

EXHIBIT 13b: NARRATIVE SUMMARY

Company Name:	<u>CDPHP Universal Benefits, ® Inc.</u>
NAIC Code:	<u>47027</u>
SERFF Tracking #:	<u>CAPD- 133641929</u>
Market Segment:	<u>Small Group</u>

CDPHP Universal Benefits, Inc. (CDPHP UBI) offers EPO, PPO and high deductible products on a community-rated basis to small groups.

CDPHP UBI has filed a request for approval by the New York State Department of Financial Services for a change to the premium for these products effective January 1, 2024. Policyholders will receive rate adjustments upon their renewal in 2024. The weighted average premium adjustment is 12.4%. 24,587 members and 14,785 policyholders are affected by this request.

As a not-for-profit health plan, CDPHP takes seriously its responsibility to control rising health care costs and be a good steward of your premium dollars. However, we cannot ignore the fact that CDPHP and its competitors are facing difficult financial headwinds, due in large part to rising hospital consolidation and staffing shortages, rapidly rising drug prices, particularly in the specialty drug market, as well as lingering effects from the COVID-19 crisis and pent-up demand for medical services put on hold during the pandemic.

CDPHP is working hard to alleviate these cost increases in a variety of ways, such as:

Enhanced CDPHP Pharmacy Strategy

- A new pharmacy benefit manager, CapitalRx, which catapults the CDPHP pharmacy strategy ahead of its competitors, ensuring quality, cost, access, and transparency for patients, providers, and small and large businesses.
- Expansion of our popular Rx for Less prescription drug savings program which offers members access to dozens of generic medications for as low as a penny a pill. In 2023, the program doubled in size with the addition of many new national, supermarket, and independent pharmacies offering this money-saving program.
- The opening of two independent retail pharmacies, CDPHP ConnectRx, which offers high-touch customer service and free at-home delivery services.
- CDPHP ConnectRx, On the Go, a pharmacy app that gives members the power to switch pharmacies and find prescription savings from the palm of their hand.

Partnering with Provider Community

- An innovative partnership with Community Care Physicians, which will decrease the administrative burden on physicians and result in more coordinated, comprehensive, and cost-effective care for patients.
- Paying providers for quality, not quantity, through our nationally recognized Enhanced Primary Care program, which has not only reduced the costs, but increased the quality of care our members receive.

- Our innovative Hospital to Home program, designed to improve our members' experience of inpatient hospital care, all while reducing costs and avoiding unnecessary readmissions.

Innovation

- Expansion of no and low-cost telemedicine options to improve speed to medical and behavioral health care services.
- The addition of new virtual behavioral health care platforms that provide members with quick and affordable access to mental health and substance use services.
- CDPHP Price Check, an innovative cost transparency tools that provide members estimated costs on a range of health care services and prescription drugs.
- Movement of services to more cost-effective outpatient settings, such as freestanding surgical centers.
- Establishment of a virtual cardiac rehabilitation program that significantly reduces the likelihood of a subsequent cardiac event and costly hospital readmission.
- Case management and medication therapy management services, available at no out-of-pocket cost.

The 2024 expected change in medical and pharmacy costs due to trends is +8.2%.

Federal Risk Adjustment is a program that requires insurance carriers with low-risk members to pay into a fund that covers high-risk members. As a result of an anticipated receivable into this program, the rates have decreased; -0.9%.

CDPHP UBI is required by New York state insurance law to meet a minimum medical loss ratio (MLR) standard of 82%. This means that 82% of premiums must be used to cover health care costs. CDPHP UBI will maintain this minimum requirement in 2024 with an MLR of 82.0%