DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Center for Consumer Information & Insurance Oversight
200 Independence Avenue SW
Washington, DC 20201

SUMMARY REPORT ON PERMANENT RISK ADJUSTMENT TRANSFERS FOR THE 2017 BENEFIT YEAR

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On February 28, 2018, the United States District Court for the District of New Mexico issued a decision invalidating CMS's use of the statewide average premium in the risk adjustment transfer formula for the 2014 – 2018 benefit years pending further explanation of CMS's reasons for operating the risk adjustment program in a budget neutral manner in those years. The government has moved the court to reconsider its decision and CMS is currently awaiting the court's ruling.

In light of the current status of the litigation, the Centers for Medicare & Medicaid Services (CMS) will not collect or pay the specified amounts. CMS will inform stakeholders of any update to the status of collections or payments at an appropriate future date. Additional guidance will be issued in the near future regarding 2017 benefit year appeals and reporting of risk adjustment transfer amounts by issuers for medical loss ratio (MLR) purposes.

I. Highlights of the Summary Report on Permanent Risk Adjustment Transfers for the 2017 Benefit Year

The permanent risk adjustment program functioned smoothly for the 2017 benefit year.

- The risk adjustment program applies to any health insurance issuer offering plans in the individual or small group market, with the exception of grandfathered health plans, group health insurance coverage described in 45 C.F.R. § 146.145(c), individual health insurance coverage described in 45 C.F.R. § 148.220, and any plan determined not to be a risk adjustment covered plan in the applicable Federally certified risk adjustment methodology.
- A total of 654 issuers participated in the risk adjustment program for the 2017 benefit year, of which 628 received a risk adjustment transfer, and 27 received a default risk adjustment charge in at least one risk pool.[1] In the 2016 benefit year 767 issuers participated in the risk adjustment program, showing a decrease of 113 issuers from 2016 to 2017.[2]
- Nationwide, the absolute value of total risk adjustment transfers across markets was about 8 percent of total premiums, slightly decreased from 9 percent of total premiums in the 2016 benefit year.

The permanent risk adjustment program is working as intended by more evenly spreading the financial risk borne by issuers that enrolled higher-risk individuals, thereby protecting issuers against adverse selection within a market within a state and supporting them in offering products that serve all types of consumers. We found that for the 2017 benefit year:

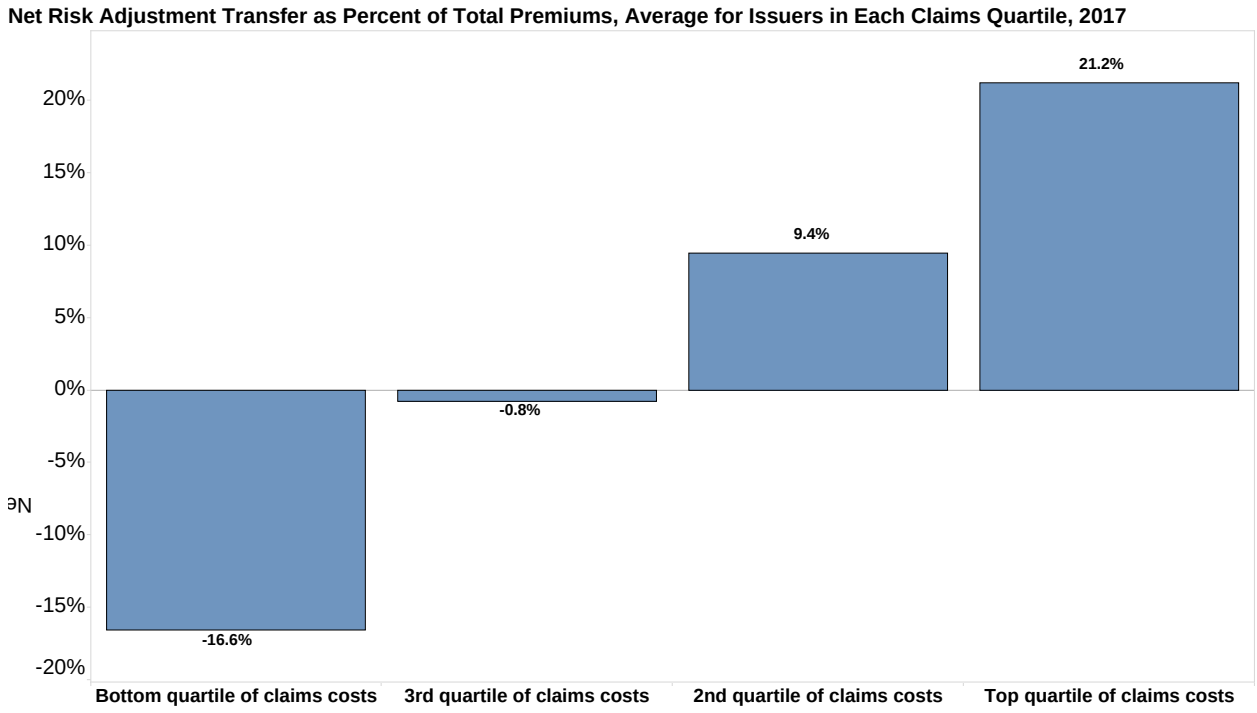
- **Risk adjustment transfers as a percent of premiums slightly decreased compared to the 2016 benefit year.** In the 2016 benefit year, the absolute value of risk adjustment transfers averaged 11 percent of premiums in the individual non-catastrophic risk pool and 6 percent of premiums in the small group risk pool. In the 2017 benefit year, the absolute value of risk adjustment transfers as a percent of premiums decreased to 10 percent of premiums in the individual non-catastrophic risk pool and decreased to 5 percent of premiums in the small group risk pool. This occurred mostly because of a continued shift in healthier enrollees from platinum and gold plans to silver and bronze plans in the individual market and to a lesser extent in the small group risk pool.

[1] One issuer elected to be assessed a default risk adjustment charge in the individual non-catastrophic risk pool, but will receive a risk adjustment transfer in the small group risk pool.

[2] The 2016 benefit year issuer count of 767 consists of 752 issuers who participated in the HHS-operated risk adjustment program and 15 Massachusetts issuers that participated in reinsurance only since Massachusetts operated a state-operated risk adjustment program in 2016.

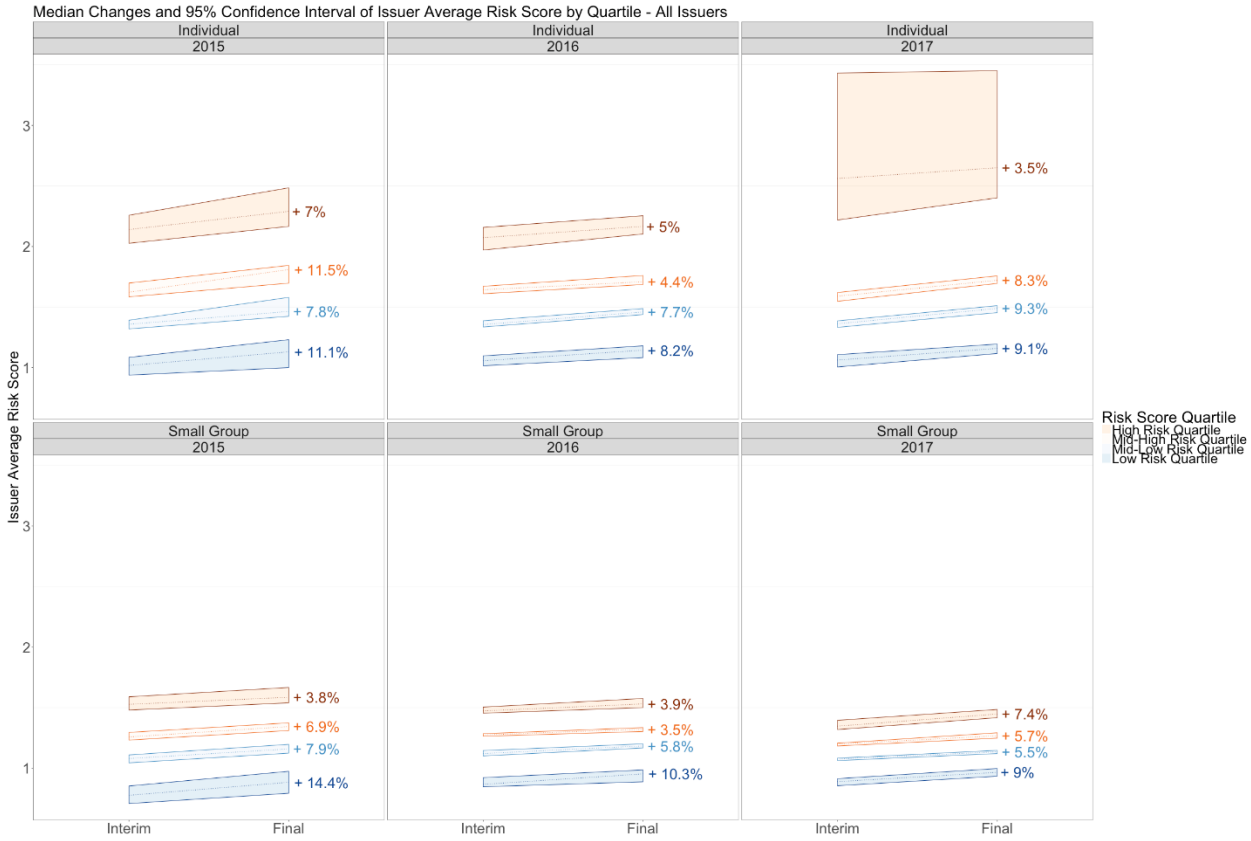
- **Amount of paid claims is strongly correlated with risk adjustment transfers (Figure 1).** Risk adjustment is intended to transfer funds from issuers with low actuarial risk to issuers with high actuarial risk. Issuers with relatively high paid claims amounts were more likely to receive risk adjustment payments, while issuers with relatively low paid claims amounts were more likely to be assessed charges. For example, in the individual non-catastrophic risk pool, issuers in the lowest quartile of claims costs, on average, were assessed a risk adjustment charge of approximately 17 percent of total collected premiums. Conversely, issuers in the highest quartile of claims costs received a risk adjustment payment of approximately 21 percent of their total premiums – a decline from 27 percent of total premiums in 2016, likely due to the enrollment shift towards bronze and silver. These correlations confirm that risk adjustment is working as intended to transfer funds from issuers with low actuarial risk to issuers with high actuarial risk.

Figure 1 ***(****Individual Non-Catastrophic Risk Pool Shown Only)*



- **Predictability between interim and final risk scores remained relatively stable between the 2016 and 2017 benefit years (Figure 2).** For the 2015 benefit year, the initial year CMS provided interim risk scores, 20 states plus the District of Columbia received interim risk adjustment results. For the 2017 benefit year, all 50 states plus the District of Columbia received interim results, indicating the continued improvement in the quality and quantity of issuer data submissions before the interim deadline. Predictability between interim and final risk scores was noticeably improved in the 2016 benefit year compared to 2015. This is reflected in the graph below, by the lower median percent change numbers to the right of each risk score quartile and the narrower shaded confidence intervals of each risk score quartile at final as compared to interim. This improved predictability largely carried forward into the 2017 benefit year, but varied by risk score quartile compared with 2016. This improved predictability associated with interim risk scores reflects higher quantity and quality data earlier in the data submission process year over year, and provides more reliable estimates prior to final data submission for issuers' rate setting and financial forecasts.

Figure 2 *(2015-2017 Individual Non-Catastrophic and Small Group Risk Pools)*



- **Risk scores declined.** Risk scores overall declined by approximately 5 percent in the individual non-catastrophic risk pool and 6 percent in the small group risk pool. All metal levels except bronze, as well as a majority of states, saw decreases in the state average risk score in the individual non-catastrophic risk pool from 2016 to 2017.

  The decline in risk score combined with decreasing enrollment may create the appearance that less healthy enrollees are leaving the individual market. However, due to changes in risk adjustment modeling, the 2016 risk scores cannot be compared to 2017 risk scores. Prior to 2017, the risk adjustment models relied upon other sources of industry data to determine enrollees' likely metal level enrollment distribution. The 2017 benefit year was the first time that HHS had access to and relied upon actual EDGE data for enrollment proportions by metal level to weight the denominator in the risk adjustment model. As a result, the increased denominator makes comparing risk scores from 2016 to 2017 difficult.

  Since we cannot compare risk scores between years, we note that while it may appear that risk in the individual non-catastrophic risk pool is decreasing, the percent of enrollees with one or more HCCs and the percent of enrollees with multiple HCCs increased in 2017 (Figure 3). This observation, combined with widespread decreases of state average risk scores and enrollment shifts by healthy enrollees from platinum and gold to silver and bronze plans, indicates that the decrease may be a reflection of changes made to the 2017 risk adjustment models and lower risk scores for healthy enrollees due to lower metal levels, rather than actual changes in individual non-catastrophic enrollees' health.

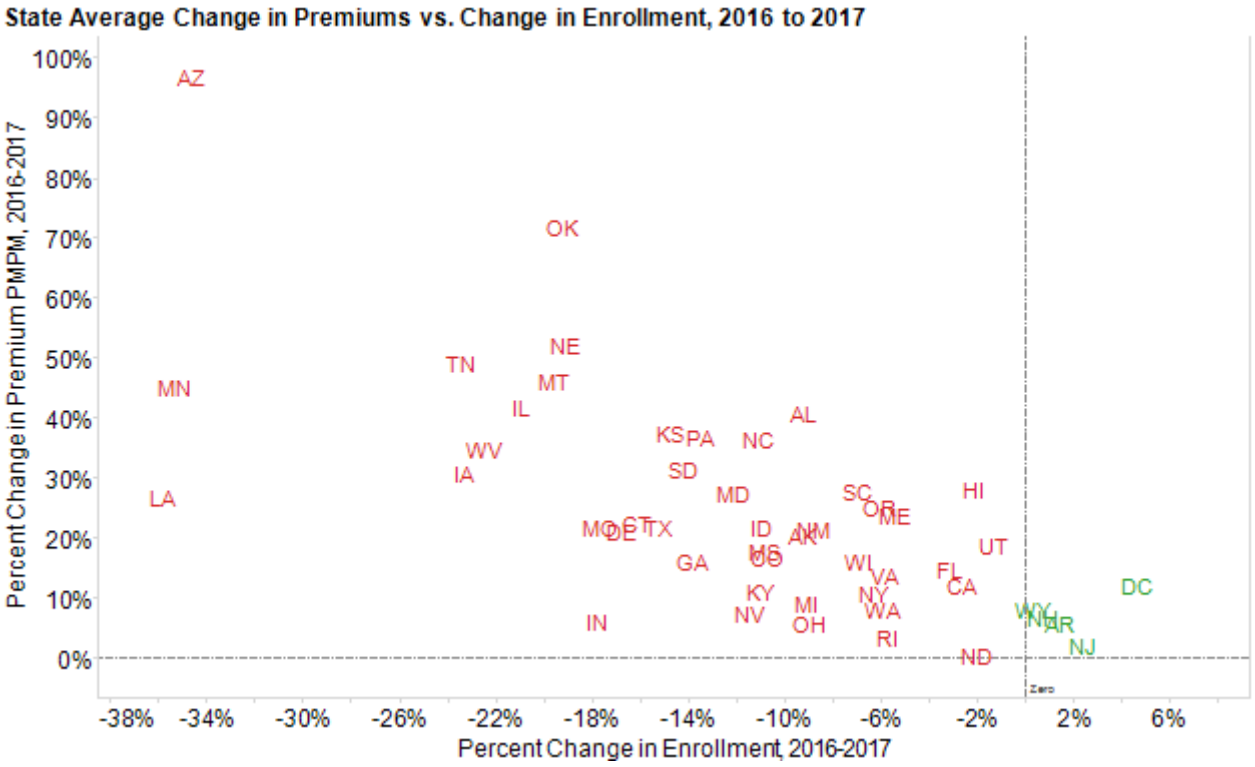
Figure 3 *(Individual Non-Catastrophic Risk Pool Shown Only)*

	% with 1 HCC	% with 2 HCCs	% with 3+ HCCs	% with 1+ HCCs
2015	12.6%	4.1%	2.7%	19.4%
2016	12.4%	4.2%	2.8%	19.4%
2017	12.9%	4.6%	3.2%	20.6%

- **Average premiums in the individual non-catastrophic risk pool increased significantly in 2017.** Previously, the overall average premium per member per month (PMPM) in the individual non-catastrophic risk pool experienced slight to moderate increases, rising 2 percent from 2014 to 2015 and 7 percent from 2015 to 2016. Premiums rose more sharply in the 2017 benefit year as issuers set rates that more accurately accounted for risk adjustment transfers. The 2017 benefit year risk adjustment data show that state average premiums PMPM for the individual non-catastrophic risk pool increased by about 21 percent.

  While the magnitude of the increase varied significantly across states, those with larger increases in average premiums tended to experience larger declines in enrollment in 2017 (Figure 4).

Figure 4 *(Individual Non-Catastrophic Risk Pool Shown Only)*



- **Trends varied by on-Exchange and off-Exchange enrollment in the individual non-catastrophic risk pool.** Average risk scores in the individual non-catastrophic risk pool were higher on-Exchange than off-Exchange, in every metal level except bronze, and average premium PMPM was higher on- rather than off-Exchange, particularly in the platinum metal level (Figures 5 and 6).

Figure 5 *(Individual Market Shown Only)*

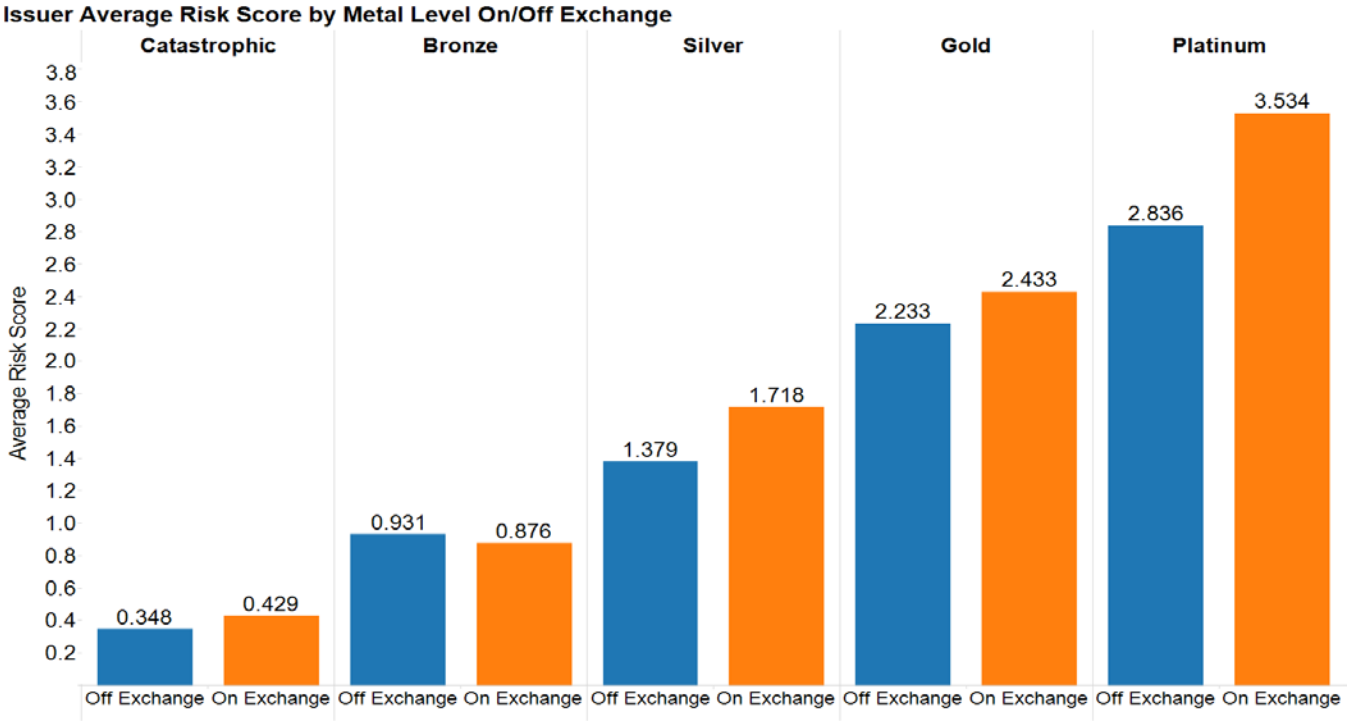
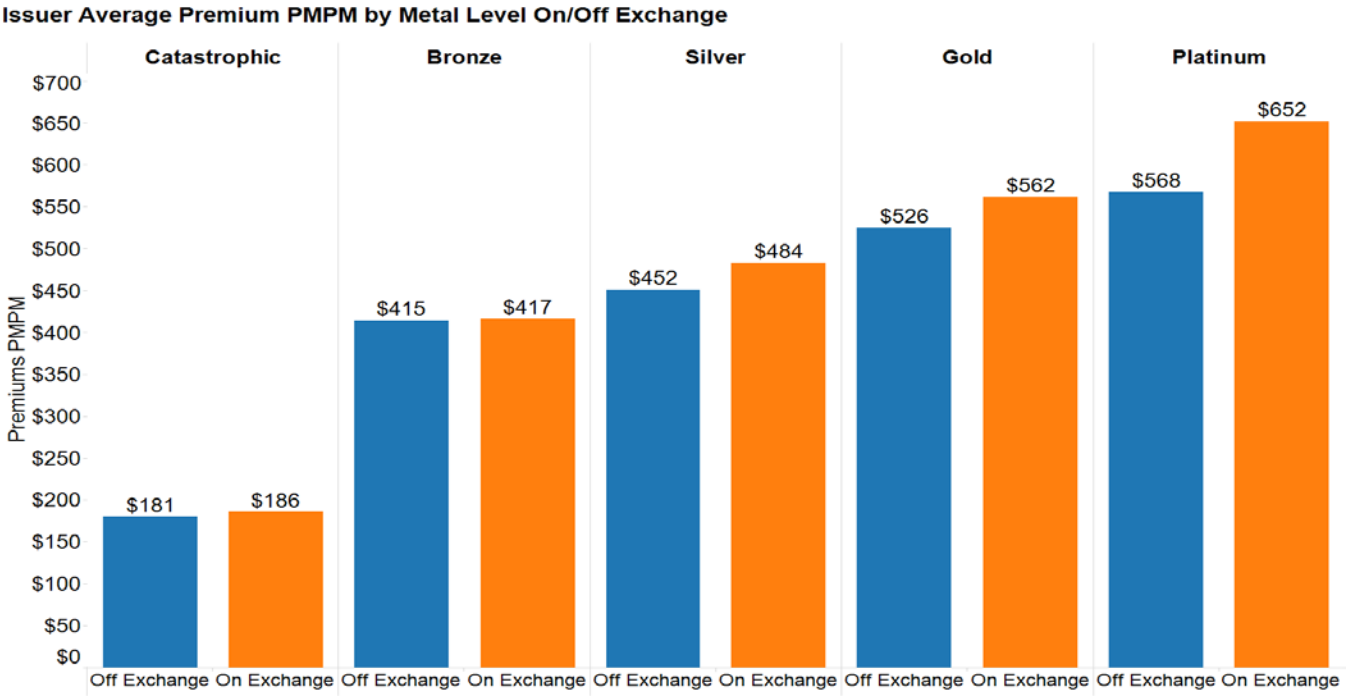


Figure 6 *(Individual Market Shown Only)*



II. Background

The Patient Protection and Affordable Care Act established a permanent risk adjustment program (in section 1343), one of three premium stabilization programs, to provide payments to health insurance issuers that cover higher-cost and higher-risk populations to more evenly spread the financial risk borne by issuers and help stabilize premiums. This report reflects the final estimated results of the risk adjustment program for the 2017 benefit year, the fourth year this program has operated.

The risk adjustment program provides payments to health insurance issuers that attract high risk enrollees, such as those with chronic conditions, reduces the incentives for issuers to avoid those enrollees, and lessens the potential influence of risk selection on the premiums that plans charge. The risk adjustment program therefore is designed to support plans offering a wide range of benefit designs that are available to consumers at an affordable premium.

As described in the HHS Notice of Benefit and Payment Parameters for 2014 Final Rule (78 Fed. Reg. 15409), the risk adjustment methodology developed by HHS is based on the premise that premiums should reflect the differences in plan benefits, quality, and efficiency – not the health status of the enrolled population. The HHS-operated risk adjustment methodology determines each plan's risk adjustment transfer amount based on the actuarial risk of enrollees, the actuarial value of coverage, utilization and the cost of doing business in local rating areas, and the effect of different cost-sharing levels on utilization. This methodology, which HHS applied in 50 states and the District of Columbia for the 2017 benefit year, transfers funds from plans with low risk enrollees to plans with high risk enrollees.

We note that data included in this report reflect amounts calculated based on the 2017 benefit year risk adjustment methodology established through notice with comment rulemaking (78 Fed. Reg. 15409 (Mar. 11, 2013), 79 Fed. Reg. 13743 (Mar. 11, 2014), 80 Fed. Reg. 10749 (Feb. 27, 2015), 81 Fed. Reg. 12204 (Mar. 8, 2016), 81 Fed. Reg. 94048 (Dec. 22, 2016), and 45 C.F.R. Part 153) and is provided for informational purposes. These amounts do not constitute specific obligations of Federal funds to any particular issuer or plan.

III. HHS-Operated Risk Adjustment Program Summary Data

Table 1 sets forth HHS-operated risk adjustment program summary data for the 2017 benefit year, including the number of issuers participating in HHS-operated risk adjustment transfers.

Table 1: HHS-Operated Risk Adjustment Program Summary Data[3]

HHS RISK ADJUSTMENT TRANSFER CATEGORY	NUMBER OF ISSUERS WITH RISK ADJUSTMENT COVERED PLANS IN HHS RISK ADJUSTMENT
Total Number of Issuers Participating in HHS Risk Adjustment Transfers	654
Issuers with Individual Non-Catastrophic Plans	373
Issuers with Individual Catastrophic Plans	176
Issuers with Small Group Plans	515
Issuers in a Merged Market[4]	18

Table 2 illustrates the national average enrollment weighted monthly premium by risk pool and the total percent of dollars that is expected to be transferred within each state market by using the absolute value of net transfers for each issuer operating within the market risk pool. The percentages are calculated based on summation of the absolute value of net transfers for each issuer in a specific market risk pool. This means that for net charges (otherwise reported as negative) we included the absolute value in the equation, net payments are already positive. This amount is then divided by the total premium for the market risk pool, which is calculated as the sum of the products of plan average premium and the billable member months. Total transfers for the 2017 benefit year – that is, the absolute value of risk adjustment charges and payments at the issuer level – were approximately $10.4 billion, with $5.2 billion in payments and $5.2 billion in charges.

Table 2: National Average Enrollment Weighted Monthly Premium by Risk Pool[5] **and HHS Risk Adjustment Absolute Value of Transfer Amounts and as a Percent of Premium by Risk Pool**

RISK POOL	NATIONAL AVERAGE ENROLLMENT WEIGHTED MONTHLY PREMIUM	ABSOLUTE VALUE OF TRANSFER AMOUNTS AS A PERCENT OF PREMIUM[6]	ABSOLUTE VALUE OF TRANSFER AMOUNTS ($ Billions)
Individual	$472	10 percent	$7.51
Small Group	$474	5 percent	$2.58
Catastrophic	$183	13 percent	$0.04
Merged	$446	5 percent	$0.23
National Average Premium	$471	8 percent	$10.37

[3] The total of the three market risk pool groups on this table will not sum to the total issuers with risk adjustment transfer calculations because some issuers provided plans in multiple markets.

[4] Massachusetts and Vermont are considered to have a merged market for purposes of the risk adjustment program. See https://www.regtap.info/uploads/library/RA_GuidanceMergedMarkets2017_030118_5CR_030118.pdf.

[5] Data includes only those issuers that successfully submitted data to the EDGE server as part of the HHS risk adjustment program. Premiums represent the average PMPM amount. They do not include any reduction in premiums due to advance payments of the premium tax credit.

[6] Absolute value of net transfer charge or payment calculated at issuer level and rounded to the nearest percentage point unless otherwise specified.

IV. HHS-Operated Risk Adjustment Program State-Specific Data

In *Appendix A,* we set forth the risk adjustment state averages with billable member months for the 2017 benefit year. *Appendix A* includes the state average monthly premiums by state and risk pool (catastrophic, individual non-catastrophic, small group, and merged), the state average plan liability risk score by state and risk pool, state average allowable rating factor by state and risk pool, state average actuarial value by state and risk pool, state average induced demand factor by state and risk pool, and state billable member months. We note that some data elements in *Appendix A* may not match the state risk pool averages found on issuers' reports in state risk pools that had a material discrepancy resulting in payment adjustments after the calculation of risk adjustment transfers.

Below we set forth a description of the calculations for state average premium, state average plan liability risk score, state average allowable rating factor, state average actuarial value, state average induced demand factor, and billable member months.

DATA ELEMENT	DESCRIPTION
State Average Premium	The state average premium for state market risk pool is the weighted average monthly premium for the state market risk pool, weighted by plan share of statewide enrollment in the state market risk pool.
State Average Plan Liability Risk Score (PLRS)	The state average PLRS is calculated as the summed products of PLRS and billable member months for all plans within the state market risk pool divided by total billable months for all plans within the state market risk pool.
State Average Allowable Rating Factor (ARF)	The state average ARF is calculated as the summed products of ARF and billable member months for the plans within the state market risk pool divided by total billable member months for all plans in the state market risk pool.
State Average Actuarial Value (AV)	The state average AV is calculated as the summed products of AV and billable member months for the plans within the state market risk pool divided by the total billable member months within the state market risk pool. AV corresponds with metal and catastrophic tiers as follows: * Catastrophic: 0.57 * Bronze: 0.60 * Silver: 0.70 * Gold: 0.80 * Platinum: 0.90
State Average Induced Demand Factor (IDF)	The state average IDF is calculated as the summed products of IDF and billable member months for the plans within the state market risk pool divided by the total billable member months within the state market risk pool. IDF corresponds with metal and catastrophic tiers as follows: *Catastrophic: 1.00 *Bronze: 1.00 *Silver: 1.03 *Gold: 1.08 *Platinum: 1.15
Billable Member Months	Billable member months are the member months of an individual or family policy that are included when setting the policy's premium rate.

V. HHS Risk Adjustment Geographic Cost Factor (GCF)

In *Appendix B*, we set forth the geographic cost factor (GCF) including billable member months by state and rating area. The purpose of the GCF adjustment is to remove differences in premium due to allowable geographic rating variation. GCFs are calculated for each rating area established by the state under 45 C.F.R. § 147.102(b).

The GCFs are calculated based on the observed average silver plan premium for the metal-level risk pool (calculated separately for individual and small group if the state does not have a merged market) or catastrophic plan premium for the catastrophic risk pool, in a geographic area relative to the statewide average silver or catastrophic plan premium. Calculation of the GCF involves three steps. First, the average premium is computed for each silver or catastrophic plan, as applicable, in each rating area (using the same formula that is used to compute plan premiums in the statewide average premium calculation). The second step is to generate a set of plan average premiums that standardizes the premiums for age rating. Plan premiums are standardized for age by dividing the average plan premium by the plan rating factor (calculated at the rating area level), the enrollment-weighted rating factor applied to all billable members. Lastly, a GCF is computed for each rating area. For all silver plans, therefore, the GCF is the ratio of the enrollment-weighted average age-standardized premium revenue for a rating area to the overall statewide enrollment-weighted average age-standardized premium revenue (a separate ratio is calculated for catastrophic plans). The enrollment-weighted statewide average of plan GCF values will equal 1.0, so the GCF can be interpreted as the percentage by which any geographic area's costs deviate from the state average.[7]

[7] A GCF of zero indicates no silver plans in the rating area. In final risk adjustment calculations, a GCF of zero will have an imputed value of one.

VI. Risk Adjustment Issuer-Specific Data*

Below we set forth the 2017 benefit year risk adjustment transfer amounts by issuer.

* *"$-" or "$0.00" risk adjustment transfer*: We signify *"$-"* in a risk pool for which an issuer does not have enrollment, and thus, does not have a risk adjustment transfer. We signify *"$0.00"* in the risk pool for which an issuer is the only issuer in the risk pool.

Table 3: Issuer-Specific Information[8] *(Appendix C)*

HIOS ID	HIOS INSURANCE COMPANY NAME	STATE	HHS RISK ADJUSTMENT TRANSFER AMOUNT (INDIVIDUAL NON-CATASTROPHIC RISK POOL)	HHS RISK ADJUSTMENT TRANSFER AMOUNT (CATASTROPHIC RISK POOL)	HHS RISK ADJUSTMENT TRANSFERS AMOUNT (SMALL GROUP RISK POOL)
11082	Aetna, Inc.	AK	$-	$-	$70,609.53
38344	Premera Blue Cross	AK	$0.00	$-	$1,615,253.34
73836	Moda Health Plan, Inc.	AK	$-	$-	($744,336.01)
80049	UnitedHealth Group, Inc.	AK	$-	$-	($941,526.90)
46944	Blue Cross Blue Shield of Alabama	AL	($172,651.78)	$0.00	$1,662,986.37
68259	UnitedHealth Group, Inc.	AL	$172,651.77	$-	($1,698,227.57)
69461	UnitedHealth Group, Inc.	AL	$-	$-	$737,981.76
93018	Viva Health, Inc.	AL	$-	$-	($702,740.49)
13262	Arkansas Blue Cross and Blue Shield	AR	$-	$-	($251,058.68)
22732	UnitedHealth Group, Inc.	AR	$-	$-	($815,079.73)
37903	QualChoice Arkansas	AR	($5,733,419.10)	$-	($69,936.67)
60079	Aetna, Inc.	AR	($2,159.13)	$-	$-
62141	Centene Corporation	AR	($15,559,654.63)	$-	$-
65817	UnitedHealth Group, Inc.	AR	$40,617.57	$-	($102,649.81)
70525	QualChoice Arkansas	AR	$1,885,571.16	($24,504.01)	$86,895.32
75293	Arkansas Blue Cross and Blue Shield	AR	$19,369,044.15	$24,504.00	$1,570,738.41
81392	UnitedHealth Group, Inc.	AR	$-	$-	($260,744.68)
89365	Federated Mutual	AR	$-	$-	($158,164.22)
23307	Humana, Inc.	AZ	$-	$-	($5,736,667.03)
40702	UnitedHealth Group, Inc.	AZ	$-	$-	($5,694,852.10)
51485	Centene Corporation	AZ	$-	$-	($1,365,785.00)
53901	Blue Cross Blue Shield of Arizona, Inc.	AZ	($36,394,767.43)	$0.00	($3,329,219.82)
66105	Humana, Inc.	AZ	$5,133.15	$-	($302,647.69)
70904	WMI Mutual Insurance Company	AZ	$-	$-	($36,649.03)
78611	Aetna, Inc.	AZ	$2,317,108.78	$-	($33,786.35)
82011	UnitedHealth Group, Inc.	AZ	$-	$-	$14,363,165.23
84251	Aetna, Inc.	AZ	$-	$-	$2,467,840.53
86830	Cigna	AZ	$13,317,786.40	$-	$52,403.83

[8] Table 4 provides the issuer specific information for Massachusetts and Vermont issuers.

HIOS ID	HIOS INSURANCE COMPANY NAME	STATE	HHS RISK ADJUSTMENT TRANSFER AMOUNT (INDIVIDUAL NON-CATASTROPHIC RISK POOL)	HHS RISK ADJUSTMENT TRANSFER AMOUNT (CATASTROPHIC RISK POOL)	HHS RISK ADJUSTMENT TRANSFERS AMOUNT (SMALL GROUP RISK POOL)
91450	Centene Corporation	AZ	$24,347,486.57	$-	($558,508.96)
97667	Cigna	AZ	($3,909,461.51)	$-	($66,654.76)
98971	UnitedHealth Group, Inc.	AZ	$316,714.04	$-	$241,361.02
10544	Oscar Health	CA	($4,276,703.19)	($119,250.41)	$-
18126	Molina Healthcare	CA	($227,378,843.71)	($128,550.50)	$-
20523	Aetna, Inc.	CA	$-	$-	$2,437,860.40
27330	Kaiser Permanente	CA	$-	$-	($523,926.40)
27603	Anthem, Inc.	CA	$18,476,551.48	($1,694,816.50)	$198,601,589.47
40025	Cigna	CA	$6,181,173.26	$-	$-
40513	Kaiser Permanente	CA	($253,147,852.38)	($1,662,170.69)	($311,731,053.55)
40733	Aetna, Inc.	CA	$-	$-	$21,185,692.35
47579	Chinese Community Health Plan	CA	($25,477,134.14)	($4,586.12)	($1,737,995.17)
49116	UnitedHealth Group, Inc.	CA	$-	$-	($40,892,493.33)
56887	Ventura County Health Care Plan	CA	$-	$-	$558,472.42
64210	Sutter Health Plan	CA	($7,713.66)	$-	($19,257,662.02)
64618	National Health Insurance Company	CA	$-	$-	$19,746.83
67138	Centene Corporation	CA	($56,491,988.14)	($90,404.10)	($9,976,610.01)
70285	Blue Shield of California	CA	$556,165,717.71	$4,059,990.65	$136,139,531.69
84014	County of Santa Clara	CA	($10,854,815.92)	($150,253.26)	$-
92499	Sharp Health Plan	CA	($3,299,537.36)	($456,689.85)	($11,404,274.30)
92815	Local Initiative Health Authority for Los Angeles County	CA	($33,305,153.65)	($41,941.79)	$-
93689	Western Health Advantage	CA	($7,452,235.61)	($79,493.56)	$1,519,812.34
95677	UnitedHealth Group, Inc.	CA	$-	$-	$11,101,755.16
99110	Centene Corporation	CA	$40,868,535.39	$368,166.09	$23,959,554.19
21032	Kaiser Permanente	CO	($64,337,584.65)	($529,642.62)	($18,516,295.44)
28700	US Health Group	CO	$704,700.87	$-	$-
31070	Bright Health Insurance Company	CO	($6,192,240.81)	($1,444,024.58)	$-
35944	Kaiser Permanente	CO	$-	$-	($15,867.55)
39041	Aetna, Inc.	CO	$-	$-	$651,309.42
41341	UnitedHealth Group, Inc.	CO	$513,309.23	$664,572.71	$-
49375	Cigna	CO	$22,551,799.25	$-	$-
59036	UnitedHealth Group, Inc.	CO	($409.55)	$-	($10,897,579.97)
63312	Colorado Choice Health Plans	CO	$3,997,526.46	$295,544.01	($89,723.86)
66699	Denver Health Medical Plan, Inc.	CO	$7,486,694.78	$-	$-
67879	UnitedHealth Group, Inc.	CO	$-	$-	$27,813,071.36
74320	Humana, Inc.	CO	$10,898.81	$-	$1,299,220.37
76680	Anthem, Inc.	CO	$30,992,082.99	($1,516,774.26)	($9,609,395.96)

HIOS ID	HIOS INSURANCE COMPANY NAME	STATE	HHS RISK ADJUSTMENT TRANSFER AMOUNT (INDIVIDUAL NON-CATASTROPHIC RISK POOL)	HHS RISK ADJUSTMENT TRANSFER AMOUNT (CATASTROPHIC RISK POOL)	HHS RISK ADJUSTMENT TRANSFERS AMOUNT (SMALL GROUP RISK POOL)
79509	Humana, Inc.	CO	$-	$-	$627,794.57
80208	Rocky Mountain Health Care Options	CO	$-	$-	$440,238.50
87269	Anthem, Inc.	CO	$841,186.64	$2,530,324.80	$10,886,278.11
97879	Rocky Mountain Health Care Options	CO	$3,432,035.89	$-	($2,589,049.52)
29462	UnitedHealth Group, Inc.	CT	$-	$-	$4,912,295.94
39159	Aetna, Inc.	CT	$956,418.14	$-	$5,859,129.11
40591	UnitedHealth Group, Inc.	CT	($8,237.12)	($11,624.14)	$-
49650	UnitedHealth Group, Inc.	CT	$-	$-	$423,792.00
71179	UnitedHealth Group, Inc.	CT	$-	$-	($144,694.33)
75091	ConnectiCare, Inc.	CT	($203,668.61)	$-	$14,877.22
76962	ConnectiCare, Inc.	CT	($11,984,032.56)	($65,803.71)	$-
86545	Anthem, Inc.	CT	$14,076,814.79	$77,427.82	$3,667,865.78
87354	Cigna	CT	$1,281,052.22	$-	$-
89130	HPHC Insurance Company, Inc	CT	$-	$-	($8,968,585.94)
94815	ConnectiCare, Inc.	CT	($4,118,346.92)	$-	($5,570,057.74)
95882	HPHC Insurance Company, Inc	CT	$-	$-	($194,622.18)
21066	UnitedHealth Group, Inc.	DC	$-	$-	($472,015.89)
41842	UnitedHealth Group, Inc.	DC	$-	$-	$1,562,031.69
73987	Aetna, Inc.	DC	$-	$-	$154,887.96
75753	UnitedHealth Group, Inc.	DC	$-	$-	($627,818.41)
77422	Aetna, Inc.	DC	$-	$-	($533,232.20)
78079	CareFirst	DC	$6,500,181.23	$-	$10,874,396.62
86052	CareFirst	DC	($3,723,041.82)	$2,142.18	($9,350,612.52)
94506	Kaiser Permanente	DC	($2,777,139.42)	($2,142.18)	($1,607,637.27)
29497	Aetna, Inc.	DE	($595,457.11)	$-	($1,014,864.19)
61021	UnitedHealth Group, Inc.	DE	$-	$-	($444,816.07)
67190	Aetna, Inc.	DE	($2,660,555.55)	$-	$923,437.73
76168	Highmark	DE	$3,336,393.06	$0.00	$696,498.63
89587	UnitedHealth Group, Inc.	DE	($80,380.41)	$-	$-
97569	UnitedHealth Group, Inc.	DE	$-	$-	($160,256.14)
16842	Blue Cross and Blue Shield of Florida	FL	$666,342,217.61	$-	$19,195,173.11
18628	Aetna, Inc.	FL	$504,174.05	$3,291.40	$11,932,273.20
19898	AvMed, Inc.	FL	($12,556,467.84)	$-	$801,626.31
21663	Centene Corporation	FL	($298,557,758.47)	$-	$-
23841	Aetna, Inc.	FL	$4,120,333.01	$-	$2,358,859.29
30252	Blue Cross and Blue Shield of Florida	FL	($49,062,378.52)	$-	($18,541,996.03)
35783	Humana, Inc.	FL	$25,090,635.59	$281,746.71	($11,862,572.41)
36194	Health First, Inc.	FL	$9,690,044.27	($187,145.21)	($1,751,296.18)
40442	US Health Group	FL	$164,128.35	$-	$-

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42204	UnitedHealth Group, Inc.	FL	$-	$-	($114,840.94)
43839	UnitedHealth Group, Inc.	FL	$-	$-	$5,273,063.15
48121	Cigna	FL	$5,272,866.93	$-	$-
54172	Molina Healthcare	FL	($344,043,435.16)	$-	$-
56503	Florida Health Care Plan, Inc.	FL	($5,552,422.56)	($97,892.89)	($1,611,145.68)
57451	Aetna, Inc.	FL	($2,054,259.40)	$-	$-
61405	Healthfirst	FL	($72,760.48)	$-	($1,609,973.24)
66966	Capital Health Plan	FL	$-	$-	($237,935.62)
68398	UnitedHealth Group, Inc.	FL	$642,322.46	$-	($1,823,207.54)
77150	Health First, Inc.	FL	$-	$-	$774,154.89
80779	UnitedHealth Group, Inc.	FL	$-	$-	($4,192,749.99)
99308	Humana, Inc.	FL	$-	$-	($199,405.64)
12442	Nippon Life Benefits	GA	$-	$-	$224,509.54
13535	UnitedHealth Group, Inc.	GA	$-	$-	$2,042,988.05
30552	UnitedHealth Group, Inc.	GA	$-	$-	($4,149,929.77)
37001	Humana, Inc.	GA	$-	$-	$542,258.43
38835	Federated Mutual	GA	$-	$-	($111,539.18)
43802	UnitedHealth Group, Inc.	GA	$113,966.83	$-	$991,363.39
49046	Anthem, Inc.	GA	$47,890,056.76	($831,656.66)	$8,334,877.82
50491	Cigna	GA	($1,249,083.97)	$-	$-
63411	Anthem, Inc.	GA	$-	$-	$707,351.80
70893	Centene Corporation	GA	($60,110,112.97)	$-	$-
82302	Kaiser Permanente	GA	$-	$-	$12,306.97
82824	Aetna, Inc.	GA	($2,889,649.91)	$-	$426,428.16
83761	Alliant Health Plans	GA	$27,505,745.34	$-	$710,630.46
83978	Aetna, Inc.	GA	$3,737,745.83	$-	$10,449,185.82
89942	Kaiser Permanente	GA	($21,666,714.42)	$221,373.55	($3,750,814.09)
93332	Humana, Inc.	GA	$5,988,178.81	$610,283.11	($16,404,683.09)
95852	UnitedHealth Group, Inc.	GA	$679,867.71	$-	($24,934.27)
18350	Hawaii Medical Service Association	HI	$25,998,454.64	$0.00	$14,313,880.24
54179	UnitedHealth Group, Inc.	HI	$-	$-	$2,583.24
56682	Hawaii Medical Assurance Association	HI	$-	$-	($111,183.83)
60612	Kaiser Permanente	HI	($25,998,454.63)	$-	($11,879,869.65)
95366	University Health Alliance (UHA)	HI	$-	$-	($2,325,409.97)
18973	Aetna, Inc.	IA	($11,142,633.62)	($154,460.80)	($448,020.13)
25896	Wellmark, Inc.	IA	$799,924.59	$-	($874,643.55)
27651	Quartz Health Solutions	IA	($661,826.98)	($3,310.46)	($106,991.78)
41397	Federated Mutual	IA	$-	$-	($642,170.51)
50735	Medical Associates Health Plans	IA	$-	$-	$237,745.57

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51474	Pekin Life Insurance Company	IA	$-	$-	($73,617.11)
56610	UnitedHealth Group, Inc.	IA	$-	$-	$414,993.95
72160	Wellmark, Inc.	IA	$10,322,659.48	$-	$3,386,559.75
74406	Wellmark, Inc.	IA	($431,036.41)	$-	($400,870.42)
74980	Avera Health Plans, Inc.	IA	$-	$-	$111,050.48
77638	Health Alliance Medical Plans, Inc.	IA	$-	$-	($34,436.34)
78252	Aetna, Inc.	IA	$-	$-	($106,451.56)
85930	Sanford Health Plan	IA	$-	$-	($52,263.31)
87928	Wellmark, Inc.	IA	($406,804.09)	$-	($237,880.07)
88678	UnitedHealth Group, Inc.	IA	$-	$-	($1,173,004.93)
93078	Medica Insurance Company	IA	$1,519,717.15	$157,771.27	$-
26002	SelectHealth	ID	$7,551,524.90	$128,202.40	($238,815.95)
38128	Montana Health Cooperative	ID	($9,609,851.76)	($220,730.62)	($120,655.28)
43541	National Health Insurance Company	ID	$-	$-	($276,891.35)
44648	Cambia Health Solutions	ID	$729,602.33	$-	$2,293,255.45
45059	Aetna, Inc.	ID	$-	$-	($10,101.50)
50118	UnitedHealth Group, Inc.	ID	$-	$-	$1,625.12
59765	Cambia Health Solutions	ID	($4,297,893.26)	$-	$-
60597	PacificSource Health Plans	ID	$3,063,266.71	($40,488.63)	($1,864,614.35)
61175	Aetna, Inc.	ID	$-	$-	$135,535.65
61589	Blue Cross of Idaho Health Service, Inc.	ID	$2,563,351.03	$133,016.84	$80,662.21
18389	Pekin Life Insurance Company	IL	$-	$-	($137,667.78)
20129	Health Alliance Medical Plans, Inc.	IL	($11,663,474.42)	($78,603.46)	($1,292,207.35)
24301	Medical Associates Health Plans	IL	$-	$-	$56,930.97
27833	Centene Corporation	IL	($77,760,248.04)	$-	$-
34446	UnitedHealth Group, Inc.	IL	$-	$-	$711,640.34
35670	Aetna, Inc.	IL	$806,358.56	$-	($168,289.40)
36096	Health Care Service Corporation	IL	$145,478,236.18	$65,358.61	$6,201,452.87
42529	UnitedHealth Group, Inc.	IL	$-	$-	($2,457,421.07)
53882	Cigna	IL	($53,357,618.05)	$-	$-
54322	MercyCare Insurance Company	IL	$-	$-	($110,789.80)
58239	UnitedHealth Group, Inc.	IL	$-	$-	($1,315,014.25)
58288	Humana, Inc.	IL	($2,473,593.04)	$13,244.83	($1,685,150.33)
66143	Federated Mutual	IL	$-	$-	($2,017,781.03)

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68303	Humana, Inc.	IL	$-	$-	$7,796.46
72547	Aetna, Inc.	IL	$15,187.22	$-	$2,648,862.56
78463	UnitedHealth Group, Inc.	IL	($461,475.84)	$-	($151,696.14)
82506	US Health Group	IL	$254,252.40	$-	$-
92476	UnitedHealth Group, Inc.	IL	$-	$-	$78,898.64
96601	Aetna, Inc.	IL	$868,303.50	$-	$38,569.24
99129	Aetna, Inc.	IL	($1,705,928.50)	$-	($408,133.93)
11104	Federated Mutual	IN	$-	$-	$851,008.13
17575	Anthem, Inc.	IN	$46,155,733.81	$0.00	$7,413,866.40
32378	Aetna, Inc.	IN	$-	$-	($247,035.83)
33380	Indiana University Health	IN	($8,594,425.99)	$-	($649,334.41)
36373	UnitedHealth Group, Inc.	IN	$125,632.53	$-	$249,036.85
43442	Humana, Inc.	IN	$-	$-	($161,650.57)
50816	Physicians Health Plan of Northern Indiana, Inc.	IN	$-	$-	($1,565,817.43)
54192	CareSource	IN	($15,998,467.00)	$-	$-
62033	MDwise	IN	$5,435,307.07	$-	$-
72850	UnitedHealth Group, Inc.	IN	$-	$-	($6,119,832.00)
76179	Centene Corporation	IN	($27,123,780.39)	$-	$-
79828	Pekin Life Insurance Company	IN	$-	$-	($61,075.00)
96992	Aetna, Inc.	IN	$-	$-	($15,458.23)
99791	Humana, Inc.	IN	$-	$-	$306,292.27
18558	Blue Cross and Blue Shield of Kansas, Inc.	KS	$8,529,904.66	$-	($1,394,664.85)
19968	Humana, Inc.	KS	$-	$-	$1,327,962.27
27811	Blue Cross and Blue Shield of Kansas, Inc.	KS	($19,756,554.76)	$-	($1,970,523.23)
39520	Medica Insurance Company	KS	$8,197,651.06	$217,292.28	$-
49857	Humana, Inc.	KS	$-	$-	$367,312.94
57850	Aetna, Inc.	KS	$-	$-	($78,377.66)
61430	Aetna, Inc.	KS	($167,200.33)	$-	$-
65598	Aetna, Inc.	KS	$143,993.50	$-	$-
84600	Aetna, Inc.	KS	($79,236.89)	$-	$198,720.74
94248	Blue Cross and Blue Shield of Kansas City	KS	$3,131,442.74	($217,292.29)	($225,128.83)
94968	UnitedHealth Group, Inc.	KS	$-	$-	$2,137,648.09
96352	Federated Mutual	KS	$-	$-	($362,949.52)
15411	Humana, Inc.	KY	$444,123.60	($101,817.11)	($754,945.32)
23671	UnitedHealth Group, Inc.	KY	$29,230.72	$-	($2,775,937.89)
28773	UnitedHealth Group, Inc.	KY	$-	$-	$55,109.62
34822	Aetna, Inc.	KY	($182,910.40)	$-	($10,396.35)
36239	Anthem, Inc.	KY	$10,657,590.47	($54,832.40)	$5,247,388.21
40586	Baptist Health Plan	KY	$-	$-	($1,352,232.72)

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45636	CareSource	KY	($11,176,017.97)	$156,649.50	$-
45920	UnitedHealth Group, Inc.	KY	$-	$-	($408,985.74)
47949	UnitedHealth Group, Inc.	KY	$227,983.57	$-	$-
14030	Aetna, Inc.	LA	$-	$-	$172,687.57
19636	Blue Cross Blue Shield of Louisiana	LA	($53,282,415.08)	$-	($6,522,359.29)
22381	Aetna, Inc.	LA	$-	$-	($4,874.45)
38499	UnitedHealth Group, Inc.	LA	$354,326.24	$-	$324,017.56
44965	Humana, Inc.	LA	($34,530,601.67)	$0.00	($4,426,481.25)
53946	UnitedHealth Group, Inc.	LA	$-	$-	($827,048.55)
67243	Vantage Health Plan, Inc.	LA	($1,189,558.38)	$-	($38,945.89)
69842	UnitedHealth Group, Inc.	LA	$-	$-	($837,243.34)
81941	Aetna, Inc.	LA	($402,292.63)	$-	($27,929.35)
97176	Blue Cross Blue Shield of Louisiana	LA	$89,050,541.52	$-	$12,188,176.95
23620	UnitedHealth Group, Inc.	MD	$-	$-	($1,665,593.79)
28137	CareFirst	MD	$3,194,767.04	($166,411.99)	($12,502,768.73)
32812	Cigna	MD	$1,904,523.01	$-	$-
45532	CareFirst	MD	$40,089,507.39	$-	$13,744,600.35
65635	UnitedHealth Group, Inc.	MD	$-	$-	($491,443.80)
66516	Aetna, Inc.	MD	$-	$-	$2,376,609.74
70767	Aetna, Inc.	MD	$-	$-	$1,210,461.02
72375	UnitedHealth Group, Inc.	MD	$-	$-	($6,573,384.29)
72564	Evergreen Health Cooperative, Inc.	MD	$-	$-	($12,553,358.10)
90296	Kaiser Permanente	MD	($76,072,410.03)	$166,411.98	$297,840.38
94084	CareFirst	MD	$30,869,159.91	$-	$19,746,359.32
11593	HPHC Insurance Company, Inc	ME	$-	$-	$1,241,361.85
33653	Maine Community Health Options	ME	$12,970,061.86	$77,398.92	($1,702,853.02)
48396	Anthem, Inc.	ME	($7,710,588.40)	($77,398.92)	($927,203.64)
53357	Aetna, Inc.	ME	$-	$-	$3,984,269.79
73250	Aetna, Inc.	ME	($861,856.86)	$-	$395,130.30
90214	UnitedHealth Group, Inc.	ME	$-	$-	$167,711.97
96667	HPHC Insurance Company, Inc	ME	($4,397,616.66)	$-	($3,158,417.23)
15560	Blue Cross Blue Shield of Michigan	MI	$115,031,970.70	$2,097,903.42	$16,280,762.99
20662	Physicians Health Plan	MI	$-	$-	$204,816.58
29241	Priority Health	MI	$-	$-	$1,803,921.66
29698	Priority Health	MI	($51,264,049.56)	$-	($6,012,985.38)
37651	Health Alliance Plan (HAP)	MI	($10,217,305.00)	($813,903.65)	$1,936,909.52
40047	Molina Healthcare	MI	($25,642,430.62)	$-	$-
46275	Humana, Inc.	MI	$470,270.48	($369,552.25)	$-

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52670	UnitedHealth Group, Inc.	MI	$-	$-	($47,492.44)
58594	Meridian Health Plan of Michigan, Inc.	MI	($7,246,589.76)	($14,891.83)	$-
60829	Physicians Health Plan	MI	($4,138,643.29)	($4,920.24)	($383,256.82)
62294	Humana, Inc.	MI	$-	$-	($234,087.67)
63631	UnitedHealth Group, Inc.	MI	$-	$-	$635,881.76
67183	Total Health Care USA, Inc.	MI	$1,451,383.50	$-	$797,979.46
67577	Health Alliance Plan (HAP)	MI	($1,342,980.92)	($22,352.26)	($290,881.80)
74917	McLaren Health Care	MI	$1,632,443.19	($8,459.60)	($2,215,716.04)
81068	Aetna, Inc.	MI	$135,739.67	$-	$-
82649	Federated Mutual	MI	$-	$-	($4,226,509.16)
95233	Paramount Insurance Company	MI	$-	$-	$514,718.89
98185	Blue Cross Blue Shield of Michigan	MI	($18,869,808.35)	($863,823.58)	($8,764,061.52)
31616	Medica Insurance Company	MN	$1,026,285.49	$-	$4,249,844.27
34102	HealthPartners Insurance Company	MN	($11,779,708.00)	($25,623.49)	$-
49316	Blue Cross Blue Shield of Minnesota	MN	$576,069.02	$7,742.76	$27,191,741.94
52346	Sanford Health Plan	MN	$-	$-	($35,741.68)
57129	Blue Cross Blue Shield of Minnesota	MN	$18,188,214.99	$-	($1,736,470.54)
60769	Federated Mutual	MN	$-	$-	($4,695,175.01)
65847	Medica Insurance Company	MN	$4,736,082.02	$279,392.44	$-
70373	Quartz Health Solutions	MN	$-	$-	($140,404.30)
79888	HealthPartners Insurance Company	MN	$-	$-	($20,639,939.50)
85654	HealthPartners Insurance Company	MN	($32,581,892.54)	($539,198.50)	($243,046.42)
85736	UCare Minnesota	MN	$16,940,395.77	$244,878.27	$-
88102	PreferredOne Insurance Company	MN	$2,894,553.23	$32,808.51	($4,018,305.68)
97624	PreferredOne Insurance Company	MN	$-	$-	$67,496.94
30613	Humana, Inc.	MO	($953,788.23)	$15,772.32	($2,632,385.19)
32753	Anthem, Inc.	MO	($16,369,614.91)	$387,467.61	$2,252,545.70
32898	Aetna, Inc.	MO	$-	$-	$7,690.31
34762	Blue Cross and Blue Shield of Kansas City	MO	$11,830,633.92	($296,453.99)	($193,169.87)
44240	Aetna, Inc.	MO	$26,201,662.68	$-	$-
44527	Aetna, Inc.	MO	$38,054,998.21	$-	($283,399.25)

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48161	Aetna, Inc.	MO	$902,121.89	$-	($165,381.25)
64701	Federated Mutual	MO	$-	$-	($86,018.29)
74483	Cigna	MO	($55,179,640.61)	$-	$-
95426	UnitedHealth Group, Inc.	MO	$-	$-	$3,411,247.92
96384	Cox HealthPlans	MO	($4,486,372.84)	($106,785.94)	($2,311,130.13)
11721	Blue Cross Blue Shield of Mississippi	MS	($3,256,377.37)	$-	$297,010.36
26781	UnitedHealth Group, Inc.	MS	$-	$-	($101,762.79)
38420	Federated Mutual	MS	$-	$-	$388,021.97
48963	Humana, Inc.	MS	$6,306,573.00	$0.00	($121,751.15)
61794	UnitedHealth Group, Inc.	MS	$-	$-	($100,970.75)
90714	Centene Corporation	MS	($3,114,444.88)	$-	$-
97560	UnitedHealth Group, Inc.	MS	$64,249.25	$-	($245,314.69)
98805	UnitedHealth Group, Inc.	MS	$-	$-	($115,232.97)
23603	PacificSource Health Plans	MT	($4,285,653.39)	$-	($5,022,612.65)
30751	Health Care Service Corporation	MT	$30,794,654.82	($10,026.79)	$5,135,778.09
32225	Montana Health Cooperative	MT	($26,509,001.44)	$10,026.79	($195,493.29)
46621	UnitedHealth Group, Inc.	MT	$-	$-	$82,327.89
11512	Blue Cross Blue Shield of North Carolina	NC	$32,023,793.52	($21,491.14)	$20,825,917.17
24588	Federated Mutual	NC	$-	$-	($874,338.96)
40411	Cigna	NC	$1,957,591.49	$-	$-
43283	FirstCarolinaCare Insurance Company	NC	$-	$-	($320,037.63)
54332	UnitedHealth Group, Inc.	NC	$754,873.06	$-	($6,813,683.01)
56346	Aetna, Inc.	NC	$-	$-	($496.55)
58658	UnitedHealth Group, Inc.	NC	$-	$-	($1,500,782.33)
61644	Aetna, Inc.	NC	$-	$-	($1,882,911.96)
61671	Aetna, Inc.	NC	$501,186.87	$21,491.13	($829,824.11)
69347	UnitedHealth Group, Inc.	NC	$-	$-	($8,505,943.13)
72487	UnitedHealth Group, Inc.	NC	$-	$-	($55,295.84)
73943	Cigna	NC	($35,237,444.92)	$-	$-
94459	Aetna, Inc.	NC	$-	$-	($42,603.88)
37160	Blue Cross Blue Shield of North Dakota	ND	$2,750,180.76	$42,670.26	$2,043,714.04
39364	Medica Insurance Company	ND	$-	$-	($637,918.70)
73751	Medica Insurance Company	ND	($1,475,727.34)	($40,724.05)	($86,298.47)
89364	Sanford Health Plan	ND	($1,274,453.42)	($1,946.20)	($1,319,496.88)
15438	Aetna, Inc.	NE	$573,062.47	$-	$14,624.59
20305	Medica Insurance Company	NE	($2,937,542.90)	$190,606.17	$-

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29678	Blue Cross and Blue Shield of Nebraska	NE	$5,775,059.68	($113,196.61)	($714,347.89)
44751	UnitedHealth Group, Inc.	NE	$213,968.17	$-	($43,093.51)
44794	Aetna, Inc.	NE	($3,624,547.39)	($77,409.57)	$265,150.75
47340	Federated Mutual	NE	$-	$-	($1,319,469.39)
59699	Aetna, Inc.	NE	$-	$-	($456,978.76)
73102	UnitedHealth Group, Inc.	NE	$-	$-	$1,925,330.62
79636	Aetna, Inc.	NE	$-	$-	$328,783.58
19304	Maine Community Health Options	NH	$-	$-	($1,293,589.13)
51889	UnitedHealth Group, Inc.	NH	$-	$-	$364,513.29
57601	Anthem, Inc.	NH	$-	$-	$759,048.06
59025	HPHC Insurance Company, Inc	NH	$15,811,230.04	$-	$118,817.56
61163	Minuteman Health, Inc.	NH	($38,885,008.22)	($223,778.01)	($293,882.39)
71616	HPHC Insurance Company, Inc	NH	$-	$-	$5,080,495.90
75841	Centene Corporation	NH	$14,425,154.93	$-	$-
86365	Tufts Associated Health Maintenance Organization Inc.	NH	$-	$-	($3,348,102.95)
96751	Anthem, Inc.	NH	$8,648,623.23	$223,778.01	($1,387,300.35)
13953	Horizon Blue Cross Blue Shield of New Jersey	NJ	($5,937.30)	$-	$1,115,236.51
23458	Cigna	NJ	$-	$-	$217,002.69
41014	Cigna	NJ	$2,587,703.78	$-	$3,366.75
48834	UnitedHealth Group, Inc.	NJ	$96,093.94	$-	($302,711.61)
77263	UnitedHealth Group, Inc.	NJ	$31,378,919.89	$135,262.47	$1,457,595.19
77606	Independence Blue Cross	NJ	($7,033,856.81)	$-	($9,703,381.35)
82884	Aetna, Inc.	NJ	$-	$-	($815,321.12)
89217	Aetna, Inc.	NJ	$6,713,943.10	$-	$17,195,074.72
91661	Horizon Blue Cross Blue Shield of New Jersey	NJ	$3,376,653.92	($281,401.15)	($6,676,264.86)
91762	Independence Blue Cross	NJ	($37,113,520.52)	$146,138.68	($2,490,596.93)
19722	Molina Healthcare	NM	$5,154,966.12	$-	$-
52744	Presbyterian Healthcare Services	NM	$-	$-	$672,331.61
57173	Presbyterian Healthcare Services	NM	($738,102.52)	$164,082.29	($4,442,995.57)
72034	CHRISTUS Health	NM	($7,412,563.84)	($81,199.73)	$-
75605	Health Care Service Corporation	NM	$3,719,974.71	($14,139.39)	$7,701,312.01
90762	UnitedHealth Group, Inc.	NM	$-	$-	$828,620.79
93091	New Mexico Health Connections	NM	($724,274.47)	($68,743.15)	($4,759,268.82)

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16698	Universal Health Services, Inc.	NV	$5,049,894.84	$-	($555,120.90)
17255	UnitedHealth Group, Inc.	NV	($1,538,805.73)	$5,066.24	$-
19298	Aetna, Inc.	NV	($449,129.16)	$-	($69,808.57)
20895	Humana, Inc.	NV	$-	$-	$2,000,275.66
27990	Aetna, Inc.	NV	$1,028,592.55	$-	$781,825.42
33670	Anthem, Inc.	NV	($811,805.88)	($4,120.62)	$4,092,200.53
41094	Hometown Health Plan, Inc.	NV	($1,005,757.73)	$2,857.02	($776,624.92)
42313	WMI Mutual Insurance Company	NV	$-	$-	($21,536.82)
60156	Anthem, Inc.	NV	$1,775,925.90	$113,626.18	($439,987.99)
68524	Universal Health Services, Inc.	NV	$-	$-	($29,878.10)
74222	UnitedHealth Group, Inc.	NV	$-	$-	$571,308.18
83198	UnitedHealth Group, Inc.	NV	$13,134,965.71	($69,448.78)	$4,088,798.50
85266	Hometown Health Plan, Inc.	NV	$1,217,613.00	($16,510.04)	($3,351,456.33)
93696	Humana, Inc.	NV	$-	$-	$24,841.71
95865	UnitedHealth Group, Inc.	NV	($18,401,493.55)	($31,470.00)	($6,314,836.45)
11177	Metro Plus Health Plan	NY	($93,963.43)	($731.81)	($2,523,089.40)
17210	Aetna, Inc.	NY	$330,071.16	$-	($24,893,594.73)
18029	Independent Health	NY	$9,001,518.14	($42,353.33)	$2,789,569.19
25303	New York State Catholic Health Plan, Inc.	NY	($81,563,239.04)	($85,536.71)	$-
26420	UnitedHealth Group, Inc.	NY	$366,868.25	$-	($15,650,018.65)
36346	HealthNow New York, Inc.	NY	$1,667,941.42	$-	($3,910,003.77)
43477	Crystal Run Health Plans	NY	$-	$-	($3,430,021.04)
44113	Anthem, Inc.	NY	$-	$-	($8,047,316.48)
49526	HealthNow New York, Inc.	NY	$10,313,147.92	$-	$12,255,694.66
54235	UnitedHealth Group, Inc.	NY	$11,564,845.25	$199,663.52	$-
54297	UnitedHealth Group, Inc.	NY	$-	$-	($685,924.84)
56184	MVP Health Plan, Inc.	NY	$12,670,674.56	$223,803.66	($2,573,281.38)
57165	Affinity Health Plan, Inc.	NY	$1,151,605.10	($9,942.53)	$-
70552	Independent Health	NY	$-	$-	($220,552.47)
73886	Crystal Run Health Plans	NY	$257,831.35	$46,665.13	($2,467,863.91)
74289	Oscar Health	NY	($42,400,604.40)	($2,477,880.22)	($2,693,856.05)
78124	Excellus Health Plan, Inc.	NY	$29,786,084.65	$235,601.88	($38,167,966.89)
80519	Anthem, Inc.	NY	$59,580,758.32	$1,166,490.23	($953,457.67)
82483	North Shore-LIJ Health System	NY	($5,402,165.00)	$264,371.72	($115,673,281.81)
85629	UnitedHealth Group, Inc.	NY	$-	$-	$216,646,628.89
88000	EmblemHealth	NY	$2,315,921.67	$-	$-
88582	EmblemHealth	NY	$3,460,324.39	$382,217.72	($16,953,145.40)

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89846	MVP Health Plan, Inc.	NY	$-	$-	($6,415,625.80)
91237	Healthfirst	NY	($21,672,891.16)	$53,338.35	$-
92551	CDPHP Universal Benefits, Inc.	NY	$-	$-	$18,455,306.91
94788	CDPHP Universal Benefits, Inc.	NY	$8,738,031.21	$44,292.37	($3,278,226.08)
23340	Medical Mutual of Ohio	OH	($1,559,070.25)	$-	$-
26734	Premier Health Plan, Inc.	OH	$832,327.96	$-	$-
28162	AultCare Insurance Company	OH	$1,990,967.55	$189,196.19	($3,118,584.54)
29276	Anthem, Inc.	OH	$28,243,218.13	($295,516.66)	$10,008,430.38
33232	UnitedHealth Group, Inc.	OH	$-	$-	($2,513,809.68)
41047	Centene Corporation	OH	($12,855,020.92)	$-	$-
52664	Summa Insurance Company	OH	($1,032,792.61)	$70,520.24	$2,334,600.30
56073	Nippon Life Benefits	OH	$-	$-	($153,447.55)
56726	UnitedHealth Group, Inc.	OH	$-	$-	$269,433.07
61724	UnitedHealth Group, Inc.	OH	$2,162.05	$-	($8,829,403.93)
64353	Molina Healthcare	OH	$583,153.97	$-	$-
66083	Humana, Inc.	OH	$1,093,725.07	($100,862.83)	($4,615,446.20)
67129	Aetna, Inc.	OH	($214,115.68)	$-	$2,799,635.03
74313	Paramount Insurance Company	OH	($3,185,766.61)	$-	($1,828,122.77)
77552	CareSource	OH	($11,275,315.32)	$-	$-
80627	Medical Mutual of Ohio	OH	$4,294,065.62	$-	$4,284,125.78
83396	The Health Plan of the Upper Ohio Valley	OH	($130,108.37)	$-	($263,052.24)
84867	Aetna, Inc.	OH	$-	$-	$1,146,032.43
96800	Federated Mutual	OH	$-	$-	$867,188.44
97596	Humana, Inc.	OH	$-	$-	($259,546.93)
98810	The Health Plan of the Upper Ohio Valley	OH	$-	$-	($114,480.88)
99969	Medical Mutual of Ohio	OH	($6,787,430.79)	$136,663.04	($13,550.70)
27243	Federated Mutual	OK	$-	$-	($698,392.63)
45480	UnitedHealth Group, Inc.	OK	$37,146.38	$-	($728,410.36)
66946	Aetna, Inc.	OK	$-	$-	$648,062.09
76275	Aetna, Inc.	OK	$-	$-	($70,529.35)
85757	UnitedHealth Group, Inc.	OK	$-	$-	($1,601,671.72)
87571	Health Care Service Corporation	OK	$2,803,057.22	$184,776.81	$13,223,428.85
87698	CommunityCare	OK	($64,916.06)	$-	($584,470.82)
98905	CommunityCare	OK	($2,775,287.55)	($184,776.82)	($10,188,016.10)
10091	PacificSource Health Plans	OR	($306,876.25)	$68,966.56	($590,613.51)
10940	Centene Corporation	OR	$945,876.89	$-	$1,411,965.85
30969	Zoom Health Plan, Inc.	OR	($1,043,963.24)	$-	($47,429.53)

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32536	ATRIO Health Plans	OR	($498,639.20)	$-	($114,168.93)
33375	Samaritan Health Plans	OR	$-	$-	($263,003.04)
39424	Moda Health Plan, Inc.	OR	$40,962,083.97	$-	$2,003,095.16
56707	Providence Health & Services	OR	($26,788,624.85)	$-	($5,056,044.70)
63474	Cambia Health Solutions	OR	$5,641,571.97	$-	$-
71287	Kaiser Permanente	OR	($22,640,214.21)	($68,966.56)	($2,666,857.84)
77969	Cambia Health Solutions	OR	$3,728,784.96	$-	$4,319,033.74
85804	Premera Blue Cross	OR	$-	$-	($309,202.59)
90175	UnitedHealth Group, Inc.	OR	$-	$-	$1,313,225.62
16322	UPMC Health Plan	PA	($40,050,668.48)	($245,097.73)	$14,426,473.48
18939	Aetna, Inc.	PA	$-	$-	$2,311,667.27
22444	Geisinger Health System	PA	($13,135,095.92)	$98,741.81	($3,011,309.33)
23489	UnitedHealth Group, Inc.	PA	$-	$-	($3,796,481.64)
31609	Independence Blue Cross	PA	$54,047,462.13	$68,085.16	$23,633,710.00
33709	Highmark	PA	$11,504,376.97	($56,425.98)	$3,076,954.64
33871	Independence Blue Cross	PA	($66,630,300.85)	$-	($26,864,029.70)
33906	Aetna, Inc.	PA	$-	$-	($690,056.70)
36247	Highmark	PA	$148,509.80	$2,681.50	$-
38949	Highmark	PA	$644,235.37	$-	($6,441.92)
45127	Capital Blue Cross	PA	$40,434,004.32	$-	($8,577,374.68)
53789	Capital Blue Cross	PA	($5,866,130.41)	$132,015.20	($35,498.14)
55957	Highmark	PA	$1,201,208.49	$-	$3,813,377.42
62560	UPMC Health Plan	PA	($5,886.15)	$-	($787,776.06)
64844	Aetna, Inc.	PA	($1,378,243.73)	$-	($572,086.93)
70194	Highmark	PA	$29,655,144.26	$-	($490,971.88)
75729	Geisinger Health System	PA	$541,607.30	$-	($1,756,898.95)
79279	Highmark	PA	$-	$-	$810,774.18
79962	Highmark	PA	$-	$-	$337,505.66
80148	Federated Mutual	PA	$-	$-	($1,134,407.04)
82795	Capital Blue Cross	PA	($567,694.83)	$-	($244,449.07)
83731	Highmark	PA	($10,542,528.19)	$-	$-
93838	Aetna, Inc.	PA	$-	$-	($442,680.89)
15287	Blue Cross Blue Shield of Rhode Island	RI	$7,559,388.24	$-	$3,559,663.89
26322	Tufts Associated Health Maintenance Organization Inc.	RI	$-	$-	$278,234.36
77514	Neighborhood Health Plan of Rhode Island	RI	($7,559,388.24)	$-	($1,074,790.09)
79881	UnitedHealth Group, Inc.	RI	$-	$-	($1,468,832.70)
90010	Tufts Associated Health Maintenance Organization Inc.	RI	$-	$-	($1,502,319.69)
90117	UnitedHealth Group, Inc.	RI	$-	$-	$208,044.26

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22369	Aetna, Inc.	SC	$-	$-	($46,085.53)
26065	BlueChoice HealthPlan of South Carolina, Inc.	SC	$14,592,529.77	$155,325.74	$118,981.64
33609	Federated Mutual	SC	$-	$-	$481,646.67
38408	Aetna, Inc.	SC	$105,711.19	$-	$601,211.28
49532	BlueChoice HealthPlan of South Carolina, Inc.	SC	($15,792,089.83)	($155,325.75)	($2,819,874.07)
54362	Cigna	SC	$1,093,848.73	$-	$-
56262	Aetna, Inc.	SC	$-	$-	($8,127.82)
57860	UnitedHealth Group, Inc.	SC	$-	$-	$1,559,813.53
64146	UnitedHealth Group, Inc.	SC	$-	$-	$112,434.18
31195	Sanford Health Plan	SD	$4,000,082.85	$101,329.31	$1,512,973.27
50305	Wellmark, Inc.	SD	$-	$-	($613,210.39)
60536	Avera Health Plans, Inc.	SD	($4,000,082.83)	($101,329.32)	$612,558.50
62210	DAKOTACARE	SD	$-	$-	($2,184,194.55)
64255	Federated Mutual	SD	$-	$-	$688,173.51
96594	Medica Insurance Company	SD	$-	$-	($16,300.37)
10958	UnitedHealth Group, Inc.	TN	$-	$-	($4,929,876.45)
14002	BlueCross BlueShield of Tennessee	TN	$66,286,360.53	$-	$4,087,116.16
16348	TRH Health Insurance Company	TN	$1,916,790.86	($362,534.51)	$-
31112	UnitedHealth Group, Inc.	TN	$14,452.71	$-	($3,589,322.07)
31552	Aetna, Inc.	TN	$954,059.54	$-	$785,422.50
69443	UnitedHealth Group, Inc.	TN	$200,952.91	$3,048.60	$1,516,088.98
82120	Humana, Inc.	TN	$1,862,944.11	$359,485.91	($981,121.25)
83463	Federated Mutual	TN	$-	$-	($477,630.04)
99248	Cigna	TN	($71,221,107.95)	$-	$-
19046	Federated Mutual	TX	$-	$-	($744,994.75)
20069	Oscar Health	TX	($19,629,491.14)	($605,086.40)	$-
26539	FirstCare Health Plans	TX	$12,563,028.01	$-	($2,819,555.63)
27248	Community Health Choice, Inc.	TX	($60,032,007.00)	$-	$-
29418	Centene Corporation	TX	($116,928,545.46)	$-	$-
30609	Memorial Hermann Health Plan	TX	$1,899,815.09	$-	($311,435.09)
32673	Humana, Inc.	TX	$18,802,128.77	($170,401.72)	($15,674,526.26)
33602	Health Care Service Corporation	TX	$390,674,339.27	$546,164.31	$33,259,053.53
37392	Universal Health Services, Inc.	TX	($1,222,754.85)	$-	($72,628.80)
37755	Scott & White Health Plan	TX	$18,551,464.35	$-	($1,430,111.18)
40220	UnitedHealth Group, Inc.	TX	$-	$-	($6,215,486.23)

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40788	Scott & White Health Plan	TX	$3,345,705.79	$-	($5,042,519.55)
41541	Memorial Hermann Health Plan	TX	($4,450,448.39)	$-	($4,715,315.48)
41549	FirstCare Health Plans	TX	$-	$-	$605,495.00
45786	Molina Healthcare	TX	($222,476,619.38)	$-	$-
53799	US Health Group	TX	$231,385.89	$-	$-
55409	Cigna	TX	$20,430,511.49	$-	$-
58840	Aetna, Inc.	TX	$-	$-	($111,217.24)
63141	Humana, Inc.	TX	$337,154.48	$-	$2,109,414.43
66252	CHRISTUS Health	TX	($135,500.48)	$229,323.80	$-
71837	Sendero Health Plans, Inc.	TX	($47,522,188.86)	$-	$-
76589	Cigna	TX	$1,631,045.86	$-	$-
81795	Arkansas Blue Cross and Blue Shield	TX	$-	$-	($832,423.12)
84479	Vista Health Plan, Inc.	TX	($4,185,210.21)	$-	($128,477.28)
91716	Aetna, Inc.	TX	$8,116,186.67	$-	$5,071,449.95
98809	UnitedHealth Group, Inc.	TX	$-	$-	($2,946,722.44)
18167	Molina Healthcare	UT	($38,365,114.25)	$-	$-
22013	Cambia Health Solutions	UT	$11,172,822.02	$-	$3,870,922.81
29031	National Health Insurance Company	UT	$-	$-	($74,294.23)
34541	Cambia Health Solutions	UT	$72,747.01	$-	$-
38927	Aetna, Inc.	UT	$397,572.17	$-	$217,841.39
42261	University of Utah Health Insurance Plans	UT	$12,948,787.52	$-	$-
43129	UnitedHealth Group, Inc.	UT	$266,955.52	$2,763.83	$-
46958	Humana, Inc.	UT	$-	$-	$163,456.94
48588	Aetna, Inc.	UT	$-	$-	($83,041.19)
66413	UnitedHealth Group, Inc.	UT	$-	$-	($864,688.72)
68781	SelectHealth	UT	$13,506,230.05	($2,763.83)	($2,356,545.20)
80043	WMI Mutual Insurance Company	UT	$-	$-	$206,488.13
97462	UnitedHealth Group, Inc.	UT	$-	$-	($1,080,139.96)
10207	CareFirst	VA	$8,481,827.84	($229,982.09)	($4,366,772.65)
12028	Aetna, Inc.	VA	($44,035,900.26)	($153,979.49)	($880,771.28)
13433	Federated Mutual	VA	$-	$-	$1,095,131.58
15668	Piedmont Community Health Plan	VA	$2,370,193.10	($17,466.39)	($278,384.93)
16064	Anthem, Inc.	VA	$-	$-	$29,718,722.06
20507	Optima Health	VA	$52,883,879.67	$-	$1,366,648.47
24251	UnitedHealth Group, Inc.	VA	$-	$-	($1,164,298.16)
25978	UnitedHealth Group, Inc.	VA	$-	$-	($15,882,113.33)
37204	Piedmont Community Health Plan	VA	($2,168,146.38)	$190,704.53	$14,704.38

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38234	Aetna, Inc.	VA	$53,038.15	$-	($4,630,850.39)
38599	UnitedHealth Group, Inc.	VA	($2,463,314.17)	$-	($409,229.55)
40308	CareFirst	VA	$22,761,701.54	$-	$6,845,846.25
41892	UnitedHealth Group, Inc.	VA	($118,297.08)	($4,188.89)	$-
41921	Cigna	VA	($27,486,733.28)	$-	$-
86443	Aetna, Inc.	VA	$-	$-	($5,284,239.31)
88380	Anthem, Inc.	VA	$7,182,377.15	$850,406.29	($1,168,438.09)
89242	Optima Health	VA	$-	$-	$2,231,078.26
89498	UnitedHealth Group, Inc.	VA	$-	$-	($681,832.69)
93187	Aetna, Inc.	VA	$19,062,903.87	($134,922.39)	($319,335.77)
95185	Kaiser Permanente	VA	($36,523,530.11)	($500,571.55)	($6,205,864.80)
18581	Community Health Plan of Washington	WA	$2,779,989.83	$-	$-
18699	UnitedHealth Group, Inc.	WA	$-	$-	($1,438,898.34)
23371	Kaiser Permanente	WA	($6,824,739.36)	($21,035.24)	$275,729.11
25768	Kaiser Permanente	WA	$5,453,365.74	$-	($6,706,193.20)
34673	Aetna, Inc.	WA	$-	$-	$1,131,688.41
36026	Centene Corporation	WA	$-	$-	($548,464.31)
38229	Health Alliance Medical Plans, Inc.	WA	$12,593.61	$-	$-
38498	Premera Blue Cross	WA	($7,097,575.96)	$-	$-
43861	UnitedHealth Group, Inc.	WA	$50,200.73	$-	($220,209.58)
49831	Premera Blue Cross	WA	$28,293,767.22	$-	($644,749.68)
53732	Cambia Health Solutions	WA	$4,394,628.82	$-	$-
61836	Centene Corporation	WA	($32,733,328.75)	$-	$-
69364	Cambia Health Solutions	WA	$3,684,375.67	$-	$1,720,636.06
71281	Cambia Health Solutions	WA	$3,592,257.89	$-	$2,163,889.80
80473	Kaiser Permanente	WA	($49,034,125.60)	$21,035.25	($8,754,028.28)
84481	Molina Healthcare	WA	($1,116,871.00)	$-	$-
87718	Cambia Health Solutions	WA	$48,545,461.30	$-	$13,020,600.03
14630	Children's Community Health Plan	WI	$5,304,975.21	$-	$-
16245	Group Health Cooperative of Eau Claire	WI	$-	$-	($1,239,388.66)
20173	HealthPartners Insurance Company	WI	($2,249,707.06)	($6,841.59)	$227,450.53
35334	MercyCare Insurance Company	WI	$-	$-	($81,685.94)
37833	Quartz Health Solutions	WI	$18,218,032.49	($39,129.01)	$1,865,999.48
38166	Security Health Plan of Wisconsin, Inc.	WI	($12,010,107.04)	$295,788.25	($2,511,457.29)
38345	Dean Health Plan, Inc.	WI	($28,126,200.27)	($351,306.72)	($5,173,583.17)
38752	Aetna, Inc.	WI	$-	$-	$107,001.11
39924	UnitedHealth Group, Inc.	WI	$79,772.76	$-	$214,826.18
47342	Mayo Clinic Health System	WI	($8,912,149.17)	$18,880.18	($2,118,411.54)

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52697	Molina Healthcare	WI	$273,647.15	$-	$-
55103	Humana, Inc.	WI	$-	$-	($1,529,425.10)
57637	Medica Insurance Company	WI	$-	$-	($1,520,111.28)
57845	Medica Insurance Company	WI	$2,621,416.11	$212,870.25	$-
58326	MercyCare Insurance Company	WI	($5,487,189.38)	$-	($508,151.26)
58564	Quartz Health Solutions	WI	$383,811.56	($14,589.90)	($459,204.39)
59158	UnitedHealth Group, Inc.	WI	$-	$-	$13,431,753.56
64772	Medical Associates Health Plans	WI	$-	$-	$36,879.48
69424	Pekin Life Insurance Company	WI	$-	$-	($9,309.07)
79475	Anthem, Inc.	WI	$10,173,169.63	($144,042.04)	$2,748,145.84
80180	UnitedHealth Group, Inc.	WI	$-	$-	($629,373.19)
81413	Network Health Plan	WI	$18,489,433.27	$-	$92,947.34
81974	Wisconsin Physicians Svc Insurance Corp	WI	$1,865,873.23	($12,145.47)	$4,710,915.04
84670	Wisconsin Physicians Svc Insurance Corp	WI	$1,019,628.73	$124,623.45	($1,760,934.64)
86584	Wisconsin Physicians Svc Insurance Corp	WI	($7,945,062.24)	($53,717.21)	($760,833.45)
87416	Common Ground Healthcare Cooperative	WI	$76,217.13	$583.10	($1,227,873.58)
90028	Anthem, Inc.	WI	$-	$-	($271,658.90)
91058	Quartz Health Solutions	WI	$3,179,091.75	($21,874.57)	($4,613,827.70)
91604	Humana, Inc.	WI	$2,752.07	$-	($127,138.18)
92708	Federated Mutual	WI	$-	$-	$766,361.14
94529	Group Health Cooperative of South Central Wisconsin	WI	$3,042,594.06	($9,098.74)	$340,087.80
14414	Federated Mutual	WV	$-	$-	($52,357.99)
31274	Highmark	WV	$9,416,972.44	$0.00	$1,295,933.51
44434	Aetna, Inc.	WV	($240,460.81)	$-	$68,744.42
50318	Aetna, Inc.	WV	$-	$-	($571,666.67)
50328	CareSource	WV	($8,801,964.64)	$-	$-
59772	The Health Plan of the Upper Ohio Valley	WV	$-	$-	($614,364.72)
72982	The Health Plan of the Upper Ohio Valley	WV	($374,546.95)	$-	$165,210.86
77060	UnitedHealth Group, Inc.	WV	$-	$-	($50,782.51)
95628	UnitedHealth Group, Inc.	WV	$-	$-	($240,716.99)
11269	Blue Cross Blue Shield of Wyoming	WY	$0.00	$0.00	($623,916.29)
44325	Aetna, Inc.	WY	$-	$-	$244,027.31

Table 4: Issuer-Specific Information for Merged Market States *(Appendix D)*

HIOS ID	HIOS INSURANCE COMPANY NAME	STATE	HHS RISK ADJUSTMENT TRANSFER AMOUNT (CATASTROPHIC RISK POOL)	HHS RISK ADJUSTMENT TRANSFERS AMOUNT MERGED MARKET (INDIVIDUAL NON-CATASTROPHIC AND SMALL GROUP)
24675	Blue Cross Blue Shield of Massachusetts, Inc.	MA	$-	($874,313.17)
29125	Tufts Associated Health Maintenance Organization Inc.	MA	$-	$15,068,614.32
31234	Centene Corporation	MA	$-	$199,701.10
31779	UnitedHealth Group, Inc.	MA	$-	($1,115,078.42)
34484	Health New England, Inc.	MA	$-	$423,602.88
36046	HPHC Insurance Company, Inc	MA	$-	$28,888,315.11
38712	Tufts Associated Health Maintenance Organization Inc.	MA	$-	$1,554,857.11
41304	Neighborhood Health Plan, Inc.	MA	$-	$56,321,259.00
42690	Blue Cross Blue Shield of Massachusetts, Inc.	MA	$293,121.44	$4,158,852.33
52710	Fallon Health & Life Assurance Company	MA	$-	$249,611.28
59763	Tufts Health Public Plans, Inc.	MA	$52,884.08	($61,974,968.53)
73331	Minuteman Health, Inc.	MA	($331,089.85)	($10,888,137.69)
82569	Boston Medical Center Health Plan, Inc.	MA	$-	($35,993,129.45)
88806	Fallon Health & Life Assurance Company	MA	($14,915.67)	$4,192,170.84
88950	ConnectiCare, Inc.	MA	$-	$664,696.96
95878	HPHC Insurance Company, Inc	MA	$-	($876,053.60)
13627	Blue Cross Blue Shield of Vermont	VT	($11,724.13)	$5,712,123.93
77566	MVP Health Plan, Inc.	VT	$11,724.13	($5,712,123.94)

VII. Default Risk Adjustment Charge

Pursuant to 45 C.F.R. § 153.740(b), HHS will assess a default risk adjustment charge if an issuer of a risk adjustment covered plan fails to establish a dedicated distributed data environment (an EDGE server) or fails to provide HHS with access to sufficient data such that HHS cannot apply the applicable federally certified risk adjustment methodology to calculate the risk adjustment payment transfer amount for the risk adjustment covered plan in a timely fashion.

The total default risk adjustment charge for a risk adjustment covered plan equals a PMPM amount multiplied by the plan's enrollment – either provided by the issuer or sought from other reliable sources. The PMPM charge for a plan is equal to the product of the statewide average premium PMPM for a risk pool and the 90th percentile plan risk transfer amount, expressed as a percentage of the respective statewide average PMPM premiums for the risk pool. The nationwide percentile reflects only plans in states where HHS is operating the risk adjustment program and is calculated based on the absolute value of plan risk transfer amounts. The determined PMPM amount is then multiplied by a noncompliant plan's enrollment, to establish the plan's total default risk adjustment charge.

Small issuers – that is, issuers with 500 or fewer billable member months statewide – may elect a lower, separate default risk adjustment charge, which is 14 percent of the applicable statewide average premium, in lieu of setting up an EDGE server and submitting data.

All compliant risk adjustment covered plans in the state market risk pool of at least one noncompliant issuer will receive a portion of the default charges collected from the noncompliant issuer(s).[9] We allocate default charges collected from noncompliant plans in the risk pool/market/state among the compliant plans in the state market risk pool proportional to each compliant plan's relative revenue requirement as calculated under the transfer formula relative to the market average of these products.[10] Below we set forth information on the 2017 benefit year default risk adjustment charges.

Table 5: HHS Default Risk Adjustment Charge Summary Data

SUMMARY DATA ELEMENT	TOTALS
Number of Issuers with Greater Than 500 Billable Member Months Statewide Receiving a Default Risk Adjustment Charge	4
Number of Issuers with 500 Billable Member Months or Fewer Statewide Electing to Receive a Default Risk Adjustment Charge	23
Percent of All Issuers of Risk Adjustment Covered Plans that Received a Default Risk Adjustment Charge	4.1%

[9] Because small issuers can elect to receive a lower, separate default risk adjustment charge, some default charge amounts are so small that a small number of issuers in some state risk pools do not receive any funds from the allocation.

[10] For issuers owed a default charge allocation payment amount (or any payment amount) that is less than $1.00, CMS will hold payment until after the release of sequestration funds in October or November 2018, so that issuers can receive the full amount (pending collections).

Table 6: Default Risk Adjustment Charge by Risk Pool

RISK POOL	NATIONAL PERCENT OF PREMIUM
Individual – Non Catastrophic	44%
Catastrophic	44%
Small Group	29%
Issuers with 500 or Fewer Billable Member Months Statewide	14%

Table 7: Default Risk Adjustment Charge *(Appendix E)*

STATE	RISK POOL	HIOS ID	HIOS ISSUER NAME RECEIVING DEFAULT RISK ADJUSTMENT CHARGE	DEFAULT RISK ADJUSTMENT CHARGE AMOUNT
AL	Individual	93122	US Health Group	($857.64)
AR	Individual	61273	US Health Group	($1,416.16)
AZ	Catastrophic	65441	Tenet Healthcare Corporation	($10,411.21)
AZ	Individual	75849	US Health Group	($1,109.24)
GA	Individual	72796	US Health Group	($1,009.27)
IL	Small Group	35296	National Health Insurance Company	($78,516.11)
IL	Small Group	53586	Nippon Life Benefits	($405.00)
IN	Small Group	35755	US Health and Life Insurance Company	($3,019.98)
KY	Individual	40586	Baptist Health Plan	($69,672.51)
LA	Individual	19913	US Health Group	($1,909.07)
MI	Individual	34620	Trusted Health Plan Inc.	($708.02)
MI	Small Group	44279	Assurity Life Insurance Company	($6,735.55)
MI	Small Group	58996	US Health and Life Insurance Company	($1,393.56)
MI	Small Group	59140	Nippon Life Benefits	($4,877.47)
MI	Small Group	90602	National Health Insurance Company	($16,490.49)
MO	Individual	72064	US Health Group	($820.49)
MS	Individual	96734	US Health Group	($892.60)
NC	Individual	85958	US Health Group	($706.08)
NE	Individual	10324	US Health Group	($261.04)
NY	Small Group	83744	Healthfirst	($26,681.71)
OK	Individual	82209	US Health Group	($1,046.80)
OK	Small Group	85408	GlobalHealth, Inc.	($26,930.27)
PA	Small Group	48788	Independence Blue Cross	($11,100.33)
TX	Small Group	45125	Nippon Life Benefits	($2,906.10)
TX	Individual	63509	Tenet Healthcare Corporation	($5,552.00)
TX	Small Group	63509	Tenet Healthcare Corporation	($144,698.05)
UT	Individual	21400	US Health Group	($573.53)
UT	Small Group	79395	HSA Health Insurance Company	($393,019.62)

Table 8: Default Charge Allocation *(Appendix F)*

STATE	RISK POOL	HIOS ID	INSURANCE COMPANY NAME RECEIVING PAYMENT FROM DEFAULT RISK ADJUSTMENT CHARGE	DEFAULT RISK ADJUSTMENT ALLOCATION AMOUNT
AL	Individual	46944	Blue Cross Blue Shield of Alabama	$857.48
AL	Individual	68259	UnitedHealth Group, Inc.	$0.13
AR	Individual	37903	QualChoice Arkansas	$74.94
AR	Individual	60079	Aetna, Inc.	$0.00
AR	Individual	62141	Centene Corporation	$366.49
AR	Individual	65817	UnitedHealth Group, Inc.	$0.04
AR	Individual	70525	QualChoice Arkansas	$84.37
AR	Individual	75293	Arkansas Blue Cross and Blue Shield	$890.29
AZ	Individual	53901	Blue Cross Blue Shield of Arizona, Inc.	$332.63
AZ	Catastrophic	53901	Blue Cross Blue Shield of Arizona, Inc.	$10,411.21
AZ	Individual	66105	Humana, Inc.	$0.01
AZ	Individual	78611	Aetna, Inc.	$7.79
AZ	Individual	86830	Cigna	$44.64
AZ	Individual	91450	Centene Corporation	$711.23
AZ	Individual	97667	Cigna	$12.59
AZ	Individual	98971	UnitedHealth Group, Inc.	$0.34
GA	Individual	43802	UnitedHealth Group, Inc.	$0.05
GA	Individual	49046	Anthem, Inc.	$587.52
GA	Individual	50491	Cigna	$1.30
GA	Individual	70893	Centene Corporation	$239.66
GA	Individual	82824	Aetna, Inc.	$3.60
GA	Individual	83761	Alliant Health Plans	$79.74
GA	Individual	83978	Aetna, Inc.	$10.12
GA	Individual	89942	Kaiser Permanente	$79.99
GA	Individual	93332	Humana, Inc.	$6.46
GA	Individual	95852	UnitedHealth Group, Inc.	$0.78
IL	Small Group	18389	Pekin Life Insurance Company	$13.92
IL	Small Group	20129	Health Alliance Medical Plans, Inc.	$831.53
IL	Small Group	24301	Medical Associates Health Plans	$67.04
IL	Small Group	34446	UnitedHealth Group, Inc.	$2,472.89
IL	Small Group	35670	Aetna, Inc.	$37.85
IL	Small Group	36096	Health Care Service Corporation	$65,047.84
IL	Small Group	42529	UnitedHealth Group, Inc.	$318.32
IL	Small Group	54322	MercyCare Insurance Company	$10.93
IL	Small Group	58239	UnitedHealth Group, Inc.	$327.55
IL	Small Group	58288	Humana, Inc.	$294.38
IL	Small Group	66143	Federated Mutual	$355.93
IL	Small Group	68303	Humana, Inc.	$1,098.71

STATE	RISK POOL	HIOS ID	INSURANCE COMPANY NAME RECEIVING PAYMENT FROM DEFAULT RISK ADJUSTMENT CHARGE	DEFAULT RISK ADJUSTMENT ALLOCATION AMOUNT
IL	Small Group	72547	Aetna, Inc.	$662.08
IL	Small Group	78463	UnitedHealth Group, Inc.	$42.19
IL	Small Group	92476	UnitedHealth Group, Inc.	$7,299.88
IL	Small Group	96601	Aetna, Inc.	$9.61
IL	Small Group	99129	Aetna, Inc.	$30.47
IN	Small Group	11104	Federated Mutual	$104.16
IN	Small Group	17575	Anthem, Inc.	$1,118.94
IN	Small Group	32378	Aetna, Inc.	$9.10
IN	Small Group	33380	Indiana University Health	$12.53
IN	Small Group	36373	UnitedHealth Group, Inc.	$2.87
IN	Small Group	43442	Humana, Inc.	$1.31
IN	Small Group	50816	Physicians Health Plan of Northern Indiana, Inc.	$201.13
IN	Small Group	72850	UnitedHealth Group, Inc.	$1,388.31
IN	Small Group	79828	Pekin Life Insurance Company	$1.09
IN	Small Group	96992	Aetna, Inc.	$0.08
IN	Small Group	99791	Humana, Inc.	$180.27
KY	Individual	15411	Humana, Inc.	$968.66
KY	Individual	23671	UnitedHealth Group, Inc.	$4.64
KY	Individual	34822	Aetna, Inc.	$28.36
KY	Individual	36239	Anthem, Inc.	$50,630.96
KY	Individual	45636	CareSource	$17,761.80
KY	Individual	47949	UnitedHealth Group, Inc.	$278.00
LA	Individual	19636	Blue Cross Blue Shield of Louisiana	$1,030.17
LA	Individual	38499	UnitedHealth Group, Inc.	$0.81
LA	Individual	44965	Humana, Inc.	$189.95
LA	Individual	67243	Vantage Health Plan, Inc.	$222.52
LA	Individual	81941	Aetna, Inc.	$2.14
LA	Individual	97176	Blue Cross Blue Shield of Louisiana	$463.43
MI	Individual	15560	Blue Cross Blue Shield of Michigan	$205.83
MI	Small Group	15560	Blue Cross Blue Shield of Michigan	$15,157.95
MI	Small Group	20662	Physicians Health Plan	$97.50
MI	Small Group	29241	Priority Health	$576.40
MI	Individual	29698	Priority Health	$167.62
MI	Small Group	29698	Priority Health	$2,618.69
MI	Individual	37651	Health Alliance Plan (HAP)	$21.04
MI	Small Group	37651	Health Alliance Plan (HAP)	$676.79
MI	Individual	40047	Molina Healthcare	$32.08
MI	Individual	46275	Humana, Inc.	$9.80
MI	Small Group	52670	UnitedHealth Group, Inc.	$0.99

STATE	RISK POOL	HIOS ID	INSURANCE COMPANY NAME RECEIVING PAYMENT FROM DEFAULT RISK ADJUSTMENT CHARGE	DEFAULT RISK ADJUSTMENT ALLOCATION AMOUNT
MI	Individual	58594	Meridian Health Plan of Michigan, Inc.	$8.74
MI	Individual	60829	Physicians Health Plan	$10.80
MI	Small Group	60829	Physicians Health Plan	$329.76
MI	Small Group	62294	Humana, Inc.	$50.44
MI	Small Group	63631	UnitedHealth Group, Inc.	$1,409.71
MI	Individual	67183	Total Health Care USA, Inc.	$15.59
MI	Small Group	67183	Total Health Care USA, Inc.	$607.06
MI	Individual	67577	Health Alliance Plan (HAP)	$5.62
MI	Small Group	67577	Health Alliance Plan (HAP)	$871.23
MI	Individual	74917	McLaren Health Care	$6.69
MI	Small Group	74917	McLaren Health Care	$147.89
MI	Individual	81068	Aetna, Inc.	$0.18
MI	Small Group	82649	Federated Mutual	$363.56
MI	Small Group	95233	Paramount Insurance Company	$92.14
MI	Individual	98185	Blue Cross Blue Shield of Michigan	$224.11
MI	Small Group	98185	Blue Cross Blue Shield of Michigan	$6,497.22
MO	Individual	30613	Humana, Inc.	$52.49
MO	Individual	32753	Anthem, Inc.	$376.21
MO	Individual	34762	Blue Cross and Blue Shield of Kansas City	$118.88
MO	Individual	44240	Aetna, Inc.	$27.59
MO	Individual	44527	Aetna, Inc.	$34.86
MO	Individual	48161	Aetna, Inc.	$2.61
MO	Individual	74483	Cigna	$193.96
MO	Individual	96384	Cox HealthPlans	$13.89
MS	Individual	11721	Blue Cross Blue Shield of Mississippi	$173.47
MS	Individual	48963	Humana, Inc.	$74.77
MS	Individual	90714	Centene Corporation	$644.18
MS	Individual	97560	UnitedHealth Group, Inc.	$0.15
NC	Individual	11512	Blue Cross Blue Shield of North Carolina	$684.07
NC	Individual	40411	Cigna	$1.13
NC	Individual	54332	UnitedHealth Group, Inc.	$0.14
NC	Individual	61671	Aetna, Inc.	$2.08
NC	Individual	73943	Cigna	$18.69
NE	Individual	15438	Aetna, Inc.	$0.27
NE	Individual	20305	Medica Insurance Company	$113.56
NE	Individual	29678	Blue Cross and Blue Shield of Nebraska	$31.14
NE	Individual	44751	UnitedHealth Group, Inc.	$0.10
NE	Individual	44794	Aetna, Inc.	$115.96

STATE	RISK POOL	HIOS ID	INSURANCE COMPANY NAME RECEIVING PAYMENT FROM DEFAULT RISK ADJUSTMENT CHARGE	DEFAULT RISK ADJUSTMENT ALLOCATION AMOUNT
NY	Small Group	11177	Metro Plus Health Plan	$18.92
NY	Small Group	17210	Aetna, Inc.	$1,463.26
NY	Small Group	18029	Independent Health	$808.90
NY	Small Group	26420	UnitedHealth Group, Inc.	$828.78
NY	Small Group	36346	HealthNow New York, Inc.	$498.28
NY	Small Group	43477	Crystal Run Health Plans	$61.28
NY	Small Group	44113	Anthem, Inc.	$280.05
NY	Small Group	49526	HealthNow New York, Inc.	$1,146.99
NY	Small Group	54297	UnitedHealth Group, Inc.	$15.38
NY	Small Group	56184	MVP Health Plan, Inc.	$57.50
NY	Small Group	61405	Healthfirst	$7.05
NY	Small Group	70552	Independent Health	$4.33
NY	Small Group	73886	Crystal Run Health Plans	$27.20
NY	Small Group	74289	Oscar Health	$7.91
NY	Small Group	78124	Excellus Health Plan, Inc.	$3,515.99
NY	Small Group	80519	Anthem, Inc.	$114.00
NY	Small Group	82483	North Shore-LIJ Health System	$1,276.08
NY	Small Group	85629	UnitedHealth Group, Inc.	$14,090.48
NY	Small Group	88582	EmblemHealth	$223.92
NY	Small Group	89846	MVP Health Plan, Inc.	$1,465.40
NY	Small Group	92551	CDPHP Universal Benefits, Inc.	$738.63
NY	Small Group	94788	CDPHP Universal Benefits, Inc.	$31.27
OK	Small Group	27243	Federated Mutual	$75.77
OK	Individual	45480	UnitedHealth Group, Inc.	$0.04
OK	Small Group	45480	UnitedHealth Group, Inc.	$437.81
OK	Small Group	66946	Aetna, Inc.	$269.69
OK	Small Group	76275	Aetna, Inc.	$18.17
OK	Small Group	85757	UnitedHealth Group, Inc.	$2,774.88
OK	Individual	87571	Health Care Service Corporation	$1,034.99
OK	Small Group	87571	Health Care Service Corporation	$19,615.42
OK	Individual	87698	CommunityCare	$0.07
OK	Small Group	87698	CommunityCare	$623.68
OK	Individual	98905	CommunityCare	$11.70
OK	Small Group	98905	CommunityCare	$3,114.82
PA	Small Group	16322	UPMC Health Plan	$1,739.27
PA	Small Group	18939	Aetna, Inc.	$182.71
PA	Small Group	22444	Geisinger Health System	$129.49
PA	Small Group	23489	UnitedHealth Group, Inc.	$512.52
PA	Small Group	31609	Independence Blue Cross	$2,122.85

STATE	RISK POOL	HIOS ID	INSURANCE COMPANY NAME RECEIVING PAYMENT FROM DEFAULT RISK ADJUSTMENT CHARGE	DEFAULT RISK ADJUSTMENT ALLOCATION AMOUNT
PA	Small Group	33709	Highmark	$271.03
PA	Small Group	33871	Independence Blue Cross	$3,038.24
PA	Small Group	33906	Aetna, Inc.	$11.25
PA	Small Group	38949	Highmark	$0.04
PA	Small Group	45127	Capital Blue Cross	$2,190.06
PA	Small Group	53789	Capital Blue Cross	$23.65
PA	Small Group	55957	Highmark	$218.17
PA	Small Group	62560	UPMC Health Plan	$77.91
PA	Small Group	64844	Aetna, Inc.	$66.51
PA	Small Group	70194	Highmark	$19.89
PA	Small Group	75729	Geisinger Health System	$239.14
PA	Small Group	79279	Highmark	$41.82
PA	Small Group	79962	Highmark	$140.84
PA	Small Group	80148	Federated Mutual	$66.14
PA	Small Group	82795	Capital Blue Cross	$2.06
PA	Small Group	93838	Aetna, Inc.	$6.61
TX	Small Group	19046	Federated Mutual	$730.04
TX	Individual	20069	Oscar Health	$126.82
TX	Individual	26539	FirstCare Health Plans	$103.62
TX	Small Group	26539	FirstCare Health Plans	$1,146.35
TX	Individual	27248	Community Health Choice, Inc.	$635.83
TX	Individual	29418	Centene Corporation	$846.98
TX	Individual	30609	Memorial Hermann Health Plan	$8.39
TX	Small Group	30609	Memorial Hermann Health Plan	$1,260.95
TX	Individual	32673	Humana, Inc.	$49.16
TX	Small Group	32673	Humana, Inc.	$11,077.39
TX	Individual	33602	Health Care Service Corporation	$2,353.91
TX	Small Group	33602	Health Care Service Corporation	$105,531.08
TX	Individual	37392	Universal Health Services, Inc.	$35.79
TX	Small Group	37392	Universal Health Services, Inc.	$3.18
TX	Individual	37755	Scott & White Health Plan	$42.54
TX	Small Group	37755	Scott & White Health Plan	$310.97
TX	Small Group	40220	UnitedHealth Group, Inc.	$1,163.00
TX	Individual	40788	Scott & White Health Plan	$18.93
TX	Small Group	40788	Scott & White Health Plan	$2,580.26
TX	Individual	41541	Memorial Hermann Health Plan	$27.19
TX	Small Group	41541	Memorial Hermann Health Plan	$354.14
TX	Small Group	41549	FirstCare Health Plans	$121.12
TX	Individual	45786	Molina Healthcare	$939.88

STATE	RISK POOL	HIOS ID	INSURANCE COMPANY NAME RECEIVING PAYMENT FROM DEFAULT RISK ADJUSTMENT CHARGE	DEFAULT RISK ADJUSTMENT ALLOCATION AMOUNT
TX	Individual	53799	US Health Group	$0.30
TX	Individual	55409	Cigna	$48.02
TX	Small Group	58840	Aetna, Inc.	$13.15
TX	Individual	63141	Humana, Inc.	$0.37
TX	Small Group	63141	Humana, Inc.	$1,696.50
TX	Individual	66252	CHRISTUS Health	$140.87
TX	Individual	71837	Sendero Health Plans, Inc.	$141.62
TX	Individual	76589	Cigna	$3.78
TX	Small Group	81795	Arkansas Blue Cross and Blue Shield	$160.25
TX	Individual	84479	Vista Health Plan, Inc.	$4.53
TX	Small Group	84479	Vista Health Plan, Inc.	$2.11
TX	Individual	91716	Aetna, Inc.	$23.56
TX	Small Group	91716	Aetna, Inc.	$1,282.36
TX	Small Group	98809	UnitedHealth Group, Inc.	$20,171.70
UT	Individual	18167	Molina Healthcare	$166.69
UT	Individual	22013	Cambia Health Solutions	$26.07
UT	Small Group	22013	Cambia Health Solutions	$74,890.39
UT	Small Group	29031	National Health Insurance Company	$3,081.23
UT	Individual	34541	Cambia Health Solutions	$0.09
UT	Individual	38927	Aetna, Inc.	$0.76
UT	Small Group	38927	Aetna, Inc.	$6,238.81
UT	Individual	42261	University of Utah Health Insurance Plans	$24.64
UT	Individual	43129	UnitedHealth Group, Inc.	$0.55
UT	Small Group	46958	Humana, Inc.	$2,494.34
UT	Small Group	48588	Aetna, Inc.	$864.71
UT	Small Group	66413	UnitedHealth Group, Inc.	$3,663.02
UT	Individual	68781	SelectHealth	$354.72
UT	Small Group	68781	SelectHealth	$278,286.70
UT	Small Group	80043	WMI Mutual Insurance Company	$393.45
UT	Small Group	97462	UnitedHealth Group, Inc.	$23,106.86