

**California Plain-Language Rate Filing Description**

Company Name: Anthem Blue Cross  
 SERFF Tracking Number: AWLP-134011440

1) Justification for any unreasonable rate increases  
*(Include all information as to why the rate increase is justified. Attach supporting documentation.)*

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

Service Category	Allowed Cost PMPM	Cost as % of Medicare
Hospital Inpatient	\$141.82	208.5%
Hospital Outpatient (including ER)	\$149.05	277.8%
Prescription Drug		
Laboratory (other than inpatient)	\$20.67	137.0%
Radiology (other than inpatient)	\$27.29	318.0%
Capitation (professional)		
Capitation (institutional)		
Capitation (other)		
Other (Physician/Other Professional Services)	\$160.42	142.6%
<b>Medical Services</b>	<b>\$499.25</b>	
Rx	\$146.05	96.0%
<b>Medical Services + Rx</b>	<b>\$645.30</b>	

3) Projected Annual Medical Services + Rx trend assumptions for all benefits  
 6.0%

4) Projected Medical Services + Rx 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	Overall Trend
Hospital Inpatient	1.9%	2.8%	0.0%	4.8%
Hospital Outpatient (including ER)	1.9%	2.8%	0.0%	4.8%
Physician/Other Professional Services	1.9%	2.8%	0.0%	4.8%
Laboratory (other than inpatient)	1.9%	2.8%	0.0%	4.8%
Radiology (other than inpatient)	1.9%	2.8%	0.0%	4.8%
Capitation (professional)	0.0%	3.7%	0.0%	3.7%
Capitation (institutional)	0.0%	3.7%	0.0%	3.7%
Capitation (other)	0.0%	0.0%	0.0%	0.0%
Other (describe here)	0.0%	0.0%	0.0%	0.0%
<b>Medical Services</b>	<b>1.8%</b>	<b>2.9%</b>	<b>0.0%</b>	<b>4.7%</b>
Rx	5.9%	6.6%	0.0%	12.8%
<b>Medical Services + Rx</b>	<b>2.4%</b>	<b>3.4%</b>	<b>0.0%</b>	<b>6.0%</b>

5) Other Information  
 Please provide any needed comments below