Standard Data Request Format	Version 2.2	Version 2.22			Field(Sheet)		
New Jersey Rate Review Project			Template has been successfully validated.	Validate Entries	SERFF Tracking Number(General)	Not filled in	

Carrier Name:
Actuary Certifying the Rates:
Date of Initial Filing:
Date of Revised Filing (if applicable):
NAIC Company Code:
SERFF Tracking Number:
Market

AmeriHealth HMO, Inc

O7/31/2012

D7/31/2012

INAIC Company Code:

SERFF Tracking Number:
MAC-128606452

Small Group

General Filing Information

Rate Request			
Proposed Effective Date:	10/01/2012		
Proposed for Period Through:	12/31/2	012	
Effective Date of Most Recent Prior Filing:	07/01/2	012	
	Increase over rates:		
Rate Increase for Policies Covered by This Filing		From Prior Filing	In Effect 1 Year Prior
Average:		2.30%	6.10%
Minimum:		0.10%	-1.60%
Maximum:		4.40%	7.50%

Forms Ir	cluded in the Filing					
	Policy Form				Membership in	Open or
	Number	Product Name	Product Type	Product Description	New Jersey	Closed?
1	Standard	HMO	НМО	HMO		*
2	AMND SEH HMO P	Plus (No Referral)	HMO	Services from non-PCP participating providers can be accessed		*
3	Standard	POS	POS	POS		*
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Standard Data Request Format

Version 2.22

New Jersey Rate Review Project

Summary of Increase

Carrier Name: AmeriHealth HMO, Inc

NAIC Company Code: 95044

SERFF Tracking Number: INAC-128606452

Analysis of Average Change in Premiums				
	Total	Medical	Prescription Drug	Other Ancillary
Change Attributable To:				
Difference between actual and expected benefit costs	2.400%	0.000%	0.000%	0.000%
Change in utilization of services	0.000%	0.000%	0.000%	0.000%
Change in unit cost of services	0.000%	0.000%	0.000%	0.000%
Changes in intensity / service mix	0.000%	0.000%	0.000%	0.000%
Changes in enrollment/demographics	-0.400%	0.000%	0.000%	0.000%
Legally required changes in benefits	0.000%	0.000%	0.000%	0.000%
Other changes in benefits	0.000%	0.000%	0.000%	0.000%
Total Benefit-Related Changes	2.000%	0.000%	0.000%	0.000%
Changes in administrative costs	0.300%			
Changes in sales & marketing costs	0.000%			
Changes in investment income	0.000%			
Changes in taxes, fees and assessments	0.000%			
Other changes in margin	0.000%			
Total Non-Benefit Related Changes	0.300%			
Total percentage change in Rates	2.300%			
Average Rates				
Current	413.21	0.00	0.00	0.00
Proposed	422.53	0.00	0.00	0.00

Standard Data Request Format

Version 2.22

New Jersey Rate Review Project

Rate Increase History

Carrier Name: AmeriHealth HMO, Inc

NAIC Company Code: 95044

SERFF Tracking Number: INAC-128606452

Are the policy forms included in the rate increase history different from the forms included in the filing (Y/N)?

N

If "YES" please attach an exhibit listing each of the forms in the rate increase history.

History of Rate Changes During the Last 3 Years							
	Effective Date		Medical	Prescription Drug	Other Ancillary		
	07/01/2012		0.00%	0.00%			
	04/01/2012		2.00%	1.50%			
	01/01/2012		1.00%	1.00%			
	10/01/2011		4.10%	0.90%			
	07/01/2011		2.20%	4.00%			
	04/01/2011		0.00%	0.00%			
	01/01/2011		0.00%	6.90%			
	10/01/2010		2.90%	11.20%			
	07/01/2010		3.00%	8.00%			
	04/01/2010		6.80%	9.00%			