

**Regence BlueCross BlueShield of Oregon
Oregon Small Employer 2-50
Rates Effective October 1, 2008
Rate Filing Summary**

The Oregon Insurance Division must approve the rates of all health benefits plans in the individual, small employer and portability markets.

This is a summary of the information contained in the small employer health benefit plan rate filing for Regence BlueCross BlueShield of Oregon. The total change in premium requested is an average 16.8 percent above one year earlier. The requested change will be effective October 1, 2008. 42,061 Oregonians are covered. Consumers' premiums are also affected by the ages of the people covered, where they live and whether family members are covered.

Medical and prescription costs: This rate filing asks for a total medical and prescription rate increase of 16.8 percent above the rates of one year earlier. Part of this increase is because the cost of medical services for these policies has gone up by 12.3 percent and because the cost of prescriptions has increased by 11.9 percent. This rate is also affected by changes in medical and prescription benefits.

Medical and prescription benefits: Part of the medical rate and prescription rate increase is because changes have been made to these medical and prescription benefits: prosthetics and orthotics mandate, pervasive developmental disorders mandate, and oral chemotherapy mandate. These changes increased the medical rate by 0.2 percent and increased the prescription rate by 0.0 percent.

A health insurance premium is made up of three pieces: the claims costs, administrative costs, and profit.

Claims costs: This filing states that for the policies it covers, the claims costs as a portion of premium will change from 80.9 percent to 79.4 percent.

Administrative costs: This filing states that for the policies it covers, the administrative costs as a portion of premium will change from 16.9 percent to 16.8 percent.

Profit: This filing states that the profit the insurance company expects to make for the policies covered as a portion of premium will change from 2.2 percent to 3.8 percent.

Glossary

Administrative costs—These are additional costs the insurance company pays to operate this insurance plan. Such costs include the salaries of company employees, the costs of the company's offices and equipment, commissions to agents to sell and service policies,

Regence BlueCross BlueShield of Oregon
Oregon Small Employer 2-50
Rates Effective July 1, 2009
Rate Filing Summary

The Oregon Insurance Division must approve the rates of all health benefits plans in the individual, small employer and portability markets.

This is a summary of the information contained in the small employer health benefit plan rate filing for Regence BlueCross BlueShield of Oregon. The total change in premium requested is an average 13.7 percent above one year earlier. The requested change will be effective July 1, 2009. 52,613 Oregonians are covered. Consumers' premiums are also affected by the ages of the people covered, where they live and whether family members are covered.

Medical and prescription costs: This rate filing asks for a total medical and prescription rate increase of 13.7 percent above the rates of one year earlier. Part of this increase is because the cost of medical services for these policies has gone up by 13.3 percent and because the cost of prescriptions has increased by 13.3 percent. This rate is also affected by changes in medical and prescription benefits.

Medical and prescription benefits: Part of the medical rate and prescription rate increase is because changes have been made to these medical and prescription benefits: prosthetics and orthotics mandate, pervasive developmental disorders mandate, and oral chemotherapy mandate. These changes increased the medical rate by 0.1 percent and increased the prescription rate by 0.0 percent.

A health insurance premium is made up of three pieces: the claims costs, administrative costs, and profit.

Claims costs: This filing states that for the policies it covers, the claims costs as a portion of premium will change from 81.4 percent to 82.1 percent.

Administrative costs: This filing states that for the policies it covers, the administrative costs as a portion of premium will change from 15.8 percent to 15.9 percent.

Profit: This filing states that the profit the insurance company expects to make for the policies covered as a portion of premium will change from 2.6 percent to 2.0 percent.

Glossary

Administrative costs—These are additional costs the insurance company pays to operate this insurance plan. Such costs include the salaries of company employees, the costs of the company's offices and equipment, commissions to agents to sell and service policies,

Regence BlueCross BlueShield of Oregon
Oregon Small Employer 2-50
Rates Effective April 1, 2009
Rate Filing Summary

The Oregon Insurance Division must approve the rates of all health benefits plans in the individual, small employer and portability markets.

This is a summary of the information contained in the small employer health benefit plan rate filing for Regence BlueCross BlueShield of Oregon. The total change in premium requested is an average 16.4 percent above one year earlier. The requested change will be effective April 1, 2009. 46,307 Oregonians are covered. Consumers' premiums are also affected by the ages of the people covered, where they live and whether family members are covered.

Medical and prescription costs: This rate filing asks for a total medical and prescription rate increase of 16.4 percent above the rates of one year earlier. Part of this increase is because the cost of medical services for these policies has gone up by 13.3 percent and because the cost of prescriptions has increased by 13.3 percent. This rate is also affected by changes in medical and prescription benefits.

Medical and prescription benefits: Part of the medical rate and prescription rate increase is because changes have been made to these medical and prescription benefits: prosthetics and orthotics mandate, pervasive developmental disorders mandate, and oral chemotherapy mandate. These changes increased the medical rate by 0.1 percent and increased the prescription rate by 0.0 percent.

A health insurance premium is made up of three pieces: the claims costs, administrative costs, and profit.

Claims costs: This filing states that for the policies it covers, the claims costs as a portion of premium will change from 79.2 percent to 81.4 percent.

Administrative costs: This filing states that for the policies it covers, the administrative costs as a portion of premium will change from 15.7 percent to 15.8 percent.

Profit: This filing states that the profit the insurance company expects to make for the policies covered as a portion of premium will change from 5.1 percent to 2.6 percent.

Glossary

Administrative costs—These are additional costs the insurance company pays to operate this insurance plan. Such costs include the salaries of company employees, the costs of the company's offices and equipment, commissions to agents to sell and service policies,

Regence BlueCross BlueShield of Oregon
Oregon Small Employer 2-50
Rates Effective July 1, 2008
Rate Filing Summary

The Oregon Insurance Division must approve the rates of all health benefits plans in the individual, small employer and portability markets.

This is a summary of the information contained in the small employer health benefit plan rate filing for Regence BlueCross BlueShield of Oregon. The total change in premium requested is an average 16.5 percent above one year earlier. The requested change will be effective July 1, 2008. 43,737 Oregonians are covered. Consumers' premiums are also affected by the ages of the people covered, where they live and whether family members are covered.

Medical and prescription costs: This rate filing asks for a total medical and prescription rate increase of 16.5 percent above the rates of one year earlier. Part of this increase is because the cost of medical services for these policies has gone up by 12.3 percent and because the cost of prescriptions has increased by 11.9 percent. This rate is also affected by changes in medical and prescription benefits.

Medical and prescription benefits: Part of the medical rate and prescription rate increase is because changes have been made to these medical and prescription benefits: prosthetics and orthotics mandate, pervasive developmental disorders mandate, and oral chemotherapy mandate. These changes increased the medical rate by 0.2 percent and increased the prescription rate by 0.0 percent.

A health insurance premium is made up of three pieces: the claims costs, administrative costs, and profit.

Claims costs: This filing states that for the policies it covers, the claims costs as a portion of premium will change from 91.9 percent to 82.9 percent.

Administrative costs: This filing states that for the policies it covers, the administrative costs as a portion of premium will change from 16.6 percent to 16.9 percent.

Profit: This filing states that the profit the insurance company expects to make for the policies covered as a portion of premium will change from -8.8 percent to 0.2 percent.

Glossary

Administrative costs—These are additional costs the insurance company pays to operate this insurance plan. Such costs include the salaries of company employees, the costs of the company's offices and equipment, commissions to agents to sell and service policies,

Rate Filing Summary – KPNW Individual Plans

The Oregon Insurance Division must approve the rates of all health benefits plans in the individual, small employer and portability markets.

This is a summary of the information contained in the individual health benefit plan rate filing for Kaiser Foundation Health Plan of the Northwest. The total change in premium requested is an average 6.5% percent above one year earlier. The requested change will be effective October 1, 2008. 10,210 Oregonians are covered. Consumers' premiums are also affected by the ages of the people covered, where they live and whether family members are covered.

Medical and prescription costs: This rate filing asks for a total medical and prescription rate increase of 6.5% percent above or below the rates of one year earlier. Part of this increase is because the cost of medical services for these policies has gone up by 5.9% percent and because the cost of prescriptions has increased by 5.9% percent. This rate is also affected by changes in medical and prescription benefits.

Medical and prescription benefits: Part of the medical rate and prescription rate increase is because changes have been made to these medical and prescription benefits: (see attached modification and discontinuation forms). These changes increased the medical rate by 0.6% percent and increased the prescription rate by 0.6% percent.

A health insurance premium is made up of three pieces: the claims costs, administrative costs, and profit.

Claims costs: This filing states that for the policies it covers, the claims costs as a portion of premium will change from 90.7% percent to 91.4% percent.

Administrative costs: This filing states that for the policies it covers, the administrative costs as a portion of premium will change from 9.6% percent to 9.6% percent.

Profit: This filing states that the profit the insurance company expects to make for the policies covered as a portion of premium will change from -0.3% percent to -1.0% percent.

Glossary

Administrative costs—These are additional costs the insurance company pays to operate this insurance plan. Such costs include the salaries of company employees, the costs of the company's offices and equipment, commissions to agents to sell and service policies, subsidies to cover legally required plans such as portability and the Oregon Medical Insurance Pool, and taxes.

Rate Filing Summary – KPNW Individual Plans

The Oregon Insurance Division must approve the rates of all health benefits plans in the individual, small employer and portability markets.

This is a summary of the information contained in the individual health benefit plan rate filing for Kaiser Foundation Health Plan of the Northwest. The total change in premium requested is an average 6.5% percent above one year earlier. The requested change will be effective October 1, 2008. 10,210 Oregonians are covered. Consumers' premiums are also affected by the ages of the people covered, where they live and whether family members are covered.

Medical and prescription costs: This rate filing asks for a total medical and prescription rate increase of 6.5% percent above or below the rates of one year earlier. Part of this increase is because the cost of medical services for these policies has gone up by 5.9% percent and because the cost of prescriptions has increased by 5.9% percent. This rate is also affected by changes in medical and prescription benefits.

Medical and prescription benefits: Part of the medical rate and prescription rate increase is because changes have been made to these medical and prescription benefits: (see attached modification and discontinuation forms). These changes increased the medical rate by 0.6% percent and increased the prescription rate by 0.6% percent.

A health insurance premium is made up of three pieces: the claims costs, administrative costs, and profit.

Claims costs: This filing states that for the policies it covers, the claims costs as a portion of premium will change from 90.7% percent to 91.4% percent.

Administrative costs: This filing states that for the policies it covers, the administrative costs as a portion of premium will change from 9.6% percent to 9.6% percent.

Profit: This filing states that the profit the insurance company expects to make for the policies covered as a portion of premium will change from -0.3% percent to -1.0% percent.

Glossary

Administrative costs—These are additional costs the insurance company pays to operate this insurance plan. Such costs include the salaries of company employees, the costs of the company's offices and equipment, commissions to agents to sell and service policies, subsidies to cover legally required plans such as portability and the Oregon Medical Insurance Pool, and taxes.

Rate Filing Summary

The Oregon Insurance Division must approve the rates of all health benefits plans in the individual, small employer and portability markets.

This is a summary of the information contained in the individual health benefit plan rate filing for Providence Health Plan. The total change in premium requested is an average 29.7 percent above one year earlier. The requested change will be effective November 1, 2008. 6,342 Oregonians are covered. Consumers' premiums are also affected by the ages of the people covered, where they live and whether family members are covered.

Medical and prescription costs: This rate filing asks for a total medical and prescription rate increase of 29.7 percent above the rates of one year earlier. Part of this increase is because the cost of medical and prescription services for these policies has gone up by 28.5 percent. This rate is also affected by changes in medical and prescription benefits.

Medical and prescription benefits: Part of the medical rate and prescription rate increase is because changes have been made to these medical and prescription benefits: introduced routine vision care benefit, removed chiropractic care benefit, other miscellaneous changes: These changes increased the medical and pharmacy rate by a net 0.9 percent.

A health insurance premium is made up of three pieces: the claims costs, administrative costs, and profit.

Claims costs: This filing states that for the policies it covers, the claims costs as a portion of premium will change from 75.0 percent to 75.0 percent.

Administrative costs: This filing states that for the policies it covers, the administrative costs as a portion of premium will change from 23.0 percent to 23.0 percent.

Profit: This filing states that the profit the insurance company expects to make for the policies covered as a portion of premium will change from 2.0 percent to 2.0 percent.

Glossary

Administrative costs—These are additional costs the insurance company pays to operate this insurance plan. Such costs include the salaries of company employees, the costs of the company's offices and equipment, commissions to agents to sell and service policies, subsidies to cover legally required plans such as portability and the Oregon Medical Insurance Pool, and taxes.

Rate Filing Summary

The Oregon Insurance Division must approve the rates of all health benefits plans in the individual, small employer and portability markets.

This is a summary of the information contained in the individual health benefit plan rate filing for LifeWise Health Plan of Oregon. The total change in premium requested is an average 28 percent above one year earlier. The requested change will be effective September 1, 2008. 34,770 Oregonians are covered. Consumers' premiums are also affected by the ages of the people covered, where they live and whether family members are covered.

Medical and prescription costs: This rate filing asks for a total medical and prescription rate increase of 28 percent above the rates of one year earlier. Part of this increase is because the cost of medical services for these policies has gone up by 16.7 percent and because the cost of prescriptions has increased by 16.7 percent. This rate is also affected by changes in medical and prescription benefits.

Medical and prescription benefits: Part of the medical rate and prescription rate increase is because changes have been made to these medical and prescription benefits: Prosthetics and Orthotics, Oral Chemotherapy, and Pervasive Developmental Disorders. These changes increased the medical/prescription rate by 0.6 percent.

A health insurance premium is made up of three pieces: the claims costs, administrative costs, and profit.

Claims costs: This filing states that for the policies it covers, the claims costs as a portion of premium will change from 74.0 percent to 77.9 percent.

Administrative costs: This filing states that for the policies it covers, the administrative costs as a portion of premium will change from 20.0 percent to 22.1 percent.

Profit: This filing states that the profit the insurance company expects to make for the policies covered as a portion of premium will change from 6.0 percent to 0 percent.

Glossary

Administrative costs—These are additional costs the insurance company pays to operate this insurance plan. Such costs include the salaries of company employees, the costs of the company's offices and equipment, commissions to agents to sell and service policies, subsidies to cover legally required plans such as portability and the Oregon Medical Insurance Pool, and taxes.

Rate Filing Summary
Amending Rates

The Oregon Insurance Division must approve the rates of all health benefits plans in the individual, small employer and portability markets.

This is a summary of the information contained in the portability health benefit plan rate filing for Health Net Health Plan of Oregon. The total change in premium requested is an average 13.4 percent above one year earlier. The requested change will be effective August 1, 2009, and will apply to policies issued or renewed on or after that date. 1,100 Oregonians are covered. Consumers' premiums are affected by a number of factors, including but not limited to changes in costs for and uses of medical services and prescriptions, changes in policy benefits, the ages to the people covered, where they live and whether family members are covered.

This summary describes the overall effect of the rate filing relating to medical and prescription benefits in policies and shows the average change in the rates owing to this filing. This summary does not describe the effects of the rate filing on your policy or on any particular policy. The increase or decrease in the rate for your policy may be greater or lesser than the average change.

This summary does not describe rating changes owing to benefits other than medical and prescription benefits. For this rate filing:

Medical and prescription costs: This rate filing asks for a total medical and prescription rate increase of 13.4 percent above or below the rates of one year earlier. Part of this increase is because the cost of medical services for these policies has (select gone up by 12.7 percent and because the cost of prescriptions increased by 13.0 percent. This rate is also affected by changes in medical and prescription benefits.

Medical and prescription benefits: Part of the medical rate and prescription rate increase is because changes have been made to these medical and prescription benefits: Out-of-Network inpatient admission from emergency room paid at In-Network cost share; chemotherapy cost share changed to match Inpatient Hospital cost share for HMO. These changes increased the medical rate by 0.1 percent and did not impact the prescription rate.

A health insurance premium is made up of three pieces: the claims costs, administrative costs, and profit.

Claims costs: This filing states that for the policies it covers, the claims costs as a portion of premium will change from 152 percent to 151 percent.

Administrative costs: This filing states that for the policies it covers, the administrative costs as a portion of premium will change from 9 percent to 9 percent.

Profit; margin: This filing states that the profit the insurance company expects to make, or the margin anticipated if the insurance company is a nonprofit, for the policies covered as a portion of premium will change from -61 percent to -60 percent.

Rate Filing Summary

The Oregon Insurance Division must approve the rates of all health benefits plans in the individual, small employer and portability markets.

This is a summary of the information contained in the portability health benefit plan rate filing for Connecticut General Life Insurance Company. The total change in premium requested is an average 5.7 percent above one year earlier. The requested change will be effective 4/1/2008. Three Oregonians are covered. Consumers' premiums are also affected by the ages of the people covered, where they live and whether family members are covered.

Medical and prescription costs: This rate filing asks for a total medical and prescription rate increase (or decrease) of 0 percent above or below the rates of one year earlier. Part of this increase (or decrease) is because the cost of medical services for these policies has gone up (or down) by 0 percent and because the cost of prescriptions has increased (or decreased) by 0 percent. This rate is also affected by changes in medical and prescription benefits.

Medical and prescription benefits: Part of the medical rate and prescription rate increase is because changes have been made to these medical and prescription benefits: (benefits mandated by the state of Oregon effective 1/1/08). These changes increased the medical rate by 5.4 percent and increased the prescription rate by .3 percent.

A health insurance premium is made up of three pieces: the claims costs, administrative costs, and profit.

Claims costs: This filing states that for the policies it covers, the claims costs as a portion of premium will change from 125 percent to 125 percent.

Administrative costs: This filing states that for the policies it covers, the administrative costs as a portion of premium will change from 0 percent to 0 percent.

Profit: This filing states that the profit the insurance company expects to make for the policies covered as a portion of premium will change from 0 percent to 0 percent.

Glossary

Administrative costs—These are additional costs the insurance company pays to operate this insurance plan. Such costs include the salaries of company employees, the costs of the company's offices and equipment, commissions to agents to sell and service policies, subsidies to cover legally required plans such as portability and the Oregon Medical Insurance Pool, and taxes.

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Claims costs—These are what the insurance company pays out as claims to purchase medical services, prescriptions, and other health-related goods and services for the insured people.

Medical and prescription benefits—These are the policy provisions detailing what the insurance company will pay for various health-related goods and services. If a company changes the policy to offer new or better