

HPHC Insurance Company										
Product	PPO									
Plan ID	Best Buy HSA									
	110034	110033	110028	110027	110032	110031	110036	110035	110030	110029
Metal Level	Bronze	Bronze	Bronze	Bronze	Silver	Silver	Silver	Silver	Silver	Silver
Medical Deductible	\$5,000	\$5,000	\$4,500	\$4,500	\$3,500	\$3,500	\$3,000	\$3,000	\$2,600	\$2,600
Coinsurance	20%	20%	30%	30%	20%	20%	10%	10%	10%	10%
Medical OOP Max	\$6,450	\$6,450	\$6,450	\$6,450	\$4,250	\$4,250	\$5,000	\$5,000	\$4,500	\$4,500
Child Dental	No	Yes								
Plan Base Rate Factor	\$217.40	\$219.99	\$222.73	\$225.32	\$256.24	\$258.82	\$282.51	\$285.10	\$296.59	\$299.18

HPHC Insurance Company										
Product	PPO									
Plan ID	Tiered Copay	Tiered Copay	Tiered Copay	Tiered Copay	Core Coverage	Core Coverage	Tiered Copay	Tiered Copay	Copayment	Core Coverage
	110022	110021	110020	110019	110012	110011	110016	110015	110008	110010
Metal Level	Silver	Silver	Silver	Silver	Silver	Silver	Silver	Silver	Silver	Silver
Medical Deductible	\$3,000	\$3,000	\$3,000	\$3,000	\$2,500	\$2,500	\$2,500	\$2,500	\$2,000	\$2,500
Coinsurance	30%	30%	30%	30%	20%	20%	30%	30%	20%	20%
Medical OOP Max	\$6,500	\$6,500	\$6,500	\$6,500	\$5,500	\$5,500	\$6,000	\$6,000	\$6,850	\$5,500
Child Dental	No	Yes	No	Yes	No	Yes	No	Yes	No	No
Plan Base Rate Factor	\$309.54	\$312.13	\$315.25	\$317.84	\$318.68	\$321.27	\$321.34	\$323.93	\$324.01	\$324.39

HPHC Insurance Company										
Product	PPO									
Plan ID	Tiered Copay	Copayment	Core Coverage	Tiered Copay	Copayment	Copayment	Tiered Copay	Tiered Copay	Tiered Copay	Tiered Copay
	110014	110007	110009	110013	110006	110005	110004	110003	110002	110001
Metal Level	Silver	Silver	Silver	Silver	Silver	Silver	Gold	Gold	Gold	Gold
Medical Deductible	\$2,500	\$2,000	\$2,500	\$2,500	\$2,000	\$2,000	\$1,500	\$1,500	\$1,000	\$1,000
Coinsurance	30%	20%	20%	30%	20%	20%	20%	20%	20%	20%
Medical OOP Max	\$6,000	\$6,850	\$5,500	\$6,000	\$6,850	\$6,850	\$3,500	\$3,500	\$3,000	\$3,000
Child Dental	No	Yes	Yes	Yes	No	Yes	No	Yes	No	Yes
Plan Base Rate Factor	\$325.91	\$326.60	\$326.98	\$328.50	\$330.86	\$333.45	\$396.73	\$399.32	\$412.72	\$415.31

Harvard Pilgrim Health Care, Inc.										
Product	HMO									
Plan ID	Best Buy HSA									
	250036	250024	250035	250023	250034	250022	250033	250021	250032	250031
Metal Level	Bronze									
Tier										
Medical Deductible	\$6,100	\$6,100	\$6,100	\$6,100	\$5,000	\$5,000	\$5,000	\$5,000	\$4,500	\$4,500
Coinsurance/Copay	0%	0%	0%	0%	20%	20%	20%	20%	30%	30%
Medical OOP Max	\$6,450	\$6,450	\$6,450	\$6,450	\$6,450	\$6,450	\$6,450	\$6,450	\$6,450	\$6,450
Child Dental	No	No	Yes	Yes	No	No	Yes	Yes	No	Yes
Plan Base Rate Factor	\$194.18	\$194.18	\$196.69	\$196.69	\$201.11	\$201.11	\$203.61	\$203.61	\$204.39	\$206.89

Harvard Pilgrim Health Care, Inc.										
Product	HMO									
Plan ID	Best Buy HSA	Best Buy HSA	Maine's ChoiceSM Best Buy HSA	Maine's ChoiceSM Best Buy HSA	Best Buy HSA					
	250028	250027	270010		270009		250030	250029	250026	250025
Metal Level	Bronze	Bronze	Silver		Silver		Silver	Silver	Silver	Silver
Tier			1	2	1	2				
Medical Deductible	\$3,500	\$3,500	\$2,800	\$4,000	\$2,800	\$4,000	\$3,000	\$3,000	\$2,600	\$2,600
Coinsurance/Copay	20%	20%	10%	30%	10%	30%	10%	10%	10%	10%
Medical OOP Max	\$4,250	\$4,250	\$4,000	\$6,450	\$4,000	\$6,450	\$5,000	\$5,000	\$4,500	\$4,500
Child Dental	No	Yes	No		Yes		No	Yes	No	Yes
Plan Base Rate Factor	\$238.63	\$241.14	\$231.35		\$233.85		\$263.77	\$266.28	\$276.16	\$278.66

Harvard Pilgrim Health Care, Inc.										
Product	HMO									
Plan ID	Maine's ChoiceSM Best Buy HSA		Maine's ChoiceSM Best Buy HSA		Maine's ChoiceSM		Maine's ChoiceSM		Maine's ChoiceSM	
	270006		270005		270008		270007		270004	
Metal Level	Silver		Silver		Silver		Silver		Silver	
Tier	1	2	1	2	1	2	1	2	1	2
Medical Deductible	\$2,800	\$4,000	\$2,800	\$4,000	\$3,500	\$5,500	\$3,500	\$5,500	\$2,000	\$5,000
Coinsurance/Copay	10%	30%	10%	30%	\$35	40%	\$35	40%	\$35	40%
Medical OOP Max	\$4,000	\$6,450	\$4,000	\$6,450	\$5,500	\$6,850	\$5,500	\$6,850	\$5,500	\$6,850
Child Dental	No		Yes		No		Yes		No	
Plan Base Rate Factor	\$231.35		\$233.85		\$240.45		\$242.96		\$252.11	

Product	HMO									
Plan ID	Maine's ChoiceSM		Best Buy HSA	Best Buy HSA	Maine Difference	Maine Difference	Maine Difference	HMO Copayment	Maine Difference	HMO Copayment
	270003		250017	250018	250016	250015	250014	250008	250013	250007
Metal Level	Silver		Silver	Silver	Silver	Silver	Silver	Silver	Silver	Silver
Tier	1	2								
Medical Deductible	\$2,000	\$5,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$2,000	\$3,000	\$2,000
Coinsurance/Copay	\$35	40%	10%	10%	\$35	\$35	\$35	\$35	\$35	\$35
Medical OOP Max	\$5,500	\$6,850	\$5,000	\$5,000	\$6,500	\$6,500	\$6,500	\$6,850	\$6,500	\$6,850
Child Dental	Yes		No	Yes	No	Yes	No	No	Yes	Yes
Plan Base Rate Factor	\$254.62		\$263.77	\$266.28	\$292.55	\$295.06	\$297.65	\$299.47	\$300.16	\$301.98

Product	HMO									
Plan ID	Maine Difference	Maine Difference	HMO Copayment	Maine Difference	HMO Copayment	Maine Difference	Maine's ChoiceSM		Maine's ChoiceSM	
	250012	250011	250006	250009	250005	250010	270002		270001	
Metal Level	Silver	Silver	Silver	Silver	Silver	Silver	Gold		Gold	
Tier							1	2	1	2
Medical Deductible	\$2,500	\$2,500	\$2,000	\$2,500	\$2,000	\$2,500	\$1,250	\$3,000	\$1,250	\$3,000
Coinsurance/Copay	\$35	\$35	\$35	\$35	\$35	\$35	\$20	30%	\$20	30%
Medical OOP Max	\$6,000	\$6,000	\$6,850	\$6,000	\$6,850	\$6,000	\$2,500	\$5,500	\$2,500	\$5,500
Child Dental	No	Yes	No	No	Yes	Yes	No		Yes	
Plan Base Rate Factor	\$303.12	\$305.62	\$306.40	\$306.76	\$308.90	\$309.27	\$300.57		\$303.07	

Product	HMO				
Plan ID	Maine Difference				
	250002	250001	250003	250004	
Metal Level	Gold	Gold	Gold	Gold	
Tier					
Medical Deductible	\$1,500	\$1,500	\$1,000	\$1,000	
Coinsurance/Copay	\$25	\$25	\$25	\$25	
Medical OOP Max	\$3,500	\$3,500	\$3,000	\$3,000	
Child Dental	No	Yes	No	Yes	
Plan Base Rate Factor	\$365.05	\$367.56	\$381.08	\$383.59	

HPHC Insurance Company & Harvard Pilgrim Health Care - Small Group 2016 3Q

Maine Bureau of Insurance

4/7/2016

Tobacco Factors	
HPHC	None
Harvard Pilgrim	None

Area Factors	
1	0.950
2	1.035
3	1.055
4	1.350

Quarterly Trend Factors	
1st Quarter	
2nd Quarter	
3rd Quarter	1.0000
4th Quarter	1.0200

Areas / Counties	
1 - Cumberland, Sagadahoc, York	
2 - Knox, Kennebec, Lincoln, Oxford	
3 - Androscoggin, Waldo, Franklin, Penobscot, Somerset, Piscataquis	
4 - Hancock, Aroostook, Washington	

Age Factors		Age Factors	
0-20	0.635	44	1.397
21-24	1.000	45	1.444
25	1.004	46	1.500
26	1.024	47	1.563
27	1.048	48	1.635
28	1.087	49	1.706
29	1.119	50	1.786
30	1.135	51	1.865
31	1.159	52	1.952
32	1.183	53	2.040
33	1.198	54	2.135
34	1.214	55	2.230
35	1.222	56	2.333
36	1.230	57	2.437
37	1.238	58	2.548
38	1.246	59	2.603
39	1.262	60	2.714
40	1.278	61	2.810
41	1.302	62	2.873
42	1.325	63	2.952
43	1.357	64 +	3.000

Monthly Premium =(Plan Base Rate Factor*Monthly Trend Factor*Area Factor*Age Factor*Tobacco Factor)

*Rates may be slightly off due to rounding. Please contact the carrier to receive an exact quote.