

**EXHIBIT 14 - PART B: SUMMARY OF REQUESTED PERCENTAGE CHANGES TO EXISTING RATES**

**– for Small Group Medical Plans**

**Company Name:** Independent Health Association  
**NAIC Code:** 95308  
**SERFF Tracking #:** NDPD-129588135  
**Market Segment:** Small Groups Off Exchange

- 1) Use this Exhibit for Small Group Medical Plans.
- 2) The format of this exhibit is discussed below. Insert more rows as needed. Only use the first tab for data entry.
- 3) Market segment refers to the Small Group Plans.
- 4) The requested percentage rate change reflects the expected change in premium rates that would apply to the contract holder on that contract holder's next rate change date for each contract holder within the indicated combination of rating period, metal level, rating region and product name.
- 5) The product street name is the product name as advertised to consumers (i.e., as consumers are likely to refer to this product/metal level when communicating with the DFS). A separate row is to be used for each combination of rating period, metal level, rating region and product name.
- 6) The effective date is the earliest date that the proposed new rate would become effective if approved. Effective Dates for Small Groups are 1/1/15, 4/1/15, 7/1/15 and 10/1/15.
- 7) If the percentage change (lowest and highest and weighted average) are identical for all the rating regions, then separate rows by rating region need not be used, and "All Regions" can be shown in the Rating Region column. If the rate change range information differs by rating region, then separate rows need to be used for each rating region the insurer uses. Rating region names used on this exhibit are to use the standard names used by the Department of Insurance.
- 8) The "requested rate change" includes the impact of any riders (such as: age 29, domestic partner, family planning, pediatric dental, etc.).
- 9) Lowest should be the smallest percentage change that could affect any contract holder due to the submitted rate filing with that rating period, metal level and rating region, including any applicable riders. This includes benefit designs included in this rate filing which have no actual members.
- 10) Highest should be the largest percentage change that could affect any contract holder due to the submitted rate filing with that rating period, metal level and rating region, including any applicable riders. This includes benefit designs included in this rate filing which have no actual members.
- 11) The weighted average percentage should be developed based on annualized premium volume or membership for that rating period, metal level and rating region, including any applicable riders.
- 12) This exhibit must be submitted as an Excel file and as a PDF file.

**Small Group Medical Products**

Market Segment	Effective Date of New Rate	Metal Level	Rating Region	Product Name	Product Street Name	Requested Percentage Rate Change		
						Lowest	Highest	Weighted Avg
Small Group	1/1/2015	Gold	2 - Buffalo Area	Healthy New York	Healthy New York	3.74%	4.65%	3.78%
Small Group	4/1/2015	Gold	2 - Buffalo Area	Healthy New York	Healthy New York	3.50%	4.41%	3.54%
Small Group	7/1/2015	Gold	2 - Buffalo Area	Healthy New York	Healthy New York	3.26%	4.17%	3.30%
Small Group	10/1/2015	Gold	2 - Buffalo Area	Healthy New York	Healthy New York	3.02%	3.93%	3.06%