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# City of Boston

*PEC Meeting – February 9, 2021*

## **Non-Medicare Plans Medical/Rx Rates – Effective July 1, 2021**

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- FY 2022 Projected Working Rates
- FY 2022 Projected Working Rate Calculation
  - BCBS Standard HMO
  - AllWays Value HMO
  - BCBS PPO

# Introduction

## PEC Agreement

- Per the PEC Agreement, effective July 1, 2021, the City will offer the following three non-Medicare plans: Standard Network HMO, Value Network HMO, and PPO.
  - The plan changes included in the PEC Agreement are indicated below in **red text**:

	BCBS Standard HMO Plan	AllWays Value HMO Plan	BCBS PPO Plan	
Medical Provider Network	Standard	Value*	Standard	
Medical Deductible	\$100 member / \$200 family	\$0	<u>In-Network</u> \$250 member / \$500 family	<u>Out-of-Network</u> \$350 member / \$875 family
Specialist Office Visit	\$35 copay	\$30 copay	\$35 copay	
Inpatient Hospital (maximum 1 per member per year)	\$100 copay	\$50 copay	\$100 copay	
Outpatient Hospital (maximum 1 per member per year)	\$100 copay	\$50 copay	\$100 copay	
Advanced Imaging (maximum 1 per member per year)	\$100 copay	\$50 copay	\$100 copay	
Employee/Retiree Premium Share**	20.5% (increased from 20%)	20.5% (increased from 20%)	30.5% (increased from 30%)	

### \* Value Provider Network

- The objective is to limit the provider network to high quality/high performance/lower cost providers.
- AllWays has indicated that its Value HMO network captures approximately 95% of the City's utilization in the current AllWays standard network HMO.

\*\* The 0.5% increase in the employee/retiree premium share accounts for a significant portion of the proposed increases in the employee/retiree rates for the HMO plans.

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# Introduction

## *Non-Medicare Plans RFP*

The City conducted an RFP for its non-Medicare plans for a July 1, 2021 effective date. We note the following results of the RFP process:

- Selected Plans
  - Standard HMO Plan – Blue Cross Blue Shield of Massachusetts (BCBS) will replace Harvard Pilgrim Health Care (HPHC) in providing this HMO plan.
  - Value HMO Plan – AllWays Health Partners will be providing this HMO plan which has a customized network that is a subset of its standard HMO network.
  - PPO Plan – BCBS will continue to provide this plan.
- Savings from the RFP that lower working rates
  - Standard HMO projections reflect over \$9 million in anticipated medical claims and prescription drug savings resulting from the move to BCBS from HPHC.
  - PPO projections reflect \$150,000 in savings due to a lower administrative fee.
  - Value HMO projections reflect \$2.5 million in anticipated medical claims savings due to the implementation of the Value network and due to a lower administrative fee.
  - Overall, the projections reflect approximately \$12 million in savings which equates to total rate savings of 3%.

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# Introduction

## *Rating Approach*

### **Composite Rate increases**

- Currently, the working rates for each plan are heavily influenced by the actual claims experience of the individuals enrolled in each plan.
  - As the PPO is the only option for out of area retirees, rates for this plan are higher than the relative value of the PPO plan in relation to the HMO plans.
- To offset some of this adverse selection, the City moved in the direction of composite rate increases for July 1, 2017 (AllWays HMO was fully insured) and began using composite rate increases effective July 1, 2018.
- While the City's decision to employ composite rate increases has helped mitigate the growth of this excess rate differential, the issue still remains.

### **Plan Design Weighted Rate Increases**

- The proposed July 1, 2021 rates are set to reflect more closely the differences between the plan designs of the three plans, as opposed to the actual claims experience of the City members in each plan.
- The proposed rates are realigned to achieve the same individual to family rate ratio for all three plans.
- These rates show a decrease in the BCBS PPO rates and slight increases for the BCBS Standard HMO and AllWays Value HMO rates.
  - Regardless of the asymmetric rate movement, Segal believes that the price difference between the PPO and HMOs will still encourage enrollment in the HMOs.

# Introduction

## *Trust Fund*

- The Trust was created to fund the payment of claims and expenses for the City's self-funded health plans.
  - Trust Fund reserves are separated into categories:
    - Incurred But Not Reported (IBNR) Reserve = to account for the time lag from when services occur and when the claims are paid.
    - Target Reserve = to protect the health plan from the risk of unexpected unfavorable claims experience. The City's policy is to maintain reserves equal to 5% to 15% of total expenses.
    - Surplus Reserve = reserve in excess of the IBNR reserve and the target reserve of 10% (mid-point of the City's policy).
- The Reserve Maintenance Plan's current objective is to spend down the Surplus Reserves responsibly over time to avoid creating additional rate instability.
  - To spend down the surplus, the City non-Medicare plans' working rates have been set lower than projected costs.

Historic Rate Changes	7/1/2017*	7/1/2018	7/1/2019	7/1/2020	7/1/2021
Composite Rate Change	8.2%	4.4%	5.1%	7.6%	3.0%
Composite Rate Change with Surplus Spend	6.4%	2.5%	1.8%	4.6%	N/A – Rate change varies by plan
Surplus Spend Target	\$6,000,000	\$7,000,000	\$12,000,000	\$11,000,000	\$14,000,000

\* As noted, July 1, 2017 rates were not set on a "pure" composite basis, but are being shown as such for comparison purposes.

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# Introduction

## *Important Notes*

- The projections in this report are estimates of future costs and are based on information available to Segal at the time the projections were made. Segal has not audited the information provided. Projections are not a guarantee of future results. Actual experience may differ due to, but not limited to, such variables as changes in the regulatory environment (e.g., the Affordable Care Act or other legislation), local market pressure, health trend rates and claims volatility. The accuracy and reliability of health projections decrease as the projection period increases.
- The projections do not reflect the potential impact of any future changes due to health care reform legislation, other than those previously adopted.
- Generally, we suggest plans consider applying a claims fluctuation margin to projected self-funded incurred costs when developing working rates or maintaining a reserve approximately equal to 5% of total projected incurred costs. The City's target reserve levels satisfy this recommendation.
- The projection of the retiree costs takes into account only the dollar value of providing benefits for current retirees during the period referred to in the projection. It does not reflect the present value of any future retiree benefits for active, disabled or terminated employees during a period other than that which is referred to in the projection, nor does it reflect any anticipated increase in the number of those eligible for retiree benefits, or any changes that may occur in the nature of benefits over time.
- The Coronavirus (COVID-19) pandemic is rapidly evolving and will likely impact the 2021 US economy and health plan claim projections for most Health Plan Sponsors. As a result, projections could be significantly altered by emerging events. At this point, it is unclear what the impact will be for Health Plan Sponsors. The potential for federal or state fiscal relief is also not contemplated in these projections. Given the high level of uncertainty and fluidity of the current events, some plans may seek periodic updated estimates throughout the year to closely monitor health plan projections this year.
- Due to continued uncertainty with the COVID-19 pandemic, the City may want to consider maintaining greater reserves than typically targeted.

# Trust Fund Reserve Maintenance

## Multi-Year Plan – All Plans in the Trust

Plan as of January 2021 (\$ presented in millions)

	Actuals - Trust Fund Reports			Projections*						
	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
1. Premium Revenue	\$368.27	\$415.42	\$414.73	\$430.43	\$422.35	\$455.08	\$487.79	\$523.61	\$561.71	\$604.21
2. Estimated Interest Revenue	\$1.28	\$2.74	\$1.51	\$1.72	\$1.70	\$1.62	\$1.51	\$1.44	\$1.39	\$1.39
3. Projected Total Expenses (Claims, Premium, Admin)	-\$344.73	-\$417.18	-\$396.42	-\$430.21	-\$437.34	-\$466.75	-\$498.16	-\$531.70	-\$567.52	-\$605.77
4. Targeted Reserve Change				-\$3.38	-\$0.71	-\$2.95	-\$3.14	-\$3.35	-\$3.58	-\$3.83
<b>5. Projected Net Impact on Assets</b>	<b>\$24.82</b>	<b>\$0.98</b>	<b>\$19.82</b>	<b>-\$1.44</b>	<b>-\$14.00</b>	<b>-\$13.00</b>	<b>-\$12.00</b>	<b>-\$10.00</b>	<b>-\$8.00</b>	<b>-\$4.00</b>
<u>Catastrophic Claims Reserve</u>										
6. Reserve Assets at Fiscal Year End	\$81.91	\$82.89	\$102.71	\$101.27	\$90.65	\$78.36	\$69.31	\$62.45	\$57.80	\$57.38
7. Targeted Reserve Change				\$3.38	\$0.71	\$2.95	\$3.14	\$3.35	\$3.58	\$3.83
8. Adjusted Reserve Assets at Fiscal Year End	\$81.91	\$82.89	\$102.71	\$104.65	\$91.36	\$81.31	\$72.45	\$65.80	\$61.38	\$61.21
9. Target Reserve	\$34.47	\$41.72	\$39.64	\$43.02	\$43.73	\$46.68	\$49.82	\$53.17	\$56.75	\$60.58
<b>10. Target Reserve Position: Surplus (Shortfall)</b>	<b>\$47.44</b>	<b>\$41.17</b>	<b>\$63.07</b>	<b>\$61.63</b>	<b>\$47.63</b>	<b>\$34.63</b>	<b>\$22.63</b>	<b>\$12.63</b>	<b>\$4.63</b>	<b>\$0.63</b>
11. Estimated Composite Premium Increase Indications					-1.9%	7.7%	7.2%	7.3%	7.3%	7.6%

\* Includes the fully insured prescription drug component (PDP) of the HPHC Medicare Enhance, BCBS Medex, and Tufts Medicare Supplement Plans.

### Notes

- (1) Premium Revenue = Estimated to cover projected expenses and steadily decrease reserve to target by FY 2027 without creating significant premium increases
- (2) Estimated Interest Revenue = Assumes interest on average reserve assets based on 3-year historic results adjusted to minimize influence of the spike in FY 2019
- (3) Projected Total Expenses = Assumes combined 7.0% annual increase
- (4) and (7) Targeted Reserve Change = Adjustment to fund and maintain the Target Reserve equal to 10% of annual Total Expenses
- (5) Net Impact on Assets = Net increase or decrease to Reserve Assets (6)
- (6) Reserve Assets at Fiscal Year End = Total Assets less IBNR and represent previous year's Adjusted Reserve Assets (8) plus the current year's Projected Net Impact on Assets (5)
- (8) Adjusted Reserve Assets at Fiscal Year End = Reserve Assets at Fiscal Year End (6) plus the Targeted Reserve Change (7)
- (9) Target Reserve = Represents the mid-point (10%) of the City's policy is to maintain reserves of 5% to 15% of the annual Projected Total Expense (3)
- (10) Target Reserve Position = Adjusted Reserve Assets at Fiscal Year End (8) less Target Reserve (9)
- (11) Estimated Composite Premium Increase = assumes a combined 7% annual cost increase and the premium adjustments to steadily decrease reserves

**Goal:**  
**Target Reserve**  
**Position = \$0**

# Trust Fund Reserve Maintenance

## *Multi-Year Plan – Non-Medicare Plans (Excludes Medicare Plans)*

### Projected Rate Impact on Non-Medicare Plans

*(\$ presented in millions)*

	Projections						
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028
Required Premium	\$392.13	\$419.58	\$448.95	\$480.38	\$514.01	\$549.99	\$588.49
<b>Reserve Spend</b>	<b>-\$14.00</b>	<b>-\$13.00</b>	<b>-\$12.00</b>	<b>-\$10.00</b>	<b>-\$8.00</b>	<b>-\$4.00</b>	<b>\$0.00</b>
Premium Revenue	\$378.13	\$406.58	\$436.95	\$470.38	\$506.01	\$545.99	\$588.49
Change in Premium Revenue	-0.7%	7.5%	7.5%	7.7%	7.6%	7.9%	7.8%

#### Notes:

Based on December 2020 enrollment as reported by the carriers.

Premium Revenue for FY 2021 estimated at \$380.65 million based on current rates and December enrollment.

Required Premium assumes a combined 7.0% annual increase in expenses.

Exhibit reflects the estimated premium rate changes if the surplus is only spent on the non-Medicare plans.

Exhibit reflects estimated savings associated with the FY2021-25 collective bargaining agreement.

Exhibit reflects estimated savings associated with the results of the Non-Medicare RFP for the plans effective July 1, 2021.



# FY 2022 Projected Working Rates

## 100% Premium Rates

### 100% MONTHLY PREMIUM

Plan	Coverage Tier	Current Enrollment	FY 2021 Current Rates	FY 2022								
				Projected Cost		Composite Rate Change			Proposed Rates with \$14 Million Surplus Spend			
				Rates	% Change	Plan Ratio	Rates	% Change	Plan Ratio	Rates	% Change	
BCBS Standard HMO	Individual	6,518	\$891.15	\$903.60	1.4%	1.00	\$918.03	3.0%	1.00	\$908.73	2.0%	
	Family	7,658	\$2,399.15	\$2,432.66			\$2,471.52			\$2,407.85	0.4%	
AllWays Value HMO	Individual	1,997	\$742.95	\$732.80	-1.4%	0.83	\$765.36		3.0%	0.83	\$754.00	1.5%
	Family	1,394	\$1,969.50	\$1,942.61			\$2,028.91				\$1,998.83	1.5%
BCBS PPO	Individual	1,186	\$1,369.33	\$1,649.28	20.4%	1.54	\$1,410.64	3.0%		1.25	\$1,135.90	-17.0%
	Family	499	\$3,380.00	\$4,071.01			\$3,481.96				\$3,010.03	-10.9%

### Notes

- “Proposed Rates with \$14 Million Surplus Spend” assume \$14 million in Trust Fund surplus will be used to offset rates.
- Proposed Rates have been developed to reflect more closely the differences between the plan designs of the three plans, as opposed to the actual claims experience of the City members in each plan.
- Subscriber enrollment as of December 2020 as reported by the carriers.
- Plan Ratios are based on the difference between each plan's individual tier rates.
- Proposed rates have been adjusted for the City’s system requirement that the member share be divisible by 13.

# FY 2022 Projected Working Rates

## *Employee/Retiree Premium Share*

### EMPLOYEE MONTHLY PREMIUM SHARE

Plan	Coverage Tier	Employee Share (%)		FY 2021 Current EE Share	FY 2022							
		FY2021	FY2022		Projected Cost		Composite Rate Change			Proposed Rates with \$14 Million Surplus Spend		
					EE Share	\$ Change	Plan Ratio	EE Share	\$ Change	Plan Ratio	EE Share	\$ Change
BCBS Standard HMO	Individual	20.0%	20.5%	\$178.23	\$185.24	\$7.01	1.00	\$188.20	\$9.97	1.00	\$186.29	\$8.06
	Family			\$479.83	\$498.70	\$18.87		\$506.66	\$26.83		\$493.61	\$13.78
AllWays Value HMO	Individual	20.0%	20.5%	\$148.59	\$150.22	\$1.63	0.83	\$156.90	\$8.31	0.83	\$154.57	\$5.98
	Family			\$393.90	\$398.24	\$4.34		\$415.93	\$22.03		\$409.76	\$15.86
BCBS PPO	Individual	30.0%	30.5%	\$410.80	\$503.03	\$92.23	2.29	\$430.25	\$19.45	1.86	\$346.45	-\$64.35
	Family			\$1,014.00	\$1,241.66	\$227.66		\$1,062.00	\$48.00		\$918.06	-\$95.94

### Notes

- “Proposed Rates with \$14 Million Surplus Spend” assume \$14 million in Trust Fund surplus will be used to offset rates.
- Proposed Rates have been developed to reflect more closely the differences between the plan designs of the three plans, as opposed to the actual claims experience of the City members in each plan.
- "Employee Monthly Premium Share" refers to both the employee and retiree shares of the working rate.
- Plan Ratios are based on the difference between each plan's individual tier rates.
- Proposed rates have been adjusted for the City’s system requirement that the member share be divisible by 13.

# FY 2022 Projected Working Rates

## *Employee/Retiree Premium Share Breakdown*

- The below exhibit breaks down the monthly employee share change into the contributing factors:
  - PEC agreement employee share increase
  - Cost change
  - Surplus spend & rate allocation

### EMPLOYEE MONTHLY PREMIUM SHARE BREAKDOWN

Plan	Coverage Tier	Current Enrollment	Proposed Employee Monthly Rate Change Breakdown			
			PEC Agreement Increase in Ee Share*	Cost Change Component*	Surplus Spend and Rate Allocation Change	Total Change
BCBS Standard HMO	Individual	6,518	\$4.42	\$5.38	-\$1.74	\$8.06
	Family	7,658	\$11.92	\$14.47	-\$12.61	\$13.78
AllWays Value HMO	Individual	1,997	\$3.69	\$4.48	-\$2.19	\$5.98
	Family	1,394	\$9.78	\$11.88	-\$5.80	\$15.86
BCBS PPO	Individual	1,186	\$6.80	\$12.39	-\$83.54	-\$64.35
	Family	499	\$16.79	\$30.59	-\$143.32	-\$95.94

\* Based on projected composite rates

# FY 2022 Projected Working Rate Calculation

## BCBS Standard HMO Plan

	Medical	Prescription Drug	Total
Incurred Claims (YE 9/30/20, Paid to 11/30/20)	\$207,078,241	\$49,688,656	
Completion Factor <sup>1</sup>	1.0079	1.0000	
Estimated Incurred Claims	\$208,722,361	\$49,688,656	
High Cost Claimant Adjustment <sup>2</sup>	<u>(\$5,500,000)</u>		
Net Estimated Incurred Claims	\$203,222,361	\$49,688,656	
Member Months	393,725	393,725	
Per Member Per Month (PMPM)	\$516.15	\$126.20	
Plan Change Factor <sup>3</sup>	0.983	0.980	
COVID-19 Adjustment <sup>4</sup>	1.100	1.000	
Move to BCBS From HPHC Adjustment <sup>5</sup>	0.968	1.000	
Annual Trend Assumption	7.0%	7.5%	
Trend Adjustment	1.126	1.135	
PMPM Projected Claim Cost	\$607.80	\$140.37	
Assumed Members	32,541	32,541	
Total Projected Claim Cost	\$237,341,285	\$54,813,134	\$292,154,000
Estimated Rebates (City's 100% share) <sup>6</sup>			(\$13,414,000)
Administrative Expense <sup>7</sup>			\$7,548,000
Other Program Expenses <sup>8</sup>			\$6,074,000
ACA PCORI Fee			\$80,000
Target Reserve Adjustment <sup>9</sup>			\$1,785,000
<b>FY 2022 Projected Incurred Expenses</b>			<b>\$294,227,000</b>
<b>Current FY 2021 Working Rate Premium <sup>10</sup></b>			<b>\$290,174,000</b>
<b>FY 2022 Segal Est. Required Rate Change</b>			<b>1.4%</b>

Notes:

1. Adjustment to reflect claims incurred during the experience period ended September 30, 2020 and not paid as of November 30, 2020.
2. Adjustment to remove higher than typical large claimant experience that is assumed not to reoccur.
3. Reflects the plan changes negotiated in the PEC agreement effective July 1, 2020 and July 1, 2021. Prescription drug factor also reflects HPHC's estimate for savings from improved PBM contractual pricing terms with OptumRx effective January 1, 2020.
4. Estimated adjustment to normalize months in the experience period impacted by COVID-19.
5. Reflects the anticipated medical discount savings from the move from HPHC to BCBS effective July 1, 2021.
6. Estimated rebates based on actual through September 2020 (as provided by HPHC), the results of the RFP analysis, and projected rebates provided by HPHC and BCBS.
7. Reflects the BCBS PPO and Standard HMO administrative fee resulting from the RFP process.
8. Based on billing statement amounts through June 2020 as provided by the City. Includes various costs such as risk sharing, DM, fitness reimbursements, and the MA pediatric immunization program assessment, etc.
9. Adjustment to maintain target reserves of 10% of projected total costs.
10. Reflects both the City and employee/retiree share of the working rates and is based on enrollment as of December 2020 as reported by HPHC.

# FY 2022 Projected Working Rate Calculation

## *AllWays Value HMO Plan*

	Medical	Prescription Drug	Total
Incurred Claims (YE 9/30/20, Paid to 11/30/20)	\$30,981,684	\$9,006,429	
Completion Factor <sup>1</sup>	1.0282	1.0000	
Estimated Incurred Claims	\$31,854,216	\$9,006,429	
Member Months	73,749	73,749	
Per Member Per Month (PMPM)	\$431.93	\$122.12	
Plan Change Factor <sup>2</sup>	0.999	0.990	
COVID-19 Adjustment <sup>3</sup>	1.120	1.000	
Value Network Adjustment <sup>4</sup>	0.950	1.000	
Annual Trend Assumption	6.5%	7.5%	
Trend Adjustment	1.117	1.135	
PMPM Projected Claim Cost	\$512.59	\$137.20	
Assumed Members	6,352	6,352	
Total Projected Claim Cost	\$39,071,995	\$10,457,635	\$49,530,000
Estimated Rebates (City's 100% share) <sup>5</sup>			(\$1,942,000)
Administrative Expense <sup>6</sup>			\$1,953,000
State Assessments (including, Uncompensated Care Pool)			\$218,000
ACA PCORI Fees			\$16,000
Target Reserve Adjustment <sup>7</sup>			\$282,000
<b>FY 2022 Projected Incurred Expenses</b>			<b>\$50,057,000</b>
<b>Current FY 2021 Working Rate Premium <sup>8</sup></b>			<b>\$50,750,000</b>
<b>FY 2022 Segal Est. Required Rate Change</b>			<b>-1.4%</b>

### Notes:

1. Adjustment to reflect claims incurred during the experience period ended September 30, 2020 and not paid as of November 30, 2020.
2. Reflects the plan changes negotiated in the PEC agreement effective July 1, 2020.
3. Estimated adjustment to normalize months in the experience period impacted by COVID-19.
4. Reflects the estimated savings associated with moving to the Value Network. AllWays indicated it expects 5% savings from its standard network.
5. Based on rebates through September 2020 as reported by AllWays.
6. Reflects the AllWays Value Network HMO administrative fee resulting from the RFP process.
7. Adjustment to maintain target reserves of 10% of projected total costs.
8. Reflects both the City and employee/retiree share of the working rates and is based on enrollment as of December 2020 as reported by AllWays.

# FY 2022 Projected Working Rate Calculation

## BCBS PPO Plan

	Medical	Prescription Drug	Total
Incurred Claims (YE 9/30/20, Paid to 11/30/20)	\$31,768,267	\$7,624,130	
Completion Factor <sup>1</sup>	1.0180	1.0000	
Estimated Incurred Claims	\$32,340,096	\$7,624,130	
Member Months	34,464	34,464	
Per Member Per Month (PMPM)	\$938.37	\$221.22	
Plan Change Factor <sup>2</sup>	0.961	0.983	
COVID-19 Adjustment <sup>3</sup>	1.120	1.000	
Prescription Drug Pricing Adjustment <sup>4</sup>	1.000	1.200	
Annual Trend Assumption	7.0%	7.5%	
Trend Adjustment	1.126	1.135	
PMPM Projected Claim Cost	\$1,136.80	\$296.29	
Assumed Members	2,849	2,849	
Total Projected Claim Cost	\$38,865,016	\$10,129,594	\$48,995,000
Estimated Rebates (City's 100% share) <sup>4</sup>			(\$2,360,000)
Administrative Expense <sup>5</sup>			\$897,000
ACA PCORI Fees			\$7,000
Target Reserve Adjustment <sup>6</sup>			\$311,000
<b>FY 2022 Projected Incurred Expenses</b>			<b>\$47,850,000</b>
<b>Current FY 2021 Working Rate Premium <sup>7</sup></b>			<b>\$39,728,000</b>
<b>FY 2022 Segal Est. Required Rate Change</b>			<b>20.4%</b>

Notes:

1. Adjustment to reflect claims incurred during the experience period ended September 30, 2020 and not paid as of November 30, 2020.
2. Reflects the plan changes negotiated in the PEC agreement effective July 1, 2020 and July 1, 2021.
3. Estimated adjustment to normalize months in the experience period impacted by COVID-19.
4. Adjustment to remove Rx rebates "baked-in" into the ingredient cost and reflected in the paid claims. Effective July 1, 2021, rebates will no longer be included in paid claims and the City will receive rebates quarterly. Estimated FY 2022 rebates as provided by BCBS.
5. Reflects the BCBS PPO and Standard HMO administrative fee resulting from the RFP process.
6. Adjustment to maintain target reserves of 10% of projected total costs.
7. Reflects both the City and employee/retiree share of the working rates and is based on enrollment as of December 2020 as reported by BCBS.