STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS OFFICE OF THE HEALTH INSURANCE COMMISSIONER 1511 PONTIAC AVENUE CRANSTON, RI 02920

NOTICE OF PUBLIC HEARING

Notice is hereby given in accordance with R.I. Gen. Laws Secs. 27-19-1 et seq., 27-20-1 et seq., 42-14.5-1 et seq., 42-14-1 et seq., and 42-35-1 et seq., that the Rhode Island Office of the Health Insurance Commissioner ("OHIC") will hold public hearings regarding a rate filing requesting increases in premium rates for the Direct Pay Class submitted by Blue Cross & Blue Shield of Rhode Island ("Blue Cross") on November 18, 2011 ("the Filing"). The hearings will begin on January 17, 2012 at 9:00 a.m. Any member of the public that is unable to attend the hearing at that scheduled time may appear at 6:30 p.m. on January 17, 2012 to offer public comment or other information. If not concluded on January 17, 2012, the public hearings will continue thereafter on January 19, 2012, at 9:00 a.m. The hearings will take place in a hearing room of the Rhode Island Public Utilities Commission at 89 Jefferson Boulevard, Warwick, Rhode Island. The Direct Pay Class consists of individuals and families who are not eligible for employer-based coverage (other than a self-employed individual, who may be eligible for this coverage), coverage through State or Federal programs, and those who are enrolled in one of Blue Cross' Direct Pay products. The Filing does not apply to any Blue Cross Medicare products. All persons interested in offering evidence or comments should appear at the hearings on January 17, 2012, and/or file written comments as detailed below.

The Filing proposes to increase premium rates effective April 1, 2012 for five existing Blue Cross Direct Pay products which are being re-named effective April 1, 2012. The five products which are being re-named and which will include some benefit changes are: VantageBlue Direct 1000/2000, formerly HealthMate Coast-to-Coast Direct 500/1000 (VantageBlue 1000); VantageBlue Direct 1500/3000, formerly HealthMate Coast-to-Coast Direct 2500/5000, formerly HealthMate Coast-to-Coast Direct 2500/5000, formerly HealthMate Coast-to-Coast Direct 2500/5000, formerly HealthMate Coast-to-Coast Direct 3000/6000, formerly HealthMate for HSA Direct 3000/6000 (HSA 3000); and BlueSolutions for HSA Direct 5000/10000, formerly HealthMate for HSA Direct 5000/10000 (HSA 5000).

The overall average rate increase for the five existing products (for someone not aging into a new age bracket) is 4.4%. The proposed decreases/increases in rates for Basic (Pool I) subscribers range from a 10.2% decrease to a 17.3% increase depending upon plan, age and single or family coverage. The proposed decreases/increases in rates for the Preferred (Pool II) medically underwritten subscribers range from a 25.6% decrease to a 12.4% increase depending on plan, age, gender and single or family coverage. If approved, Blue Cross is proposing a new

Direct Pay product to be offered effective April 1, 2012 to be called BlueValue Direct 2500 (BlueValue). This new plan will be available on an individual basis only (no family coverage).

The monthly proposed Basic (Pool I) age rates and the Preferred (Pool II) medically underwritten age/gender rates for the Direct Pay products with the proposed rating and benefit changes noted in the Filing proposed to be effective April 1, 2012 are listed below:

		VantageBlue/HealthMate			Blue Solutions for HSA		BlueValue
		1000	1500	2500	3000	5000	2500
Under 25	Individual	\$542.94	\$492.06	\$428.36	\$376.62	\$302.23	\$267.89
	Family	\$1,022.18	\$926.39	\$806.47	\$709.05	\$569.00	N/A
25-29	Individual	\$554.70	\$502.72	\$437.64	\$384.78	\$308.78	\$273.69
	Family	\$1,043.74	\$945.93	\$823.48	\$724.01	\$581.00	N/A
30-34	Individual	\$575.28	\$521.37	\$453.88	\$399.05	\$320.23	\$283.84
	Family	\$1,082.94	\$981.46	\$854.41	\$751.20	\$602.82	N/A
35-39	Individual	\$596.84	\$540.91	\$470.89	\$414.01	\$332.23	\$294.48
	Family	\$1,124.11	\$1,018.77	\$886.88	\$779.75	\$625.73	N/A
40-44	Individual	\$609.58	\$552.46	\$480.94	\$422.85	\$339.33	\$300.77
	Family	\$1,147.63	\$1,040.08	\$905.44	\$796.07	\$638.83	N/A
45-49	Individual	\$647.81	\$587.10	\$511.10	\$449.36	\$360.60	\$319.63
	Family	\$1,220.15	\$1,105.81	\$962.66	\$846.38	\$679.20	N/A
50-54	Individual	\$707.59	\$641.28	\$558.26	\$490.83	\$393.88	\$349.12
	Family	\$1,331.87	\$1,207.06	\$1,050.81	\$923.88	\$741.39	N/A
55-59	Individual	\$787.95	\$714.11	\$621.67	\$546.58	\$438.61	\$388.77
	Family	\$1,483.78	\$1,344.73	\$1,170.66	\$1,029.25	\$825.95	N/A
60-64	Individual	\$814.41	\$738.09	\$642.55	\$564.93	\$453.34	\$401.83
	Family	\$1,532.78	\$1,389.14	\$1,209.32	\$1,063.24	\$853.22	N/A
65+	Individual	\$1,012.38	\$917.51	\$798.74	\$702.25	\$563.54	\$499.51
	Family	\$1,910.10	\$1,731.10	\$1,507.01	\$1,324.97	\$1,063.26	N/A

<u>Class DIR Preferred (Pool I)</u> <u>Proposed Rates Effective April 1, 2012</u>

<u>Class DIR Preferred (Pool II)</u> Proposed Rates Effective April 1, 2012

		VantageBlue/HealthMate			Blue Solutions for HSA		BlueValue
		1000	1500	2500	3000	5000	2500
Under 25	Male	\$206.73	\$187.36	\$163.10	\$143.40	\$115.07	\$102.00
	Female	\$289.06	\$261.98	\$228.06	\$200.51	\$160.90	\$142.62
	Family	\$692.67	\$627.78	\$546.49	\$480.48	\$385.56	N/A
25-29	Male	\$228.65	\$207.23	\$180.40	\$158.61	\$127.27	\$112.82
	Female	\$327.54	\$296.86	\$258.42	\$227.21	\$182.32	\$161.61
	Family	\$775.90	\$703.21	\$612.15	\$538.22	\$431.89	N/A
30-34	Male	\$260.42	\$236.02	\$205.46	\$180.65	\$144.96	\$128.49
	Female	\$389.29	\$352.82	\$307.14	\$270.04	\$216.69	\$192.08
	Family	\$822.88	\$745.79	\$649.22	\$570.81	\$458.04	N/A
35-39	Male	\$298.01	\$270.09	\$235.12	\$206.72	\$165.88	\$147.04
	Female	\$386.16	\$349.98	\$304.66	\$267.87	\$214.95	\$190.53
	Family	\$868.52	\$787.15	\$685.23	\$602.47	\$483.44	N/A
40-44	Male	\$318.59	\$288.74	\$251.36	\$221.00	\$177.34	\$157.20
	Female	\$422.40	\$382.83	\$333.26	\$293.01	\$235.12	\$208.42
	Family	\$887.76	\$804.59	\$700.41	\$615.81	\$494.15	N/A
45-49	Male	\$385.26	\$349.17	\$303.96	\$267.25	\$214.45	\$190.09
	Female	\$468.04	\$424.19	\$369.27	\$324.67	\$260.53	\$230.94
	Family	\$935.64	\$847.98	\$738.19	\$649.03	\$520.81	N/A
50-54	Male	\$488.18	\$442.44	\$385.16	\$338.64	\$271.74	\$240.87
	Female	\$546.80	\$495.57	\$431.40	\$379.30	\$304.36	\$269.79
	Family	\$1,042.13	\$944.50	\$822.21	\$722.90	\$580.08	N/A
55-59	Male	\$625.55	\$566.94	\$493.54	\$433.93	\$348.20	\$308.65
	Female	\$624.21	\$565.73	\$492.48	\$432.99	\$347.45	\$307.99
	Family	\$1,166.53	\$1,057.24	\$920.35	\$809.19	\$649.33	N/A
60-64	Male	\$668.95	\$606.28	\$527.78	\$464.03	\$372.36	\$330.07
	Female	\$668.95	\$606.28	\$527.78	\$464.03	\$372.36	\$330.07
	Family	\$1,267.65	\$1,148.89	\$1,000.13	\$879.33	\$705.62	N/A
65+	Male	\$831.38	\$753.49	\$655.93	\$576.70	\$462.77	\$410.21
	Female	\$831.38	\$753.49	\$655.93	\$576.70	\$462.77	\$410.21
	Family	\$1,579.53	\$1,431.56	\$1,246.20	\$1,095.68	\$879.22	N/A

The rates proposed are to be in effect for the period April 1, 2012 through September 30, 2013 (eighteen months). A copy of the Filing is on file at OHIC and copies may be obtained from the Administrative Officer of OHIC, 1511 Pontiac Avenue, Building #69-1, Cranston, Rhode Island during normal business hours Monday through Friday 8:30 a.m. to 4:00 p.m. The Filing as well as other information about the Filing may also be viewed at the OHIC's website: http://www.ohic.ri.gov/.

All interested persons may submit their comments regarding the proposed rates orally at the public hearings on January 17, 2012, or in writing, either by delivering the same in person or by United States mail with postage prepaid to the Hearing Officer, Herbert W. Olson, Esq., c/o Office of the Health Insurance Commissioner, 1511 Pontiac Avenue, Building #69-1, Cranston, Rhode Island 02920, or by e-mail to <u>HealthInsInquiry@ohic.ri.gov.</u>

All written submissions must be received no later than January 17, 2012 at 9:00 a.m. Any request for intervention into the proceeding must be filed no later than ten days from the date of publication of the Notice of Public Hearing in <u>The Providence Journal</u>.

The hearing room is accessible to the handicapped. Individuals requesting interpreter services for the hearing impaired must notify the OHIC at 462-9517 or TDD 711 not less than seventy-two (72) hours in advance of the hearing date.

Christopher F. Koller Commissioner

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