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TABLE 1: Average Rate Increase by Plan

2016 HIOS ID	2016 Plan Name	2017 HIOS ID	2017 Plan Name	Average Rate Increase	Miniumum Rate Increase	Maximium Rate Increase
73250ME0040001	ME AWH Bronze $35 Copay PD	73250ME0040001	ME AWH Bronze $40 Copay PD	12.2%	12.2%	12.2%
73250ME0040003	ME AWH Silver $10 Copay PD	73250ME0040007	ME AWH Silver $10 Copay PD	10.1%	10.1%	10.1%
73250ME0040002	ME AWH Gold $5 Copay PD	73250ME0040006	ME AWH Gold $5 Copay PD	10.1%	10.1%	10.1%

TABLE 2: Projected Trend Components

Service Category	Unit Cost	Utilization	Leveraging	Paid Trend
Facility Inpatient	6.5%	0.7%	1.0%	8.3%
Facility Outpatient	5.9%	1.2%	1.0%	8.3%
Physician	1.8%	1.9%	1.0%	4.8%
Total Medical	**5.0%**	**1.3%**	**1.0%**	**7.5%**
Pharmacy	7.7%	4.2%	1.3%	13.8%
Total (Med + Rx)	**5.4%**	**1.7%**	**1.0%**	**8.4%**

TABLE 3: Federal MLR Projection

Components of Calculation	Premium	Claims
Earned Premium	100.0%	
Expected Medical Benefits (MBR)		84.0%
Premium Reductions:		
Federal/State taxes + licensing & regulatory fees	2.52%	
Claim Adjustments:		
Quality Improvement expenses		0.94%
Net Numerator (MBR)		85.0%
Net Denominator (Premium)	97.5%	
Resulting adjusted Federal MLR	**87.17%**	

TABLE 4: Sample Rate Development

Benefit Plan:	Aetna Whole Health Silver $10 Copay PD
Subscriber County:	Cumberland / RA01
Tobacco Status:	No Users
Total Family Mo. Premium:	$1,081.55

Member Age	42	40	13	11	8	6
Calibrated Plan Adjusted Index Rate	$283.93	$283.93	$283.93	$283.93	$283.93	$283.93
Age Factor	1.325	1.278	0.635	0.635	0.635	0.635
Area Factor	0.845	0.845	0.845	0.845	0.845	0.845
Tobacco Factor	1	1	N/A	N/A	N/A	N/A
Final Rate	$317.89	$306.61	$152.35	$152.35	$152.35	N/A

TABLE 5: Plan Mapping

2015 HIOS Plan ID	2015 Plan Name	2016 HIOS Plan ID	2016 Plan Name	2017 HIOS Plan ID	2017 Plan Name
73250ME0040001	AWH Bronze $15 Copay PD	73250ME0040001	AWH Bronze $35 Copay PD	73250ME0040001	Aetna Whole Health Bronze $40 Copay PD
73250ME0040002	AWH Gold $0 Copay PD	73250ME0040002	AWH Gold $0 Copay PD	73250ME0040006	Aetna Whole Health Gold $5 Copay PD
73250ME0040003	AWH Silver $10 Copay PD	73250ME0040003	AWH Silver $10 Copay PD	73250ME0040007	Aetna Whole Health Silver $10 Copay PD
73250ME0040004*	AWH Silver $5 Copay 2500 PD				

**Did not meet Actuarial Value in the successive year & thus were mapped to the next closest plan.*

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Exhibit E-1, Calculation of the Market Adjusted Index Rate

Projected Index Rate:	**$451.59**
Net Risk Adjustment:	*1.059*
Exchange User Fees:	*1.000*
Total Impact:	1.059
Market Adjusted Index Rate:	**$478.27**

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Exhibit E-2, Calculation of Plan Adjusted Index Rates and Calibrated Plan Adjusted Index Rates

				(1)	(2a)	(2b)	(3)	(4)	(5)	(6)	(7) = Product (Columns 1-6)	(8)	(9)	(10)	(11) = (8) x (9) x (10)	(12) = (7) x (11)	(13) = (7) / (1)
HIOS ID	**Plan Name**	**Metal Tier**	**Member Distribution**	**Market Adjusted Index Rate**	**AV & Cost Sharing**	**Non-Tobacco Adjsmnt**	**Distribution & Admin**	**Network & UM**	**Benefits in addition to EHBs**	**Impact of Eligibility (CAT)**	**Plan Adjusted Index Rate**	**Age Calibration Factor**	**Area Calibration Factor**	**Trend Calibration Factor**	**Total Calibration Adjustm't**	**Calibrated Plan Adjusted Index Rate**	**AV Pricing Value**
73250ME0040006	Aetna Whole Health Gold $5 Copay PD	Bronze	5.00%	$478.27	1.049	0.988	1.190	1.000	1.000	1.000	589.60	0.598	1.158	1.000	0.693	408.43	1.233
73250ME0040007	Aetna Whole Health Silver $10 Copay PD	Gold	71.00%	$478.27	0.729	0.988	1.190	1.000	1.000	1.000	409.87	0.598	1.158	1.000	0.693	283.93	0.857
73250ME0040001	Aetna Whole Health Bronze $40 Copay PD	Bronze	24.00%	$478.27	0.611	0.988	1.190	1.000	1.000	1.000	343.21	0.598	1.158	1.000	0.693	237.75	0.718

Exhibit E-2 calculates rates according to the URRT instructions without intermediate rounding. This may differ from Aetna's quoting systems, which perform intermediate rounding throughout the rate development calculation. This rounding difference may result in rates displayed in Exhibit E-2 that vary from those in the quoting system and QHP Rate Templates by +/- $0.01.

Details of Item #2:

		AV & Cost Sharing		
HIOS ID	**Plan Name**	**Paid to Allowed**	**Utilization Adjustment**	**Plan Design Adjustment**
73250ME0040006	Aetna Whole Health Gold $5 Copay PD	0.835	1.053	1.195
73250ME0040007	Aetna Whole Health Silver $10 Copay PD	0.720	1.004	1.009
73250ME0040001	Aetna Whole Health Bronze $40 Copay PD	0.684	0.975	0.917

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Exhibit E-3, Projected Membership Distribution

HIOS Plan Variant ID	Plan Name	Variant Type	Exchange Status	Member Distribution
73250ME0040001-00	Aetna Whole Health Bronze $40 Copay PD	Off-Exchange	OFF	24.0%
73250ME0040006-00	Aetna Whole Health Gold $5 Copay PD	Off-Exchange	OFF	5.0%
73250ME0040007-00	Aetna Whole Health Silver $10 Copay PD	Off-Exchange	OFF	71.0%