State: North Carolina Filing Company: Oscar Health Plan of North Carolina, Inc.

TOI/Sub-TOI: HOrg021 Individual Health Organizations - Health Maintenance (HMO)/HOrg021.005D Individual - HMO

Product Name: Oscar NC 2026 Individual Rates

Project Name/Number: /

### **Table of Contents**

**User Usage Agreement Attachments** 

Usage Agreement.pdf

State: North Carolina Filing Company: Oscar Health Plan of North Carolina, Inc.

TOI/Sub-TOI: HOrg02I Individual Health Organizations - Health Maintenance (HMO)/HOrg02I.005D Individual - HMO

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## Filing at a Glance

Company: Oscar Health Plan of North Carolina, Inc.

Product Name: Oscar NC 2026 Individual Rates

State: North Carolina

TOI: HOrg02I Individual Health Organizations - Health Maintenance (HMO)

Sub-TOI: HOrg02I.005D Individual - HMO

Filing Type: 2026 Plan Year ACA Single-Risk Pool Rate Filing

Date Submitted: 05/16/2025

SERFF Tr Num: OHIN-134537981

SERFF Status: Closed-(RAP)Rate Approval

State Tr Num: OHIN-134537981
State Status: (RAP)Rate Approval

Co Tr Num:

Effective 01/01/2026

Date Requested:

Author(s): Jessica Saulo, Frank Chen, Shanghao Zhong, Nathaniel Dixon

Reviewer(s): Mary Jo Wegenast (primary), Becky Thornton, Pat Lee, Mike Wells, William Ju, Heir Cooper

Disposition Date: 08/13/2025

Disposition Status: (RAP)Rate Approval

Effective Date: 01/01/2026

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### **General Information**

Project Name: Status of Filing in Domicile:
Project Number: Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual

Submission Type: New Submission Individual Market Type: Individual

Overall Rate Impact: Filing Status Changed: 08/13/2025

State Status Changed: 08/13/2025

Deemer Date: Created By: Nathaniel Dixon

Submitted By: Nathaniel Dixon Corresponding Filing Tracking Number: OHIN-134510605

PPACA: Non-Grandfathered Immed Mkt Reforms

PPACA Notes: null

Exchange Intentions: No

Filing Description:

This submission represents the 2026 individual market rate filing for Oscar Health Plan of North Carolina, Inc for both on and off exchange.

Please do not hesitate to reach out with any questions, concerns, or requests for additional information. We sincerely look forward to hearing from you.

# **Company and Contact**

#### **Filing Contact Information**

Jessica Saulo, Associate Actuary jsaulo@hioscar.com 75 Varick Street 917-915-8090 [Phone]

5th Floor

New York, NY 10013

### **Filing Company Information**

Oscar Health Plan of North CoCode: State of Domicile: North

Carolina, Inc. Group Code: Carolina

75 Varick St Group Name: Company Type: FL 5 FEIN Number: 84-4470932 State ID Number:

New York, NY 10013

(646) 403-3677 ext. [Phone]

State: North Carolina Filing Company: Oscar Health Plan of North Carolina, Inc.

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# **Filing Fees**

#### **State Fees**

Fee Required? No Retaliatory? No

Fee Explanation:

# **State Specific**

Please Review General Filing Instructions For North Carolina Before Transmittal or Component Headers Are Completed: Completed

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# **Correspondence Summary**

**Dispositions** 

Status	Created By	Created On	Date Submitted
(RAP)Rate Approval	Mary Jo Wegenast	08/13/2025	08/13/2025

State: North Carolina Filing Company: Oscar Health Plan of North Carolina, Inc.

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## **Disposition**

Disposition Date: 08/13/2025 Effective Date: 01/01/2026 Status: (RAP)Rate Approval

HHS Status: Not Reported

State Review: Reviewed by Actuary

Comment: Based upon the Department's review and analysis of the above captioned submission, the rate filing is found to meet the applicable standards for a non-grandfathered ACA-compliant single-risk pool rate filing submission. Therefore, pursuant to authority granted under state law, the revised rates are approved for use in this State as of the date of this communication. Rates are approved for new issue or renewal effective dates on or between January 1, 2026 and December 31, 2026. These premium rates are guaranteed to the policyholder for twelve (12) months from the new issue or renewal date of the policy as provided in state law.

As required by federal regulation, NCDOI will make a uniform, public release of the final approved change in rates for all 2026 plan year non-grandfathered ACA-compliant annual single-risk pool rate filing submissions no later than the first day of open enrollment in the individual market, i.e., November 1, 2025. Should the Department choose an earlier uniform release date, prior notification of the release will be provided to impacted insurers as well as CMS/CCIIO.

Records retained by the Department may include filing history and materials revised during the review process, some of which may have been filed as trade secret confidential under state law.

Because the company has marked the Company Rate Information located on the Rate/Rule Schedule as confidential/trade secret, as permitted under G.S § 132-1.2 and as defined in NCGS § 66-152(3), this approval/acceptance does not contain that information. You will receive through a protected Note to Filer in SERFF a private approval/acceptance of this rate filing. That communication will reference the information contained on the Rate/Rule Schedule and include specific approval/acceptance of percentage changes in rates. Insurers should retain both the public and private communication as record of the Departments action.

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access	
Rate	Policy Form	Policy Form		
Rate	Policy Form		Yes	
Rate	Policy Form		Yes	
URRT	Consumer Justification Narrative	Consumer Justification Narrative		
URRT	Other Supporting Documents	Other Supporting Documents		
Supporting Document	Trade Secret Memorandum		Yes	

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ScheduleSchedule ItemSchedule Item StatusPublic AccessSupporting DocumentConfidentiality AcknowledgementYes

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### Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Policy Form	OSC-NC-IVL-EOC-2026-[HIX]		Previous State Filing Number: OHIN-134097921 Percent Rate Change Request: 0.03	

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## **URRT**

### **State Determination**

Review Status:	Complete
Determination:	Not Unreasonable
Comments:	The North Carolina Department of Insurance NCDOI has determined that the approved rate increases are not unreasonable, satisfy all requirements of North Carolina and other Federal law, and that the approved rates are adequate, not excessive, and not unfairly discriminatory. The overall average threshold rate revision is equal to plus 16.88%. At the plan level, the rate revisions vary from plus14.29% up to plus24.44%. Majority of renewing plans have rate increases which exceed the plus 15% threshold. NCDOIs decision was based upon the following: The base period historical data used by the company underlying the proposed rate increase is the North Carolina individual experience for January 1, 2024 through December 31, 2024. The filing complies with North Carolina laws and regulations, other Federal laws, and applicable Actuarial Standards of Practice. The benefits provided are reasonable in relation to the approved premiums charged. The insurers assumptions used in projecting costs are reasonable, including annual trend assumptions. The approved rate increase is not unreasonable based upon the expected claim payments, administrative expenses, and margin. The block loss ratio is expected to exceed the 80% Federal MLR requirement. NCDOIs determination included consideration of the following factors, as applicable Past claims experience Increased morbidity resulting from regulatory changes Previously approved historical rate increases Medical unit cost trend changes Changes in utilization of services i.e., hospital care, pharmaceuticals, doctors office visits Trend leveraging Changes in statewide market risk profile Changes in enrollee risk profile Changes to benefit plan design Changes to induced utilization factors Rev. 6-21-12 Changes to provider network factors and delivery system changes Changes to geographic area factors Risk Adjustment Impact of over- or under-estimate of medical trend in previous years on the current rate Reserve needs Administrative costs related to programs that improve health care quality
Review Submission Date:	08/13/2025

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## **URRT Items**

Item Name	Attachment(s)
Consumer Justification Narrative	
Other Supporting Documents	

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# **Supporting Document Schedules**

Satisfied - Item:	Trade Secret Memorandum
Comments:	
Attachment(s):	2026 NC Trade Secret Memo Signed.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Confidentiality Acknowledgement
Comments:	
Attachment(s):	2026_NC_Confidentiality_Acknowledgement_Signed.pdf
Item Status:	
Status Date:	

State: North Carolina Filing Company: Oscar Health Plan of North Carolina, Inc.

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# **Superseded Schedule Items**

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

	Schedule Item			Replacement	
Creation Date	Status	Schedule	Schedule Item Name	Creation Date	Attached Document(s)
05/27/2025		Rate	Policy Form	06/02/2025	
05/16/2025		Rate	Policy Form	05/27/2025	