

Individual PPACA Market Monthly Premiums for Plan Year 2021

	Company	Network Type ⁽¹⁾	Federal Exchange Availability ⁽²⁾	Florida File Log Number	Average 2020 Monthly Premium ⁽³⁾ per Person for Actual 2020 Enrollment	Average 2021 Monthly Premium ⁽³⁾ per Person for Actual 2020 Enrollment	Average Percentage Change Requested ^{(4)(*)}	Average Percentage Change Approved ⁽⁴⁾
On Exchange								
1	AvMed, Inc.	HMO	On and Off Exchange	20-015883	\$577	\$558	-5.2%	-3.3%
2	Blue Cross and Blue Shield of Florida, Inc.	EPO	On and Off Exchange	20-015821	\$643	\$666	1.7%	3.7%
3	Bright Health Insurance Company of Florida	EPO	On and Off Exchange	20-015929	\$531	\$551	1.6%	3.7%
4	Celtic Insurance Company	EPO	On and Off Exchange	20-015909	\$569	\$592	4.6%	3.9%
5	Cigna Health And Life Insurance Company	EPO	On and Off Exchange	20-015826	\$530	\$523	-3.2%	-1.4%
6	Florida Health Care Plan, Inc.	HMO	On and Off Exchange	20-015606	\$606	\$605	-3.1%	-0.1%
7	Health First Commercial Plans, Inc.	HMO	On and Off Exchange	20-015753	\$584	\$612	3.6%	4.8%
8	Health Options, Inc.	HMO	On and Off Exchange	20-015823	\$607	\$622	0.1%	2.5%
9	Molina Healthcare of Florida, Inc.	HMO	On and Off Exchange	20-015886	\$510	\$501	-3.8%	-1.8%
10	Oscar Insurance Company of Florida	EPO	On and Off Exchange	20-015912	\$515	\$530	1.4%	2.9%
Weighted Average using Actual Membership⁽⁵⁾:								
					\$597	\$616	1.8%	3.1%

(*) Rates requested in initial filings did not include any additional factor or consideration for projected impacts of COVID-19 for plan year 2020-2021. Carriers submitted COVID factor projections separately. The aggregate requested increase for the COVID factor was +2.8%, primarily considering delayed claims and additional costs related to COVID-19. OIR approved a COVID factor of +2%, which is reflected in the final approved rate of all carriers. Federal law requires insurance companies to pay annual rebates if a carrier collects too much premium in relation to claims.

(1) Network types are Health Maintenance Organization (HMO), Preferred Provider Organization (PPO), and Exclusive Provider Organization (EPO).

(2) A plan marketed through the Federally Facilitated Exchange (FFE) may or may not be marketed outside of the FFE.

(3) Average Monthly Premiums do not include the impact of potential premium subsidies.

(4) Percent changes are based on actual 2020 enrollment and do not represent the percent difference for a single policyholder.

General Information

This information has not been reviewed or finalized by the Department of Health & Human Services; therefore, it is subject to change.

Florida file log numbers can be used to search the OIR Insurance Regulation Filing System at <https://irfssearch.fldfs.com/>.

Determination of the average change:

1 Companies provided an average requested rate change based on their proposed premiums and their distribution of business. That number is in the table above.

2 The requested rate changes and the projected distribution of business was then used to determine an overall statewide average increase.