Company Tracking #: C23-022-MIPPA

State:	Rhode Island	Filing Company:	UnitedHealthcare Insurance Company
TOI/Sub-TOI:	MS08G Group Medicare Supplement - Standa	rd Plans 2010/MS08G.012 Mu	ılti-Plan 2010
Product Name:	GROUP MEDICARE SUPPLEMENT PLANS -	MIPPA	
Project Name/Number:	RATE/C23-022-MIPPA		

Filing at a Glance

Company:	UnitedHealthcare Insurance Company
Product Name:	GROUP MEDICARE SUPPLEMENT PLANS - MIPPA
State:	Rhode Island
TOI:	MS08G Group Medicare Supplement - Standard Plans 2010
Sub-TOI:	MS08G.012 Multi-Plan 2010
Filing Type:	Rate
Date Submitted:	11/15/2023
SERFF Tr Num:	UHLC-133830765
SERFF Status:	Assigned
State Tr Num:	
State Status:	Open-Pending Actuary Review
Co Tr Num:	C23-022-MIPPA
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:	

PDF Pipeline for SERFF Tracking Number UHLC-133830765 Generated 11/16/2023 01:21 PM

Company Tracking #: C23-022-MIPPA

State:	Rhode Island	Filing Company:	UnitedHealthcare Insurance Company
TOI/Sub-TOI:	MS08G Group Medicare Supplement - Standa	rd Plans 2010/MS08G.012 M	ulti-Plan 2010
Product Name:	GROUP MEDICARE SUPPLEMENT PLANS	MIPPA	
Project Name/Number:	RATE/C23-022-MIPPA		

General Information

Project Name: RATE Project Number: C23-022-MIPPA Requested Filing Mode: Review & Approval Explanation for Combination/Other: Submission Type: New Submission Group Market Type: Association Filing Status Changed: 11/15/2023 State Status Changed: 11/16/2023 Created By: Lisa Muhammad Corresponding Filing Tracking Number: MIPPA Forms Approved 9/9/2009 under SERFF UHLC-126263871 Status of Filing in Domicile: Not Filed Date Approved in Domicile: Domicile Status Comments: Market Type: Group Group Market Size: Large Overall Rate Impact: 8.9%

Deemer Date: Submitted By: Bobbie Walton

Filing Description:

The purpose of this filing is to request approval of 2024 rates and rate revisions for 2010 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 1990 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	CoCode: 79413	State of Domicile: Connecticut
Company	Group Code: 707	Company Type: Life and
185 Asylum Street	Group Name:	Health
Hartford, CT 06103	FEIN Number: 36-2739571	State ID Number: 79413
(860) 702-5000 ext. [Phone]		

Company Tracking #: C23-022-MIPPA

State:	Rhode Island	Filing Company:	UnitedHealthcare Insurance Company
TOI/Sub-TOI:	MS08G Group Medicare Supplement - Standard	l Plans 2010/MS08G.012 Mi	ılti-Plan 2010
Product Name:	GROUP MEDICARE SUPPLEMENT PLANS - M	11PPA	
Project Name/Number:	RATE/C23-022-MIPPA		

Filing Fees

State Fees

Per Company:	Yes	Date Processed	Transaction #	
	Voc			
Fee Explanation:				
Retaliatory?	No			
Fee Amount:	\$200.00			
Fee Required?	Yes			

Company Tracking #: C23-022-MIPPA

State:	Rhode Island	Filing Company:	UnitedHealthcare Insurance Company
TOI/Sub-TOI:	MS08G Group Medicare Supplement - Standa	ard Plans 2010/MS08G.012 Mi	ılti-Plan 2010
Product Name:	GROUP MEDICARE SUPPLEMENT PLANS	MIPPA	
Project Name/Number:	RATE/C23-022-MIPPA		

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	MIPPA Forms Approved 9/9/2009 under SERFF UHLC-126263871	

SERFF Tracking #:	UHLC-133830765	State Tracking #:	C	Company Tracking #:	C23-022-MIPPA	
State:	Rhode Island		Filing Company:	UnitedHealthcare Ins	surance Company	
TOI/Sub-TOI:	MS08G Group Me	edicare Supplement - Standard Plar	ns 2010/MS08G.012 Multi-Plan 2010			
Product Name: Project Name/Number:		NRE SUPPLEMENT PLANS - MIPP //IPPA	4			

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-133456450

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%	\$3,341,947	15,287	\$40,591,771	9.000%	8.800%

SERFF Tracking #:	UHLC-133830765	State Tracking #:		Company Tracking #:	C23-022-MIPPA
State:	Rhode Island		Filing Company:	UnitedHealthcare In	isurance Company
TOI/Sub-TOI:	MS08G Group Me	edicare Supplement - Standard Plan	s 2010/MS08G.012 Multi-Plan 2010		
Product Name:	GROUP MEDICA	RE SUPPLEMENT PLANS - MIPPA			
Project Name/Number:	RATE/C23-022-M	IPPA			

Rate/Rule Schedule

ltem No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		RATE SCHEDULE	MDA 0001, MDB 0002, MDC 0003, MDF 0004, MDG 0860, MDK 0005, MDL 0006, MDN 0007, MAA 0010, MAB 0011, MAC 0012, MAF 0013, MAG 0861, MAK 0014, MAL 0015, MAN 0016	Revised	Previous State Filing Number: UHLC-133456450 Percent Rate Change Request: 8.9	RI - 2024 Rate Schedules (MIPPA).pdf,

UNITEDHEALTHCARE INSURANCE COMPANY

RATE SCHEDULE FOR

RHODE ISLAND

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

2010 STANDARDIZED PLANS

MASS MEDIA FORM NUMBERS

MDA 0001, MDB 0002, MDC 0003, MDF 0004, MDG 0860, MDK 0005, MDL 0006, MDN 0007

AGENT DISTRIBUTION FORM NUMBERS

MAA 0010, MAB 0011, MAC 0012, MAF 0013, MAG 0861, MAK 0014, MAL 0015, MAN 0016

	Current	2023 Monthly Unis	sex Non-Tobacco	Rates	Proposed	2024 Monthly Uni	isex Non-Tobacco	Rates	Proposed 202	4 Monthly Unisex	Non-Tobacco Ra	te Changes		
<u>Plan</u>	Base	<u>Tier I</u>	<u>Tier II</u>	Under Age 65	Base	<u>Tier I</u>	<u>Tier II</u>	Under Age 65	Base	<u>Tier I</u>	<u>Tier II</u>	Under Age 65		
А	\$145.75	\$160.32	\$218.62	\$386.25	\$158.75	\$174.62	\$238.12	\$420.75	8.9%	8.9%	8.9%	8.9%		
В	\$221.75	\$243.92	\$332.62		\$241.50	\$265.65	\$362.25		8.9%	8.9%	8.9%			
С	\$266.00	\$292.60	\$399.00		\$289.75	\$318.72	\$434.62		8.9%	8.9%	8.9%			
F	\$267.25	\$293.97	\$400.87		\$291.00	\$320.10	\$436.50		8.9%	8.9%	8.9%			
G	\$226.25	\$248.87	\$384.62		\$246.50	\$271.15	\$419.05		9.0%	9.0%	9.0%			
K	\$83.25	\$91.57	\$124.87		\$90.75	\$99.82	\$136.12		9.0%	9.0%	9.0%			
L	\$150.50	\$165.55	\$225.75		\$164.00	\$180.40	\$246.00		9.0%	9.0%	9.0%			
Ν	\$177.50	\$195.25	\$299.97		\$193.25	\$212.57	\$326.59		8.9%	8.9%	8.9%			
	Current	2023 Monthly Fem	ale Non-Tobacco	Rates	Proposed	2024 Monthly Fen	nale Non-Tobacco	o Rates	Proposed	2024 Monthly Nor	-Tobacco Rate (Changes		
<u>Plan</u>	Base	<u>Tier I</u>	Tier II	Under Age 65	Base	<u>Tier I</u>	<u>Tier II</u>	Under Age 65	Base	<u>Tier I</u>	<u>Tier II</u>	Under Age 65		
А	\$137.00	\$150.70	\$205.50	\$386.25	\$149.25	\$164.17	\$223.87	\$420.75	8.9%	8.9%	8.9%	8.9%		
В	\$208.50	\$229.35	\$312.75		\$227.00	\$249.70	\$340.50		8.9%	8.9%	8.9%			
С	\$250.00	\$275.00	\$375.00		\$272.25	\$299.47	\$408.37		8.9%	8.9%	8.9%			
F	\$251.25	\$276.37	\$376.87		\$273.50	\$300.85	\$410.25		8.9%	8.9%	8.9%			
G	\$212.75	\$234.02	\$361.67		\$231.75	\$254.92	\$393.97		8.9%	8.9%	8.9%			
K	\$78.25	\$86.07	\$117.37		\$85.25	\$93.77	\$127.87		8.9%	8.9%	8.9%			
L	\$141.50	\$155.65	\$212.25		\$154.25	\$169.67	\$231.37		9.0%	9.0%	9.0%			
Ν	\$166.75	\$183.42	\$281.80		\$181.75	\$199.92	\$307.15		9.0%	9.0%	9.0%			
	Curren	t 2023 Monthly Ma	le Non-Tobacco l	Rates	Propose	d 2024 Monthly Ma	ale Non-Tobacco	Rates	Proposed 2024 Monthly Non-Tobacco Rate Changes					
<u>Plan</u>	Base	<u>Tier I</u>	<u>Tier II</u>	Under Age 65	Base	<u>Tier I</u>	<u>Tier II</u>	Under Age 65	Base	<u>Tier I</u>	<u>Tier II</u>	Under Age 65		
А	\$157.50	\$173.25	\$236.25	\$386.25	\$171.50	\$188.65	\$257.25	\$420.75	8.9%	8.9%	8.9%	8.9%		
В	\$239.50	\$263.45	\$359.25		\$260.75	\$286.82	\$391.12		8.9%	8.9%	8.9%			
С	\$287.25	\$315.97	\$430.87		\$313.00	\$344.30	\$469.50		9.0%	9.0%	9.0%			
F	\$288.75	\$317.62	\$433.12		\$314.25	\$345.67	\$471.37		8.8%	8.8%	8.8%			
G	\$244.25	\$268.67	\$415.22		\$266.25	\$292.87	\$452.62		9.0%	9.0%	9.0%			
K	\$90.00	\$99.00	\$135.00		\$98.00	\$107.80	\$147.00		8.9%	8.9%	8.9%			
L	\$162.50	\$178.75	\$243.75		\$177.00	\$194.70	\$265.50		8.9%	8.9%	8.9%			
Ν	\$191.75	\$210.92	\$324.05		\$208.75	\$229.62	\$352.78		8.9%	8.9%	8.9%			
					Tobacc	o rates are 10% hig								

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

SERFF Tracking #:	UHLC-133830765	State Tracking #:		Company Tracking #:	C23-022-MIPPA	
State:	Rhode Island		Filing Company:	UnitedHealthcare	Insurance Company	
TOI/Sub-TOI:	MS08G Group Me	edicare Supplement - Standard Pla	ns 2010/MS08G.012 Multi-Plan 2010			
Product Name:	GROUP MEDICA	RE SUPPLEMENT PLANS - MIPP	A			
Project Name/Number:	RATE/C23-022-M	IPPA				

Supporting Document Schedules

A&H Experience
THE EXPERIENCE IS ATTACHED TO THE RATE/RULE SCHEDULE TAB
Actuarial Certification - Life & A&H
THE ACTUARIAL CERTIFICATION IS INCLUDED IN THE ACTUARIAL MEMORANDUM
Actuarial Memorandum - A&H Rate Revision Filing
RI - 2024 Memorandum (MIPPA).pdf
*Medicare Supplement-Group
"SEE CORRESPONDING FILING TRACKING NUMBER - LOCATED UNDER GENERAL INFORMATION."
Premium Rate Sheets - Life & A&H
THE RATES ARE ATTACHED TO THE RATE/RULE SCHEDULE TAB
ATTACHMENTS (MIPPA)
SEE ATTACHED
RI - 2024 Attachments (MIPPA).pdf

SERFF Tracking #:	UHLC-133830765	State Tracking #:		Company Tracking #:	C23-022-MIPPA	
State:	Rhode Island		Filing Company:	UnitedHealthcare	Insurance Company	
TOI/Sub-TOI:	MS08G Group Me	dicare Supplement - Standard Plan	s 2010/MS08G.012 Multi-Plan 2010			
Product Name:	GROUP MEDICA	RE SUPPLEMENT PLANS - MIPPA	l			
Project Name/Number:	RATE/C23-022-M	IPPA				

Satisfied - Item:	2024 Rate Increase Narrative (MIPPA)
Comments:	
Attachment(s):	2024 RI Rate Increase Narrative (MIPPA).pdf
Item Status:	
Status Date:	

UnitedHealthcare Insurance Company

Annual Medicare Supplement Filing Actuarial Memorandum

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

2010 Standardized Plans

Rhode Island

A. Purpose of Filing

The purpose of this filing is to request approval of 2024 rates and rate revisions for 2010 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 1990 Standardized Medicare Supplement plans is submitted separately.

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

А	В	С	F	G	K	L	Ν
8.9%	8.9%	8.9%	8.9%	9.0%	9.0%	9.0%	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

. . ..

a

Medicare Supple	ement		
Mass Media For	m Numbers:	Agent Distribution	on Form Numbers:
MDA 0001	MDG 0860	MAA 0010	MAG 0861
MDB 0002	MDK 0005	MAB 0011	MAK 0014
MDC 0003	MDL 0006	MAC 0012	MAL 0015
MDF 0004	MDN 0007	MAF 0013	MAN 0016
MDC 0003	MDL 0006	MAC 0012	MAL 0015

These form numbers include inforce certificates and new sales.

- 3. Policy Type: Group Standardized Medicare Supplement Insurance
- 4. Benefits Description: Benefits provided by the 2010 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 are sold via mass-media and agent distribution to members of AARP. Mass-media will constitute policies issued as a result of solicitation of individuals through the mail or by mass-media advertising (including both print and broadcast advertising).
- 7. Underwriting Method: Members who do not qualify for open enrollment or guaranteed issue must satisfy underwriting requirements. Coverage is only offered under age 65 as required by state law.
- 8. Pre-Existing Conditions Exclusion: The maximum exclusion on these plans is 3 months/3 months.
- Issue Age Limits: Insureds must be members of AARP at the time of issue. Minimum Age for Plan A is 50. Minimum Age for all other plans is 65. Maximum Age – None.
- 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 2010 Medicare Supplement plan and the underwriting requirements.
 - Effective dates before July 1, 2017
 - Insureds whose effective date is less than three years following their 65th birthday or Medicare Part B Effective Date, if later, pay the Base Rates.
 - Insureds whose effective date is 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 indicates they have a serious medical condition, pay the Tier II Rates.

- Applicants whose health history indicates they do not have a serious medical condition pay:
 - The Base Rates if their effective date is less than six years following their 65th birthday or Medicare Part B Effective Date, if later; or
 - Tier I Rates if their effective date is six or more years following their 65th birthday or Medicare Part B Effective Date, if later.
- Effective dates July 1, 2017 or later
 - Insureds whose effective date is within six months following their 65th birthday or Medicare Part B Effective Date, if later, pay the Base Rates.
 - Insureds whose effective date is more than six months 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 indicates they have a serious medical condition, pay the Tier II Rates.
 - Applicants whose health history indicates they do not have a serious medical condition pay:
 - The Base Rates if their effective date is less than ten years following their 65th birthday or Medicare Part B Effective Date, if later; or
 - Tier I Rates if their effective date is ten 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:

- Plans A-F, K, L 1.50
- Plan G 1.70
- Plan N 1.69
- Tier II assignment may be re-evaluated when changing from one 2010 plan to another.
- b. Under Age 65:
 - Insureds under age 65 will pay rates equal to the filed Base Rate for insureds ages 65 and older multiplied by a factor of 2.65
- c. Rate Guarantee New issues receive a twelve-month rate guarantee from their initial effective date. An insured will not receive an additional rate guarantee when switching from one AARP Medicare Supplement plan to another.
- d. 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 7% 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
 - Insureds receiving the Base Rate may be eligible to receive the Early Enrollment discounts.
 - For effective dates before July 1, 2017 the discounts are 30% at age 65, 27% at age 66, 24% at age 67, and so on, decreasing by 3% at the end of each 12 month period until the discount percentage is 0% at age 75.
 - For effective dates July 1, 2017 through December 31, 2019 the discounts are 36% at age 65, 33% at age 66, 30% at age 67, and so on, decreasing by 3% at the end of each 12 month period until the discount percentage is 0% at age 77.
 - For effective dates January 1, 2020 or later the discounts are 39% at ages 65 through 68; 36% at age 69, 33% at age 70, and so on, decreasing by 3% at the end of each 12 month period until the discount percentage is 0% at age 81.
 - If a member changes from one 2010 plan to another and is eligible for an enrollment discount, they will receive the balance of their enrollment discount program.
- e. Tobacco/Non-Tobacco rates Rates for members, including those enrolling during open enrollment or who qualify for guaranteed issue, who answer that they are tobacco users will be 10% higher than for those who are not.
- f. Gender Rates:
 - Gender rating applies to new sales and for insureds who move into the state effective April 1, 2020 and later.
 - The following gender factors are applied to the Base Rate:

Female	0.94
Male	1.08

- 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 F (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 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 comply with your state's requirements. For each enrollment, commissions are paid up to \$700 for the first year and up to \$700 per year for renewals. Renewal commissions are paid for a minimum of five years. Additional incentives may be paid, in an amount up to the renewal rate per enrollment, per year. The first year commission plus incentive amount will not exceed two times the renewal commission.

Commissions may be lower for individuals/applicants eligible for guaranteed issue coverage outside of their open enrollment period as of the plan effective date.

Replacement commissions will not be greater than the renewal rate.

- 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 The 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 Standardized Medicare Supplement plans is 75.0% and was filed with the initial policy filing.

- 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.
- 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.

Arr

11/10/2023

Date

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

UNITEDHEALTHCARE INSURANCE COMPANY

STANDARDIZED MEDICARE SUPPLEMENT RATE FILING

GROUP POLICY NUMBER G-36000-4 FORM NUMBERS MDA 0001, MDB 0002, MDC 0003, MDF 0004, MDG 0860, MDK 0005, MDL 0006, MDN 0007, MAA 0010, MAB 0011, MAC 0012, MAF 0013, MAG 0861, MAK 0014, MAL 0015, MAN 0016

Rhode Island

EFFECTIVE 6/1/2024

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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> Plan B		<u>Plan C</u>		<u>Plan D</u>		<u>Plan E</u> <u>Plan F</u>		Plan G	<u>Plan G</u> Plan H		Plan I	<u>Plan I</u>		<u>Plan K</u>		<u>Plan L</u>		<u>Plan N</u>		All Plans		
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 \$	5	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 \$	5	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 \$	5 1	117,864,063	\$	980,107,501

Premium Ex	Premium Experience - Without 2024 Rate Change																							
		Plan A		<u>Plan B</u>		<u>Plan C</u>		<u>Plan D</u>		Plan E		<u>Plan F</u>		<u>Plan G</u>		Plan H	Plan I	<u>Plan J</u>	<u>Plan K</u>	Pla	n L	<u>Plan N</u>		All Plans
Historical	\$	6,657,245	\$	6,220,536 \$	3	118,059,424	\$	4,210,351 5	\$	7,474,975	\$	443,824,509	\$	28,346,336	\$	2,928,604	\$ 20,154,836	\$ 75,868,578	\$ 1,313,796 \$	1,	289,972 \$	78,230,05	7 \$	794,579,217
Future	\$	1,236,626	\$	795,904 \$	3	10,558,447	\$	35,711	\$	339,742	\$	184,347,554	\$	117,699,784	\$	53,263	\$ 660,890	\$ 7,673,552 \$	\$ 801,146 \$		477,802 \$	59,592,96	3 \$	384,273,389
Lifetime	\$	7,893,871	\$	7,016,439 \$	3	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 \$	137,823,02	5\$	1,178,852,606

Premium Experience - With 2024 Rate Change																					
		<u>Plan A</u>	P	Plan B		<u>Plan C</u>	<u>Plan D</u>		Plan E		<u>Plan F</u>	Plai	n G	Plan H	<u>Plan I</u>	Plan J]	Plan K	<u>Plan L</u>	<u>Plan N</u>	All Plans
Historical	\$	6,657,245 \$	5	6,220,536	\$	118,059,424 \$	4,210,	\$51 \$	7,474,975	\$	443,824,509	\$ 28,3	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,	529 \$	367,977	\$	199,852,078	\$ 128,1	109,771 \$	\$ 57,655	\$ 714,937	\$ 8,315,333	\$	871,275 \$	519,217 \$	64,707,418	\$ 417,206,712
Lifetime	\$	8,000,254 \$	5	7,084,641	\$	129,504,732 \$	4,248,	80 \$	7,842,952	\$	643,676,587	\$ 156,4	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 Ex	perience - Withou	ut 2024 Rate Chan	ge											
	<u>Plan A</u>	Plan B	Plan C	<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>	All Plans
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%
		034 D 4 Cl												
Loss Ratio Ex		024 Rate Change												
	Plan A	<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>	All Plans
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%

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%	3,13
Total		3,490,221	4,232,432	82.5%	3,13
	1	- , ,	, - , -		- / -
1999	1999	177,593	213,938	83.0%	14
	1998	3,174,051	3,944,321	80.5%	2,574
Total		3,351,644	4,158,259	80.6%	2,72
2000	2000	349,667	410,219	85.2%	28
	1999	332,620	408,612	81.4%	26
	1998	3,113,448	3,743,249	83.2%	2,37
Total		3,795,735	4,562,080	83.2%	2,92
2001	2001	224,844	358,135	62.8%	23
2001	2001	224,844 538,544	605,596	88.9%	23
	1999	355,408	408,410	88.9% 87.0%	24
	1999	3,113,292	3,614,316	87.0% 86.1%	2,22
Total	1998	4,232,088	4,986,458	84.9%	3,10
Totai	1	4,232,088	4,980,498	04.970	5,10
2002	2002	296,940	380,604	78.0%	24
2002	2002	464,870	591,855	78.5%	36
	2001	500,212	574.867	87.0%	35
	1998-1999	3,249,035	3,710,424	87.6%	2,22
Total		4,511,057	5,257,750	85.8%	3,18
	1	/- /	- , ,		- , -
2003	2003	326,847	452,681	72.2%	28
	2002	609,222	685,300	88.9%	41
	2001	445,236	595,288	74.8%	33
	1998-2000	3,744,014	4,202,965	89.1%	2,40
Total		5,125,318	5,936,233	86.3%	3,44
2004	2004	303,711	438,777	69.2%	25
	2003	598,272	786,426	76.1%	46
	2002	632,344	690,366	91.6%	38
	1998-2001	4,106,532	4,809,482	85.4%	2,57
Total		5,640,860	6,725,051	83.9%	3,67
2005	2005	440.026	521.146	86.2%	28
2005	2005 2004	449,036	521,146		
	2004 2003	616,433	765,760	80.5%	42
		532,060 4,521,831	764,802	69.6%	41
Total	1998-2002	6,119,359	5,277,314 7,329,022	85.7% 83.5%	2,72
Total		0,119,509	7,525,622	001070	5,00
2006	2006	710,741	757,118	93.9%	47
	2005	537,803	713,834	75.3%	41
	2004	525,393	647,558	81.1%	37
	1998-2003	4,445,920	5,281,591	84.2%	2,87
Total		6,219,856	7,400,101	84.1%	4,13
2007	2007	460,923	630,330	73.1%	38
2007	2006	917,286	1,169,395	78.4%	69
	2000	467,544	691,847	67.6%	38
	1998-2004	4,721,178	5,675,334	83.2%	3,00
Total	1770 2001	6,566,930	8,166,905	80.4%	4,47
			- , - , ,		, , ,
2008	2008	572,462	653,606	87.6%	42
	2007	674,040	936,547	72.0%	55
	2006	833,104	1,116,048	74.6%	62
	1998-2005	5,338,486	6,227,485	85.7%	3,18
Total		7,418,093	8,933,686	83.0%	4,77
2009	2009	819,148	892,456	91.8%	55
2009		· · ·	892,456 1,050,494	91.8% 90.1%	55 68
					08
	2008	946,286 654 131			
	2008 2007 1998-2006	654,131 5,970,176	899,159 7,027,496	72.7% 85.0%	50 3,54

UHC TOTAL STANDARDIZED PLANS

Incurred Year	Issue Year	Incurred Claims	Earned Premiums	Loss Ratio	Average Lives
2010	2010	945,120	1,102,404	85.7%	65
	2009	1,334,115	1,358,763	98.2%	83
	2008	796,255	1,031,966	77.2%	62
	1998-2007	6,377,968	7,710,561	82.7%	3,74
Total		9,453,458	11,203,694	84.4%	5,85
2011	2011	1,388,948	1,594,886	87.1%	1,01
	2010	1,299,308	1,606,695	80.9%	93
	2009	1,139,118	1,359,236	83.8%	75
	1998-2008	6,967,657	8,664,205	80.4%	4,00
Total		10,795,031	13,225,023	81.6%	6,71
2012	2012	1,153,407	1,453,786	79.3%	93
2012	2012	1,854,408	2,265,785	81.8%	1,44
	2010	1,293,961	1,534,268	84.3%	85
	1998-2009	7,734,008	9,553,272	81.0%	4,43
Total	1990 2009	12,035,784	14,807,111	81.3%	7,66
	2012	1 200 146	1 (05 10 (01.00/	1.07
2013	2013	1,380,146	1,687,136	81.8%	1,06
	2012	1,960,358	2,330,134	84.1%	1,43
	2011	1,908,456	2,255,056	84.6%	1,32
	1998-2010	8,399,777	10,881,706	77.2%	4,93
Total		13,648,737	17,154,031	79.6%	8,75
2014	2014	4,084,889	4,474,863	91.3%	2,38
	2013	2,059,448	2,539,615	81.1%	1,53
	2012	1,823,908	2,299,692	79.3%	1,30
	1998-2011	9,916,825	12,826,274	77.3%	5,79
Total	1000 2011	17,885,069	22,140,443	80.8%	11,00
2015	2015	1 090 979	2 590 0//	76.90/	1.51
2015	2015	1,980,868	2,580,066	76.8%	1,51
	2014	10,124,503	12,355,655	81.9%	6,26
	2013	1,995,676	2,385,735	83.7%	1,37
Total	1998-2012	11,147,592 25,248,638	14,452,249 31,773,704	77.1% 79.5%	6,60
			,	,,,,,,,,	,,,,,
2016	2016	2,643,415	3,144,097	84.1%	1,78
	2015	2,998,671	3,574,597	83.9%	2,09
	2014	9,869,357	11,814,654	83.5%	5,86
Total	1998-2013	12,834,141 28,345,584	16,013,196 34,546,544	80.1% 82.1%	7,46
			0 1,0 10,0 11		- , ,
2017	2017	1,905,630	2,276,941	83.7%	1,33
	2016	3,154,643	4,296,482	73.4%	2,38
	2015	2,912,490	3,517,364	82.8%	1,93
	1998-2014	21,734,769	27,364,431	79.4%	12,48
Total		29,707,532	37,455,218	79.3%	18,13
2018	2018	2,058,383	2,607,229	78.9%	1,57
2010	2017	2,968,383	3,779,363	78.5%	2,11
	2016	3,271,695	4,330,730	75.5%	2,18
	1998-2015	24,282,890	31,298,610	77.6%	13,44
Total		32,581,352	42,015,932	77.5%	19,31
2010	2010	1 620 127	2 000 250	01 /0/	1 1 /
2019	2019	1,639,127	2,009,358	81.6%	1,10
	2018	3,170,373	3,950,537	80.3%	2,31
	2017	2,961,107	3,741,519	79.1%	1,94
Total	1998-2016	27,007,183 34,777,789	34,732,848 44,434,261	77.8% 78.3%	14,50
Total		51,777,705	11,151,201	70.570	1),).
2020	2020	1,054,114	1,368,398	77.0%	85
	2019	2,264,931	2,982,462	75.9%	1,67
	2018	2,848,312	3,822,169	74.5%	2,04
T . t . 1	1998-2017	24,403,956 30,571,313	36,837,227	66.2%	14,94
Total		30,371,313	45,010,256	67.9%	19,52
2021	2021	1,390,351	1,255,714	110.7%	77
	2020	1,842,332	2,168,340	85.0%	1,32
	2019	2,093,517	2,910,701	71.9%	1,49
	1998-2018	28,743,553	39,438,481	72.9%	15,38
Total		34,069,753	45,773,236	74.4%	18,98
2022	2022	057 704	1 004 000	00 10/	(1
2022	2022 2021	957,794 1,626,734	1,086,990 1,854,879	88.1% 87.7%	65 1,15
	2021	1,817,695	2,038,106	89.2%	1,12
	1998-2019	30,796,826	40,291,411	76.4%	1,15

RHODE ISLAND BENEFIT COSTS 1990 & 2010 PLANS COMBINED

	Per Member Per Month Costs*						
	2019	2020	2021 2022 Proj 2023			<u>Proj 2024</u>	
PLAN A	<u>2017</u>	2020	<u>2021</u>	<u>2022</u>	110] 2023	110/2027	
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	
Trend	• • • • •	2.3%	29.6%	-11.4%	-2.4%	12.2%	
PLANS B-G, excl 2010 PLAN G							
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	
Trend		-9.8%	12.6%	9.3%	7.9%	7.1%	
2010 PLAN G							
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	
Trend	\$110.05	-9.9%	31.1%	-4.3%	7.5%	6.6%	
Trenu		-9.970	51.170	-4.570	7.570	0.070	
PLANS H-J							
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	
Trend		0.1%	11.9%	2.5%	13.8%	7.4%	
PLAN K							
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	
Trend		-21.1%	75.0%	-24.7%	-0.3%	15.7%	
PLAN L							
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	
Trend	• • • • •	-39.9%	-10.0%	60.3%	11.0%	23.0%	
PLAN N							
PLAN N Part B	\$77.20	\$70.54	\$82.49	\$93.11	\$101.84	\$110.25	
Part B Part A	\$77.20 \$29.37	\$70.54 \$24.23	\$82.49 \$33.82	\$93.11 \$28.99	\$101.84	\$110.35 \$36.32	
Other	\$29.37 \$0.11	\$24.23 \$0.01	\$33.82 \$0.00	\$28.99 \$0.00	\$33.36 \$0.25		
Total PMPM Cost	\$106.68	\$94.77	\$116.32	\$122.10	\$135.45	\$0.54 \$147.21	
Trend	\$100.00	\$94.77 -11.2%	\$110.32 22.7%	5122.10 5.0%	\$133.43 10.9%	\$147.21 8.7%	
110114		-11.270	22.170	5.070	10.970	0.770	

TOTAL STANDARDIZED PLANS	5					
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
Total PMPM Cost	\$145.39	\$130.48	\$149.58	\$158.25	\$170.02	\$180.68
Trend		-10.2%	14.6%	5.8%	7.4%	6.3%

'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.

	Proposed	
Plan	<u>2024*</u>	<u>2023*</u>
А	\$2,034	\$1,864
В	\$3,036	\$2,813
С	\$3,645	\$3,360
D	\$3,301	\$3,084
Е	\$3,321	\$3,057
F	\$3,657	\$3,367
G	\$3,330	\$3,068
Н	\$2,963	\$2,766
Ι	\$3,116	\$2,879
J	\$3,499	\$3,228
Κ	\$1,211	\$1,112
L	\$2,154	\$1,987
Total 1990 Plans	\$3,538	\$3,258

Rhode Island Average Annualized Premiums 1990 Plans

Rhode Island Average Annualized Premiums 2010 Plans

<u>Plan</u>	Proposed <u>2024*</u>	<u>2023*</u>
А	\$1,828	\$1,637
В	\$2,681	\$2,469
С	\$3,222	\$2,977
F	\$3,236	\$2,937
G	\$1,951	\$1,797
Κ	\$989	\$904
L	\$1,837	\$1,641
Ν	\$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>	Proposed <u>6/2024</u>	<u>2020/2019*</u>	<u>2021/2020</u>	<u>2022/2021</u>	<u>2023/2022</u>	Proposed 2024/2023
Α	\$136.25	\$143.00	\$150.00	\$154.50	\$160.00	\$174.25	5.0%	4.9%	3.0%	3.6%	8.9%
В	\$203.25	\$213.25	\$224.00	\$230.75	\$238.75	\$260.00	4.9%	5.0%	3.0%	3.5%	8.9%
С	\$243.75	\$255.75	\$268.50	\$276.50	\$286.25	\$311.75	4.9%	5.0%	3.0%	3.5%	8.9%
D	\$221.25	\$232.00	\$243.50	\$250.75	\$259.50	\$282.50	4.9%	5.0%	3.0%	3.5%	8.9%
E	\$222.25	\$233.25	\$245.00	\$252.25	\$261.00	\$284.25	4.9%	5.0%	3.0%	3.5%	8.9%
F	\$244.75	\$256.75	\$269.50	\$277.50	\$287.25	\$312.75	4.9%	5.0%	3.0%	3.5%	8.9%
G	\$223.00	\$234.00	\$245.75	\$253.00	\$261.75	\$285.00	4.9%	5.0%	3.0%	3.5%	8.9%
H (with drugs)	\$289.00	\$303.25	\$318.50	\$328.00	\$339.50	\$369.75	4.9%	5.0%	3.0%	3.5%	8.9%
H (without drugs)	\$200.25	\$210.00	\$220.50	\$227.00	\$235.00	\$256.00	4.9%	5.0%	2.9%	3.5%	8.9%
I (with drugs)	\$290.75	\$305.00	\$320.25	\$329.75	\$341.25	\$371.50	4.9%	5.0%	3.0%	3.5%	8.9%
I (without drugs)	\$201.75	\$211.75	\$222.25	\$229.00	\$237.00	\$258.00	5.0%	5.0%	3.0%	3.5%	8.9%
J (with drugs)	\$382.75	\$401.50	\$421.75	\$434.50	\$449.75	\$489.75	4.9%	5.0%	3.0%	3.5%	8.9%
J (without drugs)	\$231.50	\$242.75	\$255.00	\$262.75	\$272.00	\$296.25	4.9%	5.0%	3.0%	3.5%	8.9%
К	\$77.75	\$81.50	\$85.50	\$88.00	\$91.00	\$99.00	4.8%	4.9%	2.9%	3.4%	8.8%
L	\$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>	Proposed <u>6/2024</u>	<u>2020/2019*</u>	<u>2021/2020</u>	<u>2022/2021</u>	<u>2023/2022</u>	Proposed 2024/2023
Α	\$124.25	\$130.25	\$136.75	\$140.75	\$145.75	\$158.75	4.8%	5.0%	2.9%	3.6%	8.9%
В	\$189.00	\$198.25	\$208.00	\$214.25	\$221.75	\$241.50	4.9%	4.9%	3.0%	3.5%	8.9%
С	\$226.75	\$237.75	\$249.50	\$257.00	\$266.00	\$289.75	4.9%	4.9%	3.0%	3.5%	8.9%
F	\$227.50	\$238.75	\$250.75	\$258.25	\$267.25	\$291.00	4.9%	5.0%	3.0%	3.5%	8.9%
G	\$192.75	\$202.25	\$212.25	\$218.50	\$226.25	\$246.50	4.9%	4.9%	2.9%	3.5%	9.0%
К	\$71.00	\$74.50	\$78.25	\$80.50	\$83.25	\$90.75	4.9%	5.0%	2.9%	3.4%	9.0%
L	\$128.75	\$134.50	\$141.25	\$145.50	\$150.50	\$164.00	4.5%	5.0%	3.0%	3.4%	9.0%
Ν	\$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>
А	34	40
В	11	13
С	290	343
D	2	3
E	18	21
F	703	803
G	18	22
Н	3	5
Ι	40	50
J	368	420
Κ	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>
А	40	41
В	21	23
С	187	210
F	7,960	8,715
G	3,751	3,361
Κ	91	103
L	20	22
Ν	3,217	3,433
Total 2010 Plans	15,287	15,908

National Average Lives* 1990 Plans

<u>Plan</u>	<u>2024</u>	<u>2023</u>
А	13,887	16,446
В	9,587	11,616
С	85,339	102,625
D	6,805	8,291
E	7,343	8,989
F	243,419	282,875
G	8,259	9,900
Н	3,430	4,132
Ι	20,516	24,317
J	157,132	177,885
Κ	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>
А	18,093	19,921
B	13,164	14,680
С	29,173	32,872
D	1,197	1,199
F	1,375,089	1,509,377
G	1,279,888	1,161,995
Κ	43,628	48,129
L	17,799	19,752
Ν	530,522	572,334
Total 2010 Plans	3,308,553	3,380,259

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)

Plan A	Paid <u>Premium</u>	Earned <u>Premium</u>	Paid <u>Claims</u>	Incurred <u>Claims</u>	Incurred Expenses	Paid <u>Loss Ratios</u>	Incurred Loss Ratios
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%
Plan B	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
	Premium	Premium	<u>Claims</u>	<u>Claims</u>	Expenses	Loss Ratios	Loss Ratios
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%
Plan C	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
Plan C		Premium				Loss Ratios	Loss Ratios
	<u>Premium</u>	Premium	<u>Claims</u>	<u>Claims</u>	Expenses	Loss Ratios	Loss Katlos
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)

Plan D	Paid <u>Premium</u>	Earned <u>Premium</u>	Paid <u>Claims</u>	Incurred <u>Claims</u>	Incurred <u>Expenses</u>	Paid Loss Ratios	Incurred Loss Ratios
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%
Plan E	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
	Premium	<u>Premium</u>	<u>Claims</u>	<u>Claims</u>	Expenses	Loss Ratios	Loss Ratios
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%
Plan F	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
	Premium	<u>Premium</u>	<u>Claims</u>	<u>Claims</u>	Expenses	Loss Ratios	Loss Ratios
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)

Plan G	Paid <u>Premium</u>	Earned <u>Premium</u>	Paid <u>Claims</u>	Incurred <u>Claims</u>	Incurred Expenses	Paid <u>Loss Ratios</u>	Incurred Loss Ratios
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%
Plan H	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
	Premium	Premium	<u>Claims</u>	Claims	Expenses	Loss Ratios	Loss Ratios
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%
Plan I	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
	Premium	Premium	<u>Claims</u>	<u>Claims</u>	Expenses	Loss Ratios	Loss Ratios
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)

Plan J	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
	Premium	<u>Premium</u>	<u>Claims</u>	<u>Claims</u>	Expenses	Loss Ratios	Loss Ratios
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%
Plan K	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
	Premium	Premium	<u>Claims</u>	Claims	Expenses	Loss Ratios	Loss Ratios
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%
Plan L	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
	Premium	Premium	Claims	Claims	Expenses	Loss Ratios	Loss Ratios
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%
Plan N	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
	Premium	Premium	Claims	Claims	Expenses	Loss Ratios	Loss Ratios
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%
Total							
Standardized	Paid	Earned	Paid	Incurred	Incurred	Paid	Incurred
	Premium	<u>Premium</u>	<u>Claims</u>	<u>Claims</u>	Expenses	Loss Ratios	Loss Ratios
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 RATES FOR PLANS NOT ISSUED IN RHODE ISLAND

Mass Media and Agent Distribution

				Under
$Plan^1$	Base ²	<u>Tier I</u>	<u>Tier II</u>	<u>Age 65</u>
	\$226 50	\$2 < 0, 15	\$254.75	\$254 75
MW	\$236.50	\$260.15	\$354.75	\$354.75
NW	\$168.00	\$184.80	\$272.16	\$252.00
OW	\$33.25	\$36.57	\$49.87	\$50.00
PW	\$16.50	\$18.15	\$24.75	\$24.75
QW	\$22.00	\$24.20	\$33.00	\$24.25
SW	\$5.25	\$5.77	\$7.87	\$8.00
TW	\$235.50			\$353.25
UW	\$291.75			\$437.75
RW	\$267.50			\$401.25
VW	\$32.75			\$49.25
WW	\$6.50			\$9.75
XW	\$34.00			\$51.00
YW	\$22.00			\$24.25
ZW	\$5.75			\$8.75
А				\$238.25
В				\$362.25
С				\$434.75
D	\$264.25	\$290.67	\$396.37	\$396.50
F				\$436.50
G				\$419.00
Κ				\$136.25
L				\$246.00
N				\$290.00
1 1				φ290.00

Unisex Non-Tobacco Rates*

* Tobacco rates are 10% higher.

¹ Plans effective June 1, 2010 and later.

MW, *NW*, *OW*, *PW*, *QW*, and *SW* are Wisconsin issued plans and riders. *TW*, *UW*, *RW*, *VW*, *WW*, *XW*, *YW*, and *ZW* are Minnesota issued plans and riders.

² Enrollment Discounts apply where applicable.

2024 RATES FOR PLANS NOT ISSUED IN RHODE ISLAND

Mass Media and Agent Distribution

				Under
\underline{Plan}^1	Base ²	<u>Tier I</u>	<u>Tier II</u>	<u>Age 65</u>
MW	\$222.25	\$244.47	\$333.37	\$333.50
NW	\$158.00	\$173.80	\$255.96	\$237.00
OW	\$31.25	\$34.37	\$46.87	\$47.00
PW	\$15.50	\$17.05	\$23.25	\$23.25
QW	\$20.75	\$22.82	\$31.12	\$22.75
SW	\$5.00	\$5.50	\$7.50	\$7.50
А				\$224.00
В				\$340.50
С				\$408.50
D	\$248.50	\$273.35	\$372.75	\$372.75
F				\$410.25
G				\$394.00
Κ				\$128.00
L				\$231.50
Ν				\$272.75

Female Non-Tobacco Rates*

* Tobacco rates are 10% higher.

¹ Plans effective June 1, 2010 and later. MW, NW, OW, PW, QW, and SW are Wisconsin issued plans and riders.

² Enrollment Discounts apply where applicable.

2024 RATES FOR PLANS NOT ISSUED IN RHODE ISLAND

Mass Media and Agent Distribution

			Under			
Base ²	<u>Tier I</u>	<u>Tier II</u>	<u>Age 65</u>			
\$255.50	\$281.05	\$383.25	\$383.25			
\$181.50	\$199.65	\$294.03	\$272.25			
\$36.00	\$39.60	\$54.00	\$54.00			
\$17.75	\$19.52	\$26.62	\$26.75			
\$23.75	\$26.12	\$35.62	\$26.25			
\$5.75	\$6.32	\$8.62	\$8.75			
			\$257.25			
			\$391.25			
			\$469.50			
\$285.50	\$314.05	\$428.25	\$428.25			
			\$471.50			
			\$452.75			
			\$147.00			
			\$265.50			
			\$313.25			
	\$255.50 \$181.50 \$36.00 \$17.75 \$23.75 \$5.75	\$255.50 \$181.50 \$36.00 \$17.75 \$23.75 \$23.75 \$26.12 \$5.75 \$6.32	\$255.50 \$281.05 \$383.25 \$181.50 \$199.65 \$294.03 \$36.00 \$39.60 \$54.00 \$17.75 \$19.52 \$26.62 \$23.75 \$26.12 \$35.62 \$5.75 \$6.32 \$8.62			

Male Non-Tobacco Rates*

* Tobacco rates are 10% higher.

¹ Plans effective June 1, 2010 and later. MW, NW, OW, PW, QW, and SW are Wisconsin issued plans and riders.

² Enrollment Discounts apply where applicable.

Rhode Island 2024 Expenses by Category

1990 & 2010 Standardized Medicare Supplement Plans

Member Contribution	\$45,889,355		
Average Lives	16,785		
Expenses		% of Member Contribution	PMPM
Royalty		5.95%	\$13.56
Premium Taxes		2.00%	\$4.56
Risk and Profit		2.05%	\$4.67
Operating Expense	es	4.88%	\$11.11
Sales Expenses		1.89%	\$4.32
Commissions		3.65%	\$8.31
Investment Incom	e Credit	-0.21%	(\$0.48)
Total Expenses		20.21%	\$46.04

2010 Standardized Plans

This chart gives you a quick look at the standardized Medigap Plans that can be sold for effective dates beginning June 1, 2010 (including Medicare SELECT) and their benefits. These benefits apply only to Medigap policies sold on or after June 1, 2010. 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).

	Medigap Plans A through N									
Medigap Benefits	А	В	C⁵	D	F⁵	G	к	L	м	N
Medicare Part A Coinsurance and all costs after hospital benefits are used up ¹	✓	✓	✓	✓	✓	✓	\checkmark	✓	✓	✓
Medicare Part B Coinsurance or Copayment	\checkmark	✓	\checkmark	✓	\checkmark	\checkmark	50%	75%	✓	\checkmark^2
Blood (First 3 Pints)	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	50%	75%	✓	√
Part A Hospice Care Coinsurance or Copayment	√	✓	\checkmark	✓	✓	✓	50%	75%	✓	√
Skilled Nursing Facility Care Coinsurance			\checkmark	\checkmark	\checkmark	\checkmark	50%	75%	\checkmark	√
Medicare Part A Deductible		✓	\checkmark	✓	\checkmark	\checkmark	50%	75%	50%	√
Medicare Part B Deductible			\checkmark		\checkmark					
Medicare Part B Excess Charges					✓	\checkmark			Î	
Foreign Travel Emergency (Up to Plan Limit) ³			\checkmark	✓	\checkmark	\checkmark			✓	√
Medicare Preventive Care Part B Coinsurance	\checkmark	✓	\checkmark	✓	\checkmark	\checkmark	\checkmark	✓	✓	√
¹ Lifetime maximum of 365 days										
 ²100% part B coinsurance except up to \$20 copayment for office visits and up to \$50 copaymer ³ Benefit is 80% after the \$250 annual deductible with a \$50,000 lifetime maximum for Foreign that begins during the first 60 days of a trip period. ⁴ After you meet your out-of-pocket yearly limit and your yearly Part B deductible, the plan pay for the rest of the calendar year. 	Emerge	ncy Ca		ervices	of-Po Lim	Out- ocket it ⁴ ▶	\$7,060	\$3,530		

From June 1, 2010 onward, the standardized plans are:

⁵ Plans C and F are only available to eligible Applicants with a 65th birthday prior to 1/1/2020 or with a Medicare Part A Effective Date prior to 1/1/2020.

Company Name: UnitedHealthcare Insurance Company NAIC Company Code: 79413 Market Segment: 2010 Standardized Medicare Supplement Plans (plans issued on or after June 1, 2010) SERFF Tracking Number: UHLC-133830765

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 15,287 members. The new monthly premium rates will apply to members beginning June 1, 2024. Members will not receive a rate increase within their first twelve months of coverage.

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. Rate increases vary by plan. The range of rate increases is: 8.9% to 9.0%. 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.