STATE OF VERMONT GREEN MOUNTAIN CARE BOARD

DOCKET NUMBER 9-18-rr

IN RE: BLUE CROSS BLUE SHIELD OF VERMONT 2019 VERMONT INDIVIDUAL AND SMALL GROUP RATE FILING

August 1, 2018 1:05 p.m.

109 State Street Montpelier, Vermont

Continued Rate Review Hearing held before the Green Mountain Care Board, at the Pavilion Auditorium, 109 State Street, Montpelier, Vermont, on August 1, 2018, beginning at 1:05 p.m.

PRESENT

BOARD MEMBERS: Kevin Mullin, Chair

Jessica A. Holmes, Ph.D.

Robin Lunge, JD, MHCDS via phone

Maureen Usifer via phone

Tom Pelham

STAFF: Judy Henkin, Esq., Hearing Officer

Sebastian Arduengo, Staff Attorney Susan Barrett, JD, Executive Director

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MR. MULLIN: With that the next item on the agenda I'm going to turn the meeting over to our Hearing Officer Judy Henkin for the Blue Cross Blue Shield docket.

MS. HENKIN: Thank you. As some of you may remember we recessed this hearing so we could take account of some of the outstanding items that we were awaiting some information regarding the amendment to the filing that Blue Cross had and we also had some questions I believe. We have an outstanding motion. We are on the record with a court reporter so this is transcribed again. It's Docket 009-18-RR and the prior day's hearing was on the 23rd of July.

This is mostly for formalities. We have Jay Angoff on the phone, correct?

MR. ANGOFF: Correct. Thank you.

MS. HENKIN: Attorney Angoff, we have had a discussion about how today should proceed at least in part. What I would like to do at this point is go ahead and I'm going to give each party an opportunity to do a closing statement, but first I want to note that we did receive an addendum to the L&E report which is from our actuaries and that came in yesterday and has been provided to the parties.

That is part of the record under the rule Section 2.403 and each of the members have been provided that, and I believe all the parties have that at this point. We also have an outstanding motion to take administrative notice that was filed about one item that was not agreed to and that motion was filed by the HCA's Office. We did not get a response on that and Attorney Hughes represents Blue Cross Blue Shield. Are you going to contest the motion?

MS. HUGHES: We are not going to file a formal opposition to the motion. If the Board after applying Vermont Rule of Evidence 201 and 3 V.S.A. Section 810 Subsection 4 on administrative notice in administrative hearings, if the Board does admit it as administratively noticed, and if the Health Care Advocate mentions it in their memorandum, then at that point Blue Cross will determine if it will reply to whatever is in their memorandum.

So long story short we will not file a formal opposition with the Board.

MS. HENKIN: Attorney Angoff, do you want to make your case for having the Board take notice of that document?

> MR. ANGOFF: Yes. It's of a nature

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that's generally reliable. I don't see any -- I just don't see any valid objection to the Board taking official notice of it.

MS. HENKIN: As you probably all know we did take notice of the -- that item in the MVP case and we will do so again and we'll give it the weight that it should be afforded if it is used in the memos or in the record.

There was also discussion that we have moved some dates to accommodate the parties and the Board to get this decision done. There's a new scheduling order that has the memos are due this Friday late afternoon from the parties. The Board, due to also having all this new information, the memos, is moving the date on which it will issue its decision to no later than the 15th of August and that's under the authority in statute that's in Section 4062 allows for up to 30 days, and the Board has decided that they will -- (interruption) -- and with that so the Board will issue a decision by August 15th.

Are there any other matters that need to be closed at this time?

MS. HUGHES: Yes.

MS. HENKIN: Would you like to step up

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to the mike so we can get that also on our tape? MS. HUGHES: Okay. So with respect to the L&E report, the addendum to the report, you said it was part of the record. I'm assuming that means in translation that it is admitted into evidence? MS. HENKIN: I will formally admit it into evidence at this time, yes. Under our rule it goes on the record and can be considered by this Board. MS. HUGHES: Thank you, and Blue Cross would like a copy of L&E's independent analysis for its conclusion on page 3. That was not attached and we would like to see that and not -- I don't mean to hold up the adjournment or anything like that, but we're making a request to see that independent analysis.

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The other thing is given the massive set of facts that we're dealing with in this docket we would request a page extension or enlargement to 15.

I don't think we're going to need it, but we would like to not have to lop off the last page or two just because it didn't meet the page limitation.

MS. HENKIN: Thank you. I'll let the HCA respond to each of those requests.

MR. ANGOFF: It will make it a little

easier for us too if the page limit were extended a little bit. On the other hand, I think in general things get better when you can shorten them. So I'm satisfied with the 12-page limit and would commit to a 10-page limit.

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MS. HENKIN: I'm not going to rule on the request for the independent analysis because I have not reviewed that to see exactly what you're looking for there. You can make that request in writing to the Board this afternoon after the hearing, if possible, and we'll consider that.

As far as the page limit I'm not happy to read an extra 10 pages in total and I think the Board if we ended up with 10 pages for each of us that's a lot, but I will grant the request if you need to file as long as it's not single spaced with tiny margins that should be fine. If you don't have to use all that space, I also agree concise is usually better. So I'll grant the request for the enlargement of the length of the brief and will hold on the independent analysis that you're looking for.

MS. HUGHES: Thank you, and we do not intend to do a closing argument. We will put our thoughts in writing in the memorandum that we will provide to the Board on Friday.

1 MS. HENKIN: Thank you. Attorney 2 Angoff, did you want to do a closing? I see Rick is 3 getting up so we'll have Attorney Schulteis --MR. SCHULTEIS: Jay Angoff is going to 4 5 do the closing. You asked us to go up. MS. HENKIN: That's fine. Please. 6 7 MR. ANGOFF: I would like to make just a few points. First --8 9 MS. HENKIN: Attorney Angoff, let me 10 just tell you you're not coming in totally clear so if you could speak clearly and a little bit slower it 11 12 might be easier for the court reporter and for us to 1.3 understand what you're saying. 14 MR. ANGOFF: Okay. I will speak -- is this better? 15 16 MS. HENKIN: Yes. 17 MR. ANGOFF: Okay. Point number one, 18 the Trump tax bill provides enormous benefits to Blue 19 Cross. It is not something that Blue Cross is overly 20 eager to talk about, but it can't negate in the first year of 2019 under the Trump tax bill Blue Cross gets 21 22 a refund of 16.6 million dollars. None of that is 23 reflected in the schedule. None of that is reflected in the filing. If that entire 16.6 million were made 24

to the contribution to surplus, the contribution to

surplus could be reduced from 1.5 to a negative 2.5. 1 2 Now I can -- and reasonable -- Blue Cross's surplus 3 is certainly adequate. It's much higher than MVP's. It's within their range. It's much, much higher than 4 So we think that's 5 300 percent no action level. 6 reasonable, but you can also understand Blue Cross 7 wanting to add to its surplus, and so we think a reasonable accommodation would be to allow Blue Cross 8 9 to use some of that to increase its surplus, but also 10 to reflect some of that in the rate filing. We think 11 a 50/50 split is one obvious reasonable way to go. 12 So the rate filing will be reduced to a negative 0.5 1.3 and Blue Cross would have 1.3 million to add to its 14 surplus. That's point number one.

Point number two we think that the Blue Cross amendment that we were notified of at 6:46 p.m. last Wednesday which asks for an additional increase based on Blue Cross's desire to participate --

MS. HENKIN: The court reporter is having a difficult time to understand you. You may be too close to your phone. Sometimes you have a buzz in your voice and it was gone for a moment.

MR. ANGOFF: I'm sorry. How is this? Was that better or worse?

MS. HENKIN: I think the louder you get

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the more buzz we get so try it again.

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MR. ANGOFF: Okay. Point two, the Blue Cross amendment with respect to the increase is procedurally improper and wrong on the merits. The reason we believe that it's procedurally improper is that notice was given only two days before the hearing was scheduled. We believe that that's unfair.

Second, the statute -- neither the statute nor the reg has any provision for an amended filing, and to allow items this substantially negative in filings sets a terrible precedent. It would allow them in the future to only ask for a small increase in their initial filing and then wait for two days before the hearing on that filing to file an amendment. It just -- it severely interrupts the process so I think it sends a terrible precedent. It is unfair. It's not authorized by the statute.

Second and maybe even more important in this picture show is that it goes on the merits -- it goes in exactly the opposite direction where Vermont health insurance policy has been going for the last 30 years. Vermont has been a leader. People have looked up to Vermont because it has been so good in implementing policies that spread risk widely. It's

one of the few states -- it was the first state to 1 2 enact community rating. It's one of the few states 3 that has combined individual and small group markets, and because it's done these things Vermont, even 4 5 though it's not a rich state, has one of the lowest 6 uninsured rates in the country, but the Blue Cross 7 amendment would go in exactly the opposite direction by segmenting the market, taking good risk out of the 8 9 risk pool consisting of the individual and small 10 group market, and it would force those individual and 11 small group policyholders to pay for Blue Cross's 12 increase the AHP market. We don't think that's good 1.3 policy. This Board has the expertise and the 14 authority over not just health insurance rates but 15 over health policy as a whole, and so we would ask 16 the Board to -- whatever it does to reject the Blue Cross AHP amendment. We would like to thank the 17 18 Board for its patience particularly on this call and also for giving us another two days to respond. 19 20 Thank you very much.

MS. HENKIN: Thank you.

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MS. LUNGE: Judy, sorry to interrupt, I wanted to let you know I am on the phone. This is Robin.

MS. HENKIN: Hi, Robin. So Member Lunge

is also on the phone and this matter is going to be closed now. We did close the public comment period although as we still receive them they are being reviewed by the members, and we will close the hearing with that. Thank you very much.

(Whereupon, the BCBS portion of the proceeding was adjourned at 1:20 p.m.)

<u>CERTIFICATE</u>

I, JoAnn Q. Carson, do hereby certify that I recorded by stenographic means the Green Mountain Care Board hearing re: 2019 BCBS Individual and Small Business rates, at the Pavilion Auditorium, 109 State Street, Montpelier, Vermont, on August 1, 2018, beginning at 1:05 p.m.

I further certify that the foregoing testimony was taken by me stenographically and thereafter reduced to typewriting, and the foregoing 11 pages are a transcript of the stenograph notes taken by me of the evidence and the proceedings, to the best of my ability.

I further certify that I am not related to any of the parties thereto or their Counsel, and I am in no way interested in the outcome of said cause.

Dated at Burlington, Vermont, this 2nd day of August, 2018.

JoAnn Q. Carson

Registered Merit Reporter

Certified Real Time Reporter

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