

Western Health Advantage CA Plain-Language Rate Filing Disclosure*

- Premium rates effective: **July 1, 2022 through December 31, 2022**
- New and renewing: **SMALL GROUP** plans.

(1) Justification for any unreasonable rate increase: N/A

(2) Actual Allowed Costs by Aggregate Benefit Category for the most recently completed calendar year in Per Member Per Month (PMPM):

Service Category**	Allowed Cost PMPM	Cost as % of Medicare
Hospital Inpatient		
Hospital Outpatient (including ER)		
Physician/Other Professional Services		
Prescription Drugs	\$75.42	100.0%
Laboratory (other than inpatient)		
Radiology (other than inpatient)		
Capitation (professional)	\$134.82	
Capitation (institutional)	\$223.80	
Capitation (Other)	\$9.95	
Other (OON care, consistent with our URRT definition)	\$25.83	140.0%

(3) Overall annual medical assumptions for all benefits: 4.0%

(4) Amount of Projected Medical Allowed Trend, by Aggregate Benefit Category, Attributable to Use of Services, Price Inflation, Fees and Risk:

Service Category**	Trend Attributable to: Use of Services	Trend Attributable to: Price Inflation	Trend Attributable to: Fees and Risk
Hospital Inpatient			
Hospital Outpatient (including ER)			
Physician/Other Professional Services			
Prescription Drugs	2.3%	5.5%	
Laboratory (other than inpatient)			
Radiology (other than inpatient)			
Capitation (professional)	0.4%	2.8%	
Capitation (institutional)	0.4%	2.8%	
Capitation (other)	0.4%	2.8%	
Other (describe here)	0.4%	2.8%	

(5) Other Information:

Pharmacy claims are net of rebates. Allowed costs listed are EHB-only to tie to Worksheet 1 of the URRT.

*California Health & Safety Code Section 1385.07(d)

**Because the Plan pays a flat, per-member per-month rate (known as "capitation") to its contracted medical groups / IPAs for the vast majority of medical services, the Plan does not have cost data in these categories. The Plan directly pays claims only for out-of-area emergencies and prescription drugs.