

California Plain-Language Rate Filing Description

Company Name:

California Physicians' Service dba Blue Shield of California

SERFF Tracking Number:

SERFF Tracking Number cannot be left blank. Please fill out cell C11 on the <Cover-Input Page> Tab.

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	\$125.46	225.4%
Hospital Outpatient (including ER)	\$206.20	482.5%
Prescription Drug	\$157.02	266.5%
Laboratory (other than inpatient)	\$20.63	1323.5%
Radiology (other than inpatient)	\$13.00	302.8%
Capitation (professional)	\$0.00	
Capitation (institutional)	\$0.00	
Capitation (other)	\$21.64	
Other (describe here)	\$21.64	245.7%
Medical Services	\$565.59	
Rx	\$80.69	84.5%
Medical Services + Rx	\$646.28	

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

5.7%

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	-2.0%	3.0%	0.0%	1.0%
Hospital Outpatient (including ER)	2.6%	3.8%	0.0%	6.5%
Physician/Other Professional Services	3.7%	1.6%	0.0%	5.3%
Laboratory (other than inpatient)	2.6%	1.4%	0.0%	4.1%
Radiology (other than inpatient)	2.6%	1.4%	0.0%	4.1%
Capitation (professional)	0.0%	0.0%	0.0%	0.0%
Capitation (institutional)	0.0%	0.0%	0.0%	0.0%
Capitation (other)	0.0%	14.5%	0.0%	14.5%
Other (describe here)	2.6%	1.4%	0.0%	4.1%
Medical Services	2.0%	3.2%	0.0%	5.3%
Rx	2.8%	5.4%	0.0%	8.3%
Medical Services + Rx	2.1%	3.5%	0.0%	5.7%

5) Other Information

Please provide any needed comments below

California Plain-Language Spreadsheet

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	From	To
After Rate Change	01/2024	12/2024
Prior to Rate Change	01/2023	12/2023

For the expense period on which the rates are based, premium attributed to (in percentage):													
Plan Contract Form Numbers (Product Type)	Marketing Names (Product Name)	Enrollee Months Prior to Rate Change	Enrollee Months After Rate Change	Premium PMPM Prior to Rate Change	Premium PMPM After Rate Change	Medical Costs Prior to Rate Change	Medical Costs After Rate Change	*Administrative Costs Prior to Rate Change	*Administrative Costs After Rate Change	Taxes and Fees Prior to Rate Change	Taxes and Fees Prior After Rate Change	After-tax Profit/Margin Prior to Rate Change	After-tax Profit/Margin After Rate Change
	Active Start Plan 35	3,485	3,121	\$821.95	\$950.49	59.1%	67.5%	11.8%	11.3%	2.4%	2.3%	26.7%	18.8%
	Balance Plan 1000	8,986	6,847	\$662.74	\$770.14	80.4%	83.1%	13.6%	12.7%	2.4%	2.3%	3.6%	1.9%
	Balance Plan 1700	6,804	5,350	\$678.20	\$787.19	78.4%	108.6%	13.4%	12.5%	2.4%	2.3%	5.8%	-23.5%
	Balance Plan 2500	37,494	30,510	\$598.74	\$681.71	78.9%	83.9%	14.6%	13.7%	2.4%	2.3%	4.2%	0.1%
	Shield Savings 1800/3600	8,255	5,509	\$638.62	\$748.33	75.6%	91.3%	14.0%	12.9%	2.4%	2.3%	8.1%	-6.6%
	Shield Savings 4000/8000	N/A	N/A	N/A	N/A	N/A	0.0%	N/A	N/A	N/A	N/A	N/A	N/A
	Shield Savings 3500	14,576	11,033	\$586.99	\$664.10	106.1%	111.8%	14.8%	13.9%	2.4%	2.3%	-23.2%	-28.1%
	Shield Savings 5200	9,857	N/A	\$576.50	N/A	99.5%	0.0%	15.0%	N/A	2.4%	N/A	-16.9%	N/A
	Vital Shield Plan 900	4,945	3,906	\$498.11	\$581.17	83.6%	74.4%	16.6%	15.2%	2.4%	2.3%	-2.6%	8.1%
	Vital Shield Plan 2900	8,288	6,661	\$454.43	\$522.95	92.3%	70.4%	17.8%	16.3%	2.4%	2.3%	-12.4%	11.0%
	Vital Shield Plus 900 (Generic Rx)	3,807	2,746	\$495.45	\$550.69	87.7%	50.1%	16.7%	15.7%	2.4%	2.3%	-6.8%	31.9%
	Shield Spectrum PPO Plan 5000	11,618	10,627	\$637.56	\$717.42	74.2%	76.8%	14.0%	13.3%	2.4%	2.3%	9.4%	7.6%
Total		118,115	86,309	\$600.40	\$690.41	83.5%	85.8%	14.6%	13.6%	2.4%	2.3%	-0.4%	-1.7%

*Administrative expenses, i.e., non-claims costs other than taxes and regulatory fees, includes the following:

- (i) Cost containment and quality improvement expenses - § 158.150 and § 158.151.
- (ii) Loss adjustment expenses not classified as a cost containment expense.
- (iii) Direct sales salaries, workforce salaries and benefits.
- (iv) Agent and brokers fees and commissions.
- (v) General and administrative expenses.
- (vi) Community benefit expenditures.
- (vii) Beginning with the 2022 MLR reporting year, prescription drug rebates and other price concessions that are received and retained by an entity providing pharmacy benefit management services to the issuer and are associated with administering the issuer's prescription drug benefits.

Please provide any needed comments below