Filing at a Glance

Company:	UnitedHealthcare Insurance Company of Illinois
Product Name:	IL UHICofIL SG TR 202601
State:	Illinois
TOI:	H16G Group Health - Major Medical
Sub-TOI:	H16G.003A Small Group Only - PPO
Filing Type:	Rate
Date Submitted:	09/29/2025
SERFF Tr Num:	UHLC-134684001
SERFF Status:	Closed-Approved
State Tr Num:	
State Status:	Approved
Co Tr Num:	
Effective Date Requested:	01/01/2026
Author(s):	Paul Knepp, Kevin Morris, Nadja Hibbert
Reviewer(s):	Christina Roy (primary), Beth Verticchio, Becky Sheppard, George Korean
Disposition Date:	12/08/2025
Disposition Status:	Approved
Effective Date:	01/01/2026

State Filing Description:

General Information

Project Name:
Project Number:
Requested Filing Mode: Review & Approval
Explanation for Combination/Other:
Submission Type: New Submission
Group Market Type: Employer
Filing Status Changed: 12/08/2025
State Status Changed: 12/08/2025
Created By: Nadja Hibbert
Corresponding Filing Tracking Number:
State TOI: H16G Group Health - Major Medical

Status of Filing in Domicile:
Date Approved in Domicile:
Domicile Status Comments:
Market Type: Group
Group Market Size: Small
Overall Rate Impact: 8.8%

Deemer Date:
Submitted By: Paul Knepp
State Sub-TOI: H16G.003A Small Group Only - PPO

PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions: No

Filing Description:

This filing is for the groups on the UHICofIL license that are not yet subject to the PPACA regulations for 1/1/26 and beyond. This filing changes pricing trend. There are no other changes to the filed rates. This filing is specific to Transitional Relief groups. A separate filing with the same rates was filed for the Grandfathered groups on this license.

Company and Contact

Filing Contact Information

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Filing Company Information

UnitedHealthcare Insurance
Company of Illinois
200 East Randolph Street
Ste 5300
Chicago, IL 60601
(312) 803-5900 ext. [Phone]

CoCode: 60318
Group Code: -99
Group Name:
FEIN Number: 36-3800349

State of Domicile: Illinois
Company Type: Health
State ID Number:

Filing Fees

State Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

State: Illinois **Filing Company:** UnitedHealthcare Insurance Company of Illinois
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO
Product Name: IL UHICofIL SG TR 202601
Project Name/Number: /

Rate Information

Rate data applies to filing.

Filing Method: Review & Approval
Rate Change Type: Increase
Overall Percentage of Last Rate Revision: 4.200%
Effective Date of Last Rate Revision: 01/01/2025
Filing Method of Last Filing: Review & Approval
SERFF Tracking Number of Last Filing: UHLC-134221272

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
UnitedHealthcare Insurance Company of Illinois	Increase	8.800%	8.800%	$2,899,582	198	$32,949,796	8.800%	8.800%

Rate Review Detail

COMPANY:

Company Name: UnitedHealthcare Insurance Company of Illinois
HHS Issuer Id: 92476

PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
POS, PPO, IND			2461

Trend Factors:

FORMS:

New Policy Forms:
Affected Forms:
Other Affected Forms: COC.I.11.IL, POL.I.11.IL

REQUESTED RATE CHANGE INFORMATION:

Change Period: Other
Member Months: 40,627
Benefit Change: Increase
Percent Change Requested: Min: 8.8 Max: 8.8 Avg: 8.8

PRIOR RATE:

Total Earned Premium: 32,949,796.00
Total Incurred Claims: 20,555,834.00
Annual $: Min: 130.81 Max: 14,219.39 Avg: 811.03

REQUESTED RATE:

Projected Earned Premium: 24,076,742.46
Projected Incurred Claims: 19,009,855.50
Annual $: Min: 142.32 Max: 15,470.70 Avg: 882.40

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		rate schedule		New		IL UHICofIL SG TR 202601- rate schedule.pdf,

Illinois Small Employer Group (2-50) Rate Filing

Rate Schedule

UnitedHealthcare Insurance Company of Illinois

Non-PPACA Transitional Relief Groups

Effective date: 1/1/26

Base Rates

The purpose of the rate filing is to increase pricing trends from 8.8% to 10.1% annually as of 1/1/26. The revised trends match what was filed for the ACA compliant plans for 1/1/26.

Market	Market Description	Medical Products	Medical	Rx
472	Quad Cities - IL	POS	1,123.52	295.62
472	Quad Cities - IL	PPO	1,291.51	339.96
602	Peoria	POS	1,284.18	310.22
602	Peoria	PPO	1,284.18	310.22
508	East St. Louis	POS	1,488.65	398.51
508	East St. Louis	PPO	1,607.66	398.51
627	Southern Illinois	POS	1,741.61	466.38
627	Southern Illinois	PPO	1,881.00	466.38
471	Chicago	POS	1,759.37	292.57
471	Chicago	PPO	1,841.27	227.09

Age Factors

UnitedHealthcare's age/gender factors are shown below.

	Employee		Spouse		
Age Band	Male	Female	Male	Female	Child
20 - 24	0.328	0.752	0.328	0.752	0.545
25 - 29	0.409	0.983	0.409	0.983	0.545
30 - 34	0.521	1.143	0.521	1.143	0.545
35 - 39	0.668	1.139	0.668	1.139	0.545
40 - 44	0.828	1.170	0.828	1.170	0.545
45 - 49	1.059	1.378	1.059	1.378	0.545
50 - 54	1.452	1.665	1.452	1.665	0.545
55 - 59	1.890	1.966	1.890	1.966	0.545
60 - 64	2.559	2.335	2.559	2.335	0.545
65 Group Primary	3.451	2.784	3.451	2.784	0.545
65 Medicare Primary	1.251	1.251	1.251	1.251	0.545

Note: Non-Chicago markets use a child factor of 0.524

No changes are being made to age/gender factors.

Effective Date Adjustments

The current annual pricing trend is 8.8% in all areas. This filing requests that the annual pricing trend be increased to 10.1%.

Area Factors

Each area or market has its own start rate.

County	Factor
ADAMS	1.0500
ALEXANDER	1.1520
BOND	0.9506
BROWN	1.4400
BUREAU	1.0000
CALHOUN	0.9506
CARROLL	0.9110
CASS	0.8544
CHAMPAIGN	0.8544
CHRISTIAN	1.4400
CLARK	1.3680
CLAY	1.2672
CLINTON	0.9506
COLES	1.3680
CRAWFORD	1.2672
CUMBERLAND	1.3680
DEWITT	0.8544
DOUGLAS	1.3680
EDGAR	1.3680
EDWARDS	1.1520
EFFINGHAM	1.2672
FAYETTE	1.4400
FORD	0.8544
FRANKLIN	1.0800
FULTON	1.0000
GALLATIN	1.1520
GREENE	0.9750
HAMILTON	1.2672
HANCOCK	1.0000
HARDIN	1.1520
HENDERSON	1.0000
HENRY	0.9110
JACKSON	1.0800
JASPER	1.2672
JEFFERSON	1.2672
JERSEY	0.9506
JO DAVIESS	0.9110
JOHNSON	1.0800
KNOX	1.0000
LAWRENCE	1.1520
LEE	1.0000
LIVINGSTON	1.0000
LOGAN	0.8544
MACON	0.8544

County	Factor
MACOUPIN	0.9750
MADISON	0.9506
MARION	1.0043
MARSHALL	1.0000
MASON	0.8544
MASSAC	1.1520
MCDONOUGH	1.0000
MCLEAN	1.0000
MENARD	0.8544
MERCER	0.9110
MONROE	0.9506
MONTGOMERY	0.9750
MORGAN	0.8544
MOULTRIE	1.4400
OGLE	1.0000
PEORIA	1.0000
PERRY	1.0800
PIATT	0.8544
PIKE	1.4400
POPE	1.1520
PULASKI	1.1520
PUTNAM	1.0000
RANDOLPH	0.9506
RICHLAND	1.2672
ROCK ISLAND	0.9110
SAINT CLAIR	0.9506
SALINE	1.0800
SANGAMON	0.8544
SCHUYLER	1.4400
SCOTT	0.9750
SHELBY	1.4400
STARK	1.0000
STEPHENSON	1.0000
TAZEWELL	1.0000
UNION	1.0800
VERMILION	0.8544
WABASH	1.1520
WARREN	1.0000
WASHINGTON	0.9360
WAYNE	1.2672
WHITE	1.1520
WHITESIDE	0.9110
WILLIAMSON	0.9750
WOODFORD	1.0000

The chart below documents UnitedHealthcare's current area factors for the 471 market.

State	County	Zip Range	POS & PPO	IND
IL	BOONE	All	1.101	1.030
IL	COOK	60004-60019,60025-60029, 60053,60056-60062,60068-60070,60090,60095-60179,60193-60194,60196,60301-60402,60453-60456,60458- 60459,60499-60558,60638,60644,60666,60682,60701,60707,60714,60804	0.790	1.030
IL	COOK	60406-60452,60457,60461-60487,60608-60609,60615-60621,60623,60628-60629,60632-60633,60636-60637,60643,60649,60652-60653,60655,60803,60805-60827	0.802	1.030
IL	COOK	60055, 60067,60074,60078,60094,60192,60195	0.816	1.030
IL	COOK	60043,60076-60077,60082,60091-60093,60201-60290,60601-60607,60610-60614,60622,60624-60626,60630-60631,60634,60639-60642,60645-60647,60651,60654,60656-60664,60668-60681,60684-60699,60706,60712,	0.828	1.030
IL	COOK	60022, 60038,60065,60079,	0.866	1.030
IL	DEKALB	All	0.900	1.030
IL	DUPAGE	60101-60117,60126-60181,60188,60191-60399,60514-60517,60521-60532,60559-60561,60572	0.790	1.030
IL	DUPAGE	60122	0.816	1.030
IL	DUPAGE	60184-60187,60189-60190,	0.820	1.030
IL	DUPAGE	60502-60504,60519,60540-60555,60563-60567,60598	0.916	1.030
IL	GRUNDY	All	0.893	1.030
IL	IROQUOIS	All	0.900	1.030
IL	KANE	60568	0.790	1.030
IL	KANE	60109-60118,60120-60124,60136-60140,60170,60177,	0.816	1.030
IL	KANE	60119,60134,60144-60151,60174-60175,60183,60510,60539,	0.820	1.030
IL	KANE	60505-60507,60511,60542-60554	0.916	1.030
IL	KANKAKEE	All	0.820	1.030
IL	KENDALL	All	0.916	1.030
IL	LA SALLE	All	1.010	1.030
IL	LAKE	60015,60049,60089,	0.790	1.030
IL	LAKE	60010-60011,60020,60041-60042,60047,60073,60084,	0.816	1.030
IL	LAKE	60002,60030-60040,60044-60046,60048,60060-60069, 60075-60083,60085-60088,60092-60099	0.866	1.030
IL	MCHENRY	All	0.816	1.030
IL	WILL	60401,60417,60423,60448-60449,60468,60484,	0.802	1.030
IL	WILL	60403-60410,60421,60431-60436,60441-60446,60451,60481,60490-60544,60585-60586	0.833	1.030
IL	WILL	60440,60564,	0.916	1.030
IL	WINNEBAGO	All	0.935	1.030

No changes are being made to area factors.

Size Factors

The chart below documents UnitedHealthcare's current size factors.

	472/602	508/627		471
1 - 3	1.130	1.220	1 - 2	1.300
4 - 5	1.070	0.940	3 - 4	1.000
6 - 9	1.000	0.900	5 - 10	0.930
10 - 25	1.000	0.860	11 - 15	0.870
26 - 50	0.942	0.800	16 - 50	0.900

No changes are being made to size factors.

Plan Relativity Factors

The chart below displays a sample of UnitedHealthcare's plan codes with associated benefit plan relativity (or plan factor) for medical plans.

Market: 472/602

Plan	Factor
IG1	0.6916
IJ1	0.7972
IJ2	0.7970
IJ3	0.7919
IJ4	0.9160
IJ5	0.6842
IJ6	0.6413
IJ7	0.8625
IJ8	0.8352
IJ9	0.6427
IJS	0.9278
IJT	0.8152
IJU	0.7694
IJV	0.8325
IJW	0.7691
IJX	0.8783
IJY	0.6662
IJZ	0.8239
ITY	0.8448
IUK	0.7413
IUL	0.7094
IUM	0.6999
IUN	0.6784
IUO	0.6536
IUP	0.7891
IUQ	0.7325
IUR	0.7283
IUS	0.6987
IUT	0.8243
IUU	0.7727
IUV	0.7347
IWJ	0.6502
IWK	0.6145
IWL	0.6683
IWM	0.6235
IWN	0.6889
IWO	0.6613
IWP	0.5933
IWQ	0.6930
IWR	0.6495
IWS	0.6178
IWT	0.5234
IWU	0.6030
IWV	0.6698
IWW	0.5438
IWX	0.5955
IWY	0.6348

Market: 508/627

Plan	Factor
MHF	0.7453
MHD	0.6959
MHE	0.5876
MHG	0.6500
MHH	0.6227
MHK	0.6596
MHI	0.6061
MHJ	0.5747
MHN	0.5997
MHL	0.5669
MHM	0.5404
MHQ	0.5595
MHO	0.5280
MHP	0.5073
MHS	0.5319
MHR	0.4917
MHU	0.4971
MHT	0.4622
MHW	0.4778
MHV	0.4463
MHY	0.4504
MHX	0.4239
MH1	0.4287
MHZ	0.4054
MH3	0.3640
MH2	0.3511
MM1	0.6105
MMZ	0.5455
MM3	0.5697
MM2	0.5122
MM5	0.5419
MM4	0.4897
MM7	0.4874
MM6	0.4507
MM9	0.4374
MM8	0.4094
MS1	0.4819
MS2	0.4574
MS3	0.4477
MH4	0.5189
MH5	0.4842
MH6	0.4656
MH7	0.4423
MH8	0.4296
MH9	0.4167
MMX	0.3674
MMY	0.3493

Market: 471

Plan	Factor
IVD	0.8487
IVE	0.8644
IVF	0.8382
IDL	0.7414
IVJ	0.7345
IVK	0.7426
IVL	0.6925
IVM	0.609
IVO	0.6594
IVQ	0.6311
IW1	0.7346
IVS	0.5798
IVT	0.5515
IW2	0.6071
IVX	0.612
IVZ	0.5717
IV1	0.5061
IC2	0.6337
IC3	0.6265
IC4	0.5093
ITX	0.7375
ITY	0.7813
IDF	0.6967
IDG	0.6621
IDI	0.611
IDJ	0.5793
IDM	0.7298
IT1	0.6377
IE1	0.6988
IE3	0.6004
IWI	0.6323
IE4	0.6078
IVA	0.9628
IVH	0.8087
IVI	0.7681
IC1	0.6845
ITV	0.8452
IC5	0.7638
IC6	0.749
IC8	0.8504
IC9	0.8043
IDE	0.858
IDH	0.7773
IDZ	0.7187
ID1	0.8784
IS3	0.727
IVR	0.611297

Market: 508/627

Plan	Factor
12A	0.5879
MF1	0.5189
MF3	0.5765
MF2	0.5240
MF7	0.5443
MF6	0.4974
1TP	0.4919
MF8	0.4534
MF5	0.4537
MF4	0.4215

Market: 471

Plan	Factor
QC6	0.751966
QCK	0.712106
QCL	0.784453
QCN	0.778486
QCO	0.741358
QCP	0.7266
QCR	0.720714
QCT	0.680384
QCV	0.685834
QCX	0.653895
QCY	0.727776
QE1	0.659396
QE3	0.642645
QE6	0.624198
QE8	0.733079
QEU	0.689064
QEV	0.625401
QEZ	0.614635
QF2	0.599166
QF7	0.642292
QF8	0.621707
QFJ	0.629496
QFK	0.596076
QFL	0.59491
QHX	0.660496
QHY	0.64259
QFT	0.678655
QFV	0.757997
QFW	0.629937
QFX	0.59622
QFZ	0.707575
QG5	0.67765

The chart below displays a sample of UnitedHealthcare's plan codes with associated benefit plan relativity (or plan factor) for Rx plans.

Market: 472/602

Plan Code	Relativity
2V	0.7505
H9	0.8012
K5	0.8210
2VHSA	-
H9HSA	-
5S	0.7122
5U	0.7491
5V	0.6681

Market: 508/627

Plan Code	Relativity
2V	0.5225
H9	0.5578
K5	0.5716
2VHSA	-
H9HSA	-
5S	0.4958
5U	0.5215
5V	0.4651

Market: 471

Plan Code	Relativity
2V	0.6830
H9	0.7617
2VHSA	-
H9HSA	-
5S	0.6370
5U	0.6810
5V	0.5740

With respect to benefit plan relativities (plan factors); plan factors for all plans are set at a consistent level based on benefit plan design differentials.

No changes are being made to plan relativity factors.

Industry Factors

The chart below displays UnitedHealthcare's Industry Factor table by Standard Industrial Classification (SIC) code.

Market:		508/627
SIC CODE Range		Factor
1	1499	1.100
1500	1520	1.000
1521	1542	0.950
1543	1710	1.000
1711	1799	0.950
1800	2710	1.000
2711	2796	0.950
2797	3999	1.000
4000	4219	1.100
4220	4811	1.000
4812	4822	0.950
4823	5499	1.000
5500	5599	1.100
5600	5799	1.000
5800	5899	1.100
5900	6010	1.000
6011	6099	0.950
6100	6110	1.000
6111	6163	0.950
6164	6410	1.000
6411	6411	0.950
6412	6711	1.000
6712	6799	0.950
6800	6999	1.000
7000	7299	1.100
7300	7310	1.000
7311	7338	0.950
7339	7370	1.000
7371	7399	0.950
7400	8049	1.000
8050	8069	1.100
8070	8099	1.000
8100	8111	1.100
8112	8299	1.000
8300	8399	1.100
8400	8639	1.000
8640	8699	1.100
8700	8710	1.000
8711	8748	0.950
8749	9999	1.000

Market:		472/602
SIC CODE Range		Factor
1	740	1.000
741	742	0.900
743	750	1.000
751	752	0.900
753	760	1.000
761	783	1.050
784	910	1.000
911	971	1.100
972	1010	1.000
1011	1099	1.200
1100	1210	1.000
1211	1241	1.200
1242	1310	1.000
1311	1389	1.200
1390	1410	1.000
1411	1499	1.200
1500	1610	1.000
1611	1629	1.100
1630	2410	1.000
2411	2421	1.200
2422	2425	1.000
2426	2499	1.100
2500	2710	1.000
2711	2796	0.950
2797	3311	1.000
3312	3399	1.100
3400	3611	1.000
3612	3710	0.950
3711	3811	1.000
3812	3829	0.950
3830	4010	1.000
4011	4013	1.100
4014	4110	1.000
4111	4173	1.100
4174	4200	1.000
4201	4299	1.100
4300	4411	1.000
4412	4412	1.200
4413	4423	1.000
4424	4499	1.200

Market:		472/602
SIC CODE Range		Factor
4500	4811	1.000
4812	4822	0.950
4823	4951	1.000
4952	4959	1.100
4960	5510	1.000
5511	5521	1.100
5522	5540	1.000
5541	5599	1.100
5600	5811	1.000
5812	5813	1.200
5814	5920	1.000
5921	5921	1.200
5922	5991	1.000
5992	5992	1.200
5993	6010	1.000
6011	6099	0.900
6100	6110	1.000
6111	6163	0.900
6164	6711	1.000
6712	6799	0.900
6800	7230	1.000
7231	7241	1.100
7242	7298	1.000
7299	7299	1.100
7300	7341	1.000
7342	7349	1.100
7350	7360	1.000
7361	7361	1.100
7362	7362	1.000
7363	7363	1.200
7364	7370	1.000
7371	7379	0.900
7380	7380	1.000
7381	7381	1.100
7382	7910	1.000
7911	7999	1.100
8000	8010	1.000
8011	8049	1.150
8050	8050	1.000
8051	8069	1.150

Market:		472/602
SIC CODE Range		Factor
8070	8070	1.000
8071	8099	1.150
8100	8110	1.000
8111	8111	1.100
8112	8230	1.000
8231	8231	0.950
8232	8321	1.000
8322	8399	1.100
8400	8710	1.000
8711	8748	0.950
8749	8810	1.000
8811	8811	1.200
8812	9110	1.000
9111	9199	1.050
9200	9210	1.000
9211	9229	1.050
9230	9310	1.000
9311	9311	1.050
9312	9410	1.000
9411	9451	1.050
9452	9510	1.000
9511	9532	1.050
9533	9610	1.000
9611	9661	1.050
9662	9710	1.000
9711	9721	1.050
9722	9999	1.000

Market:		471
SIC CODE Range		Factor
1	740	1.000
741	742	0.900
743	750	1.000
751	752	0.900
753	760	1.000
761	783	1.050
784	910	1.000
911	971	1.100
972	1010	1.000
1011	1099	1.200
1100	1210	1.000
1211	1241	1.200
1242	1310	1.000
1311	1389	1.200
1390	1410	1.000
1411	1499	1.200
1500	1610	1.000
1611	1629	1.100
1630	2410	1.000
2411	2421	1.200
2422	2425	1.000
2426	2499	1.100
2500	2710	1.000
2711	2796	0.950
2797	3311	1.000
3312	3399	1.100
3400	3611	1.000
3612	3710	0.950
3711	3811	1.000
3812	3829	0.950
3830	4010	1.000
4011	4013	1.100
4014	4110	1.000
4111	4173	1.100
4174	4200	1.000
4201	4299	1.100
4300	4411	1.000
4412	4412	1.200
4413	4423	1.000
4424	4499	1.200

Market:		471
SIC CODE Range		Factor
4500	4811	1.000
4812	4822	0.950
4823	4951	1.000
4952	4959	1.100
4960	5510	1.000
5511	5521	1.100
5522	5540	1.000
5541	5599	1.100
5600	5811	1.000
5812	5813	1.200
5814	5920	1.000
5921	5921	1.200
5922	5991	1.000
5992	5992	1.200
5993	6010	1.000
6011	6099	0.900
6100	6110	1.000
6111	6163	0.900
6164	6711	1.000
6712	6799	0.900
6800	7230	1.000
7231	7241	1.100
7242	7298	1.000
7299	7299	1.100
7300	7341	1.000
7342	7349	1.100
7350	7360	1.000
7361	7361	1.100
7362	7362	1.000
7363	7363	1.200
7364	7370	1.000
7371	7379	0.900
7380	7380	1.000
7381	7381	1.100
7382	7910	1.000
7911	7999	1.100
8000	8010	1.000
8011	8049	1.150
8050	8050	1.000
8051	8069	1.150

Market:		471
SIC CODE Range		Factor
8070	8070	1.000
8071	8099	1.150
8100	8110	1.000
8111	8111	1.100
8112	8230	1.000
8231	8231	0.950
8232	8321	1.000
8322	8399	1.100
8400	8710	1.000
8711	8748	0.950
8749	8810	1.000
8811	8811	1.200
8812	9110	1.000
9111	9199	1.050
9200	9210	1.000
9211	9229	1.050
9230	9310	1.000
9311	9311	1.050
9312	9410	1.000
9411	9451	1.050
9452	9510	1.000
9511	9532	1.050
9533	9610	1.000
9611	9661	1.050
9662	9710	1.000
9711	9721	1.050
9722	9999	1.000

No changes are being made to industry factors.

State: Illinois **Filing Company:** UnitedHealthcare Insurance Company of Illinois
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO
Product Name: IL UHICofIL SG TR 202601
Project Name/Number: /

Supporting Document Schedules

Satisfied - Item:	Review Requirement Checklist
Comments:	
Attachment(s):	ChecklistForRenewalsCB2014-04_IL SG UHICofIL TR 202601_v2.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Cover Letter
Comments:	
Attachment(s):	IL UHICofIL SG TR 202601 - cover letter.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Certificate of Compliance
Comments:	
Attachment(s):	Exhibit A-Cert of Compliance - UHICofIL TR 202601.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Part II Memorandum
Comments:	
Attachment(s):	IL_UHICofIL_TR_PartII_2026.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial memorandum - redacted
Comments:	
Attachment(s):	Illinois SG UHICofIL TR 202601 Memorandum_v2_Redacted.pdf
Item Status:	
Status Date:	

Illinois Department of Insurance

PAT QUINN
Governor

ANDREW BORON
Director

CHECKLIST FOR RENEWAL OF EXISTING POLICY PLANS

As referenced in Company Bulletin CB 2014-03, the following are additional guidelines for submitting rate filings:

1) Where a company chooses to continue using the last set of rates that were given a SERFF disposition of "Filed" by DOI, no further actuarial review by DOI will be required. These filings should be submitted to DOI no later than fifteen (15) days prior to the date the company intends to implement the rates.

   Updates to the manual rates already on file are as follows: Trends are being increased and extended to January 2026 and beyond.

2) Where a company chooses to use rates that are different than the last set of rates that were given a SERFF disposition of "Filed" by DOI, then the following apply:

   a)A rate filing changing trend only will result in an expedited DOI actuarial review with an estimated completion time of two (2) weeks.
   b)A rate filing changing any other assumptions/factors other than trend will result in a full actuarial review.

   Updates to the manual rates already on file are as follows: Trends are being increased and extended to January 2026 and beyond.
   The cover letter indicates that 2a above applies to this filing.

3) All rate filings should contain at a minimum the information set out in this paragraph. The failure to include such information, requiring a subsequent request to the company for same, will result in a commensurate delay in actuarial review times. The required information follows:

   a)A cover letter indicating the following:
      i) The rate filing option the company has chosen (either 1, 2a, or 2b above);
      ii) The SERFF filing number for the last "Filed" rate filing;
      iii) The trend used in the last "Filed" rate filing; and
      iv) The intended implementation date of the rates.

   The cover letter is attached in SERFF.

   b)An actuarial memorandum including:
      i) Proposed effective date;
      ii) Requested rate increase – from current rates and annual;
      iii) Reason for rate increase (attribution analysis);

iv) Historical rate increases;
v) Target loss ratio for the rating and two preceding periods;
vi) Historic loss ratios;
vii) Benefit description including:
    A) Type of Policy
    B) Benefits
    C) Renewability
    D) General Marketing Method
    E) Underwriting Method,
    F) Premium Classifications
    G) Age Basis and Issue Age
viii) Market (individual or small group);
ix) Average premium before and after rate increase;
x) Historical financial experience (earned premiums, incurred claims, resulting loss ratios, policyholders, covered lives, member months, etc. by calendar year since inception of product);
xi) Description and demonstration of the development of proposed base rate increase describing the source of each assumption used including trends, lapse rates, and interest rates;
xii) Description and demonstration of all changes in rating factors;
xiii) Base period experience including:
    A) Base period from and through dates
    B) Paid through date
    C) Completion methodology and average factors and IBNR
    D) Contract reserves
    E) Allowed claims experience by service type
    F) Paid claims experience by service type
    G) Corresponding member months
    H) Credibility analysis
    I) Treatment of large claims and development of pooling charges and credits
xiv) Treatment of reinsurance;
xv) Projected policyholders, individuals and member months;
xvi) Projection factors by type of service (inpatient, outpatient, professional, other and prescription drug), including:
    A) Utilization
    B) Cost
    C) Service mix
xvii) Experience adjustments:
    A) Due to benefit changes
    B) Due to demographic changes
xviii) Historic trends should be provided, if not provided in prior filings;
xix) Summary of changes in filing from previous filing (benefits, rating factors, administrative costs, gain/loss margins etc.);
xx) Loss ratio with and without proposed rate increase;
xxi) Cumulative, future and lifetime loss ratios;
xxii) Company's State rebate MLR for this market with credibility adjustment;

xxiii) Explanation when the future loss ratio is not consistent with the federal rebate MLR;
xxiv) Administrative costs and load included in rates; and
xxv) Rate filing disclosure form required for “unreasonable” rate increases.

These items are addressed in the Actuarial Memorandum.

If you have any questions regarding this checklist, please contact Susan Lamb at susan.lamb@illinois.gov.

9/25/2025

320 West Washington St.
Springfield, Illinois 62767-0001
(217) 782-4515
http://insurance.illinois.gov

25 September, 2025

Mr. Andrew Patton
Illinois Department of Insurance
320 West Washington Street
Springfield, IL 62767

RE: UnitedHealthcare Insurance Company of Illinois – Transitional Relief (non-PPACA compliant plans)
SERFF Filing UHLC-134684001

Mr. Patton,

The purpose of the rate filing is to extend the pricing trend to 1/1/26 and beyond. The current filed and approved pricing trend is 8.8% and this filing is requesting that be increased to 10.1%. No other rates are being revised with this filing. This is a new rate filing. Please refer to SERFF # UHLC-134221272 for our last filed rate filing.

This filing is subject to the review described in 2a on the "ChecklistForRenewalsCB2014-04_IL SG UHICofIL TR 202601.doc "

The filing has a requested effective date of January 1, 2026. An actuarial memorandum and an experience spreadsheet are included within the filing.

The form numbers associated with this filing are:
COC.I.11.IL, POL.I.11.IL

We request that you keep this information confidential to the extent allowed by your laws and regulations.

Please contact me if I may be of assistance during your review. I can be reached directly by e-mail at paul_j_knepp@uhc.com.

Respectfully,

Paul Knepp, FSA, MAAA

Joint Committee on Administrative Rules
ADMINISTRATIVE CODE

TITLE 50: INSURANCE
CHAPTER I: DEPARTMENT OF INSURANCE
SUBCHAPTER l: PROVISIONS APPLICABLE TO ALL COMPANIES
PART 916 REQUIRED PROCEDURE FOR FILING AND SECURING APPROVAL OF POLICY FORMS
SECTION 916.EXHIBIT A CERTIFICATE OF COMPLIANCE

Section 916.EXHIBIT A Certificate of Compliance

Each company shall submit a "Certificate of Compliance" in substantially this format:

CERTIFICATE OF COMPLIANCE
UnitedHealthcare Insurance Company of Illinois
(Company Name)

By: Paul Knepp Title: Senior Director Actuarial Services

certifies that the policy forms as identified by either the Departmental listing attached to this Certificate of Compliance, or those filed by the company during this fiscal year, do comply:

a) with all provisions of the Illinois Insurance Code applicable to the policy forms; and

b) with all provisions of 50 Ill. Adm. Code applicable to policy forms;

and does further certify to the best of our knowledge and belief that:

1) the forms do not contain any inconsistent, ambiguous or misleading clauses;

2) the forms do not contain specifications or conditions that unreasonably or deceptively affect the risk purported to be assumed in the general coverage of the policy forms;

3) the only variation from the usual provisions of the policy forms are clearly marked or otherwise indicated;

4) the language of the policy form, as submitted or approved, shall be exactly as it has been or will be offered for issuance or delivery in the State of Illinois as approved by the Director, except for hypothetical data and other appropriate variable material; and

5) the policy forms do not contain any provision or clause currently being disapproved by the Director.

In utilizing the procedure for policy form filing and approval set forth in 50 Ill. Adm. Code 916, UnitedHealthcare Insurance Company of Illinois hereby expressly agrees and consents to a review, by the Director, to be made at any time, and further hereby expressly agrees and consents to the discontinuance by the company of future use of the approved policy forms, 30 days from the date of mailing an order of withdrawal issued by the Director pursuant to Section 143(1) of the Illinois Insurance Code. The order shall set forth the reasons why the previously approved policy forms are violative of or contrary to the provisions of the Illinois Insurance Code or all provisions of 50 Ill. Adm. Code applicable to policy forms. Each company shall have the right to request a hearing within that 30 day period. The request shall be made in writing to the Director. The order of withdrawal shall be stayed and the company shall be given a hearing under the provisions of Sections 143(1), 401(c), 401.1, 402(2), 426 and 429 of the Illinois Insurance Code [215 ILCS 5/143(1), 401(c), 401.1, 402(2), 426 and 429] and 50 Ill. Adm. Code 2402, as may be applicable, to determine:

a) whether the policy form shall be disapproved; and

b) whether further orders of the Director may be appropriate.

UnitedHealthcare Insurance Company of Illinois
(Company Name)

By: 
(Signature)

Title: Senior Director Actuarial Services Date: 9/25/25

(Source: Amended at 39 Ill. Reg. 2590, effective February 6, 2015)

UnitedHealthcare Insurance Company of Illinois (UnitedHealthcare)
Part II - Written Rate Justification for Consumers

(1) Scope and Range of the Rate Change

The requested rate change for Small group health benefit plans sold in the state of Illinois to Transitional Relief Groups will be effective January 1, 2026 and impact 2,461 covered lives. The rate change experienced by members will vary depending on plan selection and geographic area. The average 2026 rate increase is 8.8%, with a maximum increase of 8.8% and a minimum increase of 8.8%. Additional premium changes may occur upon renewal due to changes in member age, changes in plan selection, and changes in geographic location.

The rates in this filing are based on the actual claims experience of Illinois Small groups in calendar year 2024. That experience has been projected forward to the contract period starting January 1st, 2026. The rate projection process used our estimates of the expected cost per service and the frequency that our member's use service.

(2) Financial Experience of the Product

The benefit care ratio (the relationship of incurred claims to received premiums) for this product during the 2024 calendar year is 62.4%. This ratio is the portion of premium that is needed to pay medical claims. The remaining 37.6% of the benefit care ratio is the portion of premium remaining for taxes and fees, administrative expenses, and profit. This is based on a small and shrinking population with limited credibility.

Historical benefit care ratios are:

Year	Benefit Cost Ratio
2022	55.6%
2023	62.6%
2024	62.4%

Note that benefit care ratio is not the same as Medical Loss Ratio, which is also projected to be over 80%.

(3) Changes in Medical Service Costs

There are many different healthcare cost trends that contribute to increases in the overall U.S. healthcare spending each year. These trend factors affect health insurance premiums, which can mean a premium rate increase to cover costs. Some of the key healthcare cost trends that have affected this year's rate actions include:

- Increasing cost of medical services: Annual increases in reimbursement rates to healthcare providers, such as hospitals, doctors, and pharmaceutical companies.
- Increased utilization: The number of office visits and other services continues to grow. In addition, total healthcare spending will vary by the intensity of care and use of different types of health services. The price of care can be affected by the use of expensive procedures such as surgery versus simply monitoring or providing medications.
- Higher costs from deductible leveraging: Healthcare costs continue to rise every year. Because deductibles and copayments remain the same on many plans, a higher percentage of healthcare costs need to be covered by health insurance premiums each year.
- Cost shifting from the public to the private sector: Reimbursements from the Centers for Medicare and Medicaid Services (CMS) to hospitals do not generally cover the cost of providing care to these patients. Hospitals typically make up this reimbursement shortfall by charging private health plans more.
- Impact of new technology: Improvements to medical technology and clinical practice often result in the use of more expensive services, leading to increased healthcare spending and utilization.

- Rates were not adjusted due to the effective repeal of the Affordable Care Act's so-called individual mandate to have health insurance coverage.

(4) Administrative Costs and Anticipated Margins

UnitedHealthcare works to control administrative expenses by adopting better processes and technology and developing programs and innovations that make healthcare more affordable. Taxes and fees imposed by the State and Federal government impact healthcare spending and have to be included in the administrative costs associated with the plans. Another component of premium is profit, which is set to address expected volatility and risk in the market. The resulting federally prescribed, single- year MLR is estimated to be greater than 80%.

The requested rate change is anticipated to be sufficient to cover the projected benefit and administrative costs for the 2026 plan year.

Illinois Small Employer Group (2-50) Rate Filing

Actuarial Memorandum

UnitedHealthcare Insurance Company of Illinois

Non-PPACA – Transitional Relief Groups

Effective date: 1/1/26

Table of Contents

Scope and Purpose of Filing

The purpose of this memorandum is to provide relevant actuarial information regarding the development of premium rates for small employer group insurance sold by UnitedHealthcare Insurance Company of Illinois (UnitedHealthcare). Small group to UnitedHealthcare means groups with between 2 and 50 eligible employees (2-50); that is, employer groups that are subject to small employer group health insurance regulations as promulgated in Illinois Code (IC) 215 ILCS 93. The rates are applicable for medical (including drug) expense benefits. This rate filing is prepared according to the Illinois Department of Insurance – "Rate filing actuarial memorandum and justification review standards" document. This rate filing is specific to the rates for Transitional groups. A separate filing with the exact same rates will be submitted for Grandfathered groups. The rate filing for ACA groups was also filed separately.

This filing should not be used for any other purpose.

Requested Rate Action

[redacted]

Status

These rates are only open to groups with coverage prior to 2014. It is not open to new business.

Description of Benefits

Group comprehensive medical and prescription drug benefit plans sold to 2-50 employer groups.

Renewability Clause

Consistent with Illinois law at 215 ILCS 97/30, group policies issued to small employers are guaranteed to be renewable at the option of the employer. Issues that could result in termination of a guaranteed renewable policy are described in the statute and the policy and include: nonpayment of premium; failure to meet group participation or contribution requirements; fraud or misrepresentation of a material fact; the discontinuation of the particular type of policy issued to the group; or the insurer's decision to exit the group health insurance market in the state.

Applicability

These rates do not apply to new business. It is only applicable to the existing block of business, established prior to 2014.

Morbidity

The calendar year 2024 incurred claims were used. Those claims were paid through May 2025 and assumed to be 100% complete with no IBNR. There were no contract reserves. The allowed claims by service type are shown in the Rate Review Justification (RRJ). The RRJ included experience from groups subject to the Affordable Care Act (ACA) on this license to add credibility and those combined claims are

considered 100% credible. No adjustment was made for large claims. This is then trended forward to the midpoint of the future rating period. That adjusted, trended experience claim per member per month (PMPM) is compared to the current manual claim adjusted to reflect the experience base's case characteristics such as benefit plan, age/gender, industry, and area.

This data is based on UnitedHealthcare's own experience under this license for Small employers located in Illinois.

Mortality

This product is offered on an annual contract basis. As such mortality assumptions are not used in the rating process and therefore are not applicable to this filing. Mortality assumptions (i.e. probabilities of death) more pertain to business that relates to the survival of policyholders such as life insurance. Group health insurance, however, does not use these assumptions in the development of anticipated health care costs (and resultant premiums). Group health insurance uses morbidity assumptions - estimates of the relative health risk of a population of individuals.

Persistency

This product is offered on an annual contract basis. As such persistency assumptions are not used in the rating process and therefore are not applicable to this filing. Persistency, or more important, lapse assumptions more pertain to long term individual health products such as long term disability and long term care. These are so-called lapse-supported product lines. Group health insurance, however, does not use these assumptions in the development of anticipated health care costs (and resultant premiums). Group health insurance uses morbidity assumptions - estimates of the relative health risk of a population of individuals.

Expenses

[redacted] This includes administration, commissions, premium tax, profit, and risk margin.

Please note that this expense calculation does not match the expense calculation used in the loss ratio calculation as defined by PPACA.

Marketing Method

The market for this product is small employers with between 2 and 50 employees. The product is sold to employers usually via a broker.

Underwriting

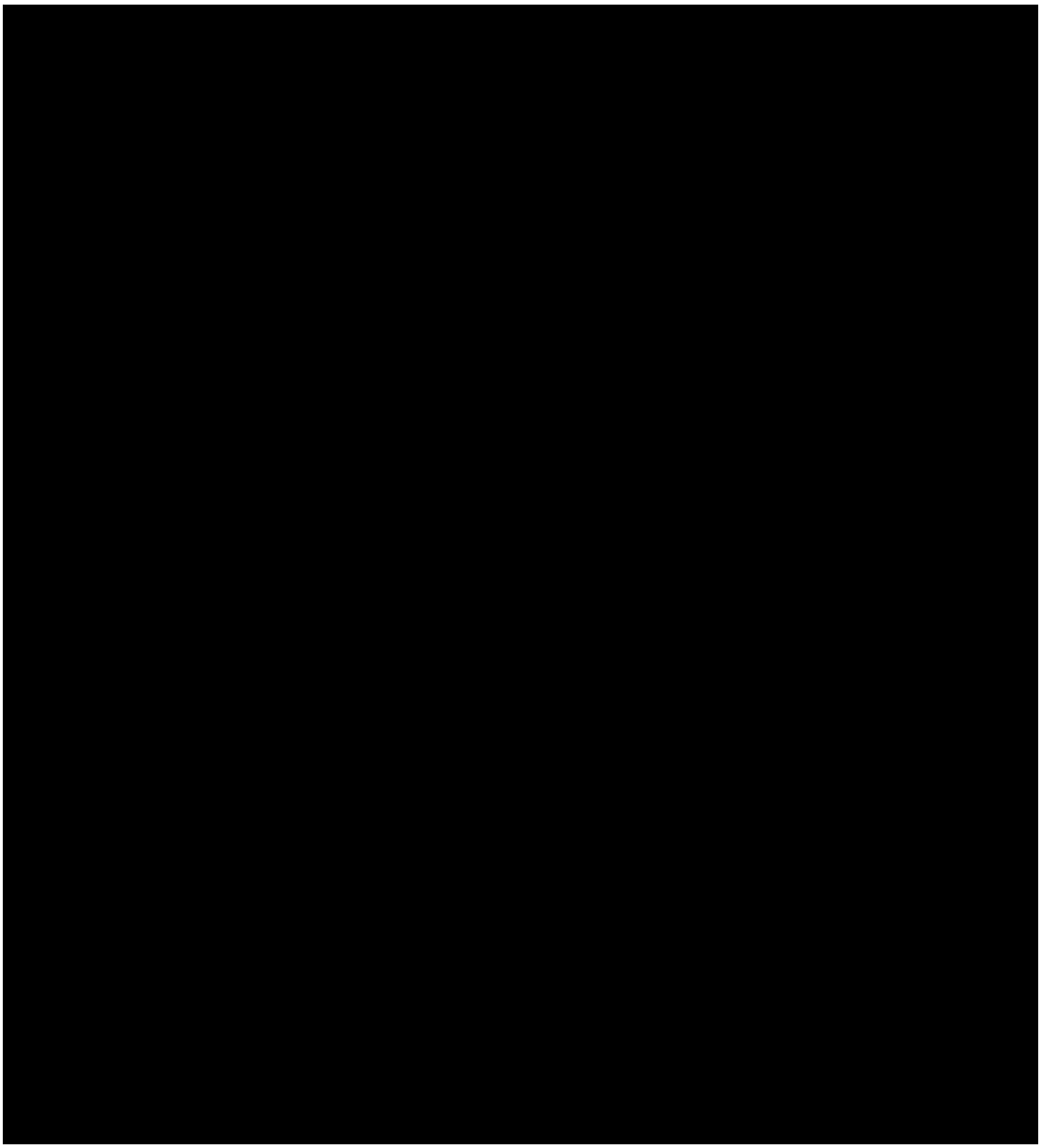
Underwriting considers many group case characteristics in their process; such as on going medical claims, demographics, and market considerations. These considerations are all subject to the specific requirements of Section 25 of the Small Employer Health Insurance Rating Act [215ILCS92/25].

Premium Classes

Manual rates vary by age, gender, effective date of coverage, geographic area, group size, benefit plan, and industry.

UnitedHealthcare's age/gender factors are shown below.

Area Factors



Issue Age Range

Age factors used in the manual rate calculation are based on age of members as of the effective date of coverage. No age factors are being changed in this filing.

Average Annual Premium

These average annual premiums do not reflect the projected impact of pricing trends, demographic changes, nor benefit plan changes. These average annual premiums are based on the groups that are known to be transitional relief groups as of this filing.

Premium Modalization Factors

Premiums are billed on a monthly basis and no modalization factors are used.

Trend Assumptions – Medical and Insurance

[redacted]

UnitedHealthcare's Pricing Trend is determined by our Healthcare Economics (HCE) department using a sophisticated proprietary forecasting model which is updated / reevaluated periodically. This Pricing Trend model considers changes in unit cost, utilization, mix of services, leveraging, mandates, calendar workdays, and other important determinants of future health care costs.

[redacted]

At UHC, HCE is responsible for all trend management issues (i.e. study, forecast and recommendation). Due to how this task is assigned within UHC, I am not able to completely judge the reasonableness of the assumptions produced by HCE without performing substantial additional work beyond what is required to produce this rate filing.

Minimum Required Loss Ratio for the Form

To the best of my knowledge, the state of IL does not have a minimum loss ratio requirement for group comprehensive medical and drug coverage for employers with 2-50 employees. PPACA does have a minimum loss ratio requirement of 80% for Small groups.

Anticipated Loss Ratio

[redacted]

Please note that this expense calculation does not match the Federal Medical Loss Ratio calculation used in the loss ratio calculation as defined by PPACA.

Distribution of Business

The distribution of the 2-50 transitional relief business in IL as of August 2025 on this license is:

[redacted]

Contingency and Risk Margins

[redacted] This includes administration, commissions, premium tax, profit, and risk margin.

Please note that this expense calculation does not match the expense calculation used in the loss ratio calculation as defined by PPACA.

Experience on the Form

[redacted]

The projections above are based on the groups that are known to be transitional relief as of this filing. Actual results will vary depending on how many groups remain on non-PPACA plans.

Please note that this expense calculation does not match the Federal Medical Loss Ratio calculation used in the loss ratio calculation as defined by PPACA.

Lifetime Loss Ratio

Not applicable. This is an annually rated product.

History of Rate Adjustments

[redacted]

Number of Policyholders

[redacted]

Nationwide data is not readily available.

Proposed Effective Date

The rates presented in this filing are for effective dates of coverage beginning 1/1/2026.

Actuarial Qualifications

I, [redacted], am a Fellow of the Society of Actuaries and a Member of the American Academy of Actuaries. I satisfy the 2024 continuing professional development requirements of the Academy and

therefore am qualified to issue this 2025 statement of actuarial opinion. I have reviewed applicable ASOPs during the preparation of this rate filing.

Other Actuarial Disclosures:

- This rate filing document is uniquely identified with date/time stamp and filename shown in the document footer
- The intended user of this rate filing is the Illinois Department of Insurance
- There are no cautions with regards to risk or uncertainty in the items discussed in the rate filing
- This rate filings should not be used for any other purpose than which is stated in the "Scope and Purpose of Filing" section. Within that context, there are no limitations or constrains on the use or applicability of the rating items discussed herein.
- There are no conflicts of interest with regards to my production of this rate filing
- I rely on the actuaries within our Healthcare Economics department (HCE) to produce pricing trend assumptions. At UnitedHealthcare HCE is responsible for all trend management issues (i.e. study, forecast, and recommendation). Due to how this task is assigned within UnitedHealthcare, I am not able to completely judge the reasonableness of the assumptions produced by HCE without performing substantial additional work beyond what's required to produce this rate filing.

All information is current-to-date shown in the footer; no information or subsequent event with any material impacts has arisen since the production of this document.

Actuarial Certification

To the best of my knowledge, I certify that the entire rate filing is in compliance with the applicable laws and regulations of the state of Illinois, the applicable Federal statutes and regulations, and complies with all applicable Actuarial Standards of Practice.

Final Comments

The information in this filing is accurate to the best of my knowledge as of the date of this filing. This concludes UnitedHealthcare's rate filing. Should you need additional information, please contact me as shown below.