



STATE OF INDIANA

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IDOI

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August 6, 2013

Stephen W. Robertson, Commissioner

Dear Fellow Hoosier,

Attached is a report from the Indiana Department of Insurance ("IDOI") that discusses the upcoming changes to the Indiana individual health insurance market as the Patient Protection and Affordable Care Act ("ACA") is implemented in 2014. Currently, there are approximately 178,000 Hoosiers participating in the Indiana individual health insurance market. Because of ACA, an estimated 300,000 or more Hoosiers could enter the individual health insurance market after 2013.

To be eligible for the federal tax subsidies to offset premium costs paid to health insurance carriers, you *must* purchase your insurance product through the federally facilitated marketplace ("FFM"). If you are not eligible for this subsidy, you may continue to purchase non-FFM insurance policies just like you purchase your individual health insurance policy today but may choose to purchase it through the FFM as well. If you currently receive your healthcare coverage through your employer, this information analysis does not apply to your situation as long as your employer continues to provide coverage as provided for in the ACA.

Even with the implementation of the ACA, the IDOI will continue to regulate all health insurance products sold in the State of Indiana and we will always strive to meet that responsibility in the best interests of all Indiana citizens. Because the federal government will operate and manage the FFM in Indiana, the IDOI will not be able to assist you with the technical parts of the enrollment process on the federal web portal. Please know, however, that we will continue to execute all of those regulatory and consumer protection functions, including complaints against your insurance company, assigned to the IDOI by State law for over two decades.

Sincerely,

Stephen W. Robertson
Commissioner of Insurance

The Indiana Department of Insurance ("IDOI") is pleased to release this document for Hoosiers to reference for more details about the individual health insurance options that will be available on the federally-facilitated marketplace ("Marketplace") that is scheduled to begin open enrollment for the 2014 plan year on October 1, 2013. The goal of presenting this information is to provide Hoosiers with additional details on:

- Premium changes in the individual health insurance market from present rates to those offered by health insurers on the federally-facilitated marketplace in 2014;
- The reasons why health insurance rates are changing, in aggregate, and for specific segments of the population; and,
- The effect of the premium tax credit subsidy on out-of-pocket premiums by household income level.

Premium rate changes

Indiana individual health insurance market rating laws currently allow insurers to develop premiums based on age (with an unlimited ratio between young and old), gender, and health status. Further, current rating laws allow insurers to decline coverage to individuals, as well as exclude certain benefits from coverage including maternity and pharmacy services.

The ACA will eliminate rating by health status (i.e., healthy and sick individuals will pay the same rates with healthy individuals subsidizing the rates of sick individuals) and gender (i.e., males and females will pay the same rates with males subsidizing the rates of females), and limit age rating to a 3:1 ratio (i.e., younger population will subsidize the rates of the older population). The ACA also provides that all individuals are guaranteed and may not be declined for health insurance coverage. Finally, the ACA requires essential health benefits, which provides a minimum standard set of benefits.

Detailed information on the number of Hoosiers currently enrolled in specific insurance products and plan designs, as well as associated age, gender, and health status are not publicly available. Therefore, to present sample rates for current individual health insurance market premiums, we have pulled current rates from two sources for the Indianapolis metropolitan area as representative examples:

- **Ehealthinsurance.com**, a website offering individual and family health insurance quotes. We have assumed the rates illustrated on ehealthinsurance.com represent the 'preferred' or best rates that an insurer would offer to a healthy individual or someone in 'excellent' health status. Rates sampled were from Anthem, which has more than 60% market share in the current individual market based on 2012 supplemental health care experience report filings.
- **Indiana Comprehensive Health Insurance Association (ICHIA)**, the high risk pool that is operated by the State of Indiana for Hoosiers who do not currently have access to public coverage, employer sponsored coverage, and are declined coverage by insurers participating in the individual market. We assumed these rates are reflective of an individual in 'poor' health status.

We have illustrated sample premium rates for members and health plans that are similar in design (in terms of deductibles, co-insurance, out-of-pocket maximums) to those that will be offered in the individual health insurance market through the federally-facilitated marketplace in 2014. However, it should be noted that current market plans typically do not cover maternity services and sometimes do not cover mental health and substance abuse services, pharmacy, or other benefits typically covered by employer-sponsored health plans.

In 2014, all individual market plans will be required to offer what is known as the 'essential health benefit package'. Essential health benefits reflect what is covered under most employer sponsored health plans.

Therefore, 2014 individual market plans will cover maternity services, pharmacy, and other benefits that may be excluded from current individual market plans.

It should be noted that the sample plan designs and premiums pulled from ehealthinsurance.com are for illustrative purposes only, and may not be reflective of the price or plan design purchased by a specific Hoosier household. The Ehealthinsurance premiums reflect an August 1, 2013 effective date. The ICHIA premiums reflect an October 1, 2012 effective date.

Figures 1 and 2 illustrate current and 2014 filed premium rates for a 25 and 55 year old single individuals for bronze and silver level plan designs for individuals in excellent and poor health status, respectively. Premium rates for additional ages, family types, plan designs, and a description of the plan designs are available in the Appendix. Please note that the (parenthesis) surrounding a number indicate a negative number or decrease in this case.

Figure 1

Sample Premium Rate Changes – Excellent Health Status

Age / Gender / Family	Health Status	Current Lumenos HSA Plus \$5,500	2014 Lowest Cost Bronze	Rate Change	Current Lumenos HSA Plus \$3,500	2014 Lowest Cost Silver	Rate Change
25 Year Old Single Male	Excellent	\$ 82	\$ 212	157.9%	\$ 108	\$ 266	145.7%
25 Year Old Single Female	Excellent	\$ 118	\$ 212	79.4%	\$ 154	\$ 266	72.3%
55 Year Old Single Male	Excellent	\$ 253	\$ 471	86.5%	\$ 332	\$ 591	78.0%
55 Year Old Single Female	Excellent	\$ 262	\$ 471	79.6%	\$ 344	\$ 591	71.6%

Figure 2

Sample Premium Rate Changes – Poor Health Status

Age / Gender / Family	Health Status	Current ICHIA Plan 5	2014 Lowest Cost Bronze	Rate Change	Current ICHIA Plan 4	2014 Lowest Cost Silver	Rate Change
25 Year Old Single Male	Poor	\$ 288	\$ 212	(26.3%)	\$ 304	\$ 266	(12.5%)
25 Year Old Single Female	Poor	\$ 551	\$ 212	(61.5%)	\$ 582	\$ 266	(54.3%)
55 Year Old Single Male	Poor	\$ 840	\$ 471	(43.9%)	\$ 888	\$ 591	(33.4%)
55 Year Old Single Female	Poor	\$ 833	\$ 471	(43.5%)	\$ 880	\$ 591	(32.8%)

Figures 1 and 2 offer the following key observations:

- With the elimination of health status rating, premiums for individuals in excellent health status, regardless of age or gender, may increase by more than 50% relative to comparable plan designs in the current market.

- Conversely, most individuals in ICHIA will receive significant premium decreases, of more than 50% in some cases.
- Young, healthy, adult males may experience premium increases near 150% in 2014. Due to the elimination of gender rating, the premium increase for young, healthy, females is noticeably less.

Based on a national [AHIP survey](#) of the individual health insurance market, approximately one-third of the commercial individual health insurance market receives the 'preferred rate', comparable to the rates for 'excellent' health status illustrated in Figure 1. ICHIA enrollment was approximately 7,300 lives in 2012, relative to approximately 183,000 lives in the commercial individual health insurance market based on 2012 insurer filings.

Why are premium rates changing?

The base premium rates are anticipated to change due to several factors beginning in 2014, including:

- Health care trend or inflation – estimated between 8% and 12% based on a sample of insurers' 2014 filings.
- Insured health status – estimated to impact rates 20% or greater.
- Essential health benefits (EHB) requirement – Expansion of covered insured benefits to meet the benefit requirement is estimated to impact rates 5% or greater.
- Minimum actuarial value and maximum out-of-pocket limitations – all non-grandfathered policies sold in the individual health insurance market beginning on January 1, 2014 must have at least a 60% actuarial value and cannot have maximum cost sharing that exceeds \$6,350 for single coverage (\$12,700 family coverage). The impact of this provision will vary substantially by plan design.
- Additional fees and taxes – estimated to impact rates by 3.5% or greater.
- Transitional reinsurance program – estimated to reduce individual health insurance rates by approximately 10%.

The premium rate changes do not account for the premium tax credit subsidies that some individuals may receive through the federal marketplace. The premium tax credit and cost sharing subsidies are discussed in a later section of this paper.

Healthcare trend or inflation varies by insurer, and is estimated to be between 8% and 12% per year. This accounts for health care trend due to utilization of services, increases in cost of services, and cost changes due to newer technology and innovations.

The health status, or morbidity, of individuals enrolled in the Indiana individual insurance market is anticipated to differ from that of the existing individual insured population. According to one insurer, the morbidity of the individual market is anticipated to be approximately 20% higher than that of the existing small group insurance market. Several factors contributed to this estimate; including:

- The current uninsured population has a higher morbidity or illness burden than the insured population.
 - Morbidity is estimated to increase as previously uninsured individuals enter the market.
- Pent-up demand (individuals gaining access to health insurance for the first time in a significant period of time may utilize more healthcare services due to previously forgoing health services).
- Individual-level purchasing decisions.
- The closing of ICHIA (Indiana's high risk pool). The individuals currently enrolled in ICHIA will be able to purchase insurance in the individual health insurance market.

- A portion of the population choosing to retain grandfathered status.
- Selection due to renewal timing changes. Those with low current rates will delay purchasing an ACA product.

The EHB requirement will result in insurers adding and expanding the coverage of some benefit categories. Examples of the types of benefits being added or expanded include:

- Maternity Coverage
- Prescription Drug Coverage
- Mental Health and Substance Abuse Services
- Pediatric Dental and Vision
- Habilitative Services

In addition to the EHB requirement, limitations on out-of-pocket maximums may also result in premium increases. Finally, for individuals below 250% of the Federal Poverty Level, Cost Sharing Reduction (CSR) plans are available for individuals who elect to enroll in a silver metal level plan on the federally-facilitated marketplace.

Individuals enrolled in these plans are anticipated to have higher utilization levels because out-of-pocket cost sharing is substantially reduced relative to the standard silver plan design. This higher utilization is reflected in insurer rates and contributes to the premium rate change. The impact to premiums of coverage expansion will vary by insurer and specific plan design.

Additional fees and taxes are also contributing to insurer rate increases. Such taxes or fees include the health insurer fee (totaling \$8 billion on a national basis in 2014), a marketplace operation fee of 3.5% of plan premium, and an estimated \$63 per member assessment for the transitional reinsurance program in 2014.

However, funds (which will be assessed on both individual and employer plans) collected for the transitional reinsurance program will also flow back into the individual market. In 2014 through 2016, federal transitional reinsurance is designed to assist in mitigating a portion of the rate increases in the individual market. The amount of funds available to individual insurers through this program is highest in 2014, which is assisting in reducing insurer rate increases. It is estimated that 2014 individual premiums are being reduced by approximately 10% as a result of the transitional reinsurance program, net of assessments.

What is the impact of the premium tax credit subsidy on out-of-pocket premiums?

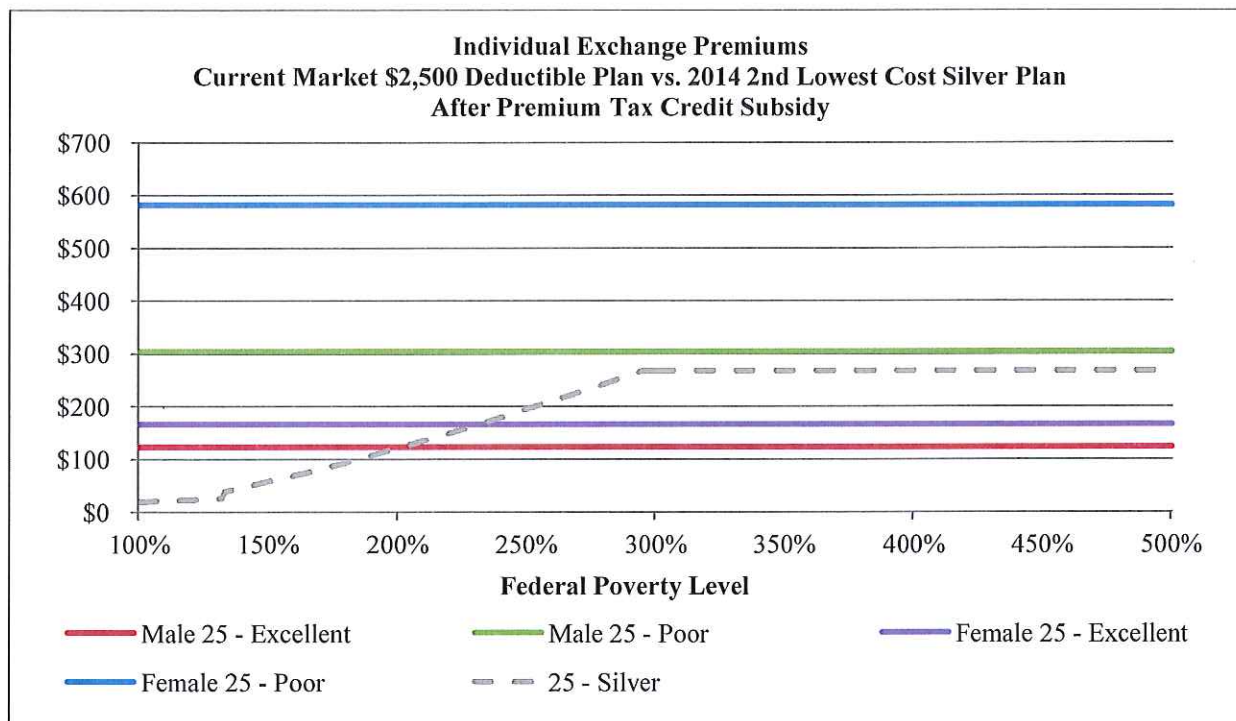
Hoosier households who have household income between 100% and 400% of the Federal Poverty Level (estimated to be approximately \$11,500 to \$46,000 for single adults and \$24,000 to \$96,000 for families of four in 2014) who do not have access to affordable employer sponsored health insurance¹, will be eligible for an advanced premium tax credit subsidy through the federal marketplace if the cost of a benchmark plan exceeds a specified percentage of their household income. This subsidy reduces the amount individuals will pay for their health insurance. The value of the premium subsidy is highest for households with income near the poverty line and is reduced as household income increases.

To illustrate the impact of the premium subsidy tax credit on out-of-pocket premiums, we have created charts illustrating current market premiums relative to 2014 out-of-pocket premiums net of the premium

¹ See <https://www.healthcare.gov/glossary/affordable-coverage/> for more information on the definition of affordability under the ACA.

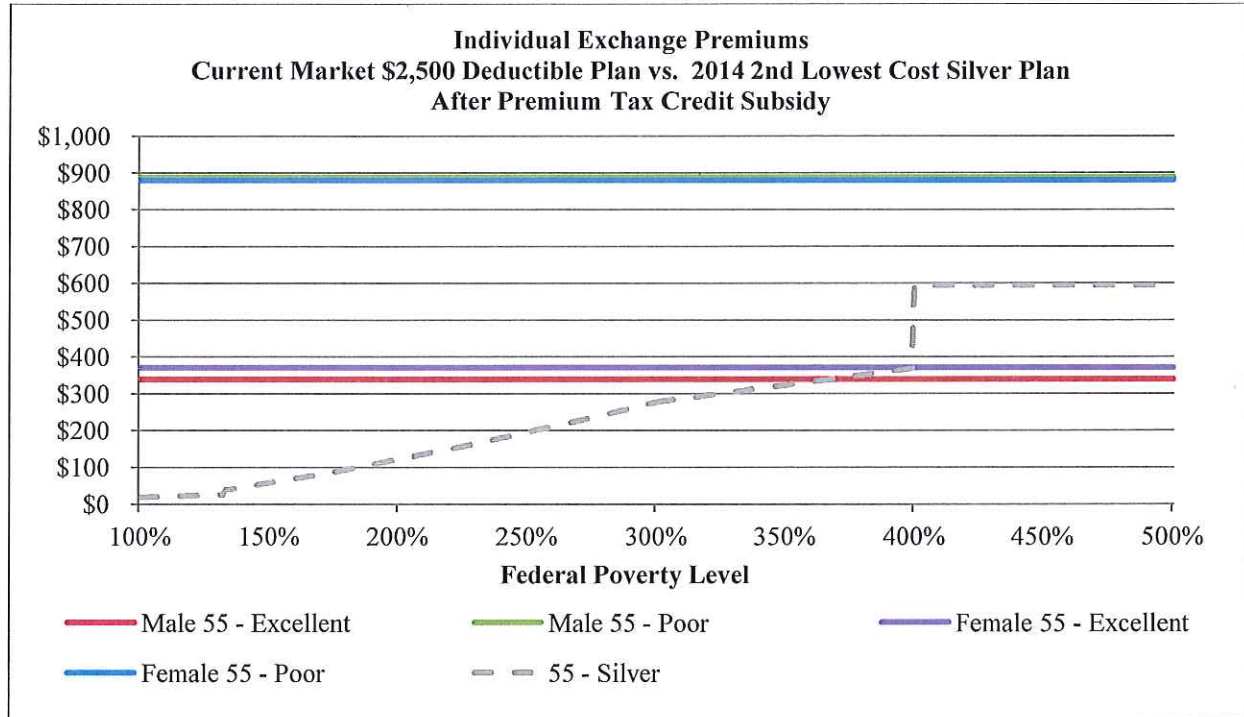
subsidy tax credit. Figures 3 and 4 illustrate the relative premium differences for single 25 and 55 year olds, respectively. Additional ages are available in the appendix. For current premiums, rates are illustrated separately by gender and health status.

Figure 3



Relative to current market premiums, out-of-pocket premium changes resulting from the ACA will range from significant increases to significant decreases, depending upon the individual's age, gender, status, and household income level. Figure 3 indicates that 25 year old males, in excellent health status, may experience increases in out-of-pocket premiums net of the premium subsidy tax credit if their annual income exceeds 200% FPL (approximately \$23,000). For 25 year old females also in excellent health status, out-of-pocket premium increases are estimated to incur at 250% FPL (approximately \$29,000). However, for individuals that were purchasing coverage in ICHIA, premium decreases will be experienced regardless of household income level. For low-income individuals currently in ICHIA, out-of-pocket monthly premiums may decrease several hundred dollars. It should also be noted that individuals with household income below 250% FPL who purchase a silver plan in the marketplace will also receive a cost sharing subsidy. The cost sharing subsidy increases the average percentage of healthcare costs paid by the plan from 70% to 94% for individuals with income below 150% FPL, 87% for individuals with income between 150% and 200% FPL, and 73% for individuals with income between 200% and 250% FPL.

Figure 4



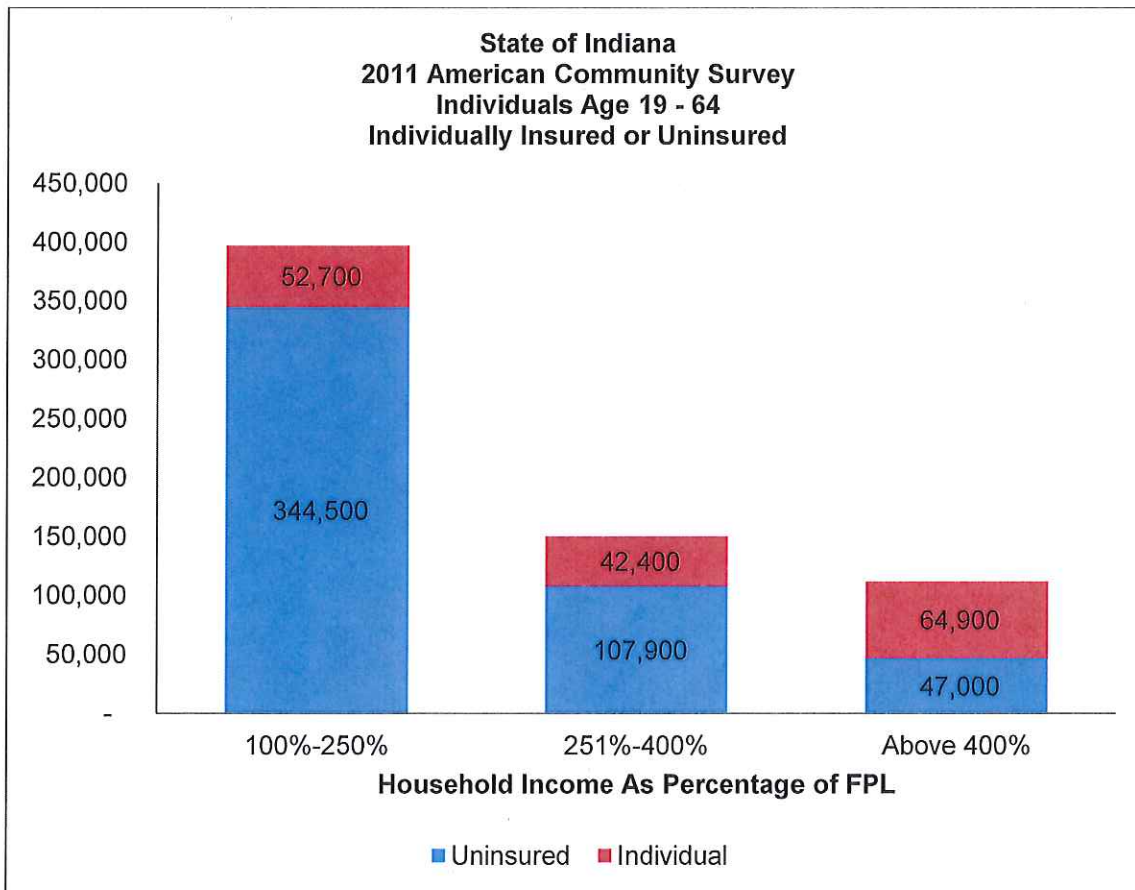
Because premiums under the ACA will be age rated in Indiana based on a 3:1 ratio, the value of the premium subsidies increase with age. As illustrated in Figure 4, the value of the premium subsidy may result in out-of-pocket premium decreases for individuals with household income below 400% FPL (approximately \$46,000), regardless of gender or health status. For individuals currently enrolled in ICHIA who have household income below 400% FPL, annual out-of-pocket premium decreases may approach or exceed \$10,000 for some individuals.

Figure 4 also illustrates the out-of-pocket premium 'cliff' that is created at 400% FPL due to the elimination of the premium subsidy tax credit at this income level. In the case of a 55 year old with household income just under 400% FPL, out-of-pocket annual premiums may increase by \$2,400 if additional income pushed the individual just above 400% FPL.

How many Hoosiers will qualify for premium subsidies in the marketplace?

Figure 5 illustrates the household income distribution of Hoosiers ages 19 to 64 who are currently either uninsured or individually insured for households above the federal poverty line based on estimates from the 2011 American Community Survey.

Figure 5



Among individuals currently purchasing health insurance in the individual market with household income above 100% FPL, approximately 60% are estimated to have incomes less than 400% FPL and thus be **potentially** eligible for a premium tax credit subsidy. Approximately 344,500 individuals of the currently uninsured population are estimated to have household income between 100% and 250% FPL. If these households qualify for a premium tax credit subsidy, they will also receive a cost sharing subsidy if a silver plan is purchased in the marketplace. The value of the premium tax credit subsidy will vary by individual based on age and household income.

Households under 400% FPL who are currently uninsured or individually insured may not qualify for a premium subsidy tax credit for several reasons:

- Younger individuals with income below 400% FPL may not qualify for a premium subsidy due to the full premium amount of the second lowest-cost silver plan not exceeding the dollar limit specified under the ACA.
- To the extent an individual was eligible for affordable employer sponsored insurance, whether through their employer or a spouse, the individual would not be eligible for a premium tax credit subsidy in the health insurance marketplace.
- Similarly, if one adult member of the household was currently insured through their employer, but the spouse was purchasing individual market coverage due to family coverage offered by the employer being cost prohibitive, the household would not qualify for a premium subsidy in the marketplace unless the self-only coverage offered by the employer was unaffordable.

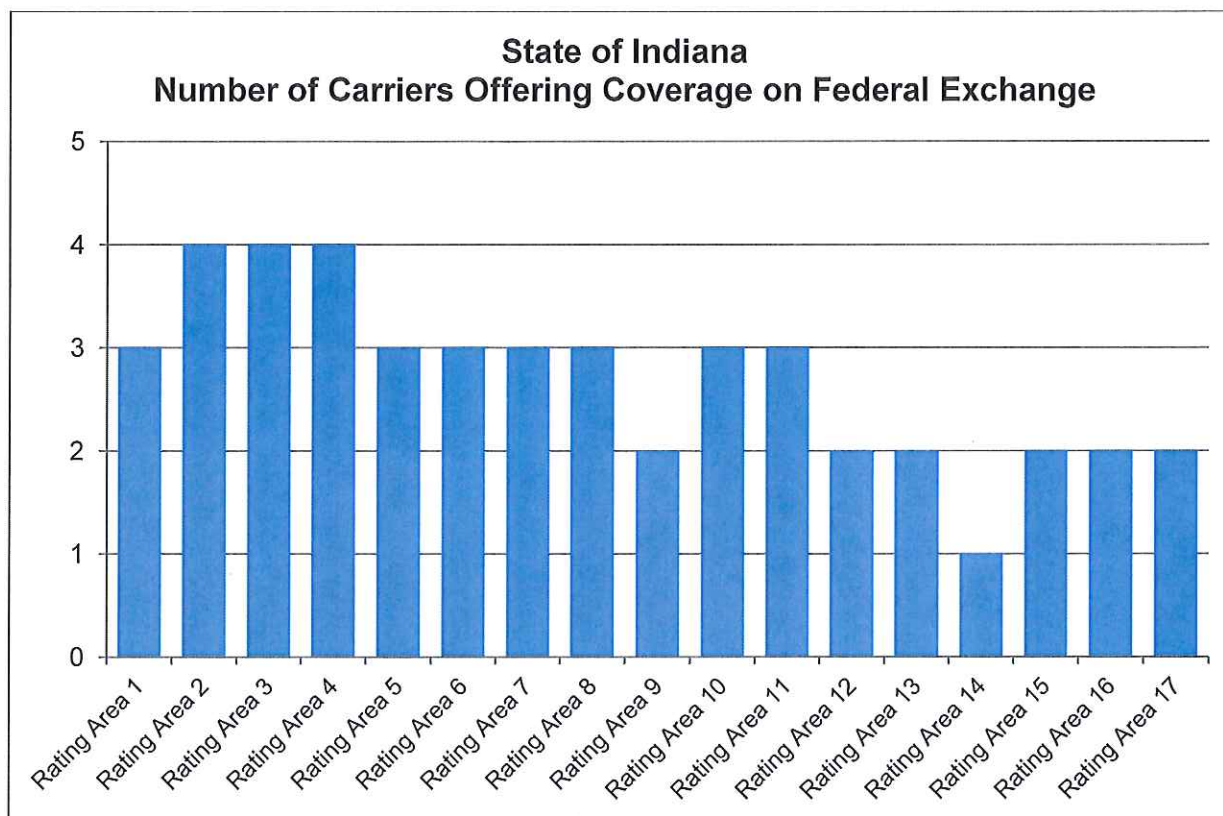
How many carriers are offering coverage in each region of the state?

Based on 2011 insurer filings, the top ten carriers in the state had more than 90% of Indiana's individual health insurance market enrollment. In this same time period, the state's top five carriers had approximately 85% of Indiana's individual health insurance market enrollment. Of the top five carriers in Indiana, only Anthem will be offering plans on the federally-facilitated marketplace in Indiana.

While a total of four carriers will be offering coverage on the federally-facilitated marketplace in Indiana, carriers are not required to offer coverage on a statewide basis. As a result of this, the number of carriers offering plans on the federally-facilitated marketplace varies by rating area. Beginning in 2014, the individual and small group market in Indiana will have a total of 17 different rating areas². It is anticipated that additional carriers will offer coverage to Hoosiers in 2014 outside of the federally-facilitated marketplace.

Figure 6 below illustrates the number of carriers offering coverage for each of Indiana's 17 rating areas.

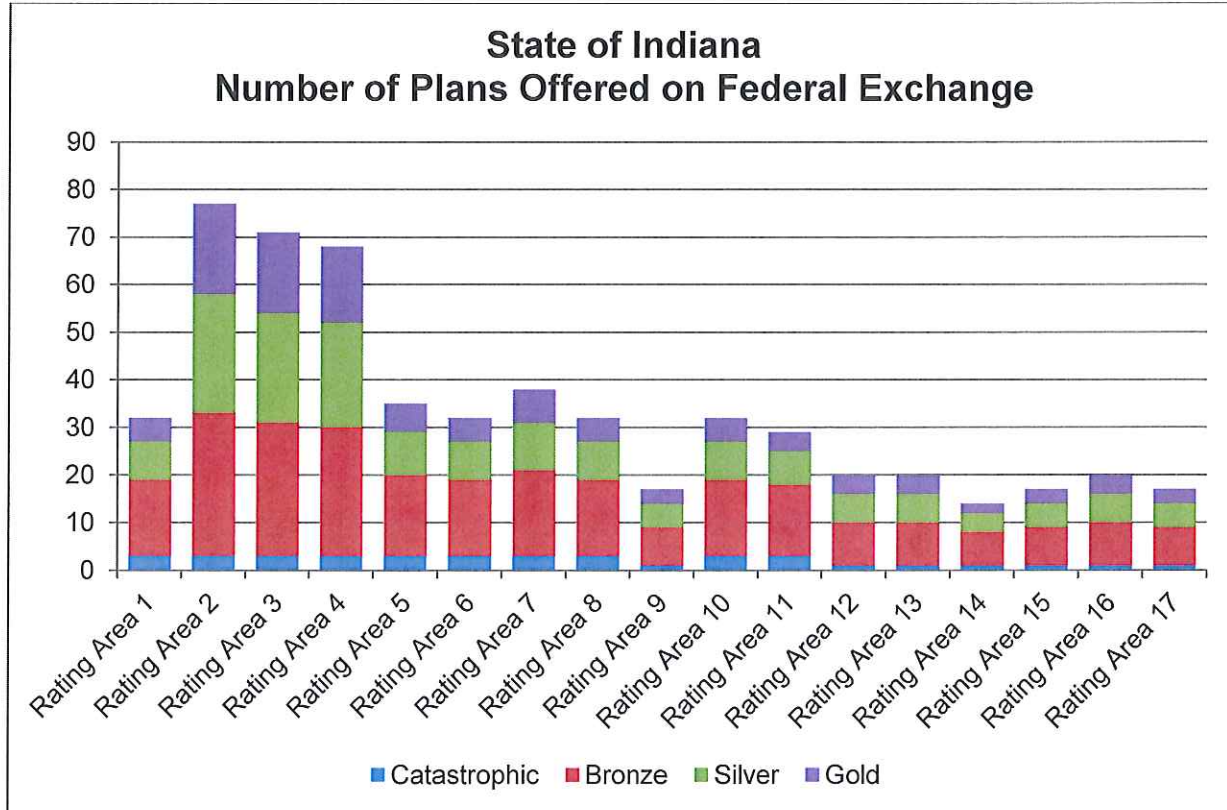
Figure 6



The variability in the number carriers offering coverage by rating area contributes to a high level of variation in the number of benefit plans available in Indiana. Figure 7 below illustrates the number of plans being offered at each metal level for Indiana's 17 rating areas.

² <http://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Market-Reforms/in-gra.html>

Figure 7

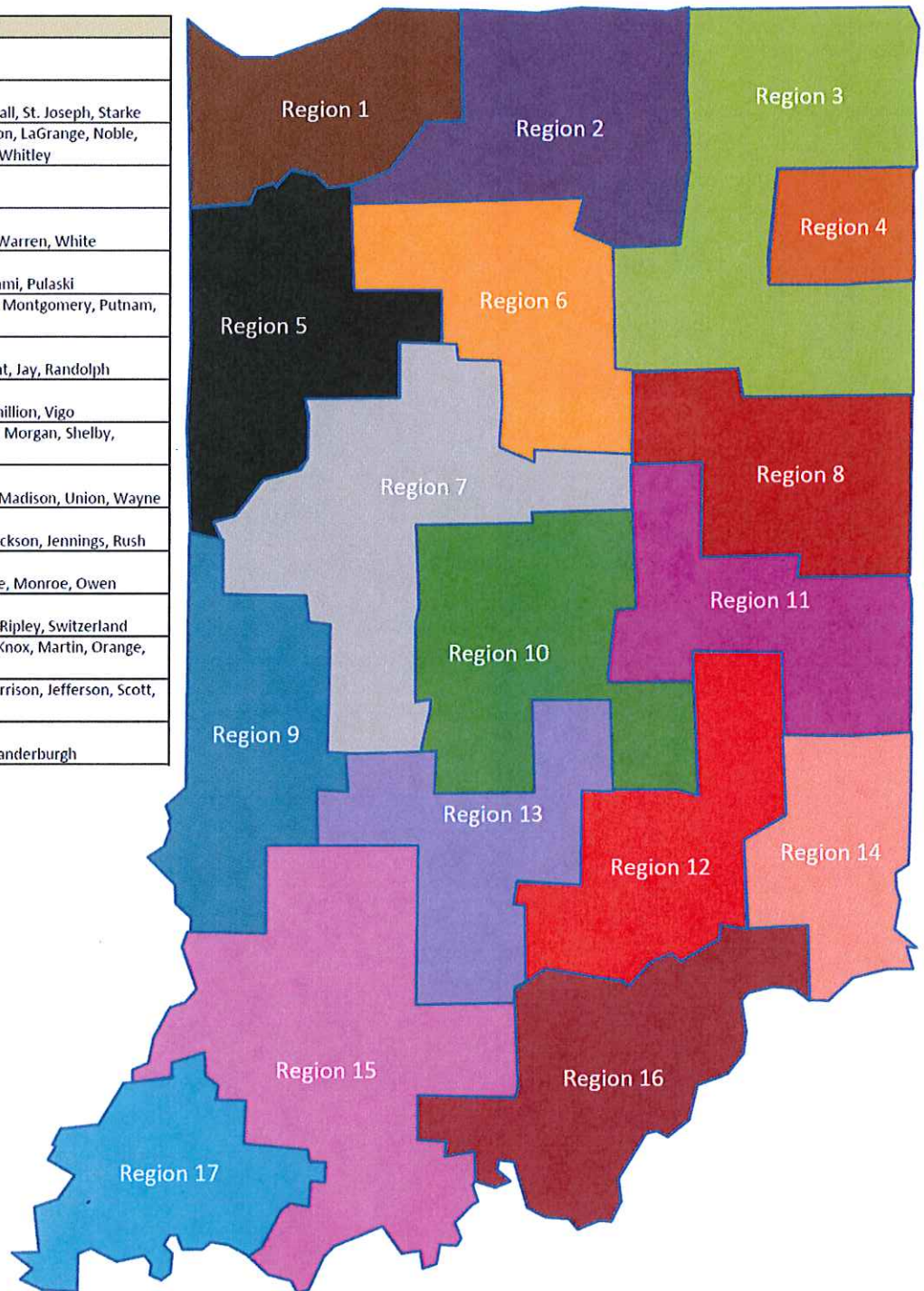


As shown in Figure 7, while some rating areas will have over 70 different plans available on the federal marketplace, other areas will have as few as 14. The number of plans offered also varies greatly by metal level, with approximately 5% of plans being Catastrophic, 45% Bronze, 30% Silver, and 20% at the Gold metal level. In Indiana, there will be no Platinum plans offered on the federal marketplace.

Figure 8
Geographic Rating Areas

Geographic Rating Areas in Indiana

Region	Counties
1	Lake, LaPorte, Porter
2	Elkhart, Kosciusko, Marshall, St. Joseph, Starke
3	Adams, DeKalb, Huntington, LaGrange, Noble, Steuben, Wabash, Wells, Whitley
4	Allen
5	Benton, Jasper, Newton, Warren, White
6	Cass, Fulton, Howard, Miami, Pulaski
7	Carroll, Clinton, Fountain, Montgomery, Putnam, Tippecanoe, Tipton
8	Blackford, Delaware, Grant, Jay, Randolph
9	Clay, Parke, Sullivan, Vermillion, Vigo
10	Boone, Hamilton, Marion, Morgan, Shelby, Hendricks
11	Fayette, Hancock, Henry, Madison, Union, Wayne
12	Bartholomew, Decatur, Jackson, Jennings, Rush
13	Brown, Johnson, Lawrence, Monroe, Owen
14	Dearborn, Franklin, Ohio, Ripley, Switzerland
15	Daviess, Dubois, Greene, Knox, Martin, Orange, Perry, Pike, Spencer
16	Clark, Crawford, Floyd, Harrison, Jefferson, Scott, Washington
17	Gibson, Posey, Warrick, Vanderburgh



Appendix 1

Sample Individual Health Insurance Market Plan Designs

Health Status: Excellent				
Sample Pre-ACA Plan	Sample 2014 Marketplace Tier Equivalent	Single Deductible	Single Out-of-Pocket Maximum	Coinsurance
SmartSense Plus 30% \$10,000	Lowest Cost Bronze	\$10,000	\$13,500	30%
Lumenos HSA Plus \$5,500	Lowest Cost Bronze	\$5,500	\$5,500	0%
Lumenos HSA Plus \$3,500	Lowest Cost Silver	\$3,500	\$3,500	0%
SmartSense Plus 30% \$2,500	Second Lowest Cost Silver	\$2,500	\$6,000	30%
Premier Plus 20% \$1,000	Lowest Cost Gold	\$1,000	\$4,000	20%

Health Status: Poor				
Sample Pre-ACA Plan	Sample 2014 Marketplace Tier Equivalent	Single Deductible	Single Out-of-Pocket Maximum	Coinsurance
ICHIA Plan 5	Lowest Cost Bronze	\$5,000	\$5,900	20%
ICHIA Plan 4	Second Lowest Cost Silver	\$2,500	\$5,000	20%
ICHIA Plan 2	Lowest Cost Gold	\$1,000	\$3,000	20%

2014 Indiana Individual Market Marketplace Plans - Rating Area 10			
Sample ACA Plan	Single Deductible	Single Out-of-Pocket Maximum	Coinsurance
Lowest Cost Bronze	\$6,000	\$6,350	0%
Lowest Cost Silver	\$3,000	\$3,600	10%
Second Lowest Cost Silver	\$2,500	\$6,350	30%
Lowest Cost Gold	\$700	\$3,000	10%

Appendix 2

Sample Current Individual Health Insurance Premiums Relative to ACA Filed Marketplace Premiums

Age / Gender / Family	Health Status	Current SmartSense Plus 30% \$10,000	2014 Lowest Cost Bronze	Rate Change
25 Year Old Single Male	Excellent	\$ 96	\$ 212	121.7%
25 Year Old Single Female	Excellent	\$ 130	\$ 212	63.5%
40 Year Old Single Male	Excellent	\$ 153	\$ 270	76.6%
40 Year Old Single Female	Excellent	\$ 207	\$ 270	30.4%
55 Year Old Single Male	Excellent	\$ 263	\$ 471	79.1%
55 Year Old Single Female	Excellent	\$ 293	\$ 471	60.9%
40 Year Old Couple	Excellent	\$ 339	\$ 540	59.2%
55 Year Old Couple	Excellent	\$ 526	\$ 942	78.9%
40 Year Old Family of 4	Excellent	\$ 549	\$ 808	47.3%

Age / Gender / Family	Health Status	Current Lumenos HSA Plus \$5,500	2014 Lowest Cost Bronze	Rate Change
25 Year Old Single Male	Excellent	\$ 82	\$ 212	157.9%
25 Year Old Single Female	Excellent	\$ 118	\$ 212	79.4%
40 Year Old Single Male	Excellent	\$ 131	\$ 270	106.4%
40 Year Old Single Female	Excellent	\$ 178	\$ 270	51.7%
55 Year Old Single Male	Excellent	\$ 253	\$ 471	86.5%
55 Year Old Single Female	Excellent	\$ 262	\$ 471	79.6%
40 Year Old Couple	Excellent	\$ 258	\$ 540	109.7%
55 Year Old Couple	Excellent	\$ 432	\$ 942	117.9%
40 Year Old Family of 4	Excellent	\$ 407	\$ 808	98.8%

Age / Gender / Family	Health Status	Current Lumenos HSA Plus \$3,500	2014 Lowest Cost Silver	Rate Change
25 Year Old Single Male	Excellent	\$ 108	\$ 266	145.7%
25 Year Old Single Female	Excellent	\$ 154	\$ 266	72.3%
40 Year Old Single Male	Excellent	\$ 173	\$ 339	96.3%
40 Year Old Single Female	Excellent	\$ 234	\$ 339	45.0%
55 Year Old Single Male	Excellent	\$ 332	\$ 591	78.0%
55 Year Old Single Female	Excellent	\$ 344	\$ 591	71.6%
40 Year Old Couple	Excellent	\$ 339	\$ 677	100.0%
55 Year Old Couple	Excellent	\$ 568	\$ 1,182	108.0%
40 Year Old Family of 4	Excellent	\$ 533	\$ 1,014	90.2%

Age / Gender / Family	Health Status	Current SmartSense Plus 30% \$2,500	2014 Second Lowest Cost Silver	Rate Change
25 Year Old Single Male	Excellent	\$ 124	\$ 268	116.4%
25 Year Old Single Female	Excellent	\$ 166	\$ 268	61.1%
40 Year Old Single Male	Excellent	\$ 197	\$ 341	72.9%
40 Year Old Single Female	Excellent	\$ 262	\$ 341	30.0%
55 Year Old Single Male	Excellent	\$ 339	\$ 594	75.1%
55 Year Old Single Female	Excellent	\$ 370	\$ 594	60.3%
40 Year Old Couple	Excellent	\$ 433	\$ 681	57.3%
55 Year Old Couple	Excellent	\$ 673	\$ 1,188	76.6%
40 Year Old Family of 4	Excellent	\$ 698	\$ 1,019	46.0%

Age / Gender / Family	Health Status	Current Premier Plus 20% / \$1,000	2014 Lowest Cost Gold	Rate Change
25 Year Old Single Male	Excellent	\$ 229	\$ 333	45.9%
25 Year Old Single Female	Excellent	\$ 297	\$ 333	12.2%
40 Year Old Single Male	Excellent	\$ 362	\$ 424	17.1%
40 Year Old Single Female	Excellent	\$ 466	\$ 424	(8.9%)
55 Year Old Single Male	Excellent	\$ 644	\$ 740	14.9%
55 Year Old Single Female	Excellent	\$ 678	\$ 740	9.2%
40 Year Old Couple	Excellent	\$ 782	\$ 849	8.6%
55 Year Old Couple	Excellent	\$ 1,255	\$ 1,481	18.0%
40 Year Old Family of 4	Excellent	\$ 1,227	\$ 1,270	3.6%

Age / Gender / Family	Health Status	Current ICHIA Plan 5	2014 Lowest Cost Bronze	Rate Change
25 Year Old Single Male	Poor	\$ 288	\$ 212	(26.3%)
25 Year Old Single Female	Poor	\$ 551	\$ 212	(61.5%)
40 Year Old Single Male	Poor	\$ 432	\$ 270	(37.4%)
40 Year Old Single Female	Poor	\$ 575	\$ 270	(53.0%)
55 Year Old Single Male	Poor	\$ 840	\$ 471	(43.9%)
55 Year Old Single Female	Poor	\$ 833	\$ 471	(43.5%)
40 Year Old Couple	Poor	\$ 1,006	\$ 540	(46.3%)
55 Year Old Couple	Poor	\$ 1,673	\$ 942	(43.7%)
40 Year Old Family of 4	Poor	\$ 1,383	\$ 808	(41.5%)

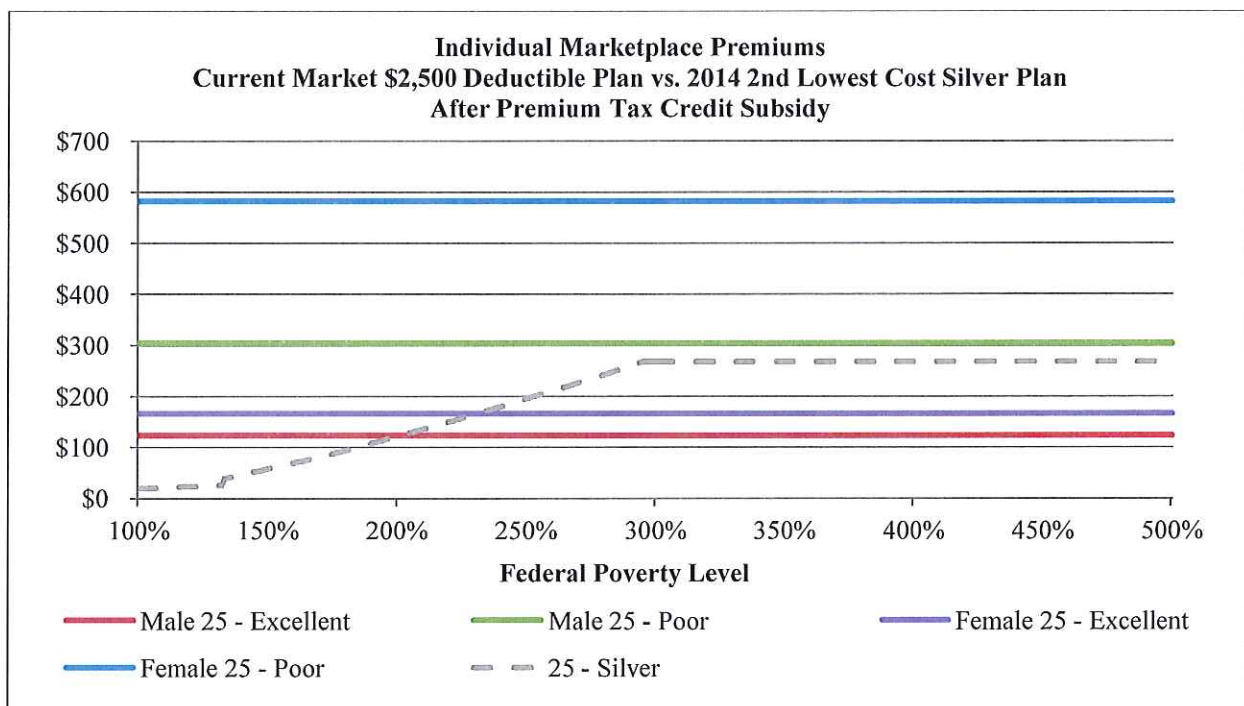
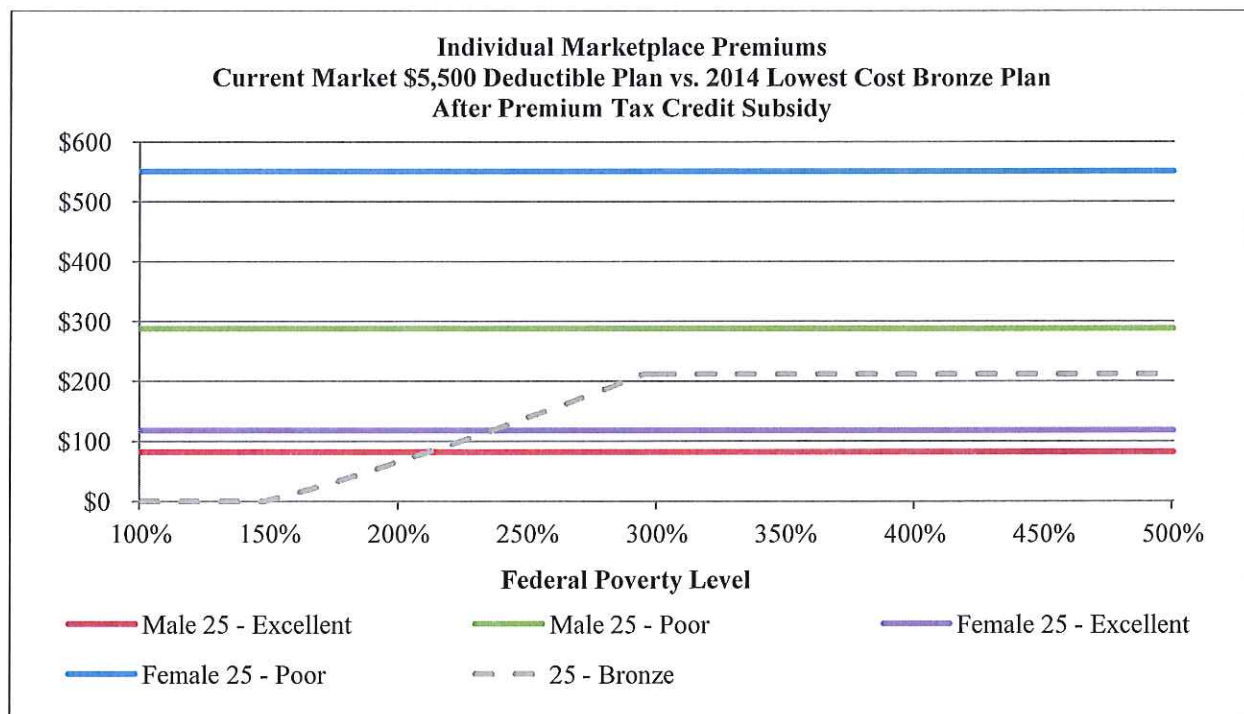
Age / Gender / Family	Health Status	Current ICHIA Plan 4	2014 Lowest Cost Silver	Rate Change
25 Year Old Single Male	Poor	\$ 304	\$ 266	(12.5%)
25 Year Old Single Female	Poor	\$ 582	\$ 266	(54.3%)
40 Year Old Single Male	Poor	\$ 456	\$ 339	(25.7%)
40 Year Old Single Female	Poor	\$ 607	\$ 339	(44.2%)
55 Year Old Single Male	Poor	\$ 888	\$ 591	(33.4%)
55 Year Old Single Female	Poor	\$ 880	\$ 591	(32.8%)
40 Year Old Couple	Poor	\$ 1,063	\$ 677	(36.3%)
55 Year Old Couple	Poor	\$ 1,767	\$ 1,182	(33.1%)
40 Year Old Family of 4	Poor	\$ 1,461	\$ 1,014	(30.6%)

Age / Gender / Family	Health Status	Current ICHIA Plan 4	2014 Second Lowest Cost Silver	Rate Change
25 Year Old Single Male	Poor	\$ 304	\$ 268	(12.1%)
25 Year Old Single Female	Poor	\$ 582	\$ 268	(54.0%)
40 Year Old Single Male	Poor	\$ 456	\$ 341	(25.3%)
40 Year Old Single Female	Poor	\$ 607	\$ 341	(43.9%)
55 Year Old Single Male	Poor	\$ 888	\$ 594	(33.1%)
55 Year Old Single Female	Poor	\$ 880	\$ 594	(32.5%)
40 Year Old Couple	Poor	\$ 1,063	\$ 681	(35.9%)
55 Year Old Couple	Poor	\$ 1,767	\$ 1,188	(32.8%)
40 Year Old Family of 4	Poor	\$ 1,461	\$ 1,019	(30.2%)

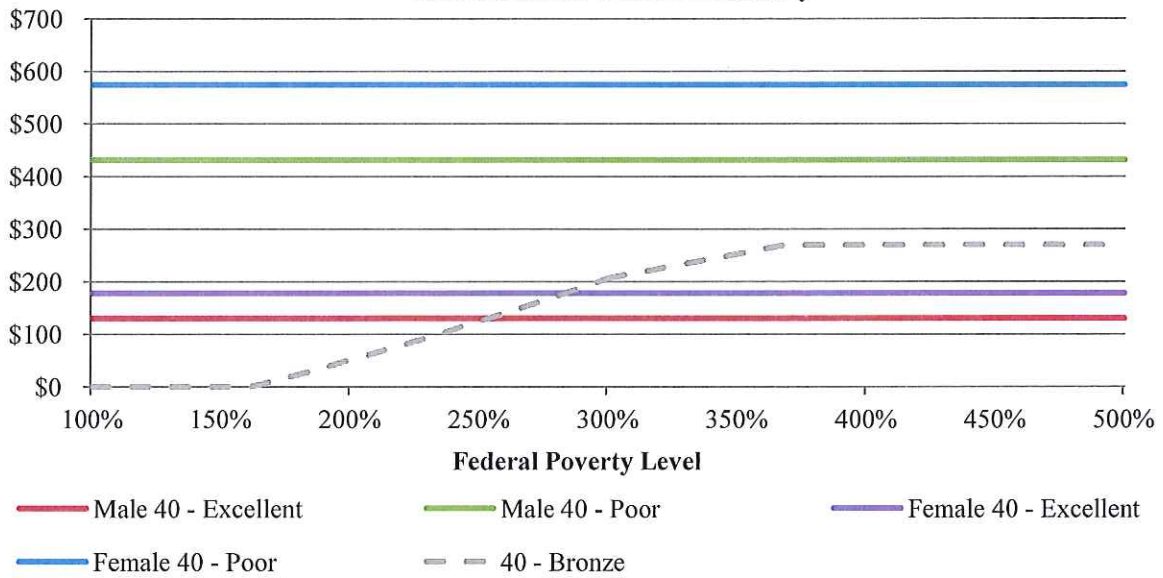
Age / Gender / Family	Health Status	Current ICHIA Plan 2	2014 Lowest Cost Gold	Rate Change
25 Year Old Single Male	Poor	\$ 375	\$ 333	(11.0%)
25 Year Old Single Female	Poor	\$ 722	\$ 333	(53.8%)
40 Year Old Single Male	Poor	\$ 580	\$ 424	(26.9%)
40 Year Old Single Female	Poor	\$ 774	\$ 424	(45.2%)
55 Year Old Single Male	Poor	\$ 1,122	\$ 740	(34.0%)
55 Year Old Single Female	Poor	\$ 1,125	\$ 740	(34.2%)
40 Year Old Couple	Poor	\$ 1,354	\$ 849	(37.3%)
55 Year Old Couple	Poor	\$ 2,248	\$ 1,481	(34.1%)
40 Year Old Family of 4	Poor	\$ 1,943	\$ 1,270	(34.6%)

Appendix 3

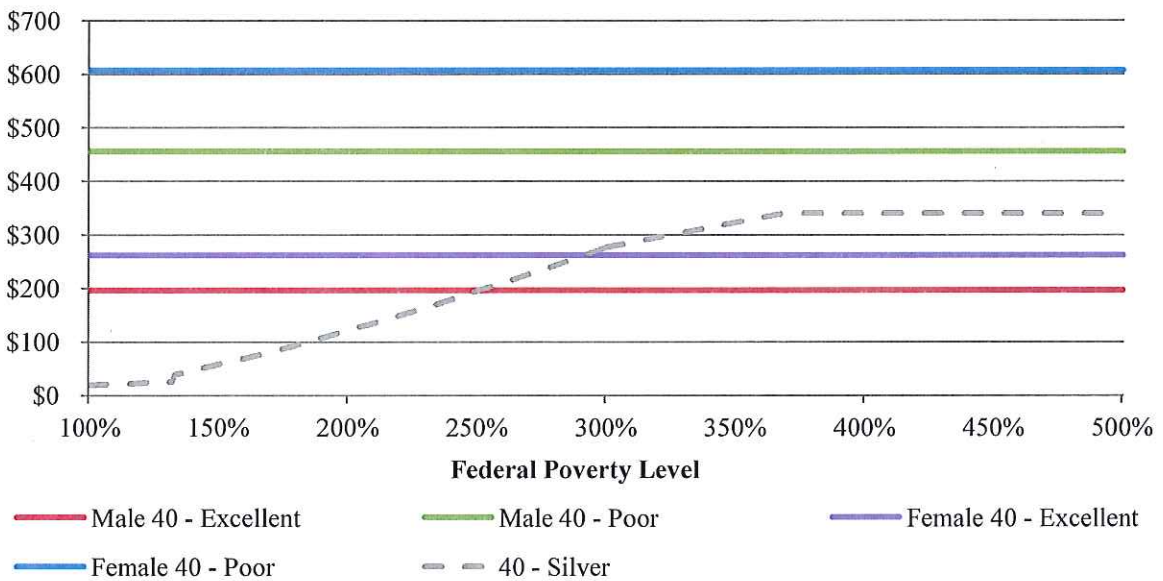
Sample Current Individual Premiums Relative to ACA Marketplace Premiums After Subsidies



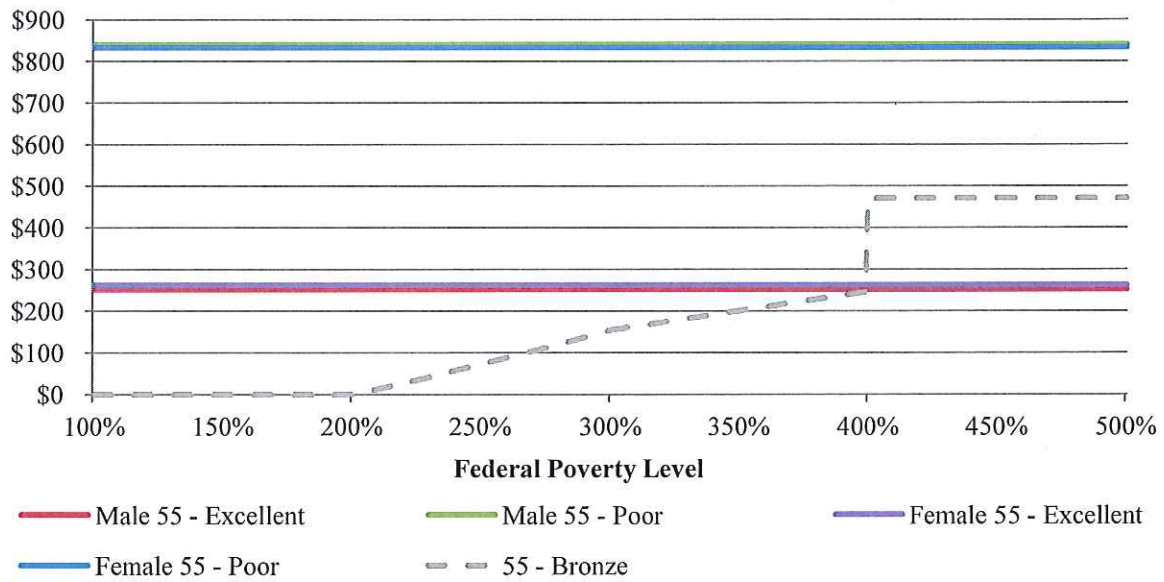
Individual Marketplace Premiums
Current Market \$5,500 Deductible Plan vs. 2014 Lowest Cost Bronze Plan
After Premium Tax Credit Subsidy



Individual Marketplace Premiums
Current Market \$2,500 Deductible Plan vs. 2014 2nd Lowest Cost Silver Plan
After Premium Tax Credit Subsidy



Individual Marketplace Premiums
Current Market \$5,500 Deductible Plan vs. 2014 Lowest Cost Bronze Plan
After Premium Tax Credit Subsidy



Individual Marketplace Premiums
Current Market \$2,500 Deductible Plan vs. 2014 2nd Lowest Cost Silver Plan
After Premium Tax Credit Subsidy

