

State: Virginia **Filing Company:** Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

Product Name: Anthem Individual Grandfathered: May 1, 2021

Project Name/Number: /

Table of Contents

User Usage Agreement

Attachments

Usage Agreement [Usage Agreement.pdf](#)

Rate-Rule Attachments

(ex. Document Name Attachment Name)

KeyCare Preferred Rates 5-1-2021 [KCP Rates 202105.pdf](#)

Flexible Choice Rates 5-1-2021 [FC Rates 202105.pdf](#)

Basic KeyCare Rates 5-1-2021 [BKC Rates 202105.pdf](#)

Basic BlueCare Rates 5-1-2021 [BBC Rates 202105.pdf](#)

Essential KeyCare Rates 5-1-2021 [EKC Rates 202105.pdf](#)

KeyCare HSA Rates 5-1-2021 [HSA Rates 202105.pdf](#)

HealthSmart Rates 5-1-2021 [IKHS Rates 202105.pdf](#)

HealthSmart with Enhanced Rx Rates 5-1-2021 [IKHD Rates 202105.pdf](#)

Lumenos HSA Rates 5-1-2021 [Lumenos HSA rates 202105.pdf](#)

Individual KeyCare Rates 5-1-2021 [IKC Rates 202105.pdf](#)

Virginia Advantage Rates 5-1-2021 [VADV Rates 202105.pdf](#)

Option I Rates 5-1-2021 [mx1_rates 202105.pdf](#)

Supporting Document

(ex. Supporting Document Name Attachment Name)

Attachments

Certification of Compliance/Readability [RateLtrEff 5-1-2021.pdf](#)

Product Checklist [Rate Review Checklist IND GF 202105.pdf](#)

L&H Actuarial Memorandum [Mem_Prem_by_bendesign 202105.pdf](#)

L&H Actuarial Memorandum [State Form 130B - May 2021.pdf](#)

L&H Actuarial Memorandum [State Form 130B - May 2021.xlsx](#)

L&H Actuarial Memorandum [Actuarial Memo 202105.pdf](#)

L&H Actuarial Memorandum [Supplementary Exhibits 202105.xlsx](#)

L&H Actuarial Memorandum [Supplementary Exhibits 202105.pdf](#)

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TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)		
Product Name:	Anthem Individual Grandfathered: May 1, 2021		
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Health Insurance Rate Request
Summary

[Rate Request Summary 202105 Final.pdf](#)

Previously Approved Rate Files

[BBC Rates 202005.pdf](#)

Previously Approved Rate Files

[BKC Rates 202005.pdf](#)

Previously Approved Rate Files

[EKC Rates 202005.pdf](#)

Previously Approved Rate Files

[FC Rates 202005.pdf](#)

Previously Approved Rate Files

[HSA Rates 202005.pdf](#)

Previously Approved Rate Files

[IKC Rates 202005.pdf](#)

Previously Approved Rate Files

[IKHD Rates 202005.pdf](#)

Previously Approved Rate Files

[IKHS Rates 202005.pdf](#)

Previously Approved Rate Files

[KCP Rates 202005.pdf](#)

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[Lumenos HSA rates 202005.pdf](#)

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[VADV Rates 202005.pdf](#)

State: Virginia **Filing Company:** Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

Product Name: Anthem Individual Grandfathered: May 1, 2021

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Filing at a Glance

Company: Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

Product Name: Anthem Individual Grandfathered: May 1, 2021

State: Virginia

TOI: H16I Individual Health - Major Medical

Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)

Filing Type: Rate

Date Submitted: 11/16/2020

SERFF Tr Num: AWLP-132602220

SERFF Status: Closed-Approved

State Tr Num: AWLP-132602220

State Status: Approved

Co Tr Num: AWLP-132602220

Effective: 05/01/2021

Date Requested:

Author(s): Tim Connell, Samantha Caccavelli, Andrew Meyers

Reviewer(s): Bill Dismore (primary), David Shea

Disposition Date: 11/23/2020

Disposition Status: Approved

Effective Date: 05/01/2021

State: Virginia **Filing Company:** Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

Product Name: Anthem Individual Grandfathered: May 1, 2021

Project Name/Number: /

General Information

Project Name: Status of Filing in Domicile:
Project Number: Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Individual Market Type: Individual
Overall Rate Impact: 1.2% Filing Status Changed: 11/23/2020
State Status Changed: 11/23/2020
Created By: Samantha Caccavelli
Deemer Date: 12/12/2020 Corresponding Filing Tracking Number: AWLP-132602220
Submitted By: Samantha Caccavelli State TOI: H16I Individual Health - Major Medical

State Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)

PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions: No

Filing Description:

We are requesting a 1.2% rate increase for all plans.

This will affect approximately 8,356 policyholders. In modifying our rate filings we are sensitive to the challenges increasing health care cost places on our individual members. The rates need to be updated due to several factors, including but not limited to trends in medical health care cost and the removal of the ACA fee.

New materials were used in the creation of this rate filing.

The corresponding form filings are SERFF Tracking numbers: ANTY-126875454, ANTY-126821911, and ANTY-126881659.

The previous rate filings for these products were effective 5/1/2020 and can be found via SERFF Tracking numbers: AWLP-132143066, AWLP-132142985, and AWLP-132142987.

Company and Contact

Filing Contact Information

Tim Connell, Commercial VA tim.connell@anthem.com
2221 Edward holland Drive 804-354-2716 [Phone]
Richmond, VA 23230

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)		
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Product Name: Anthem Individual Grandfathered: May 1, 2021
Project Name/Number: /

Filing Fees

State Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)		
Product Name:	Anthem Individual Grandfathered: May 1, 2021		
Project Name/Number:	/		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Bill Dismore	11/23/2020	11/23/2020

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Info has been requested from Actuary	David Shea	11/19/2020	11/19/2020
Info has been requested from Actuary	David Shea	11/19/2020	11/19/2020
Info has been requested from Actuary	David Shea	11/18/2020	11/18/2020
Info has been requested from company	Bill Dismore	11/18/2020	11/18/2020

Response Letters

Responded By	Created On	Date Submitted
Samantha Caccavelli	11/19/2020	11/19/2020
Andrew Meyers	11/19/2020	11/19/2020
Samantha Caccavelli	11/18/2020	11/18/2020
Samantha Caccavelli	11/18/2020	11/18/2020

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)		
Product Name:	Anthem Individual Grandfathered: May 1, 2021		
Project Name/Number:	/		

Disposition

Disposition Date: 11/23/2020

Effective Date: 05/01/2021

Status: Approved

HHS Status: HHS Approved

State Review: Reviewed by Actuary

Comment:

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield	Increase	1.200%	1.200%	\$1,169,593	8,356	\$97,466,068	1.200%	1.200%

Percent Change Approved:

Minimum: 1.200%

Maximum: 1.200%

Weighted Average: 1.200%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Part III Actuarial Memorandum and Certifications	Received & Acknowledged	Yes
Supporting Document	Certification of Compliance/Readability	Received & Acknowledged	Yes
Supporting Document	Product Checklist	Received & Acknowledged	Yes
Supporting Document (revised)	L&H Actuarial Memorandum	Received & Acknowledged	Yes
Supporting Document	L&H Actuarial Memorandum	Withdrawn	Yes
Supporting Document	L&H Actuarial Memorandum	Withdrawn	Yes
Supporting Document	Part II - Consumer Justification Narrative	Received & Acknowledged	Yes
Supporting Document	Health Insurance Rate Request Summary	Received & Acknowledged	Yes
Supporting Document	Unified Rate Review Template	Received & Acknowledged	Yes

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)		
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	VA ACA Rate Filing Template	Received & Acknowledged	Yes
Supporting Document	Previously Approved Rate Files	Received & Acknowledged	Yes
Rate	KeyCare Preferred Rates 5-1-2021	Approved	Yes
Rate	Flexible Choice Rates 5-1-2021	Approved	Yes
Rate	Basic KeyCare Rates 5-1-2021	Approved	Yes
Rate	Basic BlueCare Rates 5-1-2021	Approved	Yes
Rate	Essential KeyCare Rates 5-1-2021	Approved	Yes
Rate	KeyCare HSA Rates 5-1-2021	Approved	Yes
Rate	HealthSmart Rates 5-1-2021	Approved	Yes
Rate	HealthSmart with Enhanced Rx Rates 5-1-2021	Approved	Yes
Rate	Lumenos HSA Rates 5-1-2021	Approved	Yes
Rate	Individual KeyCare Rates 5-1-2021	Approved	Yes
Rate	Virginia Advantage Rates 5-1-2021	Approved	Yes
Rate	Option I Rates 5-1-2021	Approved	Yes

State: Virginia **Filing Company:** Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

Product Name: Anthem Individual Grandfathered: May 1, 2021

Project Name/Number: /

Objection Letter

Objection Letter Status	Info has been requested from Actuary
Objection Letter Date	11/19/2020
Submitted Date	11/19/2020
Respond By Date	

Dear Tim Connell,

Introduction:

The data supporting the COVID-19 adjustment is acceptable; however, since it's an experience adjustment it is more appropriate to apply it before claims are trended in the Projection Period Loss Ratio Demonstration. We are aware that this will not change the requested rate increase but it will make the exhibit more consistent with the assumptions and more understandable if referenced in the future.

Please let me know if you have any questions and thank you for your attention to this matter.

Conclusion:

We shall be glad to reconsider this submission upon receipt of the revised forms to address the objections noted above. Should you need clarification of any of the information contained in this letter, please contact the undersigned.

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,
David Shea

State: Virginia **Filing Company:** Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

Product Name: Anthem Individual Grandfathered: May 1, 2021

Project Name/Number: /

Objection Letter

Objection Letter Status	Info has been requested from Actuary
Objection Letter Date	11/19/2020
Submitted Date	11/19/2020
Respond By Date	

Dear Tim Connell,

Introduction:

Please provide support, including any calculations, for the COVID-19 adjustment of 4.2%. Please also confirm that the trend assumption of 7.5% does not include any impact from COVID-19 as was done in past company filings.

Conclusion:

We shall be glad to reconsider this submission upon receipt of the revised forms to address the objections noted above. Should you need clarification of any of the information contained in this letter, please contact the undersigned.

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,
David Shea

State: Virginia **Filing Company:** Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

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Objection Letter

Objection Letter Status	Info has been requested from Actuary
Objection Letter Date	11/18/2020
Submitted Date	11/18/2020
Respond By Date	

Dear Tim Connell,

Introduction:

The Projection Period Loss Ratio Demonstration shows a Renewal Distribution Impact of 4.3% (a reduction in premium). The following exhibit (Renewal Distribution Adjustment Support) states that the primary driver of this adjustment is "lower premium levels due to members renewing throughout the year on their anniversary date." This adjustment is 0.3%; however, the primary driver appears to be the "balancing item" of 4.4%.

As this comprises the vast portion of the Renewal Distribution Impact of 4.3%, please provide a calculation in Excel that shows the derivation of the 4.4% adjustment.

Thank you for your attention to this matter.

Conclusion:

We shall be glad to reconsider this submission upon receipt of the revised forms to address the objections noted above. Should you need clarification of any of the information contained in this letter, please contact the undersigned.

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,
David Shea

State: Virginia **Filing Company:** Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)
Product Name: Anthem Individual Grandfathered: May 1, 2021
Project Name/Number: /

Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	11/18/2020
Submitted Date	11/18/2020
Respond By Date	12/18/2020

Dear Tim Connell,

Introduction:

The Bureau has completed a preliminary review of this filing and have the following concerns. A more detailed and thorough review will be performed once these concerns are addressed.

Please note, any revisions, modifications or changes of any type to this filing not specifically requested by us must be brought to our attention upon resubmission and explained in detail.

Please respond as soon as possible, but no later than the "Respond by" Date above.

Objection 1

- L&H Actuarial Memorandum (Supporting Document)

Comments: The Current Number of Policyholders and Earned Premiums reported in Section 13 of the actuarial memorandum is not consistent with the numbers reported in the Company Rate Information under the Rate/Rule Schedule tab. The "Number of Policy Holders Affected for this Program" and "Written Premium for this Program" do not match with that reported in the actuarial memorandum.

Please explain or revise as necessary.

Objection 2

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please explain the purpose in the change in methodology of combining the plans that were filed separately under SERFF #'s AWLP-132143066, AWLP-132142985, AWLP-132142987 into one rate filing.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is requested as soon as possible. Failure to respond may result in the filing becoming DISAPPROVED. An extension may be requested in advance of the "Respond by" date. Please do not hesitate to contact me if there are any questions.

Sincerely,
Bill Dismore

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
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Product Name:	Anthem Individual Grandfathered: May 1, 2021		
Project Name/Number:	/		

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	11/19/2020
Submitted Date	11/19/2020

Dear Bill Dismore,

Introduction:

Response 1

Comments:

We have moved the COVID experience adjustment above the trend adjustment.

Changed Items:

SERFF Tracking #:	AWLP-132602220	State Tracking #:	AWLP-132602220	Company Tracking #:	AWLP-132602220
State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield		
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)				
Product Name:	Anthem Individual Grandfathered: May 1, 2021				
Project Name/Number:	/				

Supporting Document Schedule Item Changes	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	<p>This contains the following:</p> <ul style="list-style-type: none"> - The actuarial memorandum, which also contains State Form 130A and Experience Period/Projection Period tables - State Form 130B (Excel and PDF) - Members and Premium by Benefit Design Exhibit - Supplementary Exhibits (Excel and PDF), which include a crosswalk from the experience period loss ratio to the projection period loss ratio and more detail behind the ACA fee calculations.
Attachment(s):	<p>Mem_Prem_by_bendesign_202105.pdf State Form 130B - May 2021.pdf State Form 130B - May 2021.xlsx Actuarial Memo 202105.pdf Supplementary Exhibits 202105.xlsx Supplementary Exhibits 202105.pdf</p>
<i>Previous Version</i>	
Satisfied - Item:	<i>L&H Actuarial Memorandum</i>
Comments:	<p><i>This contains the following:</i></p> <ul style="list-style-type: none"> <i>- The actuarial memorandum, which also contains State Form 130A and Experience Period/Projection Period tables</i> <i>- State Form 130B (Excel and PDF)</i> <i>- Members and Premium by Benefit Design Exhibit</i> <i>- Supplementary Exhibits (Excel and PDF), which include a crosswalk from the experience period loss ratio to the projection period loss ratio and more detail behind the ACA fee calculations.</i>
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<i>Previous Version</i>	
Satisfied - Item:	<i>L&H Actuarial Memorandum</i>
Comments:	<p><i>This contains the following:</i></p> <ul style="list-style-type: none"> <i>- The actuarial memorandum, which also contains State Form 130A and Experience Period/Projection Period tables</i> <i>- State Form 130B (Excel and PDF)</i> <i>- Members and Premium by Benefit Design Exhibit</i> <i>- Supplementary Exhibits (Excel and PDF), which include a crosswalk from the experience period loss ratio to the projection period loss ratio and more detail behind the ACA fee calculations.</i>
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SERFF Tracking #:	AWLP-132602220	State Tracking #:	AWLP-132602220	Company Tracking #:	AWLP-132602220
<hr/>					
State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield		
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Product Name:	Anthem Individual Grandfathered: May 1, 2021				
Project Name/Number:	/				

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Sincerely,
Samantha Caccavelli

State: Virginia **Filing Company:** Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

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Product Name: Anthem Individual Grandfathered: May 1, 2021

Project Name/Number: /

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	11/19/2020
Submitted Date	11/19/2020

Dear Bill Dismore,

Introduction:

Response 1

Comments:

The trend assumption of 7.5% does not include any impact from COVID-19.

We observed trends of around 7% for calendar year 2019 and around -6% for Q2 2020. This indicated that experience period claims were artificially low due to suppressed utilization driven by COVID-19. The COVID Experience Period Adjustment seeks to set claims at a reasonable baseline prior to application of the trend assumption listed above.

The adjustment is calculated by taking the difference of:

- a) what claims would have been without COVID, assuming similar trend and seasonality compared to prior years, less*
- b) actual claims estimates for the experience period.*

We adjusted the months of March, April, and May 2020, which had seen the largest negative trends in the experience period. Assumed trend for Q2 2020 after adjustment is around 6%, closer to CY 2019. Presuming a base experience PMPM of \$354, we arrived at a COVID Experience Period Adjustment of \$15 PMPM or 4.2%.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

*Sincerely,
Andrew Meyers*

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
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Response Letter

Response Letter Status	Submitted to State
Response Letter Date	11/18/2020
Submitted Date	11/18/2020

Dear Bill Dismore,

Introduction:

Response 1

Comments:

Upon review of the Projection Period Loss Ratio Demonstration, we neglected to break out the experience period adjustment for COVID-19 that was included in the rate development. Please see the amended Supplementary Exhibits file, specifically the row below Benefit Changes in the Projection Period Loss Ratio Demonstration, which shows the COVID Experience Period Adjustment of 4.2%. By including that item, the Renewal Distribution Impact falls to 0.1%, with the balancing item dropping to 0.2%.

Note that the experience period ended in June 2020, which encompasses months with suppressed utilization due to COVID-19.

Changed Items:

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
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Supporting Document Schedule Item Changes	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	<p>This contains the following:</p> <ul style="list-style-type: none"> - The actuarial memorandum, which also contains State Form 130A and Experience Period/Projection Period tables - State Form 130B (Excel and PDF) - Members and Premium by Benefit Design Exhibit - Supplementary Exhibits (Excel and PDF), which include a crosswalk from the experience period loss ratio to the projection period loss ratio and more detail behind the ACA fee calculations.
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<i>Previous Version</i>	
Satisfied - Item:	<i>L&H Actuarial Memorandum</i>
Comments:	<p><i>This contains the following:</i></p> <ul style="list-style-type: none"> <i>- The actuarial memorandum, which also contains State Form 130A and Experience Period/Projection Period tables</i> <i>- State Form 130B (Excel and PDF)</i> <i>- Members and Premium by Benefit Design Exhibit</i> <i>- Supplementary Exhibits (Excel and PDF), which include a crosswalk from the experience period loss ratio to the projection period loss ratio and more detail behind the ACA fee calculations.</i>
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No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Sincerely,
Samantha Caccavelli

State: Virginia **Filing Company:** Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

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Project Name/Number: /

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	11/18/2020
Submitted Date	11/18/2020

Dear Bill Dismore,

Introduction:

Response 1

Comments:

The numbers in the actuarial memorandum represent June 2020. The values on the Rate/Rule Schedule tab in SERFF represent the rating period, which starts May 2021.

Related Objection 1

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: The Current Number of Policyholders and Earned Premiums reported in Section 13 of the actuarial memorandum is not consistent with the numbers reported in the Company Rate Information under the Rate/Rule Schedule tab. The "Number of Policy Holders Affected for this Program" and "Written Premium for this Program" do not match with that reported in the actuarial memorandum.

Please explain or revise as necessary.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 2

Comments:

As this closed block continues to lose membership, combining products for rating purposes leads to increased credibility of experience compared with rating three separate subgroups. The combined filing also reflects past practice where the rate increase was spread evenly over all Individual Grandfathered products. Please note, for example, that the approved rate increases for the filings from last year referenced above all equal 2.8%.

Related Objection 2

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please explain the purpose in the change in methodology of combining the plans that were filed separately under SERFF #'s AWLP-132143066, AWLP-132142985, AWLP-132142987 into one rate filing.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)		
Product Name:	Anthem Individual Grandfathered: May 1, 2021		
Project Name/Number:	/		

Sincerely,
Samantha Caccavelli

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)		
Product Name:	Anthem Individual Grandfathered: May 1, 2021		
Project Name/Number:	/		

Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	2.800%
Effective Date of Last Rate Revision:	05/01/2020
Filing Method of Last Filing:	SERFF
SERFF Tracking Number of Last Filing:	AWLP-132143066, AWLP-132142985, AWLP-132142987

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield	Increase	1.200%	1.200%	\$1,169,593	8,356	\$97,466,068	1.200%	1.200%

State: Virginia **Filing Company:** Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

Product Name: Anthem Individual Grandfathered: May 1, 2021

Project Name/Number: /

Rate Review Detail

COMPANY:

Company Name: Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

HHS Issuer Id: 71835

PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
Basic BlueCare - GF			192
Basic KeyCare - GF			213
Essential KeyCare - GF			1800
Flexible Choice - GF			2957
HealthSmart GF			2254
HealthSmart w Enh Rx GF			691
Individual KeyCare - GF			1227
KeyCare HSA GF			694
KeyCare Preferred - GF			2426
Lumenos HSA GF			1489
Option I GF			362
Virginia Advantage - GF			317

Trend Factors: Plan mix, medical and pharmacy trend, deductible leveraging

FORMS:

New Policy Forms:

Affected Forms: Policy Form 901119-CP.1 with Schedule of Benefits: 01933VAMENABS, 01913VAMENABS, 01937VAMENABS, 01917VAMENABS, 01929VAMENABS, 01921VAMENABS, 01901VAMENABS; Policy Form 901151-CP with SOB 01941VAMENABS; Policy Form 910000 with SOB 01945VAMENABS; Policy Form 910002 with SOB 01949VAMENABS; and Policy Form 110898 (2/92) with SOB 01957VAMENABS

Other Affected Forms:

REQUESTED RATE CHANGE INFORMATION:

Change Period: Annual

Member Months: 228,553

Benefit Change: Increase

Percent Change Requested: Min: 1.2 Max: 1.2 Avg: 1.2

PRIOR RATE:

Total Earned Premium: 111,584,681.00

Total Incurred Claims: 78,263,476.00

Annual \$: Min: 341.26 Max: 888.10 Avg: 549.15

REQUESTED RATE:

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
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Product Name:	Anthem Individual Grandfathered: May 1, 2021		
Project Name/Number:	/		
Projected Earned Premium:	97,390,372.00		
Projected Incurred Claims:	72,717,941.00		
Annual \$:	Min: 344.90 Max: 897.56 Avg: 555.00		

SERFF Tracking #:	AWLP-132602220	State Tracking #:	AWLP-132602220	Company Tracking #:	AWLP-132602220
State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield		
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)				
Product Name:	Anthem Individual Grandfathered: May 1, 2021				
Project Name/Number:	/				

Rate/Rule Schedule

SERFF Tracking #:

AWLP-132602220

State Tracking #:

AWLP-132602220

Company Tracking #:

AWLP-132602220

State:

Virginia

Filing Company:

Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield

TOI/Sub-TOI:

H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

Product Name:

Anthem Individual Grandfathered: May 1, 2021

Project Name/Number:

/

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		KeyCare Preferred Rates 5-1-2021	Policy Form 901119-CP.1 et al, SOB 01933VAMENABS	Revised	Previous State Filing Number: AWLP-132143066 Percent Rate Change Request: 1.2	KCP Rates 202105.pdf,
2		Flexible Choice Rates 5-1-2021	Policy Form 901119-CP.1 et al, SOB 01913VAMENABS	Revised	Previous State Filing Number: AWLP-132143066 Percent Rate Change Request: 1.2	FC Rates 202105.pdf,
3		Basic KeyCare Rates 5-1-2021	Policy Form 901119-CP.1 et al, SOB 01937VAMENABS	Revised	Previous State Filing Number: AWLP-132143066 Percent Rate Change Request: 1.2	BKC Rates 202105.pdf,
4		Basic BlueCare Rates 5-1-2021	Policy Form 901151-CP et al, SOB 01941VAMENABS	Revised	Previous State Filing Number: AWLP-132143066 Percent Rate Change Request: 1.2	BBC Rates 202105.pdf,
5		Essential KeyCare Rates 5-1-2021	Policy Form 901119-CP.1 et al, SOB 01917VAMENABS	Revised	Previous State Filing Number: AWLP-132143066 Percent Rate Change Request: 1.2	EKC Rates 202105.pdf,
6		KeyCare HSA Rates 5-1-2021	Policy Form 901119-CP.1 et al, SOB 01929VAMENABS	Revised	Previous State Filing Number: AWLP-132142985 Percent Rate Change Request: 1.2	HSA Rates 202105.pdf,
7		HealthSmart Rates 5-1-2021	Policy Form 901119-CP.1 et al, SOB 01921VAMENABS	Revised	Previous State Filing Number: AWLP-132142985 Percent Rate Change Request: 1.2	IKHS Rates 202105.pdf,
8		HealthSmart with Enhanced Rx Rates 5-1-2021	Policy Form 901119-CP.1 et al, SOB 01921VAMENABS	Revised	Previous State Filing Number: AWLP-132142985 Percent Rate Change Request: 1.2	IKHD Rates 202105.pdf,
9		Lumenos HSA Rates 5-1-2021	Policy Form 901119-CP.1 et al, SOB 01901VAMENABS	Revised	Previous State Filing Number: AWLP-132142985 Percent Rate Change Request: 1.2	Lumenos HSA rates 202105.pdf,
10		Individual KeyCare Rates 5-1-2021	Policy Form 910000, SOB 01945VAMENABS	Revised	Previous State Filing Number: AWLP-132142987	IKC Rates 202105.pdf,

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)		
Product Name:	Anthem Individual Grandfathered: May 1, 2021		
Project Name/Number:	/		

					Percent Rate Change Request: 1.2	
11		Virginia Advantage Rates 5-1-2021	Policy Form 910002, SOB 01949VAMENABS	Revised	Previous State Filing Number: AWLP-132142987 Percent Rate Change Request: 1.2	VADV Rates 202105.pdf,
12		Option I Rates 5-1-2021	Policy Form 110898 (2/92), SOB 01957VAMENABS	Revised	Previous State Filing Number: AWLP-132142987 Percent Rate Change Request: 1.2	mx1_rates 202105.pdf,

SERFF Tracking #:	AWLP-132602220	State Tracking #:	AWLP-132602220	Company Tracking #:	AWLP-132602220
State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield		
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)				
Product Name:	Anthem Individual Grandfathered: May 1, 2021				
Project Name/Number:	/				

Supporting Document Schedules

Bypassed - Item:	Part III Actuarial Memorandum and Certifications
Bypass Reason:	The rate increase is for grandfathered products only. The actuarial memorandum is located in the "L&H Actuarial Memorandum" section.
Attachment(s):	
Item Status:	Received & Acknowledged
Status Date:	11/23/2020
Satisfied - Item:	Certification of Compliance/Readability
Comments:	
Attachment(s):	RateLtrEff 5-1-2021.pdf
Item Status:	Received & Acknowledged
Status Date:	11/23/2020
Satisfied - Item:	Product Checklist
Comments:	
Attachment(s):	Rate Review Checklist IND GF 202105.pdf
Item Status:	Received & Acknowledged
Status Date:	11/23/2020
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	<p>This contains the following:</p> <ul style="list-style-type: none"> - The actuarial memorandum, which also contains State Form 130A and Experience Period/Projection Period tables - State Form 130B (Excel and PDF) - Members and Premium by Benefit Design Exhibit - Supplementary Exhibits (Excel and PDF), which include a crosswalk from the experience period loss ratio to the projection period loss ratio and more detail behind the ACA fee calculations.
Attachment(s):	<p>Mem_Prem_by_bendesign_202105.pdf</p> <p>State Form 130B - May 2021.pdf</p> <p>State Form 130B - May 2021.xlsx</p> <p>Actuarial Memo 202105.pdf</p> <p>Supplementary Exhibits 202105.xlsx</p> <p>Supplementary Exhibits 202105.pdf</p>
Item Status:	Received & Acknowledged
Status Date:	11/23/2020
Bypassed - Item:	Part II - Consumer Justification Narrative
Bypass Reason:	This filing only concerns grandfathered products, and is thus not subject to HHS review.

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
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TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

Product Name: Anthem Individual Grandfathered: May 1, 2021

Project Name/Number: /

Attachment(s):	
Item Status:	Received & Acknowledged
Status Date:	11/23/2020

Satisfied - Item:	Health Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Request Summary 202105 Final.pdf
Item Status:	Received & Acknowledged
Status Date:	11/23/2020

Bypassed - Item:	Unified Rate Review Template
Bypass Reason:	Does not apply to grandfathered health benefit plans per the description provided herein.
Attachment(s):	
Item Status:	Received & Acknowledged
Status Date:	11/23/2020

Bypassed - Item:	VA ACA Rate Filing Template
Bypass Reason:	The rate increase is for grandfathered products only.
Attachment(s):	
Item Status:	Received & Acknowledged
Status Date:	11/23/2020

Satisfied - Item:	Previously Approved Rate Files
Comments:	
Attachment(s):	BBC Rates 202005.pdf BKC Rates 202005.pdf EKC Rates 202005.pdf FC Rates 202005.pdf HSA Rates 202005.pdf IKC Rates 202005.pdf IKHD Rates 202005.pdf IKHS Rates 202005.pdf KCP Rates 202005.pdf Lumenos HSA rates 202005.pdf mx1_rates 202005.pdf VADV Rates 202005.pdf
Item Status:	Received & Acknowledged
Status Date:	11/23/2020

State:	Virginia	Filing Company:	Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)		
Product Name:	Anthem Individual Grandfathered: May 1, 2021		
Project Name/Number:	/		

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date	Schedule Item Status	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
11/18/2020	Withdrawn 11/23/2020	Supporting Document	L&H Actuarial Memorandum	11/19/2020	Mem_Prem_by_bendesign_202105.pdf State Form 130B - May 2021.pdf State Form 130B - May 2021.xlsx Actuarial Memo 202105.pdf Supplementary Exhibits 202105.pdf (Superceded) Supplementary Exhibits 202105.xlsx (Superceded)
11/11/2020	Withdrawn 11/23/2020	Supporting Document	L&H Actuarial Memorandum	11/18/2020	Supplementary Exhibits 202105.pdf (Superceded) Supplementary Exhibits 202105.xlsx (Superceded) Mem_Prem_by_bendesign_202105.pdf State Form 130B - May 2021.pdf State Form 130B - May 2021.xlsx Actuarial Memo 202105.pdf