

**State:** Rhode Island **Filing Company:** UnitedHealthcare Insurance Company  
**TOI/Sub-TOI:** MS05G Group Medicare Supplement - Standard Plans/MS05G.015 Multi-Plan  
**Product Name:** GROUP MEDICARE SUPPLEMENT PLANS-STD  
**Project Name/Number:** RATE/C23-022-STD

## Filing at a Glance

Company: UnitedHealthcare Insurance Company  
 Product Name: GROUP MEDICARE SUPPLEMENT PLANS-STD  
 State: Rhode Island  
 TOI: MS05G Group Medicare Supplement - Standard Plans  
 Sub-TOI: MS05G.015 Multi-Plan  
 Filing Type: Rate  
 Date Submitted: 11/15/2023  
 SERFF Tr Num: UHLC-133830742  
 SERFF Status: Assigned  
 State Tr Num:  
 State Status: Open-Pending Actuary Review  
 Co Tr Num: C23-022-STD  
 Effective: 06/01/2024  
 Date Requested:  
 Author(s): Michelle Ambach, Bobbie Walton, Gerry McCadden, Michelle Richart, Lisa Muhammad, Celina Sagin, Casey Drick, Harry Schwarz, Xiaoping Hu, Cody McGuinness, Xi Liu, Jonathan Dwyer, Michael Sliozberg, Michael Zajac, Haihua Du, Rachel Zimmerman, Lawrence Lindawan, Katherine Shealy  
 Reviewer(s): Victor Woods (primary), Alyssa Metivier, Courtney Miner, Charles DeWeese, Bela Gorman, Jennifer Smagula  
 Disposition Date:  
 Disposition Status:  
 Effective Date:  
 State Filing Description:

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## General Information

Project Name: RATE	Status of Filing in Domicile: Not Filed
Project Number: C23-022-STD	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Group
Submission Type: New Submission	Group Market Size: Large
Group Market Type: Association	Overall Rate Impact: 8.9%
Filing Status Changed: 11/15/2023	
State Status Changed: 11/16/2023	Deemer Date:
Created By: Lisa Muhammad	Submitted By: Bobbie Walton
Corresponding Filing Tracking Number: SEE SUPPORTING DOCUMENTATION FOR FORM FILING APPROVAL	

### Filing Description:

The purpose of this filing is to request approval of 2024 rates and rate revisions for 1990 Standardized Medicare Supplement plans, file experience, and to demonstrate compliance with loss ratio standards. While this filing pools your state's experience of the 1990 and 2010 Standardized plans for developing proposed rate actions and demonstrating compliance with loss ratio requirements, please note that the company's filing for the 2010 Standardized Medicare Supplement plans is submitted separately.

We calculated a needed overall increase of 10.3% to cover projected 2024 rating period claims cost and expenses. We are proposing to limit the average increase to 8.9%, which is 1.4% lower than the calculated needed increase. These lower rate actions are intended to help mitigate the member impact at this time. Proposed rating factors and discounts are outlined in the applicable sections of this actuarial memorandum. With these changes we project an anticipated lifetime loss ratio of 80.9%. The rates are proposed to be effective June 1, 2024 through May 31, 2025. We anticipate that the next rate revision will be effective June 1, 2025 through May 31, 2026.

This actuarial memorandum or filing is not intended for any use other than the stated purpose.

## Company and Contact

### Filing Contact Information

Xiaoping Hu, Director, Actuarial Services	xiaoping_hu@uhc.com
680 Blair Mill Rd	215-902-8374 [Phone]
Horsham, PA 19044	215-902-8801 [FAX]

### Filing Company Information

UnitedHealthcare Insurance Company	CoCode: 79413	State of Domicile: Connecticut
185 Asylum Street	Group Code: 707	Company Type: Life and Health
Hartford, CT 06103	Group Name:	State ID Number: 79413
(860) 702-5000 ext. [Phone]	FEIN Number: 36-2739571	

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## Filing Fees

### State Fees

Fee Required? Yes  
 Fee Amount: \$300.00  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: Yes

Company	Amount	Date Processed	Transaction #
UnitedHealthcare Insurance Company	\$300.00	11/15/2023 02:42 PM	272838232
<b>EFT Total</b>	<b>\$300.00</b>		

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## Post Submission Update Request Processed On 11/16/2023

Status: Allowed  
Created By: Michelle Ambach  
Processed By: Courtney Miner  
Comments:

### General Information:

Field Name	Requested Change	Prior Value
Corresponding Filing Tracking Number	SEE SUPPORTING DOCUMENTATION FOR FORM FILING APPROVAL	

SERFF Tracking #:

UHLC-133830742

State Tracking #:

Company Tracking #:

C23-022-STD

State:

Rhode Island

Filing Company:

UnitedHealthcare Insurance Company

TOI/Sub-TOI:

MS05G Group Medicare Supplement - Standard Plans/MS05G.015 Multi-Plan

Product Name:

GROUP MEDICARE SUPPLEMENT PLANS-STD

Project Name/Number:

RATE/C23-022-STD

### Rate Information

Rate data applies to filing.

Filing Method:

SERFF

Rate Change Type:

Increase

Overall Percentage of Last Rate Revision:

3.500%

Effective Date of Last Rate Revision:

06/01/2023

Filing Method of Last Filing:

SERFF

SERFF Tracking Number of Last Filing:

UHLC-133456430

### Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
UnitedHealthcare Insurance Company	8.900%	8.900%	\$435,285	1,497	\$5,297,584	8.900%	8.800%

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MS05G Group Medicare Supplement - Standard Plans/MS05G.015 Multi-Plan

Product Name:

GROUP MEDICARE SUPPLEMENT PLANS-STD

Project Name/Number:

RATE/C23-022-STD

## Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		RATE SCHEDULE	MS 1209A, MSA 1454, MSB 1455, MSC 1456, MSD 1457, MSE 1458, MSF 1459, MSG 1460, MSH 1461, MSI 1462, MSJ 1463, MSA 1959, MSB 1960, MSC 1961, MSD 1962, MSE 1963, MSF 1964, MSG 1965, MSH 1966, MSI 1967, MSJ 1968 MSK 1935, MSL 1936, CRA 1664	Revised	Previous State Filing Number: UHLC-133456430 Percent Rate Change Request: 8.9	RI - 2024 Rate Schedules (Std).pdf,

UNITEDHEALTHCARE INSURANCE COMPANY

**RATE SCHEDULE  
FOR  
RHODE ISLAND**

AARP MEDICARE SUPPLEMENT PORTFOLIO  
GROUP POLICY NUMBER G-36000-4

**1990 STANDARDIZED PLANS**

FORM NUMBERS

MS 1209A, MSA 1454 - MSJ 1463, CRA 1664, MSA 1959 - MSJ 1968, MSK 1935, MSL 1936

**Current 2023 Monthly Rates**

**Proposed 2024 Monthly Rates**

**Proposed 2024 Monthly Rate Changes**

<u>Plan</u>	<u>Base</u>	<u>Tier I</u>	<u>Tier II</u>	<u>Base</u>	<u>Tier I</u>	<u>Tier II</u>	<u>Base</u>	<u>Tier I</u>	<u>Tier II</u>
A	\$160.00	\$176.00	\$240.00	\$174.25	\$191.67	\$261.37	8.9%	8.9%	8.9%
B	\$238.75	\$262.62	\$358.12	\$260.00	\$286.00	\$390.00	8.9%	8.9%	8.9%
C	\$286.25	\$314.87	\$429.37	\$311.75	\$342.92	\$467.62	8.9%	8.9%	8.9%
D	\$259.50	\$285.45	\$389.25	\$282.50	\$310.75	\$423.75	8.9%	8.9%	8.9%
E	\$261.00	\$287.10	\$391.50	\$284.25	\$312.67	\$426.37	8.9%	8.9%	8.9%
F	\$287.25	\$315.97	\$430.87	\$312.75	\$344.02	\$469.12	8.9%	8.9%	8.9%
G	\$261.75	\$287.92	\$392.62	\$285.00	\$313.50	\$427.50	8.9%	8.9%	8.9%
H (with drugs)	\$339.50	\$373.45		\$369.75	\$406.72		8.9%	8.9%	
H (without drugs)	\$235.00	\$258.50	\$352.50	\$256.00	\$281.60	\$384.00	8.9%	8.9%	8.9%
I (with drugs)	\$341.25	\$375.37		\$371.50	\$408.65		8.9%	8.9%	
I (without drugs)	\$237.00	\$260.70	\$355.50	\$258.00	\$283.80	\$387.00	8.9%	8.9%	8.9%
J (with drugs)	\$449.75	\$494.72		\$489.75	\$538.72		8.9%	8.9%	
J (without drugs)	\$272.00	\$299.20	\$408.00	\$296.25	\$325.87	\$444.37	8.9%	8.9%	8.9%
K	\$91.00	\$100.10	\$136.50	\$99.00	\$108.90	\$148.50	8.8%	8.8%	8.8%
L	\$162.50	\$178.75	\$243.75	\$177.00	\$194.70	\$265.50	8.9%	8.9%	8.9%

\* Discounts available for Multi-Insured, Electronic Funds Transfer, Annual Pay, and Early Enrollment.

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## Supporting Document Schedules

<b>Satisfied - Item:</b>	A&H Experience
<b>Comments:</b>	THE EXPERIENCE IS ATTACHED TO THE RATE/RULE SCHEDULE TAB
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Actuarial Certification - Life & A&H
<b>Comments:</b>	THE ACTUARIAL CERTIFICATION IS INCLUDED IN THE ACTUARIAL MEMORANDUM
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Actuarial Memorandum - A&H Rate Revision Filing
<b>Comments:</b>	
<b>Attachment(s):</b>	RI - 2024 Memorandum (Std).pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	*Medicare Supplement-Group
<b>Comments:</b>	<p>"Approved under multiple Paper Filings (no tracking numbers) on 6/13/1997, 6/11/1999, 7/5/2005 and 9/23/2005. The stamped approvals for the associated forms on this filing are attached and are as follows:  "Form MS 1209A (submitted February 19, 1997; approved June 13, 1997)  Forms MSA 1454 through MSJ 1463 (submitted March 10, 1999; approved June 11, 1999)  Form CRA 1664 (submitted May 25, 2005 and again on June 10, 2005; received by the Department on May 26, 2005 and again on June 13, 2005; approved July 5, 2005)  Forms MSA 1959 through MSJ 1968; and MSK 1935, MSL 1936 (submitted August 16, 2005; received by the Department August 17, 2005; approved September 23, 2005; possible state tracking number "???"1776")"</p>
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Premium Rate Sheets - Life & A&H
<b>Comments:</b>	THE RATES ARE ATTACHED TO THE RATE/RULE SCHEDULE TAB
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	



SERFF Tracking #:

UHLC-133830742

State Tracking #:

Company Tracking #:

C23-022-STD

State:

Rhode Island

Filing Company:

UnitedHealthcare Insurance Company

TOI/Sub-TOI:

MS05G Group Medicare Supplement - Standard Plans/MS05G.015 Multi-Plan

Product Name:

GROUP MEDICARE SUPPLEMENT PLANS-STD

Project Name/Number:

RATE/C23-022-STD

<b>Satisfied - Item:</b>	ATTACHMENTS (STD)
<b>Comments:</b>	SEE ATTACHED
<b>Attachment(s):</b>	RI - 2024 Attachments (Std).pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	2024 Rate Increase Narrative (STD)
<b>Comments:</b>	
<b>Attachment(s):</b>	2024 RI Rate Increase Narrative (Std).pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

**UnitedHealthcare Insurance Company**

**Annual Medicare Supplement Filing  
Actuarial Memorandum**

**AARP Medicare Supplement Portfolio  
Group Policy Number G-36000-4**

**1990 Standardized Plans**

**Rhode Island**

**A. Purpose of Filing**

The purpose of this filing is to request approval of 2024 rates and rate revisions for 1990 Standardized Medicare Supplement plans, file experience, and to demonstrate compliance with loss ratio standards. While this filing pools your state's experience of the 1990 and 2010 Standardized plans for developing proposed rate actions and demonstrating compliance with loss ratio requirements, please note that the company's filing for the 2010 Standardized Medicare Supplement plans is submitted separately.

The proposed 2024 average rate revisions by plan are shown below.

A	B	C	D	E	F	G	H	I	J	K	L
8.9%	8.9%	8.9%	8.9%	8.9%	8.9%	8.9%	8.9%	8.9%	8.9%	8.8%	8.9%

We calculated a needed overall increase of 10.3% to cover projected 2024 rating period claims cost and expenses. We are proposing to limit the average increase to 8.9%, which is 1.4% lower than the calculated needed increase. These lower rate actions are intended to help mitigate the member impact at this time. Proposed rating factors and discounts are outlined in the applicable sections of this actuarial memorandum. With these changes we project an anticipated lifetime loss ratio of 80.9%. The rates are proposed to be effective June 1, 2024 through May 31, 2025. We anticipate that the next rate revision will be effective June 1, 2025 through May 31, 2026.

This actuarial memorandum or filing is not intended for any use other than the stated purpose.

**B. General Description**

1. Issuer Name: UnitedHealthcare Insurance Company
2. Group Policy Number: G-36000-4

Medicare Supplement Form Numbers:

MS 1209A	MSA 1454	MSB 1455	MSC 1456	MSD 1457	MSE 1458
MSA 1959	MSF 1459	MSG 1460	MSH 1461	MSI 1462	MSJ 1463
MSG 1965	MSB 1960	MSC 1961	MSD 1962	MSE 1963	MSF 1964
	MSH 1966	MSI 1967	MSJ 1968	MSK 1935	MSL 1936

3. Policy Type: Group Standardized Medicare Supplement Insurance
4. Benefits Description: Benefits provided by the 1990 Plans are shown in Attachment 11.
5. Renewal Provision: Guaranteed renewable. If the group policy is terminated by the group policyholder and not replaced by another group policy by the same policyholder, an individual Medicare Supplement policy will be offered.
6. Marketing Method: Plans were sold to members of AARP via mass-marketing. Beginning in 2008 we also sold to members of AARP via Agent distribution. These plans are no longer offered.
7. Underwriting Method: These plans are no longer offered.
8. Pre-Existing Conditions Exclusion: The maximum exclusion on these plans was 3 months/3 months.
9. Issue Age Limits: These plans are no longer offered.
10. Premium Basis:

Premium is earned on the first of the month for the entire month in which it is due.

a. Age 65 and Older –

- Premium rates vary based on the time elapsed from an insured's 65th birthday or Medicare Part B Effective Date, if later, their effective date in an AARP Medicare Supplement Plan, and the underwriting requirements.
- All effective dates: Insureds whose effective date was less than three years following their 65th birthday or Medicare Part B Effective Date, if later, pay the Base Rate.
- Effective dates prior to 1/1/08: Insureds whose effective date was three or more years following their 65th birthday or Medicare Part B Effective Date, if later, pay Tier I or Tier II Rates based on the underwriting requirements.
- Effective dates from 1/1/08 through 5/1/10: Insureds whose effective date was three or more years following their 65th birthday or Medicare Part B Effective Date, if later, pay rates based on their health history when they applied.
  - Applicants whose health history indicated that they had a serious medical condition pay Tier II Rates.
  - Applicants whose health history indicated that they did not have a serious medical condition pay:
    - The Base Rate if they had an effective date three or more years, but less than six years following their 65th birthday or Medicare Part B Effective Date, if later, or
    - Tier I Rates if they had an effective date six or more years following their 65th birthday or Medicare Part B Effective Date, if later.
- Rate Tiers - The following tier factors are applied to the Base Rate
  - Tier I:
    - All Plans: 1.10

- Tier II:
  - All Plans: 1.50
- b. Under Age 65 – Insureds under age 65 pay rates based on their health history at the time of their enrollment. Enrollees whose health history indicated they did not have a serious medical condition pay Tier I Rates. Enrollees whose health history indicated they did have a serious medical condition pay the Tier II Rates.
- c. Discounts Available - The discounts currently available to AARP Medicare Supplement members will remain:
  - 1) Payment by Electronic Funds Transfer – \$2 per month. Effective June 1, 2024 or later (actual implementation date may vary based on operational readiness), this discount will be administered on plan level instead of household level.
  - 2) Annual Pay – \$24 (applied at \$2.00 each month) for those that pay their entire 12 months of premium (June through May) in June. Effective June 1, 2024 or later (actual implementation date may vary based on operational readiness), this discount will be administered on plan level instead of household level.
  - 3) Multi-Insured - 5% when two or more insureds on one account, or members of a group account, each have at least one eligible plan of supplemental insurance issued under a group master policy between the Trustees of AARP and a UnitedHealth Group company.
  - 4) Early Enrollment –
    - Effective dates 1/1/08 through 5/1/2010: Insureds whose effective date was less than three years following their 65th birthday or Medicare Part B Effective Date, if later, received discounts for their first ten years of coverage. Discounts were 30% during their first year of coverage, 27% during their second year, 24% during their third year, and so on, decreasing by 3% each year until the discount percentage is 0%.
    - Insureds eligible for any of the Early Enrollment Discount programs will receive discounts at age 80 - 2%, age 85 – 2%, age 90 - 5%, and age 95 – 5%, for that year of coverage. If an insured member is still receiving an Early Enrollment discount when reaching these ages, the insured will receive the greater of the two discounts.

11. Actuary's Name: Xi Liu, FSA, MAAA  
 Associate Director, Actuarial Services  
 UnitedHealthcare Insurance Company  
 680 Blair Mill Road  
 Horsham, PA 19044  
 (215) 902-8486

12. Domicile State Approval: UnitedHealthcare Insurance Company is domiciled in Connecticut. The Connecticut Department of Insurance does not require these rates to be filed for your state. We file Connecticut specific rates (i.e., rates charged to Connecticut residents) with the Connecticut Department of Insurance. Proposed 2024 Connecticut specific rates have not yet been filed for approval with the Connecticut Department of Insurance.

### **C. Rate Methodology/Assumptions**

1. General Method – Projections used in developing the 2024 rates are shown in Attachment 1. Based on the historical claim patterns, per member per month claim costs are developed by benefit and trended to the end of the 2024 rating period. (Also see Attachment 3).

Projected claim costs for 2023 and 2024 are calculated from the grouped experience for plans B through G (for those plans) and plans H through J (for those plans). The remaining plans are based on their own experience and the experience of other AARP Standardized Medicare Supplement Plans.

Rates are based on state of residence as approved by the state of residence. When notification of change of residence is received, rates are adjusted accordingly.

Expense per member per month costs are calculated to reflect the anticipated expenses, risk and profit margin, premium taxes, and marketing expenses.

2. Priced with Trend/Selection – Claim cost trends are projected for 2023 and 2024. The trend assumptions are based on the historical AARP Medicare Supplement experience and include selection.
3. Priced with Rate Increases – Rates are calculated for the policy period through May 31, 2025.
4. Commission Rate – Commissions are no longer paid on the closed 1990 Standardized plans.
5. Lapse Assumption – Lapse assumptions are based on historical AARP Medicare Supplement experience. For 2023 and 2024, the assumed annual lapse rates (including death) are 7.6% and 10.4%, respectively.
6. Morbidity Assumption – Morbidity assumptions are based on historical AARP Medicare Supplement experience and are incorporated into the trend projections and base claim costs.
7. Interest Assumption – 5.0%.
8. Pre-Funding – These plans are community rated. The rates are projected to be effective until May 31, 2025 and reflect no pre-funding.

### **D. Scope/Reason for Request**

1. Overall increase – The overall increase is 8.9%.
2. Variations by Cell – The requested rate increases vary by plan. Refer to the enclosed Rate Schedule.
3. Effective Date - June 1, 2024.
4. Timing – These plans are rated on a yearly basis. Requested rate changes will be implemented on June 1, 2024.

## **E. Rates and Rating Factors**

1. Current – See Rate Schedule.
2. Proposed – See Rate Schedule.
3. Period Rates Apply – Effective June 1, 2024.

## **F. Average Annualized Premium – See Attachment 4.**

## **G. Rate History – See Attachment 5.**

## **H. Average Lives – See Attachment 6.**

## **I. Historical Incurred Claims – See Attachment 1.**

## **J. Historical Earned Premium – See Attachment 1.**

## **K. Loss Ratio Projection**

The target lifetime loss ratio for Plans A through J is 75.9% and was filed with the initial policy filing. The target lifetime loss ratio for Plans K and L is 75%.

1. Definition – Loss ratios are calculated as incurred claims divided by premium.
2. Base Period – Claim cost projections are based on claim data paid through August 2023.
3. Lapse Assumption – Lapse assumptions are based on historical AARP Medicare Supplement experience. For 2023 and 2024, the assumed annual lapse rates (including death) are 7.6% and 10.4%, respectively.
4. Claim Trend Assumption – Claim trend projections are based on historical AARP Medicare Supplement experience and reflect changes made to the Medicare program. See Attachment 3 for projected claim trends.
5. Attained Age/Selection Adjustments – The loss ratio projections anticipate that increases in claim costs due to aging of current insureds will be offset by continuing enrollment of younger insureds.
6. Future Rate Increases – We anticipate future annual rate increases similar to future medical trend levels for most plans. For some plans future annual rate increases may be different than future medical trends in order to increase or decrease future loss ratios to target levels over time.
7. Interest Assumption – 5.0%.

8. With and Without Rate Change

- The anticipated lifetime loss ratio with the rate change implemented on June 1, 2024 is 80.9%.
- Without a change to the 2023 rates, the anticipated lifetime loss ratio is 83.1%.

**L. Loss Ratio Demonstration**


The anticipated lifetime and future loss ratios for these plans are shown in Attachment 1. After proposed rate actions and considering the credibility of the business and the expected one-time impact of COVID-19, the anticipated lifetime loss ratios, future loss ratios and third year loss ratios are greater than or equal to the applicable ratio.

**M. Actuarial Certification**

I am a member of the Society of Actuaries and a member of the American Academy of Actuaries. I meet the Qualification Standards of Actuarial Opinion as adopted by the American Academy of Actuaries and am qualified to render this prescribed statement of actuarial opinion.

I hereby certify that to the best of my knowledge and judgment, the following items are true with respect to this Medicare Supplement rate filing:

- This entire filing is in compliance with your state’s applicable laws, regulations and rules.
- This filing complies with all applicable Actuarial Standards of Practice as promulgated by the Actuarial Standards Board, including Actuarial Standard of Practice No. 8 “Regulatory Filings for Health Benefits, Accident and Health Insurance, and Entities Providing Health Benefits” and Actuarial Standard of Practice No. 23 “Data Quality”.
- Data provided by others were reviewed and determined to be of high quality and reliable.
- The assumptions within this filing present my best judgment as to the expected value for each assumption and are consistent with UnitedHealthcare’s business plan at the time of the filing.
- The filed rates maintain the proper relationship between policies which were originally filed with differing rating methodologies.
- The rates determined in this filing are reasonable in relation to the benefits provided and are not excessive, inadequate or unfairly discriminatory.
- The anticipated lifetime loss ratios, future loss ratios, and third-year loss ratios all meet or exceed the applicable ratio.

  
\_\_\_\_\_  
Xi Liu, FSA, MAAA  
Associate Director, Actuarial Services  
UnitedHealthcare Insurance Company

11/10/2023  
\_\_\_\_\_  
Date

# **UNITEDHEALTHCARE INSURANCE COMPANY**

## **STANDARDIZED MEDICARE SUPPLEMENT RATE FILING**

### **GROUP POLICY NUMBER G-36000-4 FORM NUMBERS**

**MS 1209A, MSA 1454 - MSJ 1463, CRA 1664, MSA 1959 - MSJ 1968,  
MSK 1935, MSL 1936**

**Rhode Island**

**EFFECTIVE 6/1/2024**

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6. Attachment 4 – Average Annualized Premiums (1 page)
7. Attachment 5 – Rate History (2 pages)
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**RHODE ISLAND - LOSS RATIO PROJECTIONS - 1990 and 2010 PLANS COMBINED**

Company: UnitedHealthcare Insurance Company  
 Policy Form: G-36000-4

**Claims Experience**

	<u>Plan A</u>	<u>Plan B</u>	<u>Plan C</u>	<u>Plan D</u>	<u>Plan E</u>	<u>Plan F</u>	<u>Plan G</u>	<u>Plan H</u>	<u>Plan I</u>	<u>Plan J</u>	<u>Plan K</u>	<u>Plan L</u>	<u>Plan N</u>	<u>All Plans</u>
Historical	\$ 5,064,456	\$ 4,584,636	\$ 97,494,854	\$ 3,929,131	\$ 6,191,253	\$ 348,491,798	\$ 23,731,124	\$ 2,871,584	\$ 15,572,016	\$ 62,818,394	\$ 935,967	\$ 890,783	\$ 60,432,852	\$ 633,008,848
Future	\$ 1,051,431	\$ 666,730	\$ 9,018,243	\$ 31,006	\$ 293,604	\$ 154,577,127	\$ 114,584,992	\$ 56,312	\$ 685,230	\$ 7,586,610	\$ 706,410	\$ 409,746	\$ 57,431,211	\$ 347,098,652
Lifetime	\$ 6,115,887	\$ 5,251,366	\$ 106,513,097	\$ 3,960,137	\$ 6,484,858	\$ 503,068,925	\$ 138,316,116	\$ 2,927,896	\$ 16,257,245	\$ 70,405,004	\$ 1,642,377	\$ 1,300,529	\$ 117,864,063	\$ 980,107,501

**Premium Experience - Without 2024 Rate Change**

	<u>Plan A</u>	<u>Plan B</u>	<u>Plan C</u>	<u>Plan D</u>	<u>Plan E</u>	<u>Plan F</u>	<u>Plan G</u>	<u>Plan H</u>	<u>Plan I</u>	<u>Plan J</u>	<u>Plan K</u>	<u>Plan L</u>	<u>Plan N</u>	<u>All Plans</u>
Historical	\$ 6,657,245	\$ 6,220,536	\$ 118,059,424	\$ 4,210,351	\$ 7,474,975	\$ 443,824,509	\$ 28,346,336	\$ 2,928,604	\$ 20,154,836	\$ 75,868,578	\$ 1,313,796	\$ 1,289,972	\$ 78,230,057	\$ 794,579,217
Future	\$ 1,236,626	\$ 795,904	\$ 10,558,447	\$ 35,711	\$ 339,742	\$ 184,347,554	\$ 117,699,784	\$ 53,263	\$ 660,890	\$ 7,673,552	\$ 801,146	\$ 477,802	\$ 59,592,968	\$ 384,273,389
Lifetime	\$ 7,893,871	\$ 7,016,439	\$ 128,617,871	\$ 4,246,062	\$ 7,814,717	\$ 628,172,063	\$ 146,046,120	\$ 2,981,867	\$ 20,815,726	\$ 83,542,130	\$ 2,114,942	\$ 1,767,774	\$ 137,823,026	\$ 1,178,852,606

**Premium Experience - With 2024 Rate Change**

	<u>Plan A</u>	<u>Plan B</u>	<u>Plan C</u>	<u>Plan D</u>	<u>Plan E</u>	<u>Plan F</u>	<u>Plan G</u>	<u>Plan H</u>	<u>Plan I</u>	<u>Plan J</u>	<u>Plan K</u>	<u>Plan L</u>	<u>Plan N</u>	<u>All Plans</u>
Historical	\$ 6,657,245	\$ 6,220,536	\$ 118,059,424	\$ 4,210,351	\$ 7,474,975	\$ 443,824,509	\$ 28,346,336	\$ 2,928,604	\$ 20,154,836	\$ 75,868,578	\$ 1,313,796	\$ 1,289,972	\$ 78,230,057	\$ 794,579,217
Future	\$ 1,343,009	\$ 864,105	\$ 11,445,308	\$ 38,629	\$ 367,977	\$ 199,852,078	\$ 128,109,771	\$ 57,655	\$ 714,937	\$ 8,315,333	\$ 871,275	\$ 519,217	\$ 64,707,418	\$ 417,206,712
Lifetime	\$ 8,000,254	\$ 7,084,641	\$ 129,504,732	\$ 4,248,980	\$ 7,842,952	\$ 643,676,587	\$ 156,456,106	\$ 2,986,259	\$ 20,869,773	\$ 84,183,911	\$ 2,185,071	\$ 1,809,189	\$ 142,937,475	\$ 1,211,785,928

**Loss Ratio Experience - Without 2024 Rate Change**

	<u>Plan A</u>	<u>Plan B</u>	<u>Plan C</u>	<u>Plan D</u>	<u>Plan E</u>	<u>Plan F</u>	<u>Plan G</u>	<u>Plan H</u>	<u>Plan I</u>	<u>Plan J</u>	<u>Plan K</u>	<u>Plan L</u>	<u>Plan N</u>	<u>All Plans</u>
Historical	76.1%	73.7%	82.6%	93.3%	82.8%	78.5%	83.7%	98.1%	77.3%	82.8%	71.2%	69.1%	77.3%	79.7%
Future	85.0%	83.8%	85.4%	86.8%	86.4%	83.9%	97.4%	105.7%	103.7%	98.9%	88.2%	85.8%	96.4%	90.3%
Lifetime	77.5%	74.8%	82.8%	93.3%	83.0%	80.1%	94.7%	98.2%	78.1%	84.3%	77.7%	73.6%	85.5%	83.1%

**Loss Ratio Experience - With 2024 Rate Change**

	<u>Plan A</u>	<u>Plan B</u>	<u>Plan C</u>	<u>Plan D</u>	<u>Plan E</u>	<u>Plan F</u>	<u>Plan G</u>	<u>Plan H</u>	<u>Plan I</u>	<u>Plan J</u>	<u>Plan K</u>	<u>Plan L</u>	<u>Plan N</u>	<u>All Plans</u>
Historical	76.1%	73.7%	82.6%	93.3%	82.8%	78.5%	83.7%	98.1%	77.3%	82.8%	71.2%	69.1%	77.3%	79.7%
Future	78.3%	77.2%	78.8%	80.3%	79.8%	77.3%	89.4%	97.7%	95.8%	91.2%	81.1%	78.9%	88.8%	83.2%
Lifetime	76.4%	74.1%	82.2%	93.2%	82.7%	78.2%	88.4%	98.0%	77.9%	83.6%	75.2%	71.9%	82.5%	80.9%

- Historical claims and premiums include calendar years 1998-2023, accumulated at 5% interest rate

- Future claims and premiums include years 2024-2033, discounted at 5% interest rate

- Experience through August 2023

**Projection of Rhode Island Loss Ratios - 1990 and 2010 PLANS COMBINED**

	<u>Plan A</u>	<u>Plan B</u>	<u>Plan C</u>	<u>Plan D</u>	<u>Plan E</u>	<u>Plan F</u>	<u>Plan G</u>	<u>Plan H</u>	<u>Plan I</u>	<u>Plan J</u>	<u>Plan K</u>	<u>Plan L</u>	<u>Plan N</u>	<u>Total</u>
Average Lives														
2021	104	59	756	12	24	11,212	2,151	6	74	526	122	41	3,893	18,980
2022	97	51	677	8	22	10,539	2,710	5	62	487	116	37	3,727	18,535
2023	85	39	589	4	22	9,871	3,222	5	55	442	111	33	3,547	18,024
2024	76	34	506	2	19	8,987	3,600	4	44	388	98	29	3,282	17,071
Average Rate														
2021	\$135.40	\$212.84	\$256.14	\$247.39	\$239.94	\$225.41	\$145.09	\$218.71	\$225.02	\$252.67	\$71.26	\$134.93	\$149.21	\$200.97
2022	\$137.78	\$215.91	\$261.20	\$250.61	\$244.10	\$232.33	\$145.97	\$226.09	\$229.68	\$256.81	\$72.15	\$139.79	\$151.98	\$203.54
2023	\$143.16	\$216.49	\$267.09	\$256.50	\$250.98	\$243.20	\$148.79	\$231.27	\$237.44	\$264.98	\$74.72	\$144.13	\$156.74	\$208.87
2024	\$153.91	\$225.34	\$279.63	\$265.31	\$267.23	\$262.16	\$158.12	\$238.17	\$250.35	\$281.92	\$79.93	\$154.11	\$166.84	\$221.04
Net Claim Rate														
2021	\$126.70	\$106.01	\$200.86	\$353.34	\$115.84	\$160.12	\$129.54	\$319.06	\$195.89	\$201.92	\$74.75	\$56.44	\$116.32	\$149.58
2022	\$112.27	\$148.84	\$215.85	\$219.72	\$153.67	\$175.33	\$124.06	\$172.67	\$235.79	\$204.17	\$56.31	\$90.50	\$122.10	\$158.25
2023	\$109.56	\$109.58	\$208.41	\$155.03	\$242.10	\$190.65	\$134.03	\$296.57	\$218.68	\$237.65	\$56.17	\$100.45	\$135.45	\$170.02
2024	\$122.92	\$175.71	\$222.54	\$215.51	\$215.83	\$204.02	\$142.90	\$231.09	\$238.56	\$255.59	\$65.00	\$123.59	\$147.21	\$180.68
Loss Ratios														
2021	93.6%	49.8%	78.4%	142.8%	48.3%	71.0%	89.3%	145.9%	87.1%	79.9%	104.9%	41.8%	78.0%	74.4%
2022	81.5%	68.9%	82.6%	87.7%	63.0%	75.5%	85.0%	76.4%	102.7%	79.5%	78.0%	64.7%	80.3%	77.8%
2023	76.5%	50.6%	78.0%	60.4%	96.5%	78.4%	90.1%	128.2%	92.1%	89.7%	75.2%	69.7%	86.4%	81.4%
2024	79.9%	78.0%	79.6%	81.2%	80.8%	77.8%	90.4%	97.0%	95.3%	90.7%	81.3%	80.2%	88.2%	81.7%

*Average rates are net of discounts*

RHODE ISLAND'S EXPERIENCE BY DURATION

UHC TOTAL STANDARDIZED PLANS

Incurred Year	Issue Year	Incurred Claims	Earned Premiums	Loss Ratio	Average Lives
1998	1998	3,490,221	4,232,432	82.5%	3,138
	Total	3,490,221	4,232,432	82.5%	3,138
1999	1999	177,593	213,938	83.0%	146
	1998	3,174,051	3,944,321	80.5%	2,574
	Total	3,351,644	4,158,259	80.6%	2,720
2000	2000	349,667	410,219	85.2%	285
	1999	332,620	408,612	81.4%	266
	1998	3,113,448	3,743,249	83.2%	2,371
	Total	3,795,735	4,562,080	83.2%	2,922
2001	2001	224,844	358,135	62.8%	232
	2000	538,544	605,596	88.9%	394
	1999	355,408	408,410	87.0%	246
	1998	3,113,292	3,614,316	86.1%	2,228
	Total	4,232,088	4,986,458	84.9%	3,100
2002	2002	296,940	380,604	78.0%	246
	2001	464,870	591,855	78.5%	364
	2000	500,212	574,867	87.0%	350
	1998-1999	3,249,035	3,710,424	87.6%	2,229
	Total	4,511,057	5,257,750	85.8%	3,189
2003	2003	326,847	452,681	72.2%	288
	2002	609,222	685,300	88.9%	419
	2001	445,236	595,288	74.8%	332
	1998-2000	3,744,014	4,202,965	89.1%	2,409
	Total	5,125,318	5,936,233	86.3%	3,447
2004	2004	303,711	438,777	69.2%	255
	2003	598,272	786,426	76.1%	463
	2002	632,344	690,366	91.6%	383
	1998-2001	4,106,532	4,809,482	85.4%	2,576
	Total	5,640,860	6,725,051	83.9%	3,676
2005	2005	449,036	521,146	86.2%	284
	2004	616,433	765,760	80.5%	423
	2003	532,060	764,802	69.6%	415
	1998-2002	4,521,831	5,277,314	85.7%	2,729
	Total	6,119,359	7,329,022	83.5%	3,851
2006	2006	710,741	757,118	93.9%	470
	2005	537,803	713,834	75.3%	419
	2004	525,393	647,558	81.1%	374
	1998-2003	4,445,920	5,281,591	84.2%	2,873
	Total	6,219,856	7,400,101	84.1%	4,135
2007	2007	460,923	630,330	73.1%	386
	2006	917,286	1,169,395	78.4%	697
	2005	467,544	691,847	67.6%	388
	1998-2004	4,721,178	5,675,334	83.2%	3,007
	Total	6,566,930	8,166,905	80.4%	4,479
2008	2008	572,462	653,606	87.6%	423
	2007	674,040	936,547	72.0%	552
	2006	833,104	1,116,048	74.6%	623
	1998-2005	5,338,486	6,227,485	85.7%	3,180
	Total	7,418,093	8,933,686	83.0%	4,777
2009	2009	819,148	892,456	91.8%	559
	2008	946,286	1,050,494	90.1%	680
	2007	654,131	899,159	72.7%	504
	1998-2006	5,970,176	7,027,496	85.0%	3,548
	Total	8,389,741	9,869,606	85.0%	5,291

RHODE ISLAND'S EXPERIENCE BY DURATION

UHC TOTAL STANDARDIZED PLANS

Incurred Year	Issue Year	Incurred Claims	Earned Premiums	Loss Ratio	Average Lives
<b>2010</b>	2010	945,120	1,102,404	85.7%	650
	2009	1,334,115	1,358,763	98.2%	833
	2008	796,255	1,031,966	77.2%	629
	1998-2007	6,377,968	7,710,561	82.7%	3,744
<b>Total</b>		<b>9,453,458</b>	<b>11,203,694</b>	<b>84.4%</b>	<b>5,856</b>
<b>2011</b>	2011	1,388,948	1,594,886	87.1%	1,016
	2010	1,299,308	1,606,695	80.9%	937
	2009	1,139,118	1,359,236	83.8%	759
	1998-2008	6,967,657	8,664,205	80.4%	4,005
<b>Total</b>		<b>10,795,031</b>	<b>13,225,023</b>	<b>81.6%</b>	<b>6,718</b>
<b>2012</b>	2012	1,153,407	1,453,786	79.3%	936
	2011	1,854,408	2,265,785	81.8%	1,440
	2010	1,293,961	1,534,268	84.3%	855
	1998-2009	7,734,008	9,553,272	81.0%	4,435
<b>Total</b>		<b>12,035,784</b>	<b>14,807,111</b>	<b>81.3%</b>	<b>7,666</b>
<b>2013</b>	2013	1,380,146	1,687,136	81.8%	1,067
	2012	1,960,358	2,330,134	84.1%	1,432
	2011	1,908,456	2,255,056	84.6%	1,329
	1998-2010	8,399,777	10,881,706	77.2%	4,932
<b>Total</b>		<b>13,648,737</b>	<b>17,154,031</b>	<b>79.6%</b>	<b>8,759</b>
<b>2014</b>	2014	4,084,889	4,474,863	91.3%	2,380
	2013	2,059,448	2,539,615	81.1%	1,530
	2012	1,823,908	2,299,692	79.3%	1,302
	1998-2011	9,916,825	12,826,274	77.3%	5,791
<b>Total</b>		<b>17,885,069</b>	<b>22,140,443</b>	<b>80.8%</b>	<b>11,004</b>
<b>2015</b>	2015	1,980,868	2,580,066	76.8%	1,519
	2014	10,124,503	12,355,655	81.9%	6,269
	2013	1,995,676	2,385,735	83.7%	1,376
	1998-2012	11,147,592	14,452,249	77.1%	6,608
<b>Total</b>		<b>25,248,638</b>	<b>31,773,704</b>	<b>79.5%</b>	<b>15,772</b>
<b>2016</b>	2016	2,643,415	3,144,097	84.1%	1,785
	2015	2,998,671	3,574,597	83.9%	2,098
	2014	9,869,357	11,814,654	83.5%	5,868
	1998-2013	12,834,141	16,013,196	80.1%	7,460
<b>Total</b>		<b>28,345,584</b>	<b>34,546,544</b>	<b>82.1%</b>	<b>17,212</b>
<b>2017</b>	2017	1,905,630	2,276,941	83.7%	1,331
	2016	3,154,643	4,296,482	73.4%	2,382
	2015	2,912,490	3,517,364	82.8%	1,935
	1998-2014	21,734,769	27,364,431	79.4%	12,487
<b>Total</b>		<b>29,707,532</b>	<b>37,455,218</b>	<b>79.3%</b>	<b>18,136</b>
<b>2018</b>	2018	2,058,383	2,607,229	78.9%	1,572
	2017	2,968,383	3,779,363	78.5%	2,114
	2016	3,271,695	4,330,730	75.5%	2,184
	1998-2015	24,282,890	31,298,610	77.6%	13,447
<b>Total</b>		<b>32,581,352</b>	<b>42,015,932</b>	<b>77.5%</b>	<b>19,317</b>
<b>2019</b>	2019	1,639,127	2,009,358	81.6%	1,169
	2018	3,170,373	3,950,537	80.3%	2,310
	2017	2,961,107	3,741,519	79.1%	1,948
	1998-2016	27,007,183	34,732,848	77.8%	14,506
<b>Total</b>		<b>34,777,789</b>	<b>44,434,261</b>	<b>78.3%</b>	<b>19,934</b>
<b>2020</b>	2020	1,054,114	1,368,398	77.0%	853
	2019	2,264,931	2,982,462	75.9%	1,676
	2018	2,848,312	3,822,169	74.5%	2,049
	1998-2017	24,403,956	36,837,227	66.2%	14,946
<b>Total</b>		<b>30,571,313</b>	<b>45,010,256</b>	<b>67.9%</b>	<b>19,524</b>
<b>2021</b>	2021	1,390,351	1,255,714	110.7%	771
	2020	1,842,332	2,168,340	85.0%	1,327
	2019	2,093,517	2,910,701	71.9%	1,498
	1998-2018	28,743,553	39,438,481	72.9%	15,384
<b>Total</b>		<b>34,069,753</b>	<b>45,773,236</b>	<b>74.4%</b>	<b>18,980</b>
<b>2022</b>	2022	957,794	1,086,990	88.1%	655
	2021	1,626,734	1,854,879	87.7%	1,154
	2020	1,817,695	2,038,106	89.2%	1,194
	1998-2019	30,796,826	40,291,411	76.4%	15,533
<b>Total</b>		<b>35,199,049</b>	<b>45,271,385</b>	<b>77.8%</b>	<b>18,535</b>

**RHODE ISLAND BENEFIT COSTS**  
**1990 & 2010 PLANS COMBINED**

	Per Member Per Month Costs*					
	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>Proj 2023</u>	<u>Proj 2024</u>
<b>PLAN A</b>						
Part B	\$95.56	\$97.73	\$126.70	\$111.84	\$106.76	\$119.93
Part A	\$0.00	\$0.00	\$0.00	\$0.44	\$2.80	\$2.99
Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total PMPM Cost	\$95.56	\$97.73	\$126.70	\$112.27	\$109.56	\$122.92
<i>Trend</i>		2.3%	29.6%	-11.4%	-2.4%	12.2%
<b>PLANS B-G, excl 2010 PLAN G</b>						
Part B	\$125.72	\$115.49	\$130.81	\$141.26	\$150.42	\$160.30
Part A	\$33.76	\$28.38	\$31.55	\$35.49	\$40.58	\$44.08
Other	\$0.31	\$0.28	\$0.00	\$0.67	\$0.40	\$0.57
Total PMPM Cost	\$159.80	\$144.15	\$162.36	\$177.42	\$191.40	\$204.95
<i>Trend</i>		-9.8%	12.6%	9.3%	7.9%	7.1%
<b>2010 PLAN G</b>						
Part B	\$93.29	\$83.66	\$102.94	\$105.73	\$114.14	\$121.45
Part A	\$16.75	\$15.45	\$27.00	\$18.65	\$19.21	\$20.51
Other	\$0.00	\$0.00	\$0.02	\$0.00	\$0.39	\$0.54
Total PMPM Cost	\$110.05	\$99.11	\$129.95	\$124.38	\$133.74	\$142.50
<i>Trend</i>		-9.9%	31.1%	-4.3%	7.5%	6.6%
<b>PLANS H-J</b>						
Part B	\$141.57	\$137.67	\$149.03	\$158.36	\$180.00	\$192.40
Part A	\$35.88	\$39.16	\$48.61	\$44.84	\$51.32	\$56.27
Prescription Drugs	\$67.54	\$92.79	\$107.85	\$98.46	\$117.66	\$124.26
Other	\$0.29	\$0.32	\$0.39	\$0.33	\$0.31	\$0.42
Total PMPM Cost	\$180.63	\$180.73	\$202.30	\$207.44	\$236.16	\$253.66
<i>Trend</i>		0.1%	11.9%	2.5%	13.8%	7.4%
<b>PLAN K</b>						
Part B	\$40.80	\$33.87	\$65.75	\$49.33	\$42.13	\$47.59
Part A	\$13.32	\$8.83	\$9.00	\$6.98	\$14.03	\$17.40
Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total PMPM Cost	\$54.12	\$42.71	\$74.75	\$56.31	\$56.17	\$65.00
<i>Trend</i>		-21.1%	75.0%	-24.7%	-0.3%	15.7%
<b>PLAN L</b>						
Part B	\$73.65	\$51.38	\$45.14	\$58.06	\$63.73	\$80.62
Part A	\$30.66	\$11.33	\$11.30	\$32.44	\$36.73	\$42.97
Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total PMPM Cost	\$104.30	\$62.71	\$56.44	\$90.50	\$100.45	\$123.59
<i>Trend</i>		-39.9%	-10.0%	60.3%	11.0%	23.0%
<b>PLAN N</b>						
Part B	\$77.20	\$70.54	\$82.49	\$93.11	\$101.84	\$110.35
Part A	\$29.37	\$24.23	\$33.82	\$28.99	\$33.36	\$36.32
Other	\$0.11	\$0.01	\$0.00	\$0.00	\$0.25	\$0.54
Total PMPM Cost	\$106.68	\$94.77	\$116.32	\$122.10	\$135.45	\$147.21
<i>Trend</i>		-11.2%	22.7%	5.0%	10.9%	8.7%

**TOTAL STANDARDIZED PLANS**

Part B	\$113.31	\$103.59	\$117.74	\$126.06	\$134.21	\$142.40
Part A	\$31.72	\$26.57	\$31.69	\$31.66	\$35.32	\$37.62
Prescription Drugs	\$67.54	\$92.79	\$107.85	\$98.46	\$117.66	\$124.26
Other	\$0.25	\$0.20	\$0.02	\$0.42	\$0.36	\$0.55
<b>Total PMPM Cost</b>	<b>\$145.39</b>	<b>\$130.48</b>	<b>\$149.58</b>	<b>\$158.25</b>	<b>\$170.02</b>	<b>\$180.68</b>
<i>Trend</i>		<i>-10.2%</i>	<i>14.6%</i>	<i>5.8%</i>	<i>7.4%</i>	<i>6.3%</i>

'Other' includes hospice care, foreign care, home health care, and/or preventive care benefit depending on the plan.

\*The per member per month cost is equal to the incurred claims divided by the number of lives with that specific benefit.

**Rhode Island Average Annualized Premiums  
1990 Plans**

<u>Plan</u>	Proposed <u>2024*</u>	<u>2023*</u>
A	\$2,034	\$1,864
B	\$3,036	\$2,813
C	\$3,645	\$3,360
D	\$3,301	\$3,084
E	\$3,321	\$3,057
F	\$3,657	\$3,367
G	\$3,330	\$3,068
H	\$2,963	\$2,766
I	\$3,116	\$2,879
J	\$3,499	\$3,228
K	\$1,211	\$1,112
L	\$2,154	\$1,987
Total 1990 Plans	\$3,538	\$3,258

**Rhode Island Average Annualized Premiums  
2010 Plans**

<u>Plan</u>	Proposed <u>2024*</u>	<u>2023*</u>
A	\$1,828	\$1,637
B	\$2,681	\$2,469
C	\$3,222	\$2,977
F	\$3,236	\$2,937
G	\$1,951	\$1,797
K	\$989	\$904
L	\$1,837	\$1,641
N	\$2,070	\$1,907
Total 2010 Plans	\$2,655	\$2,456

*\*Average premiums are net of discounts and are calculated on a policy year basis.*

**Rhode Island  
Standardized Plans Rate History  
UHC Plans  
1990 Plans - Base Rates**

	<u>1/2019</u>	<u>1/2020*</u>	<u>1/2021</u>	<u>6/2022</u>	<u>6/2023</u>	<u>Proposed 6/2024</u>	<u>2020/2019*</u>	<u>2021/2020</u>	<u>2022/2021</u>	<u>2023/2022</u>	<u>Proposed 2024/2023</u>
<b>A</b>	\$136.25	\$143.00	\$150.00	\$154.50	\$160.00	\$174.25	5.0%	4.9%	3.0%	3.6%	8.9%
<b>B</b>	\$203.25	\$213.25	\$224.00	\$230.75	\$238.75	\$260.00	4.9%	5.0%	3.0%	3.5%	8.9%
<b>C</b>	\$243.75	\$255.75	\$268.50	\$276.50	\$286.25	\$311.75	4.9%	5.0%	3.0%	3.5%	8.9%
<b>D</b>	\$221.25	\$232.00	\$243.50	\$250.75	\$259.50	\$282.50	4.9%	5.0%	3.0%	3.5%	8.9%
<b>E</b>	\$222.25	\$233.25	\$245.00	\$252.25	\$261.00	\$284.25	4.9%	5.0%	3.0%	3.5%	8.9%
<b>F</b>	\$244.75	\$256.75	\$269.50	\$277.50	\$287.25	\$312.75	4.9%	5.0%	3.0%	3.5%	8.9%
<b>G</b>	\$223.00	\$234.00	\$245.75	\$253.00	\$261.75	\$285.00	4.9%	5.0%	3.0%	3.5%	8.9%
<b>H (with drugs)</b>	\$289.00	\$303.25	\$318.50	\$328.00	\$339.50	\$369.75	4.9%	5.0%	3.0%	3.5%	8.9%
<b>H (without drugs)</b>	\$200.25	\$210.00	\$220.50	\$227.00	\$235.00	\$256.00	4.9%	5.0%	2.9%	3.5%	8.9%
<b>I (with drugs)</b>	\$290.75	\$305.00	\$320.25	\$329.75	\$341.25	\$371.50	4.9%	5.0%	3.0%	3.5%	8.9%
<b>I (without drugs)</b>	\$201.75	\$211.75	\$222.25	\$229.00	\$237.00	\$258.00	5.0%	5.0%	3.0%	3.5%	8.9%
<b>J (with drugs)</b>	\$382.75	\$401.50	\$421.75	\$434.50	\$449.75	\$489.75	4.9%	5.0%	3.0%	3.5%	8.9%
<b>J (without drugs)</b>	\$231.50	\$242.75	\$255.00	\$262.75	\$272.00	\$296.25	4.9%	5.0%	3.0%	3.5%	8.9%
<b>K</b>	\$77.75	\$81.50	\$85.50	\$88.00	\$91.00	\$99.00	4.8%	4.9%	2.9%	3.4%	8.8%
<b>L</b>	\$139.00	\$145.25	\$152.50	\$157.00	\$162.50	\$177.00	4.5%	5.0%	3.0%	3.5%	8.9%

Note: These rate changes do not reflect any rating factor updates.

\*The rate changes were deferred until April 1st.



**Rhode Island  
Standardized Plans Rate History  
UHC Plans  
2010 Plans - Non-Tobacco User Unisex Base Rates**

	<u>1/2019</u>	<u>1/2020*</u>	<u>1/2021</u>	<u>6/2022</u>	<u>6/2023</u>	<u>Proposed 6/2024</u>	<u>2020/2019*</u>	<u>2021/2020</u>	<u>2022/2021</u>	<u>2023/2022</u>	<u>Proposed 2024/2023</u>
<b>A</b>	\$124.25	\$130.25	\$136.75	\$140.75	\$145.75	\$158.75	4.8%	5.0%	2.9%	3.6%	8.9%
<b>B</b>	\$189.00	\$198.25	\$208.00	\$214.25	\$221.75	\$241.50	4.9%	4.9%	3.0%	3.5%	8.9%
<b>C</b>	\$226.75	\$237.75	\$249.50	\$257.00	\$266.00	\$289.75	4.9%	4.9%	3.0%	3.5%	8.9%
<b>F</b>	\$227.50	\$238.75	\$250.75	\$258.25	\$267.25	\$291.00	4.9%	5.0%	3.0%	3.5%	8.9%
<b>G</b>	\$192.75	\$202.25	\$212.25	\$218.50	\$226.25	\$246.50	4.9%	4.9%	2.9%	3.5%	9.0%
<b>K</b>	\$71.00	\$74.50	\$78.25	\$80.50	\$83.25	\$90.75	4.9%	5.0%	2.9%	3.4%	9.0%
<b>L</b>	\$128.75	\$134.50	\$141.25	\$145.50	\$150.50	\$164.00	4.5%	5.0%	3.0%	3.4%	9.0%
<b>N</b>	\$151.00	\$158.50	\$166.50	\$171.50	\$177.50	\$193.25	5.0%	5.0%	3.0%	3.5%	8.9%

Note: These rate changes do not reflect any rating factor updates.

\*The rate changes were deferred until April 1st.

**Rhode Island Average Lives\***  
**1990 Plans**

<u>Plan</u>	<u>2024</u>	<u>2023</u>
A	34	40
B	11	13
C	290	343
D	2	3
E	18	21
F	703	803
G	18	22
H	3	5
I	40	50
J	368	420
K	2	3
L	8	9
Total 1990 Plans	1,497	1,733

**Rhode Island Average Lives\***  
**2010 Plans**

<u>Plan</u>	<u>2024</u>	<u>2023</u>
A	40	41
B	21	23
C	187	210
F	7,960	8,715
G	3,751	3,361
K	91	103
L	20	22
N	3,217	3,433
Total 2010 Plans	15,287	15,908

*\*Average lives are calculated on a policy year basis*

**National Average Lives\***  
**1990 Plans**

<u>Plan</u>	<u>2024</u>	<u>2023</u>
A	13,887	16,446
B	9,587	11,616
C	85,339	102,625
D	6,805	8,291
E	7,343	8,989
F	243,419	282,875
G	8,259	9,900
H	3,430	4,132
I	20,516	24,317
J	157,132	177,885
K	2,237	2,567
L	3,644	4,264
Total 1990 Plans	561,598	653,907

**National Average Lives\***  
**2010 Plans**

<u>Plan</u>	<u>2024</u>	<u>2023</u>
A	18,093	19,921
B	13,164	14,680
C	29,173	32,872
D	1,197	1,199
F	1,375,089	1,509,377
G	1,279,888	1,161,995
K	43,628	48,129
L	17,799	19,752
N	530,522	572,334
Total 2010 Plans	3,308,553	3,380,259

*\*Average lives are calculated on a policy year basis*

## Rhode Island Medicare Supplement Total Standardized Plans Trend

The components of the composite trend are shown below.

### Part B Coinsurance

	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>
Medicare Fee Update	2.6%	0.5%	1.5%	0.6%
Utilization Trend	12.5%	6.2%	6.3%	5.9%
Composite Trend	15.4%	6.7%	7.8%	6.5%

The net change in the cost for Part B services in 2023 was 1.5%. For 2024, we assume a net change of 0.6%.

Utilization trend considers changes in the number of services used as well as the intensity of services. Our assumed utilization trends for 2023 and 2024 are 6.3% and 5.9%, respectively.

**Part B Deductible** -- For 2024 the Part B deductible will be \$240, an increase of 6.2% over 2023. The projected Part B deductible trend is -2.3% for 2023 and 6.2% for 2024.

**Part B Excess** -- Projected claim costs for 2023 and 2024 are based on actuarial judgment and are \$0.06 and \$0.10, respectively.

### Part A Deductible --

	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>
Medicare Part A Deductible	\$1,484	\$1,556	\$1,600	\$1,632
% Change in Part A Deductible	5.4%	4.9%	2.8%	2.0%
Utilization Trend	5.6%	1.6%	3.1%	4.5%
Composite Trend	11.3%	6.5%	6.0%	6.6%

**Hospital Co-Payments** -- Hospital Co-payments are paid for days 61 and after for long hospital stays. Projected claim costs for 2023 and 2024 are based on actuarial judgment and are \$2.79 and \$2.98, respectively.

**Skilled Nursing** -- Medicare Supplement plans which have a skilled nursing facility stay benefit pay the Medicare cost sharing amount for days 21-100.

	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>
Medicare Daily Coinsurance	\$186	\$195	\$200	\$204
% Change in Daily Coinsurance	5.4%	4.9%	2.8%	2.0%
Utilization/Length of Stay, days 21-100	20.7%	1.3%	6.5%	4.1%
Composite Trend	27.2%	6.2%	9.5%	6.2%

**Foreign Care/ At-Home Care/ Preventive Care / Prescription Drugs** -- In aggregate, these benefits represent less than 1% of the total Rhode Island claim costs. Projected costs for these benefits were based on historical experience and actuarial judgment.

**Rhode Island Standardized  
Paid and Incurred Experience**  
*(Most recent 5 years shown)*

<b>Plan A</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	179,448	179,448	117,993	115,413	40,625	65.8%	64.3%
2019	173,574	173,574	130,218	134,935	39,627	75.0%	77.7%
2020	168,079	168,079	130,285	128,120	37,486	77.5%	76.2%
2021	168,843	168,843	157,387	157,992	36,391	93.2%	93.6%
2022	160,654	160,654	131,637	130,910	35,774	81.9%	81.5%

<b>Plan B</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	176,533	176,533	102,201	103,834	35,929	57.9%	58.8%
2019	169,055	169,055	100,736	104,119	33,562	59.6%	61.6%
2020	159,656	159,656	79,978	74,884	30,924	50.1%	46.9%
2021	149,840	149,840	75,597	74,630	28,767	50.5%	49.8%
2022	131,273	131,273	88,283	90,494	26,597	67.3%	68.9%

<b>Plan C</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	2,806,781	2,806,781	2,177,092	2,104,250	510,852	77.6%	75.0%
2019	2,659,108	2,659,108	2,142,070	2,118,755	476,475	80.6%	79.7%
2020	2,483,963	2,483,963	1,813,976	1,791,284	439,461	73.0%	72.1%
2021	2,324,482	2,324,482	1,814,120	1,822,832	407,113	78.0%	78.4%
2022	2,120,398	2,120,398	1,750,464	1,752,239	391,209	82.6%	82.6%

**Rhode Island Standardized  
Paid and Incurred Experience  
(Most recent 5 years shown)**

<b>Plan D</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	45,906	45,906	50,674	43,908	8,393	110.4%	95.6%
2019	37,537	37,537	19,541	17,330	6,753	52.1%	46.2%
2020	36,159	36,159	22,227	26,887	6,416	61.5%	74.4%
2021	35,871	35,871	40,560	51,234	6,388	113.1%	142.8%
2022	22,805	22,805	35,456	19,994	4,291	155.5%	87.7%

<b>Plan E</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	95,592	95,592	69,184	66,735	17,731	72.4%	69.8%
2019	90,051	90,051	74,077	77,191	16,379	82.3%	85.7%
2020	76,175	76,175	60,672	59,752	13,729	79.6%	78.4%
2021	69,583	69,583	33,928	33,594	12,576	48.8%	48.3%
2022	63,709	63,709	41,547	40,108	12,140	65.2%	63.0%

<b>Plan F</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	28,815,241	28,815,241	22,541,499	22,659,678	5,623,657	78.2%	78.6%
2019	30,302,809	30,302,809	23,791,955	23,668,903	5,839,224	78.5%	78.1%
2020	30,425,208	30,425,208	20,985,807	20,459,882	5,754,070	69.0%	67.2%
2021	30,328,508	30,328,508	21,395,785	21,544,282	5,654,087	70.5%	71.0%
2022	29,383,551	29,383,551	22,007,252	22,174,675	5,736,423	74.9%	75.5%

**Rhode Island Standardized  
Paid and Incurred Experience  
(Most recent 5 years shown)**

<b>Plan G</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	982,262	982,262	731,720	839,212	225,933	74.5%	85.4%
2019	1,774,198	1,774,198	1,292,647	1,374,879	406,708	72.9%	77.5%
2020	2,617,761	2,617,761	1,788,643	1,809,614	603,471	68.3%	69.1%
2021	3,744,795	3,744,795	2,954,083	3,343,301	893,158	78.9%	89.3%
2022	4,746,571	4,746,571	4,118,338	4,034,186	1,199,281	86.8%	85.0%

<b>Plan H</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	23,703	23,703	29,846	16,989	4,488	125.9%	71.7%
2019	22,759	22,759	14,995	14,960	4,210	65.9%	65.7%
2020	18,359	18,359	30,201	28,667	3,437	164.5%	156.1%
2021	15,091	15,091	22,452	22,015	2,857	148.8%	145.9%
2022	13,566	13,566	4,095	10,360	2,685	30.2%	76.4%

<b>Plan I</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	249,103	249,103	185,554	185,778	48,083	74.5%	74.6%
2019	243,789	243,789	227,507	234,075	46,100	93.3%	96.0%
2020	228,168	228,168	209,452	203,714	42,621	91.8%	89.3%
2021	199,593	199,593	178,671	173,756	37,242	89.5%	87.1%
2022	171,799	171,799	170,128	176,370	33,732	99.0%	102.7%

**Rhode Island Standardized  
Paid and Incurred Experience  
(Most recent 5 years shown)**

<b>Plan J</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	1,715,316	1,715,316	1,467,185	1,416,153	316,820	85.5%	82.6%
2019	1,705,839	1,705,839	1,320,322	1,333,278	307,542	77.4%	78.2%
2020	1,622,817	1,622,817	1,265,020	1,212,908	288,966	78.0%	74.7%
2021	1,595,368	1,595,368	1,233,206	1,274,919	281,228	77.3%	79.9%
2022	1,499,229	1,499,229	1,213,296	1,191,936	278,819	80.9%	79.5%

<b>Plan K</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	88,833	88,833	76,644	76,656	31,988	86.3%	86.3%
2019	98,869	98,869	72,810	83,459	35,481	73.6%	84.4%
2020	104,896	104,896	73,395	65,854	35,785	70.0%	62.8%
2021	104,258	104,258	112,271	109,359	34,030	107.7%	104.9%
2022	100,219	100,219	78,336	78,218	33,668	78.2%	78.0%

<b>Plan L</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	81,091	81,091	42,795	48,584	19,114	52.8%	59.9%
2019	81,734	81,734	71,386	69,988	18,767	87.3%	85.6%
2020	73,268	73,268	40,465	34,992	16,110	55.2%	47.8%
2021	66,386	66,386	27,310	27,771	14,337	41.1%	41.8%
2022	61,226	61,226	39,278	39,638	13,524	64.2%	64.7%

<b>Plan N</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	6,756,123	6,756,123	4,848,554	4,904,161	1,590,319	71.8%	72.6%
2019	7,074,939	7,074,939	5,374,520	5,545,918	1,652,612	76.0%	78.4%
2020	6,995,747	6,995,747	4,866,709	4,674,754	1,595,480	69.6%	66.8%
2021	6,970,619	6,970,619	5,117,796	5,434,069	1,517,240	73.4%	78.0%
2022	6,796,384	6,796,384	5,630,903	5,459,921	1,540,779	82.9%	80.3%

<b>Total Standardized</b>	<u>Paid Premium</u>	<u>Earned Premium</u>	<u>Paid Claims</u>	<u>Incurred Claims</u>	<u>Incurred Expenses</u>	<u>Paid Loss Ratios</u>	<u>Incurred Loss Ratios</u>
2018	42,015,932	42,015,932	32,440,941	32,581,352	8,473,931	77.2%	77.5%
2019	44,434,261	44,434,261	34,632,782	34,777,789	8,883,440	77.9%	78.3%
2020	45,010,256	45,010,256	31,366,831	30,571,313	8,867,958	69.7%	67.9%
2021	45,773,236	45,773,236	33,163,166	34,069,753	8,925,414	72.5%	74.4%
2022	45,271,385	45,271,385	35,309,013	35,199,049	9,308,921	78.0%	77.8%



**2024 MONTHLY RATES FOR PLANS NOT ISSUED IN  
RHODE ISLAND**

<u>Plan*</u>	<u>Base**</u>	<u>Tier I</u>	<u>Tier II</u>
HW/IW/AW/BW (with drugs)	\$232.75	\$256.02	\$349.12
HW/IW/AW/BW (without drugs)	\$232.50	\$255.75	\$348.75
WA/WC	\$50.00	\$55.00	\$75.00
WB/WD	\$5.25	\$5.77	\$7.87
SB/SC	\$236.50	\$260.15	
SD/SE	\$46.00	\$50.60	
SF/SG (with drugs)	\$841.25	\$925.37	
SF/SG (without drugs)	\$296.25	\$325.87	

\* *HW/IW/AW/BW, WA, and WB are Wisconsin issued plans and riders.  
SB/SC, SD/SE, and SF/SG are Minnesota issued plans and riders.*

\*\* *Enrollment Discounts apply to Wisconsin issued plans.*

**Rhode Island  
2024 Expenses by Category**

**1990 & 2010 Standardized Medicare Supplement Plans**

Member Contribution            \$45,889,355

Average Lives                    16,785

Expenses	<u>% of Member Contribution</u>	<u>PMPM</u>
Royalty	5.95%	\$13.56
Premium Taxes	2.00%	\$4.56
Risk and Profit	2.05%	\$4.67
Operating Expenses	4.88%	\$11.11
Sales Expenses	1.89%	\$4.32
Commissions	3.65%	\$8.31
Investment Income Credit	-0.21%	(\$0.48)
Total Expenses	20.21%	\$46.04

## 1990 Standardized Plans

This chart gives you a quick look at the standardized Medigap Plans that can be sold for effective dates up through May 31, 2010 (including Medicare SELECT) and their benefits. Insurance companies offering Medigap policies must make Plan A available. Not all types of Medigap policies may be available in each state.

If a checkmark appears in a column of this chart, this means that the Medigap policy covers 100% of the described benefit. If a column lists a percentage, this means the Medigap policy covers that percentage of the described benefit. If a column is blank, this means the Medigap policy doesn't cover that benefit. Note: The Medigap policy covers coinsurance only after you have paid the deductible (unless the Medigap policy also covers the deductible).

Through May 31, 2010 the standardized plans are:

Medigap Benefits	Medigap Plans A through L											
	A	B	C	D	E	F	G	H	I	J	K	L
Medicare Part A Coinsurance and all costs after hospital benefits are used up <sup>1</sup>	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Medicare Part B Coinsurance or Copayment except for preventive services	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	50%	75%
Blood (First 3 Pints)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	50%	75%
Hospice Care Coinsurance or Copayment											50%	75%
Skilled Nursing Facility Care Coinsurance			✓	✓	✓	✓	✓	✓	✓	✓	50%	75%
Medicare Part A Deductible		✓	✓	✓	✓	✓	✓	✓	✓	✓	50%	75%
Medicare Part B Deductible			✓			✓				✓		
Medicare Part B Excess Charges						✓	80%		✓	✓		
Outpatient Prescription Drugs (50% after \$250 deductible; up to plan limits)								x <sup>2</sup>	x <sup>2</sup>	x <sup>2</sup>		
Foreign Travel Emergency (Up to Plan Limit) <sup>3</sup>			✓	✓	✓	✓	✓	✓	✓	✓		
At-home Recovery (Up to Plan Limits)				✓			✓		✓	✓		
Medicare Preventive Care Part B Coinsurance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Preventive Care not Covered by Medicare (up to \$120)					✓					✓		

<sup>1</sup> Lifetime maximum of 365 days

<sup>2</sup> Prescription drug benefits will be discontinued for insureds covered by Plans H, I, and J who enroll in Medicare Part D. Prescription drug benefits will continue for insureds who enrolled in Plans H, I, and J before January 1, 2006 who do not enroll in Medicare Part D. Plans H, I, and J will not include prescription drug benefits to insureds who enroll on or after January 1, 2006.

<sup>3</sup> Benefit is 80% after the \$250 annual deductible with a \$50,000 lifetime maximum for Foreign Emergency Care that begins during the first 60 days of a trip period.

<sup>4</sup> After you meet your out-of-pocket yearly limit and your yearly Part B deductible, the plan pays 100% of covered services for the rest of the calendar year.

2024 out-of-pocket limit <sup>4</sup> ▶	\$7,060	\$3,530
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Company Name: UnitedHealthcare Insurance Company

NAIC Company Code: 79413

Market Segment: 1990 Standardized Medicare Supplement Plans (plans issued prior to June 1, 2010)

SERFF Tracking Number: UHLC-133830742

## Scope and Range of the Rate Increase

2024 rate increases have been proposed for the AARP Standardized Medicare Supplement Insurance Plans for members residing in Rhode Island. These rate actions are projected to apply to 1,497 members. The new monthly premium rates will apply to members beginning June 1, 2024.

We calculate a needed overall increase of 10.3% to cover projected 2024 rating period claims cost and expenses. We are proposing to limit the average increase to 8.9%, which is 1.4% lower than the calculated needed increase. These lower rate actions are intended to help mitigate the member impact at this time. Additional premium changes may occur due to changes in policyholder discounts.

The proposed rate increase is needed to cover the projected medical and administrative costs for 2024. We will continue to work hard to keep premium rates as low as possible for all members.

## Increases in Medical Costs

There are many different health care cost trends that contribute to increases in the Medicare health care spending each year. Some of the key health care cost trends that have affected this year's rate increases include:

- **Increasing Cost of Medical Services:** Annual increases in reimbursement rates to health care providers.
- **Increasing Utilization:** The number of office visits and other medical services continues to grow. In addition, total health care spending will vary by the intensity of care and use of different types of health services.
- **Increases in Medicare Deductibles:** Medicare deductibles that are covered under these plans are expected to increase.
- **Impact of New Technology:** Improvements to medical technology and clinical practice lead to more expensive services increasing health care spending.

## Administrative Costs

Expected administrative costs for these plans are similar to current administrative costs and are not contributing to the proposed rate increase.