

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	
1	<b>Unified Rate Review v5.4</b>																			
2																	To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + P.			
3	Company Legal Name:	CareSource Kentucky Co.														State:	KY	To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L.		
4	HIOS Issuer ID:	45636														Market:	Individual	To validate, select the Validate button or Ctrl + Shift + I.		
5	Effective Date of Rate Change(s):	1/1/2023																		
6																				
7																				
8	<b>Market Level Calculations (Same for all Plans)</b>																			
9																				
10																				
11	<b>Section I: Experience Period Data</b>																			
12	Experience Period:	1/1/2021			to	12/31/2021														
13					Total				PMPM											
14	Allowed Claims				\$300,517,152.14				\$560.27											
15	Reinsurance				\$0.00				\$0.00											
16	Incurred Claims in Experience Period				\$242,280,257.07				\$451.70											
17	Risk Adjustment				-\$1,093,505.72				-\$2.04											
18	Experience Period Premium				\$299,148,329.78				\$557.72											
19	Experience Period Member Months				536,379															
20																				
21	<b>Section II: Projections</b>																			
22			Year 1 Trend				Year 2 Trend				Trended EHB Allowed Claims									
23	Benefit Category	Experience Period Index Rate PMPM	Cost		Utilization		Cost		Utilization		PMPM									
24	Inpatient Hospital	\$84.57	1.033	1.014	1.014	1.033	1.014	\$92.79												
25	Outpatient Hospital	\$207.87	1.058	1.020	1.058	1.020	\$242.08													
26	Professional	\$176.18	1.019	1.010	1.019	1.010	\$186.62													
27	Other Medical	\$13.00	1.019	1.010	1.019	1.010	\$13.77													
28	Capitation	\$0.00	1.000	1.000	1.000	1.000	\$0.00													
29	Prescription Drug	\$78.65	1.058	1.025	1.058	1.025	\$92.49													
30	Total	\$560.27					\$627.75													
31																				
32	Morbidity Adjustment				1.040															
33	Demographic Shift				1.009															
34	Plan Design Changes				0.985															
35	Other				1.010															
36	Adjusted Trended EHB Allowed Claims PMPM for	1/1/2023			\$655.34															
37																				
38	Manual EHB Allowed Claims PMPM				\$0.00															
39	Applied Credibility %				100.00%															
40																				
41	<b>Projected Period Totals</b>																			
42	Projected Index Rate for	1/1/2023			\$655.34	\$278,600,762.16														
43	Reinsurance				\$0.00	\$0.00														
44	Risk Adjustment Payment/Charge				-\$7.01	-\$2,980,119.24														
45	Exchange User Fees				0.00%	\$0.00														
46	Market Adjusted Index Rate				\$662.35	\$281,580,881.40														
47																				
48	Projected Member Months				425,124															
49																				
50	<b>Information Not Releasable to the Public Unless Authorized by Law:</b> This information has not been publically disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.																			
51																				

**Product-Plan Data Collection**

Company Legal Name: CareSource Kentucky Co.  
 HIOS Issuer ID: 45636  
 Effective Date of Rate Change(s): 1/1/2023

**Product/Plan Level Calculations**

Field # **Section I: General Product and Plan Information**

		CareSource Marketplace								
		45636KY001								
		CareSource	CareSource	CareSource	CareSource	CareSource	CareSource	CareSource	CareSource	CareSource
1.1 Product Name										
1.2 Product ID										
1.3 Plan Name		CareSource	CareSource	CareSource	CareSource	CareSource	CareSource	CareSource	CareSource	CareSource
1.4 Plan ID (Standard Component ID)		45636KY0010010	45636KY0010013	45636KY0010014	45636KY0010017	45636KY0010029	45636KY0010030	45636KY0010031	45636KY0010032	45636KY0020014
1.5 Metal		Catastrophic	Bronze	Silver	Bronze	Gold	Silver	Silver	Bronze	Silver
1.6 AV Metal Value		0.625	0.643	0.701	0.649	0.796	0.701	0.715	0.599	0.701
1.7 Plan Category		Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Terminated	New	Renewing
1.8 Plan Type		HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO
1.9 Exchange Plan?		Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes
1.10 Effective Date of Proposed Rates		1/1/2023	1/1/2023	1/1/2023	1/1/2023	1/1/2023	1/1/2023	1/1/2023	1/1/2023	1/1/2023
1.11 Cumulative Rate Change % (over 12 mos prior)		6.04%	7.49%	7.80%	8.28%	3.41%	3.46%	0.00%	0.00%	7.70%
1.12 Product Rate Increase %		7.22%								
1.13 Submission Level Rate Increase %		7.15%								

Worksheet 1 Totals

**Section II: Experience Period and Current Plan Level Information**

		Total	45636KY0010010	45636KY0010013	45636KY0010014	45636KY0010017	45636KY0010029	45636KY0010030	45636KY0010031	45636KY0010032	45636KY0020014
\$300,517,152	2.1 Plan ID (Standard Component ID)	\$300,517,152	\$450,047	\$13,414,948	\$80,406,742	\$67,068,819	\$49,570,993	\$10,969,748	\$8,113,999	\$0	\$22,930,752
\$0	2.2 Allowed Claims	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	2.3 Reinsurance	\$58,236,895	\$125,065	\$4,152,364	\$10,673,739	\$20,286,781	\$6,293,002	\$1,562,568	\$990,298	\$0	\$3,378,968
	2.4 Member Cost Sharing	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$242,280,257	2.5 Cost Sharing Reduction	\$242,280,257	\$324,983	\$9,262,584	\$69,733,003	\$46,782,038	\$43,277,991	\$9,407,180	\$7,123,701	\$0	\$19,551,784
-\$1,093,506	2.6 Incurred Claims	-\$1,093,506	\$115,045	-\$3,390,101	\$4,848,194	-\$33,724,860	\$30,554,466	\$2,953,810	\$2,122,481	\$0	\$432,871
\$299,148,330	2.7 Risk Adjustment Transfer Amount	\$299,148,330	\$296,746	\$16,529,630	\$80,267,591	\$86,990,043	\$26,683,928	\$9,624,797	\$6,152,428	\$0	\$24,755,547
536,379	2.8 Premium	536,379	1,282	32,482	110,996	191,812	36,949	13,239	8,914	0	39,695
	2.9 Experience Period Member Months	40,652	87	2,253	7,396	14,899	3,009	916	651	0	3,062
	2.10 Current Enrollment	\$580.83	\$225.53	\$552.55	\$746.53	\$488.48	\$740.59	\$751.62	\$739.35	\$0.00	\$644.74
	2.11 Current Premium PMPM	81.29%	78.92%	70.49%	81.93%	87.83%	75.61%	74.79%	86.09%	#DIV/0!	77.62%
	2.12 Loss Ratio	<b>Per Member Per Month</b>									
	2.13 Allowed Claims	\$560.27	\$351.05	\$413.00	\$724.41	\$349.66	\$1,341.61	\$828.59	\$910.25	#DIV/0!	\$577.67
	2.14 Reinsurance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	\$0.00
	2.15 Member Cost Sharing	\$108.57	\$97.55	\$127.84	\$96.16	\$105.76	\$170.32	\$118.03	\$111.09	#DIV/0!	\$85.12
	2.16 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	\$0.00
	2.17 Incurred Claims	\$451.70	\$253.50	\$285.16	\$628.25	\$243.90	\$1,171.29	\$710.57	\$799.16	#DIV/0!	\$492.55
	2.18 Risk Adjustment Transfer Amount	-\$2.04	\$89.74	-\$104.37	\$43.68	-\$175.82	\$826.94	\$223.11	\$238.11	#DIV/0!	\$10.90
	2.19 Premium	\$557.72	\$231.47	\$508.89	\$723.16	\$453.52	\$722.18	\$727.00	\$690.20	#DIV/0!	\$623.64

**Section III: Plan Adjustment Factors**

		45636KY0010010	45636KY0010013	45636KY0010014	45636KY0010017	45636KY0010029	45636KY0010030	45636KY0010031	45636KY0010032	45636KY0020014
3.1 Plan ID (Standard Component ID)										
3.2 Market Adjusted Index Rate		\$662.35								
3.3 AV and Cost Sharing Design of Plan		0.6555	0.7054	0.8586	0.6236	0.9669	0.8745	0.0000	0.6271	0.8587

3.4 Provider Network Adjustment		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.0000	1.0000	1.0000
3.5 Benefits in Addition to EHB		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.0000	1.0000	1.0137

**Administrative Costs**

3.6 Administrative Expense		12.63%	12.65%	12.65%	12.65%	12.65%	12.65%	0.00%	12.65%	12.81%
3.7 Taxes and Fees		1.13%	1.08%	1.07%	1.08%	1.07%	1.07%	0.00%	1.08%	1.07%
3.8 Profit & Risk Load		5.19%	5.20%	5.20%	5.20%	5.20%	5.20%	0.00%	3.20%	5.22%
3.9 Catastrophic Adjustment		0.8631	1.0000	1.0000	1.0000	1.0000	1.0000	0.0000	1.0000	1.0000
3.10 Plan Adjusted Index Rate		\$462.35	\$576.32	\$701.40	\$509.49	\$789.87	\$714.39	\$0.00	\$500.01	\$712.67

3.11 Age Calibration Factor	0.5560								0.5560	
3.12 Geographic Calibration Factor	1.0000								1.0000	
3.13 Tobacco Calibration Factor	0.9942								0.9942	
3.14 Calibrated Plan Adjusted Index Rate		\$255.57	\$318.57	\$387.72	\$281.63	\$436.62	\$394.90	\$0.00	\$276.39	\$393.95

**Section IV: Projected Plan Level Information**

4.1 Plan ID (Standard Component ID)	Total	45636KY0010010	45636KY0010013	45636KY0010014	45636KY0010017	45636KY0010029	45636KY0010030	45636KY0010031	45636KY0010032	45636KY0020014
4.2 Allowed Claims	\$279,062,533	\$235,629	\$14,445,451	\$49,041,551	\$76,124,402	\$29,716,858	\$7,743,965	\$0	\$22,366,289	\$20,541,111
4.3 Reinsurance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4.4 Member Cost Sharing	\$71,459,852	\$75,178	\$4,219,923	\$7,388,263	\$25,892,680	\$5,959,244	\$1,071,359	\$0	\$7,270,846	\$3,059,147
4.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4.6 Incurred Claims	\$207,602,680	\$160,451	\$10,225,528	\$41,653,288	\$50,231,722	\$23,757,614	\$6,672,606	\$0	\$15,095,442	\$17,481,963
4.7 Risk Adjustment Transfer Amount	-\$2,216,630	-\$3,266	-\$109,303	-\$445,211	-\$536,977	-\$253,931	-\$71,320	\$0	-\$157,452	-\$187,256
4.8 Premium	\$258,521,118	\$199,740	\$12,756,787	\$51,960,548	\$62,670,569	\$29,636,241	\$8,323,699	\$0	\$18,376,147	\$21,854,584
4.9 Projected Member Months	425,124	824	22,131	74,069	122,979	37,516	11,650	0	36,744	30,664
4.10 Loss Ratio	81.00%	81.67%	80.85%	80.86%	80.84%	80.86%	80.86%	#DIV/0!	82.86%	80.68%

**Per Member Per Month**

4.11 Allowed Claims	\$656.43	\$285.96	\$652.72	\$662.11	\$619.00	\$792.11	\$664.72	#DIV/0!	\$608.71	\$669.88
4.12 Reinsurance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	\$0.00	\$0.00
4.13 Member Cost Sharing	\$168.09	\$91.24	\$190.68	\$99.75	\$210.55	\$158.85	\$91.96	#DIV/0!	\$197.88	\$99.76
4.14 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	\$0.00	\$0.00
4.15 Incurred Claims	\$488.33	\$194.72	\$462.05	\$562.36	\$408.46	\$633.27	\$572.76	#DIV/0!	\$410.83	\$570.11
4.16 Risk Adjustment Transfer Amount	-\$5.21	-\$3.96	-\$4.94	-\$6.01	-\$4.37	-\$6.77	-\$6.12	#DIV/0!	-\$4.29	-\$6.11
4.17 Premium	\$608.11	\$242.40	\$576.42	\$701.52	\$509.60	\$789.96	\$714.48	#DIV/0!	\$500.11	\$712.71

To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + P.

To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L.

State: **KY**

To validate, select the Validate button or Ctrl + Shift + I.

Market: **Individual**

To finalize, select the Finalize button or Ctrl + Shift + F.

To remove a product, navigate to the corresponding Product Name/Product ID field and select the Remove Product button or Ctrl + Shift + Q.

To remove a plan, navigate to the corresponding Plan Name/Plan ID field and select the Remove Plan button or Ctrl + Shift + A.



CareSource Marketplace Dental, Vision, & Fitness				
45636KY002				
CareSource	CareSource	CareSource	CareSource	CareSource
45636KY0020015	45636KY0020016	45636KY0020017	45636KY0020031	45636KY0020032
Gold	Silver	Bronze	Silver	Bronze
0.796	0.701	0.649	0.715	0.599
Renewing	Renewing	Renewing	Terminated	New
HMO	HMO	HMO	HMO	HMO
Yes	Yes	Yes	No	Yes
1/1/2023	1/1/2023	1/1/2023	1/1/2023	1/1/2023
3.39%	3.44%	8.19%	0.00%	0.00%
6.93%				

45636KY0020015	45636KY0020016	45636KY0020017	45636KY0020031	45636KY0020032
\$12,348,208	\$5,684,785	\$24,393,365	\$5,164,745	\$0
\$0	\$0	\$0	\$0	\$0
\$2,106,953	\$768,229	\$7,277,899	\$621,029	\$0
\$0	\$0	\$0	\$0	\$0
\$10,241,255	\$4,916,556	\$17,115,466	\$4,543,716	\$0
\$1,908,449	\$1,279,161	-\$9,198,378	\$1,005,355	\$0
\$10,020,218	\$4,794,188	\$29,361,275	\$3,671,940	\$0
15,941	7,777	71,369	5,923	0
1,439	621	5,786	533	0
\$644.75	\$625.93	\$435.68	\$634.87	\$0.00
85.85%	80.95%	84.89%	97.14%	#DIV/0!

\$774.62	\$730.97	\$341.79	\$871.98	#DIV/0!
\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!
\$132.17	\$98.78	\$101.98	\$104.85	#DIV/0!
\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!
\$642.45	\$632.19	\$239.82	\$767.13	#DIV/0!
\$119.72	\$164.48	-\$128.88	\$169.74	#DIV/0!
\$628.58	\$616.46	\$411.40	\$619.95	#DIV/0!

45636KY0020015	45636KY0020016	45636KY0020017	45636KY0020031	45636KY0020032
0.9660	0.8745	0.6241	0.0000	0.6278

1.0000	1.0000	1.0000	0.0000	1.0000
1.0134	1.0135	1.0180	0.0000	1.0173

12.79%	12.80%	12.86%	0.00%	12.87%
1.07%	1.07%	1.08%	0.00%	1.08%
5.31%	5.22%	5.16%	0.00%	3.13%
1.0000	1.0000	1.0000	0.0000	1.0000
\$802.18	\$725.55	\$520.16	\$0.00	\$510.15

\$443.43	\$401.07	\$287.53	\$0.00	\$282.00

45636KY0020015	45636KY0020016	45636KY0020017	45636KY0020031	45636KY0020032
\$14,345,181	\$5,769,978	\$29,935,047	\$0	\$8,797,073
\$0	\$0	\$0	\$0	\$0
\$2,846,096	\$789,180	\$10,061,538	\$0	\$2,826,398
\$0	\$0	\$0	\$0	\$0
\$11,499,085	\$4,980,798	\$19,873,509	\$0	\$5,970,675
-\$123,283	-\$53,349	-\$212,901	\$0	-\$62,381
\$14,388,381	\$6,226,332	\$24,847,617	\$0	\$7,280,474
17,934	8,580	47,762	0	14,271
80.61%	80.69%	80.67%	#DIV/0!	82.72%

\$799.89	\$672.49	\$626.75	#DIV/0!	\$616.43
\$0.00	\$0.00	\$0.00	#DIV/0!	\$0.00
\$158.70	\$91.98	\$210.66	#DIV/0!	\$198.05
\$0.00	\$0.00	\$0.00	#DIV/0!	\$0.00
\$641.19	\$580.51	\$416.09	#DIV/0!	\$418.38
-\$6.87	-\$6.22	-\$4.46	#DIV/0!	-\$4.37
\$802.30	\$725.68	\$520.24	#DIV/0!	\$510.16

## Rating Area Data Collection

*Specify the total number of Rating Areas in your State by selecting the Create Rating Areas button or Ctrl + Shift + R.*

*Select only the Rating Areas you are offering plans within and add a factor for each area.*

*To validate, select the Validate button or Ctrl + Shift + I.*

*To finalize, select the Finalize button or Ctrl + Shift + F.*

Rating Area	Rating Factor
Rating Area 1	0.9260
Rating Area 2	0.9100
Rating Area 3	1.0060
Rating Area 4	0.9740
Rating Area 5	0.9300
Rating Area 6	1.4260
Rating Area 7	0.9520
Rating Area 8	0.9110