# California Department of Managed Health Care/Department of Insurance CA Large Group Historical Data Spreadsheet (Fully Insured) For Policies subject to CIC 10181.45 or CHSC 1374.21

1.	Reporting Year	2019
2.	Enter DMHC Health Plan ID/CDI NAIC No.	933-0310
3.	Legal Name	Sharp Health Plan
4.	DBA	Sharp Health Plan

Revised: June 11, 2019

# California Department of Managed Health Care/Department of Insurance CA Large Group Historical Data Spreadsheet (Fully Insured) For Policies subject to CIC 10181.45 or CHSC 1374.21

### **Historical Data - Premium and Claims**

нм	O/POS	Historical Data					
		2014	2015	2016	2017	2018	
1.	Premium: 1.1 Total premium	311,876,281	362,865,819	390,804,573	407,574,865	422,840,959	
2.	Claims: 2.1 Claims Incurred and Paid 2.2 Direct claim reserves 2.3 Experience rating refunds (rate credits) paid 2.4 Reserve for experience rating refunds (rate credits) 2.5 Contingent benefit and lawsuit reserves 2.6 Total incurred claims	271,388,484 1,213,812 272,602,296	309,099,276 1,086,382 310,185,658	343,856,411 (2,478,469) 341,377,942	351,123,279 4,387,288 355,510,567	360,508,960 2,650,031 363,158,991	
3.	Federal and State Taxes and Licensing or Regulatory Fees 3.1 Federal taxes and assessments 3.1a Federal income taxes deductible from premium in MLR 3.1b Patient Centered Outcomes Research Institute (PCORI) 3.1c Affordable Care Act section 9010 Fee 3.1d Federal Transitional Reinsurance Fee 3.1e Other Federal Taxes and assessments deductible from 3.2 State Premium Tax 3.3 State Income Tax 3.4 Regulatory authority licenses and fees 3.5 Other Taxes and Fees 3.6 Total Federal and State Taxes and fees	185,546 1,659,243 1,844,789	147,495 2,369,478 2,516,973	155,515 2,637,180 2,792,695	159,292 0 159,292	222,639 3,413,903 3,636,542	
4.	Health Care Quality Improvement Expenses Incurred 4.1 Improve health outcomes 4.2 Activities to prevent hospital readmission 4.3 Improve patient safety and reduce medical errors 4.4 Wellness and health promotion activities 4.5 Health information technology expenses related to improving health care quality 4.6 Allowable Implementation ICD-10 expenses (not to exceed 0.3% of premium) 4.7 Total Incurred Health Care Quality Improvement Expenses	0	0	0	0	0	
5.	Non-Claims Costs 5.1 Administrative Expenses 5.2 Agents and brokers fees and commissions 5.3 Other general and administrative expenses 5.4 Total non-claims costs	21,346,707 5,685,545 27,032,252	26,259,009 6,576,818 32,835,827	34,830,866 7,797,718 42,628,584	31,589,214 8,239,845 39,829,059	36,530,035 8,595,113 45,125,148	
6.	Other Indicators or information 6.1 Number of covered lives 6.2 Member months	61,173 758,632	72,800 859,059	73,930 895,125	72,596 874,492	75,441 900,696	

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**Historical Data - Premium and Claims** 

PPO/EPO		Historical Data					
		2014	2015	2016	2017	2018	
1.	Premium: 1.1 Total premium						
2.	Claims: 2.1 Claims Incurred and Paid 2.2 Direct claim reserves 2.3 Experience rating refunds (rate credits) paid 2.4 Reserve for experience rating refunds (rate credits) 2.5 Contingent benefit and lawsuit reserves 2.6 Total incurred claims	0	0	0	0	0	
3.	Federal and State Taxes and Licensing or Regulatory Fees 3.1 Federal taxes and assessments 3.1a Federal income taxes deductible from premium in MLR 3.1b Patient Centered Outcomes Research Institute (PCORI) 3.1c Affordable Care Act section 9010 Fee 3.1d Federal Transitional Reinsurance Fee 3.1e Other Federal Taxes and assessments deductible from 3.2 State Premium Tax 3.3 State Income Tax 3.4 Regulatory authority licenses and fees 3.5 Other Taxes and Fees 3.6 Total Federal and State Taxes and fees	0	0	0	0	0	
4.	Health Care Quality Improvement Expenses Incurred 4.1 Improve health outcomes 4.2 Activities to prevent hospital readmission 4.3 Improve patient safety and reduce medical errors 4.4 Wellness and health promotion activities 4.5 Health information technology expenses related to improving health care quality 4.6 Allowable Implementation ICD-10 expenses (not to exceed 0.3% of premium) 4.7 Total Incurred Health Care Quality Improvement Expenses	0	0	0	0	0	
5.	Non-Claims Costs 5.1 Administrative Expenses 5.2 Agents and brokers fees and commissions 5.3 Other general and administrative expenses 5.4 Total non-claims costs	0	0	0	0	0	
6.	Other Indicators or information 6.1 Number of covered lives 6.2 Member months						

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**Historical Data - Premium and Claims** 

HMO/POS		Historical Data					
		2014	2015	2016	2017	2018	
1.	Total Dollars 1.1 Premiums 1.2 Claims Costs 1.3 Administrative Expenses 1.4 Taxes and Fees 1.5 Quality Improvement Expenses	311,876,281 272,602,296 27,032,252 1,844,789 0	362,865,819 310,185,658 32,835,827 2,516,973 0	390,804,573 341,377,942 42,628,584 2,792,695 0	407,574,865 355,510,567 39,829,059 159,292 0	422,840,959 363,158,991 45,125,148 3,636,542 0	
2.	PMPM 2.1 Premiums 2.2 Claims Costs 2.3 Administrative Expenses 2.4 Taxes and Fees 2.5 Quality Improvement Expenses	411 359 36 2 0	422 361 38 3 0	437 381 48 3 0	466 407 46 0	469 403 50 4 0	
3.	Average Change in Rating Components (%) 3.1 Premiums 3.2 Claims Costs 3.3 Administrative Expenses 3.4 Taxes and Fees 3.5 Quality Improvement Expenses	N/A N/A N/A N/A	0.5% 7.3% 20.5%	5.6% 24.6% 6.5%	6.6% -4.4% -94.2%	- <mark>0.8%</mark> 10.0% 2116.5%	

PPO/EPO		Historical Data					
		2014	2015	2016	2017	2018	
1.	Total Dollars 1.1 Premiums 1.2 Claims Costs 1.3 Administrative Expenses 1.4 Taxes and Fees 1.5 Quality Improvement Expenses	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	
2.	PMPM 2.1 Premiums 2.2 Claims Costs 2.3 Administrative Expenses 2.4 Taxes and Fees 2.5 Quality Improvement Expenses						
3.	Average Change in Rating Components (%) 3.1 Premiums 3.2 Claims Costs 3.3 Administrative Expenses 3.4 Taxes and Fees 3.5 Quality Improvement Expenses	N/A N/A N/A N/A N/A					

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