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Unified Rate Review v8.2

Company Legal Name: AmeriHealth Caritas VIP Next, Inc.

HIO's Issuer ID: 72760

Effective Date of Rate Change(s): 1/1/2027

State: DE

Market: Individual

Market Level Calculations (Same for all Plans)

Section I: Experience Period Data

Experience Period: 1/1/2025 to 12/31/2025

	Total	PMPM
Allowed Claims	\$38,676,288.57	\$818.36
Reinsurance	\$5,375,227.98	\$113.73
Incurred Claims in Experience Period	\$27,941,888.97	\$591.23
Risk Adjustment	-\$2,891,673.00	-\$61.19
Experience Period Premium	\$33,106,897.02	\$700.51
Experience Period Member Months	47,261	

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	\$230.24	1.083	0.975	1.083	0.975	\$256.81
Outpatient Hospital	\$294.24	1.064	1.013	1.064	1.013	\$341.75
Professional	\$131.98	1.064	1.006	1.064	1.006	\$151.38
Other Medical	\$0.00	1.064	1.006	1.064	1.006	\$0.00
Capitation	\$1.44	1.207	1.000	1.207	1.000	\$2.09
Prescription Drug	\$160.45	1.110	1.040	1.110	1.040	\$213.78
Total	\$818.36					\$965.82

Morbidity Adjustment	1.072
Demographic Shift	0.926
Plan Design Changes	0.942
Other	1.069
Adjusted Trended EHB Allowed Claims PMPM for 1/1/2027	\$965.08

Manual EHB Allowed Claims PMPM	\$785.50
Applied Credibility %	88.75%

Projected Period Totals

Projected Index Rate for 1/1/2027	\$944.88	\$32,197,730.88
Reinsurance	\$82.07	\$2,796,688.83
Risk Adjustment Payment/Charge	-\$106.96	-\$3,644,837.77
Exchange User Fees	2.24%	\$757,731.23
Market Adjusted Index Rate	\$992.01	\$33,803,611.05

Projected Member Months	34,076
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