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Centers for Medicare & Medicaid Services
Center for Consumer Information & Insurance Oversight
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SUMMARY REPORT ON PERMANENT RISK ADJUSTMENT TRANSFERS FOR THE 2018 BENEFIT YEAR

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I. Highlights of the Summary Report on Permanent Risk Adjustment Transfers Including High-Cost Risk Pool for the 2018 Benefit Year

The risk adjustment program operated smoothly for the 2018 benefit year.

- Participants in the risk adjustment program include health insurance issuers 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(b), 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 572 issuers participated in the risk adjustment program for the 2018 benefit year[1], of which 552 received a risk adjustment transfer (excluding the high-cost risk pool), and 20 received a default risk adjustment charge in at least one risk pool. For the 2017 benefit year, 654 issuers participated in the risk adjustment program.
- Nationwide, the absolute value of risk adjustment transfers across markets (excluding the high-cost risk pool) was about 7 percent of total premiums, a slight decreased from 8 percent of total premiums in the 2017 benefit year.

The risk adjustment program is working as intended by more evenly spreading the financial risk carried by issuers that enrolled higher-risk individuals in a particular state market risk pool, thereby protecting issuers against adverse selection and supporting them in offering products that serve all types of consumers. Excluding results from the high-cost risk pool, we found that for the 2018 benefit year:

- **Risk adjustment transfers as a percent of premiums slightly decreased compared to the 2017 benefit year.** In the 2017 benefit year, the absolute value of risk adjustment transfers as a percent of premiums averaged 10 percent of premiums in the individual non-catastrophic risk pool and 5 percent of premiums in the small group risk pool. In the 2018 benefit year, the absolute value of risk adjustment transfers decreased to 9 percent of premiums in the individual non-catastrophic risk pool and 4 percent of premiums in the small group risk pool.[2] This occurred partly because of a 14 percent administrative cost reduction to the statewide average premium factor in the state transfer formula, which would have led to a similar percent decrease in absolute transfers if all other things had remained constant. This reduction is designed to exclude administrative costs that do not vary with claims. Other changes in the risk pools, such as shifts in enrollee metal level enrollment as healthier enrollees shifted to lower cost plans, would have also affected the transfers as a percent of premium. Unlike 2017 when enrollees moved from platinum and gold to silver and bronze metal level plans, enrollees in 2018 moved from platinum and silver to gold and bronze metal level plans.

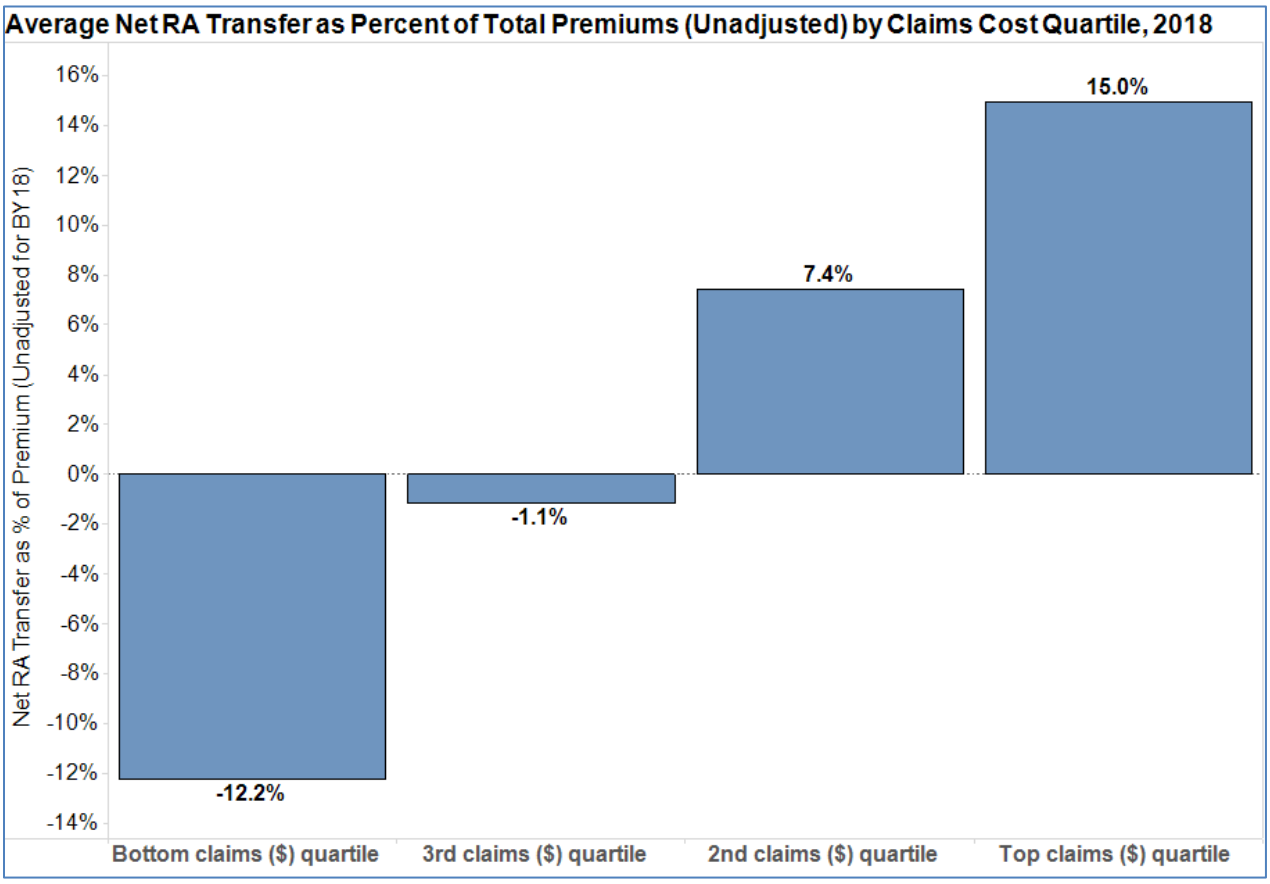
- **Amount of paid claims remains strongly correlated with risk adjustment transfers (Figure 1).** Risk adjustment transfers funds from issuers with lower than average actuarial risk to issuers with higher than average actuarial risk. Issuers with relatively high paid claims amounts were more likely 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-

[1] HHS operated the risk adjustment program in all 50 states and the District of Columbia for the 2018 benefit year.

[2] For the 2018 benefit year, statewide average premiums are reduced (i.e., adjusted) by 14 percent in the state transfer formula to account for the proportion of administrative costs that do not vary with claims. To facilitate comparison between years, premiums shown or used in calculations of transfer percentages in this report are not reduced by 14 percent. Therefore, premiums (unadjusted) throughout this document represent the total premium amounts, and not amounts reduced by 14 percent for administrative costs.

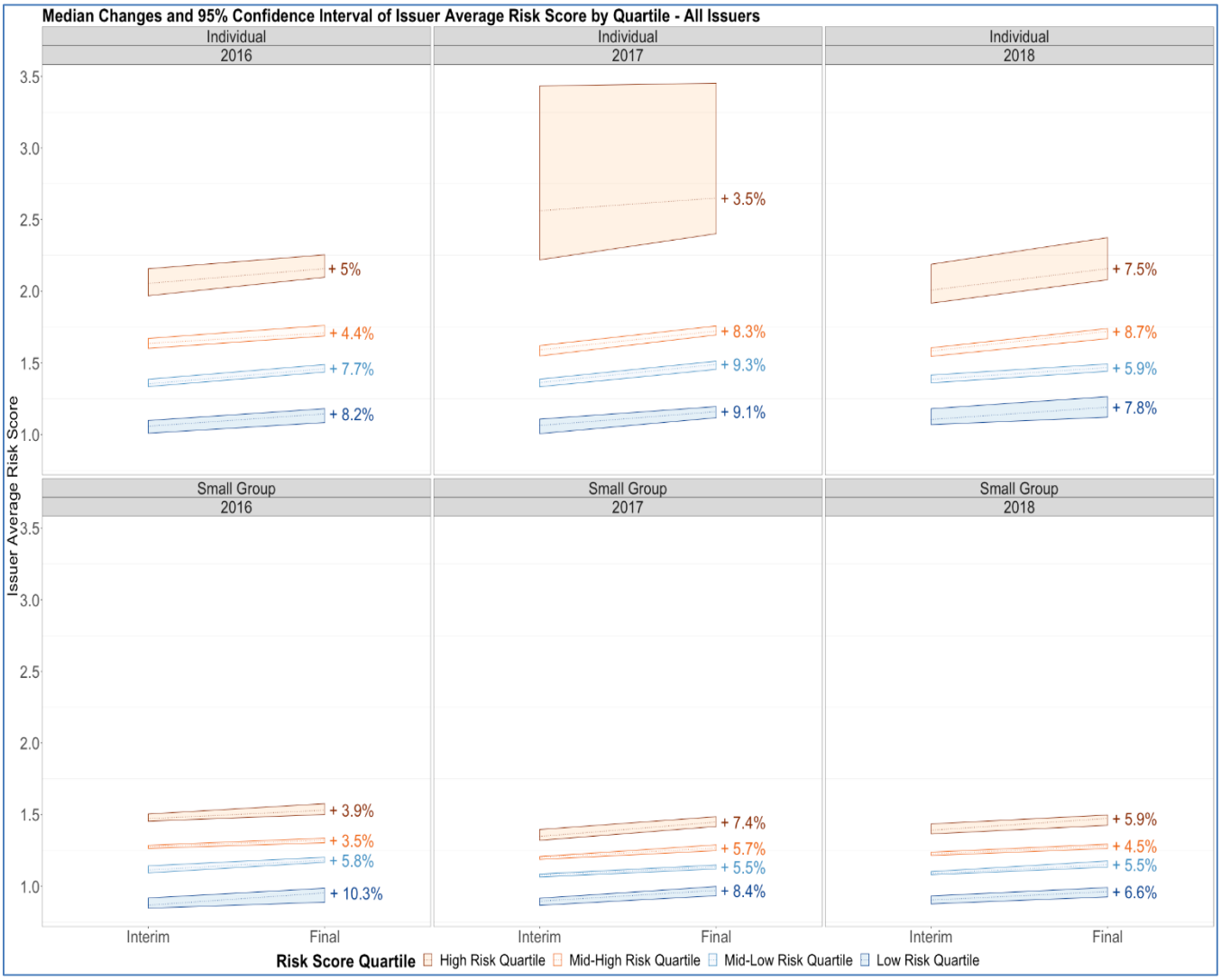
catastrophic risk pool, issuers in the lowest quartile of claims costs, on average, were assessed a risk adjustment charge of approximately 12 percent of total collected premiums, a decline from almost 17 percent in 2017. Conversely, issuers in the highest quartile of claims costs received a risk adjustment payment of approximately 15 percent of their total premiums, which also represents a decline from 21 percent of total premiums in 2017. These declines are largely due to changes in the state transfer formula to reduce statewide average premium by 14 percent, and enrollment shifts toward bronze and gold plans. These correlations between claims quartiles and average risk adjustment transfer amounts as a percent of premium provides evidence that risk adjustment is working as intended, by transferring funds from issuers with lower-than-average actuarial risk to issuers with higher-than-average actuarial risk.

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



- **Predictability between interim and final risk scores remained stable between the 2017 and 2018 benefit years (Figure 2).** For the 2016 benefit year, 48 states plus the District of Columbia received interim risk adjustment results.[3] For the 2017 and 2018 benefit years, all 50 states plus the District of Columbia received interim results, indicating the continued improvement in the quantity and quality of issuer data submissions before the interim deadline. Predictability between interim and final risk scores is noticeably similar in the 2018 benefit year when compared to the 2017 benefit year. Figure 2 shows the median percent change numbers to the right of each risk score quartile and the shaded confidence intervals of each risk score quartile at final as compared to interim. This predictability largely remained stable into the 2018 benefit year, but varied by risk score quartile compared with 2017, reflecting relatively consistent data submission processes between 2017 and 2018.

Figure 2 *(2016-2018 Individual Non-Catastrophic and Small Group Risk Pools)*



[3] For the 2016 benefit year interim report, Massachusetts operated its own State-operated risk adjustment program and therefore did not receive interim results under the HHS-operated program. In addition, Hawaii was excluded from the published interim results for the HHS-operated program due to two credible issuers not meeting the data quantity thresholds.

- **Risk scores remained similar between 2017 and 2018.** In the 2018 benefit year, risk scores overall increased by approximately 0.4 percent in the individual non-catastrophic risk pool and decreased by approximately 0.2 percent in the small group risk pool when compared to the 2017 benefit year risk scores. All metal levels, as well as a majority of states, saw small increases in the state average risk score in the individual non-catastrophic risk pool from 2017 to 2018.

  Risk score changes year over year are affected by changes in plan enrollment (metal or cost-sharing reduction variations), population health, coding practices and the risk adjustment methodology. Risk score changes alone therefore do not accurately reflect changes in population health risk over time.

  The changes to the HHS risk adjustment models for the 2018 benefit year include recalibration updates,[4] trend and benefit design assumptions for plan liability simulation, and weights assigned to each metal level for the denominator calculation. In the 2018 benefit year adult risk adjustment models, we also added a select number of prescription drug classes (RXCs). Also new for the 2018 benefit year is the introduction of the high-cost risk pool, which results in the exclusion of 60 percent of plan costs for enrollees with total aggregated paid claims above $1 million. We estimate that the risk adjustment model updates between 2017 and 2018 resulted in a decrease in risk scores by approximately 7 percent, and that most of this decrease is due to changes in the recalibration data and updates to enrollment proportions by metal level used to weight the denominator in the risk adjustment models.

  We reviewed the percent of enrollees with HCCs to evaluate changes in risk. The percent of enrollees with one or more HCCs and the percent of enrollees with multiple HCCs increased slightly in 2018 (Figure 3). For consistency with prior years, we excluded RXCs from the count of enrollees with HCCs for 2018.[5] This increase in the percent of enrollees with HCCs likely also reflects issuers getting better at coding and capturing diagnoses for EDGE data submission.

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

	Percent with 1 HCC	Percent with 2 HCCs	Percent with 3+ HCCs	Percent with 1+ HCCs
2016	12.4 percent	4.2 percent	2.8 percent	19.4 percent
2017	13.0 percent*	4.6 percent	3.2 percent	20.8 percent*
2018	13.3 percent	4.9 percent	3.5 percent	21.7 percent

*We updated the 2017 figures based on corrected underlying 2017 benefit year data. Therefore, these figures are slightly different from those reported in the Summary Report on Permanent Risk Adjustment Transfers for the 2017 Benefit Year.

[4] 2013, 2014 and 2015 MarketScan® data were used for the 2018 benefit year recalibration whereas 2012, 2013 and 2014 MarketScan® data were used for the 2017 benefit year recalibration.

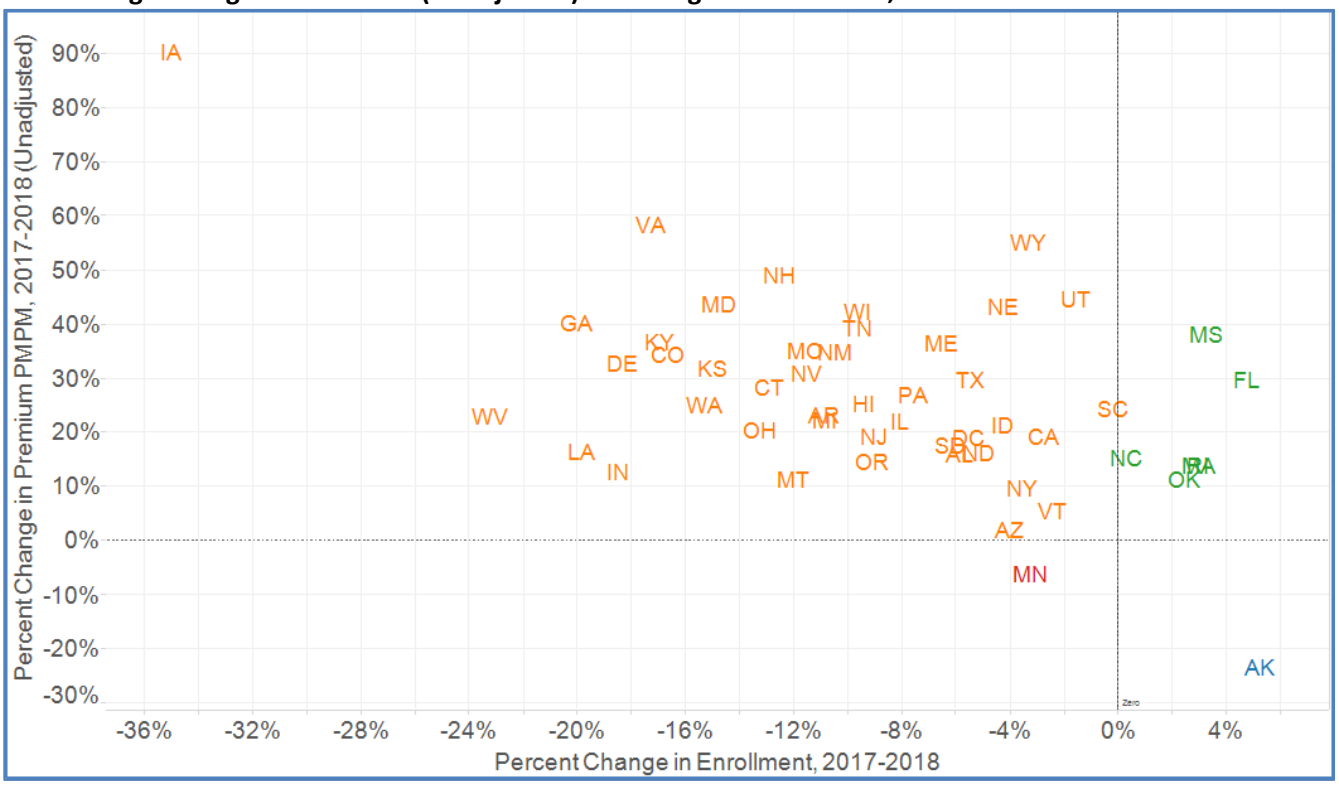
[5] Although we split the Chronic Hepatitis HCC into two HCCs for the 2018 benefit year, the same number of total enrollees should be captured across years regardless of this split.

- **Average premiums in the individual non-catastrophic risk pool increased significantly in 2018 (Figure 4).** Prior to 2017, 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. 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 from 2016. In the 2018 benefit year, premiums increased by approximately 26 percent over the 2017 benefit year.

  While the magnitude of the increase varied significantly across states, states with larger increases in average premiums generally tended to experience larger declines in enrollment in 2018 (Figure 4).

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

State Average Change in Premiums (Unadjusted) vs. Change in Enrollment, 2017 to 2018



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

Figure 5 *(Individual Non-Catastrophic Risk Pool Shown Only)*

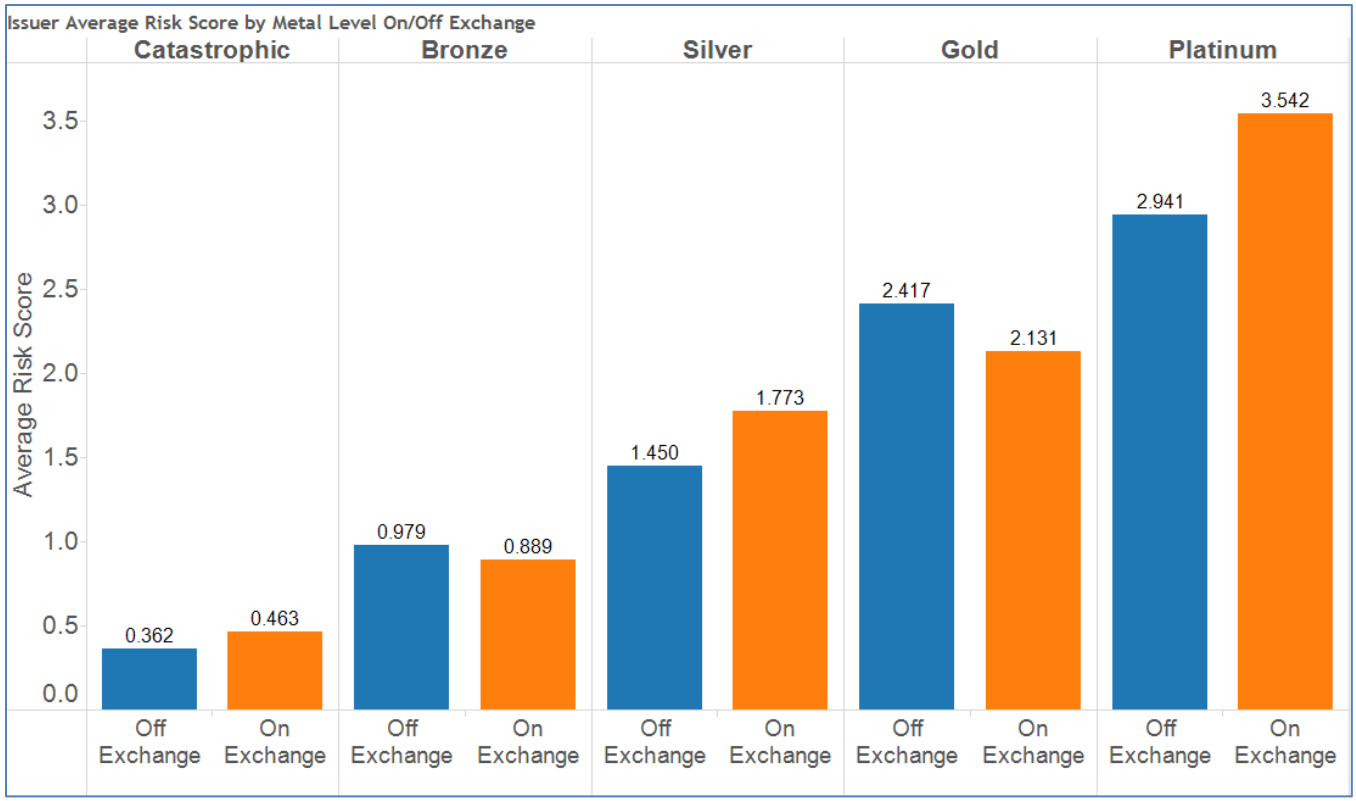
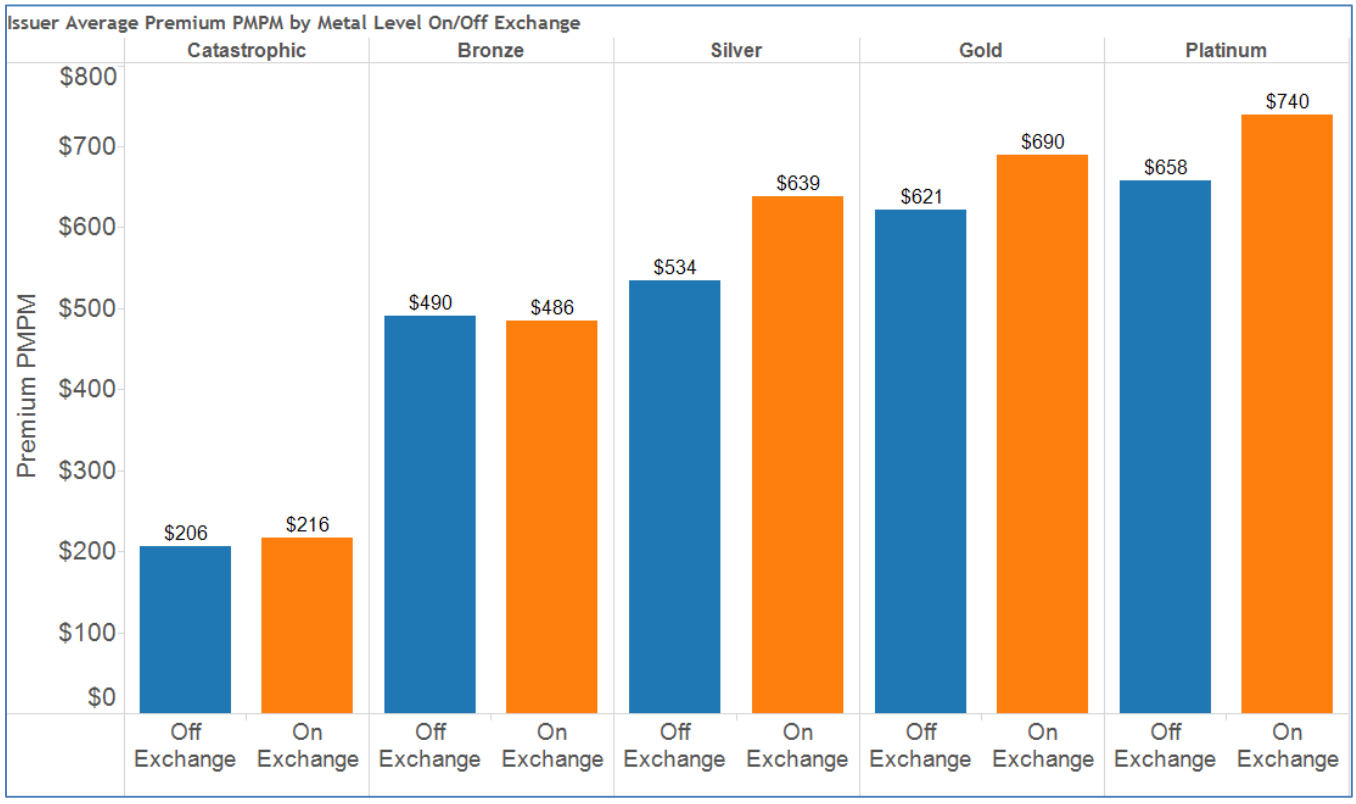


Figure 6 *(Individual Non-Catastrophic Risk Pool Shown Only)*



The high-cost risk pool helped ensure that risk adjustment transfers better reflect the average actuarial risk, while also providing protection to issuers with exceptionally high-cost enrollees.

- The 2018 benefit year is the first year that the HHS-operated risk adjustment methodology included the high-cost risk pool, which helps mitigate any residual incentive for risk selection and ensure that transfers better reflect the average actuarial risk.[6] The high-cost risk pool reimburses issuers for 60 percent of an enrollee's aggregated paid claims costs exceeding $1 million. To fund these payments, the high-cost risk pool collects a charge from issuers of risk adjustment covered plans that is a small percent of an issuer's total premiums.
- A total of 217 issuers nationwide received a high-cost risk pool payment. The high-cost risk pool charge was 0.20 percent of premium for the individual market (including catastrophic and non-catastrophic, and merged market plans), and 0.32 percent of premium for the small group market, nationally.

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 2018 benefit year, the fifth year this program has operated.

The risk adjustment program provides payments to health insurance issuers that have 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 is designed to support issuers 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 2018 benefit year, transfers funds from plans with lower-than-average risk enrollees to plans with higher-than-average risk enrollees.

As finalized in the HHS Notice of Benefit and Payment Parameters for 2018 Final Rule (81 Fed. Reg. 12204), the 2018 benefit year HHS-operated risk adjustment methodology has several new aspects compared to previous benefit years. Beginning with the 2018 benefit year the HHS-operated risk adjustment program accounts for certain prescription drug classes in adult enrollees' risk scores. Additionally, the 2018 benefit year is the first year that a 14 percent administrative cost reduction will be applied to the calculation of statewide average premium in the state transfer formula, which has the effect of reducing risk adjustment state transfers by 14 percent.

Additionally, beginning with the 2018 benefit year, the HHS-operated risk adjustment methodology includes the high-cost risk pool, which helps ensure that risk adjustment transfers better reflect the average actuarial risk, while also stabilizing premiums and reimbursing issuers for a portion of costs for

[6] 81 Fed. Reg. 94058 at 94080 (December 22, 2016).

exceptionally high-cost enrollees. High-cost risk pool payments are funded by a percent of premium charge on all risk adjustment covered plans within the respective high-cost risk pool (one for the individual market, including catastrophic and non-catastrophic plans, and merged market plans, and another for the small group market), nationally. All high-cost risk pool payments and charges are shown below separately from risk adjustment state transfers for informational purposes. Because the high-cost risk pool is a part of the HHS-operated risk adjustment methodology, it applies to issuers of risk adjustment covered plans— in the individual market (including catastrophic, non-catastrophic and merged market plans) or small group market, both on and off-Exchange.

We note that data included in this report reflect amounts calculated based on the 2018 benefit year risk adjustment methodology established through notice with comment rulemaking (78 Fed. Reg. 15410 (2014 Payment Notice), 79 Fed. Reg. 13744 (2015 Payment Notice), 80 Fed. Reg. 10750 (2016 Payment Notice), 81 Fed. Reg. 12204 (2017 Payment Notice), 81 Fed. Reg. 94058 (2018 Payment Notice), 83 Fed. Reg. 63419 (Adoption of the Methodology for the HHS-Operated Permanent Risk Adjustment Program for the 2018 Benefit Year Final Rule) 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 2018 Benefit Year Risk Adjustment Program Summary Data

Table 1 provides HHS-operated risk adjustment program summary data for the 2018 benefit year.

Table 1: HHS-Operated 2018 Risk Adjustment Program Summary Data[7]

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 Program	572
Issuers with Individual Non-Catastrophic Plans	242
Issuers with Individual Catastrophic Plans	142
Issuers with Small Group Plans	473
Issuers in a Merged Market[8]	16

Table 2 provides the national average enrollment weighted monthly premium by risk pool and the total amounts expected to be transferred, expressed both as a dollar amount and as a percent of premiums, within each state market risk pool by using the absolute value of net transfers for each issuer operating within the market risk pool. CMS calculates percentages based on summation of the absolute value of net transfers for each issuer in a specific market risk pool. Thus, for net charges (otherwise reported as negative) we included the absolute value in the equation, as net payments are already positive. This amount is 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 2018 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.

[7] 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.

[8] Massachusetts and Vermont have a merged market for purposes of the HHS-operated risk adjustment program. See https://www.regtap.info/uploads/library/RA_GuidanceMergedMarkets2017_030118_5CR_030118.pdf.

Table 2: National Average Enrollment Weighted Monthly Premium by Risk Pool[9] 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[10]	ABSOLUTE VALUE OF TRANSFER AMOUNTS ($ Billions)
Individual	$594	9 percent	$7.77
Small Group	$501	4 percent	$2.32
Catastrophic	$211	13 percent	$0.04
Merged	$481	5 percent	$0.25
Total National Average Premium	$547	7 percent	$10.38

Table 3 provides the 2018 high-cost risk pool summary data. For the 2018 benefit year, HHS established a $1 million threshold and 60 percent coinsurance rate for the high-cost risk pool payments under the risk adjustment program[11]. High-cost risk pool payments are funded by a percent of premium charge on risk adjustment covered plans within the respective high-cost risk pool (one for the individual market, including catastrophic and non-catastrophic plans, and merged market plans, and another for the small group market), nationally.

Table 3: HHS-Operated 2018 Risk Adjustment High-Cost Risk Pool Summary Data

	Individual Market, Nationwide*	Small Group Market, Nationwide
Number of Issuers in High-Cost Risk Pool**	264	473
Number of Issuers Receiving High-Cost Risk Pool Payments	128	142
Total High-Cost Risk Pool Payment Amount	$178.4 million	$193.2 million
High-Cost Risk Pool Percent of Premium Charge	0.20 percent	0.32 percent

* Includes catastrophic and non-catastrophic plans, and merged market plans

**Total unique issuers in the high-cost risk pool across both markets is 552 issuers because default risk adjustment charge issuers are not assessed a high-cost risk pool charge nor do they receive a high-cost risk pool payment.

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 2018 benefit year. *Appendix A* includes the state average monthly premiums by state market risk pool (catastrophic, individual non-catastrophic, small group, and merged), the state average plan liability risk score by state market risk pool, state average allowable rating factor by state market risk pool, state average actuarial value by state market risk pool, state average induced demand factor by state market risk pool, and billable member months. We note that some data elements in *Appendix A* may not match the state risk pool averages found in issuers' system generated reports or final transfers in state risk pools that had a material discrepancy resulting in payment adjustments after the calculation of risk

[9] 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.

[10] Absolute value of net transfer charge or payment calculated at issuer level and rounded to the nearest percentage point unless otherwise specified. This amount reflects the 14 percent administrative cost adjustment to the statewide average premium.

[11] See 81 Fed. Reg. 94058 at 94080 (December 22, 2016).

adjustment transfers.

We also provide a description below 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 Monthly 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. Beginning in the 2018 benefit year, a 14 percent administrative cost adjustment is applied to the state average monthly premium. This value is used in the state payment transfer formula calculations for risk adjustment payments and charges.
State Average Monthly Premium Before Adjustment	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 before the 14 percent administrative cost adjustment is applied. This value is for informational purposes only and not used in the calculation of risk adjustment payments and charges.
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.[12]

[12] 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 2018 benefit year risk adjustment transfer amounts by issuer.

* *"$-" or "$0.00" risk adjustment transfer or high-cost risk pool payment*: We signify *"$-"* in a state market 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. Issuers have "$0.00" for high-cost risk pool payments if the issuer did not have any enrollees with claims costs exceeding the high-cost risk pool threshold of $1 million.

Table 4: Issuer-specific Information for Non-Merged Market Issuers *(Appendix C)*

		HIGH-COST RISK POOL PAYMENT AMOUNT			RISK ADJUSTMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
11082	Aetna, Inc.	AK	$-	$0.00	$-	$-	$40,127.64
38344	Premera Blue Cross	AK	$4,941,673.00	$644,483.75	$0.00	$-	$124,518.87
73836	Moda Health Plan, Inc.	AK	$-	$0.00	$-	$-	($368,683.53)
80049	UnitedHealth Group, Inc.	AK	$-	$0.00	$-	$-	$204,037.00
46944	Blue Cross Blue Shield of Alabama	AL	$2,758,305.21	$516,017.10	$2,970,457.93	$13,570.07	$2,587,809.53
68259	UnitedHealth Group, Inc.	AL	$-	$0.00	$-	$-	($920,615.54)
69461	UnitedHealth Group, Inc.	AL	$-	$0.00	$-	$-	($1,087,485.53)
73301	Bright Health Insurance Company	AL	$0.00	$-	($2,970,457.94)	($13,570.05)	$-
93018	Viva Health, Inc.	AL	$-	$0.00	$-	$-	($579,708.41)
13262	Arkansas Blue Cross and Blue Shield	AR	$-	$0.00	$-	$-	($123,494.18)
22732	UnitedHealth Group, Inc.	AR	$-	$0.00	$-	$-	($49,392.31)
37903	QualChoice Arkansas	AR	$0.00	$0.00	($5,937,801.90)	$-	($789,051.87)
62141	Centene Corporation	AR	$168,795.38	$-	($2,454,561.02)	$-	$-
65817	UnitedHealth Group, Inc.	AR	$-	$0.00	$-	$-	($76,204.39)
70525	QualChoice Arkansas	AR	$0.00	$0.00	($5,510,323.85)	$0.00	($1,025,680.23)
75293	Arkansas Blue Cross and Blue Shield	AR	$0.00	$0.00	$13,902,686.73	$-	$2,168,296.90
81392	UnitedHealth Group, Inc.	AR	$-	$0.00	$-	$-	($104,473.88)
23307	Humana, Inc.	AZ	$-	$0.00	$-	$-	($3,153,194.10)
23435	Aetna, Inc.	AZ	$-	$0.00	$-	$-	($17,945.39)
40702	UnitedHealth Group, Inc.	AZ	$-	$0.00	$-	$-	($4,877,936.03)
51485	Centene Corporation	AZ	$-	$0.00	$-	$-	($627,530.71)
53901	Blue Cross Blue Shield of Arizona, Inc.	AZ	$0.00	$0.00	($27,000,895.26)	$0.00	($5,431,749.22)
66105	Humana, Inc.	AZ	$-	$0.00	$-	$-	$252,810.18
70904	WMI Mutual Insurance Company	AZ	$-	$0.00	$-	$-	($42,142.13)
77349	Aetna, Inc.	AZ	$-	$81,894.70	$-	$-	($2,341,079.20)

		HIGH-COST RISK POOL PAYMENT AMOUNT			RISK ADJUSTMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
78611	Aetna, Inc.	AZ	$-	$0.00	$-	$-	$48,109.07
82011	UnitedHealth Group, Inc.	AZ	$-	$1,955,393.08	$-	$-	$13,350,964.36
84251	Aetna, Inc.	AZ	$-	$52,091.37	$-	$-	$2,374,554.63
86830	Cigna	AZ	$-	$0.00	$-	$-	($20,983.13)
91450	Centene Corporation	AZ	$613,267.07	$0.00	$24,194,445.65	$-	$369,862.42
97667	Cigna	AZ	$71,251.12	$0.00	$2,806,449.62	$-	($77,490.30)
98971	UnitedHealth Group, Inc.	AZ	$-	$0.00	$-	$-	$193,749.58
10544	Oscar Health	CA	$1,245,493.87	$0.00	($36,001,256.71)	($1,147,602.38)	($70,829.72)
18126	Molina Healthcare	CA	$0.00	$-	($90,009,337.03)	($118,430.26)	$-
20523	Aetna, Inc.	CA	$-	$655,156.36	$-	$-	($9,898,601.63)
27330	Kaiser Permanente	CA	$-	$0.00	$-	$-	$816,618.51
27603	Anthem, Inc.	CA	$103,145.78	$17,152,346.90	($66,953,784.13)	$183,243.76	$207,309,138.81
40513	Kaiser Permanente	CA	$12,387,739.84	$19,993,561.51	($392,457,699.28)	($1,280,128.10)	($336,899,630.56)
40733	Aetna, Inc.	CA	$-	$383,178.13	$-	$-	$23,304,514.98
47579	Chinese Community Health Plan	CA	$0.00	$0.00	($29,880,172.49)	($3,554.88)	($2,611,734.33)
49116	UnitedHealth Group, Inc.	CA	$-	$1,913,688.08	$-	$-	($27,618,293.15)
56887	Ventura County Health Care Plan	CA	$-	$0.00	$-	$-	($50,222.32)
64210	Sutter Health Plan	CA	$0.00	$1,545,021.23	$1,482,291.69	$-	($14,253,113.23)
64618	National Health Insurance Company	CA	$-	$0.00	$-	$-	$64,847.12
67138	Centene Corporation	CA	$779,197.06	$34,995.60	($61,743,275.02)	($293,685.53)	($13,034,288.60)
70285	Blue Shield of California	CA	$27,961,659.25	$17,100,642.13	$784,798,234.25	$2,212,465.14	$142,662,341.10
84014	County of Santa Clara	CA	$0.00	$-	($21,489,663.83)	($156,889.52)	$-
92499	Sharp Health Plan	CA	$0.00	$0.00	($5,021,957.43)	$178,174.84	($7,933,606.37)
92815	Local Initiative Health Authority for Los Angeles County	CA	$0.00	$-	($79,092,830.97)	($66,294.41)	$-
93689	Western Health Advantage	CA	$1,272,106.19	$1,012,541.98	($5,541,458.95)	($73,100.13)	$2,733,591.76
95677	UnitedHealth Group, Inc.	CA	$-	$3,491,146.75	$-	$-	$2,858,307.23
99110	Centene Corporation	CA	$7,691,728.10	$262,331.89	$1,910,909.83	$565,801.50	$32,620,960.82
21032	Kaiser Permanente	CO	$3,038,085.90	$463,175.11	($63,140,864.67)	($658,008.05)	($21,002,872.22)
31070	Bright Health Insurance Company	CO	$0.00	$-	($20,665,611.53)	($703,906.61)	$-
35944	Kaiser Permanente	CO	$-	$0.00	$-	$-	($224,427.30)
39041	Aetna, Inc.	CO	$-	$0.00	$-	$-	$769,752.52
39670	Aetna, Inc.	CO	$-	$0.00	$-	$-	($354.98)
49375	Cigna	CO	$1,362,639.56	$-	$9,010,391.45	$-	$-
59036	UnitedHealth Group, Inc.	CO	$-	$0.00	$-	$-	($11,714,412.68)
63312	Colorado Choice Health Plans	CO	$0.00	$0.00	$3,246,846.91	($797,682.30)	($967,769.71)
66699	Denver Health Medical Plan, Inc.	CO	$0.00	$-	$15,702,946.77	$-	$-
67879	UnitedHealth Group, Inc.	CO	$-	$3,045,447.15	$-	$-	$26,334,299.08
74320	Humana, Inc.	CO	$-	$37,333.98	$-	$-	($1,251,588.11)
76680	Anthem, Inc.	CO	$5,493,800.87	$0.00	$49,427,489.22	($811,836.71)	($7,830,843.01)

		HIGH-COST RISK POOL PAYMENT AMOUNT			RISK ADJUSTMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
79509	Humana, Inc.	CO	$-	$0.00	$-	$-	$553,653.01
80208	Rocky Mountain Health Care Options	CO	$-	$0.00	$-	$-	$342,059.90
87269	Anthem, Inc.	CO	$13,395.61	$1,207,903.26	$-	$2,971,433.67	$14,943,165.45
97879	Rocky Mountain Health Care Options	CO	$0.00	$55,586.13	$6,418,801.86	$-	$49,337.97
29462	UnitedHealth Group, Inc.	CT	$-	$324,246.28	$-	$-	($6,804,964.22)
39159	Aetna, Inc.	CT	$-	$0.00	$-	$-	$2,341,215.85
49650	UnitedHealth Group, Inc.	CT	$-	$0.00	$-	$-	($897,268.86)
71179	UnitedHealth Group, Inc.	CT	$-	$0.00	$-	$-	($3,998,843.33)
75091	ConnectiCare, Inc.	CT	$293,778.70	$0.00	($718,321.15)	$-	($59,871.13)
76962	ConnectiCare, Inc.	CT	$996,241.78	$0.00	($15,387,332.35)	$76,196.63	($228,096.34)
86545	Anthem, Inc.	CT	$2,420,279.60	$173,964.13	$6,285,168.78	($76,196.63)	$13,684,351.63
89130	HPHC Insurance Company, Inc	CT	$-	$99,083.08	$-	$-	($2,980,597.53)
94815	ConnectiCare, Inc.	CT	$0.00	$841,648.80	$9,820,484.66	$-	$113,129.12
95882	HPHC Insurance Company, Inc	CT	$-	$0.00	$-	$-	($1,169,055.15)
21066	UnitedHealth Group, Inc.	DC	$-	$0.00	$-	$-	($824,856.28)
41842	UnitedHealth Group, Inc.	DC	$-	$0.00	$-	$-	($278,492.64)
73987	Aetna, Inc.	DC	$-	$0.00	$-	$-	$335,841.89
75753	UnitedHealth Group, Inc.	DC	$-	$0.00	$-	$-	($23,064.00)
77422	Aetna, Inc.	DC	$-	$0.00	$-	$-	$283,513.19
78079	CareFirst	DC	$210,269.66	$0.00	$5,656,379.30	$-	$10,183,042.72
86052	CareFirst	DC	$0.00	$0.00	($2,527,374.40)	($1,942.43)	($6,650,691.31)
94506	Kaiser Permanente	DC	$0.00	$0.00	($3,129,004.89)	$1,942.43	($3,025,293.55)
29497	Aetna, Inc.	DE	$-	$0.00	$-	$-	($112,942.63)
61021	UnitedHealth Group, Inc.	DE	$-	$0.00	$-	$-	($1,000,858.99)
67190	Aetna, Inc.	DE	$-	$0.00	$-	$-	$268,135.29
76168	Highmark	DE	$0.00	$309,611.45	$0.00	$0.00	$1,121,672.60
97569	UnitedHealth Group, Inc.	DE	$-	$0.00	$-	$-	($276,006.27)
16842	Blue Cross and Blue Shield of Florida	FL	$5,009,930.23	$1,217,621.44	$694,838,641.92	$-	$24,548,332.72
18628	Aetna, Inc.	FL	$-	$8,597.74	$-	$-	$8,637,491.76
19898	AvMed, Inc.	FL	$1,064,146.17	$41,884.79	$5,378,911.17	$-	$4,017,215.48
21663	Centene Corporation	FL	$3,111,407.14	$-	($501,224,663.81)	$-	$-
23841	Aetna, Inc.	FL	$-	$0.00	$-	$-	$2,176,135.48
30252	Blue Cross and Blue Shield of Florida	FL	$2,876,505.23	$0.00	($182,573,673.78)	$-	($9,056,277.03)
35783	Humana, Inc.	FL	$-	$0.00	$-	$-	($6,830,380.68)
36194	Health First, Inc.	FL	$159,653.33	$0.00	$8,486,520.28	$129,549.12	($1,306,645.92)
42204	UnitedHealth Group, Inc.	FL	$-	$0.00	$-	$-	($98,778.52)
43839	UnitedHealth Group, Inc.	FL	$-	$954,847.55	$-	$-	$3,424,089.93
48121	Cigna	FL	$0.00	$-	$5,635,093.58	$-	$-
54172	Molina Healthcare	FL	$0.00	$-	($33,803,627.85)	$-	$-
56503	Florida Health Care Plan, Inc.	FL	$0.00	$0.00	$3,262,798.65	($129,549.12)	$367,271.93

		HIGH-COST RISK POOL PAYMENT AMOUNT			RISK ADJUSTMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
66966	Capital Health Plan	FL	$-	$0.00	$-	$-	($5,382,760.20)
68398	UnitedHealth Group, Inc.	FL	$-	$20,062.19	$-	$-	($6,372,816.64)
77150	Health First, Inc.	FL	$-	$0.00	$-	$-	($291.31)
80779	UnitedHealth Group, Inc.	FL	$-	$540,718.02	$-	$-	($13,684,180.57)
99308	Humana, Inc.	FL	$-	$0.00	$-	$-	($438,406.63)
13535	UnitedHealth Group, Inc.	GA	$-	$0.00	$-	$-	$911,383.68
30552	UnitedHealth Group, Inc.	GA	$-	$168,578.96	$-	$-	($5,103,000.19)
37001	Humana, Inc.	GA	$-	$0.00	$-	$-	$790,920.55
43802	UnitedHealth Group, Inc.	GA	$-	$0.00	$-	$-	$1,409,608.01
49046	Anthem, Inc.	GA	$738,134.34	$1,462,329.23	$58,061,132.96	$331,380.84	$18,327,398.65
70893	Centene Corporation	GA	$372,918.53	$-	($26,833,209.41)	$-	$-
82302	Kaiser Permanente	GA	$-	$0.00	$-	$-	$51,281.79
82824	Aetna, Inc.	GA	$-	$0.00	$-	$-	($1,029,523.48)
83761	Alliant Health Plans	GA	$2,505,299.71	$0.00	$16,383,397.77	$-	($1,424,401.11)
83978	Aetna, Inc.	GA	$-	$0.00	$-	$-	$3,124,824.43
89942	Kaiser Permanente	GA	$2,649,770.16	$364,721.84	($47,611,321.34)	($331,380.84)	($4,935,164.80)
93332	Humana, Inc.	GA	$-	$2,454,127.22	$-	$-	($12,123,327.28)
18350	Hawaii Medical Service Association	HI	$0.00	$142,129.82	$15,441,123.76	$0.00	$14,026,813.76
54179	UnitedHealth Group, Inc.	HI	$-	$0.00	$-	$-	($42,614.64)
56682	Hawaii Medical Assurance Association	HI	$-	$0.00	$-	$-	$46,587.65
60612	Kaiser Permanente	HI	$294,407.62	$82,070.90	($15,441,123.75)	$-	($11,519,220.44)
95366	University Health Alliance (UHA)	HI	$-	$0.00	$-	$-	($2,511,566.30)
18973	Aetna, Inc.	IA	$-	$0.00	$-	$-	$296,408.40
25896	Wellmark, Inc.	IA	$-	$0.00	$-	$-	($7,296,763.77)
27651	Quartz Health Solutions	IA	$-	$0.00	$-	$-	($201,797.97)
50735	Medical Associates Health Plans	IA	$-	$0.00	$-	$-	$380,331.77
56610	UnitedHealth Group, Inc.	IA	$-	$0.00	$-	$-	($530,684.05)
72160	Wellmark, Inc.	IA	$-	$0.00	$-	$-	$11,693,682.82
74406	Wellmark, Inc.	IA	$-	$0.00	$-	$-	($965,657.78)
74980	Avera Health Plans, Inc.	IA	$-	$0.00	$-	$-	$175,763.58
77638	Health Alliance Medical Plans, Inc.	IA	$-	$0.00	$-	$-	($30,426.76)
78252	Aetna, Inc.	IA	$-	$0.00	$-	$-	($108,601.34)
85930	Sanford Health Plan	IA	$-	$0.00	$-	$-	$97,609.88
87928	Wellmark, Inc.	IA	$-	$0.00	$-	$-	($577,751.06)
88678	UnitedHealth Group, Inc.	IA	$-	$0.00	$-	$-	($2,932,113.68)
93078	Medica Insurance Company	IA	$754,231.61	$-	$0.00	$0.00	$-
26002	SelectHealth	ID	$0.00	$0.00	$8,603,093.02	$344,101.21	($448,196.27)
38128	Montana Health Cooperative	ID	$0.00	$0.00	($3,101,803.95)	($496,792.03)	($156,457.18)
43541	National Health Insurance Company	ID	$-	$0.00	$-	$-	($118,607.96)
44648	Cambia Health Solutions	ID	$0.00	$236,241.83	$2,203,755.18	$-	($555,585.77)

		HIGH-COST RISK POOL PAYMENT AMOUNT			RISK ADJUSTMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
45059	Aetna, Inc.	ID	$-	$0.00	$-	$-	($37,369.57)
50118	UnitedHealth Group, Inc.	ID	$-	$0.00	$-	$-	($39,261.09)
60597	PacificSource Health Plans	ID	$0.00	$0.00	$3,528,512.68	($23,494.22)	($1,068,685.11)
61175	Aetna, Inc.	ID	$-	$0.00	$-	$-	($1,056.38)
61589	Blue Cross of Idaho Health Service, Inc.	ID	$0.00	$0.00	($11,233,557.03)	$176,185.02	$2,425,219.41
20129	Health Alliance Medical Plans, Inc.	IL	$765,715.37	$0.00	($6,824,096.13)	($87,405.68)	($305,889.08)
24301	Medical Associates Health Plans	IL	$-	$0.00	$-	$-	($155,180.69)
27833	Centene Corporation	IL	$0.00	$-	($39,834,494.41)	$-	$-
34446	UnitedHealth Group, Inc.	IL	$-	$0.00	$-	$-	$1,082,034.65
36096	Health Care Service Corporation	IL	$2,339,099.39	$3,755,760.05	$102,754,252.53	$87,405.68	$6,819,981.00
42529	UnitedHealth Group, Inc.	IL	$-	$0.00	$-	$-	($3,158,371.33)
53882	Cigna	IL	$0.00	$-	($56,095,661.94)	$-	$-
54322	MercyCare Insurance Company	IL	$-	$0.00	$-	$-	($128,031.82)
58239	UnitedHealth Group, Inc.	IL	$-	$0.00	$-	$-	($1,157,909.54)
58288	Humana, Inc.	IL	$-	$0.00	$-	$-	($121,554.50)
68303	Humana, Inc.	IL	$-	$0.00	$-	$-	($635,932.73)
72547	Aetna, Inc.	IL	$-	$0.00	$-	$-	$928,837.97
92476	UnitedHealth Group, Inc.	IL	$-	$174,342.60	$-	$-	($3,093,873.26)
99129	Aetna, Inc.	IL	$-	$0.00	$-	$-	($74,110.68)
17575	Anthem, Inc.	IN	$0.00	$2,452,160.40	$-	$0.00	$7,270,575.40
32378	Aetna, Inc.	IN	$-	$0.00	$-	$-	($346,996.78)
33380	Indiana University Health	IN	$-	$0.00	$-	$-	($265,760.65)
36373	UnitedHealth Group, Inc.	IN	$-	$0.00	$-	$-	$147,741.02
43442	Humana, Inc.	IN	$-	$0.00	$-	$-	($1,113,912.68)
50816	Physicians Health Plan of Northern Indiana, Inc.	IN	$-	$16,296.75	$-	$-	($3,051,303.81)
54192	CareSource	IN	$61,808.50	$-	($12,933,547.30)	$-	$-
67920	Southeastern Indiana Health Organization	IN	$-	$0.00	$-	$-	$232,857.81
72850	UnitedHealth Group, Inc.	IN	$-	$881,178.17	$-	$-	($2,650,111.25)
76179	Centene Corporation	IN	$1,293,411.70	$-	$12,933,547.39	$-	$-
99791	Humana, Inc.	IN	$-	$5,387.23	$-	$-	($223,089.05)
18558	Blue Cross and Blue Shield of Kansas, Inc.	KS	$815,905.48	$347,787.38	($11,593,606.91)	$-	($7,891,084.80)
19968	Humana, Inc.	KS	$-	$0.00	$-	$-	$3,574,503.60
27811	Blue Cross and Blue Shield of Kansas, Inc.	KS	$-	$0.00	$-	$-	($902,058.17)
39520	Medica Insurance Company	KS	$0.00	$-	$2,779,948.57	$0.00	$-
49857	Humana, Inc.	KS	$-	$0.00	$-	$-	$144,832.97
57850	Aetna, Inc.	KS	$-	$0.00	$-	$-	$127,918.88
80065	Centene Corporation	KS	$245,836.45	$-	$8,683,600.84	$-	$-
84600	Aetna, Inc.	KS	$-	$0.00	$-	$-	($131,441.85)
94248	Blue Cross and Blue Shield of Kansas City	KS	$0.00	$0.00	$130,057.47	$-	$2,569,889.67
94968	UnitedHealth Group, Inc.	KS	$-	$2,925.76	$-	$-	$2,507,439.83

		HIGH-COST RISK POOL			RISK ADJUSTMENT TRANSFER AMOUNT BY RISK		
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
15411	Humana, Inc.	KY	$-	$144,719.73	$-	$-	($1,069,657.08)
23671	UnitedHealth Group, Inc.	KY	$-	$0.00	$-	$-	($2,484,842.49)
28773	UnitedHealth Group, Inc.	KY	$-	$0.00	$-	$-	($269,089.85)
34822	Aetna, Inc.	KY	$-	$0.00	$-	$-	($7,384.36)
36239	Anthem, Inc.	KY	$112,923.34	$75,587.39	($3,287,986.61)	($124,574.42)	$3,598,355.49
40586	Baptist Health Plan	KY	$-	$0.00	$-	$-	($480,698.92)
45636	CareSource	KY	$2,318.73	$-	$3,287,986.61	$124,574.42	$-
45920	UnitedHealth Group, Inc.	KY	$-	$0.00	$-	$-	$713,317.03
14030	Aetna, Inc.	LA	$-	$0.00	$-	$-	($20,691.77)
19636	Blue Cross Blue Shield of Louisiana	LA	$91,687.72	$0.00	($73,454,376.23)	$-	($5,295,041.84)
38499	UnitedHealth Group, Inc.	LA	$-	$0.00	$-	$-	($198,092.80)
44965	Humana, Inc.	LA	$-	$0.00	$-	$-	($2,000,144.94)
53946	UnitedHealth Group, Inc.	LA	$-	$0.00	$-	$-	($713,411.75)
67243	Vantage Health Plan, Inc.	LA	$0.00	$0.00	($2,946,175.52)	$-	$404,024.11
69842	UnitedHealth Group, Inc.	LA	$-	$440,021.92	$-	$-	($913,127.93)
81941	Aetna, Inc.	LA	$-	$0.00	$-	$-	($56,697.06)
97176	Blue Cross Blue Shield of Louisiana	LA	$770,245.22	$1,833,487.77	$76,400,551.71	$-	$8,793,183.93
23620	UnitedHealth Group, Inc.	MD	$-	$56,501.43	$-	$-	$3,509,627.72
28137	CareFirst	MD	$180,024.79	$304,608.58	$31,193,835.23	($252,534.35)	($12,256,680.53)
31112	UnitedHealth Group, Inc.	MD	$-	$0.00	$-	$-	($6,116,663.64)
45532	CareFirst	MD	$189,430.79	$729,873.64	$52,045,710.44	$-	$9,815,643.05
65635	UnitedHealth Group, Inc.	MD	$-	$0.00	$-	$-	$2,396,160.88
66516	Aetna, Inc.	MD	$-	$0.00	$-	$-	$98,363.58
70767	Aetna, Inc.	MD	$-	$0.00	$-	$-	$203,769.25
72375	UnitedHealth Group, Inc.	MD	$-	$387,402.02	$-	$-	($8,302,972.30)
90296	Kaiser Permanente	MD	$311,583.99	$135,164.96	($119,992,217.28)	$252,534.34	($4,857,082.47)
94084	CareFirst	MD	$0.00	$934,483.28	$36,752,671.65	$-	$15,509,834.51
11593	HPHC Insurance Company, Inc	ME	$-	$589,570.58	$-	$-	$1,883,154.12
33653	Maine Community Health Options	ME	$0.00	$0.00	($17,598,622.74)	$73,118.04	($3,607,861.15)
48396	Anthem, Inc.	ME	$0.00	$0.00	$6,033,018.60	($73,118.05)	$1,867,113.25
53357	Aetna, Inc.	ME	$-	$0.00	$-	$-	$1,062,166.72
73250	Aetna, Inc.	ME	$-	$0.00	$-	$-	($132,556.45)
90214	UnitedHealth Group, Inc.	ME	$-	$0.00	$-	$-	($888,085.43)
96667	HPHC Insurance Company, Inc	ME	$878,121.68	$0.00	$11,565,604.19	$-	($183,930.99)
15560	Blue Cross Blue Shield of Michigan	MI	$1,219,770.68	$1,733,259.01	$105,190,784.67	$1,992,383.31	$9,330,777.06
20662	Physicians Health Plan	MI	$-	$0.00	$-	$-	($91,947.03)
29241	Priority Health	MI	$-	$0.00	$-	$-	$283,794.39
29698	Priority Health	MI	$0.00	$465,052.61	($39,048,440.47)	$-	($4,945,191.84)
37651	Health Alliance Plan (HAP)	MI	$0.00	$0.00	($727,122.66)	($403,824.00)	$2,632,134.00
40047	Molina Healthcare	MI	$0.00	$-	($19,480,573.69)	$-	$-

		HIGH-COST RISK POOL PAYMENT AMOUNT			RISK ADJUSTMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
52670	UnitedHealth Group, Inc.	MI	$-	$0.00	$-	$-	($22,687.16)
58594	Meridian Health Plan of Michigan, Inc.	MI	$0.00	$-	($6,714,520.68)	($283,789.07)	$-
60829	Physicians Health Plan	MI	$0.00	$0.00	($3,107,390.09)	($7,762.09)	$283,872.67
62294	Humana, Inc.	MI	$-	$0.00	$-	$-	($212,427.29)
63631	UnitedHealth Group, Inc.	MI	$-	$0.00	$-	$-	($1,052,224.36)
67183	Total Health Care USA, Inc.	MI	$0.00	$0.00	($10,282,614.24)	$-	$216,255.75
67577	Health Alliance Plan (HAP)	MI	$0.00	$0.00	$366,746.18	($85,130.90)	$946,943.33
74917	McLaren Health Care	MI	$316,261.34	$0.00	($2,861,423.37)	($126,212.31)	$372,435.74
95233	Paramount Insurance Company	MI	$-	$0.00	$-	$-	$175,307.30
98185	Blue Cross Blue Shield of Michigan	MI	$508,266.92	$67,053.62	($23,335,445.65)	($1,085,664.93)	($7,917,042.60)
31616	Medica Insurance Company	MN	$862,360.19	$199,128.18	$8,696,709.02	($245,950.60)	$5,075,139.49
34102	HealthPartners Insurance Company	MN	$110,077.62	$-	($37,956,175.69)	$423,710.64	$-
49316	Blue Cross Blue Shield of Minnesota	MN	$-	$1,892,272.85	$-	$-	$21,729,013.18
52346	Sanford Health Plan	MN	$-	$0.00	$-	$-	($27,433.11)
57129	Blue Cross Blue Shield of Minnesota	MN	$0.00	$0.00	$19,056,777.68	$-	($5,354,512.26)
70373	Quartz Health Solutions	MN	$-	$0.00	$-	$-	($582,451.59)
79888	HealthPartners Insurance Company	MN	$-	$3,067,932.22	$-	$-	($18,216,645.22)
85654	HealthPartners Insurance Company	MN	$-	$0.00	$-	$-	($962,178.52)
85736	UCare Minnesota	MN	$1,523,558.19	$-	$8,101,529.32	($171,322.08)	$-
88102	PreferredOne Insurance Company	MN	$0.00	$880,864.52	$2,101,159.51	($6,437.94)	($1,606,215.80)
97624	PreferredOne Insurance Company	MN	$-	$0.00	$-	$-	($54,716.13)
30613	Humana, Inc.	MO	$-	$0.00	$-	$-	($772,207.54)
32753	Anthem, Inc.	MO	$784,471.56	$0.00	($16,066,943.61)	$443,822.96	$2,912,857.47
32898	Aetna, Inc.	MO	$-	$0.00	$-	$-	($5,917.99)
34762	Blue Cross and Blue Shield of Kansas City	MO	$0.00	$94,200.46	$247,623.50	$-	$1,607,854.39
48161	Aetna, Inc.	MO	$-	$0.00	$-	$-	$153,964.44
74483	Cigna	MO	$75,585.78	$-	($38,548,201.00)	$-	$-
95426	UnitedHealth Group, Inc.	MO	$-	$90,560.30	$-	$-	($2,677,703.50)
96384	Cox HealthPlans	MO	$0.00	$90,419.51	($1,075,774.51)	($443,822.95)	($1,218,847.28)
99723	Centene Corporation	MO	$1,562,048.77	$-	$55,443,295.58	$-	$-
11721	Blue Cross Blue Shield of Mississippi	MS	$365,129.10	$54,613.27	$1,923,319.68	$-	($531,168.38)
26781	UnitedHealth Group, Inc.	MS	$-	$0.00	$-	$-	($81,430.37)
48963	Humana, Inc.	MS	$-	$0.00	$-	$-	$327,880.85
61794	UnitedHealth Group, Inc.	MS	$-	$0.00	$-	$-	($62,475.45)
90714	Centene Corporation	MS	$0.00	$-	($1,923,319.68)	$-	$-
97560	UnitedHealth Group, Inc.	MS	$-	$0.00	$-	$-	$488,406.29
98805	UnitedHealth Group, Inc.	MS	$-	$0.00	$-	$-	($141,212.92)
23603	PacificSource Health Plans	MT	$0.00	$568,551.18	$590,688.46	$-	($5,934,314.84)
30751	Health Care Service Corporation	MT	$686,040.56	$0.00	$29,940,321.60	$170,427.51	$6,014,895.53
32225	Montana Health Cooperative	MT	$0.00	$0.00	($30,531,010.08)	($170,427.51)	($62,043.60)

		HIGH-COST RISK POOL PAYMENT AMOUNT			RISK ADJUSTMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
46621	UnitedHealth Group, Inc.	MT	$-	$0.00	$-	$-	($18,537.12)
11512	Blue Cross Blue Shield of North Carolina	NC	$8,841,195.88	$3,105,124.57	$20,591,387.43	$0.00	$17,062,842.61
43283	FirstCarolinaCare Insurance Company	NC	$-	$0.00	$-	$-	($433,074.57)
54332	UnitedHealth Group, Inc.	NC	$-	$829,158.40	$-	$-	($12,037,981.33)
58658	UnitedHealth Group, Inc.	NC	$-	$0.00	$-	$-	$438,483.42
61644	Aetna, Inc.	NC	$-	$0.00	$-	$-	$1,439,519.22
61671	Aetna, Inc.	NC	$-	$0.00	$-	$-	($40,666.89)
69347	UnitedHealth Group, Inc.	NC	$-	$0.00	$-	$-	($6,402,728.61)
72487	UnitedHealth Group, Inc.	NC	$-	$0.00	$-	$-	($26,393.62)
73943	Cigna	NC	$0.00	$-	($20,591,387.48)	$-	$-
37160	Blue Cross Blue Shield of North Dakota	ND	$1,263,453.68	$0.00	$2,851,014.21	($80,707.67)	$267,203.98
39364	Medica Insurance Company	ND	$-	$0.00	$-	$-	$799,368.01
73751	Medica Insurance Company	ND	$11,486.57	$0.00	$522,839.25	($21,463.60)	($55,815.83)
89364	Sanford Health Plan	ND	$0.00	$0.00	($3,373,853.47)	$102,171.27	($1,010,756.17)
20305	Medica Insurance Company	NE	$4,852,870.66	$-	$0.00	$0.00	$-
29678	Blue Cross and Blue Shield of Nebraska	NE	$-	$858,927.20	$-	$-	($3,226,100.90)
44751	UnitedHealth Group, Inc.	NE	$-	$0.00	$-	$-	$116,037.13
44794	Aetna, Inc.	NE	$-	$0.00	$-	$-	($83,103.64)
59699	Aetna, Inc.	NE	$-	$0.00	$-	$-	$258,836.04
73102	UnitedHealth Group, Inc.	NE	$-	$13,705.18	$-	$-	$2,934,331.44
51889	UnitedHealth Group, Inc.	NH	$-	$0.00	$-	$-	($900,627.37)
57601	Anthem, Inc.	NH	$-	$0.00	$-	$-	$291,430.77
59025	HPHC Insurance Company, Inc	NH	$0.00	$326,081.18	$21,829,761.45	$-	($1,247,814.96)
71616	HPHC Insurance Company, Inc	NH	$-	$0.00	$-	$-	$4,286,970.65
75841	Centene Corporation	NH	$0.00	$-	$15,981,929.25	$-	$-
86365	Tufts Associated Health Maintenance Organization Inc.	NH	$-	$0.00	$-	$-	($5,688,716.74)
96751	Anthem, Inc.	NH	$248,503.66	$853,464.73	($37,811,690.72)	$0.00	$3,258,757.67
13953	Horizon Blue Cross Blue Shield of New Jersey	NJ	$-	$0.00	$-	$-	$639,252.23
23458	Cigna	NJ	$-	$0.00	$-	$-	$246,920.35
23818	Oscar Health	NJ	$0.00	$0.00	($12,464,783.91)	($1,257,453.81)	($589,030.10)
41014	Cigna	NJ	$133,303.00	$0.00	$4,546,819.35	$-	($4,392.03)
48834	UnitedHealth Group, Inc.	NJ	$-	$0.00	$-	$-	$23,931.63
77263	UnitedHealth Group, Inc.	NJ	$0.00	$545,864.13	$25,373,426.55	$-	$3,357,783.37
77606	Independence Blue Cross	NJ	$41,846.45	$115,333.58	($5,659,848.57)	$-	($8,352,634.74)
82884	Aetna, Inc.	NJ	$-	$0.00	$-	$-	($688,016.88)
89217	Aetna, Inc.	NJ	$-	$0.00	$-	$-	$1,204,355.50
91661	Horizon Blue Cross Blue Shield of New Jersey	NJ	$3,183,358.84	$1,825,042.66	$88,470,083.03	$799,884.21	($2,025,116.43)
91762	Independence Blue Cross	NJ	$980,822.98	$563,377.97	($100,265,696.42)	$457,569.61	$6,186,947.05
19722	Molina Healthcare	NM	$351,655.38	$-	($6,773,839.58)	$-	$-

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HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
42776	True Health New Mexico, Inc.	NM	$-	$0.00	$-	$-	($3,779,296.30)
52744	Presbyterian Healthcare Services	NM	$-	$0.00	$-	$-	$2,468,687.49
57173	Presbyterian Healthcare Services	NM	$0.00	$0.00	($904,288.89)	$16,956.39	($5,048,220.08)
72034	CHRISTUS Health	NM	$0.00	$-	($1,866,069.52)	($29,785.53)	$-
75605	Health Care Service Corporation	NM	$194,788.30	$931,624.67	$7,281,914.06	$317.37	$5,562,429.10
90762	UnitedHealth Group, Inc.	NM	$-	$0.00	$-	$-	$887,189.83
93091	New Mexico Health Connections	NM	$274,867.06	$0.00	$2,262,283.93	$12,511.78	($90,790.05)
16698	Universal Health Services, Inc.	NV	$-	$0.00	$-	$-	$75,897.60
19298	Aetna, Inc.	NV	$-	$0.00	$-	$-	$16,000.02
20895	Humana, Inc.	NV	$-	$0.00	$-	$-	($10,810.69)
27990	Aetna, Inc.	NV	$-	$329,252.04	$-	$-	$399,435.39
33670	Anthem, Inc.	NV	$0.00	$4,272,673.17	$-	$669,932.01	$4,411,822.33
41094	Hometown Health Plan, Inc.	NV	$0.00	$0.00	($2,139,297.98)	($53,877.48)	($972,202.42)
42313	WMI Mutual Insurance Company	NV	$-	$0.00	$-	$-	($31,659.03)
45142	Centene Corporation	NV	$132,432.88	$-	$4,230,613.42	$-	$-
60156	Anthem, Inc.	NV	$0.00	$0.00	$-	($171,935.19)	$222,963.26
68524	Universal Health Services, Inc.	NV	$-	$0.00	$-	$-	($126,074.19)
74222	UnitedHealth Group, Inc.	NV	$-	$0.00	$-	$-	$431,277.67
83198	UnitedHealth Group, Inc.	NV	$54,432.90	$1,054,230.20	$10,259,411.98	($243,827.61)	$1,198,631.09
85266	Hometown Health Plan, Inc.	NV	$0.00	$0.00	$2,049,643.64	($135,190.06)	($2,068,164.03)
93696	Humana, Inc.	NV	$-	$0.00	$-	$-	($52,975.09)
95865	UnitedHealth Group, Inc.	NV	$653,436.55	$938,386.96	($14,400,371.12)	($65,101.69)	($3,494,141.98)
11177	Metro Plus Health Plan	NY	$0.00	$0.00	($11,809,658.01)	($3,719.40)	($3,851,357.07)
17210	Aetna, Inc.	NY	$0.00	$857,912.31	($55,662.94)	$-	($9,821,211.60)
18029	Independent Health	NY	$0.00	$78,835.70	$8,786,743.48	($8,736.39)	$4,115,450.69
25303	New York State Catholic Health Plan, Inc.	NY	$671,195.86	$-	($80,481,834.97)	$713,113.34	$-
36346	HealthNow New York, Inc.	NY	$0.00	$40,518.46	$2,619,052.34	$-	($3,184,196.48)
43477	Crystal Run Health Plans	NY	$-	$0.00	$-	$-	($3,177,418.69)
44113	Anthem, Inc.	NY	$695,941.48	$1,152,290.38	$64,882,734.62	$488,384.09	($5,714,320.48)
49526	HealthNow New York, Inc.	NY	$460,069.25	$263,919.37	$8,476,463.05	$-	$17,456,253.28
54235	UnitedHealth Group, Inc.	NY	$25,402.38	$-	$17,798,507.13	$55,763.24	$-
54297	UnitedHealth Group, Inc.	NY	$0.00	$0.00	$571,029.83	$-	($293,055.46)
56184	MVP Health Plan, Inc.	NY	$182,781.91	$0.00	$10,284,174.14	$185,141.06	($2,321,891.48)
61405	Healthfirst	NY	$0.00	$0.00	$25,614.63	$-	($14,820,874.83)
73886	Crystal Run Health Plans	NY	$0.00	$0.00	$174,690.61	($3,719.83)	($2,566,891.21)
74289	Oscar Health	NY	$0.00	$1,214.95	($45,555,469.64)	($1,981,657.28)	($29,336,231.80)
78124	Excellus Health Plan, Inc.	NY	$146,650.21	$5,524,423.94	$26,068,206.42	$209,262.74	($31,514,039.17)
80519	Anthem, Inc.	NY	$0.00	$0.00	$437,785.13	$25,253.67	($2,825,520.88)
82483	North Shore-LIJ Health System	NY	$-	$0.00	$-	$-	($14,940,535.65)
85629	UnitedHealth Group, Inc.	NY	$-	$14,488,743.79	$-	$-	$132,045,665.16

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88582	EmblemHealth	NY	$420,145.53	$0.00	($4,673,283.28)	$211,275.05	($35,223,647.37)
89846	MVP Health Plan, Inc.	NY	$-	$517,859.24	$-	$-	$2,946,107.83
91237	Healthfirst	NY	$0.00	$-	($2,898,497.35)	$114,947.49	$-
92551	CDPHP Universal Benefits, Inc.	NY	$-	$62,304.55	$-	$-	$8,771,887.75
94788	CDPHP Universal Benefits, Inc.	NY	$0.00	$0.00	$5,349,404.72	($5,307.76)	($5,744,172.30)
28162	AultCare Insurance Company	OH	$248,787.08	$0.00	$3,907,368.13	($61,446.45)	($1,454,223.77)
29276	Anthem, Inc.	OH	$165,382.34	$1,095,485.44	$231,022.64	$-	$12,900,070.02
33232	UnitedHealth Group, Inc.	OH	$-	$0.00	$-	$-	($1,040,419.00)
33931	UnitedHealth Group, Inc.	OH	$-	$0.00	$-	$-	($491.07)
41047	Centene Corporation	OH	$0.00	$-	($3,756,152.59)	$-	$-
45845	Oscar Health	OH	$0.00	$-	$19,440,763.53	$103,786.13	$-
52664	Summa Insurance Company	OH	$694,464.47	$150,619.90	$2,026,634.72	($9,288.23)	($304,820.71)
56726	UnitedHealth Group, Inc.	OH	$-	$0.00	$-	$-	$352,489.35
61724	UnitedHealth Group, Inc.	OH	$-	$132,477.93	$-	$-	($10,482,677.83)
64353	Molina Healthcare	OH	$0.00	$-	$1,731,685.12	$-	$-
66083	Humana, Inc.	OH	$-	$63,815.52	$-	$-	($4,203,609.22)
67129	Aetna, Inc.	OH	$-	$0.00	$-	$-	($788,559.01)
74313	Paramount Insurance Company	OH	$0.00	$0.00	($2,959,853.64)	$-	($661,961.10)
77552	CareSource	OH	$2,952,303.38	$-	$20,457,915.59	$-	$-
80627	Medical Mutual of Ohio	OH	$-	$671,632.18	$-	$-	$6,096,462.44
83396	The Health Plan of the Upper Ohio Valley	OH	$0.00	$0.00	($337,530.52)	$-	($371,942.60)
84867	Aetna, Inc.	OH	$-	$0.00	$-	$-	($178,955.27)
97596	Humana, Inc.	OH	$-	$0.00	$-	$-	$143,109.66
98810	The Health Plan of the Upper Ohio Valley	OH	$-	$0.00	$-	$-	($3,810.87)
99969	Medical Mutual of Ohio	OH	$835,375.00	$0.00	($40,741,853.04)	($33,051.46)	($661.13)
45480	UnitedHealth Group, Inc.	OK	$-	$0.00	$-	$-	($650,887.48)
66946	Aetna, Inc.	OK	$-	$0.00	$-	$-	$630,528.36
76275	Aetna, Inc.	OK	$-	$0.00	$-	$-	($32,404.33)
85757	UnitedHealth Group, Inc.	OK	$-	$0.00	$-	$-	($2,208,570.70)
87571	Health Care Service Corporation	OK	$551,790.65	$2,859,318.74	($1,158,988.37)	$253,036.50	$8,197,993.56
87698	CommunityCare	OK	$-	$0.00	$-	$-	$246,602.02
98905	CommunityCare	OK	$0.00	$0.00	$1,158,988.37	($253,036.50)	($6,183,261.46)
10091	PacificSource Health Plans	OR	$0.00	$56,701.96	$1,318,216.28	$119,312.71	($1,968,392.50)
10940	Centene Corporation	OR	$0.00	$30,378.94	$1,448,014.38	$-	$3,135,992.86
33375	Samaritan Health Plans	OR	$-	$0.00	$-	$-	($24,009.77)
39424	Moda Health Plan, Inc.	OR	$1,714,604.86	$0.00	$34,951,680.86	$-	$960,838.09
56707	Providence Health & Services	OR	$0.00	$1,022,762.19	$498,299.06	$-	$3,098,932.80
63474	Cambia Health Solutions	OR	$0.00	$-	$2,790,592.04	$-	$-
71287	Kaiser Permanente	OR	$0.00	$82,499.40	($39,312,256.02)	($119,312.71)	($4,315,928.24)
77969	Cambia Health Solutions	OR	$0.00	$1,415,386.60	($1,694,546.61)	$-	$234,440.60

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90175	UnitedHealth Group, Inc.	OR	$-	$0.00	$-	$-	($1,121,873.62)
16322	UPMC Health Plan	PA	$4,230,123.44	$394,812.75	($42,257,158.78)	($234,769.70)	$7,071,176.72
18939	Aetna, Inc.	PA	$-	$310,616.39	$-	$-	$733,546.51
22444	Geisinger Health System	PA	$384,488.74	$0.00	($34,028,135.82)	$378,002.60	($860,275.55)
23489	UnitedHealth Group, Inc.	PA	$-	$1,418,328.85	$-	$-	($10,425,381.90)
31609	Independence Blue Cross	PA	$1,115,413.48	$220,731.54	$69,336,559.46	($71,546.50)	$12,569,176.11
33709	Highmark	PA	$0.00	$1,934,781.32	$1,815,873.28	($69,515.64)	$2,786,959.62
33871	Independence Blue Cross	PA	$449,267.62	$1,673,656.87	($55,241,067.85)	$-	($18,786,717.09)
33906	Aetna, Inc.	PA	$-	$0.00	$-	$-	($144,915.20)
36247	Highmark	PA	$0.00	$-	$-	$114,006.43	$-
38949	Highmark	PA	$12,123.47	$-	$6,792,794.49	$-	$-
45127	Capital Blue Cross	PA	$254,266.41	$381,154.84	$54,650,568.61	$-	$5,325,755.03
53789	Capital Blue Cross	PA	$0.00	$0.00	($3,438,934.21)	($88,303.03)	($541,934.02)
55957	Highmark	PA	$0.00	$480,603.40	$425,782.43	$-	$4,624,619.74
62560	UPMC Health Plan	PA	$0.00	$0.00	($6,317.68)	$-	$5,111.22
64844	Aetna, Inc.	PA	$-	$0.00	$-	$-	($314,285.45)
70194	Highmark	PA	$0.00	$0.00	$3,368,920.05	$16,738.60	$191,350.00
75729	Geisinger Health System	PA	$0.00	$492,836.19	$192,036.81	$-	($3,883,200.50)
79279	Highmark	PA	$-	$0.00	$-	$-	$1,903,032.94
79962	Highmark	PA	$-	$0.00	$-	$-	($19,336.60)
82795	Capital Blue Cross	PA	$0.00	$0.00	$128,095.67	$-	($234,681.64)
83731	Highmark	PA	$0.00	$-	($1,739,016.47)	($44,612.77)	$-
15287	Blue Cross Blue Shield of Rhode Island	RI	$289,785.38	$1,056,454.62	$9,430,166.34	$-	$3,591,069.90
26322	Tufts Associated Health Maintenance Organization Inc.	RI	$-	$0.00	$-	$-	($1,351,775.43)
77514	Neighborhood Health Plan of Rhode Island	RI	$0.00	$0.00	($9,430,166.35)	$-	($780,268.97)
79881	UnitedHealth Group, Inc.	RI	$-	$0.00	$-	$-	$1,548.02
90010	Tufts Associated Health Maintenance Organization Inc.	RI	$-	$0.00	$-	$-	($1,004,532.31)
90117	UnitedHealth Group, Inc.	RI	$-	$0.00	$-	$-	($456,041.11)
22369	Aetna, Inc.	SC	$-	$0.00	$-	$-	$119,628.51
26065	BlueChoice HealthPlan of South Carolina, Inc.	SC	$1,725,278.75	$0.00	$8,866,099.87	$383,316.89	$3,744,553.27
38408	Aetna, Inc.	SC	$-	$0.00	$-	$-	($336,490.07)
49532	BlueChoice HealthPlan of South Carolina, Inc.	SC	$0.00	$372,502.66	($8,866,099.84)	($383,316.85)	($2,353,796.43)
57860	UnitedHealth Group, Inc.	SC	$-	$0.00	$-	$-	($143,529.51)
64146	UnitedHealth Group, Inc.	SC	$-	$317,232.63	$-	$-	($1,030,365.90)
31195	Sanford Health Plan	SD	$0.00	$0.00	($7,461,533.88)	($95,138.05)	($403,695.00)
50305	Wellmark, Inc.	SD	$-	$333,240.13	$-	$-	$2,386,070.74
60536	Avera Health Plans, Inc.	SD	$25,435.31	$0.00	$7,461,533.85	$95,138.05	($1,528,211.85)
62210	DAKOTACARE	SD	$-	$0.00	$-	$-	($625,396.21)

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HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
96594	Medica Insurance Company	SD	$-	$0.00	$-	$-	$171,232.26
10958	UnitedHealth Group, Inc.	TN	$-	$0.00	$-	$-	($3,587,647.91)
14002	BlueCross BlueShield of Tennessee	TN	$386,423.49	$1,112,269.75	$26,955,841.61	$-	$1,653,288.73
23552	Oscar Health	TN	$128,540.68	$-	($31,691,661.23)	$0.00	$-
31552	Aetna, Inc.	TN	$-	$0.00	$-	$-	$69,013.33
69443	UnitedHealth Group, Inc.	TN	$-	$0.00	$-	$-	$1,986,498.22
82120	Humana, Inc.	TN	$-	$369,374.50	$-	$-	($121,152.25)
99248	Cigna	TN	$0.00	$-	$4,735,819.61	$-	$-
20069	Oscar Health	TX	$245,309.69	$-	($95,596,353.84)	($2,510,025.16)	$-
26539	FirstCare Health Plans	TX	$250,280.80	$0.00	$16,224,229.11	$-	($958,404.05)
27248	Community Health Choice, Inc.	TX	$164,306.67	$-	$15,816,411.74	$-	$-
29418	Centene Corporation	TX	$1,109,266.46	$-	($92,703,905.49)	$-	$-
30609	Memorial Hermann Health Plan	TX	$-	$0.00	$-	$-	$68,101.63
32673	Humana, Inc.	TX	$-	$659,240.38	$-	$-	$4,085,927.83
33602	Health Care Service Corporation	TX	$6,168,542.59	$19,001,011.72	$435,834,956.41	$2,236,795.14	$14,312,148.36
37392	Universal Health Services, Inc.	TX	$-	$0.00	$-	$-	$6,606.34
37755	Scott & White Health Plan	TX	$0.00	$0.00	$3,158,031.04	$-	($59,639.22)
40220	UnitedHealth Group, Inc.	TX	$-	$0.00	$-	$-	($4,712,317.54)
40788	Scott & White Health Plan	TX	$0.00	$222,499.19	$11,012,864.95	$-	($5,352,063.99)
41541	Memorial Hermann Health Plan	TX	$-	$0.00	$-	$-	($4,397,930.39)
41549	FirstCare Health Plans	TX	$-	$0.00	$-	$-	$210,011.64
45786	Molina Healthcare	TX	$67.44	$-	($264,718,027.94)	$-	$-
46224	Community First Health Plans, Inc.	TX	$0.00	$-	$49,819.86	$-	$-
58840	Aetna, Inc.	TX	$-	$0.00	$-	$-	($89,513.07)
63141	Humana, Inc.	TX	$-	$0.00	$-	$-	$1,889,041.23
66252	CHRISTUS Health	TX	$145,837.72	$-	($1,057,424.57)	$273,230.06	$-
71837	Sendero Health Plans, Inc.	TX	$0.00	$-	($20,621,558.84)	$-	$-
75394	Aetna, Inc.	TX	$-	$0.00	$-	$-	($14,927.01)
81795	Arkansas Blue Cross and Blue Shield	TX	$-	$0.00	$-	$-	($411,652.41)
84479	Vista Health Plan, Inc.	TX	$0.00	$0.00	($7,399,042.39)	$-	($613,682.59)
91716	Aetna, Inc.	TX	$-	$0.00	$-	$-	$2,613,076.23
98809	UnitedHealth Group, Inc.	TX	$-	$960,539.12	$-	$-	($6,574,783.21)
22013	Cambia Health Solutions	UT	$0.00	$27,334.69	$14,544,715.09	$-	$3,909,241.48
29031	National Health Insurance Company	UT	$-	$0.00	$-	$-	$310,578.40
34541	Cambia Health Solutions	UT	$0.00	$-	$46,352.18	$-	$-
38927	Aetna, Inc.	UT	$-	$0.00	$-	$-	$540,988.46
42261	University of Utah Health Insurance Plans	UT	$0.00	$-	$33,373,024.41	$-	$-
46958	Humana, Inc.	UT	$-	$0.00	$-	$-	$259,046.42
48588	Aetna, Inc.	UT	$-	$0.00	$-	$-	$32,072.51
66413	UnitedHealth Group, Inc.	UT	$-	$0.00	$-	$-	($145,260.78)

		HIGH-COST RISK POOL PAYMENT AMOUNT			RISK ADJUSTMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
68781	SelectHealth	UT	$694,091.45	$382,923.60	($47,964,091.71)	$0.00	($4,945,384.47)
80043	WMI Mutual Insurance Company	UT	$-	$0.00	$-	$-	$105,237.61
97462	UnitedHealth Group, Inc.	UT	$-	$9,494.51	$-	$-	($66,519.59)
10207	CareFirst	VA	$0.00	$0.00	$19,136,780.85	$244,161.59	($10,247,905.68)
12028	Aetna, Inc.	VA	$-	$0.00	$-	$-	$772,242.77
15668	Piedmont Community Health Plan	VA	$-	$0.00	$-	$-	($29,834.22)
16064	Anthem, Inc.	VA	$-	$4,057,517.38	$-	$-	$34,692,673.65
20507	Optima Health	VA	$1,752,594.56	$421,374.57	$91,862,379.48	$-	$1,608,428.89
24251	UnitedHealth Group, Inc.	VA	$-	$0.00	$-	$-	($3,486,542.45)
25978	UnitedHealth Group, Inc.	VA	$-	$620,241.53	$-	$-	($20,749,680.38)
37204	Piedmont Community Health Plan	VA	$1,092,428.17	$0.00	$8,717,225.07	$51,747.25	($262,186.93)
38234	Aetna, Inc.	VA	$-	$0.00	$-	$-	($759,247.74)
38599	UnitedHealth Group, Inc.	VA	$-	$0.00	$-	$-	($1,615,867.33)
40308	CareFirst	VA	$93,404.71	$0.00	$35,707,401.65	$-	$7,781,463.42
41921	Cigna	VA	$239,493.60	$-	($63,207,393.74)	$-	$-
86443	Aetna, Inc.	VA	$-	$0.00	$-	$-	($1,481,565.58)
88380	Anthem, Inc.	VA	$0.00	$840,037.63	$20,032,856.47	$511,061.29	$998,967.68
89242	Optima Health	VA	$-	$0.00	$-	$-	$1,522,053.38
89498	UnitedHealth Group, Inc.	VA	$-	$0.00	$-	$-	($108,151.74)
93187	Aetna, Inc.	VA	$-	$0.00	$-	$-	$1,054,527.80
95185	Kaiser Permanente	VA	$2,788,459.30	$0.00	($112,249,249.72)	($806,970.12)	($9,689,375.41)
18699	UnitedHealth Group, Inc.	WA	$-	$719,642.44	$-	$-	($1,341,884.18)
23371	Kaiser Permanente	WA	$0.00	$0.00	($12,893,384.72)	($1,247.56)	($3,657,269.59)
25768	Kaiser Permanente	WA	$-	$37,789.42	$-	$-	($4,992,680.95)
34673	Aetna, Inc.	WA	$-	$0.00	$-	$-	($366,590.04)
36026	Centene Corporation	WA	$-	$0.00	$-	$-	($288,951.99)
38229	Health Alliance Medical Plans, Inc.	WA	$0.00	$0.00	$10,790.77	$-	($5,724.50)
38498	Premera Blue Cross	WA	$1,913.44	$-	$2,919,205.50	$-	$-
43861	UnitedHealth Group, Inc.	WA	$-	$0.00	$-	$-	$118,146.09
49831	Premera Blue Cross	WA	$1,945,192.72	$152,739.64	$75,344,637.89	$-	$3,093,511.71
53732	Cambia Health Solutions	WA	$0.00	$-	($580,074.07)	$-	$-
61836	Centene Corporation	WA	$0.00	$-	($24,040,639.81)	$-	$-
69364	Cambia Health Solutions	WA	$0.00	$0.00	$1,248,238.49	$-	$317,350.23
71281	Cambia Health Solutions	WA	$0.00	$0.00	$2,267,268.38	$-	$748,518.52
80473	Kaiser Permanente	WA	$2,650,295.34	$233,042.79	($85,447,682.75)	$1,247.57	($10,095,568.45)
84481	Molina Healthcare	WA	$162,810.82	$-	$39,807,835.01	$-	$-
87718	Cambia Health Solutions	WA	$665,025.40	$598,606.16	$1,363,805.27	$-	$16,471,143.18
14630	Children's Community Health Plan	WI	$372,637.21	$-	$7,703,597.85	$661,681.63	$-
16245	Group Health Cooperative of Eau Claire	WI	$-	$0.00	$-	$-	($1,197,243.63)
20173	HealthPartners Insurance Company	WI	$0.00	$0.00	($4,410,833.55)	($72,840.76)	($296,289.44)

		HIGH-COST RISK POOL PAYMENT AMOUNT			RISK ADJUSTMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**INDIVIDUAL (Catastrophic and Non-Catastrophic)**	**SMALL GROUP**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
35334	MercyCare Insurance Company	WI	$-	$0.00	$-	$-	($94,528.34)
37833	Quartz Health Solutions	WI	$188,465.71	$0.00	$12,000,211.10	$13,923.63	($5,228,627.37)
38166	Security Health Plan of Wisconsin, Inc.	WI	$0.00	$0.00	($31,170,759.91)	$97,161.77	($1,693,415.95)
38345	Dean Health Plan, Inc.	WI	$579,793.67	$0.00	($28,547,005.13)	($458,253.69)	($6,340,531.14)
38752	Aetna, Inc.	WI	$-	$0.00	$-	$-	$29,874.86
39924	UnitedHealth Group, Inc.	WI	$-	$0.00	$-	$-	($37,453.53)
47342	Health Tradition Health Plan	WI	$-	$0.00	$-	$-	$118,368.70
55103	Humana, Inc.	WI	$-	$116,465.90	$-	$-	$176,517.41
57637	Medica Insurance Company	WI	$-	$0.00	$-	$-	($627,133.75)
57845	Medica Insurance Company	WI	$0.00	$-	$11,439,533.73	($66,453.75)	$-
58326	MercyCare Insurance Company	WI	$0.00	$0.00	($3,296,667.65)	$-	($1,390,378.13)
58564	Quartz Health Solutions	WI	$0.00	$0.00	$191,934.46	($6,989.33)	($171,174.60)
59158	UnitedHealth Group, Inc.	WI	$-	$206,392.13	$-	$-	$9,573,193.77
64772	Medical Associates Health Plans	WI	$-	$0.00	$-	$-	($196,183.50)
79475	Anthem, Inc.	WI	$0.00	$0.00	$-	$-	$4,268,933.62
80180	UnitedHealth Group, Inc.	WI	$-	$0.00	$-	$-	$918,309.84
81413	Network Health Plan	WI	$212,215.03	$0.00	$11,763,015.01	$-	$43,554.05
81974	Wisconsin Physicians Svc Insurance Corp	WI	$0.00	$0.00	$1,676,092.67	$28,699.56	$2,200,429.94
84670	Wisconsin Physicians Svc Insurance Corp	WI	$0.00	$0.00	$309,968.30	($6,783.62)	($1,295,742.85)
86584	Wisconsin Physicians Svc Insurance Corp	WI	$457,909.63	$0.00	($6,370,443.82)	($35,895.13)	($1,408,415.86)
87416	Common Ground Healthcare Cooperative	WI	$1,650,877.55	$0.00	$27,451,771.84	($144,217.99)	($318,351.73)
90028	Anthem, Inc.	WI	$-	$0.00	$-	$-	($511,319.10)
91058	Quartz Health Solutions	WI	$-	$0.00	$-	$-	($1,022,508.49)
91604	Humana, Inc.	WI	$-	$911,728.90	$-	$-	$4,559,528.75
94529	Group Health Cooperative of South Central Wisconsin	WI	$0.00	$0.00	$1,259,585.14	($10,032.30)	($59,413.35)
31274	Highmark	WV	$105,056.27	$0.00	$9,997,096.13	$0.00	$3,099,105.05
44434	Aetna, Inc.	WV	$-	$0.00	$-	$-	($5,767.62)
50318	Aetna, Inc.	WV	$-	$0.00	$-	$-	$43,735.44
50328	CareSource	WV	$0.00	$-	($9,966,234.51)	$-	$-
59772	The Health Plan of the Upper Ohio Valley	WV	$-	$0.00	$-	$-	($718,990.72)
72982	The Health Plan of the Upper Ohio Valley	WV	$0.00	$0.00	($30,861.62)	$-	($261,919.75)
77060	UnitedHealth Group, Inc.	WV	$-	$0.00	$-	$-	($1,908,349.20)
95628	UnitedHealth Group, Inc.	WV	$-	$0.00	$-	$-	($247,813.25)
11269	Blue Cross Blue Shield of Wyoming	WY	$177,831.59	$759,088.07	$0.00	$-	$468,478.40
49714	UnitedHealth Group, Inc.	WY	$-	$725,347.34	$-	$-	($468,478.46)

Table 5: Issuer-specific Information for Merged Market Issuers *(Appendix D)*

			HIGH-COST RISK POOL PAYMENT AMOUNT	RISK ADJUSTMENT TRANSFER AMOUNT BY RISK POOL	
HIOS ID	**HIOS COMPANY NAME**	**STATE**	**MERGED MARKET (Individual Catastrophic and Non-Catastrophic AND Small Group)**	**CATASTROPHIC**	**MERGED MARKET (Individual Non-Catastrophic AND Small Group)**
24675	Blue Cross Blue Shield of Massachusetts, Inc.	MA	$0.00	$-	($608,610.56)
29125	Tufts Associated Health Maintenance Organization Inc.	MA	$64,763.80	$-	$3,757,900.50
31779	UnitedHealth Group, Inc.	MA	$0.00	$-	($4,273,421.24)
34484	Health New England, Inc.	MA	$0.00	$-	($3,348,914.37)
36046	HPHC Insurance Company, Inc	MA	$1,210,612.58	$-	$33,294,264.37
38712	Tufts Associated Health Maintenance Organization Inc.	MA	$0.00	$-	$1,429,193.76
41304	Neighborhood Health Plan, Inc.	MA	$40,312.31	$-	$55,007,377.70
42690	Blue Cross Blue Shield of Massachusetts, Inc.	MA	$2,888,267.85	($79,024.55)	$13,109,218.91
52710	Fallon Health & Life Assurance Company	MA	$0.00	$-	$228,150.53
59763	Tufts Health Public Plans, Inc.	MA	$0.00	$23,092.21	($62,005,321.99)
82569	Boston Medical Center Health Plan, Inc.	MA	$544,164.28	$-	($37,948,809.17)
88806	Fallon Health & Life Assurance Company	MA	$371,977.25	$55,932.33	$1,008,688.32
88950	ConnectiCare, Inc.	MA	$0.00	$-	$527,549.58
95878	HPHC Insurance Company, Inc	MA	$0.00	$-	($177,266.18)
13627	Blue Cross Blue Shield of Vermont	VT	$0.00	$2,439.68	$15,926,267.33
77566	MVP Health Plan, Inc.	VT	$0.00	($2,439.68)	($15,926,267.34)

VII. Default Risk Adjustment Charge

HHS assesses 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.[13]

The total default risk adjustment charge for a risk adjustment covered plan equals a PMPM amount multiplied by the plan's enrollment—either as provided by the issuer or 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

[13] 45 C.F.R. § 153.740(b).

states where HHS is operating the risk adjustment program, which was all states and the District of Columbia for the 2018 benefit year, 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 a state market risk pool with at least one noncompliant issuer will receive a portion of the default risk adjustment charges collected from the noncompliant issuer(s).[14] We allocate default risk adjustment charges collected from noncompliant plans in the state market risk pool among the compliant plans in the state market risk pool proportional to each compliant plan's relative revenue requirement as calculated under the state transfer formula relative to the market average of these products.[15] Below we set forth information on the 2018 benefit year default risk adjustment charges.

Table 6: 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	1
Number of Issuers with 500 Billable Member Months or Fewer Statewide Electing to Receive a Default Risk Adjustment Charge	19
Percent of All Issuers of Risk Adjustment Covered Plans that Received a Default Risk Adjustment Charge	3.5 percent

[14] 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.

[15] 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 2019, so that issuers can receive the full amount (pending collections).

Table 7: Default Risk Adjustment Charge by Risk Pool

RISK POOL	NATIONAL PERCENT OF PREMIUM
Individual – Non Catastrophic	44 percent
Catastrophic	42 percent
Small Group	29 percent
Merged	39 percent
Issuers with 500 or Fewer Billable Member Months Statewide	14 percent

Table 8: Default Risk Adjustment Charge *(Appendix E)*

HIOS ID	STATE	RISK POOL	HIOS ISSUER NAME RECEIVING DEFAULT RISK ADJUSTMENT CHARGE	DEFAULT RISK ADJUSTMENT CHARGE AMOUNT
93122	AL	Individual Non Catastrophic	US Health Group	($975.32)
61273	AR	Individual Non Catastrophic	US Health Group	($13.49)
75849	AZ	Individual Non Catastrophic	US Health Group	($4,641.74)
28700	CO	Individual Non Catastrophic	US Health Group	($7,631.58)
40442	FL	Individual Non Catastrophic	US Health Group	($9,768.90)
72796	GA	Individual Non Catastrophic	US Health Group	($29.84)
12659	IL	Small Group	Wisconsin Physicians Svc Insurance Corp	($3,081.84)
35296	IL	Small Group	National Health Insurance Company	($1,916.88)
82506	IL	Individual Non Catastrophic	US Health Group	($2,490.91)
35755	IN	Small Group	US Health and Life Insurance Company	($10,440.61)
19913	LA	Individual Non Catastrophic	US Health Group	($1,940.66)
58996	MI	Small Group	US Health and Life Insurance Company	($1,191.53)
72064	MO	Individual Non Catastrophic	US Health Group	($313.10)
96734	MS	Individual Non Catastrophic	US Health Group	($940.61)
83744	NY	Small Group	Healthfirst	($21,003.82)
26734	OH	Individual Non Catastrophic	Premier Health Plan, Inc.	($10,744.76)
82209	OK	Individual Non Catastrophic	US Health Group	($1,001.04)
85408	OK	Small Group	GlobalHealth, Inc.	($3,322.68)
53799	TX	Individual Non Catastrophic	US Health Group	($2,780.56)
79395	UT	Small Group	HSA Health Insurance Company	($329,094.07)

Table 9: Default Risk Adjustment Charge Allocation *(Appendix F)*

Issuer names for each HIOS ID are available in Appendix F.

HIOS ID	STATE	RISK POOL	HIOS ISSUER NAME RECEIVING DEFAULT RISK CHARGE ALLOCATION	DEFAULT RISK ADJUSTMENT CHARGE ALLOCATION AMOUNT
46944	AL	Individual, Non-Catastrophic	Blue Cross Blue Shield of Alabama	$972.31
73301	AL	Individual, Non-Catastrophic	Bright Health Insurance Company	$3.01
37903	AR	Individual, Non-Catastrophic	QualChoice Arkansas	$0.73
62141	AR	Individual, Non-Catastrophic	Centene Corporation	$3.70
70525	AR	Individual, Non-Catastrophic	QualChoice Arkansas	$0.75
75293	AR	Individual, Non-Catastrophic	Arkansas Blue Cross and Blue Shield	$8.31
53901	AZ	Individual, Non-Catastrophic	Blue Cross Blue Shield of Arizona, Inc.	$1,368.56
91450	AZ	Individual, Non-Catastrophic	Centene Corporation	$3,219.21
97667	AZ	Individual, Non-Catastrophic	Cigna	$53.97
21032	CO	Individual, Non-Catastrophic	Kaiser Permanente	$2,731.68
31070	CO	Individual, Non-Catastrophic	Bright Health Insurance Company	$556.46
49375	CO	Individual, Non-Catastrophic	Cigna	$1,101.52
63312	CO	Individual, Non-Catastrophic	Colorado Choice Health Plans	$270.23
66699	CO	Individual, Non-Catastrophic	Denver Health Medical Plan, Inc.	$138.79
76680	CO	Individual, Non-Catastrophic	Anthem, Inc.	$2,691.79
97879	CO	Individual, Non-Catastrophic	Rocky Mountain Health Care Options	$141.11
16842	FL	Individual, Non-Catastrophic	Blue Cross and Blue Shield of Florida	$3,616.57
19898	FL	Individual, Non-Catastrophic	AvMed, Inc.	$106.53
21663	FL	Individual, Non-Catastrophic	Centene Corporation	$1,954.80
30252	FL	Individual, Non-Catastrophic	Blue Cross and Blue Shield of Florida	$3,490.34
36194	FL	Individual, Non-Catastrophic	Health First, Inc.	$135.81
48121	FL	Individual, Non-Catastrophic	Cigna	$9.34
54172	FL	Individual, Non-Catastrophic	Molina Healthcare	$216.83
56503	FL	Individual, Non-Catastrophic	Florida Health Care Plan, Inc.	$238.68
49046	GA	Individual, Non-Catastrophic	Anthem, Inc.	$6.91
70893	GA	Individual, Non-Catastrophic	Centene Corporation	$12.81
83761	GA	Individual, Non-Catastrophic	Alliant Health Plans	$4.81
89942	GA	Individual, Non-Catastrophic	Kaiser Permanente	$5.31
20129	IL	Individual, Non-Catastrophic	Health Alliance Medical Plans, Inc.	$250.59
27833	IL	Individual, Non-Catastrophic	Centene Corporation	$133.98
36096	IL	Individual, Non-Catastrophic	Health Care Service Corporation	$2,022.58
53882	IL	Individual, Non-Catastrophic	Cigna	$83.75
20129	IL	Small Group	Health Alliance Medical Plans, Inc.	$58.01

HIOS ID	STATE	RISK POOL	HIOS ISSUER NAME RECEIVING DEFAULT RISK CHARGE ALLOCATION	DEFAULT RISK ADJUSTMENT CHARGE ALLOCATION AMOUNT
24301	IL	Small Group	Medical Associates Health Plans	$4.13
34446	IL	Small Group	UnitedHealth Group, Inc.	$146.52
36096	IL	Small Group	Health Care Service Corporation	$3,996.31
42529	IL	Small Group	UnitedHealth Group, Inc.	$37.72
54322	IL	Small Group	MercyCare Insurance Company	$4.43
58239	IL	Small Group	UnitedHealth Group, Inc.	$32.32
58288	IL	Small Group	Humana, Inc.	$21.68
68303	IL	Small Group	Humana, Inc.	$44.60
72547	IL	Small Group	Aetna, Inc.	$15.51
92476	IL	Small Group	UnitedHealth Group, Inc.	$636.80
99129	IL	Small Group	Aetna, Inc.	$0.69
17575	IN	Small Group	Anthem, Inc.	$4,002.31
32378	IN	Small Group	Aetna, Inc.	$8.57
33380	IN	Small Group	Indiana University Health	$122.23
36373	IN	Small Group	UnitedHealth Group, Inc.	$6.71
43442	IN	Small Group	Humana, Inc.	$183.62
50816	IN	Small Group	Physicians Health Plan of Northern Indiana, Inc.	$915.62
67920	IN	Small Group	Southeastern Indiana Health Organization	$24.94
72850	IN	Small Group	UnitedHealth Group, Inc.	$4,798.49
99791	IN	Small Group	Humana, Inc.	$378.11
19636	LA	Individual, Non-Catastrophic	Blue Cross Blue Shield of Louisiana	$1,420.06
67243	LA	Individual, Non-Catastrophic	Vantage Health Plan, Inc.	$165.43
97176	LA	Individual, Non-Catastrophic	Blue Cross Blue Shield of Louisiana	$355.17
15560	MI	Small Group	Blue Cross Blue Shield of Michigan	$603.56
20662	MI	Small Group	Physicians Health Plan	$4.20
29241	MI	Small Group	Priority Health	$13.35
29698	MI	Small Group	Priority Health	$110.29
37651	MI	Small Group	Health Alliance Plan (HAP)	$30.94
52670	MI	Small Group	UnitedHealth Group, Inc.	$0.01
60829	MI	Small Group	Physicians Health Plan	$12.45
62294	MI	Small Group	Humana, Inc.	$1.36
63631	MI	Small Group	UnitedHealth Group, Inc.	$59.38
67183	MI	Small Group	Total Health Care USA, Inc.	$20.49
67577	MI	Small Group	Health Alliance Plan (HAP)	$38.41
74917	MI	Small Group	McLaren Health Care	$6.42

HIOS ID	STATE	RISK POOL	HIOS ISSUER NAME RECEIVING DEFAULT RISK CHARGE ALLOCATION	DEFAULT RISK ADJUSTMENT CHARGE ALLOCATION AMOUNT
95233	MI	Small Group	Paramount Insurance Company	$2.62
98185	MI	Small Group	Blue Cross Blue Shield of Michigan	$288.05
32753	MO	Individual, Non-Catastrophic	Anthem, Inc.	$80.15
34762	MO	Individual, Non-Catastrophic	Blue Cross and Blue Shield of Kansas City	$0.06
74483	MO	Individual, Non-Catastrophic	Cigna	$118.81
96384	MO	Individual, Non-Catastrophic	Cox HealthPlans	$5.53
99723	MO	Individual, Non-Catastrophic	Centene Corporation	$108.54
11721	MS	Individual, Non-Catastrophic	Blue Cross Blue Shield of Mississippi	$163.80
90714	MS	Individual, Non-Catastrophic	Centene Corporation	$776.81
11177	NY	Small Group	Metro Plus Health Plan	$18.39
17210	NY	Small Group	Aetna, Inc.	$714.13
18029	NY	Small Group	Independent Health	$649.97
36346	NY	Small Group	HealthNow New York, Inc.	$368.50
43477	NY	Small Group	Crystal Run Health Plans	$35.85
44113	NY	Small Group	Anthem, Inc.	$437.44
49526	NY	Small Group	HealthNow New York, Inc.	$912.86
54297	NY	Small Group	UnitedHealth Group, Inc.	$10.13
56184	NY	Small Group	MVP Health Plan, Inc.	$49.49
61405	NY	Small Group	Healthfirst	$113.64
73886	NY	Small Group	Crystal Run Health Plans	$18.81
74289	NY	Small Group	Oscar Health	$130.02
78124	NY	Small Group	Excellus Health Plan, Inc.	$2,791.94
80519	NY	Small Group	Anthem, Inc.	$53.78
82483	NY	Small Group	North Shore-LIJ Health System	$121.25
85629	NY	Small Group	UnitedHealth Group, Inc.	$12,491.30
88582	NY	Small Group	EmblemHealth	$319.27
89846	NY	Small Group	MVP Health Plan, Inc.	$1,241.97
92551	NY	Small Group	CDPHP Universal Benefits, Inc.	$468.18
94788	NY	Small Group	CDPHP Universal Benefits, Inc.	$56.91
28162	OH	Individual, Non-Catastrophic	AultCare Insurance Company	$404.64
29276	OH	Individual, Non-Catastrophic	Anthem, Inc.	$2.50
41047	OH	Individual, Non-Catastrophic	Centene Corporation	$1,113.22
45845	OH	Individual, Non-Catastrophic	Oscar Health	$673.83
52664	OH	Individual, Non-Catastrophic	Summa Insurance Company	$216.26
64353	OH	Individual, Non-Catastrophic	Molina Healthcare	$1,039.40
74313	OH	Individual, Non-Catastrophic	Paramount Insurance Company	$354.31

HIOS ID	STATE	RISK POOL	HIOS ISSUER NAME RECEIVING DEFAULT RISK CHARGE ALLOCATION	DEFAULT RISK ADJUSTMENT CHARGE ALLOCATION AMOUNT
77552	OH	Individual, Non-Catastrophic	CareSource	$3,941.66
83396	OH	Individual, Non-Catastrophic	The Health Plan of the Upper Ohio Valley	$12.82
99969	OH	Individual, Non-Catastrophic	Medical Mutual of Ohio	$2,986.11
87571	OK	Individual, Non-Catastrophic	Health Care Service Corporation	$991.76
98905	OK	Individual, Non-Catastrophic	CommunityCare	$9.28
45480	OK	Small Group	UnitedHealth Group, Inc.	$64.60
66946	OK	Small Group	Aetna, Inc.	$13.54
76275	OK	Small Group	Aetna, Inc.	$0.70
85757	OK	Small Group	UnitedHealth Group, Inc.	$373.70
87571	OK	Small Group	Health Care Service Corporation	$2,370.02
87698	OK	Small Group	CommunityCare	$83.54
98905	OK	Small Group	CommunityCare	$416.58
20069	TX	Individual, Non-Catastrophic	Oscar Health	$170.57
26539	TX	Individual, Non-Catastrophic	FirstCare Health Plans	$59.99
27248	TX	Individual, Non-Catastrophic	Community Health Choice, Inc.	$302.32
29418	TX	Individual, Non-Catastrophic	Centene Corporation	$478.36
33602	TX	Individual, Non-Catastrophic	Health Care Service Corporation	$1,156.49
37755	TX	Individual, Non-Catastrophic	Scott & White Health Plan	$3.47
40788	TX	Individual, Non-Catastrophic	Scott & White Health Plan	$11.28
45786	TX	Individual, Non-Catastrophic	Molina Healthcare	$474.14
46224	TX	Individual, Non-Catastrophic	Community First Health Plans, Inc.	$0.09
66252	TX	Individual, Non-Catastrophic	CHRISTUS Health	$69.57
71837	TX	Individual, Non-Catastrophic	Sendero Health Plans, Inc.	$51.72
84479	TX	Individual, Non-Catastrophic	Vista Health Plan, Inc.	$2.57
22013	UT	Small Group	Cambia Health Solutions	$65,013.86
29031	UT	Small Group	National Health Insurance Company	$2,983.00
38927	UT	Small Group	Aetna, Inc.	$1,544.49
46958	UT	Small Group	Humana, Inc.	$1,787.63
48588	UT	Small Group	Aetna, Inc.	$189.45
66413	UT	Small Group	UnitedHealth Group, Inc.	$1,096.19
68781	UT	Small Group	SelectHealth	$240,844.94
80043	UT	Small Group	WMI Mutual Insurance Company	$274.73
97462	UT	Small Group	UnitedHealth Group, Inc.	$15,359.77