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Unified Rate Review v8.2

Company Legal Name:Highmark BCBSO Inc.

HIO's Issuer ID:76168State:DE

Effective Date of Rate Change(s):01/01/2027Market:Small Group

Market Level Calculations (Same for all Plans)

Section I: Experience Period Data

Experience Period:1/1/2025to12/31/2025

Total

PMPM

Allowed Claims\$207,818,125.12\$876.27

Reinsurance\$0.00\$0.00

Incurred Claims in Experience Period\$186,363,315.33\$785.80

Risk Adjustment\$1,716,328.66\$7.24

Experience Period Premium\$184,711,895.98\$778.84

Experience Period Member Months237,163

Section II: Projections

Benefit Category	Experience Period Index Rate PMPM	Year 1 Trend		Year 2 Trend		Trended EHB Allowed Claims PMPM
		Cost	Utilization	Cost	Utilization	
Inpatient Hospital	\$190.33	1.055	1.066	1.048	1.066	\$238.98
Outpatient Hospital	\$274.05	1.055	1.066	1.048	1.066	\$344.10
Professional	\$246.86	1.010	1.062	1.010	1.062	\$284.22
Other Medical	\$10.77	1.010	1.063	1.010	1.063	\$12.42
Capitation	\$0.68	1.001	1.000	1.001	1.000	\$0.68
Prescription Drug	\$153.58	1.110	1.067	1.110	1.067	\$215.56
Total	\$876.27					\$1,095.96

Morbidity Adjustment1.011

Demographic Shift1.004

Plan Design Changes0.999

Other1.005

Adjusted Trended EHB Allowed Claims PMPM for01/01/2027\$1,117.70

Manual EHB Allowed Claims PMPM\$0.00

Applied Credibility %100.00%

Projected Period Totals

Projected Index Rate for01/01/2027\$1,117.70

Reinsurance\$0.00\$0.00

Risk Adjustment Payment/Charge-\$3.86-\$741,013.70

Exchange User Fees0.00%\$0.00

Market Adjusted Index Rate\$1,121.56\$215,339,413.70

Projected Member Months192000

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