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Centers for Medicare & Medicaid Services
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Washington, DC 20201

SUMMARY REPORT ON PERMANENT RISK ADJUSTMENT TRANSFERS FOR THE 2020 BENEFIT YEAR

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I. Highlights of the Summary Report on Permanent Risk Adjustment Transfers Including High-Cost Risk Pool for the 2020 Benefit Year

The risk adjustment program operated smoothly for the 2020 benefit year. [1]

- 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 576 issuers participated in the risk adjustment program for the 2020 benefit year, of which 569 received a risk adjustment state transfer (excluding the high-cost risk pool), and 8 received a default risk adjustment charge, in at least one risk pool. For the 2019 benefit year, 561 issuers participated in the risk adjustment program.
- Nationwide, the absolute value of risk adjustment state transfers across all state market risk pools (excluding the high-cost risk pool) was about 7.5 percent of total premiums, very similar to the 2019 benefit year transfers, which was 7 percent of total premiums.

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[2], we found that for the 2020 benefit year:

- **Risk adjustment state transfers as a percent of premiums remained relatively steady compared to the 2019 benefit year.** In the 2019 benefit year, the absolute value of risk adjustment state transfers as a percent of premiums averaged 9.7 percent of premiums in the individual non-catastrophic risk pool, and 4.1 percent of premiums in the small group risk pool. In the 2020 benefit year, the absolute value of risk adjustment state transfers increased slightly to 9.9 percent of premiums in the individual non-catastrophic risk pool and reduced slightly to 4.0 percent of premiums in the small group risk pool.[3] Changes within the risk pools, such as shifts in enrollment, market share, and actuarial risk, likely contributed to the slight increase in the absolute value of risk adjustment state transfers as a percent of premium. Compared to 2019, on-Exchange enrollment in 2020 increased slightly in gold, platinum and silver metal level plans and increased significantly in bronze metal level plans in the individual non-catastrophic risk pool. Off-Exchange enrollment slightly decreased in bronze and platinum metal level plans and slightly increased in silver and gold metal level plans in the individual non-catastrophic risk pool. Because Exchange enrollment comprises most of the total enrollment in the individual non-catastrophic risk pool, the shift towards lower premium bronze plans in the Exchange influenced this increase of absolute risk adjustment transfers as a percent of premium.

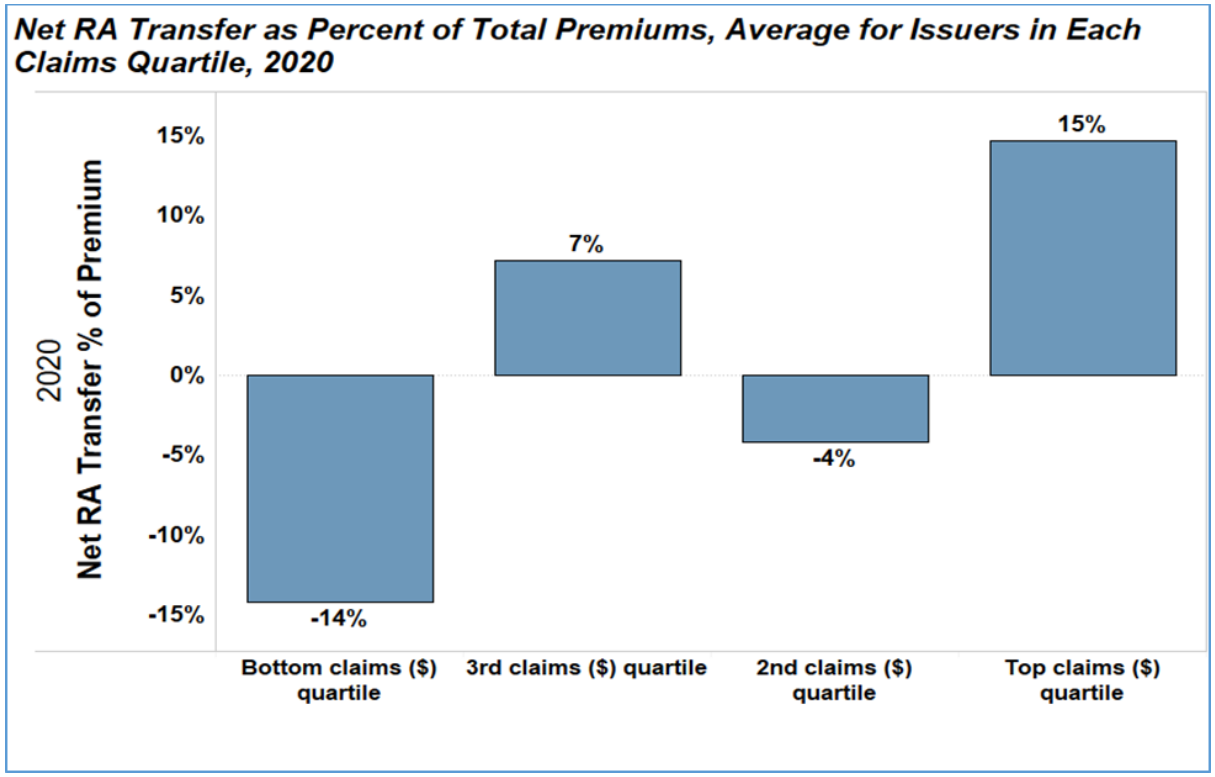
[1] HHS operated the risk adjustment program in all 50 states and the District of Columbia for the 2020 benefit year.

[2] Merged market states are also excluded from the trends analysis in results.

[3] For the 2020 benefit year, statewide average premiums are reduced (i.e., adjusted) by 14 percent in the state payment transfer formula to account for the proportion of administrative costs that do not vary with claims. To facilitate comparison with benefit years before this adjustment applied (i.e., 2014 – 2017), premiums shown or used in calculations of transfer percentages in this report are not reduced by 14 percent. Therefore, premiums throughout this document represent the total (unadjusted) premium amounts, and not amounts reduced by 14 percent for administrative costs, unless indicated otherwise. Additionally, total small group transfers reflect the approved Alabama state flexibility request to reduce their small group transfers by 50% for the 2020 benefit year.

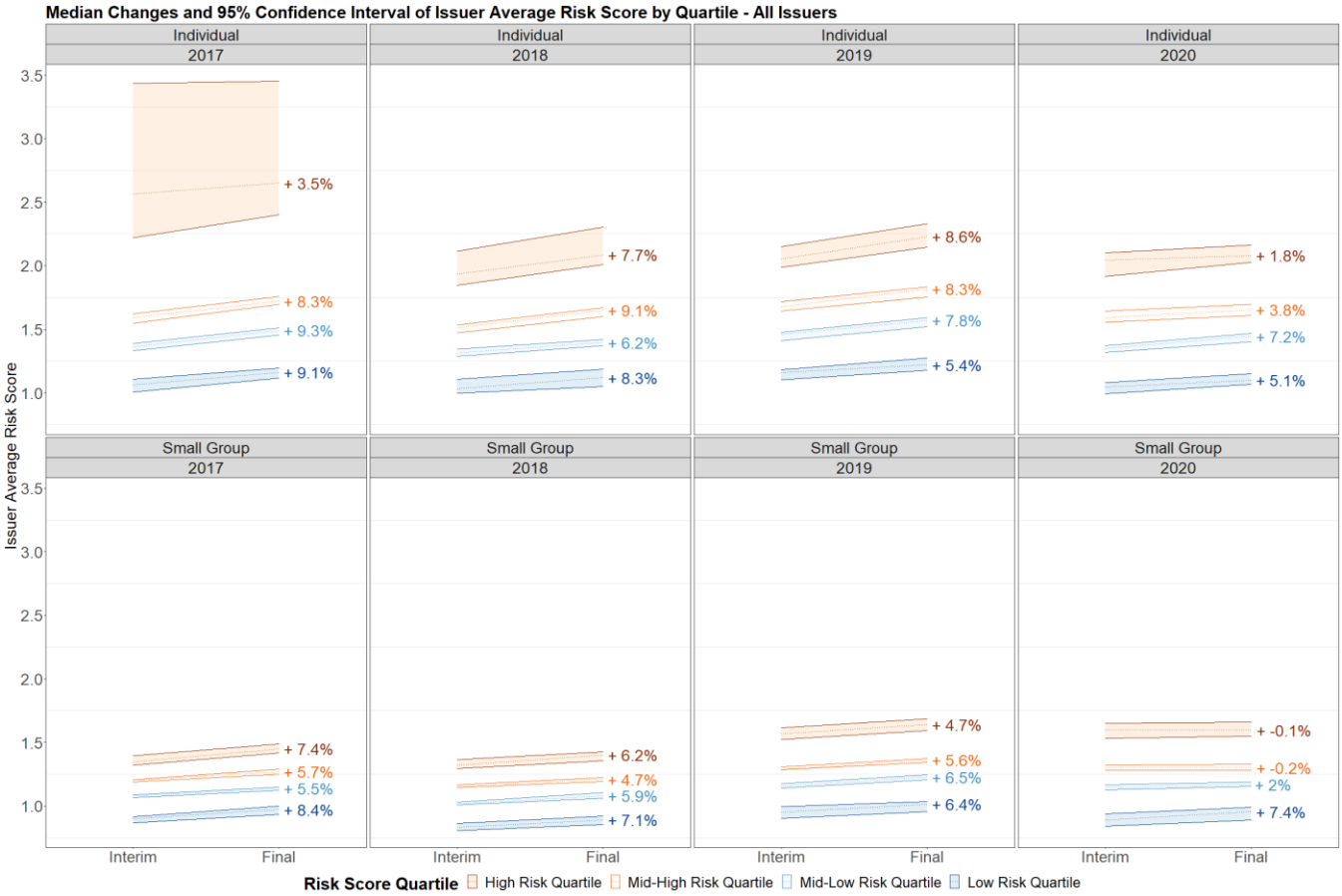
- **The amount of paid claims remains strongly correlated with risk adjustment state payments and charges (Figure 1).** Risk adjustment transfers funds within a state market risk pool from issuers with lower than average actuarial risk to issuers with higher than average actuarial risk. Issuers with paid claims amounts in the top quartile were more likely to receive risk adjustment payments, while issuers with paid claims amounts in the bottom quartile 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 14 percent of total collected premiums, a slight increase from approximately 13 percent in 2019. Conversely, on average, issuers in the highest quartile of claims costs received a risk adjustment payment of approximately 15 percent of their total collected premiums, which represents a slight decrease from 16 percent of total premiums in 2019. These correlations between claims quartiles and average risk adjustment state transfer amounts as a percent of premium provide 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[4] remained stable between the 2019 and 2020 benefit years for the individual non-catastrophic market and small group market (**
- **Figure *2*).** For the 2017, 2018, 2019, and 2020 benefit years, all 50 states plus the District of Columbia received interim results. Predictability between interim and final risk scores is similar for the individual non-catastrophic market in 2020 when compared to 2019. 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.

Figure 2 *(2017-2020 Individual Non-Catastrophic and Small Group Risk Pools)*[5]



- **Risk scores decreased between 2019 and 2020.** In the 2020 benefit year, risk scores decreased nationally by approximately 11.9 percent in the individual non-catastrophic risk pool and decreased by approximately 11.1 percent in the small group risk pool when compared to the 2019 benefit year risk scores. Most metal levels, as well as a majority of states, saw small decreases in the state average risk score in the individual non-catastrophic risk pool from 2019 to 2020.

  Risk score changes year over year are affected by changes in the applicable risk adjustment modeling methodology, plan enrollment (metal or cost-sharing reduction variations), population health, and coding practices. Therefore, risk score changes do not necessarily reflect changes in population health risk over time, independent of other factors.

[4] All report references to risk scores do not account for risk score adjustments after the application of HHS-RADV error rates.
[5] Values for prior years may not match previously published figures due to adjustments made for issuer-reported discrepancies

The changes to the HHS risk adjustment modeling methodology for the 2020 benefit year include updates to data used for recalibration,[6] trend and benefit design assumptions for plan liability simulation, and weights assigned to each metal level for the denominator calculation. We estimate that the risk adjustment model updates between 2019 and 2020 resulted in a decrease in calculated risk scores by approximately 9.7 percent, and that most of this decrease is due to changes in the recalibration data – that is, if the underlying population was the same in both years, we estimate that 2020 benefit year risk scores would be 9.7 percent lower than 2019 benefit year risk scores as a result of the risk adjustment modeling methodology changes.

We reviewed the percent of enrollees with hierarchical condition categories (HCCs) across the 2016[7], 2017, 2018, 2019 and 2020 benefit years in the individual non-catastrophic risk pool to evaluate changes in population health risk over time. The percent of enrollees with one or more HCCs and the percent of enrollees with multiple HCCs decreased slightly in 2020 (**Figure** Figure 3). We do not include prescription drug categories (RXCs) in the count of enrollees with HCCs for 2018, 2019 and 2020.[8] This slight decline in the percent of enrollees with HCCs, and the decline in risk scores that slightly exceeded that predicted by model changes alone, suggest that the pandemic or other factors particular to 2020 may have affected health care utilization behaviors in a way that affected the diagnoses captured in risk adjustment.

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
2019	13.9 percent	5.2 percent	3.8 percent	22.9 percent
2020	13.6 percent	5.2 percent	3.8 percent	22.7 percent

[6] 2016 and 2017 EDGE data blended with 2015 MarketScan® data were used for the 2020 benefit year recalibration, whereas 2014 and 2015 MarketScan® data and 2016 EDGE data were used for the 2019 benefit year recalibration See the HHS Notice of Benefit and Payment Parameters for 2020; Final Rule, 84 Fed. Reg, 17454 at 17463 – 17466 (April 18, 2019; 2020 Payment Notice).

[7] 2016 analyses exclude Massachusetts which operated its own State-operated risk adjustment program for the 2016 benefit year.

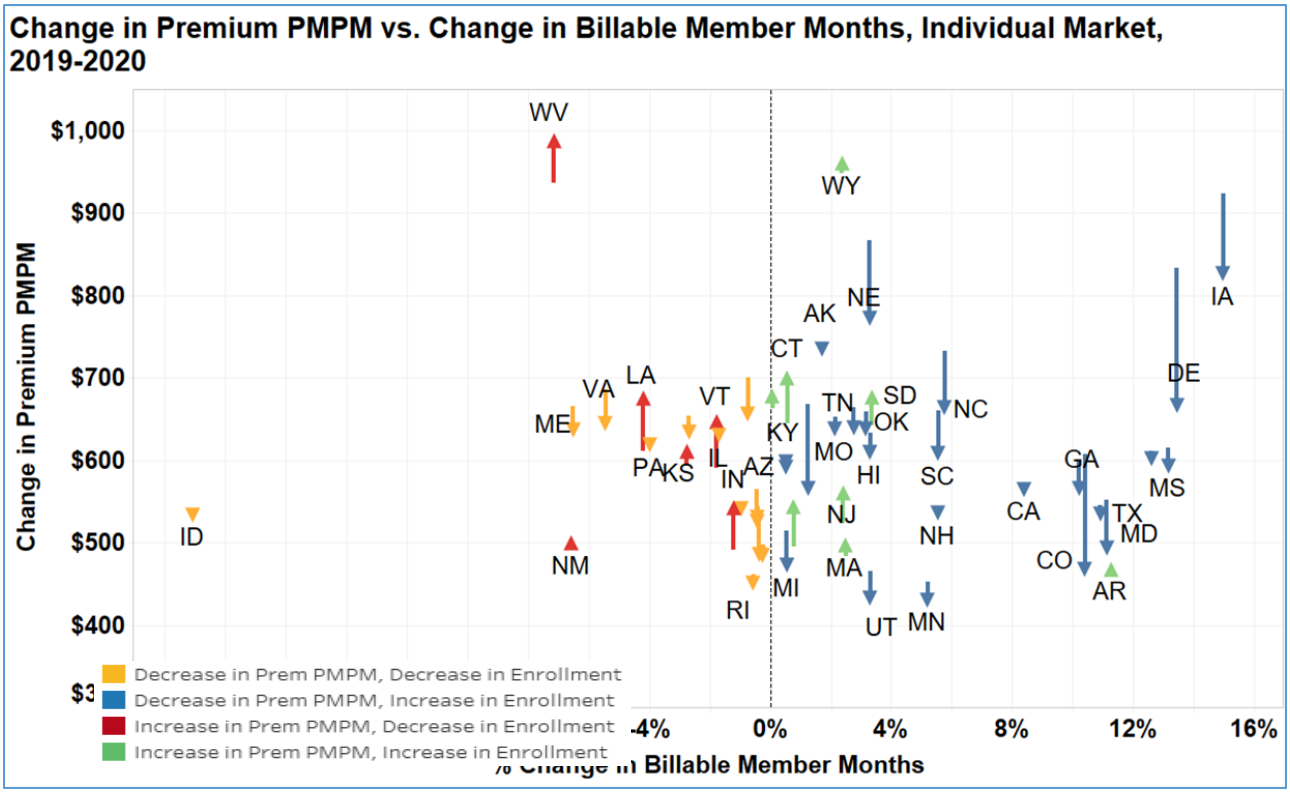
[8] RXCs were added to the adult models beginning with the 2018 benefit year. We removed them for purposes of this analysis to facilitate comparison with the prior benefit years, which did not include RXCs.

- **Average premiums in the individual non-catastrophic risk pool decreased slightly in 2020 (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 from year to year, rising 2 percent from 2014 to 2015 and 7 percent from 2015 to 2016. The state average premiums PMPM for the individual non-catastrophic risk pool increased by about 21 percent from 2016 to 2017 and increased again by 26 percent between 2017 and 2018. In 2019, average premiums PMPM increased by approximately 1.2 percent when compared to the 2018. In 2020, the average premium PMPM decreased by 3.0 percent when compared to 2019.

  Premium changes and enrollment changes varied significantly by state. States that experienced larger premium decreases were among those with the largest enrollment growth. (Figure 4).[9]

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

State Average Change in Premiums (Unadjusted [i.e. Without 14% State Average Premium Adjustment]) vs. Change in Enrollment, 2019 to 2020



- **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 platinum and silver metal level, but not bronze and gold metal level in 2020, which is likely due to silver-loading and is consistent with observed trends in 2019. Average premium PMPM in the individual non-catastrophic risk pool in 2020 was about the same for the bronze metal level, but higher on-Exchange compared to off-Exchange in other metal levels, particularly in the platinum metal level.

[9] The arrows in the graph show the direction and approximate magnitude of the change in premium.

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

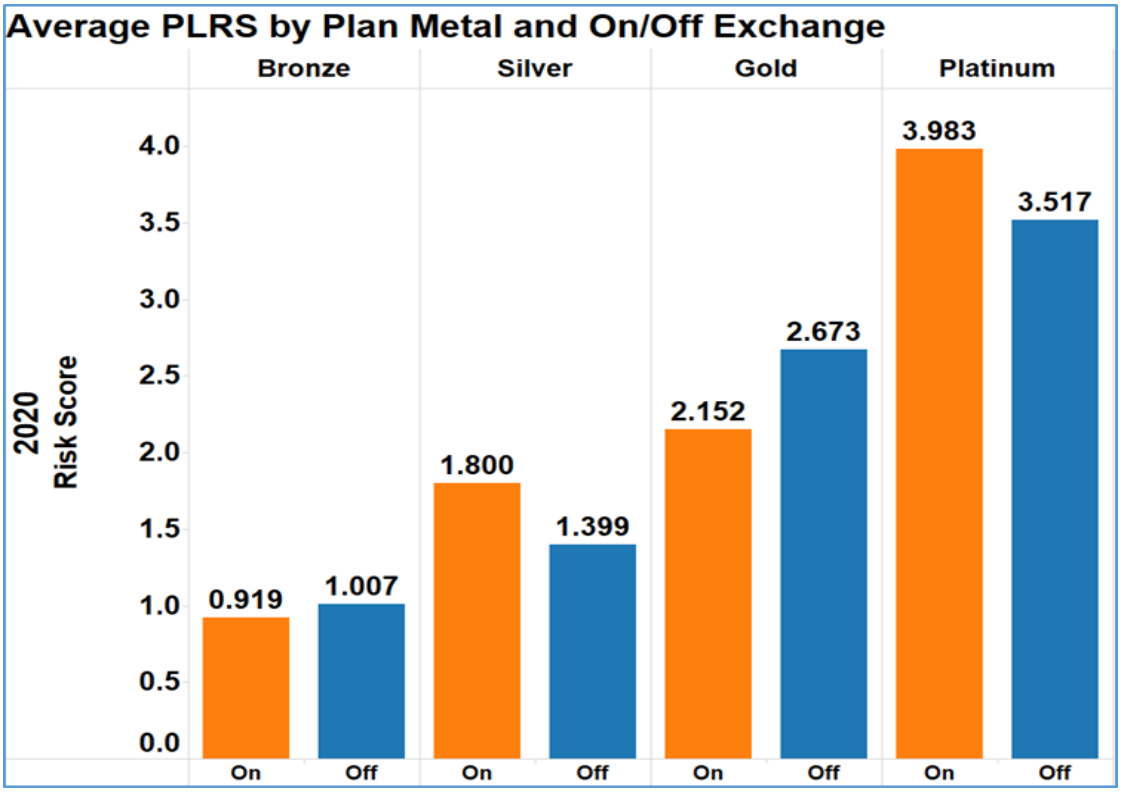
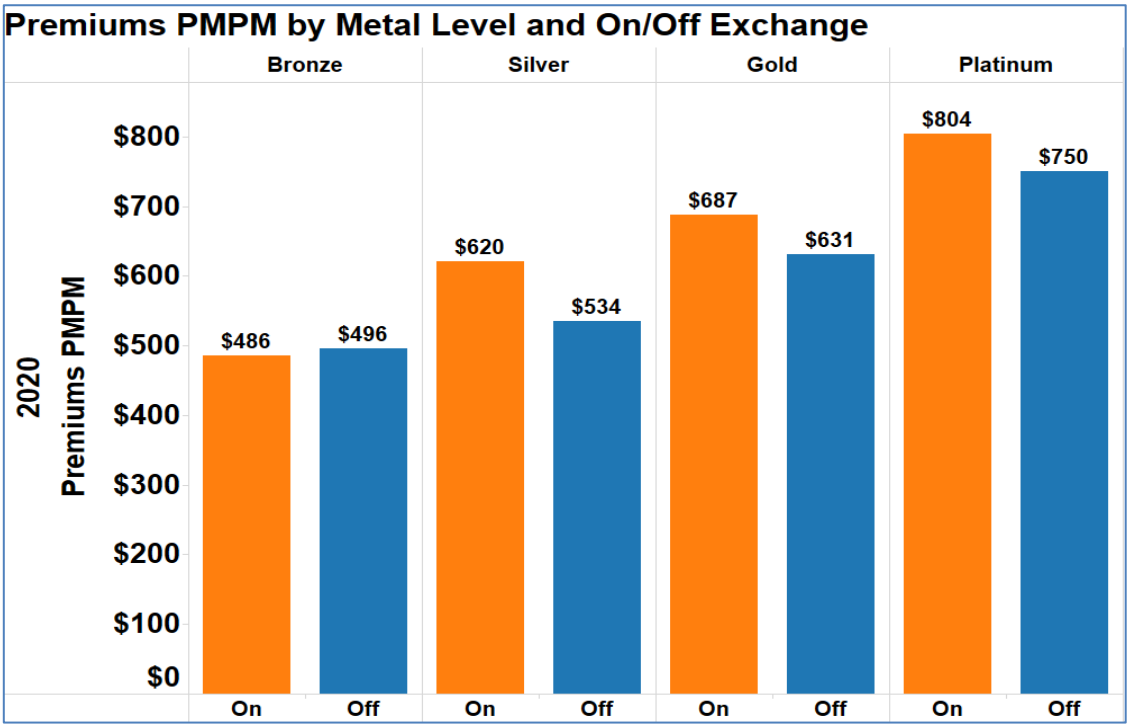


Figure 6 *(Individual Non-Catastrophic Risk Pool Shown Only)*



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

- The 2020 benefit year is the third year that the HHS-operated risk adjustment methodology included the high-cost risk pool, which helps mitigate any residual incentive for risk selection to avoid high-cost enrollees, and to ensure that the average actuarial risk of a plan with high-cost enrollees is better reflected in total state transfers.[10] For the 2020 benefit year, the high-cost risk pool reimburses issuers for 60 percent of an enrollee's aggregated paid claims costs exceeding $1 million.[11] 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 233 issuers nationwide will receive a high-cost risk pool payment for the 2020 benefit year. The high-cost risk pool charge was 0.24 percent of premium for the individual market (including catastrophic, non-catastrophic, and merged market plans), and 0.38 percent of premium for the small group market, nationally.[12]

The impact of the pandemic and how enrollees accessed healthcare was evident in the significant increase in telehealth usage, although there was only a slight increase in total paid claims costs when compared to the 2019 benefit year.

- The 2020 benefit year saw an increase of approximately 484.0% in telehealth paid claims amounts when compared to the 2019 benefit year.
- Telehealth claims have specific codes for various length of service visit. The 2020 benefit year telehealth paid claims amounts by duration when compared to 2019 were as follows:
    - 1-10 minute visit paid claims cost increased by approximately 290.8%
    - 11-20 minute visit paid claims cost increased by approximately 667.2%
    - 21-30 minute visit paid claims cost increased by approximately 1074.1%

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 estimated results of the risk adjustment program for the 2020 benefit year, the seventh 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 therefore 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

[10] See the HHS Notice of Benefit and Payment Parameters for 2018; Final Rule, 81 Fed. Reg. 94058 at 94080 (December 22, 2016; 2018 Payment Notice). Also, see the HHS Notice of Benefit and Payment Parameters for 2019; Final Rule, 83 Fed. Reg. 16930 at 16960 (April 17, 2018; 2019 Payment Notice).
[11] See the 2020 Payment Notice, 84 Fed. Reg. 17466 – 17468.
[12] In contrast to the state payment transfer formula, which calculates transfers at the state market risk pool level, the high-cost risk pool transfers are calculated at the national market level.

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 all 50 states and the District of Columbia for the 2020 benefit year, transfers funds from plans with lower-than-average risk enrollees to plans with higher-than-average risk enrollees.

Several new aspects of the program that began in the 2018 benefit year continued in the 2020 benefit year. Beginning with the 2018 benefit year, the HHS-operated risk adjustment program accounts for certain prescription drug classes in adult enrollees' risk scores.[13] The 2018 benefit year was also the first year that a 14 percent administrative cost reduction was 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.[14]

Additionally, beginning with the 2018 benefit year, the HHS-operated risk adjustment methodology included the high-cost risk pool, which helps ensure that risk adjustment transfers better reflect average actuarial risk, while also stabilizing premiums and reimbursing issuers for a portion of costs for exceptionally high-cost enrollees.[15] High-cost risk pool payments are funded by a percent of premium charge on all risk adjustment covered plans within the respective national 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[16] 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 2020 benefit year risk adjustment methodology established through notice with comment rulemaking[17] and is provided for informational purposes. These amounts do not constitute specific obligations of Federal funds to any particular issuer or plan.

[13] See the 2018 Payment Notice, 81 Fed. Reg. at 94074. Also, see the 2019 Payment Notice, 83 Fed. Reg. at 16941 and 2020 Payment Notice, 84 Fed. Reg. at 17463 - 17466.
[14] See the 2018 Payment Notice, 81 Fed. Reg. at 94099 - 94100. Also, see the 2019 Payment Notice, 83 Fed. Reg. at 16955, and the 2020 Payment Notice, 84 Fed. Reg. at 17485 - 17486.
[15] See, *supra*, notes 10 and 11.
[16] See 45 C.F.R. § 153.20 for the definition of "risk adjustment covered plan."
[17] See the 2020 Payment Notice, 84 Fed. Reg. at 17485 - 17486.

III. HHS-Operated 2020 Benefit Year Risk Adjustment Program Summary Data

Table 1 provides HHS-operated risk adjustment program summary data for the 2020 benefit year.

Table 1: HHS-Operated 2020 Risk Adjustment Program Summary Data[18]

HHS RISK ADJUSTMENT	NUMBER OF ISSUERS WITH
Total Number of Issuers Participating in HHS Risk Adjustment Program	576
Issuers with Individual Non-Catastrophic Plans	275
Issuers with Individual Catastrophic Plans	165
Issuers with Small Group Plans	463
Issuers in a Merged Market[19]	15

Table 2 provides the national average enrollment weighted monthly premium by risk pool and the total amounts expected to be transferred under the state payment transfer formula for the 2020 benefit year, 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 state market risk pool. CMS calculates percentages based on summation of the absolute value of net transfers for each issuer in a specific state 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 state market risk pool, which is calculated as the sum of the products of plan average premium and the billable member months. Total state risk adjustment transfers for the 2020 benefit year—that is, the absolute value of risk adjustment charges and payments at the issuer level—were approximately $11.17 billion, with $5.585 billion in payments and $5.585 billion in charges.

[18] The total of the 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 market risk pools.

[19] 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[20] and HHS Risk Adjustment Absolute Value of 2020 Benefit Year State 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[21]	ABSOLUTE VALUE OF TRANSFER AMOUNTS ($ Billions)
Individual Non-Catastrophic	$578	10 percent	$8.39
Small Group	$534	4 percent	$2.47
Individual Catastrophic	$201	16 percent	$0.05
Merged	$509	5 percent	$0.26
All Risk Pools	$555	7 percent	$11.17

Table 3 provides the 2020 high-cost risk pool summary data. For the 2020 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.[22] 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 which includes catastrophic and non-catastrophic plans, and merged market plans, and another for the small group market), nationally.

Table 3: HHS-Operated 2020 Risk Adjustment High-Cost Risk Pool Summary Data

	Individual Market, Nationwide*	Small Group Market, Nationwide
Number of Issuers in High-Cost Risk Pool**	295	455
Number of Issuers Receiving High-Cost Risk Pool Payments	138	146
Total High-Cost Risk Pool Payment Amount	$214.1 million	$234.4 million
High-Cost Risk Pool Charge Percent of Premium***	0.24 percent	0.38 percent

* Includes individual market catastrophic, non-catastrophic plans, and merged market plans
**Total unique issuers in the high-cost risk pool across both national markets is 569 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.
***Percent of premium is the percent of issuers' collected premiums, unadjusted for the administrative cost reduction used in the calculation of state transfers.

[20] Data includes only those issuers that successfully submitted data to the EDGE server as part of the HHS risk adjustment program (https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/EDGE_2020_QQ_Guidance.pdf). For the 2020 benefit year, all participating issuers successfully submitted data to the EDGE server. Premiums represent the average PMPM amount and do not include any reduction in premiums due to advance payments of the premium tax credit.
[21] Absolute value of net state 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.
[22] See, *supra*, note 11.

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 2020 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 transfers in state risk pools that had a material discrepancy resulting in adjustments after the calculation of risk 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 adjusted 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

DATA ELEMENT	DESCRIPTION
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.[23]

[23] 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 2020 benefit year risk adjustment transfer amounts by issuer.

For the 2020 benefit year, HHS approved Alabama's request to reduce risk adjustment transfers for the Alabama small group market by 50 percent.[24] The amounts shown for the Alabama small group market reflect this reduction.

* *"$-" or "$0.00" risk adjustment state payment transfer amount or high-cost risk pool payment*: We signify "*$-"* 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 state market risk pool for which an issuer is the only issuer in the risk pool.[25] We signify "*$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 STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS ISSUER NAME**	**STATE**	**INDIVIDUAL MARKET (Non-Catastrophic/ Catastrophic Plans and Merged Market)**	**SMALL GROUP MARKET**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
11082	Aetna Life Insurance Company	AK	-	$0.00	-	-	($417,886.10)
38344	Premera Blue Cross	AK	$2,921,739.03	$1,838,601.66	$4,676,106.71	-	$1,523,951.23
73836	Moda Health Plan, Inc.	AK	-	$0.00	-	-	($1,115,426.23)
77963	Moda Assurance Company	AK	$0.00	-	($4,676,106.73)	-	-
80049	UnitedHealthcare Insurance Company	AK	-	$0.00	-	-	$9,361.13
46944	Blue Cross and Blue Shield of Alabama	AL	$2,343,551.29	$2,220,640.77	$9,092,596.90	$48,480.53	($433,571.42)
68259	UnitedHealthcare of Alabama, Inc.	AL	-	$0.00	-	-	($336,056.61)
69461	UnitedHealthcare Insurance Company	AL	-	$343,889.29	-	-	$857,610.51
73301	Bright Health Insurance Company	AL	$0.00	-	($9,092,596.97)	($48,480.52)	-
93018	Viva Health, Inc.	AL	-	$0.00	-	-	($87,982.44)
13262	USAble Mutual Insurance Company	AR	-	$0.00	-	-	$890,380.88

[24] See the 2020 Payment Notice, 84 Fed Reg. at 17484-17485.

[25] There are no risk adjustment transfers under the state payment transfer formula when there is only one issuer in a state market risk pool. See the 2019 Payment Notice, 83 Fed. Reg. at 16967.

			HIGH-COST RISK POOL PAYMENT AMOUNT		RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS ISSUER NAME**	**STATE**	**INDIVIDUAL MARKET (Non-Catastrophic/ Catastrophic Plans and Merged Market)**	**SMALL GROUP MARKET**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
22732	UnitedHealthcare Insurance Company of the River Valley	AR	-	$0.00	-	-	($457,011.29)
37903	Qualchoice Life and Health Insurance Company, Inc.	AR	$0.00	$0.00	($1,137,408.07)	-	($735,497.44)
62141	Celtic Insurance Company	AR	$0.00	-	$20,907,375.28	-	-
65817	UnitedHealthcare of Arkansas, Inc.	AR	-	$0.00	-	-	($878,172.09)
70525	QCA Health Plan, Inc.	AR	$0.00	$0.00	($357,786.61)	-	($2,614,882.05)
75293	USAble Mutual Insurance Company	AR	$113,900.10	$0.00	($19,412,180.61)	-	$3,818,848.67
81392	UnitedHealthcare Insurance Company	AR	-	$0.00	-	-	($23,666.61)
13877	Oscar Health Plan, Inc.	AZ	$101,975.35	-	($1,897,000.15)	$159,322.66	-
23307	Humana Health Plan, Inc.	AZ	-	$167,259.19	-	-	($1,857,769.35)
23435	Banner Health and Aetna Health Plan, Inc.	AZ	-	$0.00	-	-	($522.27)
40702	UnitedHealthcare of Arizona, Inc.	AZ	-	$0.00	-	-	($7,254,875.64)
53901	Blue Cross Blue Shield of Arizona	AZ	$0.00	$64,761.32	($24,593,352.44)	$16,554.09	($3,975,009.86)
66105	Humana Insurance Company	AZ	-	$0.00	-	-	$622,288.39
77349	Banner Health and Aetna Health Insurance Company	AZ	-	$243,073.27	-	-	($499,724.33)
78611	Aetna Health, Inc. (a PA corp.)	AZ	-	$0.00	-	-	$9,436.96
82011	UnitedHealthcare Insurance Company	AZ	-	$1,046,137.73	-	-	$13,237,802.75
84251	Aetna Life Insurance Company	AZ	-	$0.00	-	-	($294,011.69)
86830	Cigna Health and Life Insurance Company	AZ	-	$0.00	-	-	($17,300.99)
87247	Bright Health Insurance Company	AZ	$0.00	-	($33,084,606.64)	($175,876.76)	-
91450	Health Net of Arizona, Inc.	AZ	$6,116,120.37	-	$61,020,441.92	-	-
97667	Cigna HealthCare of Arizona, Inc	AZ	$0.00	$0.00	($1,445,482.67)	-	$29,686.03
10544	Oscar Health Plan of California	CA	$758,988.38	$0.00	($146,556,958.58)	($2,629,258.67)	($1,505,791.45)
18126	Molina Healthcare of California	CA	$54,230.70	-	($47,853,673.19)	($96,389.37)	-
20523	Aetna Health of California, Inc.	CA	-	$0.00	-	-	($6,344,342.28)
27330	Kaiser Permanente Insurance Company	CA	-	$0.00	-	-	($589,458.17)
27603	Blue Cross of California (Anthem BC)	CA	$3,875,534.88	$21,831,996.80	($84,437,684.10)	($1,936,989.37)	$230,307,161.00
37873	UnitedHealthcare Benefits Plan of California	CA	-	$369,454.96	-	-	($7,205,322.41)

			HIGH-COST RISK POOL PAYMENT AMOUNT		RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS ISSUER NAME**	**STATE**	**INDIVIDUAL MARKET (Non-Catastrophic/ Catastrophic Plans and Merged Market)**	**SMALL GROUP MARKET**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
40513	Kaiser Foundation Health Plan, Inc.	CA	$20,368,320.51	$21,911,558.32	($439,615,592.98)	$1,388,678.29	($301,645,788.92)
40733	Aetna Life Insurance Company	CA	-	$472,841.78	-	-	$12,783,906.33
47579	Chinese Community Health Plan	CA	$106,851.40	$0.00	($20,862,070.11)	($16,738.52)	($2,422,192.09)
49116	UHC of California	CA	-	$1,780,696.30	-	-	($26,030,280.46)
56887	Ventura County Health Care Plan	CA	-	$0.00	-	-	$150,601.93
64210	Sutter Health Plan	CA	$0.00	$0.00	($499,307.40)	-	($21,000,768.66)
64618	National Health Insurance Company	CA	-	$0.00	-	-	$633,175.43
67138	Health Net of California, Inc.	CA	$3,389,269.20	$690,481.79	($173,992,713.82)	($261,064.52)	($21,139,792.88)
70285	CA Physician's Service dba Blue Shield of CA	CA	$31,544,835.91	$26,160,744.19	$1,029,581,067.34	$3,864,067.72	$122,699,228.03
84014	Valley Health Plan	CA	$0.00	-	($48,393,385.22)	($296,618.43)	-
89506	Community Care Health Plan, Inc.	CA	-	$0.00	-	-	($187,565.40)
92499	Sharp Health Plan	CA	$506,827.81	$60,129.52	$13,271,985.28	($618,818.90)	($669,642.89)
92815	Local Initiative Health Authority for Los Angeles County	CA	$0.00	-	($91,124,475.78)	$40,306.08	-
93689	Western Health Advantage	CA	$0.00	$286,799.11	($5,061,427.72)	($88,033.02)	$2,649,170.68
95677	UnitedHealthcare Insurance Company	CA	-	$3,453,625.19	-	-	($1,597,826.09)
99110	Health Net Life Insurance Company	CA	$6,292,088.62	$341,773.88	$15,544,236.30	$650,858.76	$21,115,528.54
21032	Kaiser Foundation Health Plan of Colorado	CO	$464,293.75	$2,672,497.81	($13,390,906.91)	$243,371.29	($23,471,003.06)
31070	Bright Health Insurance Company	CO	$0.00	-	($44,965,981.48)	($974,019.48)	-
35944	Kaiser Permanente Insurance Company	CO	-	$0.00	-	-	($437,437.65)
39041	Aetna Life Insurance Company	CO	-	$0.00	-	-	($32,190.08)
44559	Oscar Insurance Company	CO	$0.00	-	($1,732,528.23)	($17,927.88)	-
49375	Cigna Health and Life Insurance Company	CO	$535,879.63	-	$9,512,261.36	-	-
59036	UnitedHealthcare of Colorado, Inc.	CO	-	$0.00	-	-	($19,508,127.84)
63312	Friday Health Plans of Colorado, Inc.	CO	$30,802.72	$0.00	($5,203,377.64)	($905,803.65)	($1,618,341.57)
66699	Denver Health Medical Plan, Inc.	CO	$0.00	-	$20,955,763.54	-	-
67879	UnitedHealthcare Insurance Company	CO	-	$3,650,972.33	-	-	$24,158,988.12
74320	Humana Health Plan	CO	-	$0.00	-	-	($149,006.12)
76680	HMO Colorado, Inc. (Anthem BCBS)	CO	$4,176,307.56	$0.00	$33,393,176.99	$826,410.38	($6,624,128.88)

			HIGH-COST RISK POOL PAYMENT AMOUNT		RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS ISSUER NAME**	**STATE**	**INDIVIDUAL MARKET (Non-Catastrophic/ Catastrophic Plans and Merged Market)**	**SMALL GROUP MARKET**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
79509	Humana Insurance Company	CO	-	$0.00	-	-	$590,003.01
87269	Rocky Mountain Hos&Med Svc (Anthem BCBS)	CO	$0.00	$522,159.92	-	$827,969.35	$29,710,152.72
97879	Rocky Mountain Health Maintenance Organization, Inc.	CO	$0.00	$0.00	$1,431,592.32	-	($2,618,908.69)
29462	Oxford Health Insurance, Inc.	CT	-	$730,842.58	-	-	($13,347,027.95)
37800	Harvard Pilgrim Health Care, Inc.	CT	-	$0.00	-	-	($2,750,789.01)
39159	Aetna Life Insurance Company	CT	-	$0.00	-	-	$1,143,333.02
49650	UnitedHealthcare Insurance Company	CT	-	$0.00	-	-	($211,814.43)
71179	Oxford Health Plans (CT), Inc.	CT	-	$0.00	-	-	($4,668,814.51)
75091	ConnectiCare, Inc.	CT	$0.00	$0.00	($994,078.05)	-	($365,305.43)
76962	ConnectiCare Benefits, Inc.	CT	$1,162,664.17	$0.00	($32,199,672.97)	($112,015.98)	($1,330,388.57)
86545	Anthem Health Plans Inc(Anthem BCBS)	CT	$2,261,134.05	$869,553.50	$17,885,195.42	$112,015.97	$21,397,857.59
89130	HPHC Insurance Company, Inc.	CT	-	$61,241.89	-	-	$1,996,857.97
94815	ConnectiCare Insurance Company, Inc.	CT	$23,408.88	$1,231,111.30	$15,308,555.51	-	($1,863,908.73)
21066	UnitedHealthcare of the Mid-Atlantic, Inc.	DC	-	$0.00	-	-	($1,386,431.44)
41842	UnitedHealthcare Insurance Company	DC	-	$0.00	-	-	$1,391,519.56
73987	Aetna Health, Inc. (a PA corp.)	DC	-	$0.00	-	-	($161,992.12)
75753	Optimum Choice, Inc.	DC	-	$0.00	-	-	($426,927.37)
77422	Aetna Life Insurance Company	DC	-	$0.00	-	-	$378,664.28
78079	Group Hospitalization and Medical Services	DC	$109,042.80	$551,327.25	$9,784,472.97	-	$13,615,918.97
86052	CareFirst BlueChoice	DC	$0.00	$1,270,630.40	($6,635,613.27)	$14,144.82	($9,028,236.64)
94506	Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.	DC	$96,382.76	$0.00	($3,148,859.71)	($14,144.82)	($4,382,515.29)
29497	Aetna Life Insurance Company	DE	-	$0.00	-	-	$886,149.31
61021	UnitedHealthcare Insurance Company	DE	-	$0.00	-	-	$334,389.23
67190	Aetna Health, Inc. (a PA corp.)	DE	-	$0.00	-	-	($147,530.90)
76168	Highmark BCBSD, Inc.	DE	$17,663.69	$236,172.67	$0.00	$0.00	($443,890.60)
97569	Optimum Choice, Inc.	DE	-	$0.00	-	-	($629,117.05)
12379	Bright Health Insurance Company of Florida	FL	$0.00	-	($66,491,085.27)	($247,719.44)	-

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16842	Blue Cross Blue Shield of FL, Inc.	FL	$4,993,150.70	$1,290,213.92	$847,863,945.99	-	$24,251,144.03
18628	Aetna Health, Inc. (a FL corp.)	FL	-	$495,651.88	-	-	$5,271,239.67
19898	AvMed, Inc.	FL	$0.00	$89,522.93	$4,188,823.28	-	$2,349,745.08
21663	Celtic Insurance Company	FL	$5,025,579.92	-	($534,155,117.27)	-	-
23841	Aetna Life Insurance Company	FL	-	$167,721.32	-	-	$802,051.28
30252	Health Options, Inc.	FL	$4,592,101.85	$2,159,015.90	$15,424,415.28	-	($25,465,647.09)
33993	BeHealthy Florida, Inc.	FL	-	$0.00	-	-	($21,576.13)
35783	Humana Medical Plan, Inc.	FL	-	$396,436.61	-	-	$237,179.28
36194	Health First Commercial Plans, Inc.	FL	$0.00	$0.00	$9,368,611.46	$372,439.44	$2,610,741.79
40572	Oscar Insurance Company of Florida	FL	$85,689.73	-	($245,029,341.52)	($31,302.29)	-
42204	All Savers Insurance Company	FL	-	$0.00	-	-	($123,339.57)
43839	UnitedHealthcare Insurance Company	FL	-	$1,942,905.84	-	-	$16,650,918.02
48121	Cigna Health and Life Insurance Company	FL	$0.00	-	($9,980,191.83)	-	-
54172	Molina Healthcare of Florida, Inc.	FL	$90,026.43	-	($44,924,466.99)	-	-
56503	Florida Health Care Plan, Inc	FL	$0.00	$0.00	$23,734,406.69	($93,417.66)	($1,585,010.49)
66966	Capital Health Plan	FL	-	$0.00	-	-	($4,944,830.50)
68398	UnitedHealthcare of Florida, Inc.	FL	-	$584,383.28	-	-	$3,768,336.51
80779	Neighborhood Health Partnership, Inc.	FL	-	$327,184.99	-	-	($23,383,632.71)
99308	Humana Health Insurance Co of FL, Inc.	FL	-	$0.00	-	-	($417,319.40)
13535	UnitedHealthcare Insurance Company	GA	-	$0.00	-	-	($1,364,353.69)
30552	UnitedHealthcare Insurance Company of the River Valley	GA	-	$255,883.57	-	-	($9,190,170.07)
37001	Humana Insurance Company	GA	-	$0.00	-	-	$865,751.79
43802	UnitedHealthcare of Georgia, Inc.	GA	-	$320,040.41	-	-	($4,691,598.53)
49046	Blue Cross and Blue Shield of GA, Inc.	GA	$1,719,886.75	$914,148.03	($35,149,601.06)	($517,844.26)	$21,501,874.89
58081	Oscar Health Plan of Georgia	GA	$0.00	-	($65,317.93)	($2,668.09)	-
60224	CareSource Georgia Co.	GA	$0.00	-	($40,762,220.02)	-	-
70893	Ambetter of Peach State	GA	$2,783,134.82	-	$42,626,873.26	-	-
82302	Kaiser Permanente Insurance Company	GA	-	$0.00	-	-	($510,699.22)

			HIGH-COST RISK POOL PAYMENT AMOUNT		RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
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82824	Aetna Health Inc. (a GA corp.)	GA	-	$0.00	-	-	$415,851.09
83761	Alliant Health Plans	GA	$1,959,036.46	$0.00	$8,156,858.27	-	($1,185,896.66)
83978	Aetna Life Insurance Company	GA	-	$0.00	-	-	$1,341,060.78
89942	Kaiser Foundation Health Plan of Georgia, Inc.	GA	$1,871,012.58	$150,504.05	$25,193,407.56	$520,512.36	($9,136,148.10)
93332	Humana Employers Health Plan of Georgia, Inc.	GA	-	$1,412,799.29	-	-	$1,954,327.57
18350	Hawaii Medical Service Association	HI	$0.00	$633,971.96	$9,504,367.32	$0.00	$11,504,795.25
54179	UnitedHealthcare Insurance Company	HI	-	$0.00	-	-	$535,755.90
56682	Hawaii Medical Assurance Association	HI	-	$0.00	-	-	($167,130.49)
60612	Kaiser Foundation Health Plan, Inc.	HI	$0.00	$36,854.49	($9,504,367.33)	-	($8,155,049.79)
95366	University Health Alliance	HI	-	$0.00	-	-	($3,718,370.90)
18973	Aetna Health, Inc. (a IA corp.)	IA	-	$0.00	-	-	$153,812.64
25896	Wellmark Health Plan of Iowa, Inc.	IA	$0.00	$0.00	$2,929,709.52	-	($15,355,804.83)
27651	Gundersen Health Plan, Inc.	IA	-	$0.00	-	-	($42,105.52)
50735	Medical Associates Health Plans	IA	-	$0.00	-	-	$528,912.58
56610	UnitedHealthcare Plan of the River Valley, Inc.	IA	-	$0.00	-	-	($797,497.60)
72160	Wellmark, Inc.	IA	-	$82,584.08	-	-	$19,023,296.24
74406	Wellmark Value Health Plan, Inc.	IA	$0.00	$0.00	$369,935.89	-	($924,479.42)
74980	Avera Health Plans, Inc.	IA	-	$0.00	-	-	$391,034.77
77638	Health Alliance Midwest, Inc.	IA	-	$0.00	-	-	($7,953.76)
78252	Aetna Life Insurance Company	IA	-	$0.00	-	-	($20,074.31)
85930	Sanford Health Plan	IA	-	$0.00	-	-	$167,813.48
88678	UnitedHealthcare Insurance Company	IA	-	$0.00	-	-	($3,116,954.29)
93078	Medica Insurance Company	IA	$695,351.06	-	($3,299,645.33)	$0.00	-
26002	SelectHealth	ID	$1,350,187.00	$0.00	($11,345,025.31)	$4,453.34	($4,754,988.67)
38128	Montana Health Cooperative	ID	$0.00	$0.00	$12,360,224.19	($47,684.63)	$143,064.82
43541	National Health Insurance Company	ID	-	$0.00	-	-	($360,787.63)
44648	Regence Blue Shield of Idaho	ID	$0.00	$0.00	$2,338,043.79	-	$1,782,838.84
50118	UnitedHealthcare Insurance Company	ID	-	$0.00	-	-	($370,411.42)
60597	PacificSource Health Plans	ID	$1,554,011.41	$0.00	$2,048,482.09	($33,201.57)	$1,942,556.87

			HIGH-COST RISK POOL PAYMENT AMOUNT		RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS ISSUER NAME**	**STATE**	**INDIVIDUAL MARKET (Non-Catastrophic/ Catastrophic Plans and Merged Market)**	**SMALL GROUP MARKET**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
61589	Blue Cross of Idaho	ID	$0.00	$0.00	($5,401,724.76)	$76,432.86	$1,617,727.14
20129	Health Alliance Medical Plans, Inc.	IL	$497,215.57	$0.00	$4,782,955.51	($172,731.93)	($374,297.67)
24301	Medical Associates Health Plans	IL	-	$0.00	-	-	($690,422.60)
27833	Celtic Insurance Company	IL	$0.00	-	($84,358,289.72)	-	-
33235	Gundersen Health Plan, Inc.	IL	-	$0.00	-	-	($85,101.48)
34446	UnitedHealthcare Insurance Company of the River Valley	IL	-	$0.00	-	-	$1,849,845.65
36096	Blue Cross Blue Shield of Illinois	IL	$5,447,216.71	$4,451,434.72	$100,390,032.44	$202,132.07	$7,976,988.21
42529	UnitedHealthcare of Illinois, Inc.	IL	-	$0.00	-	-	($2,582,218.50)
53882	Cigna HealthCare of Illinois, Inc.	IL	$0.00	-	($21,186,753.41)	-	-
54322	MercyCare HMO	IL	-	$0.00	-	-	($208,312.73)
58239	UnitedHealthcare Plan of the River Valley, Inc.	IL	-	$0.00	-	-	($187,669.77)
58288	Humana Health Plan, Inc.	IL	-	$0.00	-	-	($1,484,140.67)
68303	Humana Insurance Company	IL	-	$0.00	-	-	$16,034.90
72547	Aetna Life Insurance Company	IL	-	$0.00	-	-	$497,238.27
85773	Quartz Health Benefit Plans Corporation	IL	$141,224.91	$0.00	$372,055.17	($29,400.12)	($587,086.58)
92476	UnitedHealthcare Insurance Company of Illinois	IL	-	$516,908.93	-	-	($4,164,033.29)
99129	Aetna Health, Inc. (a PA corp.)	IL	-	$0.00	-	-	$23,176.30
17575	Anthem Ins Companies, Inc. (Anthem BCBS)	IN	$0.00	$1,824,464.28	-	$0.00	$10,128,857.41
32378	Aetna Life Insurance Company	IN	-	$0.00	-	-	($10,911.54)
33380	Indiana University Health Plans, Inc.	IN	-	$318,239.77	-	-	($597,765.05)
36373	All Savers Insurance Company	IN	-	$0.00	-	-	$599,883.58
43442	Humana Health Plan	IN	-	$0.00	-	-	$156,817.55
50816	Physicians Health Plan of Northern Indiana, Inc.	IN	-	$0.00	-	-	($4,730,031.15)
54192	CareSource Indiana, Inc.	IN	$414,105.59	-	($27,897,882.55)	-	-
67920	Southeastern Indiana Health Organization	IN	-	$0.00	-	-	($538,853.53)
72850	UnitedHealthcare Insurance Company	IN	-	$2,078,336.59	-	-	($4,830,060.18)
76179	Celtic Insurance Company	IN	$4,412,316.65	-	$27,897,882.46	-	-
99791	Humana Insurance Company	IN	-	$0.00	-	-	($177,937.09)

			HIGH-COST RISK POOL PAYMENT AMOUNT		RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
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18558	Blue Cross and Blue Shield of Kansas, Inc.	KS	$1,102,997.84	$819,107.56	($9,658,780.67)	-	($11,969,785.95)
19968	Humana Insurance Company	KS	-	$0.00	-	-	$5,332,959.15
39520	Medica Insurance Company	KS	$0.00	-	($6,279,367.47)	$30,516.31	-
43490	Oscar Insurance Company	KS	$0.00	-	$1,814,421.91	($30,516.32)	-
49857	Humana Health Plan, Inc.	KS	-	$0.00	-	-	($147,969.32)
57850	Aetna Health, Inc. (a PA corp.)	KS	-	$0.00	-	-	($31,560.11)
76763	Cigna Health and Life Insurance Company	KS	$0.00	-	($4,680,908.90)	-	-
80065	Sunflower State Health Plan, Inc.	KS	$1,278,505.57	-	$18,804,635.14	-	-
84600	Aetna Life Insurance Company	KS	-	$0.00	-	-	$207,160.42
94248	Blue Cross and Blue Shield of Kansas City	KS	-	$320,819.40	-	-	$3,458,136.09
94968	UnitedHealthcare Insurance Company	KS	-	$0.00	-	-	$3,151,059.76
15411	Humana Health Plan, Inc.	KY	-	$95,079.41	-	-	$1,218,375.85
23671	UnitedHealthcare of Kentucky, Ltd.	KY	-	$0.00	-	-	($4,619,567.06)
28773	UnitedHealthcare Insurance Company	KY	-	$0.00	-	-	($526,660.26)
34822	Aetna Health, Inc. (a PA corp.)	KY	-	$0.00	-	-	($3,929.25)
36239	Anthem Health Plans of KY (Anthem BCBS)	KY	$511,084.15	$667,223.79	($5,355,487.28)	($337,670.53)	$3,976,009.75
45636	CareSource Kentucky Co.	KY	$87,561.07	-	$5,355,487.31	$337,670.53	-
45920	UnitedHealthcare of Ohio, Inc.	KY	-	$0.00	-	-	($44,228.95)
14030	Aetna Life Insurance Company	LA	-	$0.00	-	-	($1,192.54)
19636	HMO Louisiana, Inc.	LA	$261,682.55	$0.00	($69,237,266.81)	-	($11,473,128.78)
44965	Humana Health Benefit Plan of Louisiana, Inc.	LA	-	$8,827.76	-	-	$542,952.53
53946	UnitedHealthcare Insurance Company of the River Valley	LA	-	$0.00	-	-	$129,416.50
67243	Vantage Health Plan	LA	$0.00	$0.00	($8,377,533.76)	-	($396,291.46)
69842	UnitedHealthcare Insurance Company	LA	-	$73,327.05	-	-	$258,463.75
97176	Louisiana Health Service & Indemnity Company	LA	$743,822.65	$3,708,717.87	$83,944,127.48	-	$10,939,780.15
98780	CHRISTUS Health Plan Louisiana	LA	$0.00	-	($6,329,326.91)	-	-
23620	UnitedHealthcare Insurance Company	MD	-	$351,503.08	-	-	$2,961,818.45
28137	CareFirst BlueChoice	MD	$508,480.21	$416,487.65	($5,913,641.79)	($64,288.11)	($10,300,293.92)

			HIGH-COST RISK POOL PAYMENT AMOUNT		RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS ISSUER NAME**	**STATE**	**INDIVIDUAL MARKET (Non-Catastrophic/ Catastrophic Plans and Merged Market)**	**SMALL GROUP MARKET**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
31112	UnitedHealthcare of the Mid-Atlantic, Inc.	MD	-	$0.00	-	-	($3,141,523.98)
45532	CareFirst of Maryland	MD	$375,718.47	$0.00	$43,219,005.80	-	$6,790,535.41
65635	MAMSI Life and Health Insurance Company	MD	-	$0.00	-	-	($538,084.20)
66516	Aetna Health, Inc. (a PA corp.)	MD	-	$0.00	-	-	$64,701.17
70767	Aetna Life Insurance Company	MD	-	$0.00	-	-	$253,183.64
72375	Optimum Choice, Inc.	MD	-	$0.00	-	-	($3,055,246.67)
90296	Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.	MD	$339,491.66	$0.00	($74,426,180.10)	$64,288.11	($6,357,556.14)
94084	Group Hospitalization and Medical Services	MD	$628,608.00	$1,275,855.50	$37,120,816.11	-	$13,322,466.37
11593	HPHC Insurance Company, Inc.	ME	-	$0.00	-	-	$3,176,065.05
33653	Maine Community Health Options	ME	$0.00	$0.00	$9,386,970.26	$133,534.17	($2,311,545.26)
48396	Anthem Health Plans of ME (Anthem BCBS)	ME	$11,835.94	$0.00	($21,811,142.38)	($38,358.22)	$3,211,197.97
53357	Aetna Life Insurance Company	ME	-	$0.00	-	-	$975,551.12
73250	Aetna Health, Inc. (a ME corp.)	ME	-	$0.00	-	-	$63,536.72
90214	UnitedHealthcare Insurance Company	ME	-	$0.00	-	-	($1,233,380.98)
96667	Harvard Pilgrim Health Care, Inc.	ME	$662,240.42	$0.00	$12,424,172.13	($95,175.93)	($3,881,424.56)
15560	Blue Cross Blue Shield of Michigan Mutual Insurance Company	MI	$1,712,744.50	$2,017,138.69	$90,813,727.88	$2,204,246.09	$18,419,995.52
20662	PHP Insurance Company	MI	-	$0.00	-	-	$1,239,674.44
23592	Paramount Care of Michigan	MI	-	$0.00	-	-	$354.37
29241	Priority Health	MI	-	$0.00	-	-	($452,938.20)
29698	Priority Health	MI	$103,445.78	$0.00	($47,696,607.67)	-	($5,602,740.02)
37651	Health Alliance Plan of Michigan	MI	$0.00	$0.00	($1,362,678.43)	($134,538.99)	$715,166.52
40047	Molina Healthcare of Michigan, Inc.	MI	$0.00	-	($3,344,147.61)	-	-
52670	All Savers Insurance Company	MI	-	$0.00	-	-	($17,015.38)
58594	Meridian Health Plan of Michigan, Inc.	MI	$0.00	-	($10,232,049.16)	($52,441.07)	-
60829	Physicians Health Plan	MI	$0.00	$0.00	($5,101,811.76)	($8,492.48)	($988,244.34)
62294	Humana Insurance Company	MI	-	$0.00	-	-	$294,957.07
63631	UnitedHealthcare Insurance Company	MI	-	$1,200,128.62	-	-	($1,709,240.14)
67183	Total Health Care	MI	$0.00	$0.00	$198,112.59	-	$1,688,571.43

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HIOS ID	**HIOS ISSUER NAME**	**STATE**	**INDIVIDUAL MARKET (Non-Catastrophic/ Catastrophic Plans and Merged Market)**	**SMALL GROUP MARKET**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
67577	Alliance Health & Life Insurance Co	MI	$0.00	$0.00	($748,714.11)	($62,834.83)	$3,502,029.24
71667	UnitedHealthcare Community Plan, Inc.	MI	-	$0.00	-	-	($1,079,675.79)
74917	McLaren Health Plan	MI	$0.00	$216,534.04	$1,257,250.62	($30,218.20)	($128,369.37)
77739	Oscar Insurance Company	MI	$0.00	-	($2,863,500.44)	($39,054.17)	-
95233	Paramount Insurance Company	MI	-	$0.00	-	-	$26,229.79
98185	Blue Care Network of Michigan	MI	$105,370.75	$276,685.63	($20,919,581.99)	($1,876,666.32)	($15,908,755.36)
25198	UnitedHealthcare Insurance Company	MN	-	$0.00	-	-	($1,414,312.59)
31616	Medica Insurance Company	MN	$446,187.25	$448,536.04	$20,738,269.83	($181,332.86)	$13,697,821.75
34102	Group Health Plan, Inc.	MN	$0.00	-	($19,358,251.90)	($54,446.29)	-
49316	BCBSMN, Inc.	MN	-	$2,233,051.29	-	-	$15,882,166.18
52346	Sanford Health Plan of Minnesota	MN	-	$0.00	-	-	($316,902.58)
57129	HMO Minnesota	MN	$48,871.61	$0.00	$10,405,853.04	-	($7,489,962.42)
70373	Gundersen Health Plan Minnesota, Inc.	MN	-	$0.00	-	-	($598,971.82)
79888	HealthPartners, Inc.	MN	-	$401,091.23	-	-	($19,983,063.55)
85654	HealthPartners Insurance Company	MN	-	$0.00	-	-	$486,636.90
85736	UCare Minnesota	MN	$268,739.82	-	($10,539,516.44)	$235,779.15	-
88102	PreferredOne Insurance Company	MN	$0.00	$50,279.26	($1,246,354.55)	-	($193,112.11)
96859	UnitedHealthcare of Illinois, Inc.	MN	-	$0.00	-	-	($31,529.84)
97624	PreferredOne Community Health Plan	MN	-	$0.00	-	-	($38,770.12)
30613	Humana Insurance Company	MO	-	$423,673.99	-	-	$1,058,179.94
32753	Healthy Alliance Life Co (Anthem BCBS)	MO	$607,538.73	$0.00	($23,057,659.97)	$648,180.18	$4,917,149.83
32898	Aetna Health, Inc. (a PA corp.)	MO	-	$0.00	-	-	$66,308.21
34762	Blue Cross and Blue Shield of Kansas City	MO	-	$7,995.47	-	-	($1,008,523.78)
47840	SSM Health Insurance Company	MO	$0.00	-	($11,928,339.43)	($310,365.88)	-
48161	Aetna Life Insurance Company	MO	-	$0.00	-	-	$133,913.55
53461	Medica Insurance Company	MO	$0.00	-	($2,086,163.16)	($352,006.00)	-
69512	Oscar Insurance Company	MO	$0.00	-	$1,383,457.54	$14,191.68	-
74483	Cigna Health and Life Insurance Company	MO	$0.00	-	$11,412,903.71	-	-
95426	UnitedHealthcare Insurance Company	MO	-	$444,401.67	-	-	($4,811,199.65)

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96384	Cox HealthPlans	MO	$0.00	$0.00	$2,123,438.02	-	($355,828.19)
99723	Celtic Insurance Company	MO	$1,889,635.64	-	$22,152,363.27	-	-
11721	Blue Cross Blue Shield of Mississippi	MS	$0.00	$0.00	($4,470,119.10)	-	($994,843.00)
26781	All Savers Insurance Company	MS	-	$0.00	-	-	($42,455.89)
48963	Humana Insurance Company	MS	-	$0.00	-	-	$216,130.73
79975	Molina Healthcare of Mississippi, Inc.	MS	$0.00	-	($841,557.15)	-	-
90714	Ambetter of Magnolia	MS	$427,747.57	-	$5,311,676.25	-	-
97560	UnitedHealthcare of Mississippi, Inc.	MS	-	$0.00	-	-	($108,273.09)
98805	UnitedHealthcare Insurance Company	MS	-	$0.00	-	-	$929,441.29
23603	PacificSource Health Plans	MT	$0.00	$458,807.51	($8,559,910.84)	-	($1,467,808.82)
30751	Blue Cross and Blue Shield of Montana	MT	$1,065,499.00	$169,006.12	$23,829,157.63	$152,342.30	$1,784,649.14
32225	Montana Health Cooperative	MT	$0.00	$0.00	($15,269,246.80)	($152,342.31)	($608,529.93)
46621	UnitedHealthcare Insurance Company	MT	-	$0.00	-	-	$291,689.66
11512	Blue Cross Blue Shield of North Carolina	NC	$3,182,642.00	$4,862,609.65	$25,854,465.04	$219,814.07	$24,523,331.52
37900	Bright Health Company of North Carolina	NC	$0.00	-	($36,916,417.85)	($219,814.07)	-
43283	FirstCarolinaCare Insurance Company	NC	-	$0.00	-	-	$388,135.16
54332	UnitedHealthcare of North Carolina, Inc.	NC	-	$218,729.74	-	-	($18,467,889.85)
58658	UnitedHealthcare Insurance Company of the River Valley	NC	-	$0.00	-	-	($4,703,983.31)
61644	Aetna Life Insurance Company	NC	-	$0.00	-	-	$343,511.87
61671	Aetna Health, Inc. (a PA corp.)	NC	-	$0.00	-	-	$121,095.20
69347	UnitedHealthcare Insurance Company	NC	-	$1,618,178.65	-	-	($2,204,200.44)
73943	Cigna HealthCare of North Carolina, Inc.	NC	$0.00	-	$3,420,568.31	-	-
77264	Ambetter of North Carolina, Inc.	NC	$300,539.83	-	$7,641,384.52	-	-
37160	Blue Cross Blue Shield of North Dakota	ND	$96,649.95	$617,939.28	$6,676,805.92	($54,077.84)	($280,949.85)
39364	Medica Insurance Company	ND	-	$105,996.84	-	-	$1,287,338.77
73751	Medica Health Plans	ND	$0.00	-	$896,251.66	$36,712.01	-
76311	UnitedHealthcare Insurance Company	ND	-	$0.00	-	-	($3,004.12)
89364	Sanford Health Plan	ND	$0.00	$0.00	($7,573,057.61)	$17,365.85	($1,003,384.80)

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20305	Medica Insurance Company	NE	$4,088,509.61	-	$877,585.44	$13,019.87	-
29678	Blue Cross and Blue Shield of Nebraska	NE	-	$0.00	-	-	($4,859,481.93)
44751	UnitedHealthcare of the Midlands, Inc.	NE	-	$0.00	-	-	($157,365.30)
59699	Aetna Life Insurance Company	NE	-	$0.00	-	-	$150,231.70
73102	UnitedHealthcare Insurance Company	NE	-	$798,755.35	-	-	$4,866,615.58
83653	Bright Health Insurance Company	NE	$0.00	-	($877,585.45)	($13,019.87)	-
51889	UnitedHealthcare Insurance Company	NH	-	$0.00	-	-	($789,726.82)
57601	Anthem Health Plans of NH (Anthem BCBS)	NH	-	$0.00	-	-	($648,701.09)
59025	Harvard Pilgrim Health Care of NE	NH	$37,377.05	$0.00	$11,917,664.57	$651,671.98	($2,100,756.84)
71616	HPHC Insurance Company, Inc.	NH	-	$0.00	-	-	$4,024,189.66
75841	Celtic Insurance Company	NH	$0.00	-	$4,470,926.53	-	-
86365	Tufts Health Freedom Insurance Company	NH	-	$0.00	-	-	($1,145,830.02)
96751	Matthew Thornton Hlth Plan (Anthem BCBS)	NH	$0.00	$278,101.51	($16,388,591.11)	($651,671.98)	$660,825.19
13953	Horizon Healthcare of New Jersey, Inc.	NJ	$0.00	$0.00	($15,060.97)	-	$1,089,987.77
23818	Oscar Garden State Insurance Corporation	NJ	$0.00	$0.00	($4,014,435.82)	($777,031.78)	($2,677,537.46)
48834	Oxford Health Plans (NJ), Inc.	NJ	-	$0.00	-	-	($298,020.40)
77263	Oxford Health Insurance, Inc.	NJ	$0.00	$4,003,710.52	$14,124,003.61	-	$17,654,621.96
77606	AmeriHealth HMO	NJ	$0.00	$809,842.25	($6,158,911.17)	-	($5,919,894.93)
91661	Horizon Healthcare Services, Inc.	NJ	$5,651,484.09	$5,970,717.50	$106,195,318.62	$468,631.87	($13,619,034.57)
91762	AmeriHealth Ins Company of New Jersey	NJ	$171,022.84	$376,344.49	($110,130,914.30)	$308,399.91	$3,769,877.60
19722	Molina Healthcare of New Mexico, Inc.	NM	$0.00	-	($3,943,957.36)	-	-
42776	True Health New Mexico, Inc.	NM	$407,090.22	$0.00	($5,524,186.09)	-	($3,380,958.29)
52744	Presbyterian Insurance Company	NM	-	$187,198.24	-	-	$3,669,663.93
57173	Presbyterian Health Plan	NM	$0.00	$0.00	$1,824,109.72	$89,506.66	($8,759,933.66)
75605	Blue Cross Blue Shield of New Mexico	NM	$83,926.07	$56,540.29	$6,813,670.21	($70,790.38)	$5,850,639.48
90762	UnitedHealthcare Insurance Company	NM	-	$0.00	-	-	$2,620,588.52
93091	New Mexico Health Connections	NM	$710,788.95	-	$830,363.46	($18,716.27)	-
16698	Prominence HealthFirst	NV	-	$0.00	-	-	($597,297.49)
19298	Aetna Health, Inc. (a PA corp.)	NV	-	$0.00	-	-	$179,288.18

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27990	Aetna Life Insurance Company	NV	-	$0.00	-	-	$41,797.66
33670	Rocky Mountain Hos&Med Svc (Anthem BCBS)	NV	$0.00	$2,821,790.58	-	$358,250.16	$7,668,215.05
41094	Hometown Health Plan, Inc.	NV	$0.00	$0.00	($3,698,155.89)	($100,062.14)	($1,477,980.36)
42313	WMI Mutual Insurance Company	NV	-	$0.00	-	-	($11,844.80)
45142	SilverSummit Healthplan, Inc.	NV	$0.00	-	$26,696,999.78	-	-
60156	HMO Colorado, Inc. (Anthem BCBS)	NV	$447,962.62	$0.00	($10,936,670.43)	($129,301.23)	($1,029,095.75)
68524	Prominence Preferred Health Insurance Company, Inc.	NV	-	$0.00	-	-	$130,853.77
74222	UnitedHealthcare Insurance Company	NV	-	$44,307.71	-	-	($2,763,041.28)
83198	Sierra Health and Life Insurance Company, Inc.	NV	$0.00	$201,344.03	$2,875,555.11	($155,043.89)	($47,448.88)
85266	Hometown Health Providers Insurance Company, Inc.	NV	$118,371.79	$0.00	$3,334,926.61	$36,825.05	($2,443,169.94)
95865	Health Plan of Nevada, Inc.	NV	$125,680.90	$271,343.49	($18,272,655.14)	($10,667.95)	$349,723.91
11177	Metro Plus Health Plan	NY	$0.00	$0.00	$1,230,795.86	($5,443.98)	($2,049,726.08)
17210	Aetna Life Insurance Company	NY	$0.00	$187,224.37	($7,091.12)	-	($1,024,885.90)
18029	Independent Health Benefits Corporation	NY	$0.00	$98,933.44	$6,607,327.46	$41,257.82	$9,393,878.20
25303	New York State Catholic Health Plan, Inc.	NY	$0.00	-	($92,018,476.57)	($372,823.39)	-
36346	BlueShield of Northeastern New York	NY	$0.00	$0.00	$1,583,329.80	-	($1,779,655.92)
41046	HealthPlus HP, LLC	NY	$0.00	-	$29,440,754.81	($54,742.03)	-
43477	Crystal Run Health Insurance Company, Inc.	NY	-	$0.00	-	-	($1,735,881.58)
44113	Empire HealthChoice Assurance, Inc.	NY	$0.00	$4,559,554.48	$139,603.68	-	($1,436,126.96)
49526	BlueCross BlueShield of Western New York	NY	$551,041.65	$597,829.21	$7,487,520.00	-	$23,398,409.32
54235	UnitedHealthcare of New York, Inc.	NY	$0.00	-	$22,801,555.20	$196,782.51	-
54297	UnitedHealthcare Insurance Company of New York	NY	$0.00	$0.00	$283,311.34	-	($494,045.65)
56184	MVP Health Care, Inc.	NY	$25,761.87	$0.00	$314,593.97	$221,589.38	($4,337,928.05)
61405	Healthfirst Insurance Company, Inc.	NY	$0.00	$1,586,486.72	$500,959.75	-	($20,615,608.48)
68485	Aetna Health Insurance Company	NY	-	$0.00	-	-	($9,710.66)
73886	Crystal Run Health Plan LLC	NY	-	$0.00	-	-	($1,252,581.29)
74289	Oscar Insurance Corporation	NY	$57,080.52	$0.00	($34,808,007.13)	($1,267,480.83)	($30,087,217.20)

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78124	Excellus Health Plan, Inc.	NY	$661,107.42	$1,848,688.36	$28,781,587.65	$552,101.38	($72,496,342.94)
80519	Empire HealthChoice HMO, Inc.	NY	-	$0.00	-	-	($355,310.39)
85629	Oxford Health Insurance, Inc.	NY	-	$13,809,547.16	-	-	$126,126,028.47
88582	Health Insurance Plan of Greater New York	NY	$286,883.28	$22,457.90	$16,777,286.52	$425,895.67	($12,499,265.92)
89846	MVP Health Care, Inc.	NY	-	$457,643.29	-	-	$5,240,082.63
91237	Healthfirst PHSP, Inc.	NY	$156,291.50	-	$5,315,108.15	$246,519.40	-
92551	CDPHP, Universal Benefits, Inc.	NY	-	$0.00	-	-	($2,440,656.20)
94788	Capital District Physicians' Health Plan, Inc.	NY	$864,033.92	$0.00	$5,569,840.65	$16,344.08	($11,543,455.34)
28162	AultCare Insurance Company	OH	$797,086.86	$0.00	$2,924,988.55	$326,645.77	$1,231,393.84
29276	Community Insurance Company (Anthem BCBS)	OH	$0.00	$1,184,583.59	$1,409,744.53	$156,586.19	$8,419,723.67
29341	Oscar Buckeye State Insurance Corp.	OH	$0.00	-	($9,609,297.08)	($103,753.07)	-
33232	UnitedHealthcare Insurance Company of the River Valley	OH	-	$0.00	-	-	($953,619.27)
33931	UnitedHealthcare of Ohio, Inc.	OH	-	$0.00	-	-	($1,270,260.77)
41047	Buckeye Community Health Plan	OH	$317,880.42	-	($4,287,701.85)	-	-
45845	Oscar Insurance Corporation of Ohio	OH	$0.00	-	$21,917,996.54	($5,556.71)	-
52664	Summa Insurance Company, Inc.	OH	$212,581.83	$0.00	$1,030,673.63	($78,715.27)	$1,204,509.87
56726	UnitedHealthcare Insurance Company	OH	-	$0.00	-	-	($496,688.56)
61724	UnitedHealthcare Life Insurance Company	OH	-	$0.00	-	-	($14,067,087.28)
64353	Molina Healthcare of Ohio, Inc.	OH	$151,495.67	-	$18,935,988.12	-	-
66083	Humana Health Plan of Ohio, Inc.	OH	-	$1,462,461.10	-	-	($356,088.52)
67129	Aetna Life Insurance Company	OH	-	$0.00	-	-	$794,208.28
74313	Paramount Insurance Company	OH	$0.00	$0.00	$1,122,216.61	-	$388,036.71
77552	CareSource	OH	$2,753,849.15	-	($3,653,814.22)	-	-
80627	Medical Mutual of Ohio	OH	-	$277,088.21	-	-	$5,117,167.11
83396	The Health Plan of the Upper Ohio Valley	OH	$0.00	$0.00	$495,937.75	-	$518,850.54
84867	Aetna Health, Inc. (a PA corp.)	OH	-	$0.00	-	-	($144,888.94)
97596	Humana Insurance Company	OH	-	$0.00	-	-	($232,114.21)
98810	THP Insurance Company	OH	-	$0.00	-	-	($153,142.22)

			HIGH-COST RISK POOL PAYMENT AMOUNT		RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS ISSUER NAME**	**STATE**	**INDIVIDUAL MARKET (Non-Catastrophic/ Catastrophic Plans and Merged Market)**	**SMALL GROUP MARKET**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
99969	Medical Mutual of Ohio	OH	$1,257,933.19	-	($30,286,732.63)	($295,206.90)	-
21333	Medica Insurance Company	OK	$176,319.27	-	($18,716,103.24)	($161,631.55)	-
40463	Bright Health Insurance Company	OK	$0.00	-	($13,850,984.23)	$6,188.72	-
45480	UnitedHealthcare of Oklahoma, Inc.	OK	-	$0.00	-	-	($505,991.98)
66946	Aetna Life Insurance Company	OK	-	$0.00	-	-	$25,527.33
76275	Aetna Health, Inc. (a PA corp.)	OK	-	$0.00	-	-	($2,281.70)
85757	UnitedHealthcare Insurance Company	OK	-	$0.00	-	-	($859,733.42)
87571	Blue Cross Blue Shield of Oklahoma	OK	$442,909.46	$1,254,352.54	$31,638,741.34	$340,878.51	$2,995,213.28
87698	CommunityCare Life & Health Insurance Co	OK	-	$0.00	-	-	$1,490,491.08
98905	CommunityCare HMO, Inc.	OK	$0.00	$0.00	$928,346.14	($185,435.68)	($3,143,224.57)
10091	PacificSource Health Plans	OR	$296,230.91	$799,223.32	($6,935,238.50)	$33,546.39	$1,034,862.48
10940	Health Net Plan of Oregon, Inc.	OR	$6,526.24	$0.00	$1,150,148.26	-	$1,132,132.32
33375	Samaritan Health Plans	OR	-	$0.00	-	-	($484,666.16)
39424	Moda Health Plan, Inc.	OR	$1,575,833.54	$798,363.59	$7,773,812.49	-	$2,100,515.44
56707	Providence Health Plan	OR	$691,062.58	$43,335.76	$17,388,269.80	-	$5,699,040.68
63474	BridgeSpan Health Company (OR)	OR	$40,143.99	-	($736,176.23)	-	-
71287	Kaiser Foundation Health Plan of the Northwest	OR	$0.00	$0.00	($18,292,946.80)	($33,546.38)	($3,909,613.36)
77969	Regence BlueCross BlueShield of Oregon	OR	$0.00	$2,835,533.73	($347,869.06)	-	($6,200,504.71)
90175	UnitedHealthcare Insurance Company	OR	-	$0.00	-	-	$628,233.40
16322	UPMC Health Options	PA	$1,572,620.30	$2,079,132.77	($27,381,595.93)	($101,792.30)	($5,086,368.57)
18939	Aetna HealthAssurance Pennsylvania, Inc.	PA	-	$0.00	-	-	$4,923.98
22444	Geisinger Health Plan	PA	$14,194.96	$0.00	$15,916,042.33	$225,360.35	$630,965.61
23489	UnitedHealthcare Insurance Company	PA	-	$599,914.06	-	-	($14,390,014.93)
24872	UnitedHealthcare of Pennsylvania, Inc.	PA	-	$0.00	-	-	($1,653,064.89)
31609	Independence Blue Cross (QCC Ins Co.)	PA	$313,892.03	$2,503,148.65	$29,057,411.60	($128,492.42)	$21,194,991.21
33709	Highmark, Inc.	PA	$269,327.32	$0.00	($13,154,175.90)	$189,658.60	$396,500.25
33871	Keystone Health Plan East	PA	$328,412.21	$1,832,352.66	($22,777,352.18)	-	($16,022,301.52)
33906	Aetna Life Insurance Company	PA	-	$0.00	-	-	$72,601.29
38949	Keystone Health Plan West	PA	$0.00	$0.00	$3,591,497.59	$49,300.95	($15,241.40)

			HIGH-COST RISK POOL PAYMENT AMOUNT		RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
HIOS ID	**HIOS ISSUER NAME**	**STATE**	**INDIVIDUAL MARKET (Non-Catastrophic/ Catastrophic Plans and Merged Market)**	**SMALL GROUP MARKET**	**INDIVIDUAL (Non-Catastrophic)**	**CATASTROPHIC**	**SMALL GROUP**
45127	Capital Advantage Assurance Company	PA	$143,228.66	$83,323.49	$31,564,486.90	-	$9,281,525.52
53789	Keystone Health Plan Central	PA	$0.00	$0.00	($2,047,826.20)	($25,101.73)	($78,808.67)
55957	First Priority Life Insurance Company	PA	-	$628,578.43	-	-	$3,056,108.49
62560	UPMC Health Coverage	PA	$0.00	$0.00	($7,690.52)	-	($1,074,809.57)
64844	Aetna Health, Inc. (a PA corp.)	PA	-	$0.00	-	-	$402,426.79
67430	UPMC Health Plan	PA	-	$0.00	-	-	($4,502,544.75)
70194	Highmark Health Insurance Company	PA	$0.00	$0.00	-	($77,649.67)	$434,319.57
75729	Geisinger Quality Options	PA	$0.00	$56,368.74	$5,310,221.65	-	$4,674,248.95
79279	Highmark Coverage Advantage, Inc.	PA	$0.00	$0.00	($2,832,656.73)	($175,522.55)	$929,029.02
79962	Highmark Benefits Group, Inc.	PA	$0.00	$43,867.96	($6,038,391.18)	$5,808.46	$1,670,440.78
82795	Capital Advantage Insurance Company CAIC	PA	$0.00	$0.00	-	$132,052.32	$75,073.17
83731	First Priority Health	PA	$0.00	-	$120,044.87	-	-
86199	Pennsylvania Health & Wellness, Inc.	PA	$0.00	-	($5,524,804.85)	-	-
98517	Oscar Health Plan of Pennsylvania, Inc.	PA	$0.00	-	($5,795,211.60)	($93,622.02)	-
15287	Blue Cross & Blue Shield of Rhode Island	RI	$0.00	$27,781.55	$2,232,836.20	-	$1,991,662.77
26322	Tufts Associated Health Maintenance Organization, Inc.	RI	-	$0.00	-	-	$115,604.72
77514	Neighborhood Health Plan of Rhode Island	RI	$0.00	$0.00	($2,232,836.18)	-	($1,744,688.72)
79881	UnitedHealthcare of New England, Inc.	RI	-	$0.00	-	-	($418,501.15)
90010	Tufts Associated Health Maintenance Organization, Inc.	RI	-	$0.00	-	-	($312,841.12)
90117	UnitedHealthcare Insurance Company	RI	-	$428,981.30	-	-	$368,763.46
16985	Bright Health Company of South Carolina	SC	$0.00	-	($6,404,100.87)	($13,467.91)	-
22369	Aetna Life Insurance Company	SC	-	$0.00	-	-	($19,323.04)
26065	Blue Cross and Blue Shield of South Carolina	SC	$5,351,552.53	$0.00	$22,691,461.12	$146,129.21	$3,114,125.76
38408	Aetna Health, Inc. (a PA corp.)	SC	-	$0.00	-	-	$22,983.30
42326	Molina Healthcare of South Carolina, Inc.	SC	$0.00	-	($3,828,497.51)	-	-
49532	BlueChoice HealthPlan of South Carolina, Inc.	SC	$92,342.38	$135,423.06	($8,116,855.00)	($132,661.30)	($1,930,828.59)
57860	UnitedHealthcare Insurance Company	SC	-	$0.00	-	-	$183,228.72

			HIGH-COST RISK POOL PAYMENT AMOUNT		RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT BY RISK POOL MARKET		
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64146	UnitedHealthcare Insurance Company of the River Valley	SC	-	$910,264.06	-	-	($1,370,186.16)
79222	Absolute Total Care, Inc.	SC	$968,991.31	-	($4,342,007.78)	-	-
31195	Sanford Health Plan	SD	$364,899.01	$0.00	$2,400,958.30	$401,158.98	($520,705.54)
50305	Wellmark of South Dakota, Inc.	SD	-	$300,303.13	-	-	$4,104,351.23
60536	Avera Health Plans, Inc.	SD	$573,498.65	$0.00	($2,400,958.36)	($401,159.00)	($3,629,797.15)
76458	UnitedHealthcare Insurance Company	SD	-	$0.00	-	-	$9,560.03
96594	Medica Insurance Company	SD	-	$0.00	-	-	$36,591.44
10958	UnitedHealthcare Insurance Company of the River Valley	TN	-	$1,082,238.34	-	-	($10,748,613.62)
14002	BlueCross BlueShield of Tennessee	TN	$2,491,850.91	$1,416,847.60	$25,425,187.86	-	$7,884,186.98
23552	Oscar Insurance Company of Texas	TN	$0.00	$0.00	($6,987,006.90)	($256,380.46)	($237,880.38)
31552	Aetna Life Insurance Company	TN	-	$0.00	-	-	$166,868.14
69443	UnitedHealthcare Insurance Company	TN	-	$0.00	-	-	$134,374.57
70111	Celtic Insurance Company	TN	$0.00	-	($11,489,680.90)	-	-
82120	Humana Insurance Company	TN	-	$39,472.04	-	-	$2,801,064.14
97906	Bright Health Insurance Company of Tennessee	TN	$0.00	-	($25,753,788.36)	$256,380.46	-
99248	Cigna Health and Life Insurance Company	TN	$86,010.94	-	$18,805,288.29	-	-
20069	Oscar Insurance Company of Texas	TX	$368,189.72	-	($161,221,561.90)	($2,783,667.00)	-
26539	SHA, LLC	TX	$64,552.85	$0.00	$13,055,231.69	-	$388,121.83
27248	Community Health Choice, Inc.	TX	$6,314,983.68	-	$91,992,568.00	-	-
29418	Celtic Insurance Company	TX	$4,832,199.67	-	($195,452,107.50)	-	-
30609	Memorial Hermann Health Insurance Company	TX	-	$0.00	-	-	$231,456.36
32673	Humana Health Plan of Texas, Inc.	TX	-	$2,094,067.57	-	-	$10,733,413.04
33602	Blue Cross Blue Shield of Texas	TX	$6,708,718.18	$12,010,383.46	$415,617,377.93	$2,466,831.68	($1,480,580.18)
37392	Prominence HealthFirst of Texas, Inc.	TX	-	$0.00	-	-	$25,130.30
37755	Insurance Company of Scott & White	TX	$0.00	$0.00	$1,444,274.09	-	$733,440.87
40220	UnitedHealthcare of Texas, Inc.	TX	-	$0.00	-	-	($5,835,185.04)
40788	Scott and White Health Plan	TX	$0.00	$0.00	$5,964,672.06	-	($2,810,502.83)
41549	Southwest Life and Health	TX	-	$0.00	-	-	($137,729.80)

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45786	Molina Healthcare of Texas, Inc.	TX	$405,537.47	-	($165,101,202.55)	-	-
58840	Aetna Health, Inc. (a TX corp.)	TX	-	$0.00	-	-	($211.33)
63141	Humana Insurance Company	TX	-	$0.00	-	-	$1,843,512.58
66252	CHRISTUS Health Plan	TX	$0.00	-	($15,786,588.95)	$316,835.30	-
71837	Sendero Health Plans, Inc.	TX	$0.00	-	$9,487,336.94	-	-
75394	Texas Health + Aetna Health Insurance Company	TX	-	$0.00	-	-	($35,516.97)
75655	MemorialHermann Commercial Health Plan	TX	-	$0.00	-	-	($651,466.14)
91716	Aetna Life Insurance Company	TX	-	$0.00	-	-	$1,574,960.87
98809	UnitedHealthcare Insurance Company	TX	-	$1,219,720.46	-	-	($4,578,843.21)
18167	Molina Healthcare of Utah, Inc.	UT	$0.00	-	($2,143,987.72)	-	-
22013	Regence BlueCross BlueShield of Utah	UT	$0.00	$37,161.65	$10,994,001.82	-	($1,897,995.41)
29031	National Health Insurance Company	UT	-	$0.00	-	-	$545,075.01
34541	BridgeSpan Health Company (UT)	UT	$0.00	-	($58,624.84)	-	-
38927	Altius Health Plans Inc.	UT	-	$0.00	-	-	($46,874.31)
42261	University of Utah Health Insurance Plans	UT	$1,059,115.37	-	$34,126,457.46	-	-
46958	Humana Insurance Company	UT	-	$0.00	-	-	$68,407.38
48588	Aetna Life Insurance Company	UT	-	$0.00	-	-	($13,825.60)
66413	UnitedHealthcare of Utah, Inc.	UT	-	$0.00	-	-	($157,549.25)
68781	SelectHealth	UT	$1,574,800.31	$2,854,430.74	($38,370,310.65)	$0.00	$3,676,960.91
80043	WMI Mutual Insurance Company	UT	-	$0.00	-	-	($104,317.01)
81808	Cigna Health and Life Insurance Company	UT	$0.00	-	($4,547,536.03)	-	-
97462	UnitedHealthcare Insurance Company	UT	-	$81,534.95	-	-	($2,069,881.71)
10207	CareFirst BlueChoice	VA	$0.00	$34,763.63	$19,156,546.67	($363,915.86)	($22,673,859.00)
12028	Innovation Health Insurance Company	VA	-	$0.00	-	-	$110,557.82
16064	Anthem Health Plans of VA (Anthem BCBS)	VA	-	$3,263,264.75	-	-	$39,142,515.79
20507	Optima Health	VA	$429,067.68	$0.00	$29,517,086.79	$496,269.21	$7,528,280.39
24251	Optimum Choice, Inc.	VA	-	$0.00	-	-	($1,759,609.81)
25922	Oscar Insurance Company	VA	$0.00	-	($460,621.62)	$2,191.55	-

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25978	UnitedHealthcare Insurance Company	VA	-	$2,685,551.35	-	-	($18,719,479.72)
37204	Piedmont Community HealthCare HMO, Inc.	VA	$0.00	$0.00	$1,345,192.70	-	$382,005.50
38234	Aetna Life Insurance Company	VA	-	$0.00	-	-	($270,763.67)
38599	UnitedHealthcare of the Mid-Atlantic, Inc.	VA	-	$0.00	-	-	($2,652,317.61)
40308	Group Hospitalization and Medical Services	VA	$29,432.87	$0.00	$24,316,561.86	-	$6,011,053.60
41921	Cigna Health and Life Insurance Company	VA	$0.00	-	($44,783,587.03)	-	-
80352	Virginia Premier Health Plan, Inc.	VA	$0.00	-	$1,933,450.56	-	-
86443	Innovation Health Plan, Inc.	VA	-	$0.00	-	-	$580,835.29
88380	HealthKeepers, Inc. (Anthem BCBS)	VA	$1,267,690.83	$1,168,413.92	($20,151,667.36)	($320,300.09)	$4,096,691.29
89242	Optima Health	VA	-	$0.00	-	-	$1,253,196.60
89498	UnitedHealthcare Plan of the River Valley, Inc.	VA	-	$0.00	-	-	$42,154.37
93187	Aetna Health, Inc. (a PA corp.)	VA	-	$0.00	-	-	$275,746.42
95185	Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.	VA	$1,070,453.57	$0.00	($10,872,962.60)	$185,755.20	($13,347,007.25)
14057	PacificSource Health Plans	WA	$0.00	$0.00	($1,159,271.49)	($137,746.76)	($193,223.24)
18699	UnitedHealthcare Insurance Company	WA	-	$107,847.25	-	-	($1,670,069.95)
23371	Kaiser Foundation Health Plan of the Northwest	WA	$0.00	$476,373.17	($7,591,935.07)	$274,913.40	($1,189,121.53)
25768	Kaiser Foundation Health Plan of Washington Options	WA	-	$3,994,983.48	-	-	($3,410,820.51)
34673	Aetna Life Insurance Company	WA	-	$0.00	-	-	($397,512.65)
36026	Health Net Plan of Oregon, Inc.	WA	-	$0.00	-	-	$467,904.54
38229	Health Alliance Northwest Health Plan, Inc.	WA	$0.00	$0.00	($29,716.92)	-	($110,903.74)
38498	Lifewise Health Plan of Washington	WA	$0.00	-	($3,298,058.82)	$114,335.98	-
43861	UnitedHealthcare of Washington, Inc.	WA	-	$0.00	-	-	$142,218.20
45834	Providence Health Plan	WA	$0.00	-	$1,059,843.51	-	-
49831	Premera Blue Cross	WA	$2,095,849.60	$0.00	$37,924,515.96	-	$9,194,807.81
53732	BridgeSpan Health Company (WA)	WA	$0.00	-	($1,773,017.55)	-	-
61836	Coordinated Care Corporation	WA	$0.00	-	($2,403,545.49)	-	-
69364	Asuris Northwest Health	WA	$0.00	$757,892.00	$570,797.69	-	$747,165.70

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71281	Regence BlueCross BlueShield Of Oregon (Clark County)	WA	$0.00	$28,683.22	$1,814,177.18	-	($43,073.91)
80473	Kaiser Foundation Health Plan of Washington	WA	$1,042,270.19	$0.00	($46,525,599.31)	($251,502.63)	($16,822,630.66)
84481	Molina Healthcare of Washington, Inc.	WA	$38,039.47	-	$19,336,996.70	-	-
87718	Regence BlueShield	WA	$0.00	$2,967,113.73	$2,074,813.60	-	$13,285,259.90
14630	Children's Community Health Plan	WI	$47,760.96	-	$16,185,894.48	$319,482.64	-
16245	Group Health Cooperative of Eau Claire	WI	-	$0.00	-	-	$1,276,941.55
20173	HealthPartners Insurance Company	WI	$0.00	$0.00	($4,377,281.71)	($47,475.83)	($436,126.49)
35334	MercyCare Insurance Co	WI	-	$0.00	-	-	$14,341.58
37833	Unity Health Plans Insurance Corporation	WI	$626,527.20	$0.00	$11,207,720.44	$112,283.56	($8,212,936.68)
38166	Security Health Plan of Wisconsin, Inc.	WI	$816,377.63	$0.00	($14,366,095.57)	$129,640.13	($443,006.38)
38345	Dean Health Plan	WI	$11,397.81	$269,110.15	($22,267,713.09)	$54,847.70	($5,044,945.82)
38752	Aetna Life Insurance Company	WI	-	$0.00	-	-	($13,264.34)
39924	All Savers Insurance Company	WI	-	$0.00	-	-	($94,358.91)
47342	Health Tradition Health Plan	WI	-	$0.00	-	-	($114,529.70)
52697	Molina Healthcare of Wisconsin, Inc.	WI	$0.00	-	$443,872.91	-	-
55103	Humana Wisconsin Health Org. Ins. Corp.	WI	-	$0.00	-	-	$321,794.81
57637	Medica Insurance Company	WI	-	$0.00	-	-	($128,029.75)
57845	Medica Health Plans of Wisconsin	WI	$83,349.70	-	($309,472.81)	($114,337.30)	-
58326	MercyCare HMO, Inc.	WI	$0.00	$0.00	($2,297,499.77)	-	$480,097.91
59158	UnitedHealthcare Insurance Company	WI	-	$81,888.78	-	-	$4,581,192.99
64772	Medical Associates Health Plans	WI	-	$0.00	-	-	($142,876.10)
79475	Compcare Health Serv Ins Co (Anthem BCBS)	WI	-	$57,507.76	-	-	$5,474,405.33
80180	UnitedHealthcare of Wisconsin, Inc.	WI	-	$0.00	-	-	$1,624,329.74
81413	Network Health Plan	WI	$0.00	-	$11,190,337.39	-	-
81974	Wisconsin Physicians Svc Insurance Corp - WI	WI	$0.00	$12,640.66	$1,657,893.66	($3,732.81)	$3,146,336.11
84670	WPS Health Plan, Inc. - WI	WI	$0.00	$0.00	$1,849,066.46	($19,902.79)	$516,236.49
86584	Aspirus Arise Health Plan of Wisconsin, Inc.	WI	$483,772.18	$0.00	($817,053.68)	($60,163.27)	($901,017.70)
87416	Common Ground Healthcare Cooperative	WI	$1,012,255.97	$0.00	$810,655.18	($346,422.07)	$202,099.87

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90028	BCBS of Wisconsin (Anthem BCBS)	WI	-	$0.00	-	-	($833,828.01)
91604	Humana Insurance Company	WI	-	$0.00	-	-	($433,827.45)
94529	Group Health Cooperative of South Central Wisconsin	WI	$0.00	$0.00	$1,089,676.09	($24,219.96)	($839,028.94)
31274	Highmark Blue Cross Blue Shield West Virginia	WV	$0.00	$0.00	$8,929,828.74	$0.00	$1,234,856.27
50318	Aetna Life Insurance Company	WV	-	$0.00	-	-	$20,976.35
50328	CareSource West Virginia Co.	WV	$0.00	-	($9,010,862.21)	-	-
59772	THP Insurance Company	WV	-	$0.00	-	-	($151,642.49)
72982	The Health Plan of the Upper Ohio Valley	WV	$0.00	$0.00	$81,033.49	-	$561,491.04
77060	UnitedHealthcare Insurance Company	WV	-	$156,520.06	-	-	($1,417,158.52)
95628	Optimum Choice, Inc.	WV	-	$0.00	-	-	($248,522.70)
11269	Blue Cross Blue Shield of Wyoming	WY	$198,437.51	$1,140,002.27	$0.00	-	($1,039,366.54)
49714	UnitedHealthcare Insurance Company	WY	-	$65,540.48	-	-	$1,039,366.56

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

			HIGH-COST RISK POOL PAYMENT AMOUNT	RISK ADJUSTMENT STATE PAYMENT TRANSFER AMOUNT	
HIOS ID	**HIOS INSURANCE COMPANY NAME**	**STATE**	**MERGED MARKET (Individual Market and Small Group Market)**	**MERGED MARKET Catastrophic Risk Pool**	**MERGED MARKET Individual Non-Catastrophic Plans and Small Group Market**
29125	Tufts Associated Health Maintenance Organization, Inc.	MA	$18,444.11	-	$3,152,732.28
31779	UnitedHealthcare Insurance Company	MA	$0.00	-	($12,348,714.70)
34484	Health New England	MA	$0.00	-	($336,191.09)
36046	Harvard Pilgrim Health Care, Inc.	MA	$1,331,113.21	-	$23,404,659.73
38712	Tufts Associated Health Maintenance Organization, Inc.	MA	$0.00	-	$1,465,040.71
41304	AllWays Health Partners, Inc.	MA	$165,215.41	-	$50,054,711.66
42690	Blue Cross and Blue Shield of Massachusetts HMO Blue, Inc.	MA	$3,532,716.41	($256,240.62)	$18,133,320.86
52710	Fallon Life and Health Assurance Co	MA	$0.00	-	$185,770.13
59763	Tufts Health Public Plans, Inc.	MA	$0.00	$246,235.46	($89,007,817.39)
82569	Boston Medical Center Health Plan, Inc.	MA	$0.00	-	($4,607,915.27)
88806	Fallon Community Health Plan	MA	$0.00	$10,005.15	$9,705,928.01
88950	ConnectiCare of Massachusetts, Inc.	MA	$0.00	-	$270,173.87
95878	HPHC Insurance Company, Inc.	MA	$0.00	-	($71,698.92)
13627	Blue Cross Blue Shield of Vermont	VT	$660,310.94	$4,225.04	$21,711,777.20
77566	MVP Health Care, Inc.	VT	$294,909.34	($4,225.04)	($21,711,777.23)

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 transfer amount for the risk adjustment covered plan in a timely fashion.[26]

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 states where HHS is operating the risk adjustment program, which was all 50 states and the District of Columbia for the 2020 benefit year, and is calculated based on the absolute value of plan risk transfer amounts under the state payment transfer formula. 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).[27] 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 payment transfer formula relative to the market average of these products.[28] Below we set forth information on the 2020 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	2
Number of Issuers with 500 Billable Member Months or Fewer Statewide Electing to Receive a Default Risk Adjustment Charge	6
Percent of All Issuers of Risk Adjustment Covered Plans that Received a Default Risk Adjustment Charge	1.4 percent

[26] 45 C.F.R. § 153.740(b).

[27] 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 market risk pools do not receive any funds from the allocation.

[28] 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 December 2020(pending collections).

Table 7: Default Risk Adjustment Charge by Risk Pool

RISK POOL	NATIONAL PERCENT OF PREMIUM
Individual – Non-Catastrophic	45 percent
Catastrophic	50 percent
Small Group	30 percent
Merged	42 percent
Issuers with 500 or Fewer Billable Member Months Statewide	14 percent

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

HIOS ID	HIOS INSURANCE COMPANY NAME	STATE	RISK POOL	DEFAULT RISK ADJUSTMENT CHARGE AMOUNT
70904	WMI Mutual Insurance Company	AZ	Small Group	($5,182.13)
50491	Cigna Health and Life Insurance Company	GA	Small Group	($18,222.73)
12659	Wisconsin Physicians Services Insurance Corporation	IL	Small Group	($3,049.29)
35755	US Health and Life Insurance Company	IN	Small Group	($10,020.15)
58996	US Health and Life Insurance Company	MI	Small Group	($1,270.83)
83744	HealthFirst Health Plan, Inc.	NY	Small Group	($1,089.89)
99248	Cigna Health and Life Insurance Company	TN	Small Group	($225,156.93)
81795	USAble Mutual Insurance Company	TX	Small Group	($174,605.24)

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

HIOS ID	HIOS ISSUER NAME RECEIVING DEFAULT RISK CHARGE ALLOCATION	STATE	RISK POOL	DEFAULT RISK ADJUSTMENT CHARGE ALLOCATION AMOUNT
23307	Humana Health Plan, Inc.	AZ	Small Group	$281.60
23435	Banner Health and Aetna Health Plan, Inc.	AZ	Small Group	$1.38
40702	UnitedHealthcare of Arizona, Inc.	AZ	Small Group	$181.68
53901	Blue Cross Blue Shield of Arizona	AZ	Small Group	$1,683.70
66105	Humana Insurance Company	AZ	Small Group	$31.74
77349	Banner Health and Aetna Health Insurance Company	AZ	Small Group	$584.34
78611	Aetna Health, Inc. (a PA corp.)	AZ	Small Group	$1.80
82011	UnitedHealthcare Insurance Company	AZ	Small Group	$2,387.10
84251	Aetna Life Insurance Company	AZ	Small Group	$27.57
86830	Cigna Health and Life Insurance Company	AZ	Small Group	$0.01
97667	Cigna HealthCare of Arizona, Inc.	AZ	Small Group	$1.13
13535	UnitedHealthcare Insurance Company	GA	Small Group	$1,054.22
30552	UnitedHealthcare Insurance Company of the River Valley	GA	Small Group	$3,842.53
37001	Humana Insurance Company	GA	Small Group	$119.43
43802	UnitedHealthcare of Georgia, Inc.	GA	Small Group	$778.54
49046	Blue Cross and Blue Shield of GA, Inc.	GA	Small Group	$2,684.80
82302	Kaiser Permanente Insurance Company	GA	Small Group	$94.12
82824	Aetna Health, Inc. (a GA corp.)	GA	Small Group	$33.14
83761	Alliant Health Plans	GA	Small Group	$537.98
83978	Aetna Life Insurance Company	GA	Small Group	$113.77
89942	Kaiser Foundation Health Plan of Georgia, Inc.	GA	Small Group	$886.26
93332	Humana Employers Health Plan of Georgia, Inc.	GA	Small Group	$8,077.89
20129	Health Alliance Medical Plans, Inc.	IL	Small Group	$35.96
24301	Medical Associates Health Plans	IL	Small Group	$1.25
33235	Gundersen Health Plan, Inc.	IL	Small Group	$0.10
34446	UnitedHealthcare Insurance Company of the River Valley	IL	Small Group	$42.44
36096	Blue Cross Blue Shield of Illinois	IL	Small Group	$2,564.99
42529	UnitedHealthcare of Illinois, Inc.	IL	Small Group	$19.75
54322	MercyCare HMO	IL	Small Group	$1.94
58239	UnitedHealthcare Plan of the River Valley, Inc.	IL	Small Group	$9.03
58288	Humana Health Plan, Inc.	IL	Small Group	$14.00
68303	Humana Insurance Company	IL	Small Group	$5.77
72547	Aetna Life Insurance Company	IL	Small Group	$2.14
85773	Quartz Health Benefit Plans Corporation	IL	Small Group	$2.23
92476	UnitedHealthcare Insurance Company of Illinois	IL	Small Group	$349.36
99129	Aetna Health, Inc. (a PA corp.)	IL	Small Group	$0.06
17575	Anthem Ins Companies, Inc. (Anthem BCBS)	IN	Small Group	$4,282.18
32378	Aetna Life Insurance Company	IN	Small Group	$0.96
33380	Indiana University Health Plans, Inc.	IN	Small Group	$277.14
36373	All Savers Insurance Company	IN	Small Group	$16.98

HIOS ID	HIOS ISSUER NAME RECEIVING DEFAULT RISK CHARGE ALLOCATION	STATE	RISK POOL	DEFAULT RISK ADJUSTMENT CHARGE ALLOCATION AMOUNT
43442	Humana Health Plan	IN	Small Group	$219.99
50816	Physicians Health Plan of Northern Indiana, Inc.	IN	Small Group	$1,221.93
67920	Southeastern Indiana Health Organization	IN	Small Group	$93.99
72850	UnitedHealthcare Insurance Company	IN	Small Group	$3,720.02
99791	Humana Insurance Company	IN	Small Group	$186.84
15560	Blue Cross Blue Shield of Michigan Mutual Insurance Company	MI	Small Group	$586.21
20662	PHP Insurance Company	MI	Small Group	$4.71
23592	Paramount Care of Michigan	MI	Small Group	$0.35
29241	Priority Health	MI	Small Group	$8.70
29698	Priority Health	MI	Small Group	$169.87
37651	Health Alliance Plan of Michigan	MI	Small Group	$44.06
52670	All Savers Insurance Company	MI	Small Group	$0.00
60829	Physicians Health Plan	MI	Small Group	$11.68
62294	Humana Insurance Company	MI	Small Group	$0.93
63631	UnitedHealthcare Insurance Company	MI	Small Group	$44.68
67183	Total Health Care	MI	Small Group	$18.73
67577	Alliance Health & Life Insurance Co	MI	Small Group	$42.36
71667	UnitedHealthcare Community Plan, Inc.	MI	Small Group	$5.09
74917	McLaren Health Plan	MI	Small Group	$3.81
95233	Paramount Insurance Company	MI	Small Group	$0.47
98185	Blue Care Network of Michigan	MI	Small Group	$328.11
11177	Metro Plus Health Plan	NY	Small Group	$0.69
17210	Aetna Life Insurance Company	NY	Small Group	$17.98
18029	Independent Health Benefits Corporation	NY	Small Group	$15.68
36346	BlueShield of Northeastern New York	NY	Small Group	$18.09
43477	Crystal Run Health Insurance Company Inc.	NY	Small Group	$0.92
44113	Empire HealthChoice Assurance, Inc.	NY	Small Group	$34.22
49526	BlueCross BlueShield of Western New York	NY	Small Group	$67.53
54297	UnitedHealthcare Insurance Company of New York	NY	Small Group	$0.58
56184	MVP Health Care, Inc.	NY	Small Group	$4.88
61405	Healthfirst Insurance Company, Inc.	NY	Small Group	$11.06
68485	Aetna Health Insurance Company	NY	Small Group	$0.00
73886	Crystal Run Health Plan LLC	NY	Small Group	$0.31
74289	Oscar Insurance Corporation	NY	Small Group	$10.23
78124	Excellus Health Plan, Inc.	NY	Small Group	$150.36
80519	Empire HealthChoice HMO, Inc.	NY	Small Group	$0.15
85629	Oxford Health Insurance, Inc.	NY	Small Group	$643.46
88582	Health Insurance Plan of Greater New York	NY	Small Group	$26.43
89846	MVP Health Care, Inc.	NY	Small Group	$51.31
92551	CDPHP, Universal Benefits, Inc.	NY	Small Group	$24.16
94788	Capital District Physicians' Health Plan, Inc.	NY	Small Group	$10.95

HIOS ID	HIOS ISSUER NAME RECEIVING DEFAULT RISK CHARGE ALLOCATION	STATE	RISK POOL	DEFAULT RISK ADJUSTMENT CHARGE ALLOCATION AMOUNT
10958	UnitedHealthcare Insurance Company of the River Valley	TN	Small Group	$63,142.23
14002	BlueCross BlueShield of Tennessee	TN	Small Group	$137,203.54
23552	Oscar Insurance Company of Texas	TN	Small Group	$210.73
31552	Aetna Life Insurance Company	TN	Small Group	$169.74
69443	UnitedHealthcare Insurance Company	TN	Small Group	$10,733.98
82120	Humana Insurance Company	TN	Small Group	$13,696.93
26539	SHA, LLC	TX	Small Group	$626.25
30609	Memorial Hermann Health Insurance Company	TX	Small Group	$91.96
32673	Humana Health Plan of Texas, Inc.	TX	Small Group	$7,042.80
33602	Blue Cross Blue Shield of Texas	TX	Small Group	$149,272.47
37392	Prominence HealthFirst of Texas, Inc.	TX	Small Group	$2.07
37755	Insurance Company of Scott & White	TX	Small Group	$651.98
40220	UnitedHealthcare of Texas, Inc.	TX	Small Group	$807.94
40788	Scott and White Health Plan	TX	Small Group	$1,418.39
41549	Southwest Life and Health	TX	Small Group	$10.27
58840	Aetna Health, Inc. (a TX corp.)	TX	Small Group	$0.01
63141	Humana Insurance Company	TX	Small Group	$1,018.00
75394	Texas Health + Aetna Health Insurance Company	TX	Small Group	$3.99
75655	MemorialHermann Commercial Health Plan	TX	Small Group	$150.05
91716	Aetna Life Insurance Company	TX	Small Group	$132.71
98809	UnitedHealthcare Insurance Company	TX	Small Group	$13,376.38