

UPMC Health Plan, Inc. – Individual Plans

Rate request filing ID # UPMC-134504084 – This document is prepared by the insurance company submitting the rate filing as a consumer tool to help explain the rate filing. It is not intended to describe or include all factors or information considered in the review process. For more information, see the filing at <https://www.insurance.pa.gov/Consumers/HealthInsuranceFilings/Pages/ACA-Health-Rate-Filings.aspx>

Overview

Initial request average rate change:	16.28%
Revised requested average rate change: ¹	16.28%
Range of requested:	3.96% to 21.50%
Effective date:	January 1, 2026
Mapped members:	2,013
Available in:	Rating Areas 1 and 5

Key Information

Jan. 2024 – Dec. 2024 financial experience

Premiums	\$19,805,809
Claims	\$16,495,040
Administrative Expenses	\$1,335,606
Taxes & Fees	\$686,875
Insurer made (after taxes)	\$1,288,287

How insurer plans to spend your premium

This is how the insurance company plans to spend the premium it collects in 2026

Claims:	86%
Administrative:	9%
Taxes & Fees:	3%
Profit:	2%

The insurer expects its annual medical costs to increase 7.8%.

Explanation of Requested Rate Change:

Increases in medical and pharmacy cost and utilization.

¹ Note that insurers will have the opportunity to revise their rate change request in July, after they are scheduled to receive updated information about the impact of a federal program called risk adjustment. This document will be updated accordingly at that time.

UPMC HEALTH PLAN

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May 15, 2025

Ms. Lindsy Swartz
Director - Life, Accident, and Health Rate and Policy Form Review
Bureau of Life, Accident and Health Insurance
Pennsylvania Insurance Department
1311 Strawberry Square
Harrisburg, PA 17120

Dear Ms. Swartz,

UPMC Health Plan, Inc. respectfully requests approval of a rate filing for Individual On and Off Exchange HMO products. The rates are proposed for effective dates of 1/1/2026 through 12/31/2026.

Company Name/NAIC #: UPMC Health Plan, Inc./95216
Market: Individual
On or Off Exchange: On and Off
Effective Date of Coverage: 1/1/2026
Average Rate Change Requested (Table 11): 16.28% (\$65.42)
Range of Rate Change Requested (Table 11): 3.96% to 21.50% (\$15.90 to \$86.40)
Products Offered: HMO
Rating Areas Where Plans are Offered: 1, 5 (no change from 2025)
Metal Levels Offered: Catastrophic, Bronze, Silver, Gold
Currently Enrolled Lives Affected by the Rate Change: 2,013
Currently Enrolled Policyholders Affected by the Rate Change: 1,428
Number of Plans Offered in 2026: 8 (no change from 2025)
Total additional annual revenue generated from the proposed rate change: \$3,019,192
Corresponding Contract Form #: 680, 681
Binder ID#: UPMC-PA26-125120126
HIOS Issuer ID #: 52899
Submission Tracking #: UPMC-134504084

If you have any questions or require additional information, please call me at [REDACTED] or email me at [REDACTED]

Sincerely,

[REDACTED]

PA Actuarial Memorandum

Section 1 - Basic Information and Data

The purpose of this actuarial memorandum is to provide certain information related to a rate submission for the company identified below. The relevant index rate is developed in accordance with federal regulations, and plan specific premiums are generated using the allowable modifiers in accordance with the single risk pool rule.

1A. Company Information

The following section provides information related to the identification of the company that is submitting this rate filing. Much of this information is also displayed in Table 0 of the PA Actuarial Memorandum Exhibits.

Please note that UPMC is migrating the Individual market business with policies issued under the legal entity UPMC Health Coverage, Inc. (HIOS Issuer ID 62560) to the legal entity UPMC Health Plan, Inc. (HIOS Issuer ID 52899), effective 1/1/2026. For the purposes of rate filing, we are treating this migration as a continuity of the market offering, and unless otherwise noted will consider UPMC Health Coverage, Inc. experience through 12/31/2025 to correspond to UPMC Health Plan, Inc. policies going forward.

Company Legal Name: UPMC Health Plan, Inc.

NAIC #: 95216

HIOS Issuer ID: 52899

Market: Individual

Exchange: On and Off Exchange

Products: HMO

Effective Date: 1/1/2026

Company Contact Information:

[REDACTED]
[REDACTED]
[REDACTED]

Filing Information:

Rate Filing SERFF Tracking #: UPMC-134504084

Form Filing SERFF Tracking #: UPMC-134508630, UPMC-134508631

Binder SERFF Tracking #: UPMC-PA26-125120126

1B. Rate History and Proposed Variations in Rate Changes

Historical and proposed rate changes vary by plan due to various changes made to meet AV requirements on a plan-by-plan basis, as well as due to any changes made to geographic or network factors. The values listed below and overall proposed rate change for 2026 are weighted averages of the increase for each plan based on projected enrollment. Justification for rating factors is contained within this memorandum, and Table 10 of the

PA Actuarial Memorandum Exhibits illustrates a breakdown of plan-by-plan rate increases.

SERFF Tracking #	Year	Rate Change*
UPMC-133257300	2023	4.4%
UPMC-133641900	2024	6.1%
UPMC-134082103	2025	4.7%

* Historical increases in this table are from Table 10

1C. Average Rate Change

- Average rate change in Table 10, column AC of the PA Actuarial Memorandum Exhibits: 14.5%
- Change in 21-year-old non-tobacco premium PMPM in Table 11, cell AN13 of the PA Actuarial Memorandum Exhibits: 16.3%

1D. Membership Count

Various illustrations of the membership count for the captioned company and market are displayed in Table 1 of the PA Actuarial Memorandum Exhibits.

1E. Benefit Changes

A table with these changes has been included in Appendix I. All plans have metal level actuarial values in accordance with the 2026 Marketplace Integrity and Affordability Proposed Rule. If the AV-related provisions of the proposed rule are not adopted in the final rule, a revised filing will be submitted.

1F. Experience Period Claims and Premium

The single risk pool consists of members in the experience period that are anticipated to enroll in ACA-compliant policies offered by UPMC in the Individual market in the projected period, which includes all currently enrolled members in ACA-compliant Individual market policies across both UPMC Health Options, Inc., and UPMC Health Coverage, Inc. (migrating to UPMC Health Plan, Inc. beginning 1/1/2026), except those domiciled in Rating Areas 6 and 7. Claims and premium data for all non-grandfathered policies (including Rating Areas 6 and 7) for the captioned company and market from the experience period (January 2024 - December 2024) with two months of run-out are displayed in Table 2 of the PA Actuarial Memorandum Exhibits. The Manual data in Table 2b excludes experience data from Rating Areas 6 and 7 to align with the projected period.

This section provides a discussion of each field in the table and its relation to the corresponding fields on the URRT.

Earned Premium:

This represents the revenue accumulated by the captioned company during the experience period. No

adjustments were made for MLR rebates as we do not anticipate owing them. HHS cost-sharing is not included in the premium data. Please note that the earned premium listed in Table 2 does match the total premium listed in section I, worksheet 1 of the URRT.

Paid Claims:

This field includes uncompleted paid medical and pharmacy experience period claims for the captioned company and market.

Ultimate Incurred Claims:

This field includes completed paid medical and pharmacy experience period claims for the captioned company and market. We used the standard Development / Completion Factor Method to calculate claims that are incurred but not reported (IBNR). The completion factors used in Table 4b are displayed in the table below. Factors were calculated using our entire ACA-compliant Individual block of business. Please note that the ultimate incurred claims shown in Table 2 do not match the total incurred claims displayed in section I, worksheet 1 of the URRT because the value in the URRT equals the ultimate incurred claims less total prescription drug rebates listed in Table 2.

Month	Completion Factor
1/1/2024	0.9999
2/1/2024	0.9998
3/1/2024	0.9992
4/1/2024	0.9986
5/1/2024	0.9976
6/1/2024	0.9963
7/1/2024	0.9933
8/1/2024	0.9914
9/1/2024	0.9876
10/1/2024	0.9788
11/1/2024	0.9608
12/1/2024	0.9537

The following table shows the ultimate paid claims for the experience period distinguished between claims paid and fully adjudicated and claims estimated by IBNR:

Incurred Claims Processed by Claim System:	\$ 19,128,966
Claims Processed Outside Claim System:	\$ -
Claims Estimated by IBNR:	\$ 263,176
Ultimate Incurred Claims:	\$ 19,392,143

Member Months:

The sum of the experience period member months shown in Table 1 is also displayed in Table 2.

Estimated Cost Sharing:

This field represents the difference between allowed claims and ultimate incurred claims in Table 2.

Allowed Claims:

This field includes allowed medical and pharmacy claims from the experience period for the captioned company and market, which are pulled directly from our data warehouse. Please note that the allowed claims shown in Table 2 do not match the total allowed claims displayed in section I, worksheet 1 of the URRT because the value in the URRT equals the allowed claims less total prescription drug rebates listed in Table 2.

Non-EHB portion of Allowed Claims:

This field displays the amount of allowed experience period claims that can be attributed to non-EHBs for the captioned market and company.

Total Prescription Drug Rebates:

This field shows the amount of prescription drug rebates received for the captioned company and market during the experience period. The prescription drug rebates shown align with the receipts from the experience period, and the extent to which we expect the projected period rebates to differ from the experience period rebates is included in the development of the Change in Other factor in Table 5. Pharmacy rebates have been removed from the total incurred and allowed claims displayed in section I, worksheet 1 of the URRT.

Total EHB Capitation:

EHB benefits were not paid for via capitation during the experience period.

Total Non-EHB Capitation:

Non-EHB benefits were not paid for via capitation during the experience period.

Experience Period Risk Adjustment:

Experience period Risk Adjustment for the captioned company is estimated to be a receipt of \$936,162 per the Pennsylvania Insurance Department Risk Adjustment Department Model for Benefit Year 2024. The receipt translates to a PMPM of \$37.87. This information was disseminated by the Department on May 7, 2025 via e-mail.

Experience Period Reinsurance Recoveries:

Experience period recoveries from the state-based reinsurance program are estimated to be a receivable of \$901,733 for the captioned company. This estimate was calculated based on a member-level analysis using data from UPMC's data warehouse for the experience period using an attachment point of \$60,000, a ceiling of \$100,000, and a reimbursement rate of 60% of costs in between those points. The estimate translates to a PMPM of \$36.48.

Loss Ratio:

The loss ratio calculated in Table 2 is 83.28%.

1G. Credibility of Data

The manual data for this filing was developed using the entirety of ACA-compliant experience period data from each of UPMC's subsidiary companies in the Individual market, excluding experience from members domiciled in

Rating Areas 6 and 7, and is displayed in tables 2b, 3b, and 4b in the PA Actuarial Memorandum Exhibits. The manual data consists of 1,262,789 member months of experience.

The experience period data for this company consists of 24,721 member months from ACA-compliant policies. Because the manual data encompasses the single risk pool of all UPMC Individual market companies, we believe it most appropriately represents the claim experience for use in calculating projected rates. Therefore, we assign 100% credibility to the manual data and 0% credibility is used for each company-specific single risk pool. Adjustments to the data include the trend and network adjustments discussed in the "Index Rate" section below.

1H. Trend Identification

The overall annual trend used in rate development is 7.76%. Historical allowed claims from our Individual block of ACA-compliant business across all of UPMC's subsidiary companies were used to develop trend factors for use in the projected rates, and the basis for this trend is a least squares regression analysis on 12-month rolling cost and utilization claims experience between 2022 and 2024. The selected trends consider the regression results in each category (Inpatient Hospital, Outpatient Hospital, Professional, Other Medical, and Prescription Drug), and incorporate the influence of anticipated changes in, as an example, the mix of services within a category. The selected aggregate trend is the weighted average aggregation of the component trends.

The large enrollment count and consistent makeup of this population make it appropriate for use in trend development for this filing. Service categories were defined to be consistent with the URRT instructions. Please see Tables 3 and 3b of the PA Actuarial Memorandum Exhibits for trend development calculations. No changes in provider contracting are expected between the experience and projection periods, and therefore, no adjustments have been applied.

1I. Historical Experience

Historical data from the four most recent calendar years for the captioned company and market with two months of run-out is provided in Table 4. Allowed claims were developed using the same manner described above for Table 2. The historical data listed in Table 4b consists of a blend of ACA-compliant experience data from each of UPMC's subsidiary companies in the Individual market and was used in the development of trend.

Section 2 - Rate Development & Change

Per the Department's instructions, this rate filing assumes that enhanced Premium Tax Credits (ePTCs) are not extended for Plan Year 2026, but includes a separate version of the PAAM exhibits which do reflect a scenario where ePTCs are extended for Plan Year 2026. Under this scenario, the "Change in Morbidity - All Other" factor (discussed in Section 2A below) and projected membership assumptions would differ from the baseline submission.

2A. Projected Index Rate, Market-Adjusted Index Rate, & Total Allowed Claims

Table 5 of the PA Actuarial Memorandum Exhibits shows the development of the projected index rate, Market-Adjusted Index Rate, and projected total allowed claims. Detailed discussions on the development of each quantity are provided below.

Index Rate:

For this filing, the Index Rate of the Experience Period is set equal to the manual rate as outlined above in Section 1G of this memorandum. The calculation of the manual rate is shown in Table 2b of the PA Actuarial Memorandum Exhibits. The Index Rate of the Projection Period is then calculated in Table 5 by first applying two years of 7.76% annual trend to the Index Rate of Experience Period.

For 2026, the Pennsylvania Insurance Department has mandated that an adjustment factor of 1.0 is applied to the index rate to reflect the morbidity impact of the state-based reinsurance program in the Individual market. In line with that guidance, no adjustment for changes in morbidity as a result of the state-based reinsurance program has been applied.

An adjustment factor of 1.018 has been made in the Change in Morbidity - All Other category to account for the anticipated increase in plan liability as a result of adverse selection in 2026 due to the expiration of the federal enhanced Premium Tax Credits which are set to expire at the end of 2025. Please see Exhibit 13 of the Supporting Exhibits for the derivation of this factor.

An adjustment factor of 1.010 has been made in the Change in Demographics category to account for the differences between both the average age factor and the average geographic factor of the experience period enrollment versus that of the projected enrollment. Supporting Exhibit 5 illustrates the calculation for each piece of the adjustment.

An adjustment factor of 1.398 has been made in the Change in Network category to account for differences in expected allowed claims costs between the manual data and that of the captioned company. This adjustment factor brings the captioned company index rate in line with the current characteristics of the provider networks. Please see Exhibit 7 of the Supporting Exhibits for the derivation of this factor.

An adjustment factor of 0.979 has been made in the Change in Benefits category to account for the impact of on Allowed Claims in the projected period due to differences in induced demand between the experience period and the projected period. This impact is measured as the change in average induced demand factor between the experience period and the projected period, using the projected enrollment to determine the difference in plan mix when compared to the experience period. Plan design changes for 2026 are also accounted for. Please see Exhibit 6 of the Supporting Exhibits for the derivation of this factor.

An adjustment factor of 0.980 has been applied to the index rate in the Change in Other category. This adjustment accounts for itemized differences between the 2024 experience period and the 2026 projection period, such as the impact of pharmacy rebate receipts in the projected period differing from those in the experience period. Please see Exhibit 8 of the Supporting Exhibits for the derivation of the Change in Other factor applied in Table 5.

The average age for our experience period Individual risk pool was 44.0 with an average premium factor of 1.83.

This compares to our 2025 enrollment with age 43.8 and premium factor 1.82; as noted, an adjustment for this difference has been made in the Change in Demographics factor in Table 5. Please note that the Index Rate of Projection Period of \$977.84 shown in Table 5 matches the corresponding value shown in section II, worksheet 1 of the URRT.

Market-Adjusted Index Rate:

The Projected Index Rate is adjusted by adding estimates for risk adjustment and marketplace fees (with impacts and costs spread across the whole risk pool) to obtain the Projected Market Adjusted Index Rate.

Projection period Risk Adjustment PMPM has been estimated to be a payment of \$2.76, which is displayed in Table 5. First, UPMC considered the CY 2024 transfer provided by the Department on May 7, 2025. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Finally, the Projection Period Risk Adjustment transfer PMPM accounts for the impact of known changes to HHS model weights for the 2026 Benefit Period, as well as the impact of the assumed change in the statewide average premium between 2024 and 2026 to scale the result accordingly. The transfer amount is not adjusted to reflect the estimated impact of the Risk Adjustment Data Validation (RADV) program, as there have been fluctuations in the program's impact directionally in recent years. UPMC relies on analysis by Wakely Consulting in estimating the impacts of both the 2026 model changes and the RADV program.

The projected transfer assumes a \$0 High Cost Risk Pool (HCRP) recovery net of the program's surcharge.

Please see Exhibit 9 of the Supporting Exhibits for the derivation of this estimate.

The value entered in Section II, Worksheet 1 of the URRT was (\$3.54) since the calculation of the Market Adjusted Index Rate is done on an allowed claims basis in the URRT. The updated PMPM was derived by taking the original paid PMPM divided by the Paid to Allowed Average Factor. The net amount after accounting for the fee is subtracted from the Index Rate of the Projection Period as part of the calculation of the Market Adjusted Index Rate. For the URRT and Table 5 of the PA Actuarial Memorandum Rate Exhibits, it was entered as a negative number because the calculation subtracts this value. The effect is an increase in premium as more

revenue will be required due to the anticipated payment.

The member-weighted average of a 3.0% Marketplace User Fee for Marketplace enrollees combined with 0% for non-Marketplace enrollees calculates to 2.4%. This load is developed based on fees from on-exchange policies, but is spread over all policies uniformly. This translates to a PMPM of \$19.94, which was entered as a positive value in Table 5 since the calculation adds this value. The effect for this adjustment is an increase in premium as additional revenue will be required to cover the anticipated payment. Since the URRT requires the exchange user fee to be listed on an "allowed" basis, the final value included in the URRT was calculated by first taking exchange user fee PMPM of \$19.94 divided by the paid-to-allowed ratio to derive the "allowed" exchange user fee PMPM. This value was then divided by the market adjusted index rate to arrive at the final value of 2.7%.

The index rate was further adjusted by accounting for estimated recoveries from the state-based reinsurance program. Estimated recoveries applied in Table 5 and Section II, Worksheet 1 of the URRT were \$35.17 PMPM and \$45.18 PMPM, respectively. The value entered in the URRT was derived by taking the Table 5 recovery PMPM and dividing by the Paid to Allowed Average Factor, as the calculation of the Market Adjusted Index Rate is done on an allowed claims basis. These values were entered as positive values in Table 5 and the URRT since both calculations subtract these values. The result of this adjustment is a decrease in projected period premium as less revenue will be required due to the anticipated recovery.

The estimated recovery of \$35.17 PMPM was derived using data entered into worksheets I.b, II.a, and II.b of the PA Actuarial Memorandum exhibits. Data entered into worksheet II.a matches the experience period data described in the sections above, and worksheet II.b was populated by referencing the same source of experience captured in worksheet II.a, but with member-level incurred claims trended forward two years to the projection period before allocating the data to each range within the continuance table. An annualized claims trend of 7.76% was applied to estimate the projected member-level claims used to populate worksheet II.b. The projected recovery as a percent of claims is calculated using a per-member attachment of \$60,000, a cap of \$100,000, and a coinsurance rate of 43%, as communicated by the Pennsylvania Insurance Department via the Final Rate Filing Guidance for 2026. The formula in Table 5 (cell C33) calculates the percent of projected paid claims, before pharmacy rebates, that the reinsurance recovery reflects, to align with the data in the continuance table in worksheet II.b.

Total Allowed Claims:

The Market-Adjusted Index Rate is further modified to develop the projected total allowed claims PMPM by adding the projected allowed non-EHB claims PMPM. Benefits that will be offered in excess of EHB requirements include routine foot care, acupuncture, dental anesthesia, diabetes care management, inherited metabolic disorder, treatment for TMJ, and gender affirming care. The projected allowed claims for these benefits is \$1.89 PMPM.

2B. Retention Items

Retention items related to this filing are shown in Table 6 of the PA Actuarial Memorandum Exhibits. Detailed discussions on each item are provided below.

Administrative Expenses:

Administrative costs of 8.9% of premium have been displayed in Table 6 and the URRT. This value has been derived from projected administrative costs for the projection period. These expenses are assumed to be uniform for all plan designs.

Taxes and Fees:

Taxes and Fees are expected to be 0.4% of premium in 2026. This accounts for the projected Federal Income Tax in 2026. Please note that the Risk Adjustment User Fee of \$0.20 PMPM and the projected PCORI Fee of \$0.29 PMPM were included in the Taxes and Fees field in Table 6 and the URRT.

Profit/Contingency:

The projected surplus and risk margin for this company is 1.8% for 2026. This value is listed in both Table 6 and the URRT. The same level of margin is expected for each plan included in this filing.

Projected Loss Ratio

The projected period loss ratio, using the federally-prescribed MLR methodology without the credibility adjustment, is 88.3%, as shown in Worksheet VIII of the PAAM Exhibits.

2C. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization factors for 2025 and 2026 are provided in Table 7 of the PA Actuarial Memorandum Exhibits. 2025 factors have been taken from the prior annual rate filing of the captioned company and market. Detailed discussion on each of the 2026 factors are provided below as well as in Section 5 of this memorandum.

Average Age Factor:

The average age factor was calculated using our projected ACA-related Individual population with the prescribed HHS Age Factors for 2026. It was assumed this represents the age distribution of the entire single risk-pool. The number of members under each age bracket was multiplied by the corresponding HHS Age Factor. These were then summed and divided by the total number of members to obtain the average age factor. For UPMC's entire block of ACA-compliant Individual business, the average age factor is 1.817 and average age is 43.8 for the projected enrollment. This preliminary age factor is then multiplied by an adjustment factor of 0.996, which accounts for the regulation that prohibits charging for more than three children per family, resulting in a final age calibration factor of 1.810. Please see Exhibit 1 in the Supporting Exhibits for the calculation of this factor.

Average Geographic Factor:

The calibration factor of 1.006 was calculated as the weighted average of the geographical factors using projected enrollment for the single risk pool, as shown in Exhibit 2 of the Supporting Exhibits. Please see the Geographic Factors section below for a discussion on the development of factors applied for each rating area.

Average Tobacco Factor:

The average tobacco factor was calculated using projected membership, which is assumed to have the same split for tobacco status as current membership. The member-weighted average of a 2.5% load applied for enrollees who qualify as tobacco users combined with a 0% load for non-tobacco users yields an average tobacco factor of 1.002. The derivation of this factor is shown below.

Tobacco Status	Feb 2025 Enrollment Split	Tobacco Factor	Calibration Factor
Non-User	93.1%	1.000	0.931
User	6.9%	1.025	0.070
Total	100.0%		1.002

Average Benefit Richness:

Benefit richness factors were calculated so that the average value is 1.0 when weighted with projected membership as demonstrated in Table 10 of the PA Actuarial Memorandum Exhibits.

Average Network Factor:

Network factors were calculated so that the average value is 1.0 when weighted with projected membership as demonstrated in Table 10 of the PA Actuarial Memorandum Exhibits. Please see the Network Factors section below for a discussion on the factors applied for each network.

2D. Components of Rate Change

Data to support the calculation of the components of the rate change is presented in Tables 8 and 9 of the PA Actuarial Memorandum Exhibits. Values presented in the 2025 columns have been taken from this company's 2025 annual rate filing.

Section 3 - Plan Rate Development

Table 10 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance to develop 2026 Plan Adjusted Index Rates. The allowable modifiers that are used in rate development are described below.

Plan Actuarial Value:

The AV for each plan was determined by the issuer's own pricing model based on experience from UPMC's Individual Market block of business. This model calculates an AV for a given plan by first trending 2024 allowed claims data forward two years to the projection period, calculating paid amounts for each benefit category based on the benefit design of a given plan and projected allowed claims data, and taking the ratio of the total projected paid claims to projected allowed claims. Since the same tool was used for all plans, this eliminates any impact from morbidity at the plan level, and differing rate increases by product type are purely based on

differences in benefit design for all plans within a given product.

Benefit Richness (Induced Demand)

Benefit richness factors were calculated using the formula $(\text{Plan AV})^2 - (\text{Plan AV}) + 1.24$, where (Plan AV) is equal to the product of the Plan AV described above and, when applicable, the Non-Funding of CSR Adjustment described below on a plan-by-plan basis. This formula was prescribed by the Pennsylvania Insurance Department and has been developed to produce induced demand factors that mimic those determined by HHS. The initial factors calculated using this formula were then normalized against projected membership by plan.

Benefits in addition to EHBs

Benefits that will be offered outside EHB include routine foot care, acupuncture, dental anesthesia, diabetes care management, inherited metabolic disorder, treatment for TMJ, and gender affirming care. The projected allowed claims for these benefits is \$1.89 PMPM. The adjustment factor of 1.002 included in Table 10 has been derived by adding the aforementioned PMPM to the projected index rate for 2026 and dividing this total by the same index rate, causing the adjustment to be applied uniformly to all plans.

Provider Network

Please see the Network Factors section below for a discussion on the development of the provider network factors applied in Table 10.

Catastrophic Eligibility

No adjustments were made for catastrophic plans. Current enrollment is minimal and not credible.

Non-Funding of CSR Adjustment

To account for the elimination of funding for cost-share reduction subsidies, the Pennsylvania Insurance Department has mandated the rates for all silver plans offered both on and off the exchange be increased via the CSR Defunding Adjustment in Table 10 of the Actuarial Memorandum Rate Exhibits. The captioned company will apply a factor of 1.22 as the CSR Defunding Adjustment for 2026. Several off-exchange only silver plans continue to be included for 2026 to minimize disruption to non-subsidized members enrolled in silver plans.

[REDACTED]

We are in the process of determining the best approach to estimate the PY 2024 liability associated with CSR reimbursement that would have been received from the federal government under the original CSR funding arrangement of the ACA, in response to the Bulletin issued by CMS on May 2, 2025, and the email guidance from the Department that followed. Additionally, we are still considering the potential implications on rate sufficiency of a scenario in which Congress reinstates CSR funding for PY 2026; we note that the CSR load is likely to be removed entirely, but the aggregate rate change may be impacted in either direction as a result of the many other dynamic market factors influencing a market that, in that instance, would be suddenly reoriented

after seven years of Silver loading. We intend to work with the Department to address and communicate these considerations in advance of the June 2, 2025 deadline established during the Department conference call on May 12, 2025.

Total Projected Lives

Typically we would equate the total projected lives in column W of worksheet III Plan Rates with the current enrollment in column V. For 2026, we anticipate a decrease in enrollment as a result of the expiration of enhanced federal Premium Tax Credits, and have decreased the projected enrollment accordingly. The reduced projected enrollment was allocated across plan and age projections proportionally, reflecting that we do not have any reason to believe the average age or AV will be different as a result of this membership decline.

Section 4 - Plan Premium Development for 21-Year-Old Non-Tobacco User

Table 11 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance. 2026 rates calculated in this table were tested to ensure that they match those included in the PA Plan Design Summary and Rate Tables, Federal Rates Template, and the binder.

Section 5 - Plan Factors

5A. Age and Tobacco Factors

As indicated in Table 12 of the PA Actuarial Memorandum Exhibits, the default federal standard age curve for 2026 is used in the development of the Consumer Adjusted Premium Rates. A tobacco load of 2.5% will be used for all 21-and-over age bands in the Individual market in 2026. This load has not changed from 2025.

5B. Geographic Factors

The geographic rating areas used within this filing are the same as those defined by the state. For 2026, the proposed geographic factors incorporate analysis based on studying past claim patterns. As a result, the proposed premium factor for Rating Area 5 has been revised from its values in the 2025 filing. The table below displays the current and proposed factors:

Region	2025	2026
1	0.966	0.966
5	1.011	1.042

The proposed factors acknowledge the cost differentials across regions relative to one another after accounting for age, benefit level, and morbidity. Please see Exhibit 12 of the Supporting Exhibits for an illustration of this change.

Table 13 has been completed such that the loss ratios produced in column S are adjusted for Risk Adjustment and Reinsurance. Based on the best information we have at the time of submission, the earned premium in column R includes the 2024 Risk Adjustment allocable to each Rating Area, and the incurred claims in column Q include the 2024 state reinsurance program receipt allocable to each rating area.

5C. Network Factors

Since only one network is included in this filing, no network adjustments were deemed necessary for 2026.

5D. Rate Change Summary

Table 15 of the PA Actuarial Memorandum Exhibits has been populated as described in state guidance.

5E. Service Area Composition

Table 13 of the PA Actuarial Memorandum Exhibits shows the areas in which plans will be offered in 2026. Service area maps for 2025 and 2026 have been uploaded in the Supporting Documentation section in SERFF.

5F. Composite Rating

No composite rating is used with these plans.

5G. Connectivity Factors

Connectivity features are not available under these plans.

Section 6 - Additional Tabs in the PAAM Exhibits

6A. VII Risk Adjustment

For the initial rate filing submission of this market dated May 15, 2025, Tables 16, 16A, and 16B are populated from a variety of sources. When available, we rely on data provided by the Department on May 7, 2025 regarding the 2024 total Risk Adjustment transfer and its properties. Because UPMC participates in market-wide analysis through Wakely Consulting, we have used information from their WNRAR reporting to estimate plan level risk metrics as illustrated in Tables 16A and 16B. After CMS releases the Summary Report on Individual and Small Group Risk Adjustment Transfers for the 2024 Benefit Year, which is anticipated to be available June 30, 2025, the detailed information in the accompanying TPIR reports can be used to populate Tables 16A and 16B, and we intend to do so for the scheduled re-submission of this rate filing on July 17, 2025.

The calculated BEP Risk Adjustment Transfer in Table 16 will not exactly match the actual 2024 transfer as a result of the estimated nature of the preliminary plan specific reporting in Table 16A in the absence of the detail

in the TPIR reports. As noted in Section 2 of this memorandum, Supporting Exhibit 9 comprehensively itemizes the components of UPMC's projected period risk transfer and illustrates the sequential development of that transfer beginning with the 2024 BY experience period transfer.

6B. VIII MLR and Rebate Calc

This exhibit is populated using data from our prior year MLR Rebate submission for the first two years (2022 and 2023), our current estimate of the data that will be submitted for the experience period (2024), and projected information for the following two years (2025 and 2026).

The estimate for 2025 is derived in part from information from both the current 2026 rate filing and the 2025 rate filing for the Individual market. Projected allowed claims are calculated by using PY 2024 data with two months of runout, applying 1 year of annualized trend, and applying the current adjustment factors for known changes in enrollment (not including the current morbidity adjustment, as that is not applicable to 2025). The 2025 average AV for that entity is applied to calculate paid claims. Premium is calculated based on the market-wide current enrollment as of February 15, 2025, annualized.

The estimate for 2026 is derived from the corresponding market-wide information in the other PAAM exhibits of this rate filing, when applicable.

6C. IX Retrospective Analysis

Table 17-1 is populated with the corresponding information from Table 4 in this company and market's prior year rate filing. Table 17-2 is populated with information from Table 5 in this company and market's rate filing two years ago, which projected the paid claims, pharmacy rebates, risk adjustment, and reinsurance (where applicable) for the year which is now used as the experience period for the current filing.

6D. X Drug Data

This exhibit was populated in collaboration with our Pharmacy Benefit Manager using data from their organization. Columns E-I represent data for UPMC's Individual market as a whole. Insurer pay represents UPMC's liability before member cost sharing, and specialty pharmacies are included in Mail.

Section 7 - Reference Information and Certification

URRT Warning Alerts

Several warning messages appear after clicking the validate button in the URRT. These messages highlight the fact that several terminated or renewing plans have entries of zero in the current enrollment and premium PMPM fields on worksheet 2 of the URRT. Similar messages have appeared in the URRT in prior years across UPMC companies for similar reasons.

SERFF Rate / Rule Schedule Tables

In accordance with PID guidance, the SERFF Rate/Rule Schedule Tab of this rate filing contains the proposed

premium rates for all proposed plans, and Excel versions of the Federal Rates Template and the PA Plan Design Summary and Rate Tables.

The Company Rate Information and Rate Review Detail is complete and accurate. Current premiums are consistent with our enrollment as of February 15, 2025. The rate change data presented is consistent with Table 11 and the number of policyholders affected is populated using the total covered lives shown in Table 10 cell V15. The total requested rate change entered is consistent with Cell AN13 of Table 11.

Standard Questions

Per PID ACA Rate Filing Final Guidance issued on April 10, 2025, the Standard Questions to be included with the initial filing are enclosed with this rate filing in a separate document under the Supporting Documentation tab in SERFF.

Reliance

Below is a summary of the information that we have relied on as part of rate development.

Source	Type of Information	Comments
██████████, Sr. Director, Commercial Products	Projected administrative expenses, projected quality and provider incentive liabilities	I have not performed any independent audit or otherwise verified the accuracy of this data/information.
████████████████████, Vice President, Risk Revenue Operations	Projected period Risk Adjustment transfer	I have not performed any independent audit or otherwise verified the accuracy of this data/information.
██████████, Sr. Manager, Pharmacy Analytics	Pharmacy Rebate Reporting and Projections	I have not performed any independent audit or otherwise verified the accuracy of this data/information.
██████████, Director, Financial Reporting	MLR Rebate Reporting and MLR Rebate Improving HCQ Expense Projections	I have not performed any independent audit or otherwise verified the accuracy of this data/information.

List of Supporting Exhibits

Supporting exhibits have been included with the rate filing to assist with the review process. Below is a list summarizing the contents of each exhibit.

- Exhibit 1: Derivation of Age Calibration Factor
- Exhibit 2: Derivation of Geographical Calibration Factor
- Exhibit 3: Current/Projected Commissions by OEP and SEP
- Exhibit 4: Derivation of 3-Child Cap Adjustment Factor
- Exhibit 5: Derivation of Change in Demographics Factor
- Exhibit 6: Derivation of Change in Benefits Factor
- Exhibit 7: Derivation of Change in Network Factor
- Exhibit 8: Derivation of Change in Other Factor
- Exhibit 9: Derivation of Projected Risk Adjustment PMPM
- Exhibit 9a: Risk Transfer Adjustment Support
- Exhibit 10: Projected Administrative Expense Load Development
- Exhibit 11: Derivation of Projected Taxes and Fees
- Exhibit 12: Derivation of Geographic Rating Factor Changes
- Exhibit 13: Derivation of Change in Morbidity Factor

Actuarial Certification

I, [REDACTED], am a Member of the American Academy of Actuaries in good standing. I am currently Manager for ACA products in the Actuarial Services department for UPMC Health Plan. I certify that:

- All factor, benefit and other changes from the prior approved filing have been disclosed in this actuarial memorandum.
- New plans cannot be considered modifications of existing plans under the uniform modification standards in 45 CFR § 147.106.
- The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2026 Rate Filing Justification.
- The projected Index Rate is:
 - a. In compliance with all applicable state and Federal statutes and regulations (45 CFR § 156.80 and § 147.102)
 - b. Developed in compliance with the applicable Actuarial Standards of Practice
 - c. Reasonable in relation to the benefits provided and the population anticipated to be covered
 - d. Neither excessive nor deficient
- The Index Rate and only the allowable modifiers as described in 45 CFR § 156.80(d)(1) and § 156.80(d)(2) were used to generate plan level rates.
- The geographic rating factors reflect only differences in the costs of delivery and do not include differences for population morbidity by geographic area.
- The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I URRT for all plans except those specified in the certification.

5/15/2025

Date

UPMC Health Plan

PA Rate Template Part II
Rate Development and Change

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026

Table 5. Development of the Projected Index Rate, Market-Adjusted Index Rate, and Total Allowed Claims

Development of the Projected Index Rate	Actual Experience Data	Manual Data
Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates) PMPM	\$ 852.74	\$ 610.64
Two year trend projection factor	1.161	1.161
Unadjusted Projected Allowed EHB Claims PMPM	\$ 990.18	\$ 709.06
<u>Single Risk Pool Adjustment Factors</u>		
Change in Morbidity - Impact of Reinsurance Program	1.000	1.000
Change in Morbidity - All Other	1.000	1.018
Total Non-Morbidity Changes	1.000	1.055
Change in Demographics	1.000	1.010
Change in Network	1.000	1.398
Change in Benefits	1.000	0.979
Change in Other	1.000	0.980
Total Adjusted Projected Allowed EHB Claims PMPM	\$ 990.18	\$ 977.84
Credibility Factors	8%	100%
Blended Projected EHB Claims PMPM		\$ 977.84
<u>Development of the Market-Adjusted Index Rate and Total Allowed Claims</u>		
Adjusted Projected Allowed EHB Claims PMPM	\$ 977.84	< Index Rate for Projection Period on URRT
Projected Paid to Allowed Ratio	8.979	
Projected Incurred EHB Claims PMPM	\$ 763.11	
Market-wide Adjustments		
Projected Incurred Risk Adjustment PMPM	\$ (23.76)	
Projected Incurred Exchange User Fees PMPM	\$ 513.94	
Projected Incurred Reinsurance Recoveries PMPM	\$ 535.17	
Market-Adjusted Projected Incurred EHB Claims PMPM	\$ 748.86	
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 961.83	< Market-Adjusted Index Rate
Projected Allowed Non-EHB Claims PMPM	\$ 1.89	
Catastrophic Eligibility Adjustment	1.000	
Market-Adjusted Projected Incurred Total Claims PMPM	\$ 750.3361885	
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 963.72	

Table 6. Retention

Retention Items - Express in percentages	Percentages	PMPM Amounts
Administrative Expenses	8.50%	\$75.61
General and Claims	6.47%	\$54.68
Agent/Broker Fees and Commissions	0.88%	\$7.49
Quality Improvement Initiatives	1.60%	\$13.48
Taxes and Fees	0.44%	\$3.68
Risk Adjustment User Fee	0.02%	\$0.20
PCORI Fee	0.02%	\$0.20
PA Premium & Other Taxes (if applicable)	0.00%	\$0.00
Federal Income Tax	0.38%	\$3.19
Health Insurance Providers Fee (Prorated for Small Groups only)	0.00%	\$0.00
Profit/Contingency (after tax)	1.80%	\$15.21
Total Retention	11.19%	\$94.50
Projected Required Revenue PMPM		\$ 844.84

Table 8. Components of Rate Change

Rate Components	2025	2026	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$ 406.19	\$ 464.91	\$ 58.81	14.5%
B. Base period allowed claims before normalization	\$ 582.67	\$ 610.64	\$ 27.96	6.9%
C. Normalization factor component of change	\$ (265.80)	\$ (275.79)	\$ (10.15)	-2.5%
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 317.07	\$ 334.85	\$ 17.78	4.4%
D2. URRT Trend	\$ 41.78	\$ 53.97	\$ 12.19	3.0%
D3. URRT Morbidity	\$ -	\$ 6.96	\$ 6.96	1.7%
D4. URRT Other	\$ 116.99	\$ 140.43	\$ 23.50	5.8%
D5. Normalized URRT Risk Adjustment on an allowed basis	\$ 6.92	\$ 1.94	\$ (4.98)	-1.2%
D6. Normalized Exchange User Fee on an allowed basis	\$ 12.52	\$ 14.09	\$ 1.53	0.4%
D7. Normalized Reinsurance Recoveries on an allowed basis	\$ (28.89)	\$ (24.77)	\$ 4.11	1.0%
D8. Subtotal - Sum(D1-D7)	\$ 466.33	\$ 527.43	\$ 61.10	15.0%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ -	\$ -	\$ -	0.0%
E2. Pricing AV	\$ (82.88)	\$ (116.77)	\$ (33.90)	-8.3%
E3. Benefit Richness	\$ (0.00)	\$ 0.00	\$ 0.01	0.0%
E4. Catastrophic Eligibility	\$ -	\$ -	\$ -	0.0%
E5. Benefits in Addition to EHB	\$ 0.62	\$ 0.80	\$ 0.17	0.0%
E6. Subtotal - Sum(E1-E5)	\$ (82.26)	\$ (115.97)	\$ (33.71)	-8.3%
F. Change in Retention Components				
F1. Administrative Expenses	\$ 39.61	\$ 41.61	\$ 2.00	0.5%
F2. Taxes and Fees	\$ 1.94	\$ 2.03	\$ 0.08	0.0%
F3. Profit and/or Contingency	\$ 8.12	\$ 8.37	\$ 0.25	0.1%
F4. Subtotal - Sum(F1-F3)	\$ 49.67	\$ 52.00	\$ 2.33	0.6%
G. Change in Miscellaneous Items	\$ -	\$ -	\$ -	0.0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 433.75	\$ 463.46	\$ 29.71	7.3%

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 630.64	< Index Rate of Experience Period on URRT
Blended Earned Premium	\$ 715,222,370.73	
Blended Loss Ratio	82.27%	

Table 5A. Small Group Projected Index Rate with Quarterly Trend

Effective Date	1/1/2026	4/1/2026	7/1/2026	10/1/2026	Total Single Risk Pool
# of Member Months Renewing in Quarter					
Adjusted Projected Allowed EHB Claims PMPM	\$ 977.84	\$ 977.84	\$ 977.84	\$ 977.84	\$ 977.84
Months of Trend	-	3	6	9	
Annual Trend					
Single Risk Pool Projected Allowed Claims	\$ 977.84	\$ 977.84	\$ 977.84	\$ 977.84	\$ -
Quarterly Trend Factor	1.000	1.000	1.000	1.000	0.000

Table 5B. Exchange User Fee Calculation

Exchange User Fee Percentage	5.0%
Expected On-Exchange Enrollment Percentage	79%
Projected Required Revenue PMPM	\$ 844.84
Adjustment for Catastrophic Eligibility and Benefits in Addition to EHB (if applicable)	1.000
Projected Incurred Exchange User Fee PMPM	\$ 10.94

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2025	2026
Average Age Factor	1.832	1.810
Average Geographic Factor	0.990	1.006
Average Tobacco Factor	1.003	1.003
Average Benefit Richness (induced demand)	1.000	1.000
Average Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 858.38	\$ 963.72
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 467.11	\$ 528.47

Table 9. Year-over-Year Data to Support Table 8

	2025	2026	
Paid-to-Allowed	0.785	0.775	
URRT Trend (Total Applied Trend Factor)	1.133	1.165	< URRT W1, S2
URRT Morbidity	1.000	1.018	< URRT W1, S2
URRT "Other"	1.326	1.355	
Risk Adjustment	\$ 9.88	\$ 2.76	< URRT W1, S3
Exchange User Fee	\$ 18.05	\$ 19.94	< URRT W1, S3
Reinsurance Recoveries	\$ 41.66	\$ 35.17	< URRT W1, S2
Capitation	\$ -	\$ -	
Network	1.000	1.000	< For 2025 in cell J81, please include a factor equal to the product of the average Pricing AV and the Non-Funding of CSR Adjustment
Pricing AV	0.822	0.779	
Benefit Richness	1.000	1.000	
Catastrophic Eligibility	1.000	1.000	
Benefits in Addition to EHB	1.002	1.002	
Administrative Expenses	9.76%	8.96%	
Taxes and Fees	0.48%	0.44%	
Profit and/or Contingency	2.00%	1.80%	

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026
Base Period Start Date	1/1/2024
Date of Most Recent Membership:	2/1/2025
Market Adjusted Index Rate:	\$ 961.83

Total Covered Lives @ 02-01-2025	2,013
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Category	% of Total Coursework Hours
1. General Education	30.00%
2. Major Requirements	45.00%
3. Electives	25.00%

Q3 Q1-2025 Number of Covered Lines by Rating Area										2025 Compliance/ Discrimination Index Indicator	De Minimis Check
1	2	3	4	5	6	7	8	9	Total		
100	-	-	-	1,015	-	-	-	-	1,015		
									(0)		
38				105					178	1	N/A
109				105					124	1	
123				141					264	1	
37				78					105	2	
10				51					122	1	
14				51					95	1	
105				1					107	2	
									(0)		

Table 11. Plan Premium Development for 21-Year-Old Non-Tobacco User

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026

Plan Number	HIOS Plan ID (Standard Component)	1/1/2025 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2026	1/1/2026 Plan HIOS Plan ID (If 1/1/2025 Plan Discontinued & Mapped)	Metallic Tier	Exchange On/Off or Off
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Totals	These cells auto-fill using the data entered in Table 10.									
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Plan 1	62560PA0010122	ge Bronze \$6,700/\$0 - Sta	DM	52899PA0030135	Bronze	On/Off
Plan 2	62560PA0010123	Catastrophic \$10,600/\$0 -	DM	52899PA0030136	Catastrophic	On/Off
Plan 3	62560PA0010116	ge Gold \$1,000/\$20 - Sta	DM	52899PA0030129	Gold	On/Off
Plan 4	62560PA0010124	ge Gold HSA \$3,000/20% - S	DM	52899PA0030130	Gold	On/Off
Plan 5	62560PA0010117	ge Silver \$7,000/\$45 - Sta	DM	52899PA0030133	Silver	On/Off
Plan 6	62560PA0010125	ge Silver \$2,600/\$50 - Sta	DM	52899PA0030131	Silver	On/Off
Plan 7	62560PA0010118	ge Silver \$3,500/\$50 - Sta	DM	52899PA0030132	Silver	Off
Plan 8	62560PA0010120	Silver HSA \$4,000/30% -	DM	52899PA0030134	Silver	Off
Plan 9	0	0	0	0	0	0
Plan 10	0	0	0	0	0	0
Plan 11	0	0	0	0	0	0
Plan 12	0	0	0	0	0	0
Plan 13	0	0	0	0	0	0
Plan 14	0	0	0	0	0	0
Plan 15	0	0	0	0	0	0
Plan 16	0	0	0	0	0	0
Plan 17	0	0	0	0	0	0
Plan 18	0	0	0	0	0	0
Plan 19	0	0	0	0	0	0
Plan 20	0	0	0	0	0	0
Plan 21	0	0	0	0	0	0
Plan 22	0	0	0	0	0	0
Plan 23	0	0	0	0	0	0
Plan 24	0	0	0	0	0	0
Plan 25	0	0	0	0	0	0
Plan 26	0	0	0	0	0	0
Plan 27	0	0	0	0	0	0
Plan 28	0	0	0	0	0	0
Plan 29	0	0	0	0	0	0
Plan 30	0	0	0	0	0	0
Plan 31	0	0	0	0	0	0
Plan 32	0	0	0	0	0	0
Plan 33	0	0	0	0	0	0
Plan 34	0	0	0	0	0	0
Plan 35	0	0	0	0	0	0
Plan 36	0	0	0	0	0	0
Plan 37	0	0	0	0	0	0
Plan 38	0	0	0	0	0	0
Plan 39	0	0	0	0	0	0
Plan 40	0	0	0	0	0	0
Plan 41	0	0	0	0	0	0
Plan 42	0	0	0	0	0	0
Plan 43	0	0	0	0	0	0
Plan 44	0	0	0	0	0	0
Plan 45	0	0	0	0	0	0
Plan 46	0	0	0	0	0	0
Plan 47	0	0	0	0	0	0
Plan 48	0	0	0	0	0	0
Plan 49	0	0	0	0	0	0
Plan 50	0	0	0	0	0	0
Plan 51	0	0	0	0	0	0
Plan 52	0	0	0	0	0	0
Plan 53	0	0	0	0	0	0
Plan 54	0	0	0	0	0	0
Plan 55	0	0	0	0	0	0
Plan 56	0	0	0	0	0	0
Plan 57	0	0	0	0	0	0
Plan 58	0	0	0	0	0	0
Plan 59	0	0	0	0	0	0
Plan 60	0	0	0	0	0	0
Plan 61	0	0	0	0	0	0

2025 21-year-old, Non-Tobacco Premium PMPM								
								Average (weighted by enrollment by rating area)
1	2	3	4	5	6	7	8	9

\$ 391.57	\$ -	\$ -	\$ -	\$ 411.43	\$ -	\$ -	\$ -	\$ -	\$ 401.94
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[illegible]

2026 21-year-old, Non-T				
1	2	3	4	5

\$ 447.64	\$ -	\$ -	\$ -	\$ 485.76
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[illegible]

[illegible][illegible][illegible]

PA Rate Quarterly Template Part V Consumer Factors

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026

Table 12. Age and Tobacco Factors

Projection Period Age and Tobacco Factors						
Age Band	Age Factor	Tobacco Factor		Age Band	Age Factor	Tobacco Factor
0-14	0.765			40	1.278	1.025
15	0.833			41	1.302	1.025
16	0.859			42	1.325	1.025
17	0.885			43	1.357	1.025
18	0.913			44	1.397	1.025
19	0.941			45	1.444	1.025
20	0.970			46	1.500	1.025
21	1.000	1.025		47	1.563	1.025
22	1.000	1.025		48	1.635	1.025
23	1.000	1.025		49	1.706	1.025
24	1.000	1.025		50	1.786	1.025
25	1.004	1.025		51	1.865	1.025
26	1.024	1.025		52	1.952	1.025
27	1.048	1.025		53	2.040	1.025
28	1.087	1.025		54	2.135	1.025
29	1.119	1.025		55	2.230	1.025
30	1.135	1.025		56	2.333	1.025
31	1.159	1.025		57	2.437	1.025
32	1.183	1.025		58	2.548	1.025
33	1.198	1.025		59	2.603	1.025
34	1.214	1.025		60	2.714	1.025
35	1.222	1.025		61	2.810	1.025
36	1.230	1.025		62	2.873	1.025
37	1.238	1.025		63	2.952	1.025
38	1.246	1.025		64+	3.000	1.025
39	1.262	1.025				

*PA follows the federal default age curve.

Table 13. Geographic Factors and Adjusted Loss Ratios

[illegible]

Table 14. Network Factors

[illegible]

PA Rate Template Part VI - Rate Change Summary

Table 15. Rate Change Summary Information

Overview

Initial Requested Average Rate Change:	0.162767118
Revised Requested Average Rate Change:	16.28%
Minimum Requested Rate Change:	3.96%
Maximum Requested Rate Change:	21.50%
Mapped Members:	2,013
Available in Rating Areas:	Rating Areas 1 and 5

Key Information

Jan. 2024 - Dec. 2024 Financial Experience	
Premium	\$ 19,805,808.63
Claims	\$ 16,495,040.49
Administrative Expenses	\$ 1,335,605.96
Taxes & Fees	\$ 686,875.25
Company Made After Taxes	\$ 1,288,286.92

The company expects its annual medical costs to increase: 7.76%

Explanation of requested rate change: Increases in medical and pharmacy cost and utilization.

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026

How It Plans to Spend Your Premium

This is how the company plans to spend the premium it collects in 2026:

Claims:	86%
Administrative Expenses:	9%
Taxes & Fees:	3%
Profit:	2%

Rating Area	Active Rating Areas	Count of Remaining Active Rating Areas	Text
1	1	1	2 1
2			1
3			1
4			1
5	5	5	1 and 5
6			0
7			0
8			0
9			0

MLR and Rebate Calculation

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026
Historical Claims as-of Date	

Line Description	Health Insurance Coverage Total	Health Insurance Coverage 2022	Health Insurance Coverage 2023	Health Insurance Coverage 2024	Health Insurance Coverage Projections 2025	Health Insurance Coverage Projections 2026
1. Medical Loss Ratio Numerator						
1.2 Adjusted incurred claims	\$51,850,603	\$18,130,543	\$16,888,824	\$16,831,237	\$16,381,001	\$20,506,209
1.3 Improving Health Care Quality Expenses	\$259,452	\$66,508	\$93,581	\$99,363	\$101,052	\$102,800
1.4 Reconciled payments of cost-sharing reductions	\$0	\$0	\$0	\$0	\$0	\$0
1.5 Federal Transitional Reinsurance Program payments from HHS	\$0	\$0	\$0	\$0	\$0	\$0
1.6 Federal Risk Adjustment Program net payments expected from HHS / (charges payable to HHS)	\$2,296,588	\$605,096	\$755,330	\$936,162	(\$121,865)	(\$63,491)
1.8 Shared Savings payments to enrollees	\$0	\$0	\$0	\$0	\$0	\$0
1.9 MLR numerator	\$49,813,466	\$17,591,955	\$16,227,074	\$15,994,437	\$16,603,918	\$20,672,501
2. Medical Loss Ratio Denominator						
2.1 Premium earned including Federal and State high risk programs and adjusted for net premium stabilization program payments / (charges)	\$57,000,399	\$19,766,051	\$18,364,701	\$18,869,647	\$18,549,149	\$23,986,214
2.2 Federal and State taxes and licensing or regulatory fees	\$1,115,591	(\$176,238)	\$427,017	\$864,812	\$88,736	\$543,523
2.3 MLR Denominator (Lines 2.1 - 2.2)	\$55,884,808	\$19,942,290	\$17,937,684	\$18,004,834	\$18,460,413	\$23,442,691
3. Credibility Adjustment						
3.1 Life-years	6,450	2,288	2,103	2,060	2,013	1,917
3.2 Base credibility factor	3.4%					
3.3 Average deductible	\$0					
3.4 Deductible factor	1.000					
3.5 Credibility adjustment (Lines 3.2 x 3.4 (do not round))	3.4%					
4. MLR Calculation (for issuers with at least 1,000 life years in the Total column of Line 3.1)						
4.1 Preliminary MLR (Lines 1.9 / 2.3)	89.1%	88.2%	90.5%	88.8%	89.9%	88.2%
4.2 Credibility adjustment (Line 3.5, if applicable)	3.4%					
4.3 Credibility-adjusted MLR (Lines 4.1 + 4.2)	92.5%					
5. Rebate Calculation						
5.1 MLR standard	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%
5.2 Credibility-adjusted MLR (Line 4.3)	92.5%					
5.3 Adjusted earned premium (Lines 2.1 - 2.2 CY)	\$18,004,834					
5.4 Rebate amount if credibility-adjusted MLR is less than MLR standard (Lines (5.1 - 5.2) x 5.3)	\$0.00					

Table 1 - Base Credibility Adjustment Factors	
Life Years	Base credibility factor
-	0.0%
1,000	8.3%
2,500	5.2%
5,000	3.7%
10,000	2.6%
25,000	1.6%
50,000	1.2%
75,000	0.0%

Table 2 - Deductible Factors	
Average Health Plan Deductible	Deductible factor
\$0	1.000
\$2,500	1.164
\$5,000	1.402
\$10,000	1.736

Table 17-1. Projected Historical Experience from the Plan Year 2025 Filing

Month-Year	Total Annual Premium	Ultimate Incurred Claims	Members	Prescription Drug Rebates**	Variance (\$) - Premium	Variance (%) - Premium	Variance (\$) - Claims	Variance (%) - Claims	Variance (\$) - Drug Rebates	Variance (%) - Drug Rebates
Jan-21		\$ 1,558,954.81	2,933	(\$139,757)						
Feb-21		\$ 1,740,318.08	2,928	(\$139,519)						
Mar-21		\$ 2,163,732.81	2,884	(\$137,423)						
Apr-21		\$ 2,147,280.90	2,869	(\$136,708)						
May-21		\$ 2,131,063.26	2,859	(\$136,231)						
Jun-21		\$ 2,027,815.63	2,849	(\$135,755)						
Jul-21		\$ 1,632,563.20	2,875	(\$136,994)						
Aug-21		\$ 2,204,793.73	2,909	(\$138,614)						
Sep-21		\$ 2,034,253.67	2,917	(\$138,995)						
Oct-21		\$ 2,178,782.55	2,922	(\$139,233)						
Nov-21		\$ 2,318,689.44	2,913	(\$138,804)						
Dec-21	\$24,397,027	\$ 3,207,548.59	2,870	(\$136,756)	\$ -	0.0%	\$ (48,315.57)	-0.2%	\$ 77.45	0.0%
Jan-22		\$ 1,575,041.26	2,486	(\$131,758)						
Feb-22		\$ 1,616,014.96	2,437	(\$129,161)						
Mar-22		\$ 2,056,485.72	2,386	(\$126,458)						
Apr-22		\$ 2,489,535.86	2,336	(\$123,808)						
May-22		\$ 1,617,571.85	2,311	(\$122,483)						
Jun-22		\$ 1,744,665.06	2,289	(\$121,317)						
Jul-22		\$ 1,550,603.41	2,262	(\$119,886)						
Aug-22		\$ 1,787,982.09	2,249	(\$119,197)						
Sep-22		\$ 1,727,553.55	2,214	(\$117,342)						
Oct-22		\$ 1,838,296.60	2,190	(\$116,070)						
Nov-22		\$ 2,319,022.98	2,156	(\$114,268)						
Dec-22	\$19,766,051	\$ 1,512,520.33	2,134	(\$113,102)	\$ -	0.0%	\$ (18,650.72)	-0.1%	\$ 20.94	0.0%
Jan-23		\$ 1,460,734.33	2,182	(\$146,630)						
Feb-23		\$ 2,800,261.59	2,195	(\$147,504)						
Mar-23		\$ 1,615,633.17	2,155	(\$144,816)						
Apr-23		\$ 1,221,417.91	2,110	(\$141,792)						
May-23		\$ 1,607,084.68	2,095	(\$140,784)						
Jun-23		\$ 1,713,399.20	2,087	(\$140,246)						
Jul-23		\$ 1,545,733.23	2,085	(\$140,112)						
Aug-23		\$ 1,341,288.01	2,069	(\$139,037)						
Sep-23		\$ 1,383,709.63	2,084	(\$140,045)						
Oct-23		\$ 1,723,096.55	2,070	(\$139,104)						
Nov-23		\$ 1,695,641.38	2,056	(\$138,163)						
Dec-23	\$18,366,454	\$ 1,680,533.83	2,046	(\$137,491)	\$ (3,020.04)	0.0%	\$ (151,351.67)	-0.8%	\$ (106,727.08)	6.3%

Table 17-2. Assessment of Actual to Projected for Paid Claims, Risk Adjustment, and Reinsurance

Plan Year	Category	Projected PMPM *	Actual PMPM	Variance
2024	Ultimate Incurred Claims	\$ 713	\$ 784	\$ (71)
	Drug Rebates	\$ (71)	\$ (80)	\$ 9
	Risk Adjustment	\$ (22)	\$ 38	\$ (60)
	Reinsurance	\$ 28	\$ 36	\$ (9)
	TOTAL	\$ 707	\$ 710	\$ (2)

* Projected PMPMs should come from PY24 filing.

Service Category	2002	2003	2004	2005	2006
Administrative Services	2,400	2,400	2,400	2,400	2,400
Construction Services	2,400	2,400	2,400	2,400	2,400
Engineering Services	2,400	2,400	2,400	2,400	2,400
Environmental Services	2,400	2,400	2,400	2,400	2,400
Financial Services	2,400	2,400	2,400	2,400	2,400
Health Services	2,400	2,400	2,400	2,400	2,400
Information Services	2,400	2,400	2,400	2,400	2,400
Legal Services	2,400	2,400	2,400	2,400	2,400
Manufacturing Services	2,400	2,400	2,400	2,400	2,400
Medical Services	2,400	2,400	2,400	2,400	2,400
Other Services	2,400	2,400	2,400	2,400	2,400
Public Services	2,400	2,400	2,400	2,400	2,400
Real Estate Services	2,400	2,400	2,400	2,400	2,400
Security Services	2,400	2,400	2,400	2,400	2,400
Transportation Services	2,400	2,400	2,400	2,400	2,400
Utilities Services	2,400	2,400	2,400	2,400	2,400
Waste Management Services	2,400	2,400	2,400	2,400	2,400
Wholesale Services	2,400	2,400	2,400	2,400	2,400
Other Services	2,400	2,400	2,400	2,400	2,400
Total	2,400	2,400	2,400	2,400	2,400

* Express Completion Factor as a percentage

PA Rate Template Part II
Rate Development and Change

Carrier Name: UPMC Health Plan, Inc.
Product(s): HMO
Market Segment: Individual
Rate Effective Date: 1/1/2026

Table 5. Development of the Projected Index Rate, Market-Adjusted Index Rate, and Total Allowed Claims

Development of the Projected Index Rate	Actual Experience Data	Manual Data
Total Allowed EHB Claims + EHB Capitation PMPM (net of prescription drug rebates) PMPM	\$ 852.74	\$ 610.64
Two year trend projection factor	1.161	1.161
Unadjusted Projected Allowed EHB Claims PMPM	\$ 990.18	\$ 709.06
<u>Single Risk Pool Adjustment Factors</u>		
Change in Morbidity - Impact of Reinsurance Program	1.000	1.000
Change in Morbidity - All Other	1.000	1.000
Total Non-Morbidity Changes	1.000	1.000
Change in Demographics	1.000	1.010
Change in Network	1.000	1.398
Change in Benefits	1.000	0.979
Change in Other	1.000	0.980
Total Adjusted Projected Allowed EHB Claims PMPM	\$ 990.18	\$ 960.35
Credibility Factors	8%	100%
Blended Projected EHB Claims PMPM	\$ 960.35	\$ 960.35
<u>Development of the Market-Adjusted Index Rate and Total Allowed Claims</u>		
Adjusted Projected Allowed EHB Claims PMPM	\$ 960.35	
Projected Paid to Allowed Ratio	89.77%	
Projected Incurred EHB Claims PMPM	\$ 747.71	
Market-wide Adjustments		
Projected Incurred Risk Adjustment PMPM	\$ (2.76)	
Projected Incurred Exchange User Fees PMPM	\$ 529.60	
Projected Incurred Reinsurance Recoveries PMPM	\$ 534.55	
Market-Adjusted Projected Incurred EHB Claims PMPM	\$ 735.54	
Market-Adjusted Projected Allowed EHB Claims PMPM	\$ 944.70	
Projected Allowed Non-EHB Claims PMPM	\$ 1.89	
Catastrophic Eligibility Adjustment	1.000	
Market-Adjusted Projected Incurred Total Claims PMPM	\$ 736.9930481	
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 946.56	

Table 6. Retention

Retention Items - Express in percentages	Percentages	PMPM Amounts
Administrative Expenses	9.00%	\$74.71
General and Claims	6.48%	\$53.78
Agent/Broker Fees and Commissions	0.90%	\$7.49
Quality Improvement Initiatives	1.60%	\$13.48
Taxes and Fees	0.44%	\$3.63
Risk Adjustment User Fee	0.02%	\$0.20
PCORI Fee	0.02%	\$0.20
PA Premium & Other Taxes (if applicable)	0.00%	\$0.00
Federal Income Tax	0.38%	\$3.14
Health Insurance Providers Fee (Prorated for Small Groups only)	0.00%	\$0.00
Profit/Contingency (after tax)	1.80%	\$14.95
Total Retention	11.24%	\$93.29
Projected Required Revenue PMPM		\$ 830.28

Table 8. Components of Rate Change

Rate Components	2025	2026	Difference	Percent Change
A. Calibrated Plan Adjusted Index Rate (PMPM)	\$ 406.19	\$ 456.86	\$ 50.77	12.5%
B. Base period allowed claims before normalization	\$ 582.67	\$ 610.64	\$ 27.96	6.9%
C. Normalization factor component of change	\$ (265.80)	\$ (275.80)	\$ (10.00)	-2.5%
D. Change in Normalized Allowed Claims Adjustment Components				
D1. Base period allowed claims after normalization	\$ 317.07	\$ 334.84	\$ 17.76	4.4%
D2. URRT Trend	\$ 41.78	\$ 53.97	\$ 12.19	3.0%
D3. URRT Morbidity	\$ -	\$ -	\$ -	0.0%
D4. URRT Other	\$ 116.99	\$ 137.79	\$ 20.87	5.1%
D5. Normalized URRT Risk Adjustment on an allowed basis	\$ 6.92	\$ 1.94	\$ (4.98)	-1.2%
D6. Normalized Exchange User Fee on an allowed basis	\$ 12.52	\$ 13.80	\$ 1.29	0.3%
D7. Normalized Reinsurance Recoveries on an allowed basis	\$ (28.89)	\$ (24.30)	\$ 4.56	1.1%
D8. Subtotal - Sum(D1-D7)	\$ 466.33	\$ 518.02	\$ 51.69	12.7%
E. Change in Allowable Plan Adjusted Level Components				
E1. Network	\$ -	\$ -	\$ -	0.0%
E2. Pricing AV	\$ (82.88)	\$ (114.69)	\$ (31.81)	-7.8%
E3. Benefit Richness	\$ (0.00)	\$ (0.00)	\$ 0.00	0.0%
E4. Catastrophic Eligibility	\$ -	\$ -	\$ -	0.0%
E5. Benefits in Addition to EHB	\$ 0.62	\$ 0.78	\$ 0.16	0.0%
E6. Subtotal - Sum(E1-E5)	\$ (82.26)	\$ (113.91)	\$ (31.65)	-7.8%
F. Change in Retention Components				
F1. Administrative Expenses	\$ 39.61	\$ 41.11	\$ 1.50	0.4%
F2. Taxes and Fees	\$ 1.94	\$ 2.00	\$ 0.05	0.0%
F3. Profit and/or Contingency	\$ 8.12	\$ 8.22	\$ 0.10	0.0%
F4. Subtotal - Sum(F1-F3)	\$ 49.67	\$ 51.33	\$ 1.66	0.4%
G. Change in Miscellaneous Items	\$ -	\$ -	\$ -	0.0%
H. Sum of Components of Rate Change (should approximate the change shown in line A)	\$ 433.75	\$ 455.44	\$ 21.69	5.3%

For Informational Purposes only - No input required.

Blended Base Period Unadjusted Claims before Normalization	\$ 630.64	<= Index Rate of Experience Period on URRT
Blended Earned Premium	\$ 715,222,370.73	
Blended Loss Ratio	82.27%	

Table 5A. Small Group Projected Index Rate with Quarterly Trend

Effective Date	1/1/2026	4/1/2026	7/1/2026	10/1/2026	Total Single Risk Pool
# of Member Months Renewing in Quarter					
Adjusted Projected Allowed EHB Claims PMPM	\$ 960.35	\$ 960.35	\$ 960.35	\$ 960.35	\$ 960.35
Months of Trend	-	3	6	9	
Annual Trend					
Single Risk Pool Projected Allowed Claims	\$ 960.35	\$ 960.35	\$ 960.35	\$ 960.35	\$ -
Quarterly Trend Factor	1.000	1.000	1.000	1.000	0.000

Table 5B. Exchange User Fee Calculation

Exchange User Fee Percentage	5.0%
Expected On-Exchange Enrollment Percentage	79%
Projected Required Revenue PMPM	\$ 830.28
Adjustment for Catastrophic Eligibility and Benefits in Addition to EHB (if applicable)	1.000
Projected Incurred Exchange User Fee PMPM	\$ 19.60

Table 7. Normalized Market-Adjusted Projected Allowed Total Claims

Normalization Factors	2025	2026
Average Age Factor	1.832	1.810
Average Geographic Factor	0.990	1.000
Average Tobacco Factor	1.003	1.003
Average Benefit Richness (induced demand)	1.000	1.000
Average Network Factor	1.000	1.000
Market-Adjusted Projected Allowed Total Claims PMPM	\$ 858.38	\$ 946.56
Normalized Market-Adjusted Projected Allowed Total Claims PMPM	\$ 467.11	\$ 519.04

Table 9. Year-over-Year Data to Support Table 8

	2025	2026	
Paid-to-Allowed	0.785	0.775	
URRT Trend (Total Applied Trend Factor)	1.133	1.165	<- URRT W1, S2
URRT Morbidity	1.000	1.000	<- URRT W1, S2
URRT "Other"	1.336	1.354	
Risk Adjustment	\$ 9.88	\$ 2.76	<- URRT W1, S3
Exchange User Fee	\$ 18.05	\$ 19.60	<- URRT W1, S3
Reinsurance Recoveries	\$ 41.66	\$ 34.55	<- URRT W1, S2
Capitation	\$ -	\$ -	
Network	1.000	1.000	<- For 2025 in cell J81, please include a factor equal to the product of the average Pricing AV and the Non-Funding of CSR Adjustment
Pricing AV	0.822	0.779	
Benefit Richness	1.000	1.000	
Catastrophic Eligibility	1.000	1.000	
Benefits in Addition to EHB	1.002	1.002	
Administrative Expenses	9.76%	9.00%	
Taxes and Fees	0.48%	0.44%	
Profit and/or Contingency	2.00%	1.80%	

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026
Base Period Start Date	1/1/2024
Date of Most Recent Membership:	2/1/2025
Market Adjusted Index Rate:	\$ 944.70

Total Covered Lives @ 02-01-2025	2,013
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Q3 Q1-2025 Number of Covered Lines by Rating Area										2025 Guaranteed/ Discriminated Price Indicator	Do Ministers Check
1	2	3	4	5	6	7	8	9	Total		
1001	-	-	-	1,015	-	-	-	-	1,015		
									(0)		
38				100					178	1	
											N/A
1009				105					124	1	
123				141					264	1	
87				78					105	2	
101				51					127	1	
14				11					36	1	
101				1					187	2	
									0		

Table 11. Plan Premium Development for 21-Year-Old Non-Tobacco User

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026

Plan Number	HIOS Plan ID (Standard Component)	1/1/2025 Plan Marketing Name	Discontinued, New, Modified, Existing (D,N,M,E) for 2026	1/1/2026 Plan HIOS Plan ID (If 1/1/2025 Plan Discontinued & Mapped)	Metallic Tier	Exchange On/Off or Off
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Totals	These cells auto-fill using the data entered in Table 10.
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Plan 1	62560PA0010122	ge Bronze \$6,700/\$0 - Sta	DM	52899PA0030135	Bronze	On/Off
Plan 2	62560PA0010123	catastrophic \$10,600/\$0 -	DM	52899PA0030136	Catastrophic	On/Off
Plan 3	62560PA0010116	ge Gold \$1,000/\$20 - Sta	DM	52899PA0030129	Gold	On/Off
Plan 4	62560PA0010124	Gold HSA \$3,000/20% - \$	DM	52899PA0030130	Gold	On/Off
Plan 5	62560PA0010117	ge Silver \$7,000/\$45 - Sta	DM	52899PA0030133	Silver	On/Off
Plan 6	62560PA0010125	ge Silver \$2,600/\$50 - Sta	DM	52899PA0030131	Silver	On/Off
Plan 7	62560PA0010118	ge Silver \$3,500/\$50 - Sta	DM	52899PA0030132	Silver	Off
Plan 8	62560PA0010120	Silver HSA \$4,000/30% -	DM	52899PA0030134	Silver	Off
Plan 9	0	0	0	0	0	0
Plan 10	0	0	0	0	0	0
Plan 11	0	0	0	0	0	0
Plan 12	0	0	0	0	0	0
Plan 13	0	0	0	0	0	0
Plan 14	0	0	0	0	0	0
Plan 15	0	0	0	0	0	0
Plan 16	0	0	0	0	0	0
Plan 17	0	0	0	0	0	0
Plan 18	0	0	0	0	0	0
Plan 19	0	0	0	0	0	0
Plan 20	0	0	0	0	0	0
Plan 21	0	0	0	0	0	0
Plan 22	0	0	0	0	0	0
Plan 23	0	0	0	0	0	0
Plan 24	0	0	0	0	0	0
Plan 25	0	0	0	0	0	0
Plan 26	0	0	0	0	0	0
Plan 27	0	0	0	0	0	0
Plan 28	0	0	0	0	0	0
Plan 29	0	0	0	0	0	0
Plan 30	0	0	0	0	0	0
Plan 31	0	0	0	0	0	0
Plan 32	0	0	0	0	0	0
Plan 33	0	0	0	0	0	0
Plan 34	0	0	0	0	0	0
Plan 35	0	0	0	0	0	0
Plan 36	0	0	0	0	0	0
Plan 37	0	0	0	0	0	0
Plan 38	0	0	0	0	0	0
Plan 39	0	0	0	0	0	0
Plan 40	0	0	0	0	0	0
Plan 41	0	0	0	0	0	0
Plan 42	0	0	0	0	0	0
Plan 43	0	0	0	0	0	0
Plan 44	0	0	0	0	0	0
Plan 45	0	0	0	0	0	0
Plan 46	0	0	0	0	0	0
Plan 47	0	0	0	0	0	0
Plan 48	0	0	0	0	0	0
Plan 49	0	0	0	0	0	0
Plan 50	0	0	0	0	0	0
Plan 51	0	0	0	0	0	0
Plan 52	0	0	0	0	0	0
Plan 53	0	0	0	0	0	0

2025 21-year-old, Non-Tobacco Premium PMPM								
1	2	3	4	5	6	7	8	9
								Average (weighted by enrollment by rating area)

\$ 391.57	\$ -	\$ -	\$ -	\$ 411.43	\$ -	\$ -	\$ -	\$ -	\$ 401.9
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1	2	3

\$ 439.89	\$ -	\$ -
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1	Cameron	Elk	Potter	2	Bradford	Carbon	Clinton	Lackawanna	Luzerne	Lycoming	Monroe	Pike	Sullivan	Susquehanna	Tioga	Wayne	Wyoming	3	Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence	Washington	Westmoreland
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Number of Covered Lives by County

4	Bedford	Blair	Cambria	Clearfield	Huntingdon	Jefferson	Somerset	5	Centre	Columbia	Lehigh	Mifflin	Montour	Northampton	Northumberland	Schuylkill	Snyder	Union	6	Adams	Berks	Lancaster	York	7	Bucks	Chester	Delaware	Montgomery
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Match	-	-	-	-	141	-	-	-	Match	-	-	-	-	-	-	-	-	-	Match	-	-	-	-	Match	-	-	-	-
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PA Rate Quarterly Template Part V Consumer Factors

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026

Table 12. Age and Tobacco Factors

Projection Period Age and Tobacco Factors						
Age Band	Age Factor	Tobacco Factor		Age Band	Age Factor	Tobacco Factor
0-14	0.765			40	1.278	1.025
15	0.833			41	1.302	1.025
16	0.859			42	1.325	1.025
17	0.885			43	1.357	1.025
18	0.913			44	1.397	1.025
19	0.941			45	1.444	1.025
20	0.970			46	1.500	1.025
21	1.000	1.025		47	1.563	1.025
22	1.000	1.025		48	1.635	1.025
23	1.000	1.025		49	1.706	1.025
24	1.000	1.025		50	1.786	1.025
25	1.004	1.025		51	1.865	1.025
26	1.024	1.025		52	1.952	1.025
27	1.048	1.025		53	2.040	1.025
28	1.087	1.025		54	2.135	1.025
29	1.119	1.025		55	2.230	1.025
30	1.135	1.025		56	2.333	1.025
31	1.159	1.025		57	2.437	1.025
32	1.183	1.025		58	2.548	1.025
33	1.198	1.025		59	2.603	1.025
34	1.214	1.025		60	2.714	1.025
35	1.222	1.025		61	2.810	1.025
36	1.230	1.025		62	2.873	1.025
37	1.238	1.025		63	2.952	1.025
38	1.246	1.025		64+	3.000	1.025
39	1.262	1.025				

*PA follows the federal default age curve.

Table 13. Geographic Factors and Adjusted Loss Ratios

[illegible]

Table 14. Network Factors

[illegible]

PA Rate Template Part VI - Rate Change Summary

Table 15. Rate Change Summary Information

Overview

Initial Requested Average Rate Change:	0.142651425
Revised Requested Average Rate Change:	14.27%
Minimum Requested Rate Change:	2.16%
Maximum Requested Rate Change:	19.39%
Mapped Members:	2,013
Available in Rating Areas:	Rating Areas 1 and 5

Key Information

Jan. 2024 - Dec. 2024 Financial Experience		
Premium	\$	19,805,808.63
Claims	\$	16,495,040.49
Administrative Expenses	\$	1,335,605.96
Taxes & Fees	\$	686,875.25
Company Made After Taxes	\$	1,288,286.92

The company expects its annual medical costs to increase: 7.76%

Explanation of requested rate change: Increases in medical and pharmacy cost and utilization.

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026

How It Plans to Spend Your Premium

This is how the company plans to spend the premium it collects in 2026:

Claims:	86%
Administrative Expenses:	9%
Taxes & Fees:	3%
Profit:	2%

Rating Area	Active Rating Areas	Count of Remaining Active Rating Areas	Text
1	1	1	2 1
2			1
3			1
4			1
5	5	5	1 and 5
6			0
7			0
8			0
9			0

MLR and Rebate Calculation

Carrier Name:	UPMC Health Plan, Inc.
Product(s):	HMO
Market Segment:	Individual
Rate Effective Date:	1/1/2026
Historical Claims as-of Date	

Line Description	Health Insurance Coverage Total	Health Insurance Coverage 2022	Health Insurance Coverage 2023	Health Insurance Coverage 2024	Health Insurance Coverage Projections 2025	Health Insurance Coverage Projections 2026
1. Medical Loss Ratio Numerator						
1.2 Adjusted incurred claims	\$51,850,603	\$18,130,543	\$16,888,824	\$16,831,237	\$16,375,741	\$21,153,290
1.3 Improving Health Care Quality Expenses	\$259,452	\$66,508	\$93,581	\$99,363	\$101,052	\$102,800
1.4 Reconciled payments of cost-sharing reductions	\$0	\$0	\$0	\$0	\$0	\$0
1.5 Federal Transitional Reinsurance Program payments from HHS	\$0	\$0	\$0	\$0	\$0	\$0
1.6 Federal Risk Adjustment Program net payments expected from HHS / (charges payable to HHS)	\$2,296,588	\$605,096	\$755,330	\$936,162	(\$121,865)	(\$66,671)
1.8 Shared Savings payments to enrollees	\$0	\$0	\$0	\$0	\$0	\$0
1.9 MLR numerator	\$49,813,466	\$17,591,955	\$16,227,074	\$15,994,437	\$16,598,659	\$21,322,761
2. Medical Loss Ratio Denominator						
2.1 Premium earned including Federal and State high risk programs and adjusted for net premium stabilization program payments / (charges)	\$57,000,399	\$19,766,051	\$18,364,701	\$18,869,647	\$18,549,149	\$24,753,241
2.2 Federal and State taxes and licensing or regulatory fees	\$1,115,591	(\$176,238)	\$427,017	\$864,812	\$88,736	\$561,112
2.3 MLR Denominator (Lines 2.1 - 2.2)	\$55,884,808	\$19,942,290	\$17,937,684	\$18,004,834	\$18,460,413	\$24,192,129
3. Credibility Adjustment						
3.1 Life-years	6,450	2,288	2,103	2,060	2,013	2,013
3.2 Base credibility factor	3.4%					
3.3 Average deductible	\$0					
3.4 Deductible factor	1.000					
3.5 Credibility adjustment (Lines 3.2 x 3.4 (do not round))	3.4%					
4. MLR Calculation (for issuers with at least 1,000 life years in the Total column of Line 3.1)						
4.1 Preliminary MLR (Lines 1.9 / 2.3)	89.1%	88.2%	90.5%	88.8%	89.9%	88.1%
4.2 Credibility adjustment (Line 3.5, if applicable)	3.4%					
4.3 Credibility-adjusted MLR (Lines 4.1 + 4.2)	92.5%					
5. Rebate Calculation						
5.1 MLR standard	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%
5.2 Credibility-adjusted MLR (Line 4.3)	92.5%					
5.3 Adjusted earned premium (Lines 2.1 - 2.2 CY)	\$18,004,834					
5.4 Rebate amount if credibility-adjusted MLR is less than MLR standard (Lines (5.1 - 5.2) x 5.3)	\$0.00					

Table 1 - Base Credibility Adjustment Factors	
Life Years	Base credibility factor
-	0.0%
1,000	8.3%
2,500	5.2%
5,000	3.7%
10,000	2.6%
25,000	1.6%
50,000	1.2%
75,000	0.0%

Table 2 - Deductible Factors	
Average Health Plan Deductible	Deductible factor
\$0	1.000
\$2,500	1.164
\$5,000	1.402
\$10,000	1.736

Table 17-1. Projected Historical Experience from the Plan Year 2025 Filing

Month-Year	Total Annual Premium	Ultimate Incurred Claims	Members	Prescription Drug Rebates**	Variance (\$) - Premium	Variance (%) - Premium	Variance (\$) - Claims	Variance (%) - Claims	Variance (\$) - Drug Rebates	Variance (%) - Drug Rebates
Jan-21		\$ 1,558,954.81	2,933	(\$139,757)						
Feb-21		\$ 1,740,318.08	2,928	(\$139,519)						
Mar-21		\$ 2,163,732.81	2,884	(\$137,423)						
Apr-21		\$ 2,147,280.90	2,869	(\$136,708)						
May-21		\$ 2,131,063.26	2,859	(\$136,231)						
Jun-21		\$ 2,027,815.63	2,849	(\$135,755)						
Jul-21		\$ 1,632,563.20	2,875	(\$136,994)						
Aug-21		\$ 2,204,793.73	2,909	(\$138,614)						
Sep-21		\$ 2,034,253.67	2,917	(\$138,995)						
Oct-21		\$ 2,178,782.55	2,922	(\$139,233)						
Nov-21		\$ 2,318,689.44	2,913	(\$138,804)						
Dec-21		\$ 24,397,027	2,870	(\$136,756)	\$ -	0.0%	\$ (48,315.57)	-0.2%	\$ 77.45	0.0%
Jan-22		\$ 1,575,041.26	2,486	(\$131,758)						
Feb-22		\$ 1,616,014.96	2,437	(\$129,161)						
Mar-22		\$ 2,056,485.72	2,386	(\$126,458)						
Apr-22		\$ 2,489,535.86	2,336	(\$123,808)						
May-22		\$ 1,617,571.85	2,311	(\$122,483)						
Jun-22		\$ 1,744,665.06	2,289	(\$121,317)						
Jul-22		\$ 1,550,603.41	2,262	(\$119,886)						
Aug-22		\$ 1,787,982.09	2,249	(\$119,197)						
Sep-22		\$ 1,727,553.55	2,214	(\$117,342)						
Oct-22		\$ 1,838,296.60	2,190	(\$116,070)						
Nov-22		\$ 2,319,022.98	2,156	(\$114,268)						
Dec-22		\$ 19,766,051	2,134	(\$113,102)	\$ -	0.0%	\$ (18,650.72)	-0.1%	\$ 20.94	0.0%
Jan-23		\$ 1,460,734.33	2,182	(\$146,630)						
Feb-23		\$ 2,800,261.59	2,195	(\$147,504)						
Mar-23		\$ 1,615,633.17	2,155	(\$144,816)						
Apr-23		\$ 1,221,417.91	2,110	(\$141,792)						
May-23		\$ 1,607,084.68	2,095	(\$140,784)						
Jun-23		\$ 1,713,399.20	2,087	(\$140,246)						
Jul-23		\$ 1,545,733.23	2,085	(\$140,112)						
Aug-23		\$ 1,341,288.01	2,069	(\$139,037)						
Sep-23		\$ 1,383,709.63	2,084	(\$140,045)						
Oct-23		\$ 1,723,096.55	2,070	(\$139,104)						
Nov-23		\$ 1,695,641.38	2,056	(\$138,163)						
Dec-23		\$ 18,366,454	2,046	(\$137,491)	\$ (3,020.04)	0.0%	\$ (151,351.67)	-0.8%	\$ (106,727.08)	6.3%

Table 17-2. Assessment of Actual to Projected for Paid Claims, Risk Adjustment, and Reinsurance

Plan Year	Category	Projected PMPM *	Actual PMPM	Variance
2024	Ultimate Incurred Claims	\$ 713	\$ 784	\$ (71)
	Drug Rebates	\$ (71)	\$ (80)	\$ 9
	Risk Adjustment	\$ (22)	\$ 38	\$ (60)
	Reinsurance	\$ 28	\$ 36	\$ (9)
	TOTAL	\$ 707	\$ 710	\$ (2)

* Projected PMPMs should come from PY24 filing.

Company Name: UPMC Health Plan, Inc.
 Market: Individual
 Product: HMO
 Effective Date of Rates: January 1, 2026

Ending date of Rates: December 31, 2026

HIOS Plan ID (On Exchange)=>	52899PA0030135	52899PA0030135	52899PA0030136	52899PA0030136	52899PA0030129	52899PA0030129	52899PA0030130	52899PA0030130	52899PA0030131	52899PA0030131
HIOS Plan ID (Off Exchange)=>	52899PA0030135	52899PA0030135	52899PA0030136	52899PA0030136	52899PA0030129	52899PA0030129	52899PA0030130	52899PA0030130	52899PA0030131	52899PA0030131
Plan Marketing Name =>	Stage Bronze \$6,700/\$0 - Standard	Stage Bronze \$6,700/\$0 - Standard	Catastrophic \$10,600/\$0 - Standard	Catastrophic \$10,600/\$0 - Standard	Stage Gold \$1,000/\$20 - Standard	Stage Gold \$1,000/\$20 - Standard	Stage Gold HSA \$3,000/20% - Standard	Stage Gold HSA \$3,000/20% - Standard	Stage Silver \$2,600/\$50 - Standard	Stage Silver \$2,600/\$50 - Standard
Form # =>	680	680	680	680	680	680	681	681	680	680
Rating Area =>	1	5	1	5	1	5	1	5	1	5
Network =>	ral w/Dental Advantage w/De	ral w/Dental Advantage w/De	ral w/Dental Advantage w/De	ral w/Dental Advantage w/De	ral w/Dental Advantage w/De	ral w/Dental Advantage w/De	ral w/Dental Advantage w/De	ral w/Dental Advantage w/De	ral w/Dental Advantage w/De	ral w/Dental Advantage w/De
Metal =>	Bronze	Bronze	Catastrophic	Catastrophic	Gold	Gold	Gold	Gold	Silver	Silver
Deductible =>	\$6,700 / \$13,400	\$6,700 / \$13,400	\$10,600 / \$21,200	\$10,600 / \$21,200	\$1,000 / \$2,000	\$1,000 / \$2,000	\$3,000 / \$6,000	\$3,000 / \$6,000	\$2,600 / \$5,200	\$2,600 / \$5,200
Coinurance =>	60%	60%	100%	100%	70%	70%	80%	80%	60%	60%
Copays =>	\$0 / 40%	\$0 / 40%	\$0 / \$0	\$0 / \$0	\$20 / \$50	\$20 / \$50	\$20 / 20%	\$20 / 20%	\$50 / \$80	\$50 / \$80
OOP Maximum =>	\$10,600 / \$21,200	\$10,600 / \$21,200	\$10,600 / \$21,200	\$10,600 / \$21,200	\$7,500 / \$15,000	\$7,500 / \$15,000	\$6,000 / \$10,600	\$6,000 / \$10,600	\$10,600 / \$21,200	\$10,600 / \$21,200
Pediatric Dental (Yes/No) =>	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Age Band	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
0 - 14	\$263.98	\$263.98	\$284.70	\$284.70	\$251.91	\$251.91	\$271.69	\$271.69	\$365.87	\$365.87
15	\$287.44	\$287.44	\$310.01	\$310.01	\$274.31	\$274.31	\$295.84	\$295.84	\$398.39	\$398.39
16	\$296.42	\$296.42	\$319.69	\$319.69	\$282.87	\$282.87	\$305.07	\$305.07	\$410.83	\$410.83
17	\$305.39	\$305.39	\$329.36	\$329.36	\$291.43	\$291.43	\$314.31	\$314.31	\$423.26	\$423.26
18	\$315.05	\$315.05	\$339.78	\$339.78	\$300.65	\$300.65	\$324.25	\$324.25	\$436.65	\$436.65
19	\$324.71	\$324.71	\$350.20	\$350.20	\$309.87	\$309.87	\$334.20	\$334.20	\$450.04	\$450.04
20	\$334.72	\$334.72	\$361.00	\$361.00	\$319.42	\$319.42	\$344.50	\$344.50	\$463.91	\$463.91
21	\$345.07	\$345.07	\$372.16	\$372.16	\$329.30	\$329.30	\$355.15	\$355.15	\$478.26	\$478.26
22	\$345.07	\$345.07	\$372.16	\$372.16	\$329.30	\$329.30	\$355.15	\$355.15	\$478.26	\$478.26
23	\$345.07	\$345.07	\$372.16	\$372.16	\$329.30	\$329.30	\$355.15	\$355.15	\$478.26	\$478.26
24	\$345.07	\$345.07	\$372.16	\$372.16	\$329.30	\$329.30	\$355.15	\$355.15	\$478.26	\$478.26
25	\$346.45	\$346.45	\$373.65	\$373.65	\$330.62	\$330.62	\$356.57	\$356.57	\$480.17	\$480.17
26	\$353.35	\$353.35	\$381.09	\$381.09	\$337.20	\$337.20	\$363.67	\$363.67	\$489.74	\$489.74
27	\$361.63	\$361.63	\$390.02	\$390.02	\$345.11	\$345.11	\$372.20	\$372.20	\$501.22	\$501.22
28	\$375.09	\$375.09	\$404.54	\$404.54	\$357.95	\$357.95	\$386.05	\$386.05	\$519.87	\$519.87
29	\$386.13	\$386.13	\$416.45	\$416.45	\$368.49	\$368.49	\$397.41	\$397.41	\$535.17	\$535.17
30	\$391.65	\$391.65	\$422.40	\$422.40	\$373.76	\$373.76	\$403.10	\$403.10	\$542.83	\$542.83
31	\$399.94	\$399.94	\$431.33	\$431.33	\$381.66	\$381.66	\$411.62	\$411.62	\$554.30	\$554.30
32	\$408.22	\$408.22	\$440.27	\$440.27	\$389.56	\$389.56	\$420.14	\$420.14	\$565.78	\$565.78
33	\$413.39	\$413.39	\$445.85	\$445.85	\$394.50	\$394.50	\$425.47	\$425.47	\$572.96	\$572.96
34	\$418.91	\$418.91	\$451.80	\$451.80	\$399.77	\$399.77	\$431.15	\$431.15	\$580.61	\$580.61
35	\$421.68	\$421.68	\$454.78	\$454.78	\$402.40	\$402.40	\$433.99	\$433.99	\$584.44	\$584.44
36	\$424.44	\$424.44	\$457.76	\$457.76	\$405.04	\$405.04	\$436.83	\$436.83	\$588.26	\$588.26
37	\$427.20	\$427.20	\$460.73	\$460.73	\$407.67	\$407.67	\$439.68	\$439.68	\$592.09	\$592.09
38	\$429.96	\$429.96	\$463.71	\$463.71	\$410.31	\$410.31	\$442.52	\$442.52	\$595.91	\$595.91
39	\$435.48	\$435.48	\$469.67	\$469.67	\$415.58	\$415.58	\$448.20	\$448.20	\$603.56	\$603.56
40	\$441.00	\$441.00	\$475.62	\$475.62	\$420.85	\$420.85	\$453.88	\$453.88	\$611.22	\$611.22
41	\$449.28	\$449.28	\$484.55	\$484.55	\$428.75	\$428.75	\$462.41	\$462.41	\$622.69	\$622.69
42	\$457.22	\$457.22	\$493.11	\$493.11	\$436.32	\$436.32	\$470.57	\$470.57	\$633.69	\$633.69
43	\$468.26	\$468.26	\$505.02	\$505.02	\$446.86	\$446.86	\$481.94	\$481.94	\$643.99	\$643.99
44	\$482.06	\$482.06	\$519.91	\$519.91	\$460.03	\$460.03	\$496.14	\$496.14	\$658.13	\$658.13
45	\$498.28	\$498.28	\$530.74	\$530.74	\$475.51	\$475.51	\$512.84	\$512.84	\$673.44	\$673.44
46	\$517.61	\$517.61	\$550.55	\$550.55	\$493.95	\$493.95	\$532.73	\$532.73	\$688.54	\$688.54
47	\$539.34	\$539.34	\$565.83	\$565.83	\$514.70	\$514.70	\$552.56	\$552.56	\$706.21	\$706.21
48	\$564.19	\$564.19	\$588.29	\$588.29	\$538.41	\$538.41	\$580.67	\$580.67	\$725.91	\$725.91
49	\$588.69	\$588.69	\$613.40	\$613.40	\$560.78	\$560.78	\$605.81	\$605.81	\$746.31	\$746.31
50	\$616.30	\$616.30	\$646.68	\$646.68	\$588.13	\$588.13	\$634.30	\$634.30	\$765.16	\$765.16
51	\$643.56	\$643.56	\$679.04	\$679.04	\$614.14	\$614.14	\$662.35	\$662.35	\$784.91	\$784.91
52	\$673.58	\$673.58	\$709.42	\$709.42	\$642.79	\$642.79	\$693.25	\$693.25	\$804.56	\$804.56
53	\$703.94	\$703.94	\$739.21	\$739.21	\$671.77	\$671.77	\$724.51	\$724.51	\$824.63	\$824.63
54	\$736.72	\$736.72	\$774.56	\$774.56	\$703.06	\$703.06	\$758.25	\$758.25	\$844.61	\$844.61
55	\$769.51	\$769.51	\$809.92	\$809.92	\$734.34	\$734.34	\$791.98	\$791.98	\$864.78	\$864.78
56	\$805.05	\$805.05	\$842.17	\$842.17	\$768.26	\$768.26	\$828.56	\$828.56	\$884.28	\$884.28
57	\$840.94	\$840.94	\$876.96	\$876.96	\$802.50	\$802.50	\$865.50	\$865.50	\$904.25	\$904.25
58	\$879.24	\$879.24	\$908.26	\$908.26	\$839.06	\$839.06	\$904.92	\$904.92	\$927.55	\$927.55
59	\$898.22	\$898.22	\$926.67	\$926.67	\$875.17	\$875.17	\$924.66	\$924.66	\$947.03	\$947.03
60	\$936.52	\$936.52	\$965.99	\$965.99	\$913.29	\$913.29	\$963.88	\$963.88	\$977.97	\$977.97
61	\$969.65	\$969.65	\$993.89	\$993.89	\$945.77	\$945.77	\$997.97	\$997.97	\$1,022.92	\$1,022.92
62	\$991.39	\$991.39	\$1,016.17	\$1,016.17	\$975.95	\$975.95	\$1,020.35	\$1,020.35	\$1,045.85	\$1,045.85
63	\$1,018.65	\$1,018.65	\$1,044.11	\$1,044.11	\$1,008.62	\$1,008.62	\$1,018.82	\$1,018.82	\$1,041.82	\$1,041.82
64+	\$1,035.21	\$1,035.21	\$1,061.09	\$1,061.09	\$1,044.39	\$1,044.39	\$1,065.45	\$1,065.45	\$1,092.09	\$1,092.09

Company Name:
Market:
Product:
Effective Date of Rates:

HIOS Plan ID (On Exchange)=>	0030131	52899PA0030133	52899PA0030133	52899PA0030133	52899PA0030134	52899PA0030134	52899PA0030132	52899PA0030132
HIOS Plan ID (Off Exchange)=>	0030131	52899PA0030133	52899PA0030133	52899PA0030133	52899PA0030134	52899PA0030134	52899PA0030132	52899PA0030132
Plan Marketing Name =>	000/\$50 - Standard	ntage Silver \$7,000/\$45 - Standard	ntage Silver \$7,000/\$45 - Standard	ntage Silver HSA \$4,000/30% - Standard	ntage Silver HSA \$4,000/30% - Standard	ntage Silver \$3,500/\$50 - Standard	ntage Silver \$3,500/\$50 - Standard	ntage Silver \$3,500/\$50 - Standard
Form # =>	0	680	680	681	681	680	680	680
Rating Area =>	1	1	5	1	5	1	5	5
Network =>	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental	Advantage w/Dental
Metal =>	Silver	Silver	Silver	Silver	Silver	Silver	Silver	Silver
Deductible =>	\$5,200	\$7,000 / \$14,000	\$7,000 / \$14,000	\$4,000 / \$8,000	\$4,000 / \$8,000	\$3,500 / \$7,000	\$3,500 / \$7,000	\$3,500 / \$7,000
Coinurance =>	%	60%	60%	70%	70%	70%	70%	70%
Copays =>	\$80	\$45 / \$65	\$45 / \$65	30% / 30%	30% / 30%	\$50 / \$80	\$50 / \$80	\$50 / \$80
OOP Maximum =>	\$21,200	\$10,600 / \$21,200	\$10,600 / \$21,200	\$7,500 / \$15,000	\$7,500 / \$15,000	\$10,600 / \$21,200	\$10,600 / \$21,200	\$10,600 / \$21,200
Pediatric Dental (Yes/No) =>	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Age Band	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco
0 - 14	\$480.54	\$371.81	\$371.81	\$400.99	\$400.99	\$300.51	\$300.51	\$324.10
15	\$523.26	\$404.85	\$404.85	\$436.63	\$436.63	\$327.22	\$327.22	\$352.91
16	\$539.59	\$417.49	\$417.49	\$450.26	\$450.26	\$337.43	\$337.43	\$363.92
17	\$555.92	\$430.13	\$430.13	\$463.89	\$463.89	\$347.65	\$347.65	\$374.94
18	\$573.51	\$443.74	\$443.74	\$478.57	\$478.57	\$358.64	\$358.64	\$386.80
19	\$591.10	\$457.34	\$457.34	\$493.24	\$493.24	\$369.64	\$369.64	\$398.66
20	\$609.32	\$471.44	\$471.44	\$508.44	\$508.44	\$381.04	\$381.04	\$410.95
21	\$643.86	\$486.02	\$498.17	\$524.17	\$537.27	\$392.82	\$402.64	\$423.66
22	\$643.86	\$486.02	\$498.17	\$524.17	\$537.27	\$392.82	\$402.64	\$423.66
23	\$643.86	\$486.02	\$498.17	\$524.17	\$537.27	\$392.82	\$402.64	\$423.66
24	\$643.86	\$486.02	\$498.17	\$524.17	\$537.27	\$392.82	\$402.64	\$423.66
25	\$646.44	\$487.96	\$500.16	\$526.27	\$539.42	\$394.39	\$404.25	\$425.35
26	\$659.32	\$497.68	\$510.13	\$536.75	\$550.17	\$402.25	\$412.30	\$433.83
27	\$674.77	\$509.35	\$522.08	\$549.33	\$563.06	\$411.68	\$421.97	\$444.00
28	\$699.88	\$528.30	\$541.51	\$569.77	\$584.02	\$427.00	\$437.67	\$460.52
29	\$720.48	\$543.86	\$557.45	\$586.55	\$601.21	\$439.57	\$450.55	\$474.08
30	\$730.79	\$551.63	\$565.42	\$594.93	\$609.81	\$445.85	\$457.00	\$480.85
31	\$746.24	\$563.30	\$577.38	\$607.51	\$622.70	\$455.28	\$466.66	\$491.02
32	\$761.69	\$574.96	\$589.34	\$620.09	\$635.60	\$464.71	\$476.32	\$501.19
33	\$771.35	\$582.25	\$596.81	\$627.96	\$643.65	\$470.60	\$482.36	\$507.54
34	\$781.65	\$590.03	\$604.78	\$636.34	\$652.25	\$476.88	\$488.81	\$514.32
35	\$786.80	\$593.92	\$608.76	\$640.54	\$656.55	\$480.03	\$492.03	\$517.71
36	\$791.95	\$597.80	\$612.75	\$644.73	\$660.85	\$483.17	\$495.25	\$521.10
37	\$797.10	\$601.69	\$616.74	\$648.92	\$665.15	\$486.31	\$498.47	\$524.49
38	\$802.25	\$605.58	\$620.72	\$653.12	\$669.44	\$489.45	\$501.69	\$527.88
39	\$812.56	\$613.36	\$628.69	\$661.50	\$678.04	\$495.74	\$508.13	\$534.66
40	\$822.86	\$621.13	\$636.66	\$669.89	\$686.64	\$502.02	\$514.57	\$541.44
41	\$838.31	\$632.80	\$648.62	\$682.47	\$699.53	\$511.45	\$524.24	\$551.61
42	\$853.12	\$643.98	\$660.08	\$694.53	\$711.89	\$520.49	\$533.50	\$561.35
43	\$873.72	\$659.53	\$676.02	\$711.30	\$729.08	\$533.06	\$546.38	\$574.91
44	\$899.48	\$678.97	\$695.94	\$732.27	\$750.57	\$548.77	\$562.49	\$591.85
45	\$929.74	\$701.81	\$719.36	\$756.90	\$775.82	\$567.23	\$581.41	\$611.77
46	\$965.80	\$729.03	\$747.26	\$786.26	\$805.91	\$589.23	\$603.96	\$635.49
47	\$1,006.36	\$759.65	\$778.64	\$819.28	\$839.76	\$613.98	\$629.33	\$662.18
48	\$1,052.72	\$794.64	\$814.51	\$857.02	\$878.44	\$642.26	\$658.32	\$692.68
49	\$1,098.43	\$829.15	\$849.88	\$894.23	\$916.59	\$670.15	\$686.90	\$722.76
50	\$1,149.94	\$868.03	\$889.73	\$936.17	\$959.57	\$701.58	\$719.12	\$756.66
51	\$1,200.81	\$906.43	\$929.09	\$977.58	\$1,002.02	\$732.61	\$750.92	\$790.13
52	\$1,256.82	\$948.71	\$972.43	\$1,023.18	\$1,048.76	\$766.78	\$785.95	\$826.98
53	\$1,313.48	\$991.48	\$1,016.27	\$1,069.31	\$1,096.04	\$801.35	\$821.39	\$864.27
54	\$1,374.65	\$1,037.65	\$1,063.59	\$1,119.10	\$1,147.08	\$838.67	\$859.64	\$904.51
55	\$1,435.82	\$1,083.82	\$1,110.92	\$1,168.90	\$1,198.12	\$875.99	\$897.89	\$944.76
56	\$1,502.13	\$1,133.88	\$1,162.23	\$1,222.89	\$1,253.46	\$916.45	\$939.36	\$988.40
57	\$1,569.10	\$1,184.43	\$1,214.04	\$1,277.40	\$1,309.34	\$957.30	\$981.23	\$1,032.46
58	\$1,640.57	\$1,238.38	\$1,269.34	\$1,335.59	\$1,368.97	\$1,000.91	\$1,025.93	\$1,079.49
59	\$1,675.98	\$1,265.11	\$1,296.74	\$1,364.41	\$1,398.52	\$1,022.51	\$1,048.07	\$1,102.79
60	\$1,747.45	\$1,319.06	\$1,352.03	\$1,422.60	\$1,458.16	\$1,066.11	\$1,092.77	\$1,149.81
61	\$1,809.26	\$1,365.72	\$1,399.86	\$1,472.92	\$1,509.74	\$1,103.82	\$1,131.42	\$1,190.48
62	\$1,849.82	\$1,396.34	\$1,431.24	\$1,505.94	\$1,543.59	\$1,128.57	\$1,156.79	\$1,217.18
63	\$1,900.69	\$1,434.73	\$1,470.60	\$1,547.35	\$1,586.03	\$1,159.60	\$1,188.59	\$1,250.64
64+	\$1,931.59	\$1,458.06	\$1,494.51	\$1,572.51	\$1,611.82	\$1,178.46	\$1,207.92	\$1,270.98

UPMC Health Plan, Inc.
Individual
Plan Design Summary

HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Network	Rating Area	Counties Covered
52899PA0030135	UPMC Advantage Bronze \$6,700/\$0 - Standard Network	HMO	Bronze	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2026	1, 5	Clearfield, Crawford
52899PA0030136	UPMC Advantage Catastrophic \$10,600/\$0 - Standard Network	HMO	Catastrophic	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2026	1, 5	Clearfield, Crawford
52899PA0030129	UPMC Advantage Gold \$1,000/\$20 - Standard Network	HMO	Gold	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2026	1, 5	Clearfield, Crawford
52899PA0030130	UPMC Advantage Gold HSA \$3,000/20% - Standard Network	HMO	Gold	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2026	1, 5	Clearfield, Crawford
52899PA0030131	UPMC Advantage Silver \$2,600/\$50 - Standard Network	HMO	Silver	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2026	1, 5	Clearfield, Crawford
52899PA0030133	UPMC Advantage Silver \$7,000/\$45 - Standard Network	HMO	Silver	On/Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2026	1, 5	Clearfield, Crawford
52899PA0030134	UPMC Advantage Silver HSA \$4,000/30% - Standard Network	HMO	Silver	Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2026	1, 5	Clearfield, Crawford
52899PA0030132	UPMC Advantage Silver \$3,500/\$50 - Standard Network	HMO	Silver	Off	IND HMO Standard Referral w/Dental Advantage w/Dentemax PEDS PPO - 2026	1, 5	Clearfield, Crawford

Company Name UPMC Health Plan, Inc.

Market Individual

RATES FOR AGE 21, NON-TOBACCO USER, BY RATING AREA AND COUNTY

02-01-2025 Number of Covered Lives by Rating County					RATING AREA 1			
					962	0	0	0
HIOS Plan ID	Plan Marketing Name	Product	Metal	On/Off Exchange	Crawford	Clarion	Erie	Forest
52899PA0030135	PMC Advantage Bronze \$6,700/\$0 - Standard Netw	HMO	Bronze	On/Off	\$345.07			
52899PA0030136	C Advantage Catastrophic \$10,600/\$0 - Standard Ne	HMO	Catastrophic	On/Off	\$329.30			
52899PA0030129	PMC Advantage Gold \$1,000/\$20 - Standard Netwo	HMO	Gold	On/Off	\$478.26			
52899PA0030130	IC Advantage Gold HSA \$3,000/20% - Standard Netv	HMO	Gold	On/Off	\$413.18			
52899PA0030131	PMC Advantage Silver \$2,600/\$50 - Standard Netwo	HMO	Silver	On/Off	\$582.43			
52899PA0030133	PMC Advantage Silver \$7,000/\$45 - Standard Netwo	HMO	Silver	On/Off	\$486.02			
52899PA0030134	C Advantage Silver HSA \$4,000/30% - Standard Net	HMO	Silver	Off	\$392.82			
52899PA0030132	PMC Advantage Silver \$3,500/\$50 - Standard Netwo	HMO	Silver	Off	\$429.87			

0	0	0	0
Mckean	Mercer	Venango	Warren

RATING AREA 2

0	0	0
Elk	Cameron	Potter

RATING AREA 3

0	0	0	0	0	0	0
Bradford	Carbon	Clinton	Lackawanna	Luzerne	Lycoming	Monroe

0	0	0	0	0	0
Pike	Sullivan	Susquehanna	Tioga	Wayne	Wyoming

RATING AREA 4

0	0	0	0	0	0	0	0
Allegheny	Armstrong	Beaver	Butler	Fayette	Greene	Indiana	Lawrence

0	0
Washington	Westmoreland

RATING AREA 5

0	0	1,051	0	0	0	0
Bedford	Blair	Clearfield	Cambria	Huntingdon	Jefferson	Somerset

RATING AREA 6

0	0	0	0
Centre	Columbia	Lehigh	Mifflin

\$372.16
 \$355.15
 \$515.80
 \$445.62
 \$628.16
 \$524.17
 \$423.66
 \$463.62

0	0	0	0	0	0
Montour	Northampton	Northumberland	Schuylkill	Snyder	Union

RATING AREA 7

0	0	0	0
Adams	Berks	Lancaster	York

RATING AREA 8

0	0
Bucks	Chester

0	0	0
Delaware	Montgomery	Philadelphia

RATING AREA 9

0	0	0	0	0	0	0
Cumberland	Dauphin	Franklin	Fulton	Juniata	Lebanon	Perry

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	
1	Unified Rate Review v6.0																			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. To validate, select the Validate button or Ctrl + Shift + I. To finalize, select the Finalize button or Ctrl + Shift + F.	
2																					
3	Company Legal Name:		UPMC Health Plan, Inc.																		
4	HIOS Issuer ID:		52899	State:		PA															
5	Effective Date of Rate Change(s):		1/1/2026		Market:		Individual														
6																					
7																					
8	Market Level Calculations (Same for all Plans)																				
9																					
10																					
11	Section I: Experience Period Data																				
12	Experience Period: 1/1/2024 to 12/31/2024																				
13	Total PMPM																				
14	Allowed Claims				\$21,095,691.47				\$853.35												
15	Reinsurance				\$901,732.82				\$36.48												
16	Incurred Claims in Experience Period				\$16,507,571.49				\$667.76												
17	Risk Adjustment				\$936,162.00				\$37.87												
18	Experience Period Premium				\$18,869,646.63				\$763.30												
19	Experience Period Member Months				24,721																
20																					
21	Section II: Projections																				
22																					
23	Benefit Category		Experience Period Index Rate PMPM		Year 1 Trend		Year 2 Trend		Trended EHB Allowed Claims PMPM												
24	Inpatient Hospital		\$171.51	0.973	1.022	0.973	1.022	\$169.60													
25	Outpatient Hospital		\$295.31	1.040	1.045	1.040	1.045	\$348.80													
26	Professional		\$102.81	1.027	1.016	1.027	1.016	\$111.93													
27	Other Medical		\$133.76	1.016	1.066	1.016	1.066	\$156.90													
28	Capitation		\$0.00	1.000	1.000	1.000	1.000	\$0.00													
29	Prescription Drug		\$149.96	1.137	0.999	1.137	0.999	\$193.48													
30	Total		\$853.35					\$980.71													
31																					
32	Morbidity Adjustment				1.000																
33	Demographic Shift				1.000																
34	Plan Design Changes				1.000																
35	Other				1.000																
36	Adjusted Trended EHB Allowed Claims PMPM for 1/1/2026				\$980.71																
37																					
38	Manual EHB Allowed Claims PMPM				\$977.84																
39	Applied Credibility %				0.00%																
40																					
41	Projected Period Totals																				
42	Projected Index Rate for 1/1/2026				\$977.84				\$22,494,231.36												
43	Reinsurance				\$45.18				\$1,039,320.72												
44	Risk Adjustment Payment/Charge				-\$3.54				-\$81,434.16												
45	Exchange User Fees				2.66%				\$588,521.44												
46	Market Adjusted Index Rate				\$961.78				\$22,124,866.24												
47																					
48	Projected Member Months				23,004																
49																					
50	Information Not Releasable to the Public Unless Authorized by Law: This information has not been publically disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.																				
51																					

Product-Plan Data Collection

Company Legal Name: UPMC Health Plan, Inc.
HIOs Issuer ID: 52899 State: PA
Effective Date of Rate Change(s): 1/1/2026 Market: Individual

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

Product/Plan Level Calculations

Field #	Section I: General Product and Plan Information								
1.1 Product Name		Exchange Individual HMO							
1.2 Product ID		52899PA003							
1.3 Plan Name		Gold \$1,000/\$20 -	Gold HSA	Silver \$2,600/\$50 -	Silver \$3,500/\$50 -	Silver \$7,000/\$45 -	Silver HSA	Bronze \$6,700/\$0 -	Catastrophic
1.4 Plan ID (Standard Component ID)		52899PA0030129	52899PA0030130	52899PA0030131	52899PA0030132	52899PA0030133	52899PA0030134	52899PA0030135	52899PA0030136
1.5 Metal		Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Catastrophic
1.6 AV Metal Value		0.806	0.766	0.710	0.708	0.661	0.697	0.596	0.585
1.7 Plan Category		Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing	Renewing
1.8 Plan Type		HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO
1.9 Exchange Plan?		Yes	Yes	Yes	No	Yes	No	Yes	Yes
1.10 Effective Date of Proposed Rates		1/1/2026	1/1/2026	1/1/2026	1/1/2026	1/1/2026	1/1/2026	1/1/2026	1/1/2026
1.11 Cumulative Rate Change % (over 12 mos prior)		16.52%	10.35%	17.96%	17.27%	3.96%	15.22%	15.70%	14.37%
1.12 Product Rate Increase %		14.51%							
1.13 Submission Level Rate Increase %		14.51%							

Worksheet 1 Totals	Section II: Experience Period and Current Plan Level Information									
	2.1 Plan ID (Standard Component ID)	Total	52899PA0030129	52899PA0030130	52899PA0030131	52899PA0030132	52899PA0030133	52899PA0030134	52899PA0030135	52899PA0030136
\$21,095,691	2.2 Allowed Claims	\$21,095,691	\$9,539,172	\$1,351,356	\$4,318,545	\$812,814	\$2,642,605	\$1,837,728	\$593,471	\$0
\$901,733	2.3 Reinsurance	\$901,733	\$429,838	\$75,543	\$101,550	\$50,994	\$92,066	\$69,743	\$81,999	\$0
	2.4 Member Cost Sharing	\$3,686,387	\$1,998,734	\$339,679	\$246,401	\$223,256	\$224,075	\$332,720	\$321,521	\$0
	2.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$16,507,571	2.6 Incurred Claims	\$16,507,571	\$7,110,600	\$936,135	\$3,970,594	\$538,564	\$2,326,464	\$1,435,265	\$189,950	\$0
\$936,162	2.7 Risk Adjustment Transfer Amount	\$936,162	\$446,249	\$78,427	\$105,428	\$52,941	\$95,582	\$72,406	\$85,130	\$0
\$18,869,647	2.8 Premium	\$18,869,647	\$9,406,896	\$1,446,227	\$2,768,336	\$810,888	\$2,341,476	\$824,734	\$1,271,089	\$0
24,721	2.9 Experience Period Member Months	24,721	11,784	2,071	2,784	1,398	2,524	1,912	2,248	0
	2.10 Current Enrollment	2,013	924	264	122	96	165	167	275	0
	2.11 Current Premium PMPM	\$768.29	\$838.22	\$748.82	\$989.88	\$623.71	\$902.68	\$449.65	\$617.04	\$0.00
	2.12 Loss Ratio	83.35%	72.17%	61.40%	138.17%	62.35%	95.46%	159.98%	14.01%	#DIV/0!
	Per Member Per Month									
	2.13 Allowed Claims	\$853.35	\$809.50	\$652.51	\$1,551.20	\$581.41	\$1,046.99	\$961.15	\$264.00	#DIV/0!
	2.14 Reinsurance	\$36.48	\$36.48	\$36.48	\$36.48	\$36.48	\$36.48	\$36.48	\$36.48	#DIV/0!
	2.15 Member Cost Sharing	\$149.12	\$169.61	\$164.02	\$88.51	\$159.70	\$88.78	\$174.02	\$143.03	#DIV/0!
	2.16 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!
	2.17 Incurred Claims	\$667.76	\$603.41	\$452.02	\$1,426.22	\$385.24	\$921.74	\$750.66	\$84.50	#DIV/0!
	2.18 Risk Adjustment Transfer Amount	\$37.87	\$37.87	\$37.87	\$37.87	\$37.87	\$37.87	\$37.87	\$37.87	#DIV/0!
	2.19 Premium	\$763.30	\$798.28	\$698.32	\$994.37	\$580.03	\$927.68	\$431.35	\$565.43	#DIV/0!

Section III: Plan Adjustment Factors									
3.1 Plan ID (Standard Component ID)	52899PA0030129	52899PA0030130	52899PA0030131	52899PA0030132	52899PA0030133	52899PA0030134	52899PA0030135	52899PA0030136	
3.2 Market Adjusted Index Rate	\$961.78								
3.3 AV and Cost Sharing Design of Plan	0.8321	0.7189	1.0134	0.7479	0.8456	0.6835	0.6004	0.5729	
3.4 Provider Network Adjustment	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
3.5 Benefits in Addition to EHB	1.0019	1.0019	1.0019	1.0019	1.0019	1.0019	1.0019	1.0019	
Administrative Costs									
3.6 Administrative Expense	8.95%	8.95%	8.95%	8.95%	8.95%	8.95%	8.95%	8.95%	
3.7 Taxes and Fees	0.44%	0.44%	0.44%	0.44%	0.44%	0.44%	0.44%	0.44%	
3.8 Profit & Risk Load	1.80%	1.80%	1.80%	1.80%	1.80%	1.80%	1.80%	1.80%	
3.9 Catastrophic Adjustment	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
3.10 Plan Adjusted Index Rate	\$902.85	\$780.02	\$1,099.56	\$811.49	\$917.50	\$741.61	\$651.45	\$621.61	

3.11 Age Calibration Factor	0.5523	0.5523							
3.12 Geographic Calibration Factor	0.9945	0.9945							
3.13 Tobacco Calibration Factor	0.9983	0.9983							
3.14 Calibrated Plan Adjusted Index Rate		\$495.06	\$427.71	\$602.92	\$444.96	\$503.09	\$406.65	\$357.21	\$340.85

Section IV: Projected Plan Level Information									
4.1 Plan ID (Standard Component ID)	Total	52899PA0030129	52899PA0030130	52899PA0030131	52899PA0030132	52899PA0030133	52899PA0030134	52899PA0030135	52899PA0030136
4.2 Allowed Claims	\$22,537,851	\$10,520,714	\$2,877,112	\$1,490,207	\$1,065,517	\$1,886,890	\$1,800,854	\$2,896,558	\$0
4.3 Reinsurance	\$809,133	\$371,433	\$105,943	\$48,962	\$38,832	\$66,267	\$67,111	\$110,586	\$0
4.4 Member Cost Sharing	\$5,459,379	\$1,911,742	\$755,722	\$357,417	\$256,545	\$607,510	\$523,236	\$1,047,207	\$0
4.5 Cost Sharing Reduction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4.6 Incurred Claims	\$16,269,339	\$8,237,539	\$2,015,447	\$1,083,829	\$770,140	\$1,213,113	\$1,210,506	\$1,738,765	\$0
4.7 Risk Adjustment Transfer Amount	-\$63,491	-\$29,146	-\$8,313	-\$3,842	-\$3,047	-\$5,200	-\$5,266	-\$8,677	\$0
4.8 Premium	\$19,502,168	\$9,534,454	\$2,349,443	\$1,530,573	\$895,938	\$1,728,637	\$1,414,964	\$2,048,160	\$0
4.9 Projected Member Months	23,004	10,560	3,012	1,392	1,104	1,884	1,908	3,144	0
4.10 Loss Ratio	83.70%	86.66%	86.09%	70.99%	86.25%	70.39%	85.87%	85.26%	#DIV/0!
Per Member Per Month									
4.11 Allowed Claims	\$979.74	\$996.28	\$955.22	\$1,070.55	\$965.14	\$1,001.53	\$943.84	\$921.30	#DIV/0!
4.12 Reinsurance	\$35.17	\$35.17	\$35.17	\$35.17	\$35.17	\$35.17	\$35.17	\$35.17	#DIV/0!
4.13 Member Cost Sharing	\$237.32	\$181.04	\$250.90	\$256.76	\$232.38	\$322.46	\$274.23	\$333.08	#DIV/0!
4.14 Cost Sharing Reduction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!
4.15 Incurred Claims	\$707.24	\$780.07	\$669.14	\$778.61	\$697.59	\$643.90	\$634.44	\$553.04	#DIV/0!
4.16 Risk Adjustment Transfer Amount	-\$2.76	-\$2.76	-\$2.76	-\$2.76	-\$2.76	-\$2.76	-\$2.76	-\$2.76	#DIV/0!
4.17 Premium	\$847.77	\$902.88	\$780.03	\$1,099.55	\$811.54	\$917.54	\$741.60	\$651.45	#DIV/0!

Rating Area Data Collection

*Specify the total number of Rating
Select only the Rating Areas you ar
To validate, select the Validate but
To finalize, select the Finalize butt*

Rating Area	Rating Factor
Rating Area 1	0.9660
Rating Area 5	1.0418

RFJ Part III: Actuarial Memorandum

General Information

The purpose of this actuarial memorandum is to provide certain information related to a rate submission for the company identified below. The relevant index rate is developed in accordance with federal regulations, and plan specific premiums are generated using the allowable modifiers in accordance with the single risk pool rule.

The following section provides information related to the identification of the company that is submitting this rate filing. Much of this information is also displayed in Table 0 of the PA Actuarial Memorandum Exhibits.

Please note that UPMC is migrating the Individual market business with policies issued under the legal entity UPMC Health Coverage, Inc. (HIOS Issuer ID 62560) to the legal entity UPMC Health Plan, Inc. (HIOS Issuer ID 52899), effective 1/1/2026. For the purposes of rate filing, we are treating this migration as a continuity of the market offering, and unless otherwise noted will consider UPMC Health Coverage, Inc. experience through 12/31/2025 to correspond to UPMC Health Plan, Inc. policies going forward.

Company Identifying Information:

Company Legal Name: UPMC Health Plan, Inc.

NAIC #: 95216

State: PA

HIOS Issuer ID: 52899

Market: Individual

Exchange: On and Off Exchange

Products: HMO

Effective Date: 1/1/2026

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Filing Information:

Rate Filing SERFF Tracking #: UPMC-134504084

Form Filing SERFF Tracking #: UPMC-134508630, UPMC-134508631

Binder SERFF Tracking #: UPMC-PA26-125120126

Rate History:

Historical and proposed rate changes vary by plan due to various changes made to meet AV requirements on a plan-by-plan basis. The values listed below and overall proposed rate change for 2026 are weighted averages of the increase for each plan based on projected enrollment. Please see Table 10 of the PA Actuarial Memorandum Exhibits for a breakdown of plan-by-plan rate increases.

SERFF Tracking #	Year	Rate Change*
UPMC-133257300	2023	4.4%
UPMC-133641900	2024	6.1%
UPMC-134082103	2025	4.7%

* Historical increases in this table are from PAAM Exhibits Table 10

** Structure of Table 10 leads to DIV/0 error in cell AC15 for 2021 filing

Proposed Rate Increase(s)

Reasons for Rate Increase(s):

The proposed rate increase calculated for HMO products in section I, worksheet 2 of the URRT is 14.5%

The largest drivers of the rate increase include the following:

- Increases in medical and pharmacy cost and utilization
- Anticipated increase in plan liability as a result of the expiration of enhanced APTC subsidies

Increases may vary by product due to annual changes in cost sharing, the impact of which may vary from plan to plan.

Market Experience

Single Risk Pool

The single risk pool consists of members that are anticipated to enroll in ACA-compliant policies offered under the captioned market.

Experience Period Premium and Claims

Paid Through Date:

The reported claims during the experience period have a paid through date of February 2025.

Current Date:

Current enrollment and premium data is reported as of February 15, 2025.

Premiums (net of MLR Rebate) in Experience Period:

Section I, worksheet 1 of the URRT contains calendar year 2024 premium for all non-grandfathered policies in the single risk pool for the captioned company and market. No adjustments were made for MLR rebates as we do not anticipate owing them. HHS cost-sharing is not included in the premium data. Please note that the earned premium is also listed in Table 2 of the PA Actuarial Memorandum Exhibits.

Allowed and Incurred Claims Incurred During the Experience Period:

Section I, worksheet 1 of the URRT contains calendar year 2024 claims experience for all non-grandfathered policies in the single risk pool for the captioned company and market, paid through February 2025. Allowed medical and pharmacy claims are pulled directly from our data warehouse. We used the standard

Development/Completion Factor Method to calculate IBNR. Factors were calculated using our entire block of ACA-related Individual business and no unexpected factors were observed.

Month	Completion Factor
1/1/2024	0.9999
2/1/2024	0.9998
3/1/2024	0.9992
4/1/2024	0.9986
5/1/2024	0.9976
6/1/2024	0.9963
7/1/2024	0.9933
8/1/2024	0.9914
9/1/2024	0.9876
10/1/2024	0.9788
11/1/2024	0.9608
12/1/2024	0.9537

The following table shows the ultimate paid claims for the experience period distinguished between claims paid and fully adjudicated and claims estimated by IBNR:

Incurred Claims Processed by Claim System:	\$ 19,128,966
Claims Processed Outside Claim System:	\$ -
Claims Estimated by IBNR:	\$ 263,176
Ultimate Incurred Claims:	\$ 19,392,143

Benefit Categories

Medical claims are split into nine categories in our data warehouse. They, along with pediatric dental & vision claims, are mapped into the categories in the URRT as follows:

UPMC Benefit Category	URRT Benefit Category
Inpatient	Inpatient Hospital
Catastrophic	Inpatient Hospital
Outpatient	Outpatient Hospital
Behavioral	Outpatient Hospital
PCP	Professional
Specialist	Professional
Diagnostic	Other Medical
ER	Other Medical
Other	Other Medical
Pediatric Dental	Other Medical
Pediatric Vision	Other Medical

Drug claims are in separate tables and directly mapped into the Prescription Drugs category. Note that services are the unit of measurement used for the Other Medical category.

Projection Factors

Trend Factors (cost/utilization):

The overall annual trend used in rate development is 7.76%. Historical allowed claims from our Individual block of ACA-compliant business across all of UPMC's subsidiary companies were used to develop trend factors for use in the projected rates, and the basis for this trend is a least squares regression analysis on 12-month rolling cost and utilization claims experience between 2022 and 2024. The selected trends consider the regression results in each category (Inpatient Hospital, Outpatient Hospital, Professional, Other Medical, and Prescription Drug), and incorporate the influence of anticipated changes in, as an example, the mix of services within a category. The selected aggregate trend is the weighted average aggregation of the component trends.

The large enrollment count and consistent makeup of this population make it appropriate for use in trend development for this filing. Service categories were defined to be consistent with the URRT instructions. Please see Tables 3 and 3b of the PA Actuarial Memorandum Exhibits for trend development calculations. No changes in provider contracting are expected between the experience and projection periods, and therefore, no adjustments have been applied.

Adjustments to Trended EHB Allowed Claims PMPM

Changes in the Morbidity of the Population Insured:

For 2026, the Pennsylvania Insurance Department has mandated that an adjustment factor of 1.0 is applied to the index rate to reflect the morbidity impact of the state-based reinsurance program in the Individual market. In line with that guidance, no adjustment for changes in morbidity as a result of the state-based reinsurance program has been applied.

An adjustment factor of 1.018 has been made in the Change in Morbidity - All Other category to account for the anticipated increase in plan liability as a result of adverse selection in 2026 due to the expiration of the federal enhanced Premium Tax Credits which are set to expire at the end of 2025. Please see Exhibit 13 of the Supporting Exhibits for the derivation of this factor.

Changes in Benefits:

An adjustment factor of 0.979 has been made in the Change in Benefits category to account for the impact of on Allowed Claims in the projected period due to differences in induced demand between the experience period and the projected period. This impact is measured as the change in average induced demand factor between the experience period and the projected period, using the projected enrollment to determine the difference in plan mix when compared to the experience period. Plan design changes for 2026 are also accounted for. Please see Exhibit 6 of the Supporting Exhibits for the derivation of this factor.

Changes in Demographics:

The average age for our experience period Individual risk pool was 44.0 with an average premium factor of 1.83. This compares to our 2025 experience so far with age 43.8 and premium factor 1.82. An adjustment of 1.010 has been made in the Change in Demographics category to account for the difference between both the average age and the average geography of the experience period enrollment relative to the projected enrollment. Please see Exhibit 5 of the Supporting Exhibits for the derivation of this factor.

Other Adjustments:

An adjustment factor of 1.398 has been made in the Change in Network category to account for differences in expected allowed claims costs between the manual data and that of the captioned company. This adjustment factor brings the captioned company index rate in line with the current characteristics of the provider networks. Please see Exhibit 7 of the Supporting Exhibits for the derivation of this factor.

An adjustment factor of 0.980 has been applied to the index rate in the Change in Other category. This adjustment accounts for itemized differences between the 2024 experience period and the 2026 projection period, such as the impact of pharmacy rebate receipts in the projected period differing from those in the experience period. Please see Exhibit 8 of the Supporting Exhibits for the derivation of the Change in Other factor applied in Table 5.

Credibility Manual Rate Development

Source and Appropriateness of Manual Rate Used:

The manual data for this filing was developed using the entirety of ACA-compliant experience period data from each of UPMC's subsidiary companies in the Individual market, excluding experience from members domiciled in Rating Areas 6 and 7, and is displayed in tables 2b, 3b, and 4b in the PA Actuarial Memorandum Exhibits. The manual data consists of 1,262,789 member months of experience.

Adjustments Made to the Data:

Adjustments made to the manual data are discussed in the "Projection Factors" section above.

Inclusion of Capitation Payments:

No benefits are projected to be paid for via capitation.

Credibility of Experience

The experience period data for this company consists of 24,721 member months from ACA-compliant policies. Because the manual data encompasses the single risk pool of all UPMC Individual market companies, we believe it most appropriately represents the claim experience for use in calculating projected rates. Therefore, we assign 100% credibility to the manual data and 0% credibility is used for each company-specific single risk pool. Adjustments to the data include the trend and network adjustments discussed in the "Index Rate" section below.

Establishing the Index Rate

For this filing, the Index Rate of the Experience Period is set equal to the manual rate due to align with the single risk pool Index Rate. The calculation of the manual rate is shown in Table 2b of the PA Actuarial Memorandum Exhibits. The Index Rate of the Projection Period is then calculated in Table 5 by first applying two years of 7.76% annual trend to the Index Rate of Experience Period. The adjustments described in the Projection Factors section above were then applied to the trended manual rate to generate the Index Rate of the Projection Period. Please note that the Index Rate of Projection Period of \$977.84 shown in Table 5 matches the corresponding value shown in section II, worksheet 1 of the URRT. Please also note that claims

corresponding to non-EHBs were not included in the calculation of the index rates despite being covered during the experience period.

Paid to Allowed Ratio

The Paid to Allowed Average Factor was calculated by taking the weighted average of the company-determined Actuarial Values for all plans using projected membership as demonstrated in Table 10 of the PA Actuarial Memorandum Exhibits.

Development of the Market Adjusted Index Rate

The Projected Index Rate is adjusted by adding estimates for Risk Adjustment and Marketplace Fees (with impacts and costs spread across the whole risk pool) to obtain the projected Market Adjusted Index Rate. Derivation of the PMPM values used for the Risk Adjustment, Marketplace Fees adjustments, and projected Reinsurance recoveries are described in the following sections.

Experience Period Risk Adjustment and Reinsurance Adjustments PMPM:

Experience period Risk Adjustment for the captioned company is estimated to be a receipt of \$936,162 per the Pennsylvania Insurance Department Risk Adjustment Department Model for Benefit Year 2024. The receipt translates to a PMPM of \$37.87. This information was disseminated by the Department on May 7, 2025 via e-mail.

Experience period recoveries from the state-based reinsurance program are estimated to be a receivable of \$901,733 for the captioned company. This estimate was calculated based on a member-level analysis using data from UPMC's data warehouse for the experience period using an attachment point of \$60,000, a ceiling of \$100,000, and a reimbursement rate of 60% of costs in between those points. The estimate translates to a PMPM of \$36.48.

Projected Risk Adjustments PMPM:

Projection period Risk Adjustment PMPM has been estimated to be a payment of \$2.76, which is displayed in Table 5. First, UPMC considered the CY 2024 transfer provided by the Department on May 7, 2025. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Finally, the Projection Period Risk Adjustment transfer PMPM accounts for the impact of known changes to HHS model weights for the 2026 Benefit Period, as well as the impact of the assumed change in the statewide average premium between 2024 and 2026 to scale the result accordingly. The transfer amount is not adjusted to reflect the estimated impact of the Risk Adjustment Data Validation (RADV) program, as there have been fluctuations in the program's impact directionally in recent years. UPMC relies on analysis by Wakely Consulting in estimating the impacts of both the 2026 model changes and the RADV program.

The projected transfer assumes a \$0 High Cost Risk Pool (HCRP) recovery net of the program's surcharge.

Please see Exhibit 9 of the Supporting Exhibits for the derivation of this estimate.

The value entered in Section II, Worksheet 1 of the URRT was (\$3.54) since the calculation of the Market Adjusted Index Rate is done on an allowed claims basis in the URRT. The updated PMPM was derived by taking the original paid PMPM divided by the Paid to Allowed Average Factor. The net amount after accounting for the fee is subtracted from the Index Rate of the Projection Period as part of the calculation of the Market Adjusted Index Rate. For the URRT and Table 5 of the PA Actuarial Memorandum Rate Exhibits, it was entered as a negative number because the calculation subtracts this value. The effect is an increase in premium as more revenue will be required due to the anticipated payment.

Exchange User Fees:

The member-weighted average of a 3.0% Marketplace User Fee for Marketplace enrollees combined with 0% for non-Marketplace enrollees calculates to 2.4%. This load is developed based on fees from on-exchange policies, but is spread over all policies uniformly. This translates to a PMPM of \$19.94, which was entered as a positive value in Table 5 since the calculation adds this value. The effect for this adjustment is an increase in premium as additional revenue will be required to cover the anticipated payment. Since the URRT requires the exchange user fee to be listed on an "allowed" basis, the final value included in the URRT was calculated by first taking exchange user fee PMPM of \$19.94 divided by the paid-to-allowed ratio to derive the "allowed" exchange user fee PMPM. This value was then divided by the market adjusted index rate to arrive at the final value of 2.7%.

Estimated Reinsurance Recoveries PMPM:

The index rate was further adjusted by accounting for estimated recoveries from the state-based reinsurance program. Estimated recoveries applied in Table 5 and Section II, Worksheet 1 of the URRT were \$35.17 PMPM and \$45.18 PMPM, respectively. The value entered in the URRT was derived by taking the Table 5 recovery PMPM and dividing by the Paid to Allowed Average Factor, as the calculation of the Market Adjusted Index Rate is done on an allowed claims basis. These values were entered as positive values in Table 5 and the URRT since both calculations subtract these values. The result of this adjustment is a decrease in projected period premium as less revenue will be required due to the anticipated recovery.

The estimated recovery of \$35.17 PMPM was derived using data entered into worksheets I.b, II.a, and II.b of the PA Actuarial Memorandum exhibits. Data entered into worksheet II.a matches the experience period data described in the sections above, and worksheet II.b was populated by referencing the same source of experience captured in worksheet II.a, but with member-level incurred claims trended forward two years to the projection period before allocating the data to each range within the continuance table. An annualized claims trend of 7.76% was applied to estimate the projected member-level claims used to populate worksheet II.b. The

projected recovery as a percent of claims is calculated using a per-member attachment of \$60,000, a cap of \$100,000, and a coinsurance rate of 43%, as communicated by the Pennsylvania Insurance Department via the Final Rate Filing Guidance for 2026. The formula in Table 5 (cell C33) calculates the percent of projected paid claims, before pharmacy rebates, that the reinsurance recovery reflects, to align with the data in the continuance table in worksheet II.b.

Non-Benefit Expenses and Profit & Risk

Administrative Expense Load:

Administrative costs of 8.9% of premium have been displayed in Table 6 and the URRT. This value has been derived from projected administrative costs for the projection period. These expenses are assumed to be uniform for all plan designs.

Profit & Risk Margin:

The projected surplus and risk margin for this company is 1.8% for 2026. This value is listed in both Table 6 and the URRT. The same level of margin is expected for each plan included in this filing.

Taxes and Fees:

Taxes and Fees are expected to be 0.4% of premium in 2026. This accounts for the projected Federal Income Tax in 2026. Please note that the Risk Adjustment User Fee of \$0.20 PMPM and the projected PCORI Fee of \$0.29 PMPM were included in the Taxes and Fees field in Table 6 and the URRT.

Plan Adjusted Index Rates

Table 10 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance to develop 2026 Plan Adjusted Index Rates. The allowable modifiers that are used in rate development are described below.

Plan Actuarial Value:

The AV for each plan was determined by the issuer's own pricing model based on experience from UPMC's Individual Market block of business. This model calculates an AV for a given plan by first trending 2024 allowed claims data forward two years to the projection period, calculating paid amounts for each benefit category based on the benefit design of a given plan and projected allowed claims data, and taking the ratio of the total projected paid claims to projected allowed claims. Since the same tool was used for all plans, this eliminates any impact from morbidity at the plan level, and differing rate increases by product type are purely based on differences in benefit design for all plans within a given product.

Benefit Richness (induced demand)

Benefit richness factors were calculated using the formula $(\text{Plan AV})^2 - (\text{Plan AV}) + 1.24$, where (Plan AV) is equal to the product of the Plan AV described above and, when applicable, the Non-Funding of CSR Adjustment described below on a plan-by-plan basis. This formula was prescribed by the Pennsylvania Insurance Department and has been developed to produce induced demand factors that mimic those determined by HHS. The initial factors calculated using this formula were then normalized against projected membership by plan.

Benefits in addition to EHBs

Benefits that will be offered outside EHB include routine foot care, acupuncture, dental anesthesia, diabetes care management, inherited metabolic disorder, treatment for TMJ, and gender affirming care. The projected allowed claims for these benefits is \$1.89 PMPM. The adjustment factor of 1.002 included in Table 10 has been derived by adding the aforementioned PMPM to the projected index rate for 2026 and dividing this total by the same index rate, causing the adjustment to be applied uniformly to all plans.

Provider Network

Since only one network is included in this filing, no network adjustments were deemed necessary for 2026.

Catastrophic Eligibility

No adjustments were made for catastrophic plans. Current enrollment is minimal and not credible.

Non-Funding of CSR Adjustment

To account for the elimination of funding for cost-share reduction subsidies, the Pennsylvania Insurance Department has mandated the rates for all silver plans offered both on and off the exchange be increased via the CSR Defunding Adjustment in Table 10 of the Actuarial Memorandum Rate Exhibits. The captioned company will apply a factor of 1.22 as the CSR Defunding Adjustment for 2026. Several off-exchange only silver plans continue to be included for 2026 to minimize disruption to non-subsidized members enrolled in silver plans.

[REDACTED]

We are in the process of determining the best approach to estimate the PY 2024 liability associated with CSR reimbursement that would have been received from the federal government under the original CSR funding arrangement of the ACA, in response to the Bulletin issued by CMS on May 2, 2025, and the email guidance from the Department that followed. Additionally, we are still considering the potential implications on rate sufficiency of a scenario in which Congress reinstates CSR funding for PY 2026; we note that the CSR load is likely to be removed entirely, but the aggregate rate change may be impacted in either direction as a result of the many other dynamic market factors influencing a market that, in that instance, would be suddenly reoriented after seven years of Silver loading. We intend to work with the Department to address and communicate these considerations in advance of the June 2, 2025 deadline established during the Department conference call on May 12, 2025.

Calibration

Age Curve Calibration:

The average age factor was calculated using our projected ACA-related Individual population with the prescribed HHS Age Factors for 2026. It was assumed this represents the age distribution of the entire single risk-pool. The number of members under each age bracket was multiplied by the corresponding HHS Age Factor. These were then summed and divided by the total number of members to obtain the average age factor. For UPMC's entire block of ACA-compliant Individual business, the average age factor is 1.817 and average age is 43.8 for the projected enrollment. This preliminary age factor is then multiplied by an adjustment factor of 0.996, which accounts for the regulation that prohibits charging for more than three children per family, resulting in a final age calibration factor of 1.810. Please see Exhibit 1 in the Supporting Exhibits for the calculation of this factor.

Geographic Factor Calibration:

The geographic rating areas used within this filing are the same as those defined by the state. For 2026, the proposed geographic factors are identical to the 2025 filing for this company with the exception of Rating Area 5. The table below displays the current and proposed factors:

Region	2025	2026
1	0.966	0.966
5	1.011	1.042

The proposed factor for Rating Area 5 acknowledges the elevated costs observed in that region relative to other regions after accounting for age, benefit level, and morbidity. Please see Exhibit 12 of the Supporting Exhibits for an illustration of this change.

The calibration factor of 1.006 was calculated as the weighted average of the proposed geographical factors using projected enrollment for the cationed company, as shown in Exhibit 2 of the Supporting Exhibits.

Tobacco Use Rating Factor Calibration:

The average tobacco factor was calculated using projected membership, which is assumed to have the same split for tobacco status as current membership. The member-weighted average of a 2.5% load applied for enrollees who qualify as tobacco users combined with a 0% load for non-tobacco users yields an average tobacco factor of 1.002. The derivation of this factor is shown below.

Tobacco Status	Feb 2025 Enrollment Split	Tobacco Factor	Calibration Factor
Non-User	93.1%	1.000	0.931
User	6.9%	1.025	0.070
Total	100.0%		1.002

Consumer Adjusted Premium Rate Development

Table 11 of the PA Actuarial Memorandum Exhibits has been populated as described in federal and state guidance. 2025 rates calculated in this table were tested to ensure that they match those included in the PA

Plan Design Summary and Rate Tables, Federal Rates Template, and the binder. The Plan Adjusted Index Rates are divided by the age calibration factor then multiplied by the specific age/tobacco and geographic factors shown in Tables 12 and 13 of the PA Actuarial Memorandum Exhibits, respectively, to develop the Consumer Adjusted Premium Rates.

Projected Loss Ratio

The projected period loss ratio, using the federally-prescribed MLR methodology without the credibility adjustment, is 88.3%, as shown in Worksheet VIII of the PAAM Exhibits.

Plan Product Info

AV Metal Values

Metal values were determined using the final 2026 HHS AV Calculator. For plans with designs that were incompatible with the AV Calculator, a Supporting Documentation and Justification narrative has been included with the AV Screenshots.

All plans have metal level actuarial values in accordance with the 2026 Marketplace Integrity and Affordability Proposed Rule. If the AV-related provisions of the proposed rule are not adopted in the final rule, a revised filing will be submitted.

Membership Projections

Typically we would equate the total projected lives in column W of worksheet III Plan Rates with the current enrollment in column V. For 2026, we anticipate a decrease in enrollment as a result of the expiration of enhanced federal Premium Tax Credits, and have decreased the projected enrollment accordingly. The reduced projected enrollment was allocated across plan and age projections proportionally, reflecting that we do not have any reason to believe the average age or AV will be different as a result of this membership decline.

Terminated Plans and Products

Please see Table 10 of the PA Actuarial Memorandum Exhibits for a mapping of all terminated SCIDs to a 2026 plan, where applicable.

Warning Alerts

Several warning messages appear after clicking the validate button in the URRT. These messages highlight the

fact that several terminated or renewing plans have entries of zero in the current enrollment and premium PMPM fields on worksheet 2 of the URRT. Similar messages have appeared in the URRT in prior years across UPMC companies for similar reasons.

Effective Rate Review Information

The Pennsylvania Insurance Department is responsible for conducting effective rate review for all submitted rates.

Reliance

Below is a summary of the information that we have relied on as part of rate development.

Source	Type of Information	Comments
██████████, Sr. Director, Commercial Products	Projected administrative expenses, projected quality and provider incentive liabilities	I have not performed any independent audit or otherwise verified the accuracy of this data/information.
████████████████████, Vice President, Risk Revenue Operations	Projected period Risk Adjustment transfer	I have not performed any independent audit or otherwise verified the accuracy of this data/information.
██████████, Sr. Manager, Pharmacy Analytics	Pharmacy Rebate Reporting and Projections	I have not performed any independent audit or otherwise verified the accuracy of this data/information.
██████████, Director, Financial Reporting	MLR Rebate Reporting and MLR Rebate Improving HCQ Expense Projections	I have not performed any independent audit or otherwise verified the accuracy of this data/information.

List of Supporting Exhibits

Supporting exhibits have been included with the rate filing to assist with the review process. Below is a list summarizing the contents of each exhibit.

- Exhibit 1: Derivation of Age Calibration Factor
- Exhibit 2: Derivation of Geographical Calibration Factor
- Exhibit 3: Current/Projected Commissions by OEP and SEP
- Exhibit 4: Derivation of 3-Child Cap Adjustment Factor
- Exhibit 5: Derivation of Change in Demographics Factor
- Exhibit 6: Derivation of Change in Benefits Factor
- Exhibit 7: Derivation of Change in Network Factor
- Exhibit 8: Derivation of Change in Other Factor
- Exhibit 9: Derivation of Projected Risk Adjustment PMPM
- Exhibit 9a: Risk Transfer Adjustment Support
- Exhibit 10: Projected Administrative Expense Load Development
- Exhibit 11: Derivation of Projected Taxes and Fees
- Exhibit 12: Derivation of Geographic Rating Factor Changes
- Exhibit 13: Derivation of Change in Morbidity Factor

Actuarial Certification

I, [REDACTED], am a Member of the American Academy of Actuaries in good standing. I am currently Manager for ACA products in the Actuarial Services department for UPMC Health Plan. I certify that:

- All factor, benefit and other changes from the prior approved filing have been disclosed in this actuarial memorandum.
- New plans cannot be considered modifications of existing plans under the uniform modification standards in 45 CFR § 147.106.
- The information presented in the PA Actuarial Memorandum and PA Actuarial Memorandum Rate Exhibits is consistent with the information presented in the 2025 Rate Filing Justification.
- The projected Index Rate is:
 - a. In compliance with all applicable state and Federal statutes and regulations (45 CFR § 156.80 and § 147.102)
 - b. Developed in compliance with the applicable Actuarial Standards of Practice
 - c. Reasonable in relation to the benefits provided and the population anticipated to be covered
 - d. Neither excessive nor deficient
- The Index Rate and only the allowable modifiers as described in 45 CFR § 156.80(d)(1) and § 156.80(d)(2) were used to generate plan level rates.
- The geographic rating factors reflect only differences in the costs of delivery and do not include differences for population morbidity by geographic area.
- The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I URRT for all plans except those specified in the certification.

[REDACTED]

UPMC Health Plan

5/15/2025

Date

RFJ Part II – Consumer Friendly Justification

Individual Exchange HMO Rate Filing

The rate change for UPMC Health Plan Individual plans is 16.28% for 2026. Rate change drivers include the following:

- Increases in medical and pharmacy cost and utilization
- Changes to the state reinsurance program for the Individual health insurance market
- Anticipated increase in plan liability as a result of the expiration of enhanced federal Premium Tax Credits

Scope and Range of the Rate Increase

The number of individuals affected by this rate increase is 2,013. The proposed rate increase varies by plan due to various changes made to meet AV requirements on a plan-by-plan basis. The range of the proposed rate change is 3.96% to 21.50%.

Financial Experience of the Product

UPMC Health Options incurred an underwriting gain the ACA Individual market in 2024.

Changes in Medical Service Costs

Cost and utilization increases are expected to increase by approximately 7.76% for 2026.

Changes in Benefits

No changes in benefits contributed significantly to the increase.

Administrative Costs and Anticipated Margins

Changes in administrative costs contribute to the rate increase. This rate filing anticipates a surplus and risk margin for 2026.

2026 Rates Table Template v15.0		<i>All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.</i>			
		<i>If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.</i>			
		<i>If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.</i>			
		<i>If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.</i>			
		<i>To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.</i>			
HIOS Issuer ID*		52899			
Rate Effective Date*		1/1/2026			
Rate Expiration Date*		12/31/2026			
Rating Method*		Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an Individual tobacco enrollee on a plan
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	365.87	365.87
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	15	398.39	398.39
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	16	410.83	410.83
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	17	423.26	423.26
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	18	436.65	436.65
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	19	450.04	450.04
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	20	463.91	463.91
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	21	478.26	490.22
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	22	478.26	490.22
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	23	478.26	490.22
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	24	478.26	490.22
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	25	480.17	492.18
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	26	489.74	501.98
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	27	501.22	513.75
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	28	519.87	532.87
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	29	535.17	548.55
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	30	542.83	556.40
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	31	554.30	568.16
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	32	565.78	579.93
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	33	572.96	587.28
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	34	580.61	595.12
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	35	584.43	599.04
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52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	37	592.09	606.89
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	38	595.91	610.81
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52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	43	649.00	665.22
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52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	48	781.96	801.50
52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	49	815.91	836.31
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52899PA0030129	Rating Area 1	Tobacco User/Non-Tobacco User	56	1115.78	1143.68
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52899PA0030133 Rating Area 1	Tobacco User/Non-Tobacco User	24	486.02	498.17
52899PA0030133 Rating Area 1	Tobacco User/Non-Tobacco User	25	487.96	500.16
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52899PA0030133 Rating Area 1	Tobacco User/Non-Tobacco User	29	543.86	557.45
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52899PA0030133 Rating Area 1	Tobacco User/Non-Tobacco User	41	632.80	648.62
52899PA0030133 Rating Area 1	Tobacco User/Non-Tobacco User	42	643.98	660.08
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52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	39	661.50	678.04
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52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	41	682.47	699.53
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	42	694.53	711.89
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52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	45	756.90	775.82
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	46	786.26	805.91
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	47	819.28	839.76
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	48	857.02	878.44
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	49	894.23	916.59
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	50	936.17	959.57
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52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	53	1069.31	1096.04
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	54	1119.10	1147.08
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	55	1168.90	1198.12
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	56	1222.89	1253.46
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	57	1277.40	1309.34
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	58	1335.59	1368.97
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	59	1364.41	1398.52
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	60	1422.60	1458.16
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	61	1472.92	1509.74
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	62	1505.94	1543.59
52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	63	1547.35	1586.03

52899PA0030133 Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1572.51	1611.82
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	0-14	328.85	328.85
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	15	358.08	358.08
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	16	369.26	369.26
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	17	380.43	380.43
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	18	392.47	392.47
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	19	404.51	404.51
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	20	416.97	416.97
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	21	429.87	440.62
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	22	429.87	440.62
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	23	429.87	440.62
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	24	429.87	440.62
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	25	431.59	442.38
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	26	440.19	451.19
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	27	450.50	461.77
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	28	467.27	478.95
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	29	481.02	493.05
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	30	487.90	500.10
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	31	498.22	510.67
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	32	508.54	521.25
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	33	514.98	527.86
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	34	521.86	534.91
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	35	525.30	538.43
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	36	528.74	541.96
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	37	532.18	545.48
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	38	535.62	549.01
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	39	542.50	556.06
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	40	549.37	563.11
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	41	559.69	573.68
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	42	569.58	583.82
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	43	583.33	597.92
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	44	600.53	615.54
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	45	620.73	636.25
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	46	644.81	660.93
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	47	671.89	688.68
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	48	702.84	720.41
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	49	733.36	751.69
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	50	767.75	786.94
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	51	801.71	821.75
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	52	839.11	860.08
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	53	876.93	898.86
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	54	917.77	940.72
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	55	958.61	982.58
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	56	1002.89	1027.96
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	57	1047.59	1073.78
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	58	1095.31	1122.69
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	59	1118.95	1146.93
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	60	1166.67	1195.83
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	61	1207.93	1238.13
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	62	1235.02	1265.89
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	63	1268.98	1300.70
52899PA0030132 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1289.61	1321.85
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	0-14	354.67	354.67
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	15	386.20	386.20
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	16	398.25	398.25
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	17	410.30	410.30
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	18	423.29	423.29
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	19	436.27	436.27
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	20	449.71	449.71
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	21	463.62	475.21
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	22	463.62	475.21
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	23	463.62	475.21
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	24	463.62	475.21
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	25	465.47	477.11
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	26	474.75	486.62
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	27	485.87	498.02
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	28	503.95	516.55
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	29	518.79	531.76
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	30	526.21	539.36
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	31	537.34	550.77
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	32	548.46	562.17
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	33	555.42	569.30
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	34	562.83	576.91
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	35	566.54	580.71
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	36	570.25	584.51
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	37	573.96	588.31
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	38	577.67	592.11
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	39	585.09	599.72
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	40	592.51	607.32
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	41	603.63	618.72
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	42	614.30	629.65
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	43	629.13	644.86
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	44	647.68	663.87
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	45	669.47	686.20
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	46	695.43	712.82
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	47	724.64	742.75
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	48	758.02	776.97
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	49	790.94	810.71
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	50	828.03	848.73
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	51	864.65	886.27
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	52	904.99	927.61
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	53	945.78	969.43
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	54	989.83	1014.57
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	55	1033.87	1059.72
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	56	1081.63	1108.67
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	57	1129.84	1158.09
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	58	1181.30	1210.84
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	59	1206.80	1236.97
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	60	1258.26	1289.72
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	61	1302.77	1335.34
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	62	1331.98	1365.28
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	63	1368.61	1402.82
52899PA0030132 Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1390.86	1425.63
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	0-14	300.51	300.51
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	15	327.22	327.22
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	16	337.43	337.43
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	17	347.65	347.65
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	18	358.64	358.64
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	19	369.64	369.64
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	20	381.04	381.04
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	21	392.82	402.64

52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	22	392.82	402.64
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	23	392.82	402.64
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	24	392.82	402.64
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	25	394.39	404.25
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	26	402.25	412.30
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	27	411.68	421.97
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	28	427.00	437.67
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	29	439.57	450.55
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	30	445.85	457.00
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	31	455.28	466.66
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	32	464.71	476.32
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	33	470.60	482.36
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	34	476.88	488.81
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	35	480.03	492.03
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	36	483.17	495.25
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	37	486.31	498.47
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	38	489.45	501.69
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	39	495.74	508.13
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	40	502.02	514.57
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	41	511.45	524.24
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	42	520.49	533.50
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	43	533.06	546.38
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	44	548.77	562.49
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	45	567.23	581.41
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	46	589.23	603.96
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	47	613.98	629.33
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	48	642.26	658.32
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	49	670.15	686.90
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	50	701.58	719.12
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	51	732.61	750.92
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	52	766.78	785.95
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	53	801.35	821.39
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	54	838.67	859.64
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	55	875.99	897.89
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	56	916.45	939.36
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	57	957.30	981.23
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	58	1000.91	1025.93
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	59	1022.51	1048.07
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	60	1066.11	1092.77
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	61	1103.82	1131.42
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	62	1128.57	1156.79
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	63	1159.60	1188.59
52899PA0030134 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1178.46	1207.92
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	0-14	324.10	324.10
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	15	352.91	352.91
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	16	363.92	363.92
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	17	374.94	374.94
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	18	386.80	386.80
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	19	398.66	398.66
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	20	410.95	410.95
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	21	423.66	434.25
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	22	423.66	434.25
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	23	423.66	434.25
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	24	423.66	434.25
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	25	425.35	435.99
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	26	433.83	444.67
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	27	444.00	455.10
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	28	460.52	472.03
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	29	474.08	485.93
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	30	480.85	492.88
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	31	491.02	503.30
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	32	501.19	513.72
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	33	507.54	520.23
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	34	514.32	527.18
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	35	517.71	530.66
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	36	521.10	534.13
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	37	524.49	537.60
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	38	527.88	541.08
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	39	534.66	548.03
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	40	541.44	554.97
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	41	551.61	565.40
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	42	561.35	575.38
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	43	574.91	589.28
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	44	591.85	606.65
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	45	611.77	627.06
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	46	635.49	651.38
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	47	662.18	678.74
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	48	692.68	710.00
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	49	722.76	740.83
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	50	756.66	775.57
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	51	790.13	809.88
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	52	826.98	847.66
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	53	864.27	885.87
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	54	904.51	927.13
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	55	944.76	968.38
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	56	988.40	1013.11
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	57	1032.46	1058.27
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	58	1079.49	1106.47
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	59	1102.79	1130.36
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	60	1149.81	1178.56
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	61	1190.48	1220.25
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	62	1217.18	1247.60
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	63	1250.64	1281.91
52899PA0030134 Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1270.98	1302.75
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	0-14	263.98	263.98
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	15	287.44	287.44
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	16	296.42	296.42
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	17	305.39	305.39
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	18	315.05	315.05
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	19	324.71	324.71
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	20	334.72	334.72
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	21	345.07	353.70
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	22	345.07	353.70
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	23	345.07	353.70
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	24	345.07	353.70
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	25	346.45	355.11
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	26	353.35	362.19
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	27	361.63	370.67
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	28	375.09	384.47
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	29	386.13	395.79
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	30	391.65	401.45

52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	31	399.94	409.93
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	32	408.22	418.42
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	33	413.39	423.73
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	34	418.91	429.39
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	35	421.68	432.22
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	36	424.44	435.05
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	37	427.20	437.88
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	38	429.96	440.71
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	39	435.48	446.37
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	40	441.00	452.02
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	41	449.28	460.51
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	42	457.22	468.65
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	43	468.26	479.97
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	44	482.06	494.11
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	45	498.28	510.74
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	46	517.61	530.55
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	47	539.34	552.83
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	48	564.19	578.29
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	49	588.69	603.41
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	50	616.30	631.70
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	51	643.56	659.64
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	52	673.58	690.42
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	53	703.94	721.54
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	54	736.72	755.14
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	55	769.51	788.74
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	56	805.05	825.17
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	57	840.94	861.96
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	58	879.24	901.22
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	59	898.22	920.67
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	60	936.52	959.93
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	61	969.65	993.89
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	62	991.39	1016.17
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	63	1018.65	1044.11
52899PA0030135 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1035.21	1061.09
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	0-14	284.70	284.70
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	15	310.01	310.01
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	16	319.69	319.69
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	17	329.36	329.36
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	18	339.78	339.78
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	19	350.20	350.20
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	20	361.00	361.00
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	21	372.16	381.46
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	22	372.16	381.46
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	23	372.16	381.46
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	24	372.16	381.46
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	25	373.65	382.99
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	26	381.09	390.62
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	27	390.02	399.77
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	28	404.54	414.65
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	29	416.45	426.86
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	30	422.40	432.96
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	31	431.33	442.12
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	32	440.27	451.27
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	33	445.85	456.99
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	34	451.80	463.10
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	35	454.78	466.15
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	36	457.76	469.20
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	37	460.73	472.25
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	38	463.71	475.30
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	39	469.67	481.41
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	40	475.62	487.51
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	41	484.55	496.67
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	42	493.11	505.44
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	43	505.02	517.65
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	44	519.91	532.91
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	45	537.40	550.83
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	46	558.24	572.20
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	47	581.69	596.23
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	48	608.48	623.69
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	49	634.90	650.78
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	50	664.68	681.29
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	51	694.08	711.43
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	52	726.46	744.62
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	53	759.21	778.19
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	54	794.56	814.43
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	55	829.92	850.66
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	56	868.25	889.96
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	57	906.95	929.63
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	58	948.26	971.97
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	59	968.73	992.95
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	60	1010.04	1035.29
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	61	1045.77	1071.91
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	62	1069.22	1095.95
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	63	1098.62	1126.08
52899PA0030135 Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1116.48	1144.39
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	0-14	251.91	251.91
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	15	274.31	274.31
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	16	282.87	282.87
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	17	291.43	291.43
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	18	300.65	300.65
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	19	309.87	309.87
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	20	319.42	319.42
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	21	329.30	337.53
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	22	329.30	337.53
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	23	329.30	337.53
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	24	329.30	337.53
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	25	330.62	338.88
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	26	337.20	345.63
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	27	345.11	353.73
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	28	357.95	366.90
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	29	368.49	377.70
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	30	373.76	383.10
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	31	381.66	391.20
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	32	389.56	399.30
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	33	394.50	404.36
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	34	399.77	409.76
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	35	402.40	412.46
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	36	405.04	415.16
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	37	407.67	417.87
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	38	410.31	420.57
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	39	415.58	425.97

52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	40	420.85	431.37
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	41	428.75	439.47
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	42	436.32	447.23
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	43	446.86	458.03
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	44	460.03	471.53
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	45	475.51	487.40
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	46	493.95	506.30
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	47	514.70	527.56
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	48	538.41	551.87
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	49	561.79	575.83
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	50	588.13	602.83
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	51	614.14	629.50
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	52	642.79	658.86
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	53	671.77	688.57
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	54	703.06	720.63
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	55	734.34	752.70
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	56	768.26	787.46
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	57	802.50	822.57
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	58	839.06	860.03
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	59	857.17	878.60
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	60	893.72	916.06
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	61	925.33	948.47
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	62	946.08	969.73
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	63	972.09	996.40
52899PA0030136 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	987.90	1012.60
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	0-14	271.69	271.69
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	15	295.84	295.84
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	16	305.07	305.07
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	17	314.31	314.31
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	18	324.25	324.25
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	19	334.20	334.20
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	20	344.50	344.50
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	21	355.15	364.03
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	22	355.15	364.03
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	23	355.15	364.03
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	24	355.15	364.03
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	25	356.57	365.48
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	26	363.67	372.77
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	27	372.20	381.50
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	28	386.05	395.70
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	29	397.41	407.35
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	30	403.10	413.17
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	31	411.62	421.91
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	32	420.14	430.65
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	33	425.47	436.11
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	34	431.15	441.93
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	35	433.99	444.84
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	36	436.83	447.76
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	37	439.68	450.67
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	38	442.52	453.58
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	39	448.20	459.40
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	40	453.88	465.23
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	41	462.41	473.97
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	42	470.57	482.34
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	43	481.94	493.99
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	44	496.14	508.55
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	45	512.84	525.66
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	46	532.73	546.04
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	47	555.10	568.98
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	48	580.67	595.19
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	49	605.89	621.03
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	50	634.30	650.16
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	51	662.35	678.91
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	52	693.25	710.58
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	53	724.51	742.62
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	54	758.25	777.20
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	55	791.98	811.78
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	56	828.56	849.28
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	57	865.50	887.14
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	58	904.92	927.55
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	59	924.46	947.57
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	60	963.88	987.97
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	61	997.97	1022.92
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	62	1020.35	1045.85
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	63	1048.40	1074.61
52899PA0030136 Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1065.45	1092.09
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	0-14	316.08	316.08
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	15	344.18	344.18
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	16	354.92	354.92
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	17	365.66	365.66
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	18	377.23	377.23
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	19	388.80	388.80
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	20	400.78	400.78
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	21	413.18	423.51
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	22	413.18	423.51
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	23	413.18	423.51
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	24	413.18	423.51
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	25	414.83	425.20
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	26	423.10	433.67
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	27	433.01	443.84
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	28	449.13	460.35
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	29	462.35	473.91
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	30	468.96	480.68
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	31	478.88	490.85
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	32	488.79	501.01
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	33	494.99	507.36
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	34	501.60	514.14
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	35	504.91	517.53
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	36	508.21	520.92
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	37	511.52	524.30
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	38	514.82	527.69
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	39	521.43	534.47
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	40	528.04	541.25
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	41	537.96	551.41
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	42	547.46	561.15
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	43	560.69	574.70
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	44	577.21	591.64
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	45	596.63	611.55
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	46	619.77	635.26
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	47	645.80	661.95
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	48	675.55	692.44

52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	49	704.89	722.51
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	50	737.94	756.39
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	51	770.58	789.85
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	52	806.53	826.69
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	53	842.89	863.96
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	54	882.14	904.19
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	55	921.39	944.43
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	56	963.95	988.05
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	57	1006.92	1032.09
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	58	1052.78	1079.10
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	59	1075.51	1102.40
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	60	1121.37	1149.40
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	61	1161.04	1190.06
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	62	1187.07	1216.74
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	63	1219.71	1250.20
52899PA0030130 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1239.54	1270.53
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	0-14	340.90	340.90
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	15	371.20	371.20
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	16	382.79	382.79
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	17	394.37	394.37
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	18	406.85	406.85
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	19	419.33	419.33
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	20	432.25	432.25
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	21	445.62	456.76
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	22	445.62	456.76
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	23	445.62	456.76
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	24	445.62	456.76
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	25	447.40	458.59
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	26	456.31	467.72
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	27	467.01	478.69
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	28	484.39	496.50
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	29	498.65	511.11
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	30	505.78	518.42
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	31	516.47	529.39
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	32	527.17	540.35
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	33	533.85	547.20
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	34	540.98	554.51
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	35	544.55	558.16
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	36	548.11	561.82
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	37	551.68	565.47
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	38	555.24	569.12
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	39	562.37	576.43
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	40	569.50	583.74
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	41	580.20	594.70
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	42	590.45	605.21
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	43	604.71	619.82
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	44	622.53	638.09
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	45	643.48	659.56
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	46	668.43	685.14
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	47	696.50	713.92
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	48	728.59	746.80
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	49	760.23	779.23
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	50	795.88	815.77
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	51	831.08	851.86
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	52	869.85	891.60
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	53	909.06	931.79
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	54	951.40	975.18
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	55	993.73	1018.58
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	56	1039.63	1065.62
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	57	1085.98	1113.13
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	58	1135.44	1163.83
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	59	1159.95	1188.95
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	60	1209.41	1239.65
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	61	1252.19	1283.50
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	62	1280.27	1312.27
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	63	1315.47	1348.36
52899PA0030130 Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1336.86	1370.28
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	0-14	445.56	445.56
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	15	485.16	485.16
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	16	500.31	500.31
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	17	515.45	515.45
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	18	531.76	531.76
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	19	548.07	548.07
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	20	564.96	564.96
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	21	582.43	596.99
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	22	582.43	596.99
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	23	582.43	596.99
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	24	582.43	596.99
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	25	584.76	599.38
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	26	596.41	611.32
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	27	610.39	625.65
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	28	633.10	648.93
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	29	651.74	668.03
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	30	661.06	677.58
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	31	675.04	691.91
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	32	689.01	706.24
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	33	697.75	715.19
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	34	707.07	724.75
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	35	711.73	729.52
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	36	716.39	734.30
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	37	721.05	739.07
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	38	725.71	743.85
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	39	735.03	753.40
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	40	744.35	762.95
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	41	758.32	777.28
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	42	771.72	791.01
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	43	790.36	810.12
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	44	813.65	834.00
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	45	841.03	862.05
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	46	873.65	895.49
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	47	910.34	933.10
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	48	952.27	976.08
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	49	993.63	1018.47
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	50	1040.22	1066.23
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	51	1086.23	1113.39
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	52	1136.90	1165.33
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	53	1188.16	1217.86
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	54	1243.49	1274.58
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	55	1298.82	1331.29
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	56	1358.81	1392.78
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	57	1419.38	1454.87

52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	58	1484.03	1521.13
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	59	1516.07	1553.97
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	60	1580.72	1620.23
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	61	1636.63	1677.54
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	62	1673.32	1715.15
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	63	1719.33	1762.32
52899PA0030131 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1747.29	1790.97
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	0-14	480.54	480.54
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	15	523.26	523.26
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	16	539.59	539.59
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	17	555.92	555.92
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	18	573.51	573.51
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	19	591.10	591.10
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	20	609.32	609.32
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	21	628.16	643.86
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	22	628.16	643.86
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	23	628.16	643.86
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	24	628.16	643.86
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	25	630.67	646.44
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	26	643.24	659.32
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	27	658.31	674.77
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	28	682.81	699.88
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	29	702.91	720.48
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	30	712.96	730.79
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	31	728.04	746.24
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	32	743.11	761.69
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	33	752.54	771.35
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	34	762.59	781.65
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	35	767.61	786.80
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	36	772.64	791.95
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	37	777.66	797.10
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	38	782.69	802.25
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	39	792.74	812.56
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	40	802.79	822.86
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	41	817.86	838.31
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	42	832.31	853.12
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	43	852.41	873.72
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	44	877.54	899.48
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	45	907.06	929.74
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	46	942.24	965.80
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	47	981.81	1006.36
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	48	1027.04	1052.72
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	49	1071.64	1098.43
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	50	1121.89	1149.94
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	51	1171.52	1200.81
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	52	1226.17	1256.82
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	53	1281.45	1313.48
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	54	1341.12	1374.65
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	55	1400.80	1435.82
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	56	1465.50	1502.13
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	57	1530.83	1569.10
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	58	1600.55	1640.57
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	59	1635.10	1675.98
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	60	1704.83	1747.45
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	61	1765.13	1809.26
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	62	1804.70	1849.82
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	63	1854.33	1900.69
52899PA0030131 Rating Area 5	Tobacco User/Non-Tobacco User	64 and over	1884.48	1931.59

Exhibit 1: Derivation of Age Calibration Factor

Age Band	Age Factor	Portion of Projected Enrl
0-14	0.765	6.93%
15	0.833	0.52%
16	0.859	0.56%
17	0.885	0.63%
18	0.913	0.64%
19	0.941	0.87%
20	0.970	1.01%
21	1.000	1.14%
22	1.000	1.12%
23	1.000	1.04%
24	1.000	0.99%
25	1.004	1.01%
26	1.024	1.40%
27	1.048	1.29%
28	1.087	1.24%
29	1.119	1.38%
30	1.135	1.38%
31	1.159	1.43%
32	1.183	1.47%
33	1.198	1.55%
34	1.214	1.62%
35	1.222	1.66%
36	1.230	1.64%
37	1.238	1.63%
38	1.246	1.59%
39	1.262	1.60%
40	1.278	1.71%
41	1.302	1.63%
42	1.325	1.63%
43	1.357	1.61%
44	1.397	1.64%
45	1.444	1.62%
46	1.500	1.63%
47	1.563	1.68%
48	1.635	1.60%
49	1.706	1.66%
50	1.786	1.68%
51	1.865	1.76%
52	1.952	1.88%
53	2.040	2.04%
54	2.135	2.29%
55	2.230	2.25%
56	2.333	2.39%
57	2.437	2.56%
58	2.548	2.75%
59	2.603	3.06%
60	2.714	3.63%
61	2.810	3.91%
62	2.873	4.48%
63	2.952	5.54%
64 and over	3.000	6.00%

Initial Age Factor:	1.8170
3-child cap Adjustment:	0.9964
Final Age Factor used:	1.8105

Exhibit 2: Derivation of Geographical Calibration Factor

Rating Areas	Portion of Projected Enrl	Proposed Factor
1	47.84%	0.966
5	52.16%	1.042

Calibration Factor
1.0055

Exhibit 4: Derivation of 3-child Cap Adjustment Factor

Total Members	Dependents under the age of 21 in excess of 3 per contract	% of Total	3-child Cap Adjustment
112,922	406	0.3595%	0.99640

UPMC Feburary 2025 Individual Population including all legal entities

Exhibit 5: Derivation of Change in Demographics Factor

Component Factor	2024 Experience Period	2026 Projected	Change in Demographics Factor
Average Age Factor	1.828	1.817	0.994
Average Geographic Factor	0.989	1.006	1.016
Total	1.809	1.827	1.010

Average Geographic Factor Derivation

Region	Proposed Geographic Factor	2024 Experience Period Member Months	2026 Projected Enrollment
Rating Area 1	0.966	170,705	917
Rating Area 2	1.235	9,878	0
Rating Area 3	1.229	29,710	0
Rating Area 4	0.966	865,428	0
Rating Area 5	1.042	166,751	1,000
Rating Area 9	1.274	20,317	0
Average Geographic Factor		0.989	1.006

⬅ Assumption to be used in "Change in Demographics" factor table above

Exhibit 6: Derivation of Change in Benefits Factor

Legal Entity	Average Induced Demand Factor (2024 Experience Period)	Average Induced Demand Factor (2026 Projected)	Change in Benefits Factor
Health Options	1.097	1.087	0.991
Health Plan	1.094	1.073	0.979
Total	1.097	1.087	

Exhibit 7: Derivation of Change in Network Factor

Legal Entity	Service Area Factor	Network Calibration Factor	Change in Network Factor
Health Plan	1.155	1.210	1.398
Health Options	1.000	0.984	0.984

Exhibit 10: Projected Administrative Expense Load Development

General and Claims PMPM	Agent/Broker Fees and Commissions PMPM	Quality Improvement Initiatives PMPM	Projected Required Revenue PMPM	General and Claims % of Projected Revenue	Agent/Broker Fees and Commissions % of Projected Revenue	Quality Improvement Initiatives % of Projected Revenue	Admin Expense % of Projected Revenue
\$54.68	\$7.45	\$13.48	\$844.84	6.47%	0.88%	1.60%	8.95%

Exhibit 11: Derivation of Projected Taxes and Fees

Risk Adjustment User Fee PMPM	PCORI Fee PMPM	PA Premium Tax (if applicable) PMPM	Federal Income Tax PMPM	Total Taxes & Fees PMPM	2026 Projected Lives (from Table 10)	2026 Projected Member Months	Projected Taxes & Fees
\$0.20	\$0.29	\$0.00	\$3.19	\$3.68	1,917	23,004	\$84,716

Exhibit 12: Derivation of Geographic Rating Factor Changes

Rating Area	Current Factor	Proposed Factor
Rating Area 1	0.966	0.966
Rating Area 2	1.165	1.235
Rating Area 3	1.280	1.229
Rating Area 4	0.966	0.966
Rating Area 5	1.011	1.042
Rating Area 9	1.274	1.274

Change
0.0%
6.0%
-4.0%
0.0%
3.0%
0.0%

Region	Allowed Claims PMPM	Allowed Claims Differential (vs Total Market)	Average DxCG Score	Average DxCG Differential (vs Total Market)	Morbidity-Adjusted Differential (vs Total Market)
Rating Area 2	\$1,073.90	1.5138	2.1414	1.1324	1.3368
Rating Area 3	\$594.07	0.8374	1.6958	0.8968	0.9338
Rating Area 5	\$780.70	1.1005	1.9680	1.0407	1.0574
Total Market	\$709.40	1.0000	1.8910	1.0000	1.0000

2026 Business Rules Template v15.0		All fields with an asterisk (*) are required. To validate the template, press Validate button or Ctrl + Shift + I. To finalize the template, press Finalize button or Ctrl + Shift + F.					
		Enter the Issuer Rule on the first row (no Product ID or Plan ID).					
		For each Product rule, enter only the Product ID and the business rules that differ from the Issuer Rule.					
		For each Plan rule, enter only the Plan ID and the business rules that differ from the Product or Issuer Rule.					
		Issuer level rule will apply only to plan type indicated in cell C10.					
HIOS Issuer ID*		52899					
Medical, Dental, or Both?*		Medical					
Product ID	Plan ID (Standard Component)	Medical or Dental Rule?*	What is the maximum number of rated underage dependents on this policy?	Is there a maximum age for a dependent?	How is age determined for rating and eligibility purposes?	How is tobacco status determined for subscribers and dependents?	What relationships between primary and dependent are allowed, and is the dependent required to live in the same household as the primary subscriber?
		Medical	3	25	Age on effective date	6	Self, Yes; Spouse, No; Child, No; Stepson or Stepdaughter, No; Life Partner, No; Foster Child, No; Ward, No

Standard Questions – IND Health Plan

1. Membership

- a. If the projected membership for plan year 2026 significantly differs from the current 2/1/2025 membership, please explain why.

This submission assumes a decrease of 96 enrolled lives for this company versus February 2025 enrollment due to the expiration of enhanced federal premium subsidies. We are assuming a proportional decrease for all plans based on the February 2025 plan enrollment distribution. Proportional means that both the plan mix and the age distribution in the projection period are assumed to be the same as those of the February 2025 enrollment.

The version of the PAAM exhibits that is enclosed with the filing to represent the scenario in which enhanced federal premium subsidies persist into 2026 assumes projected membership for plan year 2026 does not vary from the February 2025 enrollment.

2. Experience Period Claims:

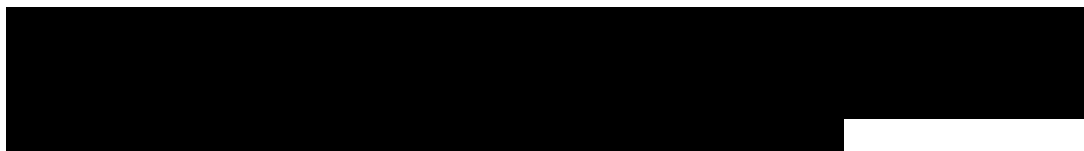
- a. Please confirm that all claims which are capitated have been removed from the experience period claims.

Our ACA markets do not have any capitation agreements, thus there are no capitated claims to be removed from the experience period.

- b. Please confirm that all non-EHB claims have been removed from the experience period claims.

We can confirm that all non-EHB claims have been removed from the experience period claims.

- c. How are drug rebates projected to change from the base period to the rating period? How has this change been reflected in the rate development?



3. Trend:

- a. [SG. Only] If the Total Annual Trend in Table 3 (weighted by credibility) and the Annual Trend used to calculate quarterly rates in Table 5A differ, please provide an explanation and exhibit in support of the variation.

N/A

- b. [SG. Only] In Table 5A, if cells K32:M32 are left to equal J32, please explain why that is a reasonable assumption.

N/A

4. Table 6 - Retention:

- a. Please confirm that the federal income tax is calculated using a Federal Income Tax Rate of 21%. If other adjustments were made in Table 6, cell C57, please provide a demonstration of how this number was calculated and an explanation of the other adjustments included in the calculation.

UPMC is filing a 1.8% surplus and risk load for the 2026 rating period, including consideration of the 21% federal income tax rate. The surplus and tax are both reflected in Table 6, and cell C57 does not reflect any additional adjustments.

- b. Please confirm that the Risk Adjustment User Fee PMPM is consistent with HHS Final Notice of Benefit and Payment Parameters for plan year 2026.

We can confirm that the Risk Adjustment User Fee of \$0.20 PMPM is consistent with HHS Final Notice of Benefit and Payment Parameters for plan year 2026.

- c. Please provide an exhibit showing the commission PMPM amount to be paid to brokers in the following situations: Open-Enrollment Enrollee – Renewing, Open Enrollment Enrollee – New, Special Enrollment Period Enrollee – New, Special Enrollment Enrollee – Renewing. If the commission PMPM is not consistent between the four options above, please provide a detailed explanation as to the reason for the difference.



5. Pricing AVs:

- a. Please confirm that the Pricing AVs were calculated using a single risk pool (i.e., claims experience is **not** separated by metal level).

We can confirm that the Pricing AVs were calculated using a single risk pool (i.e. claims experience is not separated by metal level).

- b. Please identify and support any differences between the company's metallic AV calculator results and the corresponding Pricing AVs.

Unlike the AV Calculator (AVC), which relies on a national data set, UPMC models actuarial value of benefit based on its own allowed claims experience. The UPMC benefit valuation

calculator is updated annually and is used to determine the actuarial value of a plan design by readjudicating an experience period claim by claim to calculate the plan liability for each policyholder. The ratio of the total plan liability to the total allowed claims is the plan AV. This simulation ensures that UPMC has the ability to calculate factors that account for embedded versus aggregate deductibles or out-of-pocket maximums, and that claim types align with our schedule of benefits.

Table 10 of the PAAM Exhibits illustrates the AV results from both the AVC and our pricing process for each plan.

6. Expanded Bronze Plans:

- a. Please provide an exhibit which demonstrates that the criteria for expanded bronze plans have been met.

All Bronze Plans offered under UPMC Health Plan, Inc. (Issuer HIOS ID 52899) in the Individual market are within standard Bronze de minimis range.

7. PAAM Exhibits – Consumer Factors:

- a. Please provide quantitative and qualitative support for the proposed geographic rating area factors, if different from the previous year.

Please see Exhibit 12 of the enclosed Supporting Exhibits for support for the proposed change to 2026 geographic rating area factors relative to 2025.

- b. Please provide quantitative and qualitative support for the proposed network factors, if different from the previous year.

Proposed 2026 network factors did not change relative to one another when compared to 2025 network factors.

8. Plan of Withdrawal:

- a. Please confirm that a Plan of Withdrawal has been submitted if any plans are being discontinued.

UPMC does not intend to discontinue the issuance of any plan, product, or book of business at the end of the policy term for current policyholders without offering alternative coverage.

9. Copay Adjustment Programs:

- a. Does the company use a copay adjustment program (also known as a copay accumulator program)?



- i. If the company uses a copay adjustment program, please provide a detailed narrative that describes how the program works and the motivation behind implementing the program.

[REDACTED]

- b. How does the company handle copay assistance coupons? For example, does the coupon apply to the MOOP?

[REDACTED]

- c. If any change to such a program has resulted in a pricing impact, please include a narrative describing how the impact has been included within the rate development and a detailed quantitative exhibit supporting the pricing impact.

[REDACTED]

10. PBM and Act 77 of 2024 Compliance: The Department expects insurers to work closely with their PBM to conduct a good faith effort at collecting the requested data below:

- a. Is the PBM handling any part of the negotiations that impacts the cost of drugs?

[REDACTED]

- b. What is the email address, name, and phone number for the PBM contact?

[REDACTED]

- c. What is the amount of funds the PBM recouped from pharmacies due to Scrivener's errors?

[REDACTED]

d. Use the same pharmacy for all affiliated data. Use the same pharmacy for all non-affiliated data. In Table 18 of the PAAME, using last year's PA claims data:

- i. Complete cells P7-R16 to show the minimum, maximum, and average allowed amounts paid by the PBM to a retail pharmacy that is affiliated to the PBM.

[REDACTED]

- ii. Complete cells S7-U16 to show the minimum, maximum, and average allowed amounts paid by the PBM to a retail pharmacy that is not affiliated to the PBM.

[REDACTED]

- iii. Complete cells V7-X16 to show the minimum, maximum, and average allowed amounts paid by the PBM to an entity participating in the program under section 340(B) of 58 Stat. 682. 42 U.S.C. Section 256(B).

[REDACTED]

- iv. Complete cells Y7-AA16 to show the minimum, maximum, and average allowed amounts paid by the PBM to an entity not participating in the program under section 340(B) of 58 Stat. 682. 42 U.S.C. Section 256(B).

[REDACTED]

- v. Complete cells AG7-AI12 to show the minimum, maximum, and average allowed amounts paid by the PBM to a retail pharmacy that is affiliated to the PBM.

[REDACTED]

- vi. Complete cells AJ7-AL12 to show the minimum, maximum, and average allowed amounts paid by the PBM to a retail pharmacy that is not affiliated to the PBM.

[REDACTED]

e. The following questions pertain to rebates:

- i. Please provide the total amount of rebates remitted to the PBM in cell AO5 of Table 18.

[REDACTED]

- ii. Please provide the total amount of funds (rebates, etc.) remitted to the insurer by the PBM for the previous claim year in cell AO6 of Table 18. If there are funds in addition to the rebates, please specify what those funds represent.

[REDACTED]

- iii. Please provide the total amount of rebates remitted to the insurer by the PBM for the previous claim year in cell AO7 of Table 18.

[REDACTED]

- f. What is the percent of rebates remitted to the insurer by the PBM for the previous claim year based on your response to parts i and iii above? Please confirm that this answer matches cell AO8 of Table 18.

[REDACTED]

- g. Does the health plan have an arrangement with the PBM where the insurer has to meet specific contract requirements, such as reaching a threshold of filled scripts?

[REDACTED]

- i. If yes, what is the total amount of funds remitted for the previous claim year to the PBM by the insurer for unexpected fees, penalties, etc.? Please state this value in cell AO10 of Table 18.

[REDACTED]

- h. In aggregate for the previous claim year, how much funds in total were received from non-affiliate pharmacies for post-sale or retroactive Direct and Indirect Renumeration?

[REDACTED]

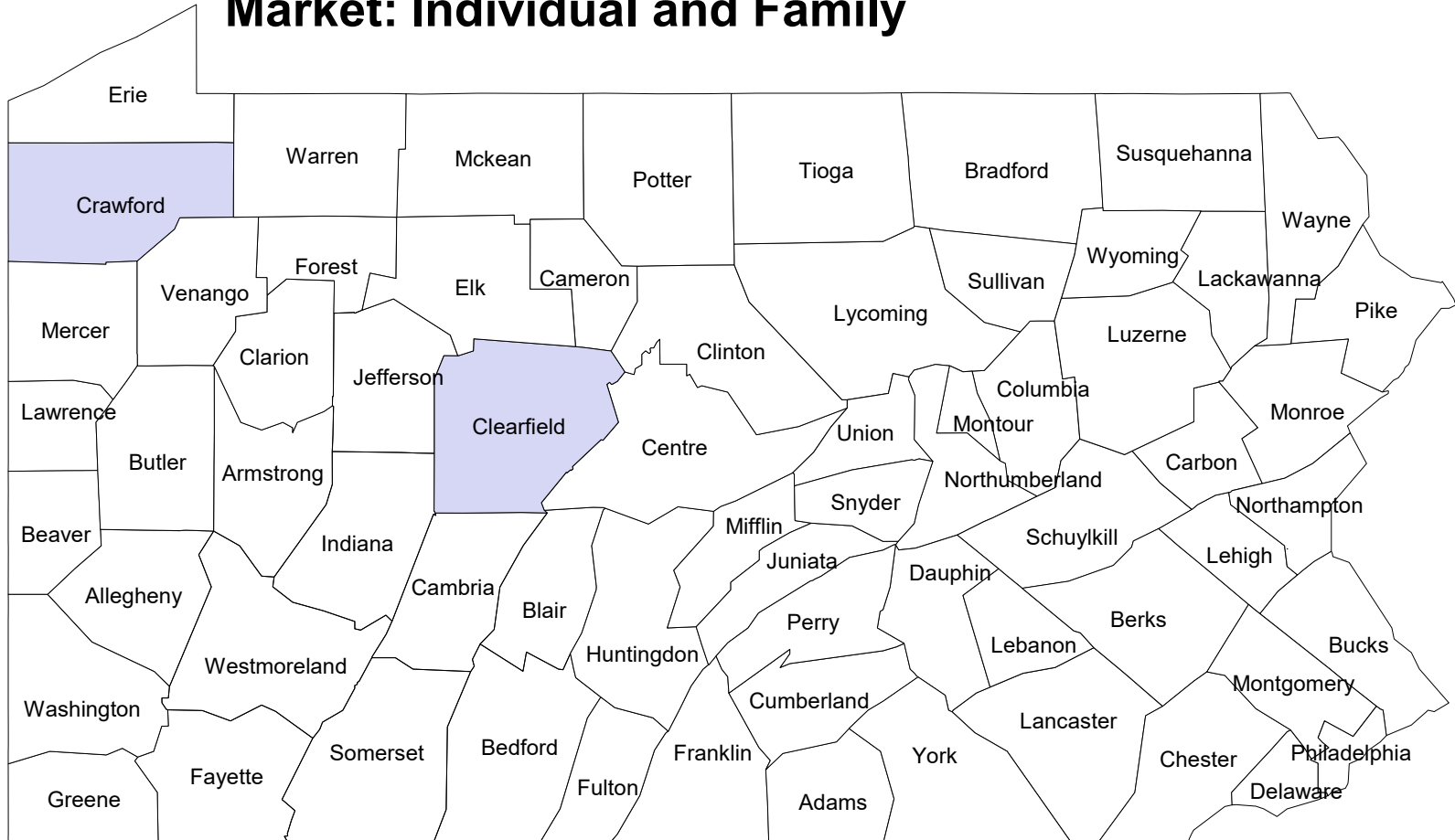
- i. In aggregate for the previous claim year, how much funds in total were received from affiliate pharmacies for post-sale or retroactive Direct and Indirect Renumeration?

[REDACTED]

2025 Service Area

Issuer: UPMC Health Coverage, Inc.

Market: Individual and Family



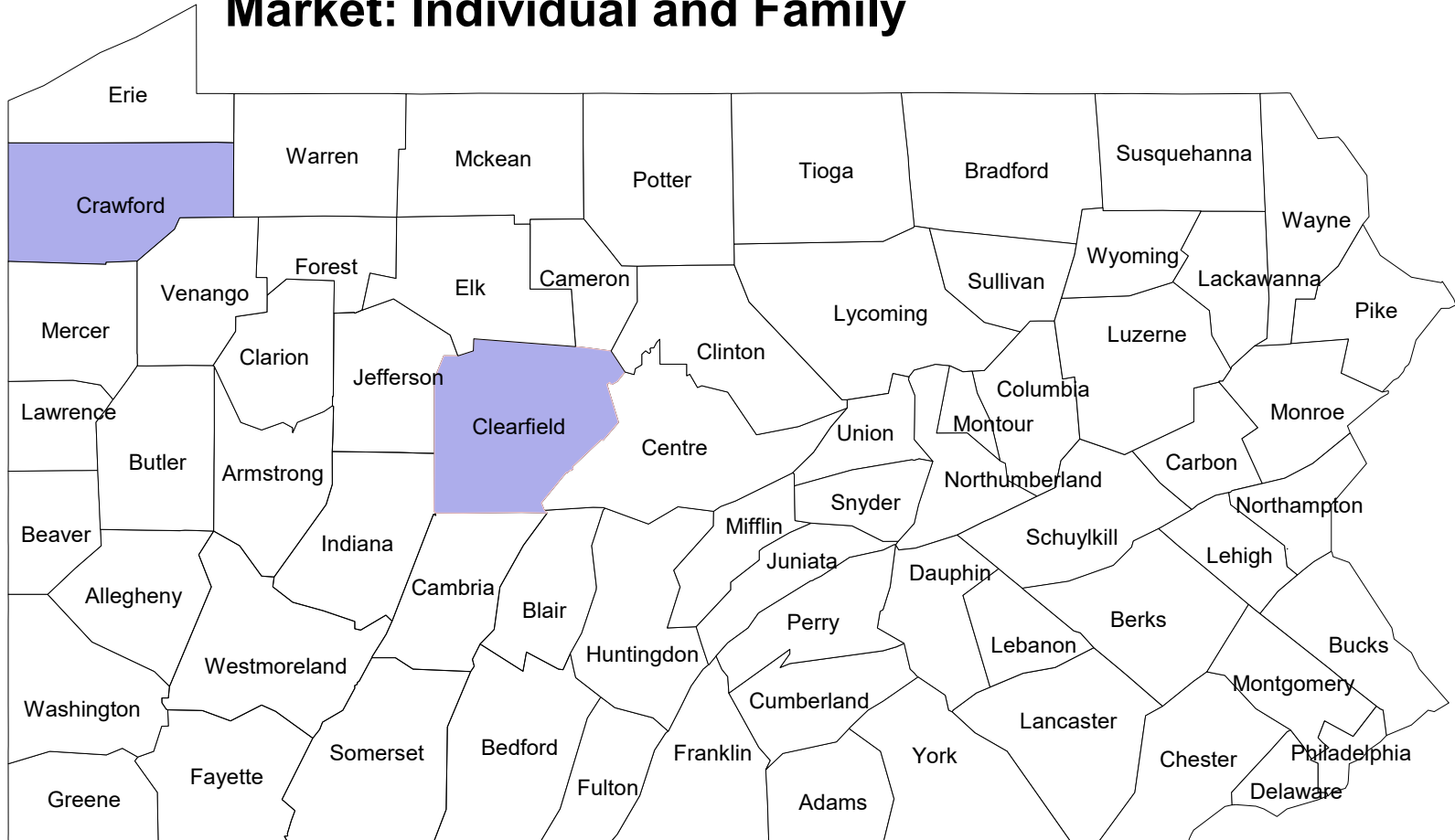
Key (modify as needed)



: On-exchange service area
: Off-exchange service area

2026 Service Area

Issuer: UPMC Health Plan, Inc.
Market: Individual and Family



Key (modify as needed)



: On-exchange service area
: Off-exchange service area