

ACTUARIAL MEMORANDUM

1. General Information

- Company Identifying Information

Company Legal Name:	Anthem Health Plans of Maine, Inc.
State:	Maine
HIOS Issuer ID:	48396
NAIC Company Code:	52618
Market:	Individual
Effective Date:	January 1, 2017

- Company Contact Information

Primary Contact Name:	Zachary Fohl
Primary Contact Telephone Number:	(317) 646-3670
Primary Contact Email Address:	zachary.fohl@anthem.com

2. Scope and Purpose of the Filing

This is a rate filing for the Individual market ACA-compliant plans offered by Anthem Health Plans of Maine, Inc., d/b/a Anthem Blue Cross and Blue Shield, also referred to as "Anthem." The proposed rates in this filing will be effective for the 2017 plan year beginning January 1, 2017, and apply to plans both On-Exchange and Off-Exchange.

The Memorandum provides support to the rate development and demonstrates that rates are established in compliance with state laws and provisions of the Affordable Care Act. To the extent relevant rules or guidance on the rules are updated or changed, amendments to this filing may be required. This rate filing is not intended to be used for other purposes.

3. Changes from Prior Filing

- In compliance with the Superintendent's Decision and Order in Docket No. INS-16-1000 issued on August 16, 2016, we reduced the after-tax profit margin from 2.239% to 1.679%, which reduced the average rate increase from 19.4% to 18.0%.

4. Marketing Method

This product is typically marketed through direct mail. An in-house staff of licensed sales representatives responds to telephone inquiries. Product information is available on the Anthem website. Every telephone directory in Maine lists an 800 number for Anthem. Appointed producers also sell individual products throughout the state. Plans available through the exchange are listed in Exhibit A.

5. Proposed Rate Increase(s)

The proposed annual rate changes by product in this filing range from 16.1% to 19.4%, with rate changes by plan from 11.3% to 23.5%. These ranges are based on the renewing plans, and are consistent with what's reported in the Unified Rate Review Template. Exhibit A shows the rate change for each plan.

Factors that affect the rate changes for all plans include:

- Emerging experience.
- Trend: This includes the impact of inflation, provider contracting changes, and increased utilization of services.
- Morbidity: There are anticipated changes in the market-wide morbidity of the covered population in the projection period.
- Benefit modifications, including changes made to comply with updated AV requirements.
- Changes in taxes, fees, and some non-benefit expenses, including the one-year suspension of the Health Insurer Tax for 2017.
- Discontinuance of the Federal Transitional Reinsurance Program, which impacts both payments from and contributions to the program.

Although rates are based on the same claims experience, the rate changes vary by plan due to the following factors:

- Changes in benefit design that vary by plan
- Updates in benefit relativity factors among plans.
- Updated adjustment factors for catastrophic plans.
- Changes in some non-benefit expenses that are applied on a PMPM basis.
- Changes in the claim cost relativity by area.

6. Experience Period Premium and Claims

The experience period premium and claims reported in Worksheet 1, Section I of the Unified Rate Review Template (URRT) are for the non-grandfathered, single risk pool compliant policies of the identified legal entity in the Individual market.

- Paid Through Date

The experience reported in Worksheet 1, Section I of the URRT reflect the incurred claims from January 1, 2015 through December 31, 2015 based on claims paid through May 31, 2016.

- Premiums (net of MLR Rebate) in Experience Period

The earned premium prior to MLR rebate is \$71,328,056. The earned premium reflects the pro-rata share of premium based on policy coverage dates, and includes expected risk adjustments for the experience period.

The preliminary MLR rebate estimate is \$0, which is consistent with Anthem's December 31, 2015 general ledger estimate allocated to the non-grandfathered portion of Individual business. This is an estimated amount and will not be final until 7/31/2016. Using this MLR estimate, the net earned premium is \$71,328,056 for the legal entity as reported in cell F14 of Worksheet 1, Section I of the URRT.

- Allowed and Incurred Claims Incurred During the Experience Period

The allowed claims are determined by subtracting non-covered benefits, provider discounts, and coordination of benefits amounts from the billed amount.

Allowed and incurred claims are completed using the chain ladder method, an industry standard, by using historic paid vs. incurred claims patterns. The method calculates historic completion percentages, representing the percent of cumulative claims paid of the ultimate incurred amounts for each lag month. Claim backlog files are reviewed on a monthly basis and are accounted for in the historical completion factor estimates.

Allowed and incurred claims reported in Worksheet 1, Section I of the URRT are \$90,333,792 and \$63,803,790, respectively. These amounts differ from those shown in Exhibit B due to the fact that the URRT takes transitional policies and Rx rebates into account.

7. Benefit Categories

The methodology used to determine benefit categories in Worksheet 1, Section II of the URRT is as follows:

- Inpatient Hospital: Includes non-capitated facility services for medical, surgical, maternity, mental health and substance abuse, skilled nursing, and other services provided in an inpatient facility setting and billed by the facility.
- Outpatient Hospital: Includes non-capitated facility services for surgery, emergency room, lab, radiology, therapy, observation and other services provided in an outpatient facility setting and billed by the facility.
- Professional: Includes non-capitated primary care, specialist, therapy, the professional component of laboratory and radiology, and other professional services, other than hospital-based professionals whose payments are included in facility fees.
- Other Medical: Includes non-capitated ambulance, home health care, DME, prosthetics, supplies, vision exams, and dental services.
- Capitation: Includes all services provided under one or more capitated arrangements.
- Prescription Drug: Includes drugs dispensed by a pharmacy and rebates received from drug manufacturers.

8. Projection Factors

The experience period claims in Worksheet 1, Section I of the URRT are projected to the projection period using the factors described below. Exhibit C provides a summary of the factors.

- Changes in the Morbidity of the Population Insured

Adjustments are made to account for the differences between the average morbidity of the experience period population and that of the anticipated population in the projection period.

- Changes in Benefits

Changes in benefits include the following items.

- Essential Health Benefit (EHB) Changes: Adjustments are made to reflect the 2017 requirement to provide separate but equal visit limits for rehabilitative and habilitative therapies per HHS Notice of Benefit and Payment Parameters. This factor also adjusts for the change in the state EHB benchmark plan for 2017. \$0.11 PMPM has been added under additional EHB's to cover Non-discrimination 81 Fed. Reg. 31375 shown in Exhibit C.

- Changes in Demographics (Normalization)

The experience period claims are normalized to reflect anticipated changes in age/gender, area, network, and benefit plan in the projection period.

- Age/Gender: The assumed claims cost is applied by age and gender to the experience period membership distribution and the projection period membership distribution.
- Area/Network: The area claims factors are developed based on an analysis of allowed claims by network, mapped to the prescribed rating areas using the subscriber's 5-digit zip code.
- Benefit Plan: The experience period claims are normalized to reflect the average benefit level in the projection period using benefit relativities. The benefit relativities include the value of cost shares and anticipated changes in utilization due to the difference in average cost share requirements.

- Other Adjustments

Other adjustments to the experience claims data include the following items. Exhibit C shows the other claims adjustment factors.

- Seasonality Maturing Adjustment: Adjustments are made when policies in the experience period have less than 12 months of experience in order to get them on a full 12-month basis that is expected in the projection period. The seasonality factors take into account claim seasonality during the year and the effect of calendar-year deductibles in health insurance.
- Induced Demand Due to Cost Share Reductions: Individuals who fall below 250% of the Federal Poverty Level and enroll in On-Exchange silver plans will be eligible for cost share reductions. The percentage of enrollment in CSR Plans in the experience period is compared to that of the projection period to adjust for the different induced demand level due to CSR between the two periods.
- Grace Period: The claims experience has been adjusted to account for incidences of enrollees not paying premiums due during the first month of the 90-day grace period when the QHP is liable for paying claims.
- Rx Rebates: The projected claims cost is adjusted to reflect anticipated Rx rebates. These projections take into account the most up-to-date information regarding anticipated rebate contracts, drug prices, anticipated price inflation, and upcoming patent expirations.
- Projected cost of pediatric dental and vision benefits are included.

Transitional product experience has been included in Worksheet 1, Section I of the URRT, in compliance with URR Instructions. In Exhibit C, transitional policies are not included in the starting claims PMPM, but their impact to the projected claims PMPM is reflected in the morbidity adjustment described above.

- Trend Factors (cost/utilization)

- The annual pricing trend used in the development of the rates has accelerated and is now projected at 9.6%. The trend is developed by normalizing historical benefit expense for changes in the underlying population and known cost drivers, which are then projected forward to develop the pricing trend. Examples of such changes include contracting, cost of care initiatives, workdays, costs associated with Hepatitis C, compound drugs, average wholesale price, and expected introduction of generic drugs. For projection, the experience period claims are trended 23.8 months from the midpoint of the experience period, which is July 7, 2015, to the midpoint of the projection period, which is July 1, 2017.
- Projected trends include the estimated cost of the pharmaceutical Harvoni and other high-cost drugs for treating Hepatitis C. These cost estimates were based on Maine claims experience, together with CDC recommendations, Industry and Anthem Inc. data.

9. Credibility Manual Rate Development

The experience period claims are 100% credible based on the credibility method used. Therefore, a manual rate was not used in the rate development.

10. Credibility of Experience

- Credibility Method Used

Based on an analysis of historical data, the standard for fully credible experience is 8,618 members.

To determine credibility, the following formula was used: $\sqrt{\text{experience period members} / 8,618}$

- Resulting Credibility Level Assigned to Base Period Experience

With 13,521 members, the credibility level assigned to the experience period claims is 100%.

11. Paid to Allowed Ratio

The 'Paid to Allowed Average Factor in Projection Period' reported in Worksheet 1, Section III of the URRT is equal to the ratio of member weighted average paid claims PMPM by plan to the member weighted average allowed claims PMPM by plan for the essential health benefits. The projected membership by plan used in the weighted average is reported in Worksheet 2, Section II of the URRT.

12. Risk Adjustment and Reinsurance

- Experience Period Risk Adjustment and Reinsurance Adjustments PMPM:

Experience period risk adjustments are based on the Summary Report released by CMS on 6/30/2016. This information was used to calculate Anthem's relative risk to market. The 'Net Amt of Risk Adj' reported in Worksheet 2, section III of the URRT reflects the risk adjustment transfers net of risk adjustment fees.

Experience period reinsurance are based on the Summary Report released by CMS on 6/30/2016. The 'Net Amt of Rein' reported in Worksheet 2, section III of the URRT reflects the reinsurance recoveries net of reinsurance contributions.

- Projected Risk Adjustments PMPM:

Anthem updated its base claims to reflect the market average risk. By starting with market average risk and projecting these claims forward the Projected Risk Adjustment PMPM is set to 0 because our projected risk would match the expected average market risk.

The projected risk adjustment PMPMs reported in the URRT are net of risk adjustment fees, and on a paid claim basis. The projected amount applied to the development of Market Adjusted Index Rate is on an allowed claim basis. Exhibit C and Exhibit D provide details.

- Projected ACA Reinsurance Recoveries Net of Reinsurance Premium

Beginning in 2017, the Federal reinsurance program will no longer be in effect. The projected reinsurance amount will be \$0.

13. Non-Benefit Expenses and Profit & Risk

Non-benefit expenses and profit & risk margin are explained below. Exhibit E shows the amount for each component. The total administrative expense charge in the proposed rates is materially higher than approved in last year's filing. In prior filings, Anthem assumed that a portion of the ACA observed expense level was attributable to the transition to ACA plans and therefore that portion was not included in projected rates. With the passage of time and more experience with the ACA block, Anthem has included in the proposed rates the actual observed expense level for the ACA block; however, this does not include one-time expenses that are not expected to re-occur during the rating period.

- Administrative Expense

Administrative Expense contains both acquisition costs associated with the production of new business through non-broker distribution channels (direct, telesales) as well as maintenance costs associated with ongoing costs for the administration of the business. Acquisition costs are based on projected cost per member applied to future sales estimates. Maintenance costs are projected for 2017 based on 2015 actual expenses with adjustments made for expected changes in business operations.

- Quality Improvement Expense

Quality Improvement initiatives include programs such as Improve Health Outcomes, Activities to Prevent Hospital Readmissions, Improve Patient Safety and Reduce Medical Errors, Wellness and Health Promotion Activities, and Health Information Technology Expenses for Health Care Quality Improvements. The expense assumptions are based on historical expense level adjusted for cost inflation and anticipated changes in the programs.

- Selling Expense

Selling Expense represents projected broker commissions and bonuses associated with the broker distribution channel. Commissions will be paid for products both On-Exchange and Off-Exchange.

- Specialty Expenses

Specialty Expenses are projected administrative expenses for dental and vision coverage.

- Taxes and Fees

- Patient-Centered Outcomes Research Institute (PCORI) Fee: The PCORI fee is a federally-mandated fee designed to help fund the Patient-Centered Outcomes Research Trust Fund.
- ACA Insurer Fee: The health insurance industry is assessed a permanent fee, based on market share of net premium, which is not tax deductible. The tax impact of non-deductibility is captured in this fee. For 2017, this fee is 0% due to a one-year suspension by the federal government.
- Marketplace User Fee: The Marketplace User Fee applies to Exchange business only, but the cost is spread across all plans in the market. A blended fee/percentage is determined based on an assumed 79.2% of members that will purchase products On-Exchange. The resulting fee/percentage is applied evenly to all plans in the risk pool, both On and Off Exchange.

The Marketplace User Fee is applied as an adjustment to the Market Adjusted Index Rate at the market level as shown in Exhibit C.

- Federal income taxes, and state income taxes are also included.
- Miscellaneous Taxes and Fees: Maine Vaccine Assessment

The Risk Adjustment User Fee is reflected in the risk adjustment component of incurred claims, therefore not included in taxes and fees.

- Profit & Risk Margin

Profit & risk margin is reflected on a post-tax basis as a percentage of premiums. Per the Superintendent's Decision and Order dated August 16, 2017, the profit and risk charge in the 2017 rates is 1.68%.

14. Projected Loss Ratio

- Projected Federal MLR

Exhibit F shows the projected Federal MLR for the products in this filing. The calculation is an estimate and is not meant to be a true measure for Federal or State MLR rebate purposes. The MLR for Anthem's entire book of Individual business will be compared to the minimum Federal benchmark for purposes of determining regulation-related premium refunds. Also note that the projected Federal MLR presented here does not capture all adjustments, including but not limited to: three-year averaging, credibility, dual option, and deductible. Anthem's projected MLR is expected to meet or exceed the minimum MLR standards at the market level after including all adjustments.

15. Single Risk Pool

The single risk pool for this filing is established according to the requirements in 45 CFR 156.80. It reflects all covered lives for every non-grandfathered product/plan combination sold in the Maine Individual market by Anthem Health Plans of Maine, Inc..

16. Index Rate

- Experience Period Index Rate

The experience period Index Rate is equal to the allowed claims PMPM for the essential health benefits of Anthem's non-grandfathered business in the Individual market. The Index Rate reported in Worksheet 1, Section I, cell G17 of the URRT is \$438.00, rounded to the nearest whole dollar as instructed. No benefits in excess of the essential health benefits have been included in this amount. A comparison to the benchmark was performed, and only essential health benefits were covered during the experience period

- **Projection Period Index Rate**

The projection period Index Rate is equal to projected allowed claims PMPM for the essential health benefits of Anthem's non-grandfathered business in the Individual market. It reflects the anticipated claim level of the projection period including impact from trend, benefit and demographics as described in Section 8 of this memo.

The projected index rate is reported in Worksheet 1, Section III, cell V44 of the URRT and is also shown in Exhibit C. No benefits in excess of the essential health benefits have been included in this amount.

17. Market Adjusted Index Rate

The Market Adjusted Index rate is calculated as the Index Rate adjusted for all allowable market-wide modifiers defined in the market rating rules. The three market-wide adjustments - Federal reinsurance program adjustment (ended for 2017), risk adjustment and Marketplace user fee adjustment - were described previously in the memo. In compliance with URR Instructions, these adjustments were applied on an allowed basis in the development of the Market Adjusted Index Rate, while they were reported in the URRT on a paid basis. Exhibit C illustrates the development of the Market Adjusted Index Rate.

18. Plan Adjusted Index Rate

The Plan Adjusted Index Rate is calculated as the Market Adjusted Index Rate adjusted for all allowable plan level modifiers defined in the market rating rules. Exhibit G shows the development. The plan level modifiers are described below:

- **AV and Cost Sharing Adjustments:** This is a multiplicative factor that adjusts for the projected paid/allowed ratio of each plan, based on the AV metal value with an adjustment for utilization differences due to differences in cost sharing. This also includes an adjustment for the average tobacco factor shown in Exhibit H.
- **Provider Network Adjustments:** This is a multiplicative factor that adjusts for differences in projected claims cost due to different network discounts.
- **Adjustments for Benefits in Addition to the Essential Health Benefits:** A factor of 1.00 indicates that the plan does not provide benefits beyond the essential health benefits.
- **Catastrophic Plan Adjustment:** This adjustment reflects the projected costs of the population eligible for catastrophic plans. The catastrophic adjustment factor is applied to catastrophic plans only; all other plans have an adjustment factor of 1.0.
- **Adjustments for Distribution and Administrative Cost:** This is an additive adjustment that includes all the selling expense, administration and retention items shown in Exhibit E, with the exception of the Marketplace user fee. The Marketplace user fee has been included in the Market Adjusted Index Rate at the market level.

Experience Period Plan Adjusted Index Rate

The Plan Adjusted Index Rates for the experience period are reported in Worksheet 2, Section III of the URRT. They represent the Plan Adjusted Index Rates filed in 2015.

19. Calibration

The Plan Adjusted Index Rate is calibrated by the Age and Geographic factors so that the schedule of premiums rates for each plan can be further developed. Exhibit H shows both calibration factors.

- **Age Curve Calibration**

The age factors are based on the Default Federal Standard Age Curve. The age calibration adjustment is calculated as the member weighted average of the age factors, using the projected membership distribution by age, with an adjustment for the maximum of 3 child dependents under age 21. Under this methodology, the approximate average age rounded to the nearest whole number for the risk pool is 48.

- **Geographic Factor Calibration**

The geographic factors are developed from historical claims experience. The geographic calibration adjustment is calculated as the member weighted average of the geographic factors, using the projected membership distribution by area.

20. Consumer Adjusted Premium Rate Development

The Consumer Adjusted Premium Rate is calculated by calibrating the Plan Adjusted Index Rate by the Age and Geographic calibration factors described above, and applying consumer specific age, geographic and tobacco status rating factors. Exhibit K has the sample rate calculations.

21. Actuarial Value Metal Values

The Actuarial Value (AV) Metal Values reported in Worksheet 2, Section I of the URRT are based on the AV Calculator. To the extent a component of the benefit design was not accommodated by an available input within the AV Calculator, the benefit characteristic was adjusted to be actuarially equivalent to an available input within the AV Calculator for purposes of utilizing the AV Calculator as the basis for the AV Metal Values. When applicable, benefits for plans that are not compatible with the parameters of the AV Calculator have been separately identified and documented in the Unique Plan Design Supporting Documentation and Justification that supports the Plan & Benefits Template.

22. Actuarial Value Pricing Values

The Actuarial Value (AV) Pricing Values for each plan are reported in Worksheet 2, Section I of the URRT. The AV Pricing Value represents the cumulative effect of adjustments made to move from the Market Adjusted Index Rate to the Plan Adjusted Index Rate. Consistent with final Market Rules, utilization adjustments are made to account for member behavior variations based upon cost-share variations of the benefit design and not the health status of the member. The plan level allowable modifiers to the Index Rate are included in Exhibit G and described in Section 18 above.

23. Membership Projections

Membership projections are reported in Worksheet 2, Section IV of the URRT. They are based on historical and current enrollment, expected new sales and lapses, and anticipated movement from grandfathered and transitional policies.

For Silver level plans in the Individual market, the portion of projected membership that will be eligible for cost-sharing reduction subsidies at each subsidy level are estimated from the enrollment data in the experience period. Exhibit L provides projected distributions for each plan.

24. Terminated Plans and Products

Exhibit M provides a listing of 2015 and 2016 plans that will be terminated prior to January 1, 2017. The mapping of terminated plans to the new plans is also included.

25. Description of Benefits

All of the products listed in this filing will be open to new sales. A full listing of products and their benefits can be found in Exhibit N and Exhibit O.

26. Issue Age Range

There is no limitation on issue age. However, new policies are issued to subscribers age 65 and over only if they are not eligible for Medicare Part A without paying a premium. The average projected age in the projection period is 48.

Premiums are on an attained age basis.

27. Medical Underwriting

All Anthem individual products are offered on a guaranteed issue basis. No medical underwriting is done during the sales or acceptance/enrollment processes. Additionally, premium is not impacted by gender, health status, claims experience, or policy duration of the individual.

28. In-Force Business and Annualized Premium

There will be 16,763 members affected by this rate revision. Total annualized premium of this block is \$78,903,798.88.

29. Historical Rate Increases

Anthem's Maine Individual rates have been adjusted in the past as follows:

2015:	-1.1% annual increase
2016:	4.8% annual increase

30. Plan Type

The plan type for each plan reported in Worksheet 2, Section I of the URRT is consistent with the option chosen from the drop-down box.

31. Warning Alerts

There is a warning alert in cell A57 on Worksheet 2, Section III of the Unified Rate Review Template. This is because Plan Adjusted Index Rates are only entered for single risk pool compliant plans on Worksheet 2, whereas the Worksheet 1 average premium rate reflects the experience of all non-grandfathered (single risk pool compliant and transitional) policies. An additional impact is due to differences in the distribution of ages, geography, and benefits that was projected when developing rates versus what actually emerged. Cell A55 does not show a warning because it has a higher threshold.

32. Reliance

In support of this rate development, various data and analyses were provided by other members of Anthem's actuarial staff, including data and analysis related to cost of care, valuation, and pricing. I have reviewed the data and analyses for reasonableness and consistency. I have also relied on Michele Archer, FSA, MAAA to provide the actuarial certification for the Unique Plan Design Supporting Documentation and Justification for plans included in this filing.

33. Actuarial Certification

I, Zachary Fohl, FSA, MAAA, am an actuary for Anthem. I am a member of the American Academy of Actuaries and a Fellow of the Society of Actuaries. I meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained herein. I hereby certify that the following statements are true to the best of my knowledge with regards to this filing:

(1) The projected Index Rate is:

- In compliance with all applicable state and Federal statutes and regulations (45 CFR 156.80 and 147.102)
- Developed in compliance with the applicable Actuarial Standards of Practice
- Reasonable in relation to the benefits provided and the population anticipated to be covered

- Not excessive nor deficient

(2) The Index Rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 156.80(d)(2) were used to generate plan level rates.

(3) The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV of the Part I Unified Rate Review Template is calculated in accordance with Actuarial Standards of Practice.

(4) The geographic rating factors reflect only differences in the costs of delivery (which can include unit cost and provider practice pattern differences) and do not include differences for population morbidity by geographic area.

(5) The most recent AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans.

The Part I Unified Rate Review Template does not demonstrate the process used by the issuer to develop the rates. Rather it represents information required by Federal regulation to be provided in support of the review of rate changes, for certification of Qualified Health Plans for Federally-Facilitated Exchanges, and for certification that the Index Rate is developed in accordance with Federal regulation, used consistently, and only adjusted by the allowable modifiers. However, this Actuarial Memorandum does accurately describe the process used by the issuer to develop the rates.



Zachary Fohl, FSA, MAAA
Actuarial Director

8/16/2016

Date

Exhibit A - Non-Grandfathered Rate Changes

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

HIOS Plan Name	2017 HIOS Plan ID	On/Off		Network Name	Area(s) Offered	2016 HIOS Plan ID		Plan Category	Plan Specific Rate Change (excluding aging) ⁽¹⁾
		Exchange	Metal Level			Mapping			
Anthem Catastrophic X HMO 7150	48396ME0710016	On	Catastrophic	Pathway X Enhanced	1, 2, 3	48396ME0710016	Renewing	17.7%	
Anthem Bronze X HMO 5000 for HSA	48396ME0710020	On	Bronze	Pathway X Enhanced	1, 2, 3	48396ME0710020	Renewing	16.1%	
Anthem Bronze X HMO 5000	48396ME0710019	On	Bronze	Pathway X Enhanced	1, 2, 3	48396ME0710019	Renewing	20.4%	
Anthem Bronze X HMO 6250 for HSA	48396ME0710031	On	Bronze	Pathway X Enhanced	1, 2, 3	48396ME0710031	Renewing	23.1%	
Anthem Bronze X HMO 6250	48396ME0710034	On	Bronze	Pathway X Enhanced	1, 2, 3	48396ME0710011	New	18.1%	
Anthem Silver X HMO 2900 for HSA	48396ME0710021	On	Silver	Pathway X Enhanced	1, 2, 3	48396ME0710021	Renewing	15.6%	
Anthem Silver X HMO 2250	48396ME0710032	On	Silver	Pathway X Enhanced	1, 2, 3	48396ME0710032	Renewing	20.5%	
Anthem Silver X HMO 3850	48396ME0710012	On	Silver	Pathway X Enhanced	1, 2, 3	48396ME0710012	Renewing	17.6%	
Anthem Silver Core X HMO 4650	48396ME0710035	On	Silver	Pathway X Enhanced	1, 2, 3	None	New	0.0%	
Anthem Catastrophic X POS 7150	48396ME0720022	On	Catastrophic	Pathway X	03	48396ME0720022	Renewing	13.9%	
Anthem Catastrophic X POS 7150	48396ME0720034	On	Catastrophic	Pathway X	04	48396ME0720034	Renewing	16.3%	
Anthem Bronze X POS 5000 for HSA	48396ME0720018	On	Bronze	Pathway X	03	48396ME0720018	Renewing	12.8%	
Anthem Bronze X POS 5000 for HSA	48396ME0720032	On	Bronze	Pathway X	04	48396ME0720032	Renewing	15.1%	
Anthem Bronze X POS 6250 for HSA	48396ME0720035	On	Bronze	Pathway X	03	48396ME0720035	Renewing	19.2%	
Anthem Bronze X POS 6250 for HSA	48396ME0720036	On	Bronze	Pathway X	04	48396ME0720036	Renewing	21.6%	
Anthem Bronze X POS 5000	48396ME0720017	On	Bronze	Pathway X	03	48396ME0720017	Renewing	17.0%	
Anthem Bronze X POS 5000	48396ME0720031	On	Bronze	Pathway X	04	48396ME0720031	Renewing	19.4%	
Anthem Bronze X POS 6250	48396ME0720040	On	Bronze	Pathway X	03	48396ME0720015	New	12.6%	
Anthem Bronze X POS 6250	48396ME0720041	On	Bronze	Pathway X	04	48396ME0720027	New	14.9%	
Anthem Silver X POS 2900 for HSA	48396ME0720020	On	Silver	Pathway X	03	48396ME0720020	Renewing	13.5%	
Anthem Silver X POS 2900 for HSA	48396ME0720033	On	Silver	Pathway X	04	48396ME0720033	Renewing	15.8%	
Anthem Silver X POS 2250	48396ME0720037	On	Silver	Pathway X	03	48396ME0720037	Renewing	17.1%	
Anthem Silver X POS 2250	48396ME0720038	On	Silver	Pathway X	04	48396ME0720038	Renewing	19.5%	
Anthem Silver X POS 3850	48396ME0720013	On	Silver	Pathway X	03	48396ME0720013	Renewing	11.5%	
Anthem Silver X POS 3850	48396ME0720025	On	Silver	Pathway X	04	48396ME0720025	Renewing	13.8%	
Anthem Silver Core X POS 4650	48396ME0720044	On	Silver	Pathway X	03	None	New	0.0%	
Anthem Silver Core X POS 4650	48396ME0720045	On	Silver	Pathway X	04	None	New	0.0%	
Anthem Catastrophic HMO 7150	48396ME0790011	Off	Catastrophic	Pathway Enhanced	1, 2, 3	48396ME0790011	Renewing	17.3%	
Anthem Bronze HMO 5000 for HSA	48396ME0790016	Off	Bronze	Pathway Enhanced	1, 2, 3	48396ME0790016	Renewing	16.7%	
Anthem Bronze HMO 5000	48396ME0790015	Off	Bronze	Pathway Enhanced	1, 2, 3	48396ME0790015	Renewing	21.0%	
Anthem Bronze HMO 6250 for HSA	48396ME0790024	Off	Bronze	Pathway Enhanced	1, 2, 3	48396ME0790024	Renewing	23.5%	
Anthem Bronze HMO 6250	48396ME0790027	Off	Bronze	Pathway Enhanced	1, 2, 3	48396ME0790013	New	17.7%	
Anthem Silver HMO 2900 for HSA	48396ME0790019	Off	Silver	Pathway Enhanced	1, 2, 3	48396ME0790019	Renewing	15.9%	
Anthem Silver HMO 2250	48396ME0790025	Off	Silver	Pathway Enhanced	1, 2, 3	48396ME0790025	Renewing	20.7%	
Anthem Silver HMO 2800	48396ME0790018	Off	Silver	Pathway Enhanced	1, 2, 3	48396ME0790018	Renewing	20.6%	
Anthem Silver HMO 3850	48396ME0790017	Off	Silver	Pathway Enhanced	1, 2, 3	48396ME0790017	Renewing	17.7%	
Anthem Silver Core HMO 4650	48396ME0790028	Off	Silver	Pathway Enhanced	1, 2, 3	None	New	0.0%	
Anthem Gold HMO 1000	48396ME0790023	Off	Gold	Pathway Enhanced	1, 2, 3	48396ME0790023	Renewing	18.7%	
Anthem Catastrophic POS 7150	48396ME0800011	Off	Catastrophic	Pathway	03	48396ME0800011	Renewing	13.8%	
Anthem Catastrophic POS 7150	48396ME0800038	Off	Catastrophic	Pathway	04	48396ME0800038	Renewing	16.1%	
Anthem Bronze POS 5000 for HSA	48396ME0800017	Off	Bronze	Pathway	03	48396ME0800017	Renewing	12.6%	
Anthem Bronze POS 5000 for HSA	48396ME0800027	Off	Bronze	Pathway	04	48396ME0800027	Renewing	14.9%	
Anthem Bronze POS 6250 for HSA	48396ME0800058	Off	Bronze	Pathway	03	48396ME0800058	Renewing	19.1%	
Anthem Bronze POS 6250 for HSA	48396ME0800059	Off	Bronze	Pathway	04	48396ME0800059	Renewing	21.5%	
Anthem Bronze POS 5000	48396ME0800015	Off	Bronze	Pathway	03	48396ME0800015	Renewing	16.9%	
Anthem Bronze POS 5000	48396ME0800025	Off	Bronze	Pathway	04	48396ME0800025	Renewing	19.3%	
Anthem Bronze POS 6250	48396ME0800065	Off	Bronze	Pathway	03	48396ME0800012	New	12.6%	

Exhibit A - Non-Grandfathered Rate Changes

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

HIOS Plan Name	2017 HIOS Plan ID	On/Off		Network Name	Area(s) Offered	2016 HIOS Plan ID Mapping	Plan Category	Plan Specific Rate Change (excluding aging) ⁽¹⁾
		Exchange	Metal Level					
Anthem Bronze POS 6250	48396ME0800066	Off	Bronze	Pathway	04	48396ME0800037	New	14.8%
Anthem Silver POS 2900 for HSA	48396ME0800018	Off	Silver	Pathway	03	48396ME0800018	Renewing	13.4%
Anthem Silver POS 2900 for HSA	48396ME0800028	Off	Silver	Pathway	04	48396ME0800028	Renewing	15.7%
Anthem Silver POS 2250	48396ME0800060	Off	Silver	Pathway	03	48396ME0800060	Renewing	17.0%
Anthem Silver POS 2250	48396ME0800061	Off	Silver	Pathway	04	48396ME0800061	Renewing	19.4%
Anthem Silver POS 2800	48396ME0800020	Off	Silver	Pathway	03	48396ME0800020	Renewing	13.1%
Anthem Silver POS 2800	48396ME0800030	Off	Silver	Pathway	04	48396ME0800030	Renewing	15.4%
Anthem Silver POS 3850	48396ME0800019	Off	Silver	Pathway	03	48396ME0800019	Renewing	11.3%
Anthem Silver POS 3850	48396ME0800029	Off	Silver	Pathway	04	48396ME0800029	Renewing	13.6%
Anthem Silver Core POS 4650	48396ME0800063	Off	Silver	Pathway	03	None	New	0.0%
Anthem Silver Core POS 4650	48396ME0800064	Off	Silver	Pathway	04	None	New	0.0%
Anthem Gold POS 1000	48396ME0800022	Off	Gold	Pathway	03	48396ME0800022	Renewing	17.6%
Anthem Gold POS 1000	48396ME0800032	Off	Gold	Pathway	04	48396ME0800032	Renewing	20.0%
Anthem Blue Cross and Blue Shield Silver Guided Access, a Multi-State Plan	48396ME0930003	On	Silver	Pathway X Enhanced	1, 2, 3	48396ME0930003	Renewing	20.3%
Anthem Blue Cross and Blue Shield Gold Guided Access, a Multi-State Plan	48396ME0930004	On	Gold	Pathway X Enhanced	1, 2, 3	48396ME0930004	Renewing	19.0%
Anthem Blue Cross and Blue Shield Silver Guided Access, a Multi-State Plan	48396ME0940003	On	Silver	Pathway X	03	48396ME0940003	Renewing	13.2%
Anthem Blue Cross and Blue Shield Silver Guided Access, a Multi-State Plan	48396ME0940005	On	Silver	Pathway X	04	48396ME0940005	Renewing	15.5%
Anthem Blue Cross and Blue Shield Gold Guided Access, a Multi-State Plan	48396ME0940004	On	Gold	Pathway X	03	48396ME0940004	Renewing	17.7%
Anthem Blue Cross and Blue Shield Gold Guided Access, a Multi-State Plan	48396ME0940006	On	Gold	Pathway X	04	48396ME0940006	Renewing	20.1%
Anthem Maine Bronze POS 5000 for HSA	48396ME0970005	Off	Bronze	HMO Maine	1,2,3,4	None	New	0.0%
Anthem Maine Bronze POS 5000	48396ME0970006	Off	Bronze	HMO Maine	1,2,3,4	None	New	0.0%
Anthem Maine Bronze POS 6250	48396ME0970013	Off	Bronze	HMO Maine	1,2,3,4	None	New	0.0%
Anthem Maine Silver POS 3850	48396ME0970008	Off	Silver	HMO Maine	1,2,3,4	None	New	0.0%
Anthem Maine Silver POS 2900 for HSA	48396ME0970009	Off	Silver	HMO Maine	1,2,3,4	None	New	0.0%
Anthem Maine Silver POS 2800	48396ME0970010	Off	Silver	HMO Maine	1,2,3,4	None	New	0.0%
Anthem Maine Silver POS 2250	48396ME0970011	Off	Silver	HMO Maine	1,2,3,4	None	New	0.0%
Anthem Maine Gold POS 1000	48396ME0970012	Off	Gold	HMO Maine	1,2,3,4	None	New	0.0%

NOTES:

{1} Plan level increases in rates do not include demographic changes in the population.

Exhibit B - Claims Experience for Rate Developments

Anthem Health Plans of Maine, Inc.
Individual

Experience Rate Claims Experience
Incurred January 1, 2015 through December 31, 2015
Paid through May 31, 2016

PAID CLAIMS:										
Incurred and Paid Claims:		IBNR:		Fully Incurred Claims:			CSR	Total	Member	Total
Medical	Drug	Medical	Drug	Medical	Drug	Capitation	Receivable	Benefit Expense	Months	PMPM
\$45,528,043	\$9,034,231	\$337,393	\$3,341	\$45,865,436	\$9,037,572	\$3	-\$4,938,081	\$49,964,931	162,249	\$307.95

ALLOWED CLAIMS:										
Incurred and Paid Claims:		IBNR:		Fully Incurred Claims:			CSR	Total	Member	Total
Medical	Drug	Medical	Drug	Medical	Drug	Capitation	Receivable	Benefit Expense	Months	PMPM
\$56,770,827	\$11,101,250	\$405,526	\$4,034	\$57,176,353	\$11,105,284	\$3	N/A	\$68,281,640	162,249	\$420.85

Note

{1} The 'Experience Rate Claims Experience' above does not account for Transitional Plans or Rx Rebates; whereas, the claims shown in Worksheet 1, Section 1 of the URRRT include them.

{2} Drug Claims are processed by an external vendor.

Exhibit C - Market Adjusted Index Rate Development

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

	Experience Rate	
1) Starting Paid Claims PMPM	\$307.95	Exhibit B
2) x Seasonality Maturing Adjustment	1.0050	
3) x 2015 Risk Adjustment	1.0784	
4) = Mature Claims PMPM	\$333.75	= (1) x (2) x (3)
5) x Normalization Factor	1.0006	
6) = Normalized Claims	\$333.95	= (4) x (5)
7) x Benefit Changes	1.0020	
8) x Morbidity Changes	1.0000	
9) x Trend Factor	1.1997	
10) x Other Cost of Care Impacts	1.0105	
11) = Projected Paid Claim Cost	\$405.66	= (6) x (7) x (8) x (9) x (10)
12) Credibility Weight	100.00%	
13) Blended Paid Claims	\$405.66	
14) - Non-EHBs Embedded in Line Item 1) Above	\$0.00	
15) = Projected Paid Claims, Excluding ALL Non-EHBs	\$405.66	= (13) - (14)
16) + Rx Rebates	-\$8.04	
17) + Additional EHBs	\$0.85	
18) = Projected Paid Claims for EHBs	\$398.47	= (15) + (16) + (17)
19) ÷ Paid to Allowed Ratio	0.6598	
20) = Index Rate ^{2}	\$603.93	= (18) / (19)
21) Reinsurance Contribution	\$0.00	Exhibit D
22) Expected Reinsurance Payments	\$0.00	Exhibit D
23) Risk Adjustment Fee	\$0.13	Exhibit D
24) Risk Adjustment Net Transfer	\$0.00	Exhibit D
25) Marketplace User Fee	\$13.01	Exhibit E
26) = Market Adjusted Index Rate ^{3}	\$623.84	= (20)+[(21)+(22)+(23)+(24)+(25)] ÷ (19)

NOTE:

- {1} Factors above are detailed in subsequent exhibits
- {2} Index Rate is Projected Allowed Claims for EHBs only
- {3} The Market Adjusted Index Rate is the same for all plans in the single risk pool

Exhibit D - Risk Adjustment and Reinsurance - Contributions and Payments

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

<u>Risk Adjustment:</u>		
PMPM	User Fee ^{1}	Net Transfer ^{2}
Federal Program	\$0.13	\$0.00
<hr/>		
<u>Reinsurance:</u> ^{3}		
PMPM	Contributions Made	Expected Receipts
Federal Program	\$0.00	\$0.00
<hr/>		
Grand Total of All Risk Mitigation Programs		\$0.13

NOTES:

{1} For 2017, HHS established a per capita annual user fee rate of \$1.56 per year or \$0.13 per-enrollee-per-month.

{2} Projected risk adjustment transfer amount is explained in the Memorandum "Risk Adjustment and Reinsurance" Section.

{3} Federal Reinsurance Program is no longer applicable starting in 2017.

Exhibit E - Non-Benefit Expenses and Profit & Risk

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

	Expenses Applied As a PMPM Cost	Expenses Applied as a % of Premium ⁽¹⁾	Expenses Expressed as a PMPM ⁽⁴⁾
Administrative Expenses			
Administrative Costs	\$36.70		\$36.70
Quality Improvement Expense	\$6.89		\$6.89
Selling Expense	\$1.59		\$1.59
Specialty Expenses	\$0.27		\$0.27
Misc Admin (PMPM)	\$1.77		\$1.77
Total Administrative Expenses	\$47.22	0.00%	\$47.22
Taxes and Fees			
PCORI Fee	\$0.20		\$0.20
ACA Insurer Fee		0.00%	\$0.00
Marketplace User Fee		2.75%	\$13.01
MLR-Deductible Federal/State Income Taxes ⁽²⁾		1.32%	\$6.25
Total Taxes and Fees	\$0.20	4.07%	\$19.45
Profit and Risk Margin ⁽³⁾		1.68%	\$7.95
Total Non-Benefit Expenses, Profit, and Risk	\$47.42	5.75%	\$74.62

NOTES:

{1} The sum of the rounded percentages shown may not equal the total at the bottom of the table due to rounding.

{2} Includes only those income taxes which are deductible from the MLR denominator; in particular, Federal income taxes on investment income are excluded.

{3} Profit and Risk Margin shown here is post-tax profit, net of those federal and state income taxes which are deductible from the MLR denominator.

{4} Anthem's Non-Benefit Expenses are applied in both PMPM and % of Premium as shown above. The last column expresses all non-benefit Expenses in PMPM only.

Exhibit F - Federal MLR Estimated Calculation

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

Numerator:

Incurred Claims ^{1}	\$398.47	
+ Quality Improvement Expense	\$6.89	Exhibit E
+ Risk Corridor Contributions	\$0.00	
+ Risk Adjustment Net Transfer	\$0.00	Exhibit D
+ Reinsurance Receipts	\$0.00	Exhibit D
+ Risk Corridor Receipts	\$0.00	
+ Reduction to Rx Incurred Claims (ACA MLR)	-\$6.33	Footnote ^{3}
= <i>Estimated Federal MLR Numerator</i>	\$399.03	

Denominator:

Premiums ^{2}	\$473.22	Incurred Claims + Exhibit D (Total) + Exhibit E (Total)
- Federal and State Taxes	\$6.25	Exhibit E (Federal/State Income Taxes)
- Premium Taxes	\$0.00	Exhibit E (Premium Tax)
- Risk Adjustment User Fee	\$0.13	Exhibit D
- Reinsurance Contributions	\$0.00	Exhibit D
- Licensing and Regulatory Fees	\$13.21	Exhibit E (PCORI, ACA and Marketplace Fees)
= <i>Estimated Federal MLR Denominator</i>	\$453.63	

Estimated Federal MLR **87.96%**

NOTES:

{1} Incurred Claims = Projected Paid Claims for EHB (Exhibit C Line 18) + additional non EHBs

{2} Premiums = Incurred Claims in this exhibit + Risk Mitigation Programs in Exhibit D + Non-Benefit Expenses and Profit & Risk Margin in Exhibit E

{3} This is the amount of 2017 pharmacy claims that are attributable to PBM Administrative Expenses (i.e. the "retail spread" or "pharmacy claims margin"). It is calculated by applying the 3rd party margin percentage to the 2017 projected Pharmacy claims including projected rebates.

{4} The above calculation is purely an estimate and not meant to be compared to the minimum MLR benchmark for federal/state MLR rebate purposes:

- * The above calculation represents only the products in this filing. Federal MLR will be calculated at the legal entity and market level.
- * Not all numerator/denominator components are captured above (for example, fraud and prevention program costs, payroll taxes, assessments for state high risk pools etc.).
- * Other adjustments may also be applied within the federal MLR calculation such as 3-year averaging, new business, credibility, deductible and dual option. These are ignored in the above calculation.
- * Licensing and Regulatory Fees include ACA-related fees as allowed under the MLR Final Rule.

Exhibit G - Plan Adjusted Index Rate and Consumer Adjusted Premium Rates

**Anthem Health Plans of Maine, Inc.
Individual**

Rates Effective January 1, 2017

HIOS Plan Name	HIOS Plan ID	Market Adjusted Index Rate (Exhibit C)	Cost Sharing Adjustment	Provider Network Adjustment	Adjustment for Benefits in Addition to the			Plan Adjusted Index Rate ⁽³⁾	Calibration Factor ⁽⁴⁾	Consumer Adjusted Premium Rate ⁽⁵⁾
					EHBS	Catastrophic Plan Adjustment ⁽¹⁾	Administrative Costs ⁽²⁾			
Anthem Catastrophic X HMO 7150	48396ME0710016	\$623.84	0.5831	0.9701	1.0000	0.8169	\$43.10	\$331.37	1.6063	\$206.30
Anthem Bronze X HMO 5000 for HSA	48396ME0710020	\$623.84	0.6178	0.9701	1.0000	1.0000	\$55.85	\$429.78	1.6063	\$267.57
Anthem Bronze X HMO 5000	48396ME0710019	\$623.84	0.6101	0.9701	1.0000	1.0000	\$55.16	\$424.40	1.6063	\$264.22
Anthem Bronze X HMO 6250 for HSA	48396ME0710031	\$623.84	0.5973	0.9701	1.0000	1.0000	\$54.00	\$415.49	1.6063	\$258.67
Anthem Bronze X HMO 6250	48396ME0710034	\$623.84	0.5855	0.9701	1.0000	1.0000	\$52.94	\$407.31	1.6063	\$253.58
Anthem Silver X HMO 2900 for HSA	48396ME0710021	\$623.84	0.7034	0.9701	1.0000	1.0000	\$63.57	\$489.30	1.6063	\$304.63
Anthem Silver X HMO 2250	48396ME0710032	\$623.84	0.6933	0.9701	1.0000	1.0000	\$62.66	\$482.24	1.6063	\$300.22
Anthem Silver X HMO 3850	48396ME0710012	\$623.84	0.6736	0.9701	1.0000	1.0000	\$60.88	\$468.55	1.6063	\$291.71
Anthem Silver Core X HMO 4650	48396ME0710035	\$623.84	0.6603	0.9701	1.0000	1.0000	\$59.68	\$459.28	1.6063	\$285.93
Anthem Catastrophic X POS 7150	48396ME0720022	\$623.84	0.5831	1.0575	1.0000	0.8169	\$46.96	\$361.18	1.6063	\$224.86
Anthem Catastrophic X POS 7150	48396ME0720034	\$623.84	0.5831	1.0575	1.0000	0.8169	\$46.96	\$361.18	1.6063	\$224.86
Anthem Bronze X POS 5000 for HSA	48396ME0720018	\$623.84	0.6179	1.0575	1.0000	1.0000	\$60.87	\$468.47	1.6063	\$291.65
Anthem Bronze X POS 5000 for HSA	48396ME0720032	\$623.84	0.6179	1.0575	1.0000	1.0000	\$60.87	\$468.47	1.6063	\$291.65
Anthem Bronze X POS 6250 for HSA	48396ME0720035	\$623.84	0.5973	1.0575	1.0000	1.0000	\$58.85	\$452.90	1.6063	\$281.96
Anthem Bronze X POS 6250 for HSA	48396ME0720036	\$623.84	0.5973	1.0575	1.0000	1.0000	\$58.85	\$452.90	1.6063	\$281.96
Anthem Bronze X POS 5000	48396ME0720017	\$623.84	0.6101	1.0575	1.0000	1.0000	\$60.11	\$462.61	1.6063	\$288.00
Anthem Bronze X POS 5000	48396ME0720031	\$623.84	0.6101	1.0575	1.0000	1.0000	\$60.11	\$462.61	1.6063	\$288.00
Anthem Bronze X POS 6250	48396ME0720040	\$623.84	0.5856	1.0575	1.0000	1.0000	\$57.69	\$443.98	1.6063	\$276.41
Anthem Bronze X POS 6250	48396ME0720041	\$623.84	0.5856	1.0575	1.0000	1.0000	\$57.69	\$443.98	1.6063	\$276.41
Anthem Silver X POS 2900 for HSA	48396ME0720020	\$623.84	0.7035	1.0575	1.0000	1.0000	\$69.28	\$533.35	1.6063	\$332.05
Anthem Silver X POS 2900 for HSA	48396ME0720033	\$623.84	0.7035	1.0575	1.0000	1.0000	\$69.28	\$533.35	1.6063	\$332.05
Anthem Silver X POS 2250	48396ME0720037	\$623.84	0.6933	1.0575	1.0000	1.0000	\$68.28	\$525.65	1.6063	\$327.25
Anthem Silver X POS 2250	48396ME0720038	\$623.84	0.6933	1.0575	1.0000	1.0000	\$68.28	\$525.65	1.6063	\$327.25
Anthem Silver X POS 3850	48396ME0720013	\$623.84	0.6736	1.0575	1.0000	1.0000	\$66.35	\$510.73	1.6063	\$317.97
Anthem Silver X POS 3850	48396ME0720025	\$623.84	0.6736	1.0575	1.0000	1.0000	\$66.35	\$510.73	1.6063	\$317.97
Anthem Silver Core X POS 4650	48396ME0720044	\$623.84	0.6603	1.0575	1.0000	1.0000	\$65.04	\$500.63	1.6063	\$311.67
Anthem Silver Core X POS 4650	48396ME0720045	\$623.84	0.6603	1.0575	1.0000	1.0000	\$65.04	\$500.63	1.6063	\$311.67
Anthem Catastrophic HMO 7150	48396ME0790011	\$623.84	0.5844	0.9701	1.0000	0.8169	\$43.85	\$332.75	1.6063	\$207.16
Anthem Bronze HMO 5000 for HSA	48396ME0790016	\$623.84	0.6190	0.9701	1.0000	1.0000	\$56.64	\$431.26	1.6063	\$268.49
Anthem Bronze HMO 5000	48396ME0790015	\$623.84	0.6113	0.9701	1.0000	1.0000	\$55.94	\$425.88	1.6063	\$265.14
Anthem Bronze HMO 6250 for HSA	48396ME0790024	\$623.84	0.5982	0.9701	1.0000	1.0000	\$54.76	\$416.80	1.6063	\$259.49
Anthem Bronze HMO 6250	48396ME0790027	\$623.84	0.5864	0.9701	1.0000	1.0000	\$53.70	\$408.62	1.6063	\$254.39
Anthem Silver HMO 2900 for HSA	48396ME0790019	\$623.84	0.7053	0.9701	1.0000	1.0000	\$64.44	\$491.29	1.6063	\$305.86
Anthem Silver HMO 2250	48396ME0790025	\$623.84	0.6955	0.9701	1.0000	1.0000	\$63.56	\$484.49	1.6063	\$301.63
Anthem Silver HMO 2800	48396ME0790018	\$623.84	0.7217	0.9701	1.0000	1.0000	\$65.91	\$502.67	1.6063	\$312.94
Anthem Silver HMO 3850	48396ME0790017	\$623.84	0.6751	0.9701	1.0000	1.0000	\$61.70	\$470.25	1.6063	\$292.76
Anthem Silver Core HMO 4650	48396ME0790028	\$623.84	0.6615	0.9701	1.0000	1.0000	\$60.47	\$460.81	1.6063	\$286.89
Anthem Gold HMO 1000	48396ME0790023	\$623.84	0.9873	0.9701	1.0000	1.0000	\$89.90	\$687.44	1.6063	\$427.98
Anthem Catastrophic POS 7150	48396ME0800011	\$623.84	0.5844	1.0575	1.0000	0.8169	\$47.73	\$362.63	1.6063	\$225.76
Anthem Catastrophic POS 7150	48396ME0800038	\$623.84	0.5844	1.0575	1.0000	0.8169	\$47.73	\$362.63	1.6063	\$225.76
Anthem Bronze POS 5000 for HSA	48396ME0800017	\$623.84	0.6190	1.0575	1.0000	1.0000	\$61.66	\$470.02	1.6063	\$292.62
Anthem Bronze POS 5000 for HSA	48396ME0800027	\$623.84	0.6190	1.0575	1.0000	1.0000	\$61.66	\$470.02	1.6063	\$292.62
Anthem Bronze POS 6250 for HSA	48396ME0800058	\$623.84	0.5982	1.0575	1.0000	1.0000	\$59.61	\$454.26	1.6063	\$282.81
Anthem Bronze POS 6250 for HSA	48396ME0800059	\$623.84	0.5982	1.0575	1.0000	1.0000	\$59.61	\$454.26	1.6063	\$282.81
Anthem Bronze POS 5000	48396ME0800015	\$623.84	0.6113	1.0575	1.0000	1.0000	\$60.90	\$464.16	1.6063	\$288.97
Anthem Bronze POS 5000	48396ME0800025	\$623.84	0.6113	1.0575	1.0000	1.0000	\$60.90	\$464.16	1.6063	\$288.97
Anthem Bronze POS 6250	48396ME0800065	\$623.84	0.5865	1.0575	1.0000	1.0000	\$58.46	\$445.35	1.6063	\$277.26
Anthem Bronze POS 6250	48396ME0800066	\$623.84	0.5865	1.0575	1.0000	1.0000	\$58.46	\$445.35	1.6063	\$277.26
Anthem Silver POS 2900 for HSA	48396ME0800018	\$623.84	0.7053	1.0575	1.0000	1.0000	\$70.16	\$535.46	1.6063	\$333.36
Anthem Silver POS 2900 for HSA	48396ME0800028	\$623.84	0.7053	1.0575	1.0000	1.0000	\$70.16	\$535.46	1.6063	\$333.36
Anthem Silver POS 2250	48396ME0800060	\$623.84	0.6955	1.0575	1.0000	1.0000	\$69.21	\$528.04	1.6063	\$328.74
Anthem Silver POS 2250	48396ME0800061	\$623.84	0.6955	1.0575	1.0000	1.0000	\$69.21	\$528.04	1.6063	\$328.74
Anthem Silver POS 2800	48396ME0800020	\$623.84	0.7217	1.0575	1.0000	1.0000	\$71.77	\$547.85	1.6063	\$341.08

Exhibit G - Plan Adjusted Index Rate and Consumer Adjusted Premium Rates

**Anthem Health Plans of Maine, Inc.
Individual**

Rates Effective January 1, 2017

HIOS Plan Name	HIOS Plan ID	Market Adjusted Index Rate (Exhibit C)	Cost Sharing Adjustment	Provider Network Adjustment	Adjustment for Benefits in Addition to the EHBS	Catastrophic Plan Adjustment ⁽¹⁾	Administrative Costs ⁽²⁾	Plan Adjusted Index Rate ⁽³⁾	Calibration Factor ⁽⁴⁾	Consumer Adjusted Premium Rate ⁽⁵⁾
Anthem Silver POS 2800	48396ME0800030	\$623.84	0.7217	1.0575	1.0000	1.0000	\$71.77	\$547.85	1.6063	\$341.08
Anthem Silver POS 3850	48396ME0800019	\$623.84	0.6751	1.0575	1.0000	1.0000	\$67.18	\$512.52	1.6063	\$319.08
Anthem Silver POS 3850	48396ME0800029	\$623.84	0.6751	1.0575	1.0000	1.0000	\$67.18	\$512.52	1.6063	\$319.08
Anthem Silver Core POS 4650	48396ME0800063	\$623.84	0.6615	1.0575	1.0000	1.0000	\$65.84	\$502.23	1.6063	\$312.67
Anthem Silver Core POS 4650	48396ME0800064	\$623.84	0.6615	1.0575	1.0000	1.0000	\$65.84	\$502.23	1.6063	\$312.67
Anthem Gold POS 1000	48396ME0800022	\$623.84	0.9874	1.0575	1.0000	1.0000	\$97.92	\$749.25	1.6063	\$466.46
Anthem Gold POS 1000	48396ME0800032	\$623.84	0.9874	1.0575	1.0000	1.0000	\$97.92	\$749.25	1.6063	\$466.46
Anthem Blue Cross and Blue Shield Silver Guided Access, a Multi-State Plan	48396ME0930003	\$623.84	0.7197	0.9701	1.0000	1.0000	\$65.04	\$500.64	1.6063	\$311.68
Anthem Blue Cross and Blue Shield Gold Guided Access, a Multi-State Plan	48396ME0930004	\$623.84	0.9839	0.9701	1.0000	1.0000	\$88.86	\$684.31	1.6063	\$426.03
Anthem Blue Cross and Blue Shield Silver Guided Access, a Multi-State Plan	48396ME0940003	\$623.84	0.7198	1.0575	1.0000	1.0000	\$70.89	\$545.71	1.6063	\$339.74
Anthem Blue Cross and Blue Shield Silver Guided Access, a Multi-State Plan	48396ME0940005	\$623.84	0.7198	1.0575	1.0000	1.0000	\$70.89	\$545.71	1.6063	\$339.74
Anthem Blue Cross and Blue Shield Gold Guided Access, a Multi-State Plan	48396ME0940004	\$623.84	0.9839	1.0575	1.0000	1.0000	\$96.85	\$745.91	1.6063	\$464.38
Anthem Blue Cross and Blue Shield Gold Guided Access, a Multi-State Plan	48396ME0940006	\$623.84	0.9839	1.0575	1.0000	1.0000	\$96.85	\$745.91	1.6063	\$464.38
Anthem Maine Bronze POS 5000 for HSA	48396ME0970005	\$623.84	0.6190	1.0672	1.0000	1.0000	\$62.22	\$474.33	1.6063	\$295.30
Anthem Maine Bronze POS 5000	48396ME0970006	\$623.84	0.6113	1.0672	1.0000	1.0000	\$61.45	\$468.41	1.6063	\$291.62
Anthem Maine Bronze POS 6250	48396ME0970013	\$623.84	0.5865	1.0672	1.0000	1.0000	\$58.99	\$449.43	1.6063	\$279.80
Anthem Maine Silver POS 3850	48396ME0970008	\$623.84	0.6751	1.0672	1.0000	1.0000	\$67.79	\$517.22	1.6063	\$322.00
Anthem Maine Silver POS 2900 for HSA	48396ME0970009	\$623.84	0.7053	1.0672	1.0000	1.0000	\$70.80	\$540.36	1.6063	\$336.41
Anthem Maine Silver POS 2800	48396ME0970010	\$623.84	0.7217	1.0672	1.0000	1.0000	\$72.42	\$552.87	1.6063	\$344.20
Anthem Maine Silver POS 2250	48396ME0970011	\$623.84	0.6955	1.0672	1.0000	1.0000	\$69.84	\$532.88	1.6063	\$331.75
Anthem Maine Gold POS 1000	48396ME0970012	\$623.84	0.9874	1.0672	1.0000	1.0000	\$98.81	\$756.12	1.6063	\$470.73

Notes:

{1} This adjustment reflects the projected costs of the population eligible for catastrophic plans.

{2} This is an additive adjustment that includes all the selling expense, administration and retention items shown in Exhibit E, with the exception of the Marketplace user fee. The Marketplace user fee has been included in the Market Adjusted Index Rate at the market level.

{3} The Plan Adjusted Index Rate is calculated by multiplying the Market Adjusted Index Rate by the AV and cost sharing, provider network, benefits in addition to the EHBS, and catastrophic plan adjustments and then adding the administrative costs. The Plan Adjusted Index Rate can also be described as a Plan Level Required Premium.

{4} See Exhibit H - Calibration.

{5} The Consumer Adjusted Premium Rate is equal to 'Plan Adjusted Index Rate' divided by 'Calibration Factor'

Exhibit H - Calibration

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

<i>Average rating factors for 2017 population:</i>	
	Average Rating Factor
Tobacco	1.0077
Calibration Factors	
Age	1.6255
Area	0.9882
Total Calibration Factor{1}	1.6063
Total Average Rating Factor	1.6186

NOTES:

{1} Total Calibration factor was used in Exhibit G.

{2} Age calibration includes adjustments for membership that exceeds the three child dependent cap, as permitted by CMS per 2017 Part 3 Instructions.

Exhibit I - Age and Tobacco Factors

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

Age	Age Factors	Tobacco Factors
	2017	2017
0-17	0.635	1.000
18	0.635	1.000
19	0.635	1.000
20	0.635	1.000
21	1.000	1.000
22	1.000	1.000
23	1.000	1.000
24	1.000	1.000
25	1.004	1.000
26	1.024	1.000
27	1.048	1.000
28	1.087	1.000
29	1.119	1.000
30	1.135	1.050
31	1.159	1.050
32	1.183	1.050
33	1.198	1.050
34	1.214	1.050
35	1.222	1.100
36	1.230	1.100
37	1.238	1.100
38	1.246	1.100
39	1.262	1.100
40	1.278	1.250
41	1.302	1.250
42	1.325	1.250
43	1.357	1.250
44	1.397	1.250
45	1.444	1.400
46	1.500	1.400
47	1.563	1.400
48	1.635	1.400
49	1.706	1.400
50	1.786	1.490
51	1.865	1.490
52	1.952	1.490
53	2.040	1.490
54	2.135	1.490
55	2.230	1.490
56	2.333	1.490
57	2.437	1.490
58	2.548	1.490
59	2.603	1.490
60	2.714	1.490
61	2.810	1.490
62	2.873	1.490
63	2.952	1.490
64+	3.000	1.490

NOTES:

The weighted average of these factors for the entire risk pool included in this rate filing is provided in Exhibit H.

Exhibit J - Area Factors

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

Rating Area Description	2017 Area Rating Factor	2016 Area Rating Factor	Change
Rating Area 1	0.9149	0.8970	2.0%
Rating Area 2	0.9703	0.9703	0.0%
Rating Area 3	1.0211	1.0419	-2.0%
Rating Area 4	1.2880	1.2880	0.0%

NOTES:

{1} The weighted average of these factors for the entire risk pool included in this rate filing is provided in Exhibit H.

Exhibit K - Sample Rate Calculation

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

Name: John Doe
Effective Date: 1/1/2017
On/Off Exchange: On
Metal Level: Silver
Plan ID: 48396ME0710021
Rating Area: 01

Family Members Covered:

	<u>Age</u>	<u>Smoker?</u>
Subscriber	47	N
Spouse	42	N
Child (age 21+)	25	Y
Child #1	20	N
Child #2	16	N

Calculation of Monthly Premium:

Consumer Adjusted Premium Rate	\$304.63	Exhibit G
<u>x Area Factor</u>	<u>0.9149</u>	Exhibit J
Rate Adjusted for Area =	\$278.71	

Age/Tobacco Factors:

	<u>Age Factor</u>	<u>Tobacco Factor</u>
Subscriber	1.563	1.000
Spouse	1.325	1.000
Child (age 21+)	1.004	1.000
Child #1	0.635	1.000
Child #2	0.635	1.000

Exhibit I

Final Monthly Premium PMPM:

	<u>PMPM</u>
Subscriber	\$435.62
Spouse	\$369.29
Child (age 21+)	\$279.82
Child #1	\$176.98
Child #2	\$176.98
TOTAL	\$1,438.69

NOTES:

As per the Market Reform Rule, when computing family premiums no more than the three oldest covered children under the age of 21 are taken into account whereas the premiums associated with each child age 21+ are included.

Minor rate variances may occur due to differences in rounding methodology.

Exhibit L - Membership Projections for Cost-Sharing Reductions

Anthem Health Plans of Maine, Inc. Individual

Rates Effective January 1, 2017

Silver Plan	Projected Membership by Subsidy Level:			
	<u>HIOS Standard Component Plan ID</u>	<u>100-150%</u>	<u>150%-200%</u>	<u>200%-250%</u>
48396ME0710021	368	306	148	340
48396ME0710032	428	356	172	395
48396ME0710012	415	345	167	383
48396ME0710035	1,459	1,212	586	1,345
48396ME0720020	56	46	22	52
48396ME0720033	42	35	17	40
48396ME0720037	58	49	23	54
48396ME0720038	52	43	21	49
48396ME0720013	50	41	20	46
48396ME0720025	120	99	48	111
48396ME0720044	245	203	98	225
48396ME0720045	197	163	79	181
48396ME0790019	0	0	0	99
48396ME0790025	0	0	0	161
48396ME0790018	0	0	0	74
48396ME0790017	0	0	0	134
48396ME0790028	0	0	0	131
48396ME0800018	0	0	0	2
48396ME0800028	0	0	0	10
48396ME0800060	0	0	0	28
48396ME0800061	0	0	0	10
48396ME0800020	0	0	0	15
48396ME0800030	0	0	0	10
48396ME0800019	0	0	0	5
48396ME0800029	0	0	0	5
48396ME0800063	0	0	0	71
48396ME0800064	0	0	0	71
48396ME0930003	39	32	16	36
48396ME0940003	15	12	6	14
48396ME0940005	15	12	6	14
48396ME0970008	0	0	0	428
48396ME0970009	0	0	0	428
48396ME0970010	0	0	0	428
48396ME0970011	0	0	0	428

Exhibit M - Terminated Plans

**Anthem Health Plans of Maine, Inc.
Individual**

Effective January 1, 2017

Following are the plans that will be terminated prior to the effective date:

This includes plans that have experience included in the URRP during the experience period and any plans that were not in effect during the experience period but were made available thereafter.

Pre ACA Terminated Plans				
Plan ID	Plan Name	HIOS Product ID	HIOS Product Name	2017 Mapped HIOS Plan ID
AB36I	HealthChoice	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB35Y	HealthChoice Standard	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB37N	HealthChoice	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB37L	HealthChoice	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB37X	HealthChoice Basic	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB364	HealthChoice Standard	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB37B	HealthChoice	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB35U	HealthChoice Basic	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB35W	HealthChoice Standard	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB36Z	HealthChoice	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB37P	HealthChoice Plan A	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB373	HealthChoice Plan B	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB35Q	HMO Individual Standard	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB44K	HealthChoice Basic	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB360	HealthChoice Standard	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB3A2	HealthChoice	4839GME097	Anthem Maine Silver POS 22	4839GME0970011
AB376	HealthChoice	4839GME097	Anthem Maine Silver POS 28	4839GME0970010
AB379	HealthChoice	4839GME097	Anthem Maine Silver POS 28	4839GME0970010
AB366	HealthChoice HDHP	4839GME097	Anthem Maine Silver POS 29	4839GME0970009
AB366	HealthChoice HDHP	4839GME097	Anthem Maine Silver POS 29	4839GME0970009
AB37R	Lumenos HSA	4839GME097	Anthem Maine Silver POS 29	4839GME0970009
AB37D	HealthChoice	4839GME097	Anthem Maine Silver POS 38	4839GME0970008
AB37F	HealthChoice	4839GME097	Anthem Maine Bronze POS †	4839GME0970006
AB37H	HealthChoice	4839GME097	Anthem Maine Bronze POS †	4839GME0970006
AB36E	Lumenos HIA Plus	4839GME097	Anthem Maine Bronze POS †	4839GME0970005
AB37Z	Lumenos HIA Plus	4839GME097	Anthem Maine Bronze POS †	4839GME0970005
AB37V	Lumenos HSA	4839GME097	Anthem Maine Bronze POS †	4839GME0970005
AB3DI	Lumenos HIA	4839GME097	Anthem Maine Bronze POS †	4839GME0970005
AB36C	HealthChoice HDHP	4839GME097	Anthem Maine Bronze POS †	4839GME0970005
AB36C	HealthChoice HDHP	4839GME097	Anthem Maine Bronze POS †	4839GME0970005
AB36V	HealthChoice	4839GME097	Anthem Maine Bronze POS †	4839GME0970013
AB36X	HealthChoice	4839GME097	Anthem Maine Bronze POS †	4839GME0970013
AB36K	HealthChoice	4839GME097	Anthem Maine Bronze POS †	4839GME0970013
AB36O	HealthChoice	4839GME097	Anthem Maine Bronze POS †	4839GME0970013
18090	HealthChoice Standard	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB37X	HealthChoice Basic	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB35W	HealthChoice Standard	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB35Q	HMO Individual Standard	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB44K	HealthChoice Basic	4839GME097	Anthem Maine Gold POS 10	4839GME0970012
AB3M2	HealthChoice Plus	4839GME097	Anthem Maine Silver POS 22	4839GME0970011
AB3MY	HealthChoice	4839GME097	Anthem Maine Silver POS 28	4839GME0970010
AB44N	HealthChoice	4839GME097	Anthem Maine Silver POS 28	4839GME0970010
AB45H	HealthChoice HDHP	4839GME097	Anthem Maine Silver POS 29	4839GME0970009
AB3DE	Lumenos HSA	4839GME097	Anthem Maine Silver POS 29	4839GME0970009
AB3M4	HealthChoice Plus	4839GME097	Anthem Maine Silver POS 38	4839GME0970008
AB3M0	HealthChoice	4839GME097	Anthem Maine Bronze POS †	4839GME0970006
AB3MA	HealthChoice Plus	4839GME097	Anthem Maine Bronze POS †	4839GME0970006
AB3DG	Lumenos HSA	4839GME097	Anthem Maine Bronze POS †	4839GME0970005
AB3DO	Lumenos HSA	4839GME097	Anthem Maine Bronze POS †	4839GME0970005
AB45Q	HealthChoice HDHP	4839GME097	Anthem Maine Bronze POS †	4839GME0970005
AB3N4	HealthChoice	4839GME097	Anthem Maine Bronze POS †	4839GME0970013
AB3ME	HealthChoice Plus	4839GME097	Anthem Maine Bronze POS †	4839GME0970013
AB3N0	HealthChoice	4839GME097	Anthem Maine Bronze POS †	4839GME0970013
AB3MC	HealthChoice Plus	4839GME097	Anthem Maine Bronze POS †	4839GME0970013
Post ACA Terminated Plans				
Plan ID	Plan Name	HIOS Product ID	HIOS Product Name	2017 Mapped HIOS Plan ID
4839GME0710011	Anthem Bronze X HMO 5000/35%	4839GME071	HMO	4839GME0710034
4839GME0710013	Anthem Silver X HMO 1800/30%	4839GME071	HMO	4839GME0710032
4839GME0710014	Anthem Silver X HMO 1500/30%	4839GME071	HMO	4839GME0710032
4839GME0710015	Anthem Gold X HMO 1000/10%	4839GME071	HMO	4839GME0930004
4839GME0710017	Anthem Bronze X HMO 0% for HSA	4839GME071	HMO	4839GME0710031
4839GME0710018	Anthem Bronze X HMO 5750/10%	4839GME071	HMO	4839GME0710034
4839GME0720011	Anthem Bronze X POS 5500/20%	4839GME072	POS	4839GME0720040
4839GME0720012	Anthem Bronze X POS 4200/40%	4839GME072	POS	4839GME0720017
4839GME0720014	Anthem Silver X POS 1800/20%	4839GME072	POS	4839GME0720037
4839GME0720015	Anthem Bronze X POS 6000/0%	4839GME072	POS	4839GME0720040
4839GME0720016	Anthem Bronze X POS 0% for HSA	4839GME072	POS	4839GME0720035
4839GME0720023	Anthem Bronze X POS 5500/20%	4839GME072	POS	4839GME0720041
4839GME0720024	Anthem Bronze X POS 4200/40%	4839GME072	POS	4839GME0720031
4839GME0720026	Anthem Silver X POS 1800/20%	4839GME072	POS	4839GME0720038
4839GME0720027	Anthem Bronze X POS 6000/0%	4839GME072	POS	4839GME0720041
4839GME0720028	Anthem Gold X POS 750/20%	4839GME072	POS	4839GME0940004
4839GME0720029	Anthem Gold X POS 750/20%	4839GME072	POS	4839GME0940006
4839GME0720030	Anthem Bronze X POS 0% for HSA	4839GME072	POS	4839GME0720036
4839GME0790012	Anthem Bronze HMO 0% for HSA	4839GME079	HMO	4839GME0790024
4839GME0790013	Anthem Bronze HMO 5750/10%	4839GME079	HMO	4839GME0790027
4839GME0790014	Anthem Bronze HMO 5000/35%	4839GME079	HMO	4839GME0790027
4839GME0790020	Anthem Silver HMO 1800/30%	4839GME079	HMO	4839GME0790025
4839GME0790021	Anthem Silver HMO 1500/30%	4839GME079	HMO	4839GME0790025
4839GME0790022	Anthem Gold HMO 1000/10%	4839GME079	HMO	4839GME0790023
4839GME0800012	Anthem Bronze POS 6000/0%	4839GME080	POS	4839GME0800065
4839GME0800013	Anthem Bronze POS 0% for HSA	4839GME080	POS	4839GME0800058
4839GME0800014	Anthem Bronze POS 5500/20%	4839GME080	POS	4839GME0800065
4839GME0800016	Anthem Bronze POS 4200/40%	4839GME080	POS	4839GME0800015
4839GME0800021	Anthem Silver POS 1800/20%	4839GME080	POS	4839GME0800060
4839GME0800023	Anthem Gold POS 750/20%	4839GME080	POS	4839GME0800022
4839GME0800024	Anthem Bronze POS 5500/20%	4839GME080	POS	4839GME0800066
4839GME0800026	Anthem Bronze POS 4200/40%	4839GME080	POS	4839GME0800025
4839GME0800031	Anthem Silver POS 1800/20%	4839GME080	POS	4839GME0800061
4839GME0800033	Anthem Gold POS 750/20%	4839GME080	POS	4839GME0800032
4839GME0800037	Anthem Bronze POS 6000/0%	4839GME080	POS	4839GME0800066
4839GME0800039	Anthem Bronze POS 0% for HSA	4839GME080	POS	4839GME0800059

Exhibit N - On-Exchange Benefit Descriptions

Anthem Health Plans of Maine, Inc.
Individual

Effective January 1, 2017

HIOS Standard Component Plan ID	Product Name	sales (Y/N)	Deductible	Coinsurance	OOP Max	Co pay	Rx Benefits	Actuarial Value
48396ME0720013	Anthem Silver X POS 3850	Yes	\$3,850	30%	\$7,000	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6803
48396ME0720017	Anthem Bronze X POS 5000	Yes	\$5,000	35%	\$7,150	\$40 for 1st 3 then Ded+35%	\$30/\$50/Ded+35%/Ded+40%/Ded+50%	0.6100
48396ME0720018	Anthem Bronze X POS 5000 for HSA	Yes	\$5,000	35%	\$6,550	Ded+35%	\$50/\$50/Ded+35%/Ded+40%/Ded+50%	0.6187
48396ME0720020	Anthem Silver X POS 2900 for HSA	Yes	\$2,900	15%	\$6,550	Ded+15%	\$50/\$50/Ded+15%/Ded+40%/Ded+50%	0.6810
48396ME0720022	Anthem Catastrophic X POS 7150	Yes	\$7,150	0%	\$7,150	\$40 for 1st 3 then Ded+0%	\$50/\$50/Ded+0%/Ded+0%/Ded+0%	0.6138
48396ME0720025	Anthem Silver X POS 3850	Yes	\$3,850	30%	\$7,000	Ded+50%	\$10/\$50/Ded+40%/Ded+50%	0.6803
48396ME0720031	Anthem Bronze X POS 5000	Yes	\$5,000	35%	\$7,150	\$40 for 1st 3 then Ded+35%	\$30/\$50/Ded+35%/Ded+40%/Ded+50%	0.6100
48396ME0720032	Anthem Bronze X POS 5000 for HSA	Yes	\$5,000	35%	\$6,550	Ded+35%	\$50/\$50/Ded+35%/Ded+40%/Ded+50%	0.6187
48396ME0720033	Anthem Silver X POS 2900 for HSA	Yes	\$2,900	15%	\$6,550	Ded+15%	\$50/\$50/Ded+15%/Ded+40%/Ded+50%	0.6810
48396ME0720034	Anthem Catastrophic X POS 7150	Yes	\$7,150	0%	\$7,150	\$40 for 1st 3 then Ded+0%	\$50/\$50/Ded+0%/Ded+0%/Ded+0%	0.6138
48396ME0720035	Anthem Bronze X POS 6250 for HSA	Yes	\$6,250	50%	\$6,550	Ded+50%	\$50/\$50/Ded+50%/Ded+50%/Ded+50%	0.6114
48396ME0720036	Anthem Bronze X POS 6250 for HSA	Yes	\$6,250	50%	\$6,550	Ded+50%	\$50/\$50/Ded+50%/Ded+50%/Ded+50%	0.6114
48396ME0720037	Anthem Silver X POS 2250	Yes	\$2,250	50%	\$6,500	\$20	\$10/\$50/Ded+50%/Ded+50%/Ded+50%	0.6804
48396ME0720038	Anthem Silver X POS 2250	Yes	\$2,250	50%	\$6,500	\$20	\$10/\$50/Ded+50%/Ded+50%/Ded+50%	0.6804
48396ME0720040	Anthem Bronze X POS 6250	Yes	\$6,250	50%	\$7,150	Ded+50%	\$50/\$50/Ded+50%/Ded+50%/Ded+50%	0.5949
48396ME0720041	Anthem Bronze X POS 6250	Yes	\$6,250	50%	\$7,150	Ded+50%	\$50/\$50/Ded+50%/Ded+50%/Ded+50%	0.5949
48396ME0720044	Anthem Silver Core X POS 4650	Yes	\$4,650	25%	\$6,750	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6802
48396ME0720045	Anthem Silver Core X POS 4650	Yes	\$4,650	25%	\$6,750	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6802
48396ME0940003	Anthem Blue Cross and Blue Shield Silver Guided Access, a Multi-State Plan	Yes	\$2,800	25%	\$6,950	\$40	\$10/\$50/Ded+40%/Ded+50%	0.7036
48396ME0940004	Anthem Blue Cross and Blue Shield Gold Guided Access, a Multi-State Plan	Yes	\$1,000	20%	\$6,050	\$20	\$10/\$50/Ded+40%/Ded+50%	0.7804
48396ME0940005	Anthem Blue Cross and Blue Shield Silver Guided Access, a Multi-State Plan	Yes	\$2,800	25%	\$6,950	\$40	\$10/\$50/Ded+40%/Ded+50%	0.7036
48396ME0940006	Anthem Blue Cross and Blue Shield Gold Guided Access, a Multi-State Plan	Yes	\$1,000	20%	\$6,050	\$20	\$10/\$50/Ded+40%/Ded+50%	0.7804
48396ME0710012	Anthem Silver X HMO 3850	Yes	\$3,850	30%	\$7,000	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6803
48396ME0710016	Anthem Catastrophic X HMO 7150	Yes	\$7,150	0%	\$7,150	\$40 for 1st 3 then Ded+0%	\$50/\$50/Ded+0%/Ded+0%/Ded+0%	0.6138
48396ME0710019	Anthem Bronze X HMO 5000	Yes	\$5,000	35%	\$7,150	\$40 for 1st 3 then Ded+35%	\$30/\$50/Ded+35%/Ded+40%/Ded+50%	0.6100
48396ME0710020	Anthem Bronze X HMO 5000 for HSA	Yes	\$5,000	35%	\$6,550	Ded+35%	\$50/\$50/Ded+35%/Ded+40%/Ded+50%	0.6187
48396ME0710021	Anthem Silver X HMO 2900 for HSA	Yes	\$2,900	15%	\$6,550	Ded+15%	\$50/\$50/Ded+15%/Ded+40%/Ded+50%	0.6810
48396ME0710031	Anthem Bronze X HMO 6250 for HSA	Yes	\$6,250	50%	\$6,550	Ded+50%	\$50/\$50/Ded+50%/Ded+50%/Ded+50%	0.6114
48396ME0710032	Anthem Silver X HMO 2250	Yes	\$2,250	50%	\$6,500	\$20	\$10/\$50/Ded+50%/Ded+50%/Ded+50%	0.6804
48396ME0710034	Anthem Bronze X HMO 6250	Yes	\$6,250	50%	\$7,150	Ded+50%	\$50/\$50/Ded+50%/Ded+50%/Ded+50%	0.5949
48396ME0710035	Anthem Silver Core X HMO 4650	Yes	\$4,650	25%	\$6,750	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6802
48396ME0930003	Anthem Blue Cross and Blue Shield Silver Guided Access, a Multi-State Plan	Yes	\$2,800	25%	\$6,950	\$40	\$10/\$50/Ded+40%/Ded+50%	0.7036
48396ME0930004	Anthem Blue Cross and Blue Shield Gold Guided Access, a Multi-State Plan	Yes	\$1,000	20%	\$6,050	\$20	\$10/\$50/Ded+40%/Ded+50%	0.7804

Exhibit O - Off Exchange Benefit Description

Anthem Health Plans of Maine, Inc.
Individual

Effective January 1, 2017

HIOS Standard Component Plan ID	Product Name	sales (Y/N)	Deductible	Coinsurance	OOP Max	Co pay	Rx Benefits	Actuarial Value
48396ME0800011	Anthem Catastrophic POS 7150	Yes	\$7,150	0%	\$7,150	\$40 for 1st 3 then Ded+0%	Ded+0%/Ded+0%/Ded+0%/Ded+0%	0.6138
48396ME0800015	Anthem Bronze POS 5000	Yes	\$5,000	35%	\$7,150	\$40 for 1st 3 then Ded+35%	\$30/Ded+35%/Ded+40%/Ded+50%	0.6100
48396ME0800017	Anthem Bronze POS 5000 for HSA	Yes	\$5,000	35%	\$6,550	Ded+35%	Ded+35%/Ded+35%/Ded+40%/Ded+50%	0.6187
48396ME0800018	Anthem Silver POS 2900 for HSA	Yes	\$2,900	15%	\$6,550	Ded+15%	Ded+15%/Ded+15%/Ded+40%/Ded+50%	0.6810
48396ME0800019	Anthem Silver POS 3850	Yes	\$3,850	30%	\$7,000	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6803
48396ME0800020	Anthem Silver POS 2800	Yes	\$2,800	25%	\$6,950	\$40	\$10/\$50/Ded+40%/Ded+50%	0.7036
48396ME0800022	Anthem Gold POS 1000	Yes	\$1,000	20%	\$6,050	\$20	\$10/\$50/Ded+40%/Ded+50%	0.7804
48396ME0800025	Anthem Bronze POS 5000	Yes	\$5,000	35%	\$7,150	\$40 for 1st 3 then Ded+35%	\$30/Ded+35%/Ded+40%/Ded+50%	0.6100
48396ME0800027	Anthem Bronze POS 5000 for HSA	Yes	\$5,000	35%	\$6,550	Ded+35%	Ded+35%/Ded+35%/Ded+40%/Ded+50%	0.6187
48396ME0800028	Anthem Silver POS 2900 for HSA	Yes	\$2,900	15%	\$6,550	Ded+15%	Ded+15%/Ded+15%/Ded+40%/Ded+50%	0.6810
48396ME0800029	Anthem Silver POS 3850	Yes	\$3,850	30%	\$7,000	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6803
48396ME0800030	Anthem Silver POS 2800	Yes	\$2,800	25%	\$6,950	\$40	\$10/\$50/Ded+40%/Ded+50%	0.7036
48396ME0800032	Anthem Gold POS 1000	Yes	\$1,000	20%	\$6,050	\$20	\$10/\$50/Ded+40%/Ded+50%	0.7804
48396ME0800038	Anthem Catastrophic POS 7150	Yes	\$7,150	0%	\$7,150	\$40 for 1st 3 then Ded+0%	Ded+0%/Ded+0%/Ded+0%/Ded+0%	0.6138
48396ME0800058	Anthem Bronze POS 6250 for HSA	Yes	\$6,250	50%	\$6,550	Ded+50%	Ded+50%/Ded+50%/Ded+50%/Ded+50%	0.6114
48396ME0800059	Anthem Bronze POS 6250 for HSA	Yes	\$6,250	50%	\$6,550	Ded+50%	Ded+50%/Ded+50%/Ded+50%/Ded+50%	0.6114
48396ME0800060	Anthem Silver POS 2250	Yes	\$2,250	50%	\$6,500	\$20	\$10/Ded+50%/Ded+50%/Ded+50%	0.6804
48396ME0800061	Anthem Silver POS 2250	Yes	\$2,250	50%	\$6,500	\$20	\$10/Ded+50%/Ded+50%/Ded+50%	0.6804
48396ME0800063	Anthem Silver Core POS 4650	Yes	\$4,650	25%	\$6,750	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6802
48396ME0800064	Anthem Silver Core POS 4650	Yes	\$4,650	25%	\$6,750	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6802
48396ME0800065	Anthem Bronze POS 6250	Yes	\$6,250	50%	\$7,150	Ded+50%	Ded+50%/Ded+50%/Ded+50%/Ded+50%	0.5949
48396ME0800066	Anthem Bronze POS 6250	Yes	\$6,250	50%	\$7,150	Ded+50%	Ded+50%/Ded+50%/Ded+50%/Ded+50%	0.5949
48396ME0790016	Anthem Bronze HMO 5000 for HSA	Yes	\$5,000	35%	\$6,550	Ded+35%	Ded+35%/Ded+35%/Ded+40%/Ded+50%	0.6187
48396ME0790015	Anthem Bronze HMO 5000	Yes	\$5,000	35%	\$7,150	\$40 for 1st 3 then Ded+35%	\$0/Ded+35%/Ded+40%/Ded+50%	0.6100
48396ME0790024	Anthem Bronze HMO 6250 for HSA	Yes	\$6,250	50%	\$6,550	Ded+50%	Ded+50%/Ded+50%/Ded+50%/Ded+50%	0.6114
48396ME0790011	Anthem Catastrophic HMO 7150	Yes	\$7,150	0%	\$7,150	\$40 for 1st 3 then Ded+0%	Ded+0%/Ded+0%/Ded+0%/Ded+0%	0.6138
48396ME0790023	Anthem Gold HMO 1000	Yes	\$1,000	20%	\$6,050	\$20	\$10/\$50/Ded+40%/Ded+50%	0.7804
48396ME0790019	Anthem Silver HMO 2900 for HSA	Yes	\$2,900	15%	\$6,550	Ded+15%	Ded+15%/Ded+15%/Ded+40%/Ded+50%	0.6810
48396ME0790025	Anthem Silver HMO 2250	Yes	\$2,250	50%	\$6,500	\$20	\$10/Ded+50%/Ded+50%/Ded+50%	0.6804
48396ME0790018	Anthem Silver HMO 2800	Yes	\$2,800	25%	\$6,950	\$40	\$10/\$50/Ded+40%/Ded+50%	0.7036
48396ME0790017	Anthem Silver HMO 3850	Yes	\$3,850	30%	\$7,000	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6803
48396ME0790027	Anthem Bronze HMO 6250	Yes	\$6,250	50%	\$7,150	Ded+50%	Ded+50%/Ded+50%/Ded+50%/Ded+50%	0.5949
48396ME0790028	Anthem Silver Core HMO 4650	Yes	\$4,650	25%	\$6,750	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6802
48396ME0970005	Anthem Maine Bronze POS 5000 for HSA	Yes	\$5,000	35%	\$6,550	Ded+35%	Ded+35%/Ded+35%/Ded+40%/Ded+50%	0.6187
48396ME0970006	Anthem Maine Bronze POS 5000	Yes	\$5,000	35%	\$7,150	Ded+35%	\$30/Ded+35%/Ded+40%/Ded+50%	0.6100
48396ME0970008	Anthem Maine Silver POS 3850	Yes	\$3,850	30%	\$7,000	\$35	\$10/\$50/Ded+40%/Ded+50%	0.6803
48396ME0970009	Anthem Maine Silver POS 2900 for HSA	Yes	\$2,900	15%	\$6,550	Ded+15%	Ded+15%/Ded+15%/Ded+40%/Ded+50%	0.6810
48396ME0970010	Anthem Maine Silver POS 2800	Yes	\$2,800	25%	\$6,950	\$40	\$10/\$50/Ded+40%/Ded+50%	0.7036
48396ME0970011	Anthem Maine Silver POS 2250	Yes	\$2,250	50%	\$6,500	\$20	\$10/Ded+50%/Ded+50%/Ded+50%	0.6804
48396ME0970012	Anthem Maine Gold POS 1000	Yes	\$1,000	20%	\$6,050	\$20	\$10/\$50/Ded+40%/Ded+50%	0.7804
48396ME0970013	Anthem Maine Bronze POS 6250	Yes	\$6,250	50%	\$7,150	Ded+50%	Ded+50%/Ded+50%/Ded+50%/Ded+50%	0.5949