#### Bronze Metal Level - 40 Year Old Non-Tobacco User

Part				Rating							g Areas/Counties									
AETN-12580475   Armiu-1ife					RA	1		RA 2	R.A	A 3	RA 4	R	A 5	I	RA 6		RA 7			
March   Marc	SERFF ID	Company		Apache	Coconino	Mohave	Navajo	Yavapai	La Paz	Yuma	Maricopa	Gila	Pinal	Pima	Santa Cruz	Cochise	Graham	Greenlee		
March   Marc		A atma Lifa	Min	\$440	\$440	\$440	\$440	\$433	\$426	\$426	\$348	\$348	\$348	\$283	\$283	\$316	\$316	\$316		
Company   Max   S31   S31   S31   S31   S31   S32   S34   S42   S44   S4   4   4   4   4   4   4   4	AETN-132840575		Avg	\$474	\$474	\$474	\$474	\$466	\$458	\$458	\$374	\$374	\$374	\$304	\$304	\$340	\$340	\$340		
March   Marc	71211 1320 10373		Max	\$531	\$531	\$531	\$531	\$522	\$514	\$514	\$419	\$419	\$419	\$341	\$341	\$381	\$381	\$381		
ABTH-132840191 ABTH-1		1 ,	# of Plans	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4		
AFTN-132449519   Harmarine   Mai		Banner Health and	Min	\$440	\$365	\$440	\$440	\$433	\$426	\$426	\$288	\$348	\$288	\$235	\$283	\$316	\$316	\$316		
Part	AETN-132840519		Avg	\$474	\$434	\$474	\$474	\$466	\$458	\$458	\$343	\$374	\$343	\$279	\$304	\$340	\$340	\$340		
BRAZ-132794511   Bluc Cross Blue	71211 1320 1031)		Max	\$531	\$531	\$531	\$531	\$522	\$514	\$514	\$419	\$419	\$419	\$341	\$341	\$381	\$381	\$381		
Part		Company	# of Plans	4	16	4	4	4	4	4	16	4	16	16	4	4	4	4		
			Min	\$381	\$381	\$381	\$381	\$391	\$427	\$427	\$323	\$327	\$327	\$252	\$252	\$304	\$304	\$304		
	BCA7-132794511		Avg	\$408	\$408	\$408	\$408	\$418	\$456	\$456	\$345	\$349	\$349	\$270	\$270	\$325	\$325	\$325		
BCAZ-132842676   Blue Cross Blue   Avg   \$415   \$	BC/122-132774311	Shield of Arizona	Max	\$450	\$450	\$450	\$450	\$461	\$504	\$504	\$381	\$385	\$385	\$298	\$298	\$358	\$358	\$358		
Bright Health			# of Plans	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15		
Section   Sect			Min	\$415	\$415	\$415	\$415	\$425	\$465	\$465	\$351	\$355	\$355	\$274	\$274	\$330	\$330	\$330		
Part	DCA7 122824256	Blue Cross Blue	Avg	\$415	\$415	\$415	\$415	\$426	\$465	\$465	\$352	\$356	\$356	\$275	\$275	\$331	\$331	\$331		
Brigh Health   Arg   Company of Arizona   Max   File   Arg   Section   Arg   Section	BCAZ-132824230	Shield of Arizona	Max	\$416	\$416	\$416	\$416	\$426	\$466	\$466	\$352	\$356	\$356	\$275	\$275	\$331	\$331	\$331		
Bright Health   Avg   Company of Arizona   Avg   Arizona   Avg   Arizona   Avg   Arizona   Avg   Arizona   Avg   Arizona   Avg   Systo   Sys			# of Plans	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2		
BRIP-132821677   Company of Arg		D : 1 . II . 14	Min								\$337			\$275						
Arizona	DDUD 122921667	- C	Avg								\$337			\$275						
BRHP-132849474   Bright Health Insurance Ins	DKIII -132821007		Max								\$337			\$275						
Bright Health   Surject Health   Surje		THE OTHER	# of Plans								1			1						
BRHP-132849474		D : 1 . II . 14	Min	\$562	\$562	\$562	\$562	\$563	\$574	\$574	\$306	\$496	\$496	\$250	\$250	\$493	\$493	\$493		
Company	DDUD 122940474	_	Avg	\$596	\$596	\$596	\$596	\$596	\$608	\$608	\$324	\$525	\$525	\$265	\$265	\$522	\$522	\$522		
CCGH-132805248   Cigna Health and   Safe	DKHT-132049474		Max	\$613	\$613	\$613	\$613	\$614	\$626	\$626	\$334	\$541	\$541	\$273	\$273	\$537	\$537	\$537		
Cigna Health and Life Insurance Company   Max   S433   S434   S		Company	# of Plans	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3		
CCGH-132805248   Life Insurance Company   Asis   S433   S433   S433   S435		G' II 14 1	Min	\$361	\$361	\$361	\$361	\$361	\$361	\$361	\$280	\$298	\$298	\$232	\$232	\$276	\$276	\$276		
Company	CCCH 122905249	J	Avg	\$433	\$433	\$433	\$433	\$433	\$433	\$433	\$337	\$359	\$359	\$279	\$279	\$332	\$332	\$332		
HUMA-132855809 Humana Health Humana Insurance Company  Max  S493	CCG11-132803248		Max	\$512	\$512	\$512	\$512	\$512	\$512	\$512	\$398	\$423	\$423	\$330	\$330	\$392	\$392	\$392		
Humana Health Plan Inc.    Max   S793   S793   S793   S793   S794   S764			# of Plans	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8		
HUMA-132855809 Plan Inc.    Max   S793   S793   S793   S793   S794   S794   S740   S463   S581   S581   S380   S380   S687   S687   S687     Humana Insurance Company   Max   S821   S82			Min	\$709		\$709	\$709	\$567	\$661	\$661	\$414	\$520	\$520	\$340	\$340	\$614	\$614	\$614		
Plan Inc.   Max   \$793   \$793   \$793   \$634   \$740   \$740   \$463   \$581   \$581   \$380   \$380   \$687   \$68	HTIM A_132855800	Humana Health	Avg	\$764		\$764	\$764	\$611	\$713	\$713	\$446	\$560	\$560	\$366	\$366	\$662	\$662	\$662		
HUMA-132855882 Humana Insurance	110MA-132833809	Plan Inc.	Max	\$793		\$793	\$793	\$634	\$740	\$740	\$463	\$581	\$581	\$380	\$380	\$687	\$687	\$687		
HUMA-132855822 Humana Insurance Company Max S21 S21 S21 S21 S22 S22 S22 S36 S379 S379 S685 S685 S685 S685 S685 S685 S685 S685			# of Plans	3		3	3	3	3	3	3	3	3	3	3	3	3	3		
HUMA-132855882   Company   Max   S821			Min	\$733	\$733	\$733	\$733	\$587	\$684	\$684	\$428	\$538	\$538	\$351	\$351	\$635	\$635	\$635		
Company   Max   S821	HTIM A_132855882	Humana Insurance	Avg	\$791	\$791	\$791	\$791	\$633	\$738	\$738	\$462	\$580	\$580	\$379	\$379	\$685	\$685	\$685		
UnitedHealthcare Insurance Company	110WA-132833882	Company	Max	\$821	\$821	\$821	\$821	\$656	\$766	\$766	\$479	\$602	\$602	\$393	\$393	\$711	\$711	\$711		
UHLC-132820311 UnitedHealthcare Insurance Company Max S543 S543 S543 S543 S543 S543 S543 S543			# of Plans	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3		
UHLC-132820311 Insurance Company   S520   S520   S520   S520   S520   S520   S520   S495   S557   S557   S394   S401   S401   S401   S405   S325   S385   S3		11	Min	\$493	\$493	\$493	\$493	\$470	\$529	\$529	\$361	\$367	\$367	\$309	\$309	\$366	\$366	\$366		
Company Max \$543 \$543 \$543 \$543 \$543 \$543 \$543 \$543	UHLC-132820311		Avg	\$520	\$520	\$520	\$520	\$495	\$557	\$557	\$394	\$401	\$401	\$325	\$325	\$385	\$385	\$385		
UHLC-132799654   Min S418   S4	C11EC-132020311		Max	\$543	\$543	\$543	\$543	\$517	\$582	\$582	\$417	\$424	\$424	\$340	\$340	\$403	\$403	\$403		
UHLC-132799654 UnitedHealthcare of Arizona, Inc.    Max   \$467   \$467   \$467   \$467   \$445   \$501   \$501   \$501   \$355   \$362   \$362   \$292   \$292   \$346		1 7	# of Plans	7	7	7	7	7	7	7	8	8	8	7	7	7	7	7		
WMIC-132840214 of Arizona, Inc. Max			Min	\$418	\$418	\$418	\$418	\$398	\$448	\$448	\$320	\$326	\$326	\$261	\$261	\$310	\$310	\$310		
WMIC-132840214 WMI Mutual Insurance Company Max \$515 \$515 \$515 \$515 \$515 \$515 \$515 \$51	UHLC-132799654		Avg	\$467	\$467	\$467	\$467	\$445	\$501	\$501	\$355	\$362	\$362	\$292	\$292	\$346	\$346	\$346		
WMIC-132840214 WMI Mutual Insurance Company Max \$515 \$515 \$515 \$515 \$515 \$515 \$515 \$51	011LC-132/99034	of Arizona, Inc.	Max	\$517	\$517	\$517	\$517	\$492	\$554	\$554	\$396	\$403	\$403	\$323	\$323	\$383	\$383	\$383		
WMIC-132840214 WMI Mutual Insurance Company Max \$515 \$515 \$515 \$515 \$515 \$515 \$515 \$51			# of Plans	9	9	9	9	9	9	9	10	10	10	9	9	9	9	9		
WMIC-132840214 Insurance Company Max \$515 \$515 \$515 \$515 \$515 \$515 \$515 \$51		WD (C.) (	Min	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515		
Company Max \$515 \$515 \$515 \$515 \$515 \$515 \$515 \$51	WMIC-122840214		Avg	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515		
	WWW132040214		Max	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515	\$515		
		F>	# of Plans	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1		

Notes: Premium rates may increase each calendar quarter and may vary due to rounding. Refer to rates on file for additional detail.

Based on information contained in the System for Electronic Rate and Form Filing (SERFF).

The minimum premium is the lowest possible for all plans associated with the SERFF ID and within the given metal level and county, the maximum premium is the highest possible premium. The average premium is calculated by averaging all plan IDs associated with the SERFF ID and within each metal level and county.

Silver Metal Level - 40 Year Old Non-Tobacco User

| Segre  |  |                    | Silver Metal Level - 40 Year Old Non-Tobacco User  Rating Areas/Counties |         |           |         |         |         |         |           |       |         |         |       |       |         |  
   
   
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| Art 12340556 Art 164 A   | SERFF ID   | Company            |  | Apache  |           |         | Navaio  |         |         |           |       |         |         |       |       | Cochise |  
   
   
  | Greenlee   |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Mathematicular   |  |                    | Min  |         |           |         |         |         |         |           |       |         |         |       |       |         |  
   
   
  | \$412      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Alth-112840356 Arban Health, Inc.  |  |                    |  |         | \$574     |         |         |         | \$556   |           |       | \$454   |         |       | \$369 |         | \$412  
   
   
  | \$412      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| No.  | AETN-132840556  AETN-132840521  AETN-132840575  AETN-132840528  AETN-132840519  AETN-132840560  BCAZ-132794511  BCAZ-132824256  BRHP-132821667  BRHP-132821667  CCGH-132835312  HUMA-132855809 | Aetna Health, Inc. | _  |         |           |         |         |         |         |           |       |         |         |       |       |         |  
   
   
  | \$412      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Act  |  |                    |  | ***     | 1         |         |         |         |         |           |       | , .     |         |       |       |         | Graham           \$412           \$412           \$412           \$412           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$36           \$379           \$436           9           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$386           \$413           4           \$543           \$543           \$543           \$713           \$738           \$815           \$1,265           \$11   
   
   
  | 1          |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Action-12260424 [Action-12260424] Actio  |  |                    |  |         | \$571     | -       |         |         |         |           |       | \$452   |         |       |       | 1       |  
   
   
  | \$410      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| March 112840052    Company   Serifical   1.0   |  | Aetna Health       |  | *       |           |         |         | ***     |         | , , , , , |       |         |         | *     |       |         | , .  
   
   
  | \$410      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Action   A   | AETN-132840521   |                    | _  |         |           |         |         |         |         |           |       |         |         |       |       |         |  
   
   
  | \$410      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| AETN-132840575   Archu Life   Archu Sale   S   |  | Company            |  |         |           |         |         | *       |         | , , , , , |       | , .     |         | *     |       |         | , ,  
   
   
  | 1          |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Action 1.15  |  |                    |  |         |           | •       |         |         |         |           |       |         |         |       |       |         |  
   
   
  | \$336      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| AETN-132640578   Sammer Company   Sammer Aero   Sammer Aer   |  | Aetna Life         |  |         |           | ' ' '   |         |         |         |           | *     |         |         |       |       |         | , , , , ,  
   
   
  | \$379      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Acthor   14  | AETN-132840575   |                    | _  |         |           |         |         | **      |         |           |       |         |         |       |       |         | , , , , ,  
   
   
  | \$436      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Actinal Life   |  | Company            |  |         |           |         |         |         |         |           |       |         |         |       |       | 1       |  
   
   
  | 9          |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Action   |  |                    |  |         |           | -       |         |         |         | _         |       |         |         | -     |       |         | -  
   
   
  | \$373      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| AFTN-132840528   Company   |  | Aetna Life         |  |         |           |         |         |         |         |           | -     |         |         |       |       |         |  
   
   
  | \$373      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Banner Health and   Mis   1848   1848   5486   54   | AETN-132840528   | Insurance          | _  |         |           |         |         | **      |         | , , , , , | -     |         |         | *     |       |         | , , , , ,  
   
   
  | \$373      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| AETN-132840519    AETH Feath and   Mai   Sale   S   |  | Company            |  |         |           |         |         |         |         |           |       |         |         |       |       |         |   
   
   
   | 1          |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
   |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  
   |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| AETN-132840161 AETN-  |  | D ** 1:            |  |         | •         | _       |         |         |         |           |       | •       |         |       |       |         | see         Graham         G           2         \$412           2         \$412           2         \$412           2         \$410           3         \$410           4         \$410           5         \$336           9         \$379           6         \$436           9         \$336           8         \$373           3         \$373           3         \$373           4         \$346           9         \$436           9         \$436           9         \$412           2         \$412           2         \$412           2         \$412           2         \$412           2         \$412           2         \$412           2         \$412           2         \$412           3         \$386           3         \$343           4         \$304           3         \$543           3         \$543           3         \$543           3         \$713           4         \$   
   
   
   | \$336      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
   |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  
   |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| March   Marc   |  |                    |  |         |           | ' ' '   |         |         |         |           |       |         |         |       |       | 1       |  
   
   
  | \$336      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Company   Software   Part   Software   Part   Software   Part   | AETN-132840519   |                    | _  |         |           |         |         | **      |         |           |       |         |         |       |       |         |   
   
   
   |            |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
   |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  
   |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| AETN-132840560   Banner Health and Act   S574   S74   S74   S755   S556  |  |                    |  |         |           |         |         |         |         |           |       |         |         |       |       | 1       |  
   
   
  | \$436<br>9 |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| March Health and Actm Health Health Actm Health Actm Health Heal   |  | 1 7                |  |         |           | -       |         |         | _       |           |       |         |         |       |       |         |  
   
   
  | \$412      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| AETN-132840560   Aetn Health Plan   Inc.   |  | Banner Health and  |  |         |           |         |         | *****   |         |           |       |         |         |       |       | ,       |  
   
   
  | ,          |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Beach   Beac   | AETN-132840560   | Aetna Health Plan  | _  |         |           |         |         |         |         |           |       |         |         |       |       |         |  
   
   
  | \$412      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| BCAZ-132794511  Blue Cross Blue Avg S481 A881 A891 A893 Avg S481 A891 Avg S481 A   |  | Inc.               |  | ***     |           | 1       |         | *       |         | , , , , , |       | , .     |         | *     |       |         | ,  
   
   
  | \$412      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Blue Cross Blue   Avg   S481   S481   S481   S481   S491   S493   S538   S538   S497   S412   S412   S418   S418   S438   S43  |  |                    |  |         |           |         |         |         |         |           |       |         |         |       |       |         |  
   
   
  | 1          |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Shield of Arizona   Max   S571   S571   S571   S581   S582   S639   S639   S639   S483   S489   S489   S378   S378   S455   S4   |  |                    |  | *       | , , , , , | 1       |         | *       |         | '         | *     |         |         |       |       |         |  
   
   
  | \$316      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| BCAZ-132824256 Blue Cross Blue   | BCAZ-132794511   |                    | _  |         |           |         |         |         |         |           |       |         |         |       |       |         |  
   
   
  | \$383      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| BRHP-132842456   Blue Cross Blue   Min   S439   S439   S439   S439   S439   S450   S492   S492   S372   S376   S376   S290   S290   S350   S35   |  | Shield of Arizona  | Max  |         |           |         |         |         |         |           |       |         |         |       |       |         |  
   
   
  | \$455      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Billing Cross Blue   Avg   S484   S444   S   |  |                    | # of Plans   |         |           | -       |         |         |         |           |       |         |         |       |       |         |  
   
   
  | 39         |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Shield of Arizona  |  |                    |  |         |           | 1       |         |         |         |           | ***   |         |         |       |       | 1       |  
   
   
  | \$350      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Bright Health Company of Arizona  Bright Health Company  Bright Health Company of Arizona  Bright Health Company of Arizona  Bright Health Company  Bright Hea   | BCAZ-132824256   |                    | Avg  |         |           | ' '     |         |         |         | 1 .       |       |         |         | *     |       | *       | , , , , ,  
   
   
  | \$386      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| BRHP-132821667 Company of Arizona  Min S592 Max Arizona  Min S592 Max Max H of Plans  Min S592 Max Arizona  Min S592 Max Max S643 Max Max S643 Max Max S670  |  | Shield of Arizona  | Max  | \$518   | \$518     | \$518   |         | \$531   |         | \$580     | \$439 | -       |         |       |       | \$413   | \$413  
   
   
  | \$413      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Bright Health   Avg   Company of Arizona   Bright Health   Avg   Soft  |  |                    | # of Plans   | 4       | 4         | 4       | 4       | 4       | 4       | 4         |       | 4       | 4       |       | 5     | 4       | 4  
   
   
  | 4          |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| BRHP-132821667   Company of Arizona   Max Arizona   Min S592   S592   S592   S592   S592   S592   S592   S593   S593   S593   S593   S593   S593   S594   S586   S566   S566   S566   S566   S567   S567   S567   S568  |  | Bright Health      | Min  |         |           |         |         |         |         |           |       |         |         |       |       |         |   
   
   
   |            |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
   |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  
   |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |    
  |       |       |       |       |       |
| Arizona   Max   H of Plans   H  | BRHP-132821667   |                    | Avg  |         |           |         |         |         |         |           | \$348 |         |         | \$284 |       |         |   
   
   
   |            |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
   |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  
   |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| BRHP-132849474   Min Soy   |  | * *                | Max  |         |           |         |         |         |         |           | \$348 |         |         | \$284 |       |         |  
   
   
  |            |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
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   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| BRHP-132849474    Bright Health Insurance Company  |  |                    | # of Plans   |         |           |         |         |         |         |           | 1     |         |         | -     |       |         | Graham           \$412           \$412           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$336           \$379           \$436           9           \$436           9           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$383           \$455           39           \$350           \$386           \$413           4           \$543           \$543           \$543           \$713           \$744           \$762           10           \$738           \$12           \$388           \$12           \$381           \$473           \$44 <tr <="" td=""><td></td></tr> <tr><td>BRHP-132849474   Insurance Company   Max   S643   S643   S643   S643   S643   S643   S656   S650   S650   S591   S591   S598   S586   S564   S564   S564   S684   S684   S684   S684   S684   S685   S591   S591   S598   S598   S598   S587   S588   S589   S</td><td></td><td>Bright Health</td><td>Min</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>\$518</td><td>\$518</td></tr> <tr><td>  Company</td><td>BRHP-132849474</td><td>C</td><td>Avg</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td></td><td>\$564</td></tr> <tr><td>CCGH-132805248   Cigna Health and Life Insurance Company</td><td></td><td></td><td>Max</td><td>\$670</td><td>\$670</td><td></td><td></td><td>\$671</td><td>\$684</td><td>\$684</td><td>\$365</td><td>\$591</td><td></td><td>\$298</td><td>\$298</td><td>\$587</td><td>\$587</td><td>\$587</td></tr> <tr><td>CCGH-132805248   Cigna Health and Life Insurance Company   Max   S617   S617  </td><td></td><td></td><td># of Plans</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>Graham           \$412           \$412           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$336           \$379           \$436           9           \$436           9           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$383           \$455           39           \$350           \$386           \$413           4           \$518           \$564           \$587           12           \$304           \$381           \$473           \$44           \$713           \$744           \$72           \$10           \$738           \$10           \$11           \$388</td><td>12</td></tr> <tr><td>CCGH-132805248 Life Insurance Company  Max S617 S617 S617 S617 S617 S617 S617 S617</td><td></td><td>Ciona Health and</td><td>Min</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td></td><td>\$304</td></tr> <tr><td>Company    Max   S617   S617  </td><td>CCGH-132805248</td><td>_</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td></td><td>\$381</td></tr> <tr><td>CCGH-132835312    Cigna HealthCare of Arizona, Inc.   Max   S732   S732   S732   S732   S732   S732   S735   S706   S706   S553   S555   S555   S426   S426   S543   S544   S545   S555   S555   S426   S426   S426   S543   S544   S445   S445</td><td></td><td></td><td>Max</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>\$473</td></tr> <tr><td>CCGH-132835312</td><td></td><td></td><td># of Plans</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>-</td><td></td><td>14</td></tr> <tr><td>Of Arizona, Inc.    Max   S732   S732   S732   S732   S732   S735   S706   S706   S553   S555   S426   S426   S543   S543     # of Plans   2   2   2   2   2   2   2   2   2  </td><td></td><td></td><td>Min</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td>\$543</td><td>\$543</td></tr> <tr><td>HUMA-132855809  Humana Insurance Company  Max S732 S732 S732 S732 S732 S732 S732 S732</td><td>CCGH-132835312</td><td>_</td><td>Avg</td><td>\$732</td><td>\$732</td><td></td><td>\$732</td><td>\$775</td><td>\$706</td><td>\$706</td><td>\$553</td><td>\$555</td><td></td><td>\$426</td><td>\$426</td><td>\$543</td><td>\$543</td><td>\$543</td></tr> <tr><td>HUMA-132855809  Humana Health Plan Inc.  Min S823 S823 S823 S828 S829 S859 S859 S859 S859 S859 S859 S859 S85</td><td> 10200012</td><td>of Arizona, Inc.</td><td>Max</td><td>\$732</td><td>\$732</td><td>\$732</td><td>\$732</td><td>\$775</td><td>\$706</td><td>\$706</td><td>\$553</td><td>\$555</td><td></td><td>\$426</td><td>\$426</td><td>\$543</td><td>\$543</td><td>\$543</td></tr> <tr><td>HUMA-132855809 Humana Health Plan Inc.    Humana Health Plan Inc.   Max   \$859   \$859   \$859   \$859   \$859   \$870   \$870   \$821   \$821   \$514   \$645   \$645   \$421   \$412   \$744</td><td></td><td></td><td># of Plans</td><td>2</td><td>2</td><td>2</td><td>2</td><td>2</td><td>2</td><td>2</td><td>2</td><td>2</td><td></td><td>2</td><td>2</td><td>1</td><td>1</td><td>1</td></tr> <tr><td>HUMA-13285809 Plan Inc.    Max   \$879   \$879   \$879   \$879   \$703   \$821   \$821   \$514   \$645   \$645   \$421   \$421   \$762   \$762    </td><td rowspan="3">HUMA-132855809</td><td></td><td>Min</td><td>\$823</td><td></td><td>\$823</td><td>\$823</td><td>\$658</td><td>\$768</td><td>\$768</td><td>\$481</td><td>\$603</td><td>\$603</td><td>\$394</td><td>\$394</td><td>\$713</td><td>\$713</td><td>\$713</td></tr> <tr><td>HUMA-132855882    Plan Inc.   Max   \$879   \$879   \$879   \$703   \$821   \$821   \$514   \$645   \$645   \$421   \$421   \$762   \$762   \$762    </td><td></td><td>Avg</td><td>\$859</td><td></td><td>\$859</td><td>\$859</td><td>\$687</td><td>\$802</td><td>\$802</td><td>\$502</td><td>\$630</td><td>\$630</td><td>\$412</td><td>\$412</td><td>\$744</td><td>\$744</td><td>\$744</td></tr> <tr><td>HUMA-132855882 Humana Insurance Company Min S851 S851 S851 S851 S851 S851 S851 S851</td><td>Plan Inc.</td><td>Max</td><td>\$879</td><td></td><td>\$879</td><td>\$879</td><td>\$703</td><td>\$821</td><td>\$821</td><td>\$514</td><td>\$645</td><td>\$645</td><td>\$421</td><td>\$421</td><td>\$762</td><td>\$762</td><td>\$762</td></tr> <tr><td>HUMA-132855882 Humana Insurance Company Max \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,168 \$1,363 \$1,363 \$878 \$878 \$870 \$1,071 \$1,071 \$700 \$700 \$1,265 \$1,</td><td></td><td></td><td># of Plans</td><td>10</td><td></td><td>10</td><td>10</td><td>10</td><td>10</td><td>10</td><td>10</td><td>10</td><td>10</td><td>10</td><td>10</td><td>10</td><td>10</td><td>10</td></tr> <tr><td>HUMA-132855882 Company Max \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,168 \$1,363 \$1,363 \$853 \$1,071 \$1,071 \$700 \$700 \$1,265 \$1</td><td></td><td></td><td>Min</td><td>\$851</td><td>\$851</td><td>\$851</td><td>\$851</td><td>\$681</td><td>\$795</td><td>\$795</td><td>\$497</td><td>\$624</td><td>\$624</td><td>\$408</td><td>\$408</td><td>\$738</td><td>\$738</td><td>\$738</td></tr> <tr><td>Company Max \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,168 \$1,363 \$1,363 \$1,363 \$1,071 \$1,071 \$700 \$700 \$1,265 \$</td><td>HIIM 4-122855882</td><td>Humana Insurance</td><td>Avg</td><td>\$941</td><td>\$941</td><td>\$941</td><td>\$941</td><td>\$753</td><td>\$878</td><td>\$878</td><td>\$550</td><td>\$690</td><td>\$690</td><td>\$451</td><td>\$451</td><td>\$815</td><td>\$815</td><td>\$815</td></tr> <tr><td>UnitedHealthcare Min \$524 \$524 \$524 \$524 \$499 \$562 \$562 \$396 \$403 \$403 \$275 \$275 \$388 \$388 UnitedHealthcare</td><td>1101VIA-132033002</td><td>Company</td><td>Max</td><td>\$1,460</td><td>\$1,460</td><td>\$1,460</td><td>\$1,460</td><td>\$1,168</td><td>\$1,363</td><td>\$1,363</td><td>\$853</td><td>\$1,071</td><td>\$1,071</td><td>\$700</td><td>\$700</td><td>\$1,265</td><td>\$1,265</td><td>\$1,265</td></tr> <tr><td>UnitedHealthcare</td><td></td><td></td><td># of Plans</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td><td>11</td></tr> <tr><td><math>\Lambda_{1/2}</math>   <math>\Psi 572</math>   <math>\Psi 573</math>   <math>\Psi 573</math>   <math>\Psi 573</math>   <math>\Psi 573</math>   <math>\Psi 615</math>   <math>\Psi </math></td><td></td><td>**</td><td>Min</td><td>\$524</td><td>\$524</td><td>\$524</td><td>\$524</td><td>\$499</td><td>\$562</td><td>\$562</td><td>\$396</td><td>\$403</td><td>\$403</td><td>\$275</td><td>\$275</td><td>\$388</td><td>\$388</td><td>\$388</td></tr> <tr><td>HHI C-132820311 Incurance Avg 3575  </td><td>IIII C 122020211</td><td></td><td>Avg</td><td>\$573</td><td>\$573</td><td>\$573</td><td>\$573</td><td>\$546</td><td>\$615</td><td>\$615</td><td>\$437</td><td>\$445</td><td>\$445</td><td>\$317</td><td>\$317</td><td>\$425</td><td>\$425</td><td>\$425</td></tr> |            | BRHP-132849474   Insurance Company   Max   S643   S643   S643   S643   S643   S643   S656   S650   S650   S591   S591   S598   S586   S564   S564   S564   S684   S684   S684   S684   S684   S685   S591   S591   S598   S598   S598   S587   S588   S589   S |  | Bright Health | Min |  |  |  |  |  |  |  |  |  |  |  |  |  | \$518 | \$518 | Company | BRHP-132849474 | C | Avg |  |  |  |  |  |  |  |  |  |  |  |  | 1 |  | \$564 | CCGH-132805248   Cigna Health and Life Insurance Company |  |  | Max | \$670 | \$670 |  |  | \$671 | \$684 | \$684 | \$365 | \$591 |  | \$298 | \$298 | \$587 | \$587 | \$587 | CCGH-132805248   Cigna Health and Life Insurance Company   Max   S617   S617 |  |  | # of Plans |  |  |  |  |  |  |  |  |  |  |  |  |  | Graham           \$412           \$412           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$336           \$379           \$436           9           \$436           9           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$383           \$455           39           \$350           \$386           \$413           4           \$518           \$564           \$587           12           \$304           \$381           \$473           \$44           \$713           \$744           \$72           \$10           \$738           \$10           \$11           \$388 | 12 | CCGH-132805248 Life Insurance Company  Max S617 S617 S617 S617 S617 S617 S617 S617 |  | Ciona Health and | Min |  |  |  |  |  |  |  |  |  |  |  |  | 1 |  | \$304 | Company    Max   S617   S617 | CCGH-132805248 | _ |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |  | \$381 | CCGH-132835312    Cigna HealthCare of Arizona, Inc.   Max   S732   S732   S732   S732   S732   S732   S735   S706   S706   S553   S555   S555   S426   S426   S543   S544   S545   S555   S555   S426   S426   S426   S543   S544   S445   S445 |  |  | Max |  |  |  |  |  |  |  |  |  |  |  |  |  |  | \$473 | CCGH-132835312 |  |  | # of Plans |  |  |  |  |  |  |  |  |  |  |  |  | - |  | 14 | Of Arizona, Inc.    Max   S732   S732   S732   S732   S732   S735   S706   S706   S553   S555   S426   S426   S543   S543     # of Plans   2   2   2   2   2   2   2   2   2 |  |  | Min |  |  |  |  |  |  |  |  |  |  |  |  | 1 | \$543 | \$543 | HUMA-132855809  Humana Insurance Company  Max S732 S732 S732 S732 S732 S732 S732 S732 | CCGH-132835312 | _ | Avg | \$732 | \$732 |  | \$732 | \$775 | \$706 | \$706 | \$553 | \$555 |  | \$426 | \$426 | \$543 | \$543 | \$543 | HUMA-132855809  Humana Health Plan Inc.  Min S823 S823 S823 S828 S829 S859 S859 S859 S859 S859 S859 S859 S85 | 10200012 | of Arizona, Inc. | Max | \$732 | \$732 | \$732 | \$732 | \$775 | \$706 | \$706 | \$553 | \$555 |  | \$426 | \$426 | \$543 | \$543 | \$543 | HUMA-132855809 Humana Health Plan Inc.    Humana Health Plan Inc.   Max   \$859   \$859   \$859   \$859   \$859   \$870   \$870   \$821   \$821   \$514   \$645   \$645   \$421   \$412   \$744 |  |  | # of Plans | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |  | 2 | 2 | 1 | 1 | 1 | HUMA-13285809 Plan Inc.    Max   \$879   \$879   \$879   \$879   \$703   \$821   \$821   \$514   \$645   \$645   \$421   \$421   \$762   \$762 | HUMA-132855809 |  | Min | \$823 |  | \$823 | \$823 | \$658 | \$768 | \$768 | \$481 | \$603 | \$603 | \$394 | \$394 | \$713 | \$713 | \$713 | HUMA-132855882    Plan Inc.   Max   \$879   \$879   \$879   \$703   \$821   \$821   \$514   \$645   \$645   \$421   \$421   \$762   \$762   \$762 |  | Avg | \$859 |  | \$859 | \$859 | \$687 | \$802 | \$802 | \$502 | \$630 | \$630 | \$412 | \$412 | \$744 | \$744 | \$744 | HUMA-132855882 Humana Insurance Company Min S851 S851 S851 S851 S851 S851 S851 S851 | Plan Inc. | Max | \$879 |  | \$879 | \$879 | \$703 | \$821 | \$821 | \$514 | \$645 | \$645 | \$421 | \$421 | \$762 | \$762 | \$762 | HUMA-132855882 Humana Insurance Company Max \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,168 \$1,363 \$1,363 \$878 \$878 \$870 \$1,071 \$1,071 \$700 \$700 \$1,265 \$1, |  |  | # of Plans | 10 |  | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | HUMA-132855882 Company Max \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,168 \$1,363 \$1,363 \$853 \$1,071 \$1,071 \$700 \$700 \$1,265 \$1 |  |  | Min | \$851 | \$851 | \$851 | \$851 | \$681 | \$795 | \$795 | \$497 | \$624 | \$624 | \$408 | \$408 | \$738 | \$738 | \$738 | Company Max \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,168 \$1,363 \$1,363 \$1,363 \$1,071 \$1,071 \$700 \$700 \$1,265 \$ | HIIM 4-122855882 | Humana Insurance | Avg | \$941 | \$941 | \$941 | \$941 | \$753 | \$878 | \$878 | \$550 | \$690 | \$690 | \$451 | \$451 | \$815 | \$815 | \$815 | UnitedHealthcare Min \$524 \$524 \$524 \$524 \$499 \$562 \$562 \$396 \$403 \$403 \$275 \$275 \$388 \$388 UnitedHealthcare | 1101VIA-132033002 | Company | Max | \$1,460 | \$1,460 | \$1,460 | \$1,460 | \$1,168 | \$1,363 | \$1,363 | \$853 | \$1,071 | \$1,071 | \$700 | \$700 | \$1,265 | \$1,265 | \$1,265 | UnitedHealthcare |  |  | # of Plans | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | $\Lambda_{1/2}$   $\Psi 572$   $\Psi 573$   $\Psi 573$   $\Psi 573$   $\Psi 573$   $\Psi 615$   $\Psi $ |  | ** | Min | \$524 | \$524 | \$524 | \$524 | \$499 | \$562 | \$562 | \$396 | \$403 | \$403 | \$275 | \$275 | \$388 | \$388 | \$388 | HHI C-132820311 Incurance Avg 3575   3575 | IIII C 122020211 |  | Avg | \$573 | \$573 | \$573 | \$573 | \$546 | \$615 | \$615 | \$437 | \$445 | \$445 | \$317 | \$317 | \$425 | \$425 | \$425 |
|  |  |                    |  |         |           |         |         |         |         |           |       |         |         |       |       |         |  
   
   
  |            |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| BRHP-132849474   Insurance Company   Max   S643   S643   S643   S643   S643   S643   S656   S650   S650   S591   S591   S598   S586   S564   S564   S564   S684   S684   S684   S684   S684   S685   S591   S591   S598   S598   S598   S587   S588   S589   S   |  | Bright Health      | Min  |         |           |         |         |         |         |           |       |         |         |       |       |         | \$518  
   
   
  | \$518      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       | 
     |       |       |       |       |       |       |       |       |       |
| Company  | BRHP-132849474   | C                  | Avg  |         |           |         |         |         |         |           |       |         |         |       |       | 1       |  
   
   
  | \$564      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| CCGH-132805248   Cigna Health and Life Insurance Company   |  |                    | Max  | \$670   | \$670     |         |         | \$671   | \$684   | \$684     | \$365 | \$591   |         | \$298 | \$298 | \$587   | \$587  
   
   
  | \$587      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| CCGH-132805248   Cigna Health and Life Insurance Company   Max   S617  |  |                    | # of Plans   |         |           |         |         |         |         |           |       |         |         |       |       |         | Graham           \$412           \$412           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$410           \$336           \$379           \$436           9           \$436           9           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$412           \$383           \$455           39           \$350           \$386           \$413           4           \$518           \$564           \$587           12           \$304           \$381           \$473           \$44           \$713           \$744           \$72           \$10           \$738           \$10           \$11           \$388  
   
   
  | 12         |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |   
  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| CCGH-132805248 Life Insurance Company  Max S617 S617 S617 S617 S617 S617 S617 S617   |  | Ciona Health and   | Min  |         |           |         |         |         |         |           |       |         |         |       |       | 1       |  
   
   
  | \$304      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Company    Max   S617   | CCGH-132805248   | _                  |  |         |           |         |         |         |         |           |       |         |         |       |       | 1       |   
   
   
   | \$381      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
   |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  
   |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| CCGH-132835312    Cigna HealthCare of Arizona, Inc.   Max   S732   S732   S732   S732   S732   S732   S735   S706   S706   S553   S555   S555   S426   S426   S543   S544   S545   S555   S555   S426   S426   S426   S543   S544   S445  |  |                    | Max  |         |           |         |         |         |         |           |       |         |         |       |       |         |   
   
   
   | \$473      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
   |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  
   |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |      
|       |       |       |       |       |       |       |
| CCGH-132835312   |  |                    | # of Plans   |         |           |         |         |         |         |           |       |         |         |       |       | -       |  
   
   
  | 14         |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Of Arizona, Inc.    Max   S732   S732   S732   S732   S732   S735   S706   S706   S553   S555   S426   S426   S543   S543     # of Plans   2   2   2   2   2   2   2   2   2   |  |                    | Min  |         |           |         |         |         |         |           |       |         |         |       |       | 1       | \$543  
   
   
  | \$543      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HUMA-132855809  Humana Insurance Company  Max S732 S732 S732 S732 S732 S732 S732 S732  | CCGH-132835312   | _                  | Avg  | \$732   | \$732     |         | \$732   | \$775   | \$706   | \$706     | \$553 | \$555   |         | \$426 | \$426 | \$543   | \$543  
   
   
  | \$543      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HUMA-132855809  Humana Health Plan Inc.  Min S823 S823 S823 S828 S829 S859 S859 S859 S859 S859 S859 S859 S85   | 10200012   | of Arizona, Inc.   | Max  | \$732   | \$732     | \$732   | \$732   | \$775   | \$706   | \$706     | \$553 | \$555   |         | \$426 | \$426 | \$543   | \$543  
   
   
  | \$543      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HUMA-132855809 Humana Health Plan Inc.    Humana Health Plan Inc.   Max   \$859   \$859   \$859   \$859   \$859   \$870   \$870   \$821   \$821   \$514   \$645   \$645   \$421   \$412   \$744  |  |                    | # of Plans   | 2       | 2         | 2       | 2       | 2       | 2       | 2         | 2     | 2       |         | 2     | 2     | 1       | 1  
   
   
  | 1          |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HUMA-13285809 Plan Inc.    Max   \$879   \$879   \$879   \$879   \$703   \$821   \$821   \$514   \$645   \$645   \$421   \$421   \$762   \$762   | HUMA-132855809   |                    | Min  | \$823   |           | \$823   | \$823   | \$658   | \$768   | \$768     | \$481 | \$603   | \$603   | \$394 | \$394 | \$713   | \$713  
   
   
  | \$713      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HUMA-132855882    Plan Inc.   Max   \$879   \$879   \$879   \$703   \$821   \$821   \$514   \$645   \$645   \$421   \$421   \$762   \$762   \$762  |  |                    | Avg  | \$859   |           | \$859   | \$859   | \$687   | \$802   | \$802     | \$502 | \$630   | \$630   | \$412 | \$412 | \$744   | \$744  
   
   
  | \$744      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HUMA-132855882 Humana Insurance Company Min S851 S851 S851 S851 S851 S851 S851 S851  |  | Plan Inc.          | Max  | \$879   |           | \$879   | \$879   | \$703   | \$821   | \$821     | \$514 | \$645   | \$645   | \$421 | \$421 | \$762   | \$762  
   
   
  | \$762      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HUMA-132855882 Humana Insurance Company Max \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,168 \$1,363 \$1,363 \$878 \$878 \$870 \$1,071 \$1,071 \$700 \$700 \$1,265 \$1,   |  |                    | # of Plans   | 10      |           | 10      | 10      | 10      | 10      | 10        | 10    | 10      | 10      | 10    | 10    | 10      | 10   
   
   
  | 10         |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HUMA-132855882 Company Max \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,168 \$1,363 \$1,363 \$853 \$1,071 \$1,071 \$700 \$700 \$1,265 \$1   |  |                    | Min  | \$851   | \$851     | \$851   | \$851   | \$681   | \$795   | \$795     | \$497 | \$624   | \$624   | \$408 | \$408 | \$738   | \$738  
   
   
  | \$738      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Company Max \$1,460 \$1,460 \$1,460 \$1,460 \$1,460 \$1,168 \$1,363 \$1,363 \$1,363 \$1,071 \$1,071 \$700 \$700 \$1,265 \$   | HIIM 4-122855882   | Humana Insurance   | Avg  | \$941   | \$941     | \$941   | \$941   | \$753   | \$878   | \$878     | \$550 | \$690   | \$690   | \$451 | \$451 | \$815   | \$815  
   
   
  | \$815      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| UnitedHealthcare Min \$524 \$524 \$524 \$524 \$499 \$562 \$562 \$396 \$403 \$403 \$275 \$275 \$388 \$388 UnitedHealthcare  | 1101VIA-132033002  | Company            | Max  | \$1,460 | \$1,460   | \$1,460 | \$1,460 | \$1,168 | \$1,363 | \$1,363   | \$853 | \$1,071 | \$1,071 | \$700 | \$700 | \$1,265 | \$1,265  
   
   
  | \$1,265    |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| UnitedHealthcare   |  |                    | # of Plans   | 11      | 11        | 11      | 11      | 11      | 11      | 11        | 11    | 11      | 11      | 11    | 11    | 11      | 11   
   
   
  | 11         |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| $\Lambda_{1/2}$   $\Psi 572$   $\Psi 573$   $\Psi 573$   $\Psi 573$   $\Psi 573$   $\Psi 615$   $\Psi $ |  | **                 | Min  | \$524   | \$524     | \$524   | \$524   | \$499   | \$562   | \$562     | \$396 | \$403   | \$403   | \$275 | \$275 | \$388   | \$388   
   
   
   | \$388      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
   |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  
   |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HHI C-132820311 Incurance Avg 3575    | IIII C 122020211   |                    | Avg  | \$573   | \$573     | \$573   | \$573   | \$546   | \$615   | \$615     | \$437 | \$445   | \$445   | \$317 | \$317 | \$425   | \$425  
   
   
  | \$425      |  |  |               |     |  |  |  |  |  |  |  |  |  |  |  |  |  |       |       |         |                |   |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |  |  |     |       |       |  |  |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
  |    |  |  |                  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |  |                |   |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |       |   |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |                |  |  |            |  |  |  |  |  |  |  |  |  |  |  |  |   |  |    |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |   |       |       |   |                |   |     |       |       |  |       |       |       |       |       |       |  |       |       |       |       |       |  |          |                  |     |       |       |       |       |       |       |       |       |       |  |       |       |       |       |       |   |  |  |            |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |  |                |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |  |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |   |           |     |       |  |       |       |       |       |       |       |       |       |       |       |       |       |       |  
   |  |  |            |    |  |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |                  |                  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |                   |         |     |         |         |         |         |         |         |         |       |         |         |       |       |         |         |         |                  |  |  |            |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  |  |    |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   
   |                  |  |     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |

U11LC-13202U311	Company	Max	\$656	\$656	\$656	\$656	\$625	\$703	\$703	\$503	\$512	\$512	\$349	\$349	\$486	\$486	\$486
		# of Plans	18	18	18	18	18	18	18	19	19	19	16	16	18	18	18
		Min	\$439	\$439	\$439	\$439	\$419	\$471	\$471	\$337	\$343	\$343	\$328	\$328	\$326	\$326	\$326
UHLC-132799654	UnitedHealthcare	Avg	\$507	\$507	\$507	\$507	\$483	\$544	\$544	\$387	\$394	\$394	\$359	\$359	\$376	\$376	\$376
OHEC-132777034	of Arizona, Inc.	Max	\$558	\$558	\$558	\$558	\$532	\$599	\$599	\$428	\$436	\$436	\$410	\$410	\$414	\$414	\$414
		# of Plans	16	16	16	16	16	16	16	17	17	17	18	18	16	16	16

Notes: Premium rates may increase each calendar quarter and may vary due to rounding. Refer to rates on file for additional detail.

Based on information contained in the System for Electronic Rate and Form Filing (SERFF).

The minimum premium is the lowest possible for all plans associated with the SERFF ID and within the given metal level and county, the maximum premium is the highest possible premium.

The average premium is calculated by averaging all plan IDs associated with the SERFF ID and within each metal level and county.

#### Gold Metal Level - 40 Year Old Non-Tobacco User

			Rating Areas/Counties														
				RA	1		RA 2	R.A	A 3	RA 4	R	A 5	I	RA 6		RA 7	
SERFF ID	Company		Apache	Coconino	Mohave	Navajo	Yavapai	La Paz	Yuma	Maricopa	Gila	Pinal	Pima	Santa Cruz	Cochise	Graham	Greenlee
		Min	\$588	\$588	\$588	\$588	\$578	\$569	\$569	\$464	\$464	\$464	\$378	\$378	\$422	\$422	\$422
AETN-132840575	Aetna Life Insurance	Avg	\$663	\$663	\$663	\$663	\$652	\$642	\$642	\$524	\$524	\$524	\$426	\$426	\$476	\$476	\$476
AE1N-1320403/3	Company	Max	\$760	\$760	\$760	\$760	\$748	\$736	\$736	\$601	\$601	\$601	\$489	\$489	\$546	\$546	\$546
	Company	# of Plans	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9
	Banner Health and	Min	\$588	\$488	\$588	\$588	\$578	\$569	\$569	\$386	\$464	\$386	\$314	\$378	\$422	\$422	\$422
AETN-132840519	Aetna Health	Avg	\$663	\$608	\$663	\$663	\$652	\$642	\$642	\$480	\$524	\$480	\$391	\$426	\$476	\$476	\$476
AE1N-132640319	Insurance	Max	\$760	\$760	\$760	\$760	\$748	\$736	\$736	\$601	\$601	\$601	\$489	\$489	\$546	\$546	\$546
	Company	# of Plans	9	36	9	9	9	9	9	36	9	36	36	9	9	9	9
		Min	\$485	\$485	\$485	\$485	\$498	\$543	\$543	\$411	\$415	\$415	\$321	\$321	\$386	\$386	\$386
BCAZ-132794511	Blue Cross Blue	Avg	\$548	\$548	\$548	\$548	\$562	\$613	\$613	\$464	\$469	\$469	\$362	\$362	\$436	\$436	\$436
BCAZ-132/74311	Shield of Arizona	Max	\$643	\$643	\$643	\$643	\$659	\$720	\$720	\$545	\$551	\$551	\$425	\$425	\$512	\$512	\$512
		# of Plans	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24
		Min	\$512	\$512	\$512	\$512	\$525	\$573	\$573	\$434	\$438	\$438	\$339	\$339	\$408	\$408	\$408
BCAZ-132824256	Blue Cross Blue	Avg	\$532	\$532	\$532	\$532	\$546	\$596	\$596	\$451	\$456	\$456	\$352	\$352	\$424	\$424	\$424
BCAZ-132024230	Shield of Arizona	Max	\$553	\$553	\$553	\$553	\$567	\$619	\$619	\$468	\$473	\$473	\$366	\$366	\$440	\$440	\$440
		# of Plans	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
	Bright Health	Min								\$402			\$329				
BRHP-132821667	Company of	Avg								\$402			\$329				
51411 152021007	Arizona	Max								\$402			\$329				
		# of Plans								1			1				
	Bright Health	Min	\$711	\$711	\$711	\$711	\$711	\$725	\$725	\$387	\$627	\$627	\$316	\$316	\$623	\$623	\$623
BRHP-132849474	Insurance	Avg	\$761	\$761	\$761	\$761	\$761	\$776	\$776	\$414	\$671	\$671	\$339	\$339	\$667	\$667	\$667
	Company	Max	\$878	\$878	\$878	\$878	\$878	\$895	\$895	\$478	\$774	\$774	\$391	\$391	\$769	\$769	\$769
		# of Plans	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20
	Cigna Health and Life Insurance	Min	\$491	\$491	\$491	\$491	\$491	\$491	\$491	\$381	\$406	\$406	\$316	\$316	\$376	\$376	\$376
CCGH-132805248		Avg	\$562	\$562	\$562	\$562	\$562	\$562	\$562	\$437	\$465	\$465	\$362	\$362	\$431	\$431	\$431
	Company	Max	\$637	\$637	\$637	\$637	\$637	\$637	\$637	\$495	\$526	\$526	\$410	\$410	\$488	\$488	\$488
		# of Plans	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
		Min	\$921		\$921	\$921	\$737	\$860	\$860	\$538	\$676	\$676	\$441	\$441	\$798	\$798	\$798
HUMA-132855809	Humana Health	Avg	\$998		\$998	\$998	\$799	\$932	\$932	\$580	\$732	\$732	\$476	\$476	\$865	\$865	\$865
	Plan Inc.	Max	\$1,064		\$1,064	\$1,064	\$851	\$993	\$993	\$622	\$780	\$780	\$510	\$510	\$922	\$922	\$922
		# of Plans	13	00.52	13	13	13	13	13	14	13	13	14	14	13	13	13
	11 1	Min	\$953	\$953	\$953	\$953	\$763	\$890	\$890	\$557	\$699	\$699	\$457	\$457	\$826	\$826	\$826
HUMA-132855882	Humana Insurance	Avg	\$1,033	\$1,033	\$1,033	\$1,033	\$826	\$964	\$964	\$603	\$758	\$758	\$495	\$495	\$895	\$895	\$895
	Company	Max	\$1,101	\$1,101	\$1,101	\$1,101	\$881	\$1,028	\$1,028	\$643	\$807	\$807	\$528	\$528	\$954	\$954	\$954
		# of Plans	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13
	UnitedHealthcare	Min	\$608	\$608	\$608	\$608	\$579 \$600	\$652 \$686	\$652	\$443	\$450 \$405	\$450 \$405	\$380	\$380	\$451	\$451	\$451
UHLC-132820311	Insurance	Avg	\$639	\$639	\$639	\$639	\$609	\$686	\$686	\$486	\$495	\$495	\$400	\$400	\$874	\$874	\$874
	Company	Max	\$688	\$688	\$688	\$688	\$655	\$737	\$737	\$527	\$537	\$537	\$430	\$430	\$510	\$510	\$510
		# of Plans	11	11	11	11	11	11	11	12	12	12	11	11	11	11	11
	United Health	Min	\$517 \$590	\$517 \$590	\$517	\$517	\$493 \$552	\$554 \$622	\$554	\$391	\$398	\$398	\$323	\$323	\$383	\$383	\$383
UHLC-132799654	UnitedHealthcare of Arizona, Inc.	Avg	\$580 \$619	\$580 \$619	\$580	\$580	\$552 \$580	\$622 \$663	\$622	\$435 \$474	\$443	\$443	\$363	\$363	\$430	\$430	\$430
	or mizona, me.	Max	\$618	\$618	\$618	\$618	\$589	\$663	\$663	\$474	\$483	\$483	\$387	\$387	\$459	\$459	\$459
	1	# of Plans	5	5	5	5	5	5	5	7	7	7	5	5	5	5	5

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#### Platinum Metal Level - 40 Year Old Non-Tobacco User

			Rating Areas/Counties														
				RA	1		RA 2	R.A	A 3	RA 4	R	A 5	F	RA 6		RA 7	
SERFF ID	Company		Apache	Coconino	Mohave	Navajo	Yavapai	La Paz	Yuma	Maricopa	Gila	Pinal	Pima	Santa Cruz	Cochise	Graham	Greenlee
		Min	\$597	\$597	\$597	\$597	\$612	\$668	\$668	\$506	\$511	\$511	\$395	\$395	\$475	\$475	\$475
BCAZ-132794511	Blue Cross Blue	Avg	\$695	\$695	\$695	\$695	\$713	\$778	\$778	\$589	\$595	\$595	\$460	\$460	\$554	\$554	\$554
BCAL-132/)4311	Shield of Arizona	Max	\$831	\$831	\$831	\$831	\$852	\$931	\$931	\$704	\$712	\$712	\$550	\$550	\$662	\$662	\$662
		# of Plans	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9
	D: 14 H 14	Min								\$495			\$405				
BRHP-132821667	Bright Health Company of	Avg								\$495			\$405				
BKIII -132021007	Arizona	Max								\$495			\$405				
		# of Plans								1			1				
	D: -1-4 II141-	Min	\$914	\$914	\$914	\$914	\$914	\$932	\$932	\$497	\$806	\$806	\$407	\$407	\$801	\$801	\$801
BRHP-132849474	Bright Health Insurance	Avg	\$951	\$951	\$951	\$951	\$952	\$970	\$970	\$518	\$839	\$839	\$423	\$423	\$834	\$834	\$834
BKH -132047474	Company	Max	\$1,006	\$1,006	\$1,006	\$1,006	\$1,006	\$1,026	\$1,026	\$547	\$887	\$887	\$448	\$448	\$881	\$881	\$881
	1 7	# of Plans	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
	C: II14h 1	Min	\$637	\$637	\$637	\$637	\$637	\$637	\$637	\$495	\$526	\$526	\$410	\$410	\$488	\$488	\$488
CCGH-132805248	Cigna Health and Life Insurance	Avg	\$723	\$723	\$723	\$723	\$723	\$723	\$723	\$562	\$598	\$598	\$466	\$466	\$554	\$554	\$554
CCGII-132003240	Company	Max	\$815	\$815	\$815	\$815	\$815	\$815	\$815	\$633	\$674	\$674	\$525	\$525	\$624	\$624	\$624
	1 7	# of Plans	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
	UnitedHealthcare	Min	\$761	\$761	\$761	\$761	\$725	\$816	\$816	\$583	\$594	\$594	\$476	\$476	\$564	\$564	\$564
UHLC-132820311	Insurance	Avg	\$761	\$761	\$761	\$761	\$725	\$816	\$816	\$583	\$594	\$594	\$476	\$476	\$564	\$564	\$564
C11LC-132020311	Company	Max	\$761	\$761	\$761	\$761	\$725	\$816	\$816	\$583	\$594	\$594	\$476	\$476	\$564	\$564	\$564
	1 ,	# of Plans	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1

Notes: Premium rates may increase each calendar quarter and may vary due to rounding. Refer to rates on file for additional detail.

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