60	135.06	106.61	145.50	94.36	128.78	93.50	127.72	82.75	113.04
43	109.45	157.75	96.87	139.61	109.27	151.03	96.71	133.67	95.82	132.54	84.80	117.80
44	113.08	161.26	100.08	142.71	113.02	154.68	100.03	136.90	99.09	135.72	87.70	120.12
45	116.12	162.43	102.77	143.75	116.11	156.66	102.77	138.65	101.89	137.46	90.18	121.65
46	121.50	166.17	107.53	147.07	121.97	160.85	107.95	142.37	107.09	141.22	94.78	124.98
47	125.71	168.27	111.25	148.92	126.28	163.63	111.76	144.82	110.76	143.53	98.02	127.03
48	132.96	169.92	117.67	150.37	134.24	165.28	118.81	146.29	117.79	144.97	104.25	128.31
49	140.68	174.24	124.50	154.20	142.96	170.03	126.54	150.49	125.50	149.12	111.08	131.98
50	158.69	180.44	140.44	159.69	150.81	174.67	133.47	154.60	132.64	153.26	117.39	135.65
51	166.87	186.17	147.69	164.75	160.20	181.19	141.79	160.37	140.64	158.76	124.47	140.51
52	175.18	191.43	155.03	169.42	168.93	187.38	149.51	165.84	148.34	164.45	131.29	145.54
53	182.66	195.75	161.66	173.25	177.22	192.57	156.85	170.44	155.39	169.17	137.53	149.72
54	191.78	203.01	169.73	179.66	188.15	201.08	166.53	177.96	166.47	176.88	147.33	156.55
55	201.37	211.93	178.21	187.53	198.87	210.58	176.01	186.36	175.24	185.66	155.10	164.31
56	208.39	216.57	184.42	191.67	207.26	216.55	183.44	191.66	182.78	190.96	161.75	169.00
57	217.04	221.83	192.08	196.32	217.21	222.62	192.24	197.03	191.34	196.16	169.34	173.61
58	227.80	225.70	201.60	199.76	230.02	226.71	203.59	200.65	202.81	199.54	179.49	176.59
59	236.69	230.72	209.47	204.19	240.52	232.79	212.88	206.03	212.26	204.84	187.85	181.29
60	255.86	246.39	226.44	218.06	260.85	249.03	230.87	220.40	229.80	219.20	203.47	194.00
61	263.59	252.48	233.27	223.44	271.01	257.65	239.86	228.03	238.96	227.30	211.49	201.16
62	271.89	257.27	240.62	227.68	281.95	263.28	249.54	233.02	246.96	232.31	218.57	205.60
63	279.60	265.22	247.46	234.72	283.06	273.66	250.52	242.21	246.96	241.94	218.57	214.14
64	286.97	276.79	253.97	244.96	283.06	283.06	250.52	250.52	246.96	246.96	218.57	218.57

Rates shown are based on our Preferred risk tier - .573

	Lumenos HSA - Area 2				Lumenos HSA Select - Area 2							
	HSA09 50%		HSA09 50%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$1,500		$3,000		$2,250		$4,500		$4,000		$8,000	
Age	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female
0	105.35	105.35	93.23	93.23	83.61	83.61	74.00	74.00	74.50	74.50	65.94	65.94
1	85.47	85.47	75.64	75.64	70.57	70.57	62.46	62.46	62.08	62.08	54.95	54.95
2	65.91	65.91	58.33	58.33	62.26	62.26	55.11	55.11	54.41	54.41	48.15	48.15
3	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
4	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
5	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
6	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
7	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
8	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
9	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
10	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
11	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
12	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
13	60.36	60.36	53.42	53.42	57.02	57.02	50.48	50.48	49.75	49.75	44.04	44.04
14	60.36	60.36	53.42	53.42	57.02	57.52	50.48	50.91	49.75	50.19	44.04	44.41
15	60.36	65.91	53.42	58.33	57.02	62.66	50.48	55.46	49.75	54.76	44.04	48.46
16	60.36	67.06	53.42	59.35	57.02	63.16	50.48	55.90	49.75	55.19	44.04	48.84
17	60.36	67.06	53.42	59.35	57.02	63.16	50.48	55.90	49.75	55.19	44.04	48.84
18	60.36	71.34	53.42	63.14	57.02	66.22	50.48	58.61	49.75	57.86	44.04	51.21
19	60.36	74.17	53.42	65.64	57.02	68.89	50.48	60.97	49.75	60.19	44.04	53.27
20	60.36	75.63	53.42	66.94	57.02	70.18	50.48	62.11	49.75	61.31	44.04	54.26
21	60.36	77.93	53.42	68.97	57.02	70.37	50.48	62.28	49.75	61.57	44.04	54.49
22	60.36	77.93	53.42	68.97	57.02	70.37	50.48	62.28	49.75	61.57	44.04	54.49
23	60.36	78.46	53.42	69.44	57.02	70.97	50.48	62.81	49.75	62.08	44.04	54.95
24	60.36	79.82	53.42	70.64	57.02	72.44	50.48	64.12	49.75	63.47	44.04	56.17
25	60.36	81.07	53.42	71.75	57.02	73.73	50.48	65.25	49.75	64.59	44.04	57.16
26	60.36	82.64	53.42	73.14	57.02	75.32	50.48	66.66	49.75	66.00	44.04	58.46
27	60.36	84.53	53.42	74.81	57.02	77.29	50.48	68.40	49.75	67.87	44.04	60.06
28	60.36	87.56	53.42	77.49	58.02	80.45	51.33	71.21	50.79	70.71	44.95	62.58
29	60.36	91.85	53.42	81.29	58.90	84.80	52.14	75.05	51.56	74.42	45.64	65.85
30	60.86	94.15	53.42	83.33	59.70	89.35	52.83	79.08	52.25	78.55	46.25	69.52
31	61.09	99.17	54.07	87.77	60.98	94.59	53.98	83.72	53.55	83.04	47.39	73.49
32	62.45	102.52	55.27	90.73	62.26	98.05	55.11	86.78	54.58	86.06	48.31	76.16
33	64.86	107.02	57.40	94.71	64.94	102.59	57.47	90.80	57.00	89.94	50.45	79.60
34	67.37	110.37	59.63	97.67	67.60	108.15	59.83	93.95	59.32	93.04	52.50	82.35
35	68.42	111.83	60.55	98.97	68.69	107.73	60.80	95.35	60.36	94.51	53.42	83.64
36	70.71	112.88	62.59	99.89	71.16	108.92	62.98	96.40	62.51	95.55	55.33	84.56
37	73.96	115.17	65.45	101.93	74.42	111.39	65.87	98.58	65.28	97.70	57.77	86.47
38	78.77	118.11	69.71	104.53	79.37	114.35	70.24	101.21	69.59	100.29	61.59	88.76
39	85.57	123.97	75.73	109.71	86.48	120.67	76.54	106.81	75.80	105.80	67.09	93.64
40	88.40	130.66	78.23	115.63	87.96	124.23	77.85	109.95	77.09	109.09	68.23	96.54
41	93.00	133.27	82.31	117.95	92.71	126.71	82.05	112.14	81.23	111.06	71.89	98.30
42	95.61	138.52	84.62	120.82	95.37	130.16	84.41	115.20	83.64	114.26	74.03	101.12
43	97.92	141.12	86.65	124.89	97.75	135.11	86.52	119.58	85.72	118.57	75.86	104.94
44	101.16	144.26	89.53	127.67	101.11	138.37	89.49	122.46	88.65	121.41	78.46	107.45
45	103.88	145.91	91.93	128.60	103.87	140.15	91.94	124.04	91.15	122.97	80.67	108.83
46	108.69	148.65	96.19	131.56	109.11	143.90	96.57	127.36	95.80	126.33	84.79	111.81
47	112.46	150.53	99.52	133.22	112.97	146.37	99.98	129.55	99.08	128.40	87.69	113.64
48	118.94	152.01	105.27	134.52	120.08	147.86	106.28	130.85	105.37	129.69	93.26	114.78
49	125.85	155.87	111.37	137.94	127.89	152.11	113.20	134.62	112.27	133.40	99.36	118.07
50	141.96	161.42	125.63	142.85	134.91	156.26	119.40	138.30	118.66	137.11	105.01	121.34
51	149.28	166.54	132.12	147.38	143.31	162.09	126.84	143.46	125.81	142.02	111.35	125.69
52	156.71	171.25	138.69	151.56	151.12	167.63	133.75	148.36	132.71	147.11	117.45	130.20
53	163.40	175.12	144.61	154.98	158.53	172.27	140.31	152.47	139.00	151.34	123.02	133.94
54	171.56	181.61	151.83	160.72	168.31	179.88	148.97	159.20	148.92	158.23	131.80	140.05
55	180.14	189.55	159.43	167.78	177.90	188.38	157.45	166.73	156.77	166.08	138.76	146.99
56	186.42	193.74	164.98	171.45	185.41	193.72	164.10	171.45	163.49	170.83	144.70	151.19
57	194.16	198.45	171.83	175.62	194.31	199.15	171.97	176.26	171.17	175.48	151.49	155.31
58	203.78	201.00	180.35	178.68	205.77	202.81	182.12	179.50	181.43	178.50	160.57	157.98
59	211.73	208.40	187.38	182.65	215.16	208.25	190.44	184.31	189.88	183.24	168.06	162.18
60	228.88	220.42	202.57	195.07	233.35	222.78	206.53	197.17	205.66	196.09	182.01	173.55
61	235.80	225.86	208.68	199.88	242.44	230.48	214.57	203.99	213.77	203.33	189.19	179.96
62	243.22	230.15	215.25	203.68	252.22	235.53	223.24	208.45	220.93	207.82	195.53	183.93
63	250.13	237.26	221.37	209.98	253.21	244.81	224.11	216.67	220.93	216.44	195.53	191.56
64	256.72	247.62	227.19	219.14	253.21	253.21	224.11	224.11	220.93	220.93	195.53	195.53

Rates shown are based on our Preferred risk tier - .573

	Lumenos HSA - Area 3				Lumenos HSA Select - Area 3							
	HSA09 50%		HSA09 50%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$1,500		$3,000		$2,250		$4,500		$4,000		$8,000	
Age	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female
0	108.49	108.49	96.01	96.01	86.11	86.11	76.21	76.21	76.72	76.72	67.91	67.91
1	88.02	88.02	77.89	77.89	72.68	72.68	64.32	64.32	63.94	63.94	56.59	56.59
2	67.87	67.87	60.07	60.07	64.12	64.12	56.76	56.76	56.04	56.04	49.59	49.59
3	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
4	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
5	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
6	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
7	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
8	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
9	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
10	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
11	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
12	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
13	62.16	62.16	55.01	55.01	58.73	58.73	51.98	51.98	51.24	51.24	45.35	45.35
14	62.16	62.16	55.01	55.01	58.73	59.24	51.98	52.43	51.24	51.68	45.35	45.74
15	62.16	67.87	55.01	60.07	58.73	64.53	51.98	57.12	51.24	56.39	45.35	49.91
16	62.16	69.06	55.01	61.12	58.73	65.04	51.98	57.56	51.24	56.84	45.35	50.30
17	62.16	69.06	55.01	61.12	58.73	65.04	51.98	57.56	51.24	56.84	45.35	50.30
18	62.16	73.48	55.01	65.02	58.73	68.19	51.98	60.35	51.24	59.59	45.35	52.74
19	62.16	76.38	55.01	67.60	58.73	70.94	51.98	62.79	51.24	61.98	45.35	54.86
20	62.16	77.89	55.01	68.93	58.73	72.27	51.98	63.96	51.24	63.14	45.35	55.88
21	62.16	80.26	55.01	71.03	58.73	72.47	51.98	64.14	51.24	63.41	45.35	56.12
22	62.16	80.26	55.01	71.03	58.73	72.47	51.98	64.14	51.24	63.41	45.35	56.12
23	62.16	80.80	55.01	71.50	58.73	73.09	51.98	64.68	51.24	63.94	45.35	56.59
24	62.16	82.20	55.01	72.75	58.73	74.61	51.98	66.03	51.24	65.36	45.35	57.84
25	62.16	83.50	55.01	73.89	58.73	75.93	51.98	67.20	51.24	66.51	45.35	58.86
26	62.16	85.11	55.01	75.32	58.73	77.56	51.98	68.65	51.24	68.03	45.35	60.21
27	62.16	87.05	55.01	77.04	58.73	79.60	51.98	70.44	51.24	69.89	45.35	61.85
28	62.16	90.17	55.01	79.80	59.75	82.88	52.88	73.33	52.50	72.82	46.29	64.45
29	62.16	94.59	55.01	83.72	60.66	87.33	53.70	77.29	53.11	76.64	47.00	67.83
30	62.16	96.96	55.01	85.81	61.48	92.02	54.41	81.44	53.82	80.90	47.63	71.60
31	62.92	102.13	55.68	90.39	62.81	97.40	55.59	86.21	55.15	85.52	48.81	75.69
32	64.32	105.58	56.92	93.44	64.12	100.97	56.76	89.37	56.21	88.63	49.75	78.44
33	66.79	110.22	59.11	97.54	66.87	105.65	59.19	93.51	58.70	92.63	51.95	81.93
34	69.38	113.66	61.40	100.59	69.62	109.32	61.61	96.75	61.09	95.82	54.07	84.80
35	70.46	115.17	62.36	101.93	70.74	110.95	62.61	98.19	62.16	97.33	55.02	86.14
36	72.83	116.24	64.46	102.88	73.29	112.17	64.86	99.27	64.38	98.40	56.98	87.08
37	76.17	118.61	67.41	104.97	76.64	114.71	67.83	101.53	67.22	100.62	59.49	89.04
38	81.12	121.63	71.80	107.64	81.74	117.76	72.34	104.23	71.67	103.28	63.43	91.41
39	88.13	127.66	77.99	112.98	89.06	124.28	78.82	110.00	78.06	108.96	69.09	96.44
40	91.04	134.56	80.56	119.08	90.59	127.94	80.17	113.24	79.39	112.34	70.26	99.42
41	95.78	137.25	84.76	121.47	95.47	133.49	84.50	115.49	83.66	114.38	74.04	101.23
42	98.46	140.60	87.15	124.43	98.22	134.05	86.93	118.64	86.14	117.67	76.24	104.14
43	100.84	145.33	89.24	128.62	100.67	139.14	89.10	123.15	88.27	122.11	78.12	108.07
44	104.18	148.57	92.20	131.48	104.13	142.50	92.16	126.12	91.30	125.03	80.79	110.66
45	106.98	149.64	94.68	132.44	106.97	144.33	94.68	127.74	93.87	126.63	83.08	112.08
46	111.94	153.09	99.06	135.49	112.37	148.20	99.45	131.17	98.68	130.10	87.32	115.14
47	115.81	155.03	102.50	137.20	116.34	150.74	102.97	133.42	102.04	132.23	90.80	117.03
48	122.50	156.54	108.41	138.53	123.67	152.27	109.45	134.77	108.51	133.56	96.04	118.20
49	129.61	160.53	114.70	142.06	131.71	156.65	116.57	138.64	115.63	137.38	102.33	121.59
50	146.20	166.23	129.38	147.12	138.84	160.92	122.97	142.42	122.20	141.20	108.15	124.97
51	153.74	171.51	136.06	151.79	147.59	166.93	130.63	147.74	129.57	146.26	114.67	129.45
52	161.39	176.36	142.83	156.08	155.63	172.63	137.74	152.78	136.67	151.50	120.96	134.08
53	168.28	180.35	148.93	159.61	163.26	177.41	144.50	157.02	143.15	155.85	126.70	137.93
54	176.68	187.03	156.37	165.52	173.34	185.25	153.42	163.95	153.36	162.96	135.73	144.22
55	185.51	195.21	164.18	172.77	183.21	194.00	162.15	171.71	161.45	171.04	142.89	151.38
56	191.93	199.52	169.91	176.58	190.95	199.50	169.00	176.56	168.38	175.92	149.02	155.70
57	199.95	204.37	176.97	180.87	200.11	205.09	177.11	181.52	176.28	180.72	156.01	159.84
58	209.87	207.93	185.78	184.01	211.91	208.86	187.56	184.86	186.85	183.82	165.36	162.69
59	218.06	212.56	192.97	188.12	221.58	214.46	196.12	189.81	195.55	188.71	173.07	167.01
60	235.72	226.99	208.62	200.89	240.31	229.42	212.69	203.05	211.80	201.94	187.45	178.73
61	242.83	232.60	214.90	205.85	249.68	237.37	220.98	210.08	220.15	209.40	194.84	185.33
62	250.48	237.02	221.68	209.76	259.75	242.55	229.90	214.67	227.52	214.02	201.36	189.42
63	257.59	244.34	227.97	216.24	260.77	252.12	230.80	223.14	227.52	222.90	201.36	197.28
64	264.38	255.01	233.97	225.68	260.77	260.77	230.80	230.80	227.52	227.52	201.36	201.36

Rates shown are based on our Preferred risk tier - .673

	Lumenos HSA - Area 4				Lumenos HSA Select - Area 4							
	HSA09 50%		HSA09 50%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$1,500		$3,000		$1,250		$4,500		$4,000		$8,000	
Age	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female
0	106.96	106.96	94.66	94.66	84.90	84.90	75.14	75.14	75.64	75.64	66.95	66.95
1	86.78	86.78	76.80	76.80	71.65	71.65	63.42	63.42	63.84	63.84	55.79	55.79
2	66.91	66.91	59.23	59.23	63.22	63.22	55.95	55.95	55.25	55.25	48.89	48.89
3	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
4	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
5	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
6	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
7	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
8	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
9	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
10	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
11	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
12	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
13	61.29	61.29	54.23	54.23	57.90	57.90	51.25	51.25	50.52	50.52	44.71	44.71
14	61.29	61.29	54.23	54.23	57.90	58.41	51.25	51.70	50.52	50.98	44.71	45.10
15	61.29	68.91	54.23	59.23	57.90	63.62	51.25	56.31	50.52	55.59	44.71	49.20
16	61.29	68.08	54.23	60.26	57.90	64.12	51.25	56.75	50.52	56.03	44.71	49.59
17	61.29	68.08	54.23	60.26	57.90	64.12	51.25	56.75	50.52	56.03	44.71	49.59
18	61.29	72.44	54.23	64.11	57.90	67.23	51.25	59.51	50.52	58.75	44.71	51.99
19	61.29	75.30	54.23	66.65	57.90	69.95	51.25	61.90	50.52	61.11	44.71	54.09
20	61.29	76.79	54.23	67.96	57.90	71.25	51.25	63.06	50.52	62.25	44.71	55.09
21	61.29	79.13	54.23	70.03	57.90	71.45	51.25	63.24	50.52	62.51	44.71	55.33
22	61.29	79.13	54.23	70.03	57.90	71.45	51.25	63.24	50.52	62.51	44.71	55.33
23	61.29	79.66	54.23	70.50	57.90	72.05	51.25	63.77	50.52	63.04	44.71	55.79
24	61.29	81.04	54.23	71.72	57.90	73.56	51.25	65.10	50.52	64.44	44.71	57.03
25	61.29	82.32	54.23	72.85	57.90	74.86	51.25	66.26	50.52	65.57	44.71	58.03
26	61.29	83.91	54.23	74.26	57.90	76.47	51.25	67.69	50.52	67.07	44.71	59.36
27	61.29	85.82	54.23	75.96	57.90	78.48	51.25	69.45	50.52	68.90	44.71	60.98
28	61.29	88.91	54.23	78.68	58.90	81.69	52.13	72.30	51.57	71.80	45.64	63.54
29	61.29	93.26	54.23	82.53	59.81	85.10	52.94	76.20	52.36	75.56	46.34	66.87
30	61.29	95.59	54.23	84.60	60.61	90.72	53.64	80.29	53.05	79.76	46.96	70.59
31	62.03	100.69	54.90	89.11	61.92	96.03	54.80	85.00	54.37	84.32	48.12	74.62
32	63.41	104.09	56.12	92.12	63.22	99.55	55.95	88.11	55.42	87.38	49.05	77.33
33	65.85	108.66	58.28	96.16	65.94	104.16	58.35	92.19	57.87	91.32	51.22	80.82
34	68.40	112.06	60.54	99.17	68.64	107.78	60.75	95.39	60.23	94.47	53.31	83.61
35	69.45	113.55	61.48	100.49	69.74	109.39	61.73	96.81	61.29	95.98	54.24	84.92
36	71.80	114.61	63.55	101.43	72.23	110.59	63.95	97.87	63.47	97.01	56.18	85.86
37	75.10	116.94	66.46	103.50	75.57	113.09	65.87	100.10	66.28	99.20	58.66	87.79
38	79.98	119.92	70.78	106.13	80.59	116.11	71.32	102.76	70.66	101.83	62.54	90.12
39	85.88	125.67	76.89	111.39	87.81	122.52	77.71	108.45	76.96	107.43	68.11	95.08
40	89.75	132.66	79.43	117.41	89.31	126.14	79.05	111.64	78.27	110.76	69.28	98.02
41	94.42	135.32	83.57	119.76	94.13	128.65	83.31	113.86	82.48	112.77	72.99	99.81
42	97.08	138.61	85.92	122.67	96.84	132.16	85.70	116.97	84.92	116.01	75.16	102.67
43	99.42	143.28	87.98	126.80	99.25	137.18	87.84	121.41	87.03	120.38	77.02	106.55
44	102.71	146.47	90.90	129.62	102.66	140.49	90.86	124.34	90.01	123.28	79.66	109.10
45	105.47	147.54	93.34	130.57	105.47	142.50	93.35	125.94	92.55	124.85	81.90	110.50
46	110.35	150.93	97.67	133.58	110.78	146.11	98.05	129.31	97.27	128.27	86.09	113.52
47	114.18	152.84	101.05	135.27	114.70	148.62	101.52	131.54	100.60	130.37	89.03	115.38
48	120.77	154.33	106.89	136.59	121.93	150.12	107.91	132.87	106.98	131.68	94.69	116.54
49	127.78	158.26	113.08	140.06	129.85	154.64	114.93	136.69	114.00	135.45	100.89	119.88
50	144.14	163.50	127.56	145.05	136.98	158.65	121.23	140.42	120.47	139.21	106.62	123.21
51	151.57	169.09	134.15	149.65	145.51	164.58	128.78	145.66	127.74	144.20	113.05	127.62
52	159.11	173.88	140.81	153.88	153.44	170.20	135.80	150.63	134.74	149.36	119.25	132.19
53	165.91	177.80	146.83	157.35	160.97	174.91	142.46	154.81	141.14	153.66	124.91	135.99
54	174.19	184.99	154.17	163.18	170.90	182.64	151.25	161.64	151.20	160.66	133.82	142.19
55	182.90	192.46	161.87	170.33	180.63	191.27	159.87	169.29	159.17	168.63	140.88	149.24
56	189.28	196.71	167.51	174.09	188.25	195.69	166.62	174.08	166.00	173.45	146.92	153.50
57	197.13	201.49	174.47	178.32	197.29	202.21	174.61	178.97	173.80	178.17	153.82	157.68
58	206.91	205.00	183.12	181.42	208.93	205.92	184.91	182.25	184.21	181.23	163.04	160.40
59	214.98	209.57	190.26	185.46	218.46	211.44	193.35	187.14	192.80	185.05	170.63	164.66
60	232.40	223.80	205.68	198.06	236.92	226.19	209.70	200.19	208.81	199.10	184.81	176.21
61	239.41	228.32	211.88	202.95	246.16	234.02	217.87	207.12	217.05	206.45	192.09	182.72
62	246.95	233.68	218.55	206.80	256.09	239.14	226.66	211.65	224.31	211.00	198.53	186.75
63	253.96	240.90	224.76	213.20	257.10	248.57	227.55	220.00	224.31	219.76	198.53	194.49
64	260.65	251.42	230.68	222.50	257.10	257.10	227.55	227.55	224.31	224.31	198.53	198.53

Rates shown are based on our Preferred risk tier - .573

	Lumenos HSA - Area 5				Lumenos HSA Select - Area 5							
	HSA09 50%		HSA09 50%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$1,500		$3,000		$2,250		$4,500		$4,000		$8,000	
Age	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female
0	104.60	104.60	92.57	92.57	83.02	83.02	73.48	73.48	73.97	73.97	65.47	65.47
1	84.86	84.86	75.10	75.10	70.07	70.07	62.02	62.02	61.64	61.64	54.56	54.56
2	65.44	65.44	57.91	57.91	61.82	61.82	54.72	54.72	54.03	54.03	47.82	47.82
3	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
4	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
5	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
6	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
7	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
8	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
9	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
10	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
11	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
12	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
13	59.93	59.93	53.04	53.04	56.62	56.62	50.11	50.11	49.40	49.40	43.73	43.73
14	59.93	59.93	53.04	53.04	56.62	57.11	50.11	50.55	49.40	49.83	43.73	44.10
15	59.93	65.44	53.04	57.91	56.62	62.22	50.11	55.07	49.40	54.37	43.73	48.12
16	59.93	66.58	53.04	58.93	56.62	62.71	50.11	55.50	49.40	54.80	43.73	48.49
17	59.93	66.58	53.04	58.93	56.62	62.71	50.11	55.50	49.40	54.80	43.73	48.49
18	59.93	70.84	53.04	62.69	56.62	65.75	50.11	58.19	49.40	57.45	43.73	50.84
19	59.93	73.64	53.04	65.17	56.62	68.40	50.11	60.53	49.40	59.76	43.73	52.89
20	59.93	75.09	53.04	66.46	56.62	69.68	50.11	61.67	49.40	60.88	43.73	53.89
21	59.93	77.38	53.04	68.48	56.62	69.87	50.11	61.84	49.40	61.13	43.73	54.10
22	59.93	77.38	53.04	68.48	56.62	69.87	50.11	61.84	49.40	61.13	43.73	54.10
23	59.93	77.91	53.04	68.94	56.62	70.46	50.11	62.35	49.40	61.64	43.73	54.56
24	59.93	79.25	53.04	70.14	56.62	71.93	50.11	63.66	49.40	63.02	43.73	55.77
25	59.93	80.50	53.04	71.24	56.62	73.21	50.11	64.79	49.40	64.12	43.73	56.76
26	59.93	82.05	53.04	72.62	56.62	74.78	50.11	66.18	49.40	65.59	43.73	58.04
27	59.93	83.93	53.04	74.28	56.62	76.74	50.11	67.92	49.40	67.38	43.73	59.63
28	59.93	86.94	53.04	76.94	57.60	79.88	50.98	70.70	50.43	70.21	44.63	62.14
29	59.93	91.20	53.04	80.71	58.49	84.20	51.76	74.52	51.20	73.89	45.32	65.39
30	59.93	93.48	53.04	82.74	59.27	88.71	52.46	78.52	51.89	78.00	45.92	69.03
31	60.66	98.46	53.68	87.14	60.55	93.91	53.59	83.12	53.17	82.45	47.05	72.97
32	62.01	101.79	54.88	90.09	61.82	97.35	54.72	86.16	54.19	85.45	47.97	75.62
33	64.40	106.26	56.99	94.04	64.47	101.86	57.07	90.15	56.60	89.30	50.09	79.03
34	65.89	109.58	59.20	96.98	67.12	105.40	59.41	93.28	58.90	92.39	52.13	81.76
35	67.93	111.04	60.12	98.26	68.20	106.97	60.37	94.67	59.93	93.84	53.04	83.05
36	70.22	112.07	62.14	99.19	70.66	108.14	62.54	95.71	62.07	94.87	54.93	83.96
37	73.44	114.36	64.99	101.21	73.89	110.58	65.40	97.89	64.81	97.01	57.36	85.85
38	78.21	117.26	69.22	103.78	78.80	113.54	69.75	100.49	69.10	99.58	61.15	88.13
39	84.96	123.09	75.19	108.93	85.87	119.82	76.00	106.05	75.26	105.05	66.61	92.97
40	87.77	129.73	77.68	114.81	87.34	123.35	77.30	109.17	76.54	108.31	67.74	95.86
41	92.34	132.33	81.72	117.11	92.05	125.81	81.47	111.35	80.66	110.28	71.38	97.60
42	94.93	135.55	84.02	119.96	94.69	129.24	83.81	114.39	83.05	113.45	73.50	100.40
43	97.22	140.12	86.04	124.00	97.05	134.15	85.90	118.73	85.11	117.72	75.32	104.19
44	100.44	143.23	88.89	126.76	100.39	137.89	88.86	121.60	88.02	120.55	77.90	106.69
45	103.14	144.28	91.28	127.69	103.13	139.15	91.28	123.16	90.50	122.09	80.10	108.05
46	107.92	147.59	95.51	130.63	108.34	142.88	95.89	126.46	95.12	125.43	84.19	111.01
47	111.66	149.47	98.82	132.28	112.18	145.34	99.27	128.63	98.58	127.49	87.07	112.83
48	118.10	150.92	104.52	133.57	119.24	146.81	105.52	129.93	104.62	128.77	92.60	113.96
49	124.95	154.77	110.58	136.96	126.98	151.03	112.39	133.66	111.48	132.45	98.66	117.22
50	140.95	160.27	124.74	141.84	133.96	155.15	118.55	137.31	117.81	136.13	104.27	120.48
51	148.22	165.86	131.18	146.34	142.29	160.94	125.94	142.44	124.91	141.01	110.55	124.80
52	155.59	170.03	137.70	150.43	150.05	165.43	132.80	147.30	131.77	146.06	116.61	129.27
53	162.24	173.83	143.59	153.88	157.41	171.05	139.31	151.39	138.02	150.26	122.15	132.99
54	170.34	180.32	150.76	159.58	167.12	178.60	147.91	158.07	147.86	157.11	130.86	139.05
55	178.86	188.21	158.29	166.57	176.64	187.04	156.34	165.55	155.66	164.80	137.76	145.94
56	185.18	192.37	163.81	170.24	184.09	192.34	162.93	170.23	162.23	169.61	143.67	150.11
57	192.78	197.04	170.61	174.38	192.93	197.74	170.75	175.01	169.96	174.23	150.41	154.20
58	202.84	200.47	179.07	177.41	204.31	201.37	180.83	178.23	180.15	177.29	159.43	156.85
59	210.23	204.93	186.05	181.37	213.64	206.77	189.08	183.00	188.53	181.94	166.86	161.02
60	227.28	218.85	201.13	193.69	231.69	221.19	205.06	195.77	204.20	194.70	180.72	172.32
61	234.12	224.26	207.20	198.46	240.72	228.85	213.05	202.54	212.25	201.89	187.85	178.68
62	241.50	228.51	213.72	202.23	250.44	233.85	221.65	206.97	219.36	206.34	194.14	182.62
63	248.35	235.58	219.79	208.49	251.42	243.08	222.52	215.13	219.36	214.50	194.14	190.20
64	254.89	245.86	225.58	217.59	251.42	251.42	222.52	222.52	219.36	219.36	194.14	194.14

Rates shown are based on our Preferred risk tier - .573

	Lumenos HSA - Area 6				Lumenos HSA Select - Area 6							
	HSA09 50%		HSA09 50%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$1,500		$3,000		$2,250		$4,500		$4,000		$8,000	
Age	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female
0	114.89	114.89	101.67	101.67	91.19	91.19	80.71	80.71	81.25	81.25	71.91	71.91
1	93.21	93.21	82.49	82.49	76.96	76.96	68.12	68.12	67.71	67.71	59.92	59.92
2	71.88	71.88	63.61	63.61	67.91	67.91	60.10	60.10	59.35	59.35	52.52	52.52
3	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
4	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
5	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
6	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
7	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
8	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
9	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
10	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
11	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
12	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
13	65.83	65.83	58.26	58.26	62.19	62.19	55.04	55.04	54.26	54.26	48.02	48.02
14	65.83	65.83	58.26	58.26	62.19	62.73	55.04	55.52	54.26	54.73	48.02	48.44
15	65.83	71.68	58.26	63.61	62.19	68.34	55.04	60.49	54.26	59.71	48.02	52.85
16	65.83	73.13	58.26	64.72	62.19	68.87	55.04	60.96	54.26	60.19	48.02	53.27
17	65.83	73.13	58.26	64.72	62.19	68.87	55.04	60.96	54.26	60.19	48.02	53.27
18	65.83	77.81	58.26	68.86	62.19	72.22	55.04	63.91	54.26	63.10	48.02	55.84
19	65.83	80.88	58.26	71.58	62.19	75.13	55.04	66.49	54.26	65.64	48.02	58.09
20	65.83	82.48	58.26	73.00	62.19	76.53	55.04	67.73	54.26	66.86	48.02	59.18
21	65.83	84.98	58.26	75.22	62.19	76.74	55.04	67.92	54.26	67.14	48.02	59.43
22	65.83	84.99	58.26	75.22	62.19	76.74	55.04	67.92	54.26	67.14	48.02	59.43
23	65.83	85.57	58.26	75.72	62.19	77.40	55.04	68.49	54.26	67.71	48.02	59.92
24	65.83	87.04	58.26	77.03	62.19	79.01	55.04	69.92	54.26	69.21	48.02	61.25
25	65.83	88.42	58.26	78.25	62.19	80.41	55.04	71.17	54.26	70.49	48.02	62.34
26	65.83	90.13	58.26	79.76	62.19	82.13	55.04	72.70	54.26	72.04	48.02	63.76
27	65.83	92.18	58.26	81.58	62.19	84.29	55.04	74.60	54.26	74.01	48.02	65.50
28	65.83	95.49	58.26	84.51	63.27	87.74	56.00	77.65	55.39	77.11	49.02	68.25
29	65.83	100.17	58.26	88.65	64.24	92.48	56.86	81.85	56.23	81.16	49.78	71.83
30	65.83	102.68	58.26	90.87	65.10	97.44	57.62	86.24	56.98	85.57	50.44	75.82
31	66.63	103.15	58.97	95.72	66.51	103.15	58.86	91.30	58.40	90.56	51.68	80.15
32	68.11	111.81	60.28	98.95	67.91	106.93	60.10	94.64	59.52	93.85	52.68	83.06
33	70.73	116.71	62.59	103.29	70.82	111.88	62.67	99.02	62.16	98.09	55.01	86.81
34	73.47	120.96	65.02	106.52	73.73	115.76	65.25	102.46	64.70	101.47	57.26	89.81
35	74.61	121.96	66.03	107.94	74.91	117.49	66.30	103.98	65.83	103.07	58.26	91.22
36	77.12	123.10	68.26	108.94	77.61	118.78	68.69	105.13	68.18	104.20	60.34	92.22
37	80.66	125.61	71.38	111.16	81.17	121.47	71.83	107.51	71.19	106.55	63.00	94.30
38	85.93	128.80	76.03	113.99	86.56	124.71	76.60	110.37	75.89	109.37	67.17	96.80
39	93.32	135.19	82.59	119.64	94.32	131.61	83.47	116.48	82.66	115.39	73.16	102.12
40	96.49	142.49	85.31	126.11	95.93	135.49	84.90	119.91	84.07	118.97	74.40	105.29
41	101.43	145.35	89.76	128.63	101.10	138.18	89.48	122.30	88.59	121.13	78.40	107.20
42	104.27	148.89	92.29	131.76	104.01	141.95	92.06	125.64	91.22	124.60	80.74	110.28
43	106.78	153.90	94.50	136.20	106.60	147.34	94.35	130.41	93.48	129.50	82.73	114.44
44	110.32	157.32	97.63	139.23	110.26	150.93	97.59	133.55	96.68	132.41	85.56	117.18
45	113.29	158.47	100.26	140.25	113.28	152.84	100.26	135.27	99.40	134.10	87.98	118.69
46	118.54	162.11	104.90	143.47	118.99	156.94	105.32	138.90	104.48	137.77	92.47	121.93
47	122.64	164.17	108.54	145.29	123.20	159.63	109.04	141.28	108.06	140.03	95.63	123.93
48	129.72	165.77	114.80	146.71	130.96	161.25	115.91	142.72	114.92	141.43	101.70	125.18
49	137.24	169.99	121.46	150.44	139.47	165.88	123.45	146.81	122.44	145.48	108.37	128.76
50	154.82	176.04	137.01	155.79	147.13	170.41	130.21	150.83	129.40	149.52	114.53	132.33
51	162.80	181.62	144.08	160.74	156.29	176.77	138.33	156.45	137.20	154.88	121.43	137.08
52	170.90	186.76	151.25	165.28	164.81	182.80	145.86	161.79	144.73	160.43	128.09	141.99
53	178.20	190.98	157.71	169.02	172.89	187.87	153.02	166.28	151.59	165.04	134.17	146.07
54	187.10	198.05	165.59	175.28	183.56	196.17	162.46	173.62	161.41	172.56	143.74	152.73
55	196.45	206.72	173.87	182.95	194.02	205.44	171.72	181.83	170.97	181.13	151.31	160.30
56	203.31	211.29	179.92	186.99	202.21	211.27	178.97	186.98	178.30	186.30	157.80	164.88
57	211.75	216.42	187.40	191.53	211.91	217.19	187.55	192.22	186.67	191.38	165.21	169.37
58	222.24	220.19	196.69	194.87	224.41	221.18	198.62	195.76	197.86	194.67	175.11	172.28
59	230.91	225.10	204.35	199.20	234.65	227.10	207.68	201.00	207.03	199.84	183.27	176.86
60	249.62	240.38	220.92	212.74	254.48	242.95	225.23	215.03	224.29	213.85	198.50	189.27
61	257.15	246.32	227.58	217.99	264.40	251.36	234.01	222.47	233.13	221.75	206.33	196.26
62	265.25	250.99	234.75	222.12	275.07	256.85	243.46	227.33	240.94	226.64	213.24	200.58
63	272.78	258.75	241.42	228.99	276.15	266.99	244.41	236.30	240.94	236.04	213.24	208.91
64	279.97	270.04	247.77	238.99	276.15	276.15	244.41	244.41	240.94	240.94	213.24	213.24

Rates shown are based on our Preferred risk tier - .573

	Lumenos HSA - Area 7				Lumenos HSA Select - Area 7							
	HSA09 50%		HSA09 50%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$1,500		$3,000		$2,250		$4,500		$4,000		$8,000	
Age	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female
0	115.23	115.23	101.98	101.98	91.46	91.46	80.95	80.95	81.49	81.49	72.13	72.13
1	93.49	93.49	82.74	82.74	77.19	77.19	68.32	68.32	67.91	67.91	60.11	60.11
2	72.09	72.09	63.80	63.80	68.11	68.11	60.29	60.29	59.52	59.52	52.68	52.68
3	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
4	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
5	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
6	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
7	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
8	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
9	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
10	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
11	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
12	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
13	66.03	66.03	58.43	58.43	62.38	62.38	55.21	55.21	54.42	54.42	48.17	48.17
14	66.03	66.03	58.43	58.43	62.38	62.92	55.21	55.69	54.42	54.90	48.17	48.58
15	66.03	72.09	58.43	63.80	62.38	68.54	55.21	60.67	54.42	59.90	48.17	53.01
16	66.03	73.35	58.43	64.92	62.38	69.08	55.21	61.14	54.42	60.37	48.17	53.43
17	66.03	73.35	58.43	64.92	62.38	69.08	55.21	61.14	54.42	60.37	48.17	53.43
18	66.03	78.04	58.43	69.06	62.38	72.43	55.21	64.11	54.42	63.29	48.17	56.02
19	66.03	81.13	58.43	71.80	62.38	75.36	55.21	66.69	54.42	65.84	48.17	58.27
20	66.03	82.73	58.43	73.22	62.38	76.76	55.21	67.94	54.42	67.07	48.17	59.36
21	66.03	85.25	58.43	75.45	62.38	78.98	55.21	68.13	54.42	67.25	48.17	59.61
22	66.03	85.25	58.43	75.45	62.38	78.98	55.21	68.13	54.42	67.25	48.17	59.61
23	66.03	85.82	58.43	75.95	62.38	77.63	55.21	68.70	54.42	67.91	48.17	60.11
24	66.03	87.31	58.43	77.27	62.38	79.25	55.21	70.14	54.42	69.42	48.17	61.44
25	66.03	88.69	58.43	78.48	62.38	80.66	55.21	71.38	54.42	70.65	48.17	62.53
26	66.03	90.40	58.43	80.00	62.38	82.39	55.21	72.91	54.42	72.26	48.17	63.95
27	66.03	92.46	58.43	81.83	62.38	84.55	55.21	74.83	54.42	74.24	48.17	65.69
28	66.03	95.78	58.43	84.76	63.46	88.01	56.17	77.89	55.56	77.35	49.17	68.46
29	66.03	100.47	58.43	88.92	64.43	92.76	57.03	82.10	56.41	81.40	49.93	72.04
30	66.03	102.99	58.43	91.15	65.30	97.74	57.79	86.50	57.16	85.93	50.59	76.05
31	66.83	108.48	59.15	96.01	66.71	103.46	59.04	91.57	58.58	90.84	51.85	80.39
32	68.31	112.14	60.46	99.24	68.11	107.25	60.29	94.92	59.71	94.14	52.84	83.31
33	70.95	117.06	62.78	103.60	71.03	112.22	62.86	99.32	62.35	98.38	55.18	87.07
34	73.69	120.73	65.22	106.84	73.95	116.11	65.45	102.77	64.89	101.78	57.43	90.08
35	74.84	122.32	66.23	108.26	75.14	117.84	66.50	104.30	66.03	103.38	58.44	91.50
36	77.36	123.47	68.46	109.27	77.84	119.14	68.89	105.44	68.38	104.52	60.52	92.50
37	80.90	125.99	71.60	111.50	81.41	121.84	72.05	107.84	71.40	106.87	63.20	94.58
38	86.17	129.19	76.25	114.34	86.82	125.09	76.83	110.71	76.12	109.70	67.37	97.09
39	93.61	135.60	82.84	120.01	94.60	132.00	83.72	116.83	82.91	115.74	73.38	102.43
40	96.69	142.92	85.57	126.48	96.22	135.69	85.16	120.27	84.33	119.33	74.63	105.60
41	101.73	145.78	90.03	129.02	101.41	138.60	89.75	122.67	88.86	121.49	78.64	107.52
42	104.59	149.34	92.57	132.16	104.33	142.38	92.33	126.02	91.50	124.98	80.98	110.61
43	107.11	154.37	94.79	136.61	106.93	147.79	94.64	130.80	93.76	129.69	82.98	114.79
44	110.65	157.80	97.93	139.65	110.60	151.36	97.89	133.96	96.97	132.81	85.82	117.54
45	113.63	158.94	100.56	140.67	113.63	159.31	100.57	135.68	99.70	134.51	88.24	119.05
46	118.89	162.61	105.22	143.91	119.35	157.41	105.63	139.32	104.80	138.18	92.75	122.30
47	123.02	164.66	108.87	145.73	123.57	160.11	109.37	141.71	108.33	140.43	95.92	124.31
48	130.11	166.27	115.14	147.15	131.36	161.73	116.26	143.15	115.26	141.86	102.01	125.56
49	137.66	170.50	121.83	150.89	139.90	166.39	123.82	147.26	122.81	145.92	108.69	129.15
50	155.28	176.57	137.42	156.26	147.58	170.93	130.61	151.28	129.79	149.58	114.88	132.74
51	163.29	182.17	144.52	161.23	156.77	177.30	138.75	156.92	137.62	155.35	121.80	137.49
52	171.42	187.33	151.70	165.79	165.30	183.36	146.30	162.28	145.16	160.92	128.48	142.42
53	178.74	191.55	158.19	169.53	173.41	188.44	153.48	166.78	152.05	165.54	134.57	146.51
54	187.66	198.65	166.09	175.81	184.12	196.76	162.95	174.15	162.90	173.09	144.17	153.19
55	197.05	207.35	174.39	183.50	194.60	206.06	172.23	182.38	171.48	181.67	151.77	160.78
56	203.92	211.92	180.47	187.55	202.81	211.90	179.50	187.54	178.84	186.88	158.28	165.37
57	212.38	217.08	187.96	192.11	212.55	217.84	188.12	192.80	187.24	191.95	165.71	169.83
58	222.91	220.88	197.28	195.46	225.09	221.85	199.21	196.35	198.46	195.25	175.64	172.81
59	231.61	225.77	204.97	199.81	235.36	227.79	208.31	201.61	207.71	200.44	183.83	177.40
60	250.37	241.10	221.58	213.38	255.25	243.69	225.92	215.68	224.97	214.50	199.10	189.84
61	257.93	247.06	228.27	218.65	265.20	252.12	234.71	223.14	233.83	222.42	206.95	196.85
62	266.06	251.75	235.46	222.80	275.50	257.63	244.19	228.01	241.66	227.32	213.88	201.19
63	273.60	259.53	242.14	229.69	276.98	267.80	245.15	237.01	241.66	236.75	213.88	209.54
64	280.82	270.86	248.52	239.71	276.98	278.98	245.15	245.15	241.66	241.66	213.88	213.88

Rates shown are based on our Preferred risk tier - .573

	Lumenos HSA - Area 8				Lumenos HSA Select - Area 8							
	HSA09 50%		HSA09 50%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 0%	
	Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins		Prev DedCoins	
	$1,500		$3,000		$2,250		$4,500		$4,000		$8,000	
Age	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female	Single Male	Single Female	Family Male	Family Female
0	113.48	113.48	100.42	100.42	90.07	90.07	79.72	79.72	80.25	80.25	71.03	71.03
1	92.06	92.06	81.47	81.47	76.02	76.02	67.28	67.28	66.88	66.88	59.19	59.19
2	70.99	70.99	62.83	62.83	67.07	67.07	59.36	59.36	58.61	58.61	51.87	51.87
3	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
4	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
5	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
6	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
7	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
8	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
9	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
10	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
11	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
12	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
13	65.02	65.02	57.54	57.54	61.43	61.43	54.37	54.37	53.59	53.59	47.44	47.44
14	65.02	65.02	57.54	57.54	61.43	61.96	54.37	54.84	53.59	54.06	47.44	47.85
15	65.02	70.99	57.54	62.83	61.43	67.49	54.37	59.74	53.59	58.98	47.44	52.21
16	65.02	72.23	57.54	63.93	61.43	68.03	54.37	60.21	53.59	59.45	47.44	52.61
17	65.02	72.23	57.54	63.93	61.43	68.03	54.37	60.21	53.59	59.45	47.44	52.61
18	65.02	76.85	57.54	68.01	61.43	71.33	54.37	63.13	53.59	62.33	47.44	55.16
19	65.02	79.89	57.54	70.70	61.43	74.21	54.37	65.67	53.59	64.83	47.44	57.38
20	65.02	81.47	57.54	72.10	61.43	75.59	54.37	66.80	53.59	66.04	47.44	58.45
21	65.02	83.95	57.54	74.30	61.43	75.80	54.37	67.09	53.59	66.32	47.44	58.70
22	65.02	83.95	57.54	74.30	61.43	75.80	54.37	67.09	53.59	66.32	47.44	58.70
23	65.02	84.52	57.54	74.79	61.43	76.44	54.37	67.65	53.59	66.88	47.44	59.19
24	65.02	85.98	57.54	76.09	61.43	78.04	54.37	69.07	53.59	68.38	47.44	60.50
25	65.02	87.34	57.54	77.29	61.43	79.42	54.37	70.29	53.59	69.57	47.44	61.57
26	65.02	88.02	57.54	78.78	61.43	81.13	54.37	71.80	53.59	71.16	47.44	62.97
27	65.02	91.06	57.54	80.58	61.43	83.26	54.37	73.69	53.59	73.10	47.44	64.70
28	65.02	94.32	57.54	83.47	62.50	86.66	55.31	76.70	54.71	76.17	48.42	67.41
29	65.02	98.94	57.54	87.56	63.45	91.35	56.16	80.84	55.55	80.16	49.16	70.94
30	65.02	101.42	57.54	89.75	64.31	96.25	56.91	85.18	56.29	84.62	49.82	74.89
31	65.81	106.82	58.25	94.55	65.69	101.89	58.14	90.18	57.68	89.45	51.05	79.17
32	67.28	110.43	59.54	97.73	67.07	105.62	59.36	93.47	58.80	92.70	52.03	82.05
33	69.87	115.28	61.83	102.02	69.95	110.51	61.91	97.81	61.40	96.88	54.34	85.74
34	72.57	118.89	64.23	105.21	72.82	114.35	64.45	101.20	63.91	100.23	56.56	88.70
35	73.70	120.46	65.22	106.61	73.99	116.05	65.49	102.70	65.02	101.80	57.55	90.10
36	76.17	121.59	67.42	107.60	76.66	117.33	67.84	103.84	67.34	102.92	59.60	91.09
37	79.67	124.07	70.51	109.80	80.17	119.98	70.95	106.19	70.31	105.24	62.23	93.14
38	84.85	127.22	75.10	112.59	85.49	123.18	75.66	109.02	74.97	108.03	65.35	95.61
39	92.18	133.54	81.58	118.18	93.16	129.99	82.45	115.05	81.65	113.98	72.27	100.87
40	95.22	140.75	84.27	124.56	94.75	133.82	83.86	118.44	83.04	117.51	73.49	103.99
41	100.18	143.57	88.66	127.05	99.68	136.49	88.39	120.80	87.50	119.64	77.44	105.88
42	102.99	147.06	91.15	130.15	102.78	140.21	90.93	124.09	90.10	123.07	79.74	108.92
43	105.48	152.01	93.34	134.53	105.29	145.54	93.19	128.81	92.33	127.72	81.72	113.04
44	108.97	155.39	96.44	137.53	108.91	149.05	96.40	131.92	95.49	130.78	84.51	115.75
45	111.90	155.52	99.03	138.52	111.89	150.97	99.04	133.61	98.18	132.45	86.90	117.23
46	117.08	160.12	103.62	141.71	117.53	155.01	104.02	137.19	103.20	136.08	91.34	120.44
47	121.14	162.15	107.21	143.51	121.69	157.67	107.70	139.55	106.73	138.31	94.46	122.41
48	128.13	163.73	113.39	144.91	129.35	159.27	114.49	140.96	113.51	139.70	100.46	123.64
49	135.56	167.91	119.97	148.60	137.76	163.85	121.93	145.01	120.94	143.70	107.04	127.18
50	152.92	173.88	135.33	153.88	145.92	168.32	128.62	148.97	127.81	147.69	113.12	130.71
51	160.81	179.39	142.32	158.77	154.38	174.60	136.63	154.53	135.52	152.99	119.94	135.39
52	168.81	184.47	149.39	163.26	162.78	180.56	144.08	159.81	142.95	158.48	126.52	140.25
53	176.02	188.64	155.78	166.94	170.77	185.57	151.14	164.24	149.74	163.02	132.52	144.28
54	184.80	195.62	163.56	173.13	181.31	193.77	160.47	171.49	160.42	170.44	141.97	150.85
55	194.05	204.19	171.73	180.71	191.63	202.92	169.61	179.60	168.87	178.90	149.46	158.33
56	200.81	208.70	177.72	184.70	199.72	208.67	176.77	184.68	176.12	184.01	155.87	162.85
57	209.15	213.76	185.10	189.18	209.31	214.53	185.25	189.86	184.39	189.03	163.18	167.29
58	219.52	217.49	194.28	192.48	221.65	218.47	196.18	193.35	195.44	192.28	172.97	170.17
59	228.08	222.34	201.84	196.76	231.77	224.82	205.13	198.54	204.54	197.39	181.03	174.69
60	246.56	237.43	218.21	210.13	251.36	239.97	222.47	212.39	221.53	211.22	196.07	186.95
61	254.00	243.30	224.79	215.31	261.16	248.28	231.14	219.73	230.27	219.03	203.80	193.85
62	262.00	247.91	231.87	219.40	271.69	253.70	240.47	224.54	237.98	223.85	210.62	198.13
63	269.44	255.58	238.45	226.19	272.77	263.71	241.41	233.60	237.98	233.15	210.62	206.34
64	276.54	266.73	244.73	236.05	272.77	272.77	241.41	241.41	237.98	237.98	210.62	210.62

Rates shown are based on our Preferred risk tier - .673

Lumenos HSA Select - Area 1

	HSA Select 0%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 20%		HSA Select 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar	
	$5,800		$1,750		$3,000		$11,600		$3,500		$6,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	91.24	91.24	115.16	115.16	111.02	111.02	80.75	80.75	101.91	101.91	98.25	98.25
1	72.06	72.06	97.69	97.69	88.92	88.92	63.77	63.77	86.45	86.45	78.70	78.70
2	54.52	54.52	86.68	86.68	67.25	67.25	48.25	48.25	76.71	76.71	59.51	59.51
3	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
4	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
5	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
6	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
7	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
8	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
9	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
10	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
11	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
12	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
13	49.86	49.86	79.39	79.39	61.59	61.59	44.12	44.12	70.26	70.26	54.51	54.51
14	49.86	49.84	79.39	80.03	61.59	61.59	44.12	44.20	70.26	70.86	54.51	54.51
15	49.86	54.78	79.39	87.10	61.59	67.57	44.12	48.48	70.26	77.07	54.51	59.80
16	49.86	55.89	79.39	87.79	61.59	68.96	44.12	49.55	70.26	77.69	54.51	61.02
17	49.86	55.99	79.39	87.79	61.59	68.96	44.12	49.55	70.26	77.69	54.51	61.02
18	49.86	59.88	79.39	92.05	61.59	73.66	44.12	52.99	70.26	81.46	54.51	65.18
19	49.86	62.30	79.39	95.77	61.59	78.64	44.12	55.13	70.26	84.74	54.51	67.83
20	49.86	63.51	79.39	97.55	61.59	78.04	44.12	56.21	70.26	86.33	54.51	69.05
21	49.86	65.19	79.39	97.82	61.59	81.02	44.12	58.57	70.26	86.57	54.51	71.70
22	49.86	65.19	79.39	97.82	61.59	81.02	44.12	58.57	70.26	86.57	54.51	71.70
23	49.86	66.71	79.39	98.65	61.59	81.56	44.12	59.04	70.26	87.30	54.51	72.18
24	49.86	67.74	79.39	100.72	61.59	82.95	44.12	59.95	70.26	89.13	54.51	73.41
25	49.86	68.61	79.39	102.50	61.59	84.01	44.12	60.72	70.26	90.71	54.51	74.35
26	49.86	69.90	79.39	104.71	61.59	85.72	44.12	61.87	70.26	92.66	54.51	75.85
27	49.86	71.46	79.39	107.46	61.59	87.75	44.12	63.24	70.26	95.10	54.51	77.65
28	49.86	73.96	80.63	111.87	61.59	90.85	44.12	65.46	71.35	98.99	54.51	80.39
29	49.86	77.33	81.87	117.91	61.59	95.00	44.12	68.44	72.44	104.35	54.51	84.08
30	49.86	78.28	82.97	124.24	61.59	95.83	44.12	69.28	73.42	109.95	54.51	85.68
31	49.86	82.35	84.76	131.54	61.59	101.84	44.12	72.87	75.01	116.40	54.51	90.12
32	50.37	84.94	86.55	136.35	62.88	105.15	44.59	75.17	76.59	120.66	55.64	93.05
33	52.54	88.48	90.26	142.68	65.44	109.64	46.49	78.30	79.88	126.27	57.91	97.02
34	54.52	91.07	93.97	147.64	68.00	112.94	48.25	80.60	83.17	130.64	60.18	99.95
35	55.47	92.28	95.49	149.70	69.17	114.55	49.09	81.67	84.50	132.48	61.21	101.36
36	57.37	93.23	98.79	151.35	71.63	115.72	50.77	82.51	87.43	133.94	63.39	102.41
37	59.88	95.04	103.33	154.65	74.83	118.07	52.99	84.12	91.44	136.86	66.22	104.49
38	63.76	97.38	110.21	158.78	79.74	120.95	56.43	86.18	97.53	140.51	70.56	107.04
39	69.30	102.30	120.12	167.59	86.68	127.14	61.33	90.54	106.30	148.30	76.71	112.51
40	72.06	108.87	122.32	172.40	89.78	134.61	63.77	96.35	108.25	152.57	79.45	119.13
41	75.69	110.86	128.79	175.93	94.48	137.18	66.99	98.11	113.97	155.74	83.61	121.39
42	77.77	113.63	132.50	180.79	97.03	140.70	68.82	100.56	117.25	160.00	85.87	124.51
43	79.66	117.51	135.66	187.68	99.49	145.50	70.50	104.00	120.05	166.08	88.05	128.78
44	82.43	120.01	140.34	192.21	102.91	148.70	72.95	106.21	124.19	170.10	91.07	131.60
45	84.59	121.14	144.33	194.42	105.58	150.20	74.86	107.21	127.73	172.05	93.43	132.92
46	88.65	124.16	151.49	199.64	110.81	153.83	78.45	109.83	134.06	176.67	98.06	136.13
47	91.77	126.15	156.85	202.95	114.76	156.50	81.21	111.65	138.88	179.60	101.55	138.49
48	97.21	127.19	165.76	205.01	121.59	157.88	86.02	112.56	147.58	181.42	107.60	139.72
49	103.17	130.56	177.22	210.93	129.17	162.15	91.30	115.55	156.83	186.65	114.30	143.50
50	119.67	136.17	185.99	216.57	147.74	168.66	105.91	120.51	165.47	191.66	130.75	149.26
51	128.50	140.75	198.68	224.42	158.39	174.43	111.95	124.56	175.82	198.60	138.48	154.37
52	132.63	145.16	209.41	231.58	164.18	180.09	117.38	128.47	185.32	205.29	145.29	159.37
53	138.25	148.88	219.46	238.45	171.23	184.78	122.35	131.76	194.21	211.01	151.52	163.52
54	146.63	154.84	232.67	248.91	181.80	192.36	129.77	137.03	205.59	220.26	160.88	170.23
55	154.66	162.18	245.46	259.91	191.83	201.33	136.88	143.53	217.22	230.01	169.76	178.17
56	160.71	165.81	255.64	266.65	199.52	206.03	142.24	146.75	226.23	235.97	176.55	182.32
57	167.97	170.74	267.89	274.64	208.70	212.22	148.66	151.11	237.07	243.03	184.68	187.80
58	175.57	173.85	282.75	279.73	218.20	216.06	155.39	153.86	250.22	247.54	193.09	191.20
59	182.84	178.00	295.69	287.30	227.38	221.83	161.81	157.52	261.67	254.23	201.22	195.83
60	199.51	190.87	321.42	307.24	248.20	237.31	176.57	168.92	284.43	271.89	219.64	210.00
61	207.37	196.83	333.38	317.15	258.02	244.68	183.53	174.20	295.03	280.66	228.33	216.53
62	215.24	200.93	346.05	323.69	267.95	249.90	190.48	177.87	306.23	286.62	237.11	221.16
63	221.37	208.93	352.51	336.00	273.50	260.05	195.91	184.90	311.95	297.34	242.02	230.13
64	221.37	219.99	352.51	351.00	273.50	273.50	195.91	194.69	311.95	310.61	242.02	242.02

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA Select - Area 2

	HSA Select 0% Prev 1st Dollar $5,800		HSA Select 20% Prev 1st Dollar $1,750		HSA Select 20% Prev 1st Dollar $3,000		HSA Select 0% Prev 1st Dollar $11,600		HSA Select 20% Prev 1st Dollar $3,500		HSA Select 20% Prev 1st Dollar $6,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	81.63	81.63	103.02	103.02	99.32	99.32	72.24	72.24	91.17	91.17	87.89	87.89
1	64.45	64.45	87.39	87.39	79.55	79.55	57.05	57.05	77.33	77.33	70.40	70.40
2	48.77	48.77	77.54	77.54	60.17	60.17	43.16	43.16	68.62	68.62	53.24	53.24
3	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
4	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
5	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
6	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
7	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
8	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
9	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
10	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
11	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
12	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
13	44.60	44.60	71.02	71.02	55.10	55.10	39.47	39.47	62.85	62.85	48.76	48.76
14	44.60	44.68	71.02	71.84	55.10	55.10	39.47	39.54	62.85	63.40	48.76	48.76
15	44.60	49.01	71.02	77.92	55.10	60.45	39.47	43.37	62.85	68.85	48.76	53.50
16	44.60	50.09	71.02	78.53	55.10	61.69	39.47	44.33	62.85	69.49	48.76	54.60
17	44.60	50.09	71.02	78.53	55.10	61.69	39.47	44.33	62.85	69.49	48.76	54.60
18	44.60	53.57	71.02	82.35	55.10	65.90	39.47	47.40	62.85	72.87	48.76	58.31
19	44.60	55.73	71.02	85.67	55.10	68.57	39.47	49.32	62.85	75.81	48.76	60.67
20	44.60	56.81	71.02	87.27	55.10	69.81	39.47	50.28	62.85	77.23	48.76	61.78
21	44.60	58.21	71.02	87.51	55.10	72.48	39.47	52.40	62.85	77.45	48.76	64.14
22	44.60	58.21	71.02	87.51	55.10	72.48	39.47	52.40	62.85	77.45	48.76	64.14
23	44.60	59.68	71.02	88.25	55.10	72.96	39.47	52.81	62.85	78.10	48.76	64.57
24	44.60	60.60	71.02	90.10	55.10	74.20	39.47	53.63	62.85	79.73	48.76	65.67
25	44.60	61.37	71.02	91.70	55.10	75.16	39.47	54.31	62.85	81.15	48.76	66.51
26	44.60	62.53	71.02	93.67	55.10	76.68	39.47	55.35	62.85	82.89	48.76	67.86
27	44.60	63.92	71.02	96.13	55.10	78.50	39.47	56.57	62.85	85.07	48.76	69.47
28	44.60	66.16	72.13	100.07	55.10	81.27	39.47	58.55	63.83	88.55	48.76	71.92
29	44.60	69.18	73.24	105.48	55.10	84.99	39.47	61.23	64.81	93.35	48.76	75.21
30	44.60	70.03	74.22	111.14	55.10	88.61	39.47	61.93	65.68	98.36	48.76	76.65
31	44.60	73.66	75.82	117.67	55.10	91.10	39.47	65.19	67.10	104.13	48.76	80.62
32	45.06	75.98	77.42	121.98	56.25	94.06	39.89	67.25	68.51	107.94	49.78	83.24
33	47.00	79.15	80.74	127.64	58.54	98.08	41.59	70.05	71.45	112.96	51.80	86.79
34	48.77	81.47	84.06	132.07	60.84	101.04	43.16	72.10	74.39	116.87	53.83	89.41
35	49.63	82.55	85.42	133.92	61.88	102.47	43.92	73.06	75.59	118.51	54.76	90.68
36	51.32	83.41	88.37	135.39	64.08	103.52	45.42	73.81	78.21	119.82	56.71	91.61
37	53.57	85.02	92.44	138.35	66.94	105.62	47.40	75.25	81.80	122.43	59.24	93.47
38	57.04	87.11	98.59	142.04	71.34	108.20	50.48	77.10	87.25	125.70	63.13	95.75
39	61.99	91.52	107.45	149.92	77.54	113.74	54.86	80.99	95.09	132.67	68.62	100.65
40	64.45	97.39	109.43	154.23	80.31	120.42	57.05	86.19	96.83	136.48	71.07	106.57
41	67.71	99.17	115.21	157.43	84.52	122.71	59.92	87.77	101.95	139.31	74.79	108.59
42	69.57	101.64	118.53	161.73	86.80	125.87	61.57	89.98	104.89	143.13	76.82	111.39
43	71.26	103.12	121.36	167.89	89.00	130.16	63.07	93.03	107.40	148.57	78.76	115.18
44	73.74	107.36	125.55	171.95	92.06	133.03	65.26	95.01	111.10	152.17	81.46	117.72
45	75.68	108.37	129.11	173.92	94.45	134.97	66.97	95.91	114.26	153.91	83.58	118.90
46	79.30	111.07	135.52	178.60	99.12	137.61	70.19	98.30	119.92	158.05	87.73	121.78
47	82.09	112.85	140.32	181.56	102.66	140.00	72.64	99.88	124.17	160.66	90.85	123.89
48	86.96	113.78	149.18	183.59	108.77	141.24	76.95	100.69	132.02	162.50	96.26	124.99
49	92.29	116.79	158.53	188.69	115.56	145.06	81.68	103.38	140.29	168.98	102.25	128.97
50	107.05	121.82	167.28	193.74	132.17	150.88	94.75	107.81	148.03	171.45	116.96	133.53
51	113.16	125.92	177.73	200.76	139.90	156.05	100.15	111.44	157.29	177.65	123.80	138.09
52	118.65	129.86	187.34	207.52	146.88	161.10	105.00	114.93	165.78	183.65	129.97	142.57
53	123.68	133.18	198.33	213.31	153.18	165.30	109.45	117.87	173.73	188.76	135.55	146.29
54	131.17	138.51	208.14	222.66	162.63	172.03	116.09	122.59	184.19	197.04	143.92	152.29
55	138.36	145.68	219.59	232.51	171.61	180.11	122.44	128.40	194.32	205.76	151.86	159.39
56	143.77	148.33	228.69	238.54	178.48	184.31	127.24	131.27	202.38	211.09	157.95	163.10
57	150.26	152.74	239.65	245.69	186.70	189.85	132.99	135.17	212.07	217.41	165.21	168.00
58	157.07	155.52	252.95	250.23	195.19	193.28	139.00	137.63	223.84	221.44	172.74	171.05
59	163.56	159.23	264.51	257.01	203.41	197.97	144.75	140.92	234.08	227.44	180.01	175.19
60	178.48	170.75	287.53	274.85	222.03	212.19	157.95	151.11	254.45	243.23	196.49	187.87
61	185.51	176.08	298.24	283.72	230.82	218.88	164.18	155.83	263.92	251.07	204.26	193.70
62	192.55	179.79	309.56	289.75	239.70	223.56	170.40	159.12	273.95	256.41	212.12	197.84
63	198.03	185.91	315.34	300.58	244.67	232.63	175.26	165.41	279.06	265.99	216.51	205.87
64	198.03	195.80	315.34	313.99	244.67	244.67	175.26	174.17	279.06	277.87	216.51	216.51

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA Select - Area 3

	HSA Select 0% - Prev 1st Dollar $5,800		HSA Select 20% Prev 1st Dollar $1,750		HSA Select 20% Prev 1st Dollar $3,000		HSA Select 0% Prev 1st Dollar $11,600		HSA Select 20% Prev 1st Dollar $3,500		HSA Select 20% Prev 1st Dollar $6,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	84.06	84.06	106.10	106.10	102.29	102.29	74.40	74.40	93.89	93.89	90.51	90.51
1	66.39	66.39	90.00	90.00	81.93	81.93	58.76	58.76	79.64	79.64	72.50	72.50
2	50.23	50.23	79.86	79.86	61.96	61.96	44.45	44.45	70.67	70.67	54.83	54.83
3	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
4	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
5	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
6	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
7	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
8	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
9	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
10	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
11	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
12	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
13	45.93	45.93	73.14	73.14	56.74	56.74	40.65	40.65	64.73	64.73	50.22	50.22
14	45.93	46.01	73.14	73.77	56.74	56.74	40.65	40.72	64.73	65.29	50.22	50.22
15	45.93	50.47	73.14	80.24	56.74	62.26	40.65	44.67	64.73	71.01	50.22	55.09
16	45.93	51.58	73.14	80.87	56.74	63.53	40.65	45.65	64.73	71.57	50.22	56.22
17	45.93	51.58	73.14	80.87	56.74	63.53	40.65	45.65	64.73	71.57	50.22	56.22
18	45.93	55.17	73.14	84.80	56.74	67.86	40.65	48.82	64.73	75.05	50.22	60.05
19	45.93	57.59	73.14	88.22	56.74	70.61	40.65	50.79	64.73	78.07	50.22	62.49
20	45.93	58.51	73.14	89.87	56.74	71.89	40.65	51.78	64.73	79.53	50.22	63.62
21	45.93	60.97	73.14	90.12	56.74	74.64	40.65	53.97	64.73	79.76	50.22	66.06
22	45.93	60.97	73.14	90.12	56.74	74.64	40.65	53.97	64.73	79.76	50.22	66.06
23	45.93	61.45	73.14	90.69	56.74	75.14	40.65	54.39	64.73	80.43	50.22	66.49
24	45.93	62.41	73.14	92.79	56.74	76.42	40.65	55.23	64.73	82.12	50.22	67.63
25	45.93	63.21	73.14	94.44	56.74	77.40	40.65	55.94	64.73	83.57	50.22	68.49
26	45.93	64.40	73.14	96.46	56.74	78.97	40.65	57.00	64.73	85.37	50.22	69.88
27	45.93	65.83	73.14	99.00	56.74	80.84	40.65	58.26	64.73	87.61	50.22	71.54
28	45.93	68.14	74.28	103.06	56.74	83.70	40.65	60.30	65.73	91.20	50.22	74.07
29	45.93	71.24	75.42	108.63	56.74	87.53	40.65	63.05	66.74	96.13	50.22	77.46
30	45.93	72.12	76.44	114.46	56.74	89.20	40.65	63.83	67.64	101.29	50.22	78.94
31	45.93	75.87	78.08	121.18	55.74	93.82	40.65	67.14	69.10	107.24	50.22	83.03
32	46.41	78.25	79.73	125.62	57.92	96.87	41.07	69.25	70.55	111.17	51.26	85.73
33	48.40	81.51	83.15	131.45	60.29	101.01	42.83	72.14	73.59	116.32	53.35	89.38
34	50.23	83.90	86.57	136.01	62.65	104.05	44.45	74.26	76.62	120.36	55.44	92.08
35	51.11	85.02	87.97	137.92	63.73	105.53	45.23	75.24	77.85	122.05	56.89	93.59
36	52.86	85.89	91.02	139.44	65.99	106.61	46.78	76.01	80.54	123.40	58.40	94.84
37	55.17	87.56	95.20	142.48	68.94	108.77	48.82	77.49	84.24	126.08	61.01	96.26
38	58.74	89.71	101.54	146.28	73.47	111.43	51.99	79.39	89.85	129.45	65.01	98.61
39	63.84	94.25	110.66	154.89	78.86	117.13	56.50	83.41	97.93	136.63	70.67	103.66
40	66.89	100.30	112.69	158.84	82.71	124.01	58.76	88.76	99.72	140.56	73.20	109.75
41	69.73	102.13	118.65	162.12	87.04	128.38	61.71	90.39	105.00	143.47	77.02	111.84
42	71.64	104.68	122.07	166.56	89.39	129.62	63.41	92.64	108.02	147.40	79.11	114.71
43	73.40	108.26	124.98	172.90	91.66	134.05	64.96	95.81	110.61	153.01	81.11	118.62
44	75.94	110.57	129.30	177.09	94.81	137.00	67.21	97.85	114.42	156.71	83.90	121.24
45	77.93	111.60	132.97	179.11	97.27	138.37	68.97	98.77	117.67	158.51	86.08	122.46
46	81.68	114.39	139.57	183.93	102.09	141.72	72.28	101.24	123.50	162.77	90.34	125.41
47	84.54	116.22	144.50	186.98	105.72	144.18	74.82	102.86	127.88	165.46	93.56	127.58
48	89.55	117.17	153.63	188.87	112.02	145.46	79.25	103.70	135.86	167.14	99.13	128.72
49	95.05	120.28	163.26	194.92	119.00	149.39	84.12	105.45	144.48	171.96	105.31	132.20
50	110.25	125.45	172.27	199.52	136.11	155.39	97.57	111.03	152.45	176.56	120.46	137.51
51	116.54	129.68	183.04	206.75	144.03	160.70	103.14	114.76	161.98	182.96	127.50	142.21
52	122.19	133.73	192.93	213.72	151.26	165.91	108.14	118.35	170.73	189.13	133.85	146.82
53	127.37	137.15	202.18	219.68	157.75	170.24	112.72	121.38	178.92	194.40	139.60	150.65
54	135.08	142.65	214.35	229.31	167.49	177.22	119.56	126.24	189.69	202.92	148.22	158.83
55	142.49	149.42	226.14	239.45	176.73	185.48	126.10	132.23	200.12	211.90	156.39	164.14
56	148.06	152.76	235.52	245.66	183.81	189.81	131.04	135.19	208.42	217.40	162.66	167.97
57	154.75	157.29	246.80	253.01	192.27	195.51	136.95	139.21	218.40	223.90	170.15	173.02
58	161.75	160.16	260.49	257.71	201.02	199.05	143.15	141.74	230.52	228.85	177.89	176.15
59	168.44	163.98	272.41	264.68	209.48	203.87	149.07	145.12	241.07	234.23	185.38	180.42
60	183.60	175.84	295.11	283.06	228.66	218.63	162.67	155.62	262.04	250.49	202.35	193.47
61	191.05	181.34	307.14	292.18	237.71	225.42	169.08	160.49	272.80	258.57	210.35	199.48
62	198.29	185.15	318.80	298.40	246.85	230.23	175.49	163.87	282.12	264.06	218.45	203.74
63	203.94	192.48	324.76	309.55	251.97	239.58	180.49	170.35	287.39	273.93	222.97	212.81
64	203.94	202.67	324.76	323.37	251.97	251.97	180.49	179.37	287.39	286.16	222.97	222.97

Rates shown are based on our Preferred risk tier - .673

Lumenos HSA Select - Area 4

	HSA Select 0%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 20%		HSA Select 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar	
	$5,600		$1,750		$3,000		$11,600		$3,500		$6,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	82.88	82.88	104.60	104.60	100.84	100.84	73.35	73.35	92.57	92.57	88.24	88.24
1	65.45	65.45	88.73	88.73	80.77	80.77	57.93	57.93	78.52	78.52	71.48	71.48
2	49.52	49.52	78.74	78.74	61.09	61.09	43.82	43.82	69.68	69.68	54.06	54.06
3	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
4	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
5	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
6	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
7	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
8	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
9	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
10	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
11	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
12	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
13	45.28	45.28	72.11	72.11	55.94	55.94	40.08	40.08	63.82	63.82	49.51	49.51
14	45.28	45.36	72.11	72.73	55.94	55.94	40.08	40.14	63.82	64.37	49.51	49.51
15	45.28	49.76	72.11	79.11	55.94	61.97	40.08	44.04	63.82	70.01	49.51	54.81
16	45.28	50.86	72.11	79.74	55.94	62.63	40.08	45.01	63.82	70.56	49.51	55.43
17	45.28	50.86	72.11	79.74	55.94	62.63	40.08	45.01	63.82	70.56	49.51	55.43
18	45.28	54.39	72.11	83.61	55.94	66.90	40.08	48.13	63.82	73.99	49.51	59.21
19	45.28	56.58	72.11	86.58	55.94	69.62	40.08	50.07	63.82	76.97	49.51	61.61
20	45.28	57.68	72.11	88.60	55.94	70.88	40.08	51.05	63.82	78.42	49.51	62.72
21	45.28	60.11	72.11	88.86	55.94	73.59	40.08	53.20	63.82	78.63	49.51	65.12
22	45.28	60.11	72.11	88.86	55.94	73.59	40.08	53.20	63.82	78.63	49.51	65.12
23	45.28	60.59	72.11	89.61	55.94	74.08	40.08	53.62	63.82	79.30	49.51	65.55
24	45.28	61.53	72.11	91.49	55.94	75.34	40.08	54.45	63.82	80.96	49.51	66.67
25	45.28	62.31	72.11	93.11	55.94	76.31	40.08	55.15	63.82	82.39	49.51	67.53
26	45.28	63.49	72.11	95.11	55.94	77.86	40.08	56.19	63.82	84.16	49.51	68.90
27	45.28	64.90	72.11	97.60	55.94	79.70	40.08	57.44	63.82	86.37	49.51	70.54
28	45.28	67.18	73.24	101.60	55.94	82.52	40.08	59.45	64.81	89.91	49.51	73.02
29	45.28	70.24	74.36	107.10	55.94	86.29	40.08	62.16	65.80	94.78	49.51	76.37
30	45.28	71.10	75.36	112.85	55.94	87.94	40.08	62.93	66.69	99.86	49.51	77.82
31	45.28	74.79	76.98	119.48	55.94	92.50	40.08	66.19	68.12	105.72	49.51	81.86
32	45.75	77.15	78.61	123.85	57.11	95.51	40.49	68.28	69.56	109.60	50.54	84.52
33	47.72	80.96	81.98	129.60	59.44	99.58	42.23	71.12	72.55	114.69	52.60	88.13
34	49.52	82.72	85.35	134.10	61.76	102.58	43.82	73.21	75.54	118.67	54.65	90.78
35	50.39	83.82	86.74	135.97	62.83	104.05	44.59	74.18	76.75	120.33	55.60	92.07
36	52.11	84.68	89.73	137.47	65.06	105.11	46.12	74.94	79.41	121.65	57.58	93.02
37	54.39	86.33	93.86	140.47	67.97	107.24	48.13	76.40	83.06	124.31	60.15	94.90
38	57.92	88.45	100.10	144.22	72.43	109.86	51.26	78.28	88.59	127.62	64.10	97.22
39	62.94	92.92	109.10	152.22	78.74	115.48	55.71	82.24	96.54	134.70	69.68	102.19
40	65.45	98.69	111.10	156.60	81.54	122.27	57.93	87.51	98.32	138.57	72.16	108.21
41	68.75	100.69	116.98	159.84	85.81	124.59	60.85	89.11	103.52	141.45	75.94	110.26
42	70.63	103.21	120.35	164.22	88.14	127.80	62.51	91.34	106.50	145.32	78.00	113.09
43	72.36	106.73	123.22	170.47	90.37	132.16	64.04	94.46	109.05	150.85	79.97	116.96
44	74.87	109.01	127.48	174.59	93.47	135.07	66.26	96.48	112.81	154.50	82.71	119.53
45	76.83	110.03	131.10	176.59	95.90	136.43	68.00	97.38	116.02	156.27	84.86	120.73
46	80.52	112.78	137.59	181.34	100.65	139.72	71.26	99.81	121.76	160.47	89.07	123.65
47	83.35	114.58	142.47	184.34	104.23	142.15	73.76	101.41	126.03	163.13	92.24	125.78
48	88.29	115.52	151.47	186.21	110.44	143.41	78.13	102.24	134.04	164.78	97.74	126.91
49	93.71	118.59	160.97	191.58	117.33	147.28	82.93	104.94	142.45	169.54	103.82	130.34
50	108.69	123.69	169.84	196.71	134.20	153.20	96.20	109.47	150.30	174.08	118.75	135.57
51	114.90	127.85	180.46	203.83	142.05	158.44	101.68	113.14	159.70	180.38	125.70	140.21
52	120.47	131.85	190.21	210.71	149.13	163.57	106.61	116.69	168.32	186.47	131.97	144.75
53	125.57	135.22	199.34	216.58	155.53	167.84	111.13	119.67	176.40	191.66	137.63	148.53
54	133.18	140.64	211.33	226.08	165.13	174.72	117.87	124.47	187.02	200.06	146.13	154.62
55	140.48	147.31	222.95	236.08	174.24	182.87	124.32	130.37	197.30	208.92	154.19	161.83
56	145.97	150.61	232.20	242.20	181.22	187.14	129.19	133.29	205.48	214.33	160.37	165.60
57	152.57	155.08	243.32	249.45	189.55	192.76	135.03	137.24	215.33	220.75	167.75	170.58
58	159.47	157.91	256.82	254.07	198.19	196.25	141.14	139.74	227.27	224.84	175.38	173.67
59	166.07	161.67	268.57	260.95	206.53	201.00	146.97	143.08	237.67	230.92	182.77	177.88
60	181.21	173.37	291.94	279.07	225.44	215.55	160.38	153.43	258.35	246.96	199.50	190.75
61	188.36	178.78	302.81	288.06	234.36	222.24	166.70	158.22	267.97	254.92	207.39	196.67
62	195.50	182.55	314.31	294.19	243.38	226.99	173.02	161.56	278.15	260.34	215.37	200.87
63	201.07	189.77	320.18	305.19	248.42	236.20	177.95	167.95	283.34	270.07	219.83	209.02
64	201.07	199.82	320.18	318.81	248.42	248.42	177.95	176.84	283.34	287.13	219.83	219.83

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA Select - Area 8

	HSA Select 0%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 20%		HSA Select 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar	
	$5,800		$1,750		$3,000		$11,600		$3,500		$6,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	81.05	81.05	102.29	102.29	98.61	98.61	71.73	71.73	90.52	90.52	87.27	87.27
1	64.00	64.00	86.77	86.77	78.99	78.99	56.65	56.65	76.79	76.79	69.50	69.50
2	48.43	48.43	76.99	76.99	59.74	59.74	42.85	42.85	68.14	68.14	52.86	52.86
3	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
4	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
5	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
6	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
7	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
8	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
9	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
10	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
11	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
12	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
13	44.28	44.28	70.52	70.52	54.71	54.71	39.19	39.19	62.40	62.40	48.42	48.42
14	44.28	44.36	70.52	71.13	54.71	54.71	39.19	39.26	62.40	62.94	48.42	48.42
15	44.28	48.66	70.52	77.36	54.71	60.02	39.19	43.06	62.40	68.46	48.42	53.12
16	44.28	49.73	70.52	77.97	54.71	61.25	39.19	44.01	62.40	69.00	48.42	54.21
17	44.28	49.73	70.52	77.97	54.71	61.25	39.19	44.01	62.40	69.00	48.42	54.21
18	44.28	53.19	70.52	81.76	54.71	65.43	39.19	47.07	62.40	72.35	48.42	57.90
19	44.28	55.33	70.52	85.06	54.71	68.08	39.19	48.97	62.40	75.27	48.42	60.25
20	44.28	56.41	70.52	86.65	54.71	69.31	39.19	49.92	62.40	76.68	48.42	61.33
21	44.28	58.79	70.52	86.89	54.71	71.96	39.19	52.03	62.40	76.90	48.42	63.68
22	44.28	58.79	70.52	86.89	54.71	71.96	39.19	52.03	62.40	76.90	48.42	63.68
23	44.28	59.25	70.52	87.62	54.71	72.44	39.19	52.44	62.40	77.54	48.42	64.11
24	44.28	60.17	70.52	89.46	54.71	73.68	39.19	53.25	62.40	79.17	48.42	65.20
25	44.28	60.94	70.52	91.05	54.71	74.62	39.19	53.93	62.40	80.57	48.42	66.03
26	44.28	62.09	70.52	93.00	54.71	76.14	39.19	54.95	62.40	82.30	48.42	67.38
27	44.28	63.47	70.52	95.44	54.71	77.94	39.19	56.17	62.40	84.47	48.42	68.98
28	44.28	65.69	71.62	99.36	54.71	80.70	39.19	58.14	63.37	87.93	48.42	71.41
29	44.28	68.69	72.72	104.73	54.71	84.39	39.19	60.79	64.35	92.68	48.42	74.68
30	44.28	69.53	73.69	110.35	54.71	86.00	39.19	61.53	65.22	97.66	48.42	76.11
31	44.28	73.14	75.28	116.83	54.71	90.45	39.19	64.73	66.62	103.39	48.42	80.05
32	44.74	75.44	76.87	121.12	55.84	93.40	39.60	66.77	68.03	107.18	49.42	82.65
33	46.67	78.59	80.17	126.74	58.13	97.38	41.30	69.55	70.96	112.15	51.44	86.18
34	48.43	80.89	83.47	131.14	60.40	100.32	42.85	71.59	73.87	116.04	53.45	88.77
35	49.27	81.97	84.82	132.97	61.44	101.74	43.61	72.54	75.06	117.67	54.37	90.04
36	50.96	82.81	87.75	134.44	63.63	102.78	45.10	73.29	77.65	118.97	56.30	90.96
37	53.19	84.42	91.78	137.37	66.47	104.87	47.07	74.71	81.22	121.56	58.82	92.80
38	56.64	86.49	97.89	141.03	70.83	107.43	50.13	76.55	86.63	124.81	62.68	95.07
39	61.55	90.87	106.69	148.85	76.99	112.93	54.48	80.41	94.41	131.79	68.14	99.94
40	64.00	96.70	108.65	158.13	79.74	119.56	56.65	85.58	96.14	135.51	70.56	105.81
41	67.23	98.46	114.39	156.31	83.92	121.84	59.50	87.14	101.23	138.33	74.26	107.82
42	69.08	100.92	117.69	160.58	86.19	124.97	61.13	89.32	104.15	142.11	76.27	110.59
43	70.76	104.37	120.59	166.70	88.37	129.24	62.62	92.37	106.64	147.52	78.21	114.37
44	73.21	106.60	124.65	170.73	91.40	132.09	64.79	94.34	110.31	151.09	80.88	116.89
45	75.14	107.60	128.20	172.69	93.78	133.41	66.49	95.23	113.45	152.82	82.99	118.06
46	78.74	110.29	134.56	177.33	98.42	136.63	69.69	97.60	119.08	156.93	87.10	120.91
47	81.51	112.05	139.32	180.27	101.93	139.00	72.13	99.17	123.29	159.52	90.20	123.01
48	86.35	112.97	148.12	182.09	108.00	140.24	76.41	99.98	131.08	161.14	95.58	124.10
49	91.64	115.96	157.41	187.35	114.73	144.03	81.10	102.63	139.30	165.79	101.53	127.46
50	106.29	120.95	166.08	192.37	131.23	149.81	94.07	107.04	146.97	170.23	116.13	132.58
51	112.35	125.02	176.47	199.33	138.91	154.94	99.44	110.64	156.17	176.40	122.93	137.11
52	117.81	128.94	186.01	206.05	145.83	159.96	104.26	114.11	164.61	182.35	129.05	141.55
53	122.80	132.24	194.93	211.70	152.09	164.13	108.68	117.03	172.50	187.42	134.59	145.24
54	130.24	137.53	206.66	221.08	161.48	170.86	115.26	121.72	182.88	195.65	142.89	151.20
55	137.38	144.05	218.03	230.86	170.39	178.83	121.58	127.49	192.84	204.30	150.78	158.25
56	142.75	147.28	227.07	236.85	177.22	183.00	126.34	130.35	200.95	209.60	156.83	161.95
57	149.20	151.66	237.94	243.94	185.37	188.50	132.04	134.21	210.57	215.87	164.04	166.81
58	155.95	154.42	251.15	248.46	193.81	191.91	138.02	136.65	222.25	219.87	171.51	169.83
59	162.40	158.10	262.63	255.18	201.97	196.56	143.72	139.92	232.42	225.82	178.73	173.95
60	177.21	169.53	285.49	272.90	220.46	210.78	156.83	150.04	252.64	241.50	195.09	186.53
61	184.20	174.83	296.12	281.70	229.18	217.33	163.01	154.73	262.05	249.29	202.81	192.92
62	191.18	178.51	307.36	287.69	238.00	221.97	169.20	157.99	272.00	254.58	210.61	196.44
63	196.62	185.58	313.11	298.44	242.93	230.98	174.01	164.23	277.09	264.10	214.97	204.41
64	196.62	195.40	313.11	311.76	242.93	242.93	174.01	172.93	277.09	275.89	214.97	214.97

Rates shown are based on our Preferred risk tier - .673

Lumenos HSA Select - Area 6

	HSA Select 0% Prev 1st Dollar $5,800		HSA Select 20% Prev 1st Dollar $1,750		HSA Select 20% Prev 1st Dollar $3,000		HSA Select 0% Prev 1st Dollar $11,600		HSA Select 20% Prev 1st Dollar $3,500		HSA Select 20% Prev 1st Dollar $6,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	89.02	89.02	112.95	112.95	108.91	108.91	78.78	78.78	99.43	99.43	95.85	95.85
1	70.30	70.30	95.31	95.31	86.76	86.76	62.22	62.22	84.34	84.34	76.78	76.78
2	53.19	53.19	84.57	84.57	65.61	65.61	47.07	47.07	74.84	74.84	58.06	58.06
3	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
4	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
5	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
6	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
7	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
8	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
9	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
10	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
11	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
12	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
13	48.64	48.64	77.45	77.45	60.09	60.09	43.05	43.05	68.54	68.54	53.18	53.18
14	48.64	48.72	77.45	78.12	60.09	60.09	43.05	43.12	68.54	69.14	53.18	53.18
15	48.64	53.45	77.45	84.97	60.09	65.92	43.05	47.30	68.54	75.19	53.18	58.34
16	48.64	54.62	77.45	85.65	60.09	67.28	43.05	48.34	68.54	75.79	53.18	59.53
17	48.64	54.62	77.45	85.65	60.09	67.28	43.05	48.34	68.54	75.79	53.18	59.53
18	48.64	58.42	77.45	89.81	60.09	71.86	43.05	51.70	68.54	79.47	53.18	63.59
19	48.64	60.78	77.45	93.43	60.09	74.78	43.05	53.79	68.54	82.68	53.18	66.18
20	48.64	61.96	77.45	95.17	60.09	76.18	43.05	54.83	68.54	84.23	53.18	67.37
21	48.64	64.57	77.45	95.44	60.09	79.05	43.05	57.15	68.54	84.46	53.18	69.95
22	48.64	64.57	77.45	95.44	60.09	79.05	43.05	57.15	68.54	84.46	53.18	69.95
23	48.64	65.08	77.45	96.25	60.09	79.57	43.05	57.59	68.54	85.17	53.18	70.41
24	48.64	66.09	77.45	98.26	60.09	80.92	43.05	58.49	68.54	86.96	53.18	71.61
25	48.64	66.93	77.45	100.01	60.09	81.97	43.05	59.23	68.54	88.50	53.18	72.53
26	48.64	68.19	77.45	102.15	60.09	83.63	43.05	60.35	68.54	90.40	53.18	74.00
27	48.64	69.71	77.45	104.84	60.09	85.61	43.05	61.70	68.54	92.77	53.18	75.76
28	48.64	72.16	78.66	109.13	60.09	88.63	43.05	63.86	69.61	96.57	53.18	78.43
29	48.64	75.45	79.87	115.04	60.09	92.69	43.05	66.77	70.68	101.80	53.18	82.02
30	48.64	76.38	80.95	121.21	60.09	94.46	43.05	67.59	71.63	107.27	53.18	83.59
31	48.64	80.34	82.69	128.33	60.09	99.35	43.05	71.10	73.17	113.56	53.18	87.92
32	49.14	82.86	84.44	133.03	61.34	102.58	43.50	73.34	74.71	117.72	54.29	90.78
33	51.25	86.32	88.05	139.20	63.84	106.96	45.36	76.39	77.93	123.18	56.50	94.65
34	53.19	88.65	91.68	144.04	66.34	110.19	47.07	78.63	81.13	127.46	58.70	97.51
35	54.12	90.03	93.16	146.05	67.48	111.75	47.90	79.68	82.44	129.25	59.72	98.89
36	55.97	90.96	96.38	147.66	69.88	112.89	49.54	80.50	85.29	130.67	61.84	99.91
37	58.42	92.72	100.81	150.88	73.01	115.19	51.70	82.07	89.21	133.52	64.61	101.94
38	62.21	95.00	107.52	154.91	77.88	118.00	55.05	84.08	95.15	137.08	68.85	104.42
39	67.61	99.81	117.18	163.50	84.57	124.04	59.83	88.33	103.70	144.68	74.84	109.77
40	70.30	106.22	119.33	168.20	87.59	131.33	62.22	94.00	105.60	148.84	77.51	116.22
41	73.84	108.15	125.64	171.68	92.17	133.83	65.36	95.72	111.18	151.93	81.57	118.43
42	75.87	110.65	129.27	176.38	94.67	137.26	67.14	98.10	114.39	156.09	83.77	121.47
43	77.72	114.64	132.35	183.10	97.07	141.95	68.78	101.46	117.13	162.03	85.90	125.62
44	80.41	117.09	136.92	187.53	100.40	145.08	71.17	103.62	121.16	165.96	88.84	128.38
45	82.53	118.18	140.81	189.67	103.00	146.59	73.03	104.60	124.61	167.85	91.15	129.68
46	86.49	121.13	147.78	194.77	108.10	150.07	76.54	107.20	130.79	172.36	95.67	132.81
47	89.53	123.07	153.03	198.00	111.96	152.68	79.23	108.92	135.42	175.22	99.03	135.11
48	94.84	124.08	162.69	200.01	118.62	154.03	83.93	109.82	143.97	176.99	104.97	136.31
49	100.65	127.37	172.89	205.78	126.02	158.20	89.07	112.73	153.00	182.11	111.52	140.00
50	116.75	132.65	182.43	211.29	144.14	164.55	103.32	117.57	161.44	186.93	127.56	145.62
51	123.41	137.32	193.83	218.94	152.58	170.18	109.22	121.53	171.53	193.75	135.02	150.60
52	129.39	141.62	204.31	226.32	160.18	175.70	114.51	125.33	180.80	200.28	141.74	155.48
53	134.88	145.24	214.11	232.63	167.05	180.28	119.37	128.54	189.47	205.86	147.83	159.53
54	143.05	151.06	226.99	242.83	177.35	187.67	126.60	133.69	200.83	214.89	156.96	166.08
55	150.89	158.22	239.47	253.57	187.15	196.42	133.54	140.03	211.92	224.40	165.62	173.82
56	156.79	161.77	249.40	260.15	194.65	201.00	138.76	143.16	220.71	230.21	172.26	177.83
57	163.68	168.57	261.36	267.93	203.61	207.04	145.03	147.42	231.28	237.10	180.18	183.22
58	171.29	169.61	275.85	272.90	212.88	210.79	151.59	150.10	244.11	241.50	188.38	186.54
59	178.37	173.65	288.47	280.28	221.84	215.89	157.86	153.68	255.28	248.03	196.31	191.85
60	194.64	186.21	313.57	299.74	242.14	231.52	172.26	164.80	277.49	265.26	214.28	204.88
61	202.31	192.03	325.25	309.41	251.72	238.71	179.05	169.95	287.82	273.81	222.76	211.24
62	209.98	198.07	337.60	319.99	261.41	243.81	185.84	173.53	298.76	279.63	231.33	215.76
63	215.97	203.83	343.91	327.80	266.82	253.70	191.13	180.39	304.34	290.09	236.12	224.51
64	215.97	214.62	343.91	342.43	266.82	266.82	191.13	189.94	304.34	303.04	236.12	236.12

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA Select - Area 7

	HSA Select 0%		HSA Select 20%		HSA Select 20%		HSA Select 0%		HSA Select 20%		HSA Select 20%	
	Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar		Prev 1st Dollar	
	$5,800		$1,750		$3,000		$11,600		$3,500		$6,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	89.29	89.29	112.69	112.69	108.64	108.64	79.02	79.02	99.72	99.72	96.14	96.14
1	70.51	70.51	95.59	95.59	87.02	87.02	62.41	62.41	84.59	84.59	77.01	77.01
2	53.35	53.35	84.83	84.83	65.81	65.81	47.22	47.22	75.06	75.06	58.24	58.24
3	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
4	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
5	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
6	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
7	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
8	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
9	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
10	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
11	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
12	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
13	48.79	48.79	77.69	77.69	60.27	60.27	43.18	43.18	68.75	68.75	53.34	53.34
14	48.79	48.87	77.69	78.35	60.27	60.27	43.18	43.25	68.75	69.34	53.34	53.34
15	48.79	53.81	77.69	85.23	60.27	66.12	43.18	47.44	68.75	75.42	53.34	58.51
16	48.79	54.79	77.69	85.80	60.27	67.48	43.18	48.49	68.75	76.02	53.34	59.72
17	48.79	54.79	77.69	85.90	60.27	67.48	43.18	48.49	68.75	76.02	53.34	59.72
18	48.79	58.59	77.69	90.08	60.27	72.08	43.18	51.86	68.75	79.71	53.34	63.79
19	48.79	60.96	77.69	93.71	60.27	75.00	43.18	53.95	68.75	82.92	53.34	66.37
20	48.79	62.15	77.69	95.45	60.27	76.36	43.18	55.00	68.75	84.48	53.34	67.57
21	48.79	64.77	77.69	95.73	60.27	79.29	43.18	57.32	68.75	84.72	53.34	70.16
22	48.79	64.77	77.69	95.73	60.27	79.29	43.18	57.32	68.75	84.72	53.34	70.16
23	48.79	65.28	77.69	96.54	60.27	79.81	43.18	57.77	68.75	85.43	53.34	70.62
24	48.79	66.29	77.69	98.55	60.27	81.17	43.18	58.66	68.75	87.21	53.34	71.83
25	48.79	67.33	77.69	100.30	60.27	82.21	43.18	59.41	68.75	88.76	53.34	72.75
26	48.79	68.40	77.69	102.46	60.27	83.88	43.18	60.54	68.75	90.67	53.34	74.23
27	48.79	69.92	77.69	105.15	60.27	85.86	43.18	61.88	68.75	93.06	53.34	75.99
28	48.79	72.38	78.90	109.47	60.27	88.90	43.18	64.06	69.82	96.87	53.34	78.67
29	48.79	75.67	80.11	115.39	60.27	92.97	43.18	66.97	70.89	102.11	53.34	82.27
30	48.79	76.60	81.19	121.58	60.27	94.75	43.18	67.79	71.85	107.59	53.34	83.85
31	48.79	80.58	82.94	128.71	60.27	99.66	43.18	71.31	73.40	113.91	53.34	88.18
32	49.28	83.11	84.69	133.43	61.52	102.89	43.63	73.56	74.94	118.08	54.45	91.06
33	51.41	86.58	88.32	139.62	64.03	107.28	45.50	76.62	78.16	123.56	56.66	94.94
34	53.55	89.12	91.96	144.47	66.54	110.52	47.22	78.87	81.38	127.84	58.88	97.81
35	54.29	90.30	93.44	146.49	67.69	112.09	48.04	79.92	82.69	129.64	59.90	99.19
36	56.14	91.23	96.67	148.10	70.10	113.24	49.68	80.74	85.55	131.07	62.03	100.21
37	58.59	93.00	101.12	151.34	73.23	115.53	51.86	82.31	89.48	133.92	64.80	102.24
38	62.99	95.29	107.84	155.37	78.04	118.36	55.22	84.33	95.44	137.50	69.05	104.74
39	67.81	100.11	117.54	163.99	84.83	124.42	60.02	88.60	104.02	145.12	75.06	110.10
40	70.51	106.54	119.69	168.71	87.85	131.72	62.41	94.28	105.92	149.30	77.74	116.57
41	74.07	108.46	126.03	172.20	92.45	134.23	65.55	96.01	111.52	152.40	81.81	118.79
42	76.10	111.19	129.66	176.91	94.95	137.68	67.35	98.40	114.74	156.57	84.03	121.84
43	77.86	114.99	132.75	183.65	97.36	142.38	68.99	101.76	117.48	162.52	86.16	126.00
44	80.66	117.44	137.33	188.09	100.70	145.52	71.38	103.94	121.53	166.46	89.11	128.77
45	82.78	118.54	141.23	190.25	103.31	146.98	73.25	104.91	124.99	168.36	91.43	130.07
46	86.75	121.50	148.24	195.36	108.43	150.53	76.78	107.53	131.18	172.89	95.95	133.21
47	89.79	123.45	153.49	198.60	112.30	153.14	79.46	109.25	135.83	175.74	99.38	135.51
48	95.12	124.46	163.18	200.61	118.93	154.50	84.18	110.15	144.41	177.53	105.29	136.72
49	100.96	127.76	173.41	206.40	126.40	158.68	89.34	113.06	153.47	182.66	111.85	140.42
50	117.10	133.25	182.98	211.92	144.57	165.05	103.64	117.93	161.92	187.54	127.94	146.06
51	123.78	137.73	194.42	219.60	153.04	170.69	109.55	121.89	172.05	194.33	135.43	151.05
52	129.78	142.03	204.92	227.01	160.66	176.23	114.86	125.71	181.34	200.89	142.17	155.95
53	135.29	145.68	214.75	233.33	167.56	180.82	119.73	128.93	190.04	206.48	148.28	160.02
54	143.48	151.51	227.68	243.57	177.90	188.24	126.99	134.09	201.48	215.54	157.43	166.58
55	151.35	158.70	240.20	254.34	187.72	197.01	133.94	140.45	212.56	225.07	166.13	174.35
56	157.27	162.26	250.16	260.93	195.24	201.61	139.18	143.60	221.38	230.91	172.78	178.42
57	164.97	167.08	262.14	268.74	204.22	207.67	145.47	147.86	231.98	237.82	180.72	183.77
58	171.81	170.12	276.68	273.73	213.52	211.43	152.05	150.56	244.65	242.23	188.95	187.10
59	178.91	174.17	289.34	281.13	222.51	216.55	158.34	154.15	256.05	248.79	196.91	191.63
60	195.23	186.78	314.52	300.65	242.68	232.22	172.78	165.30	278.33	266.06	214.93	205.50
61	202.93	192.61	326.23	310.34	252.49	239.43	179.59	170.46	288.69	274.64	223.43	211.88
62	210.62	196.67	338.62	316.94	262.20	244.54	186.40	174.05	299.66	280.47	232.03	216.41
63	216.62	204.45	344.95	328.79	267.63	254.47	191.71	180.94	305.26	290.96	236.83	225.19
64	216.62	215.27	344.95	343.47	267.63	267.63	191.71	190.52	305.26	303.95	236.83	236.83

Rates shown are based on our Preferred risk tier - .573

Lumenos HSA Select - Area 8

	HSA Select 0% Prev 1st Dollar $5,800		HSA Select 20% Prev 1st Dollar $1,750		HSA Select 20% Prev 1st Dollar $3,000		HSA Select 0% Prev 1st Dollar $11,600		HSA Select 20% Prev 1st Dollar $3,500		HSA Select 20% Prev 1st Dollar $6,000	
Age	Single Male	Single Female	Single Male	Single Female	Single Male	Single Female	Family Male	Family Female	Family Male	Family Female	Family Male	Family Female
0	87.93	87.93	110.97	110.97	106.98	106.98	77.82	77.82	98.21	98.21	94.69	94.68
1	69.44	69.44	94.13	94.13	85.69	85.69	61.46	61.46	83.30	83.30	75.83	75.83
2	52.54	52.54	83.53	83.53	64.81	64.81	46.49	46.49	73.92	73.92	57.35	57.35
3	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
4	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
5	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
6	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
7	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
8	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
9	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
10	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
11	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
12	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
13	48.04	48.04	76.50	76.50	59.35	59.35	42.52	42.52	67.70	67.70	52.53	52.53
14	48.04	48.13	76.50	77.17	59.35	59.35	42.52	42.59	67.70	68.29	52.53	52.53
15	48.04	52.79	76.50	83.93	59.35	65.12	42.52	46.72	67.70	74.27	52.53	57.63
16	48.04	53.95	76.50	84.59	59.35	66.45	42.52	47.75	67.70	74.86	52.53	58.81
17	48.04	53.95	76.50	84.59	59.35	66.45	42.52	47.75	67.70	74.86	52.53	58.81
18	48.04	57.70	76.50	88.70	59.35	70.98	42.52	51.07	67.70	78.50	52.53	62.81
19	48.04	60.03	76.50	92.28	59.35	73.86	42.52	53.13	67.70	81.66	52.53	65.36
20	48.04	61.20	76.50	94.00	59.35	75.19	42.52	54.16	67.70	83.19	52.53	66.54
21	48.04	63.78	76.50	94.27	59.35	78.08	42.52	56.45	67.70	83.42	52.53	69.09
22	48.04	63.78	76.50	94.27	59.35	78.08	42.52	56.45	67.70	83.42	52.53	69.09
23	48.04	64.28	76.50	95.07	59.35	78.59	42.52	56.89	67.70	84.13	52.53	69.55
24	48.04	65.28	76.50	97.05	59.35	79.93	42.52	57.77	67.70	85.89	52.53	70.74
25	48.04	66.11	76.50	98.78	59.35	80.96	42.52	58.51	67.70	87.41	52.53	71.64
26	48.04	67.36	76.50	100.90	59.35	82.60	42.52	59.61	67.70	89.29	52.53	73.10
27	48.04	68.86	76.50	103.55	59.35	84.56	42.52	60.94	67.70	91.63	52.53	74.83
28	48.04	71.28	77.70	107.80	59.35	87.54	42.52	63.08	68.75	95.39	52.53	77.47
29	48.04	74.52	78.89	113.63	59.35	91.55	42.52	65.95	69.81	100.55	52.53	81.02
30	48.04	75.44	79.95	119.72	59.35	93.30	42.52	66.76	70.75	105.95	52.53	82.57
31	48.04	79.35	81.68	128.75	59.35	98.14	42.52	70.23	72.28	112.17	52.53	86.84
32	48.54	81.85	83.40	131.39	60.59	101.32	42.96	72.44	73.80	116.28	53.62	89.67
33	50.62	85.26	86.98	137.49	63.06	105.65	44.80	75.45	76.97	121.67	55.80	93.49
34	52.54	87.76	90.56	142.26	65.53	108.84	46.49	77.67	80.14	125.89	57.99	96.31
35	53.46	88.92	92.02	144.26	66.66	110.38	47.31	78.70	81.43	127.66	58.98	97.68
36	55.29	89.84	95.20	145.85	69.02	111.51	48.93	79.51	84.25	129.07	61.09	98.68
37	57.70	91.59	99.58	149.03	72.11	113.77	51.07	81.06	88.12	131.88	63.82	100.68
38	61.44	93.83	106.20	153.01	76.85	116.55	54.38	83.04	93.98	135.40	68.00	103.14
39	66.78	98.58	115.75	161.49	83.53	122.52	59.10	87.24	102.43	142.91	73.92	108.42
40	69.44	104.91	117.87	168.14	86.51	129.72	61.46	92.84	104.31	147.01	76.56	114.79
41	72.94	106.82	124.10	169.58	91.04	132.19	64.55	94.55	109.82	150.07	80.56	116.98
42	74.94	109.49	127.68	174.22	93.51	135.58	66.32	96.90	112.99	154.18	82.75	119.98
43	76.77	113.24	130.73	180.85	95.87	140.21	67.94	100.22	115.69	160.04	84.84	124.08
44	79.43	115.65	135.24	185.22	99.17	143.30	70.30	102.35	119.68	163.92	87.75	126.80
45	81.51	118.73	139.08	187.35	101.74	144.74	72.14	103.31	123.08	165.79	90.04	128.08
46	85.43	119.65	145.98	192.38	106.78	148.24	75.60	105.89	129.18	170.25	94.49	131.18
47	88.43	121.57	151.15	195.57	110.58	150.81	78.25	107.59	133.76	173.07	97.85	133.45
48	93.67	122.56	160.70	197.55	117.17	152.14	82.90	108.47	142.21	174.82	103.69	134.64
49	99.42	125.81	170.77	203.25	124.47	156.26	87.98	111.34	151.12	179.87	110.15	138.28
50	115.32	131.22	180.19	208.70	142.37	162.53	102.06	116.13	159.45	184.68	125.99	143.83
51	121.89	135.63	191.46	216.25	150.70	168.09	107.88	120.04	169.43	191.37	133.36	148.75
52	127.81	139.88	201.80	223.54	158.21	173.54	113.11	123.80	178.58	197.82	140.01	153.57
53	133.22	143.46	211.48	229.77	165.00	178.07	117.90	126.97	187.14	203.33	146.02	157.58
54	141.30	149.20	224.20	239.85	175.18	185.37	125.05	132.05	198.41	212.25	155.03	164.04
55	149.04	156.28	236.53	250.46	184.86	194.01	131.90	138.31	209.32	221.64	163.59	171.69
56	154.66	159.79	246.34	256.95	192.26	198.54	137.06	141.41	218.00	227.39	170.14	175.69
57	161.87	164.53	258.15	264.65	201.11	204.50	143.25	145.61	228.44	234.20	177.97	180.97
58	169.19	167.53	272.47	269.56	210.26	208.21	149.74	148.26	241.12	238.54	185.07	184.25
59	176.19	171.52	284.93	276.84	219.12	213.25	155.92	151.80	252.15	244.99	193.90	188.71
60	192.25	183.93	309.73	296.07	239.18	228.68	170.15	162.78	274.09	262.00	211.65	202.37
61	199.83	189.67	321.26	305.62	248.64	235.78	176.85	167.86	284.29	270.46	220.03	208.65
62	207.41	193.67	333.46	312.11	258.20	240.81	183.55	171.40	295.09	276.20	228.53	213.11
63	213.32	201.33	339.69	321.78	263.55	250.59	188.79	178.18	300.61	286.52	233.22	221.76
64	213.32	211.99	339.69	338.73	263.55	263.55	188.79	187.61	300.61	299.32	233.22	233.22

Rates shown are based on our Preferred risk tier - .573

Kentucky Individual HSA Plus - Area 1

	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0% Not Sold		HSA Plus 0%		HSA Plus 0% Not Sold		HSA Plus 0%		HSA Plus 50%	
	$1,750		$1,500		$2,500		$3,000		$3,500		$5,000		$5,500		$1,500	
	Single		Single		Single		Single		Single		Single		Single		Single	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	162.54	162.54	193.97	193.97	162.99	162.99	147.13	147.13	137.53	137.53	104.27	104.27	101.83	101.83	155.95	155.95
1	135.25	135.25	161.55	161.55	134.96	134.96	121.49	121.49	113.85	113.85	85.50	85.50	83.50	83.50	129.89	129.89
2	104.56	104.56	125.42	125.42	103.31	103.31	92.33	92.33	86.05	86.05	64.69	64.69	63.17	63.17	100.84	100.84
3	98.39	98.39	118.02	118.02	97.09	97.09	86.80	86.80	80.91	80.91	60.78	60.78	59.36	59.36	94.88	94.88
4	98.08	97.46	117.64	116.90	96.64	96.04	86.39	85.72	80.54	79.78	60.41	59.57	59.00	58.18	94.59	93.99
5	98.08	97.46	117.64	116.90	96.64	96.04	86.39	85.72	80.54	79.78	60.41	59.57	59.00	58.18	94.59	93.99
6	97.15	97.15	116.53	116.53	95.58	95.58	85.31	85.31	79.29	79.29	59.20	59.20	57.82	57.82	93.69	93.69
7	97.15	97.15	116.53	116.53	95.58	95.58	85.31	85.31	79.29	79.29	59.20	59.20	57.82	57.82	93.69	93.69
8	97.15	97.15	116.53	116.53	95.58	95.58	85.31	85.31	79.29	79.29	59.20	59.20	57.82	57.82	93.69	93.69
9	97.15	97.15	116.53	116.53	95.58	95.58	85.31	85.31	79.29	79.29	59.20	59.20	57.82	57.82	93.69	93.69
10	97.15	97.15	116.53	116.53	95.58	95.58	85.31	85.31	79.29	79.29	59.20	59.20	57.82	57.82	93.69	93.69
11	97.15	97.15	116.53	116.53	95.58	95.58	85.31	85.31	79.29	79.29	59.20	59.20	57.82	57.82	93.69	93.69
12	97.15	97.15	116.53	116.53	95.58	95.58	85.31	85.31	79.29	79.29	59.20	59.20	57.82	57.82	93.69	93.69
13	95.31	95.31	114.31	114.31	93.77	93.77	83.69	83.69	77.91	77.91	58.18	58.18	56.82	56.82	91.91	91.91
14	95.31	95.31	114.31	114.31	93.77	93.77	83.69	83.69	77.91	77.91	58.18	58.27	56.82	56.90	91.91	91.91
15	95.31	104.10	114.31	124.87	93.77	102.70	83.69	91.79	77.91	85.42	58.18	63.84	56.82	62.35	91.91	100.40
16	95.31	105.95	114.31	127.09	93.77	104.67	83.69	93.68	77.91	87.18	58.18	65.24	56.82	63.71	91.91	102.18
17	95.31	105.95	114.31	127.09	93.77	104.67	83.69	93.68	77.91	87.18	58.18	65.24	56.82	63.71	91.91	102.18
18	95.31	112.89	114.31	135.25	93.77	111.79	83.69	100.16	77.91	93.19	58.18	69.60	56.82	68.16	91.91	108.73
19	90.99	112.89	109.31	135.25	89.53	111.79	79.78	100.16	74.02	93.19	55.02	69.61	53.73	67.99	87.88	108.73
20	90.99	115.05	109.31	137.84	89.53	113.76	79.78	101.91	74.02	94.81	55.02	70.91	53.73	69.25	87.88	110.82
21	90.99	118.75	109.31	142.10	89.53	117.85	79.78	105.83	74.02	98.57	55.02	73.88	53.73	72.15	87.88	114.25
22	90.99	118.75	109.31	142.10	89.53	117.85	79.78	105.83	74.02	98.57	55.02	73.88	53.73	72.15	87.88	114.25
23	89.29	117.21	107.27	140.24	87.85	116.33	78.29	104.48	72.64	97.32	53.99	73.05	52.73	71.34	86.24	112.75
24	89.29	119.21	107.27	142.65	87.85	118.31	78.29	106.23	72.64	98.95	53.99	74.16	52.73	72.43	86.24	114.70
25	89.29	121.06	107.27	144.88	87.85	119.97	78.29	107.58	72.64	100.20	53.99	75.09	52.73	73.34	86.24	116.49
26	89.29	123.57	107.27	147.66	87.85	122.39	78.29	109.74	72.64	102.21	53.99	76.58	52.73	74.79	86.24	118.71
27	89.29	126.90	107.27	151.18	87.85	125.27	78.29	112.31	72.64	104.58	53.99	78.25	52.73	76.42	86.24	121.55
28	89.29	130.77	107.27	156.55	87.85	129.66	78.29	116.36	72.64	108.34	53.99	81.04	52.73	79.14	86.24	125.87
29	89.29	137.10	107.27	164.15	87.85	135.78	78.29	121.62	72.64	113.23	53.99	84.66	52.73	82.68	86.24	131.97
30	89.29	140.18	107.27	168.04	87.85	138.45	78.29	123.79	72.77	114.98	54.09	85.59	52.82	83.59	86.24	135.10
31	90.21	147.74	108.57	177.11	88.16	145.72	78.29	130.26	72.77	120.99	54.09	89.97	52.82	87.86	87.29	142.40
32	92.22	152.52	110.97	183.04	89.98	150.42	79.91	134.44	74.02	124.88	54.65	92.84	53.37	90.67	89.22	147.16
33	95.92	159.15	115.42	191.01	93.61	156.93	83.15	140.11	77.03	130.13	56.97	96.75	55.64	94.48	92.80	153.57
34	99.62	164.24	119.87	197.12	97.40	161.78	86.52	144.43	80.16	134.02	59.11	99.54	57.73	97.21	96.37	158.49
35	101.17	166.55	121.72	199.90	98.91	164.20	87.88	146.73	81.41	136.27	60.13	101.20	58.72	98.84	97.85	160.72
36	104.56	168.25	125.79	201.94	102.40	165.87	91.12	148.21	84.42	137.65	62.17	102.23	60.72	99.84	101.14	162.36
37	109.34	171.60	131.54	206.01	107.10	169.35	95.16	151.31	88.05	140.41	64.88	104.18	63.35	101.75	105.75	165.64
38	116.43	175.96	140.06	211.20	114.06	173.45	101.37	154.96	93.81	143.79	69.14	106.78	67.53	104.29	112.61	169.80
39	126.46	184.90	152.10	221.76	123.91	182.38	110.15	162.93	101.96	151.18	75.09	112.18	73.34	109.55	122.29	178.30
40	130.92	195.08	157.29	233.81	128.30	192.83	114.20	172.64	105.83	160.45	78.16	119.51	76.33	116.72	126.46	187.98
41	137.71	198.93	165.44	238.44	134.96	196.62	120.14	175.88	111.23	163.45	82.06	121.75	80.15	118.90	133.01	191.70
42	141.41	203.87	170.07	244.97	138.60	201.62	123.97	180.47	114.35	167.59	84.39	124.72	82.41	121.80	136.74	195.47
43	144.96	210.66	174.15	252.52	142.09	208.43	126.48	186.55	117.11	173.34	86.43	129.00	84.41	125.98	140.01	203.03
44	149.74	215.28	179.89	258.07	146.93	212.98	130.93	190.73	121.24	177.10	89.41	131.78	87.31	128.70	144.69	207.49
45	153.60	216.98	184.52	259.92	150.72	214.79	134.17	192.49	124.25	178.74	91.63	132.80	89.49	129.70	148.38	208.98
46	160.85	221.91	193.23	265.85	157.99	219.95	140.79	197.08	130.39	182.99	96.00	136.15	93.75	132.97	155.36	213.75
47	166.40	224.85	199.90	269.19	163.59	223.28	145.78	200.45	134.90	185.12	99.55	138.29	97.03	135.05	160.72	216.43
48	176.12	227.01	211.59	271.78	173.14	225.40	154.42	202.34	142.91	187.68	105.30	139.50	102.84	136.24	169.95	218.51
49	185.44	233.02	223.61	278.83	183.74	231.46	164.14	207.74	151.93	192.76	111.71	143.12	109.09	139.78	179.78	224.17
50	210.66	241.19	252.14	288.46	209.04	240.09	187.63	215.84	174.22	200.40	129.46	148.97	126.43	145.49	202.73	231.92
51	221.76	248.91	265.12	297.53	220.86	247.97	198.56	223.13	184.37	207.16	136.90	154.00	133.70	150.40	213.15	239.22
52	232.87	256.15	278.45	306.06	231.76	255.85	208.41	230.41	193.38	213.93	143.49	158.82	140.14	155.11	223.88	246.07
53	242.73	262.16	290.30	312.91	241.76	262.21	217.46	236.49	201.78	219.44	149.63	162.92	146.13	159.10	233.41	251.58
54	255.58	272.04	304.76	324.59	255.70	272.51	230.82	246.07	214.05	228.53	158.64	169.42	154.93	165.48	245.03	260.96
55	268.18	283.45	319.77	338.11	269.18	284.48	243.38	257.01	225.70	238.48	167.19	176.95	163.28	172.81	257.09	271.84
56	277.90	289.92	331.07	345.70	279.63	290.99	253.09	263.08	234.72	243.99	173.70	180.85	169.64	176.63	266.18	277.95
57	289.62	297.17	344.77	354.04	292.05	299.17	264.70	270.91	245.37	251.25	181.50	186.25	177.26	181.89	277.20	284.65
58	303.65	302.42	361.82	360.15	305.66	304.62	276.85	275.91	256.64	255.88	189.78	189.68	185.34	185.25	290.91	289.57
59	315.68	309.36	375.91	368.30	318.26	311.74	288.46	282.52	267.29	262.02	197.58	194.14	192.96	189.60	302.22	296.12
60	341.74	330.48	406.29	393.32	346.28	333.86	314.78	303.04	291.71	281.07	215.52	208.18	210.48	203.31	326.65	316.23
61	352.69	338.96	418.51	402.95	358.85	343.55	327.20	312.85	303.23	289.70	224.07	214.68	218.83	209.66	336.48	323.97
62	364.25	345.75	431.85	410.78	372.03	350.68	339.89	319.10	314.88	295.97	232.52	219.24	227.09	214.11	347.21	330.23
63	374.12	356.85	444.08	423.33	380.51	363.85	345.82	332.06	320.90	307.87	238.10	227.88	232.53	222.55	357.04	340.36
64	382.15	373.05	455.75	441.86	388.69	381.72	345.82	345.82	320.90	320.90	238.10	238.10	232.53	232.53	365.42	355.25
65	395.09	395.09	474.65	474.65	388.09	388.09	345.82	345.82	320.90	320.90	238.10	238.10	232.53	232.53	381.62	381.62

Rates shown are based on our Preferred risk tier - .573

	Kentucky Individual HSA Plus - Area 2															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$1,750		$1,500		$2,500		$3,000		$3,500		$5,000		$5,500		$1,500	
	Single		Single		Single		Single		Single		Single		Single		Single	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	145.40	145.40	173.52	173.52	145.81	145.81	131.62	131.62	123.02	123.02	93.28	93.28	91.10	91.10	139.51	139.51
1	120.99	120.99	144.52	144.52	120.74	120.74	108.68	108.68	101.40	101.40	76.49	76.49	74.70	74.70	116.19	116.19
2	93.54	93.54	112.20	112.20	92.42	92.42	82.60	82.60	76.98	76.98	57.87	57.87	56.51	56.51	90.21	90.21
3	88.02	88.02	105.57	105.57	88.86	88.86	77.63	77.63	72.38	72.38	54.37	54.37	53.10	53.10	84.88	84.88
4	87.74	87.19	105.24	104.58	88.45	85.92	77.28	76.68	72.04	71.37	54.04	53.29	52.78	52.05	84.61	84.08
5	87.74	87.19	105.24	104.58	86.45	85.92	77.28	76.68	72.04	71.37	54.04	53.29	52.78	52.05	84.61	84.08
6	86.91	86.91	104.25	104.25	85.51	85.51	76.32	76.32	70.93	70.93	52.96	52.96	51.72	51.72	83.81	83.81
7	86.91	86.91	104.25	104.25	85.51	85.51	76.32	76.32	70.93	70.93	52.96	52.96	51.72	51.72	83.81	83.81
8	86.91	86.91	104.25	104.25	85.51	85.51	76.32	76.32	70.93	70.93	52.96	52.96	51.72	51.72	83.81	83.81
9	86.91	86.91	104.25	104.25	85.51	85.51	76.32	76.32	70.93	70.93	52.96	52.96	51.72	51.72	83.81	83.81
10	86.91	86.91	104.25	104.25	85.51	85.51	76.32	76.32	70.93	70.93	52.96	52.96	51.72	51.72	83.81	83.81
11	86.91	86.91	104.25	104.25	85.51	85.51	76.32	76.32	70.93	70.93	52.96	52.96	51.72	51.72	83.81	83.81
12	86.91	86.91	104.25	104.25	85.51	85.51	76.32	76.32	70.93	70.93	52.96	52.96	51.72	51.72	83.81	83.81
13	85.26	85.26	102.26	102.26	83.88	83.88	74.87	74.87	69.69	69.69	52.05	52.05	50.83	50.83	82.22	82.22
14	85.26	85.26	102.26	102.26	83.88	83.88	74.87	74.87	69.69	69.69	52.05	52.13	50.83	50.91	82.22	82.22
15	85.26	93.12	102.26	111.70	83.88	91.87	74.87	82.11	69.69	76.42	52.05	57.12	50.83	55.78	82.22	89.81
16	85.26	94.78	102.26	113.69	83.88	93.63	74.87	83.80	69.69	77.99	52.05	58.36	50.83	57.00	82.22	91.41
17	85.26	94.78	102.26	113.69	83.88	93.63	74.87	83.80	69.69	77.99	52.05	58.36	50.83	57.00	82.22	91.41
18	85.26	100.99	102.26	120.99	83.88	100.01	74.87	89.60	69.69	83.37	52.05	62.43	50.83	60.98	82.22	97.27
19	81.59	100.99	97.78	120.99	80.08	100.01	71.37	89.60	66.22	83.37	49.22	62.27	48.07	60.82	78.62	97.27
20	81.59	102.92	97.78	123.30	80.08	101.77	71.37	91.17	66.22	84.82	49.22	63.43	48.07	61.95	78.62	99.13
21	81.59	106.23	97.78	127.12	80.08	105.43	71.37	94.67	66.22	88.18	49.22	66.10	48.07	64.55	78.62	102.21
22	81.59	106.23	97.78	127.12	80.08	105.43	71.37	94.67	66.22	88.18	49.22	66.10	48.07	64.55	78.62	102.21
23	79.88	104.85	95.95	125.46	78.59	104.07	70.04	93.48	64.98	87.06	48.30	65.35	47.17	63.82	77.15	100.87
24	79.88	106.64	95.95	127.61	78.59	105.83	70.04	95.08	64.98	88.51	48.30	66.35	47.17	64.79	77.15	102.61
25	79.88	108.30	95.95	129.61	78.59	107.32	70.04	96.24	64.98	89.64	48.30	67.17	47.17	65.60	77.15	104.20
26	79.88	110.37	95.95	132.09	78.59	109.49	70.04	98.17	64.98	91.49	48.30	68.51	47.17	66.90	77.15	106.20
27	79.88	112.99	95.95	135.24	78.59	112.06	70.04	100.46	64.98	93.56	48.30	70.00	47.17	68.36	77.15	108.73
28	79.88	116.98	95.95	140.05	78.59	115.99	70.04	104.09	64.98	96.92	48.30	72.50	47.17	70.80	77.15	112.60
29	79.88	122.64	95.95	146.84	78.59	121.42	70.04	108.80	64.98	101.29	48.30	75.74	47.17	73.97	77.15	118.06
30	79.88	125.40	95.95	150.32	78.59	123.85	70.04	110.79	65.10	102.86	48.38	76.57	47.26	74.78	77.15	120.86
31	80.70	132.16	97.12	158.44	78.87	130.36	70.04	116.53	65.10	108.24	48.38	80.48	47.26	78.60	78.09	127.38
32	82.49	136.44	99.28	163.75	80.49	134.56	71.48	120.27	66.22	111.71	48.89	83.05	47.74	81.11	79.82	131.65
33	85.81	142.37	103.25	170.87	83.74	140.39	74.39	125.34	68.90	116.42	50.96	86.55	49.77	84.52	83.02	137.38
34	89.12	146.92	107.23	176.34	87.14	144.72	77.40	129.21	71.71	119.89	52.88	89.04	51.64	86.96	86.21	141.78
35	90.50	148.99	108.89	178.83	88.49	146.89	78.61	131.26	72.83	121.81	53.79	90.53	52.53	88.42	87.54	143.78
36	93.54	150.51	112.53	180.64	91.61	148.38	81.51	132.59	75.52	123.14	55.62	91.45	54.32	89.31	90.48	145.24
37	97.81	153.68	117.67	184.29	95.81	151.50	85.13	135.36	78.77	125.60	58.03	93.20	56.68	91.02	94.60	148.17
38	104.16	157.41	125.30	188.94	102.03	155.16	90.68	138.63	83.92	128.63	61.85	95.52	60.41	93.29	100.73	151.90
39	113.13	165.41	136.07	198.38	110.85	163.16	98.53	145.75	91.21	135.24	67.17	100.35	65.60	98.00	109.40	159.50
40	117.13	174.52	140.71	209.16	114.78	172.50	102.16	154.44	94.68	143.53	69.92	106.92	68.28	104.41	113.13	168.16
41	123.20	177.96	148.00	213.30	120.74	175.83	107.47	157.34	99.50	146.22	73.41	108.91	71.69	106.36	118.99	171.49
42	126.51	182.58	152.14	218.61	123.99	180.36	110.37	161.44	102.30	149.91	75.49	111.57	73.72	108.95	122.32	175.76
43	129.68	188.45	155.79	225.89	127.11	186.46	113.14	166.88	104.77	155.07	77.32	115.40	75.51	112.70	125.25	181.62
44	133.56	192.59	160.93	230.86	131.44	190.52	117.13	170.63	108.46	158.43	79.98	117.89	78.11	115.13	129.98	185.62
45	137.41	194.10	165.07	232.52	134.83	192.15	120.03	172.20	111.15	159.89	81.97	118.81	80.06	116.03	132.72	184.95
46	143.89	198.52	172.86	237.83	141.34	196.76	125.95	176.30	116.64	163.70	85.88	121.80	83.87	118.95	138.98	191.22
47	148.86	201.14	178.83	240.81	146.34	199.74	130.41	179.31	120.67	166.50	88.88	123.71	86.80	120.82	143.78	193.61
48	157.55	203.07	189.10	243.13	154.89	201.63	138.14	181.01	127.85	168.07	94.20	124.79	92.00	121.87	152.03	195.48
49	166.79	208.46	200.04	249.43	164.37	207.06	146.84	185.84	135.92	172.44	99.93	128.03	97.59	125.04	160.84	200.54
50	188.45	215.76	225.56	258.05	187.00	214.78	167.85	193.08	155.86	179.27	115.81	133.27	113.10	130.15	181.35	207.47
51	198.38	222.66	237.16	266.16	197.57	221.83	177.63	199.60	164.93	185.33	122.46	137.76	119.60	134.54	190.68	214.00
52	208.31	229.15	249.09	273.79	207.93	228.87	186.44	206.13	172.99	191.98	128.36	142.08	125.36	138.76	200.27	220.13
53	217.14	234.53	259.70	279.92	216.27	234.56	194.53	211.56	180.51	196.91	133.85	145.74	130.72	142.33	208.80	225.06
54	228.46	243.96	272.63	290.97	228.74	243.78	206.49	220.13	191.49	204.26	141.91	151.56	138.60	148.02	219.20	233.45
55	239.90	253.56	286.06	302.46	240.80	254.49	217.72	229.91	201.91	213.54	149.56	158.80	146.07	154.59	229.99	243.18
56	248.60	259.36	296.17	309.25	250.15	260.31	226.41	235.94	209.98	218.27	155.39	161.79	151.75	158.00	238.12	248.65
57	259.08	265.84	308.43	316.71	261.26	267.63	236.80	242.35	219.50	224.76	162.37	166.61	158.57	162.71	247.98	254.64
58	271.64	270.54	323.68	322.18	273.46	272.51	247.67	246.82	229.58	228.91	169.77	169.68	165.80	165.72	260.23	259.04
59	282.40	276.74	336.28	329.48	284.71	278.87	258.05	252.74	239.11	234.40	176.75	173.68	172.62	169.61	270.96	264.90
60	305.71	295.65	363.45	351.65	309.78	298.66	281.60	271.09	260.96	251.43	192.80	186.23	188.29	181.83	292.21	282.89
61	315.51	303.23	374.39	360.47	321.02	307.33	292.71	279.42	271.26	259.16	200.44	192.05	195.76	187.55	301.01	289.82
62	325.85	309.30	386.32	367.43	332.81	313.71	304.06	285.46	281.69	264.77	208.01	196.13	203.15	191.54	310.61	295.42
63	334.68	319.24	397.26	378.70	340.40	325.49	309.37	297.05	287.07	275.41	213.00	203.86	208.02	199.08	319.40	304.48
64	341.86	333.72	407.70	395.28	343.24	341.48	309.37	309.37	287.07	287.07	213.00	213.00	208.02	208.02	327.80	317.80
65	353.44	353.44	424.61	424.61	347.17	347.17	309.37	309.37	287.07	287.07	213.00	213.00	208.02	208.02	341.39	341.39

Rates shown are based on our Preferred risk tier - .573

Kentucky Individual HSA Plus - Area 3																
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$1,750		$1,500		$2,500		$3,000		$3,500		$5,000		$5,500		$1,500	
	Single		Single		Single		Single		Single		Single		Single		Single	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	149.75	149.75	178.70	178.70	150.16	150.16	135.55	135.55	126.70	126.70	96.06	96.06	93.82	93.82	143.67	143.67
1	124.60	124.60	148.84	148.84	124.34	124.34	111.92	111.92	104.43	104.43	78.77	78.77	76.93	76.93	119.67	119.67
2	96.93	96.93	115.55	115.55	95.18	95.18	85.06	85.06	79.27	79.27	59.59	59.59	58.20	58.20	92.91	92.91
3	90.64	90.64	108.72	108.72	89.45	89.45	79.96	79.96	74.54	74.54	55.99	55.99	54.69	54.69	87.41	87.41
4	90.36	89.79	108.38	107.70	89.03	88.48	79.58	78.97	74.20	73.50	55.66	54.88	54.35	53.60	87.14	86.59
5	90.36	89.79	108.38	107.70	89.03	88.48	79.58	78.97	74.20	73.50	55.66	54.88	54.35	53.60	87.14	86.59
6	89.50	89.50	107.36	107.36	88.06	88.06	78.59	78.59	73.05	73.05	54.54	54.54	53.27	53.27	86.32	86.32
7	89.50	89.50	107.36	107.36	88.06	88.06	78.59	78.59	73.05	73.05	54.54	54.54	53.27	53.27	86.32	86.32
8	89.50	89.50	107.36	107.36	88.06	88.06	78.59	78.59	73.05	73.05	54.54	54.54	53.27	53.27	86.32	86.32
9	89.50	89.50	107.36	107.36	88.06	88.06	78.59	78.59	73.05	73.05	54.54	54.54	53.27	53.27	86.32	86.32
10	89.50	89.50	107.36	107.36	88.06	88.06	78.59	78.59	73.05	73.05	54.54	54.54	53.27	53.27	86.32	86.32
11	89.50	89.50	107.36	107.36	88.06	88.06	78.59	78.59	73.05	73.05	54.54	54.54	53.27	53.27	86.32	86.32
12	89.50	89.50	107.36	107.36	88.06	88.06	78.59	78.59	73.05	73.05	54.54	54.54	53.27	53.27	86.32	86.32
13	87.80	87.80	105.31	105.31	86.39	86.39	77.10	77.10	71.77	71.77	53.60	53.60	52.34	52.34	84.67	84.67
14	87.80	87.80	105.31	105.31	86.39	86.39	77.10	77.10	71.77	71.77	53.60	53.68	52.34	52.42	84.67	84.67
15	87.80	95.90	105.31	115.04	86.39	94.62	77.10	84.56	71.77	78.70	53.60	58.82	52.34	57.44	84.67	92.49
16	87.80	97.60	105.31	117.09	86.39	96.45	77.10	86.31	71.77	80.31	53.60	60.10	52.34	58.70	84.67	94.14
17	87.80	97.60	105.31	117.09	86.39	96.45	77.10	86.31	71.77	80.31	53.60	60.10	52.34	58.70	84.67	94.14
18	87.80	104.00	105.31	124.60	86.39	102.99	77.10	92.28	71.77	85.85	53.60	64.30	52.34	62.80	84.67	100.17
19	83.82	104.00	100.70	124.60	82.48	102.99	73.50	92.28	68.19	85.85	50.69	64.13	49.50	62.63	80.96	100.17
20	83.82	105.99	100.70	126.98	82.48	104.81	73.50	93.89	68.19	87.35	50.69	65.33	49.50	63.80	80.96	102.10
21	83.82	109.40	100.70	130.91	82.48	108.57	73.50	97.50	68.19	90.81	50.69	68.07	49.50	66.47	80.96	105.25
22	83.82	109.40	100.70	130.91	82.48	108.57	73.50	97.50	68.19	90.81	50.69	68.07	49.50	66.47	80.96	105.25
23	82.27	107.98	98.82	129.21	80.94	107.17	72.13	96.25	66.93	89.66	49.74	67.30	48.58	65.72	79.45	103.88
24	82.27	109.82	98.82	131.42	80.94	108.99	72.13	97.87	66.93	91.16	49.74	68.52	48.58	66.73	79.45	105.67
25	82.27	111.53	98.82	133.47	80.94	110.53	72.13	99.11	66.93	92.32	49.74	69.18	48.58	67.56	79.45	107.31
26	82.27	113.66	98.82	136.03	80.94	112.76	72.13	101.11	66.93	94.16	49.74	70.55	48.58	68.90	79.45	109.37
27	82.27	116.36	98.82	139.28	80.94	115.41	72.13	103.47	66.93	96.35	49.74	72.09	48.58	70.40	79.45	111.98
28	82.27	120.48	98.82	144.22	80.94	119.46	72.13	107.20	66.93	99.81	49.74	74.66	48.58	72.91	79.45	115.96
29	82.27	126.30	98.82	151.23	80.94	125.04	72.13	112.04	66.93	104.31	49.74	78.00	48.58	76.17	79.45	121.58
30	82.27	129.15	98.82	154.81	80.94	127.55	72.13	114.04	67.04	105.93	49.83	78.86	48.66	77.01	79.45	124.47
31	83.11	136.10	100.02	163.17	81.22	134.25	72.13	120.01	67.04	111.47	49.83	82.88	48.66	80.94	80.41	131.19
32	84.96	140.51	102.24	168.63	82.90	138.58	73.62	123.86	68.19	115.05	50.54	85.53	49.17	83.54	82.20	135.58
33	88.37	146.62	106.33	175.97	86.24	144.58	76.60	129.09	70.96	119.89	52.48	89.13	51.25	87.04	85.49	141.48
34	91.78	151.31	110.43	181.60	89.73	149.04	79.71	133.08	73.85	123.47	54.46	91.70	53.19	89.55	88.79	146.01
35	93.20	153.44	112.14	184.16	91.13	151.28	80.95	135.18	75.01	125.54	55.40	93.24	54.10	91.06	90.16	148.06
36	96.33	155.00	115.89	186.04	94.34	152.81	83.94	136.54	77.77	126.81	57.28	94.18	55.94	91.98	93.18	149.58
37	100.78	158.27	121.18	189.79	98.66	156.02	87.67	139.41	81.12	129.35	59.76	95.98	58.37	93.74	97.43	152.60
38	107.27	162.11	129.04	194.57	105.08	159.79	93.39	142.76	86.43	132.47	63.70	98.37	62.22	96.07	103.74	156.43
39	116.50	170.35	140.13	204.50	114.15	168.03	101.48	150.10	93.93	139.28	69.18	103.35	67.56	100.93	112.66	164.26
40	120.82	179.73	144.91	215.40	118.20	177.65	105.21	159.05	97.50	147.81	72.01	110.11	70.32	107.53	116.50	173.18
41	126.87	183.27	152.42	219.67	124.34	181.14	110.68	162.04	102.47	150.58	75.60	112.16	73.84	109.53	122.54	176.61
42	130.28	187.82	156.68	225.13	127.69	185.74	113.68	166.26	105.35	154.39	77.74	114.90	75.92	112.22	125.97	181.00
43	133.55	194.08	160.44	232.63	130.90	192.02	116.52	171.86	107.89	159.70	79.62	118.84	77.76	116.06	128.99	187.04
44	137.95	198.34	165.73	237.75	135.37	196.21	120.63	175.72	111.70	163.16	82.37	121.41	80.44	118.57	133.25	191.16
45	141.51	199.50	170.00	239.46	138.86	197.89	123.81	177.54	114.47	164.66	84.42	122.35	82.45	119.49	136.68	192.53
46	148.19	204.44	178.02	244.93	145.55	202.63	129.70	181.56	120.12	168.59	88.44	125.43	86.37	122.50	143.13	196.92
47	153.30	207.15	184.16	248.00	150.72	205.71	134.31	184.67	124.28	171.47	91.53	127.40	89.39	124.42	148.06	199.39
48	162.25	209.13	194.75	250.38	159.51	207.66	142.26	186.41	131.66	173.09	97.01	128.51	94.74	125.51	156.57	201.31
49	171.77	214.67	206.01	256.88	169.28	213.24	151.22	191.39	139.97	177.59	102.92	131.85	100.51	128.77	165.63	206.53
50	194.08	222.20	232.29	265.75	192.59	221.19	172.86	198.85	160.51	184.62	119.26	137.24	116.48	134.04	186.77	213.66
51	204.30	229.31	244.25	274.11	203.47	228.45	182.93	205.56	169.85	190.85	126.12	141.87	123.17	138.55	196.37	220.39
52	214.53	235.99	256.53	281.97	213.52	235.71	192.01	212.27	178.16	197.09	132.20	146.32	129.11	142.90	206.26	226.70
53	223.62	241.53	267.45	288.28	222.73	241.57	200.34	217.87	185.89	202.17	137.85	150.09	134.63	146.58	215.04	231.77
54	235.28	250.62	280.76	299.03	235.57	251.05	212.65	226.70	197.20	210.36	146.15	158.09	142.73	152.44	225.74	240.42
55	247.07	261.13	294.60	311.49	247.99	262.09	224.21	236.78	207.94	219.71	154.03	163.02	150.43	159.21	236.86	250.44
56	256.02	267.10	305.01	318.48	257.62	268.08	233.17	242.37	216.24	224.78	160.03	166.61	156.28	162.72	245.23	256.07
57	266.82	273.78	317.63	326.17	269.06	275.62	243.87	249.58	226.05	231.47	167.21	171.58	163.31	167.57	255.98	262.24
58	279.74	278.61	333.34	331.80	281.62	280.64	255.06	254.19	236.44	235.74	174.83	174.75	170.75	170.66	268.00	266.77
59	290.83	285.00	346.31	339.91	293.20	287.20	265.75	260.28	246.25	241.39	182.02	178.86	177.77	174.67	278.43	272.81
60	314.84	304.47	374.90	362.35	319.02	307.57	290.00	279.18	268.74	258.94	198.56	191.79	193.91	187.31	300.93	291.33
61	324.93	312.28	385.57	371.23	330.60	316.51	301.44	287.76	279.36	266.90	206.43	197.78	201.60	193.15	309.99	298.46
62	335.58	318.53	397.86	378.40	342.75	323.07	313.13	293.98	290.09	272.67	214.22	201.58	209.21	197.26	319.87	304.23
63	344.67	328.76	409.12	390.01	350.59	335.21	318.60	305.92	295.63	283.64	219.36	209.94	214.23	205.03	328.93	313.56
64	352.06	343.68	419.87	407.08	353.49	351.67	318.60	318.60	295.63	295.63	219.36	219.36	214.23	214.23	337.58	327.29
65	363.99	363.99	437.28	437.28	357.58	357.58	318.60	318.60	295.63	295.63	219.36	219.36	214.23	214.23	351.58	351.58

Rates shown are based on our Preferred risk tier - .573

	Kentucky Individual HSA Plus - Area 4															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$1,750		$1,500		$2,500		$3,000		$3,500		$5,000		$5,500		$2,500	
	Single		Single		Single		Single		Single		Single		Single		Single	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	147.63	147.63	176.18	176.18	148.04	148.04	133.64	133.64	124.91	124.91	94.71	94.71	92.49	92.49	141.65	141.65
1	122.85	122.85	146.74	146.74	122.59	122.59	110.34	110.34	102.96	102.96	77.66	77.66	75.84	75.84	117.97	117.97
2	94.97	94.97	113.92	113.92	93.83	93.83	83.86	83.86	78.16	78.16	58.76	58.76	57.38	57.38	91.59	91.59
3	89.37	89.37	107.19	107.19	88.19	88.19	78.84	78.84	73.49	73.49	55.20	55.20	53.91	53.91	86.18	86.18
4	89.08	88.53	106.85	106.18	87.78	87.23	78.47	77.85	73.15	72.47	54.87	54.11	53.59	52.84	85.91	85.37
5	89.08	88.53	106.85	106.18	87.78	87.23	78.47	77.85	73.15	72.47	54.87	54.11	53.59	52.84	85.91	85.37
6	88.24	88.24	105.84	105.84	86.82	86.82	77.49	77.49	72.01	72.01	53.78	53.78	52.52	52.52	85.10	85.10
7	88.24	88.24	105.84	105.84	86.82	86.82	77.49	77.49	72.01	72.01	53.78	53.78	52.52	52.52	85.10	85.10
8	88.24	88.24	105.84	105.84	86.82	86.82	77.49	77.49	72.01	72.01	53.78	53.78	52.52	52.52	85.10	85.10
9	88.24	88.24	105.84	105.84	86.82	86.82	77.49	77.49	72.01	72.01	53.78	53.78	52.52	52.52	85.10	85.10
10	88.24	88.24	105.84	105.84	86.82	86.82	77.49	77.49	72.01	72.01	53.78	53.78	52.52	52.52	85.10	85.10
11	88.24	88.24	105.84	105.84	86.82	86.82	77.49	77.49	72.01	72.01	53.78	53.78	52.52	52.52	85.10	85.10
12	88.24	88.24	105.84	105.84	86.82	86.82	77.49	77.49	72.01	72.01	53.78	53.78	52.52	52.52	85.10	85.10
13	86.56	86.56	103.83	103.83	85.17	85.17	76.01	76.01	70.76	70.76	52.84	52.84	51.61	51.61	83.48	83.48
14	86.56	86.56	103.83	103.83	85.17	85.17	76.01	76.01	70.76	70.76	52.84	52.93	51.61	51.69	83.48	83.48
15	86.56	94.55	103.83	113.41	85.17	93.28	76.01	83.97	70.76	77.59	52.84	57.99	51.61	56.64	83.48	91.19
16	86.56	96.23	103.83	115.44	85.17	95.07	76.01	85.09	70.76	79.18	52.84	59.25	51.61	57.87	83.48	92.81
17	86.56	96.23	103.83	115.44	85.17	95.07	76.01	85.09	70.76	79.18	52.84	59.25	51.61	57.87	83.48	92.81
18	86.56	102.53	103.83	122.85	85.17	101.54	76.01	90.98	70.76	84.64	52.84	63.40	51.61	61.91	83.48	98.76
19	82.64	102.53	99.28	122.85	81.31	101.54	72.46	90.98	67.23	84.64	49.98	63.22	48.80	61.75	79.82	98.76
20	82.64	104.49	99.28	125.19	81.31	103.33	72.46	92.57	67.23	86.12	49.98	64.41	48.80	62.90	79.82	100.66
21	82.64	107.85	99.28	129.07	81.31	107.04	72.46	96.12	67.23	89.53	49.98	67.11	48.80	65.53	79.82	103.77
22	82.64	107.85	99.28	129.07	81.31	107.04	72.46	96.12	67.23	89.53	49.98	67.11	48.80	65.53	79.82	103.77
23	81.10	106.46	97.43	127.38	79.80	105.67	71.11	94.89	65.98	88.40	49.04	66.55	47.90	64.79	78.33	102.41
24	81.10	108.27	97.43	129.57	79.80	107.45	71.11	96.49	65.98	89.87	49.04	67.36	47.90	65.79	78.33	104.18
25	81.10	109.95	97.43	131.60	79.80	108.97	71.11	97.72	65.98	91.02	49.04	68.20	47.90	66.61	78.33	105.80
26	81.10	112.05	97.43	134.12	79.80	111.17	71.11	99.68	65.98	92.83	49.04	69.55	47.90	67.93	78.33	107.83
27	81.10	114.72	97.43	137.31	79.80	113.78	71.11	102.01	65.98	94.99	49.04	71.07	47.90	69.41	78.33	110.40
28	81.10	118.78	97.43	142.19	79.80	117.77	71.11	105.69	65.98	98.41	49.04	73.61	47.90	71.88	78.33	114.32
29	81.10	124.52	97.43	149.09	79.80	123.28	71.11	110.46	65.98	102.84	49.04	76.90	47.90	75.10	78.33	119.87
30	81.10	127.33	97.43	152.62	79.80	125.76	71.11	112.43	66.10	104.44	49.13	77.74	47.98	75.93	78.33	122.71
31	81.94	134.19	98.61	160.87	80.08	132.36	71.11	118.31	68.10	109.90	49.13	81.72	47.98	79.80	79.29	129.34
32	83.76	138.59	100.80	166.26	81.73	136.63	72.58	122.11	67.23	113.43	49.63	84.33	48.48	82.36	81.04	133.67
33	87.12	144.56	104.84	173.49	85.03	142.55	75.53	127.26	69.96	118.20	51.74	87.88	50.53	85.82	84.29	139.49
34	90.49	149.18	108.88	179.04	88.47	146.94	78.59	131.19	72.81	121.73	53.69	90.41	52.44	88.29	87.54	143.95
35	91.89	151.28	110.55	181.57	89.84	149.15	79.81	133.27	73.95	123.77	54.62	91.92	53.34	89.78	88.89	145.98
36	94.97	152.82	114.26	183.42	93.01	150.66	82.76	134.61	76.68	125.02	56.47	92.85	55.15	90.68	91.87	147.47
37	99.31	156.04	119.48	187.12	97.28	153.82	86.44	137.44	79.98	127.53	58.92	94.63	57.55	92.41	96.08	150.45
38	105.75	159.82	127.22	191.83	103.60	157.54	92.08	140.75	85.21	130.60	62.80	96.99	61.34	94.72	102.28	154.23
39	114.86	167.95	138.16	201.43	112.54	165.65	100.05	147.99	92.61	137.31	68.20	101.89	66.61	99.50	111.08	161.99
40	118.92	177.19	142.87	212.97	116.54	175.15	103.72	156.81	96.13	145.73	70.99	108.55	69.33	106.02	114.86	170.74
41	125.09	180.69	150.27	216.57	122.59	178.59	109.12	159.75	101.03	148.46	74.54	110.58	72.79	107.99	120.81	174.12
42	128.44	185.18	154.48	221.96	125.89	183.19	112.06	163.92	103.87	152.21	76.65	113.28	74.85	110.63	124.20	178.48
43	131.67	191.34	158.18	229.35	129.06	189.32	114.88	169.44	106.37	157.45	78.51	117.17	76.67	114.43	127.17	184.41
44	136.01	195.54	163.40	234.40	133.46	193.44	118.93	173.24	110.12	160.86	81.21	119.70	79.31	116.90	131.87	188.47
45	139.51	197.08	167.60	236.09	136.90	195.10	121.87	174.83	112.85	162.34	83.23	120.63	81.29	117.81	134.75	189.82
46	146.10	201.56	175.51	241.47	143.50	199.78	127.88	179.00	118.45	166.21	87.20	123.66	85.16	120.78	141.11	194.14
47	151.14	204.22	181.57	244.50	148.59	202.81	132.41	182.07	122.52	169.05	90.24	125.61	88.13	122.67	145.98	196.58
48	159.96	206.19	192.00	246.85	157.26	204.73	140.26	183.78	129.81	170.65	95.65	126.70	93.40	123.74	154.37	198.48
49	169.35	211.65	203.11	253.25	166.89	210.23	149.09	188.69	138.00	175.09	101.47	130.00	99.09	126.96	163.30	203.62
50	191.34	219.08	229.02	262.00	189.88	218.07	170.42	196.05	158.25	182.02	117.59	135.31	114.84	132.15	184.13	210.65
51	201.43	226.08	240.80	270.25	200.60	225.23	180.35	202.66	167.46	188.17	124.34	139.68	121.44	136.60	193.61	217.28
52	211.51	232.66	252.92	277.99	210.51	232.39	189.30	209.28	175.65	194.31	130.33	144.26	127.29	140.89	203.35	223.50
53	220.47	238.12	263.68	284.21	219.59	238.16	197.51	214.80	183.27	199.32	135.90	147.98	132.73	144.52	212.00	228.51
54	231.95	247.09	276.81	294.82	232.24	247.52	209.65	223.50	194.42	207.40	144.09	153.88	140.72	150.29	222.55	237.03
55	243.58	257.45	290.44	307.11	244.49	258.39	221.06	233.43	205.00	216.61	151.86	160.72	148.31	156.96	233.51	246.91
56	252.41	269.33	300.71	314.00	255.98	264.81	229.88	238.95	213.20	221.61	157.77	164.27	154.03	160.43	241.77	252.46
57	263.05	269.92	313.16	321.57	265.26	271.73	240.43	246.06	222.87	228.21	164.86	169.17	161.00	165.21	251.78	258.55
58	275.80	274.68	328.64	327.13	277.65	276.68	251.46	250.60	233.10	232.42	172.97	172.29	168.34	168.26	264.23	269.01
59	286.73	280.99	341.43	334.53	289.07	283.15	262.00	256.61	242.77	238.00	179.46	176.34	175.26	172.22	274.51	268.97
60	310.41	300.18	369.03	357.25	314.53	303.24	285.92	275.25	264.56	255.29	195.75	189.08	191.18	184.67	296.69	287.25
61	320.35	307.88	380.13	366.00	325.95	312.05	297.19	283.70	275.42	263.14	203.52	194.99	198.76	190.43	305.63	294.26
62	330.85	314.04	392.25	373.06	337.92	318.51	308.72	289.84	285.01	268.83	211.20	199.13	206.26	194.48	315.37	299.95
63	339.81	324.13	403.36	384.51	345.62	330.48	314.11	301.61	291.47	279.64	216.27	206.98	211.21	202.14	324.30	309.14
64	347.10	338.84	413.95	401.34	348.51	346.72	314.11	314.11	291.47	291.47	216.27	216.27	211.21	211.21	332.82	322.67
65	358.86	358.86	431.12	431.12	352.50	352.50	314.11	314.11	291.47	291.47	216.27	216.27	211.21	211.21	346.62	346.62

Rates shown are based on our Preferred risk tier - .573

Kentucky Individual HSA Plus - Area 5																
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$1,750		$1,500		$2,500		$3,000		$3,500		$5,000		$5,500		$1,500	
	Single		Single		Single		Single		Single		Single		Single		Single	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	144.37	144.37	172.29	172.29	144.77	144.77	130.68	130.68	122.15	122.15	92.62	92.62	90.45	90.45	138.52	138.52
1	120.13	120.13	143.50	143.50	119.88	119.88	107.91	107.91	100.68	100.68	75.95	75.95	74.16	74.16	115.37	115.37
2	92.87	92.87	111.41	111.41	91.76	91.76	82.01	82.01	76.43	76.43	57.45	57.45	56.11	56.11	89.57	89.57
3	87.39	87.39	104.82	104.82	86.24	86.24	77.10	77.10	71.87	71.87	53.98	53.98	52.72	52.72	84.28	84.28
4	87.12	86.57	104.49	103.83	85.84	85.30	76.73	76.13	71.53	70.86	53.66	52.91	52.40	51.67	84.01	83.49
5	87.12	86.57	104.49	103.83	85.84	85.30	76.73	76.13	71.53	70.86	53.66	52.91	52.40	51.67	84.01	83.49
6	86.29	86.29	103.51	103.51	84.90	84.90	75.77	75.77	70.42	70.42	52.58	52.58	51.35	51.35	83.22	83.22
7	86.29	86.29	103.51	103.51	84.90	84.90	75.77	75.77	70.42	70.42	52.58	52.58	51.35	51.35	83.22	83.22
8	86.29	86.29	103.51	103.51	84.90	84.90	75.77	75.77	70.42	70.42	52.58	52.58	51.35	51.35	83.22	83.22
9	86.29	86.29	103.51	103.51	84.90	84.90	75.77	75.77	70.42	70.42	52.58	52.58	51.35	51.35	83.22	83.22
10	86.29	86.29	103.51	103.51	84.90	84.90	75.77	75.77	70.42	70.42	52.58	52.58	51.35	51.35	83.22	83.22
11	86.29	86.29	103.51	103.51	84.90	84.90	75.77	75.77	70.42	70.42	52.58	52.58	51.35	51.35	83.22	83.22
12	86.29	86.29	103.51	103.51	84.90	84.90	75.77	75.77	70.42	70.42	52.58	52.58	51.35	51.35	83.22	83.22
13	84.65	84.65	101.54	101.54	83.29	83.29	74.34	74.34	69.20	69.20	51.67	51.67	50.47	50.47	81.64	81.64
14	84.65	84.65	101.54	101.54	83.29	83.29	74.34	74.34	69.20	69.20	51.67	51.75	50.47	50.54	81.64	81.64
15	84.65	92.47	101.54	110.91	83.29	91.22	74.34	81.53	69.20	75.87	51.67	56.71	50.47	55.38	81.64	89.18
16	84.65	94.10	101.54	112.89	83.29	92.97	74.34	83.21	69.20	77.44	51.67	57.95	50.47	56.60	81.64	90.76
17	84.65	94.10	101.54	112.89	83.29	92.97	74.34	83.21	69.20	77.44	51.67	57.95	50.47	56.60	81.64	90.76
18	84.65	100.27	101.54	120.13	83.29	99.30	74.34	88.96	69.20	82.77	51.67	61.99	50.47	60.54	81.64	96.58
19	80.82	100.27	97.09	120.13	79.52	99.30	70.86	88.96	65.75	82.77	48.87	61.83	47.73	60.38	78.06	96.58
20	80.82	102.18	97.09	122.43	79.52	101.05	70.86	90.52	65.75	84.21	48.87	62.98	47.73	61.51	78.06	98.43
21	80.82	105.47	97.09	126.21	79.52	104.68	70.86	94.00	65.75	87.55	48.87	65.63	47.73	64.09	78.06	101.48
22	80.82	105.47	97.09	126.21	79.52	104.68	70.86	94.00	65.75	87.55	48.87	65.63	47.73	64.09	78.06	101.48
23	79.31	104.10	95.28	124.57	78.04	103.33	69.54	92.80	64.53	86.44	47.96	64.89	46.84	63.36	76.60	100.15
24	79.31	105.88	95.28	126.71	78.04	105.08	69.54	94.36	64.53	87.89	47.96	65.87	46.84	64.33	76.60	101.87
25	79.31	107.52	95.28	128.68	78.04	106.56	69.54	95.56	64.53	89.00	47.96	66.70	46.84	65.14	76.60	103.46
26	79.31	109.58	95.28	131.15	78.04	108.72	69.54	97.48	64.53	90.78	47.96	68.02	46.84	66.43	76.60	105.45
27	79.31	112.19	95.28	134.28	78.04	111.27	69.54	99.75	64.53	92.89	47.96	69.50	46.84	67.88	76.60	107.96
28	79.31	116.15	95.28	139.05	78.04	115.17	69.54	103.35	64.53	96.23	47.96	71.98	46.84	70.30	76.60	111.80
29	79.31	121.77	95.28	145.80	78.04	120.55	69.54	108.02	64.53	100.57	47.96	75.20	46.84	73.44	76.60	117.22
30	79.31	124.51	95.28	149.26	78.04	122.98	69.54	109.95	64.53	102.13	48.04	76.03	46.92	74.25	76.60	120.00
31	80.13	131.22	96.43	157.31	78.31	129.43	69.54	115.70	64.63	107.47	48.04	79.91	46.92	78.04	77.53	126.48
32	81.91	135.47	98.57	162.58	79.92	133.61	70.98	119.41	65.75	110.92	48.54	82.46	47.40	80.54	79.25	130.71
33	85.20	141.36	102.52	169.66	83.15	139.39	73.85	124.45	68.42	115.59	50.60	85.93	49.42	83.92	82.43	136.40
34	88.49	145.88	106.47	175.09	86.52	143.69	76.85	128.29	71.20	119.04	52.50	88.41	51.28	86.35	85.60	140.77
35	89.66	147.93	108.11	177.58	87.86	145.85	78.05	130.33	72.31	121.04	53.41	89.89	52.16	87.79	88.92	142.75
36	92.87	149.44	111.73	179.97	90.95	147.93	80.93	131.64	74.98	122.26	55.22	90.80	53.94	88.68	89.83	144.21
37	97.12	152.60	116.83	182.98	95.13	150.42	84.52	134.40	78.21	124.71	57.62	92.53	56.27	90.37	93.93	147.12
38	103.42	156.29	124.41	187.59	101.31	154.06	90.04	137.64	83.33	127.72	61.41	94.84	59.98	92.63	100.02	150.83
39	112.38	164.23	135.10	196.97	110.06	161.99	97.83	144.72	90.56	134.28	66.70	99.64	65.14	97.31	108.62	158.37
40	116.29	178.28	139.71	207.67	113.96	171.28	101.43	153.95	94.01	142.51	69.42	106.15	67.80	103.67	112.33	166.97
41	122.52	176.70	146.95	211.79	119.88	174.64	106.71	156.22	98.79	145.18	72.89	108.14	71.18	105.61	118.15	170.28
42	125.61	181.09	151.06	217.05	123.11	179.08	109.58	160.30	101.57	148.85	74.95	110.78	73.20	108.19	121.45	174.51
43	128.76	187.11	154.68	224.29	126.20	185.14	112.34	165.69	104.02	153.97	76.77	114.58	74.97	111.90	124.36	180.33
44	133.00	191.22	159.79	229.22	130.51	189.17	116.30	169.41	107.69	157.81	79.41	117.05	77.56	114.31	128.47	184.30
45	136.43	192.72	163.90	230.87	133.88	190.79	119.18	170.97	110.86	158.76	81.39	117.96	79.49	115.20	131.77	185.62
46	142.87	197.11	171.63	236.14	140.33	195.36	125.05	175.03	115.81	162.54	85.27	120.93	83.27	118.11	138.00	189.86
47	147.80	199.71	177.56	239.10	145.91	198.33	129.49	178.04	119.82	165.92	88.24	122.83	86.18	119.96	142.75	192.24
48	156.43	201.69	187.76	241.40	153.79	200.21	137.16	179.72	126.94	166.87	93.53	123.91	91.34	121.01	150.96	194.09
49	165.60	208.97	198.62	247.66	163.21	205.59	145.79	184.52	134.95	171.22	99.22	127.12	96.90	124.15	159.69	199.11
50	187.11	214.23	223.96	256.22	185.67	213.25	166.66	191.71	154.75	178.00	114.99	132.32	112.30	129.23	180.07	206.00
51	196.97	221.08	235.48	264.27	196.17	220.25	176.57	198.18	163.76	184.01	121.60	136.79	118.75	133.58	189.32	212.48
52	206.84	227.52	247.33	271.85	205.86	227.25	185.12	204.66	171.77	190.02	127.45	141.07	124.47	137.77	198.85	218.57
53	215.60	232.86	257.86	277.93	214.74	232.90	193.15	210.06	179.22	194.91	132.90	144.71	129.80	141.32	207.32	223.46
54	226.83	241.63	270.69	288.30	227.11	242.05	205.02	218.57	190.13	202.81	140.91	150.49	137.61	146.96	217.64	231.80
55	238.20	251.76	284.02	300.32	239.09	252.68	216.18	228.28	200.48	211.82	148.50	157.17	145.03	153.50	228.96	241.45
56	246.84	257.52	294.06	307.06	248.37	258.46	224.80	233.68	208.49	216.71	154.29	160.63	150.68	156.88	236.43	246.88
57	257.24	263.95	306.23	314.47	259.40	265.73	235.12	240.63	217.94	223.17	161.21	165.43	157.45	161.56	246.22	252.83
58	269.71	268.62	321.38	319.89	271.52	270.57	245.91	245.07	227.95	227.29	168.57	168.48	164.62	164.54	258.99	257.20
59	280.39	274.78	333.89	327.14	282.68	276.90	256.22	250.94	237.41	232.74	175.49	172.44	171.39	168.41	268.44	263.02
60	303.55	293.54	360.87	349.35	307.57	296.54	279.60	269.17	259.10	249.65	191.43	184.91	186.95	180.59	290.14	280.88
61	313.26	301.07	371.73	357.91	318.74	305.15	290.63	277.44	269.34	257.92	199.02	190.68	194.97	186.23	298.87	287.75
62	323.54	307.11	383.58	364.82	330.45	311.48	301.90	283.43	279.69	262.89	206.53	194.73	201.71	190.18	308.40	293.32
63	332.31	316.97	394.44	376.01	337.88	323.18	307.17	294.94	285.03	273.46	211.48	202.41	206.54	197.67	317.13	302.31
64	339.43	331.35	404.81	392.47	340.81	339.06	307.17	307.17	285.03	285.03	211.48	211.48	206.54	206.54	325.47	315.55
65	350.93	350.93	421.60	421.60	344.71	344.71	307.17	307.17	285.03	285.03	211.48	211.48	206.54	206.54	338.96	338.96

Rates shown are based on our Preferred risk tier - .573

Kentucky Individual HSA Plus - Area 6																
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$1,750		$1,500		$2,500		$3,000		$3,500		$5,000		$5,500		$1,500	
	Single		Single		Single		Single		Single		Single		Single		Single	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	158.58	158.58	189.24	189.24	159.01	159.01	149.54	149.54	134.17	134.17	101.73	101.73	99.35	99.35	152.15	152.15
1	131.94	131.94	157.61	157.61	131.68	131.68	118.52	118.52	110.59	110.59	83.42	83.42	81.46	81.46	126.72	126.72
2	102.01	102.01	122.36	122.36	100.78	100.78	90.08	90.08	83.95	83.95	63.10	63.10	61.63	61.63	98.58	98.58
3	95.99	95.99	115.13	115.13	94.73	94.73	84.68	84.68	78.94	78.94	59.29	59.29	57.91	57.91	92.57	92.57
4	95.69	95.08	114.77	114.05	94.29	93.70	84.28	83.62	78.57	77.84	58.94	58.11	57.56	56.76	92.28	91.70
5	95.69	95.08	114.77	114.05	94.29	93.70	84.28	83.62	78.57	77.84	58.94	58.11	57.56	56.76	92.28	91.70
6	94.78	94.78	113.69	113.69	93.25	93.25	83.23	83.23	77.35	77.35	57.76	57.76	56.41	56.41	91.40	91.40
7	94.78	94.78	113.69	113.69	93.25	93.25	83.23	83.23	77.35	77.35	57.76	57.76	56.41	56.41	91.40	91.40
8	94.78	94.78	113.69	113.69	93.25	93.25	83.23	83.23	77.35	77.35	57.76	57.76	56.41	56.41	91.40	91.40
9	94.78	94.78	113.69	113.69	93.25	93.25	83.23	83.23	77.35	77.35	57.76	57.76	56.41	56.41	91.40	91.40
10	94.78	94.78	113.69	113.69	93.25	93.25	83.23	83.23	77.35	77.35	57.76	57.76	56.41	56.41	91.40	91.40
11	94.78	94.78	113.69	113.69	93.25	93.25	83.23	83.23	77.35	77.35	57.76	57.76	56.41	56.41	91.40	91.40
12	94.78	94.78	113.69	113.69	93.25	93.25	83.23	83.23	77.35	77.35	57.76	57.76	56.41	56.41	91.40	91.40
13	92.98	92.98	111.52	111.52	91.48	91.48	81.65	81.65	76.00	76.00	56.76	56.76	55.43	55.43	89.66	89.66
14	92.98	92.98	111.52	111.52	91.48	91.48	81.65	81.65	76.00	76.00	56.76	56.85	55.43	55.52	89.66	89.66
15	92.98	101.56	111.52	121.82	91.48	100.20	81.65	89.55	76.00	83.34	56.76	62.29	55.43	60.83	89.66	97.94
16	92.98	103.36	111.52	123.99	91.48	102.11	81.65	91.39	76.00	85.05	56.76	63.65	55.43	62.16	89.66	99.69
17	92.98	103.96	111.52	123.99	91.48	102.11	81.65	91.39	76.00	85.05	56.76	63.65	55.43	62.16	89.66	99.69
18	92.98	110.13	111.52	131.94	91.48	109.06	81.65	97.71	76.00	90.91	56.76	68.09	55.43	66.50	89.66	106.08
19	88.76	110.13	106.64	131.94	87.34	109.06	77.83	97.71	72.22	90.91	53.68	67.91	52.42	66.32	85.74	106.08
20	88.76	112.24	106.64	134.47	87.34	110.98	77.83	99.43	72.22	92.50	53.68	69.18	52.42	67.56	85.74	108.11
21	88.76	115.85	106.64	138.63	87.34	114.98	77.83	103.24	72.22	96.17	53.68	72.08	52.42	70.39	85.74	111.46
22	88.76	115.85	106.64	138.63	87.34	114.98	77.83	103.24	72.22	96.17	53.68	72.08	52.42	70.39	85.74	111.46
23	87.11	114.34	104.65	136.82	85.71	113.49	76.38	101.93	70.87	94.95	52.68	71.27	51.44	69.60	84.14	110.00
24	87.11	116.30	104.65	139.17	85.71	115.42	76.38	103.64	70.87	96.53	52.68	72.35	51.44	70.66	84.14	111.90
25	87.11	118.10	104.65	141.34	85.71	117.04	76.38	104.96	70.87	97.76	52.68	73.26	51.44	71.54	84.14	113.64
26	87.11	120.36	104.65	144.05	85.71	119.41	76.38	107.07	70.87	99.71	52.68	74.71	51.44	72.96	84.14	115.82
27	87.11	123.22	104.65	147.49	85.71	122.22	76.38	109.57	70.87	102.03	52.68	76.34	51.44	74.56	84.14	118.58
28	87.11	127.58	104.65	152.73	85.71	126.50	76.38	113.52	70.87	105.70	52.68	79.06	51.44	77.21	84.14	122.79
29	87.11	133.75	104.65	160.14	85.71	132.41	76.38	118.65	70.87	110.46	52.68	82.60	51.44	80.67	84.14	128.75
30	87.11	136.76	104.65	163.94	85.71	135.07	76.38	120.76	70.99	112.18	52.77	83.51	51.54	81.56	84.14	131.81
31	88.01	144.13	105.92	172.79	86.01	142.17	76.58	127.08	70.99	118.04	52.77	87.77	51.54	85.72	85.16	138.92
32	89.97	148.80	108.27	178.58	87.78	146.75	77.96	131.17	72.22	121.83	53.31	90.57	52.07	88.46	87.04	143.57
33	93.58	155.27	112.60	186.35	91.33	153.11	81.12	136.69	75.15	126.96	55.58	94.39	54.28	92.18	90.58	149.82
34	97.19	160.23	116.94	192.81	95.03	157.83	84.41	140.91	78.21	130.75	57.67	97.11	56.32	94.84	94.02	154.62
35	98.70	162.49	118.75	195.02	96.50	160.20	85.78	143.15	79.43	132.95	58.68	98.73	57.29	96.43	95.47	156.80
36	102.01	164.14	122.73	197.01	99.90	161.83	88.90	144.59	82.36	134.29	60.65	99.74	59.24	97.40	98.68	158.40
37	106.67	167.60	128.33	200.99	104.49	165.22	92.84	147.62	85.90	136.98	63.29	101.64	61.81	99.26	103.17	161.59
38	113.59	171.67	136.64	206.05	111.28	169.21	98.90	151.18	91.52	140.28	67.45	104.18	65.88	101.74	109.86	165.66
39	123.97	180.39	148.40	216.35	120.89	177.93	107.46	158.95	99.47	147.49	73.26	109.44	71.54	106.88	119.30	173.95
40	127.73	190.32	153.45	228.10	125.17	188.13	111.41	168.43	103.25	156.53	76.25	116.60	74.47	113.87	123.37	183.99
41	134.35	194.08	161.40	232.62	131.68	191.82	117.21	171.59	108.51	159.46	80.06	118.78	78.19	116.00	129.77	187.03
42	137.96	198.69	165.92	238.40	135.22	196.70	120.38	176.07	111.56	163.49	82.33	121.68	80.40	118.83	133.41	191.68
43	141.42	205.52	169.90	246.35	138.62	203.35	123.39	182.00	114.26	169.12	84.32	125.85	82.35	122.90	136.60	198.07
44	146.09	210.03	175.50	251.77	143.35	207.78	127.74	186.08	118.28	172.78	87.22	128.57	85.18	125.56	141.10	202.43
45	149.85	211.68	180.02	253.58	147.04	209.55	130.90	187.79	121.22	174.38	89.40	129.57	87.31	126.54	144.74	203.88
46	156.92	216.50	188.52	259.37	154.14	214.58	137.35	192.26	127.21	178.52	93.66	132.83	91.47	129.72	151.57	208.53
47	162.84	219.86	195.02	262.62	159.60	217.83	142.22	195.56	131.61	181.58	96.92	134.91	94.66	131.76	156.80	211.15
48	171.82	221.46	206.23	265.15	168.91	219.90	150.65	197.40	139.43	183.29	102.73	136.09	100.33	132.91	165.81	213.18
49	181.90	227.34	218.15	272.02	179.26	225.81	160.14	202.68	148.22	188.06	108.98	139.63	106.43	136.37	175.40	218.70
50	205.52	235.91	245.99	281.42	203.94	234.23	183.05	210.57	169.97	195.51	126.30	145.34	123.35	141.94	197.78	226.26
51	216.35	242.83	258.65	290.27	215.47	241.92	193.72	217.68	179.87	202.11	133.55	150.24	130.43	146.72	207.95	233.38
52	227.18	249.90	271.66	298.59	226.11	249.60	203.33	224.79	188.67	208.71	139.99	154.95	136.72	151.32	218.42	240.07
53	236.82	255.77	283.22	305.28	235.86	255.81	212.15	230.72	196.85	214.09	145.98	158.94	142.56	155.23	227.71	245.44
54	249.15	265.40	297.32	316.66	249.46	265.86	225.19	240.07	208.83	222.77	154.77	165.29	151.15	161.43	239.05	254.60
55	261.63	276.54	311.96	329.86	262.61	277.53	237.44	250.73	220.20	232.66	163.11	172.63	159.30	168.59	250.82	265.20
56	271.11	282.85	322.99	337.27	272.81	283.89	246.92	256.66	228.99	238.04	169.46	176.44	165.50	172.32	259.68	271.17
57	282.55	289.92	336.96	345.40	284.92	291.87	258.25	264.30	239.38	245.12	177.07	181.70	172.94	177.45	270.44	277.70
58	296.24	295.04	352.99	351.36	298.22	297.19	270.10	269.17	250.38	249.64	185.14	185.06	180.82	180.72	283.81	282.50
59	307.98	301.81	366.73	359.32	310.49	304.13	281.42	275.63	260.77	255.63	192.76	189.41	188.25	184.98	294.85	288.90
60	333.41	322.42	396.97	383.72	337.83	325.71	307.11	295.65	284.59	274.21	210.26	203.10	205.35	198.35	318.68	308.51
61	344.09	330.69	408.80	393.12	350.10	335.17	319.22	304.73	295.83	282.63	218.60	209.44	213.49	204.54	328.27	316.07
62	355.36	337.91	421.32	400.70	362.96	342.12	331.60	311.92	307.20	288.75	226.85	213.89	221.55	208.88	338.73	322.17
63	365.00	348.15	433.25	413.00	371.23	354.97	337.39	323.96	313.06	300.36	232.29	222.92	226.86	217.12	348.93	332.05
64	372.82	363.95	444.63	431.08	374.34	372.41	337.39	337.39	313.06	313.06	232.29	232.29	226.86	226.86	357.48	346.58
65	385.46	385.46	463.07	463.07	378.62	378.62	337.39	337.39	313.06	313.06	232.29	232.29	226.86	226.86	372.51	372.51

Rates shown are based on our Preferred risk tier - .573

	Kentucky Individual HSA Plus - Area 7															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$1,750		$1,500		$2,500		$3,000		$3,500		$5,000		$5,500		$1,500	
	Single		Single		Single		Single		Single		Single		Single		Single	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	159.05	159.05	189.81	189.81	159.49	159.49	143.98	143.98	134.57	134.57	102.03	102.03	99.65	99.65	152.61	152.61
1	132.35	132.35	158.08	158.08	132.07	132.07	118.88	118.88	110.92	110.92	83.67	83.67	81.71	81.71	127.10	127.10
2	102.31	102.31	122.74	122.74	101.09	101.09	90.85	90.95	84.20	84.20	63.50	63.50	61.82	61.82	98.68	98.68
3	96.28	96.28	115.48	115.48	95.01	95.01	84.94	84.94	79.17	79.17	59.47	59.47	58.09	58.09	92.84	92.84
4	95.98	95.88	115.12	114.99	94.57	93.98	84.53	83.88	78.81	78.07	59.12	58.29	57.73	56.93	92.55	91.97
5	95.98	95.88	115.12	114.99	94.57	93.98	84.53	83.88	78.81	78.07	59.12	58.29	57.73	56.93	92.55	91.97
6	95.07	95.07	114.03	114.03	93.54	93.54	83.48	83.48	77.58	77.58	57.93	57.93	56.57	56.57	91.68	91.68
7	95.07	95.07	114.03	114.03	93.54	93.54	83.48	83.48	77.58	77.58	57.93	57.93	56.57	56.57	91.68	91.68
8	95.07	95.07	114.03	114.03	93.54	93.54	83.48	83.48	77.58	77.58	57.93	57.93	56.57	56.57	91.68	91.68
9	95.07	95.07	114.03	114.03	93.54	93.54	83.48	83.48	77.58	77.58	57.93	57.93	56.57	56.57	91.68	91.68
10	95.07	95.07	114.03	114.03	93.54	93.54	83.48	83.48	77.58	77.58	57.93	57.93	56.57	56.57	91.68	91.68
11	95.07	95.07	114.03	114.03	93.54	93.54	83.48	83.48	77.58	77.58	57.93	57.93	56.57	56.57	91.68	91.68
12	95.07	95.07	114.03	114.03	93.54	93.54	83.48	83.48	77.58	77.58	57.93	57.93	56.57	56.57	91.68	91.68
13	93.26	93.26	111.86	111.86	91.75	91.75	81.90	81.90	76.23	76.23	56.93	56.93	55.60	55.60	89.93	89.93
14	93.26	93.26	111.86	111.86	91.75	91.75	81.90	81.90	76.23	76.23	56.93	57.02	55.60	55.68	89.93	89.93
15	93.26	101.86	111.86	122.19	91.75	100.50	81.90	89.82	76.23	83.59	56.93	62.47	55.60	61.01	89.93	98.24
16	93.26	103.67	111.86	124.37	91.75	102.42	81.90	91.67	76.23	85.31	56.93	63.84	55.60	62.35	89.93	99.99
17	93.26	103.67	111.86	124.37	91.75	102.42	81.90	91.67	76.23	85.31	56.93	63.84	55.60	62.35	89.93	99.99
18	93.26	110.46	111.86	132.35	91.75	109.39	81.90	98.01	76.23	91.19	56.93	68.30	55.60	66.70	89.93	106.40
19	89.03	110.46	106.96	132.35	87.60	109.39	78.07	98.01	72.43	91.19	53.84	68.11	52.58	66.53	86.00	106.40
20	89.03	112.58	106.96	134.88	87.60	111.32	78.07	99.72	72.43	92.78	53.84	69.39	52.58	67.77	86.00	108.44
21	89.03	116.20	106.96	139.05	87.60	115.32	78.07	103.58	72.43	96.46	53.84	72.30	52.58	70.61	86.00	111.80
22	89.03	116.20	106.96	139.05	87.60	115.32	78.07	103.58	72.43	96.46	53.84	72.30	52.58	70.61	86.00	111.80
23	87.38	114.69	104.96	137.23	85.97	113.84	76.61	102.23	71.09	95.23	52.84	71.48	51.60	69.81	84.39	110.34
24	87.38	116.65	104.96	139.59	85.97	115.77	76.61	103.95	71.09	96.82	52.84	72.57	51.60	70.87	84.39	112.23
25	87.38	118.46	104.96	141.77	85.97	117.40	76.61	105.28	71.09	98.05	52.84	73.48	51.60	71.78	84.39	113.98
26	87.38	120.73	104.96	144.49	85.97	119.77	76.61	107.39	71.09	100.01	52.84	74.94	51.60	73.18	84.39	116.17
27	87.38	123.60	104.96	147.94	85.97	122.58	76.61	109.90	71.09	102.34	52.84	76.58	51.60	74.78	84.39	118.94
28	87.38	127.97	104.96	153.19	85.97	126.88	76.61	113.86	71.09	106.02	52.84	79.30	51.60	77.45	84.39	123.17
29	87.38	134.15	104.96	160.62	85.97	132.82	76.61	119.01	71.09	110.80	52.84	82.84	51.60	80.91	84.39	129.14
30	87.38	137.18	104.96	164.43	85.97	135.48	76.61	121.13	71.21	112.51	52.93	83.76	51.69	81.80	84.39	132.20
31	88.28	144.57	106.24	173.31	86.27	142.59	76.61	127.46	71.21	118.40	52.99	88.04	51.69	85.93	85.42	139.94
32	90.24	149.24	108.59	179.11	88.05	147.19	78.19	131.56	72.43	122.20	53.47	90.85	52.23	88.73	87.31	144.01
33	93.26	155.74	112.94	186.91	91.61	153.57	81.37	137.11	75.37	127.34	55.75	94.67	54.44	92.45	90.80	150.27
34	97.48	160.72	117.90	192.89	95.81	158.50	84.67	141.53	78.44	131.14	57.84	97.40	56.49	95.12	94.81	155.08
35	99.00	162.98	119.10	195.61	96.79	160.69	85.99	143.58	79.67	133.55	58.84	99.03	57.47	96.72	95.77	157.27
36	102.31	164.64	123.09	197.60	100.20	162.31	89.16	145.03	82.61	134.70	60.84	100.04	59.42	97.70	98.97	158.88
37	106.99	168.11	128.71	201.59	104.80	165.72	93.12	148.07	86.17	137.39	63.48	101.94	61.99	99.55	103.48	162.08
38	113.94	172.19	137.06	206.67	111.61	169.72	99.20	151.64	91.80	140.71	67.66	104.49	66.08	102.05	110.19	166.16
39	123.75	180.94	148.84	217.01	121.25	178.47	107.78	159.43	99.77	147.94	73.48	109.77	71.76	107.20	119.67	174.47
40	128.12	190.90	153.91	228.79	125.55	188.69	111.75	168.94	103.56	157.00	76.48	116.95	74.69	114.22	123.78	183.94
41	134.76	194.67	161.89	233.32	132.07	192.40	117.56	172.11	108.84	159.94	80.30	119.14	78.43	116.35	130.16	187.59
42	138.98	199.50	166.42	239.12	135.63	197.30	120.79	176.60	111.90	163.99	82.58	122.05	80.64	119.19	133.81	192.26
43	141.85	206.14	170.41	247.09	139.04	203.96	123.76	182.54	114.60	169.63	84.57	126.23	82.60	123.28	137.01	198.67
44	146.53	210.66	176.03	252.53	143.78	208.41	128.12	186.64	118.64	173.50	87.49	128.96	85.44	125.94	141.53	203.04
45	150.50	212.33	180.56	254.35	147.49	210.18	131.50	188.36	121.58	174.90	89.67	129.96	87.57	126.92	145.18	204.50
46	157.40	217.15	189.08	260.15	154.60	215.22	137.77	192.85	127.59	179.07	93.94	133.23	91.74	130.12	152.03	209.16
47	162.83	220.02	195.61	263.41	160.08	218.49	142.65	196.15	132.00	182.13	97.22	135.92	94.95	132.16	157.27	211.79
48	172.34	222.13	206.85	265.95	169.42	220.56	151.31	198.00	139.85	183.85	103.04	136.51	100.63	133.31	166.31	213.83
49	182.44	228.02	218.81	272.85	179.80	226.50	160.62	203.28	148.67	188.63	109.31	140.05	106.76	136.78	175.93	219.36
50	206.14	236.02	246.73	282.27	204.56	234.94	183.60	211.21	170.48	196.10	126.68	145.78	123.72	142.37	198.38	228.94
51	217.01	243.57	259.43	291.15	216.12	242.65	194.30	218.34	180.41	202.72	133.96	150.69	130.83	147.17	208.58	234.09
52	227.87	250.66	272.48	299.49	226.79	250.36	203.94	225.47	189.23	209.34	140.41	155.42	137.13	151.78	219.08	240.79
53	237.55	256.54	284.08	306.20	236.57	256.58	212.79	231.41	197.45	214.73	146.42	159.42	143.00	155.70	228.40	246.18
54	249.90	266.20	298.22	317.62	250.21	266.66	225.87	240.79	209.46	223.44	155.24	165.79	151.60	161.91	239.77	255.86
55	262.42	277.37	312.91	330.86	263.40	278.37	238.16	251.49	220.85	233.36	163.60	173.15	159.78	169.10	251.58	266.00
56	271.93	283.70	323.97	338.28	273.63	284.75	247.66	257.44	229.69	238.75	169.97	176.97	166.00	172.83	260.47	271.99
57	283.41	290.80	337.38	346.45	285.78	292.75	259.02	265.10	240.10	245.85	177.61	182.25	173.46	177.99	271.25	278.54
58	297.13	295.93	354.06	352.42	299.13	298.09	270.91	269.99	251.13	250.40	185.70	185.61	181.36	181.27	284.67	283.35
59	308.91	302.72	367.84	360.41	311.43	305.05	282.27	276.46	261.55	256.40	193.34	189.98	188.82	185.53	295.74	289.77
60	334.41	323.40	397.57	384.88	338.85	326.70	308.03	296.54	285.45	275.09	210.90	203.71	205.96	198.95	319.64	309.44
61	345.12	331.69	409.53	394.30	351.15	336.18	320.18	305.65	296.73	283.49	219.26	210.07	214.14	205.16	329.28	317.02
62	356.44	338.33	422.59	401.92	364.05	343.15	332.60	312.26	308.13	289.62	227.59	214.53	222.22	209.52	339.76	323.14
63	366.10	349.20	434.55	414.25	372.35	356.05	338.41	324.04	314.01	301.27	232.99	222.59	227.55	217.77	349.38	333.06
64	373.95	365.04	445.97	432.98	375.46	373.53	338.41	338.41	314.01	314.01	232.99	232.99	227.55	227.55	358.57	347.63
65	386.62	386.62	464.47	464.47	379.76	379.76	338.41	338.41	314.01	314.01	232.98	232.99	227.55	227.55	373.43	373.43

Rates shown are based on our Preferred risk tier - .573

Kentucky Individual HSA Plus - Area 8																
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$1,750		$1,500		$2,500		$3,000		$3,500		$5,000		$5,500		$1,500	
	Single		Single		Single		Single		Single		Single		Single		Single	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	156.63	156.63	186.91	186.91	157.06	157.06	141.78	141.78	132.52	132.52	100.48	100.48	98.13	98.13	150.28	150.28
1	130.33	130.33	155.68	155.68	130.06	130.06	117.07	117.07	109.23	109.23	82.39	82.39	80.46	80.46	125.17	125.17
2	100.76	100.76	120.86	120.86	99.55	99.55	88.97	88.97	82.92	82.92	62.53	62.53	60.88	60.88	97.18	97.18
3	94.81	94.81	113.72	113.72	93.57	93.57	83.64	83.64	77.97	77.97	58.57	58.57	57.20	57.20	91.43	91.43
4	94.51	93.92	113.36	112.65	93.13	92.55	83.25	82.60	77.61	76.88	58.21	57.40	56.85	56.06	91.14	90.57
5	94.51	93.92	113.36	112.65	93.13	92.55	83.25	82.60	77.61	76.88	58.21	57.40	56.85	56.06	91.14	90.57
6	93.62	93.62	112.30	112.30	92.11	92.11	82.21	82.21	76.40	76.40	57.05	57.05	55.71	55.71	90.29	90.29
7	93.62	93.62	112.30	112.30	92.11	92.11	82.21	82.21	76.40	76.40	57.05	57.05	55.71	55.71	90.29	90.29
8	93.62	93.62	112.30	112.30	92.11	92.11	82.21	82.21	76.40	76.40	57.05	57.05	55.71	55.71	90.29	90.29
9	93.62	93.62	112.30	112.30	92.11	92.11	82.21	82.21	76.40	76.40	57.05	57.05	55.71	55.71	90.29	90.29
10	93.62	93.62	112.30	112.30	92.11	92.11	82.21	82.21	76.40	76.40	57.05	57.05	55.71	55.71	90.29	90.29
11	93.62	93.62	112.30	112.30	92.11	92.11	82.21	82.21	76.40	76.40	57.05	57.05	55.71	55.71	90.29	90.29
12	93.62	93.62	112.30	112.30	92.11	92.11	82.21	82.21	76.40	76.40	57.05	57.05	55.71	55.71	90.29	90.29
13	91.84	91.84	110.15	110.15	90.36	90.36	80.65	80.65	75.07	75.07	56.06	56.06	54.75	54.75	88.56	88.56
14	91.84	91.84	110.15	110.15	90.36	90.36	80.65	80.65	75.07	75.07	56.06	56.15	54.75	54.84	88.56	88.56
15	91.84	100.31	110.15	120.32	90.36	98.97	80.65	88.45	75.07	82.32	56.06	61.52	54.75	60.08	88.56	96.79
16	91.84	102.09	110.15	122.47	90.36	100.87	80.65	90.27	75.07	84.01	56.06	62.87	54.75	61.40	88.56	98.46
17	91.84	102.09	110.15	122.47	90.36	100.87	80.65	90.27	75.07	84.01	56.06	62.87	54.75	61.40	88.56	98.46
18	91.84	108.78	110.15	130.33	90.36	107.72	80.65	96.52	75.07	89.80	56.06	67.26	54.75	65.68	88.56	104.78
19	87.67	108.78	105.33	130.33	86.27	107.72	76.87	96.52	71.33	89.80	53.02	67.08	51.78	65.51	84.68	104.78
20	87.67	110.86	105.33	132.82	86.27	109.63	76.87	98.21	71.33	91.36	53.02	68.03	51.78	66.74	84.68	106.79
21	87.67	114.43	105.33	136.93	86.27	113.56	76.87	101.98	71.33	94.99	53.02	71.20	51.78	69.53	84.68	110.09
22	87.67	114.43	105.33	136.93	86.27	113.56	76.87	101.98	71.33	94.99	53.02	71.20	51.78	69.53	84.68	110.09
23	86.05	112.94	103.36	135.14	84.66	112.10	75.44	100.68	70.00	93.78	52.03	70.39	50.81	68.74	83.11	108.65
24	86.05	114.88	103.36	137.46	84.66	114.00	75.44	102.37	70.00	95.35	52.03	71.46	50.81	69.79	83.11	110.53
25	86.05	116.65	103.36	139.61	84.66	115.60	75.44	103.67	70.00	96.56	52.03	72.36	50.81	70.67	83.11	112.24
26	86.05	118.89	103.36	142.29	84.66	117.94	75.44	105.75	70.00	98.49	52.03	73.79	50.81	72.07	83.11	114.40
27	86.05	121.71	103.36	145.68	84.66	120.71	75.44	108.22	70.00	100.78	52.03	75.41	50.81	73.64	83.11	117.13
28	86.05	126.01	103.36	150.83	84.66	124.95	75.44	112.12	70.00	104.40	52.03	78.09	50.81	76.27	83.11	121.29
29	86.05	132.11	103.36	158.18	84.66	130.79	75.44	117.20	70.00	109.11	52.03	81.58	50.81	79.68	83.11	127.17
30	86.05	135.08	103.36	161.92	84.66	133.42	75.44	119.28	70.12	110.80	52.12	82.48	50.91	80.55	83.11	130.19
31	86.94	142.38	104.52	170.67	84.95	140.42	75.44	125.52	70.12	116.59	52.12	86.69	50.91	84.67	84.12	137.22
32	88.87	146.97	106.94	176.39	86.71	144.95	77.00	129.56	71.33	120.94	52.66	89.46	51.43	87.38	85.98	141.81
33	92.43	153.36	111.22	184.06	90.21	151.23	80.13	135.02	74.23	125.40	54.90	93.23	53.62	91.04	89.42	147.98
34	96.00	158.27	115.51	169.05	93.86	155.89	83.38	139.18	77.25	129.15	56.96	95.91	55.63	93.67	92.87	152.72
35	97.49	160.49	117.29	192.63	95.92	158.29	84.68	141.33	78.46	131.91	57.94	97.52	56.59	95.24	94.30	154.87
36	100.76	162.13	121.22	194.59	98.68	159.84	87.80	142.82	81.35	132.64	59.91	98.51	58.51	96.21	97.46	156.46
37	105.36	165.55	126.75	198.52	103.20	163.19	91.70	145.81	84.85	135.30	62.51	100.99	61.05	98.05	101.91	159.61
38	112.20	169.56	134.97	203.52	109.91	167.14	97.69	149.32	90.40	138.56	66.63	102.90	65.08	100.49	108.51	163.63
39	121.86	178.18	146.57	213.70	119.40	175.75	106.14	157.00	98.25	145.68	72.96	108.10	70.67	105.56	117.84	171.81
40	126.16	187.99	151.57	225.30	123.64	185.82	110.04	166.36	101.93	154.61	75.92	115.17	73.56	112.47	121.86	181.14
41	132.71	191.70	159.43	229.76	130.06	189.47	115.77	169.49	107.18	157.51	79.07	117.32	77.23	114.57	128.17	184.73
42	135.27	196.46	163.88	235.48	133.56	194.29	118.89	173.91	110.19	161.49	81.92	120.19	79.41	117.37	131.77	189.32
43	139.69	203.00	167.81	243.33	136.92	200.85	121.88	179.76	112.85	167.04	83.29	124.31	81.94	121.40	134.92	195.64
44	144.29	207.45	173.35	248.68	141.59	205.23	126.17	183.80	116.83	170.66	86.15	126.99	84.14	124.02	139.37	199.95
45	148.01	209.09	177.81	250.47	145.24	206.88	129.30	185.49	119.73	172.23	88.30	127.97	86.24	124.98	142.96	201.38
46	155.00	218.84	186.20	256.19	152.25	211.95	135.66	189.91	125.64	176.34	92.51	131.19	90.34	128.13	149.71	205.98
47	160.35	216.67	192.63	259.40	157.64	215.16	140.48	193.16	129.99	179.35	95.74	133.26	93.50	130.14	154.87	208.56
48	169.71	218.75	203.70	261.90	166.84	217.20	148.80	194.98	137.71	181.05	101.47	134.43	99.09	131.28	163.77	210.57
49	179.66	224.55	215.48	268.69	177.06	223.04	158.17	200.19	146.41	185.75	107.64	137.92	105.13	134.70	173.25	216.02
50	203.00	232.42	242.97	277.97	201.44	231.36	180.80	207.99	167.89	193.11	124.75	143.56	121.84	140.20	195.35	223.49
51	213.70	239.85	255.47	286.71	212.82	238.95	191.84	215.01	177.66	199.63	131.92	148.40	128.83	144.92	205.40	230.52
52	224.40	246.84	268.32	294.93	223.33	246.54	200.84	222.03	186.35	206.15	138.27	153.05	135.04	149.47	215.73	237.12
53	233.91	252.63	279.75	301.53	232.96	252.67	209.55	227.89	194.44	211.46	144.18	156.99	140.81	153.32	224.92	242.43
54	246.09	262.14	293.67	312.78	246.40	262.60	222.42	237.12	206.27	220.03	152.87	163.26	149.30	159.44	236.12	251.47
55	258.42	273.14	308.14	325.81	259.39	274.19	234.52	247.66	217.49	229.81	161.11	170.51	157.35	166.53	247.74	261.95
56	267.79	279.38	319.03	333.13	269.46	280.41	243.89	253.51	226.19	235.11	167.38	174.27	163.47	170.20	256.50	267.84
57	279.09	286.36	332.24	341.16	281.43	288.29	255.08	261.06	236.44	242.12	174.90	179.48	170.81	175.27	267.12	274.30
58	292.61	291.42	348.66	347.05	294.57	293.54	266.78	265.87	247.31	246.58	182.87	182.78	178.60	178.51	280.32	279.03
59	304.20	298.10	362.23	354.91	306.68	300.40	277.97	272.25	257.56	252.49	190.99	187.08	186.94	182.71	291.23	285.35
60	329.31	318.47	391.51	379.01	333.69	321.72	303.33	292.02	281.10	270.85	207.68	200.61	202.82	195.91	314.77	304.73
61	339.86	326.63	403.29	388.29	345.80	331.06	313.30	300.99	292.21	279.17	215.92	206.88	210.88	202.03	324.25	312.19
62	351.00	333.18	416.15	395.79	358.50	337.92	327.53	307.49	303.43	285.21	224.07	211.27	218.83	206.32	334.58	318.22
63	360.51	343.87	427.93	407.94	366.67	350.61	333.25	319.98	309.23	298.67	229.44	219.59	224.08	214.45	344.05	327.98
64	368.24	359.48	439.18	425.79	369.74	367.84	333.25	333.25	309.23	309.23	229.44	229.44	224.08	224.08	353.10	342.39
65	380.72	380.72	457.39	457.39	373.97	373.97	333.25	333.25	309.23	309.23	229.44	229.44	224.08	224.08	367.74	367.74

Rates shown are based on our Preferred risk tier - .873

	Kentucky Individual HSA Plus - Area 1															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0% Not Sold		HSA Plus 0%		HSA Plus 0% Not Sold		HSA Plus 0%		HSA Plus 50%	
	$3,500		$3,000		$5,000		$6,000		$7,000		$10,000		$11,000		$3,000	
	Family		Family		Family		Family		Family		Family		Family		Family	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	149.83	149.83	171.68	171.68	144.26	144.26	130.23	130.23	121.72	121.72	92.29	92.29	90.13	90.13	138.01	138.01
1	119.68	119.68	142.99	142.99	119.46	119.46	107.52	107.52	100.33	100.33	75.68	75.68	73.91	73.91	114.94	114.94
2	92.52	92.52	111.01	111.01	91.43	91.43	81.72	81.72	76.16	76.16	57.25	57.25	55.91	55.91	89.24	89.24
3	87.07	87.07	104.45	104.45	85.94	85.94	76.82	76.82	71.61	71.61	53.79	53.79	52.54	52.54	83.97	83.97
4	86.79	86.25	104.13	103.47	85.53	85.00	76.46	75.87	71.28	70.62	53.47	52.72	52.21	51.49	83.70	83.18
5	86.79	86.25	104.13	103.47	85.53	85.00	76.46	75.87	71.28	70.62	53.47	52.72	52.21	51.49	83.70	83.18
6	85.97	85.97	103.14	103.14	84.60	84.60	75.51	75.51	70.18	70.18	52.40	52.40	51.17	51.17	82.91	82.91
7	85.97	85.97	103.14	103.14	84.60	84.60	75.51	75.51	70.18	70.18	52.40	52.40	51.17	51.17	82.91	82.91
8	85.97	85.97	103.14	103.14	84.60	84.60	75.51	75.51	70.18	70.18	52.40	52.40	51.17	51.17	82.91	82.91
9	85.97	85.97	103.14	103.14	84.60	84.60	75.51	75.51	70.18	70.18	52.40	52.40	51.17	51.17	82.91	82.91
10	85.97	85.97	103.14	103.14	84.60	84.60	75.51	75.51	70.18	70.18	52.40	52.40	51.17	51.17	82.91	82.91
11	85.97	85.97	103.14	103.14	84.60	84.60	75.51	75.51	70.18	70.18	52.40	52.40	51.17	51.17	82.91	82.91
12	85.97	85.97	103.14	103.14	84.60	84.60	75.51	75.51	70.18	70.18	52.40	52.40	51.17	51.17	82.91	82.91
13	84.34	84.34	101.17	101.17	82.99	82.99	74.07	74.07	68.95	68.95	51.49	51.49	50.29	50.29	81.33	81.33
14	84.34	84.34	101.17	101.17	82.99	82.99	74.07	74.07	68.95	68.95	51.49	51.58	50.29	50.37	81.33	81.33
15	84.34	92.11	101.17	110.52	82.99	90.90	74.07	81.24	68.95	75.60	51.49	56.51	50.29	55.19	81.33	88.84
16	84.34	93.75	101.17	112.49	82.99	92.64	74.07	82.91	68.95	77.15	51.49	57.74	50.29	56.39	81.33	90.43
17	84.34	93.75	101.17	112.49	82.99	92.64	74.07	82.91	68.95	77.15	51.49	57.74	50.29	56.39	81.33	90.43
18	84.34	99.89	101.17	119.70	82.99	98.95	74.07	88.64	68.95	82.48	51.49	61.78	50.29	60.33	81.33	96.22
19	80.52	99.89	96.74	119.70	79.23	98.95	70.61	88.64	65.51	82.48	48.70	61.61	47.56	60.17	77.77	96.22
20	80.52	101.80	96.74	122.00	79.23	100.69	70.61	90.20	65.51	83.92	48.70	62.76	47.56	61.29	77.77	98.07
21	80.52	105.08	96.74	125.77	79.23	104.30	70.61	93.67	65.51	87.24	48.70	65.40	47.56	63.87	77.77	101.10
22	80.52	105.08	96.74	125.77	79.23	104.30	70.61	93.67	65.51	87.24	48.70	65.40	47.56	63.87	77.77	101.10
23	79.01	103.71	94.95	124.12	77.76	102.97	69.29	92.47	64.30	86.14	47.79	64.85	46.68	63.14	76.32	99.79
24	79.01	105.48	94.95	126.26	77.76	104.71	69.29	94.02	64.30	87.58	47.79	65.64	46.68	64.11	76.32	101.50
25	79.01	107.13	94.95	128.23	77.76	106.18	69.29	95.22	64.30	88.68	47.79	66.47	46.68	64.91	76.32	103.08
26	79.01	109.17	94.95	130.68	77.76	108.33	69.29	97.13	64.30	90.45	47.79	67.78	46.68	66.19	76.32	105.09
27	79.01	111.76	94.95	133.80	77.76	110.88	69.29	99.40	64.30	92.57	47.79	69.25	46.68	67.64	76.32	107.56
28	79.01	115.72	94.95	138.56	77.76	114.77	69.29	102.99	64.30	95.89	47.79	71.72	46.68	70.05	76.32	111.39
29	79.01	121.32	94.95	145.28	77.76	120.13	69.29	107.64	64.30	100.21	47.79	74.94	46.68	73.18	76.32	116.79
30	79.01	124.05	94.95	148.73	77.76	122.54	69.29	109.56	64.41	101.76	47.87	75.76	46.76	73.99	76.32	119.56
31	79.83	130.74	96.09	156.76	78.03	128.97	69.29	115.29	64.41	107.09	47.87	79.62	46.76	77.76	77.25	126.01
32	81.61	134.96	98.22	162.00	79.64	133.13	70.73	118.99	65.51	110.53	48.37	82.17	47.23	80.25	78.95	130.23
33	84.88	140.83	102.15	169.06	82.86	138.90	73.59	124.01	68.18	115.18	50.42	85.63	49.24	83.62	82.12	135.90
34	88.16	145.94	106.09	174.47	86.21	143.19	76.58	127.84	70.95	118.62	52.91	88.10	51.09	86.04	85.29	140.25
35	89.53	147.38	107.73	176.93	87.55	145.94	77.77	129.86	72.05	120.62	53.22	89.58	51.98	87.48	86.60	142.23
36	92.52	148.89	111.33	178.73	90.69	146.81	80.64	131.18	74.72	121.84	55.03	90.48	53.75	88.37	89.50	143.68
37	96.76	152.02	116.42	182.54	94.79	149.89	84.23	133.93	77.93	124.27	57.41	92.21	56.07	90.05	93.59	146.58
38	103.03	155.71	123.98	186.93	100.96	153.51	89.72	137.15	83.03	127.26	61.20	94.52	59.77	92.30	99.65	150.27
39	111.90	163.63	134.63	196.28	109.67	161.42	97.49	144.20	90.24	133.80	66.47	99.28	64.91	96.96	108.22	157.78
40	115.86	172.63	139.22	206.93	113.56	170.67	101.07	152.80	93.67	142.01	69.18	105.78	67.56	103.31	111.91	166.85
41	121.87	176.04	146.43	211.04	119.46	174.03	106.33	155.67	98.44	144.67	72.63	107.76	70.93	105.24	117.71	169.64
42	125.14	180.41	150.53	216.28	122.67	178.45	109.20	159.74	101.21	148.33	74.68	110.39	72.94	107.81	121.01	173.86
43	128.28	186.41	154.13	223.49	125.76	184.48	111.95	165.10	103.65	153.43	76.50	114.18	74.71	111.51	123.91	179.66
44	132.51	190.51	159.22	228.41	130.05	188.50	115.88	168.82	107.31	156.76	79.13	116.64	77.28	113.91	127.99	183.62
45	135.92	192.01	163.32	230.03	133.40	190.11	118.75	170.36	109.97	158.19	81.10	117.54	79.21	114.79	131.29	184.94
46	142.33	195.38	171.02	235.90	139.83	194.67	124.61	174.43	115.40	161.96	84.97	120.50	82.98	117.68	137.48	189.15
47	147.24	198.97	176.93	238.25	144.79	197.62	129.03	177.42	119.40	164.73	87.93	122.89	85.88	119.53	142.23	191.53
48	155.84	200.88	187.09	240.55	153.24	199.50	136.68	179.09	126.49	166.29	93.19	123.45	91.02	120.58	150.40	193.37
49	164.99	205.20	197.91	246.78	162.63	204.86	145.28	183.86	134.47	170.61	98.87	126.68	96.56	123.72	159.10	198.58
50	186.41	213.44	223.17	255.91	185.02	212.50	166.06	191.03	154.20	177.97	114.58	131.85	111.90	128.78	179.40	205.23
51	196.24	220.26	234.64	263.34	195.47	219.47	175.74	197.48	163.18	183.36	121.16	136.50	118.33	133.11	188.63	211.69
52	206.08	226.67	246.45	270.89	205.13	226.44	184.46	203.94	171.16	189.35	127.00	140.57	124.03	137.29	198.11	217.76
53	214.80	232.00	256.94	276.95	213.98	232.08	192.47	209.31	178.59	194.22	132.43	144.20	129.33	140.82	206.56	222.63
54	225.99	240.72	269.74	287.29	226.31	241.19	204.29	217.79	189.45	202.09	140.41	149.95	137.12	146.43	216.83	230.94
55	237.31	250.83	283.02	299.25	238.24	251.78	215.40	227.47	199.76	211.07	147.98	156.62	144.52	152.95	227.52	240.56
56	245.91	256.56	293.02	305.98	247.49	257.55	224.01	232.84	207.75	215.95	153.74	160.07	150.14	156.33	235.55	245.97
57	256.29	262.97	305.16	313.35	258.49	264.78	234.28	239.78	217.17	222.38	160.64	164.84	156.89	160.98	245.31	251.90
58	268.70	267.61	320.24	318.77	270.55	269.61	245.03	244.20	227.15	226.48	167.97	167.88	164.03	163.96	257.44	256.25
59	279.35	273.75	332.70	325.98	281.68	275.92	255.31	250.05	236.57	231.92	174.87	171.83	170.79	167.81	267.45	262.04
60	302.41	292.45	359.59	348.11	306.48	295.49	278.61	268.22	258.19	248.76	190.75	184.25	186.29	179.94	289.07	279.84
61	312.10	299.95	370.42	356.64	317.61	304.07	289.60	276.46	268.38	256.41	198.32	190.01	193.69	185.57	297.77	286.69
62	322.33	305.96	382.22	363.53	329.28	310.37	300.83	282.49	278.70	261.95	205.80	194.04	200.99	189.50	307.26	292.23
63	331.07	315.79	393.04	374.68	336.78	322.03	306.09	293.90	284.01	272.48	210.74	201.69	205.81	196.97	315.96	301.20
64	338.17	330.11	403.37	391.08	339.59	337.85	306.09	306.09	284.01	284.01	210.74	210.74	205.81	205.81	324.26	314.38
65	349.63	349.63	420.10	420.10	343.48	343.48	306.09	306.09	284.01	284.01	210.74	210.74	205.81	205.81	337.71	337.71

Rates shown are based on our Preferred risk tier - .573

	Kentucky Individual HSA Plus - Area 2															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$9,500		$9,000		$5,000		$6,000		$7,000		$10,000		$11,000		$3,000	
	Family		Family		Family		Family		Family		Family		Family		Family	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	128.67	128.67	153.58	153.58	129.05	129.05	116.50	116.50	108.89	108.89	82.56	82.56	80.63	80.63	128.46	128.46
1	107.07	107.07	127.91	127.91	108.86	108.86	96.18	96.18	89.75	89.75	67.70	67.70	66.12	66.12	102.82	102.82
2	82.77	82.77	99.81	99.81	81.80	81.80	73.10	73.10	68.13	68.13	51.21	51.21	50.02	50.02	79.83	79.83
3	77.89	77.89	93.44	93.44	76.88	76.88	68.72	68.72	64.06	64.06	48.13	48.13	47.00	47.00	75.11	75.11
4	77.64	77.15	93.15	92.56	76.52	76.04	68.40	67.87	63.77	63.17	47.83	47.16	46.71	46.06	74.88	74.40
5	77.64	77.15	93.15	92.56	76.52	76.04	68.40	67.87	63.77	63.17	47.83	47.16	46.71	46.06	74.88	74.40
6	76.91	76.91	92.26	92.26	75.68	75.68	67.55	67.55	62.78	62.78	46.87	46.87	45.77	45.77	74.17	74.17
7	76.91	76.91	92.26	92.26	75.68	75.68	67.55	67.55	62.78	62.78	46.87	46.87	45.77	45.77	74.17	74.17
8	76.91	76.91	92.26	92.26	75.68	75.68	67.55	67.55	62.78	62.78	46.87	46.87	45.77	45.77	74.17	74.17
9	76.91	76.91	92.26	92.26	75.68	75.68	67.55	67.55	62.78	62.78	46.87	46.87	45.77	45.77	74.17	74.17
10	76.91	76.91	92.26	92.26	75.68	75.68	67.55	67.55	62.78	62.78	46.87	46.87	45.77	45.77	74.17	74.17
11	76.91	76.91	92.26	92.26	75.68	75.68	67.55	67.55	62.78	62.78	46.87	46.87	45.77	45.77	74.17	74.17
12	76.91	76.91	92.26	92.26	75.68	75.68	67.55	67.55	62.78	62.78	46.87	46.87	45.77	45.77	74.17	74.17
13	75.45	75.45	90.51	90.51	74.24	74.24	66.26	66.26	61.68	61.68	46.06	46.06	44.99	44.99	72.75	72.75
14	75.45	75.45	90.51	90.51	74.24	74.24	66.26	66.26	61.68	61.68	46.06	46.14	44.99	45.05	72.75	72.75
15	75.45	82.40	90.51	98.87	74.24	81.31	66.26	72.67	61.68	67.63	46.06	50.55	44.99	49.37	72.75	79.48
16	75.45	83.87	90.51	100.63	74.24	82.87	66.26	74.17	61.68	69.02	46.06	51.65	44.99	50.45	72.75	80.89
17	75.45	83.87	90.51	100.63	74.24	82.87	66.26	74.17	61.68	69.02	46.06	51.65	44.99	50.45	72.75	80.89
18	75.45	89.36	90.51	107.08	74.24	88.51	66.26	79.30	61.68	73.79	46.06	55.26	44.99	53.97	72.75	86.08
19	72.03	89.36	86.55	107.08	70.88	88.51	63.17	79.30	58.61	73.79	43.57	55.12	42.55	53.82	69.57	86.08
20	72.03	91.07	86.55	109.13	70.88	90.08	63.17	80.69	58.61	75.07	43.57	56.15	42.55	54.83	69.57	87.73
21	72.03	94.00	86.55	112.51	70.88	93.31	63.17	83.60	58.61	78.05	43.57	58.50	42.55	57.13	69.57	90.44
22	72.03	94.00	86.55	112.51	70.88	93.31	63.17	83.60	58.61	78.05	43.57	58.50	42.55	57.13	69.57	90.44
23	70.68	92.78	84.94	111.04	69.56	92.11	61.99	82.72	57.52	77.06	42.75	57.84	41.75	56.49	68.28	89.27
24	70.68	94.37	84.94	112.95	69.56	93.67	61.99	84.11	57.52	78.34	42.75	58.72	41.75	57.35	68.28	90.80
25	70.68	95.83	84.94	114.71	69.56	94.99	61.99	85.18	57.52	79.33	42.75	59.46	41.75	58.07	68.28	92.21
26	70.68	97.65	84.94	116.91	69.56	96.91	61.99	86.89	57.52	80.92	42.75	60.63	41.75	59.21	68.28	93.88
27	70.68	99.93	84.94	119.69	69.56	99.19	61.99	88.92	57.52	82.81	42.75	61.96	41.75	60.51	68.28	96.22
28	70.68	103.52	84.94	123.95	69.56	102.66	61.99	92.13	57.52	85.78	42.75	64.16	41.75	62.66	68.28	99.64
29	70.68	108.53	84.94	129.96	69.56	107.47	61.99	96.30	57.52	89.65	42.75	67.04	41.75	65.47	68.28	104.48
30	70.68	110.97	84.94	133.04	69.56	109.62	61.99	98.01	57.62	91.04	42.83	67.77	41.83	66.18	68.28	106.95
31	71.42	116.55	85.96	140.24	69.80	115.37	61.99	103.13	57.62	95.79	42.83	71.23	41.83	69.56	69.10	112.73
32	73.01	120.74	87.86	144.93	71.25	119.09	63.27	106.45	58.61	98.88	43.27	73.51	42.25	71.79	70.63	116.50
33	75.93	125.99	91.39	151.24	74.12	124.26	65.83	110.94	60.99	103.04	45.11	76.60	44.05	74.81	73.46	121.57
34	78.87	130.01	94.91	156.07	77.12	128.09	68.51	114.36	63.47	106.11	46.80	78.81	45.71	76.97	76.29	125.46
35	80.08	131.84	96.37	158.28	78.32	130.01	69.57	116.17	64.46	107.90	47.61	80.13	46.50	78.26	77.48	127.23
36	82.77	133.19	99.60	159.88	81.07	131.33	72.14	117.34	66.84	108.99	49.23	80.94	48.08	79.05	80.07	128.53
37	86.55	136.00	104.15	163.12	84.79	134.09	75.35	119.81	69.72	111.17	51.35	82.49	50.16	80.56	83.72	131.19
38	92.17	139.29	110.89	167.22	90.31	137.39	80.27	122.69	74.28	113.84	54.75	84.55	53.47	82.57	89.14	134.43
39	100.10	146.97	120.43	175.58	98.11	144.40	87.21	129.00	80.72	119.69	59.46	88.82	58.07	86.74	96.81	141.15
40	109.64	154.43	124.54	185.12	101.59	152.68	90.42	136.69	83.80	127.03	61.68	94.63	60.44	92.42	100.11	148.81
41	109.02	157.48	130.99	188.79	106.86	155.68	95.12	139.26	88.06	129.42	64.98	96.40	63.45	94.14	105.50	151.76
42	111.95	161.39	134.66	193.48	109.74	159.64	97.69	142.89	90.54	132.69	66.81	98.75	65.25	96.44	108.25	155.54
43	114.75	166.76	137.89	199.93	112.50	165.03	100.14	147.70	92.72	137.25	68.43	102.14	66.83	99.75	110.85	160.72
44	118.54	170.43	142.43	204.94	116.94	168.63	103.67	151.02	95.99	140.23	70.79	104.54	69.13	101.90	114.50	164.26
45	121.59	171.77	146.10	205.80	119.93	170.07	106.23	152.41	98.38	141.51	72.55	105.15	70.86	102.69	117.45	165.44
46	127.33	175.68	153.00	210.49	125.09	174.15	111.47	156.04	103.23	144.89	76.01	107.80	74.23	105.28	122.99	169.21
47	131.72	177.99	158.28	213.14	129.53	176.78	115.43	158.71	106.81	147.36	78.68	109.49	76.82	106.93	127.23	171.33
48	139.42	179.70	167.37	215.19	137.09	178.47	122.27	160.21	113.16	148.76	83.37	110.45	81.42	107.87	134.55	172.99
49	147.59	184.46	177.05	220.77	145.48	183.26	129.86	164.48	120.29	152.62	88.45	113.32	86.38	110.67	142.33	177.47
50	166.76	190.94	199.64	228.59	165.51	190.10	148.56	170.89	137.94	158.68	102.50	117.95	100.10	115.20	160.49	183.59
51	175.59	197.04	209.91	235.58	174.87	196.33	157.21	176.67	145.98	164.03	108.99	121.93	105.86	119.08	168.74	189.38
52	184.34	202.78	220.47	242.83	183.50	202.57	165.01	182.44	153.12	169.38	113.61	125.76	110.96	122.81	177.23	194.80
53	192.16	207.53	229.85	247.75	191.42	207.61	172.18	187.24	159.76	173.75	118.47	128.99	115.70	125.97	184.78	199.16
54	202.17	215.84	241.80	257.00	202.45	215.76	182.76	194.83	169.48	180.79	125.61	134.15	122.67	131.01	193.97	206.59
55	212.30	224.38	253.18	267.70	213.13	225.24	192.69	203.49	178.70	188.82	132.38	140.10	129.28	136.83	203.53	215.20
56	219.99	229.51	262.13	273.72	221.40	230.40	200.40	208.30	185.85	193.19	137.59	143.20	134.81	139.85	210.72	220.04
57	229.26	235.25	272.98	280.92	231.23	236.87	209.59	214.50	194.28	198.93	143.71	147.46	140.35	144.01	219.45	225.34
58	240.97	239.40	286.48	285.16	242.03	241.19	219.20	218.46	203.20	202.60	150.26	150.18	146.74	146.68	230.29	229.23
59	249.90	244.89	297.63	291.61	251.99	246.83	228.39	223.69	211.63	207.47	156.44	153.72	152.78	150.12	239.26	234.42
60	270.53	261.61	321.68	311.41	274.17	264.34	249.24	239.94	230.97	222.54	170.65	164.83	166.65	160.97	258.59	250.34
61	279.20	268.33	331.97	319.04	284.13	272.01	259.06	247.31	240.09	229.38	177.41	169.58	173.26	166.00	266.58	256.47
62	288.35	273.70	341.93	325.21	294.58	277.65	269.11	252.65	249.91	234.94	184.11	173.58	179.80	169.52	274.87	261.42
63	296.17	282.49	351.60	335.18	301.28	288.08	273.81	262.92	254.07	243.76	188.52	180.43	184.12	176.21	282.65	269.44
64	302.52	295.31	360.85	349.85	303.79	302.23	273.81	273.81	254.07	254.07	188.52	188.52	184.12	184.12	290.08	281.23
65	312.77	312.77	375.81	375.81	307.28	307.28	273.81	273.81	254.07	254.07	188.52	188.52	184.12	184.12	302.11	302.11

Rates shown are based on our Preferred risk tier - .573

	Kentucky Individual HSA Plus - Area 3															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$3,500 Family		$3,000 Family		$5,000 Family		$6,000 Family		$7,000 Family		$10,000 Family		$11,000 Family		$3,000 Family	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	132.51	132.51	158.17	158.17	132.90	132.90	119.97	119.97	112.14	112.14	85.03	85.03	83.04	83.04	127.14	127.14
1	110.26	110.26	131.78	131.78	110.06	110.06	99.05	99.05	92.43	92.43	69.72	69.72	68.09	68.09	105.89	105.89
2	85.24	85.24	102.27	102.27	84.24	84.24	75.29	75.29	70.16	70.16	52.74	52.74	51.51	51.51	82.21	82.21
3	80.21	80.21	96.23	96.23	79.17	79.17	70.77	70.77	65.98	65.98	49.56	49.56	48.40	48.40	77.36	77.36
4	79.96	79.46	95.93	95.32	78.80	78.31	70.44	69.89	65.67	65.08	49.26	48.57	48.10	47.44	77.11	76.63
5	79.96	79.46	95.93	95.32	78.80	78.31	70.44	69.89	65.67	65.08	49.26	48.57	48.10	47.44	77.11	76.63
6	79.21	79.21	95.02	95.02	77.94	77.94	69.56	69.56	64.65	64.65	48.27	48.27	47.14	47.14	76.39	76.39
7	79.21	79.21	95.02	95.02	77.94	77.94	69.56	69.56	64.65	64.65	48.27	48.27	47.14	47.14	76.39	76.39
8	79.21	79.21	95.02	95.02	77.94	77.94	69.56	69.56	64.65	64.65	48.27	48.27	47.14	47.14	76.39	76.39
9	79.21	79.21	95.02	95.02	77.94	77.94	69.56	69.56	64.65	64.65	48.27	48.27	47.14	47.14	76.39	76.39
10	79.21	79.21	95.02	95.02	77.94	77.94	69.56	69.56	64.65	64.65	48.27	48.27	47.14	47.14	76.39	76.39
11	79.21	79.21	95.02	95.02	77.94	77.94	69.56	69.56	64.65	64.65	48.27	48.27	47.14	47.14	76.39	76.39
12	79.21	79.21	95.02	95.02	77.94	77.94	69.56	69.56	64.65	64.65	48.27	48.27	47.14	47.14	76.39	76.39
13	77.70	77.70	93.21	93.21	76.46	76.46	68.24	68.24	63.53	63.53	47.44	47.44	46.33	46.33	74.93	74.93
14	77.70	77.70	93.21	93.21	76.46	76.46	68.24	68.24	63.53	63.53	47.44	47.51	46.33	46.40	74.93	74.93
15	77.70	84.86	93.21	101.82	76.46	83.74	68.24	74.85	63.53	69.65	47.44	52.06	46.33	50.84	74.93	81.85
16	77.70	86.37	93.21	103.63	76.46	85.35	68.24	76.39	63.53	71.08	47.44	53.20	46.33	51.95	74.93	83.31
17	77.70	86.37	93.21	103.63	76.46	85.35	68.24	76.39	63.53	71.08	47.44	53.20	46.33	51.95	74.93	83.31
18	77.70	92.03	93.21	110.28	76.46	91.16	68.24	81.67	63.53	75.99	47.44	56.91	46.33	55.58	74.93	88.65
19	74.18	92.03	89.12	110.28	73.00	91.16	65.05	81.67	60.35	75.99	44.87	56.76	43.82	55.43	71.65	88.65
20	74.18	93.79	89.12	112.39	73.00	92.76	65.05	83.10	60.35	77.31	44.87	57.82	43.82	56.47	71.65	90.34
21	74.18	96.81	89.12	115.87	73.00	96.09	65.05	86.29	60.35	80.37	44.87	60.25	43.82	58.84	71.65	93.14
22	74.18	96.81	89.12	115.87	73.00	96.09	65.05	86.29	60.35	80.37	44.87	60.25	43.82	58.84	71.65	93.14
23	72.79	95.55	87.47	114.35	71.64	94.86	63.84	85.19	59.24	79.35	44.03	59.56	43.00	58.17	70.31	91.93
24	72.79	97.18	87.47	116.32	71.64	96.46	63.84	86.62	59.24	80.68	44.03	60.47	43.00	59.06	70.31	93.51
25	72.79	98.69	87.47	118.13	71.64	97.82	63.84	87.72	59.24	81.70	44.03	61.23	43.00	59.80	70.31	94.96
26	72.79	100.58	87.47	120.40	71.64	99.80	63.84	89.48	59.24	83.34	44.03	62.45	43.00	60.98	70.31	96.79
27	72.79	102.97	87.47	123.27	71.64	102.15	63.84	91.58	59.24	85.28	44.03	63.81	43.00	62.32	70.31	99.09
28	72.79	106.61	87.47	127.65	71.64	105.73	63.84	94.88	59.24	88.34	44.03	66.08	43.00	64.54	70.31	102.62
29	72.79	111.77	87.47	133.84	71.64	110.67	63.84	99.17	59.24	92.33	44.03	69.04	43.00	67.42	70.31	107.59
30	72.79	114.28	87.47	137.02	71.64	112.89	63.84	100.93	59.33	93.75	44.10	69.79	43.03	68.16	70.31	110.15
31	73.55	120.44	88.52	144.42	71.69	118.82	63.84	106.21	59.33	98.65	44.10	73.36	43.03	71.64	71.16	116.10
32	75.18	124.34	90.48	149.26	73.37	122.65	65.16	109.62	60.35	101.83	44.56	75.70	43.52	73.93	72.74	119.98
33	78.20	129.75	94.12	155.75	76.34	127.96	67.80	114.25	62.81	106.11	46.45	78.88	45.37	77.04	75.65	125.20
34	81.22	133.89	97.74	160.73	79.42	131.92	70.55	117.77	65.36	109.28	48.20	81.16	47.07	79.26	78.57	129.21
35	82.48	135.78	99.25	163.00	80.66	133.89	71.65	119.64	66.38	111.12	49.03	82.53	47.89	80.59	79.78	131.03
36	85.24	137.16	102.57	164.68	83.50	135.25	74.30	120.85	68.83	112.24	50.69	83.36	49.51	81.41	82.46	132.37
37	89.14	140.06	107.25	167.99	87.33	138.09	77.60	123.38	71.80	114.49	52.90	84.95	51.66	82.96	86.22	135.04
38	94.92	143.45	114.20	172.22	93.01	141.43	82.66	126.35	76.50	117.24	56.38	87.07	55.07	85.03	91.81	138.44
39	103.09	150.74	124.03	180.83	101.04	148.72	89.81	132.85	83.14	123.27	61.23	91.47	59.80	89.32	99.70	145.36
40	106.74	159.04	128.25	190.64	104.62	157.23	93.12	140.77	86.30	130.83	63.79	97.45	62.24	95.18	103.10	153.25
41	112.27	162.18	134.90	194.42	110.06	160.33	97.95	143.42	90.69	133.28	66.91	99.27	65.35	96.95	108.44	156.29
42	115.29	166.20	138.68	199.26	113.02	164.40	100.60	147.16	93.24	136.65	68.81	101.70	67.20	99.32	111.48	160.18
43	118.18	171.74	142.00	205.90	115.85	169.96	103.13	152.11	95.49	141.35	70.47	105.19	68.83	102.73	114.15	165.52
44	122.08	175.51	146.68	210.43	119.81	173.66	106.76	155.52	98.86	144.41	72.90	107.45	71.20	104.94	117.91	169.17
45	125.22	176.90	150.46	211.94	122.90	175.14	109.40	156.95	101.32	145.74	74.72	108.29	72.97	105.76	120.95	170.38
46	131.13	180.92	157.56	216.78	128.82	179.34	114.80	160.70	106.31	149.21	78.28	111.02	76.45	108.42	126.66	174.26
47	135.65	183.90	163.00	219.50	133.29	182.06	118.87	163.45	110.00	151.76	81.01	112.76	79.11	110.12	131.03	176.44
48	148.58	185.06	172.96	221.61	141.18	183.79	125.92	164.99	116.53	153.20	85.86	113.75	83.85	111.09	138.56	178.15
49	152.00	189.97	182.33	227.35	149.83	188.73	133.84	169.99	123.88	157.17	91.09	116.70	88.96	113.98	146.57	182.76
50	171.74	196.64	205.60	235.21	170.45	195.77	152.99	175.99	142.08	169.41	105.56	121.48	103.09	118.69	165.28	189.08
51	180.79	202.92	216.18	242.61	180.09	202.19	161.91	181.84	150.34	168.93	111.63	125.57	109.01	122.63	173.77	195.03
52	189.84	208.83	227.05	249.56	188.98	208.62	169.94	187.89	157.69	174.44	117.00	129.51	114.27	126.48	182.52	200.61
53	197.89	213.73	236.72	255.15	197.13	213.80	177.32	192.83	164.53	178.93	122.01	132.84	119.15	129.74	190.29	205.11
54	208.20	221.77	248.50	264.67	208.50	222.20	188.21	200.65	174.54	186.18	129.36	138.14	126.33	134.92	199.76	212.75
55	218.63	231.08	260.74	275.69	219.49	231.96	198.45	209.56	184.04	194.45	136.33	144.29	133.14	140.91	209.60	221.62
56	226.55	236.36	269.95	281.89	228.01	237.27	206.38	214.51	191.39	198.95	141.63	147.47	138.32	144.02	217.01	226.60
57	236.11	242.26	281.13	288.68	238.14	243.94	215.84	220.90	200.07	204.87	147.99	151.86	144.54	148.32	226.00	232.07
58	247.55	246.54	295.03	293.67	249.26	248.39	225.74	224.98	209.27	208.65	154.74	154.66	151.12	151.05	237.17	236.08
59	257.36	252.20	306.51	300.32	259.51	254.20	235.21	230.37	217.95	213.65	161.11	158.91	157.34	154.60	246.40	241.42
60	278.60	269.42	331.29	320.71	282.36	272.23	256.68	247.10	237.86	229.18	175.73	169.75	171.62	165.77	266.31	257.81
61	287.53	276.94	341.26	328.56	292.61	280.15	266.80	254.69	247.26	236.23	182.71	175.05	178.44	170.96	274.33	264.13
62	296.96	281.87	352.18	334.91	303.36	285.94	277.14	260.19	256.76	241.33	189.61	178.76	185.16	174.58	283.07	269.22
63	305.01	290.92	362.10	345.18	310.27	296.68	281.99	270.76	261.65	251.03	194.15	185.81	189.61	181.47	291.08	277.49
64	311.55	304.13	371.62	360.29	312.86	311.26	281.99	281.99	261.65	261.65	194.15	194.15	189.61	189.61	298.73	289.63
65	322.11	322.11	387.03	387.03	316.44	316.44	281.99	281.99	261.65	261.65	194.15	194.15	189.61	189.61	311.13	311.13

Rates shown are based on our Preferred risk tier - .573

	Kentucky Individual HSA Plus - Area 4															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$3,500		$3,000		$5,000		$6,000		$7,000		$10,000		$11,000		$3,000	
	Family		Family		Family		Family		Family		Family		Family		Family	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	130.64	130.64	155.94	155.94	131.03	131.03	118.28	118.28	110.56	110.56	83.83	83.83	81.88	81.66	125.36	125.36
1	108.70	108.70	129.88	129.88	108.50	108.50	97.66	97.66	91.12	91.12	68.74	68.74	67.13	67.13	104.40	104.40
2	84.04	84.04	100.83	100.83	83.05	83.05	74.23	74.23	69.18	69.18	52.00	52.00	50.78	50.78	81.05	81.05
3	79.08	79.08	94.87	94.87	78.06	78.06	69.77	69.77	65.05	65.05	48.86	48.86	47.72	47.72	76.27	76.27
4	78.83	78.34	94.57	93.98	77.69	77.21	69.45	68.90	64.74	64.14	48.56	47.89	47.43	46.77	76.03	75.55
5	78.83	78.34	94.57	93.98	77.69	77.21	69.45	68.90	64.74	64.14	48.56	47.89	47.43	46.77	76.03	75.55
6	78.09	78.09	93.68	93.68	76.84	76.84	68.58	68.58	63.74	63.74	47.59	47.59	46.48	46.48	75.31	75.31
7	78.09	78.09	93.68	93.68	76.84	76.84	68.58	68.58	63.74	63.74	47.59	47.59	46.48	46.48	75.31	75.31
8	78.09	78.09	93.68	93.68	76.84	76.84	68.58	68.58	63.74	63.74	47.59	47.59	46.48	46.48	75.31	75.31
9	78.09	78.09	93.68	93.68	76.84	76.84	68.58	68.58	63.74	63.74	47.59	47.59	46.48	46.48	75.31	75.31
10	78.09	78.09	93.68	93.68	76.84	76.84	68.58	68.58	63.74	63.74	47.59	47.59	46.48	46.48	75.31	75.31
11	78.09	78.09	93.68	93.68	76.84	76.84	68.58	68.58	63.74	63.74	47.59	47.59	46.48	46.48	75.31	75.31
12	78.09	78.09	93.68	93.68	76.84	76.84	68.58	68.58	63.74	63.74	47.59	47.59	46.48	46.48	75.31	75.31
13	76.60	76.60	91.90	91.90	75.38	75.38	67.28	67.28	62.63	62.63	46.77	46.77	45.68	45.68	73.87	73.87
14	76.60	76.60	91.90	91.90	75.38	75.38	67.28	67.28	62.63	62.63	46.77	46.84	45.68	45.75	73.87	73.87
15	76.60	83.66	91.90	100.38	75.38	82.56	67.28	73.79	62.63	68.67	46.77	51.32	45.68	50.13	73.87	80.70
16	76.60	85.16	91.90	102.17	75.38	84.15	67.28	75.91	62.63	70.08	46.77	52.45	45.68	51.23	73.87	82.15
17	76.60	85.16	91.90	102.17	75.38	84.15	67.28	75.91	62.63	70.09	46.77	52.45	45.68	51.23	73.87	82.15
18	76.60	90.78	91.90	108.72	75.38	89.87	67.28	80.52	62.63	74.91	46.77	56.11	45.68	54.80	73.87	87.40
19	73.13	90.78	87.87	108.72	71.97	89.87	64.14	80.52	59.51	74.91	44.23	55.96	43.20	54.65	70.64	87.40
20	73.13	92.47	87.87	110.81	71.97	91.46	64.14	81.93	59.51	76.22	44.23	57.01	43.20	55.67	70.64	89.07
21	73.13	95.44	87.87	114.23	71.97	94.74	64.14	85.08	59.51	79.25	44.23	59.40	43.20	58.00	70.64	91.83
22	73.13	95.44	87.87	114.23	71.97	94.74	64.14	85.08	59.51	79.25	44.23	59.40	43.20	58.00	70.64	91.83
23	71.77	94.20	86.24	112.74	70.63	93.53	62.94	83.99	58.41	78.24	43.40	58.73	42.40	57.35	69.32	90.64
24	71.77	95.81	86.24	114.68	70.63	95.11	62.94	85.40	58.41	79.54	43.40	59.62	42.40	58.23	69.32	92.19
25	71.77	97.91	86.24	116.47	70.63	96.45	62.94	86.48	58.41	80.55	43.40	60.37	42.40	58.96	69.32	93.62
26	71.77	99.16	86.24	118.70	70.63	98.40	62.94	88.22	58.41	82.16	43.40	61.56	42.40	60.12	69.32	95.42
27	71.77	101.52	86.24	121.53	70.63	100.70	62.94	90.28	58.41	84.08	43.40	62.91	42.40	61.44	69.32	97.70
28	71.77	105.11	86.24	125.85	70.63	104.24	62.94	93.54	58.41	87.10	43.40	65.14	42.40	63.63	69.32	101.17
29	71.77	110.19	86.24	131.96	70.63	109.11	62.94	97.77	58.41	91.03	43.40	68.06	42.40	66.47	69.32	105.08
30	71.77	112.67	86.24	135.08	70.63	111.80	62.94	99.51	58.50	92.49	43.48	68.81	42.47	67.20	69.32	108.59
31	72.51	118.74	87.28	142.88	70.87	117.14	62.94	104.72	58.50	97.27	43.48	72.32	42.47	70.63	70.16	114.46
32	74.12	122.59	89.21	147.15	72.34	120.92	64.24	108.08	59.51	100.59	43.93	74.64	42.91	72.89	71.72	118.28
33	77.10	127.92	92.79	153.55	75.26	126.18	66.84	112.84	61.92	104.62	45.80	77.77	44.73	75.96	74.59	123.44
34	80.08	132.01	96.36	158.47	78.30	130.05	69.56	116.11	64.44	107.74	47.52	80.02	46.41	78.15	77.46	127.59
35	81.31	133.86	97.85	160.70	79.52	132.01	70.64	117.95	65.45	109.55	48.34	81.37	47.21	79.46	78.66	129.18
36	84.04	135.23	101.12	162.84	82.92	133.35	73.25	119.14	67.87	110.66	49.98	82.19	48.81	80.26	81.30	130.50
37	87.88	138.08	105.74	166.61	86.09	136.14	76.50	121.64	70.79	112.87	52.15	83.76	50.93	81.80	85.00	133.14
38	93.58	141.43	112.59	169.79	91.70	139.43	81.49	124.57	75.42	115.59	55.59	85.85	54.29	83.84	90.51	136.49
39	101.64	148.62	122.28	178.28	99.61	146.62	88.55	130.98	81.96	121.58	60.37	90.18	58.96	88.07	98.29	143.31
40	105.24	156.60	126.45	187.96	103.15	155.02	91.81	138.79	85.08	128.93	62.84	96.08	61.36	93.83	101.64	151.09
41	110.69	159.90	133.00	191.68	108.50	158.06	96.57	141.39	89.41	131.40	65.97	97.87	64.43	95.59	106.92	154.09
42	115.67	163.87	136.72	196.45	111.43	162.08	99.18	145.03	91.93	134.72	67.84	100.27	66.28	97.92	109.91	157.92
43	116.51	169.32	140.00	203.00	114.22	167.56	101.68	149.97	94.14	139.95	69.48	103.70	67.86	101.28	112.54	163.18
44	120.36	173.04	144.62	207.47	118.12	171.21	105.26	153.33	97.47	142.88	71.87	105.94	70.19	103.47	116.25	165.78
45	123.45	174.40	148.34	208.96	121.17	172.68	107.88	154.74	99.89	143.69	73.66	106.76	71.94	104.27	119.25	167.97
46	129.28	178.37	155.34	213.72	127.01	176.82	113.18	158.43	104.82	147.11	77.18	109.45	75.37	106.89	124.87	171.81
47	133.74	180.72	160.70	216.40	131.51	179.49	117.20	161.14	108.45	149.63	79.86	111.17	78.00	108.57	129.18	173.96
48	141.55	182.45	169.83	218.49	139.19	181.20	124.15	162.67	114.89	151.04	84.65	112.14	82.67	109.52	136.61	175.64
49	149.86	187.29	179.77	224.15	147.71	186.08	131.96	167.00	122.13	154.96	89.81	115.06	87.71	112.37	144.51	180.19
50	159.32	193.86	202.70	231.89	168.05	193.02	150.84	173.52	140.06	161.10	104.07	119.76	101.64	116.97	162.95	186.41
51	178.24	200.06	213.13	239.19	177.55	199.35	159.63	179.38	148.22	166.54	110.05	123.80	107.48	120.90	171.33	192.28
52	187.16	205.83	223.65	246.04	186.32	205.68	167.55	185.24	155.47	171.98	115.56	127.68	112.66	124.70	179.94	197.79
53	195.10	210.72	233.58	251.55	194.35	210.80	174.82	190.12	162.22	176.41	120.29	130.97	117.47	127.91	187.61	202.22
54	205.27	218.65	245.00	260.94	205.56	219.08	185.56	197.82	172.08	183.56	127.53	136.20	124.55	133.02	196.95	209.76
55	215.55	227.82	257.06	271.81	216.39	228.70	195.65	206.61	181.45	191.71	134.41	142.15	131.27	138.92	206.65	218.50
56	223.86	233.03	266.15	277.92	224.79	233.93	203.47	211.49	188.59	196.15	139.64	145.99	136.37	141.99	213.95	223.41
57	232.78	238.85	277.17	284.61	234.78	240.51	212.80	217.79	197.26	201.99	145.91	149.72	142.51	146.22	222.81	228.80
58	244.06	243.07	290.87	289.54	245.74	244.69	222.56	221.80	206.91	205.71	152.57	152.49	148.99	148.92	233.83	232.75
59	253.73	248.65	302.19	296.09	255.85	250.61	231.89	227.13	214.88	210.65	158.84	156.07	155.13	152.42	242.92	238.02
60	274.68	265.63	326.62	316.19	278.37	268.99	253.06	243.62	234.51	225.95	173.26	167.36	169.21	163.44	262.56	254.18
61	283.48	272.44	336.44	323.93	288.48	276.19	263.04	251.10	243.77	232.90	180.18	172.59	175.92	168.55	270.46	260.41
62	292.77	277.90	347.17	330.19	299.08	281.91	273.24	256.53	253.13	237.93	186.94	176.24	182.56	172.12	279.08	265.43
63	300.71	288.83	357.00	340.92	305.90	292.50	278.01	266.94	257.97	247.50	191.42	183.19	186.94	178.91	288.99	273.58
64	307.15	299.84	366.38	355.21	308.45	305.87	278.01	278.01	257.97	257.97	191.42	191.42	186.94	186.94	294.53	285.55
65	317.57	317.57	381.58	381.58	311.99	311.99	278.01	278.01	257.97	257.97	191.42	191.42	186.94	186.94	306.74	306.74

Rates shown are based on our Preferred risk tier - .573

	Kentucky Individual HSA Plus - Area 5															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$3,500		$3,000		$5,000		$6,000		$7,000		$10,000		$11,000		$3,000	
	Family		Family		Family		Family		Family		Family		Family		Family	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	127.76	127.76	152.49	152.49	128.13	128.13	115.67	115.67	108.12	108.12	81.98	81.98	80.06	80.06	122.58	122.58
1	106.30	106.30	127.01	127.01	106.10	106.10	95.50	95.50	89.11	89.11	67.22	67.22	65.65	65.65	102.09	102.09
2	82.18	82.18	98.60	98.60	81.21	81.21	72.58	72.58	67.65	67.65	50.85	50.85	49.66	49.66	79.26	79.26
3	77.33	77.33	92.78	92.78	76.34	76.34	68.23	68.23	63.61	63.61	47.78	47.78	46.67	46.67	74.58	74.58
4	77.09	76.61	92.48	91.90	75.97	75.50	67.91	67.88	63.32	62.72	47.49	46.83	46.38	45.74	74.35	73.88
5	77.09	76.61	92.48	91.90	75.97	75.50	67.91	67.88	63.32	62.72	47.49	46.83	46.38	45.74	74.35	73.88
6	76.36	76.36	91.61	91.61	75.14	75.14	67.07	67.07	62.33	62.33	46.54	46.54	45.45	45.45	73.65	73.65
7	76.36	76.36	91.61	91.61	75.14	75.14	67.07	67.07	62.33	62.33	46.54	46.54	45.45	45.45	73.65	73.65
8	76.36	76.36	91.61	91.61	75.14	75.14	67.07	67.07	62.33	62.33	46.54	46.54	45.45	45.45	73.65	73.65
9	76.36	76.36	91.61	91.61	75.14	75.14	67.07	67.07	62.33	62.33	46.54	46.54	45.45	45.45	73.65	73.65
10	76.36	76.36	91.61	91.61	75.14	75.14	67.07	67.07	62.33	62.33	46.54	46.54	45.45	45.45	73.65	73.65
11	76.36	76.36	91.61	91.61	75.14	75.14	67.07	67.07	62.33	62.33	46.54	46.54	45.45	45.45	73.65	73.65
12	76.36	76.36	91.61	91.61	75.14	75.14	67.07	67.07	62.33	62.33	46.54	46.54	45.45	45.45	73.65	73.65
13	74.91	74.91	89.86	89.86	73.71	73.71	65.79	65.79	61.25	61.25	45.74	45.74	44.67	44.67	72.24	72.24
14	74.91	74.91	89.86	89.86	73.71	73.71	65.79	65.79	61.25	61.25	45.74	45.81	44.67	44.73	72.24	72.24
15	74.91	81.82	89.86	98.17	73.71	80.74	65.79	72.16	61.25	67.15	45.74	50.19	44.67	49.02	72.24	78.91
16	74.91	83.27	89.86	99.91	73.71	82.29	65.79	73.65	61.25	68.53	45.74	51.28	44.67	50.09	72.24	80.32
17	74.91	83.27	89.86	99.91	73.71	82.29	65.79	73.65	61.25	68.53	45.74	51.28	44.67	50.09	72.24	80.32
18	74.91	88.72	89.86	106.82	73.71	87.89	65.79	78.74	61.25	73.26	45.74	54.87	44.67	53.59	72.24	85.47
19	71.52	88.72	85.93	106.82	70.88	87.89	62.71	78.74	58.19	73.26	43.26	54.73	42.24	53.44	69.08	85.47
20	71.52	90.43	85.93	108.88	70.88	89.43	62.71	80.12	58.19	74.54	43.26	55.75	42.24	54.44	69.08	87.11
21	71.52	93.34	85.93	111.71	70.88	92.64	62.71	83.20	58.19	77.49	43.26	58.09	42.24	56.73	69.08	89.80
22	71.52	93.34	85.93	111.71	70.88	92.64	62.71	83.20	58.19	77.49	43.26	58.09	42.24	56.73	69.08	89.80
23	70.18	92.12	84.33	110.25	69.07	91.46	61.55	82.13	57.11	76.51	42.45	57.43	41.46	56.09	67.79	88.63
24	70.18	93.70	84.33	112.15	69.07	93.00	61.55	83.51	57.11	77.78	42.45	58.30	41.46	56.94	67.79	90.15
25	70.18	95.15	84.33	113.90	69.07	94.52	61.55	84.57	57.11	78.77	42.45	59.04	41.46	57.66	67.79	91.55
26	70.18	96.97	84.33	116.08	69.07	96.22	61.55	86.27	57.11	80.35	42.45	60.21	41.46	58.80	67.79	93.31
27	70.18	99.27	84.33	118.85	69.07	98.48	61.55	88.29	57.11	82.22	42.45	61.52	41.46	60.08	67.79	95.54
28	70.18	102.79	84.33	123.07	69.07	101.94	61.55	91.47	57.11	85.17	42.45	63.71	41.46	62.22	67.79	98.93
29	70.18	107.76	84.33	129.04	69.07	106.70	61.55	95.61	57.11	89.02	42.45	66.56	41.46	65.00	67.79	103.74
30	70.18	110.18	84.33	132.10	69.07	108.84	61.55	97.91	57.21	90.39	42.52	67.29	41.53	65.71	67.79	106.19
31	70.91	116.12	85.35	139.24	69.80	114.55	61.55	102.40	57.21	95.12	42.52	70.72	41.53	69.07	68.61	111.03
32	72.48	119.88	87.24	143.90	70.74	118.25	62.82	105.69	58.19	98.17	42.96	72.99	41.96	71.28	70.13	115.67
33	75.40	125.09	90.74	150.16	73.60	123.37	65.37	110.15	60.55	102.31	44.79	76.05	43.74	74.28	72.94	120.71
34	78.31	129.09	94.23	154.96	76.57	127.18	68.02	113.55	63.02	105.36	46.46	78.25	45.38	76.42	75.75	124.57
35	79.52	130.91	95.69	157.15	77.76	129.09	69.08	115.34	64.00	107.13	47.27	79.57	46.17	77.70	76.93	126.53
36	82.18	132.24	98.89	158.75	80.50	130.40	71.63	116.51	66.36	108.22	48.88	80.37	47.74	78.49	79.50	127.62
37	85.94	135.03	103.41	161.96	84.19	133.14	74.81	118.95	69.22	110.38	51.00	81.90	49.81	79.99	83.19	130.20
38	91.52	138.31	110.11	166.04	89.67	136.35	79.69	121.82	73.75	113.04	54.36	83.95	53.09	81.98	88.51	133.47
39	99.89	145.34	119.57	174.34	97.41	143.38	86.59	128.08	80.15	118.85	59.04	88.18	57.66	86.12	96.12	140.14
40	102.91	153.83	123.65	183.60	100.87	151.59	89.78	135.72	83.21	126.19	61.45	93.95	60.01	91.76	99.40	147.75
41	108.25	156.36	130.06	187.45	106.10	154.57	94.44	138.27	87.44	128.50	64.51	95.71	63.01	93.47	104.55	150.68
42	111.15	160.25	133.70	192.10	108.96	158.50	96.99	141.88	89.90	131.75	66.34	98.05	64.79	95.75	107.48	154.43
43	113.94	165.58	136.91	198.51	111.70	163.86	99.43	146.65	92.06	136.28	67.95	101.41	66.36	99.04	110.06	159.58
44	117.69	169.21	141.42	202.88	115.51	167.43	102.93	149.94	95.31	139.23	70.28	103.60	68.65	101.18	113.68	163.09
45	120.78	170.55	145.07	204.84	118.48	168.86	105.48	151.32	97.68	140.51	72.04	104.40	70.35	101.97	116.61	164.26
46	126.43	174.43	151.91	209.00	124.20	172.91	110.68	154.93	102.50	143.86	75.47	107.03	73.70	104.53	122.11	168.01
47	130.79	176.72	157.15	211.63	128.61	175.53	114.61	157.59	106.05	146.32	78.10	108.72	76.28	106.17	126.33	170.12
48	138.43	178.43	166.18	213.67	136.12	177.19	121.40	159.07	112.35	147.70	82.78	109.67	80.84	107.10	133.59	171.76
49	148.54	183.15	175.78	219.20	144.45	181.96	129.04	163.31	119.44	151.54	87.82	112.51	85.77	109.88	141.32	176.21
50	165.58	189.58	198.22	226.77	164.34	188.75	147.50	169.68	136.96	157.55	101.78	117.12	99.39	114.38	159.35	182.29
51	174.31	195.64	208.42	233.90	173.62	194.94	156.10	175.41	144.94	162.86	107.62	121.06	105.11	118.23	167.54	188.03
52	183.03	201.94	218.90	240.60	182.20	201.13	163.84	181.14	152.03	168.18	112.81	124.86	110.16	121.94	175.97	193.42
53	190.79	206.08	228.23	245.99	190.06	206.14	170.95	185.92	158.63	172.51	117.63	128.08	114.88	125.08	183.46	197.75
54	200.78	213.82	239.59	255.17	201.01	214.23	181.46	193.45	168.27	179.50	124.72	133.19	121.80	130.08	192.60	205.12
55	210.79	222.79	251.39	265.80	211.61	223.64	191.32	202.05	177.44	187.48	131.44	139.11	128.36	135.85	202.09	213.67
56	218.42	227.88	260.27	271.77	219.83	228.76	198.97	206.82	184.53	191.81	136.55	142.18	133.35	138.85	209.23	218.47
57	227.64	233.57	271.05	278.33	229.60	235.19	208.10	212.98	192.89	197.52	142.69	146.41	139.35	142.99	217.89	223.74
58	238.67	237.70	284.45	283.14	240.31	239.48	217.64	216.90	201.76	201.16	149.19	149.12	145.70	145.63	228.66	227.61
59	248.12	243.15	295.51	289.54	250.19	245.08	226.77	222.11	210.12	205.99	155.33	152.62	151.70	149.05	237.55	232.76
60	268.61	259.76	319.40	309.20	272.23	262.46	247.47	238.24	229.33	220.95	169.43	163.66	165.47	159.83	255.76	248.56
61	277.22	266.43	329.01	316.78	282.11	270.08	257.23	245.55	238.59	227.76	176.15	168.77	172.03	164.82	264.49	254.65
62	286.31	271.76	339.50	322.90	292.47	275.68	267.20	250.88	247.54	232.67	182.80	172.35	178.52	168.32	272.91	259.56
63	294.00	280.49	349.11	332.80	299.14	286.04	271.87	261.05	252.27	242.02	187.19	179.15	182.81	174.98	280.64	267.53
64	300.37	293.22	358.29	347.86	301.64	300.09	271.87	271.87	252.27	252.27	187.19	187.19	182.81	182.81	288.02	279.24
65	310.55	310.55	373.14	373.14	305.09	305.09	271.87	271.87	252.27	252.27	187.19	187.19	182.81	182.81	299.96	299.96

Rates shown are based on our Preferred risk tier - .573

	Kentucky Individual HSA Plus - Area 6															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$3,500		$3,000		$5,000		$6,000		$7,000		$10,000		$11,000		$3,000	
	Family		Family		Family		Family		Family		Family		Family		Family	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	140.82	140.82	167.49	167.49	140.74	140.74	127.05	127.05	118.75	118.75	90.04	90.04	87.93	87.93	134.64	134.64
1	116.76	116.76	139.50	139.50	116.54	116.54	104.90	104.90	97.88	97.88	73.83	73.83	72.11	72.11	112.14	112.14
2	90.26	90.26	108.80	108.80	89.20	89.20	79.73	79.73	74.50	74.50	55.85	55.85	54.54	54.54	87.06	87.06
3	84.94	84.94	101.90	101.90	83.84	83.84	74.95	74.95	69.87	69.87	52.48	52.48	51.25	51.25	81.92	81.92
4	84.67	84.15	101.58	100.95	83.45	82.92	74.59	74.01	69.55	68.89	52.16	51.44	50.94	50.23	81.66	81.15
5	84.67	84.15	101.58	100.95	83.45	82.92	74.59	74.01	69.55	68.89	52.16	51.44	50.94	50.23	81.66	81.15
6	83.88	83.88	100.62	100.62	82.53	82.53	73.66	73.66	68.46	68.46	51.12	51.12	49.92	49.92	80.89	80.89
7	83.88	83.88	100.62	100.62	82.53	82.53	73.66	73.66	68.46	68.46	51.12	51.12	49.92	49.92	80.89	80.89
8	83.88	83.88	100.62	100.62	82.53	82.53	73.66	73.66	68.46	68.46	51.12	51.12	49.92	49.92	80.89	80.89
9	83.88	83.88	100.62	100.62	82.53	82.53	73.66	73.66	68.46	68.46	51.12	51.12	49.92	49.92	80.89	80.89
10	83.88	83.88	100.62	100.62	82.53	82.53	73.66	73.66	68.46	68.46	51.12	51.12	49.92	49.92	80.89	80.89
11	83.88	83.88	100.62	100.62	82.53	82.53	73.66	73.66	68.46	68.46	51.12	51.12	49.92	49.92	80.89	80.89
12	83.88	83.88	100.62	100.62	82.53	82.53	73.66	73.66	68.46	68.46	51.12	51.12	49.92	49.92	80.89	80.89
13	82.28	82.28	98.70	98.70	80.96	80.96	72.26	72.26	67.27	67.27	50.23	50.23	49.07	49.07	79.34	79.34
14	82.28	82.28	98.70	98.70	80.96	80.96	72.26	72.26	67.27	67.27	50.23	50.32	49.07	49.13	79.34	79.34
15	82.28	89.86	98.70	107.82	80.96	88.68	72.26	79.26	67.27	73.76	50.23	55.13	49.07	53.84	79.34	86.68
16	82.28	91.47	98.70	109.74	80.96	90.38	72.26	80.89	67.27	75.28	50.23	56.33	49.07	55.02	79.34	88.22
17	82.28	91.47	98.70	109.74	80.96	90.38	72.26	80.89	67.27	75.28	50.23	56.33	49.07	55.02	79.34	88.22
18	82.28	97.46	98.70	116.78	80.96	96.59	72.26	86.48	67.27	80.47	50.23	60.27	49.07	58.86	79.34	93.88
19	78.55	97.46	94.38	116.78	77.30	96.59	68.89	86.48	63.91	80.47	47.51	60.11	46.40	58.70	75.88	93.88
20	78.55	99.82	94.38	119.02	77.30	98.23	68.89	88.00	63.91	81.87	47.51	61.23	46.40	59.80	75.88	95.67
21	78.55	102.52	94.38	122.70	77.30	101.76	68.89	91.38	63.91	85.12	47.51	63.80	46.40	62.31	75.88	98.63
22	78.55	102.52	94.38	122.70	77.30	101.76	68.89	91.38	63.91	85.12	47.51	63.80	46.40	62.31	75.88	98.63
23	77.09	101.18	92.63	121.10	75.87	100.45	67.60	90.22	62.73	84.04	46.63	63.08	45.54	61.60	74.46	97.35
24	77.09	102.91	92.63	123.18	75.87	102.15	67.60	91.73	62.73	85.44	46.63	64.04	45.54	62.54	74.46	99.02
25	77.09	104.52	92.63	125.10	75.87	103.59	67.60	92.89	62.73	86.52	46.63	64.85	45.54	63.33	74.46	100.56
26	77.09	106.51	92.63	127.50	75.87	105.68	67.60	94.76	62.73	88.25	46.63	66.12	45.54	64.58	74.46	102.49
27	77.09	109.04	92.63	130.54	75.87	108.17	67.60	96.97	62.73	90.30	46.63	67.57	45.54	65.99	74.46	104.93
28	77.09	112.90	92.63	135.18	75.87	111.96	67.60	100.47	62.73	93.55	46.63	69.97	45.54	68.34	74.46	108.67
29	77.09	118.36	92.63	141.73	75.87	117.20	67.60	105.02	62.73	97.77	46.63	73.11	45.54	71.40	74.46	113.94
30	77.09	121.02	92.63	145.10	75.87	119.55	67.60	106.88	62.84	99.28	46.70	73.91	45.62	72.18	74.46	116.64
31	77.89	127.54	93.74	152.93	76.12	125.83	67.60	112.47	62.84	104.48	46.70	77.68	45.62	75.87	75.36	122.94
32	79.62	131.68	95.82	158.06	77.70	129.88	69.00	116.09	63.91	107.83	47.19	80.17	46.08	78.29	77.03	127.05
33	82.81	137.40	99.66	164.93	80.84	135.51	71.80	120.99	66.51	112.37	49.19	83.54	48.05	81.58	80.11	132.58
34	86.01	141.79	103.50	170.21	84.10	139.69	74.71	124.71	69.21	115.72	51.04	85.95	49.85	83.94	83.21	136.83
35	87.34	143.78	105.11	172.61	85.41	141.79	75.88	126.70	70.30	117.67	51.93	87.39	50.71	85.35	84.49	138.76
36	90.26	145.26	108.62	174.37	88.42	143.23	78.67	127.97	72.90	118.86	53.68	88.28	52.44	86.21	87.32	140.17
37	94.40	148.32	113.58	177.89	92.48	146.23	82.17	130.66	76.03	121.24	56.02	89.96	54.70	87.85	91.50	143.00
38	100.52	151.91	120.94	182.37	98.49	149.77	87.53	133.80	81.01	124.16	59.71	92.21	58.31	90.05	97.22	146.60
39	109.17	159.65	131.34	191.49	106.99	157.48	95.11	140.68	88.04	130.54	64.85	96.86	63.33	94.60	105.58	153.93
40	113.04	168.42	135.82	201.89	110.79	166.50	98.61	149.07	91.39	138.54	67.49	103.20	65.91	100.78	109.18	162.29
41	118.89	171.75	142.85	205.88	116.54	169.78	103.73	151.87	96.04	141.14	70.86	105.13	69.20	102.67	114.83	165.51
42	122.08	176.01	146.85	211.00	119.68	174.09	106.53	155.84	98.74	144.71	72.86	107.70	71.17	105.17	118.06	169.62
43	125.14	181.86	150.37	218.04	122.69	179.98	109.21	161.08	101.12	149.68	74.63	111.99	72.89	108.78	120.89	175.28
44	129.27	185.86	155.33	222.84	126.87	183.90	113.06	164.70	104.69	152.93	77.20	113.79	75.40	111.13	124.87	179.14
45	132.60	187.33	159.33	224.44	130.15	185.47	115.85	166.21	107.29	154.33	79.13	114.67	77.27	111.99	128.08	180.42
46	138.86	191.59	166.85	229.56	136.42	189.92	121.57	170.17	112.58	158.01	82.90	117.56	80.95	114.81	134.13	184.53
47	143.65	194.11	172.61	232.44	141.26	192.80	125.88	173.09	116.48	160.72	85.78	119.41	83.78	116.62	138.76	186.85
48	152.05	195.98	182.53	234.68	149.51	194.63	133.34	174.72	123.40	162.23	90.92	120.45	88.80	117.64	146.73	188.65
49	160.96	201.17	193.08	240.76	158.66	199.86	141.73	179.38	131.19	165.45	96.46	123.58	94.21	120.70	155.22	193.54
50	181.86	208.23	217.72	249.08	180.50	207.32	162.01	186.37	150.44	173.05	111.79	128.64	109.17	125.63	175.02	200.22
51	191.45	214.88	228.92	256.92	190.71	214.12	171.45	192.67	159.20	178.88	118.20	132.97	115.44	129.86	184.02	206.53
52	201.03	221.14	240.44	264.27	200.12	220.92	179.96	198.96	166.98	184.72	123.90	137.14	121.01	133.94	193.28	212.44
53	209.56	226.34	250.68	270.19	208.76	226.42	187.77	204.21	174.23	189.48	129.20	140.68	126.18	137.39	201.51	217.20
54	220.47	234.85	263.16	280.27	220.79	235.31	199.31	212.48	184.83	197.16	136.99	146.29	133.78	142.88	211.55	225.30
55	231.53	244.71	276.11	291.95	232.43	245.64	210.15	221.92	194.89	205.92	144.37	152.80	140.99	149.22	221.86	234.70
56	239.91	250.50	285.87	298.51	241.45	251.26	218.54	227.17	202.68	210.68	149.93	156.17	146.48	152.51	229.81	239.97
57	250.03	258.55	297.71	308.71	252.18	258.33	228.57	233.93	211.87	216.95	156.72	160.82	153.07	157.05	239.32	245.75
58	262.14	261.08	312.43	310.99	263.95	263.04	239.06	238.24	221.60	220.95	163.87	163.79	160.03	159.96	251.15	249.99
59	272.53	267.08	324.58	318.03	274.81	269.18	249.08	243.95	230.80	226.25	170.61	167.64	166.62	163.72	260.92	255.66
60	295.03	285.91	350.82	339.62	299.00	288.28	271.81	261.67	251.89	242.69	186.10	179.76	181.74	175.55	282.01	273.01
61	304.49	292.64	361.87	347.94	309.86	296.65	282.53	269.71	261.83	250.16	193.48	185.38	188.96	181.04	290.51	279.70
62	314.47	298.49	372.89	354.66	321.24	302.80	293.48	275.54	271.89	255.56	200.78	189.30	196.09	184.88	299.76	285.10
63	322.99	308.08	383.45	365.59	328.56	314.18	298.61	286.73	277.09	265.84	205.60	196.77	200.79	192.17	308.25	293.85
64	329.92	322.05	393.53	381.53	331.31	329.61	298.61	298.61	277.09	277.09	205.60	205.60	200.79	200.79	316.35	306.71
65	341.10	341.10	409.85	409.85	335.11	335.11	298.61	298.61	277.09	277.09	205.60	205.60	200.79	200.79	329.47	329.47

Rates shown are based on our Preferred risk tier - .573

	Kentucky Individual HSA Plus - Area 7															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$9,500		$3,000		$5,000		$6,000		$7,000		$10,000		$11,000		$3,000	
	Family		Family		Family		Family		Family		Family		Family		Family	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	140.75	140.75	167.59	167.59	141.16	141.16	127.43	127.43	119.11	119.11	80.51	90.31	88.20	88.20	135.05	135.05
1	117.12	117.12	139.92	139.92	116.89	116.89	105.21	105.21	98.17	98.17	74.05	74.05	72.92	72.92	112.47	112.47
2	90.54	90.54	108.63	108.63	89.47	89.47	79.97	79.97	74.53	74.53	56.02	56.02	54.71	54.71	87.92	87.92
3	85.20	85.20	102.21	102.21	84.09	84.09	75.17	75.17	70.08	70.08	52.64	52.64	51.41	51.41	82.16	82.16
4	84.93	84.40	101.69	101.25	83.70	83.18	74.82	74.24	69.75	69.10	52.92	51.59	51.09	50.89	81.91	81.89
5	84.93	84.40	101.89	101.25	83.70	83.18	74.82	74.24	69.75	69.10	52.92	51.59	51.09	50.89	81.91	81.89
6	84.13	84.13	100.93	100.93	82.79	82.79	73.89	73.89	68.67	68.67	51.27	51.27	50.07	50.07	81.14	81.14
7	84.13	84.13	100.93	100.93	82.79	82.79	73.89	73.89	68.67	68.67	51.27	51.27	50.07	50.07	81.14	81.14
8	84.13	84.13	100.93	100.93	82.79	82.79	73.89	73.89	68.67	68.67	51.27	51.27	50.07	50.07	81.14	81.14
9	84.13	84.13	100.93	100.93	82.79	82.79	73.89	73.89	68.67	68.67	51.27	51.27	50.07	50.07	81.14	81.14
10	84.13	84.13	100.93	100.93	82.79	82.79	73.89	73.89	68.67	68.67	51.27	51.27	50.07	50.07	81.14	81.14
11	84.13	84.13	100.93	100.93	82.79	82.79	73.89	73.89	68.67	68.67	51.27	51.27	50.07	50.07	81.14	81.14
12	84.13	84.13	100.93	100.93	82.79	82.79	73.89	73.89	68.67	68.67	51.27	51.27	50.07	50.07	81.14	81.14
13	82.53	82.53	99.00	99.00	81.21	81.21	72.48	72.48	67.48	67.48	50.39	50.39	49.21	49.21	79.58	79.58
14	82.53	82.53	99.00	99.00	81.21	81.21	72.48	72.48	67.48	67.48	50.39	50.46	49.21	49.28	79.58	79.58
15	82.53	90.14	99.00	108.15	81.21	88.85	72.48	79.50	67.48	73.98	50.39	55.29	49.21	54.01	79.58	86.94
16	82.53	91.74	99.00	110.07	81.21	90.65	72.48	81.14	67.48	75.50	50.39	56.50	49.21	55.19	79.58	88.48
17	82.53	91.74	99.00	110.07	81.21	90.65	72.48	81.14	67.48	75.50	50.39	56.50	49.21	55.19	79.58	88.48
18	82.53	97.75	99.00	117.13	81.21	96.82	72.48	86.75	67.48	80.71	50.39	60.45	49.21	59.04	79.58	94.16
19	78.79	97.75	94.67	117.13	77.54	96.82	69.10	86.75	64.11	80.71	47.65	60.29	46.54	58.88	76.11	94.16
20	78.79	99.62	94.67	119.38	77.54	98.53	69.10	88.26	64.11	82.12	47.65	61.41	46.54	59.98	76.11	95.97
21	78.79	102.82	94.67	123.07	77.54	102.07	69.10	91.66	64.11	85.37	47.65	63.99	46.54	62.49	76.11	98.93
22	78.79	102.82	94.67	123.07	77.54	102.07	69.10	91.66	64.11	85.37	47.65	63.99	46.54	62.49	76.11	98.93
23	77.31	101.49	92.91	121.46	76.09	100.76	67.80	90.49	62.92	84.29	46.76	63.26	45.67	61.79	74.68	97.64
24	77.31	103.22	92.91	123.55	76.09	102.46	67.80	92.01	62.92	85.70	46.76	64.23	45.67	62.73	74.68	99.32
25	77.31	104.83	92.91	125.48	76.09	103.90	67.80	93.18	62.92	86.78	46.76	65.04	45.67	63.52	74.68	100.87
26	77.31	106.83	92.91	127.88	76.09	106.01	67.80	95.04	62.92	88.52	46.76	66.32	45.67	64.77	74.68	102.80
27	77.31	109.37	92.91	130.93	76.09	108.50	67.80	97.27	62.92	90.58	46.76	67.77	45.67	66.19	74.68	105.25
28	77.31	113.24	92.91	135.58	76.09	112.30	67.80	100.77	62.92	93.83	46.76	70.19	45.67	68.55	74.68	109.00
29	77.31	118.71	92.91	142.16	76.09	117.55	67.80	105.33	62.92	98.06	46.76	73.33	45.67	71.61	74.68	114.28
30	77.31	121.39	92.91	145.54	76.09	119.91	67.80	107.21	63.02	99.58	46.84	74.13	45.75	72.40	74.68	116.99
31	78.12	127.93	94.03	153.40	76.35	126.20	67.80	112.81	63.02	104.79	46.84	77.91	45.75	76.09	75.58	123.32
32	79.85	132.07	96.11	158.53	77.93	130.27	69.21	116.44	64.11	108.15	47.93	80.41	46.22	78.53	77.26	127.44
33	83.06	137.81	99.97	165.43	81.08	135.92	72.01	121.35	66.71	112.71	49.94	83.79	48.19	81.83	80.36	132.98
34	86.27	142.22	103.82	170.75	84.36	140.12	74.94	125.09	69.42	116.07	51.19	86.21	50.00	84.19	83.46	137.24
35	87.60	144.22	105.42	173.13	85.67	142.22	76.11	127.07	70.51	118.03	52.08	87.66	50.87	85.61	84.75	139.18
36	90.54	145.69	108.94	174.90	88.69	143.66	78.91	128.36	73.11	119.22	53.84	88.54	52.59	86.47	87.58	140.60
37	94.68	148.76	113.92	178.49	92.76	146.68	82.42	131.05	76.26	121.60	56.18	90.24	54.87	88.12	91.58	143.43
38	100.83	152.37	121.30	182.92	98.79	150.22	87.80	134.21	81.25	124.53	59.89	92.49	58.49	90.32	97.51	147.04
39	109.50	160.11	131.73	192.07	107.92	157.96	95.40	141.11	88.91	130.93	65.04	97.15	63.52	94.88	105.90	154.39
40	113.37	168.93	136.23	202.49	111.12	167.01	98.91	149.52	91.66	138.98	67.69	103.51	66.11	101.09	109.51	162.78
41	119.25	172.26	143.29	205.51	116.89	170.29	104.05	152.33	96.93	141.57	71.07	105.44	69.41	102.98	115.18	165.00
42	122.46	176.54	147.30	211.64	120.04	174.62	106.85	156.31	99.04	145.15	73.09	108.02	71.58	105.50	118.41	170.13
43	125.52	182.41	150.83	218.70	123.06	180.52	109.55	161.56	101.43	150.13	74.86	111.72	73.11	109.11	121.25	175.81
44	129.66	186.42	155.80	223.52	127.26	184.45	113.40	165.20	105.01	153.39	77.44	114.14	75.62	111.47	125.25	179.68
45	133.00	187.89	159.82	225.11	130.54	186.03	116.20	166.71	107.62	154.80	79.36	115.02	77.50	112.33	128.47	180.96
46	139.28	192.17	167.36	230.25	136.83	190.49	121.93	170.69	112.93	158.49	83.14	117.92	81.20	115.16	134.53	185.10
47	144.09	194.70	173.13	233.14	141.69	193.38	126.26	173.61	116.83	161.20	86.04	119.77	84.04	116.97	139.18	187.42
48	152.50	196.57	183.08	235.93	149.95	195.22	133.74	175.25	123.77	162.72	91.19	120.82	89.06	117.99	147.18	189.22
49	161.45	201.78	193.67	241.49	159.14	200.46	142.18	179.92	131.58	166.95	96.75	123.96	94.49	121.06	155.68	194.13
50	182.41	208.86	218.38	249.83	181.05	207.94	162.50	186.94	150.89	173.57	112.12	129.03	109.50	126.01	175.55	200.83
51	192.03	215.53	229.61	257.69	191.28	214.77	171.97	193.25	159.68	179.42	118.57	133.37	115.79	130.25	184.57	207.15
52	201.64	221.81	241.16	265.07	200.73	221.58	180.50	199.56	167.49	185.29	124.28	137.56	121.37	134.34	193.86	213.08
53	210.19	227.02	251.43	271.01	209.59	227.10	188.94	204.82	174.76	190.05	129.59	141.10	126.56	137.80	202.12	217.86
54	221.14	235.56	263.95	281.12	221.46	236.02	199.91	213.12	185.89	197.75	137.40	146.73	134.19	143.31	212.18	225.98
55	232.23	245.44	276.95	292.83	233.13	246.38	210.78	222.59	195.48	206.54	144.80	153.25	141.42	149.67	222.63	235.41
56	240.63	251.05	286.73	299.42	242.18	252.02	219.20	227.85	203.29	211.92	150.44	156.64	146.92	152.97	230.50	240.69
57	250.78	257.33	298.61	306.63	252.94	259.10	229.26	234.64	212.51	217.61	157.20	161.30	153.52	157.53	240.04	246.49
58	262.93	261.87	313.37	311.93	264.75	263.83	239.78	238.95	222.27	221.62	164.37	164.28	160.51	160.45	251.91	250.75
59	273.36	267.88	325.56	318.98	275.64	270.00	249.83	244.69	231.49	226.94	171.13	168.15	167.12	164.21	261.71	256.42
60	295.93	286.17	351.88	340.65	299.91	289.15	272.63	262.46	252.65	243.42	186.66	180.30	182.29	176.08	282.87	273.84
61	305.40	293.52	362.47	348.99	310.80	297.55	283.38	270.52	262.62	250.91	194.06	185.93	189.53	181.59	291.38	280.55
62	315.42	299.39	374.02	355.73	322.22	303.71	294.97	276.97	272.71	256.33	201.39	189.68	196.68	185.43	300.67	285.96
63	323.97	309.01	384.61	366.64	329.56	315.13	299.52	287.59	277.92	266.64	206.22	197.36	201.40	192.75	309.18	294.79
64	330.91	323.03	394.72	382.68	332.31	330.60	299.52	299.52	277.92	277.92	206.22	206.22	201.40	201.40	317.30	307.69
65	342.13	342.13	411.09	411.09	336.12	336.12	299.52	299.52	277.92	277.92	206.22	206.22	201.40	201.40	330.47	330.47

Rates shown are based on our Preferred risk tier - .573

	Kentucky Individual HSA Plus - Area 8															
	HSA Plus 20%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 0%		HSA Plus 50%	
	$3,500 Family		$3,000 Family		$5,000 Family		$6,000 Family		$7,000 Family		$10,000 Family		$11,000 Family		$3,000 Family	
Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0	158.60	158.60	165.44	165.44	199.01	199.01	125.49	125.49	117.29	117.29	88.94	88.94	86.86	86.86	192.99	192.99
1	115.93	115.93	197.79	197.79	115.11	115.11	103.61	103.61	96.68	96.68	72.93	72.93	71.22	71.22	110.76	110.76
2	89.16	89.16	106.97	106.97	88.11	88.11	78.75	78.75	73.39	73.39	55.17	55.17	53.88	53.88	85.99	85.99
3	83.90	83.90	100.65	100.65	82.81	82.81	74.03	74.03	69.01	69.01	51.84	51.84	50.62	50.62	80.91	80.91
4	83.64	83.11	100.34	99.71	82.42	81.90	73.68	73.10	68.69	68.05	51.52	50.81	50.32	49.62	80.66	80.15
5	83.64	83.11	100.34	99.71	82.42	81.90	73.68	73.10	68.69	68.05	51.52	50.81	50.32	49.62	80.66	80.15
6	82.85	82.85	99.39	99.39	81.52	81.52	72.76	72.76	67.62	67.62	50.49	50.49	49.31	49.31	79.90	79.90
7	82.85	82.85	99.39	99.39	81.52	81.52	72.76	72.76	67.62	67.62	50.49	50.49	49.31	49.31	79.90	79.90
8	82.85	82.85	99.39	99.39	81.52	81.52	72.76	72.76	67.62	67.62	50.49	50.49	49.31	49.31	79.90	79.90
9	82.85	82.85	99.39	99.39	81.52	81.52	72.76	72.76	67.62	67.62	50.49	50.49	49.31	49.31	79.90	79.90
10	82.85	82.85	99.39	99.39	81.52	81.52	72.76	72.76	67.62	67.62	50.49	50.49	49.31	49.31	79.90	79.90
11	82.85	82.85	99.39	99.39	81.52	81.52	72.76	72.76	67.62	67.62	50.49	50.49	49.31	49.31	79.90	79.90
12	82.85	82.85	99.39	99.39	81.52	81.52	72.76	72.76	67.62	67.62	50.49	50.49	49.31	49.31	79.90	79.90
13	81.27	81.27	97.50	97.50	79.97	79.97	71.38	71.38	66.45	66.45	49.62	49.62	48.46	48.46	78.37	78.37
14	81.27	81.27	97.50	97.50	79.97	79.97	71.38	71.38	66.45	66.45	49.62	49.70	48.46	48.53	78.37	78.37
15	81.27	88.76	97.50	106.50	79.97	87.39	71.38	78.28	66.45	72.83	49.62	54.45	48.46	53.18	78.37	85.81
16	81.27	90.34	97.50	108.39	79.97	89.27	71.38	79.80	66.45	74.35	49.62	55.64	48.46	54.34	78.37	87.14
17	81.27	90.34	97.50	108.39	79.97	89.27	71.38	79.80	66.45	74.35	49.62	55.64	48.46	54.34	78.37	87.14
18	81.27	96.26	97.50	115.34	79.97	95.35	71.38	85.42	66.45	79.48	49.62	59.53	48.46	58.14	78.37	92.78
19	77.59	96.26	93.22	115.34	76.35	95.35	68.04	85.42	63.13	79.48	46.93	59.37	45.83	57.98	74.94	92.73
20	77.59	98.10	93.22	117.58	76.35	97.03	68.04	86.92	63.13	80.86	46.93	60.48	45.83	59.06	74.94	94.50
21	77.59	101.26	93.22	121.20	76.35	100.51	68.04	90.26	63.13	84.07	46.93	63.02	45.83	61.54	74.94	97.42
22	77.59	101.26	93.22	121.20	76.35	100.51	68.04	90.26	63.13	84.07	46.93	63.02	45.83	61.54	74.94	97.42
23	76.14	99.94	91.49	119.61	74.93	99.22	66.77	89.11	61.96	83.00	46.05	62.80	44.98	60.85	73.55	96.18
24	76.14	101.65	91.49	121.67	74.93	100.90	66.77	90.60	61.96	84.39	46.05	63.25	44.98	61.78	73.55	97.81
25	76.14	103.23	91.49	123.56	74.93	102.52	66.77	91.75	61.96	85.46	46.05	64.05	44.98	62.55	73.55	99.33
26	76.14	105.20	91.49	125.93	74.93	104.39	66.77	93.59	61.96	87.16	46.05	65.32	44.98	63.79	73.55	101.24
27	76.14	107.70	91.49	128.94	74.93	106.84	66.77	95.78	61.96	89.20	46.05	66.74	44.98	65.18	73.55	103.64
28	76.14	111.52	91.49	133.52	74.93	110.59	66.77	99.24	61.96	92.40	46.05	69.12	44.98	67.51	73.55	107.33
29	76.14	116.90	91.49	140.00	74.93	115.76	66.77	103.73	61.96	96.57	46.05	72.21	44.98	70.52	73.55	112.54
30	76.14	119.54	91.49	143.32	74.93	118.08	66.77	105.57	62.06	98.06	46.13	73.00	45.05	71.29	73.55	115.21
31	76.83	125.98	92.60	151.06	75.19	124.28	66.77	111.09	62.06	103.19	46.13	76.72	45.05	74.93	74.43	121.44
32	78.64	130.06	94.64	156.11	76.74	128.29	68.16	114.66	63.13	106.51	46.61	79.18	45.52	77.33	76.08	125.49
33	81.80	135.72	98.44	162.91	79.84	133.85	70.91	119.50	65.70	110.99	48.59	82.51	47.46	80.58	79.13	130.96
34	84.95	140.05	102.23	168.12	83.07	137.98	73.79	123.18	68.36	114.80	50.61	84.90	49.24	82.91	82.19	135.15
35	86.27	142.02	103.82	170.50	84.37	140.05	74.94	125.14	69.44	116.23	51.29	86.32	50.09	84.30	83.45	137.06
36	89.16	143.47	107.29	172.23	87.34	141.47	77.71	126.40	72.00	117.40	53.03	87.19	51.79	85.15	86.25	138.45
37	93.23	146.49	112.19	175.70	91.34	144.44	81.17	129.06	75.10	119.75	55.33	88.86	54.03	86.78	90.18	141.25
38	99.29	150.05	119.45	180.13	97.28	147.93	86.46	132.16	80.01	122.63	58.97	91.08	57.60	88.94	96.02	144.80
39	107.83	157.67	129.73	189.14	105.68	155.55	93.94	138.96	86.96	128.94	64.06	95.67	62.55	93.43	104.28	152.04
40	111.65	166.35	134.15	199.40	109.43	164.48	97.40	147.24	90.26	136.84	66.66	101.93	65.10	99.55	107.84	160.50
41	117.44	169.64	141.10	203.36	115.11	167.69	102.46	150.01	94.86	139.41	69.99	103.84	68.35	101.41	113.43	163.47
42	120.59	173.85	145.05	208.41	118.22	171.96	105.23	153.92	97.53	142.93	71.97	106.58	70.29	103.88	116.61	167.54
43	123.61	179.64	148.53	215.86	121.18	177.77	107.87	159.10	99.88	147.85	73.72	110.02	71.99	107.45	119.40	173.13
44	127.69	183.58	153.43	220.11	125.92	181.64	111.67	162.67	103.41	151.05	76.25	112.39	74.47	109.77	123.33	176.94
45	130.98	185.03	157.38	221.69	128.55	183.20	114.43	164.17	105.97	152.44	78.15	113.26	76.32	110.62	126.51	178.21
46	137.16	189.23	164.81	226.74	134.75	187.59	120.08	168.08	111.20	156.07	81.88	116.12	79.96	113.40	132.48	182.27
47	141.69	191.78	170.50	229.59	138.59	190.43	124.34	170.96	115.05	158.74	84.73	117.94	82.75	115.18	137.06	184.56
48	150.18	193.57	180.29	231.80	147.67	192.24	131.70	172.58	121.89	160.24	89.81	118.97	87.71	116.19	144.93	186.34
49	158.98	198.70	190.72	237.81	156.72	197.41	140.00	177.18	129.58	164.40	95.27	122.07	93.05	119.21	153.91	191.16
50	179.64	205.67	215.05	246.02	178.28	204.77	160.02	184.03	148.60	170.92	110.42	127.06	107.83	124.09	172.67	197.77
51	189.10	212.24	226.11	253.76	188.57	211.49	169.35	190.30	157.25	176.69	116.75	131.34	114.03	128.27	181.76	203.99
52	198.57	218.43	237.49	261.03	197.67	218.21	177.75	196.52	164.94	182.46	122.98	135.46	119.52	132.29	190.91	209.84
53	206.98	223.56	247.60	266.88	206.19	223.64	185.47	201.70	172.09	187.15	127.62	138.95	124.63	135.70	199.04	214.54
54	217.77	231.97	259.93	276.83	218.08	232.42	196.87	209.87	182.56	194.74	133.90	144.50	132.14	141.12	208.95	222.54
55	228.68	241.70	272.73	288.57	229.58	242.63	207.57	219.20	192.50	203.39	142.60	150.92	139.26	147.39	219.24	231.81
56	236.96	247.23	282.86	294.85	238.49	248.18	215.86	224.58	200.19	208.10	148.14	154.25	144.68	150.64	226.99	237.02
57	246.96	253.40	294.06	301.95	249.09	255.16	225.76	231.06	209.27	214.29	154.80	158.84	151.19	155.13	236.59	242.73
58	258.93	257.86	308.59	307.17	260.72	259.81	236.12	235.32	218.89	218.24	161.86	161.78	158.07	158.00	248.07	246.93
59	269.19	263.80	320.60	314.12	271.44	265.88	246.02	240.96	227.96	223.48	168.51	165.59	164.58	161.71	257.72	252.52
60	291.41	281.81	346.52	335.46	295.84	284.75	268.47	258.46	248.80	239.71	183.81	177.56	179.52	173.40	278.56	269.66
61	300.75	289.04	356.94	343.67	306.06	293.02	279.06	266.40	258.62	247.09	191.11	183.10	186.64	178.82	286.94	276.27
62	310.61	294.83	368.32	350.31	317.30	299.08	289.89	272.16	268.56	252.42	198.32	186.98	193.68	182.61	296.09	281.60
63	319.03	304.80	378.75	361.05	324.54	310.32	294.95	283.21	273.69	262.57	203.08	194.96	198.33	189.81	304.47	290.24
64	325.07	318.11	388.70	376.85	327.25	325.57	294.95	294.95	273.69	273.69	203.08	203.08	198.33	198.33	312.47	302.93
65	336.91	336.91	404.82	404.82	330.99	330.99	294.95	294.95	273.69	273.69	203.08	203.08	198.33	198.33	325.43	325.43

PPACA Compliance Rate Filings
Documentation of Premium Impacts for PPACA Benefit Changes

A. Rating Methodology

Premium rates for HSA Plus $3,000 and $5,000 deductible levels are based on the current rates for Lumenos HSA. The base rates are adjusted for trend and removing of benefit dollar limits. The age/gender factors have been modified to reflect that preventive care is covered without any cost sharing and for the impact of guaranteeing the issuance of contracts to children and for the impact of guaranteeing the issuance of contracts to children without pre-existing condition limitations.

B. Impact of PPACA Benefit Changes

Benefit Changes	Premium Impact	Notes
Unlimited lifetime maximum	0.1%	
Dependent to age 26	0.0%	
Guaranteed issue and no pre-ex for children		*Reflected in revised age/gender factor table and 3.75% base rate increase*
Preventive covered in full under the deductible		*Reflected in revised age/gender factor table*
Removing annual maximums for DME, Prosthetics & Mental Health	0.4%	
Total Impact Range	***4.3% + age/gender factor changes***	

	% Change from HSA
HSA Plus Base Rate Adjustment -	66.9%
HSA Plus Benefit Factor Adjustment -	-33.5%
Total Impact Range	***4.3% + age/gender factor changes***

C. Calculation of Impacts

I. Guaranteed issue (no pre-ex) for children

The additional cost to cover guaranteed issue ("GI") and no pre-ex for children was determined by estimating the additional membership at a highe average morbidity and then accounting for the higher claims offset by any additional premium that would be collected as a result of a higher underwriting rate-up. The assumptions used and their support are detailed in the table below.

Assumption	Support	Value
GI Child Penetration	The 12.6% GI child penetration is an assumption based on Enterprise data. For validation, Anthem compared between the additional membership generated by these penetration assumptions applied at the state and age level and an Enterprise-wide value based on the take-up rate, WellPoint market share, and the current uninsured GI population was performed. The comparison showed that the results obtained were reasonably similar, with the penetration assumptions producing slightly less GI membership than the Enterprise-wide calculation.	12.6%
GI Children Morbidity	Enterprise claims data on GI children show a 700% morbidity factor over non-GI children. Anthem assumed that the new penetration assumption with the GI for children requirement would attract children into the pool that represented a slightly broader range of morbidity or health status than those included in the 700% multiple. The selected factor of 475% reflects this assumed lower average morbidity.	475%
Underwriting Rate-Up		50%

These assumptions were then applied to the current book of business to generate the claim costs and premium for the additional GI members. To rate for the shortfall between the additional morbidity and the underwriting rate up the child age/gender factors were increased. The following steps illustrate the calculation:

Step Description
1 Estimate membership, premium, and claims for additional GI kids (Child Only and Dependent separately):
- Additional Enrollment = Current Enrollment * Penetration
- Additional Claims = Current Claim Cost PMPM * Morbidity * Additional Enrollment
- Additional Premium = Current Premium PMPM * Maximum rate-up * Additional Enrollment

2 Add additional membership, premium, and claims to current block of children
3 Compare resulting loss ratio for children to initial loss ratio
4 Determine the additional premium required to bring the new loss ratio to the same level as the initial loss ratio
5 The required increase is the additional required premium divided by the initial premium

II. Preventive benefits covered at 100% not subject to the deductible

The additional cost of covering preventive in full (100%) not subject to the deductible is based on Enterprise data comparing product portfolios with and without preventive benefits and those subject and not subject to the deductible. Anthem's review of the preventive cost data considered the impact of adding preventive based on the underlying plan design (i.e. rich versus lean coverage including whether or not the plan has copays for office visits currently). The impact was assessed by age and gender. The result of this analysis was to produce the extra preventive cost by product, age and gender. Generally, the fixed cost of adding preventive benefits did not vary materially between deductible level and, thus, a fixed dollar amount was determined to add to all plan designs within a portfolio. This was reflected in the age/gender slope.

III. Annual and Lifetime Limits

Lifetime & Annual dollar limits for essential benefits must be removed. Limits were removed on DME, Prosthetics and Mental Health. We used an in-house pricing tool based on Milliman continuance tables to price these changes in coverage. Anthem estimates the impact of removing the annual limits and the lifetime unlimited benefit to be0.5%.

KENTUCKY
LOSS RATIO GUARANTEE

As part of its rate filing, Anthem Health Plans of Kentucky, Inc. will guarantee that the loss ratio will meet or exceed the minimum loss ratio standards on the master policy for Kentucky certificate holders. The guarantee on this master policy will begin in calendar year 2009 and continue each year thereafter. Anthem Health Plans of Kentucky, Inc. will also guarantee that the actual Kentucky lifetime loss ratio will meet or exceed the minimum loss ratio standards. Rate changes in calendar years subject to this loss ratio guarantee will be submitted to the Kentucky Department of Insurance and deemed approved. The following loss ratios will be basis for the guarantee:

Certificate Durational Month	Guaranteed Loss Ratio	Certificate Durational Year	Guaranteed Loss Ratio
1	30.0%	2	58.0%
2	36.6%	3	65.0%
3	43.2%	4	68.5%
4	46.6%	5	71.5%
5	50.3%	6	74.0%
6	54.3%		
7	56.6%		
8	59.0%		
9	61.5%		
10	63.3%		
11	65.3%		
12	67.3%		

The guaranteed minimum lifetime loss ratio is 65%.

The calculation will be made using earned premium and incurred claims for the master policy form for each calendar year based upon Anthem Health Plans of Kentucky's loss ratio for each year. The report will be independently audited at Anthem Health Plans on Kentucky's expense. The audit will be filed with the Kentucky Department of Insurance no later than one hundred twenty (120) days after the year following the end of the experience period.

As used herein, "earned premium" shall be calculated as the premiums earned, less state and local premium taxes, and less any state and local assessments applicable to this line of business.

As used herein, "incurred claims" shall be calculated as claims incurred plus cost containment expenses. For the purposes of this definition, "cost containment expenses" are expenses that actually serve to reduce the number of health services provided or the cost of such services. Examples include, but are not limited to, case management activities; utilization review; detection and prevention of payment for fraudulent requests

for reimbursement; network access fees (including prescription drug networks), and allocated internal salaries and related costs associated with network development and/or provider contracting; consumer education solely relating to health improvement and relying on the direct involvement of health personnel (smoking cessation and disease management programs and other programs that involve hands on medical education); expenses for internal and external appeals processes. The impact of reinsurance, reinsurance premium less recoveries, will also be included in this calculation, if applicable. Furthermore, claims will be reduced by the full amount of provider discounts, coordination of benefits and subrogation, rebates and any other savings.

As used herein, the term "guaranteed loss ratio" means the ratio of incurred claims to earned premium combined for all durations.

As used herein, the term "experience period" means, for any given rate filing for which a loss ratio guarantee is made, the period beginning on the first (1st) day of the calendar year during which the rates first take effect and ending on the last day of the calendar year during which the insurer has enough data to achieve a minimum of partial credibility. Successive experience periods shall be similarly determined beginning on the first (1st) day following the end for the preceding experience period.

If the actual loss ratio is less than the guaranteed loss ratio, a refund (as described below) will be due to the policyholders. If the actual loss ratio is greater than the guaranteed loss ratio, no refund is due to the policyholders.

The total amount of the refund will be calculated by dividing the sum of actual incurred claims by the guaranteed loss ratio and subtracting that result from the actual earned premium during the experience period. The refund will be made to all Kentucky certificate holders who are insured under the applicable master contracts as of the last day of the experience period and whose refund would equal ten dollars ($10) or more. The refund will include statutory interest from July 1 of the year at issue until the date of payment. The payment will be made no later than one hundred eighty (180) days after the year following the experience period for which a refund is determined to be due.

Experience under small blocks of business will not be fully credible. If the annual earned premium volume in Kentucky under the aforementioned master policy is less than two million five hundred thousand dollars ($2,500,000), then the minimum refund to be paid will be equal to the actual calculated refund multiplied by the actual premiums divided by $2,500,000. The remainder that is unpaid will carry over to subsequent years until the first year when the premium is above $2,500,000 and a refund is owed.

Any refund will be distributed by check to certificate holders whose certificate is in force as of the last day of the time period at issue, in proportion to the premium the certificate holder paid in the time period at issue, pursuant to the following formula:

Individual Certificate Holder's Refund	=	Premium earned for the time period and paid by the certificate holder / Premium earned for the time period and paid by all Kentucky certificate holders who will receive a refund	X Amount to be refunded in Kentucky plus interest from the end of the time period until the date of the refund

Because of the excessive administrative costs of making very small refunds, we will not make a refund to any certificate holder whose refund will be less than $10. These funds will be aggregated by Anthem Health Plans of Kentucky, Inc. and sent to the Kentucky State Treasury.

This guarantee is intended to be in full compliance with 806 KAR 17:150, Sections 4, 6, & 9. Nothing in this guarantee should be construed to be non-compliant with 806 KAR 17:150, Sections 4, 6, & 9.

I am authorized to make this guarantee on behalf of Anthem Health Plans of Kentucky, Inc.

Elaine Wagner

Elaine Wagner, FSA, MAAA
Actuarial Director, Individual Pricing

01/07/2011
Date

To the Kentucky Office of Insurance
Rate Filing Documentation
1/10/11
Via Overnight Delivery

Enclosed is:

$100 Filing Fee
Annual Report
Self-addressed, stamped return envelope

And two copies of:
Rate Filing

Thank you! Wanda Watson, Administrative Assistant,
Anthem Blue Cross and Blue Shield, 502/889-2530,
FAX: 502/889-2783

STEVEN L. BESHEAR
GOVERNOR

ROBERT D. VANCE
SECRETARY

SHARON P. CLARK
COMMISSIONER

COMMONWEALTH OF KENTUCKY
PUBLIC PROTECTION CABINET
DEPARTMENT OF INSURANCE
HEALTH AND LIFE DIVISION
P.O. BOX 517
FRANKFORT, KENTUCKY 40602
(502) 564-6088
FAX (502) 564-2728
HTTP://DOI.PPR.KY.GOV

Health Benefit Plan Rate Filing
Date of Filing Notice

DATE: January 27, 2011

TO: Dennis Howard — FAX#: (502) 573-8315
Attorney General's Office
Office of Rate Intervention

TO: Wanda Watson
Anthem Health Plans of Kentucky, Inc.

RE:

Date of Filing:	January 27, 2011
DOI File No:	2011-003723-R
Company:	Anthem Health Plans of Kentucky, Inc.
Market Segment:	Individual
Product:	PPO
Co File No:	AHP 1368

In accordance with KRS 304.17A-095 (2)(a) and 806 KAR 17:150, a rate filing shall be approved or disapproved by the Commissioner within sixty days after the "Date of Filing".

Department of Insurance
P.O. Box 517, 215 W. Main Street
Frankfort, Kentucky 40602
Phone: 502-564-6088
Fax: 502-564-2728

STEVEN L. BESHEAR
GOVERNOR

ROBERT D. VANCE
SECRETARY

SHARON P. CLARK
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COMMONWEALTH OF KENTUCKY
PUBLIC PROTECTION CABINET
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FRANKFORT, KENTUCKY 40602
(502) 564-6088
FAX (502) 564-2728
HTTP://DOI.PPR.KY.GOV

Health Benefit Plan Rate Filing
Filing Received Notice

DATE: January 27, 2011

TO: Dennis Howard
Attorney General's Office
Office of Rate Intervention

FAX#: (502) 573-8315

RE:

Received:	January 07, 2011
DOI File No:	2011-003723-R
Company:	Anthem Health Plans of Kentucky, Inc.
Contact Person:	Wanda Watson
Market Segment:	Individual
Product:	PPO
Co File No:	AHP 1368

In accordance with KRS 304.17A-095 (2)(a) and 806 KAR 17:150, once the appropriate filing fee and all required information for the filing referenced above have been received by the Department, this filing will be assigned a "Date of Filing". A rate filing shall be approved or disapproved by the Commissioner within sixty days after the "Date of Filing".

Department of Insurance
P.O. Box 517, 215 W. Main Street
Frankfort, Kentucky 40602
Phone: 502-564-6088
Fax: 502-564-2728

Raley, Angela M (PPC)

From: Kash, Heather (KYOAG) [Heather.Kash@ag.ky.gov]
Sent: Monday, January 31, 2011 10:28 AM
Subject: Read: 2011-003723-R.doc

Your message

To: Kash, Heather (KYOAG); wanda.watson@anthem.com; Mitchell, Barton
Subject: 2011-003723-R.doc
Sent: 1/31/2011 10:23 AM

was read on 1/31/2011 10:28 AM.

Raley, Angela M (PPC)

From: Kash, Heather (KYOAG) [Heather.Kash@ag.ky.gov]
Sent: Monday, January 31, 2011 10:27 AM
Subject: Read: 2011-003723-R:Date Of Filing Notice

Your message

To: Kash, Heather (KYOAG); wanda.watson@anthem.com
Cc: Raley, Angela M (PPC)
Subject: 2011-003723-R:Date Of Filing Notice
Sent: 1/31/2011 10:22 AM

was read on 1/31/2011 10:27 AM.

Raley, Angela M (PPC)

From: Watson, Wanda (KY) [Wanda.Watson@anthem.com]
To: Raley, Angela M (PPC)
Sent: Monday, January 31, 2011 10:22 AM
Subject: Read: 2011-003723-R.doc

Your message

To: Wanda.Watson@anthem.com
Subject:

was read on 1/31/2011 10:22 AM.

Raley, Angela M (PPC)

From: Watson, Wanda (KY) [Wanda.Watson@anthem.com]
To: Raley, Angela M (PPC)
Sent: Monday, January 31, 2011 10:21 AM
Subject: Read: 2011-003723-R:Date Of Filing Notice

Your message

To: Wanda.Watson@anthem.com
Subject:

was read on 1/31/2011 10:21 AM.

Raley, Angela M (PPC)

From: System Administrator
To: Raley, Angela M (PPC)
Sent: Monday, January 31, 2011 10:22 AM
Subject: Delivered: 2011-003723-R:Date Of Filing Notice

Your message

> To: Kash, Heather (KYOAG); 'wanda.watson@anthem.com'
> Cc: Raley, Angela M (PPC)
> Subject: 2011-003723-R:Date Of Filing Notice
> Sent: 1/31/2011 10:22 AM

was delivered to the following recipient(s):

> Raley, Angela M (PPC) on 1/31/2011 10:22 AM

Raley, Angela M (PPC)

From: Raley, Angela M (PPC)
Sent: Monday, January 31, 2011 10:22 AM
To: Kash, Heather (KYOAG); 'wanda.watson@anthem.com'
Cc: Raley, Angela M (PPC)
Subject: 2011-003723-R:Date Of Filing Notice
Attachments: 6582-2011-003723-R.doc

Office Of Insurance
Health Insurance Policy and Managed Care Division

Raley, Angela M (PPC)

From: Raley, Angela M (PPC)
Sent: Monday, January 31, 2011 10:24 AM
To: Kash, Heather (KYOAG)
Cc: Raley, Angela M (PPC)
Subject: 2011-003723-R:Filing Received Notice
Attachments: 6583-2011-003723-R.doc

Office Of Insurance
Health Insurance Policy and Managed Care Division

Raley, Angela M (PPC)

From: System Administrator
To: Raley, Angela M (PPC)
Sent: Monday, January 31, 2011 10:24 AM
Subject: Delivered: 2011-003723-R:Filing Received Notice

Your message

To: Kash, Heather (KYOAG)
Cc: Raley, Angela M (PPC)
Subject: 2011-003723-R:Filing Received Notice
Sent: 1/31/2011 10:24 AM

was delivered to the following recipient(s):

Raley, Angela M (PPC) on 1/31/2011 10:24 AM

Raley, Angela M (PPC)

From: Kash, Heather (KYOAG) [Heather.Kash@ag.ky.gov]
Sent: Monday, January 31, 2011 10:29 AM
Subject: Read: 2011-003723-R:Filing Received Notice

Your message

To: Kash, Heather (KYOAG)
Cc: Raley, Angela M (PPC)
Subject: 2011-003723-R:Filing Received Notice
Sent: 1/31/2011 10:24 AM

was read on 1/31/2011 10:29 AM.

Bogolin, JoAnn (PPC)

From: Bogolin, JoAnn (PPC)
Sent: Wednesday, March 16, 2011 1:48 PM
To: 'Elaine.Wagner@Wellpoint.com'
Cc: Drennan, Jim (PPC Contractor); jim.drennan@ingenixconsulting.com; 'JoAnn Bogolin'; Kash, Heather (KYOAG); Mitchell, Jill (PPC); Raley, Angela M (PPC)
Subject: Anthem Ind PPO Filing: Filing # 2011-003723-R

Ms. Wagner,

With respect to the above-referenced filing, we have the following questions/requests:

1. Exhibit E, the example of age/gender factor calculation, is a non-maternity example. Will you please provide us with a maternity example so that we can be clear on how the maternity rider factor is applied?

2. On the last page of the actuarial memorandum, restatement fees are described as applying to groups whose coverage lapses. Since this is an individual filing, will you please clarify if there are restatement fees that apply to individuals whose coverage lapses or if no restatement fees apply? If restatement fees do apply to individuals, will you please confirm the terms of those restatement fees, as described in the actuarial memorandum?

3. Will you please provide justification for the 3% per quarter trend and annual trend limit for medical and pharmacy expense of 13.5%? Since these two products are new, there is no experience upon which to calculate a trend. We need an understanding of how the above-mentioned trends are applicable to these products.

4. The actuarial memorandum indicates that this filing brings the benefit factors for the $3,000- and $5,000-deductible plans up to the level of the other HSA Plus factors, which include the PPACA provisions. Please explain exactly what changed for these two benefit designs between this filing and the previously amended filing, 2010-003544-R Amendment 310, which also stated that these two designs were PPACA-compliant. Explain what benefits changed and how much they each impacted these benefit factors.

5. From 806 KAR 17:150 Section 6, the actuarial memorandum needs to address the effects of the state mandated benefits on the rates provided. Please provide applicable comments.

When responding to this email, please reply to all.

Thank you!

JoAnn Bogolin, ASA, MAAA | Senior Consultant | Ingenix Consulting | Consultant for the Kentucky Department of Insurance
2170 Satellite Blvd., Suite 150 | Duluth, Georgia 30097 | (678) 417-4907 (o) | (678) 417-4950 (f)

Bogolin, JoAnn (PPC)

From: Bogolin, JoAnn (PPC)
Sent: Wednesday, March 16, 2011 1:43 PM
To: Mitchell, Jill (PPC); 'Drennan, James E'; Drennan, Jim (PPC Contractor)
Cc: Raley, Angela M (PPC)
Subject: RE: comments questions on Anthem Individual rate filing 2011-003723-R

Jill,

In response to your email below:

1. This is definitely confusing. I will ask.
2. Agreed
3. In the filing of these plans effective 4/1/2009, Anthem charged $1.00 for paper claims and made no mention of paper applications. Every file subsequent has had the $5.00 paper claim fee and the $25 paper application fee. One note is that the fee for insufficient funds has dropped from $50 to $25 since that 4/1/2009 filing. I do not think that these amounts are excessive and Anthem has been charging them for about a year. I will defer to your judgment on these fees – let me know if you want me to ask.
4. Good point. I will ask for clarification if 1) this should not be part of the filing or 2) if they plan to charge to individuals.
5. Question to Anthem combined with (2)
6. Good point. I will ask for clarification on how the maternity rider factor is applied.
7. I will go through Bill's PPT and see what questions we want to ask from that. I will send the other questions to Anthem today and will follow-up with another email on the PPACA PPT.

JoAnn Bogolin, ASA, MAAA | Senior Consultant | Ingenix Consulting | Consultant for the Kentucky Department of Insurance
2170 Satellite Blvd., Suite 150 | Duluth, Georgia 30097 | (678) 417-4907 (o) | (678) 417-4950 (f)

From: Mitchell, Jill (PPC) [mailto:Jill.Mitchell@ky.gov]
Sent: Wednesday, February 23, 2011 3:27 PM
To: Drennan, James E; Drennan, Jim (PPC Contractor)
Cc: Raley, Angela M (PPC)
Subject: comments questions on Anthem Individual rate filing 2011-003723-R

Jim,

1) On page 10 of the filing, first page of the memorandum, 3rd paragraph says: the new factors and rats for the $3000 and the $5000 deductible levels are to account for PPACA benefits. Are these new benefit plans? I didn't see any new plans highlighted, or are they trying to change benefit factors?

2) (c) 2b(i) Trend says that there is no trend experience available on this new product. Shouldn't they demonstrate trend for the most closely related product to justify the trend?

3) Page 11, 5. f. Paper billing fee and paper application fee. It says they are charging an additional $5.00 or a paper bill per month. Don't you think that this seems a little high? It also says that they are charging an additional fee of $25.00 for a paper application fee. I think this also seems a little high.

4) Page 12. 9(c) under reinstatement fee it talks about being charged to groups, this is an individual filing and doesn't seem to be applicable.

Bogolin, JoAnn (PPC)

From: Mitchell, Jill (PPC) [Jill.Mitchell@ky.gov]
Sent: Wednesday, February 23, 2011 3:27 PM
To: Drennan, James E; Drennan, Jim (PPC Contractor)
Cc: Raley, Angela M (PPC)
Subject: comments questions on Anthem Individual rate filing 2011-003723-R

Jim,

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(c) 2b(i) Trend says that there is no trend experience available on this new product. Shouldn't they demonstrate trend for the most closely related product to justify the trend?

Page 11, 5. f. Paper billing fee and paper application fee. It says they are charging an additional $5.00 or a paper bill per month. Don't you think that this seems a little high? It also says that they are charging an additional fee of $25.00 for a paper application fee. I think this also seems a little high.

Page 12. 9(c) under reinstatement fee it talks about being charged to groups, this is an individual filing and doesn't seem to be applicable.

(h) Trend says trend amount not to exceed 13.5%. This is no longer allowed. They should demonstrate and justify trend requested.

On page 21. There is a Maternity Rider Multilplier. How is this used, I see where they have the maternity rider listed in the age/gender factors, so I am not sure how this is applied.

Also, I think we should include some of the suggested questions from Bill O'Brien's powerpoint.

Jill Mitchell

Branch Manager

Health Insurance Policy Forms and Rate Filing Branch

Health and Life Division

Kentucky Department of Insurance

502-564-6088

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Elaine Wagner

Personal Information

Elaine Wagner
Director & Actuary
WellPoint
W9PWK
N17 W24340 Riverwood Drive
Waukesha, WI 53188
United States

Tel: (262) 523-4969
Fax: NA
Email: Elaine.Wagner@bcbswi.com

Designations
MAAA 1989
FSA 1997

SOA Continuing Professional Development Requirement
Compliant(2009-2010)

Academic Degrees
B.S.

Other Professional Designations

Employment Type
Insurance Organization

Primary Area of Practice
Health Benefit Systems

Other Areas of Practice / Interests
Financial Reporting
General Management
Investments
Life Insurance
Product Development
Regulatory
Reinsurance

Society of Actuaries Sections
Health

EXHIBIT 8

Rate Filing Work Flow Chart

Kentucky Rate Review Process

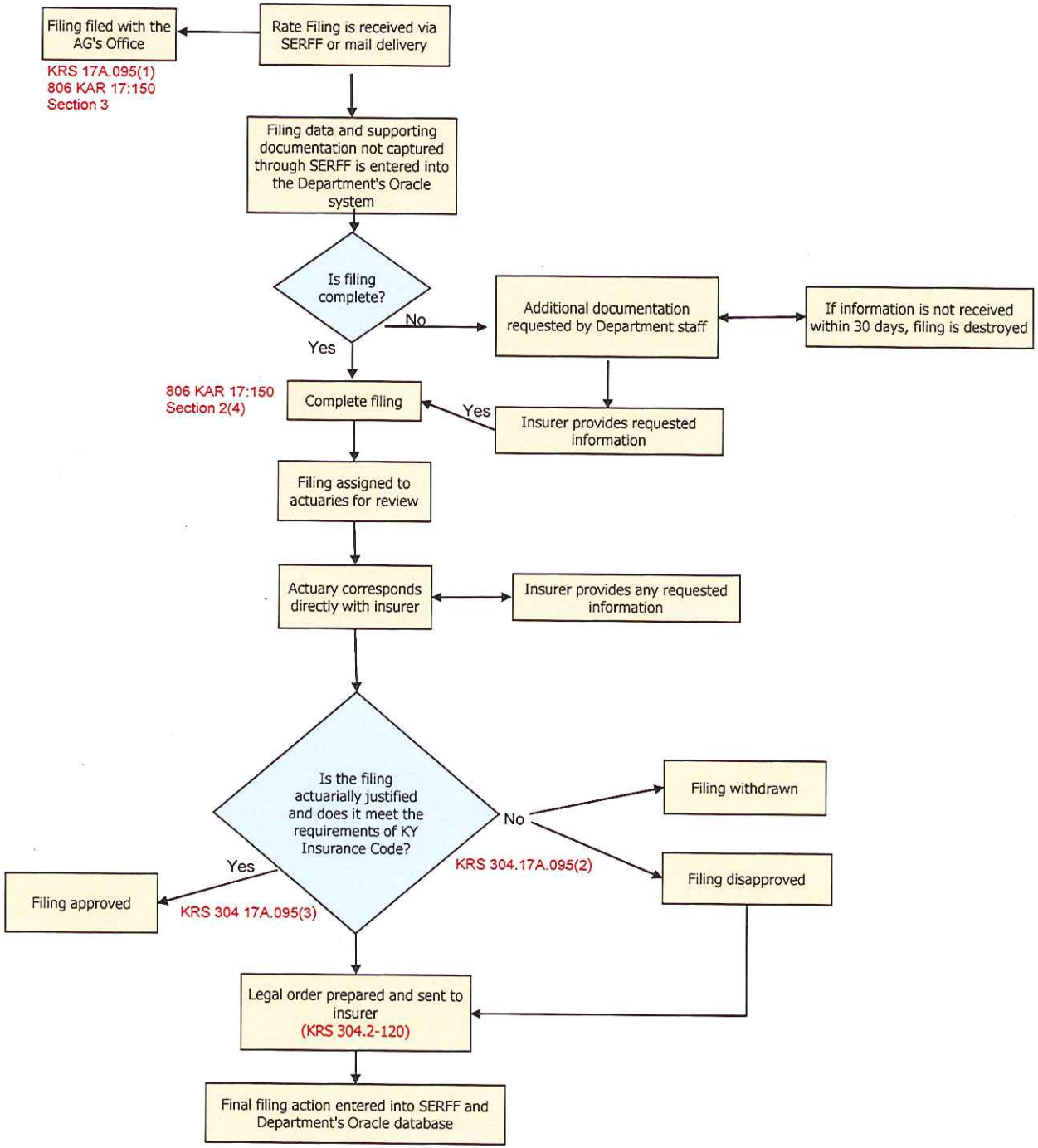
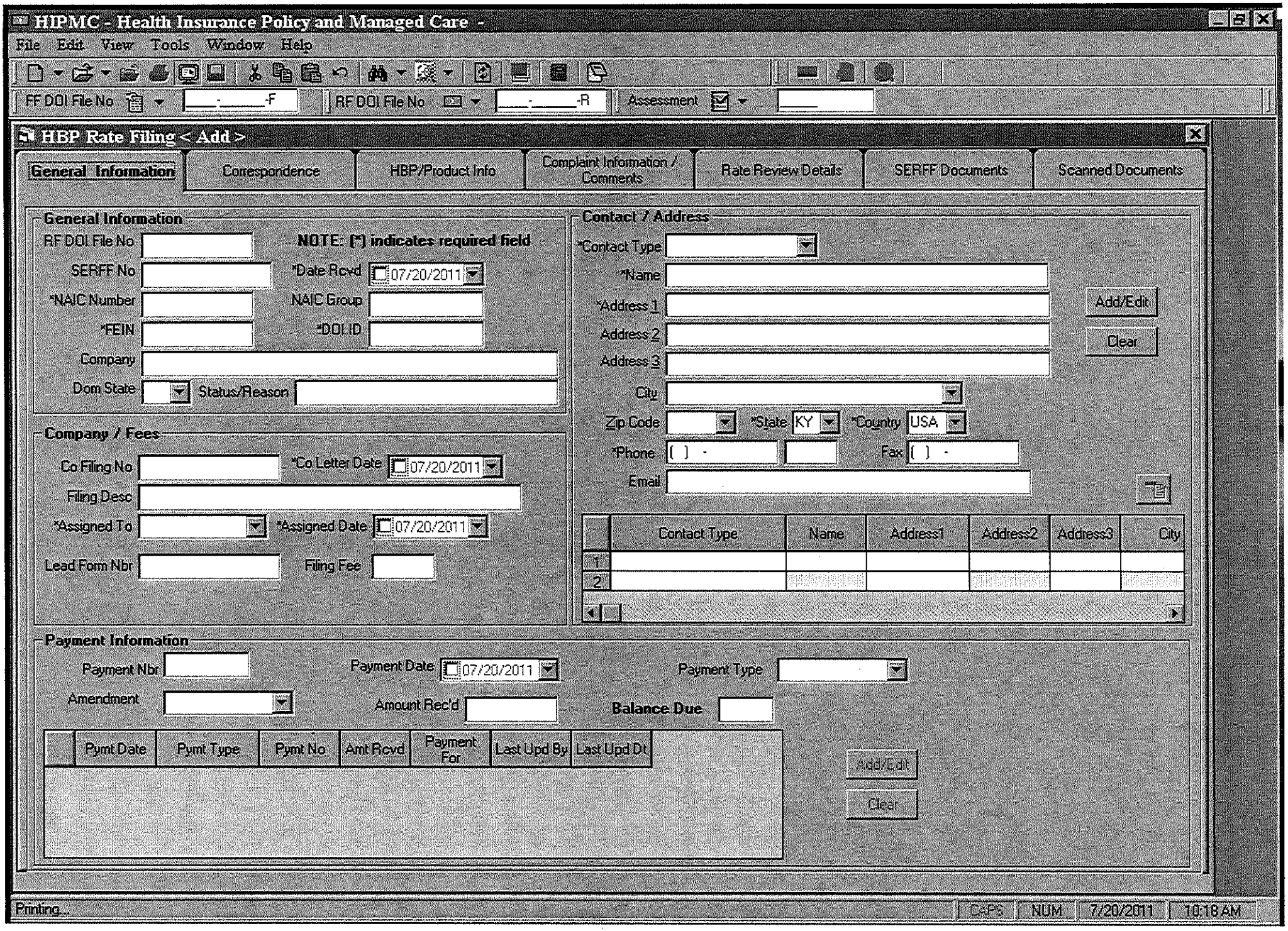
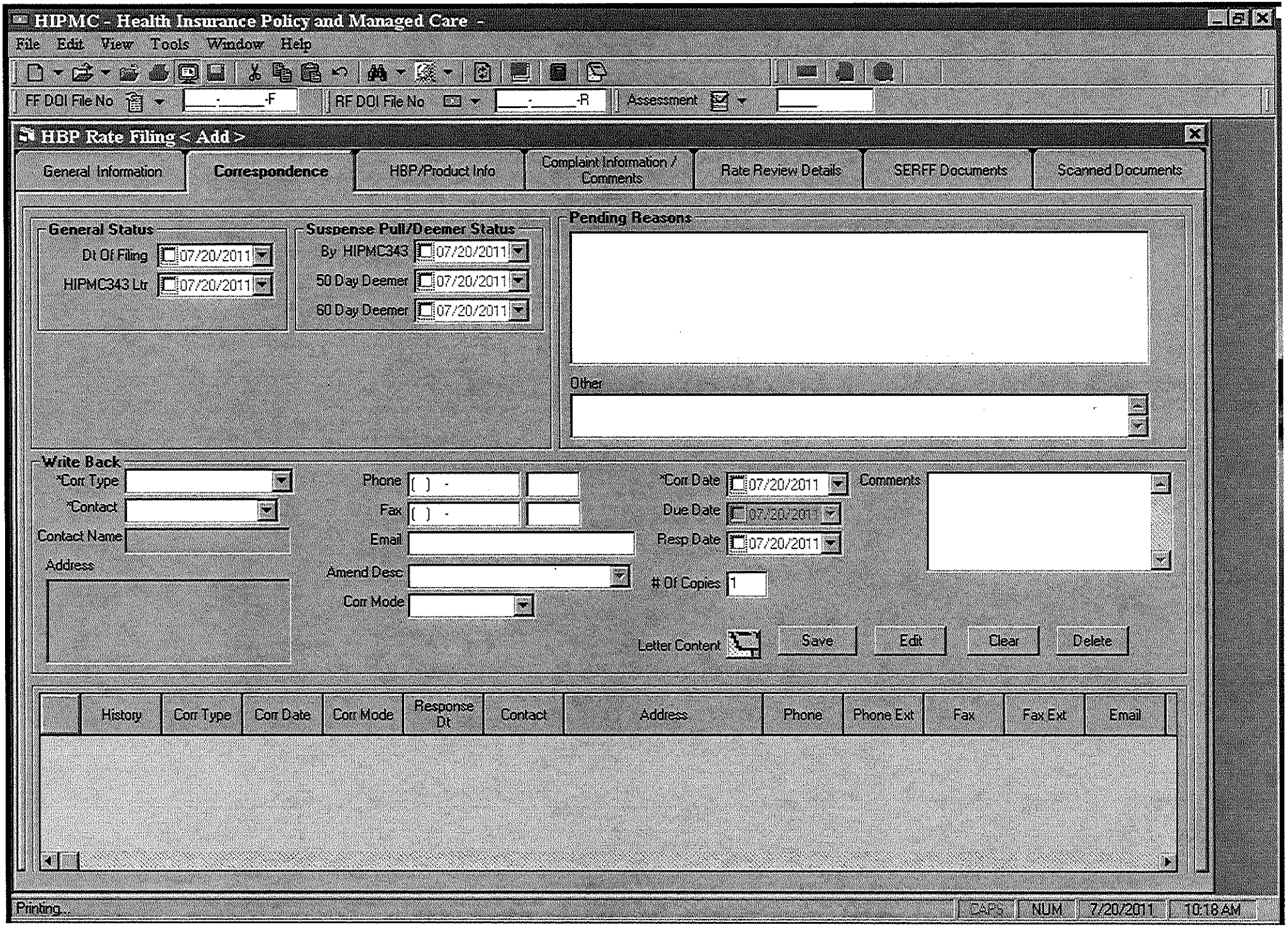
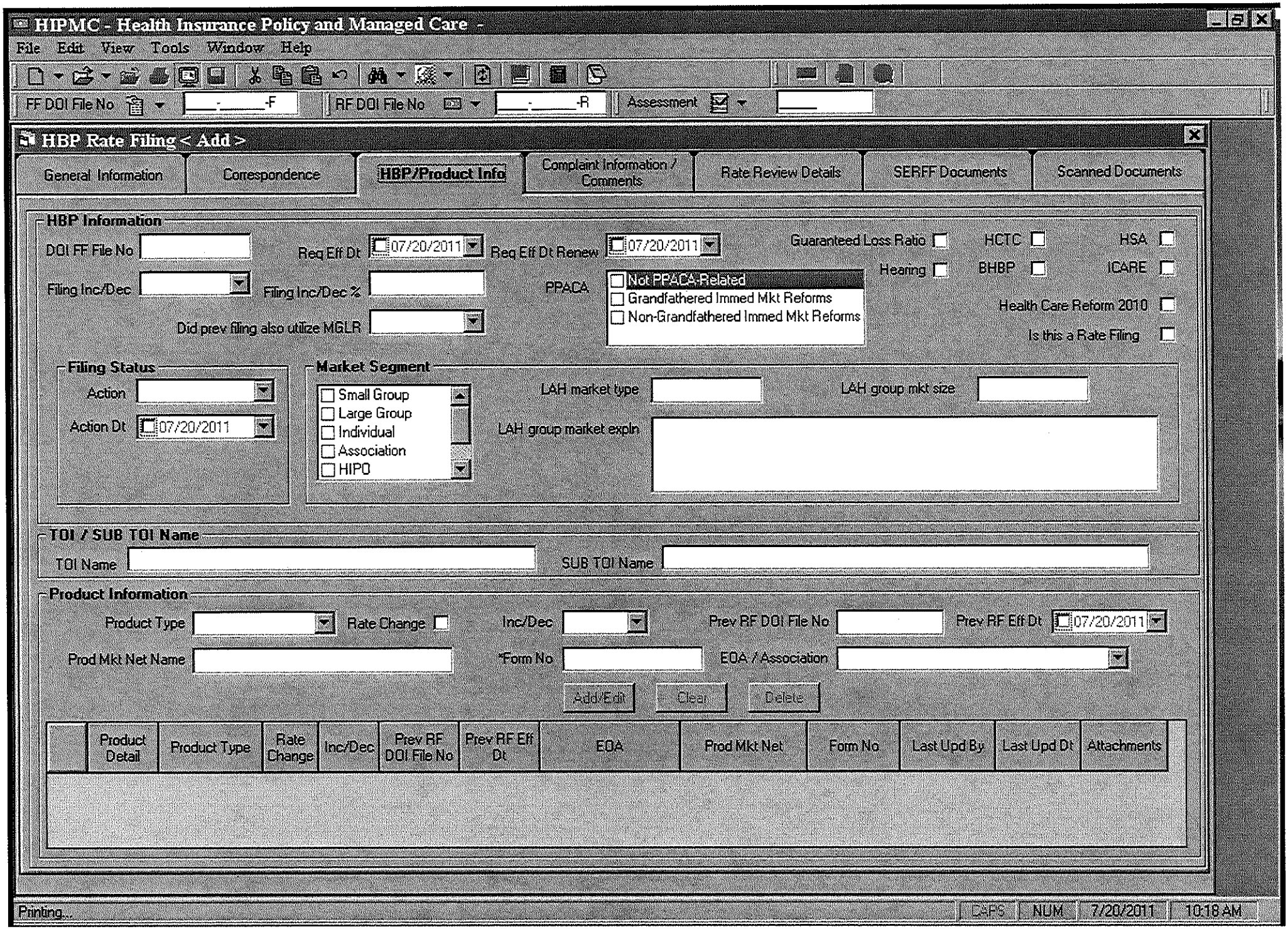


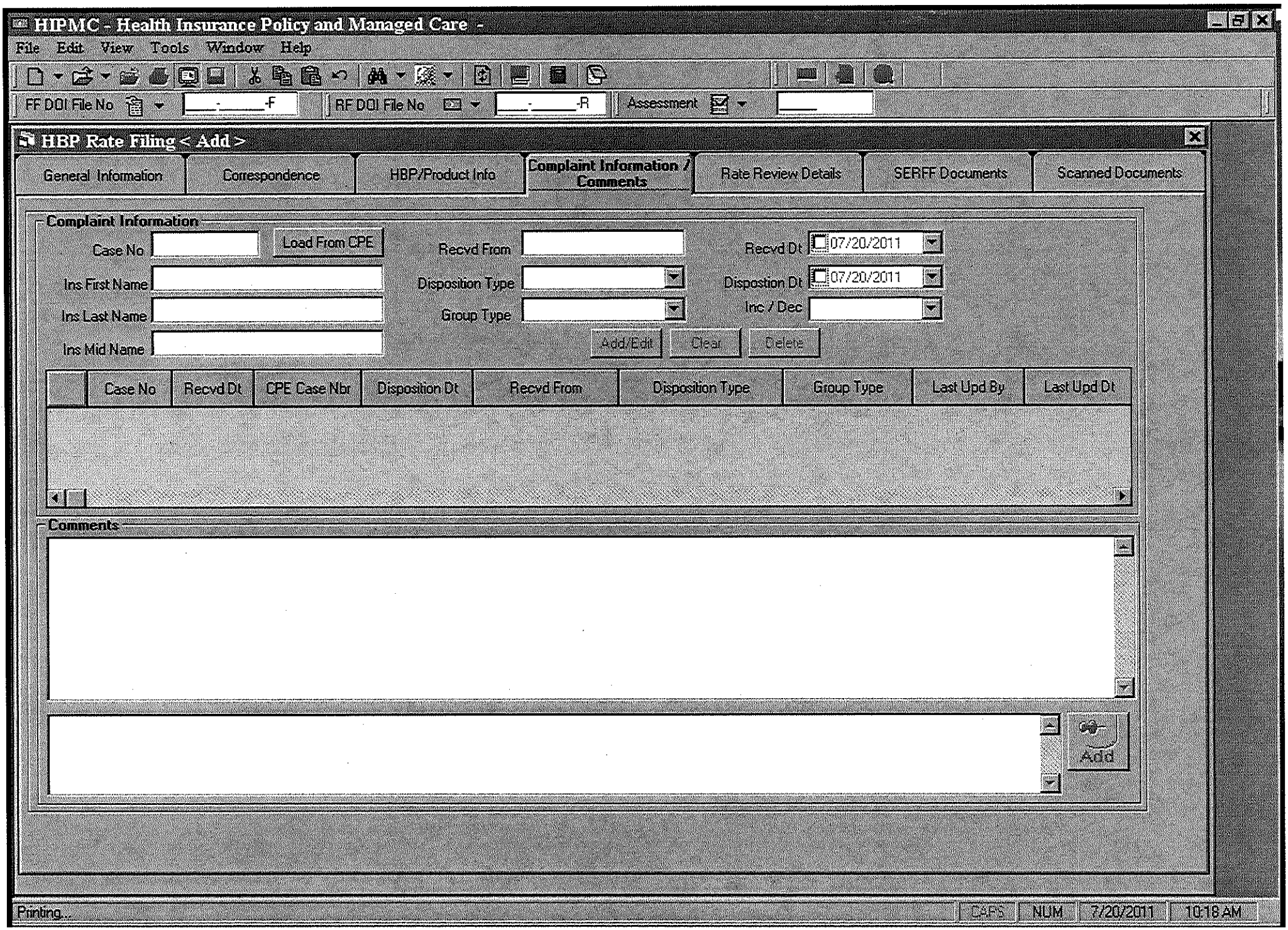
EXHIBIT 9

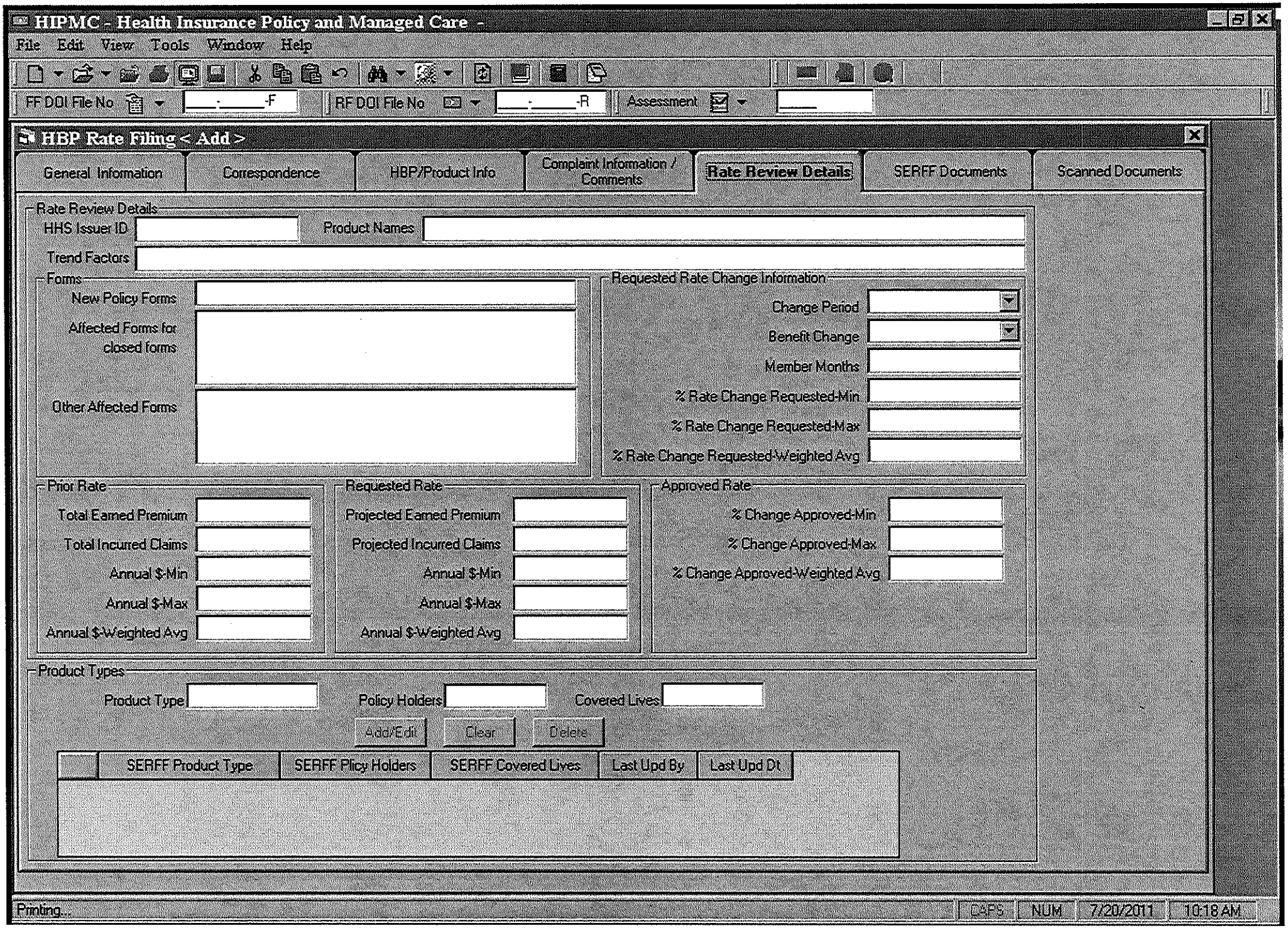
Depiction of Rate Filing Information
Captured by Department's
Internal Oracle Database

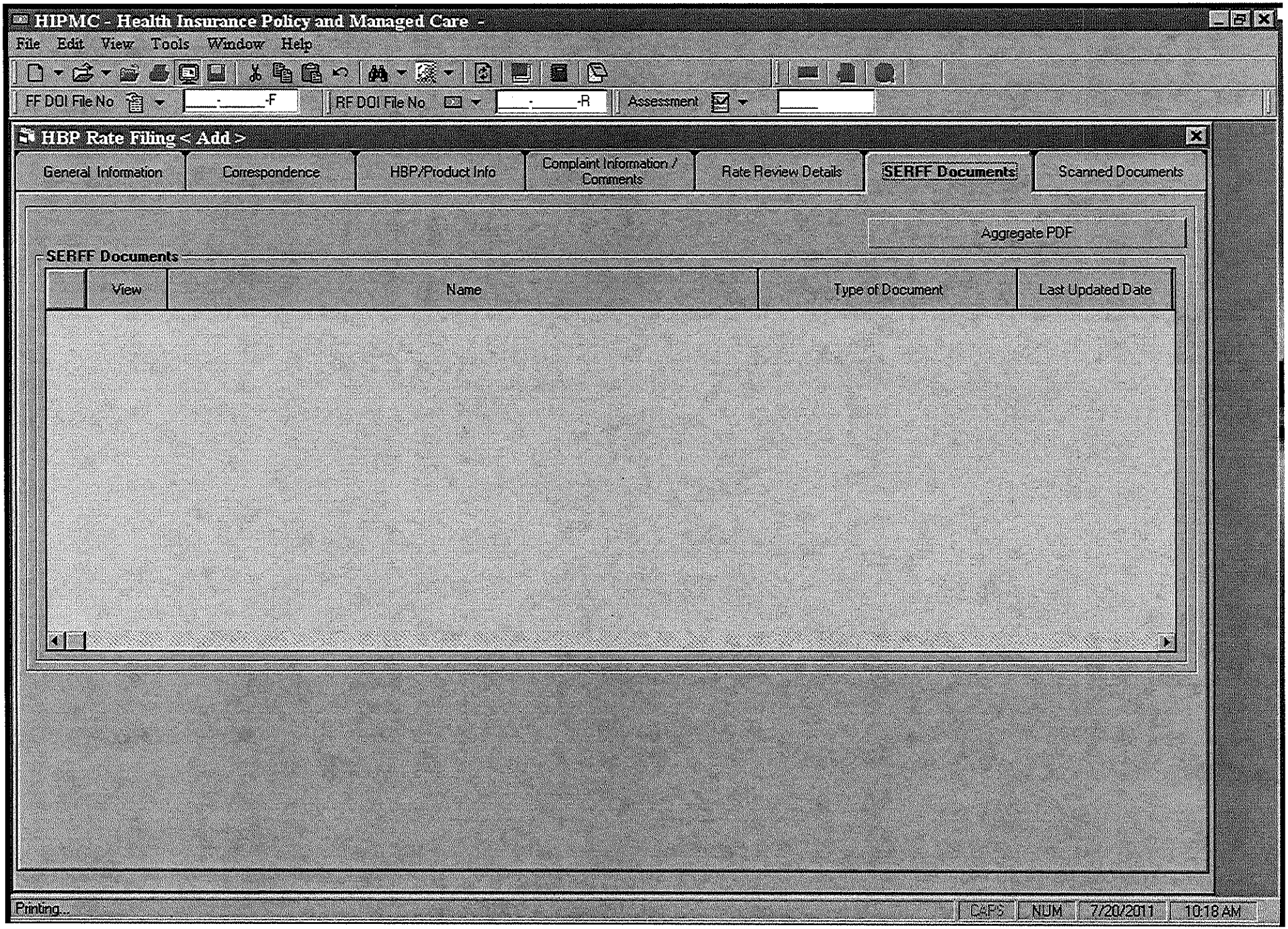

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Correspondence
HBP/Product Info
Complaint Information / Comments
Rate Review Details
SERFF Documents
Scanned Documents
General Information
RF DOI File No
NOTE: (*) indicates required field
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*Date Rcvd 07/20/2011
*NAIC Number
NAIC Group
*FEIN
*DOI ID
Company
Dom State
Status/Reason
Company / Fees
Co Filing No
*Co Letter Date 07/20/2011
Filing Desc
*Assigned To
*Assigned Date 07/20/2011
Lead Form Nbr
Filing Fee
Contact / Address
*Contact Type
*Name
*Address 1
Address 2
Address 3
City
Zip Code
*State KY
*Country USA
*Phone
Fax
Email
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Name
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Address2
Address3
City
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Payment Date 07/20/2011
Payment Type
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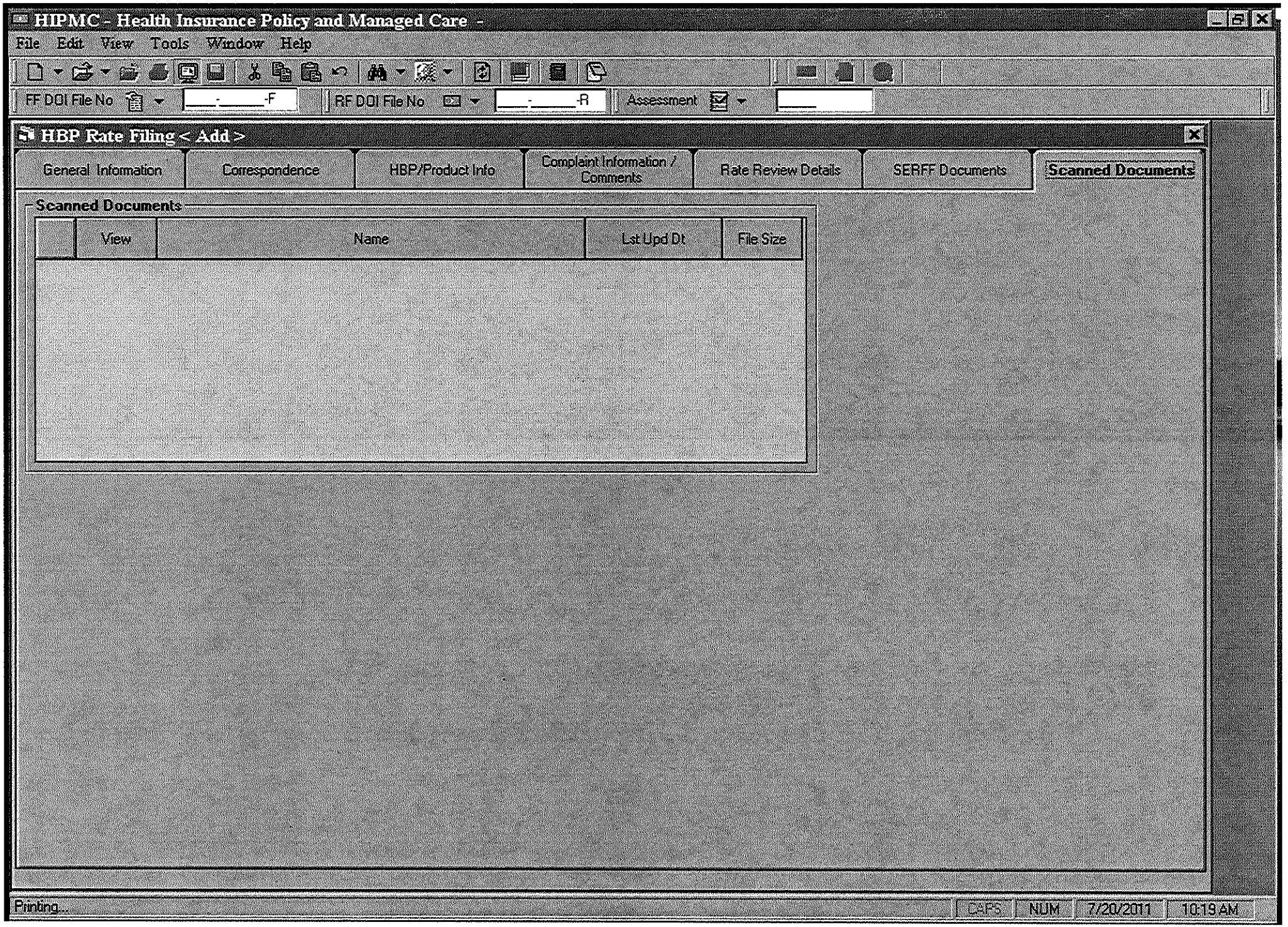

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HBP/Product Info
Complaint Information / Comments
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Scanned Documents
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HIPMC343 Ltr 07/20/2011
Suspense Pull/Deemer Status
By HIPMC343 07/20/2011
50 Day Deemer 07/20/2011
60 Day Deemer 07/20/2011
Pending Reasons
Other
Write Back
*Corr Type
*Contact
Contact Name
Address
Phone ( ) -
Fax ( ) -
Email
Amend Desc
Corr Mode
*Corr Date 07/20/2011
Due Date 07/20/2011
Resp Date 07/20/2011
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Save
Edit
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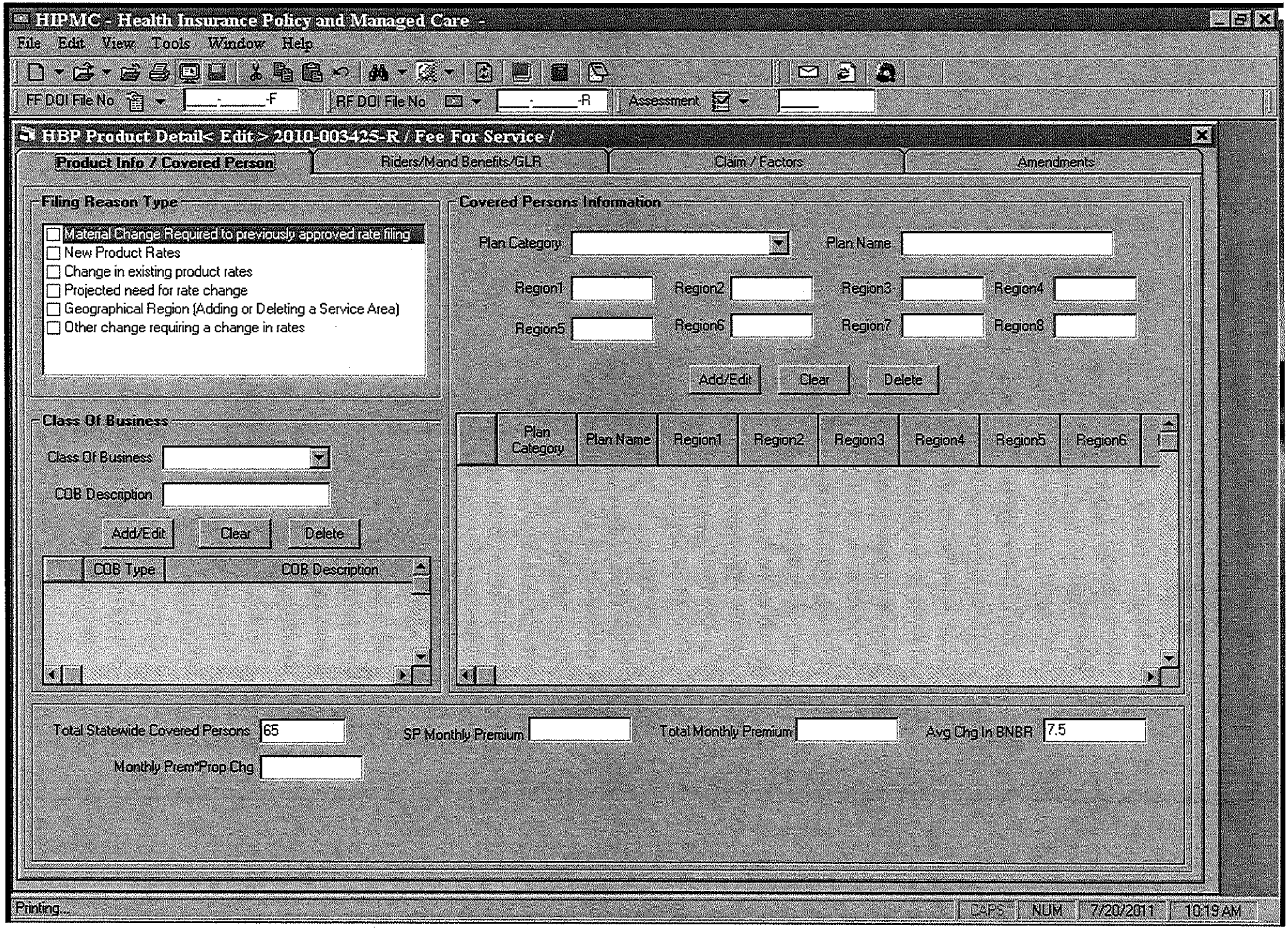

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DOI FF File No
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Req Eff Dt Renew 07/20/2011
Guaranteed Loss Ratio
HCTC
HSA
Hearing
BHBP
ICARE
Filing Inc/Dec
Filing Inc/Dec %
PPACA
Not PPACA-Related
Grandfathered Immed Mkt Reforms
Non-Grandfathered Immed Mkt Reforms
Health Care Reform 2010
Did prev filing also utilize MGLR
Is this a Rate Filing
Filing Status
Action
Action Dt 07/20/2011
Market Segment
Small Group
Large Group
Individual
Association
HIPO
LAH market type
LAH group mkt size
LAH group market expln
TOI / SUB TOI Name
TOI Name
SUB TOI Name
Product Information
Product Type
Rate Change
Inc/Dec
Prev RF DOI File No
Prev RF Eff Dt 07/20/2011
Prod Mkt Net Name
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EOA / Association
Add/Edit
Clear
Delete
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Product Type
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Inc/Dec
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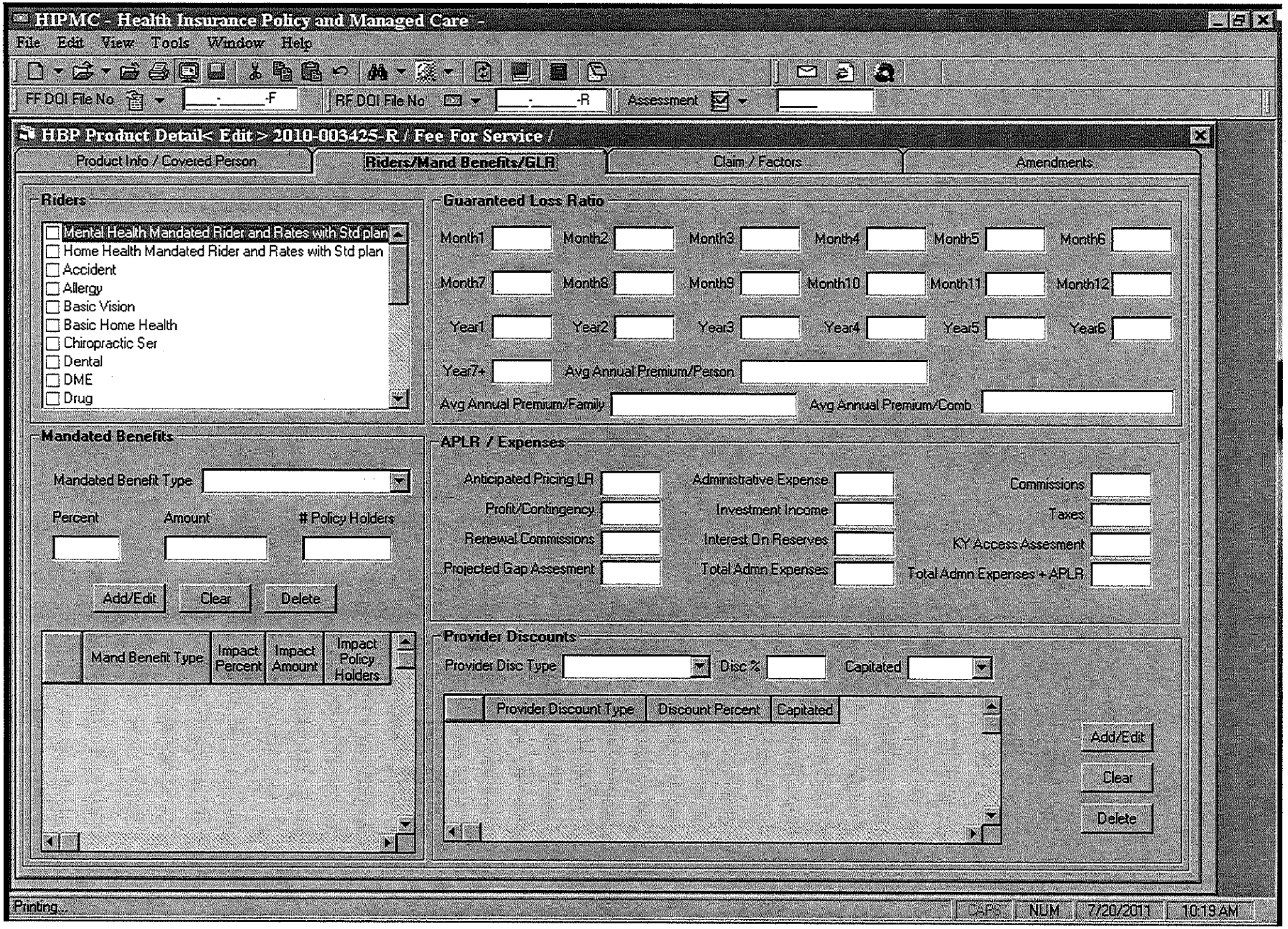

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Recvd From
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Ins First Name
Disposition Type
Disposition Dt 07/20/2011
Ins Last Name
Group Type
Inc / Dec
Ins Mid Name
Add/Edit
Clear
Delete
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CPE Case Nbr
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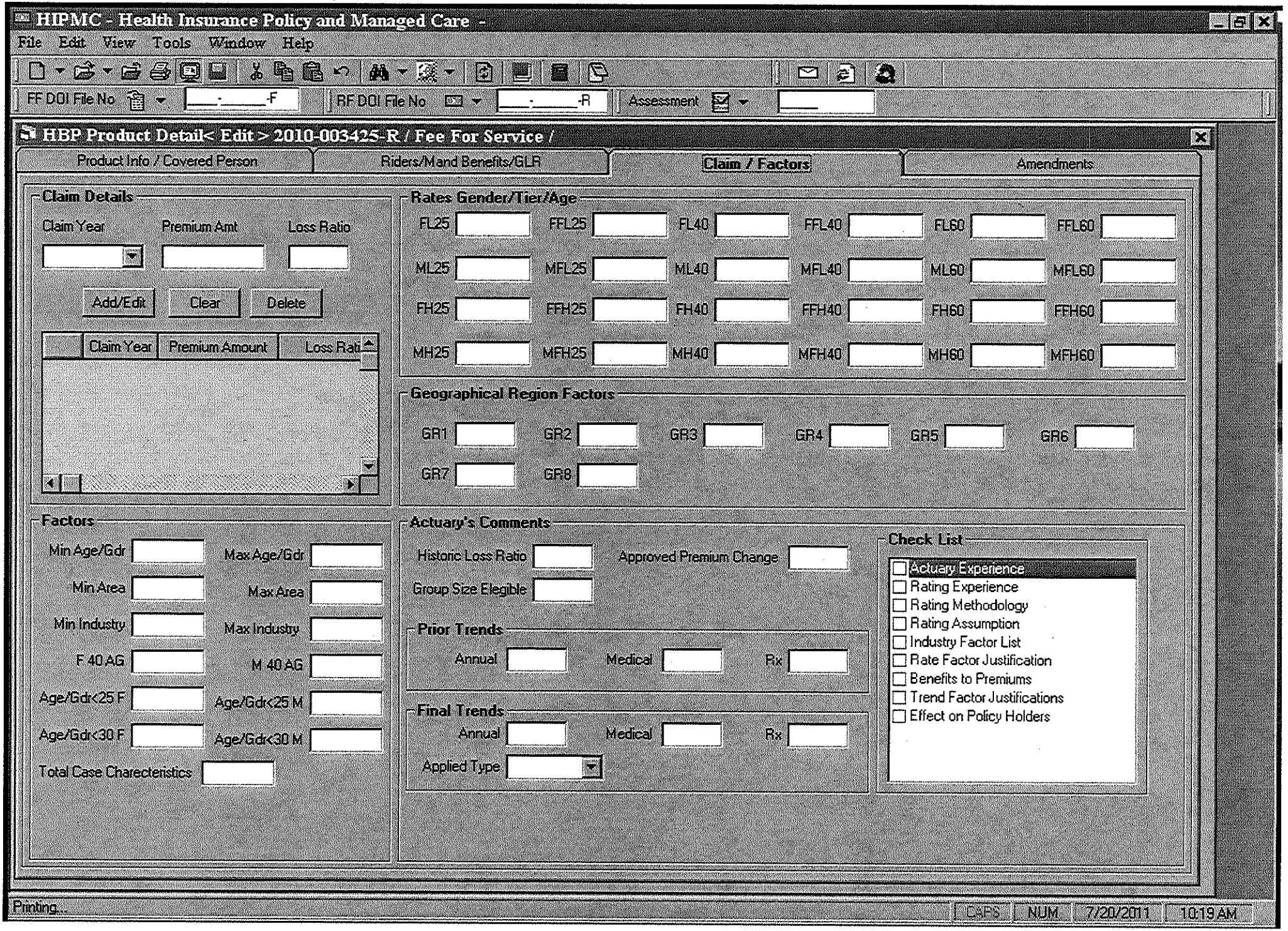

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Trend Factors
Forms
New Policy Forms
Affected Forms for closed forms
Other Affected Forms
Requested Rate Change Information
Change Period
Benefit Change
Member Months
% Rate Change Requested-Min
% Rate Change Requested-Max
% Rate Change Requested-Weighted Avg
Prior Rate
Total Earned Premium
Total Incurred Claims
Annual $-Min
Annual $-Max
Annual $-Weighted Avg
Requested Rate
Projected Earned Premium
Projected Incurred Claims
Annual $-Min
Annual $-Max
Annual $-Weighted Avg
Approved Rate
% Change Approved-Min
% Change Approved-Max
% Change Approved-Weighted Avg
Product Types
Product Type
Policy Holders
Covered Lives
Add/Edit
Clear
Delete
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SERFF Covered Lives
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Last Upd Dt
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HIPMC - Health Insurance Policy and Managed Care -
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HIPMC - Health Insurance Policy and Managed Care -
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Riders/Mand Benefits/GLR
Claim / Factors
Amendments
Filing Reason Type
Material Change Required to previously approved rate filing
New Product Rates
Change in existing product rates
Projected need for rate change
Geographical Region (Adding or Deleting a Service Area)
Other change requiring a change in rates
Covered Persons Information
Plan Category
Plan Name
Region1
Region2
Region3
Region4
Region5
Region6
Region7
Region8
Add/Edit
Clear
Delete
Plan Category
Plan Name
Region1
Region2
Region3
Region4
Region5
Region6
Class Of Business
Class Of Business
COB Description
Add/Edit
Clear
Delete
COB Type
COB Description
Total Statewide Covered Persons
65
SP Monthly Premium
Total Monthly Premium
Avg Chg In BNBR
7.5
Monthly Prem*Prop Chg
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HIPMC - Health Insurance Policy and Managed Care -
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Riders/Mand Benefits/GLR
Claim / Factors
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Riders
Mental Health Mandated Rider and Rates with Std plan
Home Health Mandated Rider and Rates with Std plan
Accident
Allergy
Basic Vision
Basic Home Health
Chiropractic Ser
Dental
DME
Drug
Guaranteed Loss Ratio
Month1 Month2 Month3 Month4 Month5 Month6
Month7 Month8 Month9 Month10 Month11 Month12
Year1 Year2 Year3 Year4 Year5 Year6
Year7+ Avg Annual Premium/Person
Avg Annual Premium/Family Avg Annual Premium/Comb
Mandated Benefits
Mandated Benefit Type
Percent Amount # Policy Holders
Add/Edit Clear Delete
Mand Benefit Type Impact Percent Impact Amount Impact Policy Holders
APLR / Expenses
Anticipated Pricing LR Administrative Expense Commissions
Profit/Contingency Investment Income Taxes
Renewal Commissions Interest On Reserves KY Access Assesment
Projected Gap Assesment Total Admn Expenses Total Admn Expenses + APLR
Provider Discounts
Provider Disc Type Disc % Capitated
Provider Discount Type Discount Percent Capitated
Add/Edit
Clear
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HIPMC - Health Insurance Policy and Managed Care -
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RF DOI File No -R
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Claim / Factors
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Claim Year
Premium Amt
Loss Ratio
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Claim Year
Premium Amount
Loss Rati
Rates Gender/Tier/Age
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ML25 MFL25 ML40 MFL40 ML60 MFL60
FH25 FFH25 FH40 FFH40 FH60 FFH60
MH25 MFH25 MH40 MFH40 MH60 MFH60
Geographical Region Factors
GR1 GR2 GR3 GR4 GR5 GR6
GR7 GR8
Factors
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Max Age/Gdr
Min Area
Max Area
Min Industry
Max Industry
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M 40 AG
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Annual
Medical
Rx
Final Trends
Annual
Medical
Rx
Applied Type
Check List
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Rating Experience
Rating Methodology
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Trend Factor Justifications
Effect on Policy Holders
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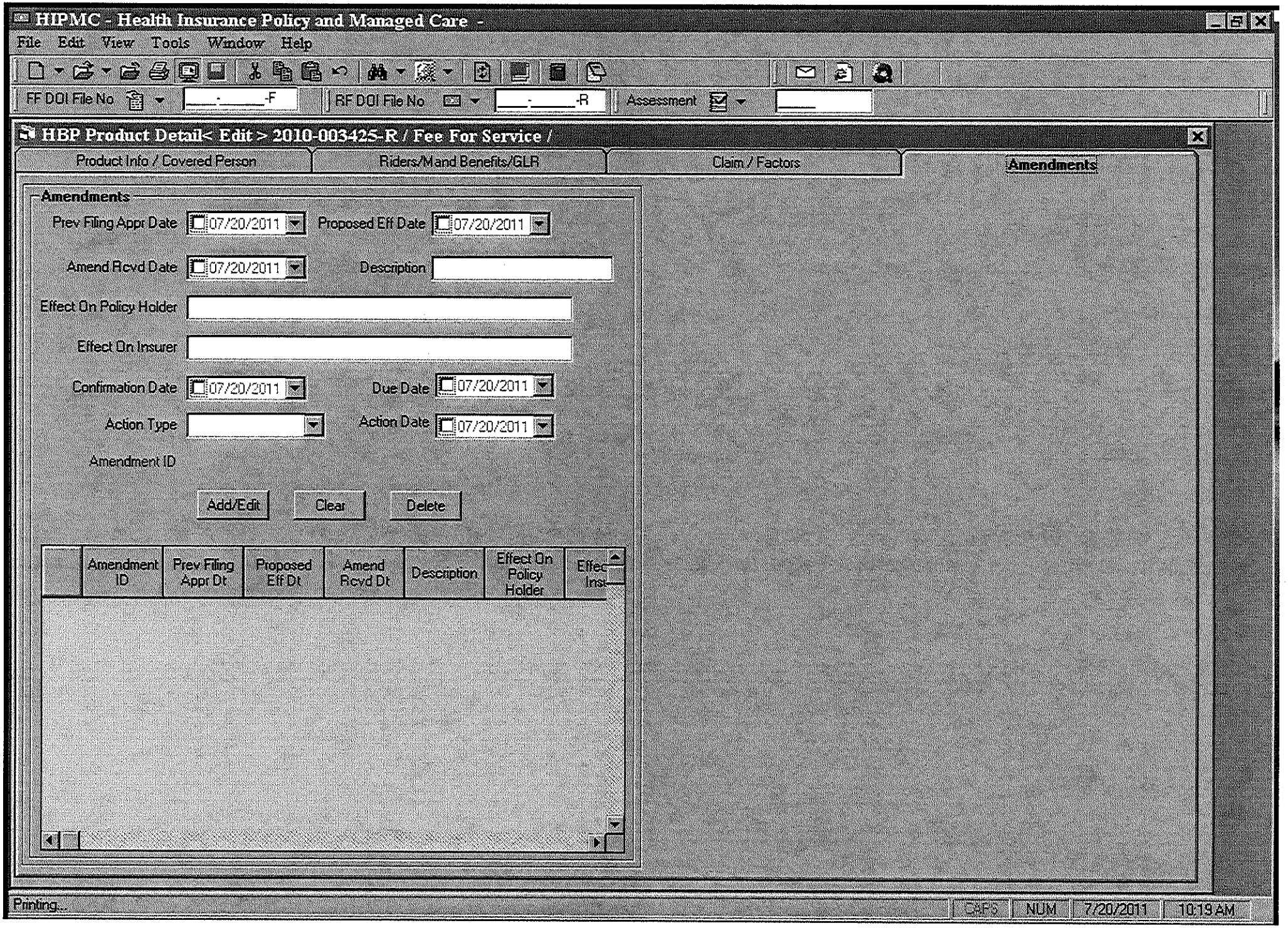

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Product Info / Covered Person
Riders/Mand Benefits/GLR
Claim / Factors
Amendments
Amendments
Prev Filing Appr Date 07/20/2011
Proposed Eff Date 07/20/2011
Amend Rcvd Date 07/20/2011
Description
Effect On Policy Holder
Effect On Insurer
Confirmation Date 07/20/2011
Due Date 07/20/2011
Action Type
Action Date 07/20/2011
Amendment ID
Add/Edit
Clear
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Amendment ID
Prev Filing Appr Dt
Proposed Eff Dt
Amend Rcvd Dt
Description
Effect On Policy Holder
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10:19 AM

EXHIBIT 10

Sample Approval/Disapproval Orders

NOTICE

TO: Stone Mike
13550 Triton Park Blvd.
LOUISVILLE, KY 40223
Anthem Health Plans of Kentucky, Inc.

RE: Health Benefit Plan Rate Filing: 2011-003898-R

Enclosed is the Kentucky Department Of Insurance's order notifying you of the disposition of Anthem Health Plans of Kentucky, Inc.'s health insurance rate filing.

COMMONWEALTH OF KENTUCKY
DEPARTMENT OF INSURANCE

IN RE:

Anthem Health Plans of Kentucky, Inc.
13550 Triton Park Blvd.
LOUISVILLE, KY 40223
Employer Organized Association, PPO-Kentucky Association of Counties & Public Libraries
2011-003898-R

HEALTH RATE FILING APPROVAL ORDER

WHEREAS, the above named filing was submitted to the Kentucky Department of Insurance pursuant to KRS 304.17A-095 and KRS 304.38-050(1) and assigned a Date of Filing on May 17, 2011;

WHEREAS, the Commissioner has reviewed and considered the filing pursuant to KRS 304.17A-095(3) and 806 KAR 17:150 and has taken into consideration the Actuarial Report; and

WHEREAS, the Commissioner has found the filing to be in compliance with KRS 304.17A-095 and 806 KAR 17:150;

THEREFORE, pursuant to KRS 304.2-120, and all other applicable law, the above named filing is hereby APPROVED.

Done and effective this 14th day of July, 2011.

Sharon P. Clark

Sharon P. Clark
Commissioner
Kentucky Department of Insurance

Certificate of Service

I hereby certify that the foregoing Order was by mailing a true copy of same by prepaid certified mail, return receipt requested, to:

Company: Anthem Health Plans of Kentucky, Inc.
Attn: Stone Mike
13550 Triton Park Blvd.
LOUISVILLE, KY 40223

and by messenger mail to:

Hon. Dennis Howard
Counsel
Office of Rate Intervention
1024 Capital Center Drive
Frankfort, Kentucky 40601

This 13th day of July, 2011.

Kim Whitley

Kimberly H. Whitley, Counsel
Office of Legal Services
Insurance Division
215 West Main Street
Frankfort, Kentucky 40602
(502) 564-6032

NOTICE

TO: Joanne Witham
200 Berkeley Street
BOSTON, MA 02117
Time Insurance Company

RE: 2010-003665-R

Enclosed is the Kentucky Department Of Insurance's order notifying you of the disposition of Time Insurance Company's health insurance rate filing.

COMMONWEALTH OF KENTUCKY
DEPARTMENT OF INSURANCE

IN RE:

Time Insurance Company
200 Berkeley Street
BOSTON, MA 02117
Individual,
2010-003665-R

DISAPPROVAL ORDER

WHEREAS, the above named filing was submitted to the Kentucky Department of Insurance pursuant to KRS 304.14-120 and KRS 304.38-050 and assigned a Date of Filing on December 01, 2010; and

WHEREAS, KRS 304.14-120(2) provides that all such filings shall be approved or disapproved within 60 days of the date the form was filed except that the Commissioner may extend for one additional 30 day period; and

WHEREAS, Time Insurance Company has not complied with all requirements for rate approval, specifically:

This filing was granted an extension of the sixty (60) day time period required for approval or disapproval of a form or rate.

The expiration date of the extension period is March 1, 2011.

Additional information was requested on February 14, 2011.

The insurer has not submitted all of the additional requested information at least five (5) days prior to the expiration of the extended time period.

This filing is disapproved according to 806 KAR 14:007 Section 5 (a) 2.

NOW, THEREFORE, pursuant to KRS 304.14-120, KRS 304.14-130, KRS 304.17-380, KRS 304.17-383, 806 KAR 17:070, 806 KAR 17:081, 806 KAR 14:007, filing 2010-003665-R is hereby disapproved.

NOTICE OF APPEAL RIGHTS: Pursuant to KRS 304.2-310(b), any person aggrieved by any Order of the Commissioner must, within 60 days after knowledge of the Order, file written application for a hearing with the Office.

Done and effective this 1st day of March, 2011.

Sharon P. Clark

Sharon P. Clark
Commissioner
Kentucky Department of Insurance

Certificate of Service

This is to certify that the Order Disapproving Rate Filing Application, DOI File No: 2010-003665-R, was served by mailing a true copy of same by prepaid certified mail, return receipt requested, to:

Company: Time Insurance Company
Attn: Joanne Witham
200 Berkeley Street
BOSTON, MA 02117

This 2nd day of March, 2011.

Kim Whitley

Kimberly H. Whitley, Counsel
Office of Legal Services
Insurance Division
215 West Main Street
Frankfort, Kentucky 40602
(502) 564-6032

EXHIBIT 11

Depiction of Rate Filing Information
Captured by SERFF

Kentucky

View Filing Log

Filing Company Anthem health Plans of Kentucy, Inc
TOI: H16I Individual Health - Major Medical
Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)
Filing Type: Rate
Assigned To: Angi Raley (primary), Jim Drennan
Date Submitted: 05/06/2011
State Filing Description:
DOF 5/23/11

SERFF Tr Num: AWLP-127156728
SERFF Status: Assigned
State Tr Num: 2011-003693-R
State Status: Filing Completed
Co Tr Num: AHP 1373 BLUE ACCESS PPO
Disposition Date:

PPACA: Non-Grandfathered Immed Mkt Reforms, Grandfathered Immed Mkt Reforms
*What is PPACA?
PPACA Notes:
Product Name: KY Individual Blue Access PPO 201110
Project Name:
Implementation Date Requested: 10/01/2011
Status of Filing in Domicile:
Domicile Status Comments:
Filing Status Changed: 05/09/2011
Requested Filing Mode: Review & Approval
Submission Type: New Submission

Deemer Date: 07/22/2011
Project Number:
Date Approved in Domicile:
State Status Changed: 07/18/2011

Overall Rate Impact: %
Market Type: Individual
Individual Market Type: Individual
Authors: Ron Hulet , Brian Butler , Bart Mitchell , Michelle Brown , Hannah Deutsch , Andy Henn , Tyler Schwierjohn , Kevin Hurley
Created By: Bart Mitchell
Corresponding Filing Tracking Number:

Submitted By: Ron Hulet

Filing Description: This filing pertains to all plans offered by Anthem, excluding Blue Saver, Economy, Value, CDHP, Premier, Lumenos HSA, and SmartSense products which are filed under the GLR guidelines. In this filing, we will be presenting our development of rates. We are not requesting any rate increase at this time. The base rate was previously increased by 7% on 4/1/2011, within our previously filed and approved trend amount. There are no changes to any rating factors at this time. Although we are removing the previous PPACA adjustments to non grandfathered Plan Transfer and TAA plans to match that of the grandfathered plan. We are also removing the benefit factor adjustment to our non grandfathered Standard High Plan and Blue Modified/Catastrophic plans. In addition, details regarding area factors, age/gender factors, 10% spouse discount, and benefit factors are found in the corresponding exhibits. Please note that this block of business consists of products that are no longer actively marketed with the exception of Blue Basic.

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Kentucky

View Filing Log

Filing Company Anthem health Plans of Kentucy, Inc.
TOI: H16I Individual Health - Major Medical
Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)
Filing Type: Rate
Assigned To: Angi Raley (primary), Jim Drennan
Date Submitted: 05/06/2011
State Filing Description:
DOF 5/23/11

SERFF Tr Num: AWLP-127156728
SERFF Status: Assigned
State Tr Num: 2011-003893-R
State Status: Filing Completed
Co Tr Num: AHP 1373 BLUE ACCESS PPO
Disposition Date:

General Information | Form Schedule | Rate/Rule Schedule | Supporting Documentation | Companies and Contact | Filing Fees | Filing Correspondence

Form Count: 0

Lead Form Number:

Item No.	Schedule Item Status	Form Number	Form Type *	Form Name *	Action *	Action Specific Data	Readability Score	Attachments	Submitted

Form Type Legend:

ADV = Advertising
AEF = Application/Enrollment Form
CER = Certificate
CERA = Certificate Amendment, Insert Page, Endorsement or Rider
DDP = Data/Declaration Pages
FND = Funding Agreement (Annuity, Individual and Group)
MTX = Matrix
NOC = Notice of Coverage
OTH = Other
OUT = Outline of Coverage
PJK = Policy Jacket
POL = Policy/Contract/Fraternal Certificate
POLA = Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider
SCH = Schedule Pages

Icon Legend: - Draft Schedule Item - Open Objection

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Kentucky

View Filing Log

Filing Company Anthem health Plans of Kentucy, Inc
TOI: H16I Individual Health - Major Medical
Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)
Filing Type: Rate
Assigned To: Angi Raley (primary), Jim Drennan
Date Submitted: 05/06/2011
State Filing Description:
DOF 5/23/11

SERFF Tr Num: AWLP-127156728
SERFF Status: Assigned
State Tr Num: 2011-003893-R
State Status: Filing Completed
Co Tr Num: AHP 1373 BLUE ACCESS PPO
Disposition Date:

General Information | Form Schedule | Rate/Rule Schedule | Supporting Documentation | Companies and Contact | Filing Fees | Filing Correspondence

Report Rate Filing to HHS?:	Yes
Filing Method:	SERFF
Rate Change Type:	Neutral
Overall Percentage of Last Rate Revision:	7.000 %
Effective Date of Last Rate Revision:	04/01/2011
Filing Method of Last Filing:	Mail

Company Rate Information

Company Name	Company Rate Change? *	Overall % Indicated Change	Overall % Rate Impact	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program)	Maximum % Change (where required):	Minimum % Change (where required):
Anthem health Plans of Kentucy, Inc	Neutral	0.000 %	0.000 %	$ 0	43709	$ 18128006	0.000 %	0.000 %

View Rate Review Detail

Product Types:	HMO	PPO	EPO	POS	HSA	HDHP	FFS	Other
Number of Policy Holders:		43,661					48	
Number of Covered Lives:		58,483					52	

Item No.	Schedule Item Status	Document Name: *	Affected Form Numbers: (Double R will remove)	Rate Action: *	Rate Action Information	Attach Document)	Submitted)
1		Blue Access PPO Filing 201110		New		Blue Access PPO Filing 2011-10.pdf	Date Submitted: 05/06/2011 By: Ron Hulet

Icon Legend: - Draft Schedule Item - Open Objection - Complete Rate Review Detail - Incomplete Rate Review Detail

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SERFF Tracking Number:	*AWLP-127156728*	*State:*	*Kentucky*
Filing Company:	*Anthem health Plans of Kentucy, Inc*	*State Tracking Number:*	*2011-003893-R*
Company Tracking Number:	*AHP 1373 BLUE ACCESS PPO*		
TOI:	*H16I Individual Health - Major Medical*	*Sub-TOI:*	*H16I.005A Individual - Preferred Provider (PPO)*
Product Name:	*KY Individual Blue Access PPO 201110*		
Project Name/Number:	*/*		

Rate Review Details

COMPANY:

Company Name:	Anthem health Plans of Kentucy, Inc
HHS Issuer Id:	36239
Product Names:	KY Blue Access, Blue Basic (Plan Transfer), TAA Plan, Association Health Plan
Trend Factors:	

FORMS:

New Policy Forms:	
Affected Forms:	
Other Affected Forms:	Individual PPO - Blue Access

REQUESTED RATE CHANGE INFORMATION:

Change Period:	Quarterly
Member Months:	842,892
Benefit Change:	None
Percent Change Requested:	Min: 0.0 Max: 0.0 Avg: 0.0

PRIOR RATE:

Total Earned Premium:	216,516,504.00
Total Incurred Claims:	172,943,530.00
Annual $:	Min: 290.59 Max: 657.01 Avg: 318.72

REQUESTED RATE:

Projected Earned Premium:	176,608,005.00
Projected Incurred Claims:	146,022,742.00
Annual $:	Min: 337.21 Max: 748.25 Avg: 369.50

Kentucky

View Filing Log

Filing Company Anthem health Plans of Kentucy, Inc
TOI: H16I Individual Health - Major Medical
Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)
Filing Type: Rate
Assigned To: Angi Raley (primary), Jim Drennan
Date Submitted: 05/06/2011
State Filing Description:
DOF 5/23/11

SERFF Tr Num: AWLP-127156728
SERFF Status: Assigned
State Tr Num: 2011-003893-R
State Status: Filing Completed
Co Tr Num: AHP 1373 BLUE ACCESS PPO
Disposition Date:

General Information | Form Schedule | Rate/Rule Schedule | Supporting Documentation | Companies and Contact | Filing Fees | Filing Correspondence

Expand All | Collapse All

Schedule Item Status:

- Actuarial Memorandum H
- Income and Expense Worksheet H
- HIPMC-R34 H
- HIPMC-R33 H
- HIPMC-R32 H
- HIPMC-F1 Face Sheet and Verification Form H
- Cover Letter H
- Annual Financial Stmt H
- HIPMC-F-35 H

Icon Legend: - No Action Taken - Satisfied - Bypassed - User Added - Draft Schedule Item - Open Objection

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Kentucky

View Filing Log

Filing Company Anthem health Plans of Kentucy, Inc
TOI: H16I Individual Health - Major Medical
Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)
Filing Type: Rate
Assigned To: Angi Raley (primary), Jim Drennan
Date Submitted: 05/06/2011
State Filing Description:
DOF 5/23/11

SERFF Tr Num: AWLP-127156728
SERFF Status: Assigned
State Tr Num: 2011-003893-R
State Status: Filing Completed
Co Tr Num: AHP 1373 BLUE ACCESS PPO
Disposition Date:

General Information | Form Schedule | Rate/Rule Schedule | Supporting Documentation | Companies and Contact | Filing Fees | Filing Correspondence

Filing Contact Information:

Kevin Hurley, Actuarial Director kevin.hurley@anthem.com
4361 Irwin Simpson Road (513)336-3434 [Phone]
Mason, OH 45040

Filing Company Information:

Anthem health Plans of Kentucy, Inc
13550 Triton Park Blvd
Louisville, KY 40223
(502)889-2530 [Phone]

CoCode: 95120
Group Code: 671
Group Name: WellPoint Inc Group
FEIN Number: 61-0263895
State of Domicile: Kentucky
Company Type: Life, Accident, Health

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Kentucky

View Filing Log

Filing Company Anthem health Plans of Kentucy, Inc
TOI: H16I Individual Health - Major Medical
Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)
Filing Type: Rate
Assigned To: Angi Raley (primary), Jim Drennan
Date Submitted: 05/06/2011
State Filing Description:
DOF 5/23/11

SERFF Tr Num: AWLP-127156728
SERFF Status: Assigned
State Tr Num: 2011-003893-R
State Status: Filing Completed
Co Tr Num: AHP 1373 BLUE ACCESS PPO
Disposition Date:

General Information | Form Schedule | Rate/Rule Schedule | Supporting Documentation | Companies and Contact | Filing Fees | Filing Correspondence

Overall Fees

Fee Required? Yes

Fee Amount: $100.00

Retaliatory? No

Fee Calculation Explanation :

Electronic Funds Transfer

Company	Amount	Date Processed	Transaction #
Anthem health Plans of Kentucy, Inc	$100.00	05/06/2011 02:56 PM	47349741
EFT Total	**$100.00**		

Checks

There is no check information entered on this filing.

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Kentucky

View Filing Log

Filing Company Anthem Health Plans of Kentucky, Inc
TOI: H16I Individual Health - Major Medical
Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)
Filing Type: Rate
Assigned To: Angi Raley (primary), Jim Drennan
Date Submitted: 05/06/2011
State Filing Description:
DOF 5/23/11

SERFF Tr Num: AWLP-127156728
SERFF Status: Assigned
State Tr Num: 2011-003893-R
State Status: Filing Completed
Co Tr Num: AHP 1373 BLUE ACCESS PPO
Disposition Date:

Pending Objections

No Pending Objections

Objection Letters

Status	Created By	Created On	Date Submitted	Responded By	Response Created On	Response Submitted On
Pending Industry Response	Drennan, Jim	07/18/2011				

Create Objection Letter

Amendments

No Amendments

Post Submission Updates

Dispositions

No Dispositions

Create Disposition

Filing Notes

No Filing Notes

Create Reviewer Note | Create Note to Filer

Reminders

No Reminders

Create Reminder

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EXHIBIT 12

Organizational Chart

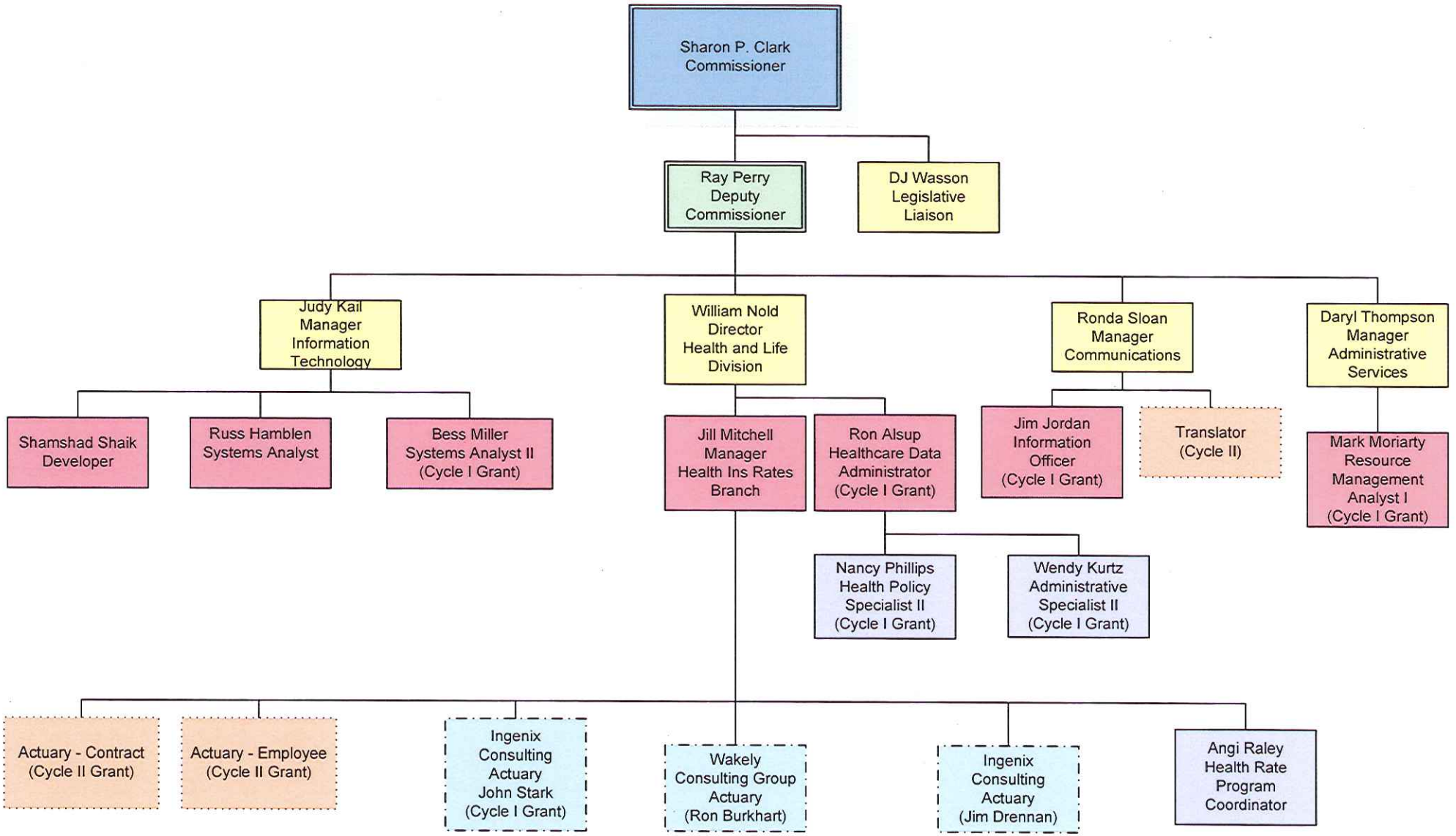

Sharon P. Clark
Commissioner
Ray Perry
Deputy
Commissioner
DJ Wasson
Legislative
Liaison
Judy Kail
Manager
Information
Technology
William Nold
Director
Health and Life
Division
Ronda Sloan
Manager
Communications
Daryl Thompson
Manager
Administrative
Services
Shamshad Shaik
Developer
Russ Hamblen
Systems Analyst
Bess Miller
Systems Analyst II
(Cycle I Grant)
Jill Mitchell
Manager
Health Ins Rates
Branch
Ron Alsup
Healthcare Data
Administrator
(Cycle I Grant)
Jim Jordan
Information
Officer
(Cycle I Grant)
Translator
(Cycle II)
Mark Moriarty
Resource
Management
Analyst I
(Cycle I Grant)
Nancy Phillips
Health Policy
Specialist II
(Cycle I Grant)
Wendy Kurtz
Administrative
Specialist II
(Cycle I Grant)
Actuary - Contract
(Cycle II Grant)
Actuary - Employee
(Cycle II Grant)
Ingenix
Consulting
Actuary
John Stark
(Cycle I Grant)
Wakely
Consulting Group
Actuary
(Ron Burkhart)
Ingenix
Consulting
Actuary
(Jim Drennan)
Angi Raley
Health Rate
Program
Coordinator

EXHIBIT 13

Position Descriptions and Time Allocation Listing

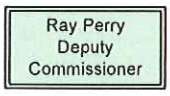
GRANTS TO STATES FOR HEALTH INSURANCE PREMIUM REVIEW – CYCLE I
POSITION DESCRIPTIONS AND TIME ALLOCATION LISTING
KENTUCKY DEPARTMENT OF INSURANCE



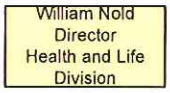
The Commissioner is appointed by the Governor as the head of the Kentucky Department of Insurance. The Commissioner oversees all functions of the Department, including the health insurance rate review process employed by the Department's Health and Life Division. The Commissioner dedicates approximately 5% of her time to rate review and grant activities.



The Legislative Liaison drafts legislation and administrative regulations for the Kentucky Department of Insurance and manages the legislative and promulgation processes. The Legislative Liaison dedicates approximately 5% of her time to rate review and grant activities.



The Deputy Commissioner oversees the Health and Life Division of the Kentucky Department of Insurance. The Deputy Commissioner dedicates approximately 5% of his time to rate review and grant activities.



*[1]The Director of the Health and Life Division directly manages the Division and employees and contractors responsible for health insurance rate reviews. The Director of the Health and Life Division acts as the Project Director for the Cycle I and Cycle II rate review grants. His resume is attached as an exhibit to the Cycle II grant Project Narrative. The Director of the Health and Life Division dedicates approximately 25% of his time to rate review and grant activities.

[1] The Project Director, contract actuaries, and persons who dedicate 50% or more of their time to rate review and grant activities are designated with an asterisk. Included and attached as exhibits to the grant project narrative, you will find a resume (Project Director), the Commonwealth of Kentucky Class Specification for identified positions, biographical information (contract actuaries), and other pertinent contract information required by the grant application instructions.



*The Health Insurance Rates Branch Manager directly oversees persons responsible for rate review activities and manages the rate review process. The Manager of the Health Insurance Rates Branch dedicates approximately 85-95% of her time to rate review and grant activities.

Commonwealth of Kentucky Class Specification Position Description: Title Code 9618. Oversees the supervision and implementation of all staff and programs within an administrative branch to assure economical and efficient operations. Responsible for assuring compliance with branch's budget. Authorizes overtime and leave, recommends salary increases and promotions, and evaluates the performance of subordinates. Analyzes branch operations and recommends policy and procedural changes to increase operating efficiently. Requests subordinates to research and compile administrative reports as needed. Compiles reports as needed and oversees the maintenance of all branch operating records and reports. Prepares and delivers oral and written communications to the general public, courts, attorneys, legislators, and local, state, and federal government officials on all activities of branch operations as requested. Coordinates branch training activities. Reviews supervisory subordinate's recommendations for disciplinary action, and investigates and takes appropriate measures consistent with laws, regulations, policies, and procedures. Serves on inter- or intra- agency task forces or committees as assigned.

Commonwealth of Kentucky Education/Experience Requirements: Graduate of a college or university with a bachelor's degree. Must have five years of professional administrative experience. A master's degree in public or business administration or a related field will substitute for one year of the required experience. Additional administrative or research experience will substitute for the required education on a year-for-year basis.



*Coordinates the rate review process. Receives rate filings and inputs information into the Department's database. Coordinates and receives rate filings received through SERFF. The Health Rate Program Coordinator dedicates approximately 90-100% of her time to rate review and grant activities.

Commonwealth of Kentucky Class Specification Position Description: Title Code 9428. Identifies and analyzes major policy issues requiring resolution prior to formulating an agency's budget request. Coordinates the utilization of information developed by others in developing a comprehensive view of agency management policies. Reviews court decisions, legal opinions, administrative regulations, statutes, or proposed legislation to identify the impact of agency programs and activities. Defines program objectives and identifies beneficiaries and funding sources to assure agency adherence to budget and planning policies. Reviews requests for program deviations and budgetary shifts and recommends solutions. Contacts management officials within programs to secure data on program policies and fiscal resources. Designs projection models to perform ongoing analysis of receipts and expenditures to ensure compliance with budgetary guidelines. Assists in the formulation of agency policies.

Participates in the development of budget requests and advises agency management on program and financial issues.

Commonwealth of Kentucky Education/Experience Requirements: Graduate of a college or university with a bachelor's degree. Must have three years of professional experience in management, administration, statistical analysis, accounting, auditing, planning, or a related field. A master's degree in public or business administration, statistics, planning, accounting, economics, or a related field will substitute for one year of the required experience. Professional experience in management, administration, statistical analysis, accounting, auditing, or a related field will substitute for the required education on a year-for-year basis.

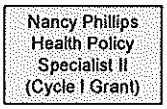
Ron Alsup
Healthcare Data
Administrator
(Cycle I Grant)

*A new position created with Cycle I grant funds, the Healthcare Data Administrator gathers information from insurers and consumers in order to develop a baseline upon which consumer transparency initiatives and the rate review enhancements by the Department will be built. The Healthcare Data Administrator analyzes data and other information received and implements rate review enhancements. He supervises the Health Policy Specialist hired with Cycle I grant funds and is responsible for compiling, drafting, and reporting to the Department of Health and Human Services information regarding grant activities. The Healthcare Data Administrator dedicates 100% of his time to functions associated with the rate review process in Kentucky.

Commonwealth of Kentucky Class Specification Position Description: Title Code 9385. Participates with IT and agency staff in developing and implementing the system documentation standards and methods of data collection. Develops and provides training to personnel cabinet staff and carriers with reference to data collection standards and processes. Evaluates the data collected, identifies data anomalies, and works with carriers to correct those anomalies and prevent recurrences. Analyzes the meaning of the data collected and projects its impact. Participates in the analysis and negotiation of health care proposals and renewals by carriers. Provides advice to the director, deputy commissioner, commissioner, and cabinet secretary with regard to health care utilization. Communicates by letter, telephone, and in person with carriers, executive leadership, legislators, and the general public relating to health and life insurance utilization and costs. Testifies as an expert before legislative committees as needed.

Commonwealth of Kentucky Education/Experience Requirements: Graduate of a college or university with a bachelor's degree in business administration, nursing, insurance, risk management, mathematics or a related field. Must have four years of experience with a health insurance company, health care provider, benefits consulting firm, or similar entity in underwriting, financial analysis, data analysis, statistical evaluations, and/or research analysis

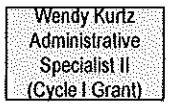
as it relates to health insurance or health care. Education in one of the above fields will substitute for the required experience on a year-for-year basis. Experience in the above fields will substitute for up to two years of the required education.



*A new position created with Cycle I grant funds, the Health Policy Specialist receives rate filings, works directly with existing staff to develop and implement new procedures and forms for a more robust rate review process, reviews and makes recommendations regarding statutory and regulatory revisions, manages consumer questions and coordinates complaint investigations regarding rating practices, and coordinates the rate review processes. The Health Policy Specialist dedicates 100% of her time to rate review and grant activities.

Commonwealth of Kentucky Class Specification Position Description: Title Code 9697. Provides research and analysis of complex health care related issues to include Certificate of Need, health data, health planning, and policy. Organizes and presents health care policy options to management staff. Organizes, directs, and implements studies to determine health care needs and resources for the state. Recommends policies, goals, and strategies. Coordinates and evaluates specific program initiatives related to health care needs. Provides technical assistance to the public, health care organizations, and professional and government officials. Serves as project leader for staff. Trains new staff in procedures and techniques related to the mission of the office.

Commonwealth of Kentucky Education/Experience Requirements: Graduate of a college or university with a bachelor's degree. Must have four years of professional experience in managed health care, Medicaid, Medicare or health insurance claims/systems; and/or health care research, health care planning, health care policy development, or health care administration. Graduate work in planning, public health, public administration, health administration, business administration, or a related field will substitute for the required experience on a year-for-year basis up to two years. Professional experience in the preparation of health care reports, health care audits, or health data tables will substitute for up to two years of required college.



*A new position created with Cycle I grant funds, the Administrative Specialist provides administrative support to the Health Insurance Rates Branch. The Administrative Specialist performs data entry functions to capture more information from rate filings, administratively coordinates the policy rate review functions, and assists in the development of forms necessary to carry out the rate

review processes. The Administrative Specialist dedicates 100% of her time to rate review and grant activities.

Commonwealth of Kentucky Class Specification Position Description: Title Code 9612. Interprets and applies laws, rules, regulations, and policies applicable to the administration of agency programs. Reviews proposed state and federal legislative or administrative regulation changes to determine the need for policy and procedure changes. Reviews and develops procedural alternatives. Monitors organizational unit budget status and makes recommendations to superiors in terms of internal adjustments necessary to stay within the budget. Studies organizational unit's needs for additional equipment, supplies, and materials and makes recommendations for the requisition thereof. Reviews, compiles, and/or prepares operational records and reports for compliance with federal, state, and agency reporting requirements. Contacts field personnel by phone, in writing, or in person to resolve inconsistencies or inaccuracies in records and/or reports. Attends inter- or intra- unit meetings on behalf of superiors. Drafts correspondence or other responses or administrators, legislators, attorneys, clients, and/or the general public which require the interpretation and application of policies and procedures. Makes informational presentations to organizations and the general public.

Commonwealth of Kentucky Education/Experience Requirements: Graduate of a college or university with a bachelor's degree. Must have one year of professional, administrative, or business experience. Additional education will substitute for the required experience on a year-for-year basis. Additional administrative, business, research, and/or clerical experience will substitute for the required education on a year-for-year basis.



*An actuarial firm under contract with the Department to provide actuarial reviews of health insurance rate filings, determine whether the rate filings are in compliance with Kentucky law, provide consulting on actuarial issues, and provide analysis of the rate filings as appropriate. The primary actuary from the firm assigned to health benefit plan rate review is James E. Drennan who dedicates approximately 100% of his time, as limited by the contractual arrangement, to rate review. Actuary is not paid from federal grant funds.

Name of Consultant: James E. Drennan – qualifications outlined in bio which is an exhibit to the grant Project Narrative. Selected through Kentucky's procurement process, KRS Chapter 45A. Bids are accepted after solicitation through the Request for Proposal process. Responses are reviewed and scored by the Department of Insurance. Vendor is chosen based on scores achieved after a review of the Department's evaluation criteria against the vendor responses.

Organizational Affiliation: Ingenix Consulting

Nature of Services to be Rendered: Provides actuarial review of health insurance rate filings for compliance with Kentucky Revised Statutes, Kentucky Administrative Regulations, Departmental Policies, and recognized actuarial standards and guidelines and make recommendations to the Division Director for approval/disapproval. Provides consulting services on actuarial issues. Determines financial impact on the health insurance market for proposed legislation to include analysis and impact of mandated benefits under the direction of the DOI. Examines and actuarially analyzes loss reserves, premium collection plans, retrospective adjustments, and all other aspects affecting the financial condition of health insurers doing business in Kentucky. Provides actuarial services in conjunction with financial and market conduct examinations. Establish rates and reserves for Kentucky Access. Testifies before the legislature of actuarial issues. Performs follow-up work and prepares written reports as necessary or requested relating to health insurance rate filings. Is available to perform required services at the DOI located at 215 West Main Street, Frankfort, Kentucky, 40601 or at any other location to which the DOI may be relocated.

Relevance of Service to the Project: Actuary provides actual review of health insurance premium rate filings. Given the objectives of the project to enhance the rate review process, Mr. Drennan's reviews are integral in that he can identify areas related to the rate filings where the Department may need to enhance its legal authority to collect certain information and enhance its databases that collect rate data and assist the actuary in his review. Consequently, the actuary's expertise in identifying possible rate review enhancements is directly related to the program's objectives.

Number of Days of Consultation: Contract period is in effect July 1, 2010, through June 30, 2012. The contract is not limited by the number of days but rather by a maximum contract price of $480,000.00 for fiscal year 2011 and $480,000.00 for fiscal year 2012. Travel expenses are also limited to $68,100.00 for fiscal year 2011 and $68,100.00 for fiscal year 2012.

Expected Rate of Consultation: $340.00 per hour

Method of Accountability: Actuary reports directly to Jill Mitchell, the Manager of the Health Insurance Rates Branch. Ms. Mitchell reviews all rate review determinations and the methods of review utilized by the actuaries. Ms. Mitchell also accepts, considers, and presents for review to the Department, recommendations submitted by the actuary.

Wakely Consulting Group Actuary (Ron Burkhart) An actuarial firm under contract with the Department to provide actuarial reviews of health insurance rate filings, determine whether the rate filings are in compliance with Kentucky law, provide consulting on actuarial issues, and provide analysis of the rate filings as appropriate. The primary actuary from the firm assigned to health insurance rate review is Ron Burkhart. Mr. Burkhart primarily reviews rates for non-health benefit plan products but dedicates approximately 25-30% of his time, as limited by the contractual arrangement, to rate review for health benefit plans. Actuary is not paid from federal grant funds.

Ingenix Consulting Actuary John Stark (Cycle I Grant) *With Cycle I grant funds, the Department amended the contract with Ingenix Consulting to add a Consulting Actuary, on a part-time basis, to assist the Department in identifying enhancements to the rate review process that should be made. John Stark was added as the Consulting Actuary. The Consulting Actuary analyzes the Department's rate review process, databases, actuarial and analysis tools, and federal and state rate review requirements. Based on his analysis, the consulting actuary provides advice to the Department regarding enhancements that might be made to the process in order to develop a more effective rate review process. The Consulting Actuary dedicates approximately 100% of his time, as limited by the contractual arrangement, to rate review and grant activities under the contract.

Name of Consultant: John Stark – qualifications outlined in bio which is an exhibit to the grant Project Narrative. Selected through Kentucky's procurement process, KRS Chapter 45A. Bids are accepted after solicitation through the Request for Proposal process. Responses are reviewed and scored by the Department of Insurance. Vendor is chosen based on scores achieved after a review of the Department's evaluation criteria against the vendor responses.

Organizational Affiliation: Ingenix Consulting

Nature of Services to be Rendered: Provides actuarial review of health insurance rate filings for compliance with Kentucky Revised Statutes, Kentucky Administrative Regulations, Departmental Policies, and recognized actuarial standards and guidelines and make recommendations to the Division Director for approval/disapproval. Provides consulting services on actuarial issues. Determines financial impact on the health insurance market for proposed legislation to include analysis and impact of mandated benefits under the direction of the DOI. Examines and actuarially analyzes loss reserves, premium collection plans, retrospective adjustments, and all other aspects affecting the financial condition of health insurers doing business in Kentucky. Provides actuarial

services in conjunction with financial and market conduct examinations. Establish rates and reserves for Kentucky Access. Testifies before the legislature of actuarial issues. Performs follow-up work and prepares written reports as necessary or requested relating to health insurance rate filings. Is available to perform required services at the DOI located at 215 West Main Street, Frankfort, Kentucky, 40601 or at any other location to which the DOI may be relocated.

Relevance of Service to the Project: The Cycle II program for the State of Kentucky is for the purposes of enhancing the Department's review of health insurance rates. The actuary's main function is to review the Department's rate review process and federal law requirements and make rate review enhancement recommendations. Consequently, the actuary's expertise in identifying possible rate review enhancements is directly related to the program's objectives.

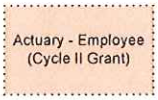
Number of Days of Consultation: Contract period is in effect July 1, 2010, through June 30, 2012. The contract is not limited by the number of days but rather by a maximum contract price of $405,000.00 for fiscal year 2011 and $135,000.00 for fiscal year 2012. Travel expenses are also limited to $42,450.00 for fiscal year 2011 and $14,150.00 for fiscal year 2012.

Expected Rate of Consultation: $340.00 per hour

Method of Accountability: Actuary reports directly to Jill Mitchell, the Manager of the Health Insurance Rates Branch. Ms. Mitchell reviews all rate review determinations and the methods of review utilized by the actuaries. Ms. Mitchell also accepts, considers, and presents for review to the Department, recommendations submitted by the actuary.

Actuary - Contract (Cycle II Grant)

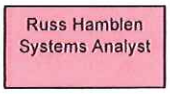
A new contract expected to be negotiated with Cycle II grant funds, the actuary will, on a part-time basis, provide rate application reviews with respect to specific insurers. These reviews will assist the Department in determining the effect that underwriting has on rates, develop a process for identifying and reporting rate information to the Exchange, develop a process for certifying qualified health plans for the Exchange, determine how to normalize rating/underwriting methodologies given insurers' underlying underwriting differences, and develop a process for auditing quotes within the Exchange. The Actuary will dedicate approximately 100% of his/her time, as limited by the contractual arrangement, to rate review and grant activities under the contract.



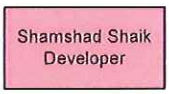
A new employee expected to be hired using Cycle II grant funds, the Actuary will be employed full-time and, given state salary restrictions, will likely be a new-comer to the actuarial field. The Department expects that this Actuary will be dedicated to the Department's initiatives toward enhancing the established rate review process. This Actuary will provide impartial and unbiased expert advice to the Department with respect to the actuaries' role in reviewing health insurance rate filings. This advice will assist the Department in identifying data analysis techniques, data needs, data integration proposals, and insurer data request process that will enhance rate reviews. Further, this Actuary will develop working relationships with company actuaries in order to better understand rate development and interact with insurers during the rate review process.



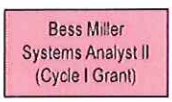
Oversees all Information Technology functions for the Kentucky Department of Insurance. The Manager of Information Technology dedicates approximately 5% of her time to rate review and grant activities.



Analyzes and develops system enhancements for the Kentucky Department of Insurance. The Systems Analyst dedicates approximately 10-15% of his time to rate review and grant activities.



Develops system enhancements for the Kentucky Department of Insurance. The Systems Developer dedicates approximately 10-15% of her time to rate review and grant activities.



*A new position created with Cycle I grant funds, the Systems Analyst is devoted to analyzing and developing systems enhancements specifically for the rate review process in the Health and Life Division. The Systems Analyst coordinates any SERFF enhancements with IT enhancements of the Department. The Systems Analyst is working with other Department Analysts to develop a user-friendly website for consumers containing rate filing information, rate review process questions and answers, and access to rate filing documentation. The Systems Analyst dedicates 100% of her time to rate review and grant activities.

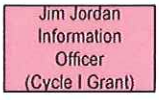
Commonwealth of Kentucky Class Specification Position Description: Title Code 7365. Analyzes user requests for the development or modification of computer requests. Conducts feasibility analysis for proposed systems. Designs the format of input and output documents, screens, and files to meet the user's objectives. Writes specifications for systems development. Works

with user in developing new or modifying existing computer systems. Prepares and maintains systems documentation. Tests all phases of the system to ensure that user needs are met. Writes procedures for the customer's use in operating the system. Trains the user in the operation of the system. Identifies and corrects production problems. Writes, tests, and debugs computer programs. Provides technical assistance to personnel involved in implementing computer systems. Creates, presents, or coordinates training courses of a routine nature for data processing personnel.

Commonwealth of Kentucky Education/Experience Requirements: Graduate of a college or university with a bachelor's degree. Must have one year of professional experience in computer programming and/or systems analysis. Related technical or vocational training will substitute for the bachelor's degree requirement on a year-for-year basis. A master's degree in computer science will substitute for the one year of required experience. Experience in computer programming, systems analysis, and/or computer operations will substitute for the bachelor's degree requirement on a year-for-year basis. Experience in business or public administration, statistics, research, or a related field will substitute for the bachelor's degree requirement on a year-for-year basis.



Manages the Communications Branch for the Kentucky Department of Insurance. The Manager of Communications dedicates approximately 5% of her time to rate review and grant activities.



*A new position created with Cycle I grant funds, the Information Officer educates health insurance consumers about Kentucky's on-going rate review process and future changes expected under the Patient Protection and Affordable Care Act. Primarily, the Information Officer drafts narratives for Department publications and Internet sites. The Information Officer also assists other member of the rate review team with writing and communications related to their work. The Information Officer dedicates 100% of his time to rate review and grant activities.

Commonwealth of Kentucky Class Specification Position Description: Title Code 8125. Covers assignments in the gathering of material for the agency's publications. Develops informational materials such as brochures, posters, and other graphic arts publications to be distributed. Writes and edits news releases, bulletins, reports and other informational materials. Attends public events and conducts interviews to gather facts. Performs research to verify the reliability of material used for news releases and other information to be published. Responds to media

inquiries of departmental activities. Files newspaper clippings, news releases, fact sheets, and bibliographical sketches for use in research activities.

Commonwealth of Kentucky Education/Experience Requirements: Graduate of a college or university with a bachelor's degree. Journalistic, public relations or experience related to the duties and responsibilities of this class series will substitute for the required education on a year-for-year basis.

Translator (Cycle II) A new contract expected to be negotiated with Cycle II grant funds, the Translator will, on a part-time basis, make certain that consumer rate communications are culturally and linguistically appropriate given the demographics in the state of Kentucky. The Translator will also ensure that rate summaries are understandable and in the appropriate language needed to best serve Kentuckians. The Translator will be utilized on an as-needed basis and will dedicate approximately 100% of his/her time, as limited by the contractual arrangement, to rate review and grant activities under the contract.

Daryl Thompson Manager Administrative Services Manages the financial, budget, facilities, and other administrative functions for the Kentucky Department of Insurance. The Manager of Administrative Services dedicates approximately 5% of his time to grant activities.

Mark Moriarty Resource Management Analyst I (Cycle I Grant) *A new position created with Cycle I grant funds, the Resource Management Analyst monitors and tracks grant fund receipts and expenditures, manages grant resources, compiles operational reports for federal grant reporting, and performs audit functions regarding grant funding. He assesses technology, training, communications, physical space, and supply needs of the Department regarding the grant. The Resource Management Analyst facilitates acquisitions and determines priority of the grant rate review plan items. The Resource Management Analyst dedicates 100% of his time to grant activities.

Commonwealth of Kentucky Class Specification Position Description: Title Code 7320. Assists program managers in determining information and data requirements and communicates those needs to information systems staff. Facilitates problem resolution between programmatic staff and information systems staff. Analyzes alternatives for collection, manipulation, storage, retrieval and dissemination of information, and develops recommendations accordingly. Works closely with agency records officer to ensure that information systems are managed in accordance with public records laws. Assists with development of the agency information

resources plan. Serves as a resource to agency management during evaluation and monitoring of information technology projects. Assists with procurement review. Assists with preparation of information for presentation to agency executives. Reviews proposed legislation for impact on agency information systems. Promotes use of statewide information resource management guidelines and technology standards. Recommends to supervisor opportunities for sharing information resources through the development of inter-departmental systems.

Commonwealth of Kentucky Education/Experience Requirements: Graduate of a college or university with a bachelor's degree. Must have one year of systems analysis, business administration, or public administration experience. Related technical or vocational training will substitute for the bachelor's degree requirement on a year-for-year basis. A master's degree in computer science, business, or public administration will substitute for the experience requirement. Experience in computer programming, systems analysis, information services, research and statistics, business administration, or public administration will substitute for the bachelor's degree requirement on a year-for-year basis.

EXHIBIT 14

Commonwealth of Kentucky
Class Specifications for
Rate Review Personnel

COMMONWEALTH OF KENTUCKY
CLASS SPECIFICATION

CLASS TITLE: ADMINISTRATIVE BRANCH MANAGER	
TITLE CODE: 9618	**GROUP:** GENERAL ADMINISTRATION
SELECTION METHOD: 100% QUAL **REV.** 08-04 **NO. TEST QUESTIONS:** **SELECTION ID:** 6128 **EXAM NO.:**	**SALARY:** (MIN-MID) $3553.88 - $4707.96 **GRADE:** 16 **SPECIAL ENTRANCE RATE:** No
POSITIONS IN THIS CLASS GENERALLY REPORT TO: DIVISION DIRECTOR	
PRIMARY USER AGENCY: ALL AGENCIES MAY USE THIS CLASS	

CHARACTERISTICS OF THE CLASS: CHARACTERISTICS OF A CLASS ARE GENERAL STATEMENTS INDICATING THE LEVEL OF RESPONSIBILITY AND DISCRETION OF POSITIONS IN THAT JOB CLASSIFICATION.

Provides overall management for all sections and units within an administrative branch; and performs other duties as required.

MINIMUM REQUIREMENTS: MINIMUM REQUIREMENTS ARE COMPREHENSIVE STATEMENTS OF THE MINIMUM BACKGROUND AS TO EDUCATION, EXPERIENCE, AND OTHER QUALIFICATIONS WHICH WILL BE REQUIRED IN ALL CASES AS EVIDENCE OF AN APPOINTEE'S ABILITY TO PERFORM THE WORK PROPERLY.

EDUCATION: Graduate of a college or university with a bachelor's degree.

EXPERIENCE: Must have five years of professional administrative experience.

SUBSTITUTION CLAUSE:

EDUCATION: A master's degree in public or business administration or a related field will substitute for one year of the required experience.

EXPERIENCE: Additional administrative or research experience will substitute for the required education on a year-for-year basis.

SPECIAL REQUIREMENTS: (AGE, LICENSURE, REGULATION, ETC.)

None

EXAMPLES OF DUTIES OR RESPONSIBILITIES OF THE CLASSIFICATION: EXAMPLES OF DUTIES OR RESPONSIBILITIES ARE NOT TO BE CONSTRUED AS DESCRIBING WHAT THE DUTIES OR RESPONSIBILITIES OF ANY POSITION SHALL BE AND ARE NOT TO BE CONSTRUED AS LIMITING THE APPOINTING AUTHORITY'S ABILITY TO ADD TO, OR OTHERWISE ALTER THE DUTIES AND RESPONSIBILITIES OF A POSITION. THE USE OF AN INDIVIDUAL EXPRESSION OR ILLUSTRATION AS TO DUTIES OR RESPONSIBILITIES SHALL NOT BE REGARDED AS EXCLUDING ASSIGNMENT OF OTHERS NOT MENTIONED WHICH ARE OF SIMILAR KIND OR QUALITY.

Oversees the supervision and implementation of all staff and programs within an administrative branch to assure economical and efficient operations. Responsible for assuring compliance with branch's budget. Authorizes overtime and leave, recommends salary increases and promotions and evaluates the performance of subordinates. Analyzes branch operations and recommends policy and procedural changes to increase operating efficiently. Requests subordinates to research and compile administrative reports as needed. Compiles reports as needed and oversees the maintenance of all branch operating records and reports. Prepares and delivers oral and written communications to the general public, courts, attorneys, legislators, local, state and federal government officials on all activities of branch operations as requested. Coordinates branch training activities. Reviews supervisory subordinate's recommendations for disciplinary action, and investigates and takes appropriate measures consistent with laws, regulations, policies and procedures. Serves on inter- or intra- agency task forces or committees as assigned.

TYPICAL WORKING CONDITIONS AND UNIQUE PHYSICAL REQUIREMENTS: INCUMBENTS IN THIS CLASSIFICATION WILL TYPICALLY PERFORM THEIR PRIMARY JOB DUTIES UNDER THESE CONDITIONS, HOWEVER, THESE CONDITIONS MAY CHANGE ON OCCASION IN PERFORMING THE DUTIES OF AN INDIVIDUAL POSITION.

Work is primarily performed in an office setting. Minimal travel may be required.

ADDITIONAL REQUIREMENTS:

Applicants and employees in this classification may be required to submit to a drug screening test and background check.

DATE CLASS ESTABLISHED: 06/16/1982	DATE OF LAST REVISION: 02/24/2006
THE COMMONWEALTH OF KENTUCKY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, SEXUAL ORIENTATION, GENDER IDENTITY, ANCESTRY OR VETERAN STATUS. REASONABLE ACCOMMODATIONS ARE PROVIDED UPON REQUEST.	

COMMONWEALTH OF KENTUCKY
CLASS SPECIFICATION

CLASS TITLE: INTERNAL POLICY ANALYST II	
TITLE CODE: 9428	**GROUP:** BUDGET AND FINANCIAL MANAGEMENT
SELECTION METHOD: 100% QUAL **REV.** 08-04 **NO. TEST QUESTIONS:** **SELECTION ID:** 6068 **EXAM NO.:**	**SALARY:** (MIN-MID) $2937.20 - $3890.90 **GRADE:** 14 **SPECIAL ENTRANCE RATE:** No
POSITIONS IN THIS CLASS GENERALLY REPORT TO: VARIES	
PRIMARY USER AGENCY: ALL AGENCIES MAY USE THIS CLASS	

CHARACTERISTICS OF THE CLASS: CHARACTERISTICS OF A CLASS ARE GENERAL STATEMENTS INDICATING THE LEVEL OF RESPONSIBILITY AND DISCRETION OF POSITIONS IN THAT JOB CLASSIFICATION.

Conducts studies of operational policies and procedures primarily across agency organizational unit lines for the purpose of defining agency program effectiveness and projecting agency budgetary needs and requests; and performs other duties as required.

MINIMUM REQUIREMENTS: MINIMUM REQUIREMENTS ARE COMPREHENSIVE STATEMENTS OF THE MINIMUM BACKGROUND AS TO EDUCATION, EXPERIENCE, AND OTHER QUALIFICATIONS WHICH WILL BE REQUIRED IN ALL CASES AS EVIDENCE OF AN APPOINTEE'S ABILITY TO PERFORM THE WORK PROPERLY.

EDUCATION: Graduate of a college or university with a bachelor's degree.

EXPERIENCE: Must have three years of professional experience in management, administration, statistical analysis, accounting, auditing, planning or a related field.

SUBSTITUTION CLAUSE:

EDUCATION: A master's degree in public or business administration, statistics, planning, accounting, economics or a related field will substitute for one year of the required experience.

EXPERIENCE: Professional experience in management, administration, statistical analysis, accounting, auditing or a related field will substitute for the required education on a year-for-year basis.

SPECIAL REQUIREMENTS: (AGE, LICENSURE, REGULATION, ETC.)

None

EXAMPLES OF DUTIES OR RESPONSIBILITIES OF THE CLASSIFICATION: EXAMPLES OF DUTIES OR RESPONSIBILITIES ARE NOT TO BE CONSTRUED AS DESCRIBING WHAT THE DUTIES OR RESPONSIBILITIES OF ANY POSITION SHALL BE AND ARE NOT TO BE CONSTRUED AS LIMITING THE APPOINTING AUTHORITY'S ABILITY TO ADD TO, OR OTHERWISE ALTER THE DUTIES AND RESPONSIBILITIES OF A POSITION. THE USE OF AN INDIVIDUAL EXPRESSION OR ILLUSTRATION AS TO DUTIES OR RESPONSIBILITIES SHALL NOT BE REGARDED AS EXCLUDING ASSIGNMENT OF OTHERS NOT MENTIONED WHICH ARE OF SIMILAR KIND OR QUALITY.

Identifies and analyzes major policy issues requiring resolution prior to formulating an agency's budget request. Coordinates the utilization of information developed by others in developing a comprehensive view of agency management policies. Reviews court decisions, legal opinions, administrative regulations, statutes or proposed legislation to identify the impact of agency programs and activities. Defines program objectives and identifies beneficiaries and funding sources to assure agency adherence to budget and planning policies. Reviews requests for program deviations and budgetary shifts and recommends solutions. Contacts management officials within programs to secure data on program policies and fiscal resources. Designs projection models to perform ongoing analysis of receipts and expenditures to ensure compliance with budgetary guidelines. Assists in the formulation of agency policies. Participates in the development of budget requests and advises agency management on program and financial issues.

TYPICAL WORKING CONDITIONS AND UNIQUE PHYSICAL REQUIREMENTS: INCUMBENTS IN THIS CLASSIFICATION WILL TYPICALLY PERFORM THEIR PRIMARY JOB DUTIES UNDER THESE CONDITIONS, HOWEVER, THESE CONDITIONS MAY CHANGE ON OCCASION IN PERFORMING THE DUTIES OF AN INDIVIDUAL POSITION.

Work is primarily performed in an office setting.

ADDITIONAL REQUIREMENTS:

Applicants and employees in this classification may be required to submit to a drug screening test and background check.

DATE CLASS ESTABLISHED: 06/16/1982	DATE OF LAST REVISION: 10/16/2007

THE COMMONWEALTH OF KENTUCKY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, OR VETERAN STATUS IN EMPLOYMENT OR OTHER PROVISION OF SERVICES. REASONABLE ACCOMMODATIONS ARE PROVIDED UPON REQUEST.

COMMONWEALTH OF KENTUCKY
CLASS SPECIFICATION

CLASS TITLE: HEALTHCARE DATA ADMINISTRATOR	
TITLE CODE: 9385	**GROUP:** PERSONNEL MANAGEMENT AND TRAINING
SELECTION METHOD: 100% QUAL **REV. 10-04** **NO. OF TEST QUESTIONS:** **SELECTION ID: 8630** **EXAM NO.**	**SALARY: (MIN-MID) $4584.00 - $5178.72** **GRADE: 17** **SPECIAL ENTRANCE RATE: Yes**
POSITIONS IN THIS CLASS GENERALLY REPORT TO: COMMISSIONER OR DIVISION DIRECTOR	
PRIMARY USER AGENCY: PERSONNEL CABINET (OFFICE FOR EMPLOYEE RELATIONS) AND DEPARTMENT FOR MEDICAID SERVICES	

CHARACTERISTICS OF THE CLASS: CHARACTERISTICS OF A CLASS ARE GENERAL STATEMENTS INDICATING THE LEVEL OF RESPONSIBILITY AND DISCRETION OF POSITIONS IN THAT JOB CLASSIFICATION.

Oversees the collection of, and evaluates the data provided by health and life insurance carriers and third party administrators participating in the state government $400+ million health care and life insurance program or Medicaid services programs. Provides analysis of data, and participates in the evaluation and negotiation of carrier proposals and renewal requests; and performs other duties as required.

MINIMUM REQUIREMENTS: MINIMUM REQUIREMENTS ARE COMPREHENSIVE STATEMENTS OF THE MINIMUM BACKGROUND AS TO EDUCATION, EXPERIENCE, AND OTHER QUALIFICATIONS WHICH WILL BE REQUIRED IN ALL CASES AS EVIDENCE OF AN APPOINTEE'S ABILITY TO PERFORM THE WORK PROPERLY.

EDUCATION: Graduate of a college or university with a bachelor's degree in business administration, nursing, insurance, risk management, mathematics or a related field

EXPERIENCE: Must have four years of experience with a health insurance company, health care provider, benefits consulting firm or similar entity in underwriting, financial analysis, data analysis, statistical evaluations and/or research analysis as it relates to health insurance or health care.

SUBSTITUTION CLAUSE:

EDUCATION: Education in one of the above fields will substitute for the required experience on a year-for-year basis.

EXPERIENCE: Experience in the above fields will substitute for up to two years of the required education.

SPECIAL REQUIREMENTS: (AGE, LICENSURE, REGULATION, ETC.)

None

EXAMPLES OF DUTIES OR RESPONSIBILITIES OF THE CLASSIFICATION: EXAMPLES OF DUTIES OR RESPONSIBILITIES ARE NOT TO BE CONSTRUED AS DESCRIBING WHAT THE DUTIES OR RESPONSIBILITIES OF ANY POSITION SHALL BE AND ARE NOT TO BE CONSTRUED AS LIMITING THE APPOINTING AUTHORITY'S ABILITY TO ADD TO, OR OTHERWISE ALTER THE DUTIES AND RESPONSIBILITIES OF A POSITION. THE USE OF AN INDIVIDUAL EXPRESSION OR ILLUSTRATION AS TO DUTIES OR RESPONSIBILITIES SHALL NOT BE REGARDED AS EXCLUDING ASSIGNMENT OF OTHERS NOT MENTIONED WHICH ARE OF SIMILAR KIND OR QUALITY.

Participates with IT and agency staff in developing and implementing the system documentation standards and methods of data collection. Develops and provides training to personnel cabinet staff and carriers with reference to data collection standards and processes. Evaluates the data collected, identifies data anomalies, and works with carriers to correct those anomalies and prevent recurrences. Analyzes the meaning of the data collected and projects its impact. Participates in the analysis and negotiation of health care proposals and renewals by carriers. Provides advice to the director, deputy commissioner, commissioner, and cabinet secretary with regard to health care utilization. Communicates by letter, telephone, and in person with carriers, executive leadership, legislators and the general public relating to health and life insurance utilization and costs. Testifies as an expert before legislative committees as needed.

TYPICAL WORKING CONDITIONS AND UNIQUE PHYSICAL REQUIREMENTS: INCUMBENTS IN THIS CLASSIFICATION WILL TYPICALLY PERFORM THEIR PRIMARY JOB DUTIES UNDER THESE CONDITIONS, HOWEVER, THESE CONDITIONS MAY CHANGE ON OCCASION IN PERFORMING THE DUTIES OF AN INDIVIDUAL POSITION.

Work is performed in an office setting.

ADDITIONAL REQUIREMENTS:

Applicants and employees in this classification may be required to submit to a drug screening test and background check.

DATE CLASS ESTABLISHED: 12/01/1998	DATE OF LAST REVISION: 07/16/2008

THE COMMONWEALTH OF KENTUCKY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, OR VETERAN STATUS IN EMPLOYMENT OR OTHER PROVISION OF SERVICES. REASONABLE ACCOMMODATIONS ARE PROVIDED UPON REQUEST.

COMMONWEALTH OF KENTUCKY
CLASS SPECIFICATION

CLASS TITLE: HEALTH POLICY SPECIALIST II	
TITLE CODE: 9697	**GROUP:** RESEARCH AND ANALYSIS
SELECTION METHOD: 100% QUAL **REV. 01-98** **NO. TEST QUESTIONS:** **SELECTION ID:** 8533 **EXAM NO.:**	**SALARY:** (MIN-MID) $3230.84 - $4280.10 **GRADE:** 15 **SPECIAL ENTRANCE RATE:** No
POSITIONS IN THIS CLASS GENERALLY REPORT TO: EXECUTIVE DIRECTOR AND INSURANCE PROGRAM MANAGER	
PRIMARY USER AGENCY: CABINET FOR HEALTH AND FAMILY SERVICES AND OFFICE OF INSURANCE	

CHARACTERISTICS OF THE CLASS: CHARACTERISTICS OF A CLASS ARE GENERAL STATEMENTS INDICATING THE LEVEL OF RESPONSIBILITY AND DISCRETION OF POSITIONS IN THAT JOB CLASSIFICATION.

Performs complex research, analysis or planning functions related to Certificate of Need (CON), health data collection and analysis, or health policy. Serves as trainer for new staff. Serves as project leader; and performs other duties as required.

MINIMUM REQUIREMENTS: MINIMUM REQUIREMENTS ARE COMPREHENSIVE STATEMENTS OF THE MINIMUM BACKGROUND AS TO EDUCATION, EXPERIENCE, AND OTHER QUALIFICATIONS WHICH WILL BE REQUIRED IN ALL CASES AS EVIDENCE OF AN APPOINTEE'S ABILITY TO PERFORM THE WORK PROPERLY.

EDUCATION: Graduate of a college or university with a bachelor's degree.

EXPERIENCE: Must have four years of professional experience in managed health care, Medicaid, Medicare or health insurance claims/systems; and/or health care research, health care planning, health care policy development or health care administration.

SUBSTITUTION CLAUSE:

EDUCATION: Graduate work in planning, public health, public administration, health administration, business administration or a related field will substitute for the required experience on a year-for-year basis up to two years.

EXPERIENCE: Professional experience in the preparation of health care reports, health care audits or health data tables will substitute for up to two years of required college.

SPECIAL REQUIREMENTS: (AGE, LICENSURE, REGULATION, ETC.)

None

EXAMPLES OF DUTIES OR RESPONSIBILITIES OF THE CLASSIFICATION: EXAMPLES OF DUTIES OR RESPONSIBILITIES ARE NOT TO BE CONSTRUED AS DESCRIBING WHAT THE DUTIES OR RESPONSIBILITIES OF ANY POSITION SHALL BE AND ARE NOT TO BE CONSTRUED AS LIMITING THE APPOINTING AUTHORITY'S ABILITY TO ADD TO, OR OTHERWISE ALTER THE DUTIES AND RESPONSIBILITIES OF A POSITION. THE USE OF AN INDIVIDUAL EXPRESSION OR ILLUSTRATION AS TO DUTIES OR RESPONSIBILITIES SHALL NOT BE REGARDED AS EXCLUDING ASSIGNMENT OF OTHERS NOT MENTIONED WHICH ARE OF SIMILAR KIND OR QUALITY.

Provides research and analysis of complex health care related issues to include CON, health data, health planning and policy. Organizes and presents health care policy options to management staff. Organizes, directs, and implements studies to determine health care needs and resources for the state. Recommends policies, goals, and strategies. Coordinates and evaluates specific program initiatives related to health care needs. Provides technical assistance to the public, health care organizations, and professional and government officials. Serves as project leader for staff. Trains new staff in procedures and techniques related to the mission of the office.

TYPICAL WORKING CONDITIONS AND UNIQUE PHYSICAL REQUIREMENTS: INCUMBENTS IN THIS CLASSIFICATION WILL TYPICALLY PERFORM THEIR PRIMARY JOB DUTIES UNDER THESE CONDITIONS, HOWEVER, THESE CONDITIONS MAY CHANGE ON OCCASION IN PERFORMING THE DUTIES OF AN INDIVIDUAL POSITION.

Performs duties in an office setting.

ADDITIONAL REQUIREMENTS:

Applicants and employees in this classification may be required to submit to a drug screening test and background check.

DATE CLASS ESTABLISHED: 07/01/1996	DATE OF LAST REVISION: 02/24/2006
THE COMMONWEALTH OF KENTUCKY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, SEXUAL ORIENTATION, GENDER IDENTITY, ANCESTRY OR VETERAN STATUS. REASONABLE ACCOMMODATIONS ARE PROVIDED UPON REQUEST.	

COMMONWEALTH OF KENTUCKY
CLASS SPECIFICATION

CLASS TITLE: ADMINISTRATIVE SPECIALIST II		
TITLE CODE: 9612	**GROUP:** GENERAL ADMINISTRATION	
SELECTION METHOD: 100% QUAL **REV.** 05-08 **NO. TEST QUESTIONS:** **SELECTION ID:** 8072 **EXAM NO.:**		**SALARY: (MIN-MID)** $2006.08 - $2657.70 **GRADE:** 10 **SPECIAL ENTRANCE RATE:** No
POSITIONS IN THIS CLASS GENERALLY REPORT TO: VARIES		
PRIMARY USER AGENCY: ALL AGENCIES MAY USE THIS CLASS		

CHARACTERISTICS OF THE CLASS: CHARACTERISTICS OF A CLASS ARE GENERAL STATEMENTS INDICATING THE LEVEL OF RESPONSIBILITY AND DISCRETION OF POSITIONS IN THAT JOB CLASSIFICATION.

Provides professional support in the review, evaluation, development and implementation of agency's activities; and performs other duties as required.

MINIMUM REQUIREMENTS: MINIMUM REQUIREMENTS ARE COMPREHENSIVE STATEMENTS OF THE MINIMUM BACKGROUND AS TO EDUCATION, EXPERIENCE, AND OTHER QUALIFICATIONS WHICH WILL BE REQUIRED IN ALL CASES AS EVIDENCE OF AN APPOINTEE'S ABILITY TO PERFORM THE WORK PROPERLY.

EDUCATION: Graduate of a college or university with a bachelor's degree.

EXPERIENCE: Must have one year of professional, administrative or business experience.

SUBSTITUTION CLAUSE:

EDUCATION: Additional education will substitute for the required experience on a year-for-year basis.

EXPERIENCE: Additional administrative, business, research and/or clerical experience will substitute for the required education on a year-for-year basis.

SPECIAL REQUIREMENTS: (AGE, LICENSURE, REGULATION, ETC.)

None

EXAMPLES OF DUTIES OR RESPONSIBILITIES OF THE CLASSIFICATION: EXAMPLES OF DUTIES OR RESPONSIBILITIES ARE NOT TO BE CONSTRUED AS DESCRIBING WHAT THE DUTIES OR RESPONSIBILITIES OF ANY POSITION SHALL BE AND ARE NOT TO BE CONSTRUED AS LIMITING THE APPOINTING AUTHORITY'S ABILITY TO ADD TO, OR OTHERWISE ALTER THE DUTIES AND RESPONSIBILITIES OF A POSITION. THE USE OF AN INDIVIDUAL EXPRESSION OR ILLUSTRATION AS TO DUTIES OR RESPONSIBILITIES SHALL NOT BE REGARDED AS EXCLUDING ASSIGNMENT OF OTHERS NOT MENTIONED WHICH ARE OF SIMILAR KIND OR QUALITY.

Interprets and applies laws, rules, regulations and policies applicable to the administration of agency programs. Reviews proposed state and federal legislative or administrative regulation changes to determine the need for policy and procedure changes. Reviews and develops procedural alternatives. Monitors organizational unit budget status and makes recommendations to superiors in terms of internal adjustments necessary to stay within the budget. Studies organizational unit's needs for additional equipment, supplies and materials and makes recommendations for the requisition thereof. Reviews, compiles and/or prepares operational records and reports for compliance with federal, state and agency reporting requirements. Contacts field personnel by phone, in writing or in person to resolve inconsistencies or inaccuracies in records and/or reports. Attends inter- or intra-unit meetings on behalf of superiors. Drafts correspondence or other responses or administrators, legislators, attorneys, clients and/or the general public which require the interpretation and application of policies and procedures. Makes informational presentations to organizations and the general public.

TYPICAL WORKING CONDITIONS AND UNIQUE PHYSICAL REQUIREMENTS: INCUMBENTS IN THIS CLASSIFICATION WILL TYPICALLY PERFORM THEIR PRIMARY JOB DUTIES UNDER THESE CONDITIONS, HOWEVER, THESE CONDITIONS MAY CHANGE ON OCCASION IN PERFORMING THE DUTIES OF AN INDIVIDUAL POSITION.

Work is typically performed in an office setting.

ADDITIONAL REQUIREMENTS:

Applicants and employees in this classification may be required to submit to a drug screening test and background check.

DATE CLASS ESTABLISHED: 06/16/1982	DATE OF LAST REVISION: 02/24/2006
THE COMMONWEALTH OF KENTUCKY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, OR VETERAN STATUS IN EMPLOYMENT OR OTHER PROVISION OF SERVICES. REASONABLE ACCOMMODATIONS ARE PROVIDED UPON REQUEST.	

COMMONWEALTH OF KENTUCKY
CLASS SPECIFICATION

CLASS TITLE: SYSTEMS ANALYST II		
TITLE CODE: 7365	**GROUP:** INFORMATION MANAGEMENT SYSTEMS	
SELECTION METHOD: 100% QUAL	**REV.** 08-98	**SALARY:** (MIN-MID) $2937.20 - $3890.90
NO. OF TEST QUESTIONS:		**GRADE:** 14
SELECTION ID: 8264	**EXAM NO.**	**SPECIAL ENTRANCE RATE:** No
POSITIONS IN THIS CLASS GENERALLY REPORT TO: INFORMATION SYSTEMS MANAGER		
PRIMARY USER AGENCY: COMMONWEALTH OFFICE OF TECHNOLOGY		

CHARACTERISTICS OF THE CLASS: CHARACTERISTICS OF A CLASS ARE GENERAL STATEMENTS INDICATING THE LEVEL OF RESPONSIBILITY AND DISCRETION OF POSITIONS IN THAT JOB CLASSIFICATION.

Under general supervision, analyzes user requests and designs new computer systems and modifications to existing computer systems; and performs other duties as required.

MINIMUM REQUIREMENTS: MINIMUM REQUIREMENTS ARE COMPREHENSIVE STATEMENTS OF THE MINIMUM BACKGROUND AS TO EDUCATION, EXPERIENCE, AND OTHER QUALIFICATIONS WHICH WILL BE REQUIRED IN ALL CASES AS EVIDENCE OF AN APPOINTEE'S ABILITY TO PERFORM THE WORK PROPERLY.

EDUCATION: Graduate of a college or university with a bachelor's degree.

EXPERIENCE: Must have one year of professional experience in computer programming and/or systems analysis.

SUBSTITUTION CLAUSE:

EDUCATION: Related technical or vocational training will substitute for the bachelor's degree requirement on a year-for-year basis. A master's degree in computer science will substitute for the one year of required experience.

EXPERIENCE: Experience in computer programming, systems analysis and/or computer operations will substitute for the bachelor's degree requirement on a year-for-year basis. Experience in business or public administration, statistics, research or a related field will substitute for the bachelor's degree requirement on a year-for-year basis.

SPECIAL REQUIREMENTS: (AGE, LICENSURE, REGULATION, ETC.)

None

EXAMPLES OF DUTIES OR RESPONSIBILITIES OF THE CLASSIFICATION: EXAMPLES OF DUTIES OR RESPONSIBILITIES ARE NOT TO BE CONSTRUED AS DESCRIBING WHAT THE DUTIES OR RESPONSIBILITIES OF ANY POSITION SHALL BE AND ARE NOT TO BE CONSTRUED AS LIMITING THE APPOINTING AUTHORITY'S ABILITY TO ADD TO, OR OTHERWISE ALTER THE DUTIES AND RESPONSIBILITIES OF A POSITION. THE USE OF AN INDIVIDUAL EXPRESSION OR ILLUSTRATION AS TO DUTIES OR RESPONSIBILITIES SHALL NOT BE REGARDED AS EXCLUDING ASSIGNMENT OF OTHERS NOT MENTIONED WHICH ARE OF SIMILAR KIND OR QUALITY.

Analyzes user requests for the development or modification of computer requests. Conducts feasibility analysis for proposed systems. Designs the format of input and output documents, screens and files to meet the user's objectives. Writes specifications for systems development. Works with user in developing new or modifying existing computer systems. Prepares and maintains systems documentation. Tests all phases of the system to ensure that user needs are met. Writes procedures for the customer's use in operating the system. Trains the user in the operation of the system. Identifies and corrects production problems. Writes, tests and debugs computer programs. Provides technical assistance to personnel involved in implementing computer systems. Creates, presents or coordinates training courses of a routine nature for data processing personnel.

TYPICAL WORKING CONDITIONS AND UNIQUE PHYSICAL REQUIREMENTS: INCUMBENTS IN THIS CLASSIFICATION WILL TYPICALLY PERFORM THEIR PRIMARY JOB DUTIES UNDER THESE CONDITIONS, HOWEVER, THESE CONDITIONS MAY CHANGE ON OCCASION IN PERFORMING THE DUTIES OF AN INDIVIDUAL POSITION.

Work is typically performed in an office setting.

ADDITIONAL REQUIREMENTS:

Applicants and employees in this classification may be required to submit to a drug screening test and background check.

DATE CLASS ESTABLISHED: 06/16/1982	DATE OF LAST REVISION: 02/24/2006

THE COMMONWEALTH OF KENTUCKY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, OR VETERAN STATUS IN EMPLOYMENT OR OTHER PROVISION OF SERVICES. REASONABLE ACCOMMODATIONS ARE PROVIDED UPON REQUEST.

COMMONWEALTH OF KENTUCKY
CLASS SPECIFICATION

CLASS TITLE: INFORMATION OFFICER I		
TITLE CODE: 8125	**GROUP:** COMMUNICATIONS AND PROMOTIONS	
SELECTION METHOD: 100% QUAL	**REV. 05-08**	**SALARY: (MIN-MID) $2206.92 - $2923.38**
NO. OF TEST QUESTIONS:		**GRADE: 11**
SELECTION ID: 8129	**EXAM NO.**	**SPECIAL ENTRANCE RATE: No**
POSITIONS IN THIS CLASS GENERALLY REPORT TO: INFORMATION OFFICE SUPERVISOR		
PRIMARY USER AGENCY: VARIOUS AGENCIES USE THIS CLASS		

CHARACTERISTICS OF THE CLASS: CHARACTERISTICS OF A CLASS ARE GENERAL STATEMENTS INDICATING THE LEVEL OF RESPONSIBILITY AND DISCRETION OF POSITIONS IN THAT JOB CLASSIFICATION.

Performs beginning professional level journalistic functions in the preparation, editing and proofreading of news releases, bulletins, reports and other informational material for state government agencies; and performs other duties as required.

MINIMUM REQUIREMENTS: MINIMUM REQUIREMENTS ARE COMPREHENSIVE STATEMENTS OF THE MINIMUM BACKGROUND AS TO EDUCATION, EXPERIENCE, AND OTHER QUALIFICATIONS WHICH WILL BE REQUIRED IN ALL CASES AS EVIDENCE OF AN APPOINTEE'S ABILITY TO PERFORM THE WORK PROPERLY.

EDUCATION: Graduate of a college or university with a bachelor's degree.

EXPERIENCE: None

SUBSTITUTION CLAUSE:

EDUCATION: None

EXPERIENCE: Journalistic, public relations or experience related to the duties and responsibilities of this class series will substitute for the required education on a year-for-year basis.

SPECIAL REQUIREMENTS: (AGE, LICENSURE, REGULATION, ETC.)

None

EXAMPLES OF DUTIES OR RESPONSIBILITIES OF THE CLASSIFICATION: EXAMPLES OF DUTIES OR RESPONSIBILITIES ARE NOT TO BE CONSTRUED AS DESCRIBING WHAT THE DUTIES OR RESPONSIBILITIES OF ANY POSITION SHALL BE AND ARE NOT TO BE CONSTRUED AS LIMITING THE APPOINTING AUTHORITY'S ABILITY TO ADD TO, OR OTHERWISE ALTER THE DUTIES AND RESPONSIBILITIES OF A POSITION. THE USE OF AN INDIVIDUAL EXPRESSION OR ILLUSTRATION AS TO DUTIES OR RESPONSIBILITIES SHALL NOT BE REGARDED AS EXCLUDING ASSIGNMENT OF OTHERS NOT MENTIONED WHICH ARE OF SIMILAR KIND OR QUALITY.

Covers assignments in the gathering of material for the agency's publications. Develops informational materials such as brochures, posters and other graphic arts publications to be distributed. Writes and edits news releases, bulletins, reports and other informational materials. Attends public events and conducts interviews to gather facts. Performs research to verify the reliability of material used for news releases and other information to be published. Responds to media inquiries of departmental activities. Files newspaper clippings, news releases, fact sheets and bibliographical sketches for use in research activities.

TYPICAL WORKING CONDITIONS AND UNIQUE PHYSICAL REQUIREMENTS: INCUMBENTS IN THIS CLASSIFICATION WILL TYPICALLY PERFORM THEIR PRIMARY JOB DUTIES UNDER THESE CONDITIONS, HOWEVER, THESE CONDITIONS MAY CHANGE ON OCCASION IN PERFORMING THE DUTIES OF AN INDIVIDUAL POSITION.

Work typically involves extensive contact with the public.

ADDITIONAL REQUIREMENTS:

Applicants and employees in this classification may be required to submit to a drug screening test and background check.

DATE CLASS ESTABLISHED: 06/16/1982	**DATE OF LAST REVISION:** 02/24/2006

THE COMMONWEALTH OF KENTUCKY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, OR VETERAN STATUS IN EMPLOYMENT OR OTHER PROVISION OF SERVICES. REASONABLE ACCOMMODATIONS ARE PROVIDED UPON REQUEST.

COMMONWEALTH OF KENTUCKY
CLASS SPECIFICATION

CLASS TITLE: RESOURCE MANAGEMENT ANALYST I	
TITLE CODE: 7320	**GROUP:** INFORMATION MANAGEMENT SYSTEMS
SELECTION METHOD: 100% QUAL **REV.** 06-00	**SALARY: (MIN-MID)** $2427.44 - $3215.72
NO. OF TEST QUESTIONS:	**GRADE:** 12
SELECTION ID: 8282 **EXAM NO.**	**SPECIAL ENTRANCE RATE:** No
POSITIONS IN THIS CLASS GENERALLY REPORT TO: VARIES	
PRIMARY USER AGENCY: VARIES	

CHARACTERISTICS OF THE CLASS: CHARACTERISTICS OF A CLASS ARE GENERAL STATEMENTS INDICATING THE LEVEL OF RESPONSIBILITY AND DISCRETION OF POSITIONS IN THAT JOB CLASSIFICATION.

Under general supervision, assesses information, technology, training and communications needs of the agency. Familiarizes self with and monitors developments in agency's mission, goals and objectives, and is knowledgeable concerning the agency budget. Assists in planning, organizing, and managing information resources in support of the agency's mission. Acts as liaison between the business/programmatic functions of the agency and the information systems function; and performs other duties as required.

MINIMUM REQUIREMENTS: MINIMUM REQUIREMENTS ARE COMPREHENSIVE STATEMENTS OF THE MINIMUM BACKGROUND AS TO EDUCATION, EXPERIENCE, AND OTHER QUALIFICATIONS WHICH WILL BE REQUIRED IN ALL CASES AS EVIDENCE OF AN APPOINTEE'S ABILITY TO PERFORM THE WORK PROPERLY.

EDUCATION: Graduate of a college or university with a bachelor's degree.

EXPERIENCE: Must have one year of systems analysis, business administration, or public administration experience.

SUBSTITUTION CLAUSE:

EDUCATION: Related technical or vocational training will substitute for the bachelor's degree requirement on a year-for-year basis. A master's degree in computer science, business or public administration will substitute for the experience requirement.

EXPERIENCE: Experience in computer programming, systems analysis, information services, research and statistics, business administration, or public administration will substitute for the bachelor's degree requirement on a year-for-year basis.

SPECIAL REQUIREMENTS: (AGE, LICENSURE, REGULATION, ETC.)

None

EXAMPLES OF DUTIES OR RESPONSIBILITIES OF THE CLASSIFICATION: EXAMPLES OF DUTIES OR RESPONSIBILITIES ARE NOT TO BE CONSTRUED AS DESCRIBING WHAT THE DUTIES OR RESPONSIBILITIES OF ANY POSITION SHALL BE AND ARE NOT TO BE CONSTRUED AS LIMITING THE APPOINTING AUTHORITY'S ABILITY TO ADD TO, OR OTHERWISE ALTER THE DUTIES AND RESPONSIBILITIES OF A POSITION. THE USE OF AN INDIVIDUAL EXPRESSION OR ILLUSTRATION AS TO DUTIES OR RESPONSIBILITIES SHALL NOT BE REGARDED AS EXCLUDING ASSIGNMENT OF OTHERS NOT MENTIONED WHICH ARE OF SIMILAR KIND OR QUALITY.

Assists program managers in determining information and data requirements and communicates those needs to information systems staff. Facilitates problem resolution between programmatic staff and information systems staff. Analyzes alternatives for collection, manipulation, storage, retrieval and dissemination of information, and develops recommendations accordingly. Works closely with agency records officer to ensure that information systems are managed in accordance with public records laws. Assists with development of the agency information resources plan. Serves as a resource to agency management during evaluation and monitoring of information technology projects. Assists with procurement review. Assists with preparation of information for presentation to agency executives. Reviews proposed legislation for impact on agency information systems. Promotes use of statewide information resource management guidelines and technology standards. Recommends to supervisor opportunities for sharing information resources through the development of inter-departmental systems.

TYPICAL WORKING CONDITIONS AND UNIQUE PHYSICAL REQUIREMENTS: INCUMBENTS IN THIS CLASSIFICATION WILL TYPICALLY PERFORM THEIR PRIMARY JOB DUTIES UNDER THESE CONDITIONS, HOWEVER, THESE CONDITIONS MAY CHANGE ON OCCASION IN PERFORMING THE DUTIES OF AN INDIVIDUAL POSITION.

Work is typically performed in an office setting.

ADDITIONAL REQUIREMENTS:

Applicants and employees in this classification may be required to submit to a drug screening test and background check.

DATE CLASS ESTABLISHED: 07/01/1993	DATE OF LAST REVISION: 06/16/2009
THE COMMONWEALTH OF KENTUCKY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, OR VETERAN STATUS IN EMPLOYMENT OR OTHER PROVISION OF SERVICES. REASONABLE ACCOMMODATIONS ARE PROVIDED UPON REQUEST.	

COMMONWEALTH OF KENTUCKY
CLASS SPECIFICATION

CLASS TITLE: ACTUARY	
TITLE CODE: 3535	**GROUP:** INSURANCE REGULATION
SELECTION METHOD: 100% QUAL **REV. 06-92** **NO. OF TEST QUESTIONS:** **SELECTION ID: 6219** **EXAM NO.**	**SALARY: (MIN-MID) $4300.08 - $5696.60** **GRADE: 18** **SPECIAL ENTRANCE RATE: No**
POSITIONS IN THIS CLASS GENERALLY REPORT TO: DIVISION DIRECTOR	
PRIMARY USER AGENCY: ENVIRONMENTAL AND PUBLIC PROTECTION CABINET - OFFICE OF INSURANCE	

CHARACTERISTICS OF THE CLASS: CHARACTERISTICS OF A CLASS ARE GENERAL STATEMENTS INDICATING THE LEVEL OF RESPONSIBILITY AND DISCRETION OF POSITIONS IN THAT JOB CLASSIFICATION.

Provides professional advice, reports, actuarial analyses, and related data pertinent to the establishment, maintenance, review and/or regulation of programs in life, health and casualty insurance, annuities, retirement plans and/or other benefit programs; and performs other duties as required.

MINIMUM REQUIREMENTS: MINIMUM REQUIREMENTS ARE COMPREHENSIVE STATEMENTS OF THE MINIMUM BACKGROUND AS TO EDUCATION, EXPERIENCE, AND OTHER QUALIFICATIONS WHICH WILL BE REQUIRED IN ALL CASES AS EVIDENCE OF AN APPOINTEE'S ABILITY TO PERFORM THE WORK PROPERLY.

EDUCATION: Graduate of a college or university with a bachelor's degree in actuarial science, mathematics, statistics, economics, accounting or a related field.

EXPERIENCE: Must have five years of actuarial experience.

SUBSTITUTION CLAUSE:

EDUCATION: None

EXPERIENCE: Fellowship in the American Academy of Actuaries, Society of Actuaries or Casualty Actuarial Society may be substituted for the required experience.

SPECIAL REQUIREMENTS: (AGE, LICENSURE, REGULATION, ETC.)

None

EXAMPLES OF DUTIES OR RESPONSIBILITIES OF THE CLASSIFICATION: EXAMPLES OF DUTIES OR RESPONSIBILITIES ARE NOT TO BE CONSTRUED AS DESCRIBING WHAT THE DUTIES OR RESPONSIBILITIES OF ANY POSITION SHALL BE AND ARE NOT TO BE CONSTRUED AS LIMITING THE APPOINTING AUTHORITY'S ABILITY TO ADD TO, OR OTHERWISE ALTER THE DUTIES AND RESPONSIBILITIES OF A POSITION. THE USE OF AN INDIVIDUAL EXPRESSION OR ILLUSTRATION AS TO DUTIES OR RESPONSIBILITIES SHALL NOT BE REGARDED AS EXCLUDING ASSIGNMENT OF OTHERS NOT MENTIONED WHICH ARE OF SIMILAR KIND OR QUALITY.

Applies, analyses and/or coordinates, the application of appropriate techniques from actuarial, statistical, econometric, and accounting disciplines to specific programs. Performs or coordinates actuarial analyses of contributions, reserves and liabilities of retirement, health, workers compensation and other benefit programs as needed for purposes of determining actuarial soundness, adequacy of premiums and compliance with laws or regulations. Reviews proposed legislation and regulations to determine financial impact on state government, insurance industry and the public. Provides expert witness advice in appropriate program hearings. Represents the department in hearings and at conferences. Prepares detailed analytical records and reports.

TYPICAL WORKING CONDITIONS AND UNIQUE PHYSICAL REQUIREMENTS: INCUMBENTS IN THIS CLASSIFICATION WILL TYPICALLY PERFORM THEIR PRIMARY JOB DUTIES UNDER THESE CONDITIONS, HOWEVER, THESE CONDITIONS MAY CHANGE ON OCCASION IN PERFORMING THE DUTIES OF AN INDIVIDUAL POSITION.

Work is typically performed in an office setting. Occasional travel will be required.

ADDITIONAL REQUIREMENTS:

Applicants and employees in this classification may be required to submit to a drug screening test and background check.

DATE CLASS ESTABLISHED: 06/16/1982	DATE OF LAST REVISION: 02/24/2006
THE COMMONWEALTH OF KENTUCKY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, SEXUAL ORIENTATION, GENDER IDENTITY, ANCESTRY OR VETERAN STATUS. REASONABLE ACCOMMODATIONS ARE PROVIDED UPON REQUEST.	

EXHIBIT 15

Biographical Information for
William Nold

WILLIAM J. NOLD, ESQ.
2222 Brighton Drive
Louisville, Kentucky 40205
(502) 459-8542 E-mail billnold@kyvb.net

PROFESSIONAL EXPERIENCE

Commonwealth of Kentucky
Department of Insurance, Health and Life Division
Frankfort, Kentucky 2008 to Present

From 2008 to present has served as Director of the Health and Life Division within the Department of Insurance. The Health and Life Division, comprised of 22 employees and 5 contract actuaries, regulates insurance companies and health maintenance organizations offering various types of health and life insurance products. Oversees the division's staff review of policy forms, certificates, applications, rate filings, life settlements contracts and other forms as necessary to assure that the health and life products being offered in Kentucky meet the applicable statutory and regulatory standards. Meets regularly with various insurance industry representatives on compliance issues. Serves a Project Director of the Insurance Premium Rate Review grant. Recommends and participates in drafting of changes to the health insurance statutes and regulations. Provided testimony before legislative committees relating to proposed legislation Makes presentations and attends conferences on behalf of the Department and Commissioner.

Commonwealth of Kentucky
Office of Legal Services, Insurance Division
Frankfort and Louisville, Kentucky 2001 to 2008

From 2001 to 2004 served as Staff Attorney representing the Executive Director of the Office of Insurance in numerous litigation matters. Provided legal advice to various divisions within the Office of Insurance including the Consumer Protection and Education Division, the Health Insurance Policy and Managed Care Division and the Kentucky Access Division. Participated in the drafting of statutes and regulations relating to insurance and more specifically to health benefit plans. . Served as Privacy Officer for the Office of Insurance and drafted all policies and procedures required by the HIPAA Privacy Rules. Served as co-counsel in the representation of the Commissioner Janie Miller before the United States Supreme Court in the matter of ***Kentucky Ass'n of Health Plans, Inc. v. Miller***, 538 U.S. 329 (2003). Served as facilitator for a public hearing called by Commissioner Miller regarding medical malpractice insurance in Kentucky. Served as Hearing Officer in a number of cases as assigned. Made presentations on behalf of the Office of Insurance and the U.S. Department of Labor to various groups relating to Kentucky's "Prompt Pay" statutes and Kentucky's privacy laws.

From 2004 to 2008 served as the on-site representative of the Executive Director and Rehabilitator of AIK Comp. Provided legal advice to the Rehabilitator and the Special Deputy Rehabilitators on the day-to- day operations of AIK Comp. Assisted in the preparation of the reorganization and assessment plans approved by the Court. Developed the court-approved policies and procedures relating to objections to assessments, the collection of assessments, payment plans and releases of liability. Provided legal advice to the Special Deputies in the adjudication of objections to the assessment. Represented the Rehabilitator before the Special Commissioner in the adjudication of individual objections filed by the assessed group members. Assisted in the preparation of reports to the Court. Appeared in the Franklin Circuit Court on numerous occasions representing the Rehabilitator. Provided assistance to outside counsel on all aspects of the rehabilitation of AIK Comp. Represented the Rehabilitator during mediations. Assisted outside counsel in the pursuit of claims on behalf of the Rehabilitator against the former officers and trustees of AIK Comp, its actuary and its auditor. Assisted outside counsel in the pursuit of claims for insurance benefits on behalf of the Rehabilitator against several excess insurance carriers. Have provided legal advice on all aspects of the rehabilitation of AIK Comp.

Domestic Relations Commissioner for Jefferson County
and Solo Practice
Louisville, Kentucky 1998 to 2001

Served as Domestic Relations Commissioner for Jefferson County. Adjudicated pendente lite and post decree motions involving claims for child support, maintenance, child visitation, contempt and other family law related matters. During this three year period, prepared findings of fact and made recommendations to the Family Court in over 1,000 cases.

Conducted a solo practice involving litigation of personal injury and contract matters before state and federal courts. Handled numerous cases in administrative forums involving employment disputes, workers compensation and illegal discrimination. Handled various probate and estate matters including the preparation of wills and trusts.

Mosley Clare & Townes
Louisville, Kentucky

1984-1989 Associate
1990-1998 Partner

Conducted a general practice of civil litigation and numerous jury and bench trials involving personal injury, contracts, civil rights and family law disputes. Practice involved all aspects of litigation in both state and federal courts including appeals to the Kentucky Supreme Court and the U.S. Supreme Court. For example, represented certain of the appellants before the Supreme Court of Kentucky in the matter of ***Larry Hayes v.State Property and Bldgs. Com'n,*** 731 S.W. 2d 797 (1987) involving the constitutionality of legislation authorizing the Commonwealth to finance private industrial development (Toyota Plant). Represented a federal employee in the Court of Appeals for the Federal Circuit and the U.S. Supreme Court in ***Department of the Navy v. Egan,*** 484 U.S. 518, 108 S.Ct. 818 when his employment was terminated solely because his security clearance was revoked and where there was no evidence of misconduct or poor performance. Defended numerous workers' compensation claims brought by employees of Kentucky state government. As a partner, was involved with management responsibilities for the firm especially involving capital equipment, computer technology, and software. For two years during this period of time, also taught a course in Business Law at Bellarmine University.

Solo Practice
Louisville, Kentucky

1976-1984

Conducted a solo practice involving litigation of personal injury and contract matters before state and federal courts representing both plaintiffs and defendants. Handled numerous cases in administrative forums involving employment disputes, workers compensation and illegal discrimination. Handled various probate and estate matters including the preparation of wills and trusts.

O'Bryan & Nold
Louisville, Kentucky

1974-1976

Trial attorney representing clients through the Home Insurance Company and the General Accident Insurance Company in the defense of personal injury claims, workers' compensation claims, automobile accidents, product liability, and premises liability.

United States Naval Ordnance Station
Engineering Department
Louisville, Kentucky

1968-1974

Served as project engineer for major caliber naval weapons systems. Involved with the design, overhaul, manufacture, procurement, testing, maintenance, and project management for major caliber gun and weapons' systems for the U.S. Navy.

PROFESSIONAL EDUCATION

Bellarmine College- Louisville, Kentucky 1963-1966
Pre-Engineering, Mathematics

University of Kentucky- Lexington, Kentucky 1966-1968
Bachelor of Science Mechanical Engineering

University of Louisville- Louisville, Kentucky 1970-1974
Juris Doctor

BAR MEMBERSHIP and COURTS

Licensed to practice in the Commonwealth of Kentucky from 1974 to present. Admitted to practice before the United States District Courts for the Western and Eastern Districts of Kentucky, the United States Court of Appeals for the Sixth Circuit, the United States Court of Appeals for the Federal Circuit, and the United States Supreme Court.

Member of the Kentucky Bar Association.

EXHIBIT 16

Biographical Information for
James Drennan

James E. Drennan, F.S.A., M.A.A.A.

Jim Drennan, a Principal in the Atlanta office of Ingenix Consulting, Ltd., has worked with numerous state insurance departments, insurers, HMO plans, Blue Cross and Blue Shield plans, self-insured trusts, and associations in the group life and health market. As a consultant, he has assisted in audits, analysis of legislation, pricing, reserving, experience rating, underwriting, and benefit analysis for governmental agencies and other clients in the individual and group life and health market, both insured and uninsured. He has over 30 years of life and health experience.

Jim joined Ingenix Consulting in 2002. Prior to joining Ingenix Consulting, Jim was a Principal with Tillinghast-Towers Perrin, in their St. Louis office for 10 years and then for five years in Atlanta.

Early in his career, Mr. Drennan worked for the Texas Insurance Department as a policy analyst and then for five years as an examining actuary involved in NAIC audits and company reviews.

In addition, Jim worked for Blue Cross and Blue Shield of Louisiana as senior vice president and chief actuary. His responsibilities included the actuarial and underwriting departments for the Plan, including the HMO and life insurance subsidiary companies.

Before that, he was the group actuary for the Philadelphia Life Group Division in Houston, Texas.

Mr. Drennan has a degree in mathematics from the University of Texas at Austin. He is a Fellow of the Society of Actuaries, a Fellow of the Conference of Consulting Actuaries, and a Fellow of the Life Office Management Institute. He is also a Member of the American Academy of Actuaries. He has served these organizations as a member of various committees and as a frequent speaker. Committee assignments include the Education & Examination Committee, Health Practice Notes Committee, the Committee on Health Benefit Systems Research, and the Association Health Plans Committee.

EXHIBIT 17

Contract Between the
Department and Ingenix Consulting

Commonwealth of Kentucky

CONTRACT

IMPORTANT
Show Doc ID number on all packages, invoices and correspondence.

Doc Description: Actuarial Svcs. for Health Insurance Policy & Managed Care	
Doc ID No: PON2 676 1000002972 2	**Procurement Folder:** 1738005
Procurement Type: Personal Service Contract	
Administered By: Jennifer Spencer	**Cited Authority:** FAP111-43-00-STD
Telephone: 502-564-6154	**Issued By:** Jennifer Spencer

Reason For Modification: Due to the Federal Patient Protection and Affordable Care Act, additional actuaries were needed to perform these job duties; thus, commodity lines 5, 6, 7, and 8 were added increasing the overall contract amount by $596,600.00. The original contract amount was $1,096,200.00 and the new contract total is $1,692,800.00.

Provisions related to the Reduction in Contract Worker Hours and HB 387 were added to the Terms and Conditions.

CONTRACTOR

Ingenix Consulting

SDS 12 2547 P O BOX 86

MINNEAPOLIS MN 55486-2547
US

Line	CL Description	Due Date	Quantity	Unit Issue	Unit Price	Contract Amt	Total Price
1	Actuarial Svcs. for Health Insurance Policy & Managed Care		0.00		0.00000	480,000.00	480,000.00

Extended Description

The Vendor shall:
a. Provide actuarial review of health insurance rate filings for compliance with Kentucky Revised Statutes, Kentucky Administrative Regulations, Departmental Policies, and recognized actuarial standards and guidelines and make recommendations to the Division Director for approval/disapproval.
b. Provide consulting services on actuarial issues.
c. Determine financial impact on the health insurance market for proposed legislation to include analysis and impact of mandated benefits under the direction of the DOI.
d. Examine and actuarially analyze loss reserves, premium collection plans, retrospective adjustments, and all other aspects affecting the financial condition of health insurers doing business in Kentucky.
e. Provide actuarial services in conjunction with financial and market conduct examinations.
f. Establish rates and reserves for Kentucky Access.
g. Testify before the legislature on actuarial issues.
h. Perform follow-up work and prepare written reports as necessary or requested relating to health insurance rate filings.
i. Be available, upon request, for DOI hearings.
j. Be available to perform required services at the DOI located at 215 West Main Street, Frankfort, KY 40601 or at any other location to which the DOI may be relocated

For FY2011 the expenses under this section shall not exceed a sum of $480,000

Extended Description

BILL TO	SHIP TO
DEPARTMENT OF INSURANCE - PO BOX 517 PO BOX 517 FRANKFORT KY 40602-0517 US	DEPARTMENT OF INSURANCE - WEST MAIN 215 WEST MAIN FRANKFORT KY 40601 US

Line	CL Description	Due Date	Quantity	Unit Issue	Unit Price	Contract Amt	Total Price
2	Actuarial Svcs. for Health Insurance Policy & Managed Care		0.00		0.00000	480,000.00	480,000.00

Extended Description

The Vendor shall:
a. Provide actuarial review of health insurance rate filings for compliance with Kentucky Revised Statutes, Kentucky Administrative Regulations, Departmental Policies, and recognized actuarial standards and guidelines and make recommendations to the Division Director for approval/disapproval.
b. Provide consulting services on actuarial issues.
c. Determine financial impact on the health insurance market for proposed legislation to include analysis and impact of mandated benefits under the direction of the DOI.
d. Examine and actuarially analyze loss reserves, premium collection plans, retrospective adjustments, and all other aspects affecting the financial condition of health insurers doing business in Kentucky.
e. Provide actuarial services in conjunction with financial and market conduct examinations.
f. Establish rates and reserves for Kentucky Access.
g. Testify before the legislature on actuarial issues.
h. Perform follow-up work and prepare written reports as necessary or requested relating to health insurance rate filings.
i. Be available, upon request, for DOI hearings.
j. Be available to perform required services at the DOI located at 215 West Main Street, Frankfort, KY 40601 or at any other location to which the DOI may be relocated

For FY2012 the expenses under this section shall not exceed a sum of $480,000

BILL TO	SHIP TO
DEPARTMENT OF INSURANCE - PO BOX 517 PO BOX 517 FRANKFORT KY 40602-0517 US	DEPARTMENT OF INSURANCE - WEST MAIN 215 WEST MAIN FRANKFORT KY 40601 US

Line	CL Description	Due Date	Quantity	Unit Issue	Unit Price	Contract Amt	Total Price
3	Travel		0.00		0.00000	68,100.00	68,100.00

Extended Description

The Vendor shall not be paid travel expenses unless and except as specifically authorized as follows:
DOI may require the Vendor to work at job sites other than the DOIÆs main office, or attend training, seminars, and trade group or regulator meetings. In those cases, DOI will reimburse the Vendor for airfare at coach or tourist class, and other related transportation costs as allowable such as lodging, meals, and taxi fares, etc. All allowed travel expenses, including mileage allowances, shall be paid in accordance with 200 KAR 2:006.

Extended Description

When the assignment requires the Vendor to work in the DOI main office, coach airfare and lodging are allowable at actual cost. Lodging and meals will only be reimbursed when overnight travel is required, and approved in advance by DOI.
Allowable travel expenses include the following:
a. Airfare coach class at actual cost (receipt required)
b. Lodging at actual cost (receipt required)
c. Meals and mileage at the rate allowed per 200 KAR 2:006 state travel regulations.
d. Taxi fares/rental cars
For FY2011 the expenses under this section shall not exceed a sum of $68,100

BILL TO	SHIP TO
DEPARTMENT OF INSURANCE - PO BOX 517 PO BOX 517 FRANKFORT KY 40602-0517 US	DEPARTMENT OF INSURANCE - WEST MAIN 215 WEST MAIN FRANKFORT KY 40601 US

Line	CL Description	Due Date	Quantity	Unit Issue	Unit Price	Contract Amt	Total Price
4	Travel		0.00		0.00000	68,100.00	68,100.00

Extended Description

The Vendor shall not be paid travel expenses unless and except as specifically authorized as follows:
DOI may require the Vendor to work at job sites other than the DOIÆs main office, or attend training, seminars, and trade group or regulator meetings. In those cases, DOI will reimburse the Vendor for airfare at coach or tourist class, and other related transportation costs as allowable such as lodging, meals, and taxi fares, etc. All allowed travel expenses, including mileage allowances, shall be paid in accordance with 200 KAR 2:006.
When the assignment requires the Vendor to work in the DOI main office, coach airfare and lodging are allowable at actual cost. Lodging and meals will only be reimbursed when overnight travel is required, and approved in advance by DOI.
Allowable travel expenses include the following:
a. Airfare coach class at actual cost (receipt required)
b. Lodging at actual cost (receipt required)
c. Meals and mileage at the rate allowed per 200 KAR 2:006 state travel regulations.
d. Taxi fares/rental cars
For FY2012 the expenses under this section shall not exceed a sum of $68,100

BILL TO	SHIP TO
DEPARTMENT OF INSURANCE - PO BOX 517 PO BOX 517 FRANKFORT KY 40602-0517 US	DEPARTMENT OF INSURANCE - WEST MAIN 215 WEST MAIN FRANKFORT KY 40601 US

Line	CL Description	Due Date	Quantity	Unit Issue	Unit Price	Contract Amt	Total Price
5	Actuarial Svcs. for Health Insurance Federal Grant		0.00		0.00000	405,000.00	405,000.00

Extended Description

The Vendor shall:
a. Provide actuarial review of health insurance rate filings for compliance with Kentucky Revised Statutes, Kentucky

Extended Description

Administrative Regulations, Departmental Policies, and recognized actuarial standards and guidelines and make recommendations to the Division Director for approval/disapproval.
b. Provide consulting services on actuarial issues.
c. Determine financial impact on the health insurance market for proposed legislation to include analysis and impact of mandated benefits under the direction of the DOI.
d. Examine and actuarially analyze loss reserves, premium collection plans, retrospective adjustments, and all other aspects affecting the financial condition of health insurers doing business in Kentucky.
e. Provide actuarial services in conjunction with financial and market conduct examinations.
f. Establish rates and reserves for Kentucky Access.
g. Testify before the legislature on actuarial issues.
h. Perform follow-up work and prepare written reports as necessary or requested relating to health insurance rate filings.
i. Be available, upon request, for DOI hearings.
j. Be available to perform required services at the DOI located at 215 West Main Street, Frankfort, KY 40601 or at any other location to which the DOI may be relocated

For FY2011 the expenses under this section shall not exceed a sum of $405,000

BILL TO	SHIP TO
DEPARTMENT OF INSURANCE - PO BOX 517 PO BOX 517 FRANKFORT KY 40602-0517 US	DEPARTMENT OF INSURANCE - WEST MAIN 215 WEST MAIN FRANKFORT KY 40601 US

Line	CL Description	Due Date	Quantity	Unit Issue	Unit Price	Contract Amt	Total Price
6	Actuarial Svcs. for Health Insurance Federal Grant		0.00		0.00000	135,000.00	135,000.00

Extended Description

The Vendor shall:
a. Provide actuarial review of health insurance rate filings for compliance with Kentucky Revised Statutes, Kentucky Administrative Regulations, Departmental Policies, and recognized actuarial standards and guidelines and make recommendations to the Division Director for approval/disapproval.
b. Provide consulting services on actuarial issues.
c. Determine financial impact on the health insurance market for proposed legislation to include analysis and impact of mandated benefits under the direction of the DOI.
d. Examine and actuarially analyze loss reserves, premium collection plans, retrospective adjustments, and all other aspects affecting the financial condition of health insurers doing business in Kentucky.
e. Provide actuarial services in conjunction with financial and market conduct examinations.
f. Establish rates and reserves for Kentucky Access.
g. Testify before the legislature on actuarial issues.
h. Perform follow-up work and prepare written reports as necessary or requested relating to health insurance rate filings.
i. Be available, upon request, for DOI hearings.
j. Be available to perform required services at the DOI located at 215 West Main Street, Frankfort, KY 40601 or at any other location to which the DOI may be relocated

For FY2012 the expenses under this section shall not exceed a sum of $135,000

Extended Description

BILL TO	SHIP TO
DEPARTMENT OF INSURANCE - PO BOX 517 PO BOX 517 FRANKFORT KY 40602-0517 US	DEPARTMENT OF INSURANCE - WEST MAIN 215 WEST MAIN FRANKFORT KY 40601 US

Line	CL Description	Due Date	Quantity	Unit Issue	Unit Price	Contract Amt	Total Price
7	Travel-Federal Grant		0.00		0.00000	42,450.00	42,450.00

Extended Description

The Vendor shall not be paid travel expenses unless and except as specifically authorized as follows:
DOI may require the Vendor to work at job sites other than the DOIÆs main office, or attend training, seminars, and trade group or regulator meetings. In those cases, DOI will reimburse the Vendor for airfare at coach or tourist class, and other related transportation costs as allowable such as lodging, meals, and taxi fares, etc. All allowed travel expenses, including mileage allowances, shall be paid in accordance with 200 KAR 2:006.
When the assignment requires the Vendor to work in the DOI main office, coach airfare and lodging are allowable at actual cost. Lodging and meals will only be reimbursed when overnight travel is required, and approved in advance by DOI.
Allowable travel expenses include the following:
a. Airfare coach class at actual cost (receipt required)
b. Lodging at actual cost (receipt required)
c. Meals and mileage at the rate allowed per 200 KAR 2:006 state travel regulations.
d. Taxi fares/rental cars
For FY2011 the expenses under this section shall not exceed a sum of $42,450

BILL TO	SHIP TO
DEPARTMENT OF INSURANCE - PO BOX 517 PO BOX 517 FRANKFORT KY 40602-0517 US	DEPARTMENT OF INSURANCE - WEST MAIN 215 WEST MAIN FRANKFORT KY 40601 US

Line	CL Description	Due Date	Quantity	Unit Issue	Unit Price	Contract Amt	Total Price
8	Travel-Federal Grant		0.00		0.00000	14,150.00	14,150.00

Extended Description

The Vendor shall not be paid travel expenses unless and except as specifically authorized as follows:
DOI may require the Vendor to work at job sites other than the DOIÆs main office, or attend training, seminars, and trade group or regulator meetings. In those cases, DOI will reimburse the Vendor for airfare at coach or tourist class, and other related transportation costs as allowable such as lodging, meals, and taxi fares, etc. All allowed travel expenses, including mileage allowances, shall be paid in accordance with 200 KAR 2:006.
When the assignment requires the Vendor to work in the DOI main office, coach airfare and lodging are allowable at actual cost. Lodging and meals will only be reimbursed when overnight travel is required, and approved in advance by DOI.
Allowable travel expenses include the following:
a. Airfare coach class at actual cost (receipt required)
b. Lodging at actual cost (receipt required)
c. Meals and mileage at the rate allowed per 200 KAR 2:006 state travel regulations.

Extended Description

d. Taxi fares/rental cars
For FY2012 the expenses under this section shall not exceed a sum of $14,150

BILL TO	SHIP TO
DEPARTMENT OF INSURANCE - PO BOX 517 PO BOX 517 FRANKFORT KY 40602-0517 US	DEPARTMENT OF INSURANCE - WEST MAIN 215 WEST MAIN FRANKFORT KY 40601 US

Total Order Amount:	1,692,800.00

PERSONAL SERVICE CONTRACT AMENDMENT #1

In consideration of the mutual covenants expressed herein, PON2-676-1000002972-2 is hereby amended as follows:

To add commodity line 5 for $405,000.00 for FY11 for actuarial services required by the federal rate review grant.

To add commodity line 6 for $135,000 for FY12 for actuarial services required by the federal rate review grant.

To add commodity line 7 for $42,450 for FY11 for required travel of the actuaries.

To add line 8 for $14,150 for FY12 for required travel of the actuaries.

To add J. Reinstein as an ASA under the Payment section of the contract at the rate of $230 for FY11 and $230 for FY12.

To add the following provision:
Reduction in Contract Worker Hours - The Kentucky General Assembly may allow for a reduction in contract worker hours in conjunction with a budget balancing measure for some professional and non-professional service contracts. If under such authority the agency is required by Executive Order or otherwise to reduce contract hours, the contract will be reduced by the amount specified in that document.

IMPORTANT CHANGES TO THE LAW GOVERNING INVOICING OF PERSONAL SERVICE CONTRACTS * HB **387**, which passed during the 2010 Regular Session and became law upon the approval of the Governor on April 5, 2010, **requires that "no payment shall be made on any personal service contract unless the individual, firm, partnership, or corporation awarded the personal service contract submits its invoice for payment on a form established by the committee."** HB 387 amends KRS 45A.695. At the August 10, 2010 Government Contract Review Committee meeting, the committee established a personal service contract invoice form. A copy of the form is attached.

This information can also be located on the GCRC web page.

HB 387 may be found at: http://www.lrc.ky.gov/record/10rs/HB387.htm

All other conditions of the original contract, except as modified above, are hereby ratified and confirmed. The signatures below signify acceptance and approval of this contract modification.

SIGNATURES

_____ Date:_____

James E. Drennan
Ingenix Consulting
Contractor

_____ Date:_____

Sharon P. Clark, Commissioner
Kentucky Department of Insurance

Approved as to form and legality:

_____ Date:_____

M. Holliday Hopkins, Acting Deputy Secretary &
General Counsel
Public Protection Cabinet

Personal Service Contract

Kentucky Department of Insurance

Health Actuary: Health Benefit Plans and General Actuarial Consulting

RELATIONSHIP

This contract is between the Kentucky Department of Insurance (DOI) and Ingenix Consulting to provide the services of actuarial services. The Actuary shall be an independent contractor. The responsibilities of the parties to this contract shall be performed in accordance with the terms and conditions set forth in this contract and any appendices hereto. The Actuary may be referred to herein as "Vendor."

The Vendor understands the Vendor is a contractor and no employee rights are conferred upon the Vendor. Nothing contained in this agreement shall be construed to indicate a relationship of employer and employee between the DOI and the Vendor.

INTENT OF PARTIES

It is declared to be the intent of the parties hereto that this contract is made in conformity with, and under the terms of, Chapter 304 of the Kentucky Revised Statutes, as that Chapter relates to the regulation and examination of persons or entities regulated by the DOI.

SERVICES TO BE PERFORMED

The Vendor shall:

a. Provide actuarial review of health insurance rate filings for compliance with Kentucky Revised Statutes, Kentucky Administrative Regulations, Departmental Policies, and recognized actuarial standards and guidelines and make recommendations to the Division Director for approval/disapproval.

b. Provide consulting services on actuarial issues.

c. Determine financial impact on the health insurance market for proposed legislation to include analysis and impact of mandated benefits under the direction of the DOI.

d. Examine and actuarially analyze loss reserves, premium collection plans, retrospective adjustments, and all other aspects affecting the financial condition of health insurers doing business in Kentucky.

e. Provide actuarial services in conjunction with financial and market conduct examinations.

f. Establish rates and reserves for Kentucky Access.

g. Testify before the legislature on actuarial issues.

h. Perform follow-up work and prepare written reports as necessary or requested relating to health insurance rate filings.

i. Be available, upon request, for DOI hearings.

j. Be available to perform required services at the DOI located at 215 West Main Street, Frankfort, KY 40601 or at any other location to which the DOI may be relocated

RIGHT OF OWNERSHIP TO WORK PRODUCTS

The Vendor shall submit to the DOI any and all records, reports, documents, exhibits, data and other material related to the services for which the DOI has contracted and which have been obtained or prepared by the Vendor in connection with the performance of the services for which the DOI has contracted. The DOI shall own any records, reports, documents, exhibits, data, source code, object code, work papers, novel work process or methodology, test data, pleadings, and other documentation generated as a result of performance by the Vendor of the services for

which the DOI has contracted, unless the Vendor demonstrates, in writing, that the work was done prior to the effective date of the Vendor's contract with the DOI or is otherwise excluded, and the DOI agrees to the exclusion in writing. The Vendor shall submit, at the completion of any assigned project or examination, any and all records, reports, documents, exhibits, data, and other material obtained or prepared by the Vendor in connection with the performance of the services governed by this contract.

Upon termination, the Vendor recognizes that the DOI reserves the right to limit the use of any work product, knowledge, information, documents, and materials developed, created, or that can be recreated by the Vendor as a result of performance by the Vendor of the services for which the DOI has contracted.

ARCHIVAL COPY

Notwithstanding the requirements under "Right of Ownership to Work Products," and "Term of Contract" provisions of this contract, the Vendor may retain one copy of whatever materials that the Vendor, in its professional judgment, deems necessary to document the work product in accordance with actuarial and/or professional standards of practice.

CONTRACT COMPONENTS

The DOI's acceptance of the Vendor's offer in response to the Solicitation shall create a valid contract between the parties consisting of the following:

a. any Written Agreement between the Parties;

b. any Addenda to the Solicitation;

c. the Solicitation and all attachments thereto;

d. general conditions contained in 200 KAR 5:021;

e. any Best and Final Offer;

f. any clarifications concerning the Vendor's proposal in response to the solicitation; and

g. the Vendor's proposal in response to the RFP.

In the event of any conflict between or among the provisions contained in the contract, the order of precedence shall be as enumerated above.

FINAL AGREEMENT AND FUNDING OUT PROVISION

The personal service contract will be executed pursuant to and shall become effective upon review and approval of the Secretary of the Finance and Administration Cabinet, or his designee, and the Legislative Research Commission's Government Contract Review Committee (KRS 45A.695).

The state agency may terminate this contract if funds are not appropriated to the contracting agency or are not otherwise available for the purpose of making payments without incurring any

obligation for payment after the date of termination, regardless of the terms of the contract. The state agency shall provide the contractor thirty (30) calendar days written notice of termination of the contract.

CONTRACT PROVISIONS

If any provision of the contract (including items incorporated by reference) is declared or found to be illegal, unenforceable, or void, then both the DOI and the Vendor shall be relieved of all obligations arising under such a provision. If the remainder of the contract is capable of performance, it shall not be affected by such declaration or finding and shall be fully performed.

TYPE OF CONTRACT

This contract is issued as a personal service contract regulated pursuant to KRS Chapter 45A.

TERM OF CONTRACT

This contract shall be in effect from July 1, 2010 through June 30, 2012.

TURNOVER

In those circumstances where the parties choose not to renew the contract at the natural expiration of the contract's term, or the contract is terminated, the Vendor, at the DOI's option, shall cooperate and provide reasonable and appropriate assistance to the DOI and its designees regarding transfer of duties.

CHANGES AND MODIFICATIONS TO THE CONTRACT

Pursuant to KRS 45A.210(1) and 200 KAR 5:311, no modification or change of any provision in the contract shall be made, or construed to have been made, unless such modification is mutually agreed upon in writing by the Vendor and the DOI, and incorporated as a written amendment to the contract and processed through the Division of Material and Procurement Services and approved by the Finance and Administration Cabinet prior to the effective date of such modification or change. Memorandum of understanding, written clarification, and/or correspondence shall not be construed as amendments to the contract.

ASSIGNMENT

The Vendor shall not assign the responsibilities or duties required by this contract in whole or in part or any payment arising therefrom without the prior written consent of the DOI. Any purported assignment is void.

If the contractor is a corporation, proprietorship, or an entity other than individual, only the principal of the entity shall perform the services governed by this contract, unless the Commissioner authorizes the performance of those services by a person other than the principal. If the Commissioner authorizes the performance of the services governed by this contract by a person other than the principal contractor, all terms of this contract shall apply and the principal shall remain responsible for compliance with the terms and conditions of the contract.

NOTICES

After the award of contract, all programmatic communications are to be made to:

Jill Mitchell, Rate and Form Filing Branch Manager

Health and Life Division

Kentucky Department of Insurance

215 W. Main Street

P.O. Box 517

Frankfort, KY 40602

(502) 564-6088

Jill.Mitchell@ky.gov

EVALUATIONS/AUDITS

The Vendor, at the discretion of the DOI, may be subject to performance evaluations or audits in a format and at a frequency prescribed by the DOI.

Any audit review under this agreement, except to the extent that such provisions are contrary to rights specifically granted under HIPAA, will be conducted at mutually convenient times and locations and in a manner that does not disrupt the Vendor's business operations. DOI agrees to keep information disclosed to it in the course of the audit review confidential from all third parties, except for any third party participating in the audit review with the Vendor's consent as described below.

The Vendor understands that DOI may wish to engage a third party to assist it in conducting the audit review. No third party may participate in the review unless DOI obtains the Vendor's prior consent and the third party enters into an appropriate confidentiality agreement with it. DOI understands that the Vendor will not consent to the participation of any third party offering services or products that compete with the Vendor's own services.

INVOICES

No payment shall be made on any personal service contract unless the Vendor submits an invoice for payment on a form prescribed by the DOI or the Government Contract Review Committee of the Legislative Research Commission.

Invoices shall be submitted at least every ninety (90) days. Separate invoices shall be submitted for each distinct matter covered by the personal service contract, and shall be signed by the individual responsible for that matter.

Each invoice shall contain the following information:

1. A description of the matter covered by the invoice;

2. The date each service was performed;

3. A full description of each service;

4. The name and title of each individual who worked on the matter, and the time the individual spent on the matter;

5. The subject matter and recipient of any correspondence;

6. A full description of any work product produced, designating the way in which the work product is associated with the matter being invoiced;

7. The hourly rate for each individual working on the matter, and the total charge for that individual for each matter invoiced;

8. An itemized list of all disbursements to be reimbursed by the state for each matter invoiced;

9. A total charge for each matter;

10. The combined total for services and disbursements for the billing period;

11. The tax identification number of the Vendor awarded the personal service contract; and

12. An indication on each invoice of whether or not the invoice is final.

The issuance of an invoice to the Commonwealth constitutes an affirmation by the Vendor awarded the personal service contract that the invoice truly and accurately represents work actually performed, and expenses actually incurred.

PAYMENT

Staff Member	Hourly Billing Rate for FY2011	Hourly Billing Rate for FY2012
James E. Drennen FSA	$340	$340
B. Griffith, FSA	$340	$340
J. Bourdeau, FSA	$340	$340
J. Lloyd, FSA	$340	$340
B. Greenwood, ASA	$230	$230
J. Bogolin, ASA	$230	$230
J. Reinstein, ASA	$230	$230
Non-Certified Actuarial Staff	$175	$175
Administrative Staff	$28	$28

All services shall be performed by the individuals listed in the submission to the request for proposal. Services provided by any other individual or entity shall require the prior written approval of the DOI. The DOI and the Vendor shall reach an agreement as to the applicable

actuarial fee to any work assignment.

The hourly rate will not be paid for travel time to or from a worksite. Travel time to and from home/office to the DOI main office is not a payable expense. Further, the Vendor shall not be paid for time spent at lunch or on other breaks.

Partial billing of actuarial fees shall be allowed in quarter hour increments.

For FY2011 the expenses under this section shall not exceed a sum of $480,000

For FY2012 the expenses under this section shall not exceed a sum of $480,000.

PAYMENT FOR SERVICES RELATED TO THE PATIENT PROTECTION AND AFFORDABLE CARE ACT (PPACA)

J. Reinstein and B. Griffith are designated as the actuaries assigned to provide services to the Department under this contract related to the PPACA. In the event the designated actuaries are unable to perform the services under this contract, the Department may designate alternate actuaries from those listed in the PAYMENT section of this contract to perform the services.

The expenses for services related to PPACA shall not exceed $405,000 through FY2011.

The expenses for services related to PPACA shall not exceed $135,000 through FY2012.

TAXES

The Vendor shall pay all applicable taxes.

TRAINING

The Vendor is responsible for his/her training obligations to ensure that qualifications are maintained and that Vendor continues to meet the eligibility requirements of the position. DOI may require the Vendor to attend training, seminars, and trade group or regulator meetings. In those cases, DOI will reimburse the Vendor in accordance with the travel provisions outlined in this RFP.

TRAVEL

The Vendor shall not be paid travel expenses unless and except as specifically authorized as follows:

DOI may require the Vendor to work at job sites other than the DOI's main office, or attend training, seminars, and trade group or regulator meetings. In those cases, DOI will reimburse the Vendor for airfare at coach or tourist class, and other related transportation costs as allowable such as lodging, meals, and taxi fares, etc. All allowed travel expenses, including mileage allowances, shall be paid in accordance with 200 KAR 2:006.

When the assignment requires the Vendor to work in the DOI main office, coach airfare and lodging are allowable at actual cost. Lodging and meals will only be reimbursed when overnight travel is required, and approved in advance by DOI.

Allowable travel expenses include the following:

a. Airfare coach class at actual cost (receipt required)

b. Lodging at actual cost (receipt required)

c. Meals and mileage at the rate allowed per 200 KAR 2:006 state travel regulations.

d. Taxi fares/rental cars

For FY2011 the expenses under this section shall not exceed a sum of $68,100

For FY2012 the expenses under this section shall not exceed a sum of $68,100.

TRAVEL RELATED TO PPACA

J. Reinstein and B. Griffith are designated as the actuaries assigned to provide services to the Department under this contract related to PPACA. In the event the designated actuaries are unable to perform the services under this contract, the Department may designate alternate actuar ies from those listed in the PAYMENT section of this contract to perform the services.

The expenses for services related to PPACA shall not exceed $42,450 through FY2011.

The expenses for services related to PPACA shall not exceed $14,150 through FY2012.

SPENDING LIMIT/CHANGE OF PROJECT SCOPE

If at any point after a contract has been executed the Vendor concludes that its fees or travel expenses will exceed the limits herein, the Vendor shall promptly discuss the situation with DOI. Any estimate the Vendor may provide to DOI on a particular project does not include its charges for any significant changes in scope, deliverables, or time requirements.

FEDERAL DEBARMENT

The Vendor's signature on this contract certifies that the Vendor is not debarred from doing business with federal agencies and that, if debarred during the term of the contract, the Vendor will notify the DOI within seventy-two (72) hours of the federal debarment.

SUBCONTRACTORS

The Vendor shall make no subcontract with any other party to fulfill the obligations as set out under this contract.

INSURANCE

The Vendor shall maintain such liability or other insurance as is reasonably necessary in Vendor's judgment to provide adequate coverage against losses and liabilities attributable to acts and/or omissions of Vendor in the performance of the Vendor's duties. The Vendor shall determine whether and in what amounts to purchase such insurance using sound judgment considering its financial circumstances, the extent of risk, and the availability of coverage at

commercially reasonable rates. Vendor shall provide DOI evidence of any such coverage upon request.

The DOI shall neither provide nor reimburse the Vendor for liability, workers' compensation, or other insurance coverage.

MEDIATION

The parties agree that they will work in good faith to resolve any disputes arising under this agreement. If a dispute cannot be resolved by the parties, the matter will be submitted to non-binding mediation within 60 days of the dispute before the parties pursue any other remedies. The mediation shall be held before a panel of three neutral and independent mediators. One mediator shall be selected by the Vendor, one by the DOI, and the third mediator selected by the first two mediators.

LIMITATION OF LIABILITY

The Vendor shall perform the services outlined in this contract in accordance with accepted professional standards and, in doing so, shall not be liable to the DOI for damages in excess of three times the professional fees paid to the Vendor by the DOI.

CONFIDENTIALITY OF CONTRACT TERMS

The Vendor and the DOI agree that all information communicated between them before the effective date of the contract shall be received in strict confidence and shall not be disclosed by the receiving party, its agents, or employees, without prior written consent of the other party. Such information shall be kept confidential subject to DOI and federal information disclosure laws. Upon signing of the contract by both parties, the terms of the contract become available to the public, pursuant to the provisions of KRS 61.870.

NONDISCLOSURE

To enable Vendor to perform its services, the DOI shall promptly provide the Vendor with such direction, materials, information, and access to its representatives as Vendor reasonably requests or, in the case of examinations or other investigations of insurance carriers, support contractor in obtaining such insurance carriers' materials, information, and access to carriers' respective representatives. Vendor does not take responsibility for verifying the accuracy or completeness of information supplied to it by DOI, its representatives, insurance carriers, or their respective representatives. If the Vendor receives inaccurate, incomplete, or improperly formatted information, any additional time and expenses required to correct the information will be billed to DOI as additional services.

Vendor agrees to take reasonable precautions, including the same precautions it takes to protect its own confidential information, to ensure that it does not disclose to any third party any information that DOI identifies as confidential and discloses to Vendor in the course of the engagement with Vendor, about its business operations and employees, unless Vendor first obtains DOI's consent. Similarly, Vendor agrees to take reasonable precautions, including the same precautions it takes to protect its own confidential information, to ensure that it does not disclose to any third party any information that an insurance carrier identifies as confidential and

discloses to Vendor in the course of this engagement, about its business operations and employees, unless it first obtains such insurance carrier's consent. Vendor's obligations will not apply to any of the following: (a) information already known to it at the time of disclosure; (b) information in the public domain or available to the public; (c) information available to it from third parties without any nondisclosure obligation to DOI and/or an insurance carrier that is known to Vendor; or (d) information independently developed by Vendor.

If any court or regulatory order or other service of legal process requires the Vendor to disclose information covered by its confidentiality obligation, then Vendor may make any disclosure required by law. The Vendor shall provide DOI with prompt notice of any such order or process and cooperate with it, at its expense, in responding to it.

CONFIDENTIAL INFORMATION

The Vendor shall comply with the provisions of the Privacy Act of 1974 (5 U.S.C. 552) to keep confidential information concerning client data, the business of the DOI, its financial affairs, its relations with its citizens and employees, as well as any other information which may be specifically classified as confidential by the DOI in writing to the Vendor. All federal and state laws and regulations related to confidentiality shall be applicable to the Vendor.

MULTIPLE AWARDS

DOI reserves the right to award contracts to multiple Vendors.

CANCELLATION

Contracts shall be terminated in accordance with the provisions of 200 KAR 5:312. The Commonwealth may terminate a contract for convenience if the purchasing officer has determined that termination will be in the Commonwealth's best interests. The Commonwealth shall provide the contractor thirty (30) calendar days written notice of termination of the contract, unless the secretary of the Finance and Administration Cabinet, or his designee, makes a written determination that a shorter notice of termination for convenience is in the best interest of the commonwealth.

All records, reports, documents, equipment, or other materials delivered or transmitted to the Vendor by the DOI shall remain the property of the DOI and shall be promptly returned to the DOI by the Vendor, at the Vendor's own expense, upon termination of this contract.

The Vendor shall be entitled to payment for work performed up to the date of termination, provided that the work assigned to the Vendor has been performed in a manner that is satisfactory to the DOI, all property and/or equipment of the DOI has been returned, and the Vendor has complied with the terms of this contract.

KENTUCKY EEO ACT

Vendors are obligated to comply with the Kentucky EEO Act (Act), KRS 45.560 – 45.640 on state contracts that exceed $250,000. No contract award shall become effective until all required forms are satisfactorily submitted and the Office of EEO and Contract Compliance has certified compliance.

Failure to comply with the Act may result in non-award, withdrawal of award, cessation of contract payments, etc.

Vendors must submit the following documents in accordance with the requirements of the solicitation—EEO-1: Employer Information Report, Affidavit of Intent to Comply, Employee Data Sheet and Subcontractor Report OR a copy of the Kentucky EEO Approval Letter issued by the Finance and Administration Cabinet, Office of EEO and Contract Compliance.

Vendors may obtain copies of the required EEO documents and instructions for completing the required forms from the Finance and Administration Cabinet's e-Procurement Web page under Vendor Information, Standard Attachments and General Terms at the following address: eProcurement.ky.gov.

Vendors must advise each subcontractor/Vendor—with a subcontract of more than $250,000—of the subcontractor's obligation to comply with the KY EEO Act. Further, Vendors are responsible for compiling EEO documentation from their subcontractors/Vendors and submitting the documentation to the Finance and Administration Cabinet, Office of EEO and Contract Compliance.

Failure to complete, sign and submit all required documents will delay the award process as incomplete submissions will not be processed.

Pursuant to KRS 45.610 (2), the Finance and Administration Cabinet, Office of EEO and Contract Compliance reserves the right to request additional information and/or documentation and to conduct on-site monitoring reviews of project sites and/or business facilities at any point for the duration of any contract which exceeds $250,000 to ascertain compliance with the Act and such rules, regulations and orders issued pursuant thereto.

All questions regarding EEO forms or contract compliance issues must be directed to the Finance and Administration Cabinet, Office of EEO and Contract Compliance via e-mail: Finance.ContractCompliance@ky.gov or via telephone: (502) 564-2874.

CERTIFICATIONS INCORPORATED INTO CONTRACT

All attachments signed by the Vendor in response to the Request for Proposal are considered a part of this contract and are incorporated herein.

HIPAA PRIVACY PROVISIONS

Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, 45 CFR Parts 160 and 164 ("HIPAA Privacy Rule") Provision:

Sections 261 through 264 of the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, known as "the Administrative Simplification provisions," direct the Department of Health and Human Services to develop standards to protect the security, confidentiality and integrity of health information; and pursuant to the Administrative Simplification provisions, the Secretary of Health and Human Services has issued regulations modifying 45 CFR Parts 160 and 164 (the "HIPAA Privacy Rule").

This STATE AGENCY is a "Hybrid Covered Entity" (hereafter "CE"). To the extent Contractor is State Agency's Business Associate (hereafter "BA"), this Agreement, in part, is intended to provide satisfactory assurance that Contractor will appropriately safeguard PHI in conformance with applicable provisions of the HIPAA Privacy Rule.

BA may have access to Protected Health Information (as defined below) in fulfilling its responsibilities under this Agreement;

Any and all capitalized terms in this Section shall have the definitions set forth in the HIPAA Privacy Rule.

The term "Protected Health Information" (hereafter "PHI") means individually identifiable health information including, without limitation, all information, data, documentation, and materials, including without limitation, demographic, medical and financial information, that relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual. PHI shall include identifiable health information relating to a member of Kentucky Access.

BA acknowledges and agrees that all PHI that is created or received by CE and disclosed or made available in any form, including paper record, oral communication, audio recording, and electronic display by CE or its operating units to BA or is created or received by BA on CE's behalf shall be subject to this Agreement.

I. CONFIDENTIALITY REQUIREMENTS

(A) BA agrees:

(i) to use or disclose any PHI solely (1) for meeting its obligations as set forth in any agreements between the Parties evidencing their business relationship, or (2) as required by applicable law, rule or regulation, or by accrediting or credentialing organization to whom CE is required to disclose such information or as otherwise is permitted under this Agreement, or the HIPAA Privacy Rule;

(ii) at termination of this Agreement, (or any similar documentation of the business relationship of the Parties, or upon request of CE, whichever occurs first, if feasible, BA will return or destroy all PHI received from or created or received by BA on behalf of CE that BA still maintains in any form and retain no copies of such information, or if such return or destruction is not feasible, BA will extend the protections of this Agreement to the information and limit further uses and disclosures to those purposes that make the return or destruction of the information not feasible; and

(iii) to ensure that its agents, including a subcontractor, to whom it provides PHI received from or created by BA on behalf of CE, agrees to the same restrictions and conditions that apply to BA with respect to such information. In addition, BA agrees to take reasonable steps to ensure that its employees' actions or omissions do not cause BA to breach the terms of this Agreement.

(B) Notwithstanding the prohibitions set forth in this Agreement, BA may use and disclose PHI

as follows:

(i) if necessary, for the proper management and administration of BA or to carry out the legal responsibilities of BA, provided that as to any such disclosure, the following requirements are met:

(a) the disclosure is required by law; or

(b) BA obtains reasonable assurances from the person to whom the information is disclosed that it will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the person, and the person notifies BA of any instances of which it is aware in which the confidentiality of the information has been breached:

(ii) for data aggregation services, if to be provided by BA for the health care operations of CE pursuant to any agreements between the Parties evidencing their business relationship. For purposes of this Agreement, data aggregation services means the combining of PHI by BA with the PHI received by BA in its capacity as a BA of another CE, to permit data analyses that relate to the health care operations of the respective covered entities.

(C) BA will implement appropriate safeguards to prevent use or disclosure of PHI other than as permitted in this Agreement. The Secretary of Health and Human Services shall have the right to audit BA's records and practices related to use and disclosure of PHI to ensure CE's compliance with the terms of the HIPAA Privacy Rule. BA shall report to CE any use or disclosure of PHI which is not in compliance with the terms of this Agreement of which it becomes aware.

II. AVAILABILITY OF PHI

BA agrees to make available PHI to the extent and in the manner required by Section 164.524 of the HIPAA Privacy Rule. BA agrees to make PHI available for amendment and incorporate any amendments to PHI in accordance with the requirements of Section 164.526 of the HIPAA Privacy Rule. In addition, BA agrees to make PHI available for purposes of accounting of disclosures, as required by Section 164.528 of the HIPAA Privacy Rule.

IV. TERMINATION

Notwithstanding anything in this Agreement to the contrary, CE shall have the right to terminate this Agreement immediately if CE determines that BA has violated any material term of this Agreement. If CE reasonably believes that BA will violate a material term of this Agreement and, where practicable, CE gives written notice to BA of such belief within a reasonable time after forming such belief, and BA fails to provide adequate written assurances to CE that it will not breach the cited term of this Agreement within a reasonable period of time given the specific circumstances, but in any event, before the threatened breach is to occur, then CE shall have the right to terminate this Agreement immediately.

V. MISCELLANEOUS

Except as expressly stated herein or the HIPAA Privacy Rule, the Parties to this Agreement do not intend to create any rights in any third parties. The obligations of BA under the Section shall survive the expiration, termination, or cancellation of this Agreement, and/or the business

relationship of the Parties, and shall continue to bind BA, its agents, employees, contractors, successors, and assigns as set forth herein.

This Agreement may be amended or modified only in writing signed by the Parties. No Party may assign its respective rights and obligations under this Agreement without the prior written consent of the other Party. None of the provisions of this Agreement are intended to create, nor will they be deemed to create any relationship between the Parties other than that of independent parties contracting with each other solely for the purposes of effecting the provisions of this Agreement and any other agreements between the Parties evidencing their business relationship. This Agreement will be governed by the laws of the Commonwealth of Kentucky. No change, waiver or discharge of any liability or obligation hereunder on any one or more occasions shall be deemed a waiver of performance of any continuing or other obligation, or shall prohibit enforcement of any obligation, on any other occasion.

The parties agree that, in the event that any documentation of the arrangement pursuant to which BA provides services to CE contains provisions relating to the use or disclosure of PHI which are more restrictive than the provisions of this Agreement, the provisions of the more restrictive documentation will control. The provisions of this Agreement are intended to establish the minimum requirements regarding BA's use and disclosure of PHI.

In the event that any provision of this Agreement is held by a court of competent jurisdiction to be invalid or unenforceable, the remainder of the provisions of this Agreement will remain in full force and effect. In addition, in the event a party believes in good faith that any provision of this Agreement fails to comply with the then-current requirements of the HIPAA Privacy Rule, such party shall notify the other party in writing. For a period of up to thirty days, the parties shall address in good faith such concern and amend the terms of this Agreement, if necessary to bring it into compliance. If, after such thirty-day period, the Agreement fails to comply with the HIPAA Privacy Rule, then either party has the right to terminate upon written notice to the other party.

PERSONAL SERVICE CONTRACT CLAUSES

The Vendor shall comply with the following personal service contract clauses:

PSC Standard Terms and Conditions

Whereas, the first party, the state agency, has concluded that either state personnel are not available to perform said function, or it would not be feasible to utilize state personnel to perform said function; and

Whereas, the second party, the contractor, is available and qualified to perform such function; and

Whereas, for the abovementioned reasons, the state agency desires to avail itself of the services of the second party;

NOW THEREFORE, the following terms and conditions are applicable to this contract:

Effective Date:

This agreement is not effective until the Secretary of the Finance and Administration Cabinet or his authorized designee has approved the contract and until the contract has been submitted to the Legislative Research Commission, Government Contract Review Committee ("LRC").

Payments on personal service contracts and memoranda of agreement shall not be authorized for services rendered after government contract review committee disapproval, unless the decision of the committee is overridden by the Secretary of the Finance and Administration Cabinet or agency head, if the agency has been granted delegation authority by the Secretary.

Renewals:

Upon expiration of the initial term, the contract may be renewed in accordance with the terms and conditions in the original solicitation. Renewal shall be subject to prior approval from the Secretary of the Finance and Administration Cabinet or his authorized designee and the LRC Government Contract Review Committee in accordance with KRS 45A.695 and KRS 45A.705, and contingent upon available funding.

LRC Policies:

Pursuant to KRS 45A.725, LRC has established policies which govern rates payable for certain professional services. These are located on the LRC webpage (http://www.lrc.ky.gov/Statcomm/Contracts/homepage.htm) and would impact any contract established under KRS 45A.690 *et seq.*, where applicable.

Choice of Law and Forum:

All questions as to the execution, validity, interpretation, construction and performance of this agreement shall be governed by the laws of the Commonwealth of Kentucky. Furthermore, the parties hereto agree that any legal action which is brought on the basis of this agreement shall be filed in the Franklin County Circuit Court of the Commonwealth of Kentucky.

Cancellation:

The state agency shall have the right to terminate and cancel this agreement at any time not to exceed thirty (30) days' written notice served on the contractor by registered or certified mail.

Funding Out Provision:

The state agency may terminate this contract if funds are not appropriated to the contracting agency or are not otherwise available for the purpose of making payments without incurring any obligation for payment after the date of termination, regardless of the terms of the contract. The

state agency shall provide the contractor thirty (30) calendar days written notice of termination of the contract.

Reduction in Contract Worker Hours

The Kentucky General Assembly may allow for a reduction in contract worker hours in conjunction with a budget balancing measure for some professional and non-professional service contracts. If under such authority the agency is required by Executive Order or otherwise to reduce contract hours, the contract will be reduced by the amount specified in that document.

Authorized to do Business in Kentucky:

The contractor affirms that it is properly authorized under the laws of the Commonwealth of Kentucky to conduct business in this state and will remain in good standing to do business in the Commonwealth of Kentucky for the duration of any contract awarded.

The Contractor shall maintain certification of authority to conduct business in the Commonwealth of Kentucky during the term of this Contract. Such registration is obtained from the Secretary of State, who will also provide the certification thereof.

Invoices for fees:

The contractor shall maintain supporting documents to substantiate invoices and shall furnish same if required by state government.

IMPORTANT CHANGES TO THE LAW GOVERNING INVOICING OF PERSONAL SERVICE CONTRACTS * HB 387, which passed during the 2010 Regular Session and became law upon the approval of the Governor on April 5, 2010, **requires that "no payment shall be made on any personal service contract unless the individual, firm, partnership, or corporation awarded the personal service contract submits its invoice for payment on a form established by the committee."** HB 387 amends KRS 45A.695. At the August 10, 2010 Government Contract Review Committee meeting, the committee established a personal service contract invoice form. A copy of the form is attached.

This information can also be located on the GCRC web page.

HB 387 may be found at: http://www.lrc.ky.gov/record/10rs/HB387.htm

Travel expenses, if authorized:

The contractor shall be paid for no travel expenses unless and except as specifically authorized by

the specifications of the contract.

Other expenses, if authorized herein:

The contractor shall be reimbursed for no other expenses of any kind, unless and except as specifically authorized within the specifications of the contract.

If the reimbursement of such expenses is authorized, the reimbursement shall be only on an out-of-pocket basis. Request for payment of same shall be processed upon receipt from the contractor of valid, itemized statements submitted periodically for payment at the time any fees are due. The contractor shall maintain supporting documents that substantiate every claim for expenses and shall furnish same if requested by state government.

~~In~~voicing for fee: the contractor's fee shall be original invoice(s) and shall be documented by the contractor. The invoice(s) must conform to the method described in the specifications of the contract.
~~In~~voicing for travel expenses: the contractor must follow instructions described in the specifications of the contract. Either original or certified copies of receipts must be submitted for airline tickets, motel bills, restaurant charges, rental car charges, and any other miscellaneous expenses.
~~In~~voicing for miscellaneous expenses: the contractor must follow instructions prescribed in the specifications of the contract. Expenses submitted shall be documented by original or certified copies.

Purchasing and specifications:

The contractor certifies that he will not attempt in any manner to influence any specifications to be restrictive in any way or respect nor will he attempt in any way to influence any purchasing of services, commodities or equipment by the Commonwealth of Kentucky. For the purpose of this paragraph and the following paragraph that pertains to conflict-of interest laws and principles, "he" is construed to mean "they" if more than one person is involved and if a firm, partnership, corporation, or other organization is involved, then "he" is construed to mean any person with an interest therein.

Conflict-of-interest laws and principles:

The contractor certifies that he is legally entitled to enter into this contract with the Commonwealth of Kentucky, and by holding and performing this contract will not be violating either any conflict of interest statute (KRS 45A.330-45A.340, 45A.990, 164.390), or KRS 11A.040 of the executive branch code of ethics, relating to the employment of former public servants.

Campaign finance:

The contractor certifies that neither he/she nor any member of his/her immediate family having an interest of 10% or more in any business entity involved in the performance of this contract, has contributed more than the amount specified in KRS 121.056(2), to the campaign of the gubernatorial candidate elected at the election last preceding the date of this contract. The contractor further swears under the penalty of perjury, as provided by KRS 523.020, that neither he/she nor the company which he/she represents, has knowingly violated any provisions of the campaign finance laws of the Commonwealth, and that the award of a contract to him/her or the company which he/she represents will not violate any provisions of the campaign finance laws of the Commonwealth.

Certification:

The state agency certifies that it is in compliance with the provisions of KRS 45A.695. "Access to contractor's books, documents, papers, records, or other evidence directly pertinent to the contract." The contractor, as defined in KRS 45A.030(9) agrees that the contracting agency, the Finance and Administration Cabinet, the Auditor of Public Accounts, and the Legislative Research Commission, or their duly authorized representatives, shall have access to any books, documents, papers, records, or other evidence, which are directly pertinent to this contract for the purpose of financial audit or program review. Records and other prequalification information confidentially disclosed as part of the bid process shall not be deemed as directly pertinent to the contract and shall be exempt from disclosure as provided in KRS 61.878(1)(c). The contractor also recognizes that any books, documents, papers, records, or other evidence, received during a financial audit or program review shall be subject to the Kentucky Open Records Act, KRS 61.870 to 61.884

Protest

Pursuant to KRS 45A.285, The Secretary of the Finance and Administration Cabinet, or his designee, shall have authority to determine protests and other controversies of actual or prospective Vendors in connection with the solicitation or selection for award of a Master Agreement or Contract.

Any actual or prospective Vendor, who is aggrieved in connection with the solicitation or selection for award of a Master Agreement or Contract, may file protest with the Secretary of the Finance and Administration Cabinet. **A protest or notice of other controversy must be filed promptly and in any event within two (2) calendar weeks after such aggrieved person knows or should have known of the facts giving rise thereto. All protests or notices of other controversies must be in writing and shall be addressed to:**

Jonathan Miller, Secretary

Commonwealth of Kentucky

Finance and Administration Cabinet

Room 383, New Capitol Annex

702 Capitol Avenue

Frankfort, KY 40601

Phone #: (502) 564-4240

Fax #: (502) 564-6785

The Secretary of Finance and Administration Cabinet shall promptly issue a decision in writing. A copy of that decision shall be mailed or otherwise furnished to the aggrieved party and shall state the reasons for the action taken.

The decision by the Secretary of the Finance and Administration Cabinet shall be final and conclusive.

Social security: (check one)

_____ the parties are cognizant that the state is not liable for social security contributions pursuant to 42 U.S. Code, section 418, relative to the compensation of the second party for this contract.

_____ the parties are cognizant that the state is liable for social security contributions pursuant to 42 U.S. Code, section 418, relative to the compensation of the second party for this contract.

Violation of tax and employment laws:

KRS 45A.485 requires the contractor to reveal to the Commonwealth, prior to the award of a contract, any final determination of a violation by the contractor within the previous five (5) year period of the provisions of KRS chapters 136, 139, 141, 337, 338, 341, and 342. These statutes relate to the state sales and use tax, corporate and utility tax, income tax, wages and hours laws, occupational safety and health laws, unemployment insurance laws, and workers compensation insurance laws, respectively.

To comply with the provisions of KRS 45A.485, the contractor shall report any such final determination(s) of violation(s) to the Commonwealth by providing the following information regarding the final determination(s): the KRS violated, the date of the final determination, and the state agency which issued the final determination.

KRS 45A.485 also provides that, for the duration of any contract, the contractor shall be in continuous compliance with the provisions of those statutes which apply to the contractor's operations, and that the contractor's failure to reveal a final determination as described above or failure to comply with the above statutes for the duration of the contract, shall be grounds for the Commonwealth's cancellation of the contract and the contractor's disqualification from eligibility for future state contracts for a period of two (2) years.

Contractor must check one:

_____ The contractor has not violated any of the provisions of the above statutes within the previous five (5) year period.

_____ the contractor has violated the provisions of one or more of the above statutes within the previous five (5) year period and has revealed such final determination(s) of violation(s). A list of such determination(s) is attached.

Discrimination:

Discrimination (because of race, religion, color, national origin, sex, age, or disability) prohibited. This section applies only to contracts utilizing federal funds, in whole or in part. During the performance of this contract, the contractor agrees as follows:

1. The contractor will not discriminate against any employee or applicant for employment because of race, religion, color, national origin, sex or age. The contractor further agrees to comply with the provisions of the Americans with Disabilities Act (ADA), Public Law 101-336, and applicable federal regulations relating thereto prohibiting discrimination against otherwise qualified disabled individuals under any program or activity. The contractor agrees to provide, upon request, needed reasonable accommodations. The contractor will take affirmative action to ensure that applicants are employed and that employees are treated during employment without regard to their race, religion, color, national origin, sex, age or disability. Such action shall include, but not be limited to the following; employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensations; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the provisions of this non-discrimination clause.

2. The contractor will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment

without regard to race, religion, color, national origin, sex, age or disability.

3. The contractor will send to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding, a notice advising the said labor union or workers' representative of the contractor's commitments under this section, and shall post copies of the notice in conspicuous places available to employees and applicants for employment. The contractor will take such action with respect to any subcontract or purchase order as the administering agency may direct as a means of enforcing such provisions, including sanctions for noncompliance.

4. The contractor will comply with all provisions of Executive Order No. 11246 of September 24, 1965 as amended, and of the rules, regulations and relevant orders of the Secretary of Labor.

5. The contractor will furnish all information and reports required by Executive Order No. 11246 of September 24, 1965, as amended, and by the rules, regulations and orders of the Secretary of Labor, or pursuant thereto, and will permit access to his books, records and accounts by the administering agency and the Secretary of Labor for purposes of investigation to ascertain compliance with such rules, regulations and orders.

6. In the event of the contractor's noncompliance with the nondiscrimination clauses of this contract or with any of the said rules, regulations or orders, this contract may be cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further government contracts or federally-assisted construction contracts in accordance with procedures authorized in Executive Order No. 11246 of September 24, 1965, as amended, and such other sanctions may be imposed and remedies invoked as provided in or as otherwise provided by law.

7. The contractor will include the provisions of paragraphs (1) through (7) of section 202 of Executive Order 11246 in every subcontract or purchase order unless exempted by rules, regulations or orders of the Secretary of Labor, issued pursuant to section 204 of Executive Order No. 11246 of September 24, 1965, as amended, so that such provisions will be binding upon each subcontractor or vendor. The contractor will take such action with respect to any subcontract or purchase order as the administering agency may direct as a means of enforcing such provisions including sanctions for noncompliance; provided, however, that in the event a contractor becomes involved in, or is threatened with, litigation with a subcontractor or vendor as a result of such direction by the agency, the contractor may request the United States to enter into such litigation to protect the interests of the United States.

PERSONAL SERVICE CONTRACT INVOICE FORM

GOVERNMENT CONTRACT REVIEW COMMITTEE

LEGISLATIVE RESEARCH COMMISSION

Pursuant to KRS 45A.695, no payment shall be made on any personal service contract unless the individual, firm, partnership, or corporation awarded the personal service contract submits its invoice for payment on a form established by the committee.

Invoices shall be submitted every ninety (90) days, unless the personal service contract specifies a different submission time period.

Separate invoices shall be submitted for each distinct matter covered by the personal service contract, and shall be signed by the individual responsible for that matter

The issuance of an invoice to the Commonwealth constitutes an affirmation by the individual, firm, partnership, or corporation awarded the personal service contract that the invoice truly and accurately represents work actually performed, and the expenses actually incurred.

The head of the contracting body shall approve the invoice, indicating that the charges in the invoice reflect the value of the work performed, and all recorded costs and disbursements were reasonably and necessarily incurred in connection with the matter invoiced.

NOTE: All questions must be answered fully. If the space provided is insufficient, additional pages should be attached referencing the specifically numbered item. Any questions regarding the invoice requirements should be directed to the contracting agency.

Contract Number:_____ **Date of Invoice:**_____

_____ _____

Contracting Body **Division, Branch, etc.**

1. Name & Address of Contractor:

2. Contractor's Tax I.D. Number:_____

3. Effective Period of Contract:

Starting Date: _____

Ending Date: _____

4. Combined Total Amount Charged in this Invoice for Services and Reimburseable Disbursements:_____

5. Dates of Service Covered under this invoice:

Starting Date:_____

Ending Date: _____

6. Is this the FINAL invoice for services performed under this contract:

_____ Yes _____ No

7. Date of most recent invoice submitted prior to this invoice:_____

8. How often is the contractor required to submit invoices under the terms of the personal service contract:

9. Provide a description of the matter covered by this invoice:

10. Provide a full description of each service provided, including the date each service was performed, the name and title of each individual who worked on the matter, and the time the individual spent on the matter:

11. Provide the hourly rate for each individual working on the matter and the total charge for that individual for each matter involved:

12. Provide the subject matter and recipient of any correspondence:

13. Provide a full description of any work product produced, designating the way in which the work product is associated with the matter being invoiced. (Attorneys Billing for Legal Services: If you contend that any information is subject to privilege, please identify the privileged item, and provide sufficient information to evaluate the claim of privilege):

14. Provide an itemized list of all disbursements to be reimbursed by the state for each matter invoiced and the total charge for that matter:

SIGNATURES:

Contractor:_____ **Date:**_____

Title:_____

Contracting Body

Approved by:_____ **Date:**_____

Title:_____

SIGNATURES

James E. Drennan

Ingenix Consulting

Contractor

Sharron Burton

General Counsel

Office of Legal Services Division of Insurance

Sharon Clark

Commissioner

Department of Insurance

Holly Hopkins

Deputy Secretary

Public Protection Cabinet

General Counsel

Office of Legal Services

Public Protection Cabinet

EXHIBIT 18

Biographical Information for
John Stark

Curriculum Vitae for
John Walker Carter Stark

Professional Designations:

- **Fellow of the Society of Actuaries, 1986**
- **Member of the American Academy of Actuaries, 1983**

Education:

- **B.S. Mathematics – Virginia Polytechnic Institute & State University, 1972**
- **M.S. Applied Mathematics – Georgia Institute of Technology, 1974**

Experience:

- **WellPoint (all positions specified below included staff management responsibilities) – 3/85 – 3/07**
  - **Eastern Region Valuation – Responsible for reserves for the eastern region which consisted of Maine, New Hampshire, Connecticut, New York, Virginia, and Georgia. Responsible for aligning Sarbanes-Oxley (SOX) procedures (each state had different procedures).**
  - **Virginia Valuation Actuary – Served as the appointed actuary for the Virginia plan which included Anthem Blue Cross and Blue Shield of Virginia as well as three HMOs. Responsibilities included overseeing preparation of IBNR reserves; presenting results to management; preparing and signing actuarial opinions; coordinating with the Bureau of Insurance during triennial audits; and setting up and monitoring SOX procedures.**
  - **HMO Actuary – Served as chief actuary for the three HMOs in Virginia. Responsibilities included serving as the appointed actuary; overseeing preparation of annual forecasts; coordinating pricing in the different markets (e.g., small business and experience-rated group business); helping develop and price medical management initiatives (e.g., disease management); and overseeing pricing effects of**

provider negotiations for inclusion in rates and forecasts. During this time, the State of Virginia initiated a Medicaid HMO program and all three HMOs joined and participated in this program. Responsibilities for this block of business included all mentioned above as well as being part of the corporate team that negotiated rates with the state Medicaid agency each year.

- **<u>Individual Business Pricing Actuary</u> – Responsibilities included overseeing pricing for all individual products (both under and over 65) and preparation of rate filings; working with product development on new products and changes to existing lines of business; and working on teams that developed and implemented Long-Term Care and Medicare HMO products.**
- **<u>Group Business Pricing Actuary</u> – Responsible for developing and implementing a tabular rating system and a credibility pricing model for the large group market. Also responsible for supporting large group underwriters. Upon completion, these tools were given to the underwriters.**

- **Life Insurance Company of Virginia – Responsible for pricing life insurance and annuity products.**
- **Home Beneficial Life Insurance Company – Responsible for developing pricing models for life insurance products.**
- **United Services Life Insurance Company – Responsible for pricing and financial reporting under supervision of the chief actuary.**

EXHIBIT 19

Records Subject to Open Records Act
KRS 304.2-150

304.2-150 Records -- Inspection -- Destruction -- Subject to Open Records Act.

(1) The commissioner shall carefully preserve in the department and in permanent form, a correct account of all his or her transactions and of all fees and moneys received by him or her by virtue of his or her office, together with all financial statements, examination reports, correspondence, filings, and documents duly received by the department. The commissioner shall hand the same over to his or her successor in office.

(2) The commissioner shall keep a suitable record of all insurer certificates of authority and of all licenses issued under this code, together with all applicable suspensions and revocations and of the causes thereof.

(3) Unless otherwise provided by law, records of the department shall be open to the extent provided by the Kentucky Open Records Act, KRS 61.872 to 61.884:

(a) The following records shall be open:

1. Rate and form filings and information filed in support thereof;
2. Other records as provided by law; and
3. All information filed by the department with the National Association of Insurance Commissioners, which that association makes available;

(b) The following records shall be closed:

1. All information received in confidence from insurance supervisory officials of other states or countries, or the National Association of Insurance Commissioners, including, but not limited to, information from the insurance regulatory information system. However, records described in this paragraph may be used by the commissioner in enforcement prosecutions and proceedings for disciplinary action, and may be disclosed to other law enforcement authorities; and
2. Other records as provided by law; and

(c) When inspection of department records is denied, any person challenging the denial shall follow the procedures set forth in the Kentucky Open Records Act, KRS 61.872 to 61.884.

(4) After five (5) years, the commissioner may destroy unneeded or obsolete records and filings in the department.

(5) The department shall not charge a fee inconsistent with fees charged by other state agencies for copies of records requested by the public pursuant to this section.

Effective: July 15, 2010

History: Amended 2010 Ky. Acts ch. 24, sec. 930, effective July 15, 2010. -- Amended 2000 Ky. Acts ch. 380, sec. 29, effective July 14, 2000. -- Amended 1994 Ky. Acts ch. 93, sec. 1, effective July 15, 1994; and ch. 496, sec. 2, effective July 15, 1994. -- Amended 1986 Ky. Acts ch. 437, sec. 4, effective July 15, 1986. -- Created 1970 Ky. Acts ch. 301, subtit. 2, sec. 15, effective June 18, 1970.

EXHIBIT 20

Kentucky Open Records Act
KRS 61.870 through KRS 61.884

61.870 Definitions for KRS 61.872 to 61.884.

As used in KRS 61.872 to 61.884, unless the context requires otherwise:

(1) "Public agency" means:

(a) Every state or local government officer;

(b) Every state or local government department, division, bureau, board, commission, and authority;

(c) Every state or local legislative board, commission, committee, and officer;

(d) Every county and city governing body, council, school district board, special district board, and municipal corporation;

(e) Every state or local court or judicial agency;

(f) Every state or local government agency, including the policy-making board of an institution of education, created by or pursuant to state or local statute, executive order, ordinance, resolution, or other legislative act;

(g) Any body created by state or local authority in any branch of government;

(h) Any body which derives at least twenty-five percent (25%) of its funds expended by it in the Commonwealth of Kentucky from state or local authority funds;

(i) Any entity where the majority of its governing body is appointed by a public agency as defined in paragraph (a), (b), (c), (d), (e), (f), (g), (h), (j), or (k) of this subsection; by a member or employee of such a public agency; or by any combination thereof;

(j) Any board, commission, committee, subcommittee, ad hoc committee, advisory committee, council, or agency, except for a committee of a hospital medical staff, established, created, and controlled by a public agency as defined in paragraph (a), (b), (c), (d), (e), (f), (g), (h), (i), or (k) of this subsection; and

(k) Any interagency body of two (2) or more public agencies where each public agency is defined in paragraph (a), (b), (c), (d), (e), (f), (g), (h), (i), or (j) of this subsection;

(2) "Public record" means all books, papers, maps, photographs, cards, tapes, discs, diskettes, recordings, software, or other documentation regardless of physical form or characteristics, which are prepared, owned, used, in the possession of or retained by a public agency. "Public record" shall not include any records owned or maintained by or for a body referred to in subsection (1)(h) of this section that are not related to functions, activities, programs, or operations funded by state or local authority;

(3) (a) "Software" means the program code which makes a computer system function, but does not include that portion of the program code which contains public records exempted from inspection as provided by KRS 61.878 or specific addresses of files, passwords, access codes, user identifications, or any other mechanism for controlling the security or restricting access to public records in the public agency's computer system.

(b) "Software" consists of the operating system, application programs, procedures, routines, and subroutines such as translators and utility programs, but does not include that material which is prohibited from disclosure or copying by a license agreement between a public agency and an outside entity which supplied the material to the agency;

(4) (a) "Commercial purpose" means the direct or indirect use of any part of a public record or records, in any form, for sale, resale, solicitation, rent, or lease of a service, or any use by which the user expects a profit either through commission, salary, or fee.

(b) "Commercial purpose" shall not include:

1. Publication or related use of a public record by a newspaper or periodical;
2. Use of a public record by a radio or television station in its news or other informational programs; or
3. Use of a public record in the preparation for prosecution or defense of litigation, or claims settlement by the parties to such action, or the attorneys representing the parties;

(5) "Official custodian" means the chief administrative officer or any other officer or employee of a public agency who is responsible for the maintenance, care and keeping of public records, regardless of whether such records are in his actual personal custody and control;

(6) "Custodian" means the official custodian or any authorized person having personal custody and control of public records;

(7) "Media" means the physical material in or on which records may be stored or represented, and which may include, but is not limited to paper, microform, disks, diskettes, optical disks, magnetic tapes, and cards; and

(8) "Mechanical processing" means any operation or other procedure which is transacted on a machine, and which may include, but is not limited to a copier, computer, recorder or tape processor, or other automated device.

Effective: July 15, 1994

History: Amended 1994 Ky. Acts ch. 262, sec. 2, effective July 15, 1994. -- Amended 1992 Ky. Acts ch. 163, sec. 2, effective July 14, 1992. -- Amended 1986 Ky. Acts ch. 150, sec. 2, effective July 15, 1986. -- Created 1976 Ky. Acts ch. 273, sec. 1.

61.871 Policy of KRS 61.870 to 61.884 -- Strict construction of exceptions of KRS 61.878.

The General Assembly finds and declares that the basic policy of KRS 61.870 to 61.884 is that free and open examination of public records is in the public interest and the exceptions provided for by KRS 61.878 or otherwise provided by law shall be strictly construed, even though such examination may cause inconvenience or embarrassment to public officials or others.

Effective: July 14, 1992

History: Created 1992 Ky. Acts ch. 163, sec. 1, effective July 14, 1992.

61.8715 Legislative findings.

The General Assembly finds an essential relationship between the intent of this chapter and that of KRS 171.410 to 171.740, dealing with the management of public records, and of KRS 42.720 to 42.742, 45.253, 171.420, 186A.040, 186A.285, and 194A.146, dealing with the coordination of strategic planning for computerized information systems in state government; and that to ensure the efficient administration of government and to provide accountability of government activities, public agencies are required to manage and maintain their records according to the requirements of these statutes. The General Assembly further recognizes that while all government agency records are public records for the purpose of their management, not all these records are required to be open to public access, as defined in this chapter, some being exempt under KRS 61.878.

Effective: June 25, 2009

History: Amended 2009 Ky. Acts ch. 12, sec. 32, effective June 25, 2009. -- Amended 2005 Ky. Acts ch. 99, sec. 16, effective June 20, 2005. -- Amended 2000 Ky. Acts ch. 506, sec. 17, effective July 14, 2000; and ch. 536, sec. 17, effective July 14, 2000. -- Created 1994 Ky. Acts ch. 262, sec. 1, effective July 15, 1994.

61.872 Right to inspection -- Limitation.

(1) All public records shall be open for inspection by any person, except as otherwise provided by KRS 61.870 to 61.884, and suitable facilities shall be made available by each public agency for the exercise of this right. No person shall remove original copies of public records from the offices of any public agency without the written permission of the official custodian of the record.

(2) Any person shall have the right to inspect public records. The official custodian may require written application, signed by the applicant and with his name printed legibly on the application, describing the records to be inspected. The application shall be hand delivered, mailed, or sent via facsimile to the public agency.

(3) A person may inspect the public records:

(a) During the regular office hours of the public agency; or

(b) By receiving copies of the public records from the public agency through the mail. The public agency shall mail copies of the public records to a person whose residence or principal place of business is outside the county in which the public records are located after he precisely describes the public records which are readily available within the public agency. If the person requesting the public records requests that copies of the records be mailed, the official custodian shall mail the copies upon receipt of all fees and the cost of mailing.

(4) If the person to whom the application is directed does not have custody or control of the public record requested, that person shall notify the applicant and shall furnish the name and location of the official custodian of the agency's public records.

(5) If the public record is in active use, in storage or not otherwise available, the official custodian shall immediately notify the applicant and shall designate a place, time, and date for inspection of the public records, not to exceed three (3) days from receipt of the application, unless a detailed explanation of the cause is given for further delay and the place, time, and earliest date on which the public record will be available for inspection.

(6) If the application places an unreasonable burden in producing public records or if the custodian has reason to believe that repeated requests are intended to disrupt other essential functions of the public agency, the official custodian may refuse to permit inspection of the public records or mail copies thereof. However, refusal under this section shall be sustained by clear and convincing evidence.

Effective: July 15, 1994

History: Amended 1994 Ky. Acts ch. 262, sec. 3, effective July 15, 1994. – Amended 1992 Ky. Acts ch. 163, sec. 3, effective July 14, 1992. -- Created 1976 Ky. Acts ch. 273, sec. 2.

61.874 Abstracts, memoranda, copies -- Agency may prescribe fee -- Use of nonexempt public records for commercial purposes -- Online access.

(1) Upon inspection, the applicant shall have the right to make abstracts of the public records and memoranda thereof, and to obtain copies of all public records not exempted by the terms of KRS 61.878. When copies are requested, the custodian may require a written request and advance payment of the prescribed fee, including postage where appropriate. If the applicant desires copies of public records other than written records, the custodian of the records shall duplicate the records or permit the applicant to duplicate the records; however, the custodian shall ensure that such duplication will not damage or alter the original records.

(2) (a) Nonexempt public records used for noncommercial purposes shall be available for copying in either standard electronic or standard hard copy format, as designated by the party requesting the records, where the agency currently maintains the records in electronic format. Nonexempt public records used for noncommercial purposes shall be copied in standard hard copy format where agencies currently maintain records in hard copy format. Agencies are not required to convert hard copy format records to electronic formats.

(b) The minimum standard format in paper form shall be defined as not less than 8 1/2 inches x 11 inches in at least one (1) color on white paper, or for electronic format, in a flat file electronic American Standard Code for Information Interchange (ASCII) format. If the public agency maintains electronic public records in a format other than ASCII, and this format conforms to the requestor's requirements, the public record may be provided in this alternate electronic format for standard fees as specified by the public agency. Any request for a public record in a form other than the forms described in this section shall be considered a nonstandardized request.

(3) The public agency may prescribe a reasonable fee for making copies of nonexempt public records requested for use for noncommercial purposes which shall not exceed the actual cost of reproduction, including the costs of the media and any mechanical processing cost incurred by the public agency, but not including the cost of staff required. If a public agency is asked to produce a record in a nonstandardized format, or to tailor the format to meet the request of an individual or a group, the public agency may at its discretion provide the requested format and recover staff costs as well as any actual costs incurred.

(4) (a) Unless an enactment of the General Assembly prohibits the disclosure of public records to persons who intend to use them for commercial purposes, if copies of nonexempt public records are requested for commercial purposes, the public agency may establish a reasonable fee.

(b) The public agency from which copies of nonexempt public records are requested for a commercial purpose may require a certified statement from the requestor stating the commercial purpose for which they shall be used, and may require the requestor to enter into a contract with the agency. The

contract shall permit use of the public records for the stated commercial purpose for a specified fee.

(c) The fee provided for in subsection (a) of this section may be based on one or both of the following:

1. Cost to the public agency of media, mechanical processing, and staff required to produce a copy of the public record or records;
2. Cost to the public agency of the creation, purchase, or other acquisition of the public records.

(5) It shall be unlawful for a person to obtain a copy of any part of a public record for a:

(a) Commercial purpose, without stating the commercial purpose, if a certified statement from the requestor was required by the public agency pursuant to subsection (4)(b) of this section; or

(b) Commercial purpose, if the person uses or knowingly allows the use of the public record for a different commercial purpose; or

(c) Noncommercial purpose, if the person uses or knowingly allows the use of the public record for a commercial purpose. A newspaper, periodical, radio or television station shall not be held to have used or knowingly allowed the use of the public record for a commercial purpose merely because of its publication or broadcast, unless it has also given its express permission for that commercial use.

(6) Online access to public records in electronic form, as provided under this section, may be provided and made available at the discretion of the public agency. If a party wishes to access public records by electronic means and the public agency agrees to provide online access, a public agency may require that the party enter into a contract, license, or other agreement with the agency, and may charge fees for these agreements. Fees shall not exceed:

(a) The cost of physical connection to the system and reasonable cost of computer time access charges; and

(b) If the records are requested for a commercial purpose, a reasonable fee based on the factors set forth in subsection (4) of this section.

Effective: July 15, 1994

History: Amended 1994 Ky. Acts ch. 262, sec. 4, effective July 15, 1994. -- Amended 1992 Ky. Acts ch. 163, sec. 4, effective July 14, 1992. -- Created 1976 Ky. Acts ch. 273, sec. 3.

61.8745 Damages recoverable by public agency for person's misuse of public records.

A person who violates subsections (2) to (6) of KRS 61.874 shall be liable to the public agency from which the public records were obtained for damages in the amount of:

(1) Three (3) times the amount that would have been charged for the public record if the actual commercial purpose for which it was obtained or used had been stated;

(2) Costs and reasonable attorney's fees; and

(3) Any other penalty established by law.

Effective: July 15, 1994

History: Created 1994 Ky. Acts ch. 262, sec. 7, effective July 15, 1994.

61.876 Agency to adopt rules and regulations.

(1) Each public agency shall adopt rules and regulations in conformity with the provisions of KRS 61.870 to 61.884 to provide full access to public records, to protect public records from damage and disorganization, to prevent excessive disruption of its essential functions, to provide assistance and information upon request and to insure efficient and timely action in response to application for inspection, and such rules and regulations shall include, but shall not be limited to:

(a) The principal office of the public agency and its regular office hours;

(b) The title and address of the official custodian of the public agency's records;

(c) The fees, to the extent authorized by KRS 61.874 or other statute, charged for copies;

(d) The procedures to be followed in requesting public records.

(2) Each public agency shall display a copy of its rules and regulations pertaining to public records in a prominent location accessible to the public.

(3) The Finance and Administration Cabinet may promulgate uniform rules and regulations for all state administrative agencies.

History: Created 1976 Ky. Acts ch. 273, sec. 4.

61.878 Certain public records exempted from inspection except on order of court -- Restriction of state employees to inspect personnel files prohibited.

(1) The following public records are excluded from the application of KRS 61.870 to 61.884 and shall be subject to inspection only upon order of a court of competent jurisdiction, except that no court shall authorize the inspection by any party of any materials pertaining to civil litigation beyond that which is provided by the Rules of Civil Procedure governing pretrial discovery:

(a) Public records containing information of a personal nature where the public disclosure thereof would constitute a clearly unwarranted invasion of personal privacy;

(b) Records confidentially disclosed to an agency and compiled and maintained for scientific research. This exemption shall not, however, apply to records the disclosure or publication of which is directed by another statute;

(c) 1. Upon and after July 15, 1992, records confidentially disclosed to an agency or required by an agency to be disclosed to it, generally recognized as confidential or proprietary, which if openly disclosed would permit an unfair commercial advantage to competitors of the entity that disclosed the records;

2. Upon and after July 15, 1992, records confidentially disclosed to an agency or required by an agency to be disclosed to it, generally recognized as confidential or proprietary, which are compiled and maintained:

a. In conjunction with an application for or the administration of a loan or grant;

b. In conjunction with an application for or the administration of assessments, incentives, inducements, and tax credits as described in KRS Chapter 154;

c. In conjunction with the regulation of commercial enterprise, including mineral exploration records, unpatented, secret commercially valuable plans, appliances, formulae, or processes, which are used for the making, preparing, compounding, treating, or processing of articles or materials which are trade commodities obtained from a person; or

d. For the grant or review of a license to do business.

3. The exemptions provided for in subparagraphs 1. and 2. of this paragraph shall not apply to records the disclosure or publication of which is directed by another statute;

(d) Public records pertaining to a prospective location of a business or industry where no previous public disclosure has been made of the business' or industry's interest in locating in, relocating within or expanding within the Commonwealth. This exemption shall not include those records pertaining to application to agencies for permits or licenses necessary to do business or to

expand business operations within the state, except as provided in paragraph (c) of this subsection;

(e) Public records which are developed by an agency in conjunction with the regulation or supervision of financial institutions, including but not limited to, banks, savings and loan associations, and credit unions, which disclose the agency's internal examining or audit criteria and related analytical methods;

(f) The contents of real estate appraisals, engineering or feasibility estimates and evaluations made by or for a public agency relative to acquisition of property, until such time as all of the property has been acquired. The law of eminent domain shall not be affected by this provision;

(g) Test questions, scoring keys, and other examination data used to administer a licensing examination, examination for employment, or academic examination before the exam is given or if it is to be given again;

(h) Records of law enforcement agencies or agencies involved in administrative adjudication that were compiled in the process of detecting and investigating statutory or regulatory violations if the disclosure of the information would harm the agency by revealing the identity of informants not otherwise known or by premature release of information to be used in a prospective law enforcement action or administrative adjudication. Unless exempted by other provisions of KRS 61.870 to 61.884, public records exempted under this provision shall be open after enforcement action is completed or a decision is made to take no action; however, records or information compiled and maintained by county attorneys or Commonwealth's attorneys pertaining to criminal investigations or criminal litigation shall be exempted from the provisions of KRS 61.870 to 61.884 and shall remain exempted after enforcement action, including litigation, is completed or a decision is made to take no action. The exemptions provided by this subsection shall not be used by the custodian of the records to delay or impede the exercise of rights granted by KRS 61.870 to 61.884;

(i) Preliminary drafts, notes, correspondence with private individuals, other than correspondence which is intended to give notice of final action of a public agency;

(j) Preliminary recommendations, and preliminary memoranda in which opinions are expressed or policies formulated or recommended;

(k) All public records or information the disclosure of which is prohibited by federal law or regulation;

(l) Public records or information the disclosure of which is prohibited or restricted or otherwise made confidential by enactment of the General Assembly;

(m) 1. Public records the disclosure of which would have a reasonable likelihood of threatening the public safety by exposing a vulnerability in preventing, protecting against, mitigating, or responding to a terrorist act and limited to:

a. Criticality lists resulting from consequence assessments;

b. Vulnerability assessments;

c. Antiterrorism protective measures and plans;

d. Counterterrorism measures and plans;

e. Security and response needs assessments;

f. Infrastructure records that expose a vulnerability referred to in this subparagraph through the disclosure of the location, configuration, or security of critical systems, including public utility critical systems. These critical systems shall include but not be limited to information technology, communication, electrical, fire suppression, ventilation, water, wastewater, sewage, and gas systems;

g. The following records when their disclosure will expose a vulnerability referred to in this subparagraph: detailed drawings, schematics, maps, or specifications of structural elements, floor plans, and operating, utility, or security systems of any building or facility owned, occupied, leased, or maintained by a public agency; and

h. Records when their disclosure will expose a vulnerability referred to in this subparagraph and that describe the exact physical location of hazardous chemical, radiological, or biological materials.

2. As used in this paragraph, "terrorist act" means a criminal act intended to:

   a. Intimidate or coerce a public agency or all or part of the civilian population;

   b. Disrupt a system identified in subparagraph 1.f. of this paragraph; or

   c. Cause massive destruction to a building or facility owned, occupied, leased, or maintained by a public agency.

3. On the same day that a public agency denies a request to inspect a public record for a reason identified in this paragraph, that public agency shall forward a copy of the written denial of the request, referred to in KRS 61.880(1), to the executive director of the Office for Security Coordination and the Attorney General.

4. Nothing in this paragraph shall affect the obligations of a public agency with respect to disclosure and availability of public records under state environmental, health, and safety programs.

5. The exemption established in this paragraph shall not apply when a member of the Kentucky General Assembly seeks to inspect a public record identified in this paragraph under the Open Records Law; and

(n) Public or private records, including books, papers, maps, photographs, cards, tapes, discs, diskettes, recordings, software, or other documentation regardless of physical form or characteristics, having historic, literary, artistic, or commemorative value accepted by the archivist of a public university, museum, or government depository from a donor or depositor other than a public agency. This exemption shall apply to the extent that nondisclosure is requested in writing by the donor or depositor of such records, but shall not apply to records the disclosure or publication of which is mandated by another statute or by federal law.

(2) No exemption in this section shall be construed to prohibit disclosure of statistical information not descriptive of any readily identifiable person.

(3) No exemption in this section shall be construed to deny, abridge, or impede the right of a public agency employee, including university employees, an applicant for employment, or an eligible on a register to inspect and to copy any record including preliminary and other supporting documentation that relates to him. The records shall include, but not be limited to, work plans, job performance, demotions, evaluations, promotions, compensation, classification, reallocation, transfers, layoffs, disciplinary actions, examination scores, and preliminary and other supporting documentation. A public agency employee, including university employees, applicant, or eligible shall not have the right to inspect or to copy any examination or any documents relating to ongoing criminal or administrative investigations by an agency.

(4) If any public record contains material which is not excepted under this section, the public agency shall separate the excepted and make the nonexcepted material available for examination.

(5) The provisions of this section shall in no way prohibit or limit the exchange of public records or the sharing of information between public agencies when the exchange is serving a legitimate governmental need or is necessary in the performance of a legitimate government function.

Effective: June 20 2005

History: Amended 2005 Ky. Acts ch. 45, sec. 6, effective June 20, 2005; and ch. 93, sec. 3, effective March 16, 2005. -- Amended 1994 Ky. Acts ch. 262, sec. 5, effective July 15, 1994; and ch. 450, sec. 34, effective July 15, 1994. – Amended 1992 Ky. Acts ch. 163, sec. 5, effective July 14, 1992. -- Amended 1986 Ky. Acts ch. 494, sec. 24, effective July 15, 1986. -- Created 1976 Ky. Acts ch. 273, sec. 5.

Legislative Research Commission Note (6/20/2005). The Office of the Kentucky Attorney General requested that amendments in 2005 Ky. Acts ch. 45, sec. 6 and ch. 93, sec. 3, to the arrangement of the paragraphs of subsection (1) of this section be changed. The change was requested "in the interest of preventing confusion to the public and public agencies" and was made by the Statute Reviser under the authority of KRS 7.136.

Legislative Research Commission Note (6/20/2005). This section was amended by 2005 Ky. Acts chs. 45 and 93, which do not appear to be in conflict and have been codified together.

61.880 Denial of inspection -- Role of Attorney General.

(1) If a person enforces KRS 61.870 to 61.884 pursuant to this section, he shall begin enforcement under this subsection before proceeding to enforcement under subsection (2) of this section. Each public agency, upon any request for records made under KRS 61.870 to 61.884, shall determine within three (3) days, excepting Saturdays, Sundays, and legal holidays, after the receipt of any such request whether to comply with the request and shall notify in writing the person making the request, within the three (3) day period, of its decision. An agency response denying, in whole or in part, inspection of any record shall include a statement of the specific exception authorizing the withholding of the record and a brief explanation of how the exception applies to the record withheld. The response shall be issued by the official custodian or under his authority, and it shall constitute final agency action.

(2) (a) If a complaining party wishes the Attorney General to review a public agency's denial of a request to inspect a public record, the complaining party shall forward to the Attorney General a copy of the written request and a copy of the written response denying inspection. If the public agency refuses to provide a written response, a complaining party shall provide a copy of the written request. The Attorney General shall review the request and denial and issue within twenty (20) days, excepting Saturdays, Sundays and legal holidays, a written decision stating whether the agency violated provisions of KRS 61.870 to 61.884.

(b) In unusual circumstances, the Attorney General may extend the twenty (20) day time limit by sending written notice to the complaining party and a copy to the denying agency, setting forth the reasons for the extension, and the day on which a decision is expected to be issued, which shall not exceed an additional thirty (30) work days, excepting Saturdays, Sundays, and legal holidays. As used in this section, "unusual circumstances" means, but only to the extent reasonably necessary to the proper resolution of an appeal:

1. The need to obtain additional documentation from the agency or a copy of the records involved;
2. The need to conduct extensive research on issues of first impression; or
3. An unmanageable increase in the number of appeals received by the Attorney General.

(c) On the day that the Attorney General renders his decision, he shall mail a copy to the agency and a copy to the person who requested the record in question. The burden of proof in sustaining the action shall rest with the agency, and the Attorney General may request additional documentation from the agency for substantiation. The Attorney General may also request a copy of the records involved but they shall not be disclosed.

(3) Each agency shall notify the Attorney General of any actions filed against that agency in Circuit Court regarding the enforcement of KRS 61.870 to 61.884. The Attorney General shall not, however, be named as a party in any Circuit Court

actions regarding the enforcement of KRS 61.870 to 61.884, nor shall he have any duty to defend his decision in Circuit Court or any subsequent proceedings.

(4) If a person feels the intent of KRS 61.870 to 61.884 is being subverted by an agency short of denial of inspection, including but not limited to the imposition of excessive fees or the misdirection of the applicant, the person may complain in writing to the Attorney General, and the complaint shall be subject to the same adjudicatory process as if the record had been denied.

(5) (a) A party shall have thirty (30) days from the day that the Attorney General renders his decision to appeal the decision. An appeal within the thirty (30) day time limit shall be treated as if it were an action brought under KRS 61.882.

(b) If an appeal is not filed within the thirty (30) day time limit, the Attorney General's decision shall have the force and effect of law and shall be enforceable in the Circuit Court of the county where the public agency has its principal place of business or the Circuit Court of the county where the public record is maintained.

Effective: July 15, 1994

History: Amended 1994 Ky. Acts ch. 262, sec. 6, effective July 15, 1994. – Amended 1992 Ky. Acts ch. 163, sec. 6, effective July 14, 1992. -- Created 1976 Ky. Acts ch. 273, sec. 6.

61.882 Jurisdiction of Circuit Court in action seeking right of inspection -- Burden of proof -- Costs -- Attorney fees.

(1) The Circuit Court of the county where the public agency has its principal place of business or the Circuit Court of the county where the public record is maintained shall have jurisdiction to enforce the provisions of KRS 61.870 to 61.884, by injunction or other appropriate order on application of any person.

(2) A person alleging a violation of the provisions of KRS 61.870 to 61.884 shall not have to exhaust his remedies under KRS 61.880 before filing suit in a Circuit Court.

(3) In an appeal of an Attorney General's decision, where the appeal is properly filed pursuant to KRS 61.880(5)(a), the court shall determine the matter de novo. In an original action or an appeal of an Attorney General's decision, where the appeal is properly filed pursuant to KRS 61.880(5)(a), the burden of proof shall be on the public agency. The court on its own motion, or on motion of either of the parties, may view the records in controversy in camera before reaching a decision. Any noncompliance with the order of the court may be punished as contempt of court.

(4) Except as otherwise provided by law or rule of court, proceedings arising under this section take precedence on the docket over all other causes and shall be assigned for hearing and trial at the earliest practicable date.

(5) Any person who prevails against any agency in any action in the courts regarding a violation of KRS 61.870 to 61.884 may, upon a finding that the records were willfully withheld in violation of KRS 61.870 to 61.884, be awarded costs, including reasonable attorney's fees, incurred in connection with the legal action. If such person prevails in part, the court may in its discretion award him costs or an appropriate portion thereof. In addition, it shall be within the discretion of the court to award the person an amount not to exceed twenty-five dollars ($25) for each day that he was denied the right to inspect or copy said public record. Attorney's fees, costs, and awards under this subsection shall be paid by the agency that the court determines is responsible for the violation.

Effective: July 14, 1992

History: Amended 1992 Ky. Acts ch. 163, sec. 7, effective July 14, 1992. -- Created 1976 Ky. Acts ch. 273, sec. 7.

61.884 Person's access to record relating to him.

Any person shall have access to any public record relating to him or in which he is mentioned by name, upon presentation of appropriate identification, subject to the provisions of KRS 61.878.

History: Created 1976 Ky. Acts ch. 273, sec. 8.

EXHIBIT 21

Exemptions to
Kentucky Open Records Act
KRS 61.878

61.878 Certain public records exempted from inspection except on order of court -- Restriction of state employees to inspect personnel files prohibited.

(1) The following public records are excluded from the application of KRS 61.870 to 61.884 and shall be subject to inspection only upon order of a court of competent jurisdiction, except that no court shall authorize the inspection by any party of any materials pertaining to civil litigation beyond that which is provided by the Rules of Civil Procedure governing pretrial discovery:

(a) Public records containing information of a personal nature where the public disclosure thereof would constitute a clearly unwarranted invasion of personal privacy;

(b) Records confidentially disclosed to an agency and compiled and maintained for scientific research. This exemption shall not, however, apply to records the disclosure or publication of which is directed by another statute;

(c) 1. Upon and after July 15, 1992, records confidentially disclosed to an agency or required by an agency to be disclosed to it, generally recognized as confidential or proprietary, which if openly disclosed would permit an unfair commercial advantage to competitors of the entity that disclosed the records;

2. Upon and after July 15, 1992, records confidentially disclosed to an agency or required by an agency to be disclosed to it, generally recognized as confidential or proprietary, which are compiled and maintained:

a. In conjunction with an application for or the administration of a loan or grant;

b. In conjunction with an application for or the administration of assessments, incentives, inducements, and tax credits as described in KRS Chapter 154;

c. In conjunction with the regulation of commercial enterprise, including mineral exploration records, unpatented, secret commercially valuable plans, appliances, formulae, or processes, which are used for the making, preparing, compounding, treating, or processing of articles or materials which are trade commodities obtained from a person; or

d. For the grant or review of a license to do business.

3. The exemptions provided for in subparagraphs 1. and 2. of this paragraph shall not apply to records the disclosure or publication of which is directed by another statute;

(d) Public records pertaining to a prospective location of a business or industry where no previous public disclosure has been made of the business' or industry's interest in locating in, relocating within or expanding within the Commonwealth. This exemption shall not include those records pertaining to application to agencies for permits or licenses necessary to do business or to

expand business operations within the state, except as provided in paragraph (c) of this subsection;

(e) Public records which are developed by an agency in conjunction with the regulation or supervision of financial institutions, including but not limited to, banks, savings and loan associations, and credit unions, which disclose the agency's internal examining or audit criteria and related analytical methods;

(f) The contents of real estate appraisals, engineering or feasibility estimates and evaluations made by or for a public agency relative to acquisition of property, until such time as all of the property has been acquired. The law of eminent domain shall not be affected by this provision;

(g) Test questions, scoring keys, and other examination data used to administer a licensing examination, examination for employment, or academic examination before the exam is given or if it is to be given again;

(h) Records of law enforcement agencies or agencies involved in administrative adjudication that were compiled in the process of detecting and investigating statutory or regulatory violations if the disclosure of the information would harm the agency by revealing the identity of informants not otherwise known or by premature release of information to be used in a prospective law enforcement action or administrative adjudication. Unless exempted by other provisions of KRS 61.870 to 61.884, public records exempted under this provision shall be open after enforcement action is completed or a decision is made to take no action; however, records or information compiled and maintained by county attorneys or Commonwealth's attorneys pertaining to criminal investigations or criminal litigation shall be exempted from the provisions of KRS 61.870 to 61.884 and shall remain exempted after enforcement action, including litigation, is completed or a decision is made to take no action. The exemptions provided by this subsection shall not be used by the custodian of the records to delay or impede the exercise of rights granted by KRS 61.870 to 61.884;

(i) Preliminary drafts, notes, correspondence with private individuals, other than correspondence which is intended to give notice of final action of a public agency;

(j) Preliminary recommendations, and preliminary memoranda in which opinions are expressed or policies formulated or recommended;

(k) All public records or information the disclosure of which is prohibited by federal law or regulation;

(l) Public records or information the disclosure of which is prohibited or restricted or otherwise made confidential by enactment of the General Assembly;

(m) 1. Public records the disclosure of which would have a reasonable likelihood of threatening the public safety by exposing a vulnerability in preventing, protecting against, mitigating, or responding to a terrorist act and limited to:

a. Criticality lists resulting from consequence assessments;
b. Vulnerability assessments;
c. Antiterrorism protective measures and plans;
d. Counterterrorism measures and plans;
e. Security and response needs assessments;
f. Infrastructure records that expose a vulnerability referred to in this subparagraph through the disclosure of the location, configuration, or security of critical systems, including public utility critical systems. These critical systems shall include but not be limited to information technology, communication, electrical, fire suppression, ventilation, water, wastewater, sewage, and gas systems;
g. The following records when their disclosure will expose a vulnerability referred to in this subparagraph: detailed drawings, schematics, maps, or specifications of structural elements, floor plans, and operating, utility, or security systems of any building or facility owned, occupied, leased, or maintained by a public agency; and
h. Records when their disclosure will expose a vulnerability referred to in this subparagraph and that describe the exact physical location of hazardous chemical, radiological, or biological materials.

2. As used in this paragraph, "terrorist act" means a criminal act intended to:
   a. Intimidate or coerce a public agency or all or part of the civilian population;
   b. Disrupt a system identified in subparagraph 1.f. of this paragraph; or
   c. Cause massive destruction to a building or facility owned, occupied, leased, or maintained by a public agency.
3. On the same day that a public agency denies a request to inspect a public record for a reason identified in this paragraph, that public agency shall forward a copy of the written denial of the request, referred to in KRS 61.880(1), to the executive director of the Office for Security Coordination and the Attorney General.
4. Nothing in this paragraph shall affect the obligations of a public agency with respect to disclosure and availability of public records under state environmental, health, and safety programs.
5. The exemption established in this paragraph shall not apply when a member of the Kentucky General Assembly seeks to inspect a public record identified in this paragraph under the Open Records Law; and

(n) Public or private records, including books, papers, maps, photographs, cards, tapes, discs, diskettes, recordings, software, or other documentation regardless of physical form or characteristics, having historic, literary, artistic, or commemorative value accepted by the archivist of a public university, museum, or government depository from a donor or depositor other than a public agency. This exemption shall apply to the extent that nondisclosure is requested in writing by the donor or depositor of such records, but shall not apply to records the disclosure or publication of which is mandated by another statute or by federal law.

(2) No exemption in this section shall be construed to prohibit disclosure of statistical information not descriptive of any readily identifiable person.

(3) No exemption in this section shall be construed to deny, abridge, or impede the right of a public agency employee, including university employees, an applicant for employment, or an eligible on a register to inspect and to copy any record including preliminary and other supporting documentation that relates to him. The records shall include, but not be limited to, work plans, job performance, demotions, evaluations, promotions, compensation, classification, reallocation, transfers, layoffs, disciplinary actions, examination scores, and preliminary and other supporting documentation. A public agency employee, including university employees, applicant, or eligible shall not have the right to inspect or to copy any examination or any documents relating to ongoing criminal or administrative investigations by an agency.

(4) If any public record contains material which is not excepted under this section, the public agency shall separate the excepted and make the nonexcepted material available for examination.

(5) The provisions of this section shall in no way prohibit or limit the exchange of public records or the sharing of information between public agencies when the exchange is serving a legitimate governmental need or is necessary in the performance of a legitimate government function.

Effective: June 20 2005

History: Amended 2005 Ky. Acts ch. 45, sec. 6, effective June 20, 2005; and ch. 93, sec. 3, effective March 16, 2005. -- Amended 1994 Ky. Acts ch. 262, sec. 5, effective July 15, 1994; and ch. 450, sec. 34, effective July 15, 1994. -- Amended 1992 Ky. Acts ch. 163, sec. 5, effective July 14, 1992. -- Amended 1986 Ky. Acts ch. 494, sec. 24, effective July 15, 1986. -- Created 1976 Ky. Acts ch. 273, sec. 5.

Legislative Research Commission Note (6/20/2005). The Office of the Kentucky Attorney General requested that amendments in 2005 Ky. Acts ch. 45, sec. 6 and ch. 93, sec. 3, to the arrangement of the paragraphs of subsection (1) of this section be changed. The change was requested "in the interest of preventing confusion to the public and public agencies" and was made by the Statute Reviser under the authority of KRS 7.136.

Legislative Research Commission Note (6/20/2005). This section was amended by 2005 Ky. Acts chs. 45 and 93, which do not appear to be in conflict and have been codified together.

EXHIBIT 22

Fees

KRS 304.4-010

304.4-010 Fees to be prescribed by administrative regulation -- Time prescribed if fees remitted by electronic submission.

(1) The commissioner shall by regulation prescribe the fees charged by the commissioner and the services for which fees shall be charged, including the following fees:

(a) For copies of any document on file with the commissioner, per page, thirty cents ($0.30); and

(b) For copies of annual statements, per page, one dollar ($1).

(2) All fees shall be collected in advance.

(3) Notwithstanding subsection (2) of this section, an insurer submitting applications, appointments, or filings through the electronic system adopted by the department shall remit the applicable fees to the department within fifteen (15) calendar days of the electronic submission.

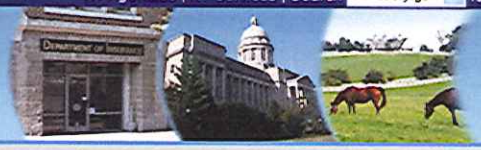
Effective: July 15, 2010

History: Amended 2010 Ky. Acts ch. 24, sec. 988, effective July 15, 2010. -- Amended 1998 Ky. Acts ch. 483, sec. 8, effective July 15, 1998. -- Amended 1990 Ky. Acts ch. 464, sec. 2, effective July 13, 1990. -- Amended 1988 Ky. Acts ch. 225, sec. 25, effective July 15, 1988; and ch. 408, sec. 1, effective July 15, 1988. -- Amended 1986 Ky. Acts ch. 162, sec. 1, effective July 15, 1986; ch. 307, sec. 1, effective July 15, 1986; and ch. 437, sec. 8, effective July 15, 1986. -- Amended 1984 Ky. Acts ch. 23, sec. 7, effective July 13, 1984; ch. 111, sec. 129, effective July 13, 1984; and ch. 322, sec. 4, effective July 13, 1984. -- Amended 1982 Ky. Acts ch. 319, sec. 2, effective July 15, 1982; and ch. 320, sec. 9, effective July 15, 1982. -- Amended 1980 Ky. Acts ch. 211, sec. 1, effective July 15, 1980. -- Amended 1978 Ky. Acts ch. 161, sec. 6, effective June 17, 1978. -- Created 1970 Ky. Acts ch. 239, sec. 1, effective July 1, 1970; and ch. 301, subtit. 4, sec. 1, effective June 18, 1970.

EXHIBIT 23

Screen Print Pages of
Consumer Rate Information and
Rate Filing Summary Report

Kentucky
Department of Insurance



eServices

denotes external link

- Home
- Rate / Form Filing
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Health and Life - Home

Health and Life

William J. Nold (Director)

The Health and Life Division regulates insurance companies and health maintenance organizations offering various types of health and life insurance products. Through application of statutory requirements, the division reviews policy forms, certificates, applications, rate filings, life settlements contracts and other forms as necessary to assure that the health and life products being offered in Kentucky meet the applicable statutory and regulatory standards. The Health and Life Division works directly with the Office of Legal Services and the Consumer Protection Division on matters such as consumer complaints.

The Consumer Guide to Long-Term Care Insurance in Kentucky, the Guide to Health Insurance for People with Medicare, the Life Insurance Buyer's Guide, the Annuity Buyer's Guide and the Life Settlement Buyers Guide are available upon request free of charge. Publications and others items of interest to Kentuckians also are available online.

What's New / Recent Topics

Frequently Asked Questions

Rate Filings

- zed to Transact Individual Health Insurance Business in Kentucky (Advisory Opinion 2011-01)
- junction Against Medi-Share
- Medical Loss Ratio Waiver Request
- Life Insurance Buyer's Guide 2011
- Annuity Buyer's Guide 2011
- PCIP Benefits Summary
- Notice of Rights as an Owner of a Life Insurance Policy
- Companies Offering Child-Only Policies in Kentucky
- Consumer Assistance Supplemental Grant
- Health Reform Notice of Grant Award
- Health Reform Rate Review Grant Application
- Retained Asset Accounts and Life Insurance
- Federal Consumer Assistance Grant Application
- Health Reform/State Implementation Overview
- Retained Asset Accounts
- Department of Labor's Model Continuation Coverage Election Notice
- COBRA Premium Reduction FAQ

Links

- Life Insurance Buyer's Guide
- Annuity Buyer's Guide
- Pre-Existing Condition Insurance Plan [denotes external link]

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Kentucky Department of Insurance



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Health Insurance Rate Filings

Kentucky encourages public interest in its health insurance rate review process. We review proposed rate changes for association, individual, small and large group health plans.

Consumers can view documents online and submit comments for Department consideration during the review process. However there will be no specific individual response to the comments.

Please be aware all comments are subject to public disclosure.

Click on the link below to search rate filings:

Health rate filing search (for filings after 08/01/2011)

Kentucky Department of Insurance



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Health Rate Filing Search Page

You can use this page to view rate request documents and to comment on open rate filings. Only filings received on or after 08/01/2011 are available for searching.

Select the company or the state tracking number or the status of filings you want to review. Refer to your insurance card for the specific name of your insurance company. Select "Pending" to see the most recent rate requests. You must make a "Status" selection. From the resulting list, you can view the filing, see the Department of Insurance Commissioner's Order or submit a comment.

Market Segment: ☐ Individual ☐ Small Group ☐ Association ☐ All

Company Name:

State Tracking Number:

Received Date Range: to

Status: ☐ Pending ☐ Approved ☐ Disapproved ☐ Withdrawn ☐ All (required field)

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Kentucky Department of Insurance



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Health and Life - Home

Health Rate Filing Search Result Page

Click on column heading to sort.

State Tracking Number	Company Name	Market Segment	% Change Requested	% Change Approved	Effective Date	Status	Rate Filing Documents
2011-003839-R	Anthem Health Plans of Kentucky, Inc.	Individual	3.5%	Pending	07/01/2011	Pending	View Filing Summary Email Comment
2011-003789-R	Anthem Health Plans of Kentucky, Inc.	Employer Organized Assoc – Kentucky Bankers Assoc	-1.8%	-1.8%	04/01/2011	Approved	View Filing Summary View Order

New Search

1) When the "Email Comment" link is clicked the default email package of the end user will open with the recipient defaulting to DOI.RateReview@ky.gov and the subject defaulting to the state filing number.
2) When the "View Filing Summary" link is clicked the Rate Filing Summary report will be displayed with an option to print to PDF which would include a date/time stamp.

STEVEN L. BESHEAR
GOVERNOR

ROBERT D. VANCE
SECRETARY

SHARON P. CLARK
COMMISSIONER

COMMONWEALTH OF KENTUCKY
PUBLIC PROTECTION CABINET
DEPARTMENT OF INSURANCE
HEALTH AND LIFE DIVISION
P.O. BOX 517
FRANKFORT, KENTUCKY 40602
(502) 564-6088
FAX (502) 564-2728
HTTP://DOI.PPR.KY.GOV

Rate Filing Summary

The following represents information about the company's proposed change to the base rate associated with the plans referenced in the filing. The base rate is used, along with other factors, to calculate the premium charged. The base rate is not the premium. The base rate is adjusted by factors such as age, sex, and health status to set your premium. Consequently your premium change will likely be greater than the change shown below.

State Filing Number: 2011-003839-R

Company: Anthem Health Plans of Kentucky, Inc.

Market Segment: Individual

Product Type: Preferred Provider Organization

Date Filed: 04/01/2011

Date Effective: 07/01/2011

Base Rate Change Requested: 3.5% increase

Base Rate Change Approved: Pending

DOI Action: Pending

DOI Action Date: Pending

EXHIBIT 24

Administrative Procedures; Hearings

KRS 304.2-310

304.2-310 Administrative procedures -- Hearings.

(1) The commissioner may hold a hearing, without request by others, for any purpose within the scope of this code.

(2) The commissioner shall hold a hearing:

(a) If required by any other provision of this code; or

(b) Upon written application for a hearing by a person aggrieved by any act, threatened act, or failure of the commissioner to act, or by any report, administrative regulation, or order of the commissioner (other than an order for the holding of a hearing, or a final order entered after a hearing, of which hearing the person had notice). Any application for a hearing shall be filed in the department within sixty (60) days after the person knew or reasonably should have known, of the act, threatened act, failure, report, administrative regulation, or order, unless a different period is provided for by other laws applicable to the particular matter, in which case the other law shall govern.

(3) Any application for a hearing shall briefly state the respects in which the applicant is so aggrieved, together with the grounds to be relied upon as a basis for the relief to be sought at the hearing.

(4) If the commissioner finds that the application is made in good faith, that the applicant would be so aggrieved if his or her grounds are established, the commissioner shall hold the hearing in accordance with KRS Chapter 13B.

(5) Pending the hearing and the issuance of the final order resulting from the hearing, the commissioner shall suspend or postpone the effective date of the previous action.

Effective: July 15, 2010

History: Amended 2010 Ky. Acts ch. 24, sec. 948, effective July 15, 2010. -- Amended 1996 Ky. Acts ch. 318, sec. 227, effective July 15, 1996. -- Created 1970 Ky. Acts ch. 301, subtit. 2, sec. 31, effective June 18, 1970.

EXHIBIT 25

Examination of Insurers

KRS 304.2-210

304.2-210 Examination of insurers.

(1) As used in KRS 304.2-210 to 304.2-300, unless the context requires otherwise, "examination workpaper" means a written or recorded document, note, memorandum, critique, comment, recommendation, or other information copied, established, created, or retained by the commissioner or his designee for the purpose of conducting an examination or drafting an examination report.

(2) For the purpose of determining financial condition, ability to fulfill and manner of fulfillment of its obligations, the nature of its operations, and compliance with law, the commissioner shall examine the affairs, transactions, accounts, records, and assets of each authorized insurer as often as reasonably necessary. He shall so examine each domestic insurer not less frequently than every five (5) years. Examination of a reciprocal insurer may include examination of its attorney-in-fact as to its transactions relating to the insurer. Examination of an alien insurer may be limited to its insurance transactions and affairs in the United States, except as the commissioner otherwise requires.

(3) In scheduling and determining the nature, scope, and frequency of the examinations, the commissioner shall consider the results of financial statement analyses and ratios, changes in management or ownership, actuarial opinions, reports of independent certified public accountants, and other criteria as set forth in the Examiner's Handbook prescribed by the commissioner.

(4) For purposes of completing an examination of an insurer, the commissioner may examine or investigate any person or the business of any person, insofar as the examination or investigation is, in the sole discretion of the commissioner, necessary and material to the examination of the insurer.

(5) The commissioner shall in like manner examine each insurer applying for an initial certificate of authority to transact insurance in this state.

(6) In lieu of making his own examination, the commissioner may, in his discretion, accept a full report of the most recently completed examination of a foreign, or alien, insurer, certified to by the insurance supervisory official of another state. Reports shall only be accepted if the examination is performed under the supervision of an accredited insurance department or with the participation of one (1) or more examiners who are employed by an accredited state insurance department and who, after a review of the examination work papers and report, state under oath that the examination was performed in a manner consistent with the standards and procedures required by their insurance department.

(7) As far as practical, the examination of a foreign or alien insurer shall be made in cooperation with the insurance supervisory officers of other states in which the insurer transacts business, and for the purpose thereof, the commissioner may participate in joint examinations of insurers or be represented in an examination by an examiner of another state.

Effective: July 15, 2010

History: Amended 2010 Ky. Acts ch. 24, sec. 938, effective July 15, 2010; and ch. 25, sec. 1, effective July 15, 2010. -- Amended 2008 Ky. Acts ch. 152, sec. 1, effective July 15, 2008. -- Amended 1998 Ky. Acts ch. 483, sec. 4, effective July 15, 1998. --

Amended 1994 Ky. Acts ch. 496, sec. 3, effective July 15, 1994. -- Amended 1974 Ky. Acts ch. 308, sec. 51, effective June 21, 1974. -- Created 1970 Ky. Acts ch. 301, subtit. 2, sec. 21, effective June 18, 1970.

Legislative Research Commission Note (7/15/2010). A reference to the "executive director" of insurance in subsection (3) of this section, as amended by 2010 Ky. Acts ch. 25, sec. 1, has been changed in codification to the "commissioner" of insurance to reflect the reorganization of certain parts of the Executive Branch, as set forth in Executive Order 2009-535 and confirmed by the General Assembly in 2010 Ky. Acts ch. 24. This change was made by the Reviser of Statutes pursuant to 2010 Ky. Acts ch. 24, sec. 1938.

Legislative Research Commission Note (7/15/2010). This section was amended by 2010 Ky. Acts chs. 24 and 25, which do not appear to be in conflict and have been codified together.

EXHIBIT 26

Examination of Health Maintenance Organization
KRS 304.38-120

304.38-120 Financial condition, market conduct, and business practices subject to examination.

Health maintenance organizations shall be subject to the provisions of KRS 304.2-210, 304.2-220, 304.2-230, 304.2-240, 304.2-250, 304.2-260, 304.2-270, 304.2-280, 304.2-290, 304.2-300, and Subtitle 2 of this chapter for determining financial condition, market conduct, and business practices.

Effective: July 13, 2004

History: Amended 2004 Ky. Acts ch. 24, sec. 42, effective July 13, 2004. -- Amended 1982 Ky. Acts ch. 320, sec. 40, effective July 15, 1982. -- Created 1974 Ky. Acts ch. 357, subtit. 38, sec. 12, effective June 21, 1974.

EXHIBIT 27

Rate Review Work Plan – Cycle II

RATE REVIEW WORK PLAN – CYCLE II
GRANTS TO SUPPORT STATES IN HEALTH INSURANCE RATE REVIEW
KENTUCKY DEPARTMENT OF INSURANCE

Funding Agency Goal:

By submitting this application, the Kentucky Department of Insurance ("Department") will improve and enhance the agency's current effective processes for reviewing and reporting health insurance rate information.

Objective:

The overall objective of the Department related to the use of Cycle II grant funds is to improve and enhance the Department's current health insurance rate review processes. The agency intends to develop processes and reporting capabilities to meet federal law requirements. Further, the agency intends to develop mechanisms to make and assist the federal government in making health insurance rate information transparent to consumers.

Results or Benefits Expected:

- Continue to develop and improve the Department's effective, efficient, and in-depth rate review processes;
- Collect and analyze required and meaningful health insurance rate information; and
- Educate and make rate information available to Kentucky health insurance consumers.

RATE REVIEW WORK PLAN				
Activities	**Milestones**	**Measurable Objective**	**Begin Date**	**End Date**
PERSONNEL				
Enhance the rate review process by retaining staff added with Cycle I grant funds and adding new staff and actuarial resources.	Retain positions added as a result of receipt of Cycle I grant funds through the Cycle II grant period.	Retention of 6 staff positions through the Cycle II grant period: • Information Officer • Systems Analyst II • Res. Mgmt Analyst I • Healthcare Data Administrator • Health Policy Specialist II	10/01/11	09/30/14

		• Administrative Specialist II.		
	Hire an Internal Actuary to provide unbiased actuarial advice regarding DOI rate review process, enhancements, database functions, data point needs, rate filing components, rate filing review needs, and compliance with federal law requirements; develop appropriate actuarial review checklists; and study the feasibility of integrating multi-year rate filings for actuarial review, reporting, and analysis.	Employ Internal Actuary.	10/01/11	01/30/12
	Contract with an Actuary to conduct audits of insurer rate application and rate derivation activity.	Finalize Contract with Audit Actuary.	11/01/11	03/15/12
	Contract with a Translator to enhance consumer rate communications to make certain they are culturally and linguistically appropriate given the demographics in the state of Kentucky.	Finalize Contract with Translator.	11/01/11	03/15/12
INFORMATION TECHNOLOGY				
Improve the Department's rate review systems with a focus on transparency, consumer participation, consumer protection, and more efficiency for actuarial review.	Capture rate filing dispositions in current databases, including differentiating between approvals and approvals after receipt of a filing modification.	Capture data regarding rate filing dispositions as follows: • Disapproval • Approval • Approval after Insurer filing modification.	10/01/11	05/01/12
		Provide public access to rate filing disposition final action document.	10/01/11	05/01/12
	Working collaboratively with	Provide funding to the	10/01/11	12/01/11

	the NAIC, make additional enhancements to the SERFF database.	NAIC for SERFF enhancements.		
		The SERFF system will be enhanced to assist with the collection of all parts of the industry Preliminary Justification for rate increases.	12/01/11	04/01/12
		SERFF will be modified to allow the states to enter a Summary of Rate Review and/or a State Filing Summary.	12/01/11	04/01/12
		The Health Filing Access Interface will be enhanced to allow states to display rate filing information and to accept and process public comments on rate filings.	12/01/11	04/01/12
		Make enhancements to Department's internal database to reflect SERFF changes and capture additional data.	05/01/12	11/15/12
		Make additional necessary SERFF enhancements for Cycle II, Year 2.	10/01/12	09/30/13
		Make additional necessary SERFF enhancements for Cycle II, Year 3.	10/01/13	09/30/14
	Enhance the Department's internal database to better capture, store, and retrieve pertinent rate filing documents in a manner accessible to consumers.	Consumers have the ability to retrieve and print documents related to rate filings without going through an open records process.	01/01/12	01/01/13
	In a timely manner publish **all** rate filings and insurers' justification for increases regardless of percentage of increase or decrease.	The Department's Website will contain information regarding all rate increase filings regardless of whether or not the percentage	01/01/12	01/01/13

		increase request meets the federal threshold.		
	Educate and make meaningful health insurance rate information available to Kentucky consumers.	Publish health rate filing information in language(s) other than English.	01/15/12	09/30/14
		Provide email notification to interested parties upon Department receipt of a rate filing.	01/01/12	07/15/12
		Purchase equipment to host Webinars.	01/01/12	04/01/12
		Host 4 Webinars.	04/01/12	09/30/14
		Replace the current Rate Filing Summary report with a report similar to HHS' "Consumer Disclosure about Proposed Health Insurance Rate Increase" report.	10/01/11	09/30/12
	Collaborate with industry, insurers, and consumer groups to provide additional transparency.	Hold 4 stakeholder forums to gather input.	01/01/12	09/30/14
	Increase public access and participation by updating the plain language website for consumer protection and rate review issues.	Continually update information available to consumers on Department's Website. Define rate filing terms for consumers.	10/01/11	09/30/14
	Develop and implement more robust consumer protection procedures for rate increases, receive and investigate complaints, coordinate hearing requests and notices, liaison with officials and Attorney General staff.		10/01/11	09/30/14
	Establish a primary point of contact for consumers with regard to rate filing questions and issues.	Designate and publish a primary contact for consumers regarding rate filing issues.	10/01/11	12/01/11

	Establish a consumer help desk to assist with filing complaints and obtaining information from the department with regard to rate increases and indexes, insurer offerings, and medical loss ratio.	Establish consumer help desk.	10/01/11	12/01/11
RATE REVIEW PROCESS IMPROVEMENTS				
Implement more rigorous rate filing requirements that better document the underlying factors that influence proposed rate increases.	Identify needed changes to statutes and regulations to better collect data need for a more efficient rate review process including: • Trend assumptions • Projections • Financial data • Administrative Expenses.	Identify rate review law changes needed for individual and small group market segments. Promulgate necessary law changes.	10/01/11	10/01/12
		Identify rate review law changes needed for associations and large group market segments. Promulgate necessary law changes.	10/01/12	10/01/13
		Identify rate review law changes needed for non-health benefit plan products. Promulgate necessary law changes.	10/01/12	09/30/14
	Require compliance with standards of practice and be more aggressive in reporting questionable actuarial work.	Build process to better oversee insurer's actuarial work product.	10/01/11	09/30/12
	Study the feasibility of automating the review process by assembling relevant past rate filing data.	Make a recommendation regarding automating the rate review process.	01/30/12	07/15/12
		Make IT enhancements to internal database based on automation recommendation.	08/01/12	09/30/14

	Expand rate review to include non health benefit plans, such as student blanket policies.	Review rates regarding non-health benefit plans.	10/01/13	09/30/14
	Standardize and streamline rate applications / filings and develop and implement new procedures and forms for more robust rate review process.	Develop new rate filing forms.	10/1/11	10/1/12
ENFORCEMENT INITIATIVES				
Determine insurer rate application practices and take necessary action with respect to rate application violations identified.	Conduct insurer rate application audits to determine if filed rates are being used, to determine the effect of underwriting on rates, and to gather information to report to the Exchange.	Conduct 5 rate application audits.	03/15/12	09/30/12
		Conduct 10 rate application audits.	09/30/12	09/30/13
		Conduct 10 rate application audits	09/30/13	09/30/14
		Develop reporting tool to report information regarding insurer rating practices to the Exchange.	09/30/13	09/30/14
	Conduct insurer rate derivation audits to determine how insurers derive their rates and whether applicable medical loss ratio standards are being met.	Conduct 5 rate derivation audits	03/15/12	09/30/12
		Conduct 10 rate derivation audits	09/30/12	09/30/13
		Conduct 10 rate derivation audits	09/30/13	09/30/14

MISCELLANEOUS				
Assess technology, training, communications, physical space and supply needs of the Department for this project; facilitate acquisition and determine priority of project plan items.	Continuously monitor the program for training and resource needs to meet program objectives in a timely manner.	Identify training and resource needs to meet program objectives in a timely manner.	10/01/11	09/30/14
Monitor and track Project Budget and resources and compile operational reports for federal reporting; audit functions for the Project.	Meet all reporting deadlines and consistently review the budget and resources for program efficiency.	Report as required by HHS regarding use of grant funds and Department rate review progress.	10/01/11	09/30/14